

FOIA MARKER

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Collection/Record Group: Clinton Presidential Records
Subgroup/Office of Origin: National AIDS Policy Office
Series/Staff Member: Kristine Gebbie
Subseries:

OA/ID Number: 3770
FolderID:

Folder Title:
June Chron Files 1994 [1]

Stack:	Row:	Section:	Shelf:	Position:
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Withdrawal/Redaction Sheet

Clinton Library

DOCUMENT NO. AND TYPE	SUBJECT/TITLE	DATE	RESTRICTION
001. resume	[Personally Identifiable Information] [Partial] (1 page)	00/00/0000	b(6)
002. resume	[Personally Identifiable Information] [Partial] Duplicate of 001 (1 page)	00/00/0000	b(6)
003. letter	From: Kristine Gebbie; re: Support Research; [Personal] (Partial) (1 page)	06/09/1994	b(6)
004. letter	To: Disseminate Everywhere Appropriate; [Personal] (Partial) (2 pages)	04/20/1994	b(6)

COLLECTION:

Clinton Presidential Records
National AIDS Policy Office
Kristine Gebbie
OA/Box Number: 3770

FOLDER TITLE:

June Chron Files 1994 [1]

2018-0756-F

ip4822

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]

*National Aids Policy
Kristine Leblanc*

50F9

**JUNE, JULY, & AUGUST 1994 CHRON
FILES AND THE 1994 & 1993
CALENDARS**

ENCLOSURES FILED OVERSIZE ATTACHMENTS

3770

NARA 2629

JUNE 1994 CHRON FILES

JUN - 1 1994

THE WHITE HOUSE

Dear Christine -

My thanks to you, and
to the Genesee Valley Nurses
Association - for the
T-shirt and good wishes.
Nurses are clearly an
important part of the HIV effort
in the Rochester area - good work!
Christine

Christine P. Kulp
Executive Director
Genesee Valley Nurses Association
1441 East Avenue
Rochester, NY 14610



Genesee Valley
Nurses Association

Uniting Nurses of the Genesee Valley Community
• 1441 East Avenue • Rochester, NY 14610 • 716-256-1610

May 20, 1994

TO: Kristine Gebbie

Please accept this small token of our appreciation.

Sincerely,

A handwritten signature in blue ink that reads 'Christine P. Kulp /s'.

Christine P. Kulp
Executive Director

JUN - 1 1994

THE WHITE HOUSE

Mike -

Thank you for sharing
Blood Whingers - I did
appreciate your work &
the others. I'm so glad you're
home, & going back to work
next week... Keep up the
fight -
Kurtine

Michael E. Reynolds
1964 Rodney Drive
Los Angeles, California 90027



MAY 31 1994

Kristine
I hope you enjoy this
book, given the subject may
be the wrong word.
You'll find me on pages
28-30, 140.

I came home Monday
night, even walking a
bit, like an old man.
Going back to work at
least part-time on the 6th

Best
Nuts

JUN - 1 1994

THE WHITE HOUSE

Dear Teresa —

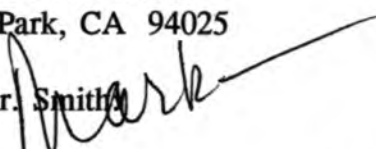
Thank you for the copy of
Nursing in Montana - I'm always
glad to learn more about
our profession. My best wishes
for nursing, and for HIV services
& prevention, in Montana.
Kristine Gelline

Teresa K. Henry, R.N.C., M.S.
Montana State University
Missoula Upper Division
U of M, North Corbin Hall
Missoula, MT 59812

THE WHITE HOUSE
WASHINGTON

June 1, 1994

Mark Smith, M.D., M.B.A.
Executive Vice President
Kaiser Family Foundation
2400 Sand Hill Road
Menlo Park, CA 94025

Dear Dr. Smith 

As you may know, arrangements are well under way for the meeting on *HIV Prevention, Looking Back, Looking Ahead*, to be held at my office on June 30, 1994, from 10:00 A.M. to 5:00 P.M. Invitations have gone out to a group of representatives of national associations of health care providers. I hope that this meeting will give us a good opportunity to share with the participants their ideas on how to make prevention a part of clinical practice.

The incorporation of HIV/AIDS prevention must be as much a part of primary care clinical efforts as are strategies to eliminate smoking and alcohol use. The complexities of behaviors that put people at risk for HIV/AIDS may cause a reluctance on the part of some clinicians to deal with this issue. We hope to be able to address this and other concerns in this area during the meeting.

The meeting to be held on June 30 will give representatives of national health professional organizations an opportunity to share ideas on how to structure the strategies in this area. As National AIDS Policy Coordinator and a clinician, it is my belief that the issue of HIV/AIDS prevention must be addressed in the primary care setting as part of a multi-faceted effort to stop the spread of HIV.

I wanted to take this opportunity to thank you for supporting this effort of the Harvard AIDS Institute and the University of California at San Francisco. I know that you and I agree that we must work closely with clinicians to fully address the HIV prevention needs of all Americans.

I hope that you will be able to join this group at my office, 750 17th Street, N.W., 6th Floor Conference Room, Washington, D.C., 20002 on June 30th. If you have any questions concerning this meeting, or if you would like to attend, please contact Harvey J. Makadon,

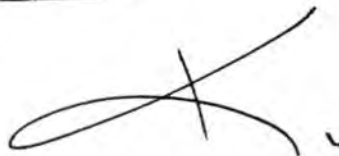
Page 2 - Mark D. Smith, M.D., M.B.A.

M.D. at (617) 735-3996, or Carlos Vélez, J.D. of my office at (202) 690-6248 by June 16, 1994.

Sincerely,



Kristine M. Gebbie, R.N., M.N.
National AIDS Policy Coordinator

Hi - we're assuming you'll be here —
and thanks for breakfast Saturday.
I hope you & Langston had a great
day —


THE WHITE HOUSE
WASHINGTON

June 1, 1994

Jonathan Silin, Ed.D.
43 Meeting House Lane
Amagansett, NY 11930

Dear Mr. Silin:

It is my pleasure to invite you to join Mark Smith, M.D. of the Kaiser Family Foundation, Harvey J. Makadon, M.D., of the Harvard AIDS Institute, Thomas J. Coates, Ph.D., of the Center for AIDS Prevention Studies at the University of California at San Francisco, and me for an important meeting on *HIV Prevention, Looking Back, Looking Ahead*, to be held at my office on June 30, 1994, from 8:30 A.M. to 5:00 P.M.

This project, which has been recently funded by the Kaiser Family Foundation, is taking a comprehensive look at HIV prevention efforts. One immediate goal will be to develop strategies to incorporate HIV prevention into primary care practice. To accomplish this, project staff will develop guidelines, educational strategies and policy initiatives on how to expand clinical practice to include HIV prevention. These strategies must be based on a better understanding of how clinical efforts in this area work and how they can become more effective.

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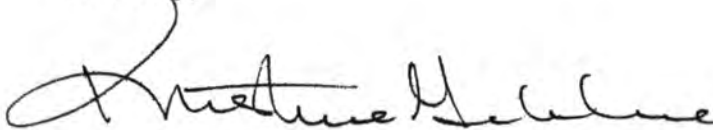
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Page 2 - Mr. Silin

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Sincerely,

A handwritten signature in cursive script, appearing to read "Kristine M. Gebbie". The signature is fluid and connected, with a large initial "K" and a long, sweeping underline.

Kristine M. Gebbie, R.N., M.N.
National AIDS Policy Coordinator

JUN - 1 1994

THE WHITE HOUSE

Dear Mike -

Thank you for the opportunity
to visit the AIDS Vaccine
Evaluation Unit last month.

I especially appreciated the
opportunity to meet with
your volunteers! Keep up
the good work - Christine

UNIVERSITY OF
ROCHESTER
MEDICAL CENTER

STRONG MEMORIAL HOSPITAL
SCHOOL OF MEDICINE AND DENTISTRY
SCHOOL OF NURSING

INFECTIOUS DISEASES UNIT

Michael C. Keefer, M.D.

May 17, 1994

Kristine Gebbie
National AIDS Policy Coordinator
Washington, DC
FAX: 202-632-1096

Dear Kristine:

I am writing to review our goals for your visit to the University of Rochester AIDS Vaccine Evaluation Unit on Friday, May 20, 1994. As you know, we have been an NIH-supported clinical research unit since 1988 and primarily perform phase I studies of candidate preventive AIDS vaccines in healthy volunteers who are at low risk of acquiring HIV-1 infection. We have established a close working relationship with our community and have recruited nearly 300 volunteers to date. Although the general Rochester community has heard many times from us how important this research is, they perceive a relative lack of publicity for the AIDS vaccine effort initiated at a national level.

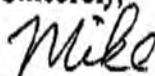
I am concerned that much of our community has not been stimulated to see our effort in a national/global context and does not truly realize the overall importance of their role in this research. Therefore, if possible, I would like you to comment upon the following:

1. The U of R AVEU/Rochester community is one of only five places in the country that is heavily involved in preventive AIDS vaccine research.
2. The development of AIDS vaccines is a top priority in the field of AIDS research. (In fact, a representative from the World Bank stated in a keynote address at the 1993 Berlin World AIDS Conference that perhaps preventive AIDS vaccination should be the only priority in AIDS research.)
3. The Rochester community, through its participation in AIDS vaccine research, has been a leader in helping to control this world-wide epidemic. In addition, each and every volunteer should realize that they are truly appreciated by all of us who want to see the spread of AIDS stopped.

I feel that your comments will be able to add credibility to the effort being undertaken in Rochester (and the four other AVEG clinical sites) and will help in keeping the search for an effective AIDS vaccine moving with all due speed.

Again, thank you for agreeing to visit Rochester.

Sincerely,



Michael C. Keefer, M.D.
Assistant Professor of Medicine

601 Elmwood Avenue, Box 689
Rochester, New York 14642
(716) 275-5871

RECEIVED
MAY 17 1994

THE WHITE HOUSE
WASHINGTON

June 1, 1994

Jeff Stryker
Center for AIDS Prevention Studies
UCSF
74 New Montgomery Street, Suite 600
San Francisco, CA 94105

Dear Mr. Stryker:

It is my pleasure to invite you to join Mark Smith, M.D. of the Kaiser Family Foundation, Harvey J. Makadon, M.D., of the Harvard AIDS Institute, Thomas J. Coates, Ph.D., of the Center for AIDS Prevention Studies at the University of California at San Francisco, and me for an important meeting on *HIV Prevention, Looking Back, Looking Ahead*, to be held at my office on June 30, 1994, from 8:30 A.M. to 5:00 P.M.

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The incorporation of HIV/AIDS prevention must be as much a part of primary care clinical efforts as are strategies to eliminate smoking and alcohol use. The complexities of behaviors that put people at risk for HIV/AIDS may cause a reluctance on the part of some clinicians to deal with this issue. We hope to be able to address this and other concerns in this area during the meeting.

I hope that you will be able to join this group at my office, 750 17th Street, N.W., 6th Floor

Page 2 - Mr. Stryker

Conference Room, Washington, D.C., 20002 on June 30th. If you have any questions concerning this meeting, or if you would like to attend, please contact Harvey J. Makadon, M.D. at (617) 735-3996, or Carlos Vélez, J.D. of my office at (202) 690-6248 by June 16, 1994.

Sincerely,

A handwritten signature in cursive script, appearing to read "Kristine", written in dark ink.

Kristine M. Gebbie, R.N., M.N.
National AIDS Policy Coordinator

THE WHITE HOUSE
WASHINGTON

June 1, 1994

Harvey V. Fineberg, MD, Ph.D.
Dean, Harvard School of Public Health
Building 3, Room 1005
677 Huntington Avenue
Boston, MA 02115

Dear Dr. Fineberg:

It is my pleasure to invite you to join Mark Smith, M.D. of the Kaiser Family Foundation, Harvey J. Makadon, M.D., of the Harvard AIDS Institute, Thomas J. Coates, Ph.D., of the Center for AIDS Prevention Studies at the University of California at San Francisco, and me for an important meeting on *HIV Prevention, Looking Back, Looking Ahead*, to be held at my office on June 30, 1994, from 8:30 A.M. to 5:00 P.M.

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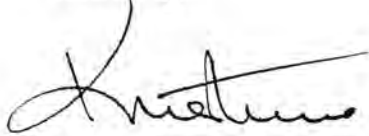
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Page 2 - Dr. Fineberg

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Kristine M. Gebbie, R.N., M.N.
National AIDS Policy Coordinator

THE WHITE HOUSE
WASHINGTON

June 1, 1994

Daniel D. Federman, MD
Dean, Medical Education
Harvard Medical School
25 Shattuck Street
Boston, MA 02115

Dear Dr. Federman:

It is my pleasure to invite you to join Mark Smith, M.D. of the Kaiser Family Foundation, Harvey J. Makadon, M.D., of the Harvard AIDS Institute, Thomas J. Coates, Ph.D., of the Center for AIDS Prevention Studies at the University of California at San Francisco, and me for an important meeting on *HIV Prevention, Looking Back, Looking Ahead*, to be held at my office on June 30, 1994, from 8:30 A.M. to 5:00 P.M.

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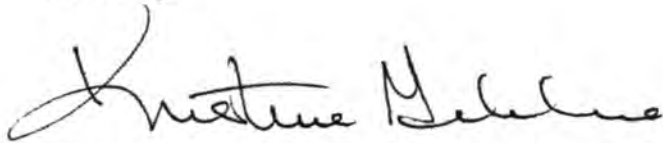
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Page 2 - Dr. Federman

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Sincerely,

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Kristine M. Gebbie, R.N., M.N.
National AIDS Policy Coordinator

THE WHITE HOUSE
WASHINGTON

June 1, 1994

Haile T. Debas, MD
University of California/San Francisco
Office of the Dean
School of Medicine
513 Parnassus Avenue S224
San Francisco, CA 94143-0410

Dear Dr. Debas:

It is my pleasure to invite you to join Mark Smith, M.D. of the Kaiser Family Foundation, Harvey J. Makadon, M.D., of the Harvard AIDS Institute, Thomas J. Coates, Ph.D., of the Center for AIDS Prevention Studies at the University of California at San Francisco, and me for an important meeting on *HIV Prevention, Looking Back, Looking Ahead*, to be held at my office on June 30, 1994, from 8:30 A.M. to 5:00 P.M.

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Page 2 - Dr. Debas

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Kristine M. Gebbie, R.N., M.N.
National AIDS Policy Coordinator

THE WHITE HOUSE

WASHINGTON

June 1, 1994

Neal M. Hughes
800 Sannoner Avenue, 11-B
Florence, AL 35630

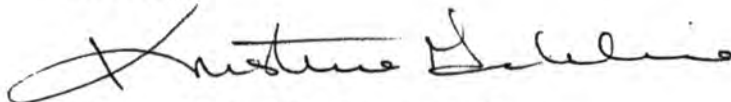
Dear Mr. Hughes:

Thank you for your letter of January 9, and please accept my sincere apologies for the delay in responding to you. Your letter stressed some important issues about the need for expanding our education about sexual behavior and the importance that all Americans make healthy choices in their life. Preserving ones health is an important goal of our prevention program at the Centers For Disease Control, the television and radio public service announcements that were released in January are only one part of this process.

I hope that you will share your concerns with people in your community and that you will help to educate as many people as you can, on the important of healthy choices and on the importance of AIDS prevention.

Again, thank you for writing.

Sincerely,

A handwritten signature in dark ink, appearing to read "Kristine Gebbie", with a stylized flourish at the end.

Kristine M. Gebbie, R.N., M.N.
National AIDS Policy Coordinator

JAN 13 1994

9 January 1994
800 Sannoner AV 11-B
FLORENCE AL 35630

*Steve -
hand special
And run
please draft
Ezology
for
delay*

Ms. Kristine Gebbie
Nat. AIDS Policy Coordinator
AIDS Policy Office
750 17th ST, NW #1060
WASHINGTON DC 20503

Dear Ms. Gebbie,

I saw you on a repeat of a C-Span broadcast last week, and wanted to write you about a few observations I made about the content of several phone calls which you took while on the air.

The area of discussion was (specifically) the new series of TV advertisements urging the usage of latex condoms sponsored by your office. Several callers made the leap of logic that if one encourages sex partners to use condoms, then one is encouraging them to have sexual relations. As you are undoubtedly aware, the very vocal right wing of Fundamentalism consider it their bounden duty to not only be missionaries for their branch of Christianity, but to endeavor to also establish a nation based on their interpretation of Biblical laws and injunctions.

I realize this aspect of their religion, and respect them; however, that does not mean that I agree with them -- I merely offer you that they are acting out of sincere belief that they are the literal agents of holiness. Many people do not understand this, and equate their actions with those of Stalin or Hitler.

However, there is also a political right wing in this country that has been set adrift by the defeat of the social agenda set into motion by Reagan, Robertson, Falwell, et al.. I believe that it is these people -- with their largely intact "think tanks" and "forums" who provide much fuel for those who feel they are acting in a religious manner. They are, in short, being the puppet masters for the religious right without their puppets realizing the fact.

To move on, Ms. Gebbie, may I tell you that I was frankly shocked at several callers' statements about HIV, AIDS, and what I found behind the statements. It was not so much callers' ignorance which amazed and shocked me, but rather the fact that several callers repeated the same pat phrase of "special rights" made infamous during the Amendment 2 referendum in Colorado. Why would people believe that state and local health departments would not track HIV infection the same as any other STD -- unless they naturally equate AIDS and HIV with homosexuality, and believe homosexuals to be a class of people with "special rights"? The spread of the phrase only shows the degree to which a political battle cry has become "fact" to those who help to keep homophobia institutionalized through their religion.

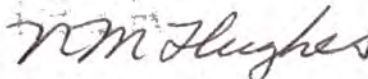
And since many are naturally supportive of "religious" pronouncements in this country, Ms. Gebbie, what I see is a right wing political movement manipulating a segment of the Fundamentalist Movement, who in turn influence many others by the "sanctity" of their statements!

I do not envy you your job one iota, Ms. Gebbie! May I say that you show remarkable restraint when hearing all sort of statements which make my blood boil!

Might I offer you a suggestion for a further television advertisement? I believe that an appearance on television by yourself, the Surgeon General, and the President or Vice-President might be most appropriate. You all could merely state the **facts**: the number of people infected, how many are dead, and go into the demographics of how many are gay, IV drug users, or their sex partners, etc. Then you all could present the mechanism of transmission of HIV, and then how to avoid transmitting and acquiring the virus -- with the emphasis on an exclusive relation with one person proven uninfected or abstaining from sexual relations. Then you could proceed to say that 'traditionally', this has been the teaching of most of our religions. **However**, for those of you to whom abstinence or monogamy is unacceptable, or your partner's or your own status is questionable or positive, then the latex condom offers a very high degree of protection for either partner when having vaginal or anal intercourse... Or something along those lines.

I wish you much success in your office, Ms. Gebbie, and once again wish to commend you on your great civility!

Very truly yours,

A handwritten signature in cursive script, appearing to read "NM Hughes".

Neal M. Hughes

THE WHITE HOUSE
WASHINGTON

June 1, 1994

Thomas Coates, Ph.D.
Professor of Medicine and Director
Center for AIDS Prevention Studies
University of California, San Francisco
74 New Montgomery Street, Suite 600
San Francisco, CA 94105

Dear Dr. Coates:

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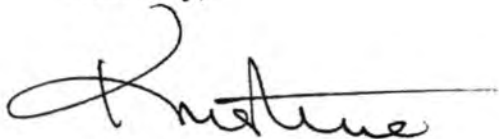
I wanted to take this opportunity to thank you for all your work in the area of behavioral research. It is of the work of individuals like yourself and the staff at CAPS that we will be able to strengthen the work we do on HIV prevention.

I hope that you will be able to join this group at my office, 750 17th Street, N.W., 6th Floor Conference Room, Washington, D.C., 20002 on June 30th. If you have any questions concerning this meeting, or if you would like to attend, please contact Harvey J. Makadon,

Page 2 - Thomas Coates, Ph.D.

M.D. at (617) 735-3996, or Carlos Vélez, J.D. of my office at (202) 690-6248 by June 16, 1994.

Sincerely,

A handwritten signature in cursive script, appearing to read "Kristine", followed by a horizontal line.

Kristine M. Gebbie, R.N., M.N.
National AIDS Policy Coordinator

THE WHITE HOUSE
WASHINGTON

June 1, 1994

Bluma Appel, Chairperson
Board of Directors
Canadian Foundation for AIDS Research
165 University Avenue Suite 800
Toronto, Ontario
Canada

Dear Bluma:

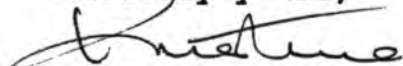
Thank you for your proposal to conduct a "Canada/United States Economic Summit on HIV/AIDS." I am glad you had an opportunity to discuss it with my staff and meet with Mr. B. J. Stiles, the President of the National Leadership Coalition on AIDS while you were visiting the United States.

I share your concern about the economic impact of HIV/AIDS on our countries as well as internationally. The Canadian Foundation for AIDS Research (CANFAR) proposal suggests that a meeting with the business community from the United States and Canada will lead to greater involvement by the private sector in HIV/AIDS research and prevention programs for their workforce and for populations that are not reached by current government or community-based organizations.

After careful review of this proposal, I cannot encourage you to go forward with it at this time. The proposal needs to better define the problem, with appropriate supporting data, the goals and the steps needed to achieve the goals. The proposal, as drafted, is in the very early stage of development and would benefit from significant revision and expansion to bolster its main premise, that could come from a variety of sources, including academia and the business community. Perhaps, working on such an initiative for Canada, before including the United States would be a good idea.

We must all work together to prepare for the impact of the AIDS epidemic and help to ensure that appropriate strategies for business are developed and implemented. The President and I are committed to a public-private partnership, working with business and labor to prevent the spread of HIV.

Sincerely yours,



Kristine M. Gebbie, RN, MN
National AIDS Policy Coordinator

THE WHITE HOUSE
WASHINGTON

June 1, 1994

Howard Libman, MD
Beth Israel Hospital
330 Brookline Avenue
Boston, MA 02215

Dear Dr. Libman:

It is my pleasure to invite you to join Mark Smith, M.D. of the Kaiser Family Foundation, Harvey J. Makadon, M.D., of the Harvard AIDS Institute, Thomas J. Coates, Ph.D., of the Center for AIDS Prevention Studies at the University of California at San Francisco, and me for an important meeting on *HIV Prevention, Looking Back, Looking Ahead*, to be held at my office on June 30, 1994, from 8:30 A.M. to 5:00 P.M.

This project, which has been recently funded by the Kaiser Family Foundation, is taking a comprehensive look at HIV prevention efforts. One immediate goal will be to develop strategies to incorporate HIV prevention into primary care practice. To accomplish this, project staff will develop guidelines, educational strategies and policy initiatives on how to expand clinical practice to include HIV prevention. These strategies must be based on a better understanding of how clinical efforts in this area work and how they can become more effective.

The meeting to be held on June 30 will give representatives of national health professional organizations an opportunity to share ideas on how to structure the strategies in this area. As National AIDS Policy Coordinator and a clinician, it is my belief that the issue of HIV/AIDS prevention must be addressed in the primary care setting as part of a multi-faceted effort to stop the spread of HIV.

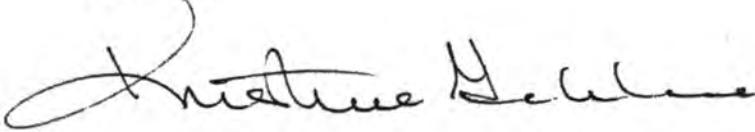
The incorporation of HIV/AIDS prevention must be as much a part of primary care clinical efforts as are strategies to eliminate smoking and alcohol use. The complexities of behaviors that put people at risk for HIV/AIDS may cause a reluctance on the part of some clinicians to deal with this issue. We hope to be able to address this and other concerns in this area during the meeting.

I hope that you will be able to join this group at my office, 750 17th Street, N.W., 6th Floor

Page 2 - Dr. Libman

Conference Room, Washington, D.C., 20002 on June 30th. If you have any questions concerning this meeting, or if you would like to attend, please contact Harvey J. Makadon, M.D. at (617) 735-3996, or Carlos Vélez, J.D. of my office at (202) 690-6248 by June 16, 1994.

Sincerely,

A handwritten signature in cursive script, appearing to read "Kristine Gebbie".

Kristine M. Gebbie, R.N., M.N.
National AIDS Policy Coordinator

JUN - 1 1994

THE WHITE HOUSE

Dear Susan
Thank you for the T-shirt,
and the warm wishes! I
enjoyed my stay in Rochester,
and the conversations with
the community. My best wishes
to the AIDS committee, and the
whole Diocese of Rochester.
Kristine Gelineo

Susan Hauptfleisch
Episcopal Diocese of Rochester
935 East Avenue
Rochester, NY 14607



EPISCOPAL DIOCESE of ROCHESTER

935 EAST AVENUE

ROCHESTER, N.Y. 14607

May 20, 1994

Dear Kristine,

Welcome to Rochester! Please
accept this small token of
appreciation from the AIDS Committee,
Department of Social Ministry.

Thank you for all your hard
work & advocacy!

Best wishes,

Susan Hauptfleisch,
Chair

THE WHITE HOUSE
WASHINGTON

June 2, 1994

Dear Cape Cod's Night at the Chef's Table Dinner Guests:

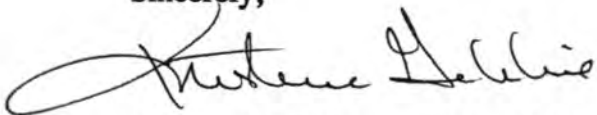
I am very pleased to learn about your successful Third Annual event to help provide services to people living with AIDS in your community. I am sorry that I cannot be with you tonight and share in what I know will be a mouth-watering evening of great food and great people to benefit an important need in your community.

We must all work together in our local communities to address the needs of people living with AIDS and their families. We strive for the highest level of quality of life for our loved ones. Community services such as the Provincetown AIDS Support Network and the Cape Cod AIDS Council are vital links to providing needed services in your community.

I recall my visit to The Cape last year and was very impressed with your community's dedication to help those in need and to set the kind of example we would want every community in our country to follow.

President Clinton and I are committed to doing our part to meet the needs of the HIV/AIDS community in our country and it is heartwarming to know that you are all doing your part in our efforts to stop AIDS.

Sincerely,

A handwritten signature in dark ink, appearing to read "Kristine Gebbie", with a large, sweeping initial "K".

Kristine M. Gebbie, R.N., M.N.
National AIDS Policy Coordinator

GERRY E. STUDDS
TENTH DISTRICT, MASSACHUSETTS

COMMITTEE ON MERCHANT MARINE
AND FISHERIES
CHAIRMAN

SUBCOMMITTEE ON ENVIRONMENT
AND NATURAL RESOURCES
CHAIRMAN

COMMITTEE ON ENERGY
AND COMMERCE

SUBCOMMITTEE ON HEALTH
AND THE ENVIRONMENT

SUBCOMMITTEE ON TRANSPORTATION
AND HAZARDOUS MATERIALS



Congress of the United States
House of Representatives

May 10, 1994

WASHINGTON
237 CANNON BUILDING
WASHINGTON, DC 20515-2110
202-225-3111
SOUTH SHORE 1-800-794-9911

QUINCY
1212 HANCOCK STREET
QUINCY, MA 02189

BROOKTON
FEDERAL BUILDING
188 MAIN STREET
BROOKTON, MA 02401

PLYMOUTH
225 WATER STREET, SUITE 401
PLYMOUTH, MA 02305

CAPE COD AND ISLANDS 1-800-870-2828

HYANNIS
148 MAIN STREET
HYANNIS, MA 02601

Dear Kristine:

Your visit to Cape Cod last summer was a moving experience for the many people you met at the Provincetown AIDS Support Group and the Cape Cod AIDS Council. These two organizations are currently collaborating on their third annual fundraising dinner, "Cape Cod's Night at the Chef's Table," which takes place on June 2, and asked whether I thought you might be willing to furnish them with a letter of support.

The proceeds from the dinner will be used to fund programs that provide meals, transportation and other critical services to people living with AIDS on Cape Cod. I know it would mean a lot to the participants to have a brief statement recalling your visit to the Cape and thanking the patrons and volunteers for their support.

Enclosed is the information we have received from the organizers, which describes the event and mentions some of those whom you may wish to acknowledge by name. In order for your letter to be included in the materials for the event, it must be received by ~~Wednesday, May 25~~. It should be sent to Mr. Douglas M. Brooks, Program Director, Provincetown AIDS Support Group, Post Office Box 1522, Provincetown, MA 02657.

Please feel free to contact Mark Agrast in my office if you have any questions regarding this request.

As always, I am grateful for your consideration and support.

With kind regards.

Sincerely,

Gerry Studds

Hon. Kristine N. Gebbie
AIDS Policy Coordinator
Department of Health and Human Services
Room 738G - Hubert H. Humphrey Building
200 Independence Avenue, S.W.
Washington, DC 20210

Enclosures



FAX from the office of
CONGRESSMAN GERRY E. STUDDS
237 Cannon Building
Washington, D.C.

Date: 5-11-94

To: Kristine Gebbie

From: Gerry Studds

Number of pages which follow: 3

Comments:

Andrew
draft letter

For further information: Phone (202)225-3111 Fax (202)225-2212

South Shore -- 1-800-794-9911

225 Water Street 1212 Hancock Street 166 Main Street
Plymouth, MA 02360 Quincy, MA 02169 Brockton, MA 02401

Cape Cod and the Islands -- 1-800-870-2626

146 Main Street
Hyannis, MA 02601

JUN - 2 1994

THE WHITE HOUSE

Paul -

Thanks for the words of
encouragement - & sorry

I didn't know about the
party in time to drop by!

Keep up the good fight -

Christina



A Positive Party

Sponsored By
THE "HIV" COMMUNITY

"Explore Your Positive Side"

Dupont Plaza Hotel
May 25th, 1994
5:00 - 9:00 P.M.

No Cover ♥ Cash Bar

*Kristine -
were behind
you - to heck
w/ us
Carol
Friedman*



The "HIV" Community
P.O. Box 21723
Washington, DC
20009-1723



Mr. Andrew E. Barrer Ph. D.
Executive office of the President
750 17th St. NW, Suite 1060
Washington, DC
20503

JUN - 2 1994

THE WHITE HOUSE

Dear Kelly -

Thank you so much for
taking time to share The Bridge
for Kids with me - you and
your small staff are filling
an important role in the San
Francisco response to HIV!
Keep up the good work, and stay
in touch. Kristine

Kelly A. Smith
Program Director
The Bridge for Kids
45 Franklin
Suite 303
San Francisco, CA 94102

JUN - 2 1994

THE WHITE HOUSE

Burt —

my phone #'s

202-632-1090 (o)
202-387-0015 (h)

Columbia U speech outline
attached (sorry I don't have
a complete text)

hope to see you soon

Eustine



RECEIVED
MAY 23 1991

5/16

Cancer Center

Burton J. Lee, III, MD
Medical Director

Darling

Thanks for the great invite
to the W.H. mess for lunch - but
you must be crazy! I was fired
by those guys and they have been
quite vindictive about a lot of
things. I wouldn't jeopardize your
deal there! A rain check? Or
somewhere else?

I'd love to get a copy of your
speech at P+S during School on 5/19.

P+S is my school - & I am
doing more & more there as time goes
by. The Dean - Pander - is a
great guy - and Mary Munding
& I are good friends! I think she
is absolutely the best, & please
give her a hug from me.

The best - except for you
that is - I hope all goes well
for you -

See you sometime soon -
your buddy -

P.S. Let me know your bus.
phone # - & at home -



JUN - 2 1994

THE WHITE HOUSE

Dear Miriam -
Thank you for sharing a
copy of Living with AIDS -
I appreciated the chance
to read it.
Best wishes in your
continuing work.
Preston

Dr. Miriam E. Cameron
220 Dakota South
Golden Valley, MN 55416
(612) 546-0644

JUN - 2 1994

THE WHITE HOUSE

Sheila -
I hope you know who
"Sue" is - she gave me the note
on the back of my card!) on a recent
trip to Helena —
All the best —
Kristene Gebelin

Ms. Sheila Burke
U.S. Senate
Room F-230
Capitol Building
Washington, D.C. 20510
224-3135

THE WHITE HOUSE
WASHINGTON

June 2, 1994

Harvey J. Makadon, M.D.
Harvard AIDS Institute
Beth Israel Hospital
330 Brookline Avenue
Boston, MA 02215

Dear Dr. Makadon:

As you may know, arrangements are well under way for the meeting on *HIV Prevention, Looking Back, Looking Ahead*, to be held at my office on June 30, 1994, from 10:00 A.M. to 5:00 P.M. Invitations have gone out to a group of representatives of national associations of health care providers. I hope that this meeting will give us a good opportunity to share with the participants their ideas on how to make prevention a part of clinical practice.

The incorporation of HIV/AIDS prevention must be as much a part of primary care clinical efforts as are strategies to eliminate smoking and alcohol use. The complexities of behaviors that put people at risk for HIV/AIDS may cause a reluctance on the part of some clinicians to deal with this issue. We hope to be able to address this and other concerns in this area during the meeting.

The meeting to be held on June 30 will give representatives of national health professional organizations an opportunity to share ideas on how to structure the strategies in this area. As National AIDS Policy Coordinator and a clinician, it is my belief that the issue of HIV/AIDS prevention must be addressed in the primary care setting as part of a multi-faceted effort to stop the spread of HIV.

I wanted to take this opportunity to thank you all the work you have done to make this project a reality. I fully agree with you that our efforts in HIV prevention must include active participation from clinicians at all levels. The meeting on June 30th will give us a chance to begin discussions that, I hope, will ultimately lead to

I look forward to seeing you at the meeting at my office, 750 17th Street, N.W., 6th Floor Conference Room, Washington, D.C., 20002 on June 30th. If you have any issues that you would like to discuss prior to the meeting, please feel free to contact me at (202) 632-1090

Page 2 - Harvey J. Makadon, M.D.

or Carlos Vélez, J.D. of my office at (202) 260-1359.

Sincerely,

A handwritten signature in black ink, appearing to read 'Kristine M. Gebbie'. The signature is fluid and cursive, with a large initial 'K' and a long, sweeping underline.

Kristine M. Gebbie, R.N., M.N.
National AIDS Policy Coordinator

THE WHITE HOUSE
WASHINGTON

June 2, 1994

Mr. Reid Rooney
580 Walnut Street
Cincinnati, Ohio 45202

Dear Mr. Rooney:

Thank you for your comments on the Prevention Marketing Initiative sponsored by the Centers for Disease Control and Prevention (CDC). This Administration is committed to stopping the spread of HIV, especially among our youth. The age group with the greatest increase of new cases of AIDS is the 18-24 year old group; the majority of these infections occurred during adolescence. Best information indicates that 72 percent of all high school seniors have engaged in sexual activity and 19 percent of those have had 4 or more sexual partners.

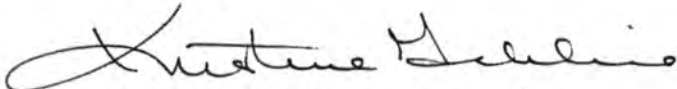
Although abstinence is the most effective way of preventing transmission, the campaign is also aimed at those who, because of personal decisions or circumstances, have chosen to be sexually active. The decision to promote safer sexual practices through the use of condoms is supported by research released in 1993 showing that when condoms are used correctly and consistently, they are extremely effective in preventing transmission. The research showed that transmission occurred primarily in those instances where the condoms were used incorrectly or were not used for every sexual act. To obtain more information on this research, please contact the CDC National AIDS Clearinghouse at (800) 458-5231.

The CDC initiative is intended to reinforce young people who have not become sexually active to postpone sexual activity as long as possible. It will encourage young people who engage in sex but have not tried condoms to try them and it will encourage those who use condoms to do so correctly. A national task force will analyze the effectiveness of the various components of the initiative, including the public service announcements.

As a parent, I understand the concerns you may have about our young people being at risk for HIV/AIDS. I am concerned that our young people are not receiving the information about changing behaviors that may place them at risk. For those who have chosen to be sexually active, it is our responsibility as adults to provide the means necessary for young men and women to protect their lives. I believe this Prevention Marketing Initiative is a necessary step in our endeavor to end the HIV/AIDS epidemic.

Again, thank you for your input. I hope that you will continue to communicate your concerns with me.

Sincerely,



Kristine M. Gebbie, R.N., M.N.
National AIDS Policy Coordinator

Reid Rooney
580 Walnut Street, Cincinnati, OH 45202



Stush

APR 20 1994

April 8, 1994

Dear Kristine:

In no way am I in support
of paying taxes to fund a love-
making scene to front-end and
AIDS condom commercial. Get the
sex out! Yes AIDS is terrible,
but don't sell the news through titillation.

I venture to guess that the air-
brushed atmosphere portrayed in the
commercial makes dangerous activities
more, rather than less, likely to
occur.

Reid Rooney

THE WHITE HOUSE
WASHINGTON

June 2, 1994

The Honorable Andrew Cuomo
Assistant Secretary for
Community Planning and Development
Department of Housing and Urban Development
Washington, D.C. 20410

Dear Mr. Cuomo:

I want to thank you for meeting with my staff and I this past Tuesday. The meeting was constructive and I was pleased with the Department of Housing and Urban Development's (HUD) commitment to provide appropriate, affordable housing to people living with HIV/AIDS.

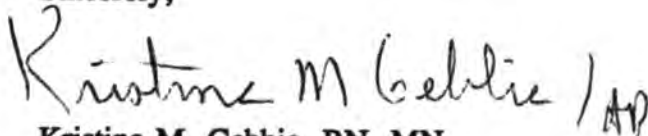
Including an HIV/AIDS housing provider on each local community planning board will be a positive step towards assuring that the housing needs of those living with HIV/AIDS are heard. In addition, I believe it will send a clear and heartening message to the AIDS community about HUD's commitment to addressing their concerns.

As we discussed, monitoring of resources expended for HIV/AIDS housing is of paramount importance to the AIDS community. Historically, the experience of the AIDS community has been that local communities can not or will not address the housing needs of people living with HIV/AIDS. Tracking of funds for HIV/AIDS housing should facilitate HUD's ability to provide the necessary oversight to guarantee an equitable allocation of resources to the AIDS community.

I look forward to continued communication and collaboration with your office on HIV/AIDS issues. Please feel free to contact me or our lead staff person on housing issues, Tim Fox, should you have any questions.

Thank you.

Sincerely,

A handwritten signature in dark ink, reading "Kristine M. Gebbie" followed by a stylized monogram or initials.

Kristine M. Gebbie, RN, MN
National AIDS Policy Coordinator

THE WHITE HOUSE
WASHINGTON

June 2, 1994

Mr. Mel Blinson
8709 Danbury Circle
Raleigh, North Carolina 27613

Dear Mr. Blinson:

Thank you for your comments on the Prevention Marketing Initiative sponsored by the Centers for Disease Control and Prevention (CDC). This Administration is committed to stopping the spread of HIV, especially among our youth. The age group with the greatest increase of new cases of AIDS is the 18-24 year old group; the majority of these infections occurred during adolescence. Best information indicates that 72 percent of all high school seniors have engaged in sexual activity and 19 percent of those have had 4 or more sexual partners.

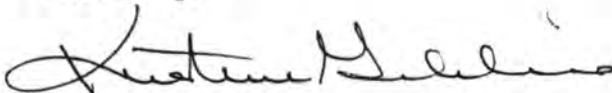
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As a parent, I understand the concerns you may have about our young people being at risk for HIV/AIDS. I am concerned that our young people are not receiving the information about changing behaviors that may place them at risk. For those who have chosen to be sexually active, it is our responsibility as adults to provide the means necessary for young men and women to protect their lives. I believe this Prevention Marketing Initiative is a necessary step in our endeavor to end the HIV/AIDS epidemic.

Again, thank you for your input. I hope that you will continue to communicate your concerns with me.

Sincerely,



Kristine M. Gebbie, R.N., M.N.
National AIDS Policy Coordinator

RECEIVED
MAY 23 1994
5-16-94

Dear M. Gebbie

Stanley

On May 13 between 9:30 and 10:00pm. on WTVD I saw something that I could not believe. A commercial that was paid for with our tax money displayed a condom walking across a room like a puppet. Someone seems to think that this commercial will reduce aids.

When will we get over our victim mentality? Why does everyone feel that it is not their fault ... they are only a victim? No one wants to admit that they were wrong any more.

If people would go ahead and admit that sex outside of marriage is wrong, aids would not spread any more and our tax money would not be wasted. They continue to act as though they were innocent and a few of our leaders play along with them. You would think that our leaders would be smarter.

Condoms are not the cure for wrong doing. They will not solve all of our problems.

A few people do wrong and the rest of us are highly embarrassed

when our families and friends view what is on our television screen. I guess that I will have to purchase a remote control or sit real close to the T.V. so that I can cut it off more quickly.

What will they do next? Will they have a gun walk across the room and tell us that it kills people as if we did not know? Give me a break!

Department of Health ... please do not waste any more of our hard-earned money on this nonsense.

I have mailed a copy of this to the newspaper and to the T.V. station that I referred to above.

Mel Blinson
8709 Danbury Circle
Raleigh, N.C. 27613

home 919-847-3371
office 919-859-5088

June 2, 1994

Ms. Ruth L. Juhlin
Apartment 505-B
820 West Mill
Carbondale, Illinois 62901

Dear Ms. Juhlin:

Thank you for your comments on the Prevention Marketing Initiative sponsored by the Centers for Disease Control and Prevention (CDC). This Administration is committed to stopping the spread of HIV, especially among our youth. The age group with the greatest increase of new cases of AIDS is the 18-24 year old group; the majority of these infections occurred during adolescence. Best information indicates that 72 percent of all high school seniors have engaged in sexual activity and 19 percent of those have had 4 or more sexual partners.

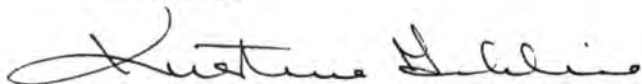
Although abstinence is the most effective way of preventing transmission, the campaign is also aimed at those who, because of personal decisions or circumstances, have chosen to be sexually active. The decision to promote safer sexual practices through the use of condoms is supported by research released in 1993 showing that when condoms are used correctly and consistently, they are extremely effective in preventing transmission. The research showed that transmission occurred primarily in those instances where the condoms were used incorrectly or were not used for every sexual act. To obtain more information on this research, please contact the CDC National AIDS Clearinghouse at (800) 458-5231.

The CDC initiative is intended to reinforce young people who have not become sexually active to postpone sexual activity as long as possible. It will encourage young people who engage in sex but have not tried condoms to try them and it will encourage those who use condoms to do so correctly. A national task force will analyze the effectiveness of the various components of the initiative, including the public service announcements.

As a parent, I understand the concerns you may have about our young people being at risk for HIV/AIDS. I am concerned that our young people are not receiving the information about changing behaviors that may place them at risk. For those who have chosen to be sexually active, it is our responsibility as adults to provide the means necessary for young men and women to protect their lives. I believe this Prevention Marketing Initiative is a necessary step in our endeavor to end the HIV/AIDS epidemic.

Again, thank you for your input. I hope that you will continue to communicate your concerns with me.

Sincerely,



Kristine M. Gebbie, R.N., M.N.
National AIDS Policy Coordinator

MAY 26 1994

Stander

Ruth L. Juhlin
820 W Mill Apt 505B
Carbondale, IL 62901

April 30, 1994

Christine Gebbie
Director of the Office of AIDS Policy
750 17th St. NW
Washington, DC 20050

Dear Ms. Gebbie,

I am writing in regard to CDC's latest TV ads which promote condoms as a means of preventing, among other diseases, AIDS. The ads include a condom character that jumps out of a drawer, tiptoes across a bedroom floor and jumps into bed with a couple. These ads give a false sense of security in regard to the effectiveness of condoms.

My major complaint about these ads is the information that is painfully absent from your campaign. What you fail to communicate are the statistics established by studies which indicate that condoms are only 67% effective in preventing leakage of HIV-sized particles. (R.F. Carey, Sexually Transmitted Diseases, Vol. 6, 1993.) Specific researchers such as the late Bruce Voeller, M.D. of the University of Southern California, Dr. Susan Weller of the University of Texas Medical Branch in Galveston and Isabelle de Vincenzi, M.D. of France's Hopital National de Saint-Maurice have all published significant writings indicating that condoms do not consistently prevent transmission of the HIV virus, even when used as directed in a monogamous relationship.

Why have we the public not heard this from CDC? How can you in good conscience promote a product as a means of AIDS prevention that has such a poor success rate? You are misleading the public by not giving all the facts. If people knew about the risks in using condoms they might abstain from intercourse all together. If your goal is to prevent the spread of AIDS perhaps you should promote other means beside condoms, namely abstinence. It's the only 100% sure method of preventing AIDS and STDS. In spite of the "Safe Sex" campaign, high school pregnancies are on the rise. Kids are not using condoms more, just having intercourse more. If married adults, as documented in Isabelle de Vincenzi's research, cannot use condoms properly, how can you expect uncommitted teenagers to use them properly?

With all due respect for the work the CDC has done in the past, it seems that the CDC is being overrun by activists who promote condom use. Please present facts to the public about the ineffectiveness of condoms, rather than skewing statistics to support the liberal point of view. People's lives are at stake.

Sincerely,

Ruth L. Juhlin

Ruth L. Juhlin
Nursing Program
Southeast Missouri State University

THE WHITE HOUSE
WASHINGTON

June 2, 1994

David and Kelsea Waite
6712 Gold Dust Trail
Dallas, Texas 75252

Dear Mr. and Mrs. Waite:

Thank you for your comments on the Prevention Marketing Initiative sponsored by the Centers for Disease Control and Prevention (CDC). This Administration is committed to stopping the spread of HIV, especially among our youth. The age group with the greatest increase of new cases of AIDS is the 18-24 year old group; the majority of these infections occurred during adolescence. Best information indicates that 72 percent of all high school seniors have engaged in sexual activity and 19 percent of those have had 4 or more sexual partners.

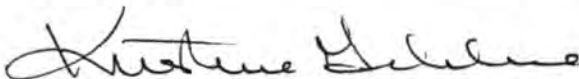
Although abstinence is the most effective way of preventing transmission, the campaign is also aimed at those who, because of personal decisions or circumstances, have chosen to be sexually active. The decision to promote safer sexual practices through the use of condoms is supported by research released in 1993 showing that when condoms are used correctly and consistently, they are extremely effective in preventing transmission. The research showed that transmission occurred primarily in those instances where the condoms were used incorrectly or were not used for every sexual act. To obtain more information on this research, please contact the CDC National AIDS Clearinghouse at (800) 458-5231.

The CDC initiative is intended to reinforce young people who have not become sexually active to postpone sexual activity as long as possible. It will encourage young people who engage in sex but have not tried condoms to try them and it will encourage those who use condoms to do so correctly. A national task force will analyze the effectiveness of the various components of the initiative, including the public service announcements.

As a parent, I understand the concerns you may have about our young people being at risk for HIV/AIDS. I am concerned that our young people are not receiving the information about changing behaviors that may place them at risk. For those who have chosen to be sexually active, it is our responsibility as adults to provide the means necessary for young men and women to protect their lives. I believe this Prevention Marketing Initiative is a necessary step in our endeavor to end the HIV/AIDS epidemic.

Again, thank you for your input. I hope that you will continue to communicate your concerns with me.

Sincerely,



Kristine M. Gebbie, R.N., M.N.
National AIDS Policy Coordinator

RECEIVED
MAY 23 1994

David and Kelsa Waite
6712 Gold Dust Trail
Dallas, TX. 75252

May 12, 1994

Standard

Kristine Gebbie
Ofc. of AIDS Policy
750 17th., N.W.
Washington, D.C. 20550

Dear Ms. Gebbie,

We would like to express our grievous concern about the medically inaccurate and irresponsible safe sex message being federally funded and promoted by the CDC. Condoms do not insure safe sex as protection from pregnancy nor AIDS. The statistics from Dr. Susan Weller's analysis of 11 U.S. HIV studies to gauge condom effectiveness show condoms only 69 percent effective in preventing heterosexual HIV transmission. In addition, Dr. Isabelle deVincenzi whose research was used to validate CDC's condom campaign, says in effect that it is "inappropriate to apply her study involving committed monogamous adult couples to teen-agers and sexually active singles."

Therefore to suggest that condoms provide safe sex is a gross untruth. It is a game of Russian roulette into which this irresponsible message of condom use is leading our misguided populace. Has pregnancy or the occurrence of AIDS diminished since the safe sex message began? No, common sense tells you that you do not facilitate a behavior you are trying to control. Are foolish people going to continue to have unprotected sex? Of course they are, but a strong message of abstinence as the only 100 percent protection from pregnancy or AIDS is the most responsible message to deliver. Why settle for second best because some will refuse to act wisely? CDC's condom message is knowingly putting people's lives at risk. The only wise and true emphasis is abstinence. The consequences and accountability are gravely serious, which if honestly and bravely considered would grind the safe sex message to a screeching halt.

Sincerely, (

Kelsa Waite
David Waite

David and Kelsa Waite

THE WHITE HOUSE
WASHINGTON

June 2, 1994

MEMORANDUM TO JOEL KLEIN, Deputy White House Counsel

FROM: Kristine M. Gebbie, R.N., M.N. *Kristine Gebbie / AB*
National AIDS Policy Coordinator

SUBJECT: Presidential HIV/AIDS Advisory Council

President Clinton has selected most of the members for the Council, and they have been contact over two weeks ago to begin their vetting process. I understand that the needed forms have not yet been sent to the perspective members.

I am eager to have the vetting process move along as quickly as possible so that we can call the first meeting of the Council by the end of June.

I understand that someone on your staff would be assigned to coordinate this process. Could you please have that person work with Andrew Barrer from my staff and keep him abreast of the progress. If you need any staff support in this process, I would be happy to offer our assistance.

If you have any questions regarding this matter, please feel free to call Andrew Barrer or me at 632-1090. Thank you.

cc: Phil Lader, Deputy Chief of Staff
Tom Shea, Presidential Personnel

THE WHITE HOUSE
WASHINGTON

June 2, 1994

Edgar A. Boone, M.D.
Joy L. Boone, M.D.
401 Church Street
Herminie, Pennsylvania 15637

Dear Drs. Boone:

Thank you for your comments on the Prevention Marketing Initiative sponsored by the Centers for Disease Control and Prevention (CDC). This Administration is committed to stopping the spread of HIV, especially among our youth. The age group with the greatest increase of new cases of AIDS is the 18-24 year old group; the majority of these infections occurred during adolescence. Best information indicates that 72 percent of all high school seniors have engaged in sexual activity and 19 percent of those have had 4 or more sexual partners.

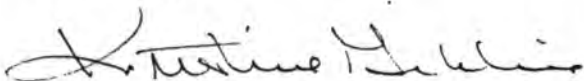
Although abstinence is the most effective way of preventing transmission, the campaign is also aimed at those who, because of personal decisions or circumstances, have chosen to be sexually active. The decision to promote safer sexual practices through the use of condoms is supported by research released in 1993 showing that when condoms are used correctly and consistently, they are extremely effective in preventing transmission. The research showed that transmission occurred primarily in those instances where the condoms were used incorrectly or were not used for every sexual act. To obtain more information on this research, please contact the CDC National AIDS Clearinghouse at (800) 458-5231.

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As a parent, I understand the concerns you may have about our young people being at risk for HIV/AIDS. I am concerned that our young people are not receiving the information about changing behaviors that may place them at risk. For those who have chosen to be sexually active, it is our responsibility as adults to provide the means necessary for young men and women to protect their lives. I believe this Prevention Marketing Initiative is a necessary step in our endeavor to end the HIV/AIDS epidemic.

Again, thank you for your input. I hope that you will continue to communicate your concerns with me.

Sincerely,



Kristine M. Gebbie, R.N., M.N.
National AIDS Policy Coordinator

RECEIVED
MAY 23 1994

**EDGAR A. BOONE, M.D.
JOY L. BOONE, M.D.**

401 CHURCH STREET
HERMINIE, PA 15637
(412) 446-5571

Standard 1

May 2, 1994

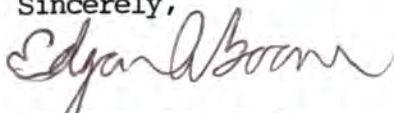
Ms. Kristine Gebbie
750 Seventeenth Street Northwest
Washington, DC 20050

Dear Ms. Gebbie:

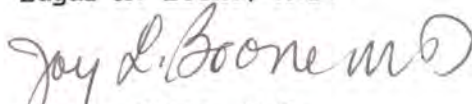
My husband and I are family physicians who also have two small children. We are very concerned about the government's policy regarding AIDS education featuring television advertisements with pictures of condoms and young people. We feel that the best protection against AIDS is abstinence until marriage with a partner who has been tested premaritally. Anything short of this is selling our country short, and we are opposed to our tax dollars being used in this way.

Thank you very much for your consideration.

Sincerely,



Edgar A. Boone, M.D.



Joy L. Boone, M.D.

JLB/cw

THE WHITE HOUSE
WASHINGTON

June 2, 1994

Richard Marlink, MD
Executive Director
Harvard AIDS Institute
8 Story Street
Cambridge, MA 02115

Dear Dr. Marlink:

It is my pleasure to invite you to join Mark Smith, M.D. of the Kaiser Family Foundation, Harvey J. Makadon, M.D., of the Harvard AIDS Institute, Thomas J. Coates, Ph.D., of the Center for AIDS Prevention Studies at the University of California at San Francisco, and me for an important meeting on *HIV Prevention, Looking Back, Looking Ahead*, to be held at my office on June 30, 1994, from 8:30 A.M. to 5:00 P.M.

This project, which has been recently funded by the Kaiser Family Foundation, is taking a comprehensive look at HIV prevention efforts. One immediate goal will be to develop strategies to incorporate HIV prevention into primary care practice. To accomplish this, project staff will develop guidelines, educational strategies and policy initiatives on how to expand clinical practice to include HIV prevention. These strategies must be based on a better understanding of how clinical efforts in this area work and how they can become more effective.

The meeting to be held on June 30 will give representatives of national health professional organizations an opportunity to share ideas on how to structure the strategies in this area. As National AIDS Policy Coordinator and a clinician, it is my belief that the issue of HIV/AIDS prevention must be addressed in the primary care setting as part of a multi-faceted effort to stop the spread of HIV.

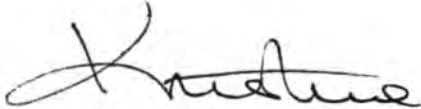
The incorporation of HIV/AIDS prevention must be as much a part of primary care clinical efforts as are strategies to eliminate smoking and alcohol use. The complexities of behaviors that put people at risk for HIV/AIDS may cause a reluctance on the part of some clinicians to deal with this issue. We hope to be able to address this and other concerns in this area during the meeting.

I hope that you will be able to join this group at my office, 750 17th Street, N.W., 6th Floor

Page 2 - Dr. Marlink

Conference Room, Washington, D.C., 20002 on June 30th. If you have any questions concerning this meeting, or if you would like to attend, please contact Harvey J. Makadon, M.D. at (617) 735-3996, or Carlos Vélez, J.D. of my office at (202) 690-6248 by June 16, 1994.

Sincerely,

A handwritten signature in cursive script, appearing to read "Kristine", written in dark ink.

Kristine M. Gebbie, R.N., M.N.
National AIDS Policy Coordinator

JUN - 2 1994

THE WHITE HOUSE

Dear Nicolas

Thank you for sharing the materials on HIV and Latins in Massachusetts - I'm also circulating it among my staff, for their education.

It was good to see you -
best wishes in your work
~~trust~~

Clinton Presidential Records Digital Records Marker

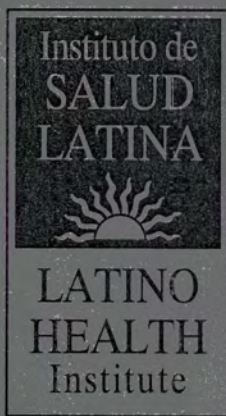
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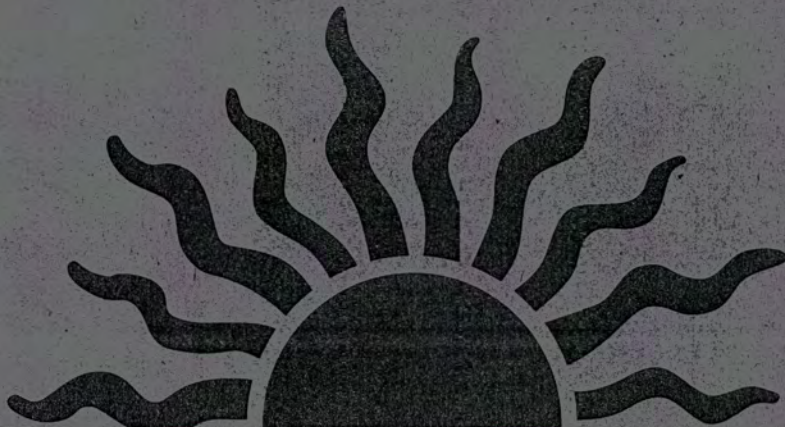
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Promoting the Health of
Our Community

8pgs



Promoting the
Health of Our
Community



THE WHITE HOUSE
WASHINGTON

June 3, 1994

Tracy Richardson, RN
4060 Palso Verdes Court
Trotuwood, Ohio 45426

Dear Ms. Richardson:

Thank you for your input on the need to protect nurses and other health care workers who may be exposed to HIV in occupational settings. As you know, this has been a subject of intense debate since the beginning of the epidemic, especially since the documented cases of transmission from a dentist to his patients in Florida a few years ago.

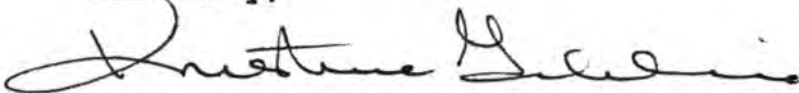
As a nurse, I understand the concerns of fellow nurses and health care workers about the dangers of getting exposed to HIV at work while caring for others. I have been a longtime proponent of universal precautions to prevent the spread of HIV from patient to practitioner and vice versa. The guidelines developed by the Occupational Safety and Health Administration (OSHA) have been instrumental in limiting the risk of exposure in health care settings. However, it is also critical that all health care workers implement these guidelines on a consistent basis for all medical interventions.

The items that you mention in your communication do not guarantee that HIV exposure will be eliminated. I am not in favor of implementing measures that may give practitioners and the public a false sense of security when it has been proven that universal precautions, and the use of currently-available technology in all instances will protect those who have to engage in invasive procedures.

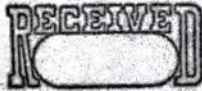
Finally, I also believe that we shall continue to search for new and better ways to provide first class health care to all while protecting health care workers.

Thank you again for your input. I hope that you will continue sharing your concerns with me.

Sincerely,



Kristine M. Gebbie, R.N., M.N.
National AIDS Policy Coordinator



MAY 31 1994

Dear Ms. Gebbie,

Along with other registered nurses, I am growing increasingly alarmed at the degree to which nurses are not being adequately protected — particularly in the clinical setting — from people who carry the HIV virus or have AIDS. There is now persuasive evidence that "universal precautions" are not adequate.

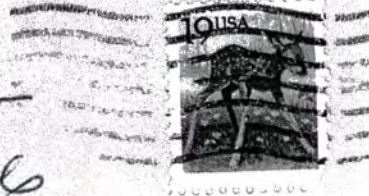
We urge you to put the full force of your office into insuring that: (1) HIV becomes a reportable disease, in keeping with sound preventive and treatment policies; (2) definitive studies about the potential of HIV to be spread by aerosol are completed and publicized; (3) operating rooms be equipped with special air filters and O.R. nurses be provided with special face shields and other impenetrable protection; (4) premarital, prenatal, and neonatal testing be mandatory; (5) routine testing of all patients and healthcare workers be mandatory.

I am concerned that the rights of nurses are being abrogated in the name of "political correctness" and call upon you to respect the health and lives of America's frontline healthcare workers, the 2.4 million registered nurses in the United States.

Sincerely,

Kathy Richardson R.N.

Richardson
Name
4060 Palms Verdes Ct
Address
Westwood, Ohio 45426
City State Zip



Kristine M. Gebbie, R.N., M.N.
National AIDS Policy Coordinator
750 17th N.W., Suite 1060
Washington, D.C. 20503



CLINTON LIBRARY PHOTOCOPY

THE WHITE HOUSE
WASHINGTON

June 3, 1994

Susan Montauk, M.D.
Associate Professor of Clinical Family Medicine
Department of Family Medicine
University of Cincinnati
P.O. Box 670582
Cincinnati, OH 45267

Dear Dr. Montauk:

It is my pleasure to invite you to join Mark Smith, M.D. of the Kaiser Family Foundation, Harvey J. Makadon, M.D., of the Harvard AIDS Institute, Thomas J. Coates, Ph.D., of the Center for AIDS Prevention Studies at the University of California at San Francisco, and me for an important meeting on *HIV Prevention, Looking Back, Looking Ahead*, to be held at my office on June 30, 1994, from 8:30 A.M. to 5:00 P.M.

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The meeting to be held on June 30 will give representatives of national health professional organizations an opportunity to share ideas on how to structure the strategies in this area. As National AIDS Policy Coordinator and a clinician, it is my belief that the issue of HIV/AIDS prevention must be addressed in the primary care setting as part of a multi-faceted effort to stop the spread of HIV.

The incorporation of HIV/AIDS prevention must be as much a part of primary care clinical efforts as are strategies to eliminate smoking and alcohol use. The complexities of behaviors that put people at risk for HIV/AIDS may cause a reluctance on the part of some clinicians to deal with this issue. We hope to be able to address this and other concerns in this area during the meeting.

Page 2 - Susan Montauk, M.D.

I hope that you will be able to join this group at my office, 750 17th Street, N.W., 6th Floor Conference Room, Washington, D.C., 20002 on June 30th. If you have any questions concerning this meeting, or if you would like to attend, please contact Harvey J. Makadon, M.D. at (617) 735-3996, or Carlos Vélez, J.D. of my office at (202) 690-6248 by June 16, 1994.

Sincerely,

A handwritten signature in cursive script, appearing to read "Kristine M. Gebbie".

Kristine M. Gebbie, R.N., M.N.
National AIDS Policy Coordinator

THE WHITE HOUSE

WASHINGTON

June 3, 1994

Mindy Ganett, RN
54 Wilson Road
Platte City, MO 64079

Dear Ms. Ganett:

Thank you for your input on the need to protect nurses and other health care workers who may be exposed to HIV in occupational settings. As you know, this has been a subject of intense debate since the beginning of the epidemic, especially since the documented cases of transmission from a dentist to his patients in Florida a few years ago.

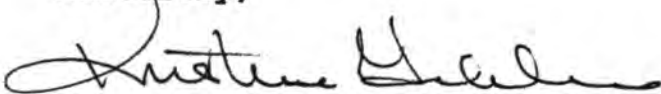
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The items that you mention in your communication do not guarantee that HIV exposure will be eliminated. I am not in favor of implementing measures that may give practitioners and the public a false sense of security when it has been proven that universal precautions, and the use of currently-available technology in all instances will protect those who have to engage in invasive procedures.

Finally, I also believe that we shall continue to search for new and better ways to provide first class health care to all while protecting health care workers.

Thank you again for your input. I hope that you will continue sharing your concerns with me.

Sincerely,



Kristine M. Gebbie, R.N., M.N.
National AIDS Policy Coordinator

RECEIVED
MAY 18 1994

Dear Ms. Gebbie,

Along with other registered nurses, I am growing increasingly alarmed at the degree to which nurses are not being adequately protected — particularly in the clinical setting — from people who carry the HIV virus or have AIDS. There is now persuasive evidence that "universal precautions" are not adequate.

We urge you to put the full force of your office into insuring that: (1) HIV becomes a reportable disease, in keeping with sound preventive and treatment policies; (2) definitive studies about the potential of HIV to be spread by aerosol are completed and publicized; (3) operating rooms be equipped with special air filters and O.R. nurses be provided with special face shields and other impenetrable protection; (4) premarital, prenatal, and neonatal testing be mandatory; (5) routine testing of all patients and healthcare workers be mandatory.

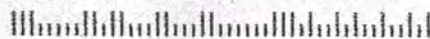
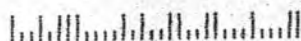
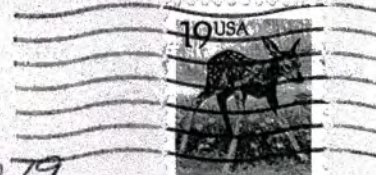
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Sincerely,

Mindy Smith RN

M. Smith
Name *54 Wilson*
Address *Platte City, MO 64079*
City State Zip

Kristine M. Gebbie, R.N., M.N.
National AIDS Policy Coordinator
750 17th N.W., Suite 1060
Washington, D.C. 20503



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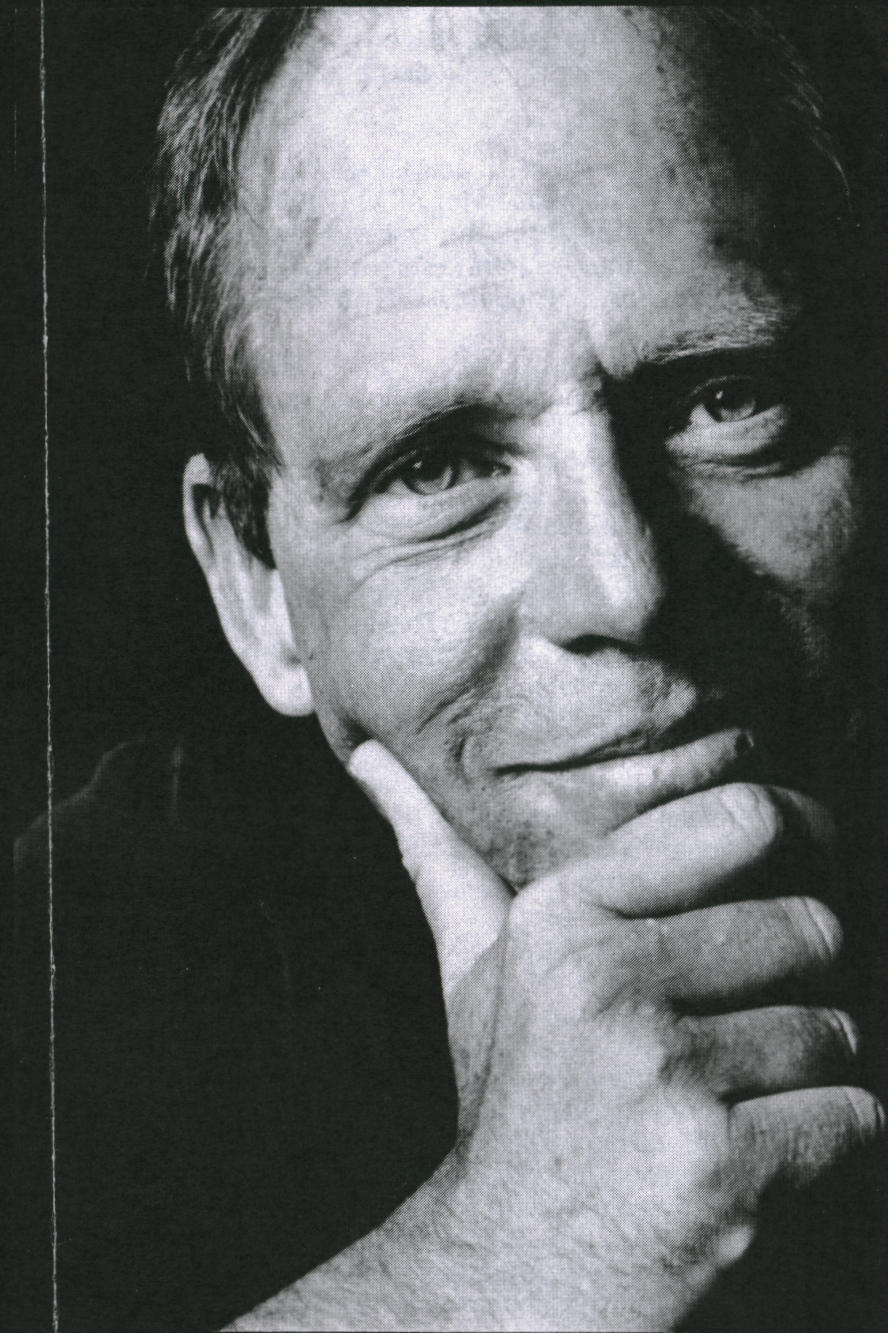
JUN - 6 1994

THE WHITE HOUSE

Roger—

I'm sure you'll receive
more than one of these ----
it was a lovely, warm,
supportive gathering - I
was honored to be a part. Spent
a few moments with your
parents - it was good to meet them.
All the best - Christine

TRIBUTE TO



R.A. (RUSS) RADLEY

Sunday, June 5th, 7:00 p.m.

Joseph Papp Public Theater 425 Lafayette Street New York, NY

R.A. (RUSS) RADLEY

On January 21, 1994, **R.A. (Russell) Radley**, 43 died of Aids-related illness at Cabrini Hospice in Manhattan after an eight and a half-year battle with AIDS.

Mr. Radley was a nationally-prominent AIDS activist. As the first executive director of the Design Industries Foundation for AIDS (**DIFFA**) in 1986, he was the first full-time AIDS grantmaker in the United States. Under his leadership, DIFFA often awarded the first grant to some of the nation's leading AIDS service and prevention efforts, including the **NAMES Project** in San Francisco.

He also served as a founding board member of the following organizations: the **Gay Men's Health Crisis**, the world's largest AIDS service and advocacy organization; **Funders Concerned About AIDS**, a coalition of 1200 foundation and business officials organized to encourage sustained philanthropic support of the country's 18,000-plus local AIDS/HIV frontline efforts; the **New York City AIDS Fund**, a coalition of foundations and corporations; Photographers and Friends United Against AIDS, the photography industry's response to AIDS; the **Mayor of New York City's Ryan White HIV Planning Council**; and the **New York City Gay Men's Chorus**, one of the oldest choruses of its kind. He was an organizational development advisor to the **Lesbian and Gay Community Services Center** in New York City.

As a long-term survivor, during his lifetime, he served as an inspiration to countless others who were also living with AIDS. He was honored with the Black Leadersh Commission on AIDS 'Choose Life' Award in 1993 and the AIDS Resource Center Key Award in 1991.

Mr. Radley was born in Whitestone, New York. As a teenager, he was a volunteer youth counselor in rural upstate communities and migrant camps. He is a graduate of SUNY/Plattsburgh. Subsequently, he established a publishing concern, which produced educational materials for educators throughout the Northeast. In the early 1970's, he was assistant to the President of the University College at Plattsburgh. Subsequently, he designed a marketing, outreach, and public affairs program for the 72 campuses of the State University of New York. Also, he served as director of education and research of the American Society of Interior Designers.

In the early 1980's, he ran a management consulting practice specializing in organizational development, planning and executive search. Clients included American Telephone and Telegraph, General Mills, Barnard College, Barnard College of Columbia University, the Institute of Business Designers, and the Mobile Corporation.

Recollections:

New York City Gay Men's Chorus

Richard Feldman

Kristine Gebbie

Ruth Messinger

Michael Seltzer

New York City Gay Men's Chorus

George Slowik

Louis
Lois Jones

Joyce Bove

Sharon King

Richard Feldman

New York City Gay Men's Chorus

Contributions perpetuating the work of Russ Radley can be made to:

The R.A. Radley Fund at
The New York Community Trust
2 Park Avenue

Roger J. Radley
professional consultation

Ms. Kristine Gebbie
National AIDS Policy Coordinator
750 17th Street, N.W. #1060
Washington DC 20503

18th
Breakfast or
dinner on 17th
depending
on
schedule
RECEIVED

MAY - 6 1991

Kristine,

I'm saying Kristine, rather than Ms. Gebbie out of respect. Grateful respect that when I called and asked for help for my brother Rusty, you were willing to be there for me and for him.

I wish to thank you for your phone call and for your note to my parents upon Rusty's death.

You suggested I keep in touch, and so I am.

I am back home in Montana with my lifepartner of 17 years Bill Davenport.

I am willing to serve, so if you have any suggestions please let me know how. I have included an overview of my past experience (I hope that's not bad form, I want to be useful and I don't really feel I am right now).

When you are here in Helena MT on May 18th, could you spend a few days before or after as our guest? Or perhaps, just a meal. Rusty so admired you and as you may have guessed he rarely found cause for admiration in the bureaucratic maze.

If none of these is possible, just know I am thankful for you and the good work you do and especially grateful for being there when Russ and I needed you.

I understand there will be a national memorial for Russ June 5th at 7 p.m. at the Public Theater in NYC.

I will be guest of Elisabeth Kubler-Ross May 23 - 27 in San Juan Bautista, CA -- time to do some healing of this caregiver.

Is it ok to call you from time to time?



Mail: P.O. Box 664 Phillipsburg MT 59858 Phone/FAX: (406) 859-3522
FEDEX/UPS 1125 Main Street , Phillipsburg MT 59858

Roger J. Radley, Ph.D.

Comprehensive

Dr. Radley, author, publisher, businessperson, counselor and teacher:

--has served as an consultant to:

- * Newsweek, Changing Times, Pflaum Press, Our Sunday Visitor, National Catholic Reporter, Paulist Press, CBS, Harper-Collins, Doubleday and other major publishers;
- * The United Church of Christ, The Dominican Fathers, The Daughters of Charity and other major religious/spiritual organizations;
- * the Cities of Denver, CO, Palm Springs, CA, Kingston NY and other civic bodies;
- * the Desert AIDS Project, ARCS, and other community based and/or health and social service organizations; and,
- * The National Cooperative Organization and other service and not for profit organizations.

--has written, edited and published:

- * co-authored with Helen Hayes, *A Gathering of Hope*, published by **Doubleday** and condensed by **Reader's Digest Publications**;
- * authored over twenty titles and edited at least that many (publishers include: **Harper-Collins, Winston Press, Paulist Press, Pflaum Press, Pilgrim Press, CBS, Changing Times, Our Sunday Visitor Press, National Catholic Reporter, Newsweek** and others;
- * co-created with Elisabeth Kubler Ross, *The International Hospice Handbook*; and,
- * written numerous technical and training manuals for publication (Newsweek; Changing Times, Butterick, American Management Association; New York State Addiction Training, etc.).

--co-founded, managed, administered, and marketed the following successful businesses and projects:

- * The Catholic Heritage Press (now owned by Doubleday); *Bear & Company*(now owned by Gerry & Barbara Clow); The Book of Catholic Names & NumbersTM (now owned by The Catholic Library Association; *Nazareth BooksTM for Young People* (now owned by Doubleday & Harper-Collins); JPR Associates Marketing; Davenport Real Estate, *New CreationTM Counseling and Training Centers for Caregivers*; The Citizens' CallTM Newsmagazine, Creation Magazine; and is internationally acclaimed for his five year study of AIDS Caregivers and his work with same.

--has been recognized as a skilled teacher and "coach" on national, regional, and local basis:

- * on post graduate, graduate, undergraduate, adult education, professional education, continuing education, secondary and elementary; and,
- * the Today Show, PBS, various national and regional media.

--currently:

- * is completing his Caregiver research for publication;
- * nationally teaching & consulting; and,
- * providing marketing & product design services to publishers.

Withdrawal/Redaction Marker

Clinton Library

DOCUMENT NO. AND TYPE	SUBJECT/TITLE	DATE	RESTRICTION
001. resume	[Personally Identifiable Information] [Partial] (1 page)	00/00/0000	b(6)

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Clinton Presidential Records
National AIDS Policy Office
Kristine Gebbie
OA/Box Number: 3770

FOLDER TITLE:

June Chron Files 1994 [1]

2018-0756-F
jp4822

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]
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Caring for the AIDS care givers

S.F. conference looks into special needs of people affected physically, spiritually by ordeal

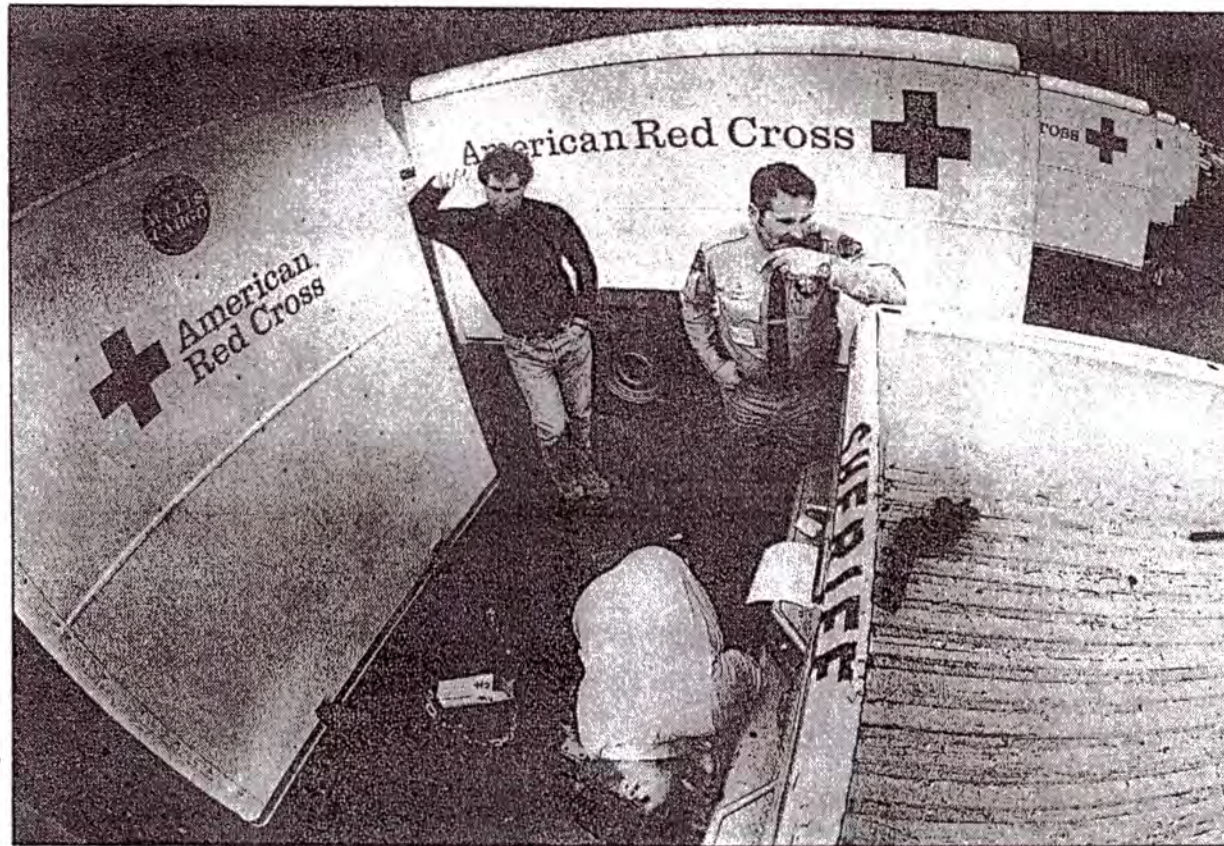
By Lisa M. Krieger
EXAMINER MEDICAL WRITER

Who cares for the care giver whose strength and spirit are sapped by the unique ordeal of supporting a person with AIDS?

A conference beginning Friday, the first Bay Area Care Givers Conference, provides the beginnings of relief.

With more than 7,000 AIDS-related deaths in San Francisco so far and an even larger number predicted in coming years, care givers are quickly becoming the newest casualty of the epidemic. Physically and emotionally depleted, they struggle to keep up high-quality care.

The feeling, psychiatrists say, is akin to combat fatigue. But there's no leaving this war. The list of things that need to be done — running errands, visiting doctors, cooking, bathing the ill and griev-



John Amador hitches up electrical connections to one of the American Red Cross' 38 new disaster response

trailers Thursday in Burlingame. The trailers will be used throughout the Bay Area during major disasters.

EXAMINER/KATY RADDATZ

thing as a quick fix for burnout, said its author, Roger J. Radley, a psychotherapist and director of the

challenges. There is a special outreach program for families.

Any kind of terminal illness is

teen care givers for support.

AIDS-related dementia, requiring 24-hour supervision, adds a fur-

How to cope if partner is infected

UCSF project will examine effects of stress on gay men caring for mates with AIDS virus

By Lisa M. Krieger
EXAMINER MEDICAL WRITER

UC-San Francisco research have launched a new "Coping Project" to study how gay men who partners have the AIDS virus handling the stress of caring their partners.

"There has been very lit study of the impact of care giv ... It's almost nonexistent," s Anne Christopher, project coordinator.

When finished, "we hope to provide to the medical commun

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A professional overview of

Roger J. Radley

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best care is given by people with high self-esteem, who know when to go home and have other interests besides their "work" of care giving. They eat healthy food, exercise, seek support groups and keep a "spiritual journal" of thoughts and feelings.

The study of 2,500 AIDS care givers shows that there is no such

types of processes and practices that will help caretakers function better, he said in an interview.

"There is a distinction between care givers and caretakers," Radley said. "The caretaker is trying to fill a hole in himself. He only feels good about himself if he cares for others. He is a co-dependent — he needs to care to feel alive. He sees the world as victims and rescuers."

"The care giver knows when and where to quit. He learns to care for himself as well as others. He sees that there is a choice — he says, 'I'm doing this because I'm choosing to.'"

The conference, in the conference center at St. Mary's Cathedral, is sponsored by Kairos House, an internationally recognized model for the care of care givers. Kairos, founded in 1988 by the Rev. John McGrann, is headquartered in a peaceful Victorian home and garden in the center of San Francisco's Castro District.

With the slogan "Together We Care," it offers support groups to address such issues as grief, co-dependency, stress management, spiritual issues and health care

poses a unique set of problems.

Because of the disease's association with homosexuality and drug abuse, many of those caring for patients feel stigmatized and secretive. The patient is often geographically and emotionally distanced from family members and may depend entirely on friends or volun-

own deeply buried feelings of anger and shame. And the continuing deaths of friends can keep care givers in a perpetual cycle of loss and grief.

Until a cure is found, good care is the best hope. Said Radley: "If you're not happy being you, you can't be an effective care giver."

Hotel union sets up an AIDS benefit fund

Gives employees \$350 a month for experimental drugs and tests that most insurers don't cover

EXAMINER STAFF REPORT

A San Francisco union has become the first in the nation to negotiate special AIDS medical benefits for its members.

Local 2 of the Hotel Employees and Restaurant Employees Union has set up a new fund that grants sick union members up to \$350 a month to pay for experimental drugs, laboratory tests, hospice care and other expenses not covered by traditional health insurers.

Under the program, large San Francisco hotels and restaurants that contract with Local 2 pay \$5 a month per employee into a union fund for AIDS benefits. That rate will rise to \$20 a month per employee in four years.

Union members who have the human immunodeficiency virus can then draw on the fund to pay

for treatment excluded from their regular health policies.

"With HIV, almost everything's experimental, and that's been a particular hardship on our members," said Jack Gribbon, assistant to the president of the 12,000-member Local 2.

"We do know our members have had experience with this disease, and are very concerned. They've seen a lot of friends and co-workers affected by AIDS," Gribbon said.

The fund began paying benefits to a few people in November. About 15 chefs, waiters and other workers now use it.

One of them is Don, a sous chef at a Nob Hill restaurant who didn't want to be otherwise identified.

"It's the difference between making it and not making it," he said. He takes eight different drugs a month — three of them experimental. His out-of-pocket medical expenses are \$300 to \$1,900 a month, depending on his health. His take-home pay averages \$1,800.

"A lot of people were going into gross debt because the insurers don't cover the treatments we're trying," he said. "This has worked beautifully so far."

cause there will be many more of them coming down the pike" as the epidemic continues, she said.

Christopher and project director Dr. Susan Folkman are asking partners of persons with AIDS — their primary care givers — to participate for two years in the project. They will study the stresses of care giving, how care givers are managing these stresses and how care giving affects physical health and psychological well-being.

Some men in their study are still in the very early stages of care giving, said Christopher. As one person tires more easily, the responsibility for doing basic chores — washing dishes or laundry, for instance — shifts to the other partner.

Other men offer around-the-clock care. They make trips to the hospital emergency room late at night and then return to work early the next morning "like nothing's going on," said Christopher.

Volunteers receive \$20 for each exam or interview. For more information, call researchers at 597-9177.

Wildlife may get help

McCLATCHY NEWS SERVICE

A key House of Representative panel agreed Thursday to spend nearly \$30 million to limit drought damage to California's wildlife refuges, fisheries and the Delta.

The House Appropriations subcommittee on energy and water development approved a request by Rep. Vic Fazio, D-West Sacramento, to move quickly to make the money available for drilling water wells, buying water and installing equipment that would help the Delta and allow the Bureau of Reclamation to draw more water from existing lakes.

BILL MANDEL



Bill Mandel is on vacation

San Francisco Examiner

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AIDS care-givers need to relax, so patients can, doctor says

By JEFF DILLON

The Desert Sun

PALM SPRINGS — Take a breath.

Nothing deep, nothing special, just a breath during which you notice the air moving in and out.

Sometimes it's just that sort of advice that people who care for people with AIDS and other diseases need to hear, said Dr. Roger Radley, an author, counselor and psychotherapist.

"AIDS is a disease that affects not just the person infected with the virus but the people around them," said Radley, a former Coachella Valley resident who was in Palm Springs this week.

To stay emotionally and physically able to give care, the doctors, families, friends and counselors of people living with AIDS need to take care of themselves, he said.

"A lot of people say... let's focus on the patient. Let's focus on finding a cure. Let's focus on finding a vaccine. The care-giver gets lost," he said.

Through writing manuals and conducting seminars around the country, Radley helps care-givers learn how to keep themselves from burning out.

"The premise that we have is that everyone knows pretty much what to do. It's just a question of stopping and noticing it," he said.

Radley and others in the field also have begun publishing *New Creation*, a non-profit bimonthly journal for care-givers who aren't able to attend seminars. He estimated there are roughly 23,000 AIDS care-givers in California alone.

Radley draws from the results of his recent study of care-givers who hadn't burned out after three to



MAX ORTIZ/The Desert Sun

CARE-GIVER ADVICE: Ron Radley, visiting Palm Springs on Wednesday, talks about support workers who help AIDS victims.

seven years of caring for others. Though he hate to use the word, Radley said care-giving has almost become a science.

"One of the things I teach care-givers is to notice your breathing. Your breathing becomes deeper. It becomes a natural tranquilizer," he said. "It's just real simple things."

Those who worked with cancer patients or those with other serious diseases before AIDS also suffered from burnout, he said, but then there were fewer infected people and they didn't face the same certainty of death as those with AIDS.

And more people in the AIDS care community are burning out because more are professionals and fewer are family members, friends or lovers who felt they had to help.

A lot of those people got into taking care of others, rather than giving care, to fill emotional holes

inside themselves. And that doesn't work, Radley said.

"If your needs are met, you can be present for another human being. If they're not — guess what — you're using them. It's the fix, whether its a drug or another human being," he said.

Radley's advice includes suggestions that care-givers play, exercise, eat regularly, separate their work from their outside lives and avoid seeing themselves as fixers for other peoples' problems.

Radley said one thing he's learned to face is the reality that he can't be the solution by himself.

"Having a Roger Radley or someone like me come into your community for a weekend or a week is just not going to do it. So what we're attempting to do is empower people to chunk it down," he said.

AIDS Groups Address Caregiver Burnout

Organizations Train Staff to Relieve Stress and Think of Themselves

BY JOHN VOELCKER



s the second decade of AIDS begins, the epidemic has claimed not only lives but also the stability and mental health of its caregivers. The signs of

AIDS burnout vary, from discouragement, exhaustion, and feelings of helplessness to shorter tempers and a loss of basic empathy. But the message is the same: An AIDS caregiver has reached the end of his or her rope.

Major AIDS groups are now incorporating information about burnout and its warning signs into their training and support programs, but many smaller groups remain vulnerable. And even with the best support, volunteers agree that burnout is a natural and inevitable part of the epidemic. Only caregivers who also take care of themselves and hold on to a healthy dose of realism, they say, last more than a few months.

AIDS RAGE

Three or four years ago, AIDS groups began to notice that while burnout occurs in any care-giving profession, AIDS burnout was different. "By that time," says Joseph Ripple, director of volunteers at Gay Men's Health Crisis (GMHC) in New York City, "many of the gay men who were caregivers during the epidemic's early stage were sick themselves, and we began to see what you might call the AIDS rage." A few studies began to identify the similarities and differences between burnout for AIDS and for other diseases and to figure out what steps could be taken to uncover, mitigate, and even prevent burnout among volunteer and professional caregivers.

Then a March 1990 *Wall Street Journal* article focused wider public attention on the topic of AIDS burnout. That piece,

which painted an extremely bleak picture, was criticized by volunteer coordinators in several AIDS groups for fostering an atmosphere of despair among staff and volunteers. "Burnout exists and may well be increasing," says one coordinator, "but it's far from the hopeless catastrophe" depicted in the article.

ADDITIONAL STRESSES

But clearly AIDS care exacts a toll. Of doctors, nurses, dentists, and social workers surveyed at six Washington, D.C., sites, 81% said caring for people with AIDS was more stressful than caring for patients with other diseases, and none said it was less stressful. The most severe stresses were, in descending order, fear of contagion, knowledge that the disease is ultimately fatal, repetitive death and dying, discomfort and stigma, helplessness and lack of control over the disease, and the increasing work load.

Some of these stresses are common to many diseases, says Honey Nashman, one of three professors who conducted the study at George Washington University. The three found, however, that the particular nature of AIDS added sources of stress not found with other diseases: vulnerability and fear of infection, social stigma, the young age of patients, lack of resources and services, lack of scientific information, uncertainty and complexity of the disease, the politics and bureaucracy associated with the disease, and the large numbers of deaths.

As with other diseases, those at highest risk for burnout are the caregivers on the front lines, from volunteer "buddies" to professional AIDS nurses. Volunteers at food banks or support staff are less prone to burnout, although group burnout-prevention programs are usually offered to all professional staff and volunteers.

THREE STEPS TO ENDURANCE

Researchers and caregivers agree that

those who seem most immune to burnout share several characteristics. First, says Nashman, "the major advice is to take care of yourself as well as your clients"—whether that means taking a "mental-health day" off here and there or turning down new projects or additional work that will cut into personal time.

Second, well-adjusted caregivers have a strong sense of reality, recognizing that they cannot solve the epidemic single-handedly. Such realism also includes an appreciation that the epidemic will last for a long time rather than being something that may go away next month or next year.

And third, successful caregivers support each other in formal groups sponsored by their organizations and in less formal ways—from regular dinners after work to a quick hug and a ten-minute break for someone who is having a rough shift. Those who resist burnout understand that all caregivers need to talk about their feelings, to lean on others, and to know that they're not alone in often feeling overwhelmed or underappreciated.

A 2½-year study of 2,500 caregivers by Roger Radley, a psychotherapist and director of New Creation Center, which offers programs on burnout, found 250 people who, as judged by their peers, coworkers, and clients, had not burned out after three to seven years of AIDS work. The behaviors they shared included good nutrition, regular physical and spiritual exercise, recreational interests outside AIDS work, an ability to set limits on their AIDS work, ongoing professional and personal education, openness and an ability to listen, and participation in support groups, coaching, and supervision.

Radley distinguishes between caregivers, who give care to others while preserving their client's right to make choices, and caretakers, who feel good about their work only if their care is "successful" and they can "fix" what is wrong.

"Some people are simply not suited as volunteers."

He says that caretakers burn out far more often when dealing with a disease such as AIDS than do caregivers, who do not need to validate themselves by caring for others.

A VARIETY OF STRATEGIES

By now, most large AIDS organizations are aware of burnout and target it in their training, support, and screening. Typical strategies include regular meetings between psychiatrists and groups of client-serving staff and volunteers; peer-support groups for buddies with trained facilitators; suggested limits on the number of jobs or hours worked; and bereavement workshops similar to those offered to hospice workers.

New York's GMHC, for example, regularly offers grief and healing workshops, first developed four years ago at the Whitman-Walker Clinic in Washington, D.C. Says Ripple: "A more realistic picture of what AIDS work is like, combined with better screening and increased support for volunteers, has cut GMHC's volunteer turnover to 25% of its level a year ago.

"Some people," he adds, "are simply not suited as volunteers, and we tell them that's OK, that they can be involved in other ways."

AIDS Project Los Angeles (APLA) has a similar variety of approaches to reduce burnout. The group's orientation "stresses that it's all right for volunteers to pull back, cut down on hours, or take a break if they're feeling burned-out," says Joe Umbrino, APLA's program manager for volunteer resources. The program managers themselves are trained to flag workers who may be in trouble, he says, and all buddies have weekly meetings with trained facilitators. Like other groups, "we also suggest that buddies



whose clients die wait six months or more before signing up again," Umbrino says.

But many medium-sized and smaller organizations have not yet dealt with burnout. In one 1990 survey, only 30% of AIDS organizations had formal, systematic programs for burnout detection and prevention. This lack may lead staff to overwork themselves and end up leaving the agency.

Todd Peerman, for example, is now leaving his position as client care coordinator for Center One, which provides AIDS services to 2,250 clients in and around Broward County, Fla. Peerman, living with AIDS himself, admits he is "now experiencing the biggest burnout in six years," having thrown himself into eight months of intensive AIDS work after the death of his lover. It took hospitalization for him to realize, he says, that he had been working as though

"my own health was not as important as that of my clients."

To address widespread burnout, he says, Center One workers developed a plan for formal weekly meetings of the caregivers, led by a professional facilitator. But the center's board of directors never adopted the plan. "Right now," Peerman says, "we have absolutely no [formal] steps to deal with burnout." Instead, caregivers routinely go out for dinner after work—effectively extending their workday well into the evening.

After-work meetings are a common strategy for caregivers without access to formal counseling. Lary Campbell, who has spent 2½ years as a practical nurse on the AIDS ward at New York's Roosevelt Hospital, says that his coworkers on the night shift do not take advantage of a hospital discussion group for two reasons: It requires them

to come in during the day on their own time, and some feel uncomfortable discussing personal issues in a hospital-sponsored setting.

Instead, Campbell says, everyone in the unit works hard to care for each other and to take over a job if someone is having a difficult time with a particular client. And, he adds, his personal strategy relies heavily on the soothing value of outrageous humor, both with clients and among the staff.

POLITICAL BURNOUT?

Another symptom of the stresses of AIDS work, says Marty Doucett, director of volunteer services for AIDS Foundation San Diego, is burnout around political issues. AIDS groups must compete with each other for clearly inadequate levels of funding, he says, citing congressional ap-

"Sometimes I get so sad, I dread coming to work."

appropriation of only \$218 million for the Ryan White Comprehensive AIDS Resources Emergency Act despite its authorization last year of \$780 million. Disagreements between and within AIDS service groups frequently take their toll on volunteers, he says, many of whom start to believe that the fight against AIDS is a lost cause if AIDS groups spend so much time fighting each other.

Others confirm that an organization's internal frictions are often exacerbated when everyone involved works 14 hours a day. And several caregivers noted that the community has a long history of attacking the executive directors of gay and lesbian groups as soon as they are appointed. "No matter how much you do," says one volunteer director, "it's not enough."

NEW PROBLEMS AHEAD

As AIDS service organizations adapt to the existing problems of burnout, new difficulties and changes are on the horizon. Groups whose clients have predominantly been gay white men are now serving more women, families, past and present IV drug users, and people of color. Such clients often have fewer friends who volunteer to work at AIDS groups, and the more diverse client base demands greater sensitivity to differing cultural needs. AIDS groups now find themselves struggling with problems—homelessness, addiction, and poverty—far beyond the medical and emotional needs of the largely middle-class gay men with AIDS.

Another change is a volunteer pool that now includes more people not directly affected by the disease, often straight women and retirees. Together, these changes demand far more training for staff and volunteers and require efforts to find volunteers—recovering IV drug users, for example, in one experiment at St. Clare's Hospital in New York City—who best understand the needs of "the new epidemic."

A further challenge identified by psychotherapist Radley is the growing professionalization of AIDS organizations as grass-roots community services groups find themselves with million-dollar budgets. Workers may get discouraged if agencies become more professional without ac-

knowledging the very personal nature of AIDS care. Radley and others cite actions taken at various agencies to make them more professional without understanding the negative impact of those actions. The staff at the New York headquarters of the American Foundation for AIDS Research, for example, reacted with dismay to a newly instituted formal dress code and the presence of the foundation's executive director at the entrance recently, noting the time that staff arrived at work in the morning.

HERE TO STAY

Nevertheless, agencies large and small are devoting increasing resources to understanding and addressing burnout. Kairos House, for example, is a resource center for AIDS caregivers that opened in July 1988 in San Francisco. Its mission is to "maintain and promote the emotional well-being of all caregivers providing support to people affected by HIV infection." It offers support groups, workshops, continuing education, health care outreach, and social gatherings. Kairos House sponsored a March 1991 conference, Empowerment for Care-Givers, that examined ways for both organizations and individuals to reduce burnout.

In a similar vein, the Omega Institute of Rhinebeck, N.Y., will offer its fourth annual

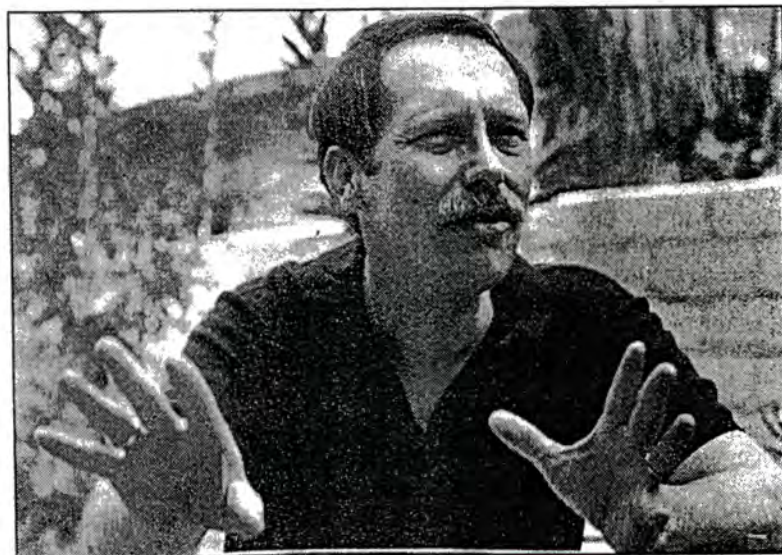
Healing the Healers retreat for AIDS caregivers this September.

Research continues as well, from internal studies at several AIDS service organizations to an ongoing study and pilot program to reduce burnout among 55 former and current volunteers in a Baltimore AIDS agency.

Still, virtually everyone interviewed for this article admits to some degree of burnout. "For the first two years, I was pretty gung ho," says Umbrino of APLA. "Lots of people thought it all wouldn't last, but it's harder to go on with the numbers and the caseload—our caseworkers see 175 to 200 clients a week now. Sometimes I get so sad, I dread coming to work."

As long as the AIDS epidemic lasts, AIDS burnout is here to stay. It can be reduced, and burned-out caregivers are now more likely to find empathetic co-workers who convince them that taking a temporary—or permanent—break is OK. After a hiatus, Center One's Peerman will probably continue some AIDS volunteer work, he says, but for now he will follow his own prescription for alleviating burnout: "rest, recreation, and good sex."

Peerman advises simply, "Look out for yourself first, and take care of yourself as well as your clients. You're no good to anyone if you're burned-out." ▼



MAX ORTIZ/The Desert Sun

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Organizations or individuals that want information to prevent or ease AIDS caregiver burnout should contact one of the following groups:

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4341 30th St.
San Diego, CA 92104
(619) 280-1500

AIDS Project Los Angeles
6721 Romaine St.
Los Angeles, CA 90038
(213) 962-1600

Gay Men's Health Crisis
Volunteer Services
129 W. 20th St.
New York, NY 10011
(212) 807-6664

Kairos House
114 Douglass St.
San Francisco, CA 94114
(415) 861-0877

New Creation Center
P.O. Box 763
Stone Ridge, NY 12484
(914) 338-6456

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Phone/fax: (406) 859-3522

Roger J. Radley

I. Training & Education

Undergraduate:

LeMoyne College, Syracuse NY 1968, B.A.
Wadhams Hall Seminary College, 1966, A. Th.

Graduate and Post Graduate:

Pacific Western University, Los Angeles, CA, *Pastoral Counseling/Religious Studies*
Ph.D. 1989 [Dissertation: *Contextualizing Pastoral Caregiving to Persons Affected by AIDS/HIV--* available for review].

The Catholic University of America/Washington Theological Coalition, Washington DC,
Pastoral Studies & Theology, 1973.

Advanced Studies Psychology:

Newport University, San Diego CA
Pacific Western University, Los Angeles CA (Ph.D. student on leave)

Advanced Studies Education:

State University of New York: Plattsburg/Oneonta, *Secondary Education*
Syracuse University, Syracuse NY, *Media & Education*

Continuing Education: Listing by request

Internships:

Smithers/Roosevelt St. Luke's Hospital, New York City, NY
9/1972 - 8/1973. SUPERVISORS: LeClaire Bissell, M.D. and Shirley Silverberg,
M.S.W. Community Mental Health: Pastoral Care of Alcoholics, Addicts and the
Terminally Ill.

Utica Youth Bureau, Utica NY
8/70 - 6/72, Substance Abuse/Juvenile Suicide Prevention

St. John Baptist de la Salle Parish, Chillum MD
8/73 - 5/74 Youth & family Ministry

(more)

Roger J. Radley

II. Certifications/Association Memberships

National Association of Alcoholism & Drug Abuse Counselors (active)
National Board of Hypnotherapist Examiners (active)
New York Federation of Alcohol & Drug Abuse Counselors (former associate)
AIDS Interfaith Network
Ulster County Mental Health Association (former associate)

III. Addiction, AIDS/HIV, and Family Counseling, Clinical Supervision and Administration

CURRENT:

On sabbatical. **Clinical Supervisor** for several AIDS/HIV Practitioners and Administrators in NY & CA. Preparing final version of revised *International AIDS Caregivers' Study* for publication. National **Workshops & Trainings** for AIDS/HIV Caregivers.

PREVIOUS:

New Creation Institute & Counseling Centers, Palm Springs CA and Kingston NY. Administrator/Coordinator of AIDS/HIV Services & Education Programs for training & Sustaining AIDS/HIV and Addiction Caregivers; Clinical Supervisor; direct client services including private counseling, education, brokering services, grant writing, Clinical Supervisor, PR. Co-creator of programs & courses. **Medical Clinical Director:** *Geraldine Vienneau, B.S., R.N., C.R.I. P.* (retired) 5672 Scarborough Lane, Sarasota FL 34241 (813) 923-8662. **President of Board of Directors:** *John J. Kirvan, M.S., M.A.* (retired) 73722 B El Paseo, Palm Desert CA 92260 (619) 346-1201 or 1-800-875-4325. Both facilities closed and client services brokered December 1992.

January 1983 -- August 1992

Little Falls School System, Little Falls NY

Secondary Social Studies /Language Arts Instructor. Drug/Alcoholism Counselor/Educator. **Supervisor:** *Charles Ebetino, Ph. D.*, Superintendent of Schools
July 1970 - July 1971

The Meeting House Project, Clayville NY & Sauquoit Valley School System

Secondary Language Arts Instructor. Family Drug/Alcoholism Counselor/Educator, Grant writer and Administrator (Meeting House Project only)

Supervisor: *Paul A. Williams, M.S.* Director of Guidance Services, (retired), Clayville NY (315) 839-5580

August 1968 August 1971

SEE ALSO: *Internships*

(more)

Roger J. Radley

IV. Business Background

Consulting:

In recent years Roger has served as consultant to: *Ryan White Title II Steering Committee and Review Panel (Upstate NY)*; The Desert AIDS Project; *Mid Hudson HIV Care Network Steering Committee*; ARCS (AIDS Related Community Services, Inc.); *Omega Institute AIDS Caregiver's Retreat*; Coachella Valley Family Counseling Services; *Ulster County Community College*; Veritas Villa Addiction Treatment Center; *Kingston Hospital Detox Board*; City of Denver Colorado and, other national and regional substance abuse and family treatment centers; rehabilitation corporations; service providers, publishers; health product corporations and governmental bodies.

Publishing:

Roger was founder of The Catholic Heritage Press (now Doubleday and Harper-Collins); Bear & Company (now owned by Clow & Company); Nazareth Books for Young People (Doubleday and Harper-Collins); Creation Magazine; and, The Citizens' Call Newsmagazine. He also co-created with Elisabeth Kubler Ross *The International Hospice Handbook*.

Real Estate:

Roger is a Licensed Broker in New York, California and Montana.

(more)

Roger J. Radley

V. Examples of Recent Teaching and Training Experience:

Suffolk University, Boston MA, **Healing Life's Hurts for AIDS/HIV Caregiving**, February 1991

Desert AIDS Project, Palm Springs CA. **A Gathering of Hope**, March 1986.

National Association of Social Workers, NY **New Models for Recovery -- What AIDS/HIV Teaches Us**, April 1991.

Omega Institute, Rhinebeck NY **International AIDS Caregivers' Retreat** [Faculty], September 1991.

The 10% Conference, NYC **Caretakers Need Not Apply! How to "burn out"**, April 1991.

Kairos House (Consortium of AIDS/HIV related Agencies) San Francisco CA **Healing Life's Hurts for AIDS/HIV Caregivers and Healing the Grieving Institution**, March 1991.

New York State Women's Coalition on Chemical Dependency, **Female Emergence in AIDS/HIV: Patient & Caregiver**, March 1991.

New York Federation of Alcoholism & Drug Abuse Counselors, **AIDS/HIV, Addiction, Relapse and Recovery, and Depression: Issues in Recovery and Relapse**, July 1991.

Care too. Supervision & Commitment for the long term AIDS/HIV Caregiver. Held at DIFFA Offices, NYC, December 1992.

Adjunct Instructor:

American Institute for Psychotherapy & Hypnotherapy, NYC (contact: Allyne Skinner at Skinner Institute NYC) **Certification and Continuing Education Courses for Addiction Counselors**

New Creation Centers CA & NY **Certification and Continuing Education Courses for Addiction Counselors, AIDS Educators, etc.**

Ulster County Community College, Kingston NY, Fall 1990/Spring 1991: **Certification and Continuing Education Courses for Addiction Counselors, AIDS Educators, etc.**

(more)

Roger J. Radley

VI. Acknowledgements, honors, grants

U.S. Congressional Recognition for creating *First International AIDS CAREGIVERS' Study* and related training programs, *January 1992*.

National Conference of Christians & Jews -- Grants & Acknowledgement for work with Adolescence , Drugs & Violence.

In addition there have been various national, state and regional agency/department and private sector grants for programs and projects.

VII. Publications

Roger has been published by Doubleday, Harper-Collins; Newsweek, CBS and others. He has written and/or edited over 20 published titles.

He is acknowledged for creating the first *International AIDS Caregivers's Study* (1989, 1991) and his role as co-creator with Elisabeth Kubler Ross and the team of the Milwaukee Hospice in creating the first *International Hospice Handbook*.

VIII. Continuing Education

Includes over 400 Hours of AIDS/HIV Specific ceu's sponsored by AMFAR, Robert Wood Johnson, NY AIDS Institute, etc. and over 150 ceu's in Addiction Treatment related accrued in the last four years.

(more)

Roger J. Radley

IX. References: Supervisors, Associates, Media and Personal

Several persons have submitted "blanket" recommendations which appear on subsequent pages. You are free to contact them or any of those listed in this resume/vita.

Larry Kessler, Executive Director AIDS Action Committee, 131 Clarendon Street, Boston MA 02116. (617) 437-6200.

Sister Pascal Conforti, Pastoral Counselor, St. Claire's Hospital/Spellman Center, 415 West 51st Street NYC 10019.

Susan Whitey, Director of Planning & Evaluation, AIDS Related Community Services, 838 Broadway, Newburgh NY 12550 (letter attached)

Elizabeth Reed, Ph.D., 122B West Buffalo Street, Ithaca, NY (607) 272-8979

Suzanne B. Cusack, Vice President and James S. Cusack, C.E.O., Veritas Villas Treatment Facilities, RR 2, Box 415, Kerhonkson NY 12446 (914) 626-3555. (letter attached).

Jim Myler, Clinical Director, Camelot/St. Francis Facility for Youth, 50 Riverside Drive, Lake Placid NY 12491 (518) 523-3605

Linda Glassman, Executive Director, AIDS Council of Northeastern NY, 307 Hamilton Street, Albany NY (518) 434-4686.

John J. Kirvan, John Kirvan & Associates/New Creation 73-722 B El Paseo, Palm Desert CA 92260 (619) 346-1201. (letter attached)

Suzanne Ryan, President, The Ryan Company Medical Placement Services, Montgomery Park, 2701 NW Vaughn, Suite 424, Portland OR 97210 (503) 277-3322 (letter attached).

(more)

Recommendations

Veritas Villa, Inc.

Tel.: (914) 626-3555
Fax: (914) 626-3840

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May 4, 1992

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To Whom It May Concern:

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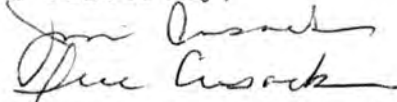
This letter will serve as our unhesitating recommendation of Roger J. Radley, PhD for his skill and ability as both educator and counselor. We have known Dr. Radley for quite some time now and have found him to be charismatic and enthusiastic in the classroom setting and compassionate and caring in the counseling setting. We can recommend him with no reservation whatsoever to perform above and beyond the call of duty in either an educational or counseling setting.

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Please feel free to contact us for any further information you require.

N
Y

Sincerely,



James S. Cusack, NCAC II, CAC
Chief Executive Officer
Suzanne B. Cusack
Vice-President

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4
6

Co-Founders, Veritas Villa, Inc.

JSC/SBC:kh

Rosemary Scavuzzo
Director, Human Resources
Kahi Mohala
91-2301 Fort Weaver Road
Ewa Beach, HI

Dear Rosemary:

Please find enclosed the resume on Roger Radley. I interviewed with him last week and was struck by the myriad of skills he could offer to Kahi Mohala.

He interviewed very well. He is looking for a win/win situation. He brings extensive experience in chemical dependency, psychology, business, marketing, publishing and is internationally known as an expert in training care givers who work with HIV patients.

Given an adequate base salary, (I would suspect he would negotiate in the \$45-60K range,) he would be willing to work with a facility as long as he had some flexibility to do the international work he has started. His interest is in the project he is devoting himself to, not necessarily the money, though he is certainly not disinterested in money. Where ever he bases his work, the facility will be the beneficiary of significant direct and indirect marketing advantages because of the workshops and trainings he can offer under the umbrella of the facility.

I spoke with John Kirvan, Director of New Creation Corporation in Palm Springs where Roger is currently doing contractual work. Mr. Kirvan has known and worked with Roger for 20 years and feels that he is the brightest and most intuitive person he has ever met. He states, 'Roger possesses a combination of skills that are rarely, if ever, found in the same person.' He verified my interview impressions and would be happy to be available to you for reference information. You can reach him at 619-322-4437. I will continue reference checking, but I do not expect to find anything other than what I got from Mr. Kirvan.



I sense that Roger would be very easy to work with. He is soft spoken and gentle, but I expect he is capable of moving mountains without the mountains even realizing they are being moved! We know how important that skill is in Hawaii.

I have enclosed the catalogue for the New Creation Institute in New York, which will give you an idea of his recent work.

Roger can meet your Champus requirements and at the same time be an incredibly important asset to the corporation. You could hire an MSW, but the chances of another Roger Radley coming along are few and far between. I strongly urge you to pursue this man.

Sincerely,

Suzanne Ryan
President

JOHN KIRVAN

1078 No Palm Canyon Dr Palm Springs CA 92262

RE: Roger Radley, Ph.D.

For almost 20 years I have known and respected Roger Radley as an educator with unusually diverse skills.

He has an unusually strong ability to develop learning processes for almost any age level for almost any material or resource. Within a two-year period I watched him develop a variety of multi-media teaching/learning materials for a high-school religious education program and an adult learning program for a general audience book directed to those over 40. They were both excellent.

In recent years as his primary interests have returned to substance and other dependencies he has used those same skills to create programs for clients in need of help and for those who seek to extend help.

He has a very strong public persona that makes his classroom and platform presentations unique and memorable and marked with the teaching skills he has long shown in his creation of print and other learning materials.

I am happy to recommend him to your attention.



John Kirvan



2269 Saw Mill River Road Building #1, Elmsford, New York 10523
(914) 345-8888 FAX (914) 785-8227 AIDSline (800) 992-1442

838 Broadway, Newburgh, New York 12550
(914) 562-5005 FAX (914) 562-5212

89 Market Street, Poughkeepsie, New York 12601
(914) 471-0707 FAX (914) 471-0857

May 5, 1992

To whom it may concern:

I have known Roger Radley for the last two years in his capacity as a volunteer educator and trainer for AIDS-Related Community Services (ARCS). Roger regularly conducted training for our Buddy and Hospital Visitor Program, a peer-based volunteer program designed to give practical and emotional support on an ongoing basis to people living with HIV/AIDS. He was also instrumental in shaping my own approach to the management and supervision of the program. He has made a significant contribution to all volunteers and staff who have participated in one of his workshops, and consequently, to the clients we serve.

Roger is much more than an educator in the traditional sense. He is at once engaging and sensitive -- assessing the needs of the group and/or of the individual, and integrating those into the goals of a session. He is flexible and seasoned -- quickly developing what seems to be the best use of information and experiential exercise to maximize the quality and impact of a session. He makes a lasting impression on each student participant, irrespective of his/her own level of participation.

Roger's teaching style inspires and motivates. He encourages students to reflect upon their own feelings, concerns and life experiences. He invites students to then incorporate these into the content of the training session. By challenging students to ask themselves difficult questions, he is able to enhance insight and to promote personal growth. By encouraging students to identify strengths and weaknesses, and to utilize their own personal resources in a more effective way, he teaches people how to capitalize on their own uniqueness. He helps students identify their own investment in learning and he makes students feel good about making the effort. Learning continues long after the workshop or session has ended, as seeds planted bloom with more time and experience.

As a student and as a colleague, I have found Roger to be one of the most effective educators, and therefore one of the most effective people, I have known. His personal and professional impact is indeed profound. I would strongly recommend him to any institution in search of an excellent educator.

Sincerely,

Susan S. Witte

Director of Planning and Evaluation

THE WHITE HOUSE

WASHINGTON

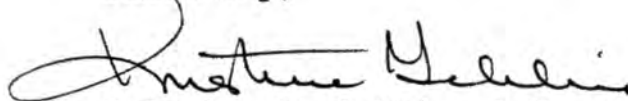
June 6, 1994

Ms. Melinda Webb Schwartz
411 Beck's Lake Road
Cantonment, Florida 32533

Dear Ms. Schwartz:

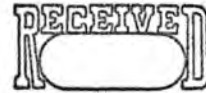
Thank you for writing. I will continue to advocate for a sound HIV/AIDS policy based on the best available science, and will support efforts to make prevention information available to all, regardless of gender or sexual orientation.

Sincerely,

A handwritten signature in dark ink, appearing to read "Kristine M. Gebbie". The signature is fluid and cursive, with a large initial "K" and a stylized "G".

Kristine M. Gebbie, R.N., M.N.
National AIDS Policy Coordinator

Melinda Webb Schwartz



411 Beck's Lake Road Cantonment, Florida 32533

MAR 31 1994

March 28, 1994

AIDS Czar Kristine Gebbie
Office of National Aids Policy
750 17th Street, NW #1060
Washington, DC 20503

*few
will one of
our standard
letters do?*

Ms. Gebbie:

I write as an concerned American citizen and more than that a mother of five children.

You are living in another world, obviously not the real world. I just read part of the contents of the booklet "Safer Sex Handbook for Lesbians", and it's hard for me to fathom that a person with your so called intelligence could sponsor such material. $1 + 1$ must not equal 2 in your mind. I would assume you have been placed in your position to combat this horrible disease of AIDS, but all you do is put a bandaid on it when you endorse the materials in this booklet as "safe". Come on, you are suppose to be helping rid the cause of this awful disease, but you are not warning the nation of the real causes. If the American people are stupid enough to believe and go by what you propose, half the population that practice your kind of "safe sex" will be dead within a short period.

You need to justify your pro-gay position. Please do so in light of the fact that the average life span of the gays is 45. By the way, you need to become aware of the latest statistics regarding the percentage of the gay population, it is not 10% as you state, the truth is, the gay population is only about 2% - 3%. Then again the Clinton administration wouldn't recognize the truth if it slapped them in the face.

Sex is "wonderful" and "healthy", but ONLY if practiced in accordance with its designer, God.

Sincerely,

Melinda W. Schwartz
Melinda W. Schwartz

June 6

THE WHITE HOUSE

Michael —

Thank you so much for including me in the tribute to Russ yesterday - it was very special you're a good friend & carrying on in a way he would approve! Hope to see you soon - Love time

JUN - 6 1994

THE WHITE HOUSE

Dear Mary Ellen—

Just wanted to let you know
that the stamps arrived in
good shape — and to let you know
again how much I enjoyed my
evening in Connecticut!

All the best
Kristina



MAY 31 1994

May 26, 1994

Dear Dr. Gebbie,

Thank you again for your excellent presentation back on April 4, 1994. We received wonderful feedback from the participants who seemed to learn alot and enjoy the evening!

I hope that you enjoy this small token of our appreciation. Please know that your role as a prominent and influential nurse in the Clinton Administration is certainly admired and is motivating to many members of our profession.

Best wishes as you continue your important work. Please feel free to contact the Connecticut Nurses Foundation if we can be of any assistance in the future.

Sincerely,

A handwritten signature in cursive script, reading "Mary Ellen Hobson".

Mary Ellen Hobson, President

Connecticut Nurses' Foundation

CLINTON LIBRARY PHOTOCOPY

Kristine Gebbie, RN, PhD
Executive Office of the President
Office of National AIDS Policy
750 17th Street N. W.
Washington, DC 20503

Connecticut Nurses' Foundation, Inc.
377 Research Parkway • Suite 2D
Meriden, Connecticut 06450

MARY ELLEN HOBSON
CONNECTICUT NURSES' FOUNDATION, INC
377 RESEARCH PARKWAY, SUITE 2D
MERIDEN, CT 06450

CONTENTS - MERCHANDISE

**PHOTOCOPY
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Clinton Library

DOCUMENT NO. AND TYPE	SUBJECT/TITLE	DATE	RESTRICTION
003. letter	From: Kristine Gebbie; re: Support Research; [Personal] (Partial) (1 page)	06/09/1994	b(6)

COLLECTION:

Clinton Presidential Records
National AIDS Policy Office
Kristine Gebbie
OA/Box Number: 3770

FOLDER TITLE:

June Chron Files 1994 [1]

2018-0756-F
jp4822

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]
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- 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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THE WHITE HOUSE
WASHINGTON

June 6, 1994

(b)(6)

Dear

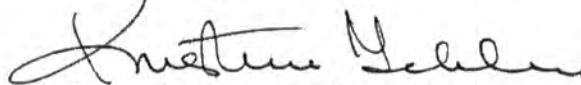
(b)(6)

Thank you for writing to share your perspectives on HIV and AIDS treatment.

This office will continue to support research on this disease and treatment based on the best available science. My best wishes to you.

Sincerely,

[003]



Kristine M. Gebbie, R.N., M.N.
National AIDS Policy Coordinator

Dear

(b)(6)

Thank you for writing
to share your perspectives
on HIV and AIDS
treatment.

This office will continue
to support research on
~~the disease~~ & treatment based
on the ~~best~~ best available
science. My best wishes to you
sincerely

Withdrawal/Redaction Marker

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DOCUMENT NO. AND TYPE	SUBJECT/TITLE	DATE	RESTRICTION
004, letter	To: Disseminate Everywhere Appropriate; [Personal] (Partial) (2 pages)	04/20/1994	b(6)

COLLECTION:

Clinton Presidential Records
National AIDS Policy Office
Kristine Gebbie
OA/Box Number: 3770

FOLDER TITLE:

June Chron Files 1994 [1]

2018-0756-F
jp4822

RESTRICTION CODES

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

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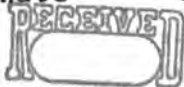
PRM. Personal record misfile defined in accordance with 44 U.S.C. 2201(3).

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- b(9) Release would disclose geological or geophysical information concerning wells [(b)(9) of the FOIA]

Please distribute and disseminate 4/20/94 everywhere appropriate!!!
Cure For AIDS DISCOVERED



MAY - 4 1994

I, George Y. Yatsu, Trinity University, San Antonio, Pre-medical, Chemistry/ Biology, 1976-80, discovered the cure for AIDS in 1984. I announced in May 1985 to Centers for Disease Control (Point of contact- Dr. James Curran) that FASTING cures AIDS, definitively. I explained that HIV virus doesn't cause AIDS as popularly thought but is a recreational drug-induced disease known as Hysteria © 1970 Harrison's Principles to Internal Medicine has the best description I've seen. Even the so-called "harmless" marijuana and LSD (I point out here that these are non-Intravenous drugs) have the potential to induce AIDS to occur in the victim. Drugs taint and contaminate the blood supply (blood donors in the US being drug addicts who sell their blood for more money to buy more drugs) to cause hemophiliac and transfusion AIDS. I fasted 32 days in 1987 to get 100% cured of the disease but missed the mark; fasted 35 days last year in '93 August-October but also missed the mark. I need to point out that fasting on water until one is cured is a tremendous and demanding undertaking, especially in the city where food is highly accessible.

Univ.
Texas
at
Austin
Medical
Science
Library

(b)(6)

on the 35th day of the fast

(b)(6) Because I had become Christian one month prior to learning the cure for AIDS in 1984, I was tempted by Satan and failed to cure the disease or possibly God had other plans for me. The temptation came to me by me renouncing Jesus Christ as my saviour and begin thinking that Buddhism was the true religion. I will undergo another long-term fast soon starting at the end of this month. This fasting, prayer and scripture study is a type of exorcism, if one is theologically versed. AIDS induced by drugs, is a result of demonic possession; whereby drugs open the soul allowing demons of death and death and destruction and torment to enter and take hold. I feel President Clinton should be notified that an Austinite has found the cure and is taking proper steps and measures to sway the scientific community away from the belief that a virus (organism) living antigen) is not responsible for AIDS but recreational drugs are! We therefore need to step-up the war on drugs and other necessary and proper action need to be taken. Possibly the removal of Surgeon General Jocelyn Elders for suggesting the legalization of drugs. The true AIDS etiology or (disease process, pattern and/or sequence) is typically for the homosexual man and heterosexual woman, ingestion of semen under the influence of a recreational drug (marijuana, cocaine, poppers, mushrooms, mescaline, PCP, LSD, speed, quaaludes, crack etc) I repeat, legalization of drugs is out of the question. As you can see, CDC has not acted on my advice and insights into AIDS, since my cure, water fasting, has not been announced and that deaths and damage due to AIDS continues to wreck havoc. The reason sex is connected with AIDS is that drugs are utilized in the gay and counterculture during sex to enhance the sexual experience, much like an aphrodisiac, especially marijuana and cocaine. The entire scientific community is in error to think and presume that HIV virus is the direct cause of AIDS. HIV is merely an opportunistic infection, probably airborne or even the possibility of "spontaneous generation" exists. This virus merely inhabits and thrives in the host organism with a depressed/suppressed immune system. If one were to look at the symptoms of AIDS, the symptoms match one-to-one with the symptoms of Hysteria. The study of AIDS is gravely important in that AIDS or Hysteria is actually a precursor disease to cancer, diabetes, heart disease, arthritis, allergy, varicose veins, pneumonia, Alzheimer, senility, epilepsy, gout, Lou Gehrig's disease, gangrene, pedal edema, colds, migraine, myriad other diseases, you just name it. I hope that you can contact Dr James Curran at CDC for access to my letters concerning AIDS and how they are precursor to illnesses in the annals of medicine. Please alert President

[C-14]

CLINTON LIBRARY PHOTOCOPY

that these are non intravenous drugs, have the potential to cause AIDS to occur in the victim. Drugs taint and contaminate the blood supply (blood donors in the US being drug addicts who sell their blood for more money to buy more drugs) to cause hemophiliac and transfusion AIDS. I fasted 32 days in 1987 to get 100% cured of the disease but missed the mark; fasted 35 days last year in '93 August-October but also missed the mark. I need to point out that fasting on water until one is cured is a tremendous and demanding undertaking, especially in the city where food is highly accessible. I need to explain that I came down with AIDS in San Antonio in October of 1979 after a long-term period of "amotivational syndrome" AIDS being an extreme case of "amotivation", being strung out on drugs is actually incipient AIDS. Because I had become Christian one month prior to learning the cure for AIDS in 1984, I was tempted by Satan and failed to cure the disease or possibly God had other plans for me. The temptation came to me by me renouncing Jesus Christ as my saviour and begin thinking that Buddhism was the true religion. I will undergo another long-term fast soon starting at the end of this month. This fasting, prayer and scripture study is a type of exorcism, if one is theologically versed. AIDS induced by drugs, is a result of demonic possession; whereby drugs open the soul allowing demons of death and death and destruction and torment to enter and take hold. I feel President Clinton should be notified that an Austinite has found the cure and is taking proper steps and measures to sway the scientific community away from the belief that a virus (organism) living antigen) is not responsible for AIDS but recreational drugs rare! We therefore need to step-up the war on drugs and other necessary and proper action need to be taken. Possibly the removal of Surgeon General Jocylyn Elders for suggesting the legalization of drugs. The true AIDS etiology or (disease process, pattern and/or sequence) is typically for the homosexual man and heterosexual woman, ingestion of semen under the influence of a recreational drug (marijuana, cocaine, poppers, mushrooms, mescaline, PCP, LSD, speed, quaaludes, crack etc) I repeat, legalization of drugs is out of the question. AS you can see, CDC has not acted on my advice and insights into AIDS, since my cure, water fasting, has not been announced and that deaths and damage due to AIDS continues to wreck havoc. The reason sex is connected with AIDS is that drugs are utilized in the gay and counterculture during sex to enhance the sexual experience, much like an aphrodisiac, especially marijuana and cocaine. The entire scientific community is in error to think and presume that HIV virus is the direct cause of AIDS. HIV is merely an opportunistic infection, probably airborne or even the possibility of "spontaneous generation" exists. This virus merely inhabits and thrives in the host organism with a depressed/suppressed immune system. If one were to look at the symptoms of AIDS, the symptoms match one-to-one with the symptoms of Hysteria. The study of AIDS is gravely important in that AIDS or HYsteria is actually a precursor disease to cancer, diabetes, heart disease, arthritis, allergy, varicose veins, pneumonia, Alzheimer, senility, epilepsy, gout, Lou Gehrig's disease, gangrene, pedal edema, colds, migraine, myriad other diseases, you just name it. I hope that you can contact Dr James Curran at CDC for access to my letters concerning AIDS and how they are precursor to illnesses in the annals of medicine. Please alert President Clinton and his Cabinet and Congress of this vital information in that it can bring in a breath of optimism we haven't seen in a long time. I feel we need to implement a covert operation./task force and Manhattan Project-AIDS. Please collaborate with CDC, NIH, WHO, NCI, UCLA, Walter Reed, and other prominent rearchists. Or, you can keep it small and simple. The patient simply needs to drink water and maintain complete nutrient deprivation oddly and ironically enough. God Bless You; God the Father, Son Jesus, and Holy Spirit; Triune Godhead. Perfect Love in Our Lord.

Salvation Army/HOBO's
476-2628

(b)(6)

(b)(6)

3, 4, 5 weeks
of Fasting!

on the 35th
day of the fast

Austin
Medical
Science
Library

CLINTON LIBRARY PHOTOCOPY

[004]

THE WHITE HOUSE
WASHINGTON

June 6, 1994

Mr. John S. Roberts
Post Office Box H
Hobart, Indiana 46342

Dear Mr. Roberts:

I have forwarded your letter to Dr. James Curran at the CDC. Any further inquiries should be directed to him. Thank you for writing.

Sincerely,

A handwritten signature in dark ink, appearing to read "Kristine Gebbie". The signature is fluid and cursive, with the first name "Kristine" written in a larger, more prominent script than the last name "Gebbie".

Kristine M. Gebbie, R.N., M.N.
National AIDS Policy Coordinator



MAY - 6 1994

MAY 1, 1994

MS. KRISTINE M. GEBBIE, R.N., M.N.
NATIONAL AIDS POLICY COORDINATOR
THE WHITE HOUSE
WASHINGTON

DEAR MS. GEBBIE,

I NEVER RECEIVED FROM THE CENTERS FOR DISEASE CONTROL ANSWERS
TO THESE QUESTIONS -

1. DOES ACETALDEHYDE DESTROY HIV IN THE TEST TUBE?
2. WAS ACETALDEHYDE ON THAT LIST OF 40,000 COMPOUNDS TESTED
AT FREDERICK, MARYLAND AND BIRMINGHAM, ALABAMA TO SEE
IF ANY COULD DISABLE HIV?

THE LANG STUDY TOOK PLACE AT SIX DIFFERENT LOCALES IN FRANCE.
THE WORD "WINE" IS NEVER MENTIONED IN THE LANG STUDY.

IN THE LANG STUDY, PATIENTS WERE GIVEN DITIOCARB IN THE AMOUNT OF
10mg/kg BODY WEIGHT (IN MY PAPER I MISTAKENLY SIMPLY SAID "10 mg"
IN REFERENCE TO BOTH THE REISINGER AND LANG STUDIES). THE WORD "ACETALDEHYDE"
IS NEVER MENTIONED IN THE LANG STUDY.

I DON'T THINK THAT ANY STUDY WHICH HAS BEEN CONDUCTED RELATIVE TO
DITIOCARB (ANTABUSE, DISULFIRAM, IMUTHIOL, DTC, DITHIOCARB, DIETHYLIDITHIOCARBAMATE)
AND HIV/AIDS HAS EVER BEEN CONDUCTED IN THE FIVE STEP MANNER I SUGGESTED
ON PAGE 2 OF MY APRIL 12, 1994 FORM LETTER (ATTACHED).

SOMETHING OF MONUMENTAL SIGNIFICANCE HAPPENED DURING THE COURSE
OF THE LANG STUDY.

WHAT FACTORS WERE TRULY AT WORK?

YOURS TRULY,

JOHN S. ROBERTS

P.O. BOX H

HOBART, INDIANA 46342

COPIES WITH ATTACHMENTS TO:

MS. BRENDA LEIN, PROJECT INFORM, SAN FRANCISCO
CONGRESSMAN PETER J. VISCLOSKEY, INDIANA
CONGRESSMAN GEORGE DARDEN, GEORGIA
CENTERS FOR DISEASE CONTROL, ATLANTA
MRS. JOYCE M. NORRIS, ACWORTH, GEORGIA
PROFESSOR RUSSELL F. MANKES, THE ALBANY MEDICAL COLLEGE
PROFESSOR SUBBIAH SIVAM, INDIANA UNIVERSITY SCHOOL OF MEDICINE
DR. JACK WHITESCARVER, NATIONAL INSTITUTES OF HEALTH
MR. LARRY KRAMER, NEW YORK CITY
MR. DAVID GOLD, GAY MEN'S HEALTH CRISIS, NEW YORK CITY
MR. BRIAN JANKOWSKI, ACT-UP, NEW YORK CITY
MS. BETTY STERN, FAMILY AIDS SUPPORT NETWORK, CHICAGO
DR. ROBERT JOBST, HOWARD BROWN MEMORIAL CLINIC, CHICAGO
MR. MICHAEL T. JAMES, the KUPONA network, CHICAGO
DR. RICARDO RIVERO, HISPANIC HEALTH ALLIANCE, CHICAGO
DR. ARABINDA DAS, MERRILLVILLE, INDIANA
MR. DAVID B., GARY, INDIANA
MRS. ELIZABETH GLASER, PEDIATRIC AIDS FOUNDATION, SANTA MONICA
MR. JOHN S. JAMES, "AIDS TREATMENT NEWS", SAN FRANCISCO
CHICAGO TRIBUNE, HEALTH/MEDICAL EDITOR
CHICAGO SUN-TIMES, HEALTH/MEDICAL EDITOR
MR. GARRY MEIER, WLUP-FM, CHICAGO
DR. GARY NULL, NEW YORK CITY
"TONY BROWN PRODUCTIONS", NEW YORK CITY
NEW YORK TIMES, HEALTH/MEDICAL EDITOR
MS. PAM ZEKMAN, WBBM-TV, CHICAGO
MR. M. BRUCE JACKMAN, R.N., WAUKEGAN, ILLINOIS
MS. SHERRY HOLZMAN, AIDS SUPPORT GROUP, LAPORTE, INDIANA
COOK COUNTY MEDICAL SOCIETY, ILLINOIS
LAKE COUNTY MEDICAL SOCIETY, INDIANA
PORTER COUNTY MEDICAL SOCIETY, INDIANA

THE WHITE HOUSE
WASHINGTON

February 22, 1994

Mr. John S. Roberts
Post Office Box H
Hobart, Indiana 46342

Dear Mr. Roberts:

I received your second letter concerning acetaldehyde. Thank you for writing me again with your concerns. Please stay in touch.

Sincerely,

A handwritten signature in cursive script, appearing to read "Kristine Gebbie".

Kristine M. Gebbie, R.N., M.N.
National AIDS Policy Coordinator

ENCYCLOPEDIA AMERICANA, 1991 EDITION, VOLUME 1, PAGE 518:

"UNFORTUNATELY, HOWEVER, THE DISULFIRAM/ALCOHOL REACTION CAN BE SET OFF BY ALCOHOL USED IN FOOD PREPARATIONS OR BY INHALED FUMES (AS FROM AFTER-SHAVE LOTION)."

IN OTHER WORDS, A PATIENT WHO HAD DITIOCARB IN HIS LIVER COULD GET UP IN THE MORNING, HAVE A GLASS OF ORANGE JUICE, HAVE A CUP OR TWO OF COFFEE, SMOKE A CIGARETTE, SHAVE AND APPLY AFTER-SHAVE TO HIS FACE AND AUTOMATICALLY THE LEVEL OF UNMETABOLIZED ACETALDEHYDE IN HIS BLOOD WOULD HAVE BEEN INCREASED.

THROUGHOUT THE DAY IF HE ATE SOME FRUIT OR SIMPLY SMELLED AUTO EXHAUST FUMES HIS LEVEL OF UNMETABOLIZED ACETALDEHYDE WOULD BE INCREASED.

IF THE PATIENT TOOK HIS DITIOCARB CAPSULE ON SUNDAY EVENING AND SIX DAYS LATER ATE AN APPLE ON SATURDAY AFTERNOON, THERE WOULD STILL BE ENOUGH OF A DITIOCARB RESIDUE IN THAT PATIENT'S LIVER TO PREVENT NORMAL METABOLIZATION OF ACETALDEHYDE; 98.43% OF IT WOULD NOT BE METABOLIZED IN 18.6 MINUTES; PERHAPS 19.6 MINUTES WOULD BE REQUIRED TO DO THE JOB; THIS MEANS THAT ON THIS PARTICULAR SATURDAY AFTERNOON A TOXIC POISON WOULD BE FLOWING FREE THROUGH THE BLOOD OF THIS PATIENT FOR AN EXTRA MINUTE.

IN OTHER WORDS, THROUGHOUT THE ENTIRE COURSE OF THE WEEK VARYING AMOUNTS OF UNMETABOLIZED ACETALDEHYDE COULD BE IN THE BLOOD OF THOSE PATIENTS WHO TOOK DITIOCARB IF THOSE PATIENTS WERE INDEED EXPOSED TO THE FACTORS WHICH ARE LISTED ON PAGE 374 OF THE "JOURNAL OF APPLIED TOXICOLOGY" AND ON PAGE 518, VOLUME 1 OF THE ENCYCLOPEDIA AMERICANA.

GRANTED, IT MIGHT BE A MINUTE AMOUNT, NOT ENOUGH TO MAKE THE PATIENT NAUSEOUS, BUT THE FACT IS INDISPUTABLE - ACETALDEHYDE, IN ANY AMOUNT, CANNOT BE PROPERLY METABOLIZED BY THE LIVER IN A NORMAL MANNER IF DITIOCARB IS PRESENT IN ANY AMOUNT.

I THINK IT WAS THIS UNMETABOLIZED ACETALDEHYDE THAT WAS AT WORK IN THE REISINGER AND HERSH STUDIES: IT IS MY HYPOTHESIS THAT THE HIV VIRUS ITSELF WAS BEING DESTROYED BY THIS HIGHLY TOXIC POISON.

THE SAME CAN BE SAID FOR THE LANG STUDY; HOWEVER, I THINK THAT THE QUANTITY OF UNMETABOLIZED ACETALDEHYDE BEING GENERATED IN THESE FRENCH PATIENTS WAS GREATER AND THEREFORE MORE EFFECTIVE. HOW COULD THIS HAVE COME ABOUT?

BUT FIRST -

IN THE REISINGER STUDY 15 PATIENTS RECEIVED 5mg OF DITIOCARB (DTC) INTRAVENOUSLY ONCE A WEEK AND 15 PATIENTS RECEIVED 10mg OF DITIOCARB (DTC) ORALLY ONCE A WEEK. IN THE LANG STUDY ALL 83 PATIENTS RECEIVED 10mg OF DITIOCARB(DTC) ORALLY ONCE A WEEK.

NOW WE HAVE SOMETHING TO COMPARE.

WHAT DOES REISINGER HAVE TO SAY ABOUT THOSE PATIENTS WHO RECEIVED 10mg OF DITIOCARB (DTC) ONCE A WEEK? (P.682)

"ORALLY DTC TENDED TO DECREASE HIV-RELATED DISEASES, BUT THE DIFFERENCE FROM THE ORAL PLACEBO GROUP WAS NOT SIGNIFICANT."

NOW, LET US LOOK AT SOME OF THE OBSERVATIONS WHICH LANG MAKES ABOUT HIS PATIENTS; REMEMBER, THEY TOO RECEIVED 10mg OF DITIOCARB (DTC) ORALLY ONCE A WEEK:

- (P.702) - "THE DISEASE DID NOT PROGRESS TO CDC-DEFINED ACQUIRED IMMUNODEFICIENCY SYNDROME IN THE DITIOCARB GROUP BUT DID SO IN 4 PATIENTS IN THE PLACEBO GROUP (3 BETWEEN WEEK 0 AND 16, 1 BETWEEN WEEK 17 AND 32). DITIOCARB WAS ALSO ASSOCIATED TO A SIGNIFICANTLY GREATER EXTENT THAN PLACEBO WITH RELIEF OF CONSTITUTIONAL SYMPTOMS, IMPROVEMENT IN CLINICAL STATUS (INCLUDING SHRINKAGE OF ENLARGED SPLEEN AND LYMPH NODES), AND IMPROVEMENT IN IMMUNE FUNCTION (AS MEASURED BY CD4+ CELL COUNT AND SKIN TEST REACTIVITY). WHEN PLACEBO WAS REPLACED BY DITIOCARB, SIMILAR IMPROVEMENTS WERE OBSERVED, WHEREAS SYMPTOMS SLOWLY REAPPEARED AND CD4+ CELL LEVELS PROGRESSIVELY DECLINED WHEN DITIOCARB TREATMENT WAS REPLACED BY PLACEBO."
- (P.704) - "ALL THE 9 PATIENTS IN THE DITIOCARB GROUP WITH A HISTORY OF WEIGHT LOSS AT ENTRY REGAINED NORMAL WEIGHT AFTER 16 WEEKS' TREATMENT. THE SPLEEN BECAME IMPALPABLE IN 4 OF THE 7 DITIOCARB RECIPIENTS, BUT IN NONE OF 8 PLACEBO RECIPIENTS, WITH SPLENOMEGALY AT ENTRY."
- (P.704) - "WHEN CHANGE IN CLINICAL STATUS WAS SCORED AS IMPROVED, STABLE, OR WORSE BY THE PHYSICIANS AFTER 16 WEEKS, 42% OF DITIOCARB RECIPIENTS HAD IMPROVED COMPARED WITH ONLY 5% IN THE PLACEBO GROUP ($p < 0.01$)."
- (P.704) - LANG TABLE II (SEE MY PAGE 13) HIGHLIGHTS THE "DISAPPEARANCE OF CONSTITUTIONAL SYMPTOMS" AND THEY ARE "PERSISTENT DIARRHOEA, WEIGHT LOSS, PERSISTENT FEVER". ALSO NOTE "DISAPPEARANCE OF SPLENOMEGALY".

AND TO TOP IT OFF, THE LANG STUDY SHOWED AN INCREASE IN THE CD4-POSITIVE LYMPHOCYTES (T-HELPER CELLS) - SEE LANG TABLE III (MY PAGE 13) AND STATES (P.705):

"THE PRESENT FINDINGS, AND THOSE ACCOMPANYING LONG-TERM ADMINISTRATION OF DITIOCARB (3 YEARS), CLEARLY SHOW THAT THE CD4+ CELL-DEFECT IS NOT AGGRAVATED. IN FACT, THE REVERSE OCCURRED, WITH DITIOCARB PRODUCING AN INCREASE IN CD4+ CELLS AND IMPROVEMENT IN CONSTITUTIONAL SYMPTOMS OF AIDS-RELATED COMPLEX. FURTHERMORE, PRELIMINARY DATA IN A SMALL NUMBER OF PATIENTS INDICATE THAT DITIOCARB DOES NOT ENHANCE HIV REPLICATION IN VITRO OR IN VIVO."

WHEREAS WITH REISINGER (P.681) THESE CELLS "..... DECREASED IN PERIPHERAL BLOOD IN ALL TREATMENT GROUPS DURING THE STUDY."

SEE ALSO REISINGER TABLE II (MY PAGE 13).

WHAT IN THE WORLD COULD HAVE ACCOUNTED FOR THIS DRAMATIC DIFFERENCE IN RESULTS?

IN BOTH THE REISINGER AND HERSH STUDIES THE SUBJECT OF ALCOHOL IS MENTIONED ALMOST AS AN ASIDE.

IN THE LANG STUDY IT IS NOT MENTIONED AT ALL.

LATE FRIDAY AFTERNOON, MAY 14, THIS THOUGHT OCCURRED TO ME WHILE I WAS REVIEWING THE LANG STUDY:

- MOST FRENCHMEN DRINK WINE WITH THEIR MEALS. -

DOMINIQUE NORBROOK, PASSPORT TO FRANCE, PAGE 20:

"ALTHOUGH MEALS IN FRENCH RESTAURANTS MAY NEED A LOT OF ELABORATE PREPARATION, EVERYDAY COOKING AT HOME IS QUICK, SIMPLE AND TASTY. A MEAL MAY CONSIST OF SEVERAL COURSES, EATEN WITH SLICES OF FRESH, CRUSTY BREAD AND ACCOMPANIED BY WINE."

SUNDAY AFTERNOON, MAY 16, AS I COMPARED AND CONTRASTED THESE THREE STUDIES FOR THE UMPTEENTH TIME IT DAWNED UPON ME - IT DAWNED UPON ME WITH CRYSTAL CLARITY -

IF YOU TAKE A MINUTE AND STEP BACK AND LOOK AT IT FROM A CERTAIN PERSPECTIVE YOU CAN SEE WHAT THE LANG STUDY COULD BE INTERPRETED AS REPRESENTING (ASSUMING, OF COURSE, THAT THE FRENCH DITIOCARB PATIENTS WERE DRINKING WINE WITH THEIR MEALS) -

- THE LANG STUDY REPRESENTS THE SUCCESS OF THE "DISULFIRAM/ALCOHOL PROCEDURE".

1. P.702 - "THE DISEASE DID NOT PROGRESS....."
2. P.704 - "ALL THE 9 PATIENTS IN THE DITIOCARB GROUP....."
3. P.704 - "WHEN CHANGE IN CLINICAL STATUS WAS SCORED....."
4. P.704 - LANG TABLE II
5. P.705 - ".....WITH DITIOCARB PRODUCING AN INCREASE IN CD4+ CELLS....."

WINE DRINKING WITH MEALS IS SO MUCH A PART OF THEIR CULTURE THAT I THINK THE FRENCH RESEARCHERS SIMPLY OVERLOOKED ALCOHOL AS A FACTOR AND DID NOT REALIZE THAT AN EXCESS AMOUNT OF UNMETABOLIZED ACETALDEHYDE WAS BEING GENERATED WHENEVER THE DITIOCARB PATIENTS DRANK WINE WITH THEIR MEALS.

OTHER THAN INTERVIEWING THE PATIENTS THEMSELVES, WHAT CLUES DO WE HAVE THAT THIS MIGHT HAVE BEEN THE CASE?

SIDE EFFECTS AND ADVERSE REACTIONS TO DITIOCARB

SIDE EFFECTS AND ADVERSE REACTIONS WERE NOT FACTORS IN THE REISINGER AND HERSH STUDIES. I STILL CONCLUDED, HOWEVER, THAT THERE MUST HAVE BEEN A SMALL OR MINUTE AMOUNT OF UNMETABOLIZED ACETALDEHYDE AT WORK DESTROYING THE HIV VIRUS ITSELF.

LANG STATES (P.705):

"DITIOCARB DID NOT INDUCE MORE MAJOR ADVERSE CLINICAL OR BIOLOGICAL REACTIONS THAN PLACEBO (TABLE IV), ALTHOUGH IT WAS ASSOCIATED MORE FREQUENTLY WITH MINOR SIDE-EFFECTS — UNPLEASANT TASTE, ABDOMINAL DISCOMFORT, NAUSEA, OR MALAISE."

NOW LET'S LOOK AT LANG TABLE IV (SEE MY PAGE 13).

THERE IS ONE SIDE-EFFECT THAT I WANT TO FOCUS UPON — "NAUSEA". YOU WILL NOTE THAT 19% OF THE DITIOCARB PATIENTS SUFFERED NAUSEA WHEREAS THE REISINGER STUDY NOTED (P.681) THAT:

"NAUSEA AND FATIGUE WERE INFREQUENT IN BOTH DTC GROUPS."

REMEMBER — THE REISINGER "ORAL" GROUP GOT THE SAME DOSAGE AS DID ALL OF THE LANG "ORAL" GROUP — 10mg/kg PER PATIENT.

IF YOU LOOK BACK IN THIS FILE TO THE FEBRUARY 18 LETTER THAT I WROTE TO DR. BADER YOU WILL SEE A PAGE WHERE I LISTED THREE DIFFERENT DESCRIPTIONS WHICH I TOOK FROM THREE DIFFERENT ENCYCLOPEDIAS TO DESCRIBE THE "DISULFIRAM/ALCOHOL PROCEDURE".

IN ALL THREE DESCRIPTIONS IS FOUND THE WORD — "NAUSEA".

IT IS ON THIS BASIS AND LOOKING AT THE OTHER SIDE-EFFECTS LISTED IN LANG TABLE IV THAT I CONCLUDE THAT THE FRENCH DITIOCARB PATIENTS WERE EXPERIENCING "DISULFIRAM/ALCOHOL" REACTIONS.

LET'S SAY I AM CORRECT. LET'S SAY THAT THE "DISULFIRAM/ALCOHOL PROCEDURE" IS THE KEY TO THE ATTACK ON THE HIV VIRUS. HOW THEN SHOULD THE PROCEDURE BE IMPLEMENTED?

ON PAGE 22 OF HIS BOOK 100 QUESTIONS AND ANSWERS ABOUT AIDS — A GUIDE FOR YOUNG PEOPLE, MICHAEL THOMAS FORD STATES:

"TO MAKE THINGS WORSE, THE AIDS VIRUS MAY ENTER A CELL AND BECOME DORMANT, WAITING INSIDE THE CELL TO BE USED AT A LATER TIME. IT CAN STAY THERE AS LONG AS SIX MONTHS WITHOUT THE BODY RECOGNIZING ITS PRESENCE. HIV IS ALSO ABLE TO MUTATE, OR CHANGE ITS FORM, VERY EASILY. THIS MAKES IT VERY DIFFICULT FOR THE IMMUNE SYSTEM TO DESIGN AN EFFECTIVE PLAN OF ATTACK. THE IMMUNE SYSTEM FORMS DEFENSES BASED ON THE INVADING SUBSTANCE'S STRUCTURE. WHEN THAT STRUCTURE CHANGES, WHATEVER DEFENSES HAVE BEEN DESIGNED BECOME USELESS. WHEN HIV MUTATES, THE LYMPHOCYTES THAT HAVE BEEN PROGRAMMED TO ATTACK AND KILL IT NO LONGER RECOGNIZE IT, AND THE AIDS VIRUS CAN MOVE FREELY THROUGHOUT THE BODY UNTIL NEW DEFENSES ARE CREATED."

AND ON PAGE 28 HE STATES:

"SOME PEOPLE DEVELOP AN ACUTE FLULIKE SYNDROME SIMILAR TO MONONUCLEOSIS, WITHIN TWO TO THREE WEEKS OF BECOMING INFECTED WITH HIV. THIS IS THEN FOLLOWED BY A LONG PERIOD DURING WHICH THE PERSON IS ASYMPTOMATIC, OR HAS NO SYMPTOMS AT ALL. THIS PERIOD CAN LAST FOR MANY YEARS. THIS IS DANGEROUS BECAUSE DURING THIS TIME AN INFECTED PERSON MAY UNKNOWINGLY PASS THE VIRUS ON TO OTHER PEOPLE. DURING THIS ASYMPTOMATIC PERIOD, THE VIRUS WILL CONTINUE TO MULTIPLY. FINALLY, MAYBE AS LONG AS EIGHT TO TEN YEARS AFTER THE INITIAL INFECTION, THE PERSON WILL ONCE AGAIN DEVELOP SYMPTOMS OF HIV INFECTION."

GATEWAY

HIV / AIDS

**CAN THE
ANTABUSE TREATMENT
HELP?**

(219) 763-1933

DATE: April 12, 1994

TO: MR John S James
"Aids Treatment News"
San Francisco

CHICAGO TRIBUNE
Health/Medical
Editor

CHICAGO Sun-Times
Health/Medical
Editor

THIS BILLBOARD ADVERTISEMENT IS PRESENTLY LOCATED AT:

1443 W. Belmont, Chicago

1. WITH REFERENCE TO ACETALDEHYDE, THE NATIONAL INSTITUTES OF HEALTH STATES:

"THE MOLECULES YOU SUGGEST ARE NORMAL METABOLITES FORMED DURING
NORMAL BODY FUNCTIONING, AND WOULD HAVE NO EFFECT ON HIV OR AIDS."

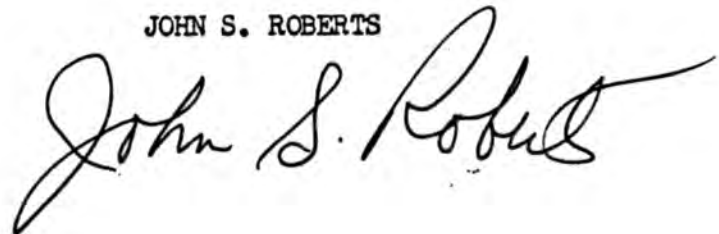
2. IN THE LANG STUDY, 42% OF THE HIV PATIENTS SHOWED IMPROVEMENT IN THEIR
CLINICAL STATUS.

3. IN THE LANG STUDY, ONE VARIABLE WAS NOT TAKEN INTO ACCOUNT - THE AMOUNT
OF ALCOHOL WHICH THESE FRENCH PATIENTS DRANK EVERYDAY.

4. I THINK A SIXTEEN WEEK CLINICAL TRIAL COULD ADEQUATELY TEST THE
ANTABUSE TREATMENT (THE "DISULFIRAM/ALCOHOL PROCEDURE").

5. CAN THIS QUESTION BE ANSWERED - WHAT ACCOUNTED FOR THE DRAMATIC DIFFERENCE
IN RESULTS OBTAINED BY THE REISINGER ("THE LANCET", MARCH 24, 1990, PAGES 679-682)
AND LANG ("THE LANCET", SEPTEMBER 24, 1988, PAGES 702-706) STUDIES?

JOHN S. ROBERTS



COPIES WITH ENCLOSURES TO:

MS. BRENDA LEIN, PROJECT INFORM, SAN FRANCISCO
CONGRESSMAN PETER J. VISCLOSKEY, INDIANA
CONGRESSMAN GEORGE DARDEN, GEORGIA
MS. KRISTINE M. GEBBIE, R.N., M.N., NATIONAL AIDS POLICY COORDINATOR
CENTERS FOR DISEASE CONTROL, ATLANTA
MRS. JOYCE M. NORRIS, ACWORTH, GEORGIA
PROFESSOR RUSSELL F. MANKES, THE ALBANY MEDICAL COLLEGE
PROFESSOR SUBBIAH SIVAM, INDIANA UNIVERSITY SCHOOL OF MEDICINE
DR. JACK WHITESCARVER, NATIONAL INSTITUTES OF HEALTH
MR. LARRY KRAMER, NEW YORK CITY
MR. DAVID GOLD, GAY MEN'S HEALTH CRISIS, NEW YORK CITY
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MR. MICHAEL T. JAMES, the KUPONA network, CHICAGO
DR. RICARDO RIVERO, HISPANIC HEALTH ALLIANCE, CHICAGO
DR. ARABINDA DAS, MERRILLVILLE, INDIANA
MR. DAVID B., GARY, INDIANA

MARCH 1, 1994

MS. BRENDA LEIN
COORDINATOR, INFORMATION AND ADVOCACY DEPARTMENTS
PROJECT INFORM
1965 MARKET STREET, SUITE 220
SAN FRANCISCO, CALIFORNIA 94103

DEAR MS. LEIN,

ON FEBRUARY 25 I WENT TO MY POST OFFICE BOX AND FOUND YOUR LETTER,
DATED 19 JANUARY 1994, POSTMARKED FEB 18 '94.

ON JANUARY 26 I WROTE TO DR. DAS, AND ON FEBRUARY 18 I PLACED AN ORDER
WITH GATEWAY OUTDOOR ADVERTISING.

THE ADVERTISEMENT WILL READ:

HIV/AIDS

CAN THE
ANTABUSE TREATMENT
HELP?

219-763-1933

YOU HAVE MADE A MISTAKE ABOUT SOMETHING -

IN YOUR LETTER YOU STATED:

"PLEASE NOTE THAT THE LANGE STUDY WHICH YOU REFERRED TO WAS
CONDUCTED WITH THE DRUG IMUTHIOL AND THE MAIN CONCLUSION
OF HIS 1991 ABSTRACT IS THAT THE PRESENCE OF ACID-LABILE
ALPHA INTERFERON WAS CORRELATED WITH UNFAVORABLE PROGNOSIS."

IF YOU LOOK BACK THROUGH EVERYTHING I HAVE SENT TO YOU, YOU WILL NOTE
THAT THE STUDY TO WHICH I ALWAYS REFERRED WAS THAT OF LANG (JEAN-MARIE)
AND NOT THAT OF MICHAEL LANGE, M.D., OF ST. LUKE'S-ROOSEVELT HOSPITAL
CENTER AT COLUMBIA UNIVERSITY.

I MIGHT BE MISTAKEN, BUT I THOUGHT I MAILED A COPY OF IT TO YOU.

IN ANY EVENT, I AM INCLUDING IN THIS LETTER A COPY OF THE LANG STUDY,
"THE LANCET", SEPTEMBER 24, 1988, PAGES 702-706; YOUR LETTER; MY LETTER
TO DR. DAS; MY ORDER TO GATEWAY OUTDOOR ADVERTISING; AND MY STATEMENT
OF SEVEN POINTS.

AT THIS TIME I THINK THAT THE LANG STUDY SHOULD BE COMPARED AGAIN
WITH THE REISINGER STUDY, "THE LANCET", MARCH 24, 1990, PAGES 679-682.
I WANT TO MAKE PARTICULAR REFERENCE TO THOSE PATIENTS WHO RECEIVED
10mg/kg BODY WEIGHT OF DITIOCARB ORALLY ONCE A WEEK.

CAN THERE BE ANY DOUBT? THERE IS A QUANTAM DIFFERENCE BETWEEN THE RESULTS OF THE LANG AND REISINGER STUDIES.

CAN ANYONE AT THE NATIONAL INSTITUTES OF HEALTH ACCOUNT FOR THE DIFFERENCE?

CAN ANYONE AT THE CENTERS FOR DISEASE CONTROL ACCOUNT FOR THE DIFFERENCE?

CAN ANYONE AT ANY MEDICAL RESEARCH FACILITY ACCOUNT FOR THE DIFFERENCE?

WHY DIDN'T REISINGER'S 10mg/kg PATIENTS SHOW THE SAME DRAMATIC IMPROVEMENT THAT LANG'S 10mg/kg PATIENTS DID?

WHAT CAUSED THE DIFFERENCE? SHOULD THE LANG STUDY BE LOOKED UPON AS MERELY A FLUKE?

IT IS MY GUESS, THEORY, HUNCH, CONJECTURE, HYPOTHESIS, ETC. THAT IT ALL HAS SOMETHING TO DO WITH DITIOCARB (A DERIVATIVE OF ANTABUSE), ALCOHOL AND UNMETABOLIZED ACETALDEHYDE.

ON DECEMBER 6, 1993, I WROTE TO THE CENTER(S) FOR DISEASE CONTROL IN ATLANTA WHEREIN I ASKED:

"AT THIS TIME, WOULD YOU PLEASE ANSWER THESE QUESTIONS FOR ME:

1. DOES ACETALDEHYDE DESTROY HIV IN THE TEST TUBE?
2. WAS ACETALDEHYDE ON THAT LIST OF 40,000 CHEMICAL COMPOUNDS TESTED AT FREDERICK, MARYLAND AND BIRMINGHAM, ALABAMA TO SEE IF ANY COULD DISABLE HIV?

IN ADDITION, MIGHT YOU HAVE A SPECULATIVE ANSWER TO EXPLAIN THE DRAMATIC RESULTS OBTAINED BY THE LANG STUDY?"

I NEVER RECEIVED A REPLY.

IF I HAD THE LICENSE AND WHEREWITHAL, THIS IS THE MANNER IN WHICH I WOULD ADMINISTER A CLINICAL TRIAL OF THE "DISULFIRAM/ALCOHOL PROCEDURE":

1. ADVISE THE PATIENTS TO ABSTAIN FROM ALCOHOL ENTIRELY EXCEPT FOR THE SMALL AMOUNT THEY WOULD DRINK TO TRIGGER THE ANTABUSE REACTION.
2. AS DID LANG, ADMINISTER 10mg/kg BODY WEIGHT OF DITIOCARB ORALLY ONCE A WEEK.
3. UNDER CLOSELY CONTROLLED MEDICAL SUPERVISION, INITIATE THE ANTABUSE REACTION TWICE A WEEK.
4. CONDUCT THE STUDY FOR SIXTEEN WEEKS.
5. CHECK THE RESULTS.

MY EFFORTS HAVE BEEN AND WILL CONTINUE TO BE FOCUSED ON HAVING SOMEONE/SOMEWHERE CONDUCT A CLINICAL TRIAL OF THE "DISULFIRAM/ALCOHOL PROCEDURE". I HAVE ALWAYS MAINTAINED THAT I WILL BE THE FIRST PERSON TO SHUT UP ABOUT ALL OF THIS IF A CLINICAL TRIAL PROVES ME WRONG.

IF ANYONE EVER WANTS MORE INFORMATION FROM ME AFTER I HAVE READ TO THEM MY "SEVEN POINTS", I WILL SEND A COPY OF THIS LETTER ALONG WITH YOUR LETTER IN WHICH YOU HAVE POINTED OUT THE RESULTS OF AN EXTENSIVE FRENCH STUDY INVOLVING 2,333 PERSONS.

THE RESULTS OF THIS STUDY DO INDEED SEEM TO ABNEGATE WHAT I HAVE BEEN IMPLYING ABOUT ANTABUSE (DISULFIRAM, DITIOCARB, IMUTHIOL, DTC, DITHIOCARB, DIETHYLIDITHIOCARBAMATE).

HOWEVER, AS LONG AS THIS SUBSTANCE IS IN THE BODY, SOMETHING UNUSUAL HAPPENS TO THE METABOLIZATION OF ALCOHOL.

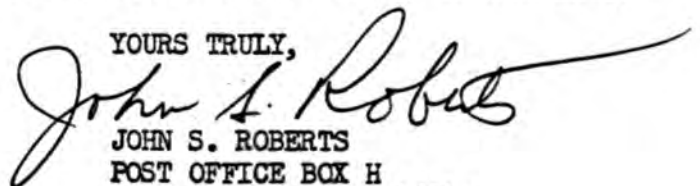
IF THE DIFFERENCE BETWEEN THE LANG AND REISINGER STUDY CANNOT BE ADEQUATELY EXPLAINED, I THINK A CLINICAL TRIAL IS STILL WORTHWHILE, THIS TIME WITH THE FOCUS BEING UPON ANTABUSE, ALCOHOL AND UNMETABOLIZED ACETALDEHYDE.

I WOULD CONSIDER IT TO BE UNETHICAL, CALLOUS AND IRRESPONSIBLE OF MYSELF IF I DID NOT MAKE KNOWN TO THE PUBLIC MY THOUGHTS ABOUT THE LANG STUDY.

TO PUT IT IN ITS SIMPLEST TERMS - IF I HAD HIV/AIDS I WOULD FEEL CHEATED AND BETRAYED IF NO ONE HAD TOLD ME ABOUT THE LANG STUDY.

TO PUT IT IN ITS SIMPLEST TERMS - IF I HAD HIV/AIDS I WOULD GO TO MY DOCTOR AND TELL HIM TO START THE "DISULFIRAM/ALCOHOL PROCEDURE" IMMEDIATELY.

YOURS TRULY,



JOHN S. ROBERTS
POST OFFICE BOX H
HOBART, INDIANA 46342
219-763-1933

COPIES WITH ENCLOSURES TO:

CONGRESSMAN PETER J. VISCLOSKEY, INDIANA
CONGRESSMAN GEORGE DARDEN, GEORGIA
MS. KRISTINE M. GEBBIE, R.N., M.N., NATIONAL AIDS POLICY COORDINATOR
CENTERS FOR DISEASE CONTROL, ATLANTA
MRS. JOYCE M. NORRIS, ACWORTH, GEORGIA
PROFESSOR RUSSELL F. MANKES, THE ALBANY MEDICAL COLLEGE
PROFESSOR SUBBLIAH SIVAM, INDIANA UNIVERSITY SCHOOL OF MEDICINE
DR. JACK WHITESCARVER, NATIONAL INSTITUTES OF HEALTH
MR. LARRY KRAMER, NEW YORK CITY
MR. DAVID GOLD, GAY MEN'S HEALTH CRISIS, NEW YORK CITY
ACT-UP, NEW YORK CITY
MS. BETTY STERN, FAMILY AIDS SUPPORT NETWORK, CHICAGO
DR. ROBERT JOBST, HOWARD BROWN MEMORIAL CLINIC, CHICAGO
MR. MICHAEL T. JAMES, the KUPONA network, CHICAGO
DR. RICARDO RIVERO, HISPANIC HEALTH ALLIANCE, CHICAGO
DR. ARABINDA DAS, MERRILLVILLE, INDIANA
MR. DAVID B., GARY, INDIANA

P.S. My initial advertisement said -
"Can HIV/AIDS be cured by
Antabuse treatment?"

PROJECT *inform*

19 January 1994

Mr. John S. Roberts
Post Office Box H
Hobart, Indiana 46342

Mr. Roberts:

Over the past several months you have sent me copies of several letters you have sent to various Government researches and policy-makers regarding the further study of antabuse for the treatment of HIV.

Attached please find several articles outlining the clinical study of diethylidithiocarbamate, DTC. DTC, sometimes called ditiocarb, was sold in France and in many buyer's clubs under the trade name Imuthiol. Antabuse, a prescription drug used to treat alcoholism, is a close relative of DTC. Shortly after taking Antabuse, only DTC can be detected in the blood. This has been confirmed by the manufacturer and independent sources including DTC researchers.

I am most concerned about your assertion that HIV/AIDS can be "cured" by antabuse treatment. Please note that the Lange study which you referred to was conducted with the drug Imuthiol and the main conclusion of his 1991 abstract is that the presence of acid-labile alpha interferon was correlated with unfavorable prognosis. Also note that in 2,333 person, placebo-controlled study of Imuthiol conducted in France, volunteers receiving Imuthiol were more likely to progress to ARC, progress to AIDS, and experienced more opportunistic infections than those receiving placebo. Proposing that this approach may "cure" HIV/AIDS, when data suggest it may worsen the course of disease is unethical and irresponsible to the community of people living with HIV/AIDS facing difficult treatment decisions. People need to be given all information on a given approach to HIV/AIDS therapies in order to make informed treatment decisions.

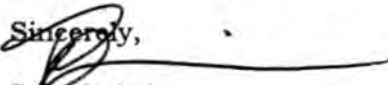
As a result of the above mentioned study, Imuthiol was withdrawn by the sponsor and people taking the drug were urged to discontinue use. In New Zealand, the only country where the drug had been approved for marketing, sales were discontinued.

Several clinical trials of DTC have been conducted. A number of small, uncontrolled, studies published in 1985 raised initial optimism over the use of DTC as a possible therapy for HIV (Lancet 12/21/85, Lancet 11/9/85). Additional small studies, one conducted at the University of Arizona, and a multi-center trial in France, provided early data-supporting further study. Despite these initial encouraging results, the large 2,333 person study conducted in France, where 1669 volunteers received DTC and 664 received placebo, resulting in a significant increased risk of AIDS in those people receiving DTC, weighs heavily in evaluating Antabuse as an HIV/AIDS therapy.

While there may be a yet undiscovered use of Antabuse in the management of HIV/AIDS, it is clearly not a cure. Further study of Antabuse or DTC should be approached with great caution, with all study participants being informed of the potential risk of therapy.

I encourage you to consider these issues when propagating support for further studies of Antabuse. Additionally, and perhaps most importantly, I discourage you from omitting the 1991 results of the French study when propagating Antabuse as a "cure" to people living with HIV/AIDS.

Sincerely,



Brenda Lein

Coordinator, Information and Advocacy Departments

cc: Centers for Disease Control
 Congressman Peter J. Visclosky, Indiana
 Congressman George Darden, Georgia
 Mrs. Joyce M. Norris
 Professor Russell F. Mankes, Albany Medical College
 Professor Subbiah Sivam, Indiana University School of Medicine
 Dr. Jack Whitescarver, NIH
 Mr. Larry Kramer
 Mr. David Gold, GMHC
 Ms. Betty Stern, Family AIDS Support Network, Chicago
 Dr. Robert Jobst, Howard Brown Memorial Clinic, Chicago
 Mr. Michael T. James, The KUPONA Network, Chicago
 Dr. Ricardo Rivero, Hispanic Health Alliance, Chicago
 Ms. Kristine Gebbie, National AIDS Policy Coordinator
 ACT UP/New York

BILLBOARD ADVERTISEMENT

HIV/AIDS
CAN THE
ANTABUSE TREATMENT
HELP?
219-763-1933

ANYONE WHO CALLS WILL BE TOLD THIS:

"THIS IS THE MESSAGE ABOUT AIDS AND ANTABUSE -

I HAVE SEVEN POINTS TO MAKE:

NUMBER ONE: THE ANTABUSE TREATMENT IS AN ESTABLISHED MEDICAL PROCEDURE
RELATIVE TO THE TREATMENT OF ALCOHOLISM.

NUMBER TWO: THE ANTABUSE TREATMENT POISONS THE BODY WITH A
HIGHLY TOXIC CHEMICAL KNOWN AS ACETALDEHYDE.

NUMBER THREE: IT IS MY THEORY THAT WHILE ACETALDEHYDE IS POISONING
THE BODY IT WILL AT THE SAME TIME DESTROY THE HIV VIRUS.

NUMBER FOUR: MY THEORY IS BASED UPON A FRENCH RESEARCH STUDY IN WHICH
42% OF HIV PATIENTS SHOWED IMPROVEMENT IN THEIR
CLINICAL STATUS.

NUMBER FIVE: THIS STUDY WAS PUBLISHED IN THE MEDICAL JOURNAL CALLED
'THE LANCET', SEPTEMBER 24, 1988 ISSUE, PAGE 702.

NUMBER SIX: IF THE FRENCH PATIENTS IN THIS STUDY DRANK WINE WITH
THEIR MEALS, THEY EXPERIENCED THE ANTABUSE TREATMENT
EVERYDAY THROUGHOUT THE ENTIRE SIXTEEN WEEKS OF THE STUDY.

NUMBER SEVEN: IF I HAD TESTED HIV POSITIVE OR HAD FULL BLOWN AIDS,
I WOULD GO TO MY DOCTOR IMMEDIATELY AND ASK HIM
ABOUT THE ANTABUSE TREATMENT."

"IF YOU OR YOUR DOCTOR WOULD LIKE MORE INFORMATION, PLEASE WRITE TO

JOHN S. ROBERTS
POST OFFICE BOX H
HOBART, INDIANA 46342

"IF YOU WISH TO LEAVE A MESSAGE, PLEASE DO SO AT THE SOUND
OF THE BEEP. THANK YOU."

THE WHITE HOUSE

WASHINGTON

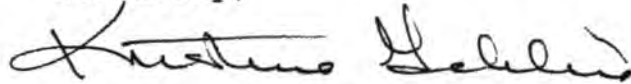
June 6, 1994

Mr. Mark Harp
107 North Holmes
Memphis, Tennessee 38111

Dear Mr. Harp:

Thank you for taking the time to share your
perspectives on government and the planet.

Sincerely,

A handwritten signature in dark ink, appearing to read "Kristine Gebbie". The signature is fluid and cursive, with the first name "Kristine" and last name "Gebbie" clearly distinguishable.

Kristine M. Gebbie, R.N., M.N.
National AIDS Policy Coordinator

Dear Mr Harp

Thank you for taking time to
share your perspectives on
government & the planet.

Sincerely

4-29-94

Dear Ms. Gebbie:

I am glad to share with
you my articles. Please share with
me a comment on these. Also,
kindly forward this material to
Tipper Gore.

Thank you.

Sincerely,
Mark Harp



MAY 1 1994

Revealing the Secret Government

Of the several well-documented conspiracies briefly dealt with in this document (one in detail), there is none so important as that of the approaching One-World-Government. Were this to be a global alliance based upon freedom, there would be no reason for worry, but the impending 'New World Order' is instead to be built upon the communist Charter of the United Nations. Check for yourself--the U.N. Charter is nearly a duplicate of that of the Soviet Union. There is no Bill of Rights. The Charter was verbally 'explained' to the 1945 U.S. Senators by Soviet Agent Leo Pasvolosky--no printed copies. Article 25 of the Charter (see page 5) is a direct violation of the United States Constitution. Four of the secret societies with the self-proclaimed goal of One-World-Government are the Bilderberg Group (Switzerland), the Royal Institute for International Affairs (RIIA--England), the Council on Foreign Relations (CFR--U.S.), and the Trilateral Commission (U.S.). Secret societies are defined by their ban on note-taking and their ban on publication of minutes of the meetings. The CFR (1921 New York City) is the U.S. branch of the RIIA (1919 London). The CFR was assigned the task of writing the communist Charter of the U.N. The paperwork was done by Soviet Agents Alger Hiss and Leo Pasvolosky, CFR members. The CFR membership list reveals that this secret society has been extremely effective in infiltrating the highest levels of our government, the media, and big business. Approximately three-fourths of Washington's upper management now belongs to at least one of the secret societies.

Among the slain patriots who have made serious efforts to thwart the one-world communist goal of the shadow government, is Dr. Larry McDonald, strict devotee of the Constitution and Head of the world's largest anti-communist organization--the John Birch Society. The JBS is despised by Moscow as well as the secret government in Washington. On September 1st, 1983 Korean Air Lines flight 007, en route from Alaska to Seoul, was destroyed by Soviet missiles. The major media, hand maidens of the international bankers controlling the secret government, did not inform us that aboard flight 007 was perhaps the single biggest enemy of communism--Member of Congress, Dr. Larry McDonald. His chairmanship of JBS was not mentioned by the large news organizations. 34 years earlier another well-known public servant began a crusade against communism and also paid the price. One of the last quotes from Secretary of Defense James Forrestal is: "Consistency has never been a mark of stupidity. If the diplomats who have mishandled our relations with Russia were merely stupid, they would occasionally make a mistake in our favor." President Truman fired Secretary Forrestal in March, 1949. Five days later he was taken into custody and held incommunicado for seven weeks on the 16th floor of Bethesda Naval Hospital. The CFR was well aware of the diary Secretary Forrestal was completing. On May 21 Forrestal's brother notified Bethesda that he was going to forcibly remove his brother from the hospital the following morning. He never got the chance--at 2:00 A.M. May 22, 1949 the heavily drugged James Forrestal was thrown out the 16th floor window. His diary was not found.

The tragic martyrdom of this patriot served not to intimidate, but to inspire another dedicated anti-communist in federal government. Although this man would not be physically assassinated, he was to become

(continued on 2nd sheet)

*subsequently found not to have been destroyed, but rather force-landed on Soviet's Sakhalin Island

"Treason does never prosper. What's the reason? For if it does prosper, none dare call it treason."

---Sir John Harington

NATIONAL
COAL
ASSOCIATION

treasured letter from the President of
the National Coal Association, Retired
USAF Four-Star General Richard Lawson

COAL

RICHARD L. LAWSON
President
(202) 463-2647

8-21-92

Mr. Mark Harp
107 N. Holmes
Memphis, TN 38111

Dear Mr. Harp:

Thank you for your kind comments regarding my article in *21st Century* and for sending the material on the hollow earth theory. While I haven't personally investigated the research behind the theory, it appears that there are significant credible arguments supporting it. Thanks again for sharing your work with me.

Sincerely,

Richard L. Lawson

Richard L. Lawson

excerpt from Three Years of Arctic Service, 1886, (later General) Lt. Adolphus W. Greely: (81°44" North latitude) "A magnetic needle, nicely and delicately balanced, in the middle latitudes assumes a nearly level position...at Conger the inclination was about 85 degrees...The halo was preceded by an aurora, which was unaccompanied by magnetic disturbances...Butterflies were very numerous, as many as fifty being seen during the day...The attached thermometer of the aneroid barometer, which was carried always in the shade, stood at 74 degrees (23.3 degrees C.)" excerpt from Mars, 1894, professional astronomer Percival Lowell: "Meanwhile an interesting phenomenon occurred in the cap on June 7...as I was watching the planet, I saw suddenly two points like stars flash out in the midst of the polar cap. Dazzlingly bright upon the duller white background of the snow, these stars shone for a few moments and then slowly disappeared. The seeing at the time was very good." MH

1130 Seventeenth Street, N.W.
Washington, D.C. 20036-4677
(202) 463-2625
FAX: (202) 463-6152

"In Stage III...would proceed to a point where no state would have the military power to challenge the progressively strengthened U.N. Peace Force..."
---official ongoing U.S. foreign policy from the State Department's 1961 Freedom From War document

"Government is not reason. It is not eloquence. It is force! Like fire, it is a dangerous servant and a fearful master."
---George Washington

"The powers not delegated to the United States by the Constitution, nor prohibited by it to the States, are reserved to the States respectively, or to the people."
---Amendment Ten, Bill of Rights, UNITED STATES CONSTITUTION

②

probably the single greatest victim of character assassination in American history. His name was Senator Joseph McCarthy. When Senator McCarthy's meticulous research began to turn up members of the CFR engaged in active promotion of communism abroad, the propaganda machine of the shadow government was mobilized as never before. Few publishers except the JBS have been willing to put the actual documentation regarding Senator McCarthy's anti-communist investigation into print. Researching the facts instead of the rhetoric, you will find without question that every one of the approximately 160 persons publically identified by McCarthy as a communist was a communist. The political crucifixion of Senator Joseph McCarthy was so thorough that very few Members of Congress have ever again dared to embark on powerful campaigns to thwart the international bankers and their allies.

The fully evidenced chronicle of 20th Century American science and politics is exposed in great detail in the excellent books listed at the end of this article. Some of the subjects include: the secret Space Program, the deliberately sacrificed Lusitania, the scientific Hollow Earth Theory (U.S. patent 1096102), the artificially triggered Stock Market Crash of '29, the 1954 DOD/Rand Atomic Tunneling Machines (45' diameter bore, five feet per hour), definite advance knowledge of Pearl Harbor, the betrayal of Chiang Kai-shek in order to bring in communist Chinese tyrant Mao Tse-tung, the secret society financing of Adolph Hitler and Joseph Stalin, the fake 'Gulf of Tonkin' incident, the murder of President Kennedy by four parts of the Intelligence Community, the operational U.S. Anti-Gravity Vehicle Program in Nevada. Remember that all of these things are fully documented. Check for yourself! The Illuminati is the highest level of Freemasonry. There is a strong partnership between this occult religion and the One-World-Government people. The Illuminati was founded in Germany in 1776 by Adam Weishaupt. President Franklin Roosevelt was a Freemason and it was he who placed the Freemason symbol of the all-seeing eye above the pyramid on the back of the one dollar Federal Reserve note. The symbolic number of the Freemasons is 13; there are nine sets containing 13 incorporated into the reverse side of the one dollar bill. When the 'globalists' or 'Eastern Establishment' completes their goal of uniting the world under a communist rule, the eye will be united with the main portion of the pyramid. By their own admission, the Illuminati intend for this to occur not later than the year 2000. Another patriot who has been villified for his efforts to alert the public is former Office of Naval Intelligence representative Bill Cooper. Among many other items of information, he documented the genetic engineering work of the CIA which resulted in the development of the AIDS virus. Mr. Cooper's car was run off the road. His left leg required amputation, however, he did survive this reprisal attempt--his work continues.

1913 was the year that Congress gave us two major pieces of treason. Congress abdicated its responsibility to manufacture and control U.S. currency...it gave the 'privilege' to the private Federal Reserve Corporation composed of the Rothschild-Warburg-Rockefeller cartel. The cartel also got the Internal Revenue Service (income tax) created. The income tax serves as the personal collection agency for the international bankers. Our Constitution may only be amended if at least three-fourths of the states are in agreement on ratification. This did not occur with the creation of the IRS. In that same year which saw the corruption of our nation's lifeblood--its currency, another tool was added to the arsenal of the international bankers: tax-free foundations. These serve as havens for the vast wealth of the international bankers and gives them the ability to massively corrupt U.S. policy by bestowing grants upon parties promoting Illuminati interests. Opposition to the globalists immediately preceded the 'mysterious' deaths of Congressman Louis McFadden, Congressman Larry McDonald, Senator John Heinz, and Senator John Tower. Check their contributions to the Congressional Record. Executive Orders and National Security Directives also are subversions of the Constitution. Both were used to streng-

③

then the Federal Emergency Management Agency created by President Jimmy Carter. FEMA is activated as the military enforcement arm for the New World Order by the President declaring a 'national emergency'. When this happens the Director of FEMA is authorized to suspend the Constitution and seize control of all government agencies and institutions. Another large act of treason occurred while the world's attention was locked onto the Saddam Hussein Iraqi invasion of Kuwait. At 3:30 A.M. Saturday on August 4, 1990 a group of ten Senators met and passed Senate Intelligence Authorization Act, S.B. 2834. It permits the President to conduct any covert operation, using any amount of money, appropriated from any agency, without asking or telling Congress!

Studying the communist Charter of the United Nations clearly exposes this ambitious organization as the ultimate wolf in sheep's clothing. The most likely means by which the One-World-Government will be enacted is through the Trojan horse of 'environmentalism'. This giant scam has been greatly expanded in recent months. The Ozone Hole fraud is the case in point...control what goes into the atmosphere, control the nations. The Ozone Hole deception is easily exposed by the fact that chlorine emissions from the oceans are more than 400 times greater than that from all of man's CFC industry--the sky hasn't fallen yet. In accordance with the solar-atmospheric cycle, billions of tons of ozone are created and destroyed daily. During Winter darkness in Polar regions, of course there is no ozone production; this is because sunlight is far and away the principal maker of ozone. When the sunlight returns after several weeks, so does the ozone. Now you know why the mythical 'Ozone Holes' are only to be found over the Arctic and Antarctic periodically and not over the big CFC-discharging cities such as New York, Tokyo, and Paris. The most dangerous foreign power in history, the U.N., has ordered CFCs such as Freon® refrigerant banned from the Earth in 1996. The cost to the U.S. economy will be at least \$130 Billion. In addition, poor nations will not be able to afford the vastly more expensive Freon substitutes and the necessary new equipment. According to the Fall, 1992 21st Century Science and Technology, the resulting loss of food and medicine "...will cause 20 to 40 million deaths annually worldwide." Remember, by their own writings, the secret societies must have the global communist system in place by the end of this decade, the year 2000. We must prevent the destruction of our sacred United States Constitution!

"Is life so dear, or peace so sweet, as to be purchased at the price of chains and slavery? Forbid it, Almighty God! I know not what course others may take; but as for me, give me liberty or give me death!"--Patrick Henry, American patriot, 1775

recommended reading: BEHOLD A PALE HORSE--Bill Cooper, THE SHADOWS OF POWER--James Perloff, NONE DARE CALL IT TREASON...25 YEARS LATER--John Stormer, A JOURNEY TO THE EARTH'S INTERIOR or HAVE THE POLES REALLY BEEN DISCOVERED?--Marshall Gardner, EN ROUTE TO GLOBAL OCCUPATION--Gary Kah, THE HOLES IN THE OZONE SCARE--Maduro and Schauerhammer, THE NEW WORLD ORDER--William Still, THE MOON AS VIEWED BY LUNAR ORBITER--NASA (classified), THE INSIDERS--John McManus, GLOBAL TYRANNY... STEP BY STEP--William Jasper The End Mark Harp 8-4-93

*Freons are 4 to 8 times heavier than air.

Monthly mail contact is maintained with the Managing Editor of Aviation Week & Space Technology and the Assistant Director of Citizens Agency for Joint Intelligence. Duplicate correspondence is maintained quarterly with John Birch Society, Chief Operating Officer Alan Scholl and with the President of the National Coal Association, General Richard Lawson. My wife is from the Philippines and one of my other hobbies is the Tagalog language. Write for the five page secondary information packet, which largely deals with the 'environmentalism' scam. ***"Power tends to corrupt and absolute power corrupts absolutely" --Lord Acton

National Aeronautics and
Space Administration
Headquarters
Washington, DC 20546-0001



MAR 18 1994



MH, 11-93

National Aeronautics and
Space Administration
Headquarters
Washington, DC 20546-0001



Reply to Airmail

Mr. Mark R. Harp
107 North Holmes
Memphis, TN 38111-3640

Dear Mr. Harp:

Thank you for your letter of March 9, 1994, containing various articles on Revealing the Secret Government and The Hollow Earth Theory. While I have not had the time to conduct a detailed investigation of the basis for conclusions stated in the articles, I found them both to be interesting reading. As you have requested, I have forwarded a copy of your letter and these articles to the Commander of the STS-61 mission, John Casper.

I appreciate your taking the time to provide me with these thought provoking articles, and wish you the best of luck in your future endeavors.

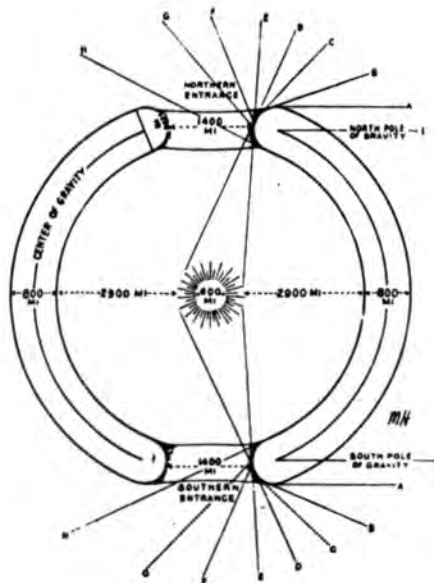
Sincerely,

Jack Levine
Jack Levine
Director, Flight Programs Division
Office of Advanced Concepts and Technology



National Aeronautics and Space
Administration photo. This of-
ficial radarograph was published
in the April, 1989 Discover.
The North Aperture of Venus is
clearly revealed. MH

(reproduced from photostat;
original is very clear) MH



"The enumeration in the Constitution of certain rights shall not be construed to deny or disparage others retained by the people."---
Amendment Nine of U.S. Constitution *** "He has erected a Multitude of New Offices, and sent hither Swarms of Officers to harass our People, and eat out their Substance."---from The Declaration of Independence

MD

DEC 21 1993

Mark R. Harp
107 N. Holmes
Memphis, TN 38111

The United Nations Army
is now engaged in a mass-
ive troop strength build-
up: from 13,000 soldiers
in 1991 to 90,000 as of
October, 1993! *my*

Dear Mr. Harp:

Thank you for the articles on Revealing the Secret Government and The Hollow Earth Theory. I found them both to be very interesting and enlightening.

We appreciate your thoughtfulness for advising us about your concerns for our government and our planet. Your articles provided for very thought provoking reading. I believe Mr. Goldin will also find this to be very interesting, so as you have requested, a copy of your articles will be forwarded to his office in Washington, DC. However, your request for the addresses of the Directors for Area 51 and the Kepler Crater Colony, I am afraid I am not familiar with these two organizations.

I extend to you my very best wishes for your future personal success. Again, thank you.

Sincerely,

Randy Brinkley
Randy H. Brinkley
Director, HST Mission Operations

The John Birch Society
THE NEW AMERICAN
P.O. BOX 8040
APPLETON, WI 54913-9895

"The Congress shall have power to coin money..."
---Article One, Section Eight, Part Five
"No State shall make any thing but gold and sil-
ver coin a tender in payment of debts..."
---Article One, Section Ten, Part One
extracts from UNITED STATES CONSTITUTION

(excerpt)

CONFERENCE-14

P.O. Box 305
Rushville, IL 62681

THE DDT BAN--20 YEARS LATER:

A case study in how the anti-science policies of environmentalist groups kill people

May 15--Twenty years ago, the U.S. Environmental Protection Agency banned the insecticide DDT, one of mankind's most life-saving discoveries. This decision brought to life the environmentalist movement, but was a death sentence for millions of people throughout the world: An estimated 100 million people die a year as the direct and indirect result of the banning of DDT and other pesticides. These are deaths from malaria, from other insect-borne diseases, and from the results of reduced food crops.

DDT was banned on the basis of disinformation, not evidence--disinformation created by a handful of environmentalists who used the issue to build a multi-million-dollar environmentalist business.

EPA administrator William Ruckelshaus admitted that the decision to ban DDT was made for political, not scientific reasons. In fact, after the EPA's seven-month hearing on DDT, the EPA hearing examiner ruled that DDT should NOT be banned, on the basis of the scientific evidence. In overruling this decision, Ruckelshaus began the pattern of environmental decisions made on the basis of "public perception," not scientific evidence.

Today, on the eve of the Earth Summit in Rio, government officials and environmentalist groups are about to convene to make more environmental policy based on ideology and myth, not scientific evidence. Again the resulting death toll from these policy changes will be in the millions.

Will the news media continue to black out the human death toll, and the evidence presented by responsible scientists, in the name of "saving the planet"?

Alexander King, President of Club of Rome: (After malaria was nearly eliminated from Guyana) "So my chief quarrel with DDT in hindsight is that it has greatly added to the population problem."

Edmund Sweeney, Hearing Examiner for the EPA (26 April 1972): "DDT is not carcinogenic, mutagenic or teratogenic to man (and) these uses of DDT do not have a deleterious effect on fish, birds, wildlife, or estuarine organisms."

President of Royal Entomological Society in Britain, in 1968 address: "If there had been a world ban on DDT, then Rachel Carson and her book *Silent Spring* would now be killing more people every year than Hitler killed in his whole holocaust."

National Academy of Sciences, 1965: "In a little more than two decades, DDT has prevented 500 million deaths that would otherwise have been inevitable."

other:
The African continent was infected via smallpox vaccine in 1977. The vaccine was administered by the World Health Organization. According to Dr. Robert Strecker, "Without a cure the entire black population of Africa will be dead within 15 years. Some countries are well beyond epidemic status."
The U.S. population was infected in 1978 with the hepatitis B vaccine. Dr. Wolf Samuness, the ex-roommate of Pope John Paul II, was the mastermind behind the November/78 to October/79 and March/80 to October/81 experimental hepatitis B vaccine trials conducted by the Centers for Disease Control in New York, San Francisco and four other American cities. He loosed the plague of AIDS upon the American people. The gay population was infected. The aids for participants specifically asked for promiscuous homosexual male volunteers. Whatever causes AIDS was in the vaccine. The vaccine was manufactured and bottled in Phoenix, Arizona.

Since large populations were to be decimated, the ruling elite decided to target the "undesirable" elements of society. Specifically targeted were the black, Hispanic, and homosexual populations. The poor homosexuals were encouraged on the one hand and scheduled for extinction on the other.

Sir Julian Huxley said, "Overpopulation is, in my opinion, the most serious threat to the whole future of our species." The project, called MK-NAOMI, was carried out at Fort Detrick, Maryland.
Before the Senate Committee revealed that they intended to produce "a synthetic biological agent, an agent that does not naturally exist and for which no natural immunity could have been acquired. Within the next 5 to 10 years it would probably be possible to make a new infective microorganism which could differ in certain important aspects from any known disease-causing organisms. Most important of these is that it might be refractory to the immunological and therapeutic processes upon which we depend to maintain our relative freedom from infectious disease."

Funding was obtained from the U.S. Congress under H.R. 15090 (1969), where \$10 million was given to the DOD's 1970 budget. Testimony before the Senate Committee revealed that they intended to produce "a synthetic biological agent, an agent that does not naturally exist and for which no natural immunity could have been acquired. Within the next 5 to 10 years it would probably be possible to make a new infective microorganism which could differ in certain important aspects from any known disease-causing organisms. Most important of these is that it might be refractory to the immunological and therapeutic processes upon which we depend to maintain our relative freedom from infectious disease."

words were written by Dr. Aurelio Peccei and are taken verbatim from page 607 of *The Global 2000 Report to the President*.

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excerpt from 500 page book by former Naval Intelligence Officer

The order was given by the POLICY COMMITTEE of THE BILDERBERG GROUP based in Switzerland. Other measures were also ordered. The one you will be able to check the easiest is the Haig-Kissinger Depopulation Policy, which is administered by the State Department. This policy dictates that Third World nations take positive and effective steps to decrease their populations and hold them in check or they get no aid from the United States. If the Third World nations refuse, civil war usually breaks out and the rebels are usually found to be trained, armed, and financed by the Central Intelligence Agency. That is why many more civilians (especially young fertile females) than soldiers have been killed in El Salvador, Nicaragua, and other places. These wars have been instigated in Catholic countries by Jesuits (see Chapter 2).

The Haig-Kissinger depopulation policy has taken over various levels of government and is in fact determining U.S. foreign policy. The planning organization operates outside the White House and directs its entire efforts to reduce the world's population by 2 billion people through war, famine, disease, and any other means necessary. This group is the National Security Council's Ad Hoc Group on Population Policy. The policy planning staff is in the State Department's Office of Population Affairs, established in 1975 by Henry Kissinger. This same group drafted the Global 2000 Report to the President that was given to Carter.

Thomas Ferguson, the Latin American case officer for the State Department's Office of Population Affairs (OPA), made the following statements: "There is a single theme behind all our work; we must reduce population levels. Either they do it our way through nice clean methods or they will get the kind of mess that we have in El Salvador, or in Iran, or in Beirut. Population is a political problem. Once population is out of control it requires authoritarian government, even fascism, to reduce it....The professionals," stated Ferguson, "aren't interested in lowering population for humanitarian reasons. We look at our strategic needs, and we say that this country must lower its population, or else we will have trouble. So steps are taken. El Salvador is an example where our failure to lower population by simple means has created the basis for a national security crisis. The government of El Salvador failed to use our programs to lower their population. Now they get a civil war because of it. There will be dislocation and food shortages. They still have too many people there. Civil wars are somewhat drawn-out ways to reduce population. The quickest way to reduce population is through famine, like in Africa or through DISEASE, like the Black Death, all of which MIGHT OCCUR in El Salvador." His budget for FY 1980 was \$190 million; for FY 1981 it was

Citizens Agency for Joint Intelligence
William Cooper, P.O. Box 1420,
Show Low, AZ 85901 \$25 (incl. s & h)

THE WHITE HOUSE
WASHINGTON

"The United States shall guarantee to every State in this Union a republican form of government."---Article 4, Section 4, UNITED STATES CONSTITUTION

"Member nations agree to accept and carry out the decisions of the United Nations"---1950 amended version of Article 25 of United Nations Charter

"Treason: Violation of Allegiance to one's country"---Random House Dictionary

June 8, 1993

Mr. Mark Harp
107 North Holmes
Memphis, Tennessee 38111

Dear Mr. Harp:

Thank you for writing and sending information about the hollow earth theory, atomic energy, and the ozone layer. Your thoughtfulness in sharing your research with me is very much appreciated.

Although I have not had the time to thoroughly review these materials, they do look interesting. I hope to have the chance to get to them shortly.

Again, thank you for writing.

Personally,

Mack McLarty

Mack McLarty
Chief of Staff to the President

THE SECRET SPACE PROGRAM: Positive evidence exists for mid-1960s establishment of a covert US-SU Moon Colony. Chief among the substantial proofs is NASA's own photo-book: The Moon as Viewed by Lunar Orbiter. Many copies were distributed to the public prior to NASA photographic interpretation. The subsequent recall effort was not completely successful. Transportation of materials and workers to the site of the Lunar Colony was achieved via atomic rockets, etc. The Moon has a thin atmosphere, not a vacuum--footprints are made by weight displacement of air from between solid particles. A Colony on Mars may also be surmised based on the documented clandestine unmanned landing of May 22, 1962. This landing revealed an atmospheric pressure of 69% that of Earth, not the 2% claimed by NASA. By the early 1980s the U.S. anti-gravity program was operational. Tens of thousands of eyewitnesses have watched th routine test flights from the edge of Nevada's Groom Dry Lake or Area 51. Millions observed the flights on the evening news of April 20, 1992. The report was by Pentagon correspondent Fred Francis of NBC-TV. MH

The public space program is well-known. For information concerning the real space program see: The Moon as Viewed by Lunar Orbiter-(book), Project Rover-(book), Alternative 003-(video), Project Redlight 002-(video) and especially Bill Cooper 10-9-90 Phoenix Slide Show-(video). MH

***Dedicated to the continued progress of science and the service that it can render to humanity"--- Marshall Gardner, holder of United States patent 1096102, the Hollow Earth Theory. Attempts to criticize U.S. patent 1096102 are of necessity vague and therefore easily thwarted. It is very likely that at least a peripheral examination of the Interior Earth has already been conducted under the auspices of the United States National Security Agency. Ideal transportation for these undertakings would include atomic submarines, atomic ice-breaker ship, and long-range dirigibles. MH

(ad excerpt. MH)

INNER LIGHT, Box 753, New Brunswick, NJ 08903

Bill Cooper is a former U.S. Naval Intelligence Briefing Team member. His military career began with four years as an aircraft and missile pneudraulic technician with the Strategic Air Command of the U.S. Air Force. After this he entered the U.S. Navy, where he initially served on submarine duty. It was on the USS Tiru that he experienced, with four other crewmen, his only UFO sighting. He was trained by Naval Security and Intelligence and served in that capacity in Vietnam. There he was a combat patrol boat captain, where he earned several medals.

He was eventually transferred to the Intelligence Briefing Team of Admiral Clarey, the Commander-in-Chief of the U.S. Pacific Fleet. During this duty he had to review material higher than Top Secret, thereby obtaining personal knowledge of UFOs and extraterrestrials, the real facts about the Kennedy assassination, where drugs really come from and why we can't get rid of them, who the intelligence community really works for, and the facts about the Secret Government.

(excerpt from 1991 book, MH)

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by William Cooper

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UNITED STATES PATENT 1096102: THE HOLLOW EARTH THEORY

---Mark Harp 107 North Holmes, Memphis, Tn. 38111

On November 25, 1912 Marshall B. Gardner of Aurora, Kane County, Illinois, USA, submitted his discovery application to the United States Patent Office. 18 months later, on May 12, 1914, this federal agency granted Mr. Gardner United States patent 1096102, the second most important scientific document ever issued. Its scientific significance is exceeded only by the mechanical flight discovery of Orville and Wilbur Wright in 1903. For reasons which even Mr. Gardner could not have fully anticipated in the early 1900s, and which are now abundantly clear, his discovery soon became the most highly classified military secret of all time. In 1913 Gardner wrote his original book proving beyond any doubt that our Earth is a hollow sphere. So voluminous was the evidence which he continued to amass from studies of astronomy and Polar exploration, that he expanded his book to 450 pages in 1920. The title is A JOURNEY TO THE EARTH'S INTERIOR-or-HAVE THE POLES REALLY BEEN DISCOVERED? Although he seems not to have been aware of it, Gardner's work had incompletely been preceded by William Reed, whose book PHANTOM OF THE POLES was 281 pages and was published in 1906 New York City by the Walter S. Rockey Company. The one shortcoming with Mr. Reed's theory, otherwise very intelligently developed, was that he had failed to finish his centrifugal force reasoning regarding Earth's formation. As a result, he was never able to logically account for the powerful source of heat and illumination present in the Earth's Interior. Gardner, on the other hand, did account for this source. The difference is that whereas Reed confined his research strictly to Polar exploration, Gardner augmented this with studies of astronomy. The majority of this article will be testimony from the real experts, the people who were there---there at the huge telescopes and especially there in those vast and previously mysterious Polar regions. But first, this is the common sense theory responsible for United States patent 1096102. In the beginning, some 4 or 5 billion years ago, when the Earth was still an enormously expanded ball of superhot whirling gas, it gradually began to contract as it cooled. The laws of physics require cooling gases to condense and so the rapidly spinning sphere of tenuous gases began to concentrate as the heat loss continued. Self-centered gravitational attraction kept reducing the diameter of the whirling ball of cooling material...but only to a certain extent. This is the big logical distinction between the old inadequate theory of planetary formation and Gardner's discovery. The old notion would have us believe that the gravitational contraction continued unabated until the Earth had become molten-hot under a fierce gravitational pressure. While such a scenario undoubtedly does routinely occur in the celestial evolution of particularly immense bodies, as is the case with all stars, it is definitely not the final development of typical planets. The crucial second factor to lay stress on is centrifugal force. Remember that while gravity is attempting to draw all of the material toward the center, there is an opposing force also at work---centrifugal force. Just as a figure skater spins much more rapidly when she brings her outstretched arms tightly in against her body, so too did the ever-contracting proto-planet begin rotating ever more rapidly as its size decreased. Like the 'glued' water in a bucket that refuses to spill if one swings the bucket in a fast circle, so too was this same law of motion---centrifugal force---attempting to hurl all of the material outward from the forming planet's axis of rotation. So finally

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in this silent titanic struggle between two natural forces, a balance was struck. When the swiftly whirling sphere had drawn itself down to an approximately 8000 mile diameter, the compromise between gravitational and centrifugal force was reached. But there is more.

There is a special characteristic of centrifugal force and we must not overlook this important trait. The strength of 'c' force becomes greatly lessened as it approaches right angles to the direction of spin. A simple day-to-day example of this behavior is water in a basin. If you remove the drain plug and allow the water to start emptying from the basin, what will you eventually observe?---a vortex or whirlpool, an empty space surrounded by rapidly rotating material. Now imagine this same principal in action concerning the contracting body which was to become our Earth. At right angles to the rotational axis, in other words the 'poles', the c force was considerably weaker than elsewhere, especially the equator, therefore although at the Earth's equator the c force was able to halt the material's inward progress at about an 8000 mile diameter, it was considerably less successful in the Polar regions, there stopping the contraction at about 1400 miles. The inevitable outcome of this natural compromise is that our planet concluded its evolution and solidified as an 8000 mile hollow sphere with 1400 mile diameter Polar Openings. Now it is at this stage in the logic that Gardner advances and Reed falters. Because of his study of astronomical records and photography as specifically relating to nebula and comets, Gardner became aware of the whole truth. In the precise center of these translucent spheres is a proportionately small incandescent ball. Between this luminous interior orb and the shell of the nebula is a large intervening space; said another way, the nebula is hollow except for the bright sphere in its center. Why? Well, where is the one other location at which c force is quite weak, besides at the poles? The answer of course is at the precise center of rotation, and once again the logic is so straightforward that we may readily examine a common household example to support the argument. What would be the result if you sprinkled a layer of powder upon the top of a record player and then turned the record on high speed? The powder would fly off of the record...except for a small portion at the precise center. Based upon his studies of the planetary nebula through observatory photographs, Gardner was able to surmise that the very thick shell of the Earth is approximately 800 miles thick, the Polar Openings 1400 miles across, and the gravitationally-suspended Central Sun (the incandescent orb locked by gravity in the exact planetary center) some 600 miles diameter. Because of the enormity and very gradual curve of the Polar Aperture, it is impossible to visually detect it; this is the same as the fact that we do not 'see' that the Earth itself is round. The curve is much too gradual to observe. Based on the nearly constant merger of warm interior air with very cold exterior Polar air, the Polar Openings are almost always covered by a thick cloud layer. This explains why when viewed from satellites the openings look just as they would if there actually were the mythical 'polar ice caps' which government policy claims are at the Earth's extremities. Gardner was led inexorably to his monumental science discovery by the vast quantity of inconsistent information which he continually encountered during his years of study dealing with, especially, high Arctic expeditions. Chief among the numerous mysteries are 1) a dramatically improving climate in the very far north, 2) the extreme peculiarity of the famous Northern Lights or Aurora Borealis, and 3) the eccentric

page three

behavior of the compass in very high latitudes. We shall now proceed to hear from many witnesses who forfeited much comfort, convenience, and in several cases their lives, in order that we may fully understand the true greatness of our world, a world vastly more spectacular than officially acknowledged.

In the preface of THREE YEARS OF ARCTIC SERVICE Lt. Adolphus Greely of the U.S. Army expresses the amazement of his Lady Franklin Bay expedition at the strange conditions they experienced in the far north: "Feeling exaggeration, I have occasionally modified statements and opinions entered in my original journal, believing it better to understate than enlarge the wonders of the Arctic regions, which have been too often questioned." Before focusing on our own world, let us look briefly at some of our interesting neighbors in Space. Renowned astronomer Percival Lowell comments on page 33 of MARS "...round what we know to be the planet's pole, appeared to be a great white cap...It proceeded slowly to dwindle in size...As summer comes on, they dwindle gradually away, till by early autumn they present but tiny patches a few hundred miles across...As it melted, a dark band appeared surrounding it on all sides...it was the darkest marking upon the disk, and was of a blue color." The temptation to think of this blue perimeter as water must be avoided because if this were indeed prodigious volumes of water, it would frequently be coursing through the many ancient riverbeds which crisscross the dry Martian surface. These riverbeds are permanently dry. Instead what we are really observing is the optical effect of vast cloud masses moving over the curving sides of the Martian polar aperture. The exterior of Mars experiences changing seasons; the interior does not. The degree to which atmospheric moisture and temperature vary at the pole, where the differing climates converge, will determine the amount to which the immense blue ring will manifest itself in terrestrial telescopes. Being unaware of the true configuration of Mars, Lowell naturally believed that this blue polar band had to be water melted from an ice cap. In this assumption, though incorrect, he showed his wisdom. Unlike our present government policy, he knew absolutely that the pole of Mars cannot be carbon dioxide. Page 81: "Faraday made experiments on the relation of the congealing point of carbonic acid gas to the pressure...He further found that the curve for the liquification point lay very close to that for the congealing point, and approached yet closer as the pressure decreased. In other words, the gas passed almost immediately from the gaseous to the solid state...Now the pressure is certainly very slight on the surface of Mars...In consequence, on a rise of temperature the frozen carbonic acid gas would there pass practically straight from the solid into the gaseous state. Now, from the existence of the surrounding polar sea, we remark that in the substance composing the polar caps of Mars this does not occur. A considerable portion of it is always in the transition state of a liquid. Carbonic dioxide would not thus tarry: water would." Lowell made a particularly fascinating observation of the north polar opening when, for a short period, a portion of the usual cloud cover parted, thereby allowing beams of light from Mars' central sun to project beyond the orifice. "Meanwhile an interesting phenomenon occurred in the cap on June 7...as I was watching the planet, I saw suddenly two points like stars flash out in the midst of the polar cap. Dazzlingly bright upon the duller white background of the snow, these stars shone for a few moments and then slowly disappeared. The seeing at the time was very good... But though no intelligence lay behind the action of these lights, they were none the less startling for being Nat-

page four

ure's own flash-lights across one hundred millions of miles of space. It had taken them nine minutes to make the journey;...On comparing its position with Green's map of his observations upon the cap at Madiera in 1877, it appeared that this was the identical position of the spot where he had seen star-points then, and where Mitchell had seen them in 1846, ...Meanwhile the cap had been steadily decreasing in size...On October 12, at 10h.40m.,...Mr. Douglas measured its position and estimated its size, as was his wont every few days. He found it to be six degrees distant from the planet's pole...On looking at the planet on October 13, at 8h.15m., to his surprise he found the cap gone. Not a trace of it could be seen;...What had certainly been there on the 12th was not there on the 13th. The ice-cap had disappeared."

Robert Povers remarks in MARS: OUR FUTURE ON THE RED PLANET "There seem to be vast quantities of water in the polar caps...Like the ice caps of Earth, they are bright white." Thomas McDonough says in SPACE: THE NEXT 25 YEARS "Mars also has large, bright ice caps, which can even be seen from the Earth with a good telescope." In THE GREATEST CHALLENGE: The Incredible Adventure and Splendid Destiny of Man in Exploring Space Martin Caidin notes that "Both American and Russian astronomers in recent years have observed a series of very bright flashes, lasting about five minutes, and followed by mushroom-shaped clouds." Original Moon explorer Michael Collins writes in MISSION TO MARS "A greater mystery is what happened to all the water and ice that gouged out those huge channels billions of years ago. Mars has a strong enough gravitational field to hold water vapor in its atmosphere rather than allow it to escape into space...What happened to all the water that carved out deep channels?" John Noble Wilford says in MARS BECKONS: "Mariners 6 and 7...The camera photographed a ood of clouds over the south polar cap, and infrared instruments measured temperatures there as low as -193 degrees Fahrenheit...The infrared spectrometer had appeared to detect temperatures at the edge of the south polar ice cap that were much too high to be from frozen carbon dioxide...scientists could see by the Soviet document that the range of possibilities for the 1994 flight was wide and challenging. Under serious consideration were plans to place two spacecraft into orbits of Mars passing over the poles." On page 22 of the March-April 1992 Final Frontier are some remarks about the planet nearest to the Sun, Mercury: "...temperatures that climb as high as 800 degrees Fahrenheit...Researchers at the California Institute of Technology in Pasadena have identified what they believe is a water ice cap more than 180 miles in diameter on Mercury's north pole...the researchers saw a bright area at the north pole...We were amazed." Marshall Gardner devotes 27 pages of his book to the study of preliminary planets, better known as nebula. Here are a few comments. "The spectroscopy supplies the answer...the spectroscopy has proven absolutely that the nebula is not made up of stars...the typical nebula has a remarkable shell-like structure and a central star...a search made with a spectrograph and the Lick 36-inch telescope for rotation effects...Definite evidence of rotation was found..." On page 63, in reference to comets as being planets in the process of destruction, Gardner writes "Hector MacPherson tells us in his book, THE ROMANCE OF MODERN ASTRONOMY that the great comet of 1811, with a tail stretching for a hundred million miles behind and fifteen million miles in breadth, had a nucleus that according to measurements by Herschell was only 428 miles in diameter. The comet of Donati, detected from a Florence observatory in 1858, had a nucleus which 'shone with a brilliance equal to that of the Polar Star'

page five

and which was 630 miles in diameter... 'even in the short period of man's life comets have been seen to break up and disappear'." Included in his many observations concerning Mars, Gardner points out that besides the numerous reports of the Martian pole being very bright and making rapid size changes, "...the light from the polar region of Mars is a direct illuminant from within the planet, because that light, seen at night, is yellow. Any other sort of light, a reflection from a snowy surface, for instance, or a reflection from sand or mountain surfaces, would be white." On page 80-a Gardner displays eight excellent photographs of Mars recorded at the Yerkes observatory and which show the "...so-called snow-cap, projected beyond the planet's surface, which precludes all possibility of its being snow or ice." In writing of the English astronomer J. Norman Lockyer's report to the Royal Astronomical Society of England: "The snow-zone was at times so bright that, like the crescent of the young moon, it appeared to project beyond the planet's limb. This effect of irradiation was frequently visible; on one occasion the snow-spot was observed to shine like a nebulous star when the planet itself was obscured by clouds... that luminosity is precisely what our own aurora borealis would look like if our planet was viewed from a great distance. And the light is the same in both cases." As lame as the official government position is in postulating ice, snow, or frozen carbon dioxide as composing the Martian poles, imagine their predicament in the case of Venus. By their own admission, the temperature on Venus is well in excess of 800 degrees Fahrenheit... quite a place to put an ice cap! Whether by choice or by chance, the Jet Propulsion Laboratory of the National Aeronautics and Space Administration released a few remarkable radar-generated photographs of Venus in early 1989. One of these close-up images, in which the cloud-piercing radar reveals with excellent clarity the north polar opening, boldly graced the cover of the April 1989 issue of Discover. Now back to Earth.

Certainly one of the three greatest pioneers of Polar exploration was Dr. Fridtjof Nansen, the acclaimed Norwegian scientist and Arctic voyager. Perhaps the most interesting expedition ever conducted in the Arctic area is chronicled in Nansen's 679 page two-volume work whose complete title is: FARTHEST NORTH: 'Being the Record of a Voyage of Exploration of the Ship "Fram" 1893-96 and of a Fifteen Months Sleigh Journey by Dr. Nansen and Lieut. Johansen'. On page 120, when the P3 man crew had already reached almost 77°N. latitude, Nansen observes "It was a strange feeling to be sailing away north in the dark night to unknown lands, over an open, rolling sea, where no ship, no boat had been before. We might have been hundreds of miles away in more southerly waters, the air was so mild for September in this latitude... We see 'nothing but clean water', as Henriksen answered from the crew's-nest when I called up to him... 'They little think at home in Norway just now that we are sailing straight for the Pole in clear water'... I have almost to ask myself if this is not a dream. One must have gone against the stream to know what it means to go with the stream." Another of the major contributors to Arctic knowledge was U.S. Army Lieutenant (later General) Adolphus Greely. Like other Arctic voyagers, the Lady Franklin Bay expedition encountered the truly bitter cold conditions in the lower portion of the Arctic region, but less harsh climate as they neared 80° latitude and especially mild weather beyond the 80th parallel. On page 369, when their party had attained the 81st latitude while map-making for the Army on Ellesmere Island, Greely comments "At that time a high warm wind was blowing from the interior, and the temperature was considerably above

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40°(5°C.)." His use of the word 'interior' was more profoundly accurate than he realized. An example of how dramatically the warm winds from the Interior affect the far north exterior is demonstrated in this passage from page 192, when the winds had for a long while been from the south: "At 10 P.M., February 16th, the mercurial thermometers thawed out, after having been frozen continuously for sixteen days and five hours. This is the longest time on record during which mercury has remained frozen." Dr. I.I. Hayes, with the schooner United States, wrote of his far north voyage in THE OPEN POLAR SEA. They were utterly bewildered by the inexplicable increase in temperature whenever the high Arctic wind sustained from the north. While stalled by a strong persistent wind out of the north for much of the first two weeks of November, Hayes noted that after the great initial masses of ice had been driven past them, there were none more to replace them. He adds, "November 13: Worse and worse. The temperature has risen again, and the roof over the upper deck gives us once more a worse than tropic shower... November 14: The wind has been blowing for nearly twenty-four hours from the north-east, and yet the temperature holds on as before... I have done with speculation. A warm wind from the 'mer de glace'... makes mischief with my theories, as facts have heretofore done with the theories of wiser men." Ships' surgeon for the 'Advance' and 'Rescue', Dr. Elisha Kent Kane recorded his extensive Arctic experience in ARCTIC EXPLORATIONS IN SEARCH OF SIR JOHN FRANKLIN, experiences which culminated near the 82nd parallel. The expedition progressed as far north as was practical in their ships and then when the amount of ice rendered additional progress impossible or at least unsafe, they continued their poleward journey on foot with sledges. But as with other Arctic explorers before and since, they were amazed to eventually find further advancement thwarted by the gradual encroachment of an open polar sea. He writes "It is impossible in reviewing the facts which connect themselves with this discovery,--- the melted snow upon the rocks, the crowds of marine birds, the limited but still advancing vegetable life, the rise of the thermometer in the water,---not to be struck by their bearing on the question of a milder climate near the pole. To refer them all to the modification of temperature induced by the proximity of open water is only to change the form of the question; for it leaves the inquiry unsatisfied---What is the cause of the open water?" About 130 years later we have these remarks from Russian explorer Vladimir Snegirev in his 1985 ON SKIES TO THE NORTH POLE: "On May 9 they crossed the 86th parallel... It was a strange thing indeed: you might have thought that as they approached the Pole the ice would become thicker, stronger, more solid, but in reality it was just the other way around. The closer they came to their goal, the more often they encountered open water..."

Writing about Admiral Richard Byrd's first journey to Antarctica in BEYOND THE BARRIER, Eugene Rodgers records the extraordinary affect that a wind persisting from the Pole has: "Temperature swings were so violent that, only three days after the record low, the reading rose to 15° above. 'That makes a range of 87 degrees---as much as the annual range over most of the eastern U.S.'..." On page 144 of his book Nansen exclaims "Today we had the same open channel to the north, and beyond it open sea as far as our view extended. What can this mean?" When in the 79th parallel, he records on page 197 "...bringing northerly wind. It is curious that there is almost always a rise of the thermometer with these stronger winds... A south wind of less velocity generally lowers the temperature, and a moderate north wind raises it." After having re-

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ached the very far northerly position of 86° latitude, Nansen observes on page 391 "I was inconvenienced for the first time by the heat; the sun scorched quite unpleasantly." Page 407: "...last night I could hardly sleep for heat." Several months later Nansen and Johansen were heading back to the Fram, but were still above the 81st parallel, when he writes on page 527 "Fancy, only 12°(21.5°Fahr.) of frost in the middle of December! We might almost imagine ourselves at home..." When his group was at the 81st parallel, Greely records on page 370 "In its whole extent the valley was barren of snow, and in most places was covered with a comparatively luxuriant vegetation." At latitude 81°49' Greely writes on page 372 "I there caught a butterfly, and saw three skuas, two bumble-bees, and many flies..." Page 374: "While at this camp, No. 3, we obtained but little sleep, owing to the large swarms of flies...On rising at 2 A.M. the temperature was found to be very high, 48°(8.9°C.), with a minimum of 47°(7.8°C.) since the preceding evening...In this lake also there were many small minnows..." Page 376: "Corporal Salor brought in with his willows two small pieces of unworned pine wood...Near by I discovered the former site of an old summer encampment of the Eskimos." Page 377: "The surroundings of the encampment were marked by luxuriant vegetation of grass, sorrel, poppies, and other plants." Page 378: "The sky was partly covered with true cumulous clouds, quite rare in Arctic heavens...the temperature was high and the gay yellow poppies and other flowers drew to them gaudy butterflies...he could well imagine himself in the roaring forties instead of eight degrees from the geographical pole." Page 379: "At this point, and in its immediate vicinity, a large number of butterflies were seen...facing Ruggles River, three abandoned Eskimo huts..." Page 383: "Among other pieces of wood was a pole, nine feet long and about two inches in diameter, of a hard, close-grained, coniferous wood, probably fir or hard pine." Page 385: "...a bumble-bee and a 'devil's darning-needle'. Butterflies were very numerous, as many as fifty being seen during the day...The weather during the day was excessively hot, and we suffered extremely. The attached thermometer of the aneroid barometer, which was carried always in the shade, stood at 74°(23.3°C.)...The day's march carried us farther along the shores of Lake Hazen than I had reached in May, and now a new, undiscovered country was gradually opening to our view."

By far the three most significant categories of evidence proving the validity of United States patent 1096102 are 1) warmer climate in the Polar region, 2) eccentric behavior of the compass, and 3) the peculiar polar lights known respectively as the Aurora Borealis and, in Antarctica, the Aurora Australis. Although the brevity of this article prevents all but a cursory examination of the voluminous available evidence, there are several other categories of proof as well. These include: 4) a dramatic increase in plant and animal life at the far north, also extreme northward bird migrations at the onset of winter; 5) stones, wood, dust, pollen, and mud found both on and imbedded in ice bergs; 6) anomalous radio wave behavior in polar region; 7) gravitational increase measurable at the Polar Curve, sufficient to cause a significant segregation of salt water and fresh water; 8) strange situation of the far north Eskimo, a people with a completely unique language and whose oral tradition states that they originated from much farther north in a warm land of perpetual daylight; 9) polar sea depth and strong southgoing current in the high Arctic; 10) the perfectly fresh mammoths found encased in the ice---A) if, as the official government

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position postulates, these elephants died during a climate shift from tropical to frigid, it is logical to inquire why didn't these shivering elephants simply 'pack their trunks' and move south? or B) if this alleged climate shift happened suddenly, then why aren't these 'flash frozen' pacyderms found alongside the inevitable 'flash frozen' thousands of acres of forest in which they lived?; 11) the peculiar chemistry and mathematics of ice bergs, enormous objects composed of fresh water and which, although there is almost no annual precipitation with which to replace them, travel by the thousands slowly southward to melt every year. The compass has been trying to indicate the true configuration of the Polar regions ever since man first employed this instrument in his quest for those mythical poles. Instead of smoothly leading would-be conquerors of the pole to the fabled 90° latitude point, as it must if the official description of the Earth's geology is correct, the needle starts to perform in an agitated and indecisive fashion in high latitudes. After reaching approximately the 80th parallel, an extraordinary thing begins to occur---the needle starts vertical movement! It is at that stage that the conflicting forces of magnetism and gravity are manifesting themselves. Concerning the compass, Russian explorer Snegirev writes: "...the magnetic pole...makes some kind of tricky curve...inconvenience of traveling by compass alone. The arrow would point northward, then suddenly it would veer to the west, and then almost reluctantly it would return to its former position."

Walter Sullivan comments in QUEST FOR A CONTINENT "...compasses which behaved erratically so near the Pole." Chauncey Loomis observes in his biography of Arctic explorer Charles Francis Hall, WEIRD AND TRAGIC SHORES "...be buried so far north of the magnetic pole that the needle of a compass put on his grave points southwest." On page 536 of his book Nansen says "There were other things, too, that greatly puzzled me. If we were on a new land, near Spitzbergen, why were the rosy gulls never seen there, while we had them in flocks here to the north? And then there was the great variation of the compass." Greely records on page 128 of his book "In the magnetometer a small magnet, freely suspended by single fibre of untwisted silk, swings readily in any horizontal direction. This magnet, at Conger...swung to and fro in a restless, uneasy way...A magnetic needle, nicely and delicately balanced, in the middle latitudes assumes a nearly level position. At Conger, however, the needle, adjusted so that it can move freely in a vertical plane, shows a strong tendency to assume an upright position. At a dip of 90° the needle would be erect, while at Conger the inclination was about 85°." The single most spectacular feature of the high Arctic is undoubtedly the Aurora Borealis, a phenomenon alien to nearly all of the Earth's countries. The official government explanation is essentially the same as that expressed in nearly all large circulation publications, such as the GUINNESS BOOK OF WORLD RECORDS: "These luminous displays are caused by showers of electrons streaming from the Sun (the solar wind) and striking the atoms of the upper atmosphere, so making them glow. The shape of the Earth's magnetic field confines these displays to polar regions and high latitudes." Were it not for its wholesale omission of the facts, this conjecture sounds nearly plausible. There are large problems, however, with an electromagnetic hypothesis in accounting for the polar lights: 1) electricity and magnetism do not move haphazardly about in enormous curtain shapes; 2) the Aurora is noticeably affected by local weather changes; 3) the Aurora displays a significant variety of colors, often concurrently; 4) the magnetic needle functions even at the

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equator, but the Aurora is almost exclusively polar; 5) actual electrical phenomena, such as lightning, are noisy, yet the Aurora is silent; 6) particles from the Sun are mainly hydrogen, yet very little hydrogen is recorded in the spectrograph's analysis of Auroral light; 7) If caused by a perpetual flow of electrons from the Sun, then why are Auroral displays sometimes present and sometimes absent?; 8) the most powerful refutation is that Auroras are often experienced on-site with no affect upon the magnetic needle!

Peter Freuchen writes in THE ARCTIC YEAR: "These peculiar lights ...brightest by far and best developed in the Arctic, reaching the height of beauty in the dark winter nights...luminous bands or rays dart rapidly over the sky. They change form continuously, and sometimes color too, and the rays often give the illusion of originating from a distant searchlight...On other occasions the aurora appears as a rippling curtain of light, steadily changing form and position. Or it may occur as a cascade of light radiating from a magnificent crown high up in the sky. Whatever the form, the aurora always exhibits movement and, generally, rapid change." The kaleidoscopic behaviour of the Aurora is fully explained by the limitless variety of atmospheric conditions present at any particular time between the Central Sun and the Polar Opening. For an instantaneous discreditation of the fraudulent 'electromagnetic bombardment' theory of Auroral production, we refer to this passage about Venus from Mark Chartrand's 1990 PLANETS: A GUIDE TO THE SOLAR SYSTEM: "Despite the fact that Venus has no magnetic field, it seems to have auroras high in its atmosphere; their origin is not understood." Greely states on page 158 of his book "The aurora...magnetic disturbances were rare during colorless and slowly changing forms." Page 184: "Despite the remarkable duration and extent of the aurora, the magnet was but slightly disturbed." Page 187: "The halo was preceded by an aurora, which was unaccompanied by magnetic disturbances." Acclaimed South Polar explorer Finn Ronne notes in his autobiography, ANTARCTICA, MY DESTINY "...I beheld an unimaginable crystalline beauty; and I felt myself a part of a surrealistic scene as I stood transfixed while the aurora australis washed over me." Nansen writes in his book on page 163 "The whole sky was ablaze with it...No words can depict the glory that met our eyes...It was an endless phantasmagoria of sparkling color, surpassing anything that one can dream." The evidence presented in the science books of William Reed and especially Marshall Gardner prove beyond any reasonable doubt the accuracy of United States patent 1096102, the Hollow Earth Theory. When one couples the monumental importance of this discovery with the nearly total non-acknowledgement of it in the major press, it is readily apparent that it has the dubious distinction of also being the single most pervasive conspiracy in the world. Why?

The famous unregistered aircraft commonly described as unidentified flying objects are the logical answer. Even ignoring all other aspects of the UFO situation, the authentication of at least some of these vehicles is fully established by the countless number of firm radar contacts measured on both military and commercial scopes. Common sense easily discerns the logical connection between the dramatic arrival of these aircraft in large numbers in 1947 and our own extraordinary technological leap of the 1940s---i.e. Atomic Bomb, trans-sound barrier flight, radar, television, etc. If the civilization operating these unregistered aircraft was headquartered on a distant planet, they would not be interested in the slightest; if, on the other hand, they occupy our interior sister world, in that case they would be extremely interested...es-

We need crime control--not gun control. National registration of guns was swiftly followed by confiscation and totalitarian government in Czechoslovakia in 1948, Poland in 1981, and Lithuania in 1990.

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pecially by our harnessing of the atom. It may very possibly be that atomic energy will lead---(or has led)---to the ultimate technology of antimatter, gravity-inertia reversal. Second only to national security, is a nation's desire to explore. As a peaceful pursuit, Mankind's most exhilarating ambition is Space exploration, an undertaking which we have barely begun. That will change soon if recent indications out of Nevada reach fruition. The long-sought technology of gravity-inertia reversal has finally been achieved and is being routinely flown in the Groom Dry Lake Antimatter Research Facility of Lincoln County, Nevada, USA. The large number of witnesses grew dramatically when NBC-TV aired their April 20, 1992 report by Pentagon correspondent Fred Francis at the edge of perhaps the most highly classified military base in the world---Area 51. After an eventual full disclosure and subsequent public exploration of the Interior Earth, Interior Mars will be even more fascinating. 'Sentido komun, katotohanan at saka katarungan'; common sense, truth and justice.

THE END

newsletter:
Flashpoint
1708 Patterson Road
Austin, TX 78733-6507

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Suite 922
1200 G Street, N.W.
Washington, D.C. 20005-3802
Telephone 202/383-2300

writes in the January 1994 issue of *Chronicles* that the actual "facts of frontier life suggest that the Old West had far less crime and far fewer innocent victims (per capita) than America has today, and that the young, the old, and

marksmen." Similarly, "none of the several banks that operated in Aurora or Bodie ever experienced a robbery," since bankers "went about armed, as did their employees, and robbers evidently had no desire to tangle with armed men."

McGrath reports that "American cities today average 30 or 40 times as much burglary and theft per capita as Bodie and Aurora." He contends that

Dr. McGrath, author of the 1984 book *Gunfighters, Highwaymen and Vigilantes: Violence on the Frontier*, minutely scrutinized two frontier mining towns in their heyday: Aurora, Nevada (1861-1865) and Bodie, California (1878-1882). He found that all of "the ingredients were there for an epidemic of crime, but none occurred." A key factor was the extent to which citizens were armed and willing to defend their lives and property.

and now we lost our way and our will as a nation and a people. It would

(Box 800, Mount Morris, IL 61054)

Mr. Mark Harp
107 North Holmes Street
Memphis, TN 38111

Dear Mr. Harp:

I found your Hollow Earth theory to be quite fascinating and enlightening. You have certainly done your research.

It was very thoughtful of you to include AW&ST on your mailing list. Your article provided for very interesting reading.

I extend every best wish for your future personal success. Thanks again.

Sincerely,

David North
David North
Managing Editor

Get US out!
OF THE UNITED NATIONS

Mark R. Harp
107 North Holmes
Memphis, TN 38111-3640

The White House
Kristine Gebbie
AIDS Policy Coordinator
1600 Penn. Ave. NW
Wash., DC 20500

