Dear Colleague:

As we begin the 111th Congress and continue to work on combating the spread of HIV/AIDS and viral hepatitis, I urge you to cosponsor H.R. 179, the Community AIDS and Hepatitis Prevention Act. This bill seeks to reduce the spread of these deadly diseases by removing the current prohibition against the use of federal funds for syringe exchange programs.

Consider the following facts: (1) injection drug use is directly responsible for at least 25% of all AIDS cases in the United States since the beginning of the epidemic through 2005; and (2) over 8,000 new HIV infections and over 15,000 new hepatitis C infections are reported annually due to syringe exchange sharing among people who inject drugs.

To help stem the spread of HIV and hepatitis B and C due to syringe sharing, local and state governments, as well as philanthropic institutions, have provided funds for syringe exchange programs. Syringe exchange programs currently operate in 38 states, the District of Columbia and Puerto Rico, and have proven to reduce the spread of HIV/AIDS and viral hepatitis in the communities they serve.

Scientific research, including eight federally funded reports and a 2005 international review, conclude that syringe exchange programs, as a part of a comprehensive HIV prevention strategy, are effective in reducing HIV transmission without encouraging or increasing the use of illicit drugs. My home city of New York has seen a 75% decrease in HIV/AIDS cases among injection drug users since syringe exchange programs were established in 1992. Hepatitis C rates among injection drug users have fallen by 30% in this time.

Despite these findings, Congress has not acted to lift a 20-year ban on the use of federal funds for syringe exchange programs. This has undermined the efforts of state and local governments in combating the spread of HIV/AIDS and viral hepatitis. The nearly 200 syringe exchange programs in operation have helped reduce the transmission of HIV and viral hepatitis and enabled those who suffer from debilitating addictions to receive the assistance that they desperately need. However, without the help of Congress, these programs will be unable to expand and reach numerous other men and women who suffer from drug addictions and are subsequently at risk of contracting HIV and hepatitis B and C or transmitting them to others.

As states face difficult choices in their budget, it is now more important than ever that Congress lift the ban and provide states the resources they need to continue fighting HIV/AIDS and viral hepatitis in ways that are proven to work. With approximately 12,000 Americans contracting HIV/AIDS directly or indirectly and over 15,000 new hepatitis C infections each year from the sharing of contaminated syringes, it is critical that we make federal dollars available to programs that effectively reduce the number of contaminated syringes on our streets.
January 28, 2009

It is time we put ideology aside and support measures to reduce the infection rates of HIV and viral hepatitis that we know work. It is for this reason that President Barack Obama has repeatedly called for ending the federal ban and allowing local communities to make their own decisions about funding syringe exchange.

Accordingly, I urge you to cosponsor the bipartisan Community AIDS and Hepatitis Prevention Act and help save the lives of thousands of Americans. If you are interested in this legislation, please contact Fitz Restituyo at Fitz.Restituyo@mail.house.gov or 5-4361.

Sincerely,

José E. Serrano
Member of Congress