



The Effect of Budget Sequestration on HIV/AIDS in the United States: Projecting the Human Impact in Fiscal Year 2013 Update February 20, 2013

amfAR and NMAC have recalculated estimates of the human impact of budget sequestration on the response to the domestic HIV/AIDS epidemic. The new figures are based on January 2013 changes to the sequestration law, and reflect a revised estimate by the Congressional Budget Office (CBO) of a 5.3% across-the-board funding cut to most non-defense discretionary programs. Our original issue brief on this topic is available here.

Applying sequestration cuts to domestic HIV/AIDS programming would provide negligible deficit reduction, but would have a devastating impact on people living with HIV/AIDS (PLWHA) in America. It would also damage American leadership in health research, and limit the United States' ability to reduce the rate of new HIV infections, improve access to care, and reduce the disproportionate impact of HIV/AIDS on communities of color.

As a result of sequestration:

- 10,130 Americans living with HIV/AIDS will lose access to the AIDS Drug Assistance Program (ADAP), which provides life-saving medication to low-income PLWHA. Recent research has shown that, in addition to saving and improving the lives of PLWHA, HIV treatment reduces the risk of transmitting HIV to an uninfected partner by 96 percent.
- More than **6,760 people of color** would lose access to ADAP services.
- Under the Housing Opportunities for Persons with AIDS Program (HOPWA), which provides
 housing and supportive assistance to PLWHA who are unable to afford housing, 1,360 fewer
 households would receive permanent housing and 1,870 fewer households would receive shortterm assistance to prevent homelessness. Research demonstrates a direct relationship between
 improved housing status and reduced HIV risk behaviors.
- 1,920 households that include at least one person of color would lose HOPWA housing services; 580 households that include at least one Hispanic person would lose housing services.
- The National Institutes of Health (NIH), which has been at the forefront of AIDS research for 30 years, would lose \$163 million in AIDS research funding. 297 AIDS research grants would go unfunded, including 32 specifically funding AIDS vaccine research. It is estimated that AIDS

¹ CBO. (February 2013). The budget and economic outlook: Fiscal years 2013 to 2023. (p. 14, Table 1-2). Available online at http://www.cbo.gov/sites/default/files/cbofiles/attachments/43907_Outlook_2012-2-5_Corrected.pdf. (date last accessed: February 6, 2013)

- research funded by the NIH has led to a gain of more than 14.4 million life-years globally since 1995.
- Over **\$41.7 million** would be cut from state and local HIV prevention efforts funded by the Centers for Disease Control and Prevention (CDC), including efforts targeting young people and adults at high risk of infection. Among other programs, prevention efforts support testing to help identify the 18 percent of Americans living with HIV who do not know they are infected.

amfAR, The Foundation for AIDS Research (amFAR), is one of the world's leading nonprofit organizations dedicated to the support of AIDS research, HIV prevention, treatment, education, and the advocacy of sound AIDS-related public policy. Since 1985, amfAR has invested more than \$340 million in its programs and has awarded grants to more than 2,000 research teams worldwide. For more information, please visit www.amfAR.org.

The **National Minority AIDS Council (NMAC)** represents a coalition of faith based and community based organizations as well as AIDS service organizations advocating and delivering HIV/AIDS services in communities of color nationwide. Since 1987, NMAC has developed leadership in communities of color through a variety of advocacy campaigns, public policy education programs, national conferences, research programs, capacity building, technical assistance and trainings, and digital and electronic resource materials. For more information visit www.nmac.org.