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★

NEXT STEPS FOR ENSURING THE SUCCESS OF THE AMERICA FIRST GLOBAL HEALTH STRATEGY

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Through programs like the President's Emergency Plan for AIDS Relief (PEPFAR), the President's Malaria Initiative (PMI), and the Global Fund to Fight AIDS, Tuberculosis, and Malaria, the United States has worked alongside allies across the globe to build and strengthen healthcare and save lives.

The *America First Global Health Strategy* (AFGHS) reaffirms these commitments while aligning with the administration's foreign policy priorities. The State Department's Bureau for Global Health Security and Diplomacy (GHSD), the U.S. Congress, and country partners should adopt the following recommendations to ensure the *Strategy* sustains past successes, accelerates progress, and anchors country ownership beyond governments into communities.

Bilateral health agreements and implementation plans under the AFGHS should:

- Be tailored to individual countries' abilities and political realities and be consistently, sufficiently funded to prevent disruptions.
- Coordinate planning and implementation among relevant actors, including partner countries' civil society communities, faith-based organizations serving underserved and remote areas, key population groups, and the entire U.S. government.
- Focus on controlling new infections and providing a platform for integrated health security and sustainable healthcare, along with technical support for transition.
- Ensure consistent transparency on results and progress to provide both the U.S. and partner countries public access to these findings. This will ensure multisectoral awareness of advancements toward goals, activities, and roles, while strengthening accountability and tracking quantifiable, outcome-based progress.

U.S. global health programming should be data-driven and results-based, clearly connecting funded activities to agreed public health outcomes by:

- Using metrics that go beyond process and financing inputs to focus on prevention, treatment, and retention through the collection of data disaggregated by age and sex down to the subnational level.
- Developing "[next-generation](#)" targets to ensure continued progress beyond 2030, including to measure the integration of disease-specific programs into broader national health systems and the impact of new innovations like lenacapavir.
- Verifying outcome data and progress through U.S.-supported expanded case-finding and independent surveys conducted by third parties.
- Investing in scalable interventions, such as targeted prevention, that can have significant public health impacts and address challenges across multiple diseases while using robust metrics across diseases to assess progress and improve programming.

- Promoting innovative financing mechanisms that mobilize domestic resources in partner countries for the sustainable delivery of healthcare, including the purchase and distribution of drugs and commodities.
- Supporting research, development, evaluation, introduction, and adoption of evidence-based health innovations to accelerate disease control progress, improve preparedness for emerging health threats, and strengthen country-led health systems.

Influential actors across the global health space should continue to engage in the planning and implementation process under the AFGHS:

- GHSD should preserve and deepen technical expertise across the U.S. global health system, including public health experts, program managers and evaluators, contracting and agreement officers, physicians and nurses, locally employed staff in U.S. embassies, and laboratory personnel.
- The United States and host governments should coordinate with and support essential civil society community groups, including faith-based organizations, in partner countries to ensure services for vulnerable and key populations continue.
- Experts in development (including third-party implementers) should coordinate with country governments and the State Department to support the broader enabling environment for health, i.e. financing, transparency, and democratic governance.
- The U.S. government and the Global Fund should align to decrease any duplication of services, minimize shocks, and ensure supply chain services meet all the procurement needs of partner countries from purchasing to delivery.
- The U.S. Congress should require more consistent reporting from GHSD on outcomes and impact, including midterm reviews of bilateral health agreements and annual reviews of implementation plans, while also tasking the Offices of the Inspector General and the Government Accountability Office with similar reviews.



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