Over the last two decades, the world has seen tremendous progress in the fight against HIV and AIDS, tuberculosis, and malaria. Expanded investments in research, prevention interventions, testing, and treatment have led to a decrease in new HIV and tuberculosis infections and have increased availability and access to medicines that treat these conditions. Millions of lives have been saved because of commitments by governments and the private sector to address these major global health threats.

Scriptures tell many stories of Jesus healing those who were sick (Luke 4:38-40). In addition to healing people himself, Jesus also commands his disciples to heal those who are sick, without expectation of pay—just as they had received his grace and healing free of charge (Matthew 10:7-8). This practice of caring for those who are sick is an integral part of Christian identity. One of the ways we have responded as churches has been through the provision of healthcare services to people around the world, including providing care and treatment to people affected by HIV and AIDS, tuberculosis, and malaria. In some communities, hospitals and clinics run by churches and faith-based organizations are the only available healthcare facilities. More often, faith-based healthcare facilities work in collaboration with governments and multilateral entities to ensure people have access to health services wherever they may be.

The U.S. and other donor countries provide funding, human resources, and technical support to countries heavily impacted by HIV and AIDS, tuberculosis, and malaria. While churches and other faith-based organizations provide vital services to those affected by these illnesses, scaling up services and research activities is possible through the critical role of resource allocation by governments and multilateral organizations. Despite the progress we have made, more than 3 million people die from these diseases annually. It is imperative for governments, including our own, to continue investing in programs that work to combat these global health threats.

As lawmakers work to finalize the FY2020 budget, we urge Congress to provide robust funding allocations for the following programs:

**THE GLOBAL FUND TO FIGHT AIDS, TUBERCULOSIS AND MALARIA (GLOBAL FUND):**

The Global Fund to Fight AIDS, Tuberculosis and Malaria (Global Fund) – Founded in 2002, this fund is a public-private financing mechanism that works in partnership with governments, civil society and the private sector to reduce the impact of HIV and AIDS, tuberculosis and malaria globally. We urge Congress to dedicate no less than $1.6 billion to this program.

**THE U.S. PRESIDENT’S EMERGENCY PLAN FOR AIDS RELIEF (PEPFAR):**

PEPFAR is the bilateral U.S. government’s response to the global HIV and AIDS epidemic and represents the largest commitment by any nation to address a single disease in history. Created in 2003, PEPFAR has been credited with transforming the global HIV and AIDS response. We ask Congress to allocate $5.5 billion for PEPFAR.

**THE PRESIDENT’S MALARIA INITIATIVE (PMI):**

Launched in 2005, PMI is a U.S. government initiative that works to reduce malaria-related deaths in heavily impacted countries by 50 percent. We urge Congress to apportion no less than $850 million to ensure continuation of malaria elimination activities.

**ADDITIONAL RESOURCES:**

- [The Global Fund Results Report Summary](#)
- [UNAIDS Fact Sheet July 2018](#)