

Department of Health and Human Services/Centers for Disease Control and Prevention

Global AIDS Program (GAP)

Partnering to implement the President's Emergency Plan for AIDS Relief

Under the direction of the U.S. Global AIDS Coordinator's Office, the HHS/CDC Global AIDS Program (GAP) is a partner in the unified U.S. Government (USG) effort to implement the President's Emergency Plan for AIDS Relief (the Emergency Plan). As part of this effort, GAP helps resource-constrained countries prevent HIV infection; improve treatment, care, and support for people living with HIV; and build capacity and infrastructure to address the global HIV/AIDS pandemic.

The Emergency Plan was announced by President Bush in his 2003 State of the Union Address. The plan is a five-year, \$15 billion initiative to combat the global HIV/AIDS pandemic focused with new resources primarily in 15 of the most afflicted countries. The Emergency Plan objective is to treat 2 million HIV-Infected people, prevent 7 million new infections, and care for 10 million HIV-infected individuals and AIDS orphans. (For more information, please see www.state.gov/s/gac/.)

To help meet the goals of the Emergency Plan, as of 2005 GAP has assigned over 100 CDC staff to the field and employed over 1,000 local staff to implement country programs. In addition to teaming up with other USG agencies and host country governments, GAP has developed strong working relationships with diverse partners on the frontlines of the global AIDS effort since its inception in 2000:

- International health organizations;
- Nongovernmental organizations, including faith-based organizations, universities; and
- Other donor countries and organizations, including the private sector.

Employing evidence-based strategies

GAP focuses its work within three program areas using evidence-based strategies:

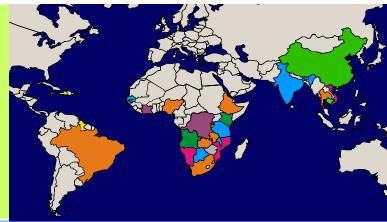
Prevention: HIV counseling and testing; prevention of medical transmission of HIV; prevention and care of sexually transmitted infections; most-at-risk populations; public-private partnerships; and, behavior change communications.

Care and Treatment: Tuberculosis prevention and care; prevention and care of opportunistic infections; palliative care; prevention of mother-to-child HIV transmission; and, antiretroviral therapy.

Surveillance and Infrastructure Development: surveillance, laboratory capacity building, informatics, monitoring and evaluation, and training.

GAP has 25 country programs and four regional offices around the globe. Fifteen of GAP's country programs¹ are in focus countries under the Emergency Plan. GAP has 10 additional bilateral country programs.² The 25 country programs and four regional offices serve a total of 52 countries in Asia, Africa, Central America and the Caribbean.

² Angola, Brazil, Cambodia, China, Democratic Republic of Congo, India, Malawi, Senegal, Thailand, Zimbabwe



HHS/CDC GAP: A proud partner in the unified U.S Government effort to implement the President's Emergency Plan for AIDS Relief.







¹ Botswana , Cote d'Ivoire, Ethiopia, Guyana, Haiti, Kenya, Mozambique, Namibia, Nigeria , Rwanda , South Africa , Tanzania, Uganda, Vietnam, Zambia

Making an impact

Working collaboratively with other USG agencies under the coordination of the Office of the U.S. Global AIDS Coordinator, in FY04 GAP:

- ♦ Conducted 1,972,309 HIV lab tests and 272,797 TB diagnostic tests. In addition, over 440 GAP-supported sexually transmitted infection service sites treated 258,228 individuals.
- ♦ Contributed to the overall USG Emergency Plan efforts of directly supporting antiretroviral drug therapy (ART) for nearly 155,000 patients in the 15 focus countries.
- Contributed to the overall USG Emergency Plan efforts of providing prevention of mother-to-child transmission (PMTCT) services for nearly 1.3 million pregnant women and providing over 125,000 HIV-positive pregnant women with short-course antiretroviral drugs, protecting an estimated 24,000 babies from HIV infection.
- Supported HIV counseling and testing to 299,933 individuals and PMTCT services to 557,605 pregnant women in its other 10 bilateral country programs
- Funded cooperative agreements with national blood transfusion services in 14 Emergency Plan focus countries to ensure a safe blood supply. In addition, GAP has supported programs for medical injection safety in South Africa, Kenya, Tanzania, Haiti, Rwanda, Côte d'Ivoire, and Botswana.
- Established an HIV/AIDS Monitoring and Evaluation Field Corps to build capacity in surveillance and in monitoring and evaluation (M&E) in countries supported by USG, UNAIDS, the World Health Organization, the Global Fund, and the World Bank. In FY 2004, M&E officers were placed in 25 countries to provide assistance in establishing and implementing standardized program management, evaluation, and reporting on major HIV/AIDS programs.
- Supported surveillance activities in all 25 GAP countries.

GAP in action: Supporting home-based care in Uganda

Christopher Omoit is alive today because of a unique program that delivers life-saving drugs and education to his home in rural Uganda.

The Home-Based AIDS Care Program, implemented in collaboration with the AIDS Support Organization and the Ministry of Health, serves 53-year-old Christopher, his wife Florence, their five children, and two orphans from Christopher's sister who died of AIDS. The family lives four miles away from the nearest health clinic in an area so remote that even healthcare workers have trouble getting there.

Christopher was laboratory technologist until 1999, when he became too sick to continue working and tested positive for HIV. Through U.S. Government support, his family was provided HIV testing and counseling. His wife has remained HIV-negative because they were counseled about how to prevent transmission. Christopher, however, kept falling ill until he started receiving antiretroviral therapy (ART), delivered to his home each week by community-level workers on motorcycles.

Christopher's family helps him take his drugs on-time. They also have a safe drinking water vessel to prevent diarrhea, bed nets to prevent malaria, and

Christopher takes a simple antibiotic, cotrimoxazole, to prevent illness and prolong his life. Christopher is adhering to his drug regimen better than most people with HIV in America do. In FY05 Emergency Plan support for ART will expand to 39,000 the number on ARVs, with particular attention to access for vulnerable groups such as rural populations.

For more information please visit our website at http://www.cdc.gov/gap/.





