

AIDS Rate Increases for Gay Men

Santa Cruz County lags behind state

by Helen Meservey

FOR BETTER AND FOR WORSE, SANTA Cruz County lags behind the rest of the country — and the world — in terms of the pattern of AIDS infections among the local population.

A recent epidemiology report from the county Health Services Agency (HSA) reports that the incidence of AIDS here tends to occur highest among the population of men who have sex with men. Nationally, that segment of the population is reported to have experienced a significant decrease in the incidence of this disease, largely due to effective education campaigns and prevention practices, local health officials say.

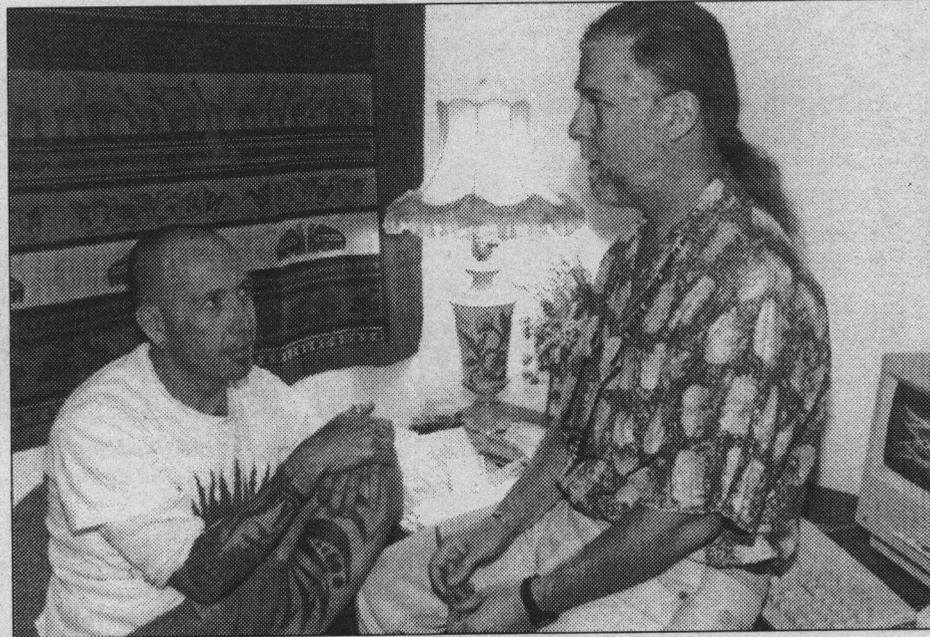
But in this county, the incidence of HIV infections among young gay men has been increasing faster than among other groups.

"The reasons are very complicated," says Kaleo Kaluhiwa, health program specialist at HSA. "One reason is that the infection through all populations is going into lower ages. But for men who have sex with men, there is a generational difference in terms of culture and dealing with death and loss. Older gay men have experienced a lot of it from the AIDS epidemic. For them, the effects are more real. But youth, in general, have a sense of invulnerability. They haven't had much experience."

Kaluhiwa says working with youth groups in the county has taught him that young men with homosexual interests in some cases consider AIDS and HIV to be inalienable aspects of gay life. Media coverage of AIDS over the last 10 years often equates the two, he says, which might contribute to such fatalistic attitudes. Moreover, despite the emergence of a vibrant and healthy gay culture here and in nearby urban centers such as San Francisco, homophobia is not extinct. Kaluhiwa says he knows of young teens whose families have rejected and evicted them, leaving the kids unduly susceptible to prostitution, substance abuse and even suicide.

On Par with State

County statistics tend to parallel those in the rest of the state, according to the county's report, which refers to AIDS and HIV infections during the 1996 calendar year. Among the 405 diagnosed AIDS cases last year, 71 percent were attributed



DAVID ALEXANDER

Volunteer Cloyce J. Wall, left, discusses becoming a speaker in a SCAP educational project with Director of Education and Prevention John David.

to a risk category defined as "men who have sex with men." (That term is employed, officials say, because not all men who have sex with men consider themselves homosexual.) Ten percent occurred among people who reported using injection drugs, nine percent among a cross section of those two risk categories and four percent to heterosexual contacts with someone infected or at risk for HIV. Three percent of cases were reported with no identified risk category, two percent were recipients of blood or blood products and one half of one percent were children of HIV infected mothers.

"This report just gives us a read on the individuals who are continuing to become infected," explains Jeri Ross Martinez, HIV test program coordinator with HSA. "It also lets us track to find out if there are certain populations that are at greater risk. AIDS is still a huge, huge epidemic and problem. It's killing people."

The World Health Organization reports that 26 million cases of AIDS have been logged since the human immuno-deficiency virus (HIV) was identified in 1981. These days, 85 percent of new cases are considered to be transmitted through heterosex-

ual contact and most remaining cases divided evenly between needle sharing and male-male sex.

According to the county's report, "there are probably no more than 759 individuals living with HIV infection in Santa Cruz County." In the last five years, 195 of those cases have occurred in males, 17 in females. National tracking patterns suggest that the infection rate among women could grow.

Behind the Times

"Santa Cruz County appears to be 10 years behind other parts of California, in terms of trends," says John David Dupree, director of education and prevention with the Santa Cruz AIDS Project. "Because of the incidence of infection, about 70 percent of our focus and energy is on the population of men who have sex with men. Around the world, it's nothing like that."

The WHO reports that between five and 10 percent of AIDS cases around the world are attributed to that population. In this country, the breakdown is closer to 50 percent.

"The focus needs to be on the vulnerable groups," Dupree adds. "So we're not doing the

same things to fight this disease as they're doing in New York City and Zambia."

For seven years, Dupree worked as an AIDS prevention and education specialist in Africa. He says accessibility not only to disease prevention but also to political and social resources can help stave the spread of infection here more easily than in many developing nations.

Foremost in preventing infection, he says, is developing a strong sense of self-respect. Individuals must believe that their right to stay healthy — alive, ultimately — is greater than the need for fleeting sexual gratification or the desire to be accepted by a particular partner. Women, he says, often find themselves at risk because they face greater threats.

Women at Risk

"We need to retrain women to stand up for themselves," says Dupree. "They have always been told that they're second-class citizens, that they're inferior. It comes down to a self-esteem issue. As a community, we need to support women for taking care of themselves."

Educating the population about AIDS and how to prevent infection still ranks high on the public health agenda. SCAP has an active speakers bureau, as well as several outreach coordinators who promote safer sex practices among teens and those who practice high-risk behavior such as sex with multiple partners or anonymous partners.

In terms of stemming the spread of HIV and AIDS, the HSA has a similar mission, though programs there attend to the medical side of the problem while SCAP and the needle-exchange program, for example, treat the more "psycho-social aspects," says the HSA's Martinez.

While prevention information has nearly saturated the populace, health officials believe their charge now is to go after the "underlying problems" that might allow a person to practice unsafe sex or to share an injection needle, for example:

"If a guy complains that a condom means sex doesn't feel as good, tough shit," says Dupree. "It's not worth dying for just to give him that extra little tingle."

For free, anonymous HIV testing, call HSA at 454-4014. For more information on resources or to volunteer, call SCAP at 427-3900. The state AIDS hotline is 1-800-864-AIDS; the national number is 1-800-342-AIDS.

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7-17-97