

# Will they be heard?

An NIH panel has laid partial responsibility for current HIV-infection rates at the door of government

by Bob Roehr

Politicians are the greatest barrier to effective HIV prevention, said a National Institutes of Health advisory panel of experts. The 104th NIH Consensus Development Conference came to that conclusion after extensive study and a three-day public meeting which concluded Feb. 13 at the NIH campus in Bethesda, Md.

"The epidemic of AIDS is not quiescent, it is not disappearing, it is not part of public health history. It is a current, pressing and urgent public health emergency," said David Reiss, M.D. He chaired the panel and is director of psychiatric research at George Washington University Medical Center in Washington, D.C.

"AIDS is a preventable disease, and the behavior placing the public health at greatest risk may be occurring in legislative and other decision making bodies," Reiss said.

The panel was unanimous in calling for prompt removal of the ban on federal funding of needle-exchange programs. It concluded that "thousands of lives are at risk" if this ban is not removed. It also called for increased funding for substance abuse programs, lifting restrictions on sex education and increased availability of condoms.



## THE CONFERENCE

The 12-member panel of outside experts was not designed to produce new data but rather pull together existing information and come to strong consensus policy recommendations. Clearly the epidemic has not left gay men behind, but it is expanding most rapidly among communities of color and the young. An estimated 40,000 to 80,000 new infections occur each year, half in people under age 25.

Speakers pointed out a number of often myth-shattering facts uncovered through research:

Sex-education programs do not encourage sexual activity among the young but have just the opposite effect. Those who are not yet sexually active are more likely to delay sex, while those who are sexually active tend to have fewer partners and adopt safer sexual practices as a result of such programs.

A 1992 national sexual survey, the most comprehensive in the field, conducted by researchers at the University of Chicago, revealed that 52 percent of men who have sex with men over a five-year period also have sex with women during that same period. Only 15 percent disclose their same-sex activities to their female partners.

And, as one researcher noted, in a recent study "about half the young men had sex with women, although they self-identified as gay rather than bisexual."

Panelist Martin Fishbein pointed out that there is a difference between using a condom and using it effectively. His example was simple and chilling: "Everybody in this room who has used a condom has done this at least once," he began. "Our culture says you do things in the dark, so you open up your condom package and you fumble around and realize it doesn't go down. So you flip it over and [pull] it down.

"Now stop and think. If somebody has gonorrhea [or HIV] and has a discharge, he has essentially covered the outside of the condom with the

pathogen. He is essentially introducing the pathogen directly onto the other person's body."

## THE EYE OF THE NEEDLE

Current law bans the use of federal funds for needle-exchange programs, in large part because of fear they might promote drug use. However the law does allow the secretary of Health and Human Services to lift that ban if she certifies that such a program contributes to the public health.

More than a hundred studies have shown that the availability of a needle is not a principle factor in whether or not a person becomes an injection drug user. They have demonstrated the effectiveness of needle-exchange programs in reducing the spread of HIV and other diseases through sharing of contaminated needles.

But the first randomized control study came from Connecticut. In June 1992 that state changed its laws on drug paraphernalia to allow people to buy up to 10 syringes and needles at a time at a pharmacy without a prescription. A study by the Centers for Disease Control found that needle sharing dropped from 52 to 31 percent in Connecticut while it remained the same in areas that restricted the ability to get clean needles.

The report concluded that unless the policy is changed, "Millions of unnecessary deaths will occur as a result."

"What we have reviewed and recommended in our statement should be clear enough," said panel member Mickey Smith. "Hopefully she [HHS Secretary Donna Shalala] will hear it."

## NO SEX PLEASE, WE'RE REACTIONARY

The panel report singled out for special criticism a measure that conservatives pushed through Congress last year to earmark 50 billion in HIV prevention funding for teaching sexual abstinence.

Sections of the law mandate that eligible programs have as their "exclusive purpose teaching the social, psychological and health gains to be realized by abstaining from sexual activity" and that "a mutually faithful monogamous relationship in the context of marriage is the expected standard of human sexual activity."

The panel report said, "This approach places policy in direct conflict with science and ignores overwhelming evidence that other programs would be effective. Such abstinence-only programs cannot be justified in the face of effective programs."

## GENOCIDE

"Call it what it is. It's genocide," said Tom Coates, head of the Center for AIDS Prevention Studies at the University of California at San Francisco. "The federal government's inability and unwillingness to fund needle exchanges, and have drug treatment on demand, and to provide effective sex education for kids is genocide."

Anke Ehrhardt, director of the HIV Center for Clinical and Behavioral Studies at Columbia University added, "And on top of that, it is clearly racist—there is no question."

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