Madam Chairwoman, Ranking Member Rogers, and distinguished members of the subcommittee - 

My name is Chris Collins, and I am the president of Friends of the Global Fight Against AIDS, Tuberculosis and Malaria.

Thank you, Madam Chairwoman, and the full subcommittee, for your support over many years of America’s leadership in the fight to end the world’s deadliest epidemics. Today I am here specifically to thank you for your support of the Global Fund to Fight AIDS, Tuberculosis and Malaria and to request continued U.S. leadership in supporting the Global Fund.

This year, Congress has a unique opportunity to advance and accelerate the end of these three epidemics. The Global Fund is the world’s largest global health financier, investing nearly $4 billion a year. Since its creation in 2002, Global Fund-supported programs and partners have saved over 27 million lives. This accomplishment includes helping to cut AIDS-related deaths in half since the epidemic’s peak in 2005 and contributing to a 37% decline in TB deaths and a 60% decline in malaria death rates since 2000.

U.S. contributions to the Global Fund also leverage other donors to play an expanded role in global health financing. By law, the U.S. can only provide up to 33% of the Global Fund’s total contributions, requiring other donors to match our investment two-to-one or leave U.S. funding on the table. During the last pledging cycle, this requirement led other donors to significantly increase their contributions. For example, Japan increased its pledge by 46%, Italy by 40%, the United Kingdom by 38% and Germany by 33%.

In addition, our contribution catalyzes increased domestic investments in affected countries. Global Fund co-financing requirements have led to recipient countries increasing their current co-financing commitments 41% compared to the previous funding cycle, and expanding their investment in the health of their own people in the process. South Africa, home to the largest number of people living with HIV now pays for a majority of its HIV treatment costs.

U.S. investments in the Global Fund provide significant health security and economic benefits to the U.S. as well. By strengthening local health infrastructure in affected countries, the Global Fund helps prevent emerging epidemics from growing out of control and spreading to other countries. U.S. global health investments also foster stronger diplomatic and trade relationships around the world.

Despite its remarkable achievements in reducing mortality and infection rates, the Global Fund and its partners still face significant challenges in ending the epidemics.

- Malaria cases are on the rise for the first time in 10 years and we risk disease resurgence in places where funding is prematurely cut.
- 2.6 million people per year are projected to die from antibiotic-resistant TB by 2050, costing the global economy an estimated $16.7 trillion.
- Around the world, 7,000 young women and girls are infected with HIV every week, and in some African countries young women are eight times more likely to be HIV positive than young men.
- Because over 40 percent of Africa’s population is under the age of 15, it is imperative to scale up HIV prevention and treatment interventions to reach youth people.

This year the Global Fund is holding its 6th Replenishment in October. To put the world back on track to end the epidemics of AIDS, TB and malaria, the Global Fund secretariat projects that a minimum of $14 billion is needed for the three-year replenishment cycle. The Global Fund is also asking recipient countries to increase their own health investments by 48% over this period.

To continue our leadership and encourage other donors to increase their investment, Friends asks for a U.S. appropriation to the Global Fund of $1.56 billion in fiscal year 2020. We are also requesting language, like that included in the Senate FY19 State, Foreign Operations report, noting the expectation that the subcommittee will maintain this funding level through the three-year replenishment cycle.

Together, the requested funding level and report language will send an unequivocal message to other donors that the U.S. will maintain its leadership on the Global Fund, encouraging other donors to again step forward with increased pledges.

A Global Fund replenishment that achieves the $14 billion goal will lead to a reduction in the number of deaths from these diseases by half. The increased investment in the Global Fund, coupled with increases by implementing governments, will contribute towards saving an additional 16 million lives, preventing 234 million infections, and spur $19 in economic returns and health gains for every $1 invested.

However, if the Global Fund fails to achieve its replenishment goal, the world is at serious risk of sliding backward on our efforts, with the very real potential for resurgence of disease and unnecessary mortality.

Finally, Friends encourages the subcommittee to increase funding in U.S. bilateral global health programs that work synergistically with the Global Fund, including the President’s Emergency Plan for AIDS Relief, the President’s Malaria Initiative, and the USAID tuberculosis program.

Thank you again for the opportunity to testify and your consideration of all the worthy appropriations requests you will hear today.