BATTLING COMPLACENCY

ADVANCING COMMITMENT
ABOUT IAPAC

The International Association of Physicians in AIDS Care (IAPAC) was established in 1995 by healthcare professionals and civic leaders who recognized an urgent need for a coordinated medical response to the HIV pandemic. There was no organization at that time exclusively devoted to marshaling the collective experience and strength of healthcare professionals worldwide to the benefit of people living with and affected by HIV/AIDS. Fifteen years later, IAPAC — with offices in Chicago, Johannesburg, and Washington, DC, and programs in 27 countries — represents a professional membership of more than 13,000 physicians and other healthcare professionals in over 100 countries.

MISSION STATEMENT

To improve the quality of prevention, care, treatment, and support services provided to men, women, and children at risk for, living with, and affected by HIV/AIDS.

VISION STATEMENT

IAPAC envisions a world in which people living with HIV/AIDS may obtain the best healthcare available that is provided by physicians and allied healthcare professionals who are armed with cutting-edge clinical expertise.

Learn more by visiting www.iapac.org.
GLOBAL HEALTH INITIATIVES

The Campaign Against Substandard and Counterfeit Drugs (CASCD) is a two-year study to collect evidence of and raise awareness about the proliferation of substandard copies of HIV, malaria, and tuberculosis (TB) drugs in the developing world and their detrimental effect on the health and well-being of people living with these medical conditions. The initial study countries are Peru, Thailand, Uganda, and the Ukraine.

In partnership with the International Council of Nurses (ICN), IAPAC is engaged in a multi-country Consequence Mapping Study to assess the feasibility and potential impact of interventions to transform the way in which future physicians and nurses are produced on the African continent. The study includes inventories of medical and nursing schools in 15 sub-Saharan African countries conducted in parallel to consequence-mapping exercises. The study will feed into a broader health workforce development effort led by the World Health Organization (WHO) and the US President’s Emergency Plan for AIDS Relief (PEPFAR).

The Global AIDS Learning and Evaluation Network (GALEN) was established in 2001 as a means of supporting the introduction of antiretroviral therapy (ART) in sub-Saharan Africa and eventually other regions of the world (e.g., China, post-Soviet states). Using the GALEN curriculum, IAPAC and its partners have trained thousands of physicians on ART management within a continuum of HIV care, treatment, and support. IAPAC has also utilized its GALEN Exam to test the knowledge of HIV-treating physicians in sub-Saharan Africa. To achieve certification, a physician must score 70% or higher on a rigorous exam that evaluates his/her ability to practice HIV medicine along a continuum of care that begins with diagnosis and ends with palliative care, but which has an emphasis on ART management in adults and children, as well as the prevention of mother-to-child transmission (PMTCT) of HIV. The GALEN Exam will be available for physicians in other regions of the world in 2011.

The AIDS Treatment for Life International Survey (ATLIS) is a bi-annual, multi-country, comparative survey through which IAPAC gains insights into perceptions and attitudes held by people living with HIV/AIDS (PLWHA) around the world in relation to HIV disease, its treatment, and related psychosocial issues. In addition to its research value, ATLIS is a global needs assessment to identify key gaps in and opportunities to address HIV literacy issues among PLWHA. In 2010, IAPAC surveyed 2,035 PLWHA in 12 countries (Australia, Brazil, Côte d’Ivoire, France, Germany, Italy, Korea, Russia, South Africa, Spain, the United Kingdom, and the United States). ATLIS 2010 results will be announced at AIDS 2010 in Vienna, and are available at www.iapac.org (on July 20, 2010).
In a longstanding partnership with the US National Institute of Mental Health (NIMH) and other US Government agencies, IAPAC annually hosts a multidisciplinary conference that explores the determinants of suboptimal adherence to antiretroviral therapy (ART), and features the presentation of original research from around the world about behavioral and clinical interventions to promote and enhance ART adherence. This year’s conference proceedings are available at www.iapac.org. The 6th International Conference on HIV Treatment Adherence is scheduled to take place in May 2011.

In light of a paradigm shift in the clinical management of hepatitis C virus (HCV) mono-infection, as well as co-infection with HIV, that will take place in 2011, IAPAC is partnering with Johns Hopkins University to host an International Conference on HCV Clinical Management in March 2011. The continuing medical education (CME)-accredited conference will feature plenary addresses, and the presentation of original research related to HCV prevention and treatment. The conference’s audience will include physicians, nurses, and allied healthcare professionals (e.g., pharmacists).

Internet-based Continuing Medical Education (CME) and Performance Improvement Education (PIE) are methodologies IAPAC employs to deliver continuing education to its physician-, nurse-, and allied healthcare professional members in Western Europe and the United States. Both are continuing quality assurance and improvement mechanisms through which IAPAC ensures clinicians remain current with developments in the field of HIV medicine. Visit www.iapac.org to view our Internet-based CME and PIE activities.

JIAPAC is IAPAC’s bi-monthly, peer-reviewed journal. It presents original research, research reviews, case studies, and clinical perspectives on the treatment of HIV/AIDS around the globe. A primary information resource for both developed and developing world regions, JIAPAC explores a variety of topics in a variety of care settings, including pathology, co-infection, clinical pharmacotherapeutics, diagnostics, epidemiology, health service delivery, and cultural and behavioral influences on HIV disease and its treatment. Visit http://jia.sagepub.com/ to view current JIAPAC issues and/or for manuscript submission guidelines.
PATIENT EDUCATION

In the Know is a patient-oriented program that educates HIV-positive patient about healthy living with HIV/AIDS through a variety of educational media. These include brochures, memory aids, and treatment seminars delivered at HIV Expos, which are co-hosted by IAPAC and the Association of Nurses in AIDS Care (ANAC). The HIV Expos – which take place in US cities with the highest HIV prevalence rates (e.g., Washington, DC) – also include biometric screening opportunities, including rapid HIV testing.

IAPAC+ is a patient-oriented magazine featuring user-friendly articles about issues ranging from the importance of nutritional intake to ensuring the success of HIV treatment (e.g., adherence). IAPAC+ is distributed throughout the United States by IAPAC’s AIDS service organization (ASO) members, and is available in its physician-member practices nationwide. IAPAC plans to scale up the magazine’s production in 2011 to accommodate a global need for increased HIV literacy, as documented by ATLIS 2010 (see above).

TECHNICAL ASSISTANCE

The World Health Organization (WHO) partnered with IAPAC and a variety of academic, professional association, and other institutions to develop Task Shifting: Global Recommendations and Guidelines. The guidelines’ goal is to facilitate shifting clinical tasks from specialized to less specialized cadres of healthcare professionals, including community health workers. The effect would be to break through one of the bottlenecks to scale-up of access to antiretroviral therapy (ART) in developing world countries: health worker shortages. The guidelines’ Quality Assurance recommendations were developed by IAPAC in collaboration with the International Council of Nurses (ICN) and the Association of Nurses in AIDS Care (ANAC).

The Pan-American Health Organization partnered with IAPAC and a variety of academic, professional association, and other institutions to develop a Blueprint for the Delivery of Comprehensive Care to Gay Men and Other Men Who Have Sex with Men (MSM) in Latin America and the Caribbean. IAPAC is currently working with PAHO to develop a toolkit to facilitate the training of clinicians and laypeople on the Blueprint’s recommendations. A similarly focused Blueprint is also currently in development specific to the comprehensive health and psychosocial needs of transgender individuals in the Latin America and Caribbean region.
ADVOCACY

In June 2009, IAPAC opened a Washington, DC, office to ensure that its membership’s voice is heard both in relation to the domestic HIV epidemic in the United States, as well as the US response to the global HIV pandemic. Throughout the year, IAPAC provided technical input into the development of a National HIV/AIDS Strategy for the United States. IAPAC is also working with the US Office of the Global AIDS Coordinator (OGAC) around health workforce development and human resources for health issues.

In honor of one of its founding members, IAPAC is laying the groundwork for the launch in 2011 of the Jonathan Mann Institute (JMI), which will be devoted to advancing advocacy, education, and technical support activities in support of fulfilling humanity’s unconditional right to health. The JMI will be a significant expansion on IAPAC’s human rights-related work, that has, since 1998 (a year after his untimely death), included recognition of an outstanding advocate of the human right to health who is awarded IAPAC’s Jonathan Mann Health Human Rights Award. Among the award’s past recipients is former US President Bill Clinton and Archbishop Desmond Tutu.