### The Status of PEPFAR's USAID Programming

On January 20th, President Trump issued an executive order implementing a 90-day freeze on foreign assistance funding. This was subsequently instituted through a series of executive actions from the U.S. Department of State , including work stoppage orders, the issuance of limited waivers, and the announcement of rounds of terminations of grants, contracts, and other foreign assistance.

Based on the most recently released lists of <u>active and terminated grants for USAID</u> and <u>other publicly available data</u>, we have assessed the status of USAID PEPFAR programming relative to the program as it existed in fiscal year 2024. Importantly, while fiscal year 2025 planning was never formally released, PEPFAR's planning process for FY2025 was fully planned and submitted to Congress through the standard congressional notification process. Additionally, FY2025 was the 2nd year of a "2-year" country operational planning (COP) cycle in which only minor programmatic changes were discussed, in anticipation of a more substantial planning cycle for FY2026.

#### Methodology

We matched PEPFAR programmatic data based on the award numbers to the list of active and terminated grants linked above. PEPFAR's data includes budgetary information by mechanism for FY2024, PEPFAR programmatic results by mechanism in FY2024, and the facilities supported by PEPFAR's programming in FY2024. Indicator definitions are defined in PEPFAR's <u>Monitoring, Evaluation, and Reporting Indicator Reference Guide</u>. Budget and expenditure data are according to PEPFAR's <u>Financial Classification Reference Guide</u>. Critically, this analysis does not take into consideration any revisions to approved award activities as award revisions have not been released to date.

#### **Overall Results**

Of the \$4.65 billion budgeted by PEPFAR for FY2024 programming (including carry-over funding from prior years), 51% was budgeted for USAID administered programming, 42% for CDC programming, with small amounts for other agencies and departments (Department of Defense, Peace Corps, State Department, and Health Resources and Services Administration).

In FY2024, PEPFAR had 570 individual funding mechanisms—unique country-level funding streams—administered by USAID, encompassing 364 unique single or multi-country foreign assistance awards (grants or contracts). Of these, 83 remain active, 167 are terminated, and 114 are unknown. In terms of overall budgeted funding amounts, 58% of funding is in active grants, 22% in terminated, and 20% in grants of unknown status. Individual program amounts vary substantially as shown below:

Program Area	Active	Terminated	Unknown	Active (%)	Terminated (%)	Unknown (%)	
Above-Site Programming	\$188,487,484	\$110,347,376	\$320,735,990	30.42%	17.81%	51.77%	
Care & Treatment	\$1,832,880,360	\$430,668,016	\$354,833,276	70.00%	16.45%	13.55%	
HIV Testing Services	\$318,294,120	\$69,673,130	\$41,116,396	74.18%	16.24%	9.58%	
HIV Prevention	\$404,233,694	\$276,120,980	\$140,720,373	49.23%	33.63%	17.14%	
Socio-Economic	\$191,739,172	\$260,197,396	\$163,551,818	31.15%	42.27%	26.57%	
All	\$2,935,634,830	\$1,147,006,898	\$1,021,084,645	57.52%	22.47%	20.01%	
* "Active" indicates the budget totals and percentage of PEPFAR's USAID budget by active grants or contracts in 2024; "Terminated" indicates the							

\* "Active" indicates the budget totals and percentage of PEPFAR's USAID budget by active grants or contracts in 2024; "Terminated" indicates the budget totals and percentage of PEPFAR's USAID terminated grants or contracts in 2024.

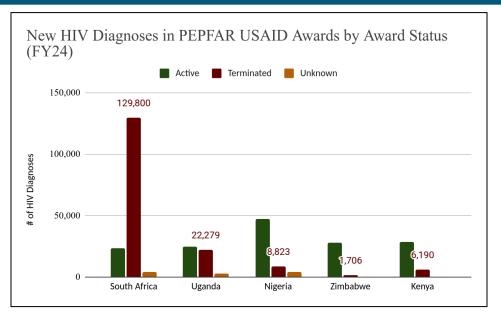
Individual factsheets for different indicators and programs are attached.



### The Status of PEPFAR's USAID Programming: HIV Testing and New Diagnoses

HIV testing is essential to protecting gains in the global HIV response. When people living with HIV know their status, they are able to access treatment and prevent further transmission of HIV. In 2024, PEPFAR's USAID grantees supported **32,826,354 HIV tests and diagnosed 673,792** individuals with HIV.

PEPFAR's USAID awards terminated as part of the foreign assistance review **supported a total of 10,382,284 HIV** tests in FY2024, or 31% of all USAID supported HIV tests. Awards that accounted for **100% of USAID supported HIV tests were cancelled** in Cameroon, Haiti, India, Namibia,



Nicaragua, and Papua New Guinea. In the top four most impacted countries alone, cancelled contracts were responsible for newly diagnosing 174,660 people living with HIV.

### PEPFAR/USAID Supported HIV tests conducted by active and terminated award status

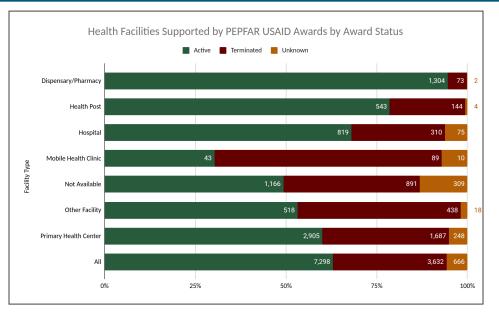
Country	Active	Terminated	Unknown	Active (%)	Terminated (%)
Cameroon		20,883			100.00%
Haiti		136,424			100.00%
India		30,498			100.00%
Namibia		26,589			100.00%
Nicaragua		7,119			100.00%
Papua New Guinea		5,763			100.00%
Myanmar	2,969	51,822		5.42%	94.58%
Eswatini	8,931	109,310		7.55%	92.45%
South Africa	1,126,055	5,944,750	217,000	15.45%	81.57%
Lesotho	28,999	53,389	22,332	27.69%	50.98%
Ghana		63,469	67,526		48.45%
Burundi		218,339	266,823		45.00%
Uganda	1,841,816	1,588,400	144,149	51.53%	44.44%
Ethiopia	21,280	74,183	74,280	12.54%	43.70%
Rwanda	50,247	35,182		58.82%	41.18%
Dominican Republic	56,173	26,884		67.63%	32.37%
Democratic Republic of the Congo	328,911	132,085		71.35%	28.65%
Botswana	20,399	13,851	23,420	35.37%	24.02%
All	21,129,889	10,382,284	1,314,219	64.37%	31.63%

indicates those supported by terminated grants or contracts in 2024.



### The Status of PEPFAR's USAID Programming: Facilities Impacted

The President's Emergency Plan for AIDS Relief (PEPFAR) supports a diverse range of healthcare delivery sites, from government-operated hospitals, clinics, and health posts, to co-financed mobile and community clinics with the Global Fund to entirely PEPFAR-funded sites. Notably, even in facilities with multiple funders, including public health clinics and hospitals, **PEPFAR's contributions are often deeply integrated** into the broader operations of the facility. For instance, a pharmacist supported by PEPFAR may be the sole pharmacist available at a facility. Consequently, small changes at the site



level can essentially halt the overall functioning of the facility.

In specialized care settings, such as mobile clinics, **PEPFAR may serve as the sole funder or "but-for" financer**, meaning that the withdrawal of PEPFAR support will likely cause them to cease operation entirely. This funding is particularly vital, as mobile clinics and outreach centers frequently serve populations in rural areas or at higher risk who face barriers in accessing standard public health facilities.

According to recent data, **terminated USAID grants provided support to 3,632 healthcare delivery sites in 2024**, or 31.32% of all PEPFAR's USAID supported sites. Service delivery sites impacted by these proposed terminations **provided treatment services to a total of 2,796,606 people living with HIV**. In Haiti, Namibia, India, and Papua New Guinea, all USAID grants providing direct facility-level support have been terminated.

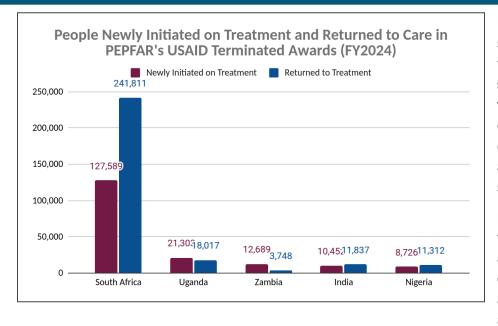
Country	Active	Terminated	Unknown	Active (%)	Terminated (%)		
South Africa	386	1,431	221	18.94%	70.22%		
Burundi	0	504	188	0.00%	72.83%		
Uganda	450	419	7	51.37%	47.83%		
Zambia	1,163	219	0	84.15%	15.85%		
Kenya	1,375	156	0	89.81%	10.19%		
Lesotho	28	132	0	17.50%	82.50%		
Ghana	0	122	119	0.00%	50.62%		
Democratic Republic of the Congo	246	119	0	67.40%	32.60%		
Nigeria	474	107	29	77.70%	17.54%		
Eswatini	1	80	0	1.23%	98.77%		
All	7,298	3,632	666	62.94%	31.32%		
* "Active" indicates the number and pe	0		upported by acti	ve grants or contra	cts; "Terminated"		
indicates those supported by terminated grants or contracts.							

Top 10 most impacted countries by number terminated

PEPFAR/USAID supported facilities by active and terminated award status



## The Status of PEPFAR's USAID Programming: HIV Treatment



In 2024, PEPFAR's USAID mechanisms supported nearly 7.4 million people on HIV treatment. Of those, **2.8 million (39%) were** supported by grants and contracts now terminated according to recently released data, and are now at risk of HIV service disruptions. In Ghana, Haiti, India, Namibia, and Papua New Guinea, <u>all</u> USAID grants supporting treatment were terminated.

In 2024, terminated grants were responsible for **initiating 224,000** people on treatment and **bringing 321,600 people back** into HIV care after falling off treatment. The most affected countries for these terminations are South Africa, Uganda, Zambia, India,

and Nigeria. In South Africa alone, over 127,000 people were initiated on treatment within terminated grants and 241,000 were brought back to HIV care. Failing to diagnose, initiate, and track patients falling out of care fundamentally risks not only the lives and health of these people, but also undermines HIV prevention efforts. Losing large numbers of people from treatment programming creates the conditions necessary for HIV resurgence in countries nearing epidemic control, and these problems are exacerbated by the now prevalent lack of data systems and community health workers PEPFAR supported in most countries.

Country	Active	Terminated	Unknown		Terminated (%)	
			Active (%)			
Ghana		21,340			100.00%	
Haiti		35,055			100.00%	
India		128,412			100.00%	
Namibia		4,033			100.00%	
Papua New Guinea		8,283			100.00%	
Eswatini	804	91,344		0.87%	99.13%	
Myanmar	297	13,923		2.09%	97.91%	
Lesotho	24,813	129,759		16.05%	83.95%	
South Africa	484,820	1,735,252		21.84%	78.16%	
Ethiopia		6,418	3,253		66.36%	
Burundi		39,414	26,285		59.99%	
Uganda	226,254	276,755	42,503	41.48%	50.73%	
All	4,418,521	2,796,606	175,616	59.78%	37.84%	

#### PLHIV on treatment in 2024 from active and terminated USAID grants: Top 12 countries

\* "Active" indicates number and percent of PLHIV on ARV treatment with PEPFAR support from PEPFAR's USAID active grants or contracts; "Terminated" indicates the number and percent of PLHIV on ARV treatment with PEPFAR support from PEPFAR's USAID terminated grants or contracts.

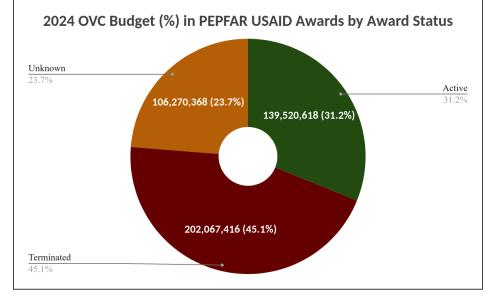
Notes on methodology and sources are available here: https://www.amfar.org/status-pepfar-usaid-programming amfAR The ANDELSON Office of Public Policy

## The Status of PEPFAR's USAID Programming: Programming for Orphans and Vulnerable Children

#### In 2024, more than <u>6.5 million services</u> were provided to highly vulnerable

children, adolescents, and their families through PEPFAR's Orphans and Vulnerable Children (OVC) program, 80% of which was by USAID administered programming. OVC programming ensures children have access to essential HIV treatment services, wrap-around services to prevent violence and neglect, ensure children have access to food, and help them stay in school.

Among PEPFAR's USAID administered foreign assistance awards, **nearly half** (47%) of the OVC funding amounts were in now terminated grants and contracts. For



**Cameroon, India, and Namibia, cancelled awards provided 100% of the USAID supported OVC services** in those countries. Overall, now terminated USAID awards supported more than 4.4 million OVC services in 2024, risking their well-being.

Number of Orphans and Vulnerable Children Provided HIV Services in 2024 by Active and Terminated PEPFAR USAID Award Status

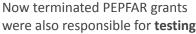
Country	Active	Terminated	Unknown	Active (%)	Terminated (%)
Burundi	29,009		30	99.90%	
Botswana	13,458	10,902	28,587	25.42%	20.59%
Côte d'Ivoire		157,598	89,066		63.89%
Cameroon		126,907			100.00%
Democratic Republic of the Congo	45,754	9,932		82.16%	17.84%
Dominican Republic	0	25,285		.00%	100.00%
Eswatini		141,456	32,164		81.47%
Ethiopia	378,138	63,179	180,026	60.86%	10.17%
Haiti		22,692	73,949		23.48%
India		104,818			100.00%
Kenya	532,034	82,876	196,600	65.56%	<b>10.2</b> 1%
Lesotho	-		168,137		
Mozambique	441,367	415,378	-	51.52%	48.48%
Malawi	148,688	139,760	20,282	48.16%	45.27%
Namibia		58,579			100.00%
Nigeria		430,212	832,235		34.08%
Rwanda	252,644	81,931	-	75.51%	24.49%
South Africa	289,091	351,175	151,740	36.50%	44.34%
South Sudan	5,423	5,266		50.73%	49.27%
Tanzania	866,019	649,836		57.13%	42.87%
Uganda	117,155	731,853	63,516	12.84%	80.20%
Zambia	258,547	502,374		33.98%	66.02%
Zimbabwe	78,415	368,874	87,048	14.68%	69.03%
All	3,455,742	4,480,883	1,923,380	35.05%	45.45%

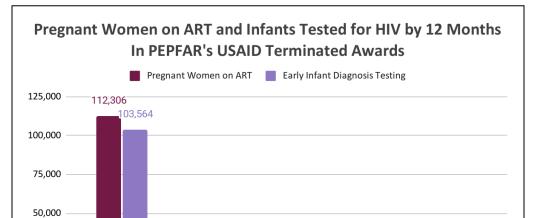
\* "Active" indicates number and percent of OVC services from PEPFAR's USAID active grants or contracts; "Terminated" indicates the number and percent of OVC services in PEPFAR's USAID terminated grants or contracts.

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## The Status of PEPFAR's USAID Programming: Prevention of Mother-to-Child Transmission of HIV

Continuous treatment of pregnant women living with HIV is crucial for their own health and to prevent mother to child transmission (PMTCT) of HIV during pregnancy and breastfeeding. In 2024, the President's Emergency Plan for AIDS Relief (PEPFAR) supported over 220,000 pregnant women on ART, 40% of whom were supported by now terminated grants. This means, over 85,000 pregnant women may experience treatment disruptions in 2025, impacting their health and leading to increased infant HIV infections.





6,738 6,419

Eswatini

6,525 5,571

Zambia

5,285 6,089

Kenya

24,948 21,598

Uganda

were also responsible for testing over 154,000 infants for HIV within their first 12 months of life, and identifying 1,065 new cases of HIV in infants. Without early diagnosis and treatment, half of children with HIV will die by age two.

South Africa

25,000

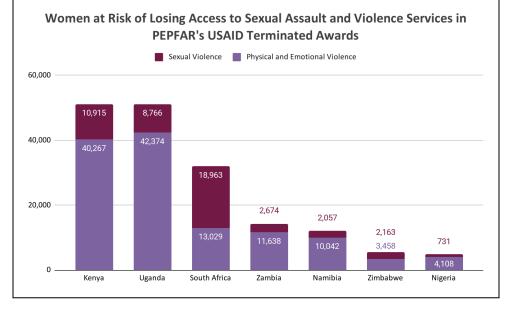
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Country	Active	Terminated	Unknown	Active (%)	Terminated (%)
Eswatini		6,738			100.00%
Haiti		1,939			100.00%
Lesotho	884	5,171		14.60%	85.40%
South Africa	26,870	112,306	3,522	18.83%	78.70%
Ghana		1,728	1,343		56.27%
Burundi		1,511	1,358		52.67%
Uganda	24,901	24,948	2,763	47.33%	47.42%
DRC	1,287	797		61.76%	38.24%
Kenya	26,294	5,285		83.26%	16.74%
Zambia	36,228	6,525		84.74%	15.26%
Nigeria	11,551	2,134	1,525	75.94%	14.03%
Tanzania	27,433	1,657		94.30%	5.70%
All	128,104	85,446	6,458	58.23%	38.84%

\* "Active" indicates number and percent of pregnant women who received ART during pregnancy in PEPFAR's USAID active grants or contracts; "Terminated" indicates the number and percent of pregnant women who received ART in PEPFAR's USAID terminated grants or contracts.

Individuals experiencing violence and sexual assault are at significantly increased risk of contracting HIV from their partners or the perpetrators of violence. PEPFAR has long provided support for HIV prevention services to individuals experiencing such violence, including post-exposure prophylaxis (PEP), emergency contraception (EC), and other clinical support services. In 2024, PEPFAR's USAID programming supported 536,297 emergency violence services.

In addition to clinical services, PEPFAR's USAID programming also provides legal support services, wrap-around services, training of healthcare workers, and other interventions to prevent violence and



support individuals to mitigate harms. PEPFAR's USAID terminated awards not only provided 365,916 emergency violence response services, but were also 66% of the violence prevention and response programming implemented by PEPFAR USAID in 2024. This includes 100% of the USAID violence prevention and response funding in the DRC, Dominican Republic, Eswatini, and Zimbabwe.

# PEPFAR's USAID Gender-Based Violence service supported by active and terminated awards: top 14 countries

Country	Active	Terminated	Unknown	Active (%)	Terminated (%)
Kenya	112,610	51,182		68.75%	31.25%
Uganda	75,221	51,140	5,865	56.89%	38.68%
South Africa		31,992			100.00%
Zambia	3,089	14,312		17.75%	82.25%
Namibia		12,099			100.00%
Zimbabwe	14,112	5,621		71.51%	28.49%
Nigeria	33,129	4,839	749	85.57%	12.50%
Ethiopia		2,373	2,904		44.97%
Papua New Guinea		2,087			100.00%
Burundi		1,863	2,161		46.30%
Eswatini	335	1,449		18.78%	81.22%
Malawi	13,330	1,254		91.40%	8.60%
Lesotho	408	751		35.20%	64.80%
Haiti		728	416		63.64%
All	340,339	182,958	13,000	63.46%	34.12%

\* "Active" indicates number and percent of gender-based violence services from PEPFAR's USAID active grants or contracts;

"Terminated" indicates number and percent of gender-based violence services from PEPFAR USAID terminated grants or contracts.

