Five National HIV Groups Weigh In on Trump's 2020 Budget Proposal

A statement from the Partnership to End HIV, STDs and Hepatitis

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The following is a statement from the Partnership to End HIV, STDs, and Hepatitis on President Trump's A Budget for a Better America, released today. (You can read more about that in POZ here.)

Washington, DC --We welcome the President's request for $291 million in increased funding for HIV prevention, care and treatment at CDC, HRSA's Ryan White Program and Community Health Centers, and the Indian Health Service At the same time, we are troubled by proposed cuts to other health, housing, and safety net programs, particularly the $63 million cut to the Housing Opportunities for People with AIDS (HOPWA) program, which provides critical housing support for people living with HIV. We are also disappointed with proposed cuts to PEPFAR, a program through which the U.S. has provided essential leadership in the global fight against this epidemic.

"Now it's up to Congress to actualize these new investments in domestic HIV, ensure the related syndemics of STDs [sexually transmitted diseases] and viral hepatitis also receive increased investments, and reject the administration's short-sighted cuts to HOPWA. We also call on Congress to shore up the long-standing and bipartisan PEPFAR program and other non-defense discretionary spending for safety net programs, raise budget caps and alleviate sequestration, so that we can accelerate an end of the HIV epidemic in the United States.

"The Partnership has maintained that ending the HIV epidemic is possible but will require increased resources over multiple years. We are pleased that the Administration has backed up their plan with funding requests for testing, surveillance, treatment and for the first time, to pay for Pre-Exposure Prophylaxis (PrEP), a drug that prevents HIV acquisition. But ending HIV will require robust funding for the entire federal HIV portfolio, including programs like HOPWA.

"Only about half of all people living with HIV in this country have achieved viral suppression, and another 15 percent are unaware of their status. Serious disparities persist and must be addressed related to both HIV infections and health outcomes by race, sexual orientation, gender identity and expression, and region.

"Success will also require that we address the related syndemics of STD and viral hepatitis. At least one in 10 new HIV cases in gay and bisexual men can be attributed to an underlying STD,

and more than 25 percent of people living with HIV are coinfected with hepatitis C. Liver-related diseases, which can be caused by untreated viral hepatitis, continues to be a significant cause of death among people living with HIV. Many of these new STD and hepatitis cases can be attributed to the nation's opioid and injection drug crises, with at least 70 percent of new cases of hepatitis C a direct result of injection drug use.

"The President's budget addresses the skyrocketing increases in new cases of infectious diseases related to injection drug use with a $58 million request for Infectious Diseases and the Opioid Epidemic activities, $53 million above FY 2019 This funding will enhance the nation's response to preventing and treating infectious diseases commonly associated with injection drug use, such as HIV, STDs and viral hepatitis, and authorizes CDC to expand surveillance of these opioid-related infectious diseases.

"The success of Ending the HIV Epidemic: A Plan for America not only rests on our full, thoughtful implementation of the initiative, but also on our ability to firmly elevate and enable strong, whole health policies. The Administration must examine and rescind harmful policies that are incongruent with its efforts to end HIV, including those that contribute to bias and discrimination against LGBT people, immigrants and those seeking asylum, as well as populations especially vulnerable to HIV like young gay men of color. Similarly, we will not end the epidemic without ensuring that people living with and vulnerable to HIV have access to health care, whether through Medicaid, Medicare, or private insurance.

"We have the tools to end the epidemic. We now look to Congressional leadership to ensure the resources are made available to achieve this goal."

The Partnership to End HIV, STDs and Hepatitis consists of five preeminent national HIV advocacy organizations -- AIDS United (AU), NASTAD, the National Coalition of STD Directors (NCSD), NMAC, and The AIDS Institute (TAI) -- working to secure the necessary rights, resources, and services for those affected by the HIV, STD and Hepatitis epidemics through sound policies and appropriations at the federal level. The five partners envision a nation fully committed to ending the HIV, STD and Hepatitis epidemics, where all those affected by these diseases have ready access to stigma-free prevention, care and treatment services. Visit www.EndHIVSTDHEP.org.

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