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Folder Title:

Correspondence - SLT - Incoming - 5/97 [Folder 1] [2]

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Withdrawal/Redaction Sheet

Clinton Library

DOCUMENT NO. AND TYPE	SUBJECT/TITLE	DATE	RESTRICTION
001a. form	re: Correspondence routing slip (Personal) (1 page)	05/14/1997	b(6)
001b. letter	Inmate living with AIDS to Sandra Thurman re: Presidential Advisory Council (Personal) [partial] (2 pages)	05/07/1997	b(6)
001c. envelope	re: Inmate living with AIDS to Sandra Thurman (Personal) (1 page)	05/08/1997	b(6)

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2018-0764-F

jm2038

RESTRICTION CODES

Presidential Records Act - [44 U.S.C. 2204(a)]

- P1 National Security Classified Information [(a)(1) of the PRA]
- P2 Relating to the appointment to Federal office [(a)(2) of the PRA]
- P3 Release would violate a Federal statute [(a)(3) of the PRA]
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C. Closed in accordance with restrictions contained in donor's deed of gift.

PRM. Personal record misfile defined in accordance with 44 U.S.C. 2201(3).

RR. Document will be reviewed upon request.

Freedom of Information Act - [5 U.S.C. 552(b)]

- b(1) National security classified information [(b)(1) of the FOIA]
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THE WHITE HOUSE
WASHINGTON

May 22, 1997

Kenneth E. Newsome
#A-58295
Unit 32B Bldg., B-Zone, B-#54
Parchman, MS 38738

Dear Mr. Newsome:

Thank you for writing to me to inquire about a position on the President's Advisory Council on HIV/AIDS. Decisions about participants in that meeting are not made by my office. However, I will be happy to pass along a copy of the letter to the appropriate person.

I did want also want to tell you that I intend to take a very serious look at the care and service needs of those who are living with HIV and AIDS and are incarcerated. I firmly believe that everyone is entitled to proper, timely medical treatment, particularly those who are struggling with HIV and AIDS.

I appreciate your making the effort to write, and encourage you to continue to share your thoughts and concerns. There is much that we as a nation need to do to put an end to this terrible epidemic.

Again, thank you for writing. I wish you the best of luck.

Very truly yours,

Sandra Thurman
Director
White House Office of National AIDS Policy

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CLINTON LIBRARY PHOTOCOPY

To: Ms. Sandy Thurman, Dir. National Aids Policy
From: [REDACTED] (b)(6)
Re: N.I.V./A.I.D.S. Issues/Vacancies on the
Presidential Advisory Council
Date: May 7th, 1997 [001b]

Dear Ms. Thurman,

I'm inquiring about a
vacancies or vacancies on the "Presidential Ad-
visory Council". Jackie Walker, the A.I.D.S. In-
formation Coordinator, for the "A.C.L.U.F." - National
Prison project, recommended that I write you
about this. Jackie stated that it would be great
to have a former prisoner living with N.I.V./
A.I.D.S., on the advisory council, so she encour-
aged me to write you. Jackie stated, that the
National A.I.D.S. policy office, can make recom-
mendations to the President, regarding people to
fill these vacancies. I am concerned about the
care and management of prisoners living (w/ A.
I.D.S.) & (N.I.V. symptoms). I am currently in-
carcerated within the Mississippi Dept. of Corr.,
At Parchman, Miss., in Sunflower County. How-
ever I should be released within the year.
There is so much discrimination within the pri-

son system, that makes it that much more stressful on a N.I.V.⁺/A.I.D.S., prisoner. I want to help solve some of these ~~problems~~ problems, going on across the country. Someone has to take a stand on this growing epidemic. Education is the key to this situation. Ignorance about N.I.V.⁺/A.I.D.S., is enormous, it overrides any positive effort to learn about this epidemic. Drugs by far, play a big role in the transmission of this deadly chronic illness, anything from the crack-users unprotected sex, to those who shoot-up with dirty needles. In the prisons so many people are dying due to poor medical ~~care~~ ^{care}, lack of medication. The prison systems need to be educated on certain topics dealing with N.I.V./A.I.D.S., prisoners, with the growing number of positive prisoners entering the prison system nationwide. I hope you will take me into consideration on a recommendation to the President to sit on the council. Thank you for your time & efforts concerning this matter.

Sincerely,

(b)(6)

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THE WHITE HOUSE
WASHINGTON

May 22, 1997

Don Sneed
Executive Director
Renaissance III, Inc.
2606 Martin Luther King, Jr. Blvd.
Dallas, TX 20503

Dear Mr. Sneed:

Thank you for taking the time to write me with your recommendations for this nation's priorities in responding to the AIDS epidemic. You have a thoughtful perspective that I appreciated.

The President, Vice President, and their Administration are fully committed to ending this epidemic. We will pay particular attention to the needs of communities of color, women, and youth, groups disproportionately affected by HIV and AIDS.

Again, thank you for writing. I wish you the best of luck in your work in Dallas. Please continue to share your thoughts and concerns!

Very truly yours,

Sandra Thurman
Director
White House Office of National AIDS Policy

Office of
National AIDS Policy

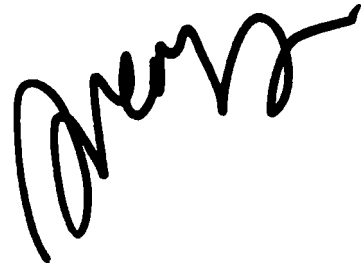
Correspondence Routing Slip

Tracking Number: G3657

Date Rcvd: 04-18-97

From: Don Sneed

Renaissance III, Inc. Rise Project



Staff Action:

Reviewed By Sandy: _____ Reviewed By: _____

Assigned To: _____

RCVD: _____ DONE: _____

Recommendations/Instructions:

To Support Staff: _____

Date of Response: _____

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RENAISSANCE III, INC.
RISE PROJECT

April 10, 1997

**Sandy Thurman, Director
Office of National AIDS Policy
750 17th Street, NW, Suite 600
Washington, D. C. 20503**

Director Thurman,

We want to take this opportunity to congratulate you on your appointment and wish you the utmost success in your new position.

As a person living with HIV disease and the Director of a People of Color organization targeting African American gay, bisexual, MSMs, parolees and substance abusers there are major concerns that we have that we wish to bring to your attention. We hope that as you advise the President and establish national policies for addressing the HIV epidemic that these concerns and issues will be given due consideration.

- a. The HIV epidemic has become "blacker and browner." (Has moved into and established itself in the African American and Latino communities.)**
- b. In the African American community, especially in the South, African American gay, bisexual and MSMs are being infected and affected in numbers vastly disproportionate to our percentage of the general population.**
- c. HIV prevention, education, outreach and services must be established, redirected and or enhanced to address this health crisis in the African American community here in the South.**
- d. The new "miracle" drugs are proving to be effective. Measures must be put into place to facilitate a formerly disabled person's transition from the disability rolls to the payroll without the permanent lost of health, insurance and disability benefits should their medical regimens fail.**
- e. The ADAP program is a vital link to life for many of our constituents. We ask that you advise the President to not only continue funding but to increase it.**

2606 Martin Luther King Jr. Blvd., Dallas, Texas 75215-6397
P.O. Box 398133, Dallas, Texas 75339-8133
Phone (214) 421-4343; Fax (214) 421-2140

- f. Substance abuse is a critical issue for African American HIV infected and affected individuals here in the South (crack cocaine is the drug of choice and the one most closely associated with HIV/AIDS in this area of the nation.) We ask that you make the President aware of this and that additional substance abuse dollars be allocated in addition to providing treatment on demand for HIV infected individuals.**
- g. As we service clients we have noticed that many are using their SSI and SSDI monthly checks to subsidize their drug/alcohol addictions. We recommend that any HIV infected individual who engages in this type of behavior have their payments suspended until they are in treatment and have successfully completed the program. In these cases a payee should be placed on these individuals' SSI and SSDI payments to assure their compliance with their substance abuse treatment programs/regimens.**

We hope that these insights and suggestions prove helpful. We look forward to working with you and your staff. Hopefully, you will avail yourself of the opportunity to visit with us should you be in the Dallas area. Thank you for your time, assistance and consideration. With best wishes I am

Sincerely,



**Don Sneed
Executive Director**

cc: file

CAPS News

CENTER FOR AIDS PREVENTION STUDIES, UCSF

APRIL, 1997

VOLUME 3, NUMBER 2

CAPS on the Move Project Activity



Margaret Chesney's new intervention

study. The CHANGES Project has begun here at CAPS and will be located on the 5th floor, Suite 506 (the former PEP and PACT suite). The study will examine how gay men living with HIV are handling all of the new stresses caused by the changing epidemic.

The study is funded by NIMH and is poised to answer important questions about mood, burnout, morale, personal growth, meaning, adherence to new medications and utilization of health care. Ultimately, the study hopes to provide a guidepost to policy makers and funding agencies who will need to understand the changing needs of HIV+ gay men in order to assure that relevant programs and services are funded.

Over the next 3 years, CHANGES plans to recruit 300 gay men living with HIV. Study participants will be randomly assigned to one of three arms. In one arm participants will be called monthly and then bimonthly and asked what they see are the primary HIV-related concerns in their lives and in their community. At the end of twelve months they will participate in a three-day group workshop combining their perspectives and creating new solutions through their experiences. In the second arm participants will meet weekly for three months with other gay men and two group facilitators and then bi-monthly for the remainder of the year. Participants in the third arm will also meet weekly for three months and then will continue to meet every other week throughout the rest of the year. All of the groups will focus on finding solutions through interactions with each other and the facilitators. The telephone arm will

focus on what the individual's and the community's needs are during all of these changes.

It's very important that we recruit men that represent the wide diversity of men who are living with HIV in the SF Bay Area. If you know someone who might be interested in this study, please have them call us at (415) 597-9169 for more information.

HIV InSITE LAUNCHED

<http://hivinsite.ucsf.edu>

By Nicolé Mandel, Project Investigator

HIV InSite, the HIV/AIDS information site, launched on the Internet March 1997, was created by the University of California San Francisco (UCSF) AIDS Program at San Francisco General Hospital, and the UCSF Center for AIDS Prevention Studies. The site carries the strong imprint of a university-based site, but also has a broad usefulness and appeal for people with HIV, physicians, policy makers and planners. Highlights on HIV InSite include the AIDS Knowledge Base on-line, a textbook on AIDS written by UCSF faculty; Trials Search, the most complete and user-friendly national database of HIV/AIDS clinical trials; practical tools for people working in HIV prevention; a user-friendly (and fast!) front end to the CDC's HIV Surveillance data; "Key Topics" pages which offer a helpful way to organize information; and a state-by-state guide to AIDS information and resources. We'd love to hear feedback, including how you think the site could be improved, if we've missed a link, or if you like what you see.

IMPACT

INTERNATIONAL MEDICAL PROGRAM FOR AIDS CLINICAL TRAINING

The following is in part from an article on pages 1-2 of the March 15, 1997 issue of UCSF Newsbreak about IMPACT and a recent visit by Japanese physicians.

Mitchell Feldman, Assistant Professor of Medicine and research scientist at UCSF Center for AIDS Prevention Studies (CAPS), and Thomas Coates, CAPS Director and Professor of Medicine and Epidemiology, have been working with Japanese AIDS prevention experts over the past two years in part to help improve Japan's response to the AIDS epidemic. As a result of this work, the Japanese Ministry of Health asked CAPS to organize a training program in AIDS care for Japanese physicians. This program, International Medical Program for AIDS Clinical Training (IMPACT), directed by Feldman, permits Japanese physicians to observe AIDS care at several sites at UCSF and visit community AIDS prevention organizations. The program has run for four months and will continue for at least another year. Four to five physicians at a time come for two weeks. In addition to spending time at clinical sites, and community based prevention organizations, they are at CAPS for one day in a seminar with Dr. Feldman, then they have a "graduation" complete with champagne and diplomas!

"We have an exciting opportunity to influence many of the future leaders in AIDS prevention and treatment in Japan," says Feldman. "Through this program, we hope in a small way to help Japan avoid some of the tragic mistakes we have made in our response to the AIDS epidemic, and we also hope to share some of our successes in AIDS prevention with these physicians."

EMPOWERMENT PROJECT

Update from Susan Kegeles & Bob Hays

Over a year ago, we hired Vince Guilin from the San Francisco Department of Public Health (SFDPH) to direct recruitment of 1200 young gay men into our longitudinal cohort that we will use to evaluate the effectiveness of our interventions. Vince is the most experienced and knowledgeable person in the country regarding recruiting young gay men into HIV-related studies. Nevertheless, it turned out to be incredibly difficult to recruit 400 young gay men in each of three study communities (and Vince was in the field nearly half the time he was working for us). But we are nearly done collecting our cohort, after a great deal of hard work by Vince and Ben Zovod, our Project Assistant. Vince has left CAPS to return to SFDPH and we are now in the start-up phase of implementing our community-level intervention for young gay/bisexual men in Albuquerque, New Mexico.

Greg Rebchook has been working hard helping to develop new program components, focusing on community organizing and boyfriend issues. We have hired 4 Coordinators in Albuquerque, who are truly remarkable young gay men. The first, Chris Norton, was one of only two paid staffers on the campaign to get the democratic candidate in Albuquerque elected for congressman. The second, Steven Romero, is the former Executive Director of the People of Color AIDS Foundation for the State of New Mexico, and is on the Governor's Task Force on AIDS. The third, Abraham Placencio, has worked in AIDS for 5 years, working on HIV prevention with gay men and adolescents. And the fourth, Aaron Olson, came out as gay in middle school at the age of 14, and after years of being bashed and hassled, decided that he was going to do just what he wanted and win people over in the process; he was elected student body president in his senior year of high school. The guys vary by ethnicity (two are white, two Latino), age (they range from 20 - 31), and student status (two are students). We are honored to have such talent on our team and feel optimistic that the program will be a success.

We are in the process of renting a place for our young gay men's community center in an old adobe-style house. So, for the next year Bob, Greg, and I will be spending appreciable amounts of time in Albuquerque getting our new, enhanced program going.

Ever since our project's success started being noted, we have received numerous inquiries asking if we have training manuals for use in implementing our program. We had only been able to put into a manual the briefest, easiest part of the program and did not have the resources to develop materials that would fully explain the complexity of implementing and running the program. Now, working with Katherine Haynes Sanstad, we have obtained funding to develop a comprehensive replication package, and have organized a working group of local CBOs and health departments who are giving us advice about developing the package. The package will consist of two training manuals and two videotapes.

Simultaneous with conducting the NIMH-funded intervention, our funding from CDC is aiding us to fully explicate how we are conducting the intervention (including videoing parts of it) so that we can effectively conduct technology transfer at a later point. Greg and our newest staff person, Brady Ralston, are hard at work on this with us. So, this is a very exciting, stimulating, busy, and much of the time, fun for us.

TIE CORE

TECHNOLOGY & INFORMATION EXCHANGE

In the January 1997 CAPS newsletter, the TIE Core's new community faculty members were incorrectly introduced as the TIE Core's new collaborative research partners of community-based organizations (CBOs). The following is the corrected introduction of the new community faculty members and a new introduction of the new collaborative research partners.

COMMUNITY FACULTY SERIES

The TIE Core has recruited five adjunct community "faculty" members: Roslyn Allen, MA, Clinical Psychology,

Project Director for the San Francisco AIDS Foundation/HIV Prevention Project (San Francisco Needle Exchange Program); Steve Lew, Director of Technical Assistance for the Asian and Pacific Islander Wellness Center; Michelle Magee, MPA, Deputy Executive Director, Youth Advocates, Inc.; Dan Wohlfeiler, MJ, MPH, Education Director of the STOP AIDS Project and Barry Zack, MPH, Education Director of the Marin AIDS Project.

The community faculty will develop five two-hour forums which will comprise the TIE Core series, "Critical Issues: HIV Prevention Practice and Research." Participants will include a small number of invited researchers, CBOs, and representatives from local Departments of Public Health. Each forum will bring providers and scientists together to discuss issues of prevention research and practice as they impact and inform each other. Forums began in March, and will continue through September. For more information, contact Ellen Goldstein at 415/597-9396.

COLLABORATIVE COMMUNITY RESEARCH

The Collaborative Prevention Initiative, co-funded by Northern California Grantmakers, matches seven CAPS scientists, two statisticians, and seven CBOs in a two-year collaboration. CBOs are awarded funds to support evaluation and programmatic costs, and will be paired with a scientist and statistician to conduct evaluation research within their agency. The participating CAPS scientists are Diane Binson, Rafael Diaz, Maria Ekstrand, Olga Grinstead, Colleen Hoff, Ron Stall, and Bill Woods; the statisticians are Mike Acree and Bonnie Faigeles. Ellen Goldstein and Katherine Haynes Sanstad manage the program. The seven community partners are:

AIDS PROJECT OF THE EAST BAY

The goal of this evaluation is to determine the process and impact of multiple interventions in a predominately African American, substance using heterosexual population.

Project Activity

AIDS RESOURCES, INFORMATION AND SERVICES OF SANTA CLARA COUNTY (ARIS)

ARIS will conduct an intensive needs assessment and create a community level intervention emphasizing community involvement and mobilization for gay Asian/Pacific Islander (A/PI) Men in Santa Clara County.

LARKIN STREET YOUTH CENTER

This study will address the co-factors affecting homeless youth's HIV risk behaviors in multiple group sessions modeled after Project Light.

MARIN AIDS PROJECT

The Marin AIDS Project will implement a peer education program targeting women who are sexually active with incarcerated men at San Quentin State Prison.

TENDERLOIN AIDS RESOURCE CENTER (TARC)

The goal of this project is to evaluate the theory that providing options to transgendered commercial sex workers (CSWs) will support reduced risk behavior.

YOUTH ADVOCATES, INC.

The Latino/a Peer Education Project will address the HIV Prevention and education needs of the growing population of Spanish-speaking immigrant youth in the Marin Canal District.

YWCA OF THE MID-PENINSULA

This project will implement and evaluate a classroom-based HIV prevention education workshop with teenagers in Santa Clara County public schools using a curriculum which incorporates the concept of "cultural gender scripts."

...

YOUNG INVESTIGATOR AWARD

Dr. Margaret (Peggy) Dolcini will receive the Society for Behavioral Medicine's 1997 Young Investigator Award. The award will be presented at the Presidential Address and Awards Ceremony Friday, April 18th from 4:30-6:00pm at the Society for Behavioral Medicine Conference to be held in San Francisco.

For more information or quotations, please contact Joseph Catania, PhD, at 415/597-9161 or Peggy Dolcini, PhD, CAPS, at 415/597-9301.

NEW COMMUNITY CO-CHAIR

Ellen Goldstein is following in the steps of CAPS' Cynthia Gómez by becoming the new community co-chair for the San Francisco HIV Prevention Planning Council. If you are willing/ interested in joining the council as a full member or member of a working committee (a productive, less time-intensive way to participate), please contact Ellen at 415/597-9396.

Publications

Avins, A.L.; Lindan, C.P.; Woods, W.J.; Hudes, E.S.; Boscarino, J.A.; Kay, J.; Clark, W.; Hulley, S.B. "Changes in HIV-related Behaviours among Heterosexual Alcoholics Following Addiction Treatment. *Drug and Alcohol Dependence*. 44: 47-55, 1997.

Feldman, M.D.; Feldman, E. A.; Coates, T.J. "Partners in AIDS Prevention: A U.S./Japan Collaboration," *Journal of Acquired Immune Deficiency Syndromes and Human Retrovirology* 14(Suppl.2):S1-S2, 1997.

Lurie, P., Drucker, E. "An Opportunity Lost: HIV Infections Associated with the Lack of a National Needle Exchange Programme in the USA." *Lancet*, 349:604-608, 1997.

Mills, T.; Stall, R.; Catania, J.; Coates, T. "Interpreting HIV Prevalence and Incidence Among Americans: Bridging Data and Public Policy." *American Journal of Public Health*, (due in the 1997 May issue; this is a commentary on the Holmberg CDC incidence estimates for HIV infection in a new AJPH column entitled "On the Other Hand...").

Peterson, J.L.; Folkman, S.; Bakeman, R. "Stress, Coping, HIV Status, Psychosocial Resources, and Depressive Mood in African American Gay, Bisexual, and Heterosexual Men." *American Journal of Community Psychology* 24(4):461-487, 1996.

Phillips, K.A.; Kerlikowski, K.; Baker, L.; Chang, S.; Brown, M. "Individual and Environmental Factors Associated With Women's Adherence To Mammography Screening Guidelines." *Health Services Research*, in press.

Richards, A. and Folkman, S. "Spiritual Aspects of Loss at the Time of a Partners Death from AIDS." *Death Studies*, in press.

"What Informal Caregivers Actually Do: The Caregiving Skills of Partners of Men with AIDS" by Judith Wrubel and Susan Folkman has been accepted for publication by AIDS Care. The paper is based on qualitative work which drew on the pre-bereavement interviews in the Coping Project.

...

Presentations

CDC PREVENTION SUMMIT

Chris Collins, Ellen Goldstein, and Jeff Stryker presented at "Partners in Prevention," the 1997 CDC Prevention Summit for HIV Prevention Community Planning Co-Chairs in Atlanta, Georgia, March 13-15, 1997. Jeff gave the luncheon plenary on "Prevention Issues Facing Gay Men," and the workshop "CTPRN in Light of Promising New Treatments." Chris and Ellen presented "Overview of HIV Prevention Strategies: Levels of Intervention." Additionally, Ellen also presented "Developing and Tailoring Interventions for Local Use," and Chris presented an affinity session on "Marketing HIV Prevention to Young People."

ABIDJAN, CÔTE D'IVOIRE, INTERNATIONAL SEMINAR FOR JOURNALISTS

By Pam DeCarlo

Peter Lurie and I recently returned from Côte D'Ivoire, Africa where we attended a Seminar for West African journalists on the subject of AIDS/HIV, STDs and Tuberculosis. The seminar, sponsored by SidAlerte International, brought together journalists from western Africa (Côte D'Ivoire, Cameroun, Ghana, Benin, Burkina Faso, Guinée, Mali, Senegal) and South Africa, as well as journalists from the US and France. A handful of researchers, clinicians, politicians and service organizations from Africa, France and the US were also invited. Peter spoke about the World Bank and how structural adjustment programs in Africa contributed to the spread of HIV. I gave a hands-on Internet training and spoke about my experiences publishing research materials on the CAPS home page.

Journalists in West Africa have limited access to information about AIDS in their country, and are often frustrated trying to find out if the information they have is accurate. African government officials and researchers are reluctant to talk to the press. There have been several episodes where inaccurate information about AIDS (cures, how it's transmitted) was published in newspapers, television or radio.

A French journalist who was one of the presenters at the seminar was invited to tour the hospital in Abidjan where the

majority of AIDS cases are treated.

When she began to talk about what she saw, the other journalists in the room broke out into amazed cries. It turns out the Abidjan government and health department have continually denied access to African journalists to this same hospital, yet invited a French journalist to have a tour. One health official was at the seminar, and explained that this was to protect patients' confidentiality.

One of the last presentations was a panel of PWAs. In Côte D'Ivoire, very few people admit to having AIDS, as there is still a huge stigma associated with the disease. The PWAs told horror stories of how the press had treated them badly in the past. For example, one man at the table had agreed to give an anonymous interview to a journalist in Abidjan. The next day the newspaper appeared with a huge photograph of the man (taken with a hidden camera) on the front page, with his name and the headline "People with AIDS are promiscuous." He was married with seven children, and his wife left him and he lost his job. The PWAs were asking journalists to present a message of hope by publishing positive photos and interviews with HIV+ people who looked healthy (as opposed to pictures of dying cadaver-like people), and to treat PWAs with respect. It was a tough message for some of the journalists.

In terms of the training, I now believe that our efforts at disseminating much needed information should not be focused on the Internet in Africa (maybe air mail would be better?). The facilities for training at the USAID offices were incredible (12 computers with modems and pretty fast Internet access), but of the 40 journalists who came, only 2 used computers and only 1 had ever surfed the Internet (a journalist from South Africa). Many of the journalists don't even use typewriters—they write their stories out by hand and give them to a typist. I gave everyone a 16-page guide to the Internet (in French) with addresses of reputable AIDS-related sites that publish in French. One journalist from *Fraternité Matin*, a local paper, told me he'd probably never use the Internet. But he did give the guide to his 14-year-old daughter.

upcoming

CAPS RESEARCH — TV NEWS

"NBC Nightly News with Tom Brokaw" is planning to run a story next week on AIDS among older Americans. The story will focus on the fact that 59,000 AIDS cases have been diagnosed among Americans past the age of 50, amounting to about 10% of all American AIDS diagnoses. To put this number in perspective, more Americans past the age of 50 have now been diagnosed with AIDS than the total number of American deaths during the Vietnam war. Ron Stall was interviewed extensively for the story and he used this opportunity to describe an analysis that he and Joe Catania published on AIDS risk-taking behaviors among Americans aged 50+ using data from the National AIDS Behavioral Surveys.

CONFERENCE IN MAY

Society for Prevention Research meeting in Baltimore at the Hyatt Regency in the Inner Harbor, May 5-9, 1997. Since inception, SPR has primarily encompassed researchers whose work was concerned mainly with etiology, epidemiology, and prevention of drug abuse. At this upcoming meeting topics have broadened and provides a unique opportunity to include scientists from disciplines whose research focuses on other mental, behavioral, and medical disorders. Registration deadline is April 11. Please see Susan Lausten for a registration form.

THANK YOU FROM CHANGES

Thanks to a generous donation from the GAP Foundation, all of the men participating in Margaret Chesney's new timely study, CHANGES (see page 1), will be receiving free GAP T-shirts.

Farewell & Welcome

NEW FACES AT CAPS

Dredge Byung'chu Kang: I was recently appointed Project Manager for the new Young Asian Men's Study. Born in Seoul, South Korea and raised in Prince George's County, Maryland (the county neighboring Washington DC to the east), I recently moved to San Francisco from Los Angeles.

During my last incarnation in Los Angeles, I worked as the Director of Prevention Services at the Asian Pacific AIDS Intervention Team. There I expanded programs to gay men, youth, and women. I also developed a new program targeting Asian transgender sex workers. My duties included personnel / program development, supervision, and evaluation; organizational planning and development; contract negotiation and compliance; community organizing and advocacy; and technical assistance.

I acted as a Co-Chair of the Prevention Planning Committee, the CDC mandated HIV prevention community planning group for Los Angeles County. In 1994, I received the Breaking Barriers Building Bridges award from the US DHHS, Public Health Service at the National Congress on HIV/AIDS in Ethnic Minority Communities.

I come to CAPS with a commitment to research that incorporates community involvement and technology transfer. I am a strong advocate for the needs of young gay men of color and the need for community development in addressing public health issues. I volunteer for the Wellness Center and, when I have time, write poetry.

Mary Truskier is the project coordinator and nurse practitioner for "School Entry Stress Among HIV-Affected Children," a study based here at CAPS. Tom Boyce is PI; and Margaret Chesney is a co-investigator. It is a five-year study with data collection beginning September 1997. Mary is on the 5th floor in 5025 and generally present Wednesday though Friday at CAPS. She comes from an academic appointment in the School of Nursing and 15 years as a pediatric clinician.

Alinne Barrera is project assistant for the "School Entry Stress Among HIV-Affected Children." Alinne is a 1996 graduate in psychology from UC Berkeley and has served as a research assistant on several behavioral projects on the CAL campus as well as at SFGH. Alinne can be found in cubicle 5D.

Cristina Booker F.—I am the new assistant for the Positive Prevention Project and for Cynthia Gómez's many projects. I'm greatly enjoying the people and projects here at CAPS! After a lovely trip to Paris, I began working here on March 19th I've been in San Francisco for 5 years and have many years of experience working with battered women and some experience in TB training. Before SF, I grew up in Michigan and studied anthropology & women's studies at the Univ. MI. My interests lie in public health, yoga, cycling and pinball.

Anthony Hunter is the new personnel assistant for CAPS. He is replacing Kevin Filocamo on the 6th floor, cubicle 6T. Anthony previously worked for UCSF in the Department of Obstetrics, Gynecology and Reproductive Sciences, and at the UCSF Mt. Zion Cancer Center. After pursuing his graduate degree in Rhetoric & Communication at UC-Davis, he will be working on systems development and processing for personnel administration here at CAPS. If you have personnel questions, you can contact Anthony by e-mail, or by phone 597-9327. Or feel free to drop by and say hi; Anthony has been known to keep a private reserve of chocolate to reward employees who return paperwork to him in an accurate and timely fashion.

Elizabeth Longstreth — Hello. I am the new assistant for the new AIDS Research Institute working with Tom Coates and Leslie Roos, and have been settling in for just about a month now on the 6th floor, #6V. In the several years before coming here I worked for an online company doing marketing and Web development, edited film and video for documentaries, worked as an investigator on death penalty cases...and studied anthropology and public policy at a

school near Los Angeles. My goal is to one day make my way back to graduate school in public policy and public health, so I am thrilled for the opportunity to work around so many talented people and absorb as much as I can. I look forward to meeting everyone soon.

FAREWELL

Kevin Filocamo I am writing to say "so long". After having worked at CAPS for 2.5 years, I'll be moving on after March 31 to pursue work that better fits my desires.

What that is, is still being worked out. It somehow relates to the volunteer work I do with San Francisco Sex Information, as a sexuality trainer for volunteers. In a broader vision, it involves helping people (especially in the gay community) find greater fulfillment in their lives. The journey I am on, to find and follow my own "bliss", is preparing me to assist others on their own journey. I'm also toying with the idea of working with children in some capacity. So off I go.

I am grateful for the time I've worked here at CAPS, especially when I worked on the CAMP project. I am most appreciative that the scientists on that study allowed me to share my own experiences, and perspectives, of what might be happening in the gay community, and to share my thoughts on the study itself. I felt that my input was welcomed and considered, and for that I'm thankful. May that spirit continue with everyone here at CAPS.

I leave with mixed feelings: gratitude for what I've learned while I've been here and for the friends I've made here; frustration that I didn't find exactly what I wanted for my work life here; fear and excitement as I venture into the realm of what it is I do want; sadness at leaving behind a place and people that have been so much a part of my life these past two+ years.

I wish you all well. (Tony Hunter is Kevin's replacement. See "New Faces at CAPS").

Available for Internship

Michelle P. Dequina - I am a student at the Yale School of Epidemiology and Public Health with a concentration in Epidemiology of Infectious Diseases. My commitment to epidemiology stems from prior work with the National Institute on Drug Abuse, as well as undergraduate studies in Biology at The Johns Hopkins University. These experiences essentially taught me many skills including diligence, perseverance, and the importance of teamwork. I am wondering if there are any such opportunities to intern at the Center for AIDS Prevention Studies this year? Address: 367 Cedar Street, Harkness Dorm Box B3, New Haven, CT 06510, tel: 203/436-2230.

Sameera Fazili - I am an undergraduate student at Harvard University interested in medicine, health policy, and public health issues. I am looking for a chance to explore these interests through research and would greatly appreciate any opportunities which you might be able to afford to offer either for a semester, for the summer, or for both. Address: 1433 Harvard Yard, Mail Center, (fazili@fas.harvard.edu), tel: 617/493-3713

Deborah Ford - I am finishing the Master's of Public Health at the University of Southern Mississippi and would like the opportunity to work in any of a number of public health interest areas and to train with leading experts in the field of health education/promotion and public health. My coursework has equipped me with a working knowledge of epidemiology and behavioral science research methods; I am also able to analyze data to evaluate the effectiveness of workplace programs and activities. Address: 2506 Villa Verde, Hattiesburg, MI 39402; email: dford@ocean.st.usm.edu, ph: 601/266-4264.

Catherine Lee—I am currently a first-year undergraduate student at UC Davis with a particular interest in medicine and pathological sciences. I was wondering if there were any volunteer opportunities within the AIDS projects/outreach programs that are available for the upcoming summer. I am especially interested in working with teen HIV

prevention. Please respond if you have any information or contacts available via email: catlee@ucdavis.edu. Thank You.

Ben Peacock is a masters student in the Health Behavior Health Education program at the University of North Carolina at Chapel Hill. He has worked in HIV prevention among men who have sex with men and men in public sex environments in North Carolina and is focusing his graduate work and career towards social and community mobilization interventions that incorporate psychosocial approaches for men who have sex with men, sex workers and/or international communities. His program has students work on an Independent Project—he is interested in doing his with members at CAPS. The project requires working on an intervention in some capacity from needs assessment through evaluation, and could include behavioral assessment and analysis done around sexual behavior. He would be available to work from early May through mid-August. Contact: 2 Maple Drive, Chapel Hill, NC 27514, Tel: 919/967-3516.

Tim Tran - I am currently a sophomore attending UC Riverside. I have recently decided on a career in the AIDS/HIV related field, and would appreciate any exposure to this field. I have pursued many volunteer positions up to now, but my only current position is a teachers aide in pre-school at the California School for the Deaf in Riverside. I am very familiar with the laboratory environment, having completed general chemistry, organic chemistry, and biology with labs. If there are any projects between June 15 and September 15 in which a volunteer is needed. Address: 5200 Chicago Ave., #S6, Riverside, CA 92507, tel: 909/788-8935.

Gabrielle Page-Wilson - I am a sophomore at Harvard University, concentrating in Biology and Psychology and am planning to pursue a career in medicine or public health. In the summer of 1995 I spent two months in India I was able to spend four days at the Anan Hospital in Delhi, where I witnessed several surgeries and was informed about health issues

associated with malnutrition and birth defects, as well about the AIDS crisis confronting the country. My experience in India had a profound affect on my conception of medicine, as well as domestic and international health, and had a significant influence on the type of student organizations that I have become involved in at college (AIDS Outreach Organization (AEO); VISIONS Worldwide.) It is my wish that during the months of July and August to intern with an individual or organization that is active in the medical or public health field in the Bay Area. While I would love to do AIDS related work, I am open to all types of opportunities and am eager to learn about medical and health practices in other areas of concern. I am also open to more scientific research based opportunities. Contact: 17 Hillcrest Court, Oakland, CA 94619, tel: 501/531-9711.

Jeremy Sussman—I am a junior Biology Major, Sociology Minor at Amherst College. I found your site on the web and your project looks very interesting to me. Do you know if there are any summer research opportunities available for undergraduates in your project or related fields? Any advice would be appreciated. Address: Box 865 Amherst College, Amherst, MA 01002-5000 email: jbsussman@amherst.edu

PHD AVAILABLE FOR SUMMER

Elissa Schuler Adair, PhD, will be in San Francisco this summer (June 9th for 10 to 16 weeks) and would like to find work on a temporary project. Most recently, Dr. Adair serves as a project manager for a physician-led team designing a disease management program for patients with diabetes. In a letter to Norm Hearst at CAPS, Dr. Adair stated that she was hopeful that her experience in research related to HIV, sexual behavior and substance abuse, as well as expertise in research methodology and survey design would be applicable to work being conducted at CAPS. Please see Susan Lausten for Dr. Adair's CV.

PART-TIME POSITION NEEDED

Beth Freedman—I'm the TIE Core Project Assistant and much to my surprise I am going to be starting graduate school this coming fall in Berkeley's MPH program. I would love to keep working/stay connected with CAPS during this time. However, I can't keep my current position as the hours are not very flexible and I won't be able to work full time. I am interested in 15-20 hrs/week of flexible time here at CAPS. I have a background in HIV/AIDS, youth, and domestic violence. You can get in touch with me at cube 6AA or at my extension, 597-4662.

From: Katherine, Ellen and Pam: The TIE Core is crestfallen to lose Beth. She's great. She has initiative, follow through and cares about the work.

POSITIONS AVAILABLE

Research Assistant III, for Social Science/Biomedical Ethics Projects, **Stanford Center for Biomedical Ethics**. Full Time Preferred, beginning ASAP. Successful candidate will participate in two studies: Dying in an African American Community: An Ethnographic Study of Death Across the Life Cycle; and Cultural Diversity and Ethical Decisions in AIDS Care for Women. Responsibilities. Qualifications Required: At least one year of experience in biomedical, anthropological, and/or social science research. Please contact Laura McConnell, Stanford University Center for Biomedical Ethics, 701 Welch Road, Building A, Suite 1105, Palo Alto, CA 94304, tel: 415/498-6934, fax: 415/725-6131, email: (hf.lml@forsythe.stanford.edu).

The AIDS Health Project is looking for someone at 10 to 25% time to do transcription work (audio tapes contain sexually graphic material). Please contact James Sabatino 415/502-7274.

CONGRESSIONAL HISPANIC CAUCUS INSTITUTE FELLOWSHIP PROGRAM

The institute, located in Washington, D.C., is offering for 1997-98 fellowship programs for recent college graduates and currently enrolled graduate students pursuing careers in public policy the opportunity to gain hands-on work experience in Washington, D.C. Participants may work on such areas as international affairs, law, women's issues, children's issues, education, media, etc. Also included are telecommunications policy (Telecommunications Fellowship) and public health policy and administration (the Edward Roybal Public Health Fellowship). CHCI's Leadership Development Programs seek to help participants search for and understand their identity as professionals, as Latinos/Hispanics, and as leaders. Program requirements establish that participants must: work a minimum of 36 hours a week in their placement, participate in all CHCI-sponsored activities, participate in weekly leadership development sessions, collaborate as a group in a service project, submit quarterly progress report throughout the fellowship, meet periodically with program staff to assess professional growth. The program provides: domestic transportation to and from Washington, D.C., a gross average monthly stipend of \$1,550 and major medical coverage. If you need further information please contact Dr. Silvia Golombek, Program Director @ 800/392-3532 or 202/543-1771.

NEW WEB SITE

The Child Health Research Project (a collaboration between WHO/Child Health and Development, Harvard/ARCH, ICDDR,B: Centre for Health and Population Research and Johns Hopkins School of Public Health) now has a World Wide Web site: (<http://ih1.sph.jhu.edu/chr>). Check for the latest project news, research, and links to major medical journals.

NIDR SMALL GRANT PROGRAM

Program Description: Small grants provide limited research support for activities such as pilot projects, testing of new techniques, and feasibility studies of innovative and high risk research, which would provide the basis for more extended research. The primary goal of the NIDR Small Grant Program is to provide career development opportunities for new and minority investigators. This support may be research project grants (R01), First Awards (R29), or grants from other government agencies, non-governmental foundations, or other organizations in the private sector. Average Award: \$50,000. Eligibility: These one-time awards are open to both non-profit and for-profit organizations and are designed to support: investigators changing areas of research; investigators whose research careers were interrupted and are intended to be resumed. Submission Date(s): April 3, August 3, December 3. For more information see NIH Internet address: <http://web.fie.com/htdoc/fed/nih/dri/any/prog/min/nihpgaam.htm>

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VOLUNTEERS!!!!

We are always seeking volunteers for various outreach programs and events. If interested please call our office at:

(214) 421-4343

We can do something to save our community from the AIDS epidemic. We have already lost too many of our best and brightest--it's time to commit to new action!!!

KNOW AND TELL

...That HIV is sexually transmitted. It is also transmitted by sharing needles.

...We cannot get HIV by giving blood, shaking hands, hugging or just being near someone who has the virus.

...HIV is not in the air. It is in blood, semen and vaginal fluids.

LEARN ABOUT AIDS....

TAKE PRIDE IN YOURSELF...

TAKE PRIDE IN YOUR
COMMUNITY...

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come and see the exciting
work we are doing for our
community!***

***Our Office is Located at:
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Dallas, TX 75215***

***Hours are from:
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Mon-Fri
and
by appointment***

***An organization serving our community with
compassion, sincerity, and strength.***



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PROJECT

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with compassion, sincerity, and strength.***

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Suite 203, Dallas, TX 75215**

**P.O. BOX 398133
DALLAS, TX 75339-8133**

(214) 421-4343

**RENAISSANCE III, INC.
M.T./96**

HISTORY

Renaissance III, Inc., was founded in April of 1993 for the express purpose of responding to the epidemic that is devastating communities of color in Dallas county.

OUR MISSION

We believe:

- that people alienated from their communities because of stigmatized behavior must be reconnected in order for behavioral change to take place.

We believe:

- in the establishment of risk reduction programs and services which motivate behavioral change for persons engaging in high risk behavior.

OUR VISION

To create a comprehensive AIDS Service and Prevention organization that is effective and responsive to communities of color in Dallas County.

PROGRAMS/SERVICES

- HIV EDUCATION
- OUTREACH AND PREVENTION
- HIV SUPPORT GROUP
- SOCIAL SECURITY DISABILITY ASSISTANCE
- HIV MENTORING PROGRAM
- CLOTHING

REFERRALS

- HOUSING
- FOOD
- CASE MANAGEMENT
- TRANSPORTATION
- SUBSTANCE ABUSE TREATMENT
- FREE HIV TESTING
- FREE MEDICAL TREATMENT

*I would like to help support
Renaissance III, Inc.,
and its programs.*

*Enclosed please find my donation of:
()\$15 ()\$20 ()\$25 ()OTHER*

NAME _____

ADDRESS _____

CITY/STATE/ZIP CODE _____

PLEASE MAIL ALL CHECKS TO:
Renaissance III, Inc.
P O BOX 398133
Dallas, TX. 75339

*Renaissance III, Inc., a 501(c)(3)
nonprofit organization, depends on
donations from concerned
individuals and businesses, to
continue operations and services.*

****ALL DONATIONS ARE TAX
DEDUCTABLE TO THE EXTENT
PERMITTED BY LAW.****

THE WHITE HOUSE
WASHINGTON

← May 22, 1997

James S. Beck
Manager of HIV Services
Drug Detoxification, Rehabilitation and Aftercare Program
Haight-Ashbury Free Clinics, Inc.
529 Clayton Street
San Francisco, CA 94117

Dear Mr. Beck:

Thank you for your kind welcome to my new position! You can certainly understand what a challenge and opportunity it will be.

I appreciated your offering your concern about the need for additional drug treatment funding. We clearly see that the AIDS epidemic and the drug epidemic are closely linked. I want to assure you that we understand the link, and that we will devote a lot of energy to supporting addiction treatment as a necessary component of AIDS prevention and treatment.

Again, I appreciate your taking the time to write and hope that you will continue to share your perspective from the front lines of this epidemic.

Very truly yours,

Sandra Thurman
Director
~~White House~~ Office of National AIDS Policy

Office of
National AIDS Policy

Correspondence Routing Slip

Tracking Number: G3654

Date Rcvd: 04-18-97

From: James S. Beck

Haight Ashbury Free Clinics, Inc.

A large, stylized handwritten signature, possibly reading "Sandy", is written vertically on the right side of the routing slip.

Staff Action:

Reviewed By Sandy: _____ Reviewed By: _____

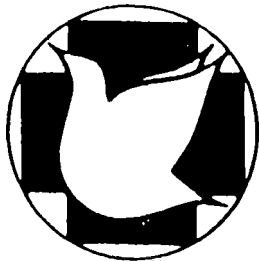
Assigned To: _____

RCVD: _____ DONE: _____

Recommendations/Instructions:

To Support Staff: _____

Date of Response: _____



April 8, 1997

HAIGHT ASHBURY FREE CLINICS, INC.

DRUG DETOXIFICATION, REHABILITATION AND AFTERCARE PROGRAM

529 Clayton Street
San Francisco, California 94117
(415) 565-1908
Fax (415) 255-6706

Sandy Thurman
National AIDS Policy Director
The White House
Washington, DC 20503

Dear Ms. Thurman:

Congratulations on your appointment to lead us in battling the AIDS pandemic. I applaud your advocacy while at AID Atlanta and I trust that you are keen to nationwide problems with the disease. I would like to take this opportunity to point out the most common and critical epidemiological aspects of HIV/AIDS to which I feel our energies should be concentrated in the upcoming years.

In San Francisco as well as in other states, unmet health care needs among HIV positive individuals are most common among poor persons, those with dependents, and intravenous drug users. It is clear that the pandemic will increasingly impact substance abusers and communities of color in the future since these populations have such low relative socio-economic status and such high rates of injection drug use. I am sure that you are aware that recovery from chemical dependency is a medically crucial early intervention and prophylaxis to immune system deterioration. **Tragically, throughout this country, many more people are seeking chemical dependency treatment and help in achieving sobriety than there are services available.** Therefore, I urge President Clinton to recognize the moral imperative to increase access to substance abuse treatment services and other prevention and health care programs within communities which will face the HIV/AIDS onslaught now and in the future. Also, from a more pragmatic perspective, it has been shown that investment in treatment services, in the long run, saves taxpayer money which would otherwise be used fighting crime and within the growing criminal justice system. The connection between substance abuse and crime should be obvious to anyone and the need for community-based HIV prevention and treatment and substance abuse recovery services is dire.

President Clinton's campaign slogan that "health care is a right, not a privilege" was the founding philosophy of the Haight-Ashbury Free Clinics in 1967 and it continues to be our imperative today. We are frustrated and prevented from fully realizing this mission because of short-sighted and mean-spirited funding cutbacks to community-based, health care organizations such as ours. We all need to see clearly the future of the HIV pandemic and respond according to our conscience and our experience.

Please urge the President and Congress to address these dire issues during the next four years. Good luck.

Peace and Health,

James S. Beck
Manager of HIV Services
Drug Detoxification, Rehabilitation and Aftercare Program
Haight-Ashbury Free Clinics, Inc.

Office of
National AIDS Policy

Correspondence Routing Slip

Tracking Number: G3704

Date Rcvd: 05-01-97

From: Sue J. Smith

E-mail & Letters Address to The President

Staff Action:

Reviewed By Sandy: _____ Reviewed By: _____

Assigned To: _____

RCVD: _____ DONE: _____

Reply needed.

ef.

Recommendations/Instructions:

To Support Staff: _____

Date of Response: _____

THE WHITE HOUSE

WASHINGTON

DATE

MEMORANDUM

FOR:

ONAPC

FROM:

SUE J. SMITH *JS*
DIRECTOR, AGENCY LIAISON

SUBJECT:

REFERRAL OF CASEWORK

I am forwarding the attached letter to your office for appropriate action. Please send us a copy of your written response or your telephone report along with the writer's original correspondence and envelope to the following address:

Ms. Sue J. Smith
Director, Agency Liaison
Room 6, OEOB
The White House
Washington, D.C. 20500

If you have any questions, call my office at 202/456-7486.

Thank you for your help.

7/1/97
H
6 NARC mR

From mary.elizabeth@aegis.com Sun Feb 9 11:37:24 1997
Date: Sun, 09 Feb 1997 08:36:25 -0800
From: "Sr. Mary Elizabeth, SSE" <mary.elizabeth@aegis.com>
Subject:
X-Sender: sme@aegis.com
To: president@WhiteHouse.GOV
Cc: vice.president@WhiteHouse.GOV
Message-id: <3.0.32.19970209083624.006f2154@aegis.com>

Dear Mr. President:

Here is yet another editorial, from AIDS WEEKLY Plus, supporting my allegations of deliberate information dissemination interference by the organizers of the recent Retroviruses conference in Washington.

The most effective means to alleviate future problems like this is simple -- prohibit government funding and/or participation UNLESS full-unrestricted access to information is guaranteed.

I urge you action on this. Information that can save lives, ease suffering, or promote wellness, is in the national interest, and it should not be impeded for the sake of corporate profits.

Thank you.

Sr. Mary Elizabeth, SSE
AIDS Education Global Information System
32302 Alipaz St. Sp. 267
San Juan Capistrano, CA 92675
TEL: 714-248-5843
FAX: 714-248-2839

Document 0001
DOCN AW970201
TI (AW) Editorial: Strange Bedfellows Damage CDC and NIH
Credibility
DT 970203
AU Charles W. Henderson, Publisher, and Daniel J. DeNoon,
Senior Editor
SO AIDS WEEKLY Plus, Monday, 3 February 1997 issue; Published
by Charles Henderson, Publisher. Editorial & Publishing
Office: P.O. Box 5528, Atlanta, GA 30307-0528 / Telephone:
(800) 633-4931; Subscription Office: P.O. Box 830409,
Birmingham, AL 35283-0409 / FAX: (205) 995-1588
TX The Centers for Disease Control and Prevention (CDC) and the
U.S. National Institutes of Health (NIH) should be careful with
whom they get into bed.

The CDC/NIH collaborative relationship for a conference with

the Infectious Diseases Society of America (IDSA) has damaged the reputation of these two federal agencies and has embroiled them in a major national catastrophe.

Mismanagement of the Fourth Conference on Retroviruses and Opportunistic Infections, directed by IDSA Executive Director Melissa A. Sordyl, led to a disaster for researchers and press alike. Artificial limitations on the size of the conference excluded thousands of interested researchers. Artificial restrictions on who could attend the conference excluded non-researchers with a professional interest in the proceedings.

Extreme limitations on press coverage - extraordinary for a conference ostensibly sponsored by federal agencies - greatly limited access to information presented at the most important AIDS meeting of the year.

According to Stephan E. Lawton, partner in the Washington D.C. law firm of Hogan & Hartson, his client, the IDSA, served as Conference Secretariat.

IDSA President P. Frederick Sparling, however, said the Retrovirus meeting was not under the control of the IDSA office. This assessment by the IDSA president is quite different from the statement of the society's law firm.

Both the CDC and the NIH said the conference was not under their control, either.

Lawton, however, said four federal employees were on the Conference's Scientific Program Committee. Lawton said the Committee reserved the right to deny any press registration.

Did the press have a First Amendment right to cover the conference? Lawton said his firm believes that, under the circumstances, First Amendment protections are not implicated.

According to a CDC spokesperson, a CDC press officer was denied entry into the press room at the Retrovirus Conference, and the CDC director plans to issue a letter of protest concerning some of the conference procedures.

The NIH did not fare much better. That agency tried unsuccessfully to intervene on behalf of press who were denied entry.

Sordyl acknowledged that NIH and CDC served as scientific collaborators to the conference.

Whatever level of participation this means, it is obvious that

both NIH and CDC were involved in the conference. By virtue of their collaboration, registration fees were paid to finance the conference.

This extent of government involvement in the conference is sufficient to implicate First Amendment consideration. Safeguards of the First Amendment should have applied to requests for press access to the Retrovirus conference.

Although the registration and promotional material identified IDSA, CDC, and NIH as collaborating on the conference - and numerous press accounts identified them as sponsors - when it all went bad, all except Sordyl denied any responsibility.

According to Lawton, the conference necessarily restricted overall registration and, in addition to establishing press criteria, limited registration slots for the press.

An appeal to the office of Health and Human Services Secretary Donna Shalala was answered by Deputy Assistant Secretary Victor Zonana, who said, "I am not getting involved."

Zonana should have got involved, and intervened on behalf of press who were denied access. After all, two federal agencies under the HHS umbrella were being touted as conference collaborators.

Who were the losers after this was over? Secretary Shalala, certainly, whose office did nothing, even though two of her agencies were ostensibly responsible.

One big loser is the IDSA, whose reputation was severely tarnished. Oddly, this is the year that IDSA is severing its ties to the American Society for Microbiology. Previous IDSA annual meetings have been held concurrently with the ASM's Interscience Conference on Antimicrobial Agents and Chemotherapy (ICAAC); this year IDSA is meeting in a different city. The split, according to sources privy to IDSA/ASM negotiations, was over IDSA's demand for the lion's share of fees from conference exhibitors. The Retrovirus conference debacle makes it unlikely that the IDSA will ever achieve the respect it seeks so quixotically. IDSA president Sparling deserves credit for expressing sympathy with the press, but his efforts to help were unsuccessful.

Other losers: the reputations of noted researchers Douglas Richman and Constance Benson, who served, respectively, as conference chair and co-chair. Their heroic efforts in AIDS research stand in marked contrast to their misbegotten conference policy of exclusion.

CDC and NIH were losers as well, although both made valiant attempts to correct the conference's embarrassing mismanagement. CDC director Satcher's office was actively involved in trying to ensure better media access. These efforts, too, were unsuccessful.

The biggest loser, however, was the general public. It was unable to receive in-depth, accurate reporting from this conference because of the exclusion of seasoned reporters who have covered AIDS research since the beginning of the epidemic.

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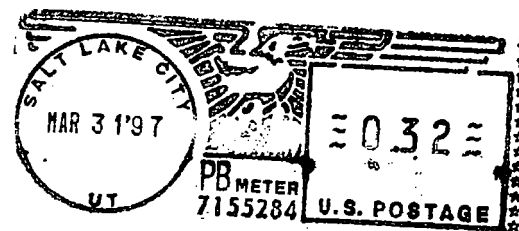
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FIRST
CLASS



5/7/97

Dear Sandy,

Congratulations on your new position! You will make a great
AID's Gyr.

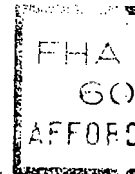
I'm landed in the Commissioner's
office at SSA. Take care and
let's keep in touch. It was a
pleasure working with you in
Chicago last summer.

Sincerely,

Lisa Peoples

(P.S.) The picture in the Fort, surrounded
by the Pres. + Vice Pres. was excellent!

WK(202) 358-6093



Ms. Sandy Thurman
Director, Office of National
Aids Policy
808 17th Street, NW
8th Floor
Washington, DC 20006

3007 Hawthorne Ave, NE
Washington, DC 20017

Office of
National AIDS Policy

Correspondence Routing Slip

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From: Bob TUVerson

Foundry United Methodist Church

Staff Action:

Reviewed By Sandy: _____ Reviewed By: _____

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To Support Staff: _____

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Foundry United Methodist Church

May 2, 1997

Ms. Sandy Thurman
Office of National AIDS Policy
808 17th Street, N.W.
Washington, D.C. 20006

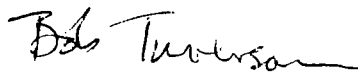
Dear Ms. Thurman,

Congratulations on your recent appointment as National AIDS Policy Director and AIDS advisor to President Clinton. No disease has had a more devastating impact in our nation's Capital than AIDS.

More than ten years ago, Foundry United Methodist Church recognized that "AIDS is not an epidemic of a few, but an epidemic of us all" and established an AIDS mission. Our primary aim is to provide physical and emotional support to individuals and families touched by this disease. We also raise money for organizations within our community that provide a loving, nurturing environment in which individuals infected with this disease can live.

We support fully the President's proclamation on volunteerism in which he said "Every person can make a difference" and offer you our support and encouragement as we both strive to achieve the same goal: making a difference so that HIV and AIDS will someday become diseases of the past, and showing that no disease can make any individual less worthy of life and all of its promises.

Sincerely;



Bob Tuverson
Chair, Foundry UMC AIDS Mission



1500 16th Street, N.W., Washington, D.C. 20036 (202) 332-4010

Sandy,

Congratulations on your recent appointment
to new duties. The President could not have
picked a better choice!

Good luck, stay in touch & let us know
where we can help (or if you pick up any
good details).

Sincerely,
Steve

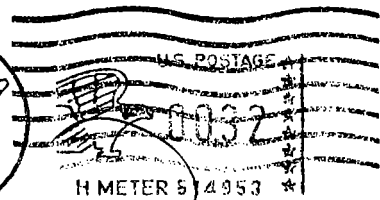
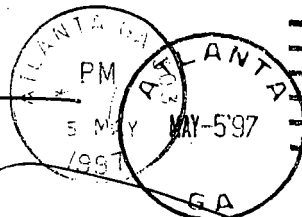


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Ms. Sandy Thurman
Office of National AIDS Policy
808 17th Street, N.W.
8th floor
Washington, DC 20006

Democratic Party of Georgia
1100 Spring Street, Suite 710
Atlanta, Georgia 30309

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National Medical Center

Children's Hospital
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The artwork on this card was created especially for you
by Marie, age 13, through New Horizons,
the arts and cultural enrichment program
for patients at Children's Hospital.



Stunning outfit & looking
beautiful and I thought
"Yeah" she deserves
this so much"-its
about time.

Hope to see you
soon - let me know if I
can ever help - (buy you
a drink!) Love,

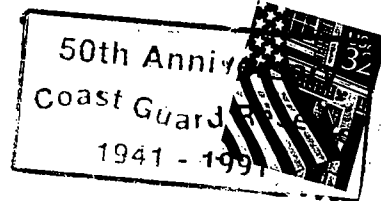
Janet V.

Sandy -

Congratulations! I
am so proud of you &
finally believe that great
thing can happen to great
people!

It was a real
moment for me to see you
flanked by the Pres + VP
in the Oval Office wearing a

Janet V. Green
2426 Tunlaw Road, NW
Washington, DC 20007



Sandy Thurman
AIDS OFFICE
The White Horse
1600 Pennsylvania Ave.
WASHINGTON, DC
20500

**Office of
National AIDS Policy**

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To Support Staff: _____

Date of Response: _____

**Mary Margaret
Oliver**

May 6, 1997

Dear Sandy,

I'm so proud of
you! You will do a wonderful
job for a great many
people in need.

I'm running for Lt.
Governor! I like my change,
and when I win I'll invite
you to the Senate to tell
about your important work.

Good luck!

Mary Margaret

P.S. Please send a large check for
Oliver for Lt Gov.

Lieutenant Governor