

# AIDS in rural areas rising, underreported

**Official** numbers only tell a portion of story, health-care workers say

**By Laura Lane**  
Sunday Herald-Times

Rural and traditional south-central Indiana has not escaped the devastation of AIDS, which has killed someone in all 10 south-central Indiana counties where this newspaper is delivered.

The official area death count: 91. The actual count: probably many more.

And as time goes on, more and more people are becoming infected with HIV, the deadly virus that causes acquired immune deficiency syndrome. Many are startled to learn that of Indiana residents who have one of the human immunodeficiency viruses, 82 percent don't know it.

Given that people with HIV often live 10 years or more without showing symptoms, the virus is being transmitted by people who have no clue they are infected.

According to state board of health statistics, the 10-county area has had 168 people diagnosed with AIDS since 1982, including 91 who have died.

Another 94 are HIV-positive, and are awaiting with fear the day they cross the line, when their T-cell counts dip to 200, and they are reclassified as having AIDS.

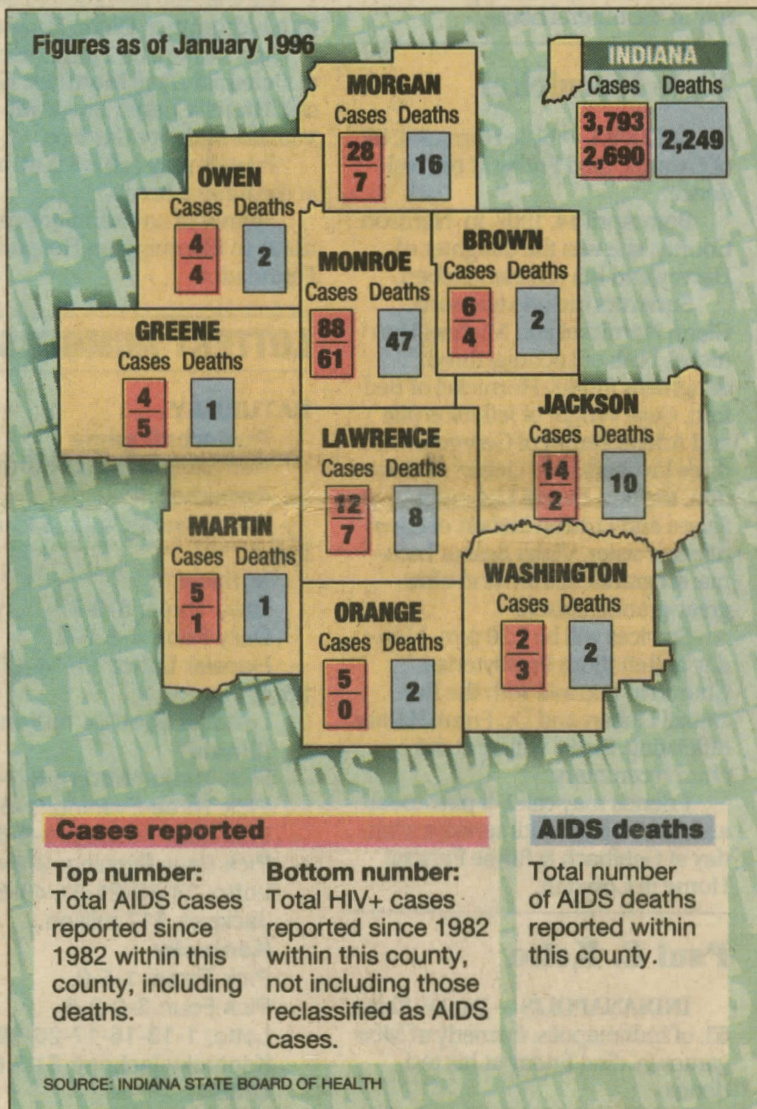
That's at least 262 area families touched by AIDS, a figure that ought to convince people AIDS is not just a big-city concern but an issue amid fields of corn and soybeans.

## Many cases unreported

Health officials agree that HIV and AIDS cases often go unreported in the state, even though physicians are required by law to report each case.

Ask Bloomington AIDS educator Jill Williams about the state totals and she laughs aloud, saying

## Area AIDS and HIV+ cases and deaths



the numbers are way too low.

She knows from the number of clients served by the South Central Community Mental Health Center's Project FIND (Friend INDeed) that the official numbers are far from reality.

For instance, state numbers show that two Owen County residents have died from AIDS and there are now two people with AIDS and four with HIV living there.

Williams knows better. The AIDS assistance program she oversees has Owen County AIDS and HIV patients that outnumber the state count.

"Someone may say that they don't have AIDS in their county and I can be sitting here knowing we have six clients from there," Williams said. "If you look at the stats the state puts out, it would be easy for some rural counties to say,

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STAFF CHART BY STEWART MOON



# AIDS cases rising in rural areas, still underreported

AIDS / from A1

We don't have a problem.' But here in this chair I know they do."

Despite education programs and the reality of AIDS in everyday life, there still are doctors that don't report HIV and AIDS in every case, Williams said. Sometimes, a doctor will keep the family secret.

"A doctor in a little town who maybe delivered this child who later comes home and dies from AIDS might say that well, he died of cancer," she said. "We know that happens, sometimes as a favor to a grieving family."

Since Indiana AIDS cases are listed in the county in which the person lives, rural numbers include those seeking treatment in nearby cities.

## Silence skews statistics

The AIDS stigma is alive and well, both in urban and rural areas. People don't want others to know.

"We face that stigma everywhere, but it's exaggerated in rural areas," said William Yarber, a health education professor and director of the Rural Center for the Study and Promotion of HIV/STD Prevention at Indiana University. "The stigma and isolation in rural areas is compounded and the discrimination is greater."

The center, established in the spring of 1994, is a joint effort of IU and Purdue University. U.S. Department of Agriculture funding was sponsored by U.S. Rep. John Myers, a conservative three-decade rural lawmaker from Covington.

Yarber hopes funding continues, given that Myers has just announced he is retiring from Congress and federal budget cuts promise to be deep.

But for now, Yarber and his staff continue their efforts to educate people and prevent AIDS.

And he agrees that AIDS and HIV go unreported far too often.

Since funding for research often is based on the number of occurrences, he said it's important to have an accurate count. And it's vital, Yarber said, that the numbers reflect reality so people realize the impact of HIV and AIDS.

"I have no idea what the real numbers are, but if only a third of the cases are reported, that really affects funding and public policy," Yarber said.

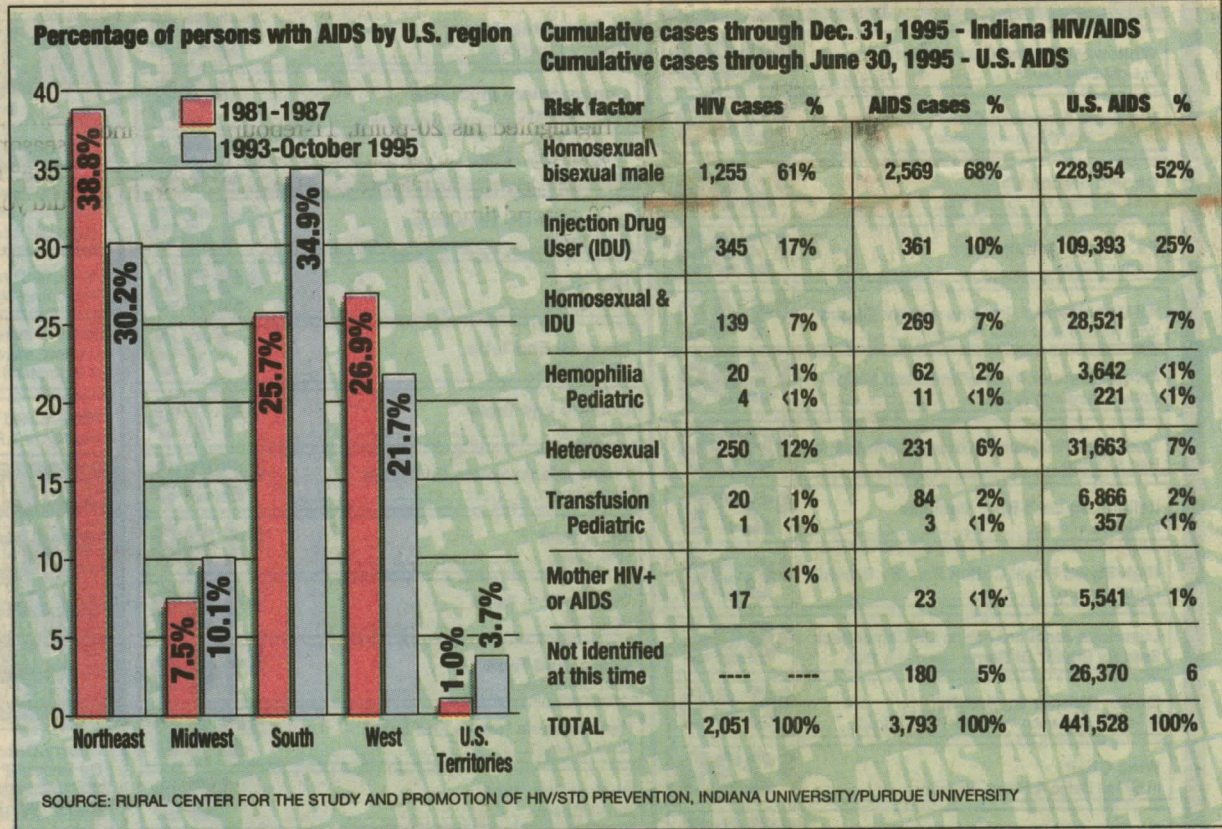
Michael Wallace, director of the state board of health HIV division, admits Indiana's official HIV figures represent just a percentage of those who have tested positive. The state is one of 27 that count only those with a name attached.

Many HIV tests are done anonymously and are not counted, Wallace said, because one person could go to several places for testing and be counted more than once, Wallace said.

The number of AIDS cases and deaths are more accurate he said, but do not reflect the whole picture.

"We assume that there are people who do not report diagnosis and

## AIDS spreading in rural areas, among heterosexuals



some might report another cause of death," he said. "We are working with physicians all the time to get better reporting. We need to make sure everyone knows we are confidential."

## Rural AIDS increasing

AIDS is growing faster in rural America than in urban areas, where education and preventive measures have helped slow the spread of the virus.

That phenomenon was first documented in 1989, when the National Commission on AIDS reported that the number of AIDS cases in rural areas increased by 37 percent while the increase in urban cases was 5

percent.

Yarber said AIDS cases are on the increase in the Midwest and South, "the heart of rural areas," but decreasing in the Northeast and West.

"It illustrates the problem continues to be severe for the rural areas," he said. "The unique challenge for us is trying to reach the rural population. It takes more effort and outreach, more innovation to reach people, than in major cities."

The barriers are not insurmountable, he said. "There's not just the challenge of getting information out there but maybe a stronger lack of receptivity about what AIDS is because of greater biases," he said. "That does not mean the same thing

does not exist in cities."

Sandra Coffey is a public health nurse for the Morgan County Health Department in Martinsville. She knows all too well the desire of some to pretend AIDS does not exist.

Two years ago, she was at the local Wal-Mart as part of an AIDS public awareness campaign. She passed out red ribbons and brochures, but not very many.

"The people did not want anything to do with us; they just shied away," she said. "They would kind of squirm to look at you."

She said the fact that Morgan County has lost 16 people to AIDS, has 28 people living with AIDS and another seven HIV-infected resi-

dents — and those are only the ones reported — would shock the average resident there.

"They might want to ignore it, and it doesn't surprise me," Coffey said. "But I worry about the teenagers and what will happen if families are not addressing this."

## Educate to prevent

Education and prevention, Yarber and Williams say, are the keys to slowing the spread of HIV. Both are dedicated to making people, especially vulnerable young people, aware and cautious.

The number of teens in this country with AIDS doubles every year, Williams said.

"It scares the hell out of me when someone at 18 comes in and says she has had six partners and never been tested. I see that a lot," she said. "We are testing people HIV positive at younger ages. At our anonymous testing site here, we have tested people 18 and 19 HIV positive and that is very ominous."

That, she said, reflects that this country is doing "a very poor job" of educating young people about AIDS.

"I am the first to admit that the two main things involved with AIDS — sex and death — are two things that our society does not deal well with," Williams said. "Parents rely on schools and in schools, it's a sticky subject. I'm the first to admit that,

## Getting te

Anonymous available from Fridays at the Community Me ter at 645 S. R Bloomington. T

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