Presidential Candidates Answer 10 Questions From 50 AIDS Groups

March 15, 2016

To better understand how the presidential candidates would tackle the HIV epidemic if elected to the White House, a coalition of more than 50 AIDS groups sent a survey of 10 questions to six presidential hopefuls: Hillary Clinton, Ted Cruz, John Kasich, Marco Rubio, Bernie Sanders and Donald Trump.

On March 15, AIDS United posted the candidate's results. To date, only Clinton and Sanders supplied answers.

As the introduction to the questionnaire explains:

> Candidates responses have been published without edits. As of right now, the candidates who responded to the survey and their responses are published below. The coalition producing the survey has sought to review campaign literature, speeches or other positions of the candidates who have not responded to determine their positions. However, we have not found information that is directly related to the issues of HIV/AIDS discussed in the survey. As such the positions of the candidates who have not answered, in our opinion, are either unclear or undetermined. We urge all remaining candidates to complete the survey and the coalition will publish responses from the other presidential candidates as they are sent in.

The survey is presented by AIDS Foundation of Chicago, AIDS United, amfAR: The Foundation for AIDS Research, Health GAP, Project Inform, Southern AIDS Coalition, Southern HIV/AIDS Strategy Initiative, Treatment Access Expansion Project and United States People Living With HIV Caucus.

In just one example, the survey asked, in part, "What other steps, if any, would you take to help reduce HIV/AIDS stigma and discrimination in the United States?"

Here is Clinton's response:

> To begin with, stigma and discrimination should never be enshrined in our laws. Stigma and discrimination are also dangerous. Stigma discourages those at-risk from being tested, and it makes it harder for those with HIV or AIDS to share their status with loved ones and seek

> treatment.
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> As President, I will work with advocates, HIV and AIDS organizations, and Congress to review and reform outdated and stigmatizing HIV criminalization laws—and I will call on states to do the same. I will continue to aggressively enforce the Americans with Disabilities Act and other civil rights laws to fight HIV-related discrimination. And I will ensure that my Administration releases the latest facts about HIV transmission and risk behaviors to counter unnecessary laws and work to educate prosecutors about the latest science of HIV to reduce unnecessary charges against people with HIV that are not scientifically valid

Here is Sanders's response:

> We should continue and expand the policies that are working. The United States has clearly come a long way in its attitudes towards sexual orientation, gender identity, and health status, but there is still a long way to go. We must ensure that health providers, social services, law enforcement, and all other entities have proper resources and training to handle the varying needs of the community they serve. Schools must be giving students age-appropriate, comprehensive sex education. I echo the Strategy's recommendation that all Americans should have access to scientifically-accurate information regarding HIV infection. For starters, I would direct FDA to update its blood donation policy. The recent update was a step in the right direction, but a blanket one-year ban is still not supported by science. I have joined other Members in asking FDA to implement a risk-based policy for all donors.

You can read their full responses to the entire survey here. And below are the 10 questions from the survey sent to the candidates:

1. U.S. HIV research investments have saved millions of lives and prevented countless new infections. Do you support continued robust HIV research funding to promote treatment advances and efforts to identify a vaccine and a cure? What, if any, changes to the current HIV research agenda or funding levels would you propose?

2. The misuse of and addiction to opioids, such as heroin and prescription pain medications, is a serious and national public health problem with the potential to worsen both the HIV and hepatitis epidemics. Last year this issue became a national news story with one of the worst HIV outbreaks ever recorded in North America among people who use drugs in Indiana in part because their area at the time lacked a comprehensive syringe access program. Do you support increased federal funding to implement evidence-based substance abuse prevention and treatment strategies to help address opioid addiction? Which, if any, of the following do you support to address the opioid addiction epidemic: better prescription practices; deployment of medication to combat overdoses (such as naloxone); medication-assisted treatment (MAT) to treat opioid use disorders; and syringe access?

3. The current National HIV/AIDS Strategy (NHAS or the Strategy) provides a roadmap to guide our collective response to the U.S. HIV/AIDS epidemic from 2015 through 2020. Its goals are to: reduce

new infections; increase access to care and improve health outcomes for people living with HIV; reduce HIV-related health disparities and health inequities; and achieve a more coordinated national response to the HIV/AIDS epidemic. Do you support the continued implementation of the current Strategy? What additional steps, if any, would you take to advance the Strategy further?

4. The White House Office of National HIV/AIDS Policy (ONAP) serves as a liaison between the HIV/AIDS community and the Office of the President. It is the office that primarily develops NHAS and holds agencies accountable for meeting NHAS's goals. Are you committed to maintaining ONAP within the Executive Office of the President?

5. The Ryan White HIV/AIDS Program provides HIV-related services in the United States for those who do not have sufficient health care coverage or financial resources for coping with HIV. The program fills gaps in primary medical care and essential support services not met by other payers. The program is highly successful at linking and retaining people in health care resulting in both improved individual health outcomes and reduction in new HIV infections. Do you support current levels of funding of the Ryan White HIV/AIDS Program necessary to address gaps in care and essential services? Would you consider increases in the future? Will you pledge to work with the HIV community to continue to enhance and adapt the Ryan White Program to support its maximum effectiveness? Are there specific changes to the Ryan White Program that you would seek to implement?

6. Housing Opportunities for Persons with HIV/AIDS (HOPWA) currently provides funding for housing assistance and related supportive services for tens of thousands of low-income people living with HIV and their families. Stable housing is widely recognized as a necessary prerequisite for successful adherence to complex HIV/AIDS drug therapies. Do you support ongoing or increased levels of HOPWA funding? Would you change the HOPWA funding formula so that it is based on the numbers of persons currently living with HIV/AIDS in a particular area rather than on cumulative AIDS cases? Are there changes to the HOPWA program that you would seek to implement?

7. The Affordable Care Act (ACA) has provided previously uninsured individuals with public and private health insurance. Do you support the full and continued implementation of the ACA? If not, what steps would you take to provide health care coverage to those newly insured under the ACA? If you do support the ACA, how would you build upon advances of the ACA to extend health care coverage to those who remain uninsured?

8. The World Health Organization, UNAIDS, and PEPFAR have demonstrated that if the world doubles the number of people on HIV treatment by 2020, we could end the AIDS epidemic by 2030. To achieve this goal, the United States would need to provide an estimated annual increase of $450 million for our bilateral HIV programs for each of the next 4 years. However, these programs have been flat-funded since 2011. Will you commit to ensuring the necessary funding to double the number of people directly supported by the U.S. on lifesaving HIV medicine by 2020?

9. Americans living with HIV are subject to outdated and stigmatizing criminal laws. Will you support current bipartisan legislation in Congress calling for the review of all HIV criminal laws? Would you take Executive action to end the criminalization of Americans based on HIV status? What other steps, if any, would you take to help reduce HIV/AIDS stigma and discrimination in the United States?

10. Military Service - As President and Commander in Chief of the Armed Forces, will you follow suit with our allies/partners such as Israel and South Africa removing the ban to service in the U.S. Armed Forces for people living with HIV and allow all qualified volunteers to serve their Nation regardless of HIV status?

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