



National Latino AIDS Awareness Day

Día Nacional Latino por la Concientización del SIDA

DESCRIPTION

HIV infection has been a fact of life in most Latino communities throughout the United States for over 20 years. Surveys of Latinos consistently find that AIDS is seen as the number one health issue in this country. In fact, in 2001, over 150,000 Latino AIDS cases have been reported and Latinos comprise of 14% of the population in the United States but account for 20% (71,600) of all those living with AIDS.

AIDS has challenged the extended Latino family in every part of the country to find new reservoirs of compassion, to increase our political voices and to confront many difficult issues such as drug use and sexuality, that for generations, have been deemed unmentionable. The spiritual life of our communities have been challenged to its core as religious leaders reach out to advocate with families who have suffered stigma and exclusion.

October 15 is the last day of Hispanic Heritage Month in the United States and the first day of what will become an annual observance -National Latino AIDS Awareness Day. It is a day of hope for the future of a world without AIDS.

Concept - On October 15, in 100 cities around the United States, Latino leadership will sponsor diverse activities that respond to the state of AIDS among Latinos in 2003 in their specific communities. In recognition of the surging new infections among Latinas and young Latinos/as, different localities and leaders will use the day to promote and sponsor activities on prevention. Others will use the day to make religious leaders and public officials aware of the needs in reducing new infections and caring for those Latinos with the virus. Others will use traditional expressions as an opportunity to demonstrate the curative power of our culture.

Local Ownership - Each location is largely responsible for raising the funds needed to sponsor their own local activity. In sum, every locality will organize an activity that will address the epidemic in their community and make the public aware of what must be done to prevent new infections and advocate for proper care for those who are living with HIV/AIDS.

National Planning Committee Participation - There is a National Planning Committee for the National Latino AIDS Awareness Day. Planning Committee participants were convened by the Latino Commission on AIDS, the Hispanic Federation and Latino organizations in different cities that agreed to serve as the primary organizers for the National Day in their communities. Every local organization designated to lead this day has committed to organizing local groups and leaders; to be inclusive of all segments of the Latino community affected by the epidemic; to providing a primary leadership role; to serve as a credible voice within their community; to raise funds for their organized activity; to participate in the National Planning Committee conference calls; and to work with the National Organizer retained by the National Committee.

Work of the National Planning Committee. The Planning Committee has developed basic materials in order to maximize the impact of the day on a local level. The Planning Committee is raising funds to assemble a Resource Handbook that can be used by local efforts, develop key materials that tie the event together nationally (poster, suggested activities, resources, etc.), operate to ensure national press coverage, and track activities in different cities. Additionally, the National Planning Committee has developed a website that enables participants from different cities to learn what is happening elsewhere and to generate a discussion of program ideas.

Participant States (list in formation): Alaska - Arkansas - Arizona - California - Colorado - Connecticut - District of Columbia - Florida - Georgia - Illinois - Indiana - Kansas - Louisiana - Nebraska - Massachusetts - Maryland - Minnesota - Missouri - North Carolina - New Jersey - New Mexico - New York - Ohio - Oklahoma - Oregon - Pennsylvania - Rhode Island - South Carolina - Tennessee - Texas - Virginia - Washington - Wisconsin



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List of Participants (as of 9/16, 2003) [1]

State	City	Organization	First Name	Last Name
AK	Anchorage	Alaskan AIDS Assistance Program	Carmenrosa	Diez
AR	Little Rock	Arkansas Dept of Health	Tere	Roderick
AZ	Bisbee	Cochise County Health Department	J. Eleazar	Garcia
	Pheonix	Chicanos Por La Causa, Inc.	Louie	Tapia
	Tucson	Southern Arizona AIDS Foundation	Ernie	Perez
CA	Fresno	Fresno County Department of Community Health	Valerie	Alvarez
	Fresno	University of California - Fresno	Lorena	Ayala-Lawless
	Irvine	AIDS Services Foundation Orange County	Guadalupe	Díaz
	Irvine	AIDS Services Foundation Orange County	Thomas J.	Peterson
	Long Beach	Long Beach Health Department	Luciano	Estrada
	Los Angeles	AltaMed Health Services Corp.	Luis	Lopez
	Los Angeles	Bienestar	Oscar	de la O
	Los Angeles	Children's Hospital	Ana	Quiran
	Los Angeles	Children's Hospital Los Angeles	Veronica	Montenegro
	Los Angeles	Clinica Oscar A. Romero	Angel	Fabian
	Los Angeles	Clinica Para Las Americas	Jose Alfredo	Herrera
	Los Angeles	LShanti	Adrian	Aguilar
	Los Angeles	Los Angeles County Office of AIDS Programs	William	Strain
	Los Angeles	The Wall - Las Memorias Project	Eddie	Martinez
	Los Angeles	The Wall - Las Memorias Project	Arturo	Durazo
	Los Angeles	Vision Y Compromiso: The Community Health Worker/Promtoras Network	Thelma	Garcia
	Los Angeles	Watts Health Care Corporation	Julio	Gutierrez
	Los Angeles	Watts Health Care Corporation	Guitierrez	Julio
	Los Angeles	Women's Care Center	Yolanda	Salinas
	Mammoth Lakes	Mono County Health Department	Lorna	Weber
	Oakland	AIDS Project East Bay	Marco	Partida
	Oakland	Alameda County Public Health, Office of AIDS Administration	Maria	Aguilar
	Palm Springs	Desert AIDS Project	Deborah	Morales
	Richmond	Familias Unidas	Graciela	Salinas
	Sacramento	Harm Reduction Services	Mark	Brito
	Sacramento	Harm Reduction Services	Randy	Reyes
	Sacramento	Harm Reduction Services	Don	Gomez
	Sacramento	State of California, Department of Health Services	Schenelle	Flores
	San Diego	Episcopal Dioceses of San Diego	Rev. Mary	Moreno Richardson
	San Diego	PROCABI / BAAP	Rogelio	Jimenez
	San Diego	University of California - San Diego	Mauricio Arturo	Perez
	San Diego	University of California - San Diego/ Youth HIV Programs	Mauricio	Perez
	San Francisco	AGUILAS	John	Marez
	San Francisco	Asian Pacific Islander Wellness Center	Manuel	Sanguesa
	San Francisco	University of California - San Francisco	Maricarmen	Arjona
	San Francisco	Red Soap Visual Media	Roland	Torres
	San Mateo	Health Education Department	Cristina	Ugaitafa
	San Mateo	Planned Parenthood Golden Gate	Cristina	Correa
	San Mateo	San Mateo County AIDS Program	Nana	Howton
	Santa Monica	Common Ground	Carlos	Bermudez
Van Nuys	Bienestar Human Services	Robert	Contreras	
Van Nuys	Los Angeles County Latino HIV/AIDS Mental Health Task Force Coalition	Juan	Moriel	
Vista	Vista Community Clinic / Alma Latina	Jesus	Ramirez	
Watsonville	Salud Para La Gente	Roy	Jimenez	
CO	Boulder	Boulder Cty. AIDS Project	Silvia	Reyonoso
	Denver	Cicatelli Associates Incorporated & DHHS	Timoteo	Barajas
	Denver	Colorado Department of Public Health	Angela	Garcia
	Denver	PWA Coalition Colorado	Rodolfo	Martinez-Puentes
	Denver	Sisters of Color United for Education	Bernadette	Berzoza
CT	Hartford	AIDS Ministries Program	Valerie	Ingram
	Hartford	Latinos Contra Sida	Edna	Berastain
	Hartford	Trinity Hill Healthcare Center	Jasmine	Colon
	Stanford	Project Culturas Inc.	Marianne	Buchelli
D.C.	Washington	Clinica del Pueblo	Juan	Romagoza M.D.
	Washington	NAPWA	Ray	Daniels
	Washington	CSAT / SAMHSA	Vinnie	Velazquez
	Washington	DC Department of Health	Damber	Gurung
	Washington	DC Department of Health	David	Ack
	Washington	Farmworker Justice Fund	Myrtelina	Gonzalez
	Washington	Latin American Youth Center	Amanda	Kerpsie
	Washington	LLEGO	Miguel	Aguero
	Washington	LLEGO	Laura	Esquivel
	Washington	LLEGO	J. Carlos	Velazquez
	Washington	National Alliance of State and Territorial AIDS Directors	Alberto M.	Santana
	Washington	Ogilvy Public Relations Worldwide	Alvaro	Puig

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List of Participants [2]

	Washington	The Henry J. Kaiser Family Foundation	Sonia	Ruiz
DE	Georgetown	Centro de Salud La Red	Saulo J.	Chavez
FL	Bradenton	Manatee County Health Department	Olga L	Bennett
	Brandenton	Florida Health Department	Robert Lee	Merlosi
	Fort Lauderdale	AIDS Project Florida / Broward HIV/AIDS Minority Network	Manuel	Rodriguez
	Fort Meyers	Florida Department of Health	Amalia	Zamot
	Jacksonville	River Region Human Services, Inc.	Lisa	Carter
	Jacksonville	River Region Human Services, Inc.	Clara	Colon
	Key West	AIDS Help, Inc.	Consuelo	Ruiz
	Miami	Borinquen Health Care Center	Vincent	Delgado
	Miami	Genesis Program	Laura	Luder
	Miami	Greater Bethel AME Church, Ministry of HIV/AIDS	Silvia	Velazquez
	Miami	Liga Contra SIDA	Luisa	Rondon
	Miami	Liga Contra SIDA	Manuel	Laureano-Vega MD
	Miami	Terra.com	Ana	Sanchez
	Miami	Union Positiva	Edith	Garcia
	Miami	University of Miami	Yvette A.	Rivero
	Miami	University of Miami School of Medicine OB/GYN Research	Marta	Tabares
	Palmetto	Proyecto Sonrisa	Olga L.	Bennett
Tallahassee	American Red Cross	Jorge L.	Olaves	
Tallahassee	Florida Department of Health	Ronald	Henderson	
Tallahassee	Thagard Student Health Center	Anne Marie	Frere	
Winter Park	Hope and Help Center of Central Florida, Inc.	Maria	Hobbs	
GA	Atlanta	AIDS Atlanta	Maria	Rivas
	Atlanta	Georgia Department of Public Health	Miguel	Miranda
	Atlanta	Georgia Department of Public Health	Ruth	John Bonnette
	Atlanta	Planned Parenthood of Georgia	Leola	Reis
	Lyons	Southeast GA Communities Project	Andrea	Cruz
	Lyons	Southeast GA Communities Project	Andrea	Cruz
	Smyrna	Someone Cares Inc of Atlanta	Ronnie	Bass
IL	Abbott Park	Abbott Laboratories	Julie	FitzGerald
	Chicago	AIDS Foundation of Chicago	Grisel	Robles
	Chicago	International Association of Physicians in AIDS Care	Scott	Wolfe
	Chicago	Midwest Hispanic Health Coalition	Patricia	Canessa
	Chicago	Project VIDA	Carlos	Samaniego
	Chicago	Project VIDA, Inc.	Monica	White
	Chicago	VIDA/SIDA	John	Colon
	Elgin	Renz Center	Marcos	Bostho
	Elgin	Renz Center	Carlos A.	Chavez
	Waukegan	Lake County Health Department	Oswaldo	Del Valle
	IN	Bloomington	HOLA Hoosier Latinos	Daniel
Hammond		Greater Hammond Community Services, Inc.	Rosemary	Caraballo
Indianapolis			Angel	Ante
Notre Dame		Institute for Latino Studies	Brookes	Ebetsch
Notre Dame	University of Notre Dame	Brooke	Myers	
KS	Wichita	UKSM-W MPA-HIV/AIDS Program	Bertha	Tackitt
LA	Metairie	Jefferson Parish Human Services Authority	Rene	Salinas
	New Orleans	FACES/CARITAS Children's Hospital	Claudia	Medina
	New Orleans	FACES/CARITAS Children's Hospital	Oscar	Salinas,MD
	New Orleans	FACES/CARITAS Children's Hospital	Alfredo	Narvaez
	New Orleans	Institute of Women and Ethnic Studies	Anita	De Anda
MA	Boston	Latin American Health Institute	Dora	Gutierrez M.D.
	Cambridge	Concilio Hispano	Patti	Cullen
	Holyoke	Holyoke Health Center	Maribel	Rodriquez
	Lynn	Lynn Health Center	Verny	Samayoa
	Roxbury	Dimock Community Health Center	Esther	Velez
	Roxbury	TAConsultants	Bill	Lottero
MD	Laurel	El Shaddi Care Center	Joyce	Tabb
MI	Ferndale	Midwest AIDS Prevention Project	Michael	Odom
	Jefferson City	Missouri Department of Health and Senior Services	Sandra	Hentges
	Jefferson City	Office of Minority Health and Senior Services	Maria	Carpna
MO	Monett	Missouri Migrant English Language Learner Program	Karen	Johnson
	St.Louis	New Hope Comprehensive Care Clinic	Kim	Dao
NC	Charlotte	Metrolina AIDS Project	Gina	Esquivel
	Lexington	Positive Wellness Alliance	Julie	Meyer
	Lexington	Positive Wellness Alliance	Meyer	Julie
	Newton Grove	Tri County Community Center	Ana	Pool
NE	Omaha	Nebraska AIDS Project	Joe	Gerstandt
NJ	Dover	Hope House	Madeline	Corredor
	New Brunswick	National Latina Health Network	Elizabeth	Amaya-Fernandez
	New Brunswick	National Latina Health Network	Vanessa	Villarreal

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List of Participants [3]

	New Brunswick	National Latina Health Network	Lazara	Paz
	North Bergen	CD Inc./AIDS Community Care Alternatives Programs	Raul	Gonzalez
NM	Los Cruces	Camino de Vida	Eduardo	Pinal
NY	Bay Shore	EOC of Suffolk, Inc,	Alan	Catu
	Bronx	Bronx AIDS Services	Judith	Lopez
	Bronx	Bronx HIV Care Network	Socrates	Caba
	Bronx	Bronx Lesbian & Gay Health Resource	Coby	Johnson
	Bronx	Bruised Reed Ministry	Rosa J.	Caraballo
	Bronx	Casa Promesa	Hector	Rivera
	Bronx	Hondurans Against AIDS	Mirtha	Colon
	Brooklyn	ARTC	Guadalupe	Dominguez
	Brooklyn	Brooklyn Legal Services Corporation	Robin	Fisher
	Brooklyn	El Puente	Gloria	Zelaya
	Brooklyn	New York AIDS Housing Network	Joseph	Capestany
	Brooklyn	Office of Congresswoman Nydia M. Velazquez	Evelyn	Cruz
	Brooklyn	Turning Point Housing/Discipleship	Doralisa	Goitia
	Buffalo	AIDS Network of Western New York	Bernice	Burgos
	Buffalo	Hispanics United of Buffalo	Sorida L.	Rowland
	Buffalo	Hispanics United of Buffalo	Danny	Castro
	Buffalo	Kalieda Health/Project Reach	Jose	Pizarro
	Hempstead	Circulo de la Hispanidad, Inc.	Enilda	Columna
	Jamaica	Queens Hospital	Eulalio	Fontanez
	New Rochelle	Westchester County Department of Health	Basil	Reyes
	New York	East Harlem HIV CARE Network	Jose Martin	Garcia Orduna
	New York	El Centro Estudios Puertorriquenos	Delia	Easton
	New York	GMHC	Noel	Alicea
	New York	Greenwich House, Inc.	Iris	Nagin
	New York	Greenwich House, Inc.	Jose	Alicea
	New York	Harm Reduction Coalition	Paula	Santiago
	New York	Hispanic Federation	Mario	Colon
	New York	Hispanic Federation	Jose	Calderon
	New York	Housing Works Inc.	Nancy	Cotto Laboy
	New York	LES Harm Reduction Center	Raquel	Algarin
	New York	Lower East Side Harm Reduction Center	Alberto	Alonso
	New York	Settlement Health	Domingo	Paulino
	New York	Steinway Child & Family Center	Andrea	Gordon
	New York	Taller Boricua	Fernando	Salicrup
	New York	William F. Ryan Community Health Center	William	Mendez
	New York	PWA/HIV Advisory Group	Rafael	Abadia
	Rochester	Action for Better Community	Isabel	Rosa
	Rochester	Puerto Rican Youth Development	Michelle	Hernandez
	Rochester	Rural Opportunities	Tim	Wilson
	Rochester	Westside Health Services	Sharon	Hale
	Staten Island	Staten Island HIV CARE Network	Rebecca	Ortiz
	Staten Island	Staten Island Task Force	Diane	Prince
	Syracuse	AIDS Community Resources Inc.	Jaime	Masso
	Syracuse	AIDS Community Resources Inc.	Edward	Brown
OH	Toledo	Adelante, Inc	Jesse	Torrence
OK	Tulsa	American Red Cross	Omayra	Alvarado
	Tulsa	Hope Testing Clinic	Lizette	Merchan
OR	Portland	Cascade AIDS Project	Salvador	Candela
	Portland	Cascade AIDS Project	Rafael	Arellano-Barrera
PA	Philadelphia	ActionAIDS, Inc - North Office	Eloy	Hernandez
	Philadelphia	American Red Cross	Natalie	Ewing
	Philadelphia	Coalition of Labor Union Women	Francesca	Alvarado
	Philadelphia	Congreso	Abigail	Cruz
	Philadelphia	Congreso	Lisa	Espinosa
	Philadelphia	Northeast Treatment Center (CODAAP)	Maria	Gentile
	Reading	Hispanic Center	Maria	Garcia
	Reading	Spanish Speaking Council of Reading	Swithen	Ortiz
	Central Falls	Progreso Latino, Inc.	Edwin	Cancel
	Providence	Progreso Latino, Inc.	Jacinta	Pena
SC	Columbia	Palmetto AIDS Life Support Services	Pedro	Morales
	Columbia	South Carolina Department of Health and Environmental Conservation	Edena	Guimaraes
	Columbia	South Carolina Primary Health Care Association	Priscila	Brantley
TN	Chattanooga	Chattanooga Cares	Jerry	Evans
TX	Austin	AIDS Services of Austin	Jennifer	Herrera
	Dallas	Greater Dallas Council on Alcohol and Drug Abuse	James	Rucker
	Dallas	Greater Dallas Council on Alcohol and Drug Abuse	Edgar	Gonzalez
	Dallas	Grupo Vida	Joseluis	Partida
	Dallas	Resource Center of Dallas	Ruben	Ramirez

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List of Participants [4]

	El Paso	International AIDS Empowerment	Antonio	Aguilar
	El Paso	Planned Parenthood Center of El Paso	Juan M.	Rodriguez
	El Paso	University of Arizona - College of Public Health	Angela	Mora
	Galveston	Community Advisory Board ACTU	John	Rodriguez
	Houston	AVES	Terrence	O'Neill
	Houston	Houston Dept of Health and Human Services	Ricardo	Mendiola
	Houston	Montrose Clinic	Vilma	Hernandez
	Mercedes	Mana de Hidalgo County	Glendelia M.	Zavala
	San Antonio	Center for Health Policy Development Inc.	Raquel	Sapien
	San Antonio	Center for Health Policy Development, Inc.	Graciela	Alejandro
	San Antonio	Center for Health Policy Development, Inc.	Charlene	Doria-Ortiz
	San Antonio	Mujeres Unidas Contra SIDA	Yolanda	Rodriguez-Escobar
VA	Arlington	Northern Virginia AIDS Ministry	Ignacio	Aguirre
	Arlington	Northern Virginia AIDS Ministry	Jacque	Forbes
	Charlottesville	AIDS/HIV Services Group	Bruce	Taylor
	Charlottesville	AIDS/HIV Services Group	Marcella	Estoy
	Fall Church	Seras Inc.	Mario	Villareal
	Falls Church	American Red Cross	Ximena	Marquez
	Falls Church	Health,Safety,Youth and Community Services	Victor	Olano
	Norfolk	TACT	Louisa E.	Pacheco
WA	Seattle	POCAAN Organization	Anibal	Garcia
	Seattle	Public Health Seattle & King County	Javier	Amaya
	Tacoma	Tacome-Pierce County Health Dept.	Charles	Fann
WI	Milwaukee	AIDS Resource Center of Wisconsin	Elysse	Chay
	Milwaukee	Camp Heartland	Augie	Acevedo

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National Latino AIDS Awareness Day

Día Nacional Latino por la Concientización del SIDA

REGISTRATION FORM

Name: _____

Title: _____

Organization: _____

Address: _____

City: _____

State: _____

Zip: _____

E-mail: _____

Phone: _____

Fax: _____

NLAAD

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9th Floor

New York, NY 10010

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Fax: (212) 202 - 3620

www.latinoaids.org/NLAAD
Primary National Sponsors:
(list in formation)

Latino Commission on AIDS
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Please mark:

MY ORGANIZATION WOULD LIKE TO PARTICIPATE IN LOCALLY PLANNED ACTIVITIES

WE WILL PARTICIPATE IN FUTURE CONFERENCE CALLS

MY ORGANIZATION WOULD LIKE TO PARTICIPATE IN THE NATIONAL PLANNING COMMITTEE

Mail this form to:

National Latino Awareness Day - Latino Commission on AIDS
Attn: Dennis deLeon
24W 25th Street 9th Floor
New York, NY 10010

Or Fax it to: 212-202-3620

To register online go to www.latinoaids.org/NLAAD

For more information please contact:

Nuris Rodríguez T: (212) 584 9324 - nrodriguez@latinoaids.org or
Guillermo Chacón T: (212) 584 9304 - gchacon@latinoaids.org

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KEYFACTS

Prepared by the Latino Commission on AIDS

LATINAS AND HIV/AIDS

The rate of Latinas with AIDS as a proportion of all Latino AIDS cases has climbed from 15% in 1990 to 23% in 2000.¹ The AIDS case rate is five times more for Latinas than white women. Latina women along with Latino men are more likely to test later in their illness than any other racial/ethnic group at 48%.

Transmission by Heterosexual Intercourse - Heterosexual contact accounts for 47% of reported AIDS cases for Latina women as of December 2001.² Using adjustments to data and estimates, the CDC estimates this number may be as high as 55%. Data for HIV infection (as opposed to AIDS cases) is still an unreliable indicator given the failure by the CDC to include HIV infection data from such states as New York and California which have begun to collect HIV infection data.

Transmission by Drug Use - Intravenous and other drug use has been a critical mode for HIV transmission among Latinas. About 38% of Latina women are infected through injection drug use. Using adjustments to data and estimates, the CDC estimates this number may be as high as 42%.³ There are marked regional differences in this transmission profile with many more women in the Northeast and Puerto Rico reporting intravenous drug use as the source of their infection compared to Latinas in other parts of the nation. This large number of Latinas infected through drug use should come as no surprise. For Latinas the most common reason for admission for substance use treatment has been opiate use as compared to Latino men where the primary basis for admission was alcohol use.⁴ Reports of recent drug use were highest among Puerto Rican (6.6%) and Mexican (4.8%) women.⁵

Deaths- For Latinas, AIDS is the 3rd ranked cause of death for 35-44 (9th White women) and 4th for 25 - 34 (8th White women).⁶

Prevention - Latinas confront several obstacles in both preventing HIV infection and seeking treatment once they are infected. First, most of the approaches used to prevent HIV infection were based on an approach used with men who have sex with men. Second, depending on levels of acculturation, Latina gender roles encourage the view that Latinas are not a "risk group" and that being married or in an apparently monogamous relationship protect them from infection. Third, for many Latinas there are several other priorities beside their own health causing some women to focus primarily on HIV only when it can be demonstrated to have an impact of their familial role. Fourth, the ability of Latinas to negotiate safer sex practices is very difficult at best. Fifth, for Latinas that are intravenous drug users there are few treatment options that enable them to maintain their familial responsibilities and seek in patient treatment.

¹ Kaiser, Key Facts, "Latinos and HIV/AIDS" 2003 (Figure 6)

² CDC HIV/AIDS Surveillance Report, Vol. 13, No. 2, Table 11.

³ CDC Tables 11 and 23.

⁴ The DASIS Report (September 2002), Hispanics in Substance Abuse Treatment 1999

⁵ National Household Survey on Drug Abuse, December 2002

⁶ Kaiser, Key Facts, "Latinos and HIV/AIDS" July 2003



KEYFACTS

Prepared by the Latino Commission on AIDS

LATINO YOUTH AND HIV/AIDS

Youth and HIV/AIDS - In the United States, HIV-related death has the greatest impact on young and middle-aged adults, particularly racial and ethnic minorities. In 2000, 1,688 young people (ages 13 to 24) were reported with AIDS, bringing the cumulative total to 31,293 cases of AIDS in this age group. Young men aged 13- to 24-years, 49% of all AIDS cases reported in 2000 were among Men who have Sex with Men (MSM); 10% were among injection drug users (IDUs); and 9% were among young men infected heterosexually. In 2000, 45% of all AIDS cases reported among young women ages 13 to 24, were acquired heterosexually and 11% were acquired through injection drug use. According to the Center for Disease Control there has not been a comparable decline in the number of newly diagnosed HIV cases among youth.

Latino Teens - Latino youth continue to become infected at alarming rates. Although Latino teens make up 15% of the national teenage population, ages 13-19, they account for 21% of the new AIDS cases with 20% of cases in 2001. ¹ In a recent study among Latino young men, Latino Men Who Have Sex with Men (MSM) represented 14% between the ages of 23-29, but were already infected with HIV, compared to 7% of White MSM's. ²

Prevention for Latino Youth - CDC research has shown that early, clear communications between parents and young people about sex is an important step in helping adolescents adopt and maintain protective sexual behaviors. In addition, a wide range of activities must be implemented in communities to reduce the toll HIV infection and AIDS takes on young Americans. ³

- **School-based programs are critical for reaching youth before behaviors are established.**
- **Research has clearly shown that the most effective programs are comprehensive ones that include a focus on delaying sexual behavior *and* provide information on how sexually active young people can protect themselves.**
- **Efforts to reach out-of-school-youth are made by community-based programs.**
- **Prevention efforts for young gay and bisexual men must be sustained.**
- **We must address sexual and drug-related risk.**
- **STD treatment must play a role in prevention programs for young people.**
- **Evaluation of factors influencing risk behavior must be ongoing.**

¹ Kaiser, Figure 11

² Kaiser, Figure 11

³ www.cdc.gov/hiv/pubs/facts/youth.htm



KEYFACTS

Prepared by the Latino Commission on AIDS

LATINOS AND HIV/AIDS page 1

LATINOS AND AIDS NATIONALLY

Latinos in the United States - Latinos as a percentage of national AIDS cases has increased from 14% (1981-87) to 19.7% (1996-2000). Latinos represent 14% of the United States population (including Puerto Rico)¹ Most Hispanics (77%) are concentrated in California, Texas, New York, Florida, Illinois, Arizona and New Jersey with over 50% in California and Texas. There are 22 states with Latino populations between 100,000 and 500,000 and 2 between 500,000 and 999,000 (New Mexico and Colorado).

Latino HIV/AIDS Cases - As of December 2001, the CDC estimates there have been 149,752 cumulative Latino AIDS cases in the United States - 28,554 female and 121,198 male.²

- **Living with AIDS** - There are an estimated 71,600 Latinos living with AIDS in 2001 in the United States or about 20% of all persons living with the disease.³ In 1993 the Latinos were 18% of persons living with AIDS and in 2001 20%. For Whites the percentage of persons living with AIDS dropped from 46% in 1993 to 37% in 2001.
- **Rates per 100,000** - The rates per 100,000 of Latino AIDS cases reported in 2001 differs sharply from that for Whites. For Latino males the rate was 43 per 100,000 contrasted to 13.7 for Whites per 100,000 for Whites. For Latinas the rate was 12.9 per 100,000 contrasted to 2.4 for White women.⁴ The Kaiser Family Foundation estimates the rate of AIDS in 2000 among Latinos in general at 30 per 100,000 compared 8 per 100,000 for Whites.⁵
- **Deaths** - The number of Latinos dying of AIDS in 2001(2882) represents a 2.7 times drop from 7,820 in 1993 in contrast to a drop of 4.9 times for Whites.⁶ Latinos made up 17% of deaths in 1993 and 19% in 2001 compared to Whites with 48% of deaths in 1993 dropping to 29% in 2001. In terms of different causes of death, HIV ranks as the 2nd cause for Latino males between ages of 35 - 44 (5th for White men) and the 4th cause between the ages of 25-34 (6th for White men). For Latinas AIDS is the 4rd ranked cause of death for 35-44 (9th White women) and 4th for 25 - 34 (8th White women).⁷
- **AIDS Diagnosis** - In 1996 19.6% of persons diagnosed with AIDS were Latino and 20% in 2001. For Whites there was a sharp decrease in AIDS cases diagnosed from 35% in 1996 to 28% in 2001. 1996 is the year when protease inhibitors became widely available for people with HIV/AIDS. Using this medication would delay the onset of AIDS defining symptoms.⁸
- **Source of Transmission** - Of the male Latino AIDS cases nationally, 42% are among men who have sex with men (74% for Whites), 34% are due to use of HIV contaminated syringes (9% for Whites), 8% who claim they were infected heterosexually and 7% among men who have sex with men and inject drugs.⁹ Of the Latina female cases, 38% are attributable to use of HIV contaminated syringes (41% for White women) and 47% to sex with a HIV positive man (40% for White women).
- **Place of Birth** - The distribution of countries of origin tells us much about the diversity of AIDS cases among Latinos. In 2001, new cases of Latino AIDS were 43% of reporting being born in continental United States, 23% from Puerto Rico, 14% Mexico, 7% Central/South America, 2% Cuba and 13% unknown country of birth.
- **Risk and Place of Birth** - The data indicate widely different patterns of transmission within the Latino community. For Latinos infected through use of contaminated syringes, 48% of those from Puerto Rico reported this as their major risk factor compared to 24% of Latinos born in the continental United States, 9% from Mexico, 5% Central/South America, and 10% of Cubans.



KEYFACTS

Prepared by the Latino Commission on AIDS

LATINOS AND HIV/AIDS page 2

For Latinos infected through male to male sex, 14% of Puerto Rican AIDS cases, 24% for men born in continental United States, 44% of Mexicans, 36% for Central/South Americans, and 35% for Cubans.

For heterosexual transmission, 25% of Puerto Rican AIDS cases, 11% for Latinos born in United States, 14% for Mexicans, 18% for Central/South Americans and 12% for Cubans.¹⁰

- **Geography and Incidence Rates per 100,000** - The incidence of Latino AIDS cases per 100,000 reflects the historical burden carried by the nation's Puerto Rican population. Puerto Ricans predominate as a major Latino ethnic group in the Northeast and Puerto Rico. The states in this region have the highest rates in the nation - Massachusetts 103.8, District of Columbia 102.7, Connecticut 98.7, New York 92.7, Pennsylvania 77.6, Delaware 64.6, Puerto Rico 45.4, New Jersey 42.5 and Florida 37.7. In contrast, the rates per 100,000 in states with enormous Latino populations is lower - California 19.4, Texas 15.3, and Illinois 26.6 - but these states also contain some of the largest number of Latinos in the United States.¹¹ The national rate of AIDS among Latinos is 31.4 per 100,000.
- **Geography and Total Number of AIDS Cases** - The rates of AIDS cases offer a picture of the intensity of epidemic around the country but the aggregated number of Latino AIDS cases offers a different perspective. For AIDS cases among Latino men through 2000 the ranking is New York (31,172 male Latino cases of AIDS), California (21,571), Puerto Rico (18,889), Florida (10,370), Texas (8,996), New Jersey (5,097), Illinois (2,543), Massachusetts (2,252), Pennsylvania (2,053), and Arizona (1,113).¹²

For Latinas the ranking is New York (9,986), Puerto Rico (5,551), California (2,032), Florida (1,676), New Jersey (1,611), Texas (985), Massachusetts (788), Connecticut (764), Pennsylvania (690), and Arizona (117).¹³

An interesting comparison is offered by examining cities with major Latino populations. For men the pattern is New York City (27,518), San Juan (11,929), Los Angeles (10,613), Miami (6,859), San Francisco (2,841), Houston (2,453), Chicago (2,394), Boston (1,755), Dallas (1,713), Jersey City (1,518), and Newark (1,400).

For women the pattern is somewhat different - New York City (9,322), San Juan (3,455), Los Angeles (1,023), Miami (866), Boston (568), Philadelphia (477), Jersey City, NJ (447), Newark (433), Chicago (387) and New Haven (364).¹⁴

- **Trends** - The rate of Latinas with AIDS as a proportion of all Latino AIDS cases has climbed from 15% in 1990 to 23% in 2000.¹⁵ Latinos teenagers represent a disproportionate share of AIDS cases among young people between the ages of 13-19 with 21% of cases in 2001.¹⁶

LATINO OPINIONS ON KEY AIDS ISSUES¹⁷

- **Most Urgent Health Issue** - In 2001 survey by Kaiser Family Foundation, Latinos (40%) view HIV/AIDS as the most urgent health problem facing the nation today when compared to cancer and heart disease. Significantly larger numbers of Latinos for whom Spanish is their primary language (55%) viewed AIDS as more urgent than English dominant Latinos (30%). It must be noted, however, while Latinos perceive AIDS is the most urgent health problem facing the community this number has dropped from 51% in 1995 to 40% in 2000.
- **More Urgent Problem** - 64% consider AIDS a more urgent problem for the country than they did a few years ago. Once again more Spanish language dominant Latinos (73%) viewed HIV/AIDS as the more urgent problem than a few years ago than English dominant Latinos (59%). This level of concern is in sharp contrast to the Whites where only 23% view HIV/AIDS as the most pressing health problem.
- **Serious Problem** - 7 in 10 Latinos say AIDS is a serious problem for people they know compared to 33% for Whites. Spanish language dominant Latinos are twice as likely as English dominant Latinos to see AIDS as a "very" serious problem for people they know (81% to 38%). What is most interesting is that Spanish language dominant Latinos were less likely to know someone living with HIV/AIDS or who has died from the disease (30% to 43%).

KEYFACTS

Prepared by the Latino Commission on AIDS

LATINOS AND HIV/AIDS page 3

- **Personally Concerned** - 53% of Latinos are personally concerned about becoming infected compared to 33% for whites.
- **Personally Knowing Someone** - 38% of Latinos report personally knowing someone with HIV/AIDS or who has died from the disease.
- **Concern for Children** - Nearly three-quarters of Latino parents with children under the age of 25 are “somewhat” or “very” concerned about their children becoming infected with HIV and 50% of these parents are more concerned than they were a few years ago.
- **More Information Needed** - Most Latinos (64%) say they want more information about HIV/AIDS with most saying they want guidance on how to talk about HIV transmission with their children. One-third of Latinos say they want more information about how to use condoms and how to speak with their children about HIV. The stated need for information is significantly lower among Whites. Latinos have major misperceptions about HIV transmission than Whites - 37% of Latinos believe HIV is transmitted in kissing and 20 state you can become infected by touching a toilet seat or sharing a drinking glass. The percentages were even higher among Spanish language dominant Latinos.

ACCESS TO HEALTHCARE

- **Low Insurance Levels** - Latinos with HIV/AIDS are more likely than other groups to lack any insurance coverage (24% in 1996). In 1996 one-half of Latinos with HIV/AIDS are enrolled in Medicare (13%) and Medicaid (38% compared to 18% for Whites) and 24% (compared to 45% for Whites) in private insurance.
- **Inferior Medical Care** - Latinos with HIV receive inferior medical care. Latinos were almost twice as likely as Whites to have less than two office or outpatient visits over the past six months, 30% more likely to have an emergency room visit without hospitalization than Whites, 25% less likely to have begun advanced HIV treatments prior to December 1996, twice as likely to have never received anti-retroviral therapy in general, and 50% less likely to have received PCP prophylaxis in past six months.¹⁸

¹ *The Hispanic Population 2000: Census 2000 Brief (May 2001)*

² *U.S. HIV and AIDS cases reported through December 2001 Year-end edition Vol. 13, No. 2, Table 7 (CDC)*

³ *CDC December 2001 at Table 29*

⁴ *CDC December 2001 at Table 18*

⁵ *Key Facts: Latinos and HIV/AIDS (June 2001 Kaiser Family Foundation)*

⁶ *CDC December 2001 at Table 32*

⁷ *Kaiser, Figure 4*

⁸ *CDC, Table 26*

⁹ *CDC, Table 9 and 11*

¹⁰ *Kaiser, Figure 10*

¹¹ *Kaiser, Figure 13*

¹² *Centers for Disease Control and Prevention. AIDS Cases by State and Metropolitan Area of Residence, 2000, HIV/AIDS Surveillance Supplemental Report, 2002;8 (No. 2), released October 3, 2002, Table 3a. [CDC Supplemental]*

¹³ *CDC Supplemental Table 3b*

¹⁴ *CDC Supplemental Tables 7a and 7b*

¹⁵ *Kaiser, Figure 6*

¹⁶ *Kaiser, Figure 11*

¹⁷ *All data set out below is derived from the Kaiser Family Foundation's Latinos Views of the HIV/AIDS Epidemic at 20 Years (2001).*

¹⁸ *Variations in the Care of HIV-Infected Adults in the United States: Results From the HIV Cost and Services Utilization Study (JAMA 1999 281: 2305-2315, Table 1)*

KEYFACTS

Prepared by the Latino Commission on AIDS

LATINOS, HIV/AIDS and DRUG USE

Communities of color in the United States are most heavily affected by intravenous drug use (IDU) associated AIDS. In 2000, IDU-associated AIDS accounted for 26% of all AIDS cases among African Americans. Among Latinos, 31% of adults and adolescents accounted for IDU-associated AIDS, compared with 19% of all cases among white adults/adolescents.¹ The proportion of Latino AIDS HIV/AIDS cases associated with IDU is significantly higher for men and women in the Northeast and Puerto Rico. In New York State, for example, intravenous drug use directly or indirectly accounts for over 70% of all AIDS cases among Latino men and women.

Through 2001, 22% of all men were infected through injection drug use. Of these, 34% of Latino men with AIDS identified infection through injection drug use while 7% of Latino men were exposed through male-to-male sexual contact and injection drug use.²

Through 2001 for women, 39% identified injection drug use. Latina women represent 38% of these AIDS cases.³ For women in the northeast, intravenous drug use or infection through sex with an intravenous drug user, account for the cumulative majority of the AIDS cases.

Transmission through injection drug use varies among Latino groups. Forty-three percent of Latinos born in Puerto Rico were infected through IDU compared to 17% of U.S. born Latinos.⁴

Prevention: The most effective intervention to prevent HIV among Latino men and women is both needle exchange programs and expanded drug treatment programs. Lack of access to these programs are a primary reason for the spread of injection related AIDS for men and women. Prevention for HIV through injection drug use requires a comprehensive approach that incorporates:

- Using community outreach programs to reach drug users on the streets;
- Improving access to high quality substance abuse treatment programs;
- Instituting HIV prevention programs in jails and prisons; and
- Providing health care for HIV-infected IDUs, including education on safe injection use.

¹ CDC, "Drug-Associated HIV Transmission Continues in the United States", <http://www.cdc.gov/hiv/pubs/facts/idu.htm>

² NASTAD, "Addressing HIV/AIDS-Latino Perspectives and Policy Recommendations", 2003 (Figure 8)

³ NASTAD, "Addressing HIV/AIDS-Latino Perspectives and Policy Recommendations", 2003 (Figure 9)

⁴ NASTAD, "Addressing HIV/AIDS-Latino Perspectives and Policy Recommendations", 2003 (Figure 11)



KEYFACTS

Prepared by the Latino Commission on AIDS

LATINO MEN WHO HAVE SEX WITH MEN

In the United States, the toll of the epidemic among injection drug users (IDUs) and heterosexuals has increased during the last decade, but Men who have Sex with Men (MSM) continue to account for the largest number of people reported with AIDS each year. In 2000 alone, 13,562 AIDS cases were reported among MSM, compared with 8,531 among IDU and 6,530 among men and women who acquired HIV heterosexually.¹

In 2001, newly reported AIDS cases among Latino men rates increased three times that of white men. Of all Latino men infected, Latino Men who have Sex with Men (MSM) account for 48% of the cases according to estimated AIDS cases by exposure category in 2001. Latino men infected by Injection Drug Use accounted for 39%.² Latino MSM's are disproportionately impacted by the epidemic as indicated by these statistics and recent studies. A seroprevalence and incidence study performed in seven major cities across the country (Baltimore, Maryland; Dallas, Texas; Los Angeles, California; Miami, Florida; New York, New York; San Francisco, California; and Seattle, Washington) from 1998 to 2000 was performed among young men who have sex with men. Out of 2,942 MSM's between the ages of 23-29, 651 or 22% were Latino but 14% of Latino MSM's were already infected with HIV compared to 7% of white MSM's.³

HIV incidence among Latino Men who have Sex with Men vary across borders. AIDS cases reported in the U.S. in 2001 among Latinos by Place of Birth and Exposure, indicate that U.S. born Latino MSM's accounted for 25% of the MSM AIDS cases, 47% were born in Mexico and 14% were born in Puerto Rico. Central/South American and Cuban born MSM's followed with 35% and 34%, respectively.⁴ In addition to country of origin differences, there are also marked differences by region. In the Northeast and Puerto Rico, intravenous drug use account directly and indirectly for the majority of AIDS cases. In all other parts of the country, men who have sex with men account for the majority of AIDS cases.

Rising infection rates for Latino Men who have Sex with Men and MSM's of color indicate that more support and culturally relevant prevention efforts for gay and bisexual men of color are needed. Researchers cite several factors relevant to continuing high levels of HIV infection in the Latino community. First, racism and poverty are important factors because they contribute to a sense of powerlessness and lack of control in personal sexual situations. Second, the stigma associated with HIV and homosexuality create a "sexual silence" in which Latino gay, bisexual and transgender men carry on a secret sex life cut-off from the support and familial network necessary to overcome isolation. This "sexual silence" also inhibits the individual's ability to negotiate safer sex due to cultural difficulties with sexual communication. Third, rigid gender roles contribute to the sense of Latino gay men being "failed men" encouraging low self-esteem in interpersonal situations, heightening their risk as they attempt to prove their manhood. Fourth, levels of acculturation are often ignored in prevention efforts with many immigrant Latino gay men seeing their sexual choices as matters of gender rather than sexual orientation.⁵

Continued research and prevention is therefore critical for Latino MSM and MSM of color to receive the support necessary to decrease such alarming infection rates.

¹ CDC, "Need for Sustained HIV Prevention Among Men who Have Sex with Men"

² Kaiser, "Key Facts: Latinos and HIV/AIDS" (Figure 9)

³ CDC, "HIV Incidence Among Young Men Who Have Sex With Men --- Seven U.S. Cities, 1994--2000"

⁴ Kaiser, "Key Facts: Latinos and HIV/AIDS" (Figure 13)

⁵ Diaz, R. et al. (1998). "Latino Gay Men and HIV: Culture, Sexuality, and Risk Behavior". 58-59





National Latino AIDS Awareness Day

Día Nacional Latino por la Concientización del SIDA

HIV/AIDS RESOURCES FOR NATIONAL LATINO AIDS AWARENESS DAY

www.latinoaids.org
Latino Commission on AIDS

www.hispanicfederation.org
Hispanic Federation

www.kff.org
The Henry J. Kaiser Foundation

www.unaids.org
Joint United Nations Program on AIDS

www.cdc.gov
Center for Disease Control

www.hhs.gov
Department of Health and Human Services

www.hrsa.gov
Human Resource Service Administration

www.nastad.org
National Alliance of State and Territorial AIDS Directors

www.llego.org
The National Latina/o Lesbian, Gay, Bisexual and Transgender Organization

CDC National AIDS Hotline
English 1-800-342-2437 (AIDS)
Spanish 1-800-344-7432
Deaf/Hard of Hearing (TTY)
1-800-243-7889

NLAAD

“Prevenir es Vivir”

24 West 25th Street
9th Floor

New York, NY 10010

Tel: (212) 675 - 3288
Fax: (212) 202 - 3620

www.latinoaids.org/NLAAD

Primary National Sponsors:
(list in formation)

Latino Commission on AIDS
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National Latino AIDS Awareness Day

Día Nacional Latino por la Concientización del SIDA

How to organize an NLAAD coalition.

The purpose of an NLAAD Coalition is to raise awareness about the importance of HIV prevention efforts in the Latino community. Organizing community members to form an NLAAD coalition will help the community address HIV as well as organize an annual awareness day called “National Latino AIDS Awareness Day.”

If you are interested in forming an NLAAD coalition, first contact your local Latino service organizations, community centers, church leaders, advocates, people living with the virus and other community leaders you feel may want to become involved. At this time, explain to them what an NLAAD coalition is, the purpose of the coalition and the benefits to them and their community.

Then, follow-up with a letter that reiterates the information you have already discussed and focus on the purpose of the coalition (e.g. to form a coalition that is dedicated to raising awareness about HIV prevention and reducing HIV infection within Latino communities).

If you are located within the community, try to organize a meeting to become acquainted with those interested in participating. If you are located outside of the community, a conference call can be organized to communicate involvement.

At your first meeting, provide the group with:

- an agenda to help guide you and the group through the meeting
- statistics about Latinos and HIV
- information regarding the National Latino AIDS Awareness Day
- examples of different activities your coalition could organize together.

Because every community is different it is important to identify and discuss the priorities for your community. Therefore, brainstorming ideas and suggestions may be a great way to gain consensus on the goals your coalition would like to achieve. Depending on the size of your group, subcommittees may be a way to divide activities, roles and responsibilities such as media, press, organizing, fundraising, materials and proclamations development, etc.

Coalition building is built on consensus of members and therefore is extremely important. If you have any questions or need additional information, contact Nuris Rodriguez (212) 584-9324 or Guillermo Chacón (212) 584-9304 at the Latino Commission on AIDS.

Buena Suerte!

NLAAD

“Prevenir es Vivir”

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National Latino AIDS Awareness Day

Día Nacional Latino por la Concientización del SIDA

How to obtain a Proclamation/ Resolution

NLAAD

“Prevenir es Vivir”

24 West 25th Street
9th Floor

New York, NY 10010

Tel: (212) 675 - 3288

Fax: (212) 202 - 3620

www.latinoaids.org/NLAAD

Primary National Sponsors:

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- Identifying a local representative. A local representative could be a city councilmember, state senator, state assemblyperson or congressional representative. It would be helpful if you are a constituent or your organization resides within the district of the official you are contacting. It is also helpful to contact an official with whom you have developed a relationship.
- Call the representative. When calling the official's office ask to speak to their Chief of Staff, Legislative Director, or Community Affairs Liaison and explain the purpose of your call:
 - o Provide details about the press conference and NLAAD on October 15th
 - o The need for a letter of support and proclamation
 - o A request for a meeting with the official or representative.
- Write a letter to the representative. You may need to provide a letter or written request for a proclamation. Use the enclosed materials to help you develop a letter. In addition to your request, be sure to include information about your organization and contact information.
- Meet with the official or representative. Be sure to have the NLAAD campaign kit with you, your prepared draft resolution, information/promotional materials about the event and information about your organization (e.g. organizational press kit). Again, it is important for you to begin familiarizing the official and his staff about your agency and, if appropriate, offer to become a source of information for them.
- Provide details about NLAAD. Explain to the official that NLAAD will be a national event which has gained the support of their colleagues (city officials, governors, mayors and congressional representatives) around the nation.
- Provide details about the Press Conference. Inform the official that your organization has arranged a press conference on October 15th about the NLAAD and it would be helpful if the official presented the proclamation at that time.
- Invite the official to the September 16th congressional briefing if they are in Congress. Explain to the representative that this will be a bipartisan briefing (both Democrat and Republican).

A proclamation can take at least 2-3 weeks to develop, so plan well in advance of the October 15th press conference. Call your contact at the officials' office and inquire about the status of the proclamation.

If you have any questions or need additional information, contact Nuris Rodriguez (212) 584-9324 or Guillermo Chacón (212) 584-9304 at the Latino Commission on AIDS.

Participant States (list in formation): Alaska - Arkansas - Arizona - California - Colorado - Connecticut - District of Columbia - Florida - Georgia - Illinois - Indiana - Kansas - Louisiana - Nebraska - Massachusetts - Maryland - Minnesota - Missouri - North Carolina - New Jersey - New Mexico - New York - Ohio - Oklahoma - Oregon - Pennsylvania - Rhode Island - South Carolina - Tennessee - Texas - Virginia - Washington - Wisconsin



National Latino AIDS Awareness Day

Día Nacional Latino por la Concientización del SIDA

Sample 1 - GENERIC DRAFT PROCLAMATION

WHEREAS The Latino community of XX is one of the fastest growing ethnic groups in the region. Today Latinos make up XX of the XX population and are quickly expanding. Latinos are making a critical contribution to life in our communities through dedication to family, diversity, work and cultural richness; and

WHEREAS Many Latinos lack health insurance and are not connected to traditional social service and health care networks. Further Latinos require culturally and linguistically appropriate services that effectively communicate critical health information; and

WHEREAS Latinos make up 14% of the United States and territories population but account for 20% of the living AIDS cases nationally. Latinos see AIDS as one of the most important health issues facing the nation. Many Latinos have misconceptions about HIV transmission that must be addressed through targeted prevention efforts; and

WHEREAS It is critical to raise awareness of the potential for HIV infection in the Latino public and to offer expanded culturally and linguistically appropriate HIV testing and prevention programs; and

WHEREAS HIV prevention programs for Latinos must target those who are at high risk for infection but are HIV negative as well as those men and women who are HIV positive. Further pregnant Latinas need to be counseled and offered HIV testing; and

WHEREAS, AIDS has challenged the extended Latino family to find new reservoirs of compassion, and to confront difficult issues such as drug use and sexuality; and

WHEREAS XX offers [DESCRIBE EFFORTS IN REGION THAT IMPACT ON LATINOS AND NOTE THEY NEED TO BE EXPANDED]; and

WHEREAS, Latino AIDS Awareness Day brings an opportunity to increase community awareness and dialogue, to commemorate those lost and bring leaders together to advocate for greater services and community involvement to fight this epidemic.

NOW, THEREFORE, BE IT RESOLVED, that the XX does hereby proclaim October 15, 2003, as "LATINO AIDS AWARENESS DAY" in XX and urges all community-based organizations, religious communities, civic groups, elected officials and government agencies to utilize this day to raise awareness of AIDS in the Latino community.

Participant States (list in formation): Alaska - Arkansas - Arizona - California - Colorado - Connecticut - District of Columbia - Florida - Georgia - Illinois - Indiana - Kansas - Louisiana - Nebraska - Massachusetts - Maryland - Minnesota - Missouri - North Carolina - New Jersey - New Mexico - New York - Ohio - Oklahoma - Oregon - Pennsylvania - Rhode Island - South Carolina - Tennessee - Texas - Virginia - Washington - Wisconsin



National Latino AIDS Awareness Day

Día Nacional Latino por la Concientización del SIDA

Sample 2 - ROUGH DRAFT FOR LOS ANGELES

Latino AIDS Awareness Day October 15, 2003

WHEREAS, HIV infection has been a fact of life in the Los Angeles Latino community for over 20 years, and

WHEREAS, Latinos represent about 44% of those diagnosed with AIDS in Los Angeles County compared with 19% of those diagnosed nationally, and

WHEREAS, more than 13,000 Latino men, women and children have been diagnosed with AIDS in Los Angeles County since 1981, with over a twelve hundred deaths reported among Latinos in Los Angeles County in the last five years alone and 6400 cases living with AIDS as of December 31, 2002,

WHEREAS, Latinos represent 45% of the population in Los Angeles County, yet account for 68% of those living in poverty and as a result many of those infected with the virus do not access health care until they are ill and often are diagnosed with AIDS at the same time they learn of their HIV infection, and

WHEREAS, the majority (___%) of new HIV infections in the Latino community occur amongst young and adult Latino gay and bisexual men, in dire need of specially developed HIV prevention messages, strategies and interventions, and

WHEREAS, AIDS has challenged the extended Latino family to find new reservoirs of compassion, and to confront difficult issues such as drug use and sexuality; and

WHEREAS, Latino AIDS Awareness Day brings an opportunity to increase community awareness and dialogue, to commemorate those lost and bring leaders together to advocate for greater services and community involvement to fight this epidemic;

NOW, THEREFORE, BE IT RESOLVED, that the Board of Supervisors of the County of Los Angeles does hereby proclaim October 15, 2003, as "LATINO AIDS AWARENESS DAY" in Los Angeles County as promoted by the Los Angeles Latino AIDS Awareness Day Committee comprised of many community based organizations and endorsed by the Department of Health Services Office of AIDS Programs and Policy, and urges all community-based organizations to utilize this day to raise awareness of AIDS in the Latino community.

Participant States (list in formation): Alaska - Arkansas - Arizona - California - Colorado - Connecticut - District of Columbia - Florida - Georgia - Illinois - Indiana - Kansas - Louisiana - Nebraska - Massachusetts - Maryland - Minnesota - Missouri - North Carolina - New Jersey - New Mexico - New York - Ohio - Oklahoma - Oregon - Pennsylvania - Rhode Island - South Carolina - Tennessee - Texas - Virginia - Washington - Wisconsin



National Latino AIDS Awareness Day

Día Nacional Latino por la Concientización del SIDA

Sample 3 - ROUGH DRAFT FOR NEW YORK

PROCLAMATION

WHEREAS: OVER ONE HALF OF NEW YORK CITY'S LATINO RESIDENTS REPORT PERSONALLY HAVING A CLOSE PERSONAL FRIEND OR FAMILY MEMBER INFECTED WITH HIV; THERE IS HARDLY A LATINO FAMILY THAT HAS NOT BEEN TOUCHED BY THE DEATH OF A LOVED ONE WITH AIDS; THERE ARE COMMUNITIES IN THE CITY SUCH AS THE SOUTH BRONX, EAST HARLEM, WESTERN QUEENS, THE LOWER EAST SIDE, WILLIAMSBURG/BUSHWICK, SUNSET PARK AND WASHINGTON HEIGHTS THAT HAVE BEEN DISPROPORTIONATELY AFFECTED BY THE TRAGEDY BROUGHT ON BY AIDS, AND

WHEREAS: NEW YORK CITY IS THE EPICENTER FOR AIDS AMONG LATINOS; THE CITY HAS 7% OF THE UNITED STATES LATINO POPULATION BUT ACCOUNTS FOR OVER 25% OF LATINO AIDS CASES REPORTED NATIONALLY TO DATE; NEW YORK CITY HAS MORE LATINOS CURRENTLY LIVING WITH AIDS THAN LOS ANGELES, SAN JUAN AND MIAMI COMBINED; NEW YORK ACCOUNTS FOR OVER 35% OF ALL AIDS CASES AMONG LATINO WOMEN IN THE UNITED STATES, AND.

WHEREAS: AIDS AMONG LATINOS IN NEW YORK CITY HAS PRIMARILY BEEN DRIVEN BY INTRAVENOUS DRUG USE AND MEN WHO HAVE SEX WITH MEN. INCREASINGLY LATINAS COMPRISE AN EVER INCREASING PORTION OF THOSE LIVING WITH NEW HIV INFECTIONS AND AIDS. THERE ARE COMMUNITY BASED ORGANIZATIONS WHOSE PRIMARY MISSION IS TO PREVENT THE SPREAD OF HIV INFECTION AMONG LATINOS AND TO PROVIDE SERVICES, HOUSING AND DRUG TREATMENT FOR THOSE LIVING WITH THE VIRUS, AND

WHEREAS: NATIONAL LATINO AIDS AWARENESS DAY IS INTENDED TO PROMOTE HIV PREVENTION EFFORTS IN THE LATINO COMMUNITY THAT ARE CULTURALLY AND LINGUISTICALLY APPROPRIATE AND EFFECTIVE AND TO SUPPORT EFFORTS TO OVERCOME THE STIGMA AND DISCRIMINATION THAT SO OFTEN ACCOMPANIES THE DISEASE; THE DAY WILL BE COMMEMORATED WITH ACTIVITIES IN EACH BOROUGH OF THE CITY THAT REFLECT THE DEPTH OF COMMITMENT BY ELECTED OFFICIALS, HEALTH CARE PROVIDERS, COMMUNITY BASED ORGANIZATIONS, RELIGIOUS LEADERS, ARTISTS AND OTHER LATINO COMMUNITY LEADERS

WHEREAS: MY ADMINISTRATION RENEWS ITS LONG STANDING COMMITMENT IN WORD AND DEED TO PREVENT THE SPREAD OF HIV INFECTION IN ALL COMMUNITIES OF COLOR AND TO DEDICATE EXTRAORDINARY RESOURCES TO MEET THE NEEDS OF THOSE OFTEN WITHOUT MEANS LIVING WITH THE VIRUS

THEREFORE, I, MAYOR MICHAEL BLOOMBERG, DO HEREBY PROCLAIM THIS DAY, OCTOBER 15, 2003, AS NATIONAL LATINO AIDS AWARENESS DAY IN THE CITY OF NEW YORK

Participant States (list in formation): Alaska - Arkansas - Arizona - California - Colorado - Connecticut - District of Columbia - Florida - Georgia - Illinois - Indiana - Kansas - Louisiana - Nebraska - Massachusetts - Maryland - Minnesota - Missouri - North Carolina - New Jersey - New Mexico - New York - Ohio - Oklahoma - Oregon - Pennsylvania - Rhode Island - South Carolina - Tennessee - Texas - Virginia - Washington - Wisconsin



National Latino AIDS Awareness Day

Día Nacional Latino por la Concientización del SIDA

10 Ways to participate in the National Latino AIDS Awareness Day

Participating is an excellent way to take action and help prevent HIV in the Latino community or any community you work with. **NLAAD's message is "Prevention Saves Lives"** and there are many things you or your organization can do to relay that message to your community.

1. Log onto www.latinoaids.org/NLAAD for information, or call to receive your own NLAAD Campaign Kit @ 212-675-3288 ext 324.

2. Through the website: Click onto "List of Participants" to see who is participating in your state

3. Contact the local organizations and see what they are planning to do. You can have your organization come on board with them or they can help you with suggestions for your own event.

4. If your organization provides testing and counseling, hold a special Testing Day event in your agency. Offer incentives such as food, resources, or a social to have people come in and get tested. As an individual you can get tested to set the example.

5. Have you and your staff/clients email/call your local representatives and tell them why this day is important and why prevention is important for Latinos and everyone.

6. Hold a health fair focusing on Latino health and educate people about HIV in the Latino community. Invite local organizations, community centers, schools to attend.

7. Have a group of peers (dependent on the age group you would like to reach) do outreach in your local neighborhood promoting awareness about HIV in Latino community. Put up posters, hand out flyers, condoms, etc.

9. Gather your family for a meeting and explain to them why this day is important and that this is happening on a national level to raise awareness about prevention for Latinos. Ask them to talk about it with their friends, compadres, mothers, hermanos and abuelitos.

9. Hold a cultural event (for example, invite a Latino dance group to entertain your community members) and talk to the audience about HIV in the Latino community.

10. Work with your local church to hold a vigil for Latinos living with HIV/AIDS and recognize October 15th as National Latino Awareness Day.

NLAAD

"Prevenir es Vivir"

24 West 25th Street
9th Floor

New York, NY 10010

Tel: (212) 675 - 3288
Fax: (212) 202 - 3620

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National Latino AIDS Awareness Day

Día Nacional Latino por la Concientización del SIDA

How to organize a press conference

When To Have One

Hold them only when you have news. Reporters dread news events in which no news is made. Do not waste reporters' time with non-events, or events designed simply to promote your name. Actually make news (news announcement, new report released, protest staged, etc.) at your event.

Determine Who The News Is For

Before you make news, at your event, you must target your audience. The audience for your news will determine what kind of event you stage and what media is invited. That means where you stage the event, who speaks, what the banners look like and numerous other details will be colored by your target audience. For example, events promoting youth related messages will look and sound very different from other kinds of events and will be designed to attract media that serves young people.

Good And Bad News Days

Schedule your event with the best timing in mind. Do not stage your events late in the afternoon or evening when many reporters are on deadline. Mondays are not preferred because offices will be closed over the previous weekend and you will not be able to reach key reporters for a couple of days before the event. Fridays are not good either, because the news may come out in Saturday's media, the least read issue of the newspaper.

Good Time for Press Conference

Late morning for press conference is a good time; lunch hour if you are trying to attract participants to a rally; and midweek is good when other news may be slow. Of course, you can never really predict slow news days. And the reality of your organization may dictate other times. If you must stage a rally after work, for example, at least do it during the evening television news so the station can send cameras for live coverage.

Avoid Being "Bumped" - Check for competing events.

Keep the Event Short - About 30 to 45 minutes is the length of a good press conference.

Location

Make your event convenient for reporters, yet dynamic and appropriate in terms of backdrop.

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How to organize a press conference (cont.)

Speakers Lineup

Limit your speakers at a press conference to three or four maximum. The first speaker welcomes, hosts, introduces other speakers and communicates key messages. Typical speakers might include: An executive director or other key staff person, board member, a person or two representing the personal human interest, a public official, celebrity, local politician or ally and an “expert”, say, the author of the report you are realizing or the lawyer in charge of a case.

Practice Your Event

For press conferences, consider a “dress rehearsal” the day before with your speakers (at least those who can attend). Fire questions that reporters may ask at the speakers during the rehearsal, and test any audio visual equipment you may be using.

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HERE IS YOUR CHECK LIST FOR A PRESS CONFERENCE

- News defined
- Audience targeted
- Location, Time and date scheduled
- Room confirmed for press conference
- Calendar checked for conflicts
- Speakers identified and confirmed
- Media advisory drafted and sent to reporters
- Deliverables produced (press kit, reports, videos, etc.)
- Logistics in place for media event (security, crew, volunteers)
- Decorations produced (banners, posters, podium logo, charts, etc.)
- Pitch call to reporters made
- Dress rehearsal for speakers at press conference
- Audio-visual equipment secured for space
- Media check in sheet put out. Someone assigned to staff the check -in desk at all times
- Reporters greeted and checked in as they arrive
- First speaker starts on time (within 5 minutes of scheduled time)
- Other speaker starts on time
- Q& A period starts
- Follow up spin after Q&A
- Follow-up work completed

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National Latino AIDS Awareness Day
Día Nacional Latino por la Concientización del SIDA

MEDIA ADVISORY SAMPLE

A media alert or media advisory is a brief (usually one-page) notice that alerts the media of an upcoming event. It tells what, when, who and why and provides the name and phone number of a contact person at your agency.

Media advisories are usually faxed two days before an event. Check with individual outlets to see if faxing is appropriate.

Always be sure to send your media alerts to wire services and ask them to list your event on their "Daybooks," a calendar of upcoming news events which are kept by wire services, such as AP, UPI, and Reuters. Remember some wire services distribute a list of the coming week's events on Friday afternoon.

The following is a sample media advisory which should be released on your organization's letterhead.

For Immediate Release
[Date]

Contact: XXXXXXXX
Tel: XXX.XXX.XXXX

MEDIA ADVISORY

WHAT:	(Your Agency) announces that October 15, 2003 will become the first National Latino AIDS Awareness Day. It is a day of hope for the future of a world without AIDS [State principal message]
WHERE:	(Include location, street address and suite or floor number)
WHEN:	(Include date, day and time of event)
WHO:	For more information, contact (name, organization, title and telephone number)

"PREVENCIÓN ES VIVIR"

Participant States (list in formation): Alaska - Arkansas - Arizona - California - Colorado - Connecticut - District of Columbia - Florida - Georgia - Illinois - Indiana - Kansas - Louisiana - Nebraska - Massachusetts - Maryland - Minnesota - Missouri - North Carolina - New Jersey - New Mexico - New York - Ohio - Oklahoma - Oregon - Pennsylvania - Rhode Island - South Carolina - Tennessee - Texas - Virginia - Washington - Wisconsin



National Latino AIDS Awareness Day

Día Nacional Latino por la Concientización del SIDA

SAMPLE RADIO PUBLIC SERVICE

Radio public service announcements are an excellent and easy way to promote your organization and the National Latino AIDS Awareness Day. A radio PSA should sound like a cross between a news story and commercial message. The PSA should be brief, interesting and conversational.

For best results send your radio PSA script with a short cover letter to your local radio stations at least one week prior to the start date. The cover letter should make the case for the timeliness or worth of the message – highlight local HIV/AIDS statistics (ex. Newark has the highest infection rate among women 18-44 years-old.) You should choose stations whose demographics best matches your target audience.

The following is a sample radio PSA script which should be released on your organization's letterhead.

Contact: XXX.XXX
Telephone: XXX.XXX.XXX

Start: XXX.XX.XXXX
Stop: XXX.XX.XXXX

SUBJECT: National Latino AIDS Awareness Day

20 seconds:	HIV infection has been a fact of life in most Latino communities throughout the United States for over 20 years. October 15th, 2003 will become the first National Latino AIDS Awareness Day. It is a day of hope for the future of a world without AIDS. Contact (your organization or local/state hotline telephone number) for AIDS prevention activities taking place in your communities. “Prevención es Vivir”
30 seconds:	HIV infection has been a fact of life in most Latino communities throughout the United States for over 20 years. October 15, 2003 is the last day of Hispanic Heritage Month in the United States and the first day of what will become an annual observance -National Latino AIDS Awareness Day. It is a day of hope for the future of a world without AIDS. Contact (organization) at (telephone number) for a list of activities promoting AIDS prevention in your communities. “Prevención es Vivir”



National Latino AIDS Awareness Day

Día Nacional Latino por la Concientización del SIDA

August 26th, 2003

Dear Friend and Colleague:

The Center for Disease Control (CDC) has announced it will directly fund only HIV prevention programs that target persons who are already HIV positive to prevent them from infecting others. CDC officials have made it clear that they will no longer directly fund efforts to prevent infection among men and women who are HIV negative but are at high risk. These policies will result in sharp increases in new HIV infections across all communities, particularly among People of Color who represent over 50% of the AIDS cases nationally. Latino families and communities across the nation continue to be impacted at disproportionate levels.

The Latino Commission on AIDS and the Hispanic Federation along with over 250 national partners announce the first national event dedicated to promoting Latino AIDS Awareness. On **October 15th, 2003** cities around the country will respond to the state of AIDS among Latinos in their specific communities. Join us in our first annual **National Latino AIDS Awareness Day**.

PURPOSE

October 15th is the last day of Hispanic Heritage Month in the United States and the first day of what will become an annual observance -National Latino AIDS Awareness Day. It is a day of hope for the future of a world without AIDS. The National Latino AIDS Awareness Day (NLAAD) Planning Committee and members at large acknowledge that we must organize to inform our Latino communities about the importance of HIV/AIDS prevention. Our intention is to raise awareness, prevent infection and to commemorate this day as a recognized Day of Remembrance because Latinos in the United States have been disproportionately affected by the HIV/AIDS epidemic:

- Latinos represent 14% of the United States population but as of December 2001, the CDC estimates that there have been 149,752 cumulative Latino AIDS cases in the United States - 28,554 female and 121,198 male. ¹
- HIV ranks as the 2nd cause of death for Latino males between ages of 35 - 44 (5th for White men) and the 4th cause between the ages of 25-34 (6th for White men). For Latinas AIDS is the 3rd ranked cause of death for 35-44 (9th White women) and 4th for 25 - 34 (8th White women). ²
- In 1996, 19.6% of persons diagnosed with AIDS were Latino and that number has risen to 20% in 2001.

In recognition of the rising infection rates among Latinas and young Latinos/as, localities around the country will use the National Latino AIDS Awareness Day to promote and sponsor activities on prevention ranging from HIV testing to cultural events in an effort to reduce new infections and provide care for Latinos living with the virus.

HOW YOUR ORGANIZATION CAN PARTICIPATE

We urge you to participate to promote the importance of prevention within the Latino community. To aid you in this effort, we have provided the enclosed Campaign Kit compiled with information ranging from fact sheets regarding Latinos and HIV to ideas/activities on how to participate in the National Latino AIDS Awareness Day. There is also information on how to hold a press conference and how to request a Proclamation or Resolution from your local governor or legislative official.

The Latino Commission on AIDS, the Hispanic Federation and your local colleagues participating in the planning process are here to assist you with any information or help you may need organizing this event. We have provided a participant list for your convenience. Feel free to call us if you have any questions and we hope you will be able to join “our familia” in this unprecedented event.

For further information or if you have any questions, please contact Nuris Rodríguez at the Latino Commission on AIDS @ 212-675-3288 or José Calderón at the Hispanic Federation @ 212-233-8955.

¹ U.S. HIV and AIDS cases reported through December 2001 Year-end edition Vol.13, No.2, Table 7 (CDC)

² Kaiser, Figure 4



National Latino AIDS Awareness Day
Día Nacional Latino por la Concientización del SIDA

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Table I

Latino AIDS Case Rates Per 100,000 and Reported AIDS Cases, by State

State	2000	July 2001–June 2002		
	Latino AIDS Case Rate per 100,000	Total AIDS Cases Reported Among Latinos	Percent of Total US Latino AIDS Cases	Latinos as Percent of Total AIDS Cases in State
United States Total	31.4	8,418	100%	19.1%
Alabama	18.1	6	0.1%	1.6%
Alaska	NA	NA	NA	
Arizona	11.3	115	1.4%	21.6%
Arkansas	13.2	6	0.1%	2.5%
California	19.4	1,249	14.8%	30.0%
Colorado	15.9	82	1.0%	29.4%
Connecticut	98.7	178	2.1%	26.8%
Delaware	64.6	14	0.2%	5.7%
District of Columbia	102.6	18	0.2%	2.5%
Florida	37.7	757	9.0%	15.6%
Georgia	20.7	66	0.8%	3.6%
Hawaii	7.1	14	0.2%	9.4%
Idaho	NA	NA	NA	NA
Illinois	26.6	249	3.0%	15.4%
Indiana	20.4	33	0.4%	7.0%
Iowa	22.9	9	0.1%	10.5%
Kansas	15.3	10	0.1%	10.9%
Kentucky	34.2	11	0.1%	3.9%
Louisiana	11.7	24	0.3%	2.7%
Maine	NA	NA	NA	NA
Maryland	18.4	39	0.5%	1.9%
Massachusetts	103.8	194	2.3%	26.9%
Michigan	10.7	33	0.4%	5.1%
Minnesota	33.2	15	0.2%	10.6%
Mississippi	44.2	NA	NA	NA
Missouri	25.3	14	0.2%	4.0%
Montana	NA	NA	NA	NA
Nebraska	29.5	12	0.1%	17.9%
Nevada	21.8	52	0.6%	19.1%
New Hampshire	NA	NA	NA	NA
New Jersey	42.5	305	3.6%	18.8%
New Mexico	11.9	52	0.6%	37.4%
New York	92.7	2,119	25.2%	27.7%
North Carolina	27.0	36	0.4%	3.6%
North Dakota	NA	NA	NA	NA
Ohio	21.6	41	0.5%	5.6%
Oklahoma	9.4	19	0.2%	7.4%
Oregon	14.1	27	0.3%	9.0%
Pennsylvania	77.6	286	3.4%	13.5%
Rhode Island	35.1	29	0.3%	25.9%
South Carolina	39.6	17	0.2%	2.1%
South Dakota	NA	NA	NA	NA
Tennessee	30.3	13	0.2%	1.8%
Texas	15.3	811	9.6%	27.9%
Utah	20.2	18	0.2%	19.1%
Vermont	NA	NA	NA	NA
Virginia	19.8	42	0.5%	4.5%
Washington	23.2	61	0.7%	12.0%
West Virginia	NA	NA	NA	NA
Wisconsin	20.3	31	0.4%	14.2%
Wyoming	NA	NA	NA	NA
Puerto Rico	45.4	1,260	15.0%	99.8%
Virgin Islands	NA	15	0.2%	21.4%
Guam	NA	NA	NA	NA
Pacific Islands	NA	NA	NA	NA

* <5

NA = not available.

Includes reported AIDS cases among Latinos 13 years of age and older.

Sources: Centers for Disease Control and Prevention, *HIV/AIDS Surveillance by Race/Ethnicity, L238 Slide Series Through 2000*; Kaiser Family Foundation, *State Health Facts Online*, Special Data Request from the Centers for Disease Control and Prevention, 2003.