



March 28, 2023

FY 2024 CUGH Hill Day – April 11, 2023
Talking Points

Key messages

- We're here today in support of robust appropriations that strengthen US leadership in global health.
- Support for Global Health aligns with key goals supported by most Republicans and Democrats:
 - It benefits US national security and economic competitiveness.
 - It promotes global political and economic stability which benefits the US economically.
 - It is a job creator.
 - It has an excellent rate of return to the taxpayer.
 - For every \$100 in US government spending, only 7 cents are spent on global health. PEPFAR, celebrating its 20th anniversary in May, has saved 25 million lives at only a fraction of those 7 cents.
It strengthens our ability to detect & respond to emerging infections and new pandemics.
- It provides intelligence about antimicrobial resistance and environmental threats to health & the US economy - climate change, biodiversity losses, freshwater security, and pollution.
- 90% of the NIH's Fogarty Center's (FIC) grants go to US universities and 100% of FIC grants to overseas institutions have a US partner.
- We are here to encourage Congress to strengthen US leadership & financial support for global health through **robust appropriations and report language across the LHHS (NIH, CDC, BARDA), SFOPS (USAID), and Defense (DOD) bills.**

Funding Requests for FY2024

Summary

Labor, Health, and Human Services (LHHS)

We are requesting:

- NIH: \$44.26B (an increase of 1.7% from FY2023)
- Fogarty Center \$116.1 million (with a goal to achieve \$137m in FY2028)
- NIAID: \$7.127B (from \$6.562B FY2023)
- NIEHS: \$1.037B (FY2023 \$997m)
- Center for Disease Control and Prevention (CDC)
 - Overall- \$11.58B in discretionary budget authority (this is \$2.397B above the enacted

FY2023 budget)

- Center for Global Health \$1.002B (from \$748m in FY2023)
- NCEZID \$900m (\$751m in FY2023)

State and Foreign Operations (SFOPs) FY2024

We are requesting:

- \$2.223 Billion for USAID. (FY2023 budget, \$2.083).
- \$115.9 million for the WHO (from FY2023 \$108.3 million)
 - \$775 million in new funding for BARDA's work on Emerging Infectious Diseases and \$500 million for BARDA's work on antimicrobial resistance.

Additional Talking Points

Labor, Health, and Human Services (LHHS)

Fogarty International Center at NIH:

- The NIH Fogarty International Center accelerates science, creates partnerships, and provides technical assistance and trainings with partner countries to advance new technologies for pressing health challenges. It accomplishes this with less than one-quarter of one percent of the total NIH budget. This language recognizes that Fogarty needs more resources for an expanded role in pandemic preparedness and global health research capacity building.
- It also recognizes the value of reciprocal innovation. Global health innovations supported by Fogarty can often be used in low-resource settings everywhere, including in rural and low-income areas of the United States, to drive down health care costs, improve public health and strengthen health security.
- Support the continued investment of \$5m/year to address health disparities within FIC.
- \$100m/yr for Climate Change and Health in NIEHS

CDC Global Health:

- The requested investment sought for FY2024 will enable the CDC to strengthen the US' public health infrastructure to prevent, detect and respond to public health threats. This is a far less expensive approach than addressing such threats once they have spread widely.
- Global health research takes place across the CDC, including in the Global Health Center and the National Center for Emerging Zoonotic and Infectious Diseases (NCEZID).
- The Global Health Center provides technical support and validates tools for use by US global health initiatives such as PEPFAR, the President's Malaria Initiative, and USAID's Neglected Tropical Diseases Program. GHC also hosts the world premier parasitic diseases lab and leads on CDC's global health security efforts.
- NCEZID provides expertise to track and prevent infectious disease threats. It serves as an international reference hub for identifying unknown threats and monitoring the emergence of new disease variants.

Infectious Disease Countermeasures at BARDA:

- The Biomedical Advanced Research and Development Authority (BARDA) sponsors the late-stage

development of vaccines, drugs, diagnostics, and other medical devices for naturally occurring biothreats that lack a commercial market—including emerging infectious diseases (EIDs), pandemic influenza, and AMR.

- BARDA focuses on domestic health security, but many of the innovations it supports are used globally, such as vaccines for Ebola, COVID-19, and MPOX.

Defense:

- Recognizes the value of DOD's work in infectious diseases and encourages continued research to develop products for malaria, leishmaniasis, diarrheal diseases, and health security threats.
- Recognizes DOD's new holistic approach to developing medical countermeasures for a range of chemical and biological threats.
- Encourages the department to maintain and expand its infectious disease research partnerships.
- Recognizes the value of DOD's peacebuilding work in emergency humanitarian missions and Medical and Dental Civic Action Programs (MEDCAPs and DENTCAPs).

Why global health is important: additional information.

The United States is a leader in global health R&D, and sustained commitment is critical to maintaining this global competitive advantage.

- Investing less than .01 percent of gross domestic product (GDP) in global health R&D, **the US leads the world in public investment in global health R&D.**
- US government support for global health R&D has delivered **dozens of new global health technologies, including:**
 - 31 new products for neglected diseases.
 - This includes at least 11 new products for malaria, 10 for tuberculosis, and 4 for neglected tropical diseases like leishmaniasis and dengue.
 - 4 new products for Ebola and other African Viral Hemorrhagic Fevers.
 - 7 new reproductive health technologies.

Investments in global health R&D provide domestic benefits, supporting the US economy by creating jobs, bolstering US research, and spurring business activity.

- In 2015, 89 cents of every \$1 the US government spent on global health R&D was invested domestically within the United States, supporting jobs for American researchers, scientists, and academics.
 - Between 2007 and 2015, this meant that the US government invested \$12 billion into the domestic economy because of its efforts to advance global health R&D.
 - In total, this domestic investment between 2007 and 2015 is estimated to have **created nearly 200,000 new jobs and generated \$33 billion in economic output** as this investment cycles through the economy.
- Government spending also encourages the private sector to invest in global health research.
 - USAID's Saving Lives at Birth Grand Challenge, which advances innovations to help women and newborns, has successfully leveraged \$20 million in US government funding to attract more than \$150 million from outside donors to fund a pipeline of 116 innovations aimed at saving the lives of mothers and newborns, with potential to save 150,000 lives by 2030.
 - In 2015, the US government invested \$192 million in US-based pharmaceutical companies to advance global health R&D activities. In return US-based pharmaceutical

companies invested \$294 million in global health R&D in 2015 alone.

Global health is American health. It is important to sustainably invest in a range of new technologies for emerging and endemic diseases to protect Americans and promote global health security.

- In an increasingly globalized world where diseases cross borders with ease, investments in health research not only protect people in emerging economies, but they also protect us all. Recent outbreaks of Ebola, Zika, and now COVID-19 demonstrate that **global health is American health**.
- Growing prevalence of drug- and antimicrobial-resistant viruses and diseases also directly threatens American health and economic security.

While upfront costs of developing new health technologies can be significant, in the long-term **new innovations can produce meaningful cost savings and improve the efficiency** of health and development programs.

- \$26 million invested in polio vaccine R&D resulted in cost savings of \$180 million on polio treatment since the 1950s.
- Vaccine vial monitoring devices, which measure the temperature of vaccines to ensure efficacy, have saved immunization programs \$140 million in wasted vaccines over the past decade.
- Every \$1 invested in HIV/AIDS vaccine R&D is expected to return between \$2–67 in cost savings.
- New treatment regimens under development for drug-resistant tuberculosis (TB) could reduce treatment costs by up to 90 percent. It currently costs \$134,000 to treat a patient for multidrug-resistant TB (MDR-TB).

We will not continue to make progress in global health—and protect the health of Americans—without **new cures, treatments, and diagnostics**.

- Funding for global health R&D remains far below the level needed to meet health needs.
- While the world has experienced landmark gains in global health over the past two decades, we cannot continue the arc of progress using current interventions alone – we need investments in new cures, treatments, and diagnostics to meet emerging challenges and meet our ambitious goals.
- It builds enduring friendships. It solidifies alliances and strengthens US strategic interest. It prevents war. It accrues domestic benefits because we gain deep insight into the culture and thinking of other countries through our work in global health. It has solid moral and ethical justifications.
- We recognize the fiscal challenges the US is facing and the difficult task ahead for legislators. However, investments in global health are extremely cost effective. The costs of inaction dwarf the investments listed below. Cuts to US government spending in these areas will harm US security, economic competitiveness, and American lives.
- America's work in global health is America at its best.

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