30 Years of the Ryan White CARE Act

The AIDS Institute urges leaders to prioritize public health funding amidst the COVID-19 pandemic.

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On August 18, 1990, President George H.W. Bush signed the Ryan White Comprehensive AIDS Resources Emergency Act (Ryan White CARE Act), which established the largest and most comprehensive program to combat the HIV/AIDS epidemic in the United States. Named after an Indiana teenager who had lost his battle with AIDS just a few months earlier, the Ryan White HIV/AIDS Program now serves more than 530,000 people living with HIV in United States. The program is one of the most successful public health programs in our nation's history, with a viral suppression rate of 87% among clients.

The history of the Ryan White HIV/AIDS Program demonstrates how bipartisan leadership, community engagement, and strategic and robust investments in public health programs can save millions of lives. We celebrate the 30th anniversary of the Ryan White CARE Act at a time of stark contrasts. The Ryan White HIV/AIDS Program's successes are real, yet our nation's larger public health infrastructure has long been neglected and underfunded. The COVID-19 pandemic, which has resulted in the deaths of over 160,000 people in the United States, has shone a spotlight on our failure to create a public health system that protects the country.

"The AIDS Institute calls on the nation to hold our leaders accountable. We have the knowledge, tools, and a plan to end the HIV epidemic, yet the resources needed to accomplish this goal are continually deprioritized by budgets arbitrarily constrained because of decades of pork-barrel politics," said Nick Armstrong, manager of advocacy and government affairs at The AIDS Institute.

The Ryan White HIV/AIDS Program is a core component of the Ending the HIV Epidemic Initiative, but the plan will not be successful unless major investments are made to ensure that newly diagnosed people are connected to care. Last year, the program received an additional $70 million to develop plans to end HIV in the jurisdictions targeted in the Initiative. This year more money is needed to implement those plans, but because of caps implemented by the Budget Control Act, compounded by additional pressure on the program due to COVID-19, there may not be enough money to increase funding for Ryan White or the other public health programs our nation relies on to combat infectious diseases.

"For too long, federal funding has been split into two competing priorities — defense and non-defense programs," said Rachel Klein, deputy executive director of The AIDS Institute. "The

defense budget has enjoyed nearly unfettered increases at the expense of non-defense programs that serve our nation. The COVID-19 pandemic has proven that public health programs directly impact the safety and livelihoods of people in this country, and it is way past due that we rethink how we prioritize federal resources."

In order to honor the legacy of Ryan White and celebrate the 30 years of success for the Ryan White HIV/AIDS Program, The AIDS Institute urges current and future political leaders to reprioritize federal funding to ensure that public health is paramount. Infectious disease prevention is crucial to our national defense, and the public programs that do this work must be considered as such. If we fail to do this, not only will we not achieve the goal of ending HIV in the next 10 years, but we risk future pandemics that will continue to cause preventable deaths in this country.

This article was originally published by The AIDS Institute, a national, nonpartisan, nonprofit organization that promotes action for social change through public policy, research, advocacy and education. For more information and to become involved, Go to TheAIDSInstitute.org for more information.

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