GHTC
global health technologies coalition

advancing **innovation** to save lives

May 22, 2025

The Honorable Susan Collins
Chair
Senate Appropriations Committee
413 Dirksen Senate Office Building
Washington, DC 20510

The Honorable Patty Murray
Ranking Member
Senate Appropriations Committee
154 Russell Senate Office Building
Washington, DC 20510

The Honorable Shelley Capito
Chair
Subcommittee on Labor, Health and Human Services, Education, and Related Agencies
170 Russell Senate Office Building
Washington, DC 20510

The Honorable Tammy Baldwin
Ranking Member
Subcommittee on Labor, Health and Human Services, Education, and Related Agencies
141 Hart Senate Office Building
Washington, DC 20510

Dear Members of the Appropriations Committee:

As members of the Global Health Technologies Coalition (GHTC)—a group of more than 50 nonprofit organizations, academic institutions, and aligned businesses advancing the creation of new drugs, vaccines, diagnostics, and other tools for global health—we write to highlight the critical role of US programs that support global health research and development (R&D) and encourage your continued support for this important work.

Our request: In fiscal year 2026 (FY26), we strongly urge the Committee to support global health research by:

- Increasing funding for the **National Institutes of Health (NIH)**, including $103.7 million for the **Fogarty International Center (FIC)** as well as $7.29 billion for the **National Institute of Allergy and Infectious Diseases (NIAID)** and the $3.95 billion for the **Office of AIDS Research (OAR)**.
- Sustaining funding for the **Centers for Disease Control and Prevention's (CDC's) National Center for Emerging and Zoonotic Infectious Diseases (NCEZID)** at $760.27 million and the **Global Health Center (GHC)** at $692.84 million.
- Appropriating robust funding and strong funding directive for emerging infectious disease R&D and for all relevant accounts for antimicrobial resistance (AMR) R&D for the **Biomedical Advanced Research and Development Authority (BARDA).**

Each of these agencies' work on global health R&D has in some capacity been jeopardized, frozen, or eliminated in the past 100 days. While we appreciate the need for thoughtful reviews of federal funding and the pursuit of an effective executive branch, the cuts to and eliminations of key global health programs will damage the legacy of US leadership in the innovation space. We respectfully request that we move forward together to reestablish the United States as a powerhouse of biomedical R&D, as well as a trusted and well-funded research partner to the world.

Global Health R&D is a practical and moral Imperative

Why global health matters: Global health is a bipartisan cornerstone of US foreign policy. Supporting the public health of partner countries has practical and moral justifications:

- It protects Americans from national health security threats, increases global political stability, lifts economies, and most importantly, saves millions of lives.
- As an example, the US government's multi-agency Operation Warp Speed supported the development of four globally distributed Food and Drug Administration-approved or authorized COVID-19 vaccines. This helped to save 14 million lives in the first year of the pandemic. Additionally, the vaccines created an estimated $895 billion of savings in direct healthcare costs between December 2020 and March 2022.
- Investments in global health R&D also lead to economic gains in the US and in partner countries. As told in a recent analysis conducted in partnership with Policy Cures Research and GHTC, between 2007 and 2022, $46 billion in global health R&D investment led to $102 billion in economic activity and the creation of over 600,000 jobs country-wide. This is not to mention the follow-on effects of the innovations the US invested in during that time period which are projected to generate $251 billion and counting for the US economy.

Still, millions of people die every year because we do not have the technologies to save them.

The challenge: In 2022, 1.3 million people were killed by tuberculosis, 1.3 million people were newly diagnosed with HIV, and 249 million people were infected by malaria. In 2021, at least 1.14 million people were killed by bacterial antimicrobial resistance (AMR) and 4.71 million deaths were associated with bacterial AMR. More than 1 billion people worldwide are affected by neglected tropical diseases—a group of 21 diseases caused by a variety of pathogens. Women and children are often most vulnerable, especially in low-resource settings.

The United States, as a biomedical research powerhouse, can change history through relatively small public investments.

New medical products are needed to overcome neglected diseases; to beat AMR; to replace outdated and toxic treatments; to defeat future pandemics; and to better reach low-resource, remote, and unstable settings. Examples of the technologies we need include:

- New tools to prevent, diagnose and treat drug-resistant microbial infections.
- A vaccine against HIV infection and a cure for HIV/AIDS.
- Innovative treatments and prevention technologies for malaria.
- Shorter tuberculosis treatment regimens and a more effective vaccine.
- Better diagnostics and treatments for many neglected tropical diseases.

Why public investment is needed: US government support for this research is critical because the private sector typically does not invest in technologies that have limited profit potential.

- Public investments often support Product Development Partnerships—not-for-profit organizations that convene government, science, private sector, and community partners to develop new global health technologies.
- Investments in new global health technologies for low-resource settings will naturally benefit rural and frontier communities in the US either directly or through the creation of modular

platform technologies.
- Empowering countries through global health investments that lead to healthier populations lead to stronger economies and stable nations.

NIH Fogarty: Our first line of defense against biosecurity threats and disease

The NIH FIC accelerates science, partnerships, and technical assistance with partner countries to advance new technologies for pressing health challenges, delivering significant scientific results and foreign goodwill with less than one-quarter of one percent of the total NIH budget.

What's needed: We urge Congress to provide $103.7 million in funding for FIC in FY26.
Why FIC matters: FIC has forged decades-long international partnerships and trained thousands of scientists around the world—many of whom hold high-ranking academic and government positions as a result—and have moved the needle on neglected and emerging infectious diseases, such as HIV/AIDS, COVID-19, Zika, and Ebola.

- These investments improve public health in the United States. They strengthen the world's ability to detect emerging and novel disease threats sooner and create platforms for partnerships between scientists in the United States and other countries.
- FIC investments in training and enhancing countries' research capacities enhances countries' self-reliance.
- FIC investments lead to new tools or interventions designed for low-resource settings and these innovations can be deployed back in the United States, where they can drive down costs and improve access to health care in rural settings.

NIH NIAID: A leader of global health research

NIAID is the world's leader and largest funder of global health research and development. NIAID has a unique mandate among the Institutes, requiring it to respond to emerging public health threats and, thus, must better understand the mechanisms of diseases for the development of essential countermeasures.

What's needed: We urge Congress to increase funding for NIAID so that the institute can continue to provide robust funding for poverty-related and neglected tropical diseases research programs. We urge Congress to provide $7.29 billion in funding for NIAID in FY26.
Why NIAID matters for Americans: NIAID is the world's leading sponsor of research that leads to new global health technologies.

- NIAID supports basic research that expands our fundamental knowledge of HIV/AIDS, malaria, tuberculosis, and neglected tropical diseases. This research leads to new ideas for how to defeat these diseases. Recently, NIAID developed a monoclonal antibody Ebola treatment, mAb114, which was found to dramatically improve the survival rate of infected patients in a clinical trial carried out amid an outbreak in the Democratic Republic of the Congo.
- NIAID researchers are actively supporting the development of more effective diagnostic tests, new antibiotics, and novel treatments effective against drug-resistant microbes.
- NIAID also supports the early-stage development of vaccines, drugs, and diagnostics for poverty-related and neglected tropical diseases, often in partnership with other US agencies and product-development partnerships. These technologies can be used in low-resource settings

making them critical to disease fighting in low- and middle-income countries as well as rural and frontier settings in the US.

CDC: a global health technical hub

The CDC **Global Health Center** and **National Center for Emerging Zoonotic and Infectious Diseases** track global diseases and support the development of new medical technologies important for global health. CDC's role in global health is unique and essential in working in-country to strengthen disease detection and response that also protects Americans at home.

What is needed: We urge Congress to sustain funding for GHC and NCEZID to support CDC's global health research work. We also urge Congress to support the sustained funding for the Division of Parasitic Disease and Malaria (DPDM) which receives its funding through an Interagency Agreement through the US Agency for International Development as well as funding from GHC, even though it has been formally moved under NCEZID.
Why GHC matters for Americans: GHC provides core technical support and validates tools for use by US global health initiatives such as President's Emergency Plan for AIDS Relief and US Agency for International Development's Neglected Tropical Diseases Program. **GHC** monitors global drug and insecticide resistance.

- GHC leads global health security efforts. It monitors 30 to 40 international public health threats on average each day, has responded to over 6,050 emergency outbreaks in over 150 countries since 2005, and has discovered 12 previously unknown pathogens.
- GHC leads US engagements in the Global Health Security Agenda, an international mechanism for countries to coordinate and prepare for future pandemic threats.
- GHC recently uncovered the spread of an invasive mosquito species in East Africa that has accelerated the spread of malaria.

Why NCEZID matters for Americans: NCEZID provides expertise to track and prevent infectious disease threats.

- NCEZID now hosts the **DPDM** which provides services to people in the United States and around the world. Until fiscal year 2023, DPDM had not received a substantial funding increase in 15 years. Additional funding is needed to maintain DPDM's labs as the world's gold standard. DPDM is still funded through GHC according to the FY25 LHHS Report and Bill.
- NCEZID serves as an international reference hub for identifying unknown viral and bacterial diseases and provides advanced laboratory services for CDC researchers to safely study hazardous pathogens.
- NCEZID supports early-stage research of vaccines for diseases like Nipah virus, dengue, and Lassa and Rift Valley fevers and develops rapid diagnostic tests for bubonic plague, rabies, Zika, Ebola, Lyme disease, and other parasites that may threaten the US.
- NCEZID monitors the spread of diseases and emergence of new variants, indicating to developers when new technologies are needed.

BARDA: A bio-innovation powerhouse in need of an increased mandate

The Biomedical Advanced Research and Development Authority sponsors the late-stage development of vaccines, drugs, diagnostics, and other medical devices for naturally occurring biothreats that lack a

commercial market—including emerging infectious diseases (EIDs), pandemic influenza, and AMR. BARDA needs additional dedicated funding for its EID and AMR work in order to carry out their goals of creating threat agnostic technologies for these challenges.

What's needed:

- Report language that encourages BARDA to develop tools that benefit people living in all geographies for future naturally occurring health threats. Strengthening the health of people globally protects Americans from health threats.
- Report language that encourages robust funding for BARDA's EID and AMR programs.

Why it matters: BARDA prioritizes national health security, but many of the products it supports have additional global impact including: at least 93 AMR innovations, at least 127 products for COVID-19, and 11 FDA-approved products for Filoviruses, like Ebola, and Zika.

- BARDA is the best mechanism for sponsoring late-stage development of EID products to prepare for future health security threats, **but most of BARDA's EID work has only been funded through emergency supplemental appropriations. For example, $25 billion in emergency funds supported the advancements made to combat COVID-19—more than 43 times its base FY 2020 appropriation.**
- In 2019, drug-resistant bacteria killed 1.27 million people. BARDA supports AMR research through several mechanisms, including CARB-X, a multisector partnership that hosts the most diverse research pipeline of AMR products in the world. Thanks to BARDA's funding, nineteen CARB-X-supported projects have already advanced into or completed clinical trials; 12 remain active in clinical development, including late-stage clinical trials; and two diagnostic products have reached the market. Additionally, there is an ongoing need for funding for early-stage AMR product development to replenish the antimicrobial clinical pipeline.
- First-to-market products for health emergencies are often difficult to use in low-resource settings in rural and low-income areas in the United States and around the world.

We strongly recommend that you support global health research through increased or sustained funding for NIH (including FIC, NIAID, and OAR), CDC (including GHC and NCEZID), and BARDA. This work is important for defeating the diseases and conditions the world faces today and the threats we may face in the future.
We stand ready to work with you to advance US leadership in global health and global health innovation and ask that support for global health R&D not come at the expense of other humanitarian assistance and development accounts.

In this moment of transition and reflection on our health and research infrastructure, it is more important than ever to preserve the progress we've made and invest boldly in the innovations of tomorrow. Global health R&D is a smart, strategic investment in a safer, healthier, and more prosperous America.

Please do not hesitate to contact GHTC US Policy and Advocacy Officer Alex Long at along@ghtcoalition.org if you have questions or need any additional information.

Sincerely,

Kristie Mikus

Dr. Kristie Mikus, GHTC Executive Director and GHTC member organizations listed below

ASTMH American Society of Tropical Medicine and Hygiene

American Society for Microbiology

AVAC 25 Years and Counting

AVAC

BU Institute for Health System Innovation & Policy

Social Innovation in Drug Resistance Program, Boston University

CEPI

Coalition for Epidemic Preparedness Innovations, U.S.

bugworks

Bugworks

DNDi Drugs for Neglected Diseases *initiative*

Drugs for Neglected Diseases *initiative*

Elizabeth Glaser Pediatric AIDS Foundation

Fighting for an AIDS-free generation

Elizabeth Glaser Pediatric AIDS Foundation

FIND

IVCC

Global Antibiotic Research and Development Partnership

Impact Global Health

Global Health Technologies Coalition

PATH

Medicines for Malaria Venture

Population Council

Public Health Ambassadors Uganda

Treatment Action Group

TB Alliance