

Where in the world is RTI



INTERNATIONAL DEVELOPMENT

BIMONTHLY APRIL/MAY 2008

Starting Up

Communities Tackle Salvadoran Gang Problem

Criminal gangs have attracted thousands of young Salvadorans with poor economic prospects, and their ranks continue to grow, posing new threats to community stability.



Alberto José Linares Barrera (left) and Leticia del Carmen Hernandez Acevedo were the masters of ceremony for an after-school crime prevention project launch conducted by Junior Achievement. [Photo: Dalia de Flores, Junior Achievement]

To overcome the human and economic losses of gang-based crime and violence, RTI International will implement the U.S. Agency for International Development (USAID) Crime and Violence Prevention Project (CVPP).

“Currently the national government does crime prevention through a top-down approach, and rarely includes local governments and the private sector,” said CVPP Chief of Party Aldo Miranda. Building on 10 years of local government programs in El Salvador, RTI will use its proven Participatory Strategic Planning approach to facilitate involvement of private sector and local entities in CVPP.

Over the two-year project, RTI and the Canada-based Centre for International Studies and Cooperation (CECI) will build the capacity of Salvadoran governments and civil society to track and analyze patterns of crime and violence, then design, implement, and monitor prevention initiatives, such as vocational training for youth, after-school programs, domestic violence counseling through schools and churches, and recuperation of public spaces.

continued on page 3

Energizing Ugandans to Lift Their Democracy

Mechanisms for political participation are coming to life in Uganda. Despite the disruption of conflict in the northern region and neighboring states, the country has put in place the framework for a decentralized, multiparty system.

In this context, RTI International is helping to connect Ugandan policy makers and citizens. For this effort, RTI is a subcontractor to the State University of New York Center for International Development (SUNY/CID) on the U.S. Agency for International Development (USAID)/Strengthening Democratic Linkages in Uganda (LINKAGES) activity.

Between 2007 and 2010, RTI and SUNY/CID aim to link up good-governance champions at every level of Ugandan society to (1) promote public participation in the political process, (2) strengthen institutional transparency and accountability, and (3) improve delivery of public services.

“We are trying to improve transparency and accountability, which is likely to improve the delivery of services in health, education, and other areas,” said Tom Kyakwise, LINKAGES Local Government Team Leader.

At the top of the country’s decentralized framework, SUNY/CID will assist the Parliament to hear and respond to citizen and civil society demands for national policy reform. At

continued on page 4



LINKAGES organized dialogues to bring together the various stakeholders in each district. Participants in Mubende discussed the importance of each actor in a decentralized system of governance. [Photo: Dan Gerber]

The Big IeDEA: Gathering HIV/AIDS Data to Answer New Questions

As implied by the project's acronym, the International Epidemiological Databases to Evaluate AIDS (IeDEA) is a large, innovative, and unique project funded by the U.S. National Institute of Allergy and Infectious Diseases. Covering nine world regions, all but Northern Africa, Western Europe, and China, IeDEA aims to gather and harmonize HIV/AIDS data, particularly on the use of highly active antiretroviral therapy (ARV), to answer priority questions about HIV/AIDS. Large sample sizes and standardized data compiled into a central database will allow IeDEA partners to address new research questions, generalize more study results thanks to data from multiple settings and populations, and more accurately monitor the HIV epidemic in the various regions, as well as globally.

RTI was chosen in 2006 to lead the Central Africa (CA) regional data center for IeDEA and to be the Coordinating Center responsible for logistical components and communication for all cross-regional collaborations. The Central Africa consortium currently consists of RTI plus 13 research units—hospitals, clinics, or similar facilities—in Burundi, Cameroon, the Democratic Republic of the Congo (DRC), and Rwanda. It includes both adult and pediatric facilities. The consortium chose the clinics in collaboration with HIV experts in each country based on their ability to meet the project's data collection needs. They represent



Dr. Wilfred Akam, director of the Limbé Provincial Hospital in Cameroon, gives IeDEA—Central Africa staff a tour of the facility. [Photo: Jennifer Hemingway-Foday]

approximately 20,200 patients currently on ARVs and an additional 46,000 HIV-infected individuals. As patient care data are collected from the care facilities, they are stored via the IeDEA—Central Africa website, as well as at RTI in North Carolina, and will be integrated into the global data. The DRC's Kinshasa School of Public Health, which also partners

with RTI on the Global Network for Women's and Children's Health Research project funded by the U.S. National Institute of Child Health and Human Development, provides significant administrative support for IeDEA.

Getting Started

Much of the initial work under the project has been spent developing clinical data collection forms; creating systems, structures, and processes in the project facilities; and training clinic nurses and doctors to collect and enter the data into an electronic database. Central Africa is well behind the other IeDEA project regions, including others in Africa, with regard to existing infrastructure and electronic databases. For instance, Burundi had never before received funding from the United States government to do research, so it did not have an Institutional Review Board (IRB—an independent ethics committee) in place as is required by U.S. National Institutes of Health grants. Principal Investigator Tyler Hartwell said, "Before RTI could begin to gather data, we had to provide information on what IRBs were, why they were needed, and how they operated." RTI set up a mentoring relationship between Burundi and the DRC. An IRB at the Kinshasa School of Public Health will assist with Burundi's process, such as registering with the United States Office of Human Research, getting the right membership, and setting up ethics training courses for their investigators. Hartwell added, "Now Burundi will be better able to apply for U.S. funding for activities in health and in other sectors. Previously, they didn't have the capacity or the systems to meet the strict reporting requirements of programs such as the President's Emergency Plan for AIDS Relief."

Research questions identified by IeDEA—Central Africa

- Determining the most appropriate models of care
- Identifying cultural factors that affect drug adherence
- Identifying factors of co-morbidity between malaria and HIV in malaria-endemic zones
- Examining the role of nutrition and treatment in children: when to begin ARV treatment in children who are malnourished; how malnutrition affects the rate of mortality in children; what food is available for children and mothers with HIV; how to counsel HIV-infected mothers to feed their children when weaning
- Assessing the impact of traditional medicine on antiretroviral treatment and ways to capitalize on this interaction

continued on page 3

IeDEA (continued)

Project implementation has progressed more quickly in the DRC, due to higher capacity and existing systems, with data collection beginning at three adult clinics in February 2007. Rwanda joined in late 2008 and hosted the IeDEA–Central Africa Executive Committee Meeting in Kigali in January 2008, where the focus was on finalizing its data collection forms. After IRB clearance, RTI hopes to start gathering data there in mid-2008.



Two nurses in the Democratic Republic of the Congo place identification labels on the project's data collection. [Photo: Robin Ryder]

Going Beyond Data

In addition to establishing systems and processes for gathering data, RTI is developing AIDS-related cancer research activities, including a surveillance system in Cameroon and an improved cervical cancer screening test in Rwanda. Certain types of cancer, such as Kaposi's sarcoma and lymphoma, are more commonly seen in people with HIV/AIDS and often patients are diagnosed and treated for only one of these diseases—HIV/AIDS or cancer. RTI is working with Cameroon's Solidarity Chemotherapy Association to develop the surveillance system, which will capture nearly all incident cases of cancer diagnosed in 12 consecutive months in individuals officially residing in the urban area of Yaoundé, approximately 4.5 million people. This will greatly improve the ability of medical staff to watch for different types of cancer and additionally to link those patients to HIV/AIDS testing and treatment services.

Development of a standardized site assessment tool for determining the quantity and quality of available data on AIDS-related cancers is also planned.

Ensuring the Sustainability of IeDEA

Health facility administrators and physicians have embraced the introduction of the IeDEA–Central Africa research data collection forms and data management system, as they have

improved the quality and completeness of patient data in project facilities. The DRC and Burundi sites have adopted the data collection form as their standard clinical medical record and the research units in Cameroon are evaluating whether to do this at their sites.

The IeDEA project team was drawn from existing staff at the facilities, so capacity is being built locally to do the work. As Project Manager Jennifer Hemingway-Foday said, "IeDEA has developed a proactive mechanism for collecting information on key variables, and it will enhance the quality, cost, effectiveness, and speed of HIV/AIDS research in the region and worldwide. It is important that the systems it creates are accepted and embedded into the hospitals and clinics in which we are working, so that the data collection can continue long after this project."

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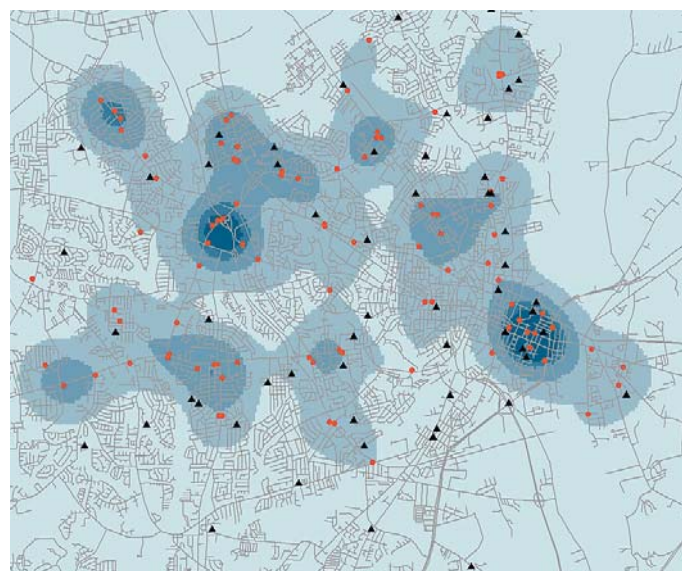
IeDEA website: <http://www.iedea-hiv.org/>

El Salvador (continued)

The project will work with 10 communities in three of El Salvador's most violent municipalities and then disseminate their best practices throughout the country and region.

An early focus of CVPP will be to understand the patterns of local crime by training municipalities to use geographical information systems (GIS) crime mapping. These data will inform the planning of prevention programs by community youth groups, parents, teachers, officials, and civilian police. The project will help finance the activities through a small grants program.

continued on page 4



RTI will support Salvadoran municipalities in geographical information systems (GIS) mapping of crime hot-spots to see the patterns of local crime and violence, like this map showing robbery incidents (orange dots) in and around public housing (black triangles). [Map: Bill Wheaton]

El Salvador (continued)

At the same time, CVPP will work with the National Council for Public Safety and the Ministry of Public Security and Justice to develop a national crime prevention policy that emphasizes sharing data across institutions to track the evolution of crime and violence in El Salvador.

CVPP encourages the private sector to finance prevention programs, building on RTI's experience with Shell Oil to forge these alliances. Shell Oil has independently awarded RTI a contract to monitor and evaluate an after-school crime prevention program conducted by Junior Achievement of El Salvador. The program is helping nearly 3,000 youth in San Salvador avoid the allure of gang activity by teaching them entrepreneurship to generate their own incomes.

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Young entrepreneurs of the Junior Achievement after-school crime prevention program sell snacks and drinks as an alternative source of income and pride to joining gangs. [Photo: Dalia de Flores, Junior Achievement]

Where in the World Is RTI is a bimonthly publication of RTI's International Development Group (IDG). This publication is intended to inform clients and partner organizations about RTI's global activities and research areas. RTI is dedicated to improving the human condition in developing and emerging countries. RTI has worked for over 40 years in 140 countries around the world. We offer a broad range of policy support, applied research and analysis, and other technical expertise in strategic planning, institutional development, and training. Our expertise is multisectoral and spans the fields of education, health, environment and natural resources, governance, finance, and information and communication technology.

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Uganda (continued)

the base, RTI will strengthen the public's ability to voice their needs and priorities, support local governments in responding with reforms, and assist civil society organizations (CSOs) to exercise their oversight function.

LINKAGES is working in 10 districts throughout Uganda—Arua, Amolatar, Hoima, Katakwi, Kisoro, Kitgum, Mubende, Mukono, Pader, and Sironko—and five subcounties per district. The districts and subcounties were selected based on their political diversity, geographic distribution, and performance according to a nationwide local governance assessment.

As an entry point, the LINKAGES team

facilitated dialogues in each target district, bringing together local councilors, CSO representatives, and civil servants. The dialogues revealed the need for further training on operating in a multiparty system, citizen participation in budgeting and planning, and greater technical knowledge on the part of CSOs, among other areas.

In consultation with target districts and subcounties, RTI is developing technical assistance and training interventions tailored to the needs of selected local governments and civil society groups. LINKAGES will work with and through Ugandan firms to carry out these interventions to build local capacity and promote sustainability.

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Nakityo Betty, the Town Clerk of Mubende Town Council, presenting to group members during the LINKAGES dialogue held on November 16, 2007. [Photo: Dan Gerber]

Selected Publications

Healey, F. Henry. (2008). "Of Square Pegs and Round Holes: Training in Developing Countries." *Journal of Education for International Development*, Vol. 3, Issue 2, January. <http://www.equip123.net/jeid/articles/6/Healy.pdf>

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Kim, Dohyeong, Do G. Canh, **Christine Poulos**, et al. (2008). "Private Demand for Cholera Vaccines in Hue, Vietnam." *Value in Health*, Vol. 11, No. 1, pp. 119–128.