

119TH CONGRESS
1ST SESSION

S. RES. 171

Supporting the goals and ideals of “National Youth HIV/AIDS Awareness Day”.

IN THE SENATE OF THE UNITED STATES

APRIL 10, 2025

Mr. BLUMENTHAL (for himself, Mr. VAN HOLLEN, and Mr. WYDEN) submitted the following resolution; which was referred to the Committee on Health, Education, Labor, and Pensions

RESOLUTION

Supporting the goals and ideals of “National Youth HIV/AIDS Awareness Day”.

Whereas “National Youth HIV/AIDS Awareness Day” is a nationwide observance that calls on people to take action to invest in the health, education, and leadership of young people;

Whereas, more than 40 years into the epidemic, the Centers for Disease Control and Prevention estimates that in the United States more than 1,189,700 people are living with HIV, and 30,635 people were diagnosed with HIV in the United States in 2020;

Whereas, in 2020, youth aged 13 to 24 years composed 20 percent of all new HIV diagnoses in the United States;

Whereas young people living with HIV are the least likely of any age group to be retained in care and have a suppressed viral load;

Whereas 56 percent of young people aged 13 to 24 living with HIV are unaware of their HIV status;

Whereas African-American youth are most impacted by the HIV epidemic, representing 54 percent of new transmissions in young people aged 13 to 24;

Whereas young African-American gay and bisexual men are even more severely affected, representing 53 percent (2,740) of new HIV diagnoses among young gay and bisexual men;

Whereas, in 2020, young gay and bisexual men accounted for 84 percent (5,161) of all new HIV diagnoses in young people aged 13 to 24;

Whereas the National HIV/AIDS Strategy explains the fact that youth experience worse HIV outcomes regarding status awareness, pre-exposure prophylaxis uptake, and health outcomes;

Whereas the National HIV/AIDS Strategy recommends children and young adults with HIV receive tailored and often more intensive medical and support services to support them as they grow and become young adults;

Whereas the Division of Adolescent and School Health within the Centers for Disease Control and Prevention is the only Federal program supporting HIV prevention for adolescents in schools;

Whereas the largest Federal program dedicated to providing care and treatment for people living with HIV was named after Ryan White, a teenager from Indiana who helped

educate the United States about HIV and AIDS in the 1980s;

Whereas the grant program under part D of title XXVI of the Public Health Service Act (42 U.S.C. 300–71 et seq.; commonly referred to as the “Ryan White Part D Program”) is one of the national efforts to link young people living with HIV to medical care and support services;

Whereas the Patient Protection and Affordable Care Act (Public Law 111–148) provides youth, including those living with or impacted by HIV and AIDS, with better access to health care coverage, more health insurance options, additional funding for sex education, and expanded access to Medicaid and prohibits denying people living with HIV access to health care, all of which ensures that more young people living with HIV will receive care; and

Whereas April 10 of each year is now recognized as “National Youth HIV/AIDS Awareness Day”: Now, therefore, be it

1 *Resolved*, That the Senate—

2 (1) supports the goals and ideals of “National
3 Youth HIV/AIDS Awareness Day”;

4 (2) encourages State and local governments, in-
5 cluding their public health agencies, education agen-
6 cies, schools, and media organizations to recognize
7 and support such a day;

8 (3) supports the rights of young people im-
9 pacted by HIV and AIDS to education, prevention,
10 treatment, and care, and to live without criminaliza-
11 tion, discrimination, oppression, or stigma;

1 (4) promotes up-to-date, inclusive, culturally re-
 2 sponsible, and medically accurate information about
 3 HIV, such as information regarding pre-exposure
 4 prophylaxis (commonly referred to as “PreP”), in
 5 sex education curricula to ensure that all young peo-
 6 ple are educated about HIV, as called for in the Na-
 7 tional HIV/AIDS Strategy;

8 (5) supports removal of HIV laws that are sci-
 9 entifically inaccurate and unfairly criminalize young
 10 people living with HIV for behaviors that are con-
 11 sensual or have no risk of transmission;

12 (6) urges youth-friendly and accessible health
 13 care services, especially access to medications such
 14 as PreP, post-exposure prophylaxis, and
 15 antiretroviral therapy without parental consent, to
 16 better provide for the early identification of HIV
 17 through voluntary routine testing, and to connect
 18 those in need to clinically and culturally appropriate
 19 care and treatment as early as possible;

20 (7) supports increasing funding for programs
 21 that support people impacted by and living with
 22 HIV, including the Centers for Disease Control and
 23 Prevention’s Division of Adolescent and School
 24 Health, Division of STD Prevention, and Division of
 25 HIV Prevention, the program under title XXVI of

1 the Public Health Service Act (42 U.S.C. 300ff–11
2 et seq.; commonly referred to as the “Ryan White
3 HIV/AIDS Program”), the Medicaid program, AIDS
4 drug assistance programs, and programs that sup-
5 port medical mentorship, peer navigation, the edu-
6 cation of communities regarding testing and treat-
7 ment options, and people accessing PrEP, and en-
8 sure a smoother transition to adult HIV care;

9 (8) recommends a comprehensive prevention
10 and treatment strategy that empowers young people,
11 parents, public health workers, educators, faith lead-
12 ers, and other stakeholders to fully engage with their
13 communities and families to help decrease violence,
14 discrimination, and stigma toward individuals who
15 disclose their sexual orientation or HIV status;

16 (9) calls for a generation free of HIV stigma in
17 a manner that prioritizes youth leadership and devel-
18 opment in order to ensure youth involvement in deci-
19 sions which impact their health and well-being as
20 well as advance a pipeline for the next generation of
21 HIV and AIDS doctors, advocates, educators, re-
22 searchers, and other professionals; and

23 (10) recognizes the direct impact from harmful
24 legislative efforts seeking to restrict bodily autonomy
25 for young people, such as restrictions on abortion

1 and birth control access and bans on transgender
2 health care, which negatively impact youth access to
3 nonstigmatizing HIV prevention, education, and con-
4 fidential testing and treatment, and increase risk for
5 criminalization.

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