TRANSCRIPT OF PROCEEDINGS

NATIONAL COMMISSION ON ACQUIRED IMMUNE DEFICIENCY SYNDROME

HOUSING ISSUES AND THE HIV EPIDEMIC
PRESS CONFERENCE

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NATIONAL COMMISSION ON AIDS

HOUSING ISSUES AND THE HIV EPIDEMIC PRESS CONFERENCE

Tuesday, March 3, 1992 12:00 p.m.

The Copley Plaza Hotel 138 St. James Avenue Boston, Massachusetts 02116

PARTICIPANTS

COMMISSION MEMBERS:

JUNE E. OSBORN, M.D., Chairman DAVID E. ROGERS, M.D., Vice Chairman

DIANE AHRENS
HARLON L. DALTON, ESQ.
EUNICE DIAZ, M.S., M.P.H.
EARVIN JOHNSON, JR.
DONALD S. GOLDMAN, ESQ.
LARRY KESSLER
CHARLES KONIGSBERG, M.D., M.P.H.

EX OFFICIO MEMBERS:

JAMES R. ALLEN, M.D., M.P.H., DHHS MICHAEL PETERSON, M.P.H., DR. PH., DOD IRWIN PERNICK, DVA

STAFF:

ROY WIDDUS, Ph.D., Executive Director FRANK ARCARI JANE SILVER NAT BLEVINS THOMAS D. BRANDT

PROCEEDINGS

CHAIRMAN OSBORN: I will ask Tom Brandt, Director for External Relations for the commission, to be in charge of the press conference and to field questions and so he will be the person who determines how things work for the next few minutes. I think we only have till about 12:15; is that right? And so I hope this can be done efficiently. Could I ask everybody in the room who wants to stay to be quiet? If you have conversations, I'd like to ask you to leave now, please. Thank you.

QUESTION: I have a two for one question, one for Commissioner Osborn and also the same question for Commissioner Johnson. The impact that Commissioner Johnson has had on the overall commission, so much media attention, public attention in these past two meetings, what does it do to the overall battle to raise the public conscience?

CHAIRMAN OSBORN: Well, I think Commissioner

Johnson as Earvin Johnson has done wonders in the context of
the needs of the epidemic. As a commissioner, he's been a
marvelous colleague and brought -- I speak for myself, but I
think the other commissioners, too, -- new energy and fresh
insights in his own expertise to the work of the commission.

It's been very helpful. Earvin.

MR. JOHNSON: Basically I think that what I bring is the fact that a lot of their work, hard work and dedication, and their energy to the forefront has been really overlooked. It's been overlooked by the president. It's been overlooked by the HUD people. It's been overlooked, I think, now since I've got the virus, it's finally come to the forefront, what they've been doing to the American public. I mean they've been working their butts off basically, putting together a great package to tell the president how much money we need where, and where the need is, and really it's just been shot down every time they have presented it to Congress or whoever.

But now with you guys being here, the press, hopefully their efforts and their goals will finally get some press and by getting some press maybe we can get some action. That's it.

(Applause.)

QUESTION: Commissioner Johnson, one question. You seem to be a little bit, you're not exactly satisfied with their explanation on where the money is going into minority communities. Could you elaborate on that a little bit?

MR. JOHNSON: When you make up over 50 percent of all the AIDS cases, whether it's adolescents, women, and then just AIDS patients in general, then we need more housing. We need more of everything for minorities because what happens is, you know, we got a twofold situation there. We need a lot, and then we're poor too. We've got poverty in our community as well. So we got a tough situation, and I think the government has to address that as well as our commission and the committee here, and we're trying to do that as well.

And then, you know, I have to educate minorities because we're in such a big denial, and that's why I think we've over 50 percent of all the AIDS cases. So the more I can educate them, the better we're going to be. We got to make, instead of the numbers keep going up, we got to make them come down.

QUESTION: Are you satisfied with HUD's explanation of what they're doing to provide housing for minorities?

MR. JOHNSON: Well, I'm not satisfied with any of the administration on anything, you know, because what happens is whether it's housing, whether it's the president, he knows that he has to speak out and say that he's concerned, and there's a problem. And so I'm not satisfied there. I'm

not satisfied with HUD because when you go around here looking out here, these people need homes. They need houses. And now we had a problem before where they had the certificates but they didn't have housing. Now, we have housing and no certificates. So, you know, it's been very difficult for the people who have AIDS and the virus to really, they need something to hold on. And the only thing they have is their dignity and their pride, and that's what they want. They want to be on their own just like you and I have a chance to do. And so we want to make sure that they can get that, and HUD is the only way we can do it through, the only organization.

QUESTION: Chairperson commissioner, can you give me your response to how you think the recommendations are being heard in Washington? Do you feel like they're falling on open ears?

CHAIRMAN OSBORN: No. We have been somewhat concerned that we haven't gotten a complete response to what we tried to make a very comprehensive report in late September, but we're working hard at that, and we'll continue to. I think stamina is one of the important ingredients in the political process, and we assure you we are going to exercise

stamina in trying to make those recommendations activated.

One of the major goals of the commission in this its third

year is to be sure that we have follow-through with the

recommendations that we've already made while we learn about

need for more things.

QUESTION: This is open to any member. We had a representative from the Bush administration sit here and say, well, we're bureaucrats, that's the way it is. And I think that's a frustration that everyone is facing. How do we get through this bureaucracy, get through in Boston when they said we can't go because that's against the law, we can't do this? How do we get over that hurdle and say, yeah, this is the law, but something is wrong here?

MR. KESSLER: Well, I think that the commission feels that what's been missing is a recognition of the emergency nature. This is an epidemic with a capital E, a capital P, a capital I, and so on. It's not something that we feel can be business as usual, and that's what we've had. We've had business as usual at many levels, not only on the housing issues, but on care issues, and on prevention issues. We've got to get past some of our hangups, our fears, and get down to prevention. It's not just — otherwise we'll never

have enough housing either. We just can't keep opening more housing. We need to do that, but the goal is to prevent the need for the housing in the first place by preventing new infections. And that means comprehensive health education. It means teaching Americans about condoms. It means getting along with the business of helping them understand how AIDS is transmitted and isn't.

That's part of, I think, the dilemma that you describe. It's bureaucracy at every level, and this epidemic doesn't yield well to bureaucracy. It's got a life of its own, and it continues to roll on, and it continues to envelop people, and, you know, when you look at regulations like those two red books over there, that's part of the problem is, you know, pages and pages of things that complicate the goodwill of individuals who want to build homes. There are equal documents that are thick like that on how to prevent this disease when we know it can actually be much more simple.

DR. ROGERS: I might just add -- excuse me -- another segment to that which is evident in our slow and rocky response. We not only have to teach people how AIDS is transmitted, we have to clearly indicate how it is not. It's perfectly clear that a lot of the fear, a lot of the dis-

crimination, a lot of stigma, relates to people who have a false view of the contagiousness of AIDS, and the discrimination issue still looms large for us.

MR. GOLDMAN: It is certainly significant that in the over two and a half years since the commission began in August of 1989, this is the first time, and I think it is memorable, that a representative of the department of HUD actually has appeared before the commission. The fact is that there will be some housing and some regulations that have previously been stalled, and I think in part as a result of these hearings that HUD has announced that regulations to allow that housing to go forward will be out soon.

So that there are, at least, some signs of progress and we have to measure what we do both by where we have been and how far we've come and getting at least some recognition, but also as these hearings have demonstrated, how much more there is to do and how much further there is to go.

QUESTION: Question to Commissioner Johnson, and the question is the thrust has been in Boston to educate young people. Will that continue in other cities and what one tactic do you see that has been successful in reaching the teenagers?

MR. JOHNSON: Well, I've spoken in already three different other cities. I'll be in New York next week speaking to young people. We're doing a show for Nickelodeon for kids; as you know, it's already a kids program. And coming out with different pamphlets and things like that. Like Dr. Rogers said, you know, prevention is the key. We don't have enough houses as it is right now for people who have AIDS already. So if we can prevent more and more, then, you know, as we try to deal with that problem and get a solution, if we can prevent this from happening it's going to be great.

We all bring different things to the table here. You're looking at a lot of experts which I am not, and I'm trying to become. They have been doing an excellent job of teaching me and letting me know what's going on. And the more I can get out in the community and talk to young people like I did yesterday, the better they're going to feel. See if you come with them, to them, speak from your heart, and tell them really what happened and what they ought not do, and make sure that what I did doesn't happen to them, then they'll listen and they will take it on. And they will hopefully either abstain from having sex or through their

parents, counselors and people like that, then they can also talk about safe sex and using condoms.

But you have to educate. See our problem right now is that the parents have to be educated. Until we can educate the parents, then it's going to be hard for me to just say to kids, well, do this, do that. Because really it's the parents' job to get behind their kids and let them know that this is also out here, AIDS and HIV. And that's where the success is going to come in, not through this committee, but through parents. And we can put out as much information as you want but until parents get involved, until they get behind their kids, it's going to still become a problem.

QUESTION: Dr. Osborn, the representative from HUD, you heard her say that a major program will be the Shelter Plus Care Program, but some of the aspects of that program, one, you have to be homeless to qualify for money or certificates from that program, and secondly, that all money presented by HUD to local care providers has to be matched by local care providers. Based on the testimony that you've heard in your travels, will these aspects be sufficient to help the problem?

at present the response is not adequate to meet even the present problem, and that problem is going to grow very rapidly as more and more people who have been infected for some time begin to see their living circumstances jeopardized. So without getting into the details of answer to your question, which we'll certainly be looking at closely, I think I can beg the question that everybody has heard the last couple of days, that whatever responses there are are inadequate to the present problem and likely to get more and more so.

And I think the comment that was made in the context of North Carolina trying to plan, that every time you think about planning, the pressure is so great to be doing, that's a very compelling comment to me because I think it underscores some of the things the commission has been trying to say. We need a national plan, we need to be, we are in a position perhaps to get out a little in front at least in terms of our thinking. People on the local firing lines are in an awfully tough spot right now, and nothing that I know of in the works is adequate even for the present.

QUESTION: Chairman Osborn, in the short time that

you and the commission have been here in Boston, have you found that we're doing anything any differently than anyone else? Is it good, bad, indifferent, and what can we still do?

CHAIRMAN OSBORN: Well, one of the reasons we came to Boston, as we've said a couple of times, is because you are doing some innovative things and some thoughtful things, trying to find new and creative ways to respond to a unique set of pressures along and in the context of a community trying to respond to less unique pressures, always the problems of poverty and the difficulties that our cities are in in general. So our very decision to come here was because we knew that there was some good work being done.

We have the privilege of working closely a lot with Commissioner Kessler, who in his real job -- these aren't our real jobs, as you know -- in his real job does extraordinary work and we'll be visiting a bit of that quite shortly.

We're going to have to close as a matter of fact so we can do that. But I think Boston is well blessed with some marvelous people trying to make this work, but handicapped in that effort by a lack of resources, shared widely. The most important resource is human resource and that Boston seems to have a lot of impressive supply. But we hope that we can be

helpful in some of our recommendations to help the innovation that's going on.

MR. BRANDT: We'll take two more questions.

QUESTION: Hi. This is for Commissioner Johnson.

This is a relatively new role for you to speak for people with HIV from adults to young children. There are some, however, who may feel that, if you look at the actions by some of your fellow basketball players when you were thinking of maybe perhaps going back to play that they were concerned about your going back, and I wonder if at a certain point in time your usefulness as a spokesperson against HIV may, you know, become a problem? I don't know if you feel you may be able to take advantage of your role right now by meeting the president, whatever, that you feel that there is some way that perhaps that will not be a problem?

MR. JOHNSON: Well, I had, just like we all have to be educated, I had to educate everybody in sports. And I was able to accomplish that at the All Star game. So that problem is already silenced. Their fear and all that is over with now. Meeting with the President, you know the only thing I did was take in what the commission has been trying to do for the last three years, I think it is. And I took in

the same numbers that they have presented to him and Congress and so I was just really being a mouthpiece for the commission, and expressing that he hasn't done enough, which he's already said, and that he hasn't come out and addressed our society that he cares and that there is a problem. And I will continue to do that.

My role, you know, it just continues to be the same. I mean we're all role players here on the commission. We all do different things, but when we're here on the commission, we come together to fight one common goal and one common battle. And just because I may have a higher profile than everybody else doesn't mean anything. I'm still fighting for the commission, and I will continue to do that.

DR. ROGERS: You're just taller than everybody else.

MR. JOHNSON: I'm just taller. That's all.

(Laughter.)

MR. BRANDT: Last question.

QUESTION: You've listened to gripping testimony.

You visited projects around the city over the last couple of days. Aside from what HUD can do, is there anything that stands out in your minds that you can, anything specific where you definitely see your focus?

CHAIRMAN OSBORN: Let me comment about your question. It's such a good question that I'm not going to answer it because one of the things that I think is always important, especially when we have a chance to do some site visits, when we're working as a commission, there's a certain amount of absorbing that's really important. And I wouldn't like to give a quick answer to your question because it would suggest even before we finish doing our site visits that we come to some conclusions.

I think we were aware that housing was at the heart of almost everybody's problem who has HIV and AIDS or is at least lurking in their worry list at the top. I think we've become much more aware of that even in the context of the kind of innovation I was talking about before. So it's been a powerful visit, as you suggested. I personally want to have a chance to absorb before I would answer the question quite quickly.

MR. JOHNSON: But people in general need to do more, and what people can really do is embrace those who have AIDS and HIV. That's what you can really do, and not put them off to the side or think they're different than anybody else. And then, secondly, you, the media can help because

you can educate people. See you have the power that we don't have, and that power is to explain the situation and to help young people understand that it's out here and it's out here in a big way, and parents and everybody else. You can help educate people, and that's what you can do.

(Whereupon, at 12:20 p.m., the press conference concluded.)