112th CONGRESS 
1st Session

H. R. 1462

To address HIV/AIDS in the African-American community, and for other purposes.

IN THE HOUSE OF REPRESENTATIVES

APRIL 8, 2011

Mr. Rangel (for himself, Mr. Rush, Ms. Norton, Mrs. Maloney, Ms. Richardson, Mrs. Christensen, Ms. Clarke of New York, Mr. Jackson of Illinois, Mr. King of New York, Ms. Lee of California, and Ms. Schakowsky) introduced the following bill; which was referred to the Committee on Energy and Commerce

A BILL

To address HIV/AIDS in the African-American community, and for other purposes.

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,

SECTION 1. SHORT TITLE.

This Act may be cited as the “National Black Clergy for the Elimination of HIV/AIDS Act of 2011”.

SECTION 2. TABLE OF CONTENTS.

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TITLE II—MISCELLANEOUS

Sec. 201. Sense of Congress on National Black Clergy HIV/AIDS Awareness Sunday.
Sec. 202. Sense of Congress on Federal agencies with responsibility for preventing, testing for, and treating HIV/AIDS.
Sec. 203. Sense of Congress on Federal Bureau of Prisons procedures for inmates with HIV.

1 SEC. 3. FINDINGS.

Congress finds the following:

(1) It has been estimated that more than 1,000,000 people in the United States are living with HIV/AIDS, and approximately 500,000 of them are Black. Blacks are 8 times more likely to have
AIDS than their White counterparts. Within the Black community, the subpopulation most disproportionately impacted by HIV/AIDS is Black men who have sex with men (MSM) with prevalence rates twice those of White MSM. Black women account for the majority of new AIDS cases among women and are 23 times more likely to be living with AIDS than White women and 4 times more likely than Latinas.

(2) On October 7–8, 2007, 186 Black clergy, consisting of Baptist, COGIC, Methodist, Protestant, AME, and Pentecostal, together with, medical, policy, and AIDS leaders, were brought together by the National Black Leadership Commission on AIDS (NBLCA), the oldest and largest Black AIDS organization of its kind in America, hosted by Time Warner, Inc., with other foundation support, to participate in the National Black Clergy Conclave On HIV/AIDS Policy.

(3) The attendees included faith leaders across traditional, mega, and activist churches representing millions of congregants: the National Medical Association (NMA) representing 30,000 African-American physicians; the National Conference of Black Mayors; the National Caucus of Black State Legisla-
tors; and the Health Brain Trust of the Congressional Black Caucus and key African-American HIV/AIDS advocates from across the United States. This group developed a plan of action that has become the National Black Clergy for the Elimination of HIV/AIDS Act of 2011 to respond to the “on the ground” emergency in prevention, care, and treatment for AIDS in Black America.

(4) In August 2007, the NMA, the oldest and largest organization representing 30,000 African-American physicians, released a consensus report entitled “Addressing The HIV/AIDS Crisis In The African American Community: Fact, Fiction and Policy”; and specifically called on the next President of the United States to declare HIV/AIDS in African-American communities a public health emergency and worked with NBLCA to organize clergy to advocate for the specific needs of Black physicians, their patients, and those at risk in African-American communities; and have pledged to advocate and work with clergy to develop, execute, and implement these initiatives as a part of their rightful role of leadership in African-American communities and culture.

(5) The National Conference of Black Mayors has pledged to work with clergy, medical, and com-
munity leaders to develop and support these initiatives on a local level and to help them to continue to develop a policy agenda leading to the elimination of HIV/AIDS.

(6) The National Caucus of Black State Legislators pledged to take the initiatives herein to their body and develop plans of action for Black State Legislators to work with local clergy, health departments, and CBOs to adopt and implement these initiatives on a national level.

(7) At their April 2008 annual meeting, the National Policy Alliance (NPA), consisting of the Joint Center For Political and Economic Studies (secretariat) and the National Black Caucus of School Board Members, National Black Caucus of Local Elected Officials; the Judicial Council of the National Bar Association; the National Association of Black County Officials; Blacks in Government and the CBC; NCBM; WCM, voted unanimously to support, endorse, and encourage the passage of the National Black Clergy for the Elimination of HIV/AIDS Act of 2011 and to organize their respective members to endorse and support the passage of this bill.
(8) The World Conference of Black Mayors has ratified its support of these initiatives and legislation, and pledged to assist the clergy to take them internationally.

(9) The National Black Leadership Commission on AIDS, the Balm in Gilead, and the Black AIDS Institute have been recognized by the clergy for their tradition and history of service and will work with clergy to conduct community and policy development, linkages to local departments of health and other services, infrastructure development, education media, and fund development activities.

(10) Bishop T.D. Jakes of the Potters House in Dallas, Texas, and Rev. Calvin O. Butts of the Abyssinian Baptist Church in Harlem, New York, and chairman of the National Black Leadership Commission on AIDS have been recognized as the organizers of this group and will help guide and lead the development efforts of fellow clergy through this process.

(11) The National Conclave on HIV/AIDS for Black Clergy calls upon the President, Congress, and corporate America to declare the HIV/AIDS crisis in the African-American community a “public health emergency”.
(12) The Black clergy will aggressively seek to have every person under the sphere of their influence tested for HIV in order to know the person’s status.

(13) The Black clergy will promote HIV/AIDS awareness to ensure that all Black clergy serving in their denominations and other congregations are equipped to address issues related to this disease in a factual and scientifically sound manner.

(14) The Black clergy will use the ABC/D model as a behavioral guideline for prevention initiatives:

(A) A–Abstain.
(B) B–Be Faithful.
(C) C–Use Condoms.
(D) D–Don’t Engage in Risky Behaviors.

SEC. 4. DEFINITIONS APPLICABLE THROUGHOUT ACT.
In this Act, the terms “HIV” and “HIV/AIDS” have the meanings given to such terms in section 2689 of the Public Health Service Act (42 U.S.C. 300ff–88).

TITLE I—DEPARTMENT OF HEALTH AND HUMAN SERVICES

SEC. 100. DEFINITION.
In this title, the term “Secretary” means the Secretary of Health and Human Services.
Subtitle A—Office of Minority Health

SEC. 101. SERVICES TO REDUCE HIV/AIDS IN AFRICAN-AMERICAN COMMUNITY.

(a) In General.—For the purpose of reducing HIV/AIDS in the African-American community, the Secretary, acting through the Director of the Office of Minority Health, may make grants to public health agencies and faith-based organizations to conduct—

(1) outreach activities related to HIV/AIDS prevention and testing activities;

(2) HIV/AIDS prevention activities; and

(3) HIV/AIDS testing activities.

(b) Authorization of Appropriations.—To carry out this section, there are authorized to be appropriated $50,000,000 for fiscal year 2012, and such sums as may be necessary for fiscal years 2013 through 2016.
Subtitle B—Substance Abuse and Mental Health Services Administration

SEC. 111. GRANTS FOR SUBSTANCE ABUSE AND MENTAL HEALTH SERVICES TO PUBLIC HEALTH AGENCIES AND FAITH-BASED ORGANIZATIONS.

(a) IN GENERAL.—The Secretary, acting through the Administrator of the Substance Abuse and Mental Health Services Administration, may make grants to public health agencies and faith-based organizations to—

(1) conduct HIV/AIDS and sexually transmitted disease outreach, prevention, and testing activities that are targeted to the African-American community; and

(2) in connection with such activities, provide substance abuse testing and mental health services to members of such community.

(b) AUTHORIZATION OF APPROPRIATIONS.—To carry out this section, there are authorized to be appropriated $90,000,000 for fiscal year 2012, and such sums as may be necessary for fiscal years 2013 through 2016.
SEC. 112. SERVICES FOR HIV/AIDS AFFECTED YOUTH WHO ARE SEPARATED FROM THEIR FAMILIES.

(a) In General.—The Secretary, acting through the Administrator of the Substance Abuse and Mental Health Services Administration, may make grants to faith- and community-based organizations to provide family reunification services, mental health counseling, HIV/AIDS and sexually transmitted disease testing, and substance abuse testing and treatment to youth who—

(1)(A) have run away from home;
(B) are homeless; or
(C) reside in a detention center or foster care;

and

(2) are HIV positive or at risk for HIV/AIDS, including young men who have sex with men.

(b) Authorization of Appropriations.—To carry out this section, there are authorized to be appropriated $5,000,000 for fiscal year 2012, and such sums as may be necessary for fiscal years 2013 through 2016.

Subtitle C—Centers for Disease Control and Prevention

SEC. 121. PUBLIC HEALTH INTERVENTION AND PREVENTION ACTIVITIES.

(a) In General.—For the purpose of reducing HIV/AIDS, sexually transmitted diseases, tuberculosis, and viral hepatitis in African-American communities, the Sec-
Secretary, acting through the Director of the Centers for Disease Control and Prevention, may make grants to faith-based organizations for public health intervention and prevention activities, including the use of rapid testing in traditional and nontraditional settings to increase the number of individuals who know their status at the point of care and are put into treatment.

(b) PARTNERSHIPS.—In carrying out this section, the Secretary shall encourage grantees to enter into partnerships with public health agencies.

c) AUTHORIZATION OF APPROPRIATIONS.—To carry out this section, there are authorized to be appropriated $100,000,000 for fiscal year 2012, and such sums as may be necessary for fiscal years 2013 through 2016.

SEC. 122. HIV/AIDS PREVENTION AND EDUCATION.

(a) PREVENTION ACTIVITIES.—The Secretary, acting through the Director of the Centers for Disease Control and Prevention, shall expand and intensify HIV/AIDS prevention activities in African-American communities. Such activities—

(1) shall be targeted to specific populations;

(2) shall be comprehensive and accurately based on science and research; and

(3) shall include information on abstinence, the proper use of condoms, risks associated with unpro-
tected sex, and the value of sexual delay particularly
among young adolescents and teenagers.

(b) EDUCATION.—The Secretary, acting through the
Director of the Centers for Disease Control and Preven-
tion, shall expand and intensify HIV/AIDS educational ac-
tivities targeting Black women, youth, and men who have
sex with men.

(c) COORDINATION.—The Secretary shall carry out
this section in coordination with public schools of all levels,
Black organizations, historically Black colleges and uni-
versities, and faith-based organizations and institutions.

(d) AUTHORIZATION OF APPROPRIATIONS.—To carry
out this section, there are authorized to be appropriated
$90,000,000 for fiscal year 2012, and such sums as may
be necessary for fiscal years 2013 through 2016.

SEC. 123. BUILDING CAPACITY OF COMMUNITIES.

(a) IN GENERAL.—The Secretary, acting through the
Director of the Centers for Disease Control and Preven-
tion, shall expand funding to eligible entities to build the
capacity of African-American communities to respond to
HIV/AIDS.

(b) EMPHASIS.—In carrying out this section, the Sec-
etary shall emphasize the provision of funding for policy
development, education, technical assistance, and train-
ing—
(1) to national and local faith-based organizations; and

(2) to organizations with a significant history of working within the African-American community on HIV/AIDS issues, an interdenominational center of seminaries specializing in the training of African-American clergy, and historically Black colleges and universities.

(e) Definition.—In this section, the term “eligible entity” means a national or community-based organization with a history and tradition of service to African-American communities.

(d) Authorization of Appropriations.—To carry out this section, there are authorized to be appropriated $25,000,000 for fiscal year 2012, and such sums as may be necessary for fiscal years 2013 through 2016.

SEC. 124. NATIONAL MEDIA OUTREACH CAMPAIGN.

(a) In General.—The Secretary, acting through the Director of the Centers for Disease Control and Prevention, shall implement a national media outreach campaign that urges all sexually active individuals to be tested for and know their HIV/AIDS status.

(b) Requirements.—The national media outreach campaign under this section shall—
(1) be science-driven and targeted to African-American men, women, and youth; and

(2) give special emphasis to Black women and men who have sex with men.

(c) COORDINATION; CONSULTATION.—The Secretary shall carry out this section—

(1) in coordination with Black media outlets for print, electronic, and Web-based media and Black media associations, including the National Association of Black Owned Broadcasters and the National Newspaper Publishers Association; and

(2) in consultation with an advisory board including representatives of the National Medical Association, faith leaders, elected and appointed officials, social marketing experts, and business and community stakeholders.

(d) AUTHORIZATION OF APPROPRIATIONS.—To carry out this section, there are authorized to be appropriated $10,000,000 for fiscal year 2012, and such sums as may be necessary for fiscal years 2013 through 2016.
Subtitle D—National Institutes of Health

SEC. 131. RESEARCH TO DEVELOP BEHAVIORAL STRATEGIES TO REDUCE TRANSMISSION OF HIV/AIDS.

(a) IN GENERAL.—The Secretary, acting through the Director of the National Institutes of Health, may conduct or support culturally competent research to develop evidence-based behavioral strategies to reduce the transmission of HIV/AIDS within the African-American community.

(b) PRIORITY.—In carrying out this section, the Secretary shall prioritize research that focuses on populations within the African-American community that are at increased risk for HIV/AIDS, including—

(1) men who have sex with men; and

(2) women.

(c) AUTHORIZATION OF APPROPRIATIONS.—To carry out this section, there are authorized to be appropriated $10,000,000 for fiscal year 2012, and such sums as may be necessary for fiscal years 2013 through 2016.
SEC. 132. STUDY OF BIOLOGICAL AND BEHAVIORAL FACTORS.

(a) IN GENERAL.—The Secretary, acting through the Director of the National Center on Minority Health and Health Disparities, may make grants for—

(1) the study of biological and behavioral factors that lead to increased HIV/AIDS prevalence in the African-American community, to be conducted by researchers with a history and tradition of service to Black communities; and

(2) behavioral and structural network research and interventions, in collaboration with other institutes and centers of the National Institutes of Health, indigenous faith and national and community-based organizations with a history and tradition of conducting such research for Black communities, with a special emphasis on Black women and Black men who have sex with men.

(b) AUTHORIZATION OF APPROPRIATIONS.—To carry out this section, there are authorized to be appropriated $100,000,000 for fiscal year 2012, and such sums as may be necessary for fiscal years 2013 through 2016.
Subtitle E—Health Resources and Services Administration

SEC. 141. HEALTH CARE PROFESSIONALS TREATING INDIVIDUALS WITH HIV/AIDS.

Part E of title VII of the Public Health Service Act (42 U.S.C. 294n et seq.) is amended by adding at the end the following:

“Subpart 4—Health Care Professionals Treating Individuals With HIV/AIDS

“SEC. 780. BETTER CARE FOR INDIVIDUALS WITH HIV/AIDS.

“(a) IN GENERAL.—The Secretary, acting through the Administrator of the Health Resources and Services Administration and in consultation with the African-American church community, may award grants for any of the following:

“(1) Development of curricula for training primary care providers in HIV/AIDS prevention and care.

“(2) Training health care professionals with expertise in HIV/AIDS to provide care to individuals with HIV/AIDS.

“(3) Development by grant recipients under title XXVI and other persons of policies for providing culturally relevant and sensitive treatment to individuals with HIV/AIDS, with particular empha-
sis on treatment to African-Americans and children with HIV/AIDS.

“(4) Development and implementation of programs to increase the use of telemedicine to respond to HIV/AIDS-specific health care needs in rural and minority communities, with particular emphasis given to medically underserved communities and the southern States.

“(5) Creation of faith- and community-based certification programs for providers in HIV/AIDS care and support services.

“(6) Establishment of comfort care centers that provide mental, emotional, and psycho-social counseling for people with HIV/AIDS and implement additional protocols to be carried out in the centers that address the needs of children and young adults who are infected with the disease and are transitioning from childhood to adulthood.

“(7) Incentive payments to health care providers supported by the Health Resources and Services Administration to implement HIV/AIDS testing consistent with the guidelines issued in 2006 by the Centers for Disease Control and Prevention entitled ‘Revised Recommendations for HIV Testing of
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Adults, Adolescents, and Pregnant Women in Health-Care Settings’.

“(b) DEFINITION.—In this section, the term ‘HIV/AIDS’ has the meaning given to such term in section 2689.

“(c) AUTHORIZATION OF APPROPRIATIONS.—To carry out this section, there are authorized to be appropriated $100,000,000 for fiscal year 2012, and such sums as may be necessary for fiscal years 2013 through 2016.”.

Subtitle F—Miscellaneous

SEC. 151. REPORT ON IMPACT OF HIV/AIDS IN THE AFRICAN-AMERICAN COMMUNITY.

(a) IN GENERAL.—The Secretary shall submit to Congress and the President an annual report on the impact of HIV/AIDS in the African-American community.

(b) CONTENTS.—The report under subsection (a) shall include information on the—

(1) progress that has been made in reducing the impact of HIV/AIDS in such community;

(2) opportunities that exist to make additional progress in reducing the impact of HIV/AIDS in such community;

(3) challenges that may impede such additional progress; and
(4) Federal funding necessary to achieve substantial reductions in HIV/AIDS in the African-American community.

SEC. 152. STUDY ON STATUS OF HIV/AIDS EPIDEMIC AMONG AFRICAN-AMERICANS.

(a) IN GENERAL.—The Secretary shall—

(1) seek to enter into an agreement with the Institute of Medicine to document, in collaboration with an academic organization which specializes in the identification and reduction of health disparities within the African-American community, all aspects of the HIV/AIDS epidemic among African-Americans, including the role that historical racial or ethnic barriers play in sustaining the epidemic among African-Americans;

(2) submit a report to the President, the Director of the Office of National AIDS Policy Coordination, the Director of the White House Domestic Policy Council, the Director of White House Office of Faith-Based and Neighborhood Partnerships, key Federal agencies, and the relevant committees of the Congress on the status of the HIV/AIDS epidemic among African-Americans in the United States; and

(3) include in such report—
(A) specific recommendations on the implementa-
tion of Federal policies to reduce the burden of HIV/AIDS in the African-American com-

unity; and

(B) a special focus on the Black clergy and
the church as a unique resource in the African-
American community.

(b) Authorization of Appropriations.—

(1) In general.—To carry out this section,

there is authorized to be appropriated $2,000,000

for each of fiscal years 2012 and 2013.

(2) Special rule.—Of the amount of funds

appropriated to carry out this section for a fiscal

year—

(A) 45 percent shall be allocated to the In-
stitutes of Medicine pursuant to the agreement
entered into under subsection (a)(1);

(B) 45 percent shall be allocated to an
academic organization which specializes in the

identification and reduction of health disparities

within the African-American community pursuant
to such agreement; and

(C) 10 percent shall be allocated for ad-
ministrative costs and other activities under
this section.
TITLE II—MISCELLANEOUS

SEC. 201. SENSE OF CONGRESS ON NATIONAL BLACK CLERGY HIV/AIDS AWARENESS SUNDAY.

It is the sense of Congress that—

(1) there should be established a National Black Clergy HIV/AIDS Awareness Sunday on which the Congress and the President call on members of the Black clergy—

(A) to become involved at the local community level in HIV/AIDS testing, policy, and advocacy;

(B) to discuss the HIV/AIDS epidemic with their congregations and the community at-large; and

(C) to urge members of their congregations to reduce risk factors, practice safe sex and other preventive measures, be tested for HIV/AIDS, and seek care when appropriate; and

(2) an appropriate Sunday should be selected for this occasion.
SEC. 202. SENSE OF CONGRESS ON FEDERAL AGENCIES WITH RESPONSIBILITY FOR PREVENTING, TESTING FOR, AND TREATING HIV/AIDS.

It is the sense of Congress that all Federal agencies with a responsibility for preventing, testing for, and treating HIV/AIDS should—

(1) adopt policies for prevention, testing, and treatment that are consistent with the guidelines issued in 2006 by the Centers for Disease Control and Prevention, entitled “Revised Recommendations for HIV Testing of Adults, Adolescents, and Pregnant Women in Health-Care Settings”; and

(2) begin a systemic, aggressive approach to implementing voluntary, routine testing as part of all health exams, including in emergency rooms, clinics, and private physician offices.

SEC. 203. SENSE OF CONGRESS ON FEDERAL BUREAU OF PRISONS PROCEDURES FOR INMATES WITH HIV.

It is the sense of Congress that the Federal Bureau of Prisons should implement procedures for—

(1) voluntary HIV testing as a routine component of inmate care; and

(2) referral to care as a routine component of release planning for inmates with HIV/AIDS, includ-
ing referral to community-based care and faith-based
institutions.