

Senators permitted to speak therein for up to 10 minutes each.

The PRESIDING OFFICER. Without objection, it is so ordered.

19TH INTERNATIONAL AIDS CONFERENCE

Mr. DURBIN. Mr. President, I am proud that the 19th biennial International AIDS conference is being held in the Nation's Capital after 22 years of being held abroad.

President Obama was instrumental in bringing the conference back to the United States by announcing in October 2009 that the United States would lift its entry restriction on people living with HIV.

The United States has been the leader in combating the scourge of HIV/AIDS, and it is fitting that this significant meeting of the best and brightest scientists, philanthropists, activists, government leaders, and people living with HIV/AIDS is taking place in Washington, DC.

It is made even more symbolic by the fact that Washington, DC, has the highest rate of AIDS than any city in the Nation.

As we look to "Turn the Tide Together," as the theme of the conference indicates, we must continue to support a number of long-term strategies both at home and around the world, building on the successes we have seen in the past few decades.

Significant scientific breakthroughs have been made this year alone, and we can see investments we have made to fight HIV/AIDS beginning to pay off.

The National Institutes of Health, for example, released a study last fall on the HPTN 052 clinical trial that showed that if newly infected individuals started antiretroviral treatment when their immune systems are relatively healthy, they are 96 percent less likely to transmit the virus to their uninfected partner.

Others report that the cost of treating HIV is four times less than previously thought. And now more than ever, scientists believe that an effective HIV vaccine is within reach.

These are amazing breakthroughs and could reflect the beginning of the end as we work toward an AIDS-free generation.

This past year new infection rates and AIDS deaths decreased. Twenty percent more people had access to antiretroviral therapy worldwide in 2011 than they did in 2010.

These numbers don't appear out of thin air—they correlate to increased investments from the United States and the Global Fund. This is a time when we must continue funding our investments to fight HIV/AIDS.

But let's talk about how we have achieved these amazing results.

President Bush was instrumental in establishing PEPFAR. The President's Emergency Plan For AIDS Relief was initially a \$15 billion commitment over 5 years to fight the AIDS pandemic.

Today, PEPFAR is one of the largest health initiatives ever established by a single country and remains critical to saving millions of lives.

PEPFAR is a strongly bipartisan program, and since its inception, it has directly supported nearly 13 million people with access to care and services.

As of 2011, the United States supported lifesaving antiretroviral treatment for more than 3.9 million men, women, and children worldwide.

PEPFAR counseled 9.8 million pregnant women to test them for HIV/AIDS, allowing more than 200,000 babies to be born AIDS-free.

Another key ally in the fight against AIDS is the Global Fund.

The Global Fund was established in 2002 as a public-private partnership, requiring the buy-in of grant recipient countries. These participants must commit to continuing the program and serving its people after the Global Fund grant expires.

This novel approach has proved wildly successful. To date, the Global Fund has supported more than 1,000 programs in 151 countries and provided AIDS treatment to over 3 million people.

The United States must continue to be a leading supporter of the Global Fund.

The generosity of the American people has improved and saved lives, stemmed the spread of HIV/AIDS, and provided medicine, hospitals, and clinics to those who are infected.

Together, PEPFAR and the Global Fund have built health care systems where none existed before and allowed individuals infected with HIV/AIDS to dream of a future.

These programs also ensure that the countries we are working in play a part in helping their own people survive and thrive.

While we have made significant progress in combating HIV/AIDS, we cannot be complacent.

Here in the Nation's Capital, the AIDS rate is higher than in some Sub-Saharan African countries, and infection rates are even growing in some demographics.

In Illinois, 37,000 individuals are living with AIDS, with 80 percent of them residing in Chicago.

Internationally, the gains that we have made could easily be lost; the increase of infections in Southeast Asia, Russia, and the Ukraine—places that have historically had low infection rates is alarming.

If we lose our focus or if international donors stop contributing to key programs, we lose out on the momentum built in recent years to combat this disease.

That is why it is good that this administration continues to push for an AIDS-free generation.

Secretary Clinton announced three new efforts during this week's conference: \$15 million in implementation research to identify specific interventions, \$20 million for a challenge fund

to support country-led efforts to expand services, and \$2 million through the Robert Carr Civil Society Network Fund to bolster civil society groups.

Secretary Clinton also noted: "Creating an AIDS-free generation takes more than the right tools, as important as they are. Ultimately, it's about people—the people who have the most to contribute to this goal and the most to gain from it." She is right.

Creating an AIDS-free generation is about working together to help save and improve lives. It is about supporting the individuals and communities that have already made great inroads in addressing this epidemic.

By reaffirming our leadership to initiatives such as PEPFAR and the Global Fund, which support these individuals and communities, we can continue to make a difference. Only then can we truly wish to usher in an AIDS-free generation.

OUR SHARED COMMITMENT TO FIGHT HIV/AIDS

Mr. CARDIN. Mr. President, today I rise to discuss the HIV/AIDS epidemic, the tremendous progress we have made thus far, and the need to do even more if we are going to stop this devastating disease in its tracks.

The fight against HIV/AIDS has been a long one. In more than 30 years, approximately 26 million people have died from AIDS, and there are still an astounding 7,000 new infections every day. But our commitment to combating this disease is making important strides.

In the past decade, new HIV infections fell 20 percent, thanks in large part to the lifesaving antiretroviral treatment we and our partners are making available in every corner of the world that AIDS touches.

We know that relatively healthy people with HIV who receive early treatment with antiretroviral drugs are 96 percent less likely to pass on the virus to their uninfected partners. So treating these individuals not only allows them to live their lives in dignity but is also an important key to prevention.

In my home State of Maryland, the Jhpiego program has spent decades addressing the HIV/AIDS epidemic in South America, Africa, Europe and Asia. Jhpiego has made enormous strides in prevention of mother-to-child transmission, increasing counseling and testing and providing greater access to antiretroviral drugs.

Jhpiego has integrated HIV/AIDS services with tuberculosis, cervical cancer, malaria in pregnancy, family planning and maternal and child health services, to address the problem of coinfection among HIV/AIDS patients and to reach as many people as possible. These integrated services represent the future of our health assistance. We have learned from programs like Jhpiego's what our best practices should be so that we are innovators in prevention, care, and treatment.