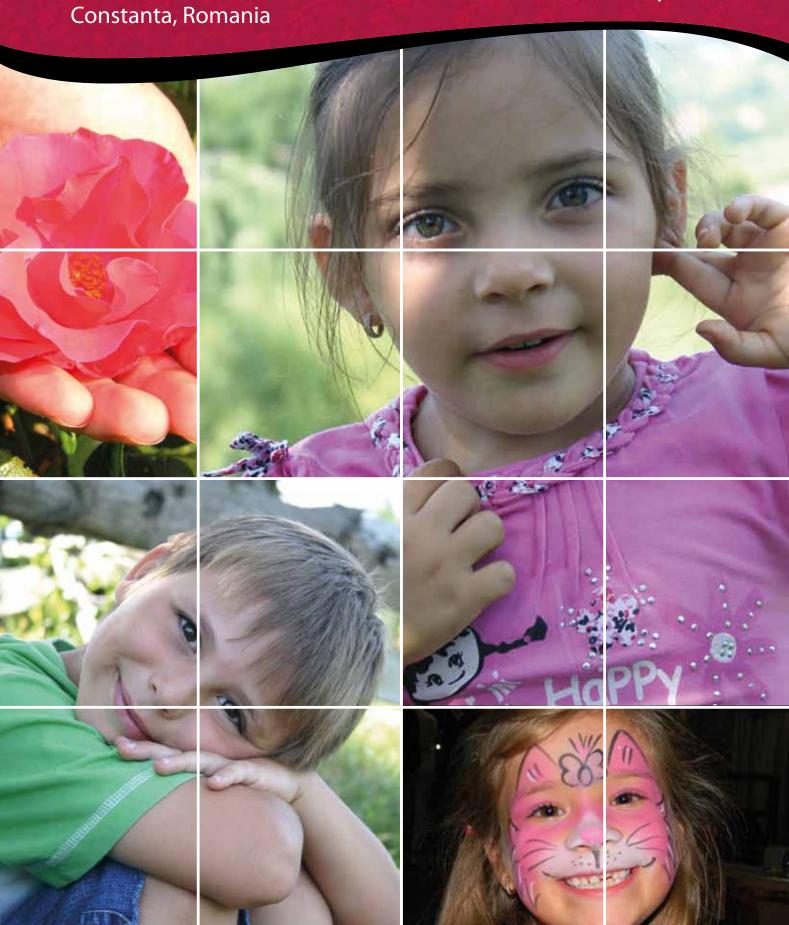
BIPAI Baylor International Pediatric AIDS Initiative

2011 Annual Report



Our Vision

To live in a stigma free community, able to stop transmission of serious illnesses, such as HIV, hepatitis, tuberculosis and sexually transmitted diseases

Our Mission

To help the community develop efficient services for prevention and care of infectious diseases

The Foundation's purpose is to create a healthier community, where infectious diseases such as HIV, hepatitis, tuberculosis and sexually transmitted diseases can be stopped or prevented. In this respect, the Foundation will work with the community in order to optimize prevention, care, treatment and control over the transmission, prevention and risk reduction of these infections.

The current main directions of action are:

- ★ Prevention of infectious diseases (HIV infection, hepatitis B and C, tuberculosis and STDs)
- ★ Testing and screening services for HIV, hepatitis, TB and STDs
- ★ Direct treatment for conditions related to the above diagnosis in Baylor medical offices (TB office, Ob/Gyn office, dental office)
- ★ Ensuring access to other government sustained treatments for infectious diseases through public—private partnerships or private-private partnerships
- ★ Activism and youth involvement

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Help Save Lives!	

Contributions:

Ana-Maria Schweitzer, Ştefania Mihale, Nancy R. Calles, Monica Frangeti, Ruth SoRelle, Georgiana Anghel, Raluca Roman, Dan Crăciun, Laura Stroe











Sending Care Abroad Can Help Those Back at Home



As physician-in-chief of Texas Children's Hospital and chair of the Department of Pediatrics at Baylor College of Medicine, I am firmly committed to this community and cherish my role in helping to ensure that our children have access to health care second to none. And it is through my service to our community that my head - and my heart - have also led me beyond this city and state to the other side of the globe and some of the world's poorest and least fortunate children and families.

I am often asked: "Why do you expend time, effort and money helping those across the globe when there are so many children to take care of right here in our own backyard?" For me, the answer is simple. Building programs to deliver life-saving medical care and treatment to children worldwide is an expression of commitment and compassion not just for our own children, but for all of the world's children. Just as the knowledge, skills and judgment I have acquired through my work at Texas Children's Hospital can be applied to my work in Africa, so too does my work there enhance my ability to deliver the highest quality medical care to children here at home.

For instance, over the past 15 years I have led the development of the world's largest HIV/AIDS treatment program. The Baylor International Pediatric AIDS Initiative (BIPAI), part of Texas Children's global health initiatives, has grown from one pediatric AIDS clinic in Romania to a network of operations stretching across southern and East Africa. BIPAI has saved thousands of lives, reduced stigma and discrimination and restored hope to whole communities. My work with BIPAI has made me, and many others, better physicians. I have learned how to diagnose disease using only my hands, eyes and ears, how to deliver medical care under the most challenging conditions, how to improvise and how to forge health care partnerships. I have learned how to talk to people who are not only scared for their lives but also frightened of me and the tools that I hold. And I have learned how to turn a handful of health professionals and a modest building with virtually no equipment and only a few medications into a thriving medical clinic that provides a lifeline to thousands of sick children.

We now have more than 100,000 HIV-infected children and families in our care, about double the number of HIV-infected children living in the U.S., Canada and Western Europe combined. And while HIV/AIDS is still at the top of our global health priority list, we are expanding into other areas too.

The clinics, training programs and partnerships we have built throughout sub-Saharan Africa provide the infrastructure and capacity to tackle a multitude of other serious and life-threatening diseases that include malaria, tuberculosis and noncommunicable diseases like sickle cell disease and cancer.

But you still may be wondering what all of these problems that are so far away have to do with those of us here in Houston.

From an ethical perspective, it can easily be argued that we have a duty to help alleviate needless human suffering wherever and whenever we can. But there is more to it than that. While we often associate global health concerns with places and people far away, we know all too well that there can easily be direct, domestic effects as a result of poor health abroad. Americans witnessed this first hand during the SARS epidemic of 2002 and the swine flu epidemic of 2009. Those two

outbreaks proved to be very real reminders of how quickly the world can seem to shrink when an epidemic virus arises on the other side of the globe.

Beyond direct health concerns, there are political implications for our nation in global health concerns as well. In 1995, the CIA issued a study of variables associated with the collapse of nations in the late 20th century in order to better predict future threats to America's security. The single most powerful predictor of collapse turned out to be a high infant mortality rate. Since then, we have seen examples of how militarily weak countries can still impact America's security and well-being.

There are enormous economic implications for nations that cannot afford to treat their sick, as well as for those who hope to partner with them. When trade opens up between developing and developed countries, wealth can expand in both directions and enrich all participants. Opportunities for trade and economic prosperity are stymied by poor health and poor health care.

Big business gets it. As one of the world's leading energy companies, Chevron understands the impact global health problems can have on the economy and is dedicated to solving these issues. The company recently pledged \$6 million over five years to help expand Texas Children's Global Health Corps, a program that recruits and traiwns talented pediatricians and family doctors for two-year terms of service abroad, providing medical care and treatment to thousands of children and families and training local health professionals to build capacity for pediatric health care that is currently lacking.

This investment comes at a critical time in the campaign for global health as the U.N. warns that recent successes may be compromised by budget cuts from supporting countries. The U.S. is a leader in the fight against HIV/AIDS, but there is much more that can be done. Specifically, it is essential to support programs that train doctors, create infrastructure and build health systems. Investments such as Chevron's offer great potential for developing systems that can better meet the health care needs of poor communities worldwide, now and in the future.

The world has more than 7 billion people, and I realize we can>t save them all. But I have seen firsthand in some of the poorest places on the planet the lifesaving power of modest investments in health care infrastructure and health professional capacity. A better future for all citizens of the world will certainly mean a better future for our own children. Who doesn't want to invest in that?

Mark W. Kline, M.D. BIPAI President

J.S. Abercrombie Professor and Chairman Ralph D. Feigin Chair Department of Pediatrics Baylor College of Medicine

> Physician-in-Chief Texas Children's Hospital

BIPAI has saved thousands of lives, reduced stigma and discrimination and restored hope to whole communities. We now have more than 100,000 HIV-infected children and families in our care, about double the number of HIV-infected children living in the U.S., Canada and Western Europe combined. And while HIV/AIDS is still at the top of our global health priority list, we are expanding into other areas too.

Letter from the Abbott Fund



My first visit to Constanta, Romania in September 2000 seems like yesterday in many ways. My most vivid memory is of meeting children living with HIV that needed support in so many ways and yet were cheerful and full of hope for a better tomorrow. They were lacking a clinic where their medical and related needs could be fully addressed. Several of the HIV-positive children were living in the hospital because they had been abandoned. The pediatric ward at the Infectious Disease hospital was in disrepair. To many observers these challenges seemed overwhelming.

While there was so much that needed to be done that did not intimidate Baylor College of Medicine's Dr Mark Kline and his team in Houston or the Infectious Diseases' Hospital's Dr Rodica Matusa (and later under the leadership of Ana-Maria Schweitzer) and her team in Constanta. In fact, it was a task that they were willing and eager to take on. This can-do spirit lead the Abbott Fund to engage the Baylor College of Medicine as its first grantee in its first-ever international grant program then called Step Forward for the World's Children (later called the Abbott Global AIDS Care Program). We wanted to be part of the solution to these daunting challenges and, ideally, create a model program that could be replicated by others worldwide.

Therefore, when I was in Constanta on April 6 of 2011 celebrating the 10th anniversary of the Baylor-TCH-Abbott Fund Children's Clinical Center of Excellence, I was in deeply moved to see how far the program has gone from its humble beginnings ten years earlier. The most profound moment for me was to see how so many of the "children" from 2000 had become active and healthy young adults. These were the same children that some people said would never survive through their childhood. Dr Kline said then and says now they can expect to lead full and productive lives.

Working together with the Baylor International Pediatric AIDS Initiative (BIPAI) teams in Houston and Constanta, the Infectious Diseases Hospital, national and local leaders, other donors and family and friends we celebrated these renewed and enriched lives. We also marveled at the how the clinic (with a critical start up grant from the Sisters of Charity) is still providing services to people living with HIV that go beyond HIV care to OB/GYN, dental, and addressing a variety of other health challenges. We proudly looked back at the major renovation of the Infectious Diseases Hospital's pediatric ward that enhanced the lives of children under their care. We fondly recalled the establishment of the Flower House for abandoned children with HIV and the more recent new apartments built with Habitat for Humanity on the same grounds for young adults who could now live more independently.

As impressive as all of the accomplishments of the program are in Romania are, the fact that the Constanta model program was replicated around the world — just as Dr Kline promised it would be back in the fall of 2000 — is even more breathtaking. The Baylor Network of clinics in Botswana, Lesotho, Malawi, Swaziland, Tanzania and Uganda — supported by many outstanding donors - are now providing high quality care and treatment and support services to more than 100,000 children and young people. This is an amazing outcome considering the initial number of patients in Constanta was only 700! And now BIPAI is one of four programs under Dr Kline's leadership at the Texas Children's Hospital Global Health Initiative that also covers sickle cell, cancer and neglected diseases — truly remarkable!

In addition to the remarkable growth of the program, there are also some key milestones for Abbott and the Abbott Fund and our support of BIPAI. Baylor is our longest and largest grantee. We have invested more than \$50 million (half in cash and half in the value of our product donations) in support for the Romania and Malawi programs to the core Network operations itself. We are so proud of this long and fruitful partnership and friendship. But the one thing we are most grateful for is that the young HIV-positive children of Constanta are now living healthy and full lives and that their counterparts in the other programs worldwide will do the same. That is a legacy we can all celebrate.

Sincerely, Jeff Richardson Vice President, Abbott Fund

Compassion Creates Change

What a privilege it is to be able to write the forward of Baylor International Pediatric AIDS Initiative (BIPAI) Romania's 2011 annual report! What a thrill it is to share our successes with you, our struggles and our learnt lessons. And what a responsibility it is to go beyond projects and reports and really illustrate the heart of this organization and the impact of our serving real patients and communities!

The highlight of the year was that on April 6th 2011, BIPAI marked the 10 - year anniversary of the first AIDS centre in Romania: the HIV Centre of Excellence in Constanta (formally known as Spitalul Clinic de Boli Infectioase, Baylor College of Medicine, Texas Children's Hospital, Abbott Fund). It started as a pediatric centre that gradually turned into a clinic that cares for more than 800 HIV infected patients of all ages; today it provides other health services concurrently with HIV treatment, namely, dentistry, gynecology, tuberculosis, hepatitis treatment and mental health care. The mere existence of the Centre of Excellence proves that compassion creates change and, in this specific case, it saves and improves lives. What made this celebration extraordinary was the fact that the key people who actually conceived and created the centre, together with the patients and the former volunteers, were all able to rejoin, remember and rejoice. I would like to acknowledge here Dr. Mark Kline, founder of BIPAI, chairman of pediatrics at BCM and physician-in-chief of Texas Children's Hospital; Nancy Calles, BIPAI senior vice president for international program development; Michael Mizwa, BIPAI senior vice president and chief operating officer; Dr. Heidi Schwarzwald, BIPAI vice president and chief of retrovirology at Texas Children's Hospital, Dr. Rodica Matusa, pioneer of HIV care in Romania and the team of physicians and nurses working at the Infectious Diseases Hospital Constanta.

Another memorable moment of 2011 was the launch of our mobile laboratory. This was a natural expansion of our three offices for rapid testing and counseling for HIV and hepatitis in Constanta and Tulcea and allowed our team to double the yearly reach of our program, thus surpassing 21 500 people tested since the inception of the program in 2008.

More than ever, the team worked tirelessly to prevent the transmission of HIV from mother to child and the "Precious Children" program has celebrated this year 120 babies born HIV free at the Centre of Excellence, 120 families enjoying their children developing normally, with up-to-date vaccinations and with free access to artificial feeding.

Once again, our long term partners, Abbott USA and Americares Foundation have ensured critical help for the medical operations of the Centre; thus the value of various donations received in 2011 increased to \$3,671,347.00 (ARVs, nutritionals, antibiotics, medical supplies, and clothing).

One is accustomed to celebrating successes and overlooking losses and moments of pain, however I cannot resume this note without remembering the 33 patients that died in 2011, many of them in their twenties and in our care for more than ten years. Each and every one of them will be remembered and our hearts are near the families that lost someone dear to AIDS.

Our priorities for 2012 include an improvement in addressing long term illness complications of HIV infection, the focus of the HIV and hepatitis voluntary counseling and testing program in the most vulnerable populations and increasing



the support of our programs from the local community.

As always, we thank our board, donors, sponsors and partners for their desire to make the world a better place and their trust that Baylor Romania can support this change. I thank all my colleagues and all the young volunteers for their contribution to improving the lives of so many patients and families. I hope that 2012 will be yet another opportunity for each and every one of us to cultivate the habits of compassion in our lives.

Ana-Maria Schweitzer Executive Director

The mere existence of the Centre of Excellence proves that compassion creates change and, in this specific case, it saves and improves lives

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About BIPAI Romania

The Romanian-American Children's Centre of Excellence (COE) or Centrul de Copii Romano-American was opened on April 6, 2001 and the Baylor-Black Sea Foundation was established in 2004. The COE was the result of a plan of Dr. Mark Kline to help the HIV-infected Romanian children he met in 1996 during his first trip to Romania. The COE became Europe's largest pediatric HIV/AIDS care and treatment center, which includes a state-of-the-art outpatient clinic, an inpatient observation unit, a laboratory, a pharmacy and a specimen processing area, classrooms and short-term treatment and observation unit.

In 2008, the Center was renamed the Baylor College of Medicine — Texas Children's Hospital — Abbott Fund — Constanta Infectious Diseases Hospital — Center of Excellence — Constanta or BIPAI Romania to reflect the growth in partnerships and services. The most mature of BIPAI's programs, Romania, opened the first COE and has the oldest patient population.

BIPAI Romania is part of the BIPAI Network based in Houston, Texas at Baylor College of Medicine and Texas Children's Hospital. The Network includes 11 countries where BIPAI is working to expand access to family-centered HIV/AIDS services within Africa, North America and Eastern Europe.

ROMANIA at a glance

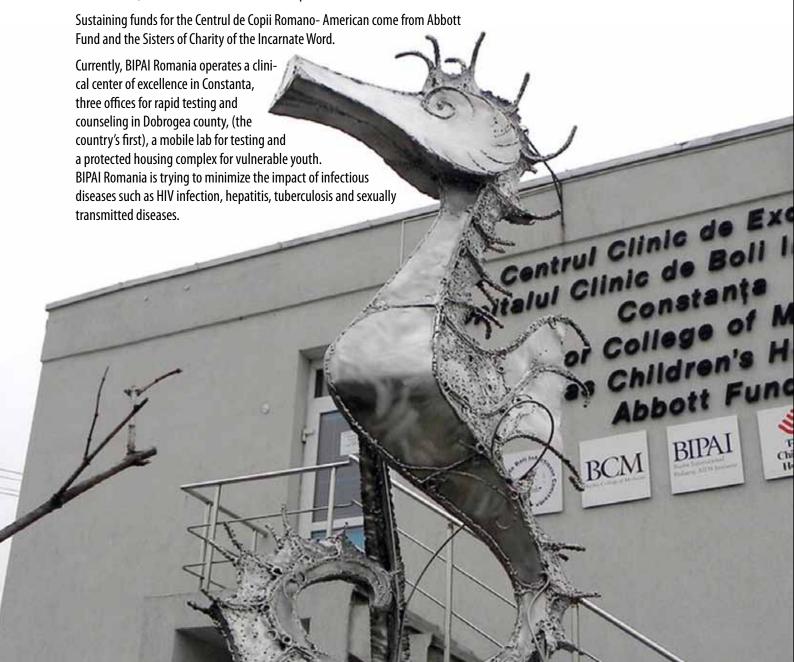
BIPAI Romania is headquartered in Constanta, Romania.

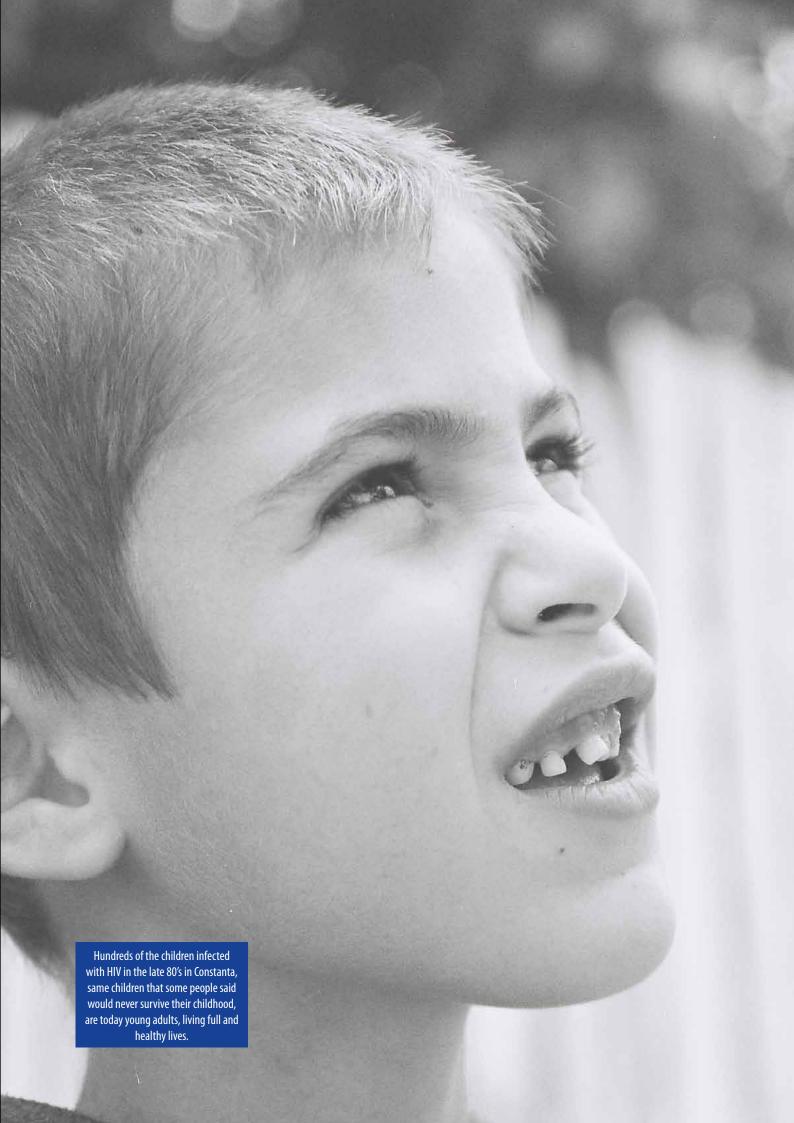
Budget: \$513.000

Patients in care: 885

Locations: 4

Number of staff: 39





2011 Care and Treatment Highlights

We are proud to report that in 2011 we have served a very diverse community, whom we have helped to understand, recognize, prevent and treat illnesses such as HIV/AIDS, hepatitis, tuberculosis and sexually transmitted diseases. Approximately 7000 people from the general population were tested for infectious diseases free of charge, 120 children born to HIV positive mothers and their families were helped to stay healthy and more than 1000 people with HIV or hepatitis were helped by our medical and psychosocial teams at the Centre of Excellence.

Center of Excellence

Since its dedication in 2001, the care offered at the Centre of Excellence was life transforming for hundreds of children affected by HIV." Before you knew it, these kids, the ones you could spot as being in terrible shape from across the room, were up and running around, happy and healthy," said Prof. Mark Kline, who speaks of the healing due to medication and care as an 'addictive' experience. "Many kids had been out of school during their illness and now they were able to go back." Ten years later, 885 patients with HIV are cared for at the centre, many of them being those kids, whose lives have been changed, as the president of BIPAI has described.

With a bigger population of long term HIV survivors, the Center of Excellence has developed services to care for other health problems and complications among these patients. Therefore, our medical observations since 2006 have shown that having an active watch of TB in the HIV infected group, gradually leads to a decrease in the morbidity and mortality among the patients under treatment (a 15 % decrease every year); however an alarm signal was raised since we have noticed that in 2011 4% of all new TB cases in Constanta county were also HIV infected, but unknown previously of being positive. These findings emphasize once more the importance of an active HIV screening of people with TB, outside the COE.

In addition, ensuring the continuity of the gynecology service for the 6th year has proven once more that the HIV infected women are an especially vulnerable population:

- they are at a higher risk of developing cervical cancer, therefore they need to be rigorously screened for Human Papillomavirus (in 2011, 30% of all HIV women assisted by Baylor had an abnormal Papanicolau test results, this being the highest level ever observed at the centre);
- ★ their contraceptive options are often challenging or inappropriate for their life styles or health status, thus they need to stay in closer contact with the gynecologist than healthy women.

Since 2007, Baylor has operatted a dental office, which provides free care for people living with HIV, thus ensuring oral health and increasing the overall quality of life of our patients. We have recorded a steady yearly increase of 20% new cases seen by the dental office. In terms of pathology, we did not record a different oral pathology among our patients, compared to the general population, and this is clearly a positive effect of the antiretroviral therapy and general health status of our patients.

The psychosocial team is a natural extension of the medical team, helping the patients with real life struggles related to adherence to the antiretroviral therapy, diagnosis disclosure, and life crisis and grief process. In 2011, about 52% of all 885 patients attending the centre have been helped by the team and 42% received some form of material support, depending on the type of emergency or crisis they were experiencing. Psychosocial support is not a luxury for the patients with a chronic disease. On the contrary, long term mental health and social support are as important as good medical care.



In 2011 we have served a very diverse community, whom we have helped to understand, recognize, prevent and treat illnesses such as HIV/AIDS, hepatitis, tuberculosis and sexually transmitted diseases

Prevention of Mother to Child Transmission – "Precious Children" Program

Women with HIV, exactly like any other women, get pregnant; some of them are able to plan their pregnancy and their care and treatment plan, while others find out during the pregnancy that they are infected, therefore they need a lot of support to have a healthy child. For the Baylor Romania team, ensuring the right to a healthy life for the HIV exposed children is a top priority, therefore Baylor physicians, nurses, psychologists and social workers cooperate closely with local hospitals in order to save yet another life. While the number of new pregnant women is approximately constant (about 35 every year /years 2009-2011), Baylor currently has in its care approximately 122 families with exposed children aged 0-3 years. We are proud to report that thanks to the collective efforts of Baylor and the Infectious Diseases Hospital 120 of these children are not HIV infected; on the contrary, they are very well developed physically and mentally.

The newlyweds Cristina and Petre, both HIV infected, now live at Baylor housing complex; they need assistance temporarily until they will manage to live independently, since they lack any support from their families.

Baylor Housing Complex

Ten years ago, BIPAI opened Flower House, a family-type residence that would become "home, sweet home" for 10 orphaned and abandoned HIV infected children. As they grew and changed, so did their needs and life plans, therefore it became imperative to create the proper conditions for transition to more independent living before actually leaving the house for good to live as free, self-sufficient adults. In 2007, adjacent to the Flower House was built another house that was to serve as a residence for homeless young adults where they could learn independent living skills in a safe environment. The house also serves as temporary emergency housing and support facility for youth in crisis, especially pregnant women. A requirement of residency is that the young person should go to school or work. Thirty-eight young adults have been housed since 2001. The housing complex is affiliated with the Centre of Excellence and the health status of the youth is closely monitored by our medical and psychosocial teams.

The stories of the youth are unique, some needing assistance for a very short time, others needing long term and specialized support. For example, Mihai and Dan are two young boys who grew up at Flower House and who are mentally impaired. They need a structured and familiar environment, therefore in terms of work they are doing various gardening and administrative tasks at the Centre of Excellence; they manage to be active, useful and loved by everyone at the clinic. There is also the story of Cristina and Petre, both HIV infected: they got married last year and are trying to save some money to get a small plot of land to build a house. They require assistance until they will manage to live independently, since they lack any support from their families. There is also the story of Leila, an illiterate young girl, who suffered terrible abuse by her extended family. When we discovered her she was living in horrific conditions and was in real danger of dying from exposure during the Romanian winter. She is temporarily housed at Flower House, until a more appropriate solution can be found for her.



Group Psychotherapy and Therapeutic Camps

How can we go beyond the clinical setting and help our patients take care not only of their bodies, but their spirit as well? Life, even in the absence of disease, brings many changes and several crises by itself; a chronic condition, such as the HIV infection, is a constant reminder of one's mortality and has the potential of complicating even more the ups and downs of life itself. Bearing this in mind, Baylor psychologists have developed in 2011 a group psychotherapy program for three categories of patients:

- ★ people who were recently diagnosed and were still passing through a stage of fear, confusion and denial; they were helped to overcome feelings of loneliness, to integrate the changes brought along by HIV into their lives and to find strategies of sharing their pain with their loved ones;
- ★ couples with one or both partners infected with HIV; they were assisted to identify and express their emotions, expectations and fears about their relationship and were challenged to find alternate communication patterns that will allow a more intimate and supportive relationship;
- ★ patients with difficulties in taking the antiretroviral therapy at the level requested for success (95% of the time), i.e. efficient control of viral replication; this group is especially challenging since many a times the patients are in very delicate health states and they do not have the luxury of time needed for self exploration and psychological adjustments. However, we are able to report that 64% improved their adherence to the requested level by the end of first year of therapy, while the rest have been enrolled in an individual psychotherapy program.

About 80% of patients attending groups have expressed their desire to continue their group exploratory work, while the other 20% have changed their life styles, so their schedule does not allow them to attend the groups anymore, although they would like to. This year's innovation was that all three groups were brought together in the mountains to continue their work in a 5-day psychotherapy marathon. The so called "camp" was captured as follows by a volunteer photographer that attended the activities:

66 From the very beginning, I became aware of how beautiful at heart these people really were. In their group encounters there had been moments of overwhelming sensitivity; I felt that their common suffering was uniting them beyond words. In spite of this, the group was contagiously merry and full of laughter. I could not understand why they were not angry; after all, the majority of them were infected in the hospitals, as newborns... it seemed like they understood more than I did that what is more important is to be actively involved into your own life, than to waste your energy on negative things of the past. I remember one group exercise called THE WEB: a hunk moves from a participant to the other, each sharing their fears, theirs plans and hopes, until the thread has created a real web among the group members; at the end, the thread is cut and everyone keeps one piece of it, as a reminder that they are not alone, that the others from the group will always be there for them.



Community Counseling and Testing for Infectious Diseases

Established in 2007, the voluntary counseling and testing service, offers free, rapid and confidential testing for HIV, hepatitis B virus and hepatitis C virus for members of Dobrogea community. The service has significantly expanded, by adding to the previous three clinic-based centers a mobile laboratory in 2011, thus the number of people tested annually has doubled. Our cumulative reports show that 21,547 people have been tested since program inception, of which 7,826 were tested in 2011 alone. Is this program making a difference? Here are a few highlights detailing this program's impact:

- ★ 7.89% of all tested people had a reactive result to either HIV or hepatitis virus, that was later confirmed by another testing method; this shows that in Dobrogea area the prevalence of these three infectious diseases is very high. Our data reveal that in Romania hepatitis is a public health problem, since the hepatitis B and C prevalence alone is of 7.53%; in addition, Baylor's hepatitis screening program is the only such program in Romania and its findings are usually used by patient associations to lobby for a hepatitis health program in Romania.
- ★ The mobile laboratory has allowed the team to move to various locations, thus making the service more available to various populations; the team has increased its work in the rural areas (17% of all people were tested in 31 different rural locations) and in urban Constanta, during week-ends, thus increasing access to testing among the working class;
- ★ This is not only a screening program, but it has a rather strong educational and behavioral change component; our counselors treat with the same attention both the reactive cases and those that are not infected, thus emphasizing the prevention component. For example, about 622 people, who were tested by the mobile laboratory team in urban Constanta, benefited of about 400 hours of private discussions.
- ★ The team has expanded the follow up support for the reactive cases, by creating effective care linkages; once a patient is confirmed as being infected and needing treatment and care, the team continuously keeps in touch with him, making sure he keeps his medical appointments, he understands the blood tests he needs to take and the process of accessing treatment. Patients are also invited to information groups, held every quarter by visiting specialists in order to create a forum of discussions and sharing.

The quality of the project was evaluated through anonymous online satisfaction questionnaires; a total of 98 persons, former clients, responded to our survey and the data showed the following:

- ★ 71% of all clients were very satisfied with the appointment system used to access the counseling and testing services
- ★ 79,6% state that they were immediately contacted by the counselor, while 19.4% stated they had to wait a reasonable time
- ★ 83% are very pleased with the quality of services received
- ★ 94% would recommend the Baylor testing program to their friends and family



In Romania viral hepatitis is a public health concern; this is confirmed by the prevalence of reactive results in our testing program: 7.53% of all persons tested have been confirmed as infected with hepatitis B or C virus



66

I am so pleased to observe that someone in Romania has finally understood the importance of serious infectious diseases such as viral hepatitis and HIV infection; these are "silent killers" and should be actively screened for and treated before they will lead to severe health consequences. I feel fortunate to have been invited several times during 2011 to join Baylor organized patient support groups and to share with them the experience I gained in years of studying and treating viral hepatitis; I appreciate the opportunity of empowering patients in understanding, managing and treating their disease much better. I deeply believe that through its counseling and testing program, Baylor Romania has offered a real support both to the health care practitioners as well as to thousands of patients. This is the first step towards proper care and treatment of patients affected by hepatitis B, C or D. I hope that Romania too will move towards proper care and treatment program for viral hepatitis, comparable with those in any other civilized health systems. These diseases, if left untreated, will ultimately lead to a fatal condition (liver cancer or liver cirrhosis); this is why I fight and hope for a program that will allow timely diagnosis, standardized monitoring by specialized physicians and modern treatment, such as triple therapy for hepatitis C.

For the past 15 years, I have committed my experience and knowledge to improving lives of patients affected by viral hepatitis; this is my mission and I will continue to work tirelessly for each and every one of them.



Those affected by infectious diseases, such as HIV infection, viral hepatitis or tuberculosis, are many a times living in a vulnerable environment. At Baylor, we try to balance medical care with psychosocial support for patients and their families.

Research and Publications

adhering to antiretroviral treatment, with the help of our collaborators: Dr. Alexandra Dima, Health Psychology researcher at the University of Southampton, UK; Prof. Dr. Eduardo Remor, coordinator of the Research Group in Psychology & Health at the Universidad Autonoma in Madrid, Spain; Dr. Richard S. Wanless, Baylor College of Medicine International Pediatric AIDS Initiative; and Dr. K. Rivet Amico, Research Scientist at the Center for Health, Intervention and Prevention, University of Connecticut, US. We have finalized the data analysis of a survey conducted at Baylor Romania in 2009-10 of 162 service users regarding adherence to treatment. The results indicated that many patients struggle with adherence (40% have pill count less than 95%, and 63% are less than 95% adherent according to doctor's assessment). The study identified several issues associated with lower adherence levels, such as concerns about side effects and difficulties with planning pill taking when daily schedule changes. Having accurate knowledge about the regimen and receiving emotional and practical support from family, friends and medical professionals were related to higher adherence levels. The findings helped confirm our clinical experience and improve our counseling services. Two articles have been submitted to various health psychology journals for publication.

In 2011 we continued psychosocial research related to patient difficulties in

In terms of medical research, in 2011 the "Nine-Year Follow-Up Of HIV-Infected Romanian Children And Adolescents Receiving Lopinavir/Ritonavir-Containing Highly Active Antiretroviral Therapy" study, was finalized. The study conducted through the partnership of Baylor College of Medicine International Pediatric AIDS Initiative, Texas Children's Hospital, Houston, Texas, Fundatia Baylor Marea Neagra, Constanta, Romania, Ovidius University, Infectious Diseases Hospital, Constanta, Romania, Carol Davila University of Medicine and Pharmacy, Stefan S. Nicolau Institute of Virology, Bucharest, Romania and Infectious Diseases Hospital, Constanta, Romania. The study analysis provides the longest duration of follow-up, reported to date, of lopinavir/ritonavir in a population of 336 HIV-positive children, adolescents and young adults in Romania. This article is unique in that it describes clinical outcomes in a cohort that has been followed from childhood or adolescence into early adulthood for a median of 7.5 years (maximum of 9.5 years).

Our research shows that having accurate knowledge about the regimen and receiving emotional and practical support from family, friends and medical professionals is related to higher adherence levels.

Education

Working to create a community that is better prepared to address infectious diseases, Baylor Romania has always invested in the minds of local health professionals and has created new learning experiences, in close partnership with Baylor College of Medicine in Houston and Ovidius University, Faculty of Medicine in Constanta. Our goals are to create the capacity to recognize and care for HIV and hepatitis not only at the level of highly specialized professionals, but also at the level of family physicians and associated medical branches that need to take care of various complications of these patients. Ultimately, a professional that is better prepared becomes a change factor in his team, being able to decrease medical discrimination and impose improved standards of care.

Since its first training, back in 2005, Baylor Romania has trained about 4000 professionals, 32% of them being trained in 2011 alone; this was the highest number of people ever trained in one year by our team.

It is important to recognize that in time, not only the number of people reached increased significantly, but also the variety of topics that are covered in our trainings increased. They vary from half a day trainings, to complete 3-day conferences. Fourteen different trainings were prepared and delivered during the reported year and the topics covered prevention of infectious diseases, universal precautions, treatment and care regimens, psychological support of people with chronic diseases, adherence and disclosure issues applied to the medical setting and good clinical practice trainings.

"As I attended for the first time a Baylor training, I must confess that I was really impressed with the quality of the training, the kindness of the staff and speakers, the looks of the Centre of Excellence. I know for sure that I will come back for more information". (Bianca, nurse, age 40)

"What an experience to find out so many things about the psychology of patients, the role of the mind in the healing process and the importance of communication in the medical encounter! I can never get enough of these talks." (Elena, physician, age 54)

BIPAI Romania provides didactic and informal educational events to hundreds of local health care workers each year:

Total trained: 1230

Doctors: 329

Nurses: 335

Other Professionals (Biologists,

Psychologists): 294

Community health workers: 272



Consolidated Financials

BIPAI Romania Center of Excellence

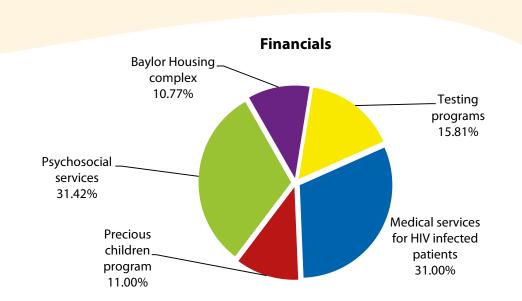
(Fiscal year ending Month 12, 2011)

INCOME

Gross Income \$ 559,313
Expenses \$ 544,428
Surplus (Deficit) \$ 14,885

BALANCE SHEET

\$ 112,090
\$ 44,255
\$ 156,345





Reflections From Our Employees

The milieu at Baylor always makes me feel at ease. Kindness and empathy are the words that perfectly describe the Baylor team. The whole group that I feel really close to creates such a friendly work environment. For me, as financial manager, finding the financial support for the projects is always a challenge, but I feel motivated by their desire to make things better and better.

(Monica Frangeti, financial manager)



At Baylor it's impossible to get bored! There are so many things to do, so many ideas that need to be applied, so many myths to break. And the most interesting fact is that, while doing all this work, I found out that I did not only grow professionally, but personally as well.

(Stefania Mihale, program director)



I feel so close to the young people from Flower House that I can even recognize them by their walk! They love us, too; some of them call me "mother", so it became so natural for me to feel like their mother. I keep in touch with the young people who left the house as well, since our relationships go beyond their current location. And this will stay the same in the future as well.

(Doina Popescu, youth counselor)



I was there, since the inception of AIDS in Constanta, so I have truly witnessed the evolution of HIV care and treatment in Romania. I cannot forget the tragedy of so many lives affected by the disease, but I also feel an immense joy when I see a patient that is still alive today, thanks to the care received at the Centre. I have dedicated my life to these patients and I don't think I would ever choose differently.

(Negivan Septar, head nurse)



Reflections From Our Partners And Donors



I am so pleased to have met such generous people, so committed to a philanthropic cause, such as Ana-Maria and Monica, and many others from the team. I am glad to offer my support, even if I feel regrets when I cannot help even more. I think all of us, as Romanians, should do more to prevent tragedies in the lives of young people, children and mothers.

(Stefan Gogota, manager)



Baylor was the first client of the data base technology developed by RadGS; they trusted us, challenged us and came with a lot of demands that would benefit the patients at the Centre of Excellence, and I am grateful for that. Somehow we felt that Baylor has helped us more than we did, since they have constantly challenged us. That is why we have been offering many pro-bono services, since we know that the ultimate goal is to help people that are less fortunate than we are. If our expertise has been helping the clinic improve its services for the past 5 years, we are committed to continue to serve.

(Eduard Suica, manager RadGS)



Being part of the Precious Children project gala...It really was an unforgettable evening for me and my family. My admiration for the Centre of Excellence has grown and I deeply appreciate the commitment of the team to help the patients. I am so proud to be a tiny piece of this helping process for the benefit of babies exposed to HIV.

(Radu losif, Operations Director, Asset X Petromar, OMV Petrom SA)



If I was to characterize the activity of Baylor Foundation in 2011 I would say two things: professionalism in projects implementation and commitment to improving the lives of patients affected by HIV and hepatitis. Baylor projects keep their focus on the patient and this was the main reason that drove us to partner with them since 2010. We will continue to work together in 2012 too and we are proud of being able to provide our support. Working with community partners such as Baylor allows us not only to bridge some gaps in the current Romanian health system, but also to innovate. Together we are contributing to developing the spirit of community and belonging to a better Romanian society.

(Dan Zamonea, General Director, Roche Romania)



Donors

The programs of Baylor Black Sea Foundation Romania are made possible through the generous support and close partnership of the following organizations:













ALTINUM MIROX

We would also like to thank to our 166 individual donors that gave gifts to support Baylor's testing program.

Special thanks to Mrs. Maria Pistol, individual supporter of Baylor Housing Complex Program, for her monthly donations throughout 2011.

Our programs have been generously supported through in-kind donations and free expertise offered by the following companies:





































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Help Save Lives!

Generosity is the "immune system" of one's soul, the foundation of a more secure community and ultimately an act of love. This is why we invite you to donate your talent, resources or time to Baylor Romania and help us save and change lives that are or can become affected by infectious diseases.

What is needed for the Centre of Excellence?

- ★ Donate: 100% of your donation will directly fund services for a patient, like a child exposed to HIV, a patient needing treatment or a person unaware of his diagnosis of HIV or viral hepatitis
- ★ Sponsor a project: 100% of your donation will directly fund a project like the dental, gynecology, tuberculosis, hepatitis, HIV, mental health project or Flower House
- ★ In-kind support for the Centre of Excellence: help us keep our projects running by donating products such as medication, medical consumables, new-born kits, food, clothing, building repair materials, medical equipments and even toys and books!
- ★ Vehicle donation: a small car will allow our team to reach easier the patients in remote rural areas, while a van would allow us to arrange for a mobile laboratory for the testing project.

Please visit us on www.baylor.ro to find out more on ways to give and our contact data.



Baylor-Black Sea Foundation

Clinical Centre of Excellence

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The Baylor Habitat Complex

Str.Traian Lalescu, Nr.29, Loc. Lazu, Jud. Constanța, România Tel./Fax: +40 241 738 918 Email: office@baylor-romania.ro

Baylor Centers for Counseling and Rapid Testing for HIV and Hepatitis

Constanța Spitalul Județean Policlinica nr. 1, cabinetul 243 Tel : 0241 691 730

Tulcea
Spitalul Județean de Urgență
Secția de Boli Infecțioase – parter
Tel: 0240 53 23 45

www.baylor.ro









BIPAI

Pediatric AIDS Initiative – Headquarters Texas Children's Hospital

1102 Bates Street, Suite 630 Houston, TX 77030 www.bipai.org



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