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Domestic AIDS Funding Significantly Cut in Proposed 2009 Federal Budget

Washington, DC, February 5, 2008—President Bush’s 2009 budget proposes to reduce or flat-fund spending for nearly all federal health care agencies and programs supporting HIV/AIDS research, prevention, treatment and care, while increasing support for international AIDS relief through the **President's Emergency Plan for AIDS Relief (PEPFAR)**.

“Though NMAC applauds the President’s dedication to fighting HIV/AIDS worldwide, we want to remind the Administration that the AIDS epidemic is far from over in the United States,” says Paul A. Kawata, Executive Director of the National Minority AIDS Council. “The negative impact these proposed cuts will have on the health of communities of color, which have been hardest hit by the HIV/AIDS epidemic since it began three decades ago, cannot be overstated.”

Though African Americans and Latinos each represent only 13% of the U.S. population, they respectively account for 50% and 20% of all new HIV cases reported to the Centers for Disease Control and Prevention annually. Asian and Pacific Islanders and Native Americans/Alaskan Natives also have reported significant increases in HIV risk and infection rates. Perhaps most alarming, the CDC has indicated that it soon will release data showing HIV infections have risen as much as 50 percent since the start of the Bush Presidency in 2000.

“The faith- and community-based organizations serving communities of color – which historically have had limited access to health care, education, employment, and poverty levels equal to developing countries, serve their clients on a shoe string budget and are often their clients’ only link to HIV/AIDS services. Most of these agencies will have to close their doors if they sustain a hit, leaving their clients lost once again,” says Ravinia Hayes-Cozier, NMAC Spokesperson and Director of Government Relations and Public Policy.

NMAC also cautions against the proposed \$28 million increase in spending on abstinence-only education programs. Monies need to be directed to science-based prevention programs that have proven results. “This means supporting HIV testing in non-traditional arenas, such as bars and night clubs, and comprehensive health programs that include sex and drug education programs in schools,” continues Hayes-Cozier.

“We highly encourage the President to reconsider his funding priorities in regard to health care, particularly around HIV/AIDS in this country. AIDS threatens to undermine

the very existence of minority communities in the United States. Indeed, if left unchecked, the outcome for minorities can reach the level of international proportions leaving a legacy of benign neglect to a preventable and treatable disease. To let this happen in a country like the United States is unconscionable.”

About the National Minority AIDS Council

The National Minority AIDS Council (NMAC) will honor its twentieth year as the premier national organizational dedicated to developing leadership within communities of color to address challenges of HIV/AIDS, in 2007. NMAC has responded to the needs of communities of color by developing programs aimed at enhancing the skills necessary to confront this health crisis, including a public policy education program, national and regional training conferences, a treatment and research program and numerous publications. Today, NMAC is an association of AIDS service organizations providing valuable information to community-based organizations, hospitals, clinics and other groups assisting individuals and families affected by the AIDS epidemic. NMAC's advocacy efforts are funded through private funders and donors only. For more information, call: (202) 234-5120; e-mail: communications@nmac.org; or visit: www.nmac.org.

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