Monogamy, the sure cure for AIDS

By Christopher Conway

Let’s talk about sex. Did I get your attention? Good. We can all agree that sex is a good thing. But, sex is a rather large topic, so it would be easier if we narrowed it down to something a bit more specific. How about monogamy? Eek! Did I just say the “m” word? Let’s throw in AIDS and condoms as well, just for the hell of it.

Imagine the case of Joe and Mary, two clean cut, all American, heterosexual, non-drug-using Columbia students. Joe and Mary meet for the first time on a Friday night at Cannon’s. They have just finished up exams and are looking to blow off some steam. Joe likes Mary and Mary likes Joe, so they spend a couple hours talking over a pitcher or two of beer. Joe’s thinking, “She wants me.” Mary’s thinking, “Shame his friend is taken.” Joe asks Mary if she would like to go for a walk, and she says yes. One thing leads to another, and they wind up back at her place. Joe and Mary are drunk enough to have lost some of their inhibitions, but sober enough to know what’s going on. Things start to get intense, and their bodies start to scream, “YES! YES! DO ME NOW!” You’ve been there—you know what I’m saying.

At this point, Joe and Mary have
to make some choices. Their first option is to damn the condom and proceed full speed ahead. Joe tells Mary that this could be the start of something great, something epic and that it isn’t going to be a fucka-chicka-walka type deal. Mary tells Joe that she hates to use condoms, because they destroy the physical sensations and rob the moment of its intimacy. Joe and Mary decide that neither of them could possibly have AIDS. They have fantastic, albeit high risk, sex. He thinks he’s the Great Stud of the Universe and she’s still upset that his friend was taken.

The problem is that people with AIDS don’t have tattoos on their head identifying their condition. Lucky for Joe and Mary the odds are that they aren’t going to contract anything. Unfortunately, three million teenagers and nine million adults every year aren’t so lucky and they do pick up souvenirs of their unbridled lust.

But maybe that’s not what happened with Mary and Joe. They are smart; they go to Columbia after all, and have had people drilling the condom ethic into them for the last five or more years. Mary and Joe agree that it is a scary world out there and that it is best to use a condom. So, after an embarrassing walk to her RA’s door, Mary returns with a latex condom lubricated with
There are a few moments of awkwardness in “putting the peel back on the banana” as my high school health teacher used to say, but everything happens just fine. The sex is still great, and both Joe and Mary feel good about themselves because they practiced safe sex.

So let’s go back to Joe and Mary and see what else could have happened. Mary returns from the hall with a condom in hand. Mary wants to sleep with Joe, tonight. Joe really does like Mary, but has been thinking about his sister’s friend who just got diagnosed as HIV positive. And although Mary has been incredible in bed up to this point, he’s not sure that he’s willing to die for the pleasure of having sex with her. Besides, will she still respect him in the morning if he does? So, Joe breaks the news to Mary that he doesn’t want to sleep with her. Mary kicks him out of bed for leading her on. Joe feels like kicking himself the next morning. He’ll get over it. And if he really regrets it, let him hang out in an AIDS ward for an afternoon and then ask him how he feels about his decision.

Most of us have been in all three scenarios at one time or another. We have all had the inner battle between the primal urge and our common sense. The choice between immediate gratification and the long term ramifications of that gratification is never easy. I admit it I love sex and
will rarely pass up the chance no
matter how inopportune the situa-
tion is to have some. But knowing
that having sex with someone could
land me in a hospital two years
down the road dying an excruciat-
ing death is a terrifying possibility.
So should we all swear off sex until
marriage and a negative HIV test?
Fred Kroger, the head of CDC’s
AIDS education unit, said that ab-
stinence is good for “... the very
young, people past 90, and others
when abstinence is forced on them—
with two broken legs for instance...
” We all have natural and healthy
urges that need to be expressed
through heterosexual, bisexual, or
homosexual contact. But condoms
aren’t fail-safe.
Sooner or later, we’re going to
have to come to grips with mon-
ogamy, which doesn’t mean just
sleeping with one person at a time.
It has to do with limiting our num-
ber of sexual partners and choosing
to have sex with someone only if
we’re going to commit to that per-
son for a while. Figuring out who
that “someone special” is takes time,
so we shouldn’t hop in bed with
every possible candidate. When a
relationship progresses to a point
where sex is imminent, we should
go to the doctor and get an AIDS test
with our “significant others.”
It’s not only our lives we’re risk,
it’s also the lives of everyone we
sleep with. How do you think Joe
would feel if he knew he had given
Mary AIDS? Think about it.
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