

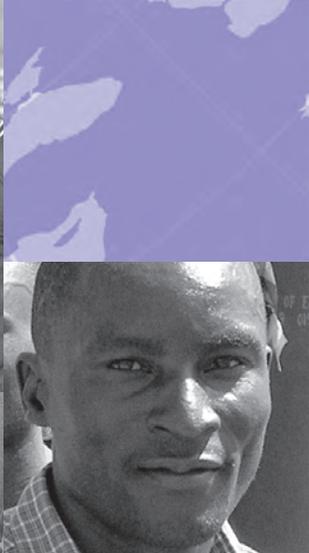
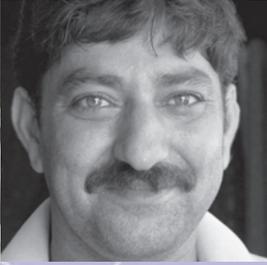


BRAZIL FINAL REPORT

January 1998–September 2001

USAID'S IMPLEMENTING AIDS PREVENTION AND CARE (IMPACT) PROJECT

USAID
FROM THE AMERICAN PEOPLE



Final Report
for the
Implementing AIDS Prevention
and Care (IMPACT) Project
in Brazil

January 1998 to September 2001

Brazil Final Report

Submitted to USAID

*By Family Health International
April 2007*

Family Health International
2101 Wilson Boulevard, Suite 700
Arlington, VA 22201
TEL 703-516-9779
FAX 703-516-9781

In partnership with

**Institute for Tropical Medicine
Management Sciences for Health
Population Services International
Program for Appropriate Technology in Health
University of North Carolina at Chapel Hill**

Copyright 2007 Family Health International

All rights reserved. This book may be freely reviewed, quoted, reproduced or translated, in full or in part, provided the source is acknowledged. This publication was funded by USAID's Implementing AIDS Prevention and Care (IMPACT) Project, which is managed by FHI under Cooperative Agreement HRN-A-00-97-00017-00.

TABLE OF CONTENTS

GLOSSARY OF ACRONYMS	1
EXECUTIVE SUMMARY	2
PROGRAM STRATEGIES, IMPLEMENTATION AND RESULTS	3
Country Context	3
Program Strategies and Activities	3
Implementation and Management	5
Brazil Program Timeline	6
Program Results	7
LESSONS LEARNED AND RECOMMENDATIONS	8
HIGHLIGHTS OF IMPLEMENTING PARTNER ACTIVITIES	9
Implementing Partner Matrix	9
ATTACHMENTS	10
Brazil Financial Summary	10
Technical Assistance Roster	11
Implementing Agency Contact Information	12
Bibliography of Resources Published with FHI Support	13

GLOSSARY OF ACRONYMS

AIDS.....	Acquired immune deficiency syndrome
APROGE.....	Avaliação do Processo Gerencial
ASF.....	Associação Saúde da Família
BSS.....	Behavioral surveillance survey
CA.....	Cooperating agencies
CDC.....	Centers for Disease Control and Prevention
FACT.....	Ferramenta de Avaliação de Capacidade Técnica
FHI.....	Family Health International
HIV.....	Human immunodeficiency virus
IMPACT.....	Implementing AIDS Prevention and Care
JSB.....	John Snow do Brasil
M&E.....	Monitoring and evaluation
MOH.....	Ministry of Health
MOST.....	Management and Organizational Sustainability Tool
MSH.....	Management Sciences for Health
NACP.....	National AIDS Control Program
NGO.....	Nongovernmental organization
PLHA.....	People living with HIV/AIDS
PSI.....	Population Services International
STI.....	Sexually transmitted infection
TA.....	Technical assistance
TAG.....	Technical advisory group
TCA.....	Technical capacity assessment
USAID.....	United States Agency for International Development

EXECUTIVE SUMMARY

In the relatively short period of the Implementing AIDS Prevention and Care (IMPACT) Project in Brazil, FHI contributed both direct technical assistance (TA) and capacity strengthening. With \$2,905,000 in field support funds from the U.S. Agency for International Development, IMPACT provided assistance to state and municipal public sector STI/AIDS programs in four USAID target states (Ceará, Bahia, São Paulo, and Rio de Janeiro) and to the Ministry of Health National STI/AIDS Control Program (MOH/NACP). Beginning with technical capacity and management needs assessments, FHI and its partner, Management Sciences for Health (MSH) developed the Ferramenta de Avaliação de Capacidade Técnica (FACT) tool for evaluation of technical capacity and the Avaliação do Processo Gerencial (APROGE) tool to assess management processes. These tools were then used in nine high-priority states and municipal programs. Based on the results, capacity-building action plans included seven technical training workshops and the development and dissemination of a managerial and technical capacity-building tool kit. Second rounds of assessments followed to monitor and ensure the desired quality improvement.

In addition to technical and management strengthening for staff in various health-related fields, FHI and MSH, at the request of the NACP, provided further technical assistance in strategic planning, including advisory support to develop a methodology for the national development plan. Part of this effort involved adapting the UNAIDS strategic planning methodology to the Brazilian context and developing a manual to guide state level strategic planning. John Snow do Brasil (JSB), FHI's implementing partner, also completed a sustainability study of nongovernmental organizations (NGOs).

From May 1999 to June 2001, FHI/IMPACT maintained an office in Brazil with a Resident Advisor (RA) and several staff who provided direct, consistent technical assistance to Brazil's public sector HIV/AIDS programs and the Ministry of Health. Activities were completed in June 2001, and FHI/IMPACT closed its Brazil office.

PROGRAM STRATEGIES, IMPLEMENTATION AND RESULTS

From March 1998 through June 2001, USAID/Brazil provided \$2,905,000 in field support funds to IMPACT/Brazil. The focus of IMPACT in Brazil was to provide technical assistance to public sector STI/AIDS programs in four target states and to the MOH/NACP. FHI and its partner, MSH, completed technical capacity and management needs assessments that led to technical and managerial development action plans. Based on these assessments, IMPACT/Brazil provided tailored and specialized technical assistance to programs throughout the target areas.

Country Context

Brazil has the largest population in Latin America and ranks fifth in the world, with an estimated 182 million inhabitants. Spanning a vast area between central South America and the Atlantic Ocean, it borders every South American nation except for Ecuador and Chile. The majority of people live in the south-central area, which includes the industrial cities of São Paulo, Rio de Janeiro and Belo Horizonte. Urban growth has been rapid; by 2005, 81 percent of the total population lived in urban areas. This growth has aided economic development but also created serious social, security, environmental and political problems for major cities.

With HIV prevalence at 0.7 percent and approximately 660,000 adults and children living with HIV/AIDS, Brazil accounts for more than one third of the total number of people living with HIV in Latin America. Brazil's epidemic at first affected mainly men who have sex with men and then injection drug users. However, the epidemic has grown more heterogeneous, and heterosexual transmission is responsible for a growing share of HIV infections, with women now accounting for 36 percent of the total number of people living with HIV in Brazil.

Brazil's response to AIDS has benefited from consistently strong political support from the highest level of government, which has led to regulatory policies and a very clear and permanent allocation of financial resources at national, state and local levels. Brazil is the first developing country to achieve universal access to HIV treatment via its national health system. Currently more than 150,000 people have access to free treatment provided through government financing. A crucial factor in this achievement has been the capacity of the country to produce its own HIV medications in both public and private pharmaceutical manufacturing facilities. As a result, the life expectancy of PLHA has increased dramatically. A recent study calculated that median survival was only five months for cases diagnosed in the 1980s, compared to nearly five years for cases diagnosed in 1996. NGOs are active and play an essential role in advocacy and policy development, as well as in the implementation of key HIV/AIDS activities.

Program Strategies and Activities

IMPACT activities in Brazil encompassed two major areas: (1) strengthening the technical and management capacity of HIV/AIDS programs in key geographic regions, and (2) providing technical assistance to the NACP.

Strengthening technical capacity of nine high-priority STI/AIDS programs

In collaboration with key stakeholders, IMPACT designed a technical capacity assessment tool called Ferramenta de Auto-Avaliação de Capacitação Técnica (FACT), to facilitate the identification of priorities for technical assistance in STI/HIV programs. After pilot testing the tool, IMPACT implemented it in nine of the targeted states and municipalities. Findings showed the need for technical

assistance in STI prevention, behavior change approaches and integrating PLHA into program strategies, among others.

After completing these assessments, IMPACT collaborated with each state and municipality to develop technical capacity building plans which were then integrated into their annual workplans.

IMPACT conducted five training workshops in fiscal year 2000 in specific technical areas determined as critical for the STI/AIDS programs:

- Design, implementation and evaluation of STI/AIDS projects/activities
- Harm reduction for injection drug users
- Supervision and monitoring of AIDS prevention activities
- Counseling and testing
- Condom social marketing

In FY01, FHI conducted two more training sessions: “Vulnerabilities and Evaluation of Prevention Activities” and “Participatory Methodology for Facilitators.”

As a key contribution toward sustainability, IMPACT documented the process of providing TA and replicating effective interventions and incorporated it into a “tool kit” for dissemination to other public and NGO sector STI/HIV/AIDS programs. These case studies highlight effective methods that can be replicated in a variety of other settings. The managerial and technical capacity building tool kit (APROGE/FACT tool kit) is used in training workshops and disseminated at conferences.

Strengthening the management capacity of ten high-priority STI/AIDS programs

Through its partner MSH, IMPACT provided TA to selected Brazilian public sector HIV/AIDS programs to strengthen their management capacity. During a workshop with Brazilian STI/AIDS public sector program managers, the Management and Organizational Sustainability Tool (MOST) was adapted to the Brazilian public sector STI/AIDS programs. After pilot testing the adapted MOST tool (named APROGE), management capacity assessments were conducted for all target programs. Findings showed that management technical assistance needs included human resources management, financial sustainability, strategic planning, and monitoring and evaluation of managerial activities.

For each state and municipality targeted, MSH developed a report that prioritized management capacity needs based on the assessment findings. MSH also monitored implementation of the management development plans and provided direct technical assistance to nine STI/AIDS programs in three major areas: (1) team building, (2) elaboration of the definition of roles and responsibilities (for Ceara, Bahia, Fortaleza and Salvador) and (3) strategic planning (for São Paulo State). In FY01, a second round of management needs assessments (APROGE II) was completed for nine programs. These workshops demonstrate a crucial aspect of sustainability: continued support and technical assistance as well as refinement and updating of action plans. The process used to strengthen management capacity was documented and incorporated into the APROGE/FACT tool kit.

Providing technical assistance to the NACP

The MOH/NACP requested technical assistance in strategic planning and development of a monitoring and evaluation system. IMPACT/Brazil sent two representatives and one NACP staff to the Dominican Republic to observe participatory strategic planning. The experience (especially of consensus building) in the Dominican Republic was then integrated into a variety of models later employed in Brazilian states and municipalities.

Next, IMPACT/Brazil provided technical assistance to adapt the UNAIDS strategic planning methodology to the Brazilian context. The NACP and MSH prepared a strategic planning manual as a

guide for state-level strategic planning. During the first six months of 2000, IMPACT participated in a series of workshops promoted by the NACP, which created a new methodology for strategic planning by using parts of three existing methodologies. Participants in the strategic planning workshops included state STI/AIDS coordinators and their deputies, a strategic planning facilitator designated by each state and the STI/AIDS coordinator from the capital municipality in each state. A total of 100 strategic planning facilitators were trained to help prepare state-level strategic plans in all of Brazil's 27 states. Afterward, MSH helped the USAID target states prepare state-level strategic plans.

Monitoring and evaluation was another area in which IMPACT worked closely with the NACP and state/municipal STI/HIV programs. From 1999 to 2000, IMPACT met on a regular basis with the MOH/NACP to develop a National Monitoring and Evaluation Plan. More specifically, IMPACT collaborated with the MOH/NACP in the development of monitoring and evaluation guidelines helped develop a distance learning course, under the guidance of the National School of Public Health.

IMPACT also strengthened its coordination with the NACP, working with it to define its current and future technical assistance needs in the area of management so they could be included in the USAID FY02 work plan. Identified priorities included management technical assistance to implement state-level strategic plans, improving the quality of STD/HIV prevention and care, and implementation of a system to monitor the costs of HIV/AIDS care.

Providing technical assistance to USAID/Brazil and the NACP in a sustainability study among NGOs

At the request of USAID/Brazil, IMPACT established a partnership with the NACP to develop a methodology to measure sustainability among NGOs in Brazil. John Snow do Brasil and Fundação Promundo conducted the study, which was supported equally by the NACP and USAID (through IMPACT funds). The survey was completed in early October 2001 and the results were then presented to the NACP. The findings of the survey were disseminated by Fundação Promundo during Forum 2000, a regional STI/AIDS conference.

Implementation and Management

At first, FHI functioned in Brazil through its implementing partners Management Sciences for Health (MSH) and Associação Saúde da Família (ASF) and did not have an official presence in the country. However, in FY99 USAID and the NACP asked FHI to take more direct control over the program. As a result, FHI hired a resident advisor (RA) and established the new office in May 1999; registration of FHI in Brazil was complete in October of the same year. From this point until program close-out in June 2001, ongoing assistance was provided directly from FHI's RA in Brazil, supplemented by technical and program support from FHI/Arlington. IMPACT/Brazil also maintained a program officer, program assistant, several consultants and a part-time accountant.

Collaboration is a hallmark of IMPACT/Brazil. Throughout the IMPACT/Brazil project, FHI collaborated with the MOH/NACP to strategize and plan appropriate activities, provided requested technical assistance and evaluated project interventions. Subagreements were awarded to ASF, MSH, DKT and JSB to implement some of FHI's activities in Brazil. FHI also collaborated with Pathfinder International, Population Council/Horizons, Population Services International, the International AIDS Alliance and the World Bank on various program activities.

Brazil Program Timeline

Program Activities	FY 1998				FY 1999				FY 2000				FY 2001				
	Quarter	1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4
Program management																	
Drafted and submitted workplan to USAID		X															
Participated in strategic planning exercises and consensus building with stakeholders			X	X													
Redefined workplan to be more demand-driven and to address public sector needs					X												
Hired RA and opened IMPACT/Brazil office								X									
Registered FHI office in Brazil								X									
Close-out of IMPACT/Brazil program															X	X	
Strengthening management capacity of high-priority STI/AIDS programs																	
Adapted management capacity assessment tool for Brazil (APROGE)					X												
Conducted management needs assessment workshops in target states					X	X	X	X	X	X							
Provided TA tailored to state and municipal programs in response to management assessments							X	X	X	X	X	X	X	X	X		
Implemented second round of assessment workshops (APROGE II)												X	X	X			
Strengthening technical capacity of high-priority STI/AIDS programs																	
Developed technical capacity assessment tool (FACT)								X									
Conducted technical capacity assessment workshops in target states								X	X	X							
Conducted training workshops in specific technical areas as a result of technical assessments										X	X	X	X				
Implemented second round of FACT assessment workshops (FACT II)															X		
Completed managerial and technical capacity building tool kit												X	X				
Disseminated tool kit in workshops and conferences												X	X				
Provide technical assistance to the MOH/NACP																	
Provided TA to MOH/NACP on developing a national M&E plan							X	X	X	X							
Provided TA to MOH/NACP related to strategic planning								X	X	X	X	X					
Conducted NGO sustainability survey											X	X					
Participated in International AIDS Conference in Durban, South Africa												X					
Participated in Brazilian STI Conference in Fortaleza, Ceara, Brazil												X					

Program Results

Program outputs: strengthening technical capacity of public sector HIV/AIDS programs

- FACT tool developed for evaluation of technical capacity.
- Technical capacity assessments (FACT) completed in nine high-priority state and municipal programs.
- Technical capacity building plans developed in each of nine programs.
- Seven training workshops conducted in specific technical areas.
- Second round of FACT assessments completed in four of the programs.

Program outputs: strengthening management capacity of public sector HIV/AIDS programs

- APROGE tool developed for Brazil for evaluation of the management process.
- Management capacity assessments (APROGE) completed in ten state and municipal HIV/AIDS programs.
- Management development plans completed in nine programs.
- Second round of APROGE completed in nine state and municipal programs.
- Developed managerial and technical capacity building “tool kit” for dissemination to other public and NGO sector STD/HIV/AIDS programs.

Program outputs: technical assistance to MOH/NACP

- Conducted sustainability study of NGOs working in the HIV/AIDS sector.
- Strategic planning manual written.
- Three FHI and MOH representatives sent to the Dominican Republic for strategic planning training.
- Strategic planning workshops provided for state and municipal HIV/AIDS planning coordinators.
- Monitoring and evaluation guidelines developed with and for MOH/NACP.
- Distance learning course developed with and for MOH/NACP.
- 100 strategic planning facilitators trained to help prepare state-level strategic plans.

LESSONS LEARNED AND RECOMMENDATIONS

Clear communication and open, respectful working relationships are keys to successful collaboration among partners of various nationalities and differing experiences. FHI/Brazil's willingness to adapt and be responsive to the Brazilian government's requests allowed for a collegial and rewarding collaboration.

Lessons

Responsiveness and adaptability of program activities is a crucial key to success.

Based on discussions with NACP, IMPACT revised its work plan to be more participatory and driven by the needs of the federal, state and municipal levels of government. Under the original workplan, IMPACT had planned to use a review team to identify effective intervention models that would then be replicated by states and municipalities. Under the revised workplan, states and municipalities defined their technical assistance needs through the use of a Technical Capacity Assessment tool, which followed more of a bottom-up approach. IMPACT then provided specific technical assistance that was based on findings from the assessments. This approach was well received by USAID/Brazil and the NACP and was responsive to the needs of the target population.

Implementing partners need and value clear communication about their roles and responsibilities.

Relationships among all NGO and government partners need to be clearly understood from the beginning. Key questions emerge early in the process: Which organization is responsible for which part of the work? How will partners report and communicate with each other? How will problems be resolved? How will new issues be incorporated? What new information is needed, and what are the next steps to take? Discussing these issues early in the program helps avoid later dissatisfaction. Working relationships with NGO and government partners are strengthened by clearly identifying the intended roles and responsibilities for each cooperating agency, as well as agreeing on measurable objectives for activities. This communication should take place during initial collaborative efforts and agreements and continue during program activities to ensure that roles and responsibilities are understood and maintained.

Challenges

Transitions in government leadership can change priorities.

Frequent changes in leadership within Brazil's government resulted in shifting priorities for the MOH/NACP, which affected the USAID program of assistance to the MOH. The lack of established and agreed upon goals and objectives for the program created a difficult environment in which to implement activities. The changes in priorities subsequently required that FHI/IMPACT periodically review and revise work plans to respond to the changing priorities and needs of the MOH/NACP.

Establishing a legal presence in Brazil can eat up time and funds.

Brazilian law requires that all organizations operating in Brazil be a registered local entity. FHI initially worked through ASF but registered as an organization after the subagreement with ASF ended. This process required consultations with lawyers and took several months. Unplanned costs and delays accrued throughout the registration process.

Accomplishments

IMPACT helped create a sustainable NGO to implement HIV/AIDS activities in Brazil.

FHI helped establish ASF, a local Brazilian NGO that implements HIV/AIDS activities in Brazil. FHI helped build ASF's capacity so that it would become an independent and sustainable organization. ASF has successfully grown into an active and sustainable NGO in Brazil and is today one of the leading HIV/AIDS groups in the country.

HIGHLIGHTS OF IMPLEMENTING PARTNER ACTIVITIES

Implementing Partners Matrix

FCO#	Recipient Name	Start Date	Completion Date	Life of Project Budget \$US	Total funding \$US
85615	MSH	10/01/00	09/30/01	445,978	352,141
84225	JSB	06/01/00	12/31/00	25,000	25,182
84220	MSH	06/01/98	09/30/00	449,998	444,734
84320	DKT	05/17/99	02/28/00	279,536	208,581
85620	ASF	02/01/99	05/31/99	13,688	13,688
84240	ASF	07/21/98	01/31/99	176,038	160,793
84210	MCCS/ASF	05/01/98	10/31/98	5,000	4,000
84230	ASF	05/18/98	07/20/98	40,315	40,315

Subproject Highlights

Name	Organizational Type	Location	Target Population	Budget \$US	Intervention	Project Dates
MSH	NGO	Boston, MA	NGOs	445,978	Public sector management development	10/01/00 – 09/30/01
JSB	NGO	Brasilia	Government workers	25,000	NGO sustainability study	06/01/00 – 12/31/00
MSH	NGO	Boston	NGOs	449,998	Management capacity building	06/01/98 – 09/30/00
DKT	NGO	São Paolo	General	279,536	Local program management	05/17/99 – 02/28/00
ASF	NGO	São Paolo	General	13,688	Close-out	02/01/99 – 05/31/99
ASF	NGO	São Paolo	General	176,038	Management capacity building	07/21/98 – 01/31/99
MCCS	NGO	São Paolo	General, sex workers	5,000	Material development/translation	05/01/98 – 10/31/98
ASF	NGO	São Paolo	General	40,315	Program design	05/18/98 – 07/20/98

Attachments

Country Program Financial Summary

Beginning in March 1998, USAID/IMPACT committed \$2,905,000 to IMPACT/Brazil; subproject allocations totaled \$1,249,433.

The IMPACT/Brazil program closed in September 2001. Total life of project (LOP) expenses were \$3,069,078.

FCO#	Implementing Agency	Total LOP Budget \$US
85615	MSH	445,978
84225	JSB	25,000
84220	MSH	449,998
84320	DKT	279,536
85620	ASF	13,688
84240	ASF	176,038
84210	MCCS	5,000
84230	ASF	40,315

Technical Assistance Roster

Date	Purpose	Person-weeks
March 1998	Attended HIV/AIDS CA meeting to present IMPACT's Brazil workplan (WP)	2
May 1998	Met with FHI's partners to review ASF subagreement and MSH task order scope of work; finalized WP presentation for NACP/MOH with partners and CAs; presented WP to NACP/MOH and others for feedback; attended HIV/AIDS CA meeting to finalize WP and indicators	3
October 1998	Met with officials of ASF, USAID/Brazil, and MOH to resolve some management and communication issues	1
November 1998	Met with ASF to plan transition to new representative for managing FHI/IMPACT's activities in Brazil; met with lawyer to seek legal advice regarding options for setting up this representative; attended the USAID CA meeting in Fortaleza	2
December 1998	Attended the CAs' Indicators Review Meeting and discussed the redesign of the IMPACT strategy with USAID/Brazil, USAID/Washington and the CAs	1
April 1999	Briefed the director of the NACP and the new HIV/AIDS project officer at USAID on the FHI/IMPACT WP; conducted interviews as part of the recruitment process for an FHI/IMPACT Resident Advisor; met with MSH to discuss coordination of technical capacity building activities with management capacity building activities	2
May 1999	Briefed USAID and CAs on the new direction of the FHI/IMPACT Brazil Workplan and FHI activities; met new IMPACT RA and provided orientation; met with USAID, MOH, MSH and DKT to discuss specific project activities, progress, and objectives; located office space for the FHI/Brazil office; participated in a meeting of the National Evaluation Plan for the AIDS II project to be implemented by the Ministry of Health and subsequent workplan development	2.5
July 1999	Met with USAID and other CAs to present accomplishments from FY99 and discuss proposed activities for FY00; participated in the TCA tool design meeting and an NGO sustainability planning meeting; met with other partners regarding joint project activities	1
December 1999	Conducted monitoring visit to new country office to review accomplishments and planned activities for upcoming year; attended HIV/AIDS CA meeting; participated in the third Brazilian Conference on STD/AIDS Prevention	3
August 2000	Conducted monitoring and planning visit to review program accomplishments and plan activities with FHI do Brasil, MSH, the NACP and USAID/Brazil staff for upcoming year; assisted in preparation for USAID/Brazil mid-term evaluation of HIV/AIDS program; planned FHI's proposed participation in FORO 2000 conference	1
November 2000	Attended and participated in the EpiNet/MAP meeting and the FORO 2000 conference	1
February 2001	Reviewed and revised country program toward an expanded comprehensive program; participated in two-day USAID/Brazil CA meeting and prepared FY02 program outline and budget estimates for USAID	2
March 2001	Reviewed IMPACT/Brazil program including program management and headquarters support; worked with FHI/Brazil staff to redesign program to build upon current program and be responsive to the needs of the National AIDS Control Program and the USAID Mission	.5
June 2001	Verified that close-out was performed in a manner consistent with USAID and FHI policy and procedures, as well as to ensure that the process conformed to Brazilian legal requirements	1

Implementing Agency Contact Information

Agency	Name	Title	Mail
MSH	Mr. Robert Burns	Sr. Contracts Manager	165 Allandale Road Boston, MA 02130-3400
JSB	Mr. Miguel Barbosa Fontes	Project Manager	SRTN Quadra 701 Conjunto C, Numero 124 Sala 314, Ala A Brasilia, Brazil CEP: 70710-200
DKT do Brasil	Mr. Carlos Ferreros	Director	Av. Brig. Faria Lima 1739, 6 th Andar Sao Paolo, Brazil CEP 01452-000
ASF	Dr. Maria Eugenia Lemos Fernandes	President	Rua Heitor Penteado, 47 - Casa 3 Sao Paolo, Brazil 05437-000

Bibliography of Resources Published with FHI Support

Relatório final: Estudo sobre a sustentabilidade institucional das organizações da sociedade civil que atuam em HIV/AIDS, John Snow do Brasil, November 24, 2000

Facilitator's Manual

APROGE/FACT tool kit



Family Health International
2101 Wilson Blvd.
Suite 700
Arlington, VA 22201 USA
Tel: 703.516.9779
Fax: 703.516.9781
www.fhi.org

This publication was funded by USAID's Implementing AIDS Prevention and Care (IMPACT) Project, which is managed by FHI under Cooperative Agreement HRN-A-00-97-00017-00.

Produced April 2007