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FOR IMMEDIATE RELEASE

Tuesday, November 29, 2011

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Mayor Rawlings-Blake Receives Prevention Plan from Baltimore City Commission on HIV/AIDS

BALTIMORE, MD. (November 29, 2011)—Today, Mayor Stephanie Rawlings-Blake received from the Baltimore City Commission on HIV/AIDS an aggressive plan to dramatically reduce new HIV infections, expand treatment, coordinate services and make a significant improvement to the status of the HIV/AIDS crisis in Baltimore by 2015. The plan adopts specific, measurable goals in four key areas and outlines a variety of strategic initiatives to achieve those goals in an accelerated timeframe.

“This is a comprehensive roadmap for HIV/AIDS coordination, treatment, and reduction in Baltimore,” said Mayor Rawlings-Blake. “It is a call to action that can change lives and change our city with a coordinated set of strategies, which can help those who are not infected stay HIV-free, improve the lives of those who are HIV-positive, and improve that provision of health care to the most at-risk populations.”

The four key goals of the plan are to reduce new HIV infections by 25% in Baltimore City by 2015; increase access and improve health outcomes by facilitating earlier, more continuous, and more comprehensive care; reduce HIV-related health disparities by focusing resources and coordinated services on the most at-risk populations; and achieve a more collaborative City response by creating effective linkages between services providers, advocacy organizations, and community-based models. The measurable goals and specific strategic initiatives outlined for each of the key goals are designed to drive aggressive and fundamental changes, yet are calibrated to be realistically achievable by 2015.

According to the Chairman of the Commission, William A. Blattner, M.D., associate director of the Institute of Human Virology at The University of Maryland School of Medicine, the report was based on up-to-the-minute results of international scientific research into HIV/AIDS, and the majority of the recommendations are based in the emerging scientific consensus that early and comprehensive treatment is the most effective preventive measure currently available. The report

was also deliberately aligned with the U.S. national goals for HIV/AIDS established in 2010 in an effort to maximize the City of Baltimore's ability to access and effectively implement all resources available.

"I thank the commission for focusing on the science of what is possible, and for making recommendations that are consistent with the very best public health practices," added Dr. Blattner. "If we follow the recommendations, community models, and individual behaviors that are outlined in this report, we will make an extraordinary difference for Baltimore and for thousands of Baltimore residents by 2015. These plans are realistic and achievable—and it is now incumbent on everyone to work together to put them into action."

The Commission worked closely with the Baltimore City Health Department to ensure that the targets and strategies are also consistent with the Healthy Baltimore 2015 initiative that was launched by the City Commissioner of Health, Dr. Oxiris Barbot. That template included a specific section devoted to reducing the impact of HIV/AIDS in the city.

"I'm pleased with the work of the Commission," said Barbot. "This plan helps to further cement the work that needs to be done to quell the ongoing HIV epidemic. It clearly lays out a plan that we will use to hold ourselves and each other accountable to achieving measurable results."

City Council President Bernard "Jack" Young applauded the report and long-term plan, adding:

"Baltimore City has been in a declared HIV/AIDS crisis since 2002. The City Council is looking forward to working with the Mayor and the citizens of Baltimore to make a real difference in that status by 2015."

Members of the Commission stressed that the report provides critical guidelines for dramatically reducing HIV/AIDS in Baltimore, but reaching the target goals that have been established cannot be achieved unless communities and individuals also make effective prevention and treatment of HIV/AIDS a priority.

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