



Marking 10 Years of PEPFAR's Accomplishments



Technology is essential to modern medical training. Through the Medical Education Partnership Initiative (MEPI), African medical schools are strengthening their curricula, developing online teaching tools to enable distance learning and improving Internet access. *Dr. James Kiarie/MEPI.*

At the end of the last century, the HIV/AIDS epidemic was at its height, killing scores of people in every corner of the world. Sub-Saharan Africa was struck particularly hard, with countless children orphaned and nearly an entire generation decimated. Something had to be done. To combat the epidemic, U.S. President George W. Bush launched the U.S. President's Emergency Plan for AIDS Relief (PEPFAR) in 2003.

The year 2013 marks a decade of PEPFAR's remarkable achievements in helping protect people

against this deadly virus. The program has been active in 80 countries, saving at least 1 million babies from being inadvertently infected by their HIV-positive mothers and now providing antiretroviral drugs to more than 5 million patients who could not otherwise afford them.

Research funded by the U.S. National Institutes of Health (NIH) has provided essential guidance to PEPFAR's treatment and prevention programs. For instance, an NIH-supported study in Haiti demonstrated that patients in resource-limited settings could comply well

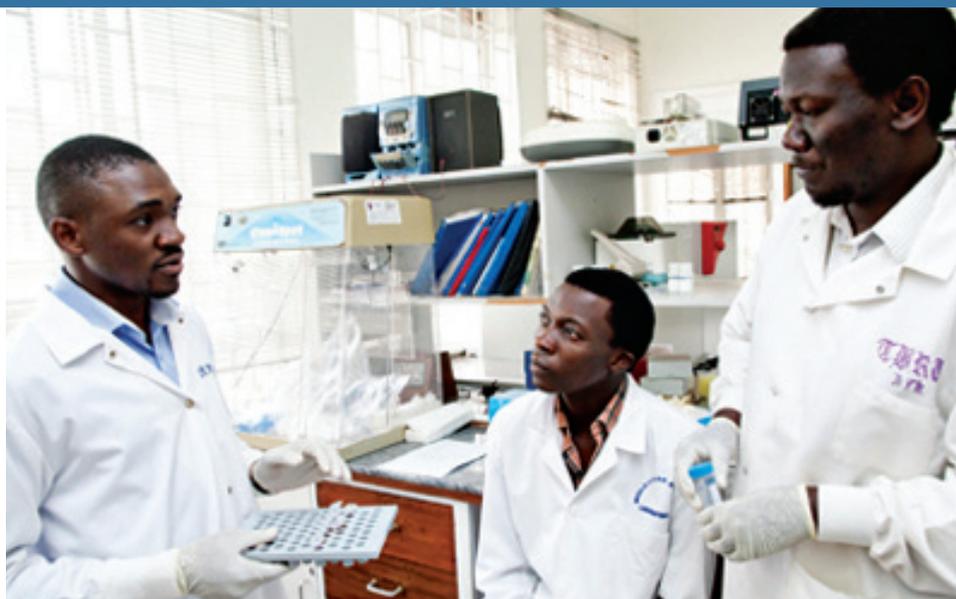
with complicated antiretroviral drug regimens, and a multicountry study showed that if patients began taking antiretroviral drugs as soon as possible after diagnosis, they were less likely to spread the disease to their sexual partners.

Many of the international scientists who were instrumental in these landmark studies were trained through the NIH's Fogarty International Center. By training physicians and scientists who return to their countries, the Fogarty International Center helps bolster the capacity of countries to improve health care over the long term.

Building Health Capacity in Africa

As PEPFAR began to transition from an emergency response program to a more sustainable model, its leadership focused on enabling countries to take ownership for their own HIV/AIDS programs. To support this shift, PEPFAR launched the Medical Education Partnership Initiative (MEPI) in 2010. Its objective is to increase the quality, quantity and retention of health care workers in 12 sub-Saharan countries. NIH contributes funds and helps administer MEPI through the Fogarty International Center.

PEPFAR and MEPI are transforming health care delivery and research capacity in many ways. Through MEPI, medical school curricula are being strengthened, incorporating electronic components such as procedure demonstration videos that enable distance learning. Institutions are upgrading their Internet connectivity, increasing access to current journal articles and building e-libraries



The training and retention of quality health care workers is critical to boosting the capacity of sub-Saharan countries to take ownership of their own HIV/AIDS programs and expand them to include cancer, heart disease and other chronic illnesses. *Richard Lord for Fogarty/NIH*

of learning tools. They are developing programs to increase expertise in neglected areas such as emergency medicine, surgery, cancer and heart disease. Skills labs are being assembled to offer students the opportunity to practice surgeries and other procedures on lifelike models. Institutions are ramping up faculty recruitment and dramatically increasing enrollment. Finally, resources and lessons learned are being shared among the MEPI network members.

Sustaining Progress Through Local Ownership

Staff retention is a major challenge for many African institutions, with higher salaries elsewhere causing a brain drain. Some MEPI funds support research projects, not only to expand training and accumulate country-relevant data, but importantly as an enticement for faculty to remain in their institutions and help sustain medical capacity. Another challenge is staffing clinics in rural areas, where most

of Africa's population lives. To address this issue, MEPI grantees are nurturing rural training facilities and recruiting students from local communities who are more likely to remain in place after completing their health care studies.

Since MEPI grants are made directly to African institutions, local leaders can decide how best to apply funding to meet their country's particular needs, which enhances their sense of ownership. MEPI institutions work closely with their government ministries to ensure goals are aligned with country priorities and to foster government support.

Thanks to PEPFAR and MEPI, the future looks much brighter than it did a decade ago, making the prospect of an AIDS-free generation truly possible.

The above is adapted from Dr. Roger I. Glass' opinion piece commemorating the 10th anniversary of PEPFAR.

Dr. Roger I. Glass serves as the director of the Fogarty International Center and the associate director for international research at the National Institutes of Health. *NIH*

