Dear Harold

An open letter to the next director of the White House Office of National AIDS Policy.

June 8, 2021 By Paul Kawata

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Mr. Harold Phillips

The White House

Washington, DC 20500

Dear Harold,

Congratulations on your well-deserved selection as the next Director of the White House Office of National AIDS Policy. Please thank the President and Dr. Rice for including community in this important decision. You have NMAC's support, and we look forward to working with the administration to end the HIV epidemic.

Your life is about to change. As a Black Gay Man leading our nation's efforts to end the HIV epidemic, you stand on the shoulders of Reggie Williams, Calu Lester, Alvin Ailey, Tim Offutt, Craig Harris, Max Robinson, Ron Simmons, Willli Smith, Sylvester, and many other Black Gay heroes we lost to HIV. While most people know you from your work at HRSA-HAB, I get to brag that you got your start at NMAC.

With your new appointment, community needs you to deliver. There are too many people living with HIV who have fallen out of care. There are too many people who need PrEP, but we can't seem to reach them. While the solution to ending the HIV epidemic might be biomedical, it is not simple. That's the problem with the previous administration's strategy. They believed you just needed to make medications available. The reality is so much more complex and nuanced.

COVID has pressed pause on everyone's work but, as America reopens, it's time to get back to planning to end HIV. While we appreciate the President's commitment for more HIV funds, we also need to make sure the funding goes to where it is most needed. I believe the Biden-Harris administration is looking for ways to bring racial equity to government. HIV sits at the intersection of that search. What does it mean to bring racial equity to our fight to end the HIV epidemic in America? How will HHS, HUD, CDC, HRSA, SAMHSA, CMS, NIH, OAR, NIAID, and other federal agencies be required to carry out this White House mandate?

With your new appointment, community needs you to fight. While we are very happy that you got this job, it only works if you fight for us. As a member of the White House's Domestic Policy Council, we need you to bring the fight to end HIV to them. Too many people think the epidemic is over. Your voice represents more than you, it is the voice of the multitude of communities fighting HIV.

It is time to reconstitute the President's Advisory Council on HIV/AIDS (PACHA), and it needs to be real. Your office needs the support of a Council that embraces the White House's commitment to racial equity across government, a Council that understands it's here to support you and the President to end the HIV epidemic.

The HIV community is extremely diverse and you can't please everyone. There will be times when community may disagree with the administration. Please do not take critiques personally. As your job is to stand-up for the President, our job is to stand for community. I believe there will be lots of agreement, as the White House has shown their commitment to healing America.

As you prioritize tasks, we look forward to the Biden-Harris plan to end the HIV epidemic. There is no need for a completely new process; however, the previous plan did not directly address race and its impact on ending the epidemic. As I know you understand, addressing the racial divide in HIV is core to ending the epidemic. For too long we've danced around race and racism and focused on things like the social determinates of health. The color of your skin should never be a factor in your health outcomes, yet for too many diseases this is true. HIV can be the example for how to use race to address too many health disparities in America.

As you know, the population of people living with HIV is aging. While this is wonderful, it was not something fully anticipated when the original Ryan White program was envisioned. Now we need to make sure the HIV service mix includes specialty care like gerontology. While PLWH are living longer, they also face multiple challenges from aging and HIV. The Biden-Harris administration needs to create and implement a comprehensive "standard of HIV care" for this growing community.

The White House needs to tell the Centers for Disease Control and Prevention (CDC) to stop classifying people with transgender experience with gay men in their HIV epidemiology profiles. Justice for the transgender community starts by having CDC understand the difference between gender identity vs. sexual orientation. Too many administrations have promised to make this change, yet nothing ever happens. Ideally, we hope Assistant Secretary for Health Dr. Rachael Levine leads this charge.

The Biden-Harris plan should take a systemic approach to ending infectious diseases in America. It's not enough to focus on HIV. Now is the time to also address Sexually Transmitted Diseases (STDs) and Hepatitis. You can end three more epidemics that have challenged America for too long. Our solutions should focus on the whole community and not any one disease. As COVID has shown us, there is a great need for comprehensive health infrastructures in too many communities in America. The plan to end HIV should serve as the foundation for bringing healthcare to

communities that are too often overlooked. As we used the HIV vaccine infrastructure to test the efficacy of COVID vaccines, now we can use the HIV prevention and care infrastructure to bring long term health to communities in need.

Harold, I am so proud of what you accomplished. Now is the time to take those years of experience working at NMAC and HRSA-HAB to build the plan that you know is needed to end the epidemics. NMAC stands in solidarity with you and the administration. We will see you at the Opening Plenary for the 2021 United States Conference on HIV/AIDS, so please bring your boss.

Yours in the struggle,

Paul Kawata

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