Research Portfolio, 2018-2019

Community Partners International (CPI) supports research partnerships that bring together community-based and civil society organizations, academic institutions and governments to generate evidence to guide, assess and inform health care planning, prioritization and program implementation, support advocacy and influence wider policy-making within the national health system. We empower communities to set their own research agenda and lead participatory research initiatives that meet international standards and ethical principles.

Selected Projects

Maternal and Child Cash Transfer Survey
Period: April 2019 - October 2019
Donor(s): Livelihoods and Food Security Fund
Partner(s): Civil Health and Development Network, Karen Department of Health and Welfare
Geographic Coverage: Kayah and Kayin States

In April 2019, CPI was selected to manage a Maternal and Child Cash Transfer (MCCT) survey of 2,648 households in 14 townships in Kayah and Kayin States (1,860,700 population coverage) funded by the Livelihoods and Food Security Fund (LIFT). The MCCT initiative was launched by the Ministry of Social Welfare, Relief and Resettlement (MoSWRR) in Kayah and Kayin States in October 2018. Once approval is received from the protocol review committee and ethical review committee, CPI will launch the survey, with a projected start date of July or August 2019. The aims of the survey are to validate the design of this nationally-led cash transfer program that aims to
address sub-optimal nutrition practices and to improve nutritional outcomes for children and families in Myanmar. The survey will cover all 7 townships of Kayin State and all 7 townships of Kayah State and will sample both urban and rural areas in both government-controlled areas (GCA) and non-government controlled areas (NGCA). It will incorporate representative household surveys to measure nutrition, infant and young child feeding (IYCF), and health-seeking behaviors; village profiles to assess village-level demographics, assets and conditions; and township profiles developed by analyzing township-level data and conducting key informant interviews with key stakeholders.

**Effectiveness and Feasibility of a Community-Based Mental Health & Psychosocial Support Services (MHPSS) Pilot Program in Waingmaw Township, Kachin State: An Implementation Research Study**

**Period:** March 2019 - September 2020  
**Donors:** UKAID  
**Partner(s):** Myanmar Department of Social Welfare  
**Geographic Coverage:** Waingmaw Township, Kachin State  

Community Partners International (CPI) is leading an implementation research study in Kachin State, Myanmar to develop and evaluate an evidence-based, culturally adapted, and community-based program for common mental health and psychosocial support (MHPSS) needs that can be delivered by trained lay case workers in remote and conflict-affected settings. The study will contribute to efforts by Myanmar’s Department of Social Welfare (DSW) to create a community-based cadre of MHPSS lay providers to close treatment gaps and address common mental and psychosocial disorders. The study will be conducted in 40 randomly selected villages in Waingwaw township, with an estimated 1,200 individuals participating.

**Stop Hep B @ Birth in Peri-Urban Yangon**

**Period:** July 2018 - Ongoing  
**Donors:** Tides Foundation, B. K. Kee Foundation  
**Partner(s):** Myanmar Liver Foundation, B.K. Kee Clinic, University of California – Los Angeles, National Hepatitis Control Program of the Myanmar Ministry of Health and Sports  
**Geographic Coverage:** Yangon  

Mother-to-child transmission accounts for the majority of chronic hepatitis B (HBV) infections in Southeast Asia. Because evidence is lacking for feasible implementation strategies for the prevention of mother-to-child transmission (PMTCT) of HBV in resource-limited settings, this study aims to develop and implement a community-oriented primary care (COPC) model for PMTCT of HBV. The study will recruit 110 HBsAg-positive pregnant women in early pregnancy through hospital-based HBV screening, community-based pregnancy surveillance, and community-based HBV education sessions. Women who are eligible for treatment according to WHO criteria, or with viral load >200,000 IU/mL at baseline, will receive treatment from general practitioners in a primary care setting from 20 weeks gestation until 4 weeks after delivery.

All newborns will receive the HBV birth dose vaccine, and newborns of treated mothers receive HB-Immunoglobulin within 24 hours after delivery. Maternal viral load will be tested at delivery.
Through this study, CPI built evidence for a simplified hepatitis C virus (HCV) testing and treatment care model that integrated HCV and HIV testing to improve access to care among at-risk populations, including people who inject drugs (PWID), and to enhance antiretroviral therapy (ART) initiation and adherence in HIV-HCV co-infected populations. The study evaluated the treatment outcomes and cost-effectiveness of the simplified care model.

The study recruited 800 patients through community clinics and civil society groups. Patients were screened for HCV and HIV, treated with highly curative direct acting anti-HCV agents (DAAs) for 12 weeks, and followed up at 4, 8, 12, and 24 weeks to measure Sustained Viral Load. In addition to assessing cure rates at 12 and 24 weeks, the study compared the cost of low-cost HCV viral assay platforms against existing standard models of care, assessed rates of ART initiation and virologic suppression of HIV-infected persons within the HCV program, and the impact of HIV co-infection in participants on the HCV treatment outcomes of sustained virologic response at 12 weeks. Results of the study will be published in 2019 to support the scaling up of routine testing to diagnose HCV infection as part of HIV services to increase access to DAAs.

Demonstration Project on Assessment of Simplified Antiviral Treatment Strategy for Hepatitis C in Myanmar

**Period:** June 2017 - September 2018  
**Donor(s):** The U. S. President’s Emergency Plan for AIDS Relief (PEPFAR), USAID, EQUIP  
**Partner(s):** Right to Care, Myanmar Liver Foundation, Boston University, University of California – Los Angeles, Ministry of Health & Sports (Myanmar)  
**Geographic Coverage:** Yangon, Mandalay and Kachin States/Regions

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Health Systems Situation Analysis for Six Ethnic Health Organizations and Community-Based Organizations

**Period:** October 2017 – June 2018  
**Donor(s):** Three Millennium Development Goal Fund (3MDG)  
**Partner(s):** Civil Health & Development Network, Kachin Baptist Convention, Karen Department of Health & Welfare, Mon National Health Committee, Pa-Oh Health Working Committee, Shan State Development Foundation  
**Geographic Coverage:** Kachin, Kayah, Kayin, Mon and Shan States

In 2018, CPI started new phase of a long-term process of strengthening ethnic and community-based health organizations (ECBHOs) to develop, lead and manage health services with particular focus on the implementation of the Essential Package of Health Services (EPHS) and the wider components of the National Health Plan. The goal of this research project was to define service
availability and ECBHO readiness for implementation of universal health coverage (UHC) by 2021. CPI conducted assessments with six ECBHOs in five states and regions of Myanmar, using a systems approach to planning, financing, and health service provision to ensure integrated, high-quality, and universally available health care.

CPI worked with partners to conduct 84 facility assessments according to WHO guidelines, 12 focus group discussions with community members, and a series of key informant interviews with ECBHO leaders. CPI collected outcome indicators on “tracer” health service indicators, which are used globally to reflect the adequacy of coverage of a given health system because they represent primary health services from which all individuals should benefit. After concluding the assessments, CPI used an inclusive, participatory, and evidence-based approach to co-create Plans of Action with each ECBHO to strengthen their health system and increase their likelihood of success of moving towards UHC.

**Time Use of Village-Based Health Workers of Ethnic Health Organizations: Qualitative Research and a Time-Motion Study Protocol**

**Period:** July 2018 - Ongoing  
**Donor(s):** Access to Health Fund, Tides Foundation  
**Partner(s):** Karen Department of Health & Welfare (KDHW)  
**Geographic Coverage:** Kayin State

Ethnic and community-based health organizations (ECBHOs) in Myanmar are taskshifting to village-based health workers (VBHWs) to address critical shortages of providers, and moving away from vertical programming, towards more integrated models of care. However, services may be integrated without understanding the additional time required to complete all assigned activities, and this may exacerbate challenges for motivation levels, performance, and attrition. There is limited qualitative data available on the impact of service integration on workload and time use from the perspective of VBHWs, especially those working outside the public sector.

During this study, 24 VBHWs who serve communities in KDHW’s catchment area will be observed using a pre-coded observation tool to record all of the activities they perform for 7 consecutive days. During these “working hours,” the start times and stop times of the VBHW’s activities will be recorded continuously from the first work-related task until the last work-related task. This mixed methods study aims to:

- Understand perceptions of workload and factors that influence time use when providing health services from the perspectives of high-performing and low-performing VBHWs who support ECBHOs and,
- Develop and test appropriate data collection and analysis tools and processes for conducting a time-motion study of VBHWs in Myanmar
Impact of Local AIDS Committees on Levels of Stigma against People Who Inject Drugs in Kachin State

**Period:** February 2019 – February 2020  
**Donor(s):** United States President’s Emergency Plan for AIDS Relief (PEPFAR) through UNAIDS Myanmar  
**Partner(s):** Metta Development Foundation  
**Geographic Coverage:** Kachin and Shan States

In cities in Kachin State, HIV prevalence among people who inject drugs (PWID) is nearly 50%, largely due to unsafe practices such as needle sharing. Metta Development Foundation works with Local AIDS Committees (LACs) for HIV prevention at project sites in Kachin State and Shan State. Metta supports LACs to develop action plans to sensitize communities on issues related to harm reduction approaches to drug use and HIV/AIDS. LACs implement community mobilization and engagement activities with a goal of reducing stigma against PWID and barriers to services related to HIV/AIDS and/or drug dependency. Stigma is considered one of the most significant obstacles to preventing and controlling HIV/AIDS at local, national, and global levels. This study aims to generate evidence to:

- Better understand the extent of stigma and discrimination experienced by PWID in communities where LACs are operating.
- Characterize the impact that LAC community mobilization and engagement activities can have in addressing the stigma and discrimination associated with drug dependency and HIV/AIDS.
- Inform programs and interventions to reduce stigma experienced by PWID and enhance their social reintegration and rehabilitation within their communities.

This cross-sectional study will recruit 220 PWID for a survey based on the Myanmar Integrated Biological and Behavioral Surveillance (IBBS) survey a 40-factor self-report measure of self-stigma based on a psychological flexibility model. Together, these instruments will quantify self-stigma (self-devaluation, fear of enacted stigma, stigma avoidance, and values disengagement), as well as care-seeking behavior related to HIV/AIDS and MMT services. The study will include 12 focus group discussions with key stakeholders including local administrators, school teachers, LAC members, women’s group members, church leaders and youth group members to explore the strengths and limitations of the LAC model for reducing stigma against PWID in the community.

Integrated Biological and Behavioral Surveillance Survey among Migrants in Kawkareik, Myanmar

**Period:** June 2018 - Ongoing  
**Donor(s):** University of California - Los Angeles Center for AIDS Research/AIDS Institute  
**Partner(s):** Karen Department of Health & Welfare, National AIDS Program of the Myanmar Ministry of Health and Sports, University of California – Los Angeles  
**Geographic Coverage:** Kawkareik Township, Kayin State

There is limited data on the prevalence of HIV infection among migrant populations in Myanmar. Many countries, including Myanmar, recognize migrants as a priority population potentially at elevated risk for HIV and related infections but tools are lacking to assess HIV risk and behaviors in these diverse and dispersed populations. This study will use Respondent Driven Sampling (RDS).
methods and Integrated Biological and Behavioral Surveillance (IBBS) surveys to characterize the burden of HIV, hepatitis B (HBV), hepatitis C (HCV) and syphilis, and their associated risk factors, among inbound and outbound migrant populations in Kawkareik Township, Myanmar. It will assess HIV-related knowledge, attitudes, and stigma; measure gaps in the continuum of care and treatment for HIV and HCV (e.g., diagnosis, linkage, antiretroviral treatment); and enhance local capacity to conduct IBBS among migrants and other priority populations.

The first phase of the study consists of survey development; and a pre-surveillance assessment to adapt RDS methods for the migrant population in Kawkareik. In the second phase, CPI will conduct the IBBS survey among 700 migrants. The study will also increase the capacity of ethnic and community-based health organizations (ECBHOs) to participate in HIV surveillance, and will establish a new HIV focus for collaborative research by teams at UCLA, CPI, the Myanmar Ministry of Health and Sports and the Karen Department Health and Welfare.

**Young Men Who Have Sex with Men (YMSM) Online Survey**

**Period:** January 2019 – July 2019  
**Donor(s):** Tides Foundation, Youth Lead  
**Partner(s):** Myanmar Youth Stars

There is an HIV crisis among young men who have sex with men (YMSM) in ASEAN, with some of the highest reported rates in Yangon and Mandalay in Myanmar. Men who have sex with men (MSM) make up 13% of all HIV cases in Myanmar, and the percentage is increasing each year. However, there is insufficient data on sexual behaviors of YMSM aged 15-24 years at regional, national, and sub-national levels, and this hampers the design of HIV prevention activities that are suited to the specific behavioral characteristics of YMSM. Traditional offline approaches to accessing YMSM networks for research purposes have been hampered by stigma. Information on syndemic conditions (e.g., homophobia, bullying, and resilience) of HIV risk behaviors, which have been shown to facilitate HIV vulnerability among MSM, have not been described for YMSM. Because of perceived anonymity and the emergence of safe online spaces, the internet has become a key platform for facilitating sexual networking among MSM. The internet provides a unique opportunity to engage with YMSM in Myanmar and gather epidemiological behavioral data.

The goal of this survey is to generate Myanmar-specific epidemiological and behavioral data on YMSM through online channels. This data can be used to inform the design of innovative prevention and intervention strategies, as well as to advocate for evidence-based public policies. YMSM will be recruited to participate in the survey via websites, MSM-specific mobile applications, and other social media applications. The specific objectives of the survey are:

- To characterize HIV risk behaviors and the HIV care cascade among YMSM who use the internet and reside in Myanmar.
- To examine the association of syndemic conditions on HIV risk behaviors and HIV care cascade among young MSM.
- To adapt the Asia Internet MSM Sex Survey (AIMSS) and pilot test it among YMSM aged 15-24 years in Myanmar.