

Action Today, A Foundation for Tomorrow: The President's Emergency Plan for AIDS Relief

Second Annual Report to Congress - Highlights





4-year-old Lewis, and 5-year-old Emily. The South African visitors, along with their physician, Dr. Helga Holst, were guests at the Dwight W. Eisenhower Executive Office Building Thursday, Dec. 1, 2005, for the President's remarks on World AIDS Day.

The number of people living with HIV has never been higher—over 40 million world-wide, including approximately 5 million new infections in 2005, according to UNAIDS. Many nations face rapidly growing epidemics even as HIV/AIDS reduces average life spans.

President Bush promised to lead the fight against global HIV/AIDS in 2003 with the launch of the U.S. President's Emergency Plan for AIDS Relief (PEPFAR/Emergency Plan) – \$15 billion to fight HIV/AIDS in more than 120 countries around the world. Bilateral programs include a special emphasis on 15 focus countries in Africa, the Caribbean, and Asia that together account

"The United States Congress and the American people have been generous in this effort, and Americans can know that their generosity is making a significant difference."

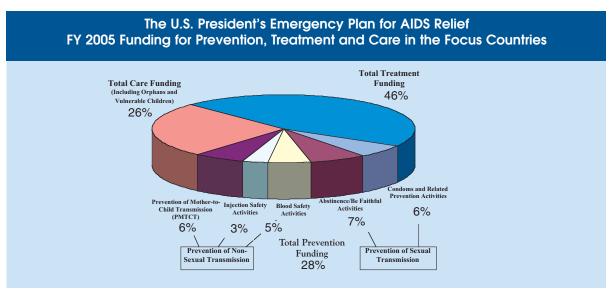
President George W. Bush World AIDS Day December 1, 2005

for approximately one-half of the world's 40 million HIV infections.

In fiscal year 2005, the Emergency Plan provided approximately \$2.8 billion to the fight, and for fiscal year 2006 the U.S. commitment has grown to over \$3.2 billion. President Bush has requested over \$4 billion for fiscal year 2007.

This financial commitment is accompanied by ambitious goals. These include supporting the prevention of 7 million new infections, supporting treatment for 2 million HIV-infected people, and supporting care for 10 million peoples infected and affected by HIV/AIDS, including orphans and vulnerable children, in an accountable and sustainable way.

To reach these goals, the Emergency Plan is implementing the most complex and diverse prevention, treatment and care strategy in the world.





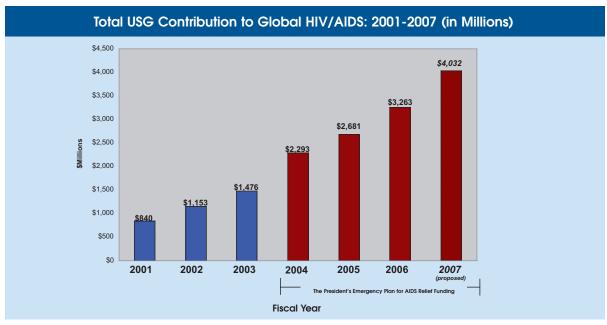
First Lady Laura Bush meets with women from the Mothers to Mothers-to-Be Program (M2M2B) in Cape Town, South Africa. Pfizer Inc loaned a financial management fellow to M2M2B, allowing the program to start 15 new sites and plan for even more — expanding HIV-positive mothers' access to services and a support network while strengthening local capacity.

PEPFAR is working in partnership with host nations to bring high quality programs to scale today, while supporting the development of sustainable local capacity for these programs to continue in the future. In fiscal year 2005, the Emergency Plan supported training or retraining for more than 536,000 service providers (with individuals being trained in multiple areas in certain cases) and supported 14,960 project sites in the focus countries.

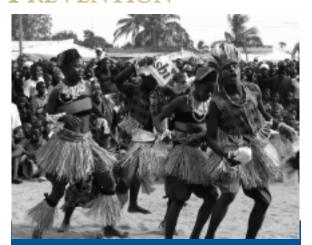
Over 80 percent of all implementing partners in fiscal year 2005 were indigenous organizations. Emergency Plan partners include community- and faith-based organizations, as well as U.S.-based universities and others in twinning relationships with local organiza-

tions. The New Partners Initiative, launched by President Bush on World AIDS Day 2005, will continue to expand and to diversify PEPFAR's partner base by enlisting new organizations.

From the beginning of the Emergency Plan, the United States did not promise good intentions, but results—and accountability for achieving them. Two years after implementation, there is no doubt that the action of the Emergency Plan has produced results. These results may be measured in numbers, but what these numbers represent are children, women, and men who are alive today because of America's action in partnership with host nations.



PREVENTION



In Tanzania the Ishi Campaign — which means "live" in Swahili — combines media initiatives with community activities to promote messages about abstinence, fidelity, condom use and counseling and testing among the 15-24 age group.

The U.S. supports the most diverse portfolio of HIV/AIDS prevention activities of any international partner: the targeted ABC approach (Abstain, Be faithful, correct and consistent use of Condoms where appropriate) to prevent sexual transmission, and the expansion of programs that focus on mother-to-child transmission, blood safety and safe medical injections, intravenous drug use, HIV-discordant couples, women, men, and alcohol abuse, among other key issues.

Growing evidence of all three of the ABC behaviors, and of corresponding reductions in HIV prevalence in certain countries, highlight the importance of support for ABC programs to prevent sexual transmission of HIV. Combined funding for abstinence and fidelity programs was \$75.6 million in 2005 and \$63.3 million in 2004. Funding for intervention programs that support the provision of condoms and related activities rose to \$65.7 million in 2005, a \$20.5 million increase from the \$45.2 million spent in 2004. This targeted approach results in a comprehensive and effective prevention strategy that helps individuals personalize risk and develop tools to avoid risky behaviors under their control.

Prevention Summary

Five-Year Goal in the 15 Focus Countries

Prevent 7 million infections by 2010

Progress Achieved through September 30, 2005

- Supported community outreach activities to over 42 million people to prevent sexual transmission of HIV
- Supported prevention of mother-tochild transmission for over 1.9 million women, antiretroviral prophylaxis for 248,100 women, and prevented an estimated 47,100 infant HIV infections (cumulative for fiscal years 2004 and 2005)
- Supported training or retraining of over 316,000 people in provision of prevention services
- Supported approximately 3,100 service sites for prevention of mother-to-child transmission and blood safety

Allocation of Resources in Fiscal Year 2005

\$286 million to support prevention in the 15 focus countries (28% of focus country resources for prevention, treatment and care)



After participating in a PEPFAR-supported seminar with the Cambodian Ministry of National Defense, Chhoun Saveoun, a 53-year old soldier, vowed to reduce his drinking and to avoid visiting sex workers. He said, "I might be able to escape from the bomb, but I could not flee from dying of HIV/AIDS."

TREATMENT



The Emergency Plan has supported treatment for more than 471,000 people worldwide in 2005, including this mother and child in Guyana. The family also participates in counseling and nutrition activities and receives home care visits three times a month from the Linden Care Foundation.

In achieving this success, the Emergency Plan has moved faster than any other bilateral or multilateral initiative to support the expansion of HIV/AIDS services, using a network model of care to bring life-extending treatment to areas that are among the world's most difficult to serve.

All HIV-infected children, women, and men deserve quality treatment. The Emergency Plan coordinates with host nation contributions and other partners under national strategies to provide the full spectrum of treatment services. Quality treatment includes: trained clinical and laboratory personnel and counselors for adherence, prevention and healthy living; physical infrastructure, including laboratory equipment as well as systems for distribution, logistics and management for drugs and other commodities; treatment for opportunistic infections and other basic care; and much more.

"Before the Emergency Plan for AIDS Relief, only 50,000 people of the more than 4 million people in sub-Saharan Africa needing immediate AIDS treatment were getting medicine—think about that, only 50,000 people. After two years of sustained effort, approximately 400,000 sub-Saharan Africans are receiving the treatment they need."

President George W. Bush World AIDS Day December 1, 2005

Treatment Summary

Five-Year Goal in the 15 Focus Countries

Support antiretroviral treatment (ART) for 2 million HIV-infected individuals

Progress Achieved through September 30, 2005

- Supported ART for approximately 401,000 people in the 15 focus countries (60% of reported clients were women)
- Supported training or retraining of approximately 36,500 people in providing quality ART services
- Supported approximately800 ART sites
- Approximately 7% of those receiving treatment at U.S.-supported sites were children

Beyond the 15 focus nations, PEPFAR has provided support for treatment for **70,000 people** in other nations, for worldwide total of **471,000 people** on treatment with U.S. support.

Allocation of Resources in Fiscal Year 2005

\$479 million to support ART in focus countries (47% of focus country resources for prevention, treatment and care)

CARE



Vietnamese medical practitioners and Buddhist monks are leading the way in unique partnership with the Emergency Plan. Doctors provide training and education, with respect for local traditions and cultures, to monks who care for people living with HIV/AIDS.

Emergency Plan support is not limited to activities to keep people from being infected with HIV and to keep people who become infected alive. PEPFAR also supports societies in developing comprehensive responses that address the full range of HIV/AIDS-related challenges in order to enable nations to move from despair to hope. Care for orphans and vulnerable children strengthens the capacity of families and communities to care for children in their midst. The Emergency Plan also supports programs to care for people living with HIV/AIDS and to provide HIV counseling and testing in a growing number of countries.

"We appreciate the work of people who are affiliated with churches or mosques and other faith groups. When our government can work together with faith-based organizations, we will."

First Lady Laura Bush July 13, 2005

Care Summary

Five-Year Goal in the 15 Focus Countries

Support care for 10 million people infected and affected by HIV/AIDS, including orphans and vulnerable children

Progress Achieved through September 30, 2005

Supported care for nearly **3 million people**, including:

- Care for over 1.2 million orphans and vulnerable children
- Care for over 1.7 million people living with HIV/AIDS, including over 368,000 who received care and treatment for tuberculosis
- Supported counseling and testing for over 9.4 million people to date, including over 6.6 million in fiscal year 2005 through prevention of mother-to-child transmission and other counseling and testing activities

Allocation of Resources in Fiscal Year 2005

\$274 million to support care for orphans and vulnerable children and people living with HIV/AIDS and for counseling and testing in settings other than prevention of mother-to-child transmission (26 % of total focus country resources for prevention, treatment and care)



Women and their babies wait at the Queen Elizabeth II Hospital in Maseru, Lesotho. The hospital works in partnership with the U.S. and Lesotho governments to provide a variety of PMTCT and pediatric AIDS services.

RESPONDING TO THE NEEDS OF CHILDREN

With governmental and nongovernmental host country and international partners, the United States is scaling up a family-based approach to prevention, treatment and care, especially for children infected with and affected by HIV/AIDS.

Children have distinctive needs that must be addressed in a comprehensive, multisectoral way, with programs of high quality that can be sustained by families and communities for the long term. While there is much left to do, the Emergency Plan has brought an intensive focus to children and HIV/AIDS by supporting pediatric HIV prevention, diagnosis, and treatment, as well as care for orphans and vulnerable children (OVC). Highlighting PEPFAR's commitment to pediatric treatment, approximately 7 percent of those receiving treatment at U.S.-supported sites in the focus countries in fiscal year 2005 were children – a number that is expected to rise as pediatric programs are scaled up in the coming years.

ADDRESSING THE NEEDS OF WOMEN AND GIRLS

The Emergency Plan is working to ensure that the activities it supports provide equitable access to services for both women and men and meet the unique needs of women and girls, including orphans and victims of sex trafficking, rape, abuse, and exploitation.

The Emergency Plan is the only international HIV/AIDS program that requires reporting of data disaggregated by gender, with the gender of 90 percent of clients served at USG-supported sites in fiscal year 2005 known. Among these clients:

- Approximately 60% of those receiving antiretroviral treatment were women
- Over 3.2 million pregnant women (including over 1.9 million in fiscal year 2005) have accessed PEPFARsupported prevention of mother-tochild transmission (PMTCT) services
- Approximately 69% of those who received HIV counseling and testing were women
- Among the orphans and vulnerable children (OVCs) served by PEP-FAR activities, 52% were girls



In Nepal, members of Sneha Samaj encourage female leadership and the participation of HIV-positive women in the fight against HIV/AIDS.



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