



LETTER TO THE EDITOR AND OP-ED EXAMPLES

LTE:

Response to Zika Funding: Congressional Apathy Kills

Emily Sanderson

Congress' disturbing decision to inhibit funding for Zika is symptomatic of a bigger problem in congress: decreased funding of global health-- specifically TB, Malaria, and AIDS.

I just returned from the 2016 International AIDS Conference in Durban, South Africa where the message was loud and clear from scientists, researchers, government officials, activists, and UNAIDS director, Michele Sidibe: fully fund the global AIDS response. Donor countries fund treatment, prevention, and care through programs like the Global Fund (est. 2002) and PEPFAR (est. 2003). Now, Kaiser Family Foundation and UNAIDS release the analysis: "Donor Government Funding for HIV Fell in 2015 for First Time in 5 Years." 13 of the 14 donor countries reduced funding when we can see the end of the AIDS epidemic, mistaking substantial progress for the end of the epidemic.

Deputy Chairperson of Treatment Action Campaign (TAC), the strongest community response to HIV in South Africa, addressed the conference: "Friends, comrades, when your house is burning with your family inside it you don't quietly ask for help. You beg. You scream and shout. You demand. Our house is still burning."

De-prioritization of public health emergencies like AIDS, TB, Malaria, and burgeoning Zika will not solve them. Funding will.

Op-Ed:

AIDS champions must step up efforts to end epidemic

Alison Case

It is a humid day in the Sub-Saharan African heat. Outside a clinic, bodies are laid out and covered, waiting for families to claim them. Death is constant, drugs are a fantasy, available to some in other, more affluent parts of the world, but not here, where they are needed most. This is the face of the AIDS epidemic in 1999--when the World Health Organization (WHO) reported that AIDS was the number one cause of death in Africa, and when drugs were effectively unavailable in the developing world, barred by high prices and patent protections.

Flash forward to 2015. When I visit a hospital in Malawi I see many patients with AIDS, some are diagnosed early and put on lifesaving treatment. Others still arrive too late, with wasted bodies and infection--signs that their immune system has become totally compromised by the virus. While we've had many victories in the fight to end the epidemic this year and certainly made great strides since 1999, we have a long way to go to beat the epidemic once and for all--and we need leadership from the President and from Congress to get there.

This year, 15 million people have been started on lifesaving antiretroviral treatment, ahead of the once thought unachievable millennium development goal. Studies show we can prevent new infections with consistent treatment, and new WHO guidelines were recently released supporting this work with a call for all countries to adopt a policy of immediate treatment upon diagnosis.

These are exciting times that call for celebration but also for leadership from our president and from Congress to support robust funding for life-saving HIV/AIDS programs in order to achieve a five year scale up phase that will see the end of AIDS by 2030.

Unfortunately, what we have seen from our supposed champion in the White House over the past few years is just the opposite. President Obama has consistently cut the budget for AIDS while heralding the administration's support and triumphs. Congress has fared only slightly better, flaunting self-congratulatory praise for restoring the President's cuts while ignoring calls to restore cuts from previous year's that have left the US flagship AIDS relief program, PEPFAR, stuck at 2010 funding levels. Champion presidential candidates, like Sen. Lindsey Graham (R-S.C.), who claim to truly care about this fight have made promises to restore funding and broken them. Sure, our champions have done work to keep PEPFAR funding at current levels, but this is hardly going to move us forward, and in fact, will cause us to lose ground.

This year, 2016, is going to be different. It has to be, if we don't want to tip backwards

and lose track of the progress we have made so far in the fight against AIDS. Champions of the fight will have to be champions in action, not just in words. It will no longer be enough to sing the praises of a program, to restore cuts, and certainly it will be unacceptable to MAKE cuts, as the president has done continuously. We need to get on the offensive to make the final push.

This is obviously pertinent and urgent for people living with HIV around the world. But is also an important push for all of us. Programs like PEPFAR have been shown to increase stability and security in regions where they are implemented and have installed surveillance and lab services that prevented the spread of Ebola in PEPFAR countries.. The fight to end AIDS is the fight for a more secure and peaceful future--for all of us.

This year, we can continue with business as usual. Make cuts, pat ourselves on the back for restoring them, keep funding flat, and start on a path that leads us back to 1999. To a demand for coffins that can't be met, and regions destabilized by death and disease. We can do this, or, we can commit to scaling up over the next five years to end the epidemic of our generation, to making AIDS as we know it a thing of the past. It is our hope that the next generation of medical trainees will learn about the AIDS epidemic as just that--a thing of the past. That they will go to those same hospitals at which we have had the privilege of training in Malawi, Uganda, Zambia, and see patients thriving and receiving treatment immediately upon diagnosis. But we need to see real commitments this year from the President and Congress to get there.