

March 20, 2019

The Honorable Rosa DeLauro  
Chairwoman  
Appropriations Subcommittee for  
Labor, Health and Human Services,  
Education, and Related Agencies  
U.S. House of Representatives  
Washington, DC 20515

The Honorable Tom Cole  
Ranking Member  
Appropriations Subcommittee for  
Labor, Health and Human Services,  
Education, and Related Agencies  
U.S. House of Representatives  
Washington, DC 20515

Dear Chairwoman DeLauro and Ranking Member Cole:

We, the undersigned members of the Global AIDS Policy Partnership (GAPP), write today to request your support for programs that advance the global HIV/AIDS response in your Fiscal Year (FY) 2020 Labor, Health and Human Services, Education, and Related Programs Appropriations bill. 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. The U.S. commitment to capitalizing on the life-saving progress made by our investments in global HIV/AIDS research and programming has us on track to end the epidemic at home and abroad, and these gains should not and must not be abandoned.

**As your Subcommittee begins drafting FY 2020 funding legislation, we urge you to include at least \$128 million for the Centers for Disease Control and Prevention (CDC) Global AIDS Program and that you support strong, increased investment funding for the National Institutes of Health (NIH).**

Despite progress, according to UNAIDS in 2017, only 57 percent of adults are receiving the medicines they need to survive and only 43 percent of HIV-positive children are accessing treatment. There are still 1.8 million new HIV infections each year, and additional prevention efforts are needed to target geographic areas and populations – like adolescent girls and young women – in which new HIV infections are still on the rise.

The investment in global HIV/AIDS represented by the CDC's Global AIDS Program is more critical now than ever. CDC's Global HIV/AIDS program plays an integral role in the fight against HIV by ensuring that data and science drive rapid changes in practice to accomplish the most efficient, high impact public health results. The program plays a unique role in building sustainability at the national level by working closely with ministries of health, CDC's peer partner, and other entities seeking to develop high-quality, country-driven public health programs. .

CDC is also committed to expanding and strengthening laboratory capacity to support the scale-up of testing to determine the amount of HIV in patients' blood (a measure of treatment effectiveness), incorporating innovative testing approaches tailored to low-resource settings, and ensuring the accuracy of HIV and Tuberculosis rapid testing. By building public health infrastructure that spans and supports responses to multiple diseases, the Global HIV/AIDS Program is focused on achieving epidemic control at national, provincial, and district levels. Such technical assistance and support optimizes other HIV/AIDS and global health investments and ensures needed infrastructure supporting country sustainability and leadership efforts. One such example is CDC's recency testing program - Implementing Tracking Recency Assay to Control the Epidemic (TRACE) - that is currently being used to provide surveillance data in some countries.

HIV/AIDS research at NIH remains today an indispensable part of our response by providing new tools and approaches to combating the epidemic. Now is the time to prioritize HIV/AIDS research within NIH and support groundbreaking research to develop a preventive vaccine, a microbicide, a cure for HIV infection, new HIV treatments, and treatment scale and approaches that address health disparities. These research advances hold the potential to end the AIDS epidemic, as well as update prevention approaches and improve outcomes along the treatment cascade – a cornerstone of the Administration’s recently announced plan to End the HIV Epidemic.

Moreover, HIV/AIDS research at NIH not only supports advancements in care and treatment for persons with HIV and AIDS in the United States, it is also responsible for much of the scientific groundwork driving effective and efficient global HIV/AIDS programming in resource-poor settings. In 2015, the NIH-funded [START](#) (“Strategic Timing of Anti-Retroviral Treatment”) trial established that immediate treatment reduced rates of both serious AIDS and serious non-AIDS mortality and morbidity – resulting in updated World Health Organization guidelines, now widely adopted globally, recommending immediate initiation of treatment for all HIV-positive people, regardless of their disease progression. In 2019, a number NIH-supported prevention trials are underway: one testing a long-acting injectable drug Cabotegravir for HIV prevention in the US, Latin America and Africa; two trials testing infusion of the anti-HIV antibody VRC01 for HIV prevention in the US, Latin America and Africa; and trials testing two different HIV vaccine candidates in Africa. Programs such as the Fogarty HIV Research Training Program have allowed the U.S. to lead in shaping the global body of knowledge on HIV/AIDS and support vital research in areas heavily impacted by HIV/AIDS to inform the response globally and in the U.S.

Finally, HIV/AIDS research investment continues to reap ancillary benefits in developing therapies and cures for other diseases that afflict Americans such as Alzheimer’s, heart disease, cancer, diabetes, autoimmune disorders, and other infectious diseases such as Hepatitis B and C. Advanced diagnostic techniques originally developed for HIV are now used to detect and prevent the spread of numerous other infectious diseases – an important contribution to protecting the health of all Americans.

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 Katie Lapidés Coester ([kcoester@pedaids.org](mailto:kcoester@pedaids.org)), Helen Cornman ([helen.cornman@thepalladiumgroup.com](mailto:helen.cornman@thepalladiumgroup.com)) or Kevin Fisher ([kevin@avac.org](mailto:kevin@avac.org)).

Sincerely,

The AIDS Institute  
AIDS United.  
AVAC  
Center for Health and Gender Equity  
Children’s AIDS Fund International  
Christian Connections for International Health  
Coalition for Children Affected by AIDS.  
Elizabeth Glaser Pediatric AIDS Foundation  
Evangelical Lutheran Church in America  
Friends of the Global Fight Against AIDS, Tuberculosis and Malaria  
Global Health Council  
Global Health Technologies Coalition

Global Network of Black People working in HIV  
HealthGap  
Heartland Alliance International  
HIV Medicine Association  
Housing Works  
Institute for Youth Development  
International Partnership for Microbocodes  
Infectious Diseases Society of America  
John Snow, Inc.  
MPact Global Action for Gay Men's Health and Rights  
Pact  
PAI  
Palladium Group  
Partners In Health  
Planned Parenthood Federation of America  
Treatment Action Group  
US People living with HIV Caucus