

Congress of the United States

Washington, DC 20510

April 27, 2022

The Honorable Barbara Lee
Chairwoman
Subcommittee on State, Foreign Operations, and
Related Programs
House Appropriations Committee
Washington, DC 20515

The Honorable Hal Rogers
Ranking Member
Subcommittee on State, Foreign Operations, and
Related Programs
House Appropriations Committee
Washington, DC 20515

Dear Chairwoman Lee and Ranking Member Rogers:

Thank you for your continued leadership on the House Committee on Appropriations and its Subcommittee on State, Foreign Operations and Related Programs. As you begin to prepare the State, Foreign Operations, and Related Programs Appropriations Bill for Fiscal Year 2023 (FY23), we respectfully request robust funding for the Health Resilience Fund, a new U.S. Agency for International Development (USAID) Global Health Programs sub-account to strengthen the health workforce, management capacity, and the broader health system in a small set of focus countries. We believe that the U.S. Government must bring a new level of dedication and commitment to investments that enhance preparedness and response capabilities and address significant gaps within partner country health systems and health workforces.

The COVID-19 pandemic has taught us that a strong health workforce and resilient health systems are crucial for detecting and responding to an infectious disease outbreak while continuing delivery of essential health services. Across the globe, health workers have borne the brunt of COVID-19 because of weak, disjointed health systems. Even prior to the pandemic the world was facing a shortage of nearly 18 million health workers, mostly in low- and middle-income countries.¹ The crisis has exposed severe inequities among the health workforce, the majority of whom are women, in terms of adequate pay and leadership opportunities. Inadequate health workforces and human resource management capacity are now severely undermining our efforts to control COVID-19 globally.

One of the most important factors impeding COVID-19 prevention and care for those suffering from the disease is an inadequate health workforce. WHO states the human resource challenges are “caused by a combination of pre-existing [health worker] shortages coupled with unavailability due to COVID-19 infections and deaths, mental health issues and burnout and departures from service due to a lack of

¹ [https://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(21\)00179-3/fulltext](https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(21)00179-3/fulltext)

decent working conditions.”² It’s clear that the health workforce is overstretched. Many countries lack the capacity to carry out unprecedented, complex vaccination campaigns while at the same time working to maintain, and expand, access to essential health services.

Ultimately, we must recognize that these challenges are systemic in nature and go beyond the current COVID emergency. Strong health systems are the foundational building blocks that underpin all other health investments. Countries must plan for the right numbers of the appropriate types of health workers for specific health settings, and, during emergencies, they must be able to surge workers where needed. Yet, many countries lack adequate planning systems that provide rapid, accurate information on workers’ location, capacities, and job performance. The U.S. must do more to address these challenges, as well as broader system weaknesses in supply chains, information systems, and financial management.

With your leadership, Congress has demonstrated strong support for health systems through report language in the Fiscal Year 2022 State, Foreign Operations, and Related Programs appropriations bill requiring at least ten percent of the funding of each Global Health Program account be allocated for cross-cutting, health systems strengthening activities. We urge you to further invest by including robust funding in FY23 for the Health Resilience Fund, a new USAID Global Health Programs sub-account to strengthen the health workforce, management capacity and the broader health system in a small set of focus countries, based on clear metrics for country progress.

This targeted, direct funding via the Health Resilience Fund will ensure that U.S. investments in the emergency response to COVID-19 are translated into longer term system improvements. This initial investment should be used to increase access to comprehensive, high-quality primary care and ensure that frontline health workers (including all community health workers and other informal cadres) are well-trained, equipped, fairly paid, and protected, while strengthening leadership opportunities for women, who make up 70 percent of the health workforce. Without such funding, there will be limited capability for USAID to provide strategic direction for health system strengthening or to incentivize greater investment in the health workforce.³

The U.S. now has a critical opportunity to enhance our global health security and pandemic preparedness strategies and programs by strengthening health workforces in partner countries. Health workers have made enormous sacrifices, and shown tremendous dedication to saving lives, during the COVID-19 pandemic. Making these investments now builds the foundation for health systems to better respond to COVID-19 and to prepare for the next major infectious disease outbreak, without breaking down a strong foundation for progress in other areas of health, including nutrition, maternal and child health, infectious diseases, and more.

Sincerely,

² https://www.who.int/publications/i/item/WHO-2019-nCoV-EHS_continuity-survey-2022.1

³ https://www.usaid.gov/sites/default/files/documents/GH-6_FY21_HealthSystemsStrengtheningReportCongress.pdf



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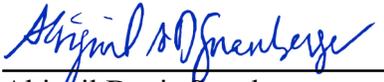
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