



# The Glory and the Power

This article is from our AIDSWatch 2009 primer, which also includes:

[Go Tell It On the Mountain](#): Let's speak our truth together—and rewrite HIV history—at AIDSWatch 2009.

[The Holy Grail](#): What we're asking for on the Hill

[Dear Congress](#): A letter to your representatives in Congress

[Uniting With Might](#): Strategies for an effective Hill visit

[Bearing Witness](#): AIDS advocates share their lobbying stories

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There are two realities when it comes to who has power in DC to make key decisions on HIV/AIDS—appointed and elected federal officials versus the invisible networks of alliances, favors and friends that really make things happen. We would only dare attempt to map the first.

The new Obama administration was still getting settled in as we went to press. Former Senator Tom Daschle was in to head the Department of Health and Human Services—then he was out.

Ambassador Mark Dybul had been asked to stay on as global AIDS coordinator, then Hillary Clinton was confirmed as secretary of state and Dybul (along with other Bush appointees) was asked to resign. Rumors on other power players include Eric Goosby of Pangea Global AIDS Foundation replacing Dybul and New York City health commissioner Thomas Frieden heading the Centers for Disease Control and Prevention (CDC).

Given all that, rather than name names, we created an organizational chart of areas in the federal government with a major role in HIV/AIDS policy. Some are obvious (like the CDC, the FDA and the NIH). Others, less so. (For example, the Health Services Division of the DOJ handles HIV-positive prisoners, and the Public Health Strategic Health Care Group of the VA handles HIV-positive veterans.)

Oh, what a tangled web government weaves. Could this be why we have no national AIDS strategy (yet)? This chart clearly shows why we need a federally coordinated effort to stop AIDS in America.

Click [here](#) to download and view the chart.

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