

Impact of U.S. funding suspensions on community HIV response in the Latin America and Caribbean region

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Background

- With historically low HIV prevalence and incidence, the Latin American region has generally been considered to have a concentrated and controlled HIV epidemic.
- Consequently, this led to a lower prioritization of global response in the Latin American region and recent increases in new HIV infections.
- In 2024, the Latin American region was one of only three regions in which the number of new infections increased since 2010.
- With a HIV prevalence exceeding 1.2% in the general population and as high as 5% in Haiti, the Caribbean has had more substantial investment from PEPFAR and other foreign support supporting HIV prevention, treatment, and PrEP programming
- In response, there has been an observed 22% decline of new infections in the Caribbean region.
- We aim to examine the impact of US funding suspensions on community HIV response in the Latin American and Caribbean region

Methods

- **Design:** The survey was developed in English, Spanish, Portuguese, and Haitian Creole. Data collection spanned February 18 – March 14th 2025. The survey was circulated through networks of community-led HIV services organizations spanning the LAC region. Responding organizations were asked to provide their organization name to be used for identification and removal of duplicate entries. Organization name was an optional field.
- **Sample:** After eliminating forms with invalid fields and duplicate entries, 40 organizations provided information for this analysis.

Results

- Participant organizations were predominantly non-governmental organizations or community-based organizations.
- Respondent organizations represented 13 countries: Bolivia, Colombia, Costa Rica, Dominican Republic, Ecuador, Guatemala, Honduras, Haiti, Panama, Paraguay, El Salvador, Trinidad and Tobago, and Venezuela.
- Of 40 respondents, 24 (56%) reported that they had received funding from the US government (USG) in the past year. Of the 24 with USG funding, **21 (87%) reported that they had received a suspension or funding freeze.**
- In our sample alone, **156,164 beneficiaries** are estimated to lose access to HIV treatment and prevention services programs as a result of funding freezes.
- Thirty-two types of programs were affected by the funding freeze, but most commonly included **sexual prevention programs, HIV testing services, psychosocial support, humanitarian services, and GBV prevention and clinical care.**

Results, continued

- Populations most commonly served by these programs include: **people living with HIV, key populations including transgender people, people engaged in sex work, gay men and other men who have sex with men, and migrant populations**
- The median annual affected budget was USD \$140,000, representing a **median 46% of the organizations' annual budgets**, reaching 100% in some cases
- In countries which had PrEP available, **100% of the surveyed organizations had PrEP programming terminated**

Conclusions

- Despite greater autonomy from foreign support and less reliance on US government funding streams, HIV programs in the LAC region are significantly impacted.
- Participant organizations were doubtful that the terminated programs would be continued under support of their government.
- As of 2023, only 22 of 33 countries in Latin America and the Caribbean had policies approving daily oral PrEP for HIV prevention, 15 had approved generic tenofovir disoproxil fumarate/emtricitabine, and only 13 had incorporated PrEP into their public health system. Any recent progress on the HIV epidemic in the region made through the introduction of PrEP is likely to be drastically affected, due to its dependence on PEPFAR and USAID funding.

Figure 1: Most frequently affected populations by the US government funding freeze on HIV programming among a sample of HIV organizations in the Latin America & Caribbean region (n=21)

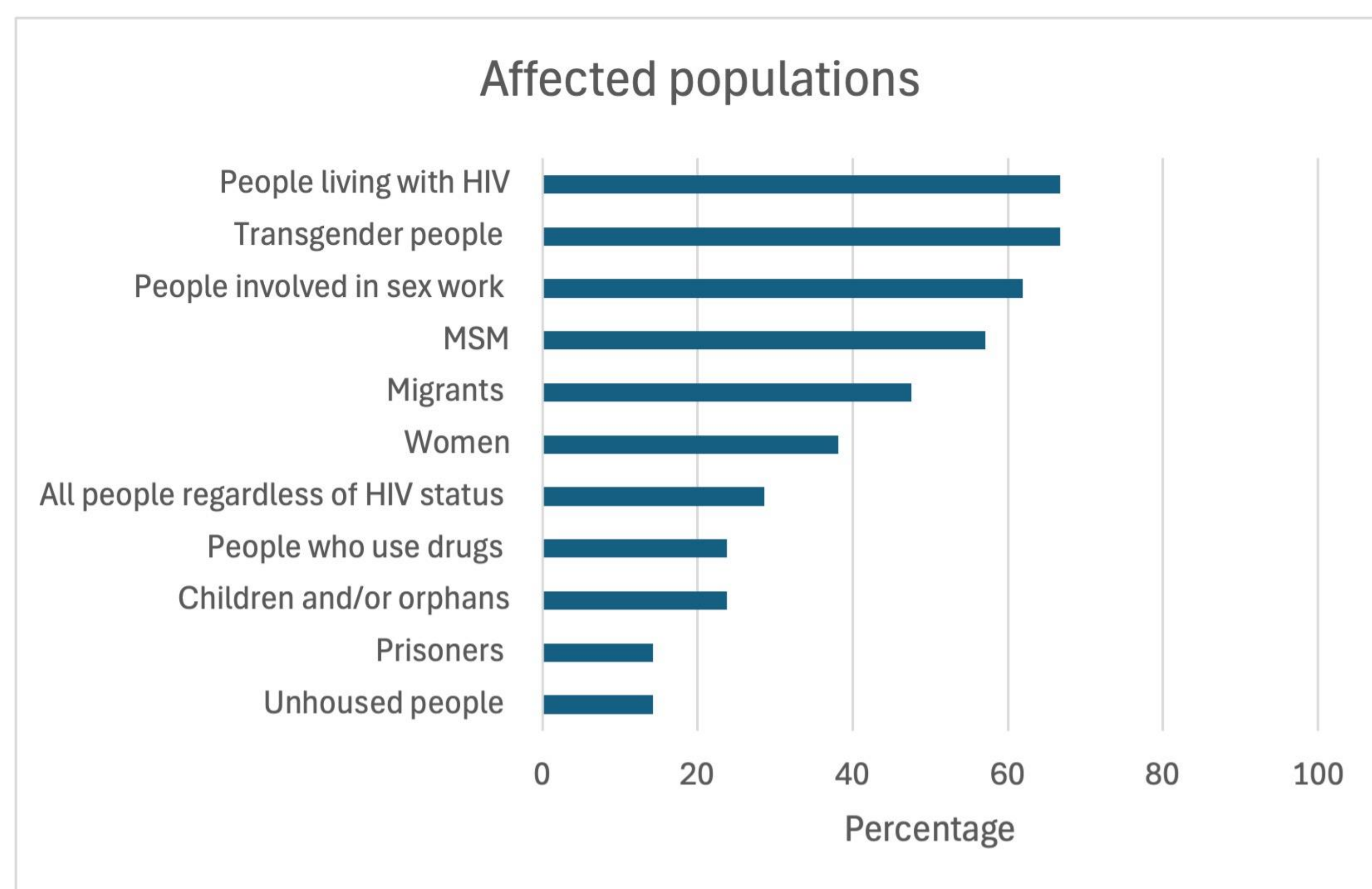
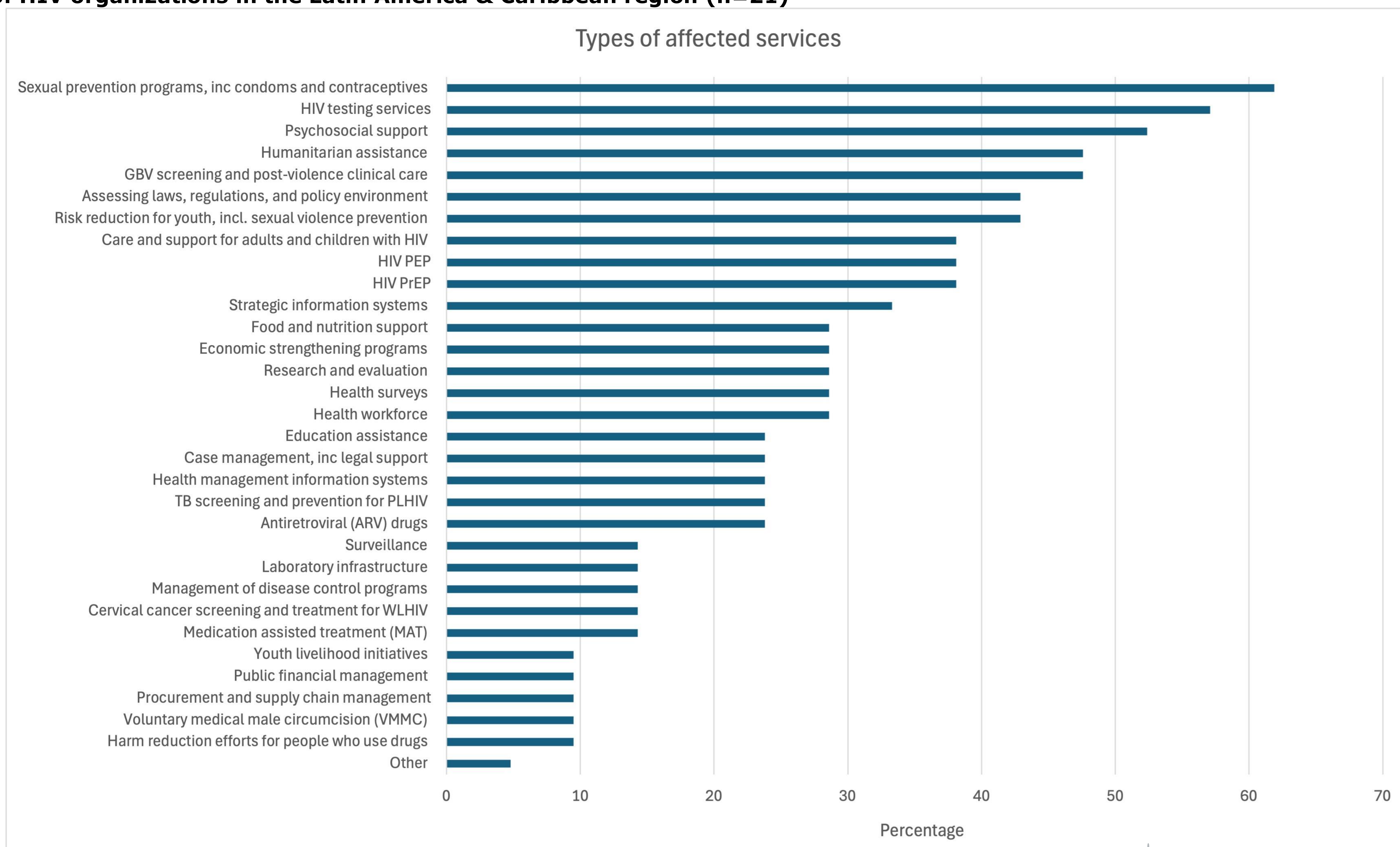


Figure 2: Most frequently affected services by the US government funding freeze on HIV programming among a sample of HIV organizations in the Latin America & Caribbean region (n=21)



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