Minorities Get Funding in AIDS Battle

by Alex MacDonald

Mayor Dianne Feinstein and David Gardner, president of the University of California, at a joint press conference last Tuesday announced a $7.1 million federal grant to fund AIDS prevention programs among minorities and drug abusers in San Francisco.

The new programs amount to a unique partnership between UCSF, UC Berkeley, the SF Department of Public Health and the Bayview-Hunters Point Foundation.

Feinstein, in remarks prepared for the press, defined the goals of the research. She noted that the rate of HIV infection among gay and bisexual males had fallen to less than 1% of that population. "The gay community," she went on, "responded with a sophisticated educational program that changed the social behavior that was producing AIDS. The task now is to find a way to repeat that success and halt the spread of AIDS in the minority communities," the mayor concluded.

The new grant comes at a time when public officials and community leaders finally recognize that AIDS threatens heterosexuals, infants, women and ethnic minorities as well as gay men and IV drug abusers. Thomas Coates, for example, the director of the Behavioral Medicine Unit at UCSF, pointed out that 82% of the pediatric AIDS cases occur among ethnic minorities. "This makes the partnership with community health providers," according to Coates, "who are themselves from ethnic minorities, especially vulnerable."

Feinstein, who is nearing the end of her long term of presiding over the development of model programs in the San Francisco gay community's struggle to combat and stop AIDS, departed from the text of her speech to offer some impromptu remarks on the lessons of the last eight years.

"The gay community mobilized," the mayor said. "They got the information out. The spread stabilized because of truthful information."

Leaping ahead to the so-called "second wave," the mayor told the researchers and the press, "Time is our most precious commodity. This grant buys time [for] movement in the minority and IV communities. Be direct. Be candid. Tell people the truth in a way that permits them to address their own [situation]."

Still speaking off the cuff, Feinstein then addressed the financial straits in which the city finds itself and said there "must be an infusion of money from the state. The city's revenues are beginning to decline while state revenues are growing."

After alluding to the diversion of funds from other city programs to the fight against AIDS, Feinstein wound up by saying, "I hope the next mayor will be able to do a better job than I have done."

Her off-the-cuff remarks underscore the seriousness with which officials regard the health crisis. Even Feinstein's most stringent critics consider her treatment of AIDS in San Francisco as outstanding and a suitable national model.

The new grant will allow researchers to study some 1,500 San Franciscans. The research marks the first time health professionals have undertaken to study what has become known as the AIDS culture. Research will focus sharply on how messages about sexual behavior and drug use are heard in minority communities and how they can be most effectively presented.

The studies undertaken with the grant money will occupy some 50 researchers in epidemiology, the behavioral sciences and health policy analysis. In addition, approximately 150 outreach workers will carry results to the field even while the studies are in progress.

UC Berkeley and UCSF will ensure the scientific quality of the studies and policy analysis. San Francisco public health officials will be responsible for providing expertise and sites for research. Minority researchers and the Bayview-Hunters Point Foundation will guarantee the appropriateness of the research to the communities at high risk and provide expertise for carrying it out.

Because of the large size of the groups under study, significant outreach to the communities at risk will become an ongoing feature of the research. Among IV abusers, health officials report that the rate of the spread of HIV infection now approaches 17% and is rising.

Among adolescents — another target group — the incidence of AIDS remains low, but the incidence of sexually transmitted diseases (STDs) is high and growing. In the gay community, STDs have virtually disappeared. STDs have proven to be one of the most reliable predictors of HIV infiltration through a population.

The new studies, then, will look at the following:

- Risk factors for HIV infection in black, Latin and white single men and women, ages 20-44, who live in high-risk neighborhoods in San Francisco;
- Motivational and educational programs aimed at reducing the risk of AIDS in sexually active adolescents;
- An outreach program for IV drug users and their sexual partners to investigate the impact of intensive counseling, social support and antibody testing on reducing AIDS risks (health and social workers generally regard the IV community as the least cohesive and "hard to reach");
- The effectiveness of a program designed to educate dental practitioners on the spread of AIDS (results will be applied to health workers nationally);
- An international exchange program to promote AIDS prevention programs in Africa and Latin America;
- A study of infection and risk factors in Rwanda, Africa;
- An analysis of state and county prevention programs throughout California.

Both the setting of the press conference in UCSF's School of Pharmacy and the cautiously dry language used by academics to describe their work proved provocative for some members of the press. One exasperated reporter, calling the research projects a waste of precious time in the midst of a crisis, demanded to know why they don't "just get out there and do something"?

Professor Coates, although the reporter addressed her question to another speaker, took the floor and called the question "naive. Only San Francisco provides data on what works and why."Noting that behavior change requires coordinated, concerted effort, Coates then drove his point home: "If we don't do this kind of work," he said, "we will.have the same kind of carnage in minority communities as in the gay community."

The grant to UCSF comes jointly from the National Institute of Mental Health and the National Institute of Drug Abuse. It will bring the total expenditure on AIDS by UCSF to $60 million. Expenditures by the city have risen steadily from $170,000 in the city's first AIDS budget to the current level of $30 million. ■

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Examiner/Kurt Rogers

COUNSELOR KAREN MCELROY, SECOND FROM LEFT, SPEAKS WITH TEENS AT AIDS CONFERENCE
Experts said minority men are at high risk for AIDS and must be encouraged to practice safe sex

Black women's conference focuses on AIDS dangers

By Candy J. Cooper
OF THE EXAMINER STAFF

A first-ever conference on black women and AIDS in San Francisco Saturday drew 150 women to hear disturbing statistics on the spread of the disease in the minority community, and to discuss a subject of special sensitivity: resistance, particularly among minority males, to safe-sex practices.

The Women and AIDS Conference, attended by Rep. Nancy Pelosi, D-San Francisco, was organized by Bay Area women who said black leaders should take a greater role in combatting AIDS as it spreads into the minority community.

"The government doesn't have the ear of the man on the street," said Dr. Mindy Fullilove, associate director of the AIDS research group at the Bayview-Hunters Point Foundation. "Black leaders have the ear of the man on the street and we have to whisper, 'Hey, man, you have to use a condom.'"

Black women and teen-agers at the conference saw skits, heard lectures and attended workshops, one of them featuring an array of marital aids and condoms — which the women unwrapped and stretched over their hands.

"Many black men do not want to use condoms," said Julianne Malveaux, president of the San Francisco Business and Professional Women's Club Inc., the sponsor of the conference. "They say it's like wearing a raincoat in the shower.

"But the fact of the matter is that sex is not a one-way street. (Women) have to begin to say, 'If you want to have sex with me, you have to use a condom.'"

Fullilove said 25 percent of people with AIDS in the United States are black and Latino and 70 percent of all women with AIDS are black and Latino. About 80 percent of all children born with AIDS are black and Latino.

'(Women) have to begin to say, "If you want to have sex with me, you have to use a condom"'

— Julianne Malveaux, president, S.F. Business and Professional Women's Club

Black women, according to Fullilove and others at the conference, should be targeted for AIDS education because they have a tradition of leadership in the black community. In addition, they may have sex with members of a high-risk group — bisexual men and intravenous drug users, she said.

Black women must learn before they have sex whether their partners are intravenous drug users, bisexuals or men who have served time in prison or military service, none of which may at first be evident to women.

"A large number of our black men are incarcerated for years with other men," warned Rita Times, a public health nurse. "They do not consider themselves homosexual or bisexual (but) they do participate in man-to-man sex."

The taboo against homosexuality remains strong in the black community, and few men will admit to such sexual practices, speakers said.

The message to black women, then, was to wait before having sex — months if necessary — to get to know their men, and to practice safe sex. "It's past the time for having sex in the dark with the lights out," said Times.

Karen McElroy, a shelter-care counselor from the Bay Area Service League, said she brought seven teen-agers from foster families in the San Mateo area to the conference.

"We've done a lot of AIDS training, but it's geared toward white people," said McElroy. "When that happens, black kids think it doesn't affect them. . . . They fall asleep."

She said many of the teen-age girls who are sexually active "don't like condoms" and will have sex without them.

"Our kids are really needy, so they tend to give in to what a person says," said McElroy. "These girls are like fish when it comes to boys — they'll swim anywhere."

A conference on AIDS for black clergy was held at the Evergreen Baptist Church in Oakland Saturday; its theme was the black church's role in the fight against AIDS in the black community.

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P. A4

S.F. Hosts Bay Area Forum On Black Women and AIDS

By Evelyn C. White
Chronicle Staff Writer

Alarmed by the rapid increase of AIDS in minority communities, Representative Nancy Pelosi will be among a group of civic leaders who will participate today in the first Bay Area conference on black women and AIDS.

"Ethnic minority groups have clearly been hit hardest by this epidemic," said Pelosi, a San Francisco Democrat. "It is critical that we in Congress act quickly and decisively in the face of AIDS."

Sponsored by the San Francisco Business and Professional Women's Club, the free conference will be held from 9 a.m. to 3 p.m. at the Potrero Hill Neighborhood House, 953 De Haro Street in San Francisco.

Earlier in the week, Pelosi introduced a bill in Congress that would provide $300 million for home and community-based AIDS treatment as an alternative to hospital care. Many health officials believe that such treatment plans are more compatible with the cultural needs of ethnic minorities.

Conference Co-Chairwoman Carol Tatum said the conference is designed to help black women curb the spread of AIDS through education and to develop comprehensive strategies for assisting minorities suffering from the disease. Among other topics, the conference will address AIDS testing, high-risk behavior and safe sex.

"We want to provide education and information that will empower black women to take control of their bodies and to become involved in a movement that helps to prevent the spread of AIDS," Tatum said. "It is critical that Bay Area black females, young ones in particular, become politically mobilized around AIDS."

Blacks are the largest group diagnosed for, exposed to and at risk for AIDS in the world. Nationally, according to the Centers for Disease Control, 25 percent of people with AIDS are black; 51 percent of women with AIDS are black and 60 percent of children with AIDS are black.

In San Francisco, blacks, who represent 12 percent of the population, make up nearly 7 percent of the 4,514 AIDS cases diagnosed in the city so far.

"We have every reason to believe that the rates of AIDS infection among blacks is going to increase," said Denise Neal of San Francisco's Department of Public Health. "Continuous education is thoroughly warranted."

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S.F.'s black addicts hit hard by AIDS virus — one in four

By Jayne Garrison
OF THE EXAMINER STAFF

Although a tidal wave of AIDS has not swept over West Coast drug addicts like it has in the East, it is coming dangerously close to San Francisco's black drug users.

One-fourth of the estimated 3,600 black addicts here are infected with the human immunodeficiency virus, HIV, which causes acquired immune deficiency syndrome. That's nearly double the number of two years ago, according to city studies of drug users in treatment at methadone clinics. In contrast, the surveys indicate just 7 percent of white addicts are infected, and 12 percent of Latinos.

"It's increasing dramatically," says Dr. Richard Chaisson, who treats infected addicts at San Francisco General Hospital.

Nor is the trend in San Francisco alone. Nationwide, blacks account for a disproportionate 26 percent of AIDS cases, although they comprise 12 percent of the population.

No one really knows why. But this much is clear to researchers: "We're not getting the message across well to blacks," says Dr. Harold Jaffe, chief epidemiologist with the federal Centers for Disease Control in Atlanta.

Like most cities, San Francisco targets its AIDS campaigns at homosexuals and intravenous drug users. But there is growing and disturbing evidence that such strategy is failing, even among black homosexuals and bisexuals, who do not live in the Castro and are less likely to consider themselves gay.

'We're not getting the message across well to blacks'

— Dr. Harold Jaffe, CDC

One theory: Homosexuality is not as accepted in black culture as it is among whites. So black men are more likely to call themselves bisexual, marry and have children, even though they may still have sex with men.

"They're clearly not going to be reached through gay media, or by the gay community," says Noel Day, president of the social policy consulting firm Polaris Research and Development.

Dr. Patricia Evans with the San Francisco Health Department says that to reach high-risk blacks, the city may have to saturate the entire black community with information on AIDS. She says it appears that campaigns targeted toward gays and drug users have limited effect in that particular culture.

So far, that is not being done. Last year, The City gave one $230,000 grant to the Multi-Cultural Training and Resource Center to produce videos and brochures aimed at blacks. But center president Sala Udin says "up-close education, person to person" is what is needed.

This spring The City will fund four AIDS outreach workers in the Hunters Point and Bayview districts — the first time The City has sent outreach workers to those neighborhoods.

It is a positive step, officials say, but a small one considering the alarming high infection rates among blacks.

SUNDAY, MARCH 13, 1988 S. F. EXAMINER

AIDS, S.F. addicts: There's hope

First of two parts

By Jayne Garrison
OF THE EXAMINER STAFF

The second wave of AIDS sweeping through East Coast drug addicts has yet to hit the shores of the Pacific with the same ferocity, and researchers say evidence is growing that it need never hit.

"It's perfectly controllable," says UC-San Francisco epidemiologist Andrew Moss. "My position is, you can deal with this stuff.... The best solution is to find them (addicts) and treat them."

The devastating march of the human immunodeficiency virus (HIV), the virus that causes AIDS, through homosexual communities followed nearly identical patterns in New York City and San Francisco, infecting half the gay men in both cities. Officials feared it was only a matter of time before the tidal wave of HIV overwhelmed addicts in San Francisco, as it has in New York.

But it hasn't.

Seven years into the AIDS epidemic, heterosexual drug users account for just 3 percent of cases statewide and 1.4 percent of the cases in San Francisco, compared with 31 percent in New York City. (Drug users who are gay or bisexual account for 12 percent of San Francisco cases.)

About 15 percent of The City's 13,000 heterosexual heroin and speed addicts are believed infected with HIV but are not yet sick. This compares with an estimated 60 percent of the addicts in New York.

Although the San Francisco numbers are low compared with East Coast cities, they are grim enough. In Los Angeles, officials say, less than 3 percent of its addicts are infected. In Alameda County, the most recent study of 200 addicts at methadone clinics showed 3 percent were infected.

Moreover, the rate of new infection among drug users in San Francisco is rising steadily at 3 percent annually — roughly 300 people a year. Yet even with these causes for concern, researchers say the enormous wave of AIDS that has hit East Coast addicts can be prevented here with treatment and outreach.

"Addicts are educable. They are reachable," says Dr. Robert Benjamin, head of the AIDS office in Alameda County.

The mystery

"The haunting question," says John Watters, director of the Urban Health Study in San Francisco, "is how come San Francisco is not replicating the experience of other cities? Why are we so different?"

AIDS has swept though communities of intravenous drug users not only in New York and New Jersey, but also in Europe — particularly in Edinburgh, Scotland; Milan, Italy; and throughout Spain.

UC-San Francisco researcher Moss notes that in Europe drugs enjoyed a surge of popularity among the young around 1980 — a surge that came just when HIV was spreading undetected and unnamed. It was a deadly coincidence.

In the United States, however, most drug users are older, in their 30s. Here the answers may lie in the alphabet streets of Manhattan's Lower East side — the epicenter of this country's AIDS epidemic among heterosexual drug users.

"In New York, it looks like the virus crossed over from gay men, to gay men who use drugs, to straight men," says Don Des Jarlais, a researcher with the New York state division of substance abuse. Though the reasons are complex, Des Jarlais says, "As best we can reconstruct, the use of shooting galleries led to the rapid spread."

Shooting galleries are to the drug world what bathhouses were to homosexuals: Places where the virus has the potential to spread among hundreds in a night. But while the Bay Area had the bathhouses, it did not have shooting galleries on the scale of southern Manhattan's.

> ***'The haunting question is how come San Francisco is not replicating the experience of other cities?'***
>
> — John Watters

In New York as many as 300 people a night may pass through apartments — businesses, really — where addicts pay a couple of bucks at the door and another few bucks to rent a needle in order to inject heroin. As many as 30 may share the same needle before it dulls or breaks.

Sharing contaminated needles is a very efficient way of becoming infected, and the addicted who populate the shooting galleries of New York and New Jersey go on to infect their lovers and subsequent children.

Informal shooting galleries

California has no equivalent. Here shooting galleries tend to be informal affairs — an alley or an addict's home — where a dozen or so friends gather to shoot and share. Their numbers are a fraction of those who pass through the heroin houses in New York.

Also, of New York City's estimated 200,000 heroin addicts, about 8,000 to 10,000 also are homosexual, creating a bridge between the two high-risk groups, Des Jarlais says.

Such a bridge is less likely in San Francisco, according to John Newmeyer, researcher with the Haight Ashbury Free Medical Clinic. Of San Francisco's estimated 16,000 intravenous drug users, about 3,000 are believed to be gay. They tend to segregate themselves by sexual persuasion and by drug of choice, Newmeyer says.

"Very few gay men here shoot heroin," he says, thus there is less chance of contact with heterosexual drug users.

Instead, the drug of choice among gays is amphetamine — intravenous speed "used as a sexual performance tool," says Wayne Clark, head of The City's substance-abuse division.

For all those subtle differences, and because the infection rate among drug users is still comparatively low, experts say California has a chance to hold back the second wave. But they warn it will take money and unorthodox methods.

Stopping the tide

John Watters of the Urban Health Study has learned one fact dealing with infected addicts on the streets: "If you can't get them into (drug-abuse) treatment within 48 hours, you lose 57 percent of them."

And The City often cannot.

San Francisco spends nearly $1.9 million on services for drug users at risk for AIDS, and another $6.5 million on drug treatment in general — a combined $3.5 million increase in the past few years.

But there are waiting lists at every public treatment clinic. The City offers methadone treatment for 870 heroin addicts. But just 70 HIV-infected addicts, among a total of an estimated 2,000, are accommodated in special programs.

"I've been going bananas trying to get money for this," says Clark at substance-abuse services.

Some workers at nonprofit clinics say The City has not planned as effective a campaign against AIDS among drug users as it had done among gays. But at City Hall, officials say they are hampered by an unresponsive federal government.

Traditional pamphlets do not work with drug users, they say. Treatment, free bleach to clean needles, and distribution of new needles help control the spread of the virus, they say. Yet the National Institute on Drug Abuse, the federal agency leading the nation's $76 million effort to stop AIDS among addicts, as a matter of policy does not give money for treatment. And the federal Bureau of Alcohol and Drug Abuse, which does, has not earmarked funds specifically for treating infected users.

Pressure is growing. President Reagan's own Commission on AIDS last month called for about $1.5 billion in new treatment services for addicts. Only by getting them off drugs, experts say, can anyone guarantee they will not share needles, which is as much a part of the culture as passing a marijuana joint was to a generation in the 1960s.

The call comes at a time when there is growing evidence in San Francisco that drug users can change their behavior — as long as they are not ordered to quit their habit, and as long as the tools they need to change are available.

More addicts cleaning needles

A study by Dr. Richard Chaisson, who tracks AIDS among drug users in The City, showed that three years ago an overwhelming 71 percent of heroin addicts shared needles. Just 6 percent of them cleaned the needles with bleach before use.

In 1987, a year after outreach workers began carrying vials of bleach to addicts on the street, a second survey showed that although 71 percent still shared needles, nearly half were first cleaning the needles. (Another survey by Watters found 87 percent of users on the street reported cleaning their needles.)

Partly because of the success of bleach, the Mid-City Consortium, a group of six nonprofit groups, is proposing a needle exchange program here as part of a four-point program to combat AIDS. The group also advocates more outreach workers to hand out bleach on the streets, and a drug-treatment slot for every user who wants one, director Harvey Feldman says.

Former Mayor Dianne Feinstein opposed the needle proposal. Mayor Agnos has not decided either way.

So far, New York is the only U.S. city considering launching a needle exchange. Des Jarlais says the plan is to lure addicts in for a needle, then urge them to get into drug treatment.

Based on New York's experience, he warns: "If you set it up so the only change you'll accept is for them to stop drugs, you'll fail. But if you give an addict the choice between a clean needle and a dirty needle, the addict will pick the clean one."

San Francisco Examiner
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** TUESDAY, JULY 28, 1987

Blacks and Latinos missing message on AIDS

By Lisa M. Krieger
EXAMINER MEDICAL WRITER

The first studies of high-risk behavior by San Francisco blacks and Latinos show that the AIDS prevention message is not getting through.

An estimated 35.7 percent of San Francisco's black residents and 13 percent of Latinos routinely put themselves at risk of the disease by sharing needles or having unsafe sex, according to two Health Department surveys made public Monday. Those are the two main avenues of AIDS transmission.

Without better education, the AIDS problem could explode within San Francisco's black and Latino communities in the next five years, Health Department officials warned.

"It is always the most socially and economically deprived groups who get the message last, need it most and are hardest to reach," said Dennis Osmond, an AIDS and minorities specialist at UC-San Francisco and San Francisco General Hospital. "It's alarming, but it doesn't surprise me."

Gene Bregman of Fairbank, Bregman and Maullin, the company that conducted the survey of Latino residents, said: "Most people are aware of the seriousness of AIDS in the general population — but not in their own community. They are greatly misinformed or uninformed about the disease, how it can be spread and how its spread can be reduced."

Although the threat of acquired immune deficiency syndrome to minority groups and the need to educate them have been apparent for more than a year, this is San Francisco's first major effort to gather data to assess behavior. The Health Department will conduct a similar study of Asians in San Francisco within the next several months.

No similar survey of whites has been conducted. But the researchers credited education programs with helping to drastically reduce the spread of AIDS among San Francisco's gay men, who are mostly white and among whom homosexual sex is the main mode of transmission.

But the programs haven't targeted minority groups, where the disease is spreading fastest among intravenous drug users and their sex partners.

The rate of AIDS cases has doubled during the past three years among The City's intravenous drug users, according to George F. Lemp, a Health Department epidemiologist.

In New York, an estimated 70 percent of intravenous drug users are infected by the HIV virus. "We don't need to look too far to see what can go wrong without education," said George Rutherford, medical director of the Health Department's AIDS office.

There are many misperceptions about the disease, the surveys found. Many of those interviewed thought that AIDS could be transmitted by sitting on toilet seats, by swimming in pools or by sex with homosexual women. Most thought it was safe to share needles with one person.

Many men believe, mistakenly, that heterosexual sex is safe, the studies show. More than three-quarters called "normal heterosexual/vaginal sex" safe, and only 20 percent considered use of condoms to be protective.

The survey of 400 black residents, interviewed at random by Polaris Research and Development, showed that:

- 4.5 percent are at very high risk of AIDS by sharing needles or by engaging in sex with people who have AIDS or AIDS-related complex. Sixteen said they had shared needles with at least 34 people, including strangers, during the past six months.
- Another 31.2 percent of blacks place themselves at risk by having unprotected sex with people in high-risk groups.
- There is a hidden population of gay and bisexual black men — 14 percent of those interviewed — who don't tell their sex partners of their risky activities and the potential threat of AIDS.

'It is always the most socially and economically deprived groups who get the message last, need it most and are hardest to reach'

— Dennis Osmond, an AIDS and minorities specialist

Of the 404 Latinos interviewed by Fairbank, Bregman & Maullin Inc.:

- Eleven percent engage in unsafe sex and 2 percent share intravenous needles.
- More than half said they knew "little or almost nothing" about AIDS. Only 5 percent knew how AIDS is transmitted.
- Seventy-five percent said they preferred getting AIDS information in Spanish.

Neither survey attempted to determine if the people questioned were infected by the AIDS virus.

Earlier Health Department surveys of AIDS cases has shown that needle sharing and heterosexual sex are much more common routes of AIDS transmission among blacks and Latinos than among whites, for whom homosexual sex is the main way the virus is spread.

For instance, 13 percent of blacks with AIDS were infected through drug use and 3.8 percent through heterosexual sex. Among whites, only 0.4 percent got AIDS through drug use and another 0.4 percent got it through heterosexual sex. Among Latinos, 8.7 percent got AIDS through intravenous drug use and 3.8 percent through heterosexual contact.

The disease must be discussed in the groups' own language and lingo, the Health Department officials said. But state policy discourages use of any nonmedical terminology in brochures, according to Jeff Amory of the San Francisco AIDS Office. "Any slang, nonmedical terms tend to be disapproved," he said.

'Most people are aware of the seriousness of AIDS in the general population — but not in their own community'

— Gene Bregman, member of survey firm

Many do not realize that they are at risk because they do not understand the terminology, the surveys found. Some people consider themselves heterosexual even if they have same-sex partners. Some call themselves gay but have children. Others say they don't share needles — except with husbands, wives, lovers, friends or relatives.

"The threat is not yet clear to the community," the Polaris report concluded. "These communities are only at the earliest stages of awareness about AIDS."

In San Francisco, there have been 6.95 AIDS cases per 1,000 white residents, 2.12 per 1,000 blacks, 2.53 per 1,000 Latinos and 0.32 per 1,000 Asians since the epidemic began in 1981.

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Surveys Detail S.F. Minorities' 'Very High Risk'

By Randy Shilts

Nearly 4,000 San Francisco blacks are at "very high risk" of contracting AIDS, according to surveys of the city's black and Latino communities released yesterday.

Among other findings, the two random surveys of residents of black and Latino neighborhoods commissioned by the San Francisco Department of Public Health found:

■ 4.5 percent of the city's 84,000 blacks indicated they are at "very high risk" of contracting AIDS, either because they are having sex with someone with AIDS or AIDS-related complex, or because they share needles during intravenous drug use.

■ Of the 7 percent of black men identifying themselves as exclusively gay, half reported behavior that put them at high risk for getting AIDS.

■ 13 percent of the city's 84,000 Latinos were at some risk for AIDS either through drug use or unsafe sexual practices.

■ 2 percent of Latinos share needles during intravenous drug use, putting themselves at profound risk of contracting AIDS.

Although blacks and Hispanics, respectively, make up only 6 percent and 7 percent of San Francisco's AIDS cases, their presence among the nation's AIDS caseload is disproportionately high, largely because of the high rates of intravenous drug use among the urban poor in the east.

Nationally, for example, blacks comprise 12 percent of the population, but they account for 24 percent of the 38,807 Americans diagnosed with AIDS as of last week. Hispanics, who make up 7 percent of the population, account for 14 percent of the nation's AIDS cases.

Because preliminary studies have shown a growing level of AIDS virus infection among local drug users, the health department commissioned the Polaris research firm to conduct a door-to-door survey of black neighborhoods and the market research firm of Fairbank, Bregman and Maullin to conduct a comparable survey of Latino neighborhoods.

"I would describe these results as reflecting a very significant problem," said Dr. David Werdegar, San Francisco public health director. "In each of these minority communities there is a lack of information, and there is high risk."

Noel Day of Polaris said, "We found the (black) community was very well aware of AIDS and very concerned about it. We also found very spotty knowledge."

Of particular concern was "a hidden population of bisexual men" in the black community, according to the Polaris report.

"Although they have a high degree of personal concern about AIDS, they also tend to deny their risks and the threat that AIDS poses to them," the report said.

DRAFT

POLICY FOR DELIVERY OF AIDS SERVICES TO PEOPLE OF COLOR

A. POLICY

1. In the designing and planning of AIDS programs the Department of Public Health, specifically the AIDS Activity Office, shall include programs and strategies which will meet the unique needs of People of Color at risk or infected with HIV and help prevent the transmission of HIV within the Black/Chicano/Latino, Asian and Pacific Islander and American Indian ethnic communities.

2. In the delivery of services, the Department of Public Health, specifically the AIDS Activity Office, shall ensure that all services are culturally and linguistically appropriate for AIDS users.

3. The Department of Public Health shall ensure that all staffing patterns in contractors and DPH offices providing services shall be sensitive to People of Color and reflect the populations targeted and served.

B. FUNDING

1. Department of Public Health shall work cooperatively to provide information on requests for proposals and other funding of sources available to the community. In order to promote the funding of appropriate services, either through the Department of Public Health or community-based organizations. In order to identify gaps and prevent a more comprehensive continuum of services which will adequately meet the needs of People of Color.

2. The Department of Public Health shall see to it that each contactor shall submit a plan on how they will provide and implement a program for People of Color as part of their yearly contractual renewal.

3. Monitoring of the above shall be done on an on-going basis by a group composed of the Department of Public Health and community providers who serve People of Color.

C. SPECIAL CONCERNS

1. Liaison with existing broad based ethnic community groups shall be maintained, namely with such groups as the Latino Coaltion for AIDS/SIDA Education and Action, the Black Coaltion on AIDS and the Third World AIDS Advisory Task Force and others. Special attention shall also be given to other overlapping areas which contain significant percentages of People of Color including substance abuse services, services for women and children, chronic and other support services.

Draft prepared by Hank Tavera, Chairperson, Third World AIDS Advisory Task Force and Miguel Ramirez, Spokesperson, Latino Coaltion for AIDS/SIDA Education and Action. Submitted to Dr. Werdeger via the AIDS Advisory Committee, Department of Public Health; Decmeber 9, 1986.