This center was jointly established by USF's Colleges of Public Health and Medicine, through the Department of Epidemiology and Biostatistics, and the Division of Infectious Diseases and Tropical Medicine. This center was co-founded by Drs. Eknath Naik, John Sinnott and Sagar Galwankar with initial funding from Dr. Kiran Patel.

1. Mission, Vision and Values Statement

Mission
CHART’s mission is to combine excellence in clinical medicine, public health, biomedical, and behavioral programs to lead the way for health promotion and disease prevention in India.

Vision
Our vision is to create a collaborative effort between the US and India in which there is a free exchange of ideas, research knowledge, and education. Where both countries benefit from the unique resources and opportunities each has to offer in preventing the further spread of diseases including HIV/AIDS.

Values
The University of South Florida takes great pride in imparting quality education and providing the highest level of health care available. We are committed to providing diverse learning opportunities through advanced research and training methods and technology. Our multidisciplinary approach is successful due to the cooperation among different colleges, faculty members and a diverse student body.

Specific Objectives
• Provide immediate and comprehensive training in the prevention and clinical management of HIV/AIDS;

• Provide access to HIV/AIDS diagnosis, care, treatment, and prevention services to HIV positive orphans and isolated tribal and rural populations

• Promote and facilitate the research and intervention programs for HIV/AIDS and other diseases of major public health importance in collaboration with local governments, volunteer organizations, and local health care professionals;

• Establish and maintain long-term collaborative relationships between USF and Indian health care professionals through continued health intervention programs, scholarly publications, joint conferences, and research projects;

• In addition, promote understanding of Indian history, arts and culture in the US, especially as it relates to medical care and prevention.
2. Center’s Organizational Structure & Staffing

- **Advisor**
  - Kiran Patel, MD, FACP

- **Director**
  - Eknath Naik, MD, PhD

- **Chairman**
  - John Sinnott, MD, FACP

- **Country Director**
  - Stationed in India

- **Assistant Directors**
  - at each CHART Center in India
3. Center’s Past Five Year Performance

Eventhough CHART was officially registered sometime in 2003, it has been been conducting the following activities in India since year 2000.

1. **Annual National HIV Update Symposium.**
   This is organized once a year as an weekend update to provide state of art current knowledge of HIV/AIDS to the health professionals of India. This is done in different cities of India each year to provide benefits to those hard to reach professionals in India. We have conducted updates in Indian cities like Pune, Mumbai, Baroda and Mysore. This update is attended by more than 400 delegates each year and is jointly conducted in collaboration with local Indian partner.

2. **Annual HIV Medicine Intensive Training Course.** We were the first to offer such an intensive course in India. This course is an intensive two-week clinical mini-residency program for physicians interested in practicing HIV medicine and also serves as an refresher course for those currently practicing HIV medicine. This program provides physicians with a thorough understanding of the basic and advanced principles of HIV diagnosis, treatment and management. This curriculum is based upon US National AIDS Education Training Course (AETC) modified to make it culturally sensitive and socially appropriate for Indian scenario keeping in current needs of physicians from India.

3. **Fellowships** for Indian Physicians to come to USF for HIV related training
4. Establishment of state-of-the-art **Training Center** in India.
5. Select **Scholarships** to attend International conferences.
6. **Exchange programs** for students, interns and faculty.
7. Collaborative **Research** in Public Health and HIV/AIDS.

4. Major Achievements

4.1. Training and Capacity Building

1. 58 Indian physicians trained at USF
2. 130 Physicians Trained India
3. >400 National Update Attendees each year in India
4. Invited presentation at the International AIDS Education Training Center Meeting in Barcelona, Spain, July 2002
5. Co-organized an India satellite conference during the World AIDS conference in Barcelona, July 2002
6. Assisted building of HIV training center at Mysore
7. Videoconference unit set up in India
8. Organized several training programs for nurses and para-medicals in India
9. Our partners in Gujarat were first to conduct a triple sero-surveillance of HIV, Hepatitis B and Hepatitis C virus using network of more than 30 blood banks across state of Gujarat. Based upon the results of our study, we successfully advocated change in government policy regarding informing HIV positives
donors so that donor seek medical help and stop further blood donations thus reducing HIV transmission.

4.2 Extramural Funding

We received donations and grants from both philanthropists and government sources

1. Dr. Kiran Patel Foundation for Global Understanding provided initial seed money and sponsored around 22 Indian physicians for HIV mini-residency at USF. The approximate funding was around USD 60,000 provided as needed for fellows travel, boarding and lodging. Foundation also supported directly cost of country Director in India (approximate USD 22000/yr)
2. Division of Infectious Disease provided approximate USD 20,000 for cost of faculty travel and lodging and boarding each year for Annual update and HIV course in India.
3. Government of Maharashtra through World bank: USD 72,000 for training their physicians at USF
4. Dr. G. Ramappa, Tampa, USA , funded a videoconferencing equipment costing around USD 15,000
5. Dr. Acharya, Tampa donated approximately USD 10,000 to adopt a village in India for studying kidney diseases in rural India.
6. Elizabeth Glazer Pediatric foundation funded computer training for physicians in Mumbai USD 5000

5. Publications

5.1. Abstracts with Partners from India


15. Menezes L, Raja T, Tash K, Naik E, Nadler J, Sinnott J. Drug use fuels HIV and STDs in a semi-rural community in India. 3rd IAS Conference on HIV


5.2 Publications with Partners from India


6. Collaborations

These centers serve as CHART training and research sites in India. Memoranda of understandings and affiliations have been signed with them. Each site includes faculty and/or training facilities pledged to CHART.

A. State of Maharashtra

6.1. Ruby Hall Clinic: (http://www.rubyhall.com)

Ruby Hall Clinic occupies a prominent place among the medical institutions in India as a multi-specialty hospital dedicated to the diagnosis, treatment and research related to various diseases. It is a 535-bed hospital facility with a staff of 150 consultants, 500 panel doctors and 1400 paramedical staff. Ruby Hall Clinic has state-of-the-art facilities in Cardiology, Cardiac Surgery, Neurology, Nuclear Science Center, Diagnostic Center, Intensive Care Units, a Blood Bank and Cancer Unit.

Established in 1959 by Dr. K B Grant, Ruby Hall Clinic started modestly, but has now grown to a mammoth facility. Since its commissioning in 1959, it has established itself as one of India’s most advanced hospitals, comparable to the best in the world.

All modern facilities and sophisticated medical equipment are available with the objective of providing comprehensive healthcare under one roof. The hospital is manned by a highly trained, dynamic and accomplished team of medical and para-medical professionals, and other healthcare professionals.

Ruby Hall Clinic is recognized by both the Central and State Governments and large industries for treatment of their employees and families. Ruby Hall Clinic is recognized by the University of Poona as a teaching institution for Post Graduate Medical Courses. The hospital is also recognized for DGO, DCH and DA courses by the College of Physicians and Surgeons, Bombay. It has also been recognized from time to time by the Indian Council of Medical Research for important research projects.

Ruby Hall Clinic extends free and concessional treatment to the poor. At present, a large number of deserving patients from the economically weak strata of society are treated free of charge and at concessional rates.

6. 2. International Institute of Information Technology (http://www.isquareit.com/) and Hope Foundation

The Hope Foundation and Research Centre is a Public Charitable Trust founded in 1979 by Mr. Prahlad P. Chhabria, a well-known industrialist & philanthropist and Chairman of the $500 million Finolex Group of Companies.

The activities of the Foundation fall under two categories – medical relief and education. The Medical Division of the Trust provides free medicines and medical aid for the treatment of cancer. A pioneering work of the Foundation in this field was the
establishment of a well-known well-equipped mammography centre in Pune in August 1993 called the Kalpana Mammography Centre for early detection of breast cancer. The centre was set up under the guidance of a panel of radiologists and radiographers.

The Education Division of the Foundation was established in 1996 with the Finolex Academy of Management & Technology (FAMT) at Ratnagiri, the first engineering college in that area. The college has been set-up on 35 acres of land in the M.I.D.C. area at Mirjole, Ratnagiri. The academy is affiliated to the Mumbai University and has obtained the approval of the All India Council of Technical Education (AICTE). The academy offers degree level education in electronics, electrical and mechanical engineering. Computer science and information technology branches are currently being added.

Coastal Ratnagiri offers a verdant and peaceful environment, highly conducive to education. The academy occupies an extensive 14 acres campus with spacious lecture halls, laboratories housing the latest training equipment, a well stocked library, a computer centre and facility for sports and extra-curricular activities. A highly qualified and motivated faculty supports the state-of-the-art infrastructure.

Another Institution established by Hope Foundation is the International Institute of Information Technology (I2IT). Its mission is to become one of the world’s esteemed Institutes for Advanced Education and Research in Information Technology.

### 6.3. KRIPA Foundation

Kripa Foundation is an “Indian Nationwide Project” founded in the year 1981. It is the largest non-governmental, secular and non-political organization in India. Kripa has been helping people suffering from chemical dependency and the resultant HIV infection for over two decades. Kripa Foundation offers non-discriminating, supportive community living for those with alcohol and chemical dependency. The thrust is on helping people to introspect and bring about change in lifestyle. This philosophy has awarded Kripa with tremendous experience in behavioral modeling and interventions in vulnerable populations.

Kripa’s activities in the field of HIV/AIDS started in 1990 when it first reached out to drug addicts incarcerated in the Central Jail at Manipur. These addicts were forcibly thrown into prison by their parents and were leading a sub-human existence. In the state of Nagaland the Kripa Counseling Centre has an ongoing prison outreach program carrying the message of hope and recovery. The link between substance abuse and HIV/AIDS has led Kripa to conduct on September 11, 1995 a benchmark survey in Manipur, the first of its kind under the aegis of the Government of India/ U.N.D.C.P. Kripa commissioned a 12/7 HIV/AIDS Helpline on December 5, 1995.
Kripa Institute of Research

Kripa Foundation maintains an extensive database of its clients over the last decade. All epidemiological, socio-religious, economic, educational, substance abuse patterns, medical features and disability, therapeutic interventions, outcome evaluations and follow-up records are maintained and periodically updated. The research work aims at understanding the disease parameters, personality profiles, impact of social mores, therapeutic aspects and holistic considerations related to lifestyle change.

The Kripa Institute of Research is recognized by the Department of Science and Technology of the Government of India as a Scientific and Industrial Organization (SIRO) and is now in its second biannual tenure of recognition.

Kripa Institute of Training

Kripa Institute of Training conducts regular programs that provide either exposure to or substantially enhance the information base and technical ability in both therapeutic concepts, as well as documentation. This training is aimed at people working in the field as well as those referred by other organizations of training and development, such as industry, social groups and educational institutions. The training is offered to paramedical staff, social groups and experiential counselors and students, in addition to graduate and postgraduate students in medicine and social service fields.

Programs are conducted by Kripa staff and are often facilitated by nationally and internationally recognized authorities and resource persons. The modalities of training include audio-visual, electronic and text material, practical sessions, focus group discussions, field visits and internship placements. Formalized courses stretch from 1 week / 4 weeks to 1 year. Since the inception, the institute has conducted 46 workshops and certified 1506 participants at various levels, including those with postgraduate diploma.

Kripa Foundation is recognized for its activities by the Ministry of Social Justice & Empowerment, Government of India. It has been identified as a training centre by N.I.S.D., Ministry of Social Justice & Empowerment, Government of India and by Voluntary Organizations working in India and abroad.

6.4. The Lokmanya Tilak Municipal General Hospital and Medical College in Sion, Mumbai (LTMMC) (http://members.tripod.com/~sltmg/)

LTMMC is one of the four major medical colleges in the city of Mumbai. It has a modern 1416 bed hospital with 30 departments and divisions housing more than 800 hundred medical students at any given time. The college spearheads scientific research in many diverse areas including HIV/AIDS. On average, the college conducts 50 conferences or workshops per year, and its faculty members publish more than 80 research papers per year. The faculty contributes to leading textbooks used nationally and internationally. In
addition to catering to people from the city of Mumbai, the hospital has outreach programs and services that benefit rural slums and neighboring rural villages. The Department of Preventive and Social Medicine spearheads activities in the area of disease prevention including tuberculosis, malaria, leprosy, and HIV/AIDS. Notable are its educational programs reaching youth for HIV/STD prevention, training health volunteers and local indigenous health practitioners in disease prevention, and additional targeted training for HIV/STDs. The Department, along with other departments in the college, the department of Microbiology, Skin, Pediatrics, Internal Medicine and OB/GYN has demonstrated leadership in the efficient delivery of primary health care and HIV care to the people of Mumbai and participate in research at the national and international level.

B. State of Gujarat

6.5. Indu Health Research Foundation

The Indu Health Research Foundation is a not-for-profit organization founded in 1998 to provide affordable healthcare delivery to India’s poor. It has a network of 28 Blood Banks throughout Gujarat and offers additional blood transfusion services in both Baroda and Anand. Their fundamental goal is to provide safe and quality blood to all patients from donations received from voluntary non-remunerative. Since its inception, the Foundation has conducted research in areas of blood safety and blood transfusion with a special emphasis in blood-related/transmitted infectious diseases. This research has resulted in extensive publications and presentations in both international and national seminars and conferences. The K. Patel Center for Infectious Diseases, affiliate of Foundation, provides free access for testing of HIV to citizens of Vadodara. It caters to the needs of more than three million people with a “state of the art” counseling center for pre- and post-test counseling. Under the guidance of HIV physician Dr. Bhardwaj Desai, the Center makes treatment available for about 600 HIV-infected individuals every month. In 2002, the Center surveyed the HIV-related knowledge of general practitioners and developed and implemented appropriate training programs to update such practitioners about the latest developments in HIV and related diseases.

6.6. Baroda Medical College

Baroda Medical College (BMC) was established in 1949 through the expansion of the Shri Sayaji General Hospital (established in 1917), a 1500 bed tertiary care center located in the heart of Vadodara (Baroda), Gujarat. BMC offers several degree programs including the MBBS, MD, MS (Master of Surgery), PhD, and the Master of Science. During the past 50 years, BMC has produced more than 5,000 physicians. BMC averages 45,000 admissions, 350,000 outpatient visits, and 60,000 emergencies each year. It has 45 wards including a separate ward for Skin and Venerology conditions with facilities for admitting patients suffering from TB and other infectious diseases, including HIV/AIDS. BMC offers free HIV testing and pre- and post-test counseling. In addition, drugs for the management of opportunistic infections are provided to all patients free of charge and inpatient treatment is granted as needed. In the past 4 years, BMC has
diagnosed and managed over 550 cases of HIV/AIDS (~ 200 cases of HIV in 2002, ~100 cases of AIDS in 2002). Since the establishment of the STD Sentinel Sero-surveillance Program in 1994, BMC has recorded a yearly incidence of HIV of 6%-12%.

### 6.7. Sterling Hospital

Sterling Hospital is a 285 bed corporate hospital situated in Ahmedabad, Gujarat. The hospital has 5 intensive care units including: ICU – 17 beds, Neuro ICU – 8 beds, Neonatal and Pediatric ICU – 14 beds, Surgical ICU – 17 beds, and Medical ICU – 22 beds. In addition, the hospital has 10 major departments including Cardiology, CT Surgery, Neurology, Gastroenterology, Hemato-oncology, Pulmonary and Critical Care, Infectious Diseases, Urosurgery, and Endocrinology.

### C. State of Madhya Pradesh

#### 6.8. Devi Ahilya University (Formerly Indore University) (http://www.davy.ac.in)

was established in 1964 at Indore, the largest industrial and business hub of Central India. The university is a state university supported both by the Madhya Pradesh Government and the University Grants Commission.

Devi Ahilya University is incorporated in the Commonwealth Year Book. The University Grants Commission has selected Devi Ahilya University as one of the Top Ten National Universities of India. The Government of Madhya Pradesh has declared Devi Ahilya University as a Model University. It has been bestowed with "THE CENTRE FOR EXCELLENCE" award by the government of Madhya Pradesh.

The University has more than 21 teaching departments imparting education in frontline areas of Physical & Biological Sciences, Engineering & Technology, Management and the Humanities. There are more than one hundred and seventy five faculty members actively involved in multi-disciplinary programs.

The University serves approximately 10,000 students at 2 anchor campuses in Central Indore and Southeast Indore. Devi Ahilya University provides highest quality educational experiences and opportunities to its students. The university also organizes academic, cultural, sports, and social activities throughout Indore. With a commitment to providing quality education, Devi Ahilya University places major emphasis on integrating academic programs with active learning, a key component for becoming a university for the century.

### D. State of Karnataka

#### 6.9. Swami Vivekananda Youth Movement (http://www.vivekamysore.com)

Swami Vivekananda Youth Movement (SVYM), a not-for-profit, non-religious, non-political, voluntary organization, was established in 1984. It was founded by Dr. R. Balasubramaniam and its membership numbered six. Its assets were high ideals and all the positive benefits of inexperience.
They made a modest beginning by supplying physician's medicine samples to poor patients, arranging for blood and providing counseling. The SVYM then moved on to running a weekly rural clinic including one in Heggadadevanakote Taluk, one of the most backward taluks in Karnataka state- and the home of the displaced, dispossessed tribal people.

The SVYM set up a primary health clinic at Brahmagiri, in the midst of the tribal colony. The local Zilla Panchayath (District Council) loaned them a building, and a donor gave them a cow. The doctors spent their days clearing the building of weeds and carrying out repairs. At times they slept in empty water pipelines. Bad roads and tough living conditions made it all even harder.

Appreciative of their work and perseverance, the Deputy Commissioner of Mysore granted them five acres for land at Hosahalli. Their lives, and those of the tribal people, were now irreversibly linked. In its initial years, the SVYM opened two rural dispensaries at Chinnadagudihundi and Thumnerale villages. In due course, it was decided to concentrate efforts in a single location. Accordingly, the SVYM opened a clinic at the Brahmagiri Tribal Colony in 1987. Six years later, this clinic was shifted to Hosahalli Tribal Colony, where it would benefit a greater number of people.

As time passed, the SVYM realized that healthcare was just one aspect of bettering the tribals' lives. Sustained enrichment could be achieved only through education, a steady earning and saving capacity, a broader social outlook and a realization by the tribals that their tomorrow could be better than their today. It also became evident that the rural poor of Heggadadevanakote taluk lived in circumstances that were often as pathetic as that of the tribals, and were as much in need of help. Increasingly, the SVYM's assistance was required by a greater number of people in more and different ways.

Responding to these and other needs, the SVYM now operates a 10-bed hospital at Kenchanahalli and a 40 bed Multi Speciality Hospital at Saragur. Further outreach services are provided through mobile health units. The Viveka Tribal Centre for Learning at Hosahalli, a semi-residential school, provides quality education to over 400 children.

Community development programs, which aim to create self-sufficiency through pooled resources and education, are held regularly.

Today, the SVYM has more than 150 dedicated members and associates, and is rendering its services to 250,000 people-both tribals and the rural poor-covering the entire taluk of Heggadadevanakote.

7. Educational Activities

1. Student/faculty Exchange programs
   We had several students from the College of Public Health and from other colleges of the USF travel to India for student project and field experience. We have a site supervisor who supervises the students locally in India. We have also developed a pre and post travel checklist for convenience of students and travellers.
2. **Annual National HIV update Symposium.**
   This is organized once a year as a weekend update to provide state of art current knowledge of HIV/AIDS to the health professionals of India. This is done in different cities of India each year to provide benefits to those hard to reach professionals in India. We have conducted updates in Indian cities like Pune, Mumbai, Baroda and Mysore. This update is attended by more than 400 delegates each year and is jointly conducted in collaboration with local Indian partner.

3. **Annual HIV Medicine Intensive Training Course.**
   We were the first to offer such an intensive course in India. This course is an intensive two-week clinical mini-residency program for physicians interested in practicing HIV medicine and also serves as an refresher course for those currently practicing HIV medicine. This program provides physicians with a thorough understanding of the basic and advanced principles of HIV diagnosis, treatment and management. This curriculum is based upon US National AIDS Education Training Course (AETC) modified to make it culturally sensitive and socially appropriate for Indian scenario keeping in current needs of physicians from India.

8. **Clinical Activities**

   No clinical activities at the USF. Our partners in India have both inpatient and outpatient clinical facilities which are run by local physicians. We have access to these sites for research and clinical experience. We have to abide by local rules and guidelines of the country. India has local institutional review boards for conduct of research.

9. **Community Outreach**
   CHART is closely associated with local Tampa Indian and South Asian community. Many of the CHART activities are supported by local Indian community.

10. **Center’s Five Year Strategic Plan – FY 06-11**

   We have two major focus areas:

   1. **Training**
      We plan to increase scope of HIV mini-residency to rural parts of India. In the initial years we purposefully targeted states and cities with high to mid prevalence of HIV. Our focus was in the states of Maharashtra, Gujarat and Karnataka. In the next five years we plan to expand our activities to rural and more remotes places within these states. These states have been recently wired for high-speed internet and Wi-Fi wireless network. We plan to use these facilities to reach health professionals working in remote areas via distance learning. However, we will still continue in-person training for train-the trainer module.

      Some of the course under development but not limited to are
      - HIV Care and Support Nodule
      - HIV Surveillance
      - Malaria and HIV co-infection
      - HIV and STIs co-infection
2. Research

We had successfully completed one NIH Fogarty Supplement for HIV research training in Mumbai. Last year our HIV prevention grant submitted to CDC was approved but not funded due to lack of budget. We currently have one NIH grant for “The Use of Female Barrier Methods in HIV Prevention” under review. We are currently working on HIV related one RO3 and one PA to be submitted to NIH early next year.

Other Funding Sources
1. America-India Foundation: will fund 2-3 faculties travel to India for conducting HIV training this year
2. Bill and Melinda Gates Foundation: application in process
3. Global Fund: Joint application with Baylor University, Texas is under review process
4. Dr. Kiran Patel Foundation for Global understanding: endowment under consideration

8. Center’s Goals and Objectives – FY 06-07
1. Annual HIV update in Pune, India
2. Annual HIV mini-residency in Pune, India
3. HIV Surveillance Workshop in Goa, India
4. Initiate HIV research project on Female condoms in Mumbai and Goa
5. Will provide access to our sites for student field and research projects

9. Center’s Budget (FY 06-07)
Estimated USD 50,000
Appendix

CHART Centers in India

A. Maharashtra
   1. Ruby Hall clinic, Grant Medical Foundation, Pune
   2. International Institute of Information Technology, Pune
   3. KRIPA Foundation, Vasai
   4. Lokmanya Tilak Medical College and Hospital Sion Mumbai

B. Gujarat
   1. Indu Health Research Foundation and Shaktikripa Foundation, Baroda,
   2. Baroda Medical College, Baroda
   3. Sterling Hospital, Ahmedabad

C. Madhya Pradesh
   1. Devi Ahilyabai Vishwa Vidyalaya (Indore University) and Indore Medical College

D. Karnataka
   1. Swami Vivekananda Youth Movement, HDK Taluka, Mysore.
Center Locations