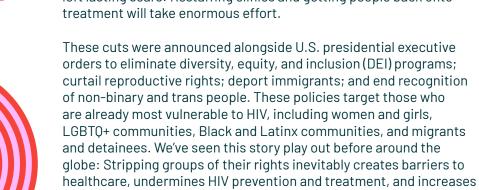
## FOREWORD

For more than two decades, Funders Concerned About AIDS has examined the state of HIV philanthropy through our annual resource tracking report.

This year's report comes at a moment unlike any other for the HIV movement — a moment of profound challenge for the people and places most impacted by HIV, but also of profound possibility for philanthropic leaders to reimagine their response.



the risk of acquiring HIV.

Looking beyond the U.S., other countries have also fundamentally shifted their HIV response as new leaders entered office following 2024's global elections. While the U.S. has an outsized impact on the funding landscape — it disbursed \$5.71 billion in 2023, representing 73% of total donor government HIV funding<sup>2</sup> — major donors like

Over the first few months of 2025, dramatic cuts in U.S. funding sent shock waves through the HIV community. In January, the new U.S. administration paused new foreign aid spending and issued a stopwork order for existing aid, including the President's Emergency Plan for AIDS Relief (PEPFAR) program that has saved 26 million lives and prevented millions of HIV infections since 2003. The sudden loss of billions in funding has been catastrophic for the HIV response: A survey conducted in February by GNP+, Aidsfonds, and Robert Carr Fund of organizations involved in HIV care found that 95% of respondents report being directly affected by these measures.¹ Even as legal efforts to restore funding have progressed, the freeze has left lasting scars: Restaffing clinics and getting people back onto

the Netherlands, the UK, France, Sweden, and Germany have also announced deep funding cuts. At the same time, an uptick in antirights policies are deepening stigma and impeding access to care for those who need these services the most. Taken together, these moves threaten to unravel decades of hard-won progress on HIV.

Against this backdrop, what can philanthropy do? How can we work together to address urgent community needs; fight stigma and discrimination; increase access to proven prevention measures, including long-acting PrEP; and support the 39 million people living with HIV today?

Since its inception, our annual resource tracking report has sought to provide answers to questions like these. While the data is historical, the context is current and increasingly urgent: What can grantmakers do now to end HIV as a public health crisis?

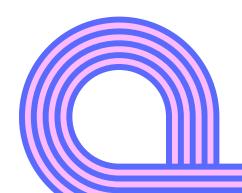
This year's report, which analyzes 2023 grantmaking data, tells a story of great potential. HIV philanthropy increased 10% in 2023 to reach \$722 million, the highest level ever recorded. That figure is a welcome reversal from the declines observed the previous year, with funds going to more than 6,000 grantees to fuel HIV prevention, treatment, and advocacy efforts worldwide.

Even in times of crisis, these numbers offer hope. We've witnessed firsthand the perseverance of the philanthropic sector — a truth reflected in 2023's record giving levels. Our community is caring, courageous, and positioned to face these challenges head-on.

Today, new medical advancements have put an AIDS-free future within our grasp; now we need the funding and moral leadership to make it a reality. Despite record levels of philanthropic funding in 2023, the HIV response remains dangerously underfunded — a situation that has only become more extreme as government and multilateral funding has waned.

Make no mistake: Moving forward in this environment will be the fight of our lifetimes. While we remain steadfast in our pursuit of a world without AIDS, the road ahead is filled with challenges. It's natural to feel overwhelmed, even frightened, but we can't allow fear to paralyze us. Fear won't keep organizations' doors open, get people their HIV medications, or end HIV as a public health crisis.

Now is not the time to panic, but to push forward — motivated by our shared vision of an AIDS-free future where all people can thrive.



## In **2023...**



**Funding declined 2% overall for key populations** impacted by HIV globally, including a 20% decline for trans communities, a 22% decline for gay men and other men who have sex with men, and a 10% decline for sex workers. Key populations represent 55% of people living with HIV and 80% of those outside of sub-Saharan Africa.

And today, in **2025...** 

Key populations (KP) and their sexual partners face rapidly growing threats to their health and well-being. "Early evidence shows that the impact of the funding freeze is already most severe for KP-serving programs." Additional investment is critical to provide lifesaving HIV care and defend their rights through community-led advocacy.



**Funding for Western and Central Africa** declined by 10%, totaling just \$11 per person living with HIV in the region. The region is one of the few areas where HIV acquisitions climbed in 2023, signaling the need for greater support.

Many sub-Saharan nations depend on PEPFAR for the bulk of their funding, and local organizations will be forced to shut down without it. The Aidsfonds, GNP+, and Robert Carr Fund survey cited above includes real-world examples from countries like Cote d'Ivoire, where respondents estimate that up to 70% of their caseload could lose access to PrEP, HIV testing, and monitoring services.



**Funding fell in Eastern Europe and Central Asia** by 5%, totaling just \$7 per person living with HIV in 2023.

Reductions in aid from the Netherlands and the U.S. have taken a steep toll on key populations as the number of people living with HIV climbs across Eastern Europe and Central Asia. Many in the region rely on services funded by USAID, the U.S. State Department, and various intermediary donors.



**Advocacy funding remained flat in 2023**, declining 1% to reach \$149 million. This is a critical role for philanthropy, since public funds generally don't support advocacy efforts.

The philanthropic community will need to double down on advocacy efforts to combat rising discrimination and stigma worldwide, stanch the loss of public funding, and encourage local investment in HIV programs.

Let us be clear: Public funding typically represents 98% of the global HIV response, and philanthropy cannot fill this void on our own. But in what some are characterizing as a "post-aid world," is it time to reexamine philanthropy's role in ending the HIV crisis. It's our collective responsibility to mobilize swiftly, identify the most urgent needs, and mitigate the human cost of harmful policy decisions.

Unprecedented times call for bold change, and the path forward will require many of us to move out of our comfort zone. HIV funding has long been concentrated among a few donors, but what's brought us this far won't take us where we need to go next. HIV refuses to be confined to a political party or geographic location, and new acquisitions are already far exceeding global targets. Without sustained support and financing mechanisms, the HIV crisis will spiral to a scale not seen in generations.

## This is our moment to innovate, to invite new partners into the fold, and to push the boundaries on what HIV philanthropy can achieve.

Many of our members and partners are already responding by collecting data to rapidly assess needs, launching emergency funds for grantees, and speaking out against unjust policies. We each have a different role to play; some will be on the frontlines of this fight, while others must remain behind the scenes. But we urge you, as donors with great privilege and access to resources: Do not give up the fight.

Whether you're a longtime HIV funder or new to the space, HIV likely touches the communities that matter to you. Join us in standing up for their needs by considering these actions:

- Fund creatively and flexibly. As much as possible, transition project grants to general support, relax reporting requirements, establish crisis funds, and provide other rapid relief to grantees who need fast access to resources.
- Forge new collaborations. The HIV fight requires a multipronged approach to meet urgent medical needs while also building long-term community resilience. Collaboration across organizations and funding portfolios is critical to build a united front that advances health and human rights including democracy, LGBTQ rights, sexual and reproductive health, gender equity, and racial justice.
- Use your voice. Not all organizations can engage in public advocacy, but we can all do something. Speak to board members, call colleagues in influential public roles, or conduct other private outreach. While every organization must assess its own risk tolerance, we encourage you to weigh those risks against the cost of inaction and to lead with courage.

Forty years ago, FCAA's work began with a calling in to the entire philanthropic community to join us in fighting a new and deadly disease. Now is the time to heed that call once more. As you explore this report, ask yourself, "How is HIV impacting the communities we serve?" "What will their needs look like in this new environment?" "Who else should be part of this work?" Our collective power is our greatest asset, and we firmly believe that our passion, creativity, and perseverance will carry us through this crisis.

To all of our members, partners, allies, and those who made this report possible, thank you. We are honored to work alongside you as we strive to build a future of health and human rights for all.

In solidarity,

**Masen Davis** 

**Executive Director** 

Funders Concerned About AIDS

