

COLUMBIA SPECTATOR ARCHIVE

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Activist Calls for AIDS Awareness by Seniors

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Over 15 percent of New York City's over-50 population are infected with the HIV virus, but they comprise a segment of the population that is seldom targeted by AIDS educators.

Morningside Heights is one of the hardest-hit areas in the city with respect to the number of infected individuals. Members of Community Board 7 gathered on Tuesday evening for a presentation on HIV/AIDS among older people and agreed that action needs to be taken.

At 7 p.m. on Tuesday, 60-year-old J. Edward Shaw addressed the Board's Health and Human Services Committee with piles of informational handouts, photographs, and his own personal story. Diagnosed with HIV at 47, Shaw said he went through varying stages of denial and self-destructive behavior before realizing he could

channel his frustration in the form of consumer advocacy.

Since then, Shaw has worked with a number of organizations—most notably the Ryan White Foundation, of which he served as co-chair, and currently the New York Association of HIV—to raise awareness and push for solutions to the growing problem of AIDS in the over-50 crowd.

But Shaw's devotion to the cause is anomalous. He said even those infected often remain in denial and take a passive approach and do not seek seek appropriate treatment immediately.

Shaw blamed lack of proper education and information on the AIDS problem that is discussed rarely. "You'd be surprised what they don't know," he said.

Information pertaining to HIV and AIDS is rarely offered to people over 50—not by community leaders, not by churches, and not even by medical practitioners.

"Doctors just don't talk to older people about sexual behavior. They forget the older generation," Shaw said.

Shaw stressed the need for proactive campaigning to educate older individuals about HIV/AIDS transmission, symptoms, diagnosis options, and treatment.

"Early diagnosis is key," he said, adding that "aggressive early detection advocacy" may be the best way to combat the debilitating effects of HIV on aging immune systems.

To this end, the New York City Department of Health has already implemented procedures for anonymous testing and encourages partner notification pending positive test results.

Still, Shaw said available testing does little good for a population not encouraged to seek it or even to practice safe sex to begin with.

Shaw explained that the best way to tackle the issue may be through the general public as much as through the medical community.

Specifically, Shaw proposed that institutions such as senior centers, churches, and hospitals distribute literature emphasizing the different dimensions of HIV infection in people over 50.

Early awareness among the aging population is especially important because treatment options are not as effective as they are in younger people. Antiretroviral drugs, for instance, can take a harsh toll on an older person's immune system.

The Ryan White Foundation, through RyanCenter on 97th Street, has already forged a path for educational action in the area by

putting on monthly skits about HIV/AIDS awareness for the over-50 crowd.

According to Robert Cordero, Director of Prevention and Support Services at RyanCenter, these performances tackle a wide range of issues concerning diagnosis, treatment, and coping strategies. The skits encourage everyone to contribute to the cause by simply spreading information.

The need for action extends beyond raising awareness, Shaw said. Older AIDS patients often need counseling to deal with the psychosocial dimensions of diagnosis and illness. They may also need assistance in exploring treatment options that are in tune with the changing biology of the older individual.

Shaw encouraged older AIDS patients to seek medical advice even on minor problems, citing his own experience with an enlarged liver, which he would not have found out about had he not pursued his condition aggressively with his doctor.

“People need to ask their doctors to run tests. Don’t be ashamed,” he said.

According to Shaw, the Community Board can “play a heavy role” in influencing the community’s handling of this problem. When Shaw concluded his presentation, committee members immediately launched into discussion of possible courses of action to take in both the short and long term.

“Educating doctors, I think, is something that we as a Community Board and we as a community can do,” committee co-chair Barbara Van Buren said. She acknowledged that the Board “rarely has meetings with the Health Department, even

though we're supposed to be having oversight of the city agencies functioning in our area."

Other members spoke of reaching out to local senior centers to implement informative programming and discussion groups and of adjusting the approach to AIDS awareness in the younger population to encourage early diagnosis and treatment so as to reduce age-related complications.

Cordero pointed out the need for a campaign against injection drug use, which, he said, is "the big driving force behind AIDS infection in New York City's younger population." He cited new and more time-effective forms of testing as incentives for early diagnosis.

"We all need to get involved, at different levels," Shaw said. "Speak up, speak out, and speak often. Something needs to happen in this community."

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—J. Edward Shaw