A caring society

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WHO currently estimates that eight to ten million adults in the world are infected with HIV, of whom three million are women. In addition, over half a million children are HIV-infected.

In the developing world, the main route of transmission of the virus is through vaginal intercourse, while in many industrialised countries the numbers infected through injecting illicit drugs and through vaginal intercourse are increasing. The conclusion we must draw, as the epidemic continues to spread, is that not only will the number of women who become infected inexorably rise but so will the number of children. It is at present estimated that about one quarter of babies born to infected mothers are themselves infected with HIV.

The daunting forecasts are that 200,000 women worldwide will develop AIDS during 1990 and 1991 alone. This not only represents a profound personal tragedy for the affected women and children; it will also have a profound impact on the family and society as a whole, since the traditional woman's role within the family of carer and mother will no longer be fulfilled.

Society has a duty to respond to this tragedy. One overriding responsibility must surely be to exert every effort to reduce its scale to a minimum. Public opinion must be focused on the issue and renewed efforts must be made to educate both men and women about how to protect not only themselves but others from the spread of this lethal virus. Where there is neither cure nor vaccine, prevention is the only alternative.

But society also has a major, and no less important, responsibility towards those who are already HIV positive.

The key principle is that all infected people, including mothers and children, must enjoy the same basic human rights as uninfected people. Further, they have the right not to be discriminated against or stigmatised in any way—and that includes housing, education or employment. They should have the right to travel as freely as they wish and the right to confidentiality and privacy. They also have the right, according to their needs, to all the support and services due to other vulnerable and sick people.

No need for quarantine

As infection with HIV is only transmitted in three ways—by sexual intercourse, by blood and from mother to baby—there is no rational basis for subjecting mothers and children who have this infection to quarantine or any other type of sanitary restriction. Whenever possible, health care and social support for people with AIDS-related illness should be administered within the general provisions for such care. Measures specifically directed at HIV and AIDS, however well intentioned, may themselves lead to stigmatisation.

There are also serious social implications. In those areas where the prevalence of HIV among young women has been very high for a decade or more, a devastating picture is already being seen. In parts of Africa, there are many villages where only orphaned children and the very old remain. All the mothers and fathers are dead or have fled. This encapsulates the unique horror of HIV within the family. Many of the parents will die while their children are young, and provision must be made not only for sick and dying children but for the majority who, uninfected, will survive as orphans. WHO estimates that more than ten million young children (less than ten years of age) are expected to be AIDS-related orphans in Africa during the 1990s. Society has a responsibility to all—the mothers, affected children and orphans alike.

Even in the minority of countries where women have won equal rights,
HIV-infected women still face discrimination. In the majority of countries, where they have not won those rights, their plight is correspondingly worse. In many cases women have been infected by a partner of whose risk they have been unaware. If they know they are infected and become pregnant, they face the awesome choice whether to continue with a one-in-four chance of bearing an infected baby or to undergo the trauma of a termination of pregnancy. They may already be members of groups – such as injecting drug users – for whom society has little sympathy, or they may be abandoned by their partners, friends and family when their infection is discovered. They face illness and probable early death. They also feel guilt and face blame – but who among us dare cast the first stone? In such circumstances it is not surprising that they frequently cannot care for their children.

Society must give these mothers support at every stage. They need special advice and counselling before and during pregnancy, and afterwards support tailored to their needs. Governments have a responsibility, but cannot alone succeed in fulfilling all these requirements. So there is an important role for support groups to play, with help from non-governmental organizations, charities and other bodies.

Infected children too need help – and who can be surprised that in the worst affected areas many are abandoned and end up in long-term care in hospital? But this is a confession of failure because infected children need to be able to fulfil as far as possible a normal childhood and enjoy a parent's love and affection. Many are born into single-parent families already isolated from the wider circle of family and friends. The older ones feel the stigma of both their own and their mother's illnesses. Isolated at school and ostracised by their friends, they suffer mentally as well as from the physical effects of their illness.

"Street children"

Then there is the other tragic group of children who, having escaped infection themselves, watch helplessly as their parents and siblings sicken and die. Finally, in a slightly different context there are the abandoned children who roam the streets of our cities – but who today face the additional hazard of HIV infection through sexual abuse or intravenous drugs. It is estimated that there are no fewer than 100 million "street children" in the world.

Society must face the fact that in the immediate future it will be necessary to make arrangements for the fostering of sick and orphaned babies and children on an increasing scale. And this must be provided in a caring and compassionate atmosphere. The picture painted is a dark one, and the problems present an enormous challenge for us all. But the human spirit is such that no tragedy, however grave, fails to evoke a positive response.

As members of society, we all have a responsibility to ensure that those infected with HIV are not discriminated against, and that they receive the care and support which all sick people need and deserve.