Remarks on Signing the Ryan White CARE Act Amendments of 1996
May 20, 1996

Good morning. Senator Kassebaum, Senator Hatch, Senator Frist, Congressmen Waxman and Pelosi and Gunderson—Congresswoman Pelosi. [Laughter] And of course, the people who came in with me, our AIDS policy director, Fatsy Fleming, and Jeanne White, who deserves a lot of credit for this day. I am pleased to be here to sign legislation to continue the Ryan White CARE Act for the next 5 years.

I also want to thank Secretary Shalala, who is in Geneva, and Senator Kennedy, who couldn't be with us today but who has been a real leader on this issue. I want to thank all of you representing dozens of organizations in this room who are on the frontlines of this struggle and also those whom you represent all across America who could not be here in the room today but who have done their part as well.

And let me once again say a special thanks to Jeanne White for standing here today. Your fine son became a hero to many of us. He was a brave young man who taught America the truth about AIDS. He helped people all over the world to understand that people with AIDS deserve not only the best medical care but also our compassion and our love. And we’re eternally grateful for that.

It’s hard to believe, but AIDS has now been with us for nearly two decades. In that time, more than half a million Americans have been diagnosed; more than 300,000 of our fellow citizens have died. AIDS has taken too many friends and relatives and loved ones from every one of us in this room. It has shaken the faith of many, but it has inspired a remarkable community spirit, as evidenced by your presence here today.

We are not powerless in the face of this challenge; look how far we’ve come. At one time AIDS was thought of as inevitably the end of life, the death of hope. But today, through the twin miracles of science and spirit, we’re making great progress. People are living longer; infection rates are going down among a number of previously high-risk groups; there is hope for a cure.

We know that AIDS affects all Americans. Every person with HIV or AIDS is someone’s son or daughter, brother or sister, parent or grandparent. We cannot allow discrimination of any kind to blind us to what we must do.

The Ryan White CARE Act has been a big part of America’s progress. Since it became law in 1990, this bill has helped hundreds of thousands of people to get the care they need in clinics and doctors’ offices. It’s kept people out of hospitals so they could be cared for at home, surrounded by families and loved ones. It’s paid for the growing assortment of promising drugs that are helping so many people with AIDS to live longer and healthier lives. I’m proud that the FDA has speeded up approval of these new drugs.

I’m also very pleased that funding for this program has more than doubled in the last 3½ years. And that’s very important, because as all of you in this room know, it fills the gaps in the Medicaid program. Half the people who are infected get their care through the Ryan White CARE Act and, of course, 90 percent of the children do.

As I sign the legislation, I also want to note that today the Department of Health and Human Services has awarded $350 million in funds authorized under this bill in all 50 States and now in 49 U.S. cities, up from 23 just 3 years ago. We’re also making available another $52 million to help more people with AIDS get the drugs they need. And this legislation will help States to capitalize on a recent medical breakthrough: We now know that with voluntary testing and the use of AZT, we can prevent HIV transmission from a pregnant mother to her child. In the last year alone, there has been a 10 percent reduction in the number of infected children. It is estimated that we can actually end this tragic form of transmission by the end of this century, just 4 years away. It is our job to make that happen.

But even as we celebrate our progress, we shouldn’t forget that the fight is not over. We have to do more to stop the rising tide of infection among women, communities of color, and young people, especially young gay men. Until there is a cure, we cannot and must not rest.

In his autobiography, Ryan White describes himself as “just another kid from Kokomo.” We
know he was much more than that. He taught a nation to care instead of hate, to embrace people living with AIDS as a part of our American family, to extend always the hand of hope. There are others in this room who had children that are a lot like him. I thank all of you, and I thank all of you who have fought this battle for so long.

This legislation offers hope for another 5 years. Let us all pray that no President will ever have to sign another bill because, by then, we will have found a cure for AIDS and a vaccine to protect every American.

Let me again thank the Members of Congress who are here and note that this bill passed by a voice vote in the Senate and with only 4 dissenting votes in the House of Representatives—I believe 414 for. So that's a great tribute to the Members of Congress in both parties who spoke out in favor of this. And I thank those who are here, and Senator Kennedy especially, for what they have all done.

Thank you very much.

NOTE: The President spoke at 11:25 a.m. in the Roosevelt Room at the White House. S. 641, approved May 20, was assigned Public Law No. 104–146.

Statement on Signing the Ryan White CARE Act Amendments of 1996

May 20, 1996

Today I have signed into law S. 641, the Ryan White CARE Act Amendments of 1996.” This bill reflects our Nation’s continuing commitment to care for people living with HIV and AIDS, as well as our efforts to extend the quality and length of their lives. The reauthorization of this vital program by overwhelming bipartisan majorities in the Congress sends a clear message that this country continues to care about the thousands of our fellow citizens affected by the AIDS epidemic. Under my Administration, funding for the Ryan White CARE Act grants has more than doubled since fiscal year 1993.

This bill would authorize appropriations during fiscal years 1996–2000 for grants that fund medical and support services to people with HIV and AIDS across the Nation. Under S. 641, the Ryan White CARE programs will continue partnerships between the Federal Government, the States, many cities, community organizations and clinics, and a broad array of health care providers. With its emphasis on locally determined, outpatient community-based care, we will relieve the fiscal burden caused by utilizing inappropriate and expensive inpatient care in public hospitals.

Six short years ago when the Ryan White CARE Act of 1990 was first enacted, a cumulative total of over 161,000 cases of AIDS had been reported to the Centers for Disease Control and Prevention (CDC) and over 100,000 Americans had died of the disease. As of March 1996, over 530,000 cases have been reported, and there have been more than 320,000 American deaths. AIDS is the leading cause of death for all Americans aged 25 to 44. It is estimated that between 600,000 and 900,000 Americans are now living with HIV disease, and CDC estimates that approximately 40,000 Americans become infected every year.

Prior to the Ryan White CARE Act, there were many communities where the health care infrastructure was collapsing under the sudden and intense burden posed by the AIDS epidemic. Many individuals with HIV disease were not receiving needed health care and support services. States, cities, and individual service providers were struggling to provide care for the growing numbers of people with HIV disease who increasingly came from disenfranchised groups, with little or no income, and no health insurance or other sources of support to pay for needed care.

Today more than 300,000 people receive services under the various programs supported by the Ryan White CARE Act. These services range from direct provision of outpatient primary care to supportive services that permit people with HIV and AIDS to continue living productive, independent lives. Since the original enactment of the Ryan White CARE Act 6 years ago, the number of cities eligible for special