

U.S. Senate Committee on Foreign Relations
Senator Richard G. Lugar
Opening Statement for Hearing on the Reauthorization of HIV/AIDS Legislation
Senate Foreign Relations Committee
December 13, 2007

The Foreign Relations Committee meets again to discuss reauthorization of the Leadership Act Against HIV/AIDS, Tuberculosis and Malaria. The Leadership Act, recognizing that the devastating AIDS crisis required an overwhelming response, created the \$15 billion President's Emergency Plan for AIDS Relief (PEPFAR). This program has provided treatment to an estimated 1.1 million men, women, and children infected with HIV/AIDS in Africa and elsewhere. Before the program began, only 50,000 people in all of sub-Saharan Africa were receiving life-saving, but costly anti-retroviral drugs. Today, three times that many are being treated in Kenya alone. The Leadership Act also focuses on prevention programs, with a target of preventing 7 million new HIV infections. As Americans, we should take pride in our nation's efforts to combat these diseases overseas. However, we must act with dispatch to build on these efforts, or lives may be lost needlessly.

On October 24, the Committee heard testimony from the Department of State's Global AIDS Coordinator, Ambassador Mark Dybul. He noted that there is increasing concern about U.S. intent with regard to its AIDS programs. While there is little doubt that the Leadership Act will eventually be reauthorized, the uncertainty with regard to the timing and amount of American funding means that fewer new patients will receive life-saving treatment.

Partner governments and implementing organizations in the field have indicated that without early reauthorization of the Leadership Act, they may not expand their programs in 2008 to meet PEPFAR goals.

At our last hearing, I cited a letter from the Ministers of Health of the twelve African focus countries receiving PEPFAR assistance. They wrote, "Without an early and clear signal of the continuity of PEPFAR's support, we are concerned that partners might not move as quickly as possible to fill the resource gap that might be created. Therefore, services will not reach all those who need them.... The momentum will be much greater in 2008 if we know what to expect after 2008."

The Committee also received support for early reauthorization from *AIDS Action*, which believes that our global partners need to "be assured that the U.S. commitment and leadership will continue and grow." We heard from the *Foundation and Donors Interested in Catholic Activities*, which argues that early reauthorization will "encourage implementing partners to expand the number of patients receiving anti-retrovirals to 2008 target levels rather than holding back on new services for fear of the program ending or being seriously curtailed. This means more lives will be saved."

Part of the original motivation behind the PEPFAR program was to use American leadership to leverage other resources in the global community and the private sector. According to the United Nations, "Every dollar invested by the United States leverages two dollars from Europe" in the battle against AIDS. The continuity of our efforts to combat this disease and the impact of our resources on the commitments of the rest of the world will be maximized if we act now.

The Leadership Act is due to expire in September 2008. This past August, I introduced S. 1966, which reauthorizes the Leadership Act and doubles the funding to \$30 billion. If the United States signals to the world that it is reaffirming its leadership on HIV/AIDS, that will guarantee critical continuity in the effort and save more lives.

After consulting extensively with American officials who are implementing PEPFAR, I included several modifications in my bill, which I believe will enjoy broad congressional support. My bill clarifies the provision on prevention programs to make more money available for mother-to-child transmission and blood supply safety. It also proposes new benchmarks to strengthen accountability and transparency at the Global Fund to Fight AIDS, Tuberculosis and Malaria, which has been a critically important partner. I believe that we should avoid changes that limit the program's flexibility, which has been at the heart of its success.

I join in welcoming our distinguished panel of expert implementers who are engaged in the fight against these diseases. I look forward to their testimony.

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