

# Extend and Reinforce American Leadership of the Multilateral Response to HIV/AIDS, Tuberculosis, and Malaria

*Anil Soni*

## Summary

The administration of President George W. Bush has shown unprecedented support for the global fight against AIDS, tuberculosis, and malaria. The effectiveness of this support can be improved by extending United States leadership of the multilateral response.

### President Bush should:

- ▶ *Support an appropriation of at least \$1.1 billion for the Global Fund to Fight AIDS, Tuberculosis, and Malaria for fiscal year 2006 (FY06).*
- ▶ *Ensure adequate support in the FY06 appropriation for multilateral organizations providing technical assistance to developing countries to fight the three diseases.*
- ▶ *Task the Office of the Global AIDS Coordinator with aligning bilateral policies for drug procurement with international standards, rather than FDA-based requirements.*
- ▶ *Beginning immediately, exclude from new free-trade agreements any “TRIPS-plus” provisions that restrict full access to generic medicines needed to fight the three diseases.*

## Background

In wealthy countries, infectious diseases and other easily preventable illnesses cause only 6 percent of all death and disability. In developing countries, where about 85 percent of the world’s people live, these diseases and illnesses account for 44 percent of all death and disability.

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AIDS, tuberculosis (TB), and malaria highlight the inequities of disease burden and access to care. These three diseases killed six million people in 2004 alone. Half of these deaths were due to TB and malaria. The grim statistics on HIV/AIDS make it clear why in June 2003 then Secretary of State Colin Powell called this disease “more destructive than any army, any conflict, any weapon of mass destruction.” Forty million people are living with HIV/AIDS around the world. In Africa today, only 8 percent of the more than four million people who need AIDS treatment to survive are receiving it. In Swaziland, two in five adults are infected. But these numbers pale in comparison to projections of the toll the disease will exact in the next five years. New HIV infections will number 45 million, and AIDS is expected to orphan 25 million more children.

And yet AIDS, TB, and malaria can be prevented and treated, and TB and malaria are wholly curable. The science and tools exist to fight back effectively and affordably—to save lives, to stimulate development, and to reinforce global security.

Adequate funding is critical to this response. According to the World Health Organization (WHO) and UNAIDS, a total of \$25 billion is needed from all sources in 2007 to effectively finance a comprehensive international response to the three diseases. This is a fivefold increase from the \$5 billion made available in 2003. Improving the global response will require combining adequate funding with accountable leadership, technical assistance, and research and development. A greater challenge, not addressed here, is to strengthen the health care systems necessary to deliver services. Africa, for example, must double its number of skilled health care workers by 2010, even as increased mortality and severe “brain drain” bleed the vast continent’s countries of physicians and nurses.

### **The Bush Administration’s First Term**

President George W. Bush has shown unprecedented leadership in the global fight against AIDS, TB, and malaria. In 2001, President Bush made the founding pledge to create the Global Fund to Fight AIDS, Tuberculosis, and Malaria, which has been chaired for the last two years by Health and Human Services Secretary Tommy Thompson. The United States remains the largest donor to the Global Fund and was instrumental in its early development. As a result, the Global Fund is independent of the United Nations; its funds are based on technical review and results; it relies upon partnerships with the private sector; it gives half of its money to nongovernmental organizations; and it is transparent about its grants and performance.

The administration extended funding for the global fight with an historic commitment of \$15 billion over five years, made by President Bush in his 2003 State of the Union address. The Office of the Global AIDS

Coordinator oversees all funding and the management of a bilateral program focused on the 15 countries hardest hit by the pandemic, mobilizing the resources of U.S. agencies to mount an emergency, hands-on response. The bilateral program has worked with multilateral organizations to agree on common frameworks for monitoring and evaluation of grants and for local management of programs. Its policies also allow recipients to use generic medicines to fight AIDS, though this is conditional, for bilateral grants, upon international manufacturers receiving regulatory approval by the Food and Drug Administration (FDA).

A third hallmark of the administration's leadership was its proposal for an international consortium to coordinate vaccine research and development, the Global HIV Vaccine Enterprise. Launched at the 2004 G8 summit in Sea Island, Georgia, this global partnership will help to increase and coordinate the use of resources for vaccine research.

## Toward Better Policies to Extend American Leadership

Despite these clear strides forward, the administration's leadership of the multilateral response to AIDS, tuberculosis, and malaria is the subject of some criticism. The administration has argued rightly that the American taxpayers' money should be used responsibly. Greater investment should match proven results. Medicines should be safe and effective. Research and development by the pharmaceutical industry should be promoted. The Bush administration can improve its leadership of the global fight against these diseases in ways that are consistent with these standards.

**The Global Fund** — The administration can do more to support the Global Fund financially. In 2005, the Global Fund's need is roughly \$2.3 billion. Yet the administration requested only \$200 million for FY05. By contrast, Congress has specified previously that the Global Fund could receive up to \$1 billion (one-third of the \$3 billion authorized for FY04), so long as donations by the United States do not exceed 33 percent of total contributions. Over the past three years, Congress has increased final allocations to the Global Fund beyond the \$200 million requested by the administration: \$323 million paid in FY03, \$459 million paid in FY04, and up to \$435 million available for FY05.

In FY06, the Global Fund needs \$2.4 billion simply to renew existing grants that are performing well and \$1 billion for a fifth round of proposals already underway. An additional round of grants in 2006 may require an additional \$1 billion. A 33 percent U.S. share of even the minimum confirmed need totals \$1.1 billion, and this should be reflected in the FY06 appropriation, consistent with a 1:2 ratio to the pledges of other donors for 2006.

The Global Fund's track record of performance justifies greater support. After an average of 12 months of grant implementation, Global Fund recipients have treated 385,000 people for tuberculosis, reached 300,000 more with third-generation malaria treatment, and distributed almost 1.4 million insecticide-treated bed nets. Global Fund grants and U.S. bilateral programs in the 15 focus countries together ensured that 240,000 people living with HIV received access to AIDS treatment in 2004. Greater impact will accompany steady grant progress, with an additional \$1 billion expected to be disbursed in 2004. Also, U.S. contributions have successfully leveraged other donors. Through 2004, every \$1 from the United States has been matched by more than \$2 from others.

Greater investment in the Global Fund would additionally enhance the American commitment to fight TB and malaria. U.S. bilateral funding to fight TB and malaria has remained modest, and the administration's FY06 budget request seeks no more than was appropriated in FY02. By contrast, 44 percent of the Global Fund's current grant volume (\$3 billion across 127 countries) is for TB and malaria programs. By giving more to the Global Fund, the administration can significantly increase overall U.S. funding of the fight against TB and malaria.

**Technical assistance** — The recent expansion of grant funding for AIDS, TB, and malaria programs has not yet been matched with adequate international support for the technical assistance necessary to make the best use of these resources at the country level. Global Fund recipients rely on technical support from bilateral and UN agencies to enable grant implementation. The administration provides substantial technical assistance through its bilateral programs and should provide adequate funding to UN agencies to do the same.

For example, the WHO's funding shortfall in 2004 of \$40 million undercut some of the support needed to achieve the target of placing three million people on AIDS treatment by the end of 2005. The WHO is one of 10 agency cosponsors of UNAIDS, which collectively enable a multisector response to the pandemic. Support for countries' fight against TB and malaria draws on the efforts of the Stop TB and Roll Back Malaria partnerships. The former includes the Global Drug Facility (GDF) and the Green Light Committee (GLC), which facilitate the procurement of high-quality and affordable drugs to treat TB and multi-drug resistant TB (MDR-TB). Countries rely on Roll Back Malaria to update malaria treatment protocols, to expand the use of long-lasting bed nets, and to encourage the proper use of insecticides to counter the spread of infectious mosquitoes. In the FY06 appropriation, the administration should support an appropriate share of the resource requirements facing these multilateral partners. WHO, Stop TB, and Roll Back Malaria, for example, face a combined need of roughly \$400 million in 2006, and the United States should do its part to meet this need with other donors.

**Drug Procurement** — The President’s Emergency Plan for AIDS Relief (PEPFAR) relies on FDA approval rather than the WHO’s system to pre-qualify medicines to fight AIDS, TB, and malaria as a requisite for bilateral grants. The Government Accountability Office (GAO) has concluded that as a consequence bilateral recipients must rely on a more limited set of antiretrovirals, which are generally higher in price than the medicines available through other initiatives, such as the Global Fund. The lack of consistency in policy guidelines is also one reason that all U.S. field staffers interviewed by the GAO cited coordination challenges as the chief impediment to implementation of the bilateral program. The administration should align its policies for bilateral grants with international standards.

The WHO’s prequalification system is intended to facilitate drug procurement and link it to clear and simplified treatment protocols. Accordingly, a developing country is guided to a first-line AIDS treatment regimen consisting of only two pills per day at a cost of as little as 40 cents. The efficacy of products prequalified by the WHO has been proven by the clinical response of hundreds of thousands of patients using them, as reported consistently in peer-reviewed scientific journals. The WHO standard has been endorsed by other donors and the Global Fund. Moreover, included among the manufacturers of the roughly 50 products prequalified so far are several patent-holders, signaling their endorsement of both the standard and the use of generics to fight AIDS, tuberculosis, and malaria in resource-poor settings.

In January 2005, the FDA approved the first generic formulation for use in U.S. bilateral programs. While this is a welcome development, the process should still be aligned with the WHO standard. Maintaining a parallel standard risks increased costs and inefficiency as bilateral programs look to the FDA for approval of international generic formulations for medicines necessary to treat opportunistic and sexually transmitted infections, and to fight TB and malaria.

**Trade Policy** — Generic competition and pricing concessions by manufacturers that hold pharmaceutical patents are credited for lowering the annual cost of antiretroviral therapy from \$15,000 to \$150 in just five years. Patent and other intellectual property rules determine when generic competition can commence and ensure that pricing and sales of originator products are not undermined in high-income countries.

In 1995, the World Trade Organization (WTO) concluded an Agreement on Trade-related Aspects of Intellectual Property Rights (TRIPS), which sets out minimum standards for intellectual property protection that all WTO members must meet. In 2001, WTO members unanimously adopted the groundbreaking “Doha Declaration,” which reaffirmed some of the key flexibilities in the TRIPS Agreement, including compulsory licensing and parallel importation. Many countries have started to make use of TRIPS

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flexibilities to promote access to affordable medicines, including generics.

Critics, however, argue that the Bush administration has undermined the ability of countries to implement the Doha Declaration, principally by attempting to restrict the scope of diseases covered by the Declaration and by negotiating regional and bilateral free-trade agreements containing “TRIPS-plus” intellectual property provisions that go beyond those required in TRIPS.

U.S. trade policy should enable developing countries to import generics to fight these diseases. Other donors share the administration’s concern that generics not encroach upon the markets of patent holders. The European Commission has passed legislation that can minimize this risk (see Council Regulation (EC) No 953/2003 of 26 May 2003). No data exists to suggest that sufficient volumes of these products are being diverted to undermine pharmaceutical markets, despite the availability of generics for more than five years.

### **President Bush should:**

- ▶ *Support an appropriation of at least \$1.1 billion for the Global Fund for fiscal year 2006.* The United States should meet one-third of the Global Fund’s minimum need for the renewal of existing grants in 2006 and the cost of one new round of grants. The administration should also signal to international donors that the United States is committed to providing 33 percent of the Global Fund’s income so long as the Global Fund can match this amount 2-for-1 by contributions from other donors and continues to meet specific performance targets.
- ▶ *Ensure adequate support in the FY06 appropriation for multilateral organizations providing technical assistance to developing countries to fight the three diseases.* The United States should meet a fair share of the resource requirements facing the WHO, UNAIDS, Roll Back Malaria, and the Stop TB partnership. Compared with the programmatic financial needs facing PEPFAR and the Global Fund, these requirements are modest, and they represent a critical, complementary investment in technical assistance that will enable and accelerate the use of both bilateral and multilateral grant proceeds at the country level.
- ▶ *Task the Office of the Global AIDS Coordinator with aligning bilateral policies for drug procurement with international standards, rather than FDA-based requirements.* If necessary, alignment with the international WHO prequalification standard should be accomplished by strengthening the WHO process to ensure its full compliance with FDA standards of safety and efficacy, so the United States can rely on this standard in lieu of the

current FDA-based requirements. Alignment with this common standard will make drug procurement and distribution more cost-effective and will reinforce the normative role that can and must be played by the WHO in the global response to these diseases.

- ▶ *Beginning immediately, exclude from new free-trade agreements “TRIPS-plus” provisions that restrict full access to generic medicines needed to fight the three diseases.* New free-trade agreements should not include provisions that extend patent terms beyond 20 years, allow for second-use patents, provide five years or more of exclusive protection over pharmaceutical test data, link marketing approval of drugs with patents status, or limit compulsory licensing. The administration should also amend any TRIPS-plus agreements already signed or ratified and instruct the United States Trade Representative and its contractors to provide unbiased technical assistance to help developing countries employ the flexibilities of TRIPS.

## Conclusion

American leadership of the global fight against AIDS, TB, and malaria is already laudable in its magnitude and scope. The administration should continue to support bilateral programs to fight these and other diseases as well as research and development to pioneer new therapeutics and preventative technologies. In addition, the administration should seize the opportunity to extend and reinforce its leadership of the multilateral response to these three diseases.

# Reassert U.S. Leadership on Women's Health and Human Rights

*Adrienne Germain*

## Summary

There is a broad global consensus that improving the health and human rights of women is a critical priority. Improving women's health will mean more than enhancing the lives of individuals. Effective new women's health initiatives will make a significant contribution to alleviating poverty, promoting global economic progress, and ensuring international stability.

In its second term, the Bush administration has an opportunity to play a leadership role in accelerating global cooperation on women's health and human rights, especially in slowing the advance of HIV/AIDS.

## President Bush should:

- ▶ *Galvanize global support for the UNAIDS "ABC-Plus" approach to combating the HIV/AIDS pandemic and support the work of the Global Coalition on Women and AIDS.*
- ▶ *Order the State Department to form a bipartisan, expert team to review the controversy surrounding the United Nations Population Fund (UNFPA) with the aim of restoring United States funding for UNFPA.*
- ▶ *Sign the World Leaders Statement in Support of the International Conference on Population and Development (ICPD) and fully fund the United States' financial commitments established at the ICPD for fiscal 2006.*
- ▶ *Provide \$10 million to support the UN Development Fund for Women (UNIFEM), the Trust Fund in Support of Actions to Eliminate Violence Against Women, and the World Health Organization's multicountry study on violence against women.*

*Adrienne Germain is president of the International Women's Health Coalition.*

- ▶ *Reaffirm the commitment of the United States to women's health and human rights at key international conferences scheduled for 2005.*

## Background

Over the past four decades, investments aimed at improving health worldwide have been highly successful, particularly with regard to health issues involving women and children. Globally, life expectancy has increased by 50 percent and infant mortality has declined, though the HIV/AIDS epidemic has reversed positive trends in the most-affected countries in sub-Saharan Africa. Delivery of reproductive health services has contributed to the positive global trend. Over a 30-year period, contraceptive use has increased worldwide from 10 percent of couples to 60 percent. The average number of children born to women in developing countries has declined from six to three. These gains have resulted, in part, from persistent efforts by the United States, which has developed bilateral and multilateral assistance programs, and from effective implementation of global policy agreements.

In 2004, the world marked the 10th anniversary of the bedrock global agreement for women's health and human rights: the Programme of Action from the 1994 International Conference on Population and Development (ICPD) in Cairo. The ICPD agreement was adopted by 179 nations, and the United States played a leadership role. The ICPD's "rights-based" reproductive-health approach fundamentally revised existing international population policies and redirected resource flows. Instead of focusing primarily on delivery of contraceptive services, the Programme of Action takes a broader view, focusing on health, human rights, equality in education, economic opportunity, and social participation for women.

Unfortunately, the HIV/AIDS pandemic has become increasingly "feminized" and is threatening to reverse some of the improvements posted in women's health over the past 40 years. In 1997, women accounted for 41 percent of the people living with HIV/AIDS; today, about half of the 40 million people living with HIV/AIDS are women. Half of all new infections occur among young adults (ages 15 to 24). Further, 75 percent of young people living with HIV/AIDS in the heavily affected countries of sub-Saharan Africa are female. In sub-Saharan Africa, 60 percent of people living with HIV/AIDS are women, and in many countries the prevalence among girls is 4-7 times higher than among boys. In addition, women face the anguish of mother-to-child transmission of the virus.

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Violence against women is a health issue of epidemic proportions, one that the Bush administration has identified as an important priority. Approximately one in every three of the world’s women will suffer some kind of violence in her lifetime, including rape, beating, and trafficking into domestic or sexual servitude, or harmful practices such as female genital cutting and acid burning. Violence also increases maternal and child mortality. The World Bank estimates that violence against women kills and harms as many women of reproductive age as cancer and exacts a greater toll on women than traffic accidents and malaria combined. The UN Development Fund for Women (UNIFEM) is in a unique position to support regional and multinational responses to the problem of violence against women. In addition, UNIFEM has the ability to speak directly with governments and with local communities and grassroots women’s organizations.

### **The Bush Administration’s First Term**

The Bush administration has been active in efforts that affect women’s health and human rights, including initiatives related to the HIV/AIDS pandemic, UNFPA funding, the ICPD, and key international policy dialogues.

**The President’s Emergency Plan for AIDS Relief (PEPFAR):** In 2003, the administration proposed and won congressional approval of a five-year, \$15-billion plan to help alleviate the impact of HIV/AIDS. This plan focuses on 15 key countries in Africa and the Caribbean as well as Vietnam. PEPFAR devotes substantial resources to HIV/AIDS treatment and includes funding for prevention efforts, one-third of which are earmarked for abstinence-until-marriage programs. In addition, the U.S. government supports HIV/AIDS efforts in many other countries through bilateral programs, particularly USAID, and through various multilateral agencies.

**Withholding Funding from UNFPA:** After initially funding, supporting, and requesting help from UNFPA in Afghanistan, the Bush administration abruptly cut off UNFPA funding in July 2002. The administration decided that UNFPA’s operations in China are violating the Kemp-Kasten amendment, which has, since 1985, prohibited funding for organizations that “support or participate in the management of a program of coerced abortion or involuntary sterilization.” The administration’s decision was contrary to the recommendations of its own expert panel, which went to China to investigate UNFPA activities. This expert panel concluded that UNFPA does not “support or participate in the management of” coercive Chinese practices. Nevertheless, during fiscal years 2002, 2003, and 2004, the administration withheld contributions to UNFPA totalling \$93 million, which represent more than 10 percent of the agency’s budget.

Controversy over UNFPA has divided the Congress and distanced the United States from the rest of the world for many of the past 20 years. Opponents of UNFPA funding argue that the agency undermines human rights in China. Proponents argue that UNFPA is the primary voice in China advocating for voluntary family planning and against coercive practices. Both sides agree that China's approach violates international standards of human rights. But the current United States policy has not only failed to make a positive impact upon the situation in China; it has produced a negative impact elsewhere in the world. Specifically, the cutoff in United States funding has reduced the delivery of UNFPA services to impoverished people in the 140 other countries where the agency operates.

**ICPD Implementation:** During a series of intergovernmental meetings in 2004, the United States urged other governments to adopt language that would have weakened the ICPD Programme of Action. The United States cited concerns that the Programme of Action could be construed as an endorsement of abortion. In the end, the United States' proposals were not accepted, and the United States joined the consensus in reaffirming the ICPD in the UN General Assembly on October 14, 2004.

The administration, however, refused to sign the World Leaders Statement in Support of the ICPD, which reaffirms the agreed international framework for women's health and rights. More than 100 heads of state as well as Nobel laureates and distinguished leaders from business, religion, science, and development signed the statement.

The Bush administration said it had refused to sign the statement because it was concerned that the statement's reference to the concept of sexual rights had not been defined internationally and went beyond the ICPD agreement. The concept of sexual rights, however, has been sufficiently defined in the ICPD's Programme of Action and, more specifically, at the Fourth World Conference on Women in 1995. The centerpiece of sexual rights is the right of an individual to consent in sexual relations, that is, the right of every individual not to be forced into sexual activity. The World Leaders Statement, therefore, is a reaffirmation of an international agreement the administration has said it supports.

Programs for advancing key aspects of the ICPD Programme of Action are funded through USAID's Global Health Division. Adjusted for inflation, funding for population and family-planning programs was stagnant over most of the Bush administration's first term. Similarly, maternal health funding remained constant over the administration's first-term, and child-survival funding increased only slightly.

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—PETER PIOT

UNAIDS EXECUTIVE DIRECTOR

## Toward a Better Policy on Women’s Health

There are several reasons why adjustments to United States policies can have a greater positive impact on women’s health and human rights worldwide.

First, experts in the reproductive-health, human-rights, and HIV/AIDS-prevention fields are realizing that halting the spread of HIV/AIDS to women and girls will require an approach that is broader than the epidemiological approaches attempted so far. Conventional epidemiological approaches, such as blood-safety programs and work with drug users, sex workers, and other core group transmitters, do not protect the vast majority of women and girls. For example, faithfully married women are vulnerable to philandering husbands, violence, and sexual coercion.

In his World AIDS Day message on December 1, 2004, UNAIDS Executive Director Peter Piot said that “prevention methods such as the ‘ABC’ approach—Abstinence, Be faithful, and use Condoms—are good but not enough to protect women where gender inequality is pervasive. We must ensure that women can choose marriage, decide when and with whom to have sex, and successfully negotiate condom use.”

Second, it is clear that the controversy in the United States over the UNFPA’s operations in China is a surmountable obstacle and that overcoming it will pay significant dividends in the 140 other countries where the UNFPA operates.

Third, experts agree that implementation of the ICPD would address many of the key socio-economic, political, and health factors that place women at risk of HIV infection. The comprehensive ICPD approach includes numerous priorities that the Bush administration has embraced. These priorities are political and economic. They focus on improving educational opportunities for women and girls, upholding universally recognized human rights, providing essential health services, and protecting the health of mothers and newborns. Moreover, the ICPD agenda will advance implementation of the Millennium Development Goals, which will be reviewed at a UN Summit in September 2005. By fulfilling its fiscal 2006 funding commitments established at the ICPD, the United States will demonstrate its support for improving the availability and quality of reproductive health care, reducing maternal mortality and morbidity, preventing feminization of the HIV/AIDS epidemic, closing the gender gap in basic and secondary education, and advancing women’s economic and social rights.

Fourth, three useful UN initiatives aimed at addressing violence against women on a global basis can have a significant impact on this crucial problem:

- ▶ UNIFEM provides financial support and technical assistance to innovative programs to secure women's basic human rights and gender equality throughout more than 100 countries. UNIFEM has led efforts to protect women's rights and expand their opportunities across the UN system.
- ▶ The Trust Fund in Support of Actions to Eliminate Violence Against Women was created by the UN General Assembly in 1996 to address violence against women. It is the only multilateral, grant-making mechanism that supports local, national, and regional efforts to combat violence against women.
- ▶ The WHO has undertaken a unique multicountry study on violence against women that not only is greatly expanding the database, but also has created valid and reliable research methodologies. The multicountry study at the WHO can be expanded to include other countries and to examine various forms of intervention, including their costs and efficacy.

Fifth, the Millennium Development Goals (MDGs) themselves offer a critical opportunity to advance the cause of women's rights. In September 2005, the UN General Assembly Summit will review progress toward achievement of the MDGs, which include fundamentally the same goals as the ICPD agreement, as well as those of the 1995 Fourth World Conference on Women in Beijing. At the ten-year review of the Beijing agreement in March, over 100 governments unanimously adopted a political declaration which emphasized that "the full and effective implementation of the Beijing Declaration and Platform for Action is essential to achieving" the MDGs.

### **President Bush should:**

- ▶ *Galvanize global support for the UNAIDS "ABC-Plus" approach to combating the HIV/AIDS pandemic and support the work of the Global Coalition on Women and AIDS.* The administration should mobilize international support for a global effort to redefine the global HIV/AIDS policy paradigm in order to reduce feminization of the epidemic, sex discrimination in access to health services, and violations of HIV-positive women's reproductive rights. As a first step, the administration should announce its support for the "ABC-Plus" approach articulated by UNAIDS and for the recommendations of the Global Coalition on Women and AIDS. The administration should provide additional financial support for the work of the Coalition. In its bilateral and multilateral assistance programs, the administration should work to develop approaches that effectively protect and serve women and girls outside core group transmitters.

- ▶ *Order the State Department to form a bipartisan, expert team to review the controversy surrounding the United Nations Population Fund (UNFPA) with the aim of restoring U.S. funding for UNFPA.* The review effort should seek to establish a policy that will achieve bipartisan support in the United States Congress as well as support internationally for concrete strategies to reduce coercive family planning practices in China and enable United States participation in UNFPA. The State Department should articulate specific steps that the administration will pursue, together with the international community, to reduce the incidence of coercive practices by the Chinese government in the arena of reproductive health and rights.
- ▶ *Sign the World Leaders Statement in Support of the International Conference on Population and Development and fully fund the U.S. commitments established at the ICPD for fiscal 2006.* Building on its reaffirmation of ICPD last October, the administration can send a signal to the international community by signing the World Leaders Statement in Support of the ICPD, which reaffirms the agreed international framework for women's health and rights. Likewise, the president should agree to fund the United States' share of resource commitments to the ICPD as his proposed budget moves forward.
- ▶ *Provide \$10 million to support UNIFEM, the Trust Fund in Support of Actions to Eliminate Violence Against Women, and the World Health Organization's multicountry study on violence against women.* The United States should commit at least an additional \$10 million to support these multilateral initiatives, distributed appropriately across the three. The United States currently provides only \$1 million to UNIFEM and contributes nothing to the Trust Fund.
- ▶ *Reaffirm the commitment of the United States to women's health and human rights at key international meetings scheduled for 2005.* Improving women's health and human rights—including a zero-tolerance policy for violence against women and support for equal economic and social opportunities for women—should be central components of the United States' efforts at these meetings. Leadership from the United States can make a major contribution to forward progress on saving women's lives, protecting families, and strengthening nations.

# 10 Meet the Challenge of Climate Change with U.S.-EU Cooperation

*Philip Clapp*

## Summary

Climate change is an issue of the highest priority for the future well-being of the United States, its European allies, and the world. The science of climate change has convincingly shown that man's ever-increasing emissions of heat-trapping gases are raising atmospheric temperatures and that these rising temperatures can have potentially devastating consequences.

Despite frequent and consistent warnings from the scientific community, in 2001, the Bush administration chose to withdraw the United States from the cornerstone of the international effort to curb emissions-induced climate change: the Kyoto Protocol. This withdrawal placed a strain upon the Atlantic alliance. The EU responded by mounting an extraordinary effort to save the Kyoto Protocol, making even EU support for Russia's accession to the World Trade Organization contingent upon Moscow's ratification of the Protocol. As a result of Russia's ratification on November 4, 2004, the Kyoto Protocol took effect across most of the world on February 16, 2005, and will remain in force until 2012. Efforts in the EU countries to galvanize action on climate change have not ceased. President Bush's closest foreign ally, Prime Minister Tony Blair of Great Britain, has designated climate change as one of two priority agenda items for his presidency of this July's G8 Summit and for Britain's upcoming EU presidency.

President Bush's second-term actions on climate change will be a high-profile test of whether he is serious about dealing with the devastating potential of atmospheric warming and about addressing the rift in the Atlantic alliance over what to do about the problem.

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### **President Bush should:**

- ▶ *Announce that the United States will join negotiations scheduled to begin in November 2005 on a successor agreement to the Kyoto Protocol.*
- ▶ *Propose that a new climate-change treaty be completed by 2007 and use this year's G8 Summit to seek agreement on a timetable for this new treaty.*
- ▶ *Urge Congress to pass the Climate Stewardship Act (S.139), proposed by Senators John McCain (R-AZ) and Joseph Lieberman (D-CT), before the November UNFCCC negotiations.*

### **Background**

Twice in the past 15 years the international community has negotiated agreements to curb the greenhouse-gas emissions that are driving changes in the world's climate.

The first of these agreements was the United Nations Framework Convention on Climate Change (UNFCCC), which the United States ratified in October 1992 only after the Convention's binding emissions-reduction requirements were eliminated at the insistence of President George H.W. Bush. After pressing for a further revision of the UNFCCC, the Clinton administration agreed to the Kyoto Protocol in 1997. Under the Protocol, 36 industrialized nations agreed to binding emissions reductions averaging 5.2 percent below 1990 levels. The industrialized nations' reductions were to have been achieved by 2008-2012; developing nations were to join in emissions reductions at later dates.

As a concession to the United States, the EU agreed that reductions could be achieved by taking advantage of market forces through a global permit-trading system rather than solely by a mandated regime of policies and measures for all industrialized countries. This permit-trading system was designed to allow the developed countries to receive credit toward their emissions-reduction targets both by achieving direct emissions reduction at home and by making lower-cost investments in emissions-reduction projects in other developing countries. Thus, for example, a United States utility company might finance a wind energy project in a developing country, avoiding the construction of new carbon-emitting power plant there, rather than making costlier emissions reductions at its own U.S. facilities.

### **The Bush Administration's First Term**

When President George W. Bush took office in 2001, the Kyoto Protocol's overall framework had already been set, but a large number of major issues had yet to be negotiated. In March 2001, the president abruptly

announced that his administration would not participate in talks to complete the Protocol and would discourage Japan and Russia from participating. The Bush administration's attempts to thwart completion of the Kyoto Protocol ultimately failed, and the other UNFCCC parties achieved a final agreement at a special session in July 2001. Only four of the 36 industrialized nations that were party to the UNFCCC have not ratified the Kyoto Protocol; they are the United States, Australia, Lichtenstein, and Monaco. Russia's ratification in November 2004 satisfied the legal requirements to bring the treaty into force.

The Kyoto Protocol had two primary goals: to establish a worldwide system for reducing greenhouse-gas emissions and to achieve some actual, though modest, reductions. Without United States participation, the Kyoto Protocol will be far less effective than it could have been in achieving the projected reductions. This is because, with only 6 percent of the world's population, the United States accounts for 25 percent of world greenhouse-gas emissions, and its total emissions continue to grow.

### **Toward a Better Climate-Change Policy**

President Bush sought to justify his withdrawal from the Kyoto Protocol by arguing that the science of climate change was too uncertain to justify mandatory emissions reductions and that the Protocol would put the United States at an economic disadvantage because the agreement did not subject major developing countries like China and India to binding emissions reductions.

Now, at the beginning of 2005, the president has good reasons to revise his position.

First, new scientific studies—some of them requested by the Bush administration—have only added to the mountain of compelling evidence that human-induced atmospheric warming is already having serious effects. The Arctic Climate Impact Assessment, released November 9, 2004, is the most-recent example. Commissioned in 2000 by the United States and seven other nations with territory in the Arctic, the study found that human-induced warming is severely affecting the far north and has expanded the melting zone of Greenland's two-mile-high ice sheet by 16 percent since 1979. This study projects that, by 2070, the Arctic ice cap will melt almost completely during the summer. Both phenomena will have serious impacts worldwide, and the shrinking of Greenland's ice sheet will raise sea levels and thereby endanger heavily populated coastal communities.

Second, the president can now move beyond the Kyoto Protocol to shape an agreement he regards as more equitable and effective. This is because the United States, the European countries, and international

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environmental NGOs all know that it is no longer feasible for the United States to achieve the Kyoto Protocol's 2008–2012 emissions-reduction targets. This opens the door for the president to engage in the development of a new framework.

Third, there are now growing constituencies—even within the president's own party—for action. The Republican-controlled House of Representatives (2002) and the Senate (2002 and 2003) have both passed resolutions calling upon the president to return to the international negotiating table on climate change. Business support for action has also grown substantially. Utilities companies accounting for nearly 40 percent of the nation's generating capacity now support domestic legislation to cap carbon emissions. Finally, there is growing support among major religious groups for action. The United States Conference of Catholic Bishops has called for the United States to participate in a binding international agreement on climate change and for domestic emissions reductions. The National Association of Evangelicals has also called on the president to implement mandatory emissions reductions.

### **President Bush should:**

- ▶ *Announce that the United States will join the negotiations scheduled to begin in November 2005 on a successor agreement to the Kyoto Protocol. The Kyoto Protocol expires in 2012. The parties to the UNFCCC will begin negotiations in November on a successor agreement that will set emissions-reduction targets to be achieved between 2012 and 2016. The upcoming negotiations provide the president with an opportunity to develop a position on reasonable emissions-reduction targets for the United States and appropriate participation by China, India, and other developing nations. The Bush administration is not alone in its desire to address the latter issue; EU environmental ministers have already indicated their intention to begin discussing this crucial problem with key developing countries. A shift in the United States posture on climate change would improve the president's negotiating position with European leaders as he seeks greater cooperation on Iraq, Iran, the Israeli-Palestinian conflict, and a host of other international issues.*
- ▶ *Propose that a new climate-change treaty be completed by 2007 and use this year's G8 Summit to seek agreement on a timetable for this new treaty. The summit's president and host, Prime Minister Blair, has made climate change one of two principal agenda issues. President Bush will find himself sitting across the table from seven other leaders whose nations have ratified the Kyoto Protocol. If the president shows up with no major policy proposals, his differences with the rest of the world will be magnified, not minimized. He should propose that the G8 leaders set a goal for completing a new climate-change agreement in 2007 and jointly present that timetable as a proposal to the 11th*

Conference of the Parties to the UNFCCC, the first negotiating session on a new climate-change treaty, which is scheduled to take place in November 2005.

- ▶ *Urge Congress to pass the Climate Stewardship Act (S.139), proposed by Senators John McCain (R-AZ) and Joseph Lieberman (D-CT), before the November UNFCCC negotiations.* Clearly, one of the president's principal objectives in negotiating a new international climate-change agreement will be to gain the participation of major developing nations like China and India. Any progress with developing countries is likely to remain beyond reach, however, unless the United States demonstrates a good faith effort to reduce its own greenhouse-gas emissions. Having walked away from the Kyoto Protocol, the United States must show developing nations that it is serious about reducing emissions at home before it demands reductions from them.

The president should call for enactment of the McCain-Lieberman bill, which is a modest first step that sets a target of reducing emissions in the United States to 2000 levels by 2010. This target would leave emissions in the United States nearly 20 percent above the level called for in the Kyoto Protocol; but it would halt further growth in U.S. emissions and establish a domestic cap-and-trade permit system similar to the one coming into use internationally. The bill applies only to major emitters in the manufacturing, utility, and transportation fuels sectors, which account for more than 60 percent of U.S. emissions, and imposes no reduction requirements on agriculture or small businesses.

The McCain-Lieberman bill already commands substantial congressional—and Republican—support. In its first Senate vote in October 2003, the bill won the backing of 43 senators, including Richard Lugar (R-IN), chairman of the Foreign Relations Committee, and seven other Republicans. More than 140 members of the House, among them 19 Republicans, have cosponsored legislation calling for mandatory domestic carbon emissions limits. Support from the president would make passage of the legislation achievable in 2005, before the start of a new round of international climate-change negotiations.

## Conclusion

During President Bush's second term, his administration will face challenges that can only be met successfully with international cooperation. By returning to the international negotiating table on climate change and by supporting a modest first step toward reducing domestic emissions, the Bush administration would go a long way toward signaling that it is seeking to renew cooperative relationships and repair critical alliances.

“The United States must show that it is serious about reducing emissions at home before it demands reductions from developing nations.”