

MAKING AN AIDS-FREE GENERATION A REALITY

ANNUAL REPORT // 2013 //



ELIZABETH GLASER
PEDIATRIC AIDS
FOUNDATION





PRESIDENT'S MESSAGE

In 2013, the Elizabeth Glaser Pediatric AIDS Foundation (EGPAF) commemorated a quarter century of leadership in the battle against pediatric HIV/AIDS. Our journey, which began with three friends around a kitchen table, has shaped the organization that we are today: a global champion of mothers, children, and families.

Since our founding 25 years ago, there has been a 95 percent decline in new HIV infections in children in the United States and a 58 percent decline worldwide.

But today, just as when we were founded, children continue to be left behind when it comes to HIV. Globally, only one-quarter of HIV-positive children are accessing treatment. And without treatment, nearly half of those children will die before the age of 2. Every day, almost 700 babies are infected with HIV because their families lack access to the health services that they need to prevent transmission.

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After 25 years, we remain passionately committed to continuing this fight—until no child has AIDS.”

WE ARE LEADING AN INTEGRATED AND SUSTAINABLE FIGHT TO END PEDIATRIC AIDS

To reach mothers and babies who have been left behind, we are leading the way with an integrated sustainable global approach. We can't end the AIDS epidemic without also improving maternal health and child survival rates and overcoming the barriers to health care caused by poverty, lack of education, and underdeveloped health systems.

WE ARE REACHING FAMILIES IN AREAS OF THE WORLD HARDEST HIT

Nearly 70 percent of the people infected with HIV live in sub-Saharan Africa. With support from our donors, we work with ministries of health, nongovernmental organizations, and other partners in 13 nations in sub-Saharan Africa and in India—strengthening health systems and helping to move HIV services into areas that are most underserved.

One in six HIV-positive pregnant women worldwide receives services for the prevention of mother-to-child transmission (PMTCT) of HIV through programs supported by EGPAF and its affiliates.

WE SEE AN AIDS-FREE GENERATION ON THE HORIZON

Progress is building toward an HIV-free generation. In 2013, we passed a significant milestone when U.S. Secretary of State John Kerry announced that 1 million babies had been born HIV-free over the past 10 years through programs supported by the U.S. President's Emergency Plan for AIDS Relief, one of EGPAF's key funding partners.

Over the past decade, we have been a leading force in helping to build national health systems that are accountable, effective, and sustainable.

After 25 years, we remain passionately committed to continuing this fight—until no child has AIDS.

**CHARLES LYONS // President and CEO,
the Elizabeth Glaser Pediatric AIDS Foundation**



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**It is my personal privilege
to join you in recognizing
the 25th anniversary of this
organization. In the past ten
years, a quarter million
babies have been born
without HIV because of
your work. So there is
a lot to celebrate. ”**

*Sec. Hillary Rodham Clinton, recipient of EGPAF's Global Impact Award,
Dec. 3, 2013*

**“Every child
deserves a lifetime.**

Elizabeth Glaser (1947–1994)

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OUR GLOBAL MISSION OUR HISTORY

The Elizabeth Glaser Pediatric AIDS Foundation seeks to prevent HIV infection and to eradicate pediatric AIDS through research, advocacy, and prevention and treatment programs.

When Elizabeth and Paul Glaser learned that Elizabeth and their children, Ariel and Jake, were infected with HIV, they spared nothing to save their lives. Following Ariel's death in 1988, Elizabeth turned tragedy into hope by joining with her two close friends, Susie Zeegen and Susan DeLaurentis, to create the Elizabeth Glaser Pediatric AIDS Foundation. Elizabeth lost her battle with AIDS in 1994, but her work set in motion the research and programs that saved the life of her son, Jake, along with millions of children worldwide.

Elizabeth's spirit lives on in the work of the foundation named in her honor.



2013 MILESTONES

2013 marked the 10-year anniversary of the U.S. President's Emergency Plan for AIDS Relief (PEPFAR), which has been vital to our expansion into countries with greatest need. As U.S. Secretary of State John Kerry announced in June 2013, one million babies have been born HIV-free thanks to PEPFAR. One-quarter of those healthy births are due to the work of EGPAF.

01.13

EGPAF supported and co-organized a think tank in Entebbe, Uganda, Jan. 22–23, in collaboration with the Global HIV Vaccine Enterprise and the International Maternal Pediatric Adolescent AIDS Clinical Trials (IMPAACT) Network. The meeting brought together stakeholders to discuss new prevention modalities in breastfeeding HIV-exposed infants. EGPAF President Charles Lyons briefed a closed session of the full UN Committee on the Rights of the Child, calling on the committee to prioritize the needs of children living with HIV from a right-to-health perspective.

03.13

During the 20th annual Conference on Retroviruses and Opportunistic Infections (CROI) in Atlanta, Ga., March 3–6, researcher Deborah Persaud, M.D., announced that an infant had been functionally cured of HIV following a period of antiretroviral treatment. Despite later news that detectable levels of the virus had re-established in the child's body, this scientific breakthrough will continue to help researchers understand how to control HIV and, ultimately, develop a cure. Persaud was the recipient of the 2005 Elizabeth Glaser Scientist Award (EGSA).

During CROI, EGPAF established the Pediatric Cure Consortium (PCC), governed by a scientific advisory board co-chaired by Persaud and EGPAF board member Mike McCune, M.D., an EGSA recipient in 1996. Through this consortium, EGPAF is providing seed funding for the most promising ideas, supporting think tanks, and ensuring the sharing of key data and research results.

In advance of the Annual Day on the Rights of the Child, EGPAF held its first briefing at a UN Human Rights Council meeting on March 6. The event drew attention to disparities in access to HIV treatment by children compared to adults.

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AIDS is no longer just a disease; it's a human rights issue.”

Nelson Mandela (1918–2013)

04.13

EGPAF organized a meeting in Washington, D.C., with representatives from Sanofi-Pasteur, Novartis, the IMPAACT Network, and the National Institutes of Health (NIH) to push for inclusion of infants in HIV vaccine research, specifically to prevent transmission of HIV through breast milk.

On April 8, EGPAF Ambassadors Fortunata Kasege and Florida Mwesiga and EGPAF CEO Charles Lyons represented the organization at the UNAIDS Together We Will End AIDS breakfast briefing on Capitol Hill. They were joined by Ambassador Eric Goosby, with the Office of the U.S. Global AIDS Coordinator; Michel Sidibe, executive director of UNAIDS; and Oscar winner Charlize Theron. Attendees included House of Representatives Minority Leader Nancy Pelosi, other high-level members of Congress, congressional staff, and global opinion leaders in the fight against HIV/AIDS. The event focused on how partnerships among stakeholders, governments, and private organizations have played an integral role in changing the trajectory of the HIV pandemic.

05.13

On May 6, EGPAF hosted a bipartisan briefing on Capitol Hill with World Vision and Save the Children to educate Capitol Hill staff about how U.S. investments have reduced child mortality and improved the lives of children around the world. EGPAF Vice President of Research Laura Guay led a presentation explaining how pediatric HIV prevention and treatment programs fit into and rely on the maternal, newborn, and child health framework.

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When a baby is born infected with HIV, it is a big blow ...

06.13

EGPAF held its 24th annual A Time for Heroes celebrity picnic in Los Angeles, Calif., on June 2. EGPAF called on those in attendance and supporters around the world to become heroes for the mothers and children fighting HIV/AIDS worldwide.

On June 18—at an event to celebrate the 10-year anniversary of the U.S. President's Emergency Plan for AIDS Relief (PEPFAR)—U.S. Secretary of State John Kerry announced that 1 million babies have been born free of HIV around the world thanks to PEPFAR. EGPAF has been a key implementer of PEPFAR since 2003 and contributed to preventing transmission of HIV to one-quarter of those healthy babies.

The International AIDS Society (IAS) conference was held in Kuala Lumpur, Malaysia, June 30–July 3. The conference featured experts from EGPAF, who gave oral presentations, moderated conference events, and exhibited a variety of educational posters and abstracts. During a press briefing at the conclusion of the conference, EGPAF Vice President of Research Laura Guay, M.D., called on policymakers to prioritize care for mothers, infants, children, and adolescents living with HIV.

07.13

EGPAF hosted two briefings with the American Foundation for AIDS Relief (amFAR) and the Infectious Diseases Society of America (IDSA) to educate Capitol Hill staff on the latest in HIV/AIDS research. EGPAF Vice President of Research Laura Guay, M.D., joined other prominent HIV researchers to brief congressional staff members from both chambers on exciting advancements in preventing and treating the virus.

EGPAF provided technical support for the Heads of State Special Summit on TB, HIV, and Malaria, held in Abuja, Nigeria, July 12–16. At the summit, nongovernmental organizations and civil society provided input into the African Union's positions on the health components of the post-2015 development agenda. EGPAF drafted language on elimination of mother-to-child transmission of pediatric AIDS, which was included in the final Abuja Declaration 2013.

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**... but when a baby is born HIV-negative,
I feel like I have 100 years to live.”**

Pauline Njuguna, a participant in EGPAF's AIDS Response in Forces in Uniform program in Kenya and a PMTCT peer mentor

11.13

EGPAF launched a retrospective on its website. *Connected: 25 Years Fighting for Mothers, Children, and Families* is a collection of stories that celebrate a quarter century of our shared commitment to end pediatric AIDS. Profiles featured in the series include Susie Zeegen; Susan DeLaurentis; Jake Glaser; Michael Gottlieb, M.D.; and others involved in EGPAF's early days, as well as friends, allies, and ambassadors throughout the years. The stories can be read at www.pedaids.org/25years.

Results from an EGPAF family planning/HIV-integration pilot program in rural Tanzania were presented at an international family planning meeting in Addis Ababa, Ethiopia, held Nov. 12–15. The study, supported by the United Nations Population Fund, assessed changes in the provision of family planning counseling and use of family planning methods among HIV-positive clients who visit care and treatment clinics.

12.13

On Dec. 4, EGPAF honored former Secretary of State and U.S. Senator Hillary Rodham Clinton with a Global Impact Award for her leadership in the fight against HIV/AIDS. During Clinton's speech, she recalled her friendship with Elizabeth Glaser and Elizabeth's tenacity in the fight to end pediatric HIV/AIDS: “Elizabeth was a loving mother, a devoted friend, and an eloquent, passionate, unstoppable woman.”

President Nelson Mandela died on Dec. 5, as experts in the field of HIV were gathering in Cape Town, South Africa, for the International Conference on AIDS and STIs in Africa (ICASA). EGPAF honors the transformative legacy of President Mandela as an advocate for human rights and HIV prevention and treatment.

Health researchers, policy professionals, and program implementers from around the world met in Cape Town, South Africa, Dec. 7–12, for ICASA 2013. The international conference featured several experts from EGPAF, who gave oral presentations, moderated events, and exhibited a variety of educational posters and abstracts.



OUR GLOBAL REACH

EGPAF operates in 15 countries, 13 of which are in sub-Saharan Africa—the area of the world hit hardest by the AIDS epidemic.

As of Dec. 31, 2013, the
Elizabeth Glaser
Pediatric AIDS Foundation

actively supports

7,000

health facilities worldwide

has reached

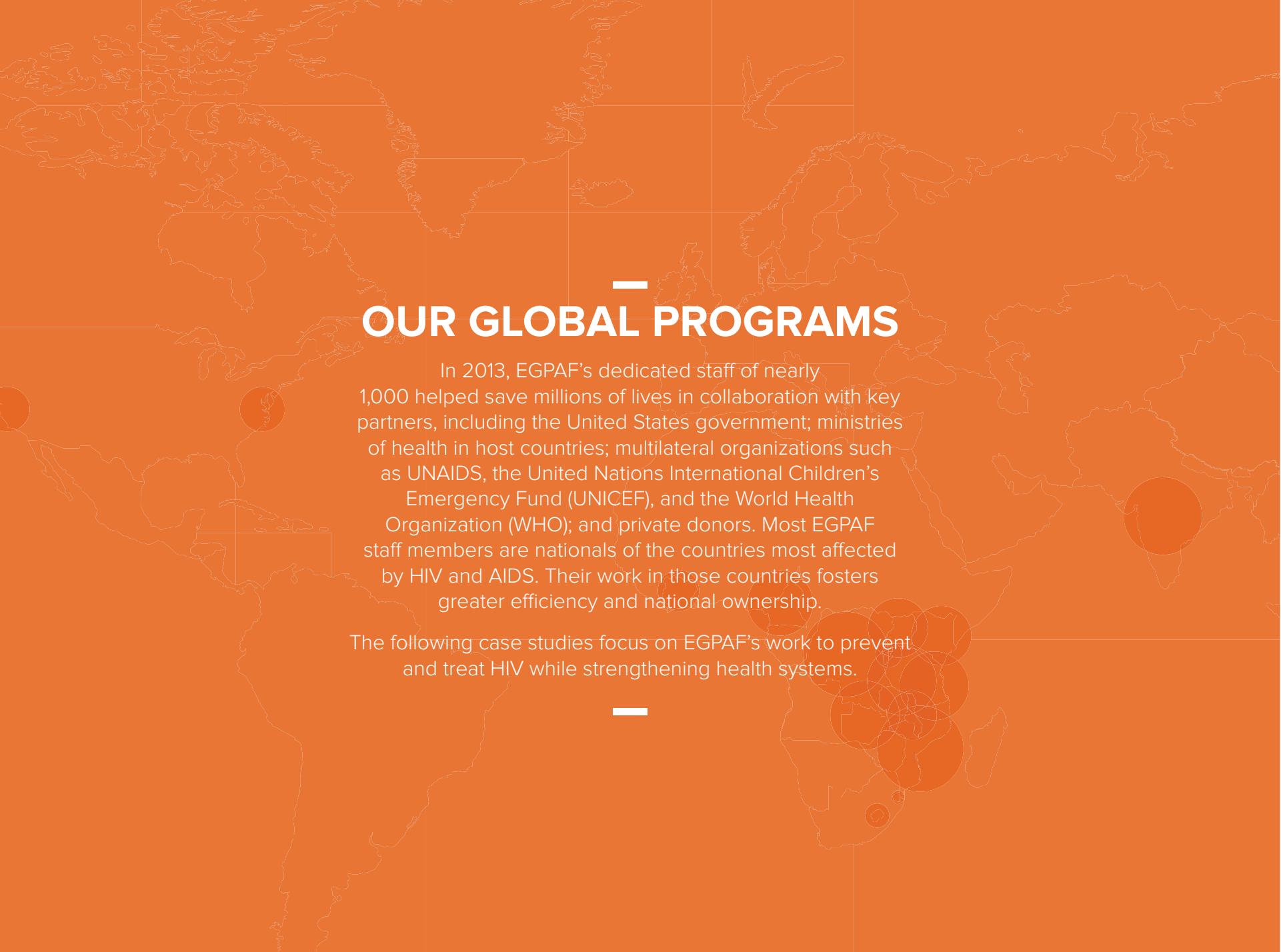
19,000,000

women with services to prevent
transmission of HIV to their babies

has enrolled

2,200,000

individuals, including 200,000
children, in care and treatment
programs



OUR GLOBAL PROGRAMS

In 2013, EGPAF's dedicated staff of nearly 1,000 helped save millions of lives in collaboration with key partners, including the United States government; ministries of health in host countries; multilateral organizations such as UNAIDS, the United Nations International Children's Emergency Fund (UNICEF), and the World Health Organization (WHO); and private donors. Most EGPAF staff members are nationals of the countries most affected by HIV and AIDS. Their work in those countries fosters greater efficiency and national ownership.

The following case studies focus on EGPAF's work to prevent and treat HIV while strengthening health systems.



LIFELONG TREATMENT GIVES LIFELONG HOPE TO FAMILIES IN LESOTHO

Nteboheleng lives in a cement-block house in Mafeteng, Lesotho. A soft-spoken woman with a brilliant smile, Nteboheleng works as a quality control officer at a local textile factory. She is studying part-time and hopes to get a higher-paying job eventually.

Five months into her pregnancy, Nteboheleng went for a prenatal visit at the maternal and child health clinic at Mafeteng Hospital and received an HIV test.

The bad news is that Nteboheleng tested positive for HIV. The good news is that she was initiated onto antiretroviral treatment (ART) that will protect her and her unborn child through pregnancy, childbirth, breastfeeding, and beyond.

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EGPAF has staff in the field, to fill the gaps.”

Appolinaire Tiam, M.D., EGPAF-Lesotho's country director

“I am now okay with my status,” says Nteboheleng. “I thought when I learned I was HIV-positive that I was going to get sick. But I am now stronger than before. Getting into treatment before I got sick ... I really appreciate that.”

In April 2013, the Lesotho Ministry of Health, with assistance from EGPAF and other partners, adopted a new set of World Health Organization (WHO) guidelines for treatment of pregnant women living with HIV. The revised guidelines, known as Option B+, are designed to optimize prevention of mother-to-child transmission (PMTCT) of HIV. They recommend that pregnant women and nursing mothers who test HIV-positive be enrolled immediately onto ART and remain on treatment for life.

“Option B+ optimizes the mother’s health while protecting the baby,” says EGPAF-Lesotho Country Director Appolinaire Tiam, M.D. “I love it. The focus is no longer only on the baby; the focus is also on the mother.”

Lesotho is only the second country—after Malawi—to implement Option B+ nationwide all at once, a daunting task in a resource-limited country with difficult terrain. Dr. Tiam explains that unlike some other countries that have struggled in their attempts to roll out Option B+, Lesotho did extensive preparation to ensure a successful transition.

As the co-chair of Lesotho’s PMTCT technical working group, EGPAF has played a large role in the transition, providing technical assistance to create the new guidelines, translating those guidelines into training materials, and rolling out the program at health facilities nationwide.

“EGPAF also has staff in the field to fill the gap in terms of human resources,” says Dr. Tiam. “Integrated PMTCT and MCH nurses are giving site-level mentorship at health facilities around the country and supporting Ministry of Health teams.”

“At the clinic they take care of us,” says Nteboheleng. “They treat us as their families. Since I’ve learned my status I am very, very happy, and I am also talking to other women about learning their status. To be HIV-positive is not what we think.”

Since 2004, EGPAF has worked in partnership with Lesotho’s Ministry of Health, district health teams, health facilities, and community leaders. To help Lesotho scale up lifelong treatment for pregnant women living with HIV—known as Option B+—EGPAF has strengthened the Lesotho health system through targeted technical and operational assistance. With the Lesotho Ministry of Health, EGPAF is helping to integrate HIV/AIDS services within broader maternal, newborn, and child health services at every health facility in the country.

A NEW GENERATION OF HEALTH WORKERS PREPARES TO EXPAND HEALTH CARE IN RURAL MALAWI

Charity Mpokosa is a young woman from rural Malawi who has come to the Kamuzu College of Nursing in the capital, Lilongwe, with the ambition of becoming a nurse midwife. In her home community, most of the people are subsistence farmers with little access to health services.

"My community's health center lacks health workers, and it is a huge problem, especially for women and children who seek out its services," says Charity.



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My community's health center lacks health workers, and it is a huge problem, especially for women and children who seek out its services. I am very happy that I will be able to assist people in my community after I am done with my studies.”

Charity Mpokosa, EGPAF scholarship recipient, Malawi

As a recipient of a new scholarship program administered by EGPAF, within three years Charity will be joining other newly credentialed health technicians in providing health care in remote areas of her district.

“In rural areas in particular, there are simply not enough frontline health care workers available to provide adequate HIV services,” said Nicole Buono, the country director of EGPAF-Malawi. “EGPAF is thrilled to help address this serious gap in human resources for health through this new program.”

Working in close collaboration with Malawi’s Ministry of Health, EGPAF is providing scholarships for 49 nurse midwife technicians and 21 medical assistants. The participants have been chosen from regions near health centers that lack trained staff.

After graduating, the newly trained health care workers are committed to serving in their remote communities for a minimum of five years. In addition to increasing the total number of health care workers in Malawi, this program will improve staff retention at rural and difficult-to-staff health centers.

“I am very happy that I will be able to assist people in my community after I am done with my studies,” says Charity.

Since 2001, EGPAF has worked with the Malawi Ministry of Health and other local partners to provide services to help women living with HIV prevent transmission of the virus to their babies. EGPAF's work includes district-level health system strengthening and capacity-building of community organizations.



DISPENSARIES SERVE AS COMPREHENSIVE FAMILY CLINICS IN KENYA

Growing up in the county of Homa Bay, Kenya, Caroline Atieno watched the AIDS epidemic burn through the coastal towns and villages around Lake Victoria. Just a decade ago, more than one-third of the people living in Homa Bay were infected with HIV. As recently as five years ago, Homa Bay County had plenty of work for carpenters, who were building nearly 90 coffins each week for those who had died of AIDS-related illnesses. At least 25 of the wooden boxes were for infants.

"I decided to become a nurse when I realized how much suffering was surrounding me," says Atieno, "especially among individuals and families dealing with HIV."

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I decided to become a nurse when I realized how much suffering was surrounding me, especially among individuals and families dealing with HIV.”

Caroline Atieno, RN, Ngegu, Kenya

Atieno was working as a nurse at the Homa Bay District Hospital in 2008, when the Kenyan Ministry of Health began managing the Ngegu Dispensary and transferred her to the facility as the nursing officer head. Two years later, the Elizabeth Glaser Pediatric AIDS Foundation (EGPAF) began supporting the work of Atieno and her two nurses.

In Kenya, dispensaries are more than distribution points for medicine; they are often the only health facility for rural families. Through the work of a handful of health workers, a dispensary delivers basic care, including immunization, first aid, and management of common illnesses.

Until four years ago, the Ngegu Dispensary could only provide testing and counseling when it came to HIV. Women who tested positive were sent to other health care centers, sometimes hours away by bus.

But through EGPAF's Pamoja project, Caroline's passion has transformed the dispensary into a full-service facility with a holistic, family-focused approach to HIV—providing HIV care and treatment and services for the prevention of mother-to-child transmission (PMTCT) of HIV. The facility also provides male circumcision, child health services, and basic laboratory services.

Through integrated services, the dispensary can provide care to more people, which means testing more people for HIV, and enrolling more women in PMTCT. This approach is working. It is now rare that an HIV-positive woman who has come to the dispensary delivers a child infected with the virus.

Atieno sees as many as 100 patients a day, which is a big change from the early days when she would see a dozen. When asked how often she leaves at 5 p.m., Atieno laughs and says that she works until the queue has cleared, which might be quite late.

Five years ago, carpenters around Homa Bay put in long hours to keep up with the demand fueled by HIV. Now Atieno and her staff are putting in long hours to give those carpenters a rest.

The Elizabeth Glaser Pediatric AIDS Foundation began working in Kenya in 2000 as a small, privately funded PMTCT initiative and has since grown into one of the largest HIV prevention, care, and treatment organizations in the country. EGPAF is a key partner of Kenya's Ministry of Public Health and Sanitation and the Ministry of Medical Services.

SCIENTIFIC RESEARCH

Since its inception, EGPAF has demonstrated global leadership in pediatric AIDS research. We support innovative projects, collaborate with the brightest minds, and bridge gaps within the medical and research communities—to ensure that children, mothers, and families in the areas of the world hardest hit by HIV are served with the best medical information and practices.

In the United States and other countries with strong health systems, there is a common misconception that pediatric AIDS is an issue of the past. This belief is bolstered by the success of research funded by the Elizabeth Glaser Pediatric AIDS Foundation.

Today fewer than 200 infants in the United States are infected with HIV each year.

But with nearly 700 children newly infected with HIV each day across the globe, research is as important today as it was when EGPAF was founded 25 years ago. There is still no cure for HIV, so research on finding a cure remains a high priority. Finding the best treatments for children in low-resource locations is another top priority.

EGPAF-supported research around the world seeks to improve the prevention, care, and treatment of pediatric HIV infection; identify better technologies and interventions; train international research leaders to respond to the virus in children; and pursue the development of a pediatric HIV vaccine.

Because of our work in thousands of health care sites, we are able to offer research-based innovations to the families that need them by influencing local policy and practices.

During 2013, EGPAF led 41 active research projects.

RESEARCH HIGHLIGHTS

THE PEDIATRIC CURE CONSORTIUM

In 2013, EGPAF established the Pediatric Cure Consortium to focus the research agenda on children and to drive progress to find a cure. The Consortium, led by EGPAF staff and an International Pediatric Cure Consortium Advisory Board of scientists, seeks to enhance scientific collaboration to determine research priorities and to garner resources for the cure of HIV infection in children. Through this forum, EGPAF will provide seed funding for the most promising ideas, support think tanks, and ensure the sharing of key data and research results.

RESEARCH FOR A LONG LIFE: THE KABEHO STUDY IN RWANDA

Vincent Iyamuremye, a research study nurse at the Kimisagara Health Center in Kigali, Rwanda, pokes his head out of his office into the hall. A half-dozen colorfully dressed mothers and their babies wait on wooden benches. Vincent waves one woman in. She sits down, baby squirming in her lap. The woman is one of 104 mothers he sees, the most of any health center involved in the EGPAF research project called the Kabeho Study.



“

The findings from this study are going to help us understand what is happening in terms of feeding the babies and anything we can do to ascertain the needs of babies exposed to HIV. Many, many people are watching this study.”

Jeanine Chondo, M.D., deputy dean of Rwanda's School of Public Health, Kigali, Rwanda

In the local language of Kinyarwanda, Kabeho is a word for wishing someone a long life. The Kabeho Study is following 608 HIV-positive mother-baby pairs in Rwanda to examine breastfeeding practices, HIV treatment adherence, nutrition, and the HIV-free survival rates of the children. Researchers are examining the outcomes of the HIV programs and policies that EGPAF has helped establish since it began working in Rwanda in 2001.

“What did you feed your baby in the last 24 hours?” Iyamuremye amiably asks the mother. He holds up a clear baby bottle with markings on it. The mother points to a mark near the top, and Vincent writes in the mother’s binder. The questions and answers about the baby’s diet go on for about 30 minutes.

This 24-hour food recall is an important component of the Kabeho study because collecting accurate feeding data is essential to understanding the role of nutrition in preventing mother-to-child transmission of HIV. The combination of a good diet and HIV medication could reduce the chances that HIV-exposed children will contract the virus.

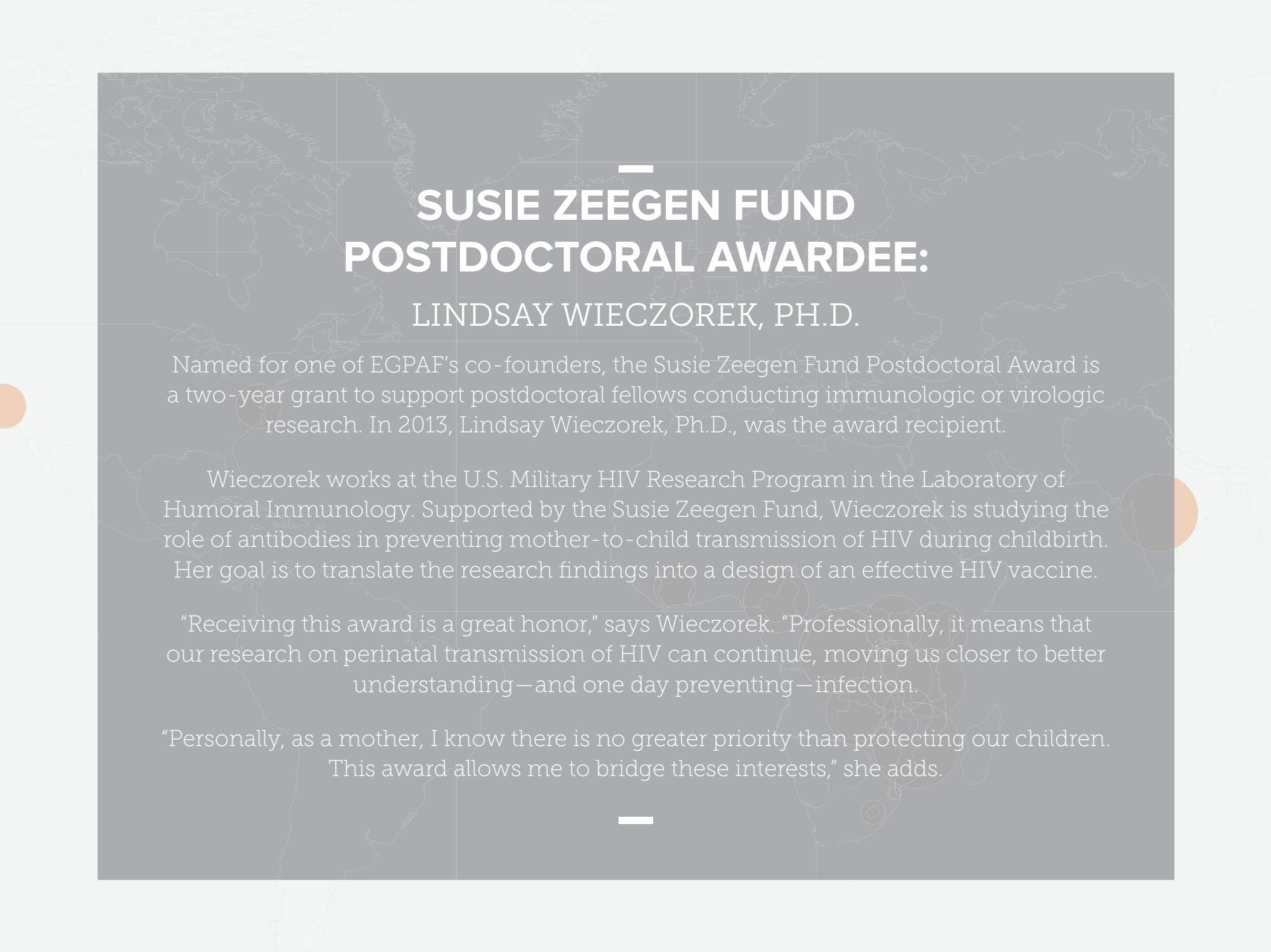
As the nurses collect information and input it into electronic tablets, Dieudonne Ndatimana sits in a sparse office in Kigali downloading, compiling, and evaluating all that information. Ndatimana is the data manager on the Kabeho Study, and he’s a fan of clean data, meaning that the information collected by the study nurses is valid and accurate.

Since the Kabeho study tracks mothers and babies through the children’s first 18 months of life, results won’t be ready until December 2015, published shortly thereafter. Ndatimana and the study nurses and even the mothers are excited to find out the results.

“The women, they have the feeling they’re providing information that would help lead to elimination of HIV,” said Juliette Mukayinga, a research study nurse at the Remera Health Center. “They usually say, ‘Even if this might not be very helpful to our current babies, but at least it’s for those who will be born later and have a great chance of being negative.’”

Studies like this directly support EGPAF’s health-system-strengthening efforts. For instance, the findings from the Kabeho study will be used to inform the Rwandan implementation of lifelong treatment (Option B+). The protocols, data collection tools, standard operating procedures, and other tools can also be adapted to other contexts in Rwanda and other countries in sub-Saharan Africa.

The Kabeho Study is funded through the U.S. Agency for International Development (USAID) and the U.S. President’s Emergency Plan for AIDS Relief (PEPFAR).



SUSIE ZEEGEN FUND POSTDOCTORAL AWARDEE: LINDSAY WIECZOREK, PH.D.

Named for one of EGPAF's co-founders, the Susie Zeegen Fund Postdoctoral Award is a two-year grant to support postdoctoral fellows conducting immunologic or virologic research. In 2013, Lindsay Wieczorek, Ph.D., was the award recipient.

Wieczorek works at the U.S. Military HIV Research Program in the Laboratory of Humoral Immunology. Supported by the Susie Zeegen Fund, Wieczorek is studying the role of antibodies in preventing mother-to-child transmission of HIV during childbirth. Her goal is to translate the research findings into a design of an effective HIV vaccine.

"Receiving this award is a great honor," says Wieczorek. "Professionally, it means that our research on perinatal transmission of HIV can continue, moving us closer to better understanding—and one day preventing—infestation."

"Personally, as a mother, I know there is no greater priority than protecting our children. This award allows me to bridge these interests," she adds.



PUBLIC POLICY AND ADVOCACY

When Elizabeth Glaser discovered that the medicines prolonging her own life were unavailable to her young daughter, Ariel, because they had not yet been tested on children, she became one of the first persons to champion the needs of children living with HIV. Building on Elizabeth's legacy, EGPAF's public policy and advocacy team works with policymakers around the world to continue the work she started, advocating for the best public policies for children, women, and families infected with and affected by HIV and AIDS.

Today, EGPAF works with a variety of key stakeholders to make pediatric HIV/AIDS a priority in the global health agenda, with a particular focus on prevention of mother-to-child transmission of HIV (PMTCT) and pediatric care and treatment issues. In creating the most advantageous political and social environment for support of EGPAF's priorities, over time the team has developed multiple layers of engagement in the United States, in Africa, and in Europe. Building on our successful U.S.-based advocacy work, the team now works with regional African entities and coalitions—such as the African Union and the Organization of African First Ladies Against HIV/AIDS—to prioritize elimination of pediatric HIV and is pursuing efforts in Europe to ensure that United Nations commitments to children are met.

The following represent just some of the ways that EGPAF championed the rights of children, mothers, and families in 2013.

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Becoming active in the fight against AIDS made me realize I'm not a victim. I have power and I can work for change.”

Elizabeth Glaser (1947–1994)

UNITED STATES

Reauthorization of PEPFAR Legislation

EGPAF took a leadership role in ushering the PEPFAR Stewardship and Oversight Act of 2013—the legislation authorizing the U.S. President’s Emergency Plan for AIDS Relief (PEPFAR)—through both the U.S. House and the Senate. The team worked to influence Congress’s vision for the next five years of the PEPFAR program and ensure that pediatric HIV/AIDS is prioritized. The final bill included strong language in support of PMTCT programs, as well as specific treatment targets for children and data reporting against those targets.

U.S. Global Health Funding

EGPAF’s public policy and advocacy team continued its longtime work with Congress to ensure that funding levels for global HIV/AIDS programs and other critical domestic and global health programs are maintained and strengthened so that they achieve their programmatic goals. Final global health legislation in 2013 provided a small increase to the bulk of global HIV/AIDS funding—a solid signal of continued support for global HIV/AIDS programs, since almost every other federal program in the legislation received no increase or was cut.

GLOBAL ADVOCACY

In 2013, EGPAF’s Nairobi-based public policy staff pushed for the prioritization of children in select global health decisions and to champion the inclusion of PMTCT and pediatric treatment within African Union commitments to maternal, newborn, and child health and domestic health care spending.

Key Consultations and Interventions: Africa

EGPAF’s public policy team in Nairobi took part in a number of key consultations and interventions to advocate on behalf of children. The team worked with the African Union to host a partner consultation on the Africa Common Position, which identifies Africa’s priorities and health agenda after 2015, when the Millennium Development Goals expire. In a related effort, the team provided technical support to the Abuja Heads of State Special Summit, at which nongovernmental organizations and civil society provided input into the African Union’s positions on the health components of the post-2015 development agenda. EGPAF language on elimination of mother-to-child transmission of pediatric HIV was included in the final Abuja Declaration 2013, which will help to shape how Africa addresses pediatric HIV over the next 15 years.

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Today I can dream about things much bigger than my HIV status, but I worry for those other children—those that don't have treatment—and I will continue to fight for them until they can dream.”

EGPAF Ambassador Josephine Nabukenya speaking at a UN Human Rights Council meeting

GENEVA

Maximizing our presence in Europe, EGPAF's Geneva-based public policy staff works within the UN child rights framework to hold country governments accountable to their commitments to child's health rights, including HIV/AIDS.

KEY CONSULTATIONS AND INTERVENTIONS: UNITED NATIONS

UN Committee on the Rights of the Child

In January 2013, EGPAF President Charles Lyons briefed a closed session of the full UN Committee on the Rights of the Child to ensure that the committee consider the needs of children living with HIV from a “right-to-health” perspective. Lyons urged the committee to question governments under review about how they are working to ensure the rights of children to have access to affordable and effective HIV medication and treatment.

UN Human Rights Council

In advance of the Annual Day on the Rights of the Child, and in collaboration with Caritas Internationalis and the Ecumenical Advocacy Alliance, EGPAF held a roundtable discussion at a UN Human Rights Council meeting on March 6. EGPAF Ambassador Josephine Nabukenya joined panelists from UNAIDS, the Rwandan government, the Office of the U.S. Global AIDS Coordinator, and the Catholic HIV/AIDS Network. They shared their perspectives on the needs and challenges facing children in accessing HIV treatment. In her remarks, Nabukenya made an impassioned plea for the international community to take note of the disparities in access by children compared to adults.

Committee on the Elimination of All Forms of Discrimination Against Women

In June 2013, EGPAF submitted a report to the Committee on the Elimination of All Forms of Discrimination Against Women (CEDAW) regarding the situation of women living in the Democratic Republic of the Congo, noting that there are limited services available to women for preventing mother-to-child transmission of HIV, and that sexual and gender-based violence is one of the greatest threats to women's health in the country.



photo: EGPAF

THAT'S WHEN I STOPPED BEING AFRAID TO SPEAK OUT

Josephine Nabukenya was born with HIV outside of Kampala, Uganda. However, Josephine was not tested for HIV, and no one in her family was aware that she, her sisters, and her parents were all living with the virus. By the age of 12, Josephine was an orphan, living with her aunt. That's when she found out.

"It felt like the whole world came to a halt," says Josephine. Suddenly people started treating her differently: "My aunt separated my plate and cup from the rest of the family and I was not allowed to use the cutlery. I wasn't even allowed into my aunt's bedroom anymore."

“

Thanks to the Ariel Club, I know I am somebody.

My advice to children who are going through similar situations is to be strong. Don't lose heart. Take your medicines on time and trust in God.”

EGPAF Ambassador Josephine Nabukenya

Fortunately, Josephine was directed to an Ariel Club, a special support group created by EGPAF for children and adolescents living with HIV.

“For the first time in a long while, I had hope that I could live with HIV. In the Ariel Club we played games, wrote, sang, and read. We also received a transport allowance to pick up our medicine from the hospital.

“My involvement helped me to learn to accept my status and to talk openly about living with HIV. After a year with the club, I surprised myself on World AIDS Day and stood up to tell my personal story to hundreds of people. After my speech, I received thunderous applause and many people, including children, thanked me for giving them hope and encouragement. That's when I stopped being afraid to speak out.”

Josephine's determination to follow her dreams, despite her HIV status, eventually led her to Makerere University in Kampala, where she is studying journalism.

Josephine is also an EGPAF ambassador. Whether working to educate her community, provide peer counseling, advocate to members of the U.S. Congress, or speak to the United Nations, Josephine speaks from the heart and from her own experience.

Along with others in EGPAF's ambassador program, Josephine is a reminder of the impact one person can make. EGPAF ambassadors bravely share their stories, and by so doing educate and advocate for the millions of children infected with and affected by HIV.

AFFILIATES

EGPAF has led the way in efforts to build local capacity for HIV service delivery, with the ultimate goal of transitioning programs to national governments and local organizations.

As part of this commitment, EGPAF has transitioned some of its programs to three independent, nongovernmental affiliates:

// **Fondation Ariel Glaser pour la Lutte contre le Sida Pédiatrique (Côte d'Ivoire) //**

// **Fundação Ariel Glaser Contra o SIDA Pediátric (Mozambique) //**

// **Ariel Glaser Pediatric AIDS Healthcare Initiative (Tanzania) //**

EGPAF and these affiliates share a mutual mission of eliminating pediatric HIV/AIDS, and each organization works to achieve this mission in locally relevant ways. EGPAF affiliates—which are governed by independent national boards of directors—share the EGPAF brand and logo.

In 2013 the EGPAF affiliates celebrated their third year. Since they began operations, the three organizations have collectively supported more than 650 health facilities, have tested nearly 900,000 women for HIV, and have started more than 180,000 clients on HIV treatment.

We recognize the interdependence between our organization and our partners and share knowledge and best practices to increase the sustainability of programs and organizations so that together we will soon see an HIV-free generation.

“

We have a unique understanding of the reality of HIV/AIDS in our countries. By tackling the AIDS epidemic locally, we can lead the way to global change.”

Paula Vaz, M.D., Ph.D., executive director of Fundação Ariel Glaser Contra o SIDA Pediátrico, Mozambique

HOMEGROWN CARE AND TREATMENT IN TANZANIA

Shinyanga, Tanzania, is a small town 100 miles south of Lake Victoria. The HIV care and treatment center at the regional hospital is a prime example of EGPAF's progress toward local ownership. Through funding from the U.S. Centers for Disease Control and Prevention (CDC), EGPAF helped launch the facility in 2005. EGPAF continued to provide support until 2011, when support was transitioned to the Tanzania affiliate organization, the Ariel Glaser Pediatric AIDS Healthcare Initiative (AGPAHI).

Outside the center, children climb on playground equipment. Inside, skilled health workers treat their clients as they test for HIV and administer a program for the prevention of mother-to-child transmission of HIV (PMTCT). This program is supported under the LIFE award from the U.S. Agency for International Development (USAID). EGPAF is the recipient of the award and AGPAHI is a subrecipient.

The health workers at the Shinyanga care and treatment clinic do not only provide PMTCT services. They also deliver babies, provide prenatal and postnatal care, test and treat for cervical cancer, screen for tuberculosis, provide counseling, and enroll children living with HIV into a care and treatment program.

In short, they integrate services so that families can take care of many of their health needs in one place.

Through the work of AGPAHI, as many as 250 people are served by the clinic each day. Ten thousand clients have received HIV care since AGPAHI took ownership of this project, and more than 5,500 men, women, and children in the surrounding community are currently enrolled in antiretroviral treatment so that they can maintain good health despite living with HIV.

Around the world, EGPAF supports frontline health workers at more than 7,000 health facilities in 14 countries, working with ministries of health, nongovernmental organizations, and affiliates like AGPAHI.

— **EVENTS**

In 2013, the Elizabeth Glaser Pediatric AIDS Foundation held two high-profile events to gather compassionate donors and raise much-needed funds for our work.



A TIME FOR HEROES



“

**Achieving an AIDS-free generation is now our primary goal,
one that we know we can accomplish. There can be no excuses:
we have proven the science; we have proven the results; now we
need to make this vision a reality.”**

Jake Glaser

More than 700 parents and children gathered on June 2, 2013, at Century Park in Los Angeles, Calif., for A Time for Heroes. Teaming up with the Magic Johnson Foundation, the annual family picnic raised more than \$600,000 in support of ending pediatric HIV and AIDS. EGPAF called on those in attendance and supporters around the world to become heroes for the mothers and children living with HIV.

Families enjoyed food, music, and games alongside stars from music, movies, and television. Celebrity heroes in attendance included Miss Universe, Olivia Culpo; recording artists Gwen Stefani, Gavin Rossdale, Jamar Rogers, and Jessica Sanchez; and actors Olivia Munn, Holly Robinson Peete, Joe Manganiello, Vanessa Lengies, Greer Grammer, Garrett Clayton, Mollee Gray, Grace Phipps, Maia Mitchell, John DeLuca, and Crissty Fit.

The event also included remarks by Elizabeth Glaser’s son, Jake Glaser. Fellow EGPAF ambassadors Martha Sichone-Cameron and Jamie Gentile were also on hand to provide encouragement about living positively with HIV. Their participation served as a reminder of EGPAF’s history and of the global impact that the organization has had on the lives of children and families.

Since its launch in 1990, A Time for Heroes has raised more than \$35 million toward ending AIDS in children.



GLOBAL IMPACT AWARD



photos: Getty Images Entertainment/Cindy Ord

“

Elizabeth was a loving mother; a devoted friend; and an eloquent, passionate, unstoppable woman. [She] turned her personal loss into a public campaign on behalf of children with HIV/AIDS, founding this Foundation and inspiring so many of us to join the fight.”

Sec. Hillary Rodham Clinton

On Dec. 3, 2013, EGPAF honored former Secretary of State and U.S. Senator Hillary Rodham Clinton with a Global Impact Award for her leadership in the fight against HIV and AIDS.

At the New York City event, Elizabeth’s son, Jake, spoke onstage about his mother and the incredible legacy of her foundation.

“Achieving an AIDS-free generation is now our primary goal, one that we know we can accomplish. There can be no excuses: we have proven the science; we have proven the results; now we need to make this vision a reality,” said Jake Glaser.

EGPAF co-founder Susan DeLaurentis introduced a video detailing the special relationship between Sec. Clinton and Elizabeth Glaser, titled *Two Women, Two Mothers, Two Leaders*. Journalist Diane Sawyer presented Sec. Clinton with the Global Impact Award, to honor her unique, unwavering, and unparalleled leadership on behalf of women and children across the globe.

During Sec. Clinton’s speech, she recalled her friendship with Elizabeth Glaser and her tenacity in the fight to end pediatric HIV/AIDS.

“Elizabeth was a loving mother; a devoted friend; and an eloquent, passionate, unstoppable woman,” said Sec. Clinton. She “turned her personal loss into a public campaign on behalf of children with HIV/AIDS, founding this Foundation and inspiring so many of us to join the fight.”

Sec. Clinton continued, saying it is a “personal privilege to join you in recognizing the 25th anniversary of this organization... In the past ten years, a quarter million babies have been born without HIV because of your work. So there is a lot to celebrate.”



OUR GENEROUS DONORS

In 2013, committed individuals, corporations, foundations, and governmental donors contributed more than \$120 million toward EGPAF's programs, research, and advocacy.

Meet some of the committed partners who helped us strengthen health systems so that millions of mothers, children, and families will have access to services for HIV prevention and treatment.

“

We all need to hope that our dreams can come true.

**I challenge you to make it happen, because all our lives ...
depend on it.”**

Elizabeth Glaser (1947–1994)

PEDIATRIC AIDS COALITION

Founded in 2002, Dance Marathon at UCLA began as a single event. But the students kept dancing and raising money, turning the event into a year-long campus commitment known as the Pediatric AIDS Coalition (PAC). Through PAC, Dance Marathon at UCLA has grown from 20 students working together to raise \$27,000 to a 125-member committee planning an event that raised more than \$475,000 in 2013. In its 12-year history, PAC has raised \$3.5 million, with EGPAF as the primary beneficiary. Today, Dance Marathon at UCLA is one of several annual UP 4 THE FIGHT dance marathons held at colleges and universities to raise awareness and funds for EGPAF throughout the school year.

RITA BRAVER AND BOB BARNETT

Rita Braver and Bob Barnett have supported EGPAF since its very first fundraising gala, A Night to Unite, in Washington, D.C., 25 years ago. The mission of EGPAF is incredibly personal to them. They both attended the University of Wisconsin, Madison, with Elizabeth, and she stayed with them when she traveled to Washington, D.C., in the late 1980s to lobby the National Institutes of Health and members of Congress for funds for pediatric HIV/AIDS. Rita and Bob continue to generously support EGPAF and are proud of the evolution of EGPAF's work and the number of mothers, children, and families it has served.

GREGG AND DEBRA OPPENHEIMER

Gregg and Debbie Oppenheimer are longtime dedicated supporters of EGPAF's work to end AIDS in children. One example of this dedication is their selection of EGPAF as the beneficiary of proceeds from several *I Love Lucy*-related items, including the wonderful memoir *Laughs, Luck...and Lucy: How I Came to Create the Most Popular Sitcom of All Time*, written by Gregg with his father, creator of the classic sitcom. EGPAF is so appreciative of Gregg and Debbie's many years of continued support. They are a remarkable testament to the difference that one family can make to help families worldwide.

We are grateful to everyone who shares our commitment to achieving an AIDS-free generation. Even a small contribution can save lives by paying for an HIV test kit or other intervention services.

Individuals, businesses, and others can support the work of EGPAF by visiting www.pedaids.org and making a contribution.

To learn more about opportunities to make an impact on EGPAF's work, including via financial and estate planning, please contact donate@pedaids.org.

GREATER THAN \$1 MILLION

The Children's Investment Fund Foundation
Department of Foreign Affairs,
Trade and Development Canada
Swedish International Development
Cooperation Agency
United States Agency
for International Development
United States Centers for Disease
Control and Prevention

\$100,000—\$999,999

Absolute Return for Kids
Anonymous
Willow Bay and Robert Iger
Bill & Melinda Gates Foundation
Charities Aid Foundation
Communications Workers of America
Conrad N. Hilton Foundation
Department for International Development
Drs. Susan D. Desmond-Hellmann
and Nicholas S. Hellmann
Disney Worldwide Services, Inc.
Gilead Sciences, Inc.
Global Fund to Fight AIDS,
Tuberculosis and Malaria
Jewelers for Children
Johnson & Johnson
Oak Foundation
Stavros Niarchos Foundation
ViiV Healthcare

\$10,000—\$99,999

Accenture Ltd.
The Apatow-Mann Family Foundation
Adam and Abbe Aron
Mark and Deborah Attanasio
Bain and Company, Inc.

Bill and Susan Belfiore
Dawn M. Berson
Bridgestone Americas Trust Fund
Brotman Foundation of California
Cayman National Bank
CBS Television Network
Cole-Crone Family Foundation
Jane Chung and Robert M. Nagle
The Deborah J. Leschin Trust
Mary B. Dunn
Edward D. and Anna Mitchell Family Foundation
Entrust Capital
David I. and Marianna J. Fisher
Calista Flockhart and Harrison L. Ford
Fortress Investment Group LLC
Estate of Beatriz Foster
Fox Entertainment Group
Jennifer Fox and Thomas Murray
Girard-Perregaux
Goodwin Family Memorial Trust
Google
Hackberry Endowment Partners
Russ and Mary Beth Hagey
Independent Charities of America
J. Walter Thompson USA
James & Deborah Burrows Foundation
John W. Carson Foundation, Inc.
Kadrovač-Duckworth Family Foundation
The Marilyn and Jeffrey Katzenberg Foundation
Louis and Harold Price Foundation
Magic Johnson Foundation, Inc.
The McGrath Abrams Family Foundation
The MCJ Amelior Foundation
John and Lizanne Megrue, Jr.
Moss Foundation
Peter and Susan Murley
National Basketball Association
Nordstrom, Inc.
The Randi and Clifford Lane Foundation
Richard A. Busemeyer Atheist Foundation

Shout! Factory, LLC
Justin and Nancy Slatky
Steven & Heather Mnuchin Foundation
Sunshine on You Foundation
United Nations Children's Fund (UNICEF)
Viacom
William Gruen Living Trust
George W. and Patricia A. Wellde
Richard and Noelle Wolf
World Health Organization
The Wunderkinder Foundation
YourCause, LLC

\$1,000—\$9,999

Abbott Fund
The Ahmanson Foundation
Alpha Lambda Sigma
The Anne Claire Lester Foundation, Inc.
Angry Bee Juice
Ares Management
Phillip D. and Maria L. Baker
Zlata Baldekova
Bank of America Foundation Matching Gift Program
Samantha S. Bass
The Bill Muster Foundation
BLH Technologies, Inc
Blue State Digital
Bridgewater Associates, LP
Gary D. Brown
Graham Brown
John and Nicole Buono
Michael R. and Pell Burns
The Caldrea Company
Franklin J. Carmel
Kurt Cellar
Richard L. and Carol B. Chadakoff
Kelly Chapman and Ronald M. Meyer
Lori A. Chozen
Cinema Art College Corp.

The Claire and Theodore Morse Foundation
David Clark
The Clinton Family Foundation
Communications Workers of America Local 7777
Communications Workers of America Local 9400
Kathleen Cravero-Kristoffersson
Creative Kids Care, Inc.
Melinda D. Crenshaw
Crystal Family Trust
Samuel D. and Linda K. Dannaway
De La Montanya Winery
Deutsche Bank Americas Foundation
Digital Infuzion, Inc.
Jack A. Drobnick
Barbara J. Easterling
Edison International
The Elizabeth Taylor AIDS Foundation
Elsberg Family Foundation
Jeffrey and Anne Elton
Epic Systems Corporation
David R. Erbe
Robert S. and Jan Feldman
Ferrari Color
Jonathan and Samantha M. Firestone
Thomas M. Fontana
Frances & Benjamin Benenson Foundation
Fundamental Advisors
Greg C. Gaffney
Matthew Garrett
Susan Gilroy
George Lucas Family Foundation
Claire H. Gerhard and Charles J. Lyons
The Gershman Family Foundation
Audrey Gerson
Christopher and Nancy Gibbs
Julie B. Gibbs
Global Impact
Paul Goldenberg
Gordon H. and Karen M. Millner Family Foundation
Michael and Diane Gorfaine

Peryl Gottesman
Brian T. Grazer
Laura Guay and Mike W. O'Hare
Joy K. Hallinan
Catherine Hayden
Susan Irene Hickey
Sarah Hodges
Honeywell International Charity Matching
Doug Horner
Craig M. and Andrea R. Horowitz
Liora Hostyk
Hui Su Clarke
IBM Employee Services Center
Roy Jay
Noelani Jimenez
Darrell and Cynthia R. Johnson
Joseph & Helen Komarek Foundation
Robert Kahn
Arielle Katz
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Faramarz Khaladj
Bradley J. Kiley
Kings Care Foundation
Kingston Technology
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Mary V. Kosters
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Melanie A. Larkins
The Lauder Foundation
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Hal Liebes
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Merck Partnership for Giving
Microsoft Matching Gifts Program
Lavonne L. Michaud and Gregory M. Bloom
George Mihlstet
The Milken Family Foundation
The Mill Foundation, Ltd.
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Daniel G. and Susan M. Murphy
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Eunice Omole
Gregg and Deborah Oppenheimer
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Pacific Hospice
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Stuart M. and Ginger Pape
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Joseph R. and Amy M. Perella
Lisa R. Perry and Richard Cayne
Petchers Foundation
Samantha Porter
Precast Manufacturing Company LLC

Brandy Price
Princeton Area Community Foundation, Inc.
Claudia Pruett
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Stanley E. Schlinger
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Harry B. and Miranda Shapiro
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Matthew and Rachel Marie Sirignano
Smile Brands Inc
Justin B. Smith
Drs. Karen Smith-McCune and Joseph McCune
Smoot Tewes Group
Daniela Spreafico
Sprinkles Cupcakes
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Peter Steinberg
Daniel B. and Lori M. Steuer
Arden C. Strasser
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Timothy L. and Marcia H. Swanson
The Streisand Foundation
Rich Thigpen
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Tobey Foundation
Donald J. Tweedie
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Nancy Vitale
Martha T. Wallau and Alex Lee Wallau III
Christa Waltersdorf

David I. and Annette Mazeau Weil
Irving J. and Gail N. Weintraub
Whitman-Walker Health
Amelia Williamson
Caren R. Wishner
World Bank Community Connections Fund
Walter and Bobbi Zifkin

Alpha Epsilon Phi—
American University Dance Marathon
Baldwin Wallace University Dance Marathon
Boston University Dance Marathon
College of the Holy Cross Dance Marathon
Columbia University Dance Marathon
Hatboro-Horsham School District
Lionsgate Entertainment
Pediatric AIDS Coalition
at University of California Los Angeles
University of California Berkeley Dance Marathon

FUNDRAISING PARTNERS

Alpha Epsilon Phi—
Alpha Mu, University of Maryland
Alpha Epsilon Phi—
Alpha Xi, University of Connecticut
Alpha Epsilon Phi—
Beta Eta, University of California San Diego
Alpha Epsilon Phi—
Beta Theta, Virginia Commonwealth University
Alpha Epsilon Phi—
Beta Zeta, University of Central Florida
Alpha Epsilon Phi—
Epsilon, Tulane University
Alpha Epsilon Phi—
Epsilon Epsilon Chapter
Alpha Epsilon Phi—
Epsilon Phi, University of Iowa
Alpha Epsilon Phi—
Epsilon Theta, American University
Alpha Epsilon Phi—
Kappa, Cornell University
Alpha Epsilon Phi—
Mu, University of Illinois
Alpha Epsilon Phi—
Phi Chi, University of Delaware
Alpha Epsilon Phi—
Phi Mu, Binghamton University
Alpha Epsilon Phi—
Phi Omega, Northeastern University
Alpha Epsilon Phi—
Psi, Washington University
Alpha Epsilon Phi—
Sigma, University of Wisconsin

FINANCIAL OVERVIEW

The Elizabeth Glaser Pediatric AIDS Foundation has a 25-year track record of wisely investing donor resources, from individuals, foundations, corporations, and governments. With a stellar report card from nonprofit oversight agencies including Charity Navigator, the American Institute of Philanthropy, and the Better Business Bureau, we take accountability and stewardship seriously, making funding EGPAF a smart investment.

“

An AIDS-free generation is within our grasp. We aren't only fighting AIDS, we're changing the way the world fights AIDS.”

Charles Lyons, EGPAF president and chief executive officer

In 2013, the Elizabeth Glaser Pediatric AIDS Foundation spent more than \$122 million on our lifesaving programs around the world.

This year, 88 cents of every dollar went directly to HIV prevention, care, and treatment programs, to reach as many children as possible.

EGPAF's affiliate organizations in Côte d'Ivoire, Mozambique, and Tanzania have helped to increase the resources dedicated to HIV prevention, care, and treatment programs in countries with high infection rates. Although not included in EGPAF's audited financial statements, these three organizations—Fondation Ariel Glaser Pour la Lutte Contre le SIDA Pédiatrique (Côte d'Ivoire), Fundação Ariel Glaser Contra o SIDA Pediátrico (Mozambique), and the Ariel Glaser Pediatric AIDS Healthcare Initiative (Tanzania)—together spent approximately \$19.5 million in 2013 on lifesaving programs.

Since its inception, EGPAF has been dedicated to raising funds to prevent new pediatric AIDS infections, bringing hope to children and families living with HIV and AIDS. These revenues represent the contributions of individuals, corporations, foundations, and international organizations—as well as ongoing support from the Centers for Disease Control and Prevention (CDC) and the U.S. Agency for International Development (USAID) through the U.S. President's Emergency Plan for AIDS Relief (PEPFAR).

EGPAF's 2013 financial statements were prepared in accordance with the United States generally accepted accounting principles (U.S. GAAP). The complete audited financial statements for EGPAF may be viewed on our website, www.pedaids.org.

FINANCIAL STATEMENT SUMMARY

AS OF DEC. 31, 2013

STATEMENT OF FINANCIAL POSITION

Assets

Cash and Cash Equivalents	\$11,713,321
Contributions and Other Receivables	7,615,025
Other Assets	3,186,231
Total Assets	\$22,514,577

Liabilities and Net Assets

Total Liabilities	\$15,042,694
Net Assets-Unrestricted	5,783,305
Net Assets-Temporarily Restricted	1,608,036
Net Assets-Permanently Restricted	80,542
Total Ending Net Assets	\$7,471,883
Total Liabilities and Net Assets	\$ 22,514,577

STATEMENT OF ACTIVITIES

Public Support and Revenue

Grants (U.S. government and non-U.S. government)	\$115,370,534
Contributions	3,994,978
Other income	912,905
Total Public Support and Revenue	\$120,278,417

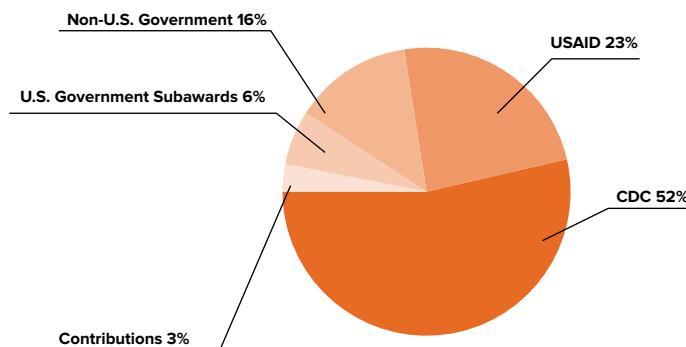
Expenses

Program Services	
Program Implementation	\$102,912,315
Research	\$2,077,817
Communications	\$2,306,842
Public Policy	\$823,608
<i>Program Services Subtotal</i>	<i>\$108,120,582</i>
Management, General, and Administrative	\$10,736,967
New Business Development	\$1,607,953
Fundraising	\$1,886,190
Total Expenses	\$122,351,692

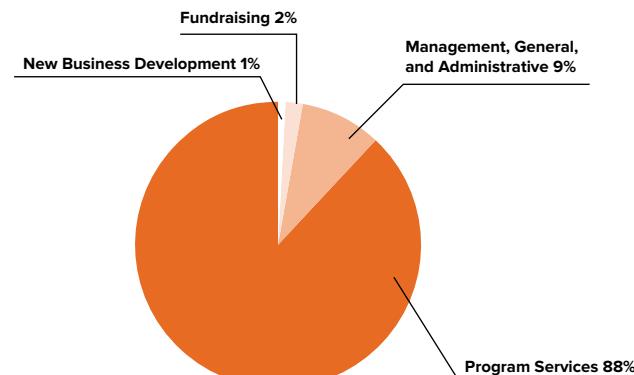
Changes in Net Assets

\$(2,073,275)

2013 REVENUE BY DONOR TYPE



2013 EXPENSES BY ACTIVITY



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AIDS Foundation
Los Angeles, Calif.

Paul Glaser

Honorary Chairman
Actor/Director/Producer
Santa Monica, Calif.

* Board term ended June 2013

** Board term ended November 2013

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Brad Kiley

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Program Implementation

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Vice President, Research

Nicholas Hellmann, M.D.

Executive Vice President,
Medical & Scientific Affairs

Doug Horner

Vice President,
Awards, Compliance
& International Operations

Trish Devine Karlin

Vice President,
Global Business Planning

Richard Marlink, M.D.

Senior Advisor,
Medical & Scientific Affairs

Philip O'Brien

Executive Vice President, Communications, Advocacy & Development

RJ Simonds, M.D.

Vice President,
Program Innovation & Policy

Tami Ward-Dahl, SPHR/GPHR

Vice President,
Human Resources & Administration



**ELIZABETH GLASER
PEDIATRIC AIDS
FOUNDATION**

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Washington, DC 20036

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202-296-9165 // info@pedaids.org

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