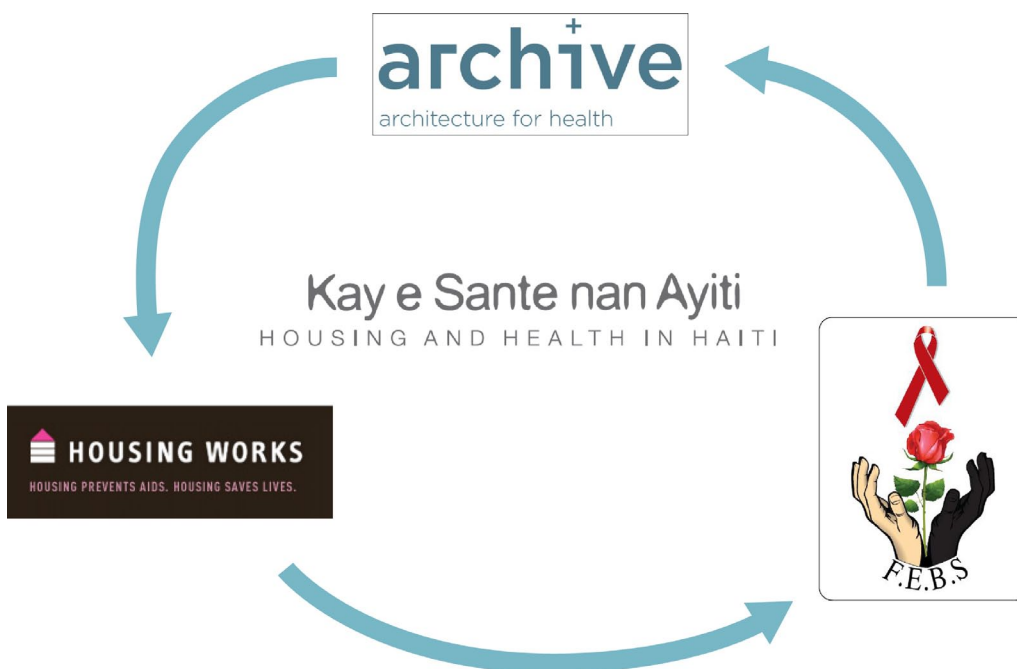


COMMUNITY OUTREACH RESEARCH

PART



Agency Relationships



- **FEBS** (Foundation Esther Boucicault Stanislas):
FEBS is ARCHIVE's client who provides psychosocial services for a PLWHA community in St. Marc, Haiti.

According to: <http://www.housingworks.org/partners/international/febs/>:

The Foundation Esther Boucicault Stanislas (FEBS) aims to improve the quality of life for people living with AIDS in Haiti by providing quality health care and support services as well as reducing stigma and discrimination. FEBS is one of the few groups in Haiti and the developing world that specifically integrates dignity and hope into its mission to help people living with AIDS.

Every year, FEBS provides services to 500 Haitians living with HIV/AIDS and Haitian children orphaned by AIDS. FEBS' services include up-to-date clinical and counseling practices; flexible clinic hours and locations to meet community needs, a referral system for HIV/AIDS clinical care and support services, and strong linkages to other organizations providing general HIV support and education to the people in and around Sant Marc.

FEBS primarily focuses on PLWHA empowerment. They are interested in seeing clients reintegrated into society after dealing with a serious blow to their health. Esther Boucuault wants patients to be able to continue working. And she wants people not to feel ashamed for their health situation. FEBS now provides services to roughly 500 people including 150 AIDS orphans, 250 people living with HIV and 110 people on HIV meds.

AIDS outreach to gay men and transgender Haitians is nearly nonexistent - the discrimination suffered by both groups make them extremely hard to reach. FEBS' clients include gay and transgender individuals affected by the HIV/AIDS epidemic in Haiti. Most are living in poverty and have severely limited resources and/or access to health care and, because of strong discrimination, remain secretive about their sexual orientation.

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- **According to FEBS members & ARCHIVE research:**

FEBS has an immense presence in St. Marc. They opened a clinic in February 2010 with Housing Works near their office in the middle of town (7g rue Berlin, St. Marc) which now hosts voluntary doctors who provide assistance immediately following the earthquake. FEBS' clinic is currently not at operational capacity though they are working with Housing Works and PIH to re-open the clinic shortly. PIH will help staff the clinic and Housing Works will provide medicine and equipment. The clinic will initially serve PLWHA but they are hoping it will eventually operate at a capacity to provide free health care to the community at large. Prototype houses will be developed for FEBS.

FEBS' main office has a pharmacy, for which both Housing Works and PIH help to supply medications. The main office also has a few counseling rooms and offices. FEBS also runs a clothing boutique that sells second-hand clothes donated from the United States Housing Works office to generate income. The boutique is a five minute drive from their office.



CAPEBS : Centre d'Assistance Psychosocial Esther Boucicault Stanislas: According to FEBS: CAPEBS (the naming plays on the Creole word Kapab, meaning can) is a branch of FEBS that is responsible for the execution of all their projects. This branch is run out of the FEBS Clinic.

Esther Boucicault: According to: http://www.poz.com/articles/140_77.shtml, http://www.hwupdate.org/update/2008/04/hope_in_haiti.html

Esther Boucicault Stanislas decided to stay behind in St. Marc after political unrest with Aristide's departure. She distributed antiretrovirals to clients and felt that she had preventative work to do after a turbulent time period. Boucicault became the first person in Haiti to publicly say she was HIV positive and announced her status on a series of Haitian radio and TV shows. She wanted to educate the public.

Her announcement was difficult for many Haitians to understand. She was apparently healthy looking and from a middle class environment even amidst speaking to her fear of having been infected with an std. There is a profound level of stigma associated with AIDS in Haiti. From her perspective, due to the high level of Catholicism and voodoo there are misconceptions associated with the disease.

Esther follows a strict health regimen, taking Kaletra, Trizivir, and Viread to control her HIV. But she also suffers from both diabetes and neuropathy. As a result of her work, FEBS has forged a widespread network of Haitians who embrace their identity as people living with HIV; PLWHA. Paul Farmer, MD, cofounder of PIH credits Boucicault not only with helping to pave the way for HIV treatment in Haiti but with galvanizing PIH's own HIV positive leaders.

Esther's own story however, is a difficult one. In the early '90s, Boucicault's husband, Bob Stanislas, a rice-factory director, fell gravely ill. As is common in Haiti, Boucicault visited a houngan, or voodoo priest, hoping he could lift whatever curse was causing the illness.

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“I paid the houngan thousands of dollars,” she says, “and he died anyway.” Suspecting that her husband might have died of AIDS—he had both pneumonia and tuberculosis—Boucicault got tested, but the result was negative.

Then in 1995, Boucicault had a son with a new partner. While she was pregnant with their daughter Stephanie, her son died at nine months of age. Suspecting again that the cause was HIV, Boucicault and her partner both got tested. He was negative, but Boucicault was positive. She believes that both her husband and son died of AIDS and that her first HIV test was incorrect. Happily, Stephanie cleared the virus after she was born, but Boucicault’s health suffered. “I had every infection[one] could have—shingles, herpes, TB,” she says. Friends in France sent her HIV medication, and Boucicault’s health stabilized in six months. She immediately went about founding FEBS.

Three years later Boucicault decided to go public with her status. On a visit to her daughter’s pediatrician, she told him she wanted to speak out about her experience with HIV. At this time the pediatrician helped orchestrate the 1999 radio and TV interviews. Not only has Esther established FEBS but she is also the president of PHAP+ in Haiti.

- **FEBS’ Partner Organizations:**

Housing Works: According to: <http://www.housingworks.org/about/>:



Housing Works is committed to ending the twin crises of AIDS and homelessness. They are one of the largest groups in the US targeted at helping the AIDS community. They believe that all people have the right to a rich and empowering life. Since 1990, they have provided the highest quality services for homeless men, women, and children living with HIV and AIDS in New York City and beyond. Housing Works provides homeless and low-income New Yorkers living with HIV/AIDS and their families with housing, meals, medical care, drug treatment, social support, employment opportunities, and other lifesaving services.

Housing Works is especially committed to serving those who have difficulty obtaining services elsewhere because they struggle with mental illness or chemical dependency. Through political advocacy, Housing Works and its clients fight to ensure that homeless and low-income people worldwide who are living with HIV/AIDS, have access to adequate housing, meals, medical care, drug treatment, social support, employment opportunities and other services fundamental to health and happiness.

Housing Works and FEBS share a common mission of providing care and treatment of disenfranchised people with HIV/AIDS and reducing stigma among those populations. Since 2008, FEBS has received technical and fiscal assistance from Housing Works.

Countering stigma and discrimination, the Alliance started activities in Haiti in 2005 in partnership with Promoterus Objectif Zerosida (POZ), a national non-governmental organization. Prior to forming this partnership, the Alliance, as part of the Health Communication Partnership, had collaborated with POZ and artists affiliated with the AFRICAmerica Foundation on an anti-stigma project.

In the wake of Haiti’s devastating earthquake, Housing Works is collaborating with PHAP+ to deliver supplies to persons living with HIV/AIDS.

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Housing Works and FEBS:

With Housing Works' support, 2008 was a momentous year in the history of FEBS. In June, coinciding with Gay Pride Day, FEBS formed the first gay rights group outside of the Haitian capital of Port-au-Prince. Eighteen gay men gathered in solidarity and shared their experiences of gay Haitian life. At this gathering, members shared stories of discrimination and outright violence.

On November 30, 2008, in anticipation of World AIDS Day, 500 people organized by FEBS, including health ministry officials and United Nations aid workers, marched to call for better HIV/AIDS prevention and treatment in Haiti. Though AIDS marches have taken place in Haiti before, this was the first one to include an openly gay group, and was considered to be the first gay pride march in the Caribbean.

In 2008, Housing Works presented Boucicault with a Keith D. Cylar International Activist Award for her brave and pioneering work as a person living with HIV/AIDS and the founder of FEBS.

According to FEBS:

Since then housing works has helped to empower FEBS by spearheading the Boutik program in which Housing Works ships containers of donated clothing to FEBS to sell for revenue. With this newly generated income, FEBS was able to open the clinic, though not able to maintain it without voluntary doctors.

Housing Works also helps FEBS apply for grants and provides medication for their clients.

Edner Boucicaut: According to: <http://www.lmcmc.com/News/detail?id=28>:

Edner Boucicaut, no relation to Esther Boucicault, works as the Communications Director for Cecosida, a small Haitian organization that promotes HIV issues in the Haitian media. Professionally he is a journalist. Most news is still communicated by radio in Haiti, with a little station operating on almost every other hill. Though he is not HIV positive, Edner is on the Haitian National AIDS Coordinating Committee, ("CCM") and has been indispensable in his support for PHAP+.

According to ARCHIVE Research:

Edner Boucicaut is also the head representative of Housing Works initiatives in Port-au-Prince, Haiti. Edner works very closely with FEBS and has opened two clinics in Port-au-Prince immediately following the earthquake to provide services to PLWHA.

Partners In Health (PIH):

According to Loune Viaud:

Partners in Health has a large presence in Haiti, providing health care to over 2.5 millions Haitians. They have 13 branches around the country – including one in St. Marc – with over 5,000 employees, TB is their main focus and their many staff members are well trained in TB testing. They have a large capacity to carry out research. They have been working with FEBS for 5 years providing them with medicine and supplies. FEBS and PIH are working together to further solidify their partnership, as PIH, Housing Works, and FEBS strive to bring the FEBS' clinic to operational capacity. PIH has been willing to provide staff.

According to FEBS:

Partners in Health has a branch based in St. Marc. They work very closely with FEBS and other similar institutions to provide clients with medicine and social support. They are also working in St. Nicolas, the main hospital in St. Marc, to prevent the transmission of HIV/AIDS from mothers to children.

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This project includes an expansion and renovation for the hospital. They intend to add more rooms to expand their capacity as well as add incubators to the nursery for prematurely born infants. There are currently no incubators in place in St. Nicolas and as a result, many newborns have died.

FEBS has experienced a significant decrease in clientele due to the presence of PIH which is now offering their clients \$50 HT for transportation with each consultation visit. This is not seen as competitive, rather their partnership with PIH is complimentary. PIH doctors visit the FEBS office twice a week for patient consultations.

According to <http://www.pih.org/>:

At its root, PIH's mission is both medical and moral. It is based on solidarity, rather than charity alone. When a person in Peru, or Siberia, or rural Haiti falls ill, PIH uses all of the means at their disposal to make them well—from pressuring drug manufacturers, to lobbying policy makers, to providing medical care and social services. Whatever it takes.

PIH was founded in 1987, two years after the Clinique Bon Sauveur was set up in Cange, Haiti, to deliver health care to the residents of the mountainous Central Plateau. PIH co-founders had been working in the area for years. The Clinic was just the first of an arc of successful projects designed to address the health care needs of the residents of the poorest area in Haiti. In the 20 years since then, PIH has expanded its operations to eight other sites in Haiti and five additional countries and has launched a number of other initiatives.

In 2009 PIH had 11,000 employees working in 49 health centers and hospitals across 11 countries. In Haiti, PIH launched the first neonatal intensive care unit (NICU) in Central Haiti. In Malawi, PIH doubled the number of clinics where it is providing antiretroviral treatment for HIV from two to four, and is constructing a new community hospital in Lisungwi. PIH-Lesotho expands to a seventh remote mountain clinic. In Russia, PIH has helped launch MDR-TB programs in two territories bordering on their long-time base of operations in Tomsk, Siberia. In Boston, PACT has launched a new diabetes care program.

[AMFAR - The Foundation for AIDS Research:](#)



Both organizations are partnering to conduct a pilot study in St. Marc, which, depending on the success, will then be emulated elsewhere; namely in rural parts of the US. The aim of this study is to determine how many men have homosexual preferences but project themselves as heterosexual with nuclear families within the community to avoid being labeled MSM. The study also aims to uncover how many of these men actually are MSM or just men with homosexual preferences. Researchers will be conducting studies door to door.

According to www.amfar.org/Globallink/:

AMFAR works with healthcare workers and AIDS organizations in developing countries to create and implement effective HIV research, treatment, prevention, and education strategies. Current international initiatives are: TREAT Asia, a network of clinics, hospitals, and research institutions working with civil society to ensure the safe and effective delivery of HIV/AIDS treatments throughout Asia and the Pacific; and The MSM Initiative, which supports grassroots organizations in developing countries in their efforts to provide essential HIV/AIDS services for men who have sex with men (MSM). The MSM Initiative is a global effort to reduce rates of HIV infection and transmission among men who have sex with men (MSM) in resource-limited countries.

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Through small, targeted grants to grassroots groups in support of innovative HIV/AIDS services for MSM, amfAR helps expand access to HIV education and prevention services, supports advocacy aimed at increasing funding for prevention and treatment services, and works to end the stigma, discrimination, and violence that threaten the lives of MSM and fuel the spread of HIV/AIDS.

- **FEBS' Funders:**

PALIH- Projet D'Appui a la Lutte contre les ITS/VIH/SIDA en Haiti (Project to Support the Fight against STI/HIV/AIDS in Haiti)

According to FEBS:

PALIH- is a local organization in St. Marc that supports FEBS by providing funding for their projects. PALIH helps to support FEBS' projects and office. They also help provide FEBS' clients with food.



According to: <http://publication.ceci.ca/en/bulletin/omni/articles/PALIH.aspx>:

The Centre de coopération internationale en santé et développement (CCISD) and CECEI have been working in the Artibonite region of Haiti since the beginning of 2003 to implement the Project Supporting the Struggle Against STIs (sexually transmitted infections) and HIV/AIDS in Haiti (PALIH). This project is Canada's answer, in three facets, to the highest rates of HIV/AIDS in the Western hemisphere.

The first facet is to support governance by coordinating different health institutions in the Western coast region. This is the first challenge that Dr. Pierre Dongier, PALIH co-coordinator in Canada, and his team set for themselves. "It is important that the Unités Communales de Santé (UCS), the Direction sanitaire départementale and NGOs work together. When we carried out our pre-feasibility mission in 2001, it became obvious that everyone was doing their own thing," recalls Dr. Dongier. We had to get all these people to sit down together and make sure that everyone was ready to go with the flow and paddle in the same direction. Following a series of regular meetings and communal planning sessions, the PALIH's influence on things is now quite palpable. "This is probably the PALIH's biggest success: having worked on achieving a concerted effort with our partners," says the coordinator.

Then they focused on supporting integrated services, mainly controlling STIs and opportunistic infections related to HIV/AIDS. "Concretely, staff in the field were trained, we had to ensure that prescribed medication was available to treat STIs and we had to make sure that we had precise data for the number of infections." Only two Haitian centres provided antiretroviral treatments for the moment, so given that treatment was not available for all patients, the PALIH team focused on prevention. "People living with untreated STIs are more susceptible to contracting HIV so the first logical step in fighting the virus was to adequately detect and treat STIs," explains the PALIH progress supervisor who goes to Haiti two to three times a year.

Finally, with the support of three Haitian NGOs, the Canadian consortium identified three target groups for which specific initiatives have been implemented: youth, sex workers and people living with HIV. "The goal was to provide these groups with services that coincide more with their realities, to attempt to break down stereotypes, specifically with healthcare workers who treat people in clinics."

Now that financial support has been renewed by Canadian authorities, Phase 2 of the PALIH will begin this year. "Extend the project to UCSs in the North of the region, work with voodoo priests to ensure that traditional medicine has a positive impact on the fight against the virus, and reinforce the gender issue in all projects. These are a number of the issues in this phase that we will be working on from 2006 to 2011," summarizes the PALIH co-coordinator in Canada.

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PEPFAR: The United States President's Emergency Plan for AIDS Relief: According to www.pepfar.gov:



Launched in 2003 by President George W. Bush, PEPFAR holds a place in history as the largest effort by any nation to combat a single disease. In the first five years of the program, PEPFAR focused on establishing and scaling up prevention, care and treatment programs. It achieved success in expanding access to HIV prevention, care and treatment in low-resource settings. In its first phase PEPFAR supported the provision of treatment to more than 2 million people, care to more than 10 million people, including more than 4 million orphans and vulnerable children, and prevention of mother-to-child treatment services during nearly 16 million pregnancies.

Their efforts are to focus on:

Sustainable programs that are country owned and country driven.

Sustainable programs to address HIV/AIDS within a broader health and development context.

Sustainable programs that build upon strengths and increase efficiencies.

UNFPA: United Nations Population Fund: According to FEBS:

UNFPA acts as the middle man between FEBS and PEPFAR. They ultimately receive funding from PEPFAR but do not deal with this organization directly. Instead, they have an MOU with UNFPA to help them achieve access to needed funds.

According to <http://www.unfpa.org>:



UNFPA, the United Nations Population Fund, is an international development agency that promotes the right of every woman, man and child to enjoy a life of health and equal opportunity. UNFPA supports countries in using population data for policies and programs to reduce poverty and to ensure that every pregnancy is wanted, every birth is safe, every young person is free of HIV/AIDS, and every girl and woman is treated with dignity and respect.

The AIDS epidemic is a global catastrophe responsible for over 20 million deaths worldwide, tens of millions of children left orphaned, and some 33 million people living with HIV. Although global HIV prevalence has leveled off, AIDS is among the leading causes of death globally and remains the primary cause of death in Africa. Recent evidence shows that sustained, intensive programs in diverse settings are reducing HIV incidence through behavior changes, such as increased use of condoms, delayed sexual initiation and fewer sexual partners.

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As one of ten co-sponsors of UNAIDS, UNFPA works to intensify and scale up HIV prevention efforts using rights-based and evidence-informed strategies, including attention to the gender inequalities that add fuel to the epidemic.

Within UNAIDS, the Fund takes a leadership role in condom programming and prevention among young people and women, two groups who are increasingly at risk of infection. It also reaches out to other vulnerable populations. Linking HIV/AIDS with sexual and reproductive health care is the overarching strategy for reaching more people cost-effectively and moving towards the goal of universal access to prevention, treatment, care and support by 2010.

Global Fund for AIDS Care: <http://www.theglobalfund.org/en/>



The Global Fund is a unique global public/private partnership dedicated to attracting and disbursing additional resources to prevent and treat HIV/AIDS, tuberculosis and malaria. This partnership between governments, civil society, the private sector and affected communities represents a new approach to international health financing. The Global Fund works in close collaboration with other bilateral and multilateral organizations to supplement existing efforts dealing with the three diseases.

Since its creation in 2002, the Global Fund has become the main source of finance for programs to fight AIDS, tuberculosis and malaria, with approved funding of US\$ 19.3 billion for more than 572 programs in 144 countries. It provides a quarter of all international financing for AIDS globally, two-thirds for tuberculosis and three quarters for malaria.

Global Fund financing is enabling countries to strengthen health systems by, for example, making improvements to infrastructure and providing training to those who deliver services. The Global Fund remains committed to working in partnership to scale up the fight against the diseases and to realize its vision – a world free of the burden of AIDS, TB and malaria.

- **Various Haitian Organizations:**

FORSEF: According to FEBS:

FORSEF is an organization based in St. Marc that provides HIV testing without charge to community residents and also works with local sex workers in St. Marc, providing them education to help reduce the transmission of HIV.

GHEKIO: According to: <http://theuntoldwar.urbanmediawarrior.com/tag/phap/>:



GHEKIO is short for the Haitian Group for the Study of Kaposi's Sarcoma and Opportunistic Infections (in french) and was established in 1992. It was one of the first to study the rise of HIV/AIDS in the developing world.

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According to FEBS:

As GHESKIO is located in Port-au-Prince, FEBS and GHESKIO do not currently have any projects directly together. However they do work together. To “avoid duplication”, GHESKIO does not have a location in St. Marc, since Partners in Health is based there and both organizations do similar work. If FEBS’ clients go to Port-au-Prince, GHESKIO will assist them and when clients are in St. Marc FEBS is charged with their care.

According to: <http://www.gheskio.org/>

GHESKIO establishes refugee camp and field hospital for thousands of earthquake survivors and continues AIDS care GHESKIO CENTER in Port-au-Prince, Haiti was the first institution in the world dedicated to the fight against HIV/AIDS. GHESKIO has provided continuous medical care in Haiti since 1982 - never once shutting its doors or charging fees. Since the January 12th, 2010 earthquake GHESKIO is providing humanitarian assistance and emergency care to those affected by the disaster and continues to provide life-saving medications to people with HIV/AIDS.

Haven: According to FEBS:

FEBS does not have a relationship with Haven.



According to ARCHIVE Research:

Haven is an NGO that aims to build and reconstruct houses throughout Haiti by training local contractors and mobilizing community members. ARCHIVE intends to work with Haven to create HIV/AIDS housing workshops with local health experts and to inspire PLWHA to action by fostering open discussion of controversial topics such as homosexuality.

According to Haven: <http://www.havenpartnership.com/>:

Leslie and Carmel Buckley founded Haven in late 2008. As a successful businessman and co-founder of the Digicel mobile phone company, Leslie’s business interests brought him to Haiti for the first time in 2004. He was horrified by the level of poverty that he saw. He decided to do something to help and set up Haven with an initial donation of one million euro.

Haven is a house and community building charity, working solely in Haiti, since the first sod was turned in 2009. By training, up-skilling and employing local Haitian people throughout the year, Haven is creating jobs in a country where unemployment stands at approximately 80% and opportunities are few. Twice a year Haven’s Haitian workforce is joined on site by a team of volunteers who take part in an intensive Build it Week. While in Haiti, volunteers live and work on the building site in extremely basic conditions.

Since the earthquake that hit Haiti on January 12th, 2010, Haven has been working in the capital, Port au Prince, providing emergency relief to those most affected by the disaster. Haven has been working as part of the Water and Sanitation cluster, and the Shelter cluster, providing hygienic sanitation facilities in the form of trench like latrines, and protection from the elements through the distribution of thousands of heavy tarpaulins to those living under sheets and pieces of cardboard. They are also involved with the construction of Community Shelters in 15 campsites.

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Touch Ministries: According to: <http://touchstmarchaiti.blogspot.com/>:

Touch Ministries has been in St Marc Haiti nine years. El Shaddai Learning Center is a Christian based English school for Haitian children, giving them an American education. They are not in the business of education but rather are a Christian organization. Their intention is to give kids a future and a hope. They rent two buildings for their school program and started with five children. To date there are 70. They give over 5,000 meals to children a month, and feed over 1,000 children at Christmas. They have a Bible school in Montrouis that where teaching is conducted weekly. Their second graduating class is May 29th, 2010.

Youth with a Mission: According to: <http://www.ywamhaiti.org/>:



YOUTH WITH A MISSION is an international movement of Christians working to help make a difference in a needy world. Founded in 1960, it is now one of the largest interdenominational and international Christian ministries, with about 16,000 volunteer staff (and thousands more affiliated workers) based in over 1,000 locations in over 149 countries.

Youth With A Mission established a permanent facility in St. Marc, Haiti in 1991 after five years of planning and a variety of short-term ministry projects in the country. Emphasizing YWAM's three-fold ministry of training, evangelism, and mercy ministries, their staff, under the leadership of Terry Snow, provides outreach opportunities for teenagers and adults who want to participate in missions and learn more about God's call to evangelize the world.

Evangelism is an integral part of both training and mercy ministries. Drama, music, performing arts and sports camps are among the creative tools YWAM staff use to share their faith in a way that makes sense to their audience—whether it be teenagers, elderly refugees, or an unreached people group. YWAM also engages in church planting, in coordination with churches and denominations, or on its own among people groups who do not have churches among them yet.

Training and Education aims to better equip Christians to serve others in everything from agriculture and health care, to drug rehabilitation and biblical counseling. Through the mission's degree-granting University of the Nations (see also the Kona Campus—largest UofN campus), staff can study in specialized areas such as science and technology, communications, the humanities, and Christian ministry.

POZ Haiti: Promoteurs Objectif Zeriosida; According to: <http://www.aidsalliance.org/linkingorganisationdetails.aspx?id=31>:

From 2005-2008, POZ worked to strengthen and raise the profile of the newly formed network of Haitian people living with HIV. This helped the network to better represent its constituents and encourage them to actively participate in HIV program planning, decision making and advocacy. POZ operates five sites in Haiti and offers guidance, counselling and support to over 2000 people living with HIV. POZ Haiti reached 2500 people through HIV prevention activities in 2008. They also trained 121 people to provide direct HIV/AIDS services.

The HIV epidemic in Haiti is worsened by extreme poverty, low levels of education, poor quality and availability of health and social services, and chronic political instability. While HIV prevalence has steadily fallen in major cities such as Port-au-Prince, it has not declined in Haiti's rural communities, where protective behavior remains the exception not the norm.

HIV-related stigma and discrimination have a devastating effect. People living with HIV are routinely subjected to violence, denied access to medical services and social support, and abandoned by friends, family, and neighbors. Such treatment can lead to loss of livelihood and human rights violations.

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To counter, stigma and discrimination, an Alliance started activities in Haiti in 2005 and included such members as the Health Communication Partnership and the AfricaAmerica Foundation. This supported 73 people living with HIV to analyse the causes and consequences of HIV/AIDS-related stigma and give support to their peers. One particularly important activity was the documentation of human rights abuses, which were then reported by the national media.

In June 2008 POZ began a project funded by the UK's Big Lottery Fund (BLF) to increase uptake of HIV prevention, care and treatment services by addressing HIV-related stigma and discrimination with local leaders, health providers and members of communities. The BLF project has created local groups of 'anti-discrimination champion leaders' who develop strategies to resolve reported cases of stigma and discrimination. It has worked with health services to develop action plans for improving their friendliness to people living with HIV, and runs a communication campaign and telephone line to report discrimination cases. The Alliance has also adapted resources for community service providers to help orphans and vulnerable children in Haiti, with support from the USAID-funded Health Communication Partnership of Johns Hopkins University.

AIDS Alliance: According to: <http://www.aidsalliance.org/homepagedetails.aspx?id=1>



The AIDS Alliance envisions a world in which people do not die of AIDS. Their aims are preventing AIDS transmission, improving access to comprehensive HIV prevention, care, support, and treatment services. Their goals are to support communities through this process and are particularly interested in those most vulnerable and marginalized.

PHAP: According to: <http://www.cdc.gov/phap/>:



The Public Health Apprenticeship Program (PHAP) is a competitive, two year, paid fellowship within the Centers for Disease Control and Prevention (CDC). PHAP provides opportunities for promising future public health managers to gain broad experience in the day-to-day operation of public health programs. Upon completion of a 2-year apprenticeship delivering frontline program services in state or local health departments, apprentices will be qualified to compete for entry-level career positions as CDC public health advisors and equivalent positions in public health operations at the local and state levels.

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PHAP+: According to: http://www.amplifyyourvoice.org/u/AFY_Ratna/2010/4/7/After-the-Earthquake-HIVAIDS-in-Haiti

PHAP+ is a coalition of 12 community-based AIDS organizations led by Haitians living with HIV/AIDS, giving the organization the special ability to empower Haitians with HIV/AIDS to advocate for themselves and to extend the reach and spread of AIDS treatment and support services.

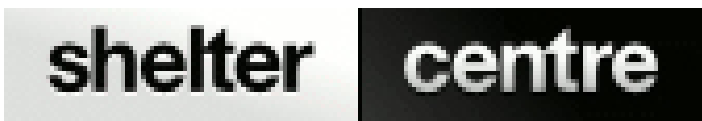
As an organization, they were able to open two new primary care clinics for Haitians living with HIV/AIDS and their families since the earthquake. The clinics are located in Port-au-Prince and St.-Marc, where 50,000 Haitians have fled since January. In addition to opening the new clinics mentioned above, they were also able to provide staffing and administrative support to help re-open a previously destroyed family health clinic in Port-au-Prince. Lastly, and maybe most importantly – this coalition is putting pressure on international governments as well as non-governmental organizations in Haiti working with AIDS-related relief to create a workable plan with realistic goals for helping Haitians living with HIV/AIDS

International Committee of the Red Cross: According to: <http://www.icrc.org/eng/>:



The ICRC is an independent, neutral organization ensuring humanitarian protection and assistance for victims of war and other situations of violence. The ICRC has a permanent mandate under international law to take impartial action for prisoners, the wounded and sick, and civilians affected by conflict. With its Headquarters in Geneva, Switzerland, the ICRC is based in around 80 countries and has a total of more than 12,000 staff. In situations of conflict the ICRC coordinates the response by national Red Cross and Red Crescent societies and their International Federation.

Shelter Centre: According to: <http://www.sheltercentre.org/>:



Shelter Centre is a non-governmental organisation registered in Switzerland which supports the sector of humanitarian operations that responds to the transitional settlement and reconstruction needs of populations affected by conflicts and natural disasters, from the emergency phase until durable solutions are reached.

CIAT: Comite Interministeriel d'Aménagement du Territoire; Haiti Demain. According to CIAT:

CIAT is a French administrative body charged with preparing political plans for the movement and development of a country or land plan. It is an administration charged with putting in place development plans. They have created a national plan for Haiti's growth and evolution after the earthquake entitled: Haiti Demain.

Health Communication Partnership: According to: www.globalhealthcommunication.org/projects

The Health Communication Partnership (HCP) funded by USAID, promoted healthy societies by advancing the field of health communication, using proven and evidence-based strategies, and developing new approaches. At both individual and societal levels, the project advocated for supportive environments, effective health services, and health literacy. It focused on three domains of communication intervention; individuals and communities, health services, and social and political environments. AED led HCP's programs in Ethiopia, Honduras, and Madagascar, and one of the projects most innovative youth strategies, Sports for Life, to combat HIV/AIDS.

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AfricAmerica Foundation: According to: www.aashf.org:

The African American Self-Help Foundation was founded in 1981 on the principles that each life is of infinite value to God and that we have both the opportunity and the responsibility to affirm that value with action. For the past two and a half decades, AfricAmerica Foundations has been working to help others overcome difficulty and achieve lives of dignity and value. Their focus is on children of African descent. And they work with such groups as AIDS orphans, education, community health and development. They are a member of the Samaritan Group, a coalition of organizations on four continents, all of which share a common passion to save the world - one child at a time. They frequently collaborate on projects with other organizations.

AIDG: Appropriate Infrastructure Development Group: According to: <http://www.aidg.org/mission.htm>:



One in 3 of us, roughly 2 billion people do not have basic services such as electricity, sanitation and clean drinking water. Access to these services is essential to breaking the cycle of poverty in developing countries. The Appropriate Infrastructure Development Group (AIDG) helps individuals and communities get affordable and environmentally sound access to electricity, sanitation and clean water. Through a combination of business incubation, education and outreach, they help people get technology that will better their health and improve their lives.

Together with community partners SOIL/SOL and AFAPA, AIDG constructed a community dry composting latrine in the Petite Anse neighborhood of Cap Haitien, Haiti. The public toilets, the first of many planned, will serve 300 people in the area. In an area prone to flooding, this type of latrine can significantly reduce the contamination of ground water.

Local and Departmental Government Agencies:

St.Marc City Government Agencies: According to FEBS:

- The Municipal Counsel consists of three representatives, the Mayor and two “adjoints” or assistants. The Mayor is the first citizen of the municipality. The Deputee is in charge of the law.
- Les Casec (Consil d’administration de Section Comunal) are 3 persons in charge of each of the 6 sections within the city of St. Marc. The 3 persons consist of the President and 2 assistants. The six sections of the city include: Deluge, Goyavier, Haute de St. Marc, Bocozele, and Porte T.

The Vice Delegate of St. Marc corresponds with the Prime Minister of Haiti.

The Unité Communal de Santé (Comunal Health Unit) oversees all the health institutions in St. Marc (i.e. PIH, FORSEF, etc.).

Departmental (Bas Artibonite) Government Agencies:

DDSA

- **Haiti’s National Level Government Agencies**: According to Wikipedia:

The Politics of Haiti take place in a framework of a semi-presidential republic, pluriform multiparty system whereby the President of Haiti is head of state, directly elected by popular vote. The Prime Minister acts as head of government, and is appointed by the President from the majority party in the National Assembly. Executive power is exercised by the President and Prime Minister who together constitute the government. Legislative power is vested in both the government and the two chambers of the National Assembly of Haiti. The government is organized unitarily, thus the central government delegates powers to the departments without a constitutional need for consent. The current structure of Haiti’s political system was set forth in the Constitution of March 29, 1987.

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- **Executive Branch:**

Haiti's executive branch is composed of two parts, the presidency and the government. In this sense, "government" refers specifically to the portion of the executive branch outside of the presidency, and not to Haiti's political system as a whole.

The president is the head of state and elected by popular vote every five years. He is assisted by his cabinet, which must be approved by the National Assembly. Jean-Bertrand Aristide had been in office since February 7, 2001, having received 92% of votes in the elections of 2000. On February 29, 2004, President Aristide reportedly "voluntarily relinquished" the presidency. However, Aristide claims he was pressured to accept the demands of the rebels by the United States and France. Alternatively, President Aristide claims that he was kidnapped.

Following Aristide's departure, Boniface Alexander became the de-facto interim president. Alexandre, as Chief Justice of the Supreme Court, was in line to succeed the President in case of death or resignation, according to the 1987 Constitution of Haiti. The current president is Rene Preval, who received 51 percent of the votes in the 2005 elections.

Haiti's government is composed of the Prime Minister, the other Ministers, and the Secretaries of State. The prime minister, the head of government, is appointed by the president and ratified by the National Assembly. He appoints the Ministers and Secretaries of State and goes before the National Assembly to obtain a vote of confidence for his declaration of general policy. The Prime Minister enforces the laws and, along with the President, is responsible for national defense. The last Prime Minister, Jacques-Edouard Alexis, entered office in 2006 and was removed in April 2008. Michele Pierre-Louis received approval to become the next Prime Minister from both houses in July.

Ministries: (Partial List)

- Ministry of Agriculture, Natural Resources and Rural Development
- Ministry of Commerce and Industry
- Ministry of Finance and Economy
- Ministry of Planning and Foreign Aid
- Ministry of Public Health and Population
- Ministry of Social Affairs

Legislative branch:

The bicameral National Assembly of Haiti (Assemblée Nationale) consists of the Chamber of Deputies (Chambre des Députés) and the Senate (Sénat). The Chamber of Deputies has ninety-nine members, who are elected for four-year terms. The Senate consists of thirty seats, one third elected every two years. In the popular elections of 2000, twenty six seats were won by Aristide's Lavalas Family Party.

Judicial branch:

The legal system is based on the Roman civil law system. Haiti accepts compulsory jurisdiction of the International Court of Justice. There is a Supreme Court (Cour de Cassation), assisted by local and civil courts at a communal level. Through its Administration of Justice (AOJ) program, the United States has helped support the independence and competency of Haiti's judicial branch through the training of hundreds of Haitian judges and prosecutors, particularly at the Magisterial Training School established in 1995.

- **Other Organizations:** <http://familiesandwork.org/site/support/HaitiRelief.html>, http://www.sheltercentre.org/sites/default/files/Shelter%20Centre%20Annual%20Report%202008_0.pdf,