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# Semi-Annual Report

USAID | Health Policy Initiative IQC  
(October 2008- March 2009)

**April 30, 2009**

This publication was produced for review by the United States Agency for International Development. It was prepared by RTI International.

# USAID | Health Policy Initiative

## **Semi-Annual Report**

Contract No: GPO-I-00-05-00035-00

Period: October 1, 2008 – March 31, 2009

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United States Agency for International Development

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## Abbreviations

A <sup>2</sup>	Analysis and Advocacy
AEM	Asian epidemic model
AIDS	Acquired immune deficiency syndrome
APCOM	Asia Pacific Coalition on Male Sexual Health
APN+	Asia Pacific Network of Positive People
BI	Macfarlane Burnet Institute for Medical Research
CA	Cooperating agency
CBO	Community based organization
CDC	Center for Disease Control
CHAS	Centre for HIV/AIDS and STIs (Lao)
COP	Chief of Party
CTO	Cognizant Technical Officer
FHI	Family Health International
GIPA	Greater involvement for people living with HIV/AIDS
GMR-C	Greater Mekong Region and China
GOC	Government of China
HAARP	HIV/AIDS Asia Regional Program
HIV	Human immunodeficiency virus
HPI	Health Policy Initiative
HPI/TO1	Health Policy Initiative, Task Order 1
HSPH	Harvard School of Public Health
ICRW	International Center for Research on Women
IEC	Information, education and communication
IR	Intermediate result
IQC	Indefinite quantity contract
LAVS	Legal Aid Volunteers Station (Yunnan University)
LTWM	Long-term Working Mechanism
LYAP	Lao Youth AIDS Prevention Program
MARP	Most at risk populations
MMT	Methadone Maintenance Treatment
MOIC	Ministry of Information and Culture (Lao)
MSH	Management Sciences for Health
MSM	Men who have sex with men
NGO	Non-government organization
PSI	Population Services International
PSN	Purple Sky Network
PLHIV	People living with HIV/AIDS
RFP	Request for Proposals
RTI	Research Triangle Institute
S&D	Stigma and discrimination
TRG	Training Resources Group
TWG	Technical Working Group
USAID	United State Agency for International Development

UNDP United Nations Development Programme  
VCT Voluntary Counseling and Testing  
YPAB Yunnan Provincial AIDS Bureau  
YPOA Yunnan Police Officer's Academy



# Introduction

RTI International (RTI) is one of four prime contractors for the USAID | Health Policy Initiative Indefinite Quantity Contract (HPI IQC). Under Contract No. GPO-I-00-05-00035-00, RTI leads a consortium including the Harvard School of Public Health (HSPH), the International HIV/AIDS Alliance (the Alliance), the International Center for Research on Women (ICRW), Management Sciences for Health (MSH), Pact, and Training Resources Group (TRG). IQC objectives are captured in 5 result areas:

- **Result 1:** Policies development and implementation
- **Result 2:** Strengthening champions and supporting advocacy
- **Result 3:** Health sector resources
- **Result 4:** Multisectoral engagement
- **Result 5:** Data used for evidence-based decision making

HPI also addresses crosscutting issues including poverty, gender, human rights and stigma and discrimination.

The RTI consortium currently holds one task order, Strengthening HIV/AIDS Policy and Advocacy in the Greater Mekong Region and China (HPI/GMR-C)<sup>1</sup>, Contract No. GPO-I-01-05-00035-00 which was awarded on September 28, 2007. Achievements and results to date are detailed in the following section.

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<sup>1</sup> At the request of the USAID IQC CTO, RTI changed the Task Order name from *Strengthening HIV/AIDS Policy and Advocacy in the Asia Pacific Region* to *Strengthening HIV/AIDS Policy and Advocacy in the Greater Mekong Region and China*. This name has been approved by the USAID RDM/A CTO for this Task Order and the USAID IQC CTO in Washington, D.C. RTI has submitted a modification request to RDM/A CTO for this Task Order name change.

# Individual Task Orders

**Strengthening HIV/AIDS Policy and Advocacy in the Greater Mekong Region and China (GMR-C)**

# USAID | Health Policy Initiative, Strengthening HIV/AIDS Policy and Advocacy in the Greater Mekong Region and China (GMR-C)

## Task Order Summary

**USAID Task order number:** GPO-I-01-05-00035-00

**Location:** Greater Mekong Regional and China

**Title:** USAID | Health Policy Initiative, Strengthening HIV/AIDS Policy and Advocacy in the Greater Mekong Region and China (HPI/GMR-C)

**Activity Description:** HPI/GMR-C is working in Beijing, Yunnan, and Guangxi provinces in China, as well as in the Greater Mekong Region, to accelerate the development and implementation of HIV/AIDS policy for most-at-risk populations and people living with HIV/AIDS. The project also supports civil society organization and participation in the policy process. HPI/GMR-C is also building advocacy capacity through small grants and technical assistance to local organizations.

**Participating Sub-contractors:** The International HIV/AIDS Alliance, Burnet Institute

## **Program Overview**

HPI/GMR and China operates under the President’s Emergency Plan for AIDS Relief (PEPFAR) and in support of the USAID/Regional Development Mission for Asia (RDMA) strategy of “Increased effective response to HIV/AIDS and other infectious diseases” by contributing to the Program Objective of Investing in People in the Health Program area and Program Elements: 1.1.HIV/AIDS. HPI/GMR-C has two geographical focus areas: China (Yunnan and Guangxi provinces) and the Greater Mekong sub-region. 70% of activities are focused on China and the remaining 30% of effort is directed towards regional activities within the Greater Mekong sub-region activities.

*HPI/GMR-C*’s program in China is carried out in support of the United States Government’s (USG’s) comprehensive and coordinated approach to HIV in China. The project activities are situated in China (primarily in Yunnan, with some outreach activities to Guangxi and, where appropriate, national-level work in Beijing) and the Greater Mekong Region (GMR).

*HPI/GMR-C* is focused on strengthening the policy environment, both formulation and implementation, as it relates to most-at-risk populations (MARPs) —mostly, men who have sex with men (MSM) and people living with HIV (PLHIVs). The program’s strategic approach is to work closely with government and civil society to build their capacity to implement policy and to create mechanisms to facilitate civil society participation in HIV policy development and implementation.

In China, the policy process is followed from the central to the provincial/local level. Models that demonstrably improve the quality of and access to services for MARPs are articulated and documented for replication. Regional level activities center on strengthening the capacity of regional advocacy for MSM and positive communities and implementing the regional advocacy platform for the A2 project.

*HPI/GMR-C* supports activities under three intermediate results (IRs). In accordance with our contract with USAID RDM/A, these three IRs are defined as follows:

- IR1: Policies and plans adopted and implemented
- IR2: Policy champions strengthened
- IR3: Data utilization

## **Achievements**

### ***Management***

HPI/GMR-C, along with the other USAID-funded cooperating agencies (CAs), participated in USAID's review of the Minimum Package of Services (MPS) in China in February and March 2009. Although supportive interventions were not discussed, we welcome the proposed review later on this year.

In year one of this workplan, the International HIV/AIDS Alliance was a sub-contractor responsible for implementing the PLHIV-related regional activities in collaboration with APN+. As part of the year two work planning process and, in discussion with USAID RDMA, it was decided that this role would be undertaken directly by RTI International under HPI/GMR-C umbrella in the remaining years. PACT is now also providing direct support to APN+ and accordingly, PACT and HPI/GMR-C are planning to work together to coordinate their inputs to APN+. A 'handover meeting' chaired by the Alliance and attended by PACT and HPI/GMR-c was held in November 2008. Subsequently, PACT and HPI/GMR-C are coordinating their inputs to APN+.

### ***IR1: Policies and plans adopted and implemented***

#### *China*

Operational Policy Assessments: As planned, the project conducted a number of operational policy assessments within the first six months of Year 2. These assessments were all completed and have provided recommendations that will be acted upon in the remainder of Year 2 and all of Year 3.

- Community Mobilization–Registration of community-based social organizations, Yunnan. A robust and independent civil society sector is a central element of a supportive environment. Accordingly, how to best support community mobilization and development efforts has been a major theme in the project's work plan. To date, community-based organizations (CBOs) have become registered and/or formally constituted under a range of national and provincial regulations, including commercial registration. In September 2008, the Yunnan Civil Affairs Bureau introduced a new policy, known as the Yunnan Provincial Civil Affairs Guidance on the Construction and Management of Community-based Social Organizations, to support increased registration. In November 2008, the project undertook to assess these new guidelines and determine the extent to which they may foster increased community mobilization. The assessment report, titled *Creating Space for Civil Society Participation in Yunnan*, was completed by the end of March 2009. The report expanded upon its original scope and included a review of the advantages and disadvantages of the five options currently available in Yunnan for organizations to register or be formally constituted. A key finding of the report is that the situation is not straightforward and interested groups are advised to take a case-by-case approach, carefully weighing the advantages and disadvantages of each option in light of their mandate, resources, and funding levels. The report has been submitted to USAID for approval.

Follow-up actions have commenced. HPI/GMR-C approached the AIDS Alliance and suggested that we partner to implement follow-up actions and this is underway. In early April 2009, a questionnaire will be distributed to as many CBOs, groups, or nongovernmental organizations (NGOs) as possible in Yunnan to seek information on their registration status, experiences, issues, and barriers. This information will be assessed and presented, along with the assessment report, in a workshop to be co-hosted by HPI/GMR-C and the Alliance in May 2009. We plan to actively follow the registration process and provide technical assistance to support increased registration, which, in turn, should result in diversifying and strengthening the HIV-related civil society sector. Where appropriate, this work will be undertaken in partnership with the Civil Affairs Bureau to ensure a healthy relationship between government and nongovernment sectors.

- Methadone Maintenance Treatment (MMT) program, Yunnan. The Program of Methadone Maintenance Treatment (MMT) Pilot for the Heroin Addicted Community was issued by the central government in 2003 and Yunnan opened its first pilot clinic in April 2004. In December 2007, the Government of China (GOC) ratified the Anti-Drug Law of the People's Republic of China that took effect on June 1, 2008. This new law explicitly supports community-based models of detoxification and rehabilitation, as opposed to compulsory institutional-based rehabilitation. In theory, the MMT policy and the Law should have paved the way for the scale-up of MMT and community-based detoxification programs. However, local officials report that the pilot program has encountered multiple obstacles that have limited its implementation. In late 2008, the Yunnan Provincial AIDS Bureau (YPAB) asked HPI/GMR-C to assist them to conduct an operational policy assessment of the MMT pilot to (1) identify any policy barriers, (2) identify strategies to address barriers, and (3) develop strategies to harmonize health and public security policy approaches. The assessment was conducted from August to December 2008. The report, titled *An Assessment of Issues, Challenges, and Strategies of Methadone Maintenance Treatment*, is in draft form and is currently being edited. Key findings include:
  - Almost half of providers and more than half of the police force responded that MMT undermines anti-drug law enforcement and does not prevent users from using (47% and 59% respectively).
  - Injecting drug users (IDUs) often did not know how to access MMT (26%) and most (61%) continued to use illicit drugs because of inadequate methadone dosing. Transport to MMT clinics and clinic fees were also reported as barriers by IDUs (46%).

The project has commenced follow-up actions. Specifically, HPI/GMR-C consulted with YPAB, Yunnan Police Officer's Academy (YPOA), and HIV/AIDS Asia Regional Program (HAARP) and, as an outcome, the project will support the YPAB and the Public Security Bureau to host a feedback workshop on May 26, 2009, to present the MMT assessment report. This workshop will also be used as a forum to plan next steps. HPI/GMR-C will also work closely with

Population Services International (PSI) and Alliance to address ongoing issues related to MMT. We will also link our MMT work with our voluntary counseling and testing (VCT) and legal work, i.e., to advocate for VCT to be available in MMT sites and to document the violation of legal rights of MMT patients. We are also proposing to review the new Abstinence Regulation currently under development by the Ministry of Public Security to explore how this will impact MMT. It is expected that this regulation will be issued later this year. We will also aim to strengthen the capacity of the Yunnan MMT Working Group, the technical body responsible for implementing the MMT program in Yunnan.

- Long-term Working Mechanism for Yunnan's HIV Prevention and Control Program, Yunnan. The Yunnan teleconference for the New Round of the People's Anti-Drug and AIDS Prevention and Control War on June 25, 2008, and the Yunnan Provincial Party Standing Committee meeting on June 5, 2008, called for the establishment of the Long-term Working Mechanism (LTWM) for HIV/AIDS Prevention and Control. The YPAB sees the LTWM as a crucial tool to effectively control the spread of HIV/AIDS in the province. The LTWM is designed to provide the YPAB with a multisectoral framework for the implementation of the province's HIV response up to 2010. The LTWM is to be developed within the overall context of Yunnan's 11th General Plan for Socioeconomic Development and will consider resource allocation, multisectoral participation and supervision, coordination, and monitoring and evaluation (M&E) systems. The YPAB asked HPI/GMR-C to provide assistance to develop this framework. Accordingly, the project undertook an assessment to articulate the needed elements to develop a sustainable LTWM. The assessment, jointly conducted with the YPAB and the Yunnan Policy Research Institute, was conducted from October to December 2008 and the draft report has been prepared. HPI/GMR-C, in partnership with the YPAB, is using the draft report to inform the development of a policy briefing paper that will assist in promoting the government's approach to HIV and increasing understanding of the LTWM.
- Voluntary Counseling and Testing (VCT), Yunnan and Guangxi.
  - Yunnan Update: As agreed by USAID, Family Health International (FHI) is the lead CA for VCT and is responsible for supporting the Yunnan Center for Disease Control and Prevention (CDC) to address the issues that were raised in our assessment report. The Yunnan CDC organized a preparation meeting to establish a VCT Technical Working Group (TWG) on November 10, 2008. The meeting participants included key government VCT players and CA staff. The group discussed the proposed scope of work of the VCT TWG. Following this preparation meeting, the Yunnan CDC submitted the request to establish the VCT TWG to the Yunnan AIDS Bureau for approval. The request is now pending approval from the Integration Division of the Yunnan AIDS Bureau. We are unable to progress further on this issue until the group is established. However, the CAs have continued to discuss strategies they can collectively undertake to support the demand for VCT. The International HIV/AIDS

Alliance have informed us that they have used HPI/GMR-C policy assessment to inform their work with supporting VCT demand generation among MSM.

- Guangxi Update: The Guangxi VCT assessment was conducted on March 1–5, 2009. A draft report was submitted to HPI/GMR-C by mid-March and this is currently being reviewed. Interestingly, the approach taken in Guangxi varies from Yunnan. The assessment found that real name testing was not a barrier to the extent it was in Yunnan because it only applies to the confirmatory test in Guangxi.

## ***IR2: Policy Champions Strengthened***

### *China*

Strengthening legal policy champions and the HIV legal environment: HPI/GMR-C conducted an assessment of the HIV legal environment in Yunnan in October 2008. The report, titled *Assessment of the HIV Legal Environment: Yunnan, China, October 13-30, 2008*, was approved by USAID in January 2009 and has now been distributed to counterparts and stakeholders in Yunnan and at the central level.

As a result of this assessment, RTI International in partnership with the International Development Law Organization (IDLO), who provided funding, sponsored the Yunnan University Legal Aid Volunteers Station (LAVS) to establish a pilot legal clinic in Yunnan. With agreement from USAID, HPI/GMR-C will contribute technical assistance to support the clinic. The LAVS is a preexisting service that provides free legal services to low income people and families. We are proposing to expand the service by adding a dedicated lawyer and PLHIV peer educators, as well as recruit a roster of pro bono lawyers available for litigation (if required). The service will establish a telephone hotline and Web page for confidential legal advice. This technology will enable legal services to be expanded beyond the static office in Kunming. In addition, a standardized data collection system will be instituted and the clinic will also be a hub for collecting information regarding HIV legal rights and HIV-related stigma and discrimination. This information will be used to inform both policy development and community advocacy efforts. It is envisaged that the clinic will become a center of excellence and will provide a model that can be documented and replicated. Preliminary discussions have also been conducted with the Nossel Institute in Melbourne, Australia, on collaboration on developing an HIV legal research agenda. The Nossel Institute is the research arm of the AusAID-funded HIV/AIDS Asia Regional Program (HAARP).

The proposed clinic is based on the legal clinic model funded by HPI in Vietnam. In June 2009, HPI/GMR-C is proposing to take a small team on a study tour to Hanoi, Vietnam, to meet with the implementers of that model and to learn from their experience.

The legal assessment report has now been distributed to stakeholders and, as a result, HPI/GMR-C is gradually being seen as a resource on HIV-related legal issues in Yunnan. In March 2009, the YPAB recommended to the Yunnan Red Cross that HPI provide

technical assistance on HIV-related legal issues for national HIV and law training in April 2009 in Kunming. As the result, we have provided a legal expert and PLHIV trainers to lead workshop sessions. We have also been approached by a local PLHIV NGO for legal aid and we have referred them to the LAVS.

Strengthening MSM and PLHIV as policy champions: HPI/GMR-C builds the advocacy capacity of MSM groups in several ways: through participation on the MSM TWG in Yunnan, advocacy training, and the allocation of small grants.

MSM TWG, Yunnan: The YPAB approved the establishment of MSM TWG in September 2008 and the meeting was held on December 20, 2008. At this meeting, TWG members discussed Yunnan's MSM TWG Operational Plan with a focus on the roles and responsibilities of its members, whether a standing committee or secretariat is needed, and the TWG's decision-making authority. An election for a new MSM coordinator was held and Mr. Frank Zhao Gang was elected. On March 21, 2009, the first quarterly MSM TWG meeting of 2009 was held. The meeting agenda included the finalization of the TWG Operational Plan, the sharing of the minutes from the recent Purple Sky Network (PSN) regional meeting, and a group discussion on the TWG work plan for 2009. Four government departments, four MSM groups, and two international NGOs (FHI and Alliance) were elected to become the TWG's Secretariat. The 2009 work plan is still being developed and will be finalized on April 13, 2009.

MSM and PLHIV Small Grants: HPI/GMR-C is supporting small grants for MSM and PLHIV organizations that participated in advocacy training to apply their learning to practical issues. The project manages both types of the small grants as one package even though they address different target populations. To date, the project has allocated six small grants (two MSM and four PLHIV grants) for a total of US\$14,547 (see Table 1 for a summary). This is the first time that these organizations have been funded to undertake advocacy activities and it is hoped that these grants will increase their capacity to do advocacy work and strengthen the partnership between communities and government. HPI/GMR-C is closely monitoring the grants program and will document lessons learned. Furthermore, a review meeting is planned for December 2009.

A kickoff workshop to provide an orientation to reporting requirements and provide refresher training in M&E was held on December 16–17, 2008, in Kunming. This meeting was co-hosted by HPI/GMR-C and the Alliance. The Alliance is matching the PLHIV advocacy grants with small grants to support community development. Twenty-five participants attended the workshop. The second day of the workshop focused on a review of basic M&E concepts. Each organization then developed M&E indicators around their grant objectives and activities, described the sources of information they could use to collect the indicator data, and listed any assumptions or constraints they might face in achieving the expected outputs and outcomes. Each group presented their plans to the larger group for discussion and critique. After the workshop, each group expanded, revised, and finalized their plans and submitted them to HPI/GMR-C's Kunming office. The M&E frameworks will form the basis for each organization to report the progress of their small grant.

**Table 1: Summary Table of Advocacy-related Small Grants for both MSM and PLHIV Groups**

<b>MSM GRANTS</b>	<b>ADVOCACY GOAL</b>
Dali Good Friends Start: December 2008 End: August 2009	Advocate for the Dali Prefecture HIV Prevention Office to <ul style="list-style-type: none"> <li>▪ remove requirement to show identity cards prior to seeking VCT</li> <li>▪ establish a special fund to purchase condoms and lubricants</li> <li>▪ develop operational plan to distribute condoms and lubricants</li> </ul>
Consortium of (1) Rainbow Sky, (2) Yunnan Red Plateau Health Education and Counseling Center, and (3) TransChina Start: December 2008 End: August 2009	Advocate for the Yunnan CDC to <ul style="list-style-type: none"> <li>▪ train VCT counselors in strategies for working with MSM and transgenders (TGs)</li> <li>▪ expand VCT sites catering to MSM and TGs</li> <li>▪ provide on-site VCT and results to MSM groups</li> </ul>
<b>PLHIV GRANTS</b>	<b>ADVOCACY GOAL</b>
Gejiu Poplar Tree Mutual Assistance Group Start: December 2008 End: November 2009	Advocate for the Gejiu Provincial Health Bureau to <ul style="list-style-type: none"> <li>▪ reform policy to include free treatment for managing antiretroviral therapy–related side effects</li> </ul>
Kaiyuan Hand-in-Hand Care Home Start: December 2008 End: November 2009	Advocate for the Kaiyuan Civil Affairs Bureau to <ul style="list-style-type: none"> <li>▪ remove the criteria that PLHIV must disclose their HIV status to the neighborhood committee in order to obtain the low income subsidy</li> </ul>
Longchuan Red Ribbon Home Start: January 2009 End: April 2009	Advocate for the Longchuan Provincial Health Bureau to <ul style="list-style-type: none"> <li>▪ revise the management rules on opening MMT clinics to include opening clinics in villages where there more than 50 IDUs</li> </ul>
Mengzi Kangxin Home Support Group Start: January 2009 End: December 2009	Advocate for the Mengzi County Public Health Bureau to <ul style="list-style-type: none"> <li>▪ obtain commitment to allow IDUs who do have or have lost proof of compulsory detoxification to receive MMT services</li> </ul>

PLHIV Advocacy Training: Another round of PLHIV advocacy training is scheduled for June 2009 and will be followed by the allocation of small grants.

Addressing HIV-related stigma and discrimination (S&D) and strengthening commitment to the Greater Involvement for People with HIV/AIDS (GIPA) principle in both Yunnan and Guangxi: HPI/GMR-C is proposing to repeat the 2005 GIPA/S&D survey that was previously administered under the Policy Project in 2005. The 2005 results established the baseline. As agreed by USAID, we are only planning to do the survey in Yunnan and Guangxi and not regionally. On April 3, 2009, the survey will be posted as a Request for Proposal (RFP) with a closing date of May 29, 2009. The RFP stresses the involvement of PLHIVs and we hope that research institutes will consider partnering with a local PLHIV group. It is anticipated that the survey will be conducted from July to September 2009. The results will be widely distributed and will be drawn upon for our ongoing advocacy work with PLHIVs. Specific follow-on activities can be undertaken in Year 3.

### *Regional*

Lao Advocacy Grant: The Burnet Institute is continuing to implement its activity with the Lao Centre for HIV/AIDS and STIs (CHAS) to advocate for the Lao Ministry of Information and Culture (MOIC) to adopt a regulation that allows free advertising in mass media for information, education, and communication (IEC) materials on HIV/AIDS and MSM. This activity has been exploring the possibility of establishing or expanding public service advertising and, thus, expanding mainstream access to public and sexual health and HIV prevention information. However, this requires that the MOIC be desensitized to issues such as sex, sexual health, HIV, and gender. The objective of this activity is to create an environment in which targeted public health messaging through commercial and mass media is possible, opening new channels of communication to high-risk populations who are otherwise hard to access. Funding for this activity was finalized in August 2008 but the start of the activity was delayed because CHAS counterparts were unavailable.

The two main activities under this program have been completed. The first was an introductory HIV and MSM sensitization workshop among Burnet, CHAS, and MOIC staff on November 4, 2008, to provide background on the HIV epidemic in Lao and the disproportionate impact of the epidemic on MSM. The workshop was chaired by Mr. Vanthong Phonchanheuang, Director of the Mass Media Department (Lao). Thirty-eight participants attended the workshop, including 23 high-level officials, 13 journalists from different departments within the MOIC, one representative from Lao Youth AIDS Prevention Program (LYAP), and one representative from PSI.

This was the first meeting at such a high level within the MOIC. The participants were very surprised to learn about the findings of Burnet's late 2007 HIV prevalence study among MSM in Vientiane, the capital of Lao, and their study of young men's sexuality conducted in 2004. The participants admitted that they had heard about transgenders but had never thought about sex between men. Dr. Phengpheth, MSM focal point for CHAS, listed some examples of HIV-related MSM mass media campaigns from other countries

(Cambodia, Vietnam, and Japan) and encouraged the participants to discuss methods that would be suitable for Lao.

Participants from MOIC responded quite enthusiastically. Their general feeling was that the information on MSM and HIV issues was new to them and demonstrated a very real need for the MOIC to play a role in the HIV response. MOIC appropriately highlighted the need to target HIV-related mass media at specific vulnerable groups. Typically, the MOIC clears and approves all print and broadcast media materials distributed in Lao. However, because they are recognized as one of the most conservative ministries, they are sometimes sidestepped by organizations that may fear that their IEC or other media materials could be rejected. Based on participants' reactions at the meeting, there is a new awareness of the need for targeted media and that MOIC can play a supportive role in approving, producing, and disseminating such media.

The second activity was a two-day training session on HIV and MSM issues for journalists that was held in Vientiane on February 25–26, 2009. Twenty-five people participated in the training (17 women and 8 men). Participants included journalists, DJs, and one journalist trainer. The content was similar to the workshop for MOIC staff. The workshop included two small group activities. The first was to discuss what types of media would be effective to reach MSM and what content would be most effective in educating men in the prevention of HIV. The second activity was to practice writing an article about a case study of HIV among MSM. The articles were reviewed for biased or judgmental tone or content. The workshop was effective in raising awareness among the journalists, but it was recommended that further training be offered.

HPI/GMR-C will conduct a review of this program in early May 2009.

Mapping of HIV Programs for MSM: HPI GMR-C is supporting the development of a computer database to manage information on HIV programs targeting MSM and organizational capacity-building needs for local NGOs/CBOs in the GMR. The system is named PRISM—Purple Sky Network Regional Information System on Men Who Have Sex with Men. This initiative grew from the 2008 MSM programming mapping conducted by HPI/GMR-C and the 2008 organizational capacity needs assessment conducted by FHI. PSN members were enthusiastic about the mapping and understood that maintaining this sort of information on an ongoing basis is a critical element for their work in advocating for expanded programs and resources to address HIV prevention and other services for MSM.

The database will contain information related to donors that fund HIV programs operating in each country; technical agencies and their support for HIV programs; and implementing organizations, their HIV programs, and their organizational capacity-building needs. The system will generate summary reports with line listings and tables and simple tallies of program activity by program type, both numerically and graphically. The system is intended primarily for use by country PSN focal points and working groups, but they will also be asked to send their data to the PSN secretariat, which will then merge the data and maintain a regional database.

A functioning draft of the system was demonstrated at the regional PSN meeting in Bangkok on February 19, 2009. Participants provided input and feedback that have been incorporated into a revised version. The revised version will be field tested in Vietnam in April 2009 and in Lao and Thailand in May 2009. After final revisions, the system will be launched and distributed to PSN country working groups during their annual meeting in July 2009.

Resources need estimation study and tool development: HPI/GMR-C, in partnership with the Asia Pacific Coalition on Male Sexual Health (APCOM), is developing an advocacy report reviewing the current level of HIV expenditure, resource needs, and resource availability on HIV prevention programming for MSM in the Asia region. National government decision makers, multilateral and bilateral donors, international NGOs, and MSM community advocates are the target audiences. This report updates the 2006 POLICY Project report, titled *HIV Expenditure on MSM Programming in the Asia-Pacific Region*. The study will focus on Burma, Cambodia, China (Yunnan and Guangxi provinces), Lao, Thailand, and Vietnam. The current study uses country-specific service costing data, as well as country-specific estimates of numbers of MSM. This is different from the 2006 paper, which used a range of 1–5% of MSM within the general population as the baseline estimate and used standard costing across all countries.

In conjunction with this study, a computer tool based on the Excel-based Resource Needs Model is being developed. The tool will allow users to adjust assumptions and base information to produce local resource needs estimates. The tool includes modules on resource availability and program costing for HIV prevention programs, based on the Comprehensive Package of Services that was recommended at a recent World Health Organization/Western Pacific Regional Office/United Nations Development Programme (UNDP) meeting on HIV and MSM in Hong Kong in February 2009. Based on existing program costings or budgets, the tool derives per-beneficiary program costs by MSM subgroup (accessible MSM, such as openly gay men frequenting gay-identified bars and other establishments; and less-accessible MSM, such as gender normative men who do not access gay-identified establishments, male sex workers, transgenders, and incarcerated men), factors for population growth, inflation, and effects of large program scale up to estimate total resource needs. In comparing with currently available resources, estimates of resource gaps are calculated. The tool will also generate graphs showing resource needs over time and by subgroup and resource gaps.

A draft of the tool was reviewed in a focus group with stakeholders hosted by USAID/RDMA in Bangkok in March 2009. Comments and suggestions are being incorporated into the next version of the tool. Note: It was decided to leave the tool focused on prevention in round one and, in Year 3 of this work plan, expand the tool to include care and treatment needs.

An abstract to present the results of the study at the 9th International Congress on AIDS in Asia and the Pacific (ICAAP9) in Bali, Indonesia, in August 2009 has been submitted.

A proposal for a skills-building session on estimating resources for HIV prevention program scale up for MSM has also been submitted to ICAAP9.

Regional PLHIV Activities Support: Following the decision that RTI would take over implementation of regional PLHIV activities under HPI GMR-C, a ‘handover meeting’ chaired by the Alliance and attended by PACT and HPI/GMR-C was held in November 2008. Subsequently, PACT, also funded by USAID to support APN+ and HPI/GMR-C are coordinating their inputs to APN+. In line with our discussion with PACT and APN+, we will concentrate our effort on supporting the advocacy capacity of HIV positive MSM. This links with our other regional work on MSM and the costing activities. As discussed in the MSM regional section of this report, we are proposing to expand the MSM costing too (in workplan year 3) to address care and treatment issues. Working with APN+ positive MSM steering committee will be a strategic way to increase advocacy capacity in this area.

Prior to the completion of the HPI/GMR-C/Alliance subcontract and within this reporting period, the Alliance undertook a capacity building assessment in Kuala Lumpur, Malaysia conducting a workshop with local PLHIV groups to assess the feasibility of establishing a national PLHIV network. There were 43 workshop participants including 10 women and 7 self identifying Transgenders. The follow on from this work will not be undertaken as part of this ongoing workplan.

### ***IR3: Data utilization***

#### *China*

A<sup>2</sup> in Guangxi: Over the past six months, HPI/GMR-C has continued to work closely on the A<sup>2</sup>. In October 2008, we conducted a monitoring trip and, as a result, we learned that the Guangxi CDC staff did not fully understand the Resource Needs Module. The CDC requested additional technical assistance and we provided data collection assistants to update the Goals inputs. Professor Yuan Jianhua from the Beijing Institute of Information and Control provided technical oversight of the Goals modeling and the Asian Epidemic Model (AEM)/Goals link to develop policy scenarios. We had planned to complete this by December 2008. However, delays beyond our control meant that we were unable to complete the modeling until early March 2009. Based on the updated Goals Model and the AEM/Goals link, the Guangxi CDC has drafted a policy brief. The report was reviewed by both HPI/GMR-C and FHI in late March 2009. We are waiting for it to be sent back to us for a final review and to discuss next steps. FHI is the lead on the policy brief. A detailed (40 pages) Goals technical report has also been produced by the consultant working for HPI/GMR-C HPI has elected not to translate this into English because the report’s value is directly linked to the modeling and the more useful report is the policy brief. The Goals technical report has been submitted to USAID (in Chinese) as a record of the modeling.

In addition to input into the general policy brief, HPI/GMR-C is working on its advocacy

program. A week-long advocacy training workshop is planned for June 15–19, 2009. Participants from the Guangxi government department and relevant stakeholders will be invited to attend. In August 2009, we will, in partnership with FHI, co-fund the CDC to host a Senior Policy Symposia with a focus on MARPs. HPI/GMR-C, in partnership with the CDC, is planning to produce an MSM-specific policy brief outlining costing issues and policy implications.

### *Regional*

A<sup>2</sup> Regional Activities: The main focus of regional A<sup>2</sup> activities has been on drafting and finalizing the new A<sup>2</sup> guidelines. The Regional Management Team had a teleconference on 10 March 2009 to review progress of the guidelines and to discuss strategies for fast-tracking their production. The guidelines have been through several iterations and are due for completion in June 2009. An abstract on A<sup>2</sup> was submitted to the PEPFAR Implementer’s Conference was accepted as a poster presentation. HPI/GMR-C is currently discussing with USAID/RMDA the feasibility of attending this conference. A face-to-face meeting of the Regional Management Team is scheduled for 30 April.

During this reporting period, the A<sup>2</sup> collaboration presented the following:

- “From Data to Impact: Using Health Care Data for results’ Conference. Presented “Integrated Analysis and Advocacy (A<sup>2</sup>): Project Overview” - 29 January 2009, Arusha, Tanzania. Authors: Tim Brown, Felicity Young and Anthony Bondurant. Presented by Tobie Saidel on behalf of the A<sup>2</sup> collaboration
- UNAIDS Second Surveillance Meeting. Presented “ A<sup>2</sup> Evidence to Action” – 5 March, 2009, Bangkok, Thailand. Authors: Time Brown, Felicity and Anthony Bondurant. Presented by Anthony Bondurant on behalf of the A<sup>2</sup> collaboration.

### **Other Important Meetings**

HPI/GMR-C has attended the following meetings during the reporting period:

- Tenth anniversary meeting of the National Center for AIDS/STD Control and Prevention (NCAIDS) and the first HIV/AIDS scientific forum of China in Beijing on October 22–23, 2008. Hu Bin attended.
- Ministry of Health joint supervision meeting in Guangxi for international aid project on November 3, 2008. Hu Bin attended.
- China’s First Forum on AIDS on Site Prevention and Control, organized by the Chinese Preventive Medicine Association, on November 28, 2008, in Beijing. Hu Bin attended.
- World AIDS Day event on December 1, 2008, in Beijing organized by the Joint United Nations Programme on HIV/AIDS (UNAIDS) and State Council AIDS Working Committee Office. Hu Bin attended.

## Key Achievements

Key project achievements during the reporting period are as follows:

### ***IR1:***

#### China

- Completed the first analysis of the policy environment as it relates to NGO formation and legal registration in Yunnan
- Completed the policy operational assessment on MMT in Yunnan and submitted abstracts to ICAAP
- Completed the study on LTWM in Yunnan
- Completed the VCT assessment in Guangxi

### ***IR2:***

#### China

- Successfully leveraged an additional US\$76,886 over two years from the IDLO to support the establishment of the HIV legal clinic

#### Regional

- Successfully leveraged an additional US\$45,000 from the UNDP to support a workshop (in July 2009) to field test the MSM costing tool and plan advocacy efforts

### ***IR3:***

#### China

- Updated and linked Goals Model data with AEM in Guangxi
- Drafted policy brief that is now under review by all partners
- Drafted Goals Model technical report and is currently under the review by all partners

## Problems Encountered

No problems were encountered in this reporting period.

## Documentation of Best Practices that Can Be Taken to Scale

None

## Upcoming Events

### ***China***

- A<sup>2</sup> Regional Management Team meeting, April 30, 2009
- NGO Registration Workshop, May 21, 2009

- MMT Workshop, May 26, 2009
- Legal study tour to Hanoi, Vietnam, June 8–12, 2009
- Joint CA work planning meeting, June 17–19, 2009
- A<sup>2</sup> Advocacy Training, Guangxi, June 15–19, 2009
- PLHIV Advocacy Training, Yunnan, June 22–26, 2009
- Small Grants mid-term review, Yunnan, June/July 2009
- PLHIV small grants announcement, June 2009
- HIV Legal Workshop co-hosted with YPAB, Yunnan University, and Justice Bureau, July 2009 (date to be confirmed)
- S&D and GIPA survey, Guangxi and Yunnan, July–September 2009
- A<sup>2</sup> Senior Policy Symposia, Guangxi, August 26, 2009
- C&T TWG meeting—no dates right now
- MSM TWG quarterly meeting planned for both Guangxi and Yunnan

### ***Regional***

- Comprehensive Package of Services Consensus Meeting and Resource Needs Workshop, Bangkok, Thailand, June 28–July 2, 2009

### ***General***

- RTI's Chief Executive Officer and President, Dr. Victoria Haynes will be visiting Kunming from 1 – 3 July and Bangkok from 4 to 7 July.
- ICAAP conference, Bali, Indonesia, August 9–14, 2009