This past summer, the Botswana Ministry of Health, together with the Botswana-Harvard AIDS Institute Partnership (BHP), opened the first HIV vaccine trial conducted in the southern African region. To date, over 60 Botswana citizens have stepped forward to volunteer and five have been enrolled in the trial at the Princess Marina Hospital in Gaborone, Botswana. There will be fourteen HIV-negative volunteers enrolled in Botswana, and simultaneously twenty-eight will be enrolled in the United States at sites in Boston and St. Louis.

BHP Chairman Dr. Max Essex, principal investigator for the study, said, “The government of Botswana deserves recognition for the creation of the BHP laboratory and the capacity it has built with trained staff, state-of-the-art equipment, and Botswana-specific research. Botswana stands ready to conduct not only this study, but other important HIV research. It is important to stress that the road to a successful vaccine is long and that this Phase I trial is a first step for Botswana on that road.”

In this study, researchers examine the body’s immune response to the experimental vaccine and the vaccine’s side effects to determine its safety at three different doses. Each volunteer is followed for at least eighteen months, during which time he or she will be injected four times. Thirty-six volunteers will receive the experimental vaccine and six will receive a placebo.

To qualify for the trial, volunteers must be between the ages of 21 and 40, in general good health, HIV negative, available for 18 months, not pregnant, and not planning to become pregnant during the study. The BHP is continuing to screen potential volunteers for participation in the trial.

The experimental vaccine (developed by Epimmune – a company in San Diego, California) is composed of non-infectious components of HIV’s genetic material. “These components do not cause infection, so there is no chance that trial volunteers could get HIV infection or AIDS from receiving the experimental vaccine,” said Dr. Joseph Makhema, BHP co-director and senior clinical research manager.

Partners in the trial’s design and implementation are the Ministry of Health (Botswana), the Harvard AIDS Institute, the National Institutes of Health (U.S.), the Harvard Medical School, the HIV Vaccine Trials Network, St. Louis University, and Epimmune. Preparations for HIV vaccine trials in Botswana were aided by the Ministry of Health-appointed National HIV Vaccine Committee, and by a Community Advisory Board which guided the research team and ensured that research-related community concerns were addressed.

To learn more about the trial, visit http://www.bhp.org.bw.
An Interview with Ardath Rodale

With the loss of her husband in a car accident, the death of her son David from AIDS and multiple bouts with cancer, Ardath Rodale has certainly had more than her fair share of suffering in her life. Yet, her loving and radiant spirit has given her an indomitable knack for turning the tragedies of her personal life into positive change for the world. She has worked tirelessly as an AIDS activist and as a member of the International Advisory Council of the Harvard AIDS Institute. She is the Chairman of the Board of Rodale, Inc., the leading publisher of magazines and books on healthy living including “Prevention”, “Men’s Health”, and “Organic Gardening” magazines, and “The South Beach Diet” book.

Spotlight: In your book, “Climbing Toward the Light”, you write movingly about your son David’s struggle with AIDS. Can you tell us more about David, and how his life changed your view of HIV and AIDS?

AR: David was my third child, my first son. He was really a best friend. He was a musician, composer, artist, master weaver, gourmet cook, and one of the founding members of the International Electronic Networking Organization – a forerunner of the Internet in the early 1980s. He was a light in my life. He was 30-years-and-two-weeks when he died from AIDS in 1985 after being ill for only four days. None of us, including David, expected that he would die.

I decided that the best way I could ensure his life would make a difference in other people’s lives was to tell “A Mom’s Story.” I spoke to all the area colleges and universities, high schools, middle schools, churches, and civic groups. I believe I was one of the first women activists reaching out to help people understand. People needed to know that those who have AIDS are no different than any other person. Their lives need to have dignity, and my son, David, certainly had dignity.

Spotlight: The AIDS epidemic has changed so much since David’s death in 1985, what are the major changes you’ve seen? How have these new challenges changed the message you communicate about AIDS through your writing in “Prevention” and other publications?

AR: In the beginning, people in the United States were scared, and my message was to help people understand the value of life – to take care of themselves.

It was tremendously amazing when I gave my speeches in high schools, you could have heard a pin drop. Children and teenagers cried and they would come up afterward and say thank you for telling me this. Young people told me stories about their families and people close to them dying with AIDS. At one junior high school, I talked to a whole group of girls. I asked, “How many of you know someone who died of AIDS?” Nearly every child knew someone. A third of them had lost a family member from AIDS. Two in the class had lost both father and mother. It’s not only in Africa that this is going on.

I feel that in the past number of years there has been less focus on AIDS and people have become lax, especially teenagers, and I’m scared for them. Today many people have no personal story or connection with someone with AIDS, so it’s hard for them to imagine. It’s like speaking to them about something they know nothing about (feelings, life, illness, death).

Spotlight: What message do you have to give for those who want to help with the campaign against HIV and AIDS?

AR: Talk about it! Talk about it! Talk about it! Talk to everyone you know. Encourage others to talk about it. Encourage parents to talk to their children. Encourage children to talk to their parents. This is the way we can spread the word and keep AIDS at the top of our health priority concerns.

Take an active role in AIDS organizations. Be on the front line of the battle so that you can see the human side of this vicious disease. It’s not just about numbers and statistics!

Each of us also needs to develop compassion and encourage self-esteem in others. Yes, we need to find a cure but at the same time, we need to educate people to reach out to those who are suffering. We need the personal touch – stories that speak of a parent’s love for their child, a child’s love for their sibling or friend, a community’s love for one of its members. We need stories that celebrate life. Reach out to hold a hand. My heart beats with your heart.

I am very proud to be part of the International Advisory Council. We all need to work together to bring healing to the world.

How You Can Help...

The Institute’s efforts depend upon your support. Contributions are tax deductible. To make your contribution to the Institute online, please visit the Harvard School of Public Health giving page at http://www.hsph.harvard.edu/give/.

Checks can be made payable to the Harvard AIDS Institute and sent to: Harvard AIDS Institute 651 Huntington Avenue Boston, MA 02115

To support the Institute through gifts of securities, bequests, and naming opportunities, please contact:

Michael Voligny (617) 384-8980 email: mvoligny@hsph.harvard.edu
“Access to Care: Challenges” was the theme of the 13th biannual International Conference on AIDS and Sexually Transmitted Infections in Africa, which was held in Nairobi, Kenya this past September. Over 7,000 researchers and health care workers convened to examine comprehensive care and treatment strategies for HIV and AIDS, existing socio-economic infrastructures, health care policies, training, research, and prevention programs.

As programs providing antiretroviral treatment have become more numerous across Africa, concerns about the costing and cost effectiveness of these programs are critical considerations in program planning. The Harvard AIDS Institute sponsored a roundtable discussion to investigate issues related to costing and cost-effectiveness research to scale up antiretroviral treatment. Representatives from Botswana, Nigeria, Senegal, South Africa, and Tanzania offered their regional and local perspectives and expertise to the general questions about the various HIV care delivery models, research methodologies and procedures, and their relative costs.

Dr. Richard Marlink, of the Harvard AIDS Institute, recently received a three-year award from the National Institutes of Health to study the cost effectiveness of antiretroviral therapy for HIV and AIDS in Botswana. The study will estimate the long-term financial resources that would be required for sustained provision of antiretroviral therapy through the national health system, and the potential benefits derived from the program. The collaborative effort for this study is comprised of researchers and economists at the Botswana Ministries of Health and of Local Government, in addition to Dr. Ronald Bosch, senior research specialist at the Center for Biostatistics in AIDS Research and Dr. George Seage, associate professor of Epidemiology, both at the Harvard School of Public Health.

China Project
The China Project, headed by Dr. Yichen Lu of the Harvard AIDS Institute, partnered with the Fudan University School of Public Health and the United States Consulate General to hold its first AIDS Medical Training Course in Shanghai from October 20-24, 2003. The curriculum, presented by a team of Harvard-affiliated physicians, is based on the KITSO AIDS Training Program curriculum, which is used by the Institute in Botswana. The sixty-five trainees included physicians and public health officials from twelve Chinese provinces. The training program is supported by a grant from the Office of AIDS Research at the National Institutes of Health (NIH). The China Project will work with trainees to organize similar trainings in their respective agencies.

Enhancing Care Initiative
In June, the Enhancing Care Initiative’s KwaZulu-Natal AIDS Care Team convened a stakeholders’ meeting at the Nelson R. Mandela Medical School at the University of Natal in Durban, South Africa. Team members discussed the recently initiated costing study to evaluate various models of care for rolling out HIV and AIDS treatment in KwaZulu-Natal Province. Also discussed were implementation plans for the $72 million grant from the Global Fund for AIDS, Tuberculosis, and Malaria awarded to the KwaZulu-Natal Enhancing Care Initiative. Dr. Richard Marlink of the Harvard AIDS Institute and Sofia Gruskin, Director of International Health and Human Rights at the Francois-Xavier Bagnoud Center for Health and Human Rights, attended the stakeholders’ meeting.

AIDS Prevention Initiative in Nigeria
The AIDS Prevention Initiative in Nigeria (APIN) recently hosted a one-day symposium at the 13th International Conference on AIDS and STIs in Africa in Nairobi, Kenya. Various research topics related to HIV and AIDS in West Africa including surveillance and epidemiology, virology, prevention of mother-to-child transmission of HIV, treatment programs, and vaccine initiatives were addressed. In support of West Africa’s efforts to gain control of the HIV epidemic, researchers are modeling their approach on a long-term collaboration among West African nations, such as Nigeria and Senegal (where HIV infection rates have been lower than those of the rest of the continent for more than a decade) and research institutions in the United States.

To learn more about these and other research and intervention programs visit: http://aids.harvard.edu/programs/.

Sign up for free email updates!
Sign-up to receive free email updates from the Harvard AIDS Institute. Simply send an email to hai@hsph.harvard.edu to receive electronic news and details about upcoming events.
### Upcoming Institute-related Events

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<tr>
<td>December 2-5, 2003</td>
<td>8th World Congress on STI/AIDS, Punta del Este, Uruguay (AIDS Prevention Initiative in Nigeria)</td>
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<tr>
<td>December 8-11, 2003</td>
<td>6th International Home and Community Care Conference for People Living with HIV/AIDS, Dakar, Senegal (Harvard AIDS Institute)</td>
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For more information on these events visit: [http://aids.harvard.edu/conferences_events](http://aids.harvard.edu/conferences_events)

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**South Africa's Plan to Begin Public Sector Treatment for HIV and AIDS**

With an estimated 5.3 million people living with HIV in South Africa, the country is faced with a public health crisis with profound societal and economic implications. Steps to address this crisis have begun with the Minister of Health, Dr. Tshabalala-Msimang, who has been commissioned to assemble a National Task Team to develop an operational plan for an antiretroviral treatment and care program. Although South African experts constitute this team, Dr. Richard Marlink, Dr. Bruce Walker, and other Harvard experts have served as consultants to this significant undertaking. Dr. Marlink notes “South Africa is now planning to begin antiretroviral treatment for those in most need: the poor living with HIV. It’s extremely exciting to witness the new hope these plans are now bringing to the front line clinics.”