

PEPFAR
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In 2003, the U.S. stepped up as a global leader in the HIV response, launching the President's Emergency Plan for AIDS Relief (PEPFAR). PEPFAR is a shining example of U.S. global health leadership and true bipartisanship and it remains the largest commitment by any nation to address a single disease in history.

Now, 20 years later, PEPFAR's innovative, target-driven, and science-based prevention and treatment programming has fundamentally changed the course of the HIV pandemic.



Saving an estimated 25 million lives



Reaching 2.9 million adolescent girls and young woman with comprehensive HIV services



Enabling more than 20 million people to access antiretroviral treatment



Helping to train 340,000 health care workers to deliver and improve HIV care and other health services



Ensuring 5.5 million babies have been born HIV-free



Helping over a dozen high burden countries achieve control over HIV



Connecting over 7.1 million orphans, vulnerable children, and their caregivers with critical care and support services



Improving health outcomes and helping to strengthen health systems in the countries in which it works



COOPERATION

PEPFAR's unique structure utilizes a whole-of-government approach, centralized at the State Department, ensures its programs are maximized across U.S. government agencies, including Centers for Disease Control, USAID, the Department of Defense, and Peace Corps.

U.S. bilateral HIV funds are also used to partner with several international institutions, including UNAIDS, to ensure efficiency and effectiveness.

PEPFAR and the Global Fund, the two largest HIV funders, work together by:

- Collaborating on strategies in over 50 countries
- Leveraging each other's resources and expertise to increase access to HIV prevention and treatment services
- Sharing data to increase transparency, minimize duplication of efforts, and maximize impact

In addition, PEPFAR works closely with national governments as well as international, national, and community organizations to ensure its work has broad reach and a sustainable response. As national governments provide up to 57% of global HIV funding, these partnerships are crucial to leveraging PEPFAR investments.



PEPFAR AND PANDEMICS

Leveraging PEPFAR-supported infrastructure has been essential to combatting other global health threats including Ebola and COVID-19:

- Helping countries prepare for effective vaccine delivery
 - Strengthening surveillance and case finding systems
 - Providing critical laboratory and supply chain capacity
 - Deploying medical personnel and commodities
 - Leveraging its expertise in rapidly coordinating with governments and others to aid national COVID responses
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PROGRESS IN PERIL

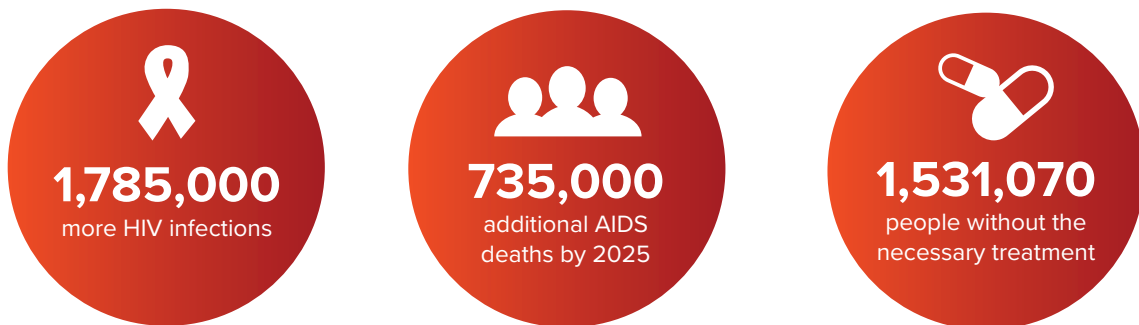
Despite the enormous progress that PEPFAR and its partners have made:

- 10 million people – nearly a quarter of those living with HIV – are still not able to access the antiretroviral therapy they need to survive and thrive.
- Only roughly half of HIV-positive children currently access treatment, which is especially disturbing because half of them will die before their second birthday if they remain untreated.

- An additional 1.5 million people are infected with HIV every year, a number that has remained essentially stagnant.
- Adolescents and young adults contract HIV at alarming rates. An estimated 250,000 adolescent girls and young women acquired HIV in 2021 — one new infection every two minutes — 82% of them living in sub-Saharan Africa.
- The COVID-19 pandemic led to disruptions to key HIV treatment and prevention services. Additional resources are needed to regain lost ground and end AIDS.

UNAIDS estimates that annual investments will need to increase by \$29.3 billion by 2025 — a critical milestone on the way to meeting the 2030 deadline for the Sustainable Development Goals — to get the AIDS response back on track in low- and middle-income countries. At the moment, it predicts an \$8 billion shortfall. At a minimum, maintaining PEPFAR’s \$4.395 billion funding is essential to not lose progress and move towards achieving global targets.

Failure to invest adequately in the U.S. response to HIV and AIDS will result in the loss of hard won progress as well as unnecessary infections and deaths.



It's worth noting that PEPFAR has been consistently flat funded for over a decade. While limited resources are not ideal — inhibiting, for example, the ability to scale-up effective programs and invest in new innovations and initiatives — it has operated as a model of efficiency, driving value, eliminating redundancy, and achieving remarkable, lifesaving results.

WHAT IS NEEDED

Ensuring PEPFAR maintains its \$4.395 billion funding level in Fiscal Year 2024 would be a positive step, demonstrating to the countries where the U.S. works, as well as our implementing partners, that we are fully committed to ending AIDS as a public health threat.

In addition, it is essential that Congress reauthorize PEPFAR in the same spirit that it was created: through bipartisan cooperation, mutual respect, and with the understanding that U.S. investments and programming are imperative to saving lives.

With two decades of experience and success behind it, PEPFAR is uniquely placed to both accelerate the end of AIDS and bolster other global health efforts. But this is only possible if it is swiftly reauthorized and adequate resources are made available.