### **Aid Tradeoff Disadvantage**

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# Summary

#### The Aid Tradeoff DA argues that the United States has set its foreign aid budget for the year and that in order to fund its AIDS prevention initiative, “PEPFAR,” it reduced its aid to Mexico. If aid to Mexico was increased to fund rural farmers it would take away funding from its AIDs prevention initiative. If these programs collapsed, prevention programs, like the ones producing would fail and we would see an increase in the prevalence of AIDS, which kills millions worldwide, including thousands upon thousands of Mexican citizens.

# Glossary

#### **HIV/AIDS –** a disease that inhibits the ability of the human body to defend itself against infection. It has become more prevalent over the past decade, and the US devotes a substantial amount of foreign aid to fighting its spread.

#### **PEPFAR –** the name of President Obama’s program designed to reduce the rates of HIV/AIDS infection and mortality.

#### **Food prices –** refers to the average cost of food in a country. Food prices can go up or down depending on the cost of food production, shipping, or scarcity due to natural disasters.

#### **Remittance –** refers to the money that immigrants send back to their home country.

### Aid Tradeoff Disadvantage 1NC **(1/2)**

#### **A. Uniqueness and Link: Budget cuts have slashed aid to Mexico and farming programs – the plan would be funded through a trade off with research for an AIDS cure.**

Dr. Shah, Administrator of the US Agency for International Development, 2012

(Rajiv, “Testimony By USAID Administrator Dr. Rajiv Shah Before The Senate Committee On Foreign Relations On The Fy 2013 Budget Request,” March 6, Online: <http://www.usaid.gov/news-information/congressional-testimony/testimony-usaid-administrator-dr-rajiv-shah-senate>)

While foreign assistance represents less than one percent of our budget, we are committed to improving our efficiency and maximizing the value of every dollar. American households around the country are tightening their belts and making difficult tradeoffs. So must we.¶ Even as we face new challenges around the world, our budget represents a slight reduction from fiscal year 2012.¶ We've prioritized, focused and concentrated our investments across every portfolio. In global health, we propose to close out programs in Peru and Mexico as those countries take greater responsibility for the care of their own people.¶ We've eliminated Feed the Future programs in Kosovo, Serbia and Ukraine and reduced support to Europe, Eurasia, and Central Asia by $113 million to reflect shifting global priorities and progress over time by some countries toward market-based democracy.¶ And we're keeping our staffing and overall administrative costs at current levels, even in the midst of a major reform effort. It is through that effort that I spoke about last year-USAID Forward-that we've been able to deliver more effective and efficient results with our current staffing profile and operating budget.¶ Our budget prioritizes our USAID Forward suite of reforms.¶ That funding allows us to invest in innovative scientific research and new technologies. Last year, our support of the AIDS vaccine research through PEPFAR led to the isolation of 17 novel antibodies that may hold the key to fighting the pandemic. And we're working with local scientists at the Kenyan Agricultural Research Institutes to develop new drought-resistant seed varieties of sorghum, millet and beans, as well as a vitamin-A rich orange-fleshed sweet potato.

### Aid **Tradeoff Disadvantage 1NC (2/2)**

#### **B. Impact: Current foreign aid funding allocation is key to the implementation of a widespread AIDS cure that would save millions of lives.**

Dr. Shah, Administrator of the US Agency for International Development, 2012

(Rajiv, “TESTIMONY BY USAID ADMINISTRATOR DR. RAJIV SHAH BEFORE THE SENATE COMMITTEE ON FOREIGN RELATIONS ON THE FY 2013 BUDGET REQUEST,” March 6, Online: <http://www.usaid.gov/news-information/congressional-testimony/testimony-usaid-administrator-dr-rajiv-shah-senate>)

Thanks in large part to the bipartisan support we've had for investments in global health, we're on track to provide life-saving assistance to more people than ever before. Although this year's request of $7.9 billion for the Global Health Initiative is lower than FY 2012 levels, falling costs, increased investments by partner governments, and efficiencies we've generated by integrating efforts and strengthening health systems will empower us to reach even more people.¶ That includes PEPFAR, which will provide life-saving drugs to those around the world afflicted with HIV and expand prevention efforts in those countries where the pandemic continues to grow. We can expand access to treatment and lift a death sentence for six million people in total without additional funds.¶ We're also increasingly providing treatment for pregnant mothers with HIV/AIDS so we can ensure their children are born healthy. And because of breakthrough research released last year, we know that putting people on treatment actually helps prevention efforts-treatment is prevention. All of these efforts are accelerating progress towards President Obama's call for an AIDS-free generation.¶ Our request also includes $619 million for thePresident'sMalaria Initiative, an effective way to fight child mortality. In country after country, we've shown that if we can increase the use of cheap bed nets and anti-malarial treatments, we can cut child death-from any cause, not just malaria-by as much as 30 percent. In Ethiopia, the drop in child mortality has been 50 percent.¶Last year, we commissioned an external, independent evaluation of the Presidential Malaria Initiative's performances. That report praised the Initiative's effective leadership for providing "excellent and creative program management."¶ And we will continue to fund critical efforts in maternal and child health, voluntary family planning, nutrition, tuberculosis and neglected tropical diseases-cost-effective interventions that mean the difference between life and death.

# Answers to: Cuts to AIDS Prevention Now

#### **[ ]**

#### **[ ] AIDS prevention funding has increased to other organizations under the 2014 budget – programs are still functional, but on the brink.**

Aziz, policy research coordinator at the Center for Global Health Policy, 2013

(Rabita, “Obama 2014 budget: continued support for Global Fund, paired with PEPFAR cut leave Blueprint goals in question,” *Center for Global Health Policy*, April 10, Online: <http://sciencespeaksblog.org/2013/04/10/cut-to-pepfar-support-for-global-fund-in-obama-2014-budget-leave-blueprint-goals-in-question/>)

“We applaud maintaining funding for critical Global Fund programs as an important step. But reaching the President’s promise of an AIDS Free Generation means implementing his analysis that spending now will save billions in the long run by halting new infections, and this budget does not do that,” said Matthew Kavanagh, Senior Policy Analyst for Health GAP. “To reach the tipping point in the epidemic we need to expand programs in Zimbabwe, Malawi, Democratic Republic of Congo, and many other countries, but now PEPFAR will not have the funds to do so.” The budget also requests $2.6 billion for USAID global health programs, which includes $330 million for HIV/AIDS programs, a drop from the $350 million enacted in FY 12. According to the Kaiser Family Foundation tuberculosis programs under USAID will receive $191 million, a massive cut from FY 12 levels and amounts already diminished by recent sequestration cuts. Global health programs under the Department of Health and Human Services budget request will receive $393 million, of which $132 million will be available for global HIV/AIDS through September, 2015. This is a significant increase from the $348 million received under the FY 2012 budget, and the $350 received under the FY 2013 CR. Allaying concerns voiced by research advocates at Monday’s rally in Washington D.C., the President’s proposal includes a boost of $472 million for the National Institutes of Health over the FY 12 request. The institutes’ Office of AIDS Research gets $312 million of that, a boost of $46.0 million.

# Answers to: US Sends Aid to Mexico Now

#### **[ ]**

#### **[ ] USAID has substantially cut aid to Mexico to focus on capacity building – and existing aid is funded by the military.**

State Department, 2013

(Transcript of budget briefing, “Senior State Department and USAID Officials on President’s FY2014 Budget Proposal,” *State Department’s Bureau of International Information Programs*, April 10, Online: <http://iipdigital.usembassy.gov/st/english/texttrans/2013/04/20130410145570.html#axzz2ZIppqda2>)

QUESTION: Thank you for being so forthcoming. I didn’t expect an answer at all. (Laughter.) I expected the usual answer, which is not what I got, so that’s good. Just on the Latin American drug initiative, Merida and Plan Colombia, and their legacies --¶ SENIOR STATE DEPARTMENT OFFICIAL ONE: Yeah.¶ QUESTION: -- is there any – are those still left?¶ SENIOR STATE DEPARTMENT OFFICIAL ONE: They are. But they – the programs in Mexico and Colombia are on sort of a downward glide path, because – for two reasons. One, the assistance to those countries in the past have been very, very high, and they were driven largely by big military equipment, which are very sort of expensive. Now we’re sort of normalizing those programs to be much more in a capacity training types of programs. So you’re going to see – there are decreases in our budget compared to 2012 with Mexico and Colombia, but we’re also – but we’re increasing our accounted drug efforts in the Caribbean, where things seem to be moving in terms of drug trafficking and crime. So programs like our regional Central America security initiative go up.¶ QUESTION: Do you have a breakdown of how much they’re – they will be decreasing next (inaudible)?¶ SENIOR STATE DEPARTMENT OFFICIAL ONE: Yes. Let me just get my notes here. Hang on one second. Yeah. It’s right here. Yeah. Mexico, we’re providing $205 million, which is about $124 million decrease from 2012. And Colombia, we’re providing $323 million, which is a $61 million decrease.

# Answers to: Private Donors Fund Programs

#### **[ ]**

#### **[ ] Private groups can’t replace federal funding – they aren’t prepared for disaster response.**

Vorozhko, staff writer for Voice of America news, 2013

(Tatiana, “Budget Cuts hit US Foreign Aid Programs,” *Voice of America*, April 3, Online: <http://www.voanews.com/content/budget-cuts-hit-us-foreign-aid-programs/1633892.html>)

Still, these efforts can not close the entire gap in aid provided by the US government -- especially in the area of health and disaster assistance. "The private sector is not going step in and provide the medical care, the food, the water that is required when you have humanitarian crisis," noted Ingram.

# Link Extension – Aid Budget Set for 2014

#### **[ ] USAID’s budget is set for 2014 – they can’t afford new programs, any new spending will have to trade off with existing priorities.**

Morales, staff writer at Devex – an international aid think tank, 2013

(John, “USAID chief defends budget in Congress,” *devex*, April 25, Online: <https://www.devex.com/en/news/usaid-chief-defends-budget-in-congress/80790>)

Why will 45 percent of food aid budget be spent to buy locally-produced food in crisis areas? Will cuts in HIV/AIDS funding erode progress in the fight against the desease? Why is the U.S. reducing its aid budget for Latin America and Caribbean? How far the USAID Forward reform truly moving forward?¶ ¶ These were a few of the hardline questions American lawmakers posed to USAID Administrator Rajiv Shah faced Congress on Wednesday to defend President Barack Obama’s budget proposal for the agency in fiscal 2014.¶ ¶ Appearing before the House appropriations and Senate foreign relations committees, Shah churned out hard data and narrated anecdotes to defend the proposed 6 percent cut in the United States foreign aid budget for next year.¶ ¶ “The FY 2014 request for USAID managed or partially managed accounts is $20.4 billion, six percent below the total enacted funding for FY 2012,” Shah said at one point. “In this tough budget environment, USAID is committed to maximizing the value of every dollar. We have made tough choices so that we are working where we will have greatest impact, and shifting personnel and funding resources towards programs that will achieve the most meaningful results.”

# Link Extension – USAID Budget is Tight

#### **[ ] The USAID budget is tight – there’s no room for new programs, the plan WILL trade off with existing projects.**

Dr. Shah, Administrator of the US Agency for International Development, 2013

(Rajiv, “USAID Forward PROGRESS REPORT 2013,” Online:http://www.usaid.gov/sites/default/files/documents/1868/2013-usaid-forward-report.pdf)

Like any robust reform process, we face significant ¶ challenges across a spectrum of efforts. Designing ¶ country strategies was more time and labor ¶ intensive than originally anticipated, particularly ¶ because a large number of partners were engaged ¶ in the process to determine tough trade-offs. In ¶ the year ahead, we will continue to prioritize the ¶ development of country strategies and enable ¶ better coordination with our partners to reconcile ¶ competing priorities and focus on areas where we ¶ each have a comparative advantage. ¶ Our effort to focus our assistance programs has ¶ been successful for the past two years either ¶ because we successfully exited from sustainable ¶ projects or because our programming was too ¶ minimal to have a true impact. As we look ahead, ¶ we must continue to make tough choices and ¶ use each country’s strategy as the backbone ¶ for decision-making to ensure the greatest ¶ development impact.