When the Center of Disease Control and Prevention issued its first report on mysterious cluster of the profound immune suppression among gay men in Southern California in June 1981. It was believed that the era of pandemic infectious disease had passed.

My testimony begins in March of 1987 after being seroconversion or diagnosed with HIV/AIDS. I received no counseling or testing results from the Army Medical Staff. I was informed that I had five years to live if that long. My name is Carlton R Smith, African American, same gender loving male and my present age is 61.

Today, I before you with a coalition of advocates and organizations to remove the stigma of targeted criminalization of people living with HIV . On July 1997 , I was featured in an article by Baltimore Alternative on the topic "The Changing Face of the PWA(people with AIDS) HIV Coalition that year I was interviewed by Natalie Davis as my role as vice chair of this organization. I don't want to give you any perception that I had a rosey life when I was diagnosed with HIV. I started out my advocacy with such optimism and I thought that it would make a difference because like many other people who wanted to live. I joined such organizations as ACT-UP Baltimore with the late John Stuban , the Greater Baltimore HIV Health Service Planning Council under the leadership of Lenny Green. Several months later I became the first PLWHA committee co -chair along with the late Myra Hill for GBHHSPC.

In addition to leadership roles and partnerships in the HIV community I was asked to join the Health Education Resource Organization (HERO) as a member at large and several years later I became the first person with HIV to become president of the board of directors. My advocacy expertise was to provide information, support and guidance on HIV prevention and treatment. I was later employed by Baltimore City Health Department as a community health coordinator to provide support for individuals who had previously missed their appointments and other opportunities for receive support for life enhancement skills.

In many of my conversations with people living with HIV unfairly stigmatized didn't seem particularly wanted to seek out treatment options or didn't want others to know their status. Silence do equal Death many individuals made transition with that information to their resting place. Moreover, stigma has caused many individuals not wanting to be tested and the ability to change their health status.

As long as it remains in force, § 18-601.1 perpetuates a lifelong threat of criminalization for every person living with HIV in Maryland who is aware of their status. Repealing § 18-601.1 would remove language that stigmatizes people living with HIV. Repeal would also lower barriers to HIV testing as Maryland responds to the epidemic. Doing so would represent a significant update to state policy, to be in line with lifesaving medical advances, and it would also help reduce racially disparate and unscientific enforcement practices. I urge you to support this effort and speak

about it with your colleagues, and we hope to see you vote in favor of finally repealing § 18-601.1. Once again I thank you for allowing me to share my testimony and my views about this important legislation that can save lives of those living and thriving with HIV with dignity.

Sincerely Yours,

Carlton R. Smith