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Please help us assign workshops to appropriately sized rooms by indicating on your conference registration form the workshops you plan to attend.

SESSION I

- A. "HIV. Live with it. Get Tested!" Campaign 2000**
- B. Working with Schools**
Azi Khailli and Anabel Perez, HIV Tech Assistance Project
- C. Outreach to Men who have Sex with Men**
Leniere Miley, GMHC
- D. Transitions (Peds to Adol. - Adol. to Adult)**
Jenny Grosz, CSW, Kennedy Center; Kate Muldowney, CSW, Adol. AIDS Prog.; Jeff Birnbaum, MD, HEAT, Kings County
- E. Counseling and Testing - Practical Issues**
Neal Hoffman, MD, Adol. AIDS Prog., Montifiore;
Linda Mayo, MSW, MS, Cicatelli Assoc. Inc.
- F. Reaching Young Women**
Renee Cohall, CSW, and Dawn Dickerson, MPH, Adolescent Initiative Project, Columbia
- G. HIV Medicines and Adherence Issues**
Bret Rudy, MD, Mt. Sinai;
Alice Myerson, NP, Adol. AIDS Prog.
- H. Advocacy Issues**
Janet Goldberg, MPH, Community Healthcare Network;
Joe Pressley, New York AIDS Coalition
- I. Transgender Issues**
Tim Mundy, MD, KAYAC, St. Lukes;
Michele Grethel, CSW, Callen Lorde
- J. Youth for Youth Track**
AIDS Alliance for Children, Youth & Families

SESSION II

- K. "HIV. Live with it. Get Tested!" Campaign 2000**
- L. HIV Counseling, Testing & Prevention in School Based Clinics**
Dan Jones, CSW, Montefiore;
LuAnne Skolnick, CSW, North Shore Hospital
- M. Substance Use**
Rene Stockton and Brenda Chabon, PhD, Montefiore Medical Center
- N. Counseling and Testing: How to**
Rusty Chambliss, BA, Cicatelli Assoc. Inc.;
Dina Monte, RN, Adol. AIDS Prog.
- O. Cultural Competency**
Jeanine Primm, Mosaic Health
- P. Mental Health Issues**
Danni Micheali, MD, Safe Space;
Tracy Gard, PhD, Adol. AIDS Prog.
- Q. Working with Peer Educators**
Kevin McCreary, Teens Helping Each Other;
Wayne Francis, Project Reach Youth
- R. Working with Gay and Lesbian Youth**
Joyce Hunter, DSW, HIV Center, Columbia
- S. Working with Youth in CBO's**
Al Cohall, MD; Project STAY, Columbia
Anthony Corne; Harlem Dowling
- T. Youth for Youth Track**
AIDS Alliance for Children, Youth & Families

CONFERENCE SCHEDULE

THE NEW YORKER HOTEL

Gettin' Busy: Youth and HIV

Tuesday, October 24, 2000
New Yorker Hotel, New York City

- 8:00 - 9:00 am Registration**
- 9:00 - 9:30 am Welcome and Keynote**
*Antonia Novello, MD, DPH - Commissioner,
New York State Department of Health*
- 9:30 am - 12:00 pm Plenary Sessions**
*Victoria Cargill, MD - Office of AIDS Research, NIH
Cal Cohen, MD - Community Research Initiative
Jennifer Fernandez - Youth Advocate
Donna Futterman, MD - Adolescent AIDS Program
Robert Krulwich - Nightline Correspondent, ABC News
Ana Oliviera, MA - GMHC
Deborah Parham, RN, PhD - HRSA AIDS Bureau
Audrey Rogers, RN, PhD - NICHD, NIH
Pernessa Seele - Balm in Gilead, NY*
- 12:00 - 1:00 pm Working Lunch**
*Implementing the "HIV. Live with It. Get Tested!" Campaign
(Box lunch provided)*
- 1:00 - 2:15 pm Workshop Session I**
- 2:30 - 3:45 pm Workshop Session II**
- 4:00 - 5:30 pm Closing**
Raffle and Fabulous Prizes



All conference activities
will take place at the
New Yorker Hotel,
481 Eighth Avenue at
34th Street in New York.

The Gettin' Busy
conference and
registration desk will be
located on the second
floor of the hotel.

Gettin' Busy: Youth and HIV

Cicatelli Associates Inc.
505 Eighth Avenue, Suite 2001
New York, New York 10018-6505
tel: 212-594-7741 fax: 212-629-3321
www.adolescentaids.org

Gettin' Busy: Youth and HIV is sponsored by the Adolescent AIDS Program/Montefiore Medical Center, Cicatelli Associates Inc. (both members of the NY-VI AIDS Education and Training Center), and "HIV. Live with it. Get Tested!" Major funding is provided by the HRSA AIDS Bureau/AETC. Additional support comes from SAMHSA (Substance Abuse and Mental Health Services Administration), Epitope, Inc., AIDS Alliance for Children, Youth & Families and LIFEbeat, the music industry fights AIDS.

Graphic Design: Firefly Consulting

Gettin' Busy: Youth and HIV



**A Conference and
Call to Action for
Providers and Youth**

**Tuesday, October 24, 2000
New Yorker Hotel
New York City**

Because 25% of HIV transmission in the US occurs sexually among youth under age 21,

Because there are currently 100,000 American youth living with HIV,

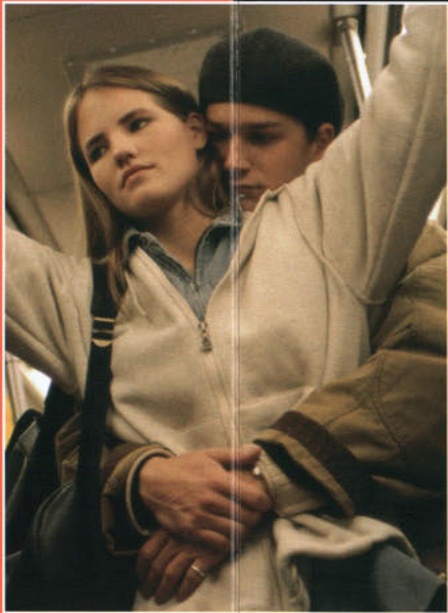
Because New York is conservatively estimated to have 10,000-20,000 youth who are HIV-positive...most of whom are unaware of their status,

Because in a recent survey of Bronx providers, only half said they offered HIV testing to a youth who presents with an STD,

Because only 20% of the health care providers attending the recent International AIDS Society conference in NYC said they were comfortable caring for adolescents,

And because there is one new HIV infection among our nation's youth every hour...

The time has come for providers and youth to mobilize for HIV counseling, testing, care, and prevention.



Gettin' Busy: Youth and HIV

A Conference and Call to Action for Providers and Youth

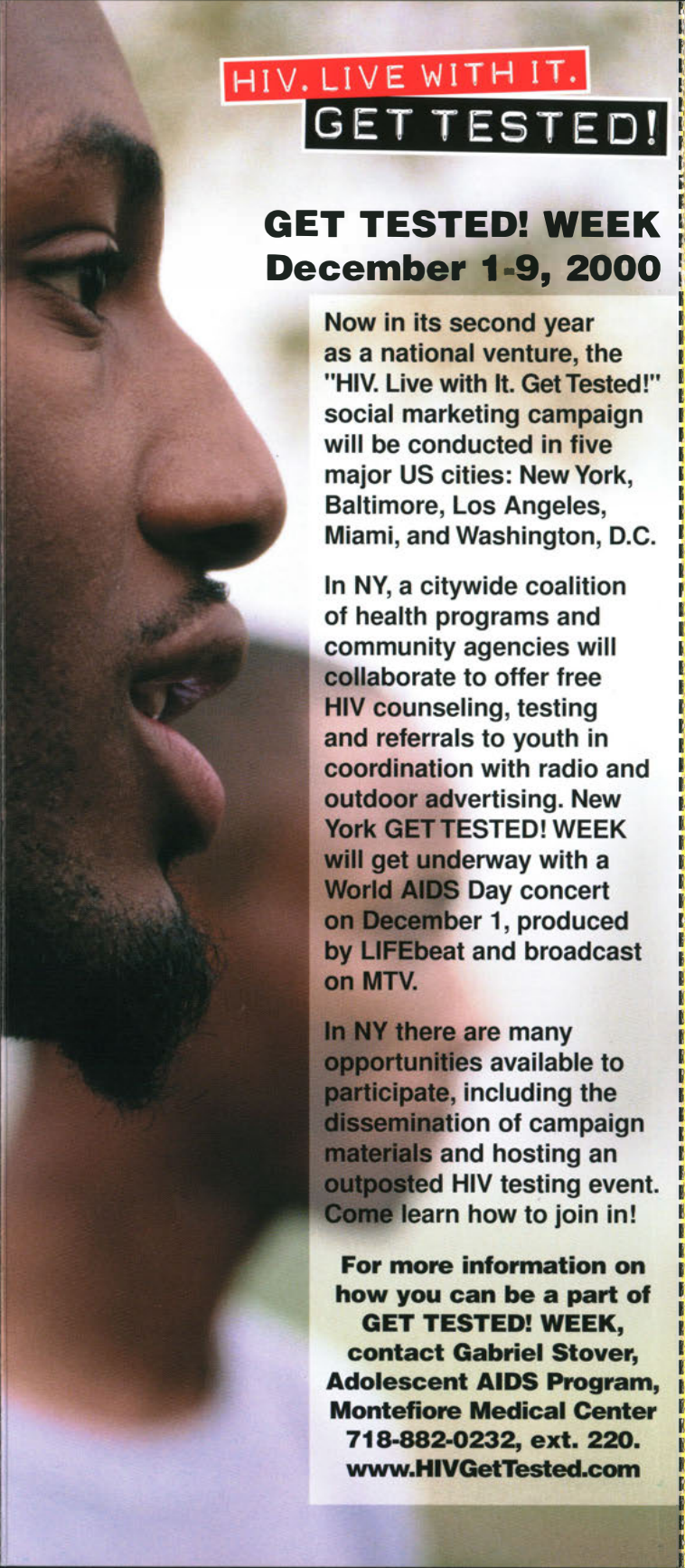
Not since 1994 has there been an adolescent health care conference in New York City focused on the HIV epidemic among youth. Since that conference, HIV infection among youth continues to escalate. Make plans now to join us at this landmark event to mobilize providers and youth for the battle to curb infection rates and link HIV+ youth to care.

Health care providers, agency staff and community members including physicians, nurses, social workers, peer educators, staff from schools, school-based clinics, community and youth agencies, faith communities, foster care and corrections programs among others are invited to participate.

Research indicates that many providers are either unaware of the extent of the HIV epidemic among youth or feel uncomfortable broaching the subject with the youth they treat.

This conference will equip providers with critical information that will illustrate the risk of HIV among youth and how HIV intersects with other challenges facing young people. It will also give providers the materials and tools necessary to address HIV counseling, testing, care and prevention in the context of their work with adolescent patients and clients.

The conference is also intended for youth and peer educators who are interested in HIV. In collaboration with AIDS Alliance for Children, Youth & Families, the conference will feature a special track of programming designed to foster networking among youth, and to motivate and educate youth about HIV and how it affects them. Peer educators, HIV+ youth, at risk youth and youth organizations are strongly encouraged to attend.



HIV. LIVE WITH IT.
GET TESTED!

GET TESTED! WEEK December 1-9, 2000

Now in its second year as a national venture, the "HIV. Live with It. Get Tested!" social marketing campaign will be conducted in five major US cities: New York, Baltimore, Los Angeles, Miami, and Washington, D.C.

In NY, a citywide coalition of health programs and community agencies will collaborate to offer free HIV counseling, testing and referrals to youth in coordination with radio and outdoor advertising. New York GET TESTED! WEEK will get underway with a World AIDS Day concert on December 1, produced by LIFEbeat and broadcast on MTV.

In NY there are many opportunities available to participate, including the dissemination of campaign materials and hosting an outpost HIV testing event. Come learn how to join in!

For more information on how you can be a part of **GET TESTED! WEEK**, contact **Gabriel Stover, Adolescent AIDS Program, Montefiore Medical Center 718-882-0232, ext. 220. www.HIVGetTested.com**

GETTIN' BUSY REGISTRATION FORM

REGISTRATION FEES

	Before October 16	After October 16 / At the door (if available)
Providers	\$35	\$45
Youth 13-21	Free	Free

YOUR WORKSHOP CHOICES
Please choose one workshop per session.

Session I: _____

Session II: _____

Name: _____ Your Registration Fee \$ _____
Suffix (MD, RN, MSW, etc.): _____ Specialty: _____
Name to appear on name badge: _____
Affiliation/Organization: _____
Address: _____
Phone: _____ Fax: _____
Email: _____
Vegetarian lunch? Yes _____ No _____
Card Number: _____
Signature: _____
Expiration Date: _____
A check payable to Gettin' Busy/Cicatelli Associates is enclosed.
Visa _____ MC _____ AMEX _____

Mail registration form with payment to:

Cicatelli Associates Inc.
Gettin' Busy Conference, Attn: Donna Iavarone-DeLepine
505 Eighth Avenue, Suite 2001, New York, NY 10018-6505
212-594-7741

If using a credit card, you may fax your registration to: 212-629-3321

Issues-
Yobu + ANV/ATDs

0 - Project Access

HIV. LIVE WITH IT. GET TESTED!

A National Youth Social Marketing Campaign

August 30, 2000

Sandra Thurman, MD
White House Office of National AIDS Policy
736 Jackson Place
Washington, DC 20503

Dear Sandy,

I am writing to remind you of a conversation you and I had in Durban concerning the upcoming release of the White House Report on Youth and HIV. On October 24, 2000, the Montefiore Medical Center's Adolescent AIDS Program is sponsoring *Gettin Busy: Youth and HIV* in New York City. This conference is designed as a call to action for providers and youth—and is quickly shaping up to be a landmark event that promises to pave the way for a national coalition to address the growing problem of HIV among youth in cities nationwide and around the world. The conference will also serve as the official kick off to the "HIV. Live With It. Get Tested!" campaign, taking place this year in New York City and four other major US cities and funded by the Congressional Black Caucus Initiative.

If the timing of the release of the White House report meshes with the timing of this conference, I invite you to take advantage of our event as a platform to unveil the report and discuss its implications in a setting that guarantees a receptive audience and positive visibility. If the report has already been released, I invite you to take this opportunity to inform us of its key proposals.

Gettin Busy: Youth and HIV will be attended by physicians and other health care professionals who have an interest in the prevention and treatment of HIV among youth. The conference will also feature a parallel track of programming for peer educators and young outreach workers to complement the conference's central focus. Following morning plenary sessions hosted by some of the country's leading adolescent and HIV specialists, workshops and roundtables will be held in which affinity groups of providers, community groups and youth will discuss critical issues in adolescent care. In addition, a resource fair open to the public will display innovative educational materials targeted to youth about HIV prevention, testing and treatment.

I believe this is a unique opportunity to send a strong message about the epidemic of HIV among our nation's youth. I am eager to discuss with you ways that we can capitalize on these two events by joining forces. I will contact you soon to discuss a potential collaboration. In the meantime, if you have any questions I may be reached at 718-882-0322.

Best regards,



Donna Futterman, MD
Chair, Project ACCESS and
Adolescent Medicine HIV/AIDS Research Network

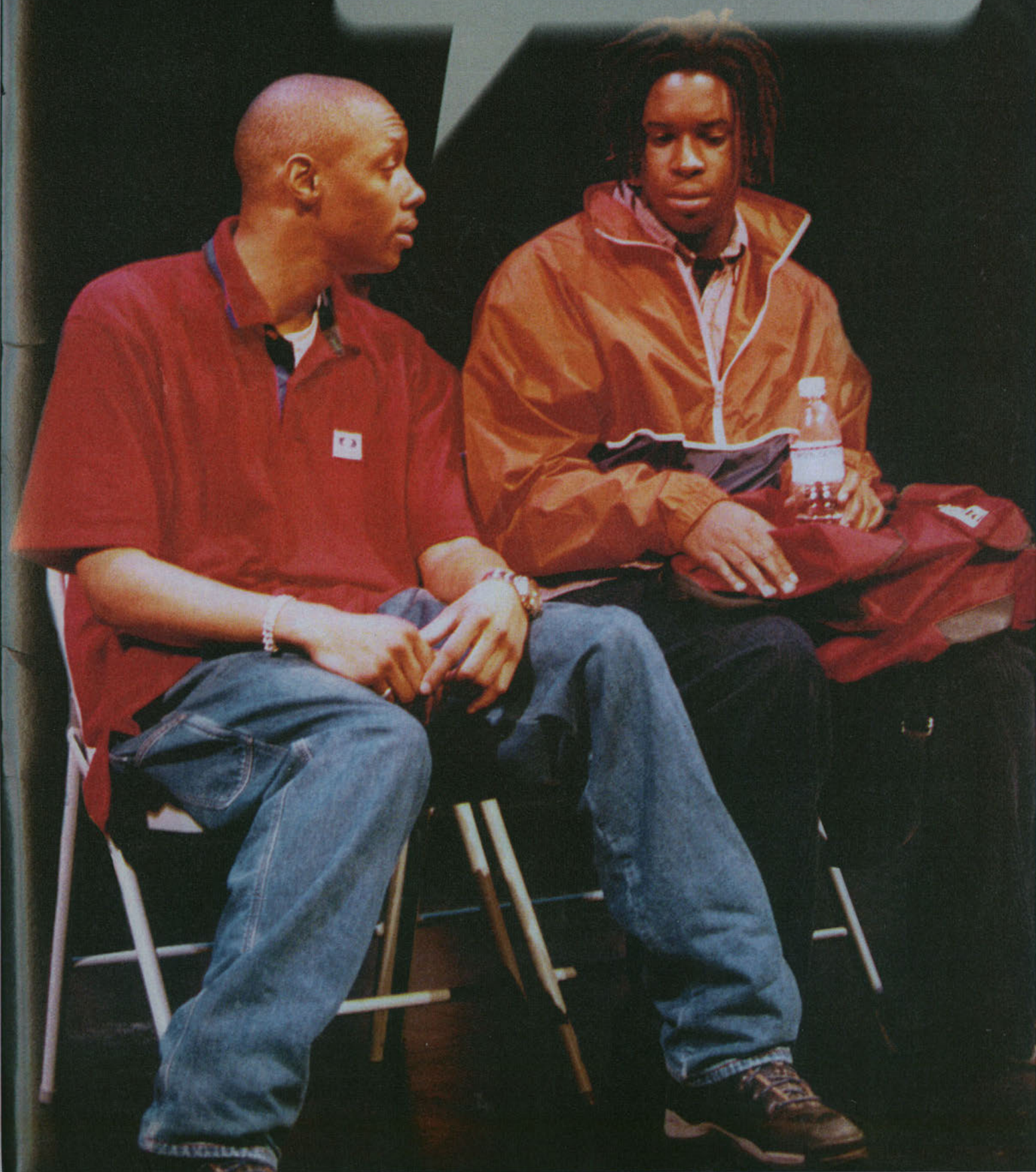
Enclosures

The ACCESS Project of
Adolescent Medicine HIV/AIDS
Research Network
(AMHARN)

Project Address: Adolescent AIDS Program
Montefiore Medical Center
111 East 210th Street • Bronx, NY 10467
Phone (718) 882-0322 • Fax (718) 882-0432
E-mail adoloids@aol.com

Communications Management:
Medisphere Communications
41 Madison Avenue • New York, NY 10010
Phone (212) 213-4211 • Fax (212) 679-7695
E-mail get_tested@41mad.com

Gettin' Busy?



CLINTON LIBRARY PHOTOCOPY

*Young people
might say*

It means

HITTIN' IT

Having sex

It's all about the
BENJAMINS...

Money

You're CISED because...

Stuck-up, thinking
you're all that

KNOCKIN' BOOTS

Having sex

You actin' like a BUSTA!

Someone you don't like

You BLOWIN' UP!

Doing well or looking
good

GETTIN' BUSY

Having sex

OFF DA HOOK

Out of control, lots of fun

CHILLIN'

Relaxing, just
hanging out

CLINTON LIBRARY PHOTOCOPY

Many young people
are "gettin' busy"
(having sex, that is)
and they're at risk.

Every hour of
every day, a new
young person is
infected with HIV,
the virus that
causes AIDS.

HIV. LIVE WITH IT.

GET TESTED!

A National Youth Social Marketing Campaign

CLINTON LIBRARY PHOTOCOPY

HIV. LIVE WITH IT.
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The Access Project of
Adolescent Medicine and AIDS
Research Network
(AMARAN)

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CLINTON LIBRARY PHOTOCOPY

Gettin' Bused?

If you are,
and you're
between
the ages of
13 and 21--
get tested.

HIV. Live with it. Get tested.
Call citywide 718-881-TEST

Gettin' Bused?

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20 pgs

REP

health care for youth

THE DEAL

A Z I N E T O L I V E B Y F A L L 9 9



New York City

In the US, 25% of people with HIV are infected by age 21. The time has come for a national movement to address HIV and Youth. Make plans to join us at this landmark event to mobilize for prevention, counseling, testing and care.

HIV. LIVE WITH IT.
GET TESTED!

For more information, contact Donna at
and HIV Conference, Cicatelli Associates Inc.
212-594-7741 or visit www.adolescentaids.com

Sponsored by:

Adolescent AIDS Program, Montefiore Medical Center & Cicatelli Associates, Inc.
HIV. Live With It. Get Tested! - A National Youth Social Marketing Campaign
New York/Virgin Islands AIDS Education & Training Centers

GETTING BUSY?

HIV. Live with it. Get tested.
If you're 13-21 call citywide 718-881-TEST

HEALTH PROGRAMS NEAR YOU

BRONX

Montefiore

- Adolescent Risk Evaluation Program (REP) - (718) 882-0023

BROOKLYN

Kings County

- Health Education Alternatives for Teens (HEAT) - (718) 467-4446

MANHATTAN

St. Luke's Roosevelt

Ryan Center

Bellevue

Mt. Sinai

- Keeping Adolescents/Young Adults Connected (KAYAC) - (212) 523-6305
- Special Health Outreach to Urban Teens (SHOUT) Van - (212) 769-7269
- Teen Outreach Prevention Services (TOPS) - (212) 263-8973
- Adolescent Health Center - (212) 423-2016

QUEENS

- Queens Health Network - (718) 334-3834

STATEN ISLAND

S.I. Univ. Hosp.

- Teen Risk Assessment Program - (718) 226-8336

HIV. IT'S

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HIV. LIVE WITH IT. GET TESTED!

A National Youth Social Marketing Campaign

Campaign Backgrounder

HIV. LIVE WITH IT. GET TESTED! is a social marketing program targeted to urban youth living in the African American and Latino communities hardest hit by the epidemic. **HIV. LIVE WITH IT. GET TESTED!** was first created in 1997 by the Adolescent AIDS Program at Montefiore Medical Center in the Bronx, New York. In 1999, under the leadership of the Adolescent Medicine HIV/AIDS Research Network (AMHARN), the program will be replicated in five more cities including Baltimore, Los Angeles, Miami, Philadelphia and Washington, D.C.

The expansion of the program in 1999 is funded by the National Institutes of Health (NIH) and the federal Health Resources and Services Administration (HRSA) HIV/AIDS Bureau as a result of the leadership of the Congressional Black Caucus's initiative to combat the HIV health emergency in the African American community. In addition, private funding comes from the William T. Grant Foundation.

The program's objective is to tackle the growing problem of the low number of HIV positive adolescents in care compared to the growing number of those infected with HIV. According to a 1996 White House report, every hour of every day a new young person is infected with HIV. While new infection rates have declined among whites, youth of color are disproportionately affected – almost two-thirds of new infections occur among African Americans and Latinos. Moreover, those who live in America's urban centers are hardest hit and may have no links to health care.

HIV. LIVE WITH IT. GET TESTED! seeks to empower young people to become advocates for their health. Through outreach programs that offer information about HIV and AIDS, free and confidential HIV counseling, testing and care is provided at youth-friendly testing and health care centers.

The campaign reaches youth in their own words -- materials use phrases like "Hittin' It?" and "Gettin' Busy?" -- language young people know asks the question "Are you having sex?" and makes the connection to risk for HIV and the importance of HIV counseling and testing. The campaign utilizes community mobilization and coalition building with other adolescent health programs, youth organizations, schools and faith organizations to enhance outreach. The participation of young people is central to the program's success. The campaign materials were designed by an ad agency, Griffin Bacal.

Community visibility is created for the campaign using paid advertising, public service announcements, street marketing and public relations as components of an integrated communications program to effectively get messages in the streets and on the airwaves during designated GET TESTED! weeks. In 1999 the program embarked on a strategic alliance with LIFE BEAT, the music industry's response to AIDS.

Program components include town meetings and teen peer training days that allow young people to speak out about sexual health issues, HIV and AIDS and to learn how to share this information with their peers. In this way, youth encourage those who may be at risk for HIV to seek counseling, testing and care.

HIV. LIVE WITH IT. GET TESTED! has received awards for excellence in communications including the first "Tony Cox Award" given in 1999 by CablePositive, the cable industry's AIDS organization, for outstanding video production.

The ACCESS Project of
Adolescent Medicine HIV/AIDS
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(AMHARN)

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HIV. LIVE WITH IT. GET TESTED!

A National Youth Social Marketing Campaign

The Adolescent Medicine HIV/AIDS Research Network (AMHARN)

The Adolescent Medicine HIV/AIDS Research Network (AMHARN) provides national leadership on key research policy and care issues facing HIV-infected youth. AMHARN brings together 20 principal investigators, doctors and researchers at 15 sites throughout the United States. The sites are located in 13 major cities that are HIV epicenters.

AMHARN is a cooperative agreement between its sites linking them with the National Institutes of Health (NICHD, NIAID, NIDA). It is the major national study of HIV infection in youth and brings together sites that are nationally recognized adolescent HIV programs along with principal investigators who are leaders in the care and research of youth with HIV.

As the benefits for early clinical intervention in HIV infection become clearer, the urgency for identifying and linking HIV and youth to care heightens. AMHARN seeks to forge a continuum from prevention, to counseling and testing, to care, and to infuse testing and counseling information into behavioral intervention programs targeting minority communities that are heavily impacted by HIV/AIDS -- African-American and Latino youth represent half of all AIDS cases and 62% of new infections among youth ages 13-24.

The clinical sites that make up the AMHARN network all have comprehensive care systems for HIV infected youth and have community involvement in their programs to facilitate outreach and services for at-risk youth. The support staff at sites includes not only physicians and nurses but also intensive social work/case management, peer educators and other supportive staff to address the range of health and social needs of vulnerable youth.

In 1999, AMHARN's Project ACCESS is launching a six-city social marketing campaign **HIV. LIVE WITH IT. GET TESTED!** linking HIV counseling, testing and care targeted to at-risk youth ages 13 – 21 in the highly-impacted African-American and Latino communities. AMHARN's other programs include The REACH study and Project TREAT. Project REACH is the study of the course of HIV infection in sexually infected teens. Project TREAT is an initiative to improve adherence to antiretroviral medicines among teens.

The AMHARN network and Project ACCESS are chaired by Donna Futterman, MD, Director of the Adolescent AIDS Program at Montefiore Medical Center (Bronx, NY) and an Associate Professor of Medicine at Albert Einstein College of Medicine (Bronx, NY). The sites for Project ACCESS include: University of Maryland, Department of Pediatrics, Dr. Ligia Peralta; Children's Hospital of Los Angeles, Division of Adolescent Medicine, Dr. Marvin Belzer; University of Miami School of Medicine, Division of Adolescent Medicine, Dr. Lawrence Friedman; Children's Hospital of Philadelphia, Division of Adolescent Medicine, Dr. Bret Rudy; and Children's National Medical Center, Adolescent Medicine/Burgess Clinic in Washington, D.C., Dr. Lawrence D'Angelo.

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HIV. LIVE WITH IT. GET TESTED!

A National Youth Social Marketing Campaign

Contact: Kira Antell

212.448.6823

FIVE BOROUGH YOUTH CAMPAIGN RESPONDS TO HEALTH EMERGENCY BRINGING HIV COUNSELING, TESTING, AND CARE TO YOUNG PEOPLE AT RISK

African American and Latino Youth Represent 62% of New HIV Infections Among Youth 13-24; Half of All AIDS Cases

(New York, NY, October 25, 1999) It is estimated that at least 10,000 young people in New York City ages 13-24 are infected with HIV and most don't know it. **HIV. LIVE WITH IT. GET TESTED!**, an innovative campaign that speaks directly to young people in their own language, is being launched in response to this health emergency.

GET TESTED! Week – October 25-30 – is a five borough initiative sponsored by Montefiore Medical Center and a coalition of adolescent health centers and programs that offer free and confidential HIV counseling and testing for young people ages 13-21. It kicks off tonight with "Let's Talk About HIV: The Real Deal" at the world famous Apollo Theatre in Harlem. The event will host 500 young people from throughout New York City for an open dialogue, in a talk show format, hosted by Lisa Evers of radio station WQHT's (HOT 97) "Street Soldiers."

By calling 718-881-TEST young people can receive information about youth-oriented clinics they can visit throughout the five boroughs of New York City. Oral testing is offered at participating sites providing an accurate HIV test without blood or needles. In 1999 more than 100 organizations from throughout New York City are endorsing and participating in **GET TESTED! Week**.

"We can no longer ignore that new HIV infections are spreading among teens. HIV is real in this age group and we must address this health emergency head-on. Youth, whether they are gay, straight or bisexual, who have sex without a condom are at risk and must have information and access to HIV counseling, testing and care," stated Donna Futterman, MD, Director of the Adolescent AIDS Program of Montefiore Medical Center (Bronx, NY).

– more –

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The Apollo Theatre event will include a panel of young leaders and a listening gallery of adult leaders from the community. Young audience participants will take part in the open discussions which will include topics of safer sex, risk factors, respect for each other and HIV counseling, testing and care. NITE STAR Theater, a highly acclaimed acting troupe, will perform discussion-provoking scenarios.

The **HIV. LIVE WITH IT. GET TESTED!** campaign has created an innovative new outreach magazine called “THE DEAL” This CD-sized “teen ‘zine” is being launched during **GET TESTED! Week** and includes information about music, dating, HIV, health, fitness and community resources for young people as well as articles created by the campaign’s youth advisory committee. “THE DEAL” has a unique hip-hop edge and bring information to young people in a format not typical of many health brochures.

“Young people today know what’s going on and hate being preached to – but we need good dependable information. Adults today forget we’re able to make smart decisions if we know where to find youth-friendly services we can trust,” said Martha Diaz a Bronx-based a community youth leader who works with the program. “We care about our health and want to live long lives — this program helps by providing a full range of health services with staff who understand and care about us.”

In 1999, **HIV. LIVE WITH IT. GET TESTED!** will conduct campaigns in six US cities including Baltimore, Los Angeles, Miami, Philadelphia and Washington, DC in addition to New York. The program received funding from the Congressional Black Caucus Health Emergency Special Allocation provided through the National Institutes of Health (NIH) and the Health Resources and Services Administration (HRSA). The W.T. Grant Foundation, The Royal S. Marks Foundation, CablePositive and The Children’s Hope Foundation also provided funding to support the program.

The Adolescent AIDS Program of Montefiore Medical Center was created in 1987 to provide comprehensive medical and psychosocial care for HIV-infected youth and to raise public awareness about youth and HIV. It is the nation’s first and largest HIV testing, counseling and medical treatment clinic offering services to HIV-infected youth and at-risk youth between the ages of 13 and 21.

HIV. LIVE WITH IT. GET TESTED!

A National Youth Social Marketing Campaign

FALL 1999

VOLUME 2 NUMBER 1

Health Services for Youth Free HIV Counseling and Testing

ALL CAMPAIGN SITES PROVIDE A RANGE OF SERVICES to youth including check-ups, STD screenings, pregnancy testing, birth control and free HIV counseling, testing and care. These programs are for all youth—straight, gay, lesbian, bisexual or transgender. All services are completely confidential and most do not require parental consent. Services are either free or on a sliding scale and Medicaid as well as many health insurance plans are accepted.

For HIV-positive youth, these health care programs provide ongoing medical care including general health care, viral load and immune system monitoring, medications, and counseling and support services. The program also provides help with insurance, housing, education, and opportunities to participate in research.

The following hospital-based adolescent health clinics participate in the "HIV. Live With It. Get Tested!" campaign. Call city-wide (718) 881-TEST for information about referral sites including:

BRONX

Montefiore Adolescent Risk Evaluation Program (REP) Clinical service of the Adolescent AIDS Program
(718) 882-0023

BROOKLYN

Kings County Health Education Alternatives for Teens (HEAT)
(718) 467-4446

MANHATTAN

St. Luke's Roosevelt Keeping Adolescents/Young Adults Connected (KAYAC)
(212) 523-6305

Ryan Center Special Health Outreach to Urban Teens (SHOUT) Van
(212) 769-7269

Bellevue Teen Outreach Prevention Services (TOPS)
(212) 263-8973

Mt. Sinai Adolescent Health Center
(212) 423-2016

St. Vincents HIV Medical Practice Center
(212) 604-1700

QUEENS

Queens Health Network
(718) 334-3834

STATEN ISLAND

**S.I. University Hospital
Teen Risk Assessment Program**
(718) 226-8336

**COMMUNITY PARTNERS
Adolescent Initiative Project
Columbia School of Public Health**

1999 Get Tested! Week is October 25-30

THE SECOND ANNUAL NEW YORK City Get Tested! Week will be held from October 25-30, 1999. This campaign promotes HIV counseling and testing to youth through media and community outreach. This year's slogans, "Gettin' Busy" and "Hittin' it" link youth phrases for having sex with the importance of HIV testing and prevention. During Get Tested! Week, free and confidential HIV counseling and testing will be available for 13-21 year-olds at youth-friendly health care sites throughout NYC. Care sites will use OraSure—a safe and reliable HIV antibody test of oral fluids that uses no needles so testing is painless and easy. Appointments for testing will be readily available and, in most cases, HIV test results will be back within a week. Get Tested! Week allows health care practitioners and youth-serving agencies to generate attention around the issue of HIV. However, HIV is a year-round problem and at these sites, testing services are always available.

Get Tested! Week kicks off on October 25, 1999 with a youth town hall meeting at the historic Apollo Theatre. Combining the focus of a youth theater company with the insights of youth panelists and audience members, this meeting is a forum for youth voices. The event will be hosted by HOT-97 radio personality, Lisa Evers, who conducts the Sunday evening program, *Street Soldiers*. Last year's Town Hall Meeting drew almost 300 young people for a high-energy evening of questions, answers and opinions. This second year, an even larger turnout is expected and the result is sure to be another outstanding display of youth-powered community action for change.

Gettin' Busy?
Hittin' it?
HIV Live with it. Get Tested!
Call citywide 718-881-TEST
If you are, and you're between the ages of 13 and 21—get tested

If you are, you need to be tested for HIV
Every hour one person under the age of 21 gets infected—and they often have no idea
So if you're between the ages of 13 and 21, find out about testing that's free and totally confidential
Oral testing is a safe, painless and accurate test and results are quick
Testing takes place year-round in offices near you where you'll feel comfortable. They're clean, safe and professional
Find out how you can prevent HIV and treat AIDS

Gettin' Busy Campaign Reaches Youth at Risk for HIV

STATISTICS ON YOUNG PEOPLE AND HIV INFECTION are startling; despite decreases of infection rates in other groups, youth continue to be at very high risk for HIV—it is estimated that one in four new infections occur among youth between the ages of 13 and 21 years. Youth of color are the hardest hit—almost two-thirds of new infections occur among African-American and Latino youth. Yet relatively few HIV-infected youth are in care, certainly when compared to the number estimated to be infected. Therefore, they are unable to get the benefits of medical treatments which are tremendously effective in prolonging life and good health. The benefits of "knowing your status" have never been more compelling, yet this message has not been adequately promoted to youth.



In response to this problem, in April of 1997, a unique social marketing media campaign, "HIV. Live With It. Get Tested!" was launched by the Adolescent

The New York Times
EARLY EDITION
Sunday, October 25, 1999
VOL. CLXXVIII No. 21,317
NEW YORK, SUNDAY, MAY 9, 1999

Spreading the Word on AIDS
Teen-Agers Are Taught to Counsel Peers on Prevention

Through the marketing, the young people are being trained to be the ones to spread the word on AIDS to their peers. The program is being run by the Adolescent AIDS Program at Montefiore Medical Center, together with a coalition of hospital-based adolescent programs throughout New York City. The campaign's goal is to bring HIV-positive adolescents into care by promoting free and confidential HIV counseling and testing services. By calling (718) 881-TEST, young people are directed to neighborhood programs.

The program is promoted through a network of community organizations, advertising and street marketing at sites including stores, clubs, movie theaters, radio—even a rolling mobile billboard.

One exciting component of the campaign is the work being done by youth outreach workers and community partners. Through them, over 600,000 flyers and cards have been distributed in the campaign's first two years. Thousands of calls have been received on the campaign phone lines and increased referrals at the referral sites have been generated. The deep commitment of community members—both young people and agency personnel—is and will continue to be the key to the success of the campaign.

The demonstrated success of the campaign in New York has won funding for its expansion into five other US cities—Baltimore, Los Angeles, Miami, Philadelphia, and Washington D.C. This expansion was made possible through funding by the NIH (National Institutes of Health) and HRSA (Health Resources and Services Administration) directed by the Congressional Black Caucus, whose lead-

ership is responding to the HIV health emergency in African-American communities. In New York, additional funding has been generously provided by the Royal S. Marks Foundation and the Children's Hope Foundation.

In the News

MEDIA OUTREACH ABOUT HIV COUNSELING and testing for young people has been an essential part of the "HIV. Live With It. Get Tested!" campaign.

T.H.E. Team Training day at the Apollo Theatre was featured in *The New York Times* on Sunday, May 9, and a special feature on Channel 7 TV news about HIV education in New York's schools. The show pointed out that health care programs like those involved in the campaign help to bring important information to youth that is not being provided in schools.

In addition, this year Dr. Futterman presented the campaign on the *Montel Williams* show and in 1998 made appearances on *Good Morning America*, CNN and NY 1 News.

The Adolescent AIDS Program will continue to work in close collaboration with Medisphere Communications, a NYC-based marketing firm; Griffin Bacall, the advertising firm that created the campaign pro bono; and LifeBeat, the music industry's response to AIDS, in order to enhance the media component of this important campaign.

Get Involved!

You can help the campaign in one of several ways.

- **Endorse** – As an *endorser*, you will be listed in materials and will be invited to participate in campaign events.
- **Distribute** – You can *distribute* campaign materials by involving your clients in community outreach and/or posting materials in your agency.
- **Be a testing site** – For health care clinics with trained staff, we are also looking for additional *testing sites* for "Get Tested! Week."

Agencies interested in a greater role can join the program as a **Community Partner**. Community partners work directly with youth to help spread the campaign's important message during Get Tested! Week and throughout the year.

**For more information on how you can help call Gabriel Stover or Martha Diaz at
The Adolescent AIDS Program
Phone (718) 882-0232
Fax (718) 882-0432**

The New York Times

THE NEW YORK TIMES METRO SUNDAY, MAY 9, 1999

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Spreading the Word on AIDS

Teen-Agers Are Taught to Counsel Peers on Prevention

Brandi Taylor, 14, knows that AIDS lurks close to home. She is so concerned about it that when she recently explored getting a tattoo, she asked the tattoo artist if he would clean his needles in front of her.

But she knows that she is more likely to contract the disease through sex. Most of her peers, she says, started having sex when they were 12 or 13, and at least two of her friends, both 15, are H.I.V. positive.

"It's out there and people are getting infected just like that," she said. "The sweetest, cutest guy could have it. I can't make sure that all my boyfriends get tested. Just to be on the safe side, I have sex with a condom, but sometimes I slip up."

Miss Taylor, who attends high school in Queens, was one of about 200 teen-agers who gathered at the Apollo Theater in Harlem yesterday morning for a one-day training program on becoming an H.I.V. and AIDS peer educator. She and the others agreed to spend 25 hours over the next few months informing other young people about the risk of infection and encouraging them to get tested.

The workshop was created by the Adolescent AIDS Program of Montefiore Medical Center in the Bronx, in collaboration with seven other health care organizations.

Teen-agers are recruited through peer education programs at high schools and community centers. They sign pledges and are paid \$100 for their 25 hours of service, and are assigned to work in neighborhoods where teen-agers are at high risk of contracting AIDS, program organizers said.

One organizer, Donna Futterman,

Educating adolescents using their own lingo.

said the program began three years ago after she and her colleagues "realized that many more teens were infected than were in care."

Dr. Futterman, a specialist in pediatric and adolescent medicine, said statistics from a 1998 National Cancer Institute study illustrated the importance of adolescent AIDS education: One-quarter of Americans who are infected with the human immunodeficiency virus, which causes AIDS, contracted it before they were 21. And in the last few years, while the rate of infection in other popula-

tions has declined nationwide, teen-agers are contracting H.I.V. at about the same rate. Teen-agers in urban neighborhoods with high minority populations are at the highest risk; according to recent Federal and state health data, while only about 3 percent of the nation's teen-agers live in New York, about 20 percent of American adolescents infected with H.I.V. live here, Dr. Futterman said.

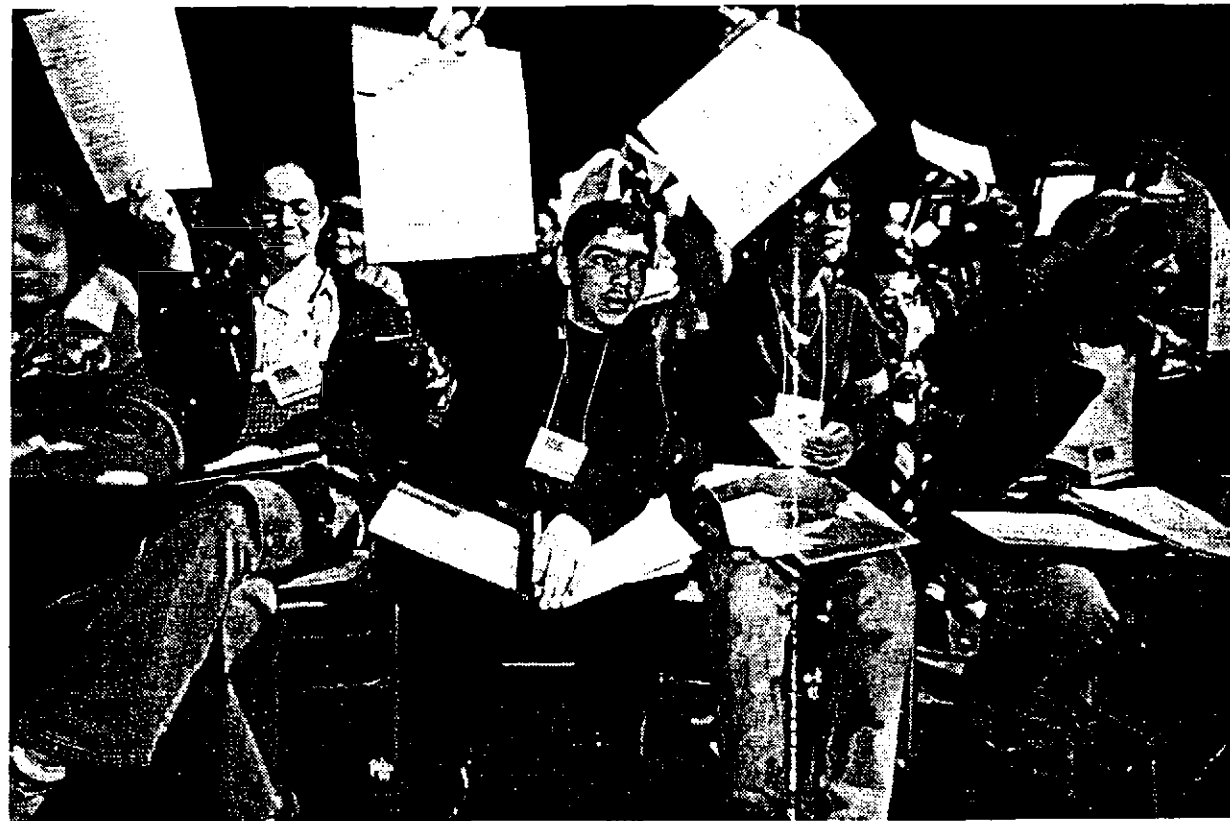
To spread the message of prevention and testing, Dr. Futterman said, she wanted to speak to teen-agers in their own language.

In that vein, the posters created by the Adolescent AIDS Program to advertise H.I.V. testing centers ask "Gettin' busy?" or "Hittin' it?" current teen-age slang terms for having sex.

Throughout the morning, the young people in the audience at the Apollo learned about the risk of infection and advances in medical treatment, and how H.I.V. attacks the body.

Many of them already had some experience with peer counseling, either in their schools or through community groups, organizers said.

Lateefa Shaw, 17, who lives in the Fort Greene section of Brooklyn, works with Teens Helping Each Other, part of the Adolescent Educator Program at the SUNY Health Sci-



Nicole Bengiveno/The New York Times

About 200 teen-agers at the Apollo Theater in Harlem signed pledges yesterday agreeing to counsel their peers on AIDS prevention for 25 hours as part of a program run by Montefiore Medical Center.

ence Center in Brooklyn.

"For me, it is reinforcement of what I've learned, and I'm learning new information like the medical stuff and the stuff about women," she said.

Dante Notice, 17, who serves on an

AIDS committee at Harry S. Truman High School in the Baychester section of the Bronx, said everyone he knows was already sexually active but many of his friends did not want to hear about H.I.V.

He said peer education was impor-

tant because it helped teen-agers learn about the disease in their own terms.

"I can put it in words they can understand in a way that adults can't do," he said. "I can break it down for them in a street kind of way."

METRO

YOUR NEIGHBORHOOD Hosp eyes teen AIDS

Montefiore offers youths free HIV testing

By RALPH R. ORTEGA
DAILY NEWS STAFF WRITER

To be a teenager is to feel invulnerable — and to be susceptible to HIV.

That's the message of a week-long citywide health campaign launched yesterday.

"They don't call it Human Immunodeficiency Virus for nothing," said a 26-year-old South Bronx woman, diagnosed with AIDS when she was 17.

"It doesn't matter who you are, your nationality, your race, your sexuality," she said, asking to remain anonymous. "If you're human, you can get it — if you're not careful."

She offers the kind of straight talk that some say only teenagers can relate to in the citywide awareness program urging youths between ages 13 and 21 to get themselves tested for the AIDS virus.

The program, "HIV. Live with it. Get tested," spearheaded by Montefiore Medical Center in the Bronx, promotes free AIDS testing.

With a talk-show style forum at Harlem's Apollo Theatre yesterday, youths discussed the disease's impact — especially in New York, which has 10% of the nation's AIDS cases among 13- to 19-year-olds.

"Counseling, testing and care is crucial for teenagers," said Dr. Donna Futterman, director of



MICHAEL SCHWARTZ

THE DOCTOR IS IN Dr. Donna Futterman, head of Montefiore Medical Center's Adolescent AIDS Program, in her office.

Montefiore's Adolescent AIDS Program.

"One in four people who have HIV in the U.S. are believed to have become infected before the

age of 21," she said, "and the vast majority of them are unaware that they are infected."

Driving concerns locally are statistics from the city Health

Department showing that the number of reported AIDS cases among males ages 13 to 19 rose to 116 in 1998 — a 35% increase from 1994.

Among females of the same age group, the number of reported cases was up to 105, a 59% increase.

"You're dealing with 'This can't happen to me. I'm invincible,'" said Dawn Bryan, executive director of the Manhattan-based Momentum AIDS Project, describing the uphill battle for HIV testing and prevention among teens.

Montefiore's program, in its third year, has expanded to include several health providers and community agencies, encouraging teens to take advantage of free AIDS testing at local clinics.

The goal is to identify those who are infected and to help keep them healthy.

Teen-inspired slogans, such as "Hitting it?" and "Getting Busy?" also are being marketed in Baltimore, Philadelphia, Miami, Washington and Los Angeles, where similar programs exist. Both questions relate to having sex.

"Adults may not know what it means," Futterman said, "but kids and young people do. They know we're speaking to them."

For more information about the Montefiore program, call (718) 881-8378.

H E A L T H

HEALTH NEWS

NOVEMBER 30, 1999

Program Focuses on HIV Among the Young

With 100,000 Infected, Officials Offer Diagnosis and Counseling in Six Cities

By SALLY SQUIRES
Washington Post Staff Writer

Public health officials, concerned about the growing number of young people exposed to the virus that causes AIDS, are stepping up efforts to screen adolescents and young adults for the disease in Washington, Baltimore and four other high-risk urban areas. Some 100,000 people 21 years old and younger are believed to be infected with the human immunodeficiency virus (HIV), the federal Health Resources and Services Administration and the National Institutes of Health.

Of the 40,000 new cases of HIV diagnosed annually in the United States, "about 50 percent occur in people less than 25 years of age, and about 25 percent are in people 21 and younger," said Helene Gayle, director of the National Center for HIV, Sexually Transmitted Diseases and Tuberculosis Prevention. Two young Americans are infected with HIV every hour, according to the Centers for Disease Control and Prevention (CDC).

Because symptoms of AIDS take about 10 years to develop, estimates are that a third to a half of HIV-infected people don't know that they have the virus. "Among teens, it is more likely to be half who don't know it," Gayle said. "They're still healthy and asymptomatic and so would not be seeking testing."

Adolescents are among the least likely of all age groups to have regular contact with the medical profession. Without getting tested to detect the virus, many infected teens go undiagnosed.

That means no access to life-prolonging medical treatment that can help delay the symptoms of full-blown AIDS. It also means that those infected can't take steps to help protect their sexual partners.

"Health providers that do come into contact with teens are not fully aware of this HIV epidemic in teenagers and don't routinely offer testing," said Donna Futterman, chair of Project Access and director of adolescent medicine at Montefiore Medical Center in New York, where Project Access began. Besides New York, Washington and Baltimore, it also now operates in Miami, Philadelphia and Los Angeles.

Adding to the problem is that most HIV programs don't target teens. They don't warn this age group of the importance of testing, or emphasize that having unprotected sex is a risk factor since the virus can be transmitted during sex. "Unless we speak to teens in their language and [in] ways directed to them, they are not going to do with [HIV] has anything to do with [HIV]," Futterman said.

To help educate teens about HIV, Project Access will offer free testing and counsel-



ILLUSTRATION BY JAMES HARRISON FOR THE WASHINGTON POST

ing for people ages 13 to 24 from Dec. 1 through Dec. 7 in the District, Baltimore and the surrounding metropolitan region. The testing takes only minutes and is performed on saliva, rather than by drawing blood. The saliva test measures the presence of antibodies or proteins formed against HIV, not levels of the virus itself. Results are available within a week. Immediate counseling is provided for those who are HIV-positive and all infected teens and young adults are referred to nearby medical facilities for treatment. Washington has one of the highest

rates of HIV infection in the nation, according to Project Access. From 1996 to 1997, AIDS cases among adolescent females in the District rose by 60 percent and among male teens by 45 percent. Among states Maryland has the third highest rate of HIV infection in adolescents, while Virginia ranks fifth for HIV-infected males aged 16 to 21 years.

Where once the HIV epidemic was largely confined to homosexuals and those using intravenous drugs, the infection is increasingly diagnosed in young women, who account for about a third of the newly

diagnosed cases, according to the CDC. In some areas, including Washington, the prevalence appears to be even higher. At Children's National Medical Center in the District, nearly 70 percent of the new cases diagnosed occur among young women, who have acquired the disease almost exclusively from heterosexual contact.

Sixty percent of the HIV-infected patients at Children's have been diagnosed with another sexually transmitted disease or have been pregnant before, said Lawrence D'Angelo, medical director of the HIV/AIDS clinic at Children's, which is coordinating the Washington efforts of Project Access. This indicates that many young people are engaging in a chronic pattern of unsafe sex, he said.

Health officials are concerned that teens who know they are infected often remain sexually active, placing others at risk. "Teens with HIV infection inform their 'main sexual partner' of their diagnosis 50 percent of the time and 'casual' partners only 15 percent of the time," D'Angelo said.

Those same trends are also emerging throughout the nation. "We assumed kind of naively that you could do prevention for one generation and that it will trickle down to the next," said the CDC's Gayle. "It doesn't."

While many of the public health messages have successfully slowed the AIDS epidemic among white older gay men, the rates of HIV infection among the younger generation of gay men in the African American and Hispanic communities are rising, just as they are among young women.

"We need to maintain good prevention messages and services," Gayle said. "We need testing and counseling. We're starting to see a rise in other sexually transmitted diseases because people are returning to or initiating risky sexual behavior."

Where to Get Tested

The Project Access counseling and free testing program for people ages 13 to 24 will run Dec. 1-7 in Washington, Baltimore, Philadelphia, New York, Miami and Los Angeles. For more information on locations and hours in the Washington area, call 202-547-8719. For information about sites in the Baltimore area, call 410-706-6000.

Project Access partners in Washington and surrounding areas are:

- Alexandria City Health Department, 517 N. St. Asaph St., Alexandria, 703-838-4400.
- Arlington County Health Department, Department of Human Services, Communicable Diseases Unit, 1800 North Edison St., Arlington, 703-228-5176.
- Family & Medical Counseling Service Inc., 2041 Martin Luther King Jr. Ave. SE, 202-889-7900.
- Healthy Teens Center, Prince George's County Health Department, 7824 Central Ave., Landover, 301-324-5141.
- Metro TeenAIDS, The Stop, 2412 S. Shirlington Rd., Arlington, 703-769-5707.
- Metro TeenAIDS, The House, 3311 Toledo Terrace, Hyattsville, 301-270-7337.
- Metro TeenAIDS, Free Style, 1523 Pennsylvania Ave. SE, 202-547-8799.
- Planned Parenthood, Ophelia Egypt Center, 3937-A Minnesota Ave. NE, 202-388-4770.
- Planned Parenthood, Hyattsville Center, 1835 University Plaza, Hyattsville, 301-422-6066.
- Prince George's County Health Department, HIV/AIDS Prevention Department, Penn Silver Health Center, 508 Silver Hill Rd., Forestville, 301-817-3180.
- Whitman Walker Clinic, Elizabeth Taylor Medical Center, 1701 14th St. NW, 202-745-7000.
- Max Robinson Center, 2301 Martin Luther King Jr. Ave. SE, 202-678-8877.
- Washington Free Clinic, 1525 Newton Street NW, 202-667-1106.

- Metro TeenAIDS, The House, 3311 Toledo Terrace, Hyattsville, 301-270-7337.
- Metro TeenAIDS, Free Style, 1523 Pennsylvania Ave. SE, 202-547-8799.
- Planned Parenthood, Ophelia Egypt Center, 3937-A Minnesota Ave. NE, 202-388-4770.
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Ob.Gyn. News

VOL. 35, NO. 5

The Leading Independent Newspaper for the Obstetrician/Gynecologist

MARCH 1, 2000

PRO & CON

Do abstinence-only sex education programs work?

YES

There is some new research showing that some private-sector abstinence-only programs are successful in reducing teen pregnancy and STD rates. And the National Institutes of Health attributes the dropping teen pregnancy rate to more male abstinence. I think that's because people are talking more about abstinence.

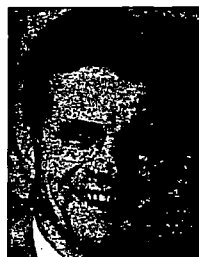
Telling our children that it's okay to have sex as long as they use protection is an inconsistent message. In every other area, including smoking and substance abuse, we teach our children risk avoidance—we tell them not to drink or smoke. How can we say they can be successful on risk avoidance in those other areas but not this one? That's saying children don't have any self-control, and it's the rationalization of a morally bankrupt society.

This message of promoting contraceptive use says kids can't be personally responsible for their actions, but that's not true. They can be responsible if we teach them. Sexuality is a strong drive, but that doesn't mean people can't be accountable for it.

When I talk to public school students about sexuality, I teach them how to use contraceptives to avoid pregnancy and some STDs if they decide to have sex. But I also tell them how stupid they would be to decide to do it.

Abstinence is the best message to give young people. We've got 40% of the public with herpes, and 30% of females under 25 infected with the human papillomavirus, which causes most cervical cancers. So why would we say, "Use a condom" when HPV—the number one sexually transmitted disease—is not prevented by using a condom? When we're not true to scientific principles, we fail.

I'm disappointed that the American Medical Association recently endorsed condom distribution in public schools. The problem with the AMA—and with the American Academy of Family Physicians as well—is that they sometimes decide to be politically correct rather than scientifically correct. If you asked 100 doctors about the best way to prevent STDs, they would advise people not to have sex until they're in a married, monogamous relationship. So why should the AMA's policy be less than the best advice you can give people? ■



Dr. Tom Coburn, a family physician from Muskogee, Okla., is a Republican member of Congress.

NO

There is no evidence that an abstinence-only curriculum maintains abstinence any longer than the regular sex education curriculum taught in most schools. Morality needs to incorporate reality, and the reality is that young people are sexually active.

Studies have shown that over half of teenagers have had a sexual experience by the time they've finished high school, and less than half have used condoms in their last sexual encounter. We need to look at the world as it exists and give adolescents useful information to address the risks they actually have, not those we wish they had.

While abstinence is an important component of sex education, if we use abstinence-only education, we will be ignoring at least 50% of kids who are already sexually active. They need accurate information about protecting themselves from the consequences of sexual activity, including STDs, HIV, and unwanted pregnancies.

The current sex education curriculum taught in many schools hasn't worked as well as we would want it to. One reason is that sex education is still so controversial that we don't have enough adequately funded programs to give sufficient information to kids. Young people need more than just technical information. They also need the opportunity to practice how to have safe sex conversations, and they need

access to tools that'll keep them healthy, such as condoms.

That's why I agree with the AMA's policy in favor of distributing condoms in schools. Given the dramatic consequences of unprotected sex, we have to try creative ways to give kids the tools and protection they need.

One of the most powerful analogies is the "designated driver" concept. While there are laws against teen drinking, there's a recognition that it's going to happen and that we need to protect the lives of kids.

Sex education hasn't worked because of our narrow view that it only be based in schools. Until it's normalized as an everyday part of society, we can't expect young people to get it. There are many examples of people having sex on TV, but seldom are condoms discussed, let alone shown. We use sexuality to market everything except for safe sex. Until we aren't so afraid of sex education and give it a real chance, we can't say that it has failed. ■



Dr. Donna Futterman is director of the adolescent AIDS program at Montefiore Medical Center in New York.

Prevention and Intervention programs reduce risky behaviors

An estimated 100,000 U.S. young people are infected with HIV, but that number may be much higher.

by Heather L. Longo
Staff Writer

ATLANTA — Although half of new HIV infections still occur in people age 25 or younger, prevention and

treatment programs are demonstrating decreased transmission rates.

An estimated 100,000 U.S. young people are infected with HIV, but that number is probably closer to 250,000,

said Mary Jane Rotheram, PhD, psychologist, University of California at Los Angeles.

Teenagers are mixing sex with drugs and having multiple sex partners, according to data presented at the National HIV Prevention Conference here.

Seropositive youth face the challenges of reducing sexual activity and

drug use and stopping HIV transmission to others, said Rotheram.

"One of the priorities with teenagers is clearly the need to prevent HIV transmission among them," said Donna Futterman, MD, director of the AIDS program at Montefiore Medical Center, Bronx, N.Y. It is estimated that at least one-third infected teenagers have never been tested, she said.

"Tremendous work needs to be done to help young people get tested and become aware of their status. The good news is that prevention is working," she said.

In 1997, according to Rotheram, National HIV Consensus Development Conference found that adolescent HIV prevention programs work but programs that stress only abstinence do not work. Abstinence should be encouraged, but so should responsible sexuality, she said.

To send the messages that sexual intercourse is connected to HIV risk and that knowledge of HIV status is

"Tremendous work needs to be done to help young people get tested and become aware of their status."

— Donna Futterman, MD



key component of HIV prevention and to provide care for those already infected, a social marketing program called "HIV. Live With It. Get Tested." will be implemented in six cities across the U.S. through the Adolescent Medicine HIV/AIDS Research Network (AMHARN), a national study of HIV in teens.

The program includes "Gettin' Busy" and "Hitting the Skins," projects that target youth by speaking youth language. "These are programs that use youth phrases for having sex that adults do not know, and that is the intent," said Futterman. "We are speaking youth language not adult language to reach out to young people via the media and in their communities."

One intervention program, Street Outreach to Drug Abusers Community AIDS Prevention (SODA CAP) project, found that teenagers in high risk areas who had contact with project members were twice as likely to use condoms than those who had no contact with the outreach team.

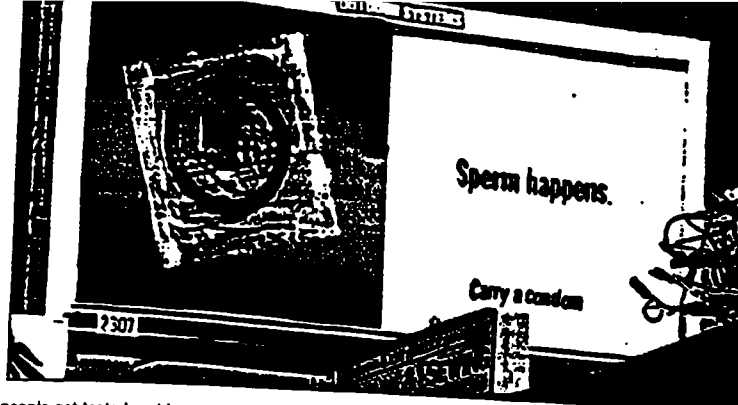
SODA CAP involved condom distribution and making services accessible to people within their communities, said Charles Collins, program manager, School of Public Health, University of Alabama at Birmingham. After doing intervention in high

**INFECTIOUS DISEASES
IN CHILDREN®**

THE NEWS SOURCE FOR TODAY'S PEDIATRICIAN

November 1999

Volume 12, Number 11



Tremendous work needs to be done to help young people get tested and become aware of their status. The good news is that prevention is working. In 1997, a National HIV Consensus Development Conference found that adolescent HIV prevention programs work, but programs that stress only abstinence do not work. Abstinence should be encouraged, but so should responsible sexuality.

risk drug procurement areas with adults, the project team turned to teenagers patronizing crack houses and open-air drug markets.

"We made the determination that if the person is old enough to enter a crack house, they are old enough to be given condoms and HIV interventions," he said.

Of the youth intercepted by the program, 90% were sexually active within the last month and had an average of two sexual partners within that time. Teenagers, however, were using condoms more than adults.

"We found that adults were using condoms 29% of the time with boyfriends, girlfriends or main sex partners. Fifty-two percent of teenagers were using condoms with their main sex partner," Collins said.

When with someone other than their main sex partner, teenagers used condoms 84% of the time, while adults used them 70%.

When asked by a partner to comply with condom use, 73% of adolescents agreed, compared with only 46% of adults, said Collins. "This may help explain why we found adolescents were using condoms more than adults."

Another reason could be that young people used less crack cocaine and alcohol than adults, said Collins. However, adolescents used more marijuana and were mixing sex with drugs.

Project ACTION

Population Services International, Inc. (PSI) of Washington, D.C., a non-profit international health organization using social marketing to promote health, targeted sexually active adolescents at risk for HIV with Project ACTION.

In Portland, Ore., between 1992 and 1994, and later replicated in Seattle and San Jose, Calif., Project ACTION addressed safer sexual behaviors at multiple levels using

community mobilization, increased condom access, media campaigns, youth involvement and skills building.

Community mobilization built support in local communities and made

ability to practice safer sexual behavior.

In all three communities, sexual activity among youth decreased. "The project did not promote sexual activity. It made a positive impact on con-

months, and sexual behavior reduced substantially, she said. There was 82% reduction in unprotected sex and a 31% reduction in a weighted index of substance use.

The program worked, she said, and the effect was large. Not many of the 100,000-250,000 teenagers who are probably infected with HIV, however, have been identified, so recruiting for the trial was difficult, she said.

Also, approximately 80% of those infected are unaware of these statistics. Those who did, however, seemed to change their behaviors after finding out their status. "Knowing you are positive is a powerful intervention in itself, in addition to the intervention," said Rotheram.

Approximately two-thirds of the control group maintained safe sexual behaviors for two years. Condom use increased before the

study started and maintained that behavior over time. Half of the injecting drug users stopped injecting drugs before the study and did not start again when it concluded, she said.

"The results of this study point to the potential of the effect of youth knowing their sero status and our ability to further increase and improve their risk reduction behaviors over time."

100

For more information:

Beleutz J. Outcome evaluation and lessons learned in Project ACTION. Abstract #706. Presented at the National HIV Prevention Conference. Aug. 29-Sept. 1. Atlanta.

Collins C. Condom use among African-American adolescents intercepted by a street outreach intervention in high-risk drug procurement zones. Abstract #483. Presented at the National HIV Prevention Conference. Aug. 29-Sept. 1. Atlanta.

Rotheram MJ. Evaluation of a behavior intervention to seropositive youth. Abstract #384. Presented at the National HIV Prevention Conference. Aug. 29-Sept. 1. Atlanta.

Gettin' BUEV?

HIV. Live with it. Get tested.
Call citywide 718-881-TEST

If you are,
and you're
between
the ages of
13 and 21--
get tested.

sure people understood why the approach was necessary. "Condom vending machines were placed in locations that youths told us they frequent," said John Beleutz, Director of U.S. Programs, PSI.

These places included recreation centers, libraries, youth-serving small businesses and some national fast food chains, he said. "We reached well over half of the youth that we were targeting and we had a very positive response."

Media campaigns using television, radio, bus boards and billboards promoted safer sex messages and condoms in languages that youth understood. These programs worked with commercial advertising firms, Beleutz said.

"We put the same firms that sell fast food and sneakers to work promoting condoms," he said. Youth involvement and skills building, the final piece of the project, improved individual youth

dom use and attitudes towards condoms among at-risk youth."

In Portland and Seattle, condom use increased during the program, but decreased when it ended. "This tells us that these kinds of interventions need to be maintained over time or they are not going to be effective."

Teens living with HIV

Decreases in sexual behavior and unprotected sex among high-risk adolescents were also found in a randomized, controlled trial involving 310 youth with HIV and conducted in four U.S. cities in nine clinical sites from 1994 to 1998.

How teenagers with HIV were taking care of their health, adhering to antiretrovirals, stopping HIV transmission, and maintaining a high quality of life were addressed using small group cognitive behavioral intervention, said Rotheram.

There were 30 sessions over 24

Teens lacking safe-sex info

By **SUSAN FORREST**
DAILY NEWS STAFF WRITER

The safe-sex message isn't getting through to the people who need it most — teenagers, according to a national study released yesterday.

The survey by the Henry J. Kaiser Family Foundation says a lack of communication between parents and teens and confusion among teens are often to blame.

Experts say the study is particularly alarming because most of the youths surveyed will be sexually active by the time they graduate from high school. And one in two said they don't have the basic facts on AIDS and other sexually transmitted diseases, birth control or even how to get a condom.

The survey of more than 1,000 high school students "highlights the needs and lack of awareness about the health services available to them," the foundation's Tina Hoff said.

Dr. Donna Futterman, director of the Adolescent AIDS Program at Montefiore Medical Center in the Bronx, said the findings were not surprising, "given the alarming rates of teen pregnancy, HIV and sexually transmitted diseases."

"Teens need explicit information about sex and how to protect themselves," she said. "In our society, we use teen sexuality to market everything except safe sex."

Michael McGee, national vice president for education at Manhattan-based Planned Parenthood, said most of the millions of teens who seek out Planned Parenthood are not seeking information about safe sex.

"Most come in after they suspect they are pregnant or might have an infection," McGee said. "It's very alarming, because clearly there is a need for more sex education."

AIDS ED IN THE 'HOOD

BRONX TEENAGERS TAKE PREVENTION TO THE STREETS By Mark Schoofs

POE PARK, WHERE THE poet once lived, is a sliver of green that runs for just a block along the Grand Concourse in the Bronx, but the park attracts a crowd. Some come to watch the dog fights, others to smoke a joint, but most come "to pick up girls or guys," says 19-year-old Dennis Gonzales. "Everybody here likes sex." He smiles and says, "That's why I come here."

Sex is also what draws a group of six teenage girls to this park—but these high school students are AIDS educators. Their debut is today, and Gonzales

is their first student. Two of the girls walk up to him and his friends, chatting them up and offering information packs containing condoms.

"At first I thought, 'No, I'm not interested,'" Gonzales says. "But then I saw the condoms and I thought, 'They're trying to save somebody's life.'"

Indeed they are. Startling as it may seem in this era of wonder drugs, outreach workers like these high school kids still form the front line against HIV. A year ago this week, President Clinton committed the nation to develop an AIDS vaccine in 10 years, an extremely ambitious, some say unrealistic, goal. In the meantime, Clinton has hobbled AIDS prevention by his recent refusal to fund needle-exchange programs, which reduce the spread of HIV.

And so the virus continues its march. Last month, the Centers for Disease Control reported that while the AIDS death rate is declining—mainly because of protease inhibitors—the rate of new infections hasn't slowed. And those infections are occurring in precisely the people this outreach team is targeting: black and Latino youths.

Blacks bear the epidemic's brunt: While they make up 12 per cent of the U.S. population, they account for about 40 per cent of all AIDS cases, more than any other ethnic group. But earlier this month, a gathering of national Latino leaders was shocked to learn how HIV is devastating their community (see sidebar, "iEmergencia!") Latinos make up about a tenth of the population, but they account for almost a fifth of current AIDS cases. If these trends continue, Latinos with HIV will surpass whites with the virus in five years.

Unfortunately the same problems that help the virus—poverty, racism, and difficulties with English—also make it hard for communities of color to fight back. White agencies draw on a large and well-heeled donor base, but that's much harder to find in the Bronx. The agency sponsoring the six outreach workers—Young Adults Against Drugs & Alcohol, or YAADA—is five years old but operates out of cramped offices on just \$250,000 a year. Even though AIDS prevention is its central mission, the agency can't just focus on HIV because vulnerability to the virus is interwoven with all the other problems that confront kids in the Bronx, as Edwin Orúz, YAADA's founder, knows firsthand. His aunt and uncle died of AIDS, and the IV-drug use that let the virus into their bodies also scarred two of their children with "a lot of psychological problems" that persist to this day.

So YAADA stretches its meager budget. About 400 teenagers attend its programs, which range from housing and welfare advocacy to

health referrals and rap groups, including one of the only groups in the Bronx for gay and bisexual kids. YAADA's AIDS educators reach more than 1500 people a year, telling them about safer sex and encouraging them to get tested.

"I WAS THINKING all these teenagers would be like, 'No,' or 'Whatever,'" says Gris Maldí Irizarry, 16. "But a lot of them were really open-minded."

One of the tougher audiences was a group of guys playing football. Two of them, who looked a few years older than the outreach workers, laughed and said they already knew everything about sex. But one younger homie asked a lot of questions, and then others joined in. Some clearly wanted to flirt more than learn, but the young women used such attention as an opportunity to slip in AIDS information.

As outreach worker Jackie de Jesus walked away from the curious boy, she called out to the whole group, "That's the man who thinks!" One of the guys bantered back, "You think he's a man? You just made Shorty's day!"

For adolescents, admitting ignorance about sex can bring teasing and ridicule, so frank education is critical. "One in four people with HIV was infected before age 21," says Donna Futterman, director of the Adolescent AIDS Program at Montefiore Medical Center. For this age group, she says, IV-drug use is not the main HIV conduit: "Overwhelmingly, young people are getting infected sexually."

And yet teenagers in New York City report that their schools are failing to give them adequate sex ed. De Jesus says she hasn't gotten any information at all. She's not alone. More than 700 New York City high school students were surveyed by ACT UP's Youth Education Life Line (YELL). Thirty-nine per cent said they had been given no AIDS education last year. Only 10 per cent had received six classes, though the Board of Education mandates that many lessons.

But even when schools do provide AIDS information, "they don't give you details, the real information that teens want to hear," says Irizarry. Condom demonstrations are banned in city classrooms, even though improper use can make rubbers break.

IN FRONT OF a crowd of 300, most of them high school students, a young man holds a dildo in the anatomically correct position. The audience whoops—but pays close attention as his female



On the front lines (clockwise from left): Selena Grasty, Stacey Herrera, Evalyee Grasty, Rosie Santiago, Michelle Melendez, Gris Maldí Irizarry, and Brenda Ozuna

colleague demonstrates how to put on a condom. Later in this Town Hall Meeting for Youth, held last month and sponsored by Montefiore's Adolescent AIDS Program, a girl stands up and says, "I'm still a virgin and I'm 17 years old." She gets a thunderous ovation. Who says sex ed can't address both abstinence and sex?

Indeed, AIDS education must reach many different kinds of people—as the six outreach

workers learned. In the Bronx's St. James Park, an 18-year-old woman said she had just started having sex—and that she made her boyfriend get tested and bring her the written results before they had intercourse. But another woman told the workers that their information was too late for her, because she was already pregnant. Without missing a beat, they responded: "You can still use it next time."

iEmergencia!

The conference was called Unidos Para la Vida—United for Life—but the statistics presented to Latino leaders at the Harvard AIDS Institute this month were mostly about death.

According to the CDC and Harvard researchers:

- ▶ Hispanic men are three times as likely to get AIDS as white men, and Hispanic women are six times likelier to get the disease than white women.
- ▶ New drugs helped push down the AIDS death rate among whites by 21 per cent last year, but the Latino death rate declined by only 10 per cent.
- ▶ Almost a quarter of all children with AIDS are Latino, and Latino children are six times likelier than white children to be diagnosed with AIDS.
- ▶ More than half of Hispanic men with AIDS, and more than 80 per cent of Hispanic women, have household incomes under \$10,000.

Dennis deLeon, a conference organizer, says these shocking statistics helped galvanize participants, many of whom had not previously been involved in AIDS work. The actress Rosie Perez vowed to mobilize entertainers, representatives of Spanish-language media promised to give the epidemic more coverage, and practically everyone agreed to pressure foundations and corporations to fund Latino agencies in addition to white organizations.

—M.S.



AIDS is a growing threat to teen-agers, many of whom remain uninformed about safe sex. Francisco Lazala, right, of Young Adults Against Drugs and Alcohol, passed out condoms and counseled teen-agers like Cabral Wilkins in the Bronx.

Metro Report

The New York Times

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SUNDAY, MARCH 10, 1996

Still Lives With AIDS

3 Youths Face Shadows On Their Horizons

By LIZETTE ALVAREZ

Growing up a half-step from a wayward bullet, it was easy for one young man from Bedford-Stuyvesant to figure that sex could never be as lethal as the crack dealers and street gangs stalking his neighborhood.

In Jersey City, one teen-age girl's mother warned her over and over about the consequences of having sex too young, but envious of her friends' babies and exploits, the high school student didn't listen.

And in Harlem, another teen-ager wanted to listen but her mother was indifferent. When things at home became unbearable, her boyfriend comforted her, then demanded sex. It seemed a fair exchange for a 14-year-old girl.

Over the last two years, all three have learned something that shattered their lives: they are infected with H.I.V., the virus that causes AIDS.

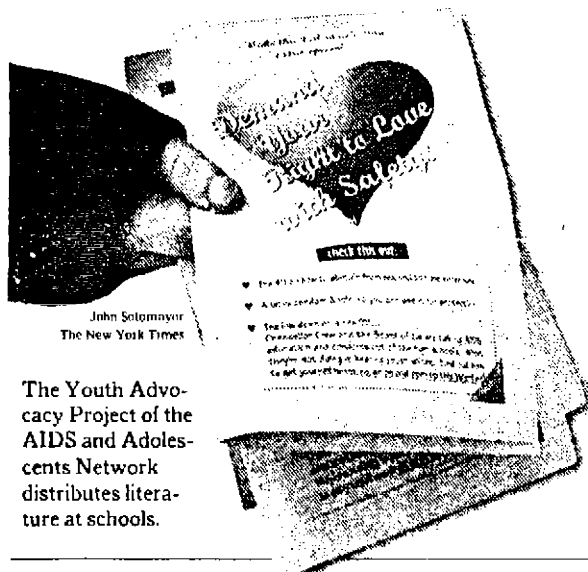
"I thought I wanted to kill myself," said the youth from Bedford-Stuyvesant. "These are supposed to be the best years of my life, and now I may not enjoy anything."

AIDS has become a growing threat to a particularly vulnerable group: teen-agers and young adults. Last week, the White House Office of National AIDS Policy released a report that called national attention to the problem and asked community leaders and the medical establishment to increase efforts at prevention and treatment. One of every four people who become infected with the virus is under the age of 20, according to the report.

The report underscored that all sexually active teen-agers are at greater risk of becoming infected with H.I.V., but pointed out that some are more susceptible. Among the hardest hit are those from poor neighborhoods, where AIDS is more prevalent and adolescents are having sex more often and at an earlier age.

"H.I.V. infection is having a huge impact on adoles-

Continued on Page 34



The Youth Advocacy Project of the AIDS and Adolescents Network distributes literature at schools.

Still Lives With AIDS: 3 Youths Face Shadows on Their Horizons

Continued From Page 33

cents and young adults," said Dr. Donna Futterman, director of the Adolescent AIDS Program at Montefiore Medical Center in the Bronx. The program opened in 1987 as the first clinic of its kind in the country.

In New York City, nearly 11,000 people aged 13 to 29 have died of or have AIDS, experts say. And in New Jersey, 15 percent of AIDS cases are among 20- to 29-year-olds, many of them from urban neighborhoods. Most contracted the virus as teenagers.

The problem is compounded by the fact that seemingly healthy teenagers rarely visit doctors or get tested. Most H.I.V.-positive young people do not know they are infected, making it difficult for doctors to treat them during the early, critical stages and for researchers to determine how fast the disease is spreading among this age group.

For a generation that came of age knowing at least basic AIDS prevention buzzwords, today's young people — from Washington Heights to Long Island — remain strikingly ambivalent about the consequences of their bedroom behavior. Instead of heeding the safe-sex message, many defy it with a contradictory blend of invincibility and fatalism: Bad things will not happen to them, but if they do it is beyond their control.

In poor urban neighborhoods, where young people face an undue share of society's sorrows, this attitude is magnified.

Martha Diaz, who counsels teenagers in the Bronx about AIDS prevention, believes they fight bullets and beatings by devising a mental forcefield.

Broken homes in broken-down neighborhoods trigger feelings of abandonment and diminish respect for authority. Young people crave attention and guidance, but mothers and fathers are often not around or too tired to shepherd them over life's trapdoors.

"There is such grief among teenagers in the inner city," said Chris Norwood, head of the Bronx-based Health Force Women and Men Against AIDS. "You are dealing with kids who have been through the deaths of 1 or 2 or 10 people close to them. They can't even grasp the idea of prevention."

In some cases, sex just proves too tough an adversary for parents. Young girls with babies propped on their hips become the center of attention. Boastful young boys engage in games of sexual conquest that begin earlier than ever.

To the three young people profiled here, all of whom spoke on condition that their identities be concealed, sex became an antidote to the pangs of poverty and adolescence. It offered a quick dose of reassurance. And it felt infinitely safer than a day at school or an evening at home.

Jersey City

When Temptation Is Everywhere

Sex dominated her teen-age world. By age 14, most of her friends were already having it, and they spoke of nothing else. "They made it sound so good," she said.

For this 22-year-old woman, who grew up in a home full of rules and restrictions — "come home straight after school, no dating at all" — it was difficult to resist, but she tried.

Whenever her boyfriend hit her for refusing sex, or her 16-year-old friend passed around her baby like a well-earned prize, her mother's voice boomed into her ear: "Wait, it will ruin your life, you want to be a doctor, don't you?"

"My parents were very strict," she said. "They tried really hard, too hard, so I went the other way. I wanted to wait, but there was just too many people joining in."

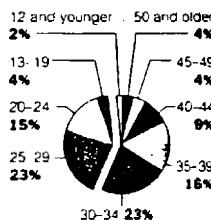
She said she first had sex at 17. "Sex is just out there. And if you don't do it, he will find somebody else who will."

No one in her circle ever used condoms, and she wanted to get pregnant anyway. "I was upset when I got my period," she said. AIDS was "something that had nothing to do with me."

BY THE NUMBERS

H.I.V. Infection

Percentage of cases of H.I.V. infection reported in the United States as of June 1995



Source: Centers for Disease Control and Prevention

When she was a 19-year-old college student, she began dating a good-looking club dancer who did not want to use condoms, either. Even after getting a call from his former girlfriend, who warned her he had a disease, she had unprotected sex. Her boyfriend simply denied he was H.I.V. positive.

"His ex-girlfriend told me I'd be dead by the time I reached 30," she recalled.

She tested H.I.V. negative three times before a positive showed up last July. She ended the relationship. Her mother fainted when she heard the news but did not kick her out of the house. Now the young woman is following her mother's advice and focusing on her schoolwork.

"I'm the only one of my friends that made it to college," she said proudly.

The dancer, who still denies being H.I.V. positive, has moved on to an 18-year-old girl.

"He's going after the young ones, and the young ones go after the younger ones," she said. "They just don't know you could be healthy and beautiful and still have AIDS."

Harlem

Fleeing a World Of Tensions

The first time she had sex, at the age of 14, two things drove her to it: fear and loneliness.

Some nights she heard objects smashing into walls or her mother's piercing shouts as she battled with

her live-in boyfriend. "My mother wasn't paying a lot of attention to me," said the woman, who is now 18 and living in a tumble-down building in Harlem. "She was too busy thinking about her boyfriend. I was so alone, nobody understood."

After that, sex became a way to shut out the friction at home — "the arguments and the neglect," she called it. "It was something I wanted that felt good."

Her mother didn't know and wouldn't have cared, she said. "She's in her own world."

Last May, the young woman applied for a job that required H.I.V. testing, and found out she was positive. She said it was her boyfriend — the first real one she has had — who gave it to her. They never used condoms. But she has not mustered the courage to tell him yet.

"I still love him," she said. Instead, she has reserved her anger for her mother.

"If my mother was really there when I wanted her to be, this might not have happened," she said. "I mean, I was a tomboy one second, then I was having sex. It's inexcusable."

Bedford-Stuyvesant

When Invincibility Falls Away

He knew the fundamentals from bits of sketchy information picked up at school: AIDS was a disease. You could catch it by having sex without a condom. And you died from it.

But in his mind it touched only drug addicts and flamboyant homosexuals, not young, good-looking, street-smart teenagers.

"I didn't worry about it," he said. "I thought I was invincible."

He remembers the moment his life got turned around. He was 12 and his mother had just died. From one day to the next, he moved from a quiet neighborhood in Queens to his aunt's claustrophobic home in Bedford-Stuyvesant.

"It's incredible how one event can change your life," said the young man, who is now 19. "If my mother had not died, I would not be H.I.V. positive."

Before long, he was skipping school, staying away from home for nights at a time and robbing people on subways. He was arrested and put on probation.

Sex, he said, made him feel powerful. It boosted his self-confidence. It was about simple things, like feeling

good, and complicated things, like feeling loved.

With no car and little money to spend on dates, it was easy to make sex the focal point of his relationships.

"You think, 'I don't have much to offer this person,'" he said. "I can't give her a teddy bear, so I'll give her myself."

And like most boys his age, he felt that condoms interfered. He wore them when he first became sexually active, then abandoned them. Most girls did not object.

His sexual curiosity ultimately led him into "sexual experimentation," this time with men, which he said was not uncommon for boys his age.

"I didn't want to do it at first," he said. "But then I thought, 'It's just another sexual experience.'"

In time, when money was short, he

agreed to trade sexual favors with men for a meal, a covered pair of sneakers, or a tape player. At the start of 1994, he moved in with one of those men. He heard rumors that his partner had AIDS, but his companion insisted he was H.I.V. negative. By year's end, he was infected.

Soon after, racked by bitterness and depression, the young man found himself riding the subway and staring angrily at a group of boys his age as they talked about gold earrings and Nikes and down jackets.

"To be in one of their bodies and not my own, to be in their situation and not in mine," said the youth, sitting in the kitchen of Safe Home, the group house for H.I.V.-positive homeless teenagers where he now lives.

"It just never entered my mind that this would happen to me."

THE NEW YORK TIMES METRO SUNDAY, MARCH 10, 1996

CITY



RICHARD HARBUS

PSYCHOLOGIST Brenda Chabon of Montefiore Medical Center counsels young person who has both AIDS and a daughter.

AIDS program serves youth

By **JON STENZLER**

Special to The News

Julio Rivera glows with the vitality of a typical young city person.

But two years ago, on a routine hospital visit, the now 22-year-old Bronx native learned he had joined the ranks of an estimated 3,000 teen to pre-adult New Yorkers diagnosed as HIV-positive.

"I felt like the whole world was crashing," said Rivera, a part-time office worker.

But thanks to Montefiore Medical Center's Adolescent AIDS Program, the largest in the country, he and 90 other young Bronx residents who receive treatment, counseling and peer group support there are now able to better cope with a disease that has no known cure.

"I would have killed myself a long time ago without this program," said

Rivera.

With the tremendous recent advances in AIDS medication, Montefiore's 10-year-old treatment program has initiated a media blitz to reach out to youth ages 13 to 21 who may be HIV-positive and alert them to free, confidential testing and treatment options.

"Essentially all the statistics tell us that there are thousands of kids out there who are infected with HIV but are not in care," said Dr. Donna Futterman, program head.

"A lot of people out there think the only way to get HIV is to use needles or engage in homosexual sex. But that's not true," said Dr. Carla Damus, the head of REACH, a community education program, and a doctor at the Albert Einstein College of Medicine at Montefiore. "Kids need to know that at their age they are at a very high risk because they are sexu-

ally active."

Brenda Chabon, the program's psychologist, said the number of girls seeking its services has increased significantly in the past four years.

"They're just girls in the Bronx who had sex with guys who were infected," said Chabon, who has seen seven clients die during her three years with the program.

"Among teenagers the virus is entrenched in the heterosexual community," said Chabon.

While staffers at the Adolescent AIDS Program say abstinence is the only certain way to avoid sexual transmittal of the virus, properly protecting oneself is a must.

"Bottom line," said Chabon, "if you're gonna have sex, make sure you use a condom."

To learn more about the program or to schedule an HIV test call (718) 881-TEST (8378).

NEW YORK WOMAN

HOME & FAMILY

For kids, the disease is on the rise

By SAMME CHITTUM

OF the 90 HIV-positive young people in treatment at the Montefiore Medical Center in the Bronx — which has the largest adolescent AIDS unit in the city — almost 60 percent are female.

Most had “no idea that their [sexual] partners [who gave them the virus] were considered at risk,” says Dr. Donna Futterman, director of the Adolescent AIDS Program at Montefiore Medical Center in The Bronx — the first of its kind in the country.

According to Futterman, until young men and women first feel the symptoms — sometimes not until their 20s — few know they have it.

But plenty of them do — especially in poor urban areas.

Last year, New York reported more new cases of HIV infection among

people 13 to 19 than any other state, according to the Centers for Disease Control.

New York City had the highest reported annual rate of AIDS for adults and adolescents (125 per 100,000) of any U.S. city — except San Francisco.

A similar trend is being felt across the country: The incidence of AIDS rose 22 percent in people ages 13 to 25 from 1990 to 1995, and a startling 158 percent for young black women in this age group, according to the Centers for Disease Control.

“Typically teens don’t consider themselves at risk,” says Erin Fogarty, assistant director for the program. “But they are.”

Last year, the White House Office of National AIDS Policy issued a report that said one of every four people who are newly infected is under 20 — and called for more prevention funding

and work.

“Undoubtedly, HIV is having a huge impact on adolescents and young adults,” says Futterman.

That’s why Montefiore launched a media campaign in March to let city teens — both straight and gay — know they may be at risk.

By putting up posters and leaving handouts at Bronx stores, sending liaisons to schools, outreach workers from Montefiore hope sexually active teens will come in for testing.

Young people who test negative are given safe sex and prevention counselling, says Fogarty.

Those who test positive are set up with health care and emotional support.

“The sooner we get them into care, the longer and healthier they can live,” says Fogarty.

For more information, call 718 881-TEST.



Dr. Donna Futterman, director of the Adolescent AIDS Program at Montefiore, consults a teen AIDS patient.

New York Post/WA Finches

El SIDA y la juventud

MARIA VEGA

Una comisión asesora del gobierno federal publicó ayer un informe sobre el SIDA y el VIH entre los adolescentes, pidiendo que se hagan esfuerzos más enérgicos para proteger a la juventud.

Se estima que una de cada cuatro nuevos casos de SIDA o infección de VIH en los Estados Unidos se da entre menores de 20 años de edad. Y la mayoría de los jóvenes con VIH, igual

que los adultos que tienen el virus, "ni siquiera sabe que lo tienen", según dijo ayer la doctora Donna Futterman, del hospital Montefiore, quien trabajó con la comisión asesora y también es miembro del comité asesor sobre el SIDA de la Junta de Educación.

Los miembros de la comisión, nombrada por la Casa Blanca, respaldaron los programas de prevención del SIDA y educación a los jóvenes, tanto en el

salón de clase como fuera de éste. La comisión señaló que uno de los principales problemas es la falta de acceso a pruebas de SIDA y consejería para los jóvenes sobre la enfermedad. El informe también recomienda que se hagan más estudios clínicos sobre el efecto de la enfermedad entre los jóvenes y que se dé a los adolescentes más participación en los esfuerzos para prevenir y erradicar el SIDA.



Life

WEDNESDAY, OCTOBER 29, 1997

AIDS scare rips through upstate N.Y. teen-agers

Outbreak blamed on 1 man puts communities in shock

Preventive steps remain critical

Young are particularly vulnerable to misjudgment of sexual risks

By Kim Painter
USA TODAY

In a time of mostly reassuring AIDS news — deaths are down as treatments improve — a tragic outbreak in New York may refocus the country on a continuing urgent need for prevention, experts say.

"A lot of people want to say we're done with prevention, let's move on to treatment," says Ronald Valdiserri, an official with the federal Centers for Disease Control and Prevention, Atlanta. "But here we have this very sad, very unfortunate situation. And what we need to do now is make sure it doesn't happen again."

What happened in rural Chautauqua County — one man infecting at least nine girls and young women and exposing many more people to the AIDS virus, HIV — is unusual in some ways. "The reports suggest this person was extremely infectious, had a lot of sexual partners, didn't tell them and didn't do anything to protect them," says Andrew Moss, an HIV transmission expert at the University of California, San Francisco. "Not

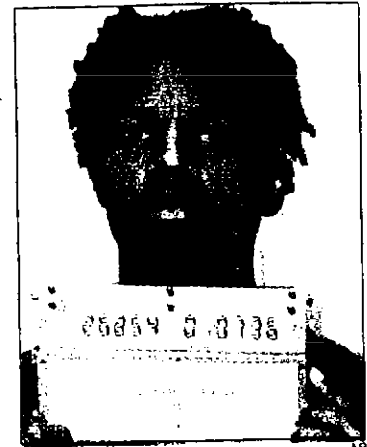
"We do know that it's possible to become infected after a single episode of unprotected heterosexual intercourse."

— Ronald Valdiserri, Centers for Disease Control and Prevention

many people behave like this."

The outbreak also may seem surprising in light of research suggesting the average risk in any one act of vaginal sex is very low. "But we do know that it's possible to become infected after a single episode of unprotected heterosexual intercourse," Valdiserri says. And some people are at much higher risk than others.

For example, experts say, women are more vulnerable than men during vaginal sex, and teen-age girls may be especially vulnerable because of physical differences in their immature reproductive tracts.



Suspect: Nushawn Williams

Anal sex, whether between men or between men and women, greatly increases risk.

And one infected partner is not the same as another: Some, usually at the earliest and latest stages of disease, carry extraordinarily high levels of virus, making them more infectious.

"But just as you can't look at someone and say he or she has HIV, you can't look at them and say, gee, their viral load is high," Valdiserri says.

What people can do, experts agree, is take all the precautions advised for years: Abstain from sex, limit sexual partners to those you know aren't infected or use condoms.

The message is especially urgent for young people, says Richard Elovich, director of HIV prevention at Gay Men's Health Crisis, New York. "Risk, sickness and death don't seem real to them."

Teens must know "you cannot rely on the person telling you they do or do not have HIV," says physician Donna Futterman, director of a teen AIDS clinic at Montefiore Medical Center, the Bronx, N.Y. "You have to take it upon yourself to protect yourself."

Test positive, you get HIV counseling. Test negative, you get HIV counseling.

Come within 20 feet of our building, you get HIV counseling.

A Test of Anxiety

Easy H.I.V. Tests Still Too Hard for Many

By ANDREW JACOBS

JAMAL SANTOS has heard the good news. It drones from the mouths of outreach workers who try to steer him to a mobile health van parked down the street. And it pours, with great hyperbole, from the lips of friends he hangs out with on Christopher Street. Jamal, 18, knows all about the "miracle drugs" that have made H.I.V. something less than a death sentence.

"What they say is it's going to be a cure," explained Jamal, a lanky, animated youth as he strolled toward the Hudson River piers in Greenwich Village last week with his new boyfriend, Terrence. "'Hallelujah,' is what I say."

But Jamal and Terrence have not taken the test that would determine whether they have H.I.V., the virus that causes AIDS. "It just spooks me," said Jamal, who lives in Harlem. "If I was to get AIDS, then I'd take those drugs. Until then why should I carry around an ugly piece of information?"

It has been more than a year since a potent new class of drugs, protease inhibitors, became widely available, pulling many people with AIDS from the brink of death. But despite the hail of media attention about the benefits of treatment and a growing push by AIDS advocates to a promote widespread testing, most New Yorkers are still reluctant to roll up their sleeves. Even 15 years into the epidemic, trepidation, denial and fear of discrimination are still powerful forces that have convinced many they are better off in the dark.

While neither state nor city health officials could provide recent figures

for H.I.V. tests performed in private labs or with home test kits, the number of tests processed by the city's Department of Health dropped to 63,168 in 1996 from 167,898 in 1995, a reflection of the expanding number of test outlets.

But anecdotally, health officials, private doctors and AIDS advocates said they have yet to see a mad rush for H.I.V. testing, even though the benefits of early detection and prompt intervention with the new drugs have been widely touted.

"Our phones aren't exactly ringing off the hook," said Dr. Jack DeHovitz, who runs the H.I.V. Center for Women and Children at the State University of New York Health Science Center in Brooklyn. Earlier this summer, the center began placing public service advertisements at bus shelters and on radio stations aimed at getting black women to take the test. But mistrust of the health-care system, he said, keeps many away.

"There's also the fact that when your life is so complicated with job, housing and drug abuse problems," he said, "you don't need another piece of information to complicate your life."

While gay white men long ago learned to coexist with the AIDS epidemic, the stigma of a positive diagnosis is still alive among minorities, say many AIDS advocates. "In the Hispanic community, people with H.I.V. become pariahs," said Dennis DeLeon, the executive director of the Latino Commission on AIDS, adding that many women who test positive are victimized by their husbands. People are so afraid to know the truth, he said, that more than 30 percent of Hispanic men and women who take the test never return for the

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With the availability of potent new AIDS drugs, testing centers have opened and AIDS advocates now support widespread testing. But most New Yorkers are still reluctant to roll up their sleeves.

results.

For immigrants, the fears are even greater. Many illegal immigrants believe that they will be deported or denied medical care if they test positive. "The level of hysteria out there is like it was in the gay world a decade ago," said Julio DiCent, the director of AIDS Services at Alianza Dominicana in Washington Heights.

Because epidemiologists estimate that half of those with H.I.V. do not know they are infected, Federal officials and local health-care providers are eager to boost the number of people getting tested, to getting people into treatment and help them modify the kind of behavior that could put others at risk.

Such enthusiasm for testing is clearly a recent phenomenon. In 1985, when the H.I.V. antibody test first became available, Gay Men's Health Crisis, the city's largest AIDS service provider, was highly skeptical. "For years, there was no advantage to knowing your status because there was nothing to do about it," said Richard Elovich, the organization's director of H.I.V. Prevention.

In an early brochure on testing, the organization warned: "It is normal for people to feel depressed, anxious and even suicidal when they find out they are H.I.V.-positive," adding that those who tested positive could have been subject to discrimination and be "shunned by lovers, families, friends and co-workers." These days, Gay Men's Health Crisis vigorously promotes the test with an ad campaign that exhorts people to visit the David Geffen Center for H.I.V. Prevention and Health Education, a \$2.5 million testing center it opened six weeks ago in Chelsea.

Anticipating a stampede of test-seekers, many clinics, doctors and corporations have been climbing on the testing bandwagon. SmithKline Beecham, the makers of OraSure, a new oral antibody test, has been trying to get into the New York City market, seeking to replace the standard blood test with its kit, which retails for \$35. But so far, officials at the city's Department of Health, concerned about its accuracy, have resisted using OraSure at its testing sites. The agency is conducting pilot studies around the city.

Home Access Health, which sells an over-the-counter test kit, has sold more than 100,000 units this year, twice as many as last year, said the company's co-founder, Dr. Allan P. Frank. He said more than 60 percent of those buying the kits, which start at \$29, are first-time testers. The company also wants repeat testers, "to keep doing it as a regular part of preventative care," he said.

An informal survey of Manhattan drug stores, however, revealed that New Yorkers have shied from home testing. Rick Tse, a pharmacist at Rite Aid on Eighth Avenue and 24th Street, said he has sold only one kit a month. "Maybe people are reluctant to identify themselves in public," he said. "Or maybe they don't want to spend the money when they can get tested for free?"

Or perhaps, for many, ignorance remains bliss. "My impression is that for gay men at least, whether they turn positive or not is irrelevant since they have this impression that there's a cure out there," said Dr. Gabriel Torres, medical director of the AIDS program at St. Vincent's Medical Center. "For many, the truth is a burden."

DIRECTORY

Testing Sites

A few public and nonprofit clinics offering free anonymous or confidential H.I.V. tests:

City Department of Health. Anonymous blood testing at 12 sites. (800) TALK-HIV.

Community Family Planning Council. Confidential testing at mobile units and 8 centers. (800) 955-2372.

Positive Health Project, Midtown. Walk-in blood test clinic. (212) 465-8305.

H.I.V. Center for Women and Children, SUNY Health Science Center, Central Brooklyn. Confidential blood testing. (718) 270-4155.

David Geffen Center for H.I.V. Prevention and Health Education, Chelsea. Confidential testing. (212) 367-1100.

S P E C I A L I S S I M E

JUNE 9, 1997

NEW YORK

THE BEST HOSPITALS IN NEW YORK

An insider's guide to the top medical teams, the newest treatments, and standout care in dozens of specialties from heart surgery to in vitro fertilization



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THE BEST HOSPITALS

AIDS

HIV ward on lower First Avenue and the Robert Mapplethorpe Hospice (rehab and care for late-stage patients), as well as the outpatient Peter Krueger Clinic, were flooded with 17,611 visits last year, placing this AIDS center among the busiest in the city. The food satisfies, the staff of 22 full-time specialists (plus nutritionists, therapists, nurses, and social workers) dole out respect with the medications, and access to treatments drawing on the newest research is on a par with New York Hospital's. Beth Israel is one of three city hospitals to retain NIH research funds through the AIDS Clinical Trials Group, along with NYU-Cornell and Montefiore Medical Center.

Since 1996, Beth Israel has been the home of the well-respected HIV-AIDS Comprehensive Care Center, under the direction of Dr. Victoria Sharp. But last month, in one of the first shuffles following the two hospitals' merger, Sharp transferred to St. Luke's-Roosevelt Hospital—and the center will follow shortly.

The resulting operation at Roosevelt will be one of the largest in the city, serving an estimated 1,600 AIDS patients. The hospital has a new 65-bed ward with more than twenty full-time specialists, including one of the most sought-after HIV gastrointestinal docs in the world. But it will take some work to make Roosevelt one of the most liked AIDS programs. It's not helped by having the worst-scoring hospital food in town. That's because, during Roosevelt's renovation, it was decided that the hospital could be served by the kitchen at St. Luke's, 55 blocks north. Food regularly arrives cold, late, and flavorless.

This may sound trivial, but eating sufficiently is a serious challenge for people with HIV, who struggle with appetite loss, wasting, nausea, and malabsorption. The problem grew more critical with the arrival of the new protease-inhibitor drugs, which must be taken on demanding schedules all linked to food. Interrupting a pill regimen for just a few hours can cause viral mutations and drug resistance. ("We're working on the problem," says a spokesman.)

NYU's Tisch Hospital combines some of the biggest names in AIDS research—among them Dr. Fred Valentine, a world

leader on AIDS-vaccine studies—with unquestionably solid care, even though the facility has never set aside a discrete AIDS unit. Patients give glowing notices to everything (including the food) except the two-year-old E.R., which earns a B (average wait for non-acute patients is 105 minutes). The 52 full-time specialists on staff enthusiastically encourage patients to enroll in any of the 30-plus trials involving new treatments, drugs, and procedures.

But for all its research prowess, NYU is not an ivory tower. Doctors have extensive clinical practice from treating patients at the nearby V.A. Medical Center and at Bellevue, the ranking public AIDS facility, with 36 specialty physicians giving unsurpassed clinical care. Bellevue serves more homeless people with HIV than anywhere, and has the contract to treat city prisoners. So if you're dogged enough to be admitted (E.R. wait: two and a half hours), your neighbor may be shackled to his gurney. "It's very mixed—what's amazing is the camaraderie" among patients, says Dr. Dava Klirfeld, the medical director for AIDS. Nevertheless, she reassures: "There is major footage between the beds."

For kids, Bellevue also scores high marks—youngsters with HIV are generally born to poor families, the kind Bellevue regularly treats. Other good pediatrics programs are at Harlem Hospital, Columbia-Presbyterian's Women & Children Care Center, and at Bronx-Lebanon, which treats 250 kids and their relatives (positive and negative) at a new clinic.

For adolescents, there is no better care than at Montefiore in the Bronx, home to one of the nation's top adolescent-AIDS specialists, Dr. Donna Futterman. Those same hospitals have treated more women with HIV than the gleaming teaching hospitals, which largely have focused on the disease in men.

Lastly there's Saint Vincents, which, despite its Catholic ties, runs the gayest AIDS ward in New York. It's also one of the oldest and most highly regarded, although it lacks the big-name researchers. The E.R. is unobjectionable (management doesn't reveal waiting times), the ambience is gentle, and the nursing staff is adored.

It is the nurses, in fact, who generate such loyalty to Saint Vincents. At the start of every shift, they march to the edge of each bed, single file. "They introduce themselves, and then they giggle," attests Mark Niedzolkowski, the director of operations for the People With AIDS Health Group and himself a recent guest. "It is very touching. If you said to me, Mark, you're going to die in three weeks, pick one—I would go there."

AIDS awareness

THE DANGER OF "KNOCKIN' BOOTS"

Adolescent HIV infection soars in Latino Community

It's happening everywhere — The Bronx, Los Sures, El West Side, El Barrio and Loisaida. Latino adolescents and young adults are engaging in behaviors that threaten their lives and our future generations.

It's called "makin' it," "knockin' boots" or "hitin' the skins." No matter what parents may think, every indicator shows that many of our adolescents are having frequent and unprotected sex, as early as age 10 and younger. Our children are getting sexually transmitted diseases (STDs), like HIV [Human immunodeficiency virus] and AIDS [Acquired Immune Deficiency Syndrome]. *"Ya no podemos tapar el cielo con la mano"*.

Parents must make a move to save their children. Many Latinos who work with youth believe that explicit and frank education about STD's and discussions about sexuality are critical. "We must be more than a parent. We must be our child's best friend. We must talk, live and practice prevention," says Dr. Nereida Ferran, a physician at the Samuels Comprehensive Care Center at Roosevelt Hospital.

AIDS is fast becoming an epidemic of the young who need early and confidential testing and counseling for both prevention and treatment. Over 20% of reported cases of AIDS, in 1997, occurred in young adults between ages 20 and 29. Many contracted HIV infection as adolescents. It is estimated that every hour two youths become HIV infected. Yet,

according to a MTV and Yale University study 87% of young people do not feel they are vulnerable to getting HIV.

According to Dr. Donna Futterman, director of the Adolescent AIDS Program at Montefiore, many young people diagnosed with AIDS had no idea that their [sexual] partner was infected. To alert city teens about the dangers of HIV transmission, a media campaign was created for and with adolescents that uses the kids' street talk to promote prevention and offer free and confidential HIV counseling and testing.

Adolescent theatre workshops are a creative approach in educating young people. In compelling productions, the **STAR Theatre at the Mount Sinai Adolescent Health Center**, portrays the lives of young people as they confront the difficulties of growing up in the age of AIDS.

At community based programs such as **Alianza Dominicana** in Washington Heights, **Just Us** in El Barrio, **El Puente** in Williamsburg, and **United Bronx Parents**, counselors educate young people about the dangers of HIV infection. But, programs like these, need more money to get more youth and peer educators to meet the enormous challenge.

Kids will have relationships and they will make decisions. They need information about their options and help to understand the consequences. Parents must act now! For help see Parent Resource List (Page 36).

Youth and HIV... A Frightening Scenario

Research from the Society for Adolescent Medicine, the Center for AIDS Prevention Studies, University of California San Francisco, Albert Einstein College of Medicine Division of Adolescent Medicine at Montefiore Medical Center, and, the Centers for Disease Control [CDC].

Who's infected?

- One fourth of all new HIV infections in the US occur in young people under the age of 22.
- Since 1988, annual number of women aged 20-29 years, with heterosexually acquired AIDS has increased by 96.7%.
- Latinos and African Americans, 13 to 24 years, are only 27% of the US population, but represent 61% of reported AIDS cases in this age group.

How are the young infected?

- About 50% of adolescents aged 13 to 19, and 90% of young adults aged 20 to 24 with AIDS, got infected through unprotected sex or IV drugs.

What fuels the spread of HIV/AIDS among Latinos?

- Limited access to health care. One out of seven kids live in poverty. One in three lack medical coverage.
- About 70% of high school seniors have had sex and one out of four report having four or more partners.
- Many adolescents are introduced to alcohol and drugs by known adults or family members.
- Traditional interpretations of gender roles prevent safe sex practices for many Latinos, especially women.
- Latinos (67%) don't use condoms with their partner or talk about sex, usually allowing men to determine how much and what type of sex.

From A(bstinence) to C(Condoms) Facing the Facts.

Latino youth workers and young people, are coming together to effect change, speak the truth and do what works. Many have no access to all the facts and are ignorant of HIV and how it is transmitted. Some who know the facts are unable to change their behavior by themselves. Abstinence is an important option but, this option will not work for everyone. Condom distribution, although controversial, has saved many young lives.

Saving lives means supporting the spectrum of options to prevent infection. Stopping HIV among Latino youth, requires individual and collective action by Latinos and their institutions. The home, the church, the schools, and community groups, must all be places for open and frank talk about HIV, sexuality, relationships, drugs and prevention options. Let's use every weapon in the arsenal to defend our kids.



YOUTH LEADERSHIP GROUP FROM THE STAR THEATRE AT THE MOUNT SINAI ADOLESCENT HEALTH CENTER.
JOVENES LIDERES DEL "TEATRO ESTRELLA" DEL CENTRO DE SALUD MOUNT SINAI.

Q&A

Preguntas y Respuestas

What is HIV/AIDS?

HIV is a virus that invades and destroys cells of the immune system (immunodeficiency), and makes the body less able to fight infection and stop abnormal cells (such as cancer) from multiplying. It affects special blood cells (lymphocytes) and organ cells (bone marrow, spleen, liver and lymph glands) in the immune system which make antibodies to protect you against disease and cancer. AIDS is HIV infection at its end-stage.

How do you get Infected?

- Having sexual intercourse (hetero or homosexual) with an infected person;
- Perinatally from an infected woman to her baby.
- Using contaminated needles for any injections or other skin-piercing including acupuncture, shooting IV drugs (major source for Latino males), medical/dental procedures, ear or body piercing, or tattooing.
- HIV is not transmitted through casual contact; air, food, or water routes; contact with inanimate objects; or through mosquitoes.

How do you know you have HIV?

- By getting TESTED!
- At first, you may have no symptoms.
- Fatigue and weight loss.
- Night sweats; fever; diarrhea.
- Respiratory and skin infections.
- Swollen lymph glands throughout the body.
- Genital changes; enlarged spleen.
- Mouth sores.

¿Que es VIH/SIDA?

El VIH es un virus que invade tu sistema y destruye las células del sistema inmunológico, por lo tanto, haciendo que tu cuerpo pueda combatir infecciones y pueda parar la reproducción de las células anormales, tales como las cancerosas. El virus afecta unas células especiales llamadas, las células linfocitos y células de órganos (de la médula ósea, bazo, hígado y las glándulas linfáticas) del sistema inmunológico que producen anti-cuerpos para protegerte en contra de enfermedades y el cáncer. El SIDA es la última etapa de la enfermedad de VIH.

¿Como Te Infectas?

- Con relaciones sexuales (hetero o homo sexuales) con una persona infectada;
- En estado de embarazo; de una madre infectada al feto.
- Usando agujas sucias y contaminadas para cualquier clase de inyección que perforan la piel y para cualquier uso, ya sea: inyectarse drogas, (razón principal de la infección entre los hombres Latinos), perforación de orejas, acupuntura, procedimientos medicos y dentales, o hacerse tatuajes.
- El VIH no se transmite a través de contacto casual; aire, comida, vías de agua potable o naturales, contacto con objetos inmutables, o por mosquitos.

¿Como Sabes Que Tienes el Virus VIH?

- Haciéndote la Prueba!
- Al principio, talvez no tengas síntomas.
- Fatiga y pérdida de peso.
- Escalofríos, fiebre y diarrea.
- Infecciones en las vías respiratorias y en la piel.
- Inflamación de las glándulas linfáticas a través del cuerpo.
- Cambios en los genitales, el bazo (el bilis) inchado.
- Llagas en la boca o en los genitales.

EL PELIGRO DE "KNOCKIN' BOOTS"

Epidemia Aumenta entre los jóvenes Latinos

Está ocurriendo en todas partes... en El Bronx, Los Sures, El West Side, El Barrio y en Loisaida. Jóvenes y adolescentes latinos están teniendo relaciones y comportamientos que atentan contra sus vidas y el futuro de nuevas generaciones. A estas actividades se les llaman "makin' it", "knockin' boots" or "hittin' the skins" o sea...expresiones sobre tener sexo. Aunque los padres no lo quieran admitir, todos los estudios indican que nuestros jóvenes adolescentes están teniendo relaciones sexuales con frecuencia y sin protección y, en algunos casos, éstos, comienzan su actividad sexual desde o antes de los 10 años. Nuestros niños se están infectando con distintas enfermedades de transmisión sexual (STD'S), incluyendo el VIH, el virus que causa el SIDA.

Ya no podemos tapar el cielo con la mano. Los padres tienen que tomar cartas en el asunto. Los encargados de salud pública y muchos educadores, coinciden en señalar que los padres deben de tener conversaciones abiertas con sus hijos, sobre enfermedades de

contagio sexual y sexualidad humana. De acuerdo a la Dra. Nereida Ferran, de El Centro Completo de Cuidado del Hospital Roosevelt, "los padres debemos ser el mejor amigo de nuestros hijos. Tenemos que hablar, vivir y practicar prevención."

Se estima que cada una hora dos jóvenes menores de 21 años son infectados con el VIH. Más del 20 por ciento de los casos de SIDA reportados en el 1997, corresponden a jóvenes de veinte (20) a veintinueve (29) años. En su gran mayoría estos jóvenes contrajeron el VIH durante su adolescencia.

Según la directora del Programa de adolescentes con SIDA del Hospital Montefiore, la Dra. Donna Futterman, la gran mayoría de los jóvenes a los que se le diagnosticó SIDA desconocían que sus parejas sexuales estuvieran infectadas. Para alertar a los "teenagers" sobre los peligros y la transmisión del VIH, se creó una campaña publicitaria dirigida por y para los jóvenes utilizando el lenguaje único de los adolescentes en un esfuerzo por fomentar la prevención

y motivar a que se hagan la prueba para detectar el VIH.

Los talleres de teatro de adolescentes también son una manera más de llevar un mensaje de prevención a los jóvenes. El Teatro Star, del Centro Adolescentes de Salud del Hospital Mount Sinai, realiza obras teatrales educativas, que presentan situaciones reales que confrontan los jóvenes de la época del SIDA.

Algunos de los programas comunitarios como Alianza Dominicana en Washington Heights, y el Puente en Williamsburg, "Just Us" en El Barrio, ofrecen programas para los jóvenes sobre los peligros del SIDA. Sin embargo, estos programas necesitan más fondos para tener más jóvenes educadores que lleven en mensaje de prevención a la comunidad.

Nuestros adolescentes tendrán relaciones y tomarán decisiones. Por lo cual, ellos necesitan estar bien orientados sobre cuáles son todas sus opciones, y para entender las consecuencias de sus acciones. Para más ayuda véa la sección de recursos para padres.

De A(bstinencia) a C(ondones) El Dilema de Los Padres a luz de la realidad de HIV

Educadores y jóvenes latinos, se están uniendo para crear cambios, hablar la verdad, y hacer lo que sea efectivo en la lucha contra el SIDA. Es lamentable reconocer que existen adolescentes ignorantes a la causa del VIH y de su modo de transmisión, y contagio. Esto se debe a dos causas fundamentales: falta de información y el poco acceso a la misma. No obstante, hay jóvenes que conocen los peligros de esta enfermedad, pero no se les hace fácil cambiar sus patrones de comportamiento, sin ayuda. La abstinencia es la primera opción, y muchas organizaciones trabajan con jóvenes que optan por no tener relaciones sexuales. Pero esto no resulta para todos los jóvenes. El uso de condones, aunque sea controversial, ha salvado muchas vidas. El propósito de salvar vidas jóvenes se realiza en utilizar la gama de opciones para prevenir el HIV.

Detener esta epidemia en nuestro jóvenes requiere el esfuerzo de todo Latino, uniendo en acción colectiva, a la comunidad y a sus instituciones. El hogar, la iglesia, la escuela, y todas las organizaciones comunitarias deben convertirse en lugares de intercambio franco y directo de todo lo relacionado al VIH, la sexualidad, las drogas y las opciones preventivas. Utilicemos toda herramienta, toda arma en nuestro arsenal para proteger a nuestros niños — antes de que sea muy tarde.

45. Although African-Americans make up just over 13% of the U.S. population, they account for 41% of AIDS cases nationally — and that figure is expected to climb to 50% by the year 2000.

This bellwether change is due in part to the shift in the types of people now getting the disease.

Health professionals note that more and more women — most of them women of color — are being infected through heterosexual contact.

"AIDS is going to kill more African-Americans and Caribbean people than any other disease or any war or any natural disaster at any time in the history of this country," says AIDS advocate Mario Cooper.

Though the news is grim, there are also encouraging signs. Medicine and other drug therapies, including the vaunted protease inhibitors and other potent combinations, are more readily available and are helping HIV and AIDS sufferers live longer.

Social workers note a shift that may prove just as significant: More people are talking about AIDS, including the black church, long silent as pastors wrestled with the morality of addressing a sexual disease in a spiritual setting.

"The epidemic has taken from us too many of our friends and loved ones, but has brought forth remarkable courage and determination," says Nicole Brown, director of the AGAPE program with the Arthur Ashe Institute for Urban Health.

"The courage comes from all of those people living with the disease who are willing to identify themselves and be used as an example to educate people. The determination is to not see this happen to another person."

Danielle Benoit-Coutard has seen the changing face of AIDS, and it scares her.

Most of the people coming to see her at the Treatment for Life Center at Brookdale Hospital in Brooklyn are low to middle-income black men and women, most of them heterosexual, many of them HIV-positive or suffering from full-blown AIDS. And their numbers are growing.

"About a year ago, we were seeing 400 people," said Benoit-Coutard, a case manager at the Center. "Now we see about 600 people. We get a lot of people who are hospitalized and do not even know they have it."

To ask social workers about AIDS is to hear stories all the more painful because all of them are drawn from real life. The stories of women such as Rodriguez — whose health was snatched away by a spouse who was unfaithful, did IV drugs or is bisexual — are all too common.

There are also women in their sixties and older who succumb to AIDS: people who test three and four times in hopes of a better result; kids now in their teens raised by grandparents or in foster homes after their parents died, who simply think they are sickly rather than HIV-positive because relatives never told them how their parents died.

Although HIV/AIDS is not grounds for deportation, infected people can be denied entry into the U.S., explains Allan Wernick, a New York attorney specializing in immigration issues. U.S. Immigration and Naturalization Service technically could deny reentry to any immigrant with the disease who left the country for more than six months, he adds, though he was unaware of anyone being so denied.

But an undocumented resident hoping to qualify for permanent residence or a green card could be denied entry should he/she be determined to be an AIDS sufferer and a potential public charge, he says.

Many of Benoit-Coutard's charges are of Caribbean descent, because Brookdale, in the Flatbush section of Brooklyn, is in one of the largest Caribbean communities in New York State.

According to the New York State Department of Health AIDS Institute, about 37% of AIDS cases in the state among blacks from English-speaking Caribbean



ROSALYN JACKSON (r.) gets a hug from Bennie Totten at the Antioch Church of God in Eden, North Carolina last November after speaking on World AIDS Day. Jackson and her 4-year-old son are HIV-positive.

islands — Jamaica, Trinidad & Tobago, Guyana, Barbados, St. Vincent, Belize, Grenada, Bahamas, Dominica, Antigua & Barbuda, St. Lucia, Bermuda, British Virgin Islands and Montserrat — can be found in 11 Brooklyn zip codes.

The proliferation of HIV infection has been stanching among gay men, where the level has remained constant over the last two years — but HIV is booming among minorities, especially women and children.

According to the CDC, 56% of women with the disease are African-American, as are a startling 58% of pediatric AIDS cases.

Lorna Fairweather, director of Social Services for the Caribbean Women's Health Association, has seen HIV sufferers who range from newborns to grandmothers in their seventies.

Foreign-born HIV and AIDS sufferers face formidable obstacles in finding and obtaining treatment — and chief among them is fear.

Though many do not face a language barrier, there is an unfamiliarity with how the medical system works and how to get care and services.

But for many, the greatest fear is of being publicly identified as having the disease and having to live with the stigma that goes with it.

"The Caribbean community in New York is very small," says Fairweather. "People are terrified that other people will find out."

And for many there is the fear and wrongful shame of not only being sick, but being sick with AIDS, like the woman who panicked when she saw a familiar face from her Caribbean home at the clinic where Fairweather works. And Rodriguez remembers that even her family treated her differently for some time after she was diagnosed.

"This is a shame-based disease, based on misinformation on how you get it," says Sandra McDonald, founder of Outreach Atlanta, a 12-year-old AIDS outreach group. "We are embarrassed to talk about it."

Communication is one of the reasons gay men have been able to battle the disease at least to a draw while the rates among blacks continues to grow.

Across the board, AIDS advocates and social workers alike say early identification of AIDS as a "gay" disease pushed it into the second tier of concerns for heterosexual blacks.

Gay white men were able to organize and challenge government officials to help them battle the disease, while in the black community, "we do not acknowledge or accept that we have men who have sex with men," says Duane T. Prie, executive director of the San Francisco Black Coalition on AIDS Inc. "We have not accepted that we have brothers who are engaging in unprotected sex. We

See Risk Page 7

TEACHING BRONX TEENS PREVENTION

Administrators at Montefiore Medical Center's Adolescent AIDS Program know the importance of providing prevention options and HIV services for young people in its Bronx service area.

But the help doesn't stop at the borders of the Bronx. Through Montefiore's center and its referral sites in Brooklyn, Manhattan, Queens and Staten Island, HIV services are readily available to New Yorkers aged 13 to 21.

The program has something for everyone — and it's free. There is con-

fidential HIV testing and counseling, referrals to care for youths who are HIV-positive, and prevention information for young people who are negative.

The referral sites are at: Kings County Medical Center in Brooklyn; Mount Sinai Hospital in Manhattan; Bellevue Hospital Center in Manhattan; St. Luke's Roosevelt Hospital in Manhattan; Elmhurst Hospital in Queens; and Staten Island University Hospital in Staten Island.

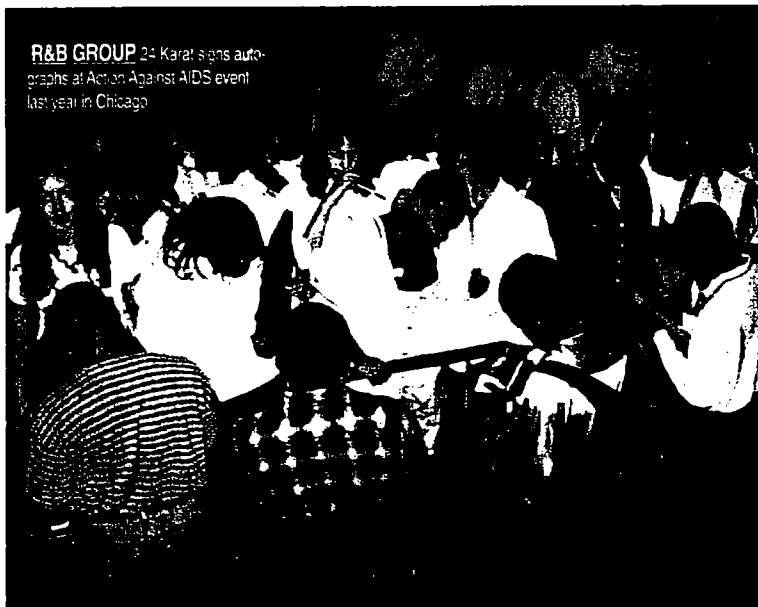
For information, call (718) 881-TEST (8378).

Youth Initiatives

ACTION AGAINST AIDS

Local group goes national

R&B GROUP 24 Karat signs autographs at Action Against AIDS event last year in Chicago.



By Jared McCallister

Through the spread of information, Action Against AIDS is battling HIV/AIDS among teens. Started in New York three years ago, the group has grown to national dimensions. Since 1996, more than 20,000 teens in New York and Chicago have received AIDS education through Action Against AIDS programs.

The organization enlists actors, professional athletes, business leaders, radio personalities and recording artists to address issues important to teens — AIDS and other health concerns, career goals, self-esteem and abstinence from drugs and violence, says organization founder and presi-

dent Manbel Cruz.

This year, the group plans AIDS awareness programs in several cities. The programs will center on two-hour "edutainment" assemblies.

As many as 40,000 young people are expected to get the AIDS prevention message in Atlanta (July), New York (August), Chicago (September), and Los Angeles (October) through the group's 1998 All-Star Edutainment-AIDS Awareness program.

For information on Action Against AIDS, call (212) 722-7987.

HANDS FOR AMERICA

In an effort to reach out to young minority and immigrant youths, Hands for America continues its mission to educate and inform them about AIDS/HIV prevention techniques that could save their lives.

The 10-year-old organization publishes brochures, conducts peer counseling sessions and develops educational programs to help young people make healthy choices.

The organization's activities include workshops, enlisting business involvement to distribute educational material, working with school clubs and church youth groups, and training teens to become peer AIDS/HIV counselors.

For information, call (212) 583-9390.

— Karen Nelson

PUBLISHED HELP FOR PARENTS

The Kaiser Family Foundation publishes two free booklets that can help parents talk to their children about weighty subjects such as sex, AIDS or drug abuse.

"Talking With Kids About Tough Issues" is published in conjunction with a joint initiative — by the Kaiser foundation, the Children Now organization and the Advertising Council — to promote parent-child discussions on tough topics.

"Talking to Kids About AIDS" is a guide for explaining the disease to children between 8 and 12 years of age.

"Talking With Kids About Tough Issues" is available by calling (800) CHILD-44. "Talking to Kids About AIDS" can be ordered by calling (800) 656-4KFF and asking for publication #1380.

— J.M.



USING PEER POWER

Administrators at Montefiore Medical Center's Adolescent AIDS Program know the importance of providing prevention options and HIV services for young people in its Bronx service area.

But the help doesn't stop at the borders of the Bronx. Through Montefiore's center and its referral sites in Brooklyn, Manhattan, Queens and Staten Island, HIV services are readily available to New Yorkers aged 13 to 21.

The program has something for everyone — and it's free. There is confidential HIV testing and

counseling, referrals to care for youths who are HIV-positive, and prevention information for young people who are negative.

The referral sites are at Kings County Medical Center in Brooklyn; Mount Sinai Hospital in Manhattan; Bellevue Hospital Center in Manhattan; St. Luke's Roosevelt Hospital in Manhattan; Elmhurst Hospital in Queens; and Staten Island University Hospital in Staten Island.

For information, call (718) 881-TEST (8378).

— J.M.

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Let's Talk About HIV: The Real Deal

A DISCUSSION
FOR
young people

HOSTED BY HOT 97'S LISA EVERS
CO-HOSTED BY DJ FAT MAN SCOOP

APOLLO THEATRE

MONDAY, OCTOBER 25, 1999
5-8PM

**HIV. LIVE WITH IT.
GET TESTED!**

Sponsored by the Adolescent AIDS Program, Montefiore Medical Center

GO TESTING BOLESTY

If you are, you need to be tested for HIV.

**Every hour one person under the age of 21 gets infected--
and they often have no idea.**

**So if you're between the ages of 13 and 21, call to find out about testing that's free and
totally confidential.**

Oral testing is available--it's accurate and no needles are used.

**Testing takes place year round in offices near you where you'll feel comfortable.
They're clean, safe and professional.**

Find out how you can prevent and treat HIV and AIDS.

**HIV. Live with it. Get tested.
Call citywide 718-881-TEST**

Sponsored by the Adolescent REP Program at Montefiore Medical Center
and a citywide coalition of adolescent health programs

**HIV. LIVE WITH IT.
GET TESTED!**

A National Youth Social Marketing Campaign

D. 718-882-

0322
declined

September 29, 2000

Sandra L. Thurman
Director, Office of National AIDS Policy
The White House

Dear Ms. Thurman,

Congratulations on the completion of the White House Report Youth and HIV/AIDS 2000: A New American Agenda. I have read the executive summary of the report and am inspired by your call for initiatives to address this continued and growing crisis among youth.

Thank you for your invitation to the event in Atlanta announcing its release. I am sorry, but due to clinical obligations I will be unable to go to Atlanta that day, although I wish I could be there and appreciate the invitation. If there is anything I can do, please ask.

As you know, we are hard at work to address many of the issues you raised through our clinical work and research agenda. One project that is underway is the effort to engage into care the thousands of HIV+ youth who are infected but don't yet know it. With funding from the Congressional Black Caucus via the NIH and HRSA, Project ACCESS, our social marketing campaign that promotes testing to youth, is in full gear this fall in five cities: New York, Baltimore, Los Angeles, Miami and Washington DC culminating in a Get Tested Week, December 1-9, 2000. Through this campaign we seek to directly reach youth as well as health care providers to encourage them to routinely offer HIV testing to youth in much the same way as this is a routine practice in prenatal care.

As you know, we are launching the campaign this year with Gettin' Busy: Youth and HIV, a major conference and call to action for providers and youth in New York City. **We would like to invite you to speak at this conference on October 24, 2000.** We believe this would be a great opportunity for you to promote the report to an audience of at least 500 health care professionals and youth who are mobilizing to address the problems of youth and HIV. We will call your office next week. Congratulations once again and thanks for your attention to this issue.

Sincerely,



Donna Futterman, MD
Chair, Project ACCESS
Director, Adolescent AIDS Program
Montefiore Medical Center

Best wishes!