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FACSIMILE TRANSMISSION**PUBLIC POLICY DEPARTMENT**

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Date: 12/22/99To: Sandy Thurnau / Todd Summers @ ONAPFax Number: 202 / 456-2438From: Regina Aragón
Deputy Director for Public PolicyRE: Letter to POTUS Re: FY01 Budget for HIV/AIDSNumber of pages (including cover): 3

Remarks: ☐ URGENT!! ☐ For your review ☐ Reply ASAP ☐ Please Comment
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SAN FRANCISCO AIDS FOUNDATION

995 MARKET STREET, SUITE 200, SAN FRANCISCO, CALIFORNIA 94103
VISITORS' ENTRANCE: ONE 6TH STREET AT MARKET

December 23, 1999

The Honorable William Jefferson Clinton
The President
The White House
Washington, D.C. 20503

Dear Mr. President:

On behalf of the San Francisco AIDS Foundation (SFAF), I am writing to request your strong support for critical funding increases for federal HIV/AIDS programs in the Administration's FY 2001 budget request to the final session of the 106th Congress.

SFAF commends the Administration's efforts during the Omnibus FY 2000 Appropriations process, which resulted in significant increases in funding for HIV/AIDS programs. In particular, we want to thank you for your support of \$245.5 million in targeted funding for the Minority HIV/AIDS Initiative obtained in collaboration with the Congressional Black and Hispanic Caucuses. These targeted resources will continue the important work begun in FY 1999 to address persistent disparities in health outcomes across racial and ethnic groups nationally.

Despite this progress, we as a nation must not become complacent while significant unmet need for services remains. Just this month, researchers participating in the HIV Cost and Services Utilization Study (HCSUS) reported that one-third of the nation's HIV patients -- primarily minorities, women, drug users and individuals living in poverty -- have forgone medical care because of the competing demands of work or basic necessities such as food and shelter.

In FY 2001, SFAF joins other community leaders in calling for \$500 million in overall funding for the Minority HIV/AIDS Initiative. In addition, we request your support for the following funding increases as you finalize the Administration's FY 2001 budget:

Ryan White CARE Act

The Cities Advocating Emergency AIDS Relief (CAEAR) Coalition, of which SFAF is a member, has identified the need for \$635 million for Title I of the CARE Act in FY 2001, an \$89 million increase over FY 2000. The recent decrease in AIDS deaths nationwide is a direct result of the federal investment in medical care, supportive services and pharmaceuticals provided through the CARE Act. These reductions in AIDS-related deaths means that the number of people living with HIV and AIDS has grown steadily over the last several years, thereby increasing the demand for services funded by the CARE Act.

The AIDS Foundation also supports the request of the National Alliance of State and Territorial AIDS Directors for \$703 million for the AIDS Drug Assistance Program (ADAP), representing a \$130 million increase. Between June 1998 and June 1999, state ADAP programs have seen a 24% increase in the number of clients served at an average per client cost of \$9,314. State ADAP programs project 14,000 new individuals will seek services from the ADAP program in FY 2001. It is essential that federal funding to ADAP reflect this growing need.

President Clinton
December 23, 1999
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Additionally, the AIDS Foundation requests \$184 million for Title III early intervention medical care grants to community-based public and private health centers. This \$46 million increase will support ongoing efforts to address the growing needs experienced by clients served at the 197 directly funded Title III CARE Act sites across the country.

Housing Opportunities for People With AIDS (HOPWA)

SFAF requests that funding for the HOPWA program be increased by \$60 million for a total of \$292 million in FY 2001. As a critical component of the health care delivery system, HIV housing programs deserve your strong support. The ability to adhere to medical care and drug treatment is enhanced dramatically by safe, affordable, permanent housing. And, as new drug therapies help people remain healthier longer, turnover in AIDS housing programs has decreased, creating an urgent need for additional housing resources. In San Francisco alone, more than 3,000 individuals and families infected and affected by HIV/AIDS are currently on a centralized waiting list for housing assistance.

National Institutes of Health (NIH)

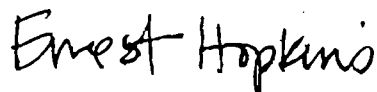
Despite the remarkable progress we have seen in treating people with HIV, we still have no cure for AIDS or a vaccine for HIV. Ongoing vaccine and microbicide development is essential to the ultimate goal of stopping the pandemic. The AIDS Foundation therefore supports the National Organization's Responding to AIDS (NORA) FY 2001 request for \$2.329 billion in research funding to be coordinated through the Office of AIDS Research (OAR).

International Efforts through the CDC and USAID

The AIDS Foundation applauds the Administration's leadership in obtaining an additional \$100 million for international HIV efforts in FY 2000, and asks that you continue to invest new resources in this area, as well.

Thank you for your consideration SFAF's FY 2001 budget requests for these important programs. I look forward to working with the Administration to improve the health and quality of life for people living with HIV/AIDS.

Sincerely,



Ernest Hopkins *RA*
Director of Federal Affairs

cc: Sandra Thurman, Office of National AIDS Policy
Eric Goosby, M.D., Dept. of Health and Human Services
Marsha Martin, Dept. of Health and Human Services
Daniel Mendelson, Office of Management and Budget

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PUBLIC POLICY DEPARTMENT

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Date: 12/16/99

To: Daniel Montoya / Todd Summers @ ONAP

Fax Number: 202 / 456-2438

From: Regina Aragón
Deputy Director for Public Policy

RE: Minority HIV/AIDS Initiative \$ in FY01

Number of pages (including cover): 6

Remarks: ☐ URGENT!! ☐ For your review ☐ Reply ASAP ☐ Please Comment
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Comments:

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December 15, 1999

The Honorable William Jefferson Clinton
The White House
1600 Pennsylvania Avenue, NW
Washington, DC 20500

Dear Mr. President:

We the undersigned Latinos, living with HIV/AIDS, service providers, advocates and community leaders, are writing to thank you for your strong leadership and longstanding commitment in the fight against AIDS domestically and internationally. We are also writing to ask you to sustain and expand your support of efforts to respond to the growing challenges posed by HIV/AIDS in communities of color.

Specifically we urge you to increase the current funding for the Minority AIDS Initiative of the Congressional Black and the Congressional Hispanic Caucuses to \$500 million in your FY 2001 budget request. This investment will provide our communities with the opportunity and resources to strengthen our organizational infrastructure, leadership and capacity to address the challenges of HIV/AIDS among Latinos and improve the health and well being of our communities.

Despite the advances this country has made in improving the health status of the total population, ethnic and racial minorities continue to experience significant health disparities. These disparities are particularly glaring in HIV/AIDS. While ethnic and racial minority groups in the U.S. make up 25% of the U.S. population they accounted for 67% of the new AIDS cases in 1998 reported to the Centers for Disease Control and Prevention (CDC).

We are particularly concerned about the impact of the HIV/AIDS epidemic in the Latino community. The Latino population is the second most highly impacted ethnic/racial minority group in the United States (U.S.). Latinos make up about 13% of the U.S. population yet account for 20% of the nation's new AIDS cases. In 1998, CDC reported that the rate of AIDS deaths per 100,000 population for Latinos was nearly four times that of whites. While males account for the largest proportion (82%) of cumulative AIDS cases reported among Latinos in the United States, the proportion of cases among women is rising, particularly as a result of heterosexual transmission.

Women represent 18% of cumulative AIDS cases among Latinos, but account for 21% of cases reported in 1998 alone. For adult and adolescent Latinos heterosexual contact accounts for the largest proportion (47%) of cumulative AIDS cases, most of which are linked to sex with an injection drug user (IDU). Female IDUs account for an additional 41% of AIDS cases among U.S. Latinas.

We are deeply troubled by the disproportionate impact of HIV/AIDS on Latino youth and young adults. Latino youth made up 20% of the 3,423 cases of AIDS reported through 1998 among young people ages 13 to 19. Moreover, Latino young men and women made up 21% of the 24,437 cases of AIDS reported among young adults ages 20-24, and 20% of the 93,280 cases reported among those ages 25-29. The Latino population is relatively young and will soon be the largest minority group in the country. Our communities will face severe consequences in the new millennium if the spread of HIV/AIDS is not curbed now among adolescents and young adults.

We applaud your efforts, in partnership with the Congressional Black Caucus, to invest significant targeted resources to address the severity of the AIDS epidemic among African Americans and other minority populations in FY 1999. While the \$245 million investment made for FY 2000 for the Minority AIDS Initiative will provide the opportunity to expand the initiative to the Latino community, and target needed resources, it is not nearly enough to address the severity of the problem and high needs in communities of color.

Despite the important advances that have been made, unabated HIV continues to spread in communities that are already experiencing the consequences of pervasive poverty, substance abuse, high rates of adolescent pregnancies and sexually transmitted diseases, and fragile health care systems. By doubling the funding for the Minority AIDS Initiative in FY 2001 your administration will go a long way towards addressing the rapidly expanding epidemic in the Latino community and preventing major crises in HIV/AIDS among Asian and Pacific Islanders and Native Americans.

Because of our communities' reliance on all federal HIV programs, we also urge your support for substantial increases in base funding for all domestic and international programs in FY 2001. This includes the programs funded through the Health Resources and Services Administration (HRSA), the Centers for Disease Control and Prevention (CDC), and the Substance Abuse and Mental Health Services Administration (SAMHSA).

Please direct any questions or responses to this letter to Miguelina Maldonado, Director of Government Relations and Public Policy, National Minority AIDS Council, 1931 13th Street NW, Washington, DC, 20009, 202-483-6622, fax # 202-483-1135.

Thank you for your consideration of our request.

Respectfully,

Hortensia Amaro, Professor, Boston University School of Public Health,
Boston, MA

Regina Aragon, Deputy Director Public Policy, San Francisco AIDS Foundation,
San Francisco, CA

Oscar De La O, Executive Director, Bienestar Human Services,
East Los Angeles, CA

Frank Beadle De Palomo, Vice President and Director, AED Center for
Community-Based Health Strategies, Washington, DC

Dennis deLeon, Executive Director, Latino Commission on AIDS, New York, NY

Catherine M. Lins, Executive Director, Midwest Hispanic AIDS Coalition,
Chicago, IL

Miguelina Maldonado, Director, Government Relations and Public Policy,
National Minority AIDS Council, Washington, DC

Hilda Melore, Voices of Women of Color Against HIV/AIDS, Brooklyn, NY

David Ernesto Munar, Director of Public Policy, AIDS Foundation of Chicago,
Chicago, IL

Jose Martin Garcia Orduna, Technical Assistance Manager, The National Latina/o
Lesbian, Gay, Bisexual & Transgender Organization, Washington, DC

Omar Perez, Founder, National Coalition of Latinos and Latinas Living with
HIV/AIDS, Washington, DC

Rebeca Ramos, Technical Cooperation Director, U.S./Mexico Border Health
Association, El Paso, TX

Elsa Rios, Esq., Executive Director, HIV Law Project, New York, NY

Heriberto Sanchez-Soto, Executive Director, Hispanic AIDS Forum, Inc.,
New York, NY

Jose Toro-Alfonso, PhD, Associate Director, Latino HIV/AIDS Research Training
Program, San Juan, PR

Vivian L. Torres, Founder, National Coalition of Latinos/as Living with
HIV/AIDS, Washington, DC



December 6, 1999

The President
The White House
Washington, DC 20500

Dear Mr. President:

We are writing to express our deep appreciation and gratitude for your continuing efforts in the fight against HIV and AIDS. Your leadership has contributed to significant gains in our attempts to end this deadly epidemic at home and abroad. We are writing to request your continued support of our efforts to enhance and expand the capacity of African-American communities to better respond to this escalating crisis by including \$500 million for the Congressional Black Caucus sponsored HIV/AIDS health emergency initiative in your fiscal year 2001 budget.

The Centers for Disease Control and Prevention reported in August that the AIDS death rates in 1998 remained nearly 10 times higher in African Americans than among whites. Similarly, the rate of AIDS incidence is almost 10 times higher among African Americans than whites. It is estimated that 60% of all new HIV infections are in African Americans. The percentage is especially high among African American women heterosexually exposed. Alarming, a report from the New York State Department of Health AIDS Institute found that African American injection drug users had an HIV prevalence rate of 19% in 1998, nearly four times that of whites.

We are especially concerned about the devastating impact of HIV among African American and Latino youth. A recent study from the Sacramento Department of Health indicated that young gay African American men were at 5.8 times greater risk for HIV infection than other young gay men. It is estimated that as many as 100,000 young people in the United States between the ages of 13 and 21 are infected with HIV and most don't know they have a life threatening disease. And, as such, they are not receiving the necessary life-prolonging health care treatment and related services that they so desperately need.

Sadly, despite our progress of the last few years the HIV epidemic continues unabated in African American communities. As you are keenly aware, this health crisis is due to longstanding vestiges of poverty, delayed diagnosis and treatment because of inadequate access to quality health care, culturally irresponsible health care providers, insufficient access to effective substance abuse prevention and treatment -- the list goes on and on.

1413 K Street, NW
Washington, DC
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202-698-0414
FAX 202-698-0435
www.napwa.org

While we know and appreciate your commitment to improving the economic and social well being of our community. We must strongly urge you to expand our nation's investment in the health of our people by doubling our current capacity building efforts to respond to the HIV epidemic. The fiscal year 2001 budget must include \$500 million to strengthen the capacity in communities of color if we are to successfully meet this challenge.

Again, we thank you for your steadfast commitment, and we look forward to working closely with you to turn the tide of this life threatening disease in the African American community.

Respectfully yours,



A. Cornelius Baker, National Association of People with AIDS

Debra Frazier-Howze, National Black Leadership Commission on AIDS

Patricia Carter, Leading for Life Project, Harvard AIDS Institute, Cambridge

Rev. Yvette Flunder, Ark of Refuge, San Francisco

Ernest Hopkins, San Francisco AIDS Foundation, San Francisco

Sandra McDonald, Outreach, Inc., Atlanta

Beny Primm, M.D., Addiction Research and Treatment Corporation, New York

Rev. Edwin Sanders, Metropolitan Interdominational Church, Nashville

Mildred Williamson, Woodlawn Adult Health Center, Dallas