

Fighting the HIV/AIDS Epidemic

Having steered the economy back from the brink of a depression, the Administration is committed to moving the Nation from recession to recovery by sparking job creation to get millions of Americans back to work and building a new foundation for the long-term prosperity for all American families. To do this, the 2011 Budget makes critical investments in the key areas that will help to reverse the decline in economic security that American families have experienced over the past decade with investments in education, clean energy, infrastructure, and innovation.

But even as we meet the challenge of the recession and work to build an economy that works for all American families, we must also change the way Washington does business – ending programs that don't work, streamlining those that do, cracking down on special interest access, and bringing a new responsibility to how tax dollars are spent. The President's Budget provides continued funding for HIV/AIDS programs and supports integrated, evidence-based approaches to prevention, care, and treatment.

To address HIV/AIDS in the U.S. and around the world, the Budget will:

Expand and Focus HIV/AIDS Treatment, Care, and Prevention Activities. The Budget expands access to HIV/AIDS prevention and treatment activities consistent with the President's pledge to develop a National HIV/AIDS Strategy that will focus on reducing HIV incidence, increasing access to care and optimizing health outcomes, and reducing HIV-related health disparities. It focuses HIV testing among high-risk groups, including men who have sex with men, African Americans, and Hispanics. The Budget also increases resources for the Ryan White program to support the care and treatment needs for persons living with HIV/AIDS who are unable to afford health care and related support services, and directs resources to reduce HIV-related health disparities by expanding HIV/AIDS medical services within populations disproportionately impacted by the epidemic. Finally, the Budget enhances funding for collaboration and integration activities to improve overall health outcomes for those with HIV/AIDS and co-infections with tuberculosis, hepatitis, and sexually transmitted diseases.

Increase Funding for the Ryan White HIV/AIDS Program. The Budget includes an increase of \$40 million for care and treatment through the Ryan White HIV/AIDS Program. Of the \$2.3 billion total amount proposed for Ryan White, \$679 million is for Ryan White Part A medical and support services in eligible metropolitan areas and transitional grant areas. \$855 million for the AIDS Drug Assistance Program - this is an increase of \$20 million. In order to support states' provision of HIV/AIDS care, the budget also increases Ryan White Part B (non-ADAP) funding by \$10 million, for a total amount of \$1.3 billion. Ryan White Part C funding increases by \$5 million to support Early Intervention Services programs. Ryan White Part D funding will be \$77.8 million, for grants to community based and non-profit private and public organizations to provide family-centered, comprehensive care to women, infants, and children affected by HIV/AIDS. The funding for Ryan White Part F dental programs increases by \$1.8 million. In addition, the President's Budget also includes a \$2.6 million increase for the Ryan White AIDS Education and Training Centers (AETC). The AETCs are an important part of ensuring the Ryan White Program provides the highest quality of care to people living with HIV and AIDS. To address the disproportionate impact of HIV/AIDS on communities of color, there is a \$7 million increase in funding for Ryan White Minority AIDS Initiative, totaling \$153 million in FY 2011.

Increase Funding for HIV/AIDS Prevention and Service Integration. The President's Budget includes an increase of \$37.9 million for the National Center for HIV/AIDS, Viral Hepatitis, STD and TB Prevention at CDC. This funding will improve the effectiveness of the prevention programs. CDC will launch a multi-year HIV prevention initiative targeting MSM through evidence-based biomedical and

behavioral intervention approaches. The initiative will include an integrated approach to prevent HIV including HIV and STI testing, hepatitis vaccination, co-infection surveillance, social marketing campaigns, and new media approaches. CDC will also devote additional funds to HIV prevention programs specific to transgender populations. The CDC budget for 2011 includes funds to enhance HIV surveillance for high incidence (African Americans and Latinos) in addition to lower incidence (Asian and Pacific Islanders and American Indian and Alaska Native) populations. The President's budget includes an increase of \$31 million for Domestic HIV/AIDS Prevention. CDC proposes \$21 million (an increase of \$1.8 million) for viral hepatitis, to focus primarily on the most common forms of viral hepatitis in the United States: Hepatitis A, B, and C. The CDC budget increases funding for Sexually Transmitted Diseases (STDs) programs by \$6.7 million. CDC is dedicating \$10 million to enhancing and expanding program collaboration and service integration among HIV, TB, hepatitis and STI prevention programs.

Increase Funding for HIV/AIDS Research. The NIH budget increases funding for HIV/AIDS-related research by \$98.7 million, for a total of \$3.2 billion in 2011.

Support Housing Assistance for People Living with HIV/AIDS. The President's Budget includes \$340 million for HUD's Housing Opportunities for Persons with AIDS (HOPWA) program, a \$5 million increase, to address housing needs among people living with HIV/AIDS and their families. The program is designed to provide states and localities with the resources to create comprehensive strategies for providing housing assistance and supportive services such as case management. The Administration recognizes special needs among people living with HIV and AIDS, and HOPWA program benefits are one component of the President's commitment to increasing permanent housing among low-income individuals and families, supporting short-term and transitional housing, and reducing the risk of homelessness.

Increase Funding for the Housing Choice Voucher Program. The President's Budget requests \$19 billion for the Housing Choice Voucher program to help more than two million extremely low- to low-income families with rental assistance to live in decent housing in neighborhoods of their choice. The Budget continues funding for all existing mainstream vouchers and provides flexibility to support new vouchers that were leased and \$85 million in special purpose vouchers for homeless families with children, families at risk of homelessness, and persons with disabilities. The Administration remains committed to working with Congress to focus the goals and objectives of the program, as well as address the program's costly inefficiencies and to fully utilize available funding by alleviating the administrative burdens on the Public Housing Authorities that implement HUD voucher and other programs, and establish a funding mechanism that is transparent and predictable in order to serve more needy families.

Enhance Programs Targeting Health Disparities. The Substance Abuse and Mental Health Services Administration (SAMHSA) Budget includes \$117 million to reduce health disparities in minority communities by delivering high quality substance abuse, mental health, and HIV prevention and treatment services.

Strengthen Anti-Discrimination Efforts and Fight HIV/AIDS Stigma. To strengthen civil rights enforcement against racial, ethnic, sexual orientation, religious, and gender discrimination, the Budget includes \$162 million, an 11 percent increase in funding to DOJ's Civil Rights Division. This investment will help the Division handle enforcement of civil rights protections for people living with HIV/AIDS.

Increase Support for Global AIDS Programs. Funding for Global AIDS increases from \$6.6 billion in FY 2010 to \$6.7 billion in 2011. Total funding for Global Health programs is \$9.6 billion, an increase of \$742 million. President's Emergency Plan for AIDS Relief (PEPFAR), which includes global TB funding, increases from \$6.8 billion to \$7.0 billion.

Total U.S. Government-wide HIV/AIDS Spending increases from \$26 billion to \$27 billion in 2011.

Total HHS Discretionary HIV/AIDS Spending increases from \$6.9 billion to \$7.1 billion in 2011.