

Office of the Global AIDS Coordinator





The President's Emergency Plan for AIDS Relief



Countries shown in the inset boxes are not at the same scale as countries in Africa. For display purposes, Vietnam, Haiti and Guyana are shown at a scale 2.5 times larger than the countries in Africa.

Produced by the HLU
June 2004 Phone: 202 203-7780





New Way of Doing Business

- **One integrated USG bilateral program:**
Department of State, Department of Defense, Department of Commerce, Department of Labor, Department of Health and Human Services (Including CDC, FDA, NIH, and Health Resources and Services Administration (HRSA), U.S. Agency for International Development, Peace Corps
- **Results oriented**
- **Network Model**
Promotes linkages between prevention, treatment and care
- **Guiding principle that success is dependant on building local capacity and leveraging all sectors of society**



Network Model

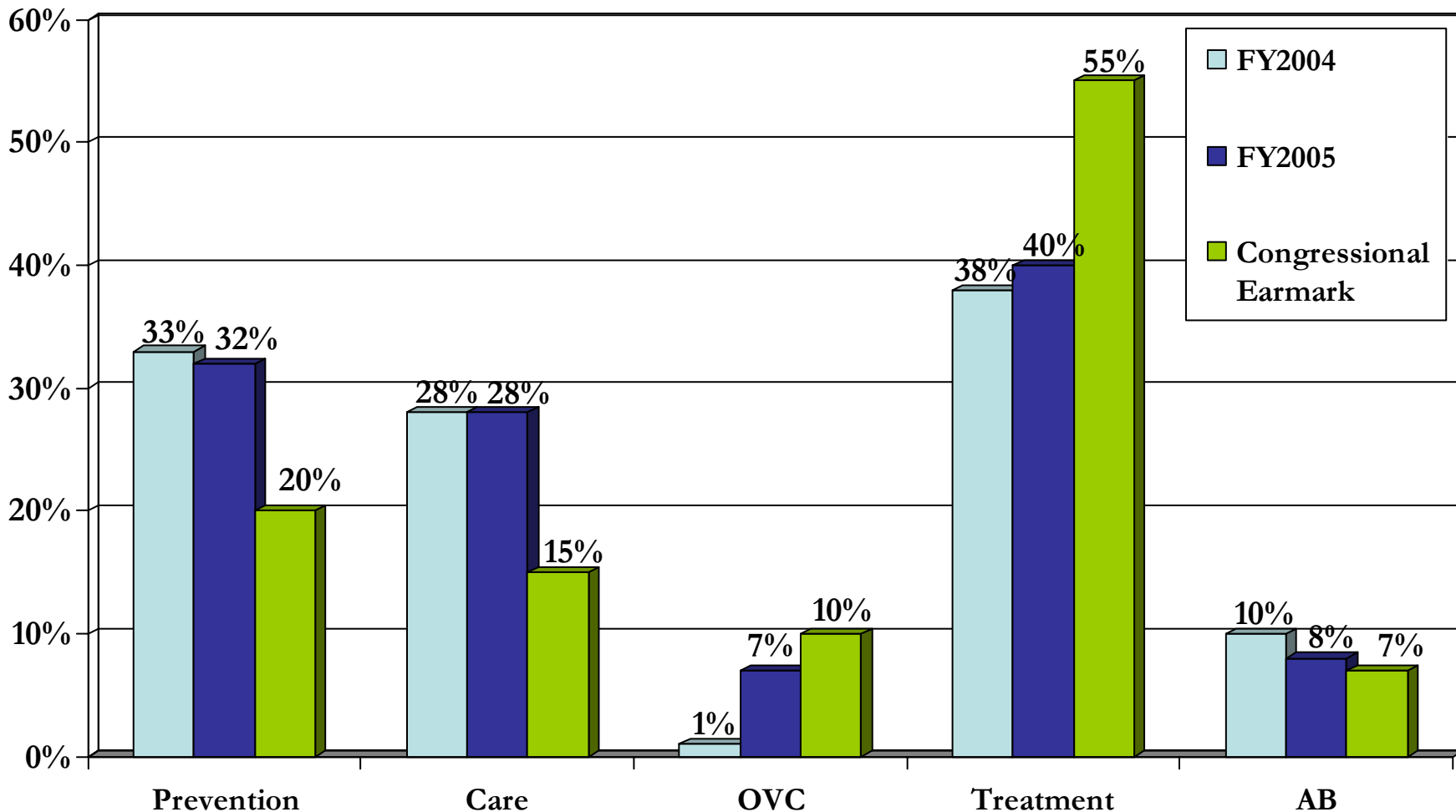
Network Model: Layering of Expertise*

	Infrastructure	Personnel	Services
Tertiary satellites/ mobile units	Clinical evaluations	Medical assistant or health visitor	Home visits Basic clinical evaluations and follow-up Traditional healers
Secondary satellites/ mobile units	Basic labs Basic clinical care	Junior doctor, nurse practitioner or medical assistant Counsellors Basic lab technologists Pharmacists	Clinical evaluation Care including treatment for TB, malaria and HIV-related infections Prevention including PMTCT Plus all above
Primary Satellites	Advanced labs Advanced clinical care	Doctors Counselors Lab technologists Pharmacists	Basic clinical care Basic antiretroviral therapy Plus all above
Central Medical Centers	State-of-the-art labs High-level clinics and hospital	Specialist doctors and nurses Trainers Counselors Managers Pharmacists Lab technologists	Complete clinical care Complicated antiretroviral therapy and care Plus all above

PMTCT = prevention of mother-to-child-transmission
*Model currently being implemented successfully in Uganda



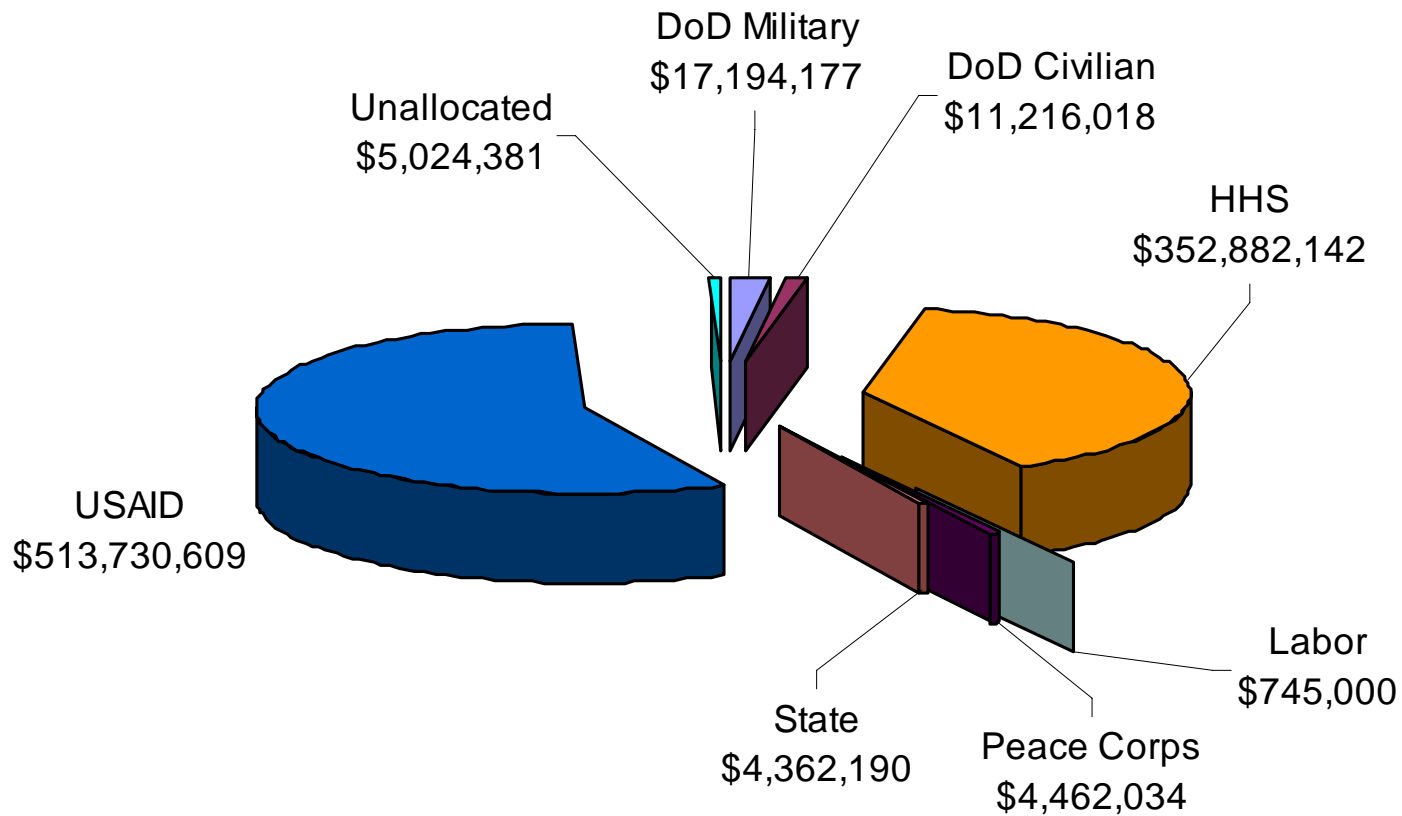
Overall Comparison of Program Allocations vs. Congressional Earmarks



FY05 Figures as of 2nd CN to Congress, March 2005



Total Amount Requested per Implementing Agency, FY2005



Total requested: \$909,616,551



Global AIDS Coordinator: New leadership model

- Lead U.S.G. international HIV/AIDS efforts
- Ensure USG program and policy coordination
- Pursue coordination with other countries and international organizations
- Resolve policy, program and funding issues among USG agencies
- Directly approve all USG focus country HIV/AIDS activities
- Promote accountability and monitor progress toward meeting Emergency Plan goals



Headquarters structures

- Ambassador Tobias
- Agency Principals – Policy Group
 - O/GAC, USAID, HHS, White House, NSC
- Deputy Principals - Management/Program Group
 - O/GAC, USAID, HHS, Peace Corps, DoD, DoL,
- Scientific Steering Committee
 - O/GAC, USAID, HHS, NIH, DoD
- Core Teams
 - O/GAC, USAID, HHS, Peace Corps, DoD, DoS
- Technical Working Groups
 - O/GAC, USAID, HHS, Peace Corps, DoD, NIH, USDA



In-Country Team

- Lead by the U.S. Ambassador
- All U.S. agencies in-country represented
- Frequently works with a host government steering committee
- One program, one reporting system
- Supported by a headquarters core team
- Participatory approach with implementing partners



Overall Coordination

Host Government



In-Country Partners

Donors
Implementing partners
Other stakeholders



USG Team

U.S. Ambassador
Embassy staff
HHS
USAID
DoD
DOL
Peace Corps



Headquarters

Ambassador Tobias
Principals
Deputy Principals
Core teams
Technical Working
Groups
Agency Support



Focus Countries

- Five year strategy provides road map
- Annual Country Operational Plans (COPs)
 - 5-year targets provided
 - Annual funding allocation
 - Plans developed in-country in collaboration with partners, core teams, and other donors
 - Reviewed by interagency panel, approved by Ambassador Tobias
- Track 1 grantees/central supervision
- Rapid Expansion Fund 2005 - \$117 million
- Supported by inter-agency core teams
 - Channel information
 - Problem solve
 - Serve as Washington-based country representatives
 - Leverages technical assistance and support through technical working groups



Other PEPFAR country programs

- Primary backstopping through Agencies – some knowledge and support through O/GAC
- Follow O/GAC policies and guidance
- Collaborative planning and programming
- Look to leveraging other partners and donors
- Common indicators
- In some cases, strategies and planning



Technical Support

- Interagency technical working groups
- Funding of activities and technical support
 - Track 1
 - Blood Safety
 - Safe Injection
 - ART
 - OVC
 - ABY
 - Country Operational Plans
 - Rapid Expansion Fund - supplemental



Technical/Programmatic Support Interagency Working Groups

- Care and Treatment
 - PMTCT/Pediatric AIDS Development
 - TB/HIV
 - Palliative Care
 - Adult Treatment
- Prevention
 - ABC (including youth)
 - Populations at increased Risk
 - Medical Transmission
 - Counseling and Testing
 - IDUs
- Orphans and Vulnerable Children
- Human Capacity Development
- Strategic Information
- Management
- Faith Based Organizations
- Procurement
- Food



Technical Working Groups

Roles and Responsibilities:

- define key program components
- address policy issues
- provide technical assistance
- provide technical review
- provide quality assurance oversight
- address issues for targeted evaluation

Involved in technical review of:

- country operational plans
- rapid expansion funds
- abstracts for annual conference
- policy development
- technical assistance
- targeted evaluation



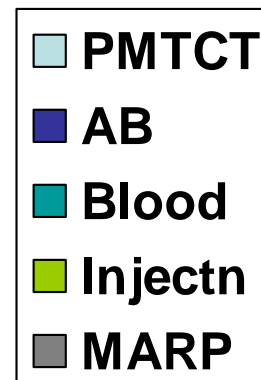
Technical Approaches

Example - ABC Guidance

- **Abstinence and behavior change for youth - AB**
 - 10 – 14 y.o. will fund age and culturally appropriate AB programs
 - Youth > 14 y.o. will fund ABC programs (condom provision in an out of school program)
- **For persons who engage in high risk activities - ABC**
 - Will provide outreach, prevention messages and risk reduction counseling, targeted condom information and provision, HIV counseling and testing, STI services, and promote substance abuse prevention and treatment among HIV positives



Distribution of Prevention Dollars by Activity





Targeted Evaluation

- Reviewed by Targeted Evaluation Sub-committee and Scientific Steering Committee
- Incorporated in country operational plans - \$3.4 million
- Central funding - \$9 million – selected topics
 - Cost effective monitoring ART
 - Successful models for improving ART adherence
 - Impact of PMTCT programs and linkages to PMTCT+ programs
 - Evaluation of AB programs for youth
 - Cost Effectiveness of ART models
 - Successful models for OVC care
 - Successful models for Palliative Care



Issues and Challenges - Gender

The number of women and girls living with HIV is growing rapidly - girls and young women rates 3 – 6 times higher than boys their age

- Address harmful social norms and practices that limit control over sexual lives and restrict access to information, economic resources and legal rights necessary to protect them from HIV
- Activities - 2005 COP:
 - Increasing gender equity in HIV/AIDS programs and services
 - Women are: 56% of ART clients; 52% counseling and testing clients
 - Reducing violence and coercion
 - Addressing male norms and behaviors
 - Increasing women's access to income and productive resources (103 programs)
 - Increasing women's legal protection (106 programs)



Issues and Challenges

Adult ART Issues

- When to start (eligibility, clinical staging/CD4)
- Promoting adherence
- Patient monitoring (clinical/programmatic)
- Who can deliver services, where?
- Definition of treatment failure
- Drug procurement; logistics management
- Integration of prevention, care, cross-referral systems
- Program monitoring/targets/progress



Issues and Challenges

Pediatric ART Issues

- Establishing pediatric care and treatment targets
- Infant follow up, infant diagnosis, program effectiveness monitoring
- Programmatic scale-up (beyond specialty approach)
- Pediatric ARV and other drug formulations
- Integrating children into palliative/basic care package



Wrap Around

“Wrap around” coordinates and leverages other U.S.G., donor, private sector and host country programs for a comprehensive approach

Education sector – Zambia

- PEPFAR – HIV programs for teachers, life skills in schools, secondary scholarships for AIDS orphans, community schools
- Africa Education Initiative – improving curricula, secondary scholarships for girls and orphans
- Government of Zambia – primary school scholarships
- UNICEF/World Food Program – community schools



First Year Results

- Supported treatment for 155,000 people
- 1.2 million women received PMTCT services
- 120 million people reached with ABC messages
- Supported care for more than 1.7 million people infected and affected by HIV/AIDS, including 630,200 orphans and vulnerable children
- Over 80 % of the more than 1,200 partners are indigenous organizations

Thank you





Palliative Care

Palliative care includes basic health care and support, symptom management, and end-of life care:

- Routine clinical monitoring and management of HIV/AIDS complications
- Opportunistic infection prophylaxis and treatment Management of opportunistic cancers;
- Management of neurological and other HIV/AIDS associated diseases;
- Symptom diagnosis and relief
- Social support (e.g., organization of basic necessities such as nutrition, financial assistance, legal aid, housing, etc.)
- End-of-life care
- Mental health care and support
- Social support including organization of basic necessities such as nutrition, financial assistance, legal aid, housing, and permanency planning
- Support for caregivers and bereavement support for family members



Track 1 Awards

- Track 1
 - Blood Safety
 - Safe Injection
 - ART
 - OVC
 - ABY



Prevention of Medical Transmission

- Track 1 Blood Safety Awards
 - Lead agency HHS/CDC
 - Total award for 20 month budget ('04/'05) \$74 million
 - Bulk of money to National Transfusion Centers or MoH
 - Paired with one of five groups providing TA
 - American Association of Blood Banks
 - Safe Blood for Africa
 - Sanguin Blood Consulting
 - Social & Scientific Systems
 - World Health Organization
 - Funds:
 - infrastructure,
 - donor recruitment and blood collection,
 - testing,
 - assessment of transfusion practice and blood utilization
 - Monitoring and Evaluation



Prevention of Medical Transmission

- Track 1 Medical Injection Safety Awards
 - Lead agencies HHS/CDC and USAID
 - Total award FY 05 \$30 million
 - Implemented with MoH with TA provided by
 - John Snow Inc
 - University Research Corporation
 - Chemonics
 - Initiatives Inc.
 - Funds
 - Rapid assessments
 - Drafting national plans
 - Training in universal precautions
 - Provision of necessary equipment and supplies



Track 1-OVC

Round 1 recipients:

- Opportunity International/Habitat for Humanity: ~\$5M/5 years
- Catholic Relief Services: ~\$9M/5 years
- Save the Children Alliance: ~\$10M/5 years
- Care International: ~\$5.25M/4 years
- World Vision: ~\$5M/5 years

Round 2 recipients:

- Project Concern
- Christian Aid
- Christian Children's
- HOPE
- Family Health International
- Plan USA
- Salvation Army World
- Project Hope
- AVSI
- Africare

Approximate FY05 funding for OVC Track 1 projects: ~\$20-\$27M



Track 1.0 ART Partners

- Track 1.0 ART Partners PA04080
- Implementers
 - Elizabeth Glaser Pediatric AIDS Foundation,
 - AIDSRelief,
 - Mailman School of Public Health of Columbia University and
 - Harvard School of Public Health
- FY05 funding approximately \$92 million