

Why for sex

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THE AIDS CRISIS STAKES CLAIM ON BLACK TEENS

At an age when most teenagers are worried about getting a driver's license, graduating from high school and going to college, Karen's biggest concern is staying alive.

At 17, Karen, a high school senior who lives in Lithonia, Ga., is trying to cope with the fact that she has HIV, the deadly virus that causes AIDS. Like most teenagers, Karen (not her real name) has dreams about going to college, getting married and having children, but she wonders if she will ever get to do any of those things. "I've changed my mind about going to college so much, saying 'What's the point?'"

When Karen was 13, she succumbed to peer pressure to have sex. By 15, she was pregnant, had contracted two sexually transmitted diseases and HIV.

Despite warnings from her mother about the consequences of unprotected sex, Karen says she did not use condoms regularly. She thought only promiscuous girls got AIDS.

"I was thinking about some girl who sleeps with five people a day and don't take care of her body. I'm a clean person and there wasn't a whole lot of people that I was having sex with, so I just wasn't thinking about it," she says.

Now, in hindsight, Karen, a healthy-looking, vibrant black teenager, says:

"I should have waited. I shouldn't have been so careless."

Karen is one of hundreds of African-American adolescents who have acquired HIV through unprotected sex. Many of these teenagers are suffering in silence for fear of being stigmatized or ostracized by their friends, family and society.

Karen, for example, has only told four people about her illness. Her biggest concern is being stigmatized.

"I just don't want anybody to go through what I'm going through," she says, adding that she tries to maintain a positive attitude. "Sitting around and waiting to die is a waste of time."

BY SHIRLEY L. SMITH

Photos by Scott Larson

Although adolescents between 13 and 19 years of age make up just .4% of the 289,320 AIDS cases reported to the Centers for Disease Control and Prevention through March 1993, people between 20 and 29 years old represent 19% of the AIDS cases.

Given the fact that the average incubation period between HIV infection and AIDS is 10 years, health officials say many of these young adults are likely to have contracted the virus as teenagers. This alarming reality illustrates the need for increased education among adolescents, particularly among poor African-American youths who are at great risk for contracting the virus. Even though white homosexual males account for 42% of all reported AIDS cases in the country, African-Americans are disproportionately affected by the disease.

In the United States, African-Americans make up only 12% of the population, yet they account for about 30% of all reported AIDS cases. In contrast, whites, who make up 80% of the U.S. population, account for about 52% of the AIDS cases.

The total number of African-Americans infected with AIDS to date is 88,238, according to CDC data. Of that number, 461 are teenagers and 17,370 are people between the ages of 20 and 29.

The disparity between the black and white communities is largely attributed to living conditions, says Dr. Ernest Drucker, an epidemiologist at Montefiore Medical Center in New York. A lot of low-income African-Americans live in the inner cities, where the disease is more prevalent due to the high level of injection drug use, he says.

Denise Trotter, a social worker in the Bronx, N.Y., says AIDS has become an outgrowth of a lot of the problems that have existed and been virtually ignored in the black community for years: illiteracy, inadequate health care, homelessness, teenage pregnancy and drug use.

A recent report in the Journal of the American Medical Association stated that in 1990, HIV/AIDS was the leading cause of death among black men between the ages of 25 and 44, surpassed only by homicide. HIV/AIDS was also listed as the third leading cause of death among black women, surpassed by cancer and heart disease.

Despite the fact that unprotected sexual intercourse appears to be the main mode of transmission among adolescents, followed by injection drug use, many teenagers continue to participate in risky sexual behavior.

"I have a friend who uses birth control pills, but she feels she knows guys so she doesn't need to use condoms," says Va'Nechia Rayford, 17, of Oakland, Calif.

Bobby White, 16, of Hyattsville, Md., says, "I have one friend, he doesn't use anything. He has three kids and he's 17 years old."

Many teens cite peer pressure and natural curiosity as two of the main reasons for early sexual experimentation.

"You just a wimp if you ain't having sex," says Bobby, who is sexually active.

But the fear of AIDS has made some teenagers think twice about sex, and some have even chosen to postpone it indefinitely. "Almost all my friends are sexually active, but I'm not because I'm scared of pregnancy and diseases," says Va'Nechia.

"It has made me more fearful, because you never know. You may walk into a room and say, 'He's cute,' but he might have AIDS," says Danielle Thomas of Decatur, Ga., who adds that she is sexually active, but well-protected.

Health educators say many kids know the basics about AIDS, but there is still a lot of misinformation and ignorance. For example, Karen says some of her friends believe that they can tell if someone has AIDS by looking at them.

"They [boys] think if the girl is clean, she keeps herself up, looking presentable, she doesn't have any odors, no sores around her mouth or stuff like that, she's OK."

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khurram hassan, PEER COUNSELOR

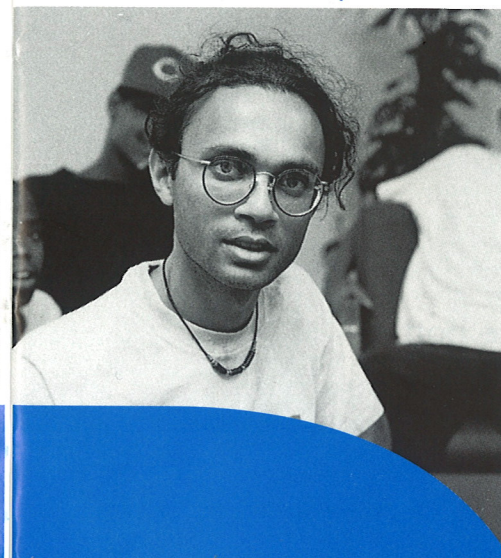


Photo by Shawn Dowdell

white middle-income teenagers." AIDS is just not that high a priority among African-American teenagers, Ms. Thompson adds. "Most of them are wrapped up in basic survival issues."

Bobby is a typical example. "AIDS is the farthest thing from my mind," he says. As a young black male, Bobby says, "My

Many teenagers also seem to be more concerned about pregnancy than they are about AIDS.

Another contributing factor to the spread of HIV/AIDS among adolescents is the notion many teens have that they are invincible. "They have the knowledge, but they'll deny it's going to happen to them," says Dr. Mary Sawyer, director of the Adolescent HIV/AIDS Program at Grady Memorial Hospital in Atlanta.

However, P. Imani Thompson, a health education specialist with the CDC, contends that white teenagers are more prone to think of themselves as invincible because they look forward to bright futures, while many black teenagers see death as a real possibility.

"There is equal carelessness, but in the black communities, there is a kind of hopelessness," she says. "They are not worrying about tomorrow, because tomorrow may not be there. What motivates them is different from what motivates

concerns are death, going to jail and just making it. I don't want to be a statistic. I refuse to be a statistic."

Lack of self-esteem, lack of adequate role models and lack of education are also primary factors in the transmission of AIDS in the African-American community, Ms. Thompson says. "If you feel good about yourself, you are not going to do something that is going to kill you," she says, adding that a more holistic approach to education needs to be taken.

"It's beyond teaching about AIDS, it's about how to teach people to live in a world with AIDS and to negotiate before sex, and safer behavior in general," she says.

Khurram "Ko" Hassan, a peer counselor who does a lot of outreach in the black community through Grady's Adolescent HIV/AIDS Program, agrees with Ms. Thompson. Educators need to stop using scare tactics to try to dissuade teenagers from having sex, he says. Instead, they should be realistic.

"Kids don't plan on having sex. They plan on making out and one thing leads to another," Mr. Hassan says. Kids should not be scared of intimacy. They should be taught that sex is enjoyable, he says, but that it goes with responsibility.

"What they need is life-coping skills, such as how to get condoms, where to get care, where to get testing, how to negotiate safe sex," he adds.

Kellum Fisher, an 18-year-old from Sandy Springs, Ga., who has been sexually active for nearly four years, says he uses condoms, but he would like more information about AIDS.

"I would like to know how to talk to my sexual partner about her past without being embarrassed," he says, adding that, "some guys are embarrassed to walk in a store and buy a condom."

The whole structure of male-female relationships also needs to be looked at, Ms. Thompson says. "We need to look at power and control within a relationship and helping people to maneuver through that."

And, finally, she says, America needs to incorporate HIV/AIDS education as a normal part of its health-care system so that intervention takes place when people go for a routine medical exam or a trip to the dentist, as opposed to when something tragic happens and it's too late.

Shirley L. Smith is a writer who lives in Atlanta.

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