

Northwestern University hosts HIV/AIDS Experts Forum



On June 10, 2003, a group of leading experts in the global HIV/AIDS campaign participated in a day-long forum that included presentations by Northwestern faculty and students. The forum was chaired by President Henry Bienen and coordinated by Dr. Richard Joseph, director of the Program of African Studies (PAS). Seventy members of the Northwestern community and greater Chicago area assembled to discuss the creation of a major cross-campus initiative to confront the crisis. The first panel featured presentations by five visiting specialists that detailed the complexity and severity of the AIDS epidemic and its impact in Africa. During the second panel, four senior Northwestern faculty described their involvement in AIDS research and programs. Dr. Michael Merson, director of Yale University's Center for Interdisciplinary Research on AIDS (CIRA), delivered the lunchtime keynote address. In the afternoon session, several Northwestern students offered descriptions of their work on AIDS in Africa. The forum concluded with a brainstorming session on the next steps in crafting a multi-disciplinary Northwestern HIV/AIDS program.

Photo upper left: Northwestern President Henry Bienen delivered the welcoming address.

Panel One: The Global Campaign Against AIDS: Challenges, Progress, and the Road Ahead



From left to right: Dr. Richard Joseph, Dr. Steve Morrison, Dr. Janet Fleischman, Dr. Ekie Kikule, Dr. Peter Lamptey, and Dr. Phil Nieburg

Peter Lamptey, President, Institute for HIV/AIDS of Family Health International

Dr. Lamptey presented a comprehensive overview of the epidemic and its continued spread in Africa. He identified five response areas that each require significant expansion: political and financial commitment, prevention, care and treatment, impact mitigation, and capacity and health infrastructure. In each of these areas, current and projected levels of funding lag behind global needs. For example, in sub-Saharan Africa, only one percent of the 4.1 million that urgently need anti-retroviral (ARV) treatment receive the drugs. While financial and political commitments have increased (including the Bush Plan for Emergency AIDS Relief), and ARV prices are falling, the projected course of the epidemic and its devastating impact require action on an even greater scale. Family Health International is currently scaling up voluntary counseling and testing in 22 countries and conducting mother to child transmission (MTCT) programs in 12 countries.

Phil Nieburg, Associate Director for Public Health Practice, National Center for HIV, STD and TB Prevention, Centers for Disease Control and Prevention

Dr. Nieburg described HIV/AIDS as a uniquely difficult and complex health crisis: the virus is ultimately fatal, currently incurable, has a long incubation, is infectious through sexual activity, harmful to the productive age group, and mutates rapidly. To add to the challenge, HIV/AIDS is a disease that “finds the fault lines of our society” and is assuming endogenous characteristics in different countries. Response efforts require action in sensitive and often controversial areas such as sex and gender relations, prostitution, drugs, homosexuality, poverty and wealth, death, stigma, and other ethical and social concerns. Dr. Nieburg is concluding his work with the CDC Global AIDS Program that seeks to help resource-constrained countries reduce infection rates, improve care and treatment, support individuals living with HIV, and build capacity and infrastructure. Based on this experience, he emphasized the necessity -- and the difficulty -- of simultaneously pursuing prevention, care and treatment agendas. Obstacles to this work include: assumptions about prevention and the preventative effects of ARVs; the sustainability of current interest in the issue; and the sometimes divergent agendas of public policy and humanitarian actors. In closing, Dr. Nieburg confirmed the need to mobilize the diverse skills and knowledge of universities and urged Northwestern to assume a greater role in the global campaign.

Ekie Kikule, Chief Executive Officer, Hospice Uganda

In Uganda, 49% of the population has access to medical facilities and there is a 1:18,750 doctor to patient ratio (compared to 1:400 in US). While infection rates have fallen from 30% to 5%, two million orphans and one million persons living with AIDS represent a need for care that cannot be met by currently available resources. Less than 10% of those who need ARVs can afford them. Treatment now costs \$39 per month, a figure that still overwhelms the government’s annual health spending of \$12 per person. Given these conditions, palliative care is a humane and affordable option. It mitigates the socioeconomic effects of illness, supports the care-givers, controls pain, and provides counseling. In 1993, Hospice Africa was founded to provide palliative care in resource-scarce settings. Costs run at \$11 per week to care for one patient, most of which is covered by grants from external donors. Training of health and non-health care professionals is central to the work of Hospice Africa which currently conducts distance-learning in six countries. If provided additional resources, this cost-effective and valuable work could be expanded and replicated in other highly-affected environments.

Janet Fleischman, Chair, Working Group on Women and Girls, Center for Strategic and International Studies HIV/AIDS Task Force; Washington Director for Africa, Human Rights Watch

Dr. Fleischman detailed the ravaging effect of HIV/AIDS on women and girls. Women are at special risk because of financial, physical and cultural vulnerabilities, and limited access to education, credit, property, health care, and legal protection. Africa is home to 80% of the world’s 13 to 15 million orphans, and the number of orphans, vulnerable children, and child-headed households continues to grow. AIDS is responsible for pushing girls out of school which lowers their future prospects and limits access to preventative education. Dr. Fleischman provided several recommendations. The statistics regarding the effect of AIDS on women and girls call out for more research and data to direct future policy interventions. Ideological differences should not be allowed to unduly skew decision-making or delay action. We must galvanize research universities to fill the gaps of knowledge and research. Potential areas of analysis include: the intersection of AIDS, gender, and education; AIDS and humanitarian efforts including peacekeeping missions and refugee programs; the relationship between AIDS and famine; and the effect of gender inequity on treatment programs. Gender-sensitive treatment and research, economic empowerment initiatives for women, and programs in conflict and post-conflict environments should receive greater priority. Lastly, institutional resources like Northwestern’s should be mobilized to contribute to these efforts.

Steve Morrison, Director, Africa Program, Center for Strategic and International Studies (CSIS); Director, CSIS Task Force on HIV/AIDS

Dr. Morrison outlined what the Presidential Emergency Plan for AIDS Relief could mean for U.S. universities and provided several pieces of advice. Amid the great expectations created by the Bush initiative, new political realities have emerged: this issue is now dominated by Republicans and religious conservatives. These developments present a potential conflict with liberal educational institutions. Religious conservatives and the medical community are unfamiliar partners. As the initiative moves

forward, we should expect that domestic debates on sex will affect implementation. The Emergency Plan was given moral rescue and security rationales, and it places AIDS at the center of US foreign policy towards Africa. Despite the significant resources promised, Morrison believes that the Plan's treatment targets are unrealistic. The US Government is currently recruiting an AIDS czar to oversee all HIV/AIDS programs [ed. Randall Tobias was appointed on July 2nd]. This official will exercise great influence over the design and execution of the initiative. It is unclear if the current high-level engagement is sustainable and if higher appropriations for AIDS will come at the cost of other development funding. The most successful US universities, according to Morrison, will be those that establish the strongest links with African institutions. Major new training facilities and centers of excellence will, he argues, be created on the continent.

Following the presentations, several issues arose during the question and answer period. In response to a question on Uganda, several speakers identified key factors in this country's successful campaign: high-level political commitment, the ABC formula with particular emphasis on condom-use, grassroots activism, fear of a society that had recently brushed with collapse (during the rule of Idi Amin), and a unique willingness to speak openly about AIDS.

An inquiry on how the new US government money would be distributed revealed uncertainty about the future shape of the Emergency Plan. Steve Morrison replied that the specifics are not yet known and will likely be determined by the AIDS czar. Peter Lamptey agreed, and added that the roles of various U.S. government agencies and faith-based organizations remain unclear. Janet Fleischman noted that the current legislation calls for one third of the Emergency Plan's funding to be allocated to abstinence programming. Further research could prove that abstinence cannot stand alone, and that AIDS education does not increase promiscuity.

Kearsley Stewart, a lecturer in Northwestern's Anthropology Department, asked who will be the African partners in the Emergency Plan's implementation. Peter Lamptey replied that the public sector will be important, especially in treatment programs. To be effective, governments and NGOs must rapidly improve their capacity to reach greater numbers of people. Phil Nieburg suggested that existing agencies will continue to work with their usual partners -- USAID with governments and NGOs, CDC with Ministries of Health -- and that much will depend on the AIDS czar's preferences.

To close the session, one participant noted that most of the day's discussion centered on top-down programs and asked: what about communities that want to be self-managed? In response, Phil Nieburg reminded the group that no one has experience dealing with a pandemic on this scale. We must demonstrate humility and engage in regular consultation with our African partners.

Panel Two: Northwestern Engagement in the AIDS Campaign



From left to right: Dr. Loren Ghiglione, Dr. Robert Murphy, Dr. Caroline Bledsoe, and Dr. David Messick

Loren Ghiglione, Dean, Medill School of Journalism

Dr. Ghiglione described a new Medill program in which students examined media coverage of the AIDS epidemic in South Africa and India. Following an intensive course in Chicago, eight students flew to Capetown to cover an AIDS demonstration. After the week-long spring break trip, several students remained in South Africa for a full term to work as interns for media companies and to continue their research. Stories they wrote on AIDS events were carried by local print and television outlets. Dr.

Ghiglione reviewed the experiences of the students as they dealt with personal security and cultural conflict issues, and encountered the challenge of providing care and treatment in conditions of strained human and physical resources.

Robert Murphy, Professor of Medicine, Feinberg School of Medicine; Principal Investigator, Adult AIDS Clinical Trials Group

Drawing from his extensive clinical treatment experiences, Dr. Murphy described the effects of leaving the disease untreated, including projected life-expectancy and the progression of various HIV subtypes across Africa. He outlined a number of research and treatment programs associated with the Adult AIDS Clinical Trials Group (NIAID). In Senegal, he worked to redefine ARV treatment regimens, expand treatment of HIV-1/HIV-2 dual infection, train professionals in resistance genotype testing, and research HIV-2. The Lagos Resistance Study, conducted in association with the Nigerian Institute of Medical Research [correct???], supports infrastructure development. The Kenya program, still in its preliminary stages, will further the rural extension of ARV treatment. Dr. Murphy called attention to the fact that ARV treatment “if not done right, won’t work.” Resistance to the drugs can emerge, thereby reducing their efficacy. His presentation indicated a breadth and depth of contacts in Africa and the capacity that already exists at Northwestern for AIDS-related training and research.

Caroline Bledsoe, Melville Herskovits Professor of African Studies and Anthropology

In her address, Dr. Bledsoe discussed some of the precautions required in the study of behavior in other cultures. Particularly, she warned that cultural partiality can compromise the relevance and accuracy of Western scientific assumptions when applied to African communities. Dr. Bledsoe’s earlier research, for example, revealed that Gambian women use contraceptives to manage their own health and aging, and space their children, rather than reduce family size. We have to be more conscious of the different systems of logic that prevail in different cultures. As more attention is devoted in the global AIDS campaign to adapting western technologies and scientific understandings to heavily-impacted societies, Dr. Bledsoe’s pioneering exploration of cultural filters will be of great assistance.

David Messick, Morris and Alice Kaplan Professor of Ethics and Decision in Management; Co-Director, Ford Motor Company Center for Global Citizenship

As part of Kellogg’s Global Initiatives in Management program, Dr. Messick has led five trips to Southern Africa in which students analyze the impact of globalization on African economies. Several MBA students have examined corporate responses to HIV/AIDS. Through his involvement with this program, Dr. Messick observed the growth of such responses from the limited efforts of the Anglo-American Corporation in 2000 to the current aggressive approach promoted jointly by the Merck Company and the Gates Foundation in Botswana. He stressed the contributions that the private sector can make to the AIDS campaign. Business schools usually teach how to change behavior and manage institutions -- skills required in the fight against AIDS. Business students can become more fully engaged, but it is important to engage them through the use of the skill sets they are acquiring. Undue skepticism of the motives of multi-national corporations, he further argued, constrains their full involvement. A reduction of anti-business biases should accompany the current increasing attention being devoted by corporations to Africa’s pressing needs.

Keynote address: “Universities, Interdisciplinary Research and HIV/AIDS”



Michael Merson, Dean, Department of Epidemiology and Public Health; Director, Center for Interdisciplinary Research on AIDS, Yale University
Drawing on his highly pertinent experiences as founding director of Yale’s Center for Interdisciplinary Research on AIDS (CIRA), Dr. Merson provided systematic advice regarding the creation of a campus-wide HIV/AIDS initiative at Northwestern. He emphasized strategies to overcome institutional obstacles to the conduct of interdisciplinary research. He abstracted from CIRA’s development

and success the following key considerations:

- constantly revisit the mission and conduct strategic planning
- provide appropriate incentives and services to researchers

- link all training with research to ensure that acquired skills are applied
- promote cutting edge activities and establish a distinct institutional space
- develop local community support
- seek university recognition

Lastly, he commented favorably on the preliminary design of Northwestern's Program on AIDS-Impacted Societies (PAÍS). Dr. Merson commended its focus on the third wave impact, and governance in particular, and provided recommendations for the program's development. The full text of Dr. Merson's insightful remarks are provided at:

Panel Three: Next Steps

Dr. Richard Joseph, Director, Program of African Studies

To lead off the final panel chaired by Dr. Joseph, three students described their work on HIV/AIDS in Africa. Julie Pace, a junior in the Medill School of Journalism, interned at a television station in South Africa where she covered several stories including the controversial refusal of free ARV drugs by the Ministry of Health. Kellogg MBA student Kara Palamountain examined Botswana's ground-breaking treatment program, supported by Merck and the Gates Foundation, as an example of the private sector's capacity to engage in the fight against HIV. Maureen Farrell, a senior African Studies/Anthropology major, conducted field research in Uganda and Kenya on the role of religious organization in HIV prevention.

The ensuing conversation among the forum's participants, speakers and organizers produced numerous insights that will assist in the development of PAÍS. Several of the discussion's themes are as follows:

- the hurdles to be overcome in conducting interdisciplinary work
- the political/ideological chasm between academia and the forces driving U.S. AIDS policies
- the nexus between AIDS and security concerns as a policy-relevant topic of analysis
- potential Northwestern partners and allies including Midwestern political leaders and religious organizations
- the need for research to inform contentious ideological and political debates
- the role that journalists and journalism students can play in the AIDS campaign
- the reasons for the relatively low incidence of AIDS in Islamic African countries
- the use of preliminary needs assessment trips to build collaborative relations with local institutions
- the unique contributions that graduate and undergraduate students can make
- the addition of a treatment component and/or clinical research training to the initial design of PAÍS.

The organizers of the Experts Forum would extend their appreciation to all the speakers and participants. Your contributions generated a highly productive event whose outcome will be integral to the design and implementation of Northwestern's Program on AIDS-Impacted Societies. In the face of the global challenge of HIV/AIDS, knowledge, experience and dedication will be invaluable as we proceed to the next stage of this important initiative.

For further information about the June 10 Experts Forum or the PAÍS initiative, please contact:

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