## **Remarks of David Fair**

**Keynote Speaker** 

Philadelphia FIGHT HIV Education Conference Thursday, June 12, 2025 Pennsylvania Convention Center Philadelphia, PA

Good morning, everyone.

It's an enormous honor to be asked to be the keynote speaker this morning about the future of healthcare advocacy, especially at a FIGHT conference, since it was 40 years ago that FIGHT <u>itself</u> became the future of health advocacy, and remains in the vanguard today.

I'd like to dedicate my comments this morning to those of you who have struggled to create a world that cares about people with HIV disease, and the many who are no longer with us, who put their spirits and their bodies on the line to create a system, and a movement, that changed the face of AIDS care over the past 45 years.

And finally, I want to dedicate my comments to the memory of one of my oldest friends, the recently departed Tyrone Smith, a fierce advocate who spent his entire personal and professional life building a community of safety and advocacy for people who we as a society would otherwise never have valued. His single-minded commitment to community is an example we should all learn from.

The tagline for this morning's event – "From Awareness to Action: Mobilizing for Change in Healthcare Advocacy" – in my mind crystallizes the challenge, and the crisis, that confronts all of us in and outside of this room today.

We've tried all sorts of advocacy over the years in health care, especially in the context of the AIDS epidemic, but today's realities require us to be more thoughtful and strategic – and in my opinion <u>significantly more aggressive</u> – if we are to have the impact we urgently <u>need</u> to have. We need to re-create an environment where we value life more than we value money and selfishness, where we can inspire leaders committed to restoring, or even creating, the way of life that we want to see come to be; leaders with the vision, competence, and talent for strategy and collaboration. Leaders who are unafraid to act and think differently, recognizing that the weaponization of the judicial system and the surveillance environment are new challenges we have not before seen.

While I've considered myself a "healthcare advocate" in one way or another for over almost 50 years, the situation that faces us today, with the whole concept of public health itself under attack, is something new, something we have never experienced before. We are facing an existential threat to everything we've accomplished, everything we believe, but

nonetheless, somehow, we need to remain steadfast to the mission and vision which has guided us for decades.

The enemy – and our chief opponents are, in fact, the enemy – is pulling back the basic resources that so many need to survive, in so many ways. And they appear to delight in making it harder to get help.

Back in the day, whether it was fighting for the rights of hospital and health care workers, or advocating for the right of people who were homeless to get quality health care, or demanding access to the Hepatitis B vaccine for gay men — or whether it was just to get people to care about people with AIDS, in almost every case, I and many others in this room took to both the boardrooms and the streets with the fundamental belief that the people we were advocating <u>to</u> would eventually come around. Because we believed that in the end, those people were human beings, and that all we really needed to do was <u>appeal</u> to their humanity, and we'd eventually get them to act.

And largely, back then, that turned out to be true. We made <u>enormous</u> strides – through targeted advocacy – in protecting and supporting people with HIV in the 1980s and 1990s.

But ... We're in a qualitatively different place in the age of Trump in 2025.

Back in the day, AIDS was perceived as primarily a white gay male disease, meaning that a movement primarily of white gay men was often able to rely on their <u>privilege</u> to get them into the rooms where decisions about AIDS were being made. Also, we basically knew that it was primarily anti-gay bias, and ignorance, and a lack of urgency that was standing in the way of progress, not the kind of <u>pathological selfishness</u> we see in Washington today. And we also knew that if we made those we advocated to <u>demonstrate their ignorance</u> so that the public, and the media, could see it, that even <u>they</u> might get embarrassed enough to admit that maybe our demands were not so crazy and unachievable after all.

And perhaps most importantly, we learned that if we funneled our anger at the obtuseness of the public health officials, and the stupidity of the bureaucrats and of the politicians, and <u>celebrated</u> our anger rather than just shouting it, they might actually listen.

I've been involved in various health care advocacy efforts going back more than a few years, ranging from winning the minimum wage for service and maintenance workers in hospitals and nursing homes, to demanding access to drug treatment for people who couldn't afford a stay in a fancy rehab facility.

But never have we faced so significant a challenge as the Trump Administration and his compliant Congress poses today.

We stand on the precipice of an America that is aggressively planning to <u>restrict</u> access to critically needed public health care, that seeks to <u>reinforce and expand</u> health disparities instead of striving to erase them, that <u>ignores</u> the need for addressing threats to our health

ranging from tobacco to food insecurity to gun violence. A society that <u>rejects</u> the need for equal access to mental health and substance abuse services in favor of punishment and ignorance.

And God forbid we continue to press for access to reproductive health, or vaccinations, or basic health care for people without fancy health insurance plans.

For decades people very much like the people in this room have worked to influence public policy on health care with one simple goal: improving the public's health. We must continue to do so, but <u>today</u> our fight needs to be broader. More than ever before, we need to fend off the unique challenges of 2025 that aim to make it ever <u>harder</u> to get health care.

That means advocacy in our own communities and on the local, state and federal level; it means strengthening our ability to help individuals and communities we care about navigate what are becoming more convoluted and cumbersome systems; and it means building collaborations and partnerships – not just among health care providers and consumers of health care, but in all aspects of our lives, in our personal networks, our clubs, our congregations – we all need to come together to stand up for our <u>right</u> to health care.

That is one thing that <u>should</u> be able to unite all of us.

And why should that be? I think it's because our right to health care is the very same thing as our right to <u>life</u>. Health care advocacy is not just about fighting for better policies and better practice. It's about fighting for our very lives.

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It's important to remember that for me and many veterans of the movements to combat AIDS in the 80s and 90s, it was not just about fighting against a system that was slow to respond to the AIDS epidemic.

For many of us, especially when we came together as ACT UP members or as We The People Living with AIDS, it was also a <u>celebration</u> of our very lives, of who we as people with and who cared about AIDS <u>were</u> as human beings. We were, to put it simply, fighting to live. And I believe we won so many of those battles, not just because we were strong advocates – which we certainly were – but because the people we were advocating <u>to</u> at the time turned out to be, by and large, reasonable human beings themselves, and we eventually <u>were</u> able to reach their hearts, their minds, and their souls.

The AIDS fight we face in 2025 is much more challenging. Among the reasons we were able to get into the right rooms where decisions were being made about AIDS in the 80s and 90s was that the movement was dominated and led by white gay men, who had something most of today's people with AIDS have significantly less of: white privilege.

Today, our constituency is much broader, and includes, in addition to white gay men ... poor people, people of color, homeless people, sex workers, addicts -- people who can't benefit from the privilege we were often able to use in the 1980s to get our way. And today's constituency of people with HIV are people who a lot of Americans think of as ... expendable.

Meanwhile, the World Health Organization says that today there are over <u>40 million people</u> <u>living with HIV, and 1.3 million new infections every year</u>. And the people we need to advocate to, to do something about this, are much more powerful, much more <u>sinister</u>, much more willing to ignore their own basic humanity to get the supremacy and money they crave.

In the past, the biggest obstacle we faced was basic ignorance. Today, in the age of MAGA, it is still ignorance, but now it's with a massive side dish of what can only be called plain old - evil.

Instead of Presidents who had no clue about AIDS – like Ronald Reagan and George Bush – we now have one who apparently has no <u>conscience</u>, and who is <u>affirmatively</u> antagonistic to the people at highest risk of getting HIV disease today. President Trump and his Project 2025 minions are on a campaign to liberate literally trillions of public dollars that today are being spent on addressing a wide variety of crises and send that money back to what they call "the people" – by which they mean the people who already have more money than God.

Our President, who, believe it or not, once pledged, in his first State of the Union address to, quote, "do whatever it takes to End HIV in the United States by 2030" – Donald Trump actually said that six years ago – that President is today in the process of eliminating the very efforts that could well achieve that goal if not for his greed and avarice. Not only will we not end the HIV epidemic with the current administration's policies, but we will be reversing the gains we have already made and going back to the dark early days when AIDS didn't even have a name.

Many of us in this room remember those times, when the people with AIDS that we knew personally, unbearably, unceasingly, died in pain every hour of every day.

Media reports on what the Trump Administration is planning for AIDS services are incredibly depressing.

Politico, a major news agency that specializes in covering the White House and Congress, has reported that Trump has already decided to eliminate the CDC's HIV Prevention Division altogether; their argument is that they are simply shifting responsibility for preventing the spread of HIV down to each of the 50 states. The only problem with that approach is that each of those states historically has relied primarily on <u>federal</u> money to do that – the very money that the Trump Administration is planning on taking away.

The media also reports that other departments that manage significant HIV funding are on the chopping block. These include not only the Health Resources and Services Administration, known as HRSA, which is the major funder of a myriad of AIDS programs, but also the Substance Abuse and Mental Health Services Administration, known as SAMHSA; the National Institutes of Health, or NIH; the Centers for Medicare and Medicaid Services, known as CMS; and the Agency for Health Care Research and Quality. Each of these agencies houses critically important AIDS-related programs that will soon disappear if the President and the Republican Congress have their way.

And of course, Trump and his allies plan to force as many as <u>13 million</u> Americans who rely on Medicaid for their health care off the rolls altogether.

As of today, there's still a very slim chance that lawsuits and action in the Senate might result in rescinding some of these funding cuts supporting care services for millions of people living with HIV. But the news so far is very scary. What we already know is that both the CDC and HRSA have been forced by a <u>40 percent cut</u> in their funding to trim their staffs by <u>thousands of employees</u> – and that bodes ill for people with HIV and the people who care about them.

And according to US Congressman Jerry Nadler from New York, Trump is also planning to, in his words, "eviscerate" Ryan White CARE Act funding, the primary funding stream for HIV care services in the United States.

And let's not forget to mention Trump's hopes for repealing the Affordable Care Act. Over <u>40</u> <u>percent</u> of people living with HIV disease today rely on the ACA and Medicaid for their care.

Trump's attack on AIDS services is not just limited to those of us close to home. He has also slashed funding for AIDS programs throughout the world, especially in Africa, where <u>enormous</u> strides have been made in protecting people from contracting HIV as well as many other infectious diseases. Programs like PEPFAR, the President's Emergency Plan for AIDS Relief, that have been protecting millions around the world from HIV infection for many years, are also now on the chopping block.

PEPFAR, which financed about 70% of the world's overall HIV/AIDS services, is credited with having saved <u>26 million lives</u> and enabling 7.8 million babies to be born <u>without</u> HIV infection, making it one of the most successful public health initiatives in the history of the world. But almost immediately after taking his oath of office, Trump threw the program into chaos. He dismantled the US Agency for International Development (USAID), which ran the majority of PEPFAR's programming, altogether. And when Congress failed to reauthorize PEPFAR just a short time later, it plunged the program into what can only be called permanent MAGA purgatory.

Last month, the Kaiser Family Foundation estimated that the failure to reauthorize PEPFAR will result in <u>11 million new HIV infections</u> and an additional <u>3 million</u> AIDS-related deaths.

Among other attacks on federal health agencies, Health and Human Services Secretary Robert Kennedy Jr. plans to lay off the entire staff of the Office of Infectious Diseases and HIV/AIDS Policy, which was not only working to end the HIV epidemic in the United States but was one of the few federal agencies specifically committed to overcoming still-prevalent racial health disparities in AIDS services.

The National Institutes of Health has canceled more than 250 grants for research into AIDS – equating to close to a billion dollars a year – and is still working on adding more to the list. And just two weeks ago, the Trump Administration moved to <u>cancel</u> multiple HIV <u>vaccine</u> studies, including some that already showed there might really be a way to prevent HIV disease altogether.

Many, mostly poor people with HIV disease are losing access to Pre-exposure Prophylaxis, or PrEP, because of the gutting of the federally supported programs that pay for it — and this will worsen with the attacks on Medicaid to protect a tax break for the rich.

And not only all that, but in March, the Supreme Court heard oral arguments questioning whether private insurance companies should even still <u>be required</u> to continue to pay for PrEP and other preventative HIV medications. If the Court sides with the insurance industry, along with all the other malevolent decisions being made to abandon the fight against AIDS in Washington, we will almost definitely see AIDS come roaring back, and the new pandemic is not just going to be the people they don't care about getting AIDS, it's going to be their own sons, daughters, nieces and nephews, co-workers and neighbors.

AIDS has never been just a disease just of gay men and drug users, and if they get rid of PrEP, and throw away all the progress we've made on a vaccine, the rest of the country is going to learn that fact very painfully, very soon.

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So.

A famous revolutionary from over a century ago once asked, <u>What Is To Be Done?</u> Because of my history, I've been asked that question more than once. And to be honest, unlike in the time of the famous revolutionary, our reality today is so overwhelming it's sometimes hard to come up with an answer.

But what I do know is what I believe.

I believe that at our base we should at least be doing the things we've already shown we know how to do. We know to <u>organize</u>, and in the immortal words of thousands of demonstrators from years ago, we know how to "Act Up, Fight Back, Fight AIDS." Even in the face of the overwhelming MAGA power being leveraged against us...

... we still have no choice but to fight back.

We obviously have to use all the modern tools available to us to tell the story of the 21<sup>st</sup> Century AIDS emergency, organizing online, posting on social media, doing podcasts, finding ways to creatively use artificial intelligence. We need to use these tools to tell the stories of the millions of people living with HIV whose lives stand in the balance, and of the <u>pure evil</u> of the people who are trying to take away our medications, our services, our very lives.

Yes, modern media tools are critical, but we also need to mobilize <u>on the ground.</u> If you think you've done your duty with angry posts on Instagram, think again.

We need to recreate the kinds of grass roots movements and organized campaigns that <u>demand</u> attention to the AIDS crisis and the protection of the services that are keeping people alive.

We need to collaborate among nonprofits, for-profits, healthcare organizations, faith groups, neighborhood groups community organizations, researchers, media experts, activist groups, who themselves are fighting their <u>own</u> desperate battles on a wide variety of other fronts to prevent the dawn of Trump's New American Vision.

And most of all, just as we did decades ago, we need to bring that battle, as best we can with our limited power and resources, <u>directly to the enemy</u>, even though the risks of doing so in 2025 are significantly higher than they were back in 1985.

We can't afford to just <u>advocate</u> to bureaucrats, politicians, and decisionmakers, <u>we need</u> <u>to confront them</u>, and <u>demand</u> that they throw off their fuzziness and confusion, and their cowardice, and their selfishness, and raise their voices against the <u>evil</u> that those whose policies encourage the death of people with AIDS represent.

And we need to do the research, collect the data, tell the tales, to make sure that <u>no one</u> can ignore the stories of the <u>new</u> battle to combat AIDS, the 21<sup>st</sup> Century battle, here in Philadelphia, and in America, and everywhere else there are innocent people at risk.

To too many Americans, Making America Great Again means "I don't give a damn about people who need help."

We need to wake up every day and say to ourselves, "Today, I'm going to do <u>something</u> that shows 'I <u>do</u> give a damn about people with HIV."

And of course, we cannot forget the tools of the old days. We need to bombard the inboxes, phone lines, and mailboxes of our elected officials and government bureaucrats. We need to follow them around. We need to throw our voices, and our bodies, at the enemy wherever we find them, just as we did decades ago. We need to take risks.

Fighting for people with AIDS and for the systems of care for people with AIDS, like the disease itself, is <u>a life-or-death battle</u>. We need to fight that battle, <u>feeling that</u> in our bones. We need to be <u>unshakeable</u>, <u>tenacious</u>, <u>immovable</u>. We need to be willing to take risks.

In simple terms, we need to get in the enemy's way.

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I prepared most of this talk a few weeks ago. I realized when writing them that my plea to take <u>direct action</u> to protect people with HIV disease, and not just safely express our anger on signs at big demonstrations, or by posting on TikTok or Instagram or Facebook, that my plea can well apply to the many other threats that the Trump Administration represents. In the end, these principles apply to all the struggles that the people of the United States are today being challenged to fight, because Trump and his acolytes have taken over many of the levers of power and influence, that are, right this minute as we speak, re-defining the very future of our nation.

They are already well on the way to building a new, more selfish, more dangerous America, one where there are many, many other struggles we all need to fight as they try to Make America Great Again in their own image.

Advocating for people with HIV disease is just one of those fights.

But: in the spirit of nonviolent civil disobedience taught to us by Gandhi and King, I say:

Let those of us fighting for people with HIV be the <u>loudest</u>, let us be the most <u>audacious</u>, the most <u>in-your-face</u>, the most <u>aggressive</u> of all the struggles against Trump's agenda. Let our fight be the most <u>visible</u>. Let it be the <u>one struggle</u> among all the fights against what Donald Trump represents that shows that when the people <u>themselves</u> rise to fight for <u>their</u> own lives and the lives of the people they love ... they can win.

## We can win.

That is the <u>proven</u> legacy of AIDS activism here in Philadelphia, and the simple reason I came here today was to <u>remind</u> you of that.

Our cause is the cause of simple justice.

And I've always believed, you should <u>never</u> give up when you are on the side of simple justice.

Let us all commit today to breathe new life into our movement.

Let us not wait for someone else to step up and do it.

Let us not be distracted by all the noise or give in to the comfort of hopelessness and fear.

Let our battles begin, *right here*, *right now*.

Let the battles begin, today.

Remember: Act Up, Fight Back, Fight AIDS!

Thank you so much for your attention.

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