Oakland Tribune

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Opinion

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Congress must renew Bush's AIDS relief plan

OUR OPINION

REAUTHORIZATION OF ONE of President Bush's few foreign policy triumphs is being held up in the Senate by a small band of Republicans.

One of them, Sen. Tom Coburn, R-Okla., even calls it "the most successful foreign aid program since the Marshall plan."

It was launched by President Bush's 2003 State of the Union address, in which he surprised almost everyone by vowing to substantially increase the United States' support for the fight against HIV/AIDS.

It became the President's Emergency Plan for AIDS Relief (PEPFAR), a five-year, $15 billion initiative against AIDS, malaria and tuberculosis that, by almost any measure, has been tremendously successful.

In sub-Saharan Africa, now at the heart of the HIV/AIDS pandemic, the program is credited with bringing life-saving medical care and medications to 1.5 million people with AIDS. It's also projected to prevent 7 million new infections and provide care for 10 million people, many of them women, children and orphans.

Bush credits it with "preventing HIV infections in infants and easing suffering and bringing dying communities back to life."

Rep. Tom Lantos, the longtime congressman from San Mateo who died earlier this year, was a major sponsor of both the 2003 bill and the one up for renewal this year. That bill would more than triple the U.S. commitment to $50 billion over five years. The House of Representatives passed its version and supporters hope members of the Senate will do the same before its upcoming summer recess (Aug. 11-Sept. 5) and becoming preoccupied with running for re-election and electing a new president.

Proponents of the legislation, such as Physicians for Human Rights, fear Senate Bill 2731 could fall through the cracks and not get renewed before the current bill expires at the end of September.

One reason Coburn and his colleagues are keeping the bill from the Senate floor is a disagreement over how to use the money. They want to keep a formula that requires 55 percent of the money is given to treatment programs.

Groups such as PHR advocate letting individual countries decide how to divide up the money. In some nations, 55 percent for treatment works, they say, but in others a different distribution formula would be more effective.

The physicians' group is responsible for training local health care professionals to deliver and sustain local HIV/AIDS treatments. In many countries, there are too few trained health care professionals to get a handle on the pandemic. A million are needed in Africa alone and PHR wants to use some money from the reauthorized bill to train at least 140,000 indigenous health care workers over the next five years.

Such groups also want to tie HIV/AIDS treatment to public health systems as a way to help children and women, who in much of the world account for most new victims.

Both ideas make on-the-ground sense. AIDS is one of the most destructive pandemics in human history, having claimed almost 30 million lives since 1981. In 2005 alone, it took an estimated 3 million lives.

We urge the Senate to approve SB 2731 before its July 4 break or Aug. 11 recess. But first, Coburn and his colleagues must let the bill go to the floor for full consideration.

It will be irresponsible if PEPFAR isn't reauthorized, and successful life-saving health programs and treatments are disrupted before the current legislation expires.