



I-CARE

The International Counseling, Advocacy, Research, & Education Project

Summer 2008 Report

June 4th, 2008

Our I-CARE group has accomplished quite a few activities since the last report. Generally I have talked about our training activities, which are one of the core things we do. However, in this report I want to highlight a number of research and development activities that are underway or will be soon.

First, I'm pleased to say that we have officially finished the cooperative agreement between IU (on behalf of I-CARE), and the Institute for Development Management (IDM) in Botswana, which is a three country consortium between Botswana, Lesotho, and Swaziland. This extra-governmental agency does a variety of consultation and training activities including HIV/AIDS counseling training. We are cooperating with the Botswana branch, but anticipate expanding to the other countries in time. The agreement is part of the attachments that I'm forwarding to you. Among other activities, IDM trains counselors at the paraprofessional level. They wanted us to work with them to help evaluate their programs and to cooperate in other training and research activities.

Recently we have designed a survey instrument which we will use to survey those who have been trained by IDM. As noted in previous reports, this is the first of a whole series of studies we will be doing with and for them. Of course we will continue to work with the Health and Education ministries with our University of Botswana colleagues.

The training that I-CARE typically does in Botswana is for those with at least a baccalaureate. We have our own evaluation of those activities; we have analyzed some data contained in these evaluations which were reported on during the American Psychological Association's International Counseling Psychology conference in Chicago this past March. We have incorporated some of this data into our own training and research program.

It's important for you to know that that while we are entering more into research activities, what we learn translates into a better understanding of the situation and improved services to those in need. That's the unique perspective that university folks can provide in addition to training.

The winter report noted that Dawn Smith, who is a Public Health student on our research team, was completing an internship in Botswana at IDM. As part of Dawn's internship, she provided critical information to the I-CARE project so that we could collaboratively design a questionnaire to collect a great deal of information from those who have trained at the paraprofessional level to be HIV/AIDS counselors working throughout Botswana, as noted above. A copy of the survey instrument is also included. We now have to go through formal Human Subjects approval both here and in Botswana. That's a cumbersome process and will take a little bit of time, but we hope to be able to implement the survey soon.

Dawn did a number of other activities that relate to public health and I-CARE that relate to Botswana. The work plan that she submitted before going to Botswana is one of our attachments. Our colleagues there were extremely complimentary of Dawn's work. We of course are also very pleased with the results of her activities.

IDM would like us to follow her work up with another student in the near future, and we are planning to do that once we have the financial wherewithal.

Another very important development for us is that our I-CARE colleague, Professor Amy Nitza (a former student now a professor at our IU Fort Wayne campus), has been given a 10 month Fulbright award for next year. She will travel to Botswana in July, and her work plan is included as an attachment to this email. We are delighted that she will work with the HIV/AIDS Center on the University of Botswana campus. As you will see from the proposed work plan, she will be heavily involved in research and development activities. They were very happy to get someone with counseling and training background as well as research and development skills. Their Center has not really been able to get off the ground in terms of research activities. The rest of us on the I-CARE team will of course be supporting Amy as she develops a viable research program for the Center. The long-term benefits are obvious. Amy will also be further developing our workshop model while at the university.

Professor Michael Reece and I have decided to minimize our Kenya training activities until we can be assured that violence will not again break out. Recent research and development activities in Kenya will be discussed below. Sadly, as the situation it is so volatile there, we do not want to put ourselves and our students' lives at risk by traveling there. I'm very sad about that, because I had hoped that we could begin providing trauma counseling and reconciliation workshops by now.

I should add that one of our two Kenyan I-CARE members, Naanyu Yebei, will be returning to the country permanently this summer. She and her husband Philemon are the ones who we help with the orphanages in Kenya. Philemon will remain in Bloomington to complete his doctorate. Naanyu is completing the writing of her manuscript for her dissertation on stigma; she feels compelled to go back to her homeland despite the dangers. I admire her and understand what she's doing, but confess that I'm very concerned about her safety. We will maintain close contact with Naanyu in Kenya.

The fact that we are not traveling to Kenya this summer does not mean that much activity has not already taken place there. Professor Michael Reece, our Public Health colleague, has been as busy as ever. Under his overall direction, faculty and students have continued to disseminate findings from the first comprehensive study of mental health among individuals living with HIV in Kenya. Three papers have recently published or will be published soon; reprints or copies of any of these are available upon request. Additional work focuses on analyzing findings from a large focus group study (16 focus groups with 146 men and women) that took place in four distinct geographic regions of western Kenya to understand how to better engage men in the care that is necessary to support the health of the wife and child when an HIV+ woman becomes pregnant. Some of these findings will be presented in papers at the American Public Health Association in October 2008.

Professor Lisa Lopez Levers has returned recently from an extended stay in Botswana where she worked with other colleagues to first research the situation in the country, and then develop an action plan for addressing the needs of disabled children. This was the charge given by the Botswana President's Office to the Ministry of Health. Her project's final report has been submitted and is being considered by officials in the Ministry of Health. As you will recall, Lisa is a specialist in childhood trauma.

I hope that you are as pleased as those of us in I-CARE with the progress that we've been able to make. Without a large amount of material resources we have been willing to provide our

time and pay our own travel expenses in order to carry on I-CARE activities. We capitalize on ways to use scarce funds when they become available. We like to think that we provide a pretty good “bang for the buck.”

In addition to the research and development activities that I’ve mentioned, we’ve trained a fairly significant number of people who in turn have influenced the lives of many others. We will continue our activities with or without outside funding. However, I should comment that we could do much more with more resources. One thing that some people might not think about is that we have heavy travel expenses, and that’s for faculty who pay their way. At the moment we do not have travel funds to pay for graduate students who have much to offer, and have voiced their desire to go there, but do not have the funds. Also, although Nancy and I can afford to pay our way, our colleagues who are younger and still have children in school make a major sacrifice just to be in Africa.

For those who do extensive travel and have extra air miles available, it would be very helpful to receive the extra miles as a gift to I-CARE. As you know, that’s done through the IU foundation. Of course, dollars also help too! 😊 Please let me know if that is something you’d like to do.

Nancy and I will be returning to Botswana in mid-July. We will do some training workshops with our Botswana colleagues Dr’s Mercy Montsi and Dan-Bush Bhusumane. I will spend a fair amount of time in discussion and planning with colleagues there re our collaborative research and training agenda at both IDM and University of Botswana. As you can see, most of us do not have an extended period of time in Botswana, but through our collective efforts we are able to keep a fairly constant presence there. We also hope to return to Kenya when the situation permits. I continue to spend time coordinating our efforts so that we can maximize our contributions.

Your support of I-CARE is greatly appreciated.

Cordially,

Rex

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