



ASIAN & PACIFIC ISLANDER  
AMERICAN HEALTH FORUM

## HIV Prevention Leadership Summit

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Speech by Edward Tepporn, HIV Program Manager of the  
Asian & Pacific Islander American Health Forum

HIV Prevention Policy Initiatives: What will it Take to Turn the Tide  
on the U.S. HIV/AIDS Epidemic?

Plenary on June 13, 2008

Good afternoon. Shortly after arriving in Detroit, I received a phone call from my very first mentor in the HIV field, Michael Stancil. Unfortunately, Michael had called me to let me know that our dear friend and former coworker, Ms. Rochelle Patterson, had passed away the day before. Some of you may remember Rochelle, or Roki as many of us called her, from the Community Planning Leadership Summit held in Saint Louis in 1998 when she performed excerpts from “Danger! Danger! Women At Risk!” a production which sought to raise awareness about the growing impact of HIV/AIDS on African American women.

When I first became involved in HIV Prevention in St. Louis back in 1995, I found support from members of the African American community, gay community, Latino community, and many others who helped to guide me in my personal and professional growth as well as my burgeoning attempts to raise awareness about HIV/AIDS in the St. Louis Asian community. My first co-workers and colleagues, several of whom are in this room today, hold a special place in my heart. From them, I learned early on the value, importance, and collaborative power of looking beyond our own **RESPECTIVE** communities in order to address HIV/AIDS in our **COLLECTIVE** communities.

Often, we are asked for a moment of silence to remember those whom we have lost. But today, I ask that we applaud Roki and all of the community leaders who may no longer be with us in body, but who will always be with us in spirit. Each of them leaves behind an important and powerful legacy that falls on all of our shoulders to carry forward. So please, let’s let them know, that they will NEVER be forgotten.

As panelists, we were asked to discuss the prevention policies that it will take to turn the tide on the US HIV AIDS epidemic. In preparing for today, I kept hearing a song over and over in my head. And the more I thought about it, the more it seemed to fit. Many of you may remember it; a song by Blondie from 1980, “The tide is high... but we’re holding on.”

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The tide of HIV/AIDS has left a devastating trail among gay men and gay men of color over the past two decades. We've witnessed the rise of the epidemic among women, both biological and transgender. We're continuing to see the disproportionate impact that HIV/AIDS has had on African American communities. Tenemos que recordar el impacto desproporcionado que el SIDA ha tenido en comunidades Latinas (*translation: We must remember the disproportionate impact that AIDS has had on Latino communities*). We can not forget about Native American, Native Hawaiian, and Alaskan Native communities for whom post-AIDS diagnosis survival is shorter than almost all other racial groups. And in the Asian & Pacific Islander community, CDC HIV/AIDS Surveillance data has indicated that Asian & Pacific Islander males and females were the only groups to have statistically significant increases in HIV diagnosis rates.

I'd like to take the opportunity to follow up on the listening sessions that took place at the December 2007 National HIV Prevention Conference. On behalf of the Asian, Native Hawaiian, and Pacific Islander individuals and organizations represented at that meeting, we would like to thank Dr. Fenton and Division of HIV/AIDS' leadership again for the opportunity to begin the dialogue. We also applaud the development of the "Heightened National Response" in recognition of the disproportionate impact of HIV/AIDS on African American and Latino communities. And we would like to ask CDC to consider how we can continue to work in partnership to address the increasing impact in all racial communities.

The tide of HIV/AIDS is indeed high across racial communities, but for the past several years, it's been all that we can do to simply hold on. To simply hold on...in a time when our countries' interests and resources are focused on... supporting our troops, homeland security, staving off global warming, fixing the sub prime mortgage crisis, controlling the rising cost of gas, and addressing the multitude of diseases that challenge the health of our communities. Given all of these important issues, I believe it is a testament to all of us in the field of HIV prevention, that we were able to simply hold on.

But many of you have done more than hold on. You have helped to bridge the gaps between evidenced based interventions and culturally appropriate interventions. You have worked endlessly to raise money for organizations so that those who needed services had a place to go where they knew they would see providers who looked like them, who spoke their language, and who understood what it was like to literally walk a mile in their shoes. It's because of your collective efforts that we are moving from simply holding on to turning the tide on HIV/AIDS.

For over two decades, my organization, the Asian & Pacific Islander American Health Forum has worked to ensure that Asian Americans, Native Hawaiians, and Pacific Islanders are able to attain the highest possible level of health and well-being. To attempt to turn the tide of HIV/AIDS in these communities, we co-partnered with the National Alliance of State and Territorial AIDS Directors. I'd like to specifically acknowledge the efforts and insight of Julie Scofield, Murray Penner, Federico Gutierrez, Natalie Cramer and Alberto Santana as well as my co-workers ManChui Leung, Mazdak Mazarei, and Alan Yee.

In December 2007, together we released a document entitled "Breaking Through the Silence." The title is taken from the silence, fueled by stigma and denial, surrounding HIV/AIDS in many Asian, Native Hawaiian, and Pacific Islander communities. This silence is echoed and reinforced by public health systems that choose to remain unaware of or that choose to deprioritize the health needs of Asian, Native Hawaiian, and Pacific Islander communities. Unlike what they say in the movie theaters, in this case, **SILENCE IS DEFINITELY NOT GOLDEN.**

In developing “Breaking Through The Silence”, we conducted a lengthy formative assessment informed by an advisory committee, key informant interviews, surveys, and an independent policy analyst. Out of this process, 4 key recommendations emerged and for each recommendation we identified specific action steps, potential challenges, and examples that work. You can download the Breaking through The Silence document at [www.nastad.org](http://www.nastad.org) or [www.apiahf.org](http://www.apiahf.org)

The first recommendation is focused on raising health department and community planning group awareness. A wonderful example is how many health departments and CPGs have increased their own awareness by participating in May 19<sup>th</sup> – National Asian Pacific Islander HIV/AIDS Awareness Day activities.

Second, we need to consider opportunities to increase the prioritization of these communities. For example, we applaud the Georgia CPG for recently including Asians and Pacific Islanders as one of their priority populations.

Third, we must increase access to resources and capacity building assistance, as exemplified in a new initiative by the California Office of AIDS focused on Asians and Pacific Islanders.

But each of the 3 previous recommendations is predicated on the success of one final recommendation. It is critical that we strengthen data collection and reporting efforts, to be consistent with Federal standards in order to better describe HIV’s impact in specific Asian American, Native Hawaiian, and Pacific Islander communities and ethnic subgroups.

Although "Breaking Through The Silence" was originally intended to help health departments to address the increase in HIV/AIDS specifically in Asian, Native Hawaiian, and Pacific Islander communities; these recommendations can absolutely be expanded to have broader impact. For example, we recognize that there is a need to strengthen HIV/AIDS data collection and reporting for transgender populations, Middle Eastern and Arab communities, as well as other communities of color.

Perhaps some of you have seen conference participants with this sticker attached to their bags. It has the word “other” with a red strike through it. A community trailblazer, Ms. Suki Terada Ports, shared with me that a similar image was used almost 2 decades ago by a diverse group of community advocates to call for a meeting with CDC leadership in order to address the negative consequences of aggregating data for multiple racial groups into an “Other” category.

In particular, the use of an “Other” category

- Prohibits us from understanding the true impact of HIV/AIDS on these communities.
- It reduces our combined ability to evaluate the effectiveness of interventions and programs targeted to these communities.
- It sends the message, Intentional or not, that we are unimportant.

Almost two decades later, a brief review of surveillance reports and epidemiologic profiles reveal that 1 out of 3 jurisdictions still aggregate data for Asian, Native Hawaiian, Pacific Islander, American Indian, and Alaskan Native (and sometimes Latino) populations into an “Other” category.

That is why I am asking you to stop by our booth in the Exhibit Hall. Pick up one of these “No Other” stickers and wear it with pride on your conference bag to show your support and your solidarity.

And while I’m on the subject of strengthening data, I’d like to take a moment to recognize CDC and the Latino community. Because of their efforts, we now have research that shows how behavioral risk factors among Latinos can vary based on their ethnic subgroup or country of birth. I hope that this information helps to advance HIV Prevention efforts in the Latino community, and I strongly encourage CDC to conduct similar studies among all racial populations so that we develop a clearer picture of who is getting infected by HIV/AIDS and so that we can better prioritize and tailor our prevention efforts within each racial community.

It would be unfair if I did not mention that we are asking CDC and health departments to strengthen their data collection, reporting, and research at a time when there has been flat funding or reductions in their budgets. Just as an example, in the US affiliated Pacific jurisdiction of American Samoa, the health department receives only \$6000 a year for core surveillance activities.

As you already know, without additional funding for these activities, CDC and health departments across the US and the US affiliated jurisdictions have their hands tied. So how do we help untie their hands?

We must continue to educate our political leaders and our political candidates. Email. Write. Fax. Call. Or better yet, meet them face-to-face. **Help ensure that whenever they talk about the health of this country’s residents, that they also specifically talk about the domestic impact of HIV/AIDS.**

But perhaps most importantly, on November 4, those of you who are citizens need to get out and VOTE. After 34 years of living in the US, **I just became a citizen last month, and I am so excited, that after waiting so long, I will be casting my very first vote in such a historic election year. Wouldn’t it be historic to make 2008 the year when HIV/AIDS again takes its rightful place as a domestic policy priority for our government?**

The tide of HIV/AIDS is indeed high, and we are indeed holding on. But...

- By building bridges across communities, together we can turn the tide.
- By following the recommendations and action steps in Breaking Through The Silence, together we can turn the tide.
- By strengthening our data collection and reporting systems so that we are better able to plan and prioritize our prevention efforts, together we can turn the tide.
- By continuing to educate our political leaders, together we can turn the tide.
- And by exercising our right to vote, together we can turn the tide.

My name is Ed Tepporn of the Asian & Pacific Islander American Health Forum. **I know that working together we CAN turn the tide of HIV/AIDS in all communities. And I know that working together, WE WILL. Thank you.**