107TH CONGRESS 2D SESSION

S. 2045

To amend the Foreign Assistance Act of 1961 to take steps to control the growing international problem of tuberculosis.

IN THE SENATE OF THE UNITED STATES

March 21, 2002

Mrs. Boxer (for herself and Mr. Smith of Oregon) introduced the following bill; which was read twice and referred to the Committee on Foreign Relations

A BILL

To amend the Foreign Assistance Act of 1961 to take steps to control the growing international problem of tuberculosis.

- 1 Be it enacted by the Senate and House of Representa-
- 2 tives of the United States of America in Congress assembled,
- 3 SECTION 1. SHORT TITLE.
- 4 This Act may be cited as the "International Tuber-
- 5 culosis Control Act of 2002".
- 6 SEC. 2. FINDINGS.
- 7 Congress finds that:
- 8 (1) Tuberculosis is a great health and economic
- 9 burden to impoverished nations and a health and se-

- 1 curity threat to the United States and other indus-2 trialized countries.
 - (2) Tuberculosis kills 2,000,000 people each year (a person every 15 seconds) and is second only to HIV/AIDS as the greatest infectious killer of adults worldwide.
 - (3) Tuberculosis is today the leading killer of women of reproductive age and of people who are HIV-positive.
 - (4) One-third of the world's population is currently infected with the tuberculosis bacterium, including 10,000,000 through 15,000,000 persons in the United States, and someone in the world is newly infected with tuberculosis every second.
 - (5) With 46 percent of tuberculosis cases in the United States in the year 2000 found in foreign-born persons, as compared to 24 percent in 1990, it is clear that the only way to control tuberculosis in the United States is to control it worldwide.
 - (6) Left untreated, a person with active tuberculosis can infect an average of 10 through 15 people in one year.
 - (7) Pakistan and Afghanistan are among the 22 countries identified by the World Health Organi-

- zation as having the highest tuberculosis burdenglobally.
 - (8) More than one-quarter of all adult deaths in Pakistan are due to tuberculosis, and Afghan refugees entering Pakistan have very high rates of tuberculosis, with refugee camps, in particular, being areas where tuberculosis runs rampant.
 - (9) The tuberculosis and AIDS epidemics are inextricably linked. Tuberculosis is the first manifestation of AIDS in more than 50 percent of cases in developing countries and is responsible for 40 percent or more of deaths of people with AIDS worldwide.
 - (10) An effective, low-cost cure exists for tuberculosis: Directly Observed Treatment Short-course or DOTS. Expansion of DOTS is an urgent global priority.
 - (11) DOTS is one of the most cost-effective health interventions available today. A full course of DOTS drugs costs as little as US\$10 in low-income countries.
 - (12) Proper DOTS treatment is imperative to prevent the development of dangerous multidrug resistant tuberculosis (MDR–TB) that arises through improper or incomplete tuberculosis treatment.

- 1 (13) The Global Fund to fight AIDS, Tuber2 culosis, and Malaria is an important new global
 3 partnership established to combat these 3 infectious
 4 diseases that together kill 6,000,000 people a year.
 5 Expansion of effective tuberculosis treatment pro6 grams should constitute a major component of Glob7 al Fund investment.
- 8 SEC. 3. DEFINITIONS.
- 9 In this Act:

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- 10 (1) DOTS.—The term "DOTS" or "Directly 11 Observed Treatment Short-course" means the World 12 Health Organization-recommended strategy for 13 treating standard tuberculosis.
 - (2) GLOBAL ALLIANCE FOR TUBERCULOSIS DRUG DEVELOPMENT.—The term "Global Alliance for Tuberculosis Drug Development" means the public-private partnership that brings together leaders in health, science, philanthropy, and private industry to devise new approaches to tuberculosis and to ensure that new medications are available and affordable in high tuberculosis burden countries and other affected countries.
 - (3) GLOBAL PLAN TO STOP TUBERCULOSIS.—
 The term "Global Plan to Stop Tuberculosis" means
 the plan developed jointly by the Stop Tuberculosis

- Partnership Secretariat and Partners in Health that lays out what needs to be done to control and eliminate tuberculosis.
- 4 (4) GLOBAL TUBERCULOSIS DRUG FACILITY.—
 5 The term "Global Tuberculosis Drug Facility
 6 (GDF)" means the new initiative of the Stop Tuber7 culosis Partnership to increase access to high-quality
 8 tuberculosis drugs to facilitate DOTS expansion.
- 9 (5) Stop Tuberculosis Partnership.—The 10 term "Stop Tuberculosis Partnership" means the 11 partnership of the World Health Organization, do-12 nors including the United States, high tuberculosis 13 burden countries, multilateral agencies, and non-14 governmental and technical agencies committed to 15 short- and long-term measures required to control 16 and eventually eliminate tuberculosis as a public 17 health problem in the world.

18 SEC. 4. ASSISTANCE FOR TUBERCULOSIS PREVENTION, 19 TREATMENT, CONTROL, AND ELIMINATION.

- 20 Section 104(c) of the Foreign Assistance Act of 1961
- 21 (22 U.S.C. 2151b(c)) is amended by adding at the end
- 22 the following:
- 23 "(7)(A) Congress recognizes the growing inter-
- 24 national problem of tuberculosis and the impact its
- continued existence has on those countries that had

previously largely controlled the disease. Congress further recognizes that the means exist to control and treat tuberculosis by implementing the Global Plan to Stop Tuberculosis and by adequately investing in newly created mechanisms, including the Global Tuberculosis Drug Facility, and that it is therefore a major objective of the foreign assistance program to control the disease. To this end, Congress expects the agency primarily responsible for administering this part—

- "(i) to coordinate with the World Health Organization, the Centers for Disease Control, the National Institutes of Health, and other organizations with respect to the development and implementation of a comprehensive tuberculosis control program; and
- "(ii) to set as a goal the detection of at least 70 percent of the cases of infectious tuberculosis, and the cure of at least 85 percent of the cases detected, by December 31, 2005, in those countries classified by the World Health Organization as among the highest tuberculosis burden, and by December 31, 2010, in all countries in which the agency has established development programs.

1	"(B)(i) There is authorized to be appropriated
2	\$200,000,000 for each of the fiscal years 2003
3	through 2005 for carrying out this paragraph.
4	"(ii) Funds appropriated under this paragraph
5	are authorized to remain available until expended.
6	"(C) In carrying out subparagraph (A), not less
7	than 75 percent of the amount authorized to be ap-
8	propriated under subparagraph (B) shall be ex-
9	pended for antituberculosis drugs, supplies, patient
10	services, and training in diagnosis and care, in order
11	to increase directly observed treatment shortcourse
12	(DOTS) coverage, including funding for the Global
13	Tuberculosis Drug Facility.
14	"(D) In carrying out subparagraph (A), of the
15	amount authorized to be appropriated under sub-
16	paragraph (B)—
17	"(i) not less than 10 percent shall be used
18	for funding of the Global Tuberculosis Drug
19	Facility;
20	"(ii) not less than 7.5 percent shall be
21	used for funding of the Stop Tuberculosis Part-
22	nership; and
23	"(iii) not less than 2.5 percent shall be
24	used for funding of the Global Alliance for Tu-
25	berculosis Drug Development.

1 "(E) The President shall submit a report to
2 Congress annually specifying the increases in the
3 number of people treated and the increases in num4 ber of tuberculosis patients cured through each pro5 gram, project, or activity receiving United States
6 foreign assistance for tuberculosis control pur7 poses.".

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