

**Report from  
The Presidential Advisory Council on HIV/AIDS  
to President George W. Bush and HHS Secretary Tommy G. Thompson  
(July 20, 2001)**

## **Introduction**

In September 2000, the Presidential Advisory Council on HIV/AIDS (the Council) issued its final report to President Clinton entitled, *AIDS: No Time to Spare*. The report, which contained more than 60 recommendations for action on AIDS at home and abroad, was also addressed to the incoming Administration and was presented to Health and Human Services (HHS) Secretary Tommy G. Thompson in a May 2001 meeting with representatives of the Council.

The report underscores several key messages:

- ❖ HIV/AIDS is a nonpartisan issue.
- ❖ The response to HIV/AIDS as a public health crisis should be guided by scientific knowledge, not political expediency.
- ❖ The HIV/AIDS pandemic represents an unparalleled health, social, economic and security threat.
- ❖ HIV/AIDS imperils the entire global community.
- ❖ The United States has a responsibility to be a leader and partner in the global fight against AIDS.
- ❖ Coordinated and sustained political will, as well as resources proportionate to need, are required to address the pandemic.

The Council also emphasized the importance of pursuing comprehensive policies to:

- ❖ Prevent new infections and improve the quality of life and health for those living with HIV/AIDS;
- ❖ Fund basic needs such as housing and nutrition because of their foundational necessity for the efficacy of primary healthcare and medication; and
- ❖ Take a leadership role in global initiatives, while increasing the response to the growing domestic need for prevention, care and services.

## **New Recommendations to President Bush**

The following recommendations address several key issues identified by the Council in its last full report. As the current Council prepares to complete its term of service, we present these recommendations to HHS Secretary Tommy G. Thompson, and through him to President George W. Bush. We do so in a spirit of ongoing commitment to ending the pandemic and human suffering caused by HIV/AIDS.

## **RECOMMENDATION #1**

### **Support for the Minority HIV/AIDS Initiative**

**WHEREAS**, African Americans and Latinos represent 12% and 13% of the U.S. population, respectively, yet they accounted for 47% and 19% of newly reported AIDS cases in 1999; and

**WHEREAS**, more than 73% of new HIV infections occur among people of color in the U.S. each year and recent Centers for Disease Control and Prevention (CDC) data reports that the incidence rate among African American men who have sex with men in six U.S. cities was an alarming 14.7%; and

**WHEREAS**, prevention and care efforts in the various Asian American, Pacific Islander, and Native American communities continue to be underfunded largely due to the lack of adequate HIV/AIDS surveillance data from national, state, territorial and tribal sources; and

**WHEREAS**, various studies, including the HIV Cost and Services Utilization Study (HCSUS), demonstrate continued disparities in access to care and HIV-related health outcomes by race and ethnicity in the United States; and

**WHEREAS**, in 1998, the Council strongly supported the efforts of African American community leaders, the Congressional Black Caucus and the Congressional Hispanic Caucus to create the Minority HIV/AIDS Initiative, as well as subsequent increases in funding for the Initiative by Congress, including \$357 million in FY 2001; and

**WHEREAS**, the intent of the Initiative is to reduce HIV-related health disparities by expanding the availability of prevention and care services for people of color nationally and to expand and strengthen the capacity and quality of services provided through minority community-based organizations and service providers; and

**WHEREAS**, the Congressional Black, Hispanic and Asian Pacific American Caucuses in an unprecedented joint hearing on AIDS on June 12, 2001 reiterated their strong support for increased funding for the Initiative in FY 2002, while emphasizing that the entire federal HIV/AIDS budget, and not just the activities under the Initiative, must address and be responsive to the disproportionate impact of HIV/AIDS in communities of color across the nation;

**WHEREAS**, the Council has endorsed the recommendations of African American leaders participating in the June 2001 Millennium meeting, called to develop a strategic response upon release of the CDC's 20<sup>th</sup> anniversary report on HIV/AIDS, which emphasized the historic and continuing disproportionate impact of the epidemic in communities of color;

**THEREFORE BE IT RESOLVED**, that the Council urges President George W. Bush to support full funding for the Initiative at \$540 million in FY 2002; and that the Administration ensure that implementation of the Initiative is wholly consistent with Congressional intent that such funds be used to support minority community based organizations and HIV service providers who are providing critically important service to their communities; and

**BE IT FURTHER RESOLVED**, that the Council urges President George W. Bush and Health and Human Services Secretary Tommy G. Thompson to declare that an AIDS-related emergency exists in communities of color in the U.S. and that appropriate and responsible steps be taken to respond to this state of emergency.

## **RECOMMENDATION #2**

### **Increased Appropriations for U.S. and Global HIV/AIDS Programs in FY 2002**

**WHEREAS**, an estimated 40,000 new HIV infections occur in the United States annually and over 5 million new infections occurred globally in the year 2000; and

**WHEREAS**, new infections in the United States occur disproportionately among low-income people of color, among young people under age 25 -- including young gay and bisexual men -- and are increasingly among women of color; and

**WHEREAS**, such individuals are increasingly poor and socially marginalized, and often require assistance with medical care and other support services that facilitate access to medical care and treatment; and

**WHEREAS**, an estimated 36 million people globally -- including more than 25 million in sub-Saharan Africa alone and nearly one million Americans -- are living with HIV/AIDS; and

**WHEREAS**, an estimated 13 million children globally have been orphaned as a result of AIDS; and

**WHEREAS**, the very high cost of HIV treatment inhibits access to care for those who are uninsured in the United States and to the vast majority of people living with HIV/AIDS in the developing world, where such treatments are largely unavailable; and

**WHEREAS**, there is continued need for proven prevention programs that target those at greatest risk for HIV infection, as well as those living with HIV/AIDS both in the U.S. and globally; and

**WHEREAS**, effective therapeutic intervention significantly reduces perinatal HIV transmission; and

**WHEREAS**, President George W. Bush's proposed budget for FY 2002 failed to address the growing need for increased prevention and HIV services by recommending flat funding for many AIDS programs -- including the Ryan White CARE Act and the Minority HIV/AIDS Initiative -- and only modest increases for other domestic and global AIDS efforts; and

**WHEREAS**, due to an existing shortage of funds in the AIDS Drug Assistance Program (ADAP) in FY 2001, 10 states have closed enrollment to new clients and another 7 states are expected to cap enrollment or institute other program restrictions that will impede access to treatment;

**THEREFORE BE IT RESOLVED**, that the Council urges President George W. Bush, Health and Human Services Secretary Tommy G. Thompson, Secretary of State Colin Powell and Office of Management and Budget Director Mitchell Daniels to fully support Congressional efforts to significantly expand funding for domestic and global AIDS programs during the FY 2002 appropriations process to levels recommended by the National Organizations Responding to AIDS (NORA) and other advocacy groups, including efforts to increase U.S. contributions to the Global AIDS and Health Fund to at least \$1 billion per year.

### **RECOMMENDATION #3**

#### **Support for the Early Treatment for HIV Act of 2001**

**WHEREAS**, the Department of Health and Human Services in 1998 established the first national clinical guidelines for the treatment of HIV disease, and continues to update these guidelines regularly; and

**WHEREAS**, these guidelines recommend early access to medical care, and when appropriate, access to highly active anti-retroviral therapy (HAART) for individuals living with HIV/AIDS in order to delay the progression of the disease, improve health, and prolong life; and

**WHEREAS**, current Medicaid eligibility rules directly contradict the intent of such guidelines by requiring that a low-income individual with HIV receive an AIDS diagnosis before being eligible for such services; and

**WHEREAS**, early medical intervention, care and treatment has proven to be cost-effective; and

**WHEREAS**, the Council has for several years urged the swift approval of states' applications for Medicaid waivers that would facilitate earlier access to HIV care and treatment, and yet, to date, only two states and the District of Columbia have been granted such waivers and only one state – Massachusetts – has implemented a program;

**THEREFORE BE IT RESOLVED**, that Council on urges President George W. Bush and Department of Health and Human Services Secretary Tommy G. Thompson to support passage of the Early Treatment for HIV Act of 2001, which would improve access to care for low-income people living with HIV by providing states the option of extending Medicaid eligibility to uninsured individuals in the earlier stages of the disease.

### **RECOMMENDATION #4**

#### **Rapid Development and Distribution of HIV Vaccines and Microbicides**

**WHEREAS**, the Council has previously articulated the critical importance of U.S. efforts to develop an effective and affordable HIV vaccines and preventative microbicides, most recently in its September 2000 report entitled, *AIDS: No Time to Spare*; and

**WHEREAS**, the Council believes that such efforts must take into consideration the many issues related to this goal, including scientific research, product development, clinical testing, and advance planning to ensure rapid worldwide distribution once safety and efficacy are established; and

**WHEREAS**, the Council recognizes the importance of public-private partnerships and continued U.S. collaboration with our global partners to the success of vaccine and microbicide development efforts;

**THEREFORE BE IT RESOLVED**, that the Council urges President George W. Bush to prioritize vaccine and microbicide-related research and to ensure swift and affordable, worldwide access when they are developed; and

**BE IT FURTHER RESOLVED**, that the Council urges President George W. Bush, and other senior members of his Administration to support policy reforms that would speed vaccine and microbicide development efforts and ensure access to such prevention tools in developing countries, including: tax credits for companies engaged in research and development; tiered-pricing policies; and the availability of a global fund to ensure purchase of and widespread distribution in developing countries as soon as they are available.

#### **RECOMMENDATION #5**

##### **Improved Coordination and Continued Leadership in the Global Fight Against HIV/AIDS**

**WHEREAS**, continued and expanded leadership from the United States government (USG) is essential to the global effort to bring an end to the AIDS pandemic; and

**WHEREAS**, that support has political, financial, and diplomatic dimensions that require coordinated and comprehensive support by various parts of the USG; and

**WHEREAS**, by virtue of its wealth, might, and authority the USG is in a unique and powerful position to insure a comprehensive, compassionate, and urgent response to the global AIDS pandemic;

**WHEREAS**, the Council is concerned that funding restrictions for international family planning programs interfere with their critical work to provide lifesaving information and tools for preventing the spread HIV/AIDS and other sexually transmitted diseases in poor countries;

**THEREFORE BE IT RESOLVED**, that the Council urges President George W. Bush, Secretary of Health and Human Services Tommy G. Thompson, Secretary of State Colin Powell, and other members of the Administration to vigorously pursue all opportunities to provide leadership on stopping the spread of HIV/AIDS, including regular meetings of the G-8, of Health, Finance & Defense Ministers, and of UNAIDS Programme Control Board; and

**BE IT FURTHER RESOLVED THAT**, the Council urges that the Administration support a U.S. contribution of at least \$1 billion annually to the newly established Global AIDS and Health

Fund, using newly appropriated funds rather than depleting already under-funded bilateral HIV and health programs; and establish as a matter of principle that the administration of the Global AIDS and Health Fund include developing countries as members and decision-makers, make funds available to non-governmental, as well as government entities, and that it deploy resources swiftly (consistent with previously issued recommendation of National Organizations Responding to AIDS).

**BE IT FURTHER RESOLVED THAT**, the Council urges the Administration to continue to promote a global response to AIDS that is comprehensive, consistent with the recommendations of UN Secretary-General Kofi Annan, and that it include programs of care and treatment, prevention, and research that are mutually supportive and of equal priority.

### **RECOMMENDATION #6**

#### **Improved Dissemination of Factual and Truthful Educational Information Regarding HIV Prevention and Sexual Health**

**WHEREAS**, there is a continuing need to educate individuals who do not know how to prevent HIV transmission; and

**WHEREAS**, half of all new HIV infections occur in people under the age of 25 and a quarter of the new infections are among those under 21; and

**WHEREAS**, condoms have been scientifically proven to prevent HIV transmission; and

**WHEREAS**, the overwhelming majority of Americans support comprehensive sexuality education for our youth, which is defined as programs that emphasize the benefits of abstinence while also teaching about disease prevention methods and contraception;

**WHEREAS**, the Council is concerned about the politicization of HIV prevention through the emphasis on abstinence-only education;

**THEREFORE BE IT RESOLVED**, that the Council urges President George W. Bush, Secretary of Health and Human Services Tommy G. Thompson to commit to providing comprehensive sexuality education programs that incorporate detailed, age-appropriate content consistent with the sound public health research presented in the Surgeon General's *Call to Action to Promote Sexual Health and Responsible Sexual Behavior*.