

Alcohol may play role in AIDS transmission

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It is seldom that people think of the words "alcohol" and AIDS together, but many health professionals working in the AIDS field firmly believe that alcohol plays a serious role in the AIDS epidemic.

Although alcohol is not a route of transmission for HIV, it does play an indirect role by altering an individual's sexual behavior while under the influence.

There are reasons to be concerned about alcohol and AIDS based upon the effect of alcohol on the human immune system.

Most would agree that alcoholism and other substance abuse is the number one health problem in the Alaska Native/American Indian population.

Four of the top 10 causes of death in our population are directly related to alcohol and substance abuse, and it can be argued that the other six are indirectly related.

Fetal Alcohol Syndrome, too, is an extremely serious health problem with implications for the future survival of our people.

Researchers have found a correlation between the use of alcohol and drugs and non-compliance with safer sex guidelines.

Data from a research study on gay men in San Francisco in 1984-85 showed that men who reported use of alcohol and other drugs during sex also reported engaging in high risk sexual activities. It is not unreasonable to assume that high rates of syphilis and gonorrhea and chlamydia in our communities are tied to the abuse of alcohol and sex under the influence.

There is evidence that alcohol inhibits the functioning of the immune system in several ways. There is clinical evidence that alcoholics are more susceptible to infection than nondrinkers.

In alcoholics who have not developed cirrhosis of the liver, it appears that the immune system is able to recover once the individual has ceased drinking. The immune system in individuals who have cirrhosis, does not recover to the same extent.

What are the implications for HIV prevention?

First, we must recognize the excess risk caused by the use of alcohol and drugs when having sex. Second, we should avoid sexual activity while under the influence. Third, every Native alcoholism treatment facility must integrate HIV prevention education into their program and into all alcohol/drug abuse prevention activities.

We must view treatment for addiction as fundamental to fight against the spread of HIV and fight for increased resources for drug and alcoholism treatment and prevention. We must become creative in our approach to disassociating sexual activity from alcohol and drugs.

Does the tavern function as the primary place for people to meet one another for sex in your community? What alternatives might be created which offer opportunities for people to meet potential mates, but do not



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revolve around alcohol? Are condoms readily available in the tavern?

Our success in HIV prevention will have a lot to do with how well we control the intersection between sex and alcohol abuse. The prevention and treatment of alcohol and drug abuse in our communities will not only help to control this epidemic, but will help us to achieve a better health status for our people today and for generations to come.

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