

115TH CONGRESS  
1ST SESSION

# S. RES. 310

Recognizing the importance of a continued commitment to ending pediatric  
AIDS worldwide.

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IN THE SENATE OF THE UNITED STATES

OCTOBER 26, 2017

Mr. CASEY (for himself, Mr. RUBIO, Mr. BLUMENTHAL, Mr. DURBIN, Mr. BOOZMAN, Mr. VAN HOLLEN, Mr. FRANKEN, Ms. KLOBUCHAR, Mr. HATCH, Mr. MARKEY, Mr. ISAKSON, Mr. NELSON, Mr. KING, and Mr. COONS) submitted the following resolution; which was referred to the Committee on Foreign Relations

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## RESOLUTION

Recognizing the importance of a continued commitment to  
ending pediatric AIDS worldwide.

Whereas in 2016 approximately half of the 36,700,000 people living with human immunodeficiency virus (referred to in this preamble as “HIV”) worldwide are women and 2,100,000 are children;

Whereas HIV is a leading cause of death worldwide among women of childbearing age;

Whereas nearly 90 percent of HIV-positive expectant mothers in need of HIV-related services worldwide live in sub-Saharan Africa;

Whereas women around the world rely on essential pre- and post-natal care to provide screening for diseases such as HIV, and to provide care for the health of women and infants;

Whereas the usage of antiretroviral drugs as prophylaxis can reduce the likelihood of mother-to-child transmission of HIV to less than 5 percent;

Whereas in 2005 only 14 percent of women received services for the prevention of mother-to-child transmission (referred to in this preamble as “PMTCT”);

Whereas in 2016, 76 percent of women received PMTCT services;

Whereas, since 2001, the number of children born HIV-positive has decreased by more than half;

Whereas, despite increased efforts by the United States and countries around the world, over 400 children were born HIV-positive each day in 2016;

Whereas 90 percent of children with HIV live in sub-Saharan Africa;

Whereas in 2016 only 43 percent of children with HIV received antiretroviral therapy, far below the percentage of adults receiving antiretroviral therapy;

Whereas, without treatment, half of children with HIV will die by their second birthday, and 80 percent by their fifth birthday;

Whereas, in 2016, 120,000 children died of causes related to acquired immune deficiency syndrome (referred to in this preamble as “AIDS”);

Whereas, in 2016, 22 percent of new HIV infections occurred in young women aged 15 to 24;

Whereas, in sub-Saharan Africa, young women account for 75 percent of new annual HIV infections among adolescents;

Whereas AIDS is a leading cause of death among adolescents globally;

Whereas research efforts at the National Institutes of Health have led to extraordinary breakthroughs for children infected with and at risk for HIV;

Whereas in 2002 the United States began investing in PMTCT services by establishing the United States International Mother and Child HIV Prevention Initiative;

Whereas, since 2002, the Global Fund to Fight AIDS, Tuberculosis and Malaria has supported programs that provided 4,200,000 HIV-positive mothers with antiretroviral drug prophylaxis for PMTCT;

Whereas in fiscal year 2016, the United States President's Emergency Plan for AIDS Relief (referred to in this preamble as "PEPFAR") supported HIV testing and counseling for more than 11,500,000 pregnant women, and provided antiretroviral drug prophylaxis for PMTCT, allowing nearly 2,000,000 babies to be born free of HIV;

Whereas in 2014 PEPFAR announced the Accelerating Children's Treatment Initiative, a 2-year effort that would double the number of HIV-positive children receiving treatment in 10 high-burden countries;

Whereas the PEPFAR DREAMS initiative is working to reduce new HIV infections in girls and young women in 10 sub-Saharan countries;

Whereas every mother should have the opportunity to fight for the life of her child; and

Whereas every child and adolescent should have access to medicine to lead a long and healthy life: Now, therefore, be it

1       *Resolved*, That the Senate—

2           (1) recognizes that the prevention of mother-to-  
3       child transmission of human immunodeficiency virus  
4       (referred to in this resolving clause as “HIV”) is  
5       critical to stopping the spread of HIV worldwide;

6           (2) applauds the leadership of the United  
7       States for efforts to eliminate new pediatric HIV in-  
8       fections and to expand pediatric treatment through  
9       programs and research;

10          (3) recognizes that for more than 13 years, the  
11       fight to eliminate pediatric HIV worldwide has been  
12       a priority in the response of the United States to  
13       global acquired immune deficiency syndrome (re-  
14       ferred to in this resolving clause as “AIDS”), and  
15       calls on the leadership of the United States in this  
16       area to continue;

17          (4) supports providing adolescents with the evi-  
18       dence-based approaches necessary to prevent new  
19       HIV infections;

20          (5) supports providing women and children with  
21       HIV counseling and testing services where prac-  
22       ticable, and scaling up access to services and medi-  
23       cines that prevent mother-to-child transmission of

1 HIV and ensure HIV-positive mothers survive and  
2 thrive;

3 (6) supports expanding treatment for HIV for  
4 children and adolescents, including providing greater  
5 access to more efficacious antiretroviral drug regi-  
6 mens, age appropriate services, and support for the  
7 caregivers of children and adolescents; and

8 (7) recommits the United States—

9 (A) to lead the world to end AIDS;

10 (B) to eliminate new pediatric HIV infec-  
11 tions worldwide; and

12 (C) to support women, children, adoles-  
13 cents, and families infected and affected by  
14 HIV.

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