

July 31, 2026

The Honorable Marco Rubio
Secretary of State, U.S. Department of State
2201 C Street NW, Washington, D.C. 20520

Pastor Paula White-Cain
Senior Advisor, White House Faith Office
The White House, 1600 Pennsylvania Avenue NW, Washington, D.C. 20500

Ms. Jennifer S. Korn
Deputy Assistant to the President and Faith Director
The White House, 1600 Pennsylvania Avenue NW, Washington, D.C. 20500

Dear Secretary Rubio, Senior Advisor White-Cain, and Faith Director Korn:

We write as leaders of evangelical medical missions, global health, and humanitarian organizations who share the administration's stated commitment to accountability, efficiency, and results in U.S. global health policy, and who bring decades of on-the-ground experience in the communities these programs serve.

For 2,000 years, the Church has cared for the sick and carried good news in word and deed. Faith-based institutions provided health care in the world's most difficult places long before government-sponsored assistance existed, and that work will continue regardless of policy changes. But we believe the Church and the U.S. government can be even better partners than they are today, and we write because the rapid changes now underway in U.S. global health programs risk undoing partnerships that have already saved tens of millions of lives.

We affirm the administration's goals of reducing waste, ending ideological mission creep, and ensuring no U.S. global health dollars fund abortion. We do not write to defend the status quo. We write because several developments raise serious concerns: a planned restructuring of CDC's role in PEPFAR implementation, delays in releasing already-appropriated global health funds, and a historic disease outbreak in Central Africa that depends on the very health infrastructure now under review.

We respectfully request that the administration:

1. **Pause the planned CDC-PEPFAR restructuring** until a fully resourced alternative is in place, with explicit protections for continuity of HIV treatment for patients currently served.
2. **Release previously appropriated global health funding**, including approved vaccine funding, without unauthorized conditions, and engage Congress transparently on any proposed structural changes before they take effect.

3. **Make faith-based inclusion in bilateral health agreements enforceable**, not aspirational, with clear monitoring mechanisms and protections for the religious identity of participating organizations.
4. **Ensure bilateral agreements serve public health objectives** and are not conditioned on unrelated commercial or geopolitical concessions.

We share the administration's vision of a more accountable, values-aligned, faith-engaged global health system, and we want to help build it. We ask only that it be built through partnership and with continuity of care for those currently depending on these programs. We stand ready to serve as partners in that work.

The vulnerable cannot wait. We are asking this administration to act with the urgency the moment demands.

Respectfully,

SIGNATORIES

The undersigned sign in their individual professional capacity. Organizational affiliations are listed for identification purposes only and do not constitute endorsement by the organization.

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Detailed data, sourcing, and policy background: see attached.