

SUBSTITUTE RESOLUTION

WHEREAS, The Chicago Department of Public Health completed the Healthy Chicago 2025 Strategic Plan, which established a five-year community health improvement plan focused on advancing racial and health equity and reducing the racial life expectancy gap; and

WHEREAS, The Chicago Department of Public Health estimates that the life expectancy gap between Black and white Chicagoans is 10.6 years, with infectious diseases, including HIV/AIDS, among the top six contributing factors; and

WHEREAS, In the United States, African American women are 15.3 times more likely to die from HIV infection than white women, and African American men are 6 times more likely to die from HIV infection than white men; and

WHEREAS, As a result of the health disparities, the Chicago Department of Public Health determined that beginning in 2019, this at-risk population should be one of five demographics selected for community development initiatives funding; and

WHEREAS; According to research from the BLACHE coalition, in 2019 through 2024, the Chicago Department of Public Health allocated a total of \$1.8 million to African American/Black-led community-based organizations of its \$40.4 million HIV/AIDS budget, accounting for only 4.46% of its overall grant allocations for HIV/AIDS; and

WHEREAS, In 2023, Non-Hispanic African Americans made up 42% of new HIV diagnoses, 49% of AIDS diagnoses, and 37% of late HIV diagnoses, despite comprising only 28.8% of Chicago's overall population; and

WHEREAS, In 2023, the highest rates of new individual HIV infection diagnoses occurred Uptown, Edgewater, and South Shore, which all have significant African American neighborhoods populations; and

WHEREAS, It is imperative to take action to halt new HIV infections among at-risk African American men and women, whose infection rate remains alarmingly high, even as new cases among similarly at-risk white individuals have declined to approximately 20 percent of new infections; and

WHEREAS, The Healthy Chicago 2025 Strategic Plan lists increasing access to comprehensive and culturally appropriate healthcare as a priority; now, therefore,

BE IT RESOLVED, That we, the members of the City Council for the City of Chicago, do hereby call on the Committee on Health and Human Relations to convene a hearing on the allocation of HIV/AIDS grant funding and the steps taken by the Chicago Department of Public Health to realize the goals of Healthy Chicago 2025, including closing the racial life expectancy gap and ensuring access to comprehensive and culturally appropriate healthcare for all Chicagoans; and

BE IT FURTHER RESOLVED, That since more than 40% of all recently diagnosed cases affect African American Chicagoans, it is incumbent upon this legislative body to promulgate an

ordinance that ensures the majority of funding provided for HIV/AIDS mitigation is provided to agencies within high impact communities areas identified by AIDS Foundation Chicago as having more than 29.1 new HIV cases per 100,000 residents, thus closing the racial disparities in HIV/AIDS grant funding gaps and realizing the Health Chicago 2025's goal of providing culturally competent healthcare.

A handwritten signature in black ink, appearing to read "M E Hadden", written over a horizontal line.

Maria E. Hadden
Aldерwoman, 49th Ward