

FOIA MARKER

This is not a textual record. This is used as an administrative marker by the William J. Clinton Presidential Library Staff.

Collection/Record Group: Clinton Presidential Records

Subgroup/Office of Origin: National AIDS Policy Office

Series/Staff Member: Todd Summers

Subseries:

OA/ID Number: 21089

FolderID:

Folder Title:

Issues - Groups-Youth-Gay/Lesbian

Stack:

S

Row:

66

Section:

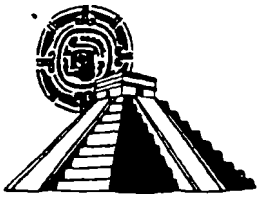
6

Shelf:

3

Position:

1



B I E N E S T A R

East Los Angeles Center

5326 E. Beverly Blvd.

Los Angeles, CA 90022-2103

(213) 727-7896

Fax (213) 727-7985

Hollywood/Silverlake Center

1169 No. Vermont Ave.

Los Angeles, CA 90029-1701

(213) 660-9680

Fax (213) 660-6279

San Fernando Valley Center

6850 Van Nuys Blvd.

Van Nuys, CA 91405

(818) 908-3820

Fax (818) 908-3844

Pomona Center

1803 N. Garey Ave.

Pomona, CA 91767

(909) 397-7660

Fax (909) 397-7661

Long Beach Center

500 East 4th Street

Long Beach, CA 90802

(562) 436-9722

Fax (562) 436-8664

Youth Center

5301 E. Beverly Blvd.

Los Angeles, CA 90022

(213) 727-7897

Fax (213) 727-7993

January 11, 1999

Dear Friends,

I hope the New Year finds you well. At BIENTSTAR we are looking forward to 1999. We are prepared to accomplish the goals we have set and ready to encounter new challenges.

I have enclosed three articles written and published about BIENTSTAR in the recent months. These articles focus on our youth programs. They are an example of the variety of programs BIENTSTAR offers for the diverse populations we serve.

Should you need further information on our youth programs, please contact:

- *Lesbian, Bisexual and Transgender Youth Services*
Victor Sanchez (323) 727-7897
- *Latino Youth at Risk for Substance Use and Gang Involvement*
Jorge-Mario Cabrera (323) 727-7896

Thank you for your support and we look forward to continue our working relationship.

Sincerely,

Elizabeth Escobedo
Communications Director

Enclosures

Gay Latinos Find a Place to Be Both

■ **Culture:** East L.A. center is the first in the nation to specifically serve their community. For many, La Casa makes them feel at home.

By ART MARROQUIN
TIMES STAFF WRITER

As a teenager, Ruben Reyes studied for the priesthood in Mexico, as his strict Catholic family wanted. What Reyes wanted was something very different—especially for a good Latino kid.

He longed to live an openly gay life.

As an adult, Reyes found himself cruising West Hollywood, but he still felt culturally out of place.

A year ago, when he walked into La Casa in East Los Angeles, he finally found people like himself.

"I used to think that being gay and being Latino had to be two separate things, that you couldn't be both," said the 22-year-old Compton resident. La Casa "has shown me that I don't have to give up one to be the other, and I have a better sense of who I am because of that."

Gay Latinos from throughout Southern California gather at the 17-month-old center on Beverly Boulevard for cultural events, group counseling or socializing. Its founders say it is the only gay and lesbian community center in the nation that specifically serves the Latino community.

"I wanted to give gay and lesbian Latino role models to young people, to give them a safe place to turn to," said Victor Sanchez, La Casa's youth programs director.

Sanchez created La Casa as part of the nonprofit Bienestar social services agency with the help of foundation grants and government funding. Bienestar, Spanish for "well-being," consists of six centers in Los Angeles County focusing on health issues in the Latino community.

Experts say being a gay Latino brings unique challenges.

"The church says family, children and marriage is godly and that homosexuality is evil, making many gay Latinos feel guilty," said Rafael Diaz, associate professor of medicine at UC San Francisco and author of a book about Latino gays.

"Programs like Bienestar help Latinos feel connected to a gay family and allow them to speak out about how they feel and think about sex and their culture."

Diaz said many gay Latinos feel less masculine or ashamed about having sex, more so than gays of other ethnicities.

Robbie Flores says he went into a deep depression last year when he realized he was gay, becoming anorexic and bulimic.

In January, he started going to weekly support group meetings at La Casa, hoping to find a way to accept his sexuality.

The discussions "helped me realize I was dealing with my sexuality the wrong way," said Flores, 20, of Rowland Heights. "It's like a blind person being able to see. I see life in a totally different way now."

Just inside the door of La Casa, Mexican artifacts and a rainbow flag—a gay symbol—adorn the walls, a reminder that the community center blends culture with sexuality. A mural of Cesar Chavez, Frida Kahlo, Benito Juarez, and others pays tribute to prominent Latinos who overcame oppression and pain. A painting of kissing lesbians shares a wall with a statue of Our Lady of Guadalupe.

To many, La Casa is a comfort zone outside mostly white West Hollywood, where many gay and lesbian Latinos say they have encountered racism.

"I am not comfortable in West Hollywood because of the exotic or erotic role Latinos take on in many white men's eyes, and because of the blatant racism and racial slurs I have experienced there," said Sanchez, 25, of Whittier. "Being gay is not enough to dissolve racial barriers."

Gay Latino men face homophobia and



La Casa draws young Latinos, left, for cultural events, group counseling and socializing. Michael Gonzalez, below, listens during a group discussion about suicide.



Photos by CLARENCE WILLIAMS / Los Angeles Times

racism. Latina lesbians say they deal with those issues topped with sexism.

"There aren't many spaces where women can be socially accepted while relating to other women," said Stacy Macias, 24, the women's program coordinator at La Casa. "The men have been able to develop close friendships with each other. . . . It's that kind of good, wholesome feeling that I want the women to have too."

But East Los Angeles, where Catholic roots run deep and the majority of the residents are lower-income Latinos, has not been entirely welcoming.

In February, anti-gay slurs were spray-painted across an outside wall of La Casa's building. Weeks later, Sanchez found epithets carved into the center's front door. In October, epithets were painted there again.

Of the 220 hate crimes against homosexuals of all races reported in 1997, 30% were committed by Latinos, according to Reva Trevino, who documents such crimes for the county Human Relations Commission.

She has organized a symposium of Latino community leaders today to address the cultural factors leading to such crimes.

"We need to take a look at what influences are around [Latinos] that create homophobia," Trevino said. "Most of us would never think to throw a rock at someone who is gay or lesbian, but there are influences in our homes that are obviously moving others to do that."

The isolated incidents against La Casa

haven't altered Sanchez's determination to make the center a part of the neighborhood.

"It reminds us of where we are, and that there's a lot of ignorance out there," he said. "But it just encourages our determination to continue to educate our community."

Part of that is educating young men about safer sex. In 1985, Latinos accounted for less than 15% of the total AIDS cases in Los Angeles County. Last year, that number jumped to 36%, according to Los Angeles County epidemiologists.

Sanchez says he now plans to expand La Casa's services to drug and alcohol intervention, mental and physical health referrals and an arts program.

"We just want to offer what the agency's name implies—good health that helps the mind, body and spirit," Sanchez said.

On Mondays, more than 30 young men crowd into the center to attend the 20-Something for Him support group. For those rejected by their families, the group acts as a surrogate.

"I try to keep the discussion topics interesting," Sanchez said. "I have to be both Jerry Springer and Oprah Winfrey to keep their interest."

He has kept Reyes' interest, and the center has afforded him the friends and acceptance he was looking for.

"I thought that being gay always had to have sexual connections," Reyes said. "But coming to Bienestar adds depth to being gay for me."

we are family

Being hooked on drugs or alcohol is tough.

But then landing your sorry ass in the hospital with AIDS because you foolishly shared needles, or trusted your "man" against all the warnings, or wantonly disregarded everything you'd ever learned about safe sex just to have a "great time," looks downright crazy in the bleak light of dawn.

Unlike Africa, where HIV/AIDS is very much a heterosexual affliction, when the virus/disease began to transcend the gay white male community where it first lodged in the United States, it began an inexorable march into American women and straight men (*The Virus Recognizes No Morals*, as screenwriter/director Rosa von Praunheim entitled his 1985 film)—a move facilitated by bisexual men and those who shared drugs intravenously. From whites, HIV was spread into the black, brown, yellow, and red communities. But at first only the majority gay block of white men understood the full implications of how it was spread (mainly sexual) and took steps to retard the growth and spread of the disease. But other racial communities took a decidedly uncool and reactionary tone of "Can't happen here; we don't have fags!" and the sly virus has made deep inroads into African-American and Latino-American communities.

But there have always been farsighted individuals within those two groups who saw and understood just how frightening the specter of this disease was and were not willing to slip into a comfortable blanket of denial while their youth become infected and died. In 1989, a group of concerned individuals unearthed the initial resources to found Bienestar, a counseling center for Latinos of all ages, but also for their youth, gay and bisexual, who had nowhere to turn for information about SIDA (the Spanish acronym for AIDS). They began in a small storefront center at Sunset Junction, an older section of Los Angeles on the border of East Hollywood and Silverlake, an area disturbed by conflicts between the largely Latino families and the gay white men who were gentrifying the area, as well as misinterpreting their neighbors. Since the early eighties, there has been a yearly fair at Sunset Junction so that both communities—divided by prejudice and misconceptions—could lessen the conflicts.

Bienestar was placed where gay and bisexual Latinos could easily reach out which allowed it to catch on. They quickly escalated their expansion into a total of six sites throughout the Los Angeles area, including Pomona, Long Beach, Van Nuys, Hollywood, and two in East Los Angeles, the titular home base of California Latinos.

Bienestar now has a staff of sixty-four assisting people with HIV/AIDS. Their one youth center, in East Los Angeles, is devoted to the education of

*"The sexual
silence, which is
very pre-
dominant in
our culture, is
connected to
denial. So to
bring up
erections,
condoms or
AIDS/SIDA is
considered
taboo."*

ble learning to accept our sexuality with so much of the community in denial about our orientation." In addition, machismo and the traditional values taken from the Church added to the pressures of economic realities and lowered educational levels that keep gay peoples lagging in social acceptance. "We had to face the problem that we had no community to support us. West Hollywood is Caucasian and we weren't accepted easily there. We have no queer community in the barrio and straight Latinos just couldn't support us." So Bienestar was created to make a space between those two areas of conflict. "We try to incorporate Latino history and gay empowerment, combining neutral ground that our youth can find themselves within." It has proven to be very successful, although Bienestar is looking at some unwanted cuts in their \$2,100,000 budget next year. "I travel across the country, focusing on the high-Latino cities (Miami, Washington, D.C., San Francisco, as well as Puerto Rico) attending forums and exchanging information with gay and lesbian Latino activists. We far exceed expectations across the country, where normally a support group would average maybe ten to fifteen participants, while we're averaging up to thirty people per meeting."

Apparently one of the reasons for their overall success lies in the fact that they are meeting an untapped demand built up over many years of watching other communities win at gaining politi-

L.A.'s Bienestar Provides

AIDS Education &

Prevention Services to the Latino Community

by Dale Reynolds

Latino teens, in order to prevent the sero-conversion, as well as providing a support system to those who have already become infected. Victor Sanchez, twenty-five, is the Director of La Casa Gay and Lesbian Youth Center. "All of our services at this center are for gay, lesbian, and bisexual teens. We opened a year ago and all our staff, except one, are either gay or lesbian." Sanchez, a native of the heavily Latino neighborhood of Huntington Park, graduated from UCLA with a double major of English and Psychology, and with a minor in Chicano Studies. "Growing up gay and Latino is difficult—we all have trou-

cal and social ground. "Most of the social services offered are in English, geared towards the white community. Latinos in America tend to be bilingual. The problem for us was that the literature did not address easily misunderstood cultural issues. There was the unwarranted assumption that because someone can speak English, they didn't need other aspects of their culture addressed, such as religion, traditions, or familial norms." And one of the main problems lies in something as simple as a lack of viable transportation for those Latinos who lived outside of the main Hollywood centers; travel times on public transport to Hollywood can sometimes take two hours. "We had to create a center where that demographic could more easily access services." Their staff at the Youth Center range from eighteen to twenty-five, all of them Latino/a. Only thirteen are paid, but they boast of having over fifty in the volunteer pool.

The impetus for the founding came from the queer group, Gay and Lesbian Latinos Unidos (GLLU). The vibrant Latino gay drama troupe, VIVA!, is supported by GLLU as well. Their funding comes from a patchwork quilt of federal, state, and county HIV-prevention funds, and smaller donations from public and private foundations. For instance, the Until There is a Cure Foundation (started from monies willed by the late film director Colin Higgins) contributes a sizeable amount. Some of the funding covers methamphetamine intervention activity, as crystal has become a favorite gay high leading to unsafe sexual activity that all too often leads to infection.

Last year, Bienestar found the money to do a book, *Espejo, Dime, ¿Quien Soy?* (*Mirror, Tell Me, Who Am I?*), a well-printed collection of poems and essays written entirely in Spanish and English. (Edited by Fernando Castro from submissions by clients, supporters, and friends of the youth center, it can be ordered from Ta'yer Books, PO Box 91673, Los Angeles, CA, 90009.) Bienestar also runs a food bank, which, as is true for the mental health services, is over-subscribed. (The canned goods come from the Los Angeles regional food bank and local supermarkets.) According to Elizabeth Escobedo, twenty-eight, the Director of Communications, the food bank is funded for 220 people, but serves almost 400. The actual client list for the centers is almost 1,000 people a year, but they serve as many as 5,000 men and women in the prevention arena.

The purpose of Bienestar, naturally, is to take care of those who are suffering from the virus or the disease, but as important are the preventative measures, limited at the moment to one mental health clinician who rotates around the various centers. As Sanchez, the head of the Youth Center,

relates: "When someone comes in off the street, their first response is usually, 'Man, we didn't know you existed.' Then a coordinator-of-health counselor will take that person on a tour and they fill out an information sheet to see what they need."

The happy fact of their existence is due to the unhappy fact that one out of every five new cases of HIV/AIDS is Latino/a, and while still predominantly gay or bisexual men or IV users, African-American and Latina women constitute the largest percentage of the new growth. A more interesting fact emerges from Sanchez, that the East Coast of America is still delivering more new infections than the West Coast, due no doubt to population densities and more poor showing up with the disease. But why are *women* suddenly raising their rates of infections? "There are a couple of theories: one, that women are shooting up drugs and sharing needles in larger numbers, and two, that their men are contracting the virus from closeted homosexual acts or through needle-sharing of their own." The sadness of that image expands before us: a religious, sexually monogamous wife or girlfriend, trusting her husband/boyfriend, and believing her priest's warnings about the evils of condoms, doesn't discover her mate's perfidy until it's too late. A raw combination of steps leading to anger and despair.

Says Sanchez, "The sexual silence, which is very predominant in our culture, is connected to denial. It is considered disrespectful to your elders to even discuss youth-sexuality since you aren't supposed to be doing 'it' at all." So to bring up erections, condoms, AIDS/SIDA or the Church's useless admonitions is considered taboo and an insult to *la cultura*. And this is clearly proving yet again the ACT UP adage that *Silence=Death*.

So how do they even begin to educate teens when the governing culture works against such instruction, and when the prevailing attitude is "Condoms are only for homosexuals"? "Well, there are some aspects of Latino culture which can be implemented for HIV intervention strategies. *La cultura de la Raza* (the culture of the people) is very family-oriented and our relationship to others is a priority, therefore if we can create a 'family' for ourselves here at the Center—a family made up of people who share the same sexuality and culture—we can create a norm more conducive to better health and self-esteem. That is how they will heed the message. For instance, we don't call the meetings 'rap groups' as they do at the Gay (& Lesbian) Center (in Hollywood). We call them 'gatherings,' with more passive participation; we don't always have discussions, maybe twice a month. Other nights we'll show a movie, such as *Latin Boys Go To Hell*, or some *telenovela* (soap opera) and discuss the

characters' lives." (It isn't all fluff, either; they've screened the Spanish-language films of Pedro Almodóvar, the brilliant director of *Law of Desire* and *Live Flesh*). They hold discussions afterwards, including how the Latinos (or Chicanos, or Hispanics, take your pick) were portrayed on the screen. "We have all the peer-based health educators lead the discussions."

When a youth tests positive, the agency is then able to set up an integrated set of services: case manager, treatment advocate, peer counselor, mental health counseling, support gatherings, and can grant him/her access to the food bank if they qualify. Of those thousand persons, approximately 120 on average are teens (although that can go as high as 175 when they have a Tea Party dance).

Escobedo has been with Bienestar for two years. She explains that when they were formed nine years ago, almost nobody was dealing with Latino AIDS issues. "Latino gay men felt intimidated by white authority. But when they saw peer-influenced communication start to work, it quickly branched out to straight men and women." The order of numbers being serviced are gay/bisexual Latinos, followed by heterosexual Latinas, then non-gay Hispanics for both sexual and IV infections. "It's so important to us to maintain our cultural identity. Not all the IV exposure, for instance, is from shooting illegal drugs—some of it is being transmitted through casual neighborhood injection of vitamins or healthy drugs in used needles."

Unfortunately, Bienestar is looking at some funding decreases, mainly from the Los Angeles County Office of AIDS Programs and Policy. According to Sanchez, "Much of the thinking is that with the use of protease inhibitors, people are in different stages of the disease, some inherited from a long time ago. Most of them are doing great on the meds and are ready to get back to the workforce—thus the declining need for continued monies. But a lot of our Latinos are just finding out they're infected—that they're at the very beginning of this whole mess. Social services are being cut, but too soon for us. I mean, a lot of wives are just learning that they and their husbands are infected." This is the beginning of a political fight over the cutting of social services between those who feel they aren't needed and the other side who are just learning how to gear up for the long fight. Sanchez: "The myth that straight men and women cannot catch the virus is what is most dangerous. The infection rates are up for them and they need what we have to offer." ♦

Wesley Harris is an internationally published writer for the gay and lesbian press and reviews books for *A&U*.

REPORTAJE ESPECIAL

SIDA, PELIGRO JUVENIL



JORGE MUJICA/La Opinión

Jóvenes educadores del programa de prevención de Bienestar. De izquierda a derecha: Vanesa Camarena, Melissa Gutiérrez y Rudy Jiménez.

Salvar la juventud de la infección con VIH

Programas locales innovadores; llamamiento en el Día Mundial del Sida

Josefina Vidal

Editora de Reportajes Especiales

“Oye, ¿has oído hablar del VIH?” “Sí”, responde la inmensa mayoría de jóvenes.

En cambio, si se les pregunta si toman precauciones contra el virus del sida, muchos contestarían de forma menos afirmativa. Lo harían solamente la mitad de los adolescentes a quienes se acercan otros jóvenes de su edad para educarlos sobre el VIH.

La causa principal de esta actitud, dice el equipo de educadores que sale a la calle a buscar a alumnos para su escuela de prevención, radica en la creencia que la juventud tiene de su propia invencibilidad, también en sus circunstancias.

Estas son poco favorables para un gran número de los jóvenes latinos a quienes captan los educadores en las calles de Los Angeles. Los hay que están en pendencias o en los grupos asociados a ellas, que viven en un ambiente de ex-

“Hay que recordar a la gente que la epidemia está lejos de haber terminado y que hemos de continuar vigilantes”

Chuck Henry

trema pobreza, que usan drogas o sufren maltrato en sus hogares.

La respuesta frecuente de “no me importa, voy a morirme de todos modos”, denota fatalismo, tal vez porque saben de latinos jóvenes víctimas

de la violencia, pero también expresa falta de autoestimación, asegura el equipo de adolescentes guías del proyecto “Raza Unidad” del East Side Youth Connection, uno de los programas de prevención contra el VIH patrocinado por Bienestar, organización latina contra el sida.

EN LA ESCUELA

Es posible que parte de la información básica que muchos jóvenes angelinos tienen sobre el VIH la hayan adquirido de las enseñanzas recibidas en la escuela. Desde 1987 el Distrito Escolar de Los Angeles (LAUSD), dispone de un programa preventivo, auspiciado por el Centro para el Control de Enfermedades (CDC), que hace obligatorio el entrenamiento sobre el VIH para los maestros especialmente los de salud.

El programa establece también que se impartan lecciones sobre la infección del VIH en la escuela intermedia, por lo general en el séptimo grado, y después se ofrece una tanda más de le-

La SIDA, pág. 2A

PAGINA DE PASES

Sida

viene de pág. 1

ciones en la secundaria, en las que se incluye también información sobre otras enfermedades de transmisión sexual.

Por otra parte, desde 1995 existe un programa de distribución de preservativos e información sobre ellos en el LAUSD, que sólo se lleva a cabo en alumnos cuyos padres lo autorizan, explica Francine Eisenrod, directora del programa de Educación sobre salud, drogas, tabaco y alcohol del LAUSD.

"En primer lugar les hablamos de la abstinencia, porque si no tienen relaciones sexuales no han de preocuparse sobre el contagio de enfermedades. Pero después les informamos sobre los condones y la forma de usarlos para los que son sexualmente activos", indica Eisenrod.

Sin embargo, Jorge Mario Cabrera director del programa de prevención de Bienestar, y asesor el mismo del comité de LAUSD para educar sobre el VIH, apunta:

"En los jóvenes el tema no es sólo tener conocimientos sobre el VIH, sino saber que se les valora, porque de lo contrario no se van a cuidar".

El programa de Bienestar, con sus 25 educadores comunitarios, tiene como propósito inmunizar a los jóvenes contra el VIH con la vacuna de la educación, que es la única que hay disponible hasta el momento.

La urgencia de la prevención entre los jóvenes se subraya este año de forma especial en la conmemoración del Día Mundial del Sida, que se celebra anualmente el 1 de diciembre. En esta ocasión hay un llamamiento universal a enfocar el esfuerzo preventivo hacia personas con edades comprendidas entre los 12 a los 24 años, porque la epidemia del VIH crece entre la juventud.

Se calcula que en todo el mundo ocurren cada año más de seis millones de nuevas infecciones del VIH, de las cuales el 50% corresponde a personas menores de 25 años. Más de 30 millones de hombres, mujeres y niños viven en el mundo con el VIH, ha calculado

UNAIDS —programa de las Naciones Unidas del VIH/sida.

Eso significa que uno de cada 100 adultos, a nivel mundial, vive hoy con el VIH. De seguir la tendencia actual, para el año 2000 la infección podría haber afectado entre 60 y 70 millones de personas, ha declarado UNAIDS.

LA INFECCION AQUI

En el condado de Los Angeles el sida es la principal causa de mortalidad de personas entre los 25 y 45 años de edad. Esto significa, dicen las autoridades sanitarias, que muchas de ellas se infectaron durante la adolescencia con el virus de inmunodeficiencia humana (VIH), cuya etapa avanzada se conoce como sida —síndrome de inmunodeficiencia adquirida—.

Chuck Henry, director de la Oficina de programas y estrategia para el VIH, del Departamento de Salud del condado de Los Angeles, remarca el crecimiento entre las minorías de casos de sida —sólo se registran los de esa etapa— y la estimación de un aumento de infecciones con el VIH.

"En el condado de L.A. se calcula que la infección del VIH sigue aumentando entre la juventud, especialmente entre los hombres de color jóvenes", dice Henry.

"Es vital que les eduquemos sobre prevención para evitar que se infecten. Y si ya lo están, debemos ayudarles a comprender que hay más posibilidad de prolongar sus vidas y tal vez de evitar que lleguen a desarrollar sida, si el virus se detecta en una etapa temprana", añade.

El objetivo principal de este año al conmemorar el Día Mundial del Sida, es animar a los jóvenes a que se hagan la prueba del VIH, y acudan después a recoger los resultados, indican las autoridades sanitarias de Los Angeles.

En el condado la prueba se administra gratuitamente en diferentes localidades, con carácter confidencial —en algunas también anónimo.

Una de ellas es la organización latina Bienestar, que ofrece todos los jueves análisis de detección del VIH.

En la actualidad la prueba del VIH se administra en dos modalidades: oral, con recogida de una muestra de saliva, y por extrac-

ción sanguínea. Cada cliente puede escoger el método que prefiera.

Desde hace tres años, la administración de potentes antivirales, y métodos de medición de actividad viral han logrado una extraordi-

«Llegamos a los jóvenes con respeto, y el enfoque no es solamente el VIH. Es sobre cultura e identidad, y al contrario de otros programas de prevención, nosotros tratamos al individuo en su totalidad»

Jorge Mario Cabrera

naria reducción en la mortalidad y en el desarrollo de la infección del VIH.

Sin embargo, el descenso es menor entre afroamericanos y latinos. Los expertos lo atribuyen a diferencias en el acceso a la atención médica, y a la detección tardía del VIH entre las minorías.

"Es triste que todavía veamos a gente llegando a las salas de urgencia con neumocistis, o con infecciones que ya no deberían estar matando a nuestra gente. Que lleguen allí sin células CD4 [el blanco del virus] y conteos virales de millones", señala el director de prevención de Bienestar.

Entre los beneficios del tratamiento en una etapa temprana figuran los de impedir el deterioro

del sistema inmunológico y la consiguiente aparición de enfermedades que de ello se derivan.

CREAR DIÁLOGO

Para llegar a la juventud no acostumbran a ser útiles los métodos de advertencia tradicionales, piensan los educadores de Bienestar.

Uno de ellos, Rudy Jiménez afirma:

"No sirve decir 'no hagas esto o aquello'. Más bien hay que mostrar las consecuencias. Por ejemplo, en vez de decirles que no tomen tóxicos, les explicaremos que quien toma alcohol y marihuana puede progresar hasta el consumo de heroína, o ser poco consciente del peligro y no protegerse".

No es una lección, sino un diálogo, porque el mismo Jiménez, de 19 años, usó drogas durante unos años y se acercó a las pandillas. E igual ocurre con algunos de sus compañeros.

"No es difícil enseñarles, porque somos como ellos. Algunos hemos usado drogas o estado en pandillas", dice Vanesa Camarena, quien explica sus propias experiencias con drogas y relaciones sexuales sin protección.

"Hasta que de pronto, me pregunté qué estaba haciendo y cambié. Fue por respeto a mi misma, a mi propio cuerpo" dice Camarena, quien atribuye el cambio a los valores que le inculcó su familia.

Reunidos en una de sus sesiones con los adolescentes, un grupo de guías opina sobre sistemas eficaces de prevención. Todos ellos son expertos en conducta juvenil, porque también han vivido la presión de los compañeros, y sentido la rebelión propia de la adolescencia.

Los educadores salen a buscar a los jóvenes donde estén: en escuelas, en fiestas, en parques, en cantinas, donde quiera que se congregue la juventud de la comunidad.

Después, les ofrecen información y servicios, y les invitan a sesiones sociales, culturales, de entretenimiento en Bienestar.

"Llegamos a los jóvenes con respeto, y el enfoque no es solamente el VIH. Es sobre cultura e identidad, y al contrario de otros programas de prevención, nosotros tratamos al individuo en su totalidad", dice Jorge Mario Cabrera.

"Les abrimos las puertas, les ofrecemos un espacio que es sólo suyo, donde se puedan ex-

presar sin temor", dice Melisa Gutiérrez, otra de las educadoras de Raza Unida.

SIGUE LA PANDEMIA

Después de 18 años de haberse iniciado la pandemia que ha causado más muertes en el mundo de los tiempos modernos, resulta evidente que la infección avanza no sólo en los países del Tercer Mundo, sino de forma desproporcionada en las comunidades pobres del Primer Mundo.

La alarma llevó al comité afroamericano del Congreso federal estadounidense a presionar para una asignación extraordinaria de fondos. Su acción surtió efecto, porque en el pasado mes de octubre se aprobó la distribución de 156 millones de dólares en las comunidades afroamericana y latina, para atender lo que se calificó de "grave y creciente crisis sanitaria".

El director de la Oficina de Programas de VIH/sida en el Condado espera que una porción importante de esos dólares llegue a Los Angeles, donde en 1997, y por primera vez desde el inicio de la epidemia, los latinos con un 27% del total, representaron el mayor porcentaje de casos de sida.

Entre las prioridades, afirma Chuck Henry, figuran los programas de prevención.

A pesar de que los tratamientos tengan éxito y debido a ello muera menos gente, la gente sigue falleciendo de sida —en Los Angeles han muerto ya de sida en lo que va de año 500 personas— y continúa infectándose. Chuck Henry insiste:

"Hay que recordar a la gente que la epidemia está lejos de haber terminado y hemos de continuar vigilantes".

Con respeto y esfuerzo, educadores como los de Bienestar tratan de explicarlo a los jóvenes latinos.

Información confidencial sobre VIH/sida en tres idiomas (Inglés, español y filipino): 800-367-2437

Sobre programas de Bienestar (centro del Este de Los Angeles): (213) 727-7985.

**DAILY
NEWS**
—online edition—

Find: A Loan for Me

Powered by GetSmart.com

Refinancing

Second Mortgage

Debt Consolidation

HOME

NEWS & VIEWS

City Beat



Archives

From: News and Views | City Beat |
Thursday, February 04, 1999

HIV Rate Hits 25% In Young Gay Blacks

By MARTY ROSEN
Daily News Staff Writer

Nearly 25% of gay black men in New York City under 22 are infected with HIV, according to new findings by the city Health Department, the New York Blood Center and the Centers for Disease Control and Prevention.

Researchers who tested young gay men of all races for HIV and questioned them about their sex habits found 40% engaged in unsafe sex and a significant number recently had been infected.

"It's really alarming news," said Richard Elovich, director of HIV prevention for Gay Men's Health Crisis. "We are not doing a good enough job reaching young black men."

Health workers took a mobile van to gay bars, clubs and gyms, where they questioned the sexual practices of 425 men 15 to 22.

The study confirmed what they already suspected: Public health campaigns haven't been effective with minorities and younger men.

Dr. Joshua Lipsman, GMHC's executive director, said younger men have a false sense of security because of "so-called miracle drugs" and a dramatic drop in the AIDS death rate.

"They have not seen their friends wither and die," Lipsman said, unlike men over 35, who "still miss and mourn for friends and lovers who were taken away in the prime of their life."

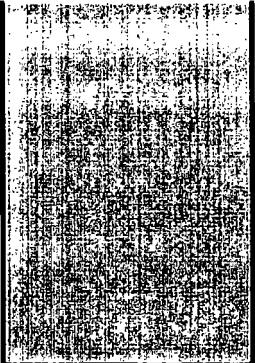
That false sense of security also is seen on a national level, doctors in Chicago reported yesterday at the sixth Conference on Retroviruses and Opportunistic Infection.

The physicians expressed concern that a growing number of HIV patients are becoming careless about the risks of spreading the virus because of new drug cocktails that keep them feeling healthy.

The result is that the rate of new HIV infections remains steady.

Even among the groups considered to be the most knowledgeable about the risks — such as gay men — the new infection rate remains high. "Half of new infections are still occurring in men who have sex with men," said Dr. Jonathan Kaplan of the CDC.

QUICK SEARCH



Doctors estimate that 750,000 people in the United States are infected.

"Half of these persons are not in care," he said. "Many may not be aware of their high-risk status."



Back to Top



Find: A Loan for Me

Powered by GetSmart.com

Refinancing

Second Mortgage

Debt Consolidation

John R. Moore, PhD, RN, CHES
Division of Adolescent and School Health
Centers for Disease Control and Prevention
4770 Buford Hwy., Mailstop K29
Atlanta, GA 30341
770-488-3251
Fax: 770-488-3110

fax

t r a n s m i t t a l

to:	Todd Summers
fax:	202-456-2438
from:	John R. Moore Email <jrm3@cdc.gov>
date:	May 27, 1999
re:	Upcoming meetings on GLBTQ Youth
pages:	6, including cover page

NOTES: This fax is to let you know about 2 meetings that DASH is coordinating to better address the needs of GLBTQ youth. The draft agendas for both meetings are attached. The first day, June 17, we will be meeting with the NGOs we fund to address the needs of these young people. Discussions will focus on learning about what the NGOs are doing and how they can work more collaboratively. The second day, June 18, will be an all-day staff development session open to DASH and DHAP staff, as well as other interested CDC staff. This meeting will involve these same NGOs as well as a youth panel and other experts who will be brought in to help our staff learn more about the needs of GLBTQ youth. We welcome your participation in either or both of these meetings. I would be happy to answer any questions you might have.

John

DRAFT DRAFT DRAFT DRAFT DRAFT DRAFT DRAFT DRAFT

Draft Agenda for June 17th, Day One Meeting of Seven DASH-Funded NGOs Who Are Working to Address the HIV/AIDS Prevention Needs and Other Health Concerns Among Sexual Minority Youth (GLBTQ)

Participants

NGOs:

Kent Klindera (AFY), Bob Ward and Michael McNeill (ACHA), Clinton Anderson and Karen Anderson (APA), Sara Leedom (NAPWA), Jennifer Marin (NASTAD), Gretchen Noll and Jo Mestelle (NNY), Michael Kaplan and Melisa Casumbal (NYAC).

CDC:

Diane Allensworth, John Canfield, Holly Conner, Chad Martin (DHAP), Jim Martindale, John Moore, Leah Robln, Kathleen Somers.

SEA/LEA:

Tim Hack (MA), Tracy Flynn (Seattle)

Facilitators: Jim Martindale & Kathleen Somers

Scribe:

Rachel Krause (To Record Discussions on Flip Charts)

Objectives of Meeting:

To provide for each other--NGOs and CDC--a clear understanding of what each NGO is doing individually to address the HIV prevention needs of GLBTQ youth.

To establish links between NGO-based projects that will enhance HIV prevention efforts and other health concerns for GLBTQ youth.

To identify strategies on target audiences that are not being addressed in the NGOs' current scope of work that would facilitate HIV prevention efforts for GLBTQ youth.

To begin to identify ways to mark the progress of strategies that are developed by the group.

Tentative Agenda

8:30-9:00	Sign-in / Pick-up Materials/ Coffee
9:00-9:30	Welcome by John Moore Introductions Overview of Agenda by Diane Allensworth
9:30-10:00	Brief Description of Each NGO's Project Provided by NGO Representative
10:00-10:45	Identify Target Populations/Audiences of Each Project and Identify Common or Overlapping Areas Among Projects (Using Charts, Diagram/Framework)
10:45-11:00	Break
11:00-12:00	Identify Target Audiences That Are Not Being Addressed by the Seven NGOs and Brainstorm Ways to Reach These Target Audiences through Collaboration
12:00-1:00	Lunch
1:15-2:00	Presentation on 65 DHAP-funded CBOs who work with gay adults and youth on HIV prevention. Include list of CBOs and contact information (Chad or other DHAP rep.).
2:00-3:00	Identify Ways/Strategies (Including materials) in Which These 7 NGOs Can Assist/Collaborate with Other DASH-Funded Constituents: Other NGOs and SEAs/LEAs (with Tim Hack and Tracy Flynn contributing)
3:00-3:15	Break
3:15-4:15	Identify Possible Indicators/Markers of Progress/Success for Proposed Activities (Leah Robin). Building a Framework.
4:15-4:45	Summarize Discussions Identify Co-presenters To Describe Today's Meeting in Brief at Tomorrow's Staff Development Training
4:45-5:00	Closing Remarks John & Diane (DHAP rep?)

DRAFT-DRAFT-DRAFT-DRAFT

DIVISION OF ADOLESCENT & SCHOOL HEALTH
CENTERS FOR DISEASE CONTROL AND PREVENTION

June 18th, 1999 9am-5pm
Staff Development Training
Atlanta Hilton and Towers,
255 Courtland St. NE, Atlanta, GA.

MEETING THE NEEDS OF GLBTQ YOUTH

Planning Committee

Diane Allensworth, DASH/CDC
Clinton Anderson, APA
Brenda Greene, NSBA
Tim Hack, MDOE
Kent Klindera, Advocates for Youth
Sara Leedom, NAPWA
Jennifer Marin, NASTAD
Chad Martin, DHAP/CDC
John Moore, DASH/CDC
Jerald Newberry, NEA
Gretchen Noll, NN4Y
Kathleen Somers, DASH/CDC
Bob Ward, ACHA

Goals and Objectives for Training:

- (1) To increase the understanding of the cultural reality that Gay, Lesbian, Bisexual, Transgender and Questioning (GLBTQ) youth face in and out of school and provide opportunity for CDC staff to interact with GLBTQ youth.
- (2) To create awareness of the programs that are working to (a) promote HIV prevention and (b) create safer environments for GLBTQ youth.
- (4) To provide opportunity for DASH, SEA & LEAS, NGO's and DHAP staff to interact around this high-risk population and familiarizing all parties with what one another is doing related to this population.
- (5) To take away valuable resources that can be used when providing Technical Assistance to constituency (tool kit).
- (6) To increase the awareness among DASH and DHAP staff of other federal programs

that target GLBTQ youth.

Agenda/Sessions:

Facilitator - Michael Kaplan/Gretchen Noll (especially for panels)

Welcome / Background on meeting / Introductions -- John Moore (10 minutes)
Can also provide opportunity for DHAP official to speak

Epi Profile / HIV - Tracy Flynn (Comprehensive Health Educator -Seattle Public Schools)
will provide overview summary of YRBS data from various sites that collect related to GLBTQ youth. (20 minutes)

Keynote / Identity Development -- Caitlin Ryan (45 minutes)
Caitlin will discuss GLBTQ youth identity development and it's relation to risk behaviors.

Break - (15 minutes) mags, newspapers, videos, etc. on display

Interactive activity on GLBTQ culture / Michael Gipson, Advocates for Youth - (45 minutes)

Carousel Brainstorm Technique will provide a 45 minute interactive session to examine GLBTQ culture.

Youth Panel (1 hour and 15 minutes) / including one college student, two students involved in Seattle Safe Schools programs and three youth from Atlanta YouthPride

Lunch -- 1 hour

Program Examples for Creating Safe Climates - panel (1 hour 15 minutes)

- Kate Frankfurt – Director of Public Policy, GLSEN
- Tracy Flynn – Comprehensive Health Educator, Seattle Public Schools
- Art Coleman – Deputy Assistant Secretary, Department Of Education
- Michael McNeil – Safe Zones Project, ACHA

HIV Prevention Program Examples for youth in high-risk situations – panel (45 minutes)

- Advocates for Youth – On-line communities – Kent Klindera, Advocates for Youth
- Tim Hack – GSAs Incorporating HIV Prevention, Massachusetts Department of Education
- Katina Bonaparte – HIV specific college programs, ACHA

Break (15 minutes)

How our NGOs can assist in process: Presentation from DAY One Meeting / Services available via these 7 NGOs, efforts to begin collaborating with others, including DHAP efforts around glbt youth-- (45 minutes)
(30 minutes) Open Discussion to ask questions and think of other links.

Closing Remarks - John Moore & Diane Allensworth & DHAP official (Mary Willingham)

Tool kit (possible items):

Fact sheets - NYAC, AFY, NNY, others

GSA's -

List of websites - (YP has created one), AFY, NYAC

Terminology - Factsheet from SMYAL or others

DHAP list of 65 CBOs who receive funding for HIV Prevention and work with glbt youth and/or adults.

List of publications and/or contacts