

**Remarks by Mario J. Pérez, Interim Director
Los Angeles County Office of AIDS Programs and Policy
World AIDS Day 2005
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Good morning; Bueno Dias:

I am privileged to join you this morning for the commemoration of World AIDS Day 2005. I am Mario Pérez, and I serve as the Interim Director of the Los Angeles County Office of AIDS Programs and Policy.

I thank all of you for finding the time to join us for this event and I thank you all in advance for your commitment to -- as this year's World AIDS Day theme commands -- Stop AIDS and Keep the Promise.

For all of us engaged in the struggle against HIV/AIDS today, and day after day, these are somber times. Nearly 25 years ago, our predecessors and perhaps some of you in this room, collectively pooled resources to understand, respond and fight a seemingly breaking disease that was first diagnosed on the Westside of town at UCLA Medical Center.

You will recall that it was there that Dr. Michael Gottlieb published his observation of a rare form of pneumonia in five gay men.

A full 24 years after those five initial diagnoses, we gather this morning to mourn the bewildering global loss of more than 40 million men, women, and children to HIV/AIDS.

Today, we also hope to collectively honor the memory of the nearly 29,000 family members, partners, friends, and neighbors who have succumbed to this disease in our own Los Angeles community.

Although we have dramatically increased our understanding of immunology, virology, behavioral science, cultural norms and social ills associated with either the manifestation or transmission of HIV disease, and although we have dramatically improved testing

technology, we have many more antiretroviral options and we have developed and evolved a comprehensive system of HIV/AIDS care; AIDS is not only still very much with us – but there are more people living with HIV/AIDS than ever, and more undiagnosed HIV infection than ever, here in Los Angeles.

Over the years, we have understood that with sufficient political and social will, vision, tenacity and resources we can turn this epidemic around. Our greatest gains in averting new HIV infections about a decade ago paralleled our growing investment in HIV prevention during that time. But, as the investment plateaued several years later so did the decline in averted infections. As the social will wanes, the apathy sets in. As the political will erodes, more lives are compromised.

With that in mind, that is why this year's World AIDS Day theme, "Stop AIDS, Keep the Promise," – which calls on all of us all, and especially our leaders in government, is so significant.

So what's the referenced Promise or Promises you ask?

In June 2001, Heads of State gathered for the United Nations Special Session on HIV/AIDS – the first meeting of its kind that recognized AIDS as a global problem demanding global action. From this meeting, 189 countries adopted the UN Declaration of Commitment on HIV/AIDS – a declaration that promised a stronger response to AIDS.

This promise was followed by a commitment to provide 3 million people living with HIV and AIDS, in resource limited countries, with life-prolonging antiretroviral treatment by the end of 2005. Achieving this benchmark would have put us on the road to universal access of anti-retroviral therapy. Despite the global campaigning, this strategy to extend life and prevent new HIV infections was begun, but the goal was not achieved.

But there is a new promise for Universal Access to antiretroviral therapy by 2010 – this time agreed to by the G8 this past July. This promise is joined by the Abuja Declaration made by the African Union. Those promises will be joined by about 250 more -- the ones all of us collectively make today.

Earmarking resources to support universal access to HIV care may be outside our reach, but we can promise other things. We can:

Promise To Visit or Volunteer at a local HIV/AIDS program, or;

Promise To Get Tested for HIV (and go back for the results), or;

Promise to Support Needle Exchange Programs, or

Promise To Fight Homophobia and HIV Stigma, or;

Promise To Not Use Crystal Methamphetamine, or;

Promise To Help Reauthorize A CARE Act that ensures equity, does not destabilize mature systems of care in America's HIV epicenters, offers funding at a level that also accounts for the half million American's that are HIV-positive and not in care or HIV-positive and don't know it, or;

If you are living with HIV,

Promise To Get in Care if You're Not in Care

Promise To Stay in Care Once You're There

Promise To Not Put Anyone At Risk

Promise to Call if You Need Help Disclosing Your Status

We can all promise to Hold Elected Officials and Government Representatives accountable – Yes, me too!

And finally, as HIV/AIDS continues to impact those at the fringe, African-Americans, Latinos, gay men, the uninsured, transgenders, the poor, and the undocumented -- Promise to See HIV/AIDS as a Social Justice Issue. And if you go that far with me, you might as well, Promise to Fight Social Injustice.

In October this year, we lost Rosa Parks, a woman who sparked a social justice campaign in our nation.

Fifty years ago today, almost to the hour, when Rosa Parks refused to move to the back of the bus, she set the nation on a quest for social justice. Many of us have been inspired by her example.

Today, we will release one golden balloon in a sea of red balloons in her honor.

Her sacrifice served as a lesson to show that we can each stand up and overcome odds with the appropriate dedication, resilience, and discipline.

At her burial, we celebrated valor, we honored the cause of freedom, and the continued commitment to social justice.

In our current fight against HIV and AIDS, we need our own “Rosa Parks moments,” We need to stand up and show our support for a re-invigorated, effective and sustained response to AIDS.

In 1990, Congress, with their strong and bipartisan support, worked towards the original enactment of the RYAN White CARE Act and had a Rosa Parks moment.

That singular action ended situations where hospital emergency rooms became the only source of HIV/AIDS care:

- It brought a more compassionate, more wide-scale and more cost-effective system of outpatient services to people living with HIV and AIDS.
- It enabled aggressive pediatric research and treatment programs that helped stem the tide of mother-to-child transmission of HIV.
- Suddenly, clinics that once had to choose between cutting basic primary care services and adding newly necessary case management, transportation and counseling services, were then able to provide both, and in effect, more comprehensive HIV/AIDS services.

That initial action helped win some battles in the war against HIV and AIDS, and turned what was once a virtual death sentence into a chronic, often manageable, disease.

But our struggle against HIV/AIDS is far from over:

- Nearly five million new cases of HIV infection occurred worldwide in 2005;
- The total number of HIV-positive people reached 40 million in 2005, the highest ever and making new HIV infections more and more likely.
- Today, more than 930,000 AIDS cases have been reported in the United States.
- Another one million people in the United States are living with either HIV or AIDS.
- The national infection rate in the U.S. still remains at a dangerous and unacceptable level of 40,000 annual infections.
- The AIDS epidemic is increasingly a scourge in poor communities that can least afford its care.

And in our own backyard,

- There are more than 57,000 people living with HIV or AIDS, a quarter of them don't know it and another quarter are not in care.
- There are roughly 2,000 people infected with HIV in our County each year.
- And, there are roughly 13,000 undiagnosed people living with HIV. Based on some quick math, it would cost roughly \$17.1 million dollars to diagnose half of the 13,000 undiagnosed in our County assuming a 1.5% positive testing rate and very cost efficient \$41 per test.

It should never be acceptable for us to reverse the hard earned gains against HIV/AIDS through either our leaders' inaction or their inadequate action.

We must not; we cannot accept anything less than demonstrable, sustained HIV/AIDS progress each year. That is, a higher proportion of people with HIV/AIDS in care, fewer new HIV infections each year, stronger HIV/AIDS care retention, improved adherence to antiretroviral therapy, higher average CD4 counts,

lower average viral loads, and how about less and less HIV/AIDS stigma and homophobia.

A promise today should serve to re-energize our leaders to support a renewed, effective, and sustained response to the AIDS epidemic. Our collective promises will serve to keep us compassionate as we serve, fair as we plan, resilient as we advocate and determined to thrive.

In the spirit of today and henceforth as we commit to Stopping AIDS and Keeping our Promises, I will leave you with words shared recently by Senator Clinton at the Funeral of Rosa Parks, "We all remember that moment on the bus. But let us think that that was not just an isolated moment to be honored and put on a shelf in the history books. We will dishonor her memory if we do not in our own ways have moments like that in our lives which add up to the continuing transformation of America and, may I add Los Angeles, on its journey to fulfill the promise that we made so long ago: one nation, one County, under God, where no person is left behind, overlooked and disrespected any longer.

Thank you. Gracias.