

Trends in USAID Global Health Spending: FY2001-FY2009

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USAID Global Health Programs

- ❖ Child Survival and Maternal Health (CS/MH) - to improve the health and well-being of children and families, CS/MH programs support immunization, polio eradication, nutrition, diarrhea and pneumonia care, and maternal and neonatal health.
 - ❖ Vulnerable Children (VC) – VC funds are used to support a set of programs designed to address critical needs of children at risk and needs of children in crisis, including orphans. Examples include support to the Displaced Children and Orphans Fund (DCOF), blind Children, and other vulnerable children.
 - ❖ HIV/AIDS – HIV/AIDS funds in this category are used for HIV/AIDS interventions in more than 100 non-Focus Countries.
 - ❖ Other Infectious Diseases (OID) – OID programs address tuberculosis (TB), malaria, and other infectious diseases, including neglected diseases. OID programs also support efforts to counter anti-microbial resistance and bolster disease surveillance.
 - ❖ Family Planning and Reproductive Health (FP/RH) – FP/RH programs are voluntary and help people in low resource settings attain their desired family size.
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USAID Global Health Programs: FY2001-FY2003

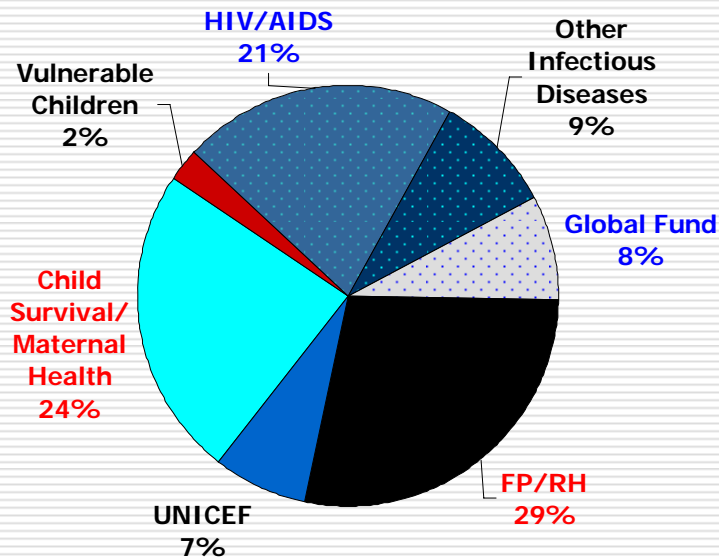
(current U.S.\$, millions)

Program	FY2001	FY2002	FY2003	% Change: FY2001-FY2003
Child Survival/Maternal Health	361.1	391.7	389.7	+7.9%
Vulnerable Children	36.7	32.3	34.3	-6.5%
HIV/AIDS	318.0	424.0	523.8	+64.7%
Other Infectious Diseases	140.2	182.0	173.1	+23.7%
Family Planning/Rep. Health	425.0	425.0	443.6	+4.4%
UNICEF	109.8	120.0	119.2	+8.6%
Global Fund	119.7	200.0	250.0	+108.9%
Total with Global Fund/UNICEF	1,510.5	1,775.0	1,933.7	+28.0%
Total without GF/UNICEF	1,281.0	1,455.0	1,564.5	+22.1%

Changes in USAID Global Health Spending: FY2001-FY2003

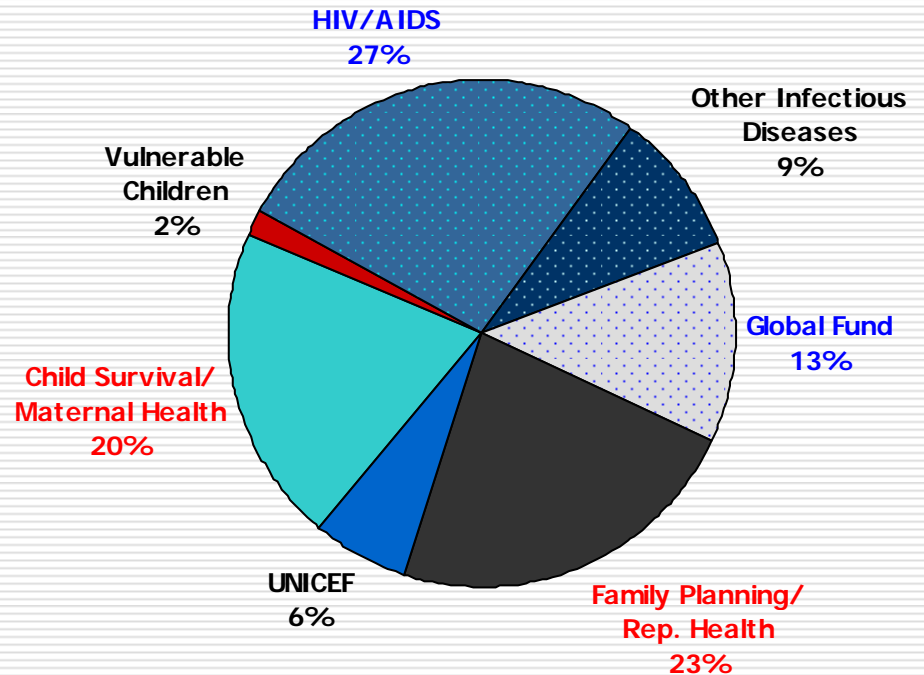
(current U.S.\$, millions)

FY2001



\$1.5 billion

FY2003



\$1.9 billion

President's Emergency Plan For AIDS Relief (PEPFAR)

Objective: To spend \$15 billion from FY2004-FY2008 on HIV/AIDS-affected individuals in 15 Focus Countries estimated to account for 50% of all HIV-positive worldwide.

- ❖ \$10 billion to bilateral HIV/AIDS efforts in 15 Focus Countries (GHAI)
- ❖ \$4 billion to more than 100 additional countries
- ❖ \$1 billion for U.S. Global Fund contribution

Botswana

Guyana

Mozambique

Rwanda

Uganda

Cote d'Ivoire

Haiti

Namibia

South Africa

Vietnam

Ethiopia

Kenya

Nigeria

Tanzania

Zambia

PEPFAR-Participating Agencies and Departments

- ❖ **Department of Defense (DoD)** - support military-specific HIV prevention programs, improve infrastructure (including laboratory, clinic and hospital facility renovation, equipment, and training), and provide treatment and care activities.
- ❖ **Department of Health and Human Services (HHS)**
 - ❖ **Centers for Disease Control and Prevention (CDC)** – build laboratory capacity; improve disease surveillance and monitoring; and evaluate public health interventions and research.
 - ❖ **Health Resources and Services Administration (HRSA)** - support education and training, provide HIV/AIDS treatment and clinical services, offer training and technical assistance, and promote palliative care. HRSA also provides population-level software to PEPFAR countries.
 - ❖ **Food and Drug Administration (FDA)** – approves anti-retroviral medication to be used in PEPFAR programs.
 - ❖ **National Institutes of Health (NIH)** support international research and training on HIV infection and its associated opportunistic infections, co-infections, and malignancies.
- ❖ **Department of Labor (DOL)** – help employers develop workplace policies that reduce stigma, prevent discrimination against HIV-positive workers and retain HIV-positive employees.
- ❖ **Office of Global AIDS Coordinator (OGAC)** – coordinate spending in the 15 Focus Countries.
- ❖ **U.S. Agency for International Development (USAID)** – provide training, technical assistance, and commodities (including pharmaceuticals) to prevent and reduce the transmission of HIV/AIDS and treat and care for people living with HIV/AIDS. USAID also supports targeted research, development, and dissemination of new technologies (including microbicides).
- ❖ **U.S. Peace Corps** – Peace Corps volunteers integrate HIV/AIDS efforts into their grassroots, community development projects.

PEPFAR Targets and Outcomes

Target

Outcome (9/2007)

❖ Support care for 10 million people infected with HIV/AIDS

❖ Support the prevention of 7 million new HIV infections

❖ Support the provision of anti-retroviral (ARV) medication for 2 million people

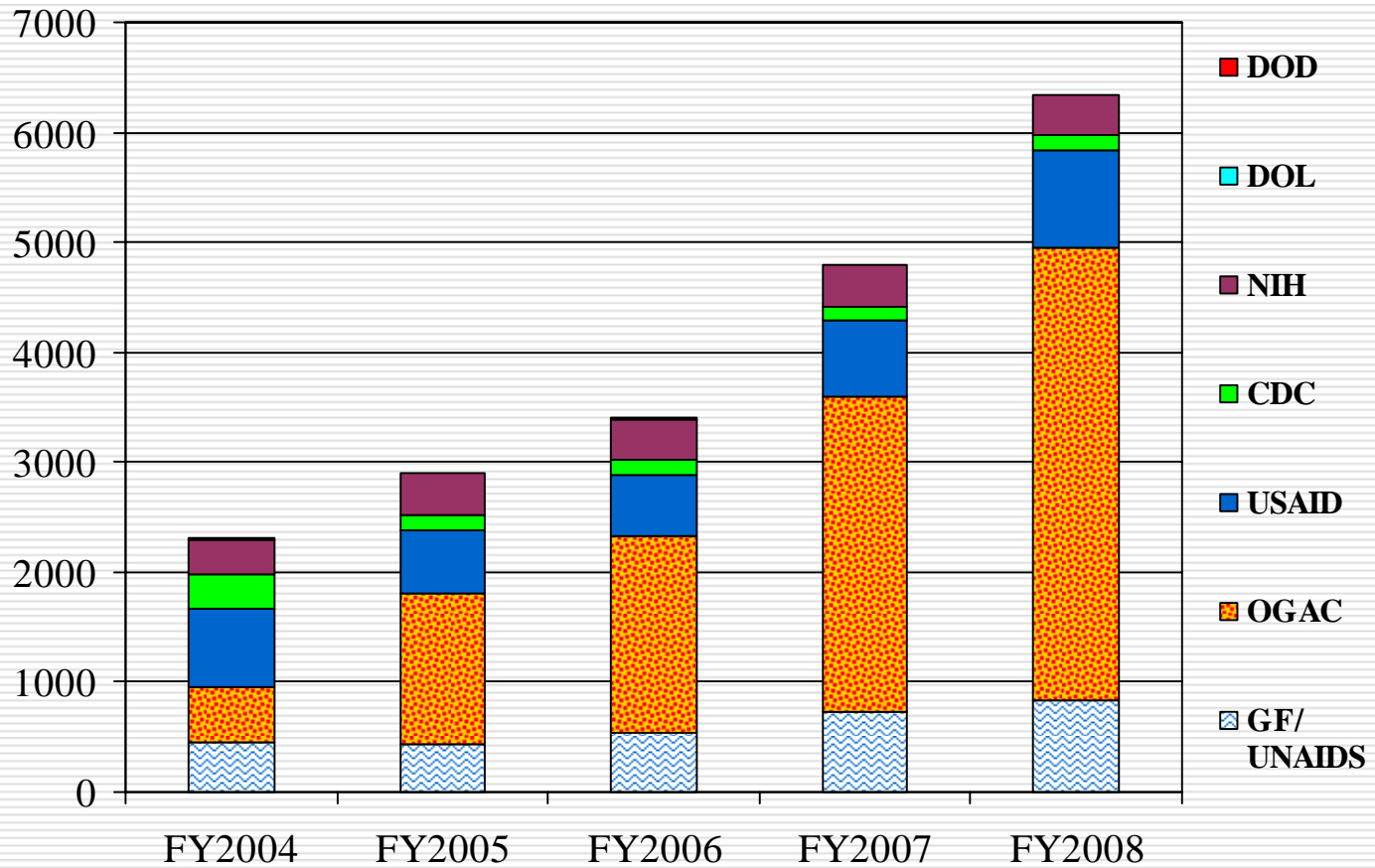
❖ Supported care for 6.6 million, including more than 2.7 million orphans

❖ Supported services to prevent mother-to-child HIV transmission during more than 10 million pregnancies

❖ Supported treatment for more than 1.4 million people

PEPFAR Appropriations: FY2004-FY2008

(current U.S.\$, millions)



USAID Global Health Programs: FY2004-FY2008

(current U.S.\$, millions)

Program	FY2004	FY2005	FY2006	FY2007	FY2008	% change: FY04-FY08
CS/MH	442.9	451.7	447.8	427.9	521.9	+17.8%
VC	36.0	35.3	29.7	19.6	20.5	-44.3%
HIV/AIDS	555.5	384.7	373.8	345.9	371.1	-33.2%
OID	200.5	215.8	445.1	586.4	707.9	+253.1%
FP/RH	429.5	437.0	435.0	435.6	457.2	+6.5%
GF	397.6	248.0	247.5	247.5	0.0	
Total w/ GF	2,062.0	1,772.5	1,978.9	2,062.9	2,078.6	+0.08%
Total w/out GF	1,664.0	1,524.5	1,731.4	1,815.4	2,078.6	+24.9%^a

USAID's Other Infectious Diseases and the President's Malaria Initiative (PMI): FY2004-FY2008

(current U.S.\$, millions)

PMI Objective: To reduce malaria mortality by 50% in 15 countries with an increase of U.S. support for global malaria programs by more than \$1.2 billion from FY2006 to FY2010.

	FY2004	FY2005	FY2006	FY2007	FY2008
TB	85.1	92.0	91.5	94.9	162.2
Malaria	79.9	90.8	102.0	248.0	349.6
H5N1 (Avian Flu)	n/a	16.3	161.5	161.5	115.0
Other	35.5	16.7	90.1	82.0	81.1
OID Total	200.5	215.8	445.1	586.4	707.9

“Other” includes programs that address “neglected diseases”, anti-microbial resistance, and bolster disease surveillance.

USAID Global Health Programs Including GHAI

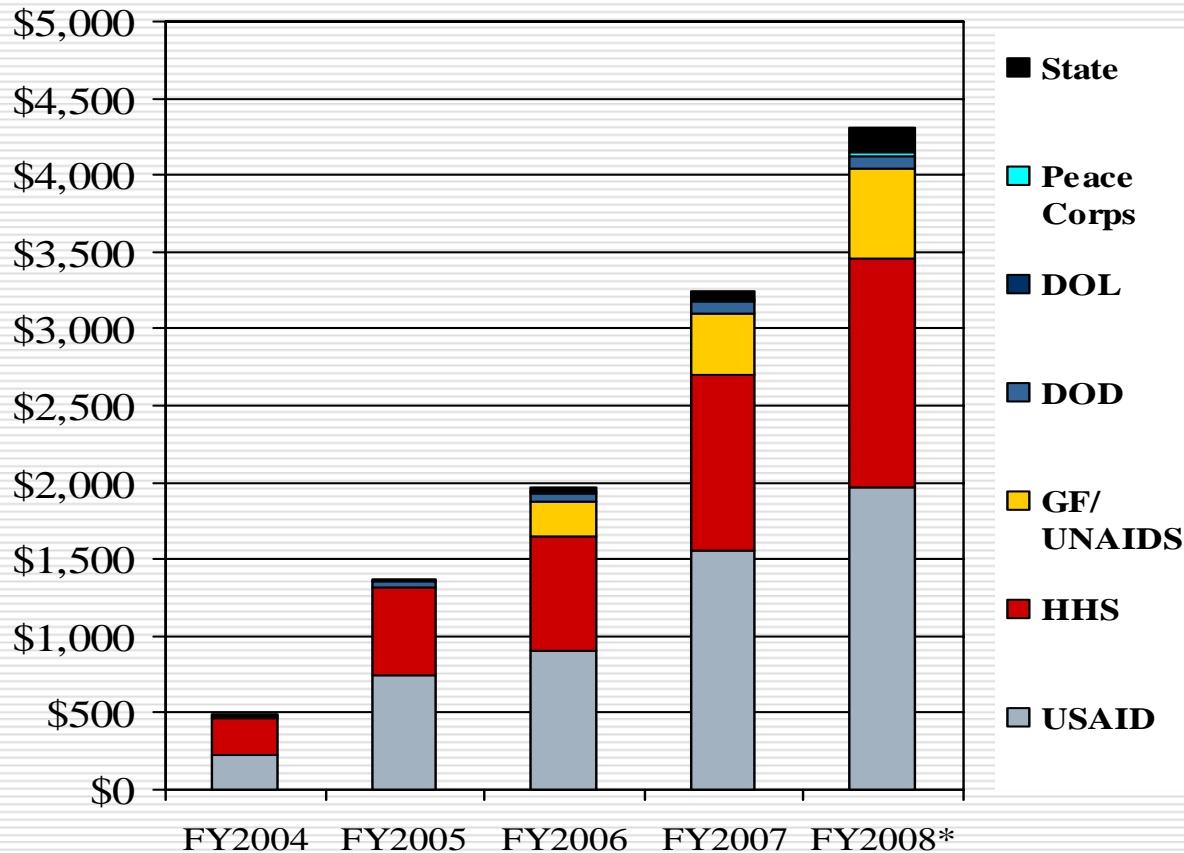
(\$ millions)

Program	FY2004	FY2005	FY2006	FY2007	FY2008	% change: FY04-FY08
CS/MH	442.9	451.7	447.8	427.9	521.9	+17.8%
VC	36.0	35.3	29.7	19.6	20.5	-44.3%
HIV/AIDS	555.5	384.7	373.8	345.9	371.1	-33.2%
GHAI	230.0	743.0	900.0	1,552.0	1,966.0	+754.8%
OID	200.5	215.8	445.1	586.4	707.9	+253.1%
FP/RH	429.5	437.0	435.0	435.6	457.2	+6.5%
GF	397.6	248.0	247.5	247.5	0.0	
TOTAL	2,062.0	1,772.5	1,978.9	2,062.9	2,078.6	+24.9% ^a
Total +GHAI	2,292.0	2,515.5	2,878.9	3,620.9	4,044.6	+143.0% ^a

a. Excludes Global Fund contributions

Transfers for HIV/AIDS Efforts in the 15 Focus Countries: FY2004-FY2008

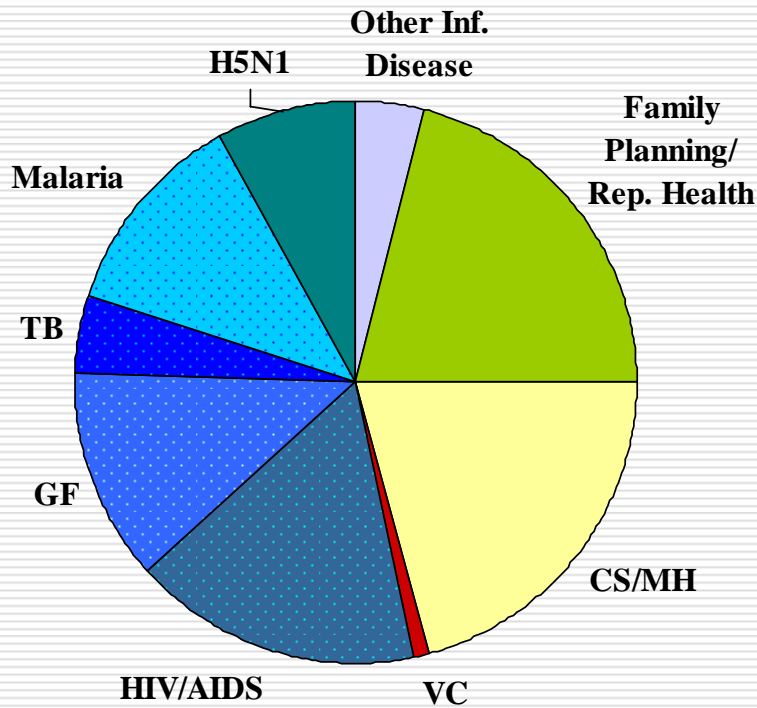
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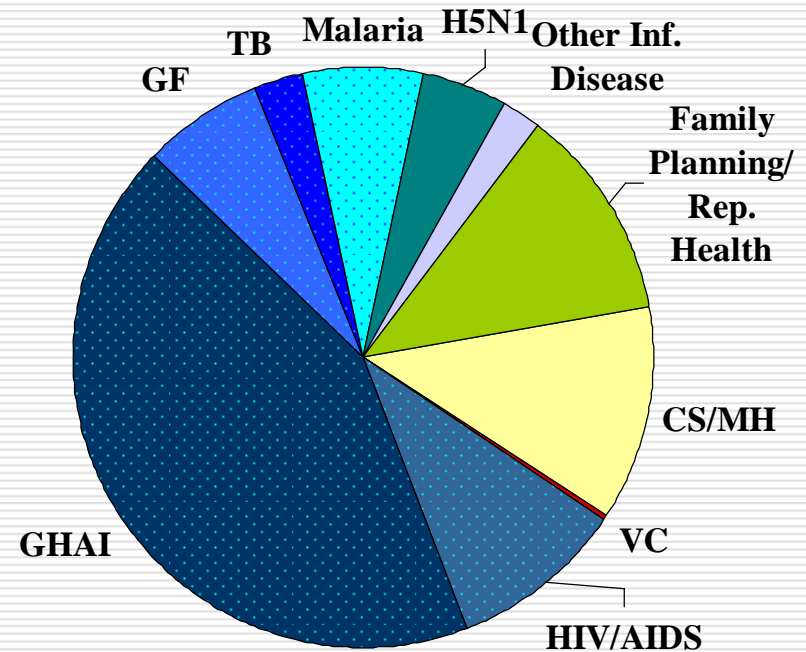
* In FY2008, Congress appropriated \$4.7 billion for HIV/AIDS efforts in the 15 Focus Countries. The FY2008 bar shows the transfer of \$4.3 billion; OGAC has not yet transferred the remaining \$0.4 billion.

USAID Global Health Spending With and Without GHAI: FY2007

FY2007 Without GHAI



FY2007 With GHAI



Note: Dotted areas indicate programs targeted at HIV/AIDS, TB, and/or malaria.

Global Health Trends: FY2001-FY2008

- ❖ Greater presidential involvement
 - ❖ Significantly higher spending on global health initiatives
 - ❖ More disease- and geographic- specific spending
 - ❖ Increased congressional direction
 - ❖ Growth of high-level posts to oversee disease spending
 - ❖ Greater engagement of State Department in global health programs
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Positive Outcomes of U.S. Global Health Policy: FY2001-FY2008

- ❖ Spike in U.S. global health spending has contributed to greater international focus and interest
 - ❖ Presidential leadership has led to a more broad-based U.S. approach to addressing health challenges (PEPFAR inter-agency approach)
 - ❖ Targets of disease programs, particularly HIV/AIDS and malaria has contributed to significant health advances
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The Future of U.S. Global Health Programs?

- ❖ Continue trend of disease-specific approach?
 - ❖ Consider impact of disease-specific approach on other health issues
 - ❖ Identify U.S. strategy: address disease, improve health, integrate both?
 - ❖ Determine how to clarify authorities/leadership
 - ❖ Clarify future role and capacity of USAID
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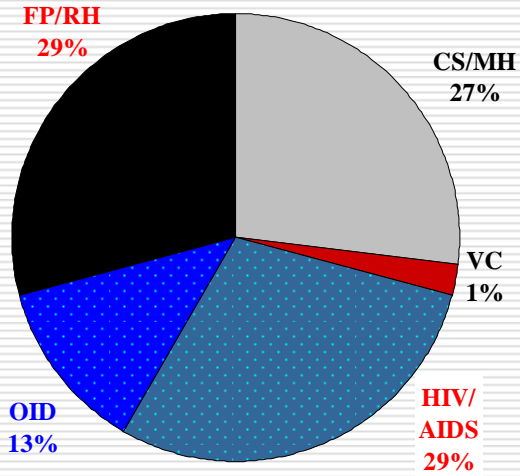
FY2009 USAID Global Health Request

(current U.S.\$, millions)

Program	FY2008 Estimate	FY2009 Request	% Change FY08-FY09
CS/MH	521.9	467.0	-10.5%
VC	20.5	10.0	-51.2%
HIV/AIDS	371.1	342.0	-7.8%
OID	707.9	591.0	-16.5%
FP/RH	457.2	327.0	-28.5%
Total	\$2,078.6	\$1737.3	-33.9%

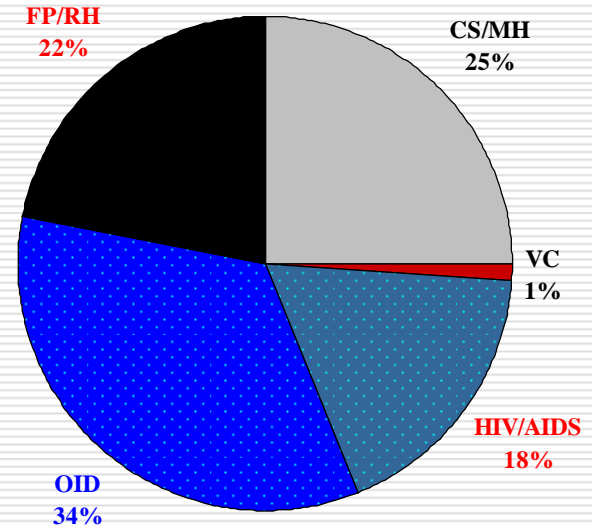
Global Health Programs: FY2002, FY2008 and FY2009

FY2002



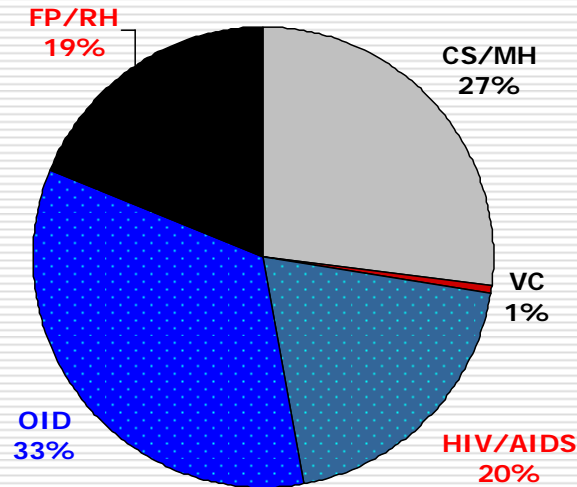
\$1.5 billion

FY2008



\$2.1 billion

FY2009 Request



\$1.7 billion

Acknowledgments

CRS Colleagues

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