



THE AIDS INSTITUTE

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President's FY08 Budget: *Global AIDS is an Excellent Start; Domestic AIDS Needs to Follow*

Washington, DC – “The President’s FY08 budget is a mixed bag for people with HIV/AIDS,” commented Dr. Gene Copello, Executive Director of The AIDS Institute. “For Global AIDS, the President is keeping his historic commitment to address the worldwide suffering caused by HIV/AIDS, but for people living with HIV/AIDS in our own country, the proposed increases are minimal, and must be increased by the Congress.”

Copello continued, “We are pleased to see the President propose an increase of \$21 million over FY07 for the Ryan White CARE Act, which provides medications and healthcare for low-income people living with HIV/AIDS. But, with increased caseloads and new testing initiatives, it is far from enough to provide adequate healthcare, social services, and medications to all the people in need in the U.S.”

The President proposed an increase in CARE Act programs of \$97 million over FY06 levels, including \$25 million for the AIDS Drug Assistance Program (ADAP), and \$70 million for states, which the 110th Congress addressed in the FY07 Continuing Resolution. However, the Continuing Resolution has not addressed the growing crisis in ADAP, which provides lifesaving medications to approximately 100,000 people. A recent study by the CDC estimates that over 200,000 people in the U.S. are not receiving antiretroviral therapy that need it. In the State of South Carolina alone, nearly 400 people are on a waiting list to receive their medications.

“We will now have to turn to the Congress to adequately fund all aspects of the CARE Act,” said Copello. Most components of the program have faced budget cuts in recent years, despite the growing demand.

“One positive note in the budget’s domestic proposals is to increase CDC’s HIV/AIDS Prevention budget, which has been cut or flat funded for the past five years,” said Carl Schmid, Director of Federal Affairs for The AIDS Institute. “We welcome the President’s initiative to increase HIV testing by \$93 million, although it is questionable if \$30 million of it will ever be spent due to grant conditions. This is a good start since it can serve as a prevention vehicle and bring people into care and treatment, but we must do much more to reach the goal of no new infections in America,” continued Schmid.

“After several years of cuts or level funding to HUD’s Housing Opportunities for People With AIDS (HOPWA), we are pleased to see the President’s proposed a \$14 million increase for assisting individuals and families who are homeless or in threat of homelessness and living with HIV/AIDS,” commented Michael Ruppel, Associate Executive Director of The AIDS Institute. While it is far short of the actual need, the President proposed this same increase last year, but it was not included in the Continuing Resolution by the 110th Congress.

Another disappointment in the budget is the President’s proposal to decrease funding for medical research at the National Institutes of Health. “We are hopeful that Congress will reject this and increase NIH funding so we can find new therapeutics and prevention strategies, including a vaccine and microbicide research,” said Schmid.

continued

“The President is keeping his pledge to fight the global spread of HIV/AIDS by calling for a unprecedented \$5.4 billion to the President’s Emergency Plan for AIDS Relief in FY08”, commented Jamila Taylor, Global Policy Coordinator for The AIDS Institute. “We are extremely delighted to see the President keep his promise to the men, women, and children stricken by HIV/AIDS abroad. That commitment stretches even farther with new goals to reach 2 million people in Africa and the Caribbean by the year 2009. The United States is the leader in the global fight against HIV/AIDS by targeting the countries hardest hit by the epidemic and realizing the importance of care and treatment for other deadly diseases pervading these communities like TB and malaria,” she concluded. U.S. funding for PEPFAR has risen steadily since FY 2004. As of September 30, 2006, the Plan has supported antiretroviral treatment for approximately 822,000 people through bilateral programs in the 15 focus countries.

“The AIDS Institute is deeply concerned about the proposed \$102 billion cuts to Medicare and Medicaid over the next five years,” added Schmid. After already instituting severe cuts over the past couple of years, we are frightened by additional cuts to the two largest healthcare programs for people with HIV/AIDS.” He added, “We will work very hard in the Congress to defeat any measure that harm beneficiaries.”

Copello concluded: “The proposed budget for FY08 carries some good news, but we must now turn our efforts to the Congress, who will have the responsibility of enacting a budget and individual appropriations. We must increase funding for domestic HIV/AIDS care, treatment, research and prevention. And, we must reject Medicaid and Medicare cuts to beneficiaries. The AIDS crisis continues both at home and abroad. The federal, state, and local governments in our nation, as well as governments in other nations, and the corporate and community sectors, must all work together, with compassion, public health science, and adequate funding, if we are to eradicate HIV/AIDS in our country and around the world. The consequences otherwise will be grave - impacting not just the health of humanity but also the world's political, economic, and social systems.”

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