

**Written Testimony Submitted to the House of Representatives
State and Foreign Operations Appropriations Subcommittee
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PATH appreciates the opportunity to submit written testimony regarding FY 2012 funding on behalf of global health research and development at the US Agency for International Development (USAID). PATH is an international nonprofit organization that creates sustainable, culturally relevant solutions, enabling communities worldwide to break longstanding cycles of poor health.

We are grateful for the leadership of Chairman Kay Granger and Ranking Member Nita Lowey. We understand that these are challenging economic times and that this Committee faces a difficult task. However, we have also observed that in terms of return on investment, the relatively small amount of funding that goes to USAID has a significant impact. As an organization that works with the public and private sectors here and abroad, from the development to the delivery of innovations that save lives and free people and economies from the burden of disease, we see firsthand the critical role that USAID plays in fostering development and expanding access to health interventions.

PATH respectfully requests that the Subcommittee support the President's request for the FY 2012 budget, and, in particular, ensure that we keep our commitments to maternal health and child survival, the GAVI Alliance, and the Global Fund to Fight AIDS, Tuberculosis and Malaria. We also ask that the Subcommittee continue to affirm its support for the role that USAID plays in advancing innovations to ensure that people in low-resource settings have access to life-saving interventions and technologies.

Due to its presence in the field and its linkages with end users, USAID plays a unique and complementary role to that of other US government agencies in the research and development of new

tools for global health. While many commercial and nonprofit groups are working on health technologies, there is not a significant commercial market to incentivize research and development for conditions and diseases whose heaviest burden falls on the developing world. In addition, the lack of sophisticated laboratories and trained personnel in many developing countries means that technologies created for wealthier countries are often not appropriate for low-resource settings. USAID helps to fill this commercial gap. Two examples are the HealthTech cooperative agreement and USAID's support of malaria vaccine development.

Over HealthTech's 25-year history, 85 technologies have been invented, designed, developed, or co-developed to save lives in low-resource settings. Many of these technologies have been scaled up for use globally and billions of units have been used worldwide. More than 95 private-sector collaborators have been involved in HealthTech, matching USAID dollars two to one, building American businesses, cutting the costs of key interventions, and providing tools for countries to meet their own needs affordably and sustainably.

Through the Health Tech partnership with USAID, PATH designed one of the first feasible approaches to non-reusable syringes for immunizations, called the SoloShot™. This autodisable syringe has a fixed needle that automatically locks after a single injection. Each year, more than 12 billion injections are administered worldwide; in developing countries, 50 percent of injections are estimated to be unsafe. A primary source of disease transmission has been through the reuse of contaminated needles and syringes. The SoloShot syringe prevents reuse by forcing the plunger to stop when the syringe is filled to the pre-set level. After the vaccine is injected, the plunger automatically locks so that the syringe and needle cannot be reused.

The SoloShot syringe was licensed to BD Pharmaceutical Systems, a New Jersey company that is one of the world's leading syringe manufacturers. As of 2009, 6 billion SoloShots manufactured by BD

had been sold. More than 5.4 billion immunizations have been delivered using SoloShot syringes by public health programs in more than 40 countries in Africa, Asia, Eastern Europe, and Latin America. For the US government, this was a very cost-effective investment: the initial \$284,000 provided by USAID for SoloShot leveraged \$15 million from the private sector.

Another example of USAID's critical work is in the field of malaria. The malaria tools that USAID is helping to advance will strengthen the important work that USAID is already doing.

There is no question that the President's Malaria Initiative and US support for the Global Fund are paying off. Global and national investments in malaria control have led to declines in mortality rates among children under five years of age by more than 20 percent in a number of sub-Saharan African countries in the past five years. Globally, the estimated number of people dying from malaria each year declined from nearly 1 million people in 2000 to fewer than 800,000 in 2009. These successful efforts should be sustained and strengthened so that these gains are not reversed.

Eliminating malaria will invariably require new tools, including a vaccine. USAID is playing a crucial role in this area. Working with partners such as the PATH's Malaria Vaccine Initiative (MVI) and the Walter Reed Army Institute of Research, USAID has contributed to significant advances in malaria vaccine development. Under a cooperative agreement with MVI, USAID currently supports the development of next-generation vaccines, particularly those that seek to build on the success of the world's most clinically advanced malaria vaccine candidate, RTS,S. In addition to its support for R&D, USAID has collaborated since 2006 with partners at country and global levels to facilitate early preparation for a decision on the use of a malaria vaccine once it becomes available. The resulting decision-making framework tool serves as another example of USAID's role in supporting the capacity of countries to determine and respond to their own needs in partnership with the United States.

Continued progress in our nation's effort to improve global health requires the development of new tools and technologies and is heavily reliant on research performed and supported by USAID. For USAID in particular, as well as the government overall, explicit recognition of the role of research and innovation for new tools and interventions will facilitate long-term planning and elevate the agency's capacity to address critical health and development issues. For these reasons, we support the President's budget request as the minimum amount needed for the International Affairs account for FY 2012. We very much appreciate the Subcommittee's consideration of our views, and we stand ready to work with Subcommittee members and staff to ensure that the United States maintains its position as a leader in global health.