

119TH CONGRESS
1ST SESSION

H. RES. 919

Commemorating and supporting the goals of World AIDS Day.

IN THE HOUSE OF REPRESENTATIVES

DECEMBER 2, 2025

Mr. POCAN (for himself, Mr. FITZPATRICK, Ms. BARRAGÁN, Ms. BROWNLEY, Mr. COHEN, Mr. DAVIS of Illinois, Mr. JOHNSON of Georgia, Ms. KELLY of Illinois, Ms. MOORE of Wisconsin, Ms. NORTON, Mr. QUIGLEY, Ms. SEWELL, Mr. SOTO, Mr. THANEDAR, Mr. TORRES of New York, Ms. VELÁZQUEZ, and Mrs. WATSON COLEMAN) 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

Commemorating and supporting the goals of World AIDS
Day.

Whereas, as of the end of 2024, an estimated 40,800,000 people were living with human immunodeficiency virus (referred to in this preamble as “HIV”) or acquired immunodeficiency syndrome (referred to in this preamble as “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 19,300 deaths among people with

diagnosed HIV in 2022, with the disease disproportionately affecting communities of color;

Whereas, in 2023, over 39,000 people became newly diagnosed with HIV in the United States;

Whereas, according to the Centers for Disease Control and Prevention (referred to in this preamble as the “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 (Public Law 101–381; 104 Stat. 576) (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 and 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 scientific facts;

Whereas, when people living with HIV are on treatment and have an undetectable viral load, they protect their own health and cannot transmit HIV;

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 and AIDS epidemic, in 2003, Congress and the administration of President George W. Bush, with bipartisan support, created the President’s Emergency Plan for AIDS Relief (referred to in this preamble as “PEPFAR”);

Whereas the United States PEPFAR program remains the largest commitment in history by any country to combat a single disease;

Whereas 26,000,000 lives have been saved through PEPFAR;

Whereas, as of September 30, 2024, PEPFAR has supported treatment for approximately 20,600,000 people and has enabled 7,800,000 infants of mothers living with HIV to be born HIV-free;

Whereas, in fiscal year 2024, PEPFAR directly supported testing and counseling for 84,100,000 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 and AIDS pandemic;

Whereas the Global Fund to Fight AIDS, Tuberculosis and Malaria, launched in 2002, has helped provide antiretroviral therapy to approximately 25,600,000 people living with HIV or AIDS and to 648,000 pregnant women to prevent the transmission of HIV and AIDS to

their children and, as of 2025, has saved an estimated 70,000,000 lives;

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 and AIDS, including an approximately 40-percent reduction in new HIV transmissions, an approximately 60-percent reduction in new HIV infections among children, and a reduction of over 50 percent in the number of AIDS-related deaths between 2010 and 2024;

Whereas approximately 31,600,000 people had access to antiretroviral therapy in 2024, compared to only 7,700,000 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 the CDC states that preexposure prophylaxis (referred to in this preamble as “PrEP”) reduces HIV transmission through sexual contact by 99 percent when taken as prescribed, proving that PrEP is critical for HIV prevention;

Whereas, in 2024, approximately 3,900,000 people globally used oral PrEP;

Whereas new, long-acting injectable PrEP options are now available;

Whereas it is estimated that, without treatment, half of all infants living with HIV will die before their second birthday;

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

Whereas, in 2024, there were approximately 1,300,000 new HIV diagnoses globally, structural barriers continue to make testing and treatment programs inaccessible to highly vulnerable populations, and an estimated 5,300,000 people living with HIV globally still do not know their HIV status;

Whereas the CDC reports that over 39,000 people were diagnosed with HIV in the United States in 2023, 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 and Hispanic men, are the population disproportionately affected by HIV in the United States;

Whereas Southern States bear the greatest burden of HIV in the United States, accounting for 52 percent of all diagnoses in 2022;

Whereas 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 1 in 2 people living with HIV in the United States are 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 infections among people who inject drugs, and the crisis has disproportionately affected nonurban areas, where HIV prevalence rates have been low historically and services for HIV prevention and treatment and substance use disorder treatment are limited;

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

Whereas 2025 marks the 22nd anniversary of the PEPFAR program, an initiative launched by President George W. Bush with bipartisan support that has become the primary policy instrument of the United States to address HIV and AIDS globally; and

Whereas, in 2025, commemorations for World AIDS Day will recognize the essential role of community and collective action to sustain and accelerate HIV progress in the global HIV and AIDS response: Now, therefore, be it

1 *Resolved*, That the House of Representatives—

2 (1) encourages people around the world to work
3 to achieve the goal of 0 new human immuno-
4 deficiency virus (referred to in this resolution as
5 “HIV”) transmissions, 0 discrimination, and 0
6 deaths related to acquired immunodeficiency syn-
7 drome (referred to in this resolution as “AIDS”), in
8 order to end the HIV epidemic in the United States
9 and around the world by 2030;

10 (2) encourages Federal, State, and local govern-
11 ments, including their public health agencies, and

1 community-based organizations to share and dis-
2 seminate U=U (Undetectable=Untransmittable) in-
3 formation;

4 (3) commends the efforts and achievements in
5 combating HIV and AIDS through the Ryan White
6 HIV/AIDS Treatment Extension Act of 2009 (Pub-
7 lic Law 111–87; 123 Stat. 2885), the Minority HIV/
8 AIDS Initiative, the Housing Opportunities for Per-
9 sons With AIDS Program, the Centers for Disease
10 Control and Prevention, the National Institutes of
11 Health, the Substance Abuse and Mental Health
12 Services Administration, the Office of Minority
13 Health, and the Office of the Secretary of Health
14 and Human Services;

15 (4) commends the efforts and achievements in
16 combating HIV and AIDS made by the President’s
17 Emergency Plan for AIDS Relief (referred to in this
18 resolution as “PEPFAR”), the Global Fund to
19 Fight AIDS, Tuberculosis and Malaria, and the
20 Joint United Nations Programme on HIV/AIDS;

21 (5) supports continued funding for prevention,
22 care, and treatment services and research programs
23 for communities impacted by HIV and people living
24 with HIV in the United States and globally;

1 (6) urges, in order to ensure that an AIDS-free
2 generation is achievable, rapid action by all countries
3 toward further expansion and scale-up of
4 antiretroviral treatment and prevention programs,
5 including efforts to reduce disparities and improve
6 access to life-saving medications for children;

7 (7) encourages the scaling up of comprehensive
8 prevention services, including biomedical and struc-
9 tural interventions and new long-acting preexposure
10 prophylaxis options, to ensure inclusive access to
11 programs and appropriate resources for all people at
12 risk of contracting HIV, especially in communities
13 disproportionately impacted by the disease, as these
14 groups make up the majority of new HIV diagnoses
15 in the United States and prevention efforts should
16 specifically reach these groups;

17 (8) supports the robust funding of all aspects of
18 research and development of the next generation of
19 treatment and prevention options through the Na-
20 tional Institutes of Health and partner institutions,
21 including the development of a vaccine and cure for
22 HIV, as well as treatment and prevention options for
23 significant HIV comorbidities, such as sexually
24 transmitted infections and tuberculosis;

1 (9) calls for renewed focus on HIV-related
2 vulnerabilities of women and girls, including women
3 and girls at risk for, or who have survived, violence
4 or faced discrimination as a result of the disease;

5 (10) supports continued leadership by the
6 United States in domestic, bilateral, multilateral,
7 and private sector efforts to fight HIV;

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

13 (12) encourages and supports greater degrees
14 of ownership and shared responsibility by developing
15 countries in order to ensure the sustainability of the
16 domestic responses to HIV by those countries; and

17 (13) urges other members of the international
18 community to sustain and scale up their support for,
19 and financial contributions to, efforts around the
20 world to combat HIV.

○