

My name is Keith Waltrip and I am the HIV Clinical Supervisor at Access Community Health Network. ACCESS has 34 health centers in the city of Chicago and we provide a wide variety of medical and behavioral health services in underserved communities.

Today you are going to hear a lot of statistics about HIV in our city, but I would like to provide you with a human face to those stats.

At our Rogers Park health center, we regularly have teenage girls come in for pregnancy tests. If the test comes back positive, we then ask to run an HIV test. Last year we had a young girl whose tests came back positive for both—pregnancy and HIV.

At our Westside health center, we had a woman who came in for a general physical. She asked for an HIV test and it came back positive. She is a young, graduate student with a bright future ahead of her, who now has to deal with the ramifications of being HIV positive.

At our Booker health center on the south side, an adult mother came in for prenatal care. She had an HIV test done and it came back positive. She is now afraid for herself and her unborn child.

All of these cases involve women of color who are in dire need of HIV information. Unfortunately, the CDC is drastically changing their funding priorities around HIV education and making the money available only to those who are positive. I can't stress enough that both positive and negative individuals need HIV education. Had the women I mentioned earlier had better access to HIV information and education, perhaps one or all of them would not be HIV positive today.

I have been an HIV educator for over 10 years and still regularly do HIV trainings. I still get questions concerning HIV transmission in regard to bug bites, toilet seats and public phones. I encounter married women who think they cannot get HIV because they have a gold ring around their finger. It is precisely this lack of basic information and untrue assumptions that have contributed to the HIV epidemic.

The one million dollars we are asking for will make a difference. It will put outreach workers in the community. It will purchase condoms. It will purchase educational materials. It will prevent HIV transmission. It will save lives.

America in my opinion is a reactive nation. It waits to see what happens and then acts. Luckily, the city of Chicago has not followed that trend. It did an outstanding job proactively vaccinating individuals against Meningitis. I am asking that you continue to follow that same proactive approach in regard to HIV education. Please don't make a mistake that would cause those of us who work in this field to have to REACT to even more cases of HIV transmission.

Thank you for your time and consideration.

Keith Waltrip, LPC

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