

118TH CONGRESS
2D SESSION

H. RES. 1605

Supporting the goals of World AIDS Day.

IN THE HOUSE OF REPRESENTATIVES

DECEMBER 3, 2024

Ms. LEE of California (for herself, Mrs. CHERFILUS-MC CORMICK, Mr. McGOVERN, Mrs. WATSON COLEMAN, Ms. CLARKE of New York, Ms. MOORE of Wisconsin, Ms. BARRAGÁN, Ms. McCLELLAN, Ms. SEWELL, Mr. FITZPATRICK, Mr. COHEN, Ms. BALINT, Ms. MCCOLLUM, Mrs. McIVER, Ms. NORTON, Ms. KELLY of Illinois, Ms. TLAIB, Ms. WILSON of Florida, Mr. KENNEDY, Mr. VARGAS, Mr. SWALWELL, and Mr. CARSON) 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 2023, an estimated 39,900,000 people were living with human immunodeficiency virus (HIV) or acquired immunodeficiency syndrome (AIDS), including 1,400,000 children;

Whereas, in the United States, more than 790,000 people with AIDS have died since the beginning of the HIV epidemic, including over 19,000 deaths among people with diagnosed HIV in 2022, with the disease disproportionately affecting communities of color;

Whereas, in 2022, over 37,000 people became newly diagnosed with HIV in the United States;

Whereas, according to the Centers for Disease Control and Prevention (“CDC”), Black Americans, Hispanic Americans, Asian Americans, American Indians, Alaska Natives, 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 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 Centers for Disease Control and Prevention (“CDC”)) has publicly announced 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 25,000,000 lives have been saved through PEPFAR;

Whereas, as of September 30, 2023, 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 2023, PEPFAR directly supported HIV testing and counseling for 71,000 people;

Whereas sustained bipartisan commitment is essential for PEPFAR to continue saving lives, preventing new HIV infections, and accelerating progress toward controlling the global HIV/AIDS pandemic;

Whereas the Global Fund to Fight AIDS, Tuberculosis and Malaria, launched in 2002, has helped provide antiretroviral therapy to approximately 25,000,000 people living with HIV/AIDS and to 695,000 pregnant

women to prevent the transmission of HIV/AIDS to their children, saving an estimated 65,000,000 lives, as of 2023;

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 40-percent reduction in new HIV transmissions, a 60-percent reduction in new HIV transmissions among children, and a reduction of over 50 percent in the number of AIDS-related deaths between 2010 and 2023;

Whereas, approximately 30,700,000 people had access to antiretroviral therapy in 2023, 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 not only that HIV treatment 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 it is estimated that, without treatment, half of all infants living with HIV will die before their second birthday;

Whereas children living with HIV are significantly less likely than adults to know their HIV status and be accessing life-saving treatment;

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 4,000,000 people globally had started taking PrEP by the end of 2022;

Whereas an estimated 1,200,000 people in the United States could benefit from access to PrEP in 2024 and there are major disparities in access based on race and ethnicity;

Whereas the CDC began a pilot PrEP Program in 5 jurisdictions in 2024 and the Administration has called for institution of a National PrEP Program to further the goal of ending the HIV epidemic by 2030;

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

Whereas there were approximately 1,300,000 new HIV diagnoses in 2023 globally, structural barriers continue to make testing and treatment programs inaccessible to highly vulnerable populations, and an estimated 5,400,000 people living with HIV globally still do not know their HIV status;

Whereas the CDC reports that over 35,000 people were diagnosed with HIV in the United States in 2021, 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, particularly young Black Americans 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 52 percent of new infections in 2021;

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

Whereas harm reduction interventions such as syringe services programs have been shown to help prevent HIV transmission and lower rates of overdose;

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

Whereas the PEPFAR program, an initiative launched by President George W. Bush with bipartisan support has for over two decades served as the primary policy instrument of the United States to address HIV/AIDS globally; and

Whereas, in 2024, commemorations for World AIDS Day recognize the essential role of communities in the global HIV/AIDS response: Now, therefore, be it

1 *Resolved*, That the House of Representatives—

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

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 and preexposure pro-
12 phylaxis information;

13 (3) commends the efforts and achievements in
14 combating HIV/AIDS through the Ryan White HIV/
15 AIDS Treatment Extension Act of 2009 (Public
16 Law 111–87), the Minority HIV/AIDS Initiative,
17 the Housing Opportunities for Persons With AIDS
18 Program, the Centers for Disease Control and Pre-
19 vention, the National Institutes of Health, the Sub-
20 stance Abuse and Mental Health Services Adminis-
21 tration, the Office of Minority Health, and the Of-
22 fice of the Secretary of Health and Human Services;

23 (4) commends the efforts and achievements in
24 combating HIV/AIDS made by the President's
25 Emergency Plan for AIDS Relief ("PEPFAR"), the

1 Global Fund to Fight AIDS, Tuberculosis and Ma-
2 alaria, and the Joint United Nations Programme on
3 HIV/AIDS;

4 (5) supports robust funding for prevention,
5 care, and treatment services, and research programs
6 for communities impacted by HIV and people living
7 with HIV in the United States and globally;

8 (6) urges, in order to ensure that an AIDS-free
9 generation is achievable, rapid action by all countries
10 toward further expansion and scale-up of testing and
11 antiretroviral treatment programs, including efforts
12 to reduce growing disparities and improve access for
13 children to life-saving medications;

14 (7) encourages the scaling up of comprehensive
15 prevention services, including biomedical and struc-
16 tural interventions and a National PrEP Program,
17 to ensure inclusive access to programs and appro-
18 priate resources for all people at risk of contracting
19 HIV, especially in communities disproportionately
20 impacted as these groups make up the majority of
21 new HIV diagnoses in the United States and preven-
22 tion efforts should specifically reach these groups;

23 (8) calls for greater focus on the HIV-related
24 vulnerabilities of women and girls, including women
25 and girls at risk for or who have survived violence

1 or faced discrimination as a result of the disease,
2 such as through the implementation of layered pre-
3 vention programming through PEPFAR's DREAMS
4 (Determined, Resilient, Empowered, AIDS-free,
5 Mentored, and Safe) public-private partnership to
6 reduce structural and individual vulnerabilities to
7 HIV;

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

11 (10) encourages input from civil society in the
12 development and implementation of domestic and
13 global HIV policies and programs that guide the re-
14 sponse with specific measures for transparency and
15 accountability;

16 (11) encourages and supports greater degrees
17 of ownership and shared responsibility by developing
18 countries in order to ensure the sustainability of the
19 domestic responses to HIV by those countries; and

20 (12) urges other members of the international
21 community to sustain and scale up their support for
22 and financial contributions to efforts around the
23 world to combat HIV.

