

June 1, 2026

The Honorable Marco Rubio  
U.S. Department of State  
2201 C Street NW  
Washington, DC 20520

Dear Secretary Rubio:

The Administration has informed Congress that it intends to reserve billions of dollars to cover costs associated with the close-out of terminated foreign assistance awards under the U.S. Agency for International Development, of which up to \$3.2 billion will be drawn from Fiscal Year (FY) 2025 development and global health funding.

We urge you to reverse this decision and obligate the full \$3.2 billion in expiring FY25 assistance, including \$2 billion in global health funding, to programs that meet urgent health and development needs. Global health and development investments help protect American citizens, build global stability, and foster economic growth.

We request that you satisfy any remaining payments owed to implementers, while providing a detailed, publicly available accounting of all close-out costs to Congress, broken down by close-out cost type, fiscal year, and funding account. To the extent global health funding is used for closeout, it should only be spent on global health programs.

Using up to \$2 billion in FY2025 funding, already appropriated for health assistance, to cover closeout costs would stymie efforts to strengthen global health security, just as the U.S. and its partners are facing an increasing threat from emerging or newly resurgent infectious diseases, as seen in the current Ebola emergency. This loss of funding for health programs would also undermine progress in the deployment of American innovations in health, a key tenet of the America First Global Health Strategy.

Many countries are already struggling with earlier aid reductions and the global economic impacts of conflicts around the world. Using up to \$2 billion in health assistance for closeouts would mean massive cuts in specific programs that meet critical needs, including \$150 million from TB programs, \$330 million from programs to combat HIV/AIDS, \$250 million from malaria programs, \$320 million from maternal and child health, a related \$451 million from safe drinking water, sanitation, and hygiene, and nearly \$650 million from global health security, among other critical programs.

Global health security (GHS) programming is included in all of the signed bilateral health MOUs, in accordance with the Administration's America First Global Health Strategy and it is a crucial contribution to pandemic preparedness. However, if the Administration decides to draw down \$2 billion from FY25 global health resources, it will mean a 92% cut to global health security funding, with severe consequences:

- The State Department would not be able to fund the majority of the GHS activities across countries in year 1 of these agreements, already committed to by the Administration, and critical investments in global pandemic preparedness would be neglected.

Despite significant progress in recent decades, TB is still the world's deadliest infectious disease, with an estimated 10.7 million people falling ill (including more than 10,000 in the U.S.), and 1.23 million people dying in 2024 alone. Based on USAID bilateral TB historical spending, a 38% cut in funding could result in proportional losses of:

- 209,300 preventable cases of TB and 68,600 preventable deaths from TB

Global malaria rates continue to rise, with more than 282 million cases – including 2,000 detected in the U.S. – and 610,000 deaths from the disease in 2024, primarily among children. Based on Malaria Atlas Project estimates, a 31% cut to a year of funding for the President's Malaria Initiative could result in proportional losses of:

- 3.8 to 5.6 million preventable cases of malaria and 22,000 to 51,400 preventable deaths from malaria

Newly released Department of State data shows a sharp decline in HIV testing and prevention, including a 34% drop in HIV testing among children and 50,000 fewer children on lifesaving treatment. A further reduction in funding for HIV/AIDS would set progress back even further, raising the risk of new infections and undermining long-term epidemic control.

An 82% cut in nutrition funding could result in proportional losses of:

- 28 million children who would have benefited from malnutrition prevention and treatment programs, including vitamin A supplementation for 14.6 million children
- 11 million pregnant women who would have benefitted from nutrition programs, including prenatal supplements for 4.9 million women

Based on FY2023 USAID maternal and child health data, a 48% cut to relevant funding, including to critical water and sanitation programs, could result in:

- Loss of resuscitation programs for 114,000 babies who are not breathing at birth
- Loss of safe facilities for childbirth for 5.76 million women
- Approximately 3 million people going without safe drinking water and nearly 2 million who will not receive a safe latrine at home, school, or in their healthcare facility

For nearly 60 years, U.S. government investments in international FP/RH programs have sought to address the unmet need for family planning and reproductive health services. The zeroing out of virtually all FY 2025 family planning funds means that:

- Over the course of a year, an estimated 47.6 million women, girls, and couples will be denied access to contraceptive care, resulting in 17.1 million unintended pregnancies and 34,000 preventable pregnancy-related deaths.

U.S. investments in global health have made remarkable progress in the fight against the world's deadliest diseases and protecting the health of men, women, and children around the world. Leaving these funds unspent, which were appropriated with bipartisan support, would contradict the vision set forth under the America First Global Health Strategy and compromise U.S. leadership around the world.

We urge you to ensure that the Administration obligates the full \$3.2 billion in expiring FY25 assistance, including the \$2 billion global health funding, consistent with the law.

Sincerely,

Aid on the Hill  
 American Society of Tropical Medicine and Hygiene  
 American Thoracic Society  
 AVAC  
 Breathe California of the Bay Area, Golden Gate and Central Coast  
 CARE  
 Catholic Medical Mission Board  
 Clearinghouse on Women's Issues  
 CORE Group  
 Doctors of the World USA  
 Feminist Majority  
 Freeland  
 Friends of the Global Fight  
 Global Communities  
 Health GAP  
 HelpAge USA  
 Last Mile Health  
 Liberia Chimpanzee Rescue & Protection

Maryknoll Office for Global Concerns  
 Medical IMPACT  
 MSI Reproductive Choices  
 Muso  
 Nama Health Impact  
 National Birth Equity Collaborative  
 PAI  
 Partners in Health  
 Physicians for Human Rights  
 Population Connection Action Fund  
 Public Citizen  
 RESULTS  
 RESULTS-MA  
 Stop TB USA  
 United CHWS Initiative Uganda Limited (UCHWIUL)  
 WaterAid America  
 We Are TB

CC:

The Honorable Mario Díaz-Balart, Chairman, House Appropriations Subcommittee on National Security, Department of State, and Related Programs

The Honorable Lois Frankel, Ranking Member, House Appropriations Subcommittee on National Security, Department of State, and Related Programs

The Honorable Lindsey Graham, Chairman, Senate Appropriations Subcommittee on State, Foreign Operations, and Related Programs

The Honorable Brian Schatz, Ranking Member, Senate Appropriations Subcommittee on State, Foreign Operations, and Related Programs

The Honorable Brian Mast, Chairman, House Foreign Affairs Committee

The Honorable Gregory Meeks, Ranking Member, House Foreign Affairs Committee

The Honorable James E. Risch, Chairman, Senate Foreign Relations Committee

The Honorable Jeanne Shaheen, Ranking Member, Senate Foreign Relations Committee