



## THE CSIS TASK FORCE ON HIV/AIDS: STRENGTHENING U.S. LEADERSHIP

FULL SESSION OF THE TASK FORCE EMINENT PERSONS PANEL

Thursday, June 13  
10:00 a.m. to noon

Dirksen Senate Office Building  
Room G-11  
Washington, D.C.

### SUMMARY

On June 13, Senators Bill Frist (R-Tenn.) and John Kerry (D-Mass.), co-chairs of the CSIS HIV/AIDS Task Force, presented the Task Force's seven-point ["Call to Action"](#) for U.S. leadership in battling the epidemic. The Task Force's core concern is to build bipartisan consensus on critical U.S. policy initiatives and to emphasize to senior U.S. policymakers, opinion leaders, and the corporate sector the centrality of U.S. leadership in strengthening country-level capacities in Africa and elsewhere to enhance prevention, care, and treatment of HIV/AIDS.

The June 13 event was the first full meeting of the Task Force's eminent persons panel, which is drawn from Congress, the administration, public health groups, the corporate sector, activists, and others. Turnout was very strong and participants, including co-chairs Frist and Kerry, committed almost two and half hours to intensive, focused discussion. Attendees included Peter Piot, executive director of UNAIDS, U.S. Under Secretary of State for Global Affairs Paula Dobriansky, and Congressman Jim McDermott. Special guests also included Richard Feachem, executive director of the Global Fund to Fight AIDS, TB, and Malaria, Ayanda Ntsaluba, South African Director General for Health, and Christoph Koepke, head of DaimlerChrysler/South Africa.

The "Call to Action" presented at the event is a distillation of the Task Force's work to date and sets out a series of concrete steps required for effective U.S. leadership on HIV/AIDS (see attached). Foremost among the recommendations are: to substantially increase U.S. assistance and resource flows to fight AIDS and challenge partners in the developed and the developing world to do the same; to

respond preemptively to the destabilizing effects of the pandemic and build anti-AIDS partnerships with those countries where the pandemic's second wave is beginning to strike; to address the implications of expanded treatment and a future vaccine through capacity-building and diplomatic outreach to ensure long-term, affordable access to medicines and vaccines; to actively engage the Global Fund and seek to strengthen its engagement with foundations and corporations; to improve the coordination of U.S. efforts, and to communicate to the American people the issues at stake and the importance of U.S. leadership.

The purpose of the meeting was to generate a broad ranging dialogue about the future of the pandemic, U.S. leadership, and where to focus the Task Force's efforts in the next 18 months, using the "Call to Action" as a basis for discussion. Also distributed at the event were four Task Force reports:

- [\*Expanding Antiretroviral Treatment in Developing Countries Creates Critical New Challenges\*](#)
- [\*The Destabilizing Impacts of HIV/AIDS\*](#)
- [\*The Global Fund to Fight AIDS, TB, and Malaria: Opportunities and Challenges\*](#)
- [\*The Violent Transmission of HIV/AIDS\*](#)

## KEY OUTCOMES

**Endorsement of the Call to Action:** There was resounding and unanimous support for the timing and substance of the Task Force's "Call to Action," from congressional, administration, activist, and corporate participants alike. This endorsement was communicated to top officials on HIV/AIDS within the Bush administration who were present at the meeting, including Under Secretary Paula Dobriansky, Special Assistant to the Secretary for Health and Human Services William Steiger, Director of the White House Office on National AIDS Policy Scott Evertz, and Michael Miller, director for African Affairs at the National Security Council. South African Director General for Health Ayanda Ntsaluba also commended the statement and emphasized South Africa's willingness to partner with the United States to address the challenges of HIV/AIDS, capacity-building, and poverty reduction. The event highlighted the South African government's recently intensified commitment on HIV/AIDS.

**Sustainability:** Peter Piot, as well as other speakers, emphasized that the epidemic is only in its beginning stages and that, if current trends continue, it will not peak until 2050 or 2060. This means that the United States and others must undertake systematic forward planning and be prepared to commit to action through the next generation and beyond, as ever-larger numbers of people are infected and affected, and as the human resources crisis worsens. At the same time, the pandemic will quickly evolve into something far more diverse than it is today, with different configurations in newly affected countries like China,

Russia, the Caribbean, and so forth. Flexibility, innovation, and risk-taking will therefore be critical to a long-term, comprehensive approach.

**Capacity-building:** Participants emphasized the overwhelming centrality of building capacity, not only in the health field, but in related areas as well – education, agriculture, administration, governance, and planning – that are necessary to address the multifaceted nature of the pandemic. There is an urgency in addressing the immediate needs of those who are affected, but there is also an urgency in getting started on long-term tasks of capacity-building, which in many cases will be complex and slow in yielding palpable results. Capacity building should not focus exclusively on government or non-governmental capacity. Public infrastructures alone cannot make a serious impact on curbing AIDS and mitigating its effects. And while public infrastructures must be strengthened, private actors and entities must also be supported, receive investments and be allowed to work more effectively.

**Partnerships:** The importance of partnerships – between and among governments, foundations, unions, NGOs, small and large-businesses, and community groups – was a predominant recurring theme. Partnerships between the health community, governments, and various volunteer programs are critical in tapping and using human resources to the fullest extent possible and in capacity-building at the local level. A number of participants described specific models of emerging partnerships. Robert Lindsay of Coca-Cola Corp., for example, noted that it will be critical to engage and empower smaller businesses who may wish to be more effectively involved yet lack the capacity to contribute to the extent they would like. Lindsay advocates building partnerships within the private sector, among large and small businesses, which would help bring the latter into broader partnerships with the Global Fund and national country-coordinating mechanisms. Richard Feachem of the Global Fund expressed interest in pursuing the idea, and the CSIS Task Force could perhaps play a role in facilitating discussion and implementation.

**Accessing and absorbing funds:** Another theme was the importance of working with acutely-affected countries to assist them in developing strategies and proposals (to the Global Fund, for example), to strengthen access to international resources and enable them to carry out their programs. And at the same time, donor countries need to avoid rigid “stovepiped” funding, coordinate efforts, and develop mechanisms and procedures to avoid bottlenecks, and ensure steady, reliable, and accelerated resource flows.

**Incentives for drugs and vaccines:** As demand for medicines (and eventually vaccines) increases, patent holders and current generics producers will be unable to provide sufficient quantity and quality products for no or little profit. There

will thus be no guarantee that current efforts will be sustainable, and effective long-term country planning will be impaired. Current approaches – philanthropy, pledges to sell at no profit, and reliance upon generics – cannot ensure affordable access in the quantity and quality needed. Creating incentives for affordable and sustainable access to drugs and vaccines will inexorably present a top diplomatic challenge and is another area where enhanced public-private partnerships will play a critical role.

**Interlinkage of HIV/AIDS and poverty:** Another recurrent theme in the discussion was the challenge of the interconnectedness of AIDS to poverty, drought, famine and other issues that most developing countries face. The United States, the international community, and those countries most acutely affected will need to ensure that development and anti-AIDS policies are synergized. The Millennium Challenge Account sets up a major new opportunity, but will pose new challenges as well. The United States should reexamine its funding processes to see if there can be greater flexibility and interchange to address poverty and AIDS more effectively and broadly.

**Human Rights and ethics:** Participants pointed to the link between HIV/AIDS and broader human rights issues, for example issues of gender equality, sexual abuse and violence. The epidemic cannot be staunched with technical interventions alone, and human rights, particularly the empowerment and protection of women, need to figure prominently in combating AIDS. Further as treatments become more widely available and vaccine trials more frequent, new ethical challenges will arise that require attention now.

### **Next Steps for the Task Force**

On October 3-4, the Task Force will host a conference on looming crises – in India, Russia, China, Nigeria, and Ethiopia – where the pandemic's second wave is poised to strike and where national responses have been so far slow to materialize. Expert panels will examine in each of these countries the scope of the epidemic, the expected trajectory of the disease, current efforts to mitigate its spread and impact, and the broader implications of a full-blown pandemic.

The next meeting of the Task Force's eminent persons panel will be in late January or early February 2003. While the first session emphasized consensus and common ground, the next session will address critical issues that to date have been controversial or are potentially divisive.

From now until the next full session of the Task Force in early 2003, the Task Force will carry forward ongoing work to strengthen the Global Fund, including

ideas discussed at the June 13 session to empower and engage small business; highlight the destabilizing consequences of HIV/AIDS and steps to mitigate these impacts; and examine strategies to address human capacity requirements for treatment and prevention. The Task Force will also initiate new work on vaccine development, human rights and women's empowerment, and creating incentives for affordable and sustainable access to medical products.