

The Detroit News

Metro Final •

AND Free Press

Saturday, June 26, 1993

(FRONT PAGE)

AIDS activist frustrated

U-M dean, others say Clinton is moving too slowly

BY FRANK BRUNI
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Over the past four years, Dr. June Osborn has given hundreds of speeches, logged thousands of air miles and, in her sensible but well-worn shoes, trod ground as diverse as the cracked sidewalks of New York and the windswept plains of Oklahoma.

The dean of the University of Michigan School of Public Health has commanded all sorts of audiences, including the U.S. Congress.

All the while, she has repeated and reiterated a single, one-syllable word,

■ Key facts about the new federal AIDS policy coordinator, Page 7A.

an acronym, to be exact: AIDS.

She has shouted it as a wake-up call and warning; she has pleaded for swifter action in slowing its spread and she has outlined steps, both specific and general, to help accomplish that.

And now, as the National Commission on AIDS gets ready to publish its final report Monday and Osborn's tenure as its cochair nears an end, she wonders just how well this nation was

listening.

Osborn is dispirited and badly disillusioned. Her mood didn't lift much Friday when President Bill Clinton named a new national AIDS czar.

"Gloomy is a pretty good word for it," Osborn said in a lengthy recent interview, before the appointment of Kristine Gebbie, a former Washington state health secretary and doctoral candidate in Osborn's school at U-M.

Osborn called Gebbie "a very able person . . . It's certainly better to have

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National
Commission on
AIDS



TOM HORA

Dr. June Osborn says more people need to realize the seriousness of the AIDS epidemic.

AIDS activist wants Clinton to

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pick up the pace

AIDS, from Page 1A

an able person than an unable person, but I have to also consider that he took six months to make the appointment."

Gebbie's formal title is AIDS policy coordinator. In making the announcement, Clinton said, "This position has never existed before but circumstances now require us to look for unprecedented remedies to unprecedented problems."

Osborn, in the earlier interview, said she "was just reading a federal report that said a fundamental part of our democracy is a belief in the sanctity and value of each human life. And I thought: How can we talk like that and then let happen what's still happening with AIDS?"

"I'm a very enthusiastically loyal American, and I'm very disappointed in us. People are continuing to fool themselves into thinking we have some choice here — that maybe we can walk away from this, maybe we don't have to deal with it.

Osborn's mood is matched by many others engaged in the battle against AIDS, and they place much of the blame on Clinton.

During his campaign, Clinton promised a new day for AIDS awareness, prevention, research and medical care.

But the AIDS activists grew discouraged while waiting for him to name an AIDS czar, and support for Gebbie is not unanimous.

"While she served on former President Reagan's AIDS commission, Gebbie showed she lacks the sharp elbows necessary to command both the president's and the public's attention," said Michael Petrelis, a spokesman for the activist group ACT-UP. "Clinton's selection of the first AIDS czar is a slap in the face of the AIDS community."

On the campaign trail, Clinton also pledged a Manhattan Project-style federal research effort into AIDS. No such initiative has been launched, although he said Friday "we must redouble our government's efforts to promote research, funding and treatment."

Candidate Clinton also said he would end the ban on immigration by people with the AIDS virus, but that ban was codified into law two weeks ago, piggybacking on another bill.

He said he would restore money to the chronically shortchanged Ryan White CARE Act, but his proposal to funnel an additional \$200 million got tied up in his economic stimulus package and was killed along with it.

"I still believe the president's commitment is real, but I'm disappointed at the slowness," said Gregory King, a spokesman for the Human Rights Campaign Fund, a political action committee in Washington, D.C.

Deadly estimate

For Osborn, the disappointment is so keen because Clinton, on the campaign trail, said time and again that his strategy for tackling the AIDS epidemic would begin by implementing the accumulated recommendations of the National Commission on AIDS.

Most of those recommendations went unheeded under President George Bush.

Dr. Mervyn Silvenman, president of the American Foundation for AIDS Research, said that during the Bush administration, the AIDS commission "tried to hold the president's feet to the fire. He just had on his asbestos socks."

Osborn got used to that. Her expectations diminished. And she and the other 14 commissioners took consolation in their ability to be a voice for the voiceless and to focus media attention on the burgeoning dimensions of the epidemic and the many gaps in the federal response to it.

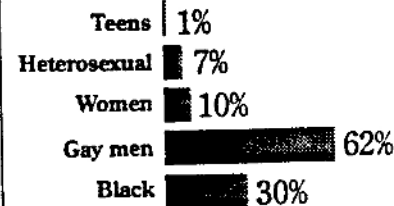
Each time the commission issued a new report on a different aspect of the epidemic — it has produced 13 major ones since its inception in August 1989 — TV news cameras rolled and print reporters dutifully scribbled.

When Clinton took office, however, Osborn expected more: Now there was

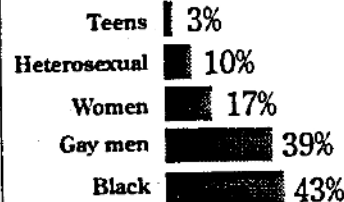
WHO'S NEXT?

The average lag time between HIV infection and the onset of AIDS is about 10 years, so looking at who is infected now with the HIV virus gives an idea of who is likely to have AIDS in the future. Blacks, women and teens are expected to make up a larger share of those with the disease.

Percent of people with AIDS who are:



Percent of people infected with the HIV virus who are:



Note: Numbers do not add up to 100 percent because of overlapping categories.

Source: Centers for Disease Control and Prevention

THE NUMBERS:

- National death toll through March: 182,275
- Michigan death toll through May: 2,489
- National AIDS cases diagnosed through March: 289,320
- Michigan AIDS cases diagnosed through May: 4,589
- AIDS is the second leading cause of death — behind accidents — of men 25 to 44 years old. It is the sixth leading cause among women those ages.

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an administration that cared and understood the urgency. Now there would be action.

"It seemed almost too good to be true to have a potential president referring repeatedly to our work," Osborn said in a speech she gave in Detroit in early May. "I worry now that it may indeed have been too good to be true."

Osborn was with Clinton briefly for Friday's announcement, but has yet to get a requested audience with him.

She said she understands that the economy has overshadowed many social ills for Clinton, but AIDS is different — an immediate public health emergency that gets worse daily.

An estimated one million Americans are infected with the AIDS virus. An additional 40,000 to 80,000 are believed to be infected yearly — and that remains the projection up until the year 2000, assuming things go well.

"I keep trying to talk myself into the fact that maybe I am just an advocate and maybe I've overblown it," Osborn said. "But it's hard to do when we've never had a health disaster on this scale before."

The national death toll from AIDS through March 1993, the most recent figure available, is 182,275. The number is on track to surpass 200,000 in the next year and a half. Osborn noted that it took eight years for the first 100,000 cases to accumulate, but only about two years for the next 100,000.

The Clinton administration has proposed a Health and Human Services budget for the next fiscal year that would increase spending on AIDS by \$600 million — to a total of \$2.7 billion, "the largest increase that we have ever seen," concedes Dan Bross, president of the AIDS Action Council, a Washington lobby.

Flawed comparison

It has become increasingly popular in recent years to compare the AIDS toll and federal spending to fight AIDS with similar statistics for cancer and heart disease, making the argument that AIDS gets too much attention.

But Osborn and others try to keep reminding the nation that such arguments ignore some crucial facts.

AIDS is infectious — spread from one person to another — and has a unique potential to increase rapidly in a short time.

AIDS is almost wholly preventable if current knowledge about how the virus is transmitted can be translated into changed behaviors.

AIDS makes no exceptions for the very young.

It is second only to accidents as a cause of death for men ages 25-44, and ranks sixth for women in that age group.

In five states and 100 American cities, including Grand Rapids, AIDS is the No. 1 killer of young men. In nine cities, it is the leading killer of young women.

Because the average lag time between infection with HIV, the virus believed to cause AIDS, and onset of AIDS is estimated to be 10 years, many of those young adults were likely infected as teenagers.

That lag time makes it difficult for researchers to get any kind of picture of current patterns in the spread of the AIDS virus.

But there is clear and strong evidence that the rate of its spread is much faster now among heterosexuals than homosexuals, among women than men.

A 22-state study released at the recent International Conference on AIDS estimates that gay men represent 62 percent of AIDS cases, but account for a much smaller 39 percent of those infected with HIV.

Women, by contrast, represent 10 percent of AIDS cases but 17 percent of the HIV-infected. Teens make up a tiny one percent of the diagnosed but a more alarming three percent of the infected.

A demanding spotlight

Many of the recommendations of the AIDS commission over the past four years give a glimpse of what more could be done:

■ Drug treatment on demand. This has been the commission's most persistent urging. The greatest potential for the HIV epidemic to skyrocket overnight exists among intravenous drug users.

■ Free needle exchange in cities. This recommendation has been implemented in many places, among them San Francisco and New York, but not in others. Michigan, where syringes can be purchased legally over the counter, has no needle exchange programs.

■ Guaranteed medical treatment for poor people with HIV, better medical treatment for prisoners with HIV and housing for homeless people with HIV.

■ Blunter, more aggressive AIDS prevention education in public schools. Parents have to confront estimates that 75 percent of teenagers are sexually active by the time they graduate from high school. AIDS commission member Mary Fisher put it this way: "We say we love our children and then don't give them the tools to make appropriate choices in their lives. What kind of love is that?"

The bipartisan commission was created by Congress with a four-year life span and a charge to study all facets of the AIDS epidemic and report back to the nation's leaders, with advice.

Osborn, 56, a physician whose dual educational backgrounds in infectious diseases and virology give her special insight into AIDS, has served as its cochair from the start.

The position has earned her national recognition — quotes in the New York Times, regular appearances on "Nightline" — that she never anticipated.

Osborn said one of the things that has helped is living often enough to get upgrades to first class, where the extra room allows her to get work done.

But "the worst disaster that can happen to me," she said, "is that somebody sitting next to me says, 'Haven't I seen you on TV?' Because there's no way to get back from that question to my work in less than half an hour. Everybody has questions about AIDS — and I don't feel I can say, 'I'm sorry, I can't talk to you now.'"

The commission's charter officially expires in August, and Osborn is not certain where she will go from there. Effective in September, she has resigned her post as a U-M dean, though she will remain on the faculty, and she may take a sabbatical.

But she knows she can't walk away from AIDS. Too much is at stake.

In her Detroit speech in early May, Osborn articulated her frustration by reading aloud from a book titled "The Wind Blows Away Our Words," about the Greek prophetess Cassandra, who was doomed to speak the truth but never be believed.

Osborn said she often feels like Cassandra.

"Sometimes I wonder when I get up in the morning whether this isn't an awful dream from which I will some day awaken," she said.

"It's a dark, scary time. AIDS is awful, and it is an awful legacy to leave for future generations — one that will only get worse as we leave it untended."