





Dear Colleague:

On April 1, 2014, the Centers for Disease Control and Prevention (CDC) plans to award \$115 million over 5 years to train and strengthen 21 capacity-building organizations and ensure on-the-ground prevention programs and their staff have the skills, information, and organizational support they need to best serve individuals living with, and at high risk for, HIV in their communities.

With an estimated 50,000 new HIV infections each year, more must be done with existing resources to maximize the impact of every federal prevention dollar and achieve the goals of the National HIV/AIDS Strategy (NHAS). The new capacity building assistance (CBA) program aligns with the goals of the NHAS and CDC's High-Impact Prevention (HIP) and Community High-Impact Prevention (CHIP) approaches by supporting a defined set of scalable, cost-effective activities and placing new emphasis on the delivery of high-quality prevention and care services for persons living with HIV; effective new prevention strategies for those at high-risk for HIV; policy change to advance HIV prevention goals among health departments; and collecting and using care continuum data for policy planning and program prioritization. The program also continues to emphasize key activities with demonstrated potential to reduce new infections such as HIV testing, condom distribution, and use of surveillance data to improve program efficiency and effectiveness.

CDC's new CBA program differs from previous programs in other important ways. For example, emphasis has been placed on cost-saving measures that focus on linkage to care, effective behavioral interventions with the greatest likelihood of reducing HIV risk at the lowest costs, and the requirement that all funded organizations must demonstrate the capacity to effectively serve all populations nationwide. (Previous CBA programs allowed regional coverage, which limited some organizations to working only with prevention providers in their particular community.) The new program also includes for the first time health care organizations as a target group and expanded eligibility to health departments.





Consistent with high-impact prevention, the new CBA awards are designed to enable capacity-building organizations to prioritize populations in greatest need and serve them even more effectively by increasing the availability and accessibility of culturally and linguistically appropriate prevention services.

Funds were awarded based on a rigorous review process, ensuring grantees have the skills and expertise to support programs in meeting the goals of the NHAS and HIP and have national reach, allowing for faster, broader diffusion of innovations and best practices. To inform development of this new program, CDC conducted a series of partner engagement sessions with representatives from capacity building and community-based organizations (CBOs), prevention training centers (PTCs), health departments, health care organizations, and other stakeholders to obtain feedback and recommendations.

The new CBA awards are just one part of CDC's overall realignment of funding to support high-impact prevention. Funding for state health departments has already been realigned to prioritize HIP, the surveillance program employed a new method for allocating surveillance resources to better match funding with the geographic burden of the epidemic, and the CBO program is being realigned to demonstrate programmatic alignment with HIP. The alignment of the CBA program with HIP ensures CDC's full funding portfolio for national, state, and local organizations reflects a new cost-effective, high-impact approach to HIV prevention.

CDC is looking forward to working with its CBA providers to maximize our collective impact on the HIV epidemic in the United States. Thank you for your continued commitment to HIV prevention.

Please see attached for a list of organizations funded under the new CBA program. For more information, please visit:

http://www.cdc.gov/hiv/policies/funding/announcements/PS14-1403/index.html

Sincerely,

Janet C. Cleveland, MS

Deputy Director for Prevention Programs Division of HIV/AIDS Prevention RADM Kenneth G. Castro, MD

Division of HIV/AIDS Prevention Acting Director, Division of HIV/AIDS