



Trump Proposes New HIV Funding but Same Old (Massive) Budget Cuts

Plus: Once again federal funds get diverted from health care and into the detention of immigrant youth.

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In the wake of the Trump administration's unveiling of their Ending the HIV Epidemic plan, high ranking administration officials reassured advocates on multiple occasions that the funding being set aside for implementation of the plan would be new money and not taken from other existing programs that benefit those living with and affected by HIV. When viewed with narrowest lens possible their statements proved to be accurate, as the \$291 million in additional funding for HIV treatment and prevention included in the President's Fiscal Year 2020 budget was not repurposed from other programs.

However, while technically correct, the fact remains that this new domestic HIV funding was placed in a budget that would slash spending on HIV housing, global HIV aid, and health care and social services in general. The \$291 million in new domestic money is in large part overshadowed by a staggering 12% requested cut in discretionary spending for the Department of Health and Human Services in the President's budget, along with a proposed \$63 million cut to the Housing Opportunities for People With AIDS program (HOPWA) and alarming cuts to global HIV assistance in the form of a \$1.3 billion decrease in funding for the President's Emergency Plan For AIDS Relief (PEPFAR) and a significant decrease in the U.S. commitment to the Global Fund to Fight AIDS, Tuberculosis, and Malaria.

Of the \$291 million in new domestic HIV funding that the Trump administration is requesting Congress provide in their FY2020 budget, nearly half of it—\$140 million—is set aside for the Centers for Disease Control and Prevention (CDC) to improve HIV diagnosis and testing, connect patients to treatment, and provide PrEP. Another \$70 million has been tagged by the Administration for the Ryan White HIV/AIDS Program, specifically in jurisdictions already receiving Ryan White Part A & Part B funding that have been identified by the CDC as high-need areas. The President's FY2020 budget also includes an additional \$50 million to the Health Resources & Services Administration for expanding their services in Community Health Centers, \$25 million to the Indian Health Service to screen for HIV and prevent hepatitis C transmission, and \$6 million to the National Institutes of Health's Centers for AIDS Research.

[In a statement](#) released shortly after the President's budget was made public, the Partnership to

End HIV, STDs, and Hepatitis—of which AIDS United is a member—said that they welcomed the President’s request for \$291 million in new domestic HIV funding, but that were also “troubled by proposed cuts to other health, housing, and safety net programs...[and] disappointed with proposed cuts to PEPFAR.”

Several House appropriators struck a similar tone in their remarks on the President’s budget, acknowledging the utility of new HIV funding while condemning the Administration’s attempts to slash funding elsewhere in HHS. Rep. Rosa DeLauro (D-CT-03), chair of the Labor, Health and Human Services, and Education Appropriations Subcommittee, [told The Washington Post](#) that she was, “concerned that the president’s proposed cuts to the National Institutes of Health’s HIV research portfolio, along with deep cuts to Medicaid and the proposed repeal of the Affordable Care Act, would be counterproductive to the goal of reducing HIV infections.” Rep. Tom Cole (R-OK-04), the ranking member of the subcommittee, also had some harsh words for the Administration’s cuts to NIH, CDC, and other departments and health programs, calling them “short-sighted” and urging his colleagues not to adopt them.

Unfortunately, all of this debate over the President’s FY2020 budget comes in the wake of other recent budgetary decisions by the Trump administration to shuffle money around to fund the construction of President Trump’s border wall and incarcerate undocumented immigrant children. Last week, HHS Secretary Alex Azar said that the Trump administration would be [diverting \\$385 million](#) from a variety of programs within HHS to fund the detention of an [“overwhelming number”](#) of unaccompanied immigrant youth. This is the second year in a row that Secretary Azar has used his transfer authority to take money from health care programming and use it to fund the Administration’s detention of immigrant children, with this year’s \$286 million transfer taking away funding from research into HIV, cancer, mental health, and Alzheimer’s, as well as Head Start and the Low Income Home Energy Assistance Program. This announcement followed President Trump’s dubious national emergency declaration last month that could enable him to redirect billions of federal dollars toward the construction of his border wall. On Thursday, March 14, the Senate rejected his emergency declaration by a vote of 59 to 41, with 12 Republican Senators voting against the President’s declaration. Although the President vetoed the resolution passed in both chambers, legislators sent strong messages to the President with the vote, particularly warning against executive branch overreach.

AIDS United supports efforts by this Administration to provide new and increased funding for HIV programming, but only in so far as that funding is coupled with strong, whole-health policies that provide for all the needs of people living with and affected by HIV both domestically and abroad. Without support for and increased investment in vital programs like Medicaid and Medicare and the rescinding of policies that are harmful to LGBTQ+ individuals, immigrants and those seeking asylum, and communities of color, we will not be able to end the HIV epidemic.

Check back frequently with AIDS United’s Policy Update for all the latest on the Trump administration’s Ending the HIV Epidemic plan and budget negotiations for the coming fiscal year.

