2020 Presidential Candidate HIV Questionnaire

1. Earlier this year, the Trump administration introduced their plan for ending the HIV epidemic in the United States by 2030. While the HIV community welcomes the increased financial resources and attention being paid to HIV by the administration, we also understand that to end the HIV epidemic we must address the social determinants of health and inequities that have led to a high-burden of transmission for HIV, STDs, and associated illnesses within vulnerable populations. Please describe what you would do to increase access to HIV prevention and treatment services, and outline your approach for addressing the social determinants of health and promoting racial justice.

To increase access to HIV prevention and treatment services, Beto recognizes that we must address some of the societal barriers and discrimination facing people with HIV. As President, Beto will ensure that health insurance and health care includes access to HIV prevention and treatment, by fully enforcing the nondiscrimination protections in the ACA and by including protections in any new system of universal health insurance. He will ensure individuals in prison can receive HIV treatment. Further, he recognizes that we must tackle price gouging by drug companies so treatments like PrEP are accessible. To address the societal barriers to care, Beto will invigorate the Presidential HIV/AIDS Advisory Council; ban the practice of discharging HIV+ servicemembers; direct the Equal Employment Opportunity Commission and the other federal agencies to collect data on and prioritize the enforcement of laws, such as non-discrimination laws, involving LGBTQ+ individuals and those with HIV.

2. U.S. HIV research investments have saved millions of lives, prevented countless new transmissions of the virus and placed us on a potential path to end the HIV epidemic. Do you support increasing dedicated HIV research funding to promote treatment advances, prevention efforts, and attempts to identify a vaccine and a cure?

What, if any, changes to the current HIV prevention and research funding levels would you propose?

The federal research dedicated to HIV, led by the National Institutes of Health, but supported by numerous other federal agencies has changed countless lives, both here in the United States, and around the world. An O’Rourke Administration will support these research efforts with resources needed to keep innovating and making progress towards ending the HIV epidemic. As President, Beto will continue to support programs, like the Ryan White HIV/AIDS program that provides care for uninsured individuals with HIV, while working towards the promise of universal health care.

3. The opioid and HIV epidemics are two of the most pressing public health challenges of our time and they are increasingly intertwined. With 41,000 new cases of hepatitis C in the United States in 2016, of which, up to 70% occurred among people who use drugs, injection drug use is continuing to be a major factor fueling the domestic HIV epidemic. Do you support the use of federal funds to implement evidence-based substance misuse prevention and treatment strategies, including federal funding for the syringes provided at syringe exchange programs, to help address opioid addiction? What will your strategy be to extend medication to combat overdoses (i.e. naloxone) and medication-assisted treatment (MAT) to reach everyone experiencing opioid disorders?

Yes, Beto supports the use of federal funds to implement substance misuse prevention to combat the opioid epidemic. Winning the fight against opioid addiction requires that we be bold and unafraid. He
would treat addiction like a public health crisis and not a matter of criminal justice. Beto also believes we should hold pharmaceutical companies who have engaged in misrepresentation accountable. Beto will support research designed to increase options for those dealing with chronic pain, recognizing that some of those suffering can only receive relief from opiates.

4. The Ryan White HIV/AIDS Program provides care and treatment for people living with HIV in the United States who are uninsured or underinsured and has demonstrated its success at linking and retaining people in care, improving both individual health outcomes for enrollees, and a reduction in new HIV transmissions. Do you support increased funding for the Ryan White Program and for networks of people living with HIV that provide peer support and combat stigma? What changes, if any, would you make to the program and its funding?

Beto believes we must ensure all Americans have access to universal, guaranteed, high-quality health care. As we work towards that goal, he supports increased funding for the demonstrably effective Ryan White Program and for networks of people living with HIV that provide peer support and combat stigma. The program is critical in our current healthcare environment, in which so many are uninsured, underinsured, and lack the funds to cover deductibles and co-pays. Ensuring that this program continues to thrive in accomplishing its critical mission must happen as part of a larger fix to our health care system, so that all Americans can receive the health care to which they are entitled.

Beto believes that until the current healthcare system ensures that treatment is available and accessible for all Americans, we must expand the program to ensure that funding reaches those communities where the need is strongest and those populations which are underserved. These issues, like so many others, hit hardest on those living in poverty, people of color, and underserved communities. Beto would support additional funding for Special Projects of National Significance and AIDS Education and Training Centers, covered by Part F of the Program and for the Minority AIDS Initiative. He is committed to increasing HIV care to minority populations and training to expand the number of providers in underserved communities. An O’Rourke Administration would work to ensure the equality of patient outcomes and service delivery infrastructure throughout the country. Beto believes we must remove the stigma associated with HIV and its treatment. He would also encourage testing, and ensure the availability of medications which can prevent new infection, and support those living with HIV. Beto supports increased flexibility in the use of funds allocated to allow for greater funding of PrEP. Having a medication which can prevent HIV infection, and failing to educate our families and communities about it, is both a moral failure and a public health failure of the highest magnitude.

5. Although millions of individuals have been insured through the implementation of Medicaid expansion and the Affordable Care Act, lack of access to healthcare is still a major driver of the HIV epidemic. If elected, how will you ensure that all people living with and affected by HIV have access to affordable healthcare? Please state your position on the ACA, and outline your views on the best ways to extend high-quality, low-cost healthcare to everyone, regardless of age, income, immigration status, or pre-existing condition—including in states that have not expanded Medicaid.

On Day One, Beto would enforce the nondiscrimination provisions in the ACA and ensure access to the full spectrum of care to those living and affected by HIV. Beto would equal access to health insurance and health care, including hormone and other gender-affirming treatments and HIV prevention and treatment, by creating a universal health care system with explicit protections against discrimination and
bans on exclusions for transition-related care, and by tackling price gouging by drug companies so critical and effective treatments like PrEP are accessible and affordable.

6. **The Housing Opportunities for Persons with HIV/AIDS (HOPWA) program is the sole dedicated funding source for housing assistance and related supportive services for low-income people living with HIV and their families. Currently, HOPWA remains chronically underfunded despite the fact that housing has a greater impact on health outcomes for people living with HIV than any other factor, including demographics, substance use, mental health, or access to social services. Do you support increased funding for the HOPWA program and other programs that provide housing for people living with HIV?**

Beto strongly supports increased funding for the HOPWA program and other programs that provide housing assistance for people living with AIDS who are in need of that assistance, because it is the right thing to do and reflects our nation’s values, but also because it is smart thing to do from a budgetary perspective. We know that people living with HIV who are homeless (like other homeless Americans) are less likely to have access to healthcare, are less likely to have access to and adhere to their prescriptions, and are more likely to use the emergency room as their health care provider. Beto will ensure the necessary resources for programs such as HOPWA and others, with proven records of success, to address homelessness and housing insecurity, so that low-income people living with HIV do not lose their homes.

Beto believes we must also recognize the discrimination facing older Americans who, despite having started to live openly and honestly, are forced to hide their sexual orientation as they try to access those assisted living facilities or nursing homes in which homophobia is still prevalent. Recognizing that nearly half of people living with HIV are more than fifty years old, we must ensure that these Americans are not forced to hide their health status or sexual orientation for fear of losing their access to nursing home facilities.

7. **What will you do to prohibit discrimination based on sexual orientation, racial and gender identity in housing, healthcare, the workplace, the legal system, privately-owned businesses, and access to federal benefits?**

Beto enthusiastically and without reservation supports the Equality Act, and co-sponsored the bill as a member of Congress. An O’Rourke Administration would work aggressively, across all federal agencies including the Department of Justice to ensure that discrimination based on sexual orientation, and racial and gender identity, is made illegal in all spheres of public life. Beto would create an Interagency Task Force on LGBTQ+ Nondiscrimination with the goal of ending discrimination in federal programs and actions. Beto would appoint judges and executive-branch officials, including openly LGBTQ+ appointees, who have a demonstrated record of supporting the full civil rights of every single person.

8. **Americans living with HIV continue to be subject to stigma and discrimination, and many are subject to outdated and stigmatizing criminal laws where they are susceptible to enhanced sentencing based upon their HIV status. These laws violate the human rights of people with HIV, sometimes imposing extremely severe punishments on people with no intent to harm and behaviors that pose no risk of HIV transmission. Moreover, these statutes discourage those at risk from learning their HIV status and subsequently beginning treatment to extend their longevity and quality of life. Will you work to pass a law that ends the criminalization of HIV status? Will you work to extend federal protection from discrimination based on HIV status? What other steps, if
any would you take to help reduce HIV/AIDS stigma and discrimination in the United States?

There are many necessary steps towards eliminating the stigma and discrimination which people living with HIV confront. Our HIV policies must be based on science and not fear or discrimination. Medical science tells us that undetectable means untransmittable (U = U), and Beto understands that medications can allow a person living with HIV to achieve undetectable levels. Ensuring we educate the public around HIV, and treating individuals with HIV with respect is our best bet towards destroying the stigma associated with HIV. That stigma, and the discrimination suffered by those with HIV, hinder discussions about HIV prevention and PrEP and drive people away from testing and treatment – and so do laws criminalizing HIV. Science tells us that laws criminalizing HIV status do not achieve real health benefits, a position with which the American Medical Association and the Infectious Diseases Society of America agree. Beto supports the REPEAL HIV Discrimination Act and he supports federal protection from discrimination based on HIV status.

9. Given the advances in medical treatment available to all servicemembers for over two decades, do you support lifting unnecessary restrictions that prevent individuals living with HIV from enlisting, being commissioned as an officer, or deploying in the Armed Forces of the United States?

Yes. Beto believes anyone who is brave enough to volunteer to serve our country should be allowed to do so, and the restrictions that prevent those living with HIV from serving to their full capability are the vestiges of stigma and discrimination which we must eradicate. Beto would ban the practice of discharging service members living with HIV and would overturn “Deploy or Get Out.”

10. Despite the existence of antiretroviral medications that can render the viral load of a person living with HIV undetectable (and therefore untransmittable), and prevent transmission of the virus through pre-exposure prophylaxis (PrEP) many people in need of such medications cannot access them because of their high cost. In other instances, our insurance premiums go up, and/or taxpayers are stuck holding huge costs. If elected, how will you reduce excessive drug prices in the United States, through executive action, as well as legislation? Will your plan make use of government purchasing power to negotiate lower prices and work towards policies similar to all other developed countries to limit abuses of the patent monopoly system?

Beto believes we must tackle price gouging by drug companies so treatments like PrEP are accessible to all Americans. That the United States has some of the highest drug costs in the world is unacceptable, and reflects a broken system. As President, Beto will take important steps to lower the cost of prescription drugs, allowing drug importation from Europe and Canada; modifying regulations that get generic drugs on the market faster; ensuring universal, guaranteed, high quality health care for all Americans through Medicare for America, which also limits out of pocket costs based on income; and allowing Medicare to negotiate for drugs. Beto would also take on pharmaceutical companies engaged in price gouging, like Truvada, which can reduce the risk of HIV transmission by more than 99%. Despite its importance for so many, it is now $1,600 per month when it used to be $6.

11. According to the CDC, an estimated 14% of transgender women are living with HIV, with an estimated 44% identifying as Black/African-American, 26% Hispanic/Latinx, and 7% White. The number of transgender people who received a new HIV diagnosis was 3 times the national average. If elected, would you support a reinterpretation of Section 1557 of the ACA as covering transgender people and champion the passage of the Equality Act? How would you protect the rights, well-being, and lives of transgender people living in this country, while ensuring that they
receive the healthcare and housing necessary to be virally suppressed?

Beto is proud of his long history of support for members of the transgender community. He has spoken widely, in both urban and rural communities, about the assault on the rights of the transgender community, disguised as Texas’ “bathroom bill.” He called upon the Trump administration to withdraw of nominee of Jeff Mateer as a federal judge, after he called members of the transgender community “part of Satan’s plan.” As President, he will protect transgender individuals, in particular transgender women of color, from violence by directing his Department of Justice to investigate the crimes against transgender people, specifically transgender women of color; by ensuring law enforcement agencies receive training related to implicit bias, use of force and accurately reporting the gender of victims; by reinstating the Bureau of Prisons’ (BOP) “Transgender Offender Manual” to ensure safe housing for transgender people in BOP custody; and by modernizing federal law to allow transgender people to update their name and gender on identity documents.

Beto would fully enforce Section 1557 of the ACA, which would ensure coverage for transgender people and would be proud to sign the Equality Act into law. Beto would ensure that LGBTQ+ people have equal access to health insurance and health care, including hormone and other gender-affirming treatments and HIV prevention and treatment, by creating a universal health care system with explicit protections against discrimination and bans on exclusions for transition-related care.

12. Many documented and undocumented immigrants living with and affected by HIV are refraining from seeking out HIV and general medical care due to fear of deportation or denial of citizenship. Please state how you would encourage this population to be screened for HIV and initiate treatment if diagnosed, and how to ensure healthcare spaces are safe spaces for immigrants and health providers from immigration enforcement? What are your views on potential changes to the “public charge” rule that would make any use of a very wide range of benefits (including healthcare programs such as the Affordable Care Act marketplace subsidies, Children’s Health Insurance Program and potentially some Medicaid benefits) detrimental to an immigrant’s chances at becoming a U.S. citizen?

As President, comprehensive immigration reform will be a top priority for an O’Rourke Administration, and Beto’s plan for immigration reform would enable undocumented individuals to pursue earned citizenship, and obtain insurance. Beto believes that while we hospitals rightly provide care to everyone, the cost is shifted on to other consumers, and it is in the interest of all Americans to provide a pathway to insurance for those without it.

13. The escalating pace of the introduction and passage of federal and state bills that restrict legally protected health care services, including abortion and some forms of contraception, is already having adverse effects on young people, women, and people living with HIV. How will you ensure people of childbearing potential that, regardless of income, geography, or any other stigmatizing restriction, they will have unfettered access to all of their needed sexual and reproductive health services? Additionally, how will you communicate the government's full support of sexual and reproductive health, rights, and justice of all people living with HIV and those who may be vulnerable to contracting HIV?

Beto believes health care is a right, and not a privilege. Reproductive health care services and the right to control one’s own body is a fundamental part of health care. An O’Rourke administration will implement a health care system which ensures every American the right to quality affordable health care, including
reproductive health care. Communicating the government’s support of the rights of and justice for those living with HIV and those who may be vulnerable to contracting HIV requires a President who is not afraid of talking about LGBTQ+ people and the issues they confront, and who understands that our country is made stronger by our diversity. Beto understands we can prevent HIV infection and treat those living with HIV, if we are not afraid to talk about LGBTQ+ people and sex, if we make medications available, accessible, and affordable, and if we treat drug addiction as a health care issue.

14. In recent years, the need for comprehensive prison and justice system reforms that focus on rehabilitation and the wellbeing of those who are incarcerated rather than punishment has become clearer than ever. What will you do to ensure that incarcerated people living with HIV and those who may be vulnerable to contracting HIV receive uninterrupted, unfettered and fully funded access to healthcare and medications for treatment both while they are in prison or jail, and when they are released for re-entry into their communities?

Beto recognizes that we must reform our criminal justice system to end the practices that harm the LGBTQ+ community, which includes ensuring all incarcerated individuals receive the healthcare they need, including HIV treatment, while in prison.

15. Ending the HIV epidemic in the United States is also dependent on ending the HIV epidemic across the globe. Traditionally, the US has taken a leadership role in funding for both PEPFAR and The Global Fund, but recent years have been characterized by flat-funding and the threats of massive cuts in funding for fighting these pandemics. Would you commit to launch a stepped up effort to end the deadliest pandemics, including AIDS, and prepare for and prevent epidemic threats of the future with expanded results-oriented programming, doubled US investment in fighting pandemics, and US leadership to rally the world to join us in this effort?

Beto believes the United States must reassert itself as a global leader on health care issues. We must step up our efforts through research and investment, to end the deadliest pandemics, including AIDS. We must prepare for and prevent epidemic threats. Further, Beto recognizes that we must restore normalcy to our international relations, which includes once again becoming a dependable partner to our allies, and demonstrating leadership in those matters which threaten the entire planet, including the existential threat of climate change.