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Correspondence - SLT - Incoming - 12/98 [1]

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Withdrawal/Redaction Sheet

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DOCUMENT NO. AND TYPE	SUBJECT/TITLE	DATE	RESTRICTION
001a. memo	Arthur Thatcher to Sandra Thurman et al re: Grievances (Personal) [partial] (1 page)	11/25/1998	b(6)
001b. letter	Arthur Thatcher to Maurice Evans re: Grievances (Personal) [partial] (1 page)	11/25/1998	b(6)
002. packet	re: Application for Associate Director for Legislative Policy and Analysis at the National Institute of Health (Non-selection) [Personally Identifiable Information] (12 pages)	12/03/1998	b(6)

COLLECTION:

Clinton Presidential Records
National AIDS Policy Office

OA/Box Number: 19398

FOLDER TITLE:

Correspondence - SLT - Incoming - 12/98 [1]

2018-0764-F

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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]
- P4 Release would disclose trade secrets or confidential commercial or financial information [(a)(4) of the PRA]
- P5 Release would disclose confidential advice between the President and his advisors, or between such advisors [(a)(5) of the PRA]
- P6 Release would constitute a clearly unwarranted invasion of personal privacy [(a)(6) of the PRA]

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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]
- b(2) Release would disclose internal personnel rules and practices of an agency [(b)(2) of the FOIA]
- b(3) Release would violate a Federal statute [(b)(3) of the FOIA]
- b(4) Release would disclose trade secrets or confidential or financial information [(b)(4) of the FOIA]
- b(6) Release would constitute a clearly unwarranted invasion of personal privacy [(b)(6) of the FOIA]
- b(7) Release would disclose information compiled for law enforcement purposes [(b)(7) of the FOIA]
- b(8) Release would disclose information concerning the regulation of financial institutions [(b)(8) of the FOIA]
- b(9) Release would disclose geological or geophysical information concerning wells [(b)(9) of the FOIA]

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United States Senate

COMMITTEE ON FOREIGN RELATIONS

WASHINGTON, DC 20510-6225

December 16, 1998

The Honorable Brian Atwood
Administrator
U.S. Agency for International
Development
Washington, D.C. 20523

Dear Brian:

Let me share with you the story of a little boy in Kenya that has touched my heart.

About 15 months ago, a newborn baby boy, covered in dirt and filth, was taken to an orphanage in Karen, Kenya. He tested positive for HIV/AIDS, so he was essentially taken there to die by the policeman who rescued him from a dump where he was found half buried.

But this remarkable little fellow did not die. With the love and high quality medical care provided at the NYUMBANI Orphanage, baby Joseph has thrived; in fact, Joseph is in excellent health as his HIV/AIDS status turned negative, and he is being adopted by an American-Kenyan couple.

There are scores of similar moving stories, which is why I am so enthusiastic about serving on the Honorary Committee for the NYUMBANI Orphanage annual Washington fund raiser.

I have read with interest President Clinton's "plans to devote \$10 million to help [HIV/AIDS infected] orphans stay in school, assisting them with food and job-training, and prepare people in their communities to become foster parents."

If given a choice, I believe most Americans would overwhelmingly prefer to spend their foreign aid dollars on orphans rather than on the existing projects which too often underwrite dubious studies destined never to be read, or fund erudite seminars which do not help desperately poor people suffering from HIV/AIDS in Africa and elsewhere.

Since 1992, NYUMBANI Orphanage has been accomplishing precisely the results you hope the proposed \$10,000,000 will achieve. Currently, 120 children infected with HIV/AIDS (60 living at the orphanage and 60 in the community) are receiving not only vital love and nurturing, but also lifesaving medical

care. NYUMBANI plans to expand to help meet the needs resulting from the projected increase in the number of orphans with HIV/AIDS in Africa. But they need our help.

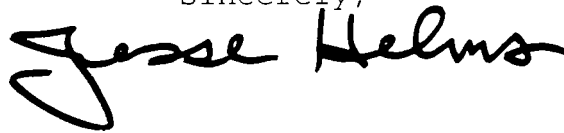
NYUMBANI Orphanage, a Catholic non-profit institution, runs almost exclusively on private contributions. To date, the governments of Canada, The Netherlands, Thailand, Japan, Australia and Portugal have donated funds to support this lifesaving mission. In all condor, it embarrasses me that the only support the U.S. Government has provided is a small quantity of used furniture. Not one U.S. Government cent has gone to help these children because, according to an A.I.D. letter to NYUMBANI, "Funding to support institutionalized children and/or funding for physical infrastructure for orphanages does not fall within USAID's priorities."

So as I understand it, caring for dying HIV/AIDS infected babies is by A.I.D.'s definition not "sustainable", or it does not address issues of "strategic interest" to A.I.D., or it is not a priority for A.I.D. It saddens me that A.I.D. does not consider these helpless orphans a priority.

Brian, we have looked at hundreds of A.I.D. programs that are said to be "sustainable" or of "strategic interest" to A.I.D. and, without question, I would much prefer to spend tax-dollars on the children at NYUMBANI Orphanage and other such institutions. In my judgment, the American people would agree with me wholeheartedly.

I hope and pray that A.I.D. will have a change of heart about helping HIV/AIDS infected orphans -- particularly at NYUMBANI Orphanage. Saving these precious little lives is something all Americans can be proud of.

Sincerely,

A handwritten signature in black ink that reads "Jesse Helms". The signature is written in a cursive, flowing style with a large, prominent "J" and "H".

JESSE HELMS:ggg

cc: The Honorable John Ashcroft
 The Honorable Bill Frist
 The Honorable Sandra Thurman



Dhousden@worldbank.org on 12/22/98 04:53:40 PM

Subject: Invitation - Monday, January 11, 1999 at 6:30 p.m.

Dear Associate,

The news of successful AIDS treatments, therapies and even potential vaccines have replaced the stories of the death and social disfiguration with which AIDS was associated in times past. For this reason, you might be startled to hear that the HIV/AIDS pandemic is worse than ever before. With such therapies well out of the economic and logistic reach of most people living with HIV/AIDS, the sense of revitalized urgency for prevention and affordable treatments are critical. This is a global epidemic which links all countries, cultures and concerns. Only a similar type of global, multi-sectoral response will have a significant impact upon this challenge.

The Gay and Lesbian Organization of World Bank Employees (GLOBE) solicits your presence at an open forum to discuss the issue of HIV/AIDS in less-industrialized countries and regions, particularly Africa. Dr. Debrework Zewdie, HIV/AIDS Coordinator for the World Bank, will brief members of the World Bank, GLOBE and HIV/AIDS activists from the greater Washington area on the deepening HIV/AIDS crises around the world, with special emphasis on Africa. She will discuss the programs which the affected countries are mounting to confront the crisis. The role of the Joint United Nations Programme on HIV/AIDS (UNAIDS) and its Co-sponsors, including the World Bank will be explained, as well as the special initiative for Africa which they are preparing.

All those interested are invited to attend, and to contribute ideas on how we can assist "developing" countries and their civil society groups to strengthen their response. *The meeting will be held on Monday, 11 January, 1999 at 6:30 p.m. at The World Bank, 701 18th Street, N.W., Room J1-050, Washington, D.C.*

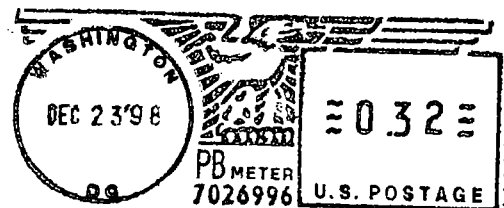
Please confirm your attendance by Friday, January 8, 1999, by email, dhousden@worldbank.org, faxmail (202) 614-0035, or telephone (202) 473-6637. Your participation is much anticipated.

dhousden@worldbnak.org -- tel: (202) 473-6637 faxmail: (202) 614-0035

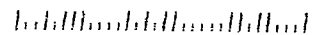
To:

INTERNATIONAL BANK FOR RECONSTRUCTION AND DEVELOPMENT
INTERNATIONAL DEVELOPMENT ASSOCIATION
Washington, D.C. 20433 U.S.A.

FIRST CLASS



**Ms. Sandra Thurman
National AIDS Policy Director, White House
736 Jackson Place, NW
Washington, DC 20503**



CLINTON LIBRARY PHOTOCOPY

Season's Greetings

It was pleasure meeting you
at Jacqueline's [lunch get
together with NGO's working on
HIV/AIDS]

geeta Sodhi

Kalamkari
Courtesy: Subrata Bhownick



CRY - Child Relief and You is an Indian organisation
that reaches out to thousands of children for whom school and a home are just a dream.

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Data Entry Form

Letter ID	Writer First Name	Writer Last Name	Received Date	Subject
11236	Robin	Osborn	12/7/98	

☐ Response Required?

Response Type	Response Date	Responder ID	Responder Name	Action Promised

Action Completed	Action Date	Addressed To
		Sandy

Notes

Sender's Organization	Sender's Street1	Sender's Street2
Ian Axford Fellowships	One East 75th Street	
Sender's City	Sender's State	Sender's Zip
New York	NY	10021

547-4000

Ian Axford (New Zealand) Fellowships in Public Policy

The Commonwealth Fund, One East 75th Street, New York, NY 10021-2692
(212) 606 3809 Fax (212) 606 3875

Robin Osborn
Director

November 18, 1998

Sandra L. Thurman
National AIDS Policy Director
Office of National AIDS Policy
Executive Office of the President
750 17th Street, N.W.
Suite 600
Washington, DC 20503

Dear Ms. Thurman:

It is my pleasure to invite you to nominate a candidate for the ***2000 Ian Axford (New Zealand) Fellowships in Public Policy***, a prestigious exchange program established by the New Zealand Government in partnership with the private sector in July 1995, to reinforce the links between New Zealand and the United States of America. The Fellowships, named after a distinguished New Zealand astrophysicist and space scientist, enable outstanding American professionals to study and gain practical experience in public policy in New Zealand, including first-hand knowledge of economic, social and political reforms, and management of the government sector.

We request that you identify someone in any of the public policy fields listed in the enclosed information for candidates, whom you think would be a strong candidate. You may wish to consider individuals within your own organization or to search more widely. Up to two Ian Axford Fellows, drawn from a wide range of public and social policy areas, are selected each year.

The program is administered in the United States on behalf of the Board of the Ian Axford (New Zealand) Fellowships in Public Policy by The Commonwealth Fund, a New York City-based private independent foundation. Further details about the program are provided in the enclosed materials.

Please complete and return the enclosed nomination form, giving us the name, current position, and contact details of your nominee by Tuesday, January 5, 1999. You can fax your nomination form to us at (212) 606-3875, and we will send your nominee an application pack right away. The deadline for receipt of applications for the 2000 awards is March 15, 1999.

Yours sincerely,



Robin Osborn

Enclosures

**IAN AXFORD (NEW ZEALAND) FELLOWSHIPS
IN PUBLIC POLICY**

**The Commonwealth Fund
One East 75th Street, New York, NY 10021**

NOMINATION FORM

Please use this form to nominate your candidate

**PLEASE FAX THIS FORM TO ROBIN OSBORN BY
TUESDAY, JANUARY 5, 1999:**

FAX: (212) 606-3875

Nominator's Name:

Telephone:

Fax:

E-Mail:

Candidate's Name:

Candidate's Job Title:

Organization:

Telephone:

Fax:

E-Mail:

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IAN AXFORD (NEW ZEALAND) FELLOWSHIPS IN PUBLIC POLICY

INFORMATION FOR CANDIDATES

2000

PURPOSE

Established in 1995 by the New Zealand Government in partnership with the private sector to reinforce the links between New Zealand and the United States, the Ian Axford (New Zealand) Fellowships in Public Policy give outstanding American professionals the opportunity to study, travel, and gain practical experience in public policy in New Zealand, including first-hand knowledge of economic, social and political reforms, and management of the government sector.

The Ian Axford (New Zealand) Fellowships program has three goals:

- to reinforce New Zealand/United States links by enabling Americans of high intellectual ability and leadership potential to come to New Zealand to gain experience and build contacts in the field of public policy development;
- to help improve the practice of public policy in the United States and New Zealand by the cross-fertilization of ideas and experience in the two countries;
- to build a network of public policy experts on both sides of the Pacific, and encourage ongoing policy exchange between New Zealand and the United States.

THE PROGRAM

Ian Axford (New Zealand) Fellowships in Public Policy are designed to give American professionals the opportunity to gain practical experience in public policy in New Zealand, and to gain first-hand knowledge of economic, social and political reforms, and management of the government sector. Up to two Fellowships per year are awarded for six to nine months of study in New Zealand.

Ian Axford Fellowships are offered in any area of public policy. Eligible policy areas for project proposals **include** but are not limited to:

- | | |
|--------------------------------------|---|
| • education and training | • health care |
| • local government and urban affairs | • criminal justice and crime prevention |
| • youth and families | • community development |
| • workplace and employment issues | • public utilities |
| • environment | • policy relating to indigenous peoples |
| • banking policy and regulation | • public sector reform |
| • information technology | • tax policy |
| • science and technology | • program evaluation in the government sector |
| • welfare reform | • transportation |

All Fellowship candidates must complete a formal application, including a project proposal. Candidates should show that their proposed project will inform policy in New Zealand and the United States and contribute something of value to their policy field.

Successful candidates will be based at a host institution and carefully paired with a leading policy expert who will serve as their mentor. The organization of Fellows' individual programs will be left largely to

PARRY, ROMANI & DECONCINI, INC.

233 Constitution Avenue, NE

Washington, DC 20002

202-547-4000

202-543-5044 (Fax)

FACSIMILE TRANSMISSIONTO: *Ms. Sandra Thurman*
National AIDS Policy Director

DATE:

*12-22-98*FAX NO.: *202 632 1094*NO. of PAGES (Including Cover Sheet): *2*FROM: *Senator Dennis DeConcini*

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MESSAGE:

I am enclosing Chairman Packard's letter to Ms. Nancy Ann Mize DePue regarding AIDS Healthcare Foundation. Thank you for your assistance & your leadership.

Have a happy holiday -
Dennis

Please contact _____
this transmission. Thank you.

at 202-547-4000 regarding problems with

RON PACKARD
SETH DISTRICT, CALIFORNIA

COMMITTEE:
APPROPRIATIONS

SUBCOMMITTEE:
CHAIRMAN, MILITARY CONSTRUCTION
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☐ 2372 RAYBURN HOUSE
OFFICE BUILDING
WASHINGTON, DC 20515-0548
(202) 225-3008



Congress of the United States
House of Representatives

☐ PLEASE REPLY TO:
221 EAST VISTA WAY
SUITE 208
VISTA, CA 92084
(760) 831-1364
☐ 628 CAMINO DE LOS MARQUES
SUITE 204
SAN CLEMENTE, CA 92673
(949) 496-2343
<http://www.house.gov/packard/>

December 16, 1998

Ms. Nancy-Ann Min DePerle
Administrator
Healthcare Financing Administration
200 Independence Avenue, S.W.
Washington, D.C. 20201

Dear Ms. DePerle:

In this year's Omnibus Appropriation, the Labor, Health and Education section of the bill earmarked \$2 million for the AIDS Healthcare Foundation (AHF) in Los Angeles to continue its residential treatment project.

Last year, HCFA delayed the release of FY 1998 funds for almost six months. It is my sincere hope that HCFA will release FY 1999 funds in a timely manner and, therefore, avoid any unnecessary discontinuities in the program. I would appreciate being kept abreast of the progress of this situation.

Sincerely,

Ron Packard
Member of Congress



Paul Delay <pdelay @ usaid.gov>
12/21/98 01:05:38 PM

Record Type: Record

To: Todd A. Summers/OPD/EOP

cc:

Subject: fwd: Sandy Thurman visit to South Africa

Todd, I will start routinely forwarding these e-mails on to you so that you see them when I do. Note Renee's concerns about the week of the 11th below. This still seems doable however.

Paul R. De Lay, Chief, HIV-AIDS Division
Tel: 202 712 0683; FAX 202 216 3046;
Internet: pdelay@usaid.gov

Original Text

From: "Saunders, Renee" <rjs4@cdc.gov>, on 12/21/98 12:56 PM:
To: "Delay, Paul" <pdelay@usaid.gov>
Cc: "Saunders, Renee" <rjs4@cdc.gov>

Hi Paul - I'm glad I had an opportunity last week to finally see you. It has been a long time and many stories in-between. I spoke to Alex on Friday to obtain an update on the planned visit of Sandy Thurman. I'm glad that the plans have changed and that we are no longer looking at a CODEL. I touched base with Ken Yamashita today and he will follow up with Stacey Rhodes, Mission Director concerning the visit. One concern is that the visit to South Africa will coincide with the Region PHN meeting on Nov. 14. If Sandy arrives in South Africa on the 12th, she will really only have one day in KZN (13) and one day in JHB (15). The 14th would be spent with the PHN officers and the usual protocol stuff (Minister Zuma, the new Directorate for HIV/AIDS, Ambassador and Stacey). We could probably include a visit to JHB on this day, depending on the meetings with Zuma et al. Further, she would see the "best scenario" first (if there is such a thing with this epidemic) as opposed to a more "depressed" situation. Ken has suggested that she may want to come to South Africa during the week of Jan. 18th, but will check with Stacey to make sure that this does not conflict with Vivian Derek's planned visit. Please let me know your thoughts and outcome of your briefing with Sandy. I can be reached at (404) 639-6100 til Tuesday and at (804) 329-6481 from Wednesday (12/23 - 12/28). I will be in Washington, DC from 12/28 - 12/30 at the Solidarity Center to work on the HIV/AIDS workplan for the SA trade unions. That number is (202) 778-4627. Talk to you soon. Renee

AMBASSADE DE FRANCE AUX ETATS-UNIS

4101 Reservoir Road, N.W.
Washington DC. 20007
Téléphone : (202) 944-6232
Télécopie : (202) 944-6257

*Le Conseiller
pour les Affaires Sociales*

December 10, 1998

Mrs. Sandra Thurman
National AIDS Policy Director
White House Office of National AIDS Policy
736 Jackson Pl., NW
Washington, DC 20503

Dear ~~Mrs.~~ ^{Sandy} Thurman:

I very much appreciated spending time with you last week and sharing our commitment to respond to the challenges of the HIV epidemic.

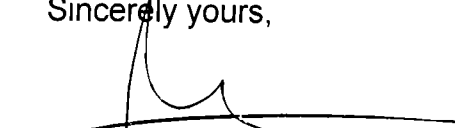
Please find enclosed a copy of the video which I had mentioned to you, I believe you will find it powerful and, hopefully, useful in your discussions on the Africa initiative.

I have been in contact with Health Minister Bernard Kouchner who would be delighted to meet with you and discuss the orphan project. He has informed Mr. Josselin, our Foreign Assistance Minister about your upcoming exploratory mission to Africa and he wishes to convey to you the French government's support for this mission.

I believe that the orphan project and the solidarity fund are complementary and that we could find ways of cooperating and possibly linking these projects.

I shall call on you at the beginning of next week to discuss these matters further.

Sincerely yours,


Michel Lavollay, MD

Copy: Dr. Bernard Kouchner
Dr. Eric Chevallier

Marian E. Ord
2540 Massachusetts Avenue, N.W.
Washington, D.C. 20008
(202) 328-2374

December 4, 1998

Ms. Sandra Thurmon
Director, AIDS Policy
Jackson Place
The White House
Washington, D.C. 20500

Dear Ms. Thurmon,

I am a member of the Executive Board of NYUMBANI-USA which supports the orphanage for abandoned children of HIV+ parents in Nairobi, Kenya. I gather you visited Fr. D'Agostino and the NYUMBANI Orphanage while on a UN tour of the African region, and attended our annual event this Autumn at the Columbus Club in Washington, D.C.

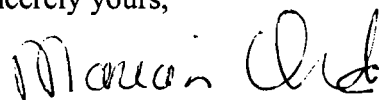
I understand you are planning a fact-finding mission to Africa to survey the situation and identify sites that are providing assistance to children of HIV+ parents who have been abandoned or who are already orphans. And I would like to bring to your attention such an effort in Kampala, Uganda, in hopes that you could include a visit to them while you are in the East African region.

Recently I met the Anglican Bishop of Namirembe, The Rt. Rev. Samuel B. Sskkadde, who lives in Kampala, and I was pleased and surprised to learn he has established an orphanage and outreach program for children of HIV+ victims. I am under the impression that AIDS programs in Africa, especially for children, are sparse and not generally well supported. So I am happy to identify to you another place in Africa that could only benefit from your attention.

It is with hope and pleasure that I give you this information and would be most grateful if you could let me know if your mission could include this struggling but important effort in Uganda. I have enclosed a copy of the Bishop's letter and a resume of his efforts on behalf of child victims of AIDS.

I would be happy to provide any further information you might need and look forward to hearing from you.

Sincerely yours,



Marian E. Ord



NAMIREMBE DIOCESE

CHURCH OF UGANDA (ANGLICAN)

Bishop: The Rt. Rev. Samuel Balagadde Ssekadde
M.D.A, B.A (SWSA), Dip. Theo.

Tel: Residence 344347 Kampala
Office 271681/4 (All Departments)
Telex: 62014 KANISA UGANDA.



P.O. Box 14297
KAMPALA
(Uganda)

Our Ref:.....

Your Ref:.....

28/10/98

Marian Ord,
2540 Massachusetts Avenue,
NW ~~202-328-2374~~
Washington, DC 20008

Dear Marian,

Christian greetings and love from Namirembe.

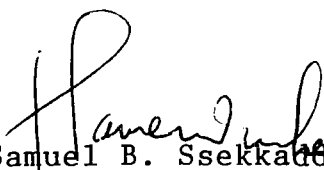
Thank you for the warm reception accorded to us while in DC. It was also a pleasure to know you better and to discover your particular interest in AIDS/HIV Care.

Please know we are interested in furthering relationship with you and deepening communion in areas of theological dialogue and joint witness to the HIV/AIDS care and prevention ministry.

Also let us know the contact person of HIV orphanage (Nyumbani) in Nairobi. We have no doubt he will help inspire further, our commitment to HIV/AIDS care.

See attached all information concerning our involvement with HIV/AIDS.

In Christ,


The Rt. Rev. Samuel B. Ssekadde,
BISHOP OF NAMIREMBE.

**FRIENDS OF THE SICK INITIATIVE - DIOCESE OF NAMIREMBE
HEALTH DAY CARE CENTRE PROJECT
HIV PREVENTION AND AIDS CARE PROJECT
UGANDA - EAST AFRICA**

Forwarded to:

**Contact Address: Diocese of Namirembe
P O Box 14297
KAMPALA - UGANDA**

THE SETTING

It is Sunday afternoon. The worship service ended at 12.00 noon and the Friends of the Sick (Popularly known here as "Good Samaritans") remained in the Church building to plan their evening visits to the sick. After the meeting, they grouped themselves in twos and threes so that they manage to visit every family with a patient or that one recently bereaved. One group knocked gently and waited to be invited before entering the house. The patient smiled and welcomed them to sit on his or bed. They did not do a lot of talking themselves, they mainly listened and encouraged the person to talk about his problems. The person was very weak and the family's coping capacity had been irreversibly diminished, so the Good Samaritans gave all the practical support they could on that day: fetching water, firewood, cleaning the house and washing clothes, bedsheets or dishes. They also gave out to the family some collected items like soap, medicine and food. Then the Good Samaritans asked the sick person and the family members whether they would have liked to pray. The answer was Yes and they prayed together before leaving.

THE SITUATION:

In Uganda today, over 1.5 million people are estimated to be carrying the virus that causes AIDS. During the next five years, one million more may be infected if the present prevention efforts are not increased or at least maintained.

Children have been particularly hit by this disease. Over 400,000 children have been orphaned and many more are sick and dying due to inadequate medical care and feeding. Children orphaned before they are five years have had special feeding problems. They need to eat five or six times a day with diet rich foods but who can do that in the absence of a mother and a father? Who can be responsible since even the extended family members that would have helped in such a situation are dead, dying or just penniless?

Diarrhoea is now the third biggest killer of children in Uganda today and a major cause of child malnutrition. The majority of these diarrhoea - related illness and death occur in families that have been hit hard with AIDS. Poor hygiene, lack of clean drinking water, overcrowding and loss of breast fed milk (due to death of mother) are all more pronounced in the homes affected by AIDS. It is the same case with malaria which is now the leading cause of death among children in Uganda. (It kills almost 800,000 children every year on the continent).

Shelter is an acute problem. Widows and aged grand parents are often unable to manage to keep the mud walls and grass thatched roofs of their homes in good repair. Many families also lack mattresses, blankets and sheets. It is common here for children to sleep on sacks spread on the dirt floor, with only a few torn sheets or traditional back cloths for covering. Children are also desperately in need of foot wear and clothing. Many have no foot wear at all and own one set of tattered clothes. Soap is a luxury which many families cannot afford in their present situation.

EDUCATION:

Ugandans attach high priority to education. But many AIDS orphans are now dropping out of Primary School or not even starting. In one Church Parish in the Diocese (Nsangi Parish) more than 60 orphans are not attending Primary School even when there is a Universal Primary Education Programme where Government pays fees for the first four children in the home. (The Diocese has 57 Parishes of the size of Nsangi). The cost of school uniforms, books, pencils, and other expenses cannot be afforded by their surviving parents or guardians.

HEALTH CARE:

Most AIDS orphans from impoverished families are now more prone to malnutrition and infections. Many cannot access health care. Very young children are particularly at risk especially where the mother have died and are in the care of their grand parents. Many are dying unnecessarily of malnutrition and common illnesses such as diarrhoea, dehydration and respiratory infections. Many of the surviving guardians are themselves in need of medical care. Through prompt treatment with appropriate drugs, most of the common infections could be controlled and lives prolonged. The Good Samaritan teams and home carers also need items like plastic gloves, soap and bleach for sterilizing soiled beddings of sick children and adults.

FRIENDS OF THE SICK:

To respond to the above mentioned challenges among the sick, the orphans and the guardians; the Diocese of Namirembe formed a Health Board to take the responsibility of initiating Task focused, Results oriented and Sustainable programs to stem the tide of HIV infections and promote care for the sick and orphaned. Health Committees were formed in each Parish and in daughter Churches. It is these Health committees that are popularly known as "Good Samaritan" Committees basing on Jesus' teaching of "Who is your neighbour?" (St. Luke Chapter 10:25-37). These friends of the sick provide health and spiritual education and counselling to individuals and families affected by AIDS and to those communities and families with hygiene and sanitation related problems. They work together with other groups to do disease prevention, care and support work in their communities. They do home visiting, teach families to take care of their patients at home and give practical help wherever possible. (The Diocese of Namirembe has per now 57 such support teams at Parish level and with support from Stromme Foundation 24 of

those have had chance to be trained in Home Care skills. The target is to increase the teams and train 70 of them by the end of 1998, 200 by the end of 1999). Through the efforts of these Friends of the sick, a Health Day Care Centre has been established in the Diocese; and local clinics established at each Parish to support the Good Samaritan teams work and give treatment to the sick. Today, the Diocese of Namirembe has 34 Health Clinics at Parish level. At the Health Day Care Centre, situated near the Diocesan Headquarters, people who are either worried of infection or are in all probability HIV positive, come for counselling services, psychological emotional and spiritual rehabilitation and nurture. The centre also hopes to give support to the Good Samaritan teams in the Parishes by supplying them with vital medical kits, contributing to their orphan support initiatives and in providing occupational therapy to the HIV positive well (i.e. having HIV but not yet sick with AIDS). With support from Stromme Foundation, the Health Day Care Centre is supporting 34 members of the Post HIV test club with income generating activities. They have a Rabbit Project, a Tailoring Project and a Crafts Project where mats, baskets, hats etc are produced. Through their music, dance and drama ministry and personal testimonies of their experiences, they have changed many people's lives and their attitudes to people living with AIDS and speeded up the process of the Churches' commitment to care. (The Stromme Foundation leadership in Norway have had chance to interact with this group and to watch them in action).

With support, first from Tear Fund and then Stromme Foundation, the Health Day Care Centre provides a Lunch every Thursday in the week for Post -test Club members, their children, guardians and Project Staff. Eating meals together destigmatises AIDS by demonstrating that HIV is not transmitted by sharing cups, plates or other eating utensils.

THE GREATEST WORRY AND THE GREATEST NEED:

One of the most agonising worries for Project Staff, members of the Post Test Club and other people living with HIV in the country is the fate of children now and after their parents are dead - in terms of medical care, educational support and general welfare. It is the wish of the Health Day Care Centre, Diocese of Namirembe to support patients, their children and guardians with food, clothing, medical care kits and drugs, passing through the existing Good Samaritan Teams and Church Health Clinics. That is if we can get more

"Friends of the sick" in and outside the Diocese and from our partners in the North. The Good Samaritans are overwhelmed with demand for support yet, they themselves are needy so to say. The call of the Church is to give care for the total person: physical, spiritual, emotional and social support.

In this Era of AIDS and other epidemics enhanced by El Niño (too much rain) in East Africa, there is great need for the Church, Christians and everyone with a humanitarian spirit to join in the relief of material suffering.

The Diocese of Namirembe is helping local communities to organise themselves to meet Health and Health related challenges exacerbated by HIV/AIDS, Malaria and Cholera. With support first from Tear Fund U.K. and next from Stromme Foundation, the Diocese is assisting these communities with training of local resource people, and in strengthening local community coping mechanisms beyond the traditional extended family. But capacity building takes time. So, in the meantime, we need your support to meet the basic needs that cannot wait. You can pray with and for us and you can join our Friends of the Sick Teams by:

- Sending what you have towards medical care, food, clothing and bedding for the sick and the orphans.
- Paying fees for an orphan.
- Supporting orphans in school with books, pens, uniform and a good meal for lunch or breakfast.

FRIENDS OF THE SICK INITIATIVE - DIOCESE OF NAMIREMBE
HIV PREVENTION AND AIDS CARE PROJECT
UGANDA - EAST AFRICA

A. DRUGS FOR COMMON AILMENTS

		UNIT	IN US \$
1.	Paracetamol tablets	1 tin	6
2.	Asprin “	“	5
3.	Chloquine “	“	15
4.	Ferrous Sulphate tablets	“	4
5.	Vitamin C “	“	6
6.	Ferro B “	“	4
7.	Magnesium “	“	5
8.	Multivitamin “	“	3.5
9.	Seprin “	“	20
10.	Flagyl “	“	8
11.	Codaine “	“	8
12.	Folic Acid “	“	4
13.	Mabendazole “	“	8
14.	Piridon “	“	3
15.	Anthithamine “	“	4
16.	Phenargen “	“	8
17.	Cold Caps “	“	20
18.	Niziol “	“	30
19.	Sulphadimidine “	“	20
20.	Nystatin “	“	30
21.	Ampicilline Capsules	“	36
22.	Tetacycline “	“	30
23.	Ampclox “	“	40
24.	Imodium “	“	100
25.	Indocid “	“	8
26.	Kaolin mist	1 doz.	8.4
27.	Magnesium mist	“	8.4
28.	Cough Linctus	“	8.4
29.	Glycline borax	“	8.4
30.	Calamine Lotion	“	8.4
31.	Tetracycline Cream	1 tube	0.5
32.	Hydrocotizone Cream	1 tube	2
33.	Quinine tablets	1 tin	30
34.	Fancider tablets	“	50
36.	Camaquine	“	15

	UNIT	IN US \$
B. DRUGS FOR COMMON AILMENTS		
Habicet Disinfectant	1 doz	24
Savlon “	1 doz	24
Izal “	20 litres	30
Hydrogen Peroxide	1 doz	15
Mosquito Net	1 set	8
C. MALNUTRITION TREATMENT/PREVENTION		
Maize flour	1 Kg.	0.8
Rice	1 Kg.	1
Millet	1 Kg.	0.8
Potatoes	1 Kg.	0.5
Peas	1 Kg.	1
Soya bean/Local beans	1 Kg.	0.9
Bananas	1 bunch	6.5
Ground nuts	1 Kg.	1.5
Eggs	1 tray	3
Meat	1 Kg.	2.5
Fish	5 Kg.	6.5
Liver	1 Kg.	3
Milk	1 Litre	0.8
Mango fruit	1 fruit	0.5
Orange	1 fruit	0.5
Pineapple	1 fruit	0.3
Papaw	1 fruit	0.5
Apples	1 fruit	0.5
Jack fruits	1 fruit	0.5
Green vegetables	1	0.5
Tomatoes	3	0.5
D. PATIENT AND ORPHAN CARE KITS		
Mattress with plastic covering	3 1/2 inches	40
Bed sheets	1 pair	15
Blanket	1	10
Protective gloves	1 pair	1.5
Soap	1 bar	0.7

E. EDUCATION SUPPORT TO ORPHANS

	UNIT	IN US \$
Support to one child in Primary school @ term (fees, textbooks, food and uniform) (There are three terms in a year)	1 term	50
Support to 1 non-boarding student in Secondary School (fees, text books, uniform) (There are 3 terms in a year)	1 term	100
Support to a Boardint Student	1 term	200

FRIENDS OF THE SICK INITIATIVE
HEALTH DAY CARE CENTRE
DIOCESE OF NAMIREMBE
HIV PREVENTION AND AIDS CARE PROJECT

**SOME OF THE CHILDREN AND GUARDIANS IN GREAT NEED OF
SUPPORT AND MEDICAL CARE (PARENTS DEAD OR BEDRIDDEN)**

NAME	SEX	AGE	CLASS	GUARDIAN
1. Atego J.	F	17	S. 1	Nakatudde C.
2. Semakula K.	M	7	N	Nassiwa J.
3. Sempagala J.	M	17	S. 2	Nakamanya B.
4. Namata S.	F	7	P. 2	Nanteza C.
5. Mbogo R.	M	13	P. 5	Namirembe R.
6. Nanfuma R.	F	16	S. 1	Mrs. Muwanga
7. Kalibaza S.	M	13	P. 6	Namusoke M
8. Semugooma N.	F	9	P. 1	Semugoma M
9. Lubwama B.	M	16	P. 7	Nkinzi b.
10. Nalugwa D.	F	19	S. 2	Nakimuli D.
11. Nakitende A.	F	15	P. 7	Banyikire J.
12. Kyambadde D.	M	11	S. 3	Nansubuga L.
13. Namulindwa R.	F	14	P. 5	Ssegwano J.
14. Namuluuta A.	F	12	P. 5	Nalumansi M
15. Kalundu P.	F	21	S. 5	Namagembe S
16. Kibirige S.	M	13	P. 6	Kabuye M
17. Settimba S.	M	17	S. 1	Mukasa E.
18. Nansubuga C.	F	23	S. 5	Semanziri N.
19. Senyonjo D.	M	16	S. 2	Nalumansi M
20. Kanya J.	M	14	P. 6	Nabona M.
21. Wanyana F.	F	15	P. 7	Namusoke
22. Nalule D.	F	24	S. 5	Namala R.
23. Namuyomba R.	F	20	S. 5	Namuyomba
24. Nangobane S.	F	15	S. 2	Nabulime J.
25. Kanyerezi P.	M	16	S. 2	Kaggwa J.
26. Talabirwa A.	F	6	P. 1	Naluggya J.
27. Namanda A.	F	12	P. 2	Nabakooza J.
28. Kasule S.	M	10	P. 3	Nalutaaya M
29. Kirunda A.	M	10	P. 4	Nakibuuka D.
30. Bigumirwa B.	M	11	P. 3	Nakamunya A
31. Nansozi V.S.	F	10	P. 4	Lutaya N.

NAME	SEX	AGE	CLASS	GUARDIAN
32. Masane B.	F	10	P. 3	Mutatwala
33. Namyenya R.	F	14	P. 7	Namusoke N.
34. Wanyana J.	F	14	P. 5	Najjagwe M
35. Sabwe M.	M	11	P. 5	Babirye C.
36. Sonko D.	M	9	P. 2	Nalugwa D.
37. Semakula G.	M	9	P. 2	Tebenanya R
38. Gwokyalya R	F	6	N	Nakabira R
39. Nakivumbi J.	F	9	P. 2	Nalikka B.
40. Nannono R.	F	19	S. 4	Nansereko P.
41. Nalukwago L.	F	10	P. 4	Kiwanuka R.
42. Nalule I.	F	10	P. 3	Nabasulu A.M
43. Nampijja G.	F	9	P. 3	Nakazibwe J.
44. Lubanga	M	17	S. 1	Nakatudde C.
45. Tamale D.	M	9	P. 2	Nakidde M.
46. Kalule L.	M	12	P. 5	Tereza M.K.
47. Nakato M.	F	8	P. 1	Nannono M.
48. Nakibuuka R.	F	8	P. 2	Nsereko A.
49. Sseruyange A.	M	9	P. 3	Ssemanda J.
50. Tamale J.	M	22	S. 5	Namigadde M
51. Wasswa P.	M	9	P. 1	Namakula R.
52. Babirye	F	8	N	Nakimuli M.
53. Biyinzika E.	F	13	P. 2	Nakitende S.
54. Kasseru K.	M	7	N	Nabukeera K.
55. Kibuka N.	M	13	P. 6	Nakiberu H.
56. Kimbugwe S.	M	10	P. 1	Sendege A.
57. Kimera M.	M	16	P. 5	Efulansi B.
58. Kavvulu J.	M	16	P. 6	Nazziwa E.
59. Kawalya P.	M	11	P. 3	Bwogi M.
60. Kato Sebuliba W.	M	17	P. 6	Namukasa A.
61. Bukenya T.	M	17	S.1	Nakamanya
62. Nantale M.	F	6	N	Ziriko J.
63. Njuba V.	M	9		Wevugira M
64. NakimbugweA.	F	8	P. 1	Serukwaya V.
65. Lukyamuzi D.	M	18	P. 7	Nantale T
66. Kiwewa S.	M	8	P. 1	Nantale T
67. Nakazibwe F.	F	14	P. 6	Bugendage J.
68. Nakimera C.	F	10	P. 3	Nabbale R.
69. Kiberu M.	M	14	P. 7	Mulinde V.
70. Misusera K.	M	19	S. 3	Babirye E.
71. Ssebagala J.	M	19	S. 3	Sebagala N.
72. Naggita C.	F	17	S. 1	Lugolobi J.
73. Tulabiddawo V.	M	21	S. 3	Sebukyu E.

NAME	SEX	AGE	CLASS	GUARDIAN
74. Nantume V.	F	7	P. 1	Bukulu E.
75. Zawedde R.	F	10	P. 4	Nalongo C. N.
76. Ssempijja V.	M	11	P. 1	Nakabugo R.
77. Najjemba G.	F	9	P. 2	Lutaaya G.
78. Zizinga S.	M	11		Bulega F.
79. Mukwaya R.	M	15	P. 7	Nassuna N.
80. Kaweesa V.	M	16	S. 3	Namusoke G
81. Kawooya J.	M	10		Namale V.
82. Kamuddu W.	F	12	P. 7	Mukungirwa
83. Luyiga C.	F	9	P. 1	Nakigudde R.
84. Nakkazi J.	F	10	P. 2	Namuyise M.
85. Nsubuga J.	M.	10		Katerenga G.
86. Namugga V.	F	21	S. 5	Nakacwa G.
87. Sebyatika D.	M	13	P. 4	Nabbale R.
88. Kalejja T.	M	15	S. 1	Mukasa F.
89. Nabazira E.	F	11	P. 3	Omumbejja R.
90. Naluwu V.	F	13	P. 6	Kavuma C.
91. Namala D.	F	10	P. 3	Racheal W.
92. Namirembe C.	F	15	S. 2	Ssemenda D.
93. Nansubuga J.	F	10	P. 4	Waseli T.
94. Nansubuga N.	F	14	S.1	Nasejje V.
95. Nanyanzi A.	F	21	S. 3	Nanyanzi E.
96. Nassali R.	F	13	P. 4	Nambooze J.
97. Nassibwa D.	F	17	S. 2	Guluddene S.
98. Ndagire E.	F	17	S. 2	Guluddene S
99. Ntale R.	M	14	P. 6	Wamala S.
100 Nteza H.	M	13	P. 6	Ssengendo A.
102 Ssebata K.	M	18	S. 2	Kaddu D.
103 Ssali G.	M	11	P. 4	Nakibuuka S.
104 Alali A.	M	8	N	Kalunkuuma
105 Ssejoba C. W.	M	6	N	Baseka G.
106 Kaweesa J.	M	13	P. 4	Nalumansi R
107 Katasi D.	F	13	P. 6	Nakibuuka R.
108 Kadoodo C.	F	8	P. 3	Kyamumi J.
109 Kato J.	M	11	P. 4	Nansubuga J.
110 Byayi F.	M	12	P. 3	Nabisere S.
111 Gatema H.	M	20	S. 2	Nasuna C.
112 Bukajjumba R.	M	17	S. 3	Kayizzi C.
113 Buule F.	M	8	N	Bakka B.
114 Bulemu G.	M	19	S. 2	Kasirye M.

Jan 5 @ 10 - OES

David Wagner

Erica Bunn

647-4824

John Ralyea 622-0251

David Ralyea - 622-0251
2000 Dec 9

10 on Tuesday
Markene O'Shea
Erica Bunn

David Wagner

make sure that he

called

W

D

Thurs	5 ^{pm} - 10 PM
Frid	8 ^{am} - 10 PM
Sat	1 - 10 PM
Sun	8 ^{am} - 10 PM

6 guests

**AIDS
POLICY
CENTER****For Children, Youth, and Families****FAX**

918 Sixteenth Street N.W. • Suite 201 • Washington, DC • 20006

Phone: (202) 785-3564 • Fax: (202) 785-3579

TO:

Sandy Thurman

FAX:

456-2439

FROM:

CLARK A. MOORE

Associate Director for Policy

cmoore@aidspolicycenter.org

DATE:

12/4

TOTAL PAGES:

3

SUBJECT:

Budget Request letter

COMMENTS:

Hi Sandy!

FYI — this is APC's updated budget request letter for Title IV.

Thanks again for involving us in the World AIDS Day event.

- Clark



AIDS Policy Center
For Children, Youth & Families

December 4, 1998

The Honorable Bill Clinton
The White House
Washington, D.C. 20503

Dear Mr. President:

As representatives of children, youth, women and families living with HIV/AIDS, we are writing to ask that your FY 2000 budget request to Congress include a total of \$61 million for Title IV of the Ryan White CARE Act.

Title IV of the Ryan White CARE Act provides funding for medical care, social services, and access to research to over 45,000 children, youth, women and families. Title IV currently supports 48 programs in 27 states, the District of Columbia and Puerto Rico. We were very pleased that three families that receive services from Ryan White Title IV programs were able to join you at on stage for your World AIDS Day speech earlier this week.

We thank you and your Administration for your ongoing support for the Ryan White Title IV program. Thanks to your leadership, and the support of the Senate and House Appropriations Committees and the Congressional Black Caucus, the Ryan White Title IV program received an FY 1999 appropriation of \$46 million, an increase of \$5.2 million over FY 1998. Of this increase, \$2 million is specifically dedicated to addressing HIV/AIDS among African American children.

Title IV continues to serve an ever-growing caseload of children, youth, and women. New HRSA service data show that the Title IV program served 13% more clients in 1997 than in 1996, with increases in all age groups. From 1995 to 1997, the number of young people ages 13-24 served by Title IV increased by 225%. Title IV also continues to lead the Ryan White CARE Act in serving people of color: in 1997, 58% of clients were African American, and 23% were Latino.

In order to meet the growing demand for services, Title IV requires a minimum of \$61 million in FY 2000. This would be an increase of \$15 million over FY 1999. Additional funding will enable Title IV programs to strengthen existing projects, expand efforts to reduce perinatal (mother-to-infant) HIV transmission, and expand services that are targeted to youth.

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Tel. (202) 785-3564
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E-mail: info@aidspolicycenter.org

A major success of the Ryan White Title IV program has been to help dramatically reduce the rate of perinatal HIV transmission in the United States. The recent Institute of Medicine report to Secretary Shalala on efforts to reduce perinatal transmission identified the key role that Ryan White Title IV programs have played in this effort. The report also recommends that the existing infrastructure for providing perinatal HIV prevention and treatment should be strengthened by building on current Title IV services. Increased funding for Title IV in FY 2000 would help to implement this important recommendation.

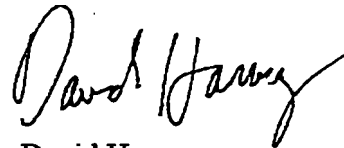
Expanded funding for the Ryan White Title IV program will also increase the availability of HIV services for youth. Young people under age 25 now account for half of all new HIV infections in the United States, but represent a very small fraction of the HIV positive people receiving health care. This year, HRSA launched a new initiative to fund innovative community-based programs that recruit and retain HIV positive youth into primary medical care and support services. Forty organizations applied for this funding, and after a stringent screening process by an expert panel, 25 of the applications were approved. However, funding was only available to fund five of the approved applications. With increased funding for Title IV, more of these worthy youth programs could receive funding.

Again, thank you for your continued support of the Ryan White Title IV program, and for your consideration of our request. If you have any questions, please have your staff contact Clark Moore at (202) 785-3564.

Sincerely,



Mildred Williamson
President



David Harvey
Executive Director

FAX**12/9/98****Number of pages to follow: 2**

TO: Sandra Thurman
Director
Office of National AIDS
Policy
Fax Phone 202-456-2436

FROM Benjamin Schatz, JD
Executive Director
Gay and Lesbian Medical Association
459 Fulton St., Suite 107
San Francisco, CA 94102
Phone 415-255-4547
Fax 415-255-4784

REMARKS: ☐ Urgent ☒ For your review ☐ Reply ASAP ☐ Please Comment

I wanted you to see this letter to Surgeon General David Satcher. Please let us know if you can assist us in this effort.



Gay and Lesbian Medical Association

459 Fulton St., Suite 107 • San Francisco, CA 94102 • 415-255-4547

fax: 415-255-4784 • info@glma.org • www.glma.org

Founded in 1981 as the American Association of Physicians for Human Rights

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Executive Director
Benjamin Schatz, JD

December 9, 1998

Surgeon General David Satcher
200 Independence Ave. SW, Rm. 716G
Washington, D.C., 20201

Dear Dr. Satcher:

As the executive director of the Gay and Lesbian Medical Association and as a member of the President's Advisory Council on HIV/AIDS, I am writing to express my concern about the complete exclusion of gay, lesbian, bisexual, and transgendered health issues in Healthy People 2010.

As a member of the President's Advisory Council on HIV/AIDS, I have been impressed by your candor when addressing how our country must respond to the epidemic of HIV disease. In fact, it was your discussion at our last meeting in November that encouraged me to ask our Director of Public Policy, Fred Fox, MD, to focus his attention on the Healthy People 2010 report currently available for public comment.

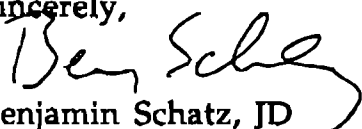
Given the amount of work the Gay and Lesbian Medical Association has done in recent years to educate members of the Department of Health and Human Services, we were distressed to find that Healthy People 2010 blatantly ignores the specific health needs of the lesbian, gay, bisexual, and transgendered community. This exclusion occurs even in subject areas where the unique and pressing health concerns of the lesbian, gay, bisexual, and transgendered community are well-documented, such as sexually transmitted diseases, injury/violence prevention, substance abuse, access to quality health services, health communication, and tobacco use. In fact, the only place the report even mentions this population's health needs is in the section on HIV.

One of the main goals of Healthy People 2010 is to eliminate health disparities—but it will be impossible for the nation to achieve this goal without specifically including the lesbian, gay, bisexual, and transgendered community as a target group. Studies have repeatedly found that this community faces numerous barriers to achieving quality health care, and I am eager to discuss these reports with you and with other members of the Healthy People Consortium.

Healthy People 2010 will have a marked impact on this nation's health—and as an integral part of our nation, the lesbian, gay, bisexual, and transgendered community needs and deserves to have its specific health needs addressed. In the coming days, many of our 2,000 members who are experts in lesbian, gay, bisexual, and transgendered health will be commenting on the report on the Healthy People web site. I hope that you will read these comments to gain insight into the ways in which the report can and should address this population's unique health needs. Please do not allow another decade to go by in which the federal government ignores the needs of lesbian, gay, bisexual, and transgendered people. Surely the AIDS crisis has taught us the price that all Americans can pay for such neglect.

I look forward to having the opportunity to speak with you and other members of the Healthy People Consortium about our concerns.

Sincerely,



Benjamin Schatz, JD
Executive Director

cc: Secretary Donna Shalala
Sandra Thurman
Richard Socarides
Marsha Martin
Scott Hitt, MD
Elizabeth Birch
Kerry Lobel

Data Entry Form

Letter ID	Writer First Name	Writer Last Name	Received Date	Subject
11229	Geeta Rao	Gupta	12/7/98	

☐ Response Required?

Response Type	Response Date	Responder ID	Responder Name	Action Promised

Action Completed	Action Date	Addressed To
		Sandy

Notes

Sender's Organization	Sender's Street1	Sender's Street2
ICRW	1717 Mass. Ave., NW, Ste. 30	
Sender's City	Sender's State	Sender's Zip
Washington	DC	20036



1413 K Street, NW
Washington, DC
20005-3442
202-898-0414
FAX 202-898-0435
www.napwa.org

December 4, 1998

The President
The White House
Washington, DC 20500

Dear Mr. President:

I am writing to thank you for your efforts to improve the safety of the nation's drinking water. The National Association of People with AIDS (NAPWA) also commends the good work of the Vice President and the Environment Protection Agency in working to improve the operating standards of local water systems.

Your commitment to reducing the risk that cryptosporidium and other contaminants poses to the survival of people living with HIV is especially appreciated. As you are well aware, cryptosporidium released in drinking water has caused sickness and death in Americans across the country. The new standards you have introduced will greatly alleviate the suffering this parasite has caused to people living with HIV disease.

NAPWA hopes that you will continue these efforts in the new year through increased funding for implementation of the *Safe Drinking Water Act of 1996* and vigilant enforcement of these new standards. We are committed to promoting more funding to better protect the nation's drinking water and toward even stronger enforcement and data collection measures.

As we continue our work toward an end to the HIV epidemic and the human suffering it has caused, NAPWA sends you every good wish for the holidays and the New Year.

Respectfully yours,

A. Cornelius Baker
Executive Director

copy to: The Vice President
 The Honorable Carol Browner
 The Honorable Donna Shalala
 Mr. Bruce Reed
 Ms. Sandy Thurman

Data Entry Form

Letter ID	Writer First Name	Writer Last Name	Received Date	Subject
11243	A. Cornelius	Baker	12/9/98	

☐ Response Required?

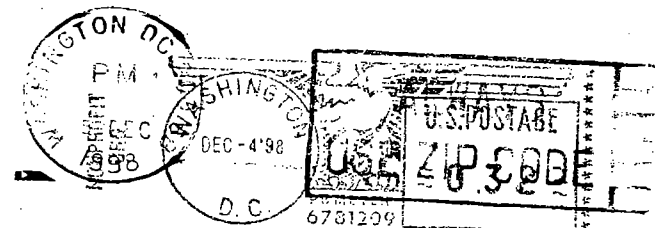
Response Type	Response Date	Responder ID	Responder Name	Action Promised
Action Completed	Action Date	Addressed To		
		Sandy		

Notes

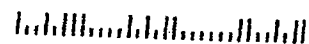
--

Sender's Organization	Sender's Street1	Sender's Street2
National Association of People	1413 K Street, NW	
Sender's City	Sender's State	Sender's Zip
Washington	DC	20005

1413 K Street, NW
Seventh Floor
Washington, DC
20005-3405



Ms. Sandy Thurman
Director, Office of National AIDS Policy
Old Executive Office Building
Washington, DC 20501



Data Entry Form

Letter ID	Writer First Name	Writer Last Name	Received Date	Subject
11228	Joey B.	Pressley	12/3/98	

☐ Response Required?

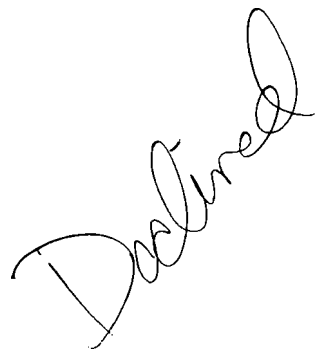
Response Type	Response Date	Responder ID	Responder Name	Action Promised
Action Completed	Action Date	Addressed To		
		Sandy		

Notes

Sender's Organization	Sender's Street1	Sender's Street2
Harlem United	123-125 West 124th Street	
Sender's City	Sender's State	Sender's Zip
New York	NY	10027

Joey B. Pressley

Family AIDS Network, Inc.



1611 N. Kent Street, Ste. 1003
Arlington, VA 22209
703 / 243-8242
703 / 243-8377 fax

MARY FISHER, FOUNDER

December 22, 1998

Administrative Center
678 Front Street NW
Grand Rapids, MI 49504
616 / 451-2361
616 / 451-9180 fax

Ms. Sandra L. Thurman
Director
Office of National AIDS Policy at the White House
736 Jackson Place
Washington, DC 20503

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Rosie O'Donnell
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Cristina Saralegui
Florida

Dear Ms. Thurman:

On behalf of Mary Fisher and the Family AIDS Network, I am writing to you about a very special upcoming event. On Wednesday, January 27th, we will host the "Second Annual Washington Event on Women and AIDS." We hope you can be a part of this important and dynamic luncheon to be held at the Capitol Hill Hyatt Regency Hotel.

Since her historic speech to the 1992 Republican National Convention, Mary Fisher has been a voice of compassion and awareness in the fight against AIDS. Today, Mary's Family AIDS Network works to communicate with the nation about AIDS in ways that produce positive changes in and on behalf of the AIDS community. A special focus of our efforts continues to be the impact of AIDS on women and communities of color. This is increasingly important -- as you know, half of all new infections in people aged 25-44 are among women. In 1997, the increase of women living with AIDS was double that among men.

The theme for this year's luncheon will be "Access to Care -- A Special Challenge for Women with HIV/AIDS." During the past year, the Network has focused on this challenge through Mary's speeches, a pilot project for homeless women here in Washington, a conference with the Harvard AIDS Institute titled "Best Practices for Women with HIV" and other programs.

CNN's Judy Woodruff will again host our program. Jane Gephardt and Bonnie Livingston have agreed to serve as Honorary Hosts and will welcome the assembled group. Mary Fisher will talk about her vision in the fight to save lives. Dr. Kathleen E. Squires, a leading researcher of women and AIDS at the University of Alabama at Birmingham, will discuss the challenges women face with access to care. Two Members of Congress will receive "Angel Awards" for constant vigilance in the fight against AIDS. (Last year's recipients were Reps. John Dingell and Nancy Johnson.) As you can see on the enclosed, by the time our invitation went to press, we had confirmed forty-nine Honorary Congressional Sponsors. To date, well over 100 U.S. Representatives and Senators have lent their names to this vital cause. (See the enclosed "updated" Honorary Congressional Sponsors listing.)

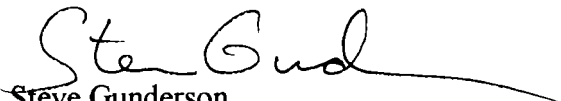
Ms. Sandra L. Thurman
December 22, 1998
Page 2

I am writing to you with a specific request. It is our hope that you would consider participating in this important event (to be held from 12 to 2 p.m.). While details of the program have yet to be finalized, we would ask if you are amenable to both attending the event, and presenting brief remarks.

I sincerely hope you will be able to be with us on January 27. I will call you in the near future to ascertain your attendance. Of course, you can always call me or my colleague, Mr. Amir Morgan, who is taking the lead on coordinating this event, at (703) 243-8276.

Thank you for considering this request.

Sincerely Yours,


Steve Gunderson
Managing Trustee

Enclosure: Luncheon invitation

GLOBAL HEALTH COUNCIL

December 10, 1998

Sandra Thurman
Director
Office of National AIDS Policy
736 Jackson Place, NW, Suite 820
Washington, DC 20503

Dear Ms. ^{Sandy} Thurman:

On behalf of all the sponsoring organizations I would like to thank you for your participation at the World AIDS Day 1998 commemorative event. Your poignant remarks reached over 200 guests from major organizations and media outlets. By taking part in this event you contributed not only through your message which reached middle school and high school students but also in your continued commitment in the fight against AIDS.

The December 1st event at the National Press Club was an energizing starting point for the participating youth in working toward being a "Force for Change". It is our hope that they will continue open dialogue on AIDS issues and will seek out, use and share information to protect themselves and their peers. Young people have the power to change the course of this epidemic, and your participation in this and other World AIDS Day events was an important step along that path.

Once again, thank you for your commitment and participation.

Sincerely,



Nils Daulaire, M.D., M.P.H.
President & CEO

- As always, you were wonderful.

Sponsoring Organizations - AIDS National Interfaith Network, American Association for World Health, Family Health International, Global Health Council, Joint United Nations Programme on HIV/AIDS, Pan American Health Organization, United Nations Children's Fund, U.S. Agency for International Development, and the World Bank.



PROJECT HOPE
7500 OLD GEORGETOWN ROAD, SUITE 600
BETHESDA, MARYLAND 20814-6133
(301) 656-7401

FACSIMILE TRANSMITTAL

Date: December 3, 1998

To: Sara Holewinski Voice No. _____

Attn: Assistant to Sandra Thurman

From: Matthew Crow Fax No. 202-456-2438

Accounting Code: 552

Total number of pages in this fax: 3

If you do not receive all pages legibly,
PLEASE CALL (301) 656-7401
Project HOPE Fax Number: (301) 654-0629

Notes:

P R O J E C T
H O P E

Project HOPE
7500 Old Georgetown Road, Suite 600
Bethesda, Maryland 20814-6133
(301) 656-7401
Fax: (301) 654-0629

December 3, 1998

Ms. Sandra L. Thurman
Director
Office of National AIDS Policy
The White House
Washington, D.C. 20500

via facsimile

Dear Ms. Thurman:

During President Clinton's trip to China, Mrs. Clinton visited Project HOPE's Shanghai Children's Medical Center. Project HOPE was thrilled to be included in the First Lady's itinerary and we were grateful in helping her highlight the needs of China's children. As you will soon be in Africa evaluating child services, I thought it would be helpful to brief you on our activities there.

Since 1989, Project HOPE has been operating several successful HIV/AIDS health education programs in Malawi and Mozambique. In Malawi, we have been conducting education programs in HIV/AIDS prevention, family planning, child survival, Safe Motherhood, maternal anemia, malaria prevention and health care management involving private agricultural estates in nine districts. In Mozambique, HOPE is immunizing children and protecting mothers and newborns from neonatal tetanus, training community members to manage life-threatening diarrhea, educating the population and health care workers about preventing STDs and HIV/AIDS, and promoting child spacing.

Ms. Thurman, I would like to suggest that you consider being our guest at one of the Project HOPE program sites in either Malawi or Mozambique. The incredible challenges that the entire continent faces are exemplified there, but our methods for preventing and treating illnesses are making a difference. At your convenience, I would be happy to have you or your staff briefed on our activities, prior to your trip.

Sincerely,



Matthew Crow
Director, Government
and Corporate Affairs

Board of Directors: J. Patrick Barrett, Arthur J. Benvenuto, Arno Bohn, C. L. Clemente, Mrs. Edward N. Cole, William E. Coyne, Ph.D., Lodewijk J. R. de Vink, John W. Galiardo, Raymond V. Gilmarin, Maurice R. Greenberg, William L. Henry, Ben L. Holmes, Dr. Franz B. Humer, Robert A. Ingram, Richard J. Kogan, James T. Lenehan, Irwin Lerner, Edwin A. Locke, Jr., Fred W. Lyons, Jr., Mrs. Emil Mosbacher, Jr., Dayton Ogden, James E. Preston, Jetty E. Robertson, Ph.D., Mrs. John B. Rogan, Charles A. Sanders, M.D., Dr. J. Friedrich Sauerländer, John R. Stafford, William B. Walsh, Richard J. Whalen, Bradley A. J. Wilson.
Officers: Charles A. Sanders, M.D., Chairman; William B. Walsh, President and Chief Executive Officer; Jetty E. Robertson, Ph.D., Vice-Chairman; John W. Galiardo, Secretary; William L. Henry, Treasurer.

Project HOPE Health Care Programs

PROJECT HOPE

How HOPE Began

Identifiable to many by the S.S. HOPE, the world's first peacetime hospital ship, Project HOPE now conducts land-based medical training and health care education programs on five continents including North America. In 1958, the People-to-People Health Foundation, Inc. and its principal activity, Project HOPE, was founded by William B. Walsh, M.D. The mission of the organization is reflected in the name Health Opportunities for People Everywhere and in a very simple philosophy: Go only where invited, and help people help themselves. Since that time over 5,000 health care professionals and volunteer educators have worked for HOPE. Project HOPE now provides approximately \$100 million worth of resources to between 20-30 countries each year.

The Way HOPE Works

To support a program, Project HOPE actively facilitates partnerships between a number of organizations and individuals who make the program a success, combining expertise, both internal and external, to the host country. This may include government departments, health care institutions, health care professionals, and funding organizations. Each program partner agrees to contribute resources and expertise to achieve the designated health outcomes. The specific design and implementation of a program is undertaken by HOPE health care educators working with their host counterparts. Together, they address critical health care needs while educating others about the successful processes and procedures which can be adopted. Project HOPE's emphasis is on efficient, effective solutions for the long term.

The Scope of Health Care Programs

Although immediate humanitarian assistance is often an element of its activities, Project HOPE always stresses long-term, systemic solutions to health care problems. Programs cover the development of health care facilities and all aspects of education for nurses, doctors, engineers, and managers. Education initiatives include: health promotion, disease prevention, health care in the community, specialist hospital services, biomedical engineering, health care management, and policy. Project HOPE founded the *Health Affairs* journal in the U.S., which has a worldwide reputation for authoritative discussion on U.S. and international health policy. The journal is partnered with the Center for Health Affairs which provides research and analysis on health management and policy issues.

HOPE Around the World

The focus for Project HOPE programs is currently: Central and Eastern Europe, the NIS, China, Middle East, Southern Africa, and the Americas. HOPE has experience in over 70 countries around the world, and generally conducts programs in 20-30 countries in any one year.

Resourcing HOPE Programs

Every year HOPE raises approximately \$100 million of resources to support programs around the world. Over 90 percent of these resources are spent on programs. Funds are raised from government, multilateral organizations, multinational corporations, private institutions, and the general public. Until recently, fundraising and recruitment of health care professionals has been principally in the U.S., but since 1990, HOPE has developed new operations outside the U.S.: National Boards in Switzerland, Germany, UK, Hong Kong, and Japan.

International Headquarters

Project HOPE
Millwood, VA 22646
(800) 544-4673, (540) 837-2100
Fax: (540) 837-1813

Washington D.C. Office

7500 Old Georgetown Road, Suite 600
Bethesda, Maryland 20814
(301) 656-7401
Fax: (301) 654-0629

Helping people to help themselves...efficiently, effectively...for the long term.

Project HOPE Millwood, VA 22646 1(800) 544-HOPE (4673)

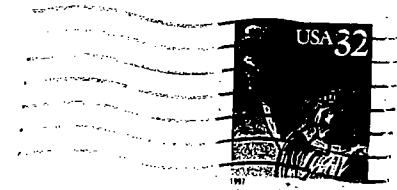
8/97

DEC 03 '98 13:42 No.004 P.03

PROJECT
HOPE

Project HOPE Executive ID:

Marty A Crossman,
Brett Lykins
2910 Barnwood Crossing
Duluth, GA 30097



Ms. Sandra L. Thurman
736 Jackson Place, N.W.
Washington, D.C. 20503



THE WHITE HOUSE
WASHINGTON

December 15, 1998

Venture Clubs of the Americas
Two Penn Center Plaza, Suite 1000
Philadelphia, PA 19102-1883

To whom it may concern:

It is with great pleasure that I give Brett Lykins my strong recommendation to receive the Venture Student Aid Award. During the time that I have known him, he has shown the intelligence, character, energy, and dedication that will make him an exemplary candidate.

I have watched Brett grow to become an outstanding leader in the AIDS community. While it is customary to highlight specific instances of excellence in a letter such as this, the nature of Brett's accomplishments establish that excellence is the norm. He has proven his competence and, therefore, gained trust and respect. The results of Brett's achievements regarding his dedication to the community, and his desire to take an active part in its development have made him an invaluable individual to the ongoing fight against this epidemic. He distinguished himself early on, and I have rarely seen a young person so qualified.

Brett has had the opportunity to observe and learn about the challenges and rewards of service in the community. He now seeks to gain the educational background that is so necessary to further his career and depth of knowledge. I am certain that his talents and intellect will thrive under such academic training.

In return, Brett can make a valuable contribution to your organization. His natural leadership abilities, inter-personal skills and considerable experience would make him a unique addition. I can think of no better candidate for the Venture Student Aid Award.

If you have any questions or need additional information, please do not hesitate to contact me at (202) 456-2437.

Sincerely,



Sandra L. Thurman
Director
Office of National AIDS Policy

November 9, 1998

Ms. Sandra L. Thurman
736 Jackson Place, N.W.
Washington, D.C.
20503

*Leader in AIDS
Sign it*

Dear Sandy:

It was great seeing you at the AIDS Walk. Glad you could make it – it was such a beautiful day.

As I briefly mentioned to you, Brett and I are working on getting him some scholarship money and he applied to the Venture Club of America last year and didn't get it but they said there was no reason he couldn't try again. He is needing letters of recommendation and thought maybe a letter from you might have some UMPF!!

CNN is doing a special on Brett to air on CNN education channel nationwide in all the schools – Brett will be spending that morning speaking at the CDC. What an honor. Hard to believe that we are facing college. I never thought we'd see the day. Who knows, maybe I'll have grandchildren too!!

The deadline for this recommendation letter and application is 12/31/98 but with the holidays fast approaching we wanted to go ahead and get it in.

Thanks a million for your support.

Fondly,

Marty Crossman & Brett Lykins



The Venture Clubs of the Americas

Student Aid Award for Physically Disabled Students

Official Application

Venturists—young working women dedicated to the ideal of service—present two Student Aid Awards annually.

Candidate Eligibility:

The Student Aid Award is intended for young, physically disabled individuals in need of further education. Applicants should be between 15 and 40 years old at the time of application. Each applicant should apply to the Venture Club within whose boundaries he/she resides. Applicants living outside the territorial limits of a Venture Club should apply to the nearest club. Financial need, and the capacity to profit from further education, are the two crucial criteria sought in each applicant.



Venture

Clubs of the Americas

Suite 1000, Two Penn Center Plaza, Philadelphia, PA 19102-1883 U.S.A.
Phone: (215) 557-9300 • FAX: (215) 568-5200 • siahq@voicenet.com

VENTURE STUDENT AID AWARD

Thank you for your interest in the Venture Student Aid Award. Please review the following information to help answer any questions you may have about this program.

What is a Venture Club? - A Venture club is an organization for young business and professional women who are concerned about their community and desire to take an active part in its development. Venture clubs are sponsored by Soroptimist International of the Americas, a worldwide organization of classified service clubs. Membership is drawn from women working in such fields as government, banking, nursing, laboratory technicians, secretaries and social workers.

Purpose of Venture Student Aid Award - These awards are designed to encourage and enhance the efforts of disabled individuals seeking further education to advance their status in life. Venturists feel that every person should have the opportunity for intellectual achievement, but recognize that the disabled person is often confronted by greater obstacles than the non-disabled person.

Candidate Eligibility - The Student Aid Award is intended for young, physically disabled individuals in need of further education. Applicants should be between 15 and 40 years old at the time of application. Applicants should contact the nearest Venture club for an application or send an application request to the above address. Financial need and the capacity to profit from further education are the two crucial criteria by which each applicant is judged.

Number of Awards - There are seven regional recipients. From these, one first-place and one second-place winner is chosen.

Amount of Award - At the July 1997 VCA Board of Governors meeting, the annual award amounts were increased. As of the 1997-1998 club year, the first-place winner will receive a cash award of \$5,000 (US) and the second-place winner a cash award of \$2,500 (US).

Deadline for Application - The deadline for submission of applications varies from club to club, so it is essential that you observe the club's deadline date located on the back of the application. To obtain an application from the above address, please send a self-addressed, stamped #10 business envelope with your request. Applications that are obtained from the above address must be received by December 31 each year in order to allow time for forwarding to nearest local club.

December 30, 1998



Ms. Sandra Thurman
Director
Office of National AIDS Policy
808 17th Street, N.W.
Room 820
Washington, DC 20006

Dear Ms. Thurman:

The beginning of a New Year is traditionally a time for reflection, renewal and hope. As 1999 dawns, I'd like to take this moment to reflect on some of the progress the world has made -- and the challenges that remain -- in the quest for a safe, accessible AIDS vaccine for use throughout the world.

Consider some of the highlights of 1998:

- Seventeen years into the epidemic, an AIDS vaccine candidate was finally launched into Phase III clinical trials.
- IAVI released its *Scientific Blueprint for AIDS Vaccine Development* and began implementing its strategies by investing \$9.1 million in two new International AIDS Vaccine Development Partnerships, significantly widening the product development pipeline.
- The World Bank formed a bank-wide task force with IAVI to consider new financial instruments to accelerate AIDS vaccine R & D for the world's poorest countries and assure their access to a vaccine once it is successfully developed.
- The seeds of national AIDS vaccine programs were planted and began flowering in South Africa, India and China.
- AIDS vaccine R & D commanded increased attention and resources around the world.

We at IAVI are particularly proud of our new Vaccine Development Partnerships, which we believe represent a new paradigm for public-private cooperation. Vaccines are being created specifically for use in developing countries, with scientists from developing countries (Kenya and South Africa) enlisted as full partners in the effort. Moreover, for the first time, intellectual property agreements have been negotiated to help ensure access to these vaccines at a reasonable price in developing countries should they prove efficacious. If we can make this model work, developing countries may never again be forced to wait 10 to 15 years for life-saving vaccines to trickle down to them.

IAVI

Organizationally, IAVI strengthened its staff and broadened its funding base this year, adding to our list of donors the government of the United Kingdom, the William H. Gates Foundation, Levi Strauss, Crusaid, the Elton John AIDS Foundation, the Belotsky Foundation, Angel Music, Ltd. and the UK's AIDS Crisis Trust. We also strengthened and deepened our partnership with the U.K.'s National AIDS Trust.

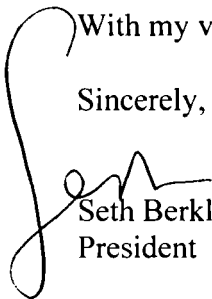
But 1998 was also a year of great loss. Worldwide, 2.5 million people died of AIDS, and 5.8 million were newly infected. Over 95% of those newly infected live in developing countries without access to the antiviral drugs that are prolonging lives in industrialized countries. We at IAVI suffered a personal loss when Dr. Mary Lou Clements-Mann, a cherished member of our Scientific Advisory Committee, and Dr. Jonathan Mann, an unyielding defender of human rights, perished aboard Swissair flight 111.

Clearly, our work is far from done. While 1998 saw the start of the first efficacy trials, scientists agree that we will need multiple trials, of multiple vaccine candidates, in many different parts of the world in order to succeed. While IAVI's funding base grew, we only had resources to finance two of the six to ten International Vaccine Development Partnerships envisioned by the *Scientific Blueprint*. IAVI's mission is to *ensure* vaccine development, and we do not have to launch all of the partnerships ourselves; still, the fact remains that many exciting approaches have not yet been funded.

In short, despite all the reasons for hope, the scientific, political and economic hurdles to developing an AIDS vaccine are enduring, as are the challenges of ensuring worldwide access to a vaccine once it is developed. As we begin the countdown to the Millenium, I ask that we all rededicate ourselves to the goal of developing safe, effective, accessible HIV vaccines for use throughout the world. We could leave no better legacy for future generations.

With my very best wishes to you and your loved ones,

Sincerely,



Seth Berkley, M.D.
President

Thank you for all you have done to
move the field forward. I hope
to see more of you in 1999!

Data Entry Form

Letter ID	Writer First Name	Writer Last Name	Received Date	Subject
11226	Arthur G.	Thacher	12/3/98	

☐ Response Required?

Response Type	Response Date	Responder ID	Responder Name	Action Promised
Action Completed	Action Date	Addressed To		
		Sandy		

Notes

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Sender's Organization	Sender's Street1	Sender's Street2
Prince George's Health Dept.	1701 McCormick Drive	
Sender's City	Sender's State	Sender's Zip
Largo	MD	20774

Dr. M. H. H.

Withdrawal/Redaction Marker

Clinton Library

DOCUMENT NO. AND TYPE	SUBJECT/TITLE	DATE	RESTRICTION
001a. memo	Arthur Thatcher to Sandra Thurman et al re: Grievances (Personal) [partial] (1 page)	11/25/1998	b(6)

COLLECTION:

Clinton Presidential Records
National AIDS Policy Office

OA/Box Number: 19398

FOLDER TITLE:

Correspondence - SLT - Incoming - 12/98 [1]

2018-0764-F

jm2088

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]
- P4 Release would disclose trade secrets or confidential commercial or financial information [(a)(4) of the PRA]
- P5 Release would disclose confidential advice between the President and his advisors, or between such advisors [(a)(5) of the PRA]
- P6 Release would constitute a clearly unwarranted invasion of personal privacy [(a)(6) of the PRA]

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]
- b(2) Release would disclose internal personnel rules and practices of an agency [(b)(2) of the FOIA]
- b(3) Release would violate a Federal statute [(b)(3) of the FOIA]
- b(4) Release would disclose trade secrets or confidential or financial information [(b)(4) of the FOIA]
- b(6) Release would constitute a clearly unwarranted invasion of personal privacy [(b)(6) of the FOIA]
- b(7) Release would disclose information compiled for law enforcement purposes [(b)(7) of the FOIA]
- b(8) Release would disclose information concerning the regulation of financial institutions [(b)(8) of the FOIA]
- b(9) Release would disclose geological or geophysical information concerning wells [(b)(9) of the FOIA]

Prince George's County Health Department

Memorandum

Date: November 25, 1998

To: Those Listed Below

From: Arthur G. Thacher, M.P.H., Health Officer

Re: Attached Response



[0019]

Mr. Maurice Evans has just written to the Prince George's County Health Department objecting to the outcome of his grievance against [REDACTED] (b)(6) and making new allegations against her and PWA, Inc. You were listed on the distribution list for his letter.

Attached is a copy of our response to his complaint for your file. If you have any questions regarding this matter please do not hesitate to contact me directly at 301-883-7834.

Thank you.

AGT:pc

Attachment

Ms. Sandy Thurman
Governor Parris Glendening
The Honorable Barbara A. Mikulski
Ms. Mary Ellen Barbera
Ms. Mary Joyce, RN
Mr. Fred Johnson
Liza Solomon, M.H.S., Dr. P.H.
Ms. Devi Ramey
Mr. Ron Lewis
Ms. Sabrina Sojourner
Mr. Joe Long

Withdrawal/Redaction Marker

Clinton Library

DOCUMENT NO. AND TYPE	SUBJECT/TITLE	DATE	RESTRICTION
001b. letter	Arthur Thatcher to Maurice Evans re: Grievances (Personal) [partial] (1 page)	11/25/1998	b(6)

COLLECTION:

Clinton Presidential Records
National AIDS Policy Office

OA/Box Number: 19398

FOLDER TITLE:

Correspondence - SLT - Incoming - 12/98 [1]

2018-0764-F

jm2088

RESTRICTION CODES

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

P1 National Security Classified Information [(a)(1) of the PRA]
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C. Closed in accordance with restrictions contained in donor's deed of gift.

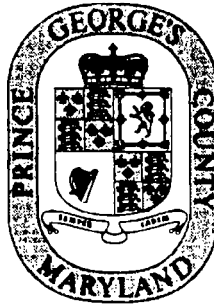
PRM. Personal record misfile defined in accordance with 44 U.S.C. 2201(3).

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Office of the
Health Officer



Prince George's County Health Department

1701 McCormick Drive
Largo, Maryland 20774-5310
301/883- 7834 (TDD) 301/883-7877
(FAX) 301/883-7876

November 25, 1998

Maurice Evans
P.O. Box 606
Frederick, MD 21702

[0016]

Dear Mr. Evans:

Thank you for your letter of November 20, 1998 regarding the outcome of your grievance concerning (b)(6) and your new allegations about PWA, Inc. and (b)(6) the current president.

As you will recall, your original grievance alleged that (b)(6) had made racially derogatory comments, apparently while you and she were traveling in the same vehicle. Upon receipt of your complaint, this agency conducted a grievance hearing which you and (b)(6) attended. Based on our findings from that hearing, I rescinded my nomination of (b)(6) for a voting seat on the Metropolitan Regional HIV Health Services Planning Council representing suburban Maryland.

At the time of the hearing we were unaware, and you did not make us aware, of any problems with the quality of service being provided by the organization PWA, Inc. We did seriously consider your suggestion that the contract with PWA, Inc. be terminated; however, after seeking legal advice, we concluded that termination of this contract was not in the best interest of the clients currently being served by the organization. That is to say, in addition to being unaware of any problems with the service that PWA, Inc. was delivering, canceling their contract nine months into the contract period would create a service gap which could not be filled before the start of the next grant cycle. You were advised, however, that the issues which you had raised about the personal behavior of (b)(6) would be considered by those reviewing applications for future funding.

In light of your new allegations, I have directed our contract monitoring staff to thoroughly evaluate the service provided by PWA, Inc. and to submit a report on their findings in December. In the interim, if you have additional specific complaints or factual information that you would like to have considered please submit it in writing to this agency, to the attention of Ms. Devi Ramey.

I would caution you for a second time, however, not to distribute confidential information or other material which is based on hearsay, innuendo or association that could be damaging to others. Our investigation and actions in this matter will be deliberate, fair and based on findings of fact.

Again, thank you for your letter and your concern.

Sincerely,



Arthur G. Thacher, M.P.H.
Health Officer

AGT:pc

Cc: Devi Ramey

Data Entry Form

Letter ID	Writer First Name	Writer Last Name	Received Date	Subject
11227	Joey B.	Pressley	12/3/98	

☐ Response Required?

Response Type	Response Date	Responder ID	Responder Name	Action Promised

Action Completed	Action Date	Addressed To
		Sandy

Notes

--

Sender's Organization	Sender's Street1	Sender's Street2
Harlem United	123-125 West 124th Street	
Sender's City	Sender's State	Sender's Zip
New York	NY	10027

Dr. M. J. [Signature]



November 19, 1998

Sandra Thurman, Director
White House Office of National AIDS Policy
808 17th Street, NW
Washington, DC 20006

Dear Ms. Thurman:

Board of Directors

Katey Assem
Chairperson

Octavio Liriano, MD
Vice Chairperson

Tony James
Secretary

G. Tony Hinds, RN, MPH

John Wright

On October 31st, 1998, the African-American Gay and Bisexual Caucus convened at the United States Conference on AIDS in Dallas, Texas. Our purpose was to discuss the HIV/AIDS State of Emergency that exists in the Black community and what we must do to turn the tide against increasing HIV infection and death in our community.

Those present applauded the Black HIV/AIDS advocacy communities, the Congressional Black Caucus, the Congressional Leadership and the President's Administration for their successful collaboration in achieving the historic \$156 million HIV/AIDS Initiative targeting services and agencies in the African-American community.

As you know, the Centers for Disease Control and Prevention (CDC) continues to identify AIDS as the leading cause of death in Black men between the ages of 25-44. The vast majority of those individuals are Gay and Bisexual. While significant progress has been made in reducing the rate of new HIV infections in the White Gay community, infections among Black Gay and Bisexuals continue unabated. Due to homophobia in the Black community and racism in the larger society, funding to initiatives targeting Black Gay and Bisexual men's programs has not been well supported. This must change and we ask for your support in addressing this neglect.

As the Administration implements the African-American HIV/AIDS Initiative, we request that specific language targeting services and programs to Black Gay and Bisexual men be included in the implementation plans, program guidance and request for proposals (RFPs) to determine the allocation of these critical resources.

Targeting such services to Black Gay and Bisexual men is extremely important to the community my organization serves. Based on current statistics, men who have sex with other men represents the second largest mode of HIV transmission in Harlem (following intravenous drug use). The program, which I

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123-125 West 124th Street New York, NY 10027
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Program Office

306 Lenox Avenue New York, NY 10027
Phone: (212) 803-2850 Fax: (212) 803-2899

Protecting Our Community's Future



manage, is one of the few expressly targeting Gay and Bisexual men in the Harlem community.

As the President's Administration prepares its year 2000 budget, we strongly urge that you do all that you can to include increased support for targeted funds to the African-American community. In that increased support, it is imperative that Black Gay and Bisexual men are targeted for service delivery.

Sincerely,

Joey B. Pressley
Director of
Outreach, Education and Prevention

Board of Directors

Katey Assem
Chairperson

Octavio Liriano, MD
Vice Chairperson

Tony James
Secretary

G.Tony Hinds, RN, MPH

John Wright

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Protecting Our Community's Future



GOLDEN KEY INTERNATIONAL HEADQUARTERS
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404.377.2400 ■ Fax: 404.373.7033 ■ Web Site: <http://gknhs.gsu.edu>

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TMP Worldwide

December 11, 1998

Ms. Sandra Thurman
Director
White House Office on National AIDS Policy
736 Jackson Place NW
Washington, D.C. 20503

Dear Sandy,

Thank you for attending the recent Golden Key National Honor Society reception at Howard University. The Society is pleased and proud to have you as one of our newest honorary members.

Without dedicated leaders like you, important issues such as AIDS awareness and education would not be at the level it is today. Golden Key looks forward to helping you raise this awareness even more. Please feel free to contact me any time at 404-377-2400 if the Society can ever be of any assistance to you.

I hope we can get together during the holiday season!

Sincerely,

A handwritten signature in cursive script that reads "James W. Lewis".

James W. Lewis
Founder and Executive Director

Cc: Joan K. Nelson, Golden Key Council President

Enclosure

Withdrawal/Redaction Marker

Clinton Library

DOCUMENT NO. AND TYPE	SUBJECT/TITLE	DATE	RESTRICTION
002. packet	re: Application for Associate Director for Legislative Policy and Analysis at the National Institute of Health (Non-selection) [Personally Identifiable Information] (12 pages)	12/03/1998	b(6)

COLLECTION:

Clinton Presidential Records
National AIDS Policy Office

OA/Box Number: 19398

FOLDER TITLE:

Correspondence - SLT - Incoming - 12/98 [1]

2018-0764-F

jm2088

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]
- P4 Release would disclose trade secrets or confidential commercial or financial information [(a)(4) of the PRA]
- P5 Release would disclose confidential advice between the President and his advisors, or between such advisors [(a)(5) of the PRA]
- P6 Release would constitute a clearly unwarranted invasion of personal privacy [(a)(6) of the PRA]

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]
- b(2) Release would disclose internal personnel rules and practices of an agency [(b)(2) of the FOIA]
- b(3) Release would violate a Federal statute [(b)(3) of the FOIA]
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