

RESEARCH AND TECHNICAL SUPPORT AT RTI INTERNATIONAL

HIV Program Support and Infrastructure



Government and private-sector clients in the U.S. and around the world rely on RTI for independent, objective, and scientifically rigorous research and technical services in support of HIV programs.

RTI helps governments, NGOs, and communities implement and scale up programs, making the best use of recent increases in funding for the global fight against AIDS. Our technical support helps close gaps in capacity and overcome obstacles that impede the expansion of prevention, treatment, and care programs.

Program Support Expertise

- Technical and management support services
- Epidemiological and surveillance research
- Cost-effectiveness studies and economic analyses
- Data capture, coordination, and management
- Statistical analysis
- Operations research
- Monitoring and evaluation
- Policy support and advocacy

Key Project Highlights

RTI researchers and technical experts support the design, implementation, and evaluation of programs to slow the spread of HIV. With decades of experience in the field, we understand how to launch, scale up, and sustain successful programs.

Evaluating Changes to the Ryan White Program for HIV Care in the United States

On behalf of the Human Resources and Services Administration (HRSA), RTI evaluated the effects of funding policy changes in the 2006 reauthorization of the Ryan White HIV/AIDS Program. RTI conducted case studies of eight grantees to capture the impacts of funding shifts. Bureaucratic infrastructure and program management practices provided stability amid both losses and gains, offered structure for grantees' decision-making, and served as a "storehouse" for collective norms and values that informed grantees' allocation of funds. Grantees strategized to buffer providers by absorbing cuts at the administrative levels, leveraging external funds, and creatively managing funds (e.g., learning "to do more with less").

A Product Value Assessment Dossier for an HIV/AIDS Drug Product

RTI Health Solutions (RTI-HS), a business unit of RTI, developed a product value assessment dossier that summarized the evidence demonstrating the value of a new drug for the management of HIV and AIDS. The dossier included a series of value messages about the current burden of disease, including epidemiology, symptoms, quality of life, side effects of current treatments, costs, and unmet therapeutic needs. RTI-HS worked with the client to formulate the product value story, identify and summarize



supportive information from data provided by the company and from the published literature, and write the product value assessment. The dossier was distributed to company affiliates worldwide and currently serves as a tool for basing company communications, pricing and reimbursement negotiations, and technical document submissions.

Using Audio Computer-Assisted Self-Interviewing (ACASI) in Longitudinal Studies

RTI conducted a randomized controlled trial of the use of ACASI in a longitudinal study of U.S. HIV risk behavior and infection. Our survey of more than 1,900 gay men and 900 injecting drug users indicated that participants who used ACASI were significantly more likely to report engaging in risky behaviors than those interviewed in person. These results, along with participants' reports that ACASI elicited more honest responses, indicate that the RTI-developed technology can enhance the quality of behavioral assessment and provide an acceptable method for collecting self-reports of HIV risk behavior in longitudinal studies and clinical trials.

International Epidemiologic Databases to Evaluate AIDS (IeDEA)

RTI leads the IeDEA-Central Africa project, a multi-site research initiative funded by the U.S. National Institute of Allergy and Infectious Diseases (NIAID) to gather and harmonize HIV/AIDS data, particularly on the use of antiretroviral (ARV) therapy. These data are used to define the HIV epidemic in Central Africa and answer priority research questions. RTI collaborates with treatment centers in Burundi, Cameroon, Democratic Republic of Congo, and Rwanda, representing approximately 18,000 patients on ARV. IeDEA builds local research capacity by developing administrative and technical infrastructure and training in-country staff to collect, electronically manage, and analyze HIV/AIDS data.

Data Coordination for Male Circumcision Trial in Kenya

RTI serves as the data coordinating center for a randomized controlled trial of male circumcision to reduce HIV incidence in Kisumu, Kenya, collaborating with investigators from the University of Illinois at Chicago, the University of Manitoba, and the University of Nairobi. Under this trial—funded by NIAID and the Canadian Institutes of Health Research—2,784 HIV-negative men aged 18-24 years were randomly assigned to immediate circumcision or circumcision delayed by at least 24 months from enrollment. We provided guidance on statistical methods, data analysis and

reporting, data management, and support of data entry and management systems at the clinical site. The trial was stopped in 2006 after an interim review found male circumcision to be safe and effective in reducing the risk of HIV acquisition. All men are now offered circumcision at the study clinic. Through continued followup, participants are monitored for changes in sexual behavior and tested for HIV and other STIs.

Estimating the Cost-Effectiveness of a New Protease Inhibitor

On behalf of a pharmaceutical client, RTI-HS studied the cost-effectiveness of a novel protease inhibitor for treatment-experienced adults with HIV infection. We developed a Markov model to track the movement of this cohort through six health states based on CD4 cell count. Using data from clinical trials and published literature, RTI-HS calculated the incremental total cost of care per quality-adjusted life-year gained, ultimately determining the new drug to be cost-effective compared to currently available protease inhibitors.

Supporting Policy Development and Planning in Malawi

Funded by the U.S. Agency for International Development, RTI helped the government of Malawi and local NGOs strengthen the country's response to HIV/AIDS under the POLICY I and II projects. We provided technical assistance to the Malawi National AIDS Control Program (NACP) in strategic planning, policy analysis, training, facilitation, and communications and helped NACP produce a national strategy for combating HIV/AIDS. We then helped NACP design its approach to helping the country's 27 districts apply the strategy and develop implementation plans. Starting in 2000, RTI worked with NACP to design and carry out a multi-sectoral process that produced the country's first comprehensive, progressive national HIV/AIDS policy. Officially launched in early 2004, the policy has been widely supported and implemented throughout the country.

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