

## AFC Polls Candidates on AIDS-Related Issues

### Respondents Support Healthcare Expansion for People with HIV/AIDS

Each election year, the AIDS Foundation of Chicago (AFC) surveys candidates on AIDS-related policies and publishes the results to educate voters and the general public. AFC is a non-partisan organization and does not endorse candidates for public office.

AFC mailed the survey to 301 candidates facing primary elections in races for U.S. Senate, U.S. House of Representatives, Illinois State Senate, and Illinois House of Representatives. Seventy-seven Illinois candidates for public office responded to the AFC's 2008 candidate survey, for a response rate of 26 percent.

AFC conducts the survey to help inform AIDS advocates, those living with HIV/AIDS, and the general public about the HIV/AIDS policy positions taken by candidates for public offices in Illinois. AFC's survey and positions begin on page 2 for congressional candidates and page 7 for state candidates.

A majority of candidates who responded to the AFC survey endorsed efforts to expand access to healthcare programs for people living with HIV/AIDS. The candidates also expressed support for comprehensive, science-based sexuality education in schools, increased government funding for AIDS-related services, as well as reforms that would expand available healthcare services.

Most federal candidates supported increased research into new HIV prevention technology and expanded public benefits for people with HIV/AIDS.

#### **About the survey:**

AFC asked congressional candidates 22 questions on healthcare, disease prevention, research, public benefits, immigration, anti-discrimination policies, incarceration, and housing. The questions and responses can be found in the first section of this report on pages - **2-6**. No candidates for U.S. Senate responded.

AFC asked candidates running for the Illinois State Senate and Illinois House of Representatives 10 questions regarding healthcare, disease prevention, and housing. The questions and responses can be found in the second section of this report on pages **7-12**.

Candidates were asked to answer "yes", "no" or "undecided" to HIV/AIDS policy questions. Only races in which one or more candidate responded to the survey are included in this report.

#### **Vote on February 5**

AFC urges all eligible individuals to vote in the primary election on **Tuesday, February 5, 2008**. For additional information, to find out what district you live in, or to find your polling place, please contact the Illinois Board of Elections at 800-923-VOTE or visit [www.elections.state.il.us](http://www.elections.state.il.us).

If you will be out of your voting area on election day or are physically unable to travel to your polling place, you may request an absentee ballot application, due no later than January 31, 2008. Request an absentee application in person at your local Board of Elections office or call the Illinois State Board of Elections at 1-800-923-VOTE to receive your application in the mail.

Visit [aidsvote.org](http://aidsvote.org) for responses from candidates seeking the Democratic and Republican presidential nomination.

# **Questions Posed to Candidates for Congress**

## **DOMESTIC**

**1. Will you support the implementation of a comprehensive national AIDS strategy, which includes measurable goals, timelines and accountability mechanisms, and is designed to bring HIV incidence down, increase access to care, and reduce HIV-related health disparities in the U.S.?**

*AFC ANSWER: YES— AIDS is a national crisis. The next President and Congress should develop a results-oriented AIDS strategy. The wealthiest nation in the world is failing its own people in responding to the AIDS epidemic at home. In the US, over a million people are living with HIV and in 2002, an estimated half of people living with HIV/AIDS were not in care. Between 40,000 and 60,000 new HIV infections occur annually. The U.S. must develop what it asks of other nations it supports in combating AIDS: a national strategy to achieve improved and more equitable results.*

**2. Do you support the Early Treatment for HIV Act (ETHA), which expands Medicaid for HIV-positive people who would otherwise need to become completely disabled in order to qualify for Medicaid-covered services?**

*AFC ANSWER: YES— ETHA creates a state option to provide Medicaid access to uninsured, poor and low-income people living with HIV before they would otherwise qualify for Medicaid assistance through a disability diagnosis of AIDS. Currently, Medicaid eligibility rules require most people to become disabled by AIDS before they become eligible for Medicaid-based care which could have prevented HIV disease from progressing to AIDS in the first place. Securing passage of ETHA would create significant health, economic, and public health benefits.*

**3. Will you support lifesaving HIV treatment and care for all people living with HIV through universal healthcare initiatives, utilizing the 2004 recommendations on HIV care expansion from the Institute of Medicine?**

*AFC ANSWER: YES—We share the conclusion reached in the Institute of Medicine's May 2004 report, Public Financing and Delivery of HIV Care: Securing the Legacy of Ryan White ("IOM report") that an entitlement program is required to respond adequately to the complex, ever-evolving healthcare needs of low-income individuals with HIV, and to eliminate the grave disparities that exist in our current health care delivery system. The current systems of HIV care, conceived early in the epidemic, cannot meet the needs of the uninsured and underinsured HIV-infected population. A nationwide federally-funded HIV healthcare program for low-income people with HIV as recommended by the IOM report would be comprehensive, dependable and flexible. It would ensure early and comprehensive access nationwide to a range of essential care and treatment services necessary to maintain health for people with HIV.*

**4. Do you support increasing federal appropriations for science-based HIV prevention programs to no less than \$1 billion annually to respond to the growth in the domestic HIV/AIDS epidemic, especially as it relates to unconscionable health disparities in communities of color and among women, gay/bisexual men, and transgender people of all races/ethnicities?**

*AFC ANSWER: YES—Despite significant declines in new infections since the early days of the epidemic, an estimated 40,000 new infections have occurred each year in the U.S. for more than a decade, and news reports suggest that the CDC is likely to raise that estimate to 55,000 new infections per year. Our nation has developed effective science-based strategies—such as condom distribution, sterile syringe access initiatives, social marketing campaigns, and peer-based risk-reduction services—to dramatically curb new infections. A minimum \$300 million increase in annual federal funding for science-based HIV prevention programs is needed to make additional progress reducing new HIV infections in the U.S.*

**5. Do you support the Microbicide Development Act, which creates an office within the National Institutes of Health dedicated to the discovery and development of anti-HIV topical agents—known as microbicides—needed to prevent sexual transmission of HIV?**

*AFC ANSWER: YES—The development of topical microbicides holds tremendous promise in preventing future cases of HIV in the U.S. and around the globe. Microbicides are especially needed to halt new HIV infections among women who need prevention tools they can control rather than relying on their male sex partner or spouse to use condoms. In many instances, the mere suggestion of condoms triggers suspicion, isolation, and/or violence. Women and gay/bisexual men need access to rectal microbicides.*

**6. Do you support the JUSTICE Act (H.R. 178), which would prevent transmission of HIV within the incarcerated population by providing condoms for federal prison inmates?**

*AFC ANSWER: YES—Rates of HIV can be two or three times higher in jails and prisons, as compared to community settings. Providing incarcerated individuals with HIV prevention education and access to condoms will give them the ability to protect themselves and their loved ones from infection.*

**7. Given the overwhelming body of evidence demonstrating the efficacy of needle exchange as HIV prevention, do you support legislation to lift the ban on federal funding for needle exchange as a strategy to reduce HIV transmission among injection drug users and their loved ones?**

*AFC ANSWER: YES—Scientific research has already proven that increased access to sterile syringes reduces new HIV infections without increasing drug use.*

**8. “Abstinence-only-until-marriage” programs have proved ineffective and actually harmful to young people by contributing to lower rates of protected sexual contact and higher rates of sexually transmitted diseases. Do you support an end to the federal funding for “abstinence-only-until-marriage” programs and instead support a dedicated funding stream for comprehensive sex education?**

*AFC ANSWER: YES—All youth should receive age-appropriate health education that is comprehensive and medically accurate so that they can learn about abstinence and risk reduction and can make informed choices to prevent HIV infection, other sexually transmitted diseases, and unintended pregnancy.*

**9. Do you support increased federal funding for Housing Opportunities for People With AIDS (HOPWA) and other pertinent federal housing programs, toward the goal of assuring adequate and safe housing is available for all disabled and low-income people with HIV/AIDS in the U.S.?**

*AFC ANSWER: YES—Without a safe and affordable place to live, people with HIV/AIDS run the risk of severely compromising their health. Research shows that stable housing promotes treatment adherence and decreases utilization of emergency rooms and hospital visits, while reducing high-risk behaviors and boosting HIV prevention efforts.*

**10. Do you support the repeal of the ban against people living with HIV entering the United States as travelers or immigrants, and which bars those in the U.S. from legalizing their immigration status?**

*AFC ANSWER: YES—The ban serves absolutely no scientific purpose. Only a handful of countries, including Saudi Arabia and Iran, have a similar policy regarding people with HIV. To be an international leader in HIV/AIDS, the U.S. must demonstrate anti-discriminatory practices by lifting the immigration ban on HIV-positive people.*

## **GLOBAL**

**11. In recent years, the United States (along with the G8 countries and the United Nations) has repeatedly committed to achieving universal access to HIV/AIDS prevention, treatment, and care by 2010. If elected, will you commit to supporting funding levels that would at least double the number of HIV-positive people on treatment and continue to provide treatment to one-third of all those who desperately need medication, estimated to be at least \$50 billion by 2013 for the global fight against HIV/AIDS (including our fair share of the Global Fund)?**

*AFC ANSWER: YES—Given that the United States possesses one-third of the world’s wealth, the U.S. should commit one-third of the developing world’s needed funding for HIV/AIDS care, treatment, and prevention. By doing so, the U.S. can influence the other wealthy nations of the world to contribute their fair share.*

**12. As part of its global AIDS funding, should the U.S. increase spending for HIV prevention programs that are scientifically proven to halt the spread of HIV including needle exchange and comprehensive and age-appropriate sexuality education programs that include, but are not limited to, abstinence promotion and condom distribution?**

*AFC ANSWER: YES—Each day, thousands of people worldwide are infected with HIV—over half of them young people. The world drastically needs increased funding for programs to stop the spread of the disease that are based on “what works.”*

**13. Do you support the removal of the requirement that one-third of U.S. global AIDS funding for all prevention efforts go to “abstinence-only-until-marriage” programs?**

*AFC ANSWER: YES—We know that abstinence-only programs have been shown to be ineffective and harmful, at home and abroad. Exporting them, and requiring poor countries to spend scarce U.S. funding on them, is an ineffective use of money and inappropriate for cultural, scientific, and human rights reasons.*

**14. In order for the U.S. to meet the goals agreed to in the President’s Emergency Plan for AIDS Relief (PEPFAR), the U.S. must increase the number of trained health workers in the developing world. As a part of overall funding, do you support the U.S. investing its fair share (\$8 billion over 5 years) towards**

**the World Health Organization's funding goal to address this shortage to increase the number of health workers in Africa by at least one million?**

*AFC ANSWER: YES—Among the biggest roadblocks today to treatment is the lack of doctors, nurses, and community health workers. Without healthcare infrastructure, sufficient training, and adequate salaries, healthcare workers often leave Africa to work in wealthier nations. We must reverse this trend and support the development of a solid healthcare infrastructure across Africa.*

**15. Do you support the Jubilee Act for Responsible Lending and Expanded Debt Cancellation (HR 2634/S 2166), which would expand debt cancellation to up to 24 additional nations that need debt relief to fight AIDS and poverty, assuming these nations meet strict criteria?**

*AFC ANSWER: YES—Many countries in Africa spend more money annually repaying debts to institutions like the World Bank than they do on their entire healthcare budget. While some countries have gotten some debt relief recently, the majority of countries in need have been left out. Cancelling the debt of impoverished countries could free up billions each year to fight AIDS, build health and education systems, and improve the lives of millions.*

**16. Do you support the rights of sovereign nations to access quality-assured, low-cost generic medication to meet their pressing public health needs under the World Trade Organization's Declaration on Trade Related Aspects of Intellectual Property Rights (TRIPS)?**

*AFC ANSWER: YES—Generic AIDS drugs can be manufactured for as little as \$140 per patient per year. Newer drugs are needed as people, in the regular course of the disease, become resistant to older drugs. Free Trade Agreements (FTAs) would create unprecedented protections for drug companies, and restrict generic production of these new drugs, forcing impoverished nations to purchase "name-brand" medication costing on average \$10,000 per patient per year. Without generic production, universal AIDS treatment access will be impossible.*

**17. Will you support the adoption of humanitarian licensing policies that ensure medications developed with U.S. taxpayer dollars are available off-patent in developing countries?**

*AFC ANSWER: YES—AFC supports trade policies that protect and expand poor countries' right to affordable, high-quality generic drugs for important health needs. AFC also supports humanitarian licensing policies that ensure drugs developed with taxpayer resources are available off-patent in developing countries.*

**18. Will you work to repeal the requirement that federally-funded non-governmental organizations working abroad condemn prostitution, a pledge that interferes with the ability of groups to adequately reach and help sex workers?**

*AFC ANSWER: YES—The Global AIDS Act, which authorizes PEPFAR, contains several restrictions on funding for prevention activities and on organizations working with commercial sex workers. Groups whose HIV/AIDS work in other countries has no connection with commercial sex workers will be required to pledge in writing to oppose commercial sex work or risk losing federal funding. There needs to be an end to the anti-prostitution loyalty oath that stigmatizes sex workers and discourages them from seeking care. This "official stigmatization" of commercial sex workers leads to their further isolation. Sex workers deserve access to prevention.*

**19. Will you work to ensure the U.S. achieves its share of targets outlined in the Millennium Development Goals, including halving the number of people who die of tuberculosis and are affected by malaria?**

*AFC ANSWER: YES—The U.S. should keep the promise of universal access to prevention, care and treatment by providing at least \$50 billion by 2013 for the fight against HIV/AIDS. The U.S. should also contribute the U.S. fair-share of the budget of the Global Fund to Fight AIDS, Tuberculosis and Malaria (GFATM).*

**20. Will you work to ensure the U.S. provides its fair share of the funding needed to establish universal access to basic education and to provide community-based support, health and nutrition to the millions of children orphaned and made vulnerable to AIDS?**

*AFC ANSWER: YES—More than 33 million people live with HIV worldwide, and each year more than three million people die from AIDS. By 2010, there will be as many as 20 million children orphaned by AIDS. The U.S. should be meeting the needs of children orphaned and made vulnerable by AIDS through community-based support, including ensuring children a loving permanent home, food to nourish them, free public schools, laws and systems in place that protect them, access to medical care, and employment training programs to ensure self-sufficiency.*

**21. Will you support improving the coordination and effectiveness of U.S. development assistance through the creation of a cabinet-level, poverty-focused development agency?**

**AFC ANSWER: YES**—The U.S should create an independent, poverty-focused cabinet-level agency to ensure that poverty alleviation at home and abroad is as much a priority as defense or diplomacy. This agency should prioritize investments to reduce suffering in the most impoverished nations and communities, coordinating efforts between developing countries, local governments, other donors and multilateral institutions.

**22. Will you support the U.S. making significant progress towards providing an additional one percent of the U.S. budget to fighting poverty in impoverished countries?**

**AFC ANSWER: YES**—The U.S. should fund HIV/AIDS programs as part of a commitment to direct at least an additional one percent of the U.S. budget toward meeting basic needs and fighting poverty in impoverished countries.

Y=Yes N=No U=Undecided \*=no answer *Italics* denote incumbent candidates. Answers in **Bold** denote agreement with AFC. \* indicates candidate not answering. Candidates and parties are listed in alphabetical order.

Candidates for Congress	National AIDS Strategy	Early Treatment for HIV Act	Universal Healthcare Initiatives	Science-based HIV Prevention	Microbicide Development Act	JUSTICE Act	Needle Exchange Programs	Ending Abstinence-only Education	HOPWA	Repeal HIV+ Immigration Ban	Global Fund	Increase Funding for HIV Prevention	Remove 1/3 Abstinence-Only Rqmt.	WHO Funding Goal	Jubilee Act	Low-Cost Generic Medication	Humanitarian Licensing Policies	Repeal Anti-prostitution Pledge	Millennium Development Goals	Fair Share of Funding for Education	Improving Coordination & Effectiveness	1 percent of U.S. Budget to Fight Poverty
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22
<b>Question Number</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>	<b>6</b>	<b>7</b>	<b>8</b>	<b>9</b>	<b>10</b>	<b>11</b>	<b>12</b>	<b>13</b>	<b>14</b>	<b>15</b>	<b>16</b>	<b>17</b>	<b>18</b>	<b>19</b>	<b>20</b>	<b>21</b>	<b>22</b>
<b>AFC ANSWER</b>	<b>Y</b>	<b>Y</b>	<b>Y</b>	<b>Y</b>	<b>Y</b>	<b>Y</b>	<b>Y</b>	<b>Y</b>	<b>Y</b>	<b>Y</b>	<b>Y</b>	<b>Y</b>	<b>Y</b>	<b>Y</b>	<b>Y</b>	<b>Y</b>	<b>Y</b>	<b>Y</b>	<b>Y</b>	<b>Y</b>	<b>Y</b>	<b>Y</b>
<b>1st District</b>																						
<i>Bobby Rush (D)</i>																						
William Walls, III (D)	Y	Y	Y	Y	Y	Y	U	Y	Y	U	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	U	U
Antoine Members (R)																						
<b>3rd District</b>																						
Jerry Bennett (D)																						
Jim Capparelli (D)																						
<i>Daniel Lipinski (D)</i>																						
Mark Pera (D)																						
Jerome Pohlen (G)	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
Michael Hakwins (R)																						
Arthur Jones (R)	Y	Y	Y	Y	Y	U	U	N	Y	N	Y	Y	N	Y	Y	Y	Y	*	Y	Y	U	Y
<b>4th District</b>																						
<i>Luis Gutierrez (D)</i>	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
<b>5th District</b>																						
<i>Rahm Emanuel (D)</i>	Y	Y	Y	Y	Y	N	N	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	N	Y	Y	N	N
Alan Augustson (G)																						
<b>6th District</b>																						
Stan Jagla (D)																						
Jill Morgenthal (D)																						
<i>Peter Roskam (R)</i>																						
<b>7th District</b>																						
Robert Dallas (D)	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
<i>Danny Davis (D)</i>	Y	Y	Y	Y	Y	Y	Y	N	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y

Candidates for Congress	National AIDS Strategy	Early Treatment for HIV Act	Universal Healthcare Initiatives	Science-based HIV Prevention	Microbicide Development Act	JUSTICE Act	Needle Exchange Programs	Ending Abstinence-only Education	HOPWA	Repeal HIV+ Immigration Ban	Global Fund	Increase Funding for HIV Prevention	Remove 1/3 Abstinence-Only Rqmt.	WHO Funding Goal	Jubilee Act	Low-Cost Generic Medication	Humanitarian Licensing Policies	Repeal Anti-prostitution Pledge	Millennium Development Goals	Fair Share of Funding for Education	Improving Coordination & Effectiveness	1 percent of U.S. Budget to Fight Poverty
	Question Number	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21
<b>8th District</b>																						
Melissa Bean (D)	Y	Y	U	Y	Y	U	Y	Y	Y	U	U	U	Y	Y	U	U	U	Y	Y	U	N	N
Randi Scheurer (D)	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
Kenneth W. Arnold (R)																						
Steve Greenberg (R)																						
Kirk Morris (R)																						
<b>9th District</b>																						
John Nocita (D)	Y	Y	Y	Y	Y	Y	Y	Y	Y	N	Y	Y	Y	Y	U	Y	U	Y	Y	Y	Y	N
Jan Schakowsky (D)	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
Morris Schanfield (G)																						
Michael Younan (R)	Y	Y	Y	Y	Y	N	N	N	Y	N	Y	Y	N	Y	N	Y	N	Y	Y	Y	Y	N
<b>11th District</b>																						
Debbie Halvorson (D)																						
Jason Wallace (G)	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
Timothy Baldermann (R)																						
Terry Heenan (R)																						
Jimmy Lee (R)																						
<b>12th District</b>																						
Jerry Costello (D)																						
Rodger Jennings (G)	Y	Y	Y	U	U	Y	N	Y	U	N	Y	U	Y	N	U	N	N	Y	Y	U	U	U
Timmy Richardson (R)																						
<b>13th District</b>																						
Scott Harper (D)																						
Steve Alesch (G)	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
Judy Biggert (R)																						
Sean O'Kane (R)																						
<b>14th District</b>																						
Bill Foster (D)																						
John Laesch (D)	Y	Y	Y	U	Y	Y	U	Y	Y	U	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
Joe Serra (D)																						
Jotham Stein (D)																						
Michael Dilger (R)																						
Chris Lauzen (R)																						
Jim Oberweis (R)																						
<b>19th District</b>																						
Daniel Davis (D)	Y	Y	U	U	U	N	N	N	Y	Y	Y	N	N	Y	Y	Y	Y	N	Y	Y	Y	Y
Joe McMenamin (D)																						
Vic Roberts (G)																						
John Shimkus (R)																						

## **Questions Posed to Candidates for State Offices**

**1. Do you support increasing state funding for HIV/AIDS housing, which helps people living with HIV maintain their health and reduce risk behavior?**

*AFC ANSWER: YES—Housing is prevention. As HIV/AIDS housing resources become increasingly scarce and difficult to access, the need to develop more housing options increases. The prevalence of HIV/AIDS is nine times greater among homeless individuals or those with unstable housing than their housed counterparts. Individuals with HIV who lack stable housing face difficulties maintaining complex medication regimens, proper nutrition, and avoiding infections.*

**2. Do you support increased funding for HIV prevention strategies such as condom distribution and culturally and linguistically appropriate HIV prevention interventions?**

*AFC ANSWER: YES— Even when a cure is developed HIV prevention strategies are our best tools for slowing the epidemic and improving the lives of those affected by HIV/AIDS.*

**3. Do you support targeted efforts by the state to reduce HIV transmission among populations at elevated risk for HIV, such as gay men and other men who have sex with men (MSM), especially men of color?**

*AFC ANSWER: YES—Well into the third decade of the HIV epidemic, rates of HIV infection remain high among gay men and MSM and extraordinarily high among gay men and MSM of color. Gay men and MSM continue to make up the majority of reported HIV cases; 57 percent of men living with HIV in Illinois were infected through sex with another man. To significantly reduce HIV infections among gay men, AFC strongly supports tailored approaches to meet their specific needs, appropriate prevention education, and voluntary HIV testing, with strong patient protections.*

**4. Do you support state funding for new grants programs to expand comprehensive, age-appropriate sex education for Illinois youth?**

*AFC ANSWER: YES— All youth should receive age-appropriate health education that is comprehensive and medically accurate so they can learn about abstinence and risk reduction and can make informed choices to prevent HIV infection, other sexually transmitted infections and unintended pregnancy.*

**5. Do you support allocating state dollars to fund needle exchange programs, which effectively decrease the transmission of HIV and Hepatitis C?**

*AFC ANSWER: YES— Empirical research has proven that increased access to sterile syringes reduces new HIV infections without increasing drug use. With increased sterile syringe access, HIV/AIDS cases among injection drug users fell 42 percent statewide from 2000-2005, while HIV cases declined less, and in some cases increased, among other risk groups.*

**6. In 2007, Illinois enacted legislation that aims to expand HIV testing in medical settings by streamlining the informed consent process, allowing verbal consent for HIV testing, giving providers more options to offer pre-test information, and other changes. Should Illinois allocate \$2 million to train providers on the new law, develop tools for clinicians to expand HIV testing, and purchase rapid HIV testing kits?**

*AFC ANSWER: YES—AFC strongly supports expanded voluntary testing for everyone. Given persistent HIV stigma, AFC also supports strong patient protections, which are instrumental in gaining the trust of at-risk individuals for HIV education, testing and treatment services. IDPH should use funding to assist emergency departments, jails, ambulatory care settings, STD clinics, and other organizations to purchase rapid HIV testing kits, hire additional staff, train medical providers, and develop and disseminate expedited testing protocols.*

**7. Nearly 1.8 million state residents remain uninsured in Illinois. Do you believe the State of Illinois has an obligation to develop a public-private partnership to:**

**a. Contain the cost of health insurance for businesses and individuals with health insurance?**

*AFC ANSWER: YES—Health care spending continues to rise faster than the rate of inflation; in 2005 total national health expenditures rose 6.9 percent, twice the rate of inflation. This alarming rise in expenditures is contributing to the lack of health insurance for nearly 1.8 million state residents in Illinois. Premiums for employer-based health insurance rose by 7.7 percent in 2006. Small employers saw their premiums, on*

average, increase 8.8 percent. It is imperative that the cost of health insurance for both the businesses and individuals of Illinois be contained.

**b. Ensure that all Illinois residents have access to affordable adequate health coverage?**

*AFC ANSWER: YES—1.8 million residents in the state of Illinois are uninsured. When they are sick, they go to the emergency room, where care is more expensive. Research shows that uninsured individuals are sicker than people with insurance. Lack of health insurance causes personal bankruptcies, unnecessary anxiety at the cost of an illness or accident, and denies the individuals coverage that is necessary for them to lead a healthy life. Moreover, people with insurance pay higher rates to compensate doctors and hospitals for care for the uninsured, raising insurance premiums by an estimated \$4,445 per individual in 2005, according to Families USA.*

**c. Are you willing to raise taxes and fees to pay for the initiatives?**

*AFC ANSWER: YES—There is little question that a comprehensive healthcare solution will require new fees, taxes or both. In 2005, people without insurance in Illinois could not pay an estimated \$1.8 billion worth of medical bills, according to Families USA. However, a comprehensive health plan will also lower the rate of increase of costs of premiums, slowing the growth of spending on medical care.*

**8. Currently, the state grants certain rights to married, different-sex couples, such as medical decision making, hospital visitation, disposition of remains, and inheritance of certain state and local pensions. Committed couples in same-sex relationships cannot access these same rights and benefits. Would you support a civil union bill that conferred state rights and benefits to same-sex couples if the bill had no impact on adoptions and did not interfere with the freedom of religious organizations?**

*AFC ANSWER: YES—Committed same-sex couples continue to be treated as legal strangers, barred from hundreds of family protections that the state provides through marriage. For different-sex couples, married status is interwoven with legal and financial benefits for taxes, retirement, property ownership, inheritance, insurance rates, and family and medical care, to name just a few. Medical decision-making, disposition of remains, and hospital visitation are essential issues for people living with HIV, and should be automatically conferred on committed same-sex partners.*

**9. Fiscal experts say that Illinois has a structural deficit that results from a variety of factors, including the 3 percent flat income tax rate and a sales tax system that does not tax services. As a result, essential programs that impact the public's health have not kept pace with the need for services. If elected, will you commit to modernize the state's revenue system without disproportionately impacting low-income families?**

*AFC ANSWER: YES—Illinois' tax structure is archaic and causes hardship for many families. Lower-income households pay a greater percentage of their income in state and local taxes than their wealthier counterparts. The tax system fails to raise enough revenue to adequately fund education, health care, human services and other critical supports that children and lower-income families depend upon. The current revenue system does not keep pace with existing costs, adjusting solely for population growth and inflation over time. Services are a growing component of economic activity, but are not taxed. Without comprehensive fiscal reform, human services, health care, education and the other critical services that children and low-income families depend upon will suffer.*

**10. While the cost of doing business has increased dramatically in recent years, many state public health, human service, and HIV/AIDS service providers have not seen any increase in their funding. In fact, because of inflation, the actual purchasing power of grant funding has declined. If elected, will you work to institute automatic cost-of-doing-business increases?**

*AFC ANSWER: YES—The need and demand for human services is ever increasing, but providers rarely receive funding increase that reflect the increased costs of doing business, such as higher rents, increase fuel costs, or escalating health insurance premiums. These rising expenses restrict the ability of providers to meet increased needs.*

Y=Yes N=No U=Undecided \*=no answer *Italics* denote incumbent candidates. Answers in **Bold** denote agreement with AFC. \* indicates candidate not answering. Candidates and parties are listed in alphabetical order.

Candidates for Illinois State Senate	HIV/AIDS Housing	HIV Prevention Strategies	Reduce HIV Transmission	Comprehensive Sex Education	Needle Exchange Programs	Expand HIV Testing	Contain Cost of Health Insurance	Access to Affordable Insurance	Raise Taxes and Fees	Civil Union Bill	Modernize State Revenue System	Automatic Cost-of-doing-business
	1	2	3	4	5	6	7a	7b	7c	8	9	10
<b>Question Number</b>	1	2	3	4	5	6	7a	7b	7c	8	9	10
<b>AFC ANSWER</b>	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
<b>2nd District</b>												
<i>William Delgado (D)</i>	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
Proco "Joe" Moreno (D)												
<b>3rd District</b>												
<i>Mattie Hunter (D)</i>	Y	Y	Y	Y	Y	Y	Y	Y	U	U	Y	Y
<b>5th District</b>												
Jonathan Bedi (D)	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
<i>Rickey Hendon (D)</i>												
Amy Sue Mertens (D)	Y	Y	Y	Y	Y	Y	Y	Y	U	Y	Y	Y
<b>7th District</b>												
Suzanne Elder (D)	U	Y	Y	Y	Y	U	Y	Y	Y	Y	Y	Y
Heather Steans (D)	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	U
<b>20th District</b>												
Richard Bradley (D)	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
Carlos Juan Guevara (D)	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
<i>Iris Martinez (D)</i>												
<b>26th District</b>												
Bill Gentes (D)	Y	Y	Y	Y	Y	Y	Y	Y	U	Y	Y	Y
Richard Hammes (D)	Y	Y	Y	Y	Y	U	Y	U	Y	Y	Y	Y
Dan Duffy (R)												
<b>27th District</b>												
Peter Gutzmer (D)	Y	Y	Y	Y	U	Y	Y	Y	*	Y	U	U
Matt Murphy (R)												
<b>36th District</b>												
<i>Mike Jacobs (D)</i>	Y	Y	Y	Y	Y	Y	Y	Y	Y	U	Y	Y
Paul Rumler (D)	U	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	U
Michael Bertelsen (R)	Y	Y	Y	Y	U	Y	Y	U	U	N	U	Y
<b>45th District</b>												
Marty Mulcahey (D)	Y	Y	Y	Y	N	Y	Y	Y	U	Y	U	Y
Tim Bivens (R)												

Y=Yes N=No U=Undecided \*=no answer *Italics* denote incumbent candidates. Answers in **Bold** denote agreement with AFC. \* indicates candidate not answering. Candidates and parties are listed in alphabetical order.

Candidates for Illinois House of Representatives	HIV/AIDS Housing	HIV Prevention Strategies	Reduce HIV Transmission	Comprehensive Sex Education	Needle Exchange Programs	Expand HIV Testing	Contain Cost of Health Insurance	Access to Affordable Insurance	Raise Taxes and Fees	Civil Union Bill	Modernize State Revenue System	Automate Cost-of-Living-business
	1	2	3	4	5	6	7a	7b	7c	8	9	10
<b>Question Number</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>	<b>6</b>	<b>7a</b>	<b>7b</b>	<b>7c</b>	<b>8</b>	<b>9</b>	<b>10</b>
<b>AFC ANSWER</b>	<b>Y</b>	<b>Y</b>	<b>Y</b>	<b>Y</b>	<b>Y</b>	<b>Y</b>	<b>Y</b>	<b>Y</b>	<b>Y</b>	<b>Y</b>	<b>Y</b>	<b>Y</b>
<b>3rd District</b>												
<i>Luis Arroyo (D)</i>												
Wayne Strnad (D)	Y	Y	U	Y	Y	U	Y	Y	Y	Y	Y	Y
<b>6th District</b>												
<i>Esther Golar (D)</i>	Y	Y	Y	Y	Y	Y	*	Y	U	N	Y	*
Darryl Smith (D)												
Jerry Washington (D)	Y	Y	Y	Y	Y	Y	Y	Y	U	U	Y	Y
<b>7th District</b>												
<i>Karen Yarbrough (D)</i>	Y	Y	Y	Y	Y	Y	U	Y	Y	Y	Y	Y
<b>8th District</b>												
<i>LaShawn Ford (D)</i>	Y	Y	Y	Y	Y	Y	Y	Y	U	U	Y	Y
<b>9th District</b>												
<i>Arthur Turner (D)</i>	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
Dorothy Walton (D)												
<b>10th District</b>												
<i>Annazette Collins (D)</i>												
Eddie Winters (D)	Y	Y	Y	Y	N	U	Y	Y	Y	Y	Y	U
<b>11th District</b>												
<i>John Fritchey (D)</i>	Y	Y	Y	Y	Y	Y	Y	U	U	Y	Y	y
<b>12th District</b>												
<i>Sara Feigenholtz (D)</i>	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
<b>13th District</b>												
<i>Gregory Harris (D)</i>	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
<b>14th District</b>												
<i>Harry Osterman (D)</i>	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
<b>16th District</b>												
<i>Louis Lang (D)</i>	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
<b>17th District</b>												
Daniel Biss (D)	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
<i>Elizabeth Coulson (R)</i>	Y	Y	Y	Y	Y	Y	*	Y	U	Y	Y	U
<b>24th District</b>												
<i>Elizabeth Hernandez (D)</i>	Y	Y	Y	Y	Y	Y	Y	Y	Y	U	Y	Y
<b>25th District</b>												
<i>Barbara Flynn Currie (D)</i>	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
Sharon Latiker (D)												
<b>26th District</b>												
William Burns (D)	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
Paul Chadha (D)	Y	Y	Y	Y	Y	U	U	Y	*	Y	*	Y
Sylvester Hendricks (D)												

Candidates for Illinois House of Representatives	HIV/AIDS Housing	HIV Prevention Strategies	Reduce HIV Transmission	Comprehensive Sex Education	Needle Exchange Programs	Expand HIV Testing	Contain Cost of Health Insurance	Access to Affordable Insurance	Raise Taxes and Fees	Civil Union Bill	Modernize State Revenue System	Automatic Cost-sharing-business
	1	2	3	4	5	6	7a	7b	7c	8	9	10
<b>Question Number</b>	1	2	3	4	5	6	7a	7b	7c	8	9	10
Phillip Jackson (D)	Y	Y	Y	Y	Y	U	Y	Y	Y	Y	Y	Y
<i>Elga Jefferies (D)</i>	Y	Y	Y	Y	U	Y	Y	Y	U	U	Y	Y
Kenny Johnson (D)	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
<b>27th District</b>												
<i>Monique Davis (D)</i>	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
Stanley Moore (D)												
<b>28th District</b>												
Pamela Gaston (D)												
Michael Mayden (D)	Y	Y	Y	Y	Y	*	Y	Y	U	N	Y	Y
Earick Rayburn (D)	Y	Y	U	Y	Y	Y	*	Y	U	U	Y	Y
<i>Robert Rita (D)</i>												
James Taylor (D)												
<b>34th District</b>												
<i>Constance Howard (D)</i>	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
<b>38th District</b>												
Toni Ashmore (D)	Y	Y	Y	Y	Y	Y	Y	Y	N	N	Y	Y
<i>Al Riley (D)</i>	Y	Y	Y	Y	U	Y	Y	Y	Y	Y	Y	Y
<b>51st District</b>												
Amanda Howland (D)	Y	Y	Y	Y	Y	*	*	*	*	*	*	*
<i>Ed Sullivan, Jr. (R)</i>												
<b>52nd District</b>												
<i>Mark Beaubien, JR (R)</i>	Y	Y	Y	Y	Y	Y	N	N	N	Y	N	Y
<b>55th District</b>												
Broc Montgomery (D)	U	Y	Y	Y	Y	Y	Y	Y	U	Y	Y	Y
<i>Randy Ramey (R)</i>												
<b>58th District</b>												
<i>Karen May (D)</i>	Y	Y	Y	Y	Y	Y	Y	Y	U	Y	Y	Y
Timothy Stratton (R)												
<b>59th District</b>												
<i>Kathleen Ryg (D)</i>	Y	Y	Y	Y	Y	Y	Y	Y	*	Y	Y	Y
<b>60th District</b>												
Tony Elam (D)												
Angelo Kyle (D)	Y	Y	Y	Y	U	U	Y	Y	U	U	Y	Y
<i>Eddie Washington (D)</i>												
<b>62nd District</b>												
<i>Sandy Cole (R)</i>	Y	Y	Y	Y	Y	Y	Y	Y	Y/N	*	*	Y
<b>68th District</b>												
Clint Little (D)	Y	Y	Y	Y	Y	Y	Y	Y	U	Y	Y	U
Gerry Woods (G)												
<i>Dave Winters (R)</i>												
<b>71st District</b>												
<i>Michael Boland (D)</i>	Y	Y	Y	Y	Y	Y	Y	Y	Y/N	Y	Y	Y
Jerry Lack (D)	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y

Candidates for Illinois House of Representatives	HIV/AIDS Housing	HIV Prevention Strategies	Reduce HIV Transmission	Comprehensive Sex Education	Needle Exchange Programs	Expand HIV Testing	Contain Cost of Health Insurance	Access to Affordable Insurance	Raise Taxes and Fees	Civil Union Bill	Modernize State Revenue System	Automatic Cost-sharing-business
	1	2	3	4	5	6	7a	7b	7c	8	9	10
<b>76th District</b>												
<i>Frank Mautino (D)</i>	Y	*	Y	Y	U	Y	Y	N	U	U	Y	Y
<b>78th District</b>												
<i>Deborah Graham (D)</i>	Y	Y	Y	Y	Y	Y	Y	Y	Y	U	Y	Y
Phyllis Logan (D)												
<b>92nd District</b>												
Jehan Gordon (D)	Y	Y	Y	Y	Y	U	Y	Y	Y	Y	Y	Y
G. Allen Mayer (D)												
Cindy Jenkins (R)												
<b>99th District</b>												
Kent DeLay (D)	Y	Y	Y	Y	Y	Y	Y	Y	U	U	Y	U
<i>Raymond Poe (R)</i>												
<b>107th District</b>												
Patti Hahn (D)	U	Y	Y	Y	Y	Y	Y	Y	U	U	Y	Y
Travis Loyd (D)												
John Cavaletto (R)												
<b>108th District</b>												
Jason Warfel (D)	Y	Y	U	Y	Y	Y	Y	Y	U	U	Y	Y
<i>David Reis (R)</i>												
<b>114th District</b>												
<i>Wyvetter Younge (D)</i>	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
<b>115th District</b>												
Cheryl Graff (D)												
Charles Howe (G)	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
<i>Mike Bost (R)*</i>												
<b>117th District</b>												
<i>John Bradley (D)</i>												
Ron Emery (R)	N	N	N	N	N	N	N	N	N	N	Y	Y