



日本国際交流センター

JAPAN CENTER FOR INTERNATIONAL EXCHANGE

Global Health Diet Roundtable

“Evolution of America’s Bipartisan Support for Global Health”

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TOKYO, JAPAN

IN JCIE’S INAUGURAL Global Health Diet Roundtable, Ambassador Mark Dybul drew on his experiences heading the Global Fund to Fight AIDS, Tuberculosis, and Malaria and helping launch President George W. Bush’s President’s Emergency Plan for AIDS Relief (PEPFAR) to explain how American leaders have managed to sustain bipartisan support for global health even while domestic partisan differences have bled into

the debate over so many other major global issues. The meeting convened six rising leaders in the Japanese Diet who are serving their first, second, or third terms, and it was organized as part of a roundtable series that is designed to engage up-and-coming legislators in discussions of global health and give them a chance to discuss key issues with domestic and international leaders in the field.



Convening the first Global Health Diet Roundtable



Amb. Mark Dybul explains why the US Congress values the Global Fund

GUEST SPEAKER

Mark Dybul Co-Director, Center for Global Health and Quality, Georgetown University Medical Center

PARTICIPANTS

Takao Ando	Member, House of Representatives (Liberal Democratic Party – LDP)
Mitsuko Ishii	Member, House of Councillors (Japan Innovation Party)
Hanako Jimi	Member, House of Councillors (LDP)
Karen Makishima	Member, House of Representatives (LDP)
Hiroaki Tabata	Parliamentary Secretary for Health, Labour and Welfare; Member, House of Representatives (LDP)
Toshiko Takeya	Member, House of Councillors (Komeito)

The Diet members, who represent a range of political parties, took part in a lively back-and-forth with Dybul, quizzing him on how US legislators manage to convince their constituents that it is important to invest in global health when there are limited resources and so many competing domestic priorities. Dybul explained that even Congressional members tend to find that their constituents are motivated by a desire to contribute to humanitarian responses when they see people suffering. In addition, they feel that the United States should be projecting global leadership and they are also motivated by the argument that improving health conditions in poor countries nurtures economic growth that indirectly benefits them in the long run. In fact, when it is explained to them that the portion of the US budget that actually goes to development assistance is quite small, they tend to feel that their country should invest more in improving global health.

He noted that the United States was not a strong player in the global health field prior to the 2000s, but from 2001 it rapidly began to scale up funding for global health, making it one of the largest segments in the American development portfolio. This was possible because of four factors: (1) a worldwide shift from a paternalistic Cold War thinking about development to a prioritization of country ownership, (2) a new emphasis on results-based accountability, (3) a growing focus on good governance so that leaders could be confident that development assistance is being used effectively, and (4) greater involvement by nongovernmental actors, including the faith-based sector and the private sector, in supporting global health funding.

About the Speaker

Dr. Mark Dybul is the faculty co-director of the Center for Global Health and Quality and professor in the Department of Medicine at Georgetown University Medical Center. A prominent global health expert and humanitarian, Dr. Dybul served as executive director of the Global Fund to Fight AIDS, Tuberculosis and Malaria from 2013 to 2017. Prior to that, from 2006 to 2009, he served under President George W. Bush as US Global AIDS Coordinator, leading the US President's Emergency Plan for AIDS Relief (PEPFAR), a health initiative he helped create.

Even with these favorable trends, Dybul argued, the real key to ensuring that global health became a major development priority was, initially, strong presidential leadership and, over the long run, the fact that rank-and-file Congressional members embraced a sense of ownership over global health. This strong base of political support from both sides of the aisle in the US Congress has been essential in ensuring that global health remains a steady priority even as presidents and Congressional leaders rotate through office.



Rep. Karen Makishima, Rep. Hiroaki Tabata, and Sen. Toshiko Takeya



First-term Senator Hanako Jimi listens attentively