

# AIDS United 2018 Midterm Election Candidate Questionnaire

Q23. Right now, we are closer to ending the HIV epidemic in the United States than at any time in almost four decades. To better understand how Congressional candidates will work to build on the progress we have made and ultimately end the HIV epidemic, AIDS United has created this questionnaire. We ask that your campaign review and complete this survey by close of business on September 24th. This will allow us ample time to compile and release the results well in advance of the general election in November. We will publish the responses without edits. Thank you very much for your participation in this questionnaire.

Q1. Candidate First Name

Russell

Q20. Candidate Last Name

Lambert

Q2. State Where Candidate is Running

California District 46

Q21. Congressional Chamber in Race

- Senate  
 House

Q22. Candidate District

46

Q3. Party Affiliation

- Democrat  
 Republican  
 Independent  
 Other

Q4. Name of Party Being Represented

*This question was not displayed to the respondent.*

Q5. What are your views on the federal government's role in funding or supporting HIV research into potential treatment advances, prevention efforts, and attempts to identify a vaccine and a cure? What, if any, changes to the current HIV prevention and research agenda or funding levels would you propose?

HIV and AIDS is a social and public issue, that involves all US Americans. I would work in Congress, and with our President, in creating laws, designed for the education of, preventative treatment, and to identify a cure for, Aids and HIV, and other STD's. Americans, and other nations, can benefit from our research.

Q6. What is your position on the use of federal funds to implement evidence-based substance abuse prevention and treatment strategies to help address opioid addiction? For example, what is your position on the use of medication to combat overdoses (i.e. naloxone) or medication-assisted treatment (MAT) to treat opioid disorders? Syringe services programs and safer injection facilities?

In my opinion, the prescription of drugs, is directed under the authority and oversight by Doctors. I feel we need more education to prescribing doctors, and that the manufactures are merely supplying the demand caused by doctors. We have to go after the source, and correct any deficiencies.

Q7. The Ryan White HIV/AIDS Program provides HIV-related services in the United States for those 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. What is your view of the current funding levels allocated to the Ryan White Program? What changes, if any, would you make to the program and its funding?

HIV and AIDS is a social issue that involves all US Americans. Since this is an issue that involves US citizens, we need to continue the medical issuance to those in need of assistance, and we need to continue the research and development of a cure.

Q8. What is your view of the Housing Opportunities for Persons with HIV/AIDS (HOPWA) program, which provides funding for housing assistance and related supportive services for low-income people living with HIV and their families. What changes, if any, would you make to the HOPWA program?

Low Income U.S. American families are given the opportunity for Welfare assistance. Illegal aliens drain these resources. I already have a plan in place, that prosecute and remove those illegally on welfare, and thus, I would increase benefits to those Americans in need of these benefits. Also, any person capable of working, even if they have AIDS or HIV, needs to be offsetting these benefits with labor, contributing back in our system of taxation.

Q9. The Affordable Care Act (ACA) has provided previously uninsured individuals with public and private health insurance. Please state your position on the ACA and outline your views on the best ways to expand coverage for people who cannot afford it or were denied coverage for some other reason (be it immigration status, pre-existing condition, etc).

The Obama Care, ACA, in my opinion, removed the freedom of Constitutional choice to the American people by placing "Forced" issuance of "Penalty" associated with Government ran insurance. This is Dictatorship is its highest form. I am totally against it. Low Income people already have Welfare. The middle class, can seek choice, and the Upper Class already has insurance. What the citizens of the U.S. needs, is more competition and choice among health care providers, we need less regulations and restrictions, and we need more prosecutions for fraud and waste associated with health care. These ideas, when implemented , will drive the cost of health care lower, and more affordable.

Q10. What is your position on work requirements for Medicaid enrollees? What changes, if any, would you make to the Medicaid program?

Welfare, if anyone has the ability to contribute, to work, to participate, yes. Without Discrimination, those on welfare, that can work, should work, based on the individuals ability. Cleaning streets, parks, janitorial services, to the public sector, to offset tax payer dollars, yes. I am fully in support of Work/Welfare programs.

Q11. Americans living with HIV are subject to outdated and stigmatizing criminal laws. Will you co-sponsor legislation in Congress calling for the review of all HIV criminal laws? What other steps, if any, would you take to help reduce HIV/AIDS stigma and discrimination in the United States?

Any one, who knowing has sex with another, without FULL consent, needs to go to PRISON. Period.

Q12. Do you support the 340B Drug Pricing program? What changes, if any, would you make to the program?

I support full competition, in the manufacturing and dispensing of drugs. It is known fact, that competition drives prices down, and keeps quality high. I would allow foreign drugs to compete with American drugs.

Q13. What is your position on the criminalization of sex work?

Sex work is already regulated and enforced enough. I do not see a need to change any laws at this time.

Q14. More than 1 in 4 transgender women in the United States are living with HIV, and violence against transgender individuals is higher in 2018 than it ever has been. What do you think should be done to protect the rights and lives of transgender people living in this country?

What I would do to protect the rights of Transgenders? easy, the United States Constitution already states, all U.S. American people are equal, regarding sex, religion, race, and other factors. If a crime occurs, I would simply say, report it, investigate it, and prosecute for the crime. We do not need more laws in our Nation, we need more enforcement of existing laws.

Q15. Are you familiar with Pre-Exposure Prophylaxis (PrEP), the preventative use of antiretroviral medication for people who do not have HIV, but are at a high risk of infection? Would you be supportive of expanding access to PrEP?

I believe, that if a choice is given to the U.S. American people, and full disclosure was presented, then the choice and freedom, remains with the individual. Yes, I would support the expansion.

Q16. Similarly, are you aware of the recent scientific consensus around U = U, which stands for Undetectable = Untransmittable, that shows that a person living with HIV who is on antiretroviral medication & has an undetectable viral load cannot pass the virus to their partner? If enough people were able to achieve an undetectable viral load, the United States could begin to end the HIV epidemic in this country. Do you support expanding services to find and link as many people living with HIV as possible to treatment and to help people achieve an undetectable viral load through assistance with medication adherence programs?

I believe in the Research and Development of any and all drugs that will lead to cure to any all viruses and diseases hurting and harming the U.S. American people.

Q17. Do you support efforts to protect and provide substantial federal funding for family planning services? What is your position on the proposed rule change that would prohibit Title X funding recipients from providing their clients with a full range of medical options concerning their pregnancy, including abortion care, and increasing institutional capacity for HIV prevention services?

I support the competition in Federally funding programs, to offset the spread of diseases and unwanted pregnancies. Education is the first line of defense.

Q18. 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. Do you believe that health care providers should be safe spaces for immigrants living with and affected by HIV to seek care?

I believe, that any illegal alien, living our country, sponging on our system, needs to be deported. Let their own country take care of them. It is not the United States problem, to take care of the citizens of other nations.

Q19. 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?

I believe, that ANY cost of maintaining any alien, needs to be reimbursed back to the Taxpayers of the United States before any citizenship is issued. Any alien in the United States, is a guest, both wanted or unwanted guest, and thus, they should be on their best behavior when in the United States, including food, housing, cash aid, medical and other welfare payouts. Full reimbursement back, off welfare, and contributing to society before even talking about citizenship. The "Free Ride" days need to stop.

