



PEPtalk

News you can use
from PEPFAR Côte d'Ivoire

No. 3, July 2008

Coordinator's Corner

As I reflect on my three years with PEPFAR Côte d'Ivoire, I am overwhelmed by just how far we have come together. Almost four times as many people are receiving antiretroviral treatment (41,000, compared to 11,000 in 2005), and our support for palliative care and for orphans and vulnerable children has increased sevenfold. Our collective dream was to make a difference in Côte d'Ivoire, not only to mitigate the horrific impact of AIDS but also to contribute to rebuilding communities and humanizing a society torn by political turmoil. We have battled, we have struggled, and we have given every inch of ourselves for a good greater than our own. We have put the needs of others before our own, and I believe we've made a difference.



As I prepare to leave in a few weeks to return to the United States, I am filled with emotions ranging from happiness to fear. But I take comfort in the fact that there are real heroes in Côte d'Ivoire who will continue to do what needs to be done to relieve suffering and rebuild lives. A quote from the American writer Alice Miller sums up what was confirmed for me in Côte d'Ivoire: "The human spirit is virtually indestructible, and its ability to rise from the ashes remains as long as the body draws breath."

Because of what you all have taught me, I will leave wiser, smarter, happier, and more humble than I was when I arrived. My hope is that in some small way, I have also contributed to making lives better. My gratitude to you all is deep, and I am in awe of what we have accomplished together. You have delivered on your promise to the American people and, more importantly, on your commitment to those who need and believe in you most. May we never, ever give up on the dream of an AIDS-free world, and may love be our inspiration as we continue the fight, wherever we are. I will miss this country, and each of you.

Jyoti Schlesinger

PEPFAR Country Coordinator

'District approach' pays big dividends

Last year, the number of people on anti-retroviral therapy in Abengourou quadrupled, from 260 to 1,024. So did the number of people tested for HIV.

What was happening in Abengourou? The district approach.

Initiated by PEPFAR partner Elizabeth Glaser Pediatric AIDS Foundation (EGPAF) in accordance with the national strategy, the district approach is designed to improve efficiency and sustainability in scaling up HIV/AIDS services by building ownership and capacity at the health district level. EGPAF launched the approach in Abengourou, a high-prevalence area in eastern Côte d'Ivoire, in 2007.

With committed leadership from the health district director, the district senior management team was vitalized, and an HIV/AIDS coordinator was appointed to oversee officials responsible for HIV counseling and testing, PMTCT, ART, and orphans and vulnerable children (OVC). Monthly meetings tracked progress on an annual plan developed with input from all local stakeholders.

"The district approach aims to give the leadership to the district for the whole planning and implementation cycle – from the situation analysis to the evaluation," says Dr. Anthony Tanoh, EGPAF

program director.

Within a year, the district achieved 82% coverage of HIV/AIDS activities, by far the highest in the country, including coverage at many service sites in surrounding rural areas. Results for CT, PMTCT, and ART increased dramatically (see table).

"The district approach is not magic," says Tanoh, who hopes to see the approach extended to 12 districts in the coming year. "You need strong health district leadership and good technical expertise for the interventions. But if you have those, the district approach is the most direct way to get critical services to the targeted population in a sustainable way."

Success Story

HIV prevention, care, and treatment indicators	2006 (before district approach)	2007 (with district approach)
HIV testing sites	7	24
Persons tested	1,875	9,174
PMTCT sites	5	19
Pregnant women tested in antenatal settings	2,559	7,254
Pregnant women tested HIV+	197	372
Pregnant HIV+ women receiving ARV prophylaxis	153	266
Care and treatment sites	6	11
Persons on ART	260	1,024

Reformed CCM takes charge of Global Fund activities

A new Country Coordinating Mechanism (CCM), strengthened by structural reforms and elections, has assumed its role of leading projects financed by the Global Fund for AIDS, Tuberculosis, and Malaria in Côte d'Ivoire.

Election of new leadership completes a year-long, hotly debated process of important reforms designed to correct a variety of governance and conflict-of-interest problems that threatened the viability of the CCM and the health projects it is charged with guiding. The reform process, supported by technical and financial assistance from PEPFAR, paves the way for strengthened collaborative action between the country's two major donors in the fight against HIV/AIDS.

The CCM – a national body representing government, the private sector, civil society, development partners, and people affected by HIV/AIDS, TB, or malaria – oversees about \$70 million in projects (implemented through Care International, UNDP, and the National TB Pro-

gram) and is applying for Round 8 funding.

After implementation of its HIV/AIDS project was interrupted and CCM problems came to a head in February 2007, the CCM launched a series of reforms, with support by PEPFAR partner Management Sciences for Health and Initiative WHO/Italy, leading to:

- A decree defining the CCM's legal status
- Bylaws governing internal functioning and ethics
- A governance manual (covering procedures, monitoring and evaluation, and communication)
- Reconstitution of the 25-member CCM, including majority membership from civil society and the private sector
- Transparent election and redefinition of roles and responsibilities of the CCM bureau (executive committee) in February 2008. The new bureau consists of:
 - * President: Professor Kadio Auguste (civil society)



Prof. Kadio

- * 1st vice president: Pierre-Daniel Brechat (private sector)
- * 2nd vice president: Dr. Agnès Amessan (Presidency of the Republic)
- * 3rd vice president: Jyoti Schlesinger (PEPFAR)
- * Representative of people living with HIV/AIDS: Ako Cyriaque

The new president, Professor Kadio, expressed his firm intention of leading a transparent and inclusive body and invited stakeholders from all levels, in particular beneficiaries, to contact the CCM regarding issues related to the implementation of Global Fund activities.

The Global Fund is supported by funds from countries worldwide, including the United States. With a shared commitment to expanding quality HIV/AIDS services, PEPFAR and the Global Fund work in close collaboration to avoid redundancies and maximize synergies.

For a list of CCM members and other information, please visit the PEPFAR Web site at <http://abidjan.usembassy.gov/pepfar.html>.

New Partner

Who: **Save the Children UK**

Country director: Heather Kerr

Program director: Fatiha Khelifi

What: Working with local NGOs and community counselors to improve the lives of at least 5,500 OVC (in FY08) through health care, psychosocial, educational, nutritional, and other support.

When: Started activities in



**Save the Children
UK - Côte d'Ivoire**

December 2007.

Where: In at least 45 villages in western Côte d'Ivoire, around Guiglo, Duekoue, Bolequin, Toulepleu, and Odienne.

What else: Save the Children works for positive and lasting changes in the lives of children, especially the most marginalized and vulnerable, and for the realization of their rights. It sees children as partners in its work.

How to contact: Fatiha Khelifi, (225) 08 08 13 53, fkhelifi@hotmail.com; Web site: www.savethechildren.org.uk

HIV testing scores 'A' in quality assessment

The first phase of a pilot external quality evaluation of HIV testing in Côte d'Ivoire has been a double success, demonstrating high-quality testing practices through a well-organized evaluation process.

All but three of 94 participating HIV testing sites (40 health-care sites and labs in Abidjan and 54 in the interior) scored a perfect 100% by correctly testing all 10 specimens (five each of fresh and of dried blood), as confirmed by independent testing. One site in Abidjan and two sites in the interior correctly tested nine out of 10 and underwent corrective measures followed by a supervision visit.

The evaluation, launched in February and March, was the first of four semi-annual quality checks by PEPFAR partner Projet Retro-CI in collaboration with the Ministry of Health. Officials praised the smooth implementation of the evaluation process, crediting good communication and effective coordination by all participants:

- The National HIV/AIDS Care and Treatment Program (PNPEC), which coordinated training for regional and local quality-assurance officers, who in turn coordinated participating health facilities
- The National Public Health Laboratory (LNSP), overseeing and training to take over the evaluation process
- The National Blood Transfusion Center (CNTS), which furnished materials for the plasma specimens
- The National Public Health Pharmacy (PSP), which handled distribution of specimens and results
- Projet Retro-CI, which composed the specimens and analyzed the results

More information about PEPFAR and its partners on the Web at

<http://abidjan.usembassy.gov/PEPFAR.html>

TB care moves ahead with liquid culture

PEPFAR partners have begun renovating and equipping three central laboratories to conduct liquid culture and drug susceptibility testing (DST), a first in Côte d'Ivoire and a major step toward improved diagnosis and treatment of tuberculosis (TB).

As part of PEPFAR's emphasis on strengthening the National TB Program (PNLT) and its laboratory network, the American Society for Microbiology is leading renovation work and installation of bio-safety cabinets and of automatic and manual MGIT machines at Institut Pasteur, CEDRES and the CAT (TB treatment center) in Adjamé.

TB, the leading killer of people living with HIV/AIDS, is currently diagnosed in Côte d'Ivoire through smear microscopy. With liquid culture and DST, health workers will be able to identify drug-resistant TB specimens and adjust treatment accordingly, improving individual health outcomes and reducing the selection and growth of dangerous multi-drug-resistant TB strains. DST is expected to be available

within six months at the first three labs and will be decentralized to other labs over the next two years.

"This advance in laboratory capacity will go hand in hand with our efforts to implement routine screening for TB at HV/AIDS clinics and routine screening for HIV at TB clinics," said Dr. Ekra Alexandre, chief of PEPFAR's Care and Treatment Branch. "Together they will have a significant impact on mortality due to TB/HIV co-infection."

PEPFAR partners are also working closely with the PNLT and Institut Pasteur to introduce a stronger external quality assurance (EQA) program for TB labs. The country's current EQA program for TB smear microscopy relies on on-site readings of specimen slides. In July, partners will pilot an EQA program based on World Health Organization recommendations – including "blind readings" of specimens at least twice a year – at sites in and around Abidjan. Results of the pilot will inform extension of the EQA program nationwide.

CI on the world stage

The work of the PEPFAR

Côte d'Ivoire family won **international attention and awards** at the recent HIV Implementers' Meeting in Kampala, Uganda. Presenters from CI included RIP+ (with two, including a plenary speech), EGPAF (2), the PNOEV, JHU/CCP, PATH, SCMS, American Society for Microbiology, and CDC. PEPFAR Country Coordinator Jyoti Schlesinger, who gave a plenary presentation, won PEPFAR's Joe Heydon Memorial Award for her work, and the PEPFAR CI's Strategic Information team received the STAR Award. In a parallel ceremony in Kampala, the Johns Hopkins University Center for Communication Programs' Sports for Life program in Côte d'Ivoire became the first francophone winner of **AfriComNet's award for best multimedia HIV/AIDS strategic communication** in Africa.

Care for orphans and vulnerable

News in Brief

children (OVC) has taken another step forward with the validation of a **new OVC National Strategic Plan 2007-2010**, which aims to improve coordination and provide care for 30% of the country's

540,000 OVC by 2010. The plan was developed by the National OVC Program (PNOEV) and its partners – including OVC – with support from PEPFAR and UNICEF. Copies of the plan are available from the PNOEV.

A national process is underway, led by the PNPEC, to **harmo-**

nize practices of community-based actors ("community counselors") to improve services for PLWHA and OVC. PEPFAR is providing significant new funding in FY2008 to strengthen this crucial link between health facilities and community, and invites all development partners to join in the effort to define national standards.

NPI partner RIP+ is awarding its first round of **subgrants to 25 PLWHA organizations** to strengthen prevention, testing, and care services throughout the country. The nine-month grants total \$180,000.

Côte d'Ivoire is moving closer to a national **HIV Counseling and Testing Day** with workshops to design materials and messages ("It's better to know...") and to plan needed services, communications, mobilization, and monitoring. The effort is led by the MLS and MSHP/PNPEC, with RIP+ and JHU/CCP. Target date for the first TD is late 2008 or early 2009.

JHU/CCP has printed a **user guide for Juste pour Gouter**, a collection of young authors' stories selected during a national competition.

Hope Worldwide, the MLS, and JHPIEGO recently completed a workshop for more than **20 trainers in abstinence for youth**.

PEPFAR CI is looking for **four new staff**: two advisers (strategic information and highly vulnerable populations) and two administrative assistants.

Contribute to PEPtalk

Do you have a news item, a story idea, a good photo? A commentary on an important issue? Share it. Send it to us at peptalk@ci.cdc.gov. Please include your contact information.

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Comings & Goings



Dr. Nahoua Gourou Iremine, new PEPFAR technical adviser for TB/HIV



Joseph Trika, PEPFAR's new technical adviser for AB



Trad Hatton, Academy for Educational Development (TA for NPI partners)



Soletchi Seya, leaving Hope Worldwide CI



Jyoti Schlesinger — last day as PEPFAR CI coordinator: July 24