

Customer:

Please tear off this stub and keep it for reference when depositing prepaid Express Mail Next Day Service shipments in Express Mail collection boxes or when giving prepaid Express Mail Next Day Service shipments to Postal Service personnel. Affix the remaining label set to your shipment. **DO NOT REMOVE THE CUSTOMER COPY.** It will be completed and mailed back to you. For reference, write on this stub the date that the shipment was mailed and initial the stub (if deposited in an Express Mail collection box). Deadlines for deposit for next day delivery differ according to the destination. To ensure next day delivery consult your local Express Mail Directory.

PRIVACY ACT: Your name and address may be used by the Postal Service to send you updated information about Express Mail service. You may request removal of your name and address from our mailing list by writing Assistant Postmaster General, Marketing Department, USPS, Washington, DC 20260-6300. Authority: 39 U.S.C. 401, 403, 404.

Additional information on Express Mail Service can be obtained at any post office or by writing USPS Headquarters, Washington, DC 20260-6334.

6/28/91

KSS

Date Mailed:

Initials:

claim & passport

Service Guarantee:

If this shipment is mailed at designated USPS Express Mail service facilities on or before the specified deposit time for overnight delivery to the addressee, it will be delivered to the addressee or agent before noon or 3:00 p.m. the next day. Upon application by the mailer, USPS will refund the postage for this shipment if it is not delivered before noon or 3:00 p.m. of the next day, unless delivery was attempted, but could not be made, or because this shipment was delayed by strike or work stoppage. Consult your local Express Mail directory for morning and afternoon delivery areas. See The Domestic Mail Manual, Chapter 2, for details. Signature of the addressee, addressee's agent, or delivery employee is required upon delivery.

Express Mail International Service mailings are not covered by this service guarantee. See the International Mail Manual for details.

Insurance Coverage:

(See section 295 of the Domestic Mail Manual for exclusions of coverage, such as negotiable items and consequential loss.)

(1) *Merchandise Insurance.* Merchandise is insured against loss, damage or rifling up to a maximum of \$500. Indemnity will not be paid for spoilage of perishable items.

(2) *Document Reconstruction Insurance.* Non-negotiable documents are insured against loss, damage or rifling up to \$50,000 per piece subject to a limit of \$500,000 per occurrence.

(3) The maximum indemnity payable for negotiable items, cash, currency, or bullion is \$15.

Claims:

- Claims for delay, loss, damage or rifling must be made within 90 days. Claim forms may be obtained and filed at any post office.
- The Customer Receipt must be presented when a claim is filed.

FAX

TO:

Richard Johnson

UNIT:

US Conference of Mayors

FAX NUMBER:

(202) 293-2352

PHONE NUMBER:

DATE:

6/26/91

COMMENTS:

Would you please send me a copy of the Final Conference of Mayors AIDS Task Force recommendations. Thank you.

INCLUDING THIS COVER SHEET, THIS TRANSMISSION

CONSISTS OF 1 PAGES

FROM:

Donald Francis, M.D.

DEPARTMENT OF HEALTH SERVICES

OFFICE OF AIDS

2151 BERKELEY WAY, ROOM 715

FAX NUMBER : (415) 540-3233 ATSS 8-571-3233

PHONE NUMBER: (415) 540-2522 ATSS 8-571-2522

FAX

FAX

TO:

Elizabeth DuVerlie

UNIT:

Johns Hopkins

FAX NUMBER:

(301) 659-6266

PHONE NUMBER:

(301) 659-6317

DATE:

6/25/91

COMMENTS:

CV and Data Sheet

INCLUDING THIS COVER SHEET, THIS TRANSMISSION

CONSISTS OF 11 PAGES

FROM:

Donald Francis, M.D.

DEPARTMENT OF HEALTH SERVICES

OFFICE OF AIDS

2151 BERKELEY WAY, ROOM 715

FAX NUMBER : (415) 540-3233 ATSS 8-571-3233

PHONE NUMBER: (415) 540-2522 ATSS 8-571-2522

FAX

CONTRACTOR EMPLOYEE BIOGRAPHICAL DATA SHEET

(SEE PRIVACY ACT STATEMENT ON REVERSE)

INSTRUCTIONS:

Submit in triplicate to
contracting officer.
See reverse for Contractor
Certification.

1. Name (Last, First, Middle) ☒ Mr. ☐ Mrs. ☐ Miss ☐ Ms. Francis, Donald P.		2. Contractor's Name	
3. Address (include ZIP Code) [REDACTED]		4. Contract No.	5. Position Under Contract
9. Telephone Number (include area code)		6. Proposed Salary	7. Country of Assignment
10. Marital Status ☒ Married ☐ Single ☐ Other (specify)		8. Duration of Assignment	
12. Date of Birth 10/24/42		11. Names and Ages of Dependents to Accompany Individual (if applicable)	
13. Place of Birth Los Angeles, CA			
14. Citizenship (if non-U.S. citizen, give visa status) USA			

15. EDUCATION (include all secondary, business college or university training)

NAME AND LOCATION OF INSTITUTION	MAJOR SUBJECTS	Credits Completed		Type of Degree	Date of Degree
		Semester Hours	Quarter Hours		
Northwestern University School of Medicine	Medicine			M.D.	1968
Harvard University, School of Public Health	Microbiology/Virology			D.Sc.	1979

16. EMPLOYMENT HISTORY

1. Give last three (3) years. Continue on reverse to list all employment related to duties of proposed assignment.

2. Salary definition - basic periodic payment for services rendered.

Exclude bonuses, profit-sharing arrangements, commissions, consultant fees, extra or overtime work payments, overseas differential, or quarters, cost of living or dependent education allowances.

POSITION TITLE	EMPLOYER'S NAME AND ADDRESS	Dates of Employment (Mo., Yr.)		Salary	
		From	To	Dollars	Per.
CDC Regional AIDS Consultant	Centers for Disease Control Atlanta, GA	1971	1991		

17. SPECIFIC CONSULTANT SERVICES (give last three (3) years)

SERVICE PERFORMED	EMPLOYER'S NAME AND ADDRESS	Dates of Employment (Mo., Day)		DAILY RATE
		From	To	

18. LANGUAGE PROFICIENCY

LANGUAGE	Speaking			Reading			Writing			Understanding		
	Fair	Good	Excl.	Fair	Good	Excl.	Fair	Good	Excl.	Fair	Good	Excl.

19. Special Qualifications (honors, professional societies, special licenses, publications, research, special skills, and relevant education not previously mentioned; use reverse side of form, if necessary)

20. CERTIFICATION: To the best of my knowledge, the above facts as stated are true and correct.

Signature of Employee

Date

AID 1420-17 (3-80)

6/25/91

PHONE MEMO

TO

Steve Roger

DATE

06/25/91

TIME

11.50

AM

PM

FROM

Elizabeth Duller/H²

AREA CODE

301

NO.

659-6317

OF

EXT.

MESSAGE

SIGNED

G

PHONED

☒CALL
BACK☒RETURNED
CALL☐WANTS TO
SEE YOU☐WILL CALL
AGAIN☐

WAS IN

☐

URGENT

☒

PHONE MEMO

TO KATHIE/Steve
 FROM Elizabeth DuVerlie
 OF JOHNS HOPKINS

DATE 6/21/91 TIME 12.05 PM
 AREA CODE 301
 NO. 659 6317
 EXT.

MESSAGE

Dr. Fs. 1420 Form Letter
 of Commitment USAIDS proposal
 Dr. F first contacted by: -
Carl Kendall

PHONED ☒ CALL BACK ☐ RETURNED CALL ☐ WANTS TO SEE YOU ☐ WILL CALL AGAIN ☐ SIGNED G WAS IN ☐ URGENT ☒

EXPEDITE



THE JOHNS HOPKINS UNIVERSITY SCHOOL OF HYGIENE AND PUBLIC HEALTH

CENTER FOR COMMUNICATION PROGRAMS

INSTRUCTIONS FOR COMPLETING CONTRACTOR EMPLOYEE BIOGRAPHICAL DATA SHEET (Form No. AID 1420-17)

1. The attached form is used to obtain approval from the Agency for International Development (AID) for the use of consultant services. Approval must be obtained from AID prior to use of consultant services.
2. Please complete the form fully including addresses, dates, etc. Use a separate sheet of paper if necessary to expand information. You cannot refer to a resume in lieu of completing the form, although a resume must be submitted along with the attached form. Block number 2., 4., 5., 6., 7., and 8. will be completed by JHU.
3. Accurate, complete salary information is essential. At least three years verifiable salary history must be indicated with exact inclusive dates in both blocks 16. and 17. The salary history stated should be gross taxable income for the specified period. If the amount is for less than full-time work, make sure you indicate how much time was spent for specific gross earnings. If you are self-employed and/or were paid a daily rate, the employment salary history should still be completed based on annual gross taxable income. The daily rate can also be shown under "Specific Consultant Services." This information will be the determining factor in establishing your rate with AID. If it is inaccurate or incomplete, delays and/or problems can occur.
4. Please refer to the attached completed sample of a 1420 form to use as an example in completing your form.
5. Be sure to sign and date the form where indicated.
6. If you have any questions or problems, call Paul Bankerd (301-659-6276).
7. Return the completed form, along with a copy of your resume, to:

Paul Bankerd
Population Communication Services
Center for Communication Programs
The Johns Hopkins University
527 St. Paul Place
Baltimore, Maryland 21202
USA



THE JOHNS HOPKINS UNIVERSITY
SCHOOL OF HYGIENE AND PUBLIC HEALTH

CENTER FOR COMMUNICATION PROGRAMS

FAX COVER SHEET

To: Dr. Donald Francis Fax # 415-540-3233

Organization: AIDS program

From: Elizabeth DuVerlie Date: 6/24/91

Subject: 1420 form and letter of commitment

Total Pages: _____ (including this cover sheet)

Comments:

Enclosed are the form and sample letter we need from you. Please send today, Monday, via overnight delivery, to:

Management Sciences for Health
400 Centre Street
Newton, MA 02158
Attn: Candy Roosevelt

We will be sending them the second page of the 1420 form so that it has an original, JHU signature on it. If you need to use part of side (or page) 2, that is OK - there can be two page 2's.

If you need to reach me, my direct # is 301/659-6317.

JHU Charge # 52.7909

POPULATION COMMUNICATION SERVICES

527 St. Paul Place
Baltimore, Maryland 21202
USA

POPULATION INFORMATION PROGRAM

Telephone (301) 659-6300
Telex 240430 JHUPCS UR
Fax (301) 659-6266

SAMPLE LETTER OF COMMITMENT (LONG-TERM)

May 30, 1991

Dr. Ronald W. O'Connor
Board Chairman and Chief Executive Officer
Management Sciences for Health
400 Centre Street
Newton, Massachusetts 02158

Dear Dr. O'Connor:

This letter confirms my exclusive commitment to serve as (job title) based in (location) for the A.I.D.-funded AIDS Technical Support Project, RFA W/HP-91-002, if the Management Sciences for Health Team is selected to implement the project. I will be available to start work on a full-time basis for the term of the proposed contract immediately after the contract has been signed.

I look forward to the opportunity of working with Management Sciences for Health, the Academy for Educational Development, The Futures Group, The Johns Hopkins University, Porter Novelli, and A.I.D. on this important initiative.

Sincerely,

(name)

CONTRACTOR EMPLOYEE BIOGRAPHICAL DATA SHEET

(SEE PRIVACY ACT STATEMENT ON REVERSE)

INSTRUCTIONS:

Submit in triplicate to
contracting officer.
See reverse for Contractor
Certification.

1. Name (Last, First, Middle) ☒ Mr. ☐ Mrs. ☐ Miss ☐ Ms. Boston, John A.		2. Contractor's Name	
3. Address (include ZIP Code) 649 Brookfield Avenue Baltimore, Maryland 21201		4. Contract No.	5. Position Under Contract
9. Telephone Number (include area code) (301) 955-1234		6. Proposed Salary	7. Country of Assignment
10. Marital Status ☒ Married ☐ Single ☐ Other (specify)		8. Duration of Assignment	
12. Date of Birth 9/16/43		11. Names and Ages of Dependents to Accompany Individual (if applicable)	
13. Place of Birth Boston, Massachusetts			
14. Citizenship (if non-U.S. citizen, give visa status) USA			

15. EDUCATION (include all secondary, business college or university training)

NAME AND LOCATION OF INSTITUTION	MAJOR SUBJECTS	Credits Completed		Type of Degree	Date of Degree
		Semester Hours	Quarter Hours		
Cornell University, Ithaca, New York	Education	60		Ph.D.	1965
University of Maryland, College Park	Radio/TV	30		MA	1964
University of California, Los Angeles	English	120		BA	1955

16. EMPLOYMENT HISTORY

1. Give last three (3) years. Continue on reverse to list all employment related to duties of proposed assignment.

2. Salary definition - basic periodic payment for services rendered.

Exclude bonuses, profit-sharing arrangements, commissions, consultant fees, extra or overtime work payments, overseas differential, or quarters, cost of living or dependent education allowances.

POSITION TITLE	EMPLOYER'S NAME AND ADDRESS	Dates of Employment (Mo., Yr.)		Salary	
		From	To	Dollars	Pct.
Lecturer in Mass Communication	Communication Arts Dept., Cornell Univ. 6408 Stewart Ave., Ithaca, NY 14850	1/10/84	Present	\$19,000	year
			1984	\$17,000	year
Director of Information Educ.	Family Planning Assoc. of the Potomac 14 River Dr., Springfield, VA	1/9/83	1/9/84	\$12,000	year

17. SPECIFIC CONSULTANT SERVICES (give last three (3) years)

SERVICE PERFORMED	EMPLOYER'S NAME AND ADDRESS	Dates of Employment (Mo., Day)		DAILY RATE
		From	To	
Print Material Development	USAID Mission, American Embassy Mexico City, Mexico	1/5/85	1/15/85	\$100/day*
Film Consultant	USAID/Zaire, c/o American Embassy Kinshasa, Zaire	3/4/85	3/20/85	\$100/day*
Print Material Development	USAID Mission, American Embassy Mexico City, Mexico	2/4/84	2/16/84	\$100/day*

*Please also include annual gross salary from consultancy - OVER

18. LANGUAGE PROFICIENCY

LANGUAGE	Speaking			Reading			Writing			Understanding		
	Fair	Good	Excl.	Fair	Good	Excl.	Fair	Good	Excl.	Fair	Good	Excl.
French			XX			XX			XX			XX
Spanish			XX			XX			XX			XX
Swahili			XX			XX			XX			XX

19. Special Qualifications (honors, professional societies, special licenses, publications, research, special skills, and relevant education not previously mentioned; use reverse side of form, if necessary)

Skilled in photography, print material production and pre-testing video shooting and editing; sound recording and editing; drawing; off-set dark room techniques.

20. CERTIFICATION: To the best of my knowledge, the above facts as stated are true and correct.

Signature of Employee

John A. Boston

AID 1420-17 (3-80)

Date

10-4-87

(Use this space for continuation of Blocks 16 and 19)

<u>Agency</u>	<u>Total Earnings</u>	<u>Year</u>
USAID/Mexico and USAID/Zaire	\$2,000	1985
USAID/Mexico	\$1,000	1984

CONTRACTOR'S CERTIFICATION (To be completed by responsible representative of Contractor)

A. I hereby certify that ("X" appropriate box):

- ☐ The initial salary proposed herein meets the salary standards prescribed in the contract.
- ☐ The salary increase proposed herein conforms to the customary policy and practice for this organization for periodic salary increases.

B. Justification or Remarks

Signature

Title

Date

PRIVACY ACT STATEMENT

The following statement is required by the Privacy Act of 1974 (Public Law 93-579; 88 Statute 1895).

The information requested on this form is needed by AID to evaluate your suitability for the position for which you have been nominated as a contract employee. It is necessary that you provide the information for AID to consider your nomination. The Foreign Assistance Act of 1961, as amended, constitutes authority for its collection.

Employers and educational institutions you list may be contacted for verification of the information provided. Disclosure may otherwise be made in whole or in part to any (a) foreign government concerned if required by that government in connection with their review of your nomination and (b) pursuant to any other applicable routine use listed under AID's Civil Service Employee Office Personnel Record System, AID-2 in AID's Notice of Systems of Records for implementing the Privacy Act as published in the Federal Register, or (c) when disclosure without the employee's consent is authorized by the Privacy Act and provided for in AID Regulation 15. (A copy of the Regulation and Notice of System of Records is available from AID Distribution on request.)

AID 1420-17 (3-80) back

(Use this space for continuation of Blocks 16 and 19)

CONTRACTOR'S CERTIFICATION (To be completed by responsible representative of Contractor)

A. I hereby certify that ('X' appropriate box):

- ☒ The initial salary proposed herein meets the salary standards prescribed in the contract.
☐ The salary increase proposed herein conforms to the customary policy and practice for this organization for periodic salary increases.

B. Justification or Remarks

Signature

Paul Baneau

Title

Date

6/20/91

PRIVACY ACT STATEMENT

The following statement is required by the Privacy Act of 1974 (Public Law 93-579; 88 Statute 1896).

The information requested on this form is needed by AID to evaluate your suitability for the position for which you have been nominated as a contract employee. It is necessary that you provide the information for AID to consider your nomination. The Foreign Assistance Act of 1961, as amended, constitutes authority for its collection.

Employers and educational institutions you list may be contacted for verification of the information provided. Disclosure may otherwise be made in whole or in part to any (a) foreign government concerned if required by that government in connection with their review of your nomination and (b) pursuant to any other applicable routine use listed under AID's Civil Service Employee Office Personnel Record System, AID-2 in AID's Notice of Systems of Records for implementing the Privacy Act as published in the Federal Register, or (c) when disclosure without the employee's consent is authorized by the Privacy Act and provided for in AID Regulation 15. (A copy of the Regulation and Notice of System of Records is available from AID Distribution on request.)



SCHOOL OF HYGIENE AND PUBLIC HEALTH

Department of International Health

DATE: 6/19/91

FAX TRANSMISSION

COVER PAGE

TO: Don Francis
415 540-3233

FROM: Carl Kendall

NUMBER OF PAGES INCLUDING THIS PAGE: 7

MESSAGE/COMMENT:

(Short term letter,
example of)
1420 Form.

Fax Number for Department of International Health: 301-955-7159

PLEASE CALL 301-955-3934 IF YOU HAVE NOT RECEIVED A COMPLETE DOCUMENT.

Attachment D

INSTRUCTIONS FOR COMPLETING BIO-DATA FORM (1420)

1. Blocks 2, 4-8 leave blank.
2. In Block 9, put the best telephone/fax number where you can be reached.
3. In Block 11, please indicate birthdates for dependents and their respective grades in school.
4. Block 15 should be completed. Do not use any of the following references or variations thereof: "See previous bio-data form (1420)"; "See resume on file"; etc.
5. In Block 16 give your employment and salary history in the last three (3) years only. Please indicate the US DOLLAR amount, or provide us with an exchange rate.

<u>Position Title</u>	<u>Employer</u>	<u>Dates of Employment</u>	<u>Annual Salary</u>
		1/91-present	\$30,000
		1/90-12/90	\$28,000
		1/89-12/89	\$26,500
		1/88-12/88	\$25,000

6. Block 17: If you performed consulting services in the last three years, please indicate any A.I.D. or U.S. Government rates established during this period other than your current salary.
7. Block 19: You may use the upper portion of the reverse side of the form to list the information under this part.
8. **BLOCK 20: YOU MUST SIGN AND DATE THE FORM IN BLUE INK.** Do not sign anywhere else on the form, only in block 20.

CONTRACTOR EMPLOYEE BIOGRAPHICAL DATA SHEET (SEE PRIVACY ACT STATEMENT ON REVERSE)

INSTRUCTIONS:
Submit in triplicate to
contracting officer.
See reverse for Contractor
Certification.

1. Name (Last, First, Middle) ☐ Mr. ☐ Mrs. ☐ Miss ☐ Ms.		2. Contractor's Name	
3. Address (include ZIP Code)		4. Contract No.	5. Position Under Contract
9. Telephone Number (include area code)		6. Proposed Salary	7. Country of Assignment
10. Marital Status ☐ Married ☐ Single ☐ Other (specify)		8. Duration of Assignment	
12. Date of Birth	13. Place of Birth	11. Names and Ages of Dependents to Accompany Individual (if applicable)	
14. Citizenship (if non-U.S. citizen, give visa status)			

15. EDUCATION (include all secondary, business college or university training)

NAME AND LOCATION OF INSTITUTION	MAJOR SUBJECTS	Credits Completed		Type of Degree	Date of Degree
		Semester Hours	Quarter Hours		

16. EMPLOYMENT HISTORY

1. Give last three (3) years. Continue on reverse to list all employment related to duties of proposed assignment.
2. Salary definition - basic periodic payment for services rendered.

Exclude bonuses, profit-sharing arrangements, commissions, consultant fees, extra or overtime work payments, overseas differential, or quarters, cost of living or dependent education allowances.

POSITION TITLE	EMPLOYER'S NAME AND ADDRESS	Dates of Employment (Mo., Yr.)		Salary	
		From	To	Dollars	Per.

17. SPECIFIC CONSULTANT SERVICES (give last three (3) years)

SERVICE PERFORMED	EMPLOYER'S NAME AND ADDRESS	Dates of Employment (Mo., Day)		DAILY RATE
		From	To	

18. LANGUAGE PROFICIENCY

LANGUAGE	Speaking				Reading				Writing				Understanding			
	Fair	Good	Excl	Fair	Good	Excl	Fair	Good	Excl	Fair	Good	Excl	Fair	Good	Excl	Fair

19. Special Qualifications (honors, professional societies, special licenses, publications, research, special skills, and relevant education not previously mentioned; use reverse side of form, if necessary)

20. CERTIFICATION: To the best of my knowledge, the above facts as stated are true and correct.

Signature of Employee

Date

(Use this space for continuation of Blocks 16 and 19)

CONTRACTOR'S CERTIFICATION (To be completed by responsible representative of Contractor)

A. I hereby certify that ("X" appropriate box):

- ☐ The initial salary proposed herein meets the salary standards prescribed in the contract.
- ☐ The salary increase proposed herein conforms to the customary policy and practice for this organization for periodic salary increases.

B. Justification or Remarks

Signature

Title

Date

PRIVACY ACT STATEMENT

The following statement is required by the Privacy Act of 1974 (Public Law 93-579; 88 Statute 1896).

The information requested on this form is needed by AID to evaluate your suitability for the position for which you have been nominated as a contract employee. It is necessary that you provide the information for AID to consider your nomination. The Foreign Assistance Act of 1961, as amended, constitutes authority for its collection.

Employers and educational institutions you list may be contacted for verification of the information provided. Disclosure may otherwise be made in whole or in part to any (a) foreign government concerned if required by that government in connection with their review of your nomination and (b) pursuant to any other applicable routine use listed under AID's Civil Service Employee Office Personnel Record System, AID-2 in AID's Notice of Systems of Records for implementing the Privacy Act as published in the Federal Register, or (c) when disclosure without the employee's consent is authorized by the Privacy Act and provided for in AID Regulation 16. (A copy of the Regulation and Notice of System of Records is available from AID Distribution on request.)

CONTRACTOR EMPLOYEE BIOGRAPHICAL DATA SHEET

(SEE PRIVACY ACT STATEMENT ON REVERSE)

INSTRUCTIONS:
Submit in triplicate to
contracting officer.
See reverse for Contractor
Certification.1. Name (Last, First, Middle) ☒ Mr. ☐ Mrs. ☐ Miss ☐ Mx.
Boston, John A.

2. Contractor's Name

3. Address (include ZIP Code)

4. Contract No.

5. Position Under Contract

9. Telephone Number

10. Marital Status

☒ Married ☐ Single ☐ Other (specify)

12. Date of Birth

13. Place of Birth

9/16/43

Boston, Massachusetts

14. Citizenship (if non-U.S. citizen, give visa status)

USA

6. Proposed Salary

7. Country of Assignment

8. Duration of Assignment

11. Names and Ages of Dependents to Accompany Individual (if applicable)

15. EDUCATION (include all secondary, business college or university training)

NAME AND LOCATION OF INSTITUTION	MAJOR SUBJECTS	Credits Completed		Type of Degree	Date of Degree
		Spring/Summer	Quarter		
Cornell University, Ithaca, New York	Education	60		Ph.D.	1965
University of Maryland, College Park	Radio/TV	30		MA	1964
University of California, Los Angeles	English	120		BA	1955

16. EMPLOYMENT HISTORY

1. Give last three (3) years. Continue on reverse to list all employment related to duties of proposed assignment.
2. Salary definition - basic periodic payment for services rendered.
Exclude bonuses, profit-sharing arrangements, commissions, consultant fees, extra or overtime work payments, overcost differential, or quarters, cost of living or dependent education allowances.

POSITION TITLE	EMPLOYER'S NAME AND ADDRESS	Dates of Employment (Mo., Yr.)		Salary	
		From	To	Dollar	Per.
Lecturer in Mass Communication	Communication Arts Dept., Cornell Univ. 6408 Stewart Ave., Ithaca, NY 14850	1/10/84	Present		year
Director of Information Educ.	Family Planning Assoc. of the Potomac 14 River Dr., Springfield, VA	1/9/83	1/9/84		year

17. SPECIFIC CONSULTANT SERVICES (give last three (3) years)

SERVICE PERFORMED	EMPLOYER'S NAME AND ADDRESS	Dates of Employment (Mo., Yr.)		DAILY RATE
		From	To	
Print Material Development	USAID Mission, American Embassy Mexico City, Mexico	1/5/85	1/15/85	
Film Consultant	USAID/Zaire, c/o American Embassy Kinshasa, Zaire	3/4/85	3/20/85	
Print Material Development	USAID Mission, American Embassy Mexico City, Mexico	2/4/84	2/16/84	

18. LANGUAGE PROFICIENCY

LANGUAGE	Speaking			Writing			Understanding		
	Fair	Good	Excl	Fair	Good	Excl	Fair	Good	Excl
French		XX			XX			XX	
Spanish		XX			XX			XX	
Swahili		XX			XX			XX	

19. Special Qualifications (honors, professional societies, special licenses, publications, research, special skills, and relevant education not previously mentioned; use reverse side of form, if necessary)
Skilled in photography, print material production and pre-testing video shooting and editing; sound recording and editing; drawing; off-set dark room techniques.

20. CERTIFICATION:

Signature of Employee

John A. Boston

AID 1420-17 (3-80)

To the best of my knowledge, the above facts as stated are true and correct.

Date

10-4-87

(Use this space for continuation of Blocks 16 and 19)

<u>Agency</u>	<u>Total Earnings</u>	<u>Year</u>
USAID/Mexico and USAID/Zaire	\$2,000	1985
USAID/Mexico	\$1,000	1984

CONTRACTOR'S CERTIFICATION (To be completed by responsible representative of Contractor)

A. I hereby certify that ("X" appropriate box):

- ☐ The initial salary proposed herein meets the salary standards prescribed in the contract.
- ☐ The salary increase proposed herein conforms to the customary policy and practice for this organization for periodic salary increases.

B. Justification or Remarks

Signature

Title

Date

PRIVACY ACT STATEMENT

The following statement is required by the Privacy Act of 1974 (Public Law 93-579; 88 Statute 1896).

The information requested on this form is needed by AID to evaluate your suitability for the position for which you have been nominated as a contract employee. It is necessary that you provide the information for AID to consider your nomination. The Foreign Assistance Act of 1961, as amended, constitutes authority for its collection.

Employers and educational institutions you list may be contacted for verification of the information provided. Disclosure may otherwise be made in whole or in part to any (a) foreign government concerned if required by that government in connection with their review of your nomination and (b) pursuant to any other applicable routine use listed under AID's Civil Service Employee Office Personnel Record System, AID-2 in AID's Notice of Systems of Records for implementing the Privacy Act as published in the Federal Register, or (c) when disclosure without the employee's consent is authorized by the Privacy Act and provided for in AID Regulation 15. (A copy of the Regulation and Notice of System of Records is available from AID Distribution on request.)

SAMPLE LETTER OF COMMITMENT (SHORT-TERM)

May 30, 1991

Dr. Ronald W. O'Connor
Board Chairman and Chief Executive Officer
Management Sciences for Health
400 Centre Street
Newton, Massachusetts 02158

Dear Dr. O'Connor:

This letter confirms my commitment to serve as a short-term consultant for the A.I.D.-funded AIDS Technical Support Project, RFA W/HP-91-002, if the Management Sciences for Health Team is selected to implement the project. I will be available to work at least one month per year for the term of the proposed contract immediately after the contract has been signed.

I look forward to the opportunity of working with Management Sciences for Health, the Academy for Educational Development, The Future Group, The Johns Hopkins University, Porter/Novelli, and A.I.D. on this important initiative.

Sincerely,

(name)

FAX

TO:

Mike Hughes

UNIT:

DA

FAX NUMBER:

8-473-4642

PHONE NUMBER:

DATE:

6/24/91

COMMENTS:

INCLUDING THIS COVER SHEET, THIS TRANSMISSION

CONSISTS OF 3 PAGES

FROM:

Donald Francis, M.D.

DEPARTMENT OF HEALTH SERVICES

OFFICE OF AIDS

2151 BERKELEY WAY, ROOM 715

FAX NUMBER : (415) 540-3233 ATSS 8-571-3233

PHONE NUMBER: (415) 540-2522 ATSS 8-571-2522

FAX

Mike:

Some suggestions for Dannemeyer letter:

Page 2: Question One: Response.

Replace by: First, I must differ with your statement that California public health measures have not been appropriate. California is often put forth as an exemplary State for AIDS. Having inadequate resources from the Federal Government, California has dug deep into its resources to support efforts to prevent HIV transmission. Moreover, these efforts seem to be paying off with California showing lower prevalence rates of HIV infection in samples like military recruits, than other hard-hit areas of the United States.

Second, you infer that there are set standards for dealing with all infections. This just isn't the case. Each infection requires special designs depending on its seriousness, its modes of transmission, and the tools available for control. HIV is certainly a serious infection and, as measured from the State dollars put into its control, California takes it very seriously.

Third, if you are inferring that California policy is on the fringe or inappropriate, I think you are wrong. Some of the world leaders of HIV prevention and care are in California and are members of multiple advisory committees of a variety of organizations and governments around the State. The policies of the State parallel what these experts say. Therefore, we believe California is on the cutting edge of HIV prevention and care.

If, by your question, you are referring to partner notification, the AIDS Leadership Committee that advised my predecessor and the State itself has a very strong policy encouraging partner notification. Indeed, as I stated above, many... (as written).

Question two, response.

Replace: Your question infers that reporting is an end in itself. It is not. First, we want to maximize the number of infected people who are tested. Second, we want to counsel these people and their partners so that further transmission can be reduced or eliminated. Research data from California clearly shows that if there is any adversarial aura that surrounds testing, reporting being one of them, people will resist testing.

California, wants to maximize the overall goal to limit transmission. To do that California has pioneered the concept of "early intervention". The State now funds 11 counties to provide early intervention services that, through service provision, attempt to minimize transmission and maximize longevity of infected persons. I'm sure you support the concept of early intervention since it includes reporting (of the whole person, not just the name) and it builds in partner notification (not just on a single visit, but over a

lifetime).

Our problem is resources. Our budget now provides approximately 3000 early intervention slots. Yet we have and estimated 165,000 infected people. We had hoped that the Ryan White/CARE bill would make up the difference. Unfortunately its appropriation falls very short of the authorized need. I hope as a California representative in Congress that you will support full funding of Ryan White/CARE.

Question four - response.

For economic reasons, we feel that pre/post-natal HIV testing should be performed on either the baby or the mother, but not both. For logical reasons, we are moving towards testing of mother (see following answer.

Question five:

Add: This is a rapidly moving field. I feel that it will not be long before the standards of medical care in California include routine HIV testing for all pregnant or delivering women. (keep rest as is).

ADD at end:

Again, let me stress the need for resources. A good public health program needs policy, structure and resources. In California we are well on our way to having sound policy and, with early intervention, a structure. What is missing is resources. In times of disaster, the Federal government must assist states. We urgently need your support for full funding of the Ryan White/CARE bill.

*This a bit muddled. I hope it
is useful.*
Don

Telecopier Cover Sheet

Department of Health Services
Office of AIDS
P. O. Box 942732
Sacramento, CA 94234-7320



Date: 6/25/91
To: STEVE ROGER
Address: _____
Room/Unit: _____
Telefax Number: 8-571-3233
Verification Number: 8-571-2524
Number of Pages: 5
(Include Cover Sheet)

From: Michael Hughes, Chief
Office: Epidemiologic Research and Statistics Section
830 S Street
Sacramento, CA 95814
Telephone: (916) 324-8441
Telefax Phone: (916) 323-4642

Sender's Name: DIANA

STATE OF CALIFORNIA—HEALTH AND WELFARE AGENCY

PETE WILSON, Governor

DEPARTMENT OF HEALTH SERVICES

714/744 P STREET

P.O. BOX 942732

SACRAMENTO, CA 94234-7320

(916) 445-1248



The Honorable William E. Dannemeyer
House of Representatives
2351 Rayburn House Office Building
Washington, D.C. 20515

Dear Congressman Dannemeyer:

I am writing in response to your letter of June 10, 1991, regarding the reportability of human immunodeficiency virus (HIV) antibody test results in California. As you recall, your letter discussed two recent HIV-related editorials and you kindly provided me with a copy of the American Medical Association's (AMA) 1990 Policies on HIV. Finally, you asked several questions concerning HIV reporting policies in California.

First, thank you for the copies of "A Dual Approach to the AIDS Epidemic" by Dr. Marcia Angell and "An End to HIV Exceptionalism?" by Dr. Ron Bayer; both of which appeared in the May 23, 1991 issue of the New England Journal of Medicine. I concur with Dr. Angell's comments that the social, medical, and epidemiologic issues surrounding the issue of HIV reporting are often confused. Dr. Angell's closing comments on the need for statutory protection from discrimination and the assurance of access to medical services are especially relevant.

Dr. Bayer's discussion of HIV "exceptionalism" and traditional public health approaches to disease control provides a balanced perspective from which to evaluate potential changes to current policies. Dr. Bayer's editorial does not advocate for, or against, mandatory HIV testing or reportability, but rather provides an objective, historical framework for discussion.

I have reviewed the copy of the AMA's "1990 HIV Policies" you provided, especially with regard to recommendations 9a and 9b. Recommendation 9a calls for states to adopt a system for partner notification and contact tracing for HIV-infected persons. Many local health jurisdictions in California have established voluntary partner notification programs. The Department continues to support voluntary partner notification strategies for all sexually transmitted diseases. The Department is in the process of updating existing guidelines to assist local health departments who wish to provide voluntary partner notification services for HIV-infected persons.

The Honorable William E. Dannemeyer
Page Two

Recommendation 9b of the AMA's 1990 HIV Policies strongly supports the adoption of HIV reportability by all states, territories, the District of Columbia and local health departments. As you know, there have been a number of unsuccessful initiative-based efforts to implement HIV reporting in California. However, the rapid advances in therapeutic interventions, the increasing need for epidemiology-based program planning and evaluation data, and evolving public health opinion may suggest a need to evaluate current policies.

Your letter contained five specific questions regarding HIV testing and reporting. I have attempted to answer each question in the order it was posed.

Question One - "To date, your predecessors have resisted the growing calls from medical and public health experts to apply the same measures to control the spread of HIV as are used to control the spread of other sexually transmitted diseases (STDs)."

Response - Two of the principle rationales underlying disease control strategies for sexually transmitted diseases are treatment and prevention. As I stated above, many local health jurisdictions already offer voluntary partner notification services. In addition, the State provides funding to support nearly 15,000 anonymous and confidential HIV antibody tests each month. It is unclear to me how mandatory antibody testing or reporting of HIV infection will enhance current treatment and prevention efforts.

Question Two - "Specifically, when will the state of California add HIV seropositivity to the list of reportable diseases under California law?"

Response - HIV will become a reportable condition in California when there is a medical, public health and legislative consensus that reporting is appropriate and necessary. To date, such a consensus does not exist in the State. To develop such a consensus will, at a minimum require the adoption of statutory protections against housing, employment and insurance discrimination and the vast expansion of limited early intervention and treatment services.

Question Three - "When will the state of California require local public health departments to notify the sexual and needle-sharing partners of HIV-positive individuals of their risk?"

The Honorable William E. Dannemeyer
Page Three

Response - The current practice in California is to promote voluntary sex partner and needle-sharing partner notification services. Local health departments are given the discretion to offer these services based on local assessment of need and available resources. Requiring local health jurisdictions to perform compulsory partner notification services for all HIV-infected persons would require increased resources or the diversion of limited resources from other equally important programs.

Question Four - "As you know, the screening of newborns for phenylketonuria and other conditions is standard medical practice. When will it become standard medical practice in California to screen newborns for HIV?"

Response - Newborn children have persistent maternal antibodies in their blood for as long as 12 to 16 months after they are born. Screening a newborn child for antibodies to HIV is in effect, screening the mother. Current California statutes require written consent prior to the performance of an HIV antibody test. Recent advances in newborn HIV testing indicate that a new test which detects antibodies to a certain blood protein may be useful in the early identification of HIV-infection in newborns. This test has not been fully evaluated and is not commercially available. Once a Food and Drug Administration test has been licensed for testing in newborns, I would fully support the review of existing policies.

Question Five - "As you know, pregnant women are already tested routinely for syphilis and hepatitis B. When will it become standard medical practice in California to screen pregnant women for HIV?"

Response - Last year, the Perinatal and Pediatrics Subcommittee of the California AIDS Leadership Committee was asked to address the issue of mandatory HIV testing of pregnant women. The committee recommended:

Universal offering of education, counseling, and testing for HIV antibodies should be done at the earliest possible time in prenatal care. Women who are not tested during their prenatal care should have HIV testing offered to their infants as soon as possible after delivery.

The Honorable William E. Dannemeyer
Page Four

The committee went on to say,

Mandatory testing is not recommended at this time. Any attempt to change statutory authority at this time would only delay a more voluntary approach.

You may also know that the American Academy of Pediatrics also has not recommended mandatory screening of newborns.

New recommendations for the prophylaxis of Pneumocystis carinii pneumonia in newborns recently published in the Morbidity and Mortality Weekly Report certainly increases the importance of early identification of HIV-infected children. In addition, preliminary findings that maternal treatment with anti-retroviral agents, such as zidovudine (AZT) early in pregnancy may reduce the potential for transmission of the virus to an unborn child underscore the need for early identification of HIV-infected pregnant women.

Thank you for your continued interest in this complex and controversial issue. If you have any additional questions or comments, please do not hesitate to telephone (916) 445-1248.

Molly Joel Coye, M.D., M.P.H.
Director

cc: Ed Mendoza, M.P.H.
Assistant Deputy Director
Public Health
714 P Street
P. O. Box 942732
Sacramento, CA 94234-7320

Mr. Wayne E. Sauseda, Chief
Office of AIDS
Department of Health Services
830 S Street
P. O. Box 942732
Sacramento, CA 94234-7320



NARCOTIC AND DRUG RESEARCH, INC.

*Don, could you please send
me a copy of your test
& slides?*

SAMUEL R. FRIEDMAN

Senior Principal Investigator
AIDS Research

text?
Thanks,

Sam

11 Beach Street
New York, N.Y. 10013

(212) 966-8700 Ext. 518

ERIKA SHATZ

AIDS Grant Writing Consultant
(619) 236-2221

Office of Aids Coordination
1700 Pacific Highway, Room 104, P.O. Box 85524
San Diego, CA 92138-5524

~~US~~
~~Spec~~
~~turn~~

DF

DATE 5/30

TIME

FROM

Melvina Carter

AREA CODE

NUMBER

Nebr.

Dept of H

DIS Control

P.O. Box 95007

Lincoln, NB

68509

bought tape - would like copy
of speech

SIGNED

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URGENT!

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PHONE MEMO

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KATHIE

DATE

06.04.91

TIME

8.15

AM

PM

FROM

DR HATTIS

AREA CODE

714

NO.

862 8121

OF

PATTON STATE HOSP

EXT.

7418 - Public Health

MESSAGE

wants a copy of Dr. F's speech
~~at~~ given at NAT. AIDS CONF,
S.F. May 22 "Virus of the
People, whose side are you
on"

SIGNED

G

PHONED

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CALL☐WANTS TO
SEE YOU☐WILL CALL
AGAIN☐

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URGENT

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3102 E Highland

Patton, CA

92369

CARING

Community AIDS Response to Increase Grants

Office of AIDS Coordination, Room 104, P.O. Box 85524, San Diego, CA 92138
(619) 236-2221

TECHNICAL ASSISTANCE PRODUCTS

To Applicant Groups

Funding Alerts
Funder Profiles
Grant Writing Workshops
Technical Assistance Packets (50+ pages of organized data in response to specific RFPs)
Phone consultations
Referrals and introductions to potential local collaborative organizations
Statistics/demographic data, quotes, expert commentary for need statements
Proposal editing
Reviewing, analyzing, and abstracting RFP guidelines
Interviewing funding sources
Letters of inquiry to funders
Letters of advocacy to funders
Letters of support
Meetings with funders to advocate AIDS-related philanthropy
Planning and outlining proposal components (e.g. needs, objectives, timelines, evaluation, budget, future funding, overall format, cover letters, appendices, etc.)
Written evaluation/feedback of submitted proposals
Designing charts and tables
Access to CARING foundation files
Distribution of County and State HIV/AIDS data
Referrals to model programs nationwide

To Grant Makers

Introduction/Overview of local AIDS-related activities
Distribution of County and State HIV/AIDS data
Focused needs surveys
Facilitating community rating of priority needs
Background information about grant applicants
Visits to program sites
Matching interest areas with local needs and programs

Foundation Directories Available at CARING

AIDS Funding
America's Newest Foundations
Directory to Building and Equipment Grants
Foundation Directory 1991
Foundation Directory Part II
Fundraiser's Guide to Human Service Funding
Guide to California Foundations
Handicapped Funding Directory
National Guide to Funding in Health
San Diego County Foundation Directory

Reference Materials Available At CARING

Getting Funded: A complete Guide to Proposal Writing
The Craft of Writing for Fundraising
The "How To" Grants Manual
Harvard University Grant Writing Workshop
Swipe File: 15 Winning Fund Raising Proposals

100+ profiles of funding sources

*Dr. Francis -
May I please
have a copy of
your speech &
slides
(print outs)
Thank
you!*

? talk

CARING ADVISORY COMMITTEE

Terry Cunningham, San Diego AIDS Adult Day Health Care Center
Dale Fleishman, Office of AIDS Coordination
Edward Fletcher, San Diego Community Foundation
Linell Fromm, Organizational Consultant
Gary Holt, AIDS Foundation San Diego
Luann Kelley, San Deigo Volunteer Lawyer Program
Joseph Mayer, Center for Social Services
Ibrahim Naeem, Urban League of San Diego
Becky Obayashi, San Diego Gas & Electric
Dan O'Shea, Being Alive/San Diego
Karen Waters, San Diego Council of Community Clinics

CARING SUPPORTERS 1990-1991

Center for Social Services
AIDS Foundation San Diego
San Diego AIDS Adult Day Health Care Center
Auntie Helen's
San Diego Community Research Group
Samahan Medical Center
San Diego City Schools
County of San Diego
United States Health Resources Service Administration (HRSA)
San Diego Grant Makers AIDS Collaboration
San Diego Gas and Electric
Kaiser Permanente
Travel Industry Support for AIDS Research and Assistance (TISARA)
Trimensa Corporation
B. Cumming Company

CARING

Community AIDS Response to Increase Grants

Office of AIDS Coordination, Room 104, P.O. Box 85524, San Diego, CA 92138
(619) 236-2221

ORGANIZATION BACKGROUND

MISSION

CARING's mission is to preserve and expand HIV/AIDS-related services in San Diego by attracting grants to the region.

Key activities include:

- Individualized consulting to HIV-related organizations to assist to win at least \$700,000 in grants and gifts annually
- Grantsmanship workshops
- Facilitating inter-agency collaborations to enhance limited resources and reduce duplication of services

CARING IS A:

- Technical assistance program in grant writing
- Non-profit, public/private collaboration
- National model of a community approach to non-profit fundraising

ACCOMPLISHMENTS SINCE 1989:

- Assisted organizations to attract over \$3,200,000 in grants and gifts
- Conducted quarterly workshops. Participants' grantsmanship skills measurably improved from 60% to 90+%
- Served over 50 local organizations with individualized services
- Effectively advocated about regional HIV/AIDS needs, resulting in increased funding interests among local and national funders
- CARING is cost-effective! To date, the ratio of CARING program expenses to dollars raised is over \$1 to \$40.

THE CARING TEAM

Staff, a growing volunteer corps, and university interns.

ORGANIZATIONAL STRUCTURE

- Public/private collaboration
- Non-profit fiscal sponsor: The Center for Social Services
- Advisory Board oversees program and budget
- Program site, office support, and statistical resources donated by County of San Diego Office of AIDS Coordination

FAX

TO: Beverly Bradley
UNIT: _____
FAX NUMBER: 749-3420
PHONE NUMBER: _____

DATE: 6/11/91
COMMENTS: _____

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FROM: Dr. Donald Francis

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2151 BERKELEY WAY, ROOM 715

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FAX



DEPARTMENT OF HEALTH & HUMAN SERVICES

Public Health Service

Region IX
50 United Nations Plaza
San Francisco CA 94102

2151 Berkeley Way, Rm. 715
Berkeley, CA 94704

June 11, 1991

Arthur L. Reingold, M.D.
Professor of Epidemiology
School of Public Health
University of California, Berkeley
19 Earl Warren Hall
Berkeley, CA 94720

Dear Dr. Reingold:

This is a letter expressing strong support for your proposal to evaluate HIV early intervention. The concept of targeting prevention and care activities to and around HIV-infected persons was begun here in California and many of the first centers were established here. But, because of resource restrictions, evaluation has been rather limited.

To have your group undertake evaluation of early intervention would have considerable national and international significance.

I strongly support your proposal and would be happy to assist in any way that I can.

Sincerely,

Donald P. Francis, M.D., D.Sc.
CDC Regional AIDS Consultant

FAX

TO:

Dr. Mike Gorman

UNIT:

FAX NUMBER:

644-9319

PHONE NUMBER:

644-9300

DATE:

6/11/91

COMMENTS:

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FROM:

Dr. Don Francis

DEPARTMENT OF HEALTH SERVICES

OFFICE OF AIDS

2151 BERKELEY WAY, ROOM 715

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PHONE NUMBER: (415) 540-2522 ATSS 8-571-2522

FAX

FAX

TO: MR. CARL KENDALL

UNIT: _____

FAX NUMBER: 301-955-7159

PHONE NUMBER: _____

DATE: 06/11/91

COMMENTS:

Dr. Francis C.V.

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FROM: KATHIE SULLIVAN-JENKINS

DEPARTMENT OF HEALTH SERVICES
OFFICE OF AIDS
2151 BERKELEY WAY, ROOM 715

FAX NUMBER : (415) 540-3233 ATSS 8-571-3233
PHONE NUMBER: (415) 540-2522 ATSS 8-571-2522

FAX

FAX

TO: Darrow Johnson
UNIT: CPS/HIV
FAX NUMBER: (404) 639-1459
PHONE NUMBER: (404) 639-1480

DATE: 6/11/91
COMMENTS:

Travel arrangements (F.H.)

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FROM: Kathie Sullivan-Jenkins

DEPARTMENT OF HEALTH SERVICES
OFFICE OF AIDS
2151 BERKELEY WAY, ROOM 715

FAX NUMBER : (415) 540-3233 ATSS 8-571-3233
PHONE NUMBER: (415) 540-2522 ATSS 8-571-2522

FAX

Telecopier Cover Sheet



Department of Health Services
Office Of AIDS



ART AGNOS

Date: **6/7/91**

To:

Section:

Address:

Room/Unit:

Fax Number:

Verify Number:

Number of Pages
(Include Cover Sheet)

**FLORENCE STEGNER
MAYORS OFFICE**

(415) 554-6160

From:

DON FRANCIS

Department of Health Services
Office of AIDS

Section/Unit:

Mailing Address:

P.O. Box 942732
Sacramento, CA 94234-7320

Telephone:

(916)

Telefax Phone:

(916) 327-3177

PLEASE CC:

**MYRA SNYDER
LARRY BUSH
SCOTT SCHAFER**

Sender: After transmission is completed do you wish to:

Pick-up original ☐

Toss ☐

DON FRANCIS'S SUGGESTIONS FOR ART'S PRESS CONFERENCE

Conference of Mayors, San Diego

Background points:

1. No one can question the importance of HIV.

o virulence: mortality per infection appears to exceed 75%

compare: poliovirus - 0.1%
bubonic plague - 5%
cholera - less than 1%

o invasiveness: 12 million HIV-infected worldwide
1 million in United States
4% of San Francisco

40-60,000 new infections per year in US
(that's a Vietnam every year!).

o death: US: over 100,000 deaths since 1981
100,000 per year projected for coming

years

If transmission stopped today, over 750,000 cumulative deaths will occur in US. Exceeds deaths from total of all wars since, and including, the Civil War.

2. Not helpless.

Prevention: with well designed and delivered prevention programs transmission can be markedly decreased.

Care: managed care can extend life and decrease hospitalization.

3. Epidemic/disaster response is a clear FEDERAL responsibilities.

4. Federal response to date borders on public health malpractice:

o Obstruction to youth education programs (Bennett-Koop debate).

o Obstruction to safe sex programs in gay community (Helms amendment).

o Obstruction to safe injection programs (federal guidelines regarding bleach and needle exchange programs).

- o Obstruction to removing disincentives to HIV testing (inappropriate restrictions to travel (INS), lack of early intervention programs, lack of leadership to stand up to discrimination).
- o Obstruction to applying preventive therapy and preventive education to HIV-infected persons (lack Ryan White funds).
- o Obstruction to minimizing health care costs (lack of funds (Ryan White/CARE) for managed care and out-of-hospital care).
- o Obstruction to development and application of new pharmaceutical agents (FDA quagmire).

WHERE IS LOGIC? HOW CAN A COUNTRY WITH SUCH EXTRAORDINARY TECHNOLOGIC RESOURCES FAIL TO APPLY THE KNOWLEDGE AND TOOLS DERIVED FROM THAT TECHNOLOGY TO HASTEN THE DECLINE OF AIDS? INFECTIOUS DISEASES THRIVE ON TURMOIL. OUR APPROACH TO HIV MUST CENTER ON MINIMIZING THE SOCIAL COSTS BY STOPPING FURTHER TRANSMISSION AND CARING FOR THE ILL. WE MUST MINIMIZE THE TURMOIL.

WE RECOMMEND:

1. Full funding (\$875 million) of Ryan-White/CARE bill to provide resources for testing, early intervention, out-of-hospital care and support services for HIV-infected persons, their contacts and their families.
2. Aggressive HIV/STD/drug/pregnancy prevention programs in schools and neighborhoods having high rates of infection. These programs must give information, skills training and make available supplies (condoms) necessary to protect our youth.
3. An integrated HIV-prevention program for injection drug users that combines preventive education and community norm changing, outreach and paraphernalia exchange, drug treatment, HIV-testing and early intervention.
4. Changing the classification of "AIDS" to "HIV disease". Establish a new category called "HIV positivity". Similar to a positive biopsy for cancer or a test for diabetes, care for HIV begins at the time of detecting a positive test and varies according to the needs of the person. Eligibility for health care or other benefits should follow the standards of care and not some arbitrary clinical definition established to track the epidemiology of a disease.

I CHALLENGE PRESIDENT, THE CONGRESS, NATIONAL BUSINESS AND NATIONAL RELIGIOUS LEADERS TO GIVE HIV THE RESPECT IT DESERVES, CONFRONT IT WITH MODERN LOGIC RATHER THAN PRIMITIVE HYSTERIA AND SHOW THE WORLD THAT THE UNITED STATES HAS THE COURAGE AND COMMITMENT TO RISE ABOVE FUNDAMENTALISTS DEBATES AND ENTER THE MODERN WORLD OF PUBLIC HEALTH AND MEDICINE.

I urge the president to establish a new system American public health. We cannot afford to repeat the HIV debacle. America must establish a public health structure that can sensibly apply new-found technology to improve the public's health while minimizing the negative influences of out-dated or mean spirited extremists. The structure must use scientific-based logic to deliver modern public health through a coordinated Federal, State and local system.

I urge the government and private health-care providers to establish an HIV-specific fund which, through a fair sharing of financial burden, ensures that all HIV-infected people have access to early intervention services, managed care services, prevention services, in-hospital and out-of-hospital care services.

I urge the nation to come to grips with our schizophrenia regarding drug use. How can we educate our youth regarding street drugs when they are bombarded with macho images of legal drugs (alcohol and tobacco). All drugs have risks and benefits. Having inconsistent laws that allow one and forbid another based on vague tradition rather than solid public health risk, sets up our youth for failure. Forcing those who become addicted into closets and crime is illogical and unethical. Consistent policy is urgently needed. Without such policy shift, the conquest over HIV will continue to be severely hampered.

THE AMERICAN SOCIETY CAN NO LONGER ACCEPT WEAKNESS WHEN CONFRONTED WITH SUCH A STRONG FOE. WE CANNOT BASE OUR RESPONSE TO HIV ON POLICY DICTATED BY RELIGIOUS ZEALOTS AND WE CANNOT FUND OUR RESPONSE THROUGH THE EQUIVALENT OF BAKE SALES. IN THE PAST OUR POLICY AND WEAKNESSES HAVE AIDED AND ABETTED THE ENEMY, THE VIRUS. NOW IT IS TIME TO SHIFT THAT STRATEGY TO BENEFIT THE PEOPLE OVER THE VIRUS.

FINALLY I URGE THE SOCIETY TO ESTABLISH STRUCTURES THAT ALLOW US TO MOVE FORWARD, TO TRANSLATE MODERN FINDINGS TO IMPROVE OUR HEALTH, TO KEEP THOSE TRADITIONS THAT HELP US TO EVOLVE TOWARDS A BETTER FAMILY, A BETTER SOCIETY AND DISCARD THOSE THAT KEEP US BACK. WE ARE EVOLVING. TO EVOLVE TO A BETTER SOCIETY WE MUST CHANGE. THAT MAKES MANY OF US UNCOMFORTABLE, BUT THE SHORT-TERM DISCOMFORT IS ESSENTIAL FOR THE LONG-TERM IMPROVEMENT.

FAX

TO: Mr. John Maddox
UNIT: Nature
FAX NUMBER: 011 44 071 836 9934
PHONE NUMBER: 071 836 6633

DATE: 6/6/91
COMMENTS:

Original mailed

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2151 BERKELEY WAY, ROOM 715

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FAX



Region IX
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San Francisco CA 94102

2151 Berkeley Way
Berkeley, CA 94704
415-540-2522
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June 4, 1991

Dr. John Maddox, Editor
Nature
4 Little Essex Street
London WC2R
England

Dear Dr. Maddox:

The publication by Dr. Robert Gallo explaining the contamination of HTLV-III_B with an HIV isolate sent to him from the Institut Pasteur in Paris (Nature __) helps put an end to an unhappy chapter in the history of science. But questions remain before the chapter can be brought to a final close. These questions relate to the ethical standards by which we scientists measure ourselves and whether these standards were met by Dr. Gallo.

The initial questions need be directed to Dr. Gallo himself and deal with a pattern of behaviors that appeared designed to play up his "discoveries" while ignoring those of the Institut Pasteur. First, why in the summary of the Cold Spring Harbor conference in September 1983 (Cold Spring Harbor Press, 1984) did Dr. Gallo publish extensive data mirroring his subsequent HTLV-III papers in Science, when nothing of the sort was presented by Dr. Gallo or his group at the conference? Indeed the only paper describing a lentivirus-like agent associated with AIDS presented at the conference was given by Dr. Montagnier from the Institut Pasteur. Dr. Gallo certainly was aware of that presentation because he publicly ridiculed the possibility of a lentivirus related to equine infectious anemia being the cause of AIDS.

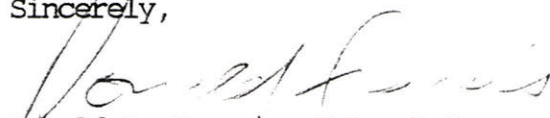
The second question deals with events surrounding Dr. Gallo's press conference in Washington in April 1984. Three weeks before that press conference, Dr. Gallo and I met with Drs. Barre', Chermann and Montagnier at the Institut Pasteur to discuss important data obtained in the three laboratories. Those data showed that: 1) the virus reported one year earlier by the Institut Pasteur was the cause of AIDS; 2) the three laboratories (Institut Pasteur, NCI and CDC) reported almost identical and highly significant results using independently developed serologic tests; and 3) American isolates of the virus appeared identical to original French isolate. With this in mind, how could Dr. Gallo call a press conference to announce

that HE had discovered the cause of AIDS? The third question deals with standards of practice in science. Strong standards in virology dictate that viral isolates be compared to previously reported viruses before they are reported in the scientific literature. Knowing what he did, why didn't Dr. Gallo compare his HTLV-IIIIB isolate to the LAV isolate BEFORE publishing his initial manuscript? The technology for comparison, even at that early date existed. In our publication soon after his (Science. 6 July 1984), we compared our initial American isolates of HIV to the prototype French isolate and concluded they were identical. Dr. Gallo could have done the same.

Finally there are questions for us in the scientific community. Dr. Gallo's attempts to smother the French discoveries were not subtle. They were known by all close to the subject. The near identities of the sequences of LAV and HTLV-IIIIB were the talk of the AIDS community over 5 years ago. Yet because Dr. Gallo was such a powerful and ruthless member of the retrovirus community, he was not only tolerated, but invited to speak, invited to lead peer reviews of journal articles or funding proposals, and was lauded with praise for his pioneering work, given personal prizes, recognition, and huge tax-dollar budgets to continue his research.

Looking back, the major challenges with AIDS have not been our laboratory and epidemiological technological skills, but rather our abilities as people and societies to translate our technologic data to the advancement of the public's health -to act rationally, compassionately, to get along with each other. Too often we have divided our societies into the "them" and the "us". Such divisions have often undermined the greater goal of advancing public health. Dr. Gallo's actions undermined this greater goal by dividing the virologic research community into the French Camp and the NCI Camp. Such behavior was extremely damaging to the public health and should be unacceptable to all.

Sincerely,



Donald P. Francis, M.D., D.Sc.
CDC Regional AIDS Consultant



DEPARTMENT OF HEALTH & HUMAN SERVICES

Public Health Service

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San Francisco CA 94102

2151 Berkeley Way
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July 1, 1991

Search Committee
School of Public Health
University of California
Berkeley, CA

Dear Committee Members:

This is a formal application for Professor of Epidemiology position for which you have advertised. Enclosed please find my curriculum vitae.

References:

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If there is any further information that you require please call me at 415-540-2522.

Sincerely,

Ronald P. Francis
Donald P. Francis, M.D., D.Sc.
CDC Regional AIDS Consultant