

Withdrawal/Redaction Sheet

Clinton Library

DOCUMENT NO. AND TYPE	SUBJECT/TITLE	DATE	RESTRICTION
001. email	From MElskowitz@aol.com to Multiple Recipients Re: Fwd: Re: Don't Delete, Send it Back (6 pages)	10/06/1998	Personal Misfile
002. email	From Michael Alba to Todd Summers Re: Point of Information (2 pages)	10/08/1998	Personal Misfile
003. email	From Michael Alba to Todd Summers Re: Point of Information (1 page)	10/08/1998	Personal Misfile
004. email	From Jeff Trandahl to Todd Summers Re: They're in (1 page)	10/13/1998	Personal Misfile

COLLECTION:

Clinton Presidential Records
Tape Restoration Project [Email]
OPD ([Todd A Summers])
OA/Box Number: 250000

FOLDER TITLE:

[10/01/1998 - 10/13/1998]

2018-0758-F

jn569

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]

RECORD TYPE: PRESIDENTIAL (TRP NOTES MAIL)

CREATOR: hivaidslst (hivaidslst@njdc.com [UNKNOWN])

CREATION DATE/TIME: 1-OCT-1998 13:56:47.00

SUBJECT: Kaiser Daily HIV/AIDS Report

TO: Todd A. Summers (CN=Todd A. Summers/OU=OPD/O=EOP [OPD])

READ:UNKNOWN

TEXT:

KAISER DAILY HIV/AIDS REPORT

A news service of The Henry J. Kaiser Family Foundation

<http://report.kff.org/aidshiv/>

Thursday, October 1, 1998

POLITICS & POLICY

=====

#1 CALIFORNIA: Governor Vetoes Coded HIV-Reporting Bill, Signs

HIV Exposure Measure

#2 AIDS ADVOCACY: Harvey Resigns From AIDS Policy Center

GLOBAL CHALLENGES

=====

#3 UGANDA: Vaccine Trials Fraught With Ethical Peril

#4 CANADA: Docs With HIV To Be 'Ethically Obligated' To Report

Status

#5 SOUTH AFRICA: Province Sees Large Number Of HIV-Positive

Women

SCIENCE & MEDICINE

=====

#6 GENE THERAPY: Researchers Locate Immune System 'On-Off Switch'

SPECIAL NOTICE

Please send us your press releases and other news items to be covered in future issues of the Kaiser Daily HIV/AIDS Report.

Fax: 703/518-8703, E-mail: report@kff.org,

Phone: 703-518-8725

POLITICS & POLICY

#1 CALIFORNIA: GOVERNOR VETOES CODED HIV-REPORTING BILL, SIGNS HIV EXPOSURE MEASURE

On his last day to act on legislation sent to him by this year's Legislature, California Gov. Pete Wilson (R) yesterday vetoed a bill that would have set up a "unique identifier" system for tracking HIV in the state. Authored by state Assemblywoman Carole Migden (D), AB 1663 would have created a reporting system based on alphanumeric code, rather than names. In his veto message, Wilson "conceded" that the state is "one of only nine states that do not track HIV." However, he said names-based reporting is needed for effective partner notification services, and said, "irrational concerns over privacy should not interfere with what must be our highest priority, interrupting the chain of

HIV transmission" (Lucas, San Francisco Chronicle, 10/1). Pat Christen, executive director of the San Francisco AIDS Foundation, called the veto "harmful and short-sighted." She said, "It leaves our state without a comprehensive HIV reporting system, and squanders a unique opportunity to implement [a] system that has the strong support of both mainstream medical groups, such as the California Medical Association, as well as other HIV advocates" (SFAF release, 9/30). Eileen Hansen, public policy director of the AIDS Legal Referral Panel, said, "It is appalling that the governor would ignore the sound public health advice provided to him and would, instead, listen to the political agenda of a few extremists who can't understand the damage collecting names would cause."

CRAZY EIGHTS

Wilson signed another HIV-related bill yesterday, SB 705, that makes it a felony -- punishable by up to eight years in prison -- "to knowingly expose an unaware person to the virus which causes AIDS," Reuters/Nando Times reports. "This is a deadly act that the state has the right and responsibility to deter," he said. The new law also "allows a person's HIV status to be disclosed if the person is the subject of a criminal investigation for committing this crime" (Reuters/Nando Times, 9/30).

NO MORE NEEDLE STICKS

In other action yesterday, Wilson signed a bill (AB 1208) requiring hospitals to use safety needles to prevent health care workers from potentially contracting diseases such as hepatitis

and HIV/AIDS through accidental needle sticks (Lawrence, AP/Capitol Alert, 10/1).

#2 AIDS ADVOCACY: HARVEY RESIGNS FROM AIDS POLICY CENTER

David Harvey, executive director of the AIDS Policy Center for Children, Youth and Families, announced yesterday that he is resigning his position effective February 1999. The Washington, DC-based center is comprised of 350 community-based organizations responding to the concerns of children, youth, women and families affected by HIV/AIDS. The center advocates change through policy research, education and advocacy, and Harvey has been there since its inception in 1994. "It has been a great joy and privilege to serve the national AIDS community," Harvey said, adding that he "take[s] pride in the many accomplishments of AIDS Policy Center." Mildred Williamson, president of the center's board of directors, said, "Thanks to David's extraordinary leadership and energy, AIDS Policy Center has become a strong national voice for children, youth, women, families and people of color affected by HIV/AIDS." During his four years with the center, Harvey testified before Congress, wrote extensively and served as the elected co-chair of National Organizations Responding to AIDS, a coalition of 175 national public health, civil rights, religious and labor organizations. White House Office of National AIDS Policy Director Sandra Thurman said, "This is a great loss for the AIDS community. David Harvey has worked tirelessly to improve the lives of people living with HIV. He is one of the most experienced and effective AIDS advocates in Washington, and

he will be greatly missed" (APC release, 9/30).

GLOBAL CHALLENGES

#3 UGANDA: VACCINE TRIALS FRAUGHT WITH ETHICAL PERIL

The front page of today's New York Times reports that upcoming tests of an AIDS vaccine in Uganda represent "one of the most promising and ethically contentious experiments in the history of medicine." The trial will consist of 40 volunteers, of whom "half will receive a placebo" and the "other half will receive a vaccine" consisting of "some genes responsible for producing important HIV proteins." The trial will be the first time that a vaccine is initially tested in the third world and has provoked controversy, since "ethical guidelines have made clear that vaccines should be tested in developed countries, where health care is excellent, before they are used in places without a safety net, like Uganda." Lead investigator Dr. Roy Mugerwa said Uganda is the proper location for the trial. "We are the people with the problem. ... The risk belongs here, where the people are dying," he said. The ethical dilemmas inherent in the trial center on three issues:

- o Informed consent, in which patients fully understand the risks involved in participation, is "impossible to attain" in Uganda.
- o If the tests show a degree of success, should the vaccine be distributed immediately, or should researchers continue administering tests even though it will mean that half of

patients will receive a useless placebo?

- o A vaccine, if developed, will likely be out of financial reach for Ugandans, even though they will have borne the brunt of risk in its development.

MUST MOVE FORWARD

Dr. Peter Mugenyi, director of Uganda's Joint Clinical Research Center, said that efforts must continue no matter what the ethical costs: "Sure, there are some questions that are hard to address. ... In the history of medicine, the only things that have really worked to stop diseases in the third world have been vaccines. Drugs won't work for us. Prevention has obviously failed. Education is almost impossible. Without a vaccine, we are going to keep on losing, and we are going to lose a lot" (Specter, New York Times, 10/1). [Click here for previous coverage of AIDS in Africa.](#)

#4 CANADA: DOCS WITH HIV TO BE 'ETHICALLY OBLIGED' TO REPORT STATUS

Although the College of Physicians and Surgeons of Ontario "has backed down on mandatory testing and reporting" of physicians' HIV status, it "is putting the onus on doctors to come forward voluntarily" if they are infected with HIV, hepatitis B or hepatitis C. A draft policy scheduled to go before the college council today states that doctors "will be 'ethically obliged' to report their condition to the physicians' college," the Toronto Star reports (Daly, 9/30). Cathy Fooks, director of policy for the college, said, "If they don't and

something happens, then they may be subject to some action here and they may be subject to some (civil) action if the patient chooses to proceed" (Breckenridge, Toronto Globe & Mail, 9/30).

The draft policy states that "an infected doctor who reports to the college could still continue in practice, but would go before an expert panel set up by the college. The panel would decide whether the physician must make changes to his practice or change jobs." The Toronto Star reports that "patients are not likely to be informed that their doctor is infected unless an expert panel decides the risk is high enough." The draft policy also "strongly urges doctors to be immunized for hepatitis B and to be tested for HIV and other serious infectious diseases" (9/30).

FROM 'PLAN A' TO 'PLAN B'

The original policy "would have required doctors treating infected physicians to identify them to the college." But Fooks said the college "doesn't have the legal power to make it mandatory for doctors to undergo testing and report the findings," and that "[t]here are also human rights issues raised when doctors are forced into health care or [forced] to make private information about themselves public" (Artuso, Toronto Sun, 9/30). To that extent, the Canadian Medical Association and Canadian Dental Association argued that the policy "infringed on their members' privacy and autonomy." Fooks said, "The college came to the conclusion that protection of the public is more effective if it's done in a cooperative and conciliatory fashion." She said "officials tried to come up with a fair process that protects the public but recognizes that the

individual doctor is also a patient" (Toronto Star, 9/30).

#5 SOUTH AFRICA: PROVINCE SEES LARGE NUMBER OF HIV-POSITIVE WOMEN

"Women in KwaZulu-Natal form a large part of people infected by HIV/AIDS," said provincial health official Zweli Mkhize at an HIV/AIDS and sexually transmitted diseases review meeting Friday. He said that "more than 58% of women admitted to King Edward VIII hospital in Durban were infected with the disease," and "a study on people under" 25 years-old "who visited the Durban sexually transmitted diseases clinic revealed that 70% of women were HIV positive." Mkhize noted that the "increase of the spread of the disease in the province" is the result of unemployment and poverty. He said, "If unemployment and poverty is not addressed, people will in desperation, stream to cities to find ways to survive. These then become the breeding grounds of sickness and epidemics." He also "warned parents and the communities not to exploit young women for labor which made them vulnerable to sexual abuse by males in the industries." Mkhize said that the provincial government is "taking the issue of AIDS seriously" and has "invited the public" to give their input (ANC Daily News Briefing, 9/25). [Click here for past coverage of HIV/AIDS in KwaZulu-Natal.](#)

SCIENCE & MEDICINE

#6 GENE THERAPY: RESEARCHERS LOCATE IMMUNE SYSTEM 'ON-OFF

SWITCH'

A newly discovered gene named "scurfy" that operates as an "on-off" switch for the immune system could lead to new drugs to fight AIDS, cancer and arthritis, according to Tuesday's announcement from the British company Chiroscience Group PLC. Lead scientist Dr. Fred Ramsdell said that the scurfy gene promises "a new and relatively exciting way for us to manipulate the immune system." Scurfy, which gets its name from a strain of research mice carrying the mutant gene, regulates CD-4 T-cells, a crucial component of the immune system known to be vulnerable to the AIDS virus. Dr. Ramsdell's team first located the gene in mice and is now attempting to "pin down the precise function of the gene in humans" (Reuters/Washington Times, 9/30).

=====

The Kaiser Daily HIV/AIDS Report is published for The Henry J. Kaiser Family Foundation by National Journal Group Inc.

Copyright 1998 by National Journal Group Inc., 1501 M St., N.W., Washington, DC 20005. All rights reserved.

Phone: 703-518-8725, Fax: 703-518-8703

E-mail: report@kff.org

EDITOR-IN-CHIEF: Patricia Miller

ASSOCIATE EDITORS: Amy Paulson, Rosalee Sanchez

CONTRIBUTING EDITOR: Russ Walker

CONTRIBUTING WRITERS: Kathleen Donohue, Jeff Dufour, Rachel
Kennedy, Allison Morgan, Adam Pasick

=====

If at anytime you wish to discontinue e-mail delivery of the
Kaiser Daily HIV/AIDS Report, simply reply to this message with
"unsubscribe" (without quotes) in the subject line.

-30-

:

RECORD TYPE: PRESIDENTIAL (TRP NOTES MAIL)

CREATOR: Coates, Tom ("Coates, Tom" <TCoates@psg.ucsf.edu> [UNKNOWN])

CREATION DATE/TIME: 1-OCT-1998 13:34:04.00

SUBJECT: RE: AB 1663 Vetoeed; Other HIV bills update

TO: Bindman, Andy ("Bindman, Andy" <bindman@itsa.ucsf.edu> [UNKNOWN])
READ:UNKNOWN

TO: Charlebois, Edwin ("Charlebois, Edwin (SFGH)" <edwin@cygnus.ucsf.edu> [UNKNOWN])
READ:UNKNOWN

TO: Cogorno, Rob ("Cogorno, Rob" <Robert.Cogorno@mail.house.gov> [UNKNOWN])
READ:UNKNOWN

TO: Collins, Chris ("Collins, Chris" <Chris.Collins@mail.house.gov> [UNKNOWN])
READ:UNKNOWN

TO: Franks, Pat ("Franks, Pat" <pfranks@itsa.ucsf.edu> [UNKNOWN])
READ:UNKNOWN

TO: Goosby, Eric ("Goosby, Eric" <EGoosby@osophs.dhhs.gov> [UNKNOWN])
READ:UNKNOWN

TO: Hecht, Rick ("Hecht, Rick" <rhecht@sfids.ucsf.edu> [UNKNOWN])
READ:UNKNOWN

TO: Merson, Mike ("Merson, Mike" <MersonMH@MASPOL.MAS.YALE.EDU> [UNKNOWN])
READ:UNKNOWN

TO: Palacio, Herminia ("Palacio, Herminia" <herminia_palacio@dph.sf.ca.us> [UNKNOWN])
READ:UNKNOWN

TO: Shriver, Mike ("Shriver, Mike" <MDSHRIVER@aol.com> [UNKNOWN])
READ:UNKNOWN

TO: von Zinkernagel, Deborah ("von Zinkernagel, Deborah" <dvonzinkernagel@osophs.dhhs.gov> [UNKNOWN])
READ:UNKNOWN

TO: Westmoreland, Tim ("Westmoreland, Tim" <WESTMORT@wpgate.law3.georgetown.edu> [UNKNOWN])
READ:UNKNOWN

TO: Zingale, Daniel ("Zingale, Daniel" <dzingale@aidsaction.org> [UNKNOWN])
READ:UNKNOWN

TO: Chesney, Margaret ("Chesney, Margaret" <MChesney@psg.ucsf.edu> [UNKNOWN])
READ:UNKNOWN

TO: Lo, Bernie ("Lo, Bernie" <bernie@itsa.ucsf.edu> [UNKNOWN])
READ:UNKNOWN

TO: Morin, Steve ("Morin, Steve" <SMorin@psg.ucsf.edu> [UNKNOWN])

READ:UNKNOWN

TO: Rutherford, George ("Rutherford, George" <GRutherford@psg.ucsf.edu> [UNKNOWN])

READ:UNKNOWN

TO: Stryker, Jeff ("Stryker, Jeff" <stryker@psg.ucsf.edu> [UNKNOWN])

READ:UNKNOWN

TO: Todd A. Summers (CN=Todd A. Summers/OU=OPD/O=EOP [OPD])

READ:UNKNOWN

CC: Gayle, Helene D ("Gayle, Helene D" <hdgl@cdc.gov> [UNKNOWN])

READ:UNKNOWN

CC: Janssen, Rob ("Janssen, Rob" <rxjl@cdc.gov> [UNKNOWN])

READ:UNKNOWN

TEXT:

well, that's quite unfortunate. Thanks to all for all of the hard work

on this

TOM

Thomas J. Coates PhD

Professor of Medicine and Epidemiology

Director, UCSF AIDS Research Institute and

Center for AIDS Prevention Studies

University of California

74 New Montgomery #600

San Francisco CA 94105

t: 415-597-9157

f: 415-597-9213

email: tcoates@psg.ucsf.edu

homepage: hivinsite.ucsf.edu

> -----Original Message-----

> From: Morin, Steve

> Sent: Wednesday, September 30, 1998 5:38 PM

> To: 'Collins, Chris'; 'Cogorno, Rob'; 'Shriver, Mike'; Stryker,
> Jeff; 'Summers, Todd'; 'von Zinkernagel, Deborah'; 'Westmoreland,
> Tim'; 'Zingale, Daniel'; 'Bindman, Andy'; 'Charlebois, Edwin (SFGH)';
> Chesney, Margaret; Coates, Tom; 'Franks, Pat'; 'Goosby, Eric'; 'Hecht,
> Rick'; 'Merson, Mike'; 'Palacio, Herminia'; Lo, Bernie; Rutherford,
> George

> Cc: 'Gayle, Helene D'; 'Janssen, Rob'

> Subject: FW: AB 1663 Vetoed; Other HIV bills update

>

> FYI.

>

> -----Original Message-----

> From: Dillon, Fred [SMTP:fdillon@sfaf.org]

> Sent: Wednesday, September 30, 1998 5:14 PM

> To: 'Barnes, Bonita'; 'Bau, Ignatius'; 'Bobrowsky, Joshua';

'Clary,

> Ryan'; 'Conner, Tomiko'; 'Donnelly, Anne'; 'Dunn, Pat';

> 'Dunn-Mortimer, John'; 'Etzel, Mark'; 'Forbes, Anna'; 'Katz, Mitch';

> 'Kilbourn, Seth'; 'Kwong, Sophia'; 'McCormick, Ellen'; 'Montgomery,

> Michael'; Morin, Steve; Murchison, Chris; 'Shalson, Axel'; 'Small

> Navarro, Valerie'; 'Swenson, Karl'; 'Thomas, Laura'; 'Zollman, Steve';

> 'fredjason@earthlink.net'

> Subject: AB 1663 Vetoed; Other HIV bills update

>

> We just received word that the Governor vetoed AB 1663 (Migden), the

> HIV

> non-names based reporting bill, despite broad statewide support for

> this

> critical public health measure. It is terribly disappointing that the

> Governor chose to veto this bill and missed out on the opportunity to

> enact a sound HIV reporting system that had the support of the HIV

> community and the mainstream medical groups. We will try to fax out

> the

> Governor's veto message to you as soon as possible. Here is the text

> of

> the Coalition and SFAF's press releases on the Governor's action.

>

>

> FOR IMMEDIATE RELEASE: Wednesday,

> September 30, 1998

> Contact: Fred Dillon, Regina Aragón, SF AIDS

> Foundation: 415/487-3080

>

> AIDS Advocates Denounce Governor's Veto of

> HIV Reporting Bill

>

> California Misses Out on Critical Opportunity to Better Track HIV

> Epidemic,

> Warn Health Officials and San Francisco AIDS Foundation

>

> SAN FRANCISCO, CA - A bill that would have established a statewide

> mechanism for reporting new cases of HIV in California was vetoed by

> Governor Pete Wilson today despite solid bipartisan support in the

> State

> Legislature. Without this new tracking tool, health officials will

> find

> it increasingly difficult to effectively plan and target HIV services

> and prevention education efforts, public health officials and AIDS

> advocates warned today.

>

> "Governor Wilson's veto of AB 1663 is both harmful and short-sighted.

> It

> leaves our state without a comprehensive HIV reporting system, and

> squanders a unique opportunity to implement an HIV reporting system

> that

> has the strong support of both mainstream medical groups, such as the

> California Medical Association, as well as other HIV advocates," said

> San Francisco AIDS Foundation (SFAF) Executive Director Pat Christen.

>

> Local health officials, who endorsed the bill, were dismayed by the

> Governor's veto. "This bill would have enabled California to modernize

> its AIDS case reporting system to incorporate HIV cases, without

> driving

> individuals away from HIV testing and medical care" said Dr. Mitchell

> Katz, the Director of Health for the City and County of San Francisco.

> "AB 1663 represented a sound public health approach to HIV reporting,

> and deserved the Governor's support."

>

> Authored by Assemblywoman Carole Migden (D-San Francisco), AB 1663

> would

> have established an HIV reporting system that used "unique identifier"

> codes to track new HIV cases instead of names--a distinction that the

> San Francisco AIDS Foundation (SFAF) believes is crucial. "By avoiding

> the use of names, AB 1663 would have enhanced public health and

> protected patient confidentiality, ensuring that individuals were not

> deterred from seeking HIV testing and early treatment," said Fred

> Dillon, State Policy Director for the San Francisco AIDS Foundation.

> In

> a 1996 survey conducted at Los Angeles HIV testing centers, 86% of

> respondents said they would not have been tested if they knew their

> names were released to the government. A similar survey in San

> Francisco yielded comparable results.

>

> California would have joined several other states - including

> Maryland,

> Illinois, Massachusetts and Hawaii - that have already adopted a coded

> system of HIV reporting. "Our hope is that in 1999, a new state

> Legislature and Governor will undo the harm Governor Wilson has done

> in

> vetoing this important public health measure," said Dillon.

>

> The San Francisco AIDS Foundation is a non-profit community-based AIDS

> service organization that has been at the forefront of the battle

> against HIV disease for fifteen years.

>

> ###

> 8california HIV surveillance coalition 3

>

> FOR IMMEDIATE RELEASE

> Contact: Eileen Hansen, 415/291-5472

>

> Governor Wilson Vetoes Critical HIV Reporting Bill

>

> Public Health Officials, Health Care Providers, and HIV Advocates

> Denounce Decision to Veto Public Health Measure

>

> <Wednesday, September 30, 1998> Governor Wilson today vetoed AB 1663,

> a

> bill that would have enabled public health officials to better track

> the

> spread of HIV by requiring that HIV infections be reported throughout

> California. Authored by Assemblywoman Carole Migden (D-SF), AB 1663

> would have protected public health and patients' confidentiality by

> requiring that the reporting system be based on unique code numbers

> rather than individuals' names, thereby minimizing the extent to which

> individuals are deterred from seeking HIV testing and appropriate

> medical care.

>

> "We are dismayed that Governor Wilson chose to veto this critical

> public

> health measure that enjoyed bipartisan support in the State

> Legislature," said Eileen Hansen, Co-Chair of the California HIV

> Surveillance Coalition and Public Policy Director for the AIDS Legal

> Referral Panel. "As a result of his action, California will continue

> to

> have no system of HIV reporting, leaving public health officials

> unable

> to appropriately monitor the HIV epidemic and better target scarce HIV

> prevention and care resources. It is clear that the Governor chose

> politics over sound public health policy."

>

> AB 1663 represented a remarkable compromise between HIV advocates-who

> have long opposed HIV reporting of any kind-and mainstream medical

> groups that have traditionally supported reporting the names of those

> who are HIV-positive. As a result of this compromise, the bill was

> ultimately supported by a broad coalition of public health officials,

> health care providers, and people living with HIV, including both the

> California Medical Association (CMA) and the California Conference of

> Local Health Officers (CCLHO).

>

> "It is extremely unfortunate that the Governor ignored the unique and

> exciting opportunity AB 1663 represented for California," said Fred

> Dillon, also Co-Chair of the California HIV Surveillance Coalition and

> the State Policy Director for the San Francisco AIDS Foundation.

> "After

> years of contentious debate on the issue of HIV reporting, this was

> the

> first time that public health officials, health care providers, and

> HIV

> advocates in California were able to agree on a reporting system that

> would best meet the specific needs of our state. Despite this

> broad-based consensus, the Governor chose to block progress on this

> critical issue."

>

> Public health officials also criticized Governor Wilson for vetoing AB

> 1663. "This legislation would have provided much-needed information

> about the full scope of the epidemic without deterring individuals at

> highest risk for HIV infection from the health care setting," said Dr.

> Mitchell Katz, the Director of Health for the City and County of San

> Francisco. "In addition, it would have allowed health departments to

> continue to notify the partners of those who are infected, when

> appropriate, as we currently do. It is unfortunate that the Governor

> chose to reject such a reasonable public health measure."

>

> California would have joined several states-including Maryland,

> Massachusetts, Illinois, Hawaii, Washington, and Connecticut-in moving

> toward or exploring a non-names based approach to HIV reporting.

> "Given the other states that have recently moved in this direction as

> well as the broad support for AB 1663 throughout the state, the

> Governor

> had every reason to sign this bill into law and enact, for the first

> time, an HIV reporting system in California," said Hansen. "This

> struggle is far from over and the California HIV Surveillance

> Coalition

> fully intends to build on this year's accomplishments when the

> Legislature reconvenes in 1999. We certainly hope that California's

> next Governor will recognize the importance of implementing a

> non-names

> based HIV reporting system that best serves the needs of people living

> with HIV, local health officials, and the public health."

> ###

>

>

> In other related news, the Governor has signed the following bills

> into

> law:

>

> * SB 844 (Burton, D-San Francisco)--Red Ribbon License Plate: By

> authorizing an HIV/AIDS special interest license plate, this new law

> will generate fees to be used to establish an AIDS License Plate Fund.

> This funding will be used to support HIV/AIDS research efforts in

> California.

>

> * SB 705 (Raine, R-Walnut Creek)--Criminalization of Intentional

> Exposure to HIV: This law creates a new felony crime for those who

> intentionally try to infect others with HIV. The criminal offense

> would

> apply only to those cases in which it can be proven that the

> individual

> specifically intended to infect his/her partner with HIV. Although the

> AIDS Foundation believes that such atrocious acts of intentional

> transmission should be punished, we also believe that criminal laws

> (such as assault with a deadly weapon and attempted homicide) already

> exist to prosecute such rare incidents and that an HIV-specific law

> such

> as SB 705 is unnecessary. The bill will likely be signed into law in

> the near future.

>

> * AB 1208 (Migden, D-San Francisco)--Safe Needle Bill: This law

> requires the State Occupational Safety and Health Standards Board to

> adopt regulations to require health care employers to use safety

> needles

> (i.e., self-sheathing needles that help prevent occupational exposures

> to bloodborne pathogens, including HIV) or methods that do not require

> needles; this law is meant to reduce needlestick injuries in health

> care

> settings.

>

> That's all the news for now. Feel free to give me a call if you have

> any questions (415/487-3081).

>

>

>

> Fred Dillon

> State Policy Director

> ph: (415) 487-3081; fax: (415) 487-3089

> email: fdillon@sfaf.org

RECORD TYPE: PRESIDENTIAL (TRP NOTES MAIL)

CREATOR: hivaidslst (hivaidslst@njdc.com [UNKNOWN])

CREATION DATE/TIME: 2-OCT-1998 13:51:25.00

SUBJECT: Kaiser Daily HIV/AIDS Report

TO: Todd A. Summers (CN=Todd A. Summers/OU=OPD/O=EOP [OPD])

READ:UNKNOWN

TEXT:

KAISER DAILY HIV/AIDS REPORT

A news service of The Henry J. Kaiser Family Foundation

<http://report.kff.org/aidshiv/>

Friday, October 2, 1998

POLITICS & POLICY

=====

#1 NEW JERSEY: Needle Exchange Program Folds After Arrest Of

Leader

PUBLIC HEALTH & EDUCATION

=====

#2 CONDOMS: Mother-Adolescent Communication Impacts Use

SCIENCE & MEDICINE

=====

#3 AIDS DRUGS: Study Offers New, Faster Measure of

Effectiveness in Kids

GLOBAL CHALLENGES

=====

#4 CHINA: Law Banning Paid Blood Donors Takes Effect

#5 BOTSWANA: To Give Money And Medicine To People With
HIV/AIDS

#6 NEW ZEALAND: Increasing Number Of HIV Cases Causes Alarm

MEDIA & SOCIETY

=====

#7 FUNDRAISERS: Oscar-Night Dress Auction Slated For Spring

CALENDAR

Help keep our calendar up to date! Please let us know if your group is releasing a report or hosting a meeting, press conference or any other event on HIV/AIDS. From this page (web-based version), click on "contact" at top left, or call 703-518-8725.

POLITICS & POLICY

#1 NEW JERSEY: NEEDLE EXCHANGE PROGRAM FOLDS AFTER ARREST OF
LEADER

With the re-arrest of its director for violating state drug paraphernalia laws, New Jersey's "only AIDS organization openly distributing clean needles to drug users" has decided to "fight

in the courts instead of continuing to hand out syringes." The Bergen Record reports that Diana McCague, founder of the four-year-old Chai Project -- which distributed 48,000 needles to 450 drug users last year -- "handed a packet of syringes to an undercover officer Tuesday night." McCague said, "More people in Middlesex County will be infected with AIDS as a result of this arrest. The government is completely uncompassionate and is happy to just let people get sick and die. More women and babies will be at risk because of this." The Record reports that in New Jersey, "the sharing of unclean needles is the single leading cause of HIV ... [and] especially contribute[s] to the spread of HIV among women and children." Although Gov. Christine Todd Whitman (R) opposes needle exchanges, Middlesex County Assistant Prosecutor Ron Kercado said "his office received no directive ... to make [the] arrest." He said, "It was a matter strictly done by Middlesex County prosecutors. We have made it a point publicly in the past that if needles are being distributed it is a violation of the law, and we will take action." He also said, "We have said all along that this is not a matter for the prosecutor, but for the Legislature, to determine. The courts have said you cannot distribute needles, no matter how good your intentions." McCague said her group will still distribute information about drug treatment, condoms and bleach for cleaning syringes (Campbell, Bergen Record, 10/1). [Click here to read past coverage of needle exchange in New Jersey](#), including a story about the recent approval of two needle exchange bills by the Senate Health Committee.

PUBLIC HEALTH & EDUCATION

#2 CONDOMS: MOTHER-ADOLESCENT COMMUNICATION IMPACTS USE

Discussions between mothers and adolescents "about condoms prior to sexual debut are important in promoting condom use among adolescents," according to a study published in this month's American Journal of Public Health. In a survey of 372 sexually active adolescents -- both males and females -- Centers for Disease Control and Prevention researchers found that discussions prior to first intercourse "were strongly associated with greater condom use," not only during "first intercourse and most recent intercourse," but over lifetime condom use as well. Survey respondents were asked to report "whether and when they discussed condoms with their mother and answered questions about their own condom use." Approximately 71% of study participants reported having discussions with their mother (AJPH, 10/98 issue). The AP/Arizona Daily Star notes that 122 teens "had discussed safe sex with their moms before having sex, while 250 either never talked about condom use with their mothers or did so after they had lost their virginity (10/02). Males discussed condoms at a younger mean age than females, 12.9 years vs. 13.5 years. In addition, condom use at first intercourse was associated "with a 20-fold increase in lifetime regular condom use and a 10-fold increase in condom use at most recent intercourse." Researchers conclude that the findings indicate "it is of utmost importance that adolescents receive information about condoms before

initiating sexual intercourse." They point out that abstinence programs "may not prepare adolescents and young adults to use condoms for their first sexual experience, and this, in turn, may increase the likelihood that they will later engage in unprotected (and thus risky) sexual behavior" (Miller, et al., AJP, 10/98 issue). Kim Miller, the study's main author said, "Parents are in a unique position to talk to their children because they know their children the best. They can shape attitude and behaviors, and socialize adolescents to become sexually healthy adults by providing information and imparting skills to make responsible decisions" (Reuters/Nando Times, 10/01).

SCIENCE & MEDICINE

#3 AIDS DRUGS: STUDY OFFERS NEW, FASTER MEASURE OF EFFECTIVENESS IN KIDS

Using a new mathematical model, scientists can predict in nine cases out of ten whether a child will respond to a given anti-HIV regimen within one week of starting the drug. This finding, published in the October issue of the journal AIDS, represents a dramatic reduction in the time required to determine whether a therapy is working, and decreases the possibility that children will be exposed to drug toxicity or develop drug resistance due to suboptimal therapy. Previously, patients started a drug therapy and had to wait three months before doctors could measure blood levels of HIV and CD4 T-cells to

evaluate the therapy's success. To develop the new measurement, scientists from the National Cancer Institute followed 41 HIV-positive children through phase I of a clinical trial of the antiviral drug ritonavir. In addition to measuring levels of CD4 T-cells and HIV, the researchers incorporated two additional indicators: the rate of viral clearance from the blood and the level of ritonavir remaining in the blood. They found that within one week of starting the drug, children who would ultimately respond well to the treatment already demonstrated higher levels of CD4 T-cells, lower viral load counts, higher rates of viral clearance and higher levels of ritonavir in the blood. By incorporating these additional factors into their mathematical prediction model, the researchers achieved a 90% degree of accuracy in predicting "long term treatment efficacy from short-term measurements," said senior author Dr. Dimiter Dimitrov. Fellow author Dr. Brigitta Mueller hypothesized that the "analysis should be applicable for combinations of drugs" as well. Researchers found that "when 39 children from the study later began a triple-drug combination of ritonavir, zidovudine and didanosine," the model correctly predicted "the treatment outcome of 80% of the children." Dr. Steven Zeichner said, "These findings suggested that it might be possible to use these data from the first week of treatment to predict a child's chances of being a long-term responder to the drug." Dimitrov called the findings "extremely encouraging," but said they "need to be tested further in more patients and other settings" (NIH release, 9/22).

GLOBAL CHALLENGES

#4 CHINA: LAW BANNING PAID BLOOD DONORS TAKES EFFECT

A ban on the selling and buying of blood in China took effect yesterday in an effort to control "the rapid spread of AIDS." People who sell their blood "tend to be at high risk of such diseases" as AIDS and hepatitis and "sometimes" sell their blood to "middlemen who falsely declare that their products have been screened." The practice "has been virtually banned in most countries." China held onto its policy and "is unusually reliant on paid sources" because its people maintain "a strong cultural aversion to donating blood." The New York Times reports that "many people fear, according to traditional belief, that giving up blood will harm their health. Some simply suspect the hygiene at donation centers and overall, there is no ethic of giving blood to strangers." Official statistics report that "40% of all blood used in China has been sold," a percentage some experts say is "understated." According to the "official press," the percentage of sold blood in some provinces is 90% (Eckholm, New York Times, 10/1). The San Jose Mercury News reports that "[o]nly 16% of China's blood supply comes from volunteers." In the United States, all blood donated for clinical purposes comes from volunteers, and all donors "must be tested for HIV" (Lin, 10/1).

WHEN WILL THINGS CHANGE?

"Given the high dependence on blood sellers, the new law

cannot be fully enforced for some time, senior blood bank officials admit." In the meantime, hospitals will have to limit their number of transfusions -- "as they have in the West in recent years, without ill effect." In addition, the following efforts will be put forth: surgery patients will be asked to donate blood in advance, "[d]onation quotas for work places may need to be increased, quotas may be imposed on private companies and migrant workers," a campaign to recruit one million medical workers has begun, college students will be required to donate once during their four-year enrollment and soldiers will be required to donate every five years. The Times reports, however, that "all this does not add up to the national need." Official data show that of those who have tested positive for HIV, 17% "were infected by transfusions" (New York Times, 10/1).

#5 BOTSWANA: TO GIVE MONEY AND MEDICINE TO PEOPLE WITH HIV/AIDS

Botswana President Festus Mogae announced Wednesday that the government will provide monthly allowances to AIDS patients, as well as AZT and breast milk substitutes to HIV-positive pregnant women. AIDS patients will receive "90 pula (\$20)" each month, and the Ministry of Health will use 16.5 million pula to "buy drugs and breast milk substitutes." Mogae said, "I believe [it] will significantly reduce the transmission of HIV from mother to child." Eighteen percent of Botswana's 1.5 million people are projected to be HIV-positive by 2000, with projected costs from the virus predicted to "climb seven-fold by 2004 and account for

almost five percent of its total wage bill" (Reuters/CNN, 9/30).

[Click here](#) for previous coverage of Botswana.

#6 NEW ZEALAND: INCREASING NUMBER OF HIV CASES CAUSES ALARM

The number of HIV infections in New Zealand is on the rise, the Press of New Zealand reported. "Twenty-five new cases" of HIV "were notified in the last four months," and "[i]n the previous quarter there were 29 new cases of HIV -- by far the highest number notified in the last two years." New Zealand went for two years with no more than 17 cases reported, according to the Press. Dan Knowles, manager of the AIDS Foundation's Christchurch office, said, "Before these two quarters we went for" two years "with nothing higher than 17." Safe sex practices were Knowles' "main concern." He said that "people are not strictly adhering to principles of safe sex, and they should be because the numbers getting infected are not really going down." He argued that making condoms more accessible represents the greatest obstacle to improved AIDS prevention in New Zealand. "If we were serious about reducing the impact of HIV and AIDS, then we'd [be] looking at making condoms much more accessible," he said (The Press of New Zealand, 9/28).

MEDIA & SOCIETY

#7 FUNDRAISERS: OSCAR-NIGHT DRESS AUCTION SLATED FOR SPRING

"Hollywood's leading ladies are donating their Oscar night outfits" for a American Foundation for AIDS Research benefit

auction to be held at Christie's next spring, the New York Daily News reported. "Eighteen original ensembles worn by stars" -- including Angelica Houston, Sharon Stone, Jodie Foster, Glenn Close, Goldie Hawn, Cher, Elizabeth Taylor, Uma Thurman, Diane Keaton, Madonna, Lauren Bacall and Julia Roberts, "will be sold by Christie's to the highest bid to raise money to finance AIDS research," according to the Daily News. Event chair Natasha Richardson said the event "will be modeled on the successful sale of Princess Diana's dresses" in 1997 that yielded \$5.7 million for charity (Moritz, 9/30). Richardson said, "My hope is to raise a great deal of money for AIDS research, which couldn't be more important to me" (Graves, New York Post, 9/30). The Daily News notes that Richardson's father, acclaimed British actor Tony Richardson, died of AIDS in 1991 (9/30).

=====

The Kaiser Daily HIV/AIDS Report is published for The Henry J. Kaiser Family Foundation by National Journal Group Inc.

Copyright 1998 by National Journal Group Inc., 1501 M St., N.W., Washington, DC 20005. All rights reserved.

Phone: 703-518-8725, Fax: 703-518-8703

E-mail: report@kff.org

EDITOR-IN-CHIEF: Patricia Miller

ASSOCIATE EDITORS: Amy Paulson, Rosalee Sanchez

CONTRIBUTING EDITOR: Russ Walker

CONTRIBUTING WRITERS: Kathleen Donohue, Jeff Dufour, Rachel
Kennedy, Allison Morgan, Adam Pasick

=====

If at anytime you wish to discontinue e-mail delivery of the
Kaiser Daily HIV/AIDS Report, simply reply to this message with
"unsubscribe" (without quotes) in the subject line.

-30-

:

RECORD TYPE: PRESIDENTIAL (TRP NOTES MAIL)

CREATOR: hivaidslst (hivaidslst@njdc.com [UNKNOWN])

CREATION DATE/TIME: 5-OCT-1998 13:45:59.00

SUBJECT: Kaiser Daily HIV/AIDS Report

TO: Todd A. Summers (CN=Todd A. Summers/OU=OPD/O=EOP [OPD])

READ:UNKNOWN

TEXT:

KAISER DAILY HIV/AIDS REPORT

A news service of The Henry J. Kaiser Family Foundation

<http://report.kff.org/aidshiv/>

Monday, October 5, 1998

POLITICS & POLICY

=====

#1 AIDS HOUSING: Congress Maintains Additional HOPWA Funds

PUBLIC HEALTH & EDUCATION

=====

#2 TEEN SEX: USA Today Examines Risky Behaviors

#3 ALLEGHENY HOSPITAL SYSTEM: Sale Sparks Concern Over Care
For Poor, AIDS Patients

ACROSS THE NATION

=====

#4 AIDS AWARENESS: Connecticut Man Ends 'Walk For Life'

#5 GONORRHEA: Increased Rates Signal Rise In Unsafe Sex

#6 OHIO: Kroger's Ban Of HIV-Positive Boy Called

Discriminatory

MEDIA & SOCIETY

=====

#7 FUNDRAISER: To Benefit New York Pediatric AIDS Center

SPECIAL NOTICE

Please send us your press releases and other news items to be covered in future issues of the Kaiser Daily HIV/AIDS Report.

Fax: 703/518-8703, E-mail: report@kff.org,

Phone: 703-518-8725

POLITICS & POLICY

#1 AIDS HOUSING: CONGRESS MAINTAINS ADDITIONAL HOPWA FUNDS

House and Senate conferees Thursday night preserved an \$11 million increase in AIDS housing programs in the final version of the FY 1999 Veterans Administration-Housing and Urban Development appropriations bill. The House version of the bill included a provision to divert a \$21 million increase in funds allotted to the Housing Opportunities for People with AIDS (HOPWA) program to veterans housing programs. AIDS Action reports that it anticipates approval of the conference report, granting HOPWA \$215 million in FY 1999 to ensure that states and local communities meet the housing needs of people living with AIDS

(AIDS Action release, 10/2).

PUBLIC HEALTH & EDUCATION

#2 TEEN SEX: USA TODAY EXAMINES RISKY BEHAVIORS

Today's USA Today takes a look at teenage risk-taking, including unprotected sex and other behaviors that can lead to HIV infection. According to new data from the Centers for Disease Control and Prevention's Youth Risk Behavior Surveillance Survey, "[v]irtually all deaths due to injuries and HIV are preventable ... [y]et HIV in America is increasingly an epidemic of the young," with 50% of the new 40,000 HIV infections each year affecting those under 25. Of the 37,000 fatalities among young people each year, approximately 10,000 are due to murder, suicide or the complications of AIDS. And, according to the CDC, "teens account for more than 1 million unintended pregnancies and 3 million cases of sexually transmitted diseases each year." The traditional explanation for teen behavior has been "that adolescence is a time of risk-taking and pleasure-seeking, of symbolic declarations of independence by youthful rebels who reject their parents' guidance." However, "a consensus has emerged among public health officials, educators and others that adolescents owe much of the turmoil they experience to profound cultural changes," such as less-structured home environments and "a media culture that extols sex and excitement" (see Daily Report, 9/24).

SHIFTING TIDE

Despite the alarming statistics, there are some signs that "many adolescents recognize that what once might have seemed to be an acceptable risk might now have fatal consequences." The CDC study found that "sexual activity has declined among high school students for the first time in two decades ... fewer high school students report having sex with a series of partners and ... more are using condoms." At a CDC-sponsored seminar on HIV prevention and health, a group of students and experts on adolescent behavior discussed three key factors involved in improving the overall health of adolescents:

- o "Parents must act as positive role models" and become comfortable talking about "sexuality, including teen pregnancy, HIV prevention and contraception";
- o Education efforts in schools are key but are "complicated by the politics of public education";
- o Many parents "prefer morally rigorous abstinence-only education," but that approach "fails to give [teens] the tools needed ... to guard against risks," according to Thomas Coates of the University of California-San Francisco, because "[m]any teens become sexually active before they reach health education classes in the eighth grade" (Sternberg, USA Today, 10/5).

#3 ALLEGHENY HOSPITAL SYSTEM: SALE SPARKS CONCERN OVER CARE FOR POOR, AIDS PATIENTS

Advocates for AIDS patients are alarmed over what impact the sale of eight Allegheny Health System hospitals in the

Philadelphia area to Tenet Healthcare Corp. may have on the level of "uncompensated" care in the Philadelphia area. News That Matters to People Living With HIV/AIDS reports that the Allegheny network "includes some of the hospitals providing the most AIDS hospital and clinic care in the region," including Hahnemann Medical Center and the Medical College of Pennsylvania. News That Matters reports that "[a]s one of the few big cities in the U.S. without a public hospital, under-insured and uninsured people with HIV/AIDS in Philadelphia have to rely on the city's district health centers ... and special programs." One of these special programs is the Partnership Comprehensive Care Practice, which is partially funded by Allegheny as part of its commitment to provide uncompensated care. For-profit Tenet will decide "over the next few months how much of the 'uncompensated' care provided at" its various hospitals "will survive the transition to a for-profit system." Frank Mayer, an attorney for Philadelphia, said Tenet will provide uncompensated care "at least the same level as Allegheny provided over its last year." But because of the financial disorder that Allegheny experienced in the last year, it may be difficult to determine exactly how much uncompensated care the system provided. Tenet also indicated it may close one or more of the eight hospitals after a six-month review period. Tenet spokesperson Harry Anderson said, "The market incentive is to be the best at what you do, to get the most customers. Our mission is and always has been to provide the best patient care" (News That Matters, 10/2).

ACROSS THE NATION

#4 AIDS AWARENESS: CONNECTICUT MAN ENDS 'WALK FOR LIFE'

Jaden Starbuck, the "33-year-old Connecticut man who spent four months walking across the country to raise awareness about children with AIDS, finished his journey" last Thursday when he arrived at the Santa Monica Pier in California. Starbuck began his journey June 1 in Stamford, CT, "walk[ing] mostly along state highways on a central route across" the country, and carrying necessary items "in a backpack emblazoned with the slogan 'Walk for Life.'" Starbuck said he raised only "about \$1,500 in donations to children's AIDS charities, but that he has helped educate dozens of people to the plight of children with AIDS." Upon reaching his destination, he said, "A lot of people now think the war (against AIDS) is over, but I think children now are the casualties." He said he was motivated to take the walk after watching an episode of "The Oprah Winfrey Show" on activism (Los Angeles Times, 10/2). [Click here](#) for previous coverage of Starbuck's AIDS walk.

#5 GONORRHEA: INCREASED RATES SIGNAL RISE IN UNSAFE SEX

In what health officials say is "a troubling signal of unsafe sex that may augur" an increase in future AIDS cases, the rate of gonorrhea among gay men is increasing in San Francisco. According to a San Francisco venereal disease report released last week, the "number of cases of rectal gonorrhea among men in San Francisco more than doubled since 1994, returning to rates

last seen 10 years ago." Health officials are concerned about the increase in gonorrhea infections -- from 28 cases in the first half of 1994 to 80 cases in the first half of 1998 -- because the STD is considered to be "a reliable way to predict trends in the transmission of HIV." Dr. Jeffrey Klausner, director of the city's venereal disease programs, said, "This is a sensitive indicator of high-risk sexual behavior. Particularly among younger men, people are becoming less concerned, less safe." Klausner "suggested that new AIDS drugs that have dramatically lowered the death rate may be causing gay men to become complacent." Rene Durazzo, program director for the San Francisco AIDS Foundation, agreed, saying, "Our research shows that men have put HIV risk on the back burner."

PESSIMISTIC TRENDS

The San Francisco Chronicle reports that the city "may be undergoing a reversal of a long-standing decline in sexually transmitted diseases." In addition to the increase in gonorrhea, the study also showed that chlamydia is on the rise among teenagers, increasing 24% in the last year. However, the Chronicle notes that some of the increase could be attributed to better testing methods. The report also found a "sharp jump" in the incidence of syphilis, from 44 cases in 1996 to 73 in 1997. However, the rate declined this year, leading "researchers [to] believe that the increase is more of a random event than an indication that the old scourge is returning" (Russell, San Francisco Chronicle, 10/2).

#6 OHIO: KROGER'S BAN OF HIV-POSITIVE BOY CALLED DISCRIMINATORY

The guardian of an HIV-positive, seven-year-old boy who was banned last year from a play area at a Kroger Co. store, the country's "largest supermarket chain," is accusing the chain of discrimination and "has support from the Ohio Civil Rights Commission and a group of AIDS doctors." Barb Cordle said that after Georgio Lee Chacon used the play area for the first time, "a store manager phoned her and told her the boy could no longer use the playhouse because of his HIV status." The AP/Akron Beacon Journal reports that Cordle filed a complaint with the Ohio Civil Rights Commission, and on July 24 the commission "determined Kroger probably engaged in unlawful discrimination. The commission's investigation found that Kroger did not provide any evidence that Georgio's condition posed a direct threat to the health or safety of others." Kroger filed a request for reconsideration, but the commission denied the request, "putting the case in the hands of the state attorney general." If the case is not settled by the attorney general, it could be brought before a state hearing examiner, "who may order the company to comply and may award monetary damages." Kroger has "denied any discrimination," and spokesperson Lynn Marmer said that a sign in the playhouse "clearly states that children with contagious diseases may not use the facility." The store also reports that it has "turned away children with colds, flu, pinkeye and chickenpox." Cordle said she "was angry that Kroger would compare HIV and AIDS ... with illnesses like colds that are

spread by casual contact." Also arguing on behalf of the boy is the International Association of Physicians In AIDS Care. Dr. Mark Kline, a specialist in pediatric infectious diseases, wrote a letter on Chacon's behalf to the Civil Rights Commission stating that he "can see no reason why Georgio should not be integrated fully into a routine day care or school setting like any other child. To do otherwise is to ignore scientific and medical evidence of lack of HIV transmission in these settings." International Association's Deputy Director Jose Zuniga said, "We fear that other corporations may look to this example and say, perhaps, that a child who is playing in our playground poses a direct threat, or a child who is enrolled in our day-care center presents a danger to other children. This could very well snowball" (Jacobs, AP/Akron Beacon Journal, 10/2).

MEDIA & SOCIETY

#7 FUNDRAISER: TO BENEFIT NEW YORK PEDIATRIC AIDS CENTER

The Incarnation Children's Center, New York City's only 24-hour residence for children with HIV/AIDS, will hold its second annual "Harvest of Hope" fundraiser Oct. 22. The gala will honor Sarah, The Duchess of York, for her commitment to children worldwide through her organization "Chances for Children." The event will also recognize Geraldo Rivera and Rosie O'Donnell for their financial support of ICC. According to event chair Nancy Altman, "Last year's event was successful due to the outpouring of support ... from celebrities, corporations

and others, especially Geraldo and Rosie, who spontaneously pledged to purchase an additional facility, next door to our center." She continued, "This year, we are striving to raise funds to renovate the new building, which will include a larger outpatient clinic." ICC is an 18-bed facility that has provided medical care, food and clothing for nearly 1,000 children since opening its doors in 1988. Information and tickets (\$300) to the Oct. 22 fundraiser at The Copacabana can be obtained by calling 212-928-2590 x 31, or through the ICC website: <http://www.icc-pedsaids.org> (ICC release, 10/2).

=====

The Kaiser Daily HIV/AIDS Report is published for The Henry J. Kaiser Family Foundation by National Journal Group Inc.

Copyright 1998 by National Journal Group Inc., 1501 M St., N.W., Washington, DC 20005. All rights reserved.

Phone: 703-518-8725, Fax: 703-518-8703

E-mail: report@kff.org

EDITOR-IN-CHIEF: Patricia Miller

ASSOCIATE EDITORS: Amy Paulson, Rosalee Sanchez

CONTRIBUTING EDITOR: Russ Walker

CONTRIBUTING WRITERS: Kathleen Donohue, Jeff Dufour, Rachel Kennedy, Allison Morgan, Adam Pasick

=====

If at anytime you wish to discontinue e-mail delivery of the
Kaiser Daily HIV/AIDS Report, simply reply to this message with
"unsubscribe" (without quotes) in the subject line.

-30-

:

-

RECORD TYPE: PRESIDENTIAL (TRP NOTES MAIL)

CREATOR: Chris Collins (Chris Collins <chris.collins@mail.house.gov> [UNKNOWN])

CREATION DATE/TIME: 5-OCT-1998 13:34:52.00

SUBJECT: RE: monday

TO: Todd A. Summers (CN=Todd A. Summers/OU=OPD/O=EOP [OPD])

READ:UNKNOWN

TEXT:

ok -- I'd like to reschedule when we all can do it.

happy monday

Chris

>-----

>From:

Todd_A._Summers@opd.eop.gov[SMTP:Todd_A._Summers@opd.eop.gov]

>Sent: Monday, October 05, 1998 8:40 AM

>To: Chris Collins

>Subject: Re: monday

>

>Two folks:

>

>Barbara Menard (Ryan White)

>Melanie Nakagiri (CDC)

>

>

>

Withdrawal/Redaction Marker

Clinton Library

DOCUMENT NO. AND TYPE	SUBJECT/TITLE	DATE	RESTRICTION
001. email	From MElskowitz@aol.com to Multiple Recipients Re: Fwd: Re: Don't Delete, Send it Back (6 pages)	10/06/1998	Personal Misfile

COLLECTION:

Clinton Presidential Records
Tape Restoration Project [Email]
OPD ([Todd A Summers])
OA/Box Number: 250000

FOLDER TITLE:

[10/01/1998 - 10/13/1998]

2018-0758-F

jn569

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]

RECORD TYPE: PRESIDENTIAL (TRP NOTES MAIL)

CREATOR: Kofi McCleary (Kofi McCleary <kmccleary@sheridangroupdc.com> [UNKNOWN])

CREATION DATE/TIME: 6-OCT-1998 16:03:36.00

SUBJECT: Re:

TO: Todd A. Summers (CN=Todd A. Summers/OU=OPD/O=EOP [OPD])

READ:UNKNOWN

TEXT:

Hi Todd,

we haven't met, but I wanted thank you for the observation on the website. After we got your message, I checked and saw that the CAEAR page was an old draft done by our web designer before we edited the pages. I have contacted her and the right page should be up in the morning.

Thanks again for the heads-up.

Kofi McCleary

BTW, I am not sure if you know but Tom is out of the country until next Friday.

-----Original Message-----

From: Todd_A._Summers@opd.eop.gov

<Todd_A._Summers@opd.eop.gov>

To: Tsheridan@sheridangroupdc.com

<Tsheridan@sheridangroupdc.com>

Date: Tuesday, October 06, 1998 8:47 AM

>OK, love the new web site, but I think this piece of the
"case study" on

>the CAEAR coalition is a little off -

>

>"The Sheridan Group has also helped to build the list of
Eligible

>Metropolitan Areas (EMAs) from 18 to 51."

>

>I thought it was the epidemic that did that? Otherwise,
loved it. Nice

>job!!

>

>And welcome to the information superhighway. Watch out for
Thurman - she's

>a trucker on a mission.

>

>Todd

>

RECORD TYPE: PRESIDENTIAL (TRP NOTES MAIL)

CREATOR: MDSHRIVER (MDSHRIVER@aol.com [UNKNOWN])

CREATION DATE/TIME: 7-OCT-1998 14:50:06.00

SUBJECT: the language

TO: Todd A. Summers (CN=Todd A. Summers/OU=OPD/O=EOP [OPD])

READ:UNKNOWN

TEXT:

Todd:

Here are the two pieces of language for CDC. The first is in response to OMB's concern that, given the fluid way that CDC does business (given that they are under General Authority with no authorizing Language to direct ANYTHING in HIV prevention) we had no guarantee of specific resources getting into the one division of CDC where we had fantastic accountability. The first language is a series of triggers:

First, it defines a set ratio between Programs and Administration and the Office of the Director (consistent with the House mark);

Second, it defines a specific ratio of program dollars that MUST go to the Division of HIV/AIDS Prevention -- IRS, the division where ALL the nation's primary HIV prevention interventions are funded through and the ONLY site in

CDC that can track every single penny to the penny to the intervention;

Thirdly, it sets a specific definition of what DHAP -- IRS must do with this

70% (coop agreements etc) which are the funding mechanisms it utilizes to

make

program real in the community, at the state, local and CBP level;

Fourth, it allows for DHAP IRS the funds to administer itself within the

70%

directed into it; and

lastly, it ends the O/D tap thru stating that no money can go outside DHAP

-

IRS unless and until a reprogramming request is approved. If reprogramming

requests are good enough for the NIH to have to do, then so to for CDC.

If this language is accepted, then we will see a windfall of 50m new dollars

into DHAP -- IRS. That registers as the single targets increase for HIV

prevention EVER. Full stop.

All (and i do mean ALL) of the major national ASOs have signed off on this

language, including BOTH NASTAD and AAC -- and since it is from NAPWA, you

know where we stand.

the second language is to set the d=stage for a Congressionally-directed

"zero-based budgeting exercise" for CDC to FINALLY implement. It is self-

explanatory.

Any help you can provide to make these two pieces of language REAL is

tremendous. i contend that if we can get the 70% language, it will do

more to

fix HIV prevention and CDC accointabilkity thanwe ever dreamed possible in

a

single appropriation cycle.

if you have any questions, please gimme a call!

Shriver

+++++++

	Programs	Administration	O/D
FY 1999	85%		
	14%	1%	

Report Language to accompany this chart:

Consistent with the Congress' intent to invest strongly into HIV prevention programs and interventions to stem the tide of new HIV infections, no less than 70% of the allocation to Programs must be directed into the Division of HIV/AIDS Prevention - Intervention, Research and Support for grants and cooperative agreements for HIV prevention programs. Further, the only administrative costs allowed under this 70% are those incurred within DHAP -- IRS in the execution of its programs and interventions. No money from this 70% can be redirected outside DHAP - IRS unless and until a reprogramming request has been heard and approved by the appropriations committee.

Budget Process Language:

The Committee believes that CDC should have in place a clear and articulate process by which it annually reviews its entire agency-wide HIV prevention portfolio to determine the most effective use of its federal resources to curtail new HIV infections in the United States. The Committee directs that the resources within the National Center for HIV, STD and TB Prevention (NCHSTP) as well as those in all other Divisions, Institutes and Centers (outside NCHSTP), including those within the Office of the Director of CDC, be subjected to a rigorous priority-setting process which evaluates the entire, agency-wide HIV prevention budget so as to guarantee that every federal dollar is being targeted and maximized for its impact and merit in reducing the number of new HIV infections annually. Further, as an integral component of this planning and priority-setting process, the Committee directs that CDC institutionalize an appropriate method of calculating and displaying accurate and consistent administrative and programmatic costs across all HIV prevention activities throughout the entire agency. This schema will better track and justify administrative and programmatic costs versus FTE functions (such as programmatic mission in disease surveillance, outbreak investigation, vaccine stockpile, technical assistance, diagnostic developments, and services/intervention activities). The Committee directs this process to

be
coordinated through both the Office of the Director of CDC as well as the
Office of the Director of NCHSTP. External HIV prevention experts and
partners to the CDC are to be incorporated into this process. The
Committee
directs the CDC to report back to the Congress the findings from this
review
and priority-setting process no later than May 31, 1999.

RECORD TYPE: PRESIDENTIAL (TRP NOTES MAIL)

CREATOR: hivaidslst (hivaidslst@njdc.com [UNKNOWN])

CREATION DATE/TIME: 7-OCT-1998 13:57:25.00

SUBJECT: Kaiser Daily HIV/AIDS Report

TO: Todd A. Summers (CN=Todd A. Summers/OU=OPD/O=EOP [OPD])

READ:UNKNOWN

TEXT:

KAISER DAILY HIV/AIDS REPORT

A news service of The Henry J. Kaiser Family Foundation

<http://report.kff.org/aidshiv/>

Wednesday, October 7, 1998

ACROSS THE NATION

=====

#1 CONNECTICUT: Women's AIDS Rate Nearly Double U.S. Average

PUBLIC HEALTH & EDUCATION

=====

#2 SEX EDUCATION: Charleston School System Rejects Abstinence-

Only Program

SCIENCE & MEDICINE

=====

#3 STDS: Researchers Find Even Brief Interactive Counseling

Effective

#4 ANTI-HIV SPERMICIDE: Clinical Trials On Nonoxynol 9

Replacement To Begin Soon

POLITICS & POLICY

#5 "THE BIG PICTURE": Sen. Wellstone Says AIDS Activism Must

Include Social Change

MEDIA & SOCIETY

#6 TALKING TO KIDS: Middleschoolers Need Parent-Child

Discussions On Sex

Please Note!

The "Girls In Charge" program mentioned in yesterday's Daily Report (story no. 3) is a program of the Boston Aids Action Committee.

ACROSS THE NATION

#1 CONNECTICUT: WOMEN'S AIDS RATE NEARLY DOUBLE U.S. AVERAGE

The rate of AIDS among women in Connecticut is almost twice the national average, according to a recent report from the state Department of Public Health. AIDS cases in Connecticut women average 23.9 per 100,000, versus the national average of 12.2 per 100,000, the AP/Hartford Courant reported. According to Aaron Roome, program coordinator for the state Department of Health's

AIDS Surveillance Unit, the explanation lies in the pattern of the disease in Connecticut. Roome said the state's "high-risk AIDS population has more intravenous drug users than homosexual men," so HIV is more easily spread to women in the state than in the nation as a whole. Women who are especially at high risk for the disease are "using intravenous drugs and ... having sex with drug-using partners," he said (AP/Hartford Courant, 10/6)

PUBLIC HEALTH & EDUCATION

#2 SEX EDUCATION: CHARLESTON SCHOOL SYSTEM REJECTS ABSTINENCE-ONLY PROGRAM

The Charleston County, SC, school board voted Monday not to accept an "abstinence-only program funded with state money," the Charleston Post & Courier reports. The Academic Policies and Instruction Committee's 3-1 vote rejected Heritage Community Services Inc.'s sex education program, which is funded by a \$1.3 billion grant awarded by Gov. David Beasley (R). The committee decided to maintain the current program, which stresses abstinence, but "also teaches how to prevent pregnancy and transmission of diseases." The Heritage program "teaches that condoms do not work," said school board Chair Robert New, who called it "right-wing nonsense." He said, "Let's not live in a fantasy land. Let's not play Russian roulette with the lives of our students." Heritage head Anne Badgley said after the vote, "It's easy to assign labels to ideas you're afraid of or that you don't understand." She added that the "mixed message" of

abstinence plus sex education leads to teen pregnancies and STDs.

Phylliss Thornwaite, the school district's health consultant, agreed with New that Badgley's opinion about condoms "ignores data from the Centers for Disease Control and Prevention."

Badgley responded that the CDC's information was "blatantly incorrect" and that her information comes from the Medical Institute of Sexual Health (Graves, Charlotte Post & Courier, 10/6).

SCIENCE & MEDICINE

#3 STDS: RESEARCHERS FIND EVEN BRIEF INTERACTIVE COUNSELING EFFECTIVE

"[B]rief, interactive HIV/STD prevention counseling prevents new STDs and, by inference, HIV infections," according to a study in this week's Journal of the American Medical Association. A research team led by Dr. Mary Kamb of the Centers for Disease Control and Prevention's Division of HIV/AIDS Prevention compared the efficacy of client-centered, interactive counseling with the didactic prevention messages typically used in STD clinics. Five public clinics across the country participated in Project RESPECT, in an effort to develop more effective counseling strategies for a heterosexual population with an "HIV prevalence ... 50% to 100% higher than in the general population." The study, conducted between 1993 and 1996, enrolled 5,758 HIV-negative participants "who came to one of the clinics for a full diagnostic STD examination." The participants were enrolled in

one of four different counseling programs: a four-session "enhanced counseling" model that examined participants' attitudes and perceptions of condom use; a two-session "brief counseling" model designed to help participants assess STD/HIV risk and develop a risk-reduction plan; a "didactic messages" model with a five minute message about STD/HIV prevention with follow-up; or another "didactic messages" model with a different five minute STD/HIV presentation and no follow-up.

TALKING IT OUT

Participants in the enhanced and brief counseling sessions were significantly more likely to report "no unprotected vaginal sex" -- 46% and 44%, respectively -- than participants in the didactic sessions (38%). Furthermore, 10.4% of participants receiving the didactic messages had new STDs during the six-month follow-up, compared with 7.2% of those with enhanced counseling and 7.3% of those with brief counseling. The researchers noted that "at all five study sites fewer participants in the counseling intervention arms had new STDs compared with those in the didactic messages arm." In addition, they noted that the "interactive, client-centered HIV/STD counseling resulted in an overall reduction in STD incidence of about 30% after six months and 20% after 12 months of follow-up." Despite evidence that the benefits of counseling decrease over time, the authors assert that even a 20% STD reduction "will diminish disease prevalence in the community" and is a worthy investment for counseling programs.

GOOD NEWS

Although the authors were hesitant to assert that counseling strategies effective for STD reduction would equally impact HIV reduction, they said that "[t]o the extent that sexual transmission of the condom-preventable STDs we studied here and HIV are similar, client-centered counseling is likely to have the same disease prevention benefits." The fact that the study found similar results for either two or four interactive sessions was "surprising," but "good news for public health programs" eager to employ cost-efficient and effective programs. The authors note, however, that "client-centered HIV prevention counseling is seldom done in STD clinics probably because program managers also have not believed that a two-session intervention could have a significant impact" (Kamb et al., Journal of the American Medical Association, 10/7 issue). [Click here to read past coverage of counseling efforts at risk reduction.](#)

#4 ANTI-HIV SPERMICIDE: CLINICAL TRIALS ON NONOXYNOL 9 REPLACEMENT TO BEGIN SOON

Clinical trials will begin next year on a female-controlled, anti-HIV spermicide, hailed as a major research breakthrough, and developed by Dr. Osmond D'Cruz and colleagues from the Hughes Institute. Researchers hope to employ it as the active ingredient in several products to replace the topical microbicide nonoxynol-9, or N-9. The new microbicide is 400 times more powerful than N-9 as an anti-HIV agent and 10 times more powerful as a spermicide. Recent clinical studies on N-9 indicate that it is ineffective in preventing transmission of HIV and other

sexually transmitted diseases because it disrupts cell membranes and damages vaginal tissue. D'Cruz will present his paper, originally published in Biology of Reproduction, at this week's American Society for Reproductive Medicine 16th World Congress on Fertility and Sterility in San Francisco (Hughes release, 10/6).

POLITICS & POLICY

#5 "THE BIG PICTURE": SEN. WELLSTONE SAYS AIDS ACTIVISM MUST INCLUDE SOCIAL CHANGE

U.S. Senator Paul Wellstone (D-MN) said Saturday at the Minnesota AIDS Project's annual State of AIDS Conference that the battle against HIV can be "more effective" if those who are committed to the fight take a "'big picture' perspective" and work for social change. He noted the observation of long-time HIV treatment advocate Martin Delany from Project Inform that "getting HIV refunded (year-after-year) for the next 30 to 40 congresses or the next ten administrations" is unrealistic and that it is "time for us to end our reliance on short term solutions" and "get focused on the true solutions." Wellstone outlined the following as some of the 'true solutions': "universal, comprehensive and affordable health care"; stabilized housing; livable wages; protections against discrimination due to people's race, gender, sexual orientation or disability; and responsibility for the global AIDS epidemic. With regard to more accessible health care, Wellstone said, "Think of how much easier

it would be if we did not have to depend upon special HIV insurance or drug reimbursement programs to provide access to health care." He said that 'comprehensive' health care should include parity for mental health and substance abuse treatment, and noted that "36% of the adult AIDS cases are attributable to inject[ion] drug use, and HIV is spreading fastest among women who use drugs or are sexual partners of drug users." With regard to the global epidemic, Wellstone advocated "culturally-appropriate prevention efforts," such as intensified research on "prophylactic prevention tools, particularly those that women can control," and "aggressive" vaccine research. Wellstone also touted comprehensive sex education.

THE HERE AND NOW

Wellstone stated that "at some point in the coming weeks, Congress and the President are going to have to get re-focused on the people's business and pass some appropriation bills." He outlined the following as "tough challenges before us": federal funding for HIV prevention, which "has remained flat for years"; funding for HOPWA -- the Housing Opportunities for People with AIDS program; and federal funds for needle exchange. With regard to needle exchange, Wellstone stated that "in the eleventh hour of the budget process, it looks like there are those who will try to take the bad idea of prohibiting the use of federal funds for needle exchange one step further. They want to tell states and local governments that they can't do needle exchange, either" (Wellstone statement, 10/3).

#6 TALKING TO KIDS: MIDDLESCHOOLERS NEED PARENT-CHILD DISCUSSIONS ON SEX

USA Today yesterday reported on some experts' advice that parents need to discuss sexuality with their preteens. According to child psychologist Anthony Wolf, conversations about sexuality "should be the No. 1 concern for parents of middle schoolers." He said that "[p]arents need to make sure that their 'children do not find themselves in a situation where they'll have to deal with a sexual situation before they've been able to talk about it.'" Margaret Sagarese, co-author of *The Roller Coaster Years*, said, "We tell girls, 'No,' and we tell boys nothing." She advised parents to "[t]ell them 'You can say yes to sexual feelings; you just can't say yes to sexual activity until you're much older.'" USA Today reported that although most middle schoolers aren't having sex, many children in that age group "think just the opposite." Richard Gallagher, director of the Parenting Institute at New York University's Child Study Center, said parents should set them straight. In addition, parents should teach their preteens "how to state feelings, opinions, desires and reactions clearly." In *A Parent's Handbook: How To Talk To Your Children About Developing Healthy Relationships*, Gallagher wrote that "the adolescent who can plainly tell a friend, 'I'd rather not go to the mall now,' is headed in the right direction to avoiding pressure to have sex in coming years" (Thomas, USA Today, 10/6). In a separate article,

USA Today reported that the middleschool age is "a period of trial and error during which many first experiment with alcohol, drugs and sex, and risk addiction, pregnancy and sexually transmitted diseases" (Henry, 10/6).

A HOT LINE RESPONSE

One Cincinnati parent calling into the hot line, J. Clark, said, "I have a 14-year-old son who is sexually active and not using condoms. I have talked to him about safe sex, but he hasn't followed my advice." Dr. Karen Rosewater of the Children's National Medical Center responded to the call. She praised the parent's courage in broaching the subject, but noted that the son's angry response necessitated an alternate tactic. Rosewater said, "Be honest and tell him, 'I sense you're angry, and I want you to have this information, but maybe it shouldn't come from me.'" She then recommended the parent find "an adolescent medicine physician or a counselor -- in a private situation where [the son] can be comfortable" (Thomas, USA Today, 10/7). [Click here](#) for previous coverage of USA Today's series on teens.

=====

Copyright 1998 by National Journal Group Inc., 1501 M St., N.W.,

Washington, DC 20005. All rights reserved.

Phone: 703-518-8725, Fax: 703-518-8703

E-mail: report@kff.org

EDITOR-IN-CHIEF: Patricia Miller

ASSOCIATE EDITORS: Amy Paulson, Rosalee Sanchez

CONTRIBUTING EDITOR: Russ Walker

CONTRIBUTING WRITERS: Kathleen Donohue, Jeff Dufour, Rachel

Kennedy, Allison Morgan, Adam Pasick

=====

If at anytime you wish to discontinue e-mail delivery of the

Kaiser Daily HIV/AIDS Report, simply reply to this message with

"unsubscribe" (without quotes) in the subject line.

RECORD TYPE: PRESIDENTIAL (TRP NOTES MAIL)

CREATOR: Nunnally, Tammy ("Nunnally, Tammy" <tjn1@cdc.gov> [UNKNOWN])

CREATION DATE/TIME: 7-OCT-1998 18:08:50.00

SUBJECT: Fact Sheet on NCHS Release

TO: Todd A. Summers (CN=Todd A. Summers/OU=OPD/O=EOP [OPD])

READ:UNKNOWN

TEXT:

Todd,

Attached is a fact sheet we pulled together in response to the NCHS
release.

I faxed it to you as well.

Tammy

<<nchsdeath983.wpd>>

- nchsdeath983.wpd===== ATTACHMENT 1 =====
ATT CREATION TIME/DATE: 0 00:00:00.00

TEXT:

Unable to convert ARMS_EXT:[ATTACH.D12]ARMSZZ000UKBM.000 to ASCII,
The following is a HEX DUMP:

===== END ATTACHMENT 1 =====

UPDATE

October 7, 1998

Decline in AIDS Deaths Indicates Continued Success of New HIV Treatments: And Suggests Continued Increase in HIV Prevalence

The CDC's National Center for Health Statistics has published new data indicating a 47% decline in HIV-related deaths between 1996 and 1997. The findings represent a continuation of a trend which began in 1996. In 1996, both AIDS deaths and AIDS cases dropped for the first time, primarily as a result of new treatments that have helped lengthen the healthy lifespan of people with HIV. The findings provide encouraging evidence that an increasing number of HIV-infected people are benefitting from treatment advances.

"It's thrilling news that treatment advances are helping so many HIV-infected people live longer, healthier lives. We must continue to work to develop even better and easier treatment options," said Helene Gayle, M.D., M.P.H., Director of CDC's National Center for HIV, STD, and TB Prevention, "But we must also realize that the best way to reduce the number of people who become sick with and die of AIDS is to prevent HIV infection in the first place."

An estimated 40,000 people become infected with HIV each year, and while data on HIV are limited, it does not appear that this toll has declined in recent years. CDC believes sustained, targeted prevention efforts are critical.

"HIV remains a serious, but preventable disease," said Gayle. "By paying attention to prevention, we can keep thousands of people from having to undergo these complicated, expensive and possibly life-long regimens."

Data on deaths represent only one portion of the current HIV/AIDS epidemic. Completing the picture requires data on risk behaviors, HIV infection, and AIDS cases. Key facts on the U.S. epidemic include:

- The epidemic continues to have a severe impact in the U.S.: Over 60,000 people were reported with AIDS in 1997, and an estimated 650,000 to 900,000 Americans are now living with HIV.
- While not all states collect data on HIV cases, an analysis of trends in 25 states with integrated HIV and AIDS reporting systems suggests that **HIV diagnoses have not declined, but have remained relatively stable.**
- As AIDS cases and deaths have dropped in recent years, **the number of people living with HIV (HIV prevalence) is increasing.** As HIV prevalence continues to increase, there will be an increased need for both prevention and treatment services.
- As of December 1997, 641,086 Americans have been reported with AIDS. At least 385,000 of them have died.

For more detailed information on trends in HIV infection and AIDS, request a copy of "Trends in the HIV and AIDS Epidemic 1998." The document is also available online at www.cdc.gov/nchstp/hiv_aids/stats.htm.

###

**Tape Restoration Project
Hex-Dump Conversion**

RECORD TYPE: PRESIDENTIAL (TRP NOTES MAIL)

CREATOR: Chris Collins (Chris Collins <chris.collins@mail.house.gov> [UNKNOWN])

CREATION DATE/TIME: 7-OCT-1998 00:13:39.00

SUBJECT: CBC letter to Pres

TO: Todd A. Summers (CN=Todd A. Summers/OU=OPD/O=EOP [OPD])

READ:UNKNOWN

TEXT:

did you see the Oct 5 CBC letter to the President? I can send it to ya

if not. How do we turn this into getting the administration to move on

medicaid?

let's discuss, pumpkin.

Chris

RECORD TYPE: PRESIDENTIAL (TRP NOTES MAIL)

CREATOR: Jane Silver (Jane Silver <jane.silver@amfar.org> [UNKNOWN])

CREATION DATE/TIME: 7-OCT-1998 23:38:00.00

SUBJECT: Appropriations update

TO: Todd A. Summers (CN=Todd A. Summers/OU=OPD/O=EOP [OPD])

READ:UNKNOWN

TEXT:

todd -- fyi

jane

Forward Header

Subject: Appropriations update

Author: mmabee@ix.netcom.com at -FABRIK/Internet

Date: 10/7/98 10:17 AM

From: mmabee@ix.netcom.com

Date: Wed, Oct 7, 1998 10:17 AM

Subject: Appropriations update

To: Al Peterson; Alan Kraut; Anne Kasper; Barbara Grennan; Bobby Mills;

Camille

Sorosiak; Catherine Hess; Charles Barone; Cheryl Beversdorf; Christine

Pellerin; Claire Coleman; Claire Coleman; Claudia Louis; Dale Dirks; David

Danielson; David Moore; Deborah Lamm; Donna Crane; Donna Grossman; Donna

Meltzer; Dr. Bob Beall; Dr. John Clarkson; Ed Webb; Gary Ewart; Jackie

Bryan ;

Jane Silver; Janet Shoemaker; Jeff Jacobs; Jerold Roschwald; Jo Merrill;

Joyce

Briscoe; Julie Michalak; Karen Hendricks; Kate Duval; Kate Duval; Laura

Feldman; Lori Valencia Greene; Marcia Mabee; Marilyn Keefe; Mary Wallace;

Michael K. Gemmell, CAE; Nancy Society for NeuroScience; Pat Kobor; Rose

Gonzalez; Sandra Harding; Sara Milo; Sarah Brookhart; Scott Sanders;

Stephanie

Reed; Suzy Leous

TO: Coalition for Health Funding Members

FROM: Marcia Mabee

Today, the White House is entering negotiations on the Omnibus bill which will include six appropriations bills, including the Labor-HHS-Ed bill. Although efforts to bring the Labor-HHS-Ed bill to the House floor are continuing, that is very unlikely to happen now.

Senator Stevens, Chairman of the full Senate Appropriations Committee, has said publicly that he expects the White House to seeking \$1.5 billion in additional funds over the House passed version of the bill, but has promised to provide offsetting cuts in spending to pay for it. The House CATS are also pushing for all new spending to be offset. Other issues they are demanding: a ban on needle exchanges, a prohibition on establishment of a gun registry, no new funding for the IMF, linking family planning funding for international groups with IMF and United Nations funding, and a prohibition on national educational

testing.

The White House has reportedly "struck deals" already on some aspects of the Labor-HHS-Ed bill. If anyone knows what those "deals" consist of please let me know so I can notify the coalition membership.

Please also see Donna Crane's memo below about offsets that include creation of a giant public health block grant that would also be cut 10% to achieve savings.

FYI, it seems that (for the moment), the threat of the consolidated-and-cut public health block grant has subsided. Although we are still uncertain about whether the entire idea of offsets for the supplemental bill has been scrapped or, alternatively, whether other offsets have been found, we have received several reports that we are in the clear.

It should be noted that the idea of a consolidated-and-cut block grant has been raised as a place for possible budget savings several places in recent months, so we might use the recess as an opportunity to discuss ways of educating Congress about the inadvisability of such a strategy.

We're also told that the Labor-HHS-Education bill is being "pre-conferenced" right now. Anyone willing to pass along word of any results would be much appreciated, and we'll do the same...

Received: from dfw-ix10.ix.netcom.com by prague.fabrik.com

with ESMTP (Fabrik F07.3-000)

id SINN.7486874@prague.fabrik.com ; Wed, 7 Oct 1998 10:30:42 -0700

Received: (from smap@localhost)

by dfw-ix10.ix.netcom.com (8.8.4/8.8.4)

id MAA06061; Wed, 7 Oct 1998 12:17:44 -0500 (CDT)

Date: Wed, 7 Oct 1998 12:17:44 -0500 (CDT)

Message-Id: <199810071717.MAA06061@dfw-ix10.ix.netcom.com>

Received: from vna-val7-52.ix.netcom.com(207.223.179.244) by

dfw-ix10.ix.netcom.com via smap (V1.3)

id rma006007; Wed Oct 7 12:17:20 1998

Subject: Appropriations update

From: <mmabee@ix.netcom.com>

To: "Karen Hendricks" <khendricks@aap.org>, "Ed Webb" <edaacp@aol.com>,

"Dr. John Clarkson" <john@iadr.com>,

"Joyce Briscoe" <briscoe@dc.aaos.org>,

"Sara Milo" <milos@aads.jhu.edu>,

"Donna Meltzer" <dmlmeltzer@aauap.org>,

"Barbara Grennan" <BGREENAN@acc.org>,

"Camille Sorosia" <csorosia@acc.org>, "Suzy Leous" <sml@acpm.org>,

"Claudia Louis" <claudial@heart.org>,

"Gary Ewart" <gewart@LUNGUSA.ORG>, "Dale Dirks" <ddirks@aol.com>,
"Rose Gonzalez" <rgonzalez@ana.org>, "Stephanie Reed"
<sreed@ana.org>,
"Lori Valencia Greene" <lvg.apa@email.apa.org>,
"Charles Barone" <cxb.apa@email.apa.org>,
"Alan Kraut" <akraut@aps.washington.dc.us>,
"Jeff Jacobs" <jjacobs@aidsaction.org>,
"Janet Shoemaker" <jshoemaker@asmusa.org>,
"David Moore" <DBMOORE@aamc.org>, "Bobby Mills"
<bobby@advocacy.com>,
"Catherine Hess" <chess@amchp.org>,
"Michael K. Gemmell, CAE" <mkg@asph.org>,
"Deborah Lamm" <dlamm@gwis2.circ.gwu.edu>,
"Dr. Bob Beall" <rjb@cff.org>, "Laura Feldman"
<lfeldman@nachri.org>,
"Christine Pellerin" <Pellerinch@aol.com>,
"Jerold Roschwald" <roschwaj@nasulgc.nche.edu>,
"Marilyn Keefe" <marilynkeefe@nfprha.org>,
"Kate Duval" <kduval@ppfa.org>, "Claire Coleman"
<ccoleman@ppfa.org>,
"Nancy Society for NeuroScience" <nancy@sfn.org>,
"Kate Duval" <kduval@ppfa.org>, "Claire Coleman"
<ccoleman@ppfa.org>,
"Donna Grossman" <dgrossman@naccho.org>,
"Marcia Mabree" <103524.3230@compuserve.com>,
"Julie Michalak" <juliem@sfn.org>,
"Jackie Bryan" <jbryan@astho.org>,

"David Danielson" <amopt@aol.com>, "Al Peterson" <amopt@aol.com>,
"Pat Kobor" <pck.apa@email.apa.org>,
"Jo Merrill" <merrillj@oga.modimes.org>,
"Cheryl Beversdorf" <cbeversd@astho.org>,
"Mary Wallace" <mary.wallace@msmail.apha.org>,
"Jane Silver" <jane.silver@amfar.org>,
"Scott Sanders" <scott.sanders@amfar.org>,
"Sarah Brookhart" <sarahb@aps.washington.dc.us>,
"Anne Kasper" <akasper@aps.washington.dc.us>,
"Sandra Harding" <sandra@aapa.org>,
"Donna Crane" <donna.crane@apha.org>

Mime-Version: 1.0

Content-Type: text/plain; charset="US-ASCII"

----- Forwarded with Changes

From: mmabee@ix.netcom.com at -FABRIK/Internet

Date: 10/7/98 10:17AM -0700

To: Scott Sanders at AMFAR_DC

To: Jane Silver at AMFAR_DC

*To: "Karen Hendricks" <khendricks@aap.org> at -FABRIK/Internet

*To: "Ed Webb" <edaacp@aol.com> at -FABRIK/Internet

*To: "Dr. John Clarkson" <john@iadr.com> at -FABRIK/Internet

*To: "Joyce Briscoe" <briscoe@dc.aaos.org> at -FABRIK/Internet

*To: "Sara Milo" <milos@aads.jhu.edu> at -FABRIK/Internet

*To: "Donna Meltzer" <dlmeltzer@aauap.org> at -FABRIK/Internet

*To: "Barbara Grennan" <BGREENAN@acc.org> at -FABRIK/Internet

*To: "Camille Sorosiak" <csorosia@acc.org> at -FABRIK/Internet

*To: "Suzy Leous" <sml@acpm.org> at -FABRIK/Internet

*To: "Claudia Louis" <claudial@heart.org> at -FABRIK/Internet

*To: "Gary Ewart" <gewart@LUNGUSA.ORG> at -FABRIK/Internet

*To: "Dale Dirks" <ddirks@aol.com> at -FABRIK/Internet

*To: "Rose Gonzalez" <rgonzalez@ana.org> at -FABRIK/Internet

*To: "Stephanie Reed" <sreed@ana.org> at -FABRIK/Internet

*To: "Lori Valencia Greene" <lvga.apa@email.apa.org> at -FABRIK/Internet

*To: "Charles Barone" <cxb.apa@email.apa.org> at -FABRIK/Internet

*To: "Alan Kraut" <akraut@aps.washington.dc.us> at -FABRIK/Internet

*To: "Jeff Jacobs" <jjacobs@aidsaction.org> at -FABRIK/Internet

*To: "Janet Shoemaker" <jshoemaker@asmusa.org> at -FABRIK/Internet

*To: "David Moore" <DBMOORE@aamc.org> at -FABRIK/Internet

*To: "Bobby Mills" <bobby@advocacy.com> at -FABRIK/Internet

*To: "Catherine Hess" <chess@amchp.org> at -FABRIK/Internet

*To: "CAE Michael K. Gemmell" <mkg@asph.org> at -FABRIK/Internet

*To: "Deborah Lamm" <dlamm@gwis2.circ.gwu.edu> at -FABRIK/Internet

*To: "Dr. Bob Beall" <rjb@cff.org> at -FABRIK/Internet

*To: "Laura Feldman" <lfeldman@nachri.org> at -FABRIK/Internet

*To: "Christine Pellerin" <Pellerinch@aol.com> at -FABRIK/Internet

*To: "Jerold Roschwald" <roschwaj@nasulgc.nche.edu> at -FABRIK/Internet

*To: "Marilyn Keefe" <marilynkeefe@nfprha.org> at -FABRIK/Internet

*To: "Kate Duval" <kduval@ppfa.org> at -FABRIK/Internet

*To: "Claire Coleman" <ccoleman@ppfa.org> at -FABRIK/Internet

*To: "Nancy Society for NeuroScience" <nancy@sfn.org> at -FABRIK/Internet

*To: "Donna Grossman" <dgrossman@naccho.org> at -FABRIK/Internet

*To: "Marcia Mabee" <103524.3230@compuserve.com> at -FABRIK/Internet

*To: "Julie Michalak" <juliem@sfn.org> at -FABRIK/Internet

*To: "Jackie Bryan" <jbryan@astho.org> at -FABRIK/Internet

*To: "David Danielson" <amopt@aol.com> at -FABRIK/Internet

*To: "Al Peterson" <amopt@aol.com> at -FABRIK/Internet

*To: "Pat Kobor" <pck.apa@email.apa.org> at -FABRIK/Internet

*To: "Jo Merrill" <merrillj@oga.modimes.org> at -FABRIK/Internet

*To: "Cheryl Beversdorf" <cbeversd@astho.org> at -FABRIK/Internet

*To: "Mary Wallace" <mary.wallace@msmail.apha.org> at -FABRIK/Internet

*To: "Sarah Brookhart" <sarahb@aps.washington.dc.us> at -FABRIK/Internet

*To: "Anne Kasper" <akasper@aps.washington.dc.us> at -FABRIK/Internet

*To: "Sandra Harding" <sandra@aapa.org> at -FABRIK/Internet

*To: "Donna Crane" <donna.crane@apha.org> at -FABRIK/Internet

Subject: Appropriations update

RECORD TYPE: PRESIDENTIAL (TRP NOTES MAIL)

CREATOR: MDShriver (MDShriver@aol.com [UNKNOWN])

CREATION DATE/TIME: 7-OCT-1998 16:10:37.00

SUBJECT: Fwd: OAR

TO: Todd A. Summers (CN=Todd A. Summers/OU=OPD/O=EOP [OPD])

READ:UNKNOWN

TEXT:

Return-path: <jane.silver@amfar.org>

Received: from rly-ya02.mx.aol.com (rly-ya02.mail.aol.com

[172.18.144.194]) by air-ya04.mx.aol.com (v50.16) with SMTP; Wed, 07 Oct

1998 12:05:26 -0400

Received: from davis7.fabrik.com (davis7.fabrik.com [207.114.156.115]) by

rly-ya02.mx.aol.com (8.8.8/8.8.5/AOL-4.0.0) with ESMTP id MAA17105 for

<mdshriver@aol.com>; Wed, 7 Oct 1998 12:05:25 -0400 (EDT)

Received: from prague.fabrik.com by davis7.fabrik.com with SMTP (Microsoft

Exchange Internet Mail Service Version 5.0.1458.49) id P3MJMDTK; Wed, 7

Oct 1998 09:06:04 -0700

Received: by prague.fabrik.com (Fabrik F07.3-000) id Megw.2913327 ; Wed, 7

Oct 1998 09:06:04 -0700

Date: Wed, 07 Oct 1998 11:52:00 -0700

From: "Jane Silver" <jane.silver@amfar.org>

Subject: OAR

To: chris.collins@mail.house.gov

Cc: mdshriver@aol.com

Message-id: <Megw.2913327@prague.fabrik.com>

MIME-version: 1.0

Content-type: text/plain; charset=ISO-8859-1

Content-disposition: inline

Content-transfer-encoding: 7BIT

X-Priority: 3

It has just been pointed out to me that last year's final bill included a number for AIDS research and the final spread by institute. We should try very hard to make that happen again (it is outrageous that in 1998 people are still afraid to mention an AIDS number)

I'll get the FY1998 info and fax it to you -- I don't think it's a problem, I just think there is so much going on, and both approps staff are new.

I'm sorry to bother you, I know how busy you are.

XXOO

RECORD TYPE: PRESIDENTIAL (TRP NOTES MAIL)

CREATOR: hivaidslst (hivaidslst@njdc.com [UNKNOWN])

CREATION DATE/TIME: 8-OCT-1998 14:08:17.00

SUBJECT: Kaiser Daily HIV/AIDS Report

TO: Todd A. Summers (CN=Todd A. Summers/OU=OPD/O=EOP [OPD])

READ:UNKNOWN

TEXT:

KAISER DAILY HIV/AIDS REPORT

A news service of The Henry J. Kaiser Family Foundation

<http://report.kff.org/aidshiv/>

Thursday, October 8, 1998

PUBLIC HEALTH & EDUCATION

=====

#1 MORTALITY RATES: 1997 Death Rate Plunges

ACROSS THE NATION

=====

#2 TRANSMISSION: 'Geographic Mixers' May Renew Epidemic

POLITICS & POLICY

=====

#3 HIV REPORTING: Pennsylvania Panel Delays Recommendation

#4 NEW JERSEY: Gov. Whitman Appoints Two Allies To Advisory

Council On AIDS

SCIENCE & MEDICINE

=====

#5 T-CELLS: Immunoflorescence Method May Measure More
Accurately

#6 CONTRACEPTIVES: Studies Examine Dual Use And HIV Prevention

CALENDAR

Help keep our calendar up to date! Please let us know if your group is releasing a report or hosting a meeting, press conference or any other event featuring a reproductive health issue. From this page (web-based version), click on "contact" at top left, or call 703-518-8725.

PUBLIC HEALTH & EDUCATION

#1 MORTALITY RATES: 1997 DEATH RATE PLUNGES

The number of deaths in America due to AIDS has dropped to the lowest level since the 1980s, and the disease no longer ranks as one of the top ten causes of deaths in the U.S., due largely to the dramatic impact of potent drug cocktail therapy and "increases in resources devoted to treatment and prevention," the Los Angeles Times reports (Cimons, 10/8). According to new data released yesterday by the Centers for Disease Control and Prevention's National Center for Health Statistics, AIDS-related deaths decreased 47% in 1997. The "unprecedented decline means that about 16,000 people are alive today who would have died in

1997 had AIDS mortality continued at the previous rate (Brown, Washington Post, 10/8). Researchers say that combination drug therapy is "preventing people who are infected with HIV from developing full-blown AIDS and ... keeping those who have the disease from succumbing to opportunistic infections that in the past easily and painfully killed them." The New York Times reports that AIDS killed 16,865 people in 1997, down "from the 31,130 people who died from the illness the year before." The CDC data is "[b]ased on an examination of birth and death records provided by the states."

HISTORIC DECLINE

The Post reports that the astounding decline is the largest "for a major cause of death ever recorded," with the "only decline in mortality even remotely comparable" being the decreased mortality that resulted with the introduction of antimicrobial sulfa drugs and penicillin in the 1930s and 1940s (Brown, 10/8). Dr. Robert Schooley, chair of the executive committee for the federal AIDS Clinical Trials Group, said, "What this says is that the benefits of the research effort that has been ongoing for the last 15 years is clearly paying off for patients. ... I would challenge anybody to come up with any single disease that has had such a dramatic change in mortality in such a short period of time" (Los Angeles Times, 10/8). Dr. Anthony Fauci, director of the National Institute of Allergy and Infectious Diseases, said, "We now have the ammunition and already made a major positive impact on HIV-infected individuals when it comes to longevity and quality of life" (Holmes, New York

Times, 10/8).

ACTIVIST REAX

The reactions from the nation's community of AIDS activists was restrained triumph and pride, tempered with the caution that the battle against the virus is by no means over. Daniel Zingale, executive director of AIDS Action, said, "Just a few years ago, those diagnosed with AIDS received a sentence to near-certain death. Today, despair has been transformed into hope" (Perlman, San Francisco Chronicle, 10/8). However, the consensus view from the study authors, public officials, AIDS researchers and activists was that the encouraging figures must not "seduce the public into complacency." Washington, DC-based Whitman-Walker Clinic head Jim Graham said, "I know the old reality of this disease, which is diagnosis, sickness, death, and it just repeats itself mercilessly. I just hope people don't get the message that we're OK here. There are lots of people on these triple therapies that are dying. ... And there are a lot of people who can't get them (Eversley, Philadelphia Inquirer, 10/8). Dr. Mathilde Krim, chair of the American Foundation for AIDS Research, said, "The inhibitors are not a cure -- it just means we are one step closer to ending this epidemic" (Moritz, New York Daily News, 10/8). Sandra Thurman, director of the Office of National AIDS Policy, echoed those sentiments, saying, "We are a long way off from having either a cure or a vaccine, so we need to invest more of our energies in prevention and education" (Painter, USA Today, 10/8).

THE BAD NEWS, PART I

Although the rapidly improving ability to treat and even prevent AIDS has resulted in substantially improved survival rates, there is evidence that HIV infection continues nearly unabated. The Wall Street Journal reports that "[o]ther government data indicate that the annual number of new HIV infections -- about 40,000 -- hasn't fallen in recent years, and that the total number of people with HIV is increasing (McGinley, Wall Street Journal, 10/8). Dr. Helene Gayle, director of the National Center for HIV, STDs and Tuberculosis Prevention, warned that preventing deaths without preventing future transmission may have unexpectedly negative consequences. She said, "We have people who, in the past, might have been very ill, in bed, not able to be sexually active who now are much more active and potentially could continue to pass on HIV. We don't yet know if people on these therapies are less infectious or not" (New York Times, 10/8). Ronald Johnson, acting head of the Gay Men's Health Crisis, said, "It's certainly good that less people are dying, but it's very serious that the HIV infection rate is not dropping ... That means the epidemic is still raging out of control. It's not over by a long shot" (Delfiner, New York Post, 10/8). Health and Human Services Secretary Donna Shalala said, "[W]e have [not] significantly reduced HIV transmission." She said that "[e]ven more important" than improving the efficacy of and access to therapies "is our continuing task of preventing new cases of HIV" (HHS release, 10/7).

THE BAD NEWS, PART 2

The Los Angeles Times reports that although the overall

number of deaths from AIDS has decreased, "disparities still exist between whites and minorities ages 25 to 44" -- AIDS remains "the No. 1 killer in the black population (10/8). The San Jose Mercury News reports that "the epidemic increasingly affects a more disenfranchised population: women, people of color and young gay men, many suffering from mental illness, substance abuse or alcoholism" (Krieger, 10/8). Peter Velasco, spokesperson for the National Minority AIDS Council, said, "Why isn't the decrease happening across the board? Because not everyone can afford these very expensive treatments. It's an economic issue" (Armstrong, Philadelphia Daily News, 10/8). Activists say that their focus will increasingly be on obtaining more federal funding to help those most in need. Zingale of AIDS Action said, "It is a tragedy that current federal policy denies low-income HIV-positive Americans access to Medicaid and AIDS-preventing drugs until they develop AIDS. Medicaid must be modernized" (AIDS Action release, 10/7). Rene Durazzo, programs director for the San Francisco AIDS Foundation, said "with new HIV infections holding steady ... we as a country must redouble our efforts in prevention. Until we see both" the death rate and infection rate declining, "we haven't turned the corner in this epidemic" (San Francisco AIDS Foundation release, 10/7). [Click here to obtain a copy of the CDC report.](#) [Click here for previous coverage of the impact of drug cocktails on the AIDS death rate.](#)

ACROSS THE NATION

#2 TRANSMISSION: 'GEOGRAPHIC MIXERS' MAY RENEW EPIDEMIC

"Geographic mixers," young gay men who engage in risky sex and move from city to city, may significantly increase that demographic group's HIV infection rate, according to a recent report on National Public Radio's "All Things Considered." The HIV infection rate among young gay men has remained at around 1% to 1.5% over the last four years and has actually fallen since 1990, an ongoing study of gay men ages 18-29 at the University of California-San Francisco found. However, more gay men are engaging in risky sex. UCSF epidemiologist Dennis Osmond said, "Back in 1993 we had 14% of men having unprotected anal intercourse." That number has nearly doubled over the last few years, NPR's Frank Browning reported. AIDS specialist Joseph Catagna, also at UCSF, said the low infection rate is encouraging, but may prove to be "an illusion." NPR reported that "the reason is that young gay men move around a lot creating a phenomena epidemiologists call 'mixing.'" In a survey of "all gay households in San Francisco," Catagna found that "roughly 60% had been in the city less than five years." He said that the survey indicates that transience -- common in expensive cities such as New York and San Francisco -- will ultimately increase the spread of HIV. "When they move away they are carrying the infection with them. ... They are adding to the infection rates in Los Angeles and Chicago. These are the kinds of questions that we need to delve into," Catagna said, adding, "This is really what's going to tell us what's going to happen in the future."

URBAN STUDIES

The Centers for Disease Control and Prevention conducted its own study of 2,500 16 to 22-year-old gay men living in San Francisco, Miami, Dallas, Baltimore and Los Angeles, NPR reported. Six percent of study participants "are already infected with HIV," according to lead researcher Linda Villeroy. "That's very high for youth," she said. "The problem is these young men are experimenting with sex, they're experimenting with their sexuality and unfortunately, they're doing so in a group where HIV rates are high and they become infected." NPR reported that that rate "could very well trigger a new epidemic among gay men in cities" that lack effective prevention campaigns. Additionally, "the mixing factor could also play a large part especially because that group includes heavy mixers." Catagna explained: "If you picture a group of circles, and some men are having sex only in their circles and some men are having sex across circles. These are people who are the 'bridge occupants,' who move to different cities, different ethnic groups, bridging different segments of community. They're key. They're crucial" (Browning, NPR "All Things Considered," 10/6). [Click here to listen to the interview.](#) Note: You must have RealAudio computer capabilities.

POLITICS & POLICY

#3 HIV REPORTING: PENNSYLVANIA PANEL DELAYS RECOMMENDATION

A policy recommendation on HIV-reporting from an expert panel convened by the Allegheny County, PA, Board of Health has

been delayed and may not be ready by the next board meeting in December, the Pittsburgh Tribune-Review reports. Dr. Sam Golden, interim director of the Pittsburgh AIDS Task Force and a member of the expert panel said, "We're in the midst of evaluating information. No decision is imminent." The panel's recommendation may soon become irrelevant, however, if Pennsylvania Department of Health officials develop a statewide HIV reporting policy. Jack McGettigan, spokesperson for the state Health Department, however, said that the state is "still in the information gathering stage." He added, "We're not at a point yet where we've taken a position or even a direction. We're looking at all options, be that names reporting or any other system of reporting, such as the use of unique identifiers." The ACLU and ACT UP have both "denounced mandatory HIV reporting by name as a threat to the safety, privacy and livelihoods" of people with HIV (Wilson, Pittsburgh Tribune-Review, 10/6). At a news conference Monday, AIDS activists said name-based reporting would "violate promises made by the governor and his administration in 1994" (NewsPlanet, 10/6). McGettigan denied charges leveled by ACT UP that the state is "leaning toward a policy of mandatory names reporting" (Tribune-Review, 10/6). [Click here](#) for previous Daily HIV/AIDS Report coverage of Pennsylvania's HIV reporting initiative.

#4 NEW JERSEY: GOV. WHITMAN APPOINTS TWO ALLIES TO ADVISORY COUNCIL ON AIDS

New Jersey Gov. Christine Todd Whitman (R) last week

"quietly appointed two new members to her Advisory Council on AIDS" who oppose government-sanctioned needle-exchange programs, the AP/Bergen Record reported. Recommended by Rev. Michael Orsi, the sole needle-exchange opponent on the panel, the new appointees are Seriah Rein, "a chiropractor from Glen Rock," and Len Deo of Parisppany, "the president of the New Jersey Family Policy Council, 'a conservative public policy think tank.'" The appointments were made without previous notice. Council Chair David Troast said, "I'm disappointed that the council ... was not notified." The AP/Record reports that neither appointee "was on a list of 10 potential members compiled by Troast and state Health Commissioner Len Fishman." Rein "agrees strongly with Whitman and Orsi that needle-exchange programs send children mixed messages," and advocates chastity among young people as "the only way to stop the spread of AIDS." Deo "said government should not endorse drugs through needle-exchange programs when police officers and parents are trying to reduce drug use among children." While the appointments -- two of the ten Whitman will make in the coming months -- disappointed AIDS advocates, Whitman spokesperson Gene Herman said, "The governor chooses candidates who she feels will be valuable additions to the council in its efforts to slow the spread of HIV" (Ruderman, AP/Bergen Record, 10/7). [Click here](#) for previous coverage of needle-exchange programs in New Jersey.

#5 T-CELLS: IMMUNOFLORESCENCE METHOD MAY MEASURE MORE ACCURATELY

Scientists may soon be able to obtain a more accurate picture of immune function by tagging immune cells with fluorescent markers that can be "seen," and therefore counted, by cell-sorting machines. Writing in this week's New England Journal of Medicine, Dr. Robert Schwartz highlights the clinical implications of this "immunofluorescence method" for counting levels of CD8 "helper" T-cells, a critical indicator of the extent of HIV infection. Earlier research demonstrated that the number of CD8 T-cells "correlates inversely with the viral load," but the corresponding method for counting those cells was "often clumsy."

HOW IT WORKS

Immunofluorescence works, in part, because it is so specific -- it counts only the CD8 cells that recognize HIV infected cells. Most cell surfaces have the equivalent of a "billboard," known as HLA, that presents an ever-changing display of a cell's contents. If a cell becomes infected by a virus, signs of the virus, known as antigens, may be displayed on the HLA "billboard." CD8 T-cells prowl through the bloodstream scanning HLA for antigens, the telltale sign of foreign invaders. When they find an infected cell, the CD8 T-cells bind to HLA and kill the infected cell. But only some CD8 cells can recognize HIV antigens. The immunofluorescence method attaches fluorescent markers to the antigen-bearing HLA and catching CD8 cells in the act of binding with HLA. For example, with a marker developed for HIV antigens, only those CD8 cells that interact with HIV

infected cells are counted. The new method may work for a number of diseases; if scientists know what the antigen looks like, they can develop fluorescent markers that bind to it. Schwartz concludes that the new method "can provide not only snapshots but also moving pictures of the protective immune response during the course of any viral infection in which the relevant viral antigens are known. This should have a considerable impact on the management of AIDS and other viral diseases" (Schwartz, New England Journal of Medicine, 10/8 issue).

#6 CONTRACEPTIVES: STUDIES EXAMINE DUAL USE AND HIV PREVENTION

A new study reports that understanding "the context of women's sexual relationships" is essential to encouraging dual use of condoms and a non-barrier method of contraception such as the Pill or Norplant. According to data published in the current issue of Family Planning Perspectives, factors such as marital status and joint decision making on birth control play a key role in determining whether women use condoms -- the only birth control method proven to reduce risk of HIV and other STD infections -- in addition to another contraceptive method. The authors interviewed 552 low-income women who were "at risk of HIV [and] attended public health or economic assistance facilities in Miami in 1994 and 1995." They found that 43% of those surveyed used a single contraceptive method other than a condom, the most common being the oral contraceptives or tubal ligation. A total of 36% of women surveyed used condoms, with 16% using condoms alone and 20% using them in conjunction with another method. The

following factors were correlated with dual contraceptive use:

- o Race -- whites were less likely than blacks and hispanics to use condoms and another method;
- o Marital Status -- married women were less likely to practice dual use;
- o Concern with HIV -- women who worried about HIV in addition to pregnancy were more likely to use a dual method;
- o Relationships -- women who had some confidence "that they could refuse sex if a condom were not available are 2.9 times as likely as those with no confidence to use condoms and another method," and those who make joint contraceptive decisions with their partners are more likely to practice dual use;
- o History -- women who have had an STD are more likely to use condoms in conjunction with another method.

The authors conclude that given the "striking ... influence of partner-related variables on whether women use dual methods," involving male partners in birth control discussions and education "ensure[s] greater protection against HIV infection" (Riehman et al., Family Planning Perspectives, September/October 1998 issue).

CONDOMS AND HORMONAL CONTRACEPTION

A related Family Planning Perspectives article investigates whether women initiating long-term hormonal contraception subsequently forgo condom use, thereby "increas[ing] their risk of contracting sexually transmitted diseases," including HIV. The researchers studied condom use among 1,073 Norplant and Depo-

Provera users and found that the number of subjects who "always used condoms in the previous three months fell" from 21% to 11% after six months. However, the statistics were sharply differentiated by a respondent's numbers of partners -- those women with one partner saw their condom use drop from 20% to 10%, but those with one or more partners saw a rise in condom use, from 25% to 31%. The authors note that for women with one partner, "reducing or stopping condom use is likely, and often correctly perceived as appropriate, particularly if the relationship is long-standing." The other key finding in the study is that intervention and education by counselors at the initiation of hormonal contraception is successful in encouraging ongoing condom use. The authors note that even "women for whom the condom is a main (or a frequent) contraceptive method, like their counterparts who have never used condoms, may require intensive counseling on the continued necessity of using condoms for STD protection after adoption of a long-term hormonal method" (Cushman et al., Family Planning Perspectives, September/October 1998 issue).

=====

Kaiser Family Foundation by National Journal Group Inc.

Copyright 1998 by National Journal Group Inc., 1501 M St., N.W.,
Washington, DC 20005. All rights reserved.

Phone: 703-518-8725, Fax: 703-518-8703

E-mail: report@kff.org

EDITOR-IN-CHIEF: Patricia Miller

ASSOCIATE EDITORS: Amy Paulson, Rosalee Sanchez

CONTRIBUTING EDITOR: Russ Walker

CONTRIBUTING WRITERS: Kathleen Donohue, Jeff Dufour, Rachel
Kennedy, Allison Morgan, Adam Pasick

=====

If at anytime you wish to discontinue e-mail delivery of the
Kaiser Daily HIV/AIDS Report, simply reply to this message with
"unsubscribe" (without quotes) in the subject line.

RECORD TYPE: PRESIDENTIAL (TRP NOTES MAIL)

CREATOR: Michael_Alba ("Michael_Alba/CAM/Lotus"@lotus.com [UNKNOWN])

CREATION DATE/TIME: 8-OCT-1998 12:42:39.00

SUBJECT: Point of Information

TO: Todd A. Summers (CN=Todd A. Summers/OU=OPD/O=EOP [OPD])

READ:UNKNOWN

TEXT:

Thursday is very close to Saturday.

Do you have any updates for me?

RECORD TYPE: PRESIDENTIAL (TRP NOTES MAIL)

CREATOR: JKamen (JKamen@aol.com [UNKNOWN])

CREATION DATE/TIME: 8-OCT-1998 21:00:56.00

SUBJECT: Re: Mandela speech

TO: Todd A. Summers (CN=Todd A. Summers/OU=OPD/O=EOP [OPD])

READ:UNKNOWN

TEXT:

Dear T-Man,

Workin it.

Withdrawal/Redaction Marker

Clinton Library

DOCUMENT NO. AND TYPE	SUBJECT/TITLE	DATE	RESTRICTION
002. email	From Michael Alba to Todd Summers Re: Point of Information (2 pages)	10/08/1998	Personal Misfile

COLLECTION:

Clinton Presidential Records
Tape Restoration Project [Email]
OPD ([Todd A Summers])
OA/Box Number: 250000

FOLDER TITLE:

[10/01/1998 - 10/13/1998]

2018-0758-F

jn569

RESTRICTION CODES

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

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

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]

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]

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.

Withdrawal/Redaction Marker

Clinton Library

DOCUMENT NO. AND TYPE	SUBJECT/TITLE	DATE	RESTRICTION
003. email	From Michael Alba to Todd Summers Re: Point of Information (1 page)	10/08/1998	Personal Misfile

COLLECTION:

Clinton Presidential Records
Tape Restoration Project [Email]
OPD ([Todd A Summers])
OA/Box Number: 250000

FOLDER TITLE:

[10/01/1998 - 10/13/1998]

2018-0758-F

jn569

RESTRICTION CODES

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

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

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]

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]

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.

**Clinton Presidential Records
Automated Records Management System
[EMAIL] and Tape Restoration Project [Email]**

This is not a presidential record. This is used as an administrative marker by the William J. Clinton Presidential Library Staff.

This marker identifies a responsive email, already made available within another collection.

Collection: 2013-0365-F

Bucket: OPD

Creation Date: 1998-10-08

Subject: Re: Labor H

Creator: Seth.Kilbourn seth.kilbourn@mail.hrcusa.org [UNKNOWN]

RECORD TYPE: PRESIDENTIAL (TRP NOTES MAIL)

CREATOR: RAPANUIJER (RAPANUIJER@aol.com [UNKNOWN])

CREATION DATE/TIME: 8-OCT-1998 00:09:32.00

SUBJECT: SUSAN MOORE ARTICLE

TO: BAustin (BAustin@samhsa.gov [UNKNOWN])
READ:UNKNOWN

TO: Todd A. Summers (CN=Todd A. Summers/OU=OPD/O=EOP [OPD])
READ:UNKNOWN

TO: jerry (jerry@wizard.com [UNKNOWN])
READ:UNKNOWN

TO: judtaral (Judtaral@aol.com [UNKNOWN])
READ:UNKNOWN

TO: katgerus (katgerus@mail.oonline.com [UNKNOWN])
READ:UNKNOWN

TO: lynnemc (LYNNEMC@aol.com [UNKNOWN])
READ:UNKNOWN

TO: montoya_dc (Montoya_dc@A1.eop.gov [UNKNOWN])
READ:UNKNOWN

TO: NavDocSF (NavDocSF@aol.com [UNKNOWN])
READ:UNKNOWN

TO: Scotthitt (ScottHitt@aol.com [UNKNOWN])
READ:UNKNOWN

TO: SNABEL (SNABEL@mem.po.com [UNKNOWN])
READ:UNKNOWN

TO: snabel (snabel@pol.net [UNKNOWN])
READ:UNKNOWN

TEXT:
Please let me know if you can open this document.

I have never e-mailed a fax, before.

-- J

- PRISON PROJ.===== ATTACHMENT 1 =====
ATT CREATION TIME/DATE: 0 00:00:00.00

TEXT:
Unable to convert ARMS_EXT:[ATTACH.D68]ARMSZZ000UKBN.000 to ASCII,

The following is a HEX DUMP:

===== END ATTACHMENT 1 =====

1 OCT-07-1998 - 17:52

INTERFAITH RESIDENCE

314 535 0909 P.01

DOORWAYS

4385 maryland avenue

st. louis, missouri

63108

an interfaith AIDS residence program

314 535 1919

fax 535-0909

535-1209

FAX TRANSMISSION

to: Jeremy Harkin

from: Larry Cooper

1 OCT-07-1998 17:53

INTERFAITH RESIDENCE

314 535 0909 P.02

ALFREDSON

PRISON LINKAGE PROJECT

Tape Restoration Project
Hex-Dump Conversion

Tape Restoration Project Hex-Dump Conversion

patients of our program, give them a choice of agencies and have them call that agency and speak with a case manager to schedule an appointment prior to their release. The

Tape Restoration Project Hex-Dump Conversion

This project was first formally presented to the Synagogue Council of America who were all
very supportive of pursuing funding in order to increase the number of sites. They are also
maximizing recommendations for the use of the religious services at the site to give
prior to review.

Tape Restoration Project Hex-Dump Conversion

Inside Home, Paj

RECORD TYPE: PRESIDENTIAL (TRP NOTES MAIL)

CREATOR: Mail Delivery Subsystem (Mail Delivery Subsystem <MAILER-DAEMON@gatekeeper.eop.gov> [UNKNOWN])

CREATION DATE/TIME: 8-OCT-1998 03:36:33.00

SUBJECT: Returned mail: Cannot send message for 4 hours

TO: Todd A. Summers (CN=Todd A. Summers/OU=OPD/O=EOP [OPD])
READ:UNKNOWN

TEXT:

----- Transcript of session follows -----

250 sheridangroup.com (smtp)... 250 Deferred

----- Unsent message follows -----

Received: from lngate3.eop.gov by gatekeeper.eop.gov;

(5.65v3.2/1.1.8.2/17Oct95-0424PM)

id AA02450; Wed, 7 Oct 1998 19:30:54 -0400

Received: by lngate3.eop.gov(Lotus SMTP MTA SMTP v4.6 (462.2 9-3-1997))

id 85256696.00812C01 ; Wed, 7 Oct 1998 19:30:54 -0400

X-Lotus-Fromdomain: EOP

From: Todd_A._Summers@opd.eop.gov

To: Gfowler@sheridangroup.com

Message-Id: <85256696.0080F4CE.00@lngate3.eop.gov>

Date: Wed, 7 Oct 1998 19:29:25 -0400

Subject: Jack Gardner

Mime-Version: 1.0

Content-Type: text/plain; charset=us-ascii

Some guy named Jack Gardner has been calling me about volunteering here -
he says he's working with you all - what's the scoop?

Todd

RECORD TYPE: PRESIDENTIAL (TRP NOTES MAIL)

CREATOR: Chris Collins (Chris Collins <chris.collins@mail.house.gov> [UNKNOWN])

CREATION DATE/TIME: 8-OCT-1998 18:08:13.00

SUBJECT: FW: Re[4]: Appropriations update

TO: Todd A. Summers (CN=Todd A. Summers/OU=OPD/O=EOP [OPD])
READ:UNKNOWN

TEXT:
did you get this stuff?

>

>From: Abreu, Julio

>Date: Thu, Oct 8, 1998 7:25 AM

>Subject: RE: Re[2]: Appropriations update

>To: 'Chris Collins'; 'Jenny Collier (E-mail)'; 'Julia Cohen (E-mail)';

>'MDSHRIVER@aol.com'; 'Miguelina Maldonado (E-mail)'; 'raragon@sfaf.org';

>'seth.kilbourn@mail.hrcusa.org'; Jacobs, Jeff; Jane Silver

>Cc: 'Carl Schmid (E-mail)'; Jacobs, Jeff

>it appears we have some more bad news. the dc approps principals

>accepted the more restrictive, punitive tiahrt language. we have to

>make sure that the house and senate leadership oppose this, but, more

>importantly, this has to be on the WHITE HOUSE radar screen. the

>administration needs to help us out on this. i spoke w/ daschle's

>folks, and they're aware of this and in a good place. ay caramba.

>

>carl -- could carol call stevens??

>

>chao jca

>

>>-----Original Message-----

>>From: seth.kilbourn@mail.hrcusa.org [SMTP:seth.kilbourn@mail.hrcusa.org]

>>Sent: Wednesday, October 07, 1998 8:29 PM

>>To: Jacobs, Jeff; Abreu, Julio; jane.silver@amfar.org;

raragon@sfa.org;

>>MDSHRIVER@aol.com; Chris Collins

>>Subject: Re[2]: Appropriations update

>>

>> I spoke to Rob in Gephardt's office. The plan of the moment is for

>> the bill to be brought up and read through the place where Greenwood

>> can offer his family planning amendment and they can go through the

>> drama. Then they would pull the bill. The good news is that if

they

>> pull it after Greenwood, they can't get to the end to offer a needle

>> amendment. The bad news is that the CARE Act comes right before

>> family planning, which means that Coburn could offer his baby

testing

>> amendment. Rob is not sure, though, how he can add money to a

program

>> that is not referenced in the bill. That's what I know.

>>

>> sk

>>

>

>-----

>Received: from 209.8.123.70 by prague.fabrik.com

> with SMTP (Fabrik F07.3-000)

> id SINN.7495671@prague.fabrik.com ; Thu, 8 Oct 1998 07:28:00 -0700

>Received: by aa-ntmail-srv.aidSACTION.org with SMTP (Microsoft Exchange

>Server

>Internet Mail Connector Version 4.0.995.52)

> id <01BDF2A5.98311100@aa-ntmail-srv.aidSACTION.org>; Thu, 8 Oct

1998

>10:22:47 -0400

>Message-ID:

><c=US%a=_%p=AIDS_Action%l=AAC-NT-SRV-981008142537Z-27@aa-ntmail-srv.aidSACTION.org>

>n.o

>

>rg>

>From: "Abreu, Julio" <JAbreu@AIDSACTION.org>

>To: "'seth.kilbourn@mail.hrcusa.org'" <seth.kilbourn@mail.hrcusa.org>,

>"Jacobs,

>

>Jeff" <JJacobs@AIDSACTION.org>, "'jane.silver@amfar.org'"

><jane.silver@amfar.org>, "'raragon@sfaf.org'" <raragon@sfaf.org>,

>"MDSHRIVER@aol.com" <MDSHRIVER@aol.com>, 'Chris Collins'

><chris.collins@mail.house.gov>

>To: "'Julia Cohen (E-mail)'" <julia_cohen@ppfa.org>, "'Jenny Collier

>(E-mail)'"

>

><jennycm@lac-dc.org>, "'Miguelina Maldonado (E-mail)'" <mmaldona@nmac.org>

>Cc: "'Carl Schmid (E-mail)'" <carschmid@aol.com>, "Jacobs, Jeff"

> <JJacobs@AIDSACTION.org>

>Subject: RE: Re[2]: Appropriations update

>Date: Thu, 8 Oct 1998 10:25:37 -0400

>X-Mailer: Microsoft Exchange Server Internet Mail Connector Version

>4.0.995.52

>

>MIME-Version: 1.0

>Content-Type: text/plain; charset="us-ascii"

>Content-Transfer-Encoding: 7bit

>

>-----

>

>

RECORD TYPE: PRESIDENTIAL (TRP NOTES MAIL)

CREATOR: Abreu, Julio ("Abreu, Julio" <JAbreu@AIDSAction.org> [UNKNOWN])

CREATION DATE/TIME: 8-OCT-1998 14:48:43.00

SUBJECT: FW: Re[2]: Appropriations update

TO: Barbara Menard ("Barbara Menard (E-mail)" <menard_b@a1.eop.gov> [UNKNOWN])

READ:UNKNOWN

TO: Deborah VonZinkernagel ("Deborah VonZinkernagel (E-mail)" <dvonzinkernagel@osophs.dhhs.gov> [UNKNOWN])

READ:UNKNOWN

TO: Melany Nakagiri ("Melany Nakagiri (E-mail)" <nakagiri_m@a1.eop.gov> [UNKNOWN])

READ:UNKNOWN

TO: Daniel C. Montoya (CN=Daniel C. Montoya/OU=OPD/O=EOP [OPD])

READ:UNKNOWN

TO: Todd A. Summers (CN=Todd A. Summers/OU=OPD/O=EOP [OPD])

READ:UNKNOWN

TEXT:

>

>it appears we have some more bad news. the dc approps principals accepted

>the more restrictive, punitive tiahrt language re: needle exchange. this

has

>to be on the WHITE HOUSE radar screen. the administration needs to help

us

>out on this during their negotiations on the omnibus bill. the language

in

>the labor, hhs piece of the omnibus bill is less restrictive b/c it only

bans

>federal dollars from being used for needle exchange. this language would

be

>preferable for dc. let me know if you need anything from me. i will

try to

>make sure that the house and senate leadership oppose this too.

>

>chao jca

>

>-----Original Message-----

>From: seth.kilbourn@mail.hrcusa.org

[SMTP:seth.kilbourn@mail.hrcusa.org]

>Sent: Wednesday, October 07, 1998 8:29 PM

>To:Jacobs, Jeff; Abreu, Julio; jane.silver@amfar.org;

raragon@sfaf.org;

>MDSHRIVER@aol.com; Chris Collins

>Subject: Re[2]: Appropriations update

>

> I spoke to Rob in Gephardt's office. The plan of the moment is for
> the bill to be brought up and read through the place where Greenwood
> can offer his family planning amendment and they can go through the
> drama. Then they would pull the bill. The good news is that if they
> pull it after Greenwood, they can't get to the end to offer a needle
> amendment. The bad news is that the CARE Act comes right before
> family planning, which means that Coburn could offer his baby testing
> amendment. Rob is not sure, though, how he can add money to a
program

> that is not referenced in the bill. That's what I know.

>

> sk

>

RECORD TYPE: PRESIDENTIAL (TRP NOTES MAIL)

CREATOR: Grayson Fowler (Grayson Fowler <gfowler@sheridangroupdc.com> [UNKNOWN])

CREATION DATE/TIME: 8-OCT-1998 19:25:53.00

SUBJECT: Re: Jack Gardner

TO: Todd A. Summers (CN=Todd A. Summers/OU=OPD/O=EOP [OPD])

READ:UNKNOWN

TEXT:

He's a very nice, bright, helpful guy whom Tom met -- I think he's

interested in AIDS advocacy and wanted to volunteer to see if it's up his

alley -- don't know much more than that. He's helping us with AIDS PAC and

doing a great job. Doesn't require too much instruction or supervision.

Sounds like exactly what you guys could use. Grayson

-----Original Message-----

From: Todd_A._Summers@opd.eop.gov <Todd_A._Summers@opd.eop.gov>

To: gfowler@sheridangroupdc.com <gfowler@sheridangroupdc.com>

Date: Thursday, October 08, 1998 3:07 PM

Subject: Jack Gardner

>Some guy named Jack Gardner has been calling me about volunteering here -

>he says he's working with you all - what's the scoop?

>Todd

>

RECORD TYPE: PRESIDENTIAL (TRP NOTES MAIL)

CREATOR: Mary Beth Donahue (Mary Beth Donahue <mdonahue@os.dhhs.gov> [UNKNOWN])

CREATION DATE/TIME: 9-OCT-1998 15:24:12.00

SUBJECT: re: World AIDS Day

TO: Todd A. Summers (CN=Todd A. Summers/OU=OPD/O=EOP [OPD])

READ:UNKNOWN

TEXT:

ok

Original Text

From: <Todd_A._Summers@opd.eop.gov>, on 10/9/98 11:10 AM:

FYI -

We had tried to get MTV to do something last year and they bagged out at the last minute - given that the theme of this year's WAD is youth, we're going to push them again to do some kind of show (not just PSAs). Michael Iskowitz is close to one of their senior producers and has been working on this. I'll let you know what he says. Any encouragement you could give your friends at MTV the better. Our thinking was some kind of a live, one-hour show where young people who do peer education and some prominent adults could provide info, answer questions, etc.

Todd

(Embedded

image moved Mary Beth Donahue <mdonahue @ os.dhhs.gov>

to file: 10/09/98 10:52:52 AM

PIC22481.PCX)

Please respond to mdonahue@os.dhhs.gov

Record Type: Record

To: Todd A. Summers/OPD/EOP

cc: DvonZinkernagel @ osophs.dhhs.gov, Elizabeth Summy <esummy @
os.dhhs.gov>

Subject: re: World AIDS Day

todd, thanks for the info. i was inquiring for a formel colleague who is vp
communications at mtv networks and is working on several aids psas to
release around the time of world aids day. world bank was pushing for their
involvement so she was inquiring what the administration thought about this

venue.

fyi. sec. shalala is out of the country on 12/1 so she won't be scheduled to do anything on world aids day. i am waiting to hear what dr. satcher's schedule will be.

thanks for the info.

Original Text

From: <Todd_A._Summers@opd.eop.gov>, on 10/8/98 1:38 PM:

Per your message -

The World Bank will be participating in an event that is co-sponsored with NCIH (National Council for International Health), now run by Nils Delair (formerly of USAID). It's a decent event - the Secretary would probably be the profile attraction - I think they've got an invitation out to Peter Piot from UNAIDS (who typically shops the highest profile venue until the last moment).

Sandy also asked that I pass along word that AmFAR has an annual luncheon at the UN in New York - they've invited the FLOTUS to attend and Sandy is probably going to support that request - having the Secretary there would probably be very good and helpful, and provide an excellent venue to talk about both the domestic and international aspects of the epidemic.

Sandy said that she's be supportive of whatever the Secretary decides to do. Let me know how I can be helpful.

RECORD TYPE: PRESIDENTIAL (TRP NOTES MAIL)

CREATOR: Weniger, Bruce ("Weniger, Bruce" <bgw2@cdc.gov> [UNKNOWN])

CREATION DATE/TIME: 9-OCT-1998 19:40:29.00

SUBJECT: FW: PHTN Public Health Practice Update

TO: Abel, Stephen N. ("Abel, Stephen N. (PACHA)" <snabel@mem.po.com> [UNKNOWN])
READ:UNKNOWN

TO: Anderson, Terje ("Anderson, Terje (PACHA)" <terje@worldnet.att.net> [UNKNOWN])
READ:UNKNOWN

TO: Aragon, Regina ("Aragon, Regina (PACHA)" <raragon@sfaf.org> [UNKNOWN])
READ:UNKNOWN

TO: Aragon, Regina ("Aragon, Regina (PACHA home)" <105050.264@compuserve.com> [UNKNOWN])
READ:UNKNOWN

TO: Billings, Judith ("Billings, Judith (PACHA)" <judtaral@aol.com> [UNKNOWN])
READ:UNKNOWN

TO: Boland, Mary ("Boland, Mary (PACHA)" <bolandmg@umdnj.edu> [UNKNOWN])
READ:UNKNOWN

TO: Bollman, Nick ("Bollman, Nick (PACHA)" <nbollman@irvine.org> [UNKNOWN])
READ:UNKNOWN

TO: Cade, Jerry ("Cade, Jerry (PACHA)" <jerryc@wizard.com> [UNKNOWN])
READ:UNKNOWN

TO: Cooper, Lynne ("Cooper, Lynne (PACHA)" <lynnemc@aol.com> [UNKNOWN])
READ:UNKNOWN

TO: Edelheit, Rabbi Joseph ("Edelheit, Rabbi Joseph (PACHA)" <jedelheit@templeisrael.com> [UNKNOWN])
READ:UNKNOWN

TO: Fogel, Robert ("Fogel, Robert (PACHA)" <BigBob411@aol.com> [UNKNOWN])
READ:UNKNOWN

TO: Fraser-Howze, Deborah ("Fraser-Howze, Deborah (PACHA nblca)" <nblca@aol.com> [UNKNOWN])
READ:UNKNOWN

TO: Fraser-Howze, Debra ("Fraser-Howze, Debra (PACHA mra1019)" <mra1019@aol.com> [UNKNOWN])
READ:UNKNOWN

TO: Gerus, Kathleen ("Gerus, Kathleen (PACHA)" <katgerus@mail.oonline.com> [UNKNOWN])
READ:UNKNOWN

TO: Greenberger, Phyllis ("Greenberger, Phyllis (PACHA)" <fatema@womens-health.org> [UNKNOWN])
READ:UNKNOWN

TO: Gutierrez, Nilsa ("Gutierrez, Nilsa (PACHA)" <nsg999@msn.com> [UNKNOWN])
READ:UNKNOWN

TO: Hattoy, Bob ("Hattoy, Bob (PACHA)" <bob_hattoy@ios.doi.gov> [UNKNOWN])
READ:UNKNOWN

TO: Henderson, B. Thomas ("Henderson, B. Thomas (PACHA)" <smcadoo@glo.state.tx.us> [UNKNOWN])
READ:UNKNOWN

TO: Hitt, R. Scott ("Hitt, R. Scott (PACHA)" <scotthitt@aol.com> [UNKNOWN])
READ:UNKNOWN

TO: Isbell, Michael ("Isbell, Michael (PACHA)" <isbell@hugheshubbard.com> [UNKNOWN])
READ:UNKNOWN

TO: Johnson, Ronald ("Johnson, Ronald (PACHA)" <ronaldj@gmhc.org> [UNKNOWN])
READ:UNKNOWN

TO: Landau, Jeremy ("Landau, Jeremy (PACHA)" <RAPANUIJER@aol.com> [UNKNOWN])
READ:UNKNOWN

TO: Levine, Alexandra ("Levine, Alexandra (PACHA)" <hornor@hsc.usc.edu> [UNKNOWN])
READ:UNKNOWN

TO: Lew, Steve ("Lew, Steve (PACHA)" <SteveLew2@aol.com> [UNKNOWN])
READ:UNKNOWN

TO: Milanes, Miguel ("Milanes, Miguel (PACHA)" <miami2000@earthlink.net> [UNKNOWN])
READ:UNKNOWN

TO: Miramontes, Helen ("Miramontes, Helen (PACHA)" <helenmm@itsa.ucsf.edu> [UNKNOWN])
READ:UNKNOWN

TO: Montoya, Daniel ("Montoya, Daniel (WhiteHouse ONAP)" <Montoya_DC@a1.eop.gov> [UNKNOWN])
READ:UNKNOWN

TO: Perez, Altragracia ("Perez, Altragracia (PACHA)Juno" <rev_alta@juno.com> [UNKNOWN])
READ:UNKNOWN

TO: Rankin, R. Michael ("Rankin, R. Michael (PACHA)" <navdocsf@aol.com> [UNKNOWN])
READ:UNKNOWN

TO: Robinson, Alexander ("Robinson, Alexander (PACHA dpf)" <Robinson@dpf.org> [UNKNOWN])
READ:UNKNOWN

TO: Robinson, Alexander ("Robinson, Alexander (PACHA home)" <harndc@aol.com> [UNKNOWN])
READ:UNKNOWN

TO: Runions, Debbie ("Runions, Debbie (PACHA)" <debaid@isdnet.net> [UNKNOWN])
READ:UNKNOWN

TO: Sasser, Sean ("Sasser, Sean (PACHA @HIFY)" <Sasser@hify.com> [UNKNOWN])
READ:UNKNOWN

TO: Sasser, Sean ("Sasser, Sean (PACHA)" <mojo1025@aol.com> [UNKNOWN])
READ:UNKNOWN

TO: Schatz, Benjamin ("Schatz, Benjamin (PACHA)" <kinseyvi@aol.com> [UNKNOWN])
READ:UNKNOWN

TO: Stafford, Rick ("Stafford, Rick (PACHA)" <rwstaff@uswest.net> [UNKNOWN])
READ:UNKNOWN

TO: Stokes, Denise ("Stokes, Denise (PACHA)" <shenovice@aol.com> [UNKNOWN])
READ:UNKNOWN

TO: Thurman, Sandra ("Thurman, Sandra (WhiteHouse)" <thurman_s@a1.eop.gov> [UNKNOWN])
READ:UNKNOWN

TO: Troupe, Charles ("Troupe, Charles (PACHA)" <ctroupe@services.state.mo.us> [UNKNOWN])
READ:UNKNOWN

TO: Weniger, Bruce G. ("Weniger, Bruce G. (PACHA)" <bgw2@cdc.gov> [UNKNOWN])
READ:UNKNOWN

TO: Matthew Murguia (CN=Matthew Murguia/OU=OPD/O=EOP [OPD])
READ:UNKNOWN

TO: Todd A. Summers (CN=Todd A. Summers/OU=OPD/O=EOP [OPD])
READ:UNKNOWN

TEXT:
FYI,

Bruce

> -----Original Message-----

> From: OPS Announcements

> Sent: 9-Oct-98 10:38

> To: All - CDC (E)

> Subject: FW: PHTN Public Health Practice Update

>

>

> *****

> Subject: Public Health Training Network (PHTN) Satellite

> Broadcast

> "Update on HIV Prevention for Persons Who Are
Living

> With HIV"

>

> This PHTN interactive broadcast presents a public health update on new
> information about programs that work in HIV prevention for persons who
are

> living with HIV, the cost effectiveness of HIV prevention in this area
and

> program recommendations regarding the range of comprehensive services
that

> should be provided. Viewers will be invited to call in questions and

> comments during the broadcast. They may also submit questions by fax

> before, during, and after the program or by e-mail following the

> broadcast.

>

> When: October 22, 1998 1:00-3:30 PM ET

>

> Presenters include:

> Ron Valdiserri, MD, MPH, Deputy Director, National Center for HIV, STD,

> and TB

> Prevention, CDC

> Joseph O'Neill, MD, MS, MPH, Director, HIV/AIDS Bureau, HRSA

> Gary West, MPA, Deputy Director, Div. of HIV/AIDS Prevention -

> Intervention, Research, and

> Support, CDC

> Robert Janssen, MD, Deputy Director, Div. of HIV/AIDS Prevention -
> Surveillance and Epidemiology
> - CDC
> Martha Rogers, MD, Assoc. Director for Science, Div. of HIV/AIDS
> Prevention - Surveillance and
> Epidemiology - CDC
> Robert Wood, MD, Director, HIV/AIDS Program, Seattle-King County
> Department of Public Health
> Robert Bongiovanni, MD, Coordinator, HIV Prevention Community Planning -
> Colorado Department
> of Health
> Omar Perez, Senior Community Development Associate, National Association
> of People With
> AIDS
>
> Where: The broadcast may be viewed as follows:
> Clifton Road, Bld 1, Room B401
> Executive Park, Bld 26, Conference Room 26A
> (ENVISION)
>
> Your location may be able to receive this event
via
> ENVISION. Please contact your local ENVISION facilitator
> or person who schedules ENVISION at your
location if
> interested.
>

- > For information about viewing locations open to
- > guests throughout the country, call (800) 458-5231 or visit the broadcast
- > web site at <http://www.cdcnpin.org/broadcast>
- >
- > Audience: HIV or STD prevention staff and volunteers working in health
- > departments, community
- > organizations, community planning groups, education, administration and
- > health care providers in
- > direct contact with persons who are living with HIV or at high risk for
- > HIV infection.
- >
- > Fact Sheet: A fact sheet that includes ideas on setting up a viewing site
- > and satellite coordinates is available at the web site listed above or by
- > calling (888) CDC-FAXX (when prompted, enter document number 130021 and a
- > return fax number).
- >
- > Questions: Call (800) 458-5231 or visit the broadcast web site at
- > <http://www.cdcnpin.org/broadcast>
- >
- > The series of HIV prevention updates by satellite broadcast are a
- > collaboration of the Public Health Training Network (PHTN), CDC's Public
- > Health Practice Program Office, and CDC's National Center for HIV, STD,
- > and TB Prevention.
- >

RECORD TYPE: PRESIDENTIAL (TRP NOTES MAIL)

CREATOR: Chris Collins (Chris Collins <chris.collins@mail.house.gov> [UNKNOWN])

CREATION DATE/TIME: 9-OCT-1998 22:15:55.00

SUBJECT: NIH AIDS #

TO: Todd A. Summers (CN=Todd A. Summers/OU=OPD/O=EOP [OPD])

READ:UNKNOWN

TEXT:

am told that as of now it "is still being worked on"

RECORD TYPE: PRESIDENTIAL (TRP NOTES MAIL)

CREATOR: hivaidslst (hivaidslst@njdc.com [UNKNOWN])

CREATION DATE/TIME: 9-OCT-1998 13:52:24.00

SUBJECT: Kaiser Daily HIV/AIDS Report

TO: Todd A. Summers (CN=Todd A. Summers/OU=OPD/O=EOP [OPD])

READ:UNKNOWN

TEXT:

KAISER DAILY HIV/AIDS REPORT

A news service of The Henry J. Kaiser Family Foundation

<http://report.kff.org/aidshiv/>

Friday, October 9, 1998

POLITICS & POLICY

=====

#1 TAINTED TRANSFUSIONS: Activists Accuse Jeffords Of Foot-

Dragging

#2 NEW JERSEY: Advisory Council On AIDS Will Still Promote

Needle Exchange

PUBLIC HEALTH & EDUCATION

=====

#3 TENNESSEE: Nashville Syphilis Rate On The Rise

#4 WEBSITE: 'Cybermall' To Offer Real Time Support And

Information

GLOBAL CHALLENGES

=====

#5 SOUTH AFRICA: To Test New AIDS Drug

MEDIA & SOCIETY

=====

#6 COLLEGE STUDENTS: Virginity In Vogue?

#7 'HEALTHY SOLUTIONS': Show Explores The Changing Face Of
AIDS

OPINIONMAKERS

=====

#8 AIDS MORTALITY: Battle Not Yet Over, Says N. Y. Times

SPECIAL NOTICE

Please send us your press releases and other news items to be
covered in future issues of the Kaiser Daily HIV/AIDS Report.

Fax: 703/518-8703, E-mail: report@kff.org,

Phone: 703-518-8725

POLITICS & POLICY

#1 TAINTED TRANSFUSIONS: ACTIVISTS ACCUSE JEFFORDS OF FOOT-
DRAGGING

The National Hemophilia Foundation accused Senate Labor and
Human Resources Committee Chair Jim Jeffords (R-VT) of stalling a
bill that would provide \$100,000 to hemophiliacs who contracted

HIV through contaminated blood products. The committee approved two bills on September 23: "the House-passed 'Ricky Ray Hemophilia Relief Fund Act,' and a separate measure that would also authorize payments to those who contracted HIV from tainted blood transfusions." After Jeffords blocked an attempt to "hotline" the House measure for unanimous consent in the Senate, Val Bias of the National Hemophilia Foundation charged that Jeffords was "purposely letting both bills die" by "standing firm trying to get [all] transfusion (patients) in, even at the expense of the House bill," sponsored by Rep. Henry Hyde (R-IL). At the bills' markup, Jeffords said that "if he could not reach an agreement" to expand the measure to include non-hemophiliac transfusion patients -- which would raise the cost of the bill from \$750 million to \$1.8 billion -- "then he was prepared to move the House version." A Jeffords aide said "Jeffords met with Hyde Wednesday night" and that for "a non-controversial bill, there's still lots of time to get this done" before Congress adjourns (Rovner, CongressDaily, 10/8). [Click here for previous coverage of the Ricky Ray Hemophilia Relief Fund Act.](#)

#2 NEW JERSEY: ADVISORY COUNCIL ON AIDS WILL STILL PROMOTE NEEDLE EXCHANGE

The battle over needle exchange in New Jersey continued Wednesday with an announcement from David Troast, the chair of the state's Advisory Council on AIDS, that the council is "not giving up" and "will continue advocating a clean needle exchange program" despite Gov. Christine Todd Whitman's (R) firm stance

against such a program and move earlier in the week to appoint allies to the council. The Newark Star-Ledger reports that Troast released a letter to Whitman stating, "While we respect your opinion on needle exchange and clean needle availability, the active public members of this council with only one exception believe that the availability of clean needles will significantly reduce the transmission of the virus among injection drug users and the secondary infection of their sex partners and children." He wrote that needle exchange "remains the single most effective prevention strategy not available to the citizens of New Jersey" (Leusner, Newark Star-Ledger, 10/8). The Asbury Park Press reports that Troast "asked how the council could possibly concentrate on stemming AIDS among teen-agers and minority women of child-bearing age -- the populations Whitman wants to target - - without also addressing the root cause of their infections: the sharing of dirty needles?" (Becker, 10/8). The one council member opposed to needle exchange, Rev. Michael Orsi, assistant chancellor of the Diocese of Camden, "accused his colleagues ... of putting the group in an 'adversarial position against the governor.'" He said, "The council at this point is overstepping its bounds and is jeopardizing its relationship with the governor." Council member John J. Mitchell Jr., chair of the department of biomedical ethics at Seton Hall School of Graduate Medical Education, "said the council's 'moral obligation' was more powerful than fear of risking the governor's wrath."

ON THE OTHER SIDE

Also yesterday, state Attorney General Peter Verniero (R)

released a position paper "opposing legislation that would decriminalize the sale and possession of hypodermic needles and allow communities to set up needle exchange programs." The paper stated that "[b]y legalizing -- literally legitimizing the possession, purchase and sale of drug paraphernalia -- these bills would, among other things, constitute an endorsement by the government of the insidious and false notion that injection drug use can be done safely" (Newark Star-Ledger, 10/8) [Click here](#) for previous coverage of needle exchange in New Jersey.

PUBLIC HEALTH & EDUCATION

#3 TENNESSEE: NASHVILLE SYPHILIS RATE ON THE RISE

Syphilis cases are on the rise in Nashville and city health officials point to a "correlation" between crack abuse and sexually transmitted diseases as the reason behind it, the Tennessean reported. Trading sex for drugs is the main reason the city "had the third highest syphilis rate among the nation's largest cities" last year, after Baltimore and Memphis. There were 203 cases of early syphilis in the city in 1997. The Tennessean reported that state health statistics indicate the city "may surpass Memphis" in 1998, continuing a rising trend over the past two years. The statistics are especially alarming because individuals with syphilis are at increased risk for HIV/AIDS. In an effort to combat the problem, the city health department plans to release a report with recommendations for lowering the rate and "detailing the syphilis problem,

neighborhood by neighborhood in Nashville." One recommendation is to "[t]est every Metro inmate for the disease," and immediately begin treatment. The Tennessean reported that currently, exams "are given to just over half of the inmates, those who are in jail for longer than 14 days." The health department is also hoping to obtain federal funding for a "full-time person to do more examinations" (Snyder, Tennessean, 10/8).

#4 WEBSITE: 'CYBERMALL' TO OFFER REAL TIME SUPPORT AND INFORMATION

Tera Technologies Corp. of Columbia, MD, has been awarded a contract to design and market a national HIV information web site, the HIV Cybermall. Part of an initiative funded by the Health Resources and Services Administration under the Ryan White CARE Act, the site is an example of Vice President Al Gore's initiative to use technology to make government "work better and cost less." The site will be the first to offer real time support, including virtual walk-throughs of HIV testing services. Deborah Gordon, CEO of Tera Technologies, said, "Many people may be unsure of what to expect during the HIV testing process. This project should take the edge off, and give web-site visitors an idea. ... If people know what to expect they may get tested and into treatment sooner. This will greatly improve their medical outcomes." The site, designed with all people and cultures in mind, is also setting up chat rooms in English, Spanish, and other languages. Experienced HIV care professionals will both host and make guest appearances in the rooms. There will be an

area of the site where health care providers can obtain current information, and share thoughts and options with other providers.

"We believe these areas will be particularly helpful to people in rural and other outlying areas with less experience in HIV disease management," Gordon said. John Fitch, director of HIV/AIDS education at the Denver Public Health Department, said, "As we approach the new millennium most people know the basics of HIV, but the need for more comprehensive, accurate, topical, and reader friendly HIV information remains. I look forward to the launch of the HIV Cybermall as it should be a wealth of information, greatly complementing current HIV/AIDS information on the Internet." You can visit the site at <http://www.HIVCYBERMALL.org> (release, 10/7).

GLOBAL CHALLENGES

#5 SOUTH AFRICA: TO TEST NEW AIDS DRUG

The Medicines Control Council has given the Medical University of South Africa official permission to test Inactivin, a compound that "interfere[s] with the metabolism of HIV," on males with AIDS, the ANC Daily News Briefing reports. According to project coordinator Professor Wimpie du Plooy, "cautious preliminary testing had already been done with" the drug, and patients used in the trials "were reportedly healthier and had gained weight." He said, "Plasma results of the preliminary trial are being analyzed in South Africa and will be confirmed overseas," and he noted that "if the sample trial proved to be

successful, the next phase would involve additional patients, but this would only start once the overseas results had been confirmed." He said, "I want to state quite clearly that we went to great lengths to avoid another Virodene episode." He also explained that Inactivin "was intended to be used as a short-term monotherapy," meaning that "it is not combined with other drugs, and is thus outside the league of other conventional AIDS drugs - - such as the expensive so-called cocktails -- which are beyond the means of most sufferers in the developing world" (ANC Daily News Briefing, 10/7).

MEDIA & SOCIETY

#6 COLLEGE STUDENTS: VIRGINITY IN VOGUE?

Motivated by fears about AIDS and increasingly aware of the potential emotional and physical pitfalls of sexual intercourse, college students "are abstaining from sex in increasing numbers," according to a new Playboy survey. The survey found that 15% of the 2,000 students interviewed from seven colleges across the country are virgins. However, the New York Daily News reports that while "AIDS and pregnancy have triggered a drought in intercourse, they haven't stifled sexual experimentation on U.S. college campuses." In fact, the Playboy article "heralds the age of the technical virgin, who is into everything from bondage to cybersex." Playboy senior editor James Petersen said, "This signifies the return of the technical virgin not seen since the 1950s." He notes that the survey found "that more students are

monogamous" -- 54% of men and 70% of women said they "have had sex with one person in the last year." The study also found that 26% of men and 29% of women have had an AIDS test (Coppa, Daily News, 10/8).

#7 'HEALTHY SOLUTIONS': SHOW EXPLORES THE CHANGING FACE OF AIDS

"The Changing Face of AIDS in America," a special report exploring the human side of AIDS will air on CNBC at noon Eastern time this Saturday. Hosted by actress Mariette Hartley, the show is part of TV Interactive's "Healthy Solutions" series and features interviews with unexpected AIDS patients, leading researchers and survivors, in an effort to promote understanding and compassion about the disease. The show will also feature frank discussions about prevention. "Many people still believe that AIDS won't affect them," Ronald Godfrey, one of TVI's executive producers, said, adding, "We embarked on this project to increase awareness ... because today's victims of AIDS don't fit the profile." Viewers may also access the TVI web site, www.tviweb.com, to watch the program as well as past shows in their entirety, and access more information about HIV/AIDS (TVI release, 10/6)

OPINIONMAKERS

#8 AIDS MORTALITY: BATTLE NOT YET OVER, SAYS N. Y. TIMES

Responding to yesterday's news that AIDS-related deaths

decreased 47% in 1997, an editorial in today's New York Times says the announcement "is cause for jubilation, but not for a declaration of victory." The Times notes that as "many as 900,000 Americans remain infected with the AIDS virus, and the rate of new infections is holding steady in the United States at some 40,000 a year." And while "powerful new cocktails of drugs" are enabling people with AIDS to live "longer and healthier lives, there is an increasing danger that they will pass the virus on to others," the Times warns. Moreover, "the virus is spreading at a frightening rate in Africa and other parts of the developing world, where large parts of the population are infected and there is neither money nor medical capacity to provide lifesaving drugs." The Times concludes, "The world will not be rid of this scourge until breakthroughs in vaccines or prevention strategies can stop the spread of infection before any curative treatment is needed" (10/9).

=====

The Kaiser Daily HIV/AIDS Report is published for The Henry J. Kaiser Family Foundation by National Journal Group Inc.

Copyright 1998 by National Journal Group Inc., 1501 M St., N.W., Washington, DC 20005. All rights reserved.

Phone: 703-518-8725, Fax: 703-518-8703

E-mail: report@kff.org

EDITOR-IN-CHIEF: Patricia Miller

ASSOCIATE EDITORS: Amy Paulson, Rosalee Sanchez

CONTRIBUTING EDITOR: Russ Walker

STAFF WRITERS: Kathleen Donohue, Jeff Dufour, Rachel Kennedy,

Allison Morgan, Adam Pasick

=====

If at anytime you wish to discontinue e-mail delivery of the

Kaiser Daily HIV/AIDS Report, simply reply to this message with

"unsubscribe" (without quotes) in the subject line.

RECORD TYPE: PRESIDENTIAL (TRP NOTES MAIL)

CREATOR: Paul Delay (Paul Delay <pdelay@usaid.gov> [UNKNOWN])

CREATION DATE/TIME: 9-OCT-1998 12:43:55.00

SUBJECT: re: Revised draft Mandela letter

TO: Todd A. Summers (CN=Todd A. Summers/OU=OPD/O=EOP [OPD])

READ:UNKNOWN

TEXT:
no problem

Paul R. De Lay, Chief, HIV-AIDS Division

Tel:202 712 0683; FAX 202 216 3046;

Internet: pdelay@usaid.gov

Original Text

From: Todd_A._Summers@opd.eop.gov, on 10/8/98 7:15 PM:

To: <pdelay@usaid.gov>

Paul -

Ken recommended removal of a number of sections referencing AIDS drugs -
per the dispute on intellectual property rights. He also recommended that
we wait to see the speech as delivered before releasing the letter (we
concur). He just called and wants to take out the part of the second
paragraph referencing AIDS drugs again. Is this ok with you?

Todd

----- Forwarded by Todd A. Summers/OPD/EOP on 10/08/98

07:14 PM -----

(Embedded Todd A. Summers

image moved 10/08/98 07:02:14 PM

to file: (Embedded image moved to file: PIC25117.PCX)

PIC19214.PCX)

Record Type: Record

To: Sean P. Maloney/WHO/EOP

cc: Sandra Thurman/OPD/EOP

Subject: Revised draft Mandela letter

Sean -

President Mandela is supposed to be delivering a major speech on AIDS tomorrow. This is to our knowledge the first speech on AIDS he has given in his own country, which is being severely impacted by the epidemic. We would like to have the President release a letter supporting President Mandela's efforts and have drafted one for your review.

For your information, I have reviewed the draft with USAID (Dr. Paul Delay,

AIDS Program Director) and NSC (Dr. Kenneth Bernard). Dr. Delay said the letter was fine. Dr. Bernard suggested changes which have been incorporated, and may have more subsequent to further NSC review.

We recommend approval, pending review of speech being given by President Mandela tomorrow at 6:00 am local time. Dr. Bernard is recommending (and we agree) that the text of the speech (as delivered) be reviewed prior to release of this letter.

At the bottom of this message is a copy of the South African government's release on this speech (which I received via email, so I cannot confirm its authenticity).

As always, thank you for your help!

Todd Summers
Deputy Director
Office of National AIDS Policy
6-2444

=====

TEXT OF LETTER:

Dear President Mandela:

The purpose of this letter is to offer the American people's support for the crusade you are initiating against HIV and AIDS. The international dimensions of this disease are devastating, particularly on our youth.

Around the world, more than 1 million children are living with HIV and AIDS. Twelve hundred children die of AIDS each day, even as 1,600 more become infected with HIV. Your call to action is important not only for the future of South Africa, but also in its inspirational effect for the rest of the world.

Over the last fifteen years, our nation has been at the forefront of the effort to stop the spread of this devastating disease and to develop effective medications to prolong the healthy life of those who have been infected by the virus. We have been successful on both the prevention and the treatment fronts. Thanks to increased funding for and attention to AIDS prevention measures, the incidence of new cases in the United States is essentially stable, though in several sub-populations it is still expanding.

We have also mounted an aggressive initiative to develop a vaccine for HIV in cooperation with other nations. This work is critically important to our goal of bringing an end to the AIDS epidemic once and for all both here and across the globe.

I have asked my National AIDS Policy Coordinator Sandra Thurman to travel to South Africa at your convenience to discuss ways in which the United States can support your country's anti-AIDS efforts. No nation can afford the toll HIV and AIDS continue to take on our societies. We must mount a global education campaign to first slow and then halt the spread of this terrible epidemic.

As you address the South African nation today, I am confident that you will generate the broad societal support that has been so essential to our

own successes. Educators and activists, members of religious and civic groups, business and labor organizations, and tens of thousands of other men and women of goodwill have all been a part of the national response to this disease and have extended a helping hand to those living with HIV and AIDS.

You have our continued commitment to work in solidarity with you and the people of South Africa to care for those that are living with HIV and AIDS, to promote prevention and education programs that can stop the spread of this disease, and to work together toward finding both a cure and a vaccine. We join you in mourning the lives of so many of our citizens who have already been lost, and in doing all that we can to protect those who remain at risk.

WILLIAM J. CLINTON

=====

TEXT OF SOUTH AFRICAN GOVERNMENT'S ANNOUNCEMENT:

From: Sdutta@worldbank.org, on 10/6/98 11:38 AM:

To: <Africa_AIDS_Affinity_Group@worldbank.org>

South Africa Government Release, 2 October 1998

MANDELA WILL ADDRESS THE NATION ON THE ISSUE OF AIDS

Issued by: Government Communications (GCIS)

On Friday, 9 October 1998, at 12pm, South Africa will come to a standstill for 10 minutes. In this time, President Nelson Mandela will address the nation on the issue of AIDS.

The 10 minute Declaration will be televised as well as broadcast live by radio. The aim of this 10 minute stoppage is to create a sense of national urgency and understanding about the HIV/AIDS crisis -with an appeal to the South African population from the highest authority (the President).

The venue of the broadcast is Ethembeni Children's Home, 63 Sherwell Road, Doorfontein, Johannesburg.

For further technical details concerning the coverage (radio, TV, and print) and accreditation (not later than 7 October) please contact:

Faizal Dawjee Ph: (27-12) 314-2133

Cell: 082 895 8714 Fax: (27-12) 326-0317

- ATTRIBS.BND===== ATTACHMENT 1 =====
ATT CREATION TIME/DATE: 0 00:00:00.00

TEXT:

Beyond Packed AttributesATT(re: Revised draft Mandela letterPaul Delay+859+9IU5

qBeyond Proprietary Data

Original text to From: Todd_A._Summers@opd.eop.gov, on 10/8/98 7:15 PM:

To: <pdelay@usaid.gov>

Paul -

Ken recommended removal of a number of sections referencing AIDS drugs - per the dispute on intellectual property rights. He also recommended that we wait to see the speech as delivered before releasing the letter (we concur). He just called and wants to take out the part of the second paragraph referencing AIDS drugs again. Is this ok with you?

Todd

----- Forwarded by Todd A. Summers/OPD/EOP on 10/08/98 07:14 PM -----

(Embedded Todd A. Summers
image moved 10/08/98 07:02:14 PM
to file: (Embedded image moved to file: PIC25117.PCX)
PIC19214.PCX)

Record Type: Record

To: Sean P. Maloney/WHO/EOP

cc: Sandra Thurman/OPD/EOP

Subject: Revised draft Mandela letter

Sean -

President Mandela is supposed to be delivering a major speech on AIDS tomorrow. This is to our knowledge the first speech on AIDS he has given in his own country, which is being severely impacted by the epidemic. We would like to have the President release a letter supporting President Mandela's efforts and have drafted one for your review.

For your information, I have reviewed the draft with USAID (Dr. Paul Delay, AIDS Program Director) and NSC (Dr. Kenneth Bernard). Dr. Delay said the letter was fine. Dr. Bernard suggested changes which have been incorporated, and may have more subsequent to further NSC review.

We recommend approval, pending review of speech being given by President Mandela tomorrow at 6:00 am local time. Dr. Bernard is recommending (and we agree) that the text of the speech (as delivered) be reviewed prior to release of this letter.

At the bottom of this message is a copy of the South African government's release on this speech (which I received via email, so I cannot confirm its

authenticity).

As always, thank you for your help!

Todd Summers
Deputy Director
Office of National AIDS Policy
6-2444

=====

TEXT OF LETTER:

Dear President Mandela:

The purpose of this letter is to offer the American people's support for the crusade you are initiating against HIV and AIDS. The international dimensions of this disease are devastating, particularly on our youth. Around the world, more than 1 million children are living with HIV and AIDS. Twelve hundred children die of AIDS each day, even as 1,600 more become infected with HIV. Your call to action is important not only for the future of South Africa, but also in its inspirational effect for the rest of the world.

Over the last fifteen years, our nation has been at the forefront of the effort to stop the spread of this devastating disease and to develop effective medications to prolong the healthy life of those who have been infected by the virus. We have been successful on both the prevention and the treatment fronts. Thanks to increased funding for and attention to AIDS prevention measures, the incidence of new cases in the United States is essentially stable, though in several sub-populations it is still expanding.

We have also mounted an aggressive initiative to develop a vaccine for HIV in cooperation with other nations. This work is critically important to our goal of bringing an end to the AIDS epidemic once and for all both here and across the globe.

I have asked my National AIDS Policy Coordinator Sandra Thurman to travel to South Africa at your convenience to discuss ways in which the United States can support your country's anti-AIDS efforts. No nation can afford the toll HIV and AIDS continue to take on our societies. We must mount a global education campaign to first slow and then halt the spread of this terrible epidemic.

As you address the South African nation today, I am confident that you will generate the broad societal support that has been so essential to our own successes. Educators and activists, members of religious and civic groups, business and labor organizations, and tens of thousands of other men and women of goodwill have all been a part of the national response to this disease and have extended a helping hand to those living with HIV and AIDS.

You have our continued commitment to work in solidarity with you and the people of South Africa to care for those that are living with HIV and AIDS, to promote prevention and education programs that can stop the spread of this disease, and to work together toward finding both a cure and a

vaccine. We join you in mourning the lives of so many of our citizens who have already been lost, and in doing all that we can to protect those who remain at risk.

WILLIAM J. CLINTON

=====

TEXT OF SOUTH AFRICAN GOVERNMENT'S ANNOUNCEMENT:

From: Sdutta@worldbank.org, on 10/6/98 11:38 AM:
To: <Africa_AIDS_Affinity_Group@worldbank.org>
South Africa Government Release, 2 October 1998

MANDELA WILL ADDRESS THE NATION ON THE ISSUE OF AIDS

Issued by: Government Communications (GCIS)
On Friday, 9 October 1998, at 12pm, South Africa will come to a standstill for 10 minutes. In this time, President Nelson Mandela will address the nation on the issue of AIDS.

The 10 minute Declaration will be televised as well as broadcast live by radio. The aim of this 10 minute stoppage is to create a sense of national urgency and understanding about the HIV/AIDS crisis -with an appeal to the South African population from the highest authority (the President).

The venue of the broadcast is Ethembeni Children's Home, 63 Sherwell Road, Doorfontein, Johannesburg.

For further technical details concerning the coverage (radio, TV, and print) and accreditation (not later than 7 October) please contact:
Faizal Dawjee Ph: (27-12) 314-2133
Cell: 082 895 8714 Fax: (27-12) 326-0317

oOP 8MS Sans SerifLCourier New88OOPPWX3y+,-uM%&'(>?@^_]<Rh_ # \$ P Q a b z {
X

0y iF

-w#nhD+uSIx`\d8ST*+,-.pdH4 |
h TdH4 |
h T"Textsno problem

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

Internet: pdelay@usaid.gov

56YZtdH4 |

h TB

Original text to Fro

m: Todd_A._Summers@opd.eop.gov, on 10/8/98 7:15 PM:

To: <pdelay@usaid.gov>

Paul -

Ken recommended removal of a number of sections referencing AIDS drugs - per the dispute on intellectual property rights. He also recommended that we wait to see the speech as delivered before releasing the letter (we concur). He just called and wants to take out the part of the second paragraph referencing AIDS drugs again. Is this ok with you?

Todd

----- Forwarded by Todd A. Summers/OPD/EOP on 10/08/98
07:14 PM -----

(Embedded Todd A. Summers
image moved 10/08/98 07:02:14 PM
to file: (Embedded image moved to file: PIC25117.PCX)
PIC19214.PCX)

Record Type: Record

To: Sean P. Maloney/WHO/EOP

cc: Sandra Thurman/OPD/EOP

Subject: Revised draft Mandela letter

Sean -

President Mandela is supposed to be delivering a major speech on AIDS tomorrow. This is to our knowledge the first speech on AIDS he has given in his own country, which is being severely impacted by the epidemic. We would like to have the President release a letter supporting President Mandela's efforts and have drafted one for your review.

For your information, I have reviewed the draft with USAID (Dr. Paul Delay, AIDS Program Director) and NSC (Dr. Kenneth Bernard). Dr. Delay said the letter was fine. Dr. Bernard suggested changes which have been incorporated, and may have more subsequent to further NSC review.

We recommend approval, pending review of speech being given by President Mandela tomorrow at 6:00 am local time. Dr. Bernard is recommending (and we agree) that the text of the speech (as delivered) be reviewed prior to release of this letter.

At the bottom of this message is a copy of the South African government's release on this speech (which I received via email, so I cannot confirm its authenticity).

As always, thank you for your help!

Todd Summers
Deputy Director
Office of National AIDS Policy
6-2444

=====

TEXT OF LETTER:

Dear President Mandela:

The purpose of this letter is to offer the American people's support for the crusade you are initiating against HIV and AIDS. The international dimensions of this disease are devastating, particularly on our youth. Around the world, more than 1 million children are living with HIV and AIDS. Twelve hundred children die of AIDS each day, even as 1,600 more become infected with HIV. Your call to action is important not only for the future of South Africa, but also in its inspirational effect for the rest of the world.

Over the last fifteen years, our nation has been at the forefront of the effort to stop the spread of this devastating disease and to develop effective medications to prolong the healthy life of those who have been infected by the virus. We have been successful on both the prevention and the treatment fronts. Thanks to increased funding for and attention to AIDS prevention measures, the incidence of new cases in the United States is essentially stable, though in several sub-populations it is still expanding.

We have also mounted an aggressive initiative to develop a vaccine for HIV in cooperation with other nations. This work is critically important to our goal of bringing an end to the AIDS epidemic once and for all both here and across the globe.

I have asked my National AIDS Policy Coordinator Sandra Thurman to travel to South Africa at your convenience to discuss ways in which the United States can support your country's anti-AIDS efforts. No nation can afford the toll HIV and AIDS continue to take on our societies. We must mount a global education campaign to first slow and then halt the spread of this terrible epidemic.

As you address the South African nation today, I am confident that you will generate the broad societal support that has been so essential to our own successes. Educators and activists, members of religious and civic groups, business and labor organizations, and tens of thousands of other men and women of goodwill have all been a part of the national response to this disease and have extended a helping hand to those living with HIV and AIDS.

You have our continued commitment to work in solidarity with you and the people of South Africa to care for those that are living with HIV and

AIDS, to promote prevention and education programs that can stop the spread of this disease, and to work together toward finding both a cure and a vaccine. We join you in mourning the lives of so many of our citizens who have already been lost, and in doing all that we can to protect those who remain at risk.

WILLIAM J. CLINTON

=====

TEXT OF SOUTH AFRICAN GOVERNMENT'S ANNOUNCEMENT:

From: Sdutta@worldbank.org, on 10/6/98 11:38 AM:
To: <Africa_AIDS_Affinity_Group@worldbank.org>
South Africa Government Release, 2 October 1998

MANDELA WILL ADDRESS THE NATION ON THE ISSUE OF AIDS
Issued by: Government Communications (GCIS)
On Friday, 9 October 1998, at 12pm, South Africa will come to a standstill for 10 minutes. In this time, President Nelson Mandela will address the nation on the issue of AIDS.

The 10 minute Declaration will be televised as well as broadcast live by radio. The aim of this 10 minute stoppage is to create a sense of national urgency and understanding about the HIV/AIDS crisis -with an appeal to the South African population from the highest authority (the President).

The venue of the broadcast is Ethembeni Children's Home, 63 Sherwell Road, Doorfontein, Johannesburg.

For further technical details concerning the coverage (radio, TV, and print) and accreditation (not later than 7 October) please contact:
Faizal Dawjee Ph: (27-12) 314-2133
Cell: 082 895 8714 Fax: (27-12) 326-0317

oOP 8MS Sans SerifLCourier New88OOPPWX3y+,-uM%&'(>?@^_]<Rh_ # \$ P Q a b z {
X

0y i F

-w#nhD+uSIx`d8ST*+,-.pdH4 |
h TdH4 |
h T"Textsno problem

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

56YZtdH4 |
h TB===== END ATTACHMENT 1 =====

RECORD TYPE: PRESIDENTIAL (TRP NOTES MAIL)

CREATOR: Mary Beth Donahue (Mary Beth Donahue <mdonahue@os.dhhs.gov> [UNKNOWN])

CREATION DATE/TIME: 9-OCT-1998 15:24:39.00

SUBJECT: re: Matthew Murguia

TO: Todd A. Summers (CN=Todd A. Summers/OU=OPD/O=EOP [OPD])

READ:UNKNOWN

TEXT:

sorry no update yet on matthew, but i'll inquire.

Original Text

From: <Todd_A._Summers@opd.eop.gov>, on 10/9/98 11:12 AM:

Any word on Matthew's situation? He told me that Dr. Simpson was working to have Matthew moved to an OS FTE so that you could put him over here without eating up one of OMH's FTEs (just to clarify what I told you earlier!).

Hope you have a good weekend!

RECORD TYPE: PRESIDENTIAL (TRP NOTES MAIL)

CREATOR: Wertheimer, Wendy ("Wertheimer, Wendy (OD)" <WERTHEIW@od31em1.od.nih.gov> [UNKNOWN])

CREATION DATE/TIME: 9-OCT-1998 20:44:28.00

SUBJECT: RE: OAR Advisory Committee meeting

TO: Todd A. Summers (CN=Todd A. Summers/OU=OPD/O=EOP [OPD])
READ:UNKNOWN

TEXT:
You are always welcome here. I'll let them know. Thanks.

From: Todd_A._Summers@opd.eop.gov

[SMTP:Todd_A._Summers@opd.eop.gov]

Sent: Friday, October 09, 1998 4:40 PM

To: Wendyw@nih.gov

Subject: OAR Advisory Committee meeting

Can you let your staff know that I will be attending (unless you
all
object) to the OAR Advisory Committee meeting in Sandy's place?
She's
out
of town most of next week.

Hope you're well. I've been pushing the AIDS research number in
the
manager's report language on Labor H.

Todd

RECORD TYPE: PRESIDENTIAL (TRP NOTES MAIL)

CREATOR: Chris Collins (Chris Collins <chris.collins@mail.house.gov> [UNKNOWN])

CREATION DATE/TIME: 9-OCT-1998 19:09:30.00

SUBJECT: RE: NIH AIDS number

TO: Todd A. Summers (CN=Todd A. Summers/OU=OPD/O=EOP [OPD])

READ:UNKNOWN

TEXT:

don't know yet...will ask later...subcommittee swamped right now..

>-----

>From:

Todd_A._Summers@opd.eop.gov[SMTP:Todd_A._Summers@opd.eop.gov]

>Sent: Friday, October 09, 1998 3:00 PM

>To: Chris Collins

>Subject: NIH AIDS number

>

>Do you know if we were able to get an AIDS number in the NIH report

>language?

>

>

>

RECORD TYPE: PRESIDENTIAL (TRP NOTES MAIL)

CREATOR: Mary Beth Donahue (Mary Beth Donahue <mdonahue@os.dhhs.gov> [UNKNOWN])

CREATION DATE/TIME: 9-OCT-1998 14:52:52.00

SUBJECT: re: World AIDS Day

TO: Todd A. Summers (CN=Todd A. Summers/OU=OPD/O=EOP [OPD])

READ:UNKNOWN

CC: DvonZinkernagel (DvonZinkernagel@osophs.dhhs.gov [UNKNOWN])

READ:UNKNOWN

CC: Elizabeth Summy (Elizabeth Summy <esummy@os.dhhs.gov> [UNKNOWN])

READ:UNKNOWN

TEXT:

todd, thanks for the info. i was inquiring for a formel colleague who is vp
communications at mtv networks and is working on several aids psas to
release around the time of world aids day. world bank was pushing for their
involvement so she was inquiring what the administration thought about this
venue.

fyi. sec. shalala is out of the country on 12/1 so she won't be scheduled
to do anything on world aids day. i am waiting to hear what dr. satcher's
schedule will be.

thanks for the info.

Original Text

From: <Todd_A._Summers@opd.eop.gov>, on 10/8/98 1:38 PM:

Per your message -

The World Bank will be participating in an event that is co-sponsored with
NCIH (National Council for International Health), now run by Nils Delair

(formerly of USAID). It's a decent event - the Secretary would probably be the profile attraction - I think they've got an invitation out to Peter Piot from UNAIDS (who typically shops the highest profile venue until the last moment).

Sandy also asked that I pass along word that AmFAR has an annual luncheon at the UN in New York - they've invited the FLOTUS to attend and Sandy is probably going to support that request - having the Secretary there would probably be very good and helpful, and provide an excellent venue to talk about both the domestic and international aspects of the epidemic.

Sandy said that she's be supportive of whatever the Secretary decides to do. Let me know how I can be helpful.

RECORD TYPE: PRESIDENTIAL (TRP NOTES MAIL)

CREATOR: Wertheimer, Wendy ("Wertheimer, Wendy (OD)" <WERTHEIW@od31em1.od.nih.gov> [UNKNOWN])

CREATION DATE/TIME: 9-OCT-1998 20:53:39.00

SUBJECT: RE: OAR Advisory Committee meeting

TO: Todd A. Summers (CN=Todd A. Summers/OU=OPD/O=EOP [OPD])
READ:UNKNOWN

TEXT:
....well, you could sit in the back with Jack and me and gossip...

From: Todd_A._Summers@opd.eop.gov

[SMTP:Todd_A._Summers@opd.eop.gov]

Sent: Friday, October 09, 1998 4:45 PM

To: Wertheimer, Wendy (OD)

Subject: RE: OAR Advisory Committee meeting

bless you - now who's going to sit next to me to explain all that
scientific stuff? David Ho? Tony Fauci? Dr. Kevorkian?

RECORD TYPE: PRESIDENTIAL (TRP NOTES MAIL)

CREATOR: meiskowitz (MEIskowitz@aol.com [UNKNOWN])

CREATION DATE/TIME: 9-OCT-1998 00:12:23.00

SUBJECT: No Subject

TO: Todd A. Summers (CN=Todd A. Summers/OU=OPD/O=EOP [OPD])

READ:UNKNOWN

TEXT:

Dear President Mandela:

The purpose of this letter is to offer my support, and the support of the American people, for your crusade against HIV and AIDS. As you know well, the international dimensions of this disease are devastating, particularly on our youth. Around the world, more than 1 million children are living with HIV and AIDS. Twelve hundred children die of AIDS each day, even as 1,600 more become infected with HIV. Your leadership is important not only for the people of South Africa, but for the hope and action it will help to galvanize around the world.

Over the last fifteen years, our nation has been at the forefront of the effort to develop treatments that enable those who are suffering to live longer and healthier lives, to design strategies that help to stop the

spread
of this deadly virus, and to remind all citizens that together we must
fight
AIDS and not people with AIDS. Thanks to increased attention and
resources we
have made great strides -- but we still have more, much more to do.

We have also mounted an aggressive initiative to develop a vaccine
for HIV in
cooperation with other nations. This work is critically important to our
goal
of bringing an end to the AIDS epidemic once and for all both here and
across
the globe.

As you address the South African nation today, I am confident that you
will generate the broad societal support that has been so essential to our
own successes. Educators and activists, members of religious and civic
groups, business and labor organizations, and tens of thousands of other
men and women of goodwill have all been a part of the national response to
this disease and have extended a helping hand to those living with HIV and
AIDS.

I have asked my National AIDS Policy Coordinator Sandra Thurman to
travel to South Africa at your convenience to discuss ways in which the
United States can support your country's anti-AIDS efforts. No nation can
afford the toll HIV and AIDS continue to take on our societies. We must

mount a global education campaign to first slow and then halt the spread of this terrible epidemic.

You have our continued commitment to work in solidarity with you and the people of South Africa to care for those that are living with HIV and AIDS, to promote prevention and education programs that can stop the spread of this disease, and to work together toward finding both a cure and a vaccine.

We join you in mourning the lives of so many of our citizens who have already been lost, and in doing all that we can to protect those who remain at risk.

WILLIAM J. CLINTON

RECORD TYPE: PRESIDENTIAL (TRP NOTES MAIL)

CREATOR: Chris Collins (Chris Collins <chris.collins@mail.house.gov> [UNKNOWN])

CREATION DATE/TIME:10-OCT-1998 14:13:37.00

SUBJECT: Medicare HMOs

TO: Todd A. Summers (CN=Todd A. Summers/OU=OPD/O=EOP [OPD])

READ:UNKNOWN

TEXT:

are you guys doing anything on this? see the post article today

(saturday)? to whom should I speak about this at HCFA?

thanks doll.

Chris

RECORD TYPE: PRESIDENTIAL (TRP NOTES MAIL)

CREATOR: FAX1 (CN=FAX1/OU=OA/O=EOP [OA])

CREATION DATE/TIME:11-OCT-1998 08:13:40.00

SUBJECT: 2 page fax sent by Lotus Fax Server

TO: Todd A. Summers (CN=Todd A. Summers/OU=OPD/O=EOP @ EOP [OPD])

READ:UNKNOWN

TEXT:

RECORD TYPE: PRESIDENTIAL (TRP NOTES MAIL)

CREATOR: meiskowitz (MEIskowitz@aol.com [UNKNOWN])

CREATION DATE/TIME:11-OCT-1998 00:01:54.00

SUBJECT: No Subject

TO: aravosis (aravosis@tmn.com [UNKNOWN])

READ:UNKNOWN

TO: Sandra Thurman (CN=Sandra Thurman/OU=OPD/O=EOP [OPD])

READ:UNKNOWN

TO: Todd A. Summers (CN=Todd A. Summers/OU=OPD/O=EOP [OPD])

READ:UNKNOWN

TO: DvonZinkernagel (DvonZinkernagel@osophs.dhhs.gov [UNKNOWN])

READ:UNKNOWN

TO: dzingale (dzingale@aidsaction.org [UNKNOWN])

READ:UNKNOWN

TO: hblank (hblank@childrensdefense.org [UNKNOWN])

READ:UNKNOWN

TO: melody_barnes (Melody_Barnes@judiciary.senate.gov [UNKNOWN])

READ:UNKNOWN

TO: seth.kilbourn (seth.kilbourn@hrc.org [UNKNOWN])

READ:UNKNOWN

TO: SMartinez (SMartinez@cdfg.childrensdefense.org [UNKNOWN])

READ:UNKNOWN

TO: Stephanie_Robinson (Stephanie_Robinson@labor.senate.gov [UNKNOWN])

READ:UNKNOWN

TO: tracey.stpierre (tracey.stpierre@hrc.org [UNKNOWN])

READ:UNKNOWN

TO: winnie_stachelberg (winnie_stachelberg@hrcusa.org [UNKNOWN])

READ:UNKNOWN

TEXT:

Hi there --

I have to go out of tomorrow for a few days (personal and business reasons).

However, I can be reached by pager at 1-800-217-1482. You can leave
either a
voice mail or numeric message at that number and I will get back to you.

Keep the faith, save the country.

Talk to you soon.

Love, Michael

RECORD TYPE: PRESIDENTIAL (TRP NOTES MAIL)

CREATOR: R. PAUL RICHARD ("R. PAUL RICHARD" <Paul.Richard@EEOC.GOV> [UNKNOWN])

CREATION DATE/TIME:13-OCT-1998 16:48:51.00

SUBJECT: Little Help? -Reply

TO: Todd A. Summers (CN=Todd A. Summers/OU=OPD/O=EOP [OPD])

READ:UNKNOWN

TEXT:

Todd: As of March 31 of this year, the EEOC filed a total of 276 cases

under the ADA; 38 or 13.7% involved HIV/AIDS. At the appellate level, the

Commission filed amicus briefs in 66 cases involving issues arising under

the ADA, the Rehab Act or state statutes with similar provisions. 4 (6%)

of those cases involved HIV/AIDS.

Let me know if you need further info.

Paul

RECORD TYPE: PRESIDENTIAL (TRP NOTES MAIL)

CREATOR: hivaidslst (hivaidslst@njdc.com [UNKNOWN])

CREATION DATE/TIME:13-OCT-1998 14:00:30.00

SUBJECT: Kaiser Daily HIV/AIDS Report

TO: Todd A. Summers (CN=Todd A. Summers/OU=OPD/O=EOP [OPD])

READ:UNKNOWN

TEXT:

KAISER DAILY HIV/AIDS REPORT

A news service of The Henry J. Kaiser Family Foundation

<http://report.kff.org/aidshiv/>

Tuesday, October 13, 1998

POLITICS & POLICY

=====

#1 MEDICARE HMOS: Area Withdrawals Jeopardize AIDS Patients'

Drugs

#2 GEORGIA: AIDS Panel Endorses Numeric Codes for HIV

Reporting

PUBLIC HEALTH & EDUCATION

=====

#3 ELDERLY: Experiencing Rising AIDS Rates

ACROSS THE NATION

=====

#4 AIDS ADVOCATE: Schatz Resigns From Gay And Lesbian Medical

Association

#5 RURAL AMERICA: New York Times Outlines 'AIDS Hardships'

GLOBAL CHALLENGES

=====

#6 RUSSIA: New HIV Cases Down Nationally, Up in Moscow

MEDIA & SOCIETY

=====

#7 PREVENTION: French Group Pulls Condom Ads Featuring Disney
Characters

OPINIONMAKERS

=====

#8 AIDS MORTALITY RATES: Editorials React To CDC Data

WE'RE MOVING!: The editorial offices of The Daily Report are

relocating. Effective Monday, October 19 you can reach us at:

600 New Hampshire Ave., NW, Washington, DC 20037; 202/672-5990

(phone), 202/672-5767 (fax). Our toll-free fax line, 800/944-

6515, will remain unchanged. Please update our contact

information for your files!

POLITICS & POLICY

#1 MEDICARE HMOS: AREA WITHDRAWALS JEOPARDIZE AIDS PATIENTS'

DRUGS

AIDS patients in the nation's capital may lose insurance coverage for "potentially life-sustaining medications" as a result of several HMOs "that recently announced plans to stop serving area Medicare beneficiaries on Jan. 1," Saturday's Washington Post reported. The Post described the plight of several DC-area AIDS patients, noting that some "are so desperate that they are considering moving to other areas where coverage still is available" or "contemplating committing insurance fraud." Although all of the Medicare HMO patients will be eligible for traditional fee-for-service plans, these plans typically do not provide as much coverage for prescription drugs. The health plans remaining in the Washington area's Medicare HMO market, including Blue Cross and Blue Shield of Maryland, Kaiser Permanente and United HealthCare, said "they will only cover the medications up to a \$1,000 annual cap on all prescription drugs combined." A Health Care Financing Administration spokesperson said, "If there's no plan that offers the prescription drugs, then those people are left out in the cold." One patient, facing a "searing dilemma," concluded, "If you make too much money to qualify for assistance programs but not enough to afford the drugs, you have two choices: fraud or death" (Hilzenrath, Washington Post, 10/10).

#2 GEORGIA: AIDS PANEL ENDORSES NUMERIC CODES FOR HIV REPORTING

The Georgia Task Force on AIDS Friday recommended the use of

numeric codes instead of names to report the cases of HIV to state authorities. The task force delivered its non-binding recommendation to the state Department of Human Resources, which will "continue to seek public comment on the issue" until it renders its final decision in the summer of 1999 and begins implementing the program in 2000. Task force member Dr. Harold Katner, who treats HIV-positive patients in Macon, said, "If we don't get those numbers out, there's no way I'm going to get funding. I don't know how else we can set up programs to deal with areas with a high growth rate." The numeric codes, known as "unique identifiers," typically consist of 12 digit codes that use "the last four digits of an individual's social security number, the six digits of that person's birth date, one digit representing race or ethnicity and one digit for gender."

Interested parties may submit comments to the Department of Human Resources via email at gaepinfo@dhr.state.ga.us (Kim Atlanta Journal-Constitution, 10/10). [Click here for Daily HIV/AIDS Report coverage of the task force's September public forum on HIV reporting.](#) [Click numeric or names for recent Daily HIV/AIDS Report coverage of this issue in other states.](#)

PUBLIC HEALTH & EDUCATION

#3 ELDERLY: EXPERIENCING RISING AIDS RATES

HIV-positive Americans over age 50 were the subject of ABC News' "20/20", Friday in a special report titled "Safe Sex and Seniors." ABC's Lynn Sherr noted that the disease "is now

spreading among older folks at a faster rate than among those younger," accounting for 11% of the country's AIDS cases. The number of seniors who have been infected through heterosexual sex "has doubled in recent years." Sherr reported that physicians often don't think to give HIV tests to seniors and overlook "many symptoms of AIDS, such as weight loss, fatigue, dementia, [that] mimic those of aging." As a result, infected seniors often progress to near-death before an accurate diagnosis reflects their AIDS status. "Compared to people under 50, twice as many seniors die within a month after their AIDS is discovered," Sherr reported. "20/20" reported that the Florida Health Department has embarked on a campaign to spread "an urgent warning about [the] disturbing new trend" among seniors. Officials visit retirement communities and attempt to dispel the myth that seniors are not impacted by AIDS, while encouraging a generation often reticent on issues of sex to ask questions of their partners and use condoms (ABC News, "20/20," 10/9).

NEW JERSEY SENIORS WITH HIV/AIDS

Figures in New Jersey indicate that the AIDS rate among men and women over 50 has jumped 10% from two years ago, accounting for 14% of the state's AIDS cases for the year ending in June. Furthermore, the Bergen Record reports that the method of contraction for new HIV cases has shifted dramatically from the early 1980s. Rather than contracting the disease through blood transfusions, "in 1996, more than one-third of those 50 and over with AIDS had contracted the illness through homosexual relations; nearly one in five acquired the virus through

intravenous drug use; [and] 14 percent through heterosexual activity." Dr. Jerome Levine, who runs an HIV clinic at Hackensack University Medical Center, said, "AIDS is not part of their culture. Older people assume it's a disease of gays and drug addicts, and they figure they're safe because they're neither" (Layton, Bergen Record, 10/12). [Click here for previous coverage of AIDS and seniors.](#)

ACROSS THE NATION

#4 AIDS ADVOCATE: SCHATZ RESIGNS FROM GAY AND LESBIAN MEDICAL ASSOCIATION

Ben Schatz, executive director and attorney for the national Gay and Lesbian Medical Association, announced he will resign effective March 1999. Schatz has been with the "San Francisco-based doctors' group" -- which has over 2,000 members -- since 1990, and he is a "nationally known advocate on AIDS health issues." He "served on the President's Advisory Council on HIV/AIDS and was co-chairman of the 1994 National Summit on HIV Prevention," the San Francisco Chronicle reported. Schatz said he is leaving the organization to "pursue his professional artistic endeavors" (San Francisco Chronicle, 10/9). [Click here for previous coverage of Ben Schatz.](#)

#5 RURAL AMERICA: NEW YORK TIMES OUTLINES 'AIDS HARDSHIPS'

A front page story in yesterday's New York Times addresses the problems associated with AIDS in rural communities, "as

social taboos, remote locations, poverty and lack of education aggravate the experience of patients and of those trying to help them." Health experts warn that although rural AIDS cases constituted only 7% of all cases in 1997, that figure increased notably from 5% in 1990. "The impact in the urban areas is actually coming down a bit, whereas the impact in rural areas and small cities is actually going up," said Gary West, deputy director of the Centers for Disease Control and Prevention's division of HIV/AIDS prevention. The Times reports that the obstacles faced by rural AIDS patients are compounded by the shortage of emotional support groups and physicians unfamiliar with changing drug protocols. Furthermore, small communities often avoid teaching AIDS prevention measures, leaving people in rural areas unaware of the threat. Stephen Fuhr, a former medical clinic administrator, spoke of the difficulty he encountered when he attempted to disseminate AIDS prevention information. "Gay men are not going to walk down Main Street in Small Town, USA, and start talking about AIDS prevention. Condom distributions are not a real popular idea in schools," he said. Similarly, Jim House, education director for the AIDS Project of the Ozarks noted that "several schools told him he was welcome 'as long as you don't mention anything about homosexuality or condoms.'" Leon Pendergrass, the superintendent of a school board that discourages discussions of homosexuality and birth control, said the board's position "made health education difficult in a county with one of the highest rates of teenage pregnancy in the state." He said, "'It's just a matter of time'

until his district has an HIV positive student ... 'and with the amount of teenage drinking that we have and the sexually permissive atmosphere that exists, if we had one, we could have 20 pretty quick."

CONFIDENTIALITY

Lack of privacy in small towns is another difficulty. "The inability to keep things confidential in small communities is a major, major problem," said Dr. Helene Gayle, director of the National Center for HIV, Sexually Transmitted Diseases and Tuberculosis Prevention. She explained, "You could drive by the parking lot and look at everybody's car and say, 'Why does so-and-so need to go to an HIV prevention meeting?'" West suggested that additional funds allocated to rural programs might spur the development of interventions to address rural confidentiality concerns, such as new approaches "like telephone consultations and greater use of the Internet." However, he said that funds are currently held up on such projects as officials seek the appropriate AIDS organization to spearhead the effort. "[T]he search has been complicated, he said, because most national groups are used to working in cities" (Belluck, New York Times, 10/12). [Click here to read previous coverage of issues impacting AIDS cases in rural communities.](#)

GLOBAL CHALLENGES

#6 RUSSIA: NEW HIV CASES DOWN NATIONALLY, UP IN MOSCOW

The Russian Health Ministry registered 2,315 new HIV cases

so far this year, down 15% from the same period last year, the Russian news agency ITAR-TASS reports. ITAR-TASS "said doctors were satisfied that the spread of HIV infection had slowed." The new numbers bring the total number of reported HIV cases to 9,000, 75% of which were reported among "young people." This national trend contrasts sharply with "a real AIDS epidemic" in Moscow, according to the Moskovsky Komsomolets newspaper. HIV infections there have risen 130% since the same period last year, with 148 new HIV cases reported between January and August. Using figures from the Moscow AIDS Prevention and Control Centre, the Komsomolets noted that "[t]he scale of the disaster may be judged ... from the fact that the number currently infected, at 148, is one-quarter of all the HIV carriers registered in Moscow over the past 11 years (626)." Of the new cases, 88 resulted from drug use, 34 from heterosexual sex, 23 from homosexual sex and three were new-born children. Forty percent of Muscovites newly infected with HIV are aged 20 or younger. The Komsomolets also noted a dramatic increase in HIV cases among visitors to Moscow, reporting 300 new HIV cases, a 50% increase over last year. [Click here to read previous Daily HIV/AIDS Report coverage of HIV/AIDS in Russia.](#)

MEDIA & SOCIETY

#7 PREVENTION: FRENCH GROUP PULLS CONDOM ADS FEATURING DISNEY CHARACTERS

Sida Info Service, a French AIDS prevention group, pulled

its AIDS prevention ad campaign in France after Walt Disney Co. officials complained about the ads' use of Cinderella and Snow White encouraging women to use condoms. Yves Ferrarini, Sida Info's director, said, "We believed that we did not need to ask Disney's permission because parodies are allowed and because this was not for a commercial purpose." But Fabrice Plaquevent, CEO of Walt Disney Co. France, said, "This campaign involved an inappropriate use of our characters." Ferrarini said that although the organization will pull the Disney ads, it will launch a new campaign using non-Disney fairy tale characters. Sida Info originally chose the fairy tale motif because the agency "found that callers to its help lines often confused the reality of their sexual encounter and fairy tale fantasies." The ads run under the slogan "so that your love story remains a fairy tale." One ad features Cinderella and Prince Charming silhouetted in the window of a pumpkin carriage, with Cinderella saying, "My fair prince, put this on first." The other depicts Snow White with her garter showing in a forest clearing with her prince -- the caption explains that she gave him "a condom and told him that a woman's body is eight times more receptive to the AIDS virus." Ferrarini said the ads are designed to "warn women that they run a greater risk of AIDS infection than men in a heterosexual encounter." Jacques Hebert, advertising director at Grey Paris, which developed the ads, said the campaign also targets women "because they are sometimes reluctant to ask a sexual partner to use a condom." (CNNFN, 10/8).

#8 AIDS MORTALITY RATES: EDITORIALS REACT TO CDC DATA

Papers responding to last week's news from the Centers for Disease Control and Prevention that the AIDS death rate plummeted an unprecedented 47% in 1997 voiced the following concerns:

- o Minneapolis Star Tribune: "[A]long with the success comes a tragic complacency, a mistaken assumption that a 'drug cocktail' can conquer AIDS and that unsafe sex, dirty needles and an I'd-rather-not-know attitude are once again acceptable. Not so. If anything, the statistics only magnify the difficulty of preventing new infections, especially as AIDS becomes more and more a disease of the poor and the alienated. Imagine the task of convincing a junkie willing to shoot poison into his body that using a clean needle is his civic duty" (10/12).

- o Philadelphia Daily News: "Perception that AIDS is over will mean that funding -- for research, as well as for treatment and social services -- will disappear. Longer lives mean heavier demands on the social services needed for AIDS patients. Anyone who looks at the declining death rates and thinks AIDS is 'over,' that we don't have to worry about it, fund it or protect ourselves against it, should look at another set of numbers" (10/10).

- o Newsday: "For one thing, although AIDS deaths are dropping, just as many Americans as ever are getting infected: 40,000 every year. For another thing, the long-term efficacy of

the new antiretroviral therapies is still a question mark. ... Anyone who thinks the AIDS virus (HIV) is now a routine

-- manageable -- medical problem is seriously misinformed"
(10/12).

- o San Francisco Chronicle: "The invaluable information provided by the [CDC] points up the desirability of having a sound system for tracking AIDS patients, including those infected with HIV but not with full-blown AIDS. ... Despite the very encouraging news about the sharp decline in AIDS deaths, the danger of contracting the disease has not waned. And complacency is AIDS' biggest accomplice" (10/12).
- o Miami Herald: "[T]he good news must not spawn complacency or recklessness, though there is evidence that both are occurring. ... As AIDS reaches deeper into a more diverse population -- women, minorities, and teens -- education and prevention programs must keep pace" (10/10).
- o New York Post: The paper criticizes those suggesting that the increased life expectancy of AIDS patients will endanger others, saying: "The discourse surrounding AIDS has long been ruled by wild claims and cataclysmic exaggeration. ... But this ludicrous spin on the best news in the nearly two decades since AIDS was discovered is just mind-spinning. ... The underlying -- but unstated -- assumption of this mindset is that those living with AIDS will continue to practice 'unsafe' sex and thus infect thousands more. And that, of course, underscores the basic fallacy in most AIDS rhetoric. ... The news out of Washington this week is very, very good -- unambiguously so" (10/10).

=====

The Kaiser Daily HIV/AIDS Report is published for The Henry J.

Kaiser Family Foundation by National Journal Group Inc.

Copyright 1998 by National Journal Group Inc., 1501 M St., N.W.,

Washington, DC 20005. All rights reserved.

Phone: 703-518-8725, Fax: 703-518-8703

E-mail: report@kff.org

EDITOR-IN-CHIEF: Patricia Miller

ASSOCIATE EDITORS: Amy Paulson, Rosalee Sanchez

CONTRIBUTING EDITOR: Russ Walker

STAFF WRITERS: Kathleen Donohue, Jeff Dufour, Rachel Kennedy,

Allison Morgan, Adam Pasick

=====

If at anytime you wish to discontinue e-mail delivery of the

Kaiser Daily HIV/AIDS Report, simply reply to this message with

"unsubscribe" (without quotes) in the subject line.

Withdrawal/Redaction Marker

Clinton Library

DOCUMENT NO. AND TYPE	SUBJECT/TITLE	DATE	RESTRICTION
004. email	From Jeff Trandahl to Todd Summers Re: They're in (1 page)	10/13/1998	Personal Misfile

COLLECTION:

Clinton Presidential Records
Tape Restoration Project [Email]
OPD ([Todd A Summers])
OA/Box Number: 250000

FOLDER TITLE:

[10/01/1998 - 10/13/1998]

2018-0758-F

jn569

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]

RECORD TYPE: PRESIDENTIAL (TRP NOTES MAIL)

CREATOR: Jmittman (Jmittman@worldbank.org [UNKNOWN])

CREATION DATE/TIME:13-OCT-1998 22:00:11.00

SUBJECT: Re: Gov. of India Officials for 27th Meeting

TO: Todd A. Summers (CN=Todd A. Summers/OU=OPD/O=EOP [OPD])

READ:UNKNOWN

TEXT:

Thanks, Todd.

Julie

Todd_A._Summers@opd.eop.gov on 10/13/98 05:38:13 PM

To: Julie Mittman, Ncih@Ncih.Org

cc:

Subject: Re: Gov. of India Officials for 27th Meeting

Julie and Ron -

Revised text per our conversation.

October 14, 1998

?First_Name? ?Last_Name?

?Title?

?Department?

?Company?

?Postal_Address?

Dear ?Courtesy_Title? ?Last_Name?:

We would like to invite you to join Mr. J. V. R. Prasada Rao and Ms. Sandra Thurman for a meeting to discuss India's new HIV/AIDS control program, which has been submitted for a loan from the World Bank. Also attending will be other representatives of international organizations working in India and staff from the World Bank.

Mr. Rao is the Additional Secretary and Project Director for India's National AIDS Control Organization. He will be accompanied by other officials from India working on HIV/AIDS at the national and state levels. Ms. Thurman is the Director of the White House Office of National AIDS Policy.

This meeting will be held at 736 Jackson Place, Washington (adjacent to the White House) on Tuesday, October 27th, from 10:30 to 12:00.

Please RSVP by calling (202) 456-2437. In addition, informational materials are available through the Global Health Council at (202) 833-5900. We look forward to seeing you in a few weeks!

Very truly yours,

Todd A. Summers
Deputy Director
Office of National AIDS Policy

Julie Mittman
Health Nutrition Population
South Asia
MC 11-833
The World Bank
1818 H Street, NW
Washington, DC 20433
USA
Ph. (202) 458-0560
Fax (202) 522-2955

RECORD TYPE: PRESIDENTIAL (TRP NOTES MAIL)

CREATOR: NCIH HIV ("NCIH HIV/AIDS Program" <ncih aids@ncih aids.org> [UNKNOWN])

CREATION DATE/TIME:13-OCT-1998 19:54:15.00

SUBJECT: Invitation list to WBank meeting

TO: Todd A. Summers (CN=Todd A. Summers/OU=OPD/O=EOP [OPD])

READ:UNKNOWN

TEXT:

Here you are Todd! Thanks!

- India l.doc*****

National Council for International Health / Global Health Council

Global AIDS Program

1701 K Street, NW, Suite 600

Washington, DC 20006

tel: 202-833-5900

fax: 202-833-0075

email: <ncih aids@ncih aids.org>

Program staff:

Ron MacInnis, Director (ext. 209)

Kim Parvez, Program Assistant (ext. 214)

Kim Green, Program Officer (ext. 215)

Meera Vohra, Program Intern (ext. 221)

Patricia S. Fleming, Program Consultant <pfleming@erols.com>

Carol Millier, NCIH Director of Advocacy <cmiller@ncih.org> (ext. 207)

===== ATTACHMENT 1 =====

ATT CREATION TIME/DATE: 0 00:00:00.00

TEXT:

Unable to convert ARMS_EXT:[ATTACH.D67]ARMSZZ000TN5E.000 to ASCII,

The following is a HEX DUMP:

===== END ATTACHMENT 1 =====

10/13/98

NGOs India and AIDS

AIDSMark
1120 19th Street, NW, Suite 600
Washington, DC 20036

Peter Clancy
tel 202 785-0072
fax 202 785-0102
pclncy@psiwash.org

CARE
151 Ellis St., NE
Atlanta, GA. 30303

Catherine McKaig
tel 404 681-2552
fax 404 577-5977
mckaig@care.org

Catholic Relief Services
209 West Fayette Street
Baltimore, MD 21201-3443

Ann Duggan, AIDS Coordinator
tel 410 625-2220x3516
fax 410 234-3178
crshq@igc.apc.org

Center for Development and
Population Activities
1717 Massachusetts Ave., NW
Suite 202, Washington, DC 20036

Mary Luke, Vice President
tel 202 667-1142
fax 202 332 4496
luke@cedpa.org

Center for Health and Gender Equity
6930 Carroll Avenue, Suite 910
Takoma Park, MD 20912

Lori Heise, Co-Director
tel 301 270-1182x2
fax 301 270-2052
lheise@genderhealth.org

Family Health International
2101 Wilson Blvd., Suite 700
Arlington, VA 22201-3062

Gail Goodridge
tel 703 516-9779
fax 703 516-9781
ggoodridge@fhi.org

Horizons
4301 Connecticut Ave, NW
Suite 280, Washington, DC 20008

Andy Fisher
tel 202 237-9400
fax 202 2378410
afisher@pcdc.org

House of International
Relations Committee
2170 Rayburn House Office Building
Washington, DC 20515

Mark Kirk, Counsel
tel 202 225-5021
fax 202 225 2035
mkirk@mail.house.gov

International Center for

Geeta Rao Gupta, Vice President

**Tape Restoration Project
Hex-Dump Conversion**

Research on Women
1717 Massachusetts Ave.,
NW Suite 302
Washington, DC 20036

tel 202 797-0007x 123
fax 202 797-0020
ggupta@icrw.org

Johns Hopkins Center for
Communications Programs/USAID
111 Market Place, Suite 310
Baltimore, MD 21202

Omar Khan
tel 410 659-6169
fax 410 659-6266
OKHAN@jhucp.org

Office of Representative Jim McDermott
2349 Rayburn HB
Washington, DC 20233

Rita Patel
tel 202 225-3106
fax 202 225-6197
rita.patel@mail.house.gov

Plan International
155 Plan Way
Warwick, RI 02886-1099

Karla Steele, Director
tel 401 738-5600
fax 401 738-5608
steelek@plan.geis.com

Program for Appropriate Technology
in Health (PATH)
1990 M Street, NW, Suite 700
Washington, DC 20036

Elaine Murphy
tel 202-822-0033
fax 202 457-1466
emurphy@path-dc.org

PVO/NGO Networks for Health
1620 I St. NW, Suite 900
Washington, DC 20006

Mekebeb Negerie, HIV/STI Advisor
tel 202 955-0070 x21
fax 202 955-1105
mnegerie@dc.savechildren.org

US Bureau of the Census
International Programs Center
Population Division
Washington, DC 20233-886

Karen Stanecki, Chief
tel 301 457-1406
fax 301 457-3034
kstaneck@census.gov

**Tape Restoration Project
Hex-Dump Conversion**

RECORD TYPE: PRESIDENTIAL (TRP NOTES MAIL)

CREATOR: Jmittman (Jmittman@worldbank.org [UNKNOWN])

CREATION DATE/TIME:13-OCT-1998 19:05:47.00

SUBJECT: Gov. of India Officials for 27th Meeting

TO: Todd A. Summers (CN=Todd A. Summers/OU=OPD/O=EOP [OPD])

READ:UNKNOWN

TEXT:

Todd,

Here are the titles of the GOI Representatives:

Mr. J.V.R. Prasada Rao, Additional Secretary and Project Director, National
AIDS Control Organization

Mr. N.B. Patil, Health Secretary, Government of Maharashtra

Dr. N. Sundaradevan, Health Secretary, Government of Tamil Nadu

Mr. S. Ramasundaram, Government of India

Dr. Subash Salunke, Government of India

From the World Bank:

Mr. Prabhat Jha, Public Health Specialist and Task Leader

Mr. Salim Habayeb, Principal Public Health Specialist

Ms. Julie Mittman, Social Development Specialist

Ms. Funke Oyewole, External Affairs

Ms. Rebecca Robboy, External Affairs

Please let me know any other information you may need at this point. Many thanks for organizing.

Regards,

Julie

Julie Mittman

Health Nutrition Population

South Asia

MC 11-833

The World Bank

1818 H Street, NW

Washington, DC 20433

USA

Ph. (202) 458-0560

Fax (202) 522-2955

RECORD TYPE: PRESIDENTIAL (TRP NOTES MAIL)

CREATOR: Mail Delivery Subsystem (Mail Delivery Subsystem <MAILER-DAEMON@brap-2.cais.net> [UNKNOWN])

CREATION DATE/TIME:13-OCT-1998 20:33:52.00

SUBJECT: Returned mail: Host unknown (Name server: worldbank.org._ncihids: host not found)

TO: Todd A. Summers (CN=Todd A. Summers/OU=OPD/O=EOP [OPD])
READ:UNKNOWN

TEXT:
The original message was received at Tue, 13 Oct 1998 16:33:17 -0400 (EDT)
from elwood.cais.com [199.0.216.215]

----- The following addresses had permanent fatal errors -----

<Jmittman%worldbank.org._ncihids@cais.com>

----- Transcript of session follows -----

550 <Jmittman%worldbank.org._ncihids@cais.com>... Host unknown (Name
server: worldbank.org._ncihids: host not found)

- att1.unkReturn-path: <Todd_A._Summers@opd.eop.gov>

Received: from elwood.cais.com (elwood.cais.com [199.0.216.215]) by
brap-2.cais.net (8.9.1/8.9.1) with ESMTP id QAA21221 for
<Jmittman%worldbank.org._ncihids@cais.com>; Tue, 13 Oct 1998 16:33:17
-0400 (EDT)

Received: from gatekeeper.eop.gov (gatekeeper.eop.gov [198.137.241.3]) by
elwood.cais.com (8.8.7/Elwood) with SMTP id QAA05374 for
<Jmittman%worldbank.org._ncihids@ncihids.org>; Tue, 13 Oct 1998 16:33:16
-0400 (EDT)

Received: from lngate2.eop.gov by gatekeeper.eop.gov;
(5.65v3.2/1.1.8.2/17Oct95-0424PM) id AA09126; Tue, 13 Oct 1998 16:33:15

-0400

Received: by LNGATE2.EOP.GOV(Lotus SMTP MTA SMTP v4.6 (462.2 9-3-1997))

id 8525669C.0070E4FE ; Tue, 13 Oct 1998 16:33:06 -0400

Date: Tue, 13 Oct 1998 16:31:40 -0400

From: Todd_A._Summers@opd.eop.gov

Subject: Re: Gov. of India Officials for 27th Meeting

To: Jmittman@worldbank.org._ncihads

Message-id: <8525669C.007029AA.00@LNGATE2.EOP.GOV>

MIME-version: 1.0

Content-type: text/plain; charset=us-ascii

Content-transfer-encoding: 7BIT

X-Lotus-Fromdomain: EOP

Julie and Ron -

This is the text of the letter we sent out this afternoon (will be posted tomorrow). It went to the list of NGO reps given to me by Ron. We did NOT send invites to either the officials from India or the World Bank, and assume that you all will take care of getting them here for the meeting.

Let me know if you have any questions.

Todd

=====

October 14, 1998

?First_Name? ?Last_Name?

?Title?

?Department?

?Postal_Address?

Dear ?Courtesy_Title? ?Last_Name?:

We would like to invite you to join Mr. J. V. R. Prasada Rao and Sandra Thurman, Director of the Office of National AIDS Policy, for a meeting to discuss the World Bank's proposed loan to India for HIV/AIDS-related prevention. Also attending will be other representatives of international organizations working in India and staff from the World Bank.

Mr. Rao is the Additional Secretary and Project Director for India's National AIDS Control Organization. He will be accompanied by other officials from India working on HIV/AIDS at the national and state levels.

This meeting will provide an important opportunity to learn more about the proposed loan and India's new AIDS control program. It will be held at 736 Jackson Place, Washington (adjacent to the White House) on Tuesday, October 27th, from 10:30 to 12:00.

Please RSVP by calling (202) 456-2437. In addition, informational materials are available through the Global Health Council at (202) 833-5900. We look forward to seeing you in a few weeks!

Very truly yours,

Todd A. Summers

Deputy Director

Office of National AIDS Policy

===== ATTACHMENT 1 =====
ATT CREATION TIME/DATE: 0 00:00:00.00

TEXT:

Reporting-MTA: dns; brap-2.cais.net

Received-From-MTA: DNS; elwood.cais.com

Arrival-Date: Tue, 13 Oct 1998 16:33:17 -0400 (EDT)

Final-Recipient: RFC822; Jmittman@worldbank.org._ncihads

Action: failed

Status: 5.1.2

Remote-MTA: DNS; worldbank.org._ncihads

Last-Attempt-Date: Tue, 13 Oct 1998 16:33:52 -0400 (EDT)

===== END ATTACHMENT 1 =====