A new year — and the start, effectively, of PEPFAR Phase II — is a good time to review achievements in the fight against HIV/AIDS over the past five years and to give serious thought to the best way to move forward.

PEPFAR’s new worldwide five-year strategy, released on World AIDS Day 2009 (counseling and care support strategy!), does this by integrating lessons learned from a broad range of stakeholders with new directions informed by an evolving global AIDS response. Its key concepts will guide PEPFAR’s efforts in Côte d’Ivoire through at least 2013. These include placing a deliberate focus on the strategic strengthening of health systems, increasing ownership and responsibility among host government and local actors, ensuring universal access to services, and promoting creativity and the use of evidence to develop sustainable strategies.

In numeric terms — and human terms — the top priorities are to provide antiretroviral (ARV) treatment for 4 million people and care services for 12 million (including 5 million orphans and vulnerable children), to double the number of at-risk babies born HIV-free, to reach 80% coverage of testing for pregnant women with 85% coverage of ARV prophylaxis to prevent mother-to-child transmission, and to ensure that 100% of youth receive comprehensive information about how HIV/AIDS is transmitted and how to prevent themselves. Ultimately, of course, the goal is strong health systems in a world free of HIV.

As we consider how to implement our new year’s resolutions, and our annual plans, I invite you to take a moment and consider how best to translate these important concepts and goals into effective, meaningful, life-changing reality for Ivorians. This remains our responsibility and our challenge for 2010.

Jennifer Walsh
PEPFAR Country Coordinator
**Beyond the ART Miracle: ‘I Felt Useful Again’**

In his early 40s, Jules Tahe lived the ARV miracle in Côte d’Ivoire, from the misery of undiagnosed HIV to regained health and well-being.

Free antiretroviral therapy through PEPFAR partner ACONDA-VS and the unwavering support of his family, to whom he disclosed his HIV status immediately, were key factors as his weight rebounded (from 110 to 159 pounds) along with his CD4 count. But one thing was still missing from his recovery: After his diagnosis in 2004, Jules had been declared unfit to continue teaching primary school due to his health problems.

“The hardest thing for me was to remain inactive during those years,” the 44-year-old says. “My only wish was to regain my place in the development of my country and to be able to emphasize messages about HIV to young people. As a public servant, I was paid every month, but I missed my work.”

After a year on ART, Jules asked his physician to submit a new medical dossier reflecting his recovery. In 2009, the public service medical counsel allowed Jules to resume teaching, and he took a job at a high school in Abidjan.

“It was the most beautiful day of my life,” he says. “I felt useful again in helping build my country.”

In addition to his teaching, Jules leads a support group of 80 people with HIV. With his wife, who receives HIV care at the same ACONDA-supported hospital as her husband, he has three children who have tested HIV-negative and a 3-month-old who was born in the hospital’s PMTCT program and who receives replacement feeding.

“My wish is to put my experience to use for other people,” Jules says. “I have a normal life like everybody else. My family supports me, my wife and my children, too. I’m a happy man.”

**Comings & Goings**

**James T. Ham**, new CDC deputy director/operations

**Maria Theresa Nozo**, MD, new PMTCT technical adviser

**Richard Abri**, new lab technician

**Delphine Achi**, MD, new ART technical adviser

**James Allman**, outgoing HMIS adviser

**Toussaint S. Sibailly**, MD, outgoing senior HIV/AIDS adviser and USAID focal point

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**Military youth: A place of their own**

If mobility and lack of stable support network places soldiers at heightened risk for HIV, what about their children growing up in military camps?

Population Services International (PSI), a PEPFAR partner providing HIV/AIDS prevention, testing, and care services for the uniformed services and their families in Côte d’Ivoire, responded by giving youth a place of their own.

The Community Center for Life, within the 2nd infantry battalion camp in Daloa, opened in September 2009 with a library, a TV room, sports and games, and a schedule of films and discussions (including parent-child discussions) on health, HIV/AIDS, sexuality, pregnancy, peer pressure, healthy decision-making, and other topics aimed at 10-24-year-olds. HIV/AIDS activities focus on age-appropriate ABC prevention and testing, which is available in the same building (but requires parental consent for minors).

Between September and November, 373 young people have used the center, including 52 who went for testing, and parents have voiced appreciation for the alternative to bars and questionable friends.

“Since the kids started going to the center, we’ve seen a real change in their behavior,” one parent said.

The center is managed by a youth committee with an elected president and an adult coordinator, and includes a girls’ club that conducts HIV prevention outreach.

**Contribute to PEPtalk!**

Do you have a news item, a story idea, a good photo? An insightful commentary on an important issue? Share it. Send it to us at peptalk@ci.cdc.gov. Please include your name, affiliation, and contact information.

Contributors to PEPtalk No. 9: Joan-Luis Njampo, Georgette Kouroma (PSI), Jennifer Walsh, Jordan Sera, Corinne Louise Lohoueye Essoh, Brian Howard

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**News in Brief**


In reauthorizing the U.S. government’s HIV/AIDS program in the United States (Oct. 30), President Obama also announced that his administration would take the final steps to end a ban barring people living with HIV/AIDS from entering the United States, effective in January 2010. Obama’s decision completes a process that began after a 2006 visit to the White House by Ivorian activist Ako Yapo Tyriacique, in which Ako told President Bush about the difficult process of obtaining a waiver to respond to his president’s invitation. In announcing the end of the ban, Obama said: “Twenty-two years ago, in a decision rooted in fear rather than fact, the United States instituted a travel ban on entry into the country for people living with HIV/AIDS. Now, we talk about reducing the stigma of this disease – yet we’ve treated a visitor with it as a threat. We lead the world when it comes to helping stem the AIDS pandemic – yet we are one of only a dozen countries that still bar people from HIV from entering our own country. If we want to be the global leader in combating HIV/AIDS, we need to act like it.” For more, visit [www.whitehouse.gov/the-press-office/remarks-president-signing-ryan-white-hiv-aids-treatment-extension-oct-2009](http://www.whitehouse.gov/the-press-office/remarks-president-signing-ryan-white-hiv-aids-treatment-extension-oct-2009).

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**Côte d’Ivoire’s HIV early infant diagnosis got a boost in 2009 with PEPFAR-supported donations of lab containers at two laboratories in Abidjan, CéDres and CIIRBA. CéDres is now offering DNA PCR testing for infants at 33 PMTCT sites (about half of all PMTCT sites in Abidjan), and CIIRBA, which received its new lab equipment in October, will be fully functional in January after training and coaching by CDC/Retro-Cl staff. CIIRBA has a cohort of 3,000 HIV patients, including 540 children, with about 2,000 patients on ART. The labs were selected by the national early infant diagnosis technical working group led by the National HIV/AIDS Care and Treatment Program.**

**HIV/AIDS treatment reached another milestone in October with the approval of the 100th generic antiretroviral drug (ARV) authorized for use under PEPFAR, thanks to a speeded-up U.S. Food and Drug Administration tentative approval process designed to maximize flexibility and economy without compromising safety. For more information about PEPFAR’s support for safe, effective, low-cost, and generic ARVs and the FDA process, please visit [http://www.pepfar.gov/documents/organization/115245.pdf](http://www.pepfar.gov/documents/organization/115245.pdf).**