ANNUAL REPORT

1 October 2001 — 30 September 2002

Horizons

Global Leadership, Research & Development
Responsibilities & Best Practices in HIV/AIDS

Population Council
International Center for Research on Women
International HIV/AIDS Alliance
Program for Appropriate Technology in Health
University of Alabama at Birmingham
Tulane University
Family Health International
Johns Hopkins University

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HORIZONS PROGRAM

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I. INTRODUCTION & BACKGROUND

A. Summary Program Description

Initially awarded by USAID to the Population Council and its institutional partners in July 1997, the Cooperative Agreement for the program entitled *Global Leadership, Research & Development-- Best Practices in HIV/ AIDS* received a five-year cost extension during this period. Thus, the period covered by this report straddles two phases of the global HIV/AIDS operations research program known as Horizons: the end of phase one and the beginning of phase two. The purpose of this program is to conduct operations research to identify and develop best practices for preventing HIV/AIDS and/or mitigating their impact. The Population Council implements the Horizons Program in cooperation with numerous institutions around the world (see Annex A) and in especially close collaboration with the following Partner organizations:

- International Center for Research on Women
- PATH
- The International HIV/AIDS Alliance
- Tulane University
- Family Health International
- Johns Hopkins University

Overall Horizons Program objectives are to:

- Identify cutting edge issues
- Suggest refinements for existing programs and activities
- Propose innovative approaches that can be tested through field-based, program-oriented operations research
- Recommend demonstrated best practices for implementation and going to scale

Through operations research, Horizons seeks to address a wide variety of social, behavioral, and contextual issues that are critical to finding more effective responses to the enormous problems related to the HIV/AIDS pandemic. The Operations Research problem-solving process is comprised of five steps: problem identification and

diagnosis, strategy selection, strategy experimentation and evaluation, information dissemination, and results utilization.

Working in field settings with local research and service delivery organizations in Africa, Asia, and Latin America, Horizons staff test new program approaches to the prevention and mitigation of HIV/AIDS. With the epidemic expanding with each passing year and no cure in sight, finding cost and program-effective approaches to prevention and mitigation is an urgent need.

Over the past five plus years, Horizons implemented a research agenda that focused on a limited range of topics that could be addressed within the time frame and resources (financial and human) available. In selecting research topics, preference was given to intervention studies that compared two or more approaches to organizing program activities and delivering services. In addition, several diagnostic and evaluative studies were undertaken to generate information that could be used to design intervention studies.

The mandate of Horizons is to address operational, program, and policy-relevant issues related to HIV/AIDS that affect a relatively large geographic area, such as an entire country or region. Research topics of local interest that lack the potential to generate findings relevant on a broader scale are not undertaken. There is no specific geographic focus, but greater resources are directed toward Africa, followed by Asia and Latin America.

The operations research process cannot be considered complete until the findings from a study are dissemination to different audiences and efforts are made to utilize these findings for program improvement. During this period, a majority of studies begun in the first phase of Horizons were completed; reports on findings have been published in a number of different reports, research summaries, and newsletters. Findings have also been presented at international conferences such as Barcelona and at professional meetings such as APHA. While Horizons does not have the means or the mandate to put study findings into practice, we can and do work with agencies that implement programs to facilitate the utilization of study results. This is done in a variety of ways, including:

- Explaining implications of study findings in one-on-one meetings with program managers
- Involving key stakeholders throughout the research process
- Holding end-of-study dissemination seminars
- Organizing meetings with implementing agencies

B. Summary of Activities: Project Director's Assessment

Over the past 12 months, a number of Horizons studies were completed while others are in the final stages of data analysis and report writing. Findings of completed studies were published in reports and journal articles and presented at meetings and conferences (see Section II for a complete list of publications and presentations during

the reporting period). A summary of the findings from these completed studies and those nearing completion is presented below.

Brazil: Community Development Approaches to Sex Work. The primary goal of this study is to assess the role of community development approaches to sex work. The study design consists of a pre and post intervention impact evaluation, with a socio-behavioral survey among sex workers at baseline and 18 month follow-up (N=500 per round), and in-depth interviews at baseline and end of the project with sex workers (N=10), peer-educators (N=10) and other stakeholders such as service providers, business owners, police, and media (N=15). Community development- related measures include identity and self esteem, social integration, violence and discrimination, social exclusion, access to material resources, and participation in capacity and community building activities. Three outcomes of interest include condom use in commercial sex, exposure to violence, and health seeking behavior. Baseline findings indicate that levels of community development indicators such as social integration, social capital, and social inclusion are currently quite low among participating sex workers. However, many of these factors are significant predictors of public health outcomes. For example, sex workers who scored higher in terms of social capital were more than twice as likely to report consistent condom use with clients in the last four months (adjusted odds ratio of 2.34; CI 95%/1.12-4.90; P-value .02).

These findings suggest that there is ample opportunity for effective community/group level interventions, but there are challenges as well. The baseline research points to the novelty of the concept of community development for sex workers as a public health imperative and implies a major paradigm shift. Baseline data from this Horizons study were presented at the Barcelona AIDS conference and at national and regional levels. The final round of data collection is scheduled for November 2002, and a final study report is expected in early 2003.

Burkina Faso, Ecuador, India, and Zambia: A Diagnostic Study of Involvement of PLHA in NGO Activities. This diagnostic study was conducted in Burkina Faso, Ecuador, India (State of Maharashtra) and Zambia, and included a total of 745 respondents consisting of HIV-positive and negative staff and volunteers from 17 NGOs, HIV-positive and affected service users, relatives of PLHA involved in NGOs, and health workers, policy makers and community leaders. The study identified a typology of PLHA involvement that can be used by NGOs to understand how they involve PLHA and practical ways to enhance this.

Study results indicated that involvement overall has therapeutic effects for the PLHA involved. However, most effects of PLHA involvement depend on the way they are engaged in programs. Only formal involvement in service delivery and program management has substantial effects on the relevance and quality of services. The results from this completed study have been extensively disseminated through two oral and two poster presentations at the Barcelona AIDS conference, as well as through a Horizons research summary and through numerous additional presentations in Europe and the US.A follow-up study in Burkina Faso one year after the original study revealed

that all four NGOs had acted on the study findings to improve greater and more meaningful involvement of PLHAs.

Cambodia, Ghana, Brazil, Latvia: RTI Program Guidance Tool. The first phase of RTI Guidance Tool implementation has been carried out in all four countries involved in the field test. Recommendations for priority program activities to strengthen the national STI/RTI program are country-specific and range from increased involvement of the private sector providers (Ghana, Brazil) to adoption of national treatment guidelines (Cambodia) and development and strengthening of services specifically for women (Cambodia, Latvia). The implementation and evaluation of these recommendations is currently ongoing in Cambodia and Latvia, and soon will be in Ghana and Brazil.

While it is too early to assess the success of this means of strengthening national STI/RTI programs, it is noteworthy that participants in the field trial expressed great appreciation for this approach, which puts decision making in the hands of national and local program managers. The Tool is currently implemented in China; a number of other countries have expressed interest. A series of documents describing the Tool and the initial experiences is currently being reviewed and edited.

Cambodia: Svay Pak. Doctors Without Borders (Medecins sans Frontieres) implemented a series of interventions in the Svay Pak area of Cambodia. These interventions were intended to improve the lives of sex workers. Horizons evaluated the effect of these interventions. The interventions influenced the lives of the sex workers but the benefits were limited. There was no significant improvement in the sex workers' freedom of movement, the number of friends that they had or their ability to refuse clients not wanting to use condoms, however the relationship with other sex workers in their own brothels improved.

The debt-bonded context of sex work in Svay Pak places special constraints on the development of 'community' among the sex workers. The barriers to forming networks, even on a social level, are formidable. Competition between brothels keeps women isolated within their residential units, and the constant flux of migration limits opportunities for stable allegiances. The women are predominantly young, wholly dependent on their brothel owners, kept under careful supervision and allowed little mobility even within the locality. They are also at risk of arrest or violence during police raids. The lack of social structures at the community level, juxtaposed with individual disempowerment, mutually reinforce each other and limit the ability of Svay Pak sex workers to insist upon safer sex practices. Building a sense of community is places like Svay Pak, may be possible, however, working just with sex workers who wish to leave as soon as possible is unlikely to be successful. Instead, brothel owners and customers need to be targeted. The study has been completed and the final report will be completed by November

Dominican Republic: 100% Condom Use Program. The adapted 100% condom program in the Dominican Republic sought to evaluate the impact on HIV-related risk of two models of a 100% condom use intervention among establishment-based female sex

workers. A solidarity-based "100% condom use" model was implemented in Santo Domingo. This was compared to a combined solidarity and government policy model implemented in Puerto Plata. Both models were evaluated using data from pre- and post- intervention cross-sectional surveys, participant observations, and LCR testing for STIs among participating sex workers. Monthly cross-sectional data to monitor participating sex establishments' compliance with the intervention was also collected over the course of the one-year intervention to support pre-post evaluation findings. While positive change was documented in both cities for select study outcomes, statistically significant improvements in all study outcomes were observed among female sex workers in Puerto Plata where the integrated solidarity and government policy intervention arm was implemented.

For example, among participating sex workers in Puerto Plata, reported consistent condom use with all sexual partners in the last month increased from 44 to 66 per cent (p=.000); ability to reject unsafe commercial sex increased from 50 to 79.4 per cent (p=.000) and STI prevalence decreased from 28.8 to 16.3 per cent (p=.003). Environmental-structural interventions that combine institutional and community-based solidarity with government policy and regulation were effective in reducing HIV-related risk among female sex workers.

Plans are currently underway to undertake a national scale up of this integrated policy and solidarity model within the country with the support of the World Bank and USAID. The impact evaluation sponsored by Horizons is now complete and the final report is under review. Study authors are now preparing of a follow-up proposal to Horizons that will examine operation research questions related to the national scale-up as well as the impact of intensification of educational activities with male clients.

India: Scaling Up Care and Support in South India. The first component of this research, focusing on services provided by an NGO based in southern India, YRG CARE, sought to identify institutional costs in a number of areas. These include providing HIV/AIDS care and support to PLHA, household expenditure for care and support by PLHA and their families, quality of life of PLHA and their perspective on services provided by YRG CARE. Time-motion methodology indicated that while many of YRG CARE's services are operating at high levels of efficiency, some services are underutilized and thus incur high unit costs.

According to the analysis, increasing the client base will reduce the organization's operating deficit and help with longer-term sustainability. Household resources are often depleted on transportation and treatment before clients find YRG CARE, yet there is a willingness to pay more for the services provided. This may prove an important strategy for cost-recovery to the organization. Male and female respondents in every stage of illness reported improved quality of life as exposure to YRG CARE services increased.

The second component of the research involved a prospective comparative case study analysis of scaling up care and support in four additional sites in south India through a program of capacity building and small grants. The types and composition of scale-up

partners at the sites varied, providing an important natural experiment to indicate how the YRG CARE model is adapted in different environments. The study showed a shift in partner emphasis on clinical care initially to more attention to counseling and social support for clients. Importantly, the study found that strengthening care and support services in fact improves the coverage, quality and focus of prevention activities. The scaling up experiences demonstrated that much can be done to strengthen and expand care and support for PLHA that does not rely on external funding. For example, improving existing services, increasing referral and networking with other care providers, and mobilizing local resources through modest charges to clients, using a sliding scale depending on ability to pay. Data collection is completed and reporting of the results is underway. The Fall issue of Horizons Report will include an article focusing on the YRG CARE/Horizons study. Study findings were presented at oral and poster presentations at the Barcelona AIDS conference and at the USAID post-Barcelona dissemination event at the end of July.

India: YRG CARE Cost Study. In the South Indian city of Chennai, Horizons researchers found that during a six-month period, the median amount spent by PLHA and their households on the direct costs of their illness (both medical and non-medical expenses) was Rs. 6,000 or about US $122. Median household income during that period of Rs. 22,992 or $468. Of that amount, a median of 70 percent was spent on medical costs, with the remaining 30 percent used to pay for transport to reach services and food and lodging during the trip. One of the most striking findings of this investigation was the extent to which low-income households spend the highest proportion of their income—as much as 82 percent—on direct costs resulting from HIV/AIDS.

Kenya and Zambia: Mother to Child Transmission Studies. The governments of Kenya and Zambia are testing comprehensive packages of PMTCT services in antenatal clinics. The Horizons Program and its partners are supporting this pilot implementation by assessing the acceptability, operational barriers, cost, and impact of the services on mother-to-child HIV transmission, child morbidity and mortality, and maternal well-being. The major research activities are the establishment of record-keeping systems to track utilization of the various interventions, following a cohort of clinic users for 12-18 months, observation of quality of care, and an economic analysis of the intervention.

Since the introduction of PMTCT services into antenatal care services in pilot sites in Kenya and Zambia, approximately 12,000 women have received pretest counseling, two-thirds of women counseled have had an HIV tests and ARVS have been provided to one-third to three-quarters (depending on site) of women who learned they were HIV positive in antenatal care. This operations research study documents the challenges clinics with large client loads face to meet the demand for pretest counseling. The openness of the individual and the community to HIV testing and the ability to cope with a possible positive test result are also determinants of program utilization. Extensive community mobilization activities in one town in Zambia appear to be associated with a significant uptake of HIV testing among women who received pretest counseling. The Kenya PMTCT program is using a mix of AZT and nevirapine to maximize the

proportion of HIV-positive women who receive antiretroviral drugs at the critical time during late pregnancy and labor. We expect that the capacity of the clinic to provide services and client acceptability of PMTCT services will grow as the programs mature.

From the outset, program managers identified the need to involve male partners as a critical program element. An analysis of the cohort data from Kenya shows a significant increase in discussions about VCT and PMTCT with male partners by women who were exposed to the PMTCT program and significant increases in HIV testing among partners. Additionally, the PMTCT programs play a valuable role as entry points to care and support for HIV-positive women. In Zambia, for example, the program links clients with other programs that offer nutritional supplementation and provide prophylaxis for TB and other opportunistic infections, as well as to community organizations that provide counseling, economic support, and child care. Health workers who receive training and supplies for PMTCT feel newly empowered to improve conditions to benefit the health of women and children and have achieved new status among their clients and communities. Overall, the introduction of PMTCT services appears to have rekindled interest in lobbying for better quality antenatal and delivery care, and the programs in Kenya and Zambia are championing changes in policies, service delivery practices, and resource allocation.

The collection of data from a cohort of clinic attendees will conclude in December, 2002. Final reports on program feasibility and impact are expected mid-2003.

Madagascar: Approaches to managing STIs among sex workers. As a result of this study, and with the involvement of various stakeholders, a national policy for managing STIs among sex workers in Madagascar was developed. Stakeholders included the Ministry of Health, public and private sector health providers, pharmacists, NGOs and sex workers. The national policy is based on regular, voluntary visits to health care facilities by sex workers and uses a management protocol, consisting of history taking, physical examination, screening and presumptive treatment, to reduce the burden of STIs among sex workers. The study was conducted in three cities in the country, but the resulting policy is implemented nationally. A publication has been submitted to a scientific journal, and a full report is expected in the near future.

Nepal: Prevention of Trafficking and Care and Support of Trafficked Persons. The study found that in Nepal there is no clear, concise and consistent definition of trafficking. As a result, the links between trafficking and prostitution are not always clear. Often fear-based messages that stress the association between trafficking and prostitution with the risk of HIV infection lead to increased stigma for trafficked returnees and PLHA. 94 percent of interviewed adolescent girls reported that communities regard trafficked returnees with hatred. Efforts to prevent trafficking sometimes limit women's legitimate and voluntary migration for the purpose of seeking employment, thus compromising their rights to mobility and livelihood. Many NGOs encourage girls to stay in their villages to prevent trafficking but a high proportion (40 percent) of adolescent girls indicate that they would like to migrate out of their villages for economic reasons. Prevention messages that provide advice to be 'careful of strangers' do not include meaningful safe migration advice as adolescent girls more frequently implicated

community members (70 percent), relatives (58 percent) and family members (33 percent) as those responsible for trafficking rather than strangers (11 percent). Overall, the lack of impact assessment makes it impossible to assess the effectiveness of trafficking interventions. Essentially, no program evaluation or impact assessment of trafficking interventions has been carried out in Nepal.

The study findings suggest that a rights-based approach should guide policy and program responses to trafficking. Promoting safe migration instead of restricting it should be a key strategy of anti-trafficking efforts. This study also highlights the urgent need to develop and test impact indicators for trafficking interventions. The partner organization utilized study data and recommendations to develop and initiate a rights-based anti-trafficking program with a key emphasis on 'promoting safe migration' for adolescent girls and women. In addition, regional coalitions against trafficking and international organizations dealing with migration have also used the study recommendations to advocate for safe migration. Following the dissemination of study results, the Frontiers Program of the Council organized a three-day technical consultative meeting to initiate discussion on and development of evaluation methodologies and indicators to assess anti-trafficking efforts in South Asia.

Senegal: Men Who Have Sex with Men. Around the world, it's well known that men who have sex with men (MSM) are vulnerable to HIV infection. Yet in Africa they receive little attention in sexual health and HIV/AIDS programming and service delivery, largely because of a long history of stigmatization of homosexual activity across the continent. Little is known about their needs, their behaviors and attitudes, and their levels of knowledge about HIV and other STIs.

A recently completed study conducted in Dakar, Senegal, by the National AIDS Control Program (NACP), Cheikh Anta Diop University, and Horizons now throws valuable new light on this community. The research includes an ethnographic examination of the sociocultural context in which sexual behavior among men takes place as well as identification of the factors that place men at risk for contracting STIs, including HIV. That risk is in fact dangerously high. In their survey of 250 MSM in several Dakar neighborhoods, the research team found infrequent condom use—as low as 14 percent for receptive anal intercourse—during the last sexual encounter, despite frequent sexual activity. Most respondents also reported multiple partners, including women: of the MSM who had receptive anal sex with a man during the past month, 85 percent also had vaginal sex with a woman. Many MSM are involved in sex work, with 66 percent reporting that they'd received money at the time of their last sexual encounter. Such risk factors are compounded by low levels of knowledge about STIs, despite high general awareness of the existence of HIV. Few MSM respondents were able to recognize the major STIs and identify them as causes of the high prevalence of STI symptoms reported within the sample. Treatment is frequently delayed, self-administered, or neglected altogether, especially for STI symptoms in the anal area, which MSM fear will reveal their participation in highly stigmatized homosexual activity.

The research revealed an absence of prevention education, counseling, treatment programs, care and support, or other services in Dakar targeted to the needs of these

men. Deeply entrenched discrimination and constant harassment keep most MSM hidden, leading to low levels of self-esteem and little community advocacy. Such stigmatization exposes many of these men to the ongoing threat of violence, from stone throwing to beatings. Of the 250 MSM surveyed, 43 percent reported being victims of rape at some time in their lives—13 percent by policemen.

Release of the report—which outlines next steps to address unmet sexual health needs and priorities—has broken down apprehension about creating services for MSM. A consortium of NGOs and donors have formed a task force to develop practical and necessary interventions for MSM that include behavior change communication, capacity building of community leaders and peer educators, identification of service providers sensitive to the health needs of MSM, and creation of centers that are safe and comfortable where MSM can gather to exchange information. Researchers and others also plan to use study results to educate program managers and policymakers about the needs of MSM and the importance of reaching them with non-stigmatizing interventions.

South Africa: Addressing stigma and discrimination, care and support services for workers at ESKOM. A sample of 378 male employees at ESKOM, the South African electricity company, reported that in their experience stigma is manifested in different ways, such as: social isolation (73percent), rumors and gossip (49 percent), ejection from the home (33 percent), rejection by community (22 percent), and verbal abuse (18 percent). Their partners reported social isolation (65 percent), rejection (44 percent), gossip/rumors (40 percent), and verbal abuse (27 percent). Most women and a substantial proportion of men perceive more stigma and discrimination directed towards women with HIV/AIDS than men with HIV/AIDS. More than half of female respondents (58 percent) stated that a woman with HIV/AIDS is treated worse than a man with HIV/AIDS. More than a third of male respondents (37 percent) agreed. Two thirds of employees have heard about HIV/AIDS and know how it is transmitted . Overall, 48 percent of the workers had more than one sexual partner. Four fifths of the workers claimed to have changed their behavior since hearing about HIV . Three quarters of employees knew about places for HIV testing, but would prefer to be tested in a private facility. The preliminary findings from this on-going study suggest that stigma reduction activities in the workplace can be effective. The study also suggests that workplace HIV/AIDS programs should include care and support. The final data collection for this study will occur towards the end of 2002.

South Africa: Carletonville STI/HIV Prevention Project. The data collection in this study has been completed with the final of four cross-sectional surveys being completed in October 2001. The results of laboratory testing of biological specimens are now available and the final data sets are currently being analyzed for trend data, as well as significant associations within the annual surveys. Final data interpretation and reporting is expected by the end of the first quarter of 2003. Initial results suggest that, while condom use increased among sex workers and their male clients, overall rates of STIs and HIV infection remain high. A periodic presumptive STI treatment program may have resulted in reduced STI rates in a subset of the population. The mining companies involved in the study have expressed interest in continuing the intervention component

of the study. While local dissemination activities have taken place, a national level dissemination is foreseen for early 2003.

The end line surveys to determine the effect of interventions (peer education, improved STI management, including PPT) were completed by the end of 2001. However, the community and private sector (mines) continue to support PPT among commercial sex workers. Analysis of data for the wider community surveys and the nested qualitative studies on commercial sex workers and social capital commenced a few months ago. Results from the nested studies indicate that community social organizations play a great role in STI/HIV/AIDS prevention strategies. Further, the functional nature of sexual relationships between young people and miners were confirmed. A number of HIV projects in South Africa have expressed interest in using the Carletonville Project as a model for Private-Public Sector Partnerships. For example, an STI initiative set up by the Health Systems Trust is using the Carletonville STI project as a case study to derive lessons for wider application in other projects in South Africa. At the same time the project has been expanded to the neighboring district in Westonaria.

Thailand: Lampang Opportunistic Infection Study

A) Drugstore personnel intervention. The project focused on using a diagnosis flowchart and a training course as the main strategies to improve quality of care among non-trained drugstore personnel in Lampang province, Thailand. The original flowchart and training did not improve the drugstore staff's history taking or their ability to provide proper provision of medication. Just over 20 per cent of drug sellers, whether they had been exposed to the intervention or not properly asked simulated clients about their key symptoms in the baseline and intermediate rounds. On the basis of this information, the flowchart was redesigned to focus on mild to severe symptoms of the main OI cases that drug sellers usually see. Also, there were regular training opportunities designed to enhance the drug sellers' skills.

These two changes resulted in marked differences. In the impact round, the proportion of drug sellers exposed to the intervention who properly asked the simulated clients about their key symptoms rose to 54 per cent from 23 percent in the earlier rounds ($p < .001$), and although the drug sellers in the control area also improved it was not statistically significant (20 versus 43 per cent, $p = .098$). The proportion of drug sellers exposed to the intervention who properly (as indicated in the flowchart) asked about a symptom significantly increased (54 versus 75 per cent, $p = .015$), while no such change occurred in the control arm (57 and 60 per cent). Drugstore sellers' ability to provide proper medication for diarrhea improved but did not do so for other OI conditions. There was a significant improvement in the drug sellers' ability to provide the proper medications for diarrhea, increasing from 57 per cent in the baseline to 78 per cent in the impact round.

The study suggests that a diagnostic flowchart coupled with training and a series of newsletters to encourage the regular use of the flowchart can improve the history taking of OIs at drugstores.

B.) Family and community caregivers intervention. An intervention within the community among care givers of PLHA suggested that an OI manual accompanied with training can help to improve knowledge about OIs and emotional problems faced by PLHA for both family care givers and Village Health Volunteers after training. Family caregivers mean knowledge in the intervention increased over the three rounds from 19.5 to 23.2 and 24.2 ($p < .001$, maximum score was 31), while in the control area was no change (22.4 to 23.3 and 23.3 $p= .682$). The VHV knowledge increased from 12.6 to 15.6 and 15.6 ($p< .001$, maximum score was 20), while in control area was 14.0, 13.6 and 13.9). The study has been completed and the final report will be completed by November.

Thailand: School Based Program. The school based program on HIV/AIDS among college students successfully increased knowledge about HIV/AIDS and also changed attitudes about PLHA. However, the course tended to be more successful with females than males and also for those who had never had sex compared to those who were sexually experienced. Inexperienced sexually active female students with lower knowledge about the disease and with poorer attitudes about PLHA compared to other students gained more from the course. The changes in sexual behavior that resulted from "Teens on Smart Sex" also predominantly occurred among female students. The proportion of sexually active females who used a condom the last time they had sex increased significantly when measured immediately after the completion of the course. In round 1, 25 and 23 percent of sexually active female students had used a condom the last time they had sex in the intervention and control colleges respectively ($p= .701$). In round 2, the proportion of sexually active females using condoms the last time they had sex was 38 and 16 percent in the intervention and control colleges respectively ($p< .001$). But in round 3, it was 32 and 27 percent ($p= .294$). There was no such change for male students. It should be noted that a lower proportion of females than males were using condoms before studying the course. The study has been completed and the final report will be completed by November.

Thailand: TBCA. Companies that joined a program to implement a standard AIDS set of policies in the workplace substantially improved their workplace HIV/AIDS activities and policies during the course of the project. Between the two rounds of the study, 82 percent of companies improved on their evaluation score, 3 percent received exactly the same score as in round 1and 15 percent had a worse score. A greater proportion of AIA-client companies, which were able to gain a financial incentive, improved their accreditation score than those companies that did not have insurance with AIA. In round 1 there was no statistical significant difference between AIA-client companies and non-AIA-client companies in the evaluation score that they received, but by round 2, when companies insured by AIA were able to receive a financial reward 77 percent of them received a high score, compared to only 22 percent of non-AIA-client companies ($p< .001$). However, the project also demonstrated that it was not always easy to convince companies to join such a scheme and that the financial rewards were not the only factors motivating companies to improve their workplace policies.

For most companies the motivation for this improvement was not a financial incentive, as was assumed would have been the case at the start of this project, but was a desire to provide a service for their workers and to the community. This was the case for close to 60 percent of the companies that gave reasons for why they joined. TBCA has received notification from the Global Fund that they will fund a scaled up version of the ASO study. Data collection for this has been completed, though TBCA is still providing technical assistance to companies. The report is being written and will be completed by November.

Uganda and Kenya: Exploratory study on VCT and youth. Studies in Kenya and Uganda focused on youth and voluntary counseling and testing (VCT). In Kenya, a survey was completed among 105 HIV tested and 122 untested youth. In Uganda, the survey was completed among 135 tested and 210 untested youth. Findings revealed that 75% and 90% of untested youth in Kenya and Uganda respectively said they would like to be tested for HIV at some point. Counseling is the most valued part of HIV testing (70% in Uganda, 40% Kenya). Youth VCT centers need to have separate waiting areas where young clients will be separate from adults. VCT counselors need special training to develop youth counseling skills. The three factors that often prevent youth from seeking testing are: fear of positive results and other people finding out the HIV status of the person tested, low risk perception, and the cost for the test. The study findings suggest that there is a demand for and a need to implement and promote youth friendly VCT services and train providers in youth counseling. At both study sites, VCT youth centers have been introduced. A training youth counselors has been developed. In Uganda, there are plans to expand youth-friendly centers to several sites.

Uganda: Succession Planning Orphans Study. Key baseline findings from the Uganda study on orphan support and succession planning indicate that 29% of widowed women and 21% of orphans (aged 13-17) have experienced "property grabbing," that parental illness affects orphans and vulnerable children's (OVC) access to education before parents die (26% of older children say attendance suffered and 28% say performance suffered), that older OVC would like their parents to be open with them about being HIV positive, that most parents fear disclosing to their children, and that material assistance is the greatest need expressed in AIDS-affected households.

Key impact findings indicate that over a two year period, succession planning led to increases in the proportion of parents who appointed guardians (from 56 to 81%), disclosed their HIV-status (from 51-75%), and wrote wills (from 10-20%). There were similar, though less dramatic, increases in comparison areas where people heard about succession planning and demanded the similar services. These findings suggest a need to protect women's and children's property rights, to assist children affected by AIDS before their parents die, to foster adult-to-child communication, and to facilitate access to basic necessities. They also suggest that with support, HIV-positive parents in Uganda can overcome taboos about "planning for death" and put wills, guardians and other things in place to promote the future well-being of their children. Partly on the basis of these findings, the multi-country Hope for African Children Initiative builds on the Succession Planning model. Save the Children/UK and CARE/Australia have also

adopted this approach in some of their programs. A baseline report was produced in 2000. Impact analysis is now underway. A final report will be available early in 2003.

Uganda: VCT integration Study. Policy makers in Uganda and other countries have considered the integration of VCT with other services as a viable strategy to increase VCT effectiveness. This study aimed to test a minimal package of interventions that program managers and others in Uganda felt might possibly have some effect on increasing the integration of FP, TB, VCT, and CS services. The study has been completed and the findings presented as an oral presentation in Barcelona and the study report is being finalized.

The results are mixed. They suggest that there was some modest effect on integrating HIV into FP services. FP clients discussing HIV prevention with the provider rose from 12.7% (n=71) at baseline to 51.9% (n= 54) p=0.000) at follow-up. But there was no effect on increasing integration of FP into VCT. The study identified constraints to integration such as a high turn over of providers, which resulted in a replacement of those who had been trained in integration by new ones who had not been exposed. The main implication of this study is that VCT integration may require the development and sustenance of an "integration culture" in the institutions as a whole rather than only training the providers.

Since the study involved extensive review of VCT services it revealed many issues in service delivery that require policies and guidelines at a national level. Thus this study served as a catalyst for the MOH to take a systematic approach to VCT services. As a result a process to develop national VCT policies and guidelines has been initiated. Horizons plus other partners have been requested to provide technical assistance to ensure that the guidelines are evidence based. Positive and negative lessons learned while implementing the Horizons VCT integration study are likely to be used in the policy development process.

Vietnam: Construction Workers. Based on qualitative research with construction company managers (N = 12), a systematic process of involving managers from the beginning in plans for a peer-education based workplace HIV/AIDS program, and presenting the advantages of such a program in a formalized manner (and realistically addressing how peer educators can both act as educators and maintain their other duties), can be successful in motivating managers in Vietnam to approve of such programs. Having representatives from the Labor Union acting as coordinators of the peer education program was an additional motivation for managers. Initially, peer educators had poorer knowledge of HIV/AIDS than visiting health educators, and were much less comfortable discussing sensitive topics. (Analysis is limited to those health educators (n = 30) and peer educators (n = 45) that were continuously involved in the program).

After six months of training and exposure to the program, peer educators were more comfortable discussing sensitive topics than were visiting health educators, believed their efforts to be more influential in changing workers' behavior, and had equivalent levels of knowledge. A much lower proportion of peer educators than health educators

dropped out of the program. Many of the potential disadvantages of using peer educators rather than visiting health educators can be overcome through appropriate training and exposure to the program. Results of impact of intervention on workers are forthcoming.

The project has finished, the final report is being drafted, and a dissemination meeting is planned in Vietnam for early December. A Research Update report was published that summarized findings about how to motivate managers to participate in HIV/AIDS Programs. Other dissemination opportunities have included a poster presentation at the 14th International AIDS Conference in Barcelona, Spain.

Zambia: Ndola Demonstration Project (NDP). Knowledge of HIV status by pregnant women can help them take important decisions to protect themselves, their unborn babies and their spouses from HIV. However, there is little data documenting how women react to this knowledge. This study set out to deliver VCT and infant feeding counseling in MCH services of a rural Zambian setting where neither ARVs nor infant formula were available.

Preliminary findings from the study indicate that while the uptake of VCT in this community has increased from 5.3% (n= 202) to 15% (n= 317) it remains low because of service related constraints as well as lack of appreciation of benefits of VCT in the community. Exclusive breast feeding rates were high in this community and increased after the interventions. This suggests that knowledge of HIV status and information about MTCT did not cause women to avoid breastfeeding. In this community alternatives to breastfeeding are not affordable. There was also limited effect on condom use with partners. These data suggest that factors within the community such as a lack of resources for alternatives to breastfeeding, lack of power by women in relationships and lack of ARV may limit the scope of decisions that can be taken by women regarding HIV after they learn their HIV status. The study has been completed, preliminary findings were presented as a poster in Barcelona and the study report is being finalized.

Zambia: Youth Care and Support Study. To find out about young people's sexual behaviors and risk perceptions as well as their attitudes toward people living with HIV/AIDS (PLHA), the researchers selected 32 anti-AIDS clubs in four rural districts, about half school-based and half community-based, and collected quantitative and qualitative baseline data from 823 respondents (416 male and 407 female). Nearly four-fifths of males and 39 percent of females reported ever having sex. Concerning attitudes toward PLHA, almost 90 percent of both males and females agreed that PLHA deserve compassion and support; a similarly high proportion reported a high level of comfort with nonsexual contact with PLHA. About two-thirds of all respondents said they would feel "fine" about providing care and support to PLHA.

After the survey was conducted, training-of-trainers in care and support began for some 300 young people in two districts (clubs in the other two districts are serving as controls). Trained and equipped youth caregivers have now formed care and support

teams in their anti-AIDS clubs and have worked with village heads, local clinics, and hospitals to establish contact with PLHA and gain community support for their work. A study among 785 youth involved with 30 anti-AIDS clubs found that about 50 percent of club members have provided care to someone who is chronically ill. Seventy nine percent of male and 73 percent of female club members say they would be comfortable caring for PLHA. The 30 clubs each provide care for an average of 6 PLHA. Youth care givers linked to clinics/health centers are more likely to be knowledgeable about VCT, to refer clients and others to VCT centers and to use VCT services themselves. Regular visits by youth caregivers to PLHA homes has led to a better understanding of PLHA needs and greater support from family and community members. Involvement of community leaders enhances community acceptance of youth care and support activities. Intervention activities are potentially useful for reducing community level stigma faced by PLHA and their families. The findings from this study have led to discussions at USAID/Zambia to scale up this activity. A final report is being written.

Zimbabwe, Zambia, South Africa: Targeted versus General Interventions for STI Control. The data collection exercise for the 18 sites in Zimbabwe, South Africa and Zambia is now complete. Analysis of data will commence as soon as data from the laboratory analysis is available for all the sites. In August, an analysis plan was formulated, preliminary data analysis conducted and presented to stakeholders meeting in Harare.

Although no clear picture has emerged on the effect of targeted interventions compared to general education and communication both on STIs and behavior, some positive results can be seen from women in study sites in Zimbabwe. For instance, the prevalence of abnormal genital discharge decreased from 33 percent to 20 percent between the baseline and endline at sites that included targeted interventions with periodic presumptive treatment. For the same sites, genital ulcers halved from 6 % to 3 percent. More results are being awaited as the analysis progresses in the next six months and this will determine how different study sites upscale STI/HIV prevention activities and the broader application of the study.

Zimbabwe: Relationship Between Microfinance and HIV. The 1980s saw the birth of a global microfinance movement in the developing world. Since then, this anti-poverty strategy—providing affordable loans to small-scale entrepreneurs without access to traditional credit sources—has grown and flourished as it has benefited communities around the world.

But the past two decades have also marked the emergence and spread of HIV/AIDS in many of these same communities, often with profound economic effects. Understanding the complex relationship between microfinance services and the spread of the epidemic has thus become critically important. Can the disease weaken the viability and sustainability of microfinance programs by making it harder for affected borrowers to repay? On the other hand, can microfinance programs help mitigate the financial shock of HIV on families and communities?

A newly completed exploratory study conducted in Zimbabwe by Management Systems International (MSI) and Horizons is one of the first to rigorously examine the relationship between microfinance and households coping with chronic illness and death in a country with high HIV prevalence. By analyzing extensive quantitative and qualitative data, the researchers sought to determine the extent to which HIV/AIDS affects households and if microfinance programs help households to mitigate the economic impact of chronic illness and death. A second major study question focused on the effects of HIV/AIDS on the operations of the microfinance program itself. The researchers also solicited suggestions from microentrepreneurs and loan officers on measures that might be taken to lessen the negative impact of HIV on microfinance organizations and their clients.

The study centered on Zambuko Trust, a Zimbabwe NGO that provides credit and business management training. A survey in four major urban areas in 1997 and again in 1999 gathered information about household economics from 579 Zambuko clients and non-client microentrepreneurs (three-quarters of them female). Because of the sensitivity of asking about HIV/AIDS, the client and non-client households were categorized as affected or non-affected by HIV/AIDS according to proxy indicators, such as the chronic illness or death of an adult member or taking in orphans. In 1999, approximately 40 percent of both client and non-client households were thus categorized as possibly HIV-affected.

Study results suggest that these households are indeed negatively affected by chronic illness and death. In 1999, significantly fewer affected than non-affected households had moved out of poverty. The monthly income level for affected households was estimated to be Z$521 less than for non-affected households, with much of the difference attributable to lower microenterprise income. As expected, in 1999 the economic dependency ratio—the proportion of household members who are not economically active—was significantly greater among HIV-affected households (40 percent) than non-affected households (32 percent).

Participation in a microfinance program had some positive effects on affected clients and their households. Compared to affected non-client households, affected client households had a greater number of income sources (income “smoothing”) and practiced better financial management.

To lessen the impact of chronic illness and death on its operations, Zambuko instituted such measures as a mandatory insurance fee of 1 percent to cover the loan if the client dies. Suggestions made by microentrepreneurs and loan officers to mitigate the negative impact of HIV on microfinance institutions and their clients include shorter-term loans, voluntary funeral insurance, and more education on HIV-related topics.

In September 2001, representatives of microfinance programs and HIV/AIDS organizations and others met at a one-day forum in Harare to discuss study results. One valuable outcome is that the Zimbabwe Association of Microfinance Organizations agreed to facilitate further dialogue and collaboration between the microfinance and HIV/AIDS communities.

Zimbabwe: Male Involvement in Reproductive Health. Based on formative research (35 focus group discussions, and 30 key informant interviews) and base-line surveys (approximately 500 experimental and control couples), increased male involvement in their partner's reproductive health was of great interest to pregnant women, men, and ANC staff alike. However, there were also a number of barriers, including concerns about being involved in "women's" issues and the fact that nurses were not trained to work with men or couples. Men and women defined male involvement quite differently - with men focusing on financial support and women focusing on emotional support and assistance with domestic chores. Interventions to address male involvement should take into account of the different perspectives, needs, and skills of pregnant women, their partners, and ANC staff. Community outreach seemed to be very successful, with regular monitoring forms indicating that almost 2,000 male involvement promotion activities reached over 25,000 male and female contacts over 6 months, and an increase in male attendance at the ANC clinic was reported. In the clinic, an "enhanced" group education talk and new IEC materials - focused on male involvement and HIV/STI risk - reached all pregnant women in the experimental group, and the couple counseling component reached approximately 25% of the pregnant women. This is largely because many women did not return for additional ANC visits due to economic difficulties, but an additional challenge was that many counselors were lost over the study period due to transfers or leaving the country. At base-line, 17% of women and 21% of men had ever used a condom.

Because of study findings, some aspects of the intervention activities have been permanently adopted by the ANC services in the hospital (such as the enhanced group counseling sessions to include male involvement and HIV/STI risk, and the new IEC materials for male involvement), and appear to be sustainable. The project has finished, the final report is being drafted, and in-depth analyses of final results is underway.

C. Dissemination and Utilization of Study Findings

Horizons was recognized as having made excellent contributions to the international HIV/AIDS conference in Barcelona (July 2002). This was an important event, coming as it did at the end of the Program's first phase. Numerous Horizons research studies were disseminated through 12 oral presentations, 5 oral poster presentations, and 48 posters. In addition, thousands of hard copies of reports, research summaries, and research updates were distributed, as well as more than 3,000 copies of a CD-ROM entitled "Findings From The Field: A Compilation to Date of Publications on HIV/AIDS from Horizons and Partner Organizations, May 2002."

HORIZONS Impact Assessment

Horizons is actively working with Tulane University on a Project monitoring and evaluation system. At the midpoint in the five year project period of Horizons, Tulane conducted a survey among Horizons study monitors that examined issues of study development, implementation, dissemination and impact from the beginning of the project until April 2000. The survey was administered by e-mail, March-April 2000, to all

Horizons project monitors. The same survey was repeated in March 2001 and a third round was repeated in September 2002.

In the 2002 survey, project monitors for 33 studies under the Horizons Project responded to the questionnaire, as compared to 39 in 2001 and 43 studies in 2000[1]. Questionnaires were not completed for the non-study activities in the Horizons portfolio, which include workshops, capacity building activities (e.g., internship program) and the development of training curricula.

The survey focused on the questions related to the impact of HORIZONS studies in terms of changes in service delivery and policies, improvements in research capacity, and scaling up of programmatic approaches tested through HORIZONS studies.

The impacts reported to date relate to changes in service delivery or operational policy of the partner organization and improved capacity to conduct research in the partner organization. In addition, a number of studies have resulted in a scaling up of program approaches tested through HORIZONS studies. I some cases, discussions are ongoing with donors and other organizations on how to adapt or replicate approaches either within the same country or in other countries. In the coming years we will probably see many more instances of HORIZONS study results being replicated or scaled up.

The following are some examples of the effect of Horizons studies:

- **Burkina Faso PLHA involvement study:** Organizations who had participated in this study had increased the involvement of PLHA in service delivery and decision-making within their organizations. In a follow-up study it was found that the original PLHA study had a major impact on national HIV/AIDS policy, serving as a catalyst for its revision.

- **Dominican Republic 100% condom use study:** Plans to scale up nationally are currently under development with USAID and World Bank support.

- **Global Reproductive Tract Infection (RTI) Program Guidance Tool:** This strategic planning tool for delivering reproductive health services is being prospectively field-tested in four countries. Priority recommendations are now being implemented at the national level in Cambodia and Latvia; such implementation is being planned in Ghana and in Ceara State, Brazil. Other countries (including China) are interested in adapting the methodology.

- **India hospital study:** The educational materials coupled with training of health care personnel have led to institutional changes in HIV counseling practices, health care worker training and sensitization, and improved policies on HIV/AIDS in the participating hospitals in New Delhi. Also, the National AIDS Control Organization (NACO) in India was so impressed with the materials developed that they requested

[1] Seven studies that were completed as of the 2000 survey were not included and three new studies were added.

Horizons to print them in large quantities and distributed to AIDS Control Societies and Directorates of Health Services in each state.

- **India Sonagachi study:** The trained field investigators and research associates are now involved in providing support to other research activities undertaken by the organization. In addition, they have recently recruited the 'voluntary' research advisor (who participated in the design of the instruments and data analysis) in a full-time position as a Research Director.

- **India YRG CARE Study:** YRG has indicated that the results from the institutional costing have prompted it to revise its service delivery in the light of those findings. A presentation on this topic was made at the Horizons satellite session on economic aspects in Barcelona. YRG has now established its own in-house permanent research group to take on other research projects. The collaboration with Horizons helped to build their capacity in survey implementation and data analysis, as well as documentation efforts etc. YRG has contributed to a whole process spearheaded by the Alliance to consider scaling up. This included a series of regional consultations, and at the South Asia consultation YRG CARE participated. The Alliance and Horizons jointly undertook an initiative to review strategies and issues in scaling up NGO efforts on HIV/AIDS, and the dynamics and model of the YRG CARE strategy were a background inspiration.

- **Kenya Mother to Child Transmission (MTCT) Study:** The training curriculum and the evaluation procedures developed at the three UNICEF and Horizons sites are being used at 20 other MTCT sites in Kenya.

- **Kenya Voluntary Counseling and Testing (VCT) Assessment Study in Nairobi:** Requested by the USAID Mission and the Kenya National AIDS Control Program, this study was conducted in collaboration with FHI. It found that there were hardly any freestanding facilities for VCT in Nairobi, no guidelines on VCT, no standard training of counselors, and no care and support facilities for middle income Kenyans. These findings have influenced the following actions: FHI has established a VCT center of excellence at Kenyatta Hospital; several NGOs have set up 45 VCT centers in the country; the Government has committed to establishing VCT centers in half the district hospitals; the Government has published VCT guidelines.

- **Madagascar Sexually Transmitted Infection (STI) Management Among Sex Workers:** The study results were presented and discussed at a national stakeholders meeting, in which officials from the Ministry of Health, physicians and other health care workers, sex workers and researchers participated. A protocol for initial management of STIs and regular follow-up visits was developed in consultation and with consensus of all stakeholders. This is now being implemented at the national level, and includes mechanisms to ensure that appropriate drugs are available through both the public and private sector.

- **Mexico School-based Life Skills Study:** The student curriculum and training methods used in this study have now been introduced in 40 other schools in Morelos State and cover approximately 13,000 students.

- **Nepal Trafficking of Girls Study:** On the basis of the data from this study, The Asia Foundation, who worked with Horizons on this study, has developed a new project entitled "Combating Trafficking of Women and Children in Nepal." The focus is on a human rights approach to trafficking as recommended by the Horizons study.

- **Senegal Men who have Sex with Men (MSM) Diagnostic Study:** This study has generated considerable interest in country, at USAID and the national AIDS control program. On the basis of the findings from this study, which revealed that MSM face many barriers in accessing information about HIV/STIs and basic STI health services, USAID will support FHI to provide follow-up health services benefiting MSM. The study has also generated interest in conducting a similar diagnostic study in Kenya.

- **South Africa Carletonville Miners STI/HIV Study:** The project seeks to reduce rates of STIs and incidence of HIV infection in a gold mining area in South Africa, through a combination of behavior change interventions, condom distribution, STD syndromic management and periodic presumptive treatment of STIs among sex workers. Initially funded by DFID and managed from a research institute, the intervention is continuing, implemented by a newly established NGO, managed by a community board, and funded by the local health department and the local mining company. The mining company has committed to continuing the periodic presumptive treatment and expanding it to its other mining complexes.

- **Thailand Business Coalition Against AIDS:** As a result of participating in this study TBCA staff have increased their research capacity, ranging from data collection to the analysis of results. Also, TBCA with the Ministry of Labour and Social Welfare through the Global Fund are going to upscale the project to 25 provinces in Thailand. TBCA is also using the materials and ideas developed in this project with their sister organization, Asian Business Coalition on AIDS (ABC on AIDS) in projects in the Asian region.

- **Thailand Community Level Case Management of Opportunistic Infections:** The caregiver manuals developed for this study are now being translated for use in Indonesia, China and Latin America. This study also resulted in PATH adjusting its program. Based on baseline results PATH strengthened the intervention concerning attitudes towards living with PLHA. PATH modified the OI diagnostic flowchart and provided continuous learning to drug sellers to supplement the formal training. Intermediate results indicated that the formal training by itself was not working as planned. Also, PATH added support groups for caregivers, as it was found that these people were in need of support so to successfully care for their relatives. Further, PATH will scale up the intervention in Vietnam and lessons learnt during this project will be introduced into that project. The Lampang Provincial Health Office announced that it attends to scale up the project throughout the province. They have

scheduled in the 2002 fiscal year to train all provincial health officers on how to operate support groups for PLHA and their relatives and how to use the manual effectively.

- **Thailand School-based Life Skills Program:** The audio-computer-assisted for self-interview (ACASI) measurement technique used in this study has been utilized in other schools to measure drug use among students. The Ministry of Health has adapted the curriculum for use with other groups, and the Ministry of Education is planning to expand the program to other post-secondary schools in Thailand. In addition, the UNAIDS Country Program Advisor in Uganda wants to explore possible collaboration between the Uganda AIDS Commission, concerned UN agencies, and Horizons on a similar project.

- **Uganda Orphans Study:** The "succession planning" approach used in this study is listed in a document prepared by UNICEF and others as one of the key principles to guide programming for orphans and vulnerable children. It also appears as a "Best Practice" on the UNAIDS website with the Horizons research report listed as the source. PLAN International who collaborates with Horizons on this study, is planning to replicate the approach in other African countries and other agencies such as Save the Children are also planning to use the approach.

- **Uganda VCT integration study:** After the National dissemination of the outcomes of the study the National STD/AIDS program made a decision to develop national VCT guidelines. Horizons was asked to provide technical assistance. Results from studies such as this one will be used to shape the national VCT policies. The tools used for observation of the counseling sessions have been adopted and adapted for use in the PMTCT projects in Kenya and Zambia.

- **Uganda Youth and VCT Study:** The AIDS Information Center in Uganda has used the findings from the formative research to design and implement youth-friendly VCT services. They have developed a training manual on youth counseling and services and they are expanding their youth and VCT services to other centers. USAID Zimbabwe is also interested in this approach to VCT services for youth.

- **Zambia HIV and Infant Feeding Study – Ndola:** The USAID Mission wants to scale up this study activity, which is conducted in collaboration with LINKAGES, to three other districts. The Ministry of Health is also interested in scaling up the approach used by this study. The Mission has asked Horizons to estimate the cost of scaling up different models.

II. PERFORMANCE REVIEW

A. List of Technical and Analytical Documents and Presentations

PUBLICATIONS:

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PRESENTATIONS:

October 2001

Youth and Communication about HIV/AIDS by Ann McCauley, at APHA Conference, Atlanta, GA, October 22, 2001. Program Moderator

Strategies to improve the hospital environment for people living with HIV/AIDS (PLHA) in India by George, Bitra, Gilborn, L., et al. at the Sixth Annual Congress on AIDS in Asia and the Pacific in Melbourne, Australia. October 2001.

Influence of family and community in school attendance and performance of AIDS-affected children by Gilborn, Laelia at the Town Hall Meeting on Responding to the Education Needs of Children and Adolescents Affected by AIDS in sub-Saharan Africa in Washington, D.C. Sponsored by UNICEF, USAID, Peace Corps. October 23, 2001.

Children in AIDS-Affected Families in Africa by Laelia Gilborn at Tulane University School of Public Health and Tropical Medicine for a graduate course on the Social Impact of HIV/AIDS in New Orleans, La. October 12, 2001.

Motivating Companies to Participate in Workplace HIV/AIDS Programs: Construction Companies in Ho Chi Minh City, Vietnam By Bao, Vu Ngoc, Philip Guest, Julie Pulerwitz, Le Thuy Lan Thao, and Duong Xuan Dinh at the *Sixth International Congress on AIDS in Asia and the Pacific*. Melbourne, Australia. October 5-10, 2001.

Company response to HIV/AIDS: The Thailand situation by Guest, Philp, Srisuman Sartsara, Patchara Rumakom, Anthony Pramualratana, Suparat Suksakulwat,

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Prevention of trafficking and the care and support of trafficked persons: Intervention models in Nepal (Trafficking Study, Nepal) by Costello Daly C, Evans C, Bhattarai P, Mahendra VS at Sixth International Congress on AIDS in Asia and the Pacific, Melbourne, Australia. October 5-10, 2001.

Cost and burden of treatment for persons living with HIV/AIDS in South India (YRG Care Study, Chennai) by Duraisamy P, Costello Daly C, Verma P, Solomon S, Homan R, Priya S, Sathiyavan D, Mahendra VS, Castle C at Sixth International Congress on AIDS in Asia and the Pacific, Melbourne, Australia. October 5-10, 2001.

Estimating the cost of integrated prevention and care and support services: Sometimes more is less (YRG Care Study, Chennai) by Ganesh AK, Homan R, Duraisamy P, Solomon S, Sathiyavan D, Priya S, Franklin B, Castle C, Costello Daly C. at Sixth International Congress on AIDS in Asia and the Pacific, Melbourne, Australia. October 5-10, 2001.

Approaches to trafficking and HIV/AIDS: Lessons from Nepal (Trafficking Study, Nepal) by Costello Daly C, Sanghera J, Kapur R, Evans C, Bhattarai P, Mahendra VS. at Sixth International Congress on AIDS in Asia and the Pacific, Melbourne, Australia. October 5-10, 2001.

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The Stigma & Discrimination Portfolio at the Horizons Program by Pulerwitz, J. at HRSA, October 11, 2001.

Male Involvement in Ante-natal Care: Opportunity for HIV risk reduction? By Marindo, R., Pulerwitz, J., Weiss, E. Paper presented at the American Public Health Association Conference, October 21 - 25, 2001.

Power in Sexual Relationships: Fostering experimentation and change by Weiss, E., Pulerwitz, J., & Leonard, A. paper presented at the American Public Health Association Conference, October 21 - 25, 2001.

Challenges in measuring relationship power: The development and current applications of the Sexual Relationship Power Scale (SRPS) by Pulerwitz, J. Paper presented at the American Public Health Association Conference, October 21 - 25, 2001.

Do peers, adults, or a combination of both more effectively influence youth's AIDS-protective behaviors? By Pulerwitz, J. & Wolf, CR. Paper presented at the American Public Health Association Conference, October 21 - 25, 2001.

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The female condom in Svay Pak, Cambodia by Simon Baker, October 2001, Sixth ICAAP, Melbourne, Australia

The lives of sex workers in Svay Pak, Cambodia by Simon Baker, October 2001, Key Centre for Women's Health in Society, Melbourne, Australia

The Carletonville Intervention Project by Lewis Ndhlovu at the National Meeting no Sexually transmitted infections in the private sector, 30-31 October, 2001, Johannesburg, South Africa.

African Health Systems and their preparedness for HIV/AIDS Care and ARVs by Sam Kalibala at the Conference on Health Care for All organized by the Institute of Tropical Medicine. Belgium. October 2001

November 2001

International Nursing Models for Delivery of HIV/AIDS Services in Limited-Resource Settings by Ann McCauley: November 5-6, 2001, Washington, DC

Addressing Gender and Power in Young Adult Reproductive Health Programming by Ellen Weiss presented at the Focus End-of-project Conference, Washington, DC. November 19, 2001.

New Perspectives and Emerging Initiatives in HIV/AIDS by Andrew Fisher at a Congressional Briefing on November 16, Washington DC.

Voluntary Counseling and Testing (VCT) by Sam Kalibala at Regional Update: VCT Lessons Learned Workshop. Zimbabwe. November

December 2001

Working with Especially Vulnerable Young People. December 6-8, Brighton, UK. Dept. for Int'l Development 'Safe Passages to Adulthood' programme and World Health Org's Dept. of HIV/AIDS

Acceptability and Use of the Female Condom: Findings from Horizons Studies by Ellen Weiss presented at the USAID Female Condom Meeting, Washington, DC. December 18, 2001.

Pilot of a strategy to improve the hospital environment for people living with HIV/AIDS (PLHA) in India by George, Bitra, Mahendra, V., Gilborn, L., et al at the Fifth International Conference on Home and Community Care for Persons Living with HIV/AIDS in Chiang Mai, Thailand. December 2001. (Poster.)

Guardians' Needs and Capacity to Care for Orphans and Vulnerable Children by Kabumbuli, Robert, Gilborn, L., et al. at the XIIth International Conference on AIDS and STDs in Africa in Ougadougou, Burkina Faso. December 11, 2001.

Horizons Program and Operations Research by Andrew Fisher WHO/Frontiers meeting in Geneva on Operations Research, December 10, Geneva, Switzerland.

How Youth Learn and Decide about HIV Voluntary Counseling and Testing and Reproductive Health Services in Kampala, *Uganda* by Milka Juma at ICASA, Ouagadougou, December 2001.

Measuring Integration of HIV into FP and STD using observation checklists in 4 hospitals in Uganda by Drs Sam Kalibala, Dorothy Ngacha and Ruth Nduati at ICASA, Burkina Faso. December

Preventing Mother to Child Transmission of HIV: Results from Horizons Studies, by Naomi Rutenberg at Population Council board of Trustees, New York, December 5, 2001,

HIV/AIDS And Youth: Can We Avoid Catastrophy? By Karusa Kiragu at the XIIth ICASA, Burkina Faso, December 2001.

Gender differences in HIV/AIDS-related risk perceptions, and responsibility among rural Zambian youths by Mutale Chomba at the XII International Conference on AIDS/STD in Africa, Ouagadogou, Burkina Faso, December 2001.

Summary Report of the East and Southern Africa Stigma Consultation by Eka Williams at the XII International Conference on AIDS/STD in Africa, Ouagadogou, Burkina Faso, December 2001.

Mobilizing young people for the care and support of PLHA and orphans in Zambia (Poster) by Joseph Mostepe at the XII International Conference on AIDS/STD in Africa, Ouagadogou, Burkina Faso, December 2001.

Capacity Building in Peer Education for Youth by Joseph Mostepe at the XII International Conference on AIDS/STD in Africa, Ouagadogou, Burkina Faso, December 2001.

Involving young people in care and support in Zambia by Eka Williams at SWAA Conference, Kampala, Uganda, 9-13/12/01

January 2002

Research Priorities from an HIV Perspective by Ann McCauley at Family Health International YouthNet Research Priorities Meeting, North Carolina, January 7-8, 2002

Using Operations Research to Refine the Response to HIV/AIDS by Andrew Fisher at American University, January 30, Washington, DC

Quality of Counseling after introduction of Interventions to Prevent Mother to Child Transmission of HIV by Sam Kalibala at the University of Nairobi Collaborative Conference. January

Food Security and HIV/AIDS Programs, Meeting organized by Laelia Gilborn on January 31, 2002.

February 2002

Causes and Process of Trafficking: Experiences and Lessons from Nepal by Vaishali Sharma Mahendra presented at the Workshop - Women in Prostitution: A Multi Dimensional Approach of Intervention organized by: Centre for Womens' Studies and Development, Faculty of Social Sciences, Benaras Hindu University, Varanasi (Uttar Pradesh), India February 7, 2002

Scale Development for the Social Sciences by Pulerwitz, J. at training and brown bag at the Horizons Program, Population Council, February 12, 2002.

The Evolution of Research on Mother to Child Transmission (MTCT) of HIV in Kenya: from research to implementation By Sam Kalibala at Kenya Obstetric & Gynaecological Society Annual Conference. Kisumu. February

March 2002

Preventing Mother to Child Transmission of HIV: Results from Horizons Studies, by Naomi Rutenberg at Population Council, Johannesburg, March 6, 2002

Gender differences in HIV/AIDS-related risk perceptions, beliefs and practices among rural Zambian Youth by Joseph Mostepe at the Reproductive Health Priorities Conference, Drakensberg, South Africa, 25-29/3/01

April 2002

The utilization of epidemiological data for designing programs and evaluating HIV/AIDS: Gaps and possible solutions by Patchara Rumakom, Khon Kaen, April 3, 2002.

Two validity studies: a validity study for improving the MOPH HIV risk behavior sentinel surveillance system of Thailand and using ACASI for obtaining sensitive questions by Patchara Rumakom, Khon Kaen, April 4, 2002.

Assessing the Impact of Community Development on HIV-related vulnerability among female sex workers in Rio de Janeiro, Brazil by Paulo Telles at a brown bag presentation, Washington, DC, April 12, 2002.

Educating Youth about HIV by Karusa Kiragu at a training for teachers outside Nairobi, Kenya, April 2002.

Enhancing HIV counselling of TB patients: an example from Uganda by Samuel Kalibala at the Kenya Medical Association Scientific Conference, Eldoret, Kenya, April 25, 2002.

Implementing programs to prevent mother to child transmission: lessons learned by Samuel Kalibala and Ruth Nduati at the Kenya Medical Association Conference, Eldoret, Kenya, April 25, 2002.

May 2002

Responding to the HIV Epidemic: Comparing Youth Program Costs by Ann P. McCauley at the Global Health Conference, Washington, May 29, 2002.

Comments on Interventions and Policy on Adolescent Reproductive Health Services by Ann P. McCauley at the Population Association of America Conference, Atlanta, Georgia, May 10, 2002.

Understanding Perceptions of HIV Risk among Adolescents in KwaZulu-Natal, by Naomi Rutenberg, Kate Macintyre, Lisanne Brown, and Ali Karim at the Population Association of America, May, 2002.

Involving Men in Maternal and Child Health to Reduce HIV in Zimbabwe by Julie Pulerwitz at the Men & Reproductive Health Subcommittee of Interagency Gender Working Group quarterly think-tank meeting, Washington, DC, May 22, 2002

Enhancing Rigorous Study Designs by Julie Pulerwitz at the Horizons Partners Meeting, Washington, DC, May 17, 2002

HIV-related Stigma and Disclosure in South Africa by Julie Pulerwitz at the Global Health Conference, Washington, DC, May 30, 2002.

USAID Stigma Indicator Working Group results by Julie Pulerwitz, Lane Porter and Lisanne Brown, May 15, 2002

June 2002

Change to the epidemiological transition in Thailand due to HIV/AIDS: Implication for population and health policies by Patchara Rumakom, Pramote Prasartkul, Philip Guest, Varachai Thongthai and Sureeporn Punpuing, at IUSSP conference, Bangkok, Thailand, June 11, 2002.

Integrating Gender into HIV Programs for Youth by Ann P. McCauley at the WHO consultation on Integrating Gender Considerations into National HIV/AIDS Programmes, Geneva, Switzerland,
June 4, 2002.

Weaving HIV/AIDS Prevention into Family Planning Services: Experiences From Sub-Saharan Africa by Naomi Rutenberg at the National Family Planning and Reproductive Health Association National Conference, June, 2002

The Mira Newako Project: Prevention of HIV/STI Among Pregnant Woman and their Partner by Julie Pulerwitz, Ravai Marindo and Steven Pearson at a dissemination meeting coordinated with SAfAIDS, Harare, Zimbabwe, June 2002.

MOH Integration before study: Uganda VCT Integration Study by Samuel Kalibala at the National Dissemination Workshop, Kampala, Uganda, June 24, 2002.

Methodology: Uganda VCT Integration Study by Samuel Kalibala at the National Dissemination Workshop, Kampala, Uganda, 24 June 2002.

Objectives and Rationale: Uganda VCT Integration Study by Samuel Kalibala at the National Dissemination Workshop, Kampala, Uganda, 24 June 2002.

July 2002

Results of the HIV/AIDS workplace activities: Cooperation from private enterprises to solve HIV/AIDS by Anthony Pramualratana, Simon Baker, and Srisuman Sartsara, Chiang Mai, July 29 2002.

Results of the HIV/AIDS workplace activities: Cooperation from private enterprises to solve HIV/AIDS by Anthony Pramualratana, Simon Baker, and Srisuman Sartsara, Bangkok July, 30 2002.

School based presentation: Final results by Simon Baker, Srisuman Sartsara, Patchara Rumakom and Philip Guest in Bangkok to participating academics from the colleges involved in the study, July 2002.

Child prostitution in Northern Thailand and HIV/AIDS by Simon Baker at the IUSSP conference, Bangkok, Thailand, June, 11 2002 (poster.)

Involving young people in the care of PLHA in Zambia: Bridging the gap in community Care by Eka Williams at the 14th International AIDS Conference, Barcelona, Spain, July 9, 2002.

School programs in Mexico and Thailand increase condom use by Ann McCauley at the 14th International AIDS Conference, Barcelona, Spain, July10, 2002.

Meaningful involvement of people living with HIV/AIDS: positive and negative effects involvement in community-based programs by Christophe Cornu at the 14th International AIDS Conference, Barcelona, Spain, July 10, 2002.

The dynamics of self-help in Africa: What makes support groups of people living with HIV/AIDS sustainable or not by Christophe Cornu at the 14th International AIDS Conference, Barcelona, Spain, July 10, 2002.

Participatory approach to developing and implementing an interactive training module to sensitize health care workers on HIV/AIDs: Experiences from India by Bitra George at the 14th International AIDS Conference, Barcelona, Spain, July 2002.

Operationalizing an effective community development intervention for reducing HIV vulnerability in female sex work: Lessons learned from the Sonagachi Project in Kolkata, India by Nandinee Bandopadhyay at the 14th International AIDS Conference, Barcelona, Spain, July 11, 2002.

Strengthening HIV/AIDS care and support also improves prevention outcomes by Chris Castle at the 14th International AIDS Conference, Barcelona, Spain, July10, 2002.

What to consider before attempting to expand the impact of NGO action on HIV/AIDS by Jocelyn DeJong at the 14th International AIDS Conference, Barcelona, Spain, July 11, 2002.

Improving the life of people living with HIV/AIDS (PLHA) through a manual for home and community caregivers in Lampang, Northern Thailand by Patchara Rumakom at the 14th International AIDS Conference, Barcelona, Spain, July 9, 2002.

Strengthening non-medical caregivers to enhance early diagnosis and treatment of HIV/AIDS opportunistic infections by Tussnai Kantayaporn at the 14th International AIDS Conference, Barcelona, Spain, July 10, 2002.

Impact of a Succession Planning Program in Uganda as Indicated by Parents' Actions in Planning for their Children's Future by Laelia Gilborn at the 14th International AIDS Conference, Barcelona, Spain, July 8, 2002.

Gender Variations in Uptake of VCT Services Among Youth in Uganda by Milka Juma at the 14th International AIDS Conference, Barcelona, Spain, July 8, 2002.

Reported and observed HIV counseling by clients seeking Sexually Transmitted Disease, Tuberculosis and Family Planning services at various sites in Uganda by Sam Kalibala at the 14th International AIDS Conference, Barcelona, Spain, July 8, 2002.

The impact of voluntary counseling and testing and HIV awareness on shortening the duration from infection to HIV diagnosis in Thailand by Patchara Rumakom at the 14th International AIDS Conference, Barcelona, Spain, July 8, 2002.

From research "subjects" to "partners":getting the ethics right by Paolo Longo at the 14th International AIDS Conference, Barcelona, Spain, July 9, 2002 (poster presentation.)

"Teach a man to fish, you feed him for a lifetime": an approach for scaling up HIV/AIDS care and support by A.K. Ganesh at the 14th International AIDS Conference, Barcelona, Spain, July 8, 2002 (poster presentation.)

Should we tell the Children? Parental Disclosure and AIDS affected families in Uganda by Robert Kabumbuli at the 14th International AIDS Conference, Barcelona, Spain, July 8, 2002 (poster presentation.)

Validating Youth responses to UNAIDS evaluation tool for VCT services by Ann McCauley at the 14th International AIDS Conference, Barcelona, Spain, July 9, 2002 (poster presentation.)

Multiple Stakeholder participation in community based HIV/AIDS intervention and research projects, Lesson learned from South Africa by Lewis Ndlovu at the 14th International AIDS Conference, Barcelona, Spain, July 8, 2002 (poster presentation.)

Combining structural and community-based approaches reduces HIV/STI vulnerability among female sex workers in the Dominican Republic by Luis Moreno et al. at the 14th International AIDS Conference, Barcelona, Spain, July 2002 (poster.)

Structural interventions significantly increased protective behavior and STIs among establishment-based female sex workers in the Dominican Republic by Deanna Kerrigan et al. at the 14th International AIDS Conference, Barcelona, Spain, July 2002 (poster.)

Whose policy is it anyway?: Forging government-NGO alliances towards a 100% condom use policy in the female sex industry of the Dominican Republic by Bayardo Gomez et al. at the 14th International AIDS Conference, Barcelona, Spain, July 2002 (poster.)

Forgotten stakeholders: the role of non-sex worker employees in HIV prevention within female sex establishments in the Dominican Republic by Hector Jerez et al. at the 14th International AIDS Conference, Barcelona, Spain, July 2002 (poster.)

Monitoring HIV prevention in the female sex industry of the Dominican Republic: a new model of government-civil society partnership by Santo Rosario et al. at the 14th International AIDS Conference, Barcelona, Spain, July 2002 (poster.)

Assessing the impact of environmental structural interventions by Eva Roca et al. at the 14th International AIDS Conference, Barcelona, Spain, July 2002 (poster.)

The influence of gender and sexual orientation of people living with HIV/AIDS on their involvement in community-based programs in Ecuador by Norma Valesco et al. at the 14th International AIDS Conference, Barcelona, Spain, July 2002 (poster.)

Achievement Checklist Helps Hospitals in India to Establish Safer Working Conditions and Improved Services for PLHA by Laelia Gilborn et al. at the 14th International AIDS Conference, Barcelona, Spain, July 2002 (poster.)

Improving standards for confidentiality in recruiting People Living with HIV/AIDS(PLHA) for Research by Rupa Mudoi et al. at the 14th International AIDS Conference, Barcelona, Spain, July 2002 (poster.)

Factors affecting health seeking behavior of People Living with HIV/AIDS (PLHA) in New Delhi, India: Results of a qualitative study by Vaishali Mahendra et al. at the 14th International AIDS Conference, Barcelona, Spain, July 2002 (poster.)

Overemphasizing HIV/AIDS risk in anti-trafficking programs can contribute to increasing stigma and discrimination- Lessons form Nepal by Vaishali Mahendra et al. at the 14th International AIDS Conference, Barcelona, Spain, July 2002 (poster.)

Safe migration strategies urgently required for the prevention of trafficking in South Asia by Celine Daly et al. at the14th International AIDS Conference, Barcelona, Spain, July 2002 (poster.)

Assessing the contribution of social inclusion and community development in reducing HIV/STI-related vulnerability among female sex workers in Kolkata, India by Nandinee Bandopadhyay et al. at the 14th International AIDS Conference, Barcelona, Spain, July 2002 (poster.)

The cost and sustainability of care and support services for people living with HIV/AIDS in South India by A.K. Ganesh et al. at the 14th International AIDS Conference, Barcelona, Spain, July 2002 (poster.)

How people living with HIV/AIDS in South India cope with the costs of treatment by P. Duraisay et al. at the 14th International AIDS Conference, Barcelona, Spain, July 2002 (poster.)

Visible & Non-visible Involvement of PLHA in community-based programs in India: Dynamics of disclosure & impact on programs by Vilma Nadkarni et al. at the 14th International AIDS Conference, Barcelona, Spain, July 2002 (poster.)

Persistance of changes in attitudes and knowledge following a high-school intervention project in Mexico by Dilys Walker et al. at the 14th International AIDS Conference, Barcelona, Spain, July 2002 (poster.)

School prevention intervention project affects condom related attitudes and behavior by Martha Givaudan et al. at the 14th International AIDS Conference, Barcelona, Spain, July 2002 (poster.)

A School HIV prevention program confronts gender-based attitudes by Martha Givaudan et al. at the 14th International AIDS Conference, Barcelona, Spain, July 2002 (poster.)

Scaling up a school based HIV prevention program in Thailand by Srisuman Sartsara et al. at the 14th International AIDS Conference, Barcelona, Spain, July 2002 (poster.)

Changing values and use of condoms among Thai teacher college students after a sex education and HIV/AIDS course by Simon Baker et al. at the 14th International AIDS Conference, Barcelona, Spain, July 2002 (poster.)

The Relationships between AIDS Workplace Programs and Sexual Behavior Among Employees in the Workplace by Simon Baker et al. at the 14th International AIDS Conference, Barcelona, Spain, July 2002 (poster.)

Improving medical history taking and proper medication provision among non-pharmacist drugstore personnel in Lampang, Northern Thailand by Patchara Rumakom et al. at the 14th International AIDS Conference, Barcelona, Spain, July 2002 (poster.)

Promoting Dual Protection in family planning clinics in SW Nigeria by Joanne Mantell et al. at the 14th International AIDS Conference, Barcelona, Spain, July 2002 (poster.)

Of steady boyfriends, lunch boys and secret lovers: Secret partnerships among young people in South Africa by Lewis Ndlovu et al. at the 14th International AIDS Conference, Barcelona, Spain, July 2002 (poster.)

Who's Really at Risk for HIV: Exploring Risk Perception among Adolescents in South Africa by Naomi Rutenberg et al. at the 14th International AIDS Conference, Barcelona, Spain, July 2002 (poster.)

Evidence of Success in Increasing Male Participation & Support for the Prevention of Mother to Child Transmission of HIV in Kenya by Naomi Rutenberg et al. at the 14th International AIDS Conference, Barcelona, Spain, July 2002 (poster.)

Why do Women accept VCT during antenatal care: The experience from the PMTC program in Zambia by Chipepo Kankasa et al.at he 14th International AIDS Conference, Barcelona, Spain, July 2002 (poster.)

The Knowledge Attitude And Practice (KAP), Of Mother To Child Transmission Of HIVAnd Its Prevention Before And After Counseling For PMTCT In Two Kenyan Hospitals by Jennifer Oyieke et al. at the 14th International AIDS Conference, Barcelona, Spain, July 2002 (poster.)

Infant And Maternal Nutrition Education/Counseling And HIV Risk Reduction Counseling In An Integrated PMTCT Site by Ruth Ndati et al. at the 14th International AIDS Conference, Barcelona, Spain, July 2002 (poster.)

Quality Of Counseling In A Of Prevention Of Hiv-1 Mother To Child Transmission (PMTCT) Pilot Site In Kenya by Dorothy Mbori-Ngacha et al. at the 14th International AIDS Conference, Barcelona, Spain, July 2002 (poster.)

Reducing barriers between youth and VCT services in Uganda by Milka Juma et al. at the 14th International AIDS Conference, Barcelona, Spain, July 2002 (poster.)

Enhancing access to HIV/AIDS services: Linking business employees to NGO's in KwaZulu Natal, South Africa by Eka Williams et al. at the 14th International AIDS Conference, Barcelona, Spain, July 2002 (poster.)

Building the capacity of young people to care for PLHA and orphans and vulnerable children in Zambia by Eka Williams et al. at the 14th International AIDS Conference, Barcelona, Spain, July 2002 (poster.)

HIV/STI Risk and Health Seeking Preferences among Male Workers: Baseline findings and planned interventions by Rob Stewart et al. at the 14th International AIDS Conference, Barcelona, Spain, July 2002 (poster.)

Gender-related Aspects of HIV/AIDS Stigma and Disclosure by Julie Pulerwitz et al. at the 14th International AIDS Conference, Barcelona, Spain, July 2002 (poster.)

HIV/AIDS Stigma and disclosure in South Africa by Julie Pulerwitz et al. at the 14th International AIDS Conference, Barcelona, Spain, July 2002 (poster.)

Impact of Peer Educators versus Visiting Health Educators on Knowledge and Motivation of Peer Educators versus Visiting Health Educators for HIV Risk Reduction of Migrant Construction Workers in Vietnam by Dr. Bao et al. at the 14th International AIDS Conference, Barcelona, Spain, July 2002 (poster.)

The effects of integrated Prevention of Mother to Child Transmission services on preventive behavior among mothers in Ndola, Zambia by Ernest Muyunda et al. at the 14th International AIDS Conference, Barcelona, Spain, July 2002 (poster.)

Prevention of Mother to Child Transmission (PMCT) services linked to more contact time for clients in Zambian clinic by Charles Mwai et al. at the 14th International AIDS Conference, Barcelona, Spain, July 2002 (poster.)

Secondary schools improve Life Skills and HIV/AIDS Education in Kwa-Zulu Natal, South Africa by Lisanne Brown et al. at the 14th International AIDS Conference, Barcelona, Spain, July 2002 (poster.)

Challenges to social integration and solidarity among female sex workers and vulnerability to HIV and other STIs in Rio de Janeiro, Brazil by Helena Torres et al. at the 14th International AIDS Conference, Barcelona, Spain, July 2002 (poster.)

Beyond Health Promotion: Role of Capacity Building in and Social Inclusion in reducing HIV vulnerability among Brazilian female sex workers by Paolo Telles et al. at the 14th International AIDS Conference, Barcelona, Spain, July 2002 (poster.)

Evaluation of Program Guidance Tool by Sarah Hawkes et al. at the 14th International AIDS Conference, Barcelona, Spain, July 2002 (poster.)

Overcoming obstacles to the involvement of People living with HIV/AIDS in community-based programs in developing countries by Christophe Cornu et al. at the 14th International AIDS Conference, Barcelona, Spain, July 2002 (poster.)

Where promoting community identification and participation in community activities among sex workers may not be the answer to fighting HIV/AIDS: Working with debt-bonded sex workers in Svay Pak, Camodia by Panida Tienchantuk et al. at the 14th International AIDS Conference, Barcelona, Spain, July 2002 (poster.)

HIV Prevention Programs Can Reduce Stigma among Students by Holley Stewart et al. at the 14th International AIDS Conference, Barcelona, Spain, July 2002 (poster.)

Improving resource allocation decisions: Using the goals model to understand the effect of resource allocation patterns on the achievement of national goals for prevention and care by Lori Bollinger et al. at the 14th International AIDS Conference, Barcelona, Spain, July 2002 (poster.)

Cutting Edge Issues in HIV/AIDS Programming) by Milka Juma et al. at the 14th International AIDS Conference, Barcelona, Spain, July 2002 (*FHI Youthnet* satellite meeting.)

HIV/AIDS-related Stigma and Disclosure: Fresh Approaches and Lessons Learned from the Field, co-chaired by Julie Pulerwitz presented by Julie Pulerwitz, Bitra George, Vaishali Mahendra et al. at the 14th International AIDS Conference, Barcelona, Spain, July 2002 (USAID satellite meeting.)

Scaling-Up: Grounded Realities by Suniti Solomon, Jocelyn DeJong et al. at the 14th International AIDS Conference, Barcelona, Spain, July 2002 (Synergy satellite meeting.)

Economic Evaluations by Ann Levin, Rick Homan, Sam Kalibala, A.K. Ganesh, Bayardo Gomez, and Mike Sweat at the 14th International AIDS Conference, Barcelona, Spain, July 2002 (Horizons satellite meeting.)

International AIDS Economic Network: The Economics of HIV/AIDS in Developing Countries by Rick Homan et al. at the 14th International AIDS Conference, Barcelona, Spain, July 2002 (satellite meeting.)

Scaling-up a Comprehensive Response to PMCT by Naomi Rutenberg et al. at the 14th International AIDS Conference, Barcelona, Spain, July 2002 (satellite meeting.)

Scaling-up Care and Support in South India by Chris Castle at the Post-Barcelona Wrap Up Meeting, Washington, DC, July 31, 2002.

August 2002

From Research to Practice: Using Research for Strategic Planning and Program Improvement by Andy Fisher at the University of Washington, Seattle, Washington, August 8, 2002.

Young men's sexual health concerns and prevention of HIV/STD in India: A cultural approach, by Ravi Verma at A Cultural Approach to HIV/AIDS Prevention and Care organized by UNESCO/UNAIDS New Delhi, India, 21-23 August 2002.

Promoting Gender-Equitable Relationships to Reduce HIV Risk: Study Overview and Development of the Gender-Equitable Men Scale by Julie Pulerwitz at the Young Men as Allies in Reproductive Health and Gender Equity Conference, Rio de Janeiro, Brazil, August 2002.

Women and HIV/AIDS in Kenya by Karusa Kiragu at a training workshop for mothers in Nairobi, Kenya, August 2002.

September 2002

Effectiveness of a community based HIV/AIDS intervention and research project: an example from Carletonville, South Africa by L. Ndhlovu at The Social Aspects of HIV/AIDS Research Conference (SAHARA), Pretoria, 1st - 4th September 2002.

Increasing access to care and support for PLHA: Building the capacity of youth care-givers in rural Zambia by E. Williams at The Social Aspects of HIV/AIDS Research Conference (SAHARA), Pretoria, 1st - 4th September 2002.

Strengthening workplace responses to HIV/AIDS by C. Searle at The Social Aspects of HIV/AIDS Research Conference (SAHARA), Pretoria, 1st - 4th September 2002.

Dealing with Burnout in VCT for Youth: Counselors' Perspectives by Edward Kirumira, Leonard Bufumbo, Nelson Kakande, Milka Juma, Scott Geibel, Ann McCauley, Josephine Kalule, Daniel Lukenge, Edith Mukisa, Godfrey Habomugisha at the Third International Counseling Conference, Nairobi, Kenya, September 5, 2002.

Support and Supervision to VCT Counsellors; A priority for improved quality of service delivery by Edward Kirumira, Leonard Bufumbo, Nelson Kakande, Milka Juma, Scott Geibel, Ann McCauley, Josephine Kalule, Daniel Lukenge, Edith Mukisa, Godfrey Habomugisha at the Third International Counseling Confererence, Nairobi, Kenya, September 5, 2002.

Community mobilization and building partnership with Community groups in Vaccine Research Trials by Ravi Verma at Building Consensus on Vaccine Development Access, and Deployment Conference organized by International AIDS Vaccine

Initiative (IAVI); National AIDS Control Organization (NACO), Indian Council of Medical research (ICMR), New Delhi, India, 5 September 2002.

The Basics of Operations Research by Julie Pulerwitz Susan Adamchak at the Data for Action: Using Data to Improve Child Health workshop coordinated by MACRO, Inc., September, 2002.

HIV-related Stigma: Understanding it, measuring it and developing appropriate programmatic responses by Julie Pulerwitz and Lisanne Brown at CCP/Johns Hopkins University, September, 2002.

PMCT Scale-up Experience of Uganda by Samuel Kalibala at the PMTCT Collaborative Evaluation Meeting, Washington DC, 9-10 September 2002.

VCT Ethical Challenges by Samuel Kalibala at the 1st Africa-Asia inter Action on AIDS Workshop, Bangkok, 25-26 September 2002.

B. Analytic Summary of Results Achieved by SSO4 Intermediate Result

IR 4.1. REDUCTION OF SEXUAL RISK: Increased quality, availability, and demand for information and services to change sexual risk behaviors and cultural norms in order to reduce transmission of HIV

Activity Location	***Activity Name, HZ Number, Effective Dates and Monitor***	***Expected Project Results***	***Results Achieved in Period Oct 1 2001 – Sept 30 2002***
Global	Assessment of status of research in relation to the male condom Horizons #103 09/00 – 3/03 Johannes van Dam	Identify gaps in knowledge with regard to the utilization of male condoms for the prevention of disease and/or pregnancy by various population subgroups; identify outstanding research questions. This activity will help identify critical research issues in male condom programming.	Report under review.
Brazil	Comparison of male and female condoms in preventing exposure to semen during typical use Horizons #52 08/99 – 07/02 Johannes van Dam	Assess user effectiveness of the female condom compared to the male condom in normal settings and appropriateness of package instructions included with male and female condoms.	Data interpretation workshop was held. Two publications are under preparation and will be submitted shortly. A final report is being prepared.
Brazil	Promoting more gender-equitable behavior among young men as a strategy for HIV/AIDS prevention Horizons #201 03/02 – 05/04 Julie Pulerwitz	Evaluate different approaches to reducing HIV/AIDS risk of young men and their partners via activities to promote equitable gender norms and behaviors; develop a scale to measure equitable gender norms.	Proposal developed and approved. Measure for equitable gender norms developed and validated. Baseline survey and qualitative research protocols developed and tested. Presentation on study given at Young Men as Allies in Reproductive Health and Equity Conference.
Dominican Republic	Establishing the efficacy of a 100 percent condom program Horizons #12 02/99 – 8/02 Ellen Weiss Johannes van Dam	Decreased STI incidence, increased access to condoms, increased regular condom use, increased knowledge about STIs including HIV, increased monthly attendance by CSWs at medical clinics. This study will reach sex workers and their clients in two key cities in the Dominican Republic: Santo Domingo and Puerto Plata.	Data analysis completed. Findings show significant decrease in STI prevalence (27.1% to 16.1%; OR 1.93; p<.001); Consistent condom use (CCU) with new clients rose to almost 100%; CCU with regular partners rose significantly (13.8% to 23.0%; OR 1.80; p=.005) as did CCU with all partners in the last month (33.6% to 45.1%; OR 1.62; p=.002). Greater changes in Puerto Plata (environmental + structural intervention) than in Santo Domingo (environmental intervention alone). Dissemination meeting (March) to discuss findings. Plans underway to scale up the intervention. Six posters presented at Barcelona Conference. Final report currently being reviewed.

Mexico	Programming for HIV prevention in Mexican schools Horizons #16 06/99—04/02 Ann McCauley	Identify effective school-based approaches to prevent or reduce STI and HIV transmission among in-school youth.	Fourth round of data collected and analyzed. Final report submitted. Program scale-up begun.
Nigeria	Promoting dual protection practices among women and their male partners in Ibadan, Nigeria Horizons #59 07/99 – 11/02 Ellen Weiss	Identify clinic and community-based approaches that result in increased protection against STDs and unwanted pregnancy among family planning clients, thereby contributing to reducing adult and perinatal HIV transmission.	The male involvement component is ongoing. Follow-up of the phase 2 cohort data has begun. Paper on the baseline findings published in the Journal of Urban Health and in International Family Planning Perspectives. One poster presented at Barcelona Conference.
Senegal	Reducing STD/HIV risk among pregnant women and their partners in Dakar, Senegal Horizons #90 10/99 – 12/01 Ellen Weiss Placide Tapsoba	Assess the feasibility of male involvement in antenatal care as a means of reaching pregnant women and their partners with information and counseling to reduce STD/HIV risk.	Findings from qualitative and quantitative data with pregnant women, their partners, ANC staff, and community informants revealed numerous sociocultural and service-related barriers to male involvement. Therefore a follow-on intervention study in Dakar was not conducted.
Senegal	Dissemination plan on STI/HIV Research Results in West & Central Africa Horizons #124 07/01 – 06/02 Ellen Weiss Placide Tapsoba	Increased awareness of Horizons study findings in French-speaking African countries.	Key documents translated into French and disseminated through regional network and at - ICASA, December 2001 - Barcelona, July 2002 - Conf. of Assoc. for Information & Health Libraries in Africa Sept 2002 Publications disseminated through RARS website: www.refer.sn/rars
South Africa	Programming for HIV prevention in South African schools Horizons #44 04/00 – 12/02 Ann McCauley Lewis Ndhlovu	Identify effective school-based approaches to prevent or reduce STI and HIV transmission among in-school youth. This project will reduce barriers to key information and service for youth.	Third round of data collected. Cost data collected. Analysis of earlier data continued. Results dissemination through papers presented at South Africa meetings.

Thailand	Programming for HIV prevention in Thai schools Horizons #17 05/99 -08/02 Patchara Rumakon Simon Baker	Identification of effective school-based approaches to prevent or reduce STI and HIV transmission among in-school youth. This project will reduce key information and service barriers for youth.	The impact evaluation report is in process. Scaling-up began and training of 80 teachers was conducted by PATH. Two posters and one oral presentation at the 6th ICCAP. Report produced: 'Reducing HIV infection among youth: What can schools do' was produced. Two posters and one oral presentation at the XIV international AIDS conference, Barcelona. Following presentation of findings to Thai academics teaching at the institutes involved in the program, sex education curriculum was expanded.
Uganda	VCT among youth: Phase II operations research Horizons #88 10/00 - 04/03 Ann McCauley Milka Juma	Feasibility and acceptability of providing VCT to youth and relative effectiveness of VCT i	

IR 4.2. IMPROVED STI SERVICES: Enhanced quality, availability and demand for STI prevention and management services

Activity Location	***Activity Name, HZ Number, Effective Dates and Monitor***	***Expected Project Results***	***Results Achieved in Period Oct 1 2001 – Sept 30 2002***
Global: Brazil, Cambodia, Ghana, Latvia	Addressing the problem of reproductive tract infection: Developing a program guidance tool Horizons #51 12/98- - 06/04 Johannes van Dam	Develop, implement, and evaluate a process to enable decision-makers to prioritize interventions for sexually transmitted and other reproductive tract infections. This study will lead to more effective, appropriate and cost-effective approaches to STI service delivery in countries all over the world.	Implementation of recommended priority activities is ongoing in Latvia and Cambodia, with the evaluation component in place. Implementation of phase I recommendations in Ghana due to start in the last quarter of 2002. A new stakeholders meeting in Brazil resulted in revised recommendations, which are expected to be implemented starting early 2003.
Global	Changing the Work Environment of Sex Work: New Strategies for HIV/STI Prevention Horizons #125 10/01 – 06/02 Chris Castle	Development of framework for synthesized reporting for all Horizons sex work studies; Identification of future OR priorities for sex work; Review of experiences and lessons learned from all four Horizons sex work studies; Consideration of research methodologies and indicators; Further planning for dissemination and results utilization.	Consultation/workshop held in Thailand 26-28 Nov 2002 with 20 participants including three representatives from each of the Horizons studies on sex work in India, Brazil, Cambodia and the Dominican Republic. A half-day meeting was held on 28 November to discuss findings with a wider group of stakeholders (incl. reps from Thai NGOs, MoH, donor and UN agencies, and the USAID regional HIV/AIDS advisor). Some study partners visited the Sonagachi Project (India) as part of a South-South exchange. A report from the meeting was written and circulated to workshop participants.
Regional (Southern Africa: Zimbabwe, Zambia and South Africa)	Targeted vs. general population interventions for STD control (periodic presumptive treatment of STDs) Horizons #15 01/99 – 04/03 Lewis Ndhlovu Johannes van Dam	Demonstrate that control of curable STDs is operationally feasible by focusing intensive efforts on “core groups” with high rates of partner change. This study will lead to more effective STI/HIV prevention programs.	Data collection has been completed for the three countries. Laboratory analysis of biological specimen is ongoing and expected to be complete by December 2002. Future plans of sustainability were reviewed at a stakeholders’ workshop conducted in August. Preliminary data analysis was conducted and results, where available, were presented to the stakeholders. Final analysis and report writing planned for March 2003.

Kenya	Prevention of mother-to-child transmission # 70 05/99 - 07/03 Naomi Rutenberg Sam Kalibala	Document experience in implementing a package of services designed to prevent mother to child transmission (PMCT) of HIV and develop a best practice. The study addresses the feasibility, acceptability, impact on infants and women and cost of a PMCT program. It will identify best practices in the prevention of mother to child transmission and contribute to a reduction in the vertical transmission of HIV.	Initiated PCR testing to measure mother to child transmission rates. Data collection on service delivery and effects on clients ongoing. Regular meetings and communications with project management on utilization of the data to strengthen service delivery. Four posters presented Barcelona Conference.
Pakistan	Training of informal health care providers in the management of sexually transmitted diseases Horizons #111 09/00 – 12/02 Johannes van Dam	Document effective methods to improve STI case management by non-formal health care providers. This study will lead to more effective STI care management by informal health care providers.	Study is ongoing.
South Africa	Intervention study with mine workers and sex workers in Carletonville, SA Horizons #26 12/98 – 01/03 Johannes van Dam Lewis Ndhlovu	Successful strategies for comprehensive (BCI, STI services, condom promotion and periodic presumptive treatment) HIV and STD prevention and control interventions among industrial populations. This study will lead to more effective STI prevention and care programs, thus reducing HIV incidence.	Final data analysis ongoing. A data interpretation workshop is planned for early 2003, followed by final report writing and submission of publications.
South Africa	Nested descriptive and exploratory studies in the context of the Carletonville STD/HIV project (sexual networks; gender and violence; determinants of infection in young adults) Horizons #102 10/99 – 01/03 Johannes van Dam Lewis Ndhlovu	Better understanding of determinants of the epidemic, leading to specific interventions and intervention research. These studies will contribute to the formulation of specific interventions to address these issues, thus strengthening HIV prevention programs.	Study completed, final report being prepared. Results from the nested studies will constitute community dissemination of results that is planned for this year and early 2003.
Zambia	Prevention of mother-to-child transmission Horizons #84 05/00 – 06/03 Naomi Rutenberg Sam Kalibala	Document experience in implementing a package of services designed to prevent mother to child transmission (PMCT) of HIV and development of a best practice. This study will identify best practices in the prevention of mother to child transmission and contribute to a reduction in the vertical transmission of HIV.	Data collection ongoing on service delivery and effects on clients. Regular meetings and communications with project management on utilization of the data to strengthen service delivery. Two posters presented at Barcelona Conference. D

IR 4.3. REDUCTION OF CONTEXTUAL CONSTRAINTS: Improved knowledge about, and capacity to address, the key policy, cultural, financial, and other contextual constraints to preventing and mitigating the impact of HIV/AIDS.

Activity Location	*Activity Name, HZ Number, Effective Dates and Monitor*	*Expected Project Results*	*Results Achieved in Period Oct 1 2001 – Sept 30 2002*
Global	Cost-effectiveness tools for assisting HIV/AIDS program managers to make resource allocation decisions Horizons #33 03/99 – 06/02 Naomi Rutenberg	Identify tools and materials for making resource allocation decisions. This activity will provide program managers with additional resources for program planning in order to enhance the effectiveness of their HIV/AIDS programs.	An electronic version of the Resource Allocation Goals model and an accompanying manual have been completed. Both the model and the manual have been posted on the Futures Group website.
Global: Burkina Faso, Ecuador, Zambia, and India	Diagnostic study on the involvement of people living with HIV and AIDS in the delivery of community-based prevention and care services Horizons #5 09/98 – 06/02 Chris Castle	Identify factors that facilitate or limit PLHA involvement in community level service delivery and the impact this has on the quality and effectiveness of services and on the quality of life of the PLHA themselves. Increase knowledge about successful strategies for supporting the involvement of PLHA, and maximizing their impact on service delivery. This study will strengthen and improve services for PLHA at the community level.	National reports were finalized/ disseminated in all four study countries. A special stakeholders meeting was held in Zambia in January that included reps from USAID Mission, Zambian MoH, AIDS Council, and NGOs. The synthesized international report was drafted being finalized, as is a research summary. Two oral presentations and two posters were presented at the Barcelona Conference.
Brazil	Sex work and community development: Phase II Horizons #92 02/00 – 11/02 Chris Castle	Better understanding of the role of community development approaches in ensuring the effectiveness and sustainability of interventions to reduce HIV transmission in sex work situations. This study will help program implementers by identifying effective approaches for strengthening interventions for sex workers and their clients.	Baseline report was drafted and being finalized. Intervention activities have been reviewed and agreement reached with the implementing partner (PIM) to intensify activities. Three posters were presented at the Barcelona Conference, and a skills building session was organized by Horizons and the NSWP. Planning is underway for the final round of data collection to start on November 2002.
Cambodia	Building community identity among debt-bonded sex workers in Cambodia: An HIV prevention strategy Horizons #76 09/99 – 01/03 Simon Baker Andy Fisher	Evaluating ways to reduce the spread of HIV to the general population by preventing transmission of HIV infection as much as possible between sex workers and their clients. Documenting the need for government and NGOs to address underlying social and economic conditions (e.g. through community development) to enable the women to seek different work.	Final survey was completed in early April. Data analysis and report writing are underway. Two oral presentations were made at the 6th ICCAP. Presentations were also made to the Key Centre for Women's Health in Society, Melbourne, Australia and to the US Embassy in Cambodia. Posters and an oral presentation were made at Barcelona.

India	Improving the hospital environment for HIV positive clients in India Horizons #77 01/00 – 01/04 Laelia Gilborn Vaishali Mahendra	Improved understanding of policies, circumstances, values and perceptions that contribute to hospital-based stigma and discrimination against PLHA; Replicable intervention for improving care; Indicators to measure hospital-based stigma and discrimination; Indicators to assess positive and appropriate care for PLHA in hospital setting; Achievement checklist for "PLHA-friendly" hospital. This will lead to better understand factors that lead to stigma and discrimination of PLHA in hospital settings, and to developing of broadly applicable recommendations and guidelines for hospitals to provide equitable and comprehensive care to PLHA as well as maximize staff safety.	Focus group discussions conducted and analyzed on care-seeking behavior of PLHA. Participatory Training Module for Health Care Workers developed, piloted and assessed. Achievement checklist launched, leading to development of hospital action plans. IEC materials developed and field-tested on universal precautions and infection control at department level. Disseminated in 2 hospitals. Hospital policy guidelines developed. 3 posters and 1 oral discussion presented at Barcelona Conference. Results also presented at a USAID Satellite meeting on stigma. Oral presentation at the Melbourne conference and poster at Chiang Mai conference. Achievement Checklist and Policy Guidelines finalized for wider dissemination.
South Africa	Adding Emerging STI/HIV Issues to FP and ANC – Situation Analysis in KwaZulu Natal Horizons #203 (Inhouse Project) 05/02 – 05/03 Lewis Ndhlovu Robert Miller Andy Fisher	Assess whether antenatal services in very high HIV/AIDS prevalence areas are providing or, after up-grading, can provide services (e.g. counseling on condom use for dual protection, access to ARVs to prevent MTCT, diagnosis and treatment of STIs)	Questionnaires developed and pretested in August. Three week training in Durban of 19 data collectors completed in September. Data collection began on September 30, to be completed by December. Data entry and analysis to be completed in May. Dissemination seminar and final report expected in July 2003.
South Africa	Transition to adulthood in the context of AIDS in South Africa Horizons #45 08/99 – 03/02 Naomi Rutenberg	Improved understanding of how schooling, work opportunities, household characteristics, and exposure to life skills curricula impede or encourage sexual activity, contraceptive use, and timing of childbearing over the life course of young adulthood. This study will contribute to increasing the effectiveness of life skills programs in order to reduce risk behavior among youth and decrease HIV infection in young adults.	Second wave of data collection completed. Analysis of impact of life skills program initiated. Two posters accepted for Barcelona Conference.

Thailand	Community-level case management of opportunistic infections in settings with high HIV/AIDS prevalence (Lampang) Horizons #11 11/98 – 08/02 Patchara Rumakom Simon Baker	Produce tools to manage OIs, improve care provided for OIs, increase quality of care of PLHA, improve the quality of life of PLHA. This study will improve the skills of caregivers and the lives of PLHA.	Final round of impact data collection was completed. Dissemination meetings were held for policy makers and provincial project manager on July 2002. Intermediate results presented at the special session "Capacity building tool for community and family caregivers" at the 5th HIV/AIDS home and community based international conference. Five posters were presented at the 6th ICCAP. Three oral presentations and one poster were presented at the XIV international AIDS conference, Barcelona.
Uganda	A modified approach to support of AIDS-affected children Horizons #20 08/99 – 02/03 Laelia Gilborn	Better understand interventions that improve the physical, educational, economic and psychological well being of children orphaned by HIV/AIDS. This will lead to more effective programs, and will highlight the need for national policies that protect the rights of survivors (especially women and children) to inherited property.	Round 3 data entered and cleaned. One oral presentation and one poster at Barcelona Conference. In-depth interviews analyzed. Preliminary impact analysis conducted. Impact data interpretation meetings held in two study sites. Qualitative data collected (on property grabbing and parent-to-child disclosure) and analyzed. Preparations made for the National Dissemination Meeting. Presentation at ICASA in Burkina Faso.
Zambia	Involving young people in the care and support of PLHA Horizons #31 09/99 – 11/02 Eka Esu-Williams Joseph Motsepe	Reduce risk behaviors among young people who provide care and support to PLHA, strengthen prevention activities, improve messages and advocacy strategies for stigma reduction at the community level. This study will reduce risk behavior among youth in order to decrease HIV infection in young adults.	Follow-up training in care and support conducted for 30 clubs. 3 PLHA support groups formed. Dissemination activities for baseline results conducted in 4 districts and in Lusaka. Research update: "Mobilizing Young People for the Care and Support of PLHA in Zambia" published. End of study survey involving about 1,000 club members concluded One poster and one oral presented at Barcelona. 1 oral presentation and 1 poster at the Reproductive Health Priorities Conference; 1 oral at SAHARA-WSSD Conference.

IR 4.4. IMPROVED PRIVATE SECTOR RESPONSE: Strengthened and expanded private sector organizations' responses in delivering HIV/AIDS information and services

Activity Location	*Activity Name, HZ Number, Effective Dates and Monitor*	*Expected Project Results*	*Results Achieved in Period Oct 1 2001 – Sept 30 2002*
Burkina Faso	Participation in the ICASA Workshop Horizons #126 11/01 – 12/01 Ellen Weiss	Dissemination of Horizons key research findings through publications and exhibition booth displayed at International Conference on AIDS and STDs in Africa.	Four Principal Investigators, in addition to several Horizons staff, participated in the Conference. Many publications and research reports distributed to conference attendees at Horizons booth.
India	Scaling up affordable & appropriate care and support services for PLHA in South India Horizons #27 09/99 - 12/02 Chris Castle	Determine elements of a care and support program that meets perceived needs of clients as well as identifying problems faced by clients seeking treat-ment and other services; assess costs of services provided and those borne by clients/ their families for care and services; estimate cost recovery potential; explore study's effect on stigmatizing attitudes & discriminatory practices by care providers. This study will provide valuable information about care and support models, including data on cost and the scaling-up process, and will contribute to understanding about viable support services.	Scale-up partner exchange visits organized and capacity building efforts have continued and intensified. Final round of data collection completed. Four individual case study reports from each site completed. Data analysis and interpretation workshops held for both study components. Agreement reached on plans for completing the study and disseminating the results. Two oral presentations and four posters were presented at the Barcelona Conference, as well as a presentation by Dr. Suniti Solomon, the study's PI, at the USAID-sponsored satellite session on scaling up.
South Africa	Addressing stigma and strengthening prevention, care, and support services for workers Horizons #32 08/00 – 01/04 Eka Esu-Williams Julie Pulerwitz Joseph Motsepe	Evaluate different approaches for providing HIV/AIDS-related prevention, care, and support services to workers; recommend stigma reduction activities. This study will introduce an HIV/AIDS stigma-reduction program into one of the largest corporations in South Africa.	Peer education curriculum developed. TOT peer educators trained. Intervention plan developed and interim report of baseline results done. Eskom policy document reproduced in a simple readable form in English and Zulu. Concluded arrangement to train 4 NGOs in Margate to provide services to Eskom. 125 volunteers identified for training as peer educators. Four posters presented at the Barcelona Conference; presentation at the 2002 Global Health Conference; 3 posters presented at the Reproductive Health Priorities Conference; 1 presentation at the SAHARA-WSSD Conference. Hz. Research Update published: HIV/AIDS-related stigma and discrimination in the workplace: emerging findings."

Thailand	Evaluation and accreditation of workplace AIDS programs Horizons #10 7/98-12/02 Patchara Rumakom Simon Baker	Participation of 150 companies; reduced premiums; verifiable interest in participation in scheme by other companies; knowledge of HIV/AIDS increased among company employees; reduction in risk behavior of company employees. This study will test the feasibility of involving private sector companies in an HIV/AIDS prevention program.	Final round of data collection and data analysis completed. Two oral presentations made at the 6th ICCAP. Three oral presentations made at the Thai Population Association Symposium. One poster presented at the XIV international AIDS conference, Barcelona. Two oral presentations detailing the results were also made to companies involved in the project
Vietnam	Expanding workplace HIV/STI prevention activities for migrant construction workers Horizons #96 05/00 – 01/03 Philip Guest Julie Pulerwitz	Evaluate alternative strategies for behavioral change in a workplace setting; determine the extent to which a workplace-based program among a highly mobile population can be scaled-up. This study will serve, as a model for addressing the HIV/AIDS prevention needs of a population of migrant construction workers.	Intervention completed. Mid-intervention and post-intervention data collection completed Report on Qualitative data collection concerning motivation of company management published. Poster presented at Barcelona Conference.
Zimbabwe	Assessing the contribution of microfinance programs to mitigating the impact of HIV/AIDS Horizons #82 05/00 – 02/02 Ellen Weiss	Increased understanding of the role of microfinance programs in helping clients cope with the economic shock of HIV/AIDS, and thereby mitigate the impact of the disease. This study will also provide insights about strengthening microfinance programs in the face of HIV/AIDS.	Results disseminated in Zimbabwe and Washington, DC. Poster presentation at ICASA Conference in Burkina Faso. Research summary written and disseminated.

IR 4.5. STRENGTHENING DATA COLLECTION FOR MONITORING AND EVALUATION: Improved availability of and capacity to generate and use data to monitor and evaluate HIV/AIDS/STI prevalence, trends and program impacts

Activity Location	***Activity Name, HZ Number, Effective Dates and Monitor***	***Expected Project Results***	***Results Achieved in Period Oct 1 2001 – Sept 30 2002***
Global	Increasing coverage of successful NGO responses to HIV: Lessons to date & a research agenda for the future Horizons #69 9/99 – 1/02 Chris Castle	Identification and documentation of what is already known about scale up and replication (lessons learned), and the articulation of a research agenda and strategy to respond to the most important gaps in knowledge. This will provide practical and specific information to program managers and other with an interest in scaling-up HIV/AIDS programs.	70-page report on findings from the literature review, seminar (September '00) and case studies completed in August '01, and widely dissemination after including an oral presentation at the Barcelona AIDS Conference in June '02. Although this activity was officially completed by October '01, a book version of the report is in production by the Intermediate Technologies Development Group (ITDG) and should be completed in early '03.
Global	Project Development Horizons #126 1/02 – 9/04 Naomi Rutenberg	Umbrella for small activities (formative research, proposal development workshops, consultants) that contribute to operations research proposal development	Several small exploratory studies conducted to support the development of Horizons proposals.
Regional (East and Southern Africa)	Development of a training course in utilization of research results Horizons #63 6/99 – 12/01 Naomi Rutenberg	Develop, implement, and assess a detailed course curriculum on utilization of research results; 25-40 people trained in methods; revised curriculum and strategy. This activity will increase the skills of program managers to utilize data and thus enhance the effectiveness of their HIV/AIDS programs.	Second training course conducted in September 2001. In this reporting period, the implementing agency evaluated the course and took stock of future training needs.

C. Programmatic Database Activity Summaries

DETAIL REPORT

Global: GLOBAL ACTIVITIES

Global

Horizons

Activity:	889	Addressing the Problem of Reproductive Tract Infections: Developing a Program Guidance Tool	
Start Date:	12/98	***End Date:***	6/04

No. of persons reached directly:	n.a.	***No. of persons reached indirectly:***	n.a.	***No. of organizations reached directly:***	n.a.

Budget:	***LOP:***	$ 500,000	***FY02:***	$ 300,000

Intervention:	Operations research
Description:	The key steps include: developing a strategic framework, prioritizing appropriate interventions in the presence of imperfect data, defining and field testing process, and evaluating the utility and impact of new strategic approach.

Target Pop:	Policy Makers	***No. of persons reached:***	n.a.	***No. of organizations reached:***	n.a.

Outputs	***Indicators***	***Baseline***	***Target***	***LK Value***	***Date***
Development, implementation and evaluation of strategic process for decision making to prioritize interventions for established sexually transmitted and other reproductive tract infections, effective, appropriate and cost-effective approaches globally.	Tool developed and evaluated	0	0	0	

Outcomes	***Indicators***	***Baseline***	***Target***	***LK Value***	***Date***
Improved approaches to STI/RTI service delivery					

Activity:	893	Cost Effectiveness Tools for Assisting HIV/AIDS Program Managers to make Resource Allocation Decisions			
Start Date:	3/99	**End Date:**	5/02		
No. of persons reached directly:	n.a.	**No. of persons reached indirectly:**	n.a.	**No. of organizations reached directly:**	n.a.
Budget:	**LOP:**	$ 256,078	**FY02:**	$ 126,000	

Intervention:	Operations research				
Description:	Resource allocation model developed and tested				
Target Pop:	Program managers	**No. of persons reached:**	n.a.	**No. of organizations reached:**	n.a.

Outputs	**Indicators**	**Baseline**	**Target**	**LK Value**	**Date**
Development of tools to assist HIV/AIDS program managers in making cost-effective, resource allocation decisions and the dissemination of these tools.	Model developed and disseminated to stakeholders and participants	0	0	0	

Outcomes	**Indicators**	**Baseline**	**Target**	**LK Value**	**Date**
Improved approaches for HIV/AIDS program planning	Resource allocation decision making tools developed, tested and evaluated	0	0	0	

Activity:	900	Diagnostic Study on the Involvement of People Living with HIV and AIDS in the Delivery of Community Based Prevention and Care Services

Start Date:	9/98	**End Date:**	6/02

No. of persons reached directly:	n.a.	**No. of persons reached indirectly:**	n.a.	**No. of organizations reached directly:**	n.a.

Budget:	**LOP:**	$ 474,503	**FY02:**	$ 251,554

Intervention:	Operations research

Description:	Community Mobilization, NGO Support			
Target Pop:	People living with HIV/AIDS (PLWHA)	**No. of persons reached:**	100	**No. of organizations reached:** n.a.

Outputs	**Indicators**	**Baseline**	**Target**	**LK Value**	**Date**
Organizational profile for each study partner, national report and international report	Identification of factors for strengthening and improving services for PLHAs at the community level.	0	0	0	

Outcomes	**Indicators**	**Baseline**	**Target**	**LK Value**	**Date**
Improved knowledge of practical ways to meaningfully involve PLHA in program service delivery					

Activity:	901	Assessment of Status of Research in Relation to the Male Condom	
Start Date:	11/99	**End Date:**	3/03

No. of persons reached directly:	n.a.	***No. of persons reached indirectly:***	n.a.	***No. of organizations reached directly:***	n.a.

Budget:	***LOP:***	$ 8,000	***FY02:***	$ 0

Intervention:	Operations research
Description:	Literature Review, consulation

Target Pop:	Policy Makers	***No. of persons reached:***	n.a.	***No. of organizations reached:***	n.a.

Outputs	***Indicators***	***Baseline***	***Target***	***LK Value***	***Date***
Identification of gaps in knowledge with regard to the utilization of male condoms for the prevention of disease and/or pregnancy by various population subgroups, identification of outstanding research questions	Preparation and submission of report	0	0	0	
	Study addresses objectives in proposal and is implemented according to study design, results disseminated to stakeholders through a variety of media.	0	0	0	

Activity:	914	Increasing Coverage of Successful NGO Responses to HIV: Lessons to Date & A Research Agenda for the Future

Start Date:	9/99	**End Date:**	1/02		
No. of persons reached directly:	n.a.	**No. of persons reached indirectly:**	n.a.	**No. of organizations reached directly:**	n.a.
Budget:	**LOP:**	$ 99,850	**FY02:**	$ 0	

Intervention:	Workshop

Description: Workshop and secondary analysis for NGO support

Target Pop:	NGO(s)/PVO(s)	**No. of persons reached:**	n.a.	**No. of organizations reached:**	n.a.

Outputs	**Indicators**	**Baseline**	**Target**	**LK Value**	**Date**
Identification and documentation of what is already known about scale up and replication (lessons learned) and the articulation of a research agenda and strategy to respond to the most important gaps in knowledge.	Report for seminar completed and distributed.	0	0	0	

Activity:	1009	Horizons Internship/Fellowship Program			
Start Date:	7/98	**End Date:**	8/02		
No. of persons reached directly:	1	**No. of persons reached indirectly:**	n.a.	**No. of organizations reached directly:**	n.a.
Budget:	**LOP:**	$ 150,000	**FY02:**	$ 0	

Intervention:	Operations research				
Description:	capacity building				
Target Pop:	Students	**No. of persons reached:**	1	**No. of organizations reached:**	n.a.

Outputs	**Indicators**	**Baseline**	**Target**	**LK Value**	**Date**
Increased capacity of a select group of MPH graduate students, including those from developing countries, to conduct operations research.	Interns successfully complete scope of work	0	0	0	

Activity:	1023	Communications and Dissemination			
Start Date:	8/97	**End Date:**	7/02		
No. of persons reached directly:	n.a.	**No. of persons reached indirectly:**	n.a.	**No. of organizations reached directly:**	n.a.
Budget:	**LOP:**	$ 400,000	**FY02:**	$ 300,000	

Intervention:	Dissemination				
Description:	Research communications				
Target Pop:	NGO(s)/PVO(s)	**No. of persons reached:**	n.a.	**No. of organizations reached:**	n.a.

Outputs	**Indicators**	**Baseline**	**Target**	**LK Value**	**Date**
Greater understanding and awareness of important findings and issues related to Horizons research and activities.					

Target Pop:	Policy Makers	**No. of persons reached:**	n.a.	**No. of organizations reached:**	n.a.

Outputs	**Indicators**	**Baseline**	**Target**	**LK Value**	**Date**
Oral, written and electronic documents that highlight key research findings					

Outcomes	**Indicators**	**Baseline**	**Target**	**LK Value**	**Date**
Increased knowledge and awareness of effective HIV prevention, care and support strategies	Number of publications produced, number of presentations given at key meetings and conferences, number of publications reporting Horizons activities and findings, number of requests for publications and presentations	0	0	0	

Activity:	1297	Changing the Work Environment of Sex Work: New Strategies for HIV/STI Prevention			
Start Date:	10/01	**End Date:**	6/02		
No. of persons reached directly:	n.a.	**No. of persons reached indirectly:**	n.a.	**No. of organizations reached directly:**	n.a.
Budget:	**LOP:**	$ 39,990	**FY02:**	$ 34,990	

Intervention:	Operations research				
Description:	Strategic Planning				
Target Pop:	Sex workers	**No. of persons reached:**	n.a.	**No. of organizations reached:**	n.a.

Outputs	**Indicators**	**Baseline**	**Target**	**LK Value**	**Date**
Consultative meeting report	Report completed and circulated, dissemination plan agreed upon	0	0	0	

Outcomes	**Indicators**	**Baseline**	**Target**	**LK Value**	**Date**
Improved ideas for dissemination of results from Horizons studies on sex work and concrete priorities for future operations research					

Activity:	1417	Project Development			
Start Date:	1/02	**End Date:**	9/04		
No. of persons reached directly:	n.a.	**No. of persons reached indirectly:**	n.a.	**No. of organizations reached directly:**	n.a.
Budget:	**LOP:**	$ 120,000	**FY02:**	$ 20,000	

Intervention:	Operations research				
Description:	Development of research designs				
Target Pop:	Program managers	**No. of persons reached:**	n.a.	**No. of organizations reached:**	n.a.

Outputs	**Indicators**	**Baseline**	**Target**	**LK Value**	**Date**
A variety of small, formative research activities intended to support the development of Horizons research proposals					

Outcomes	**Indicators**	**Baseline**	**Target**	**LK Value**	**Date**
Better developed research conducted by Horizons projects	Amount of proposals accepted	0	0	0	

LOP: Life of Project LK Value: Last Known Value

DETAIL REPORT

Region: Africa: REGION ACTIVITIES

Region: Africa

Horizons

Activity:	923	Targeted Versus General Population Interventions for STD Control (Periodic Presumptive Treatment for STDs)

Start Date:	1/99	***End Date:***	3/03

No. of persons reached directly:	10000	***No. of persons reached indirectly:***	n.a.	***No. of organizations reached directly:***	n.a.

Budget:	***LOP:***	$ 1,353,298	***FY02:***	$ 914,898

Intervention:	Operations research
Description:	STI Prevention Intervention

Target Pop:	Sex workers	***No. of persons reached:***	10000	***No. of organizations reached:***	n.a.

Outputs	***Indicators***	***Baseline***	***Target***	***LK Value***	***Date***
Demonstration that the control of curable STDs is operationally feasible by focusing more intensive efforts on					
Trained health care workers and peer educators					

Outcomes	***Indicators***	***Baseline***	***Target***	***LK Value***	***Date***
Reduced rates of STIs in intervention groups, recommendations for approaches for the prevention and management of STIs	Study completed, results analyzed, report produced, results disseminated	0	0	0	

Activity:	1068	Dissemination Plan for Horizons STI/HIV/AIDS Research Results in West and Central Africa

Start Date: 6/01 **End Date:** 6/02

No. of persons reached directly: n.a. **No. of persons reached indirectly:** n.a. **No. of organizations reached directly:** n.a.

Budget: **LOP:** $ 8,342 **FY02:** $ 3,000

Intervention: Dissemination

Description: research results translated and disseminated into French

Target Pop: Program managers **No. of persons reached:** n.a. **No. of organizations reached:** n.a.

Outputs	Indicators	Baseline	Target	LK Value	Date
A variety of Horizons research results will be translated into French and Arabic and distributed throughout West and Central Africa.					

Outcomes	Indicators	Baseline	Target	LK Value	Date
Increased knowledge and awareness of Horizons research findings by French speaking groups	Number of reports and publications translated and disseminated	0	0	0	

Activity:	1296	Development of a Training Course in Utilization of Research Results

Start Date: 6/99 **End Date:** 12/01

No. of persons reached directly: n.a. **No. of persons reached indirectly:** 500000 **No. of organizations reached directly:** n.a.

Budget: **LOP:** $ 105,300 **FY02:** $ 5,265

Intervention: Dissemination

Description:

Target Pop: Program managers **No. of persons reached:** n.a. **No. of organizations reached:** n.a.

Outputs	Indicators	Baseline	Target	LK Value	Date
Training course curriculum, 25-40 managers trained, evaluation of course	Curriculum developed, number of courses implemented, number of trainees, satisfaction with training course	0	0	0	

Outcomes	Indicators	Baseline	Target	LK Value	Date
Improved use of research results for HIV/AIDS/STD program training					

LOP: Life of Project LK Value: Last Known Value

DETAIL REPORT

Region: Africa: COUNTRY ACTIVITIES

Burkina Faso

Horizons

Activity:	1419	Participation in the ICASA Workshop			
Start Date:	11/01	***End Date:***	12/01		
No. of persons reached directly:	n.a.	***No. of persons reached indirectly:***	n.a.	***No. of organizations reached directly:***	n.a.
Budget:	***LOP:***	$ 30,000	***FY02:***	$ 0	

Intervention:	Workshop				
Description:	Communications and Dissemination				
Target Pop:	Program managers	***No. of persons reached:***	n.a.	***No. of organizations reached:***	n.a.

Outputs	***Indicators***	***Baseline***	***Target***	***LK Value***	***Date***
Attendance of PIs at conference, display of Horizons materials	Amount of publications and reports distributed at conference	0	0	0	

Outcomes	***Indicators***	***Baseline***	***Target***	***LK Value***	***Date***
Distribution and dissemination of Horizons research results at international HIV/AIDS conference, increased awareness of key study findings					

Kenya

Horizons

Activity:	956	Prevention of Mother to Child Transmission in Kenya			
Start Date:	5/99	***End Date:***	6/03		
No. of persons reached directly:	n.a.	***No. of persons reached indirectly:***	n.a.	***No. of organizations reached directly:***	n.a.
Budget:	***LOP:***	$ 843,630	***FY02:***	$ 318,109	

Intervention:	Operations research				
Description:	Prevention integration				
Target Pop:	Pregnant women	***No. of persons reached:***	n.a.	***No. of organizations reached:***	n.a.

Outputs	***Indicators***	***Baseline***	***Target***	***LK Value***	***Date***
Trained care providers and PMCT services provided at clinics					

Outcomes	***Indicators***	***Baseline***	***Target***	***LK Value***	***Date***
Reduction in mother to child transmission of HIV/AIDS, improved child nutrition, improved maternal health, documentation of effective strategies for PMCT programs	Number of pregnant women utilizing PMCT services, number of pregnant women receiving comprehensive antenatal delivery care, number of pregnant women knowing and practicing primary prevention of HIV, vertical transmission rates	0	0	0	

Nigeria

Horizons

Activity:	941	Promoting Dual Protection Practices Among Women and their Male Partners in Ibadan, Nigeria

Start Date:	7/99	***End Date:***	10/02		
No. of persons reached directly:	500	***No. of persons reached indirectly:***	n.a.	***No. of organizations reached directly:***	n.a.
Budget:	***LOP:***	$ 61,926	***FY02:***	$ 20,000	

Intervention:	Operations research
Description:	Barrier methods integration
Target Pop:	Family planning clients
No. of persons reached:	500
No. of organizations reached:	n.a.

Outputs	***Indicators***	***Baseline***	***Target***	***LK Value***	***Date***
Develop dual protection counseling curriculum,	Male and female condom use, partner communication, quality of counseling	0	0	0	
Develop male involvement materials	?	0	0	0	
		0	0	0	

Outcomes	***Indicators***	***Baseline***	***Target***	***LK Value***	***Date***
Increased number of providers that counsel on dual protection, clients that practice dual protection.					

Senegal

Horizons

Activity:	972	The Feasibility and Acceptability of an Intervention to Reduce STD/HIV Risk Among Pregnant Women and their Partners in Dakar, Senegal

Start Date:	10/99	***End Date:***	11/01		
No. of persons reached directly:	1000	***No. of persons reached indirectly:***	n.a.	***No. of organizations reached directly:***	n.a.
Budget:	***LOP:***	$ 8,825	***FY02:***	$ 0	

Intervention:	Operations research
Description:	Diagnostic research of barrier methods, policy, STI prevention

Target Pop:	Sex partner(s)	***No. of persons reached:***	1000	***No. of organizations reached:***	n.a.

Outputs	***Indicators***	***Baseline***	***Target***	***LK Value***	***Date***
This study aims to increase knowledge about reproductive health, pregnancy, risk of STD/HIV and to improve communication and behavior around reproductive and sexual health among women and their partners.	Study addresses objectives in proposal and is implemented according to study design, results disseminated to stakeholders through a variety of media.	0	0	0	

South Africa

Horizons

Activity:	932	Intervention Study with Mine Workers and Sex Workers in Carletonville, South Africa	
Start Date:	12/98	***End Date:***	3/03
No. of persons reached directly:	500	***No. of persons reached indirectly:***	n.a.
No. of organizations reached directly:	n.a.		
Budget:	***LOP:***	$ 482,024	***FY02:*** $ 179,000

Intervention:	Operations research
Description:	STI Prevention
Target Pop:	Miners
No. of persons reached:	500
No. of organizations reached:	n.a.

Outputs	***Indicators***	***Baseline***	***Target***	***LK Value***	***Date***
Successful strategies for comprehensive HIV and STD prevention (BCI, STI services, condom promotion), and control interventions among industrial populations.					

Target Pop:	Sex workers	***No. of persons reached:***	n.a.	***No. of organizations reached:***	n.a.

Outputs	***Indicators***	***Baseline***	***Target***	***LK Value***	***Date***
Trained peer educators, condom distribution and promotion network in place, sustained BCI in place, health care workers trained in STD case management					

Outcomes	***Indicators***	***Baseline***	***Target***	***LK Value***	***Date***
Best practice with regard to hybrid STD approach, combining BCI, condoms and syndromic case management with PPT.	Study completed, results analyzed and disseminated, report produced and disseminated, publication in scientific literature.	0	0	0	

Activity:	935	Addressing Stigma and Strengthening Prevention, Care and Support Services for Workers	
Start Date:	11/00	**End Date:**	1/03

No. of persons reached directly:	5000	***No. of persons reached indirectly:***	n.a.	***No. of organizations reached directly:***	n.a.

Budget:	***LOP:***	$ 156,375	***FY02:***	$ 76,375

Intervention:	Operations research
Description:	Stigma and Discrimination, Workplace policy

Target Pop:	Business community	***No. of persons reached:***	5000	***No. of organizations reached:***	n.a.

Outputs	***Indicators***	***Baseline***	***Target***	***LK Value***	***Date***
Stigma reduction strategies, peer education materials with stigma reduction and care and support component.					

Outcomes	***Indicators***	***Baseline***	***Target***	***LK Value***	***Date***
Improved approaches for HIV related stigma reduction and prevention, care and support for workers and their families.	Level of stigma, utilization of HIV related services, reduced HIV/AIDS risk.	0	0	0	

Activity:	936	Programming for HIV Prevention in South African Schools			
Start Date:	4/00	**End Date:**	11/02		
No. of persons reached directly:	n.a.	**No. of persons reached indirectly:**	n.a.	**No. of organizations reached directly:**	n.a.
Budget:	**LOP:**	$ 240,856	**FY02:**	$ 103,000	

Intervention:	Operations research				
Description:	Youth, Stigma and Discrimination				
Target Pop:	Youth	**No. of persons reached:**	n.a.	**No. of organizations reached:**	n.a.

Outputs	**Indicators**	**Baseline**	**Target**	**LK Value**	**Date**
Two month course on life skills and HIV prevention					

Outcomes	**Indicators**	**Baseline**	**Target**	**LK Value**	**Date**
Reduction in high risk behavior	Course developed, taught and evaluated	0	0	0	

Activity:	937	Transitions to Adulthood in the Context of AIDS in South Africa: A Panel Study			
Start Date:	8/99	**End Date:**	3/02		
No. of persons reached directly:	500	**No. of persons reached indirectly:**	n.a.	**No. of organizations reached directly:**	n.a.
Budget:	**LOP:**	$ 232,345	**FY02:**	$ 33,000	

Intervention:	Operations research				
Description:	Youth Evaluation				
Target Pop:	Youth	**No. of persons reached:**	500	**No. of organizations reached:**	n.a.

Outputs	**Indicators**	**Baseline**	**Target**	**LK Value**	**Date**
Improved understanding of how schooling, work opportunities, household characteristics, and exposure to life skills curricula impede or encourage sexual activity, contraceptive use, and timing of childbearing over the life course of young adulthood.					

Outcomes	**Indicators**	**Baseline**	**Target**	**LK Value**	**Date**
Improved programs to assist youth to make safe, satisfying and productive transitions to adulthood.	Study activity completed, number and type of activities to promote utilization of research results.	0	0	0	

Activity:	1017	Nested and Descriptive Studies in the Context of the Intervention Study with Mine Workers and Sex Workers

Start Date:	10/99	**End Date:**	1/03		
No. of persons reached directly:	n.a.	**No. of persons reached indirectly:**	n.a.	**No. of organizations reached directly:**	n.a.
Budget:	**LOP:**	$ 35,000	**FY02:**	$ 10,000	

Intervention:	Operations research
Description:	Diagnostic, STI Prevention
Target Pop:	High-risk population
No. of persons reached:	n.a.
No. of organizations reached:	n.a.

Outputs	**Indicators**	**Baseline**	**Target**	**LK Value**	**Date**
Better understanding of the determinants of the HIV/AIDS epidemic leading to specific interventions and intervention research, sexual network analysis					

Outcomes	**Indicators**	**Baseline**	**Target**	**LK Value**	**Date**
Better understanding of sexual networks in a very high HIV incidence area in South Africa	Study completed, results analyzed, report produced and disseminated, publication in scientific literature.	0	0	0	

Activity:	1528	Adding the Emerging STI/HIV/AIDS Issues to a Family Planning and Ante-Natal Care Situation Analysis Study in KwaZulu-Natal Province, South Africa

Start Date:	5/02	**End Date:**	5/03		
No. of persons reached directly:	n.a.	**No. of persons reached indirectly:**	n.a.	**No. of organizations reached directly:**	n.a.
Budget:	**LOP:**	$ 48,660	**FY02:**	$ 48,660	

Uganda

Horizons

Activity:	926	A Modified Approach to Outreach for AIDS-affected children in Uganda

Start Date:	8/99	**End Date:**	1/03		
No. of persons reached directly:	n.a.	**No. of persons reached indirectly:**	n.a.	**No. of organizations reached directly:**	n.a.
Budget:	**LOP:**	$ 201,076	**FY02:**	$ 25,000	

Intervention:	Operations research
Description:	Care and Support
Target Pop:	Orphans and other vulnerable children (OVC)
No. of persons reached:	n.a.
No. of organizations reached:	n.a.

Outputs	**Indicators**	**Baseline**	**Target**	**LK Value**	**Date**
Hundreds of households receive either orphan support or succession planning	Child health, nutrition, education, psychosocial well-being, parent preparedness for children, guardian preparedness and capacity to care.	0	0	0	

Outcomes	**Indicators**	**Baseline**	**Target**	**LK Value**	**Date**
Health, nutrition, education, psychosocial well-being among AIDS affected children improve, parents take concrete steps to plan childrens' future.					

Activity:	963	Voluntary Counseling and Training Integration into Health Services			
Start Date:	9/99	**End Date:**	2/02		
No. of persons reached directly:	500	**No. of persons reached indirectly:**	n.a.	**No. of organizations reached directly:**	n.a.
Budget:	**LOP:**	$ 175,471	**FY02:**	$ 40,101	

Intervention:	Operations research				
Description:	Strengthening of STI intervention services				
Target Pop:	Family planning clients	**No. of persons reached:**	1000	**No. of organizations reached:**	n.a.

Outputs	**Indicators**	**Baseline**	**Target**	**LK Value**	**Date**
Client counseling and referral for other services needed.					

Outcomes	**Indicators**	**Baseline**	**Target**	**LK Value**	**Date**
Increased utilization of comprehensive HIV/AIDS prevention and care services, better client satisfaction	Number of clients seen for VCT,TB, FP, STD and HIV/AIDS care and support, numbers assessed for referral needs, proportion of clients reporting satisfaction with clinic services	0	0	0	

Activity:	971	Voluntary Counseling and Training Among Youth: Phase II Operations Research			
Start Date:	10/00	**End Date:**	3/03		
No. of persons reached directly:	500	**No. of persons reached indirectly:**	n.a.	**No. of organizations reached directly:**	n.a.
Budget:	**LOP:**	$ 103,248	**FY02:**	$ 43,248	

Intervention:	Operations research				
Description:	Youth and VCT				
Target Pop:	Youth	**No. of persons reached:**	500	**No. of organizations reached:**	n.a.

Outputs	**Indicators**	**Baseline**	**Target**	**LK Value**	**Date**
Youth specified VCT material, strategies for making VCT services youth friendly, adapted evaluation tools for youth programs, communication campaign materials for adolescents, strategies for strengthening the referral component of VCT					

Outcomes	**Indicators**	**Baseline**	**Target**	**LK Value**	**Date**
Reduction in high risk behavior	Delivery and evaluation of a youth friendly VCT service	0	0	0	

Zambia

Horizons

Activity:	934	Involving Young People in the Care and Support of People Living with HIV/AIDS in Zambia

Start Date:	9/99	**End Date:**	11/02		
No. of persons reached directly:	500	**No. of persons reached indirectly:**	n.a.	**No. of organizations reached directly:**	n.a.
Budget:	**LOP:**	$ 185,985	**FY02:**	$ 87,985	

Intervention:	Operations research
Description:	Care and Support, Stigma and Discrimination

Target Pop:	Youth	**No. of persons reached:**	500	**No. of organizations reached:**	n.a.

Outputs	**Indicators**	**Baseline**	**Target**	**LK Value**	**Date**
PHLA study, baseline and follow up survey reports, IEC materials, prevention training and care and support training curriculum.					

Outcomes	**Indicators**	**Baseline**	**Target**	**LK Value**	**Date**
Reduction of risky behaviors, strengthened prevention activities, improved messages and advocacy strategies for stigma reduction at community level.	HIV/AIDS/STI knowledge, perception of risk, safer sex practices, gender differences in knowledge, attitudes and sexual behavior.	0	0	0	

Activity:	968	Evaluating the Feasibility of Implementing a Comprehensive Package of Care to Reduce MTCT in Zambia

Start Date:	5/00	**End Date:**	5/03		
No. of persons reached directly:	1000	**No. of persons reached indirectly:**	n.a.	**No. of organizations reached directly:**	n.a.
Budget:	**LOP:**	$ 349,080	**FY02:**	$ 135,579	

Intervention:	Operations research

Description:	Integration of services				
Target Pop:	Pregnant women	**No. of persons reached:**	1000	**No. of organizations reached:**	n.a.

Outputs	**Indicators**	**Baseline**	**Target**	**LK Value**	**Date**
Documentation of experiences in implementing a package of services designed to prevent mother to child transmission (PMCT) of HIV and development of best practices, equipped facilities, trained providers, PMCT services offered					

Outcomes	**Indicators**	**Baseline**	**Target**	**LK Value**	**Date**
Reduction in mother to child transmission of HIV, improved child nutrition, improved maternal health, documentation of effective strategies for and impact of PMCT programs	Number of pregnant women utilizing PMCT services, number of pregnant women receiving comprehensive antenatal delivery care, number of pregnant women knowing and practicing primary prevention of HIV, vertical transmission rates	0	0	0	

Activity:	975	Community Integrated Voluntary Counseling and Training (VCT) and Maternal Child Health (MCH) projects in Ndola, Zambia

Start Date:	4/99	**End Date:**	10/02		
No. of persons reached directly:	5000	**No. of persons reached indirectly:**	n.a.	**No. of organizations reached directly:**	n.a.
Budget:	**LOP:**	$ 218,829	**FY02:**	$ 50,000	

Intervention:	Operations research

Description:	Care and Support, NGO support				
Target Pop:	Pregnant women	**No. of persons reached:**	10000	**No. of organizations reached:**	n.a.

Outputs	**Indicators**	**Baseline**	**Target**	**LK Value**	**Date**
Understanding of the feasibility of delivering linked services of VCT, infant feeding counseling and community based counseling and referral in a community and the impact of these services on the health seeking behaviors, and behaviors to prevent STIs/HIV					

Outcomes	**Indicators**	**Baseline**	**Target**	**LK Value**	**Date**
Improved infant nutrition, increased prevention of HIV among women and children	Percent population with VCT, exclusive breastfeeding rate, study activities complete	0	0	0	

Zimbabwe

Horizons

Activity:	939	Reducing STD/HIV risk among pregnant women and their partners in Zimbabwe			
Start Date:	3/00	***End Date:***	7/02		
No. of persons reached directly:	500	***No. of persons reached indirectly:***	n.a.	***No. of organizations reached directly:***	n.a.
Budget:	***LOP:***	$ 146,634	***FY02:***	$ 60,000	

Intervention:	Operations research				
Description:	Barrier methods integration				
Target Pop:	Pregnant women	***No. of persons reached:***	500	***No. of organizations reached:***	n.a.
Outputs	***Indicators***	***Baseline***	***Target***	***LK Value***	***Date***
Male involvement outreach materials, couple counseling strategies.					
Outcomes	***Indicators***	***Baseline***	***Target***	***LK Value***	***Date***
Improved approaches to reduce HIV/AIDS risk for pregnant women and their partners.	Level of male involvement in ante-natal care and reproductive health, reduced HIV/AIDS risk, attitudes and behavior.	0	0	0	

Activity:	967	Assessing the Contribution of Microfinance Programs to Mitigating the Impact of HIV/AIDS			
Start Date:	5/00	**End Date:**	2/02		
No. of persons reached directly:	n.a.	**No. of persons reached indirectly:**	n.a.	**No. of organizations reached directly:**	n.a.
Budget:	**LOP:**	$ 101,848	**FY02:**	$ 10,000	

Intervention:	Operations research				
Description:	Care and Support				
Target Pop:	Community-based organization(s) (CBO)	**No. of persons reached:**	500	**No. of organizations reached:**	n.a.

Outputs	**Indicators**	**Baseline**	**Target**	**LK Value**	**Date**
Repot on key findings of effectiveness of microfinance programs to help clients cope with economic shock of HIV/AIDS					

Outcomes	**Indicators**	**Baseline**	**Target**	**LK Value**	**Date**
Increased understanding of relationship between HIV-affected clients and microfinance services	Study completed and findings disseminated	0	0	0	

Target Pop:	People living with HIV/AIDS (PLWHA)	**No. of persons reached:**	1	**No. of organizations reached:**	n.a.

Region: Asia and Near East: COUNTRY ACTIVITIES

Cambodia

Horizons

Activity:	885	Building Community Identity among Sex-Bonded Sex Workers in Cambodia: an HIV Prevention Strategy	
Start Date:	9/99	***End Date:***	1/03

No. of persons reached directly:	100	***No. of persons reached indirectly:***	n.a.	***No. of organizations reached directly:***	n.a.

Budget:	***LOP:***	$ 90,803	***FY02:***	$ 50,000

Intervention:	Operations research
Description:	Community Mobilization
Target Pop:	Sex workers

No. of persons reached:	100	***No. of organizations reached:***	n.a.

Outputs	***Indicators***	***Baseline***	***Target***	***LK Value***	***Date***
Development of a sense of community and enhanced HIV prevention among debt-bonded sex workers.					

Outcomes	***Indicators***	***Baseline***	***Target***	***LK Value***	***Date***
Increased understanding of ways to foster interaction among sex workers and brothel owners, initiation of community identity among sex workers, increased male and female condom use	Levels of the sex workers mobility within the community, level of involvement in community activities, level of male and female condom usage	0	0	0	

Horizons

Activity:	903	Improving the Hospital Environment for HIV Positive Clients in India

Start Date:	1/00	**End Date:**	1/04		
No. of persons reached directly:	n.a.	**No. of persons reached indirectly:**	n.a.	**No. of organizations reached directly:**	n.a.
Budget:	**LOP:**	$ 260,399	**FY02:**	$ 123,755	

Intervention:	Operations research

Description: Care and Support, Stigma and Discrimination Intervention

Target Pop:	Health care providers	**No. of persons reached:**	n.a.	**No. of organizations reached:**	n.a.

Outputs	**Indicators**	**Baseline**	**Target**	**LK Value**	**Date**
Improved understanding of policies, circumstances, values and perceptions that contribute to hospital-based stigma and discrimination against PLHA; Indicators to measure hospital based stigma.					

Outcomes	**Indicators**	**Baseline**	**Target**	**LK Value**	**Date**
Action plan steps taken by hospital, study hospitals are more PLHA friendly, staff attitudes and knowledge toward PLHA improves.					

Target Pop:	People living with HIV/AIDS (PLWHA)	**No. of persons reached:**	n.a.	**No. of organizations reached:**	n.a.

Outputs	**Indicators**	**Baseline**	**Target**	**LK Value**	**Date**
Complete action plan for each hospital, guidance tool for trainers of health care workers	Amount of health care workers trained, PLHA-friendly hospital indicators, knowledge and attitudes of staff, action plan steps	0	0	0	

Activity:	906	Scaling Up Affordable & Appropriate Care and Support Services for PLHA in South India			
Start Date:	9/99	**End Date:**	11/02		
No. of persons reached directly:	100	**No. of persons reached indirectly:**	n.a.	**No. of organizations reached directly:**	n.a.
Budget:	**LOP:**	$ 278,754	**FY02:**	$ 144,678	

Intervention:	Operations research				
Description:	NGO Support				
Target Pop:	HIV/AIDS-affected families	**No. of persons reached:**	100	**No. of organizations reached:**	n.a.

Outputs	**Indicators**	**Baseline**	**Target**	**LK Value**	**Date**
Final report including costing analysis report, quality of life report, and comparative case study analysis reports					

Outcomes	**Indicators**	**Baseline**	**Target**	**LK Value**	**Date**
Improved care and support services for PLHA and their families, better understanding of how to scale-up care and support services and related costs.	Cost of services and of scaling up, client quality of life using a scale developed by project	0	0	0	

Pakistan

Horizons

Activity:	1024	Evaluation of STD Case Management Training of Informal Health Care Providers

Start Date:	9/00	***End Date:***	8/02		
No. of persons reached directly:	n.a.	***No. of persons reached indirectly:***	n.a.	***No. of organizations reached directly:***	n.a.
Budget:	***LOP:***	$ n.a.	***FY02:***	$ 0	

Intervention:	Operations research

Description:	Care and Support Intervention				
Target Pop:	Health care providers	***No. of persons reached:***	n.a.	***No. of organizations reached:***	n.a.

Outputs	***Indicators***	***Baseline***	***Target***	***LK Value***	***Date***
Documentation of effective methods to improve STI case management by non-formal health care providers, trained informal health care workers					

Outcomes	***Indicators***	***Baseline***	***Target***	***LK Value***	***Date***
Best practice for the involvement of informal health care providers in management of STIs in men	Completion of methodology for more effective methods to manage sexually transmitted diseases among men.	0	0	0	

Thailand

Horizons

Activity:	918	Evaluation and Accreditation of Workplace AIDS Programs

Start Date:	7/98	**End Date:**	11/02		
No. of persons reached directly:	n.a.	**No. of persons reached indirectly:**	n.a.	**No. of organizations reached directly:**	150
Budget:	**LOP:**	$ 134,603	**FY02:**	$ 84,603	

Intervention:	Operations research
Description:	Workplace, NGO Support, Social Marketing Intervention

Target Pop:	Business community	**No. of persons reached:**	1	**No. of organizations reached:**	150

Outputs	**Indicators**	**Baseline**	**Target**	**LK Value**	**Date**
Development of indicators for accreditation of companies with HIV/AIDS programs, development of a procedural manual for scoring and accreditation of companies, participation of companies in the project, increased premium reductions, interest of other comp					

Outcomes	**Indicators**	**Baseline**	**Target**	**LK Value**	**Date**
Increased knowledge of HIV/AIDS, appropriate risk assessment, reduction in risk behavior among company employees	Company participation rate, percent of companies with appropriate written HIV policies in past year, percent of companies implementing AIDS workplace activities in past year, employees with positive attitudes about PLHAs	0	0	0	

Activity:	920	Community Level Case Management of Infections in Settings with a High Prevalence of HIV/AIDS

Start Date:	10/98	**End Date:**	7/02		
No. of persons reached directly:	n.a.	**No. of persons reached indirectly:**	n.a.	**No. of organizations reached directly:**	n.a.
Budget:	**LOP:**	$ 361,090	**FY02:**	$ 261,090	

Intervention:	Operations research

Description:	Care and Support Intervention				
Target Pop:	Care givers	**No. of persons reached:**	n.a.	**No. of organizations reached:**	n.a.

Outputs	**Indicators**	**Baseline**	**Target**	**LK Value**	**Date**
The development and assessment of syndromic management guidelines for opportunistic infections for use by drug sellers and other frontline care providers.					

Outcomes	**Indicators**	**Baseline**	**Target**	**LK Value**	**Date**
Improved quality of care among caregivers, improved quality of live of PLHAs	Knowledge on OI care among family caregivers and village health care workers, attitudes about living and caring for PLHAs, use of OI case management tools, reduced number of physical and psychological episodes, decreased duration of episodes	0	0	0	

Activity:	925	Programming for HIV Prevention in Thai Schools			
Start Date:	5/99	**End Date:**	8/02		
No. of persons reached directly:	1000	**No. of persons reached indirectly:**	n.a.	**No. of organizations reached directly:**	n.a.
Budget:	**LOP:**	$ 290,697	**FY02:**	$ 190,697	

Intervention:	Operations research				
Description:	Youth, Stigma and Discrimination Intervention				
Target Pop:	Students	**No. of persons reached:**	1000	**No. of organizations reached:**	n.a.

Outputs	**Indicators**	**Baseline**	**Target**	**LK Value**	**Date**
Increased teacher instructional confidence and comfort with discussing sensitive topics, positive attitude towards living with PLHAs, comfort with participatory teaching skills					

Outcomes	**Indicators**	**Baseline**	**Target**	**LK Value**	**Date**
Reduction in stigma and discrimination towards PLHAs, confidence communicating, negotiating and ability to refuse sex, condom usage among students, increase safe sex among students	Teachers knowledge on HIV/AIDS and gender issues, teachers' confidence to teach sex education, teachers skill in participatory teaching, students' reported positive attitudes toward PLHAs, students reported confidence to refuse sex, consistent condom use	0	0	0	

Vietnam

Horizons

Activity:	1008	Expanding Workplace Prevention Activities in a Highly Mobile Population: Construction Workers in Ho Chi Minh City

Start Date:	5/00	***End Date:***	1/03

No. of persons reached directly:	500	***No. of persons reached indirectly:***	n.a.	***No. of organizations reached directly:***	n.a.

Budget:	***LOP:***	$ 106,181	***FY02:***	$ 50,000

Intervention:	Operations research
Description:	Workplace prevention

Target Pop:	Mobile population(s)	***No. of persons reached:***	500	***No. of organizations reached:***	n.a.

Outputs	***Indicators***	***Baseline***	***Target***	***LK Value***	***Date***
Identification of a cost-effective approach to provide HIV prevention services in the workplace, peer education manual, management motivation materials, exposure of workers to information, skills building and condom use					

Outcomes	***Indicators***	***Baseline***	***Target***	***LK Value***	***Date***
Improved approaches for reduced HIV risk behaviors among migrant workers, increased company participation	Level of management involvement and support of project, reduced HIV/AIDS risk, attitudes and behaviors, process of following migrant populations, increased condom use	0	0	0	

Region: Latin America and the Caribbean: COUNTRY ACTIVITIES

Brazil

Horizons

Activity:	879	Phase II Sex Work and Community Development: Brazil

Start Date:	2/00	***End Date:***	11/02		
No. of persons reached directly:	n.a.	***No. of persons reached indirectly:***	n.a.	***No. of organizations reached directly:***	2
Budget:	***LOP:***	$ 234,009	***FY02:***	$ 145,264	

Intervention:	Operations research

Description:	Community Mobilization				
Target Pop:	Sex workers	***No. of persons reached:***	n.a.	***No. of organizations reached:***	n.a.

Outputs	***Indicators***	***Baseline***	***Target***	***LK Value***	***Date***
Tested indicators, baseline reports, final report	Sex workers and community involvement in activities and other outcomes of interest, e.g.: number of sex workers participating in programs	0	0	0	

Outcomes	***Indicators***	***Baseline***	***Target***	***LK Value***	***Date***
Improved understanding about the process and effects of community development approaches					

Activity:	884	Comparison of Male & Female Condoms in preventing exposure to semen during typical use			
Start Date:	8/99	**End Date:**	7/02		
No. of persons reached directly:	100	**No. of persons reached indirectly:**	n.a.	**No. of organizations reached directly:**	n.a.
Budget:	**LOP:**	$ 158,677	**FY02:**	$ 9,000	

Intervention:	Operations research				
Description:	Study will be carried out in a family planning clinic setting. Study will establish the use effectiveness under normal settings of the female condom compared with the male condom.				
Target Pop:	Family planning clients	**No. of persons reached:**	100	**No. of organizations reached:**	n.a.

Outputs	**Indicators**	**Baseline**	**Target**	**LK Value**	**Date**
Confirmation of the efficacy of the female condom when compared to the male condom and assessment of the appropriateness of package instructions included with male and female condoms.	Study results disseminated to stakeholders through a variety of media.	0	0	0	
	Study addresses objectives in the proposal and is implemented according to study design and time line.	0	0	0	

Outcomes	**Indicators**	**Baseline**	**Target**	**LK Value**	**Date**
Knowledge about the efficacy of condoms in preventing semen exposure	Study completed, results analyzed, report produced and disseminated, publication in scientific literature	0	0	0	

Activity:	1418	Promoting more Gender-Equitable Norms and Behavior among Young Men as a Strategy for HIV/AIDS Prevention

Start Date:	3/02	**End Date:**	4/04		
No. of persons reached directly:	n.a.	**No. of persons reached indirectly:**	n.a.	**No. of organizations reached directly:**	n.a.
Budget:	**LOP:**	$ 178,286	**FY02:**	$ 178,286	

Intervention:	Operations research

Description:	Behavior Change Intervention				
Target Pop:	Youth	**No. of persons reached:**	n.a.	**No. of organizations reached:**	n.a.

Outputs	**Indicators**	**Baseline**	**Target**	**LK Value**	**Date**
Gender-equitable condom promotion IEC materials, peer education curricula	Support for gender-equitable norms around roles in sexual relationships and reproductive health / HIV risk behaviors, reduced HIV risk norms, attitudes and behaviors	0	0	0	

Outcomes	**Indicators**	**Baseline**	**Target**	**LK Value**	**Date**
Effective strategies to promote gender-equitable behaviors and reduced HIV risk behaviors among young men and their partners					

Dominican Republic

Horizons

Activity:	887	Establishing the Efficacy of 100 Percent Condom Program

Start Date:	2/99	***End Date:***	7/02		
No. of persons reached directly:	1000	***No. of persons reached indirectly:***	n.a.	***No. of organizations reached directly:***	n.a.
Budget:	***LOP:***	$ 710,907	***FY02:***	$ 100,000	

Intervention:	Operations research

Description: A total of 1020 female sex workers in 68 commercial establishments will be included in study, which utilizes a time-series design with pre-intervention clinical observation points and then periodic clinical, observational, and behavioral data collections.

Target Pop:	Sex workers	***No. of persons reached:***	1000	***No. of organizations reached:***	n.a.

Outputs	***Indicators***	***Baseline***	***Target***	***LK Value***	***Date***
Informational educational communication materials, research report	Reported condom use, use of informational , educational communication materials in brothels, STD prevalence among sex workers	0	0	0	

Outcomes	***Indicators***	***Baseline***	***Target***	***LK Value***	***Date***
Decreased STI incidence, increased access to condoms, increased regular condom use, increased knowledge about STIs including HIV, increased monthly attendance by CSWs at medical clinics.					

Mexico

Horizons

Activity:	924	Programming for HIV Prevention in Mexican Schools			
Start Date:	6/99	***End Date:***	4/02		
No. of persons reached directly:	1000	***No. of persons reached indirectly:***	n.a.	***No. of organizations reached directly:***	n.a.
Budget:	***LOP:***	$ 245,299	***FY02:***	$ 85,000	

Intervention:	Operations research				
Description:	Youth, Stigma and Discrimination Intervention				
Target Pop:	Students	***No. of persons reached:***	1000	***No. of organizations reached:***	n.a.

Outputs	***Indicators***	***Baseline***	***Target***	***LK Value***	***Date***
Identification of strategies for fostering the adoption of HIV preventive behaviors among youth					

Outcomes	***Indicators***	***Baseline***	***Target***	***LK Value***	***Date***
Reduction in unsafe sexual behavior among school-going adolescents	Course taught and evaluated in Mexican schools	0	0	0	

LOP: Life of Project LK Value: Last Known Value

III. PROBLEMS AND CONSTRAINTS

During the 12-month period, Horizons faced several problems and constraints. One constraint was turn over of key local staff working on studies. In Zimbabwe, Zambia, South Africa, and India, key staff such as study coordinators and in some cases the study principal investigator, resigned. Staff resignations in the Sonagachi study, the ZIMZAMSA study and the Carletonville study resulted in delays in data collection, entry, tabulation and report writing. In all instances, however, through the use of consultants or additional staff resources, the studies have continued.

A second constraint has been political in nature. In Zimbabwe, because of violence related to the elections and the unsettled political situation, field data collection could not take place at two rural sites associated with the Zimbabwe-Zambia-South Africa (ZIMZAMSA) study. These sites were dropped from the study. Fortunately, this study has a total of 16 other sites. Also in Zimbabwe, the male involvement study encountered difficulties when petrol was in short supply and interviewers could not get to the field.

A third constraint was a Congressional hold on HIV/AIDS funds for a number of months. This resulted in cut backs on travel and a delay in the start up of new HIV/AIDS studies.

IV. FINANCIAL SUMMARY

In the first half of this year, the financial situation of Horizons was extremely worrying. By curtailing some activities and postponing spending that was not absolutely essential, monthly expenditures were slashed to about half the normal monthly amount in the first six months of 2002. After the cost extension was approved by USAID in April, the Congressional hold on funds delayed further obligation of funds.

A sizeable obligation in mid-May enabled activities to go forward: essential computer equipment was purchased; Horizons Two Partnership subagreements were obligated; Horizons staff contributed mightily to the International AIDS Conference in Barcelona in July.

The funding pipeline at the end of August 2002[2] is as follows:

Funds obligated to 8/31/02:	$46,326,020
Cumulative expenditures & Obligations to 8/31/02[3]:	$42,253,000
Months funding after 8/31:	5

The financial status report, by SF269 Line Item, to 30 June 2002 is attached.

<u>Cost share goal for Horizons One exceeded</u>

Horizons I cost share goal:	$4 million for the first five years
Cost share documented by 6/30/02:	$6.2 million
Total goal over 10 years:	$7.7 million

[2] Population Council figures for end of September not yet available.
[3] See chart with expenditures by year on following page.

Collaborating Entities

Global

Family Health International/IMPACT

International Center for Research on Women (ICRW)

International HIV/AIDS Alliance

Johns Hopkins University

Population Council/Frontiers Program and partners

Program for Appropriate Technology in Health (PATH)

Tulane University

U.S. Agency for International Development (USAID)

Multilateral

Joint United Nations Programme on HIV/AIDS (UNAIDS)

United Nations International Children's Emergency Fund (UNICEF)

World Health Organization (WHO)

Africa Region

Network of AIDS Researchers in East and Southern Africa

Regional AIDS Training Network

Brazil

DKT

Instituto Promundo

Ministry of Health

National AIDS Program

Oswaldo Cruz Foundation - FIOCRUZ

Programa Integrado de Marginalidade

Sociedade de Estudos E Pesquisas em Drogadiccao (SEPED)

Burkina Faso

Global Network of People Living with HIV/AIDS (GNP+)

Initiative Privée Communautaire

Ministry of Health: Family Health Division; Community Health Lab

Mwanza Action

University of Ouagadougou: Cellule de Recherche en Santé de la Reproduction (CRESAR)

Cambodia

Cambodian Researchers for Development

Khemara

Medecins Sans Frontières

Ministry of Health

National AIDS Program

Dominican Republic

Centro de Orientacion y Investigacion Integral

Centro de Promocion y Solidaridad Humana

Instituto Dermatologico y Cirguia de Piel

Johns Hopkins University

Programa de Control de Enfermedades de Tranmision Sexual

Ecuador

Instituto Juan Cesar Garcia

Kimirina

Ghana

Ministry of Health: National AIDS Program; Health Research Unit (HRU); Family Health Division

Planned Parenthood Association of Ghana (PPAG)

India

Asha Karana

Family Health International's Health Service Delivery Unit

Institute of Economic Growth

International HIV/AIDS Alliance

Ministry of Health: National AIDS Control Organization

National Council of Applied Economic Research

SHADOWS

Shelter

Society for Development, Research, and Training (SFDRT)

Society for Service to Urban Poverty

Socio-Legal Aid Research and Training Centre

St. Joseph of Cluny Hospital

STD/HIV Intervention Programme (SHIP)

Tulane University

Y.R. Gaitonde Centre for AIDS Research and Education (YRG CARE)

Jamaica

Ministry of Health

Kenya

African Population and Health Research Center (APHRC)

CDC - Family Planning and Logistics Management (FPLM)

Coast General Hospital, Mombasa

Family Health International/IMPACT

International Centre for Reproductive Health

Ministry of Health: Kenyatta National Hospital's Adolescent Counseling Clinic; Provincial Health Authorities

Kenya, continued

MSH - Rational Pharmaceutical Management

National AIDS and STD Control Programme (NASCOP)

University of Nairobi

Latvia

Ministry of Health

National AIDS Program

Madagascar

Abbott Laboratories

Family Health International

Fikambanan'ny Vehivavy Mpiakatra An-Tsambon' Antsiranana (FIVMATA)

Ministry of Health

University of North Carolina

Mexico

IMIFAP

National Institute of Public Health

Nepal

Asia Foundation

Nigeria

Association for Reproductive and Family Health

Rwanda

Rwanda School of Public Health

World Vision Rwanda

Senegal

Africa Consultants International (ACI)

African AIDS Research Network (RARS)

Alliance Nationale de Lutte contre le SIDA (ANCS)

Center for Ambulatory Care (CTA)

Centre Regional "Paul Correa" de Formation (CERFORMS)

Ministry of Health: STI/AIDS Division

National AIDS Control Program

National Association for the Fight Against AIDS (ANCS)

National Council for the Fight against AIDS (CNLS)

Organisation Panafricaine de Lutte contre le SIDA au Senegal (OPALS)

Programme Nationale de Lutte Contre le SIDA (PNLS)

Université Cheikh Anta Diop, Institut des Sciences de l'Environnement (ISE)

South Africa

Anglo American Corporation

Council for Scientific and Industrial Research

Department of Education

Department of Health: Kwa-Zulu Natal Provincial Health Department; Mpumalanga Provincial Health Department

Development Research Africa (DRA Development)

ESKOM

Gold Fields, Ltd.

Human Services Research Council (HSRC)

Living in Hope

South Africa, continued

London School of Economics

Medical Research Council

National Union of Mineworkers

Nelson Mandela Children's Fund

Population Council - Frontiers

Progressus

Reproductive Health Research Unit

South African Institute for Medical Research

Southern Africa AIDS Information Dissemination Service (SAfAIDS)

University of Natal - Durban

Young Men's Christian Association (YMCA)

Tanzania

Muhimbili Medical Centre

University of Dar es Salaam: Drama Department; Center for Adolescent Health

Thailand

Chiang Mai University: Community Medicine Department, Faculty of Medicine

International Network of Sex Work Projects (NSWP)

Lampang Provincial Health Office

Ministry of Education

Ministry of Public Health: Center for Disease Control, Region 10

Program for Appropriate Technology in Health (PATH)

Thailand Business Coalition on AIDS

Uganda

AIDS Control Program (ACP)

AIDS Information Center

AIDS Support Organization

Makerere University: Institute of Social Research;
Department of Sociology

Ministries of Health and Education

Naguru Teen Information and Health Centre

Plan

Straight Talk Foundation

USA

Academy for Educational Development (AED)

Center for Disease Control and Prevention

Ford Foundation

Management Sciences for Health

Population Services International/AIDSMark

Save the Children

The Futures Group

University of Alabama - Birmingham

University of California, San Francisco:
Center for AIDS Prevention Studies (CAPS)

University of Hawaii: East-West Center

University of Texas - Galveston

Vietnam

Consultation of Investment in Health Promotion

Ford Foundation

Ho Chi Minh City Labor Union

Ho Chi Minh National University College of Social Sciences and Humanities

Vietnam, continued

Ho Chi Minh Standing AIDS Bureau

Population and Development International

Zambia

CARE International

Family Health Trust

Hope Humana/DAPP

Japan International Cooperation Society (JICA)

Linkages Project (AED)

Ministry of Health: Leprosy and STDs Surveillance Programme;
Ndola District Health Management Team

National AIDS Control Programme

National Food and Nutrition Council

University of Zambia: Department of Psychology;
Tropical Diseases Research Center

Zambia HIV MTCT Working Group

Zambia Integrated Health Project

Zimbabwe

Management Systems International

Ministry of Health

Policy and Praxis

Programme Support Group

Project Support Group

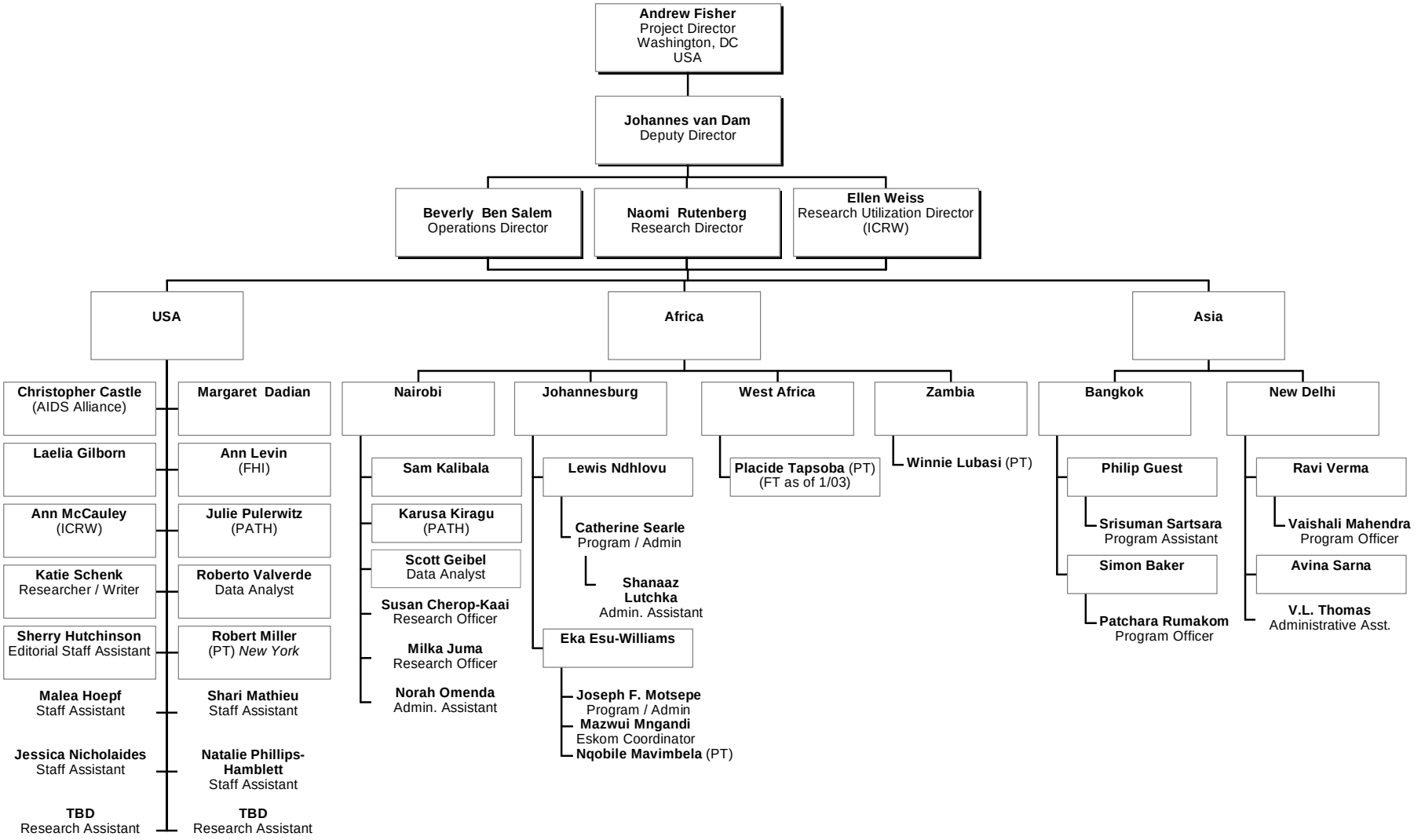
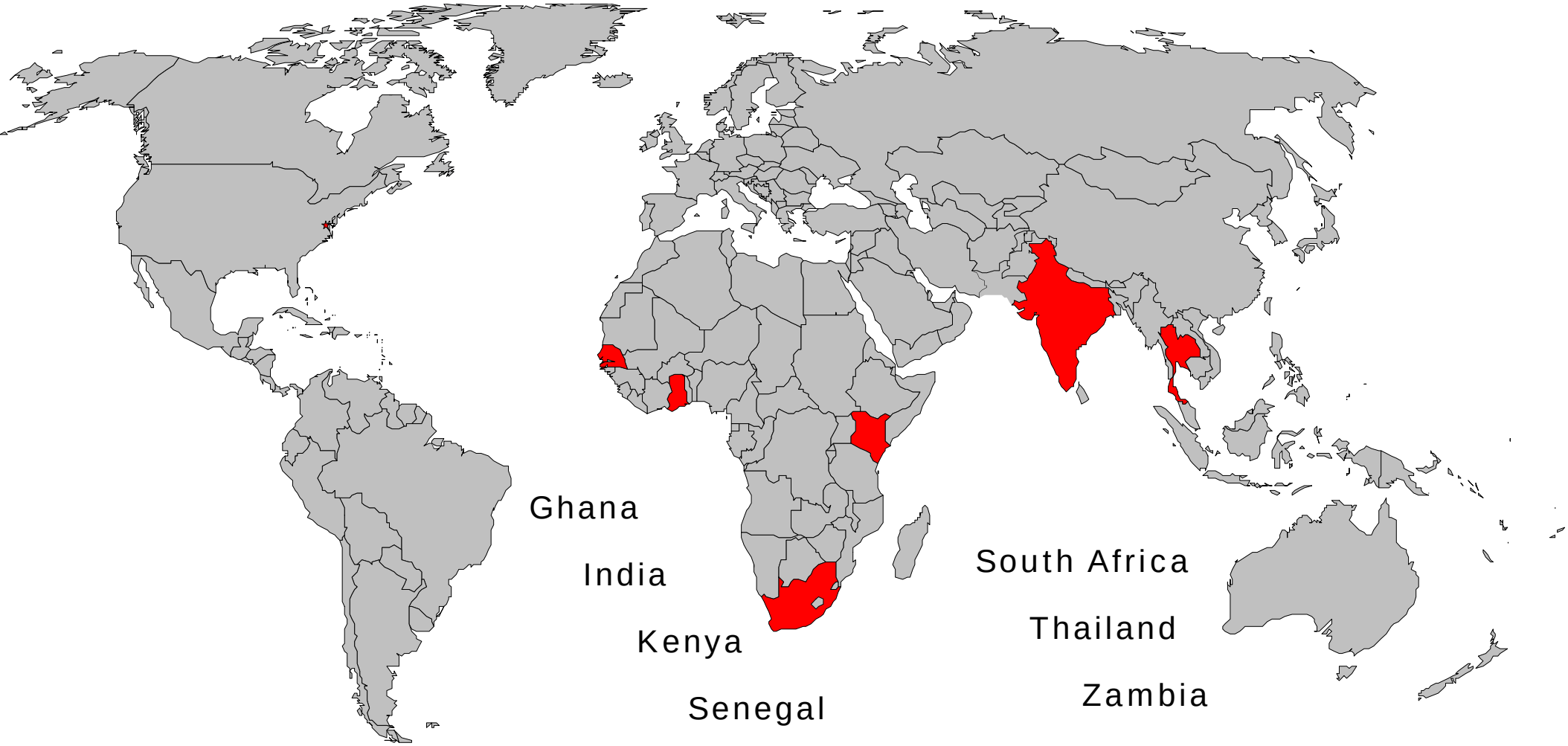
Target Research Ltd.

University of Zimbabwe: Center for Population Studies Trust;
Departments of Psychology and Community Medicine

Zambuko Trust

Horizons has worked in the following countries…

Horizons Program Organizational Chart



Horizons Staff