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Resources for HIV Prevention for MSM

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The President's Emergency Plan for AIDS Relief (PEPFAR)

- Tom Lantos and Henry J. Hyde United States Global Leadership Against HIV/AIDS, Tuberculosis, and Malaria Reauthorization Act authorizes up to \$48 billion.
 - \$39 billion for HIV/AIDS, including Global Fund contributions
 - \$5 billion for malaria
 - \$4 billion for TB





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PEPFAR and USAID

- In the focus countries in FY2008, PEPFAR provided approximately \$712 million to support prevention activities.
- USAID is one of many US government organizations through which funding is channeled.
 - Other agencies include CDC, Departments of Defense, Labor, Health and Human Services, Peace Corps



PEPFAR Priorities for Most-at-risk Populations

- Implementing community-based approaches to behavior change — including peer education and outreach targeted at hard-to-reach groups;
- Distributing condoms and promoting correct and consistent condom use;
- Supporting initiatives to promote counseling and testing;
- Promoting STI screening and treatment;
- Strengthening linkages between HIV prevention and treatment and care services;
- Promoting male circumcision.



Generally, what does USAID fund (related to MSM/MARPS)?

- Operations and programmatic research
- Capacity Building of Civil Society Groups
- Mobile CT services for at-risk Populations
- Advocacy for Human Rights groups for Sexual Minority
- Evaluation of Interventions for MSM
- USAID and PEPFAR funding mechanisms do not necessarily follow “population” definitions
 - E.g. USAID does not have an MSM funding stream to which organizations can apply



“Champions” and Advocacy

- Identify “champions” who can advocate for funding to PEPFAR country programs, governments, or other organizations
- “Knowledge is power”
 - “Know your Epidemic”
 - Collect data on pilot projects; monitoring and evaluation are important
- Build partnerships with other local or international organizations
 - Capacity building
 - “South to south” collaboration



(A Few) Funding Mechanisms

- **“Umbrella” Grants**
- **AIDSTAR I: Service Delivery (John Snow Institute)**
 - **Hosting a "Men on the down low" workshop for Africa and Latin America**
- **AIDSTAR II: Capacity Building**
- **Management Sciences for Health & International HIV/AIDS Alliance**
 - **Support MSM networks in Central America, SE Asia and Eastern Europe**
- **Project SEARCH Prevention Task Order (Johns Hopkins University)**
 - **Conduct operational research and program evaluation on prevention topics**



General Directions in MARPS Prevention

- Within the hyper-endemic situations in southern Africa, MARPs are critical populations which have not received adequate or coordinated prevention attention.
- Best or promising practices for prevention among MSM exist in several epidemic contexts, including in Africa; consideration should be given to adapting such practices.
- There is a need to support an enabling environment that ensures appropriate protections for the rights of vulnerable populations



General Directions in MARPS Prevention (2)

- There is a need for better use of data to appropriately target populations and achieve appropriate scale – coverage and intensity
- Comprehensive programs need to include a minimum package of service (e.g. CT, risk reduction counseling, condom/lubrication promotion/distribution, STI screening/treatment, treatment and care services, etc)
- Quality of interventions is critical





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Thanks

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