

Teach America's Youth How to Prevent HIV

BY SCOTT PHELPS



In his State of the Union address on Feb 26, 2019, President Trump called upon Congress to support a budget that would "eliminate the HIV epidemic in the United States within 10 years." This is a worthy goal, and science has made great progress toward this end. However, neither money nor medication is the ultimate answer to this problem.

The federal Department of Health and Human Services has just sponsored another massive gathering in Atlanta at taxpayer expense for doctors, scientists, and researchers titled: "The 2019 National HIV Prevention Conference: Getting to No New Infections."

The plan they rolled out is called: "Ending the HIV Epidemic: A Plan for America" and includes four strategies: 1) Diagnose HIV as early as possible, 2) Treat the infection rapidly, 3) Protect with medication, 4) Respond rapidly to detect HIV clusters."

But this is merely chasing the problem. Where is the "prevention?" The new thinking seems to be: "Why bother with an ounce of prevention when taxpayers will fund a pound of cure?" That's a \$34.8 billion per year pound of cure by the way.

This problematic approach has filtered down into our educational system. Most U.S. public schools provide some form HIV education, however, lessons with a clear presentation on primary prevention through reserving all sexual activity for marriage are uncommon.

In 2013, the International Journal of Infectious Diseases, published the findings of Dr. Augustine J. Kposowa, of U.C. Riverside on: *Marital status and HIV/AIDS Mortality*, which highlighted the elevated risks of HIV among unmarried men. His research concluded that "Single/never married persons were 13 times as likely to die of HIV/AIDS as their married counterparts." This research on marriage as a protective factor is difficult to find in any CDC messaging today.

Regardless of ethnicity, sex, culture, or socio-economic status, all school-aged youth must have the opportunity to learn that HIV is essentially behaviorally contracted, and as such is almost entirely preventable. In the first 6 years of the HIV epidemic (1981-1987) approximately 33 cases of HIV were diagnosed among youth ages (13-19) per year. After 37 years of ineffectual prevention efforts, cases among this cohort have risen by 5,000% to 1,736 in 2017. Of these cases, 1,060 or 61% were diagnosed among black youth. This could, and should, be prevented.

Sadly, today's black youth who are at greatest risk for HIV infection are the least likely to receive a true prevention message. This is unconscionable. Skepticism that students will choose wisely is no excuse for withholding this message from them. All students should have the opportunity to make healthy decisions for themselves without having their choices pruned by those who think they know better.

Schools have an obligation to provide students with the optimal health standard. The CDC will only "Get to No New HIV Infections," by prioritizing the message that reserving all sexual activity for marriage is the first and best message for America's youth.

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Teaching 'prevention' would help America's youth avoid HIV