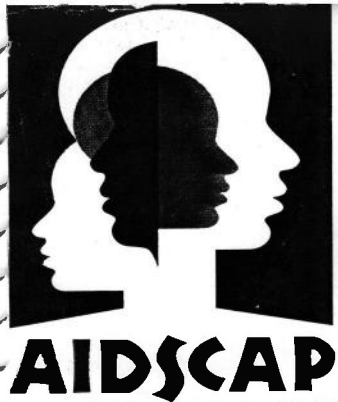


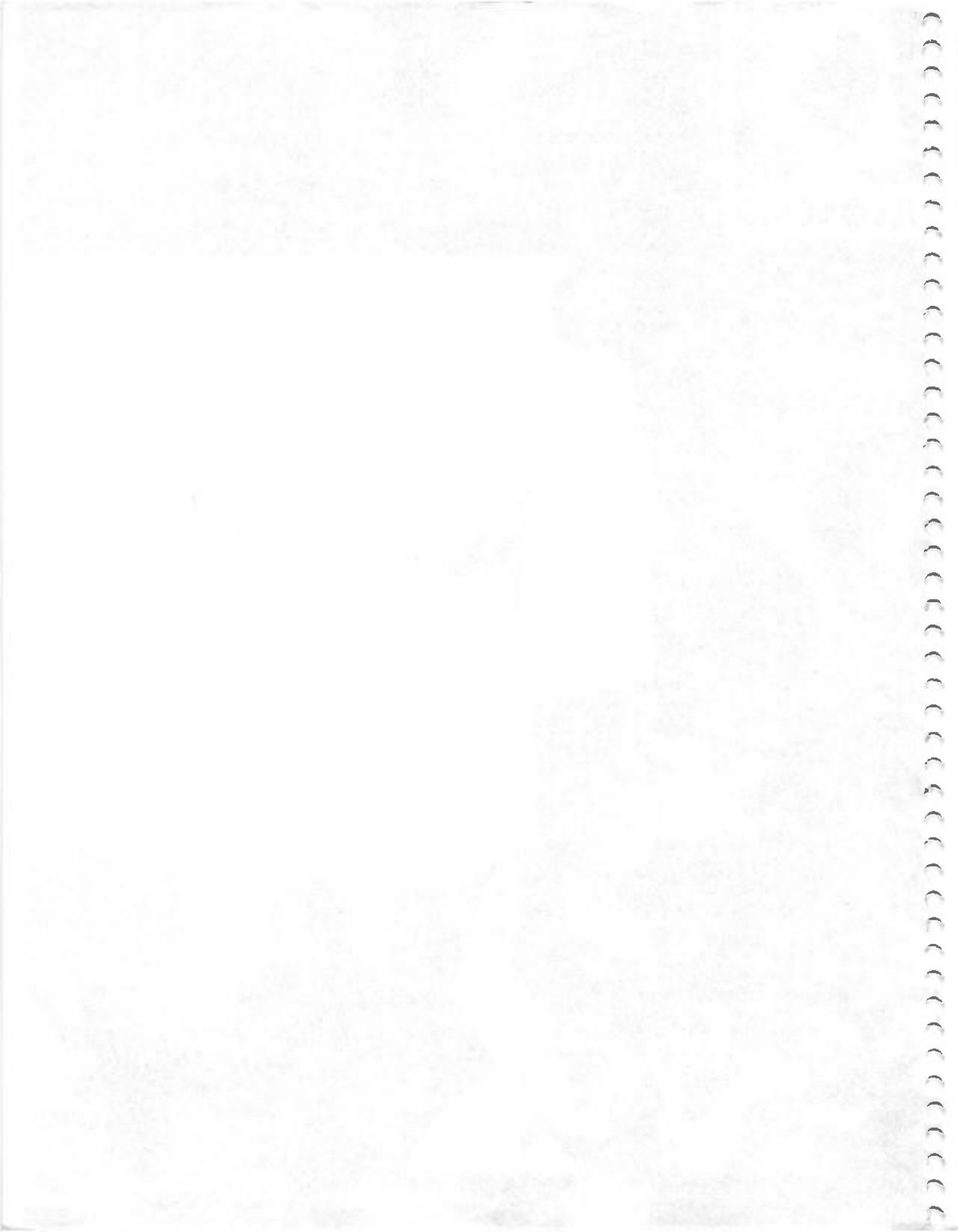
FAMILY HEALTH INTERNATIONAL AIDS CONTROL AND PREVENTION PROJECT

PROJECT 936-5972.31-4692046, HRN-C-00-94-00001-17



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**Final Report
for the
AIDSCAP Program
in
BRAZIL**

September 1992 to August 1997

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LIST OF ACRONYMS

ABAPEQ	Associação Baiana de Apoio, Prevenção, Terapia e Pesquisa do Abuso de Drogas
ABCA	Brazilian AIDS Combat Association
ABIA	Associação Brasileira Interdisciplinar de AIDS
ACPF	Ação Comunitária Pró-Favela
AHRTAG	Appropriate Health Resources and Technologies Action Group Ltd.
AIDS	Acquired Immune Deficiency Syndrome
AIDSCAP	AIDS Control and Prevention Project
AIDSCOM	AIDS Public Health Communications Project (Former AIDS project under auspices of the Academy for Educational Development)
AIDSTECH	AIDS Technical Support Project (Former AIDS project under auspices of FHI)
APROCE	Association of Prostitutes in Ceará
APTA	Association for the Prevention and Treatment of AIDS
ASF	Associação Saúde da Família
ASSPE	Santos Association for Research and Intervention
BCC	Behavior Change Communication
BEMFAM	Sociedade Civil Bem-Estar Familiar no Brasil
BUASTI	Brazilian Union Against STIs
CAPS	Center for AIDS Prevention Studies, University of California at San Francisco
CASG	Centro de Estudo Avançados em Ginecologia
CCIM	Culture Concepts Institute and Medicine
CDC	Centers for Disease Control
CEMINA	Centro de Projetos da Mulher
CEPESC/UERJ	Centro de Estudo e Pesquisa em Saúde Coletiva/Universidade Estadual do Rio de Janeiro
CGT	Confederação Geral dos Trabalhadores
CRI	Associação Criança Querida
CRIA	Reference Center for Adolescents
CSM	Condom Social Marketing
CSW	Commercial Sex Worker
CUT	Central Union of Workers
DHS	Demographic and Health Survey
ECMIS	Essential Commodities Management Information System
FGD	Focus Group Discussion
FHI	Family Health International
GAPA	Grupo de Apoio e Prevenção da AIDS
GTPOS	Grupo de Trabalho e Pesquisa em Orientação Sexual
HCP	Health Care Provider
HIS	Health Information System
HIV	Human Immunodeficiency Virus
IA	Implementing Agency
IBEAC	Brazilian Institute for Study and Community Support
ICMS	Circulating Merchandise Tax

IDU	Injecting Drug Users
IEC	Information, Education and Communication
IMPACT	Implementing Agency for Cooperation and Training
IPI	Industrialized Product Tax
ISER	Instituto de Estudo da Religião
JSI	John Snow Incorporated
KABP	Knowledge, Attitudes, Beliefs and Practices
LAC	Latin American and the Caribbean
MAFH	Men Away From Home
MCCS	Women, Children, Citizenship and Health
MEAC	Maternidade Assis Chateaubriand
MOH	Ministry of Health
MTP	Medium Term Plan
MWM	Men Who Have Sex with Men
NACP	National Program on Sexually Transmitted Diseases and AIDS
NEPAIDS	Nucleus for AIDS Prevention at University of São Paulo
NGO	Non-Governmental Organization
NIH	National Institutes of Health
NOSS	Nucleus of Orientation in Social Health
OASIS	Organização de Apoio ao Portador do Virus da AIDS
PAHO/WHO	Pan-American Health Organization – World Health Organization
PI	Prevention Indicator
PIF	Process Indicator Form
PLWA	People Living With HIV/AIDS
PROSAD	Adolescent Health Program
PVO	Private Voluntary Organization
PSI	Population Services International
PWP	People in the Workplace
RA	Resident Advisor
RRF	Rapid Response Fund
SES	Secretaria de Estado da Saude
STD/STI	Sexually Transmitted Disease/Infection
SUNY	State University of New York
TOT	Training of Trainers
UNAIDS	United Nations Programme on HIV/AIDS
UNFPA	United Nations Fund for Population Activities
USAID	United States Agency for International Development
UW	University of Washington
US	United States
WHO/GPA	World Health Organization/Global Program on AIDS

I. EXECUTIVE SUMMARY

Brazil became an AIDSCAP priority country in 1992, following completion of the USAID funded AIDSTECH and AIDSCOM projects. Associação Saúde da Família (ASF) was created in 1993 with technical assistance from Family Health International (FHI) to legally implement the AIDSCAP project in Brazil.

With a population of approximately 158 million, Brazil is the largest and most populous country in Latin America and the fifth largest and most populous country in the world. The country's size has masked the seriousness of its HIV/AIDS epidemic: although HIV prevalence is below 1 percent in the overall population, Brazil ranks second in the world in cumulative AIDS cases reported, with 116,389 cases (reported by mid-1997) and an estimated 448,000 individuals living with HIV.

Core groups such as men who have sex with men (MWM) and injecting drug users (IDU) have experienced high rates of infection throughout the epidemic. In 1994, seroprevalence among MWM in Rio de Janeiro was 24 percent of the cumulative AIDS cases, and injection drug use accounted for another 19 percent. Sentinel surveillance has documented HIV prevalence as high as 65 percent among IDU in several cities. HIV prevalence is also high among commercial sex workers (CSWs) and sexually transmitted infection (STI) clinic attendees. However, during the past five years, the epidemic has been characterized by a shift of new infections to the general population, particularly to women and adolescents. The male-to-female ratio decreased from 6:1 in 1991 to 3:1 in 1996. Since 1992, AIDS has been the leading cause of death among women aged 20 to 34 in São Paulo state. The number of cases due to vertical transmission has increased as more women of reproductive age have become infected.

The Ministry of Health's (MOH) National Program on Sexually Transmitted Diseases and AIDS (NACP) has been the primary institution responsible for STI/HIV/AIDS control and prevention in Brazil. The NACP works in association with the country's 27 state governments, municipal governments and non-governmental organizations (NGOs) to reduce the incidence of STI/HIV/AIDS in Brazil and to strengthen the public and private institutions involved in control and prevention. The USAID-funded AIDS Control and Prevention Project (AIDSCAP) complements the NACP efforts to contain the spread of sexually-transmitted HIV infection in the key states of São Paulo and Rio de Janeiro, where 69 percent of Brazil's HIV infections are concentrated.

The goal of the AIDSCAP project was to reduce the incidence of sexually-transmitted HIV infection in Brazil. AIDSCAP/Brazil identified three strategies to achieve this goal:

- reduce sexually transmitted infection (STI) prevalence by improving STI clinical services, expanding services to new clinics and by increasing utilization of new and existing STI clinics through the creation of a referral system.
- reduce risky sexual behavior among target groups through behavior change communication (BCC).