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(Original Signature of Member)

119TH CONGRESS
1ST SESSION

H. RES. _____

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

IN THE HOUSE OF REPRESENTATIVES

Ms. MCCLELLAN submitted the following resolution; which was referred to the Committee on _____

RESOLUTION

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

Whereas approximately 53 percent of the 40,800,000 people living with the human immunodeficiency virus (HIV), the pathogen that causes the acquired immune deficiency syndrome (AIDS), worldwide are women and girls, and 1,400,000 are children in 2024;

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

Whereas AIDS is a leading cause of death among adolescent girls globally;

Whereas women around the world rely on essential prenatal and postnatal care to provide screening for diseases such as HIV and care for their health and the health of their infants;

Whereas, when antiretroviral drugs are used as prophylaxis, mother-to-child transmission of HIV can be reduced to less than 5 percent;

Whereas, in 2005, only 17 percent of pregnant and breastfeeding women living with HIV were receiving treatment and services for prevention of mother-to-child transmission and that number rose to 84 percent in 2024;

Whereas 45 percent of new HIV infections globally are among women and girls in 2024;

Whereas, globally, 67 percent of infants born to pregnant women living with HIV receive a virologic test within the first 2 months of birth;

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

Whereas, in 2018, nearly 90 percent of pregnant women living with HIV in need of HIV services worldwide live in sub-Saharan Africa;

Whereas 86 percent of children living with HIV are in sub-Saharan Africa;

Whereas, despite increased global and United States efforts, an estimated 83 percent of the 120,000 children who become infected with HIV in 2024 were in Sub-Saharan Africa;

Whereas progress in meeting the global 95–95–95 treatment targets by 2030, which calls for 95 percent of those living with HIV to know their status, 95 percent of those who know their status to be on treatment, and 95 percent of those on treatment to be virally suppressed and sustained, is slower among children (63 percent- 87 percent- 86 percent) than adults (87 percent- 89 percent- 94 percent);

Whereas 55 percent of children living with HIV were on life-saving antiretroviral therapy in 2024 compared to 78 percent of adults globally;

Whereas 75,000 children died of AIDS-related causes in 2024;

Whereas, every week, approximately 4,000 adolescent girls and young women aged 15 to 24 years became infected with HIV globally in 2023, and 3,100 of these infections occurred in Sub-Saharan Africa.

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

Whereas the United States began investing in prevention of mother-to-child transmission (PMTCT) services in 2002 with the announcement of the United States International Mother and Child HIV Prevention Initiative;

Whereas, in 2022, The Global Alliance to End AIDS in Children by 2030, which includes international partners like the President’s Emergency Plan for AIDS Relief (PEPFAR) and the Global Fund to Fight AIDS, Tuberculosis and Malaria (Global Fund), was established to address the growing treatment gap between adults and children;

Whereas the first phase of the Global Alliance focuses on 12 of the most affected countries, many of whom have achieved strong coverage of lifelong antiretroviral therapy among pregnant and breastfeeding women since the establishment of the Alliance;

Whereas, in January 2024, the United States celebrated the 21st anniversary of the establishment of PEPFAR;

Whereas, in fiscal year 2023, PEPFAR supported HIV testing and counseling for more than 71,100,000 people and since the program's inception the provision of antiretroviral drug prophylaxis to prevent mother-to-child transmission has allowed nearly 5,500,000 babies to be born HIV free;

Whereas, in 2023, the Global Fund supported programs that provided 695,000 pregnant women living with HIV with antiretroviral drug prophylaxis to prevent the transmission of HIV to their children;

Whereas, in September 2025, the Department of State included the goal of ending mother-to-children transmission of HIV in several high-burden countries in its new Global Health Strategy;

Whereas, with the Department of State support for rollout of the new long-acting HIV prevention drug lenacapavir, women will soon have the option of receiving two injections over a 1-year period of time to protect themselves and their children from acquiring HIV across pregnancy, labor and delivery, and breastfeeding;

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 medicines to lead a long and healthy life: Now, therefore, be it:

1 *Resolved*, That the House of Representatives—

2 (1) recognizes that the prevention of mother-to-
3 child transmission of HIV is critical to stopping the
4 spread of HIV worldwide;

5 (2) recognizes that the fight to eliminate pedi-
6 atric HIV worldwide has been a priority area for the
7 United States in its global AIDS response for more
8 than over two decades and calls on this leadership
9 to continue;

10 (3) supports providing adolescents and young
11 women with the evidence-based approaches necessary
12 to prevent new HIV infections;

13 (4) supports providing women and children with
14 HIV counseling, testing services, and access to new
15 long-acting prevention methods where possible, and
16 scaling up access to services and medicines that pre-
17 vent mother-to-child transmission of HIV and ensure
18 pregnant women living with HIV survive and thrive;

19 (5) supports scaling up of treatment for HIV
20 for children and adolescents including greater access
21 to more efficacious antiretroviral drug regimens,
22 age-appropriate services, and support for their care-
23 givers;

1 (6) supports for the 4 pillars of collective action
2 the Global Alliance including;

3 (A) closing the treatment gap for pregnant
4 and breastfeeding adolescent girls and women
5 living with HIV and optimizing continuity of
6 treatment;

7 (B) preventing and detecting new HIV in-
8 fections among pregnant and breastfeeding ado-
9 lescent girls and women;

10 (C) accessible testing, optimized treatment,
11 and comprehensive care for infants, children,
12 and adolescents exposed to and living with HIV;
13 and

14 (D) addressing rights, gender equality, and
15 the social and structural barriers that hinder
16 access to services;

17 (7) applauds the United States leadership on
18 efforts to eliminate new pediatric HIV infections and
19 to scale-up pediatric treatment through programs
20 and research; and

21 (8) encourages PEPFAR to continue its leader-
22 ship through the creation of a standalone pediatric
23 HIV strategy that is in alignment with—

1 (A) the priority actions for children as de-
2 fined in the standalone pediatric AIDS strat-
3 egy; and

4 (B) the goals of the Global Alliance to End
5 AIDS in Children by 2030; and

6 (9) reaffirms the United States commitment to
7 lead the world to the end of AIDS, to eliminate new
8 pediatric HIV infections worldwide, and support
9 women, children, adolescents, and families infected
10 and affected by HIV.