

AMERICA'S GLOBAL LEADERSHIP  
DURING COVID-19**HON. THEODORE E. DEUTCH**

OF FLORIDA

IN THE HOUSE OF REPRESENTATIVES

*Tuesday, April 28, 2020*

Mr. DEUTCH. Madam Speaker, our best efforts to fight this virus at home cannot succeed if we are not also fighting it abroad.

The United States has led the world out of every major modern crisis, and that leadership now is critical to our ability to successfully rebound from the economic impact of COVID-19. We will not be able to fully restore economic stability in our country until the spread of the virus is under control globally.

In Congress, it's our imperative to act quickly for the American people. That certainly means protecting our courageous first responders, strengthening our health systems at home, and taking steps to safeguard American jobs and livelihoods. But it also means doing our part to eliminate threats before they reach our borders.

Right now, the majority of the world, especially developing nations, lack the resources to prevent or respond to a public health crisis like COVID-19. They suffer from weak health as well as large percentages of displaced and refugee populations, where social distancing is near impossible.

According to the CDC, 70 percent of the world is underprepared for a public health emergency. Robust U.S. funding for global health programs can help combat the continued spread of COVID-19. The United States must restore cuts to humanitarian funds, particularly in areas like water, sanitation, and hygiene, and increase funding for international organizations doing emergency response work.

The United States has the scientific and technical expertise to assist others with their pandemic responses. The CDC is experienced in helping other countries meet international health standards for global health security. We must lead the international community in the global public health response, while also asserting leadership to coordinate a global economic recovery.

If we do not recognize that challenges abroad are linked to challenges at home, we will not be able to fully overcome the impact of this virus. If we leave the world vulnerable to coronavirus, we leave our own country vulnerable as well.

AMERICA'S GLOBAL LEADERSHIP  
DURING COVID-19**HON. STEVE CHABOT**

OF OHIO

IN THE HOUSE OF REPRESENTATIVES

*Tuesday, April 28, 2020*

Mr. CHABOT. Madam Speaker, I want to thank Congressman BERA and Congressman YOHIO, two of my colleagues on the House Foreign Affairs Committee, for hosting this virtual special order today on the importance of strong U.S. global leadership with regard to the coronavirus.

The coronavirus is reminding us that diseases and their impacts know no borders, making it critical that the United States show

leadership during the pandemic, and also afterwards to get the global economy back on track as well as prepare for the next outbreak. There is no reason to assume there will not be future outbreaks, and, as the world becomes more interconnected, we need to be prepared so that the next outbreak does not become a pandemic like the coronavirus.

This is where the Global Health Security Act, legislation that my friend GERRY CONNOLLY and I authored, can make an impact. And I want to thank him for his leadership in moving this legislation forward.

The Global Health Security Act would help the Federal Government prepare for the next pandemic both by codifying critical aspects of the interagency coordination process for global health security and also put the Congressional stamp of approval on the Global Health Security Agenda (GHSa).

The GHSa is an oddly-named multilateral initiative which seeks to strengthen health systems around the world. It focuses on public health issues of top international concern such as biosafety and biosecurity, immunization, health monitoring, zoonotic diseases, and healthcare worker training. Many of these priority areas are critical to fighting not only the coronavirus but also any infectious disease that emerges after we have contained the current outbreak.

The Obama Administration helped set up the GHSa in the face of sluggish implementation of international guidelines for health systems around the world and poor international leadership in response to the Ebola crisis in West Africa in 2014. The Trump Administration has enthusiastically carried on U.S. leadership through the GHSa, pledging substantial U.S. funding toward its implementation. The GHSa is something which both parties can be proud of.

Americans are rightly skeptical of the efficacy of multilateral organizations. Since an illness is one short plane ride away, however, investments in disease detection and public health capacity in other countries directly support our own health security right here in America. If we don't address and prepare for diseases abroad, we will have to address them at home.

That is why I am proud that the Global Health Security Act passed the Foreign Affairs Committee in February with unanimous support. By passing this legislation Congress will demonstrate a strong commitment to global health security leadership.

For better or worse, the United States does not have a choice on whether we step up and lead on the coronavirus and future pandemics. As we have seen, the Chinese Communist Party (CCP) has covered up, and still is covering up, critical information about the early stages of the disease and its origins. This allowed the virus to become a global pandemic. In China, everyone's health and wellbeing are subservient to the political goals of the CCP. We must ensure that the CCP does not take global health leadership. If it does, it will not just be the people of China whose health is subject to the political calculus of an authoritarian political system, it will be all people around the world, including here in America.

AMERICA'S GLOBAL LEADERSHIP  
DURING COVID-19**HON. GILBERT RAY CISNEROS, JR.**

OF CALIFORNIA

IN THE HOUSE OF REPRESENTATIVES

*Tuesday, April 28, 2020*

Mr. CISNEROS. Madam Speaker, for the better part of the last century, U.S. leadership has been essential to addressing critical global challenges. From rebuilding Europe after World War II to building an international coalition to respond to the Ebola Outbreak, the United States is unique in the world in its ability to build international coalitions and marshal resources and support around the world. The COVID-19 pandemic is a global crisis that necessarily requires a global response in order to solve it—and the United States must take up the leadership role it has fulfilled for decades to facilitate the response.

COVID-19 knows no borders—quickly spreading across the world in a matter of months, accelerated by our inter-connected world. As such, while we should extend every effort to arrest the spread in the United States, stopping the spread in the United States alone is not enough. If we are to truly be able to reopen our economy and engage in global trade and participate in the global supply chain, we risk greater exposure and transmission of the virus if it continues to spread unchecked around the world.

Fortunately, the United States possesses not only the requisite knowledge and expertise in its public health and medical officials, but also decades of experience in global health efforts necessary to lead a coordinated global response. The United States has done this before. Through the State Department, U.S. Agency for International Development, and the Centers for Disease Control and Prevention, the United States has led efforts to combat the spread of HIV, malaria, Ebola, and other infectious diseases. Doing so not only made the epicenters of those outbreaks safer, but it also made the United States and American citizens safer. As a result, we contributed to an environment that enabled the American and global economies to thrive. Today, amid the worst global pandemic in at least a century, the United States must step back into the leadership role it has held for decades and work with the international community to chart a pathway to defeat COVID-19.

We must commit the resources necessary across our global health, humanitarian, and economic toolkits to defeat the coronavirus. According to the CDC, 70 percent of the world remains underprepared to prevent, detect, and respond to a public health emergency. That means we must ensure our diplomats and development professionals on the frontlines receive the support they need to maintain operations, provide for emergency preparedness needs, and protect Americans. After committing trillions to relief at home and more than \$2 billion in emergency funding to support the global COVID-19 response, it is understandable that some may be reticent to spend more on the international effort. However, as the data suggests that an outbreak in a remote village can spread to major cities on all six continents in less than 36 hours, that funding is an investment in a safer and more prosperous America.

I thank the Frontline healthcare workers, first responders, military servicemembers, and

other essential personnel who are keeping our society going during an unprecedented crisis at home—and I thank the diplomats and development professionals around the world that are working to keep us safe. We must now honor their dedication and sacrifice by committing the resources to them that they will need to stop the spread of this virus and re-create an environment that will enable our communities to thrive.

AMERICA'S GLOBAL LEADERSHIP  
DURING COVID-19

**HON. ABIGAIL DAVIS SPANBERGER**

OF VIRGINIA

IN THE HOUSE OF REPRESENTATIVES

*Tuesday, April 28, 2020*

Ms. SPANBERGER. Madam Speaker, as the world faces the unprecedented challenges posed by the COVID-19 pandemic, U.S. leadership in the global response is essential. Thank you to my colleague from California, Congressman BERA, and my colleague from Florida, Congressman YOHO, for leading a Congressional special order so that Members who represent communities across America can reiterate this point clearly.

I serve on the Asia Subcommittee of the House Foreign Affairs Committee, which Representatives BERA and YOHO lead as Chairman and Ranking Member. Our Subcommittee held our first hearing on the coronavirus outbreak in China in early February and our second one later that month. What we heard during these hearings from public health experts and administration officials reaffirmed something we already knew: The United States needed to demonstrate leadership in the international response in order to keep Americans safe.

Since these hearings, this horrible disease has ravaged families and communities in the United States and around the world, including in Central Virginia. The death toll, as well as the impact on our way of life, has been heart-breaking. Every day, I speak with Central Virginians who are experiencing this pain. As we do everything we can to halt the spread and impact of the virus in our local communities and across our nation, we must also recognize that U.S. leadership in the global fight against coronavirus is an essential part of ending the suffering at home.

The COVID-19 pandemic has demonstrated that infectious diseases know no borders. An outbreak in a remote village can spread to major cities across all populated continents on earth in less than 36 hours. Even once we have more thorough testing and U.S. towns begin to see dropping numbers of cases, the disease could easily return. No matter how successful we are in fighting the threat of COVID-19 at home, we will not end the suffering and fear created by the virus unless we also combat it around the world.

This is exactly why global health experts, as well as foreign policy and military leaders, are speaking out—calling on U.S. government officials to lead by example and demonstrate leadership on the global stage. If our nation cedes international leadership, we are demoting our international standing, creating a void that our adversaries will fill and exploit, and most critically, we are risking the safety and livelihoods of Americans.

In addition, the pandemic is an incredibly painful reminder that, at the end of the day, U.S. national security comes down to resilience at home. As we face international threats, including infectious disease, we are only as strong and prepared as our most vulnerable neighbors and our most susceptible systems. The coronavirus pandemic highlights that national security is much more than what typically comes to mind—it includes our medical supply chains, the safety of American workers, and so much more. It includes emerging, transnational threats such as climate change and the COVID-19 virus—a disease that at any moment now is expected to cause a death toll surpassing the number of Americans who died in nearly a decade of fighting in Vietnam. Going forward, we must be prepared for the full range of risks to American security. And to do this, we must think of national security in a more comprehensive and integrated fashion, recognizing it is rooted in our strength at home and that the United States must lead on the global stage to provide the sense of security that so many Americans lack as they face disease and job loss.

As we strengthen and implement our response to the COVID-19 pandemic and prepare for future threats, we must recognize that U.S. global leadership is essential to protecting the health, security, and economic interests of all Americans. We cannot step back from this challenge; we must step up.

AMERICA'S GLOBAL LEADERSHIP  
DURING COVID-19

**HON. TED S. YOHO**

OF FLORIDA

IN THE HOUSE OF REPRESENTATIVES

*Tuesday, April 28, 2020*

Mr. YOHO. Madam Speaker, the United States, along with the rest of the world, currently finds itself in the midst of a global emergency of epic proportions. Never in the modern era has every nation on Earth been brought to their knees so quickly by a pandemic that threatens our security, our economy, and the social fabric of our lives.

The United States, and the rest of the world, were woefully unprepared for the arrival of COVID-19. Our underestimation of infectious diseases goes back multiple administrations, when we had ample opportunity to secure our essential supply chains, ensure stockpiles of PPE, and dedicate the necessary resources to research and study emerging diseases.

If there is one bright side of our current crisis, it is that our nation will never again take for granted our health security. President George W. Bush and industry leaders like Bill Gates forewarned us that our country would need to take proactive measures to prepare for the next pandemic. We clearly failed in heeding their warnings. COVID-19 will not be the last health crisis we face, and we must use the lessons we have learned to aggressively build up our capacity to prevent future pandemics.

As a veterinarian, it's no secret that I have been vocal on the threat of zoonotic diseases and the dangers of animal to human transmission. Just recently, I introduced the Advancing Emergency Preparedness Through One Health Act of 2019, which would improve public health preparedness by helping federal

agencies implement a "One Health" approach, recognizing that the health of people is linked to the health of animals and the environment. Multiple studies by the CDC have found that 6 out of 10 infectious diseases were seen in animals before humans, including the virus we face now. Coordination between government agencies is essential in addressing and eliminating zoonotic outbreaks, which is why the One Health model would improve synchronization between veterinarians and doctors by requiring the Department of Homeland Security and United States Department of Agriculture to work together.

Historically, the United States has applied its health expertise to the global stage as well, in the form of direct support and contributions to multilateral health organizations. The U.S. has historically been one of the largest donors to organizations like the Global Alliance for Vaccines and Immunization (GAVI), which utilizes market forces and private sector partnerships to drive down medical costs and develop and deliver new and underused vaccines to developing nations. Similarly, the President's Emergency Plan for AIDS Relief (PEPFAR), established by President George W. Bush in 2003, has saved millions worldwide by providing essential resources for prevention, treatment, and vaccine research. It is through smart investments like these that the United States demonstrates leadership on global health security.

But we can, and must, do more. As we have seen, our current efforts were not enough to stop the spread of coronavirus from infecting millions and killing hundreds of thousands. We must prepare for the next pandemic by partnering with initiatives like the Coalition for Epidemic Preparedness Innovations (CEPI), an alliance aimed at coordinating the development of new vaccines to prevent and contain new infectious disease epidemics. CEPI works directly with industry, universities, and private research and development organizations to leverage a dedicated approach to advancing vaccine research. Currently, CEPI has reoriented its entire organizational structure to address COVID-19 and is advancing eight vaccine candidates at a rapid pace.

However, despite multiple multimillion-dollar contributions from Norway, Germany, Japan, the United Kingdom and the Gates Foundation, the United States has yet to donate a cent. CEPI represents the next frontier in health security preparedness, and the United States must take the initiative if we are to continue leading international efforts on health security.

If we abdicate our place as a leader in global health, there is another country eager to take the reins. China has not been subtle in asserting itself on global health issues, and often not for the benefit of other nations. China's recent coronavirus debacle should be evidence enough that their communist regime cannot be trusted to lead with accountability, transparency, or pragmatism, traits that are essential when fighting widespread disease.

As for how China would fare as a global health leader, look no further than the disastrous initial response by the WHO to coronavirus, one that was clearly influenced by Beijing. Information was slow-walked, warnings from nations like Taiwan were ignored at crucial turning points, and cooperation with outside health experts was spurned until it was too late. And it has resulted in the largest