

**Written Statement of Jeremy M. Konyndyk**  
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**Office of the Administrator, U.S. Agency for International Development**  
**Senate Committee on Foreign Relations, U.S. Senate**  
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## **Introduction**

Chairman Menendez, Ranking Member Risch, and Members of the Committee, thank you for the invitation to speak with you today about the U.S. Agency for International Development's (USAID) international COVID-19 response.

My name is Jeremy Konyndyk, and I serve as the Executive Director of USAID's COVID-19 Task Force.

Let me begin by first thanking you for Congress' generosity, which has allowed USAID to mount a strong response to the COVID-19 pandemic. During my career, I have led the U.S. government's response to numerous international disasters, including the Ebola outbreak in West Africa in 2014. However, nothing I have witnessed is quite like the overlapping global health, humanitarian and economic crises we are currently facing in scope and complexity. Fighting this global pandemic will take every resource we have at our disposal. I am grateful that the Committee continues to recognize the gravity of this challenge and convened us here today.

This hearing comes as the COVID-19 pandemic strains some of the world's best equipped public health systems, including our own. As I have said to you all before, no country in the world was adequately prepared for this lethal pandemic. More than half a million Americans have tragically lost their lives to COVID-19, and more than 3 million people globally have died. The pandemic has had devastating economic and social impacts here in America and around the globe, and threatened decades of progress in poverty reduction and development. In some parts of the world, it is creating new or exacerbating current humanitarian crises. It has had disproportionate impacts on vulnerable populations, including women and girls. For these reasons, it is the Administration's top priority to end the COVID-19 pandemic.

Our domestic vaccination campaign is successfully advancing, with over half of Americans having received their first dose. But Americans will not be fully safe if the wider world is not. Uncontrolled global transmission risks the emergence of dangerous, new variants around the world. It poses risks to under-vaccinated populations in our country. And as we are seeing vividly now in India, it poses enormous dangers to countries with large unvaccinated populations. This is precisely why the U.S. must be at the forefront of the global response to COVID-19. Stopping the virus worldwide, protecting lives, and stemming the spread of new variants is fundamental to protecting all Americans and ensuring our economic recovery. The COVID-19 crisis is not over; it is rapidly evolving, as we can see from the emergence of new hot spots around the world.

It is important to recognize that the COVID-19 pandemic is not only a global health crisis; it is also a complex, multifaceted humanitarian, development, and economic crisis. The facts on the ground are stark: nearly half of the world's 3.3 billion person workforce are at risk of losing their livelihoods. The ongoing economic and social disruption could drive 90 to 132 million people back into extreme poverty, particularly affecting women and girls. The number of people in acute food insecurity increased by at least 20 million last year, to 155 million people across 55 countries, increasing the risk of famine in a number of countries. This pandemic and its effects will likely result in 9.3 million more children suffering from wasting, a severe form of malnutrition caused by hunger and illness. A projected 2.6 million more children who received poor nutrition due to COVID-19 will face stunted growth that limits their lifelong potential. COVID-19 has also reduced access to essential water, sanitation, and hygiene services for hundreds of millions of people and strained the solvency of water and sanitation providers. The staggering health and economic effects of COVID-19 exacerbate other humanitarian needs, rendering communities affected by conflict or disasters even more susceptible to the spread of COVID-19 and its impacts.

Health providers are being asked to make impossible decisions, often re-directing services to cope with COVID-19. The number of children worldwide receiving routine vaccinations has decreased substantially as families observe lockdown procedures and refrain from proactive and routine healthcare practices. An estimated 1.6 billion learners across 144 countries — representing more than two-thirds of enrolled students worldwide — have been affected by pandemic-related school closures. More than 70 countries and territories have postponed elections. COVID-19 has exacerbated the global trend toward authoritarianism as leaders leverage “emergency actions” to consolidate power over democratic institutions. The number of protests and riots has increased, and around two-thirds of the countries where USAID works are affected by or at risk of violent conflict. Dozens of these countries have curtailed the right to peaceful assembly and to freedom of expression, with disinformation spreading rampantly. COVID-19 has also disproportionately impacted women and girls, as public health lockdowns have increased the risk of gender-based violence, particularly intimate partner violence, and exacerbated the burdens of unpaid work, even as women are disproportionately represented on the frontlines as health care providers.

Looking at both the health and second-order effects of the pandemic around the world, it is clear that a robust global response is essential to an effective domestic response. This global challenge, if unremedied, threatens not only the security and safety of communities around the world, but also jeopardizes the United States' own recovery.

## **USAID COVID-19 Response**

American leadership is rising to meet this unprecedented challenge. To guide the international response to COVID-19, USAID is finalizing work with the U.S. Centers for Disease Control and Prevention, the Department of State, and other interagency partners on the development of an interagency *COVID-19 Global Response and Recovery Plan*, as called for in National Security Memorandum One (NSM-1).

Within this whole-of-government plan, USAID is uniquely positioned to provide assistance and technical support to help end the on-going pandemic, mitigate its wider impacts, and realize a

sustained recovery. With decades of experience and investments in global health and global health security, USAID has been at the forefront of the international response to health threats like Ebola, HIV/AIDS, malaria, Tuberculosis (TB), and Zika.

Since the outbreak first began, USAID has provided more than \$3 billion dollars, thanks to the generosity of Congress and the American people, to fight COVID-19 in more than 120 countries. Working with our partners around the world, USAID is addressing COVID-19's health, social, and economic effects by supporting vaccine access and distribution, strengthening strained health systems, protecting and training health workers, disseminating critical public health information, delivering emergency food assistance, sustaining education for millions of students, and protecting democracies and civic engagement.

### **ARP Implementation**

A key piece of the Administration's plan to end the global pandemic and tackle emerging hot spots is the American Rescue Plan (ARP). USAID is thankful to Congress for your support of the ARP, which provides nearly \$11 billion to USAID and the Department of State to support the international health and humanitarian COVID-19 response. Our efforts will fight COVID-19, its variants, and its devastating impacts on vulnerable communities, economies, and health systems. With this funding, we will advance the five objectives of the aforementioned *COVID-19 Global Response and Recovery Plan*:

- Accelerate widespread and equitable access to and delivery of safe and effective COVID-19 vaccinations;
- Reduce morbidity and mortality from COVID-19, mitigate transmission, and strengthen health systems, including to prevent, detect, and respond to pandemic threats;
- Address acute needs driven by COVID-19, mitigate household shocks, and build resilience;
- Bolster economies and other critical systems under stress due to COVID-19 to prevent backsliding and enable recovery; and
- Strengthen the international health security architecture to prevent, detect, and respond to pandemic threats.

### **Supporting Global Equitable Vaccine Access**

Vaccines are the most effective tool we have to stop COVID-19 and get the global economy on track. In order to end the pandemic, save lives around the world, and stop the threat of new variants, we must vaccinate as many people as possible, as quickly as possible. Through the support of Congress and the American people, the United States is the world's largest single donor to the Gavi COVAX Advance Market Commitment (AMC), which pools global demand and funding to help 92 low- and middle-income economies access COVID-19 vaccines.

Through USAID, the U.S. has contributed an initial \$2 billion to Gavi, in support of COVAX, in March, and plans to contribute an additional \$2 billion to Gavi through 2022. This historic commitment has already helped enable the deployment of safe and effective vaccines for the world's most vulnerable people, including frontline workers and displaced persons. We are also committed to leveraging U.S. contributions to galvanize global leaders from the public and

private sectors to increase their contributions to COVAX. As of May 2021, COVAX has provided 40 million COVID-19 vaccines to 77 low- and middle-income countries.

Additionally, USAID is providing more than \$75 million to date to support partner countries in preparing for COVID-19 vaccine deployment. This funding supports activities to build confidence and trust in vaccines, address vaccine hesitancy and misinformation, and support logistics and administration of vaccines. With additional funding appropriated under the ARP, and building on decades of U.S. leadership and expertise supporting global health programs around the world, USAID and the U.S. Centers for Disease Control and Prevention will expand this support, ensuring that vaccines reach the most vulnerable populations and those at highest risk, including health care workers.

As confidence in the U.S. supply of vaccines for domestic use increases, the U.S. Government is also exploring options for vaccine sharing. On April 26, 2021, the United States announced its intention to share up to 60 million doses of the AstraZeneca vaccine, pending a product quality review by the U.S. Food and Drug Administration (FDA). The U.S. Government is currently developing a plan for where these vaccines will be donated as they become available.

### **Supporting Frontline Health Response**

In addition to providing safe and effective vaccines worldwide, USAID is focused on supporting frontline health workers and health systems to save lives and stop the spread of COVID-19. For decades, USAID has been an unparalleled leader in global health. Through U.S. Government programs like the President's Emergency Plan for AIDS Relief (PEPFAR) and the President's Malaria Initiative, we have saved millions of lives, and our COVID-19 response efforts can build on the successes of those and other programs. However, COVID-19 is an unprecedented challenge. As we have seen in India and other countries, health systems where we supported countries to make strides have now been severely strained by the pandemic. USAID is fighting to protect countries' gains in global health while also supporting countries in their immediate fight against COVID-19.

To support the community-level and frontline health response, USAID is working to slow and mitigate transmission by protecting healthcare workers, spreading critical health information, and ensuring our partner countries have the tools, supplies and capacity to save lives and avoid high death tolls during the acute phases of the pandemic. For example, we have provided millions of units of personal protective equipment, as well as training on infection prevention and control, to frontline healthcare workers around the world. As the evidence around treating COVID-19 evolves we are also working to ensure access to state of the art case management protocols, including the critical use of oxygen therapy, by virtually connecting country teams with US and international expertise.

We also partnered with the U.S. International Development Finance Corporation to expand loan guarantees for private frontline healthcare providers recognizing that the private sector is well placed to provide surge support to the public sector both to help ensure the continuity of ongoing services and to help triage COVID-19 cases to the appropriate facilities. USAID assistance has strengthened laboratory testing capacity in more than 55 countries for large-scale COVID-19

testing and specimen transport. Additionally, USAID has supported infection prevention and control (IPC) across more than 40 countries, including improvements in triage and isolation, hand hygiene, waste management, and emergency supply chains. IPC is critical to prevent the transmission of COVID-19 within health facilities, including among other patients and health care workers.

To further strengthen health systems, USAID is supporting country efforts to prevent, detect and respond to health threats. In particular, USAID supports coordination across the health sector as well as with other sectors such as education and water, sanitation, and hygiene (WASH). We mobilize whole-of-society efforts that include both the public and private sectors. USAID is also focused on ensuring communities receive quick, accurate information about COVID-19 and how it spreads, while combating misinformation about the virus. So far, we have reached more than 200 million people with critical public health information through mass media in more than 85 countries. USAID is also facilitating public forums about the risks of COVID-19. These communications efforts help save lives.

### **Responding to Secondary Impacts**

Beyond the direct impacts of COVID-19, the pandemic threatens decades of progress across USAID's investments in economic growth, food security, education, democracy, gender equality and women and girls' empowerment, and global health. In response, USAID is taking proactive steps to address these secondary effects and sustain our investments to help protect U.S. national security. Vice President Harris's recent announcement of \$310 million in assistance to the Northern Triangle, including \$125 million in USAID funding, is one of the most recent examples of how we are mobilizing our resources to provide emergency food assistance, economic recovery programs, and health support to communities in need.

A sharp rise in poverty has created cascading effects across all sectors of USAID's work. The pandemic marked the first global rise in extreme poverty since the 1990s; COVID-19 eliminated jobs, shut down entire sectors of the economy, and disrupted food supply. In response, USAID is providing life-saving assistance to those who are most vulnerable to the pandemic's urgent consequences. Our immediate support includes life-saving assistance in 48 priority countries and supporting communities, helping them adopt strategies to reduce the spread of COVID-19. USAID is also delivering emergency food assistance to more than 4.7 million people affected by lockdowns and stressors from COVID-19. In addition, through Feed the Future, USAID's food security and resilience programming is helping farmers and small businesses stay afloat, markets safely open, and local food prices and supplies stabilize. We are fighting pandemic induced spikes in hunger while simultaneously strengthening resilience to future shocks.

Due to COVID-19 lockdowns, an estimated 1.6 billion students are out of school, including an estimated 11 million girls who may never return without targeted intervention, putting them at risk for early pregnancy, abuse, and gender-based violence, including child, early, and forced marriage. To combat these disruptions, USAID leveraged its partnerships, on-the-ground presence, and expertise to rapidly pivot programs by mobilizing more than \$900 million for education across more than 50 countries to reach more than 24 million learners in 2020. We are supporting continued education through online, television, and radio school lessons, allowing

millions of students to continue their studies outside of the classroom. We are also ensuring safe return to learning, especially for the most marginalized, including through distance learning, catch-up programs, and school safety protocols.

In the face of COVID-19, investing in women's economic empowerment is more important now than ever, as women are disproportionately affected by the immediate and longer-term impacts of the pandemic. We are especially cognizant of the crucial role that women play in the informal and formal health sectors, and the increased workloads on women in all sectors due to caregiving at home under pandemic restrictions. Women are also more likely to have informal jobs or precarious employment compared to men, resulting in a greater likelihood that their earnings and health and other benefits will be interrupted and/or impaired due to the pandemic. Increasingly, USAID's women's economic empowerment programs have incorporated COVID-19 responses, for instance, several programs have helped women-owned businesses in the garment industry to pivot production for personal protective equipment to meet growing global demand.

COVID-19 continues to disrupt democracies by providing an opportunity for authoritarian regimes to tighten their grip, often through the use of "emergency powers." To promote and protect democratic governance, USAID is supporting efforts to counter disinformation and defend human rights, the rule of law, and democratic safeguards. We have helped provide virtual platforms in some countries to ensure citizens can continue to monitor decision-making processes and hold their governments accountable.

COVID-19 threatens to erase years of progress across our global health programs, particularly in our fight to end diseases like HIV/AIDS, TB, and malaria. Ongoing stress on health systems weakens the ability of countries to respond to and adequately control the spread of other diseases. For example, TB case finding and treatment has decreased by as much as 25 percent, including in the highest burden countries, eliminating a decade of progress to reach every person with TB, cure those in need of treatment, and prevent the spread of disease and new infections. In 2020, one million fewer people were able to access reliable TB diagnosis, and thereby treatment, than in the previous year. To counter these effects, USAID has pivoted programs to provide remote diagnostic testing support and virtual health consultations.

Despite these critical concerns, there is also a real opportunity to use the worldwide roll-out of COVID-19 vaccines to expand USAID's health system strengthening efforts. COVID-19 vaccination campaigns will involve an approach capable of reaching the entire population and require a substantial increase in the number of trained vaccinators and supervisory staff. The likely need for ongoing vaccination efforts will necessitate incorporating the supply chain, human resources, information, and financing arrangements into the core primary health care system for ongoing services. Failing to coordinate and integrate these efforts would represent a real missed opportunity to strengthen health systems and ensure we are better prepared for the next pandemic. USAID will similarly build on other COVID-19 response efforts to align primary health care, public health capacity, and health system resilience to enable a better response to future public health threats.

## **Responding to India and Emerging Hot Spots**

While we have made significant steps towards tackling the pandemic and its second-order effects, we need not look any further than the current crisis in India to see the devastating impact of this disease and why we must show strong US leadership in the international response to end the COVID-19 pandemic once and for all.

Just as India sent assistance to the United States when our hospitals were strained early in the pandemic, the United States is determined to help India in its time of need. With this support, USAID is airlifting critical medical supplies and improving India's capacity to provide life-saving oxygen to COVID-19 patients. We are consulting constantly with the Government of India, non-governmental stakeholders, and our interagency partners to ensure that USAID's response is targeted to where it is most needed and will be most effective.

This surge of immediate assistance builds on USAID's ongoing efforts to mitigate the pandemic in India. As this crisis unfolds, USAID stands with our staff in India, some of whom have lost family members to the virus or are themselves gravely ill. We are inspired by the strength and resilience of our colleagues who are leading this immense response while being deeply impacted themselves.

Important to note, India's COVID-19 crisis is impacting its immediate neighbors, and beyond. The International Federation of Red Cross and Red Crescent Societies reports that in Nepal, towns near the Indian border are unable to cope with the growing number of people needing medical treatment. Nepal is recording more than 50 times more cases than this time last month. USAID is responding swiftly to improve Nepal's ability to respond to this crisis, including improving laboratory and hospital testing capacity, helping both federal and local governments facilitate infection prevention and control, supporting remote services for those seeking access to care, and addressing the secondary effects of the pandemic. It is also expected that we will see other hot spots emerge in the region, as well as around the globe. For example, we are closely tracking the situation in Brazil and working across the interagency to respond there and anticipate other hot spots.

These emerging hot spots are a critical reminder that it will only be possible to keep Americans safe for the long term by stopping the global pandemic now. Our work is not done. To end the pandemic together as a global community, we must win the race between vaccinating all of humanity and the emergence of new and even more dangerous variants, which could threaten us all.

## **Conclusion**

U.S. leadership will help to overcome this pandemic, but we cannot do it alone. Our partners are essential to our success. USAID is working closely with the global community, including the World Health Organization, our partner countries, non-governmental organizations, other donors, and the private sector. We are urging other countries to provide more funding for global COVID-19 response efforts and to advance information sharing, transparency, and accountability across these efforts.

It is not enough to only end the COVID-19 pandemic. USAID is committed to building back a better world, one that is better prepared to prevent, detect, and respond to future biological threats, and where all people can live safe, prosperous, and healthy lives.

Thank you for the opportunity to represent USAID. I welcome your questions.