

Cuts to the CDC's Division of HIV Prevention Will Lead to Dramatic Rise in Infections, Deaths, and Costs

The U.S. Centers for Disease Control and Prevention (CDC) has led a concerted effort to curb the spread of HIV in the U.S. over the past 15 years. An amfAR analysis shows increased funding to the CDC's Division of HIV Prevention has been associated with a nearly 20% reduction in new HIV infections across the U.S. between 2010 and 2022.

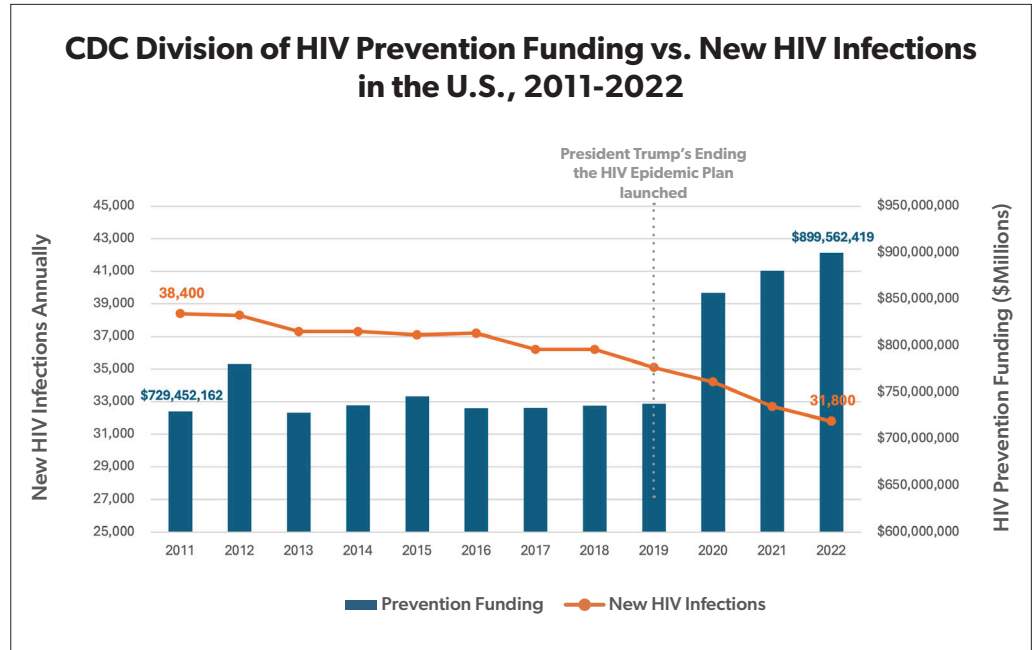
The first Trump administration made ending the HIV epidemic in the U.S. by 2030 a priority.

The government is now proposing drastic cuts in funding for the CDC's Division of HIV Prevention. Not only

will we lose momentum in driving down HIV cases, but the nation's epidemic will become considerably worse.

There are currently 32,000 new HIV infections each year in the U.S. and more than 19,000 AIDS-related deaths. 1.2 million people are living with HIV and the average lifetime cost of treatment per person is estimated to be approximately \$420,000.

If the Division of HIV Prevention's funding is halved or eliminated completely, we can expect dramatic increases in all of these areas.



Impact of Cuts to HIV Prevention Between 2025 and 2030

	With a 50% reduction in CDC prevention funding	With a 100% reduction in CDC prevention funding
Additional new HIV infections by 2030	75,289	143,486
Additional AIDS-related deaths by 2030	7,530	14,676
Additional people living with HIV by 2030	67,759	127,382
Additional cumulative lifetime costs from new HIV infections	\$31.6 Billion	\$60.3 Billion

Funding for the CDC's Division of HIV Prevention has been a remarkable public health success story, setting us on a path to ending the HIV epidemic in the U.S. **A drastic reduction in funding will exact a catastrophic human toll in the next five years alone. Moreover, halving or eliminating an annual budget of just \$1.3 billion will also result in an exponential increase in treatment costs—as much as \$60 billion over just five years.**

Estimates use current known HIV transmission rates to model expected new HIV infections by 2030 with current CDC funding. Additional funding scenarios (50% cut and 100% cut) used varied and increasing annual HIV transmission rates based on expected loss of HIV prevention services to show additional new infections, deaths, and costs compared to baseline estimates.