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Advancing the America First Global Health Strategy Through Landmark Bilateral Global Health MOUs with Botswana, Madagascar, Sierra Leone, and Ethiopia

PRESS STATEMENT

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DECEMBER 23, 2025

On December 22 and 23, the United States signed four additional new, landmark global health Memorandums of Understanding (MOUs) with Madagascar, Sierra Leone, Botswana, and Ethiopia, reinforcing U.S. leadership that delivers measurable results for the American people and puts America First by directly countering global infectious disease threats and reducing foreign dependence on U.S. taxpayers.

Across the four MOUs, which total nearly \$2.3 billion, the United States has committed almost \$1.4 billion, with recipient countries co-investing more than \$900 million of their own resources – demonstrating a decisive shift toward country ownership for infectious disease control programs. Each MOU includes clear benchmarks, strict timelines, and consequences for nonperformance – ensuring U.S. assistance delivers results against priority disease threats and reduces long-term dependence on U.S. assistance.

In Ethiopia, the United States signed a bilateral global health cooperation MOU totaling \$1.466 billion. The agreement includes \$1.016 billion in U.S. investment and \$450 million in

co-investment by the Ethiopian government. Priority programs include HIV/AIDS, tuberculosis, malaria, polio eradication, maternal and child health, and infectious disease preparedness and response, including ongoing support for the Marburg response. The MOU is structured to preserve and transition gains achieved through more than \$5 billion in U.S. health assistance to Ethiopia over the past two decades, ensuring continuity of essential health functions under Ethiopian leadership. (More than \$1.466 billion total, \$1.016 billion in U.S. assistance, \$450 million in recipient co-investment.)

In Botswana, the United States entered into a bilateral arrangement that increases Government of Botswana ownership of HIV clinical and community service delivery. With the United States providing \$106 million in targeted assistance, and Botswana contributing more than \$380 million of its own resources, the MOU strengthens self-reliance, supports workforce reform, and sustains HIV epidemic control beyond the 95-95-95 targets. The MOU will modernize electronic medical records and disease surveillance systems, including U.S. supported networking infrastructure that may leverage American satellite-based technologies to strengthen outbreak preparedness while advancing U.S. technological leadership. (More than \$487 million total, \$106 million in U.S. assistance, \$381 million in recipient co-investment.)

In Sierra Leone, the United States will front-load more than \$30 million in 2026 to rapidly strengthen disease surveillance, laboratory capacity, health workforce, and data systems, while Sierra Leone steadily increases its own financial contributions. By 2030, Sierra Leone will assume responsibility for most commodity costs, workforce, and laboratory expenses, significantly reducing long-term U.S. burden. The agreement aims to reduce malaria deaths by 75% and improve HIV diagnoses by ensuring that 98% of people know their HIV status and are on treatment by 2030, integrate thousands of health workers into the national payroll, and establish a national outbreak surveillance system capable of detecting epidemic and pandemic threats in accordance with the 7-1-7 standard. (More than \$173 million total, \$129 million in U.S. assistance, more than \$44 million in recipient co-investment.)

In Madagascar, U.S. investments focus on malaria, maternal and child health, and global health security, while transitioning the infectious disease-focused community health workforce to national ownership. The arrangement aims to increase antenatal care attendance from 40% to 75% by 2030, maintain zero new polio cases, ensure nearly all

confirmed malaria cases receive first-line treatment, and strengthen national surveillance and outbreak response capacity consistent with 7-1-7 benchmarks. (More than \$175 million total, more than \$134 million in U.S. assistance, more than \$41 million in recipient co-investment.)

This is what America First leadership looks like: the United States leading the global health agenda, protecting its people from infectious disease threats, demanding accountability from U.S. assistance recipients, and delivering results for American taxpayers. The United States remains committed to signing multi-year **Bilateral MOUs on Global Health Cooperation** in the coming weeks with dozens of countries receiving U.S. health assistance, advancing the **America First Global Health Strategy**.

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