Presentation

The Department of STD, AIDS and Viral Hepatitis of the Secretariat of Health Surveillance, of the Brazilian Ministry of Health, in partnership with other Ministries and Secretariats, has been supporting social inclusion policies, affirmative actions and participative management strategies aimed at reducing vulnerability conditions of the black population to HIV infection and AIDS, since such population demands specific and impacting policies.

In this context, we highlight the Brazil Afroatitude Project, launched in December 2004, which is considered a pioneering effort. The project was established as an integrated program of Affirmative Actions for the Black Population, and represents the outcome of a partnership between the Department and the universities that already had an Affirmative Action Program for this population.

The Brazil Afroatitude Project unfolded in two public Calls for Research released by the Department of STD, AIDS and Viral Hepatitis, which main results are now presented in this supplement.

The selected studies, which involved different approaches and focuses, point to the fact that if, on one hand, there was a significant, internationally recognized breakthrough in addressing the epidemic of HIV and AIDS in Brazil, on the other hand we still observe, in some localities and regions, persisting and even worsening conditions of vulnerability and exposure to the HIV/AIDS epidemic in the population self-reported as black and mulatto.

There are indicatives of an increase of the HIV and AIDS epidemic among the black population, which led the Department to launch the Afroatitude Project in 2004. Nevertheless, the interpretation of the data and results presented here should be done with the necessary care and accuracy, taking into account that the AIDS epidemic in Brazil is considered concentrated, as men who have sex with men, injecting drug users and sex workers continue to exhibit more vulnerability to HIV infection than the general population. Other factors should also be considered: the tendency to the pauperization and interiorization of the epidemic, in addition to the increase of the incidence in the North, Northeast and Midwest regions of the country, where there is a greater concentration of black and mulatto population.

The presented articles contribute to furthering and deepening this analysis, which is extremely necessary to the understanding of current socioeconomic, cultural and epidemiological processes that impact the living conditions and the health of this population.

The first five articles of this supplement, through different approaches, address the issue of the vulnerability of the black population to HIV and AIDS infection from the perspective of gender inequality, race and generation, also highlighting the greatest vulnerability of black women with low education and low income.

The sixth article deals with the genomic ancestry of the population of African descents in the state of Bahia and its relationship with socioeconomic status and vulnerability to HIV-1 and AIDS. Observing that the vulnerability to the infection is not associated with the ancestry, but with the socioeconomic conditions of the population.

The seventh article discusses the access to diagnosis by the black population in Counseling and Testing Centers (*CTA*) in Rio de Janeiro.

The eighth and ninth articles present the remnants of Quilombo communities, addressing both racism and violence against black women and the access to public health services for STD/HIV/AIDS in these communities.

Finally, the last article examines the perspective of the black movement in the prevention of HIV, AIDS and other STDs infection, pointing to the need to understand racism as an issue that impacts the condition of access to health, which has been reflected in the increased vulnerability to HIV infection in this population.

We hope the results presented in this supplement will help health professionals, the black movement and the society as a whole to reevaluate their strategies to cope with racism and the vulnerability of the black population to HIV and AIDS.

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