



COMMUNITY HEALTH AWARENESS GROUP

3028 E. Grand Blvd. (313) 872-2424 phone
Detroit, MI 48202 (313) 872-5546 fax

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A message from the Surgeon General

**By Dr. David Satcher
U.S. Surgeon General**

AIDS increasingly is becoming a disease of women, of the young, and of people of color throughout the world. Added to that group are injection drug users and their sex partners.



DR. SATCHER

While overall deaths are down in this country, AIDS remains a severe and ongoing crisis in African American and other racial and ethnic minority communities.

In 1997, African Americans — who comprised only 13 percent of the total population — reported 45 percent of the AIDS cases. And despite the fact that the AIDS death rate among African Americans has declined, it is still the number one killer of African American men between 25 and 44, and the second leading killer of African American women in the same age group.

Similarly, for Hispanics — who com-

prise 10 percent of the population and 21 percent of AIDS cases — the AIDS death rate decrease has not been as great as it has been for White Americans.

We do have some positive news to share in the United States. Thanks to prevention efforts, we have seen a drop in new reported HIV infections. In addition, persons living with HIV who are taking the new combination drug therapies successfully are not only feeling better and living longer, they have less virus in their bodies and are less likely to infect their partners.

Unfortunately, these benefits are not realized across all communities.

At the federal level, we are attacking this disease from many angles. In the Office of Public Health and Science, we are addressing racial and ethnic inequalities in HIV/AIDS infection rates and treatment.

Following discussions with the Congressional Black Caucus about ways to step up the fight against AIDS in African American communities, the Administration made a promise last year to thwart the growing

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focus on **CHAG**

Welcome to the new Community Health Awareness Group (CHAG) newsletter. CHAG was the first organization in Detroit to provide AIDS education and information from within the African American community.

Located in the heart of the Empowerment Zone of Detroit, CHAG reaches the low income African American community at greatest risk for HIV infection. Our staff goes out into the community with education and counseling to help people reduce their risk for HIV infection. We also do free,

anonymous (without asking your name), and confidential HIV counseling and testing. And we do all this in ways that are sensitive to our culture and have been proven to work with substance-using African American men and women in the inner-city.

CHAG also has the first licensed needle exchange program in the City of Detroit. This successful program — which reduces the risk of HIV infection for drug users, their partners, and their unborn children — has been operating since World AIDS Day 1996.

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in the news

CHAG

expanding

1999 National Conference on African Americans and AIDS

About 1,000 health care providers and activists gathered in Washington, D.C., in February for the first national medical conference on HIV/AIDS in the Black community. Conference attendees addressed several issues underlying the discrepancy in HIV/AIDS between Blacks and Whites, including socioeconomic issues.

“The most important outcome,” said CHAG Executive Director Harry Simpson, “was the recommendations to President Clinton from the African American leadership at the conference.” Dr. Benny Primm’s description of the events that led up to the President’s \$156 million minority initiative was also very important.

Simpson was one of the 33 African American consultants to the Centers for Disease Prevention and Control (CDC) last year who demanded that the CDC declare an AIDS state of emergency in the African American population. Dr. Primm’s story told “how 33 minority consultants and their

anger led to significant social change and increased funding for this public health emergency,” said Simpson. “Dr. Janet Mitchell’s presentation on African American Women and HIV was also excellent.”

Mitchell, Director of Maternal-Fetal Medicine at an east coast hospital, said that the message given to women, “if you are not a drug user or having sex with a drug user, you are not at risk” was the *wrong* message and ultimately put women at higher risk. She also pointed out how women have not been of real concern to the medical community unless they are pregnant and then the concern is preventing transmission to the unborn child, not the woman’s health.

Giving pregnant women only one drug, zidovudine (AZT) which has been proven to reduce the numbers of infants born with HIV, is substandard care, Mitchell said. Triple-drug therapy is now recommended to treat HIV in adults.

Community Health Awareness Group continues to grow to meet the ever-changing needs of the community. Ryan White CARE Act, Title I programs received increased funding for fiscal year 1999 allowing CHAG to add three new initiatives. Additional funding from private sources also allowed expansion of the “Life Points” needle-exchange program. The following changes took place on April 1, 1999.

■ **The Case Management program** added a client advocate position to the staff to assist newly diagnosed individuals. Unfortunately, Veronica Mitchell will not take on this new responsibility due to illness. Her position as a case manager was filled by Keyona Marsh, who moved from CHAG outreach work and will now specialize in providing case management to young adults and adolescents.

■ **The transportation program** has a new staff driver and van to provide transportation services for HIV infected persons in Pontiac, in collaboration with the Pontiac Urban League.

■ **CHAG also established** a new advocacy program to provide services to HIV-infected prisoners in the Wayne County jail. The purpose is to insure continuity of services; making sure prisoners are linked to case management and primary care upon their release. We are seeking someone for this position.

■ **In addition to Title I increases** that allowed the above growth, CHAG received private funding to expand the “Life Points” program. This included a grant from the Drug Policy Foundation to add two part-time nurses, and another from the Tides Foundation to add two needle-exchange site locations, and to add four women-specific exchange hours at the CHAG building on East Grand Blvd., for a new total of one fixed and seven mobile sites.

resources

DCAL

The Detroit Community AIDS Library (DCAL) is a network of libraries and community-based and AIDS services organizations that provides Internet access for persons living with HIV/AIDS to do research to support their own health and well-being. DCAL also provides assistance to those who are unfamiliar with computer use. CHAG is one of the participating organizations. If you have Internet access, you may find DCAL at <http://www.libraries.wayne.edu/dcal/aids.html>.

NATIONAL CONFERENCE

CHAG has ordered copies of the entire set of videotapes from the *1999 National Conference on African Americans and AIDS* for the CHAG library. If you would like to review them at our office, please call to make arrangements. Also, the conference has a web site (www.hopkins-aids.edu). CHAG provides Internet access through DCAL. (see above).

focus on CHAG continued

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Our one-on-one outreach to the inner-city African American community — for this and all CHAG prevention programs — provides a bridge to other health and human services throughout the metro Detroit area. While prevention and education remain the primary focus at CHAG, care programs have been added to meet the needs of those who are HIV-infected.

For many African Americans in the Detroit area with HIV infection or who are at-risk for infection, CHAG is the point at which all other services begin. Once someone knows he or she is HIV-infected, either through CHAG counseling and testing or by referral from many cooperating Detroit agencies, culturally sensitive support and services become available at CHAG free of charge.

Our case management program works with people who are HIV-infected to help

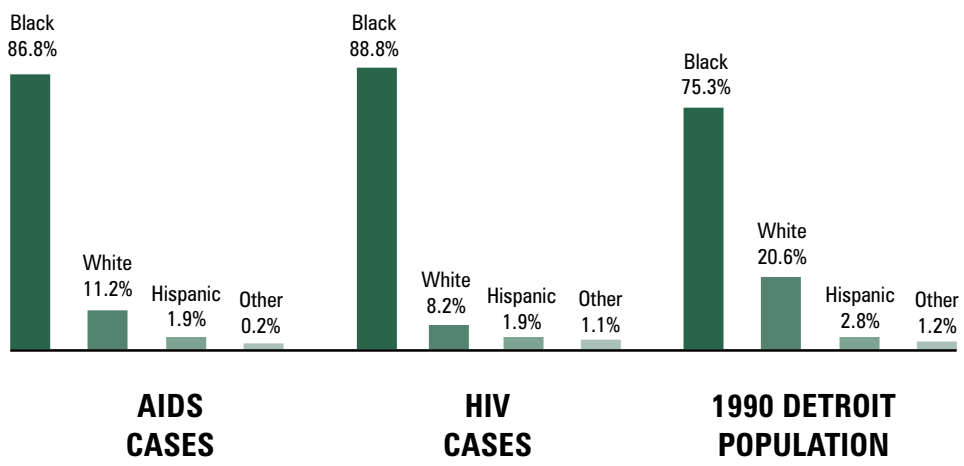
them receive the services they need. At CHAG we provide support groups, referrals for emergency housing, and transportation or bus fare to help people get to doctors' appointments and support group meetings at other agencies.

In addition to hiring staff that reflect the experiences of the people we serve, CHAG involves clients in developing programs and encourages clients to know more about prevention planning by joining in agency and community activities. CHAG has a Consumer's Advisory Group which consists of agency clients and other interested individuals. Their input is sought throughout the development and implementation of all new CHAG programs.

In upcoming newsletters we will give you a closer look at the programs and services that CHAG provides and share information about other metro Detroit service agencies.

HIV/AIDS IN DETROIT

Reported 1991 - 1998



As you can see by comparing the AIDS cases with the Detroit population above, the reported AIDS cases among the Black population in the city of Detroit is higher than among Whites. Also, by comparing AIDS cases with the reported HIV cases, you can see that this inequality is growing.



► **Community Health Awareness Group**
(313) 872-2424

HOTLINES

► **National AIDS hotline**
(800) 342-2437
9 a.m. to 9 p.m. weekdays

► **in Spanish**
(800) 344-7432
8 a.m. to 2 a.m. daily

► **Michigan AIDS hotline**
(800) 872- AIDS (2437)
9 a.m. to 9 p.m. weekdays

HOTLINES FOR TEENS

► **TEENLINK HIV/STD hotline**
(800) 750-TEEN (8336)
4 p.m. to 7 p.m. weekdays

► **Teen hotline (Red Cross)**
(800) 440-TEEN (8336)
6 p.m. to midnight Fri. & Sat.

HOTLINE FOR WOMEN

► **(800) 554-4876**
2 p.m. to 9 p.m. Mon., Wed., Fri.

Surgeon general continued

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threat of the epidemic by enhancing research, treatment, and prevention efforts. President Clinton announced a special package of minority initiatives, amounting to an additional \$156 million in spending for fiscal year 1999 directed at those communities hardest hit. The Department of Health and Human Services will spread the funding to assist and support increased access to prevention and care for people in need.

The Department also saw the need for long-term care related services and announced another \$479 million in Ryan White CARE Act grants. These are designed to place the funds in communities where they are needed most. The grants will pay for primary health care and support ser-

vices for low-income individuals and families in areas hardest hit by the epidemic.

I am confident that we will continue to improve the health of the nation and to care for the most vulnerable, as we are determined to remove this disease from the charts of American health once and for all. But federal funding is only one part of the solution; it will also take community involvement. That is why I commend the Community Health Awareness Group (CHAG) for undertaking this new effort to educate Detroit's African American community on HIV/AIDS.

Dr. David Satcher has been Surgeon General and Assistant Secretary for Health since February 1998. Prior to that he was director of the Centers for Disease Control and Prevention.

New treatment guidelines

National *Guidelines for the Use of Antiretroviral Agents in HIV-Infected Adults and Adolescents* have been updated and were issued in December 1998. The only addition to the drug regimens is Efavirenz (Sustiva), which received U.S. Food and Drug Administration approval nearly three months ago. This was included in the "A" list of antiretrovirals in the updated guidelines. An advantage to this drug is it can be taken once a day. It was also added to the Michigan AIDS Drug Assistance Program's eligible drugs in December.



VILLAGE DRUM

This newsletter is sponsored by Community Health Awareness Group, funded with unrestricted educational grants from DuPont Pharmaceuticals and Agouron Pharmaceuticals.

Founded in 1985, Community Health Awareness Group (CHAG) is a not-for-profit, minority operated, community-based AIDS service organization. Our mission is to address current health issues and concerns of the African American citizens of Detroit, to provide compassionate and nonjudgmental services through culturally appropriate and ethnically sensitive programs, and to develop effective ways of promoting and implementing positive health strategies to influence the overall quality of life of the African American community.

Harry L. Simpson,
Executive Director

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