

Outside Witness Testimony for the Subcommittee on State, Foreign Operations, and Related Programs

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Testimony is addressing USAID, the State Department, and related multilateral partnerships

Chairman Lowey, Ranking Member Rogers, and members of the Subcommittee, thank you for the opportunity to submit written testimony regarding fiscal year (FY) 2020 funding for the US Agency for International Development (USAID), the State Department, and related multilateral public-private partnerships. I am submitting this testimony on behalf of PATH, a global team of innovators and advocates working to solve the world's most pressing health challenges so all people and communities can thrive. We respectfully request that this Subcommittee allocate no less than \$54.3 billion for SFOPS—the FY19 enacted level—in order to maintain current investments in critical programs that promote global health security, women's and children's health, and global health research and innovation. Sustained funding for foreign assistance — building on investments and leadership demonstrated in the FY18 omnibus — is more critical than ever. We also support no less than \$1.56 billion for the Global Fund to Fight AIDS, Tuberculosis, and Malaria, and no less than \$290 million to Gavi, the Vaccine Alliance, both of which complement and reinforce the success of our bilateral programs.

Using cost-effective strategies to save lives while transforming communities to be self-reliant and prosperous.

As an organization that partners with the public and private sectors at home and in nearly 70 countries, PATH sees firsthand the tremendous impact that US-supported global health and development programs have with relatively modest investments. These investments are further catalyzed through both traditional and innovative financing mechanisms, in tandem with strategic partnerships. Continued support for these programs means that the US can sustain and accelerate efforts to save millions of lives, develop and scale-up lifesaving health innovations, as well as enable strategic transitions and the path to self-reliance for partner countries; ultimately enabling a healthier, safer, and more secure world.

Strengthening global health security

The second largest outbreak of Ebola, currently being addressed in the Democratic Republic of Congo, and other emerging crises such as antimicrobial resistance further demonstrate the influence that health security—or a lack of it— can have on human health worldwide. Congress provided critical leadership in FY19 by providing \$140 million in additional funding to partially reduce the impending gap created by the expiration of USAID's funding for global health security. Yet to continue making progress toward ensuring the weakest countries with the least preventative-care capabilities have the right tools, infrastructure, staff, and systems in place to prevent future outbreaks from spiraling out of control, the FY17 enacted level of \$172.5 million for USAID is still needed. History demonstrates that complacency in the wake of successful outbreak interventions leads to a cycle of funding cuts followed by ever more costly outbreaks. This forces the United States to face continued government expenditures and military

interventions. The 2015 Ebola outbreak cost US taxpayers \$5.4 billion in emergency supplemental funding, forced US cities to spend millions in containment, disrupted global business and supply chains, and required the deployment of the US military to mitigate the threat.

USAID plays a critical leadership role in preventing emerging disease threats that could put Americans and populations around the world at risk, through its Global Health Bureau's Global Health Security Agenda, Emerging Pandemic Threats, and PREDICT programs. These investments support partner countries to reduce transmission of diseases between animals and humans, strengthen workforce development and disease surveillance, and enhance collaboration with national and community stakeholders to monitor viruses with pandemic potential. USAID also invests in for the development of new tools for epidemic preparedness, including through its Grand Challenge for Development, which has supported funding for innovations to address key gaps in the Ebola response and to mitigate the spread of Zika. USAID's global health security work is further bolstered with programming in HIV/AIDS, tuberculosis, malaria (with the President's Malaria Initiative), maternal and child health, and neglected tropical diseases, which strengthen health systems to be capable of detecting and responding to a variety of disease threats.

As the United States and the world begins to reap the benefits of our investments in better disease preparedness, we must sustain support for these critically needed programs. The ongoing threat that infectious diseases pose to American health—as articulated in the 2018 National Biodefense Strategy—and to our economic and national security interests demands dedicated and steady funding for global health security. Just as we invest in a strong military in preparation for other security risks, Congress must ensure a continued strong USG investment in global health security.

The vital role of reducing maternal, newborn and child deaths and leveraging publicprivate partnerships

Every day, more than 15,000 children die from preventable or treatable causes and over 800 women die each day due to complications during pregnancy and childbirth. These preventable deaths primarily occur in resource-limited settings where women and children lack access to basic health care services. There is consensus among scientists and global health experts that ending such deaths is achievable but requires investment in scaling up interventions that tackle the leading killers of women and children, many which are simple and low-cost such as promoting healthy practices like breastfeeding and handwashing and ensuring access to lifesaving drugs for infections. USAID stated in its 2018 maternal and child health road map that it has seen a 6 to 1 average return on investment in maternal and child survival as a result of eliminating health system barriers related to management, system quality, and community engagement. According to the agency, US\$26.9 billion in public and private funds have also been freed up by making maternal and child survival programs more efficient. Alternatively, issues such as malnutrition dramatically increase health care costs, as well as billions of dollars in global economy are lost as result of reduced productivity, and as much as 12% of national GDPs. Without investment in mothers and children, economies will remain stagnant, reducing trading power and global spending.

Since 2012, USAID has trained 13.2 million health workers across the world in how to provide critical healthcare to mothers and children. It has provided 77.1 million treatments to children for diarrhea and pneumonia. It has vaccinated 34.7 million children against deadly preventable diseases and has treated 5.6 billion liters of water for consumption. USAID has helped 8.7 million women give birth in a health facility and has helped 7.9 million newborns receive care after delivery. USAID also reaches more than 28 million children with nutrition services annually. Successful maternal and child health programs have also demonstrated that when US foreign assistance is paired with domestic financial commitments and innovative financing, the US is able to play a catalytic role in helping governments lead their own strategies, in line with this Administration's signature effort, The Journey to Self Reliance. For example, in 2018, USAID piloted the world's first health impact bond, co-developed by the Indian government and the private sector. The bond is expected to enable up to 600,000 pregnant women to access improved care with potential to save 10,000 moms and newborns. This innovative approach to development financing is driven by achievement of outcomes and has the potential to leverage substantial private investor capital. We urge the committee to continue to fully fund global maternal and child health programs to further enable sustainable development.

Another factor in USAID's global successes is the link to public-private partnerships. This link leverages American bilateral assets with multilateral technical support and financing to catalyze country commitments. One of the most effective examples of this important bilateral-multilateral approach is in the area of immunization. USAID has provided bilateral technical and commodity assistance to more than 100 countries in support of national child immunization programs. The impact of this is maximized through USAID's relationship with Gavi, the Vaccine Alliance. Investments in Gavi have supported the immunization of more than 700 million children since 2000, preventing more than 10 million deaths as well as system strengthening and training for health care workers to ensure immunizations are delivered and lives are saved.

In addition to providing lifesaving interventions, Gavi serves as a model for transitioning out of donor-led support, once countries have robust systems and decision-making processes in place. This year, 15 countries have begun to fully self-finance their vaccines, after support to introduce them through Gavi. Gavi is also a leader in building private sector partnerships to strengthen capacity around cold chain performance and data analysis, among others. In mid-2020, the United States will have the opportunity to make a renewed commitment to Gavi over through 2025—funds that are imperative to helping Gavi achieve impact and leverage contributions from many other donor nations. To maintain this commitment, the US government should maintain its support for Gavi and look to continue its commitment for this lifesaving and effective effort.

Fighting to eliminate malaria

Another example of USAID's vital work is the tremendous progress made in fighting malaria through the President's Malaria Initiative. PMI's work to scale-up malaria interventions in partner countries is contributing to global efforts that have helped save an estimated 6.8 million lives since 2000. Yet close to half the world's population remain at risk of malaria: In 2017, there were an estimated 219 million cases of malaria—continuing the upward trend since 2015, when there were an estimated 214 million cases. Of the estimated 435 000 deaths worldwide in 2017, children under the age of five accounted for an estimated 70 percent, due to lack of access to cost-effective tools, such as insecticide-treated nets and anti-malarial drugs. In countries where

PMI has focused its efforts, advances in malaria control have brought social and economic benefits, such as significantly greater economic growth than countries with malaria. Malaria prevention programs have also been crucial for protecting US military personnel due to the disease's potential to affect deployed troops and undermine operational readiness.

An added challenge in tackling malaria is the expansion of drug and insecticide resistance, threatening the effectiveness of current interventions. In response, PATH has been partnering with the US government, private sector, and local governments to drive innovation for new tools and strategies to control and eliminate malaria, including development of the world's first malaria vaccine for young children in Africa, RTS,S. RTS,S is set to be piloted in selected areas of Ghana, Kenya, and Malawi starting later this year, and could prove to be an important complementary tool to the anti-malarial toolkit.

Congress should fully fund PMI, as additional resources are critical to PMI's new country programs in Cameroon, Cote d'Ivoire, Niger, and Sierra Leone, and its existing programs in Burkina Faso and 19 other countries. Financial resources are also needed to make greater investments in malaria R&D for new tools to accelerate progress, such as improved diagnostics, novel insecticides, and next-generation vaccines. Congress must also renew the US pledge to the Global Fund to Fight AIDS, Tuberculosis and Malaria, a critical partner in leveraging USAID's bilateral assets to procure and deliver lifesaving treatment and drive down the rate of new HIV, tuberculosis, and malaria infections. Finally, Congress should exercise its oversight of all relevant US agencies that are implementing malaria programs to ensure that programs are using the best data to target the epidemic, ensure efficiency, cost-effectiveness, and progress toward a world free from malaria.

Protecting the United States through leadership in global health R&D

We ask that the Subcommittee continue to affirm its support for the role that USAID plays in advancing innovations to ensure that people in low-resource settings have access to high-quality health tools. Due to its presence in the field and its linkages with end users, USAID plays a critical role in the development, roll-out and scale-up of lifesaving health products and systems specifically designed to address the needs of vulnerable populations in low- and middle-income countries. For example, the agency's Saving Lives at Birth Grand Challenge has leveraged over \$150 million from other donors and created a pipeline of over 100 potentially lifesaving innovations, like rapid diagnostic tests to detect pre-eclampsia, new formulas of drugs to stop post-partum hemorrhage and wearable technology to prevent hypothermia in newborns. Initiatives like the Grand Challenges, which crowdsource the best ideas from all around the world can also help develop much needed innovation capacity in low-and middle-income countries, a critical aspect of empowering communities and economies to self-reliance.

Another example is the new innovations USAID is piloting in digital health, aimed at strengthening health systems and infrastructure in emerging economies. USAID has partnered with PATH by investing in the initiative Digital Square, a partnership of the world's leading digital health experts from 40+ organizations and countries, working together to help countries seamlessly connect their digital health systems, collect and share better data and ultimately reach better health outcomes. A key element of Digital Square is its focus on co-investment around country driven priorities, leveraging limited funding and supporting sustainable outcomes.

USAID's innovation-focused initiatives have shown great success in leveraging US investments, and USAID should continue to look for ways to engage private-sector expertise and investment. With the release of both the 2019 Effective Partnering and Procurement Reform Recommendations and 2018 Private Sector Engagement Policy there is an opportunity to drive a new approach to USAID's R&D investments. This includes pursuing innovative funding and partnership models to drive the development of much needed health tools for improving development outcomes—especially in support of local innovation in low- and middle-income countries. Assisting in-country innovators to advance their own promising health products could lead to lower-cost alternatives to people around the world while improving local economies, ultimately reducing reliance on the United States.

An investment in health, at home and around the world

With strong funding for global health and development programs within USAID and through our public-private partnerships, the US government is improving access to proven health interventions in the communities where they are needed most, while also investing in solutions for tomorrow's challenges. By fully funding the International Affairs account, there is a critical opportunity to help countries mobilize their own resources on their journey to self-reliance. The United States can protect the health of Americans and invest in economic growth, while ensuring that people everywhere can reach their full potential. We appreciate the Subcommittee's consideration of our views and urge Members to ensure that the United States maintains our position as a leader in global health and development.