Meet Eight New Members of the Presidential Advisory Council on HIV/AIDS

Watch PACHA's recent virtual meeting, which covered PrEP, the U.S. plan to end the HIV epidemic and new council members and cochairs

August 9, 2021 By Trent Straube

Last week's virtual meeting of the President's Advisory Council on HIV/AIDS (PACHA) marked the appointment of eight new members. One of those new members, Marlene McNeese, the assistant director of the Houston Health Department, was also announced as a cochair and will serve in that role alongside fellow cochair John Wiesman, DrPH, MPH, a professor in the Department of Health Policy and Management at the University of North Carolina–Chapel Hill.

Also during the August 3 and 4 sessions of the council's 71st meeting, PACHA members heard HIV reports from federal leaders, discussed the national initiative "Ending the HIV Epidemic: A Plan for America" and focused on federal and local implementation of pre-exposure prophylaxis (PrEP), the daily tablet that is highly effective at keeping HIV-negative people from contracting HIV.

Both sessions of the meeting are posted on YouTube via the Department of Health and Human Services (HHS). Part 1 of the first day's session is embedded below. The video that includes the swearing in of new members is posted at the top of this article.

As its name suggests, PACHA's mission is to give HIV-related recommendations, information and advice to HHS Secretary Xavier Becerra; serving directly under him as assistant secretary of health is Rachel Levine, MD, a transgender woman who participated in the PACHA meetings. As many as 25 people— including the cochairs—can be members of PACHA. Members are chosen by the HHS secretary and serve for overlapping terms of up to four years.

According to a blog post on HIV.gov, the eight new members bring a variety of experience and perspectives and represent six different states. The new members are:

- Marlene McNeese, assistant director, Houston Health Department

- Guillermo Chacón, president, Latino Commission on AIDS, and founder, Hispanic Health Network
- Tori Cooper, MPH, director of community engagement for the Transgender Justice Initiative, Human Rights Campaign
- Raniyah Copeland, MPH, president and CEO, Black AIDS Institute
- Leo Moore, MD, MSHPM, medical director for clinic services, Los Angeles County Department of Public Health
- Kayla Quimbley, National Youth HIV and AIDS Awareness Day ambassador, Advocates for Youth
- Adrian Shanker, founder and executive director, Bradbury-Sullivan LGBT Community Center in Pennsylvania
- Darrell P. Wheeler, PhD, MPH, MSW, provost and senior vice president for academic affairs, Iona College, in New Rochelle, New York

In addition, according to the blog post, three PACHA members whose terms had expired were appointed for another two-year term: Gregg Alton, JD, Rafaelé Narváez and Michael Saag, MD.

On a separate PACHA page, HIV.gov offers bios of all PACHA members and staff. According to that list, there are now 20 members plus two cochairs, one liaison and two staff members.

President Bill Clinton established PACHA by executive order 12963 in June 1995. The council continued to advise on federal policy regarding the HIV epidemic until President Trump took office in 2016. A year after he was sworn in, six PACHA members resigned in protest of the Trump administration; in December 2017, he fired the remaining members via a FedEx letter. A year later, Alex Azar, then the health secretary, named two new cochairs but no new members, and the council began meeting again in 2019.

#ICYMI: During today's meeting of the Presidential

Advisory Council on HIV/AIDS (#PACHA), 8 new members were appointed to the Council, including a new co-chair. Learn more about them! https://t.co/racyQOhrMD #EndHIVEpidemic

— HIV.gov (@HIVGov) August 4, 2021

In its meeting last week, PACHA also focused on both PrEP and the “Ending the HIV Epidemic” initiative. Here’s background on both of those topics.

Launched in 2019, “Ending the HIV Epidemic: A Plan for America” is a 10-year federal initiative that aims to lower new HIV rates 75% by 2025 and 90% by 2030. This would amount to fewer than 3,000 HIV cases a year. “Reducing new infections to this level, according to the initiative, “would essentially mean that HIV transmissions would be rare and meet the definition of ending the epidemic.” The strategy for reaching these benchmarks involves investing federal funding and resources in 57 key jurisdictions. This translates to the 48 counties plus Washington, DC, and San Juan, Puerto Rico, that together account for 50% of new HIV cases plus seven rural states with high HIV burdens: Alabama, Arkansas, Kentucky, Mississippi, Missouri, Oklahoma and South Carolina.

The 57 key areas highlighted in “Ending the HIV Epidemic: A Plan for America”Courtesy of HIV.GOV

In July, the Centers for Disease Control and Prevention announced $117 million in grants to local and state efforts to support the “Ending the HIV Epidemic” plan. How close is your state to ending its HIV epidemic according to the national plan’s criteria? Find out with the interactive AHEAD dashboard. To learn more about “Ending the HIV Epidemic,” read an overview at HIV.gov and visit the official webpage at HRSA.org. For a related POZ article, see “Plans to End the HIV Epidemic at Home and Abroad.”

HIV prevention, notably via the use of PrEP, is one of the main pillars of the U.S. HIV plan. Scientists estimate PrEP to be about 99% effective among men who have sex with men and 88% to 90% among heterosexual men and women (though researchers believe the latter number is likely higher). For more details, see “How Well Do U=U and PrEP Work? The CDC Updates Its Answers.”

In the United States, PrEP is available as the daily tablets Truvada and Descovy; both are manufactured by Gilead Sciences and consist of two meds. A generic version of Truvada last fall. To learn more, see “Cheaper Generic PrEP Now Available in the United States,” “What’s the Difference Between Truvada and Descovy for PrEP?” and “Prevention: Generic Truvada.” For more general information, see the POZ Basics on HIV Prevention.

The availability of lower-cost generics might actually be bad news for HIV prevention efforts because of the federal drug pricing law 340B. For background, see “Generic PrEP Highlight How Even Low-Cost HIV Care Relies on High Drug Prices” and “PrEP Programs Face Devastating Loss of Funding for HIV Prevention.”

Did you know that a national program has been set up to deliver HIV prevention via mail at no cost? To learn more, read “‘Ready, Set, PrEP’ Offers HIV Prevention Meds by Mail.”

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