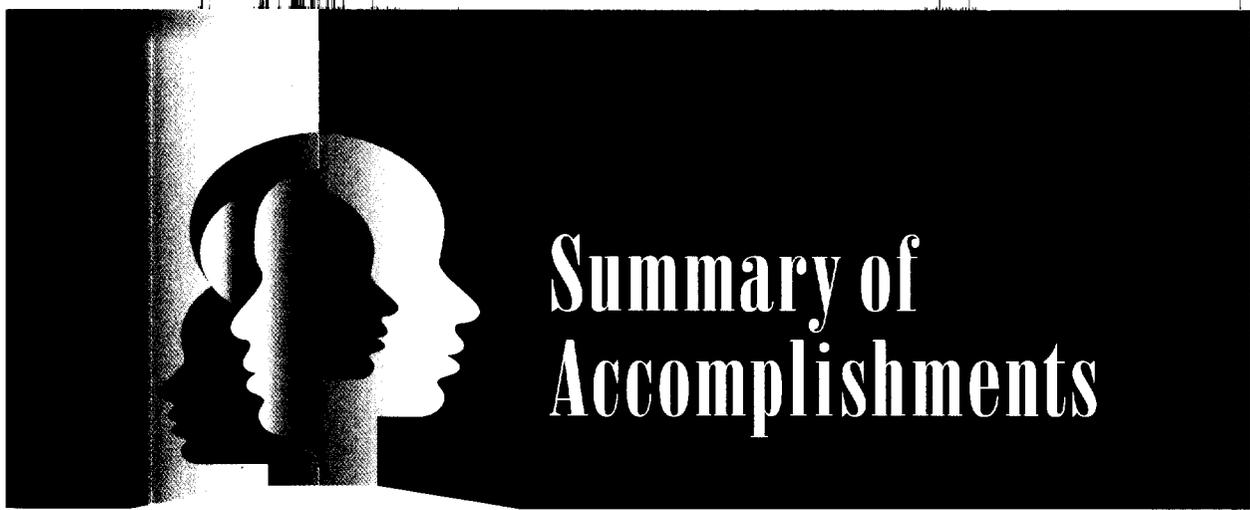




**AIDSCAP**

**SUMMARY OF  
ACCOMPLISHMENTS 1995**



**F**unded by the United States Agency for International Development (USAID) and implemented by Family Health International, the AIDS Control and Prevention (AIDSCAP) Project has:

- Reached more than 3.2 million people with HIV/AIDS prevention education.
- Trained almost 59,000 people to support HIV/AIDS programs in their countries.
- Distributed or sold over 118 million condoms (90 percent sold through social marketing projects).
- Directed HIV/AIDS prevention programs in over 40 countries.
- Provided capacity building to more than 210 governmental and nongovernmental organizations (NGOs) to design, manage and evaluate HIV/AIDS prevention programs. AIDSCAP capacity building assistance includes technical, organizational and management skill building, and network and organizational system strengthening.
- Built consensus among government ministries, the USAID Mission, NGOs and other donors in each of 20 countries on a multiyear HIV prevention strategy and a detailed plan for translating that strategy into action.



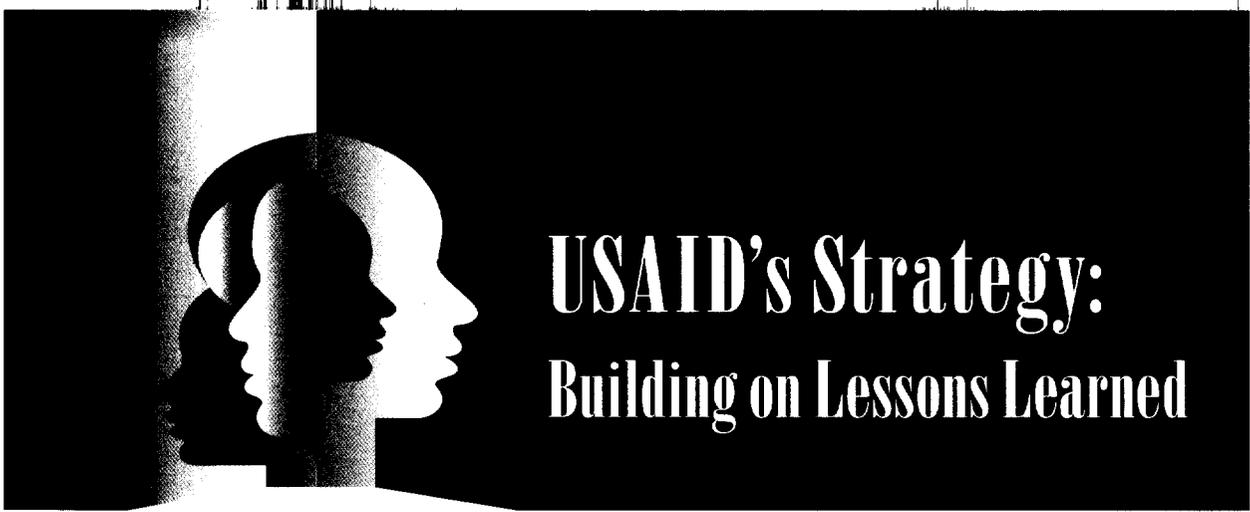


**A**IDSCAP builds local capacity to prevent HIV/AIDS by working with government ministries and nongovernmental organizations to design, implement and evaluate prevention programs. Almost 80 percent of AIDSCAP activities in developing countries are carried out by NGOs and U.S.-based PVOs.

**F**amily Health International spearheads the project in collaboration with its nine subcontractors:

- The Program for Appropriate Technology in Health, Prospect Associates, and Ogilvy Adams & Rinehart for behavior change communication;
- Population Services International (PSI) and John Snow, Incorporated (JSI), 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.





**A**IDSCAP 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 have 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, Rwanda, Senegal and Tanzania in Africa; India, Indonesia and Thailand in Asia; and Brazil, the Dominican Republic, Haiti, Honduras and Jamaica in Latin America and the Caribbean. AIDSCAP also has major programs in South Africa, Zimbabwe and Nepal. The project provides technical assistance to other USAID-supported countries upon request.





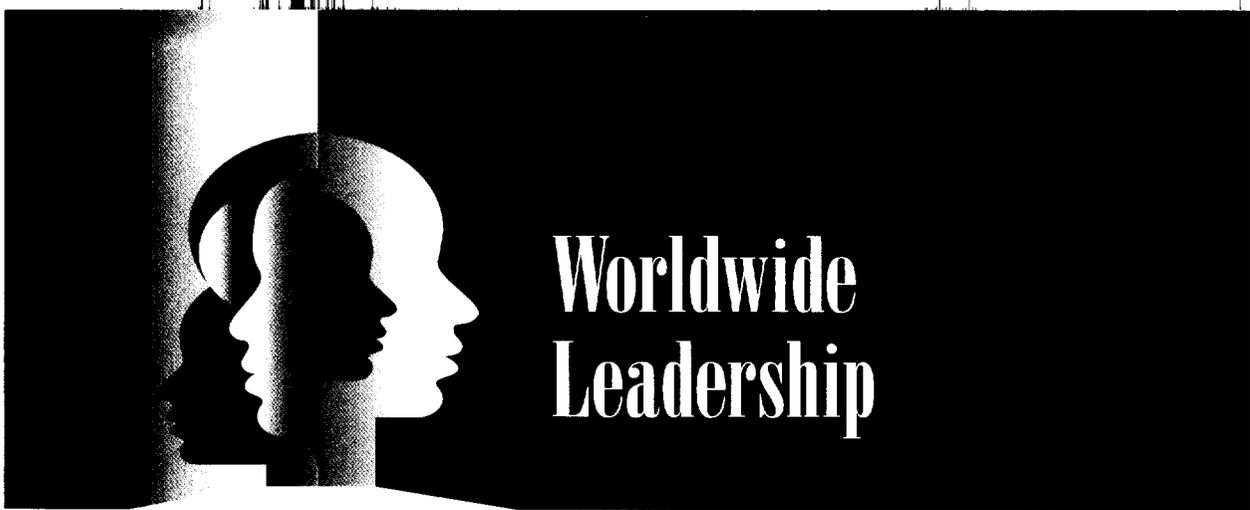
**D**emand for the project's services has far exceeded expectations. AIDSCAP was originally expected to design and support comprehensive prevention programs in 12 to 15 countries and to provide limited technical assistance in a small number of additional countries. Since fiscal year (FY) 1992, AIDSCAP has designed large-scale programs in 22 countries, implemented projects in another 22 countries, and provided technical assistance in another 5.

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

As of June 1995, USAID Missions and Bureaus had committed a total of \$94.2 million to the AIDSCAP Project, of which \$77.7 million 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 to establish a national condom logistics system, design a strategy to include AIDS education in the school curriculum, and provided technical assistance to the National HIV/AIDS/STD Prevention and Control Program. In addition, AIDSCAP has participated as a member of the State Scientific Commission for STDs and AIDS Prevention, which advises the State Secretary of Health on policies and scientific matters.





**A**IDSCAP 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 Technology in Health to develop diagnostic tests to detect STDs, especially in women.
- 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.





**A**IDS prevention programs throughout the world are constrained by inadequate supplies of condoms and drugs for STDs. To overcome this limitation, AIDSCAP works with governments and the private sector to find new sources of funding. As a result of the efforts of PSI and its affiliate DKT International to generate condom donations, more than 30 percent of the condoms distributed or sold in AIDSCAP projects in 1994 came from non-USAID sources.

**A**IDSCAP leveraged a commitment of at least US \$7,500 a year from the National Railways of Zimbabwe (NRZ) for phase two of their HIV/AIDS prevention project. In phase one of the project NRZ developed an organizational HIV prevention policy, trained 26 coordinators and 69 peer educators, and started HIV awareness-raising activities at worksites. With technical assistance from AIDSCAP, 141 more peer educators will be trained and HIV prevention counseling and education activities will be expanded to all 60 railway sites.

**A**IDSCAP also works with private industry to convince business owners and managers that AIDS prevention makes good business sense. The Private Sector AIDS Policy Presentation (PSAPP) is one way in which AIDSCAP provides information and guidelines to help implement HIV/AIDS prevention policies and programs in the workplace. In a modular format, PSAPP presents guidance in all phases of workplace HIV/AIDS prevention program development, including training of trainers, developing presentations and organizational policy, and conducting one-day workshops and workplace needs assessments.





**A**IDSCAP 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 given 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, to widespread media attention and to increased commitment from donors of resources for prevention.
- 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 them more affordable for lower-income people. The decision to eliminate an import duty on condoms was the result of a lengthy process of analytical review with assistance from AIDSCAP and advocacy by the AIDSCAP resident advisor and other AIDS prevention activists.





# Making Condoms Accessible

**A**IDSCAP 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 five months of 1995, AIDSCAP distributed more than 24.9 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, as of April 1995 33.3 million condoms had been sold.
- 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. By April 1995, 10.6 million condoms had been sold.
- In Rwanda, AIDSCAP/PSI social marketing efforts have continued in spite of civil strife. PSI was forced to leave Rwanda in April 1994 but returned in March 1995. A total of 1.2 million condoms have been sold and 1.1 million have been distributed to Rwandan refugees in camps in Tanzania.
- In the Dominican Republic, AIDSCAP and JSI have instituted a private sector leveraging program to complement the existing condom distribution program. USAID is providing 9 million condoms for this two-year activity.





**A**IDSCAP pioneers innovative ways to reach people at risk of HIV infection through targeted prevention messages, helps to change social norms to support safer sexual behavior, and improves 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, and 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, AIDSCAP has identified "areas of affinity" in Asia 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 at 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

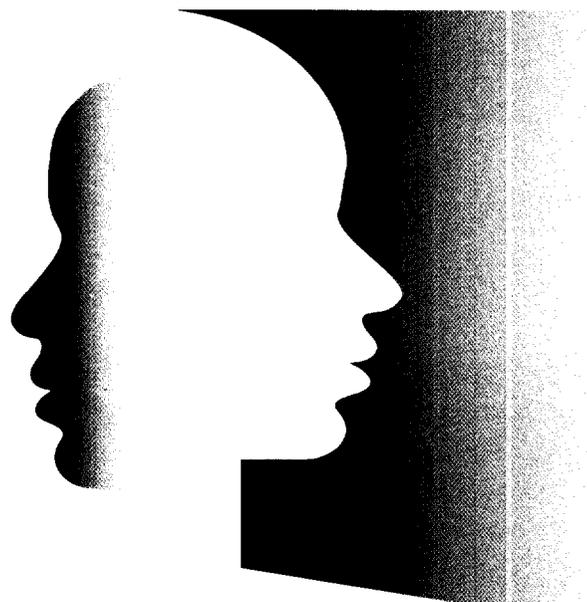




AIDS Center for the Bangkok Metropolitan Administration, which serves as the focal point for all prevention activities. Here private- and public-sector organizations working in HIV prevention meet monthly to share information on successful interventions and changes in risk behavior and to coordinate 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. Examples of the more than 131 activities funded by the Rapid Response Program include World AIDS Day AIDS-awareness activities, drama presentations and the 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

**A**IDSCAP headquarters is located in suburban Washington, 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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