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**Interview - Administrator Shah  
Kaiser Family Foundation  
July 23, 2012**

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**FEMALE SPEAKER:** Thank you for joining us.

**DR. RAJIV SHAH:** Thank you.

The clarion call of this conference, so far, anyway, has been the possibility of an AIDS-free generation. You see development as a bridge to that. In what ways?

**DR. RAJIV SHAH:** Well, development absolutely is a bridge to an AIDS-free generation. I think it's true in a couple of ways. First, it's very hard to get scale and results at the kind of scale we're talking about at this conference, 8 million people treated, without having real local institutions, real country leadership and ownership and real financing for these activities at a scale that delivers that kind of outcome. That requires significant development expertise.

Second, to build on that and to create the new solutions, we need to do clinical trials. We need research systems in Africa and the rest of the world that help us understand how well these new ideas; combination, prevention actually perform in real-life development settings where resources are scarce, and often, the conditions are very different than they would be in an American laboratory or in different kind of treatment center.

**FEMALE SPEAKER:** As the administrator of USAID, how do you define development in the context of the HIV/AIDS fight?

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**DR. RAJIV SHAH:** Well, in two ways. One is I think development expertise is fundamentally about how you get scale and results and impact towards your goals in very difficult operating environments and settings where institutions may be less visible and well-resourced than they are in other settings.

Development experts know how to make things work in those settings. They know how to get success. They know how to tap those mother-to-mother networks and local communities that help women prevent the spread of HIV/AIDS to their unborn children or their newborn children.

A second reality is that development itself, the economic growth, the resources that come from economic growth, educational improvements, especially for women and girls, we know are highly correlated with improved health outcomes and the development of health systems in countries. Both the core development results of economic growth and social development, and the core expertise that defines what development experts do are critical to achieving an AIDS-free generation.

**FEMALE SPEAKER:** Does that kind of holistic approach to HIV/AIDS create tension between those who would prefer to see money directed specifically at the more traditional sources; health clinics, for example, research labs versus those who would take the larger view?

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**DR. RAJIV SHAH:** I think if we're being honest, we would say sure, it has in the past. That was a lot of the debate before we got here. I think now that we're operating at a scale where the challenge is not to get from the basic idea that it is worth treating people and fighting stigma and protecting girls and kids and supporting families with HIV/AIDS, to now the new reality of saying we know that that's a moral imperative, an economic imperative, a National Security imperative.

Now the challenge is how do you get from 8 million people treated to 10 million to 15 million to 20 million, and how do you make prevention as effective and as broad in its scale and reach so that you can turn the tide and the number of new infections as fewer than the number of people going on effective treatment.

**FEMALE SPEAKER:** During your tenure, you have been advocating for a shift in dollars from U.S. companies who go into other countries to do their work to more local investment. How might that affect AIDS programs? What's your vision?

**DR. RAJIV SHAH:** My vision is one that is consistent with visions, I think, of thousands of people who support the work and development whether they're from developing countries or from the United States or Western Europe or now India and China and other partners like that. That is a vision where strong local institutions essentially create the conditions

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where aid is no longer needed, where we define success as South Korea, a place that used to be the largest recipient of U.S. food aid and health assistance, and today is a donor country to its neighbors.

We can achieve that outcome even in places that seem like it is a long ways off, but we're only going to be able to achieve that outcome if we set the bar that high, if we push ourselves to find those local leaders who can define their own countries' futures and if we're really are honest about how much of every dollar we spend is reaching that AIDS patient, is reaching that child who deserves to survive and thrive beyond the age of five, or is reaching a family whose mother may be malnourished while she's pregnant creating consequences for her family in the future.

**FEMALE SPEAKER:** The kind of shift you're talking about; years-long process?

**DR. RAJIV SHAH:** Oh, absolutely. Absolutely.

**FEMALE SPEAKER:** Decades?

**DR. RAJIV SHAH:** Hopefully not decades. We know that it will take time and consistent outcomes in order to achieve the kind of outcome I'm talking about, but consider this. At a 6-percent annual growth rate, a country doubles its economy roughly every eight years, seven or eight years.

We have the opportunity now with some of the fastest growing economies in the world, growing at more than six-

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percent a year, being in Africa and being precisely those places that have had very high rates of HIV prevalence, to imagine a future where countries have strong, viable, local health systems that are providing for special access and care for HIV and AIDS, but also treating a broad range of things.

We work with them as technical partners and supporters, but we're not saying move over; we'll drive. We're using our dollars efficiently because at the end of the day, I believe American taxpayers will continue to invest more in AIDS treatment and in global health, but only if we show we're dead serious about squeezing the most value and the most impact for every dollar we spend.

**FEMALE SPEAKER:** Thank you very much, Dr. Rajiv Shah.

**DR. RAJIV SHAH:** Thank you.

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