Online Event

“COVID-19’s Next Cascade of Crises”

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FEATURING:
Mark Lowcock,
Head of the United Nations Office for the Coordination of Humanitarian Affairs and Under-Secretary-General for Humanitarian Affairs and Emergency Relief Coordinator

Julie Gerberding,
Co-Chair of the CSIS Commission on Strengthening America’s Health Security and Executive Vice President and Chief Patient officer at Merck

Congresswoman Susan Brooks,
U.S. House of Representatives (R-IN-05)

Congressman Ami Bera,
U.S. House of Representatives (D-CA-07)

CSIS EXPERT:
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Hello. Welcome. Good afternoon or good morning, depending on where you are. I’m J. Stephen Morrison, senior vice president here at CSIS and we’re delighted today to be hosting U.N. Under-Secretary-General Mark Lowcock. And we’re delighted that – (audio break) – Health Security has so kindly agreed to be with us to preside here today. This is a commission event. The commission’s work is putting a very special focus, an increasing focus, on the question of the world’s vulnerable populations in the face of the – (audio break).

Julie Gerberding: – (audio break) – with the CSIS Commission on Strengthening America’s Health Security. This is a commission that’s been operational for some time. I’m chairing that commission, along with former Senator Kelly Ayotte and we have really been focusing on the linkages between global health challenges and the U.S. national security interests. Our work was started long before the pandemic emerged, but I think we recognize now that the crisis we’re facing – an escalating pandemic caused by a novel virus that’s already affected almost 14 million people, taken nearly 600,000 lives, and is estimated to really cost us at least 9 trillion (dollars) in the standpoint of the global economy. And of course, that’s an estimate, but there are those who say it’s much greater than that when you get down to the household level.

I think it’s very clear that we cannot afford to ignore health risks that emerge outside of our borders. But it’s also, I think, clear that our response to SARS-CoV-2 pandemic so far has largely not taken into account the broader global impact. And as we’ve struggled to manage our own epidemic, the health, the economic and security implications of these uncontrolled outbreaks in other and often unstable and vulnerable populations do have an effect on us in the United States. The decision to withdraw our membership from the World Health Organization as probably the most recent and dramatic example of our lack of attention to the multilateral global view.

So, we know in the coming weeks Congress is going to be weighing the next Covid-19 supplemental funding legislation. And we do have an opportunity to use that platform as a place where we can propel our leadership to address the acute requirements of the international response, even though we cannot abandon the complexity of the crisis we’re facing here at home. So, as one of the commission co-chairs, I truly applaud the U.S. Global Leadership Coalition and the 12-18 billion (dollar) proposal to support the international response. And we are encouraged to see the emergence of bipartisan support for this global provision, in both the Senate and the House.

Fundamental to an effective international SARS-CoV-2 is the leadership and the integrity of the core U.S. public health institutions and by that, of course, I mean the CDC, the NIH, BARDA, the FDA. These institutions are home to some of the world’s foremost public health scientists and infectious disease experts and they can be incredibly helpful in lending their expertise and experience to the global community. Our allies and our multilateral partners will also be central to a coordinated effort and it’s critical that the U.S. work closely with the U.N. agencies.

So, on that note, we’re delighted to be joined today by United Nations Under-Secretary-General Mark Lowcock. Mark heads the coordination of humanitarian affairs, which will be central in coordinating and facilitating the robust international SARS-CoV-2 response that we need, especially targeting those vulnerable populations. Many of you have known Mark. He’s an amazing diplomat, an amazing international leader. He’s had an incredibly distinguished career in leading international NGOs and organizations. He brings energy, innovation, and in his role as the U.N. Under-Secretary-General for
emergency relief coordination at this critical moment, he’s here to help us understand what’s on the horizon globally, what U.S. leadership means in that context, and what the cost of international inaction might actually be.

So, we’re going to hear from Mark first. And then we’ll have a discussion with Congressman Bera and Congresswoman Susan Brooks. Both Congressman Bera and Congresswoman Brooks are highly active and contributive members of the – excuse me – the CSIS Commission on Strengthening America’s Health Security. So we’re really indebted to them for their leadership in Congress, and their commitment and determination on these issues. They truly are inspiring leaders. They’re stalwart and standing strong on these issues and I think in the context of everything that’s going on in our Congress right now, we’re lucky they’ve taken time out of their busy schedule to be with us. They’ll speak to the central role that the Congress can play in helping protect the most vulnerable from the ever-growing SARS-CoV-2 pandemic threat.

So, without further delay, Mark, why don’t you start and tell us what’s on the horizon regarding this global pandemic? Thank you.

Mark Lowcock:

Julie, thank you and thanks very much also to CSIS for having me today. It’s an honor to be here with you and Steve, and Congresswoman Brooks, and Congressman Bera. I pay tribute to the important work you’ve all done on global health security, not just recently but over the years. The Covid-19 pandemic is the biggest international crisis we’ve faced in over 50 years. Some countries are now finding pathways to cautious recovery, but many others are teetering on the edge of absolute disaster.

And there are quite a lot of countries that have yet to get to the worst point in dealing with the problem. And though the humanitarian landscape has changed over the last four months, and I’ll get into that a bit later, the need for a coordinated international response, as you’ve just said, remains essential. My experience is that that can only happen with U.S. leadership and it’s more important than ever, given the very serious cascade of multiplying crises that I think lie ahead of us.

So, I really want to thank CSIS and members of the Commission on Strengthening America’s Health Security for your leadership. Congressman Bera, Congresswoman Brooks, Steve, Julie, your publication last year on ending the cycle of crisis and complacency in U.S. global health security displays exactly what I think is the foresight and creative thinking that the international humanitarian community has come to expect from the U.S. And it’s very much in line, I have to say, with the approach I’m trying to take in advocating for anticipatory action to deal with problems.

I’d like to start just by summarizing some analysis my office has done on the cost of inaction in response to the Covid-19 crisis. I think we’re all familiar with the immediate impacts of the virus itself. But unfortunately, even recognizing what some donors have done, what we’ve got this far is really a grossly inadequate overall response, given the scale of the crisis, whose consequences reverberate far beyond the immediate health impact. And a failure to act now will have devastating consequences.

If it’s left unmitigated, COVID-19 could infect up to 640 million people and kill 1.7 million people in the world’s most vulnerable 32 low-income countries. In addition, at least 2 million preventable deaths could occur as a result of disrupted health care through the pandemic. Already, millions of children in 80 countries are not receiving their routine vaccinations. The annual death toll from HIV, tuberculosis, and malaria is
set to double. Important progress that has been realized by GAVI and The Global Fund and the work of CEPI and others, in other words, could be compromised as a result of the pandemic.

We’re also staring at the specter of multiple famines, acute food insecurity could nearly double by the end of the year if no action’s taken and my friend and college, Governor David Beasley has shared some very compelling analysis on this, which I fully endorse. Millions more women and girls are going to be exposed to gender-based violence, caught at home during lockdowns, or facing economic difficulty. In recent months, dedicated domestic violence hotlines in the countries where I work have reported eightfold increases in calls from women seeking help, but $500 million worth of programming developed by the U.N. and the brilliant NGOs has not yet been funded.

School closures have a big effect too, and not just on education but also on hunger. A protracted school shutdown of five months could generate learning losses that have a present value of $10 trillion globally. But in addition to that, nearly 370 million children have missed out on school meals, many in countries where they’re hungry most of the time and we’ve seen many studies on the impact of stunting and malnutrition on entire economies.

So that summary assessment, which by the way is corroborated by what I’m hearing from leaders of NGOs and faith-based organizations – and I have another meeting this morning with many of their CEOs, off course, many of them are many of the leading organizations, again, are U.S. organizations and I heard exactly the same thing from them, especially the leaders of the faith-based organizations. So these are the, if you like, the human consequences of inaction. And I know there’s also numbers we exchange. And it is very important to remember that there are real people behind every statistic: parents in Niger losing their child to measles as a result of missed vaccinations, or a mother in Yemen no longer able to feed her family.

But here’s the bad news: In the world’s most fragile settings, COVID-19 is still only getting going. We are months away from the peak. If it’s not checked, the virus will be free to circle the globe, to undo decades of development and, I think, to create a generation’s worth of tragic and exportable problems. We expect the situation to deteriorate in a number of middle-income countries, including in Latin America and the Caribbean, where a number of countries that have traditionally not needed assistance from organizations like mine are now requesting help.

Populations that haven’t required government safety nets before now are also starting to need them just to survive. And we know from experience that the economic effects of the crisis and containment measures themselves also have the potential to drive unrest and instability. And I think the risk of civil conflict has increased significantly, especially in Africa. So in summary, without action we’ll see the worst recession since the Great Depression, the sharpest collapse in per capita income since 1870, the first increase in global poverty since 1990, and the first reduction in global life expectancy for a generation.

The good news is that the worst outcomes are preventable. Wealthy countries have rightly thrown out the rulebook to protect their people and economies. The OECD and G-20 countries invested $11 trillion in their stimulus packages, about 10 percent of global GDP. And my office has estimated that the cost of protecting the poorest 10 percent of the global population from the worst effects, which I just described, of the
pandemic, is just $90 billion. That’s less than 1 percent of the current stimulus package. The international financial institutions, like the World Bank and the IMF, can in fact finance a lot of that if their shareholders give them new rules for these exceptional circumstances. And CSIS, I know, has recognized the importance of the role of the IFIs in the commission’s report on strengthening America’s health security and I agree with what you said there.

But let me emphasize that business as usual is not going to cut it. We need a new approach to face this unprecedented global crisis. Against that background, my office just launched a third update of our Covid-19 global humanitarian response plan. It coordinates the action of the U.N. agencies and countless NGOs and it’s now targeting 250 million people in need of humanitarian assistance. That’s more than double the number we planned six months ago to target this year and that is what Covid-19 has done just so far.

The updated appeal seeks $10.3 billion. It’s the biggest single appeal we’ve ever made, in fact. And that’s to address the immediate humanitarian needs caused or exacerbated by Covid-19. And it’s mostly built around action in the affected countries, 63 countries where we’re working. It also includes, though, a couple of other things I want to mention. Firstly, a billion dollars for humanitarian air transport. Obviously, commercial airlines have more or less disappeared in the places where we work. And we needed to replace them with a World Food Program-run system of air transport, medical evacuation for aid workers, cargo shipments, and so on. And that service, which is mostly used by NGOs and faith-based organizations, we have to keep fully funded if we want any kind of operation to be sustained.

We’ve also put $500 million in for famine prevention, for reasons I have described. It is possible to avoid famine if we act quickly. And we put $300 million in unallocated supplemental funding for NGOs. The NGOs are essential actors in this response, but many of them have faced serious funding challenges and they’ve got real liquidity crises. So we’ve raised $1.8 billion so far, thanks to donor generosity, but obviously more is needed and that really brings me to the final point I’d like to make.

I’ve been doing this kind of work for many decades now, and I’ve seen repeatedly that when the world deals well with crises it’s because the U.S. plays a leadership role. When the U.S. leads, the rest of the world can be mobilized to follow. And we know that because we’ve seen it before. You all remember nearly 20 years ago now, President George W. Bush’s emergency plan for HIV/AIDS, which I think did more than anything to fight that disease, certainly saved millions of lives. After the financial crisis of 2008-9, we saw the U.S. taking on the role of global coordinator through the G-20.

We saw U.S. leadership on Ebola in 2014 in West Africa, with an interagency effort made by the U.S. to deal with that problem, which brought others in, crucially. The U.S. remains the largest source of humanitarian funding in the world, including through the multilateral humanitarian system. So I really want to thank members of Congress like Congressman Bera, like Congresswoman Brooks, for your efforts to include funding for humanitarian response in Covid-19 budgets. And I know how much work is going on on that topic at the moment.

What I would say to you finally is that while we can claim that Covid-19 took us by surprise, we will not be able to say the same about the humanitarian development and security crises that lie ahead. Without adequate funding and leadership, there is a very
serious risk that the benefits of decades of U.S. investment around the world will be rolled back on global health, poverty, education, and women's empowerment. It's much better, and cheaper, and more dignified to frontload the response to the pandemic. Acting now to mitigate the impact will save lives. It will also save money.

So, the scenarios I've talked about are real, but they don’t have to become reality. With the right leadership and money and fresh thinking, including from yourselves here today, we can fix this. So, thank you very much indeed. And I’m looking forward to the discussion.

Julie Gerberding: Mark, I don’t even know what to say. You know, I feel like I’m a person who has a very broad global outlook, and I pay attention, and I think about the same things in the outside world that I do when I worry about what’s going on here in the United States but you have painted a picture that’s so much more complete, and so much more horrifying in so many ways. I’m impressed that you can present an optimistic and hopeful outcome if we take action, but I’ll bet you that not very many people have really thought about some of the dimensions of this that you brought up.

I mean, first, just the impact of the virus per se on a global basis, and that so many countries are still in early days and haven’t even begun to deal with their surge or certainly their peak. That’s an important perspective for us to remember here. But then, the secondary consequences of that happening, particularly in the vulnerable countries, and the list of vulnerable countries is obviously going to get larger as this goes forward. So you know, I guess one of the questions I would ask you is: As you work with other nations, what helps makes this real for people at kind of the grassroots level? How can we broaden our understanding, and our public appreciation of what’s going on in the world, and the true impact of this pandemic?

Mark Lowcock: Well, I think people worry sometimes about whether there’s a deficit of compassion around the planet. And what I learn when I listen to people in countries where we try to raise money is actually there’s not a deficit of compassion. People, particularly in richer countries which have been through the pandemic, can see what it can do and they understand that for a little bit of money, actually, it’s possible to stave off the worst in countries further away and I think they want to do that. They want to see some action on that.

But I think the other thing that I have to say, it surprised me that policymakers haven’t been as quick to see with this crisis as with earlier crises is the risk of contagion of this crisis leading to multiple other problems, which won’t just start – won’t just stay where they start, which will be exported. We know that hunger breeds instability, which breeds refugee outflows, which breeds more instability. So I think the part of the incomplete agenda that we need to work on, and where again I do think I can’t see anyone other than the U.S. who can move the global dial on this, is to encourage the policymakers to think broadly ahead, because if we don’t do that what we’re going to find in six, or nine, or 12 months’ time is we have much worse problems and then we’ll wonder what we were doing now.

Julie Gerberding: Thank you for that. And let me bring Congressman Bera into this conversation. And thank you for joining us. It’s really great to see you. And as I said at the beginning, thank you for your contributions to all of our CSIS commission work. It’s really been fun to get to know you and to work with you and share your passion.
So Congressman, you know, when you think about your constituents, you know, back home, so to speak, how do you think you might monitor – what’s your sense of where they are in thinking about the ex-U.S. dimensions of this problem? And have you thought about how you might be able to broaden their own appreciation of why it is so important for us to engage globally?

Representative Ami Bera:

Yes. And certainly, first off, Dr. Gerberding it was an honor to serve on the commission with you, and the work that CSIS does. If only we had looked and taken the recommendations, and then been able to enact some of those recommendations we’d be in a better place. They still are very relevant today, and I would certainly make the case to my colleagues.

When I think about my constituents, certainly the folks that I represent back in Sacramento County, that on the issue of global health security, pandemic preparedness, and how we get through this, I also think about my constituents in the House of Representatives, who are my colleagues. And as many of you know, it’s been hard to get folks to focus on global health security and pandemic preparedness and adequate funding of these programs in years past. Well, now everyone’s paying attention to it and, you know, I think it is an opportunity. And I’ll put my physician hat on, as a doctor and public health expert to really work with the constituents in Congress, our colleagues, to really start thinking this through.

And I do sense at the beginning of this pandemic, and, you know, many of us who pay attention to this understood at the end of 2019, and certainly at the beginning of 2020 when Wuhan was starting to shut down, that this was different than SARS or MERS, and were certainly trying to sound an alarm. I don’t think reality really hit, you know, most of the members of Congress until March when things started shutting down, and people started to realize, you know, that this was difficult. So I do think in these early phases, you know, much as is human nature, my constituents back in Sacramento County are still very focused on their own lives – what’s happening in their lives. You know, will their kids be able to go to school in the fall?

You know, all the things Mark touched on to a lesser extent we see here in the United States: the food insecurity, the people that are lining up at food banks who never thought they would need any aid. You know, the real worry that we will see a homeless crisis because of the inability for folks to pay rent. And, you know, just these deep-seated insecurities. And I think folks in the initial phase were just hoping that, you know, give it six weeks, we’ll lock down.

You know, in Sacramento County we actually did really well. We shut down early. We closed our schools fairly early and we had the lowest case rate of the top 50 metropolitan areas in the country. I think we opened up too soon in May. You know, I think people thought the worst of this was behind us, and you started to see the case rates go up.

You know, we’re still doing OK, but this really isn’t the second phase, but kind of just continuance of the first phase of the pandemic. You’re starting to see eyes open up and people starting to realize that we might be in this for the long haul. And I think that phase of acceptance is necessary for the broader population to start thinking about, you know, where do we go from here?

You know, the Trump administration’s taken a different approach than I would take –
I’m trying to pick my words carefully – dealing with the pandemic here domestically in the United States. You know, historically most of us would have expected that the federal government would take the lead, and there’d be a strong federal response that then would, you know, help guide what was happening in the 50 states. Instead, the administration – the president’s taken the approach to let the governor’s lead.

You know, the reason why I bring that analogy up is because I think there’s a lesson that we can learn about what would happen in the world if we don’t come together as the world. Because in the wealthiest nation on the planet, we’re doing about the worst job possible managing this pandemic, when you look at the number of cases, when you look at the number of deaths. And I truly believe that’s because we didn’t take a federal response to this, and then assist the states, and move resources where they were necessary at the times that they were necessary.

If we just take that analogy and we think about the global response, because this is a global pandemic. It’s not one state or one country — it’s the entire world at the same time. If we don’t come together as a planet, and countries working together, better-resourced countries helping less-resourced countries, we will just do a repeat of what we’re seeing here in the United States but on a much greater scale: we will see more death, we will see more suffering, we will prolong the pandemic. It will take us longer to come out of this and the economic harm, the economic pain will be greater.

So, you know, I think we’re seeing that here in the United States, that the lack of a centralized federal response and leadership is making the pandemic worse for us and making the economic harm worse for us. Let’s not repeat that mistake at the global level.

Well, thank you for that. And I think you’re – you know, you’re kind of connecting the dots here. In a sense, we’re a microcosm of the world and the same challenges that people are facing day to day in thinking about their own parochial interests, they’re also waking up to the fact that there’s a much bigger picture here. And hopefully we can get them to take it to the next level and recognize the global view.

Congresswoman Brooks, thank you for joining us. I know you’ve been out voting and paying attention to the business at hand today. And thank you for your service on the commission. It’s just been such an honor to meet with you and interact with you. You’re one of my sheroes in the Congress. So it’s great to have you join us this afternoon.

Before you were able to return we were just kind of talking about how do you build the grassroots support for the important investments that we need to make in a broader global basis? And one of Mark’s points in his opening remarks was really to illustrate that we’re only beginning to experience the harm from the infection outbreak, per se, but then there is much greater harm related to things like food insecurity, children going to school without meals, the incredible refugee crisis that the economic downfall will have, and what that means in terms of social instability, increased conflict, and on, and on, and on. I mean, it’s almost a perfect storm that will have layers and layers of consequences.

We may not experience those in a direct way for a while, although ultimately of course we will. But I think Mark also made the point, and I hope he’s right, that there’s not a deficit of compassion. So I guess I will kind of ask you the same question I asked Congressman Bera. When you’re thinking about your constituents, you know, who are
understandably worried and focused in on what does this mean for them and their families now, how do you help people also see the bigger picture so that there’s some support for what needs to happen in terms of our global engagement?

Representative Susan Brooks: Well, and thank you, Julie. Thank you so much for your leadership of the commission. It was really an honor to be a part of that. And as I’ve said whether you’ve testified – you’ve been very busy testifying at the Senate and did a wonderful job in the house. Was that just yesterday? For several hours you and the other large pharmaceutical company representatives, who are, you know, working at unprecedented speed to – and in what appears to many of us an unprecedented collaboration to find an effective and safe vaccine. And I want to thank you and all of those who testified yesterday.

I do think – and I really want to agree with my colleague and good friend Dr. Ami – I always love when it’s a doctor – Dr. Ami Bera, for talking with those who are listening about the challenges that we have explaining to our constituents, but also to our colleagues, about the importance of paying attention to what is happening globally when we do have these massive problems here at home that have – that people – the food insecurity that we’re talking about is at home as well. I was on a call earlier today with a special education leader in one of my school systems, and how our schools are going to either try to reopen or what they’re trying to do in the safest way possible. And the huge desire that our teachers have to, you know, have that strong relationship with their students, which so often does not happen online, like we are having this discussion online.

So I think the focus is still nationally, and it’s on our country, and on our neighborhoods, and on our states. And everyone is really tuned into their own even states numbers, not even necessarily the next state’s numbers. We’re all paying attention to our own community’s numbers. And that is because we realize because people have, as we call it, hunkered down Hoosiers, as people have restricted their travel and have really tried to stay home more, I think we are now much more focused on our own neighborhood, our own community, our own state, not necessarily even the country.

And so – and obviously, different states are experiencing it very, very differently. And our colleagues and our former colleague, Governor Noem in South Dakota, they have not had any mandates and they have incredibly few cases, but they have very few people. And yet, in my state today our governor just issued a mask mandate throughout the state and is a Republican governor who joined that effort as we are seeing our numbers go back up. I would say it is very difficult to get our constituents to think about what is happening in Africa, or even in Europe, or even in Canada. It’s just a very difficult proposition right now.

And I think to the extent that the medical professionals – and I think you might have said it yesterday in your testimony – our medical professionals are who people want to hear from. It’s who people believe and trust now. And so they are the ones, more so than, I think, political leaders, are going to have to make that case as to why it is important. We saw it with Ebola, how it can travel to this country. People don’t realize that once we begin opening up, either with international travel, how that will all happen. And, as you said so eloquently, if it’s happening to any one of us it can happen to all of us.

That is not something that everybody really understands and appreciates. And so, I think we have a very tough road ahead of us to make that pitch, particularly right now.
Julie Gerberding:

There may be some lessons to be learned from looking back, as Congressman Bera said, at the AIDS pandemic, because when PEPFAR was created – and I was there when the president announced it – it was, I think, and I’m speaking just my own observation here not on any inside track, but I think part of the president’s motivation was truly compassion, that he truly saw the suffering and understood what was going on in the countries that were the hardest hit by HIV infection. And yet, even while that story was unfolding and people were becoming aware of it, we had a very big crisis in the United States. We also had people suffering and experiencing tragic discrimination and lack of therapy to help them. And yet, somehow we were able to get over that gap, and understand that we could do both. That we could tend to our own challenges, but we could also be generous as a nation and help support the crisis in other parts of the world.

And I don’t know how that happened. I was at CDC at the time and I experienced it sort of from the public health lens, but there might be some lessons there. And I don’t know, I could even bring Steve into this, if you’re willing to chime in, Steve, because I know you experienced some of that. Do you have any, you know, kind of advice to help us reconcile the need to take care of business at home versus also be aware of what we can do broadly?

J. Stephen Morrison:

Thank you. Well, I think that what Mark Lowcock, the picture that he painted of a very fast-moving and multidimensional set of interlocking crises, we had something very similar happen with the in 1999 and 2000, when the National Intelligence Council did the estimate of what this raging pandemic was likely – where it was heading, and what the consequences were going to be.

So when you have, I think, and Mark can comment on this, when you have something of such force and gravity impending, and it’s credible, and people begin to understand it around the recession, around famine, around extreme poverty, around drops of life expectancy, around developmental and health gains being wiped out, that opens a door for an argument, like we saw from President Bush, which was when he went to the State of the Union Address in January 28th of 2003, he said to the American public: This is both an ethical challenge to us, and it’s a national interest security challenge and we can lead with others in addressing it.

And that argument was able to muster bipartisan support, partly also because it was accompanied by a concrete plan. It brought forward a leadership at the highest levels, appealing to America’s normative values and its own self-interest together; but it was matched with a compassion, and also a belief in the ability to shape the outcomes, when people had been saying this is too big to be fixed, it doesn’t matter to us, what can we do that can make a difference.

Representative Ami Bera:

Steve, if I could perhaps just add to that. You know, what you saw was remarkable, a Democratic Congress coming together with a Republican president to do some remarkable investments. And you know, the silver lining that I see right now is while from the outside Congress may look pretty dysfunctional, we came together pretty quickly to pass multiple bills that are large and, you know, understanding the importance of the domestic response. And as we’re kind of moving forward, I think there is a recognition within Congress, House and Senate, of the importance of staying engaged on the global level.
And the example I would say is that when we talk to Senator Graham, when we talk to Senator Risch, and others on groups like CEPI, Gavi, you know, I think Congress gets that we’ve got to be at the table here, and that U.S. global leadership is certainly necessary. The president may be looking at it differently, but I think, you know, in a bipartisan way you’ve seen Congress, you know, really trying to step up. And, you know, the hope would be in this next Covid package, and certainly in the appropriations process, that we do indeed have the global health funding, and that we do pay our fair share.

Julie Gerberding:

Thank you, Dr. Bera. And, Mark, when you’re hearing this, you know, kind of the central challenge here: People want to do the right thing, but we’ve got to build the bipartisan support for that and make a strong argument for investing in both. What have you learned from your engagements in other countries, where similar conversations no doubt have occurred?

Mark Lowcock:

Well, if I could just add one point to what Steve said, because I mentioned the HIV/AIDS experience and he gave a great summary of how things got moving here. I saw that from a different perspective, and I saw two other things, which I think are important now as well. Firstly, I saw the way leadership from here mobilized everybody else. And the second thing I saw was, it worked. You know, that was a crisis which I remember I was spending 10 hours a day on at the time. And none of us knew how we would come out of it. And collective action got us out of it and made the whole world a much better place than it would have been otherwise, and it made us all safer.

Now, in terms of the rest of the world, I think what Congresswoman Brooks and Congressman Bera have described in terms of the conversations locally, that’s exactly the conversation that I hear whenever I talk to parliaments, as I’ve done quite a bit over the last six weeks across Europe and in other parts of the world. And I have to say, I think it’s completely right that parliaments in the better-off countries are focusing 99 percent of their effort responding to exactly what Congressman Bera and Congresswoman Brooks have said about the folks you represent, who you’re accountable to. I think that’s absolutely right. I guess I think there’s also a piece that’s about the leadership role in seeing further ahead, in seeing the things we’ll be dealing with next year if we don’t do the 1 percent on the wider world as well.

Julie Gerberding:

Thank you for that. So I guess I’m kind of curious, we never really know exactly what goes on in the black box of Congress, and how parties come together when there’s a bigger issue that requires the bipartisan energy and support. Are you willing to share a sense of how much progress we’ve made in being able to have a conversation about investing internationally? I know that might not be a place that’s comfortable right now, but I’m trying to get a sense is there hope? Is there hope that we might be able to do something to be a more globalistic country in responding to this?

Representative Ami Bera:

Yeah. So, if I’d start, I was talking to Congresswoman Lowey, who chairs the Appropriations Committee, but also chairs the committee that does do foreign aid and assistance. And I’d say the bill that they came out with is a really good bill that does actually fund Mark’s effort, does fund GAVI, and has a recognition that the United States does have to be part of this. And then in side conversations with the Senate, I think there’s a recognition, you know, Senator Graham historically has been pretty supportive of the foreign aid, and development assistance, and global health security.
I would hope we get this done. I would hope that’s it’s prioritized because Mark rightfully said, you know, until we defeat the virus globally, we’ve not defeated the virus here at home. And, you know, pre-pandemic, you know, you already had fragile states, you already had 70-plus million people that were displaced, you already had rampant food insecurity, and those are national security issues. And I think many of us get that sense. I don’t think it’ll ever be enough, from the perspective that I see, but I think there’s a recognition in Congress that, you know, this is a global challenge.

Julie Gerberding: Congresswoman Brooks, I have to tell you that I’m from South Dakota. And so I’m well aware of the relative low number of people who’ve been diagnosed with Covid in the state. And I’m also well aware of how spaced out people are in the state – I mean, physically spaced out. So if you think of the three Cs – confinement, containment, and contact, you know, the crowding South Dakota is not the epitome of that environment. But having said that, I think it does illustrate, you know, how much local circumstances really shape people’s understanding of what’s going on, and their willingness to participate in broader issues. Because, again, everything at the end of the day is local.

The question I wanted to ask you is you’re such a good spokesperson, and you are such a persuasive speaker. If you were able to go on national television and try to make a case for thinking globally and acting locally at the same time, like, what would you pitch be? How would you help encourage people to see the broader picture?

Representative Susan Brooks: And thank you for the question, and for the kind words. But I have to say, what you worked on and what Mark worked on, and Steve, with respect to PEPFAR, and the significant impact that made on HIV is an incredible reminder to people that what we did then made an impact going forward. And it helped us stem a massive Ebola outbreak, which was so terrifying, and that that type of investment – we should repeat that type of investment, enhance that type of investment, because the world is even much more connected now in 2020 than it was in 2003.

And the amount of international travel that happens just on a regular basis I think – and the speed in which we know that these horrible diseases can travel, I think is something that we ought to be reminding people. And that what can happen on one continent can be in this country within 24 hours. And I’ve certainly learned that from you all, from the experts, but I don’t think most people think about it that way. And I don’t think an average citizen, or even many of my colleagues, really think about the connectedness, in large part because of the economy. Our economy is so connected, and the travel that happens right now is so connected.

And I also think we ought to be thinking – we ought to also be talking about all of our men and women in the military who are protecting us and who are stationed all across the globe. We send our young men and women into dangerous places to protect us, or not so dangerous places, but places to protect us. And so they are – we are sending our American families to protect our national security and other parts of the globe. We want them to be safe wherever they are.

Those are just a couple of ideas as to ways we should continue – and, of course, we have compassion for people around the globe. Of course we do and we need to show and demonstrate. But I think right now, while the country is suffering so much itself, finding those ways to make those connections and why it’s in their own self-interest to invest in global health, I think can really help make a difference. But I think, of course, want to make that pitch.
And they are calling the next votes and so Ami and I probably need to go. But thank you so very much. I’m sorry I missed Mark’s remarks. I will learn more. Thank you for all of your work. And of course, we need to try to find a way. Hope the appropriators and everyone can come together. But I’m afraid from what I’ve seen, the appropriations process is kind of falling in pretty partisan buckets right now. I’d love to see it move in a different way. I’m hoping the COVID package comes together in a significant bipartisan way.

Julie Gerberding: So, thank you for your leadership and for your time with us. And I understand that you both may have to go and do that part of your job. So thank you for your comments and for everything you’re doing to support America through this crisis, but also to help us think more broadly about the rest of the world, so thank you.


Julie Gerberding: So, Mark, we’ve got a few minutes left. If you don’t mind, I’d like to just come back to you. You’ve now heard from really two really important members of our Congress. And, you know, I think you’re hearing you’ve made a good case, and they understand and agree with the importance of the international engagement. Where will you go from here? What’s next?

Mark Lowcock: Well, I mean, firstly, I’m having exactly this conversation with many other countries. So as you – some of you may know, the European Union in the last 36 hours agreed the whole of their budget for the next seven years. And there are very important international envelopes in that budget. And of course, they’re having exactly same discussion that legislators here in the U.S. are having, thinking about their constituents, but also trying to keep an eye on the wider world. So I’m having a very energetic, engaged discussion with all of them. And then, you know, there are countries like Canada, Japan, the U.K., Norway, who want to play a role as well.

I keep coming back to it, I guess Julie, but this question of who can coordinate and mobilize everybody I do think is an important question. So we will keep posing that issue in the hope that, you know, the leaderships in the right places are able to take that up, because a coordinated response, as you alluded to in your opening remarks and Steve has touched on, is always the best response.

Julie Gerberding: Yeah. And I think there’s the concept of moral leadership. Yes, it’s hard for individual people to see why an investment would be made somewhere else when they feel like they’re suffering so much at home, but we’ve proven that Americans are willing to do that, and we’ve done it time and time again when engaged and when leaders really inspire and mobilize that kind of support. Those are not mutually exclusive efforts. In some sense, it’s enlightened self-interest, right? Because if we don’t do what needs to be done, as you very eloquently pointed out in your remarks, the price we pay for that is going to be amplified far beyond what we’re experiencing with the health impact of this virus.

So let me just close with a thank you. You really opened my eyes today. And I’m sure many of the people who are participating in this conversation have been similarly awakened to really getting a much broader picture of the global outlook and what it means in some of the most vulnerable environments for the most vulnerable people, but
also, broadly speaking, what it means to the global economy, the global security, and the security of all of us. So you’re doing heroic work. We thank you for the time that you’ve spent with us and we certainly want to support you in any way that we can. So thank you, Mark. Thank you very much.

And, Steve, thank you for CSIS and for your colleagues who are always on the button to create these opportunities to share information and to provoke a broader understanding of our policy issues and how we might act together to try to accomplish the greater good. So thank you all. Much appreciated.

J. Stephen Morrison: Thank you, Julie.

Julie Gerberding: Thank you.

J. Stephen Morrison: Thank you, Mark.

Mark Lowcock: Thank you.