

American International Health Alliance  
**HIV/AIDS Twinning Center**



# Final Performance Report for Russia

HRSA Cooperative Agreement No. U97HA04128

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## Preface

**T**he American International Health Alliance, Inc. (AIHA) is a 501(c)(3) nonprofit corporation created by the United States Agency for International Development (USAID) and leading representatives of the US healthcare sector in 1992 to serve as the primary vehicle for mobilizing the volunteer spirit of American healthcare professionals to make significant contributions to the improvement of global health through institutional twinning partnerships.

AIHA's mission is to advance global health through volunteer-driven partnerships that mobilize communities to better address healthcare priorities while improving productivity and quality of care. Founded in 1992 by a consortium of American associations of healthcare providers and of health professions education, AIHA facilitates and manages twinning partnerships between institutions in the United States and their counterparts overseas. To date, AIHA has supported more than 150 partnerships linking American volunteers with communities, institutions, and colleagues in 33 countries in a concerted effort to strengthen health services and delivery, as well as health professions education and training.

Operating with funding from USAID; the Health Resources and Services Administration (HRSA) of the US Department of Health and Human Services; the US Library of Congress; the Global Fund to Fight AIDS, Tuberculosis and Malaria; and other donors, AIHA's partnerships and programs represent one of the US health sector's most coordinated responses to global health concerns.

AIHA's HIV/AIDS Twinning Center Program was launched in late 2004 to support the US President's Plan for AIDS Relief (PEPFAR). With the generous support of the American people, the Twinning Center is currently funded by HRSA through Cooperative Agreement No. U97HA04128-06-03, as well as through US Government Country Operational Plans in target countries located in Sub-Saharan Africa and the Russian Federation. This final performance report provides a comprehensive overview of AIHA's Twinning Center partnerships in Russia from 2009 through their close-out in early 2012. The report describes AIHA's unique partnership twinning model. It also includes summary results and success stories that highlight specific activities and accomplishments, as well as a discussion of key areas of impact and lessons learned through the HIV/AIDS Twinning Center Program in Russia.

The contents are the responsibility of AIHA and do not necessarily reflect the views of PEPFAR, HRSA, or the United States Government.

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# I. HIV/AIDS Twinning Center Program Overview

The HIV/AIDS Twinning Center supports the US President's Emergency Plan for AIDS Relief (PEPFAR) through partnerships, initiatives, and volunteer placements that help build critical institutional and human resource capacity to improve health and combat HIV/AIDS.

A project of the American International Health Alliance (AIHA), the Twinning Center was established in late 2004 through a Cooperative Agreement with the Health Resources and Services Administration (HRSA) of the US Department of Health and Human Services. Based on the success of its first five-year Cooperative Agreement with HRSA (2004-2009), AIHA was awarded a subsequent five-year grant in February 2009 to continue partnerships and related activities through the HIV/AIDS Twinning Center Program.

Since its inception, the Twinning Center has managed a total of 45 institutional twinning partnerships. During that time, resource partner institutions — most from the United States — have contributed more than \$27.4 million in in-kind resources, including more than 7,159 professional days directed toward the program's strengthening of systems and human resources for health. During the period covered in this report, US partners have contributed some \$137,331.35 in in-kind resources and 99 professional days dedicated to improving HIV-related treatment, care, and support in the Russian Federation.

**AIHA's HIV/AIDS Twinning Center supports partnerships and volunteer activities as part of the implementation of PEPFAR in high-burden countries around the globe. Since late 2004, the Twinning Center has established 45 partnerships in 11 African nations and the Russian Federation. Eleven of these — including those in Russia — have graduated from AIHA's technical assistance programming.**

Working closely with HRSA, host country officials and ministries of health, and the US Government teams in country, AIHA and the Twinning Center help scale up and expand HIV prevention, care, treatment, and support services in countries targeted for PEPFAR assistance by creating partnerships and other initiatives that advance each nation's Strategic HIV/AIDS Plan and US Country Operational Plan.

HIV/AIDS Twinning Center partnerships and programs:

- Build human and institutional capacity through improved pre-service education and targeted in-service training and mentoring;
- Create national or regional centers of excellence;
- Strengthen health service delivery, including introducing new models of HIV prevention, treatment, care, and support;
- Mobilize communities for change;
- Improve access to evidence-based clinical guidelines and information resources in keeping with international best practices;
- Ensure synergy and integration with other PEPFAR-supported programs operating in country; and
- Provide organizational structure for the recruitment, placement, and support of long-term, highly skilled volunteers.

Building on the voluntary model AIHA has successfully implemented since 1992, the Twinning Center establishes and manages needs-driven partnerships designed to strengthen health system capacity and improve treatment, care, and support services available to people living with, or affected by, HIV and AIDS. Partnerships vary widely in their scope, focus areas, and capacity-building activities. Participating

institutions include hospitals, NGOs, universities, professional associations, community- and faith-based organizations, and local and national ministries of health.

In most cases, a US institution with a significant amount of experience in a particular focus area is partnered with an overseas institution looking to build similar capacity. The Twinning Center also taps into the wealth of HIV-related knowledge and expertise that already exists in its target countries by establishing “South-South” partnerships that link organizations from one or more focus countries. Voluntarism is the cornerstone of the partnership model with partners on both sides contributing in-kind human, material, and financial resources, as well as leveraging additional resources from within their respective communities — particularly on the US side.

Flexible and non-prescriptive, the Twinning Center’s partnership methodology is a highly effective vehicle for technical assistance. The model is both needs- and process-driven. It empowers host communities by giving them ownership of the programs they create jointly with their partners, thereby encouraging sustainable capacity development on individual, institutional, and systemic levels.

Partnerships are institution-based, so they bring to the table the collective knowledge, commitment, and expertise of their constituent members. At the same time, individuals play a key role by forging collaborative, peer-to-peer relationships in which partners work together as equals. Together, they find mutually beneficial solutions and participate in a two-way transfer of knowledge that enhances the human and organizational capacities on both sides.

Professional exchanges play an important role in the work of each partnership by facilitating learning of key clinical skills and practical approaches that are needed to rapidly scale up HIV treatment, care, and support services in a sustainable manner and strengthen underlying health systems. They also provide ample opportunities for sharing new ideas, mentoring, and quality assurance.

AIHA and the HIV/AIDS Twinning Center provide hands-on assistance with program design, implementation, and monitoring and evaluation. Staff at AIHA headquarters in Washington, DC, and at field offices in Ethiopia, Mozambique, Nigeria, Russia, South Africa, Tanzania, and Zambia work closely with partners on program management, oversight, and reporting. They also provide travel and logistical support and collaborate with partners as needed to strengthen their information and communications technology infrastructure thus improving access to the latest evidence-based medical resources.

Adopting a “partnership of partnerships” approach, AIHA’s HIV/AIDS Twinning Center supports national and regional networking opportunities and encourages collaboration among its partners and other groups that work to strengthen health systems and human resources for health in accordance with PEPFAR goals. To this end, the Twinning Center sponsors a wide range of workshops, training courses, and dissemination events that help foster cooperation, programmatic synergy, and more effective development.

**“In international development, we spend so much of our time on a supply-driven, shake-your-finger approach that is often resented and just doesn’t enjoy the sticking power that a slower, more equality-based approach does.  
That’s the true value of partnerships.”**

**— Paul Holmes, Senior Regional Health Advisor, USAID Europe and Eurasia Bureau.**

## II. Program Narrative for Russia Partnerships

### A. Introduction and Background

With more than 20 years of experience implementing partnerships and complementary health-related initiatives, first in Eurasia and more recently in Africa, AIHA is one of the world's preeminent coordinators of twinning programs. Our staff understand the dynamics, approaches, and challenges of a peer-based partnership methodology and are highly skilled at addressing organizational development issues through twinning.

AIHA's twinning model has proven particularly well-suited to developing and/or expanding programs that build sustainable human resource capacity because of the strong institutional linkages forged when we partner two or more organizations that are dedicated to the same — or very similar — missions. Working closely with ministries of health and other key stakeholders, AIHA's Twinning Center partnerships establish new or updated pre- and in-service training programs at existing institutions to address both short and long-term healthcare workforce development goals.

In Russia, the HIV/AIDS Twinning Center partnerships have their roots in AIHA's very first HIV/AIDS partnerships, which were made possible when USAID/Russia granted AIHA a five-year extension to a previous cooperative agreement that ended in September 2003. This extension covered fiscal years 2004-2008 and was designed to help create comprehensive models of integrated care and treatment for PLWH that could be replicated throughout Russia.

During the first half of the award period, the core of AIHA's programming focused on building replicable models for HIV/AIDS treatment, care, and support at pilot sites in high-burden regions across Russia. In July 2004, AIHA launched four partnerships linking Orenburg with New York City; Samara Oblast with Providence, Rhode Island; Saratov with Bemidji, Minnesota; and St. Petersburg with New Haven, Connecticut.

These four partnerships linked US and Russian care providers in a concerted effort to build the requisite institutional and human resource capacity needed to provide integrated, comprehensive treatment, care and support to PLWH in targeted regions of Russia. These partnerships, as well as other AIHA HIV/AIDS programs in Russia, supported the strategic objectives of both USAID/Russia and PEPFAR.

While specific goals and objectives differed from one region to another, these partnerships addressed four cross-cutting areas of need that emerged during the initial assessment and evaluation process in each community:

- HIV patient management and adherence;
- Care coordination and case management;
- Patient access and retention; and
- HIV and TB detection and treatment.

Beginning in October 2006, AIHA's USAID-supported HIV/AIDS program in Russia concentrated on the St. Petersburg and Orenburg partnerships in accordance with recommendations from USAID/Russia. Both sites were looking to rapidly expand access to HIV/AIDS care and treatment through programs supported by the Global Fund to Fight AIDS, Tuberculosis and Malaria (GFATM), as well as national and regional administrative bodies within Russia.

Current WHO estimates put the number of PLWH in Russia around 1 million, which is about 1 percent of the country's total population. Roughly one-third of the people who inject drugs (PWID) in Russia are living with HIV or AIDS and — although the epidemic is generalizing — it is still largely driven by injecting drug use. As of April 1, 2012, Russian Government records indicate that there are 664,976 officially registered PLWH

in the country. According to data from the Federal AIDS Center, (Dr. Pokrovsky <http://www.hivrussia.ru/stat/2012.shtml>), some 565,074 of these individuals are alive and registered with Russian AIDS Centers; about 102,000 have initiated ART. There is controversy over how many people need ART yet are not yet receiving it, but there is no doubt that Russia is facing a maturing HIV epidemic and that its vast, complex healthcare system lacks a comprehensive care program for PLWH. Against this backdrop, the number of people in need of treatment and care is rapidly growing.

With the support of the American people through PEPFAR and USAID/Russia, AIHA’s Twinning Center partnerships provided technical assistance to Russian partner institutions and healthcare providers in an effort to implement an integrated approach to HIV/AIDS treatment, care, and support, as well as a viable and innovative public health approach to scaling up ART provision.

During the program period covered in this report, technical assistance from the US partners and other experts has focused on strengthening the capacity of target institutions in St. Petersburg and Orenburg related to:

- Simplified treatment regimens;
- Improved adherence to treatment;
- Quality Improvement through chart monitoring; and
- Management of opportunistic infections, including TB.

Sustainability of programs developed through the partnerships and local ownership were fostered through the increasing role in practitioner education and training played by Russian experts at the AIDS Training and Education Centers (ATECs) in St. Petersburg and Orenburg, which were established by AIHA in collaboration with the Government of Russia. The medical curricula on AIDS treatment and care used at the ATECs were approved by the Ministry of Health and Social Development (MOHSD) and are currently being used for postgraduate medical education at 15 institutions nationwide, with more expected to adopt the material in the future.

**Fig. 1 — Selected Partner Institutions Involved in Strengthening Human Resources for Health**

PARTNER INSTITUTION	TRAINING FOCUS	PRE-SERVICE	IN-SERVICE
Pavlov State Medical University	HIV/AIDS Palliative Care for Nurses	X	
St. Petersburg Institute of Social Work and Psychology	HIV/AIDS Palliative Care for Mental Health Professionals	X	
Arkhangelsk “Rassvet” and Charitable Fund “Diaconiya”	HIV/AIDS Palliative Care for Lay Counselors, Sisters of Mercy	X	
St. Petersburg City AIDS Center and District HIV Care Services	Integrated Services for PLWHIV	X	
	Case Management (Monitoring and Case Database Applications)	X	
Orenburg State Medical Academy	HIV/AIDS Care		X
	HIV and Management of Associated Diseases		X
	HIV Co-infection with Hepatitis B, C		X
Orenburg Oblast Nursing Counsel and Orenburg Oblast Center of Postgraduate Education for Nurses	HIV/AIDS Palliative Care for Nurses		X
ViiV Healthcare Russia	HIV/AIDS Care for Infectious Disease Specialists		X

AIHA strategies have included tapping into the growing number of groups working with PLWH in Russia to link vulnerable populations to the treatment, care, and support services they need. AIHA also worked to introduce and strengthen multidisciplinary teams through a collaborative improvement approach that included training various types of healthcare providers, such as nurses, social workers, and doctors; introducing case management and related tools for improving coordination of care; strengthening peer support networks for PLWH; and involving NGOs and faith-based organizations in the provision of care and support for patients and their families.

The broad package of AIHA partnership palliative care services supported by the United States Government in the two PEPFAR focus regions included social, psychological, spiritual, and clinical services. It addressed issues such as the:

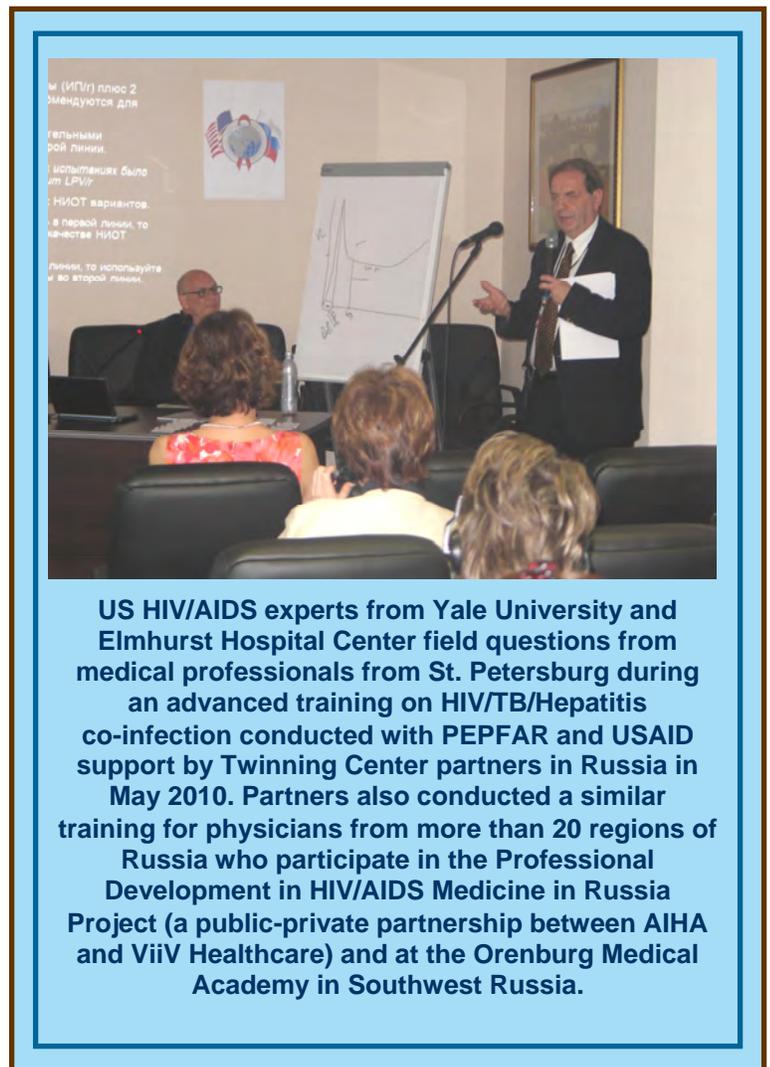
- The limited number of sites providing ART;
- Therapy adherence;
- Lack of preparedness for ART scale-up among primary care, substance abuse, and social welfare services;
- Diagnosis and treatment of TB, drug-resistant TB, and other opportunistic infections;
- Limited experience with clinical monitoring of patients on ART;
- Lack of ART treatment guidelines for active IDUs;
- Alcohol and drug abuse; and
- The low knowledge of ART among some two-thirds of all patients.

AIHA provided technical assistance to adult ARV treatment teams, including those being formed at polyclinics, to strengthen proper patient management and prevent opportunistic infections and co-infections at both PEPFAR sites. Support for multidisciplinary care teams was provided through ART and opportunistic infections trainings and bed-side mentoring with involvement of US-based partners where necessary. In addition, the Twinning Center program provided mentoring of district level infectious disease doctors by AIDS Center experts and advanced ART training of AIDS experts to better address emerging issues such as drug resistance and drug interaction issues, particularly with regard to patients co-infected with HIV and tuberculosis or hepatitis C.

## **B. Curriculum Development & Practitioner Training**

### ***Key Activities and Outcomes:***

From 2009-2012, AIHA continued its HIV Care and Treatment Program in Russia with a focus on St. Petersburg and Orenburg Oblast. Key activities and outcomes included:



**US HIV/AIDS experts from Yale University and Elmhurst Hospital Center field questions from medical professionals from St. Petersburg during an advanced training on HIV/TB/Hepatitis co-infection conducted with PEPFAR and USAID support by Twinning Center partners in Russia in May 2010. Partners also conducted a similar training for physicians from more than 20 regions of Russia who participate in the Professional Development in HIV/AIDS Medicine in Russia Project (a public-private partnership between AIHA and ViiV Healthcare) and at the Orenburg Medical Academy in Southwest Russia.**

**“The HIV medicine trainings conducted by AIHA in collaboration with the St. Petersburg AIDS Center and other medical institutions throughout the city are very important for professional development of different specialists — not only infectious disease physicians, but also social workers, psychologists, and other members of the multidisciplinary teams that provide care to PLWH.”**

**— Dr. Aza G. Rakhmanova, Chief Infectious Disease Specialist, St. Petersburg City Health Committee and Deputy Director, St. Petersburg AIDS Center.**

### **Targeted Training for Infectious Disease Specialists**

- Completion of the three-level HIV/AIDS training program for infectious disease physicians. This program includes a 5-day Introduction to ART course, a two-day bed-side clinical mentoring course, and a 5-day Advanced Adult ART and Management of Opportunistic Infections course.
- In St. Petersburg, by the year 2009, 100 percent of the primary care infectious disease specialists were trained in the introduction of ART.
- In FY09, 65 infectious disease specialists were trained in Advanced Adult ART at three trainings and 38 infectious disease physicians completed the two-day clinical mentoring program at the St. Petersburg City AIDS Center.
- A total of 80.3 percent of the currently active infectious disease specialists from 16 district infectious disease services of St. Petersburg completed the three-level training program; 63 infectious disease physicians from the all 18 districts of St. Petersburg improved their practical skills in treatment and management of HIV-infected patient under the experienced doctors from the AIDS Center during their two-day mentoring program.
- Pavlov State Medical University issued a government certificate on completion of 72-hours training program to 50 infectious disease specialists successfully completed this educational program which signifies institutionalization of AIHA training materials into the governmental system of postgraduate education.
- In Orenburg, in the framework of the three-level HIV/AIDS training program, 21 infectious disease physicians was trained in Advanced Adult ART and eight infectious disease specialists successfully completed the two-day on-site mentoring program. A total of 19 infectious disease physicians from Orenburg region completed the two-day clinical mentoring program.
- Unfortunately, AIHA's training program in Orenburg was disrupted before the second Advanced ART training and ongoing clinical mentoring could be completed in accordance with the work plan due to lack of support for the program from the newly appointed Director of the Orenburg AIDS Center.

### **Institutionalization of Training Courses and Materials**

To strengthen the governmental system of continuous medical education and most effectively utilize evidence-based materials that were developed with support from PEPFAR and USAID/Russia by AIHA's Regional Knowledge Hub for the Care and Treatment of HIV/AIDS in Eurasia, AIHA worked closely with the St. Petersburg partners to develop training materials for a postgraduate course titled, "HIV Medicine." The course curriculum includes 26 chapters on various HIV/AIDS-related issues. AIHA partners at the Infectious Disease Department at Pavlov State Medical University and the St. Petersburg City AIDS Center recommended developing course materials as resources for physicians and printing them in a book format.

In 2009, Pavlov State Medical University implemented the course, which has been certified by the Russian

## ART Training Program Leads to Nationally Accepted Certification in St. Petersburg

To support scale up of high quality HIV treatment and care, including the provision of ART, AIHA began rolling out successful HIV treatment, care, and support models with the support of the American people through PEPFAR and USAID/Russia in 2006. AIHA's activities focused on the PEPFAR priority regions of St. Petersburg and Orenburg Oblast, largely replicating and expanding on the accomplishments of two USAID-supported partnerships linking healthcare institutions in St. Petersburg and Orenburg with counterparts in New Haven, Connecticut, and New York, New York, respectively.



In both regions, training infectious disease physicians from primary care polyclinics to manage ART for adult patients has a primary focus of AIHA's capacity-building activities, which were implemented through its HIV/AIDS Twinning Center Program starting in 2008.

Training on ART for these primary level practitioners reached 100 percent coverage in St. Petersburg — an achievement made all the more impressive by the fact that Pavlov State Medical University has institutionalized the program, issuing a nationally recognized postgraduate education certificate to physicians who complete the 72-hour series of courses.



“The HIV medicine trainings conducted by AIHA in collaboration with the St. Petersburg AIDS Center and other medical institutions throughout the city are very important for professional development of different specialists — not only infectious disease physicians, but also social workers, psychologists, and other members of the multidisciplinary teams that provide care to PLWH,” says Dr. Aza G. Rakhmanova, chief infectious disease specialist at the St. Petersburg City Health Committee and deputy director of the St. Petersburg AIDS Center.

**A key objective of AIHA's partnerships in Russia was to help transition management of care for PLWH to the primary care level by training clinicians, such as infectious disease physician Olga Dunova, who works at Outpatient Clinic No. 107 in St. Petersburg's Krasnogvardeysky District.**

“These trainings range from the basic to advanced levels and include lectures and practical sessions. They provide healthcare professionals with comprehensive knowledge of caring for patients living with HIV or AIDS,” explains Rakhmanova, who is also a professor at Pavlov State Medical University.

As of October 2009, 80.3 percent of infectious disease physicians working at district polyclinics in St. Petersburg had completed the series of three courses, which are designed to improve care and treatment for HIV patients. At that time, Pavlov State Medical University had already issued government certificates to 50 doctors from 16 districts of the city who completed the series, including a five-day course on initiation of ART for adult patients; a two-day clinical mentoring course; and a five-day advanced course, Rakhmanova reports.

For physicians such as Olga Dunova — an infectious disease specialist practicing at the newly organized HIV/AIDS Unit of Outpatient Clinic No. 107 in St. Petersburg's Krasnogvardeysky District, who completed all three courses and received certification from Pavlov State Medical University — the advanced knowledge and skills gained through the training is indispensable. “I found training and onsite mentoring very useful. I believe that a deep understanding of HIV disease and the specifics of treatment for patients living with the virus, as well as hands-on practical experience, significantly influence the attitude of clinicians toward these patients,” Dunova explains.

Government for continuing medical education credit. Since its inception, more than 1,063 physicians completed the course and were issued certificates from Pavlov State Medical University. In addition, 168 physicians from St. Petersburg completed AIHA-developed HIV/AIDS courses within Pavlov's Continuing Medical Education Program, including 66 physicians and 22 nurses who successfully completed a 72-hour HIV/AIDS educational program and received nationally recognized certificates (*Udostoverenie*) issued by the university in 2009-2010.

AIHA provided financial and technical support for the publication of the accompanying course manual developed by the St. Petersburg partners between 2010 and 2012. This manual — now in its third edition — was distributed nationally in October 2010, with further distribution managed by AIHA at various regional and national events throughout Russia. It has also been distributed to CIS countries thereby contributing to the strengthening of HIV/AIDS treatment and care capacity elsewhere in the region.

The Orenburg Medical Academy also adapted three HIV/AIDS courses developed by AIHA together with the Moscow State University of Medicine and Dentistry (MSMSU) and the Sechenov Moscow Medical Academy. The following courses were included in the educational program of the Orenburg Medical Academy starting in September 2010; the elective course is taught in three departments there:

- HIV Infection: Diagnosis, Treatment, and Prevention for International Students (elective course);
- Issues of Specialized Medical Care in Patients with HIV and HIV-associated Diseases; and
- Issues of Specialized Medical Care in Patients with HIV and Hepatitis B and C.

### **Partnership Snapshot: Russian Nurses Complete HIV/AIDS Training Series, Attain Certification from Pavlov State Medical University**

A group of 21 nurses who work at district-level infectious disease clinics and the St. Petersburg City AIDS Center completed a training course titled "HIV Palliative Care for Nurses" conducted by AIHA and its partners with support from PEPFAR through USAID/Russia.

Held March 22-24, 2010 at the City AIDS Center's Inpatient Department, the course is the culmination of a three-part HIV/AIDS training series that leads to official certification from St. Petersburg's Pavlov State Medical University. The first two courses in this series are "Basics of HIV Infection: Improving Tolerance to PLWHIV" and "Adherence to ART Regimens." The course included lectures, interactive role plays, case studies, and group activities, as well as hands-on clinical sessions conducted at the AIDS Center's Inpatient Department.

Topics covered during the three-day course included an overview of palliative care concepts, managing chronic versus acute conditions in HIV patients, the nurse's role in outpatient care and support for PLWHIV, and patient stages, from recovery to hospice care. Group discussions and role plays were used to demonstrate effective methods of delivering bad news to patients and their families, as well as to highlight the importance of psycho-social and spiritual support for people living with, or affected by, HIV/AIDS.

Based on analysis of pre- and post-training tests, the nurses who participated demonstrated an impressive increase in knowledge, improving their scores by 68 percent. They received their certificates from Pavlov State in May 2010.



**The HIV/AIDS Palliative Care Training Program for Nurses includes both classroom activities and hands-on clinical sessions.**

## **Strengthening the Role of Nurses in the Provision of Treatment, Care, and Support Services to PLWH**

In both St. Petersburg and Orenburg Oblast, AIHA launched a three-level HIV/AIDS educational program for nurses in 2009. By 2010, 22 nurses from district infectious disease services in St Petersburg completed this three-level program and were certified by the Pavlov State Medical University. This comprehensive training program included courses on the following topics: Basics of HIV-infection and Tolerance Building (3-day course); Adherence to ART (3-day course); and HIV palliative care (3-day course).

AIHA conducted four courses on the basics of HIV infection, training 83 nurses from the target regions; 44 nurses completed the course on adherence to ART. In 2010, 58 nurses from Orenburg Region and 22 nurses from St. Petersburg were trained in HIV palliative care and In addition, 18 faculty members from two nursing colleges — the Orenburg Region Council of Nurses and Orenburg State Medical Academy — completed a training-of-trainers (TOT) course on the “Basics of HIV-infection and Tolerance Building,” which aims to further integrate the training curricula into the institutional education system. They conducted four courses, training 116 nurses.

Finally, through the Twinning Center program, two Russian nurses gained experience in nursing management of HIV-infected patients from their exchange visits to US partnership sites in 2009.

## **Implementing ART Adherence Strategies**

From 2009-2012, AIHA continued implementing ART adherence strategies developed with the support from the US partners through the following activities:

- Training 44 nurses who provide care for HIV patients (22 from St. Petersburg and 22 from Orenburg) in ART adherence; each nurse completed a three-day course focusing on how to improve patient adherence, adherence counseling and monitoring, and strengthening the role of nurses in adherence improvement.
- Nurses began to counsel patients on adherence; and
- The St. Petersburg AIDS Center developed in 2009 a patient reminder card, which was distributed to ART patients.

## **An Integrated Approach to Treatment of HIV-infected Patients with Multiple Diagnoses**

In collaboration with the US and Russian partners, AIHA focused on the concept of supporting an integrated approach to the treatment of patients with multiple diagnoses. We developed a new course titled “An Integrated Approach to the Treatment and Management of HIV/TB/Hepatitis Co-infections in Substance Users,” which was introduced at two seminars in St. Petersburg in 2009 and 2010. Through these events, AIHA trained a total of 108 infectious disease, TB, and substance abuse treatment professionals from St. Petersburg and Orenburg. The first multidisciplinary team of eight infectious disease specialists and narcologists from St. Petersburg completed a clinical mentoring program followed by the training course.

During the program, advanced clinical training and mentoring on the treatment and management of HIV/TB/ Viral Hepatitis co-infections and other opportunistic infections in substance users was provided for three Russian trainers by US experts during a May 2009 partnership exchange to St. Petersburg. In addition, Dr. Masci from Elmhurst Hospital Center and Dr. Bruce from Yale University toured the in-patient department at the St. Petersburg AIDS Center, working closely to support the Russian physician-trainers and consults on specific issues of ART in patients with multiple diagnoses.

## **C. Strengthening Palliative Care Provision to PLWH**

During this reporting period, AIHA continued strengthening the provision of palliative care services to PLWH by training 372 HIV care providers in palliative care issues. Russian care providers trained through this effort included public health specialists; Sisters of Mercy from the faith-based organization, “Charitable Fund

Diaconia;” medical students from Pavlov State Medical University and the St. Petersburg Orthodox Theological Seminary; and NGO volunteers. In addition, best approaches and practices in palliative care were disseminated in Arkhangelsk Oblast in partnership with the local NGO, Rassvet; 116 participants were trained. Specific accomplishments of the nine-month palliative care program completed in June 2011 in Arkhangelsk include:

- 51 Sisters of Mercy from Arkhangelsk and Severodvinsk, along with 10 students from the Northern State Medical University, were trained in palliative care issues;
- 10 volunteers completed the training course, “Basics of Patient Care with Elements of Massage” at Arkhangelsk Medical College and were awarded certificates issued by the college;
- 12 Sisters of Mercy from Arkhangelsk were trained in psychological aspects of providing care to the patients;
- 10 Sisters of Mercy from Arkhangelsk were trained in legal issues of patient care; and
- 23 representatives from the Arkhangelsk AIDS Center, penitentiary system, Sisters of Mercy, and volunteers were trained on “The Palliative Care Program in Arkhangelsk Oblast, which was organized by the Sisters of Mercy and attended by representatives from the Ministry of Health and Social Development and leading medical educational institutions of Arkhangelsk Region. Discussions focused on the need to further develop palliative care program for the most vulnerable population and on necessity to continue the training program for medical and religious community.

**Fig. 2 — Selected Accomplishments of AIHA’s Palliative Care Initiative in Russia**

YEAR	ACCOMPLISHMENT
2009-2012	Three training courses developed and introduced into training programs at three educational institutes in St. Petersburg
2011	54 Sisters of Mercy completed a 520-hour course on palliative care at Pavlov State Medical University and received government certificates as nurse assistants
2009-2011	39 volunteers and Sisters of Mercy from St. Petersburg’s religious community completed a 72-hour course on social and psychological support at the Institute of Social Work and Psychology
2011	12 students at the St. Petersburg Orthodox Theological Seminary completed the “Social Support by the Russian Orthodox Church in the Provision of Care to People with Substance Abuse Problems and HIV Infection” course
2010-2011	34 educational sessions and consultations for family members and caregivers on palliative care for PLWH were conducted in St. Petersburg
2010-2011	The AIHA palliative care curricula was disseminated to other regions of Russia and successfully piloted in Arkhangelsk
2010-2011	116 participants in Arkhangelsk were trained in issues of palliative care and allied disciplines

AIHA began its work on HIV palliative care with faith-based communities in 2006 in the Northwestern region of Russia. Since then, the St. Petersburg-based Diaconia has been a key partner in this initiative. AIHA-supported trainings for Sisters of Mercy have enabled them to provide much-needed care and support for severely ill and terminally ill people, including those living with HIV. These dedicated individuals work through the sisterhoods in different governmental hospitals, hospices, and other medical and social services. USAID/Russia was a strong supporter of this collaboration, which strengthened the provision of comprehensive care to PLWH.

It is important to note that the AIHA partnership palliative care training program was developed under the previous award in 2008. Working with the afore-mentioned stakeholders at Pavlov State Medical University and Diaconia, AIHA developed a 520-hour training course that was piloted on a first group of Sisters of

Mercy, who now work in St. Petersburg area hospices and provide home-based care. Participants who successfully completed the course were provided with government-certified nurse assistant certificates issued by Pavlov State. This course was updated in 2009 with HIV/AIDS-specific content.

At the request of Diaconia, AIHA began training Sisters of Mercy in the various social aspects of palliative care in 2009 as well. Working with experts at the St. Petersburg State University of Psychology and Social Work, AIHA developed a 72-hour course “Practical Psychology in the Social Sphere” was developed.

This course was introduced for the first group of volunteers and Sisters of Mercy later that year. It consists of lectures, seminars, and practical sessions conducted at social service institutions throughout St. Petersburg. From 2009-2011, 39 people completed this training, which enables them to contribute to the provision of palliative care and psycho-social support for PLWH.

AIHA supported Diaconia’s development of another course — “Social Support by the Russian Orthodox Church in the Provision of Care to People with Substance Abuse Problems and HIV Infection” — in 2010. The curriculum was included in the educational program at the St. Petersburg Orthodox Theological Seminary and the first group of 12 students completed the course in 2011. In connection with this new course, AIHA and Diaconia issued a set of articles on the HIV and substance abuse issues for students of the seminary.

In 2010-2011, AIHA collaborated with Diaconia to offer individual training on the basics of palliative care for family members of terminally ill PLWH. An experienced palliative care instructor from Diaconia conducted training sessions for family members of patients with advanced HIV disease at Botkin Infectious Disease Hospital. A total of 34 educational sessions and consultations with family members and caregivers were conducted within the “Home Care for People Living with HIV” initiative in St. Petersburg from January-May 2011.

In 2010-2011 AIHA disseminated its successful experience in HIV-palliative care from St. Petersburg to Arkhangelsk, where the key implementing partner was the NGO Rassvet, which was recommended by the Charitable Fund Diaconia. For the nine-month palliative care program completed in June 2011, 116 participants were trained.

### Sisters of Mercy Celebrate Graduation



**A group of 21 Sisters of Mercy who completed a year-long palliative care training course at Pavlov State Medical University received their certification during a gala ceremony in St. Petersburg on May 21, 2010.**

Specific accomplishments of this replication project included:

- 51 Sisters of Mercy from Arkhangelsk and Severodvinsk, along with 10 students from the Northern State Medical University, were trained in palliative care issues;
- 10 volunteers completed the training course, “Basics of Patient Care with Elements of Massage” at Arkhangelsk Medical College and were awarded certificates issued by the college;
- 12 Sisters of Mercy from Arkhangelsk were trained in psychological aspects of providing care to the patients; and
- 10 Sisters of Mercy from Arkhangelsk were trained in legal issues of patient care.

In addition, 23 representatives from the Arkhangelsk AIDS Center, penitentiary system, Sisters of Mercy, and volunteers were trained on “The Palliative Care Program in Arkhangelsk Oblast, which was organized by the Sisters of Mercy and attended by representatives from the Ministry of Health and Social Development and leading medical educational institutions of Arkhangelsk Region. Discussions focused on the need to further develop palliative care program for the most vulnerable population and on necessity to continue the training program for medical and religious community.

The success of this four-year project has resulted in a great potential for improved provision of palliative care to PLWH by faith-based communities. A number of HIV/AIDS-related palliative care services have been implemented in St. Petersburg, a strong cadre of local staff and faculty have been trained, and in-country support for sustainability of these projects has been developed.

#### **D. Improving Reproductive Health**

In April 2009, AIHA piloted a three-day advanced training on ART in women of reproductive age in Orenburg. This event was attended by 21 specialists, including infectious disease physicians, obstetricians, gynecologists, and neonatologists from Orenburg, Orsk, Novotroitsk, and Gai who had previously completed the generic course on PMTCT and advanced clinical training on PMTCT. In October of 2009, AIHA conducted a three-day advanced training on reproductive health for PLWH in St. Petersburg for 37 ob/gyns and infectious disease physicians serving HIV-positive pregnant women in St. Petersburg.

#### **E. Development and Support of Russian AIDS Training and Education Centers**

Between 2006 and 2009, AIHA worked closely with the Ministry of Health and Social Development to establish three AIDS Training and Education Centers (ATECs) at two partner sites in St. Petersburg and one in Orenburg. Since then, 132 Russian professionals have completed the TOT program; 26 of these have become master trainers who are actively involved in the training of healthcare providers in Russia. Many of these master trainers are also actively involved in HIV training and clinical mentoring of specialists from other countries spanning Eastern Europe and Central Asia. During the reporting period, 278 specialists from elsewhere in the region were trained and mentored through the Russian ATECs thanks to support from WHO, the World Bank and CAAP, Center PAS, and UNFPA.

Figure 3 and Figure 4 below demonstrate that with the support of the AIHA partnership program, input from other international organizations funded by USAID, and the strategic vision of the senior management of the AIDS Center, the Baltic ATEC became a nationally and regionally recognized center for trainings on all aspects of HIV/AIDS in the region.

Jointly with the Regional Knowledge Hub for Care and Treatment of HIV/AIDS in Eurasia, which is has been supported by the World Health Organization since 2004, AIHA developed 40 courses in HIV/AIDS related areas. Using the Knowledge Hub materials, 2,824 participants were trained and mentored in providing care and treatment to PLWH in Russia, including 586 specialists trained fiscal years 2009 through 2012. These courses are updated on a regular basis in accordance with revised HIV/AIDS international guidelines and recommendations, including up-to-date evidence based information, new topics and advanced issues.

**Fig. 3 — AIHA’s Key Capacity-building Activities in Support of Russian ATECs**

<b>Fiscal Year</b>	<b>Location</b>	<b>Technical Assistance and Training Provided by AIHA</b>	<b>Numbers Trained</b>
2009	St. Petersburg	1) Integrated Approach to HIV/AIDS Care Course 2) Case Management TOT Course	84 Physicians 28 Physicians
2009	Orenburg	1) ART in Women of Reproductive Age Course	21 Physicians
2010	St. Petersburg	1) Integrated Approach to HIV/AIDS Care Course 2) HIV Palliative Care for Nurses	24 Physicians 21 Nurses
2010	Orenburg	HIV and Hepatitis B Co-infection Course	19 Physicians

During fiscal years 2009 and 2010, AIHA worked closely with Russian and international experts to develop sustainable institutional and human resource capacity at the Russian AIDS Training and Education Centers in Orenburg and St. Petersburg. During that time, AIHA trained 176 physicians and 21 nurses on selected topics in HIV/AIDS treatment and care. As a result, ATEC experts have taken the lead in ongoing local, national, and regional training in the field of HIV medicine and comprehensive care for PLWH.

#### **F. Exchange Visits of Russian Specialists and Policymakers to the United States**

AIHA organized two professional exchange visits for Russian specialists and policymakers to get a first-hand look at effective HIV treatment, care, and support programs in action at US partner institutions. In June 2009, AIHA conducted a study tour to Elmhurst, New York for Russian partners from St. Petersburg, Orenburg, and Moscow. The Russian and American professionals involved in this study tour were active partners who had successfully collaborated since 2004 under the St. Petersburg/New Haven and Orenburg/Elmhurst partnerships.

This partnership exchange visit contributed to the overall goal of the project to strengthen human and organizational capacity to develop replicable, integrated models of HIV/AIDS treatment and support services based on international standards of care. Five Russian specialists, including two infectious disease physicians and two nurses from both the St. Petersburg and Orenburg Oblast AIDS Centers and a Senior Advisor from the Federal AIDS Center visited numerous clinical and social support institutions that provide services to PLWH. AIHA’s Senior Program Coordinator in Moscow accompanied the team.

Technical assistance and learning opportunities during this exchange focused on:

- ART management, including prevention of resistance, second line regimens, and management of opportunistic infections and co-infections;
- Improvement of adherence to ART;
- Palliative care for HIV patients;
- Case management; and
- An integrated approach to providing care for HIV patients.

Elmhurst Hospital Center was the primary hosting institution for the team. Russian specialists received a comprehensive overview of effective HIV care programs integrated at the inpatient and outpatient care levels, as well as effective collaboration among various service providers, Mount Sinai School of Medicine, and community-based programs.

**Fig. 4 — Local, National, and Regional HIV Care and Treatment Trainings Implemented by ATECs**

Fiscal Year	Location	Type of Training	Scope of Training	Numbers Trained
2009	St. Petersburg	1) Advanced Adult ART Course 2) HIV/AIDS Basics Course 3) Integrated Approach to HIV/AIDS Care Course 4) Adherence to ART Course 5) Clinical Mentoring Course 6) HIV Medicine Course (Pavlov) 7) Advanced Pediatric ART	Local Local Local Local Local Local National (AIHA, USAID, UNICEF)	65 Physicians 21 Nurses 8 Physicians  22 Nurses 38 Physicians 180 Physicians 19 Clinicians
2009	Orenburg	1) Advanced Adult ART Course 2) HIV/AIDS Basics TOT Course 3) HIV/AIDS Basics Course 4) Clinical Mentoring Course 5) HIV/AIDS Basics Course 6) Adherence to ART Course	Local Local Local Local Local Local	20 Physicians 18 Nurses 22 Nurses 8 Physicians 22 Nurses 20 Nurses
2010	St. Petersburg	1) HIV/AIDS Palliative Care (undergrad) 2) 2-week Clinical Training  3) Clinical Mentoring Course 4) HIV Medicine Course (Pavlov) 5) Organ and System Complications in Patients with HIV Infection	Local  Regional (CAAP, WB) Local Local Regional (AIHA, WHO, GTZ)	100 Students  8 Physicians 8 Physicians 262 Physicians 19 Clinicians
2010	Orenburg	1) Postgraduate Course on HIV and Hepatitis B Co-infection* 2) Elective Course on HIV Infection*	Local Local	17 Physicians 15 Physicians
2010	CIS Countries	1) Advanced Adult ART TOT Course 2) Clinical Mentoring Course for ID Specialists (Tashkent) 3) HIV Nursing and Palliative Care TOT Course (4 CAR Countries) 4) Adult ART TOT Course (4 CAR Countries) 5) Pediatric ART TOT Course (4 CAR Countries) 6) Advanced Adult ART TOT Course	Regional (USAID, WB) Regional (CAAP, WB) Regional (CAAP, WB) Regional (CAAP, WB) Regional (CAAP, WB) Regional (CAAP, WB)	12 Clinicians 51 Physicians 19 Nurses 23 Clinicians 21 Clinicians 23 Clinicians
2011	St. Petersburg	1) HIV Medicine Course (Pavlov)	Local	268 Physicians
2011	Orenburg	1) Elective Course on HIV Infection*	Local	55 Physicians
2011	CIS Countries	1) Advanced Adult ART Course (Minsk) 2) Adherence to ART Course	Regional (EU-BLR, WHO) Regional (EU-BLR, WHO)	15 Clinicians 16 Clinicians
2012	St. Petersburg	1) HIV Medicine Course (Pavlov) 2) Advanced Adult ART Course for Uzbek Specialists	Local Regional (UNDP-GF, UZ)	343 Physicians 20 Clinicians
2012	CIS Countries	1) Advanced Adult ART Course (Minsk)	Regional (EU-BLR, WHO)	31 Clinicians

\* Course developed through the Strategic Health Partnership Initiative.

**Total Clinicians Trained: 1,789**

During the study tour, Russian partners attended presentations, discussed difficult cases, and visited a number of treatment facilities including the HIV clinic; the TB clinic; the hepatitis clinic; intensive care units; various laboratories (microbiology, TB, Mycology); the robotized pharmacy; and Rivington Nursing House, which focuses on palliative care for HIV/AIDS patients. They met with officials from Elmhurst and Mount Sinai, as well as adherence and palliative care teams, case managers, multidisciplinary teams that provide care for PLWH who suffer from mental health disorders, and with the Consumer Advisory Board and Patient Pen Pal Program.

The Russian physicians learned about advanced issues in ART and management of opportunistic infections, along with other co-infections, while the nurses met with their counterparts and learned about the specifics of US nurse responsibilities and their extensive involvement in practices related to the treatment and care of patients with HIV. The Russian specialists gained knowledge in specific approaches that improve access to HIV care and quality of care and they used what they learned to promote the integrated model in Russia.

AIHA also organized a study tour for four decision-makers from the Ministry of Health and Social Development and St. Petersburg's City Health Committee. This professional exchange focused on enhancing the knowledge of the Russian specialists on effective integration of services for infectious diseases, injecting drug users, and social support organizations for providing comprehensive care for PLWH. The study tour highlighted continuous professional development in these areas and performance improvement measures applied in clinical settings. It began in New York at Elmhurst Hospital Center and Mount Sinai University and continued at the Stanly Street Treatment and Resources (STARR) in Providence, Rhode Island.

## **G. Social Support**

### **Concept of Case Management in Russia**

In December 2009, AIHA participated in a meeting organized by USAID to discuss case management with international NGOs that provide assistance to Russian governmental and nongovernmental counterparts in this area. The discussion focused on the existing concepts of case management and programs implemented by international organizations, including AIHA, URC, PSI, Mama+, IREX, and UNODC.

After the meeting, AIHA participated in the working group with USAID, URC, and ARO on the development of the list of contents for the outline of case management models that have been implemented with USAID support. AIHA also designed a chart (matrix) that includes all the components of the outline. In May 2010, AIHA collected outlines from seven international agencies that work on case management and prepared a chart that summarizes all related concepts. The chart was submitted to USAID and presented to the *Rospotrebnadzor* of the Russian Federation.

Subsequently, AIHA conducted a three-day training on case management for 28 participants, including 26 social workers and physicians from 13 district social services, the AIDS Center, Botkin Infectious Diseases Hospital, and substance abuse treatment services in St. Petersburg; two case managers from Orenburg Oblast AIDS Center also participated. The curriculum was developed by American and Russian partners and topics included basic knowledge of HIV infection and ART, principles of case management, and case management tools for improvement of patient adherence to treatment. US expert Linda Brandt and local faculty co-taught the course.

After completion of the training, a one-day workshop on specific issues related to case management was conducted for 12 potential trainers from the AIDS Centers in Orenburg and St. Petersburg, St. Petersburg District Social Services, and Botkin Infectious Diseases Hospital. This event emphasized training techniques and interaction skills.

### **Development of an HIV Course for Social Workers**

AIHA worked closely with St. Petersburg's Committee on Social Policy to develop a course on the provision

**Fig. 5 — Case Management Trainings Conducted by AIHA and Its Partners in Russia**

Fiscal Year	Training Course (duration)	Location	Number Trained	Key Outcomes
FY09	Case Management: Adherence to ART (3 days)	St. Petersburg, Leningrad Oblast	29	<ul style="list-style-type: none"> <li>• Distribute tools: case severity assessment, workload distribution</li> <li>• Building relationship between medical &amp; social services</li> <li>• Understanding necessity of case management standards</li> </ul>
	Case Management in Social Service TOT (2 days)	St. Petersburg, Leningrad Oblast	12	<ul style="list-style-type: none"> <li>• Recognizing need for a permanent case management training course</li> </ul>
FY10	Case Management Database as a Tool for Effective Provision of Medical and Social Support to PLWH (2 days)	St. Petersburg and Leningrad Oblast	32	<ul style="list-style-type: none"> <li>• Developed mechanism of information exchange between social &amp; medical services</li> <li>• Formulated challenges in effective interaction of social &amp; medical services</li> </ul>
FY11	Case Management for PLWH (3.5 days )	Moldova	26	<ul style="list-style-type: none"> <li>• More detailed training on multidisciplinary teams concept is needed</li> </ul>
	Integrated Medical HIV Case Management for Multidisciplinary Team of Coordinators of Services Who Provide Care and Treatment to PLWH (5 days)	Moldova	25	<ul style="list-style-type: none"> <li>• Multidisciplinary team concept remained a challenge with all members not always present, poor interaction of medical and social service/peer networks/ NGOs, and limited access to psychological support for PLWH</li> </ul>
FY12	Provision of Social Support to PLWH for Postgraduate Education (13 days)	St. Petersburg	25	<ul style="list-style-type: none"> <li>• Integrated course into the curricula of the St. Petersburg State University of Service and Economics</li> </ul>
	Postgraduate Course: Social Work with PLWH (13 days)	St. Petersburg	25	<ul style="list-style-type: none"> <li>• Updated the postgraduate course, Social Work with PLWH, based on feedback from first trainees/ teachers</li> </ul>
	National TOT on Postgraduate Course, Social Work with PLWH (3 days)	St. Petersburg, Altai Krai, Kazan, Leningrad, Orenburg, Samara, Saratov, Yekaterinburg, and Chelyabinsk oblasts	21	<ul style="list-style-type: none"> <li>• All participants were very interested in the course and expressed willingness to either use the course in its entirety or to use individual modules; 7 of 9 territories expressed interest in hosting the course</li> </ul>
	Utilization of the Automated Workplace for Case Management of Medical Records System for HIV-infected patients (1 day)	St. Petersburg	12	<ul style="list-style-type: none"> <li>• Implemented in four affiliated centers of AIDS Centers in districts of St. Petersburg</li> </ul>

of social support to PLWH for postgraduate education in 2011-2012. This is the first course on case management for social workers and psychologists in the Russian Federation. AIHA finalized the curriculum for the 144-hour course, along with detailed descriptions of all seven modules, working in close collaboration with leading experts from the St. Petersburg Medical University, Pavlov State Medical University's Department of Infectious Diseases and Epidemiology, Moscow Medical and Dental University's Department of Clinical Psychology, and the Charity Fund "Open Medical Club, through its program on Health and Law.

The modules were presented at a faculty meeting in St. Petersburg in December 2010. Following discussions and comprehensive comments on each module, the working group agreed to develop a textbook on social support for PLWH based on these course materials. AIHA worked with the authors of the course to edit the text and make the content more appropriate and user-friendly for the target audience.

In early 2011, AIHA worked closely with the Committee on Social Policy of St. Petersburg to develop Terms of Reference (TOR) for a tender on the institutionalization of this course for use in postgraduate education starting in 2011-2012. The Saint Petersburg State University of Service and Economics (SP SUSE) won the tender and, in late June, the Academic Council of the University approved the course.

In September of that year, AIHA assisted the Committee during a presentation of the course, which was attended by more than 90 participants, including representatives of the Service of Social Defense from Leningrad Oblast and from all 18 districts of St. Petersburg. Other participants included staff from NGOs that work with PLWH, area medical facilities, the City AIDS Center, Botkin Infectious Diseases Hospital, and SP SUSE faculty. The presentation was chaired by the Deputy Head of the Committee on Social Policy of St. Petersburg and SP SUSE's Chancellor.

Later that month, 25 social workers from the St. Petersburg City Service of Social Defense started the first 104-hour course on the provision of social support to PLWH for postgraduate education at the SP SUSE with financial support from the St. Petersburg Committee on Social Policy and with technical assistance from AIHA. Over the next three months, 50 social work specialists from St. Petersburg and Leningrad Oblast completed the course and received certificates from the State.

Based on feedback from this first cohort of students and faculty, AIHA, together with the St. Petersburg Committee on Social Policy and SP SUSE, updated the postgraduate course and commenced preparations for a national TOT for the course, which was officially named, "Social Work with People Living with HIV/AIDS (PLWHA)." Representatives of the Service of Social Defense and Russian universities from likely to be interested in hosting the course at their sites were targeted.

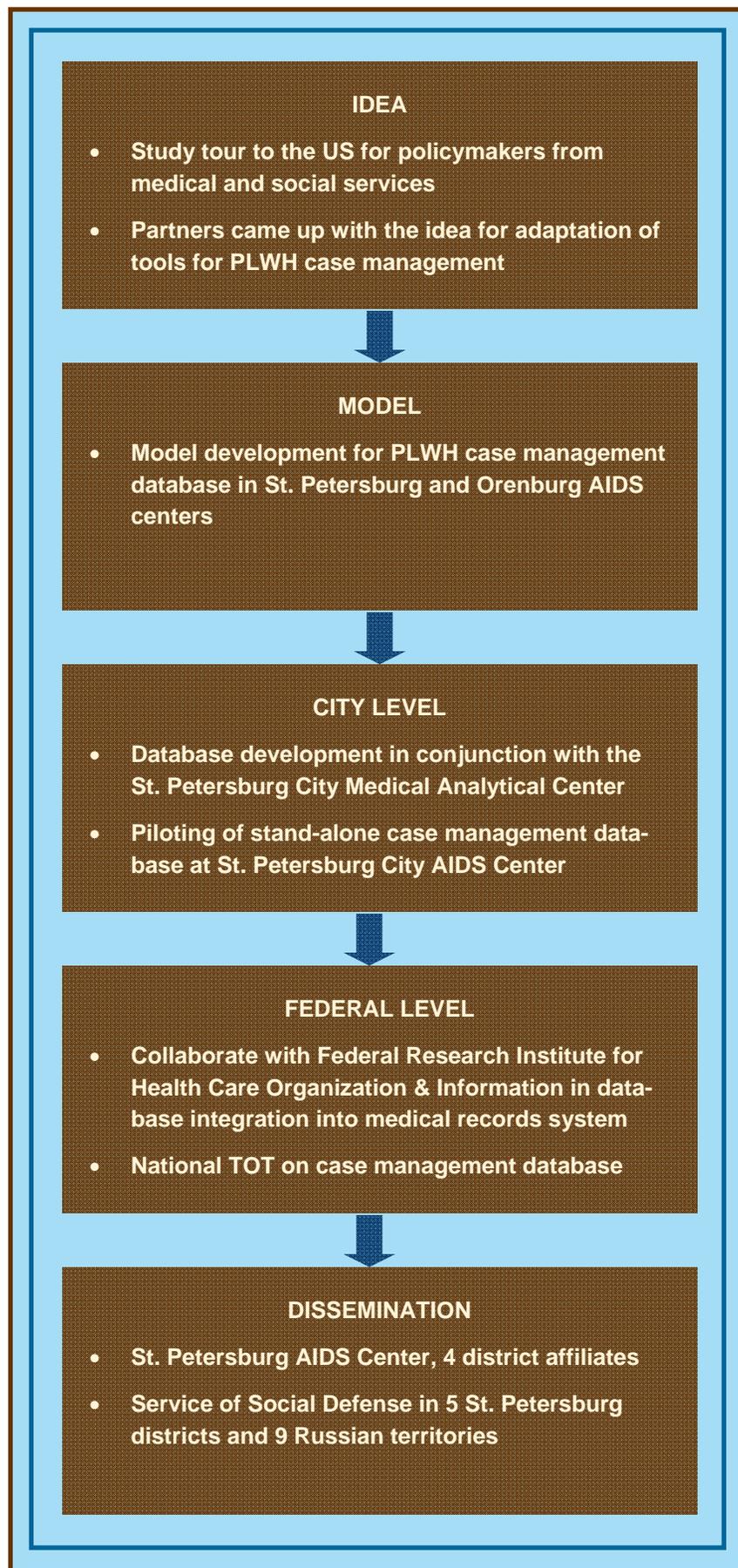
AIHA continued coordination with other NGOs and donor organizations including URC, PSI, GBC, WHO. In preparing for the national ToT, AIHA coordinated with URC and PSI to find the right territories that have universities certified in education for social workers and who are concerned about adapting and using the system of postgraduate training for the service of social protection. To participate in the workshop, AIHA invited representatives of universities, which train specialists in social work and are interested in this specialization. Also, AIHA invited representatives of social welfare services that are interested in professionals with such training. From each area, AIHA invited a representative of the university and a representative of the population. From March 28-30, with support from the USAID-supported Strategic Health Partnership Initiative (SHPI), AIHA conducted a national TOT course on HIV for Social Workers in St. Petersburg. The event was attended by 21 representatives from nine territories of Russia: Barnaul, Chelyabinsk, Kazan, Leningrad Oblast, Orenburg, Samara, Saratov, St. Petersburg, and Yekaterinburg. All the participants were very interested in the course and expressed their willingness to either use the course in its entirety or to use individual modules. Representatives from Altai Krai, Chelyabinsk Oblast, Kazan, Orenburg Oblast, Samara, Saratov Oblast, and Yekaterinburg Oblast all expressed interest in hosting the course at their sites.

AIHA then organized an Open Forum dedicated to a discussion of the challenges and achievements in integrating support for PLWH. This event included presentations from some 21 participants and 15 guests representing NGOs in St. Petersburg, as well as local departments of social protection.

At a national TOT on the provision of social support to PLWH in postgraduate education held during the Open Forum, AIHA presented its case management database. Representatives of the Service of Social Defense from nine territories of Russia expressed interest in the stand-alone database, which was later distributed in these nine regions of the country. Representatives from four NGOs and five district departments of St. Petersburg's Service of Social Defense all expressed interest in the database and were provided with the same.

AIHA worked closely with the deputy head and leading specialist of the Committee of Social Politics in

**Fig. 6 — Strategy Outline for Development of an HIV/AIDS Case Management Database in Russia**



St. Petersburg to discuss the process of preparation for publishing the course materials as a textbook for social workers. Parts of the manual developed with AIHA support was prepared for publication in February 2012. However, the entire manual was not ready for publication at that time because the Committee was unable to complete editing. The Committee took over the task of final editing, and promised to complete this work before the end of 2012 and disseminate the manual to all stakeholders.

AIHA has been collaborating with the Committee on Social Policy of St. Petersburg and its regional center, "Semya," to develop a course on the provision of social support to PLWH. It was utilized in 2011 and contributed to the establishment of a methodological center for education in social protection "Semya." Plans are to initiate a multistage training process that includes the use of modern e-learning methods.

### **Case Management Monitoring Database**

In 2009, together with psychologists of the St. Petersburg AIDS Center and social care specialists from the Orenburg AIDS Center, AIHA developed detailed terms of reference for a case management monitoring tool (database). This database was developed by the Medical Information Analytical Center (MIAC) of St. Petersburg in close collaboration with AIHA. The purpose of the data base is to increase adherence to ART and improve access to AIDS Center case management services and social support in districts of the city.

With support from the new head physician of the St. Petersburg AIDS Center, Dr. Belyakov, and in collaboration with MIAC, the database was developed and is now being utilized at the St. Petersburg AIDS Center.

In 2011-2012, following the initial work with the St. Petersburg AIDS Center, AIHA and the Central Scientific Research Institute for Organization and Information of Healthcare (CSRIOIH), incorporated the case manage-



**In May 2010, AIHA's Moscow staff conducted a training on our HIV case management database for some 30 social workers, psychologists, and allied caregivers who support patients living with HIV/AIDS in St. Petersburg, Russia. Topics covered during this two-day event included methods of clinical interviewing, patient confidentiality, and a thorough overview of the database as a tool to improve comprehensive HIV care.**

ment database, dubbed the Automated Workplace for Case Management, into the electronic medical records system for HIV patients called Pozitive and distributed the database to 20 Russian territories where Pozitive was operational in February 2012.

The AIHA Country Director, the Director of CSRIOIH, and the Vice President of the Russian Academy of Medical Science signed a Memorandum of Understanding to develop a productive, long-term collaboration to strengthen institutional and human potential for providing quality care and treatment to patients with TB, HIV/AIDS, and other infectious diseases in Russia. The goal of this agreement was to support their individual and joint efforts in the areas of developing and introducing an integrated information system for HIV/AIDS care and treatment; developing innovative approaches to continuous professional education; accumulating a repository of evidence-based resources and up-to-date information materials on care and treatment for patients with TB, HIV/AIDS, and other infectious diseases; and disseminating training capacity.

## **H. Quality Improvement to Strengthen Treatment Monitoring Systems**

During this reporting period, AIHA continued to provide ongoing technical assistance related to quality improvement measures such as conducting patient medical chart audits, which have been used at partner institutions since 2006, and patient satisfaction surveys, which we piloted in 2007. These tools have proven highly successful for improving HIV/AIDS treatment, care, and support services. AIHA revised the medical chart audit form to reflect new PEPFAR indicators.

In St. Petersburg, the Director of the AIDS Center supported the implementation of the chart audit and has voiced his plans to make medical chart audits an integral component of their working practice. There, major findings of the chart audit included:

- Absence of a standardized, well-structured registration form for recording patient visits;
- HIV-infection stage was documented in 85 percent of patient charts;
- Only 34 percent of patients registered were actively engaged in care and treatment in the prior year;
- Using the Russian classification of HIV infection, 52 percent of newly registered patients were stage 3, 28 percent were stage 4A, and 12 percent were in advanced stages.
- Approximately 54 percent of newly registered patients meet either clinical or immunological criteria for ART;
- Pneumocystis Pneumonia (PCP) prevention still has not become a widely used practice and has been documented only in 6 percent of patient charts, including 35 percent in patients with CD4 counts <200;
- Only 40 percent of patients actively engaged in HIV care and treatment were screened for TB, about 11 percent of those screened, however, were diagnosed with active TB.
- Among patients with advanced stages of HIV disease, TB was diagnosed in 50 percent with 81 percent of that number having active TB.
- Screening in patients not previously diagnosed with Hepatitis C was done in 79 percent of sampled patients, among patients who were diagnosed with TB, 84 percent were co-infected with both TB and hepatitis (the rate was 90 percent among male patients).

## Patient Satisfaction Surveys

AIHA completed the data analysis of the annual patient satisfaction surveys (PSS) conducted by AIHA together with a team of psychologists and social workers from the St. Petersburg AIDS Center to evaluate patients, view accessibility of treatment and medications, measure patient confidence in their providers, measure patient adherence to their ART regimen, and assess the provider-patient relationship.

The survey was conducted anonymously and consisted of 62 questions grouped into six blocks, including demographics, accessibility, confidence, adherence, extent of care, and general suggestions. The inclusion criteria were HIV positive status, ARV treatment at the time of the survey, and agreement to participate.

Major recommendations, based on the results of the analysis were to:

- Improve PMTCT consultations (88 percent of sampled female patients were younger than 40 percent of those who received consultations according to the chart audit, with 53 percent of the women participating in the PSS noting that family planning was never discussed with them).
- Increase the number of rooms for medical procedures to reduce waiting times.
- Extend the time frame for taking blood samples within a day.
- Provide consultations with doctors and to work with the registration office in the evenings and on Saturdays.
- Make appointments more accessible with medical specialists, such as dentists, TB physicians, and Ob/Gyns.
- Make X-ray and ultrasonic examinations more accessible.

Based on the results of the previous medical chart audit and PSS conducted at the St. Petersburg City AIDS Center, AIHA developed recommendations for the improvement of the quality of care for PLWH and presented them to the administration. These recommendations were reviewed and, as a result, a series of decisions were undertaken by the AIDS Center.

For example, in 2011, the AIDS Center initiated a new round of chart audits and PSS on its own. A pediatric component was included in these for the first time and was conducted at the AIDS Center's Pediatric Polyclinic. For that purpose AIHA, together with experts from AIDS Center, updated the chart audit forms and created a new section on the PSS questionnaire to include specific questions on pediatric services.

The Head of the St. Petersburg City AIDS Center expressed his gratitude to AIHA for the continuous efforts in quality improvement and suggested a joint publication of several articles based on the results for the journal *HIV Infection and Immunosuppressive Conditions*.

VIII International AIDS Conference, Vienna, Austria, 18-23 July 2010

### Implementing Patient Chart Audit Methodology to Improve the Quality of HIV/AIDS Care in the Russian Federation

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**Background**  
 Improving the quality of HIV care in Russia is critical given the rapidly increasing number of PLWH. The American International Health Alliance (AIHA) has introduced chart audits to measure results in the scope and quality of care provided to PLWH, as well as to identify needed improvements.

**Methods**  
 In 2009, AIHA facilitated an audit of 370 outpatient charts randomly selected from a HIV/AIDS center in St. Petersburg City. AIHA Center physicians in the Russian Federation of patient chart audit was supported by other physicians. Selected key clinical care indicators from the Russian patient chart audits are presented. All data were tracked and analyzed in Excel.

**Results**

- Audit examined 370 of patients in the center, 13.4% of patients were in advanced stages of HIV disease and 10.4% of patients were screened for tuberculosis (see Fig. 1).
- Among those screened for tuberculosis, active TB was diagnosed in 14.6% (76) patients and latent TB in 7.1%. Some 8.9% of newly diagnosed diagnosed with TB were also co-infected with hepatitis.
- Among patients with advanced stages of HIV disease screened for tuberculosis, TB was diagnosed in 50% (83.3%) of those individuals with active TB.
- Key indicators of the audit to enable non-screened patients indicate the proportion of HIV and TB co-infection is as high as 13.4% among that population, with some 5.7% estimated to have active TB (see Fig. 2).
- Among patients with CD4 counts <200, PJP prophylaxis and preventive treatment for tuberculosis was provided to 70% of those screened.

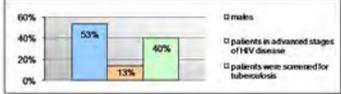


Figure 1. Key Characteristics of Patient Sampling Review.

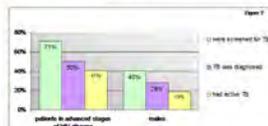


Figure 2. Tuberculosis Screening Results for Specific Populations—Patients with Advanced HIV Disease and Male Patients.

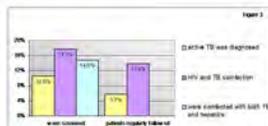


Figure 3. HIV Patients Screened for TB and Hepatitis—Implications for the Russian Patient Population.

**Conclusions**

- Audit of outpatient charts clearly identifies deficiencies in either implementation or documentation of key clinical care practices.
- Audit is a reliable tool for assessing the quality of care. They are easily reproducible and yield clinically significant results.
- The tool points to deficiencies in the most important problems and, importantly, a means through study problems.
- Provides participation provider direct feedback.
- This method is not costly to be applied in clinical practice.

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**A posters on the AIHA Twinning Center's HIV care and treatment projects in Russia was highlighted at the International HIV/AIDS Conference in Vienna, Austria, July 18-23, 2010.**

AIHA prepared two articles on the medical chart audit that were accepted by the editorial board of the journal:

- “Audit of Outpatient Case Histories as a Means to Improve Health Care Provided to HIV Patients: Methodological Aspects” (*HIV Infection and Immunosuppressive Conditions*, St. Petersburg, 2010, T. 2, #2. Pages 67-74); and
- “Audit of Outpatient Case histories as a Means for Assessing and Monitoring the Quality of Medical Care for HIV Patients” (*HIV Infection and Immunosuppressive Conditions*, St. Petersburg, 2011, V. 3, #1. pp. 37-42).

AIHA also supported an initiative proposed by medical psychologists at the St. Petersburg City AIDS Center and conducted a new study on pediatric adherence to ART (Pediatric Adherence Review, PAR). The idea of the research was to analyze factors that contribute to adherence to treatment in children. The research was based on qualitative and quantitative analyses of interviews and out-patient chart audits. The questionnaire for the research was created by AIDS Center specialists. It was the first research on pediatric adherence to ART ever conducted in the Russian Federation.

### **Results Stemming from AIHA Quality Improvement Projects at St. Petersburg AIDS Center**

Based on the results of the chart audit and patient satisfaction survey, the following measures to improve patient accessibility to the medical services were introduced:

- One more room for blood intake was opened.
- Medical procedure rooms started to operate for a full working day rather than a half-day.
- TB doctors’ working hours were extended and X-ray equipment was relocated closer to the office.
- A doctor on duty is available now during evening hours and on Saturdays.
- Two more psychologists were hired.
- The psychologists’ job description was revised to include provision of initial patient counseling.

Other efforts to disseminate AIHA's successful quality improvement projects include:

- Joint presentation of more than five reports based on the results of the medical chart audits, patient satisfaction surveys, and pediatric adherence review with the St. Petersburg AIDS Center were made at several annual conferences in memory of Dr. Vinogradova in St. Petersburg.
- AIHA presented an a poster titled, “Implementing Patient Chart Audit Methodology to Improve the Quality of HIV/AIDS Care in the Russian Federation,” at the XVIII International AIDS Conference in Vienna in July 2010.
- AIHA distributed the patient satisfaction survey, a brief descriptive manual, the complete questionnaire, and related tools for analysis to the Pavlov State Medical University in St. Petersburg and to the Institute of Development of Public Health Services in Astana, Kazakhstan.
- Two abstracts on the results of the medical chart audits and patient satisfaction surveys were accepted for poster presentations at the XIX International AIDS conference, which will take place July 22-27, 2012, in Washington, DC.

### **I. Professional Development in HIV Medicine Public-Private Partnership with ViiV Healthcare**

Launched in 2007, the Professional Development in HIV Medicine project is implemented through a public-private partnership between AIHA and the pharmaceutical company ViiV Healthcare. This project benefits from the significant involvement of Russian and international experts as trainers and mentors.

With the overarching goal of developing expertise in the area of HIV infection prevention and treatment throughout Russia, the Professional Development in HIV Medicine project has worked to enhance the scientific knowledge and potential of young Russian professionals working in HIV/AIDS care and treatment.

### The Professional Development in HIV Medicine Project in Numbers

- 8 skills-building workshops conducted in Moscow and St. Petersburg for the program participants.
- 6 regional workshops with program participants serving as junior faculty conducted in five Russian cities for more than 200 HIV and TB specialists; 12 program participants gained experience as faculty.
- By October 2011, participants provided basic HIV care to 25,273 patients (up from 3,750 patients in 2008) and administered ART to 5,249 patients.
- 14 interactive webinars provided to more than 250 participants; these were viewed more than 1,000 times online.
- Social network groups on Facebook, VKontakte, and YouTube have been created and have been met with growing interest.
- More than 10,000 copies of textbooks and guidelines from international thought-leaders in HIV care and more than 1,000 educational CDs have been translated and printed for free distribution in cooperation with MSD Pharmaceuticals (2010).
- More than 15 participants attended international and Russian conferences; one submitted poster was accepted for oral presentation at the XVIII International AIDS Conference in Vienna, Austria.

**Fig. 7 — Public-Private Support for the Professional Development in HIV Medicine Project**

Contributor	2008	2009	2010	2011	2012 (projected)	Total
USAID/AIHA	\$118,000	\$37,818	\$39,111	\$50,080	\$50,000	\$245,729
ViiV	\$181,000	\$75,000	\$90,589	\$165,546	\$100,000	\$511,135

This has been accomplished by establishing a collaborative network of Russian thought leaders and agents of change fully capable of elevating the field of HIV medicine in Russia and contributing their knowledge and experience in the international public health arena.

When the project was initiated in October 2007, an open competition was set up to identify worthy candidates. Of the 45 applications that were received, 29 potential candidates were selected to take a professional level examination to determine their level of knowledge. Out of these, 23 participants were selected based on the test results and project objectives, which are:

- Developing a core group of opinion leaders in the area of HIV/AIDS care and treatment;
- Developing and supporting a Russian language web-based resource on HIV/AIDS care and treatment;
- Strengthening medical professional education in the field of HIV/AIDS; and
- Supporting the translation, publishing, distribution, and use of professional literature on HIV/AIDS care and treatment.

As the project progressed over the course of the past five years and some of the initial objectives were met, some priorities of the project have shifted. For example, in the last two years, there has been more of a focus on web-based resource development while distance education has played a larger role than it did initially. In 2011-2012, the printing and publishing component of the project was shifted to Merck, Sharp, and Dohme Pharmaceuticals (MSD).

It is safe to say that the 12 program participants who have worked as junior faculty have received enough skills and knowledge to continue as educators and trainers for their peers. The project has made it clear that there remains a marked need to develop an improved distance education system for modern doctors in the Russian Federation. Even with the most advanced young professionals, there is still a lack of basic IT skills, knowledge of the English language, and an ingrained habit of using evidence-based tools and approaches to clinical practice.

While the Professional Development in HIV Medicine project represents a model for future educational activities in other healthcare disciplines, there are certain implementation challenges. For example, inactivity of some participants in the online educational component emerged as a problem, partly due to their lack of computer knowledge. Every year, about one-fifth of the project participants changed due to personal and professional reasons (i.e. pregnancy, education, marriage, change of job). New participants were slow to fully learn all of the proper online education tools. Another challenge was refusal of some of the AIDS Center chief physicians to cooperate and allow their staff to participate as trainers or to go to international conferences.

While the sustainability of the program is unlikely without donor funds either from public or private sources, the development of the distance education component — seminars and social networks, for example — allows for a low-cost mechanism to support the active participants in their efforts to improve their knowledge and become trainers, as well as an information source for their peers and patients.

## **J. Monitoring and Evaluation (M&E)**

AIHA submitted all reports on the PEPFAR program implementation during the funding period on time and all targets were achieved. In 2010 AIHA was informed by the Director of the AIDS Center in St. Petersburg that the Center does not have any authority to provide AIHA with data due to the lack of a formal agreement between the St. Petersburg City Health Committee and USAID. USAID was informed about this and tried to solve this issue, but since 2011, AIHA has not included the St. Petersburg AIDS Center in the M&E plan.

AIHA participated in Annual Strategic Information Partners Meetings at USAID, took part in discussions and provided feedback on the data cleaning process, strategies, and challenges regarding target setting and reports from partners. In addition, AIHA submitted regular Quarterly Reports to USAID on time and these included reports on the Twinning Center activities and accomplishments.

**“Increased drug use has led to an equivalent increase in people living with HIV throughout the country. Unfortunately, more and more people who seek treatment are already at the AIDS stage. We’re also seeing more people over the age of 50, as well as many more infected pregnant women ... women in general, for that matter.”**



**— Dr. Olga Shirobokova, infectious disease physician at Samara Oblast AIDS Center and participant in AIHA's Professional Development in HIV Medicine Project.**

### III. Achievements, Challenges, and Lessons Learned

The groundwork for the HIV/AIDS Twinning Center program activities in 2009-2012 was laid starting in 2004 with the launch of AIHA's USAID-supported HIV/AIDS treatment and care partnerships in St. Petersburg and Orenburg. This strong foundation was developed over the course of the next four years and continued to grow during the period from 2009 to 2012 that is covered in this report.

Over the past four years, AIHA has focused primarily on sustainability and on developing in-country capacity in HIV/AIDS diagnostics, care, and treatment. Two ATECs were developed in St. Petersburg: one at the St. Petersburg Medical Academy for Postgraduate Studies and another at the St. Petersburg AIDS Center. With affiliated clinical training sites located at the outpatient departments of the AIDS Center, Botkin Infectious Diseases Hospital, the Republican Infectious Disease Hospital in Ust-Izhora, and City TB Hospital No 2, these ATECs also benefitted from close collaboration and strong working relationships with all the major educational institutions of St. Petersburg, including Mechnikov State Medical Academy, the St. Petersburg Medical Academy for Postgraduate Studies (currently both academies are part of the North-Western State Medical University named after Mechnikov), Pavlov State Medical University and its Nursing College, and Nursing College No. 6. Each of these played a critical role in the institutionalization of AIHA's training curricula and contributed greatly to AIHA's successful capacity building in Russia and elsewhere in Eurasia.

The following are some of the major achievements of the AIHA Twinning Center partnerships in Russia:

- Garnering the support of key decision-makers from the St. Petersburg City Health Committee and Committee of Social Development for the institutionalizing of a participatory approach to development of a partnership strategy and annual work plans.
- The adoption of a multidisciplinary approach and a focus on institutionalization of best practices.
- The partnership model, which allowed Russian partners to see the best practices in the provision of HIV/AIDS care and treatment the United States.
- The utilization of the Knowledge Hub courses where partners had access to more than 40 evidence-based educational courses developed by Russian and international experts.
- The gradual development of the ATECs, which focused on faculty enhancement through the introduction of new case-based teaching methods, clinical mentoring, TOTs, and the introduction of new training courses with well-developed curricula. This started in 2005 with the "Introduction to ART" course and every year expanded with the development of new, more advanced courses. Each course, in addition to the presentation, has a set of case studies, tests, and handouts. Upon completion of major training activities for the faculty and medical personnel at the ATECs training sites, AIHA introduced the distance education methodology through webinars for continuous medical education and a course on TB/HIV in the distance education format.
- With continuous support through other projects, AIHA continues collaboration with partners in St. Petersburg through the Strategic Health Partnership Initiative (SHPI), the School for Scientists, and the Professional Development in HIV Medicine project
- Due to the support of the USAID-funded projects, which introduced the St. Petersburg AIDS Center to modern evidence-based medical practices in diagnostics, treatment, and care for PLWH coupled with the vision of the Center's Director, the St. Petersburg City AIDS Center is transforming into an educational and scientific center for HIV/AIDS on the federal level. The Center became a clinical site for the course "HIV-Medicine" that is conducted in collaboration with Pavlov State Medical University. The Center administered training courses not only for trainees from the Russian Federation but also from Belarus and Central Asia.
- With AIHA support, the AIDS Center published a manual "HIV-Medicine" that has been distributed on the national level and in the CIS and is popular among healthcare professionals.
- Replication of the partnership results requires systematic technical and administrative skills together with support from governmental and non-governmental stakeholders and the PLWHIV community. AIHA staff facilitated policy dialogues to assure that partnership activities were brought to the attention of government policy makers through study tours, roundtable discussions and other meetings.

## AIHA's Russian Twinning Center Partnership Program in Numbers: 2009-2012

• Russian specialists and policymakers who participated in exchange visits to the US:	9
<b>Russian specialists trained in:</b>	
• ART and Management of Opportunistic Infections in Adults:	189
• ART and Management of Opportunistic Infections in Children:	19
• Integrated Approach to Treatment of HIV/TB/Hepatitis co-infection in Substance Users:	108
• Basics of HIV Infection: Improving Tolerance to PLWH for Nurses:	83
• Adherence to ART:	44
• HIV Palliative Care:	372
• ART in Women of Reproductive Age:	58
• Case Management:	105
• Social Support for PLWH:	71
<b>Total Number of Russian Specialists Trained in HIV/AIDS Issues:</b>	<b>1,049</b>

While AIHA's Twinning Center partnerships and associated projects in Russia enjoyed much success over the past four years, there were challenges that impacted implementation. First, the vertical structure of the provision of medical services in the Russian Federation and the unwillingness of key components of comprehensive care for PLWH, such as the AIDS Centers, the TB service, social services, and narcology, to collaborate with one another presented a significant obstacle to planned implementation of an integrated approach to HIV-related treatment, care, and support services, particularly for people who use injection drugs. The fact that the AIDS Center does not have a license for the provision of educational activities and faculty from medical universities usually do not have a lot of clinical experience in diagnostics and treatment of HIV presented another challenge, as did the frequent rotation of medical personnel.

Following the initial presentation of the chart audit results to the Acting Director of the Orenburg Oblast AIDS Center and Head of Outpatient Department, partners suggested developing a two-page form to summarize the Ministry of Health and Social Development's recommendations for dispensing medication to patients with HIV; this form was also to include major lab tests results. AIHA agreed that such a form would have been useful, however, the new Director of the Orenburg Oblast AIDS Center did not approve this initiative. AIHA staff also presented the results of the chart audit conducted in Orenburg City and projects sites in Gai, Novotroitsk, and Orsk to the new Director and key personnel and suggested continuing this practice, but the Director did not provide his support for this initiative either. PEPFAR funding initially supported partnership projects in Orenburg and St. Petersburg, but due to a decision by the national government in September 2008, all AIHA activities were curtailed in Orenburg and St. Petersburg became our only project site beginning in fiscal year 2009.

In summary, while many healthcare challenges remain in treating and caring for PLWH in Russia, the AIHA Twinning Center model of international collaboration and the provision of technical assistance have led to a number of significant achievements. By working directly with healthcare professionals and policymakers, the partners have helped lay a strong foundation for ongoing change and were able to fill many gaps in the healthcare system. Political support and individual commitment have been critical to the success of the Twinning Center program in Russia and to bringing about sustainable health system reform.

Having strengthened existing institutions, the partners have ushered in programs that are more relevant and responsive to the populations they serve, leaving healthcare leaders in Russia better positioned to sustain these services and seek new opportunities to improve quality of care.



## About the HIV/AIDS Twinning Center

The HIV/AIDS Twinning Center mobilizes and coordinates the resources of healthcare and allied professionals in the United States and abroad to effectively build capacity to reduce HIV infection rates and provide care to those infected with, or affected by, HIV/AIDS in support of the President's Emergency Plan for AIDS Relief (PEPFAR).

Funded by PEPFAR through a cooperative agreement with the US Department of Health and Human Services, Health Resources and Services Administration (HRSA), the Twinning Center is a project of the American International Health Alliance, a US-based nonprofit dedicated to helping limited-resource communities make positive, sustainable changes that improve accessibility to a broad range of high-quality healthcare services and preventive programs.

The contents of this report are the responsibility of AIHA and the Twinning Center and do not necessarily reflect the views of the United States government or other funding agencies.



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