## LETTERS TO THE EDITOR

Dear David Jones,

I'm writing in response to the Earwig column in the September/October edition of Self and Society (Vol XVIII No 5) and on some remarks made by Shirley Wade in her letter of the same issue. My concern is with reference to HIV/AIDS.

I didn't like the Earwig piece at all, though I admit to being on vulnerable ground here - a professional HIV worker rising to the bait, a spoilsport and special pleader into the bargain. Yet I must protest at what I experience as the cynical and offensive tone of the writing, even when it comes from the pen of a "man of the shadows" exempted from tedious egoic restrictions like rationality and good taste.

I must also correct the tragically false inpression of an epidemic somehow petering out. All the indicators point to a worsening of the AIDS situation around the world. The World Health Organisation now estimates the number of people infected with HIV, the virus that can lead to AIDS, as 8-10 million, and warns of a dramatic acceleration in the near future. By the year 2000 there may be accumulative total of 20 million HIV infected people in the world, perhaps half of whom will develop AIDS within ten years of infection. I should also say that, whilst the theory of an African origin of AIDS is largely discredited and the current number of known AIDS cases (about 60,000) much lower than that for the United States, the spread of HIV infection has been rapid and may now account for half the world total. This includes 200,000 infants born HIV positive by 1990. So of the need for a major world effort in education, prevention and care there can be no doubt. Complacency and misinformation can only help the further spread of the virus.

My other comment is on a sentence in Shirley Wade's letter to the editor, where she says: "would I want to validate a choice of life-style that was promiscuous or drug-related so that it might lead to producing babies with AIDS?" The writer has let herself fall into a kind of sensational journalistic short-hand. Promiscuity (which we all define differently, and usually use to refer to other peoples' behaviour rather than our own) is not really the issue. The issue is safer practice within the sexual encounter. The same goes for drug use - the issue for injecting drug users is the state of their equipment and for all drug users (including consumers of alcohol) their ability to choose safer sex or abstention when under the influence of what they have taken. As a humanistic practitioner within Earwig's AIDS industry, I can only be effective if I validate peoples' right to their choice of life-style whilst clearly providing information, education and support in looking at potential risks and consequences. This most certainly includes the right of an HIV positive woman to take the 30% risk of bearing an HIV positive child, even though it will face a real (as yet unquantifiable) risk of developing AIDS.

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