

Trump "Skinny" Budget Prescription for International Affairs Programs, Starvation

On March 16th, the Office of Management and Budget posted the outline for President Trump's forthcoming fiscal year 2018 budget request, presumptuously titled "America First—A Budget Blueprint to Make America Great Again." Contained within what has become known in Washington as the "skinny" budget are proposals for massive cuts to non-defense defense discretionary spending and for the complete elimination of dozens of federal programs.



WASHINGTON MEMO

Included in the [62-page budget outline](#) is an overall cut to the international affairs programs of the State Department and the U.S. Agency for International Development (USAID) of 31 percent from current levels, justified as being necessary to partially offset a massive \$54 billion increase proposed for defense spending. According to the [U.S. Global Leadership Coalition](#), if enacted, the proposed cuts would be the lowest level of funding for State and USAID programs in 16 years (FY 2002) in inflation-adjusted dollars.

The disproportionate cut to State Department operations and U.S. development, health, and humanitarian programs has been met with virtually unanimous [bipartisan opposition on Capitol Hill](#) and from a large cadre of retired three and four-star [generals and admirals](#). More importantly, the magnitude of the cuts proposed for a myriad of popular domestic programs, most of which have influential patrons in Congress and a vocal constituency among the public, mean that the "skinny" budget, in classic D.C. parlance, is "dead on arrival." The budget requests sent by Presidents are almost always declared DOA by Congress, but the degree of rancor that has greeted this first budget from President Trump is arguably greater than usual.

For good or for ill, no specific mention of international family planning and reproductive health (FP/RH) funding is included in funding proposals for international affairs programs. This leaves unanswered the question of how much the President's budget request will contain for FP/RH programs until the Trump-Pence administration sends to Congress a detailed FY 2018 budget proposal, not expected before May. However, in order to achieve the overall cut to foreign assistance proposed, large, disproportionate cuts to individual budget line-items will be inevitable. As a result, the math for FP/RH funding and other major global health sectors like maternal and child health does not look promising.

If not a proposal to completely zero-out the FP/RH budget—a distinct possibility—what might be the best case-scenario in the forthcoming detailed President's FY 2018 [budget request from the Trump-Pence administration?](#) One option might be a roughly 25 percent cut to FP/RH programs (\$150 million) down to the level of \$461 million, which has been approved—but never enacted into law—by the GOP-controlled House Appropriations Committee as part of its State-foreign operations bills for the last seven fiscal years.

The only funding requests for global health programs referenced in a two-page summary in the document are to "fulfill the \$1 billion U.S. pledge to Gavi, the Vaccine Alliance," to provide "sufficient

resources to maintain current commitments and all current patients levels on HIV/AIDS treatment under the President’s Emergency Plan for AIDS Relief,” to maintain malaria funding, and to meet U.S. commitments to the Global Fund for AIDS, TB, and Malaria. Despite the shout-out to PEPFAR, the wording leaves in doubt the amount of funding being requested for HIV/AIDS prevention and care, along with the likelihood of paying for the treatment of additional, newly-infected AIDS patients.

Under the [FY 2017 continuing resolution \(CR\)](#) keeping the government operating through the end of April, funding for international FP/RH programs is \$607.5 million, of which \$32.5 million is earmarked for a U.S. contribution to the United Nations Population Fund. During FY 2016—the last fiscal year for which programmatic data is available—these [cost-effective U.S. government investments in FP/RH](#) made it possible to achieve the following:

- 27 million women and couples receiving contraceptive services and supplies;
- 6 million unintended pregnancies, including 3 million unplanned births, averted;
- 2.3 million induced abortions averted (2 million of them unsafe); and
- 11,000 maternal deaths averted.

While U.S. government leadership and generosity in the family planning field has been extraordinary over the years, 40 major national organization have recently requested to congressional champions that a total of \$1.2 billion be appropriated for bilateral and multilateral FP/RH funding, including a \$78 million contribution to UNFPA. This recommended level is the United States’ “fair share” of the \$9.4 billion estimated to be necessary to [address the unmet need for modern contraception](#) of 225 million women in the developing world. But what funding level can family planning advocates realistically expect to see at the end of the FY 2018 appropriations process, short of a doubling? A not-entirely unrealistic scenario can be envisioned in which close to current funding levels for bilateral FP/RH programs might be preserved.

Some sense of the priority to which the administration and House Republicans attach to gutting international family planning funding could come as Congress attempts to finalize the FY 2017 appropriations process by an April 28th deadline. This would be either through enactment of another CR through the remainder the fiscal year or through the negotiation and passage of an omnibus spending package. Many observers right now seem to be betting on the former, rather than the latter, as the path of least resistance that Congress will take to avoid a government shutdown. However, congressional appropriators recently renewed their efforts to move an omnibus.

A year-long FY 2017 CR would preserve current FP/RH funding levels without harmful policy “riders” attached, although the administrative reinstatement of the [Global Gag Rule](#) (GGR) would continue to proceed without legislative interference. Notwithstanding GGR implementation and expansion, this would be a favorable outcome for FP/RH program funding. House Republicans remain deeply divided over budget and spending issues, and GOP leaders may very well need the votes of pro-family planning [Democrats](#) to pass any appropriations legislation during the 115th Congress.

As an old, inside-the-Beltway saying goes, “The President proposes and Congress disposes.” The release of the “skinny” budget is just the first step in a year-long, multistep congressional FY 2018 budget and [appropriations process, a complicated political exercise](#) difficult to navigate even under the best circumstances. Family planning supporters must watch Congress vigilantly and advocate forcefully as the legislative process unfolds over the remainder of the year.

