

## AIDS@30: AN INTERNATIONAL SYMPOSIUM

In 1981, the Centers for Disease Control reported that five gay men in Los Angeles had become ill with a rare form of pneumonia. The report was the first official description of a syndrome that would later be called AIDS. Three decades later, 30 million people have died from the virus.

"Anniversaries compel us to reflect, to take stock, to inquire about how we can better carry out our missions," said Julio Frenk, Dean of the Harvard School of Public Health. He and Dr. Richard Marlink, Executive Director of the Harvard AIDS Initiative (HAI), are heading AIDS@30, an international symposium in Boston in early December.

The AIDS epidemic has spawned an unprecedented global response, marked by groundbreaking scientific research,

activism, philanthropy, and government interventions. AIDS@30 will bring together hundreds of scientists, advocates, and political leaders to assess what we have learned from AIDS and how to apply those lessons towards ending the epidemic.

"Our hope for the symposium is to bring the vanguards of scientific thinking, of public health implementation, and of international leadership here to really plan the demise of this epidemic," said Marlink.

The next issue of *Spotlight* will feature highlights from AIDS@30. ●



## AIDS@30 Sessions

- The Future of HIV Prevention
- International Mobilization and National Leadership
- Global and Local Health Disparities
- Ending Pediatric AIDS
- The Future of HIV Treatment
- Is an HIV Vaccine Possible?
- Funding the Global AIDS Response



## PROFILE

### Kate Powis: Plan C

#### Plan A

As a young adult, Kate Powis loved to solve puzzles. Her father was a Secret Service agent and she planned to follow in his footsteps. She took college courses in criminal justice, financing her education by working as a "loss prevention" officer at a chain of department stores. She questioned shoplifters and employees caught stealing, but she didn't enjoy the work. She often found herself in tears following an interrogation. "At the end of the day, I needed to be doing something more positive," she said.

#### Plan B

She switched jobs to work at a distribution center. By the time she finished her undergraduate degree at California State University, she was a district manager.

Kate moved to Virginia to work for another department store chain. After a few years, Circuit City approached her to start a nationally chartered bank so the company could issue its own credit cards. Kate helped establish the bank while putting herself through an evening MBA program.

(continues on page 3)

## LEADERSHIP ACKNOWLEDGED

Though most of their work is done quietly behind the scenes, Deeda Blair and Maurice Tempelman have contributed immensely to the growth and success of the Harvard AIDS Initiative (HAI). To publicly recognize their work, Julio Frenk, Dean of the Harvard School of Public Health (HSPH), presented them both with the Eighth Annual Volunteer Leadership Award at a ceremony on October 20th.

As Co-Chair of HAI's International Advisory Committee, Deeda Blair has been a vital part of HAI's success in finding better ways to treat and prevent HIV/AIDS. She emphasizes "the conviction that there are no barriers to discovery."

Equally comfortable attending a scientific meeting, a fashion show, or a state dinner, Blair has the ability to operate effectively in many different realms. "Deeda brings together people, resources and ideas," said Frenk. "She asks tough questions and arms herself with facts and statistics so she can

be an effective partner with scientists in seeking government and philanthropic support for research."

Blair was responsible for introducing Dr. Max Essex, Chair of HAI, to Maurice Tempelman, who shared the Award with her.

Tempelman is Chair of HAI's International Advisory Council, a position he has held since the Council's inception in 1989. A businessman with an in-depth knowledge of Africa, he provided the initial funding for HAI's work in Senegal at a time when the NIH would not fund research in Africa. He helped HAI forge connections with African leaders, enabling research and training collaborations to be established in Senegal, Nigeria, Botswana and Tanzania. "Those programs," said Frenk, "have yielded important new research results and have literally saved lives."

The Volunteer Leadership Award scholar recipient was also announced at the dinner.



Dean Julio Frenk applauds Deeda Blair and Maurice Tempelman

This year's winner was Wen Xie, a student in the Biological Sciences in Public Health Ph.D. program at HSPH. Her thesis will focus on reprogramming HIV-positive cells and the use of stem cells to repress viruses such as HIV. She is working with Dr. Max Essex and Dr. Tun-Hou Lee at HAI, in collaboration with a laboratory at Children's Hospital Boston.

To view a slide show of the event, visit our website at [www.aids.harvard.edu](http://www.aids.harvard.edu).

## KITSO TRAINS OVER 8,000



Much has changed in a decade. In 2001, President Festus Mogae of Botswana identified the growing threat of HIV/AIDS as a national crisis and announced that his government would provide free antiretroviral (ARV) therapy to eligible patients. This initiative, at the time without precedent in Africa, posed significant challenges to Botswana's already overburdened healthcare system, especially in terms of trained medical workers. Few doctors or nurses had experience in HIV/AIDS treatment.

That same year the KITSO AIDS Training Program was established through a collaboration between the Botswana Ministry of Health and the Botswana Harvard Partnership (BHP). Through KITSO training, healthcare professionals in Botswana have gained the expertise and con-

fidence to provide ARV therapy and to train other healthcare workers. KITSO-trained staff now provide ARV therapy at 33 hospital sites and 137 satellite clinics throughout the country. Over 130,000 patients are currently served in the national ARV program.

The program has expanded, adapted, and added new partners. To date, over 8,000 healthcare professionals have been trained in KITSO's basic course, *AIDS Clinical Care Fundamentals*. At the ten-year mark, KITSO continues to provide high-quality training to ensure the sustainability of Botswana's HIV/AIDS care and treatment programs.

KITSO is made possible through support from the African Comprehensive HIV/AIDS Partnerships (ACHAP).

## spotlight

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## HAI

HAI is dedicated to research and education to end the AIDS epidemic in Africa and developing countries. For over two decades, HAI has been at the forefront of HIV/AIDS laboratory research, clinical trials, education, and leadership.

Visit our website to make a donation.

[www.aids.harvard.edu](http://www.aids.harvard.edu)

## Kate Powis *(continued from page 1)*

The bank was enormously successful ahead of schedule. Kate, still in her 30s, became the bank's vice-president, managing up to 1,500 people, flying on private jets, and earning an impressive salary. "My life was very different then," she said.

She became active in a local church. In 1991, she volunteered for a trip to Jamaica to help repair a hurricane-damaged church. Working in the rural village was her first close-up exposure to poverty. "There was a little girl who had broken her leg when she was two—a compound fracture that was never set," said Kate. "She didn't have access to healthcare and her leg was permanently deformed because of it. She would never walk right." While pounding nails on a rooftop in Jamaica, she had a life-altering moment. "I realized I could be doing something better with my life than earning a profit," she said. She decided to become a doctor.

### Plan C

She had *none* of the required pre-med courses. While continuing to work at the bank, she took one course at a time, including physics and organic chemistry. "Though it was a radical decision, it was a slow transition," she said, "but I never lost focus on where I was headed."

To enhance her chances of getting into medical school, she became a certified Emergency Medical Technician (EMT). She spent one night a week riding in an ambulance, then went to work at the bank in the morning.

In 1999, at the age of 40, Kate was accepted to the Medical College of Virginia. After graduation, she did a combined residency in internal medicine and pediatrics at Massachusetts General Hospital (MGH) in Boston. She worked in Indo-

nesia for several months, helping to re-establish the healthcare system after the 2004 tsunami. It had been over a decade since Kate's Jamaica decision, but she had become the doctor she wanted to be.

She was awarded a Global Women's Health Fellowship from Brigham and Women's Hospital (BWH). Her plan was to expand a training program for midwives in Indonesia to help reduce mother and infant mortality. Kate bought her plane ticket, but the week before her departure, the project fell through. Dr. Paula Johnson, Chief of the Division of Women's Health at BWH, remembered how Kate handled the setback. "She immediately began looking for another opportunity. She didn't doubt that she would continue to move her work forward."

At a colleague's suggestion, she contacted Harvard AIDS Initiative (HAI) researcher Dr. Roger Shapiro, who was conducting a study in Botswana to determine the best methods for preventing pregnant women from passing HIV to their infants. He agreed to let Kate work as a study physician. After she arrived in Botswana and her skills became apparent, her role was expanded. "She's a fast learner," said Shapiro. "She understands every aspect of a trial—from the data needs to the larger public health implications."

"I come at medicine and research with a much different perspective than someone who came straight through as an undergrad to medical school," said Kate, referring to her business background. "I enjoy taking a process and figuring out how to improve it. And by improving it, I mean being able to measure that an actual difference is being made."



**Drs. Made Afata and Kate Powis at Scottish Livingston Hospital in Molepolole, Botswana**

Kate earned a Masters of Public Health from the Harvard School of Public Health in 2009. She now spends half the year at the Chelsea Urgent Care Clinic on the outskirts of Boston and the other half in Botswana. Her research focuses on how a mother's HIV infection influences both the mother and child, even if the mother does not transmit the virus to her child.

Nearly one third of all infants in Botswana are born to HIV-positive women but remain uninfected because their mothers received antiretroviral drugs during pregnancy. The HIV-exposed infants have a two-fold higher risk of dying compared to unexposed infants. The reasons are unclear.

Kate and her colleagues at HAI are trying to determine why HIV-exposed but uninfected infants have a higher mortality rate and are working to identify modifiable risk factors that will save their lives.

Her research efforts are gaining attention. Kate was just awarded a K23 Career Development Award from the National Institutes of Health to help support her work for the next five years. "It was our lucky day when Kate joined the Botswana-Harvard program," said Dr. Max Essex, Chair of HAI. "This is public health research at its best." ●

## ESSEX RECEIVES LIFETIME ACHIEVEMENT AWARD

The Institute of Human Virology (IHV) at the University of Maryland School of Medicine presented its Lifetime Achievement Award for Scientific Contributions to Dr. Max Essex, Chair of the Harvard AIDS Initiative (HAI), on November 1st. Essex received the award “for his work on animal and human retrovirus research and his leadership and great impact in the public health of Botswana.” At the same ceremony, the Lifetime Achievement Award for Public Service was given posthumously to Dr. Bernadine Healy, the first female director of the National Institutes of Health.

Dr. Robert Gallo, Director of IHV and best known for his co-discovery of HIV, described Essex as “a close confidant and collaborator much before and during those early years of AIDS. His contributions to science are invaluable.”

At the evening ceremony, Dr. Phyllis Kanki, who leads HAI’s efforts in Nigeria, outlined Essex’s major scientific achievements. She described his early work in feline leukemia, his seminal discovery of the envelope proteins of HIV, up through his current research in HIV/AIDS treatment and prevention in Africa.

Besides the actual award, Essex was presented with a baseball bat signed by members of the 2004 Boston Red Sox, who won the World Series after an 86-year period of failing to do so. Essex and Gallo have a long history of baseball banter. ●



Dr. Robert Gallo presents the IHV Lifetime Achievement Award to Dr. Max Essex



**AIDS @ 30**

To commemorate the 30th anniversary of AIDS, Harvard University is convening a major international symposium.

Several hundred global health leaders, elected officials, scientists, artists and activists will gather to reflect on what we have learned from AIDS and how to apply those lessons towards ending the epidemic.

The two-day event, hosted by the Harvard School of Public Health, begins on December 1, World AIDS Day 2011.

Harvard University, Boston, MA | International Symposium | December 1-2, 2011

### In this issue

Scientists and policy makers engage for AIDS@30; Former banker becomes AIDS doctor; Harvard honors Blair and Tempelman; KITSO trains over 8,000 African healthcare workers; Essex receives Lifetime Achievement Award.

# spotlight

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*For over two decades, HAI has been at the forefront of HIV/AIDS laboratory research, clinical trials, education, and leadership. HAI is dedicated to research and education to end the AIDS epidemic in Africa and developing countries.*

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