

NATIONAL HIV/AIDS STRATEGY

FEDERAL IMPLEMENTATION PLAN

This National HIV/AIDS Strategy provides a roadmap for addressing the domestic HIV epidemic. Released in July 2010 by the White House, the Strategy is not intended to be a comprehensive list of all activities needed to respond to HIV/AIDS. Rather, it is a concise plan that identifies a set of priorities and strategic action steps tied to measurable outcomes. The Federal Implementation Plan is a companion to the National HIV/AIDS Strategy. The Plan outlines the specific steps to be taken by various Federal agencies to support the high-level priorities outlined in the Strategy.

Vision for the National HIV/AIDS Strategy

The United States will become a place where new HIV infections are rare and when they do occur, every person, regardless of age, gender, race/ethnicity, sexual orientation, gender identity or socio-economic circumstance, will have unfettered access to high quality, life-extending care, free from stigma and discrimination.

The Federal Implementation Plan presents the Administration's approach for measuring progress toward meeting the Strategy's goals, and includes immediate and short-term Federal actions (those that can be achieved in calendar years 2010 and 2011) that will move the Nation toward improving its response to HIV/AIDS. Where appropriate, the Plan highlights some longer-term actions, but its primary emphasis is on identifying initial steps for moving forward. In 2011, the White House Office of National AIDS Policy (ONAP) will consult with Federal agencies to develop specific actions for 2012, and the Plan will be updated annually, thereafter. The Federal Implementation Plan is a living document—as Departments and agencies evaluate their progress, the Plan will be modified to reflect milestones achieved and changes in the U.S. epidemic. In addition, as the Federal agencies do their work to implement the Strategy, new activities will also be developed.

The job of implementing the National HIV/AIDS Strategy, however, does not fall to the Federal Government alone, nor should it. **The success of the Strategy will require States, tribal and local governments, communities, and other partners to work together to better coordinate their responses to HIV/AIDS at the State and local levels.** Therefore, we hope that the Strategy will serve as a catalyst for all levels of government and other stakeholders to develop their own implementation plans for achieving the goals of the National HIV/AIDS Strategy.

ONAP Oversight, Coordination, and Reporting

ONAP will continue to serve as the lead entity for setting the Administration's HIV/AIDS policies and will remain

engaged in overseeing government-wide efforts to improve the Nation's response to the HIV epidemic. This role will include working with the Departments to support and monitor the implementation of the National HIV/AIDS Strategy. Departments will prepare and submit annual reports to ONAP.

ONAP will use this information to advise the President and produce an annual report describing the progress toward achieving goals in the Strategy. In addition, ONAP will continue to convene a Federal Interagency Working Group to foster collaboration across the Administration. ONAP will also continue to highlight important issues by convening meetings at the White House and working with Federal and non-Federal partners.

Role of Federal Departments

While the Strategy requires a government-wide effort in order to succeed fully, the President designated certain departments as leads for implementing the Strategy:

- Department of Health and Human Services (HHS)
- Department of Justice
- Department of Labor
- Department of Housing and Urban Development
- Department of Veterans Affairs
- Social Security Administration

Those Departments were instructed to provide operational plans to the President by early December 2010. These plans outline the steps each Department will take to ensure that they implement the Strategy's recommendations. Those Federal agencies will also be tasked with establishing a responsible entity for coordinating their Department's efforts to achieve the goals of the Strategy and report on their progress. Other Departments are instructed to review their policies and identify steps that they can take to support implementation of the National HIV/AIDS Strategy.

Role of the HHS Office of the Secretary

Implementation of the Strategy requires a new level of coordination and collaboration across agencies and among the Federal Government, States, tribes, and localities. Central to this coordination is the HHS Office of the Secretary, which includes the Office of the Assistant Secretary for Health, who will be responsible for:

- Coordinating operational and programmatic activities for the National HIV/AIDS Strategy within the Department of Health and Human Services;
- Coordinating HIV/AIDS programs with other Departments;

- Tracking Federal programs implemented in each State or territory and working with States to ensure Federal HIV/AIDS activities are coordinated with State HIV/AIDS plans; and
- Establishing regular cross-Departmental meetings to coordinate program planning and administration of HIV/AIDS-related programs and activities.

Role of States and Local Governments

HHS will work with States to encourage the development of statewide HIV/AIDS plans. This will include encouraging the development of needs assessments and identifying specific action steps that improve coordination among State agencies, local and tribal governments, non-profits and private advocacy groups, and the activities funded by multiple Federal agencies. The purpose of State plans is to enhance coordination between planning and program implementation activities, which are often conducted in a way that separates prevention and care. States will also be encouraged to establish a lead entity to coordinate the development and implementation of statewide HIV/AIDS plans and be accountable for reporting regularly on progress made towards the goals of the National HIV/AIDS Strategy. To ensure effective collaboration in developing and implementing the statewide plans, the lead entity could be made up of representatives from State and local HIV/AIDS agencies, health departments, tribal governments, private advocacy groups, community-based organizations and people living with HIV. In developing their plans, States will also be encouraged to identify all Federal, State, and local resources, and to the extent feasible, private and nonprofit resources to ensure that all HIV/AIDS resources are allocated in the most efficient manner to address the full range of prevention, care, and social service needs.

Role of Nongovernmental Partners

Although the Plan outlines initial steps the Federal Government will take, the job of implementing the Strategy does not fall to the Federal, State, tribal, and local governments alone. Businesses, faith communities, philanthropy, health care providers, the scientific and medical communities, educational institutions, professional organizations, media, and others must also do their part to support the achievement of the Strategy's goals. As we focus more attention on high-risk communities, for example, or as we consider the need to support people in meeting basic needs such as food and housing, and as we take steps to reduce stigma and discrimination, leadership will be needed by people both inside and outside of government. Individuals or institutions themselves understand best how they can support the Strategy and the goal of ending the HIV epidemic. Many interested parties will need to step forward and work together with the Federal Government achieve the vision of the National HIV/AIDS Strategy.

PACHA Review

The Presidential Advisory Council on HIV/AIDS (PACHA) will regularly provide recommendations on how to effectively implement the Strategy, as well as monitor the Strategy's implementation. At least once per year, a

Action Steps

Reducing New HIV Infections

- Intensify HIV prevention efforts in the communities where HIV is most heavily concentrated
- Expand targeted efforts to prevent HIV infection using a combination of effective, evidence-based approaches
- Educate all Americans about the threat of HIV and how to prevent it

Increasing Access to Care and Improving Health Outcomes for People Living with HIV

- Establish seamless system to immediately link people to continuous and coordinated quality care when they learn they are infected with HIV
- Take deliberate steps to increase the number and diversity of available providers of clinical care and related services for people living with HIV
- Support people living with HIV with co-occurring health conditions and those who have challenges meeting their basic needs, such as housing

Reducing HIV-Related Disparities and Health Inequities

- Reduce HIV-related mortality in communities at high risk for HIV infection
- Adopt community-level approaches to reduce HIV infection in high-risk communities
- Reduce stigma and discrimination against people living with HIV

significant focus of one of the PACHA meetings will be to review the progress of Federal agencies and non-federal stakeholders in implementing the recommendations.

Annual Reporting

ONAP will report progress in achieving the goals of the National HIV/AIDS Strategy. ONAP will use information from the Departments and States to publish an annual report on the Federal Government's progress.

Action Steps

The Federal Implementation Plan details specific steps to be taken by various Federal agencies to support the high-level priorities outlined in the Strategy. These steps are aligned with each of the Strategy's goals. Consistent with the Strategy's call for an enhanced focus on coordinating our efforts across Federal agencies, most of these steps involve collaboration among several agencies or offices, though a single agency has been designated the lead for each action item. Read the action steps and the full Federal Implementation Plan at www.aids.gov.

The National HIV/AIDS Strategy provides a framework for moving forward. With government at all levels working together, a committed private sector, and leadership from people living with HIV and affected communities, the U.S. can dramatically reduce HIV transmission and better support people living with HIV and their families.

For more information on the NHAS, including blog posts about progress on its implementation, visit www.aids.gov