The National Center for HIV, Viral Hepatitis, STD, and TB Prevention (NCHHSTP) maximizes public health and safety nationally and internationally through the elimination, prevention, and control of disease, disability, and death caused by Human Immunodeficiency Virus Infection (HIV), non-HIV retroviruses, viral hepatitis, other sexually transmitted diseases (STDs), and tuberculosis (TB). In carrying out its mission, NCHHSTP: (1) Builds capacity and enhances public health infrastructure for preventing and treating HIV, viral hepatitis, STDs, and TB; (2) coordinates activities and programs across CDC and with other Department of Health and Human Services Operational Divisions in order to maximize the public health impact of HIV, viral hepatitis, STDs, and TB interventions; (3) conducts surveillance and research to determine the distribution, determinants, and burden of HIV, viral hepatitis, STDs, and TB; (4) conducts program evaluation to improve programs and activities relating to the prevention of HIV, viral hepatitis, STDs, and TB, and determine their impact; (5) provides reference laboratory and clinical diagnostic services for HIV, viral hepatitis, STDs, and TB to relevant stakeholders; (6) promotes collaboration and service integration among HIV, viral hepatitis, STDs, and TB programs; (7) engages external partners to develop and implement effective HIV, viral hepatitis, STDs, and TB policies, research, and programs; (8) engages partners, to promote health equity and reduce health disparities among those affected by HIV, viral hepatitis, STDs, and TB; (9) provides technical assistance and training in the diagnosis, treatment, and prevention of HIV, viral hepatitis, STDs, and TB; (10) conducts public health communication activities to disseminate research findings and increase awareness of HIV, viral hepatitis, STDs, and TB; (11) conducts operational, behavioral, and biomedical research to improve the distribution, diagnosis, prevention, and control of HIV, viral hepatitis, STDs, and TB; (12) provides scientific leadership regarding public health ethics and protection of human subjects linked to HIV, viral hepatitis, STDs, and TB; (13) translates research findings into public health practice and policy for HIV, viral hepatitis, STDs, and TB prevention; (14) plans, coordinates, and guides programs and activities with external partners, federal agencies, and other organizations related to HIV, viral hepatitis, STDs, and TB prevention, care, and treatment; (15) leads and participates in the development, implementation, and evaluation of policies and guidelines related to HIV, viral hepatitis, STDs, and TB; (16) provides scientific leadership regarding screening, treatment, immunization, and other prevention interventions relevant to HIV, viral hepatitis, STDs, and TB; (17) assures all public health decisions are based on the highest quality scientific data, openly and objectively derived; (18) provides leadership to assist international partners in establishing and maintaining, HIV, viral hepatitis, STDs, and TB screening, treatment, immunization, and other prevention and control programs; (19) ensures that programmatic and scientific activities are aligned with, and in support of, CDC’s overall mission, goals, and strategic imperatives; (20) allocates and tracks CDC resources and contributes to the development of CDC’s short-, medium- and long-term strategic plans for preventing the spread of HIV, viral hepatitis, STDs, and TB; (21) collaborates with other federal agencies, domestic and international governmental and non-governmental organizations to advance CDC and NCHHSTP health protection goals; and (22) coordinates oversight of the NCHHSTP Federal Advisory Committees. (Approved 1/14/2021)
(1) Provides leadership and guidance on the development of goals and objectives, policies, program planning and development, and program management and operations of the activities of NCHHSTP and manages, directs, coordinates, and evaluates the center’s activities; (2) plans and coordinates the annual program planning process; (3) coordinates with Office of the Director (OD), Centers/Institute/Offices (CIOs), and divisions in determining and interpreting operating policy and in ensuring their respective management input for specific program activity plans; (4) facilitates closer linkages between HIV, non-HIV retroviruses, STDs, viral hepatitis, and TB, surveillance activities and prevention programs at all levels, and facilitates collaboration, integration, and multi-disciplinary approaches to enhance the effectiveness of HIV, STD, viral hepatitis, and TB prevention programs; (5) facilitates collaboration among, and integration of, science and prevention programs throughout NCHHSTP and enhances the coordination and integration of HIV, STD, viral hepatitis, and TB prevention services for individuals and populations at increased risk for more than one of these infections; (6) coordinates the integration of CDC funding of state and local health departments for HIV, STD, viral hepatitis, and TB prevention; (7) maximizes center-wide collaboration to promote and support Program Collaboration and Service Integration (PCSI) in state and local HIV, viral hepatitis, STD and TB programs to increase efficiencies and provide comprehensive evidence based prevention services to impacted populations; (8) develops partnership objectives and strategies for advancing center priorities (e.g., on cross-cutting functions PCSI, reducing health disparities, etc.) and leverages OD resources to address these objectives and strategies; (9) coordinates and tracks health equity science and program activities within the center; (10) coordinates and tracks science and program activities that concern or address social determinants of health within NCHHSTP and other programs; (11) collaborates with the CDC OD and other CDC components on health equity activities, and works with the CDC OD to monitor progress in meeting Executive Orders related to improving minority health; (12) develops partnerships with other federal agencies and nongovernmental organizations working on similarly-affected populations; (13) supports research, surveillance, education, training, and program development to achieve health equity and reduce health disparities; (14) sponsors workgroups, meetings, and conferences related to health equity; (15) promotes a diverse public health workforce through internships, fellowships, training programs, and other activities; (16) ensures process consistency for laboratory related functions within NCHHSTP and across the CIOs; (17) facilitates cross-center decision-making regarding laboratory activities; (18) monitors the performance of funded extramural research projects in the areas of HIV, viral hepatitis, STD and TB; (19) collaborates with other federal agencies to advance prevention through healthcare; (20) coordinates and supports cross-cutting strategic initiatives in support of NCHHSTP divisions and partners; and (21) works across the agency to advance prevention priorities.  (Approved 1/14/2021)

Office of the Associate Director for Science (CVJ12)

(1) Ensures process consistency for science across the CIOs; (2) facilitates cross-center decision-making regarding science; (3) facilitates communication regarding scientific and programmatic services across the Office of Infectious Diseases (OID); (4) conducts necessary regulatory and ethical reviews for activities involving human participants, including determining whether an activity includes research, includes human subjects, is exempt or requires Institutional Review
Board approval, and whether an exception is needed to the Public Health Service HIV policy; (5) reviews funded activities for application of human research regulations; (6) reviews, approves, and tracks research protocols, clinical investigations, and the Food and Drug Administration regulated response activities intended for submission to CDC Human Research Protections Office; (7) coordinates and tracks Office of Management and Budget clearance under the Paperwork Reduction Act; (8) serves as the focal point for the OID for implementing policies and guidelines for the conduct of the peer review of infectious disease extramural research grant proposals and subsequent grant administration; (9) coordinates and conducts in-depth external peer review, objective review including special emphasis panel (SEP) process, and secondary program relevance review of extramural research applications by use of consultant expert panels; (10) makes recommendations to the appropriate infectious disease center director on award selections and staff members serve as the program officials in conjunction with CDC grants management and policy officials to implement and monitor the scientific, technical, and administrative aspects of awards; (11) facilitates scientific collaborations between external and internal investigators; and (12) disseminates and evaluates extramural research progress, findings, and impact. (Approved 5/15/2013)

Informatics Office (CVJ13)

(1) Manages all information technology (IT) project costs, schedules, performances, and risks; (2) provides expertise in leading application development techniques in information science and technology to effect the best use of resources; (3) performs technical evaluation and integrated baseline reviews of all information systems’ products and services prior to procurement to ensure software purchases align with NCHHSTP strategy; (4) provides access to quality data in support of programmatic data analysis; (5) coordinates all enterprise-wide IT security policies and procedures with key agency offices; (6) ensures operations are in accordance with CDC Capital Planning and Investment Control guidelines; (7) ensures adherence to CDC enterprise architecture guidelines and standards; (8) consults with users to determine IT needs and to develop strategic and action plans; and (9) participates in the evolution, identification, development, or adoption of appropriate informatics standards. (Approved 9/27/2010)

Office of Management and Program Support (CVJ15)

(1) Helps implement and enforce management and operations policies and guidelines developed by federal agencies, DHHS, and Staff Service Offices (SSO); (2) plans, develops, implements, and provides oversight and quality control for center-wide policies, procedures, and practices for administrative management and acquisition and assistance mechanisms, including contracts, memoranda of agreement, and cooperative agreements; (3) provides management and coordination of NCHHSTP-occupied space and facilities; (4) supplies technical guidance and expertise regarding occupancy and facilities management to emergency situations; (5) provides oversight and management of the distribution, accountability, and maintenance of CDC property and equipment; (6) provides oversight, quality control, and management of NCHHSTP records; (7) serves as lead and primary contact and liaison with relevant SSO on all matters pertaining to the center’s procurement needs, policies, and activities; (8) develops, reviews, and implements policies, methods and procedures for NCHHSTP non-research extramural assistance programs; (9) interprets general policy directives, proposed legislation, and appropriation language for
implications on management and execution of center’s programs; (10) provides consultation and technical assistance to NCHHSTP program officials in the planning, implementation, and administration of assistance programs; (11) develops, coordinates and implements objective review processes, including the SEP process for funding of CDC infectious disease non-research grants and cooperative agreements. (12) oversees the formulation of the NCHHSTP budget and responds to inquiries related to the budget; (13) provides technical information services to facilitate dissemination of relevant public health information and facilitates collaboration with national health activities, CDC components, other agencies and organizations, and foreign governments on international health activities; (14) provides oversight for the programmatic coordination of HIV, STD, viral hepatitis, and TB activities between NCHHSTP and other CIOs; develops recommendations to the CDC Director as the lead CIO for these programs for the distribution of HIV, STD, viral hepatitis, and TB funds CDC-wide; (15) provides guidance and coordination to divisions on cross-divisional negotiated agreements; (16) facilitates state and local cross-divisional issues identification and solutions; (17) in coordination with the Office of Program Planning and Policy Coordination, responds to Congress as needed; (18) serves as NCHHSTP liaison to relevant SSOs for all matters related to financial management; (19) serves as focal point for emergency operations and deployment; (20) manages and coordinates workforce development and succession planning activities within NCHHSTP in collaboration with internal and external partners, and coordinates the recruitment, assignment, technical supervision, and career development of staff with emphasis on developing and supporting diversity initiatives and equal opportunity goals; (21) facilitates the assignment of field staff in accordance with CDC and NCHHSTP priorities and objectives and reassesses the role of NCHHSTP field staff assignees to state and local health jurisdictions; and (22) provides center-wide training to supervisors, managers and team leaders. (Approved 5/15/2013)

Office of Policy, Planning and Partnerships (CVJ16)

(1) Identifies program priorities through strategic planning and other processes as appropriate; (2) oversees the development of the center’s performance plan and performance reports to ensure accountability and improve programs and activities; (3) coordinates with the center director, deputy director and management officer on the formulation of the NCHHSTP budget; (4) liaises with the CDC Business Services Offices on congressional, legislative, and other inquiries; (5) maintains liaison with Congress on matters including appropriations, legislative bill tracking, and legislative requests, testimony for hearings, congressional inquiries, etc.; (6) develops policy- and program-related materials for internal and external stakeholders; (7) oversees the preparation and routing of controlled correspondence; (8) maintains liaison with key CDC offices and individuals working on public health policies and legislative issues; (9) serves as liaison to governmental and nongovernmental partners on policy-related issues; (10) oversees coordination of CDC OD engagement requests, executive or legislative branch issues, and management efforts; (11) conducts analysis related to short- and long-term CIO priorities; (12) develops and manages partnership activities, including non-governmental and private sector organizations; (13) develops long-term partnership and policy development plans across CIO divisions and in coordination with center OD offices; (14) disseminates information to CIO leadership and staff, as appropriate, on policy, planning and partner engagement situation analyses; (15) coordinates the completion of Freedom of Information Act requests, supporting CIO Divisions; (16) coordinates with Health Communication Science Office to disseminate
information to partner organizations; (17) manages two federal advisory committees for CIO; and (18) coordinates risk mitigation activities across CIO. (Approved 1/31/2019)

Health Communication Science Office (CVJ17)

(1) Serves as the principal advisor to NCHHSTP on communication and marketing practice, research, and science; (2) provides oversight to ensure the quality of health communication and marketing campaigns and products created by NCHHSTP and its divisions; (3) serves as NCHHSTP clearance office for health communication campaigns and products; develops and manages clearance systems; (4) provides strategic planning and coordination for NCHHSTP strategic communication and social marketing programs in collaboration with OD and division-level staff; (5) collaborates with NCHHSTP divisions and center policy staff to ensure consistent and timely translation of center-specific scientific findings and recommendations for messages and materials effective for the news media, social media, partner, and other communication channels; (6) coordinates and provides center input on communication activities; (7) coordinates CDC and NCHHSTP brand management and logo licensing; (8) provides oversight and consultation on partner/stakeholder communication; (9) provides oversight, consultation, and strategic coordination on partnership development and relationships in collaboration with NCHHSTP divisions and CDC CIOs for the National Prevention Information Network; (10) manages communication infrastructure for NCHHSTP partnerships; (11) oversees management, policy guidance, and governance of NCHHSTP digital channels and Web sites per HHS and CDC policy for the use of communication platforms; (12) provides coordination and conducts activities to support NCHHSTP's presence on networked media, including social, mobile, and traditional media; (13) collects/analyzes user data/metrics from communication channels and technologies to assess system performance, usability, accessibility, and usefulness; (14) formulates strategic communication objectives for advancing program priorities and addressing identified long-range issues through news media, partner, and other communication strategies; (15) oversees the implementation of strategic communication plans through several functional areas; (16) develops and implements all proactive media outreach and reactive media responses for the center; (17) provides media training and technical assistance, as appropriate; and (18) serves as liaison to key offices for obtaining CDC and HHS media clearance on products/activities. (Approved 1/31/2019)

Division of HIV Prevention (CVJC)

(1) Conducts national HIV surveillance, oversees the implementation of HIV prevention and control programs, conducts HIV research, and evaluates the impact of Division's program and research activities in collaboration with other CDC CIOs; (2) provides consultation, financial, and technical services to assist others in the planning, development, implementation, evaluation, and overall improvement of HIV prevention programs; (3) conducts research into factors affecting the prevention of HIV; (4) provides strategic vision, planning, and coordination for implementation of policies and programmatic activities that address the Ending the HIV Epidemic initiative in collaboration with the Center, CDC OD, and other CIO; (5) provides strategic direction of program-led science by overseeing the refinement of DHP’s scientific research agenda and coordination of DHP priorities; (6) counsels leadership in building and aligning strategic partnerships at the executive-level and communicates internally and externally
about partnership priorities; (7) works closely with CDC stakeholders on HIV surveillance and epidemiologic investigations that require laboratory collaboration, and on activities related to the investigation and prevention of HIV-related opportunistic infections; (8) promotes linkages between health departments' HIV programs, and other governmental and nongovernmental partners who are vital to HIV prevention efforts; (9) develops preventive health services models, recommendations, and guidelines on the prevention of HIV and associated illnesses; (10) monitors surveillance of risk behaviors associated with HIV transmission, infectious diseases, and other complications of HIV; (11) develops methods and guidance, and provides technical assistance to support health departments to build capacity for cluster and outbreak response; (12) determines risk factors and transmission patterns of HIV by conducting HIV surveillance, epidemiologic investigations, and research studies; (13) works closely with other governmental and nongovernmental agencies, and the health care community to enhance and evaluate HIV prevention services in public and private health care delivery systems; (14) implements national HIV prevention public information programs and assists in developing strategic communications activities and services at the national level to inform and educate the American public about HIV, especially clinical providers, persons with HIV and groups at high risk for acquiring HIV; (15) manages, develops and directs the implementation of the Division data policy, management, and governance, provides IT coordination and support for enterprise level shared services, and coordinates with other parts of CDC to ensure adherence to CDC's IT governance and data modernization policies; (16) provides information on HIV to CDC partners, scientific communities, and the general public through publications and presentations; and (17) collaborates with UNAIDS, the World Health Organization and other partners on HIV surveillance and epidemiology. (Approved 1/14/2021)

Office of the Director (CVJC1)

(1) Plans, directs, and evaluates activities of the Division; (2) serves as the Division’s liaison to the Center policy office, the CDC OD, HHS, GAO and OIG, CDC Washington and the Office of Appropriations to address inquiries, develop the President’s Budget, review legislation, and support outreach to educate policy makers; (3) manages strategic planning and coordinates related reporting; (4) identifies, analyzes and addresses policy barriers and leads legal assessment efforts; (5) provides strategic direction, goals, and priorities to build and evaluate the effectiveness of Division partnerships, in coordination with DHP Branches and Offices, including expanding public private partnerships, community-level partnerships, and engaging special populations; (6) monitors internal and external environmental shifts to identify and analyze potential and real reputational risk issues and develops responses to anticipated issues to lessen their impact; (7) provides critical vision and communication counsel to DHP leadership, aligns messaging across the Division, and develops, coordinates, and finalizes strategic communication plans, messaging, partner communications, social media, and other communication materials; (8) advances DHP programmatic priorities through proactive stakeholder communication and liaises with the Center News Media team; (9) develops goals and objectives and provides guidance in national HIV prevention policy formulation and program planning and development; (10) leads the development and provides oversight of the research agenda and ensures the scientific integrity of research, surveillance, evaluation, and other scientific aspects of HIV prevention, and coordinates these activities with other Center divisions, CIOs, federal agencies and other prevention partners as needed; (11) oversees and
coordinates prevention and control program implementation and coordinates activities with other Center divisions, CIOS, federal agencies, and other prevention partners; (12) provides oversight for the integrity and quality of division science, including review of protocols and other scientific products and projects, scientific clearance, and compliance with all federal rules and regulations regarding research and non-research projects, and conducts scientific training; (13) coordinates international HIV activities of the Division and ensures inter-divisional coordination within the center and CDC, as appropriate; (14) in the international setting, evaluates biomedical, structural, or combination interventions to prevent HIV infection and reduce HIV morbidity and mortality; (15) in the international setting, conducts and facilitates diagnostic evaluations and epidemiologic investigations to increase the diagnosis and prevention of HIV infection; (16) provides support and guidance for program management and operations, including the coordination and development of CDC and division-wide training and educational programs, workforce development and succession planning; (17) provides management, oversight, and services support for intramural and extramural program management; (18) provides Health Equity strategic vision for the Division, Offices, and Branches and collaborates with Division Branches to monitor progress toward achieving national, Agency, Center and Division health equity goals; (19) leads the development and provides oversight of the health equity research and programmatic agenda for the Division, and serves as liaison to key stakeholder groups related to health inequities and HIV issues; (20) oversees and coordinates the development, maintenance, and reporting of national indicators for the prevention of HIV by working with HHS, other federal agencies, and partners; (21) provides support and reviews logic models and performance measures for Notice of Funding Opportunity Announcements for the Division; (22) conducts data driven reviews for program planning and performance assessment; (23) oversees, develops, and directs the Division’s data policy framework, data management framework, and data governance implementation; (24) coordinates with other parts of CDC to ensure adherence to CDC’s IT governance and data modernization policies; (25) manages the acquisition, receipt, quality assessment, and provisioning of non-CDC data resources; and (26) provides Division-level IT/Informatics coordination and support for enterprise-level shared services.

(Approved 1/14/2021)

HIV Research Branch (CVJCB)

(1) Designs and conducts clinical, epidemiologic, implementation, health services, and behavioral research studies and trials to increase HIV diagnosis, prevention, and treatment, and to optimize health outcomes of people with HIV; (2) conducts implementation research to understand and evaluate strategies to increase uptake, delivery and sustainability of HIV prevention interventions; (3) designs and conducts research to understand determinants of disparities, including social determinants of health, and to promote health equity in HIV prevention and treatment; (4) conducts studies to evaluate, improve, and standardize laboratory technologies used for diagnosis and monitoring of HIV infection and for supporting adherence to biomedical HIV prevention and treatment interventions; (5) conducts demonstration projects of novel prevention strategies delivered by health departments, CBOs, healthcare organizations, and other providers; (6) contributes to the field of HIV prevention by producing and disseminating scientific evidence and by providing expert consultation to stakeholders; (7) collaborates with key stakeholders in identifying research priorities and in designing and conducting research; (8) supports partners in investigating unusual HIV transmission and cluster and outbreak
investigations; and (9) participates in the development of guidelines, based on scientific investigations and clinical trials, for HIV prevention and for prevention of adverse outcomes of HIV infection. (Approved 1/14/2021)

Behavioral and Clinical Surveillance Branch (CVJCC)

(1) Conducts surveillance of behaviors related to acquisition or transmission of HIV infection in high risk populations to evaluate the impact of the national or jurisdiction's overall prevention portfolio to direct prevention resource allocation; (2) develops, uses, and disseminates methods to monitor behaviors associated with HIV transmission or acquisition; (3) conducts clinical surveillance through in-depth interviews of persons with diagnosed HIV to assess access to medical care and prevention services, adherence to therapy, and behavioral risk associated with HIV transmission; (4) conducts clinical surveillance through in-depth chart reviews of persons with diagnosed HIV in selected sites to monitor morbidity and mortality and to assess access to and quality of care; (5) develops, uses, and disseminates methods to monitor clinical care and health outcomes for people with diagnosed HIV; (6) conducts behavioral or clinical surveillance in special populations of epidemiologic importance; (7) maintains, analyzes, and disseminates information from national surveys of behaviors associated with HIV testing, prevention, acquisition, or transmission; (8) collaborates with internal and external partners to ensure high quality behavioral and clinical monitoring systems, including screening for, and monitoring of comorbidities in key populations; (9) oversees and manages intramural and extramural funding, ensures regulatory compliance, provides technical assistance, and monitors program implementation related to behavioral and clinical surveillance; (10) provides support for outbreak response; and (11) provides subject matter expertise and support related to high risk populations and to medical care for people with HIV. (Approved 1/14/2021)

Quantitative Sciences Branch (CVJCD)

(1) Designs, develops, and implements statistical, data science, economic, cost, and resource allocation strategies, models, and methodologies; (2) collaborates with scientists, program experts, and senior public health officials throughout the division to apply quantitative science models and methodologies to HIV surveillance and prevention studies and prevention program activities; (3) develops and implements mathematical models to project the effects of prevention and care interventions on future HIV incidence, prevalence, transmission rates, and costs associated with HIV to determine the most efficient allocation of HIV prevention resources; (4) develops and reviews the statistical content of study designs and protocols, analysis plans, and scientific and communication products; and (5) applies novel analytic algorithms and visualization approaches to extract actionable HIV-prevention-related information from suitable non-traditional data types and sources. (Approved 1/14/2021)

HIV Surveillance Branch (CVJCE)

(1) Conducts population based, national HIV surveillance to monitor and characterize HIV trends, transmission risk, clinical outcomes, and antiretroviral resistance to guide public health action at the federal, state, and local levels; (2) develops and implements HIV surveillance technical guidance, methods, protocols, and program standards for analysis and data system
applications for the collection, evaluation, analysis, security and confidentiality, and dissemination of HIV surveillance data; (3) maintains, analyzes, integrates and disseminates information from the national HIV surveillance and related systems; (4) promotes uses of surveillance data to inform HIV prevention and care efforts, resource allocation, public health policy development and evaluation; (5) conducts projects for populations of epidemiologic importance and advancement of surveillance methods; (6) evaluates HIV surveillance systems, develops and implements improved surveillance methodologies, and conducts data driven technical assistance; (7) oversees and manages extramural funding for surveillance activities and provides programmatic, budgetary, and technical assistance to state and local health departments and other external partners to ensure high-quality state, local and national HIV surveillance data; (8) collaborates with internal and external partners and supports cluster and outbreak detection and investigation; and (9) collaborates with internal and external stakeholders to enhance surveillance quality, data use, and provide expert consultation. (Approved 6/23/2021)

Laboratory Branch (CVJCG)

(1) Conducts studies of HIV and other human and zoonotic retroviruses, including the diseases they cause and their modes of transmission, through virus detection, isolation, and characterization by virologic, molecular, and cellular biologic methods; (2) collaborates with DHP and other investigators to conduct HIV epidemiologic and surveillance studies as they pertain to testing, prevention, and intervention strategies; (3) conducts and supports field and clinical studies for HIV prevention; (4) develops collaborations with other CDC and non-CDC scientists to promote scientific progress and accomplishments; (5) collaborates with industry to promote commercialization of useful technology, methodologies, or reagents of public health importance; (6) serves as a reference laboratory for state and local health departments; (7) conducts studies related to the development, evaluation, improvement, and standardization of laboratory technologies used for the diagnosis, surveillance, and monitoring of HIV infection both independently and in collaboration with the biotechnology industry; (8) performs HIV testing in support of the diagnostic, surveillance, and epidemiologic requirements of CDC-based and CDC-affiliated studies of HIV; (9) provides diagnostic services to other federal agencies, academic centers, CDC-affiliated studies with other countries, and community organizations, as appropriate; (10) develops and evaluates novel biomedical prevention and treatment modalities in preclinical animal models; (11) evaluates and develops HIV testing technologies; (12) researches, develops, and evaluates bioinformatics tools to better understand HIV spread to inform prevention efforts; (13) provides antiretroviral drug testing in support of clinical, preclinical, and surveillance activities; and (14) collaborates with internal and external partners and supports cluster and outbreak detection and investigation. (Approved 1/14/2021)

HIV Prevention Capacity Development Branch (CVJCH)

(1) Assesses HIV prevention and treatment training and technical assistance needs of DHP program funding recipients, clinicians, and other HIV prevention service providers and develops and delivers strategies and products to address identified needs; (2) develops, maintains, and manages systems to ensure that health department and CBO staff receive appropriate and timely training and technical assistance; (3) provides subject matter expertise on HIV prevention and treatment to ensure that training and technical assistance products developed by capacity
building providers are aligned with HHS and CDC strategic goals and objectives, Center and
DHP priorities, and support the training and technical assistance needs of DHP program funding
recipients, clinicians, and other HIV prevention service providers; (4) collaborates with DHP
staff and capacity building providers to synthesize research findings and disseminate technical
assistance and training products relevant to the needs of HIV prevention programs and clinicians;
and (5) manages national conference contract and support services. (Approved 6/23/2021)

Prevention Communications Branch (CVJCI)

(1) Develops, disseminates, and evaluates evidence-based HIV messages, communication
campaigns, programs, and partnership efforts through multiple channels to stakeholders, health
care providers, persons at risk for and living with HIV, and the general public; (2) maintains
Division communication infrastructure, including social media, Web, and SharePoint channels,
the curation of CDC’s HIV print inventory, and oversight of the HIV subject matter expertise of
CDC-INFO; and (3) collaborates and consults with CDC staff, HHS, state and local health
departments, and other groups and organizations involved in HIV prevention communication
activities to devise and facilitate technical assistance systems and activities related to the
application of social marketing and communication science to prevention programs and policies.
(Approved 1/14/2021)

Program Development and Implementation Branch (CVJCJ)

(1) In collaboration with state and local public health and non-governmental national, regional,
and local partners, CIOs, and other federal agencies, develops and implements programs,
policies, and activities that enable and mobilize affiliates and communities to become involved
with, and support, strategic community planning that improves HIV prevention programs and
activities; (2) plans, develops, implements, and manages strategies and resources that build a
comprehensive public health-private sector partnership to prevent HIV and its complications;
(3) provides technical consultation and assistance to local, state, and territorial health
departments, integrated HIV prevention and care planning groups, non-governmental, other
prevention partners, and tribal governments and organizations in operational aspects of HIV
prevention; (4) monitors implementation and maintenance of HIV prevention programs through
the application of program science to ensure operational objectives are being met; (5) establishes
guidance and policies for implementation and continuation of local, state, and territorial HIV
prevention programs; (6) provides technical review of grant applications and prevention work
plans; (7) coordinates program development and implementation with local, state, and territorial
integrated HIV prevention and care planning groups; (8) facilitates linkages with HIV and other
infectious diseases prevention programs at all levels to maximize coordination of harm reduction
and intervention strategies tailored for populations with complex psychosocial prevention needs;
(9) works with national partners to foster HIV prevention capabilities and activities in affected
communities; (10) monitors the progress of funded recipients implementing HIV prevention
programs and activities; (11) promotes and facilitates the application of social marketing
principles to HIV prevention at the state and local levels; (12) plans, implements, and manages
DHP’s programmatic notice of funding opportunities (NOFOs) for health departments,
community-based organizations, and national partners and providers; (13) provides monitoring
and oversight to programmatic NOFO activities throughout the funded lifecycle; (14) supports
the Federal EHE workforce that provides technical consultation and direct assistance to state, local health departments implementing HIV prevention programs; and (15) assesses training, capacity building and technical assistance needs and develops strategies to address the training of recipient organizations and other external partners involved in HIV prevention programs and activities. (Approved 1/14/2021)

Translation and Evaluation Branch (CVJCK)

(1) Collaborates with DHP, CDC, HIV prevention program recipients, and national partners to systematically collect, process, and use HIV prevention program data and research findings for program planning, monitoring, evaluation, and improvement; (2) identifies and prioritizes program needs and research gaps, synthesizes research and program findings, selects and translates HIV prevention research findings, and collaborates within DHP to support development and dissemination of guidelines, research syntheses and effective strategies for HIV prevention programs; (3) creates, maintains and regularly updates a public-facing platform to disseminate evidence-based prevention strategies and research syntheses aligned with DHP and national prevention priorities to internal and external stakeholders; (4) creates and manages a continuously updated multi-level coded cumulative database of the HIV prevention research literature in support of systematic reviews and guideline development as well as internal and public inquiries; (5) seeks to advance the methodology of HIV prevention evaluation through CDC evaluation activities and with the field of program evaluation more broadly; (6) seeks to improve data quality and support through providing assistance to recipients to help design and implement data collection, design local evaluations, and dissemination packages; (7) collects information to verify that what is developed, translated and disseminated is feasible, programmatically effective, and plays a role in improving health outcomes; (8) plans, develops, implements, and manages research dissemination strategies and resources that build a research to practice infrastructure to prevent HIV and its complications; (9) monitors implementation and establishes protocols for implementation of behavioral, biomedical, structural evidence-based and evidence-informed approaches by HIV prevention programs to determine if said approaches may be successfully implemented under real world conditions; (10) collaborates and consults with CDC staff, other PHS agencies, state and local health departments, CBOs, and other groups and organizations involved in HIV prevention activities to support technical assistance systems and other activities related to the application of evidence-informed and evidence-based prevention programs and policies; (11) provides scientific expertise, quality assurance and clearance for products and processes related to systematic review, research synthesis, and guidelines methodologies; and (12) collaborates within DHP to provide technical consultation and assesses and determines the training, capacity building, and technical assistance needs for organizations implementing behavioral, biomedical, and structural evidence-based and evidence-informed approaches to meet the unique HIV prevention needs of local jurisdictions based upon risk factors and demographics. (Approved 1/14/2021)

Detection and Response Branch (CVJCL)

(1) Develops and disseminates analytic methods for detecting and prioritizing clusters and outbreaks and understanding transmission patterns, molecular epidemiology, and drug resistance;
(2) analyzes data to identify and monitor priority clusters and support public health action; (3) provides technical assistance and other support for health departments on detecting clusters and outbreaks; (4) develops, evaluates, and disseminates methods for responding to clusters and outbreaks; (5) develops guidance and provides technical assistance to support health departments to build capacity for cluster response and response planning, including community engagement; (6) leads cross-division collaboration and communication about cluster and outbreak detection and response and builds DHP capacity to support response, including training and rostering staff; (7) provides technical assistance and other support for health departments on responding to clusters and outbreaks and disseminates findings of these responses; (8) analyzes information from cluster detection and response to inform efforts to prevent clusters and outbreaks; (9) provides scientific and programmatic oversight and guidance for DHP informatics systems for cluster detection and response and collaborates with other DHP branches and offices on these systems; and (10) collaborates with other branches and offices in DHP, divisions in the Center, and CIOs to harmonize scientific agendas and programmatic priorities and addresses community engagement and policy issues related to cluster detection and response. (Approved 1/14/2021)

Division of Sexually Transmitted Disease Prevention (CVJD)

(1) In cooperation with other CDC components, administers operational programs for the prevention of sexually transmitted diseases (STD); (2) provides consultation, training, statistical, educational, epidemiological, and other technical services to assist state and local health departments in the planning, development, implementation, evaluation, and overall improvement of STD prevention programs; (3) supports a nationwide framework for effective surveillance of STD other than HIV; (4) conducts behavioral, clinical, epidemiological, preventive health services, and operational research into factors affecting the prevention and control of STD; (5) provides leadership and coordinates, in collaboration with other CDC components, research and program activities that focus on STD and HIV prevention; (6) promotes linkages between health department STD programs and other governmental and non-governmental partners who are vital to effective STD prevention efforts; (7) provides technical supervision for division, state and local assignees; and (8) collaborates with other components of the division, NCHHSTP and CDC to develop and implement strategies and activities to meet goals for key division priorities. (Approved 8/10/2020; Effective 11/16/2020)

Office of the Director (CVJD1)

(1) Plans, directs and evaluates the activities of the division; (2) provides national leadership and guidance in STD science, surveillance, prevention and control policy formulation; program planning, development, management, and evaluation; development of training, educational, and health communications; (3) provides operational, administrative, fiscal, technical, and logistical support for division programs and units; (4) assures multidisciplinary collaboration in STD prevention and control activities; (5) in cooperation with other CDC components, provides leadership for developing research relevant to STD prevention and control; (6) provides leadership, guidance, and coordinates development of guidelines and standards to assure ongoing high-quality performance of STD prevention and control programs; (7) coordinates global STD activity of the division; (8) collaborates, as appropriate, with other divisions and offices in NCHHSTP, and with other divisions throughout CDC; (9) collaborates as appropriate with
external organizations outside of CDC to achieve the mission of the division; and (10) manages the Tuskegee Participants Health Benefits Program. (Approved 8/10/2020; Effective 11/16/2020)

STD Laboratory Reference and Research Branch (CVJDE)

(1) Performs research on the pathogenesis, genetics, and immunology of syphilis, gonococcal and chlamydial infections, and other sexually transmitted infections (STI), including rare (e.g., chancroid) or emerging (e.g., Mycoplasma genitalium) STI; (2) conducts research and reference services to develop, evaluate, and improve laboratory STI diagnostics and methods; (3) participates in the design, implementation, and analysis of national and international STD epidemiology studies, surveillance activities, and biomedical interventions; (4) conducts laboratory-based surveillance for and research on the genetics of antimicrobial resistance in Neisseria gonorrhoeae and for other STIs; (5) serves as the WHO International Collaborating Center for Reference and Research in STI and as reference laboratory for WHO STD diagnostics and surveillance initiatives; and (6) develops STD laboratory guidelines. (Approved 8/10/2020; Effective 11/16/2020)

Program Development and Evaluation Branch (CVJDG)

(1) Provides and facilitates technical assistance and capacity building to state and local health departments, non-governmental, and other partners in the planning, implementation, and evaluation of STD prevention and control strategies; (2) monitors and evaluates STD prevention strategies to assure programmatic objectives are being met and to track individual and collective progress over time; (3) conducts analysis of STD prevention and control strategies and collaborates with partners to resolve challenges and increase awareness of best practices; (4) develops and manages programs, solicitations, and evaluation projects to advance innovations and quality improvements in STD prevention and control strategies and activities; and (5) supports the identification, translation, dissemination, and adoption of evidence-based interventions and practices by state and local health departments, non-governmental, and other prevention partners. (Approved 8/10/2020; Effective 11/16/2020)

Surveillance and Data Science Branch (CVJDH)

(1) Assesses and disseminates data on STD burden, risks, and trends in STD morbidity and mortality; (2) leads, evaluates, and provides recommendations for improving STD surveillance systems; (3) provides leadership in the management and coordination of information systems that can electronically receive, store, and transmit STD surveillance and case management data; (4) provides surveillance, data management and public health informatics technical assistance and support to the division, local and state health departments, and other national and international partners; and (5) translates informatics best practices for STD electronic case reporting, clinical decision support, and other division efforts. (Approved 8/10/2020; Effective 11/16/2020)

Disease Intervention and Response Branch (CVJDJ)

(1) Investigates STDs in the community (e.g., field testing, public health detailing, outbreak
response, and contact tracing); (2) provides technical assistance and capacity in disease investigation to support communities and public health partners; (3) conducts activities to assure a competent disease investigation workforce (e.g., DIS certification, mentoring and training); and (4) provides linkage to services for STD prevention and control and other co-occurring activities (e.g., intimate partner violence, behavioral health, HIV care, PrEP, and reproductive health services). (Approved 8/10/2020; Effective 11/16/2020)

Behavioral Science and Epidemiology Branch (CVJDK)

(1) Synthesizes evidence and critically appraises existing prevention science research, as related to STD priorities; (2) identifies and describes the context for effective STD prevention science; (3) provides national and international leadership in the design and dissemination of studies to implement STD prevention interventions at individual, group, community, and structural levels; and (4) translates or adapts research strategies and evaluation results from formative assessments and prevention interventions for programmatic action and to inform national STD prevention policy and program direction. (Approved 8/10/2020; Effective 11/16/2020)

Clinical, Economics, and Health Services Research Branch (CVJDL)

(1) Develops and evaluates methodologies for conducting clinical, economic, modelling, and health services research related to STD prevention and control; (2) develops preventive clinical, health services, transmission dynamics, and cost-effectiveness models for STD-related issues; (3) estimates the economic and health impact burden of STDs and cost-effectiveness of STD prevention; (4) develops, disseminates, and evaluates STD prevention and clinical guidelines; (5) provides technical assistance, training, and capacity building pertaining to clinical and health services-related aspects of STD prevention; and (6) provides statistical research and technical assistance to others in the division and to local and state STD control programs. (Approved 8/10/2020; Effective 11/16/2020)

Division of Tuberculosis Elimination (CVJE)

The Division of Tuberculosis Elimination (DTBE) promotes health and quality of life by preventing, controlling, and eventually eliminating tuberculosis (TB) from the United States (U.S.), and collaborates with international partners by representing the U.S. national TB program. In carrying out its mission, the Division conducts the following activities under each focus area: (1) Administers and promotes a national program for the prevention, control, and elimination of TB; (2) supports a nationwide framework for surveillance of TB and evaluation of national TB prevention and control performance; (3) provides programmatic consultation, technical assistance, and outbreak response assistance to state and local TB programs; (4) co-chairs and coordinates administrative support for the Federal TB Task Force, and supports and collaborates with the National Tuberculosis Controllers Association (NTCA) and the Tuberculosis Education and Training Network to promote effective national communications and coordinated feedback on urgent policy and program performance issues; (5) supports development of TB patient education materials and interventions, capacity development, and access to medical consultation; (6) provides national and supranational reference laboratory function for identification and drug susceptibility testing of Mycobacterium tuberculosis;
(7) fosters patient-centered messages, including those regarding directly-observed therapy, to promote adherence with long-term treatment for improvements in well-being and interruption in community transmission of M. tuberculosis; (8) promotes targeted testing of epidemiologically-defined at-risk populations and treatment of persons with latent TB; (9) conducts epidemiologic, laboratory, behavioral, health systems, and clinical research; (10) supports patient and provider research to identify barriers and facilitators to TB services; (11) supports multicenter consortia for epidemiologic, laboratory, diagnostics, clinical, and vaccine development research; (12) develops and applies mathematical TB transmission models to forecast future incidence and prevalence trends; (13) provides leadership and formulates policies and guidelines; (14) provides technical supervision and training to federal assignees working in state, and local TB control programs; (15) develops training and educational materials, and provides technical assistance on communications and training needs; (16) participates in the development of policies and guidelines for TB prevention and control within populations at high risk, such as persons infected with HIV or racial and ethnic minorities; (17) supports technical activities and operational research to reduce TB in foreign-born populations; (18) Represents the U.S. national TB program with regard to the global health initiatives for the prevention and control of TB and drug-resistant TB; (19) Represents the U.S. national TB control program with regard to the World Health Organization (WHO)-hosted Stop TB Partnership for implementation of the Global Plan to Stop TB and Millennium Development Goals; (20) monitors progress and trends towards TB elimination, including progress towards CDC’s Healthy People 2020; (21) provides progress reports to, and solicits advice from, the Advisory Council for the Elimination of Tuberculosis (ACET); and (22) facilitates partnerships with affected communities, nongovernmental, professional, and global organizations. (Approved 08/09/2016)

Office of the Director (CVJE1)

(1) Provides leadership and guidance in program planning and management, policy formulation, and development of training, surveillance, and research programs in TB; (2) directs and evaluates the operations of the Division; (3) establishes contact with, and promotes TB activities of, other organizations that have an important role to play in achieving TB elimination; (4) coordinates administrative and logistical support services for the Division; (5) provides consultation and assistance in writing reports for presentation at local, regional, national, and international scientific meetings and for publication in scientific journals; (6) coordinates and tracks materials for purposes of clearance and approval for publications and presentations; (7) presents findings at national and international scientific meetings; (8) presents Division overview at the ACET meetings; (9) collaborates and coordinates Division activities with other components of NCHHSTP and CDC; (10) provides technical support to ACET; (11) provides administrative and technical support for STOP TB USA (previously the National Coalition for the Elimination of Tuberculosis) and the Federal TB Task Force; and (12) provides representation of the U.S. national TB program to WHO and other international entities. (Approved 08/09/2016)

Communications, Education, and Behavioral Studies Branch (CVJEB)

(1) Provides technical assistance to health departments and other health care providers in assessing and meeting their TB training, education, and communication needs; (2) provides
technical expertise to assess the impact of training and education activities by health departments; (3) provides technical assistance to health departments and other TB health care providers regarding behavioral studies research and intervention development; (4) provides consultation and assistance in coordinating TB training, education, behavioral studies and interventions, and communication activities carried out by other CDC programs, Regional Training and Medical Consultation Centers, and Stop TB USA members, and develops, markets, and maintains electronic mailing lists for persons with TB-related education, training, and communication responsibilities; (5) provides DTBE coordination and oversight and technical information for CDC INFO; (6) organizes and maintains scientific and non-scientific information resources related to TB; (7) conducts formative research and evaluation on approaches to patient, provider, and public education, and conducts research on individual and social factors affecting health-care seeking behavior and treatment outcomes related to TB; (8) based on research findings, develops behavioral interventions targeted to health care providers, persons with or at risk for TB, and other high-risk populations; (9) provides consultation to national organizations on behavioral research needs and study designs; on the technical transfer of behavioral research findings into TB program practice and TB training and educational strategies; and provides consultation, technical assistance and coordination to other branches within the Division regarding development and implementation of behavioral interventions and training for branch specific activities such as Report of Verified Case of Tuberculosis, Aggregate Reports for Program Evaluation, and surveillance activities; (10) presents findings at national and international scientific meetings and develops, disseminates and evaluates training and educational materials and courses providing TB information to the scientific and public health communities, as well as the general population; (11) conducts training and education needs assessments; identifies resources available for health department TB control officers and senior managers, TB nurse consultants, TB training and education directors and for senior staff carrying out TB activities in other programs or facilities serving persons at high risk for TB; and develops, conducts, and coordinates training courses on TB for state and big city TB program managers and nurse consultants; (12) based on needs assessments, develops and conducts or coordinates training courses and materials for staff who train and/or supervise front-line TB program staff; (13) provides oversight in the planning, coordination, and maintenance of the Division’s Internet and Intranet web sites; (14) conducts and/or coordinates communications programs designed to build public support and sustain public interest and commitment to the elimination of TB; (15) conducts communications research and identifies communications resources available for health department TB control officers and senior managers, TB nurse consultants, and for senior staff carrying out activities in other programs or facilities serving persons at high risk for TB; (16) provides coordination and oversight for Division responses and relations with the media and public and serves as point of contact for telephonic, written, and electronic (e-mail) requests for information from the media and public; (17) develops, coordinates, and staffs the Division’s exhibit booth at conferences/meetings; (18) provides oversight and coordination for TB-related voice and web-based TB information, training, and education resources; and (19) presents communications issues to ACET and at national and international scientific meetings. (Approved 08/09/2016)

Data Management, Statistics, and Evaluation Branch (CVJEC)

(1) Provides Division-wide leadership in and coordination of data management, statistics,
program evaluation, and economic planning, policy development, and monitoring within an integrated systems framework, playing a central role in the education of all DTBE staff on the science and methods of data management, statistics, program evaluation, and health economics; (2) consults and assists in appropriate data collection, management, analysis, and reporting for scientific studies conducted Division-wide; (3) collaborates in the statistical analysis of data and in the preparation of materials for publication; (4) coordinates and oversees data management and statistical design, implementation and analysis support, and consultation for the TB Clinical Trials and the TB Epidemiologic Studies Consortia; (5) conducts statistical research and methods development, including mathematical models of TB transmission and diagnostic test performance to improve the effectiveness of prevention and control activities; (6) coordinates data management, statistics, and evaluation services provided under contractual services; (7) collaborates with other components of the Division to develop and implement strategies and activities to meet goals for Division priorities; (8) translates overall NCHHSTP and DTBE strategies into branch-specific implementation plans for research and programs; (9) participates in the development of comprehensive evaluation methods for TB prevention and control programs; (10) consults on the implementation of key provisions of program evaluation contained in cooperative agreements between CDC and external state and local TB programs; (11) provides transparent and easily understood program evaluation and health economic data to TB control programs that serve them in meeting TB national goals and objectives; (12) galvanizes external TB control programs to implement and use National TB Indicators Project data to prioritize program areas for improvement; (13) provides major authoritative technical advice on economics and be an authority on all matters related to the analysis and collection of economic data relevant to Division goals, and (14) presents data management, statistical, and economic considerations, and reporting issues to ACET and other national and international scientific meetings. (Approved 08/09/2016)

Field Services Branch (CVJED)

(1) Provides medical and programmatic consultation to assist state and local health departments in developing, implementing and evaluating their activities toward achieving tuberculosis prevention, control, and elimination; (2) promotes adoption of CDC tuberculosis-related policies by national organizations, health departments, and health care providers; (3) provides consultation and assists state and local health departments in the methodology and application of tuberculosis control techniques recommended by CDC; (4) provides technical assistance to states and localities for improving program operations; (5) encourages and facilitates the transfer of new technology and guidelines into clinical and public health practice; (6) serves as a liaison or focal point to assist TB programs in state and local health departments in linking with proper resource persons and obtaining technical assistance, both within and outside the Division; (7) participates in development of national policies and guidelines for tuberculosis elimination; (8) identifies and facilitates sharing of best practices to ensure that good program methodology in one program is known and made available to other state and local programs; (9) serves as the lead branch for administration and management of cooperative agreement programs with state and local health department tuberculosis programs and others who support state and local health department tuberculosis programs; (10) develops funding opportunities based on Division strategic priorities; (11) coordinates technical reviews of cooperative agreement applications and makes appropriate funding recommendations; (12) monitors grantee performance on activities
specified in the cooperative agreement; (13) identifies specific management, operational, and staff performance problems associated with not achieving TB control objectives or with not implementing essential TB components, and recommends solutions; (14) participates in the development of comprehensive evaluation methods for TB prevention and control programs; (15) collaborates with other DTBE branches in the evaluation of tuberculosis programs and development of program management and evaluation reports for publication; (16) provides supervision and support for the CDC field staff; (17) conducts a continuing analysis of the effectiveness of field personnel and utilization of other resources in relation to the tuberculosis problems; (18) provides input to the development of Division policy, priorities and operational procedures; (19) provides programmatic oversight, technical assistance, and medical consultation to the Regional Training and Medical Consultation Centers; and (20) presents programmatic activities to ACET and at national and international scientific meetings. (Approved 08/09/2016)

Clinical Research Branch (CVJEE)

(1) Assesses the need for and conducts studies of new or existing drugs and regimens used in the prevention and treatment of TB, including dosage, duration, pharmacokinetics and toxicity; (2) supports the TB Trials Consortium in the conduct of studies of new treatments for active TB and latent TB infection; (3) supports coordinated and standardized data management for branch research, and serves as the Data and Coordinating Center for the TB Trials Consortium, collaborating as needed with both internal and external partners; (4) provides clinical support and oversight for the distribution of investigational drugs for the treatment and prevention of TB by CIOs/Scientific Resources/Drug Service; (5) assesses the need for and conducts clinical and field trials of more specific and rapid tests to diagnose active TB and latent TB infection and to identify drug-resistant TB in collaboration with the Laboratory Branch; (6) collaborates with and provides consultation and technical assistance to national and international organizations on the design and conduct of clinical trials and research needs; (7) conducts, participates in, and collaborates with other DTBE units in research on clinical, epidemiologic, immunologic and genetic aspects of TB prevention and control; (8) collaborates with external partners in implementation of research; (9) maintains expertise and addresses special research needs relevant to drug pharmacokinetics, microbiology, drug resistant TB & special populations, including children and persons living with HIV; (10) provides consultation and training to local, state, national and international organizations and to TB program field staff, on design and conduct of clinical trials, TB therapeutics and diagnostics, health care systems research needs, decision and economic analyses, evaluation techniques, qualitative research methods, and research on TB transmission; (11) has responsibility for Divisional engagement in preparing for and participating in trials of new TB vaccines and when appropriate, collaborates with private and public institutions in the area of vaccine development; (12) reports study results to public health practitioners through direct communication, articles in scientific journals and CDC publications, and oral and poster presentations at national and international scientific and program meetings; (13) provides input into statements and guidelines issued by the CDC, the ACET, and professional organizations; and (14) presents research issues and findings to ACET and at national and international scientific meetings. (Approved 08/09/2016)
Surveillance, Epidemiology, and Outbreak Investigations Branch (CVJEG)

(1) Directs national surveillance of tuberculosis to provide accurate and timely national data and to monitor progress toward the elimination of tuberculosis in the U.S.; (2) conducts analyses of national TB surveillance data to monitor national trends in TB in order to assist in program planning, evaluation, and policy development and to identify areas for further study to guide elimination efforts; (3) conducts surveillance-related studies that evaluate current TB surveillance systems and develops new surveillance methods and systems in order to better monitor and accelerate TB elimination efforts; (4) provides technical surveillance expertise to state and local TB control programs, other federal agencies, and other organizations involved in TB prevention and control; (5) conducts epidemiologic research to assess the characteristics of persons with M. tuberculosis disease and infection in the U.S.; (6) analyzes research findings to develop improved interventions for eliminating tuberculosis and better analytic tools for future studies; (7) provides technical epidemiologic expertise to state and local tuberculosis control programs; (8) supports the TB Epidemiologic Studies Consortium in the conduct of studies of programatically relevant epidemiologic, behavioral, economic, laboratory, and operational research concerning the identification, diagnosis, prevention and control of TB disease and latent infection; (9) conducts molecular epidemiologic analyses of TB cases to identify, track, and guide interventions to stop TB outbreaks; (10) investigates outbreaks of tuberculosis; (11) provides consultation and technical expertise on TB surveillance, epidemiology and outbreaks to state and local tuberculosis control programs; (12) analyzes TB outbreak investigation findings in order to improve the ability of tuberculosis control programs to detect future outbreaks and respond to them promptly and appropriately to limit transmission; (13) supervises EIS officers in the conduct of their two-year assignments; (14) prepares manuscripts for publication in scientific journals; (15) presents findings at national and international scientific meetings; and (16) presents surveillance, epidemiology, and outbreak findings to ACET and at national and international scientific meetings. (Approved 08/09/2016)

Laboratory Branch (CVJEJ)

(1) Serves as the national reference laboratory in support of the mission of DTBE, fulfilling public health function in leadership, clinical and consultative service, and research; (2) provides laboratory support for epidemiological investigations, surveillance activities, and special studies of Mycobacterium tuberculosis, in collaboration with other branches; (3) administers contracts to provide M. tuberculosis genotyping, maintains a national database of genotypes, and conducts operational research to evaluate genotyping and optimize use of state-of-the-art methods; (4) serves as primary CDC source for reference laboratory services for M. tuberculosis; (5) administers grants and cooperative agreements to strengthen laboratory activities and advance testing services; (6) provides consultation, technical assistance, and training to state and municipal public health laboratories; (7) develops, evaluates, or improves conventional and molecular methods for the detection, characterization, and susceptibility testing of M. tuberculosis; (8) conducts studies to define the role of bacterial virulence factors and host factors in disease processes and protection, and develops, evaluates, and improves methods for the diagnosis and prevention of TB; (9) develops experimental models of TB and conducts studies on therapy, pathogenesis, and prevention for TB; (10) prepares manuscripts for publication in scientific journals; (11) presents findings at national and international scientific
Division of Viral Hepatitis (CVJH)

The Division of Viral Hepatitis (DVH), in collaboration with domestic and global partners, provides the scientific and programmatic foundation and leadership for the prevention and control of hepatitis virus infections and their manifestations. To achieve its mission, DVH: (1) conducts public health surveillance, epidemiologic, and behavioral studies to identify and monitor modes of hepatitis virus transmission and the burden of diseases attributable to infections with hepatitis viruses; (2) provides reference laboratory services for viral hepatitis; (3) conducts epidemiologic, laboratory, operational, and behavioral studies to identify and characterize agents and host factors associated with acute and chronic hepatitis and associated liver disease, determine risks for transmission of hepatitis viruses, define the pathogenesis and natural history of hepatitis virus infections, characterize disease cofactors, and assess health impact; (4) conducts evaluations to improve programs and strategies for prevention of viral hepatitis and prevention of the adverse outcomes of chronic viral hepatitis; (5) translates research findings into public health practice and policy; (6) integrates related prevention services that will help persons protect themselves from viral hepatitis infections, HIV infection, STD, and subsequent disease manifestations; (7) engages partners, particularly affected communities, to reduce disparities in access to preventive services such as vaccines among those at risk for and affected by viral hepatitis; (8) disseminates information for training and education through health communication materials, tools, and programs and scientific publications and presentations; (9) leads and participates in the development, implementation, and evaluation of domestic and international policies and guidelines related to viral hepatitis prevention; (10) builds capacity and enhances public health infrastructure for prevention of viral hepatitis domestically and internationally; (11) plans, coordinates, and guides programs and activities with federal agencies and other domestic and international organizations; (12) sustains and strengthens multidisciplinary partnerships in prevention research, policy development, and communications; (13) provides scientific leadership regarding screening, treatment, immunization, food safety, safe injection practices, and other prevention interventions relevant to viral hepatitis; (14) provides technical and programmatic leadership to state and local health departments and other partners for the development, implementation, and evaluation of programs that provide and support immunization, counseling, testing, referral, safe food management, safe injection practices, and other services to prevent infections with hepatitis viruses and diseases caused by these infections; (15) provides technical assistance to state and local health departments, other federal agencies, other CDC components, and national and international health organizations; (16) provides training opportunities in epidemiology, prevention, and laboratory science; (17) provides leadership and coordination to integrate viral hepatitis prevention and control activities into other prevention services supported by CDC and other federal agencies; (18) provides leadership and technical expertise to assist international partners including WHO, other U.S. agencies, and Ministries of Health in developing, implementing, and evaluating immunization, safe injection, and other viral hepatitis prevention and control programs, and in conducting epidemiologic and research studies; (19) serves as a WHO Collaborating Center for Reference and Research on Viral Hepatitis; (20) ensures that programmatic and scientific activities are aligned with, and in meetings; (12) supervises and trains fellows in temporary or multi-year educationally-based programs in areas related to the mission of the branch; and (13) elevates awareness of laboratory issues to ACET and other stakeholders. (Approved 08/09/2016)
support of, the missions, goals, and strategic imperatives of NCHHSTP and CDC; and (21) bases all public health decisions on the highest quality scientific data, openly and objectively derived. (Approved 3/22/2007)

Office of the Director (CVJH1)

(1) Plans, directs, and administers DVH domestic and international programs and activities; (2) leads and advises on public health surveillance, research, policy development, and program planning and evaluation activities related to viral hepatitis; (3) leads and advises on the coordination and integration of viral hepatitis prevention and control activities with appropriate CDC components, HHS, other federal agencies, international organizations, and other groups; (4) ensures that programmatic and scientific activities are aligned with, and in support of, the missions, goals, and strategic imperatives of NCHHSTP and CDC; (5) leads and advises on the development of community and professional partnerships to enhance and support hepatitis and liver disease prevention and control activities; (6) provides division-wide administrative and program support services; (7) provides manuscript review and clearance and coordination and oversight for human subjects review; and (8) provides support to DVH components in writing, and communication services. (Approved 4/11/2007)

Epidemiology and Surveillance Branch (CVJHB)

(1) Determines rates and risk factors associated with acute and chronic infections with hepatitis viruses and diseases caused by these infections, and monitors trends in incidence and prevalence; (2) evaluates epidemiologic data that reflect the performance and effectiveness of prevention strategies; (3) conducts research and outbreak investigations to determine the epidemiology of known and new hepatitis viruses and their variants and the disease manifestations caused by these infections; (4) estimates the disease burden attributable to infections with hepatitis viruses, the impact of co-factors on disease progression, and the impact of prevention strategies on reducing this burden; (5) evaluates the performance of viral hepatitis vaccines and of diagnostic tests for hepatitis virus infections; (6) provides statistical support and consultation for the division; (7) provides consultation to local, national, and international authorities on the conduct of public health surveillance and epidemiologic studies, including investigation of disease outbreaks, and other activities related to the prevention and control of viral hepatitis; (8) disseminates information through scientific publications and presentations; and (9) provides training opportunities for public health professionals enrolled in CDC-sponsored programs. (Approved 4/11/2007)

Prevention Branch (CVJHC)

(1) Develops, administers, implements, and evaluates domestic and international programs to prevent viral hepatitis based on findings from public health surveillance and epidemiologic, behavioral, clinical, and laboratory studies; (2) leads efforts to integrate viral hepatitis prevention and control activities into settings that provide services for persons at risk for viral hepatitis, in collaboration with appropriate CDC components, HHS, other federal agencies, international organizations, and other groups; (3) conducts research and evaluation to ascertain educational and training needs, the most appropriate and effective communication methods to meet these
needs, and the effectiveness of educational programs for health professionals, persons at risk for infection with hepatitis viruses, and the public; (4) develops and disseminates accurate, timely, and effective educational and training materials, tools, and programs for prevention of infections with hepatitis viruses and diseases caused by these infections; (5) develops and conducts research and evaluation, including economic and behavioral studies, to assess the effectiveness of interventions and programs to prevent viral hepatitis and to identify successful strategies to overcome barriers to implementing prevention services; (6) develops, disseminates, and evaluates health services models for prevention of infections with hepatitis viruses and diseases caused by these infections; (7) provides leadership for and coordinates the development of CDC recommendations and other national standards and performance objectives for the prevention of viral hepatitis infections and liver disease, and works with agencies and partners to adopt these standards; (8) develops indicators and measures by which to evaluate the performance and effectiveness of viral hepatitis prevention programs; (9) disseminates information through scientific publications and presentations; and (10) provides training opportunities for students and public health professionals participating in CDC-sponsored programs and continuing education for public health professionals and clinicians. (Approved 4/11/2007)

Laboratory Branch (CVJHD)

(1) Conducts research and applies state-of-the-art laboratory methods in support of studies related to the epidemiology, molecular epidemiology, and natural history of acute and chronic infections with hepatitis viruses; (2) conducts research to develop and validate diagnostic approaches to identify infections with hepatitis viruses; (3) evaluates methods, including vaccines, to prevent acute and chronic infections with hepatitis viruses and diseases caused by these infections; (4) determines the viral, immunologic, and other host responses to infection with hepatitis viruses, including responses related to co-infection with HIV, in humans and animal models; (5) identifies and characterizes agents that cause hepatitis; (6) provides reference diagnostic testing for markers of infection with hepatitis viruses for state and local public health laboratories; (7) provides leadership and collaboration to ensure the transfer of state-of-the-art methods and approaches for identification and diagnosis of infections with hepatitis viruses to public health laboratories, both nationally and internationally; (8) develops and maintains archives of clinical specimens from clinical trials and epidemiologic and laboratory studies; (9) disseminates information through scientific publications and presentations; and (10) provides training opportunities for students and laboratorians participating in CDC-sponsored programs. (Approved 4/11/2007)

Division of Adolescent and School Health (CVJJ)

(1) In cooperation with other CDC components, administers programs addressing priority sexual health risks and related health behaviors among youth; (2) identifies and monitors priority sexual health risks and related health behaviors among youth that result in the transmission of HIV, other sexually transmitted infections and unintended pregnancy; (3) provides consultation, training, educational, and other technical services to assist state, territorial, and local education and health departments, tribal governments, national nongovernmental organizations, and other societal institutions to implement and evaluate policy, systems, and environmental changes and interventions to reduce priority sexual health risks among youth; (4) in coordination with other
CDC components, supports international, national, state, tribal, and local school-based surveillance systems to monitor priority health risk behaviors and health outcomes among youth, along with the policies, programs, and practices schools implement to address them; (5) conducts evaluation research to expand knowledge of the determinants of priority health risk behaviors among youth and to identify effective policies and practices that schools and other societal institutions can implement to reduce priority health risks among youth; (6) develops and disseminates guidelines and tools to help schools and other societal institutions apply research synthesis findings to reduce priority health risks among youth; (7) provides leadership and consultation on the use of a coordinated approach to school health; (8) provides leadership and consultation to other divisions within NCHHSTP and CDC on how schools work and how to foster effective collaboration between public health and education departments; (9) provides information to the scientific community and the general public through publications and presentations; and (10) in accomplishing the functions listed above, collaborates with other components of CDC and HHS; the U.S. Department of Education and other federal agencies; national professional, voluntary, and philanthropic organizations; international agencies; and other societal institutions as appropriate. (Approved 1/14/2021)

Office of the Director (CVJJ1)

(1) Plans, directs, and evaluates the activities of the division; (2) provides national leadership and guidance in policy formulation and program planning and development to reduce sexual health risks among youth and improve school health programs, policies, and practices; (3) provides leadership and guidance for program management and operations; (4) provides leadership in coordinating activities between the division and other NCHHSTP divisions in addressing priority sexual health risks among adolescents; (5) promotes collaboration with other NCHHSTP divisions and other governmental and non-governmental organizations for the development of policies and evaluation methods; (6) coordinates division responses to inquiries from national and local communications media; (7) implements science and evidence-based communication programs, initiatives, and strategies that target state and local health and education partners, media, national organizations, and consumers; (8) systematically translates, promotes, and disseminates science-based messages through multiple communication products and channels; (9) implements effective internal communication strategies targeting the Division of Adolescent and School Health (DASH) and other CDC staff; (10) oversees creation, production, promotion, and dissemination of materials designed for use by the media, partners, national organizations, and consumers, including press releases, brochures, fact sheets, toolkits, other print and electronic materials, and ensures appropriate clearance of these materials; (11) assists in the preparation of speeches and congressional testimony for the division director, the center director, and other public health officials; (12) provides program services support in extramural programs management; and (13) collaborates, as appropriate, with other divisions and offices of NCHHSTP, other CIOs throughout CDC, and other federal agencies in carrying out these activities. (Approved 1/11/2012)

Program Development and Services Branch (CVJJB)

(1) Provides consultation, training, educational, and other technical services to assist state, territorial, and local education and health departments, tribal governments, national
nongovernmental organizations, and other societal institutions to implement and improve policy, systems, and environmental changes and interventions to reduce priority sexual health risks among youth; (2) uses the results of surveillance and evaluation research and research syntheses to improve the impact of school- and community-based interventions designed to reduce priority health risks among youth and to promote changes in behaviors related to HIV, other sexually transmitted diseases, and unintended pregnancy; (3) provides leadership to the nationwide network of leaders in school-based HIV prevention to promote linkages between state and local public health departments with education agencies; (4) assesses training and technical assistance needs and develops strategies to build the capacity of funded partners, other external partners, and division staff, and (5) provides consultation to other divisions within NCHHSTP and CDC on how schools work and how to foster effective collaboration between public health and education departments. (Approved 1/14/2021)

Research Application and Evaluation Branch (CVJJC)

(1) Conducts evaluation research to expand knowledge of the determinants of priority health risk behaviors among youth and to identify effective policies and practices that schools and other societal institutions can implement to reduce priority health risks among youth; (2) synthesizes and disseminates research findings to improve the impact of interventions designed to reduce priority sexual health risks among youth, including those designed to address cross-cutting issues and protective factors; (3) develops and disseminates guidelines and tools to help schools and other societal institutions apply research synthesis findings to reduce priority health risks among youth; and (4) in collaboration with other NCHHSTP divisions and with other governmental and non-governmental organizations, develops and promotes evidence-based policies, practices, and evaluation methods. (Approved 1/11/2012)

School-Based Surveillance Branch (CVJJD)

(1) Maintains international, national, state, tribal, and local school-based surveillance systems to identify and monitor priority health risk behaviors and health outcomes among youth; (2) maintains national, state, tribal, and local surveillance systems to monitor school health policies and practices designed to address priority health risk behaviors and health outcomes among youth; (3) designs, develops, and disseminates a wide variety of products describing school-based surveillance data; (4) provides comprehensive technical assistance to state and local education and health agencies, tribal governments, and ministries of health and education in the planning and implementation of school-based surveillance systems; (5) manages extramural funding of school-based surveillance systems; and (6) collaborates with other branches, divisions, and offices in NCHHSTP and other CIOs throughout CDC to accomplish the functions listed above. (Approved 1/11/2012)