July 16, 2008

Dear Representative,

On behalf of the United States Conference of Catholic Bishops (USCCB) and Catholic Relief Services (CRS), we are writing with reference to 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 hope that a conference between the House and Senate will not be necessary on this bill, and urge you to support moving the version of the bill approved by the Senate to the House floor for a vote on final passage as soon as possible. The bill as passed by the Senate (S.2731) represents a bipartisan compromise and incorporates many of the features of the House bill, but we believe it also makes important improvements in the legislation.

USCCB and CRS welcome the consensus reflected particularly 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 strengthen support for 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 welcome the fact that the Senate bill, like its House counterpart, includes provisions strengthening 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 proposed funding levels.

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 as soon as possible 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