

117TH CONGRESS
2D SESSION

H. RES. 1504

Supporting the goals of World AIDS Day.

IN THE HOUSE OF REPRESENTATIVES

DECEMBER 1, 2022

Ms. LEE of California (for herself, Miss GONZÁLEZ-COLÓN, Ms. JACKSON LEE, Ms. WILLIAMS of Georgia, Mr. FITZPATRICK, Ms. WILSON of Florida, Ms. MOORE of Wisconsin, Mr. COHEN, Ms. TITUS, Mr. TONKO, Mrs. WATSON COLEMAN, Mr. TAKANO, Ms. MENG, Ms. PRESSLEY, Ms. JACOBS of California, Mr. CARSON, Mrs. CAROLYN B. MALONEY of New York, Ms. CLARKE of New York, Mr. KILMER, Mr. CICILLINE, Mr. MCGOVERN, Mr. PAPPAS, Ms. BARRAGÁN, Ms. BUSH, Ms. VELÁZQUEZ, and Ms. WATERS) submitted the following resolution; which was referred to the Committee on Energy and Commerce, and in addition to the Committee on Foreign Affairs, for a period to be subsequently determined by the Speaker, in each case for consideration of such provisions as fall within the jurisdiction of the committee concerned

RESOLUTION

Supporting the goals of World AIDS Day.

Whereas, as of the end of 2021, an estimated 38,400,000 people were living with human immunodeficiency virus (HIV) or acquired immunodeficiency syndrome (AIDS), including 1,700,000 children;

Whereas, in the United States, more than 770,000 people with AIDS have died since the beginning of the HIV epidemic, including over 18,000 deaths among people with

diagnosed HIV in 2020, with the disease disproportionately affecting communities of color;

Whereas each year nearly 40,000 people become newly diagnosed with HIV in the United States;

Whereas, according to the Centers for Disease Control and Prevention (“CDC”), Blacks, Hispanics, Asians, American Indians, Alaska Natives, and Native Hawaiians and other Pacific Islanders are disproportionately affected by HIV in the United States;

Whereas, in order to address the HIV epidemic in the United States, on August 18, 1990, Congress enacted the Ryan White Comprehensive AIDS Resources Emergency Act of 1990 (Public Law 101–381; commonly referred to as the “Ryan White CARE Act”) to provide primary medical care and essential support services for people living with HIV who are uninsured or underinsured;

Whereas the Ryan White HIV/AIDS Program provides services and support for over half of all people diagnosed with HIV in the United States;

Whereas, to further focus attention on the HIV/AIDS epidemic among minority communities in the United States, in 1998, the Minority AIDS Initiative was established to provide funds to State and local institutions and organizations to best serve the health care costs and support the needs of racial and ethnic minorities living with HIV;

Whereas, since 2016, the historic U=U (Undetectable=Untransmittable) movement has positively impacted the lives of people living with HIV by promoting the scientific facts;

Whereas, when people living with HIV are on treatment and have an undetectable viral load, they protect their own health and they cannot transmit HIV;

Whereas, in 2022, the Federal Government across sectors (including the White House, the Department of Health and Human Services, and the CDC) has publicly announced their support for the U=U movement in hopes of positively changing the trajectory of HIV in the United States;

Whereas the United Nations Sustainable Development Goals established a global target to end AIDS as a public health threat by 2030;

Whereas in order to further address the global HIV/AIDS epidemic, in 2003, Congress and the White House created the President's Emergency Plan for AIDS Relief (PEPFAR);

Whereas the PEPFAR program remains the largest commitment in history by any country to combat a single disease;

Whereas, as of March 31, 2022, PEPFAR has supported treatment for approximately 20,000,000 people, and has enabled 5,500,000 infants of mothers living with HIV to be born HIV-free;

Whereas, in fiscal year 2021, PEPFAR directly supported HIV testing and counseling for 63,400,000 people;

Whereas the Global Fund to Fight AIDS, Tuberculosis and Malaria, launched in 2002, has helped provide antiretroviral therapy to approximately 23,300,000 people living with HIV/AIDS and to 670,000 pregnant women to prevent the transmission of HIV/AIDS to their

children, saving an estimated 50,000,000 lives, as of 2021;

Whereas the United States is the largest donor to the Global Fund to Fight AIDS, Tuberculosis and Malaria, and every \$1 contributed by the United States leverages an additional \$2 from other donors, as required by law;

Whereas considerable progress has been made in the fight against HIV/AIDS, including a nearly 30-percent reduction in new HIV transmissions, over a 50-percent reduction in new HIV transmissions among children, and over a 45-percent reduction in the number of AIDS-related deaths between 2010 and 2020;

Whereas approximately 28,700,000 people had access to antiretroviral therapy in 2021, compared to only 7,800,000 people who had access to such therapy in 2010;

Whereas research funded by the National Institutes of Health found that HIV treatment not only saves the lives of people living with HIV, but people living with HIV on effective antiretroviral therapy and who are durably virally suppressed cannot sexually transmit HIV, proving that HIV treatment is prevention;

Whereas the CDC states that preexposure prophylaxis (PrEP) reduces HIV transmission through sexual contact by 99 percent when taken as prescribed, proving that PrEP is critical for HIV prevention;

Whereas nearly 1,000,000 people globally had started taking PrEP by the end of 2020;

Whereas it is estimated that, without treatment, half of all infants living with HIV will die before their second birthday;

Whereas, despite the remarkable progress in combating HIV, significant challenges remain;

Whereas there were approximately 1,500,000 new HIV diagnoses in 2021 globally, structural barriers continue to make testing and treatment programs inaccessible to highly vulnerable populations, and an estimated 5,900,000 people living with HIV globally still do not know their HIV status;

Whereas the CDC reports that nearly 31,000 people were diagnosed with HIV in the United States in 2020 and 13 percent of the 1,200,000 people in the United States living with HIV are not aware of their HIV status;

Whereas the CDC has found that men who have sex with men (MSM), particularly young Blacks and Hispanics, are the population most affected by HIV in the United States;

Whereas southern areas of the United States bear the greatest burden of HIV, accounting for 51 percent of new infections in 2018;

Whereas globally transgender feminine individuals are 66 times more likely and transgender masculine individuals are 6.8 times more likely to be diagnosed with HIV compared to the general adult population;

Whereas one in two people living with HIV in the United States is over 50;

Whereas people living with HIV are frequently susceptible to other infections, such as hepatitis B and C and tuberculosis;

Whereas the opioid and heroin epidemics have led to increased numbers of new HIV transmissions among people who inject drugs, and the crisis has disproportionately af-

affected nonurban areas, where HIV prevalence rates have been low historically and have limited services for HIV prevention and treatment and substance use disorder treatment;

Whereas the COVID–19 pandemic has placed a significant burden on the public health systems across the United States and globe;

Whereas December 1 of each year is internationally recognized as “World AIDS Day”; and

Whereas, in 2022, commemorations for World AIDS Day recognize that “inequalities which perpetuate the AIDS pandemics are not inevitable; we can tackle them”: Now, therefore, be it

1 *Resolved*, That the House of Representatives—

2 (1) encourages people around the world to work
3 to achieve the goal of zero new HIV transmissions,
4 zero discrimination, and zero AIDS-related deaths,
5 in order to end the HIV epidemic in the United
6 States and around the world by 2030;

7 (2) encourages Federal, State, and local govern-
8 ments, including their public health agencies, and
9 community-based organizations to share and dis-
10 seminate U=U (Undetectable equals
11 Untransmittable) information;

12 (3) commends the efforts and achievements in
13 combating HIV/AIDS through the Ryan White HIV/
14 AIDS Treatment Extension Act of 2009 (Public
15 Law 111–87), the Minority HIV/AIDS Initiative,

1 the Housing Opportunities for Persons With AIDS
2 (HOPWA) Program, the Centers for Disease Con-
3 trol and Prevention, the National Institutes of
4 Health, the Substance Abuse and Mental Health
5 Services Administration, the Office of Minority
6 Health, and the Office of the Secretary of Health
7 and Human Services;

8 (4) commends the efforts and achievements in
9 combating HIV/AIDS made by PEPFAR, the Global
10 Fund to Fight AIDS, Tuberculosis and Malaria, and
11 the Joint United Nations Programme on HIV/AIDS;

12 (5) supports continued funding for prevention,
13 care and treatment services, and research programs
14 for communities impacted by HIV and people living
15 with HIV in the United States and globally;

16 (6) urges, in order to ensure that an AIDS-free
17 generation is achievable, rapid action by all countries
18 toward further expansion and scale-up of
19 antiretroviral treatment programs, including efforts
20 to reduce disparities and improve access for children
21 to life-saving medications;

22 (7) encourages the scaling up of comprehensive
23 prevention services, including biomedical and struc-
24 tural interventions, to ensure inclusive access to pro-
25 grams and appropriate resources for all people at

1 risk of contracting HIV, especially in communities
2 disproportionately impacted as these groups make
3 up the majority of new HIV diagnoses in the United
4 States and prevention efforts should specifically
5 reach these groups;

6 (8) calls for greater focus on the HIV-related
7 vulnerabilities of women and girls, including women
8 and girls at risk for or who have survived violence
9 or faced discrimination as a result of the disease,
10 such as through the implementation of layered pre-
11 vention programming through PEPFAR's DREAMS
12 (Determined, Resilient, Empowered, AIDS-free,
13 Mentored, and Safe) public-private partnership to
14 reduce structural and individual vulnerabilities to
15 HIV;

16 (9) supports continued leadership by the United
17 States in domestic, bilateral, multilateral, and pri-
18 vate sector efforts to fight HIV;

19 (10) encourages input from civil society in the
20 development and implementation of domestic and
21 global HIV policies and programs that guide the re-
22 sponse with specific measures for transparency and
23 accountability;

24 (11) encourages and supports greater degrees
25 of ownership and shared responsibility by developing

1 countries in order to ensure the sustainability of the
2 domestic responses to HIV by those countries; and
3 (12) urges other members of the international
4 community to sustain and scale up their support for
5 and financial contributions to efforts around the
6 world to combat HIV.

