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THE WHITE HOUSE
WASHINGTON

THE CLINTON ADMINISTRATION
A RECORD OF FIGHTING THE AIDS EPIDEMIC

Our common goal must ultimately be a cure, a cure for all those who are living with HIV, and a vaccine to protect all the rest of us from the virus. A cure and a vaccine: that must be our first and top priority. – President Clinton, December 6, 1995

It has been more than 15 years since the epidemic of HIV/AIDS struck our nation. In that time, more than 600,000 Americans have been diagnosed with AIDS and more than 300,000 men, women, and children have died of AIDS. President Clinton has worked hard to reinvigorate the response to HIV and AIDS, providing new national leadership, substantially greater resources, and a closer working relationship with affected communities. Funding for AIDS research has increased by 50%, and funding for HIV prevention has increased 27%. Funding for the Ryan White CARE Act has tripled. The Food and Drug Administration has accelerated its drug approval process to record times, taken steps to increase access by women to clinical trials, and issued a new rule requiring better data collection on children. The President has preserved the Medicaid program, providing care to 50 percent of people with AIDS, including 92 percent of children with AIDS.

The Centers for Disease Control estimate that nearly one million Americans may currently be living with HIV, and up to 60,000 Americans are being infected with HIV every year. Women, communities of color, and adolescents are experiencing particularly high rates of infection. That is why President Clinton will continue to work to ensure that our nation responds aggressively and compassionately to the challenges created by HIV and AIDS. This fight will not be over until we have a cure and a vaccine to protect all Americans from this deadly epidemic.

PROVIDING NATIONAL LEADERSHIP

Creating the White House Office of National AIDS Policy. Acting as representative to the President, this office brings greater visibility and direction to the war on AIDS by coordinating and focusing federal AIDS policy and initiatives.

Appointing a National Advisory Council. The President created the Presidential Advisory Council on HIV/AIDS to provide him and his Administration with expert outside advice and clear recommendations on how the federal government should respond to the AIDS epidemic.

Providing Forums to Develop National Strategy. President Clinton convened the first White House Conference on HIV and AIDS as well as the first White House Native American AIDS Policy meeting to encourage multi-level cooperation and a continued dialogue between the various communities fighting this epidemic.

Fighting Discrimination. President Clinton supported the Kennedy-Kassebaum Health Insurance and Portability Act, which bans insurance discrimination against people with pre-existing medical conditions including HIV/AIDS; led the fight to repeal the discriminatory "Dornan Amendment," which would have discharged all HIV+ military personnel; and continues to enforce the Americans with Disabilities Act, which prohibits discrimination against people living with HIV/AIDS. Additionally, the Administration has resolved nearly 800 cases alleging employment discrimination, obtaining monetary benefits of over \$6.1 million.

Pushing for an AIDS Vaccine. On May 18, 1997, the President challenged the nation to develop an AIDS vaccine within the next ten years. He has supported that goal by dedicating an AIDS vaccine research center at the National Institutes of Health and encouraging domestic and international collaboration among governments, medical communities and service organizations.

INVESTING IN RESEARCH

Supporting the National Institutes of Health. The Administration has increased NIH AIDS research funds by 50% in five years. In 1993, President Clinton signed the NIH revitalization Act creating a permanent Office of AIDS Research at NIH and investing it with new authority to plan and carry out the AIDS research agenda. He appointed Nobel Prize winner Dr. Harold Varmus to head NIH and world renowned immunologist Dr. William Paul to head OAR.

Accelerating AIDS Drug Approval to Record Times. Since 1993, the Food and Drug Administration has approved 9 new AIDS drugs, 20 new drugs for AIDS-related conditions, and three new diagnostic tests. Included in the approvals are a class of drugs known as protease inhibitors, which, in combination with previous drugs, have shown tremendous promise in the treatment of HIV progression.

Reducing Perinatal Transmission of HIV. The President is working aggressively with states to eliminate perinatal transmission of HIV. As a result of Public Health Service guidelines recommending the use of AZT by HIV+ pregnant women, the number of infants with perinatally acquired HIV dropped 43 percent between 1992 and 1996.

Developing the Forum for Collaborative HIV Research. This new public-private group is designed to catalyze collaborations among government researchers, pharmaceutical companies, third-party payors and the community to capitalize on recent scientific advances and learn how to optimally use available treatment regimens.

INVESTING IN CARE

Supporting the Ryan White CARE Act. President Clinton in five years has tripled funding for the Ryan White CARE Act, the largest distributor of funds for medical and support services to people living with HIV and AIDS. In 1996, the Administration earmarked Ryan White funds for the AIDS Drug Assistance Program to help those without insurance obtain much needed prescription drugs; since then, ADAP funds have increased by 450%.

Providing Housing and Mental Health Assistance. Since coming to office, President Clinton has doubled funds for the Department of Housing and Urban Development's Housing Opportunities for People With AIDS program. He also awarded the first federal grants through the Substance Abuse and Mental Health Administration to develop comprehensive mental health services for persons living with HIV/AIDS as well as their families and partners.

Protecting Medicaid and Social Security coverage. The President fought to preserve Medicaid coverage for people living with AIDS. Nearly 50% of people with AIDS and 92% of children with AIDS rely on Medicaid for health coverage. He also revised eligibility rules for Social Security Disability Insurance to increase the number of HIV+ persons who qualify for benefits.

INVESTING IN PREVENTION

Supporting the Centers for Disease Control. The Administration has increased funds for HIV prevention at the CDC by 27% in five years. Under the leadership of the Clinton Administration, the CDC reorganized its AIDS prevention efforts to foster greater overall coordination and enhance efforts to reduce sexually transmitted diseases and tuberculosis. The President appointed Dr. David Satcher (recently nominated as U.S. Surgeon General) to head the CDC and Dr. Helene Gayle to head the CDC Center for HIV, STD & TB Prevention.

Reaching Out to Local Communities. President Clinton launched a nationwide HIV prevention community planning process to give local communities more authority over the shape and direction of AIDS prevention efforts. He also launched the Prevention Marketing Initiative, focusing on the risk to young adults with frank public service announcements recommending both sexual abstinence and the consistent use of latex condoms.

Keeping Water Clean. The President issued combined CDC and Environmental Protection Agency guidelines recommending steps to purify drinking water in vulnerable populations against *Cryptosporidium*, which can be fatal to those with compromised immune systems.

Increasing Access to HIV Prevention Services for Youth. In a directive issued on World AIDS Day 1997, President Clinton instructed each Federal agency to identify all programs under its control that offer opportunities to youth for preventing HIV infection and develop within 180 days a plan through which those programs can increase preventative education as well as support services for those already infected.

HIV/AIDS ACCOMPLISHMENTS OF THE CLINTON ADMINISTRATION

Our common goal must ultimately be a cure, a cure for all those who are living with HIV, and a vaccine to protect all the rest of us from the virus. A cure and a vaccine: that must be our first and top priority.

*President William Jefferson Clinton
The White House Conference of HIV and AIDS
December 6, 1995*

It has been more than 15 years since the epidemic of HIV/AIDS struck our nation. In that time, more than 600,000 Americans have been diagnosed with AIDS and more than 300,000 men, women, and children have died of AIDS. President Clinton has worked hard to reinvigorate the response to HIV and AIDS, providing new national leadership, substantially greater resources, and a closer working relationship with affected communities. Funding for AIDS research has increased by 50%, and funding for HIV prevention has increased 27%. Funding for the Ryan White CARE Act has tripled, while the Food and Drug Administration has accelerated its drug approval process to record times. The President has preserved the Medicaid program, providing care to 50 percent of people with AIDS, including 92 percent of children with AIDS.

Much more needs to be done. The Centers for Disease Control estimate that nearly one million Americans may currently be living with HIV, and up to 60,000 Americans are being infected with HIV every year. Women, communities of color, and adolescents are experiencing particularly high rates of infection. That is why President Clinton will continue to work to ensure that our nation responds aggressively and compassionately to the challenges created by HIV and AIDS. This fight will not be over until we have a cure and a vaccine to protect all Americans from this deadly epidemic.

I. A RECORD OF PRESIDENTIAL ACCOMPLISHMENT

◆ Providing National Leadership

- Increasing overall discretionary AIDS funding by 62% during the first term. *update?*
- ✓ - Creating the White House Office of National AIDS Policy to direct and coordinate federal AIDS policy and initiatives.
- ✓ - Appointing the Presidential Advisory Council on HIV/AIDS to provide thorough recommendations to the President regarding federal responses to HIV and AIDS.
- ✓ - Convening the first White House Conference on HIV and AIDS.
- ✓ - Convening the first White House Native American AIDS Policy meeting.
- ✓ - Challenging the Nation to develop an AIDS vaccine within the next ten years and providing federal support to that end through the AIDS Vaccine Initiative.

◆ Investing in Research

- ✓ - Increasing AIDS research funding through NIH by 50% in four years.
- ✓ - Signing the NIH Revitalization Act of 1993, creating a permanent Office of AIDS Research at NIH and investing it with new authority to plan and carry out the AIDS research agenda.
- ✓ - Appointing Nobel Prize winner Dr. Harold Varmus to head the National Institutes of Health and Dr. William Paul, world-renowned immunologist, to head the Office of AIDS Research.
- ✓ - Accelerating AIDS drug approval to record times. Since 1993, the Food and Drug Administration has approved 9 new AIDS drugs, 20 new drugs for AIDS-related conditions, and three new diagnostic tests. Included in the approvals are a class of drugs known as protease inhibitors, which, in combination with previous drugs, have shown tremendous promise in the treatment of HIV progression.
- ✓ - Working aggressively with states to reduce perinatal transmission of HIV. As a result of Public Health Service guidelines recommending the use of AZT by HIV+ pregnant women, the number of infants with perinatally acquired HIV dropped 43 percent between 1992 to 1996.
- ? - Launching a four-year \$100 million effort to develop topical microbicides to enable women to protect themselves from HIV transmission.
- ✓ - Facilitating the creation of the Forum for Collaborative HIV Research to identify research opportunities to improve care for people with HIV.

◆ Investing in Care

- ✓ - Tripled funding for the Ryan White CARE Act.
- ✓ - Increasing federal funding by 450% for the AIDS Drug Assistance Program to help those without insurance coverage obtain much needed prescription drugs.
- ✓ - Providing a 96% increase to the Department of Housing and Urban Development's Housing Opportunities for People with AIDS program.
- ✓ - Fighting to preserve the Medicaid guarantee of coverage for people living with AIDS. Nearly 50 percent of people with AIDS and 92 percent of children with AIDS rely on Medicaid for health coverage.
- ✓ - Revising eligibility rules for Social Security Disability Insurance to increase the number of individuals living with HIV who qualify for benefits.
- ✓ - Awarding the first federal grants through the Substance Abuse and Mental Health Administration to develop mental health services for persons living with HIV/AIDS and their families and partners.

◆ Investing in Prevention

- ✓ - Increasing funding for AIDS prevention through the CDC by 27 percent.
- ✓ - Launching the community planning partnership, which empowers local communities to make decisions about the distribution of AIDS prevention funds.
- ✓ - Launching the Prevention Marketing Initiative, focusing on the risk to young adults (ages 18 to 25) with frank public service announcements recommending sexual abstinence and the correct and consistent use of latex condoms.

accurate
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since FY 93.

- ✓ - Reorganizing AIDS prevention efforts at the Centers for Disease Control and Prevention to foster greater coordination with efforts to reduce sexually transmitted diseases and tuberculosis.
- ✓ - Launching a nationwide CDC-sponsored HIV prevention community planning process that gives local communities more authority over the shape and direction of AIDS prevention efforts, ensuring that programs are directed at those at greatest risk in each community.
- ✓ - Issuing combined CDC and EPA guidelines recommending steps to purify drinking water to purify vulnerable populations against *Cryptosporidium*, which can be fatal to those with compromised immune systems.
- ✓ - Appointing Dr. David Satcher (recently nominated as U.S. Surgeon General, confirmation pending Senate approval) to head the CDC and Dr. Helene Gayle to head the CDC Center for HIV/STD/TB Prevention.

II. RESEARCH DEVELOPMENTS & OPPORTUNITIES FOR PROGRESS

◆ Therapeutics

Implications of Viral Levels

NIH-sponsored research indicates that decreasing the amount of HIV in the blood can significantly slow how quickly a person becomes ill, and can also decrease the chance of transmission from mother to child. This finding has tremendous implications for therapy. Studies indicate that combination therapy (i.e. the use of one or more anti-retroviral drugs), especially where a protease inhibitor (the newest class of anti-retroviral drugs) is used, provides the greatest benefit for the patients. However, this approach is new and we still do not know the best time to start therapy, to stop therapy, to change therapy, and how long these effects will last. More research is needed.

Discovery of New Receptors

The breakthrough discovery of new chemokine receptors (CCR5 and CXCR4 or fusin are receptors on the cell where HIV binds) has offered exciting new avenues for drug and vaccine development. Research indicates that people who have defective or missing receptors are much more resistant to becoming infected.

◆ Prevention

✓ **Vaccines**

A vaccine that will decidedly control new infections both in the U.S. and abroad is desperately needed. New generations of vaccines, including DNA vaccines, are now in early development. Research efforts in the HIV vaccine arena will have important implications for developing vaccines for other diseases such as Tuberculosis. On May 18, 1997, President Clinton challenged the nation to commit itself to the goal of developing an AIDS vaccine within the next ten years. The President also announced a number of important initiatives to help fulfill this commitment, including high-level

international collaboration, a dedicated research center for AIDS vaccine research at NIH, and outreach to scientists, pharmaceutical companies, and patient advocates to maximize the involvement of both private and public sectors in the development of an AIDS vaccine.

✓ **Other Prevention Efforts** — *see ? earlier*

Preventing HIV infection through behavioral modification and/or a microbicide (a mechanical or chemical barrier method that blocks infection) also offers tremendous hope. Secretary Shalala has promised \$100 million over the next four years (announcement made July 1996) for microbicide research and development.

III. ROLE OF THE VICE PRESIDENT

◆ **The Forum for Collaborative HIV Research**

- ✓ The Vice President has been intimately involved in developing the Forum for Collaborative HIV Research. This new public-private group is designed to catalyze collaborations among government researchers, pharmaceutical companies, third-party payors and the community to capitalize on recent scientific advances and learn how to optimally use available treatment regimens.

◆ **Fighting Discrimination: Standing Up for the Rights of People with AIDS**

- ✓ — Vigorously enforced the Americans with Disabilities Act, which prohibits discrimination against people with HIV/AIDS.
- ✓ — Resolving nearly 800 charges alleging employment discrimination against people with HIV and AIDS, obtaining monetary benefits of more than \$6.1 million.
- ✓ — Led the fight to repeal the discriminatory “Dornan Amendment,” which would have discharged all HIV-positive military personnel.
- ✓ — Supported the Kennedy-Kassebaum Health Insurance and Portability Act, which bans insurance discrimination against people with pre-existing medical conditions including HIV/AIDS.
- Using the White House “bully pulpit” to speak out against AIDS discrimination.

IV. THE CHALLENGES AHEAD

President Clinton continues to seek to improve the national response to HIV and AIDS. The Clinton Administration is working closely with business leaders, religious leaders, community organizations, the pharmaceutical industry and members of the affected community to increase such efforts by:

- ◆ Eliminating barriers to AIDS vaccine and drug development and approval by increasing cooperation between the federal government and the pharmaceutical industry on AIDS research and drug development.

- ◆ Eliminating barriers to HIV-related services so that all individuals living with HIV/AIDS receive the medical care and treatment they need and deserve.
- ◆ Continuing to seeking additional funding for AIDS research, prevention and care.
- ◆ Challenging Congress to retain the federal guarantee of Medicaid coverage for people living with HIV and AIDS.
- ◆ Establishing a national goal to reduce the number of new HIV infections each year “until there are none.”
- ◆ Working to eliminate AIDS-related discrimination in the workplace, health care institutions, employment and housing.
- ◆ Collaborating with business leaders to increase workplace AIDS education to help reduce the stigma attached to HIV.
- ◆ Working with parents, schools, clergy and youth advocates to enhance prevention efforts and reduce the number of young adults becoming infected with HIV.
- ◆ Eliminating perinatal transmission of HIV.
- ◆ Developing a thorough yet private HIV surveillance system to expand our tracking of the epidemic as new AIDS cases decrease while HIV infection continues to increase.
- ◆ Increasing education and prevention efforts with federal and state correctional facilities.

Office of HIV/AIDS Policy

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HHS FACT SHEET

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES

September 29, 1997

Contact: HHS Press Office
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CLINTON ADMINISTRATION RECORD ON HIV/AIDS

***Overview:** An estimated 650,000 to 900,000 Americans are believed to be living with HIV, the virus that causes AIDS. Since the AIDS epidemic began in 1981, more than 600,000 Americans have been diagnosed with AIDS and more than 370,000 men, women, and children have lost their lives to this disease.*

The Clinton Administration has responded aggressively to the significant threat posed by HIV/AIDS with increased attention to research, prevention, and treatment. Overall funding for AIDS-related programs increased by 55 percent in the first four years of the Clinton Administration, with funding for AIDS care under the HHS Health Resources and Services Administration-administered Ryan White CARE Act increasing by 158 percent and assistance for the purchase of AIDS drugs nearly tripling. President Clinton's FY 1998 budget plan continues this commitment, proposing over \$1 billion for Ryan White activities -- \$40 million more than in 1997. The budget also includes \$634 million for CDC's HIV prevention activities -- \$20 million more than in 1997 -- and \$1.5 billion to continue research efforts in HIV infection and AIDS supported by NIH.

At the same time, the Administration has sharpened the focus of its AIDS programs, establishing a new Office of National AIDS Policy at the White House. The Administration also convened the first-ever White House Conference on HIV and AIDS in December 1995, and released the first National AIDS Strategy in December 1996. In addition, in May 1997, President Clinton announced a comprehensive AIDS vaccine research initiative designed to lead to the development of an AIDS vaccine within the next 10 years.

Today, HIV prevention and education efforts are making real inroads, new drugs are providing vast improvements in the treatment of HIV and AIDS, and new treatment guidelines released by HHS on June 19, 1997 are giving health professionals much needed guidance and helping to standardize care of individuals with HIV and AIDS. As a result of these improvements, CDC recently reported that in 1996, for the first time in the history of the AIDS epidemic, the number of Americans diagnosed with AIDS declined, falling by 6 percent for Americans over 12 between 1995 and 1996. In addition, CDC has reported that HIV/AIDS mortality declined 26 percent between 1995 and 1996, falling from the leading cause of death among 25-44 year olds to the second leading cause of death in that age group. The CDC has also reported a slowing in the epidemic overall and a sharp decline in the number of AIDS cases in infants and children.

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HHS Spending on HIV/AIDS

In the four budgets approved under President Clinton, spending for AIDS research, prevention, and treatment increased by 55 percent. These increases include:

(in thousands)

<u>Program</u>	<u>FY93</u>	<u>FY97</u>	<u>FY93-97 Change</u>	<u>President's FY98 Plan</u>
Research (NIH)	\$1,071,457	\$1,501,720	+40%	\$1,541,000
Prevention (CDC)	\$ 498,263	\$ 618,081	+24%	\$634,000
Treatment (HRSA)	\$ 385,345	\$ 996,252	+158%	\$1,036,000

Note: Altogether, discretionary AIDS-related spending by HHS in FY 1997 will total \$3.2 billion, an increase of 55 percent from FY 1993. An additional \$2.8 billion is expected to be expended in FY 1997 for AIDS care under Medicare and Medicaid. It is estimated that more than 50 percent of Americans living with AIDS rely on Medicaid for their health care coverage.

ADMINISTRATION INITIATIVES ON HIV/AIDS

Under President Clinton, a wide array of initiatives have been undertaken including:

AIDS Policy. The President created the Office of National AIDS Policy within the White House to advise him on AIDS policy issues and coordinate interdepartmental activities.

AIDS Conference. On December 6, 1995, the President convened the first White House Conference on HIV and AIDS in the history of the epidemic, bringing together more than 300 experts, activists, and citizens from 37 states, the District of Columbia, and Puerto Rico for a full day of discussions of key issues.

AIDS Vaccine Initiative. On May 18, 1997, President Clinton challenged the nation to commit itself to the goal of developing an AIDS vaccine within the next ten years. The President also announced a number of important initiatives to help fulfill this commitment, including high-level international collaboration, a dedicated research center for AIDS vaccine research at NIH, and outreach to scientists, pharmaceutical companies, and patient advocates to maximize the involvement of both private and public sectors in the development of an AIDS vaccine.

AIDS Strategy. On December 17, 1996, the Clinton Administration released the first National AIDS Strategy, establishing goals for the nation and opportunities for immediate progress.

Advisory Council. The President created the Presidential Advisory Council on HIV and AIDS to provide him and his Administration with expert outside advice on the ways in which the Federal government should respond to the HIV/AIDS epidemic.

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Disability Eligibility. The Social Security Administration published revised regulations expanding the list of health manifestations that will be considered in determining eligibility due to HIV/AIDS for Social Security and Supplemental Security Income disability benefits.

Drug Approval. Since 1993, the FDA has approved 9 new AIDS drugs and 20 new drugs for AIDS-related conditions, and accelerated approval to record times. Included in those approvals are a new class of drugs known as protease inhibitors, which show tremendous promise in the treatment of HIV disease. In March 1997, the FDA approved the first protease inhibitor with labeling for use in children.

Housing. The Department of Housing and Urban Development has established the National Office of HIV/AIDS Housing to assist people with HIV/AIDS to pay for housing. Funding for the Housing Opportunities for People with AIDS program has increased by 96 percent. HUD and HHS have launched collaborative efforts to combine housing assistance and medical and social services for people living with HIV/AIDS.

Mental Health. The Substance Abuse and Mental Health Administration awarded the first Federal grants to develop mental health services for persons living with HIV/AIDS and their families and partners.

Perinatal Transmission. Following the release of research findings from an NIH-sponsored AIDS clinical trial that indicated that use of AZT by HIV-infected pregnant women dramatically reduced the rate of HIV transmission from mother to infant, the U.S. Public Health Service issued guidelines recommending routine counseling and voluntary HIV testing for all pregnant women; and for those found to be HIV infected, the use of AZT during pregnancy.

Prevention. The Centers for Disease Control and Prevention (CDC) launched a nationwide HIV prevention community planning process that gives local communities more authority over the shape and direction of AIDS prevention efforts, ensuring that programs are directed at those at greatest risk in each community. The CDC conducts prevention research and provides prevention science to communities and state and local health and education departments nationwide to ensure that prevention efforts are based on sound behavioral and biomedical science.

Research. In one of his first acts in office, President Clinton signed the National Institutes of Health Revitalization Act of 1993, placing full responsibility for planning, budgeting, and evaluation of the AIDS research program at NIH in the Office of AIDS Research. The President requested and received the first federal plan for biomedical research on AIDS.

Ryan White CARE Act. Funding for the CARE Act, administered by the HHS Health Resources and Services Administration (HRSA), has increased by 158 percent. On May 20, 1996, President Clinton signed a five-year reauthorization of this program, guaranteeing assistance until the year 2001. Funding for AIDS drug assistance has increased by 221 percent.

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Treatment Guidelines. HHS released draft guidelines for treating HIV-infected adults, adolescents, children, and infants with antiretroviral drugs. The guidelines, developed by panels of AIDS clinicians and researchers, reflect the current state of knowledge about HIV disease and antiretroviral drugs, and will help standardize and improve the quality of care for HIV-infected persons in the United States.

Water Safety. The CDC and the Environmental Protection Agency issued guidelines recommending steps to purify drinking water to protect vulnerable populations against *Cryptosporidium*, which can be fatal to those with compromised immune systems.

Youth. The Office of National AIDS Policy issued a report to the President on the rising rates of HIV transmission among adolescents. The report noted that an average of at least one American teenager becomes infected with HIV every hour of every day and recommended steps to increase youth involvement in AIDS prevention, care, and research efforts.

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1998 HEALTH CARE BUDGET
HISTORIC HEALTH INVESTMENTS IN CRITICAL AREAS SUCH AS BIOMEDICAL
RESEARCH, PREVENTION, AND TREATMENT
November 13, 1997

Today, the President signed into law the Labor-HHS-Education Appropriations bill, legislation which contains historic health investments in critical areas. This important bill expands the nation's biomedical research investment by nearly \$1 billion, extends AIDS prevention efforts and treatments to more Americans, takes new steps to prevent chronic and environmental diseases, such as diabetes, heart disease, and cancer, improves health care in underserved rural areas, and enhances efforts to prevent and control infectious diseases.

- **A Historic Investment In Biomedical Research.** The Labor-HHS bill increases funding at the National Institutes of Health (NIH) by over \$900 million, for a total of \$13.6 billion for NIH in FY 1998. These new increases will be used to advance research in a number of critical areas, such as cancer research, the Human Genome Project, heart disease, and mental health research. This funding will also support a new AIDS vaccine center which will help fulfill the President's commitment to develop an AIDS vaccine.
- **Increased Funding For The Ryan White Care Act By Over \$150 Million.** The bill increases funding for the Ryan White Care Act by \$153.5 million, which helps prevent and treat HIV and AIDS. The bill includes about \$118 million for the AIDS Drug Assistance Program (ADAP), which helps low-income people with HIV get access to promising new therapies. During any given month, ADAP serves an estimated 40,000 people with HIV who have limited or no coverage to private insurance or Medicaid.
- **New Steps to Prevent Chronic and Environmental Diseases.** For example, this new funding will help improve local diabetes prevention and control programs, establish comprehensive State diabetes prevention programs, and implement at National Diabetes Education Prevention Program to educate Americans about how to take the necessary preventive precautions against this disease which affects over 16 million Americans. Similar programs will be established with this \$50 million increase for cancer, lead poisoning, birth defects and disabilities, fetal alcohol syndrome, and heart disease, the nation's leading killer.
- **New Efforts to Improve Health Care in Rural Communities.** The bill includes a nearly 20 percent increase for rural outreach grants, which support projects that demonstrate new and innovative ways to extend health care services to rural communities, such as improving the use of telemedicine as well as

enhancing outreach efforts and information dissemination to underserved rural areas.

- **New Steps to Prevent and Control Infectious Diseases.** The bill includes a \$27 million increase to prevent and control emerging and reemerging infectious diseases. New funding will be used to improve prevention efforts and to strengthen our ability to respond to outbreaks of infectious diseases, including Lyme disease, infectious diseases in child care settings and foodborne diseases.

The Clinton Administration A Record of Inclusion of Gay and Lesbian Americans

On November 8, 1997, President Clinton will deliver the keynote address to the Human Rights Campaign National Dinner, where he will highlight the diversity that is America's strength and discuss how we must all work together to solve our nation's problems.

Fighting Discrimination

Prohibiting Discrimination against Gays and Lesbians in the Federal Workforce.

Under President Clinton, federal agencies implemented non-discrimination policies that include gays and lesbians and he issued an executive order mandating that security clearances no longer be denied based on sexual orientation.

Fighting Discrimination in the Workplace. President Clinton endorses passage of the Employment Non-Discrimination Act (ENDA), a bill to outlaw discrimination in hiring, firing and promotions based on sexual orientation. The President's endorsement of ENDA in October 1995 makes him the first U.S. President ever to back civil rights legislation for gays and lesbians.

Fighting Gay and Lesbian Hate Crimes. President Clinton signed the Hate Crimes Sentencing Enhancement Act, as part of the 1994 Crime Control Act. The bill covers those victims of hate crimes who have been targeted because of their sexual orientation. The President will also convene the White House Conference on Hate Crimes on November 10, 1997.

Fighting Discrimination Against People With AIDS. President Clinton directed the Justice Department and the Equal Employment Opportunity Commission to vigorously prosecute those who discriminate against people with AIDS, leading to actions against health care providers and facilities that violate the Americans with Disabilities Act. More than 800 charges of AIDS-related discrimination have been settled in four years.

Fighting Discrimination Against People with AIDS in the Military. President Clinton successfully fought for the repeal of the Dornan amendment, which would have required the expulsion of all HIV-positive military service members regardless of their ability to do their jobs.

Opposed Anti-Gay Ballot Initiatives. President Clinton opposed anti-gay ballot initiatives in Colorado and Oregon. His two nominees to the Supreme Court voted to overturn Colorado's Amendment 2, declaring such initiatives unconstitutional

violations of the Equal Protection clause of the Constitution.

Helping Those Fleeing Persecution Because of Their Sexual Orientation. President Clinton's Administration is the first ever to permit asylum for gays and lesbians facing persecution in other countries.

 **Banning Insurance Discrimination for Pre-Existing Conditions such as AIDS.** Fought for and signed the Kennedy-Kassebaum Health Insurance Portability and Accountability Act, which bans insurance discrimination against people with pre-existing medical conditions including HIV/AIDS.

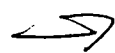
Fighting Harassment Based on Sexual Orientation. The Department of Education has issued policy guidance on sexual harassment of students, which includes certain forms of harassment based on sexual orientation.

Welcoming the Contributions to Public Service of All Americans

President Clinton has Appointed the Most Inclusive Administration in History. The President has appointed over 130 openly gay and lesbian people to his administration, including Virginia Apuzzo as Assistant to the President for Administration, the first openly gay or lesbian Assistant to the President. The President has also nominated Jim Hormel to be U.S. Ambassador to Luxembourg -- if confirmed he would be the first-ever openly gay United States ambassador.

Reaching Out to All Communities. President Clinton named the first Presidential Liaison to the gay and lesbian community.

Working to Save Lives and Improve Health Care

 **Dramatically Increasing Overall AIDS Funding.** The Clinton Administration has responded aggressively to the significant threat posed by HIV/AIDS with increased attention to research, prevention and treatment. President Clinton increased public health spending for HIV/AIDS programs by over 56 percent, including a 186 percent increase for Ryan White CARE programs and a 40 percent rise for AIDS-related research. The 1998 budget also includes \$634 million for CDC's HIV prevention activities and \$1.5 billion to continue research efforts in HIV infection and AIDS supported by NIH.

Saving Lives. In 1996, for the first time in the history of the AIDS epidemic, the number of Americans diagnosed with AIDS declined, falling by 6 percent for Americans over 12 between 1995 and 1996. In addition, HIV/AIDS mortality declined 26 percent between 1995 and 1996, falling from the leading cause of death among 25-44 year olds to the second leading cause of death in that age group. There has been a slowing in the epidemic overall and a sharp decline in the number of AIDS cases in infants and children.[Centers for Disease Control, 7/97]

→ **Increasing AIDS Drug Assistance.** Funding for AIDS drug assistance has increased by 221 percent during the Clinton Administration. This program provides new life-prolonging drugs to people with HIV and AIDS.

→ **Accelerating AIDS Drug Approvals in Record Time.** President Clinton convened the National Task Force on AIDS Drug Development, and removed dozens of bureaucratic obstacles to the effective and decent treatment of people with AIDS. In four years, FDA has approved 16 new AIDS drugs and 3 new diagnostic tests. Included in those approvals are a new class of drugs known as protease inhibitors, which show tremendous promise in the treatment of HIV disease.

→ **Protecting Medicaid:** The President fought for and won protection of the fight to preserve the Medicaid guarantee of coverage for the more than 50% of people living with AIDS who rely on Medicaid for health coverage.

Increasing Research. In one of his first acts in office, President Clinton signed the National Institutes of Health Revitalization Act of 1993, placing full responsibility for planning, budgeting, and evaluation of the AIDS research program at NIH in the Office of AIDS Research.

→ **Pushing for an AIDS Vaccine.** On May 18, 1997, President Clinton challenged the nation to commit itself to the goal of developing an AIDS vaccine within the next ten years. The President also announced a number of initiatives to help fulfill this commitment, including high-level international collaboration, a dedicated research center for AIDS vaccine research at NIH, and outreach to scientists, pharmaceutical companies and patient advocates to maximize the involvement of both the private and public sector in the development of an AIDS vaccine.

Focusing National Attention on a National Problem:

→ **Targeting Young People With Warnings of the Dangers of AIDS.** Launching the Prevention Marketing Initiative, focusing on the risk to young adults (18-25) with frank public service announcements.

→ **Creating a White House Office of National AIDS Policy.** This office is bringing greater direction and visibility to the war on AIDS, while also sharpening the focus of federal AIDS programs.

→ **A Presidential Advisory Council.** The President created the Presidential Advisory Council on HIV and AIDS to provide him and his Administration with expert outside advice on the ways in which the Federal government should respond to the HIV/AIDS epidemic.

→ **The Administration also Convened the First Ever White House Conference on HIV and AIDS.** On December 6, 1995, the President convened the first White House Conference on HIV and AIDS in the history of the epidemic, bringing together more than 300 experts, activists, and citizens from 37 states, the District of Columbia,

and Puerto Rico for a full day of discussions of key issues.



Office of the Director

Facsimile Transmittal Cover Sheet

To:	Glenda Simmons Office of National AIDS Policy
Phone:	202-632-1090
Fax:	202-632-1096

From:	Tammy Nunnally Office of Communications
Phone:	404-639-8895
Fax:	404-639-8910

Date: October 3, 1997

Number of Pages: 8 (Including cover)

Subject: Updating Accomplishments

Comments: I was only able to update the things that pertained to CDC. You'll have to get NIH, FDA, etc. to look over the other things because we don't have that information. Please call if you have any questions or need additional information.

President Clinton's HIV/AIDS Accomplishments

"Our common goal must ultimately be a cure, a cure for all those who are living with HIV, and a vaccine to protect all the rest of us from the virus. A cure and a vaccine, that must be our first and top priority." *President Clinton to the White House Conference of HIV and AIDS, December 6, 1995*

Between 1995 and 1996, AIDS incidence in people over age 12 declined 6% and AIDS-related deaths declined 23%

n:\potus\accompli.2wj

n:\potus\accompli.2bu

It has been more than 15 years since the epidemic of HIV/AIDS struck our nation. In that time, more than 500,000 Americans have been diagnosed with AIDS and more than 300,000 men, women, and children have died of AIDS. President Clinton has worked hard to reinvigorate the response to HIV and AIDS, providing new national leadership, substantially greater resources, and a closer working relationship with affected communities. Funding for AIDS research, prevention, and care has increased by 43 percent at a time when all government spending has been virtually frozen. Funding for the Ryan White CARE Act has more than doubled and the Food and Drug Administration has accelerated its drug approval process to record times. The President has preserved the Medicaid program, which provides care to 50 percent of people with AIDS, including 92 percent of children with AIDS.

Much more needs to be done. Today, an estimated 650,000 to 900,000 Americans are living with HIV and an average of 40,000 Americans become infected with HIV every year. Women, communities of color, and adolescents are experiencing particularly high rates of infection. That is why President Clinton will continue to work to ensure that our nation responds aggressively and compassionately to the challenges created by HIV and AIDS. This fight will not be over until we have a cure and a vaccine to protect all Americans from this deadly epidemic.

A RECORD OF ACCOMPLISHMENT

◆ Providing National Leadership

- Increasing overall AIDS funding by 56% in four years
- Creating the Office of National AIDS policy at the White House to provide greater direction and coordination for AIDS policy.
- Appointing the Presidential Advisory Council on HIV and AIDS.
- Convening the first-ever White House Conference on HIV and AIDS.

◆ Investing in Research

- Increasing AIDS research funding by 40.2% in four years.
- Signing the NIH Revitalization Act of 1993, creating a permanent Office of AIDS Research at NIH and vesting it with new authority to plan and carry out the AIDS research agenda.
- Appointing Nobel Prize winner Dr. Harold Varmus to head the National Institutes of Health and Dr. William Paul, world-renowned immunologist, to head the Office of AIDS Research.
- Accelerating AIDS drug approval to record times. Since 1993, the Food and Drug

Administration has approved 12 new AIDS drugs and two new diagnostic tests.

- * - Working aggressively with the states to reduce transmission of HIV from mother to child.

- Launching a four-year \$100 million effort to develop topical microbicides to allow women to protect themselves from HIV.

- Facilitating creation of the Forum for Collaborative HIV Research to identify research opportunities to improve care for people with HIV.

♦ Investing in Care

- Increasing funding for the Ryan White CARE Act 186.3% in four years.

- Tripling Federal funding for the AIDS Drug Assistance Program to help those without insurance coverage for prescription drugs.

- Increasing funding for Housing Opportunities for People with AIDS 96 percent.

- Fighting to preserve the Medicaid guarantee of coverage for people living with AIDS. Nearly 50 percent of people with AIDS and 92 percent of children with AIDS rely on Medicaid for health coverage.

- Revising eligibility rules for Social Security Disability Insurance to make it easier for people living with HIV to qualify for benefits.

♦ Investing in Prevention

- Increasing funding for AIDS prevention by 24 percent.

- Launching the community planning partnership, which empowers local communities to make decisions about the distribution of AIDS prevention funding.

- Launching the Prevention Marketing Initiative, focusing on the risk to young adults (18 to 25) with frank public service announcements recommending sexual abstinence and the correct and consistent use of latex condoms.

- Reorganizing AIDS prevention efforts at the Centers for Disease Control and Prevention to foster greater coordination with efforts to reduce sexually transmitted diseases and tuberculosis.

- Appointing Dr. David Satcher to head the CDC and Dr. Helene Gayle to head the CDC Center for HIV/STD/TB Prevention.

II. The Federal Response

Your Administration has been credited with making tremendous progress in the fight against AIDS. Progress since you took office includes:

- ♦ A 40 percent increase in NIH-supported AIDS research.

- ♦ A 158 percent increase in Ryan White AIDS Treatment grants.

- ♦ A 24 percent increase in CDC HIV prevention activities.

? - Not sure what this is referring to.

- ♦ A 96 percent increase for HUD's Housing Opportunities for People with AIDS program.

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- ◆ Strengthening the Office of AIDS Research at the National Institutes of Health.
- ◆ As a result of Public Health Service guidelines recommending the use of AZT by HIV-positive pregnant women and their newborns, a ⁴⁷ percent drop in the number of infants with perinatally-acquired HIV infection (from 1994 to 1995). 47% drop
from 92 to 96
✓
- ◆ Responding rapidly to FDA approval of a new class of AIDS therapies called protease inhibitors with increases in funding for State AIDS Drugs Assistance Programs.
- ◆ Easing of Social Security disability rules to speed approval of eligibility.
- ◆ Creating the Office of National AIDS Policy at the White House and the Presidential Advisory Council on HIV/AIDS.

III. Research Developments & Opportunities for Progress

A. THERAPEUTICS

Implications of Viral Levels

NIH-sponsored research indicates that decreasing the amount of HIV in the blood can significantly slow how quickly a person becomes ill, and can also decrease the chance of transmission from mother to child. This finding has tremendous implications for therapy. Studies indicate that combination therapy (i.e., use of one or more anti-retroviral drugs), especially where a protease inhibitor (the newest class of anti-retroviral drugs) is used, provides the greatest benefit for the patients. However, this approach is new and we still do not know the best time to start therapy, to stop therapy, to change therapy, and how long these effects will last. More research is needed.

Discovery of New Receptors

The breakthrough discovery of new chemokine receptors (CCR5 and CXCR4 or fusin are receptors on the cell where HIV binds) has offered exciting new avenues for drug and vaccine development. Research indicates that people who have defective or missing receptors are much more resistant to becoming infected.

B. PREVENTION

In response to the recommendations from the Report of the NIH AIDS Research Program Evaluation Task Force, NIH is developing a comprehensive HIV prevention science agenda. Areas of focus will include:

Vaccines. We desperately need a vaccine that will control new infections both in the U.S. and abroad. New generations of vaccines, including DNA vaccines, are now in early development. Research efforts in the HIV vaccine arena will have important implications for developing

IS it still being developed?

vaccines for other diseases such as Tuberculosis.

Other Prevention Efforts. Preventing HIV infection through behavioral modification and/or a microbicide (a mechanical or chemical barrier method that blocks infection) also offers tremendous hope. Secretary Shalala has promised \$100 million over the next four years for microbicide research and development.

↳ since when?

She made the announcement at the international AIDS Conference in July, 1996.

IV. Role of the Vice President

The Vice President has been intimately involved in developing the Forum for Collaborative HIV Research. This new public-private group is designed to catalyze collaborations among government researchers, pharmaceutical companies, third-party payors, and the community to capitalize on recent scientific advances and learn how to optimally use available treatment regimens.

The Vice President also has expressed interest in continuing efforts to expedite vaccine and microbicide research.

- ♦ **Fighting Discrimination: Standing Up for the Rights of People with AIDS**
 - Vigorously enforced the Americans with Disabilities Act, which prohibits discrimination against people with HIV/AIDS.
 - Resolving nearly 800 charges alleging employment discrimination against people with HIV and AIDS obtaining monetary benefits of more than \$6.1 million.
 - Leading the fight to repeal the discriminatory "Donnan Amendment," which would have discharged all HIV-positive military personnel.
 - Using the White House "bully pulpit" to speak out against AIDS discrimination.

Office of National AIDS Policy Accomplishment Highlights (1994-1997)

Background

On November 10, 1994, President Clinton named Patricia S. Fleming to serve as the nation's National AIDS Policy Director. In that capacity, Ms. Fleming served as the Administration's chief spokesman on issues related to HIV/AIDS. The President had created the Office of National AIDS Policy in 1993 to bring greater focus and direction to the Federal response to the epidemic of HIV/AIDS. Creation of such an office had been recommended by several advisory groups, including the National Commission on AIDS. Prior to her appointment, Fleming served as Special Assistant to Health and Human Services Secretary Donna E. Shalala. In that position, Fleming had helped to transform Federal efforts in response to the epidemic, including an aggressive AIDS education initiative aimed at young adults that advocated the use of latex condoms. She also was responsible for a greatly increased focus on the impact of HIV/AIDS on women and communities of color. Prior to her work at HHS, Fleming served as a key advisor to the late Representative Ted Weiss (D-NY), directing numerous investigations of the Reagan and Bush Administrations' response to HIV/AIDS.

Major Clinton Administration Accomplishments in HIV/AIDS

- Increased funding for AIDS research, prevention, and care by more than 50% in first four years.
- Increased funding for the Ryan White CARE Act by 158 percent and increased number of cities eligible for CARE Act funds from 34 to 49.
- Tripled funding for the AIDS Drug Assistance Programs, which helps low-income uninsured people with AIDS purchase needed therapies.
- Created the Office of National AIDS Policy at the White House to direct Federal AIDS policy.
- Signed the NIH Revitalization Act of 1993, creating a strengthened Office of AIDS Research at NIH and vesting it with authority to plan and carry out the AIDS research agenda.
- Accelerated AIDS drug approval to record times. Since 1993, the Food and Drug Administration has approved 16 new AIDS drugs and two new diagnostic tests. ✓
any more?
- Facilitated creation of the Forum for Collaborative HIV Research to identify research opportunities to improve care for people with HIV.
- Preserved the Medicaid guarantees of coverage for people living with AIDS. Nearly 50 percent of people with AIDS and 92 percent of children with AIDS rely on Medicaid for health coverage.
- Launched the community planning partnership, which empowers local communities to make decisions about the distribution of AIDS prevention funding.
- Vigorously enforced the Americans with Disabilities Act, which prohibits discrimination against people with HIV/AIDS.

Accomplishments

During her tenure as National Aids Policy Director, Patricia Fleming has focused her efforts on expanding access to high-quality care for people living with HIV/AIDS; increasing the focus of AIDS prevention efforts on young people; further increasing attention paid to the needs of women living with HIV/AIDS; representing the U.S. at all international forums on HIV/AIDS; and working to improve the coordination of government efforts and public-private partnerships. Among her accomplishments:

AIDS Funding. In the two budgets enacted during Fleming's tenure, total funding for AIDS research, prevention, treatment, and housing increased by ____%. This includes a ____% increase for the Ryan White CARE Act; a ____% increase for AIDS research; a ____% increase for AIDS prevention; and a ____% increase for AIDS housing programs.

White House Conference on HIV/AIDS. Ms. Fleming directed the convening of the first-ever White House Conference on HIV/AIDS, which was held on December 5, 1995. The Conference brought nearly 300 HIV/AIDS, advocates, activists, health care professionals, and others to the White House for a full day of discussion of the central demands of the epidemic. This historic conference has helped to shape the policies adopted by the Clinton Administration in the ensuing year, including a rapid increase in funding for AIDS drug assistance and vaccine research.

National AIDS Strategy. Fleming's office developed and released the first-ever National AIDS Strategy, establishing six central goals to guide all Federal efforts and laying out nearly three dozen opportunities for progress in 1997 alone. Development of a National AIDS Strategy had been recommended by the National AIDS Commission to bring greater focus and direction to Federal AIDS policies.

Youth Report. On March 5, 1996, Fleming delivered to President Clinton a report highlighting the particular challenges facing young Americans during the AIDS epidemic. The report, which noted that "at least one American teenager is becoming infected with HIV every hour of every day," has galvanized the national response to AIDS among young people. It has resulted in nearly a dozen changes in Federal AIDS policy to increase the focus on and the participation of youth in AIDS policy development, clinical trials, prevention programs, and other areas.

"Respect Yourself, Protect Yourself" Working with the Centers for Disease Control and Prevention, Fleming helped develop an innovative public service campaign directed at young adults featuring the real-life experiences of young people infected and affected by HIV/AIDS. The campaign continued the Federal advocacy for the use of condoms by those who are sexually active and also featured, for the first time, openly gay men speaking to their peers.

Medicaid. Early in the national debate over the future of Medicaid, Fleming spoke out against the potential impact of a State-run block grant on the lives of people living with HIV/AIDS. Fleming's advocacy of the rights of those individuals helped draw national attention to the concerns of people living with AIDS. More than 50 percent of Americans living with AIDS rely on Medicaid for their health care needs. When President Clinton vetoed the proposed Medicaid block grant he cited the need of people with AIDS as one of his reasons.

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AIDS Research. Working with Vice President Gore, Fleming helped to create the Forum for Collaborative HIV Research, a public-private partnership that is working to identify post-marketing clinical trials for AIDS drugs approved under the Food and Drug Administration's accelerated approval system. The Forum includes representatives of several Federal Agencies, pharmaceutical manufacturers, health care insurance companies, clinicians, researchers, and advocates for people living with HIV/AIDS.

AIDS Drug Assistance Programs. Fleming advocated for the creation of a specific "earmark" for funding for AIDS Drug Assistance Programs within the Ryan White CARE Act. Since its creation in 1995, that earmark has increased by 221 percent to \$167 million, bringing assistance to thousands of individuals who could not otherwise afford to purchase AIDS drugs.

Regional Briefings. In partnership with the Presidential Advisory Council on HIV/AIDS, the National AIDS Fund, and Funders Concerned About AIDS, Fleming conducted 13 regional briefings on AIDS policy, including 11 town hall meetings to hear directly from people living with HIV/AIDS about their needs and concerns. These briefings included visits to more than 50 community-based AIDS organizations.

International Leadership. Fleming serves on the board of the United Nations Global Program on AIDS (UNAIDS) and has represented the U.S. at the 1994 and 1996 International AIDS Conferences in Berlin and Vancouver as well as the Global AIDS Summit in Paris in 1995. Fleming has worked closely with the U.S. Agency for International Development and the Department of State to increase U.S. focus on the international demands of the epidemic.

(still?)
[you may not
have this
info.]

November 6, 1997

*spell check
please*

MEMORANDUM

TO: Todd "Sunshine" Summers
Daniel "Slappy" Montoya
Matthew "M²" Murguia
Bob "boobalabobala [Paul's suggestion for a nickname]" Soliz
Paul "Hi, may I please speak to Ms. Paula Yandura?" Yandura

FROM: Glenda and Anil

RE: Presidential Accomplishments

We are in the process of updating a public document detailing the Clinton Administration's HIV/AIDS related accomplishments. Attached is a draft version of that document. We have updated every section other than "The Challenges Ahead", which seems to be at least one to two years out of date.

Please take a few minutes to peruse the document and suggest improvements. Inclusions for the "The Challenges Ahead" will be most helpful.

Thank you!

HIV/AIDS ACOMPLISHMENTS OF THE CLINTON ADMINISTRATION

Our common goal must ultimately be a cure, a cure for all those who are living with HIV, and a vaccine to protect all the rest of us from the virus. A cure and a vaccine: that must be our first and top priority.

*President William Jefferson Clinton
The White House Conference of HIV and AIDS
December 6, 1995*

It has been more than 15 years since the epidemic of HIV/AIDS struck our nation. In that time, more than 600,000 Americans have been diagnosed with AIDS and more than 300,000 men, women, and children have died of AIDS. President Clinton has worked hard to reinvigorate the response to HIV and AIDS, providing new national leadership, substantially greater resources, and a closer working relationship with affected communities. Funding for AIDS research, prevention, and care has increased by 62 percent. Funding for the Ryan White CARE Act has more than doubled and the Food and Drug Administration has accelerated its drug approval process to record times. The President has preserved the Medicaid program, which provides care to 50 percent of people with AIDS, including 92 percent of children with AIDS.

Much more needs to be done. Today, an estimated 650,000 to 900,000 Americans are living with HIV and an average of 40,000 Americans become infected with HIV every year. Women, communities of color, and adolescents are experiencing particularly high rates of infection. That is why President Clinton will continue to work to ensure that our nation responds aggressively and compassionately to the challenges created by HIV and AIDS. This fight will not be over until we have a cure and a vaccine to protect all Americans from this deadly epidemic.

I. A RECORD OF PRESIDENTIAL ACCOMPLISHMENT

◆ Providing National Leadership

- Increasing overall discretionary AIDS funding by 62% in four years.
- Creating the White House Office of National AIDS Policy to direct and coordinate all federal AIDS policy and initiatives.
- Appointing the Presidential Advisory Council on HIV/AIDS to provide thorough recommendations to the President regarding issues related to HIV and AIDS.
- Convening the first White House Conference on HIV and AIDS.
- Challenging the Nation to develop an AIDS vaccine within the next ten years and providing federal support to that end with the AIDS Vaccine Initiative.

◆ Investing in Research

- Increasing AIDS research funding by 40.2% in four years.
- Signing the NIH Revitalization Act of 1993, creating a permanent Office of AIDS Research at NIH and investing it with new authority to plan and carry out the AIDS research agenda.

may want to look at PACITA's response for ideas.

Establishing the need for AIDS State of Union Address

- Appointing Nobel Prize winner Dr. Harold Varmus to head the National Institutes of Health and Dr. William Paul, world-renowned immunologist, to head the Office of AIDS Research.
- Accelerating AIDS drug approval to record times. Since 1993 the Food and Drug Administration has approved 8 new AIDS drugs, 19 new drugs for AIDS-related conditions and two new diagnostic tests. *Richard Klein - contact*
- Working aggressively with states to reduce perinatal transmission of HIV. As a result of Public Health Service guidelines recommending the use of AZT by HIV+ pregnant women, the number of infants with perinatally acquired HIV dropped 47 percent between 1992 to 1996.
- Launching a four-year \$100 million effort to develop topical microbicides to enable women to protect themselves from HIV transmission. *rich update*
- Facilitating the creation of the Forum for Collaborative HIV Research to identify research opportunities to improve care for people with HIV.

◆ Investing in Care

- Increasing funding for the Ryan White CARE Act by 158%.
- More than tripling Federal funding for the AIDS Drug Assistance Program to help those without insurance coverage for prescription drugs.
- Responding rapidly to FDA approval of a new class of AIDS drugs called protease inhibitors, which are now used with anti-retroviral drugs as part of combination drug therapy regimens, with increases in funding for State AIDS Drugs Assistance Programs.
- Doubling funding (96% increase) for HUD's Housing Opportunities for People with AIDS program.
- Fighting to preserve the Medicaid guarantee of coverage for people living with AIDS. Nearly 50 percent of people with AIDS and 92 percent of children with AIDS rely on Medicaid for health coverage.
- Revising eligibility rules for Social Security Disability Insurance help people living with HIV to qualify for benefits.

◆ Investing in Prevention

- Increasing funding for AIDS prevention by 24 percent.
- Launching the community planning partnership, which empowers local communities to make decisions about the distribution of AIDS prevention funds.
- Launching the Prevention Marketing Initiative, focusing on the risk to young adults (ages 18 to 25) with frank public service announcements recommending sexual abstinence and the correct and consistent use of latex condoms.
- Reorganizing AIDS prevention efforts at the Centers for Disease Control and Prevention to foster greater coordination with efforts to reduce sexually transmitted diseases and tuberculosis.
- Appointing Dr. David Satcher (recently nominated as U.S. Surgeon General, confirmation pending Senate approval) to head the CDC and Dr. Helene Gayle to head the CDC Center for HIV/STD/TB Prevention. *Melissa Shepherd, CDC*

II. RESEARCH DEVELOPMENTS & OPPORTUNITIES FOR PROGRESS

◆ Therapeutics

Implications of Viral Levels

NIH-sponsored research indicates that decreasing the amount of HIV in the blood can significantly slow how quickly a person becomes ill, and can also decrease the chance of transmission from mother to child. This finding has tremendous implications for therapy. Studies indicate that combination therapy (i.e. the use of one or more anti-retroviral drugs), especially where a protease inhibitor (the newest class of anti-retroviral drugs) is used, provides the greatest benefit for the patients. However, this approach is new and we still do not know the best time to start therapy, to stop therapy, to change therapy, and how long these effects will last. More research is needed.

Discovery of New Receptors

The breakthrough discovery of new chemokine receptors (CCR5 and CXCR4 or fusin are receptors on the cell where HIV binds) has offered exciting new avenues for drug and vaccine development. Research indicates that people who have defective or missing receptors are much more resistant to becoming infected.

◆ Prevention

Vaccines

A vaccine that will decidedly control new infections both in the U.S. and abroad is desperately needed. New generations of vaccines, including DNA vaccines, are now in early development. Research efforts in the HIV vaccine arena will have important implications for developing vaccines for other diseases such as Tuberculosis. On May 18, 1997, President Clinton challenged the nation to commit itself to the goal of developing an AIDS vaccine within the next ten years. The President also announced a number of important initiatives to help fulfill this commitment, including high-level international collaboration, a dedicated research center for AIDS vaccine research at NIH, and outreach to scientists, pharmaceutical companies, and patient advocates to maximize the involvement of both private and public sectors in the development of an AIDS vaccine.

Other Prevention Efforts

Preventing HIV infection through behavioral modification and/or a microbicide (a mechanical or chemical barrier method that blocks infection) also offers tremendous hope. Secretary Shalala has promised \$100 million over the next four years (announcement made July 1996) for microbicide research and development.

III. ROLE OF THE VICE PRESIDENT

◆ The Forum for Collaborative HIV Research

The Vice President has been intimately involved in developing the Forum for Collaborative HIV Research. This new public-private group is designed to catalyze collaborations among government researchers, pharmaceutical companies, third-party payors and the community to capitalize on recent scientific advances and learn how to optimally use available treatment regimens.

◆ Fighting Discrimination: Standing Up for the Rights of People with AIDS

- Vigorously enforced the Americans with Disabilities Act, which prohibits discrimination against people with HIV/AIDS.
- Resolving nearly 800 charges alleging employment discrimination against people with HIV and AIDS, obtaining monetary benefits of more than \$6.1 million.
- Leading the fight to repeal the discriminatory "Donnan Amendment," which would have discharged all HIV-positive military personnel.
- Using the White House "bully pulpit" to speak out against AIDS discrimination.

IV. THE CHALLENGES AHEAD

President Clinton continues to seek to improve the national response to HIV and AIDS. The Clinton Administration is working closely with business leaders, religious leaders, community organizations, the pharmaceutical industry and members of the affected community to increase such efforts by:

- ◆ Eliminating barriers to AIDS vaccine and drug development and approval. Vice President Gore is leading an effort to increase cooperation between the federal government and the pharmaceutical industry on AIDS research and drug development.
- ◆ Challenging Congress to retain the federal guarantee of Medicaid coverage for people living with HIV and AIDS.
- ◆ Seeking additional funding for AIDS research, prevention and care.
- ◆ Strongly supporting the Office of AIDS Research at NIH to provide greater focus and direction for our national AIDS research effort.
- ◆ Decreasing the number of children born HIV-infected by implementing the results of research demonstrating that mother to child transmission can be dramatically reduced through administration of AZT to women during pregnancy and delivery and to infants after birth.

- ◆ Establishing a national goal to reduce the number of new HIV infections each year "until there are none."
- ◆ Working to eliminate AIDS-related discrimination in the workplace, health care institutions, employment and housing.
- ◆ Collaborating with business leaders to increase workplace AIDS education to help reduce the stigma attached to HIV.
- ◆ Working with parents, schools, clergy and youth advocates to reduce the number of adolescents and young adults becoming infected with HIV.

Communities of color, women, gay/lesbian, youth
need to reduce infection

better prevention outreach
need for to do more behavior
research

PROGRESS

DRAFT---UPDATE IN PROGRESS

ONAP Accomplishments

would have discharged all HIV-positive military personnel.

Using the White House "bully pulpit" to speak out against AIDS discrimination.

**Office of National AIDS Policy
Accomplishment Highlights (1994-1997)**

Background

On November 10, 1994, President Clinton named Patricia S. Fleming to serve as the nation's National AIDS Policy Director. In that capacity, Ms. Fleming served as the Administration's chief spokesman on issues related to HIV/AIDS. The President had created the Office of National AIDS Policy in 1993 to bring greater focus and direction to the Federal response to the epidemic of HIV/AIDS. Creation of such an office had been recommended by several advisory groups, including the National Commission on AIDS. Prior to her appointment, Fleming served as Special Assistant to Health and Human Services Secretary Donna E. Shalala. In that position, Fleming had helped to transform Federal efforts in response to the epidemic, including an aggressive AIDS education initiative aimed at young adults that advocated the use of latex condoms. She also was responsible for a greatly increased focus on the impact of HIV/AIDS on women and communities of color. Prior to her work at HHS, Fleming served as a key advisor to the late Representative Ted Weiss (D-NY), directing numerous investigations of the Reagan and Bush Administrations' response to HIV/AIDS.

Accomplishments

During her tenure as National Aids Policy Director, Patricia Fleming focused her efforts on expanding access to high-quality care for people living with HIV/AIDS; increasing the focus of AIDS prevention efforts on young people; further increasing attention paid to the needs of women living with HIV/AIDS; representing the U.S. at all international forums on HIV/AIDS; and working to improve the coordination of government efforts and public-private partnerships. Among her accomplishments:

AIDS Funding. UPDATE IN PROGRESS

White House Conference on HIV/AIDS. Ms. Fleming ~~directed the convening~~ ^{convened} of the first-ever White House Conference on HIV/AIDS, which was held on December 5, 1995. The Conference brought nearly 300 HIV/AIDS, advocates, activists, health care professionals, and others to the White House for a full day of discussion of the central demands of the epidemic. This historic conference has helped to shape the policies adopted by the Clinton Administration in the ensuing year, including a rapid increase in funding for AIDS drug assistance and vaccine research.

National AIDS Strategy. Fleming's office developed and released the first-ever National AIDS Strategy, establishing six central goals to guide all Federal efforts and laying out nearly three dozen opportunities for progress in 1997 alone. Development of a National AIDS Strategy had been recommended by the National AIDS Commission to bring greater focus and direction to

what category is this now under? still OVP? otherwise should it be on another page?

DRAFT---UPDATE IN PROGRESS

Federal AIDS policies.

Youth Report. On March 5, 1996, Fleming delivered to President Clinton a report highlighting the particular challenges facing young Americans during the AIDS epidemic. The report, which noted that “at least one American teenager is becoming infected with HIV every hour of every day,” has galvanized the national response to AIDS among young people. It has resulted in nearly a dozen changes in Federal AIDS policy to increase the focus on and the participation of youth in AIDS policy development, clinical trials, prevention programs, and other areas.

“Respect Yourself, Protect Yourself.” Working with the Centers for Disease Control and Prevention, Fleming helped develop an innovative public service campaign directed at young adults featuring the real-life experiences of young people infected and affected by HIV/AIDS. The campaign continued the Federal advocacy for the use of condoms by those who are sexually active and also featured, for the first time, openly gay men speaking to their peers.

Medicaid. Early in the national debate over the future of Medicaid, Fleming spoke out against the potential impact of a State-run block grant on the lives of people living with HIV/AIDS. Fleming’s advocacy of the rights of those individuals helped draw national attention to the concerns of people living with AIDS. More than 50 percent of Americans living with AIDS rely on Medicaid for their health care needs. When President Clinton vetoed the proposed Medicaid block grant he cited the need of people with AIDS as one of his reasons.

AIDS Research. Working with Vice President Gore, Fleming helped to create the Forum for Collaborative HIV Research, a public-private partnership that is working to identify post-marketing clinical trials for AIDS drugs approved under the Food and Drug Administration’s accelerated approval system. The Forum includes representatives of several Federal Agencies, pharmaceutical manufacturers, health care insurance companies, clinicians, researchers, and advocates for people living with HIV/AIDS.

AIDS Drug Assistance Programs. Fleming advocated for the creation of a specific “earmark” for funding for AIDS Drug Assistance Programs within the Ryan White CARE Act. Since its creation in 1995, that earmark has increased by 221 percent to \$167 million, bringing assistance to thousands of individuals who could not otherwise afford to purchase AIDS drugs. *The new FY98 appropriations will change this.* ?

Regional Briefings. In partnership with the Presidential Advisory Council on HIV/AIDS, the National AIDS Fund, and Funders Concerned About AIDS, Fleming conducted 13 regional briefings on AIDS policy, including 11 town hall meetings to hear directly from people living with HIV/AIDS about their needs and concerns. These briefings included visits to more than 50 community-based AIDS organizations.

International Leadership. Fleming serves on the board of the United Nations Global Program

DRAFT---UPDATE IN PROGRESS

on AIDS (UNAIDS) and ~~has~~ represented the U.S. at the 1994 and 1996 International AIDS Conferences in Berlin and Vancouver as well as the Global AIDS Summit in Paris in 1995. Fleming ~~has~~ worked closely with the U.S. Agency for International Development and the Department of State to increase U.S. focus on the international demands of the epidemic.

Date: Friday, May 23, 1997
FACT SHEET
Contact: HHS Press Office (202) 690-6343

CLINTON ADMINISTRATION RECORD ON HIV/AIDS

Overview: AIDS is the leading cause of death among Americans between the ages of 25 and 44, accounting for more than 40,000 deaths each year. An estimated 650,000 to 900,000 Americans are believed to be living with HIV, the virus that causes AIDS. Since the AIDS epidemic began in 1981, more than 500,000 Americans have been diagnosed with AIDS and more than 300,000 men, women, and children have lost their lives to this disease.

The Clinton Administration has responded aggressively to the significant threat posed by HIV/AIDS with increased attention to research, prevention, and treatment. Overall funding for AIDS-related programs increased by 55 percent in the first four years of the Clinton Administration, with funding for AIDS care under the Ryan White CARE Act increasing by 158 percent and assistance for the purchase of AIDS drugs nearly tripling. President Clinton's FY 1998 budget plan continues this commitment, proposing over \$1 billion for Ryan White activities -- \$40 million more than in 1997. The budget also includes \$634 million for CDC's HIV prevention activities -- \$20 million more than in 1997 -- and \$1.5 billion to continue research efforts in HIV infection and AIDS supported by NIH.

At the same time, the Administration has sharpened the focus of its AIDS programs by strengthening the Office of AIDS Research at the National Institutes of Health, creating a new Center for HIV/STD/TB Prevention at the Centers for Disease Control and Prevention, and establishing a new Office of National AIDS Policy at the White House. The Administration also convened the first-ever White House Conference on HIV and AIDS in December 1995, and released the first National AIDS Strategy in December 1996. In addition, in May 1997, President Clinton announced a comprehensive AIDS vaccine research initiative designed to lead to the development of an AIDS vaccine within the next 10 years.

In February 1997, the Centers for Disease Control and Prevention (CDC) reported that in the first six months of 1996, for the first time since the epidemic took hold, the number of Americans who died of AIDS declined by 12 percent. In November 1996, the CDC reported a sharp decline in the number of infants born HIV-infected.

HHS Spending on HIV/AIDS

** In the four budgets approved under President Clinton, spending for AIDS research, prevention, and treatment increased by 55 percent. These increases include:*

(in thousands)

Program	FY93	FY97	FY93-97 Change	President's FY98 Plan
Research (NIH)	\$1,071,457	\$1,501,720	+40%	\$1,541,000

Prevention (CDC)	\$498,263	\$618,081	+24%	\$634,000
Treatment (HRSA)	\$385,345	\$996,252	+173%	\$1,036,000

Note: Altogether, discretionary AIDS-related spending by HHS in FY 1997 will total \$3.2 billion, an increase of 55 percent from FY 1993. An additional \$2.8 billion is expected to be expended in FY 1997 for AIDS care under Medicare and Medicaid. It is estimated that more than 50 percent of Americans living with AIDS rely on Medicaid for their health care coverage.

ADMINISTRATION INITIATIVES ON HIV/AIDS

Under President Clinton, a wide array of initiatives have been undertaken including:

✓ **AIDS Policy.** The President created the Office of National AIDS Policy within the White House to advise him on AIDS policy issues and coordinate interdepartmental activities.

✓ **AIDS Conference.** On December 6, 1995, the President convened the first White House Conference on HIV and AIDS in the history of the epidemic, bringing together more than 300 experts, activists, and citizens from 37 states, the District of Columbia, and Puerto Rico for a full day of discussions of key issues.

✓ **AIDS Vaccine Initiative.** On May 18, 1997, President Clinton challenged the nation to commit itself to the goal of developing an AIDS vaccine within the next ten years. The President also announced a number of important initiatives to help fulfill this commitment, including high-level international collaboration, a dedicated research center for AIDS vaccine research at NIH, and outreach to scientists, pharmaceutical companies, and patient advocates to maximize the involvement of both private and public sectors in the development of an AIDS vaccine.

✓ **AIDS Strategy.** On December 17, 1996, the Clinton Administration released the first National AIDS Strategy, establishing goals for the nation and opportunities for immediate progress.

✓ **Advisory Council.** The President created the Presidential Advisory Council on HIV and AIDS to provide him and his Administration with expert outside advice on the ways in which the Federal government should respond to the HIV/AIDS epidemic.

✓ **Disability Eligibility.** The Social Security Administration published revised regulations expanding the list of health manifestations that will be considered in determining eligibility due to HIV/AIDS for Social Security and Supplemental Security Income disability benefits.

✓ **Drug Approval.** Since President Clinton took office, the FDA has approved 8 new AIDS drugs and 19 new drugs for AIDS-related conditions, and accelerated approval to record times. Included in those approvals are a new class of drugs known as protease inhibitors, which show tremendous promise in the treatment of HIV disease. In March 1997, the FDA approved the first protease inhibitor with labeling for use in children.

✓ **Housing.** The Department of Housing and Urban Development has established the National Office of HIV/AIDS Housing to assist people with HIV/AIDS to pay for housing. Funding for the Housing Opportunities for People with AIDS program has increased by 96 percent. HUD and HHS have launched collaborative efforts to combine housing assistance and medical and social services for people living with HIV/AIDS.

Mental Health. The Substance Abuse and Mental Health Administration awarded the first Federal grants to develop mental health services for persons living with HIV/AIDS and their families and partners.

Perinatal Transmission. Following the release of research findings from an NIH-sponsored AIDS clinical trial that indicated that use of AZT by HIV-infected pregnant women dramatically reduced the rate of HIV transmission from mother to infant, the U.S. Public Health Service issued guidelines recommending routine counseling and voluntary HIV testing for all pregnant women.

Prevention. The Centers for Disease Control and Prevention (CDC) launched the Prevention Marketing Initiative aimed at young adults (ages 18-25) to change behaviors that contribute to the transmission of HIV. The initiative features production of public service announcements promoting both sexual abstinence and the consistent and correct use of latex condoms. A new community planning process gives local communities more authority over the shape and direction of AIDS prevention efforts.

Research. In one of his first acts in office, President Clinton signed the National Institutes of Health Revitalization Act of 1993, placing full responsibility for planning, budgeting, and evaluation of the AIDS research program at NIH in the Office of AIDS Research. The President requested and received the first federal plan for biomedical research on AIDS.

Ryan White CARE Act. Funding for the CARE Act has increased by 158 percent and on May 20, 1996, President Clinton signed a five-year reauthorization of this program, guaranteeing assistance until the year 2001. Funding for AIDS drug assistance has increased by 221 percent.

Water Safety. The CDC and the Environmental Protection Agency issued guidelines recommending steps to purify drinking water to protect vulnerable populations against *Cryptosporidium*, which can be fatal to those with compromised immune systems.

Youth. The Office of National AIDS Policy issued a report to the President on the rising rates of HIV transmission among adolescents. The report noted that an average of at least one American teenager becomes infected with HIV every hour of every day and recommended steps to increase youth involvement in AIDS prevention, care, and research efforts.

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OFFICE OF NATIONAL AIDS POLICY

EXECUTIVE OFFICE OF THE PRESIDENT

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~~TO:~~ *FROM*

FAX NUMBER:

~~FROM:~~ *TV*

DATE:

PAGES:

COMMENTS:

Gordon Agress

395 - 3910

Glenda Simmons

10/30/97

(including cover sheet) **88**

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President Clinton's HIV/AIDS Accomplishments

"Our common goal must ultimately be a cure, a cure for all those who are living with HIV, and a vaccine to protect all the rest of us from the virus. A cure and a vaccine, that must be our first and top priority." *President Clinton to the White House Conference of HIV and AIDS, December 6, 1995*

It has been more than 15 years since the epidemic of HIV/AIDS struck our nation. In that time, more than 500,000 Americans have been diagnosed with AIDS and more than 300,000 men, women, and children have died of AIDS. President Clinton has worked hard to reinvigorate the response to HIV and AIDS, providing new national leadership, substantially greater resources, and a closer working relationship with affected communities. Funding for AIDS research, prevention, and care has increased by 43 percent ~~at a time when all government spending has been virtually frozen~~. Funding for the Ryan White CARE Act has more than doubled and the Food and Drug Administration has accelerated its drug approval process to record times. The President has preserved the Medicaid program, which provides care to 50 percent of people with AIDS, including 92 percent of children with AIDS.

Much more needs to be done. Today, an estimated 650,000 to 900,000 Americans are living with HIV and an average of 40,000 Americans become infected with HIV every year. Women, communities of color, and adolescents are experiencing particularly high rates of infection. That is why President Clinton will continue to work to ensure that our nation responds aggressively and compassionately to the challenges created by HIV and AIDS. This fight will not be over until we have a cure and a vaccine to protect all Americans from this deadly epidemic.

A RECORD OF ACCOMPLISHMENT

◆ Providing National Leadership

- * - Increasing overall AIDS funding by 50% in four years
- Creating the Office of National AIDS policy at the White House to provide greater direction and coordination for AIDS policy.
- Appointing the Presidential Advisory Council on HIV and AIDS.
- Convening the first-ever White House Conference on HIV and AIDS.

◆ Investing in Research

- * - Increasing AIDS research funding by 40.2% in four years.
- Signing the NIH Revitalization Act of 1993, creating a permanent Office of AIDS Research at NIH and vesting it with new authority to plan and carry out the AIDS research agenda.
- Appointing Nobel Prize winner Dr. Harold Varmus to head the National Institutes of Health and Dr. William Paul, world-renowned immunologist, to head the Office of AIDS Research.
- Accelerating AIDS drug approval to record times. Since 1993, the Food and Drug

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Administration has approved 12 new AIDS drugs and two new diagnostic tests. Working aggressively with the states to reduce transmission of HIV from mother to child.

- * Launching a four-year \$100 million effort to develop topical microbicides to allow women to protect themselves from HIV.
- * Facilitating creation of the Forum for Collaborative HIV Research to identify research opportunities to improve care for people with HIV.

♦ Investing in Care

- * Increasing funding for the Ryan White CARE Act 186.3% in four years.
- * Tripling Federal funding for the AIDS Drug Assistance Program to help those without insurance coverage for prescription drugs.
- * Increasing funding for Housing Opportunities for People with AIDS 96 percent.
- * Fighting to preserve the Medicaid guarantee of coverage for people living with AIDS. Nearly 50 percent of people with AIDS and 92 percent of children with AIDS rely on Medicaid for health coverage.
- * Revising eligibility rules for Social Security Disability Insurance to make it easier for people living with HIV to qualify for benefits.

♦ Investing in Prevention

- * Increasing funding for AIDS prevention by 24 percent.
- Launching the community planning partnership, which empowers local communities to make decisions about the distribution of AIDS prevention funding.
- Launching the Prevention Marketing Initiative, focusing on the risk to young adults (18 to 25) with frank public service announcements recommending sexual abstinence and the correct and consistent use of latex condoms.
- Reorganizing AIDS prevention efforts at the Centers for Disease Control and Prevention to foster greater coordination with efforts to reduce sexually transmitted diseases and tuberculosis.
- Appointing Dr. David Satcher to head the CDC and Dr. Helene Gayle to head the CDC Center for HIV/STD/TB Prevention.

II. The Federal Response

Your Administration has been credited with making tremendous progress in the fight against AIDS. Progress since you took office includes:

- * ♦ A 40 percent increase in NIH-supported AIDS research.
- * ♦ A 158 percent increase in Ryan White AIDS Treatment grants.
- ♦ A 24 percent increase in CDC HIV prevention activities.
- ♦ A 96 percent increase for HUD's Housing Opportunities for People with AIDS program.

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- ◆ Strengthening the Office of AIDS Research at the National Institutes of Health.
- ◆ As a result of Public Health Service guidelines recommending the use of AZT by HIV-positive pregnant women and their newborns, a 17 percent drop in the number of infants with perinatally-acquired HIV infection (from 1994 to 1995).
- * ◆ Responding rapidly to FDA approval of a new class of AIDS therapies called protease inhibitors with increases in funding for State AIDS Drugs Assistance Programs.
- ◆ Easing of Social Security disability rules to speed approval of eligibility.
- ◆ Creating the Office of National AIDS Policy at the White House and the Presidential Advisory Council on HIV/AIDS.

III. Research Developments & Opportunities for Progress

A. THERAPEUTICS

Implications of Viral Levels

NIH-sponsored research indicates that decreasing the amount of HIV in the blood can significantly slow how quickly a person becomes ill, and can also decrease the chance of transmission from mother to child. This finding has tremendous implications for therapy. Studies indicate that combination therapy (i.e., use of one or more anti-retroviral drugs), especially where a protease inhibitor (the newest class of anti-retroviral drugs) is used, provides the greatest benefit for the patients. However, this approach is new and we still do not know the best time to start therapy, to stop therapy, to change therapy, and how long these effects will last. More research is needed.

Discovery of New Receptors

The breakthrough discovery of new chemokine receptors (CCR5 and CXCR4 or fusin are receptors on the cell where HIV binds) has offered exciting new avenues for drug and vaccine development. Research indicates that people who have defective or missing receptors are much more resistant to becoming infected.

B. PREVENTION

In response to the recommendations from the Report of the NIH AIDS Research Program Evaluation Task Force, NIH is developing a comprehensive HIV prevention science agenda. Areas of focus will include:

Vaccines. We desperately need a vaccine that will control new infections both in the U.S. and abroad. New generations of vaccines, including DNA vaccines, are now in early development. Research efforts in the HIV vaccine arena will have important implications for developing

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vaccines for other diseases such as Tuberculosis.

Other Prevention Efforts. Preventing HIV infection through behavioral modification and/or a microbicide (a mechanical or chemical barrier method that blocks infection) also offers tremendous hope. Secretary Shalala has promised \$100 million over the next four years for microbicide research and development.

IV. Role of the Vice President

The Vice President has been intimately involved in developing the Forum for Collaborative HIV Research. This new public-private group is designed to catalyze collaborations among government researchers, pharmaceutical companies, third-party payors, and the community to capitalize on recent scientific advances and learn how to optimally use available treatment regimens.

The Vice President also has expressed interest in continuing efforts to expedite vaccine and microbicide research.

♦ **Fighting Discrimination: Standing Up for the Rights of People with AIDS**

- Vigorously enforced the Americans with Disabilities Act, which prohibits discrimination against people with HIV/AIDS.
- Resolving nearly 800 charges alleging employment discrimination against people with HIV and AIDS obtaining monetary benefits of more than \$6.1 million.
- Leading the fight to repeal the discriminatory "Donnan Amendment," which would have discharged all HIV-positive military personnel.
- Using the White House "bully pulpit" to speak out against AIDS discrimination.

Office of National AIDS Policy Accomplishment Highlights (1994-1997)

Background

On November 10, 1994, President Clinton named Patricia S. Fleming to serve as the nation's National AIDS Policy Director. In that capacity, Ms. Fleming served as the Administration's chief spokesman on issues related to HIV/AIDS. The President had created the Office of National AIDS Policy in 1993 to bring greater focus and direction to the Federal response to the epidemic of HIV/AIDS. Creation of such an office had been recommended by several advisory groups, including the National Commission on AIDS. Prior to her appointment, Fleming served as Special Assistant to Health and Human Services Secretary Donna E. Shalala. In that position, Fleming had helped to transform Federal efforts in response to the epidemic, including an aggressive AIDS education initiative aimed at young adults that advocated the use of latex condoms. She also was responsible for a greatly increased focus on the impact of HIV/AIDS on women and communities of color. Prior to her work at HHS, Fleming served as a key advisor to the late Representative Ted Weiss (D-NY), directing numerous investigations of the Reagan and Bush Administrations' response to HIV/AIDS.

Major Clinton Administration Accomplishments in HIV/AIDS

- Increased funding for AIDS research, prevention, and care by more than 50% in first four years.
- * • Increased funding for the Ryan White CARE Act by 158 percent and increased number of cities eligible for CARE Act funds from 34 to 49. *any more? cannot verify*
- * • *How then?* Tripled funding for the AIDS Drug Assistance Programs, which helps low-income uninsured people with AIDS purchase needed therapies.
- Created the Office of National AIDS Policy at the White House to direct Federal AIDS policy.
- Signed the NIH Revitalization Act of 1993, creating a strengthened Office of AIDS Research at NIH and vesting it with authority to plan and carry out the AIDS research agenda.
- Accelerated AIDS drug approval to record times. Since 1993, the Food and Drug Administration has approved 16 new AIDS drugs and two new diagnostic tests.
- Facilitated creation of the Forum for Collaborative HIV Research to identify research opportunities to improve care for people with HIV.
- Preserved the Medicaid guarantee of coverage for people living with AIDS. Nearly 50 percent of people with AIDS and 92 percent of children with AIDS rely on Medicaid for health coverage.
- Launched the community planning partnership, which empowers local communities to make decisions about the distribution of AIDS prevention funding.
- Vigorously enforced the Americans with Disabilities Act, which prohibits discrimination against people with HIV/AIDS.

→ conflicts w/ HHS report

Accomplishments

During her tenure as National Aids Policy Director, Patricia Fleming has focused her efforts on expanding access to high-quality care for people living with HIV/AIDS; increasing the focus of AIDS prevention efforts on young people; further increasing attention paid to the needs of women living with HIV/AIDS; representing the U.S. at all international forums on HIV/AIDS; and working to improve the coordination of government efforts and public-private partnerships. Among her accomplishments:

AIDS Funding. In the two budgets enacted during Fleming's tenure, total funding for AIDS research, prevention, treatment, and housing increased by ____%. This includes a ____% increase for the Ryan White CARE Act; a ____% increase for AIDS research; a ____% increase for AIDS prevention; and a ____% increase for AIDS housing programs.

White House Conference on HIV/AIDS. Ms. Fleming directed the convening of the first-ever White House Conference on HIV/AIDS, which was held on December 5, 1995. The Conference brought nearly 300 HIV/AIDS, advocates, activists, health care professionals, and others to the White House for a full day of discussion of the central demands of the epidemic. This historic conference has helped to shape the policies adopted by the Clinton Administration in the ensuing year, including a rapid increase in funding for AIDS drug assistance and vaccine research.

National AIDS Strategy. Fleming's office developed and released the first-ever National AIDS Strategy, establishing six central goals to guide all Federal efforts and laying out nearly three dozen opportunities for progress in 1997 alone. Development of a National AIDS Strategy had been recommended by the National AIDS Commission to bring greater focus and direction to Federal AIDS policies.

Youth Report. On March 5, 1996, Fleming delivered to President Clinton a report highlighting the particular challenges facing young Americans during the AIDS epidemic. The report, which noted that "at least one American teenager is becoming infected with HIV every hour of every day," has galvanized the national response to AIDS among young people. It has resulted in nearly a dozen changes in Federal AIDS policy to increase the focus on and the participation of youth in AIDS policy development, clinical trials, prevention programs, and other areas.

"Respect Yourself, Protect Yourself" Working with the Centers for Disease Control and Prevention, Fleming helped develop an innovative public service campaign directed at young adults featuring the real-life experiences of young people infected and affected by HIV/AIDS. The campaign continued the Federal advocacy for the use of condoms by those who are sexually active and also featured, for the first time, openly gay men speaking to their peers.

Medicaid. Early in the national debate over the future of Medicaid, Fleming spoke out against the potential impact of a State-run block grant on the lives of people living with HIV/AIDS. Fleming's advocacy of the rights of those individuals helped draw national attention to the concerns of people living with AIDS. More than 50 percent of Americans living with AIDS rely on Medicaid for their health care needs. When President Clinton vetoed the proposed Medicaid block grant he cited the need of people with AIDS as one of his reasons.

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AIDS Research. Working with Vice President Gore, Fleming helped to create the Forum for Collaborative HIV Research, a public-private partnership that is working to identify post-marketing clinical trials for AIDS drugs approved under the Food and Drug Administration's accelerated approval system. The Forum includes representatives of several Federal Agencies, pharmaceutical manufacturers, health care insurance companies, clinicians, researchers, and advocates for people living with HIV/AIDS.

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Regional Briefings. In partnership with the Presidential Advisory Council on HIV/AIDS, the National AIDS Fund, and Funders Concerned About AIDS, Fleming conducted 13 regional briefings on AIDS policy, including 11 town hall meetings to hear directly from people living with HIV/AIDS about their needs and concerns. These briefings included visits to more than 50 community-based AIDS organizations.

International Leadership. Fleming serves on the board of the United Nations Global Program on AIDS (UNAIDS) and has represented the U.S. at the 1994 and 1996 International AIDS Conferences in Berlin and Vancouver as well as the Global AIDS Summit in Paris in 1995. Fleming has worked closely with the U.S. Agency for International Development and the Department of State to increase U.S. focus on the international demands of the epidemic.

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President Clinton's HIV/AIDS Accomplishments

“Our common goal must ultimately be a cure, a cure for all those who are living with HIV, and a vaccine to protect all the rest of us from the virus. A cure and a vaccine, that must be our first and top priority.” *President Clinton to the White House Conference of HIV and AIDS, December 6, 1995*

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- Increasing AIDS research funding by 40.2% in four years.
- Signing the NIH Revitalization Act of 1993, creating a permanent Office of AIDS Research at NIH and vesting it with new authority to plan and carry out the AIDS research agenda.
- Appointing Nobel Prize winner Dr. Harold Varmus to head the National Institutes of Health and Dr. William Paul, world-renowned immunologist, to head the Office of AIDS Research. ✓
- Accelerating AIDS drug approval to record times. Since 1993, the Food and Drug

- Administration has approved 12 new AIDS drugs and two new diagnostic tests.
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- ◆ A 96 percent increase for HUD's Housing Opportunities for People with AIDS program.

- ◆ Strengthening the Office of AIDS Research at the National Institutes of Health.
- ◆ As a result of Public Health Service guidelines recommending the use of AZT by HIV-positive pregnant women and their newborns, a 47 percent drop in the number of infants with perinatally-acquired HIV infection (from 1992 to 1996).
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Other Prevention Efforts. Preventing HIV infection through behavioral modification and/or a microbicide (a mechanical or chemical barrier method that blocks infection) also offers tremendous hope. Secretary Shalala has promised \$100 million over the next four years (announcement made July 1996) for microbicide research and development.

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The Vice President has been intimately involved in developing the Forum for Collaborative HIV Research. This new public-private group is designed to catalyze collaborations among government researchers, pharmaceutical companies, third-party payors, and the community to capitalize on recent scientific advances and learn how to optimally use available treatment regimens.

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Major Clinton Administration Accomplishments in HIV/AIDS

- Increased funding for AIDS research, prevention, and care by more than 50% in first four years.
- Increased funding for the Ryan White CARE Act by 158 percent and increased number of cities eligible for CARE Act funds from 34 to 49.
- Funding for the AIDS Drug Assistance Programs has increased by 221 percent, which helps low-income uninsured people with AIDS purchase needed therapies. (HHS report)
- Created the Office of National AIDS Policy at the White House to direct Federal AIDS policy.
- Signed the NIH Revitalization Act of 1993, creating a strengthened Office of AIDS Research at NIH and vesting it with authority to plan and carry out the AIDS research agenda.
- Accelerated AIDS drug approval to record times. Since 1993, the Food and Drug Administration has approved 8 new AIDS drugs and 19 new drugs for AIDS-related conditions. Included in those approvals are a new class of drugs known as protease inhibitors, which show tremendous promise in the treatment of HIV disease. In March 1997, the FDA approved the first protease inhibitor with labeling for use in children. (HHS report); and two new diagnostic tests.
- Facilitated creation of the Forum for Collaborative HIV Research to identify research opportunities to improve care for people with HIV.
- Preserved the Medicaid guarantee of coverage for people living with AIDS. Nearly 50 percent of people with AIDS and 92 percent of children with AIDS rely on Medicaid for health coverage.
- Launched the community planning partnership, which empowers local communities to make decisions about the distribution of AIDS prevention funding.
- Vigorously enforced the Americans with Disabilities Act, which prohibits discrimination against people with HIV/AIDS.
- On December 6, 1995, the President convened the first White House Conference on HIV and AIDS in the history of the epidemic, bringing together more than 300 experts, activists, and citizens from 37 states, the District of Columbia, and Puerto Rico for a full day of discussions of key issues. (HHS report)
- On December 17, 1996, the Clinton Administration released the first National AIDS Strategy, establishing goals for the nation and opportunities for immediate progress. (HHS

report)

- The Department of Housing and Urban Development has established the National Office of HIV/AIDS Housing to assist people with HIV/AIDS to pay for housing. Funding for the Housing Opportunities for People with AIDS program has increased by 96 percent. HUD and HHS have launched collaborative efforts to combine housing assistance and medical and social services for people living with HIV/AIDS. (HHS report)
- The Substance Abuse and Mental Health Administration awarded the first Federal grants to develop mental health services for persons living with HIV/AIDS and their families and partners. (HHS report)
- Following the release of research findings from an NIH-sponsored AIDS clinical trial that indicated that use of AZT by HIV-infected pregnant women dramatically reduced the rate of HIV transmission from mother to infant, the U.S. Public Health Service issued guidelines recommending routine counseling and voluntary HIV testing for all pregnant women. (HHS report)
- The CDC launched the Prevention Marketing Initiative aimed at young adults (ages 18-25) to change behaviors that contribute to the transmission of HIV. The initiative features production of public service announcements promoting both sexual abstinence and the consistent and correct use of latex condoms. A new community planning process gives local communities more authority over the shape and direction of AIDS prevention efforts. (HHS report)
- The CDC and the Environmental Protection Agency issued guidelines recommending steps to purify drinking water to protect vulnerable populations against *Cryptosporidium*, which can be fatal to those with compromised immune systems. (HHS report)

INTERDEPARTMENTAL TASK FORCE ON HIV/AIDS

**October 22, 1997
11:00 a.m.
OEOD Room 472**

INTRODUCTION (GIVEN BY TODD SUMMERS):

1. Sandra Thurman would like for the federal government to coordinate what's going on with its response to AIDS. Also, these meetings will serve as a forum to bat around the issues between the different agencies.

Sandra Thurman: Where does this task force fit into the larger picture?

- Through enhanced communication, cooperation and collaboration will be fostered, enabling the task force to put all the pieces together and make it all make sense to the President.

Todd Summers says the Task Force should move as quickly as possible on the President's HIV/AIDS initiative.

INTRODUCTION OF ATTENDEES TO THE TASK FORCE:

✧ U.S. Agency for International Development

- US AID is the largest international AIDS Donor, giving 25% of the global budget.
- The money from this department goes to:
 - 65 field missions around the world (pilot field activities have been very effective);
 - technical aspects in D.C.;
 - UNAIDS (it is the largest contributor to this).
- In the past, there was a prevention focus. Now they are cautiously moving to a care continuum. There is also an increased focus on surveillance.
- They have AIDS projects in 45 countries.

✧ Peace Corps

- 20% of the volunteers work in the health sector. A lot of these do community AIDS work, especially in the fields of youth education and prevention.
- Volunteer safety is an issue and the Peace Corps works closely with US AID.

✧ Department of Housing and Urban Development

- 10% of money goes out competitively to model projects, such as housing and services to those with HIV/AIDS, as well as homeless programs.
- This week Secretary Cuomo hashed through the issues.
- HOPWA/OHH

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✧ **Department of Defense**

- This department is working on benefits for family members and retirees in the department. Not a lot of those on active duty are HIV infected.
- They have a great education program and medical care. They also do research and have an HIV prevention program.

✧ **Department of Commerce**

- There has really been no focus on HIV/AIDS.
- This department donates money to foster the growth of science and technology. It gives grants to cutting edge technology as part of its Advanced Technology Program. A lot of this technology is medically related.
- The Patent Office has AIDS-related patents on the internet.

✧ **Equal Employment Opportunity Commission**

- HIV/AIDS is considered a disability but this has been called into question.
- There are limitations in coverage in health insurance plans.
- In 1993, a cap on AIDS coverage would be a violation of the ADA.
- The field offices look at discrimination cases. Of the more than 8,000 cases 2-3% are from people who say they were discriminated against based upon their HIV+ status.

✧ **Office of Personnel Management**

- The August 30, 1995 guidelines are the ones that the Federal Government uses.
- This department wants updates from everyone at this meeting.

✧ **Department of Education**

- This department has no specific AIDS program.
- Most of its money goes to drug and violence prevention programs; AIDS is an indirect focus.

✧ **Department of State**

- This department is in the process of updating the U.S. International Strategy on HIV/AIDS. This is used for ambassador briefings.
- The Department of State works with pharmaceutical companies to raise awareness.

✧ **Department of Veterans Affairs**

- This department provides care for veterans with HIV/AIDS.
- There is volunteer testing for high risk veterans.
- There is a research department.

- It has an education program that deals with prevention for health care workers.
- 16,000 veterans are currently under care for being HIV+.

✧ **Social Security Administration**

- HIV/AIDS is the only disease that is fast-tracked.
- There is a question to as if the medical definition of having a disability is going to change.
- There is a focus to ensure that those people who want to return to work can and will have their benefits.

✧ **Office of National Drug Control Policy**

- This office focuses on issues about HIV and substance abuse, needle exchange, and medical marijuana.

✧ **Corporation for National Service**

- In Americorps there are prevention issues, but there is no inventory of specific HIV/AIDS related number of programs served.

✧ **Department of Labor**

- There is an internal employee health program.

✧ **U.S. Information Agency**

- This agency employs 'Best practices' using the American model.
- In the International Visitor Program (working with the Department of State) representatives from other countries meet with their counter parts here.
- There is a focus on educational and informational exchange globally; television service.

✧ **Department of Health and Human Services**

- There is a focus on prevention, treatment, and research.
- \$650 million was given to prevention plans on a statewide basis.

HRSA:

- This agency specializes in treatment.
- Ryan White Care Act

NIH:

- This agency specializes in research:
 - vaccine development
 - antiretroviral treatments and protease inhibitors

- treatment of OIs and cancers

CDC:

- This agency specializes in prevention.
- It gives out money according to state plans.

✧ **Department of Energy**

- This department provided microscopes to identify the AIDS virus.
- There is an HIV sequencing database with the varieties and mutations of HIV.
- Don Donaldson wants ONAP, AMFAR, Department of Veterans Affairs, and Department of Defense to get together to see how best to use the Departments of Energy and Technology.
- The Task Force needs to work on what the Federal Rehabilitation guidelines state and where the HIV guidelines fall.
- The Human Genome Project conducted in California at Lawrence Livermore is of interest to this department.

✧ **Department of Justice**

- Law enforcement
- Civil rights (Title III and ADA)
- Bureau of Prisons
- Immigration and Naturalization Services
- This department has its own training program and awareness education.
- The Department of Justice is looking at needle exchange issues and the California initiative on medical marijuana use.

SANDRA THURMAN STATES THE PRIORITIES OF THE TASK FORCE:

- We must put the epidemic in the global context.
- People of color / women should have an increased focus.
- The Task Force needs to move the Vaccine Initiative along.
- Work issues.
- Needle exchange.
- Names reporting/surveillance.
- The Task Force must find a way to keep AIDS on the radar screen.

ONAP can serve as a broker for interagency coordination.

Maybe the CDC could give a presentation at the next meeting to show where we are with AIDS.

PAUL YANDURA DISCUSSES WORLD AIDS DAY 1997:

Theme: 'Give Children Hope in a World with AIDS'

- Food and Friends would like for one of the principals to come by and help out.
- Department of State
- HRSA is sponsoring a poster and essay contest. What can we do with the posters? Where can we display them?
- Paul will send a fax to these attendees for their World AIDS Day plans.
- Todd Summers suggested that perhaps a volunteer activity could be coordinated.

SUGGESTIONS FOR THE NEXT MEETING:

- ONAP needs to give everyone deadlines for their updates.
- Perhaps everyone could be given an agenda of what everyone else is doing.
- There should be a focal point for each meeting to better prepare people for the meeting.



FACSIMILE

OFFICE OF NATIONAL AIDS POLICY

EXECUTIVE OFFICE OF THE PRESIDENT

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Washington, DC 20006

Phone: (202) 632-1090
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TO:

Deborah Von Zinkernagel

FAX NUMBER:

690-7560

FROM:

Glenda Simmons

DATE:

10/10/97

PAGES:

8

(including cover sheet)

COMMENTS:

I've put a star by the items of ^{extra} interest.
If you can't find this information, it's okay;
if you know a statement is still valid put
a "✓" by it. Thanks for your help.

President Clinton's HIV/AIDS Accomplishments

“Our common goal must ultimately be a cure, a cure for all those who are living with HIV, and a vaccine to protect all the rest of us from the virus. A cure and a vaccine, that must be our first and top priority.” *President Clinton to the White House Conference of HIV and AIDS, December 6, 1995*

It has been more than 15 years since the epidemic of HIV/AIDS struck our nation. In that time, more than 500,000 Americans have been diagnosed with AIDS and more than 300,000 men, women, and children have died of AIDS. President Clinton has worked hard to reinvigorate the response to HIV and AIDS, providing new national leadership, substantially greater resources, and a closer working relationship with affected communities. Funding for AIDS research, prevention, and care has increased by 43 percent at a time when all government spending has been virtually frozen. Funding for the Ryan White CARE Act has more than doubled and the Food and Drug Administration has accelerated its drug approval process to record times. The President has preserved the Medicaid program, which provides care to 50 percent of people with AIDS, including 92 percent of children with AIDS.

Much more needs to be done. Today, an estimated 650,000 to 900,000 Americans are living with HIV and an average of 40,000 Americans become infected with HIV every year. Women, communities of color, and adolescents are experiencing particularly high rates of infection. That is why President Clinton will continue to work to ensure that our nation responds aggressively and compassionately to the challenges created by HIV and AIDS. This fight will not be over until we have a cure and a vaccine to protect all Americans from this deadly epidemic.

A RECORD OF ACCOMPLISHMENT

◆ Providing National Leadership

- * - Increasing overall AIDS funding by 56% in four years
- Creating the Office of National AIDS policy at the White House to provide greater direction and coordination for AIDS policy.
- Appointing the Presidential Advisory Council on HIV and AIDS.
- Convening the first-ever White House Conference on HIV and AIDS.

◆ Investing in Research

- Increasing AIDS research funding by 40.2% in four years.
- Signing the NIH Revitalization Act of 1993, creating a permanent Office of AIDS Research at NIH and vesting it with new authority to plan and carry out the AIDS research agenda.
- Appointing Nobel Prize winner Dr. Harold Varmus to head the National Institutes of Health and Dr. William Paul, world-renowned immunologist, to head the Office of AIDS Research.
- Accelerating AIDS drug approval to record times. Since 1993, the Food and Drug

- Administration has approved 12 new AIDS drugs and two new diagnostic tests.
- Working aggressively with the states to reduce transmission of HIV from mother to child.
- Launching a four-year \$100 million effort to develop topical microbicides to allow women to protect themselves from HIV.
- Facilitating creation of the Forum for Collaborative HIV Research to identify research opportunities to improve care for people with HIV.

◆ **Investing in Care**

- * - Increasing funding for the Ryan White CARE Act 186.3% in four years.
- * - Tripling Federal funding for the AIDS Drug Assistance Program to help those without insurance coverage for prescription drugs.
- Increasing funding for Housing Opportunities for People with AIDS 96 percent.
- Fighting to preserve the Medicaid guarantee of coverage for people living with AIDS. Nearly 50 percent of people with AIDS and 92 percent of children with AIDS rely on Medicaid for health coverage.
- * - Revising eligibility rules for Social Security Disability Insurance to make it easier for people living with HIV to qualify for benefits.

◆ **Investing in Prevention**

- ** - Increasing funding for AIDS prevention by 24 percent.
- Launching the community planning partnership, which empowers local communities to make decisions about the distribution of AIDS prevention funding.
- Launching the Prevention Marketing Initiative, focusing on the risk to young adults (18 to 25) with frank public service announcements recommending sexual abstinence and the correct and consistent use of latex condoms.
- Reorganizing AIDS prevention efforts at the Centers for Disease Control and Prevention to foster greater coordination with efforts to reduce sexually transmitted diseases and tuberculosis.
- Appointing Dr. David Satcher to head the CDC and Dr. Helene Gayle to head the CDC Center for HIV/STD/TB Prevention.

II. The Federal Response

Your Administration has been credited with making tremendous progress in the fight against AIDS. Progress since you took office includes:

- * ◆ A 40 percent increase in NIH-supported AIDS research.
- * ◆ A 158 percent increase in Ryan White AIDS Treatment grants.
- * ◆ A 24 percent increase in CDC HIV prevention activities.
- * ◆ A 96 percent increase for HUD's Housing Opportunities for People with AIDS program.

- ◆ Strengthening the Office of AIDS Research at the National Institutes of Health.
- ◆ As a result of Public Health Service guidelines recommending the use of AZT by HIV-positive pregnant women and their newborns, a 17 percent drop in the number of infants with perinatally-acquired HIV infection (from 1994 to 1995).
- ◆ Responding rapidly to FDA approval of a new class of AIDS therapies called protease inhibitors with increases in funding for State AIDS Drugs Assistance Programs.
- ◆ Easing of Social Security disability rules to speed approval of eligibility.
- ◆ Creating the Office of National AIDS Policy at the White House and the Presidential Advisory Council on HIV/AIDS.

III. Research Developments & Opportunities for Progress

A. THERAPEUTICS

Implications of Viral Levels

NIH-sponsored research indicates that decreasing the amount of HIV in the blood can significantly slow how quickly a person becomes ill, and can also decrease the chance of transmission from mother to child. This finding has tremendous implications for therapy. Studies indicate that combination therapy (i.e., use of one or more anti-retroviral drugs), especially where a protease inhibitor (the newest class of anti-retroviral drugs) is used, provides the greatest benefit for the patients. However, this approach is new and we still do not know the best time to start therapy, to stop therapy, to change therapy, and how long these effects will last. More research is needed.

Discovery of New Receptors

The breakthrough discovery of new chemokine receptors (CCR5 and CXCR4 or fusin are receptors on the cell where HIV binds) has offered exciting new avenues for drug and vaccine development. Research indicates that people who have defective or missing receptors are much more resistant to becoming infected.

B. PREVENTION

In response to the recommendations from the Report of the NIH AIDS Research Program Evaluation Task Force, NIH is developing a comprehensive HIV prevention science agenda. Areas of focus will include:

Vaccines. We desperately need a vaccine that will control new infections both in the U.S. and abroad. New generations of vaccines, including DNA vaccines, are now in early development. Research efforts in the HIV vaccine arena will have important implications for developing

vaccines for other diseases such as Tuberculosis.

Other Prevention Efforts. Preventing HIV infection through behavioral modification and/or a microbicide (a mechanical or chemical barrier method that blocks infection) also offers tremendous hope. Secretary Shalala has promised \$100 million over the next four years for microbicide research and development.

IV. Role of the Vice President

The Vice President has been intimately involved in developing the Forum for Collaborative HIV Research. This new public-private group is designed to catalyze collaborations among government researchers, pharmaceutical companies, third-party payors, and the community to capitalize on recent scientific advances and learn how to optimally use available treatment regimens.

The Vice President also has expressed interest in continuing efforts to expedite vaccine and microbicide research.

- ♦ **Fighting Discrimination: Standing Up for the Rights of People with AIDS**
 - Vigorously enforced the Americans with Disabilities Act, which prohibits discrimination against people with HIV/AIDS.
 - *- Resolving nearly 800 charges alleging employment discrimination against people with HIV and AIDS obtaining monetary benefits of more than \$6.1 million.
 - Leading the fight to repeal the discriminatory "Dornan Amendment," which would have discharged all HIV-positive military personnel.
 - Using the White House "bully pulpit" to speak out against AIDS discrimination.

Office of National AIDS Policy Accomplishment Highlights (1994-1997)

Background

On November 10, 1994, President Clinton named Patricia S. Fleming to serve as the nation's National AIDS Policy Director. In that capacity, Ms. Fleming served as the Administration's chief spokesman on issues related to HIV/AIDS. The President had created the Office of National AIDS Policy in 1993 to bring greater focus and direction to the Federal response to the epidemic of HIV/AIDS. Creation of such an office had been recommended by several advisory groups, including the National Commission on AIDS. Prior to her appointment, Fleming served as Special Assistant to Health and Human Services Secretary Donna E. Shalala. In that position, Fleming had helped to transform Federal efforts in response to the epidemic, including an aggressive AIDS education initiative aimed at young adults that advocated the use of latex condoms. She also was responsible for a greatly increased focus on the impact of HIV/AIDS on women and communities of color. Prior to her work at HHS, Fleming served as a key advisor to the late Representative Ted Weiss (D-NY), directing numerous investigations of the Reagan and Bush Administrations' response to HIV/AIDS.

Accomplishments

During her tenure as National Aids Policy Director, Patricia Fleming has focused her efforts on expanding access to high-quality care for people living with HIV/AIDS; increasing the focus of AIDS prevention efforts on young people; further increasing attention paid to the needs of women living with HIV/AIDS; representing the U.S. at all international forums on HIV/AIDS; and working to improve the coordination of government efforts and public-private partnerships. Among her accomplishments:

* **AIDS Funding.** In the two budgets enacted during Fleming's tenure, total funding for AIDS
* research, prevention, treatment, and housing increased by ____%. This includes a ____%
* increase for the Ryan White CARE Act; a ____% increase for AIDS research; a ____%
* increase for AIDS prevention; and a ____% increase for AIDS housing programs.

White House Conference on HIV/AIDS. Ms. Fleming directed the convening of the first-ever White House Conference on HIV/AIDS, which was held on December 5, 1995. The Conference brought nearly 300 HIV/AIDS, advocates, activists, health care professionals, and others to the White House for a full day of discussion of the central demands of the epidemic. This historic conference has helped to shape the policies adopted by the Clinton Administration in the ensuing year, including a rapid increase in funding for AIDS drug assistance and vaccine research.

National AIDS Strategy. Fleming's office developed and released the first-ever National AIDS Strategy, establishing six central goals to guide all Federal efforts and laying out nearly three dozen opportunities for progress in 1997 alone. Development of a National AIDS Strategy had been recommended by the National AIDS Commission to bring greater focus and direction to Federal AIDS policies.

Youth Report. On March 5, 1996, Fleming delivered to President Clinton a report highlighting the particular challenges facing young Americans during the AIDS epidemic. The report, which noted that "at least one American teenager is becoming infected with HIV every hour of every day," has galvanized the national response to AIDS among young people. It has resulted in nearly a dozen changes in Federal AIDS policy to increase the focus on and the participation of youth in AIDS policy development, clinical trials, prevention programs, and other areas.

"Respect Yourself, Protect Yourself" Working with the Centers for Disease Control and Prevention, Fleming helped develop an innovative public service campaign directed at young adults featuring the real-life experiences of young people infected and affected by HIV/AIDS. The campaign continued the Federal advocacy for the use of condoms by those who are sexually active and also featured, for the first time, openly gay men speaking to their peers.

* **Medicaid.** Early in the national debate over the future of Medicaid, Fleming spoke out against the potential impact of a State-run block grant on the lives of people living with HIV/AIDS. Fleming's advocacy of the rights of those individuals helped draw national attention to the concerns of people living with AIDS. More than 50 percent of Americans living with AIDS rely on Medicaid for their health care needs. When President Clinton vetoed the proposed Medicaid block grant he cited the need of people with AIDS as one of his reasons.

AIDS Research. Working with Vice President Gore, Fleming helped to create the Forum for Collaborative HIV Research, a public-private partnership that is working to identify post-marketing clinical trials for AIDS drugs approved under the Food and Drug Administration's accelerated approval system. The Forum includes representatives of several Federal Agencies, pharmaceutical manufacturers, health care insurance companies, clinicians, researchers, and advocates for people living with HIV/AIDS.

AIDS Drug Assistance Programs. Fleming advocated for the creation of a specific "earmark" for funding for AIDS Drug Assistance Programs within the Ryan White CARE Act. Since its creation in 1995, that earmark has increased by 221 percent to \$167 million, bringing assistance to thousands of individuals who could not otherwise afford to purchase AIDS drugs.

Regional Briefings. In partnership with the Presidential Advisory Council on HIV/AIDS, the National AIDS Fund, and Funders Concerned About AIDS, Fleming conducted 13 regional briefings on AIDS policy, including 11 town hall meetings to hear directly from people living with HIV/AIDS about their needs and concerns. These briefings included visits to more than 50 community-based AIDS organizations.

International Leadership. Fleming serves on the board of the United Nations Global Program on AIDS (UNAIDS) and has represented the U.S. at the 1994 and 1996 International AIDS Conferences in Berlin and Vancouver as well as the Global AIDS Summit in Paris in 1995. Fleming has worked closely with the U.S. Agency for International Development and the Department of State to increase U.S. focus on the international demands of the epidemic.

Major Clinton Administration Accomplishments in HIV/AIDS

- Increased funding for AIDS research, prevention, and care by more than 50% in first four years.
- *• Increased funding for the Ryan White CARE Act by 158 percent and increased number of cities eligible for CARE Act funds from 34 to 49.
- Tripled funding for the AIDS Drug Assistance Programs, which helps low-income uninsured people with AIDS purchase needed therapies.
- Created the Office of National AIDS Policy at the White House to direct Federal AIDS policy.
- Signed the NIH Revitalization Act of 1993, creating a strengthened Office of AIDS Research at NIH and vesting it with authority to plan and carry out the AIDS research agenda.
- Accelerated AIDS drug approval to record times. Since 1993, the Food and Drug Administration has approved 16 new AIDS drugs and two new diagnostic tests.
- Facilitated creation of the Forum for Collaborative HIV Research to identify research opportunities to improve care for people with HIV.
- *• Preserved the Medicaid guarantee of coverage for people living with AIDS. Nearly 50 percent of people with AIDS and 92 percent of children with AIDS rely on Medicaid for health coverage.
- Launched the community planning partnership, which empowers local communities to make decisions about the distribution of AIDS prevention funding.
- Vigorously enforced the Americans with Disabilities Act, which prohibits discrimination against people with HIV/AIDS.

10/8/97

- ~~call Tammy / Melissa @ CDC to send 2 more~~
(called + LM) ~~stats binders + the~~
~~latest MMWR thing~~
- POTUS accomplishments to Deborah → will be in on Friday
- Office guidelines
- tax file legend
- send books to Lynn guy
- is Marcello conf. call taken care of
- jobcorp stuff.
- inmate letter

Council needs to

→ write update of July letter to POTUS

council updates → every 2 weeks

Scott Hitt
Tom Henderson

What level team?
for this

Simmons (people)

Sat 18th

gate list

→ check w/ Paul next week

 American
Red Cross

 LIVAD
EDUCATION



FACSIMILE

OFFICE OF NATIONAL AIDS POLICY

EXECUTIVE OFFICE OF THE PRESIDENT

808 17th Street NW, Suite 820
Washington, DC 20006

Phone: (202) 632-1090
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TO:

Gordon Aggrass

FAX NUMBER:

395-3910

FROM:

Glenda Simmons, intern

DATE:

10/2/97

PAGES:

8 (including cover sheet)

COMMENTS:

The White House Office of National AIDS Policy is updating our information files in order to better serve the public. I believe that the information for "President Clinton's HIV/AIDS Accomplishments" is fairly current, but it would be helpful if your office could review the underlined sections I have provided and let us know if anything has changed or if there's anything new we need to include. Your efforts are greatly appreciated.

1998 HEALTH CARE BUDGET
HISTORIC HEALTH INVESTMENTS IN CRITICAL AREAS SUCH AS BIOMEDICAL
RESEARCH, PREVENTION, AND TREATMENT
November 13, 1997

Today, the President signed into law the Labor-HHS-Education Appropriations bill, legislation which contains historic health investments in critical areas. This important bill expands the nation's biomedical research investment by nearly \$1 billion, extends AIDS prevention efforts and treatments to more Americans, takes new steps to prevent chronic and environmental diseases, such as diabetes, heart disease, and cancer, improves health care in underserved rural areas, and enhances efforts to prevent and control infectious diseases.

- **A Historic Investment In Biomedical Research.** The Labor-HHS bill increases funding at the National Institutes of Health (NIH) by over \$900 million, for a total of \$13.6 billion for NIH in FY 1998. These new increases will be used to advance research in a number of critical areas, such as cancer research, the Human Genome Project, heart disease, and mental health research. This funding will also support a new AIDS vaccine center which will help fulfill the President's commitment to develop an AIDS vaccine.
- **Increased Funding For The Ryan White Care Act By Over \$150 Million.** The bill increases funding for the Ryan White Care Act by \$153.5 million, which helps prevent and treat HIV and AIDS. The bill includes about \$118 million for the AIDS Drug Assistance Program (ADAP), which helps low-income people with HIV get access to promising new therapies. During any given month, ADAP serves an estimated 40,000 people with HIV who have limited or no coverage to private insurance or Medicaid.
- **New Steps to Prevent Chronic and Environmental Diseases.** For example, this new funding will help improve local diabetes prevention and control programs, establish comprehensive State diabetes prevention programs, and implement at National Diabetes Education Prevention Program to educate Americans about how to take the necessary preventive precautions against this disease which affects over 16 million Americans. Similar programs will be established with this \$50 million increase for cancer, lead poisoning, birth defects and disabilities, fetal alcohol syndrome, and heart disease, the nation's leading killer.
- **New Efforts to Improve Health Care in Rural Communities.** The bill includes a nearly 20 percent increase for rural outreach grants, which support projects that demonstrate new and innovative ways to extend health care services to rural communities, such as improving the use of telemedicine as well as

enhancing outreach efforts and information dissemination to underserved rural areas.

- **New Steps to Prevent and Control Infectious Diseases.** The bill includes a \$27 million increase to prevent and control emerging and reemerging infectious diseases. New funding will be used to improve prevention efforts and to strengthen our ability to respond to outbreaks of infectious diseases, including Lyme disease, infectious diseases in child care settings and foodborne diseases.

The Clinton Administration A Record of Inclusion of Gay and Lesbian Americans

On November 8, 1997, President Clinton will deliver the keynote address to the Human Rights Campaign National Dinner, where he will highlight the diversity that is America's strength and discuss how we must all work together to solve our nation's problems.

Fighting Discrimination

Prohibiting Discrimination against Gays and Lesbians in the Federal Workforce.

Under President Clinton, federal agencies implemented non-discrimination policies that include gays and lesbians and he issued an executive order mandating that security clearances no longer be denied based on sexual orientation.

Fighting Discrimination in the Workplace. President Clinton endorses passage of the Employment Non-Discrimination Act (ENDA), a bill to outlaw discrimination in hiring, firing and promotions based on sexual orientation. The President's endorsement of ENDA in October 1995 makes him the first U.S. President ever to back civil rights legislation for gays and lesbians.

Fighting Gay and Lesbian Hate Crimes. President Clinton signed the Hate Crimes Sentencing Enhancement Act, as part of the 1994 Crime Control Act. The bill covers those victims of hate crimes who have been targeted because of their sexual orientation. The President will also convene the White House Conference on Hate Crimes on November 10, 1997.

Fighting Discrimination Against People With AIDS. President Clinton directed the Justice Department and the Equal Employment Opportunity Commission to vigorously prosecute those who discriminate against people with AIDS, leading to actions against health care providers and facilities that violate the Americans with Disabilities Act. More than 800 charges of AIDS-related discrimination have been settled in four years.

Fighting Discrimination Against People with AIDS in the Military. President Clinton successfully fought for the repeal of the Dornan amendment, which would have required the expulsion of all HIV-positive military service members regardless of their ability to do their jobs.

Opposed Anti-Gay Ballot Initiatives. President Clinton opposed anti-gay ballot initiatives in Colorado and Oregon. His two nominees to the Supreme Court voted to overturn Colorado's Amendment 2, declaring such initiatives unconstitutional

violations of the Equal Protection clause of the Constitution.

Helping Those Fleeing Persecution Because of Their Sexual Orientation. President Clinton's Administration is the first ever to permit asylum for gays and lesbians facing persecution in other countries.

Banning Insurance Discrimination for Pre-Existing Conditions such as AIDS. Fought for and signed the Kennedy-Kassebaum Health Insurance Portability and Accountability Act, which bans insurance discrimination against people with pre-existing medical conditions including HIV/AIDS.

Fighting Harassment Based on Sexual Orientation. The Department of Education has issued policy guidance on sexual harassment of students, which includes certain forms of harassment based on sexual orientation.

Welcoming the Contributions to Public Service of All Americans

President Clinton has Appointed the Most Inclusive Administration in History. The President has appointed over 130 openly gay and lesbian people to his administration, including Virginia Apuzzo as Assistant to the President for Administration, the first openly gay or lesbian Assistant to the President. The President has also nominated Jim Hormel to be U.S. Ambassador to Luxembourg -- if confirmed he would be the first-ever openly gay United States ambassador.

Reaching Out to All Communities. President Clinton named the first Presidential Liaison to the gay and lesbian community.

Working to Save Lives and Improve Health Care

Dramatically Increasing Overall AIDS Funding. The Clinton Administration has responded aggressively to the significant threat posed by HIV/AIDS with increased attention to research, prevention and treatment. President Clinton increased public health spending for HIV/AIDS programs by over 56 percent, including a 186 percent increase for Ryan White CARE programs and a 40 percent rise for AIDS-related research. The 1998 budget also includes \$634 million for CDC's HIV prevention activities and \$1.5 billion to continue research efforts in HIV infection and AIDS supported by NIH.

Saving Lives. In 1996, for the first time in the history of the AIDS epidemic, the number of Americans diagnosed with AIDS declined, falling by 6 percent for Americans over 12 between 1995 and 1996. In addition, HIV/AIDS mortality declined 26 percent between 1995 and 1996, falling from the leading cause of death among 25-44 year olds to the second leading cause of death in that age group. There has been a slowing in the epidemic overall and a sharp decline in the number of AIDS cases in infants and children.[Centers for Disease Control, 7/97]

Increasing AIDS Drug Assistance. Funding for AIDS drug assistance has increased by 221 percent during the Clinton Administration. This program provides new life-prolonging drugs to people with HIV and AIDS.

Accelerating AIDS Drug Approvals in Record Time. President Clinton convened the National Task Force on AIDS Drug Development, and removed dozens of bureaucratic obstacles to the effective and decent treatment of people with AIDS. In four years, FDA has approved 16 new AIDS drugs and 3 new diagnostic tests. Included in those approvals are a new class of drugs known as protease inhibitors, which show tremendous promise in the treatment of HIV disease.

Protecting Medicaid: The President fought for and won protection of the fight to preserve the Medicaid guarantee of coverage for the more than 50% of people living with AIDS who rely on Medicaid for health coverage.

Increasing Research. In one of his first acts in office, President Clinton signed the National Institutes of Health Revitalization Act of 1993, placing full responsibility for planning, budgeting, and evaluation of the AIDS research program at NIH in the Office of AIDS Research.

Pushing for an AIDS Vaccine. On May 18, 1997, President Clinton challenged the nation to commit itself to the goal of developing an AIDS vaccine within the next ten years. The President also announced a number of initiatives to help fulfill this commitment, including high-level international collaboration, a dedicated research center for AIDS vaccine research at NIH, and outreach to scientists, pharmaceutical companies and patient advocates to maximize the involvement of both the private and public sector in the development of an AIDS vaccine.

Focusing National Attention on a National Problem:

Targeting Young People With Warnings of the Dangers of AIDS. Launching the Prevention Marketing Initiative, focusing on the risk to young adults (18-25) with frank public service announcements.

Creating a White House Office of National AIDS Policy. This office is bringing greater direction and visibility to the war on AIDS, while also sharpening the focus of federal AIDS programs.

A Presidential Advisory Council. The President created the Presidential Advisory Council on HIV and AIDS to provide him and his Administration with expert outside advice on the ways in which the Federal government should respond to the HIV/AIDS epidemic.

The Administration also Convened the First Ever White House Conference on HIV and AIDS. On December 6, 1995, the President convened the first White House Conference on HIV and AIDS in the history of the epidemic, bringing together more than 300 experts, activists, and citizens from 37 states, the District of Columbia,

and Puerto Rico for a full day of discussions of key issues.

November 6, 1997

MEMORANDUM

TO: Todd "Sunshine" Summers
Daniel "Slappy" Montoya
Matthew "M²" Murguia
Bob "boobalabobala [Paul's suggestion for a nickname]" Soliz
Paul "Hi, may I please speak to Ms. Paula Yandura?" Yandura

FROM: Glenda and Anil

RE: Presidential Accomplishments

We are in the process of updating a public document detailing the Clinton Administration's HIV/AIDS related accomplishments. Attached is a draft version of that document. We have updated every section other than "The Challenges Ahead", which seems to be at least one to two years out of date.

Please take a few minutes to peruse the document and suggest improvements. Inclusions for the "The Challenges Ahead" will be most helpful.

Thank you!

HIV/AIDS ACOMPLISHMENTS OF THE CLINTON ADMINISTRATION

Our common goal must ultimately be a cure, a cure for all those who are living with HIV, and a vaccine to protect all the rest of us from the virus. A cure and a vaccine: that must be our first and top priority.

*President William Jefferson Clinton
The White House Conference of HIV and AIDS
December 6, 1995*

It has been more than 15 years since the epidemic of HIV/AIDS struck our nation. In that time, more than 600,000 Americans have been diagnosed with AIDS and more than 300,000 men, women, and children have died of AIDS. President Clinton has worked hard to reinvigorate the response to HIV and AIDS, providing new national leadership, substantially greater resources, and a closer working relationship with affected communities. Funding for AIDS research, prevention, and care has increased by 62 percent. Funding for the Ryan White CARE Act has more than doubled and the Food and Drug Administration has accelerated its drug approval process to record times. The President has preserved the Medicaid program, which provides care to 50 percent of people with AIDS, including 92 percent of children with AIDS.

Much more needs to be done. Today, an estimated 650,000 to 900,000 Americans are living with HIV and an average of 40,000 Americans become infected with HIV every year. Women, communities of color, and adolescents are experiencing particularly high rates of infection. That is why President Clinton will continue to work to ensure that our nation responds aggressively and compassionately to the challenges created by HIV and AIDS. This fight will not be over until we have a cure and a vaccine to protect all Americans from this deadly epidemic.

I. A RECORD OF PRESIDENTIAL ACCOMPLISHMENT

◆ Providing National Leadership

- Increasing overall discretionary AIDS funding by 62% in four years.
- Creating the White House Office of National AIDS Policy to direct and coordinate all federal AIDS policy and initiatives.
- Appointing the Presidential Advisory Council on HIV/AIDS to provide thorough recommendations to the President regarding issues related to HIV and AIDS.
- Convening the first White House Conference on HIV and AIDS.
- Challenging the Nation to develop an AIDS vaccine within the next ten years and providing federal support to that end with the AIDS Vaccine Initiative.

◆ Investing in Research

- Increasing AIDS research funding by 40.2% in four years.
- Signing the NIH Revitalization Act of 1993, creating a permanent Office of AIDS Research at NIH and investing it with new authority to plan and carry out the AIDS research agenda.

- Appointing Nobel Prize winner Dr. Harold Varmus to head the National Institutes of Health and Dr. William Paul, world-renowned immunologist, to head the Office of AIDS Research.
- Accelerating AIDS drug approval to record times. Since 1993 the Food and Drug Administration has approved 8 new AIDS drugs, 19 new drugs for AIDS-related conditions and two new diagnostic tests.
- Working aggressively with states to reduce perinatal transmission of HIV. As a result of Public Health Service guidelines recommending the use of AZT by HIV+ pregnant women, the number of infants with perinatally acquired HIV dropped 47 percent between 1992 to 1996.
- Launching a four-year \$100 million effort to develop topical microbicides to enable women to protect themselves from HIV transmission.
- Facilitating the creation of the Forum for Collaborative HIV Research to identify research opportunities to improve care for people with HIV.

◆ **Investing in Care**

- Increasing funding for the Ryan White CARE Act by 158%.
- More than tripling Federal funding for the AIDS Drug Assistance Program to help those without insurance coverage for prescription drugs.
- Responding rapidly to FDA approval of a new class of AIDS drugs called protease inhibitors, which are now used with anti-retroviral drugs as part of combination drug therapy regimens, with increases in funding for State AIDS Drugs Assistance Programs.
- Doubling funding (96% increase) for HUD's Housing Opportunities for People with AIDS program.
- Fighting to preserve the Medicaid guarantee of coverage for people living with AIDS. Nearly 50 percent of people with AIDS and 92 percent of children with AIDS rely on Medicaid for health coverage.
- Revising eligibility rules for Social Security Disability Insurance help people living with HIV to qualify for benefits.

◆ **Investing in Prevention**

- Increasing funding for AIDS prevention by 24 percent.
- Launching the community planning partnership, which empowers local communities to make decisions about the distribution of AIDS prevention funds.
- Launching the Prevention Marketing Initiative, focusing on the risk to young adults (ages 18 to 25) with frank public service announcements recommending sexual abstinence and the correct and consistent use of latex condoms.
- Reorganizing AIDS prevention efforts at the Centers for Disease Control and Prevention to foster greater coordination with efforts to reduce sexually transmitted diseases and tuberculosis.
- Appointing Dr. David Satcher (recently nominated as U.S. Surgeon General, confirmation pending Senate approval) to head the CDC and Dr. Helene Gayle to head the CDC Center for HIV/STD/TB Prevention.

II. RESEARCH DEVELOPMENTS & OPPORTUNITIES FOR PROGRESS

◆ Therapeutics

Implications of Viral Levels

NIH-sponsored research indicates that decreasing the amount of HIV in the blood can significantly slow how quickly a person becomes ill, and can also decrease the chance of transmission from mother to child. This finding has tremendous implications for therapy. Studies indicate that combination therapy (i.e. the use of one or more anti-retroviral drugs), especially where a protease inhibitor (the newest class of anti-retroviral drugs) is used, provides the greatest benefit for the patients. However, this approach is new and we still do not know the best time to start therapy, to stop therapy, to change therapy, and how long these effects will last. More research is needed.

Discovery of New Receptors

The breakthrough discovery of new chemokine receptors (CCR5 and CXCR4 or fusin are receptors on the cell where HIV binds) has offered exciting new avenues for drug and vaccine development. Research indicates that people who have defective or missing receptors are much more resistant to becoming infected.

◆ Prevention

Vaccines

A vaccine that will decidedly control new infections both in the U.S. and abroad is desperately needed. New generations of vaccines, including DNA vaccines, are now in early development. Research efforts in the HIV vaccine arena will have important implications for developing vaccines for other diseases such as Tuberculosis. On May 18, 1997, President Clinton challenged the nation to commit itself to the goal of developing an AIDS vaccine within the next ten years. The President also announced a number of important initiatives to help fulfill this commitment, including high-level international collaboration, a dedicated research center for AIDS vaccine research at NIH, and outreach to scientists, pharmaceutical companies, and patient advocates to maximize the involvement of both private and public sectors in the development of an AIDS vaccine.

Other Prevention Efforts

Preventing HIV infection through behavioral modification and/or a microbicide (a mechanical or chemical barrier method that blocks infection) also offers tremendous hope. Secretary Shalala has promised \$100 million over the next four years (announcement made July 1996) for microbicide research and development.

III. ROLE OF THE VICE PRESIDENT

◆ The Forum for Collaborative HIV Research

The Vice President has been intimately involved in developing the Forum for Collaborative HIV Research. This new public-private group is designed to catalyze collaborations among government researchers, pharmaceutical companies, third-party payors and the community to capitalize on recent scientific advances and learn how to optimally use available treatment regimens.

◆ Fighting Discrimination: Standing Up for the Rights of People with AIDS

- Vigorously enforced the Americans with Disabilities Act, which prohibits discrimination against people with HIV/AIDS.
- Resolving nearly 800 charges alleging employment discrimination against people with HIV and AIDS, obtaining monetary benefits of more than \$6.1 million.
- Leading the fight to repeal the discriminatory "Donnan Amendment," which would have discharged all HIV-positive military personnel.
- Using the White House "bully pulpit" to speak out against AIDS discrimination.

IV. THE CHALLENGES AHEAD

President Clinton continues to seek to improve the national response to HIV and AIDS. The Clinton Administration is working closely with business leaders, religious leaders, community organizations, the pharmaceutical industry and members of the affected community to increase such efforts by:

- ◆ Eliminating barriers to AIDS vaccine and drug development and approval. Vice President Gore is leading an effort to increase cooperation between the federal government and the pharmaceutical industry on AIDS research and drug development.
- ◆ Challenging Congress to retain the federal guarantee of Medicaid coverage for people living with HIV and AIDS.
- ◆ Seeking additional funding for AIDS research, prevention and care.
- ◆ Strongly supporting the Office of AIDS Research at NIH to provide greater focus and direction for our national AIDS research effort.
- ◆ Decreasing the number of children born HIV-infected by implementing the results of research demonstrating that mother to child transmission can be dramatically reduced through administration of AZT to women during pregnancy and delivery and to infants after birth.

- ◆ Establishing a national goal to reduce the number of new HIV infections each year “until there are none.”
- ◆ Working to eliminate AIDS-related discrimination in the workplace, health care institutions, employment and housing.
- ◆ Collaborating with business leaders to increase workplace AIDS education to help reduce the stigma attached to HIV.
- ◆ Working with parents, schools, clergy and youth advocates to reduce the number of adolescents and young adults becoming infected with HIV.

STOP

HIV/AIDS

Democratic Position

The Democratic Party strongly supports federal funding for HIV/AIDS research, prevention, and care. More than 29 million men, women, and children all around the world have been infected with HIV, the virus which causes AIDS, including nearly a million Americans who currently live with HIV. Since 1981, more than 500,000 Americans have been diagnosed with AIDS while more than 300,000 have already lost their lives to this disease. All of the recent developments in protease inhibitors and combination drug therapies, however, have convinced us that it is no longer a question of whether we can develop a vaccine for AIDS and a cure for HIV, it is simply a matter of when.

Democratic Accomplishments

The Clinton Administration has increased federal discretionary funding for HIV/AIDS research, prevention, and care programs by 55% over the last four and a half years -- despite the fact that federal discretionary spending has increased by only 1% overall. During this same period, the Clinton Administration has tripled federal funding for the AIDS Drug Assistance Program (ADAP) and increased federal funding for the Ryan White CARE program by 186%. The Clinton Administration has also:

- signed the reauthorization of the Ryan White Care Act which guarantees federal assistance until 2001;
- signed the National Institutes of Health Revitalization Act which strengthened the Office of AIDS Research;
- established the Office of National AIDS Policy at the White House to coordinate federal AIDS policy;
- created the Presidential Advisory Council on HIV/AIDS;
- convened the first White House Conference on HIV/AIDS;
- released the first National AIDS strategy;
- enforced the Americans with Disabilities Act which prohibits discrimination against people with HIV/AIDS;
- approved 8 new AIDS drugs and 19 new drugs for AIDS-related conditions in record time; and
- enacted the bipartisan budget agreement which guarantees Medicaid benefits for 53% of all Americans living with AIDS and 90% of all children living with AIDS.

Democratic Goals

The Democratic Party challenges all Americans to support President Clinton's 1998 budget request which would increase federal funding for:

- AIDS-related research programs, which have prolonged the lives of people with AIDS and improved their quality of life, from \$1.48 billion in 1997 to \$1.54 billion in 1998;
- the Housing Opportunities for People with AIDS (HOPWA) program, which supports community-based housing for people with AIDS, from \$196 million in 1997 to \$204 million in 1998;
- the Ryan White Care Act program, which supports community-based health and social services for people with AIDS, from \$996.3 million in 1997 to \$1.036 billion in 1998; and
- HIV prevention programs, which support behavior change/risk-reduction activities in populations at greatest risk, from \$617 million in 1997 to \$634 million in 1998.

Republican Position

Republicans have consistently opposed Democratic efforts to increase federal funding for HIV/AIDS research, prevention, and care.

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- convened the first White House Conference on HIV/AIDS; ^{at the White House}
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Republican Position

Republicans have consistently opposed Democratic efforts to increase federal funding for HIV/AIDS research, prevention, and care.

September 1997.

THE CLINTON ADMINISTRATION ON HIV/AIDS

"Our common goal must ultimately be a cure, a cure for all those who are living with HIV, and a vaccine to protect all the rest of us from the virus. A cure and a vaccine, that must be our first and top priority."

President Clinton
White House Conference on HIV/AIDS

In his four years in office, President Clinton has sharply increased the Federal government's commitment to ending the epidemic of HIV/AIDS that has already taken the lives of more than 300,000 Americans. He has done that by:

- Increasing overall AIDS funding by more than 56% in four years.
- Creating a White House Office of National AIDS Policy to bring greater direction and visibility to the war on AIDS.
- Convening the first-ever White House Conference on HIV/AIDS and appointing the Presidential Advisory Council on HIV and AIDS.
- Increasing funding for the Ryan White CARE Act 186% in four years to nearly \$1 billion.
- Tripling federal funding for the AIDS Drug Assistance Program to help those without insurance coverage obtain prescription drugs.
- Strengthening the Office of AIDS Research at NIH and vesting it with new authority to plan and carry out the AIDS research agenda.
- Accelerating AIDS drug approval to record times. In four years, FDA has approved 16 new AIDS drugs and 3 new diagnostic tests.
- Doubling funding for Housing Opportunities for People with AIDS.
- Winning the fight to preserve the Medicaid guarantee of coverage for the more than 50% of people living with AIDS who rely on Medicaid for health coverage.

- Revising eligibility rules for Social Security Disability Insurance to make it easier for people living with HIV to qualify for benefits.
- Signing the Kennedy-Kassebaum Health Insurance Portability and Accountability Act, which bans insurance discrimination against people with pre-existing medical conditions including HIV/AIDS.
- Launching a four-year \$100 million effort to develop topical microbicides to allow people to protect themselves from HIV.
- Establishing the HIV prevention community planning partnership, which empowers local communities to make decisions about the direction of AIDS prevention programs.
- Launching the Prevention Marketing Initiative, focusing on the risk to young adults (18-25) with frank public service announcements recommending sexual abstinence and, for those who are sexually active, the correct and consistent use of latex condoms.
- Vigorously enforcing the Americans with Disabilities Act, which prohibits discrimination against people with HIV/AIDS. More than 800 charges of AIDS-related discrimination have been settled in four years.
- Leading the fight to repeal the discriminatory "Dornan Amendment," which would have discharged all HIV-positive military personnel.
- Creating the Forum for Collaborative HIV Research to improve knowledge of HIV treatment methods.
- Working with AIDS activists to protect the rights of immigrants with HIV and PLWA's enrolled in managed care plans.
- Creating the Advisory Commission on Consumer Protection and Quality in the Health Care Industry to increase consumers' rights.

THE CLINTON ADMINISTRATION
Meeting America's Challenges and Protecting Our Values
 Paid for by Clinton/Gore '96

President Clinton's HIV/AIDS Accomplishments

“Our common goal must ultimately be a cure, a cure for all those who are living with HIV, and a vaccine to protect all the rest of us from the virus. A cure and a vaccine, that must be our first and top priority.” *President Clinton to the White House Conference of HIV and AIDS, December 6, 1995*

It has been more than 15 years since the epidemic of HIV/AIDS struck our nation. In that time, more than 500,000 Americans have been diagnosed with AIDS and more than 300,000 men, women, and children have died of AIDS. President Clinton has worked hard to reinvigorate the response to HIV and AIDS, providing new national leadership, substantially greater resources, and a closer working relationship with affected communities. Funding for AIDS research, prevention, and care has increased by 43 percent at a time when all government spending has been virtually frozen. Funding for the Ryan White CARE Act has more than doubled and the Food and Drug Administration has accelerated its drug approval process to record times. The President has preserved the Medicaid program, which provides care to 50 percent of people with AIDS, including 92 percent of children with AIDS.

Much more needs to be done. Today, an estimated 650,000 to 900,000 Americans are living with HIV and an average of 40,000 Americans become infected with HIV every year. Women, communities of color, and adolescents are experiencing particularly high rates of infection. That is why President Clinton will continue to work to ensure that our nation responds aggressively and compassionately to the challenges created by HIV and AIDS. This fight will not be over until we have a cure and a vaccine to protect all Americans from this deadly epidemic.

A RECORD OF ACCOMPLISHMENT

◆ Providing National Leadership

- Increasing overall AIDS funding by 56% in four years
- Creating the Office of National AIDS policy at the White House to provide greater direction and coordination for AIDS policy.
- Appointing the Presidential Advisory Council on HIV and AIDS.
- Convening the first-ever White House Conference on HIV and AIDS.

◆ Investing in Research

- Increasing AIDS research funding by 40.2% in four years.
- Signing the NIH Revitalization Act of 1993, creating a permanent Office of AIDS Research at NIH and vesting it with new authority to plan and carry out the AIDS research agenda.
- Appointing Nobel Prize winner Dr. Harold Varmus to head the National Institutes of Health and Dr. William Paul, world-renowned immunologist, to head the Office of AIDS Research.
- Accelerating AIDS drug approval to record times. Since 1993, the Food and Drug

Administration has approved 12 new AIDS drugs and two new diagnostic tests.

- Working aggressively with the states to reduce transmission of HIV from mother to child.
- Launching a four-year \$100 million effort to develop topical microbicides to allow women to protect themselves from HIV.
- Facilitating creation of the Forum for Collaborative HIV Research to identify research opportunities to improve care for people with HIV.

◆ **Investing in Care**

- Increasing funding for the Ryan White CARE Act 186.3% in four years.
- Tripling Federal funding for the AIDS Drug Assistance Program to help those without insurance coverage for prescription drugs.
- Increasing funding for Housing Opportunities for People with AIDS 96 percent.
- Fighting to preserve the Medicaid guarantee of coverage for people living with AIDS. Nearly 50 percent of people with AIDS and 92 percent of children with AIDS rely on Medicaid for health coverage.
- Revising eligibility rules for Social Security Disability Insurance to make it easier for people living with HIV to qualify for benefits.

◆ **Investing in Prevention**

- Increasing funding for AIDS prevention by 24 percent.
- Launching the community planning partnership, which empowers local communities to make decisions about the distribution of AIDS prevention funding.
- Launching the Prevention Marketing Initiative, focusing on the risk to young adults (18 to 25) with frank public service announcements recommending sexual abstinence and the correct and consistent use of latex condoms.
- Reorganizing AIDS prevention efforts at the Centers for Disease Control and Prevention to foster greater coordination with efforts to reduce sexually transmitted diseases and tuberculosis.
- Appointing Dr. David Satcher to head the CDC and Dr. Helene Gayle to head the CDC Center for HIV/STD/TB Prevention.

II. The Federal Response

Your Administration has been credited with making tremendous progress in the fight against AIDS. Progress since you took office includes:

- ◆ A 40 percent increase in NIH-supported AIDS research.
- ◆ A 158 percent increase in Ryan White AIDS Treatment grants.
- ◆ A 24 percent increase in CDC HIV prevention activities.
- ◆ A 96 percent increase for HUD's Housing Opportunities for People with AIDS program.

- ◆ Strengthening the Office of AIDS Research at the National Institutes of Health.
- ◆ As a result of Public Health Service guidelines recommending the use of AZT by HIV-positive pregnant women and their newborns, a 17 percent drop in the number of infants with perinatally-acquired HIV infection (from 1994 to 1995).
- ◆ Responding rapidly to FDA approval of a new class of AIDS therapies called protease inhibitors with increases in funding for State AIDS Drugs Assistance Programs.
- ◆ Easing of Social Security disability rules to speed approval of eligibility.
- ◆ Creating the Office of National AIDS Policy at the White House and the Presidential Advisory Council on HIV/AIDS.

III. Research Developments & Opportunities for Progress

A. THERAPEUTICS

Implications of Viral Levels

NIH-sponsored research indicates that decreasing the amount of HIV in the blood can significantly slow how quickly a person becomes ill, and can also decrease the chance of transmission from mother to child. This finding has tremendous implications for therapy. Studies indicate that combination therapy (i.e., use of one or more anti-retroviral drugs), especially where a protease inhibitor (the newest class of anti-retroviral drugs) is used, provides the greatest benefit for the patients. However, this approach is new and we still do not know the best time to start therapy, to stop therapy, to change therapy, and how long these effects will last. More research is needed.

Discovery of New Receptors

The breakthrough discovery of new chemokine receptors (CCR5 and CXCR4 or fusin are receptors on the cell where HIV binds) has offered exciting new avenues for drug and vaccine development. Research indicates that people who have defective or missing receptors are much more resistant to becoming infected.

B. PREVENTION

In response to the recommendations from the Report of the NIH AIDS Research Program Evaluation Task Force, NIH is developing a comprehensive HIV prevention science agenda. Areas of focus will include:

Vaccines. We desperately need a vaccine that will control new infections both in the U.S. and abroad. New generations of vaccines, including DNA vaccines, are now in early development. Research efforts in the HIV vaccine arena will have important implications for developing

is it still being developed?

vaccines for other diseases such as Tuberculosis.

Other Prevention Efforts. Preventing HIV infection through behavioral modification and/or a microbicide (a mechanical or chemical barrier method that blocks infection) also offers tremendous hope. Secretary Shalala has promised \$100 million over the next four years for microbicide research and development.

IV. Role of the Vice President

The Vice President has been intimately involved in developing the Forum for Collaborative HIV Research. This new public-private group is designed to catalyze collaborations among government researchers, pharmaceutical companies, third-party payors, and the community to capitalize on recent scientific advances and learn how to optimally use available treatment regimens.

The Vice President also has expressed interest in continuing efforts to expedite vaccine and microbicide research.

- ◆ **Fighting Discrimination: Standing Up for the Rights of People with AIDS**
 - Vigorously enforced the Americans with Disabilities Act, which prohibits discrimination against people with HIV/AIDS.
 - Resolving nearly 800 charges alleging employment discrimination against people with HIV and AIDS obtaining monetary benefits of more than \$6.1 million.
 - Leading the fight to repeal the discriminatory "Dornan Amendment," which would have discharged all HIV-positive military personnel.
 - Using the White House "bully pulpit" to speak out against AIDS discrimination.

Office of National AIDS Policy Accomplishment Highlights (1994-1997)

Background

On November 10, 1994, President Clinton named Patricia S. Fleming to serve as the nation's National AIDS Policy Director. In that capacity, Ms. Fleming served as the Administration's chief spokesman on issues related to HIV/AIDS. The President had created the Office of National AIDS Policy in 1993 to bring greater focus and direction to the Federal response to the epidemic of HIV/AIDS. Creation of such an office had been recommended by several advisory groups, including the National Commission on AIDS. Prior to her appointment, Fleming served as Special Assistant to Health and Human Services Secretary Donna E. Shalala. In that position, Fleming had helped to transform Federal efforts in response to the epidemic, including an aggressive AIDS education initiative aimed at young adults that advocated the use of latex condoms. She also was responsible for a greatly increased focus on the impact of HIV/AIDS on women and communities of color. Prior to her work at HHS, Fleming served as a key advisor to the late Representative Ted Weiss (D-NY), directing numerous investigations of the Reagan and Bush Administrations' response to HIV/AIDS.

Major Clinton Administration Accomplishments in HIV/AIDS

- Increased funding for AIDS research, prevention, and care by more than 50% in first four years.
- Increased funding for the Ryan White CARE Act by 158 percent and increased number of cities eligible for CARE Act funds from 34 to 49.
- Tripled funding for the AIDS Drug Assistance Programs, which helps low-income uninsured people with AIDS purchase needed therapies.
- Created the Office of National AIDS Policy at the White House to direct Federal AIDS policy.
- Signed the NIH Revitalization Act of 1993, creating a strengthened Office of AIDS Research at NIH and vesting it with authority to plan and carry out the AIDS research agenda.
- Accelerated AIDS drug approval to record times. Since 1993, the Food and Drug Administration has approved 16 new AIDS drugs and two new diagnostic tests.
- *any more?*
Facilitated creation of the Forum for Collaborative HIV Research to identify research opportunities to improve care for people with HIV.
- Preserved the Medicaid guarantee of coverage for people living with AIDS. Nearly 50 percent of people with AIDS and 92 percent of children with AIDS rely on Medicaid for health coverage.
- Launched the community planning partnership, which empowers local communities to make decisions about the distribution of AIDS prevention funding.
- Vigorously enforced the Americans with Disabilities Act, which prohibits discrimination against people with HIV/AIDS.

Accomplishments

During her tenure as National Aids Policy Director, Patricia Fleming ~~has~~ focused her efforts on expanding access to high-quality care for people living with HIV/AIDS; increasing the focus of AIDS prevention efforts on young people; further increasing attention paid to the needs of women living with HIV/AIDS; representing the U.S. at all international forums on HIV/AIDS; and working to improve the coordination of government efforts and public-private partnerships. Among her accomplishments:

AIDS Funding. In the two budgets enacted during Fleming's tenure, total funding for AIDS research, prevention, treatment, and housing increased by ____%. This includes a ____% increase for the Ryan White CARE Act; a ____% increase for AIDS research; a ____% increase for AIDS prevention; and a ____% increase for AIDS housing programs.

White House Conference on HIV/AIDS. Ms. Fleming directed the convening of the first-ever White House Conference on HIV/AIDS, which was held on December 5, 1995. The Conference brought nearly 300 HIV/AIDS, advocates, activists, health care professionals, and others to the White House for a full day of discussion of the central demands of the epidemic. This historic conference has helped to shape the policies adopted by the Clinton Administration in the ensuing year, including a rapid increase in funding for AIDS drug assistance and vaccine research.

National AIDS Strategy. Fleming's office developed and released the first-ever National AIDS Strategy, establishing six central goals to guide all Federal efforts and laying out nearly three dozen opportunities for progress in 1997 alone. Development of a National AIDS Strategy had been recommended by the National AIDS Commission to bring greater focus and direction to Federal AIDS policies.

Youth Report. On March 5, 1996, Fleming delivered to President Clinton a report highlighting the particular challenges facing young Americans during the AIDS epidemic. The report, which noted that "at least one American teenager is becoming infected with HIV every hour of every day," has galvanized the national response to AIDS among young people. It has resulted in nearly a dozen changes in Federal AIDS policy to increase the focus on and the participation of youth in AIDS policy development, clinical trials, prevention programs, and other areas.

"Respect Yourself, Protect Yourself" Working with the Centers for Disease Control and Prevention, Fleming helped develop an innovative public service campaign directed at young adults featuring the real-life experiences of young people infected and affected by HIV/AIDS. The campaign continued the Federal advocacy for the use of condoms by those who are sexually active and also featured, for the first time, openly gay men speaking to their peers.

Medicaid. Early in the national debate over the future of Medicaid, Fleming spoke out against the potential impact of a State-run block grant on the lives of people living with HIV/AIDS. Fleming's advocacy of the rights of those individuals helped draw national attention to the concerns of people living with AIDS. More than 50 percent of Americans living with AIDS rely on Medicaid for their health care needs. When President Clinton vetoed the proposed Medicaid block grant he cited the need of people with AIDS as one of his reasons.

AIDS Research. Working with Vice President Gore, Fleming helped to create the Forum for Collaborative HIV Research, a public-private partnership that is working to identify post-marketing clinical trials for AIDS drugs approved under the Food and Drug Administration's accelerated approval system. The Forum includes representatives of several Federal Agencies, pharmaceutical manufacturers, health care insurance companies, clinicians, researchers, and advocates for people living with HIV/AIDS.

AIDS Drug Assistance Programs. Fleming advocated for the creation of a specific "earmark" for funding for AIDS Drug Assistance Programs within the Ryan White CARE Act. Since its creation in 1995, that earmark has increased by 221 percent to \$167 million, bringing assistance to thousands of individuals who could not otherwise afford to purchase AIDS drugs.

Regional Briefings. In partnership with the Presidential Advisory Council on HIV/AIDS, the National AIDS Fund, and Funders Concerned About AIDS, Fleming conducted 13 regional briefings on AIDS policy, including 11 town hall meetings to hear directly from people living with HIV/AIDS about their needs and concerns. These briefings included visits to more than 50 community-based AIDS organizations.

International Leadership. Fleming serves on the board of the United Nations Global Program on AIDS (UNAIDS) and has represented the U.S. at the 1994 and 1996 International AIDS Conferences in Berlin and Vancouver as well as the Global AIDS Summit in Paris in 1995. Fleming has worked closely with the U.S. Agency for International Development and the Department of State to increase U.S. focus on the international demands of the epidemic.

Date: Friday, May 23, 1997

FACT SHEET

Contact: HHS Press Office (202) 690-6343

CLINTON ADMINISTRATION RECORD ON HIV/AIDS

Overview: AIDS is the leading cause of death among Americans between the ages of 25 and 44, accounting for more than 40,000 deaths each year. An estimated 650,000 to 900,000 Americans are believed to be living with HIV, the virus that causes AIDS. Since the AIDS epidemic began in 1981, more than 500,000 Americans have been diagnosed with AIDS and more than 300,000 men, women, and children have lost their lives to this disease.

The Clinton Administration has responded aggressively to the significant threat posed by HIV/AIDS with increased attention to research, prevention, and treatment. Overall funding for AIDS-related programs increased by 55 percent in the first four years of the Clinton Administration, with funding for AIDS care under the Ryan White CARE Act increasing by 158 percent and assistance for the purchase of AIDS drugs nearly tripling. President Clinton's FY 1998 budget plan continues this commitment, proposing over \$1 billion for Ryan White activities — \$40 million more than in 1997. The budget also includes \$634 million for CDC's HIV prevention activities — \$20 million more than in 1997 — and \$1.5 billion to continue research efforts in HIV infection and AIDS supported by NIH.

At the same time, the Administration has sharpened the focus of its AIDS programs by strengthening the Office of AIDS Research at the National Institutes of Health, creating a new Center for HIV/STD/TB Prevention at the Centers for Disease Control and Prevention, and establishing a new Office of National AIDS Policy at the White House. The Administration also convened the first-ever White House Conference on HIV and AIDS in December 1995, and released the first National AIDS Strategy in December 1996. In addition, in May 1997, President Clinton announced a comprehensive AIDS vaccine research initiative designed to lead to the development of an AIDS vaccine within the next 10 years.

In February 1997, the Centers for Disease Control and Prevention (CDC) reported that in the first six months of 1996, for the first time since the epidemic took hold, the number of Americans who died of AIDS declined by 12 percent. In November 1996, the CDC reported a sharp decline in the number of infants born HIV-infected.

HHS Spending on HIV/AIDS

In the four budgets approved under President Clinton, spending for AIDS research, prevention, and treatment increased by 55 percent. These increases include:

(in thousands)

Program	FY93	FY97	FY93-97 Change	President's FY98 Plan
Research (NIH)	\$1,071,457	\$1,501,720	+40%	\$1,541,000

Prevention (CDC)	\$498,263	\$618,081	+24%	\$634,000
Treatment (HRSA)	\$385,345	\$996,252	+173%	\$1,036,000

Note: Altogether, discretionary AIDS-related spending by HHS in FY 1997 will total \$3.2 billion, an increase of 55 percent from FY 1993. An additional \$2.8 billion is expected to be expended in FY 1997 for AIDS care under Medicare and Medicaid. It is estimated that more than 50 percent of Americans living with AIDS rely on Medicaid for their health care coverage.

ADMINISTRATION INITIATIVES ON HIV/AIDS

Under President Clinton, a wide array of initiatives have been undertaken including:

AIDS Policy. The President created the Office of National AIDS Policy within the White House to advise him on AIDS policy issues and coordinate interdepartmental activities.

AIDS Conference. On December 6, 1995, the President convened the first White House Conference on HIV and AIDS in the history of the epidemic, bringing together more than 300 experts, activists, and citizens from 37 states, the District of Columbia, and Puerto Rico for a full day of discussions of key issues.

AIDS Vaccine Initiative. On May 18, 1997, President Clinton challenged the nation to commit itself to the goal of developing an AIDS vaccine within the next ten years. The President also announced a number of important initiatives to help fulfill this commitment, including high-level international collaboration, a dedicated research center for AIDS vaccine research at NIH, and outreach to scientists, pharmaceutical companies, and patient advocates to maximize the involvement of both private and public sectors in the development of an AIDS vaccine.

AIDS Strategy. On December 17, 1996, the Clinton Administration released the first National AIDS Strategy, establishing goals for the nation and opportunities for immediate progress.

Advisory Council. The President created the Presidential Advisory Council on HIV and AIDS to provide him and his Administration with expert outside advice on the ways in which the Federal government should respond to the HIV/AIDS epidemic.

Disability Eligibility. The Social Security Administration published revised regulations expanding the list of health manifestations that will be considered in determining eligibility due to HIV/AIDS for Social Security and Supplemental Security Income disability benefits.

Drug Approval. Since President Clinton took office, the FDA has approved 8 new AIDS drugs and 19 new drugs for AIDS-related conditions, and accelerated approval to record times. Included in those approvals are a new class of drugs known as protease inhibitors, which show tremendous promise in the treatment of HIV disease. In March 1997, the FDA approved the first protease inhibitor with labeling for use in children.

Housing. The Department of Housing and Urban Development has established the National Office of HIV/AIDS Housing to assist people with HIV/AIDS to pay for housing. Funding for the Housing Opportunities for People with AIDS program has increased by 96 percent. HUD and HHS have launched collaborative efforts to combine housing assistance and medical and social services for people living with HIV/AIDS.

Mental Health. The Substance Abuse and Mental Health Administration awarded the first Federal grants to develop mental health services for persons living with HIV/AIDS and their families and partners.

Perinatal Transmission. Following the release of research findings from an NIH-sponsored AIDS clinical trial that indicated that use of AZT by HIV-infected pregnant women dramatically reduced the rate of HIV transmission from mother to infant, the U.S. Public Health Service issued guidelines recommending routine counseling and voluntary HIV testing for all pregnant women.

Prevention. The Centers for Disease Control and Prevention (CDC) launched the Prevention Marketing Initiative aimed at young adults (ages 18-25) to change behaviors that contribute to the transmission of HIV. The initiative features production of public service announcements promoting both sexual abstinence and the consistent and correct use of latex condoms. A new community planning process gives local communities more authority over the shape and direction of AIDS prevention efforts.

Research. In one of his first acts in office, President Clinton signed the National Institutes of Health Revitalization Act of 1993, placing full responsibility for planning, budgeting, and evaluation of the AIDS research program at NIH in the Office of AIDS Research. The President requested and received the first federal plan for biomedical research on AIDS.

Ryan White CARE Act. Funding for the CARE Act has increased by 158 percent and on May 20, 1996, President Clinton signed a five-year reauthorization of this program, guaranteeing assistance until the year 2001. Funding for AIDS drug assistance has increased by 221 percent.

Water Safety. The CDC and the Environmental Protection Agency issued guidelines recommending steps to purify drinking water to protect vulnerable populations against *Cryptosporidium*, which can be fatal to those with compromised immune systems.

Youth. The Office of National AIDS Policy issued a report to the President on the rising rates of HIV transmission among adolescents. The report noted that an average of at least one American teenager becomes infected with HIV every hour of every day and recommended steps to increase youth involvement in AIDS prevention, care, and research efforts.

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