

April 30, 2020

The Honorable Nita Lowey
Chairman
Appropriations Subcommittee for
State and Foreign Operations
U.S. House of Representatives
Washington, DC 20515

The Honorable Harold Rogers
Ranking Member
Appropriations Subcommittee for
State and Foreign Operations
U.S. House of Representatives
Washington, DC 20515

Dear Chairman Rogers and Ranking Member Lowey:

We, the undersigned members of the Global AIDS Policy Partnership (GAPP), write today to request that you allocate at least \$500 million in new emergency supplemental resources for the President's Emergency Plan for AIDS Relief (PEPFAR) and \$1.0 billion for the U.S. contribution to the Global Fund to Fight AIDS, Tuberculosis and Malaria (Global Fund) to support the global response to COVID-19. The GAPP is a coalition of advocacy, research, and implementing organizations committed to ending AIDS for the next generation by expanding and improving global HIV/AIDS programming.

PEPFAR and the Global Fund work together to save millions through life-saving treatment while also preventing millions of new HIV infections in adults and children. However, the historic successes brought about by almost two decades of U.S. investment in PEPFAR and the Global Fund are being threatened by the approaching onset of COVID-19 in the countries in which they work. In a recent article Dr. John Nkengasong, head of the Africa Centers for Disease Control and Prevention warned: "With the coronavirus overwhelming hospitals, redirecting medical staff, causing supply shortages and suspending health services, "our greatest fear" is resources for other diseases being diverted and depleted." (*Time* April 9, 2020)

The challenges of providing HIV, TB and malaria programming in the low and middle income countries struck by COVID-19 are still not fully known or understood. yet, but it is clear that they cannot be adequately addressed without an increase in PEPFAR and Global Fund resources. Experience from the recent Ebola outbreaks in Africa has shown that unless mitigating action is taken, the additional death toll from AIDS, TB, and malaria could well exceed the number of deaths from COVID-19 itself. COVID-19 is on a trajectory to overwhelm communities and health systems in developing countries with potentially catastrophic consequences. Additional funds are needed not only to secure adequate drug supplies for existing patients, procure new equipment and support human resources for health struggling to maintain HIV, TB and malaria services in COVID-19 endemic countries; funds are also needed to quickly integrate appropriate COVID-19 response activities into well-established, wide-reaching PEPFAR and Global Fund program infrastructures. In many countries, these programs offer existing cost-effective and efficient health care platforms with laboratory equipment and data collection systems in place that can be built upon for COVID-19 activities immediately since time is of the essence. Funding for these activities can be deployed rapidly through existing PEPFAR and Global Fund disbursement mechanisms in-country to address investments, particularly around laboratories,

surveillance, and specimen transport, as both of these funders contribute substantially to these areas.

The key principles for the PEPFAR response to COVID-19 include continuity of ART therapy and accelerated decongestion of health facilities to minimize transmission of COVID-19 and protect people living with HIV (PLHIV). COVID also threatens PEPFAR HIV prevention work that relies on face-to-face interactions with beneficiaries – such as the DREAMS (Determined, Resilient, Empowered, AIDS-free, Mentored, and Safe) Partnership, as well as PrEP and voluntary medical male circumcision programming – and cannot easily be transitioned to social distancing practices or exclusively virtual communication. Similarly, the COVID-19 Response Mechanism announced by the Global Fund focuses on maintaining HIV, TB and malaria programming through support for preparedness assessments, laboratory testing and sample transportation; surveillance infrastructure; infection control in health facilities and information campaigns.

Measures needed to safeguard existing PEPFAR and Global Fund programs include:

- COVID-19 control and containment interventions, including personal protective equipment, diagnostics, treatment, communications and other public measures specified in WHO guidance;
- COVID-19-related risk mitigation measures for programs to fight HIV/AIDS, tuberculosis, and malaria; and
- Expanded reinforcement of key aspects of health systems, such as laboratory networks, supply chains, and community-led response systems, to address advocacy, services, accountability, and human-rights based approaches;

Implementaton of these measures is made more complicated by the need to both protect PEPFAR and Global Fund clients as as well as health care workers providing HIV services to those clients in settings experiencing a COVID-19 outbreak. Ultimately, while PEPFAR and Global Fund may be flexible in responding to this crisis, their COVID response cannot divert funding away from their core mandate of responding to HIV, TB and malaria.

U.S.-funded global HIV/AIDS programs have shown a consistent and ever more efficient return on investment, and increased funding as part of the new emergency supplemental to support the global response to COVID-19 will enable PEPFAR and Global Fund to continue its work to significantly increase the number of countries that achieve epidemic control and deepen the impact of key programmatic efforts. The GAPP also supports supplemental funding to address COVID-19 to support the President’s Malaria Initiative and TB programming at USAID. Once again, we thank you for your leadership and look forward to your assistance in ending the HIV/AIDS epidemic.

The members of the GAPP welcome the opportunity to work with you and your staff on these very important and timely issues. Should questions arise, if you need additional information, or if you or your staff would like to meet with members of the GAPP to discuss these issues, please contact Catherine Connor (cconnor@pedaids.org), Helen Cornman (hcornman@planetaid.org) or Kevin Fisher (kevin@avac.org).

Sincerely,