July 7, 2008

Dear Senator,

On behalf of the United States Conference of Catholic Bishops (USCCB) and Catholic Relief Services (CRS), we are writing with reference to S. 2731, the Tom Lantos and Henry J. Hyde United States Global Leadership Against HIV/AIDS, Tuberculosis, and Malaria Reauthorization Act of 2008, also known as PEPFAR. We urge you to support moving S. 2731, as modified by the Substitute Amendment, to the Senate floor as soon as possible for a vote on final passage. We believe that the Substitute Amendment, which incorporates a bipartisan compromise, makes important improvements in the bill.

USCCB and CRS welcome the consensus reflected in S. 2731 to preserve PEPFAR’s focus on its foundational goals of saving lives, caring for the infected and the affected, and preventing the spread of deadly disease. We are also encouraged by provisions in S.2731 that support a morally appropriate approach to overcoming the health crisis in poor countries. We welcome the retention of abstinence, fidelity and partner reduction, which have proved highly effective in curbing the spread of HIV in many countries, as major components of HIV prevention education. Both the Conference of Bishops and CRS are appreciative of the retention of the “conscience clause,” which will help assure that Catholic and other faith-based organizations are not discriminated against as HIV/AIDS service providers.

We support S. 2731’s strengthening of PEPFAR programs to address tuberculosis and malaria, two debilitating, often deadly diseases that seriously affect poor people in developing countries, especially those with HIV. We also appreciate a number of new provisions, including those that improve food and nutrition programs—vital components of treatment and care for HIV/AIDS patients and of support for orphans and vulnerable children—and strengthening the healthcare workforce in program countries. The ever-growing demand for healthcare professionals in HIV and AIDS is exhausting the limited pool of personnel that must also provide all other health care services. Finally, to accomplish the critically important objectives of the bill, an increase in funding from current levels is necessary. We support the funding levels authorized by S. 2731.

The activities of Catholic health institutions extend from major urban centers to the most remote rural villages, delivering approximately 25% of all HIV and AIDS care worldwide. Programming of HIV and AIDS activities in sub-Saharan Africa requires advanced planning. Many local institutions have limited independent resources and are reluctant to make programming decisions without assured funding. The risk of a hiatus in funding, however brief, could disrupt treatment regimens, undermine the credibility of healthcare institutions providing HIV services, and endanger lives. Based on CRS’s extensive experience in 12 PEPFAR focus countries, we urge completion of the reauthorization process in this session of Congress to avoid any possible disruption of this life-saving initiative.
With appreciation for your continued support for addressing the critical health needs of the poor around the world, we remain,

Sincerely yours,

Most Reverend Thomas G. Wenski  
Bishop of Orlando  
Chairman, Committee on International Justice and Peace

Ken Hackett  
President  
Catholic Relief Services