

How SF battle with HIV/AIDS shaped today's coronavirus response

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Dr. Grant Colfax speaks during a press conference to announce a state of emergency due to the global outbreak of the coronavirus at City Hall on Tuesday, Feb. 25, 2020 in San Francisco, California. Gabrielle Lurie / The Chronicle

Before there was coronavirus and a city shut down, there was an AIDS crisis and a city struggling to keep up with a mounting death toll. Nearly 40 years may separate the two crises. But San Francisco's response to AIDS then informs how the world is tackling a new pandemic today.

While the two viruses are hardly alike — the coronavirus spreads easily and manifests within days; AIDS is a much slower virus and, at the time, almost always resulted in death — “I think there's a lot to be learned from the comparison,” said Paul Volberding, director of the [AIDS Research Institute](#) and a pioneer in treating people with HIV.

Many of today's most visible public health leaders, from Anthony Fauci in Washington, D.C., to Grant Colfax in San Francisco, were on the front lines during the 1980s as AIDS claimed thousands of lives. And many of the local models and institutional connections developed those decades ago are coming to bear now, as this new coronavirus threatens to infect millions and kill hundreds of thousands nationwide.

Volberding can tell you, to the day, when he began working at San Francisco General Hospital. On July 1, 1981 — his first day — he saw his first patient with Kaposi's sarcoma, a cancer that doctors would learn was common in patients with AIDS. This was the beginning of the crisis to come.



A portrait of Paul Volberding on Thursday, April 2, 2020, in San Francisco, Calif. Volberding is the director of the AIDS Research Institute at UCSF. Santiago Mejia / The Chronicle

In the years that followed, San Francisco responded quickly to the epidemic — though HIV/AIDS activists would likely point out more could have been done — even as the national government ignored the growing number of dead. “We for generations had a really strong health department and had a really closely linked health department with the UCSF physicians and researchers,” Volberding said. “We responded to the AIDS epidemic by very aggressively trying to understand how the disease was being spread and who it was affecting.”

The parallels with today are clear. San Francisco and surrounding counties were the first in the nation to order residents to shelter in place last month, while the federal government has been less forceful in its response.

“That perspective and that focus on responding appropriately to data science and facts was in some ways, perhaps in many ways, informed by the city’s response in the early days to the HIV/AIDS epidemic,” says Grant Colfax, San Francisco’s public health director. “Just as in that epidemic, we did not wait, we could not wait for outside direction. We took it really upon ourselves.”

Part of that, he says, comes from the institutional memory. San Francisco’s Department of Public Health is full of doctors and scientists who led the fight against HIV then, and lead the fight against coronavirus now. Colfax himself moved to San Francisco in the 1990s to work on San Francisco General Hospital’s Ward 5B, the nation’s first ward for AIDS patients. The experience shaped him.

“It resonates with him. It really resonates with him,” said George Rutherford, head of infectious disease and epidemiology at UCSF. “He’s seen the devastation that HIV has wrought. He’s not afraid to go to the mayor and say, ‘We’ve got to be heavy-handed here.’ That’s not an easy message to deliver in San Francisco.”



Dr. George Rutherford in his study on Tuesday, March 24, 2020, in Piedmont, Calif. Dr. Rutherford is the head of the division of infectious disease and epidemiology at UCSF. Santiago Mejia/The Chronicle

Rutherford, for his part, came to San Francisco in 1985, not long after the city had ordered all bathhouses closed to slow the spread of HIV. He worked for the Centers for Disease Control then, helping the city develop programs to manage the epidemic. Now, in another parallel, he's helping the city develop a coronavirus contact tracing program for when the city manages to flatten the curve and ease restrictions.

There are national parallels, too. Deborah Birx spent much of her career specializing in HIV/AIDS research and now serves as the White House Coronavirus Response Coordinator. And Anthony Fauci started as director of the National Institute of Allergy and Infectious Diseases in the midst of the HIV/AIDS epidemic. Together, they are the nation's leading scientific voices, appearing almost daily during White House press briefings, during one of which, Birx invoked the plague.

"We had another silent epidemic: HIV," she said on March 16. "And I just want to recognize the HIV epidemic was solved by the community: the HIV advocates and activists who stood up when no one was listening and got everyone's attention."

Coronavirus Pandemic

Fauci, in particular, has become a reassuring voice for many during uncertain times. Those in San Francisco who worked with Fauci during the '80s and beyond say they see a man applying what he learned from that epidemic to how he's handling this one.

"Fauci definitely learned and appreciated in the HIV epidemic that investing in basic science is critical, that understanding the nature of the enemy is important," Volberding said. "I think he's taking that and applying it to — I know he is — to the coronavirus."

"And again he's just a model communicator. ... At a time when people were really afraid he was a very consistent voice, really like today."



Director of the National Institute of Allergy and Infectious Diseases Anthony Fauci looks on during the daily briefing on the novel coronavirus, COVID-19, in the Brady Briefing Room at the White House on April 1, 2020, in Washington, DC. (Photo by Mandel NGAN / AFP) (Photo by MANDEL NGAN/AFP via Getty Images)MANDEL NGAN / AFP via Getty Images

Mervyn Silverman, who served as health director during the first years of the HIV/AIDS epidemic, remembers ACT UP staging a protest outside Fauci's office. "Most government officials, in fact probably 99.9%, would have just ignored them," he said. "He invited them in, had them come sit around the table. ... It was two sides working together for a common purpose."

The relationship would have its ups and downs, but even longtime AIDS activist and author Larry Kramer, one of Fauci's biggest critics, recently told the New York Times that the two are friends. He had even emailed Fauci to check in.

As much as AIDS took from San Francisco, it left behind a city with strong ties among government, medicine, science and community and a (potentially uniquely) strong public health apparatus.

"San Francisco devoted untold resources to fight the virus," state Sen. Scott Wiener recently wrote for BuzzFeed News. "Our city built a massive public health infrastructure to prevent infections and improve care. San Francisco has the best Department of Public Health in the nation — perhaps the world — and part of the reason is our incredible response to the HIV pandemic."



Dr. Diane Havlir (right) and Dr. Elizabeth Imbert chat at San Francisco General Hospital's HIV/AIDS clinic in San Francisco, Calif., on Thursday, March 14, 2019. Scott Strazzante / The Chronicle

That legacy is being tapped as the city mounts a new fight against a new epidemic. Diane Havlir, head of UCSF's HIV/AIDS division, and Monica Gandhi, the medical director of Ward 86, the HIV clinic at the San Francisco General, have seen their days transformed. But they've learned to pivot quickly from years spent treating HIV/AIDS patients.

Gandhi and her staff already contribute to freshly formed committees that focus on curbing the inequalities around COVID-19 and the communities it impacts. "That to me is extremely reminiscent of what we all did in the early '80s," she said. "It is the same people who were working on HIV then and their successors who are working on COVID now."

And now Havlir spends her days applying the San Francisco Model of Care — a holistic approach to medicine developed during the AIDS crisis — to a new threat, to protect her patients who deal with chronic illness.

"This is a global trauma, a national trauma, a citywide trauma, and certainly to people who have survived through many, many challenges, this is yet another one," Havlir said. "But the spirit of the HIV community is like no other."

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