



## **Maryland Commission on LGBTQIA+ Affairs**

### **Urgent Call to Address HIV Funding Crisis in Maryland**

The Maryland Commission on LGBTQIA+ Affairs is deeply troubled by the drastic HIV funding cuts in our State. Baltimore City Health Department (BCHD) data reveals the severe impact after an initial FY24 award of \$22 million was reduced to \$17.9 million, and was further reduced to \$5.3 million for FY25. This 76% reduction severely threatens the health and wellbeing of those living with HIV/AIDS and has critical implications for public health across Maryland. It's unknown to what extent other high HIV prevalence jurisdictions around the State will be impacted by these funding cuts. Maryland contains three of the federally designated Ending the HIV Epidemic jurisdictions, Baltimore City, Prince George's County, and Montgomery County.

Maryland ranks #3 in the US for individuals living with HIV/AIDS and #10 in new diagnoses [1-2]. In 2021, Maryland had a rate of 643 people living with HIV per 100,000 population and a rate of 14 new HIV diagnoses per 100,000 population [1-2]. This is significantly higher than the national rates of 348 and 13, respectively [1-2]. Also, in 2021, a staggering 20% of all newly diagnosed HIV cases in Maryland were among youth aged 13-24 years old, highlighting an alarming increase in HIV incidence [1-2]. Furthermore, Maryland's viral suppression rate stands at only 61%, despite approximately 81% of persons diagnosed with HIV being linked to care in the State [1-2]. Additionally, 24% of new HIV diagnoses in Maryland were diagnosed late, at an AIDS stage [1-2], underscoring the urgent need for widespread availability of HIV testing, prevention methods, treatment, and related delivery/support services needed to keep people in care.

**As a sanctuary State, Maryland holds a vital responsibility to safeguard and support LGBTQIA+ youth and adults, who are disproportionately impacted by HIV/AIDS. However, these HIV funding cuts will dismantle essential programs and exacerbate existing health disparities in other aspects of well-being such as mental health and substance use care outcomes, especially among sexual and gender minorities, and racial and ethnic communities.**

Additionally, these cuts not only threaten the health and well-being of Marylanders and essential HIV programs, but also have a devastating impact on employment. Many individuals will lose their jobs as these cuts eliminate numerous service categories. This loss of employment adds to the heart-wrenching disparate impact on health, especially among LGBTQIA+ individuals who already face disparities in employment opportunities and access to healthcare.

**Governor Moore's vision and promise to "Leave no one behind" is more crucial than ever in addressing these challenges.**

We stand in solidarity with those impacted by these cuts and urge the Governor, Maryland Department of Health, and other relevant authorities to take immediate action to address this HIV funding crisis. The Maryland Commission on LGBTQIA+ Affairs recommends:

1. **In the short-term, provide immediate bridge funding of a minimum of 12 months from State discretionary funds or other sources before July 1, 2024.** In addition to the aforementioned impacts, inaction will result in the dismantling of vital services which will take years to rebuild at a much higher cost.
2. **For the long-term, we call upon the Administration, Maryland Department of Health, and General Assembly to develop a comprehensive funding strategy that prioritizes HIV services and ensures sustainable funding mechanisms.** This may include advocating for increased State funding, leveraging federal grants and resources, and collaborating with private partners such as pharmaceutical industries and philanthropic organizations committed to HIV/AIDS prevention and treatment.
3. **We urge the Administration to take a leadership role to ensure that our most vulnerable community members are not left behind and to demand accountability and transparency from the Maryland Department of Health on HIV funding and data.** It is imperative to meet with community stakeholders, including HIV/AIDS advocacy groups, healthcare providers, and affected individuals, to develop effective strategies and policies that address the challenges faced by service providers and community members.

Maryland must remain committed to the CDC's Ending the HIV Epidemic (EHE) initiative. Prioritizing funding for comprehensive HIV programming is the only way to effectively combat the epidemic and achieve EHE goals. We cannot afford to backtrack on the progress we have made. With effort, we can save these vital programs and make meaningful strides toward a future where HIV/AIDS is no longer a public health threat.

The Maryland Commission on LGBTQIA+ Affairs was created by the 2021 General Assembly to assess challenges facing LGBTQIA+ communities, study and establish best practices for inclusion, offer testimony before legislative and administrative bodies, and publish recommendations on policies to end discriminatory practices in the State. See <https://goci.maryland.gov/lgbtq/>.

#### References:

1. Maryland Department of Health. <https://public.tableau.com/app/profile/maryland.department.of.health.hiv.surveillance/viz/EpiProductDrilldownTablev2/Dashboard?publish=yes>
2. AIDS VU. <https://aidsvu.org/local-data/united-states/south/maryland/>