

# U.S. Department of Health and Human Services Centers for Disease Control and Prevention Global AIDS Program

*The HHS/CDC Global AIDS Program 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.*

## PARTNERSHIP

Since its inception in 2000, the HHS/CDC Global AIDS Program (GAP) has worked to mitigate the devastating effects of HIV/AIDS around the world, collaborating with diverse partners:

- Host country governments
- U.S. government agencies
- Other donor countries and organizations, including the private sector
- International health organizations
- Non-governmental organizations, including faith-based organizations
- Universities

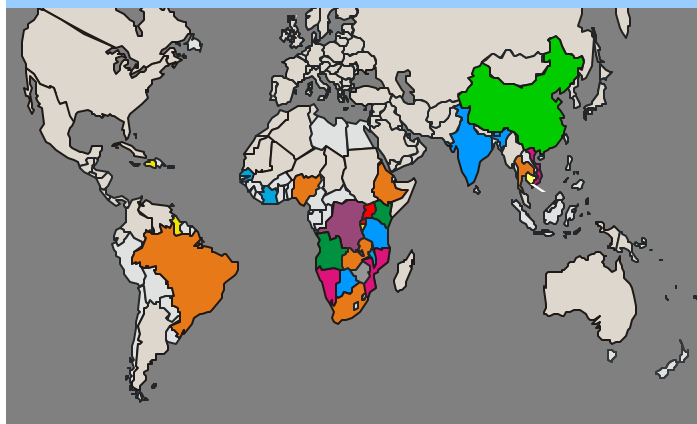
## STRATEGY

HHS/CDC GAP focuses its work within three program areas through 17 technical strategies:

- **Prevention:** Behavior change, prevention of HIV in drug-using populations, voluntary counseling and testing (VCT), prevention/treatment of sexually transmitted infections, blood safety, youth strategy, public-private partnerships
- **HIV/AIDS Treatment and Care:** Appropriate use of antiretroviral therapy, prevention of mother-to-child transmission, prevention/treatment of opportunistic infections, prevention/treatment of tuberculosis, palliative care
- **Surveillance and Infrastructure Development:** Surveillance, informatics, training, laboratory support, monitoring and evaluation

## GLOBAL PRESENCE

*GAP works in 25 countries and in 4 regional offices around the globe, as shown here, in Africa, Asia, the Caribbean, and Latin America.*



## THE PRESIDENT'S EMERGENCY PLAN FOR AIDS RELIEF

On January 28, 2003, during the State of the Union Address, President Bush announced The President's Emergency Plan for AIDS Relief (The Emergency Plan), a five-year, \$15 billion initiative to combat the global HIV/AIDS pandemic. These resources focus primarily on 15 of the most afflicted countries in the world. Specifically, The Emergency Plan is intended to treat 2 million HIV-infected people, prevent 7 million new infections, and care for 10 million HIV-infected individuals and AIDS orphans. For further information on The Emergency Plan please see (<http://www.state.gov/s/gac/>).

Under coordination of the State Department Global AIDS Coordinator's Office, HHS/CDC GAP partners with other U.S. government agencies, including the National Institutes of Health, the Health Resources Services Administration, the U.S. Agency for International Development, the Department of Defense, and the Peace Corps to achieve The Emergency Plan goals in the 15 focus countries. At the same time, GAP continues to provide vital support to all 25 of the GAP country programs and four regional programs.

## SUCCESS

HHS/CDC GAP has made tremendous progress since its inception:

- GAP has built human resource capacity by supporting training activities across all program areas- training over 46,000 individuals in the past three years.
- Over one million individuals were HIV-tested at GAP-supported VCT sites in the past three years.
- By FY 2003, GAP was supporting model information systems for National AIDS Control Programs in 15 GAP countries.
- GAP was supporting surveillance activities in all 25 GAP countries by FY 2003.
- Over 600 GAP-supported sexually transmitted infection service sites treated 64,068 individuals in FY 2003.
- GAP provided assistance in strategic planning and/or the development of policies/guidelines for HIV/AIDS care and treatment services in 18 GAP countries and 15,742 individuals received ARVs in facilities supported by GAP in FY 2003.
- GAP-supported prevention of mother-to-child transmission sites provided ARV treatment to 25,981 pregnant women in FY 2003.

## BUILDING CAPACITY IN INDIA

When GAP first began working with the Government Hospital of Thoracic Medicine, generally considered the largest AIDS care center in India, the hospital's capacity for using patient records (discharge data, medical history, laboratory test results, for example), to generate data for planning and prioritizing care, was limited. To address this, GAP helped to build the HIV Information System, an electronic system to store and retrieve vital patient data. Since then more than 400,000 patient records have been entered into the system and data for monitoring patients, and for planning and prioritizing care activities, has greatly improved. Additionally, GAP has expanded human resource capacity by training staff in the vital public health skills of data gathering/analysis and information system management, thus enhancing their ability to prioritize needs and plan better care programs.

This critical GAP-supported capacity building has helped enhance essential AIDS care infrastructure, and has helped pave the way for the Government of India's provision of AIDS treatment, which began in April 2004.



## HOME-BASED CARE IN UGANDA

The GAP-supported Home Based AIDS Care Project studies how people living in rural, resource-limited settings can best access quality, comprehensive HIV care and treatment that includes antiretroviral (ARV) therapy. This project provides a basic preventive care package that includes voluntary HIV testing and counseling to family members of persons with HIV in the home; HIV prevention education; TB screening and treatment; safe water; provision of cotrimoxazole prophylaxis, an antibiotic to prevent infections and prolong life; and ARV treatment and adherence support.

Christopher, pictured here, first tested positive for HIV in 1999 after he lost his job as a laboratory technologist because of frequent illness. He receives the basic preventive care package and ARV drugs through this program –a field officer rides a motorcycle out to his rural home to deliver them - and is now much stronger and healthier.

Groundbreaking GAP-supported projects, like this one, will provide critical information on the provision of AIDS care, including ARV therapy, to rural Africans and will inform efforts to expand AIDS care in Africa.



In FY 2004, HHS/CDC GAP programs are expected to expand significantly with increased funding through the President's Emergency Plan for AIDS Relief. The ground work laid by HHS/CDC GAP programs will help inform the rapid expansion of prevention, care and treatment, and surveillance and infrastructure development activities within The Emergency Plan and GAP is committed to continuing in this effort to combat the global HIV/AIDS pandemic.

For further information please visit our website  
<http://www.cdc.gov/nchstp/od/gap>

or write to us at  
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