

# Global AIDS Technical Exchange Project—Country Profile

**BRAZIL**

## **HIV/AIDS IN BRAZIL**

Brazil is the largest and most populous country in South America. The spread of HIV began in the country in the 1980s. Today, Brazil has one of the largest HIV-infected populations in Latin America, accounting for half of the infections in the region. The incidence of AIDS has remained stable, with 20,000 new cases each year for the past five years. HIV prevalence has stabilized at 0.7 percent for the past four years. In responding to the HIV/AIDS epidemic, Brazil has developed one of the most aggressive, far-reaching strategies in the world to slow the rate of infection and to care for those already stricken by the virus. The program is led by the Brazilian National AIDS Program (CN or CN DST e AIDS) in the Ministry of Health. The Brazilian national response has focused on interventions that include massive distribution of condoms, harm reduction programs for injection drug users (IDU), health education/promotion to high-risk populations, mass media campaigns, voluntary counseling and testing, universal and free access to antiretroviral therapy, and guaranteed human rights.

At the end of 1999, the HIV epidemic had stabilized among high-risk groups such as injection drug users and men who have sex with men. However, HIV/AIDS has been reported in 60 percent of the municipalities. It is moving from predominantly urban settings to more rural areas and harder-to-reach populations. An increase of new AIDS cases has been found among heterosexual women and marginalized and poorer populations, with 60 percent of all AIDS cases among illiterate individuals. The number of heterosexual cases has surpassed the number of new AIDS cases among men who have sex with men (MSM), which was 27 percent of new AIDS cases in 2002. The Centers for Disease Control and Prevention (CDC) Global AIDS Program (GAP)/Brazil field office is collaborating with the Brazilian National AIDS Program to provide support in monitoring and evaluation (M&E), surveillance infrastructure, voluntary counseling and testing, and capacity building in the area of HIV prevention in hard to reach populations including commercial sex workers, IDU and MSM. One of the top priorities for CDC GAP/Brazil and the Brazilian National AIDS Program is to strengthen their current national AIDS surveillance system and develop M&E systems to effectively document Brazil's successes in preventing HIV infection and managing a treatment program for persons living with HIV/AIDS.

## **NASTAD'S ROLE**

The National Alliance of State and Territorial AIDS Directors (NASTAD) is a nonprofit national association of U.S. state health department HIV/AIDS directors based in Washington, D.C. Its members bring over 20 years of experience in developing, implementing, and evaluating HIV prevention and care programs. Each state has tailored its monitoring and evaluation systems to fit the needs of its programs with guidance from the U.S. federal government (CDC and the Health Resources and Services Administration) for developing a national M&E system. NASTAD members and their program staff have expertise in working with national and state partners to develop an M&E system that can be responsive and informative to needs at the national, state, and local levels. NASTAD members also have direct contact with surveillance coordinators in their health departments. At least 60 percent of AIDS directors are responsible for overseeing and managing surveillance activities for their state, and for working with national partners in furthering surveillance systems at both state and national levels.

## **ACTIVITIES**

NASTAD began its collaboration with the CDC Global AIDS Program/Brazil and the National AIDS Program in 2001 with a number of discrete activities. At the IV National Prevention Conference in Cuiaba, Brazil, a NASTAD representative presented on Georgia's surveillance system and spoke about the use of data in HIV prevention planning. In 2002, NASTAD hosted two separate delegations of state/municipal HIV/AIDS program managers. The first group traveled to the U.S. in April 2002. This delegation comprised of Brazilian national, state and municipal program managers met with the California Office of AIDS, University of California, San Francisco and a statewide community planning group to learn and share experiences on state level monitoring and evaluation systems. In August 2002, a delegation, sponsored by the U.S. State Department, brought municipal and state HIV/AIDS/STD managers from the border states in Brazil to the NASTAD office in Washington D.C. The visit was an opportunity for this group to learn about NASTAD's support to HIV/AIDS programs at the state level and the role of state health departments in responding to HIV/AIDS along the U.S./Mexico border.

In October 2003, NASTAD furthered its partnership with the Brazil National AIDS Program and CDC GAP/Brazil in an effort to build capacity in the areas of monitoring and evaluation. A project was requested and planned between the Brazilian partners and NASTAD to establish a twinning relationship between U.S. state/local AIDS programs with selected state and municipal AIDS directors in Brazil. These sites chosen by the Ministry of Health are to be considered M&E sites of excellence. The project was designed to establish an avenue for shared experiences and lessons learned in HIV/AIDS prevention and care, with a particular emphasis on monitoring and evaluation of programs. U.S. and Brazil sites were matched according to their interpersonal skills, language, experience in monitoring and evaluation and the type of epidemic in their state/city.

The initial phase of the “twinning” relationship was to arrange and conduct visits by Brazilian sites of excellence to U.S. partner sites on an introductory study tour—this happened in the summer of 2004. This visit was an opportunity for the HIV/AIDS program managers from Brazil to learn about HIV/AIDS prevention programs and monitoring and evaluation systems in the U.S. The following is a list of the twinning relationships established:

- Laredo City Health Department (Texas) and Campo Grande Municipal STD/AIDS Program
- Louisiana State Office of Public Health and Manaus Municipal STD/AIDS Program
- Massachusetts State Department of Public Health and Pernambuco State STD/AIDS Program
- New York State AIDS Institute and Sao Paulo State STD/AIDS Program
- San Francisco City Department of Public Health and Curitiba Municipal STD/AIDS Program

The intention of these partnerships is to provide an opportunity for U.S. and Brazilian state/municipal staff to gain expertise in the areas of systems development for monitoring and evaluation of prevention programs. One example from the first visit to the U.S., peers from Brazil learned about 1) the development of tools, systems, and procedures for contracting with NGOs, 2) fiscal monitoring, 3) collection of process and outcome data related to NGO-level prevention programming, 4) improved surveillance data collection, and 5) laboratory analysis linked to surveillance.

Planned for the fourth quarter of 2004, staff from U.S. state and/or local health departments will travel to their matched site in Brazil to learn about Brazil’s experience in developing prevention and care programs at the state/municipal level. Priority areas of interest to be explored during the visit with their peers in Brazil are the development of progressive prevention programs and public information campaigns; adolescent sexuality

education programs in schools; improving system performance indicators of prenatal prevention; innovations in designing and delivering harm reduction programs; specialized expertise for the distribution of antiretroviral medications; improved health assistance programs; and community mobilization for priority setting.

NASTAD also has been requested by the Brazil National AIDS Program and CDC GAP/Brazil to support and facilitate the involvement of a U.S. based co-investigator to conduct an evaluation study that explores causes of mortality of AIDS patients in Brazil, particularly in the context of a very vigorous universal ART treatment program. The AIDS surveillance director from the San Francisco Department of Public Health has been identified to support and collaborate with the National Principal Investigator in carrying out this study. This evaluation, AMA-Brazil, proposes to investigate all existing medical records, electronic and written, of persons dying of AIDS in 17 to 19 municipalities in Brazil in the year 2002.

In 2004, NASTAD sponsored an innovative study tour of key U.S. health department staff responsible for administering the AIDS Drug Assistance Program in their states. Delegates from Florida, Kentucky, North Carolina and New York traveled to Brasilia, Rio de Janeiro, and Sao Paulo to learn about Brazil’s care and treatment strategies, specifically the national HIV medication program. Colleagues from the U.S. and Brazil shared many striking similarities within their current systems of care and challenges faced by both the U.S. and Brazil HIV care systems such as poverty, stigma and discrimination, adherence, improving the quality of care, and reducing the rate of new infections, and the need for increased resources to adequately address these challenges.

## **NEXT STEPS**

NASTAD will continue to support the Brazil National AIDS Programs and CDC GAP/Brazil through twinning relationships in monitoring and evaluation through bi-directional visits, and encourage communication between the “twinning sites” by conference calls and email through March 2005. These established partnerships will continue to promote the exchange of ideas and disseminate experiences between health professionals in both the U.S. and Brazil to strengthen their respective HIV/AIDS programs and infrastructure. At the completion of the scheduled visits in 2005, NASTAD and CDC GAP will jointly conduct an evaluation of this twinning program.

NASTAD  
Global AIDS Technical Assistance Program  
www.nastad.org  
(202) 434-8090