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A Dedicated Issue

AIDS has become an issue that cannot be ignored. One fifth of all reported HIV-positive or AIDS cases in the United States occur in New York. At Columbia, the reaction has been powerful. Dealing with the AIDS crisis is not only a personal concern, but also a communal responsibility. How a community responds to crisis defines the strength of that community and its respective role to its members. Education and care remain at the backbone of any response.

University Health Services, under the supportive direction of Dr. Richard Carlson, has taken one of the most active role of any college campus in the United States in reacting to AIDS. The Columbia Gay Health Advocacy Project (CGHAP) has worked to create one of only two campus HIV clinics in America, providing anonymous antibody testing, offering T-4 cell count immune monitoring, bringing extended insurance policy opportunities to HIV-positive students, and dispensing AZT. CGHAP also publishes a nationally recognized primer of AIDS education, "The Essential AIDS Facts Book." The combination of education of the campus population and care for patients sets an example for all other university communities. Barnard's Health Services, which provides only the most minimal treatment for HIV-positive students, would do well to ignore the stereotype that AIDS is a gay men's disease and create a more aggressive program.

Beyond the offices of Health Services, the University community has a role in the fight. Administrators must ensure that condom machines are available and wellmaintained across campus. The offices of residence life must continue to provide forums for AIDS education, and students should attend the floor talks offered by their RA's. Working together as a community is our strongest measure of defense.

Hand in hand with greater communal obligation comes a stricter sense of personal responsibility. Individual privacy gives way to a communal obligation. Education is the first step. No one should be embarrassed to ask questions about AIDS; questioning may save your life. At the same time, anti-AIDS discrimination must not be tolerated. Irrational fears about contracting the disease will only lead to a more panic-stricken and less

tional fears about contracting the disease will only lead to a more panic-stricken and less productive society.

The other personal obligation is more practical. People in high-risk categories must find out if they've been exposed to HIV. The anonymous process of testing at Health Services respects your right to privacy, and strives to destroy the social stigma that fear has attached with such a test. Safe sex practices, including condoms and oral dams, must be balanced with effective communication between partners. Intravenous drug-users, whose rate of increase of contracting AIDS has not decreased as it has among the gay community, must realize the danger of sharing needles and clean up their practices. The most practical measure for everyone remains learning as much as we can about living with AIDS.

Barring a miracle, AIDS is an issue we'll be dealing with a lot throughout our lives. While we might not think about it everyday, the impact of AIDS on society is greater than any other event in recent history. AIDS, simply, is a matter of life and death.

Spectator has chosen to dedicate this issue to that principle, in the belief that education is the community's best reaction. Share this issue with your friends at other campuses, send it home to your family. More than anything else, stay aware of the issues and respond to them appropriately.

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