[Assignment: The scope of the argument may be a personal concern or a matter of public interest. The presentation of your personal opinion on the problem you describe will comprise your thesis statement. It should be created with care, for it will announce the direction and scope of your argument. It is essential that you formally support your thesis statement with ample evidence: not only facts drawn from experience but also the authoritative statements of other people.]

1) Acquired Immune Deficiency Syndrome (AIDS) is such a fast spreading epidemic that even young children are suffering from its devastating effects. The fear of transmission and the general misinformation on AIDS prompted many public schools to refuse enrollment of an child diagnosed as having the disease. Such is the case with Ryan White, a fourteen year old hemophiliac stricken with AIDS. After he contracted AIDS from a blood transfusion, the school board refused to allow him to attend classes. As a result, his parents brought the case to court. Although the judge consented to Ryan's return to school and doctors agreed that there was no danger in it, the parents of twenty-four of his classmates still were not satisfied. Therefore, many children were withdrawn from Western Middle School near Kokomo, Indiana. The parents filed suits until they had to abandon the court battles when appeals and funds were exhausted. Following a physical exam, Ryan was told he could attend school if he used a separate bathroom, disposable utensils at the cafeteria, and did not take gym classes (Doan 10).

2) Ryan White is only one of 215 children in the United States under eighteen known to have caught AIDS since 1981 (Reed 496). They reside in twenty-three states, Washington, D.C., and Puerto Rico; seventy-five percent are concentrated in New York, California, Florida, and New Jersey. Most have died; others live months, or years, between episodes of serious illness; most will die unless a cure is found (Reed 497).

3) AIDS is a disease of the blood which cripples the body's ability to defend itself against illness and disease; it is always fatal. A child can contract the virus in two ways. The first is by a transfusion of infected blood. The second is if the child was infected before birth. This occurs if the mother contracted AIDS through sex with a person who had the disease or was a carrier of it, or if she received infected blood, used contaminated needles, or was a carrier herself. Even if the mother had sex with a carrier, she may not contract AIDS but may also become a carrier. If she gets pregnant, the virus passes to the fetus through her
blood. The child may be born with AIDS or an AIDS-related complex (ARC), a less severe form, or may also carry the disease.

(4) The dilemma of AIDS is a controversial one. Should children with AIDS be allowed to attend school? A few believe AIDS is not communicable while most people feel it is clearly communicable, and school officials have every right to protect the school environment. I strongly believe that children with AIDS have every right to be in school. I think the reason that so many people are against it is because they are misinformed as to the actual methods of transmission.

(5) The many myths that people believed have certainly influenced their opposition towards the attendance of AIDS afflicted children in school. Forty-seven percent believed drinking from the same glass spread the disease. Thirty-two percent thought kissing did, twenty-eight percent thought it could be transmitted by a contaminated toilet seat, and more than fifty percent believed it could be spread through casual contact (Reed 497). However, AIDS is not spread by casual contact nor by drinking, kissing, or a toilet seat. Therefore, it cannot be transmitted through normal interaction.

(6) This was further proven by a study conducted at Montefiore Medical Center in the Bronx. A total of 101 people (children, parents, siblings, other family members) who lived with an AIDS victim for at least two years were observed. All were in contact at least three months in an eighteen-month period before symptoms appeared, when the disease is most contagious. Some shared drinking glasses, toothbrushes, hugged and kissed, and thirty-seven percent slept in the same bed (Wallis 90). Although a high level of intimacy was present, only one of the 101 people was infected: a five-year-old daughter of a drug user. The child had probably gotten the disease before birth (Wallis 90). Even more convincing is that most belonged to lower class families living in crowded conditions which are believed to facilitate the spread of diseases such as AIDS. Furthermore, if AIDS cannot be transmitted in such close family settings, then it is highly unlikely to spread in schools.

(7) As fears of contagion began gradually to subside, several state courts held that schools should not exclude pupils with AIDS when the risk of transmitting the disease is slight. A judge upheld a New York City school policy of making decisions on a case-by-case basis. For example, a rural Georgia school board on March 3, readmitted a six-year-old boy who was asked to leave two months earlier because his sister died of AIDS. The New York City public schools agreed to admit six children with AIDS after a judge threw out legal challenges. However, the majority of schools are still prohibiting these youngsters from attending school. This past fall 18,000 New York City students boycotted the admission of
seven AIDS afflicted students. The parents of children attending another New York City school boycotted sixty-three public schools as they bitterly protested the admission of one AIDS victim. In Dade County, Florida, three seven-year-old girls could only attend classes in a separate room that the Board of Education rented in an unknown facility. In addition, parents at a school in Washington Borough, New Jersey, removed their children when the brother of an AIDS stricken girl was attending school.

(8) There is no reason why youngsters with AIDS should not be allowed to go to school. The AIDS virus is not spread by casual contact, food, or toilets. The children who have AIDS did not acquire it from sitting in a classroom with young victims or from eating with them. "Other children are not at risk unless engaging in sex or sharing needles for drug use. And at such a young age these actions are highly unlikely" (Reed 498). Dr. Martin Smith of the American Academy of Pediatrics offers further reassurance that "the risk of acquiring AIDS among children is low. There has been no instance whatever of child to child transmission" (Reed 498). Since AIDS can only be spread through sexual intercourse and drug needles, I think we should be more concerned with the health of the AIDS victim. Any illness such as chicken pox that is circulating around school can be lethal because the child's immunity system to fight off sickness is destroyed. In other words, a child with AIDS is more likely to be affected by a common childhood illness than another classmate is of contracting AIDS.

(9) Others argue, however, that children with AIDS should not be permitted to attend public school. Indeed, specific institutions should be established specifically for AIDS victims. Dr. Helen Singer Kaplan feels that it is outrageous that while we set up special classes for children with almost every possible medical and psychological problem, there are no special facilities for youngsters with AIDS. They are entitled to the benefit of special education that is geared to their needs and condition. Why subject them to the stresses of a regular classroom. (12)

(10) I completely disagree with the idea of setting up special institutions. There are only 215 children, sparsely distributed throughout the United States, who are afflicted with AIDS. This number of children is too small to justify beginning the construction of hundreds of special institutions to accommodate every single child with AIDS. Suppose that there was only one child in the state of Indiana who suffered from AIDS. Since he would not be allowed in public school, would we have to build a special facility for only one child? Or would he have to travel to the nearest state that had a greater number of victims to accommodate such an institution? This would be a ridiculous circumstance. There is not a large
enough concentration of students in one area to support this type of facility. Furthermore, why should the government spend so much money on special schools when there are not that many children with AIDS? It would be a wasteful expense for the government and would probably cause an increase in our taxes. Another valid reason against these institutions is that the youngsters have a short life expectancy. Out of approximately 200 children with AIDS, 100 have already died. Fifty percent of the remaining few are too sick to attend anyway. This leaves only fifty children with AIDS in America who are able to attend, or one per state (Reed 496). Some argue that the number of children with AIDS will increase over the years and as a result, special facilities will need to be built. However, since these youngsters only live for a very short time, the rapid rate of deaths will outweigh the increase in the number of victims. In addition, the children with AIDS do not want to be segregated into separate schools. They do not want to be treated like outcasts but like normal children their age. Ryan White best conveyed this plea by stating: "I only want to go to school like normal kids." It is my adamant opinion that we should not deprive these children of a normal education.

The underlying cause of the controversy stems from the fear of AIDS. This panic can only be eliminated by thoroughly educating parents, teachers, students, and the community as a whole through medical research, statistics, lectures, books, tapes and films. Once this process of education is accomplished there may be less opposition to the admissions of AIDS afflicted children into the public schools. The New York City school system is the first in the United States to introduce a curriculum on AIDS. This form of education was highly successful in admitting AIDS stricken children into the schools. Fear of the unknown is the main reason why there is so much opposition toward allowing children with AIDS into the schools. Once we overcome this barrier these poor youngsters will be able to attend school like "normal" children.

Works Cited


