HIV/AIDS Testing: Week Two: The results are in

(Editor's Note: This is the third of a three part story from The Collegian about HIV/AIDS awareness from an anonymous contributing writer.)

On Tuesday, I sat down to think about what I was going to write this week. I was confused and embarrassed.

Two weeks ago I went and had an HIV/AIDS test at the Health and Wellness Center. Free and confidential, the test was painless physically, but emotionally I went into overload.

I questioned whether I would want to publish the results for the entire Behrend community to see.

True to my nature and what I promised, I told myself no matter what, I would tell my story because I believe the best way to fight this terrible disease is education.

I have learned a lot is my 21 years most of it in early childhood.

One of the first things you learn as a child is trust; we trust our parents and those around us.

I suppose that I'm naive enough to believe that you can continue trusting people even after emerging from childhood I have recently awakened my senses.

I know now that I cannot necessarily trust everyone. I cannot always trust that those around me will not hurt me ; I cannot trust people to always tell the truth.

"Get educated so you know all the facts. Education is the best thing we've got," said Joey.

Joey said he also believes that AIDS educators need to give people what they want to get their attention. "Catch their eye and they will

understand. AIDS can happen to anyone. . . it doesn't discriminate," he said.

I asked Joey, why he thought it was important for people to get tested. He replied, "I think it is important to get tested [for HIV/AIDS] because if you don't know if you have it, you could pass it on. If you know you have AIDS, it stops risky behavior."

Risky behavior is most commonly defined as unprotected sex.

Campuses across the nation are waging campaigns against the disease. One of my favorite campaigns was by a student newspaper promoting safe sex.

In Farmville, Va., Longwood College's student newspaper was published with a condom taped inside each copy.

Erin McCay, editor-in-chief of the Rotunda, said, "The purpose of this issue was to raise awareness.'

She added that she was "appalled by the Victorian attitude toward sex, and the grim repercussions that that attitude can have.'

Health officials, however, say that more counseling and testing is needed at some colleges.

"There is a lot of sex, a lot of sexual experimentation, and there is the potential [for HIV transmission]. So just because the news is reassuring, we don't need to be complacent," said Dr. Scott Holmbers, section chief in the division of HIV/AIDS at the CDC.

The seroprevalence rates were not dependent on reasons why students went to the campus health centers. This suggest that many students do not know that they are infected and thus, health care providers cannot accurately determine which students are at risk of infection.

College students seem to be divided into two groups -- those who shrug off the threat of sexually transmitted diseases (STDs), and those who's deep concerns often drive them to swearing off sex.

Cases of HIV among the national college population remain low, according to James C. Turner, director of student health at the University of Virginia. According to him, because the numbers are low, many college-aged kids are falsely reassured into having unsafe sex, and are contracting STDs at an alarming rate.

Conversations with UVa undergraduates reveal that although information on sex is widely available, it is often ignored. Another theme that emerges from these conversations is that, despite an intense focus on sexual issues, AIDS is still a hush-hush topic.

Susan Firkaly, UVa's associate director for health promotion, said that no student at the university has gone public about being HIV-positive.

"You'd be alienated," said one student. Most students agreed, citing the school's conservative air.

After researching AIDS on college campuses, I came to a conclusion. . . I wasn't going to tell my results.

But then I realized something: By not telling my results, I would only be

To increase AIDS awareness and promote safe sex. Longwood College's Rotunda was published with a condom taped



Catch their eye and they will understand. AIDS can happen to anyone. . . it doesn't discriminate.

I guess that's how I got into this whole mess of getting tested. I was naive enough to believe that I couldn't be at risk... because no one would ever lie to me.

The second lesson I learned as a child was forgiveness. You forgive your older sister for dropping you on your head (maybe); you forgive your parents for taking you to Grandma's instead of fishing; you forgive a friend for lying. . .

So I've learned to forgive - I've been guilty of greater things (but don't tell my mom).

Everywhere, everyday thousands of people live with AIDS. Their stories are what prompted me to write this article in the first place. Not only do I respect them, but I admire their strength. One of the people I have come to

admire has waged a one-man war not only to survive the virus, but to educate others about AIDS.

The newspaper was headlined, "SEX!! SEX!! SEX!! IN THE NINETIES."

-Joey DiPaolo

The condoms were stuck on page eight in a box headed, "Just Use It." Dean of students Tim Pierson said the

issue was "inappropriate." Advertising revenue paid for the condoms, according to McCay, who was summoned later to a meeting with Phyllis Mable, vice president for Student Affairs.

The special edition entailed stories and commentary about date rape, AIDS on college campuses, and attitudes about sex as well and unrelated articles. A total of 1,200 copies of the Rotunda were distributed around campus; all copies were gone by the next day.

A poll of nearly 1,000 college students on Spring Break in Daytona in 1991 found that although 88 percent said they were concerned about HIV and sexually transmitted diseases, only 62

Joey DiPaolo, 17, contracted AIDS when he was four from a blood transfusion he received during surgery to repair a congenital heart defect.

For several years after the surgery, Joey suffered medical complications until 1988 when he was tested for HIV.

Under the advise of their doctor, "not to tell a living soul," Joey and his family lived in silence until Feb. 1990 when he became very ill. The doctors expected Joey to die within 48 hours but he lived: that was six years ago.

Since then, Joey has gone public with his disease. When the parents in Joey's community failed in their attempt to prevent him from attending school he decided to start educating people about AIDS.

The biggest problem according to Joey, is that people are not educated about AIDS. He believes that people want to know but they are afraid.

percent used condoms.

The number of students who were selective about partners dropped to 26 percent, down from 29 percent in 1990. One in six sexually active teens has an STD, which puts them at an risk for HIV, according to the National Center for Health Statistics.

The Daytona survey indicated students may be dropping their guards against HIV, a cause for concern given the disease's prevalence, said Mark Klein of Trojan Products, who conducted the Spring Break Survey.

The Centers for Disease Control and Prevention (CDC) estimates that between 10,000 and 35,000 of the 13 million college students in the United States are HIV-infected.

Recent results of the largest study of HIV seroprevalence of US colleges show that transmission among students is rare.

inside each copy.

supporting the idea that AIDS should be a hush-hush topic - and it shouldn't.

By increasing awareness, we can maybe overcome the taboo associated with the disease. That's why tonight I sit down to tell you my fate. . .

... negative.

But what if the test did come back positive? My short interview with Joey DiPaolo proved to me that a positive result wouldn't mean the end of the world.

Sure, my life would change drastically, but a positive result wouldn't mean I couldn't live my life to the fullest.

ONE-MAN WAR: Fighting both a deadly virus and educating people about AIDS, Joey DiPaolo contracted AIDS when he was four from a blood transfusion. DiPaolo, 17, says he believes that people want to know about AIDS but are afraid of it. "Get educated so you know all the facts. Education is the best thing we've got," he said.

Joey takes over 30 pills a day, has four vials of blood drawn each month but describes himself as a "regular guy".

Joey's very cute agent showed me a tape of Joey speaking at a high school in New York. I was amazed how positive Joey was. At one point, one of the students in the audience stood up and asked Joey if he was afraid to die. My heart sank, but Joey simply paused for a second and said, "Everybody dies... But if I spend my time thinking about dying then I'm not really living, am I?"

Special thanks to Joey DiPaolo for the short interview and the CDC Clearinghouse and Scholastic Scope Magazine (March, 1996) for the information.

The Health and Wellness Center provides free **HIV/AIDS** testing to all students. To make an appointment, call 898-6217.

New hope for AIDS treatment

by Tom Keefe Collegian Staff

Over the last two years, AIDS treatment has drastically changed. In 1994, the International Conference on AIDS in Berlin, the overall mood of researchers,

care providers and people with AIDS (PWAs) was gloom and despair.

Just two years later, at the conference in Vancouver, the attitudes of those who attended were much brighter. The attitudes changed from gloom and despair to hope.

hope in a long time," co-chair Dr. Martin Schecher said, opening up the conference. "We are beginning to have the tools within our grasp to be able to start to chip away at this problem, if we

are given the resources and "We have our first glimmers of commitment we need from government and people around the world."

> The development of new drugs and studies revealing the benefit of combining existing drugs were able to change the overall view of medical treatment for HIV/AIDS in just two years.

> The new treatments do still have problems. One of the problems biggest with "combination drug therapy," is the expense. A majority of the HIV cases in the world are in poor countries, which do not have the resources to provide clean water let alone pay for drugs for HIV/AIDS treatment.

For those who can afford the new drugs, other problems arise. Many patients develop a resistance to the drugs or cannot handle the toxicity of the drugs. Also, the drugs don't work for all PWAs.

Martin Delany of Project Inform stated in an interview with AIDScan, "Even though we may be on the brink of something,

there's a huge gap between clearing the first person of a disease and turning that into a practical medical strategy that will apply to hundreds and thousands of people.'

Many researchers believe that a more successful treatment program is out there waiting to be discovered. Peter Piot, the United Nations' AIDS program director said "Let us hope but. ... let us keep both our feet on the ground," at the Vancouver conference.

Outside hundreds of protesters gathered showing an increasing need for improved treatment options. The attitudes of the protesters can be summed up by one protester's banner which read, "Keep your eye on a cure. I'm dying for an answer." Information courtesy of GLCF Anima

For more information on AIDS treatment visit these web sites:

Project Inform http://www.projinf.org/

The Body http://www.thebody.com/

AIDS Treatment Data Network http://www.aidsnyc.org/network/

