The Fenway Institute: President Trump's Proposed Budget Would Sharply Cut HIV and Chronic Disease Prevention, Eliminate Important HIV Care Programs

If enacted, budget budget would sharply reduce spending for healthcare and disease prevention

BOSTON, MA (PRWEB) May 24, 2017 -- This week, President Trump released a proposed budget that, if enacted, would sharply reduce spending for healthcare and disease prevention. The proposed budget would cut Medicaid by $800 billion over 10 years. It would also cut the Children’s Health Insurance Plan (CHIP) by 20% over the next two years. One in three American children—46 million in total—receive health care either through Medicaid or CHIP. People living with HIV, Black and Latino people, and the children living in these families would be among those most affected by Trump’s $4 trillion budget, which sets government spending priorities for the fiscal year that begins in October.

“The Trump-Pence Administration’s proposed budget would dismantle the public health infrastructure first put in place by Lyndon Johnson’s Great Society Program in 1965,” said Sean Cahill, PhD, Director of Health Policy Research at The Fenway Institute. “Black and Latino people, people living with HIV, and children living in poverty experience poorer health and health outcomes than the general population. They rely disproportionately on Medicaid and CHIP. These cuts will be devastating to some of the most vulnerable people in our society.”

Some of the more worrisome Trump-Pence Administration budget proposals include the following:

- A 16.6% cut in funding for the prevention of HIV/AIDS, viral hepatitis, sexually transmitted disease, and tuberculosis at the Centers for Disease Control and Prevention. Of the approximately 40,000 Americans newly diagnosed with HIV each year, nearly half are African American, and about two-thirds are gay and bisexual men or transgender women. Nearly 20 million new sexually transmitted diseases are diagnosed each year in the U.S., half of them among 15- to 24-year-olds. Diagnoses of chlamydia, gonorrhea, and syphilis are increasing and cost an estimated $16 billion a year to treat. Funding for the National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention is critical to address these health concerns. Because we don't have a cure or vaccine for HIV and STDs, cutting funding for evidence-based detection and prevention programs guarantees that these epidemics will continue to grow, costing more resources later.

- Reduced funding of the Ryan White HIV/AIDS Program (a cut of $59 million). The program is critical to the people living in the U.S. with HIV, a population that increases annually as approximately 40,000 people are newly diagnosed with HIV each year and people live longer thanks to better antiretroviral medications. Additionally, the Ryan White HIV/AIDS Program would become even more critical if people living with HIV lose subsidized marketplace insurance or Medicaid if the Affordable Care Act is repealed and replaced by the American Health Care Act. The Ryan White Program has been essentially flat funded since the early 2000s, even though the number of people accessing Ryan White services has nearly doubled, and the value of the funding has decreased due to inflation.

- Total elimination of AIDS Education and Training Centers and Special Projects of National Significance, which are run under the auspices of the Ryan White HIV/AIDS Program. The education and training centers and the special projects program are laboratories of innovation in finding ways to keep people with HIV engaged in the healthcare system, particularly those who have long experienced discrimination in healthcare settings—such as transgender people—and those who face unique challenges and issues, such as formerly incarcerated people and older adults living with HIV. When people with HIV are able to sustain their healthcare treatment regimens, their viral load lowers, which makes it much more difficult to transmit the virus to other
people. The education centers and special projects program also assist with rapid response to outbreaks of disease. When nearly 200 people were diagnosed with HIV in rural Scott County, Indiana over a 15-month period in 2014-15, the Midwest AIDS Education and Training Centers provided in-depth training to doctors and care providers in the area and helped get those newly diagnosed with HIV into immediate care.

- A reduction in funding for the National Institutes of Health of $5.7 billion, or 17.4% overall, for FY18. The Trump budget would cut funding for the National Institute of Allergy and Infectious Diseases, where most HIV/AIDS research is conducted, by $838 million, an 18.1% cut.

- A reduction of $1.1 billion in funding for treatment of people living with HIV in Africa and other parts of the world. amfAR estimates that this cut of nearly 20% in global HIV funding would cost more than 1 million lives and cause 300,000 children to become orphans.

- A 13.1% cut in funding for the Office of Civil Rights at the Department of Health and Human Services, and a 36.7% cut in funding for the Office of the National Coordinator for Health Information Technology. Under the Obama Administration, Office of Civil Rights was instrumental in promoting nondiscriminatory care for transgender patients. The Office of the National Coordinator for Health Information Technology has led important efforts to shift the U.S. health system from paper medical records to electronic health records, and has promoted the collection of sexual orientation and gender identity data from patients to better understand and address LGBT health disparities.

- President Trump’s proposed budget cuts funding for a number of other important centers for research at the CDC. For example, the proposed budget would cut funding for the National Center for Chronic Disease Prevention and Health Promotion by 18.9%. Chronic diseases like obesity, diabetes, and heart disease are major drivers of rising health care costs in the U.S. Funding for the Center for Global Health would be cut by 17.8%. The proposed budget would also cut the Prevention and Public Health Fund, which was created by the Affordable Care Act and currently funds many important public health projects and initiatives at the CDC, by 37.3%.

“This budget proposes a radical rejection of the social compact that has sustained our country for half a century,” Cahill added. “It would also undermine important progress we have made in preventing and treating HIV here and in Africa. It casts our most vulnerable people aside and leaves them to fend for themselves without the resources they need to succeed.”

Since 1971, [Fenway Health](https://www.fenwayhealth.org) has been working to make life healthier for the people in our neighborhood, the LGBT community, people living with HIV/AIDS and the broader population. The [Fenway Institute](https://www.fenway.org/about-the-fenway-institute) at Fenway Health is an interdisciplinary center for research, training, education and policy development focusing on national and international health issues. Fenway’s Sidney Borum Jr. Health Center cares for youth and young adults ages 12 to 29 who may not feel comfortable going anywhere else, including those who are LGBT or just figuring things out; homeless; struggling with substance use; or living with HIV/AIDS. In 2013, AIDS Action Committee of Massachusetts joined the Fenway Health family, allowing both organizations to improve delivery of care and services across the state and beyond.
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