When Chicken Little ran through the streets warning the town of impending danger, no one listened. Last Monday, I informed the 36th young woman of my career of her infection with the HIV virus. For 17 years, I and the countless others who work in women’s health have been screaming “the sky is falling”—and it appears that no one is listening.

As I mentally prepared myself for the HIV disclosure, my mind started going back to 3 of my most memorable experiences. The first was Stephanie; my discussion with Stephanie was traumatic and I wrote about it in an article that was published in Nursing Spectrum in October of 1994. Stephanie was in college making unwise sexual decisions. I’ve been there and done that—truthfully, we all have. The only difference is that we dodged the bullet, and Stephanie was not so lucky. The discussion was difficult because it felt like I was looking into a mirror. I was hearing myself share information that could have easily been applied to my life. As I spoke with Stephanie, I was looking in her eyes, but I was seeing my face.

By 1994 HIV and AIDS was changing. No longer were gay, white men the face of the disease. By that time, we, African American, heterosexual women, had the bullseye on our backs. Thirteen years later, Stephanie is doing okay. I say “okay”, and not “well”, because Stephanie is still making unwise sexual decisions. And though luck is currently on her side, we all know, luck usually runs out.

In 2007, at a weekly HIV conference at Pennsylvania Hospital, I heard Michael Braffman, MD, say that “history concerning HIV is being written as we speak.” Times and treatments have and are changing drastically. I have changed also. Since the article in 1994, I have become a parent, which is why my last 2 HIV disclosure encounters have been so heart wrenching.

Allow me to explain. When a positive HIV laboratory result comes across my desk, I always look at the patient’s age and the number of dependents first. When I saw that Danielle was 15 years old, my mind flooded with memories of my own life when I was 15. Life was easy and fun. That would not be Danielle’s story.

I told her that her blood contained the HIV virus, and even though she understood conceptually, her response was minimal. She made no sound, and had a blank stare with no emotion. I knew that she had no frame of reference; she had no life experiences to draw from. She was a baby! And she was clueless. I made a direct linkage with a pediatric provider and wished her well. From a personal standpoint, it was an easy encounter. From a public health standpoint, it was a tragedy.

My experience with Shante was not so easy. Shante was 17 years old and though I felt prepared to conduct an HIV disclosure with an adolescent, I was not prepared for what happened next. I told Shante about her infection with the HIV virus, and she called her mother from the waiting room into my office. Shante told her mother, who sat down in a chair and cradled her daughter on her lap, where the two of them sat, quietly sobbing.

As a parent, I quickly identified with Shante’s mother and began to cry also. I was crying not because HIV is the same life-threatening illness as 15 years ago, but because I am a mother. And without formal induction, I have accepted the role and responsibilities that come with parenthood. I have taken the unspoken oath to make all the boo-boos better.

Shante’s mother could not make this boo-boo better, and everyone in the room knew it. I gathered my composure and as with Danielle, I made a linkage to a pediatric HIV specialist.

On that day, I realized that the motive behind my message had changed. For years I had been counseling young men and women from a nursing point of view. Watching Shante’s mother made me realize that my “Chicken Little” message had now taken on a life of its own. The message had become personalized, had gone from medical advice to a personal plea.

Nurses and counselors can become burned out and find themselves tired of talking. Parents do not. A parent’s job is never done. So I have inhaled, found my second wind, and have begun to shout with the chorus again, “the sky is falling… the sky is falling… the sky is falling!”

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