Grin and Cast It

You may have to hold your nose. But by voting for prez you'll help pick the next commander-in-chief of the world's war on AIDS. Doug Ireland reviews the candidates' records and rhetoric as you race for the polls.

November 1, 2000 By Doug Ireland

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*As members of the AIDS community prepare to cast their presidential ballots, they're not helped by the fact that the **mainstream media** have given **precious little coverage** to the **candidates' positions** on the epidemic. In fact, of the four contenders for the White House, only **two** have made any attempt at all to address the issues of most concern to those living with, or fighting against, HIV.*

Pat Buchanan, the ex-GOP ideologue who has taken over the Reform Party, has long been one of America's leading homo- and AIDS-phobes. In the early years of AIDS, when it was widely considered a "homosexual disease," Buchanan repeatedly blasted gays as the "pederast proletariat" who "have declared war upon nature, and now nature is exacting an awful retribution -- AIDS," a view he held well into the '90s. In his syndicated column, Pitchfork Pat constantly used AIDS to emphasize his antigay crusading, even writing that then-mayor of New York City Ed Koch and then-governor of New York Mario Cuomo should "be held personally responsible for the spread of the AIDS plague" unless they banned the Big Apple's annual Gay Pride parade. And while in this year's campaign he has toned down the rhetoric on AIDS, Buchanan stands by what he has written and said in the past. Fortunately, most voters now understand that Pat has brown shirts in his closet -- the Hitler-coddling sympathies in his last book (*A Republic, Not an Empire* [Regnery Publishing, Inc./Washington]) were so well publicized that even disgruntled blue-collar voters attracted to his phony far-right nationalist populism were turned off. He won't be much of a factor in the race.

The Republican candidate, Gov. George W. Bush, has been engaged in an election-year image makeover, moving to the rhetorical center in his quest for votes. Bush's April meeting with Log Cabin Republicans and other gays got plenty of publicity, but in his subsequent press statement, AIDS went unmentioned. In his only formal remarks on the epidemic, prepared by campaign staff earlier this year for the website Numedx (Nutrition, Medicine, Exercise and More for PWAs, *http://www.numedx.com*), Bush confined himself to generalities: "government investment to help find a cure for AIDS," encouraging "pharmaceutical companies currently conducting research and development on drugs to combat AIDS" through extension of tax credits, and the Ryan White CARE Act. But Bush also declared that he "opposes legalizing marijuana for medical purposes,"

and he has expressed skepticism about U.S. financial help to fight the African AIDS pandemic, arguing that “before we spend money . . . we must be careful that corrupt governments do not squander [it].”

Except for calling for more money for the failed “abstinence only” approach to sex education and for promising to grant more money to religious groups to do this work, Bush’s campaign website is also silent on AIDS. That silence mirrors his record as governor: Until he became a presidential candidate, Bush never uttered the word *AIDS* in public, even though during his time in office the state of Texas has risen to fourth in the number of recorded AIDS cases, moving up to just behind New York, California and Florida. Gov. Bush appointed as his health commissioner Reyn Archer, MD, who had no public health background and whose principal qualification was that he was acceptable to the Christian right. Commissioner Archer opposes condom use because “it’s not what God intended,” and was behind the Bush administration’s decision to order mandatory names reporting to the state health department, a decision widely criticized by AIDS groups for deterring people from HIV testing. Even as Texas infection rates soared, Bush’s spending on AIDS remained static through 1999, at a paltry $18 million (despite the record state budget surpluses of which he continually boasts). Given his track record in Texas, and since Bush has said that, if president, he would spend the bulk of the current trillion-dollar-plus projected U.S. budget on tax cuts, there is little hope that a Bush White House would produce any serious increase in AIDS spending.

Finally, throughout his political career, Bush has been beholden to the Christers, those political-religious primitives who dictated the Archer appointment. For example, under Bush, the Texas GOP adopted a platform plank to exclude people with infectious diseases from the Americans With Disabilities Act, which would have stripped it of protections for HIVers. In his current campaign, Bush has become more deeply indebted to the Jerry Falwells and Pat Robertsons who helped him defeat John McCain in the GOP primaries. And while these Christian Right leaders -- hungry to retake the White House from the Democrats -- are prepared to tolerate Bush’s rhetorical repositioning in order to win in November, when President Bush makes his appointments they’ll be calling in their chits to stack the federal agencies dealing with AIDS with conservatives.

Bush’s vice-presidential choice, Deadly Dick Cheney, had a scabrous AIDS-phobic record during his decade in the House. He voted against the AIDS Federal Policy Act of 1988 -- the first major bill to fund HIV testing and counseling -- which passed 367 to 13; he was one of only 37 House members to vote to cut funding for AIDS research that same year; he voted to ban federal funds for the District of Columbia’s HIV/AIDS insurance program. Cheney also voted repeatedly for amendments by John Birch Society chair Rep. Larry McDonald (D-GA) that would have prevented federal money being spent to fight antigay and anti-HIV discrimination, and has introduced his own amendments adding antigay rhetoric to other gay-hostile bills.

All this explains why a spot-check by *POZ* of 25 AIDS service organizations, advocates and activists turned up not a single one who could stomach the thought of casting a vote for Bush. For most sentient voters, only two possibilities are worth considering. One is a principled protest vote for Ralph Nader, the legendary consumer advocate who is running as the Green Party candidate,

hoping to put pressure on the Democrats from the left by starting the process of building an independent political movement outside the corporate-dominated major political parties. AIDS-wise, Nader's positions are nearly unexceptionable. He's the only candidate who advocates "universal national health care from the cradle through the nursing home with a single-payer system like Canada's," "realistic sex education" in the public schools; needle exchange; medical marijuana; federally imposed price restraints on AIDS meds developed with taxpayer dollars' and having the U.S. make or license the World Health Organization to produce drugs at the cheapest possible prices.

Most people in the AIDS community would applaud Nader's positions; the concern is about political strategy. Polls taken over the summer suggest that in some states -- Michigan, Wisconsin, Oregon and California, for example -- Nader could take enough votes away from Vice President Al Gore to tip the balance to Bush; indeed, shaking up the two-party endgame is one of Nader's goals. But not a single AIDS advocate *POZ* spoke with for this article said he or she intended to vote for the Green candidate. They were unfamiliar with Nader's AIDS-related proposals, in part because his underfunded campaign has only one-hundredth the money the major parties do, and in part because its focus on the domination of corporate power has eclipsed his forward-looking positions on everything else, including AIDS.

It is the fear of George W. Bush that appears to dominate the electoral cogitations of the overwhelming majority in the AIDS community, who seem trapped in the traditional definition of "pragmatism." Eugene Jackson, policy director of the National Association of People with AIDS, says he's voting for Gore because "a Democratic administration will always be more sensitive to average Americans than a Republican one," adding, "Clinton/Gore have provided more services to people living with HIV/AIDS." Larry Kessler, executive director of the AIDS Action Committee of Boston, says he's probably voting for Gore, "but I'm nervous about him. We need a leader with real convictions, born of a strong central core, and I don't know where Gore's center is. He's not much better than Clinton, but Bush scares me." Even an AIDS radical like the indefatigable writer and activist Larry Kramer says, "The gap between what we need [for AIDS] and what we're likely to get is separated by such a huge chasm that it's almost silly to ponder it." He adds: "Neither one of those assholes [Bush and Gore] are going to give us dipshit. Clinton has been all talk and no action . . . but I just worry about the Supreme Court, so I suppose that'll get my Gore vote."

Gore's website gives him credit for every administration action on AIDS, as well as for many congressional initiatives (just as he did himself for everything from the Internet to *Love Story*). While it is true that discretionary domestic spending on AIDS through the Health and Human Services Department has increased from $2.1 billion in fiscal year 1993 to $8.5 billion in 2000 (a significant increase, even when adjusted for inflation), it's also true that Congress appropriated more than the administration asked for in each of those years. And while Gore and the administration have been crowing about the gargantuan budget surpluses, their fiscal 2001 budget requests provide for only modest increases in AIDS spending: a paltry $125 million for the Ryan White program (an 8 percent increase) and a $105 million increase for HIV-related research at the National Institutes of Health (a 5.2 percent increase).

Naturally, Gore and his website neglect to mention the long list of deplorable administration betrayals: Clinton's failure to implement the sensible recommendations of President Bush's AIDS advisory council, let alone of his own; his commitment to, and militarization of, the failed war on drugs, with its emphasis on punishment and interdiction; his immovable opposition to needle exchange; persecution of doctors who prescribe medical marijuana; emphasis on abstinence-only sex ed in the schools; the ban on immigration by HIVers. This list is not complete. Gore was the administration's point man during its years of political and economic blackmail to prevent poor countries from making cheap, generic versions of AIDS drugs (only partially ended this year in response to highly publicized protests), and among his campaign advisors is a phalanx of pharmaceutical company lobbyists.

Connecticut Sen. Joe Lieberman, Gore's running mate, also has a decidedly mixed record. While he has consistently voted for Ryan White funding and is a cosponsor of the Employment Non-Discrimination Act (ENDA), his Senate career has been strewn with PWA-hostile votes. He has voted to ban immigration by HIVers, to criminalize HIV transmission in a variety of circumstances, and has flip-flopped on the issue of needle exchange, voting against it in the past three years. Lieberman has also voted repeatedly for Jesse Helms-inspired amendments (known as "no promo homo") barring federal funds from being used to "promote or encourage" the acceptance of homosexuality (inhibiting realistic safe-sex ed), voted against domestic-partner health benefits for the District of Columbia and voted for the Defense of Marriage Act. Lieberman rakes in cash from the pharmaceutical and insurance industries -- no friends of PWAs -- and has voted as their loyal serf. Moreover, his partnership with former Reagan education secretary Bill Bennett in censorious moralizing against sex in the arts and media feeds the anti-gay crusading of the Christian Right's media monitors.

Perhaps the Clinton administration's most glaring failure has been its refusal to come up with a comprehensive plan to cover the 79 million Americans who currently have no health insurance and to lower costs for those who do. The failed 1994 reform cooked up under Hillary Rodham Clinton would have put America's health into the hands of the scandal-plagued HMO industry, which has been rife with abuses of PWAs. On this issue, Gore, so far, is not doing much better. As Harvard University public health expert David Himmelstein, MD, puts it, "There's virtually no difference between the Bush and Gore health plans for people with AIDS." He adds: "Gore's plan would give only modest additional subsidies for women and children through private insurance. Bush would give slightly more to the insurance companies and provide less to those not now covered. Neither would cover a substantial number of the uninsured, and both would enrich the insurance industry."

Most of the activists *POZ* spoke to agree with Mike Gifford, deputy executive director of the AIDS Resource Center of Wisconsin, that the lack of universal health insurance has meant "a lack of specialty care for PWAs." Gifford says, "Here in Wisconsin, up to 20 percent of people with HIV are not able to access life-prolonging meds on a regular basis. We need to go beyond the patchwork approach of Medicaid waivers, which is not doing the whole job." Or as Jim Jones, the policy director for Sen. John Kerry (D-MA) and one of the Hill's most effective staffers on AIDS, insists: "The AIDS community needs to think in a bigger context in making its demands -- universal health care, insurance reform, affordable housing in general -- so our advocates are not constantly

playing catch-up."

What's needed in this election year to make AIDS a part of the political discourse is a systematic approach to the epidemic embodied in a comprehensive platform that can be used to hold *all* candidates' feet to the fire. National Organizations Responding to AIDS, the coalition convened by AIDS Action, earlier this year put together a legislative platform for 2001 that has been endorsed by 59 AIDS groups. While this detailed document is useful, it is rather lacking in what Bush *père* used to call "the vision thing," and mainly proposes tinkering with existing programs and providing an incremental increase in their budgets. In politics, one should always demand a lot more than one expects to get -- that's how change is made. Most *POZ* interviewees who say they're voting for Gore agree that more pressure is needed on a broader, more far-reaching set of demands. For instance, neither Gore nor Bush has said anything about HIV criminalization, housing for people with AIDS, or maintaining AIDS Drug Assistance Programs.

Among the more interesting responses is that of author and sex educator Daniel Wolfe, formerly of New York City's Gay Men's Health Crisis, who emphasizes the need for "an honest and complete federal study of sexuality and sex practices" shorn of pandering to the religion-driven moralizing that characterizes the inadequate surveys that motor public policy now. "We're 20 years into the epidemic and we're all still operating out of ignorance," says Wolfe. He also proposes that "pharmaceutical companies and all health care providers should be forced to open their books to allow public discussion and scrutiny of their profit ratios. When drug companies can cut drug prices by 95 percent in Africa and still make money, it raises the question of why we here are still having to pay such exorbitant amounts."

Since the federal government currently has AIDS programs scattered throughout dozens of different departments, agencies and institutes, Mario Cooper, founder of the African-American and Latino group Leading for Life, concludes that there's a need for a single interdepartmental authority that could coordinate and evaluate these programs and hold those who run them accountable -- and that this "should include not just AIDS but all sexually transmitted diseases." And virtually everyone *POZ* interviewed volunteered that, as Wisconsin's Gifford put it, "at long last the federal government should put science before politics and fund needle exchange and clean needles on demand -- this would be an investment in the science of saving lives."

On the international front, the Treatment Action Group this summer issued a meticulous report, "Exploring the American Response to the Global AIDS Pandemic" (see www.treatmentactiongroup.org/), which pointed out the confusion in U.S. international efforts on HIV: The U.S. government makes no straightforward contributions to foreign governments but divides the dollars, "among direct overseas programs of 12 divisions of the U.S. government, contracts and grants to 48 universities or NGOs, all but three of which are located in the U.S., and . . . support for the United Nations." The report also calls America "the meanest donor of all," since "many rich countries give substantially more in terms of their own population and GNP than does the U.S."

For American Foundation for AIDS Research Chair Mathilde Krim, PhD, the single most important

international step to fight AIDS would be “to forgive the debts of poor countries -- around $100 billion -- in nearly all of which AIDS is a terrible problem. And the U.S. should promptly put together the $3 billion that UNAIDS has estimated is the minimum needed to fight AIDS in sub-Saharan Africa.” Although the Clinton administration announced this summer that the Export-Import Bank will loan $1 billion to these AIDS-afflicted nations, Krim says: “This merely adds a new layer of debt. Instead, it should be a gift.” (South Africa, Namibia and other countries have refused the loan.) AIDS Action Committee’s Kessler points out that “there’s never been an international summit of heads of state on the AIDS crisis. The president is the only one who can get the world to sit down with him at a table. The U.S. should convene a summit with an AIDS-only agenda.” Although President Clinton put sexually transmitted diseases on the agenda of the July G8 summit in Tokyo at the last minute, the meeting took no concrete action on either AIDS or debt relief and was little more than a PR photo op for domestic political consumption by the leaders’ constituents. (This pointless show cost $70 million to put on -- enough to cancel the debt of eight African nations.) An AIDS-only summit would leave participants no wiggle room.

This list of suggestions is hardly exhaustive, but unless far-seeing demands on this scale are made on our governing elites now, you can bet there won’t be much action -- no matter who wins in November. And whether you’re voting for Ambiguous Al or Righteous Ralph -- the only real choices this fall for anyone who cares about AIDS -- Election Day should mark not the end of your fight, but another beginning.

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