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Subseries: National AIDS Strategy

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Folder Title:
ONAP [Office of National AIDS Policy] Review 6/28/96 [1]

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The National Strategy for HIV and AIDS
Draft for Office of Management and Budget Review: 6.28.96

III. APPENDICES

***The National Strategy for HIV and AIDS, Appendix A: Prevention
Draft for Office of Management and Budget Review: 6.28.96***

Agency: Health Care Financing Administration

Goal: Reduce perinatal transmission among Medicaid-eligible women.

Objectives: Develop and implement a campaign to inform HIV positive women in selected pilot areas about the benefits of AZT in FY 95.

Expand pilot project to one State in all regions in FY 96.

Expand project to include all States in FY 97.

Action Steps: Develop, obtain, and distribute brochures and other materials describing current guidelines for the use of AZT during pregnancy for preventing perinatal transmission, and Medicaid eligibility and coverage to Medicaid eligible women.

Descriptions: Establish a consumer-oriented educational campaign in key states with high HIV prevalence rates among women.

FY 95: \$50,000 (Federal share)

FY 96: \$60,000 (Federal share)

FY 97: \$185,000 (Federal share, subject to availability of funds)

Populations Served: HIV positive women eligible for Medicaid coverage.

Constituency Involvement: Significant consultation with high-risk pregnant women and their advocates.

Unmet Need: The pilot project will not initially include women of unknown or negative HIV serostatus.

***The National Strategy for HIV and AIDS, Appendix A: Prevention
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Agency: Department of Housing and Urban Development

Goal: Reduce the number of new infections among residents of public and subsidized housing.

Objective: Provide primary prevention programs to public housing residents at risk for HIV infection. Coordinate meetings of the state and local agencies responsible for the prevention program services.

Action Steps: Forge local partnerships and improve coordination of existing resources.

Descriptions: HIV/AIDS Prevention in Public Housing Demonstration Program.

FY 95: \$0 (Activities carried out within existing HUD personnel resources.)

FY 96: \$0

FY 97: \$0

Populations Served: Children and adults in public housing in five targeted cities.

Constituency Involvement: Input received through local planning groups.

Unmet Need: The initial demonstration program reached sites in five cities. An increase in resources would enable HUD to meet increasing demand for services and permit expansion to include other public and subsidized housing efforts.

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Agency: Department of Defense

Goal: Preservation of an effective fighting force through prevention of HIV infection.

Objective 1: Prevent HIV infection in service members.

Reduce the number of new active duty HIV infection by 20 percent by 1997 based on a 1995 baseline figure of 204 persons for all services.

Action Steps: Provide basic information on HIV transmission and risk reduction for new recruits, civilian work force members, and officers;

Require education and general military training on methods of transmission and approaches for avoiding transmission, including barrier methods, avoidance of intravenous drug use, and use of universal precautions;

Provide training for personnel, instructors, and peer educators; and

Support train the trainer courses to develop multidisciplinary teams from medical, dental, nursing, and public health corps for promoting HIV and AIDS education.

Objective 2: Ensure safety of the Armed Services Blood Program Office (ASBPO).

Action Steps: Advise service personnel with serologic evidence of HIV infection or repeated ELISA reactivity, but Western Blot negative or indeterminate, to refrain from donating blood.

Employ ASBPO "Look Back Program" to trace contacts of identified positive donors who serconvert after blood donation -- trace and contact blood recipients.

FY 95: Approximately \$500,000

FY 96: Approximately \$500,000

FY 97: Approximately \$500,000

Populations Served: Active duty service members and their eligible family members, health care providers and those at risk of exposure to body fluids, and recipients of ASBPO blood products.

Constituency Involvement: Active duty force, affiliated civilian workforce, and the health care and public health communities.

***The National Strategy for HIV and AIDS, Appendix A: Prevention
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Unmet Need: None

***The National Strategy for HIV and AIDS, Appendix A: Prevention
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Agency: Department of Justice

Goal: Reduce risk of infection of infection to INS detainees who are at risk.

Objective: Educate detainees believed to be at risk regarding HIV/AIDS and thereby reduce the risk of transmission and new infections.

Action Steps: Upon obtaining informed consent, test detainees suspected of or diagnosed with HIV/AIDS or test upon detainee request and provide pre- and post-test counseling to detainees deemed at risk.

Descriptions: Provide limited testing and counseling.

FY 95: Part of overall operating budget.

FY 96: Part of overall operating budget.

FY 97: Part of overall operating budget.

Populations Served: INS Detainees.

Constituent Involvement: None.

Unmet Need: None.

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Agency: Department of Justice

Goal: Reduce the risk of employee infection and avoid possible worksite performance problems.

Objective: Educate Bureau of Prisons (BOP) staff, Drug Enforcement Agency (DEA) employees, Federal Bureau of Investigation (FBI) employees, Immigration and Naturalization Service (INS) employees, and U.S. Marshals Service (USMS) regarding HIV/AIDS transmission and thereby reduce the risk of infection. Educate all Justice Department employees about HIV/AIDS in the workplace.

Action Steps: For Bureau of Prison (BOP) staff provide:

annual HIV information update and infectious disease training to all staff;

produce inmate and staff HIV educational videos; and

participate at least quarterly with HRSA in audio conferences on HIV issues.

For DOJ employees in occupations that possess a heightened possibility for exposure to HIV or other bloodborne pathogens, including employees of the DEA, FBI, INS, and USMS provide:

general training and field office training;

annual bloodborne pathogen training to all personnel as mandated by OSHA (discussion of HIV/AIDS is included in this training); and

an annual update on the bloodborne pathogens training as necessary to discuss new information or changes in the use of safety equipment, etc.

For all Department employees, the Justice Management Division (JMD) provided:

instructional materials to be used in a one time general training;

and technical assistance to other DOJ components.

Descriptions: DOJ staff prevention training programs.

FY 95: Part of overall operating budget.

FY 96: Part of overall operating budget.

FY 97: Part of overall operating budget.

***The National Strategy for HIV and AIDS, Appendix A: Prevention
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Populations Served: DOJ employees.

Constituency Involvement: None.

Unmet Need: Additional resources for field office training for USMS and FBI.

***The National Strategy for HIV and AIDS, Appendix A: Prevention
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Agency: Corporation for National Service

Goal: To offer HIV/AIDS education programs and other services with volunteers from the Learn and Serve America project.

Objective: Support HIV-related Learn and Serve America projects.

Action Steps: Continue programs for youth in elementary school or high school to volunteer in community service activities, such as peer education in HIV/AIDS prevention.

Continue to award higher education grants directly to colleges and universities which provide service opportunities on HIV/AIDS prevention.

Program Description: Examples of higher education programs include Robert Wood Johnson Medical School and the University of San Diego where students provide education on HIV/AIDS to homeless and other high risk populations.

FY 95: Part of overall operating cost.

FY 96: Part of overall operating cost.

FY 97: Part of overall operating cost.

Populations Served: Persons living with HIV and AIDS and others who could benefit from HIV/AIDS education.

Constituency Involved: The Learn and Serve America program and students across the country.

Unmet Needs: Without these programs, students would not have an opportunity to serve their communities in HIV/AIDS related projects.

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Agency: Food and Drug Administration

Goal: Reduce transfusion-transmitted HIV infection.

Objective: Ensure supply and safety of the national blood supply.

Action Steps: Establish policies, expedite review of product applications, conduct approval inspections, oversee surveillance, and support enforcement activities.

Descriptions: Encourage high risk donors to exclude themselves; update list of unsuitable donors; quarantine and test blood; investigate incidents to identify, and rectify common errors in blood banks.

FY 95: \$17,458,000

FY 96: \$17,458,000

FY 97: \$17,458,000

Populations Served: All persons who may receive blood or blood products.

Constituency Involvement: The FDA depends on scientific advisory committees to provide independent expert advice to the agency in its evaluation of regulated products. These committees are composed of representatives from academia, research, government, industry, and patient advocates.

Unmet Need: With the passage of Prescription Drug Use Fee Act of 1992, the FDA has been able to expeditiously review HIV/AIDS related therapeutic applications. With the continuation of the provisions in the Act, the FDA will be able to continue expeditious reviews.

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GOALS ...

HCFA	Reduce perinatal transmission among Medicaid-eligible women.
HUD	Reduce the number of new infections among residents of public and subsidized housing.
DOD	Preservation of an effective fighting force through prevention of HIV infection.
DOJ	Reduce risk of infection of infection to INS detainees who are at risk.
	Reduce the risk of employee infection and avoid possible worksite performance problems.
CorpNS	To offer HIV/AIDS education programs and other services with volunteers from the Learn and Serve America project.
FDA	Reduce transfusion-transmitted HIV infection.

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* File name:   Server: HP4-1060                *
* Directory:   *
* Description: LPT1 Catch                       *
*              June 29, 1996                     8:23pm          *
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Unmet Need: None

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Unmet Need: None.

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Unmet Need: Additional resources for field office training for USMS and FBI.

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Constituency Involved: The Learn and Serve America program and students across the country.

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Populations Served: All persons who may receive blood or blood products.

Constituency Involvement: The FDA depends on scientific advisory committees to provide independent expert advice to the agency in its evaluation of regulated products. These committees are composed of representatives from academia, research, government, industry, and patient advocates.

Unmet Need: With the passage of Prescription Drug Use Fee Act of 1992, the FDA has been able to expeditiously review HIV/AIDS related therapeutic applications. With the continuation of the provisions in the Act, the FDA will be able to continue expeditious reviews.

***The National Strategy for HIV and AIDS, Appendix B: Research
Draft for Office of Management and Budget Review: 6.28.96***

Agency: Department of Defense

Goal: Carry out state-of-the-art research on the prevention and treatment of HIV infection to promote medical readiness in U.S. military forces.

Objective: Support the development of a safe and effective HIV vaccine.

Support the development of new biochemical and genetic strategies to slow HIV disease progression

Support natural history studies for the purpose of evaluating the efficacy of intervention strategies.

Action Steps: Define the global molecular epidemiology of HIV to assist with candidate vaccine selection;

Explore novel vaccine technologies;

Conduct vaccine trials in endemic areas;

Assess the immune response and efficacy of vaccine candidates;

Evaluate potential therapies for treatment of HIV infection and potential for immune reconstitution;

Evaluate prevalence of drug resistance, develop rapid genetic assay for resistant mutants, and methods for genetic targeting of novel therapies *in vivo*;

Participate in national surveillance of AZT resistance;

Develop a comprehensive panel of immunologic, virologic, and functional parameters for management of HIV infection; and

Support natural history studies and specimen repositories.

Descriptions: Vaccine, therapeutic, and epidemiological research, including vaccine design, development and testing in the U.S. and overseas locations; epidemiologic studies of vaccine field studies; and reduction or conclusion of drug treatment and behavior studies.

FY 95: \$37,000,000

***The National Strategy for HIV and AIDS, Appendix B: Research
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FY 96: \$26,600,000

FY 97: \$9,611,000

Populations Served: Active duty personnel.

Constituency Involvement: Clinicians, researchers, and active duty personnel.

Unmet Need: Increased resources would permit more aggressive research on promising therapies and vaccine candidates.

Agency: Department of Energy

Goal: Provide infrastructure support for physical chemical research, termed structural biology, including indirect support for HIV-related research.

Objective: In collaboration with other Federal agencies, provide access to sophisticated equipment and specially trained scientific personnel.

Action Steps: In collaboration with all relevant agencies (NIH, NSF, DOE) and the scientists they support, provide continued essential support for structural chemistry and biology facilities. Provide both the academic and the industrial community access to the facilities for further studies on the structural biology of HIV.

Descriptions: The National Synchrotron Light Source at Brookhaven National Laboratory includes a Department of Energy supported x-ray beam line extensively used by structural biologists studying virus structure, including the structure of HIV. In addition, through its National Laboratory system, DOE provides user facilities at other synchrotron light sources and at neutron beam facilities, which can be used by researchers to characterize the structural configuration of intact HIV, and HIV's biochemical components, often in complexes with inhibitors. These studies assist in the development of novel therapies, as well as advance our understanding of the pathogenesis and fundamental biology of HIV growth.

FY 95: Part of DOE's general operating budget.

FY 96: Part of DOE's general operating budget.

FY 97: Part of DOE's general operating budget.

Populations Served: Scientific community.

Constituency Involvement: Access to resources through peer review.

Unmet Need: Stable funding, guaranteed access for scientists to the facilities for the foreseeable future.

***The National Strategy for HIV and AIDS, Appendix B: Research
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Agency: Department of Commerce

Goal: To foster, serve, and promote the Nation's economic development and technological advancement, including encouraging HIV-related advances and innovation through the Department's collaborative efforts with the global business community.

Objective: Support activities which can assist in forwarding AIDS research by expanding the role of public-private partnerships in developing a vaccine and therapeutics.

Action Steps: Through the Advanced Technology Program (ATP), promote advances in biotechnology and provide funding to small and start-up research and development companies;

Support the Patent and Trademark Office's (PTO) AIDS-related patent database, developed in partnership with the National Science Foundation;

Through the National Technical Information Service, disseminate HIV-related training and technical materials;

Through data collection and analysis programs conducted by the Bureau of the Census and the Bureau of Economic Analysis, provide data for decision-making regarding the distribution of funds and other resources for private and public health initiatives, including HIV-related research, treatment, and service programs;

Through scientific standards, methodologies and technologies developed through the programs of the National Institute of Standards and Technology, set standards for laboratory procedures and equipment calibration at research facilities, including those conducting HIV-related research; and

Through the Patent and Trademark Office Biotechnology Examining Groups, review applications for a range of proposed HIV-related patents.

Descriptions: Advance Technology Program, Patent and Trademark Office reviews, National Technical Information Service, Bureau of the Census, and the National Institute of Standards and Technology.

FY 95: Part of overall operating budget

FY 96: Part of overall operating budget

FY 97: Part of overall operating budget

***The National Strategy for HIV and AIDS, Appendix B: Research
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Populations Served: Start-up companies, biotechnology and pharmaceutical companies, academic institutions, and researchers.

Constituency Involvement: The Department supports public-private partnerships to encourage innovative research.

Unmet Need: An increase in support for valuable programs such as ATP and the Patent and Trademark Office's innovative AIDS-related patent database would enhance Department of Commerce's ability to serve both public and private sectors.

*The National Strategy for HIV and AIDS, Appendix B: Research
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Agency: Department of Justice

Goal: To estimate the prevalence of HIV/AIDS among the corrections and parole population and to monitor the HIV/AIDS-related policies of Federal, State, and local correctional agencies.

Objective: Data collection and dissemination of periodic reports.

Action Steps: Conduct surveys of federal, state and local prisons and inmates and publish results in periodic reports.

Descriptions: When published, the 1995 Survey on Probation, the 1996 Survey of Inmates in Local Jails, and the 1997 Survey of State and Local Federal Inmates in Adult Correctional Facilities will contain estimates of HIV prevalence among probationers and inmates, and characteristics of this HIV positive population.

Publication of reports describing findings of multi-year project, "HIV Education in Lockups and Booking Facilities."

1994 Survey of HIV/AIDS in Correctional Facilities.

Publication of 1996 report "HIV/AIDS and STDs in Juvenile Facilities."

Census of prison, survey of jail and prison inmates and probationers, and study examining research on prevention programs directed towards at persons whose behavior makes them vulnerable to HIV infection.

FY 95: Part of overall operating budget.

FY 96: Part of overall operating budget.

FY 97: Part of overall operating budget.

Populations Served: Department of Justice, corrections administrators, and public.

Constituency Involvement: None.

Unmet Need: Funding for research into requirements for effective management of HIV positive inmates.

Funding to conduct surveys of individual facilities and increase surveys of the juvenile system, and to conduct additional work in the areas of prevention and education.

***The National Strategy for HIV and AIDS, Appendix B: Research
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Agency: Food and Drug Administration

Goal: Ensure the safety and effectiveness of HIV-related therapeutic agents.

Objective: Expedite access and approval of safe and effective drugs and biologics.

Action Steps: Encourage quality applications and data submissions to review division to ensure timely and efficient pre- and postmarket review.

Descriptions: Conduct meetings with sponsors to discuss drug development plans, expanded access programs, and accelerated approval options.

Facilitate scientific review of drugs and biologics by FDA advisory committees.

FY 95: \$25,235,000

FY 96: \$25,235,000

FY 97: \$25,235,000

Populations Served: All persons who may benefit from approved therapeutic agents.

Constituency Involvement: The FDA depends on scientific advisory committees to provide independent expert advice to the agency in its evaluation of regulated products. These committees are composed of representatives from academia, research, government, industry and patient advocates.

Unmet Need: With the passage of Prescription Drug Use Fee Act of 1992, the FDA has been able to expeditiously review HIV/AIDS related therapeutic applications. With the continuation of the provisions in the Act, the FDA will be able to continue expeditious reviews.

***The National Strategy for HIV and AIDS, Appendix B: Research
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Agency: Food and Drug Administration

Goal: Ensure the safety and effectiveness of HIV-related preventive and therapeutic vaccines.

Objective: Expedite regulatory review of promising products for preventive and therapeutic vaccines.

Action Steps: Expand partnership between FDA and its counterparts from outside organizations involved in vaccine development.

Descriptions: Encourage early consultation with sponsoring companies, develop guidance documents, exchange information, and work with other agencies and international organizations. Facilitate scientific review by FDA advisory committees.

FY 95: \$11,863,000

FY 96: \$11,863,000

FY 97: \$11,863,000

Populations Served: All persons who may benefit from approved preventive and therapeutic vaccines.

Constituency Involvement: The FDA depends on scientific advisory committees to provide independent expert advice to the agency in its evaluation of regulated products. These committees are composed of representatives from academia, research, government, industry, and patient advocates.

Unmet Need: With the passage of Prescription Drug Use Fee Act of 1992, the FDA has been able to expeditiously review HIV/AIDS related therapeutic applications. With the continuation of the provisions in the Act, the FDA will be able to continue expeditious reviews.

*The National Strategy for HIV and AIDS, Appendix B: Research
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Agency: Food and Drug Administration

Goal: Ensure the effectiveness of test methodologies for HIV detection and measurement.

Objective: Expedite improved test methodologies (such as diagnostic reagents and test kits) for HIV detection, confirmation, and viral load measurement.

Action Steps: Ensure timely and efficient pre- and postmarket review.

Descriptions: Encourage early consultation with sponsor and develop guidance documents. Facilitate scientific review of drugs and biologics by FDA advisory committees.

FY 95: \$8,732,000

FY 96: \$8,732,000

FY 97: \$8,732,000

Populations Served: All persons who may benefit from approved test methodologies for HIV detection and measurement.

Constituency Involvement: The FDA depends on scientific advisory committees to provide independent expert advice to the agency in its evaluation of regulated products. These committees are composed of representatives from academia, research, government, industry, and patient advocates.

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Agency: Food and Drug Administration

Goal: Ensure the safety and effectiveness of HIV-related medical devices.

Objective: Expedited access and approval of safe and effective medical devices.

Action Steps: Encourage quality application and data submissions to ensure timely and efficient pre- and postmarket review.

Descriptions: Conduct meetings with sponsors on study design; produce guidance documents. Facilitate scientific review of drugs and biologics by FDA advisory committees.

FY 95: \$9,457,000

FY 96: \$9,457,000

FY 97: \$9,457,000

Populations Served: All persons who may benefit from approved HIV-related medical devices.

Constituency Involvement: The FDA depends on scientific advisory committees to provide independent expert advice to the agency in its evaluation of regulated products. These committees are composed of representatives from academia, research, government, industry, and patient advocates.

Unmet Need: The FDA depends on scientific advisory committees to provide independent expert advice to the agency in its evaluation of regulated products. These committees are composed of representatives from academia, research, government, industry, and patient advocates.

*The National Strategy for HIV and AIDS, Appendix C: Care and Services
Draft for Office of Management and Budget Review: 6.28.96*

Agency: Health Care Financing Administration

Goal: Provide primary health care to Medicaid-eligible HIV positive persons.

Objective: Provide quality primary health to Medicaid-eligible HIV positive persons.

Action Steps: Assess state compliance with Medicaid program standards. Review and evaluate waiver applications. Encourage compliance with changes in the standard-of-care.

Description: Medicaid primary health care services.

FY 95: \$1,640,000,000 (Federal share)

FY 96: \$1,800,000,000 (Federal share)

FY 97: \$1,970,000,000 (Federal share)

Populations Served: HIV positive Medicaid-eligible persons.

Constituency Involvement: Information and activities routinely discussed with external groups at meetings and conferences.

Unmet Need: Since Medicaid is an entitlement program any unmet need is a result of State budgeting limitations.

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Agency: Health Care Financing Administration

Goal: Provide quality home health care for HIV positive Medicaid and Medicare beneficiaries.

Objective: Provide quality standards for appropriate home health care services and treatment of HIV disease.

Action Steps: Identify current home health care practices through literature review and survey of best practices.

Descriptions: Develop and implement quality standards for appropriate home health care for HIV positive beneficiaries in partnership with private sector organizations and PHS agencies;

Develop directives in implementation of developed guidelines.

FY 95: \$25,000 (Conferences and materials)

FY 96: NA

FY 97: NA

Populations Served: HIV positive Medicaid and Medicare beneficiaries receiving home health care.

Constituency Involvement: Significant constituent consultation throughout course of project development.

Unmet Need: Implementation of directives dependent on nature and resources of each project partner.

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Agency: Social Security Administration

Goal: Provide access to benefits payable under the Social Security Act.

Objective: Expedite and facilitate the processing of all disability claims, including those filed based on an allegation of HIV disease.

Action Steps: Process HIV claims under high priority status using procedures for processing claims where there is an indication of terminal illness.

Revise as necessary SSA's adjudicative policies based on dynamic nature of HIV disease.

Expedite claims processing by streamlining disability claims procedures and help AIDS service providers assist clients applying for SSI.

Descriptions: Disability and Social Insurance Programs and Outreach Demonstration Program (ODP).

FY 95: 1,005,000 plus 433,000 for ODP

FY 96: 1,200,000

FY 97: Use OMB figure

Populations Served: People living with HIV eligible for Title II and/or Title XVI social security benefits.

Constituency Involvement: People living with HIV and AIDS and their caregivers and advocates, the medical community, national AIDS organizations, SSA employees, coordinating federal agencies.

Unmet Need: Outreach programs now reach only four states. Additional funding would expand outreach project.

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Agency: Social Security Administration

Goal: Provide information regarding benefits payable under the Social Security Act.

Objective: Provide information to people living with AIDS (PWAs) and to the medical community regarding eligibility requirements and changes in SSA programs as they apply to PWAs.

Action Steps: Inform PWAs about disability programs and eligibility requirements through mass mailings, electronic bulletin boards and community based organizations.

Participate and exhibit at national conventions.

Train on disability programs.

Coordinate public information campaigns among Federal agencies and non-governmental organizations to disseminate information to more people more rapidly.

Descriptions: Public information campaigns.

FY 95: NA

FY 96: NA

FY 97: NA

Populations Served: Persons living with HIV and their caregivers and advocates, the medical community and federal agencies.

Constituent Involvement: PLAs, their caregivers and advocates; the medical community; national- and community-based AIDS organizations; coordinating federal agencies and SSA employees.

Unmet Need: Additional technical, clerical support to disseminate information to more people.

Agency: Department of Housing and Urban Development

Goal: Provide support and encourage the development of local programs that provide a comprehensive range of housing and related services for persons living with HIV.

Objective: Provide states and localities with resources to provide housing and related services under long-term comprehensive strategies for meeting the needs of persons living with HIV/AIDS.

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Action Steps: Award grants, both formula-based and competitively-selected grants to support a broad range of housing and services to prevent homelessness of persons living with HIV/AIDS. Unmet need, see above.

Descriptions: Housing Opportunities for Persons with AIDS (HOPWA) Program, in coordination with other HUD resources (see other HUD goals).

FY 95: \$171,000,000

FY 96: \$171,000,000

FY 97: \$171,000,000

Populations Served: Low income persons living with HIV and their families.

Constituency Involvement: Communities participating in the Consolidated Planning Process will involve HIV/AIDS housing and services providers, advocates, and persons living with HIV.

Unmet Need: The HOPWA program can be estimated to serve about 50,000 persons living with HIV and their families. This includes about 35,000 units of housing assistance, mostly in the form of short-term payments and rental assistance. Up to 50 percent of persons living with HIV/AIDS are expected to need housing assistance of some kind during their lifetime; given that over 300,000 persons are living with AIDS, approximately 150,000 persons are expected to require housing assistance.

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Agency: Department of Housing and Urban Development

Goal: Increase the housing supply for persons with disabilities, including persons living with HIV and their families.

Objective 1: Increase the supply of permanent housing units for persons living with HIV.

Action Steps: Encourage HIV housing and program sponsors to apply for funds for projects for persons living with HIV.

Descriptions: Section 811 Supportive Housing Program for Persons with Disabilities.

FY 95: \$376,000,000	(Represents the full program appropriation; no set aside for persons with HIV is made.)
FY 96: \$258,000,000	(Represents the full program appropriation; no set aside for persons with HIV is made. \$25 million for increased contract terms only)
FY 97: \$174,000,000	(Part of Housing for Special Populations fund of \$769 million, i.e. elderly and disabled.)

Populations Served: Disabled person 18 years of age and older.

Constituency Involvement: Input received through local planning groups.

Unmet Need: Program can serve PWAs in project which may include persons with other disabilities; however, with the increasing number of persons living with HIV/AIDS, further housing resources will need to be sought.

Objective 2: Assist communities in providing local comprehensive systems of housing assistance and related services for persons who are homeless by increasing the supply, accessibility and appropriateness of housing and related supportive service options to address the needs of persons who are homeless and living with HIV/AIDS.

Action Steps: Ensure the availability of funds to support community-wide efforts to comprehensively address the needs for emergency, transitional and permanent supportive housing for person with HIV/AIDS.

Descriptions: Continuum of Care Homeless Assistance, including the Supportive Housing Program, Shelter Plus Care program, and the Section 8 Moderate Rehabilitation for Single Room Occupancy Dwellings for Homeless Individuals program.

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FY 95: \$1,100,000,000

FY 96: \$823,000,000

FY 97: \$1,120,000,000

Populations Served: Homeless persons and families, including persons with disabilities, such as persons living with HIV/AIDS.

Constituency Involvement: Communities participating in the development of coordinated and comprehensive systems of housing and care for persons who are homeless, include government agencies, nonprofit organizations, advocates, and consumers.

Unmet Need: In 1995, HUD made the largest ever award of Federal funds to address the needs of persons who are homeless to communities and projects which are part of comprehensive and coordinated systems of housing and care. Although 881 projects were funded with the \$904 million available in the competition, another 1,900 projects were not selected or funded due to the amount of funds available. These additional 1,500 projects requested about \$2 billion in assistance. No measure of the unmet needs of HUD's other programs are made, although programs which support community economic development, the availability of affordable housing and reduce the rent burdens on clients through rental assistance may have considerable amounts of unmet needs for persons living with HIV/AIDS.

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Agency: Department of Housing and Urban Development

Goal: Increase the capacity of AIDS housing and service providers to develop, operate, and evaluate housing programs for persons living with HIV.

Objective: Increase the capacity of AIDS housing and service providers to develop, operate, and evaluate housing programs for persons living with HIV.

Action Steps: Ensure the availability of technical assistance and other support for nonprofit providers.

Authorize technical assistance activities in HUD programs for HIV-related nonprofit providers and grantees.

Descriptions: Technical assistance or other support for the development of program capacity.

FY 95: \$0

FY 96: \$0 (Some funding within homeless assistance grants and HOPWA funding.)

FY 97: \$0 (Some funding within homeless assistance grants and HOPWA funding.)

Populations Served: Homeless persons, including those living with HIV.

Constituency Involvement: HUD program grantees, including State and local governments, housing authorities and finance agencies and non-profit organizations that develop, provide or coordinate services for person receiving housing assistance, as well as advocates and consumers.

Unmet Need: There is a need to broaden and deepen the ability of AIDS housing and service providers and AIDS program grantees to expand the range of housing options, ensure quality and responsive programs and undertake evaluation efforts. This will become increasingly important as additional demands will be made on programs as the epidemic increases the number of persons living with HIV. No additional funds are requested as these activities are part of the functions of existing offices, such as the Office of HIV/AIDS Housing, Fair Housing and Equal Opportunities and other program offices.

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Agency: Department of Housing and Urban Development

Goal: Increase the awareness of staff in public and private organizations to the general and unique needs of persons living with HIV.

Objective: Increase awareness regarding HIV among agency and other staff.

Action Steps: Authorize training activities in HUD programs for HUD staff, HIV-related nonprofit providers and grantees.

Descriptions: Training and support for HIV awareness.

FY 95: \$0

FY 96: \$0

FY 97: \$0

Populations Served: Public and private staff and persons at risk for HIV infection.

Constituency Involvement: HUD program grantees, including State and local governments, housing authorities and finance agencies and non-profit organizations that develop, provide or coordinate services for person receiving housing assistance, as well as advocates and consumers.

Unmet Need: Misinformation, prejudice and non-responsiveness continue in the operation of public and private housing programs and the general awareness of individuals in preventing the spread of HIV. The increasing numbers of persons living with HIV requiring housing assistance, will increase the challenges on service programs to be vigilant in ensuring that information is accurately communicated and efforts are in no manner prejudicial. No additional funds are requested as these activities are part of the functions of existing offices, such as the Office of HIV/AIDS Housing, Fair Housing and Equal Opportunities and other program offices.

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Agency: Department of Housing and Urban Development

Goal: Increase the awareness and responsiveness of HUD programs that may target or incidentally assist persons living with HIV.

Objective: Ensure that the needs of persons living with HIV are addressed in HUD programs.

Action Steps: Designate an office with direct responsibility for programs and advocacy on AIDS issues.

Descriptions: Office on HIV/AIDS Housing

FY 95: \$0 (within current efforts)

FY 96: \$0 (within current efforts)

FY 97: \$0 (within current efforts)

Populations Served: Homeless persons, nonprofit organizations, government agencies, and HUD staff.

Constituency Involvement: HUD program grantees, including State and local governments, housing authorities and finance agencies and non-profit organizations that develop, provide or coordinate services for person receiving housing assistance, as well as advocates and consumers.

Unmet Need: Maintaining office functions that promote understanding of AIDS and the needs of persons living with HIV as well as support for programs that support these clients. More staff would allow even greater impact on HUD programs. No additional funds are requested as these activities are part of the functions of existing offices, such as the Office of HIV/AIDS Housing, Fair Housing and Equal Opportunities and other program offices.

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Agency: Department of Defense

Goal: Provide state-of-the-art patient-centered comprehensive care for all eligible service members throughout the asymptomatic and symptomatic phases of HIV and AIDS.

Objective: Provide immediate evaluation and continuity of care for service members who become HIV positive.

Through contact tracing, identify persons at risk and provide consultation and evaluation. Refer to care as appropriate.

Provide continuation of employment until no longer physically fit for duty.

Action Steps: Conduct periodic screening of active duty personnel;

For HIV positive personnel, provide comprehensive evaluation, treatment, and care;

Restrict assignment to continental U.S., Alaska, Hawaii, or Puerto Rico to assure continuity of medical care; and

Educate health care staff on best clinical practice for persons living with HIV.

Descriptions: Comprehensive state-of-the-art clinical care.

FY 95: \$2,000,000 to \$3,000,000

FY 96: \$2,000,000 to \$3,000,000

FY 97: \$2,000,000 to \$3,000,000

Populations Served: HIV positive active duty personnel.

Constituency Involvement: Clinicians, active duty personnel, military health providers, manpower and personnel administration staff.

Unmet Need: None.

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Agency: Office of Personnel Management

Goal: Implement and improve workplace policies and employee benefits.

Objective 1: Implement and improve workplace guidelines.

Action Steps: Publish and distribute OPM's "HIV/AIDS Policy Guidelines".

Publish and distribute OPM personnel manuals on related HIV/AIDS issues, such as information on accommodations for employees who are HIV positive and on educational resources.

Descriptions: Policy development.

FY 95: \$20,000

FY 96: \$15,000

FY 97: \$0 (Goal achieved)

Populations Served: Federal agencies and employees, including labor organizations.

Constituency Involvement: Federal agencies and employees, including labor organizations.

Unmet Need: None.

Objective 2: Improve life insurance benefits programs.

Action Steps: Distribute guidance on "living benefits" insurance benefits.

Develop and distribute guidance on viatical settlements.

Descriptions: Insurance programs.

FY 95: None.

FY 96: None.

FY 97: None.

Populations Served: Federal agencies and employees and retirees covered by the Federal Employees Group Life Insurance Program.

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Constituent Involvement: Federal agencies and employees and retirees covered by the Federal Employees Group Life Insurance Program.

Unmet Need: None.

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Agency: Department of Justice

Goal: To provide education and training for law enforcement and social services agencies regarding victims of crime.

Objective: To improve trainees' interaction with the populations they serve, especially those who might have been exposed to the HIV virus or those who may be HIV positive.

Action Steps: Provide funds to the National Victims Center (NVC) under a cooperative agreement. (The NVC provides education, and sensitivity training to law enforcement personnel and social service agencies.)

Provide grant funds to the Educational Development Center (EDC) for training regarding hate/bias crimes. (The EDC trains law enforcement and social service agency personnel regarding procedures for identifying and handling hate crimes, including such crimes against those who are HIV positive or living with AIDS.

Descriptions: Provide grants and operate cooperative agreements.

FY 95: \$133,900

FY 96: Although no funds have been budgeted, the training for law enforcement and social services personnel was covered by the FY 95 budget and will continue.

FY 97: The department anticipates allocating additional funds for training.

Populations Served: Law enforcement and social service agencies are directly served. The crime victims who interact with these agencies benefit indirectly.

Constituent Involvement: Victims rights groups were consulted regarding the curriculum development for the training program.

Unmet Need: Additional resources to provide more regional training.

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Agency: Department of Justice

Goal: Provide health care for prisoners with HIV/AIDS. Educate and counsel the inmate population about the transmission of HIV/AIDS and for the purpose of reducing the incidence of HIV transmission.

Objective: Provide counseling, education and treatment for prisoners.

Action Steps: Conduct random HIV testing on 10% of newly incarcerated inmates;

Provide pre- and post-test counseling for inmates;

Conduct HIV tests on new inmates where clinically indicated, provide HIV training and education for all newly committed inmates during their admission and orientation;

Provide additional HIV and infectious disease-related training annually to each incarcerated inmate who has a job-related potential exposure to bloodborne pathogens; and

Provide health care for inmates.

Descriptions: Provide testing, counseling, education, and health care for inmates.

FY 95: \$1,000,000 for prevention and \$500,000,000 for medical care

FY 96: \$1,000,000 for prevention and \$500,000,000 for medical care

FY 97: \$1,000,000 for prevention and \$600,000,000 for medical care

Population Served: Bureau of Prisons inmates.

Constituency Involvement: None.

Unmet Need: Funding for counseling and testing of all inmates.

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Agency: Corporation for National Service

Goal: To promote HIV/AIDS awareness and to provide respite care and other services to persons living with HIV and AIDS.

Objective 1: To promote HIV/AIDS awareness through training and other service activities.

Action Steps: Encourage all AmeriCorps programs to provide training in HIV/AIDS to AmeriCorps members and encourage them to become involved in HIV/AIDS service activities.

Program Description: Examples of AmeriCorps programs focusing on AIDS: The National AIDS Fund and the Birmingham AIDS Outreach Program.

FY 95: Part of overall operating cost.

FY 96: Part of overall operating cost.

FY 97: Part of overall operating cost.

Populations Served: Persons living with HIV and AIDS and AmeriCorps Members.

Constituency Involved: AmeriCorps Members and the public at large.

Unmet Needs: Without these programs, HIV/AIDS service providers would not be able to deliver services to as many people with HIV/AIDS.

Objective 2: To match volunteers from the National Senior Service Corps with persons living with HIV and AIDS for respite care and other services.

Action Steps: Through the Foster Grandparent program, provide foster and respite care, as well as counseling and living assistance for children with HIV/AIDS.

Through the Senior Companion Program, provide some persons living with HIV and AIDS with volunteers for respite care and living assistance.

Continue to provide some persons living with HIV and AIDS with health and nutrition services and respite care from the Retired and Senior Volunteer Program.

Program Description: An example of a program provided by senior volunteers include a program in Indianapolis where seniors visit people living with AIDS that are confined to a hospice.

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FY 95: Part of overall operating cost.

FY 96: Part of overall operating cost.

FY 97: Part of overall operating cost.

Populations Served: Persons living with HIV and AIDS.

Constituency Involved: National Senior Service Corps and people living with HIV and AIDS.

Unmet Needs: Without these programs, respite services to persons living with AIDS would be unavailable.

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Agency: U.S. Agency for International Development

Goal: Sustainable reduction in sexually transmitted infections (STIs)/HIV transmission among key populations.

Objective 1: Develop and test new interventions and methods to prevent transmission and mitigate impact of the epidemic.

Action Steps: Support research to identify activities that immediately and directly influence the effectiveness of existing programs.

Undertake activities that enable women to reduce the risk of HIV infection.

Undertake pilot projects and research to mitigate the impact of HIV in severely affected areas.

Undertake activities that support the public health infrastructure and utilization of HIV vaccines.

Description: Development and improvement of women's access to female controlled barrier methods. Improvement of STD/HIV prevention interventions and technologies for STD management. Support of studies that enhance understanding of behaviors and epidemiology, mitigate the impact of HIV/AIDS on communities. Facilitate opportunities for international field trials of promising vaccines.

Population Served: Persons living in USAID's HIV/AIDS emphasis countries.

Constituency Involvement: USAID agency employees, developing country representatives, community representatives, PVO/NGO donors, multilateral donors, and bilateral donors.

Unmet Needs: Given the limited resources available for international development assistance, it is not possible for USAID to meet all the needs in this area.

Objective 2: Policy reform addressing social, cultural, regulatory and economic issues related to HIV/AIDS and other STIs.

Action Steps: Conduct policy dialogue with decision makers to encourage a high-level multi-sectoral coordinated response to HIV/AIDS.

Address resource issues and long-term sustainability at all levels.

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Address the social and cultural impediments to the successful implementation of HIV/AIDS programs.

Develop tools and complete research to serve policy dialogue and reform.

Description: Increase the use of methods aimed at reducing perinatal and parenteral HIV transmission. Coordinate effective donor responses and leveraged funding. Support international and regional multi-sectoral approaches and mobilize the private sector. Support decision-makers addressing difficult social, cultural, and religious issues. Continue to develop and use tools such as simulation modelling to describe the socio-economic impact of the epidemic.

Population Served: Persons living in USAID's HIV/AIDS emphasis countries.

Constituency Involved: USAID agency employees, developing country representatives, community representatives, PVO/NGO partners, multilateral donors and other bilateral donors.

Unmet Needs: Given the limited resources available for international development assistance, it is not possible for USAID to meet all the needs in this area.

Objective 3: Develop and implement HIV/AIDS prevention programs that utilize proven interventions to prevent transmission.

Action Steps: Promote safer sexual behavior through information, education, and communication.

Increase the demand for, access to, and use of condoms.

Control STIs by improving STI with diagnosis and treatment services and by education of persons with STIs.

Description: Improvement of social and cultural commitment to HIV/AIDS prevention. Strengthening programs to create a more supportive environment for behavior change, improving the quality of diagnosis and treatment, and increasing access to services including counseling and training for care providers, and facilitating the procurement of therapies.

Population Served: Persons living with AIDS in USAID HIV/AIDS emphasis countries.

Constituency Involved: USAID agency employees, developing country representatives,

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community representatives, PVO/NGO partners, multilateral donors and other bilateral donors.

Unmet Needs: Given the limited resources available for international development assistance, it is not possible for USAID to meet all the needs in this area.

Objective 4: Enhance capacity of public, private NGO and community based organizations to design, implement and evaluate effective HIV/STI prevention and care programs.

Action Steps: Improve policy reform, research capability, logistics systems, and use of local and regional NGO networks.

Enhance the technical and managerial capability of indigenous NGOs and PVOs to design, implement and evaluate HIV/STI projects in all HIV/AIDS emphasis countries.

Strengthen local and regional networks of NGOs involved in HIV prevention, care and advocacy in at least six countries.

Assess and strengthen host country capacity for HIV/STI prevention research.

Disseminate models of home and community based delivery of HIV/STI care.

Description: Support for USAIDS' response to HIV/AIDS in developing countries, the Paris Summit Initiative, and the Greater Involvement of Persons Infected and Affected by HIV/AIDS (GIPA). Provide support for and strengthen linkages between indigenous NGOs and U.S. domestic PVOs, NGOs, and ASOs. Concentrate bilateral and care resources on selected emphasis countries to assure comprehensive programs; strengthen trans-national and regional activities in prevention and research through the "areas of affinity" concept. Continue collaboration with and support for efforts of multi-lateral organizations such as UNAIDS, WHO, UNDP, ENFPA, UNICEF, and the U.S.-Japan Common Agenda for HIV/AIDS prevention.

FY 95: \$119,000

FY 96: \$114,000

FY 97: \$114,000

Population Served: Persons living in USAID's HIV/AIDS emphasis countries.

Constituency Involved: USAID agency employees, developing country representatives, community representatives, PVO/NGO partners, multilateral donors and other bilateral

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donors.

Unmet Needs: Given the limited resources available for international development assistance, it is not possible for USAID to meet all the needs in this area.

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Agency: United States Information Agency

Goal: To increase understanding of and support for U.S. Government (USG) policies and programs on HIV/AIDS among foreign publics.

Objective 1: To provide accurate information on USG policy and programs to key foreign audiences.

Action Steps: Disseminate information via multi-language television, radio and texts distributed directly and through overseas posts and reference centers, tours and briefings for foreign journalists and health policy officials, and public affairs campaigns that support specific USG initiatives in foreign countries.

Description: Information on USG policy and programs.

FY 95: \$350,000

FY 96: \$325,000

FY 97: \$325,000

Population Served: Policy makers, academics, journalists, researchers and Non-governmental Organizations (NGO) leaders.

Constituency Involvement: USG officials, academics/researchers and NGO leaders.

Unmet Needs: Lack of technology in many underdeveloped countries may prohibit information from reaching key audiences.

Objective 2: To give foreign decision makers a first-hand experience with U.S. policy and programs - public and private, national and local - to address the HIV/AIDS pandemic and encourage exchange with their U.S. counterparts.

Action Steps: Sponsor multi-regional, regional and individual International Visitor Programs, focusing specifically on HIV/AIDS issues and as part of programs on substance abuse, civil society, human rights and community health.

Description: International Visitors Program.

FY 95: \$240,000

FY 96: \$200,000

FY 97: \$200,000

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Population Served: Health policy makers and NGO leaders.

Constituency Involvement: U.S. NGOs, state, local and federal agencies and academic/research institutions.

Unmet Needs: The program is currently very limited, only allowing for 31 health policy officials and community leaders from 24 countries to visit the United States.

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Agency: Department of Defense

Goal: Support leadership in the international community by sharing research methodologies and findings, observing host nation requirements for HIV testing and reporting, and supporting research at international sites with high prevalence or incidence of HIV and AIDS.

Objective: Participate in global surveillance initiatives and maintain current knowledge of host nation HIV screening and reporting requirements.

Action Steps: Determine the prevalence of HIV initiative, infections, and genotypes in geographic areas of military activity.

Coordinate with Department of State.

Descriptions: International efforts including the study of geographic distribution of genotypes at DoD overseas laboratories. Support for basic research on diagnostic tests and vaccines.

FY 95: \$1,500,000

FY 96: \$1,500,000

FY 97: \$1,200,000

Populations Served: Foreign national and active duty U.S. military personnel.

Constituent Involvement: Active duty military and foreign service national of DoD overseas laboratories.

Unmet Need: None.

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Agency: Peace Corps

Goal: Prevent transmission of HIV infection for Peace Corps Trainees and Volunteers.

Objective 1: Provide all trainees with comprehensive HIV/AIDS training during the preservice training period.

Action Steps: Develop training modules, train overseas medical staff, and educate trainees.

Descriptions: HIV/AIDS prevention training for Peace Corps Volunteers/Trainees.

Objective 2: Provide continued HIV education and counseling for Peace Corps Volunteers and Medical Staff.

Action Steps: Train OMS staff on communication and counseling skills;

Continue to educate volunteers about HIV/AIDS during inservice trainings and conferences;

Develop and distribute health newsletters;

Provide one-on-one counseling for volunteers on an as needed basis;

Disseminate videos, pamphlets, education material on HIV/AIDS prevention; and

Follow CDC guidelines on prevention of transmission in a medical setting.

Descriptions: Follow-up HIV training for volunteers and medical staff. Make condoms available and easily accessible for all volunteers.

FY 95: \$300,000

FY 96: \$100,000

FY 97: \$100,000

Populations Served: Peace Corps Volunteers/Trainees and medical staff.

Constituency Involvement: Peace Corps Volunteers/Trainees and Peace Corps Medical Staff.

Unmet Need: Due to budget constraints, Office of Medical Services (OMS) will only be able

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to provide courses for in-country Medical Staff every other year.

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Agency: Peace Corps

Goal: Enhance the understanding of HIV/AIDS and transfer skills for prevention to the communities and countries in which Peace Corps Volunteers serve.

Objective: Provide quality programming and training on HIV/AIDS prevention as a primary project in six countries.

Provide quality programming and training to ten percent of all Volunteers to work in HIV/AIDS as a secondary activity.

Support on-going education and training of Associate Peace Corps Directors (APCD) in charge of programming at country level.

Liaison with other organizations working in HIV/AIDS both internationally and domestically.

Action Steps: Recruit 50 Volunteers to work in HIV/AIDS as their primary job;

Train 50 new Volunteers and 45 second year Volunteers in HIV/AIDS, language and cross-cultural skills;

Support 100 Volunteers to work in HIV/AIDS as their primary assignment;

Support the development of projects and training curriculum;

Support workshops for APCDs in three regions;

Provide expert consultants for the development of projects and training; and

Support attendance at international and national conferences and workshops on HIV/AIDS and share information.

Descriptions: HIV/AIDS prevention activities in developing countries around the world.

FY 95: \$4,500,000

FY 96: \$5,000,000

FY 97: \$5,000,000

Populations Served: Communities in developing countries, women and youth.

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Constituency Involvement: Peace Corps designs all programs in conjunction with the beneficiary population.

Unmet Need: There is higher demand for Peace Corps Volunteers than the agency can meet, and this is particularly true for program areas such as HIV/AIDS.

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Practice
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Pending revised information from NIH and AHCPR.

*The National Strategy for HIV and AIDS, Appendix F: Civil Rights
Draft for Office of Management and Budget Review: 6.28.96*

Agency: Department of Justice

Goal: Enforce HIV-related civil rights laws and heighten issue awareness.

Objectives: Prevent discrimination on the basis of real or perceived HIV status.

Action Steps: Enforce civil rights laws and inform and educate the public.

Descriptions: Litigate HIV-related civil rights cases involving housing discrimination and discrimination in the provision of services.

Provide information via the Americans with Disabilities Act (ADA) information line and provide technical assistance to state and local governments, Federal agencies and other entities and individuals having rights and responsibilities under Titles II and III of the ADA.

Developed and disseminated ADA questions and answers intended for persons who are HIV positive or living with AIDS to 5,000 HIV/AIDS service providers.

FY 95: Information line \$350,000; other activities part of overall operating budget.

FY 96: Information line \$350,000; other activities part of overall operating budget.

FY 97: The President's 1997 budget requests a 3.9% increase for ADA enforcement.
Baseline number?

Populations Served: Victims of HIV/AIDS discrimination, Federal, state and local agencies, businesses and general populace.

Constituency Involvement: In addition to having access to the ADA information line, AIDS-related disability groups are sent the Justice Department's quarterly update on ADA enforcement activities and any relevant press releases on the Department's HIV-related anti-discrimination activities.

Unmet Need: Funds for attorneys for additional litigation. Public education and technical assistance for health care and day care providers regarding their ADA obligations to persons with HIV.

Agency: U.S. Equal Employment Opportunity Commission

Goal: As part of EEOC's overall enforcement goal to eliminate employment discrimination against persons with HIV disease.

***The National Strategy for HIV and AIDS, Appendix F: Civil Rights
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Objective: Enforce Title I of the Americans with Disabilities Act (ADA), which protects job applicants and employees with HIV disease from employment discrimination.

Action Steps: Receive, investigate, and resolve ADA discrimination complaints from job applicants and employees with HIV disease;

Litigate select cases involving employment discrimination against persons with HIV disease;
and

Educate the public regarding ADA's protections for job applicants and employees with HIV disease.

Descriptions: Enforcement of Title I of the ADA.

FY 95: Part of EEOC's general operating budget.

FY 96: Part of EEOC's general operating budget.

FY 97: Part of EEOC's general operating budget.

Populations Served: Job applicants and employees with HIV disease.

Constituency Involvement: Ongoing communication with AIDS-related disability groups.

Unmet Need: An increase in the Commission's investigative and legal staff would provide for quicker resolution of all EEOC complaints, including HIV-related complaints brought under the ADA.

*The National Strategy for HIV and AIDS, Appendix F: Civil Rights
Draft for Office of Management and Budget Review: 6.28.96*

Agency: Department of Labor

Goal: To provide protection for people living with HIV and AIDS from discrimination in the workplace.

Objective: Under the Rehabilitation Act of 1973 provide protection for persons living with HIV and AIDS from discrimination in the workplace.

Action Steps: Establish policies under Section 503 of the Rehabilitation Act of 1973 providing for processing and investigating complaints filed by persons living with HIV and AIDS.

Descriptions: Protection from discrimination in workplace.

FY 95: Part of overall operating budget.

FY 96: Part of overall operating budget.

FY 97: Part of overall operating budget.

Populations Served: Persons living with HIV and AIDS.

Constituency Involvement: Persons living with HIV and AIDS and Department of Labor staff.

Unmet Need: Current resource levels permit satisfactory processing of received cases.

The National Strategy for HIV and AIDS, Appendix G: Budget Tables
Draft for Office of Management and Budget Review: 6.28.96

I. Overall Budget Table for Agencies

AGENCY	FY 95	FY 96	FY 97
Health & Human Services			
NIH	Pending	Pending	Pending
CDC	Pending	Pending	Pending
HRSA	Pending	Pending	Pending
SAMHSA	Pending	Pending	Pending
AHCPR	Pending	Pending	Pending
IHS	Pending	Pending	Pending
FDA	72,745,000	72,745,000	72,745,000
ACF	Pending	Pending	Pending
OPA	Pending	Pending	Pending
HCFA	1,640,075,000	1,800,060,000	1,970,185,000
OIH	Pending	Pending	Pending
Defense	41,000,000 to 42,000,000	30,600,000 to 31,600,000	13,311,000 to 14,311,000
Social Security Administration	1,438,000	1,200,000	SSA unable to provide
Housing & Urban Development	1,647,000,000	1,252,000,000	1,465,000,000
Treasury	Pending	Pending	Pending
Education	Pending	Pending	Pending
Commerce	Part of overall operating budget	Part of overall operating budget	Part of overall operating budget
Labor	Part of overall operating budget	Part of overall operating budget	Part of overall operating budget
Veterans Affairs	Pending	Pending	Pending

***The National Strategy for HIV and AIDS, Appendix G: Budget Tables
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Energy	Pending	Pending	Pending
Office of Management & Budget	Pending review	Pending review	Pending review
Office of Personnel Management	20,000	15,000	0
Office of Drug Control Policy	Pending	Pending	Pending
Corporation for National Service	Part of overall operating cost	Part of overall operating cost	Part of overall operating cost
Justice	6,483,900	6,350,000	7,000,000
EEOC	Part of overall operating budget	Part of overall operating budget	Part of overall operating budget
State	Pending	Pending	Pending
U.S. Agency for International Development	119,000	114,000	114,000
US Information Agency	590,000	525,000	525,000
Peace Corps	4,800,000	5,100,000	5,100,000

The National Strategy for HIV and AIDS, Appendix G: Budget Tables
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II. Department/Agency Budgets by Area and Goal

A. Department of Defense

Area	Goal	FY 95 Actuals	FY 96	FY 97 President's Budget
Care and Services	Provide state-of-the-art patient-centered comprehensive care for all eligible service members throughout the asymptomatic and symptomatic phases of HIV and AIDS.	\$2,000,000 to \$3,000,000	\$2,000,000 to \$3,000,000	\$2,000,000 to \$3,000,000
Research	Carry out state-of-the-art research on the prevention and treatment of HIV infection to promote medical readiness in U.S. military forces.	\$37,000,000	\$26,600,000	\$9,611,000
Prevention	Preservation of an effective fighting force through prevention of HIV infection.	Approximately \$500,000	Approximately \$500,000	Approximately \$500,000
International Activities	Support leadership in the international community by sharing research methodologies and findings, observing host nation requirements for HIV testing and reporting, and supporting research at international sites with high prevalence or incidence of HIV and AIDS.	\$1,500,000	\$1,500,000	\$1,200,000

***The National Strategy for HIV and AIDS, Appendix G: Budget Tables
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B. Food and Drug Administration

Area	Goal	FY 95 Actuals	FY 96	FY 97 President's Budget
Research	Ensure the safety and effectiveness of HIV-related therapeutic agents	\$25,235,000	\$25,235,000	\$25,235,000
Research	Ensure the safety and effectiveness of HIV-related preventive and therapeutic vaccines	\$11,863,000	\$11,863,000	\$11,863,000
Research	Ensure the effectiveness of test methodologies (such as diagnostic reagents and test kits) for HIV detection, confirmation, and viral load measurement	\$8,732,000	\$8,732,000	\$8,732,000
Prevention	Reduce transfusion-transmitted HIV infection	\$17,458,000	\$17,458,000	\$17,458,000
Research	Ensure the safety and effectiveness of HIV-related medical devices	\$9,457,000	\$9,457,000	\$9,457,000

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C. Health Care Financing Administration

Area	Goal	FY 95 Actuals	FY 96	FY 97 President's Budget
Prevention	Reduce perinatal transmission among Medicaid-eligible women	\$50,000 (Federal Share)	\$60,000 (Federal Share)	\$185,000 (Federal Share)
Care and Services	Provide primary health care to Medicaid-eligible HIV-positive persons	\$1,640,000,000 (Federal Share)	\$1,800,000,000 (Federal Share)	\$1,970,000,000 (Federal Share)
Care and Services	Provide quality home health care for HIV positive Medicaid and Medicare beneficiaries	\$25,000	NA	NA

***The National Strategy for HIV and AIDS, Appendix G: Budget Tables
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D. Social Security Administration

Area	Goal	FY 95 Actuals	FY 96	FY 97 President's Budget
Care and Services	Provide access to benefits payable under the Social Security Act.	\$1,005,000 plus 433,000 for ODP	\$1,200,000	SSA unable to provide
Care and Services	Provide information regarding benefits payable under the Social Security Act.	NA	NA	NA

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E. Housing and Urban Development

Area	Goal	FY 95 Actuals	FY 96	FY 97 President's Budget
Care and Services	Provide support and encourage the development of local programs that provide a comprehensive range of housing and related services for persons living with HIV.	\$171,000,000	\$171,000,000	\$171,000,000
Prevention	Reduce the number of new infections among residents of public and subsidized housing.	\$0 (Carried out within existing HUD resources.)	\$0	
Care and Services	Increase the housing supply for persons with disabilities, including persons living with HIV and their families. Objective 1: Increase the supply of permanent housing units for persons living with HIV. Objective 2: Assist communities in providing local comprehensive systems of housing assistance and related services for persons who are homeless by increasing the supply, accessibility and appropriateness of housing and related supportive service options to address the needs of persons who are homeless and living with HIV.	\$376,000,000 (Full appropriation, no AIDS set aside.) \$1,100,000,000	\$258,000,000 (Full appropriation, no AIDS set aside. \$25 million for contract terms.) \$823,000,000	\$174,000,000 (Part of Housing for Special Pop. fund of \$769 million) \$1,120,000,000
Care and Services	Increase the capacity of AIDS housing and services providers to develop, operate, and evaluate housing programs for persons living with HIV.	\$0	\$0 (Some funding within homeless assistance grants and HOPWA funding.)	\$0 (Some funding within homeless assistance grants and HOPWA funding.)
Care and Services	Increase the awareness of staff in public and private organizations to the general and unique needs of persons living with HIV.	\$0	\$0	\$0

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Care and Services	Increase the awareness and responsiveness of HUD programs that may target or incidentally assist persons living with HIV.	\$0 Within current efforts.	\$0 Within current efforts.	\$0 Within current efforts.
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F. Department of Justice

Area	Goal	FY 95 Actuals	FY 96	FY 97 President's Budget
Civil Rights	Enforce HIV-related civil rights laws and heighten issue awareness.	\$350,000 (for information line)	\$350,000 (for information line)	3.9% increase for enforcement, from base of?
Care and Services	Provide education and training for law enforcement and social services agencies regarding victims of crime.	\$133,900	No funds have been budgeted; training for law enforcement and social services personnel covered in FY95 budget.	Department anticipates allocating additional funds for training.
Prevention	Reduce risk of infection to INS detainees who are at risk.	Part of overall operating budget.	Part of overall operating budget.	Part of overall operating budget.
Prevention	Reduce the risk of employee infection and avoid possible worksite performance problems.	Part of overall operating budget.	Part of overall operating budget.	Part of overall operating budget.
Research	To estimate the prevalence of HIV/AIDS among the corrections and parole population and to monitor the HIV/AIDS-related policies of the detention and parole systems.	Part of overall operating budget.	Part of overall operating budget.	Part of overall operating budget.
Care and Services	Provide health care for prisoners with HIV/AIDS. Educate and counsel the inmate population about the transmission of HIV/AIDS and thereby reduce the incidence of HIV transmission.	\$1,000,000 for prevention and \$500,000,00 for medical care	\$1,000,000 for prevention and \$500,000,00 for medical care	\$1,000,000 for prevention and \$600,000,000 for medical care

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G. U.S. Agency for International Development

Area	Goal/Objective	FY 95 Actuals	FY 96	FY 97 President's Budget
International Activities	Sustainable reduction in sexually transmitted infections (STIs)/HIV transmission among key populations.	\$119,000	\$114,000	\$114,000

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H. U.S. Information Agency

Area	Goal/Objective	FY 95 Actuals	FY 96	FY 97 President's Budget
International Activities	To increase understanding of and support for U.S. Government (USG) policies and programs on HIV/AIDS among foreign publics.			
	Objective 1: To provide accurate information on USG policy and programs to key foreign audiences.	\$350,000	\$325,000	\$325,000
	Objective 2: To give foreign decision makers a first-hand experience with U.S. policy and programs - public and private, national and local - to address the HIV/AIDS pandemic and encourage exchange with their U.S. counterparts.	\$240,000	\$200,000	\$200,000

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I. Peace Corps

Area	Goal	FY 95 Actuals	FY 96	FY 97 President's Budget
International Activities	Enhance the understanding of HIV/AIDS and transfer skills for prevention to the communities and countries in which Peace Corps Volunteers serve.	\$4,500,000	\$5,000,000	\$5,000,000
International Activities	Prevent transmission of HIV infection for Peace Corps Trainees and Volunteers.	\$300,000	\$100,000	\$100,000

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III. Budget Tables by Area and Goal

A. PREVENTION

Agency	Goal	FY 95	FY 96	FY 97
HCFA	Reduce perinatal transmission among Medicaid-eligible women	\$50,000 (Federal Share)	\$60,000 (Federal Share)	\$185,000 (Federal Share)
HUD	Reduce the number of new infections among residents of public and subsidized housing.	\$0 (Carried out within existing HUD resources.)	\$0 (Carried out within existing HUD resources.)	\$0 (Carried out within existing HUD resources.)
DOD	Preservation of an effective fighting force through prevention of HIV infection.	Approximately \$500,000	Approximately \$500,000	Approximately \$500,000
DOJ	Reduce risk of infection to INS detainees who are at risk.	Part of overall operating budget.	Part of overall operating budget.	Part of overall operating budget.
	Reduce the risk of employee infection and avoid possible worksite performance problems.	Part of overall operating budget.	Part of overall operating budget.	Part of overall operating budget.

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Corporation for National Service	To offer HIV/AIDS education programs and other services to volunteers from the Learn and Serve America project.	Part of overall operating cost.	Part of overall operating cost.	Part of overall operating cost.
FDA	Reduce transfusion- transmitted HIV infection	\$17,458,000	\$17,458,000	\$17,458,000

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B. RESEARCH

Agency	Goal	FY 95	FY 96	FY 97
DOD	Carry out state-of-the-art research on the prevention and treatment of HIV infection to promote medical readiness in U.S. military forces.	\$37,000,000	\$26,600,000	\$9,611,000
COMMERCE	To foster, serve, and promote the Nation's economic development and technological advancement, including encouraging HIV-related advances and innovation through the Department's collaborative efforts with the global business community.	Part of overall operating budget	Part of overall operating budget	Part of overall operating budget
DOJ	To estimate the prevalence of HIV/AIDS among the corrections and parole population and to monitor the HIV/AIDS-related policies of the detention and parole systems.	Part of overall operating budget.	Part of overall operating budget.	Part of overall operating budget.

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FDA	Ensure the safety and effectiveness of HIV-related therapeutic agents	\$25,235,000	\$25,235,000	\$25,235,000
	Ensure the safety and effectiveness of HIV-related preventive and therapeutic vaccines	\$11,863,000	\$11,863,000	\$11,863,000
	Ensure the effectiveness of test methodologies (such as diagnostic reagents and test kits) for HIV detection, confirmation, and viral load measurement	\$8,732,000	\$8,732,000	\$8,732,000
	Ensure the safety and effectiveness of HIV-related medical devices	\$9,457,000	\$9,457,000	\$9,457,000

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C. CARE AND SERVICES

Agency	Goal	FY 95	FY 96	FY 97
HCFA	Provide primary health care to Medicaid-eligible HIV-positive persons	\$1,640,000,000 (Federal Share)	\$1,800,000,000 (Federal Share)	\$1,970,000,000 (Federal Share)
	Provide quality home health care for HIV positive Medicaid and Medicare beneficiaries	\$25,000	NA	NA
SSA	Provide access to benefits payable under the Social Security Act	\$1,005,000 plus 433,000 for ODP	\$1,200,000	SSA unable to provide
	Provide information regarding benefits payable under the Social Security Act	NA	NA	NA

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HUD	Provide support and encourage the development of local programs that provide a comprehensive range of housing and related services for persons living with HIV.	\$171,000,000	\$171,000,000	\$171,000,000
	Increase the housing supply for persons with disabilities, including persons living with HIV and their families.	\$1,476,000,000	\$1,081,000,000	\$1,294,000,000
	Increase the capacity of AIDS housing and services providers to develop, operate, and evaluate housing programs for persons living with HIV.	\$0	\$0	\$0
	Increase the awareness of staff in public and private organizations to the general and unique needs of persons living with HIV.	\$0	\$0	\$0
	Increase the awareness and responsiveness of HUD programs that may target or incidentally assist persons living with HIV. to develop, operate, and evaluate housing programs for persons living with HIV.	\$0 (Within current efforts)	\$0 (Within current efforts)	\$0 (Within current efforts)

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DOD	Provide state-of-the-art patient-centered comprehensive care for all eligible service members throughout the asymptomatic and symptomatic phases of HIV and AIDS.	\$2,000,000 to \$3,000,000	\$2,000,000 to \$3,000,000	\$2,000,000 to \$3,000,000
OPM	Implement and improve workplace policies and employee benefits.	\$20,000	\$15,000	\$0
DOJ	Provide education and training for law enforcement and social services agencies regarding victims of crime. Provide health care for prisoners with HIV/AIDS. Educate and counsel the inmate population about the transmission of HIV/AIDS and thereby reduce the incidence of HIV transmission.	\$133,900 \$1,000,000 for prevention and \$500,000,00 for medical care	No funds budgeted; covered in FY95 budget. \$1,000,000 for prevention and \$500,000,00 for medical care	DOJ anticipates allocating additional funds for training. \$1,000,000 for prevention and \$600,000,00 for medical care
Corporation for National Service	To promote HIV/AIDS awareness and to provide respite care and other services to persons living with HIV and AIDS.	Part of overall operating cost.	Part of overall operating cost.	Part of overall operating cost.

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D. INTERNATIONAL ACTIVITIES

Agency	Goal	FY 95	FY 96	FY 97
USAID	Sustainable reduction in sexually transmitted infections (STIs)/HIV transmission among key populations.	\$119,000	\$114,000	\$114,000
USIA	To increase understanding of and support for U.S. Government (USG) policies and programs on HIV/AIDS among foreign publics.	\$590,000	\$525,000	\$525,000
DOD	Support leadership in the international community by sharing research methodologies and findings, observing host nation requirements for HIV testing and reporting, and supporting research at international sites with high prevalence or incidence of HIV and AIDS.	\$1,500,000	\$1,500,000	\$1,200,000

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PEACE CORPS	Enhance the understanding of HIV/AIDS and transfer skills for prevention to the communities and countries in which Peace Corps Volunteers serve.	\$4,500,000	\$5,000,000	\$5,000,000
	Prevent transmission of HIV infection for Peace Corps Trainees and Volunteers.	\$300,000	\$100,000	\$100,000

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E. TRANSLATION OF RESEARCH INTO PRACTICE

Agency	Goal	FY 95	FY 96	FY 97

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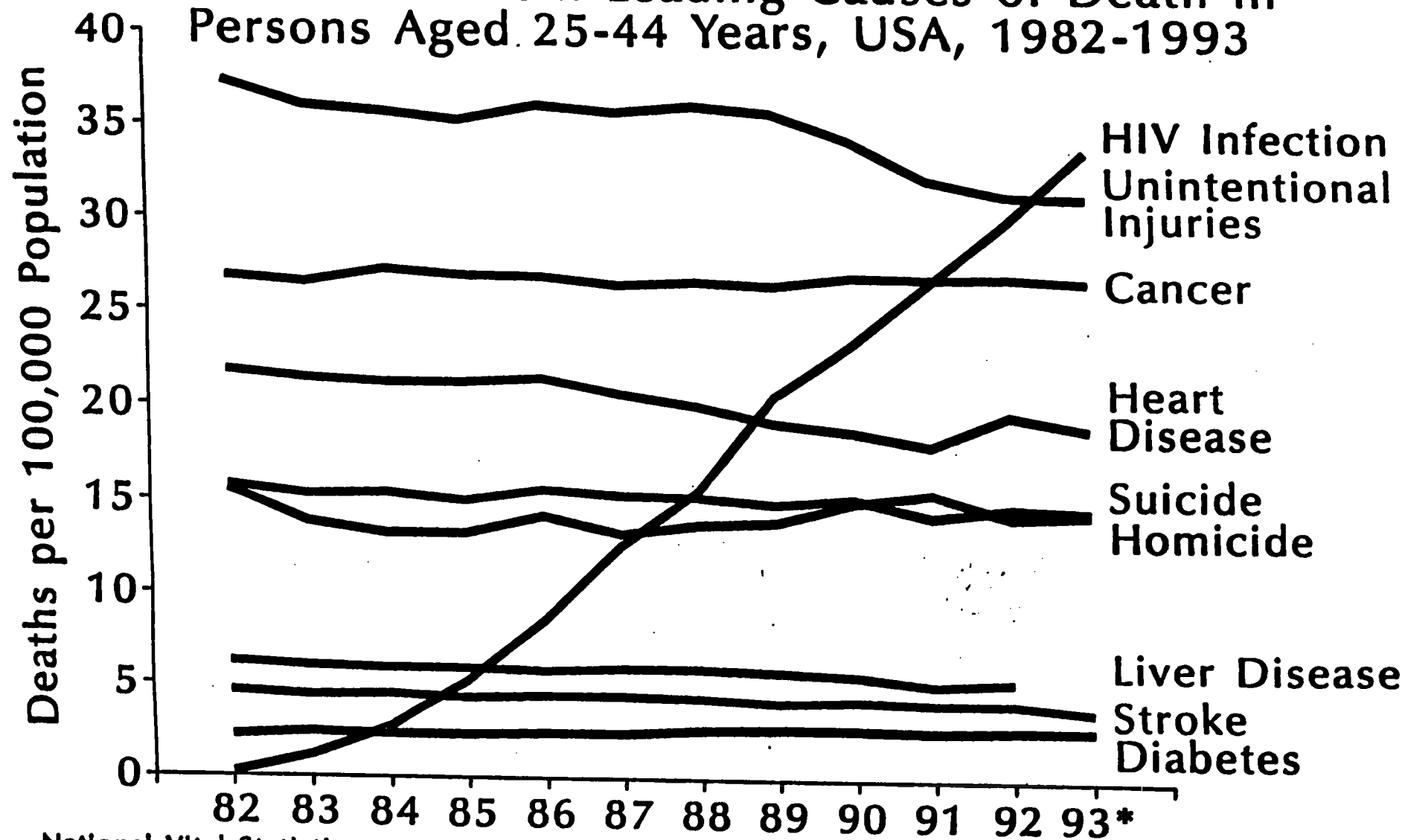
F. CIVIL RIGHTS

Agency	Goal	FY 95	FY 96	FY 97
DOJ	Enforce HIV-related civil rights laws and heighten issue awareness.	\$350,000 (for information line)	\$350,000 (for information line)	3.9% increase for enforcement, from base of?
EEOC	As part of EEOC's overall enforcement goal to eliminate employment discrimination against persons with HIV disease.	Part of EEOC's general operating budget.	Part of EEOC's general operating budget.	Part of EEOC's general operating budget.
LABOR	To provide protection for people living with HIV and AIDS from discrimination in the workplace.	Part of overall operating budget	Part of overall operating budget	Part of overall operating budget

***IV. FIGURES, ACRONYMS, AND MEMBERS OF THE INTERDEPARTMENTAL TASK
FORCE ON HIV AND AIDS***

Figure 1 Death Rates from Leading Causes of Death in Persons Aged 25-44 Years,
USA, 1982 -1993

Death Rates from Leading Causes of Death in Persons Aged 25-44 Years, USA, 1982-1993



National Vital Statistics

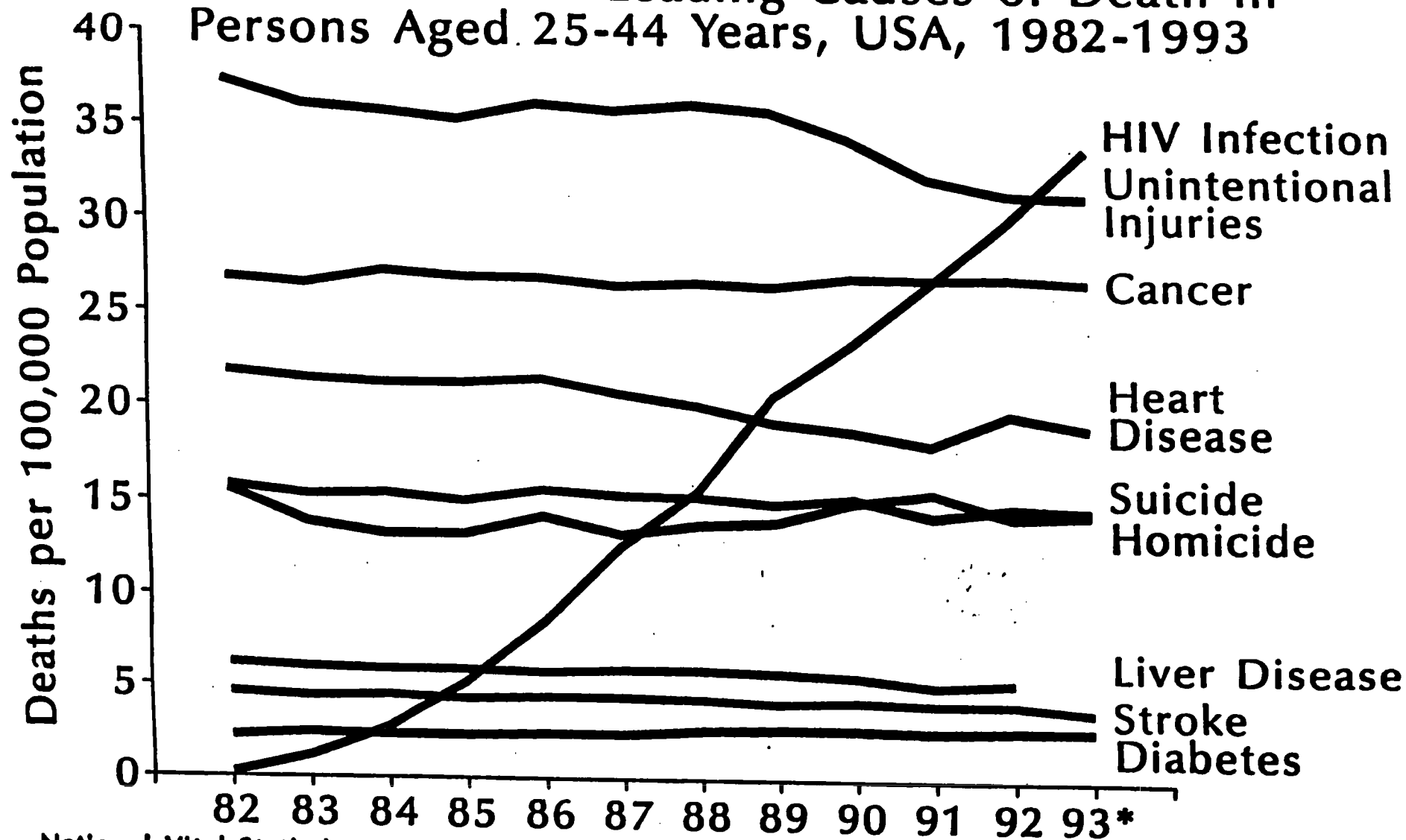
*Provisional data

CDC

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Figure 2 Cumulative U.S. AIDS Cases: 2/83 through 12/94

Death Rates from Leading Causes of Death in Persons Aged 25-44 Years, USA, 1982-1993

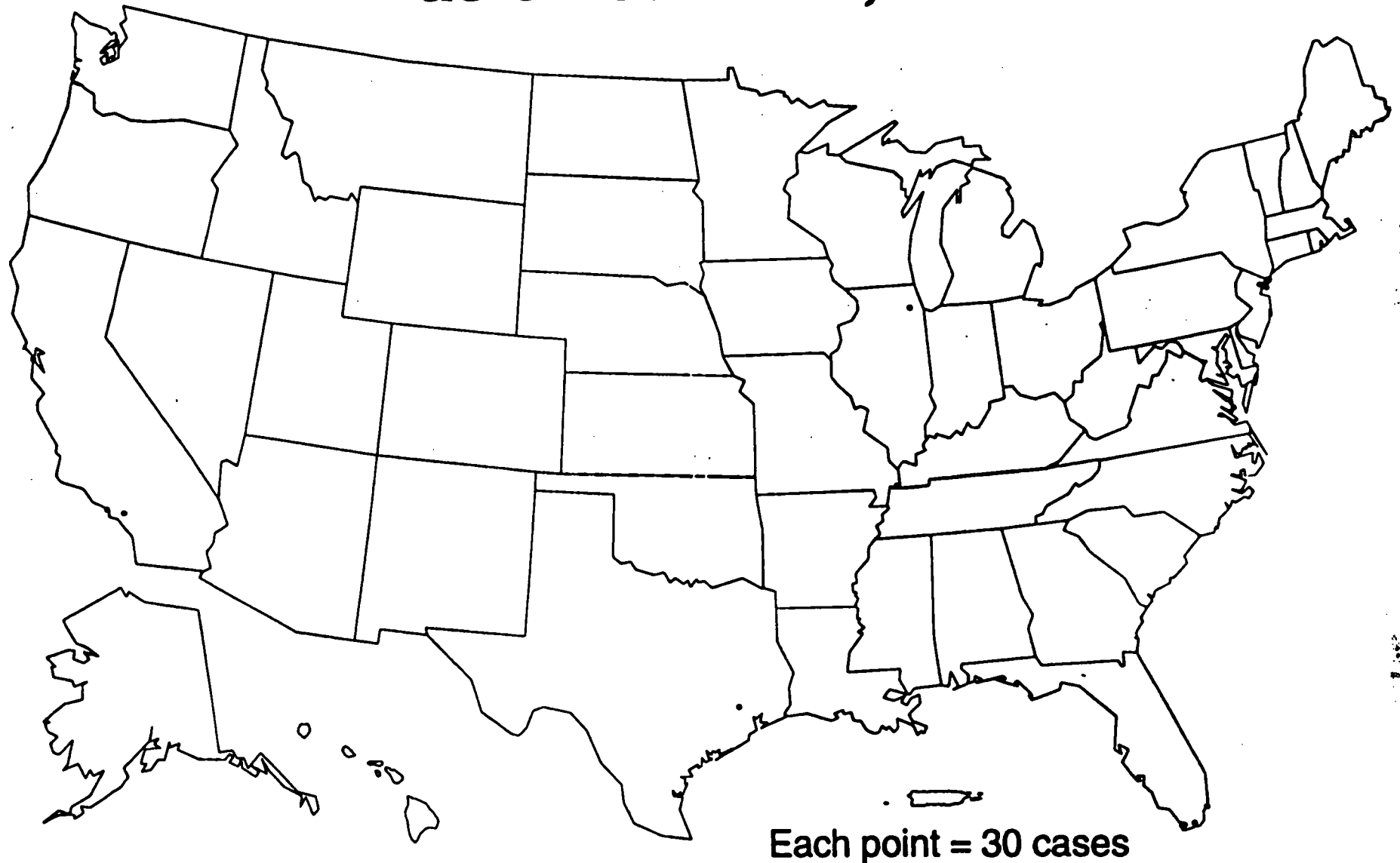


National Vital Statistics

*Provisional data

CDC

Cumulative U.S. AIDS Cases as of 2/83 N~1,000

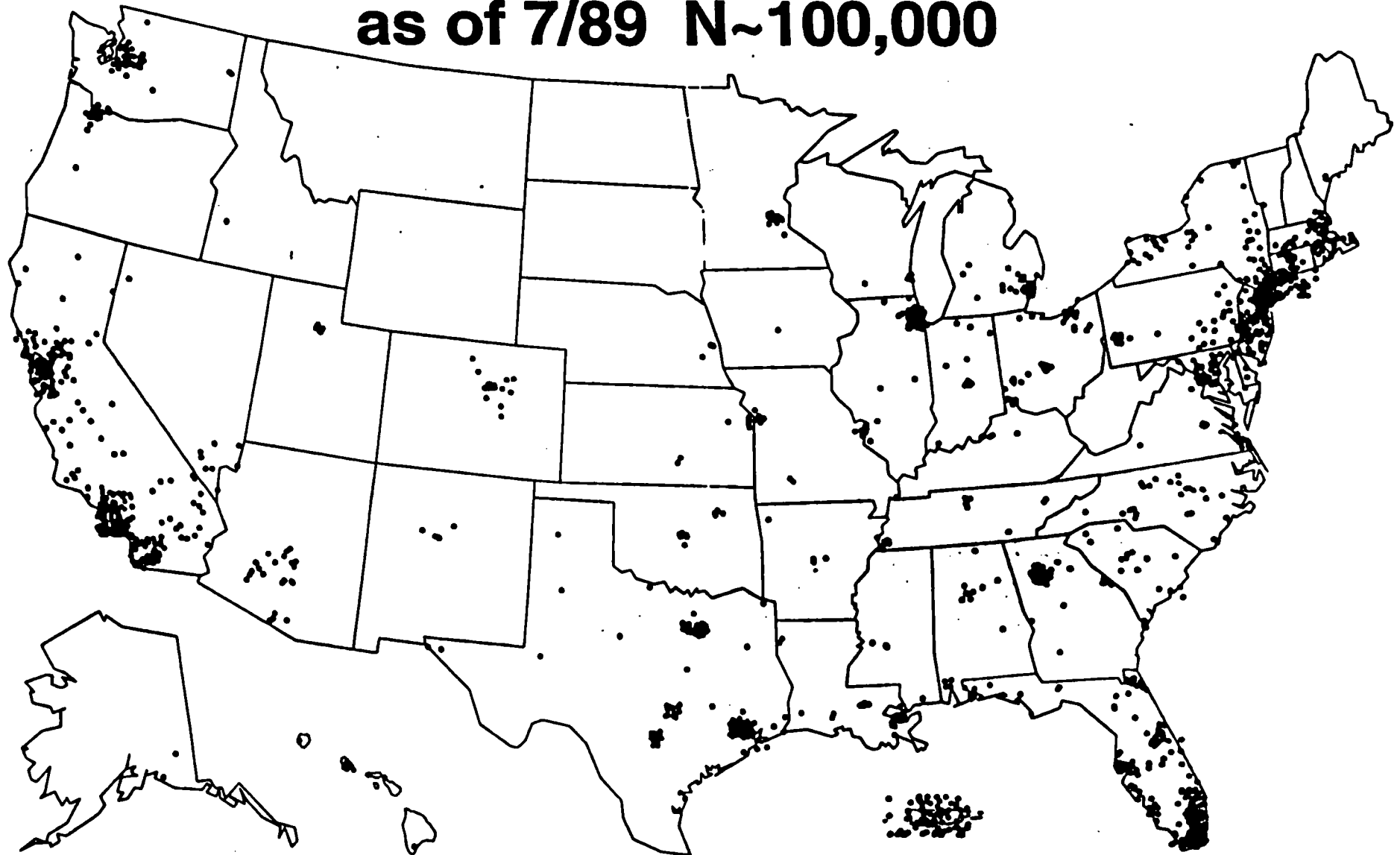


Cumulative U. S. AIDS Cases as of 5/85 N~10,000



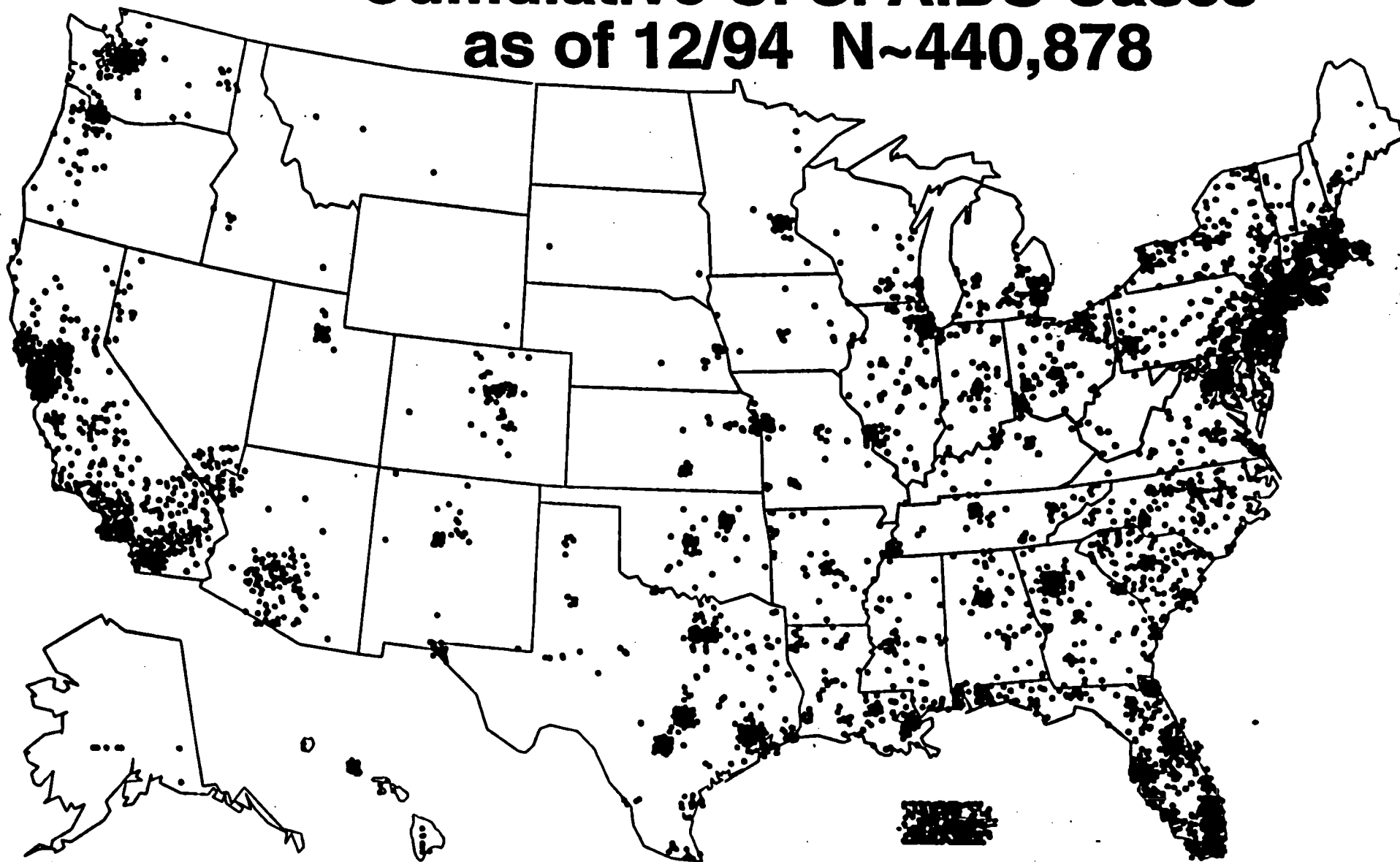
Each point = 30 cases

Cumulative U.S. AIDS Cases as of 7/89 N~100,000



Each point = 30 cases

Cumulative U. S. AIDS Cases as of 12/94 N~440,878



Each point = 30 cases

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Acronym List

ACTG	AIDS Clinical Trial Group
ADA	Americans with Disabilities Act of 1990
ADC	AIDS Dementia Complex
ACTIS	AIDS Clinical Trials Information Service
ADAP	AIDS Drug Assistance Programs
AETC	AIDS Education Training Center
AHCPR	Agency for Health Care Policy and Research
AIDS	Acquired Immune Deficiency Syndrome
AOD	Alcohol and other drugs
ASO	AIDS Service Organization
ATIS	HIV/AIDS Treatment Information Service
ATOD	Alcohol, tobacco, and other drugs
AZT	
BOP	Bureau of Prisons
BRTA	Business Responds to AIDS
CARE	Ryan White Comprehensive AIDS Resources Emergency Act
CDBG	Community Development Block Grant
CDC	The Centers for Disease Control and Prevention
CMV	Cytomegalovirus
CNS	Central Nervous System
CPCRA	Terry Bein Community Programs for Clinical Research on AIDS
DEA	Drug Enforcement Agency
DHHS	Department of Health and Human Services
DOD	Department of Defense
DOJ	Department of Justice
DOL	Department of Labor
EDC	Educational Development Center
EEOC	Equal Employment Opportunity Commission
ENFPA	
FDA	Food and Drug Administration
FBI	Federal Bureau of Investigation
GCRC	General Clinical Research Centers Program
GIPA	Greater Involvement of Persons Infected and Affected by HIV/AIDS

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HCFA	Health Care Financing Administration
HIV	Human Immunodeficiency Virus
HOPWA	Housing Opportunities for Persons with AIDS
HRSA	Health Resources and Services Administration
HSV	Herpes Simplex Virus
HUD	Department of Housing and Urban Development
ICD	Institute(s), Center(s), Division(s)
IDTF	Interdepartmental Task Force on HIV and AIDS
IHS	Indian Health Service
INS	Immigration and Naturalization Service
IOM	Institute of Medicine
JMD	Justice Management Division
LRTA	Labor Responds to AIDS
MAC	<i>Mycobacterium Avium</i> Complex
NCRR	National Center for Research Resources
NGO	Non-governmental Organization
NIDA	National Institute on Drug Abuse
NIH	National Institutes of Health
NREN	National Research and Education Network
NVC	National Victims Center
OAR	Office of AIDS Research
OI	Opportunistic Infection
OMB	Office of Management and Budget
ONAP	Office of National AIDS Policy
PAC	Presidential Advisory Council on HIV and AIDS
PCP	<i>Pneumocystis carinii</i> pneumonia
PHS	Public Health Service
PLWH	Persons living with HIV
PSA	Public Service Announcement
PVO	Private Voluntary Organization
PWA	Person with AIDS
RFIP	Research Facilities Infrastructure Program (NIH)
RPRC	Regional Primate Research Center (NIH)
RWCA	Ryan White Comprehensive AIDS Resources Emergency (CARE) Act

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SAMHSA	Substance Abuse and Mental Health Services Administration
SPF	Specific Pathogen-Free
SPNS	Special Projects of National Significance
SSA	Social Security Administration
SSI	Supplemental Security Income
STD	Sexually transmitted disease
STI	Sexually transmitted infection
TA	Technical Assistance
TB	<i>Mycobacterium tuberculosis</i>
UNAIDS	United Nations Programme on AIDS
UNDP	
UNICEF	
USAID	U.S. Agency for International Development
USIA	U.S. Information Agency
USMS	U.S. Marshals Service
VA	Department of Veterans Affairs
WHO	World Health Organization

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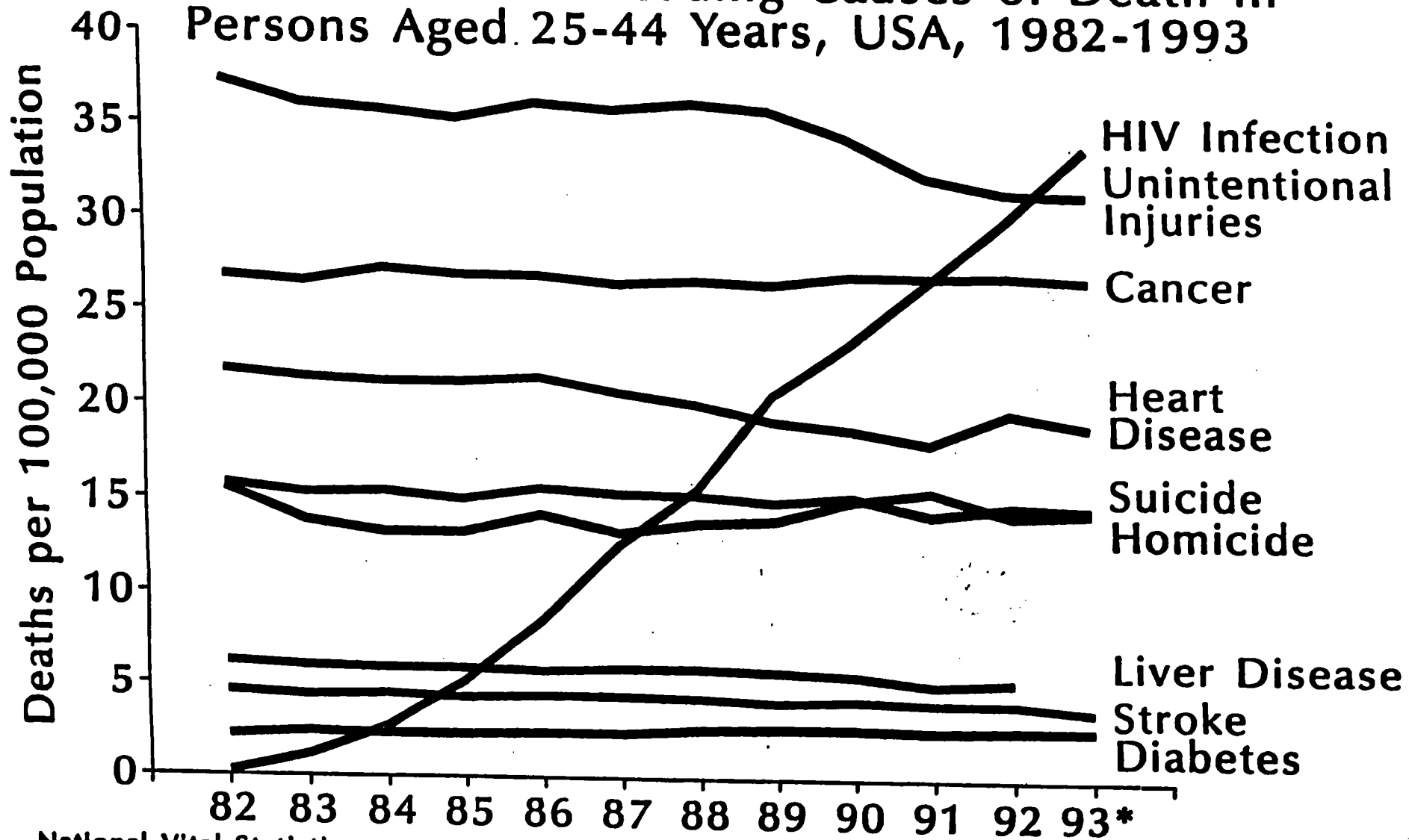
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III. APPENDICES

***IV. FIGURES, ACRONYMS, AND MEMBERS OF THE INTERDEPARTMENTAL TASK
FORCE ON HIV AND AIDS***

Figure 1 Death Rates from Leading Causes of Death in Persons Aged 25-44 Years,
USA, 1982 -1993

Death Rates from Leading Causes of Death in Persons Aged 25-44 Years, USA, 1982-1993



National Vital Statistics

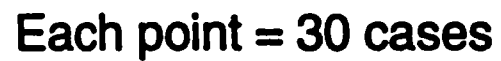
*Provisional data

CDC

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Figure 2 Cumulative U.S. AIDS Cases: 2/83 through 12/94

as of 2/83 N~1,000

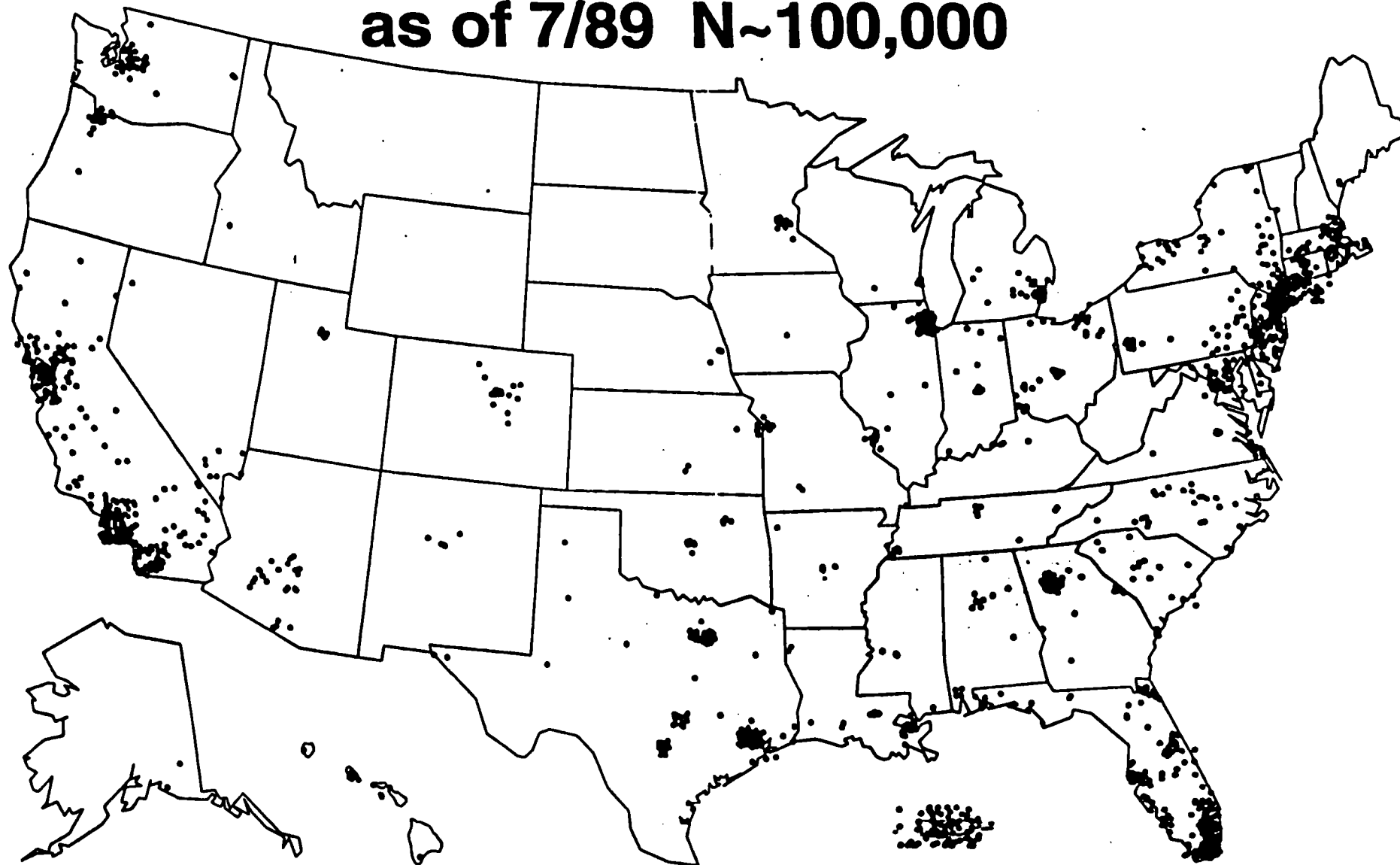


Cumulative U. S. AIDS Cases as of 5/85 N~10,000



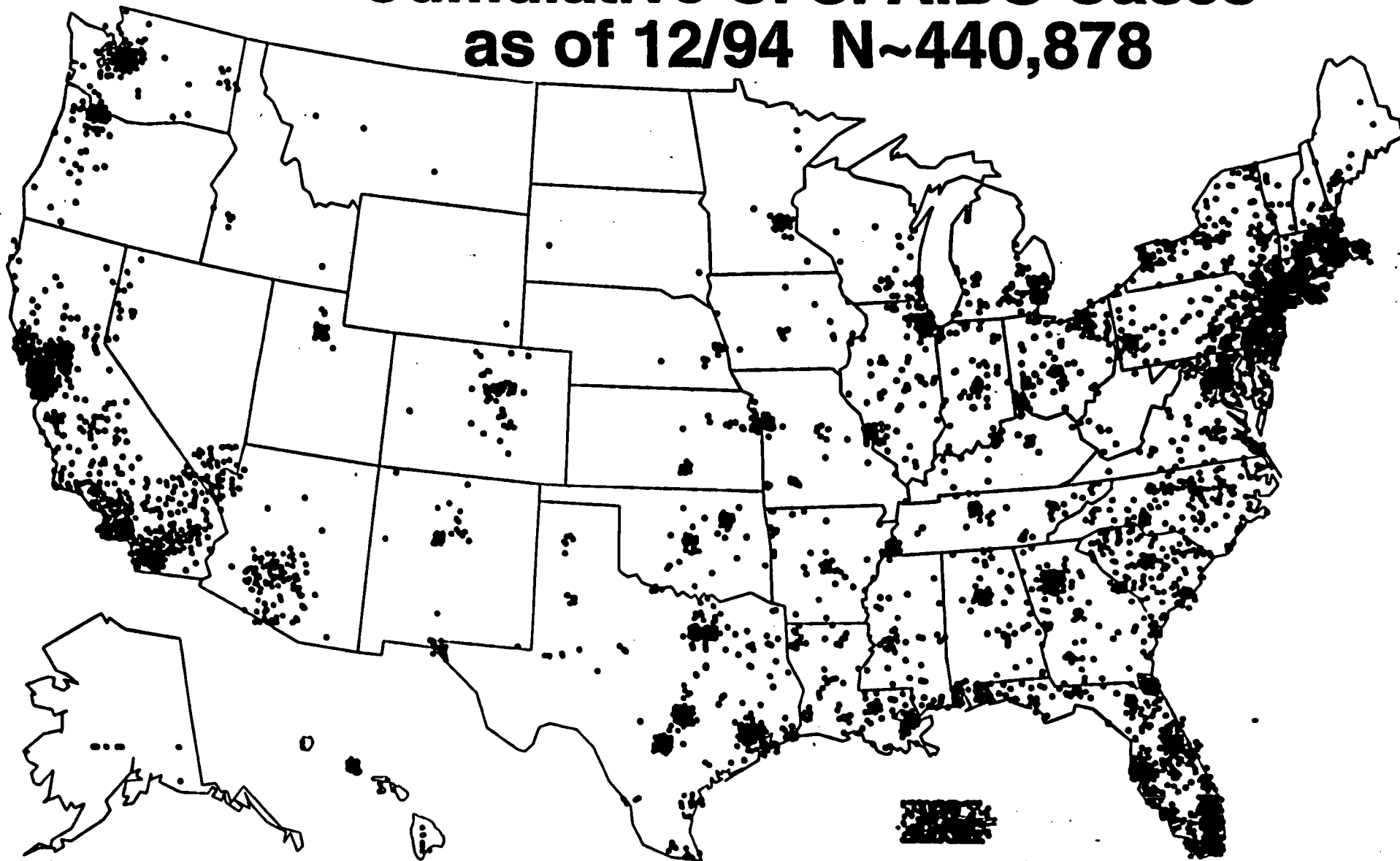
Each point = 30 cases

Cumulative U.S. AIDS Cases as of 7/89 N~100,000



Each point = 30 cases

Cumulative U. S. AIDS Cases as of 12/94 N~440,878



Each point = 30 cases

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Acronym List

ACTG	AIDS Clinical Trial Group
ADA	Americans with Disabilities Act of 1990
ADC	AIDS Dementia Complex
ACTIS	AIDS Clinical Trials Information Service
ADAP	AIDS Drug Assistance Programs
AETC	AIDS Education Training Center
AHCPR	Agency for Health Care Policy and Research
AIDS	Acquired Immune Deficiency Syndrome
AOD	Alcohol and other drugs
ASO	AIDS Service Organization
ATIS	HIV/AIDS Treatment Information Service
ATOD	Alcohol, tobacco, and other drugs
AZT	
BOP	Bureau of Prisons
BRTA	Business Responds to AIDS
CARE	Ryan White Comprehensive AIDS Resources Emergency Act
CDBG	Community Development Block Grant
CDC	The Centers for Disease Control and Prevention
CMV	Cytomegalovirus
CNS	Central Nervous System
CPCRA	Terry Bein Community Programs for Clinical Research on AIDS
DEA	Drug Enforcement Agency
DHHS	Department of Health and Human Services
DOD	Department of Defense
DOJ	Department of Justice
DOL	Department of Labor
EDC	Educational Development Center
EEOC	Equal Employment Opportunity Commission
ENFPA	
FDA	Food and Drug Administration
FBI	Federal Bureau of Investigation
GCRC	General Clinical Research Centers Program
GIPA	Greater Involvement of Persons Infected and Affected by HIV/AIDS

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HCFA	Health Care Financing Administration
HIV	Human Immunodeficiency Virus
HOPWA	Housing Opportunities for Persons with AIDS
HRSA	Health Resources and Services Administration
HSV	Herpes Simplex Virus
HUD	Department of Housing and Urban Development
ICD	Institute(s), Center(s), Division(s)
IDTF	Interdepartmental Task Force on HIV and AIDS
IHS	Indian Health Service
INS	Immigration and Naturalization Service
IOM	Institute of Medicine
JMD	Justice Management Division
LRTA	Labor Responds to AIDS
MAC	<i>Mycobacterium Avium</i> Complex
NCCR	National Center for Research Resources
NGO	Non-governmental Organization
NIDA	National Institute on Drug Abuse
NIH	National Institutes of Health
NREN	National Research and Education Network
NVC	National Victims Center
OAR	Office of AIDS Research
OI	Opportunistic Infection
OMB	Office of Management and Budget
ONAP	Office of National AIDS Policy
PAC	Presidential Advisory Council on HIV and AIDS
PCP	<i>Pneumocystis carinii</i> pneumonia
PHS	Public Health Service
PLWH	Persons living with HIV
PSA	Public Service Announcement
PVO	Private Voluntary Organization
PWA	Person with AIDS
RFIP	Research Facilities Infrastructure Program (NIH)
RPRC	Regional Primate Research Center (NIH)
RWCA	Ryan White Comprehensive AIDS Resources Emergency (CARE) Act

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SAMHSA	Substance Abuse and Mental Health Services Administration
SPF	Specific Pathogen-Free
SPNS	Special Projects of National Significance
SSA	Social Security Administration
SSI	Supplemental Security Income
STD	Sexually transmitted disease
STI	Sexually transmitted infection
TA	Technical Assistance
TB	<i>Mycobacterium tuberculosis</i>
UNAIDS	United Nations Programme on AIDS
UNDP	
UNICEF	
USAID	U.S. Agency for International Development
USIA	U.S. Information Agency
USMS	U.S. Marshals Service
VA	Department of Veterans Affairs
WHO	World Health Organization

*The National Strategy for HIV and AIDS, Appendix A: Prevention
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Agency: Health Care Financing Administration

Goal: Reduce perinatal transmission among Medicaid-eligible women.

Objectives: Develop and implement a campaign to inform HIV positive women in selected pilot areas about the benefits of AZT in FY 95.

Expand pilot project to one State in all regions in FY 96.

Expand project to include all States in FY 97.

Action Steps: Develop, obtain, and distribute brochures and other materials describing current guidelines for the use of AZT during pregnancy for preventing perinatal transmission, and Medicaid eligibility and coverage to Medicaid eligible women.

Descriptions: Establish a consumer-oriented educational campaign in key states with high HIV prevalence rates among women.

FY 95: \$50,000 (Federal share)

FY 96: \$60,000 (Federal share)

FY 97: \$185,000 (Federal share, subject to availability of funds)

Populations Served: HIV positive women eligible for Medicaid coverage.

Constituency Involvement: Significant consultation with high-risk pregnant women and their advocates.

Unmet Need: The pilot project will not initially include women of unknown or negative HIV serostatus.

The National Strategy for HIV and AIDS, Appendix A: Prevention
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Agency: Department of Housing and Urban Development

Goal: Reduce the number of new infections among residents of public and subsidized housing.

Objective: Provide primary prevention programs to public housing residents at risk for HIV infection. Coordinate meetings of the state and local agencies responsible for the prevention program services.

Action Steps: Forge local partnerships and improve coordination of existing resources.

Descriptions: HIV/AIDS Prevention in Public Housing Demonstration Program.

FY 95: \$0 (Activities carried out within existing HUD personnel resources.)

FY 96: \$0

FY 97: \$0

Populations Served: Children and adults in public housing in five targeted cities.

Constituency Involvement: Input received through local planning groups.

Unmet Need: The initial demonstration program reached sites in five cities. An increase in resources would enable HUD to meet increasing demand for services and permit expansion to include other public and subsidized housing efforts.

***The National Strategy for HIV and AIDS, Appendix A: Prevention
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Agency: Department of Defense

Goal: Preservation of an effective fighting force through prevention of HIV infection.

Objective 1: Prevent HIV infection in service members.

Reduce the number of new active duty HIV infection by 20 percent by 1997 based on a 1995 baseline figure of 204 persons for all services.

Action Steps: Provide basic information on HIV transmission and risk reduction for new recruits, civilian work force members, and officers;

Require education and general military training on methods of transmission and approaches for avoiding transmission, including barrier methods, avoidance of intravenous drug use, and use of universal precautions;

Provide training for personnel, instructors, and peer educators; and

Support train the trainer courses to develop multidisciplinary teams from medical, dental, nursing, and public health corps for promoting HIV and AIDS education.

Objective 2: Ensure safety of the Armed Services Blood Program Office (ASBPO).

Action Steps: Advise service personnel with serologic evidence of HIV infection or repeated ELISA reactivity, but Western Blot negative or indeterminate, to refrain from donating blood.

Employ ASBPO "Look Back Program" to trace contacts of identified positive donors who serconvert after blood donation -- trace and contact blood recipients.

FY 95: Approximately \$500,000

FY 96: Approximately \$500,000

FY 97: Approximately \$500,000

Populations Served: Active duty service members and their eligible family members, health care providers and those at risk of exposure to body fluids, and recipients of ASBPO blood products.

Constituency Involvement: Active duty force, affiliated civilian workforce, and the health care and public health communities.

***The National Strategy for HIV and AIDS, Appendix A: Prevention
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Unmet Need: None

***The National Strategy for HIV and AIDS, Appendix A: Prevention
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Agency: Department of Justice

Goal: Reduce risk of infection of infection to INS detainees who are at risk.

Objective: Educate detainees believed to be at risk regarding HIV/AIDS and thereby reduce the risk of transmission and new infections.

Action Steps: Upon obtaining informed consent, test detainees suspected of or diagnosed with HIV/AIDS or test upon detainee request and provide pre- and post-test counseling to detainees deemed at risk.

Descriptions: Provide limited testing and counseling.

FY 95: Part of overall operating budget.

FY 96: Part of overall operating budget.

FY 97: Part of overall operating budget.

Populations Served: INS Detainees.

Constituent Involvement: None.

Unmet Need: None.

***The National Strategy for HIV and AIDS, Appendix A: Prevention
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Agency: Department of Justice

Goal: Reduce the risk of employee infection and avoid possible worksite performance problems.

Objective: Educate Bureau of Prisons (BOP) staff, Drug Enforcement Agency (DEA) employees, Federal Bureau of Investigation (FBI) employees, Immigration and Naturalization Service (INS) employees, and U.S. Marshals Service (USMS) regarding HIV/AIDS transmission and thereby reduce the risk of infection. Educate all Justice Department employees about HIV/AIDS in the workplace.

Action Steps: For Bureau of Prison (BOP) staff provide:

- annual HIV information update and infectious disease training to all staff;
- produce inmate and staff HIV educational videos; and
- participate at least quarterly with HRSA in audio conferences on HIV issues.

For DOJ employees in occupations that possess a heightened possibility for exposure to HIV or other bloodborne pathogens, including employees of the DEA, FBI, INS, and USMS provide:

- general training and field office training;
- annual bloodborne pathogen training to all personnel as mandated by OSHA (discussion of HIV/AIDS is included in this training); and
- an annual update on the bloodborne pathogens training as necessary to discuss new information or changes in the use of safety equipment, etc.

For all Department employees, the Justice Management Division (JMD) provided:

- instructional materials to be used in a one time general training;
- and technical assistance to other DOJ components.

Descriptions: DOJ staff prevention training programs.

FY 95: Part of overall operating budget.

FY 96: Part of overall operating budget.

FY 97: Part of overall operating budget.

***The National Strategy for HIV and AIDS, Appendix A: Prevention
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Populations Served: DOJ employees.

Constituency Involvement: None.

Unmet Need: Additional resources for field office training for USMS and FBI.

***The National Strategy for HIV and AIDS, Appendix A: Prevention
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Agency: Corporation for National Service

Goal: To offer HIV/AIDS education programs and other services with volunteers from the Learn and Serve America project.

Objective: Support HIV-related Learn and Serve America projects.

Action Steps: Continue programs for youth in elementary school or high school to volunteer in community service activities, such as peer education in HIV/AIDS prevention.

Continue to award higher education grants directly to colleges and universities which provide service opportunities on HIV/AIDS prevention.

Program Description: Examples of higher education programs include Robert Wood Johnson Medical School and the University of San Diego where students provide education on HIV/AIDS to homeless and other high risk populations.

FY 95: Part of overall operating cost.

FY 96: Part of overall operating cost.

FY 97: Part of overall operating cost.

Populations Served: Persons living with HIV and AIDS and others who could benefit from HIV/AIDS education.

Constituency Involved: The Learn and Serve America program and students across the country.

Unmet Needs: Without these programs, students would not have an opportunity to serve their communities in HIV/AIDS related projects.

***The National Strategy for HIV and AIDS, Appendix A: Prevention
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Agency: Food and Drug Administration

Goal: Reduce transfusion-transmitted HIV infection.

Objective: Ensure supply and safety of the national blood supply.

Action Steps: Establish policies, expedite review of product applications, conduct approval inspections, oversee surveillance, and support enforcement activities.

Descriptions: Encourage high risk donors to exclude themselves; update list of unsuitable donors; quarantine and test blood; investigate incidents to identify, and rectify common errors in blood banks.

FY 95: \$17,458,000

FY 96: \$17,458,000

FY 97: \$17,458,000

Populations Served: All persons who may receive blood or blood products.

Constituency Involvement: The FDA depends on scientific advisory committees to provide independent expert advice to the agency in its evaluation of regulated products. These committees are composed of representatives from academia, research, government, industry, and patient advocates.

Unmet Need: With the passage of Prescription Drug Use Fee Act of 1992, the FDA has been able to expeditiously review HIV/AIDS related therapeutic applications. With the continuation of the provisions in the Act, the FDA will be able to continue expeditious reviews.

***The National Strategy for HIV and AIDS, Appendix B: Research
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Agency: Department of Defense

Goal: Carry out state-of-the-art research on the prevention and treatment of HIV infection to promote medical readiness in U.S. military forces.

Objective: Support the development of a safe and effective HIV vaccine.

Support the development of new biochemical and genetic strategies to slow HIV disease progression

Support natural history studies for the purpose of evaluating the efficacy of intervention strategies.

Action Steps: Define the global molecular epidemiology of HIV to assist with candidate vaccine selection;

Explore novel vaccine technologies;

Conduct vaccine trials in endemic areas;

Assess the immune response and efficacy of vaccine candidates;

Evaluate potential therapies for treatment of HIV infection and potential for immune reconstitution;

Evaluate prevalence of drug resistance, develop rapid genetic assay for resistant mutants, and methods for genetic targeting of novel therapies *in vivo*;

Participate in national surveillance of AZT resistance;

Develop a comprehensive panel of immunologic, virologic, and functional parameters for management of HIV infection; and

Support natural history studies and specimen repositories.

Descriptions: Vaccine, therapeutic, and epidemiological research, including vaccine design, development and testing in the U.S. and overseas locations; epidemiologic studies of vaccine field studies; and reduction or conclusion of drug treatment and behavior studies.

FY 95: \$37,000,000

***The National Strategy for HIV and AIDS, Appendix B: Research
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FY 96: \$26,600,000

FY 97: \$9,611,000

Populations Served: Active duty personnel.

Constituency Involvement: Clinicians, researchers, and active duty personnel.

Unmet Need: Increased resources would permit more aggressive research on promising therapies and vaccine candidates.

Agency: Department of Energy

Goal: Provide infrastructure support for physical chemical research, termed structural biology, including indirect support for HIV-related research.

Objective: In collaboration with other Federal agencies, provide access to sophisticated equipment and specially trained scientific personnel.

Action Steps: In collaboration with all relevant agencies (NIH, NSF, DOE) and the scientists they support, provide continued essential support for structural chemistry and biology facilities. Provide both the academic and the industrial community access to the facilities for further studies on the structural biology of HIV.

Descriptions: The National Synchrotron Light Source at Brookhaven National Laboratory includes a Department of Energy supported x-ray beam line extensively used by structural biologists studying virus structure, including the structure of HIV. In addition, through its National Laboratory system, DOE provides user facilities at other synchrotron light sources and at neutron beam facilities, which can be used by researchers to characterize the structural configuration of intact HIV, and HIV's biochemical components, often in complexes with inhibitors. These studies assist in the development of novel therapies, as well as advance our understanding of the pathogenesis and fundamental biology of HIV growth.

FY 95: Part of DOE's general operating budget.

FY 96: Part of DOE's general operating budget.

FY 97: Part of DOE's general operating budget.

Populations Served: Scientific community.

Constituency Involvement: Access to resources through peer review.

Unmet Need: Stable funding, guaranteed access for scientists to the facilities for the foreseeable future.

***The National Strategy for HIV and AIDS, Appendix B: Research
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Agency: Department of Commerce

Goal: To foster, serve, and promote the Nation's economic development and technological advancement, including encouraging HIV-related advances and innovation through the Department's collaborative efforts with the global business community.

Objective: Support activities which can assist in forwarding AIDS research by expanding the role of public-private partnerships in developing a vaccine and therapeutics.

Action Steps: Through the Advanced Technology Program (ATP), promote advances in biotechnology and provide funding to small and start-up research and development companies;

Support the Patent and Trademark Office's (PTO) AIDS-related patent database, developed in partnership with the National Science Foundation;

Through the National Technical Information Service, disseminate HIV-related training and technical materials;

Through data collection and analysis programs conducted by the Bureau of the Census and the Bureau of Economic Analysis, provide data for decision-making regarding the distribution of funds and other resources for private and public health initiatives, including HIV-related research, treatment, and service programs;

Through scientific standards, methodologies and technologies developed through the programs of the National Institute of Standards and Technology, set standards for laboratory procedures and equipment calibration at research facilities, including those conducting HIV-related research; and

Through the Patent and Trademark Office Biotechnology Examining Groups, review applications for a range of proposed HIV-related patents.

Descriptions: Advance Technology Program, Patent and Trademark Office reviews, National Technical Information Service, Bureau of the Census, and the National Institute of Standards and Technology.

FY 95: Part of overall operating budget

FY 96: Part of overall operating budget

FY 97: Part of overall operating budget

***The National Strategy for HIV and AIDS, Appendix B: Research
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Populations Served: Start-up companies, biotechnology and pharmaceutical companies, academic institutions, and researchers.

Constituency Involvement: The Department supports public-private partnerships to encourage innovative research.

Unmet Need: An increase in support for valuable programs such as ATP and the Patent and Trademark Office's innovative AIDS-related patent database would enhance Department of Commerce's ability to serve both public and private sectors.

***The National Strategy for HIV and AIDS, Appendix B: Research
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Agency: Department of Justice

Goal: To estimate the prevalence of HIV/AIDS among the corrections and parole population and to monitor the HIV/AIDS-related policies of Federal, State, and local correctional agencies.

Objective: Data collection and dissemination of periodic reports.

Action Steps: Conduct surveys of federal, state and local prisons and inmates and publish results in periodic reports.

Descriptions: When published, the 1995 Survey on Probation, the 1996 Survey of Inmates in Local Jails, and the 1997 Survey of State and Local Federal Inmates in Adult Correctional Facilities will contain estimates of HIV prevalence among probationers and inmates, and characteristics of this HIV positive population.

Publication of reports describing findings of multi-year project, "HIV Education in Lockups and Booking Facilities."

1994 Survey of HIV/AIDS in Correctional Facilities.

Publication of 1996 report "HIV/AIDS and STDs in Juvenile Facilities."

Census of prison, survey of jail and prison inmates and probationers, and study examining research on prevention programs directed towards at persons whose behavior makes them vulnerable to HIV infection.

FY 95: Part of overall operating budget.

FY 96: Part of overall operating budget.

FY 97: Part of overall operating budget.

Populations Served: Department of Justice, corrections administrators, and public.

Constituency Involvement: None.

Unmet Need: Funding for research into requirements for effective management of HIV positive inmates.

Funding to conduct surveys of individual facilities and increase surveys of the juvenile system, and to conduct additional work in the areas of prevention and education.

***The National Strategy for HIV and AIDS, Appendix B: Research
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Agency: Food and Drug Administration

Goal: Ensure the safety and effectiveness of HIV-related therapeutic agents.

Objective: Expedite access and approval of safe and effective drugs and biologics.

Action Steps: Encourage quality applications and data submissions to review division to ensure timely and efficient pre- and postmarket review.

Descriptions: Conduct meetings with sponsors to discuss drug development plans, expanded access programs, and accelerated approval options.

Facilitate scientific review of drugs and biologics by FDA advisory committees.

FY 95: \$25,235,000

FY 96: \$25,235,000

FY 97: \$25,235,000

Populations Served: All persons who may benefit from approved therapeutic agents.

Constituency Involvement: The FDA depends on scientific advisory committees to provide independent expert advice to the agency in its evaluation of regulated products. These committees are composed of representatives from academia, research, government, industry and patient advocates.

Unmet Need: With the passage of Prescription Drug Use Fee Act of 1992, the FDA has been able to expeditiously review HIV/AIDS related therapeutic applications. With the continuation of the provisions in the Act, the FDA will be able to continue expeditious reviews.

***The National Strategy for HIV and AIDS, Appendix B: Research
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Agency: Food and Drug Administration

Goal: Ensure the safety and effectiveness of HIV-related preventive and therapeutic vaccines.

Objective: Expedite regulatory review of promising products for preventive and therapeutic vaccines.

Action Steps: Expand partnership between FDA and its counterparts from outside organizations involved in vaccine development.

Descriptions: Encourage early consultation with sponsoring companies, develop guidance documents, exchange information, and work with other agencies and international organizations. Facilitate scientific review by FDA advisory committees.

FY 95: \$11,863,000

FY 96: \$11,863,000

FY 97: \$11,863,000

Populations Served: All persons who may benefit from approved preventive and therapeutic vaccines.

Constituency Involvement: The FDA depends on scientific advisory committees to provide independent expert advice to the agency in its evaluation of regulated products. These committees are composed of representatives from academia, research, government, industry, and patient advocates.

Unmet Need: With the passage of Prescription Drug Use Fee Act of 1992, the FDA has been able to expeditiously review HIV/AIDS related therapeutic applications. With the continuation of the provisions in the Act, the FDA will be able to continue expeditious reviews.

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Agency: Food and Drug Administration

Goal: Ensure the effectiveness of test methodologies for HIV detection and measurement.

Objective: Expedite improved test methodologies (such as diagnostic reagents and test kits) for HIV detection, confirmation, and viral load measurement.

Action Steps: Ensure timely and efficient pre- and postmarket review.

Descriptions: Encourage early consultation with sponsor and develop guidance documents. Facilitate scientific review of drugs and biologics by FDA advisory committees.

FY 95: \$8,732,000

FY 96: \$8,732,000

FY 97: \$8,732,000

Populations Served: All persons who may benefit from approved test methodologies for HIV detection and measurement.

Constituency Involvement: The FDA depends on scientific advisory committees to provide independent expert advice to the agency in its evaluation of regulated products. These committees are composed of representatives from academia, research, government, industry, and patient advocates.

Unmet Need: With the passage of Prescription Drug Use Fee Act of 1992, the FDA has been able to expeditiously review HIV/AIDS related therapeutic applications. With the continuation of the provisions in the Act, the FDA will be able to continue expeditious reviews.

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Agency: Food and Drug Administration

Goal: Ensure the safety and effectiveness of HIV-related medical devices.

Objective: Expedited access and approval of safe and effective medical devices.

Action Steps: Encourage quality application and data submissions to ensure timely and efficient pre- and postmarket review.

Descriptions: Conduct meetings with sponsors on study design; produce guidance documents. Facilitate scientific review of drugs and biologics by FDA advisory committees.

FY 95: \$9,457,000

FY 96: \$9,457,000

FY 97: \$9,457,000

Populations Served: All persons who may benefit from approved HIV-related medical devices.

Constituency Involvement: The FDA depends on scientific advisory committees to provide independent expert advice to the agency in its evaluation of regulated products. These committees are composed of representatives from academia, research, government, industry, and patient advocates.

Unmet Need: The FDA depends on scientific advisory committees to provide independent expert advice to the agency in its evaluation of regulated products. These committees are composed of representatives from academia, research, government, industry, and patient advocates.

***The National Strategy for HIV and AIDS, Appendix C: Care and Services
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Agency: Health Care Financing Administration

Goal: Provide primary health care to Medicaid-eligible HIV positive persons.

Objective: Provide quality primary health to Medicaid-eligible HIV positive persons.

Action Steps: Assess state compliance with Medicaid program standards. Review and evaluate waiver applications. Encourage compliance with changes in the standard-of-care.

Description: Medicaid primary health care services.

FY 95: \$1,640,000,000 (Federal share)

FY 96: \$1,800,000,000 (Federal share)

FY 97: \$1,970,000,000 (Federal share)

Populations Served: HIV positive Medicaid-eligible persons.

Constituency Involvement: Information and activities routinely discussed with external groups at meetings and conferences.

Unmet Need: Since Medicaid is an entitlement program any unmet need is a result of State budgeting limitations.

***The National Strategy for HIV and AIDS, Appendix C: Care and Services
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Agency: Health Care Financing Administration

Goal: Provide quality home health care for HIV positive Medicaid and Medicare beneficiaries.

Objective: Provide quality standards for appropriate home health care services and treatment of HIV disease.

Action Steps: Identify current home health care practices through literature review and survey of best practices.

Descriptions: Develop and implement quality standards for appropriate home health care for HIV positive beneficiaries in partnership with private sector organizations and PHS agencies;

Develop directives in implementation of developed guidelines.

FY 95: \$25,000 (Conferences and materials)

FY 96: NA

FY 97: NA

Populations Served: HIV positive Medicaid and Medicare beneficiaries receiving home health care.

Constituency Involvement: Significant constituent consultation throughout course of project development.

Unmet Need: Implementation of directives dependent on nature and resources of each project partner.

*The National Strategy for HIV and AIDS, Appendix C: Care and Services
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Agency: Social Security Administration

Goal: Provide access to benefits payable under the Social Security Act.

Objective: Expedite and facilitate the processing of all disability claims, including those filed based on an allegation of HIV disease.

Action Steps: Process HIV claims under high priority status using procedures for processing claims where there is an indication of terminal illness.

Revise as necessary SSA's adjudicative policies based on dynamic nature of HIV disease.

Expedite claims processing by streamlining disability claims procedures and help AIDS service providers assist clients applying for SSI.

Descriptions: Disability and Social Insurance Programs and Outreach Demonstration Program (ODP).

FY 95: 1,005,000 plus 433,000 for ODP

FY 96: 1,200,000

FY 97: Use OMB figure

Populations Served: People living with HIV eligible for Title II and/or Title XVI social security benefits.

Constituency Involvement: People living with HIV and AIDS and their caregivers and advocates, the medical community, national AIDS organizations, SSA employees, coordinating federal agencies.

Unmet Need: Outreach programs now reach only four states. Additional funding would expand outreach project.

***The National Strategy for HIV and AIDS, Appendix C: Care and Services
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Agency: Social Security Administration

Goal: Provide information regarding benefits payable under the Social Security Act.

Objective: Provide information to people living with AIDS (PWAs) and to the medical community regarding eligibility requirements and changes in SSA programs as they apply to PWAs.

Action Steps: Inform PWAs about disability programs and eligibility requirements through mass mailings, electronic bulletin boards and community based organizations.

Participate and exhibit at national conventions.

Train on disability programs.

Coordinate public information campaigns among Federal agencies and non-governmental organizations to disseminate information to more people more rapidly.

Descriptions: Public information campaigns.

FY 95: NA

FY 96: NA

FY 97: NA

Populations Served: Persons living with HIV and their caregivers and advocates, the medical community and federal agencies.

Constituent Involvement: PLAs, their caregivers and advocates; the medical community; national- and community-based AIDS organizations; coordinating federal agencies and SSA employees.

Unmet Need: Additional technical, clerical support to disseminate information to more people.

Agency: Department of Housing and Urban Development

Goal: Provide support and encourage the development of local programs that provide a comprehensive range of housing and related services for persons living with HIV.

Objective: Provide states and localities with resources to provide housing and related services under long-term comprehensive strategies for meeting the needs of persons living with HIV/AIDS.

***The National Strategy for HIV and AIDS, Appendix C: Care and Services
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Action Steps: Award grants, both formula-based and competitively-selected grants to support a broad range of housing and services to prevent homelessness of persons living with HIV/AIDS. Unmet need, see above.

Descriptions: Housing Opportunities for Persons with AIDS (HOPWA) Program, in coordination with other HUD resources (see other HUD goals).

FY 95: \$171,000,000

FY 96: \$171,000,000

FY 97: \$171,000,000

Populations Served: Low income persons living with HIV and their families.

Constituency Involvement: Communities participating in the Consolidated Planning Process will involve HIV/AIDS housing and services providers, advocates, and persons living with HIV.

Unmet Need: The HOPWA program can be estimated to serve about 50,000 persons living with HIV and their families. This includes about 35,000 units of housing assistance, mostly in the form of short-term payments and rental assistance. Up to 50 percent of persons living with HIV/AIDS are expected to need housing assistance of some kind during their lifetime; given that over 300,000 persons are living with AIDS, approximately 150,000 persons are expected to require housing assistance.

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Agency: Department of Housing and Urban Development

Goal: Increase the housing supply for persons with disabilities, including persons living with HIV and their families.

Objective 1: Increase the supply of permanent housing units for persons living with HIV.

Action Steps: Encourage HIV housing and program sponsors to apply for funds for projects for persons living with HIV.

Descriptions: Section 811 Supportive Housing Program for Persons with Disabilities.

FY 95: \$376,000,000	(Represents the full program appropriation; no set aside for persons with HIV is made.)
FY 96: \$258,000,000	(Represents the full program appropriation; no set aside for persons with HIV is made. \$25 million for increased contract terms only)
FY 97: \$174,000,000	(Part of Housing for Special Populations fund of \$769 million, i.e. elderly and disabled.)

Populations Served: Disabled person 18 years of age and older.

Constituency Involvement: Input received through local planning groups.

Unmet Need: Program can serve PWAs in project which may include persons with other disabilities; however, with the increasing number of persons living with HIV/AIDS, further housing resources will need to be sought.

Objective 2: Assist communities in providing local comprehensive systems of housing assistance and related services for persons who are homeless by increasing the supply, accessibility and appropriateness of housing and related supportive service options to address the needs of persons who are homeless and living with HIV/AIDS.

Action Steps: Ensure the availability of funds to support community-wide efforts to comprehensively address the needs for emergency, transitional and permanent supportive housing for person with HIV/AIDS.

Descriptions: Continuum of Care Homeless Assistance, including the Supportive Housing Program, Shelter Plus Care program, and the Section 8 Moderate Rehabilitation for Single Room Occupancy Dwellings for Homeless Individuals program.

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FY 95: \$1,100,000,000

FY 96: \$823,000,000

FY 97: \$1,120,000,000

Populations Served: Homeless persons and families, including persons with disabilities, such as persons living with HIV/AIDS.

Constituency Involvement: Communities participating in the development of coordinated and comprehensive systems of housing and care for persons who are homeless, include government agencies, nonprofit organizations, advocates, and consumers.

Unmet Need: In 1995, HUD made the largest ever award of Federal funds to address the needs of persons who are homeless to communities and projects which are part of comprehensive and coordinated systems of housing and care. Although 881 projects were funded with the \$904 million available in the competition, another 1,900 projects were not selected or funded due to the amount of funds available. These additional 1,500 projects requested about \$2 billion in assistance. No measure of the unmet needs of HUD's other programs are made, although programs which support community economic development, the availability of affordable housing and reduce the rent burdens on clients through rental assistance may have considerable amounts of unmet needs for persons living with HIV/AIDS.

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Draft for Office of Management and Budget Review: 6.28.96

Agency: Department of Housing and Urban Development

Goal: Increase the capacity of AIDS housing and service providers to develop, operate, and evaluate housing programs for persons living with HIV.

Objective: Increase the capacity of AIDS housing and service providers to develop, operate, and evaluate housing programs for persons living with HIV.

Action Steps: Ensure the availability of technical assistance and other support for nonprofit providers.

Authorize technical assistance activities in HUD programs for HIV-related nonprofit providers and grantees.

Descriptions: Technical assistance or other support for the development of program capacity.

FY 95: \$0

FY 96: \$0 (Some funding within homeless assistance grants and HOPWA funding.)

FY 97: \$0 (Some funding within homeless assistance grants and HOPWA funding.)

Populations Served: Homeless persons, including those living with HIV.

Constituency Involvement: HUD program grantees, including State and local governments, housing authorities and finance agencies and non-profit organizations that develop, provide or coordinate services for person receiving housing assistance, as well as advocates and consumers.

Unmet Need: There is a need to broaden and deepen the ability of AIDS housing and service providers and AIDS program grantees to expand the range of housing options, ensure quality and responsive programs and undertake evaluation efforts. This will become increasingly important as additional demands will be made on programs as the epidemic increases the number of persons living with HIV. No additional funds are requested as these activities are part of the functions of existing offices, such as the Office of HIV/AIDS Housing, Fair Housing and Equal Opportunities and other program offices.

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Draft for Office of Management and Budget Review: 6.28.96***

Agency: Department of Housing and Urban Development

Goal: Increase the awareness of staff in public and private organizations to the general and unique needs of persons living with HIV.

Objective: Increase awareness regarding HIV among agency and other staff.

Action Steps: Authorize training activities in HUD programs for HUD staff, HIV-related nonprofit providers and grantees.

Descriptions: Training and support for HIV awareness.

FY 95: \$0

FY 96: \$0

FY 97: \$0

Populations Served: Public and private staff and persons at risk for HIV infection.

Constituency Involvement: HUD program grantees, including State and local governments, housing authorities and finance agencies and non-profit organizations that develop, provide or coordinate services for person receiving housing assistance, as well as advocates and consumers.

Unmet Need: Misinformation, prejudice and non-responsiveness continue in the operation of public and private housing programs and the general awareness of individuals in preventing the spread of HIV. The increasing numbers of persons living with HIV requiring housing assistance, will increase the challenges on service programs to be vigilant in ensuring that information is accurately communicated and efforts are in no manner prejudicial. No additional funds are requested as these activities are part of the functions of existing offices, such as the Office of HIV/AIDS Housing, Fair Housing and Equal Opportunities and other program offices.

The National Strategy for HIV and AIDS, Appendix C: Care and Services
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Agency: Department of Housing and Urban Development

Goal: Increase the awareness and responsiveness of HUD programs that may target or incidentally assist persons living with HIV.

Objective: Ensure that the needs of persons living with HIV are addressed in HUD programs.

Action Steps: Designate an office with direct responsibility for programs and advocacy on AIDS issues.

Descriptions: Office on HIV/AIDS Housing

FY 95: \$0 (within current efforts)

FY 96: \$0 (within current efforts)

FY 97: \$0 (within current efforts)

Populations Served: Homeless persons, nonprofit organizations, government agencies, and HUD staff.

Constituency Involvement: HUD program grantees, including State and local governments, housing authorities and finance agencies and non-profit organizations that develop, provide or coordinate services for person receiving housing assistance, as well as advocates and consumers.

Unmet Need: Maintaining office functions that promote understanding of AIDS and the needs of persons living with HIV as well as support for programs that support these clients. More staff would allow even greater impact on HUD programs. No additional funds are requested as these activities are part of the functions of existing offices, such as the Office of HIV/AIDS Housing, Fair Housing and Equal Opportunities and other program offices.

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Agency: Department of Defense

Goal: Provide state-of-the-art patient-centered comprehensive care for all eligible service members throughout the asymptomatic and symptomatic phases of HIV and AIDS.

Objective: Provide immediate evaluation and continuity of care for service members who become HIV positive.

Through contact tracing, identify persons at risk and provide consultation and evaluation. Refer to care as appropriate.

Provide continuation of employment until no longer physically fit for duty.

Action Steps: Conduct periodic screening of active duty personnel;

For HIV positive personnel, provide comprehensive evaluation, treatment, and care;

Restrict assignment to continental U.S., Alaska, Hawaii, or Puerto Rico to assure continuity of medical care; and

Educate health care staff on best clinical practice for persons living with HIV.

Descriptions: Comprehensive state-of-the-art clinical care.

FY 95: \$2,000,000 to \$3,000,000

FY 96: \$2,000,000 to \$3,000,000

FY 97: \$2,000,000 to \$3,000,000

Populations Served: HIV positive active duty personnel.

Constituency Involvement: Clinicians, active duty personnel, military health providers, manpower and personnel administration staff.

Unmet Need: None.

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Agency: Office of Personnel Management

Goal: Implement and improve workplace policies and employee benefits.

Objective 1: Implement and improve workplace guidelines.

Action Steps: Publish and distribute OPM's "HIV/AIDS Policy Guidelines".

Publish and distribute OPM personnel manuals on related HIV/AIDS issues, such as information on accommodations for employees who are HIV positive and on educational resources.

Descriptions: Policy development.

FY 95: \$20,000

FY 96: \$15,000

FY 97: \$0 (Goal achieved)

Populations Served: Federal agencies and employees, including labor organizations.

Constituency Involvement: Federal agencies and employees, including labor organizations.

Unmet Need: None.

Objective 2: Improve life insurance benefits programs.

Action Steps: Distribute guidance on "living benefits" insurance benefits.

Develop and distribute guidance on viatical settlements.

Descriptions: Insurance programs.

FY 95: None.

FY 96: None.

FY 97: None.

Populations Served: Federal agencies and employees and retirees covered by the Federal Employees Group Life Insurance Program.

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Constituent Involvement: Federal agencies and employees and retirees covered by the Federal Employees Group Life Insurance Program.

Unmet Need: None.

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Agency: Department of Justice

Goal: To provide education and training for law enforcement and social services agencies regarding victims of crime.

Objective: To improve trainees' interaction with the populations they serve, especially those who might have been exposed to the HIV virus or those who may be HIV positive.

Action Steps: Provide funds to the National Victims Center (NVC) under a cooperative agreement. (The NVC provides education, and sensitivity training to law enforcement personnel and social service agencies.)

Provide grant funds to the Educational Development Center (EDC) for training regarding hate/bias crimes. (The EDC trains law enforcement and social service agency personnel regarding procedures for identifying and handling hate crimes, including such crimes against those who are HIV positive or living with AIDS.

Descriptions: Provide grants and operate cooperative agreements.

FY 95: \$133,900

FY 96: Although no funds have been budgeted, the training for law enforcement and social services personnel was covered by the FY 95 budget and will continue.

FY 97: The department anticipates allocating additional funds for training.

Populations Served: Law enforcement and social service agencies are directly served. The crime victims who interact with these agencies benefit indirectly.

Constituent Involvement: Victims rights groups were consulted regarding the curriculum development for the training program.

Unmet Need: Additional resources to provide more regional training.

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Agency: Department of Justice

Goal: Provide health care for prisoners with HIV/AIDS. Educate and counsel the inmate population about the transmission of HIV/AIDS and for the purpose of reducing the incidence of HIV transmission.

Objective: Provide counseling, education and treatment for prisoners.

Action Steps: Conduct random HIV testing on 10% of newly incarcerated inmates;

Provide pre- and post-test counseling for inmates;

Conduct HIV tests on new inmates where clinically indicated,
provide HIV training and education for all newly committed
inmates during their admission and orientation;

Provide additional HIV and infectious disease-related training annually to each incarcerated inmate who has a job-related potential exposure to bloodborne pathogens; and

Provide health care for inmates.

Descriptions: Provide testing, counseling, education, and health care for inmates.

FY 95: \$1,000,000 for prevention and \$500,000,000 for medical care

FY 96: \$1,000,000 for prevention and \$500,000,000 for medical care

FY 97: \$1,000,000 for prevention and \$600,000,000 for medical care

Population Served: Bureau of Prisons inmates.

Constituency Involvement: None.

Unmet Need: Funding for counseling and testing of all inmates.

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Agency: Corporation for National Service

Goal: To promote HIV/AIDS awareness and to provide respite care and other services to persons living with HIV and AIDS.

Objective 1: To promote HIV/AIDS awareness through training and other service activities.

Action Steps: Encourage all AmeriCorps programs to provide training in HIV/AIDS to AmeriCorps members and encourage them to become involved in HIV/AIDS service activities.

Program Description: Examples of AmeriCorps programs focusing on AIDS: The National AIDS Fund and the Birmingham AIDS Outreach Program.

FY 95: Part of overall operating cost.

FY 96: Part of overall operating cost.

FY 97: Part of overall operating cost.

Populations Served: Persons living with HIV and AIDS and AmeriCorps Members.

Constituency Involved: AmeriCorps Members and the public at large.

Unmet Needs: Without these programs, HIV/AIDS service providers would not be able to deliver services to as many people with HIV/AIDS.

Objective 2: To match volunteers from the National Senior Service Corps with persons living with HIV and AIDS for respite care and other services.

Action Steps: Through the Foster Grandparent program, provide foster and respite care, as well as counseling and living assistance for children with HIV/AIDS.

Through the Senior Companion Program, provide some persons living with HIV and AIDS with volunteers for respite care and living assistance.

Continue to provide some persons living with HIV and AIDS with health and nutrition services and respite care from the Retired and Senior Volunteer Program.

Program Description: An example of a program provided by senior volunteers include a program in Indianapolis where seniors visit people living with AIDS that are confined to a hospice.

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FY 95: Part of overall operating cost.

FY 96: Part of overall operating cost.

FY 97: Part of overall operating cost.

Populations Served: Persons living with HIV and AIDS.

Constituency Involved: National Senior Service Corps and people living with HIV and AIDS.

Unmet Needs: Without these programs, respite services to persons living with AIDS would be unavailable.

***The National Strategy for HIV and AIDS, Appendix D: International Activities
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Agency: U.S. Agency for International Development

Goal: Sustainable reduction in sexually transmitted infections (STIs)/HIV transmission among key populations.

Objective 1: Develop and test new interventions and methods to prevent transmission and mitigate impact of the epidemic.

Action Steps: Support research to identify activities that immediately and directly influence the effectiveness of existing programs.

Undertake activities that enable women to reduce the risk of HIV infection.

Undertake pilot projects and research to mitigate the impact of HIV in severely affected areas.

Undertake activities that support the public health infrastructure and utilization of HIV vaccines.

Description: Development and improvement of women's access to female controlled barrier methods. Improvement of STD/HIV prevention interventions and technologies for STD management. Support of studies that enhance understanding of behaviors and epidemiology, mitigate the impact of HIV/AIDS on communities. Facilitate opportunities for international field trials of promising vaccines.

Population Served: Persons living in USAID's HIV/AIDS emphasis countries.

Constituency Involvement: USAID agency employees, developing country representatives, community representatives, PVO/NGO donors, multilateral donors, and bilateral donors.

Unmet Needs: Given the limited resources available for international development assistance, it is not possible for USAID to meet all the needs in this area.

Objective 2: Policy reform addressing social, cultural, regulatory and economic issues related to HIV/AIDS and other STIs.

Action Steps: Conduct policy dialogue with decision makers to encourage a high-level multi-sectoral coordinated response to HIV/AIDS.

Address resource issues and long-term sustainability at all levels.

Address the social and cultural impediments to the successful implementation of HIV/AIDS programs.

Develop tools and complete research to serve policy dialogue and reform.

Description: Increase the use of methods aimed at reducing perinatal and parenteral HIV transmission. Coordinate effective donor responses and leveraged funding. Support international and regional multi-sectoral approaches and mobilize the private sector. Support decision-makers addressing difficult social, cultural, and religious issues. Continue to develop and use tools such as simulation modelling to describe the socio-economic impact of the epidemic.

Population Served: Persons living in USAID's HIV/AIDS emphasis countries.

Constituency Involved: USAID agency employees, developing country representatives, community representatives, PVO/NGO partners, multilateral donors and other bilateral donors.

Unmet Needs: Given the limited resources available for international development assistance, it is not possible for USAID to meet all the needs in this area.

Objective 3: Develop and implement HIV/AIDS prevention programs that utilize proven interventions to prevent transmission.

Action Steps: Promote safer sexual behavior through information, education, and communication.

Increase the demand for, access to, and use of condoms.

Control STIs by improving STI with diagnosis and treatment services and by education of persons with STIs.

Description: Improvement of social and cultural commitment to HIV/AIDS prevention. Strengthening programs to create a more supportive environment for behavior change, improving the quality of diagnosis and treatment, and increasing access to services including counseling and training for care providers, and facilitating the procurement of therapies.

Population Served: Persons living with AIDS in USAID HIV/AIDS emphasis countries.

Constituency Involved: USAID agency employees, developing country representatives,

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community representatives, PVO/NGO partners, multilateral donors and other bilateral donors.

Unmet Needs: Given the limited resources available for international development assistance, it is not possible for USAID to meet all the needs in this area.

Objective 4: Enhance capacity of public, private NGO and community based organizations to design, implement and evaluate effective HIV/STI prevention and care programs.

Action Steps: Improve policy reform, research capability, logistics systems, and use of local and regional NGO networks.

Enhance the technical and managerial capability of indigenous NGOs and PVOs to design, implement and evaluate HIV/STI projects in all HIV/AIDS emphasis countries.

Strengthen local and regional networks of NGOs involved in HIV prevention, care and advocacy in at least six countries.

Assess and strengthen host country capacity for HIV/STI prevention research.

Disseminate models of home and community based delivery of HIV/STI care.

Description: Support for USAIDS' response to HIV/AIDS in developing countries, the Paris Summit Initiative, and the Greater Involvement of Persons Infected and Affected by HIV/AIDS (GIPA). Provide support for and strengthen linkages between indigenous NGOs and U.S. domestic PVOs, NGOs, and ASOs. Concentrate bilateral and care resources on selected emphasis countries to assure comprehensive programs; strengthen trans-national and regional activities in prevention and research through the "areas of affinity" concept. Continue collaboration with and support for efforts of multi-lateral organizations such as UNAIDS, WHO, UNDP, ENFPA, UNICEF, and the U.S.-Japan Common Agenda for HIV/AIDS prevention.

FY 95: \$119,000

FY 96: \$114,000

FY 97: \$114,000

Population Served: Persons living in USAID's HIV/AIDS emphasis countries.

Constituency Involved: USAID agency employees, developing country representatives, community representatives, PVO/NGO partners, multilateral donors and other bilateral

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donors.

Unmet Needs: Given the limited resources available for international development assistance, it is not possible for USAID to meet all the needs in this area.

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Agency: United States Information Agency

Goal: To increase understanding of and support for U.S. Government (USG) policies and programs on HIV/AIDS among foreign publics.

Objective 1: To provide accurate information on USG policy and programs to key foreign audiences.

Action Steps: Disseminate information via multi-language television, radio and texts distributed directly and through overseas posts and reference centers, tours and briefings for foreign journalists and health policy officials, and public affairs campaigns that support specific USG initiatives in foreign countries.

Description: Information on USG policy and programs.

FY 95: \$350,000

FY 96: \$325,000

FY 97: \$325,000

Population Served: Policy makers, academics, journalists, researchers and Non-governmental Organizations (NGO) leaders.

Constituency Involvement: USG officials, academics/researchers and NGO leaders.

Unmet Needs: Lack of technology in many underdeveloped countries may prohibit information from reaching key audiences.

Objective 2: To give foreign decision makers a first-hand experience with U.S. policy and programs - public and private, national and local - to address the HIV/AIDS pandemic and encourage exchange with their U.S. counterparts.

Action Steps: Sponsor multi-regional, regional and individual International Visitor Programs, focusing specifically on HIV/AIDS issues and as part of programs on substance abuse, civil society, human rights and community health.

Description: International Visitors Program.

FY 95: \$240,000

FY 96: \$200,000

FY 97: \$200,000

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Population Served: Health policy makers and NGO leaders.

Constituency Involvement: U.S. NGOs, state, local and federal agencies and academic/research institutions.

Unmet Needs: The program is currently very limited, only allowing for 31 health policy officials and community leaders from 24 countries to visit the United States.

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Agency: Department of Defense

Goal: Support leadership in the international community by sharing research methodologies and findings, observing host nation requirements for HIV testing and reporting, and supporting research at international sites with high prevalence or incidence of HIV and AIDS.

Objective: Participate in global surveillance initiatives and maintain current knowledge of host nation HIV screening and reporting requirements.

Action Steps: Determine the prevalence of HIV initiative, infections, and genotypes in geographic areas of military activity.

Coordinate with Department of State.

Descriptions: International efforts including the study of geographic distribution of genotypes at DoD overseas laboratories. Support for basic research on diagnostic tests and vaccines.

FY 95: \$1,500,000

FY 96: \$1,500,000

FY 97: \$1,200,000

Populations Served: Foreign national and active duty U.S. military personnel.

Constituent Involvement: Active duty military and foreign service national of DoD overseas laboratories.

Unmet Need: None.

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Agency: Peace Corps

Goal: Prevent transmission of HIV infection for Peace Corps Trainees and Volunteers.

Objective 1: Provide all trainees with comprehensive HIV/AIDS training during the preservice training period.

Action Steps: Develop training modules, train overseas medical staff, and educate trainees.

Descriptions: HIV/AIDS prevention training for Peace Corps Volunteers/Trainees.

Objective 2: Provide continued HIV education and counseling for Peace Corps Volunteers and Medical Staff.

Action Steps: Train OMS staff on communication and counseling skills;

Continue to educate volunteers about HIV/AIDS during inservice trainings and conferences;

Develop and distribute health newsletters;

Provide one-on-one counseling for volunteers on an as needed basis;

Disseminate videos, pamphlets, education material on HIV/AIDS prevention; and

Follow CDC guidelines on prevention of transmission in a medical setting.

Descriptions: Follow-up HIV training for volunteers and medical staff. Make condoms available and easily accessible for all volunteers.

FY 95: \$300,000

FY 96: \$100,000

FY 97: \$100,000

Populations Served: Peace Corps Volunteers/Trainees and medical staff.

Constituency Involvement: Peace Corps Volunteers/Trainees and Peace Corps Medical Staff.

Unmet Need: Due to budget constraints, Office of Medical Services (OMS) will only be able

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to provide courses for in-country Medical Staff every other year.

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Agency: Peace Corps

Goal: Enhance the understanding of HIV/AIDS and transfer skills for prevention to the communities and countries in which Peace Corps Volunteers serve.

Objective: Provide quality programming and training on HIV/AIDS prevention as a primary project in six countries.

Provide quality programming and training to ten percent of all Volunteers to work in HIV/AIDS as a secondary activity.

Support on-going education and training of Associate Peace Corps Directors (APCD) in charge of programming at country level.

Liaison with other organizations working in HIV/AIDS both internationally and domestically.

Action Steps: Recruit 50 Volunteers to work in HIV/AIDS as their primary job;

Train 50 new Volunteers and 45 second year Volunteers in HIV/AIDS, language and cross-cultural skills;

Support 100 Volunteers to work in HIV/AIDS as their primary assignment;

Support the development of projects and training curriculum;

Support workshops for APCDs in three regions;

Provide expert consultants for the development of projects and training; and

Support attendance at international and national conferences and workshops on HIV/AIDS and share information.

Descriptions: HIV/AIDS prevention activities in developing countries around the world.

FY 95: \$4,500,000

FY 96: \$5,000,000

FY 97: \$5,000,000

Populations Served: Communities in developing countries, women and youth.

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Constituency Involvement: Peace Corps designs all programs in conjunction with the beneficiary population.

Unmet Need: There is higher demand for Peace Corps Volunteers than the agency can meet, and this is particularly true for program areas such as HIV/AIDS.

***The National Strategy for HIV and AIDS, Appendix E: Translation of Research into
Practice
Draft for Office of Management and Budget Review: 6.28.96***

Pending revised information from NIH and AHCPR.

***The National Strategy for HIV and AIDS, Appendix F: Civil Rights
Draft for Office of Management and Budget Review: 6.28.96***

Agency: Department of Justice

Goal: Enforce HIV-related civil rights laws and heighten issue awareness.

Objectives: Prevent discrimination on the basis of real or perceived HIV status.

Action Steps: Enforce civil rights laws and inform and educate the public.

Descriptions: Litigate HIV-related civil rights cases involving housing discrimination and discrimination in the provision of services.

Provide information via the Americans with Disabilities Act (ADA) information line and provide technical assistance to state and local governments, Federal agencies and other entities and individuals having rights and responsibilities under Titles II and III of the ADA.

Developed and disseminated ADA questions and answers intended for persons who are HIV positive or living with AIDS to 5,000 HIV/AIDS service providers.

FY 95: Information line \$350,000; other activities part of overall operating budget.

FY 96: Information line \$350,000; other activities part of overall operating budget.

FY 97: The President's 1997 budget requests a 3.9% increase for ADA enforcement.
Baseline number?

Populations Served: Victims of HIV/AIDS discrimination, Federal, state and local agencies, businesses and general populace.

Constituency Involvement: In addition to having access to the ADA information line, AIDS-related disability groups are sent the Justice Department's quarterly update on ADA enforcement activities and any relevant press releases on the Department's HIV-related anti-discrimination activities.

Unmet Need: Funds for attorneys for additional litigation. Public education and technical assistance for health care and day care providers regarding their ADA obligations to persons with HIV.

Agency: U.S. Equal Employment Opportunity Commission

Goal: As part of EEOC's overall enforcement goal to eliminate employment discrimination against persons with HIV disease.

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Objective: Enforce Title I of the Americans with Disabilities Act (ADA), which protects job applicants and employees with HIV disease from employment discrimination.

Action Steps: Receive, investigate, and resolve ADA discrimination complaints from job applicants and employees with HIV disease;

Litigate select cases involving employment discrimination against persons with HIV disease; and

Educate the public regarding ADA's protections for job applicants and employees with HIV disease.

Descriptions: Enforcement of Title I of the ADA.

FY 95: Part of EEOC's general operating budget.

FY 96: Part of EEOC's general operating budget.

FY 97: Part of EEOC's general operating budget.

Populations Served: Job applicants and employees with HIV disease.

Constituency Involvement: Ongoing communication with AIDS-related disability groups.

Unmet Need: An increase in the Commission's investigative and legal staff would provide for quicker resolution of all EEOC complaints, including HIV-related complaints brought under the ADA.

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Agency: Department of Labor

Goal: To provide protection for people living with HIV and AIDS from discrimination in the workplace.

Objective: Under the Rehabilitation Act of 1973 provide protection for persons living with HIV and AIDS from discrimination in the workplace.

Action Steps: Establish policies under Section 503 of the Rehabilitation Act of 1973 providing for processing and investigating complaints filed by persons living with HIV and AIDS.

Descriptions: Protection from discrimination in workplace.

FY 95: Part of overall operating budget.

FY 96: Part of overall operating budget.

FY 97: Part of overall operating budget.

Populations Served: Persons living with HIV and AIDS.

Constituency Involvement: Persons living with HIV and AIDS and Department of Labor staff.

Unmet Need: Current resource levels permit satisfactory processing of received cases.