Note to potential cosigners: This op-ed draft has gone through a couple revisions, and if accepted, will go through another round of edits with a publication. But this represents our best faith version we expect to publish, and we welcome your signature as a co-signer if you expect you would also endorse a version with minor revisions. After the partial PEPFAR waiver, we are focused on making the case for PEPFAR's work and why it never should have been paused/should have remaining programs unfrozen.

Every HIV positive pregnancy is a crisis pregnancy. As a baby grows within a mother's womb, she feels her son or daughter moving—she hopes that the baby will draw from the best of her and her partner. It is an aching tragedy for a mother's body to become a threat to her child, instead of the baby's refuge. PEPFAR (President's Emergency Plan for AIDS Relief) has brought hope to HIV+ mothers across Africa. It must be allowed to continue its work without fear of interruption.

As pro-life writers, doctors, and activists, many of us have stood on the sidewalk outside abortion clinics, hoping to help a mother turn around and save her baby's life. Many women choose abortion because hope seems out of reach. At home and abroad, we want to give women the support they need to be able to care for their children. PEPFAR offers mothers in extremis the chance to carry their babies to term and watch them grow up.

In the last week, President Trump applied an immediate, 90 day freeze of almost all foreign aid work. The freeze didn't just pause disbursement of funds, it resulted in <u>sudden stop-work orders</u> on the ground. PEPFAR was not explicitly exempted from this freeze. The State Department then announced that waivers were available to "lifesaving work" but <u>no group initially succeeded in obtaining one</u>. Finally, on February 1st, PEPFAR received a <u>partial waiver</u> for PEPFAR. We welcome that relief, but we worry that the limited memo will leave some partners uncertain if they can continue their work. PEPFAR has been an extraordinary success—it deserves to continue operating with the benefit of the doubt unless or until specific problems are surfaced.

A sudden shutdown of aid is a catastrophe for the poorest and most vulnerable people in the world. Even a short shutdown can do long-term damage to America's ability to lead abroad and retain the trust of local partners. As pro-lifers, we focus on PEPFAR among these paused USAID programs because the aid it offers mothers and their children is critical and time-sensitive, but we hope to see others unpaused quickly.

PEPFAR, created by President George W. Bush in 2003, works worldwide to stop the spread of AIDS and to provide treatment for those who are infected. PEPFAR offers HIV testing and antiretroviral treatment as well as testing and treatment for women who may be exposed to HIV without their knowledge and who are desperate to protect their babies.

Children of HIV+ mothers are at risk of contracting HIV throughout pregnancy, delivery, and breastfeeding. This prognosis changed in 1994, when doctors began treating pregnant, HIV+ women with antiretroviral drugs. These drugs can now drive a mother's viral load to

undetectably low levels, preserving her health and keeping her baby safe from infection. In the United States alone, antiretroviral therapy in pregnancy is estimated to have prevented <u>more than 22,000 HIV infections</u> for infants since 1994. But, globally, progress was limited.

Prior to PEPFAR's provision of antiretroviral treatment, half of children in Africa infected with HIV at birth <u>died before their second birthday</u>. Instead of growing chubby and pulling up into their first stands, these children grew thin and weak, dying from exposure to the first cold they caught

Every day, PEPFAR helps about 430 pregnant women receive an HIV diagnosis in time for intervention. Over the life of the program to date, <u>5.5 million children</u> have been born without HIV who otherwise would have been infected. In total, 25 million lives have been saved through PEPFAR's full spectrum of interventions. Right now, PEPFAR is serving approximately 680,000 pregnant women. If PEPFAR were subject to the full 90 day pause, 136,000 babies <u>will be</u> infected with HIV at birth who otherwise would not be.

PEPFAR began under a Republican president, and it continued its proven success throughout President Trump's first term. Churches across Africa were some of the first advocates for PEPFAR and Christian hospitals operate many of its distribution programs. These partners have helped make sure that PEPFAR protects children and does not perform or promote abortion.

For many of these providers, abortion is unthinkable (and illegal in the countries where they operate). PEPFAR has always been banned from promoting or performing abortion. In his first term, President Trump <u>explicitly brought PEPFAR under the Mexico City Policy</u>, which prohibits partners from performing or promoting abortion as a means of family planning using US funds or funds from any other source if they receive certain forms of American aid. PEPFAR providers are audited for compliance, and, in the sole case where a group of four nurses were, unrelated to their PEPFAR work, also performing abortions, <u>their funding was frozen</u>. Republican congressmen like Representative Chris Smith have helped keep the program honest and free of other agendas beyond saving lives.

PEPFAR clinics provide pro-life, whole-life care. These clinics don't just hand out drugs—they counsel families, treat other acute and chronic diseases that patients develop, run support groups for youth, and work with local communities and churches in order to make sure that the next generation can avoid HIV infection altogether. This broader work is imperiled by the partial exemption. The lifesaving elements of PEPFAR require the trust built up by the broader program.

Over PEPFAR's lifetime, the price of saving a life has gotten cheaper and cheaper. The monthly cost of distributing antiretrovirals has <u>dropped</u> by more than a third as PEPFAR has field-tested its process and handed off some responsibilities to partner countries. In some nations, PEPFAR <u>handles</u> the hot spots and has successfully transitioned the rest of the program to the partner nation. For the cost of 0.1% of the total federal budget, America is saving lives and slowly shifting responsibility to our partners in Africa. PEPFAR isn't a program we'll run forever—it's a program that is going to secure a permanent public health victory.

Every day, lives are being saved, and the groundwork is being laid to wipe out HIV/AIDS as a public health crisis. It's a thrilling time to be alive, when it is newly legal to protect life in the womb at home and when we can extend protection to babies born abroad. PEPFAR is the kind of incredible, world-reshaping project that only America can achieve. In the next fifty years, we should see the first rockets landing on Mars and the final baby to ever contract HIV from his or her mother. Don't throw away this incredible victory; unfreeze and protect PEPFAR's life-saving work.