

The Great Work Begins

Are you ready to stand up, speak out and be part of the solution?

January 24, 2017 By [Paul Kawata](#)



At the close of [Part One of Angels in America](#), the angel descends and proclaims, “the great work begins.” Those words from [Tony Kushner](#) ring as true today as when they were written in 1993. As America inaugurates its 45th president, the HIV movement finds itself in another moment of great transition. Like everything in this fight, nothing is easy. We have the science that can build roadmaps to end the epidemic. Unfortunately, it is at the exact same time we are in the fight of our lives for healthcare, health insurance, medications and much needed social services.

HIV prevention is about more than condoms; thanks to treatment as prevention ([TasP](#)) and pre-exposure prophylaxis ([PrEP](#)), it now includes healthcare and medication. How can we build the case for continued if not increased investment in our fight to end HIV? The lives of 1.2 million Americans living with HIV depends on our ability to insure the continuity of services and access to healthcare and medications.

Our movement is dependent on funding government. We must work with Congress and the new administration to insure support for these essential services. We may be disappointed by the election results, but that does not stop our responsibility to fight to end the epidemic. There is no clear pathway for working with President Trump and given our movement’s diversity, I am sure there will be multiple strategies. NMAC will use a variety of tactics to fight. Some will be obvious; many will happen behind the scenes. Our work requires inside and outside game plans. It is difficult to put together specifics until we hear details from the new administration. Until we understand what repeal and replace means, our maneuvering is about getting ready.

NMAC Will Always Lead With Race

We are not sitting on the sidelines; we are actively working with HIV colleagues and other intersecting movements. We took the time between the election and the inauguration to look at our movement’s capacity and to work with colleagues to better prepare our agencies for working with President Trump. We’ve reached out to other intersecting movements to understand our

partnership to fight for health equity and racial justice. Sometimes the best work happens with no fingerprints.



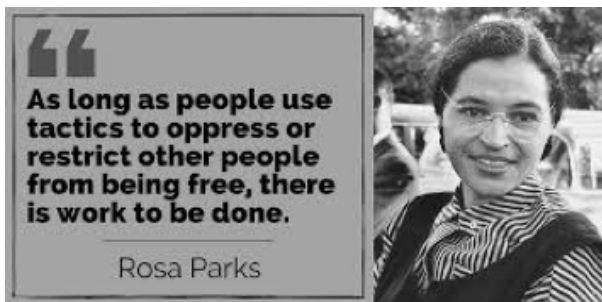
At the end of the day, our priority must always be people living with HIV. Our job is to fight for all communities to have access to much-needed healthcare, social services, and medications. Are you ready?

I first wrote those words in 2008 as Congress looked to implement healthcare reform and the Affordable Care Act. I challenged you to become a federally qualified health center (FQHC). Those who built FQHCs found great success during the Obama administration. They expanded their services, budgets, and staffs. They transformed from small AIDS service organizations ([ASOs](#)) into large healthcare providers with multiple services to the diverse communities in their neighborhoods.

In 2017, as Congress looks to repeal healthcare reform, I challenge you to use this moment to organize and become a political force within your community. We cannot afford to go back to the world where large segments of people living with HIV do not have access to what they need to stay alive.

Are you ready to stand up, speak out and be part of the solution?

Our movement's dependence on government funding means that we will always have to work with the system. Our challenge is to be an active voice in the decisions that impact our communities. That's how HIV has always succeeded. We fought back.



Fighting back may not be the same as it was in the 80's. Our movement is now over 30 years old, HIV is not in the same place as AIDS was back then. In 1982 we fought for access to healthcare because too many doctors and hospitals refused to provide services for our friends and lovers. In 2017 we must fight for health insurance because PLWH needs it to pay for services and medications. The Ryan White Care Act is now more important than ever. One of our primary jobs is to protect this important piece of legislation. At the same time, thanks to the science of TasP and PrEP, we may be able to create roadmaps for ending the epidemic. We are so close and that is why we must fight for continued if not expanded funding of CDC's HIV portfolio. As we have learned, housing = HIV prevention. [Housing for People Living with AIDS \(HOPWA\)](#) is essential to our HIV care and prevention agenda. In other words, one

of our primary jobs is to protect the HIV portfolio of the federal budget.



Are you ready to fight back? Are you ready to be a political force at both the local and national levels? Fighting back is in our DNA. For me, it started when a funeral home refused to cremate a friend. I need you to build political capital. To expand bridges that work both within and outside of the system. To not wait for someone else to save us, but to save ourselves. Some of that work will happen in Washington, but a larger portion happens back in the home districts of members of Congress and with state and local elected officials.

This year's United States Conference on AIDS is in Washington, D.C. Please come early on September 6th, 2017 to attend USCA's HIV Action Day. The [Federal AIDS Policy Partnership \(FAPP\)](#) is the primary lead in putting HIV Action Day together.



If you can't join us on those dates, please attend [AIDS Watch](#) on March 27th. Now more than ever we need your voices on the Hill.

Yours in the struggle,

A handwritten signature in black ink, appearing to read "Paul A. Kawata".

[Paul A. Kawata](#)

Executive Director

