Good afternoon Senator Millett, Representative MacDonald and honorable members of the Joint Standing Committee on Education and Cultural Affairs. My name is Tina Pettingill and I am the Executive Director of the Maine Public Health Association (MPHA). We are an organization which represents 400 public health professionals across the State committed to creating an environment which sustains and improves the health and well-being of Maine residents. Our diverse membership has a common interest in the promotion and protection of the public's health. I am here today on behalf of our board, staff, and members to speak in support of LD 1699.

The Maine Public Health Association is committed to policy, environmental and educational changes that have a positive impact on population health and major public health epidemics, such as HIV. The Federal CDC estimates that more than 1.1 million people in the United States are living with HIV, and 15.8% (about one in six) are not aware they are infected. In 2010, more than 21,000 people with HIV were estimated to have died in the United States and we are not exempt in Maine. In 2011, 49 people in Maine were newly diagnosed with HIV. Twenty-five percent of these people were diagnosed late in the disease and therefore were at increased risk for disease progression, death, and transmission of HIV to others. The lifetime cost of medical care for a person with an early HIV diagnosis is approximately $400,000 (Prevention Status Report-CDC). This means that lifetime medical costs for the 49 Maine residents newly diagnosed with HIV in 2011 could exceed $19 million.

The cost of treating just one person diagnosed in their youth with HIV far exceeds the annual cost of Maine's HIV Education and Prevention Program. For these reasons HIV prevention programs are vital to maintaining the physical and financial health of the state. Maine already has policies established in accordance with the CDC in regards to disease surveillance, counseling, and testing for HIV. Maine cannot afford to fall behind in the area of prevention education. In an age when information is readily available, it is important that adolescents are exposed to accurate, relevant, and evidence-based sexual health curricula.

Prevention programs have helped Maine avoid disturbing HIV-trends seen in other states. They also have helped to control prevalence of HIV, STDs, and unplanned pregnancy among Maine youth. Because of prevention programs in Maine, our youth have lower rates of HIV and reportable STDs, lower rates of teen births, higher rates of condom and other birth control use, and higher rates of sexual education in school.
In 2010, President Obama committed to developing a National HIV/AIDS Strategy with three primary goals: the first being to reduce the number of people who become infected with HIV. Successfully decreasing incidence of HIV in the US will require the commitment of all parts of society, including the State (NHAS). To maintain this vision, Maine needs to support prevention methods to keep incidences of HIV infections to a minimum in Maine.

On behalf of the Board, staff and 400 members of the Maine Public Health Association, I urge you to consider a unanimous Ought to Pass report on LD 1699.

Feel free to contact me with any questions at mainepha@gmail.com or 730.1040. Thank you for your time.

Kristina Pettingill, MPH
Executive Director