

November 3, 2021

The Honorable Patrick Leahy
Chair
Committee for State and Foreign Operations
U.S. Senate
Washington, DC 20510

The Honorable Richard Shelby
Ranking Member
Committee for State and Foreign Operations
U.S. Senate
Washington, DC 20510

The Honorable Rosa DeLauro
Chair
Committee for State and Foreign Operations
U.S. House of Representatives
Washington, DC 20510

The Honorable Kay Granger
Ranking Member
Committee for State and Foreign Operations
U.S. House of Representatives
Washington, DC 20510

Dear Chair Coons, Chair DeLauro, Ranking Member Graham, and Ranking Member Granger:

On behalf of the organizations listed at the end of this letter, we ask that you fund global HIV/AIDS programs in the Fiscal Year (FY) 2022 no less than the House request of \$6.08 billion for Global Health Programs at the Department of State, including \$4.52 billion for the President's Emergency Plan for AIDS Relief (PEPFAR) and \$1.56 billion for the Global Fund to Fight AIDS, Tuberculosis and Malaria and ensure that the program is governed by policies that expand access to health care and uphold human rights. The GAPP is a coalition of more than 70 advocacy and implementing organizations committed to expanding and improving global HIV/AIDS programming in order to reach the goal of ending AIDS as a public health threat by 2030. We recognize the impact of the COVID-19 pandemic puts pressure on budgets, but we would like to take this opportunity to reiterate the importance of continuing to build upon the lifesaving progress realized through U.S. investments in global HIV/AIDS programs. Failure to do so will result in the loss of hard-won progress and the numbers of HIV infections and AIDS-related deaths rising.

With additional funding, PEPFAR could improve and expand upon programs that work and repair and rebuild programs that have been set back by global health crises.

COVID-19 gaps

Although PEPFAR did receive additional resources to address critical impacts on programs from the COVID-19 pandemic, the lingering effects continue to threaten efforts to fight HIV. COVID-19 continues to have profound effects in the countries that receive PEPFAR support, where vaccination rates are much lower than in the U.S. and just 8.1% of the population has received at least one dose. Although reported COVID-19 cases and deaths are lower in sub-Saharan Africa than in many other parts of the world, countries such as South Africa, Zambia, Ethiopia, and Kenya have been harder hit. On top of what we know of reported rates, the WHO estimates there have been as many as [50 million unreported COVID-19 cases](#) in Africa with two third of deaths going unreported. Additionally, COVID-19 control and mitigation interventions have led to Africa's first recession in 25 years, deepening poverty, increasing vulnerability, and challenging national budgets.

For HIV and AIDS treatment, prevention, and care, PEPFAR introduced several interventions to adapt to COVID-19 control measures, including multi-month dispensation of medication, telemedicine where possible, and decentralized distribution of self-testing kits. However, the impacts of COVID-19 on HIV programming have been severe. The Global Fund reported that HIV testing declined by 41%, there was a decline in new initiations of treatment, and many prevention services nearly halted in order to maintain social distancing. These effects continue as low-resourced countries remain last in line for vaccination.

Key populations

Globally, key populations represented 62% of new HIV infections in 2019. In 2016, PEPFAR made \$100M available in a new funding stream to support the scale up of key population-led approaches to improve and enhance HIV prevention, treatment, care and support services for key populations (known as the Key Populations Investment Fund). This funding built the capacity of local organizations led by those most vulnerable to HIV and addressed the needs of many key populations that have experienced limited access to official health services. We saw incredible results across multiple programs, especially among populations with multiple and intersecting forms of discrimination, like transgender persons. Unfortunately, despite great successes, there was no plan to continue funding the unique programs that were made possible under the Key Populations Investment Fund. During the COVID-19 pandemic, key populations have been disproportionately affected by the inability of many targeted prevention and treatment programs to operate during lockdowns and in a way that responds to their unique needs.

DREAMS

The Determined, Resilient, Empowered, AIDS-free, Mentored, and Safe (DREAMS) program launched in 2014, aiming to significantly reduce new HIV incidence among adolescent girls and young women in the highest-burden countries in sub-Saharan Africa and in Haiti, where they face a far higher risk for new HIV infection—2 to 14 times higher—than their male peers. When DREAMS began, there were 7000 new infections per day among adolescent girls and young women, with a 50% prevalence among young women in South Africa by age 24. The program has seen incredible success, reducing HIV diagnoses among adolescent girls by over 25% in 96% of targeted regions. However, DREAMS only operates in 15 countries and in limited districts within those countries. Without more resources to expand this program, adolescent girls and young women will continue to be disproportionately vulnerable to HIV infection.

Prevention services

Currently, PEPFAR dedicates 52% of its planned funding to HIV treatment, 16% to care, 15% to prevention, 6% to testing, and 11% to governance, management, and operations. Despite the success of many of PEPFAR's prevention interventions, they are simply not at a scale to make a significant impact on the global rate of new HIV infections. UNAIDS has called for a substantial increase of investments in HIV prevention efforts and structural interventions to eliminate barriers to service utilization and contribute to inequities in HIV incidence. The urgency of investing in HIV prevention is made greater by the introduction of new prevention technologies that will be rolled out soon, including the dapivirine vaginal ring (DVR) and long-acting injectable pre-exposure prophylaxis (PrEP).

Twenty years into the program PEPFAR continues to show the world the United States' compassion, but also effectiveness in addressing the challenges of global HIV and AIDS through prevention, care and

treatment programs and policies that are grounded in science and respect for human rights. PEPFAR improves and saves the lives of people around the world, and continues to advance our national security and development goals. It is imperative that we leverage PEPFAR's success by scaling up successful programs to reach the most vulnerable and ensure that hard-won gains over the last twenty years are not lost. Funding global HIV/AIDS programs in the Fiscal Year (FY) 2022 no less than the House request of \$6.08 billion for Global Health Programs at the Department of State, including \$4.52 billion for the President's Emergency Plan for AIDS Relief (PEPFAR) and \$1.56 billion for the Global Fund to Fight AIDS, Tuberculosis and Malaria and ensuring that the program is governed by policies that expand access to health care and uphold human rights is critical for this effort.

We welcome the opportunity to work with you and your staff on these crucial and timely issues. Should any questions arise, if you need additional information, or if you would like to meet with members of the GAPP to discuss these issues, please contact Co-Chairs Katie Lapedes Coester, (kcoester@pedaids.org), Helen Cornman (helencornman@gmail.com) or Kevin Fisher (kevin@avac.org). We appreciate your leadership and look forward to your assistance in the fight against the HIV/AIDS epidemic.

Sincerely,

Aidsfonds
AVAC
Housing Works, Inc.
Children's AIDS Fund International
Christian Connections for International Health
Council for Global Equality
Elizabeth Glaser Pediatric AIDS Foundation
Evangelical Lutheran Church in America
Friends of the Global Fight Against AIDS, Tuberculosis and Malaria
Global Network of Black People working in HIV
HIV+Hepatitis Policy Institute
HIV Medicine Association
Housing Works, Inc.
Human Rights Campaign
IAVI
International Partnership for Microbicides (IPM)
Management Sciences for Health
MPact: Global Action for Gay Health & Rights
NASTAD
ONE
Prevention Access Campaign
Treatment Action Group
Treatment Action Group
US People Living with HIV Caucus