

TAG

Treatment Action Group

April 30, 2025

Senator Susan Collins, Chair
Senator Patty Murray, Vice Chair
Committee on Appropriations
United States Senate
Room S-128, The Capitol
Washington, D.C. 20510

Dear Chair Collins and Vice Chair Murray,

Thank you for the opportunity to submit this statement for the record of the hearing on “Biomedical Research: Keeping America’s Edge in Innovation.” Treatment Action Group (TAG) is appalled by the new presidential administration’s flagrant attack on science. Recent actions taken by the executive branch — rescinding research grants awarded through competitive peer review, delaying funding already committed to clinical research networks, stymieing the review of new grant applications through procedural delays, gutting scientific workforces, obstructing and concealing public treatment guidelines and scientific data — take a wrecking ball to the vital scientific processes that deliver lifesaving tools to prevent, diagnose, treat, and cure disease, domestically and globally.

We are particularly concerned about how these reckless actions will hobble the fight against HIV, tuberculosis (TB), and hepatitis C Virus (HCV). Globally, in 2023, 39.9 million people were estimated to be living with HIV, including 1.4 million children; 10.8 million people fell ill with TB, of which 1.3 million were children; and 50 million people were estimated to be living with HCV. In fact, according to the 2024 Global Hepatitis Report, TB and viral hepatitis are the two leading infectious disease causes of death globally. In the United States, these 3 diseases pose significant public health concerns, with a considerable overlap in their prevalence and transmission, with 21% of people with HIV estimated to be coinfecting with HCV. Thanks to decades of investment in cutting edge research by the U.S. government, ending each of these diseases is achievable, but only if the United States and other global states maintain their commitment to funding biomedical research.

TAG was founded by activists at the height of the AIDS crisis with the goal of accelerating HIV treatment research — a mission that has since expanded to include TB and HCV. Science has always been at the heart of TAG’s strategy. We envision the end of the HIV, TB, and HCV pandemics through effective and universally accessible tools for prevention, diagnosis, and treatment. Ending HIV, TB, and HCV as pandemics relies on a rigorous and well-funded scientific ecosystem accountable to affected communities and strongly supported by investments from the American people. Science is what ultimately changed the trajectory of the AIDS pandemic beginning in the late 1990s, when increased investment in and reforms to

speed up research on protease inhibitors helped deliver treatments that have saved, and continue to save, millions of lives — expanding the life expectancies of people living with HIV and transforming the condition into a manageable chronic illness.

And yet, the new administration seems intent on seriously damaging the institutions, funding structures, professions, collective knowledge, and public trust that sustain a robust scientific process. Such destructive actions include:

- The confirmation of Robert F. Kennedy Jr. as Secretary of the Department of Health and Human Services (HHS) places an unqualified ideologue at the helm of the country's entire health portfolio. As documented by TAG, Kennedy is an AIDS denialist and conspiracy theorist shunned by the entirety of mainstream medicine and science, and has signaled intent to use his perch to flout scientific consensus on things like vaccine policy.
- The [mass firings of approximately 5,200 employees](#) at the National Institutes of Health (NIH), Centers for Disease Control and Prevention (CDC), Food and Drug Administration (FDA), and other agencies under the Department of Health and Human Services (HHS) will vastly impede the nation's ability to assess and fund medical research, surveil and respond to emerging public health threats with evidence-based interventions, and evaluate and regulate the safety and applications of medical and consumer products.
- The NIH's recent attempt to slash "indirect costs" — which cover overhead by institutions receiving NIH awards — by billions of dollars per year would have deprived academic research institutions of resources necessary to support their projects, compromising important activities like lab, facility, and equipment upkeep, and staffing.
- The chaotic and illegal obliteration of the United States Agency for International Development (USAID) — the world's [third largest funder of TB research](#) and development — has interrupted valuable clinical trials, disrupted the work of community-based organizations that advise clinical research and build local demand for health innovations, and limited global access to evidence-based treatments for HIV and TB and deeply damaged health infrastructure in hundreds of countries around the world.
- The indiscriminate removal (and reinstatement, in some cases, as a result of court orders) of public data on health and disease impedes research drawing on these public sources, and precludes public health officials and communities from developing evidence-based programming.
- The dehumanizing, scientifically illiterate attempt to deny the existence of transgender, non-binary, and intersex people, which has extended to adding brazenly false claims to government websites restored as a result of court orders, in addition to the unethical discontinuance of reporting HIV surveillance data for transgender populations.
- The vile assault against anything seen as related to diversity, equity, inclusion, and accessibility (DEIA) stands to [undermine recent progress](#) toward representative demographic participation in medical research, triggering deletion of relevant guidelines and protocols from the FDA and Office of AIDS Research (OAR).
- The termination of NIH awards and contracts to South African researchers jeopardizes decades of progress against some of the world's deadliest pathogens, especially TB. Every major TB treatment and vaccine advance in the past two decades has relied on

research carried out in South Africa due to the country's health system, academic and lab infrastructure, clinical and scientific expertise, transparent regulatory processes, and TB and TB/HIV disease burden. That combination of factors makes rigorous medical research possible — if NIH-funded TB trials are forced to discontinue work in South Africa, lifesaving research will take years longer and be far more expensive.

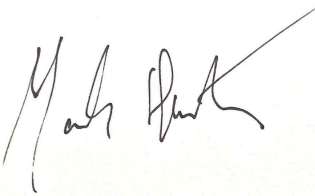
- The administration's deliberate efforts to slow NIH spending through a series of procedural changes, in order to create the appearance of a budget surplus to justify cuts in the future, is dangerous to the American people and is the very definition of inefficient governance. Many vital research initiatives are otherwise poised to proceed, but currently have funds stuck behind newly-imposed credit card restrictions, reduced procurement staffing, and cancelled or postponed NIH study sections.

Taken altogether, this administration appears to be using every possible tactic at its disposal to orchestrate a deliberate, targeted assault on scientific integrity and America's standing as a global leader in biomedical innovation. At stake is scientific capacity and expertise that took decades to build. It cannot and will not be supplanted by private industry, which has proven itself incapable and unwilling to invest in the kind of long-term research that doesn't yield short-term profits, but which makes up the cornerstone of practically every key medical breakthrough. Antiretroviral therapy for HIV, shorter, safer regimens for TB, and direct-acting antivirals for HCV all relied heavily on U.S. government-supported research; so too will future tools needed to end these conditions and all other pandemics.

The White House's attack on every step of the research, development, implementation, and policymaking processes violates the universal right to science, codified in international human rights law recognized by the United States government. This administration's war on science harms everyone, everywhere who stands to benefit from science and its applications.

Please do not hesitate to contact Elizabeth Lovinger, U.S. and Global Health Policy Director, at elizabeth.lovinger@treatmentactiongroup.org with any questions. We look forward to working with you to safeguard our nation's vital research infrastructure.

Sincerely,

A handwritten signature in black ink, appearing to read "Mark Harrington", with a long, sweeping horizontal line extending from the end of the signature.

Mark Harrington
Executive Director
Treatment Action Group