



## AVERTING AN EPIDEMIC IN PAKISTAN

# HIV/AIDS Prevention and Care for Most At-risk Populations



Although the overall national prevalence of HIV/AIDS is not high in Pakistan, the number of reported HIV infections and AIDS cases has steadily risen since 1987. Pakistan is considered a high-risk country for an HIV/AIDS epidemic because of several risk factors, including limited safety of blood transfusions, a large mobile population, low levels of awareness among health workers, the presence of injecting drug users, and a commercial sex industry. Controlling the magnitude and pace of HIV transmission depends on Pakistan’s ability to scale-up access to comprehensive prevention interventions for the most at-risk populations (MARPs), as well as care, support, and treatment services for those already infected.

Funded by the U.S. Agency for International Development (USAID), and led by RTI International, the 3-year Pakistan HIV/AIDS Prevention and Care Project (PHAPCP) operates in major urban areas and high-risk cities—such as Islamabad, Karachi, Lahore, Larkana, Multan, and Rawalpindi—and will be expanded to Peshawar and Turbat in 2007. While HIV prevalence rates vary at subregional levels across at-risk groups—such as men who have sex with men (MSM), female sex workers, and intravenous drug users—similar behaviors among these groups places them

at risk for HIV and other sexually transmitted infections. This suggests that it may be only a matter of time before HIV prevalence markedly increases. Given these findings, the project will work as part of a larger effort in Pakistan to contain the spread of the virus before it becomes rooted in the general population.

### Expansion of HIV/AIDS Prevention, Care, and Support Activities

PHAPCP supports the expansion of HIV/AIDS prevention and care activities and capacity building in Pakistan, building on the work previously conducted under USAID’s Implementing AIDS Prevention and Control Activities (IMPACT) Project—managed by RTI’s partner Family Health International. RTI leads overall program management for PHAPCP and provides technical assistance in monitoring and evaluation for the project and its partnering nongovernmental organizations (NGOs). PHAPCP is strengthening NGOs’ capacity to encourage behavior changes and reduce HIV risk and transmission among MARPs, including high-risk youth, in addition to strengthening support to people living with HIV/AIDS (PLWHA). A primary objective of the project is to increase the involvement of NGOs and other institutions in the provision of targeted HIV-prevention interventions that can be replicated and scaled-up. The project provides grants to local NGOs for implementing targeted interventions while building their technical, managerial, and financial capacities. Project outreach, peer education, early diagnosis and management of sexually transmitted infections, and other prevention activities use the “ABC” approach

- Abstinence until marriage
- Be faithful in marriage and monogamous relationships
- Correct and consistent use of Condoms for those who practice high-risk behaviors



*Project physician plays a pivotal role while meeting with community people for improved treatment seeking behavior at Pir Wadhai, Rawalpindi.*  
 [PHOTO: Courtesy of Organization for Social Development]

(continued)

Three grantees were originally chosen to implement targeted HIV-prevention interventions—ASEER Foundation in Multan, Mehran Welfare Trust in Larkana, and Organization for Social Development in Rawalpindi. Their interventions focus on creating awareness, educating about risk factors and ways to prevent infection, and producing and introducing behavior-change strategies and interventions to reduce risk. A fourth, the New Light AIDS Control Society in Lahore, Multan, and Karachi, was chosen to focus on care and support for PLWHA.

In early 2007, PHAPCP selected three additional NGOs to expand project services—Shah Abdul Latif Bhitai Welfare Society (SALBWS) in Karachi, Support Agency for Rural and Human Association's Development (SARHAD) in Peshawar, and Anjuman Falah-o-Behood HIV/AIDS Council (AFAC) in Turbat. SALBWS and SARHAD will conduct HIV prevention interventions while AFAC will focus on care and support services for PLWHA.

The project also works toward strengthening the National AIDS Control Program (NACP) and Provincial AIDS Control Programs' (PACPs') capacity for implementing quality HIV/AIDS programming by provision of technical trainings on HIV prevention, care, and support, as well as organizational and financial management. Training sessions include workshops on targeted interventions, strategic behavioral communication, and community- and home-based care (CHBC). The project further assists in NACP capacity building through its ongoing involvement in NACP-sponsored participatory policy, planning, and programming activities.

Strengthening the care and support activities for PLWHA is being accomplished by building the technical and organizational capacity of PLWHA support and community organizations and by assisting in the development of networks. PHAPCP is working with New Light AIDS Control Society and other partners to develop a continuum of care (CoC) model for PLWHA that focuses on linking existing care and support services within a geographic area. These networks will eventually be able to provide a full or nearly-full range of services for PLWHA while improving the access to and quality of selected services through targeted capacity building and coordination with other Government of Pakistan (GoP), donor, NGO, and private-sector efforts.

Under the CoC model, PHAPCP will work with New Light AIDS Control Society, local support groups, GoP clinical services, and other agencies to ensure the PLWHA's full range of needs is met by establishing and strengthening referral systems with voluntary counseling and testing services for family members and with GoP hospitals for antiretroviral treatment and other clinical services as appropriate. They will also develop and implement strategies for linking potential HIV-positive individuals with needed educational, nutritional, and economic-livelihood resources available from other national and international agencies.



*Project outreach worker explaining stages of HIV and AIDS to his peers (MSMs) in the field while using peer education tool kit. [PHOTO: Courtesy of Organization for Social Development]*

To improve service provision and access, starting in 2007, the project will support the development of a CHBC manual to guide CHBC service provision and capacity building for NGOs and other organizations working in care and support. The project also focuses on increasing network opportunities and supporting regular meetings of PLWHA groups, and will provide ongoing mentoring in organizational development and conduct site visits for learning and sharing experiences. The project will develop processes for linking the networks with other stakeholders, including the NACP, international PLWHA groups, and donor agencies. Enhancing PLWHA organizational involvement in prevention and care programming will help advance stigma and discrimination reduction efforts across the country.

### Looking Ahead

Strengthening capacity and systems for results tracking and reporting is an area of focus for RTI. An evaluation survey to be conducted in 2007 will help identify effective interventions for national scale-up, and update findings from a 2005 baseline survey of reproductive tract and sexually transmitted infections to help determine the impact and effectiveness of prevention activities. There are also plans to integrate the provision of voluntary counseling and testing, using rapid HIV testing, with four of the grantees supported by PHAPCP.

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