

Data Sheet

USAID Mission:	Bureau for Global Health
Program Title:	AIDS Prevention and Control
Pillar:	Global Health
Strategic Objective:	936-004
Proposed FY 2004 Obligation:	\$65,442,000 CSH
Prior Year Unobligated:	\$1,686,000 CSH
Proposed FY 2005 Obligation:	\$65,442,000 CSH
Year of Initial Obligation:	1996
Year of Final Obligation:	2013

Summary: The activities of the Global Health Bureau's (GH) AIDS Prevention and Control SO "Increased use if improved, effective and sustainable responses to reduce HIV transmission and to mitigate the impact of the HIV/AIDS pandemic", are being integrated into the President's Emergency Plan for AIDS Relief (PEPFAR) under the purview of the Office of the Global AIDS Coordinator. It focuses on its three aspects of AIDS control: treatment, care, and prevention. The President's Emergency Plan for AIDS Relief (PEPFAR) has accelerated activity through increased funding and promises results in 14 countries, 12 in Africa and two in the Caribbean region, with a 15th country to be selected. PEPFAR sets forth new and ambitious targets in the focus countries: two million individuals treated; seven million new infections averted; and ten million persons receiving care and support, including orphans and vulnerable children. In addition to work in 12 focus countries, there are USAID-supported HIV/AIDS programs (either country-specific or regional) in 75 additional countries, which this strategic objective contributes to.

Inputs, Outputs, Activities:

FY 2004 Program:

USAID has an established record in achieving national impact in child survival, family planning, HIV AIDS and nutrition through food aid in resource-poor countries. GH partnerships with non-governmental organizations (NGOs), faith-based organizations (FBOs), community-based organizations, bilateral and multilateral donors including World Health Organization (WHO), Joint United Nations Program on HIV/AIDS (UNAIDS), World Bank and the Global Fund to Fight AIDS, Tuberculosis and Malaria are longstanding and exemplary. Increasing efforts are underway to expand cooperation with FBOs and the private sector, both of which are invaluable in combating HIV/AIDS.

To meet the President's AIDS objectives above, USAID, in collaboration with other U. S. Government agencies and with the approval of the Global AIDS Coordinator will expand existing services and pursue a long-range approach to plan for large scale or national coverage when possible by establishing or improving the quality of care at additional service sites to achieve the 2008 targets. GH centrally-funded AIDS activities will support the field to meet the challenges of PEPFAR. Under a new rapid funding mechanism (designated Track 1 by the AIDS Coordinator's Office at State) new U.S. Government partners, including FBOs, will implement multi-country programs to complement the existing central programs. GH programs will address the following program elements in both focus and non-focus countries under the PEPFAR initiative:

In care, support and treatment: (\$52,342,000 CSH, \$843,000 CSH C/O)

- Collaborative planning, policy dialogue, and consensus building at the country level;
- Scale-up (including quality improvement) of HIV diagnostic services;
- Outreach to hard-to-reach populations and rural communities;
- Comprehensive package of care for HIV infected individuals;
- Baseline assessments to determine the spectrum of opportunistic infections in Initiative countries;

- Nutritional support to maintain health and support recovery from infection;
- Commodity procurement and logistics mechanisms for Anti-Retroviral Vaccines (ARV) and drugs and supplies for opportunistic infections and palliative care;
- Human capacity development that addresses current and future needs through both pre-service and in-service training;
- Health systems strengthening: client follow-up and adherence strategies, laboratory strengthening, medical information systems, drug management and pharmacy control systems;
- Community network expansion and development of new networks, where needed;
- Care and support for orphans;
- Access to education;
- Counseling and social-psychological support;
- Community capacity building, including micro-enterprise development;
- Food security and nutritional support;
- Stigma reduction;
- Legal support, including inheritance planning and the rights of widows to inherit property;
- Integration with programs providing prevention, care and treatment to adults living with HIV/AIDS; and
- Provision of health services.

The principal implementing organizations include: additional and new partners selected competitively, plus PACT, Inc; Family Health International; International AIDS Vaccine Initiative (IAVI); Joint United Nations Program on HIV/AIDS (UNAIDS); U.S. Peace Corps; Population Council with the following subcontractors: The Future Group International, Population Services International; Program for Appropriate Technology in Health (PATH); Management Sciences for Health; Institute of Tropical Medicine; University of North Carolina.

In prevention: (\$13,100,000 CSH, \$843,000 CSH C/O)

- Increase emphasis on male involvement, responsibility and partner reduction
- Deliver behavior change messages (ABC -abstinence, be faithful, correct and consistent condom use, as appropriate) through mass media and community-based channels including FBOs
- Build on existing condom distribution efforts to help promote correct and consistent condom use with non-regular partners and by discordant couples;
- Expand programs to increase self-efficacy of girls and women, and to reduce gender vulnerability and sexual violence (including trafficking); and
- Continue to reduce stigma in order to improve prevention strategies.

The principal implementing organizations include: additional and new partners to be determined through competition, plus Family Health International; International HIV/AIDS Alliance; UNAIDS; Internews Network, Inc; TvT Global Health and Development; U.S Census Bureau; U.S. Peace Corps; Elizabeth Glaser Pediatric AIDS Foundation. Subcontractors are: The Futures Group International; Program for Appropriate Technology in Health (PATH); Management Sciences for Health; International Center for Research on Women; University of Alabama at Birmingham; Tulane University; Journalists Against AIDS in Nigeria (JAAIDS); University of Washington; Population Services International; Private Agencies Collaborating Together (PACT Inc); Population Council.

FY 2005 Program:

The anticipated increases in the U.S Government HIV/AIDS resources will allow continued scaling-up of interventions in prevention (\$13,800,000 CSH), treatment (\$34,392,000 CSH), care (\$10,350,000 CSH) and support (\$6,900,000 CSH) in order to achieve the goals set forth in the focus countries of the PEPFAR initiative as well as continuing prevention, treatment and care programs in the rest of the countries where USAID supports HIV AIDS activities:

Performance and Results: The following is a partial list of accomplishments in FY 2003:

- Leveraged private sector partnership with Coca Cola to strengthen prevention messages and distribute materials related to these messages;
- Launched USAID's antiretroviral treatment programs in Ghana, Rwanda and Kenya (IMPACT);
- NGO support toolkit: 820 NGOs and CBOs were provided technical assistance through meetings and workshops;
- Reached 475,000 people in 14 countries with communication for behavior change;
- Resource requirements for scaling up ARV programs estimated for PEPFAR focus countries;
- In 54 countries, AIDS program efforts were examined to understand the needs for further program interventions; and
- Development and review of 34 HIV/AIDS country strategies.

US Financing in Thousands of Dollars

Bureau for Global Health

	CSH	DA
936-004 AIDS Prevention and Control		
Through September 30, 2002		
Obligations	296,249	37,452
Expenditures	181,819	37,452
Unliquidated	114,430	0
Fiscal Year 2003		
Obligations	63,664	0
Expenditures	0	0
Through September 30, 2003		
Obligations	359,913	37,452
Expenditures	181,819	37,452
Unliquidated	178,094	0
Prior Year Unobligated Funds		
Obligations	1,686	0
Planned Fiscal Year 2004 NOA		
Obligations	65,350	0
Total Planned Fiscal Year 2004		
Obligations	67,036	0
Proposed Fiscal Year 2005 NOA		
Obligations	65,442	0
Future Obligations	3,495,387	0
Est. Total Cost	3,987,778	37,452