

Congress of the United States
Washington, DC 20515

June 30, 2022

The Honorable Dr. John N. Nkengasong
Ambassador-at-Large and Coordinator of United States
Government Activities to Combat HIV/AIDS Globally
U.S. Department of State
2201 C St. NW
Washington, DC 20520

Dear Ambassador Nkengasong,

We extend our congratulations to you on your recent confirmation as Ambassador-at-Large and Coordinator of United States Government Activities to Combat HIV/AIDS Globally. Your expertise is highly welcomed in this role and we look forward to partnering with you to advance health equity around the world.

As you step into your new position, we encourage you to ensure that programs under the President's Emergency Plan for AIDS Relief (PEPFAR) are guided by the tenets of President Biden's *Memorandum on Advancing the Human Rights of Lesbian, Gay, Bisexual, Transgender, Queer, and Intersex Persons Around the World*. PEPFAR represents the largest commitment of United States financial support overseas for gay and bisexual men, other men who have sex with men (MSM), and transgender women.¹ But the lack of a Senate-confirmed ambassador focused solely on PEPFAR programs for over two years has limited the United States' ability to make meaningful and long-term commitments to lesbian, gay, bisexual, transgender, queer, and intersex (LGBTQI+) populations most at risk of acquiring HIV. **We urge you to bolster funding and diplomatic commitments as well as look into broadening the scope of PEPFAR programs to actively promote LGBTQI+ rights globally.**

According to the Global Joint United Nations Program on HIV/AIDS (UNAIDS) report, gay men and other men who have sex with men are at twenty-five times greater risk of acquiring HIV than heterosexual adult men.² A recent study has also suggested that transgender women are up to sixty-six times more likely than the general population to acquire HIV.³ Recognizing the increased prevalence of HIV in these groups, institutions have identified gay men and other men who have sex with men and transgender people as key population groups, who are particularly vulnerable to HIV and frequently lack adequate access to resources.⁴ In 2020, key populations and their sexual partners accounted for 65% of HIV infections worldwide and 93% of infections outside of sub-Saharan Africa.⁵ Unfortunately, only 2% of all HIV/AIDS funding targets key at-risk populations despite LGBTQI+ and other key population-led organizations

¹ "Interagency Report on the Implementation of the Presidential Memorandum on Advancing the Human Rights of LGBTQI+ Persons Around the World (2022)." U.S. Government, April 2022, <https://www.state.gov/wp-content/uploads/2022/04/Interagency-Report-on-the-Implementation-of-the-Presidential-Memorandum-on-Advancing-the-Human-Rights-of-Lesbian-Gay-Bisexual-Transgender-Queer-and-Intersex-Persons-Around-the-World-2022.pdf>

² "Global HIV & AIDS Statistics – Fact Sheet." UNAIDS, 2021, <https://www.unaids.org/en/resources/fact-sheet>.

³ "Trans women 66 times more likely to have HIV, with trans men nearly 7 times more likely, global analysis finds." Krishen Samuel, NAM, Mar. 2022, <https://www.aidsmap.com/news/mar-2022/trans-women-66-times-more-likely-have-hiv-trans-men-nearly-7-times-more-likely-global>.

⁴ "Key Populations." UNAIDS, <https://www.unaids.org/en/topic/key-populations>.

⁵ "Confronting Inequalities: Lessons for Pandemic Responses from 40 Years of AIDS." UNAIDS, UNAIDS, 2021, <http://unaids.org/>.

being strategically placed to reach their communities with safe and welcoming services.⁶ In addition, the Foundation for AIDS Research and others documented that the expanded global gag rule under the previous administration harmed PEPFAR's programming ability to reach LGBTQI+ communities with critical HIV services.⁷ Additional efforts need to be made to rebuild partnerships and community trust to ensure comprehensive care and information reaches all people who need it. **We firmly believe that providing direct funding to LGBTQI+-led providers must be a priority for the PEPFAR team to address these disparities and ensure equitable access to treatment and prevention programs for LGBTQI+ people.**

Service delivery alone cannot mitigate the HIV epidemic among LGBTQI+ communities. Marginalization and criminalization continue to have a negative impact on HIV outcomes, undermining the United States' goals for PEPFAR funding. Georgetown University found that where same-sex sexual relationships were criminalized, levels of HIV status knowledge and viral suppression among people living with HIV were significantly lower than in countries without criminalization statutes⁸. This was also true for criminalization of sex work and drug use. In comparison, countries that adopted laws that advanced nondiscrimination, supported human rights institutions, and addressed gender-based violence saw better HIV outcomes.

As you know, PEPFAR operates in several countries where LGBTQI+ relationships remain criminalized.⁹ While we appreciate that PEPFAR's 2022 Country Operational Plan (COP) Guidance elevated the necessity of enabling environments and structural interventions, we strongly believe that **PEPFAR must make a more concerted effort to coordinate with the State Department, USAID, and the NGO community to advance policies and legal reforms to combat the criminalization of same-sex sexual relations.** There are clear examples of success where this has occurred: In Botswana advocates showcased the ways in which criminalization of same-sex sexual conduct limited the ability of LGBTQI+ individuals to access basic social, health, and HIV-related services.¹⁰ These efforts ultimately contributed to the decriminalization of same-sex relationships in 2019. Further investments in LGBTQI+-led efforts could bear similar results in the fight for global equality, and we hope that you will work closely with the State Department's Global Equality Fund to identify areas of collaboration to achieve these aims.

The Office of the U.S. Global AIDS Coordinator (OGAC) must use its diplomatic and political weight to help protect LGBTQI+ people from violence, stigma, and discrimination in PEPFAR countries. OGAC was instrumental in nearly eliminating the official practice of forced anal examinations in Tanzania and has conducted behind-the-scenes efforts to respond to

⁶ "Fast Track or Off Track: How Insufficient Funding for Key Populations Jeopardizes ending AIDS by 2030." aidsfonds, Oct. 2020, https://aidsfonds.org/assets/resource/file/AF%20off-track%20report_A4_V2_I%20%289%29.pdf.

⁷ "The Effect of the Expanded Mexico City Policy on HIV/AIDS Programming: Evidence from the PEPFAR Implementing Partners Survey." amfAR, Jan. 2019, <https://www.amfar.org/wp-content/uploads/2022/04/IB-1-31-19a.pdf>

⁸ "Law, criminalisation and HIV in the world: have countries that criminalise achieved more or less successful pandemic response?" Georgetown University, Aug. 2021, https://scholarship.law.georgetown.edu/ois_papers/96/

⁹ "Where is PEPFAR's Strategy for Key Populations? Community Analysis of the Successes and Challenges of PEPFAR's Key Population Program + Recommendations for the Next PEPFAR Ambassador." HealthGAP, Sep. 2021, <https://healthgap.org/wp-content/uploads/2021/09/PEPFAR-Key-Populations.pdf>

¹⁰ "Historic court case in Botswana on decriminalization of homosexuality." Aidsfonds, Feb. 2020, <https://aidsfonds.org/news/historic-court-case-in-botswana-on-decriminalization-of-homosexuality>

anti-LGBTQI+ legislation as these bills are introduced.¹¹ We encourage you to work in tandem with local LGBTQI+ civil society advocates to identify areas of opportunity for OGAC to further leverage engagement with other government officials and funding opportunities to support LGBTQI+ rights efforts.

We also remain deeply concerned about current statutes governing PEPFAR programming that disproportionately harm those in the LGBTQI+ community, including those that require broad religious refusals, abstinence-only programming, and the anti-prostitution loyalty oath (APLO). While we are working to acknowledge the damage caused by these policies, including through legislation like the GLOBE Act, we hope that the PEPFAR program will also take steps to mitigate the harms caused by these policy riders.

It is only by reaching the most vulnerable and most marginalized, including those in the LGBTQI+ community, that we will be able to secure a world free from AIDS. We look forward to partnering with you to ensure that our PEPFAR programs protect, promote, and advance the rights of LGBTQI+ individuals in line with President Biden’s vision for our global engagement.

Sincerely,



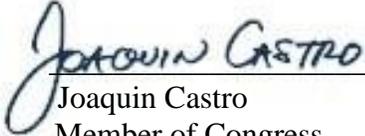
Dina Titus
Member of Congress



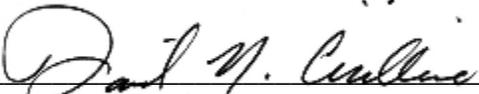
Edward J. Markey
United States Senator



Tammy Baldwin
United States Senator



Joaquin Castro
Member of Congress



David Cicilline
Member of Congress

¹¹ “If We Don’t Get Services, We will Die: Tanzania’s Anti-LGBT Crackdown and the Right to Health.” Human Rights Watch, Feb. 2020, <https://www.hrw.org/report/2020/02/03/if-we-dont-get-services-we-will-die/tanzanias-anti-lgbt-crackdown-and-right>.