

## SUFFER THE LITTLE CHILDREN

*Nelson Mandela, former president of South Africa, delivered the closing speech at the recent XIV International AIDS Conference in Barcelona. An excerpt from his speech follows.*

Nothing is more heart-rending than the plight of AIDS orphans, who so often find themselves rejected and ostracized by their own communities. Nothing can shake me more than the sight of these innocent young children suffering physically, socially, and emotionally. Nearly 14 million children have lost one or both parents to AIDS. It is predicted that there will be more than 25 million AIDS orphans by 2010.

This is a tragedy of enormous consequence. AIDS is killing more people than were killed by all the worst wars of history and natural disasters. AIDS is a war against humanity. And AIDS is a war that requires mobilization of the entire population.

Children orphaned by AIDS will grow up without the love and care of their parents, and most of them will be deprived of their basic rights—shelter, food, health, and education. Many will be subjected to abuse, exploitation, discrimination, trafficking, and loss of inheritance. We have an obligation to provide proper care *(continued on page 2)*



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## An International Spotlight on AIDS

**A**T THE RECENT XIV INTERNATIONAL AIDS Conference in Barcelona, delegates confronted a series of tragic numbers: 26 million dead, 34 million infected, 14 million orphaned. By the end of this decade, a new study found, 45 million more people worldwide may be infected with HIV. “We can prevent 28 million—63 percent—of these projected new infections,” said Dr. Helene Gayle, the Bill and Melinda Gates Foundation’s director for HIV/AIDS and Tuberculosis, in discussing the study at the conference’s opening plenary on prevention. “Yet currently only about one in five people at risk for HIV have access to prevention information and services.”

Determined to improve the odds for Nigerians, representatives from the Nigerian government, APIN, and other key organizations took advantage of the conference to devise new strategies. There they met with representatives from the U.S. National Institutes of Health to discuss a program that focuses on collaborative capacity building for devel-

oping world scientists and a plan to develop a center of excellence for HIV/AIDS in Africa. More than 60 Nigerians attended the meeting, including representatives from government agencies, universities, nongovernmental organizations, and donor agencies, as well as people with AIDS.

During the meeting, APIN Director Phyllis Kanki described the Initiative’s training programs, workshops, and collaborations. “This conference,” she said, “has helped us rededicate ourselves to our goal: curbing the growth of the HIV epidemic in Nigeria through scientifically sound prevention efforts and capacity building for Nigerian institutions.” ■

**ABOVE:** A nurse discusses drug regimens with a patient in an HIV clinic in the southern city of Sagamu, Nigeria. The patient—who has been taking antiretrovirals donated by U.S. citizens with AIDS who have either abandoned or grown resistant to their drug regimens—is one of 50 Nigerians benefiting from the drug exchange program. Nigeria launched a national antiretroviral program last year.

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and support for these children. We cannot stand by and watch while they suffer.

Many people suffering from

AIDS are not killed by the disease itself, but by the stigma surrounding the disease. That is why we must do everything in our power to fight and to win the struggle against this stigmatization.

In Africa, we have a concept known as *ubuntu*, based on the recognition that we are only people because of other people. We are all human, and the HIV epidemic affects us all. If we discard the people who are dying from AIDS, then we can no longer call ourselves people. The time to act is now. ■

## APIN ISSUES CD

APIN recently produced its first CD-rom, which highlights various presentations from the Joint Workshop on Antiretroviral Therapy and STD Management, held in Dakar, Senegal, in March. The CD, which also provides summary reports and sample treatment and informed consent forms, will be distributed to principal investigators at national antiretroviral sites throughout Nigeria.

The CD was dedicated to Dr. Olufola Soretire, a workshop participant from the National AIDS/STD Control Program at the Federal Ministry of Health who was killed in a car accident this past spring. ■

## Running the Numbers

**A** SMALL NONGOVERNMENTAL ORGANIZATION in Lagos faces a dilemma: should it allocate its limited funding to education for commercial sex workers or their clients? To HIV prevention messages on billboards or in radio broadcasts? To outreach efforts at youth rallies or in schools?

Combining cost data with measures of effectiveness can provide critical information about the value of a particular HIV intervention. In May, APIN hosted “Cost-Effectiveness of HIV/AIDS Programs in Nigeria,” a workshop aimed at strengthening the country’s capacity to conduct cost-effectiveness analyses of HIV prevention programs. Held in Abuja, the weeklong, intensive workshop provided participants with economic evaluation skills through lectures, discussions, and analytic exercises. One in-depth exercise, for example, required participants to calculate the cost per case of HIV infection averted for three options: a condom social marketing campaign, a peer education program for sex workers, and no intervention at all.

Workshop participants learned the theoretical foundations of opportunity costs, current and potential uses of cost-effectiveness analyses,

analytic techniques, and basic steps in implementation. Workshop leaders explained the importance of distinguishing between effectiveness and cost-effectiveness and the role of the latter in aiding rational resource allocation. They also compared the cost-effectiveness of targeted and non-targeted interventions.

The nearly 30 Nigerian participants included health economists, demographers, AIDS outreach workers, and representatives from the National Action Committee on AIDS, the Ministry of Health, the Ministry of Finance, the Ministry of Education, the Nigerian Institute of Social and Economic Research, the Nigerian Institute of Medical Research, and state action committees on AIDS.

Encouraged by the participants’ enthusiastic feedback, the organizers—led by the Center for International Development at Harvard’s Kennedy School of Government—proposed the creation of a small group of health economists who could undertake more intensive training. The organizers noted that these experts could carry out cost-effectiveness analyses of HIV interventions in Nigeria, then share the results with policy makers at federal and state levels to help guide resource allocation. ■

## Outreach



**THE POWER OF EMPOWERMENT:** Mr. Ifeanyi Okekearu, a project officer with Women’s Health Education and Development (WHED), visits a project site in Abuja’s Apo Village. There WHED workers not only educate commercial sex workers and their clients about HIV, but they also provide the women with vocational training.



Artwork from the cover of *AIDS in Africa*

## Safety in Numbers

**D**ATA BECOMES INFORMATION THROUGH analysis, but even the most careful and sophisticated analysis cannot transform poor-quality data into something useful and meaningful. APIN recently held a workshop on data management at the Harvard School of Public Health in Boston to help its principal investigators ensure high-quality data administration for their projects.

Dr. Geoffrey Eisen, a data manager in Professor Phyllis Kanki's laboratory at the Harvard School of Public Health, opened the workshop with a three-day intensive presentation on the basics of data management in the context of public health projects.

Several Harvard faculty members and researchers then presented details about the experiences of other African nations in data management.

Dr. Richard Marlink, executive director of the Harvard AIDS Institute, reviewed Botswana's national antiretroviral program. Dr. Mame Awa Touré, a researcher in Professor Kanki's laboratory, described the HIV treatment and control program at Fann Hospital in Senegal. Professor George Seage, a co-principal investigator for the Harvard HIV Vaccine Trial Site in Botswana, discussed the preparation of vaccine trials in Botswana and their relevance to Nigeria. And Dr. Saidi Kapiga, an assistant professor of reproductive health at the Harvard School of Public Health, introduced the Harvard-Tanzania Collaborative Research Program and highlighted its studies on family planning, perinatal outcomes, and reproductive health.

Dr. Job Ailuogwemhe, an APIN fellow working in Professor Kanki's laboratory, then presented a study on Capillus and Genie II rapid tests under field conditions. The aim of this study, he said, was to determine whether the sensitivity and specificity of the two tests would be compromised if test kits were mishandled or samples obtained in the field or in remote settings were inadequately stored.

Dr. Iyabo Obasanjo-Bello and Mr. Hank Head

from TherapyEdge, Inc. demonstrated their company's AIDS treatment data management software, which uses an advanced artificial intelligence engine to provide clinicians with customized decision support. This technology makes millions of calculations each second, rapidly analyzing patient data to sort, categorize, and rank customized antiretroviral therapy options. The artificial intelligence engine

uses information gleaned from the patient's history to provide specific therapy options based on the anticipated efficacy for that particular individual.

After attending the sessions, workshop participants visited the Children's Hospital AIDS Program, where they received an overview of current clinical trials in pediatric and perinatal HIV. They also toured the HIV clinic at Massachusetts General Hospital.

The participants included APIN's principal investigators as well as physicians, virologists, and institution directors from its current target states—Lagos, Plateau, and Oyo. "This workshop will help improve the quality, integrity, and security of our data," one participant noted. "Data referral and analysis will also improve significantly." ■



**A MODEL CLINIC:** Dr. Philip Norris, an immunologist at Massachusetts General Hospital, gave workshop participants a brief tour and overview of the hospital's HIV clinic, which provides comprehensive primary care.

## AIDS IN AFRICA

The second edition of *AIDS in Africa* was recently published, with APIN Director Phyllis Kanki serving as an editor along with Professor Max Essex, Professor Souleymane Mboup, Dr. Richard Marlink, and Professor Sheila Tlou.

This comprehensive book addresses the unique challenges that many African nations face in tackling the HIV epidemic. While the book considers the constraints of limited resource settings, it also explores the success of many African nations in increasing their capacity to respond to the epidemic.

"I am especially heartened," U.N. Secretary-General Kofi Annan wrote in the book's foreword, "that so many of its chapters are written by Africans—for the solutions to this crisis must come primarily from Africa itself, with support from the wider international community."

The editors have raised funds to allow distribution of a limited number of complimentary copies of the book to AIDS organizations, hospitals, and libraries in Africa. For more information, contact Molly Holme at [mholme@hsph.harvard.edu](mailto:mholme@hsph.harvard.edu). ■

# The Journey Home

**A** PIN'S FELLOWSHIP PROGRAM—WHICH SEEKS TO HELP build Nigeria's epidemiologic and laboratory capacities—had good reason to celebrate this June, when two Nigerian doctors became its first trainees to graduate from the Harvard School of Public Health in Boston.

Drs. Anuoluwapo Falusi and Olumuyiwa Aina, who earned master of public health degrees from the Department of Population and International Health, have committed to a second fellowship year in Nigeria, where they are participating in APIN projects. The APIN Advisory Council has encouraged fellows to become actively involved in AIDS projects upon their return to Nigeria.

"The fellows' field experience will certainly yield fruit for them, as they can now apply what they have learned as well as develop new skills," says Dr. Oluwale Odutolu, APIN's project manager in Ibadan. "At the end of their internships, they will be wonderfully poised to develop successful HIV projects."

Dr. Falusi is now working under the supervision of Dr. Atiene Solomon Sagay at Jos University Teaching Hospital, where she is assisting in projects related to the prevention of mother-to-child transmission of HIV, sexually transmitted diseases, data collection, and HIV/AIDS research.

Dr. Aina is working at University College Hospital in Ibadan, under the supervision of Professor David Olaleye. He is particularly interested in pursuing the areas of HIV surveillance, diagnosis, and treatment.

"It has been both a thrill and a challenge to see how the principles I learned in class actually work out here in the field," Dr. Aina says. "While I sure miss the astonishingly smart people at Harvard, it's a relief to be back home and actually doing some-

thing about the HIV epidemic, rather than just sitting in a classroom learning about how much worse the situation is getting every second!"

Three APIN fellows remain at the Harvard School of Public Health—Dr. Job Ailuogwemhe, a postdoctoral fellow in Professor Phyllis Kanki's laboratory; Dr. Clifford Odimegwu, a Takemi Fellow in the Department of Population and International Health; and Dr. Akinyemi Ojesina, a doctoral candidate in the Program in Biological Sciences in Public Health. In September, they will be joined by two new APIN fellows. Dr. Mary Ebunlomo Walker will become a Takemi Fellow in the Department of Population and International Health, while Dr. Ogugua Ndili will embark on a doctoral program in the Department of Epidemiology. ■



**MAKING A CONTRIBUTION:** Dr. Anuoluwapo Falusi (center) meets with women waiting to receive pretest counseling at an antenatal clinic at Jos University Teaching Hospital.

OLUWALE ODUTOLU

## **NIGERIA AIDS** Outlook

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### AIDS PREVENTION INITIATIVE IN NIGERIA

Harvard School of Public Health  
651 Huntington Avenue  
Boston, MA 02115, USA  
Telephone: 617-432-3297  
Fax: 617-432-3298  
Email: [apin@hsph.harvard.edu](mailto:apin@hsph.harvard.edu)  
Web: [www.apin.harvard.edu](http://www.apin.harvard.edu)



### Nigeria Office:

c/o IITA HQ  
ELO Building 35/38  
P.M.B. 5320, Oyo Road  
Ibadan, Nigeria  
Telephone: 234-2-2412626 x2359  
Fax: 234-2-2412221  
Email: [apin@cgiar.org](mailto:apin@cgiar.org)