A Model for a Policy on HIV/AIDS and Athletics

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Abstract: Human immunodeficiency virus (HIV)-infected athletes exist at the collegiate level and are engaging in competitive sports, as was revealed by a 1993 NCAA survey. Unfortunately, there is a void when the issue of policy for the HIVpositive athlete and his or her participation rights at the collegiate level is addressed. Given the controversial nature of opinion on HIV and the resultant acquired immunodeficiency syndrome (AIDS), it is recommended that a policy be in place for an HIV-infected athlete *before* it is needed. Ithaca College

ttention given to human immunodeficiency virus (HIV)-positive athletes and their participation status has increased dramatically over the past few years. HIV infection of such high-profile athletes as Arthur Ashe, Greg Louganis, Tommy Morrison, and Earvin "Magic" Johnson has brought to the forefront the question of whether an athlete who has contracted the virus that is a precursor to the fatal acquired immunodeficiency syndrome (AIDS) should be allowed to continue to engage in competitive athletics. This issue is clearly deserving of intense scrutiny to ensure informed and prudent decisions regarding HIV-infected athletes.

Although the focus of attention has been on professional athletes infected with HIV, HIV-positive athletes competing at the collegiate level do exist, as reported in a 1993 survey of NCAA member institutions.¹⁰ There are no numbers on the infection rate of any particular group of athletes¹⁰ (USA Today. March 12, 1996:1), but the Centers for Disease Control and Prevention estimates that 1 in 200 males of college age are infected with HIV⁶ (USA Today. March 12, 1996:1). The concern in intercollegiate athletics is the possibility of transmission of the virus from the infected to the noninfected athlete via blood contact (sweat does not carry the virus, and saliva does not carry the virus in an infectious form¹²). Unfortunately, injuries are a part of sport and can result in bleeding on the field or court. However, it has been well documented that the risk of HIV transmission in the sports arena is infinitesimally small,^{1,2,4,5,7,10,11} and to date there have been no cases of such transmission.1,2,3,6,10,11

The possibility of a collegiate institution's having to address the issue of the participation rights of an HIVinfected athlete will continue to grow with the ever increasing HIV infection rate of college-age individuals. The has recently developed such a policy, and it is offered here to other educational institutions as a model. It is emphasized throughout the policy that HIV-positive athletes should not be restricted from athletic participation for the reason of infection alone, that strict confidentiality guidelines should be followed, and that mandatory testing of athletes for HIV is not justified.

Key Words: human immunodeficiency virus (HIV), acquired immunodeficiency syndrome (AIDS), policy for athletic participation

aforementioned survey conducted in 1993 of NCAA member institutions concerning HIV/AIDS policies found that 92% of the departments of intercollegiate athletes had no policy to address the issue of athletic participation by HIV-positive athletes. Of the collegiate institutions that had policies concerning participation, only nine of these policies were actually in writing.¹⁰ Therefore, a real need exists to develop effective educational and procedural guidelines for the participation of the HIV-infected athlete. We believe that institutions should be proactive regarding an HIV/AIDS and athletics policy and should have one in place before it becomes a necessity. A collaborative effort by the Medical Director for Athletic Teams and two athletic training staff/ clinical faculty members was put forth at Ithaca College to formulate such a policy. The resultant guidelines are based on the best currently available medical facts regarding HIV/AIDS. The following is offered as a model to encourage the adoption of similar policies by athletic departments of colleges and other educational institutions nationwide.

ITHACA COLLEGE DIVISION OF INTERCOLLEGIATE ATHLETICS POLICY ON HIV/AIDS AND ATHLETICS

The risk of contracting HIV during the course of athletic activity is extremely low. To date, there have been no documented cases of HIV transmission during athletic activity.^{1,2,4,6,7,10} Based on current medical and epidemiologic information, HIV infection alone is insufficient grounds to prohibit athletic competition. The decision to *not* restrict student athletes (hereafter referred to as athletes) merely because they are infected with HIV is supported by the joint position statement of the American Medical Society for Sports Medicine (AMSSM) and the American Academy of Sports Medicine (AASM, now known as the American Orthopedic Society for Sports Medicine)² and the position statements of the American Academy of Pediatrics (AAP),¹ the National Collegiate Athletic Association (NCAA),⁴ the United States

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Olympic Committee (USOC),^{7,8} and the American College Health Association (ACHA).⁹

In accordance with these position statements, Ithaca College supports the above conclusion and believes it is not justified to require mandatory HIV testing for intercollegiate athletes, particularly in light of the fact that no cases of HIV transmission during athletic competition have been documented. Mandatory testing of athletes would fail to decrease the small risk of HIV transmission in athletics.^{4,5,11} Risk of HIV infection is more closely associated with behaviors and conditions external to sports competition, more specifically, intravenous drug use, intimate sexual contact, and intrauterine transmission from mother to baby. Educational programs directed toward the traditional routes of HIV infection will teach athletes how to prevent HIV infection by acting responsibly and will also promote good health practices.^{4,5,6,11} Voluntary testing is available to any student who might be at risk for HIV infection and can be arranged through the campus health center.

In accordance with Ithaca College's policy regarding the rights and privacy of individuals, members of the college community should take care to respect the confidentiality of information concerning persons with HIV infection, HIV-related conditions, or AIDS. The decision to disclose information related to this particular aspect of the athlete's medical history should remain a privilege of the infected individual, and it is of paramount importance that a strict policy of confidentiality be followed.^{3,11} Adherence to this policy helps limit the risk of discrimination against those with HIV infection, HIV-related conditions, or AIDS.

The decision to allow continued athletic participation of an athlete with HIV infection, HIV-related conditions, or AIDS should be based on the athlete's current health status and should be left to the discretion of the personal physician and, if cleared for play, the athlete.^{2,4,6,9,11} Eligibility to participate in athletics for the HIV-infected athlete should be determined using the same procedures and standards used for all other athletes.^{6,9} Continued medical checkups are recommended for the HIV-infected athlete to ensure the best health interests of the athlete for continued sports participation.

The above policy is based on the best currently available medical facts regarding HIV/AIDS and will be continually reviewed and revised when new information warrants.

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