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AIDSCAP

**SUMMARY OF
ACCOMPLISHMENTS** SEPTEMBER 1994



- Over 850,000 people reached with HIV prevention education.
- Almost 40,000 people trained to support HIV/AIDS programs in their countries.
- Nearly 62 million condoms sold or distributed (90 percent sold through social marketing projects).
- HIV prevention programs underway in over 30 countries.
- Providing technical and financial support to over 79 nongovernmental organizations (NGOs) and private voluntary organizations (PVOs) for community-based AIDS interventions.
- Consensus built among government ministries, the USAID Mission, NGOs and other donors in each of 20 countries on a multi-year HIV prevention strategy and a detailed plan for translating that strategy into action.



AIDSCAP builds local capacity to prevent HIV/AIDS by working with government ministries and nongovernmental organizations to design, implement and evaluate prevention programs. Almost 80 percent of AIDSCAP activities in developing countries are carried out by NGOs and U.S.-based PVOs.

Family Health International spearheads the project in collaboration with its nine subcontractors:

- The Program for Appropriate Technologies in Health, Prospect Associates, and Ogilvy Adams & Rinehart for behavior change communication;
- Population Services International (PSI) and John Snow, Inc., for condom supply and distribution;
- The University of Washington at Seattle, the University of North Carolina at Chapel Hill, and the Institute for Tropical Medicine in Antwerp for STD prevention and control; and
- The Center for AIDS Prevention Studies, University of California, San Francisco, for behavioral research.



AIDSCAP was designed to capitalize on USAID's previous experience in HIV prevention through the AIDSTECH and AIDSCOM projects.

The project focuses on preventing sexual transmission of HIV, which accounts for three-fourths of all HIV transmission worldwide. Its approach incorporates the three strategies that have proved most effective in preventing HIV: 1) encouraging people to change their behavior to avoid HIV infection or transmission; 2) improving treatment and prevention of other sexually transmitted diseases (STDs) that enhance the spread of HIV; and 3) making affordable, acceptable and high-quality condoms readily available.

AIDSCAP relies on the proven ability of PVOs and NGOs to reach communities with AIDS prevention messages and condoms.

In order to achieve a measurable impact on the epidemic, AIDSCAP concentrates most of its resources in a select number of "priority" countries. These countries include Cameroon, Ethiopia, Kenya, Nigeria, Senegal and Tanzania in Africa; India and Thailand in Asia; and Brazil, the Dominican Republic, Haiti and Jamaica in Latin America and the Caribbean. The project provides technical assistance to other USAID-supported countries upon request.



Demand for the project's services has far exceeded expectations. AIDSCAP was originally expected to design and support comprehensive prevention programs in 12 to 15 countries and to provide limited technical assistance in a small number of additional countries. Since FY 1992, AIDSCAP has designed large-scale programs in 20 countries and provided technical assistance in another 13.

AIDSCAP was expected to work in four countries during its first year. By the end of FY 1992, the project had responded to Mission requests for assistance in 15 countries.

As of June 1994, USAID Missions and Bureaus had committed a total of \$96.5 million to the AIDSCAP Project, of which \$38.2 has already been received (against a life-of-project target of \$100 million).

Host-country governments also look to AIDSCAP for technical advice and strategic guidance. In Brazil, for example, AIDSCAP has helped the government procure condoms, design a strategy for including AIDS education into the school curriculum, and plan the implementation of a \$250-million World Bank loan for HIV/AIDS programs.



AIDSCAP works closely with the World Health Organization and other multilateral and bilateral organizations to coordinate activities in developing countries and provide guidance to HIV/AIDS prevention programs worldwide. Examples include AIDSCAP's collaboration with:

- the World Health Organization's Global Programme on AIDS (WHO/GPA) to validate proposed guidelines for treating STDs in areas where laboratory services are not available or too expensive and to develop standard measures for evaluating HIV prevention programs around the world;
- UNICEF to provide technical assistance in evaluation and information dissemination to UNICEF field offices;
- WHO/GPA and the Program for Appropriate Technologies in Health to develop diagnostic tests to detect STDs, especially in women; and
- WHO/GPA and the Center for AIDS Prevention Studies to carry out a definitive study on the effectiveness of voluntary AIDS counseling and testing in preventing HIV transmission.



AIDS prevention programs throughout the world are constrained by inadequate supplies of condoms and STD drugs. To overcome this limitation, AIDSCAP works with governments and the private sector to find new sources of funding for condoms and STD drugs. As a result of the efforts of PSI and its affiliate DKT International to generate condom donations, more than 50 percent of the condoms distributed or sold in AIDSCAP projects in FY 1993 came from non-USAIID sources.

AIDSCAP also works with private industry to convince business owners and managers that AIDS prevention makes good business sense and to help them design AIDS prevention programs for their employees. In Brazil, for example, AIDSCAP support for a model workplace prevention program at Shell Oil that will reach almost 250,000 people leveraged a \$224,000 contribution from Shell, plus a substantial amount of free national television exposure for AIDS prevention on Shell's weekly program. AIDSCAP also received a \$10,000 donation from the Levi Strauss Foundation in Brazil to produce educational materials.



AIDSCAP works with government officials and other decision makers to help them develop and sustain policies to support HIV/AIDS prevention.

- In Honduras an AIDSCAP presentation of the projected social and economic impact of AIDS to 350 government ministers, journalists, and business, community and religious leaders led to the creation of a senior-level AIDS advisory committee chaired by the First Lady of Honduras, widespread media attention and increased commitment of resources for prevention from donors.
- A similar presentation to decision makers in the Dominican Republic contributed to the passage of new legislation outlawing discrimination against people with HIV or AIDS and mandating that every ministry develop a plan to address the epidemic.
- Indonesian policy makers who participated in AIDSCAP policy tours in Thailand continue to meet regularly to discuss how they can use what they learned from the Thai approach to improve HIV/AIDS prevention efforts in their own country.
- In Brazil the federal government eliminated a 15 percent import tax on condoms, making condoms more accessible to lower-income people. The decision to eliminate an import duty on condoms was a result of a lengthy process of analytical review with assistance from AIDSCAP and advocacy by the AIDSCAP resident advisor and other AIDS prevention activists.



AIDSCAP improves access to condoms and promotes their correct and consistent use through social marketing and by distributing free condoms in many of its community-based activities. Condom sales and distribution figures continue to rise. During the first three months of 1994, AIDSCAP distributed more than 11 million condoms.

- In Ethiopia, PSI began condom social marketing even before the fall of the communist government. In 1991, 3.8 million condoms were sold. With the addition of AIDSCAP support, sales increased dramatically, totalling 11.7 million in 1993.
- In Haiti, despite difficult conditions and a history of opposition to condom use in the country, condom sales rose from 580,000 in 1991 to 4 million in 1993.



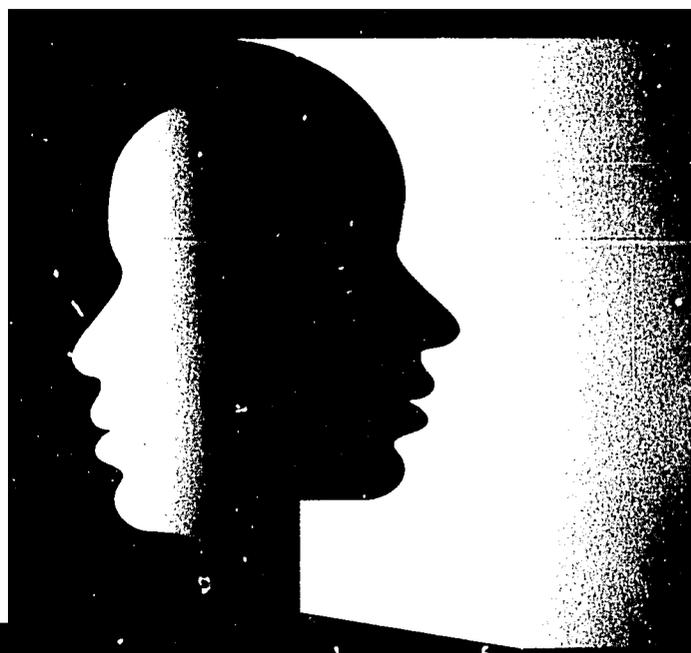
AIDSCAP pioneers innovative ways to reach people at risk of HIV infection through targeted prevention messages, to change social norms to support safer sexual behavior, and to improve access to condoms and STD treatment. Examples include the following:

- AIDSCAP is the only internationally funded program that blankets large communities of hundreds of thousands of people with the three core prevention interventions (behavior change, condoms, STD control) simultaneously. AIDSCAP's programs are being evaluated before, during and after implementation to assess the effectiveness of this strategy.
- Recognizing that AIDS does not respect national boundaries, in Asia AIDSCAP has identified "areas of affinity" that are related culturally, politically, economically, demographically or epidemiologically. This unique strategy allows AIDSCAP to design interventions that reach mobile populations, such as transport workers, business travelers, commercial sex workers and migrant laborers, who may be at higher risk of acquiring HIV infection than more stable populations. Multilingual, multicultural interventions in special sites (border crossings, hotels on both sides of a border, clandestine commercial sex establishments) also distinguish this strategy from conventional prevention programs.
- In Thailand AIDSCAP is testing a community mobilization model for behavior change that targets sexually active young adults in the city of Bangkok and reaches them through their social networks at work and in the community. AIDSCAP supports an



AIDS Center for the Bangkok Metropolitan Administration, which serves as the focal point for all prevention activities. Here private- and public-sector organizations working in HIV prevention meet monthly to share information on successful interventions and changes in risk behavior and to coordinate governmental and nongovernmental efforts.

- In Cameroon AIDSCAP designed and pilot tested an innovative but controversial strategy for improving access to STD treatment. Although this approach, which uses private-sector health services for STD diagnosis and sale of complete STD treatment kits, did not prove feasible in Cameroon, five other countries have expressed interest in adapting the model. These pilot projects could result in improved access to quality treatment for millions of people in developing countries, where most STDs go untreated.
- The project's rapid-response program enables AIDSCAP resident advisors to provide support quickly to local NGOs for small, community-based interventions. Funding of less than \$5,000 for rapid-response activities can be awarded within a few weeks. Activities funded by the rapid-response program include World AIDS Day AIDS awareness activities, drama presentations and production of educational materials. In Kenya, for example, AIDSCAP supported performances of a play, "All Positive," by the Rotaract Club of the University of Nairobi at 21 universities, colleges and training institutions.



AIDSCAP

AIDSCAP headquarters is located in northern Virginia, with regional offices for Africa, Asia and Latin America and the Caribbean (LAC), and country offices in more than 15 countries.

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