



# The President's Emergency Plan for AIDS Relief February 2005 Newsletter

A Monthly Update on the U.S. Commitment to Turn the Tide Against Global HIV/AIDS

## OFFICE OF THE U.S. GLOBAL AIDS COORDINATOR

### *Ambassador Tobias Announces Treatment Numbers in Davos, Switzerland*

On Wednesday, January 26, immediately before the opening of the World Economic Forum in Davos, Ambassador Tobias joined the heads of UNAIDS, WHO, & the Global Fund to announce progress in making treatment available in the developing world.

The President's Emergency Plan has supported anti-retroviral treatment for approximately 155,000 men, women, and children in its first eight months through bilateral programs in 15 of the most afflicted countries in Africa, Asia, and the Caribbean – turning the despair of suffering and death to the hope of health and life. These numbers reflect efforts through September 2004; today, there are many more people benefiting from the President's Emergency Plan.

The President's Emergency Plan is well ahead of schedule to meet its goal to support treatment for more than 200,000 people by June 2005 (one year after full implementation).

### *South African Generic Drug Eligible for Use in Emergency Plan*

On January 25, 2005 the U.S. Food and Drug Administration (FDA) reported that it has granted tentative approval to Aspen Pharmacare (South Africa) for a generic antiretroviral drug product through an expedited review process established for certain antiretroviral drugs. The three drug combination is one of the most commonly used regimens in resource-limited settings and provides patients with an easy-to-use package of two tablets twice per day.

The U.S. Global AIDS Coordinator, Ambassador Randall Tobias, commented, "President Bush's Emergency Plan for AIDS Relief is moving aggressively to support national strategies to expand treatment for HIV/AIDS. Today's tentative approval of a generic co-packaged antiretroviral drug product made in South Africa is another step in ensuring that families throughout the world receive the same quality of drugs that we provide to our own families in the U.S."



low income neighborhood in West Delhi, 14 year-old Chandini is concentrating on getting her petticoat sewn straight: "If I do this right, hopefully I can sell this piece and make some money." Chandini is enrolled in a cutting and tailoring course offered at the center. Her friend Hamida has already started up a small business. She sews petticoats for 15 rupees each.

For Chandini and Hamida, this course could save their lives. Both girls come from a community of migrant rag pickers where young girls roam the streets alone at night, often falling prey to sexual abuse. Others are married off very young to men who have multiple partners. Desperate to feed their families and survive, the girls sometimes turn to prostitution. The growing prevalence of HIV/AIDS in their migrant community is setting off warning bells among health care workers.

Through the President's Emergency Plan for AIDS Relief, the United States Agency for International Development (USAID), along with public and private partners, is working to tackle India's epidemic. In 2004 alone, the U.S. government provided \$20.5 million to non-governmental organizations (NGOs) and the Indian government to support HIV/AIDS prevention, treatment and care programs. Sexual contact is the main method of transmission. However, there is very little public awareness of how HIV is spread. "Part of our struggle is to get the face of AIDS out there and make people respond to it," says Robert Clay, director of health programs for USAID India.

One such project is the YWCA community center in Delhi, which empowers girls by giving them realistic alternatives to being on the street or marrying at very young ages. Girls take life skills classes that teach them how to take care of their bodies and protect themselves from sexually transmitted diseases. AIDS is discussed openly and peer leaders perform street plays in their communities to spread the message.

## INDIA

### *The President's Emergency Plan for AIDS Relief Helps Women and Girls*

Sitting on the concrete floor of a YWCA community center in Najafgarh, a

## BOTSWANA

### *Cooperative Efforts Produce a Comprehensive Approach to Tackling HIV/AIDS*

In Botswana, the country with the second highest per capita rate of HIV, the U.S. Mission works hand-in-hand with the Government of Botswana to fight the HIV/AIDS pandemic:

#### *Helping Mothers and Children*

In 2004, the Botswana Ministry of Health and HHS/CDC-Botswana (BOTUSA) created a model for provider-initiated antenatal HIV testing in 12 clinics in Francistown, Botswana. A survey demonstrated that provider-initiated HIV testing is acceptable to most pregnant women (91%). The Ministry of Health has endorsed the initiative as a national model.

#### *Tebelopele Enables Thousands to "Know Their Status"*

*Tebelopele*, a national network of counseling and testing centers, provides free, anonymous HIV counseling and testing on a walk-in basis, with same-day results. Since its establishment 2000, *Tebelopele* has developed into 16 freestanding centers, eight satellite centers and four mobile units. *Tebelopele* has provided counseling and testing to more than 118,133 people.

#### *Faith-Based Group Provides Training, Information and Support*

Since 1997, the Botswana Christian AIDS Intervention Program has been a leader in HIV/AIDS intervention among faith-based groups since its founding. In FY 2004, with BOTUSA's support, 250 religious leaders were trained in HIV counseling.

#### *Peace Corps Returns to Botswana to Fight HIV/AIDS*

At the request of Botswana's President Mogae, the Peace Corps returned to Botswana in 2003 after a seven-year absence. All 44 Peace Corps Volunteers now in Botswana are engaged in efforts to fight HIV/AIDS at the grassroots level.



President Bush with Botswana Peace Corps Volunteers

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