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# The Struggle Against a Killer

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# The Struggle Against a Killer



by Zachary Gray

### ***Model Student***

***Contrary to the popular rumor that the 'model student' on the Memorial Walkway is a commemoration of a youngster who passed away prior to his arrival as a freshman at Lehigh, its history with Lehigh begins at the beginnings of Gregory Farrington's tenure as President (late 1990's). While at a dinner with the Burman family President Farrington made a comment about the statue he saw in their house. The next day the model student was sitting in front of the President's House. Due to constant vandalism, however, the statue was removed and later relocated to its current location on the Memorial Walkway.***

### ***Philosophy Building***

***Built in 1879, this building originally served as the gatekeeper's house. After certain hours of the night the gates into present-day Memorial Walkway were closed and locked and access to the campus was restricted.***

**T**hroughout the course of history, disease has played an important role in the way in which people live their lives. In the middle ages, the Black Death struck Europe killing an estimated thirty to fifty percent

of the population and forever altering the social landscape of that region. In 1918, an extremely virulent strain of the influenza virus caused the most widespread pandemic in history. Today, another deadly disease known as the Acquired Immunodeficiency Syndrome (AIDS) runs rampant throughout the world. AIDS is a highly destructive disease caused by a retrovirus that affects the immune system. Its victims can survive for an average of ten years following infection; however these ten years are not usually pleasant. Researchers are constantly looking for new ways to prevent this virus from infecting humans, and for ways in which current AIDS patients can improve the quality of their lives. Unfortunately, very little success has been achieved in this endeavor. One method that has been proven effective in the prevention of AIDS is condom usage. In certain small populations of the world, condom usage has been mandated and, consequently, AIDS incidence in those populations has fallen dramatically. However, in many regions of the world, certain religious beliefs and social phenomena are acting as obstacles for safe sex and are therefore furthering the problem of the AIDS pandemic.

As of the middle of 2006, there were more than a billion Roman

Catholics living in the world, accounting for approximately 17% of the entire world population (Ross 10). Although not all Catholics strictly follow every rule put forth by the Vatican, the doctrines of the Roman Catholic Church have a definite influence over peoples' lives. In 1968, Pope Paul VI prepared an encyclical letter entitled "Humanae Vitae" in which he outlined the Church's stance on all topics related to premarital sex and the regulation of birth. As one might assume, the Roman Catholic Church condemned premarital sex and, for married couples, denounced all forms of birth control, including abortion and other unnatural means of preventing or terminating a pregnancy. The Pope's reasoning was that God's will is infallible and married couples are to accept the possible consequences of performing the "conjugal act". He writes, "[...] not every conjugal act is followed by a new life. God has wisely disposed natural laws and rhythms of fecundity which, of themselves, cause a separation in the succession of births. Nonetheless the Church [...] teaches that each and every marriage act must remain open to the transmission of life" (Pope Paul VI 3). Pope Paul VI goes on to talk about how the Church feels about methods for deliberately preventing birth.

These methods include but are not limited to condom use, birth control pills, and birth control sponges. He states:

*Equally to be excluded, as the teaching of the Church has frequently declared, is direct sterilization, whether perpetual or temporary, whether of the man or of the woman. Similarly excluded is every action which, either in anticipation of the conjugal act, or in its accomplishment, or in the development of its natural consequences, proposes, whether as an end or as a means, to render procreation impossible (Pope Paul VI 3).*

Because the Roman Catholic Church has such strict rules about birth control, many followers of the religion have found themselves in a moral catch-22 over the past twenty-five years. Recall that when the “*Humanae Vitae*” was written in 1968, AIDS had not yet come into the mainstream and Pope Paul VI did not need to address the issue. Times have changed, however, and the AIDS crisis has complicated things for the Roman Catholic Church.

Although Roman Catholic law still prohibits the use of condoms, certain individuals in the Catholic hierarchy have stated that it may be acceptable for a married couple to use condoms if one of them, either the man or the woman, is already HIV-positive. Cardinal Javier Lozano Barragan heads the Vatican office for health care, which is currently preparing scientific and moral studies on the issues of condoms and AIDS. He believes, as do some of his colleagues, that in certain instances condom use could be condoned as “the lesser evil” when the alternatives are considered. As Belgian Cardinal Godfried Danneels points out, “[...] it would be a sin for an HIV-positive person to have sex without a condom, since he or she would be violating the Fifth Commandment, ‘you shall not kill’ ” (Associated Press 2).

This concept of the Roman Catholic Church accepting the lesser of two evils also has parallels in the world of prostitution. One theory is that if prostitution were legal, it would be much more regulated and, therefore, sexually transmitted diseases like AIDS would come back under control. While it is true that the Church is much more likely to condone condom use than it is to allow prostitution, questions have been raised in recent years about the possible benefits of legalization. In 2002, Bishop Vaclav Maly

of Prague came out and publicly stated that he believes prostitution should be legalized. Prostitution is a serious problem along the German-Czech border, and Bishop Maly has been there to see the damage it is causing first-hand. Thousands of sex workers from the Czech Republic are under the command of pimps that care much more about the money their women can make than their well-being. Many of these women are infected with sexually transmitted diseases such as AIDS and syphilis, and many of the prostitutes become pregnant with the children of their customers. Oddly enough, the clients of these women find these pregnancies to be desirable and, consequently, the pregnant workers can demand up to twice as much money as those who are not pregnant for performing the same acts. Bishop Maly stated that, “[...] allowing prostitution to continue in legal grey area is a greater evil than legalizing it and bringing it under control” (Pigott 3). The bishop brings up an insightful argument. So often in society people make statements from afar about things that need to be done, but few ever have a real life experience that would lead them to those conclusions. In this case, it might not be a bad idea to listen to a man who actually lives amongst the problem. Bishop Maly somberly stated, “It isn’t enough simply to moralize, to judge, but it is necessary to do something” (Pigott 1).

Although Bishop Maly’s stance may seem very radical when compared with the traditional Roman Catholic teachings, he has not met any serious opposition in his country. Father Daniel Herman, who is in support of the Bishop, also commented on the prospect of legalizing prostitution in the Czech Republic; he says, “It doesn’t mean we don’t believe what the Bible says, or what the Church says, but we have different problems today, for instance, than the people of the Church had three hundred years ago” (Pigott 4). Although the Church still officially opposes condom use, it has found numerous other ways to participate in the fight against AIDS. Out of all the HIV treatment centers in the world, 26.7% of them are Catholic-based. According to Cardinal Barragan, the Catholic Church’s presence was felt in 62 countries as of June 2006 and many of these nations have received free retroviral drugs bought with funds raised by Catholic churches around the world. When it comes to prevention, their main goal is to educate people and their families to the point that they will behave properly in

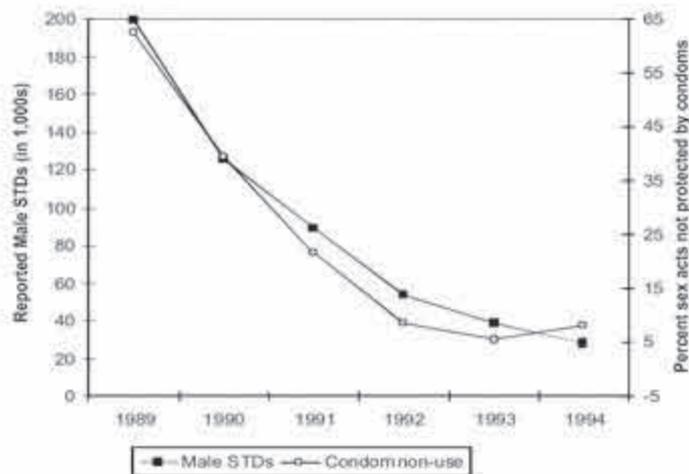
the eyes of the Church. According to Cardinal Barragan, they have found that when people live in a good environment that promotes and supports moral behavior, the educational aspect of AIDS becomes a much easier task. The Catholic Church educates through countless small publications, conferences, and personal interaction with the people in regions stricken with AIDS (Barragan 1-2). They fully support the education of new physicians, nurses, and paramedics who want to help AIDS patients, but one cannot help but wonder: if the Roman Catholic Church is willing to go to great lengths to impede the progress of the AIDS pandemic, then why are they so unwilling to openly accept condoms as an effective method of prevention? Although they are not 100% foolproof, they are proven to drastically reduce the chances of spreading the HIV virus.

In 1989 in the Ratchaburi province of Thailand, a sort of “condom revolution” took place. With a sex worker industry that was thriving, Thailand was a prime location for the spread of disease. At that time, most male clients preferred to have sex without a condom so if a prostitute ever required one, she was most likely going to lose the customer. Consequently, most prostitutes did not require condoms. In 1989, however, the Regional Communicable Disease Control officials in Ratchaburi came to the conclusion that the best way to combat these disincentives for condom use was to require by law that every sex worker wear a condom with every client, every time. Soon thereafter, STD rates in Ratchaburi dropped significantly and the 100% Condom Programme caught on in surrounding provinces (see Figure 1).

Even though the 100% Condom Programme became prevalent in the Ratchaburi area, the issue of condomless sex still existed. Throughout the beginning of the year in 1991, many presentations were made to high-ranking officials in Thailand with the

hope that they would make the 100% Condom Programme into a national law; in August of 1991, they achieved this goal. The National AIDS Committee, chaired by the prime minister of Thailand, issued a resolution that nationally implemented the 100% Condom Programme. The resolution stated, “The gover-

Figure 1. Comparison of increase in condom use with decline in reported male STDs on a national scale, Thailand, 1989-1994

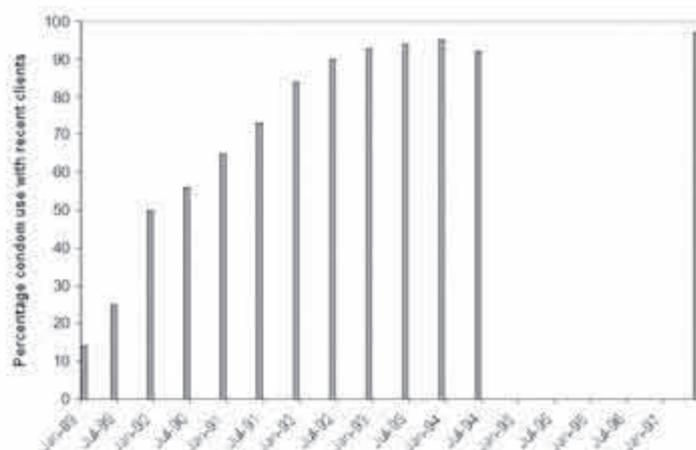


Source: UN AIDS Case Study: Evaluation of the 100% Condom Programme in Thailand: 2000 (pp. 3)

nor, the provincial chief of police and the provincial health office of each province will work together to enforce a condom-use-only policy that requires all sex workers to use condoms with every customer. All concerned ministries will issue directives that comply with this policy” (Evaluation 3). As a result, about 60 million free condoms are being distributed per year throughout the sex establishments of Thailand and condom use has become the norm (see figure 5).

Since the 100% Condom Programme was implemented nationally, STD rates at government-run clinics have plummeted. In 1986, there were more than 400,000 new cases reported and just ten years later in 1996 that number had dropped to approximately 30,000 (see Figure 4).

**Figure 5 Increase in condom use with recent clients as reported by sex workers at direct sex establishments in the sentinel serosurveillance**



Source: Epidemiology Division, Ministry of Public Health, Thailand

Some questions have been raised as to whether the prostitutes and their clients are simply going to non-government clinics since the implementation of the 100% Condom Programme and therefore artificially deflating the numbers, but surveys of local pharmacists have indicated otherwise. In interviews done during the early 1990's, 80% of pharmacists reported a significant decline in the quantity of drugs sold for treatment of various sexually transmitted diseases. In addition, a survey of active sex workers revealed that about 75% of them still get tested and treated by government-run clinics (Evaluation 26-28).

Although this case study was performed in the late 1990's and the numbers are about ten years

old, it still proves that condoms are an effective means of preventing sexually transmitted diseases. On the other hand, some have argued that condoms are ineffective in specifically preventing a disease like AIDS due to the extremely small size of an HIV virus. In 2003, Cardinal Alfonso Lopez Trujillo from Colombia came out and took this stance claiming that condoms assisted in the spreading of AIDS because they gave people a false sense of security when having sex with an HIV-positive person (Associated Press 2). However, despite the Cardinal's pessimistic views on condoms, statistics taken from the legal brothels in Nevada show otherwise.

These fully legitimate sex establishments are located in the

deserts of Nevada, typically on the outskirts of the major cities of Las Vegas and Reno due to the Nevada state law that prohibits a brothel from being in operation in a county with more than 400,000 residents. All the women who work in these sex establishments are there on their own accord, and generally enter the business because of the large income that a popular prostitute may potentially earn. According to a September 2007 article in the Chicago Tribune, prostitutes can make anywhere from \$36,000 per year on the low end to a staggering \$480,000 per year for upper-class workers (Scharnberg 2-4).

In order to work in one of these establishments, a woman must first be tested for all sexually transmitted diseases. Once she is cleared to work, Nevada state law requires that all sex workers be retested once a week for the duration of their employment. These tests can cost anywhere from \$70 to \$120 per week and the money is taken directly out of the workers' salaries. In addition, the state of Nevada requires that condoms be worn for all sex acts that occur on the premises of these establishments and all prostitutes reserve the right to turn away any customer that they suspect of being infected. At certain brothels, the male clients are required to expose themselves to the prostitute prior to engaging in any sexual activity so that she may examine his genitals with a special lamp that is used in detection of sores associated with various sexually transmitted diseases. According to the Nevada Department of Public Health these tests

and precautions have paid off because no sex worker in the state of Nevada has ever tested positive for HIV (Scharnberg 2-4).

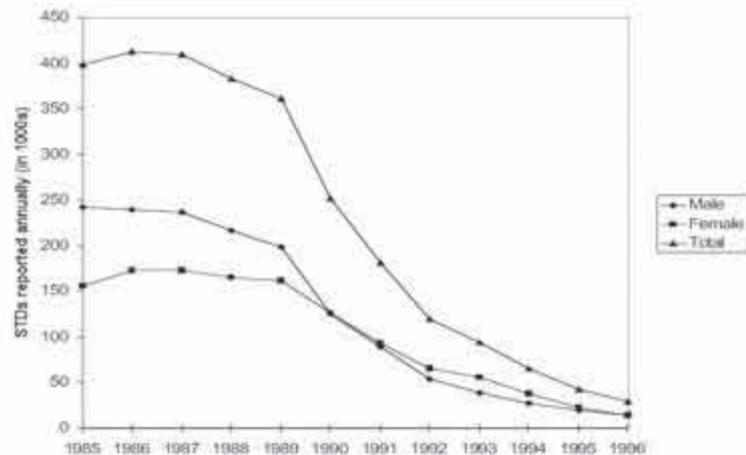
There are other social phenomena outside of religion that influence the use of condoms and attitudes toward AIDS. Certain cultures have a very strong stigma about AIDS patients. Some believe that it only affects a certain class or quality of people, and others have a strong lack of faith in modern medicine. In Japan, for example, AIDS is a growing problem. As of 2003, there were only 12,000 adults living with HIV, which represents less than 0.1% of the population there. However, the Japan Center for International Exchange estimates that the total number of AIDS patients living in Japan is doubling every four years. This rapid increase can be accredited to a few main factors. First, the citizens of Japan do not currently see the HIV virus as their problem and, therefore, it is typically acknowledged as a problem of foreigners. Secondly, Japan has a very traditional culture. Most parents do not want their children to be educated on any sexual topics in school as they believe it will make them want to experiment at an early age. Consequently, these Japanese youths are undereducated about sex and, when they do experiment, they rarely use condoms. Recently, the Health and Welfare Ministry in Japan estimated that only 6% to 25% of the population of Japan uses condoms and many people in that group only use them for birth control and not for disease prevention (Global 1-2).

Japan is a highly patriarchal so-

ciety when it comes to marriage. The husband is undeniably the dominant spouse, and it is desirable for his wife to be viewed in the community as his subordinate. However, if the husband in a relationship has AIDS, it seems reasonable that the wife would want him to use condoms during sex to preserve her own health and well-being. However, this is not the case. Japanese women in this situation tend to avoid confrontations

education becomes the issue with regard to AIDS prevention. Therapeutics Research-Education-AIDS Training (TREAT) conducted a report in October 2005 in which they interviewed a young woman named Ayi Farida, who has been working as a member of their Asian Community for AIDS Treatment and Advocacy (ACATA) for eight years. She works primarily in Papua, which is the easternmost province of Indonesia (Farida 1).

Figure 4 Reduction in male, female, and total STDs reported at government clinics, 1985-1996



Source: Venereal Disease Division, Ministry of Public Health, Thailand

with their husbands out of fear of being shunned by their peers. A professor at Gakugei University in Tokyo said, "A woman initiating the issue of HIV with her partners and asking them to use condoms would appear rude and challenging, an image she would want to avoid" (Global 1-2).

Amongst indigenous populations around the world, lack of

Many cultural issues have impeded her success as a treatment professional throughout her years there including but not limited to total lack of education, various spiritual beliefs of indigenous peoples, and discrimination on the part of doctors from that region.

It can be challenging to educate these populations about AIDS. When one considers the

fact that a large portion of social learning is done through reading and through watching television, it is easy to see why teaching a culture of people with extremely limited resources about a complicated biological disease like HIV/AIDS would be a difficult task. When asked what the main problems were that she faced working in Papua, Ayi said, "Treatment education – I wish I could tell you how hard it is! It's such a great challenge to explain CD4 counts, the immune system, opportunistic infections, compliance, and drug resistance to people who don't read, don't watch TV, and have never had access to any kind of information" (Farida 2). Nevertheless, Ayi and her colleagues try their utmost to educate the AIDS-stricken people of Papua. Their primary message is that you cannot identify HIV-positive people simply by looking at them. For some reason, the people of Papua seem to believe that a healthy looking person cannot possibly have AIDS because, if a person has the disease, he or she will look skinny and will have a skin rash. This is quite obviously not true and Ayi and her team are doing their best to eradicate AIDS myths such as this one (Farida 2-3).

A second roadblock that Ayi has faced is the spiri-

**It seems that it is only a matter of time until researchers find a real cure for AIDS, but until that day comes, condoms remain the best method available for preventing this dreaded disease.**

tual beliefs of the native tribes in Papua. Some tribes still practice human sacrifice. After the sacrifice, many of the men in these tribes believe that they can cleanse themselves by having sex; however, they believe that sperm is a sacred substance that is not to be wasted so, consequently, using a condom would be completely out of the question (Farida 2). In addition, many Papuans believe in holistic medicines and only go to people like Ayi as a last resort once nothing else has worked. For example, there is a regionally famous fruit known as "red fruit" that the locals claim can cure AIDS. In reality, the fruit was probably just used on patients at a time when the HIV virus was going into dormancy and rumors of a cure spread amongst the people. There is also a spiritual remedy where the patient is supposed to take a shower in the middle of

the night and pray to the spirit (Farida 3). Although the shower might cleanse them enough to ward off other sicknesses, the possibility of it curing AIDS are non-existent.

Cultural differences also make treatment of AIDS in Papua difficult because of the stigma that exists around disease in that region of the world. Typically, when a villager gets a fatal illness, he or she is isolated from society. In certain situations, the other villagers don't allow the patient to leave an isolation room and he or she eventually dies of starvation or from unsanitary conditions. In even more rare circumstances, the afflicted are brought out into the forest and burned alive because the villagers believe the coming of a deadly disease is a curse.

Finally, Papuans have to deal with the issue of discrimination from doctors. Once these people are finally convinced to come in to the hospitals to get treated, they are supposed to receive all the best anti-retroviral drugs available from people like Ayi and the doctors she works with. However, sometimes doctors in Papua do not act in the most honorable of ways. Ayi gives an example:

*Recently one of the patients died tragically because the*

*doctor refused to do a C-section when she had been in labor for almost 72 hours. She was being treated to prevent mother-to-child transmission and she was very good, but finally the baby died inside and the doctor still refused to take any action until she also died. We had followed her from the beginning with counseling and medicine (Farida 5).*

Unfortunately, events like this seem to be commonplace in Papua and they are what Ayi calls the most frustrating part of her job. Despite her aggravations, she still admits that the satisfied patients make the whole thing worth it to her. She said, "But when I see the other patients smiling, when I watch their progress and see what they've been able to do because of my assistance [...] and especially when I see the children

– their eyes, their smiles, it encourages me to fight for their future and combat this epidemic” (Farida 5).

It is easy for people to see and acknowledge the things they are doing, but sometimes it is not quite as simple to realize the things they are failing to do. In the case of the Roman Catholic Church, it is contributing huge amounts of money and effort to the fight against AIDS, but it is inadvertently enabling the disease to spread by not allowing its members to use condoms. It seems that the Church is putting too much faith in Catholics remaining virgins until marriage as the best means for preventing AIDS. In 2003, a longitudinal study of 12,000 American teenagers was presented at the annual convention of the American Psychological Society in Atlanta, Georgia in which all the participants had taken virginity pledges. The study showed that, although the pledges lasted for a while, nearly 60% of the participants eventually broke their vow. Additionally, the STD rate in this group was higher than in a control group of teenagers that did not take virginity pledges (Samuels 2). This study proves even further that the Catholic Church's views on abstinence and condoms are not only outdated, but also ineffective. It is naïve to think that every Catholic is going to wait until marriage to have sex and it is even more naïve to believe that they will all marry somebody who has done the same. It is time for the Church officials to start facing reality and accept the manner in which much of the world works today because, although they believe they are making a conscious effort to fight the pandemic of AIDS, they are actually allowing it to spread by condemning the use of condoms. Other groups in the world are not as fortunate as the Catholic Church in that they do not possess the level of education required to make informed decision about condoms for themselves. One cannot fault the tribes of Papua for passing on AIDS because they truly are unaware of the great consequences of their actions. People like Ayi Farida work day and night to help these people, but all the cultural and spiritual barriers make education in that region of the world extremely difficult.

Because of the controlling religious beliefs demonstrated by certain members of the Roman Catholic Church and social phenomena present in various cultures throughout the world, the AIDS pandemic remains rampant as many people forego the use of condoms for safe sex. It has been proven time after time

that condoms are a very effective means of preventing this terrible disease, and they should be used in all cases where transmission is a possibility. As it relates to prostitution, perhaps legalization and regulation would not be a horrible reality. In the long run, HIV infections in the commercial sex industry could be eradicated as they have been in Nevada, not to mention, boosting the economies of the areas that do legalize. In the undereducated regions of the world, the best anybody can do is try to help. Attempts to help these people are being made worldwide and, if this continues, the concept of AIDS prevention will eventually catch on as a global trend. Nearly every deadly disease in history, dating back to the time of the Black Death in Europe, has eventually met its match in human science. It seems that it is only a matter of time until researchers find a real cure for AIDS, but until that day comes, society needs to accept that condoms remain the best method available for preventing this disease.