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Patsy Fleming Speeches - October 1996

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Remarks of

Patricia S. Fleming

National AIDS Policy Director

to

The National Alliance to End Homelessness

Leadership Roundtable

October 29, 1996

GOOD AFTERNOON:

Thank you for the opportunity to join you today. I also thank the members of your organization for your continued commitment, determination, and passion to put an end to homelessness in America. And I want to express my appreciation for your focus on HIV and AIDS.

As you know, the epidemic of HIV and AIDS has had a devastating impact on our nation. In just 15 years, more than 550,000 Americans have been diagnosed with AIDS and more than 350,000 men, women, and children have lost their lives to this terrible disease. Each day in the U.S., an average of 220 people are diagnosed with AIDS and more than 100 people lose their lives to AIDS. Every hour of every day five Americans become infected with HIV and two of them are under the age of 21.

This is not to say we haven't made some important progress in the fight against HIV and AIDS. We have seen the number of new cases level off and begin a very slow decline. In fact, just last year, for the first time in the epidemic, the number of Americans who died of AIDS was fewer than in the year before.

We have reduced the number of new HIV infections in this country from more than 100,000 a year to about 40,000 a year. And we have seen the life expectancy of people with AIDS more than double.

But none of us should be fooled for a moment. This is not enough. And it won't be enough until there are no more infections, no more new cases, and no more deaths.

President Clinton has made the fight against AIDS a national priority. In the four budgets approved since he became President, funding for AIDS research, prevention, and treatment has risen by more than 50 percent. And those increases come at a time when the overall federal discretionary budget has been virtually frozen.

We have nearly tripled funding for the Ryan White CARE Act. We have more than tripled funding for AIDS drug assistance programs. We have increased AIDS research funding by 40 percent and AIDS prevention funding by 26 percent. And funding for AIDS-specific housing assistance has increased by 96 percent.

During the past two years, the President has also been aggressive in fighting misguided proposals by the Republican leadership in Congress. He has vetoed legislation to block grant Medicaid and eliminate the federal guarantee of eligibility for those who are living with disabilities, including HIV and AIDS. He has defeated attempts to kick people with HIV out of the military. And just last month the President convinced Congress to drop its dangerous proposal to prohibit the use of federal funds to provide treatment to legal and illegal immigrants who are living with HIV and AIDS.

The Republican Congress has targeted not only the HOPWA program for people living with AIDS, but federal housing programs in general. This hurts people with AIDS as much as do cuts in HOPWA. Through the leadership of President Clinton and Secretary Cisneros we have been able to fight off the worst cuts. But we have a lot of ground to regain.

Again, these are important accomplishments, but we have so much more to do.

Now I want to talk with you about our agenda for housing assistance to Americans living with HIV and AIDS.

The need for housing for people with HIV and AIDS is abundantly clear. We know that at least 15 percent of the homeless people in the U.S. are HIV-positive. And we know that as many as one-third of all Americans living with AIDS are either homeless or in imminent danger of losing their housing. Many patients who are hospitalized with AIDS-related infections are unable to be discharged because they have no home to go to.

During the last year I have spent a great deal of time traveling to communities affected by AIDS. I have made a point of visiting AIDS housing programs so that I can sit down with the men and women who run the programs and, in particular, with the men, women, and children who live in these facilities. What I have heard and seen is both heartening and heartbreaking.

I don't need to tell you the kind of difference housing assistance can make in the life of a person and a family. By providing people with the opportunity to have shelter you restore their sense of dignity and their safety and you allow them to focus on the many, many other challenges in their lives. When it comes to a person living with HIV or AIDS, this can make an even bigger difference.

I have met with women who told me that until they got housing they weren't able to focus on their health needs because they were too busy figuring out where they and their children were going to sleep that night. As a result, their health spiraled quickly downward; all of the promising new drugs in the world wouldn't make a difference. But give that same woman a roof over her head and the ability to put food on the table and she has made a big step toward changing her life and the lives of her children.

There is a need for stable housing so that people with HIV can be treated with the newest drugs.

I have visited more than a dozen AIDS housing programs in cities large and small -- programs that bring hope and health to communities that often have had very little of either. Places like the Peter Claver House and Rafiki House in San Francisco, Bonaventure House in Chicago, Casa Betsaida in Brooklyn, AIDS Services of Dallas, and Broward House in Fort Lauderdale. These are true success stories.

That's why this Administration has made it a priority to expand AIDS housing assistance. Secretary Cisneros created the first Office of HIV Housing at HUD. That office, directed by Fred Karnas has provided greater focus for this critical challenge.

We have also fought for additional resources to expand assistance. When the President took office, the HOPWA program was funded at $100 million. In two years we increased that total to $186 million. But when the new Congress came to town two years ago one of the first votes in the House of Representatives was to eliminate HOPWA altogether. The President fought hard to keep HOPWA and vetoed the first bill the Congress sent him. Eventually we were able to stave off most of the damage but funding was cut by $15 million.

This year the President came back to the table and demanded an increase of $25 million in the HOPWA budget. Many organizations told us that it would be impossible to win an increase from this Congress but we just put our heads down and kept coming back and asking for more money. Finally, just last month, Congress approved the President's full request of $196 million.

These new funds will help cities and community-based organizations expand the reach of HOPWA so that we can better meet the growing demand for assistance across this country. Programs like the innovative grants awarded in San Francisco and Baltimore by HUD and the Department of Health and Human Services will combine housing and medical care programs under one roof.

Let me finish with some thoughts about the year ahead. Of course a lot of how the year ahead goes will depend on what happens a week from today. I've got my fingers crossed.

We could spend the year ahead fighting many of the same battles with Congress from the past two years over again or we can turn to the problems at hand and devise workable solutions. Instead of fighting with the Hill over whether or not to have a Medicaid program we can work to improve the program we have and make sure it reaches everyone it is designed to serve.

Instead of fighting off cuts in the HUD budget we will try to find ways to increase the resources available for housing assistance. And instead of fighting off cuts in AIDS research, prevention, and care we can work together to make sure our investments in those areas pay off.

We're entering a period of promise in this epidemic. The early results of the newest drug therapies provide a genuine reason for hope for people with AIDS and those who love them. But with that hope come a series of challenges for those of us in public policy. These are challenges that we welcome but challenges we have to meet.

We must work together to find ways to get these drugs to all who need them. We must work together to find ways to combine housing assistance and medical care so that those on the lower rungs of the ladder can climb up and see the future. And we must work together to protect the very basic human rights of our people.

These are big challenges but I don't think they are challenges that cannot be met. Each of us has lost too many friends to AIDS. Now it is time for us to fight, together, for those who are living. Those we have lost would want nothing less.

Thank you for all you have done and all you will do.

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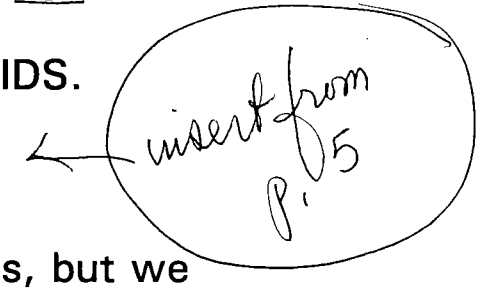

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During the last year I have spent a great deal of time traveling to communities affected by AIDS. I have made a point of visiting AIDS housing programs so that I can sit down with the men and women who run these programs and in particular with the men, women, and children who live in these facilities. What I have heard and seen is both heartening and heartbreaking.

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Places like the Peter Claver House and Rafiki House in San Francisco, Bonaventure House in Chicago, Casa Betsaida in Brooklyn, AIDS Services of Dallas, and Broward House in Fort Lauderdale. These are true success stories.

We constantly hear about communities infected with NIMBY disease. Well, let me tell you I visit communities that are fighting to get the next AIDS housing program. And the leaders of those communities tell me that AIDS housing programs improve the quality of life in a neighborhood not just by providing housing to families affected by AIDS but by offering jobs to people who are not infected. That's what I call a "win-win" situation.

That's why this Administration has made it a priority to expand AIDS housing assistance. Secretary Cisneros created the first Office of HIV Housing at ~~the Department of Housing and Urban Development~~ HUD directed by Fred Karnas. That office has provided greater focus for this critical challenge.

We have also fought for additional resources to expand assistance. When the President took office the HOPWA program was funded at $100 million. In two years we increased that total to $186 million. But when the new Congress came to town two years ago one of the first votes in the House of Representatives was to eliminate HOPWA altogether. The President fought hard to keep HOPWA and vetoed the first bill the Congress sent him. Eventually we were able to stave off most of the damage but funding was cut by $15 million.

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These are big challenges but I don't think they are challenges that cannot be met. Each of us has ~~prayed for~~ lost too many friends ~~who have lost their lives~~ to AIDS. Now it is time for us to fight, together, for those who are living. Those we have lost would want nothing less.

Thank you for all you have done and all you will do.

Remarks of

Patricia S. Fleming

National AIDS Policy Director

to

National Latino/a Lesbian and Gay Organization

October 10, 1996

GOOD MORNING:

Buenos dias. Bien venido a' Washington. Thank you Martin. Thank you Jesus, Adela, Vivian, Torres and Angel for your remarks, for your leadership, and for your commitment.

It is an honor and a pleasure to be here today and join you for this important conference. As an African-American woman and the mother of a gay son I value the existence of LLEGO. You send a powerful and positive message to all lesbian and gay, bisexual and transgenderal people of any culture
-- especially those who are young and questioning. You tell them that their lives matter and that they are valued. Thank you for that.

I bring you greetings from President Clinton, who has sent a message to you. I'm pleased to be part of this conference and encourage you to make the most of these next few days. LLEGO has already played an essential role in strengthening the gay and lesbian community across this country. Now, as you work to build your organization at the local, grassroots level, you pave the way for a better future. A future in which the voices of those you represent can truly be heard in the realm of public opinion and in the halls of Congress, state legislatures, governors' mansions, and the White House.

I love the theme of this conference. Sembrando la Semilla. Planting the seed. Tha's what we're all about. We are planting seeds for the future. A future in which HIV and AIDS no longer threaten our nation and our planet. And a future where racism, sexism, and homophobia no longer threaten our loved ones and our communities.

Tomorrow, our nation's capital will have the honor to host the NAMES Project Quilt, a remarkable testament to the men, women, and children who have lost their lives to AIDS. Nearly 40,000 panels. More than 70,000 names. Each representing someone who is no longer with us in person but lives with us in spirit. This is a sad occasion but it's also one that reminds us of our solidarity as a people and as a nation. It also reminds us of our task ahead.

This is a promising time in our global battle against HIV and AIDS. New treatments are offering the first real reason for hope that we have had in a long, long time. For the first time in many years, people living with HIV and AIDS are looking to the future with more faith than fear.

Last week, the President signed a very important bill for people living with AIDS and those who love them. The fiscal year 1997 budget bill included substantial across-the-board increases in funding for virtually every AIDS program.

We increased funding for the Ryan White CARE Act by more than 30 percent, providing funding to hundreds of new care programs.

We tripled funding for the AIDS drug assistance programs, offering access to the promising new treatments to thousands of people who would otherwise be locked out.

We increased funding for AIDS research by 6.7 percent to one and a-half billion dollars.

We increased funding for AIDS housing by 15 percent, providing shelter to people who would otherwise be left homeless.

And we got the first increase in AIDS prevention funding in three years, raising the CDC budget by $34 million dollars.

These new funds will go far toward meeting the rising needs of people with AIDS while continuing our remarkable advances in research and treatment, and protecting those who are uninfected.

I want to mention two other pieces of legislation, not because they passed but because they failed.

The first one was the proposal by Senator Dole and Speaker Gingrich to block grant the Medicaid program. Medicaid provides health care to more than 50 percent of the people living with AIDS and more than 90 percent of children with AIDS. It is a lifeline of support, paying for inpatient and outpatient care, home health care, and prescription drugs. The Republican proposal to wipe out the federal guarantee of Medicaid coverage for people with AIDS was a dagger pointed at the very heart of the people we care for.

The second legislative provision that was defeated was the immigration reform bill. It would have denies HIV treatment to illegal and legal immigrants living in the United States. Can you believe that any Congress would give such a proposal the light of day? Yet the Republicans in Congress attempted to force that legislation through. Only the President's demand that the provision be dropped before he would sign the budget kept it from being passed.

The President stood up under tremendous pressure from the Republican Congress and the Republican governors. He vetoed the Medicaid block grant once and threatened to do it again. This legislation must not pass and all of us must do everything we can to make sure it doesn't.

Let me turn now to a subject that is very near and dear to my heart. In my two years as director of the Office of National AIDS Policy I have spoken before many audiences on the impact that homophobia is having on the epidemic of HIV and AIDS. Simply put, I believe that homophobia is a co-factor for HIV infection. This is especially true among young people and among communities of color. It affects not only gay men but also lesbian, bisexual, and transgendered people.

You and I know the pressures that Latinos, African-Americans, Native Americans, and Asian Americans face from a society that is dominated by a majority that is anglo. Whether it is through direct discrimination or indirect societal messages, people of color are taught that our lives are worth less than the livers of others.

When you add to this the pressures created by homophobia in our society it is no wonder that far too many of our young gay men and women of color go through life with a feeling of worthlessness. When society tells you that you are worthless it takes a very strong character to overcome that message. As a result, many of our young brothers and sisters are putting themselves at risk.

Just today in the United States, nearly 50 teenagers will become infected with HIV. That's nearly 2 teenagers every hour. And almost half of those teens are gay or bisexual. These are appalling statistics and they demand action.

I was very pleased last December when the Centers for Disease Control and Prevention launched a new series of public service announcements called "Respect Yourself, Protect Yourself." They are aimed at young people and they include two very important messages. If you are not sexually active, you should know that delaying sex is the best protection against HIV infection. If you are sexually active -- and 75 percent of high school students say they are -- then you should be using a latex condom each and every time you have sex.

Those are important messages. Life-saving messages. But what was more important was the messengers. Instead of using actors or adult authority figures, we used real young people. Young people whose lives are very much like those of the people who are watching these ads on TV. The group of people featured in these ads were culturally diverse -- they included Latinos and Latinas, African-Americans, Anglo Americans men and women. And, for the first time in the history of the epidemic, they featured openly gay men talking to each other about safe sex.

This is a first step in a process that I hope will lead to AIDS prevention messages that are more gay-friendly and less homophobic. But we must do more. I want the local prevention planning councils to work to eliminate homophobia from their practices. And any prevention program that is funded by the federal government should make sure that it does not send homophobic messages to the public.

Let me close my remarks today with a quotation from a remarkable person. He was a proud, gay, Latino who helped to educate our nation about HIV and AIDS and left a legacy that includes thousands of lives saved.

In testimony he delivered to Congress, Pedro Zamora said the following:

> *"I needed positive messages about my sexuality. I needed to know about condoms, how to use them correctly and where to buy them. I needed to know that you can be sexual without having intercourse. I needed skills to negotiate relationships. I needed to know how to say, 'I don't want to have intercourse, I just want to be held.'"*

Together, we must make sure that more of our young people -- especially young gay men of color -- are empowered to recognize the truth in Pedro's message.

Muchas Gracias.

Remarks of

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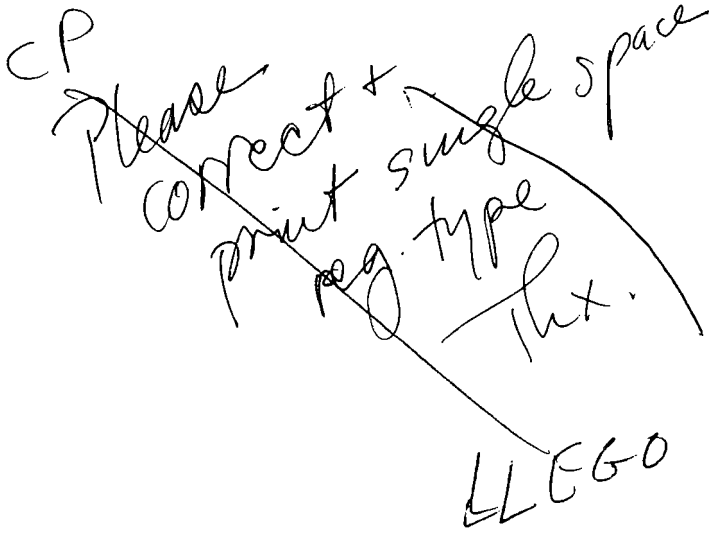

about 10 years

ED: Martin Ouelas-Guantero
Board Members:
Fabiana Cardoso
Hank Taverna

GOOD MORNING:

Evolution / Revolution

Buenos dias

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~~HANK TAV~~ ~~Ruben Rivera~~ ~~Carmen Cardona~~ Members

Jaime Cedraza

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Something about mgs

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You and I know the pressures that Latinos, African-Americans, Native Americans, and Asian Americans face from a society that is dominated by a majority that is ~~caucasian~~ Anglo. Whether it is through direct discrimination or indirect societal messages, people of color are taught that ~~their~~ our lives are worth less than ~~others~~ the lives of others.

When you add to this the pressures created by homophobia in our society it is no wonder that far too many of our young gay men and women of color go through life with a feeling of worthlessness. When society tells you that you are worthless it takes a very strong character to overcome that message. As a result, many of our young brothers and sisters are putting themselves at risk.

In March, I delivered a report to the President on the status of HIV among young people in this country. The findings were shocking.

Just today in the United States, nearly 50 teenagers will become infected with HIV. That's nearly 2 teenagers every hour. And almost half of those teens are gay or bisexual. These are appalling statistics and they demand action.

I was very pleased last December when the Centers for Disease Control and Prevention launched a new series of public service announcements called "Respect Yourself, Protect Yourself." They are aimed at young people and they include two very important messages. If you are not sexually active, you should know that delaying sex is the best protection against HIV infection. If you are sexually active -- and 75 percent of high school students say they are -- then you should be using a latex condom each and every time you have sex.

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This is a first step in a process that I hope will lead to AIDS prevention messages that are more gay-friendly and less homophobic. But we must do more. I want the local prevention planning councils to work to eliminate homophobia from their practices. And any prevention program that is funded by the federal government should make sure that it does not send homophobic messages to the public.

The same holds true for racist messages. You and I know that you don't have to call someone a racist name to insult and demean them. You can achieve the same result by simply ignoring people of color and transmitting messages that are aimed only at the majority population. We have made a great deal of progress in eliminating this kind of inadvertent racism from our prevention messages.

Let me close my remarks today with a quotation from a remarkable person. He was a proud, gay, Latino who helped to educate our nation about HIV and AIDS and left a legacy that includes thousands of lives saved.

In testimony he delivered to Congress, Pedro Zamora said the following:

"I needed positive messages about my sexuality. I needed to know about condoms, how to use them correctly and where to buy them. I needed to know that you can be sexual without having intercourse. I needed skills to negotiate relationships. I needed to know how to say, 'I don't want to have intercourse, I just want to be held.'"

Together, we must make sure that more of our young people -- especially young gay men of color -- are empowered to recognize the truth in Pedro's message.

Muchas Gracias

~~Thank you.~~

~~Letter from President.~~

Remarks of

Patricia S. Fleming

National AIDS Policy Director

to

American Social Health Association

October 8, 1996

GOOD EVENING:

Thank you Dr. Bob Waller and Ami Israel for your leadership and for the opportunity to join you this evening. Thank you, too, for the important work that you do in educating our nation on the facts about HIV and AIDS. By providing the facts and nothing but the facts each of you saves countless lives every day?

For fifteen years our nation and our planet have confronted an epidemic that has already killed more Americans than in all of the wars of the twentieth century combined. More than three hundred and thirty thousand (330,000) Americans have already lost their lives and more than half a million have already been diagnosed with AIDS.

This epidemic has required an unprecedented response by the federal government, state and local governments, and the private sector. In fact, it has demanded action by every American. And I believe our nation has responded heroically to those demands. Individuals, families, communities, teachers, business leaders, religious leaders, and a myriad of others have responded with love and compassion. As a result, the impact of this epidemic is much less than it could have been.

Just think back 10 years and remember that we were experiencing a rate of infection that was averaging nearly 150,000 people every year. Today, that rate is down to 40,000. Still too high, but much, much better than it was.

Recent months have produced a wealth of encouraging news about new research and new treatments that offer real hope to people who are living with HIV and AIDS. The early results of combination therapies involving the new protease inhibitors give us a real reason to look to the future with a little less fear and a little more faith.

I am also very encouraged by the results of the recently adjourned 104th Congress. Who would have thought two years ago as the Republicans took control of Congress that we would be able to talk about record increases in all AIDS programs. But a lot of hard work and determination by President Clinton and his Administration have paid off. The budget bill the President signed last week includes across-the-board increases in AIDS funding. We increased funding for the Ryan White CARE Act by more than 30 percent. We more than tripled funding for AIDS drug assistance programs to help thousands of people gain access to these promising new treatments. We raised AIDS research spending by 6.7 percent to $1.5 billion. We increased funding for AIDS housing by 15 percent. And, perhaps most gratifying, we increased funding for AIDS prevention programs at the CDC by $34 million, or 6 percent. All together, these increases average a 12.4 percent rise over fiscal year 1996. That is a remarkable record of accomplishment and one that we should all be proud of.

But whenever I recite these numbers, I always ask myself the same question: Is it enough? Can we use more? The answer, of course, is it is not enough and we can most certainly use more. As long as there are 100 Americans dying of AIDS every day and nearly 200 Americans being diagnosed with AIDS every 24 hours, we can do more. And we will do more.

In December, at the first-ever White House Conference on HIV and AIDS, President Clinton set an ambitious goal for our nation: To reduce the number of HIV infections in this country until there are none. Let me repeat that: Until there are none.

In order to reach that goal, each of you will have to play a critical role. As we all know, until there is a cure for AIDS or a vaccine to prevent infection, education is our best tool in reducing new infections.

Nearly three years ago, CDC began the community planning process, giving new power to communities to set the prevention priorities in their area. This program has re-energized local prevention experts and activists and given them a real stake in the work that we are doing. Community planning has helped to hone our message and to make sure that the appropriate populations are targeted in each community.

But, as I have said before, there is still a great deal more that needs to be done. While we have seen a reduction in the number of new infections in the U.S., there also has been a leveling off of that progress. In other words, the number of new infections has not declined for at least five years. We must -- we must -- bring that number down.

You will play a critical role in this national campaign. You are the first line of defense for our nation. The information you provide, the outlet you provide, and the advice you give through your hotlines can often make a tremendous difference in the life of an individual.

I know that our recent progress in research and treatment will make your job even more difficult and more important. The hope offered by new therapies means more people at risk for HIV infection will want to know their HIV status and will have detailed questions about these new treatments. I trust that you will be able to explain these often complex issues to them.

At the same time, with home test kits now available across the country, many more people will need your help and reassurance. Again, I know you will be up to the task and I thank you in advance for that assistance.

I'd like to talk to you now about some of the challenges ahead for those of us who are involved in AIDS prevention.

We have seen declines in the rate of infections in some populations -- most prominently among older gay men. Thanks to the heroic actions of the gay community itself, the messages of safer sex got through to a generation of men, many of whom changed their lives and saved their lives.

But today we see a new wave of infections sweeping through young gay men. Young men in their teens and early 20s who are becoming infected at alarming rates. This is especially true among young gay men of color. For too many of these men, many of the AIDS prevention messages have little to do with their own lives. As a result, they have little effect on their ability to protect themselves.

The impact of homophobia -- institutional and societal -- cannot be overstated. Young people who constantly hear that their lives mean little or nothing to their families, friends, and communities cannot be expected to value those lives and protect those lives. While I recognize that those of us in this room don't have the power to eradicate homophobia from our society, we do have the power and the obligation to eradicate homophobia from our AIDS prevention messages. I would also like to see you develop some new ways to specifically reach out to gay youth in ways that are meaningful to their lives.

The same holds true for other populations that are particularly vulnerable to HIV infection. While I applaud your emphasis on multi-culturalism, there is more that needs to be done to reach African-Americans, Hispanics, Asian-Americans, Native Americans, and others who are experiencing high rates of infection.

And this is especially true among women of color and those who are the partners of IV drug users. We have seen a leveling off of new HIV infections among IDUs but the rate of infection among the sexual partners of those individuals continue to rise. We need to reach these women and provide them with the tools they need to protect themselves.

Finally, I want to note the important linkage between HIV prevention and STD prevention. Researchers have found that an aggressive approach to STD prevention can reduce the incidence of HIV infection by as much as 40 percent. Clearly we need to do more in both areas. I know that the American Social Health Association holds the contracts for both the HIV hotline and the STD hotline and that has provided a critical connection between those two problems. I am gratified to learn that the CDC has now joined those two contracts so that the connection is even stronger.

Let me close with an example of how important your work is to the people of this country. In March, I delivered a report to the President on the very real dangers that HIV is posing to our young people. In that report, we noted that every hour of every day at least one American under the age of 21 is becoming infected. In fact, one in four new infections in this

country occurs in people under 21 and one-half of new infections occur among those under the age of 25. The report included important information about what can and should be done at all levels of society to reduce this threat to our children.

In May, the advice columnist Ann Landers mentioned this report in her column and called on people to get a copy from the National AIDS Clearinghouse. On the day that column ran, more than 5,000 Americans called the National AIDS Hotline to ask for a copy of that report and another 5,000 people downloaded the report from the CDC web page. Every one of those people got through to a trained professional who was able to help them with their desire for information. Who knows how many lives were saved that day?

You perform those kind of miracles every day and our nation is blessed by your work. As we move forward, know that you have a champion in Washington who understands the importance of the work you do and will continue to support you and those you serve.

Thank you.

Remarks of

Patricia S. Fleming

National AIDS Policy Director

to

American Social Health Association

October 8, 1996

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GOOD EVENING:

Thank you Dr. ~~Robert~~ Bob Waller and Peggy Clarke for your leadership and for the opportunity to join you this evening. Thank you, also, for the important work that you do to educate our nation on the facts about HIV and AIDS. By providing those facts, each of you saves countless lives every day.

For fifteen years our nation and our planet have confronted an epidemic that has already killed more Americans than all of the wars of the twentieth century combined. More than 330,000 three hundred + thirty thousand Americans have already lost their lives and more than half a million ~~of our brothers and sisters~~ have been diagnosed with AIDS.

This epidemic has required an unprecedented response by the federal government, state and local governments, and the private sector. In fact, it has demanded action by all of us. And I believe our nation has responded heroically to those demands. Individuals, families, communities, teachers, business leaders, religious leaders ~~institutions~~, and a myriad of others have responded with love and compassion. As a result, the impact of this epidemic is much less than it could have been.

Just think back 10 years and remember that we were experiencing a rate of infection that was averaging nearly 150,000 people every year. Today, that rate is down to 40,000. Still too high, but much, much better than it was.

Recent months have produced a wealth of encouraging news about new treatments that offer real hope to people who are living with HIV and AIDS. The early results of combination therapies involving the new protease inhibitors give us a reason to look to the future with a little less fear and a little more faith.

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But, as I have said before, there is still a great deal more that must be done. While we have seen a reduction in the number of new infections in the U.S., there also has been a leveling off of that progress. In other words, the number of new infections -- 40,000 a year -- has not declined for at least five years. We must -- we must -- bring that number down.

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But today we see a new wave of infections striking young gay men. Young men ~~Men~~, in their teens and early 20s who are becoming infected at alarming rates. This is especially true among young gay men of color. For too many of these men, the AIDS prevention messages often have little to do with their own lives. As a result, they have little effect on their ability to protect themselves.

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Thank you.

Remarks of

Patricia S. Fleming

National AIDS Policy Director

to

Community Health Project

Groundbreaking Ceremony

Did not attend.

October 16, 1996

GOOD MORNING:

Thank you, Dean, for that gracious introduction and for the opportunity to join you today. Thank you Mayor Giuliani, John Graves, Barbara Kaplan, Kimberly Smith, Richard Cotton. Thank you Councilmember Tom Duane, Assemblymembers Richard Gottfried and Deborah Glick, and State Senator Catherine Abate.

I bring greetings from President Clinton, a real champion for the health of all Americans.

I am very pleased to be here today. As the mother of a gay son I am proud of what you are beginning today. When this facility is complete, you will be able to expand the reach of the helping hand you reach out to this community and many others. You will provide a safe and welcoming place for lesbians, gay men, bisexuals, transgendered individuals, and many others. And you will provide high-quality, affordable health care.

I also want to applaud the collaboration that made this project possible. Local government working with community leaders to plant the seed for a project that will enrich this neighborhood for years to come. And, as a fully licensed health center, this facility will become eligible for Medicare and Medicaid reimbursement, so the Federal government is also a partner here.

Working together I know we can improve the health and the lives of the people of this community.

Thank you.