112TH CONGRESS 1ST SESSION S. 795

To address HIV/AIDS in the African-American community, and for other purposes.

IN THE SENATE OF THE UNITED STATES

April 12, 2011

Mrs. GILLIBRAND introduced the following bill; which was read twice and referred to the Committee on Health, Education, Labor, and Pensions

A BILL

To address HIV/AIDS in the African-American community, and for other purposes.

- 1 Be it enacted by the Senate and House of Representa-
- 2 tives of the United States of America in Congress assembled,

3 SECTION 1. SHORT TITLE.

- 4 This Act may be cited as the "National Black Clergy
- 5 for the Elimination of HIV/AIDS Act of 2011".

6 SEC. 2. TABLE OF CONTENTS.

- 7 The table of contents of this Act is as follows:
 - Sec. 1. Short title.
 - Sec. 2. Table of contents.
 - Sec. 3. Findings.
 - Sec. 4. Definitions applicable throughout Act.

TITLE I—DEPARTMENT OF HEALTH AND HUMAN SERVICES

Sec. 100. Definition.

Subtitle A—Office of Minority Health

Sec. 101. Services to reduce HIV/AIDS in African-American community.

Subtitle B-Substance Abuse and Mental Health Services Administration

- Sec. 111. Grants for substance abuse and mental health services to public health agencies and faith-based organizations.
- Sec. 112. Services for HIV/AIDS affected youth who are separated from their families.

Subtitle C-Centers for Disease Control and Prevention

- Sec. 121. Public health intervention and prevention activities.
- Sec. 122. HIV/AIDS prevention and education.
- Sec. 123. Building capacity of communities.
- Sec. 124. National media outreach campaign.

Subtitle D—National Institutes of Health

- Sec. 131. Research to develop behavioral strategies to reduce transmission of HIV/AIDS.
- Sec. 132. Study of biological and behavioral factors.

Subtitle E—Health Resources and Services Administration

Sec. 141. Health care professionals treating individuals with HIV/AIDS.

Subtitle F—Miscellaneous

Sec. 151. Report on impact of HIV/AIDS in the African-American community. Sec. 152. Study on status of HIV/AIDS epidemic among African-Americans.

TITLE II—MISCELLANEOUS

- Sec. 201. Sense of Congress on National Black Clergy HIV/AIDS Awareness Sunday.
- Sec. 202. Sense of Congress on Federal agencies with responsibility for preventing, testing for, and treating HIV/AIDS.

Sec. 203. Sense of Congress on Federal Bureau of Prisons procedures for inmates with HIV.

1 SEC. 3. FINDINGS.

- 2 Congress finds the following:
- 3 (1) It has been estimated that more than
 4 1,000,000 people in the United States are living
 5 with HIV/AIDS, and approximately 500,000 of them
 6 are Black. Blacks are 8 times more likely to have
 7 AIDS than their White counterparts. Within the

1 Black community, the subpopulation most dispropor-2 tionately impacted by HIV/AIDS is Black men who 3 have sex with men (MSM) with prevalence rates 4 twice those of White MSM. Black women account 5 for the majority of new AIDS cases among women 6 and are 23 times more likely to be living with AIDS 7 than White women and 4 times more likely than 8 Latinas.

9 (2) On October 7–8, 2007, 186 Black clergy, 10 consisting of Baptist, COGIC, Methodist, Protes-11 tant, AME, and Pentecostal, together with, medical, 12 policy, and AIDS leaders, were brought together by 13 the National Black Leadership Commission on 14 AIDS (NBLCA), the oldest and largest Black AIDS 15 organization of its kind in America, hosted by Time 16 Warner, Inc., with other foundation support, to par-17 ticipate in the National Black Clergy Conclave On 18 HIV/AIDS Policy.

(3) The attendees included faith leaders across
traditional, mega, and activist churches representing
millions of congregants: the National Medical Association (NMA) representing 30,000 African-American physicians; the National Conference of Black
Mayors; the National Caucus of Black State Legislators; and the Health Brain Trust of the Congres-

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sional Black Caucus and key African-American HIV/
AIDS advocates from across the United States. This
group developed a plan of action that has become
the National Black Clergy for the Elimination of
HIV/AIDS Act of 2011 to respond to the "on the
ground" emergency in prevention, care, and treatment for AIDS in Black America.

8 (4) In August 2007, the NMA, the oldest and 9 largest organization representing 30,000 African-10 American physicians, released a consensus report en-11 titled "Addressing The HIV/AIDS Crisis In The Af-12 rican American Community: Fact, Fiction and Pol-13 icy"; and specifically called on the next President of 14 the United States to declare HIV/AIDS in African-15 American communities a public health emergency 16 and worked with NBLCA to organize clergy to advo-17 cate for the specific needs of Black physicians, their 18 patients, and those at risk in African-American com-19 munities; and have pledged to advocate and work 20 with clergy to develop, execute, and implement these 21 initiatives as a part of their rightful role of leader-22 ship in African-American communities and culture.

(5) The National Conference of Black Mayors
has pledged to work with clergy, medical, and community leaders to develop and support these initia-

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tives on a local level and to help them to continue
 to develop a policy agenda leading to the elimination
 of HIV/AIDS.

4 (6) The National Caucus of Black State Legis5 lators pledged to take the initiatives herein to their
6 body and develop plans of action for Black State
7 Legislators to work with local clergy, health depart8 ments, and CBOs to adopt and implement these ini9 tiatives on a national level.

10 (7) At their April 2008 annual meeting, the 11 National Policy Alliance (NPA), consisting of the 12 Joint Center For Political and Economic Studies 13 (secretariat) and the National Black Caucus of 14 School Board Members, National Black Caucus of 15 Local Elected Officials; the Judicial Council of the 16 National Bar Association; the National Association 17 of Black County Officials; Blacks in Government 18 and the CBC; NCBM; WCM, voted unanimously to 19 support, endorse, and encourage the passage of the 20 National Black Clergy for the Elimination of HIV/ 21 AIDS Act of 2011 and to organize their respective 22 members to endorse and support the passage of this 23 bill.

24 (8) The World Conference of Black Mayors has25 ratified its support of these initiatives and legisla-

tion, and pledged to assist the clergy to take them
 internationally.

3 (9) The National Black Leadership Commission 4 on AIDS, the Balm in Gilead, and the Black AIDS 5 Institute have been recognized by the clergy for their 6 tradition and history of service and will work with 7 clergy to conduct community and policy develop-8 ment, linkages to local departments of health and 9 other services, infrastructure development, education 10 media, and fund development activities.

11 (10) Bishop T.D. Jakes of the Potters House 12 in Dallas, Texas, and Rev. Calvin O. Butts of the 13 Abyssinian Baptist Church in Harlem, New York, 14 and chairman of the National Black Leadership 15 Commission on AIDS have been recognized as the 16 organizers of this group and will help guide and lead 17 the development efforts of fellow clergy through this 18 process.

(11) The National Conclave on HIV/AIDS for
Black Clergy calls upon the President, Congress,
and corporate America to declare the HIV/AIDS crisis in the African-American community a "public
health emergency".

1	(12) The Black clergy will aggressively seek to
2	have every person under the sphere of their influence
3	tested for HIV in order to know the person's status.
4	(13) The Black clergy will promote HIV/AIDS
5	awareness to ensure that all Black clergy serving in
6	their denominations and other congregations are
7	equipped to address issues related to this disease in
8	a factual and scientifically sound manner.
9	(14) The Black clergy will use the ABC/D
10	model as a behavioral guideline for prevention initia-
11	tives:
12	(A) A–Abstain.
13	(B) B–Be Faithful.
14	(C) C–Use Condoms.
15	(D) D–Don't Engage in Risky Behaviors.
16	SEC. 4. DEFINITIONS APPLICABLE THROUGHOUT ACT.
17	In this Act, the terms "HIV" and "HIV/AIDS" have
18	the meanings given to such terms in section 2689 of the
19	Public Health Service Act (42 U.S.C. 300ff–88).
20	TITLE I—DEPARTMENT OF
21	HEALTH AND HUMAN SERVICES
22	SEC. 100. DEFINITION.
22	
23	In this title, the term "Secretary" means the Sec-

Subtitle A—Office of Minority Health

3 SEC. 101. SERVICES TO REDUCE HIV/AIDS IN AFRICAN4 AMERICAN COMMUNITY.

5 (a) IN GENERAL.—For the purpose of reducing HIV/
6 AIDS in the African-American community, the Secretary,
7 acting through the Director of the Office of Minority
8 Health, may make grants to public health agencies and
9 faith-based organizations to conduct—

10 (1) outreach activities related to HIV/AIDS
11 prevention and testing activities;

12 (2) HIV/AIDS prevention activities; and

13 (3) HIV/AIDS testing activities.

(b) AUTHORIZATION OF APPROPRIATIONS.—To carry
out this section, there are authorized to be appropriated
\$50,000,000 for fiscal year 2012, and such sums as may
be necessary for fiscal years 2013 through 2016.

Subtitle B—Substance Abuse and Mental Health Services Admin istration

4 SEC. 111. GRANTS FOR SUBSTANCE ABUSE AND MENTAL
5 HEALTH SERVICES TO PUBLIC HEALTH
6 AGENCIES AND FAITH-BASED ORGANIZA7 TIONS.

8 (a) IN GENERAL.—The Secretary, acting through the
9 Administrator of the Substance Abuse and Mental Health
10 Services Administration, may make grants to public health
11 agencies and faith-based organizations to—

(1) conduct HIV/AIDS and sexually transmitted disease outreach, prevention, and testing activities that are targeted to the African-American
community; and

16 (2) in connection with such activities, provide
17 substance abuse testing and mental health services
18 to members of such community.

(b) AUTHORIZATION OF APPROPRIATIONS.—To carry
out this section, there are authorized to be appropriated
\$90,000,000 for fiscal year 2012, and such sums as may
be necessary for fiscal years 2013 through 2016.

SEC. 112. SERVICES FOR HIV/AIDS AFFECTED YOUTH WHO
ARE SEPARATED FROM THEIR FAMILIES.
(a) IN GENERAL.—The Secretary, acting through the
Administrator of the Substance Abuse and Mental Health
Services Administration, may make grants to faith- and
community-based organizations to provide family reunifi-
cation services, mental health counseling, HIV/AIDS and
sexually transmitted disease testing, and substance abuse
testing and treatment to youth who—
(1)(A) have run away from home;
(B) are homeless; or
(C) reside in a detention center or foster care;
and
(2) are HIV positive or at risk for HIV/AIDS,
including young men who have sex with men.
(b) Authorization of Appropriations.—To carry
out this section, there are authorized to be appropriated
\$5,000,000 for fiscal year 2012, and such sums as may
be necessary for fiscal years 2013 through 2016.
Subtitle C—Centers for Disease
Control and Prevention
SEC. 121. PUBLIC HEALTH INTERVENTION AND PREVEN-
TION ACTIVITIES.
(a) IN GENERAL.—For the purpose of reducing HIV/
AIDS, sexually transmitted diseases, tuberculosis, and
viral hepatitis in African-American communities, the Sec-

retary, acting through the Director of the Centers for Dis ease Control and Prevention, may make grants to faith based organizations for public health intervention and pre vention activities, including the use of rapid testing in tra ditional and nontraditional settings to increase the num ber of individuals who know their status at the point of
 care and are put into treatment.

8 (b) PARTNERSHIPS.—In carrying out this section, the
9 Secretary shall encourage grantees to enter into partner10 ships with public health agencies.

(c) AUTHORIZATION OF APPROPRIATIONS.—To carry
out this section, there are authorized to be appropriated
\$100,000,000 for fiscal year 2012, and such sums as may
be necessary for fiscal years 2013 through 2016.

15 SEC. 122. HIV/AIDS PREVENTION AND EDUCATION.

(a) PREVENTION ACTIVITIES.—The Secretary, acting
through the Director of the Centers for Disease Control
and Prevention, shall expand and intensify HIV/AIDS
prevention activities in African-American communities.
Such activities—

- 21 (1) shall be targeted to specific populations;
- (2) shall be comprehensive and accurately basedon science and research; and

24 (3) shall include information on abstinence, the25 proper use of condoms, risks associated with unpro-

tected sex, and the value of sexual delay particularly
 among young adolescents and teenagers.

3 (b) EDUCATION.—The Secretary, acting through the
4 Director of the Centers for Disease Control and Preven5 tion, shall expand and intensify HIV/AIDS educational ac6 tivities targeting Black women, youth, and men who have
7 sex with men.

8 (c) COORDINATION.—The Secretary shall carry out 9 this section in coordination with public schools of all levels, 10 Black organizations, historically Black colleges and universities, and faith-based organizations and institutions. 11 12 (d) AUTHORIZATION OF APPROPRIATIONS.—To carry out this section, there are authorized to be appropriated 13 \$90,000,000 for fiscal year 2012, and such sums as may 14 15 be necessary for fiscal years 2013 through 2016.

16 SEC. 123. BUILDING CAPACITY OF COMMUNITIES.

(a) IN GENERAL.—The Secretary, acting through the
Director of the Centers for Disease Control and Prevention, shall expand funding to eligible entities to build the
capacity of African-American communities to respond to
HIV/AIDS.

(b) EMPHASIS.—In carrying out this section, the Secretary shall emphasize the provision of funding for policy
development, education, technical assistance, and training—

(1) to national and local faith-based organiza tions; and

3 (2) to organizations with a significant history of
4 working within the African-American community on
5 HIV/AIDS issues, an interdenominational center of
6 seminaries specializing in the training of African7 American clergy, and historically Black colleges and
8 universities.

9 (c) DEFINITION.—In this section, the term "eligible 10 entity" means a national or community-based organization 11 with a history and tradition of service to African-American 12 communities.

(d) AUTHORIZATION OF APPROPRIATIONS.—To carry
out this section, there are authorized to be appropriated
\$25,000,000 for fiscal year 2012, and such sums as may
be necessary for fiscal years 2013 through 2016.

17 SEC. 124. NATIONAL MEDIA OUTREACH CAMPAIGN.

(a) IN GENERAL.—The Secretary, acting through the
Director of the Centers for Disease Control and Prevention, shall implement a national media outreach campaign
that urges all sexually active individuals to be tested for
and know their HIV/AIDS status.

(b) REQUIREMENTS.—The national media outreach
campaign under this section shall—

1	(1) be science-driven and targeted to African-
2	American men, women, and youth; and
3	(2) give special emphasis to Black women and
4	men who have sex with men.
5	(c) Coordination; Consultation.—The Secretary
6	shall carry out this section—
7	(1) in coordination with Black media outlets for
8	print, electronic, and Web-based media and Black
9	media associations, including the National Associa-
10	tion of Black Owned Broadcasters and the National
11	Newspaper Publishers Association; and
12	(2) in consultation with an advisory board in-
13	cluding representatives of the National Medical As-
14	sociation, faith leaders, elected and appointed offi-
15	cials, social marketing experts, and business and
16	community stakeholders.
17	(d) AUTHORIZATION OF APPROPRIATIONS.—To carry
18	out this section, there are authorized to be appropriated
19	\$10,000,000 for fiscal year 2012, and such sums as may
20	be necessary for fiscal years 2013 through 2016.

Subtitle D—National Institutes of Health

3 SEC. 131. RESEARCH TO DEVELOP BEHAVIORAL STRATE4 GIES TO REDUCE TRANSMISSION OF HIV/
5 AIDS.

6 (a) IN GENERAL.—The Secretary, acting through the 7 Director of the National Institutes of Health, may conduct 8 or support culturally competent research to develop evi-9 dence-based behavioral strategies to reduce the trans-10 mission of HIV/AIDS within the African-American com-11 munity.

12 (b) PRIORITY.—In carrying out this section, the Sec-13 retary shall prioritize research that focuses on populations 14 within the African-American community that are at in-15 creased risk for HIV/AIDS, including—

16 (1) men who have sex with men; and

17 (2) women.

(c) AUTHORIZATION OF APPROPRIATIONS.—To carry
out this section, there are authorized to be appropriated
\$10,000,000 for fiscal year 2012, and such sums as may
be necessary for fiscal years 2013 through 2016.

16

3 (a) IN GENERAL.—The Secretary, acting through the
4 Director of the National Center on Minority Health and
5 Health Disparities, may make grants for—

6 (1) the study of biological and behavioral fac-7 tors that lead to increased HIV/AIDS prevalence in 8 the African-American community, to be conducted 9 by researchers with a history and tradition of service 10 to Black communities; and

11 (2) behavioral and structural network research 12 and interventions, in collaboration with other insti-13 tutes and centers of the National Institutes of 14 Health, indigenous faith and national and commu-15 nity-based organizations with a history and tradition 16 of conducting such research for Black communities, 17 with a special emphasis on Black women and Black 18 men who have sex with men.

(b) AUTHORIZATION OF APPROPRIATIONS.—To carry
out this section, there are authorized to be appropriated
\$100,000,000 for fiscal year 2012, and such sums as may
be necessary for fiscal years 2013 through 2016.

Subtitle E—Health Resources and Services Administration

3 SEC. 141. HEALTH CARE PROFESSIONALS TREATING INDI4 VIDUALS WITH HIV/AIDS.

5 Part E of title VII of the Public Health Service Act
6 (42 U.S.C. 294n et seq.) is amended by adding at the end
7 the following:

8 "Subpart 4—Health Care Professionals Treating 9 Individuals With HIV/AIDS

10 "SEC. 780. BETTER CARE FOR INDIVIDUALS WITH HIV/AIDS.

"(a) IN GENERAL.—The Secretary, acting through
the Administrator of the Health Resources and Services
Administration and in consultation with the AfricanAmerican church community, may award grants for any
of the following:

16 "(1) Development of curricula for training pri17 mary care providers in HIV/AIDS prevention and
18 care.

"(2) Training health care professionals with expertise in HIV/AIDS to provide care to individuals
with HIV/AIDS.

"(3) Development by grant recipients under
title XXVI and other persons of policies for providing culturally relevant and sensitive treatment to
individuals with HIV/AIDS, with particular empha-

sis on treatment to African-Americans and children
 with HIV/AIDS.

"(4) Development and implementation of programs to increase the use of telemedicine to respond
to HIV/AIDS-specific health care needs in rural and
minority communities, with particular emphasis
given to medically underserved communities and the
southern States.

9 "(5) Creation of faith- and community-based
10 certification programs for providers in HIV/AIDS
11 care and support services.

12 "(6) Establishment of comfort care centers that 13 provide mental, emotional, and psycho-social coun-14 seling for people with HIV/AIDS and implement ad-15 ditional protocols to be carried out in the centers that address the needs of children and young adults 16 17 who are infected with the disease and are 18 transitioning from childhood to adulthood.

"(7) Incentive payments to health care providers supported by the Health Resources and Services Administration to implement HIV/AIDS testing
consistent with the guidelines issued in 2006 by the
Centers for Disease Control and Prevention entitled
"Revised Recommendations for HIV Testing of

1 Adults, Adolescents, and Pregnant Women in 2 Health-Care Settings'.

3 "(b) DEFINITION.—In this section, the term 'HIV/ 4 AIDS' has the meaning given to such term in section 5 2689.

6 "(e) AUTHORIZATION OF APPROPRIATIONS.—To 7 carry out this section, there are authorized to be appro-8 priated \$100,000,000 for fiscal year 2012, and such sums as may be necessary for fiscal years 2013 through 2016.". 9

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Subtitle F—Miscellaneous

11 SEC. 151. REPORT ON IMPACT OF HIV/AIDS IN THE AFRI-12 CAN-AMERICAN COMMUNITY.

13 (a) IN GENERAL.—The Secretary shall submit to 14 Congress and the President an annual report on the im-15 pact of HIV/AIDS in the African-American community. 16 (b) CONTENTS.—The report under subsection (a) shall include information on the-17

18 (1) progress that has been made in reducing 19 the impact of HIV/AIDS in such community;

20 (2) opportunities that exist to make additional progress in reducing the impact of HIV/AIDS in 21 22 such community;

23 (3) challenges that may impede such additional 24 progress; and

1	(4) Federal funding necessary to achieve sub-
2	stantial reductions in HIV/AIDS in the African-
-3	American community.
4	
	SEC. 152. STUDY ON STATUS OF HIV/AIDS EPIDEMIC AMONG
5	AFRICAN-AMERICANS.
6	(a) IN GENERAL.—The Secretary shall—
7	(1) seek to enter into an agreement with the In-
8	stitute of Medicine to document, in collaboration
9	with an academic organization which specializes in
10	the identification and reduction of health disparities
11	within the African-American community, all aspects
12	of the HIV/AIDS epidemic among African-Ameri-
13	cans, including the role that historical racial or eth-
14	nic barriers play in sustaining the epidemic among
15	African-Americans;
16	(2) submit a report to the President, the Direc-
17	tor of the Office of National AIDS Policy Coordina-
18	tion, the Director of the White House Domestic Pol-
19	icy Council, the Director of White House Office of
20	Faith-Based and Neighborhood Partnerships, key
21	Federal agencies, and the relevant committees of the
22	Congress on the status of the HIV/AIDS epidemic
23	among African-Americans in the United States; and
24	(3) include in such report—

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1	(A) specific recommendations on the imple-
2	mentation of Federal policies to reduce the bur-
3	den of HIV/AIDS in the African-American com-
4	munity; and
5	(B) a special focus on the Black clergy and
6	the church as a unique resource in the African-
7	American community.
8	(b) Authorization of Appropriations.—
9	(1) IN GENERAL.—To carry out this section,
10	there is authorized to be appropriated \$2,000,000
11	for each of fiscal years 2012 and 2013.
12	(2) Special Rule.—Of the amount of funds
13	appropriated to carry out this section for a fiscal
14	year—
15	(A) 45 percent shall be allocated to the In-
16	stitutes of Medicine pursuant to the agreement
17	entered into under subsection (a)(1);
18	(B) 45 percent shall be allocated to an
19	academic organization which specializes in the
20	identification and reduction of health disparities
21	within the African-American community pursu-
22	ant to such agreement; and
23	(C) 10 percent shall be allocated for ad-
24	ministrative costs and other activities under
25	this section.

1	TITLE II—MISCELLANEOUS
2	SEC. 201. SENSE OF CONGRESS ON NATIONAL BLACK CLER-
3	GY HIV/AIDS AWARENESS SUNDAY.
4	It is the sense of Congress that—
5	(1) there should be established a National
6	Black Clergy HIV/AIDS Awareness Sunday on
7	which the Congress and the President call on mem-
8	bers of the Black clergy—
9	(A) to become involved at the local commu-
10	nity level in HIV/AIDS testing, policy, and ad-
11	vocacy;
12	(B) to discuss the HIV/AIDS epidemic
13	with their congregations and the community at-
14	large; and
15	(C) to urge members of their congregations
16	to reduce risk factors, practice safe sex and
17	other preventive measures, be tested for HIV/ $$
18	AIDS, and seek care when appropriate; and
19	(2) an appropriate Sunday should be selected
20	for this occasion.

1	SEC. 202. SENSE OF CONGRESS ON FEDERAL AGENCIES
2	WITH RESPONSIBILITY FOR PREVENTING,
3	TESTING FOR, AND TREATING HIV/AIDS.
4	It is the sense of Congress that all Federal agencies
5	with a responsibility for preventing, testing for, and treat-
6	ing HIV/AIDS should—
7	(1) adopt policies for prevention, testing, and
8	treatment that are consistent with the guidelines
9	issued in 2006 by the Centers for Disease Control
10	and Prevention, entitled "Revised Recommendations
11	for HIV Testing of Adults, Adolescents, and Preg-
12	nant Women in Health-Care Settings"; and
13	(2) begin a systemic, aggressive approach to im-
14	plementing voluntary, routine testing as part of all
15	health exams, including in emergency rooms, clinics,
16	and private physician offices.
17	SEC. 203. SENSE OF CONGRESS ON FEDERAL BUREAU OF
18	PRISONS PROCEDURES FOR INMATES WITH
19	HIV.
20	It is the sense of Congress that the Federal Bureau
21	of Prisons should implement procedures for—
22	(1) voluntary HIV testing as a routine compo-
23	nent of inmate care; and
24	(2) referral to care as a routine component of
25	release planning for inmates with HIV/AIDS, includ-

- 1 ing referral to community-based care and faith-based
- 2 institutions.