
Approved on behalf of ACC by the Consultative Committee on Programme and Operational Questions (CCPOQ) at its 17th Session, New York, 20 - 22 September 2000
# Guidance Note for the United Nations Resident Coordinator System: Towards a multi-sectoral response to HIV/AIDS

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Introduction

1. The global HIV/AIDS epidemic is an unprecedented development crisis, no longer confined to certain groups or to particular regions. In most of the world it has become a mainstream concern, affecting individuals of all age-groups and all socio-economic backgrounds. The impact on economic development is becoming increasingly apparent in virtually every social sector, especially in the most seriously affected countries. The response to HIV/AIDS must likewise draw upon every sector.

2. HIV/AIDS is increasingly discussed in high-level international and regional fora on economic, health, security, labour and social issues. Some examples include: the UN Security Council; the annual meeting of the World Bank Development Committee; the World Health Assembly; the International Labour Conference; and regional Summits, such as those of the Organization of African Unity and the Association of South-East Asian Nations.

3. While international support is vital, lowering incidence and mitigating the epidemic’s impact must form part of a nationally driven agenda. Countries that have adopted forward-looking strategies to fight the epidemic are reaping rewards through falling or low/stable HIV infection rates, greater inclusiveness of people affected by HIV or AIDS, and diminished suffering.

4. Recognising the importance of a multi-dimensional effort to fight HIV/AIDS, through a 1994 resolution of the United Nations Economic and Social Council, the Joint United Nations Programme on HIV/AIDS (UNAIDS) was launched in January 1996. The Programme, comprising a Secretariat and seven UN system organizations (UNICEF, UNDP, UNFPA, UNDCP, UNESCO, WHO and the World Bank) seeks to lead, strengthen and support an expanded response to the epidemic in order to prevent the spread of HIV, provide care and support for those infected and affected by the disease, reduce the vulnerability of individuals and communities to HIV/AIDS and alleviate the socio-economic and human impact of the epidemic. The seven Cosponsoring Organizations offer countries a broad range of experience, efforts and resources of relevance to the fight against the epidemic (see Annex I). Cooperation agreements have also been signed between the UNAIDS Secretariat and other UN and non-UN bodies to intensify collaborative efforts in other areas of expertise. These include FAO, UNHCR, ILO, IOM, OAU, Rotary and Caritas Internationalis.

5. At the country level, UNAIDS operates through Theme Groups on HIV/AIDS established to lead an expanded multisectoral response to the HIV/AIDS epidemic, with responsibilities for advocacy, joint policy development and strategic decision-making. The Theme Group has become a key mechanism for joint UN action and coordination of AIDS-related work at the national level. Although a Theme Group Chair guides the United Nations response to HIV/AIDS in the country concerned, ultimately it is the Resident Coordinator who is responsible for the effective functioning of a Theme Group.

6. This Guidance Note to Resident Coordinators and UN Country Teams is intended to strengthen a coordinated response of the UN System to HIV/AIDS at country level. It needs to be borne in mind, however, that national governments have the ultimate responsibility for coordinating all forms of external assistance, on the basis of national strategies and priorities, for a multisectoral response to the epidemic.
7. The following issues are proposed for consideration by UN Resident Coordinators and UN Country Teams as regards actions on HIV/AIDS at country level.

A. Policy dialogue, advocacy and programmes for a multisectoral response

8. The spread of HIV/AIDS, while an important health concern, presents a wide range of social, economic and development challenges. Strategies should, accordingly, reflect a broad range of parallel actions to reverse the spread of the epidemic.

9. With this in mind, it is recommended to:

- assist Governments in advocating for a multisectoral response to prevent and control the epidemic, and, promote the establishment of a high-level national coordinating authority, supported by technical working groups, as needed;

- work with a variety of development partners and practitioners on HIV/AIDS issues, including: counterpart ministries of UN system organizations (e.g., Health, Education, Information, Planning, Finance, Agriculture, Telecommunications, Trade, Transport, Tourism, Labour, Social Development and Women’s Affairs), parliamentarians, bilateral partners, nongovernmental organizations, trade unions, business groups, confederations of industry, religious groups, schools, drug control entities, communities, self-help groups and associations of people living with HIV/AIDS;

- decentralize actions from the national level to the district and community levels by ensuring the involvement of local authorities and community groups in programme development; and

- strengthen the promotion and respect of human rights (individual civil/political rights and economic/social rights) within the context of HIV/AIDS, and in particular, women’s and children’s rights; this should include advocacy against stigmatization, denial and discrimination against people living with HIV/AIDS.

B. UN Theme Groups on HIV/AIDS

10. The Theme Group’s integrated workplan process should reflect the priorities, goals and strategies of the national strategic plan. Where this does not exist, the Theme Group’s priority is to assist the national authorities to develop one. The 1999 ECOSOC resolution (E/1999/INF/2/Add.2) requested the UN programmes and funds and invited the specialized agencies to ensure that the UN Theme Groups on HIV/AIDS “complete as soon as possible their respective joint strategies at the country level, with the participation of the Government of the host country to respond effectively to its national strategies and priorities and to participate actively in its implementation”.

11. While the primary members of the Theme Groups are the seven UNAIDS Cosponsors, other UN organizations and bodies also participate in Theme Group activities and have undertaken important work in their respective fields of expertise. These include: impact of HIV/AIDS on agricultural production, food security and rural development (FAO); integrating HIV/AIDS issues into human rights mechanisms (OHCHR); protection and resettlement policies (HCR); HIV/AIDS in the workplace (ILO); involvement of people living with AIDS (UNV). Thus expansion of Theme Group mechanisms to include other partners than the UNAIDS Cosponsors has proved to be an effective way of supporting an expanded national programme.
12. It is, therefore, proposed to:

- develop an integrated UN system workplan on HIV/AIDS, through the UN Theme Group mechanism and in line with the national strategic plan on HIV/AIDS; this should include the design of prioritized multisectoral programmes with budgetary allocations, implementation mechanisms and monitoring systems;

- enlarge the UN Theme Group and/or technical working groups as appropriate to include, at a technical and/or policy level, other UN and international organizations, government representatives, bilateral donors, nongovernmental organizations, civil society representatives, associations of people living with HIV/AIDS and other relevant organizations;

- enlarge the scope of the Theme Group’s mandate to include, in addition to its core functions (advocacy, providing support to national strategic planning on AIDS and mobilizing resources), support to national authorities to: integrate HIV/AIDS dimension into policies and programmes in all sectors, decentralize HIV prevention activities to provincial, district and sub-district levels, improve legislation, build networks of people living with HIV/AIDS, improve nongovernmental organizations coordination, and address specific gender and human rights issues;

- exploit the strategic expertise and comparative advantages of the UN system organizations through exchange of information, development of joint initiatives, coordinated and optimal use of resource mobilization and strategic planning;

- ensure the involvement of all Cosponsors and other relevant members of the UN Country Team, in order to benefit from their unique combination of resources, expertise and policy influence; in this context, it would be desirable for Cosponsors and other members of the country team to strengthen their technical capacity on HIV/AIDS; and

- train programme staff on HIV/AIDS issues, particularly as they relate to country programmes and projects.

C. Targeting specific populations

13. AIDS has disproportionately affected individuals and communities who, for reasons of sex, age, sexual orientation, economic status, high risk occupations or cultural affiliation are marginalized, discriminated against and are especially vulnerable to risk and infection.

14. It is recommended to:

- expand coverage of groups who are most vulnerable to HIV infection, including young people and, in particular, adolescent girls and children, women, mobile populations (e.g., migrants, refugees and displaced persons, transport workers), sex workers, injecting drug users and men who have sex with men;

- involve people living with and affected by HIV/AIDS in the design, implementation and evaluation of HIV/AIDS-related policies and programme;

- engage men, in addition to women, as partners in combating HIV/AIDS, as changes in their behaviour and attitudes have tremendous potential to correct gender-based inequities and slow down the epidemic (e.g., awareness raising, enhancing sexual communication and negotiations, reduction of violence and sexual violence, encouraging the role of men in support and care); and
• especially target the uniformed services and peacekeeping forces for awareness raising and prevention training.

D. Capacity building

15. The impact of the HIV/AIDS epidemic will be felt for at least a generation to come. It is vital to build the capacity of developing and transition economies (in particular health, education and social support systems) to: prevent HIV transmission; care for persons living with AIDS; provide support to orphans; replace skilled persons; and make the most effective use of diminished resources (e.g., labour, capital, technical/managerial skills).

16. To build national capacity, it is recommended to:

• share information on best practices, particularly at country level (e.g., training of agricultural extension workers, microcredit, support to child-headed households);

• enhance sustainability of HIV/AIDS programmes by strengthening self-reliance in the design and implementation of initiatives (e.g., decentralization of HIV/AIDS programmes, delegation of authority and resources to levels close to the community and regular monitoring);

• make more effective use of national expertise, through active collaboration with and use of academic, training and research institutions; and

• strengthen the management capacities of national HIV/AIDS programmes, including communication, logistics, financial flows and supply systems.

E. Resource mobilization

17. The UN Resident Coordinator system can play a key role in facilitating resource mobilization for its national partners, including the national AIDS programme and NGOs. The resources needed may be provided by the UNAIDS Cosponsors themselves, but also by other UN agencies, multilateral organizations, bilateral partners, the private sector (including businesses, communities, cooperatives, trade unions, insurance companies, associations and foundations) and by the government itself.

18. It is recommended to:

• support national efforts, by building strong technical and policy relationships among potential partners, donors and recipients;

• assist in monitoring the use of the funds made available and consequently adjusting mechanisms, as needed, for technical oversight and/or administering of funds;

• coordinate resource mobilization efforts through the UN Theme Group on HIV/AIDS and identify the respective roles of the members of the Country Team, other partners at country level and UN system headquarters;

• help organize round-tables for national AIDS programmes;

• support debt relief efforts that include specific provisions for HIV/AIDS (through maximizing the inclusion of HIV/AIDS in the Highly Indebted Poor Country Initiative (HIPC); and

• look for new sources of funds (e.g., from foundations and the private sector).
F. Development instruments and mechanisms

19. Assessing and mapping the HIV/AIDS situation is not only necessary for understanding the roots of the local epidemic but these are also powerful tools for broad-based strategic planning and resource mobilization.

20. To ensure that HIV/AIDS is “mainstreamed” into development instruments, it is recommended to:

- assist policy makers and decision-makers in monitoring and projecting the impact of the epidemic on different sectors;
- disseminate information on experience and best practice in mainstreaming HIV/AIDS in non-health sectors;
- include HIV/AIDS goals and indicators in country-based programming mechanisms, such as in the Common Country Assessment, and in programme development instruments such as the UN Development Assistance Framework and in the Comprehensive Development Framework;
- incorporate HIV/AIDS issues into specific development approaches/mechanisms of respective UN organizations and Bretton Woods institutions, such as programmes on poverty alleviation, on basic development needs, Poverty Reduction Strategy Papers and other relevant country-based strategies; and
- develop sector and institutional-specific methodologies and tools to facilitate the involvement of a range of institutions/organizations in the multisectoral response.

G. Partnerships

21. Because HIV/AIDS affects so many aspects of development, external actors must work in innovative partnerships to exploit their comparative advantages. The 1999 ECOSOC resolution E/1999/INF/2/Add.2, recognizing that multisectoral action will require additional human and financial resources, urged Governments to foster strong national partnerships with the private sector, nongovernmental organizations, people living with HIV/AIDS and academic, research and training institutions.

22. In this regard, it is recommended to:

- facilitate exchange of knowledge and experience, both locally and internationally;
- identify the most appropriate nongovernmental/civil society organizations or business sector/other groups for partnerships at local and/or regional level; and
- build linkages between national/local governments and civil society organizations, networks of people living with HIV/AIDS, religious leaders, business leaders, media and so forth.

H. Regional/cross-boundary expansion

23. Various UN system organizations and bilateral and nongovernmental partners are implementing sub-regional initiatives and programmes on HIV/AIDS. A close linkage between these programmes and national activities is necessary.
24. With this in mind, it is recommended to:

- participate in **country-to-country cooperation**;
- improve and expand collaboration on **cross-border initiatives**, including with and through regional projects of the UN system, other international and bilateral organizations; and
- improve collaboration with relevant **regional and sub-regional bodies**.

**I. Technical guidance and support**

25. In many countries, the Theme Group has the support of a UNAIDS Secretariat staff member, a **Country Programme Adviser (CPA)**, or a **UNAIDS focal point**, usually a UN staff member. Some Theme Groups have set up **technical working groups** (comprising UN agency focal points and other partners) to serve as their operational arms and oversee Theme Group activities.

26. At the **inter-country level**, technical resources, guidance and agency-specific advice on HIV/AIDS are available through a range of inter-country resources, regional projects and through regional offices/teams of the Cosponsors. UNAIDS Inter-Country Teams (ICTs), work with and through the Cosponsors at regional/sub-regional levels, and are available to provide UN Theme Groups and Governments technical advisory services. The ICTs also develop technical resources and information exchange networks and assist in harmonization of the approaches of regional and sub-regional initiatives of the UN.

27. The **UNAIDS Secretariat and Cosponsor Headquarters**, provide technical resources and back-up for the UN Theme Groups and the programmes of the Cosponsors, respectively. The UNAIDS Best Practice collection includes Technical Updates, Points of View, Case Studies, Key Materials and Summary Booklets on a range of issues such as: HIV education, community mobilization, gender and HIV/AIDS, voluntary HIV counselling and testing, AIDS and the business community, children and orphans, helping HIV-positive mothers, preventing HIV in mobile populations. The aim of the collection is to develop a continuous process of learning, feedback, reflection and analysis of what works (and does not work) and why, aiming at keeping countries up-to-date on the best models available. Technical/policy references on HIV/AIDS are accessible on the UNAIDS, Cosponsors' and HIV/AIDS-related websites.

28. In light of the above, it is recommended to:

- establish a **UN system focal point on HIV/AIDS**, in countries where CPAs or focal points do not presently exist;
- stay informed about and consult regularly with the intercountry expertise available through the UNAIDS Secretariat (see Annex II) and relevant UN organisations (through websites);
- regularly review and share with local partners the **Best Practice Collection and other reference materials available** (see Annex III);
- strengthen the information technology capacity of countries and the UN system in order to benefit from information sharing and technical resources available online.

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Annex I: UNAIDS Cosponsoring Organizations

- The United Nations International Drug Control Programme (UNDCP) is entrusted with exclusive responsibility for coordinating and providing effective leadership for all United Nations drug control activities. In this context, UNDCP is active in supporting HIV/AIDS prevention programmes to reduce the demand for illicit drugs. Its primary focus is on youth and high-risk groups. UNDCP operates from its headquarters in Vienna, Austria, as well as from a field network currently serving 121 countries and territories.

- The United Nations Development Programme (UNDP) works to increase understanding of the social and economic impact of HIV/AIDS on development, to create effective gender-sensitive multisectoral HIV/AIDS policies and poverty reduction strategies; and to strengthen institutional management, aid coordination and disbursement mechanisms. UNDP advocates for increased development funding and for actions to break the silence surrounding the epidemic. It promotes discussion and implementation of policies that integrate HIV/AIDS into national development strategies, poverty reduction strategies and institutional reform. UNDP acts as an honest broker in bringing together effective community-based programmes with potential sources of funding.

- The mandate of the United Nations Educational, Scientific and Cultural Organization (UNESCO) is to foster international cooperation in intellectual activities designed to promote human rights, help establish just and lasting peace and further general welfare of mankind. UNESCO contributed to UNAIDS by virtue of the scope of its fields of competence, its interdisciplinary approaches, and its experience, and by bringing the vast network of institutions with which it collaborates into the fight against AIDS.

- The mandate of the United Nations Population Fund (UNFPA) is, inter alia, to build the knowledge and capacity of countries to respond to needs in the area of population, with a major focus on reproductive health, including family planning and sexual health. UNFPA contributes to UNAIDS’ mandate through its worldwide network of country offices; its expertise in reproductive health promotion and service delivery, its experience in logistics and management of reproductive health commodities, including condoms, and its experience in working with nongovernmental organizations, in organizing technical assistance and in strengthening national capacity-building.

- The United Nations Children’s Fund (UNICEF), acting within the framework of the Convention on the Rights of the Child, works with governments and nongovernmental organizations in the fields of health, nutrition, basic education, safer water and sanitation to improve the lives of children, youth and women. It brings to UNAIDS its operational field capacity in over 160 countries. UNICEF’s priority programme areas for HIV/AIDS focus on prevention of infection, especially of adolescents, school AIDS education, children and families affected by AIDS, and mother-to-child HIV transmission.

- As a leading international health authority, the World Health Organization (WHO) supports countries to strengthen their health system's response to the epidemics of HIV/AIDS and sexually transmitted infections. Its major focus is on prevention of HIV and sexually transmitted infections, vaccines and microbicides; prevention of mother-to-child transmission of HIV, blood safety; epidemiological and behavioural surveillance; safe injection practice; strengthening of health systems; voluntary counselling and testing; management of HIV-related illnesses; alternatives and complements to hospital care; access to drugs.
The mandate of the World Bank is to alleviate poverty and improve the quality of life. Between 1986 and late 1999, the World Bank committed over US$ 980 million for more than 75 HIV/AIDS projects worldwide. Most of the resources have been provided on highly concessional terms. To more effectively address the devastating consequences of HIV/AIDS on development, the Bank is strengthening its response to the epidemic, working in partnership with UNAIDS, donor agencies and governments. The Bank "Intensifying Action against HIV/AIDS in Africa" strategic plan aims to rapidly increase action and available resources and to bring to scale the interventions needed for prevention and impact mitigation.
Annex II: Reference Materials


- “AIDS and HIV Infection. Information for United Nations Employees and Their Families” and “ACC Guidance Note for the UN Resident Coordinator System on HIV/AIDS in the UN Workplace”.

- “Men and AIDS” – 2000 World AIDS Campaign

- "Guidance Note on a Comprehensive Response to HIV/AIDS" (Manual of Basic Social Services for All)


- CCA and UNDAF Guidelines, " Guidance note on Preparing Joint Programmes/Projects", "ACC Guidance Note on Capacity-building", "ACC Guidance Note on Regional and Sub-Regional Development Cooperation", "ACC Statement of Commitment for Action to Eradicate Poverty”.


- Best practice collection is available at: [www.unaids.org/bestpractice/index.htm](http://www.unaids.org/bestpractice/index.htm)
Annex III: List of Contacts

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