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March 20, 2019 at 12:05 pm EDT | by Chris Johnson

Trump's picks for AIDS council disappoint some fighting HIV epidemic

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President **Donald Trump** has restaffed the Presidential Advisory Council on HIV/AIDS 15 months after firing all members. (Photo by Michael Vadon via Flickr)

President Trump's recently selected choices to fill the Presidential Advisory Council on HIV/AIDS are rankling some observers.

Critics say the appointments fail to address social determinants of health, including homophobia and transphobia, rely too heavily on the pharmaceutical industry and leave out Republicans with records of fighting HIV/AIDS.

The nine members were [selected](#) last week — joining co-chairs Carl Schmid and John Wiesman — in the aftermath of Trump [announcing in his State of the Union](#) address a pledge to end new HIV infections in the United States by 2030.

Scott Schoettes, HIV project director for Lambda Legal, said he's "glad to see" the posts filled, but had concerns about addressing the social determinants of health and the Trump administration waiting to make the choices until after the plan was unveiled.

"I have some concerns that they really came up with their plan, and then chose the people to be on the council sort of after the fact," Schoettes said. "It seems to be you would want those people in those advisory positions as you develop your plan, and it seems like the people they've picked are, so far, reflective of that plan in that it's very focused on finding everyone, getting them tested, getting them treated and not really thinking much about the

social determinant of health or the things that we know drive the epidemic in a significant way in the United States.”

Schoettes is a former member of PACHA who was appointed during the Obama administration, but was among six members who [resigned](#) in June 2017 over Trump’s perceived inaction on HIV/AIDS.

“I’m hopeful that the administration will pay more attention to these individuals than they did to the members while I was serving, but I’m not sure that they will,” Schoettes said.

In December 2017, Trump [sacked](#) the remaining members of PACHA without explanation via letter from FedEx, as first reported by the Washington Blade. It wasn’t until 15 months later that Trump would finally restaff PACHA with the nine new members.

Schoettes said the social determinants PACHA should be able to address include “housing instability and access to care, income insecurity, food insecurity.”

“All of those things drive the HIV epidemic in addition to things like homophobia, transphobia, racism, gender inequality,” Schoettes said. “And so, unless you are addressing those other factors, you’re not really going to get at the sort of entrenched people living with HIV and the people that are out there that are not currently diagnosed. Those folks are living in a swirl of other social determinants of health that are preventing them from getting tested, from accessing care and you got to address those things as well as just the biomedical side of it.”

The nine new PACHA members come from variety of backgrounds , including the pharmaceutical industry, activism and academia:

Gregg Alton, chief patient officer for Gilead Sciences, Inc.;

Wendy Holman, CEO and co-founder of Ridgeback Biotherapeutics;

Marc Meachem, head of External Affairs North America for ViiV Healthcare;

Rafaelé Roberto Narváez, co-founder and director of Health Programs for Latinos Salud;

Michael Saag, professor of medicine and associate dean for global health at UAB School of Medicine and director of the University of Alabama at Birmingham Center for AIDS Research;

John Sapero, office chief for the HIV prevention program at the Arizona Department of Health Services;

Robert Schwartz, head of Dermatology at Rutgers New Jersey Medical School;

Justin Smith, a Ph.D. candidate at Rollins School of Public Health at Emory University; and

Ada Stewart, lead provider and HIV specialist at Eau Claire (South Carolina) Cooperative Health Centers.

Created in 1995, PACHA has provided advice to U.S. presidents on policy and research to promote effective treatment and prevention for HIV — maintaining the goal of finding a cure.

Asia Russell, executive director of the New York-based Health GAP, said the appointments demonstrate Trump “doesn’t give a damn” about PACHA being truly diverse, citing in particular the appointments from the pharmaceutical industry.

“His appointment of representatives of pharmaceutical companies that profit directly from government refusal to address price gouging is unethical,” Russell said.

Gay Republicans with records of working on HIV/AIDS were also critical of what they perceived as a lack of Republican appointments to PACHA. (Schmid was once a Republican, but told the Blade he’s now a registered independent and has been so for about the last decade.)

Jim Driscoll, a Nevada-based HIV/AIDS advocate who supported President Trump in the 2016 election, was among those dissatisfied with the apparent lack of Republicans.

“Politically the group is very one sided,” Driscoll said. “Members appear to be chosen more to forestall community blow back than for their ability to aid, advise or influence President Trump.”

Driscoll, who served as a PACHA member during the George W. Bush administration and applied for membership in the Trump administration, also said other key groups were absent, such as AIDS patients in treatment, registered nurses and older patients “despite elders being the fastest growing group and too little is being done about AIDS among the elderly.”

“Gay Republicans are wondering, who actually won this election?” Driscoll said. “Gays are well represented, except there appear to be zero gay Republicans. The council needs at least two credible gay Republicans who supported Mr. Trump and at least three or four more Trump supporters. I expect that even VP Pence and his evangelical supporters would want this.”

Jerri Ann Henry, executive director of Log Cabin Republicans, said she knows Republicans who have been involved with her organization and “unhappy to have been passed over,”

and echoed the concerns about no Republicans.

“It’s very disappointing for me to see there are, I don’t think, any Republicans on PACHA at all under a Republican administration,” Henry said. “And I think this is one of those committees that most administrations have tried to make overly partisan. That’s not a top criteria that should be used in selecting people, but under a Republican president, it would be great to see some Republicans there, especially the people who have worked in the past under less friendly administrations to make things like this happen.”

Schmid, who in addition to serving as PACHA co-chair is deputy director of the AIDS Institute, said in response to criticisms Secretary of Health and Human Services Alex Azar is responsible for the appointments, but in defense of the appointments said the claims were off base.

With respect to addressing the social determinants of health, Schmid said during the PACHA meeting last week — the first meeting after the new appointments were made — those issues were discussed “along with other non-medical issues were highlighted and discussed throughout the meeting.”

“Seems people are quick to criticize without knowing the facts,” Schmid said, “And comments such as these ignore the leaders in the community who are members of PACHA and the work they are doing to end HIV in their respective communities.”

In response to the lack of Republicans on PACHA, Schmid said people making the criticism do not have their facts correct and “probably should do some more research before making such a claim.”

“I tend to think people keep their party affiliation private and it is not my business, it is their private personal matter,” Schmid added.

In terms of diversity, Schmid said six out of 11 of the members are gay, including two black gay men and one Latino gay man.

Schmid said during the PACHA meeting last week he announced the new appointments were just the first round and more should follow in the aftermath of Trump unveiling a plan to beat HIV/AIDS by 2030.

“I listed a number of people we are looking for: More people living with HIV, more women,

younger people, trans people, injection drug users, reps of tribal and faith communities, local government, philanthropy, community health centers, people who focus on Hepatitis, STDs, different disciplines and geographic diversity," Schmid said.

The Department of Health & Human Services didn't respond to the Washington Blade's request for comment on the criticism of the PACHA choices.

Among the first orders of business for the newly appointed PACHA was approving a [resolution](#) in support of the Trump administration's "Ending the HIV Epidemic" plan.

Cited in the resolution is how HIV/AIDS "disproportionately impacts certain populations, including gay and bisexual men, in particular among those who are black, Latino, and young; black women, transgender women and those who inject drugs."

The resolution concludes with commending the Trump administration's "bold initiative" to end new HIV infections and pledging to dedicate resources to make it happen, but also to "ensure that proper accountability and metrics are in place."

"As part of this assistance PACHA will focus on reducing the stigma often associated with HIV, as well as the numerous disparities and social determinants of health that impact HIV in the United States," the resolutions says.

The resolution says PACHA will work with the administration to ensure the plan is sufficient not just for the first year, but for future years until meeting the goal of no new infections by 2030.

The PACHA members will have their work cut out for them. In addition to advising Trump on HIV/AIDS as he pursues his goal, PACHA is charged with providing counsel on the National AIDS Strategy, which is due for an update in 2020.

It remains to be seen what recommendation PACHA will make. A progress report from the Trump administration last year on the National AIDS Strategy [adopted](#) Obama-era goals in combatting HIV/AIDS, which includes reducing the rate of new diagnoses among gay and bisexual men.

The observers critical of the PACHA choices, however, raised questions about whether the administration was making a serious commitment to achieve its goal in stopping HIV/AIDS.

Cited as evidence of concern was Trump's fiscal year 2020 budget request. Although the request calls for \$300 million to beat HIV/AIDS, the budget slashes global HIV programs and cuts Medicare and Medicaid, programs on which many people with HIV/AIDS rely.

Russell was particularly critical of the budget's request to cut global programs, saying they're "threatening the lives of people with HIV worldwide."

“For example, the White House just requested Congress pass \$1.742 billion in killer cuts to global AIDS, tuberculosis and malaria programs for FY 2020, when those programs actually need \$1.39 billion in funding increases to accelerate life saving service delivery,” Russell said. “Even drastically improved PACHA representation would not correct the impact of President Trump’s deadly decisions.”

Schoettes had concerns about the budget’s proposed cuts to programs on the domestic side, saying the administration has made an “ambitious goal” but he hasn’t “seen the actions or the steps that would be necessary to achieve the goal.”

“While there was an increase in HIV spending proposed in the president’s budget, there were a bunch of cuts to other really critical programs,” Schoettes said. “They’re going to undermine that goal. So, for instance, cuts to NIH that really dwarf the increases that we saw with respect to HIV. Cuts to Medicaid and attempts to move that into a block grant program. The continued efforts to undermine the ACA. You can some funding that’s going to specifically address HIV, you are actually undermining the goals of health for those communities if you’re not providing comprehensive access to health care.”
