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October Chron Files 1993 [2]

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OCT 25 1993

October 5, 1993

Colonel Donald Burke, M.D.
Director, Division of Retrovirology
Walter Reed Army Institute of Research
Suite 301
13 Taft Court
Rockville, MD 20850

Dear Colonel Burke:

I am writing in follow-up to your presentation at the September 15 meeting of the CSIS Working Group on Global HIV/AIDS regarding planned HIV vaccine studies in Thailand. There is an antifilarial drug (diethylcarbamazine or DEC) which I believe is still used in Thailand and could prove to be a confounding variable in interpreting your study results.

Although there is little doubt that ivermectin is superior to DEC for the treatment of onchocerciasis, my investigations over the past several years have revealed DEC to be a potentially useful antiretroviral, antibacterial, antimycobacterial, and antifungal agent (see attached list of publications). The results of a Phase I study describing the effect of DEC given to HIV patients residing in Guatemala City have just been accepted for publication in an international journal. Also relevant is the enclosed copy of a confidential letter I recently received from Dr. Sandra Bridges (of the Developmental Therapeutics Branch, Division of AIDS, National Institute of Allergy and Infectious Diseases) informing me that data from an NIH-commissioned independent team indicating a survival benefit attributed to DEC treatment of retroviral infection has recently been submitted for publication.

Although perhaps complicating your vaccine investigations (by altering virus levels, antibody levels, lymphocyte counts, morbidity, and survival in both vaccinated and unvaccinated HIV-exposed persons), this confluence of events may represent an opportunity (using "natural experiment" conditions) to determine whether administration of DEC can reduce the frequency of HIV and HIV-related infections. Because DEC is an orally bioavailable drug that concentrates in brain, lung, and lymph node tissue and can be given safely during pregnancy (to non-O. volvulus-infected persons), the question of DEC's efficacy as a preventive/treatment for HIV infection and related diseases may rival the importance of the question of HIV vaccine efficacy.

If you are interested, I could talk to you about this matter further at the CSIS Working Group's October 13 meeting or some other mutually workable time. I am currently devoting a year to

obtaining an M.P.H. degree at George Washington University and a Diploma in Tropical Medicine at the London School of Hygiene and Tropical Medicine, and therefore have listed my Washington, D.C. number below.

Sincerely yours,

L. W. Kitchen, M.D.

Lynn W. Kitchen, M.D.

Mailing address:

CSIS

1800 K Street N.W.

Washington, D.C. 20006

Telephone: (202) 966-1293 (residence)
(202) 775-3219 (CSIS)

Fax: (202) 775-3199

bcc: ✓

The First National Conference on Human Retroviruses and Related Infections

Official Abstract Form

Your abstract will be processed by an optical scanner. Therefore, please start every entry at the beginning of each box and use clear dark type. Instructions: Complete this form and submit it for receipt by August 2, 1993. *Only this original form is acceptable (no photocopies).* Additional forms are available from the ASM Meetings Department. Refer to p. 2 for further instructions. Type the title (initial capitals only) first; then list all authors (all capital letters), with an asterisk for the person delivering the paper; and then list institutions and short addresses (do not give departments, divisions, buildings, etc.). See page 2 for additional required enclosures. A **FONT NO SMALLER THAN 10 POINT IS ACCEPTABLE.**

Category **H 1 0**

Subject category: From the list of subjects on pp. 3, choose the most appropriate description of the paper's content and enter the letters or numbers in the boxes above. In the first box, write a capital letter (i.e. A, B, etc.); in the second box, place an arabic number; in the third box, write a lower case letter (if applicable); and in the fourth box if needed, place a roman numeral (i.e. i, ii, etc.).

Example:

A 1 a i for Virology, HIV-I, Regulation TAT.

1. Complete checklist on back page before submitting abstract.

Abstracts submitted via facsimile will not be accepted by the Program Committee.

2. Mail abstract to:

First National Conference on Human Retroviruses and Related Infections
American Society for Microbiology
1325 Massachusetts Ave., NW
Washington, DC 20005-4171

3. Full name and institutional mailing address of the author who will present the paper (must be typed). This is the address to which your abstract notification will be sent. **Please start each entry at the beginning of each box.**

Diethylcarbamazine Enhances Microbicidal Activity of Bacteria and Fungal-inoculated Blood Samples from Healthy and Immunocompromised Donors. L.W. KITCHEN,* J.A. ROSS, G.J. TURNER, J.E. HERNANDEZ. Marshall University School of Medicine & VAMC Huntington, WV, U.S.A.

Feline and murine leukemia virus model results (J Clin Lab Immunol 25:101-3; 27:179-81, 1988; 33:97-105, 1990) encouraged further investigation of diethylcarbamazine (N,N-diethyl-4-methyl-1-piperazine carboxamide [DEC]) as treatment for human retroviral and related infections. Bacterial and fungal mouse model experiments (Int J Antimicrob Agents 1:259-267, 1992; 2:237-246, 1993) revealed DEC-associated in vivo antibacterial and antifungal (additive with fluconazole) effects. The present experiment indicates that the addition of DEC in clinically achievable concentrations to blood samples inoculated with various microorganisms (bacterial, mycobacterial, fungal) frequently results in statistically significant reductions in colony counts after overnight incubation compared to results using unmedicated control blood samples.

Lynn

W.

Kitchen

M.D.

CSIS, suite 400

(202)775-3219

1800 K. Street, N.W.

(202)775-3199

Washington

D.C. 20006

U.S.A.

Diethylcarbamazine Enhances Microbicidal Activity of Bacteria and Fungal-

immunotherapy

HIV-related infections

HIV treatment

The First National Conference on Human Retroviruses and Related Infections

cosponsored by the National Foundation for Infectious Diseases and the American Society for Microbiology
in collaboration with NIH and CDC

December 12-16, 1993, Washington, D.C.

ABSTRACT DISPOSITION NOTIFICATION 1ST NATIONAL CONFERENCE ON HUMAN RETROVIRUSES AND RELATED INFECTIONS

December 12-16, 1993

Washington, DC

Scientific Program Committee

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Chair,
University of Colorado
Health Sciences, Denver

Warner C. Greene, M.D.

Co-Chair,
University of California,
San Francisco

Donald Armstrong, M.D.

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Beth Israel Hospital, Boston, MA

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Project Inform, San Francisco, CA

George L. Drusano, M.D.

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Julie L. Gerberding, M.D.

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San Francisco, CA

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National Institutes of Health,
Bethesda, MD

Gail Cassell, Ph.D.

(ex officio), President of the
American Society for Microbiology,
University of Alabama at
Birmingham, Birmingham

Richard J. Duma, M.D., Ph.D.

(ex officio), Executive Director,
National Foundation for
Infectious Diseases, Bethesda, MD

To:

LYNN W. KITCHEN
CSIS SUITE 400
1800 K STREET, NW
WASHINGTON, DC 20006

Fax#:

202-775-3199

Abstract#:

718

On behalf of the Scientific Program Committee, we are pleased to inform you that your abstract has been accepted for presentation at the 1st National Conference on Human Retroviruses and Related Infections. Your paper disposition is as follows:

Paper Number:	491
Type of Session:	POSTER
Session Number:	66
Day:	TUES
Time:	4:00 PM

Enclosed is a copy of the Preliminary Program and Registration Information for the conference. Please complete the enclosed preregistration form and return it to ASM. **The early preregistration deadline has been extended to October 25, 1993 for paper presenters.** Your form must be postmarked by the 25th in order to qualify for the early preregistration discount. If you miss the October 25 deadline, you may still preregister at a higher rate until November 8, 1993.

You will receive "Slide and Poster Instructions" from ASM in the next two weeks, which will assist you in the preparation of your presentation materials.

If you are unable to attend the conference and present your paper, please contact Beth Altier, ASM Program Coordinator at (202) 942-9249.

American Society for Microbiology

Meetings Department

Attn: Melissa Sordyl

1325 Massachusetts Ave., NW
Washington, DC 20005-4171

202/737-3600

Fax 202/942-9340

Meetings Direct Line

202/942-9248

THE WHITE HOUSE
WASHINGTON

October 5, 1993

MEMORANDUM FOR CAROL RASCO

FROM: Kristine M. Gebbie

SUBJECT: Presidential Scheduling, MA TV 33's "Let's Talk About AIDS"

I recommend that the President not accept the invitation to participate in events sponsored by this Boston area cable channel. The program is described as "shaky," serves a very small viewing area, and has no date on its actual outreach.

If you want more details, let me know.

To Carol Rasco
Re: Pres. Scheduling MATV33
Let's Talk about AOS

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If you want more details, let me know

THE WHITE HOUSE
WASHINGTON

October 4, 1993

MEMORANDUM FOR KRISTINE GEBBIE

FROM: Warren W. Buckingham III 
SUBJECT: Request from Carol Rasco for Memorandum re: Presidential
Scheduling and Haverhill, MA TV 33's "Let's Talk About AIDS"

I placed a couple of phone calls to Boston-area contacts, and the recommendation from them was to pass on this one. Larry Kessler of AIDS Action Committee confirmed that he had met with them to accept a plaque (in re: his service on the National Commission on AIDS), but had never succeeded in getting them to produce any follow-up materials.

He acknowledged that he was in receipt of a copy of the material sent to Dawn Friedkin in Presidential Scheduling. He described the people/program as "shaky," and offered his opinion that there must surely be more substantive invitations related to AIDS for the President to consider.

Comments from Larry and others confirmed my own instincts upon reading the materials through twice. My recommendation to you is that the President not accept the invitation.

THE WHITE HOUSE
WASHINGTON

Buck/Carlos —

This looks like a
good possibility but
I'd like your input.
Note that Carol wants
my memo back by Oct 6
so I need your comments
by the 5th. Thanks —

SEP 30 1993

THE WHITE HOUSE

WASHINGTON

September 30, 1993

MEMORANDUM FOR KRISTINE GEBBIE

FROM: Rosalyn Miller

SUBJECT: TV 33's "Let's talk about AIDS"

Carol asked that you review the attached and let her know by OCTOBER 6 via memorandum if Presidential Scheduling should consider doing this.

Thanks.

WHAT'S UP . . .

James G. Mamonas
55 Hancock Street
Haverhill, Massachusetts 01832

September 20, 1993

Office of Presidential Scheduling
The White House
Washington, D.C. 20500
C/O Ms. Dawn Friedkin, Assistant
to Ms. Marcia Hale

Dear Ms. Dawn Friedkin :

It is with great pride that an introduction be made for "T.V. 33's" youth inspired program named **"WHAT'S UP. . . ."** and its special show entitled **"Let's Talk About AIDS,"** with its empowering companion **"The War On AIDS Petition Drive."**

"WHAT'S UP'S . . ." major goal is to promote the "good things" young people do to unite the family, school and community together. Ms. Tiffany S. Middleton is the host that promotes and perpetuates this unifying community message. "T.V. 33" is a public access cable television station. Mr. Randy M. Buccini is the Executive Director and Mr. Ed Felker is the Program Director. "Community Service" is the chief goal of "T.V. 33," which is located in Haverhill, Ma.

Please find enclosed two public awareness community-minded humanitarian and educational vehicles entitled respectively:

1. **"LET'S TALK ABOUT AIDS" (T.V. SHOW)**
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These two public awareness vehicles will hopefully help bring the needed support and funding so that President Clinton can fulfil his campaign promise to, **"GET THIS KILLER" i.e. "AIDS."** (please see enclosed news article dated October 30, 1992)

The President's new proposed **"National Service Program"** can be greatly supported by **"The War On AIDS Petition Drive(s)"** The **"National Service Program"** (if passed) would "allow college students to begin swapping public service for tuition money." We believe that our educational awareness plan can be incorporated into public and private education also. The first petition

drive(s) were completed in both public and private schools and at AT&T, a business in North Andover Ma.

We respectfully request that you view and analyze the proven value(s) of this humanitarian project. The impact that has already been made is overwhelming. In addition, that a DIRECT PRESENTATION (date, time, and place) be formally arranged so that the first petitions of this year be directly presented to President Clinton. Also, consideration could be made for the presence of both "The First Lady of the United States" and their daughter, Chelsea. Many youths involved believe that since entire families became involved in this Pilot Project, which it would be as President Clinton states, "The Right Thing To Do" to extend this invitation to both of them.

"THE WAR ON AIDS PETITION" states that, "the petitions will be presented directly to President Clinton on/or before National Aids Awareness Day, 1993." Since this is the "Pilot Program Year" of this annual petition drive, consideration could also be made for the presentation during the vacation time of the "December Holiday Season of Hope."

BACKGROUND ON: "LET'S TALK ABOUT AIDS"

AND

"THE WAR ON AIDS PETITION DRIVE(S)"

"LET'S TALK ABOUT AIDS"

This show was filmed on April 3, 1993, at the public access studio of "T.V. 33" in Haverhill, Massachusetts. Co-hosts are teen host of "WHAT'S UP . . ." Ms. Tiffany S. Middleton and, Haverhill's native son, WBZ-T.V. (Boston, Ma) talk show host, Mr. Thomas Bergeron. This special edition tries to make the entire community(s) aware (and to become actually involved) in helping "KNOCK-OUT-AIDS by the YEAR 2000."

Four speakers from the "Aids Action Committee" (Boston, Ma.) are participants in this show. The cities of Haverhill and Boston, Massachusetts, unite to help educate and bring public awareness to the "AIDS CAUSE." Uniting the families, schools,

and communities of the small city and towns with the "big city" clearly illustrates that HIV-AIDS is everyone's concern.

"THE WAR ON AIDS PETITION DRIVE(S)"

The contest winners and four major New England Professional Sports' Teams, donated their team's signed sport awards, for the Aids Action Committee's Annual Auction. This added much needed support. Their true concerns that we must all work together to truly **"MAKE A DIFFERENCE"** to **"KNOCK-OUT-AIDS"** on/or before the **YEAR 2000** is clearly presented. Public and private schools, AT and T (business), and the four major sports teams active participation proves this can happen anywhere in America!

THE HONORABLE, UNITED STATES SENATOR, JOHN KERRY, U.S. Senator Kerry urges everyone at the closing of the show to, "sign the petition and even better yet "start his own petition drive(s)". United States Senator Kerry signs the petition hopeful, to "end this scourge."

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the head of "Project Help" to become A.A.C.'s Afro-American Educational Specialist. Belynda Dunn has also taken on the responsibilities of being **"THE WAR ON AIDS PETITION DRIVE COORDINATOR"**, an untiring force that made this adoption a reality. (Please see enclosed front page article entitled, "FROM ALL WALKS OF LIFE-Footnotes")

Mr. Leandro Viana, is in charge of the teen speakers for the "Teen Speakers Bureau" (YO-LINE) at A.A.C. The "Teen Speaker's Bureau" was also present at the June 4, 1993, adoption ceremonies

"TEEN AIDS EDUCATION SUMMER INSTITUTE - 1993"

During the Summer of 1993, Tiffany Middleton (and many other teens) became official speakers for the "Teen Speaker's Bureau" studying at the Tufts University Campus. Tiffany entered "Northern Essex Community College" in Haverhill, Ma. , this September. Plans are now being made to spread this petition drive to college campuses, private and public schools, etc. One has to remember that there is also an AIDS Action Committee on the West coast too!

Ms. Jessie Alvira (guest in **"LET'S TALK ABOUT AIDS"**, and a teen writer for "Teen Voices Magazine") plans to become a speaker for the "Teen Speaker's Bureau". Ms. Alvira is presently writing a feature article about this youth movement, which will be featured in an upcoming "Teen Voices Magazine" article.

PRESIDENT CLINTON AND THE SUMMER OF SERVICE - 1993

On August 30, 1993 "C-Span" covered the "National Service Program", with the presence of President Clinton.

President Clinton believes that each state "should mandate community service" to become part of the curriculum to promote civic values." As President Clinton stated, "Pioneers to change America" is what their dreams should become. Again, "The War On AIDS Petition Drive" could become one project that "allows college students to begin swapping public service for tuition money."

A RAINBOW OF DREAMS BECOMES THE AMERICAN DREAM

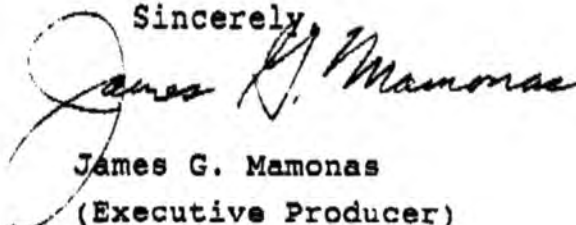
"The American Dream" of these young people (and adults) in this youth inspired movement is to "KNOCK-OUT AIDS by the year 2000." Today's youths have the stigma of being referred to by many as "The AIDS Generation"- a connotation that these young adults do not deserve.

President Clinton's chief hero while he was growing up was President John F. Kennedy. These young adults believe in "The American Dream." Now, their "Rainbow of Dreams" have to become reality. First, they must present their petitions directly to President Clinton (hopefully with the First Family present). Second, these young adults can spread the "Knock Out AIDS Year 2000" message clear across the United States of America. They truly believe that President Clinton believes that "the strongest voice in society is today's youth." Hopefully, President Clinton can let these young people "Live the Dream" to help "Knock Out AIDS by the year 2000." Only working together can "WE TRULY MAKE A DIFFERENCE!!!" As President Clinton recently stated about today's youth, "tomorrow belongs to them."

"The American Dream" will come true for our young adults because they are the "Seeds of Life" and if President Clinton allows them to "Live The Dream," then "The American Dream" will come true. Therefore, we respectfully request a formal reply on "THE WAR ON AIDS PRESIDENTIAL PETITION PRESENTATION" in the near future.

Thank you for your attention and cooperation,

Sincerely,



James G. Mamonas
(Executive Producer)

JGM/tem

- cc. -Aids Action Committee Members and Families
- Executive Director, Mr. Larry Kessler
 - President Board of Directors, Mr. Gary Sandison
 - Project Help, Afro American Educational Specialist and War On AIDS Petition Drive Coordinator, Belynda Dunn
 - Associate Director For Events, Mr. Bradley Seeman
 - Teen AIDS Speakers Bureau (Yo-Line), Mr. Leandro Viana
 - T.V. 33's Mr. Randy Buccini (Executive Director) and Mr. Ed Felker (Program Director)
 - Greater Fall River T.V., Mr. Rene Kochman (Program Director)
 - New England Professional Sports Teams
 - Boston Celtics
 - Boston Bruins
 - New England Patriots
 - Boston Red Sox
 - Gang Peace
 - "Women's Express" and "Teen Voices Magazine"
 - Massachusetts Department of Public Health
 - The Honorable, U.S. Senator, John Kerry
 - Ms. Leslie Lillard, Press Secretary
 - Mr. John DeSimas, Director of Local Operations and Constituent Service Corps (CCSC)
 - The Honorable, Massachusetts State Representative, Brian Dempsey
 - Tiffany Middleton, Host
 - Tom Bergeron, Guest Host

enclosures:

- Master Tape: "LET'S TALK ABOUT AIDS" (60 min.)
- Petition Kit: "War On AIDS"
- News Articles:
 - "Clinton, I'll Make AIDS a Presidential Priority" October 30, 1993
 - "What's Up? a Battle Raging Against AIDS!" March 2, 1993.
 - From All Walks of Life "Footnotes" (Front Page) September 1993

Photographs

- "T.V. 33's WHAT'S UP'S . . . "Let's Talk About AIDS" T.V. crew
- WHAT'S UP's . . . " Banners-"Let's Talk About AIDS," " War on Aids Petition Contest Kit"
- Brochure: "Teen AIDS Education Summer Institute, 1993."

THE WHITE HOUSE
WASHINGTON

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Note that Carol wants
my memo back by Oct 6
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Carlos,
Buck has a copy
of this already
Hah

SEP 30 1993

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WASHINGTON

September 30, 1993

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SENT BY FAX Telecopier 7020 1 9-30-93 14:30 The White House- 000001#

WHAT'S UP . . .

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Haverhill, Massachusetts 01832

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C/O Ms. Dawn Friedkin, Assistant
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A RAINBOW OF DREAMS BECOMES THE AMERICAN DREAM

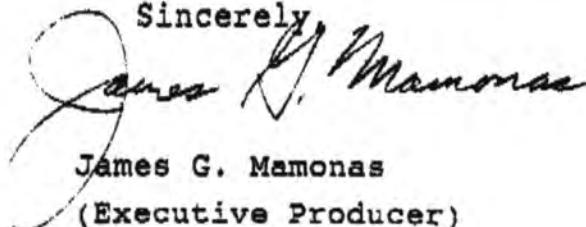
"The American Dream" of these young people (and adults) in this youth inspired movement is to "KNOCK-OUT AIDS by the year 2000." Today's youths have the stigma of being referred to by many as "The AIDS Generation"- a connotation that these young adults do not deserve.

President Clinton's chief hero while he was growing up was President John F. Kennedy. These young adults believe in "The American Dream." Now, their "Rainbow of Dreams" have to become reality. First, they must present their petitions directly to President Clinton (hopefully with the First Family present). Second, these young adults can spread the "Knock Out AIDS Year 2000" message clear across the United States of America. They truly believe that President Clinton believes that "the strongest voice in society is today's youth." Hopefully, President Clinton can let these young people "Live the Dream" to help "Knock Out AIDS by the year 2000." Only working together can "WE TRULY MAKE A DIFFERENCE!!!" As President Clinton recently stated about today's youth, "tomorrow belongs to them."

"The American Dream" will come true for our young adults because they are the "Seeds of Life" and if President Clinton allows them to "Live The Dream," then "The American Dream" will come true. Therefore, we respectfully request a formal reply on "THE WAR ON AIDS PRESIDENTIAL PETITION PRESENTATION" in the near future.

Thank you for your attention and cooperation,

Sincerely,



James G. Mamonas
(Executive Producer)

JGM/tsm

- cc. -Aids Action Committee Members and Families
- Executive Director, Mr. Larry Kessler
 - President Board of Directors, Mr. Gary Sandison
 - Project Help, Afro American Educational Specialist and War On AIDS Petition Drive Coordinator, Belynda Dunn
 - Associate Director For Events, Mr. Bradley Seeman
 - Teen AIDS Speakers Bureau (Yo-Line), Mr. Leandro Viana
 - T.V. 33's Mr. Randy Buccini (Executive Director) and Mr. Ed Felker (Program Director)
 - Greater Fall River T.V., Mr. Rene Kochman (Program Director)
 - New England Professional Sports Teams
 - Boston Celtics
 - Boston Bruins
 - New England Patriots
 - Boston Red Sox
 - Gang Peace
 - "Women's Express" and "Teen Voices Magazine"
 - Massachusetts Department of Public Health
 - The Honorable, U.S. Senator, John Kerry
 - Ms. Leslie Lillard, Press Secretary
 - Mr. John DeSimas, Director of Local Operations and Constituent Service Corps (CCSC)
 - The Honorable, Massachusetts State Representative, Brian Dempsey
 - Tiffany Middleton, Host
 - Tom Bergeron, Guest Host

enclosures:

- Master Tape: "LET'S TALK ABOUT AIDS" (60 min.)
- Petition Kit: "War On AIDS"
- News Articles:
 - "Clinton, I'll Make AIDS a Presidential Priority" October 30, 1993
 - "What's Up? a Battle Raging Against AIDS!" March 2, 1993.
- From All Walks of Life "Footnotes" (Front Page) September 1993

Photographs

- T.V. 33's WHAT'S UP'S . . . "Let's Talk About AIDS" T.V. crew
- WHAT'S UP's . . . " Banners-"Let's Talk About AIDS," " War on Aids Petition Contest Kit"
- Brochure: "Teen AIDS Education Summer Institute, 1993."

October 5, 1993



QUALITY NEVER GOES OUT OF STYLE

The Honorable Kristine M. Gebbie
White House AIDS Policy Coordinator
200 Independence Avenue, SW
Room #729G
Washington DC 20201

Dear Ms. Gebbie:

Please accept my congratulations on your appointment as White House AIDS Policy Coordinator. It is a critical post and one in which your demonstrated leadership is needed.

In addition to our best wishes for your success, I also wanted to convey an offer of active support. Levi Strauss & Co. and the Levi Strauss Foundation have been active in the fight against AIDS since 1985. In 1993 our global AIDS budget for charitable gifts and contributions is over \$2 million dollars. Lee C. Smith, whose path you may have crossed, was president of the LS&CO. International Division at the time we started our grantmaking in this area. Lee became involved in the fight against AIDS, and has since left the company, going on to chair the Board of the National Leadership Coalition on AIDS.

I have enclosed some materials which describe our workplace and community programs.

We have significant experience in terms of:

- o the development of employee education programs for a large, predominantly female manufacturing workforce, for many of whom English is a second language;
- o the development of personnel policies designed to provide a supportive environment for those who are HIV positive;
- o the development of a philanthropic program which has funded the start-up of community-based AIDS services in a number of rural or mid-sized communities in the South and Southwest in which LS&CO. has facilities.

If there is a role we could play to assist you over the coming months as you work to establish specific program priorities, please let me know. I would be willing to meet with you in Washington or San Francisco, should your travels bring you here.

Again, congratulations and best wishes in your challenging new role.

Sincerely,

A handwritten signature in cursive script, reading "Judy Belk".

Judy Belk
Vice President, Community Affairs
Executive Director, Levi Strauss Foundation



The Aaron Diamond AIDS Research Center
For the City of New York

FILE

John P. Moore, Ph.D.
Staff Investigator
Associate Professor of Microbiology
New York University School of Medicine

FACSIMILE TRANSMITTAL

Date: 6 OCT 1993

Pages including this one

TO: MS. KRISTINE GEBBIE
NATIONAL AIDS POLICY CO-ORDINATOR

NOTE: ART AMMANN OF PAF SUGGESTED THIS LETTER
BE COPIED TO YOU.

Best wishes




The Aaron Diamond AIDS Research Center
For the City of New York

October 6, 1993

Hon. Edward M. Kennedy
United States Senate
Washington, DC

Dear Senator Kennedy:

We are scientists engaged in research on HIV infection. Our efforts are focussed on understanding HIV pathogenesis, on developing drugs to counter HIV infection and on creating vaccines aimed at preventing HIV transmission.

We were concerned last year when MicroGeneSys, Inc. persuaded the Senate to appropriate \$20 million for clinical trials of their "therapeutic AIDS vaccine." It is now clear that the apparently hopeful clinical trial data upon which the Senate's decision was based have not been validated by further studies.

Therapeutic vaccination is a controversial stratagem, and available results have been disappointing. We believe that there are no strong scientific or medical grounds for the Senate to fund a Phase III trial of the MicroGeneSys product. Several therapeutic vaccines are under evaluation by various biotechnology companies, some of which seem significantly more promising than MicroGeneSys' gp160. Rather than focus on testing this one product in the face of majority scientific opinion, we request that the Senate re-allocate the \$20 million appropriation to basic research activities dedicated to improving HIV vaccine design and development.

We believe that placing this sum at the disposal of a peer-review committee coordinated by the DoD and NIH and comprising military and civilian scientists together with members of the AIDS activist community would be a significant contribution to science's efforts against AIDS. This would be a far better use of precious national resources than conducting yet another clinical trial of therapeutic vaccines.

Jon Allan
Southwest Foundation for Biomedical Research

Arthur Ammann
Pediatric AIDS Foundation

Dani Bolognesi
Duke University Medical Center

Cecilia Cheng-Mayer
University of California-San Francisco School of Medicine

Bryan Cullen
Duke University Medical Center

Ronald Desrosiers
Harvard Medical School

Murray Gardner
University of California-Davis School of Medicine

Francisco Gonzalez-Scarano
University of Pennsylvania

Beatrice Hahn
University of Alabama-Birmingham Department of Medicine

David Ho
Aaron Diamond AIDS Research Center

Eric Hunter
University of Alabama-Birmingham

Brad Jameson
Jefferson Cancer Institute

Richard Koup
Aaron Diamond AIDS Research Center

George Lewis
University of Maryland Medical School

Dan Littman
University of California-San Francisco

Tom Matthews
Duke University Medical Center

John Moore
Aaron Diamond AIDS Research Center

Harriet Robinson
University of Massachusetts Medical Center

James Robinson
University of Connecticut Health Center

George Shaw
University of Alabama-Birmingham Department of Medicine

Joe Sodroski
Dana-Farber Cancer Institute

Steven Wolinsky
Northwestern University

Susan Zolla-Pazner
New York University School of Medicine



The Aaron Diamond AIDS Research Center
For the City of New York

John P. Moore, Ph.D.
Staff Investigator
Associate Professor of Microbiology
New York University School of Medicine

FACSIMILE TRANSMITTAL

Date: Oct. 7, 1993
Pages including this one 4

TO: KRISTINE GEBBIE
NATIONAL AIDS POLICY COORDINATOR

NOTE:

This letter updates one faxed
to you on Oct. 6 at 12pm. It
includes additional signatories.



The Aaron Diamond AIDS Research Center
For the City of New York

October 6, 1993

Hon. Edward M. Kennedy
United States Senate
Washington, DC

Dear Senator Kennedy:

We are scientists engaged in research on HIV infection. Our efforts are focussed on understanding HIV pathogenesis, on developing drugs to counter HIV infection and on creating vaccines aimed at preventing HIV transmission.

We were concerned last year when MicroGeneSys, Inc. persuaded the Senate to appropriate \$20 million for clinical trials of their "therapeutic AIDS vaccine." It is now clear that the apparently hopeful clinical trial data upon which the Senate's decision was based have not been validated by further studies.

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We believe that placing this sum at the disposal of a peer-review committee coordinated by the DoD and NIH and comprising military and civilian scientists together with members of the AIDS activist community would be a significant contribution to science's efforts against AIDS. This would be a far better use of precious national resources than conducting yet another clinical trial of therapeutic vaccines.

Jon Allan
Southwest Foundation for Biomedical Research

Arthur Ammann
Pediatric AIDS Foundation

Dani Bolognesi
Duke University Medical Center

Denis Burton
Scripps Research Institute

Irvin Chen
University of California-Los Angeles

Cecilia Cheng-Mayer
University of California-San Francisco School of Medicine

Bryan Cullen
Duke University Medical Center

Ronald Desrosiers
Harvard Medical School

Eric Daar
Cedars-Sinai Medical Center

Murray Gardner
University of California-Davis School of Medicine

Francisco Gonzalez-Scarano
University of Pennsylvania

Beatrice Hahn
University of Alabama-Birmingham Department of Medicine

David Ho
Aaron Diamond AIDS Research Center

James Hoxie
University of Pennsylvania

Eric Hunter
University of Alabama-Birmingham

Brad Jameson
Jefferson Cancer Institute

Richard Koup
Aaron Diamond AIDS Research Center

Norman Letvin
Dana-Farber Cancer Institute

Jay Levy
University of California-San Francisco

George Lewis
University of Maryland Medical School

Dan Littman
University of California-San Francisco

Tom Matthews
Duke University Medical Center

Mike McClune
Systemix, Inc.

John Moore
Aaron Diamond AIDS Research Center

Abraham Pinter
Public Health Research Initiative for the City of New York

Harriet Robinson
University of Massachusetts Medical Center

James Robinson
University of Connecticut Health Center

George Shaw
University of Alabama-Birmingham Department of Medicine

Joe Sodroski
Dana-Farber Cancer Institute

Robin Weiss
Chester Beatty Laboratories

Steven Wolinsky
Northwestern University

Susan Zolla-Pazner
New York University School of Medicine

OCTOBER 6, 1993

DEAR Ms. GEBBIE,

THANK YOU FOR GIVING ME THE
OPPORTUNITY TO VISIT WITH YOU DURING
THE RECENT VISIT TO DALLAS. I ENJOYED
HEARING ABOUT YOUR PLANS AND CHALLENGES
AS YOU SERVE AS THE AIDS POLICY
COORDINATOR. THOUGH WE MAY DISAGREE
ON SOME ISSUES, I HAVE EVERY CONFIDENCE

DENCE THAT YOU WILL ARTICULATE THE
CONCERNS OF US AS AIDS SERVICES
ADVOCATES. YOUR COMMENTS INDICATED
THAT YOU HAVE A VISION, WHICH I
HOPE YOU RETAIN AMID THE POLITICS
OF AIDS HEALTH CARE. IF YOU RETURN
TO DAWAS, I WILL GLADLY MEET AND
DRIVE YOU. CORDIALLY,
ANNA KESSLER, Ph.D.



Ms. KRISTINE GEBBIE
COORDINATOR, NATIONAL AIDS
Policy OFFICE
EXECUTIVE OFFICE OF THE PRESIDENT
750 17th NW
WASHINGTON, D.C. 20503

4712 LEMMON AVE #6
DALLAS, TX 75219

CLINTON LIBRARY PHOTOCOPY

THE WHITE HOUSE
WASHINGTON

October 7, 1993

William L. Deary, III
Vice President
Programming Concepts, Inc.
5221 McCulloch
San Antonio, Texas 78212

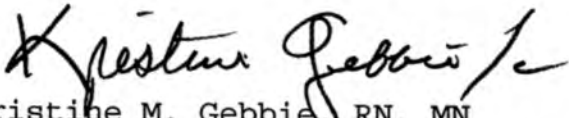
Dear Mr. Dreary:

Thank you for sharing your thoughts on the U.S. Public Health Service, Region VI Conference entitled "HIV Summit '93 - Focus on Youth." As you may know, the Office of National AIDS Policy was created out of the President's commitment to take some positive steps to stop the spread of HIV and to provide services for those already infected and living with HIV/AIDS.

As we move forward in our work, I hope that you will continue to share your views and input with me. I have shared the letter and you mailed to me with Carlos Vélez, JD, Director of HIV/AIDS Prevention of my office. If you would like to discuss any of these issues with him, please contact him at (202) 690-5560.

Thank you again for your interest.

Sincerely,



Kristine M. Gebbie, RN, MN
National AIDS Policy Coordinator

cc: Carlos Vélez, JD



Carlos
SEP 28 1993

September 22, 1993

James A. Doss
Regional Health Administrator
1200 Main Tower B - Room 1800
Dallas, TX 75202

Dear Mr. Doss:

I recently attended a conference which was provided by the U.S. Public Health Service, Region VI, coordinated by Ms. Sue Hammett, Regional HIV/AIDS Coordinator.

As one of the premier publishers producing materials for HIV prevention/education in the United States, I have had the opportunity to attend many similar conferences and meetings. The HIV Summit '93 - Focus On Youth should be commended on the basis of:

- Focus on youth: The virus (HIV) that causes terminal AIDS-related illnesses is infecting our youth at an alarming rate. A vaccine is not on the horizon; prevention is the only way to control this epidemic. Educating adolescents is the best step that we can take.
- Quality of agenda: The caliber of presenters was excellent, among the best I have seen in the past two years. Even with last minute cancellations, at the request of the Clinton administration, Ms. Hammett provided a superior group of experts to meet the varied needs of all conference attendees.

This conference was very well done; I heard many comments which indicated that attendees were most pleased. In the future, you may consider expanding conference invitations to public school educators - key individuals with a "focus on youth."

Ms. Hammett is to be commended for providing a most professional forum for the people served in Region-VI. Her dedication and commitment are an asset to the U.S. Public Health Service.

Cordially,

William L. Deary III
Vice President

cc: Ms. Kristine Gebbie
National AIDS Policy Coordinator

PROGRAMMING
CONCEPTS, INC.

IDEAS TO
MAKE LEARNING
FUNCTIONAL

5221 McCULLOUGH

SAN ANTONIO

TEXAS 78212

(210) 824-5949

FAX (210) 824-8055

[illegible]

La Plata, 3 de julio de 1993.-

Señora Kristine GEBBIE
Lucha contra el Sida
Casa Blanca -Res.Pres.
WASHINGTON - EE.UU.

Muy cordialmente:

Habiendo llegado a mi conocimiento por intermedio de la Prensa su designación como máxima responsable de la lucha contra el Sida, me atrevo a remitirle una copia de lo que modestamente he escrito en lo que llamo " Mi humilde colaboración en la lucha contra el mal" .-

Si Vd. cree y no es mucho pedirle, agradeceréle si se pudiera remitir una nueva copia a la Organización Mundial de los Derechos Humanos, para que la misma se agregue a esta interminable posta contra el terrible mal .-Como hacerlo...? para mí, sin ninguna intención de lucro personal, solamente dedicándose a la masiva impresión de las palabras que en forma de verso he escrito, sobre el Condón y colocarlas en el mercado mundial a un modestísimo precio por cada uno, a total y exclusivo beneficio para la lucha en que Vd. está empeñada.-

Todo lo simple que hago es en nombre también de mi señora esposa, de mis hijas y de mis cuatro nietos, y lógicamente con la ayuda de Dios.-

Si bien en un principio pensé que "el consejo" del condón era para los adolescentes y jóvenes, hoy con la velocidad que el hombre le da a la vida, sería cruel de mi parte dejar afuera a los niños, ya que dentro de uno o dos años, con seguridad, andarán en amores.-

Los mejores éxitos en su función a lado de sus colaboradores.-

Atentamente:

32- 623 (7 y 8)
La Plata (1900)
Prov. de Buenos Aires
Rep. Argentina.-

.....
L. GIL DIAZ

REF: SIDA

No creo, sino que estoy completamente convencido que todos aquellos que tengamos algo para aportar a la lucha contra el Sida por humilde, pequeño, ruro é incluso desorientador que lo sea, estamos obligados por solidaridad y temor al prójimo hacerlo trascender por todos los medios posibles para que llegue a los más capaces é inteligentes y que éstos en base a esas cualidades lo vayan mejorando y así sucesivamente hacerlo circular para que otros aún más capaces é inteligentes tomen el testimonio y entren en esta interminable posta contra el Sida.-

Mis palabras, — no sé si puedo decir en forma de versos, que van agregadas a ésta, son mi humilde colaboración en la lucha contra el terrible mal, y lógicamente las considero formando un todo con la presente.-

Atentamente.-

32 nº 623
La Plata (1900)
Tel: (021) 21-5342

..... *L. Gil Díaz*
L. Gil Díaz

CONDON

CONDON O PRESERVATIVO
DOS PALABRAS QUE TIENEN
EL MISMO SENTIDO

CUANDO CHICO
NOMBRAR LO SENTIA
AUNQUE MUCHO, MUCHO DE ELLO
NO COMPRENDIA

AL PASAR LOS AÑOS
LO DEJAMOS DE USAR
Y TODOS, ENTRE LOS QUE
YO ME ENCONTRABA,
LO ABANDONAMOS
EN CUALQUIER LUGAR

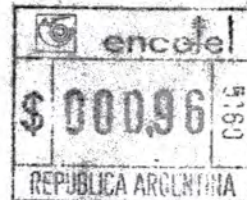
HOY POR APARICION
DEL SIDA,
ENFERMEDAD MORTAL,
HA VUELTO A TENER
GRAN IMPORTANCIA
ENTRE EL HOMBRE Y LA MUJER

SI DEL SIDA
TE QUIERES CUIDAR
ESCUCHA Y GRAVATE EL
CONSEJO QUE CON TRES
PALABRAS, EL CONDON O
PRESERVATIVO TE QUIERE
DAR :

V O L V E M E A U S A R
(después sí, me tirás)

Abril 1993.-

.....
*Mi humilde colaboración
en la lucha contra el mal*
L. Gil Díaz



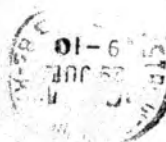
Señora
Enfermera Kristine GEBBIE
"Lucha contra el Sida"
CASA BLANCA (Res.Presidencial)
WASHINGTON - U.S.A.

Rte: L.G.D.
32 nº623 (7 y 8)
La Plata -(cod.1900)
Prov.Bs.Aires- Rep.Argentina



EX
A
KB
83
11

NOTESA
CORREO
ARGENTINO
4104



PHS CORRESPONDENCE

15060

REFERRAL DATE: 10-12 DUE DATE:

TO:

- ☒ ASH
☒ DEPUTY ASH
☐ SG
☒ DASH-MO
☐ DASH-SE

- ☐ DASH-C
☐ DASH-DPHP
☐ DASH-IGA / RHA
☐ DAS-IH
☐ DAS-MH
☐ DASH-PA
☐ DAS-PHP

- ☐ ADAMHA
☐ AHCPR
☐ ATSDR
☐ CDC
☐ FDA
☐ HRSA
☐ IHS
☐ NIH

- ☒ NAPO
☐ NVP
☐ PCPFS

- ☐ OEEO
☐ OEP
☐ OGC / H
☐ OHL
☐ OHPE
☐ OM
☐ OSIR
☐ OWH

6-☒ ES / PHS *Pickard*

1-☒ OTHER *B. Cox*

ACTION:

- ☐ SECRETARY'S SIGNATURE
☐ ASH SIGNATURE
☐ DIRECT REPLY
☐ _____ SIGNATURE
☐ DRAFT FOR OS SIGNATURE
(WHITE HOUSE REFERRAL)

- ☐ REVIEW / CLEARANCE
☒ NECESSARY ACTION
☒ FOR YOUR INFORMATION

1-3
4-5
7

SPECIAL INSTRUCTIONS

- ① Gene - ASH mtg. file 10/12
② NAPO - Nec. ACTION
③ Gloria - For DASH
w/ly file - pre briefing
w/Collier - Oct 15

PHS-5175A
Rev. 4/92

PHS / ES
Rm. 710H

Phone:

6908566

Routed by:

Waggoner

*U.S. Government Printing Office: 1992 — 321-428/69028 135



Memorandum

Date . OCT -7 1993

From Assistant Secretary for Health

Subject Executive Order 12839 - Executive Level Staffing Reductions

To Deputy Assistant Secretaries for Health
OASH Staff Office Directors

As we discussed at the OASH staff meeting on October 7, the President's Executive Order (12839) on "Reduction of 100,000 Federal Positions," also requires that, "at least ten percent of the reductions shall come from the Senior Executive Service, GS-15, and GS-14 levels or equivalent" (includes Commissioned Corps (CC) 06 and above).

I am advised that PHS as a whole is over its FY 1993 executive level target by 444 and that we are required to reduce another 55 in executive level staffing by the end of FY 1994. The attached tables provide FY 1993/1994 executive level targets and status as of August. For OASH, the on-board count for August was 314 versus an end of FY 1994 target of 306, or a required net reduction of 8.

So that we can formulate an OASH-wide plan and system for addressing executive level accessions on a priority basis, I ask that each of you provide the following information (please separately identify CC 06 and above since the Corps is being addressed on a PHS-wide basis):

- o Planned attrition of executive level staff (by name, grade, and position title) through September 30, 1994.
- o Desired accessions of executive level staff or promotions to GM/GS-14 (in priority order) through September 30, 1994.

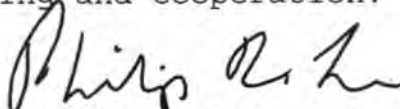
Pending receipt of your information and formulation of an overall OASH plan, there will be no accessions of executive level staff or promotions to GM/GS-14 unless an exception is approved by me. Such exceptions should be submitted to Tony Itteilag, Room 703H, Humphrey Building.

The information requested above should be submitted by October 20 to Lee Shields, Director, Division of Personnel Operations, Room 17-34, Parklawn Building.

Page 2

While the goal of the President's Executive Order may create short-term problems, I know that I can count on each of you to exercise the leadership necessary in assisting us to achieve it. We plan to take full advantage of the President's proposed "buy out" legislation and request the Department and USOPM to approve "early out" retirement authority to minimize the impact on our staff.

Thank you for your understanding and cooperation.


Philip R. Lee, M.D.

Attachment

PUBLIC HEALTH SERVICE
EXECUTIVE LEVEL EMPLOYMENT
FY 1993 - 1994
Plan and Status Report

PAY PLAN	HRSA	CDC\ATSDR	NIH	SAMSHA	AHCPR	OASH	SUB-TOTAL	FDA	IHS	TOTAL
TOTAL EMPLOYMENT	516	1,048	2,792	189	86	310	4,941	1,473	934	7,348
FY 1993 REDUCTION	5	13	32	1	1	2	54	0 1/	0	54
FY 1993 TARGET	511	1,035	2,760	188	85	308	4,887	1,473	934	7,294
FY 1994 REDUCTION	5	13	33	1	1	2	55	0	0	55
FY 1994 TARGET	506	1,022	2,727	187	84	306	4,832	1,473	934	7,239
JULY 1993 ACTUAL (ON-DUTY)	529	1,117	2,883	198	88	313	5,128	1,568	1,011	7,707
DIFFERENCE FROM FY 1994 TARGET	(23)	(95)	(156)	(11)	(4)	(7)	(296)	(95)	(77)	(468)
AUGUST 1993 ACTUAL (ON-DUTY)	528	1,122	2,888	197	86	314	5,135	1,579	1,024	7,738
DIFFERENCE FROM FY 1994 TARGET	(22)	(100)	(161)	(10)	(2)	(8)	(303)	(106)	(90)	(499)

- 1/ Original plan for FDA called for a reduction of 339 FTEs for FY 1993 and 1994. FY 1994 appropriation contained a floor of 9,824 FTEs, an increase of 990 FTEs over the FY 1994 President's Budget.

NOTE: No reductions are shown for IHS and FDA as current plans reflect staffing increase for both agencies; however, based on final appropriations for FY 1994, staffing levels may change and may result in adjustments.

PUBLIC HEALTH SERVICE
EXECUTIVE LEVEL EMPLOYMENT
FY 1993 - 1994
Plan and Status Report
CIVILIAN EMPLOYMENT

PAY PLAN	HRSA	CDC\ATSDR	NIH	SAMSHA	AHCPR	OASH	SUB-TOTAL	FDA	IHS	TOTAL
CIVILIAN EMPLOYMENT FY 1993 REDUCTION	337 3	810 10	2,401 28	161 1	70 1	247 2	4,026 44	1,288 0 1/	529 0	5,843 44
FY 1993 TARGET	334	800	2,373	160	69	245	3,982	1,288	529	5,799
FY 1994 REDUCTION	3	10	28	0	0	1	45	0	0	44
FY 1994 TARGET	331	790	2,345	160	69	244	3,937	1,288	529	5,755
JULY 1993 ACTUAL (ON-DUTY)	343	845	2,484	174	75	252	4,173	1,371	571	6,115
DIFFERENCE FROM FY 1994 TARGET	(12)	(55)	(139)	(14)	(6)	(8)	(236)	(83)	(42)	(360)
AUGUST 1993 ACTUAL (ON-DUTY)	342	849	2,488	175	73	254	4,181	1,380	587	6,148
DIFFERENCE FROM FY 1994 TARGET	(11)	(59)	(143)	(15)	(4)	(10)	(244)	(92)	(58)	(393)

- 1/ Original plan for FDA called for a reduction of 339 FTEs for FY 1993 and 1994. FY 1994 appropriation contained a floor of 9,824 FTEs, an increase of 990 FTEs over the FY 1994 President's Budget.

NOTE: No reductions are shown for IHS and FDA as current plans reflect staffing increase for both agencies; however, based on final appropriations for FY 1994, staffing levels may change and may result in adjustments.

PUBLIC HEALTH SERVICE
EXECUTIVE LEVEL EMPLOYMENT
FY 1993 - 1994
Plan and Status Report

COMMISSIONED CORPS EMPLOYMENT

PAY PLAN	HRSA	CDC\ATSDR	NIH	SAMSHA	AHCPR	OASH	SUB-TOTAL	FDA	IHS	TOTAL
COMMISSIONED CORPS EMPLOYMENT FY 1993 REDUCTION	179 2	238 3	391 4	28 0	16 0	63 0	915 10	185 0 1/	405 0	1,505 10
FY 1993 TARGET	177	235	387	28	16	63	905	185	405	1,495
FY 1994 REDUCTION	2	3	5	1	1	1	10	0	0	11
FY 1994 TARGET	175	232	382	27	15	62	895	185	405	1,484
JULY 1993 ACTUAL (ON-DUTY)	186	272	399	24	13	61	955	197	440	1,592
DIFFERENCE FROM FY 1994 TARGET	(11)	(40)	(17)	3	2	1	(60)	(12)	(35)	(108)
AUGUST 1993 ACTUAL (ON-DUTY)	186	273	400	22	13	60	954	199	437	1,590
DIFFERENCE FROM FY 1994 TARGET	(11)	(41)	(18)	5	2	2	(59)	(14)	(32)	(106)

- 1/ Original plan for FDA called for a reduction of 339 FTEs for FY 1993 and 1994. FY 1994 appropriation contained a floor of 9,824 FTEs, an increase of 990 FTEs over the FY 1994 President's Budget.

NOTE: No reductions are shown for IHS and FDA as current plans reflect staffing increase for both agencies; however, based on final appropriations for FY 1994, staffing levels may change and may result in adjustments.

American
Academy of
Pediatrics



141 Northwest Point Blvd
PO Box 927
Elk Grove Village, IL 60009-0927
Phone 708/228-5005

**Provisional Committee on
Pediatric AIDS**

Chairperson

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University of Miami
School of Medicine
Dept of Pediatrics (D4-4)
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305/547-6676
FAX 305/547-5562

OCT 19 1993

October 7, 1993

Ms. Kristine Gebbie
National AIDS Policy Coordinator
Office of National AIDS Policy Coordination
Executive Office of the President
Washington, D.C. 20500

Dear Ms. Gebbie,

I am writing on behalf of the AAP Provisional Committee on Pediatric AIDS to thank you for meeting with us on Sunday. You provided us valuable background on your new office and we found the discussion of pediatric issues thought-provoking and stimulating. We will keep you apprised of our activities and future policy statements in the area of pediatric HIV infection. We thank you for your willingness to discuss all issues openly and for your invitation to keep in touch with you on HIV issues relevant to children and youth.

We recognize your commitment to all aspects of the HIV epidemic and we appreciated the opportunity to have an open dialogue with you on the epidemic as it relates to families and youth. We wish you success in your new Office and hope you will feel free to keep in contact and use us as a resource for issues relating to HIV in children and adolescents.

Sincerely,

Gwendolyn B. Scott

Gwendolyn B. Scott, MD
Chairman, Provisional Committee
on Pediatric AIDS

cc: Damian Thorman
Ed. Ledbetter, M.D.

/gwen/PCPA/gebbie10.8

PROVISIONAL COMMITTEE ON PEDIATRIC AIDS
1993-1994

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CONSULTANT

James R. Allen, MD, MPH
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FAX: 708/228-5097

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Homer Building
Suite 400 North
601 13th Street, NW
Washington, DC 20005
Office: 202/347-8600
800/336-5475
FAX: 202/393-6137



Washington, D.C. 20201

OCT 7 1993

TO: Dr. Philip R. Lee, MD
Assistant Secretary for Health

FROM: Kenneth S. Apfel
Assistant Secretary for
Management and Budget

Numerical

SUBJECT: Reorganization of the AIDS Coordinator's Office

This responds to your request for our review and comments on the subject report which will be discussed at an October meeting with Kristine Gebbie.

We have some concerns on the implementation of the AIDS Policy initiative within HHS from a personnel, budget and organizational perspective. Our concerns are listed below:

- o We understand that under this initiative, PHS would retitile the National AIDS Policy Office as the Office of National AIDS Policy (ONAP). The Department should review this reorganization proposal and would need to know the staffing composition before and after the reorganization.
- o What would be the reporting relationship between the proposed ONAP and the Office of the National AIDS Policy Coordinator, between the Director of ONAP and the ASH?
- o What effect, if any, would the new structure have on the proposed ONAP employees. Would they remain PHS employees and continue to count under the PHS FTE ceiling? Would they be detailed to ONAPC and if they are, who would be responsible for their performance evaluation? If these are bargaining units employees, PHS should ensure that their rights are protected.
- o Would HHS continue to request funds in our budget for the proposed ONAP? What portion of the effort described in the report is HHS expected to fund -- ONAPC or just the proposed ONAP? Does PHS plan to "tap" its Agencies for additional resources beyond what is appropriated for the National AIDS Policy Office?
- o The report references a new Presidential HIV/AIDS Advisory Council. Has this Council already been established? If not, would it be established through Executive Order, legislation or some other means?

These issues should be addressed at the October meeting.



United States Department of State

Washington, D.C. 20520

October 7, 1993

OCT 25 1993

Ms. Kristine Gebbie
Office of the National AIDS
Policy Coordinator
750 17th Street, NW Suite 1060
Washington, D.C. 20500

Dear Ms. Gebbie,

Please find the attached HIV-AIDS country coordinator list which I promised that I would send you. Generally affiliated with the U.S. Embassy or USAID Mission, the coordinator keeps abreast of all USG HIV/AIDS related activities within the country and ensures that all members of the country team are adequately informed on HIV/AIDS related programs, activities, and information necessary to their area of responsibility. I hope you find the information helpful.

Sincerely,

A handwritten signature in cursive script that reads "Rich Bruno".

Richard Bruno, MD

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Department of State

OUTGOING
TELEGRAM
FILE-AIDS

PAGE 01 OF 03 STATE 273977 080958Z
ORIGIN AID-00

SHB2674

STATE 273977 080958Z
WASHINGTON, DC 20521-3010

SHB2674

INFO LOG-00 ARA-00 10-19 QES-09 OIG-04 /034R

DRAFTED BY: AID/RD/H:HGAYLE/CAIDLA.0826-03
APPROVED BY: AID/RD/H:RWRIN
AID/RD/H:VBARNES (DRAFT) AID/LAC/DR/HPN:KNURICK (INFO)
AID/LAC/DR/HPN:NWOODRUFF (INFO) AID/LAC/DR/HPN:CDABBS (INFO)
-----EB5EC5 081003Z /38

R 080959Z SEP 93
FM SECSTATE WASHDC
TO USAID MISSIONS IN LATIN AMERICA

UNCLAS STATE 273977

AIDAC:

E.O. 12356: N/A
TAGS:
SUBJECT: HEALTH AIDS (582): UPDATING THE HIV-AIDS
COUNTRY COORDINATOR LIST

1. THIS IS AN ACTION CABLE.

2. THE U.S. GOVERNMENT HAS ESTABLISHED AN HIV/AIDS
COORDINATOR IN EACH COUNTRY WITH WHICH IT HAS A
RELATIONSHIP, USUALLY AFFILIATED WITH THE U.S. EMBASSY OR
USAID MISSION. THE COORDINATOR'S ROLE IS TO KEEP ABREAST

OF ALL USG HIV/AIDS RELATED ACTIVITIES WITHIN THE COUNTRY
AND ENSURE THAT ALL MEMBERS OF THE COUNTRY TEAM ARE
ADEQUATELY INFORMED ON HIV/AIDS RELATED PROGRAMS,
ACTIVITIES AND INFORMATION NECESSARY TO THEIR AREA OF
RESPONSIBILITY. THE COORDINATOR IS ALSO THE POINT OF
CONTACT FOR OTHER DONORS AND PRIVATE GROUPS WITHIN THE
COUNTRY WISHING INFORMATION ON U.S. GOVERNMENT HIV/AIDS
ACTIVITIES.

3. A.I.D./RD/H/HIV-AIDS IS RESPONSIBLE FOR MAINTAINING A
CURRENT LIST OF THE HIV/AIDS COUNTRY COORDINATORS
WORLDWIDE. IN ORDER TO UPDATE THE LIST, EACH USAID
MISSION IS ASKED TO SUBMIT THE NAME, TITLE, AND MAILING

ADDRESS FOR THE COUNTRY COORDINATOR IN ITS RESPECTIVE
COUNTRY.

4. LISTED BELOW ARE THE CURRENT AIDS COUNTRY
COORDINATORS IN THE REGION. PLEASE REVIEW THE LIST AND
PROVIDE THE FOLLOWING INFORMATION:

A. NAME OF CURRENT HIV/AIDS COUNTRY COORDINATOR
B. TITLE
C. POSITION OF HIV/AIDS COUNTRY COORDINATOR
D. IS COUNTRY COORDINATOR RESPONSIBILITY PART OF A
PARTICULAR POSITION?

5. A.I.D./WASHINGTON APPRECIATES YOUR ASSISTANCE.

PLEASE SLUG CABLE RESPONSES TO RD/H/HIV-AIDS, HELENE
GAYLE AND TO LAC/DR/HPN FOR DABBS, NURICK AND WOODRUFF BY
SEPTEMBER 30, 1993.

ANTIGUA AND BARBUDA (COPY RDO/C)
POLITICAL/ECONOMIC OFFICER
AMER EMBASSY/ANTIGUA

ARGENTINA
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COUNSELOR FOR SCIENTIFIC AND TECHNICAL AFFAIRS
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TOM NICASTRO (DESIGNATED)
A

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COLOMBIA
EDWARD KADUNC
A.I.D. REPRESENTATIVE
AMER EMBASSY/BOGOTA
APO AA 34038

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OUTGOING
TELEGRAM

PAGE 02 OF 03 STATE 273977 080958Z
COSTA RICA
TERRENCE TIFFANY
GENERAL DEVELOPMENT OFFICER
AMER EMBASSY/COSTA RICA - UNIT NO. 2503
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SHB2674

STATE 273977 080958Z

SHB2674

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JACK THOMAS
SUP HEALTH DEVELOPMENT OFFICER
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MEXICO
NANCY SWEENEY
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ECUADOR
KEN YAMASHITA
TAACS

NICARAGUA
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~~DEPUTY, GENERAL DEVELOPMENT OFFICE~~ POPULATION OFFICE
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APO AE 34036

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TRINIDAD AND TOBAGO
BARBARA CATES
ECONOMIC OFFICER
AMER EMBASSY/BARBADOS
APO AA 34054-3120

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A.I.D. REPRESENTATIVE
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APO AA 34035-3360

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PAGE 03 OF 03 STATE 273977 080958Z
VENEZUELA
JEAN PRESTON

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ECONOMIC OFFICER
AMEMBASSY/CARACAS
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CHRISTOPHER

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TELEGRAM

Department of State

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Department of State

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TELEGRAM
FILE-AIDS

PAGE 01 OF 02 STATE 281349 150908Z
ORIGIN AID-00

SHB1596

STATE 281349 150908Z
AMER EMBASSY/CANBERRA
WASHINGTON, DC 20521-7800

SHB1596

INFO LOG-00 10-16 NEA-00 OES-09 OIG-04 SA-00 /032R

DRAFTED BY: AID/RD/H:HGAYLE/CAIDAS.0826-04
APPROVED BY: AID/RD/H:RWRIN
AID/RD/H:VBARNES (DRAFT) AID/ASIA/DR/TR:KJONES (INFO)
AID/ASIA/SA:CKOFF (INFO) AID/ASIA/EA:LROSS (INFO)
-----EE1450 150918Z /38

R 150909Z SEP 93
FM SECSTATE WASHDC
TO USAID MISSIONS IN ASIA

UNCLAS STATE 281349

AIDAC:

E.O. 12356: N/A
TAGS:
SUBJECT: HEALTH AIDS (583); UPDATING THE HIV-AIDS
COUNTRY COORDINATOR LIST

1. THIS IS AN ACTION CABLE.

2. THE U.S. GOVERNMENT HAS ESTABLISHED AN HIV/AIDS
COORDINATOR IN EACH COUNTRY WITH WHICH IT HAS A
RELATIONSHIP. USUALLY THE COORDINATOR IS AFFILIATED WITH

THE U.S. EMBASSY OR USAID MISSION. THE COORDINATOR'S
ROLE IS TO KEEP ABREAST OF ALL USG HIV/AIDS RELATED
ACTIVITIES WITHIN THE COUNTRY AND ENSURE THAT ALL MEMBERS
OF THE COUNTRY TEAM ARE ADEQUATELY INFORMED ON HIV/AIDS
RELATED PROGRAMS, ACTIVITIES, AND INFORMATION NECESSARY
TO THEIR AREA OF RESPONSIBILITY. THE COORDINATOR IS ALSO
THE POINT OF CONTACT FOR OTHER DONORS AND PRIVATE GROUPS
WITHIN THE COUNTRY WISHING INFORMATION ON U.S. GOVERNMENT
HIV/AIDS ACTIVITIES.

3. A.I.D./RD/H/HIV-AIDS IS RESPONSIBLE FOR MAINTAINING A
CURRENT LIST OF THE HIV/AIDS COUNTRY COORDINATORS
WORLDWIDE. IN ORDER TO UPDATE THE LIST, EACH USAID

MISSION IS ASKED TO SUBMIT THE NAME, TITLE, AND MAILING
ADDRESS FOR THE COUNTRY COORDINATOR IN ITS RESPECTIVE
COUNTRY.

4. LISTED BELOW ARE THE CURRENT AIDS COUNTRY
COORDINATORS IN THE REGION. PLEASE REVIEW THE LIST AND
PROVIDE THE FOLLOWING INFORMATION:

A. NAME OF CURRENT HIV/AIDS COUNTRY COORDINATOR
B. TITLE
C. POSITION OF HIV/AIDS COUNTRY COORDINATOR
D. IS COUNTRY COORDINATOR RESPONSIBILITY PART OF A
PARTICULAR POSITION?

5. A.I.D./WASHINGTON APPRECIATES YOUR ASSISTANCE. PLEASE

SLUG CABLE RESPONSES TO RD/H/HIV-AIDS, HELENE GAYLE AND
TO ASIA/DR/TR FOR KERRI ANN JONES BY SEPTEMBER 30, 1993.

AUSTRALIA
DON CLEVELAND
SCIENCE OFFICER

AFGHANISTAN
DOUGLASS PALMER
HEALTH DEVELOPMENT OFFICER
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~~WILLIAM R. GOLDMAN~~
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MONGOLIA
WILLIAM NANCE

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OUTGOING
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PAGE 02 OF 02 STATE 281349 150908Z
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PSC NO. 461, BX NO. 300
FPO AP 96521-0002

SHB1596

STATE 281349 150908Z

SHB1596

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NEW ZEALAND
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EMMANUEL VOULGARPOULOS
CHIEF, HPN OFFICE
AMER EMBASSY/USAID - UNIT NO. 8115
APO AP 96440

REPUBLIC OF THE MARSHALL ISLANDS
NEAL PALAFOX
U.S. PUBLIC HEALTH SERVICE OFFICER
U.S. OFFICE/MAJURO
MAJURO 96960

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AMER EMBASSY/SEOUL
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SOUTH PACIFIC
DAVID CALDER
CHIEF, HEALTH/POPULATION DEVELOPMENT OFFICER
REGIONAL DEVELOPMENT OFFICER
USAID/SUVA
DEPARTMENT OF STATE
WASHINGTON, DC 20521-4290

SRI LANKA
RICHARD M. BROWN
DIRECTOR

UNCLASSIFIED

UNCLASSIFIED
Department of State

OUTGOING
TELEGRAM

FILE - AIDS

PAGE 01 OF 03 STATE 273978 081000Z
ORIGIN AID-00

SHB2708

STATE 273978 081000Z

SHB27

INFO LOG-00 EUR-00 10-19 QES-09 OIG-04 /034R

DRAFTED BY: AID/RD/H:HGAYLE/CAIDEU.0826-05

APPROVED BY: AID/RD/H:RWRIN

AID/RD/H:VBARNES (DRAFT) AID/EUR/DR/HS:JTERRY (INFO)

-----EB5F2F 081007Z /38

R 081001Z SEP 93

FM SECSTATE WASHDC

TO USAID MISSIONS IN EUROPE

UNCLAS STATE 273978

AIDAC:

E.O. 12356: N/A

TAGS:

SUBJECT: HEALTH AIDS (584): UPDATING THE HIV-AIDS
COUNTRY COORDINATOR LIST

1. THIS IS AN ACTION CABLE.

2. THE U.S. GOVERNMENT HAS ESTABLISHED AN HIV/AIDS
COORDINATOR IN EACH COUNTRY WITH WHICH IT HAS A
RELATIONSHIP, USUALLY AFFILIATED WITH THE U.S. EMBASSY OR
USAID MISSION. THE COORDINATOR'S ROLE IS TO KEEP ABREAST
OF ALL USG HIV/AIDS RELATED ACTIVITIES WITHIN THE COUNTRY
AND ENSURE THAT ALL MEMBERS OF THE COUNTRY TEAM ARE

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COUNTRY WISHING INFORMATION ON U.S. GOVERNMENT HIV/AIDS
ACTIVITIES.

3. A.I.D./RD/H/HIV-AIDS IS RESPONSIBLE FOR MAINTAINING A
CURRENT LIST OF THE HIV/AIDS COUNTRY COORDINATORS
WORLDWIDE. IN ORDER TO UPDATE THE LIST, EACH USAID
MISSION IS ASKED TO SUBMIT THE NAME, TITLE, AND MAILING

ADDRESS FOR THE COUNTRY COORDINATOR IN ITS RESPECTIVE
COUNTRY.

4. LISTED BELOW ARE THE CURRENT AIDS COUNTRY
COORDINATORS IN THE REGION. PLEASE REVIEW THE LIST AND
PROVIDE THE FOLLOWING INFORMATION:

A. NAME OF CURRENT HIV/AIDS COUNTRY COORDINATOR

B. TITLE

C. POSITION OF HIV/AIDS COUNTRY COORDINATOR

D. IS COUNTRY COORDINATOR RESPONSIBILITY PART OF A
PARTICULAR POSITION?

5. A.I.D./WASHINGTON APPRECIATES YOUR ASSISTANCE.
PLEASE SLUG CABLE RESPONSES TO RD/H/HIV-AIDS, HELENE
GAYLE AND TO EUR/DR/HS FOR JULIA TERRY BY SEPTEMBER 30,

1993.

ALBANIA
DIANNE M. BLANE
USAID REPRESENTATIVE
AMERICAN EMBASSY

PSC 59, BOX 100 (A)
APO AE 09624
(RRUGA LABINOTT 103)
(TIRANA, AL)

ARMENIA
SUZANNE OLDS
USAID REPRESENTATIVE
USAID/YEREVAN
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WASHINGTON, DC 20521-7020

AUSTRIA
VACANT
USAID/AUSTRIA
UNIT NO. 27937
APO AE 09222

BELGIUM
ARNOLD J. CRODDY, JR.
ECONOMIC COUNSELOR

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GERALD ZARR

USAID REPRESENTATIVE
AMERICAN EMBASSY SOFIA
APO AE 09213-5740
(LA STAMBOLISKI BLVD.)

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SCIENCE COUNSELOR
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AMERICAN EMBASSY NICOSIA
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(TRZISTE 15-12548 PRABA)

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WASHINGTON, DC 20521-5280

ESTONIA
ADRIAN L. DE GRAFFENRIED

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TELEGRAM

PAGE 02 OF 03 STATE 273978 081000Z
USAID REPRESENTATIVE
AMERICAN EMBASSY ESTONIA
HELSINKI (BOX T)
APO AE 09723

SHB2708

STATE 273978 081000Z

SHB2708

FEDERAL REPUBLIC OF GERMANY
DR. EDWARD M. MALLOY
SCIENCE COUNSELOR
AMER EMBASSY/BONN
WASHINGTON, DC 20521-7400

FINLAND
CONSTANCE PHILIPOT
ECONOMIC/SCIENCE OFFICER
AMER EMBASSY/HELSINKI

WASHINGTON, DC 20521-5310

FRANCE
MR. WILLEM BRAKEL
SCIENCE OFFICER
AMER EMBASSY/PARIS
WASHINGTON, DC 20521-9200

GERMAN DEMOCRATIC REPUBLIC
WILLIAM JAMIESON
EMBASSY SCIENCE OFFICER
AMER EMBASSY/BERLIN
WASHINGTON, DC 20521-5090

HUNGARY
~~DAVID L. COWLES~~ LAWRENCE COHEN
~~A.I.D. REPRESENTATIVE~~ SCIENCE ATTACHE
AMERICAN EMBASSY BUDAPEST UNIT 25402
~~APO AE 09213-5270~~
(V SZABADSAG TER 12)

ICELAND
JAY DEHLOW
ECONOMIC/SCIENCE OFFICER
AMER EMBASSY/REYKJAVIK
WASHINGTON, DC 20521-5640

IRELAND
GEORGE DEMPSEY
CHIEF, POLITICAL SECTION
AMER EMBASSY/DUBLIN
WASHINGTON, DC 20521-5290

ITALY
COUNSELOR FOR SCIENTIFIC AND TECHNICAL AFFAIRS
AMER EMBASSY/ROME
WASHINGTON, DC 20521-9500

KAZAKHSTAN
PAULA FEENEY
USAID REPRESENTATIVE
C/O AMERICAN EMBASSY
DEPARTMENT OF STATE
WASHINGTON, DC 20521-7030

LATVIA
BAUDOUIN F. DEMARCKEN
A.I.D. REPRESENTATIVE

AMERICAN EMBASSY LATVIA
C/O HOTEL RIDZENE, ROOM NO. 503
ANDRUPA 1, RIGA

LITHUANIA

JOHN J. CLOUTIER
USAID REPRESENTATIVE
AMERICAN EMBASSY LITHUANIA
P.O. BOX 1203
2001 VILNIUS, LITHUANIA

LUXEMBOURG
KENNETH B. DAVIS
CHIEF, ECONOMIC AND COMMERCIAL SECTION
AMER EMBASSY/LUXEMBOURG
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NETHERLANDS
ANDREW PARKER
LABOR ATTACHE AND NARCOTICS POLICY COORDINATOR
AMEMBASSY/THE HAGUE
WASHINGTON, DC 20521-5770

NORWAY
LARRY MEMMOTT
ECONOMIC OFFICER
AMER EMBASSY/OSLO
WASHINGTON, DC 20521-5460

POLAND
WILLIAM R. JOSLIN
USAID REPRESENTATIVE

AMERICAN EMBASSY WARSAW
C/O AMCONGEN (WAW)
APO AE 09213-5010
(ALEJE UJAZDOWSKIE 29/31)

PORTUGAL
MR. GARY GRAPPO
ECONOMIC OFFICER
AMER EMBASSY/LISBON
WASHINGTON, DC 20521-5320

ROMANIA
MARY ANN MICKA
HEALTH/POPULATION OFFICE (PHSN)
AMERICAN EMBASSY BUCHAREST
APO AE 09213-5260

(STRADA TUDOR ARGHEZI 7-9)

RUSSIA
JACK LESAR
DIRECTOR

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TELEGRAM

PAGE 03 OF 03 STATE 273978 081000Z
AMERICAN EMBASSY
USAID/MOSCOW
PSC 77
APO AE 09721

SHB2708

SPAIN
ISHMAEL LARA
SCIENCE ATTACHE
AMER EMBASSY/MADRID
WASHINGTON, DC 20521-8500

SWEDEN
ROBERT CARROLL
NARCOTICS COORDINATOR
AMER EMBASSY/STOCKHOLM
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W. GREGORY PERETT
POLITICAL OFFICER
AMER EMBASSY/BERN
WASHINGTON, DC 20521-5110

SWITZERLAND
DR. DENNIS JOHNSEN
PUBLIC HEALTH SERVICE OFFICER
US MISSION TO THE UNITED NATIONS/GENEVA
WASHINGTON, DC 20521-5120

TURKEY
SARGE CHEEVER
POLITICAL OFFICER

AMER EMBASSY/ANKARA
WASHINGTON, DC 20521-7000

UKRAINE
EDWARD SMITH, ACTING
USAID REPRESENTATIVE
USAID/KIEV
DEPARTMENT OF STATE
WASHINGTON, DC 20521-5850

UNITED KINGDOM

J. NORBERT KRIEG
COUNSEL GENERAL
AMEMBASSY/LONDON
WASHINGTON, DC 20521-8400

YUGOSLAVIA
MICHAEL S. ZAK
USAID REPRESENTATIVE
AMERICAN EMBASSY ZAGREB
UNIT NO. 25402
APO AE 09213
ADNRIJE HEBRANGE 2
(41000 ZAGREB, CROATIA)
CHRISTOPHER

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Department of State

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PAGE 01 OF 02 STATE 273973 080945Z
ORIGIN AID-00

SHB2594

STATE 273973 080945Z

SHB2594

INFO LOG-00 10-19 NEA-00 QES-09 OIG-04 SA-00 /035R

DRAFTED BY: AID/RD/H:HGAYLE/CAIDNE.0826-06

APPROVED BY: AID/RD/H:RWRIN

AID/RD/H:VBARNES (DRAFT) AID/NE/DR/HR:WJANSEN (INFO)

-----E85D4E 080949Z /38

R 080946Z SEP 93

FM SECSTATE WASHDC

TO USAID MISSIONS IN NEAR EAST

UNCLAS STATE 273973

AIDAC:

E.O. 12356: N/A

TAGS:

SUBJECT: HEALTH AIDS (585); UPDATING THE HIV-AIDS
COUNTRY COORDINATOR LIST

1. THIS IS AN ACTION CABLE.

2. THE U.S. GOVERNMENT HAS ESTABLISHED AN HIV/AIDS
COORDINATOR IN EACH COUNTRY WITH WHICH IT HAS A
RELATIONSHIP, USUALLY AFFILIATED WITH THE U.S. EMBASSY OR
USAID MISSION. THE COORDINATOR'S ROLE IS TO KEEP ABREAST
OF ALL USG HIV/AIDS RELATED ACTIVITIES WITHIN THE COUNTRY
AND ENSURE THAT ALL MEMBERS OF THE COUNTRY TEAM ARE

ADEQUATELY INFORMED ON HIV/AIDS RELATED PROGRAMS,
ACTIVITIES AND INFORMATION NECESSARY TO THEIR AREA OF
RESPONSIBILITY. THE COORDINATOR IS ALSO THE POINT OF
CONTACT FOR OTHER DONORS AND PRIVATE GROUPS WITHIN THE
COUNTRY WISHING INFORMATION ON U.S. GOVERNMENT HIV/AIDS
ACTIVITIES.

3. A.I.D./RD/H/HIV-AIDS IS RESPONSIBLE FOR MAINTAINING A
CURRENT LIST OF THE HIV/AIDS COUNTRY COORDINATORS
WORLDWIDE. IN ORDER TO UPDATE THE LIST, EACH USAID
MISSION IS ASKED TO SUBMIT THE NAME, TITLE, AND MAILING

ADDRESS FOR THE COUNTRY COORDINATOR IN ITS RESPECTIVE
COUNTRY.

4. LISTED BELOW ARE THE CURRENT AIDS COUNTRY
COORDINATORS IN THE REGION. PLEASE REVIEW THE LIST AND
PROVIDE THE FOLLOWING INFORMATION:

A. NAME OF CURRENT HIV/AIDS COUNTRY COORDINATOR

B. TITLE

C. POSITION OF HIV/AIDS COUNTRY COORDINATOR

D. IS COUNTRY COORDINATOR RESPONSIBILITY PART OF A
PARTICULAR POSITION?

5. A.I.D./WASHINGTON APPRECIATES YOUR ASSISTANCE.
PLEASE SLUG CABLE RESPONSES TO RD/H/HIV-AIDS, HELENE
GAYLE AND TO NE/DR/HR FOR WILLIAM JANSEN BY SEPTEMBER 30,
1993.

EGYPT

JOY RIGGS-PERLA

SUP HEALTH DEVELOPMENT OFFICER

USAID/CAIRO - UNIT NO. 64902

APO AE 09839-4902

GREECE

MICHAEL CLEVERLEY

ECONOMIC COUNSELOR

AMER EMBASSY/ATHENS

WASHINGTON, DC 20521-7100

IRAQ

MR. DANIEL C. STOLL

CONSULAR OFFICER

AMER EMBASSY/BAGHDAD

WASHINGTON, DC 20521-6060

ISRAEL

DAVID W. MULENEX

EMBASSY SCIENCE ATTACHE

AMER EMBASSY/TEL AVIV

WASHINGTON, DC 20521-9700

JORDAN

P.E. BALAKRISHNAN

CHIEF, HPN OFFICE

USAID/AMMAN

UNIT NO. 70206

APO AE 09892-0206

KUWAIT

MARK HERZBERG

AMER EMBASSY/KUWAIT

WASHINGTON, DC 20521-6200

MALTA

CONSULAR OFFICER

AMER EMBASSY/VALLETTA

WASHINGTON, DC 20521-5800

MOROCCO

JOYCE M. HOLFELD

SUP HEALTH/POPULATION DEVELOPMENT OFFICER

AMER EMBASSY/RABAT

PSC 74, BOX 22

APO AE 09718

OMAN

MARK S. MATTHEWS

A.I.D. REPRESENTATIVE

AMER EMBASSY/MUSCAT

DEPARTMENT OF STATE

WASHINGTON, DC 20521-6220

SAUDI ARABIA

DR. THOMAS WIEGERT

REGIONAL MEDICAL OFFICER

AMEMBASSY/RIYADH

WASHINGTON, DC 20521-6300

SYRIA

BARBARA SCHELL

ECONOMIC/COMMERCIAL COUNSELOR

AMER EMBASSY/DAMASCUS

WASHINGTON, DC 20521-6110

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Department of State

PAGE 02 OF 02 STATE 273973 080945Z

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TUNISIA
JAMES A. GRAHAM
DIRECTOR
USAID/TUNIS
DEPARTMENT OF STATE
WASHINGTON, DC 20521-6360

UNITED ARAB EMIRATES
ROBERT ESSINGTON
ADMINISTRATIVE OFFICER
AMER EMBASSY/ABU DHABI
WASHINGTON, DC 20521-6010

YEMEN
EDWARD N. KASSIRA

TAACS
USAID/SANAA
DEPARTMENT OF STATE
WASHINGTON, DC 20521-6330
CHRISTOPHER

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Department of State

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FILE-AIDS

PAGE 01 OF 03 STATE 281354 151042Z
ORIGIN AID-00

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STATE 281354 151042Z

SHB2187

INFO LOG-00 AF-00 10-16 OES-09 OIG-04 /031R

DRAFTED BY: AID/RD/H:HGAYLE/CAIDAF.0826-02

APPROVED BY: AID/RD/H:RWRIN

AID/RD/H:VBARNES (DRAFT) AID/AFR/ONI:WKASCHAK (INFO)

AID/AFR/ARTS:JWOLGIN (INFO) AID/AFR/SWA:WDARKINS (INFO)

AID/AFR/SA:KBROWN (INFO) AID/AFR/CCWA:MGOLDEN (INFO)

AID/AFR/EA:PGUEDET (INFO) AID/AFR/ART:WLYERLY (INFO)

-----EE1EB8 151044Z /38

R 151043Z SEP 93

FM SECSTATE WASHDC

TO USAID MISSIONS IN AFRICA

UNCLAS STATE 281354

AIDAC:

E.O. 12356: N/A

TAGS:

SUBJECT: HEALTH AIDS (581): UPDATING THE HIV-AIDS
COUNTRY COORDINATOR LIST

1. THIS IS AN ACTION CABLE.

2. THE U.S. GOVERNMENT HAS ESTABLISHED AN HIV/AIDS
COORDINATOR IN EACH COUNTRY WITH WHICH IT HAS A

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COUNTRY.

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COORDINATORS IN THE REGION. PLEASE REVIEW THE LIST AND
PROVIDE THE FOLLOWING INFORMATION:

A. NAME OF CURRENT HIV/AIDS COUNTRY COORDINATOR
B. TITLE
C. POSITION OF HIV/AIDS COUNTRY COORDINATOR
D. IS COUNTRY COORDINATOR RESPONSIBILITY PART OF A
PARTICULAR POSITION?

5. A.I.D./WASHINGTON APPRECIATES YOUR ASSISTANCE.
PLEASE SLUG CABLE RESPONSES TO RD/H/HIV-AIDS, HELENE
GAYLE AND TO AFR/ARTS FOR WILLIAM LYERLY BY SEPTEMBER
30, 1993.

ALGERIA

DANIEL KEHER
ECONOMIC OFFICER
AMER EMBASSY/ALGIERS
WASHINGTON, DC 20521-6030

BENIN
~~MARY CUSACK~~ DENNIS BAKER
CHIEF, GENERAL DEVELOPMENT OFFICE
USAID/CONTONOU
DEPARTMENT OF STATE
WASHINGTON, DC 20521-2120

BOTSWANA
SCOTT R. STEWARD
HEALTH AND POPULATION ADVISOR
DEPARTMENT OF STATE
USAID/GABORONE
WASHINGTON, DC 20521-2170

BURKINA FASO
JATINDER CHEEMA
HPN OFFICER
USAID/OUAGADOUGOU
DEPARTMENT OF STATE
WASHINGTON, DC 20521-2440

BURUNDI
PROJECT DEVELOPMENT OFFICER
USAID/BUJUMBURA
DEPARTMENT OF STATE
WASHINGTON, DC 20521-2100

CAMEROON
RICHARD S. GREENE
HPN OFFICER
USAID/YAOUNDE
DEPARTMENT OF STATE
WASHINGTON, DC 20521-7020

CAPE VERDE
VACANT
USAID/PRAIA
DEPARTMENT OF STATE
WASHINGTON, DC 20521-2460

CENTRAL AFRICAN REPUBLIC
HUGH J. SMITH
A.I.D. LIAISON OFFICER
USAID/BANGUI
DEPARTMENT OF STATE
WASHINGTON, DC 20521-2060

CHAD
ANITA MACKIE
HEALTH DEVELOPMENT OFFICER
USAID/N'DJAMENA
DEPARTMENT OF STATE
WASHINGTON, DC 20521-2410

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PAGE 02 OF 03 STATE 281354 151042Z

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STATE 281354 151042Z

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CONGO
NELL DIALLO
A.I.D. LIAISON OFFICER
USAID/BRAZZAVILLE
WASHINGTON, DC 20521-2090

COTE D'IVOIRE
JOHN PAUL JAMES
HPN OFFICER
REDSO/WA
USAID/ABIDJAN
DEPARTMENT OF STATE
WASHINGTON, DC 20521-2010

DJIBOUTI
JOHN EGAN MCATEER

DEPUTY CHIEF OF MISSION
AMER EMBASSY/DJIBOUTI

WASHINGTON, DC 20521-2150

EQUATORIAL GUINEA
CARL F. TROY
POLITICAL/ECONOMIC OFFICER
AMER EMBASSY/MALABO
C 20521-2320

ETHIOPIA
VICTOR BARBIERO
GENERAL DEVELOPMENT OFFICER
USAID/ADDIS ABABA
DEPARTMENT OF STATE
WASHINGTON, DC 20521-2030

GABON
RON MCMULLEN
ECONOMIC OFFICER
AMEMBASSY/LIBREVILLE
WASHINGTON, DC 20521-2270

GAMBIA
BONNIE POUNDS
A.I.D. REPRESENTATIVE

USAID/BANJUL
DEPARTMENT OF STATE
WASHINGTON, DC 20521-2070

GHANA
CHARLES LLEWELLYN
HEALTH/POPULATION DEVELOPMENT OFFICER
USAID/ACCRA
DEPARTMENT OF STATE
WASHINGTON, DC 20521-2020

GUINEA
TOM PARK
DEPUTY MISSION DIRECTOR
USAID/CONAKRY
DEPARTMENT OF STATE
WASHINGTON, DC 20521-2110

(REDSO/ESA)
JOAN LAROSA
HEALTH/POPULATION DEVELOPMENT OFFICER
REDSO/EA
USAID/NAIROBI
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APO AE 09831-8900

(REDSO/WCA)

KATHERINE JONES-PATRON
HEALTH DEVELOPMENT OFFICER
REDSO/WA
USAID/ABIDJAN
DEPARTMENT OF STATE
WASHINGTON, DC 20521-2010

LESOTHO
LAURA SLOBEY
SUP GENERAL DEVELOPMENT OFFICER
USAID/MASERU
DEPARTMENT OF STATE
WASHINGTON, DC 20521-2340

LIBERIA
LOWELL E. LYNCH
A.I.D. REPRESENTATIVE
(LOCATED IN REDSO/ESA)

MADAGASCAR
CARINA STOVER
HEALTH/POPULATION DEVELOPMENT OFFICER
USAID/ANTANANARIVO
DEPARTMENT OF STATE
WASHINGTON, DC 20521-2040

MALAWI
CHRIS MCDERMOTT

HEALTH/POPULATION DEVELOPMENT OFFICER
USAID/LILONGWE
DEPARTMENT OF STATE
WASHINGTON, DC 20521-2280

MALI
~~LYNN GORTON~~ DOROTHY STEPHENS
HEALTH DEVELOPMENT OFFICER TECHNICAL ADVISOR FOR
USAID/BAMAKO HIV/AIDS & CHILD SURVIVAL
DEPARTMENT OF STATE
WASHINGTON, DC 20521-2050

MAURITANIA
DELIA PITTS, PH.D.
ASSISTANT HEALTH ADVISOR
USAID/NOUAKCHOTT
DEPARTMENT OF STATE

WASHINGTON, DC 20521-2430

MOZAMBIQUE
HPN OFFICER
USAID/MAPUTO
DEPARTMENT OF STATE
WASHINGTON, DC 20521-2330

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STATE 281354 151042Z
WASHINGTON, DC 20521-2350

SHB2187

NIGER
CARL SHAKIR RAHMAAN
HEALTH DEVELOPMENT OFFICER

USAID/NIAMEY
DEPARTMENT OF STATE
WASHINGTON, DC 20521-2420

NIGERIA
EUGENE CHIAVAROLI
A.I.D. AFFAIRS OFFICER
USAID/LAGOS
WASHINGTON, DC 20521-8300

RWANDA
WILLIAM B. MARTIN
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DEPARTMENT OF STATE
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SENEGAL
LINDA LANKENAU
SPECIAL PROJECTS OFFICER
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WASHINGTON, DC 20521-2130

SEYCHELLES
JAMES D. MELVILLE, JR.
EMBASSY CONSULAR OFFICER

AMER EMBASSY/VICTORIA
WASHINGTON, DC 20521-2510

SIERRA LEONE
TOM NEWCOMB
ECONOMIC/COMMERCIAL OFFICER
AMER EMBASSY/FREETOWN
WASHINGTON, DC 20521-2160

SOUTH AFRICA
PROJECT DEVELOPMENT OFFICER
USAID/PRETORIA
DEPARTMENT OF STATE
WASHINGTON, DC 20521-9300

SUDAN
CAROL R. BECKER
PROJECTS DIVISION
OFFICE OF FOOD AND HUMANITARIAN
USAID/KHARTOUM
DEPARTMENT OF STATE
WASHINGTON, DC 20521-2200

SWAZILAND
JAY ANDERSON
ASSISTANT REGIONAL HPN OFFICER
USAID/MBABANE
DEPARTMENT OF STATE

TANZANIA
DANA VOGEL
HEALTH/POPULATION DEVELOPMENT OFFICER
USAID/DAR ES SALAAM
DEPARTMENT OF STATE
WASHINGTON, DC 20521-2140

TOGO
SARAH CLARK
A.I.D. REPRESENTATIVE
USAID/LOME
DEPARTMENT OF STATE
WASHINGTON, DC 20521-2300

UGANDA
ELIZABETH MARUM, PH.D.
AIDS ADVISOR
USAID/KAMPALA
DEPARTMENT OF STATE
WASHINGTON, DC 20521-2190

ZAMBIA
~~PROJECT DEVELOPMENT OFFICER~~
USAID/LUSAKA
DEPARTMENT OF STATE

WASHINGTON, DC 20520-2310

ZIMBABWE
MERCIA DAVIDS
PROGRAM OFFICER
USAID/HARARE
DEPARTMENT OF STATE
WASHINGTON, DC 20521-2180
CHRISTOPHER

PAMELA STRALEY
AIDS PROJECT MANAGER

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Department of State

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THE WHITE HOUSE
WASHINGTON

October 7, 1993

Ms. Leeta Peña Helm
1600 Campus Road
Los Angeles, California 90041

Dear Ms. Peña Helm:

Thank you for taking the time to write and voice your concerns about the AIDS epidemic. I agree that research is needed to support and expand both service and prevention efforts.

As the National AIDS Policy Coordinator, I will strongly support a response to the epidemic that demonstrates a commitment to HIV research and caring for those who are infected.

I appreciate hearing from you.

Sincerely,

A handwritten signature in dark ink, appearing to read "Kristine Gebbie", followed by a stylized flourish or checkmark.

Kristine M. Gebbie, RN, MN
National AIDS Policy Coordinator

October 7, 1993

OFFICE	SURNAME	DATE	OFFICE	SURNAME	DATE	OFFICE	SURNAME	DATE

Kristine Gebbie
c/o National AIDS Program Office
200 Independence Av. S.W.
Washington, DC 20201

Dear Ms. Gebbie,

As a concerned citizen, I feel there is not enough emphasis in the research of AIDS. Goals toward ~~the~~ a cure are not being set and money is not spent wisely. I feel that government researchers should be made responsible and that research should set goals.

Sincerely,
Aleta Peña Helan



need to reply we
should have similar query
earlier —

THE WHITE HOUSE
WASHINGTON

October 7, 1993

Ms. Shanna Haines
1732 McGee
Berkeley, California 94703

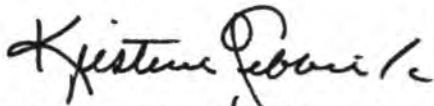
Dear Ms. Haines:

Thank you for taking the time to write and voice your concerns about the AIDS epidemic. I agree that research is needed to support and expand both service and prevention efforts.

As the National AIDS Policy Coordinator, I will strongly support a response to the epidemic that demonstrates a commitment to HIV research and caring for those who are infected.

I appreciate hearing from you.

Sincerely,

A handwritten signature in dark ink, appearing to read "Kristine Gebbie". The signature is fluid and cursive, with a large initial "K" and a stylized "G".

Kristine M. Gebbie, RN, MN
National AIDS Policy Coordinator

WASHINGTON

October 7, 1993

Ms. Shanna Haines
1732 McGee
Berkeley, California 94703

Dear Ms. Haines:

Thank you for taking the time to write and voice your concerns about the AIDS epidemic. I agree that research is needed to support and expand both service and prevention efforts.

As the National AIDS Policy Coordinator, I will strongly support a response to the epidemic that demonstrates a commitment to HIV research and caring for those who are infected.

I appreciate hearing from you.

Sincerely,

Kristine M. Gebbie, RN, MN
National AIDS Policy Coordinator

Prepared by: APO: TFox: 10/7/93:202-690-5560:b:\haines.gbe

**FILE
COPY**

[illegible]

SEP 28 1993

Shanna Haines
1732 McGee
Berkeley CA 94703
Sept. 19, 1993

Kristine Gebbie, RN
National AIDS Policy Coordinator
The White House
Washington, DC 20500

Dear Ms. Gebbie,

I urge you to throw your support
behind the Barbara McClintock Project
to cure AIDS, or to any similar
proposal to research a cure for AIDS.

It's time to devote ourselves to a
serious, well-thought-out effort to
effect a cure for this modern Plague.

Over a million Americans have AIDS
or are HIV-positive, thus virtually certain
to develop AIDS, not to mention the
millions more around the world.

Let's forget profits, academic
prestige and maintaining the status
quo for a while and wipe out this
horrible, deadly disease as soon as
possible!

Sincerely,

— Shanna Haines

THE WHITE HOUSE
WASHINGTON

October 7, 1993

Mr. Richard A. Frank
President
Population Services International
1120 19th Street, N.W., Suite 600
Washington, D.C. 20036

Dear Mr. Frank:

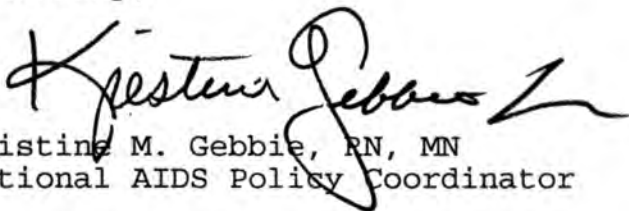
Thank you for information about Project ACTION with me. As you may know, the Office of National AIDS Policy was created out of the President's commitment to take some positive steps to stop the spread of HIV and to provide services for those already infected and living with HIV/AIDS. I understand that your project has been very successful in Portland.

I am interested in setting up a briefing with you, Dr. Philip Lee, the Assistant Secretary for Health, and Dr. Joycelyn Elders, the Surgeon General, to discuss how we can work together to address these critical issues. I have shared the information you sent me with Carlos Vélez, JD, Director of HIV/AIDS Prevention and with Ben Merrill, JD, my Special Assistant. Both of them are very interested in sharing ideas with you also.

As we move forward in our work, I hope that you will continue to share your views and input with me. If you could contact Carlos Vélez at (202) 690-5560, he can work with you to arrange a date for and time to meet.

Thank you again for your input and materials.

Sincerely,



Kristine M. Gebbie, RN, MN
National AIDS Policy Coordinator

cc: Carlos Vélez, JD
Ben Merrill, JD

WASHINGTON

Mr. Richard A. Frank
President
Population Services International
1120 19th Street, N.W., Suite 600
Washington, D.C. 20036

Thank you for information about Project ACTION with me. As you may know, the Office of National AIDS Policy was created out of the President's commitment to take some positive steps to stop the spread of HIV and to provide services for those already infected and living with HIV/AIDS. I understand that your project has been very successful in Portland.

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Sincerely,

cc: Carlos Vélez, JD
Ben Merrill, JD

[illegible]

October 7, 1993

Mr. Richard A. Frank
President
Population Services International
1120 19th Street, N.W., Suite 600
Washington, D.C. 20036

Dear Mr. Frank:

Thank you for information about Project ACTION with me. As you may know, the Office of National AIDS Policy was created out of the President's commitment to take some positive steps to stop the spread of HIV and to provide services for those already infected and living with HIV/AIDS. I understand that your project has been very successful in Portland.

I am interested in setting up a briefing with you, the Assistant Secretary for Health, and ^{Dr. Philip Lee} the Surgeon General, to discuss how we can work together to address these critical issues. I have shared the information you sent me with Carlos Vélez, JD, Director of HIV/AIDS Prevention and with Ben Merrill, JD, my Special Assistant. Both of them are very interested in sharing ideas with you also.

As we move forward in our work, I hope that you will continue to share your views and input with me. If you could contact Carlos Vélez at (202) 690-5560, he can work with you to arrange a date for and time to meet.

Thank you again for your input and materials.

Sincerely,

Kristine M. Gebbie, RN, MN
National AIDS Policy Coordinator

cc: Carlos Vélez, JD
Ben Merrill, JD



1120 Nineteenth Street, N.W. , Suite 600 • Washington, D.C. 20036 • USA
Telephone (202) 785-0072 • Fax (202) 785-0120 • Telex 197885 PSIW-UT

September 30, 1993

Ms. Kristine M. Gebbie
National AIDS Policy Coordinator
Office of National AIDS Policy
Executive Office of the President
750-17th Street, N.W., Suite 1060
Washington, D.C. 20500

Dear Ms. Gebbie:

Congratulations on your appointment as the National AIDS Policy Coordinator. We at Population Services International (PSI), have been long-involved in AIDS prevention and are pleased that someone of your stature and experience has been named to this important post.

Because of your interest in innovative AIDS prevention and education programs and your previous position as Administrator of the Oregon Health Division, I would like to tell you about Project ACTION, PSI's National Demonstration HIV/AIDS Prevention Project for Youth at Highest Risk in Portland, Oregon.

Project ACTION differs from other HIV/AIDS prevention programs underway in the U.S. in several respects. First, Project ACTION applies the "social marketing" approach developed by PSI in its programs in 24 countries around the world. Social marketing utilizes commercial marketing techniques, such as mass-media advertising, point-of-purchase promotions, and market research, and actively involves the business community to promote healthy behavior. In the case of HIV/AIDS prevention, social marketing programs motivate targeted populations to adopt safer sexual practices.

Second, the project targets young people between the ages of 12 and 21 who are living in high-risk situations, including living in an abusive or otherwise problem home environment, living out of home in a shelter, foster care situation, or correctional facility; being a teen parent; having a history of other sexual transmitted disease.

Project ACTION uses mass media in innovative ways as well, by creating a variety of relevant and appealing television formats to promote safer sexual practices among youth. The media campaign utilizes a positive, frank approach to address the key issues of teen sexuality and to create social norms which encourage the use of condoms by sexually active young people. By reflecting the attitudes, taste, and value-system of the target population, we aim to increase their acceptance and use of condoms.

Carlos
difficult
we should schedule
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& write Phil Lee &
surv. Genl.

Ms. Kristine Gebbie
September 30, 1993
Page Two

Finally, no other HIV/AIDS prevention project in America has combined good intentions with the good business sense of our condom social marketing approach. PSI strongly believes that the distribution of low-cost condoms through vending machines at locations frequented by youth represents a breakthrough for public health agencies seeking a cost-effective solution to increasing the accessibility of condoms.

Project ACTION has made significant progress since it opened its doors in July 1992:

- * Over 100 condom vending machines are selling latex condoms for a quarter apiece in teen hangouts -- the sites were identified by teen volunteers and include under-21 nightclubs, restaurants, clothing stores, music stores, and community recreation centers. Between January and September 1993, Project ACTION vending machines have sold over 20,000 condoms in these teen locations.

- * The television campaign is well under way, and features (1) a series of PSAs with the theme "Don't Even Think About Sex ... Without a Condom," being aired an estimated 200 minutes a month on Portland's 5 TV stations and 2 cable networks; and (2) longer format programs: A televised teen forum called "TIME FOR ACTION: BEING SAFE IN THE AGE OF AIDS" was developed by the project and an ensemble of teen HIV/AIDS educators and produced by Paragon Cable. The original two-hour show has been edited down to a 48-minute video, approved for in-school use by teachers in Portland public high schools, and over 60 copies of the video have been made available to local organizations and individuals working with youth. On Monday, October 4, 1993, the second Project ACTION television production by and for teens will be aired by the local Fox affiliate (Channel 49), and the show is called "LET'S TALK SAFER SEX."

- * An extensive outcome evaluation study is being conducted by the Oregon Health Division and the Kaiser Permanente Center for Health Research. It will determine the impact of these interventions on the target population's sexual risk-taking and condom use behavior. A total of 508 interviews were conducted between November 1992 and the third week in January 1993 prior to Project ACTION interventions; that series of interviews comprised the baseline sample. The results of the 2,200 interviews will be analyzed at the mid-point in the study, in October 1993, and after the end of the project, in early 1995, when the final report will be made available.

Project ACTION is currently funded through grants from the Ford Foundation, the Henry J. Kaiser Family Foundation, the Public Welfare Foundation, the Scherman Foundation, and the Moriah Fund. Grant requests for uncovered 1993-94 operational expenses of \$168,000 are presently pending with the CDC and with several foundations including the Robert Wood Johnson Foundation, INSURE, and The Playboy Foundation.

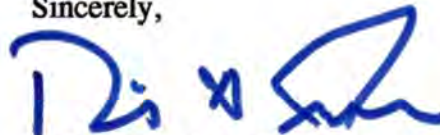
Ms. Kristine Gebbie
September 30, 1993
Page Three

PSI is presently studying options for replicating Project ACTION in other communities after January 1995. Recently, the project was presented at the CDC's video workshop with state HIV/AIDS program managers nationwide, and was met with enthusiastic interest.

Project ACTION and the Oregon Health Division would be delighted to meet with you and hope you could make a site visit to see Project ACTION in action. Please keep that possibility in mind when you make plans to visit the Pacific Northwest.

I have enclosed materials about Project ACTION and PSI. Should you wish to have further information or material about Project ACTION, please contact Julie Convisser, Project Director in Portland (503/294-0554) or me.

Sincerely,



Richard A. Frank
President

RAF/hc
Enclosures



PROJECT ACTION

PSI's Demonstration HIV/AIDS Prevention Project For Youth at Highest Risk

ONE-YEAR INTERIM REPORT

Grant Period July 1992 - July 1993

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ATTACHMENTS

Attachment A	List of Letters of Endorsement
Attachment B	Written and Radio Press About Project ACTION
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PROJECT OBJECTIVES

In the first year of the grant period, from July 1992 - July 1993, there were no significant changes in the Outcome or Process Objectives for Project ACTION. The principal goal of Project ACTION remains to help reduce the spread of HIV/AIDS among youth at highest risk by promoting the correct and consistent use of condoms. The essential strategy of the project remains intact: motivating condom use for sexually active youth through a targeted media campaign, and increasing access to condoms for youth through a condom vending operation.

ACCOMPLISHMENTS

Project ACTION made significant progress during the first-year grant period towards achieving the stated project objectives, by initiating and implementing the project according to the proposed workplan.

1. COMMUNITY MOBILIZATION

a. Project Advisory Group:

Project ACTION opened the doors of its Portland office August 1, 1992. On October 1, 1992 the 18-member Project ACTION Advisory Group met for the first time, representing health, business, government, youth-serving, school, and religious organizations in Oregon. The Advisory Group met monthly from October 1992 - March 1993, and began meeting quarterly thereafter. This Advisory Group advises the Project ACTION staff on the development and implementation of the three key components of the project, the media campaign, condom accessibility program, and evaluation study. Advisory Group members also serve as liaisons between Project ACTION and the constituencies they work with, and have represented and advocated for the project on appropriate occasions.

A Project ACTION National Advisory Task Force, formed in Washington, D.C. during the design phase of the project, receives monthly written updates on the project and met once during the grant period when the Project ACTION Director returned to PSI/Washington in February 1993.

b. Involvement of Community Leaders:

In November 1992, Project ACTION began contacting prominent individuals who are recognized social, political, business, and health leaders in Oregon, to seek their involvement in Project ACTION. Six community leaders contacted during this process volunteered to lend their personal, moral support to Project ACTION, by becoming

advocates for the project. These Community Leader Advocates have attended public forums and spoken to press on behalf of the project.

c. Youth Participation:

Since the focus of Project ACTION is youth at highest risk, the project has made a concerted effort to recruit and actively involve teenagers drawn from high-risk situations in all aspects of design and implementation of the project. In addition to the eleven focus group discussions held during the project design phase, since the project began in August 1992 Project ACTION staff has met with, trained, and worked with an additional 200 teenagers living in a variety of high-risk situations or who have behaviors that place them at augmented risk. These situations include living in problem home environments, shelters or juvenile detention facilities; being a teen parent; being juvenile justice, gang, or drug involved; having a history of sexually transmitted disease; being out of school; or being a male homosexual. Project ACTION reaches these young people through youth-serving organizations throughout Multnomah County, and actively recruits youth from ethnic minority communities.

These teens have been involved in the following Project ACTION activities:

- Development of criteria for condom vending machine sites
- Identification of sites for placement of condom vending machines
- Development, pretesting, and production of media materials
- Acting as spokespeople for the project with press

In addition, a total of 800 youth in high-risk situations have been interviewed among the total of 2,200 to be interviewed over the life of the project as a part of the Outcome Evaluation Study.

d. Business Community Outreach

Since Project ACTION's condom vending machine placement depends to a great degree on the good will of business owners in Multnomah County, in the first six months of the project, staff spent a significant amount of time and energy conducting outreach to area business leaders, associations, and individual owners. These activities include:

- Sending written briefing materials and/or presenting in person to a total of 18 neighborhood business associations and business leader organizations in the Portland metro area;
- Presenting to the Board of Directors of the Chamber of Commerce's Business Youth Exchange;

- Presenting to the President of the Portland Chamber of Commerce;
- Presenting to the Oregon Leaders Roundtable Executive Committee;
- Sending briefing packets to peer identified business leaders.

e. Outreach to Community, Professional and Civic Organizations:

In an effort to generate strong community support for its HIV/AIDS prevention activities given the potential controversial nature of Project ACTION's approach, project staff contacted and presented to community, professional, and civic organizations throughout the city. This form of interpersonal outreach is probably one of the major factors in explaining why there has not been any organized opposition to the condom promotion and accessibility activities undertaken by Project ACTION. This outreach included sending an informational mailing to the 90 neighborhood associations in Portland, and making oral presentations to a dozen organizations ranging from the Portland Jaycees to the Altrusa Club to the Oregon Psychiatric Association to AD-2, an organization of young advertising professionals. In addition, Project ACTION staff conducted "community hearings" in four neighborhoods regarding the placement of condom vending machines in their community recreation centers.

The community outreach resulted in nine formal letters of endorsement for the project, which have been useful in approaches to businesses (see Attachment A).

e. Public Awareness Activities

In an effort to raise general public awareness about Project ACTION and the teens and AIDS issue in general, Project ACTION carried out two major media events during the grant period, and began planning for a third.

The first public awareness event was on World AIDS Day 1992 (December 1), when Project ACTION held an event to mark the unveiling of its first condom vending machine in a popular teen clothing store. Sixty "Friends of the Project" attended the thirty minutes of presentations by the project director, health leaders, and a teen AIDS activist. Portland's television, radio, and print press covered the event.

Project ACTION held the second major public awareness event on January 21, 1993, to launch its HIV/AIDS prevention television public service campaign. A "Community Screening" was held at Portland's Advertising Museum, which 70 representatives of health, youth-serving, and community based agencies attended. The Project ACTION public service announcements (PSAs) were presented, and the process of their development discussed. A press conference followed, which involved presentations by a national AIDS expert from the U.S.F.D.A, by the State Manager for

the HIV/AIDS Prevention Program, a teen AIDS speaker, the project director, and the President of Borders, Perrin, and Norrander, the advertising firm which developed the PSAs. This press conference generated major feature stories about Project ACTION on all five of Portland's television stations, four local radio stations, and the Oregonian newspaper.

In July 1993 Project ACTION will install its 100th condom vending machine, and will hold a gala celebration to honor the participating businesses and members of the community who have made this achievement possible. The event will involve statements of appreciation by community leaders and by teens. Project ACTION will seek press coverage of this landmark, and publish an ad in the Oregonian to thank hosts of the first 100 condom machines.

In addition to these public awareness events, Project ACTION was featured in a 30-minute talk show produced by the Fox affiliate television station in Portland, called "Cityscape," where the project director joined a discussion about interventions for high-risk youth to prevent HIV infection. Project ACTION was also the focus of a four-minute radio story produced by National Public Radio and broadcast on "All Things Considered" in late January 1993, and a three-minute story on the international radio network, "Voice of America" in March 1993. The project has been written up numerous times in local print media, including in the Oregonian, the state's one daily newspaper; in the Willamette Week, a Portland weekly; and in Just Out and The Alternative Connection, the local gay papers.

Radio and television stations in Eugene, Oregon have also covered Project ACTION as it evolves, since many in that progressive Oregon community see this project as a potential model for replication in Eugene.

The public response to the major media attention given to Project ACTION has been positive. Project ACTION staff were braced for a backlash from conservative groups opposed to widespread condom promotion and availability for teens, which, with the exception of a single letter to the editor, has not occurred to date.

2. MEDIA CAMPAIGN

a. Public Service Announcements:

Here is what some Portland teenagers are saying about Project ACTION's public service announcements launched in January 1993:

The commercials made me think about real life situations and experiences I've had or heard about. I think they will make other teenagers think twice about having unprotected sex or at least make them more aware.

The message of these commercials was if you become sexually active you should think about condoms first.

The commercials make you think about what's going to happen. They made me feel like using condoms.

I think that the commercials had a strong message, it catches your eye too. It made me feel good to see/know someone's trying to educate teens.

At the close of the grant period, Project ACTION's condom promotion public service announcements have been airing an estimated total of 200 minutes per month on the five Portland television stations and two cable networks. The fact that all broadcasting stations in Portland are airing the PSAs is a first, and especially significant given the daring nature of these condom promotion messages. The PSAs are being broadcast at various hours during the afternoon, evening, and night, and several stations have hand-placed the PSAs in prime-teen-time, such as during "Beverly Hills 90210," and on MTV and VH-1 music video channels.

This series of three 30-second public service announcements was developed and produced in a collaborative effort between Project ACTION and the Portland-based advertising firm, Borders, Perrin, and Norrandner (BPN). The initial concepts for these public service announcements were based on the focus group research conducted by the project during the design phase, and these concepts were elaborated and revised based on input from the Advisory Group, members of the community, and over forty-five youth who reviewed the story-boards.

Each of the three PSAs features an initial ten-second scene which shows a teenager contemplating romance or experiencing sexual attraction: a girl and a boy pass each other on escalators in a shopping mall; a boy watches girls splash in a swimming pool; a girl arrives home to find a bouquet of flowers on her doorstep. At the concluding seconds of these scenes, a rain of condoms falls onto the individual who had been entertaining sexual thoughts. These scenes are immediately followed by the message: DON'T EVEN THINK ABOUT SEX... WITHOUT A CONDOM. Then the call to action: FIND THIS MACHINE (picturing a Project ACTION condom vending machine), OR JUST FIND A CONDOM.

The aim of these PSAs is to positively link thinking about sex with thinking about condoms for sexually active teenagers, thus establishing safer sex as the "norm." Screenings of the PSAs with teenagers indicate a very strong identification with the scenes, and a high level of comprehension and appreciation of the key message.

The PSA production was directed by Jeffery Plansker, a renown advertising and music video director from Los Angeles, who provided his services at no charge. The casting and filming was conducted in Los Angeles, and post-production in Seattle and

Portland. All actors used in these productions were Actors Guild members, and fees were negotiated for 18 months of broadcast. The total cost of production was \$425,000, of which Project ACTION paid \$100,000 and the rest was donated.

The major feat of getting all five of Portland's television stations and two cable networks to agree to broadcast these PSAs is the result of a concerted lobbying and public relations effort carried out by Project ACTION since the project's inception. This effort included periodic briefing meetings with the Public Affairs directors of all of the television and cable stations; a presentation of the PSA story-boards to a group meeting of representatives of the television and cable stations; briefing meetings with the general managers of the TV stations who had initial objections; major involvement of community leaders in publicly supporting the PSAs; and a series of launch events held for the public and press.

In a recent presentation of the public service announcements to the Federal Centers for Disease Control's National AIDS Information and Education Program, the CDC staff expressed interest in adapting the Project ACTION PSAs for national broadcast, as a part of the CDC national condom promotion campaign currently being developed. Such an adaptation would be easy and inexpensive.

b. "Time For Action" Live Cable Teen Forum on Safer Sex:

On the evening of May 5, 1993 "TIME FOR ACTION: BEING SAFE IN THE AGE OF AIDS" was broadcast on KBLE Cable Channel 30 in Portland, carried by the Paragon and TCI commercial cable networks. The two-hour live broadcast was developed by Project ACTION and an ensemble of 14 teen HIV/AIDS educators, and produced by Paragon Cable. The program was hosted by and presented by teens, produced with a live teen studio audience, and had live call-in. It featured five segments: 1) How to Recognize and Avoid Unwanted Sexual Situations; 2) How to Say No, Mean It, and Have People Hear You; 3) How to Communicate About and Negotiate Sexual Situations with Partners and Friends; 4) Don't Even Think About Sex Without a Condom: A How-to Condom Demonstration; and 5) Personal Perspectives on Living With HIV By Two Young Adults.

Seventeen-year-old Elise, who was one of the teen studio audience members, wrote Project ACTION after the show to share her feelings:

I loved the humor. I think it helps people to be able to joke about serious topics. But I was also glad to have the last segment serious. It's hard not to think about AIDS and sex and drugs when two people so close to your own age are sitting across the room-- knowing they are going to die soon. It isn't that they could be one of the people who will be hit by a bus this year or something like that. They know that they will die soon. I don't know if I could handle that. That show was one of the strongest of its kind that I have ever witnessed.

The show was very candid, with teens speaking their minds and hearts in all five segments. Viewing audience response was extremely positive, and neither Paragon nor TCI cable stations reported any complaints. A surprising number of the callers during the live show were parents, seeking the advice of the forthright teen presenters about how to address these issues with their own teens. One father of three teens called Project ACTION after watching the show with his children to make these comments:

I want to compliment you on the great work you are doing. The skits and role playing were very entertaining. In fact, it was the first time myself or my children have ever seen a condom demonstration on television. It was really very well done. I appreciated the sensitive discussion about abstinence and how to say no. I thought it was very good for my daughter (16 years old) to see. Our whole family got into a big discussion when it was over. Thank you for the work you are doing-- keep it up.

A week after the May 5 broadcast, a Portland public high-school teacher was already using a videotape of the program she pirated from television to discuss safer sex with her students. Her enthusiasm for the videotape as an in-classroom learning aid prompted the Portland Public Schools Manager of Curricula to request and subsequently approve a video-taped version of "TIME FOR ACTION" for use in school by teachers in Portland Public high schools. In addition to school distribution, Project ACTION produced a 48-minute edited version of the program for video, and has distributed 50 copies to local organizations and individuals working with youth. The local stores of Hollywood Video and Blockbuster have agreed to carry the video for "free rental" in their community service video sections.

"TIME FOR ACTION" was produced at virtually no cost to Project ACTION, since Paragon Cable donated the studio, set, and all technical crew and equipment. Paragon also provided free assistance to Project ACTION in editing down the two-hour tape of the show to the 48 minute video. Organizations requesting a copy of the video pay Project ACTION \$7.50, which covers the cost of dubbing.

c. Collateral/ Environmental Media:

In addition to television safer sex productions, Project ACTION has produced a series of collateral, or "environmental," materials aimed at reinforcing the safer sex awareness and behavioral messages being promoted by the television campaign. These include:

- 500 copies of a poster which visually present the theme "DON'T EVEN THINK ABOUT SEX... WITHOUT A CONDOM"

- tee-shirts bearing the Project ACTION logo on one side and the slogan "DON'T EVEN THINK ABOUT SEX WITHOUT A CONDOM" on the back
- window stickers and stand-up signs for stores where Project ACTION condom vending machines are placed which say "We're Helping Stop the Spread of HIV/AIDS-- Condom Machine Here!"
- Reprinting of 20,000 copies of "HIV/AIDS Know the Facts" brochures developed by the Oregon Health Division, for distribution to locations which host Project ACTION condom vending machines, paid for by Sime Health Limited (the condom manufacturer)

3. CONDOM VENDING OPERATION

Since Project ACTION installed the first condom vending machines six months ago, it has approached over 200 businesses, and placed 98 condom vending machines in 69 sites around Portland. These sites range from pizza places and under-21 nightclubs, to teen clothing and comic book stores, to the Portland Community College and City of Portland community recreation centers. All sites were identified by Project ACTION's teen volunteers. Project ACTION expects to reach the 100th machine mark in mid-July 1993.

To date, owners of locations hosting Project ACTION condom vending machines report satisfaction with the machines, service, and customer response. Several business owners say that customers seek them out to state their support for the presence of the machines. Thus far, no businesses report negative customer remarks, vandalism, or problems with condoms being left on the premises. The machines also enjoy community support. Project ACTION presented to four neighborhood associations as a part of the process of placing machines in the City of Portland recreation centers, and these groups endorsed the presence of the condom vending machines in their communities.

Approximately one in four businesses approached agree to host a Project ACTION condom vending machine. The most frequent reasons given for declining are: 1) worried about customer reaction; 2) not appropriate for establishment; 3) condoms go against religious beliefs; 4) teens not primary customers; 5) no bathrooms and unwilling to install in store; 6) corporate office has policy against vending.

Businesses that host Project ACTION condom vending machines display small window stickers which say "We're Helping Stop the Spread of HIV/AIDS... Condom Machine Here!," and place cardboard signs bearing the same slogan on or near the cash registers, to let customers know in a discreet manner that there is a machine on the premises. Several of the businesses also display and/or sell other Project ACTION promotional items such as t-shirts, key-chains, and posters bearing the

message "Don't Even Think About Sex... Without a Condom." All businesses which host a machine receive copies of the leaflet developed by the Oregon Health Division, "HIV/AIDS Know the Facts," which Sime Health Limited reprinted for distribution to Project ACTION machine sites.

In general, acceptance of the machines among independently-owned businesses is quite high. Corporate owned businesses, such as fast-food franchises, shopping malls, and movie theaters, pose a much greater challenge. The corporate decision-makers are often based outside of Oregon, and do not wish to participate in what they see as a "local" effort which they fear might have negative ramifications for their corporation in other regions.

A notable break-through in terms of getting machines into high-profile corporate-owned businesses, however, was the placement of two Project ACTION machines in a downtown Burger King restaurant in March 1993 (see Willamette Week article, "Have it Your Way"). In Oregon, all the Burger King restaurants are owned and managed by one company which is based in Portland. The corporate manager agreed to allow the project to install the first machines in one location as a trial run. Thus far, it is the highest selling location of all Project ACTION machine sites, and there have been no problems.

The Burger King corporate manager also agreed to allow Project ACTION to have an independent research firm conduct a Burger King customer survey at three other locations to see if they would be amenable to having condom vending machines installed there. The results of the survey indicate that 90 percent of the 190 customers interviewed were neutral or positive about the presence of the machines at Burger King; 5 percent were negative but said it would not affect their patronage; and 5 percent of the customers surveyed reported that they would stop coming to Burger King if machines were installed there.

In a recent meeting with the Burger King corporate representative, Project ACTION presented these results. Based on his own feelings and the market research results, the corporate representative was strongly supportive of placing machines at additional Burger Kings, but was afraid that his fast-food competition would use this action against him and create negative publicity. He therefore volunteered to hold a meeting with his counterparts at McDonald's, Taco Bell, Kentucky Fried Chicken, and Wendy's, where he would advocate that they all host machines as a "corporate community response to AIDS." This "Fast-food Summit" will be held at the end of July, and will involve selected health, religious, and business advocates of Project ACTION as well as the fast-food corporate representatives.

In the six months since the first machine was installed, Project ACTION vending machines have sold a total of 10,900 condoms. The monthly sales have been increasing dramatically due to the installation of a substantial number of new

machines each month, with over 3,000 condoms sold in the month of June alone. Sales vary widely from site to site, with Burger King selling 260 condoms in one month and the Private Industry Council's Youth Employment Center selling two. The average number of condoms sold per machine per month is 35. Machines in men's bathrooms sell four to five times the number of condoms sold in women's bathrooms. At the current level of sales per location, when the target number of 300 machines are installed, Project ACTION will be selling and estimated 7,000-10,000 condoms each month.

In April 1993, Inland Vending Incorporated terminated its contract with PSI/Project ACTION for the servicing of the condom vending machines, due to financial instability. Project ACTION then contracted Inland Vending Incorporated's former machine service person directly, and he has continued providing approximately 25 hours a month servicing the machines. The change means that Project ACTION now is responsible for purchasing product as well as machines, for inventory, and for collection of revenue from the sale of condoms. All revenue go directly back into the cost of servicing the vending operation.

The condom vending operation has just crossed the sustainability threshold, since the monthly income from the sale of condoms now covers the cost of servicing the machines (\$500/month for labor). Within two to three months, sales revenue will cover the cost of the condoms in addition to the cost of labor (\$0.11/condom), thus making the operation truly self-sustainable. Eventually the project may even partially recoup the initial capital investment for the purchase of the condom vending machines.

Project ACTION continues to work with teens and young adults to develop additional sites for the Project's machines. The project is currently considering expanding the geographic area in which machines are placed beyond the limits of Multnomah County, and/or expanding the age-group we serve, currently limited to under-21. This expansion would increase access to condoms for young adults currently not served, and would provide many new businesses for the project to target.

STAFFING

Project ACTION is staffed by one full-time employee, Julie Convisser, who is the Project Director. Nicole Iseli, a consultant to the project, works 32 hours a week as the Project's Community Outreach Specialist. Ms. Iseli is directly responsible for developing the vending machine placement strategy, contacting and negotiating with businesses to place condom vending machines, and for overseeing the vending operation and relations with businesses.

PSI/Washington D.C. provides substantial personnel assistance to Project ACTION. Helen Crowley backstops Project ACTION at PSI/Washington D.C., providing constant feedback and technical and administrative assistance. Julie

Convisser reports directly to the President of PSI, who advises on strategic matters. Accounting responsibilities are shared between the project director and PSI's accounting division.

Mr. Howard Klink, Communication Liaison for the County Commissioners, provides occasional consulting services to the project in public relations and outreach.

A condom vending machine service personnel contracted directly to Project ACTION provides approximately 25 hours a month of service, installing, supplying, and maintaining Project ACTION machines.

In addition to the paid staff and consultants, Project ACTION benefits from significant contributed time by staff of the following organizations:

- Borders, Perrin, and Norrande (advertising firm)
- Bowler and Associates, Incorporated (public relations firm)
- Cascade AIDS Project (a community based AIDS service organization)
- Oregon Health Division

A group of approximately 40 teens are actively involved in Project ACTION activities, and work on specific tasks on an as-needed basis. These teens are paid minimal stipends for tasks completed.

Project ACTION is greatly helped by two part-time Summer Interns during June-August 1993. One is a graduate student in marketing at Portland State University, who is conducting a market feasibility study regarding possible expansion of the target population, and is negotiating with new businesses about machine installation. A second intern is a Ph.D candidate in Sociology at Portland State University, who will be developing Project ACTION's teen-to-teen skills building workshops. In addition, a growing pool of adult volunteers assist Project ACTION in many ways, including researching and approaching businesses regarding the placement of machines, helping produce media materials, photographing Project ACTION events and machine locations, conducting formative research, and recruiting teen volunteers.

EVALUATION

An extensive Outcome Evaluation Study of Project ACTION is being conducted by the Oregon Health Division and the Kaiser Permanente Center for Health Research through a sub-contract with Population Services International.

The Outcome Evaluation Study involves the interview of approximately 2,200 teenagers in high-risk situations over the life of the project. Interviews are conducted by trained, professional interviewers employed by the Kaiser Permanente Center for Health Research. Teens are sampled from 14 facilities serving youth at risk, including

alternative learning centers, juvenile justice detention, transitional shelters, and counselling facilities. Interviews are oral and anonymous. They cover AIDS-related media exposure; recent sexual behavior; and attitudes, behavior, and access related to condoms. The results of the 2,200 interviews will be analyzed in order to determine trends over time and the relationship between attitudes towards, use of, and access to condoms and Project ACTION interventions.

A total of 508 interviews were conducted between November 1992 and the third week in January 1993 prior to Project ACTION interventions. This series of interviews comprised the baseline sample, and was drawn from 39 percent African-Americans, 39 percent White/Caucasians, and 22 percent from other ethnic groups. Results from this baseline survey show a very high level of sexual activity. Four out of five respondents are sexually active, 75 percent of those having had more than three partners. The baseline sample also reports a high level of condom use, with 60 percent using condoms last time they had sex with a main or steady partner, and 75 percent using condoms last time they had sex with a new or casual partner. However, consistent condom use is clearly a problem, with 66 percent reporting that they don't use condoms "all the time" with their main partner, and 41 percent reporting that they don't use condoms "all the time" with new or casual partners (See Attachment D for "Report on Key Findings of Baseline Survey"). Project ACTION released the baseline findings to the press in early June.

The results of the rest of the 2,200 interviews will be analyzed mid-point in the study, in September 1993, and after the end of the project, in early 1995, when the final report will be made available.

In addition to the formal Outcome Evaluation, the project relies on many other forms of formative and process evaluation research to develop and monitor the interventions. These include focus group discussions, pretesting of media materials, and informal interviews, and surveys.

A volunteer with Project ACTION, a professor of Anthropology and Sociology at Lewis and Clark College, conducted a Point of Purchase Survey at 13 of the Project ACTION condom vending machine locations. He and his team of six students interviewed owners, managers, employees, and customers of these twenty sites, regarding their perceptions of and reactions to the condom vending machines. This data is currently being analyzed, and results will be available in August 1993.

A local market research firm conducted a Burger King Customer Survey regarding attitudes towards potential condom vending machine placement at Burger King and other fast-food restaurants.

DISSEMINATION

Project ACTION has been widely publicized in television, radio, and print press in Portland and the rest of Oregon. The following is a list of the local broadcasting stations and newspapers that have covered the project:

Oregon Television (see videocassette containing January 21, 1993 coverage):

KGW Channel 8 (NBC affiliate)
KOIN Channel 6 (CBS affiliate)
KATU Channel 2 (ABC affiliate)
KPDX Channel 49 (Fox affiliate)
KPTV Channel 12 (independent)
KEZI Channel 9 in Eugene (ABC affiliate)

Oregon Radio (see transcripts attached):

KKSN Radio
KXL Radio
KEX Radio
KUPL Radio
Oregon Public Broadcasting Radio

Oregon Newspapers (see print press copies, attached):

The Oregonian
Just Out
The Hawthorne Gazette
The Parkrose Business Association News
Willamette Week

Project ACTION has also been covered in print and radio press outside of Oregon:

Print: Family Planning World, September-October 1992
The Texas Triangle

Radio: National Public Radio, "All Things Considered"
Voice of America International French Broadcast

All press coverage of this project has been positive in nature, highlighting the general level of public awareness surrounding the issue of teens' risk for HIV/AIDS, and the general acceptability of interventions designed with significant community input.

BUDGET AND FUNDING

Project ACTION has a total estimated budget of 985,783 for three years of activity. The largest budget line-items are Evaluation Research, which is approximately \$250,000, and Media Production, which is \$120,000, leaving approximately \$200,000 per year for all other project activities, personnel, and operations.

To date, PSI has raised a total of \$720,000 in grants to fund the project:

Foundation	Amount	Grant Period
The Henry J. Kaiser Family Foundation	\$400,000	(life of project)
The Public Welfare Foundation	\$ 65,000	(6/92 - 6/93)
The Ford Foundation	\$190,000	(1/93 - 4/95)
The Scherman Foundation	\$ 25,000	(life of project)
The Moriah Fund	\$ 40,000	(life of project)

PSI is currently fundraising for the balance of the Project ACTION budget, seeking a total of \$265,783 in grants for the last year of project activities (calendar year 1994), and has grant applications outstanding with the Playboy Foundation, the Public Welfare Foundation, the Robert Wood Johnson Foundation, and INSURE.

OTHER DEVELOPMENTS

1. PROJECT ACTION SERVES LOCAL COMMUNITY

Project ACTION has quickly become a well-known entity in Portland and state-wide in Oregon. The project is seen as a key community resource on teens and AIDS, since it is the only organization in the state which has as its sole purpose the prevention of HIV among teens. Project ACTION staff are frequently requested to participate in community events, fora, discussions, and conferences related to HIV/AIDS and adolescent health. For example, the Project Director was invited to testify twice before the Interim House Committee of the Oregon State Legislature regarding Project ACTION activities and youth risk behavior. She was also requested to present about teen risk to the State Public Health Advisory Board. She co-facilitated a training for healthworkers on community mobilization sponsored by the Coalition for AIDS Education, and was asked to repeat the training at the annual State Healthworkers' Conference. The project Outreach Specialist has conducted numerous HIV/AIDS educational sessions at schools and youth programs. Project ACTION staff are eager to participate in Portland and Oregon's efforts to safe-guard the health of young people in the state, and pleased that the project has become a valued local resource.

2. NATIONAL INTEREST IN PROJECT ACTION MODEL

On the national level, there is increasing interest in cities as far flung as Denver, Honolulu, Olympia and Sacramento in the Project ACTION social marketing approach for addressing teen risk behavior. Project ACTION and PSI/Washington staff frequently field calls from individuals and agencies around the country requesting information on the condom social marketing strategies used by Project ACTION in Portland. Project ACTION adds them to its mailing list which receives monthly updates, and to the growing list of those interested in the replication of this model program.

The Project Director was invited to present at the California Family Planning Leadership Conference in April 1993 as a guest expert in social marketing, where she presented to the entire assembly of 400 and led a two-hour workshop on applying social marketing to addressing teen risk behavior in American cities. The National AIDS Information and Education Program of the Federal Centers for Disease Control (CDC) also invited the project director to present on Project ACTION as a model condom promotion program. As a result of this meeting, the CDC is now considering providing funding for Project ACTION's final year of activities (1994) as a part of the new CDC national condom promotion program. The Chair of the Population and Family Planning Committee of the American Public Health Association invited the Project Director to present as a part of a panel on "Applying Lessons Learned from International Programs to Address U.S. Health Issues" at the October 1993 APHA Meeting. The Alan Guttmacher Institute has also invited the Project Director to present as a part of its national conference on Male Motivation for Family Planning in New York in September 1993.

3. POSSIBLE ADDITION OF "TEEN TO TEEN SKILLS WORKSHOPS"

In its evolving role as a resource to the Portland community, Project ACTION has been asked to be the organizer and focal point for "Teen to Teen Skills-Building Workshops." These workshops would be small-group (8-12 teens) and peer-led. The purpose of the workshops would be to work with teenagers to build their skills in the following areas:

- How to Recognize and Avoid Unwanted Sexual Situations
- How to Make Love Without Doing It-- Exploring Intimacy Without Sex
- How to Tell a Partner No (And Have Them Listen)
- You Do It-- Can You Talk About It? How to Communicate about Sex
- No Sex Without Latex: Using Condoms Effectively
- How and Where to Get More Information and Contraception

Project ACTION joins other organizations and institutions in recognizing the significant need for such skills-building workshops for teenagers. Despite a thorough

in-school educational curriculum dealing with sex and AIDS, these in-school programs are not helping teens build the practical skills that can help lead to safer behavior. The effectiveness of the media and condom social marketing interventions that Project ACTION is currently undertaking would be greatly enhanced by an interpersonal intervention which emphasizes the development of skills necessary for safer behavior.

Project ACTION worked with a coalition of community based organizations to explore the potential of developing and conducting "Teen to Teen Safer Sex Workshops" in a low-cost manner. A Summer Intern will work with a team of trained teen HIV/AIDS educators to develop the curricula and action plan for the workshops, and apply for funding to support the workshops through the Multnomah County Youth Service Commission.

PLANS FOR NEXT SIX MONTHS

Over the next six months, Project ACTION's focus will include the following:

1. MEDIA CAMPAIGN

The main focus of the media campaign activities over the next six months will be to continue to monitor broadcast of the Project ACTION public service announcements on local television; and to develop and broadcast additional longer format programs with interested television stations. The success of the cable program "TIME FOR ACTION" will help in sparking the interest of network television stations in producing HIV/AIDS prevention programs with Project ACTION. Project ACTION will also continue to distribute the 48-minute video excerpted from "TIME FOR ACTION" to interested community organizations.

2. CONDOM ACCESSIBILITY PROGRAM

Project ACTION aims to place the total 300 condom vending machines by the end of 1993. To do so, the project will launch a major lobbying effort with corporate owned fast-food restaurants and shopping malls in the Summer of 1993. The project will also consider expanding the targeted age-group to include 22-30, which would involve the placement of vending machines in bars and restaurants which exclude under-21. Project staff will continue to closely monitor the machines and remain in frequent contact with the business owners as machines are placed.

3. OUTCOME EVALUATION STUDY

The project will work with the Outcome Evaluation team to produce a Mid-Term Report in September 1993. In addition, the project will continue to monitor the execution of this study in monthly meetings with the evaluation team.

4. TEEN SAFER SEX WORKSHOPS

Project ACTION will work with a coalition of youth-serving and health organizations to explore the feasibility of conducting teen safer sex workshops as a part of Project ACTION's activities, and begin planning if it is deemed feasible.

5. REPLICATION

As the project enters its second grant-year, PSI and Project ACTION staff will take a closer look at the issue of if and how to replicate the Project ACTION model in other cities. Issues related to replication are:

a. Where Next?

Part of Project ACTION's success thus far is the fact that it is being undertaken in a community which is pro-active, supportive, and highly cooperative. Would this approach work anywhere? Would it work in any size city? Would it work in any media market? What are the other characteristics that would be important criteria in determining where else to try this social marketing approach?

b. Who Should Implement?

Project ACTION functions as an independent entity in Portland. In prospective sites for replicating this program, should PSI set up another independent office, or select an already existing agency or community-based organization to which it provides technical assistance to implement the activities? Should such a "host" organization be governmental or non-governmental?

c. What Kind of Assistance Should PSI Offer?

A significant factor in Project ACTION's effectiveness thus far is that it is based on PSI's 20 years of institutional experience in social marketing in many contexts and cultures. Now that this project is well underway, it appears from the outside as deceptively simple: television public service campaign and some condom vending machines. However, a tremendous amount of groundwork, including coalition-building, research, and market explorations was done beforehand and continues to be done, which makes this "simple" design work.

PSI needs to determine how it can offer its experience in the development and execution of a sound condom social marketing program to prospective implementors of this kind of program. Options include producing a "How To Kit," including sample agreements with advertising firms, research institutions, and condom vendors, sample media materials, and step-by-step guidance on how to develop and implement such a program. Another option would be to supplement a "How To Kit" with human

technical assistance provided by PSI personnel at key periods in the program development, implementation and evaluation.

In any case, there appears to be substantial interest among agencies and individuals nationwide in replicating the PSI/Project ACTION approach. The question of "How" will be a continuing focus of PSI and Project ACTION staff as the program matures and lessons can be gleaned from this unique experience.



ATTACHMENT A

Endorsements

The following organizations support Project ACTION's goals and activities and have written letters of endorsement:

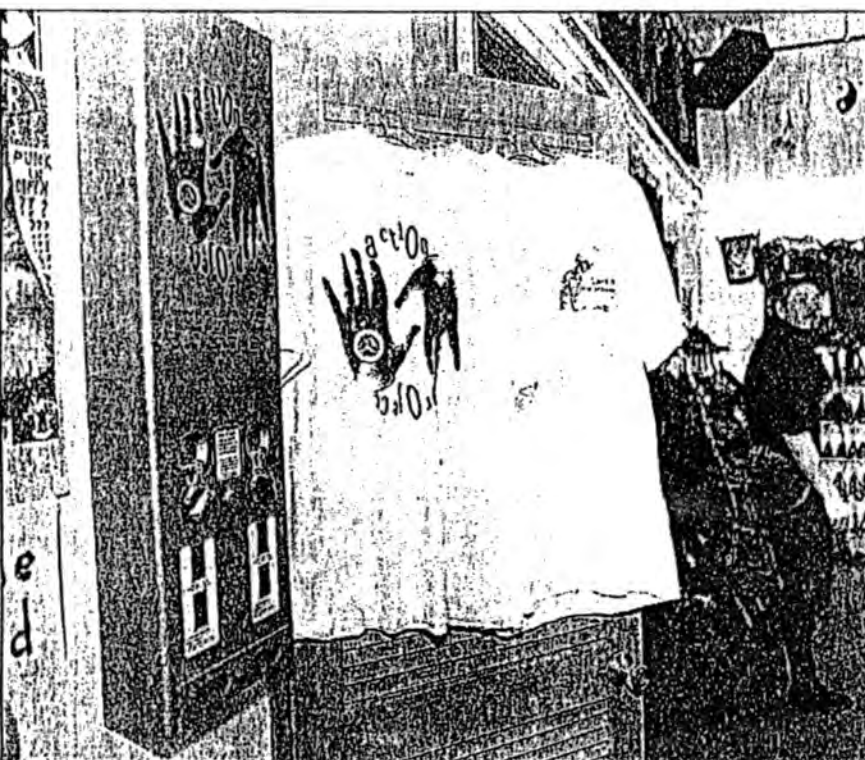
- ❖ National AIDS Information and Education Program of The Centers for Disease Control and Prevention, Department of Health and Human Services, Atlanta, GA
- ❖ Center for Population Options, Washington D.C.
- ❖ Oregon Department of Human Resources, Health Division
- ❖ Multnomah County Health Department
- ❖ Multnomah County Community Children & Youth Services Commission
- ❖ The Multnomah County Medical Society
- ❖ HIV/AIDS Commission of the Episcopal Diocese of Oregon
- ❖ Youth Ministries Commission of the Episcopal Diocese of Oregon
- ❖ Neighbors West/Northwest
- ❖ Eliot Neighborhood Association
- ❖ The Altrusa Club

ATTACHMENT B

WRITTEN AND RADIO PRESS ABOUT PROJECT ACTION

BUSINESS

Group fights AIDS by installing condom dispensers



KATHRYN SCOTT/The Oregonian

London Underground, a clothing store operated by Bill Berdan, is among the 100 Portland-area teen hot spots where Project Action has placed condom dispensers to help fight AIDS.

■ Project Action is placing the machines in several Portland-area teen hot spots to give protection to sexually active youths

By ELIZABETH WELLINGTON
of The Oregonian staff

In a rush? Need a condom? Try Winchell's Donut Shop.

The Winchell's on North Lombard Street recently became the home of the 100th condom dispenser to be installed in the Portland area by Project Action.

In an effort to increase access to condoms to help prevent the spread of AIDS among teenagers, Project Action is placing prophylactic dispensers in several of the metropolitan area's teen hot spots. Its goal is to have 300 machines.

Now, Portland's youths — and anybody else who wants them — can buy protection for a quarter at the same places where they purchase doughnuts, burgers, records and clothing.

The condoms are brands approved by the U.S. Food and Drug Administration as well as the Oregon State Board Pharmacy and sell for less than most. The price is usually between 50 and 75 cents.

"The fact is that the vast majority of teens are sexually active," said Julie Convisser, Project Action director. "We cannot abandon these young people because we may not approve of what they're doing — there is a fatal disease out there."

Project Action went to various locations with the idea, based on recommendations of people between the ages of 12 and 21.

"We listen to what the teen-agers say," said Nicole Isley, outreach specialist. "They drive this project."

Of more than 200 businesses approached, 55 said yes. Among the businesses that responded favorably are the downtown Burger King, Powell's bookstores and Macheezmo Mouse.

"I think that it's a good idea," said Peggy Love, manager of Winchell's. "Anything that would stop AIDS is worthwhile."

Project Action also has produced public service announcements and two-hour television presentations on AIDS prevention and realities. Its slogan: "Don't even think about having sex without a condom."

The condom dispensers are part of an advertising blitz with television commercials, signboards and T-shirts to promote healthy behavior among sexually active teens.

The first condom dispensers were installed in the X-Ray Cafe and in Big Bang, a downtown clothing store that sells new and used clothing, in December 1992.

In the seven months during which the condom machines have been in place, 10,000 have been sold. Managers and owners have not reported any problems.

The revenue from the condom sales is collected by Project Action and is put toward purchasing condoms and maintaining machines.

Many businesses have placed their machines in the bathrooms. They said that the dispensers were inappropriate elsewhere.

However, Bill Berdan, owner of London Underground, put his machine among his merchandise, where people can better see it.

"Why hide it in the bathroom?" Berdan said.

Teen sex high, condom use low, study says

■ Research shows 82 percent of youths surveyed are sexually active, but only 34 percent used condoms every time

By PATRICK O'NEILL

of The Oregonian staff

Researchers will try to influence more Portland young people to use condoms over the next two years in hopes of slowing the spread of the AIDS virus.

A preliminary report shows that 82 percent of the 508 people surveyed between the ages of 12 and 21 have had sex at least once. Almost a

third of them have had three to five partners. Another 23 percent have had six to 10 partners.

Researchers began interviewing young people anonymously in November, asking about the numbers of sexual partners and condom use. They found that while almost 60 percent used a condom with their steady partners during the last intercourse, only 34 percent used condoms every time.

Mike Stark, a research psychologist with the Multnomah County Health Division, said the figures show "a high degree of sexual activity" among young people. Stark, a researcher on the project, said the sur-

vey shows that while condom use is generally considered socially acceptable, not enough people are using them.

Health officials are worried.

The study was released by Project ACTION, a private nonprofit AIDS prevention program. The information was compiled by researchers from the Oregon Health Division, Multnomah County Health Division and Kaiser Permanente Center for Health Research.

The idea behind the report is to present a picture of the sexual behavior of young people so that researchers will know what effect televised public service announcements and condom availability has on con-

dom use.

Julie Convisser, Project ACTION director, said that in January five Portland television stations and both cable channels began airing a total of 200 minutes a month of public service announcements asking that teens who have sex use condoms.

The survey of young people will continue until December 1994 in an effort to see whether condom use increases.

Of the almost 1,800 AIDS cases reported in Oregon, only six have been among teen-agers. But one recent health division study indicates as many as 150 Oregon teenagers could be infected with the AIDS virus.

Have It Your Way

■ At the home of the Whopper, you can now get a **condom** to go with your condiments. Project Action, an HIV-AIDS prevention project, recently installed prophylactic machines in the **Burger King** located at West Burnside Street and Northwest Broadway.

The machines, which dispense 25-cent condoms in the restaurant's men's and women's restrooms, are identical to those Project Action has placed in about 50 other locations. Other condom outlets include Big Bang Clothing on Southwest Park Avenue, the X-Ray Cafe on Burnside, One Stop Records on Northeast Killingsworth Street and the Clinton Street Theater. The group hopes to locate 300 machines at favorite teen hangouts, based on surveys of Portland youth.

Julie Convisser, the project's director, said slightly less than half of the establishments approached have turned the group down. "Refusals are usually because of a personal reason

of the owners," she said.

Getting the machines in a high-profile national chain such as Burger King was considered a major breakthrough. "I think they're being pretty brave by letting us put one in," Convisser said.

Bill Ostrie of Restaurant Management Northwest, which owns all the Burger Kings in Portland, said, "We haven't had any complaints" about the condom dispensers. But he conceded that "the downtown restaurant is not reflective of our average mix of customers."

Restaurant Management Northwest has agreed to let Project Action survey customers in three of its other Burger Kings to gauge public reaction to condom machines. If the results are positive, Ostrie said, Burger King will encourage Project Action to approach all fast-food restaurants in the Portland. "No one firm wants to be perceived as being the one that is encouraging teenagers to have sex," he said. ■

Journalist with AIDS tries to walk fine line

Last fall, via closed-circuit TV, Tim Hillard told his colleagues at KATU (2) and Seattle's KOMO that he had AIDS.

As the Washington, D.C., bureau chief for Fisher Broadcasting, Hillard is a familiar face to viewers in the Northwest, appearing on the news most nights, covering the regional angle in the nation's capital.

This week, Hillard stopped off in Portland to present a series of public service announcements to local TV stations, hoping to help get the message out about AIDS prevention.

As a news reporter, Hillard knows he's delving into some uncharted territory.

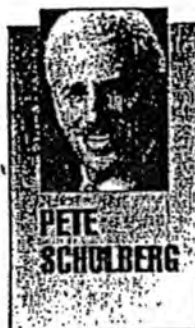
"There's a fine line between being an activist and being a journalist," said Hillard. "And sometimes it's difficult to walk that line."

So far, Hillard is pulling it off. But it doesn't really surprise me.

In the early '80s when we both regularly attended White House news conferences, Hillard was always ready to ask President Reagan about what was being done to fight the disease that, at the time, was just becoming a household word. Unfortunately, Hillard never got to ask the questions (the Northwest contingent's seats were always toward the back of the room, out of the president's earshot).

It was Hillard's contention that the administration was ignoring the disease that was soon to become an epidemic.

Later, during the 1988 presidential campaign, when Hillard pressed the candidates about AIDS, he'd often get strange looks and even stranger, and evasive, answers.



But things changed quickly, and during the last campaign, the AIDS issue was at the forefront of the national agenda.

According to Hillard, "the franker the discussion about AIDS and how to prevent it, the better. There are kids now who were born when AIDS was in full swing. They've grown up with AIDS. They've seen the

AIDS marches, the red ribbons, so they know what AIDS is all about. Now, it's time to teach prevention."

Hillard, who has tracked AIDS-prevention public service announcements from all over the country, says the most effective spots he's seen are airing right here in the Northwest.

Some of those spots were spearheaded by Project Action, in conjunction with a number of local agencies, and the 15- and 30-second announcements are airing on Portland TV stations.

The spots show condoms raining down on teenagers with the message, "Don't even think about sex without a condom."

Project Action is also in the process of installing about 300 condom machines in nightclubs, clothing stores, movie theaters, pizza parlors and other places frequented by teen-agers.

The focus on teen-agers appears to be warranted.

According to the Oregon Health Division, 50 percent of the teen-agers in Multnomah County are sexually active, but only 2 percent to 10 percent use condoms. There appears to be a big gap between what teen-agers know about AIDS and what they're doing to prevent themselves from contracting the disease.

Project Action's director, Julie Convisser, says KGW (8) and KPDX (49) have taken the lead on airing the condom announcements, but other stations, which may have been hesitant at first, are airing them as well. For its part, KGW is airing the spots when they think teen-agers will be watching — during the afternoon soap operas and late at night. According to Boyd Levet, KGW's public affairs director, no one has even called in to complain about the content.

The next step could be running the spots in prime time, but then it gets tricky. Time becomes extremely valuable, and although condom spots might be more effective during "Beverly Hills, 90210" or "Fresh Prince of Bel Air," it is doubtful that any station would give up valuable commercial time to drop in some nonpaying public service announcements.

Another unresolved topic: spots already produced involving two gay men. No Portland stations are airing those and there are no plans to do so.

In the meantime, Hillard is adamant that the safe sex message be relentless and that stations keep hammering away at the message. And he'll do his part in walking the line between living with AIDS and covering the news.

LETTERS

Condoms, made from latex, are inspected, protect against HIV

To the Editor: As the deputy state epidemiologist for the Oregon Health Division, I must clarify one of the items in the story, "AIDS prevention program aims to promote use of condoms" (Jan. 22). The quote from the National Parents League regarding the effectiveness of condoms is misinformation; it is not "common knowledge in medical circles" that condoms fail.

The Oregon Board of Pharmacy requires that condoms be tested before they can be sold either on the open shelf or in vending machines in our state, assuring that quality condoms are available to Oregonians.

Latex condoms are the single most-effective barrier against the virus that causes AIDS, as proven by 10 years of scientific research and testing by the U.S. Food and Drug Administration.

The virus cannot pass through the latex substance, which is why latex is used both for condom and surgical-glove production. In fact, in clinical tests, condoms are virtually 100 percent effective against HIV.

The reason condoms fail 2 percent to 10 percent of the time is due to incorrect usage, not failure of the latex itself. That is why the Oregon Health Division believes in teaching people who are at risk of HIV infection as well as other sexually transmitted diseases how to use a condom correctly.

The Oregon Health Division, the U.S. Centers for Disease Control and Prevention and the FDA recommend condoms for sexually active people as effective protection against the transmission of HIV and other sexually transmitted diseases. Not having sex is the single best way to avoid infection with HIV; however, for sexually active people, condoms are a potential life-saver.

KATRINA HEDBERG, M.D.
Oregon Health Division
Northeast Portland

The Oregonian

Founded Dec. 4, 1850. Established as a daily Feb. 4, 1861. The Sunday Oregonian established Dec. 4, 1881. Published daily and Sunday by the Oregonian Publishing Co.,
1320 S.W. Broadway, Portland, Oregon 97201

FRED A. STICKEL, President and Publisher

WILLIAM A. HILLIARD, Editor

PATRICK F. STICKEL, General Manager

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ROBERT M. LANDAUER, Editorial Page Editor

PATRICK L. MARLTON, Circulation Director

THURSDAY, JANUARY 28, 1993

Takin' it to the streets

*Portland businesses that install condom vending machines
deserve credit for helping to save teen lives*

The AIDS epidemic is too lethal for the public or health officials to pull their punches. That's why the new Project Action campaign in Portland — which aims at encouraging condom use among sexually active teen-agers — deserves wholehearted support.

Project Action is a privately funded activity that hopes to show the nation how to get high-risk teen-agers to practice safer sex. Condom dispensers will be placed at various businesses around the city frequented by teens. Television public-service spots will tell teens, "Don't even think about sex without a condom." Follow-up surveys will attempt to determine whether the program is successful.

If education were all it took, Oregon's teens would be well-protected against AIDS. But research shows that while teens know the science of AIDS, they fail to translate that knowledge into life-saving action.

About half of Oregon teens practice abstinence, the surest form of AIDS protection. But the other 50 percent are sexually active. That number climbs to 75 percent by the time teens are high-school seniors. And fewer than 10 percent of those teens use condoms regularly.

For them, neither the "no sex" message of abstinence nor the "safer sex" message of condom use is getting through.

Project Action hopes to reach those high-risk teens by marketing condoms in new ways. Vending machines will sell individual condoms for 25 cents apiece, about one-half to one-third the retail price. The condoms will come packaged with illustrated instructions, in English and Spanish.

One of the biggest barriers to condom use may be breached — the em-

barrassment even the most hip teen feels while buying condoms from a store clerk. The machines also make low-cost but highest-quality condoms available at locations most accessible to teens, with more instructions for use than most manufacturers provide.

Is it really wise to encourage teens to use condoms? Yes. When used correctly, condoms are very effective at preventing HIV infection. Dr. Thomas Arrowsmith-Lowe, the federal Food and Drug Administration's expert on barrier contraceptives and HIV, came to Portland to support the Project Action kickoff. He told The Oregonian editorial board that FDA research shows that surgeon's gloves, which are used to protect medical and dental patients from possible HIV infection during treatment, are more likely to fail than correctly used condoms.

Project Action needs more than cooperation from public-health officials to succeed. It needs the owners of Portland businesses to step forward and agree to install condom dispensers. That's a big request. But business owners who can say yes without violating their own religious or moral codes are truly performing a public service: They are helping to save lives.

Ideally, teens would play it safe and avoid sex altogether. But many teens are sexually active. That was as true in the uptight '50s as it is in the free-for-all '90s. This stubborn reality underscores the need to take the pragmatic course in fighting today's AIDS crisis.

Aggressive, creative marketing of condoms makes sense. So does aggressive, creative marketing of abstinence. Teen-agers need to hear all the messages that might save their lives.

AIDS-prevention program aims to promote use of condoms

By ABBY COLLINS-SEARS
of The Oregonian staff

"Don't even think about sex without a condom" will soon be flashing on television screens in Portland to let sexually active teens know about condom vending machines placed throughout the city.

Project Action, an HIV/AIDS prevention program in Portland, has launched a two-year campaign to prevent the spread of the disease among teens.

Their plan includes airing three 30-second public service announcements on local television stations; placing condom machines in sites throughout the city frequented by teens; and conducting a comprehensive evaluation to help other AIDS prevention programs across the country.

The public service announcements feature a direct message with an offbeat approach, said Julie Convisser, Project Action director. The slogan was designed by Borders, Perrin & Norrander advertising agency to help sexually active teens learn to equate sex with condoms.

The Oregon Health Division estimates that 50 percent of Multnomah County residents between the ages of 12 and 21 are sexually active but only 2 percent to 10 percent of them use condoms at all or most of the time, Convisser reported.

The group has recently installed about 20 condom machines but has plans to install 300 in the coming months at places such as dance clubs, clothing stores, movie theaters and fast-food outlets. Individual condoms can be purchased discreetly at these machines for 25 cents, one-half to one-third of the average retail cost, Convisser said.

The machines are important, Convisser said, because the fastest-growing group of people being diagnosed with acquired immune deficiency syndrome, both in Portland and nationwide, is young adults in their 20s who were infected with HIV during their teen years, according to the Oregon Health Division.

Twenty-year-old Amber Hop of the Cascade AIDS Project spoke in behalf of Project Action at a news conference Thursday promoting the use of condoms by teens. Hop explains that her sister, Shawn Hop, became sexually active at age 16, tested HIV-positive at age 20 and died last year, when she was 24.

"We can't just turn our heads any more and say to them, 'Just say no,' because even if half of them are listening, the other half are sexually active," Amber Hop said.

Members of the National Parents League disagree, saying the failure rate of condoms is 20 percent.

"It's common knowledge in medical circles," said a League official who declined to be quoted by name because of leadership changes pending in the organization.

He explained that condoms are porous to a degree and the virus that causes AIDS is many times smaller than the pores in the latex, allowing for possible infection.

"People aren't really being honest here. It's still like playing Russian roulette," he said.

Trying to halt the epidemic



Amber Hop, whose sister Shawn Hop died of causes related to AIDS, speaks Thursday at a news conference to announce a program attempting to stop the spread of the disease among teen-agers. Story on Page C3

PHOTO BY WILLIAM HAMILTON/The Oregonian

NORTHWEST LIVING

Try
talking
about
AIDS
to teens,
and
watch
their
eyes
glaze
over —
unless
the

TEEN ANGELS



JUSTIN: BUILDING AWARENESS

On World AIDS Day, Dec. 1, a small crowd gathered at the Big Bang clothing store in downtown Portland, site of the latest attempt to bring AIDS prevention to teens — a sleek gray condom vending machine, mounted discretely on the wall in one of the curtained dressing rooms.

Amid glowing lava lamps, tie-dyed T-shirts and a sale display of \$2 earrings, 15-year-old Justin Bolstad steps up to the microphone.

"The most disturbing news is the rise of AIDS among teen-agers," Justin says in a steady, insistent voice. He cites statistics on teen pregnancy and sexually transmitted diseases — two gauges of teen sexual activity.

"If you're not abstaining or are not willing to abstain, you should talk with someone about how you can practice sex in as safe a manner as possible. Know that ultimately the choice is yours. Make a choice you can live with."

For Justin, the Big Bang was a particularly receptive venue, filled with health officials, adult and teen AIDS educators and his parents, Dr. Orin and Catherine Bolstad, beaming near the back.

Some educators are using teens' responses to change the way they talk about AIDS. They are learning to speak the language of youth — one that avoids "adult" words such as "abstinence," that demands candor and gleans information from a sound-bite culture of television ads, billboards and T-shirt slogans:

- At Outside In, a Portland social service agency, homeless teens in the Gorilla Theater program learn about AIDS, then write and perform skits for other young people in out-of-school settings.

- Project Action plans to put 300 condom vending machines, like the one at the Big Bang, in places that teens frequent.

- Other groups are using television to transmit AIDS-prevention messages, with public service ads that feature teen-age actors or animated dancing condoms.

Teens are not a monolithic group, cautions Jim Clay of Multnomah County's youth program office. No single message or method will effectively reach young people of varying races, class backgrounds and sexual orientation.

Adults who want to talk with teen-agers about AIDS, he advises, need to start by listening to their stories.

Teen reality check

Are teen-agers worried about AIDS? Why do some still take risks with sex and drugs? What kind of message will have the most impact?

Four teens, all of whom have been involved in Project Action's efforts to place condom vending machines in teen hangouts, gathered recently for a lively, frank round-table discussion of AIDS. In the process, they also touched on family relationships, homophobia, fear and self-esteem. Here are excerpts from their conversation:



MULLEN

"I learned about AIDS when me and my sister were blowing up condoms. My grandmother said,

'Do you know what that is? If you don't use one of those when you're older, you can get AIDS.' I was 10 or 11 then.

"Kids take risks on a dare, or from peer pressure. They think, 'It won't happen to me. I'm too good for that.'

"What I consider when I'm going to do something dangerous, like smoking a cigarette, is — will I be accepted by my friends? Will I go to heaven? Will my parents still love me? Will my sister tell or not?

"Some guys brag in school about what they've done with girls. I said to one boy, 'Did you use a condom? Don't you know you can get AIDS 10 years from now?' I said to my boyfriend, 'If you love me truly, you will wait until I'm ready to have sex with you.'"

Destiny Mullen, age 13

"I live with my grandparents. My family doesn't talk about sex. They don't talk about AIDS. If they talk about drugs, they say, 'Don't do it.'



JOHNSON

I've learned everything about AIDS on my own.

"I'd listen better (to an AIDS educator) if it was somebody young with HIV. I don't listen to parents or authority figures. Adults talk about how it was 20 years ago.

"Condoms are too expensive. And embarrassing. I've been clean (of alcohol and drugs) for over eight months. But when I was using, I knew a lot of people who wouldn't care who they had sex with because they were too high or too drunk or too naive to worry about it.

"A lot of people don't want to face the fact that AIDS is out there. They put a wall up. They think (AIDS) will never happen to them. But it's always scared me."

Shannon Johnson, age 16

"Most of my friends are pretty smart. They have protected sex. They use condoms. But some kids still think AIDS is a 'gay disease.'

"At school, you have to talk to a nurse if you want condoms. You have to tell the nurse about your sex life. And then you only get one condom.

"When I was 13, my mom told me that if I got a girl pregnant, she'd disown me. Then later we watched this movie on TV about a gay couple. One of the men got AIDS. My mom said that to be gay was evil and only gay people got the disease.

O'NEILL

"Later she changed her views because I'm gay. She had to accept it.

"About a week ago, one of my friends died of AIDS."

Jack O'Neill, age 18

"A teen-ager will listen better to someone their own age. With an adult, they'll think: 'Oh, it's just another lecture.'

"Teen-agers think that if they only have sex with one or two people, they won't get AIDS. A lot of teen-agers don't know how to put on a condom correctly. I know a couple people who think scientists will come up with a cure soon.

"I first heard about AIDS when my friend told me she had HIV. That was three years ago.

"Some people think condoms promote sex. Actually, they don't. Whenever I think about condoms, I think about the dangers involved in sex, and sometimes I think twice. ... I think of all the consequences, good and bad. I think about how it's going to affect my life in the long run.

"Some of my friends are afraid of AIDS and don't want to admit that it's out there. Some are sexually active. I tell them they'd better be using a condom. My friends with HIV — I ask them what I can do to help."

Jennifer Trapp, age 16

Project places condom machines around Portland

By David Batterson
Special to the TRIANGLE

PORTLAND, Ore.—An innovative HIV/AIDS prevention plan called Project Action began placing 300 condom vending machines throughout Portland and Multnomah County in November. This is the first experiment in the U.S. of "social marketing" of condoms to youth considered at high risk for contracting HIV/AIDS.

To target young people between the ages of 12 and 21 years old, Project Action is locating the vending machines in Portland shopping malls, fast-food restaurants, video arcades, sports shops, video and music stores, fashion boutiques and other businesses popular with young consumers.

The first condom vending machine was placed in a teen clothing store called BIG BANG in downtown Portland. The event was part of Portland's observance of World AIDS Day on December 1.

Social marketing is a relatively recent approach in which commercial marketing techniques are used to achieve a social objective. In the case of condoms, manufacturers have not marketed them to segments of

the population considered at risk of becoming infected with HIV. The reason given is that it's not profitable enough for manufacturers.

Project director Julie Convisser said that Project Action's condoms will only cost a quarter apiece — about one-third of the normal retail price — in order to encourage their continual purchase.

Vending machines are placed in the rear of stores, and the machines carry a project action logo (made up of two hands, one of which holds a rolled-up condom). No ads or signs are permitted.

Project Action is sponsored by Population Services International (PSI), a non-profit health promotion organization based in Washington, D.C. The City of Portland was chosen for the pilot project by PSI because of positive responses from politicians, community leaders, the health community and a diverse local media.

The Portland advisory group for Project Action includes the Cascade AIDS Project, Oregon Coalition for Hispanic Advancement/HIV/AIDS Prevention, the Urban League, the HIV Prevention Program of Oregon State Health Division, the Multnomah

County Health Department, Cleveland and Marshall High Schools and state representative Gail Shibley, who is an open lesbian.

Due to the average incubation period of nine to ten years, it is assumed that many of the 20-to 29-year-olds in Oregon with AIDS became infected as teenagers. According to the Oregon State Health Division, 19 percent of all AIDS cases in Oregon are found in people between the ages of 20 and 29.

The state determined that 65 percent of 18-year-old men and 54 percent of 18-year-old women have had sexual intercourse. The rate of gonorrhea cases in Oregon has decreased but the rate among teens has increased, a state study found.

Bob McAllister, coordinator of the Oregon Health Division's HIV Prevention Program called Project Action "a serious rescue effort." McAllister said that "generally speaking, this group (teens and young adults) has the greatest level of denial" that they can be infected with HIV, and they are the least likely to use condoms now. He described the program as "an aggressive tactic that we think is needed. We hope their

efforts are successful; we feel quite positive about it."

The \$900,000 project is partially funded by the Henry J. Kaiser Family Foundation and the Public Welfare Foundation of Washington, D.C.

In addition to condom vending machines, Project Action is developing a TV-based motivational campaign to promote the consistent use of condoms by sexually active youth. The Portland advertising agency Borders, Perrin and Norrander is working on a *pro bono* basis to produce some of the materials. Other Portland ad firms, TV and radio stations are being asked to participate and produce public service announcements.

A third aspect of Project Action is a research evaluation on the effectiveness of the program. This will be done by the Oregon State Health Division, with assistance from Kaiser Permanente Center for Health Research.

Depending on evaluation findings, Project Action could be expanded to include other states and major cities. McAllister said that federal grants for the project were a possibility.

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Project Action to install condom dispensers for teens

Teen-agers too shy to buy a condom but facing a high risk of AIDS will be able to buy protection for just a quarter from dispensers being installed in shops and nightclubs around Portland.

"We're hoping it will be an example for the rest of the country to follow," Project Action Director Julie Convisser announced Tuesday in conjunction with World AIDS Day.

So far just two dispensers have been installed — one in a clothing store and another in a nightclub for teens — but eventually Project Action plans to have 300 in places where teen-agers will see them.

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The Oregonian

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5 THURSDAY

Condom-dispensing machines promote youthful promiscuity

To the Editor: I am writing in response to the Nov. 2 article, "Dispensing help in AIDS battle." Unfortunately, Portland has been selected as the nation's testing ground for putting condom-vending machines in kids' popular hang-out establishments.

Population Services International, an AIDS prevention group, hopes to flood the market with low-cost condoms and then launch a mass-media campaign encouraging their use. Businesses in our area are being sounded out about the placement of these machines in their establishments.

This campaign not only misses the mark of truly protecting our youth from the AIDS virus, but it could very well backfire to promote promiscuity and eventually increase the AIDS epidemic among our impressionable youth.

Any message short of abstinence from sex is shortchanging the best interests of our children. Let's send a message that will truly protect our youth. Exposing children to the mere presence of these condom-dispensing machines sends a message, all right, a message of approval. Candy, gum, snacks; what desirable things come from these vending machines.

I want better than that for my children and family. Families will not condone the presence of these machines in restaurants, record shops or any other place where our children will be exposed to their presence.

DEBBIE GREEN
Southeast Portland

LIVING

Health & Fitness • Entertainment • Television • Advice

Dispensing help in AIDS battle

Condom vending machines target youth market with safe-sex message



By KRISTIAN FODEN-VENCIL
Special writer, The Oregonian

The latest Nirvana CD won't be the only thing teen-agers may soon be able to pick up at the local music store.

By January, condom-vending machines may become as much a part of malls and shops where kids hang out as the trendy jeans or fast food for sale.

Portland businesses aimed at the youth market are being asked to join a first "social marketing" experiment in the nation involving condom distribution.

The AIDS-prevention group Population Services International revealed in April that it hoped to flood the market with cut-price condoms, then launch a mass-media campaign encouraging their use.

Operatives for the experiment, called Project Action, recently have been contacting business associations to sound out retailers about placing the machines in their shops.

"We want to work with retailers who have a youth clientele — like sports stores and fast-food restaurants, because that's where the kids are going to be," project director Julie Convisser told a recent meeting of the Hawthorne Boulevard Business Association.

The business association is mulling the proposal. "Personally I feel that it is up to individual



The Oregonian/DANA E. OLSEN

Julie Convisser is urging youth-oriented businesses to install condom machines. At left: Project Action logo.

businesses whether it is suitable for them to have one of these machines," says Monte Jensen, the group's secretary. "But any idea that discourages the spread of this disease has got to be good."

Project organizers have kept a low profile since the plan was first announced, fearing that media attention might interfere with lobbying the business groups. The project also is proceeding amid the contentious

Measure 9 campaign on homosexual rights.

And the project has its critics.

"It's just going to promote teen sex," says Scott Lively, spokesman for the conservative Oregon Citizens Alliance. "It's a bad day when we abandon our children like this." But Lively stops short of saying whether the OCA will launch any protests.

Project Action envisions placing 300 condom-vending machines — at a cost of about \$900,000 — in the city's malls, record shops and fashion boutiques.

The idea is that youngsters have easy and inexpensive access to condoms. Project Action cites estimates from with the Oregon Department of Human Resources that more than half of youths between 12 and 21 are sexually active and at risk of contracting the human immunodeficiency virus that causes AIDS.

But Convisser is careful to say that promoting sexual abstinence is key to the project. "We're targeting those kids who are considered to be at the highest risk of infection," she says, including those from troubled homes, with drug or criminal problems or with a history of sexually transmitted diseases.

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CONDOMS, Page B5

Condoms: Malls to have machines

■ Continued from Page B1

The vending machines are planned to be installed at the rear of stores, with the decision on whether educational materials will be handed out to young customers left to the discretion of retailers.

"We will be charging a quarter a piece" for condoms, about a third of the usual retail price, says Convisser, following the idea that consumers place more value on something they buy.

The vending machines will display the Project Action logo, but officials say no explicit graphics will be displayed.

Project Action has consulted with 11 youth organizations, from homelessness groups to gangs, asking whether teens feel adequately served by the current system.

"We did not force the vending-machine idea on them," says Convisser. "It came up naturally. Kids were concerned about AIDS and teen pregnancies and how to practice safe sex."

To Jerry Fest, "the jury is still out on whether it's going to face strong protest. But the director for street-youth services at Willamette Bridge and a member of the project's advisory board adds, "there is also a strong degree of support within the community" for the project.

Fest says he is impressed that Project Action is concentrating on listening to what the youngsters want before just putting their plan into action. "They're not just doing something for the kids, they're involving them in the whole process. For me, that empowering experience is almost more important than the concrete process of putting the machines out there."

Convisser says the project is still in its infancy and that no concrete plans will be finalized before talks with businesses end late this month.

She expresses optimism with the public response so far. "We don't feel that we're on the opposite side to anyone else. The vast majority of people care about AIDS and we are

not here for a political purpose, we're here for the kids."

Some critics aren't so sure.

"The whole idea is ridiculous," says Suzanne Gallagher, president of the Oregon branch of Eagle Forum. "It's just going to encourage some kids. Why can't we give them an abstinence message instead? I've spoken to students at Lewis and Clark who haven't even heard the abstinence message before."

Project Action hopes to get its message out after the machines are installed in January — in time for a massive media campaign. Convisser says her group is talking with local radio and television stations and advertising agencies to secure free public service announcements, which will include "dramas and youth forum programs."

The campaign will be evaluated over two-and-a-half years by the state's health department and Kaiser Permanente Center for Health Research. "We want to see what lessons are learned here," Convisser says, "before making any decisions about going elsewhere" in the nation.

Organizers say Portland was chosen over other American cities because of the positive reaction from politicians, health officials and community leaders. They also say the openness of local media drew their attention as did the abundance of experienced youth-serving agencies.

The project has a group of advisors, including representatives from Cleveland and Marshall high schools, Multnomah County Health Department, the American Red Cross, the Oregon Health Division and several local church groups, and from state Rep. Gail Shibley.

Project Action is an arm of the Washington-based, non-profit Population Services International. Established in 1970, it has worked in 22 countries distributing condoms, oral re-hydration solutions and oral contraceptives. The group describes its aims as "promoting healthy behavior and providing essential health products at affordable prices to all income groups."

these community action committees call 796-3126.

NW Broadway on Nov. 1. The social starts at 5:30 pm, and the auction is scheduled for 7 pm.

AIDS prevention for kids

Project Action has just opened an office in Portland to combat the spread of HIV among youth. According to Director Julie Convisser, the group plans to work with the local business community and to use the media to alert young people to the risk of HIV and what they can do to stay safe. Project Action also wants to work with other health agencies to evaluate the impact of their safe-sex campaign on youth. Convisser says the project will target all at-risk youth, including gay youth. Specific plans are still being developed and won't be available until mid-November.

Irene Hislop

JUST OUT
November, Vol 9 No. 13

SECTION

D

THURSDAY,
SEPT. 24, 1992

The Oregonian

METRO

Health group to 'market' AIDS prevention in Portland

An international health organization intends to make condoms available at a quarter apiece and to flood Portland with television ads promoting their use as part of a massive AIDS-prevention project.

Population Services International, a nonprofit group based in Washington, has opened an office in downtown Portland and is preparing to launch the prevention campaign by the end of the year.

Project Action in Portland will be the first test in any American city of a strategy known as "social marketing" to prevent the spread of AIDS among young people.

Can U.S. teen-agers become SMART about using condoms?

By Jeanne Sharp

If social marketing can sell condoms and change sexual practices in Zaire, will it work in the U. S. ?

Population Services International (PSI) believes it will. To prove it, PSI has dispatched the director of its Mass Media Project in Zaire, Julie Convisser, to Portland, Ore., to establish a pilot beachhead.

Portland was chosen, explains Convisser, through a set of feasibility criteria that included media receptiveness, acceptability of condom ads and information on local radio and television, a favorable political climate, a pro-active health community, and an absence of other activists.

"If we went to the places in the country where AIDS is rampant, we would have to compete with a lot of other programs, theories and activities," explains Convisser. "That would make it more difficult to determine what effect [the pilot] Project SMART had within our target population."

In Zaire, Convisser was able to document several key information, education and communication (IEC) project outcomes.

1. Awareness increased regarding asymptomatic carriers. The ratio of people who believed that AIDS can be avoided simply by not having sexual contact with people who "look sick" dropped from 56% to 42%.

2. Abstinence and fidelity increased. Over the course of the project, the number of people who claimed to have

changed their behavior to avoid risk of AIDS by "becoming mutually faithful" increased significantly from 28.9% to 45.7%.

3. Knowledge and acceptance of the role of condoms in AIDS prevention grew. Eleven percent more people knew about condoms at the completion of the project than before, while 13% named condoms as their first defense against the

'We need to present the message that condoms are cool; condoms are fun; condoms are sexy.'

disease, up from only 5%.

4. Condom use for AIDS prevention multiplied by five. While only 3.6% of the people would use condoms to prevent AIDS at the start of the project, at the end, 18.8% responded that they had changed their behavior. PSI's Condom Social Marketing Project saw a 1,000% increase in sales over the two and a half years of the IEC campaign — from 900,000 in 1988 to 15 million in the first eight months of 1991.

Will the youth of America respond as favorably to the messages of social marketing as the adults of Zaire? Convisser is targeting specific populations at particular risk of AIDS and designing a campaign that will hone the message to meet the mores of the group.

The SMART Project will not try to reach all youth in Portland. It targets the 12-21 year olds in high-risk situations, including those who are teen parents, drug users, and/or have already had sexu-

out to teens who may be homeless, gay, involved in commercial sex or live in seriously dysfunctional homes.

"We need to reach the kids who may be alienated from other sources of information about AIDS, like school or home," she explains.

In the Portland area, this population is largely white, although approximately 10% is black, while another 5% is Hispanic. PSI's Project SMART will target messages to fit the specific ethnic make-up of the city.

"Multi-cultural campaigns are nothing new to PSI," Convisser declares. "We are working in 21 countries. It's old hat for us to be completely conscious that we are addressing a lot of different ethnic cultures."

The project encompasses three components. The first, motivation, is the most complex. "There is a gap between knowledge and action," she notes. "Studies from other organizations, such as the Centers for Disease Control, show that people are knowledgeable, but afraid." In other words, they are fearful that to take action would be to admit vulnerability.

Therefore, PSI will eschew the popular awareness campaign to focus on one that provokes action. That action specifically is to get sexually active youths to use condoms consistently and correctly.

Television is the greatest source of instruction among the target population. PSI's campaign will rest heavily on TV spots, programs and talk shows that present a balanced message about wearing condoms.

"It's not enough to say that condoms are good for you," says Convisser. "We need to present the message that condoms are cool; condoms are fun; condoms are sexy."

A series of spots is being prepared *pro-bono* by a regional ad firm, Borders-Perrin-Norrander. In addition, independent producers and television stations are

ming, such as half-hour and hour "after school specials." The local affiliate of the Fox Network will include discussions on condom use in a talk show for area teens.

The second component is designed to increase accessibility. Condoms have been available in schools since March 1992.

However, this does not address the bulk of the target population who are generally disaffected and disinterested in school.

"This is a classic marketing problem," asserts Convisser. "You have to remove as many barriers between the product and the target audience as possible." Those barriers, when translated into this project, are embarrassment, convenience and price. The answer, according to Project SMART, is vending machines.

Dispensing condoms through machines is anonymous and without

'Studies have shown that young people are more likely to use a condom that they pay for, but they're not willing to pay more than a quarter.'

embarrassment. Convenience will be assured by mapping the areas of the city that most teens frequent. Convisser wants more than 300 machines in place, and she's developed an outreach program to retailers to secure the placements in the most advantageous spots.

As for cost, the project will strike an

WHO report: Brighter future

Despite continually grim STD and unwanted pregnancy statistics, the

asymptomatic carriers. The ratio of people who believed that AIDS can be avoided simply by not having sexual contact with people who "look sick" dropped from 56% to 42%.

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*use a condom with
they pay for, but
they're not willing
to pay more than a
quarter.'*

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As for cost, the project will strike an
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WHO report: Brighter future

Despite continually grim STD and unwanted pregnancy statistics, the World Health Organization (WHO) has reported that access to contraception has increased rapidly in the last 10 years, giving women more control over their own fertility.

The new report, *Reproductive Health: A Key to Brighter Future*, purports to be the most comprehensive international study to date on reproductive health and is based on the findings of medical institutes worldwide. The study reveals that couples in industrialized nations use contraception in about 70% of all sex acts while women in developing countries have reduced the average number of children they have from 6.1 in 1965-1970 to 3.9 in 1985-1990.

The WHO study identified female sterilization as the most widespread form of contraception, accounting for 26% of all methods. Male sterilization placed second at 19% with oral contraceptives third at 15%.

Not all the news was encouraging, however, as the report concluded that 350,000 new cases of STDs are contracted every day. About 150,000 unwanted pregnancies end in abortion daily, the report maintains, while two to four women die each minute worldwide because of complications during pregnancy or childbirth.

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over

It worked in Zaire, but can American teen-agers get SMART?

(Continued from page 17)

agreement with a brand-name manufacturer of condoms and an independent operator of condom vending machines to stock and service the machines.

In exchange for this exclusive business, the companies must agree to sell the condoms at no more than 25 cents apiece. "Studies have shown that young people are more likely to use a condom that they pay for," says Convisser, "but they're not willing to pay more than a quarter."

The final stage, research and evaluation, will be conducted by the Oregon State Department of Health in collaboration with the Kaiser Permanente Center for Health Research. Both groups have extensive experience in assessing health

intervention outcomes.

The project guidelines call for a sam-

The difference between SMART in Oregon and Zaire is 'In Zaire, we had to create the mass communications before we began.'

pling of the target population to determine knowledge, attitudes, and sexual practices both before and after the imple-

mentation of Project SMART, and with both target and non-target youth. "And, of course, we have another evaluation in the concrete number of sales," adds the project director.

Project SMART has drawn a sizable share of community and corporate support. The initial design phase of the project was supported, in part, by the Morih Fund.

The Public Welfare Foundation extended grants for both design and implementation, while the Henry J. Kaiser and Family Foundation is a major contributor to the implementation phase. Other grants are anticipated during Fall 1992 and Winter 1993.

In addition, community organizations, businesses, agencies and individuals are

lending support and expertise to the project.

A local advisory committee of eight to 10 people will be in place by October, Convisser promises, while a twin committee with a national perspective has been established by the PSI office in Washington, D. C. Convisser's timetable calls for having the vending machine sites identified by November and TV spots on the air by January.

The ambitious schedule leaves her undaunted. The major difference between the successful project in Zaire and the developing one in Portland is that "all the communications networks are in place in Portland," she explains. "In Zaire, we had to create the mass communications before we could even begin."

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The Oregonian
METRO

SECTION

D

SATURDAY, APRIL 11, 1992

International group plans Portland AIDS project

□ The extensive, two-year operation would combine condom distribution with saturation mass media advertisements

By GORDON OLIVER
of The Oregonian staff

An international health organization is preparing to launch a massive AIDS prevention project in Portland that would make condoms available at bargain prices and flood the city with television ads promoting their use.

If the project becomes a reality, Portland would become the first American city to test a strategy called "social marketing" to prevent the spread of AIDS among young people. The strategy, first tried in the African nation of Zaire, taps the mass media to promote condom use and then makes condoms widely available in places where teenagers congregate.

Condoms would be sold in vending machines rather than distributed for free, following a philosophy that people place more value on a product they buy. The price would be 25 cents each — one-third of the typical price.

Population Services International, a non-profit group based in Washington, D.C., has been preparing the project for two months. Julie Convisser, director of the Portland project and former director of the Zaire project, predicts sales of 750,000 to 1 million condoms each year of the two-year project.

By comparison, the Portland School District expects to distribute only 400 condoms a year through a program it began last month in its 10 high schools.

"We want to increase the general acceptability of condoms as a health product," Convisser said. "When people have health problems, they use a health product. We want to support that way of thinking."

The Portland project is expected to cost about \$900,000 over two years. Local donations of television and radio air time, advertising agency services and other services would have an "in kind" value of about \$3 million, Convisser said.

The project is expected to generate controversy. But Convisser said she has been surprised so far by the lack of opposition from those who have learned about her organization's plans. She said she has not solicited comments from potential opponents.

Population Services International has worked in health and family planning programs in Third World countries for two decades. The Portland program would be the

" We want to increase the general acceptability of condoms as a health product.

Julie Convisser,
Portland project director



first test of its "social marketing" philosophy in the United States. Convisser said the organization, financed by governments and

private foundations, is awaiting final word from several foundations that are likely to fund the Portland program.

Convisser said her organization focused on the Northwest and then selected Portland because local leaders supported the project, and because citizens had already been exposed to advertisements linking condom use with AIDS prevention. The Oregon Health Division sponsored the public service ad campaigns in 1987 and 1989, making Oregon one of only four states at the time to mention condoms in an AIDS awareness campaign, she said.

Convisser has made three trips to Portland and met with about 50 public and private health officials, youth agency employees, minority and religious group representatives, and television station executives

Please turn to
PROJECT, Page D8

Project: Local backing main reason for decision

■ Continued from Page D1

Convisser and another researcher also met with 99 teen-agers considered at high risk of getting AIDS. These teen-agers were divided into 11 "focus groups" to discuss their attitudes about sex and condom use.

Convisser said she would ask state Health Division officials about a contract that would pay the state to evaluate the project.

Population Services International claims a direct correlation between its media campaign about AIDS in Zaire and increased public acceptance there of abstinence, fidelity and use of condoms.

Robert O. McAllister, HIV program manager for the state Health Division, and Multnomah County Health Division director Bill Odegaard have both written letters supporting the project.

Fred Kroger, director of the national AIDS information and education program at the Centers for Disease Control, also wrote to Convisser last summer in support of a "social marketing" AIDS prevention program in an American city. The federal agency later last year killed plans to run AIDS prevention ads nationally using celebrities who would encourage condom use. Kroger told The Washington Post that those ads were ineffective, although others suspect that the agency was afraid of controversy.

Experts say — and studies have shown — that condoms, when used properly, are 95 percent to 99 percent effective in stopping the spread of the human immunodeficiency virus, which causes AIDS.

The Population Research International program would differ in size and philosophy from the one offered in Portland high schools. Students who request free condoms from the county-run clinics in high schools must describe their sexual histories to health workers, consider seeking parental consent, and undergo counseling on the merits of abstinence and the dangers of sex.

Portland school Superintendent Matthew Prophet said he was unaware of the proposed project. He said he would neither support nor criticize a condom distribution program that goes further with a scope broader than the one now under way in high schools.

Howard Klink, the Multnomah County health division's public affairs director, said both the teen clinic and the Population Services International program are needed in the fight against AIDS.

"There's no doubt we have a few more hoops for (teens) to jump through before they get condoms in our clinics, but that's not to say that one approach is more necessary than the other," he said.

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8:03 AM

NEWSCASTER: New television public service announcements hit in the air in Portland soon to educate teens about AIDs. Its sponsors want to find out how well the education program works.

JULIE CONVISSER, PROJECT ACTION DIRECTOR: And that's being played out by the Oregon State Health Division and the Kaiser-Permanente Center for health research; and it involves the interview of 2200 teenagers over the life of the project.

NEWSCASTER: "Project Action" Director Julie Convisser says teens helped design the TV campaign and decide where to place low-cost condom vending machines so that teens will see them.

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BOX 1593
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97207

NEW AIDS FIGHT MOUNTED

KXL RADIO

22 JANUARY 1993

7:53 AM

NEWSCASTER: Teenagers will soon start seeing condom dispensary machines at local Portland hangouts. Teenagers are the fastest growing segment of the AIDS-infected population, not only here in Portland but nationwide. Portlander Amber Hop whose sister died after being infected by a boyfriend with AIDS says teenagers aren't getting the message.

AMBER HOP, PORTLAND TEENAGER: I feel that "Project Action" is a positive step towards getting teens' attention, and then we can talk to them about abstinence and condoms and safer sex.

NEWSCASTER: The project uses TV ads and 300 condom machines placed at area businesses frequented by kids. The PSI is a non-profit group out of Washington, D.C.

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(p 517)

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MODEL HIV PREVENTION PROJECT UNVEILED

KEX RADIO

22 JANUARY 1993

6:35 AM

NEWSCASTER: Portland has been chosen for a two year model program that promotes condom use among high risk teenagers. It will include television spots aimed at the teen audience and condom vending machines in 150 businesses frequented by teenagers. Julie Convisser is director of the program called "Project Action."

JULIE CONVISSER, PROJECT ACTION DIRECTOR: As a machine, we hope we'll break through the barriers of embarrassment, convenience and cost that a lot of teenagers are facing, who are sexually active and who want to use condoms.

NEWSCASTER: Convisser says 150 sights include pizza restaurants, clubs, a bowling alley and a theater. The machines are already installed at 12 of the sites.

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97207

NEW ANTI-HIV PROGRAM

KXL RADIO

21 JANUARY 1993

4:54 PM

ANNOUNCER: Don't even think about sex without a condom. Find this machine and you'll find a condom.

NEWSCASTER: That's one of the public service ads that began airing today advising teenagers to use condoms so they do not contract the deadly AIDs virus. "Project Action" has two parts, the TV announcements and condom machines installed at 100 Portland locations frequented by kids.

JULIE CONVISSER, PROJECT ACTION DIRECTOR: As a machine, we hope we'll break through the barriers of embarrassment, convenience and cost that a lot of teenagers are facing who are sexually active and who want to use condoms.

NEWSCASTER: Project Director Julie Convisser says the condoms will be sold for 25 cents a piece. She says teens are the fastest growing segment of the AIDs infected population, both in Portland and across the country. The demonstration project is funded by Population Services International in Washington, D.C.

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MOBA MEDIA INC***Oregon's broadcast monitoring service*****(503) 223-1677****BOX 1593****PORTLAND OR****97207****NW HIV/AIDS WAR****KEX RADIO****21 JANUARY 1993****4:37 PM**

NEWSCASTER: An official of the Food and Drug Administration is in Portland to kick off an HIV/AIDS prevention program. Doctor Thomas Aerosmith Lowe says the nation is at war with one million casualties.

DOCTOR THOMAS AEROSMITH LOWE: I don't mean the conflict in the Persian Gulf. I mean we are truly at war with an enemy that has the potential of destroying our nation, and that's HIV.

NEWSCASTER: Doctor Lowe says the best available weapon is education. As part of the model program called "Project Action", 300 condom machines will be placed in 150 Portland businesses that cater to teenagers. Public service spots on TV will be used as part of the education program.

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(p. 517)

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PROJECT ACTION HERE

OREGON PUBLIC BROADCASTING RADIO

25 JANUARY 1993

(Broadcast on National Public
Radio's "All Things Considered"
on January 25, 1993)

4:51 PM

NEWSCASTER: Many teens in the Portland Metropolitan area learn about AIDS and other sexually transmitted diseases in school, and many school health offices in Oregon now provide teens with condoms. But the school condom programs have been controversial, and kids often have to get permission from their parents to get condoms from school clinics. A new private program being launched in Portland is trying to get wider distribution for condoms by putting them in places where kids hang out after school: in fast food restaurants, shopping malls, and teen night clubs. Henry Sessions reports.

REPORTER HENRY SESSIONS: Like many people his age and older, 27-year-old Ben Arthur Ellis of Portland had to go to the local drugstore to buy his first condoms.

BEN ARTHUR ELLIS: I remember a couple of bad incidents in my youth; I had to buy some from an Iranian man who didn't know what I was talking about, and I had to point and explain, and the line grew behind me, and it was pretty awkward, and I almost blew off the whole thing. But I'm a wise person.

REPORTER: Now, Ellis is the co-owner of the X-Ray Cafe, one of Portland's biggest youth hangouts. Every night, dozens of black-clad punk rockers, downtown street kids, and a few adventurous suburban teens congregate here. They can buy non-alcoholic drinks, snacks, and now, 25-cent condoms from a vending machine. The machines were installed by Project Action, an experimental AIDS prevention project for teens. Ellis says a large percentage of the kids who come to his club are sexually active.

ELLIS: It's idiotic to tell them that they shouldn't have knowledge of sexuality. You know, in the olden days that might have been one method to keep kids from having babies or something, or to keep kids from being dirty. Maybe that worked.. probably not then, either. But these days, it's just not even worth the risk. You know, I mean, sex happens, and it's probably good to have condoms available if sex is happening.

REPORTER: Oregon health officials estimate half of all teens in the state are sexually active, and nationwide, two-thirds of all cases of AIDS and other sexually transmitted diseases affect people under 25. Project Action plans to flood Portland media with information about AIDS and condoms and to install 300 condom vending machines in the area. Project director Julie Convisser.

(more)

JULIE CONVISSER, PROJECT ACTION: The marketing of condoms in this country has lagged far behind marketing sneakers or marketing pet rocks, if that's what you're asking. It certainly has, and in that sense, we are using the American approach for a product that has been in some sense neglected, which is, of course, ironic, because in addition to being like just any other product, it's a life-saving product.

REPORTER: Project Action grew out of family planning and AIDS prevention programs throughout the Third World, run by the project's parent program, Population Services International, or PSI. Before coming to Portland, Convisser worked on a similar campaign in Zaire, where according to PSI, condom sales soared and cases of HIV, the virus that causes AIDS, dropped in the first few years after the project started.

Now, PSI wants to get a foothold in the U.S. Convisser says they picked Portland for the pilot project because local health officials ran a similar campaign four years ago and because local television stations have been receptive to running AIDS prevention spots in the past. The project is getting an enthusiastic response, and some research help from the State Health Division. Robert McAllister, director of the state's HIV program, says Project Action couldn't have arrived at a better time.

ROBERT McALLISTER, OREGON HEALTH DIVISION: Had Project Action not come along, we would have had to use other state or local resources in order to do precisely what they're doing. And so we felt like they were sort of a white knight that appeared on the scene at just the right time for us.

REPORTER: McAllister and other state health officials say the project is targeting kids the state is most concerned about: those who are sexually active but who have been afraid or unwilling to buy condoms. But some business owners have turned down Project Action's condom machines. They worried the machines would attract vandals, and one was concerned they might hurt his business' image. Director Julie Convisser says that's exactly the impression Project Action was set up to get rid of.

CONVISSER: There's been such a strange of load of things associated with condoms. At this point I think there are teenagers who are unaware that it is a non-prescription item, and that it is made available to them, and increasingly so, as a means for them to have sex in a safe manner. That's exactly what we're trying to do, is sort of take the product back from all the stories and mystique and curses put on it, and just put it out there in a way that people who need it can get to it.

REPORTER: Project Action and the State Health Division are monitoring how many condoms are being bought from the machines. At the end of the two-and-a-half year experiment, the project plans to turn its vending machines over to a local company. Convisser says it's hoped information gathered here can be used in other cities to launch similar AIDS prevention programs for teens. For OPB, I'm Henry Sessions.

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MILESTONE FOR CONDOM PROJECT

KEX RADIO PORTLAND

28 JULY 1993

8:01 AM

NEWSCASTER: An AIDS prevention project in Portland is celebrating a landmark event. KEX's Bill Cooper has a live report.

REPORTER BILL COOPER: Project Action has spent the past seven months placing condom vending machines in businesses frequented by teenagers. Spokeswoman Julie Convaser says the one-hundredth machine is being installed today.

PROJECT ACTION SPOKESWOMAN JULIE CONVASER: We really feel this is a landmark in our program. A ... this is the ... the end of the first year, and a ... to have placed a hundred machines in a year and to have a ... distribute through those machines ten thousand condoms to date a ... we feel is ... is a contribution in terms of helping young people who are sexually active make sure they're being safe.

REPORTER: A recent Oregon Health Division survey found that one in two Oregon high school students are sexually active. Convaser says the condom machines now in 55 area businesses allowed teens who need to buy condoms an affordable price and to avoid the embarrassment of buying them in a store. Project Action's goal is to place a total three-hundred machines by the end of the year.

In northeast Portland with a live report, Bill Cooper, 1190KEX News.

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CONDOM PROGRAM SUCCESSFUL

KXL RADIO PORTLAND

28 JULY 1993

8:23 AM

NEWSCASTER: Organizers of a project to distribute condoms to teens are claiming success today. KXL's Linc Mann has a live report from northeast Portland. Linc, where are you and what are you doing?

REPORTER LINC MANN: Well, a ... a group called Project Action started a project in December to [indistinguishable] condom dispensing machines in places where Portland teenagers congregate, like this Winchell's Donut Shop where I'm located now at 102nd and Northeast Glisan. The director of this project, Julie Convaser, says teenagers were actually surveyed about where they would like to see these vending machines be located.

DIRECTOR JULIE CONVASER: One of the big problems that teens face a ... is getting condoms when and where they need them for a price they can afford. And given that at a minimum one in two teens are sexually active, we feel in face of AIDS it's critical that we help them get better access.

REPORTER: [Indistinguishable] Project Action is a ... putting up its one-hundredth condom vending machine. Convaser says these machines a ... dispensed about ten thousand condoms since December.

Reporting live from northeast Portland, Linc Mann, KXL Newsradio 750.

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CONDOM PROGRAM WORKING

KXL RADIO PORTLAND

28 JULY 1993

4:42 PM

NEWSCASTER: A Portland organization says it's working to stop the spread of AIDS among teenagers by making condoms more readily available. Project Action organizer Julie Convaser is targeting young people between the ages of 12 and 21.

PROJECT ACTION ORGANIZER JULIE CONVASER: Which is one of the fastest growing newly infected populations. A ... and as one of the things we do a ... we place condom vending machines in locations that teenagers tell us they want the machines.

NEWSCASTER: Today Project Action celebrated placement of its one-hundredth condom di ... vending machine. Convaser says the machines have dispensed about ten thousand condoms since December.

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ATTACHMENT C

Project ACTION Condom Vending Machine Sites

OUTER EAST SIDE / GRESHAM

Planned Parenthood (Gresham)
1575 NE Division

Rose Bowl
3800 SE 164th

U.R.S. Club
536 SE 78th

SOUTHEAST PORTLAND

Mt. Scott Community Center
5530 SE 72nd

Franklin Market
5008 SE Woodward

One With Heart
4231 SE Hawthorne

La Luna
221 SE 9th

Powell's Books
3747 SE Hawthorne

Macheesmo Mouse
3553 SE Hawthorne

Think Good Thoughts
3344 SE Hawthorne

Cafe Lena
2239 SE Hawthorne

City Skate
520 SE Salmon

Music Millennium
3158 E. Burnside

Clinton Street Theater
2522 SE Clinton

Directions Hair Salon
523 SE Momson

Sellwood Community Ctr.
1436 SE Spokane

NORTH / NORTHEAST PORTLAND

Montavilla Community Ctr.
8219 NE Glisan

American Dream Pizza
4620 NE Glisan

PIC Youth Employ. Institute
1704 NE 26th

One Stop Records
1615 NE Killingsworth

Northeast YWCA
5830 NE M.L.K.

Matt Dishman Pool
77 NE Knott

O.S. Varieties
1538 NE Alberta

Alberta & 28th St. Market
2817 NE Alberta

Columbia Pool
7701 N. Chautauqua

University Community Ctr.
9009 N. Foss

Peninsula Park Comm. Ctr.
700 N. Portland

Dairy Queen
6933 N. Lombard

St. John's Community Ctr.
8427 N. Central

YWCA of St. John's
8010 N. Charleston

DOWNTOWN PORTLAND

Hot Lips Pizza
1909 SW 6th Ave.

YWCA Downtown
1111 SW 10th Ave.

Coffee People
737 SW Salmon

Commodore Cafe
1609 SW Morrison

London Underground
616 SW Broadway

Big Bang
616 SW Park

Euphoria
341 SW 10th Ave.

Turntable Mary's
126 SW. Stark

The Quest
133 SW 2nd, #21

X-Ray Cafe
210 W. Burnside

Modern Media Productions
917 SW Oak, #406

Burger King Downtown
707 W. Burnside

NORTHWEST PORTLAND

Cobblestone Cafe
53 NW 1st

Howling Frog
314 NW 6th

Roseland Theater
8 NW Sixth

Pizza Oasis
2241 W. Burnside

Powell's City of Books
1005 W. Burnside

OZONE Records
1038 W. Burnside

Chill's Resale Gallery
1340 W. Burnside

Cinema 21
616 NW 21st

Macheesmo Mouse
811 NW 23rd

SOUTHWEST / OUTER WEST SIDE

Multnomah Art Center
7688 SW Capital Hwy.

P.C.C. Sylvania Campus
12000 SW 49th Ave.

Dragon Herbarium
4642 SW Bvtn-Hillsdl Hwy.

Barbur Foods
9845 SW Barbur Blvd.



ATTACHMENT D

**SUMMARY OF KEY FINDINGS
OF BASELINE SAMPLE OF 508 TEENAGERS
IN PORTLAND, OREGON
REGARDING SEXUAL AND CONDOM USE BEHAVIOR**

**FROM BASELINE PHASE NOVEMBER 1992 - JANUARY 1993
OF PSI/PROJECT ACTION OUTCOME EVALUATION
CONDUCTED BY THE THE KAISER PERMANENTE
CENTER FOR HEALTH RESEARCH
AND THE OREGON HEALTH DIVISION**

May 1993

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Dr. Mike Stark, Multnomah County Health Department (503-731-4029)
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PSI/Project ACTION Contact:

Julie Convisser, Project Director (503-294-0554)

Population Services International (PSI) Contact:

Helen Crowley, Project Associate (202-785-0072)

NOTE: The information contained in this document is proprietary to the Oregon Health Division, the Kaiser Permanente Center for Health Research, and Population Services International, and should not be quoted without prior, written authorization.

BACKGROUND:

PSI/Project ACTION aims to help reduce the spread of HIV among young people at highest risk 12-21 years of age in Multnomah County, by carrying out a two-part intervention. The first component is an 18-month television campaign aimed at promoting safer sexual behavior, which began in January 1993. The second component is a condom accessibility program, which increases teens' access to affordable condoms by establishing condom vending machines which sell condoms for a quarter in locations frequented by teens.

The impact of Project ACTION's HIV/AIDS prevention activities is being measured by an Outcome Evaluation Study being carried out by the Kaiser Permanente Center for Health Research and the Oregon Health Division. The Outcome Evaluation Study involves the interview of 2,200 young people between 12 and 21 over the life of the program, regarding media exposure; recent sexual behavior; and attitudes towards, use of, and access to condoms.

A baseline sample of 508 young people were interviewed from mid-November 1992 through mid-January 1993, prior to the start-up of the media or condom vending machine interventions, to evaluate the pre-intervention behavior of the target population. This report presents the key findings from the 508 baseline interviews.

Since the beginning of Project ACTION interventions in late January 1993, researchers have continued to interview members of the targeted youth at risk population, and will interview an additional 1,692 youths by December 1994. The results of these interviews conducted after January 1993 will be compared to the baseline results to measure changes in attitudes and behavior relevant to Project ACTION's HIV/AIDS prevention activities.

Project ACTION is a project of Population Services International (PSI), a non-profit health organization based in Washington, D.C., and is funded by the Henry J. Kaiser Family Foundation, the Public Welfare Foundation, and the Scherman Foundation.

METHODOLOGY:

A cross-section of 508 youth between the ages of 12 and 21 were interviewed during the period from mid-November 1992 - mid-January 1993. These young people were sampled from 14 facilities serving youth at risk in Multnomah County, including youth service centers, alternative learning centers, transitional shelters, and the juvenile justice detention center (see Attachment A, "Agencies Participating in Baseline Survey"). Trained Kaiser Permanente Center for Health Research professionals conducted the interviews. Interviews lasted approximately 30 minutes, and were anonymous. Interviewees received \$10.00 as compensation.

CHARACTERISTICS OF SAMPLE POPULATION:

The following briefly describes characteristics of the baseline sample (n= 508):

Gender: 40.4 percent female, 59.6 percent male

Age: mean age of 15.7:

23.7% ages 12-14, 64.5% ages 15-17, and 11.8% ages 18-21

School Status: 78.9 percent currently attending school

Ethnicity: 39.4% African-American; 39.4% Caucasian/white;
7.5% Am. Indian; 5.1% Hispanic/Latino; 1.6% Asian

Marital Status: 97.6 percent never married

Portland Residence: 89.5 percent resided in Portland two yrs or more

Living Situation: 70.4% currently live with parents or other adult relatives;
10.5% in shelters or group homes; 6.4% in foster care;
12.7% with sexual partner or friends

MEDIA HABITS:

Findings from the baseline survey regarding the media habits of the target population confirmed findings of Project ACTION's focus group research conducted prior to the start-up of the project. Portland's youth at risk, similar to teenagers nationwide, spend an average of 3.5 hours a day watching television. Teens in Portland spend fewer hours listening to radio than their national peers, at an average of 3.4 hours per day.

Television:

Mean Number of Hours Usually Spent Watching TV Each Day. 3.5 hours

Favorite Television Stations. Cable (43.7%); Channel 49 (30.1%); Channel 12 (14.6%); Channel 8 (8.1%); Channel 2 (1.7%); Channel 6 (1.7%)

Five Most Popular TV Shows.

#1 "Martin"

#2 "In Living Color"

#3 "Married With Children"

#4 "Beverly Hills 90210"

#5 "Fresh Prince"

Most Common Viewing Hours (in order of preference): between 6-9 p.m.; between 9-12 p.m.; between 3-6 p.m. weekdays or between 8 am - 3pm weekends

Radio:

Mean Number of Hours Usually Spent Listening to Radio Each Day: 3.4 hours

Three Favorite Radio Stations: KBMS AM SOUL (40.9%); Z100 KKRZ FM (34.6%); KUFO FM 101 (9.8%)

REPORTED SEXUAL ACTIVITY AND CONDOM USE:

The baseline study indicates that four out of five teenagers in this youth at risk sample are sexually active. Over half of those who are sexually active have had 3-10 partners. More than half of those who are sexually active used condoms the last time they had sex. One in three report using them every time they have sex with their main partner, and three out of five report using them every time they have sex with a new or casual partner. More than two-thirds of the sample reports that their experience with condoms has been "All or Almost All Good," and the vast majority indicate that their friends think they should be using condoms.

Ever had Sexual Intercourse: 82.1 percent Yes; 17.9 percent No

Number of Sexual Partners in Lifetime (Among Sexually Active):

28.1 percent had 3-5
23.7 percent had 6-10
14.8 percent had 11-20
12.1 percent had 2
10.7 percent had 1
8.7 percent had more than 20
1.9 percent "Don't Know/Refuse to Respond"

Had Sexual Intercourse Past Month (Among Sexually Active):

65.0 percent Yes; 35.0 percent No

Have a Main or Steady Sexual Partner ("Someone You've Been With For a While, Like a Girlfriend or Boyfriend"): 62.9 percent Yes; 36.8 percent No

Had Sex With Someone Other Than Main/Steady Partner in Past Month (Among Those Who Have Main/Steady Partner):

82.7 percent No; 18.3 percent Yes

Condom Use with Main/Steady Partner at Last Intercourse:

59.5 percent Yes; 40.5 percent No

Condom Use with Other Than Main/Steady Partner or "Someone You Just Met" (Casual Partner) at Last Intercourse: 76.9 % Yes; 21.9 % No

Consistency of Condom Use in General with Main/Steady Partner:

- 34.0 percent "Every Time"
- 19.4 percent "Sometimes"
- 18.0 percent "Almost Every Time"
- 17.2 percent "Never"
- 11.6 percent "Almost Never"

Consistency of Condom Use in General with Someone Other Than Main Partner or "Someone You Just Met" (Casual Partner):

- 59.4 percent "Every Time"
- 20.1 percent "Almost Every Time"
- 10.9 percent "Sometimes"
- 6.3 percent "Never"
- 3.3 percent "Almost Never"

Experience With Condoms In General:

- 50.5 percent report "Mostly Good"
- 21.2 Percent report "All Good"
- 19.5 percent report "About Half Bad and Half Good"
- 3.9 percent report "Mostly Bad"
- 2.7 percent report "All Bad"
- 2.2 percent "never use condoms"

What Friends Think About My Use of Condoms With My Main Partner:

- 69.0 percent report "Friends Think I Should"
- 20.4 percent report "Friends Think I Should Not"
- 10.8 percent respond "Don't Know What Friends Think"

What Friends Think About My Use of Condoms with My Casual Partners:

- 93.7 percent report "Friends Think I Should"
- 5.1 percent report "Don't Know"
- 1.2 percent report "Friends Think I Should Not"

Friends Use of Condoms with Main Partner:

- 25.1 percent report that "About Half of My Friends Do"
- 24.3 percent report that "All My Friends Do"
- 19.0 percent report that "Most Do"
- 16.8 percent report that "Very Few Do"
- 10.2 percent report that "None or Almost None Do"
- 4.6 percent respond "Don't Know"

Friends Use of Condoms with Casual Partners:

- 45.4 percent report that "All or Almost All of My Friends Do"
- 23.2 percent report that "Most of my Friends Do"
- 15.7 percent report that "About Half of My Friends Do"
- 8.5 percent report that "Very Few Do"
- 2.9 percent report that "Almost None or None Do"
- 4.3 percent respond "Don't Know"

Obtained Condoms in Past Month: 66 percent Yes; 34 percent No

Six Most Common Locations Where Condoms Obtained in Past Month:

- 21 percent Friends
- 18 percent Clinics (Not In Schools)
- 15 percent Family Members
- 10 percent Supermarkets
- 9 percent School Clinics
- 9 percent Shelters
- (18 percent Other, including Drug Stores, vending machines, give-aways)

How Much Paid for Condoms, Last Time Obtained Condoms:

- 59 percent Did Not Pay
- 21 percent Paid, Median Price of \$0.66
- 18 percent Did Not Know Price
- 2 percent Never Got Condoms

PERCEPTION OF HIV/AIDS RISK AND ABILITY TO PREVENT GETTING INFECTED WITH HIV:

Although two out of three of the sampled teenagers feel they are at low risk for getting infected with HIV during the next 12 months, the vast majority feel that they can "do a lot" to keep from getting HIV infected. Two out of three have taken action in the past month to decrease their chances of getting infected.

Perception of Chances Of Becoming Infected With HIV In Next 12 Months:

- 63.5 percent report "Very Unlikely"
- 26.5 percent report "Somewhat Unlikely"
- 7.8 percent report "Somewhat Likely"
- 2.2 percent report "Very Likely"

How Much I Can Do to Keep From Getting HIV In Next 12 Months:

- 81.7 percent report "A Lot"
- 13.5 percent report "Some"
- 3.6 percent report "Little"
- 1.2 percent report "Nothing"

Done Anything in Past Month To Decrease Chances of Getting HIV:

60.1 percent Yes; 39.9 percent No

**What I Have Done In Past Month To Decrease Chances of Getting HIV
(Of Those Who Reported Doing Something):**

19.8 percent Increased Use of Condoms
17.6 percent Stopped Having Sexual Intercourse
16.5 percent Decreased Number of Sexual Partners
11.5 percent Chose Sexual Partners More Carefully
10.8 percent Started Using Condoms
7.1 percent Decreased Frequency of Sexual Intercourse
5.3 percent Continued to Postpone Becoming Sexually Active
3.0 percent Stayed in Monogamous Relationship
9.0 percent Other

CONCLUSIONS:

The facts about the sample population's sexual behavior would indicate a potentially high level of risk for infection with HIV and other STDs. The baseline sample indicates that four out of five of the teens interviewed are sexually active. Of the majority who are sexually active, three out of four have already had more than three partners. Nearly one in five of those who have a steady partner report having sex outside of that relationship. Furthermore, in the context of teen sexual behavior, a "main or steady partner" may be defined as someone with whom the respondent has been or will be involved for a period as short as several weeks.

However, it seems evident that the majority of these teenagers have taken recent action to protect themselves from infection with HIV. Three out of five used condoms the last time they had intercourse with their main or steady partner, and one out of three report using condoms every time they have sex with that partner. Three out of four of the sample population used a condom the last time they had sex with a new or casual partner. Two-thirds report using a condom every time they have sex with a new or casual partner. The majority report having a mostly positive experience when using condoms, and that their friends support their condom using behavior.

In addition to the apparent openness to using condoms demonstrated in this survey sample, a substantial proportion of the interviewed teens report other risk-reduction steps, such as ceasing to have sexual intercourse, decreasing the number of partners, and continuing to postpone becoming sexually active.

This baseline study also shows that the media and condom accessibility interventions being carried out by Project ACTION have potential to reach the targeted youth at risk population. The teens sampled in this survey watch an average of 3.5 hours of television a day, during hours when Project ACTION's safer sex promotion public service announcements and longer format programs are being broadcast. In addition, the high number of respondents who at least occasionally use condoms, the generally positive experience these young people report having with condoms, and their perception of a positive peer norm for using condoms, show that there seems to be a solid base on which to build increased teen support for consistent condom use among sexually active youth.

PROJECT ACTION
Agencies Participating in Baseline Survey

Agency/site	Agency type; youth population served	No. of baseline interviews
Janis Runaway & Homeless Youth Services (Harry's Mother & Janis Youth House)	Shelter; runaway & delinquent	17
Juvenile Detention Hall	Incarceration; judicial detainees	130
King Facility	Multiple social services	
Portland Parole	Legal system; parolees	55
Youth Gang Outreach	Counseling; youth gang members	10
Lents Education Center	Alternative education	29
Mainstream Youth Program, Inc. (multiple sites)	Education, counseling; chem. dep. & abuse	31
Open Meadow Learning Center	Alternative education	09
Portland Opportunities Industrialization Center	Alternative education	44
Simpson Learning Center	Alternative education	06
Youth Service Centers (YSC)	Counseling; emot. dist., chem. dep., diversion, domestic problems	
North Portland YSC	"	55
Northeast YSC/Urban League	"	64
Southeast YSC/Portland Impact	"	19
Westside YSC/Lutheran Family Services	"	28
East County YSC/YMCA	"	<u>11</u>
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Social Marketing and Communications for Health

