



DATE: January 7, 2009  
 TO: Parag Mehta, Public Liaison for LGBT Americans  
 FROM: Lance Toma, LCSW, Executive Director, A&PI Wellness Center  
 RE: Comments in response to the National HIV/AIDS Conference Call with Obama-Biden Transition Team, January 6, 2009

*I respectfully submit these comments. Due to the many participants who requested to speak, I was not able to articulate these remarks on the conference call.*

As executive director of a community-based organization that provides a comprehensive range of direct HIV/AIDS services for Asians & Pacific Islanders (A&PI), as well as capacity building services for A&PI communities, organizations, and health departments throughout the US and the Pacific, I applaud the President-Elect's vision of increasing HIV testing initiatives in minority communities. I applaud the explicit commitment to evidence-based approaches to HIV/AIDS. I am thrilled beyond belief that our national HIV/AIDS policy is being developed from the ground-up -- that there is room and space being made and dialogue taking place about HIV/AIDS, and particularly the epidemic in communities of color.

I want to emphasize how important it is to develop a holistic approach to fighting the epidemic, that social determinants are taken into consideration, and that HIV/AIDS is viewed from all perspectives, inclusive of health and beyond.

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With 65% of new AIDS diagnoses in people of color and two-thirds of new HIV infections in people of color, minority HIV/AIDS community-based organizations must be adequately funded and resourced to respond and intervene. These organizations exist, and they are doing great work while barely surviving financially. The Minority AIDS Initiative must be fully funded at \$610 million to begin to make the impact necessary right now. With little to no increase in overall HIV/AIDS funding for the past many years, the safety net of HIV prevention, testing, treatment and care programs are falling apart. The Minority AIDS Initiative can enable immediate investment in communities and organizations to stop the epidemic in its tracks.

I also want to make sure to highlight the need to collect better data and surveillance on HIV/AIDS in communities of color. This deficiency is reeking havoc on our communities, in places such as Puerto Rico, the Virgin Islands, the Pacific Island jurisdictions and territories, and Native American reservations.

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Many states do not collect A&PI-specific data and A&PIs continue to be lumped into the "other" category even though this is a requirement of OMB. This dearth of accurate data makes it difficult to understand the true epidemic occurring in the A&PI community and is unacceptable. Most recently the CDC released data that showed A&PIs having the only statistically significant increase in HIV/AIDS diagnoses among all racial/ethnic groups. Additionally, from 2001 to 2006, the largest proportionate increase (255.6%) in HIV/AIDS diagnoses among all MSM groups was among A&PI MSM aged 13-24 years. This data is only from 33 states not including the most A&PI populated ones such as California and New York. We must know, count, and track the epidemic in A&PI communities and all communities of color more systematically and accurately.

*Executive Director*  
 Lance Toma, LCSW

I thank you for your commitment to responding to the epidemic of HIV/AIDS. And, I thank you for this opportunity to share my thoughts. A&PI Wellness Center is one of nine leading national minority HIV/AIDS organizations who have spearheaded the document, *Fighting AIDS in Communities of Color*. We look forward to continuing to engage with you, to participating actively throughout all processes, and to supporting leadership of people of color at all levels of the President-Elect's administration.