

U.S. Agency for International Development and U.S. Global AIDS Coordinator Report to Congress on HIV/AIDS, Tuberculosis, and Malaria Treatments for Fiscal Years 2020, 2021, and 2022^{1,2}

The U.S. Agency for International Development (USAID) and the U.S. Global AIDS Coordinator jointly submit this report pursuant to Section 7019(e) of the Department of State, Foreign Operations, and Related Programs Appropriations Act, 2024 (Div. F, P.L. 118-47), the Senate Report 118-71 and House Report 118-46, which states:

Senate Report 118-71: Not later than 90 days after the date of enactment of the act, the USAID Administrator and the U.S. Global AIDS Coordinator shall submit a report to the Committees on Appropriations detailing the approximate number of treatments provided for HIV/AIDS, tuberculosis [TB], and malaria, disaggregated by disease, as a result of U.S. Government assistance in the previous fiscal year. Such report shall include detail on funds expended, including a valid estimate of funds expended to achieve each reported result and a description of the method of estimation used.

House Report 118-46: Not later than 90 days after the date of enactment of this Act, the United States Global AIDS Coordinator and the Administrator of USAID shall jointly submit a report to the appropriate congressional committees detailing the approximate number of treatments provided for HIV/AIDS, TB, and malaria, disaggregated by disease, as a result of appropriations provided in fiscal years 2020, 2021, and 2022. Such report shall include detail on funds expended to achieve such outcomes.

HIV/AIDS³

In fiscal year (FY) 2020, the President's Emergency Plan for AIDS Relief (PEPFAR) supported life-saving antiretroviral treatment for nearly 17.2 million people, including newly initiating 2.4 million people living with HIV (PLHIV) onto treatment. PEPFAR achieved these treatment numbers partly through its investments in building enduring partner country health systems infrastructure and capacity, which included supporting 230,297 health workers and skilled staff who worked on HIV-related care and treatment activities. Additionally, there was \$838.5 million worth of HIV-related commodity procurements, 59 percent of which consisted of antiretrovirals (ARVs). PEPFAR procured HIV medicines and commodities and supported the strengthening of health supply-chain systems for 41 countries. Of all HIV-related procurements in FY 2020,

¹ Consistent with prior reporting, this report includes results from programs implemented during fiscal years 2020, 2021, and 2022.

² Different disease programs report results on different cycles. Consistent with prior reporting, this report does not include fiscal year 2023 results due to lags in data availability.

³ Treatments for HIV/AIDS, tuberculosis, and malaria procured by Global Fund are not included as part of this report.

PEPFAR supported the procurement of \$492.2 million in ARVs and spent \$1.15 billion on treatment services.

In FY 2021, PEPFAR delivered HIV treatment to 1.6 million more PLHIV than the previous year, reaching nearly 18.8 million people globally. These PEPFAR-supported results were achieved, in part, through PEPFAR support of 310,681 health workers and skilled staff, including 129,712 care and treatment staff. In FY 2021, there was \$881.7 million worth of HIV procurements, 56 percent of which were ARVs. PEPFAR procured HIV medicines and commodities and supported health supply chain systems strengthening for 56 countries with HIV funding. Of all HIV-related procurements in FY 2021, PEPFAR supported the procurement of \$491.7 million in ARVs and spent \$1.23 billion on treatment services.

In FY 2022, PEPFAR delivered HIV treatment to nearly 1.2 million more PLHIV than the previous year, reaching 20 million people globally. These PEPFAR-supported results were achieved, in part, through PEPFAR support of 327,423 health workers and skilled staff, including 132,195 care and treatment staff. In FY 2022, there was \$772.5 million worth of HIV procurements, 53 percent of which were ARVs. PEPFAR procured HIV medicines and commodities and supported health supply chain systems strengthening for 55 countries with HIV/AIDS funding. Of all HIV-related procurements in FY 2022, PEPFAR supported the procurement of \$406.9 million in ARVs and spent \$1.28 billion on treatment services.

The number of people diagnosed and enrolled on treatment comes from the PEPFAR Monitoring, Evaluation, and Reporting (MER) indicators for the corresponding year, with information reported directly by PEPFAR programs. The number of health care workers trained comes from internal USAID reporting systems. The volume of ARV procurements comes from internal USAID procurement systems reports. Expenditures on PEPFAR-supported HIV services comes from internal PEPFAR Expenditure Analysis systems.

Tuberculosis (TB)

USAID supports treatment and care services for high burden TB countries, in cooperation with Ministries of Health and other partners. In addition, by leveraging the Global Fund to Fight AIDS, Tuberculosis and Malaria (Global Fund), USAID fills key technical assistance gaps to ensure successful TB grant implementation. While the Global Fund and countries are the primary procurers of treatments, USAID focuses more on supply chain and strengthening services to improve equitable access to treatment, especially among the most vulnerable populations. The USAID TB strategic approach is designed to ensure all forms of TB are cured to avoid the development of more deadly and harder to treat forms of drug-resistant TB.

From 2015 to 2022, over 35 million people were diagnosed and enrolled on TB treatment through USAID bilateral assistance. In FY 2020, 3.8 million people in 23 TB bilateral assistance countries were diagnosed with TB and enrolled on quality TB treatment, with an 89 percent treatment success rate. This was a 20 percent decline from 2019, in the number of individuals receiving treatment due to the impact of COVID-19. Similarly, USAID trained 33,180 health workers in FY 2020, a decline of 40 percent from the year prior. During this period, USAID

invested \$129 million towards supply chain, procurement, and strengthening of treatment and care services.

In FY 2021, as programs began to recover from the most severe phase of the COVID-19 pandemic, USAID supported the diagnosis and enrollment on quality TB treatment of 4.4 million people, with an 89 percent treatment success rate, through an investment of \$120 million. Additional recovery was also achieved by the significant increase in health care workers trained to 164,538 in 2021, mitigating the impact of COVID-19 on TB services, as it included training on remote care, multi-month treatment dispensing, and the scaling-up of all-oral treatment regimens.

Post-pandemic, in 2022, USAID supported the diagnosis and enrollment on quality TB treatment of 5.8 million people, with a 90 percent treatment success rate. Contributing to this was an increase in the number of health care workers trained in 2022, to 360,488—more than double than the previous year. During this period, USAID invested \$127 million towards supply chain, procurement, and strengthening of treatment and care services.

The number of people diagnosed and enrolled on treatment comes from the World Health Organization's Global Tuberculosis Report for the corresponding year, with information reported directly by countries. The number of health care workers trained comes from internal USAID reporting systems.

Malaria

In FY 2020, the U.S. President's Malaria Initiative (PMI) delivered enough artemisinin-based combination therapies (ACTs) to treat 59 million people for malaria in 22 countries. PMI achieved these treatment numbers partly through its investments in strengthening supply chains and improving treatment services, including more than 37,000 trainings for health workers in malaria case management. PMI funded the procurement of the ACTs at a total cost of \$45 million and contributed \$124.4 million for supply chain and treatment services strengthening.

In FY 2021, PMI delivered enough ACTs to treat 113.6 million people for malaria in 24 countries. PMI achieved these treatment numbers partly through investments in strengthening supply chains and improving treatment services, including more than 53,000 trainings for health workers in malaria case management. PMI funded the procurement of the ACTs at a total cost of \$35.4 million, and contributed \$132.1 million for supply chain and treatment services strengthening.

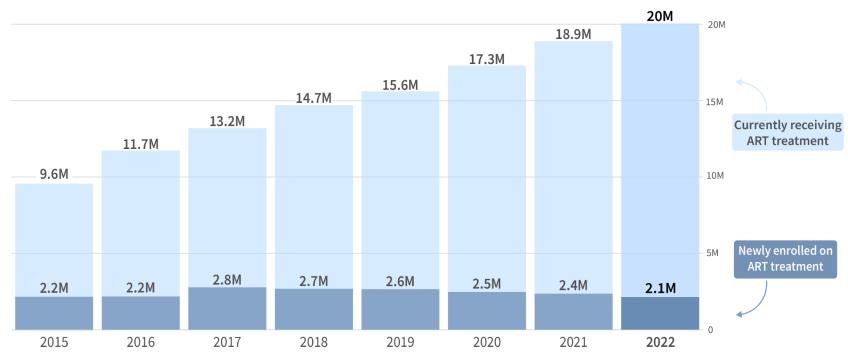
In FY 2022, the U.S. President's Malaria Initiative (PMI) delivered enough ACTs to treat 80 million people for malaria in 22 countries. PMI achieved these treatment numbers partly through its investments in strengthening supply chains and improving treatment services, including more than 42,000 trainings for health workers in malaria case management. PMI funded the procurement of the ACTs at a total cost of \$40.5 million and contributed \$129.8 million for supply chain and treatment services strengthening.

Annual aggregated PMI procurement and delivery numbers vary from year to year due to country procurement-delivery cycles that do not align with the calendar year and coordination with the Global Fund and other donor procurements to meet quantified country needs.

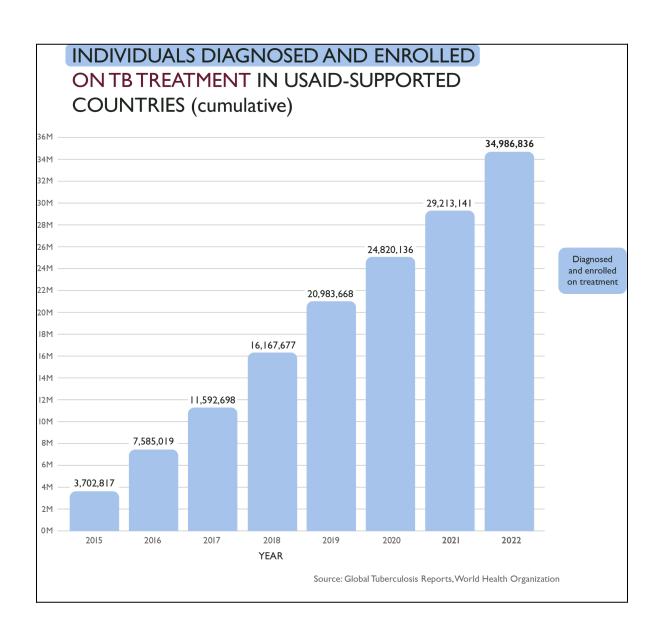
The number of commodities delivered comes from PMI's supply chain implementing partner's enterprise resource planning system. The number of health care workers trained comes from internal PMI reporting systems.

AS OF 2022, PEPFAR AGENCIES PROVIDED TREATMENT FOR OVER 20M PATIENTS





Note: Ukraine removed from PEPFAR totals Source: FY24Q1c MSD | US Agency for International Development



IN FY 2020, PMI DELIVERED:

59m malaria medicines (ACTs) to protect 59m people



IN FY 2021, PMI DELIVERED:

113.6m malaria medicines (ACTs) to protect 113.6m people



IN FY 2022, PMI DELIVERED:

80m malaria medicines (ACTs) to protect **80m** people

