

Race and the HIV Epidemic

THE CHALLENGE OF HIV/AIDS IN COMMUNITIES OF COLOR

PART - V

Injection drug use has played a significant role in the disproportionate impact of AIDS on African Americans and Hispanics/Latinos. In these communities the proportion of AIDS cases attributable directly to injection drug use is four times that for whites (40 percent, as compared to 9 percent). Similarly, of persons with AIDS whose disease is linked to injection drug use, fully half have been African American (as of 1992) and another 29 percent have been Hispanic/Latino (CDC, 1992s).

According to National Institute on Drug Abuse estimates, there are 1.1 to 1.3 million injec-

tion drug users in the United States, all of whom are potentially at risk for HIV infection, as are their sexual partners and children (NIDA, 1990). The Public Health Service estimates that in communities with large populations of illicit drug users, such as New City, between 30 percent and 40 percent of injection drug users aged 15 through 24 are infected with HIV (PHS, 1990). Furthermore, numerous studies have shown the HIV infection rates among white drug

Injection Drug Use

users.

Although members of subordinated racial and ethnic groups are not the only people who use illicit drugs, in the United States injection drug users tend disproportionately to be African American and Hispanic/Latino. The National Household Survey on Drug Abuse found that African Americans are twice as likely as

drug use has been disproportionately associated with northeastern urban life. It is estimated, for instance, that between one-fourth and one-half of injection drug users live in New York City alone (Turner, Miller, and Moses, 1989), a disproportionate number of whom are African American and Hispanic/Latino (Friedman et al., 1987). As some

which heroin has become a staple of the local economy. According to researchers, "By 1970, African-Americans had become an urbanized population, even more so than the U.S. population generally" (Singer, 1991). Demographic trends indicate that one of the fastest-growing groups of African Americans are those who are poor and live in census-defined poverty areas of central cities (Bureau of the Census, 1992).

A similar set of circumstances

frequency of injection is positively correlated with likelihood of HIV infection. A study in New York City found that white users inject less frequently than African Americans or Hispanic/Latinos (Friedman, Des Jarlais, and Sterk, 1990). In addition, the use of shooting galleries - places where one may rent reusable drug injection equipment - provides a mechanism for the spread of HIV to large numbers of other injection drug users and has also been linked to HIV exposure. White users patronize shooting galleries less often than other groups (Des Jarlais et al., 1989). Also HIV may have entered African Americans and Hispanic/Latino injector groups earlier than white groups and may have saturated these drug-using communities, resulting in a high prevalence of infection in the local drug population network (Schoebaum et al., 1989).

Significantly, injection drug use has played a major role in spreading HIV among heterosexuals and newborn babies. Of all AIDS cases attributed to heterosexual contact, 53 percent involved persons who reported sexual contact with an injection drug user. Three-fifths (59%) of all heterosexual AIDS cases related to injection drug use are African American. Whites represent 21 percent of these cases and Hispanic/Latinos represent 19 percent. In addition, prenatal transmission associated with a mother's exposure to HIV owing to injection drug use represents 40 percent of all cases among children. Of these cases three-fifths (59%) are African American, one-fourth (25%) are Hispanic/Latino, and one-seventh (15%) are white. Prenatal transmission associated with a mother's exposure to HIV owing to sexual contact with an injection drug user represent 17 percent of all cases among children. Of these cases African Americans represent 45 percent, Hispanic/Latinos 39 percent, and whites 15 percent (CDC, 1992e).

Societal and Community Influences: Looking Beyond HIV as Solely an Individual Behavioral Problem.

As noted earlier, AIDS cannot be seen as solely an individual behavioral problem. In communities of color, attention must be paid to the social and economic setting of risk behaviors. To the extent that poverty (See *The Challenge*, Page 16)

HEALTH

AMERICAN LUNG ASSOCIATION OF NV OFFERS ASTHMA SUPPORT GROUP

American Lung Association of Nevada offers a free Asthma Support Group for adults and children with asthma. The next meeting will be Wednesday, March 24, 1993 at 7:00 p.m.

Lynda D. Haight, MS with Haight's Family Counselors will be our guest speaker. Children may participate in supervised learning activities.

Meeting are held regularly on the last Wednesday of each month at UMC's Education Bldg., 2040 West Charleston in rooms C&D on the 6th floor.

For more information, contact the American Lung Association of Nevada at 454-2500.

whites to have used drugs intravenously. While the reasons for this greater prevalence are not fully understood, several factors seem implicated.

Certainly significant is the fact that over the last decades, African Americans have migrated to and been abandoned in inner-city areas, where drug trafficking is heaviest. Although the injection of illicit drugs is thought to have begun in the American South (O'Donnell and Jones, 1968), centers of narcotic distribution historically have been located in impoverished urban areas of the northeast where they are less likely to generate a police response or political opposition. As a result, injection

researchers have suggested, African American injection drug use has been "a concomitant of urbanization" (Courtwright, Joseph, and Des Jarlais, 1989). As a result of the mass migration of the African American population from the rural South to urban centers, African Americans, who prior to World War II were not considered heavy drug users, increasingly were exposed to narcotics and to conditions that spawned illicit narcotic use (Singer, 1991). Unlike the immigrants who lived in these same or similar neighborhoods before them, low-income African Americans have been unable to distance themselves from decaying inner-city conditions in

has occurred in the Hispanic/Latino community, especially with regard to Puerto Ricans. In the 1950s and 1960s, Puerto Rico's shift from an agricultural to an industrial economy brought about an increase in migration from the island to the continental United States. In search of jobs, Puerto Ricans settled in urban areas where they were likely to find employment as unskilled laborers. Their experience in these urban areas was not unlike that of African Americans. In these urban areas, Puerto Ricans often found open drug markets, oppressive conditions, and few economic opportunities. As one researcher observed, "Heroin is seemingly everywhere in black and Puerto Rican ghettos and young people are aware of it from an early age" (Waldorf, 1973). Furthermore, during the late 1970s and early 1980s there was a substantial increase in the use of these drugs, primarily among persons who already had histories of injecting drugs.

A permanent African American and Hispanic/Latino "Ghetto," characterized by a virtually unchecked heroin trade, widespread unemployment, and poverty, among other factors, has assured that urban African American and Hispanic/Latino populations suffer high rates of addiction to injection drugs (Courtwright, Joseph, and Des Jarlais, 1989).

Not only is injection drug use disproportionately high among African Americans and Hispanics/Latinos within the universe of injection drug users, HIV infection is also highest among these same groups. The reasons are several. It is increasingly clear from a decade of research that where sharing of injection equipment is common,

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HIV/AIDS TRAINING (RARE-T) SCHEDULED FOR TEENAGERS

Nevada Homes for Youth is sponsoring a two day workshop for teenagers titled "Reduce AIDS Risk Effectively In Teens (RARE-T)" on April 16 and 17, at the University of Nevada, Las Vegas.

The program targets teens who are at high-risk for HIV infection. The 25 youth selected to attend will receive information and training on HIV transmission, antibody testing, and HIV disease; self-esteem; communication skills; alcohol and other drugs; and issues such as intimacy, responsibility, and risk reduction.

This workshop is free and lunch will be provided. This training course is one of several AIDS and substance abuse training programs available through the Center for Substance Abuse Treatment and Westover Consultants, in Washington, D.C.

Interested youths can contact Nevada Homes for Youth at 256-9200 or 736-2428.



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