STATEMENT OF THE HONORABLE BENJAMIN L. CARDIN (D-MD)

December 1, 2022

**WORLD AIDS DAY 2022**

Mr. CARDIN. Mr. President, on December 1, we mark the 34th anniversary of World AIDS Day. World AIDS Day calls on us to remember those lost to AIDS and support those who live with HIV/AIDS-related illnesses. On this day, we also raise awareness for the global health crisis and redouble our efforts in the fight against HIV/AIDS.

Established in 1998, World AIDS Day marked the first international day for global health. Since then, World AIDS Day has adopted targeted themes to raise awareness and encourage international cooperation. This year’s theme, “Equalize,” focuses on addressing persisting inequalities in the fight against AIDS. Vulnerable groups such as young women, gay men, transgender people, people of color, and sex workers struggle to access contraception, testing, treatment, and new technologies. Criminalization, discrimination, and social stigmas continue to target these vulnerable populations across the globe. The 2022 “Equalize” campaign reminds us that our fight cannot be won until such inequalities are eliminated.

Since the first U.S. cases of AIDS were reported in June 1981, over 700,000 people in the U.S. have died from HIV-related illnesses. As of 2019, nearly 1.2 million people were living with HIV. In 2020, 30,635 people received an HIV diagnosis in the U.S. and dependent areas. My home state of Maryland is not immune to this issue. As of 2021, over 32,000 Marylanders over 13 years old are living with HIV, with 773 new diagnoses that same year. Furthermore, recent data shows that minority populations remain disproportionately affected by HIV/AIDs. In 2020, Black Americans accounted for 42 percent of HIV diagnoses, while Hispanic/Latino Americans accounted for 27 percent of HIV diagnoses. This is evidence of the persistent health challenge HIV/AIDS presents Maryland and the U.S.

Fortunately, scientists have made significant strides in developing antiretroviral therapies (ART) against HIV infections over recent decades. Thanks to breakthroughs in the private and public sectors, the U.S. Food and Drug Administration (FDA) has now approved more than 30 medicines to treat HIV infection. These treatment regimens help extend and stabilize the lives of those living with HIV while reducing further risk of HIV transmission.

I particularly applaud Maryland’s scientific community and academic partners – including the National Institutes of Health (NIH), the Walter Reed Army Institute of Infectious Disease Research, the Institute of Human Virology at the University of Maryland, and Johns Hopkins University – for their groundbreaking research initiatives. For example, NIH funded research, including clinical trials, to develop Pre-exposure prophylaxis (PrEP), medication designed to prevent high-risk individuals from contracting HIV.

Thanks to cutting-edge advancements in treatment, Maryland has reached significant milestones in reducing HIV case numbers. For the first time in over three decades, Maryland reported fewer than 1,000 new cases in 2018 and continues to remain below the 1,000 new case benchmark as of 2021. State-supported efforts such as safe-sex education programs, condom distribution, and the expansion of prophylactic medications have all mitigated HIV transmission. The Maryland Department of Health’s antiretroviral therapy campaign has also contributed to viral suppression for 60 percent of the state’s HIV patients. Additionally, city and county needle exchange programs have broadened efforts to reduce the circulation of unclean syringes, provide testing for infectious diseases such as HIV, and extend resources for substance abuse.

Thanks to the Affordable Care Act (ACA), Americans diagnosed with HIV or at risk of transmission have more meaningful access to healthcare coverage and health insurance. Today, Americans cannot be dropped or denied coverage because of pre-existing health conditions such as HIV. The ACA also gives states the option to expand Medicaid, the largest payer for those who need HIV treatment in the country. The ACA’s investments in community health centers’ Ending the HIV Epidemic Initiative is an integral part of the National HIV/AIDS Strategy.

The ACA has also established new health plan standards or essential health benefits that must be covered under certain health plans. Benefits such as prescription drug services, hospital inpatient care, lab tests, HIV screening, PrEP, and other preventive services aim to preserve the health of those with HIV while mitigating further transmission. Under the ACA, most health insurance plans must provide preventative services, including HIV testing for those aged 15 to 65. PrEP to inhibit HIV is also provided for HIV-negative adults at high risk for contracting HIV. I am proud to co-sponsor the PrEP Access and Coverage Act of 2021, which would expand access to PrEP and work to reduce disparities among those recommended and prescribed the medication through multiple initiatives, including eliminating out-of-pocket costs for the medication.

These investments in an infrastructure to test and treat HIV have helped reduce the spread of HIV/AIDs, but have also been essential in curbing the spread of mpox. It has provided natural points of care for testing, access to treatment, and education to populations also vulnerable to contracting mpox.

However, HIV/AIDS is not an issue the U.S. faces in isolation. Outside the U.S., the global HIV/AIDs epidemic remains a grave public health challenge. In 2021, approximately 38.4 million people lived with HIV across the globe, including 1.7 million children between 0 and 14 years of age. Last year, roughly 1.5 million people contracted HIV. Nevertheless, the international community has made significant process in HIV testing and treatment over recent decades. By the end of 2021, 28.7 million people with HIV, about 75 percent, were receiving ART, while approximately 68 percent of all people with HIV reached viral suppression. In 2021, an estimated 650,000 people died from AIDS-related illnesses worldwide, down from 2 million people in 2004 and 1.4 million in 2010.

Since its inception in 2003, the U.S. President's Emergency Plan for AIDS Relief (PEPFAR) represents an extraordinary commitment to global health, aiming to prevent, diagnose, and treat HIV infections. Over nearly 20 years, the U.S. has invested more than $100 billion in the global response to HIV/AIDS. Because of this, we have made significant inroads in access to testing and ART.

In 2021, PEPFAR provided HIV testing services for more than 50 million people and supported ART for nearly 19 million people. As of today, U.S. leadership through PEPFAR has saved an estimated 20 million lives and prevented millions of HIV infections. PEPFAR now operates in over 50 countries, training hundreds of thousands of healthcare workers and providing critical support to healthcare systems. PEPFAR is a powerful example of sincere, effective, and transparent U.S. global health leadership and cooperation.

The COVID-19 pandemic produced a stark reminder that we must swiftly respond to global health crises. It demonstrates that diseases cannot be easily confined to national borders and regional spheres. Additionally, the COVID-19 pandemic has disrupted HIV treatments and prevention services, separating patients from healthcare providers. Vulnerable populations have also been disconnected from educational and counseling services while economic downturns exasperated social and economic inequalities. Marginalized populations and now more susceptible to HIV infection and less likely to access necessary services than before the pandemic’s onset. Our interconnected world demands American vigilance, conscientiousness, and our strong investment in global health systems.

Our battle against HIV is far from over. The U.S. must continue to define global health leadership and facilitate cooperation with our foreign partners and allies. I commend President Biden for his enduring support for PEPFAR. I also recognize international partnerships, including the Global Fund along with faith-based organizations and civil society for their long-held commitment to eradicating HIV/AIDS. Most importantly, I want to recognize those living with HIV/AIDS across the globe. Your dignity, fortitude, and endurance testify to the extraordinary power of the human spirit. And in accordance with that drive and spirit, we will prevail in this fight.

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