

HIV/AIDS: Raising Minority Community Awareness¹

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AIDS as an Epidemic

Over a quarter of a century ago, we first learned of a devastating disease known as Human Immunodeficiency Virus (HIV) which can develop into Auto Immunity Deficiency Syndrome (AIDS).



The Center for Disease Control and Prevention (CDC) estimates that more than 1.1 million people in the United States are living with HIV (without AIDS), and another 36,828 are actually living with AIDS. These statistics do not take

into account the number of unknown cases.

In the early stages of AIDS discovery, the media portrayed images of AIDS as being a disease that predominantly affected white, gay males in mainly urban population areas. This portrayal caused many heterosexual Caucasians as well as African Americans and other minority groups to assume that they were not at risk. Today however, AIDS in the United States has infected a high proportion of minorities, especially African Americans and Hispanics/Latinos. Racial categorization alone is not a risk factor for HIV/AIDS, but certain racial groups are more prone to life situations that put them at risk for

contracting the virus. For example, high rates of sexually transmitted diseases, lower socioeconomic status, decreased access to health care, intravenous drug use, secreted homosexuality, and language barriers all contribute to high prevalence of HIV/AIDS among African Americans and Hispanic/Latinos.

Solutions to this problem lie within efforts targeted at and within minority communities.

Acknowledging Behaviors

Planned behavior theories suggest that behavior is driven by intentions. This offers promise for HIV/AIDS prevention, especially in minority communities. By utilizing correct intentions, behavioral change should follow. Changing behavior involves targeting:

- the behavior itself (what one is doing);
- normative beliefs (society's view);
- controlled beliefs (laws);
- positive outlook on the above beliefs.

By engaging in the above actions, an individual can understand their beliefs about HIV/AIDS and apply these beliefs to encourage a safe sexual lifestyle and practice safe needle use. For example, deciding to use a condom during sexual activity goes along with society's view on practicing safe sex, and therefore allows you to feel better and more secure with this behavior.

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Being HIV/AIDS Conscious

The following list of questions is useful to find out how HIV/AIDS conscious people really are. Also, this questionnaire helps people to examine their own behaviors and acknowledge how their behavior relates to this deadly virus.

Questions for Sexually Active Persons

The following questions will allow you to determine whether or not you are comfortable and conscious about the HIV/AIDS virus.

1. Have you ever had unprotected sex?

YES **NO**

If yes, how many times? _____

2. I am uncomfortable having sex with my partner without a condom.

Strongly Disagree **Disagree** **Neither** **Agree** **Strongly Agree**

3. I feel good communicating with my partner about various treatment methods.

Strongly Disagree **Disagree** **Neither** **Agree** **Strongly Agree**

4. Have you ever been tested for HIV?

YES **NO**

5. Did you have any interaction with your partner after being tested?

YES **NO**

6. Have the results positively affected your relationship?

YES **NO**

7. Did you and your partner receive relationship counseling after receiving the results of your HIV test?

YES **NO**

If you answer **NO** to questions 4–7, you may want to consider learning much more about HIV/AIDS and prevention measures.

Prevention at its Finest

The best avenue for HIV/AIDS prevention is early intervention and education. People are less likely to engage in risky behaviors if they are taught the proper ways to handle situations at a young age (prior to early adolescence). The following are effective prevention programs that minorities of all ages can adopt in their communities in order to keep themselves HIV/AIDS aware:

- ✂ *Chicago HIV Prevention and Adolescent Mental Health Project (CHAMP)*
http://www.psych.uic.edu/education/clinical_child_psychology/champ.htm
 The program aims at changing individuals' behaviors (how they relate/interact/learn from their parents/guardians), deterring them from involvement in risky sexual behaviors, and helping adolescents focus on academics and other favorable characteristics.
- ✂ *Sisters Informing Sisters About Topics on AIDS (SISTA)*
<http://www.effectiveinterventions.org/go/interventions/sista>
 A program that helps with HIV prevention intervention for African American adult women.
- ✂ *Women Involved in Life Learning from Other Women (WILLOW)*
<http://www.cdc.gov/hiv/topics/research/prs/resources/factsheets/WILLOW.htm>
 Helps women living with HIV decrease their HIV transmission risk.
- ✂ *Sistering, Informing, Healing, Living, and Empowering (SIHLE)*
<http://www.cdc.gov/hiv/topics/research/prs/resources/factsheets/SIHLE.htm>
 A program to reduce the risk of HIV amongst sexually active African American adolescent females.
- ✂ *Us Helping Us, People Into Living (UHU)*
<http://www.uhupil.org>
 Specializes in HIV education, prevention, and risk reduction in the black community.

Implications for Extension

The understanding of theory influencing behavior and knowledge about available outreach programs and their practices provides a resource to help prevent or cope with stressors such as HIV/AIDS. Such knowledge could be employed by Extension professionals and community leaders to educate youth, couples, and families on safe sex practices, therefore reducing risk for HIV/AIDS within certain minority groups.

Resources

HIV/AIDS in the United States
 Centers for Disease Control and Prevention
<http://www.cdc.gov/hiv/resources/factsheets/us.htm>

HIV/AIDS
 National Institute of Allergy and Infectious Diseases and National Institutes of Health
<http://www3.niaid.nih.gov/topics/HIV/AIDS/>

HIV Infection in Minority Populations
 National Institute of Allergy and Infectious Diseases and National Institutes of Health
<http://www.niaid.nih.gov/factsheets/Minor.htm>

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