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BARBARA HARRISON explains how US companies are learning to deal with employees with Aids.

Learning to deal with HIV positive employees

Frank Deloisio, a sales representative at Digital Equipment Corporation, the second largest US computer maker, knew for nine years that he was HIV positive before he revealed his condition to colleagues at work.

"I was too scared," he says now, to disclose that he was infected with the virus that causes Aids. "I read about cases of people who would lose their jobs and (health) insurance. They would basically be left out in the cold. I didn't want that to happen to me."

Luckily for Deloisio, Digital's management was one of the corporate pioneers in instituting an enlightened education and advisory programme on HIV and Aids. Begun in 1987, the programme includes seminars that explain the disease. Employees are told, for example, that they will not be infected by using the same tools, telephones, computer terminals or toilets.

By 1991, Deloisio felt confident that the myths and fears about HIV and Aids had abated sufficiently among his colleagues to disclose his condition. His departmental managers responded by restructuring his job to take account of his need for medical treatment.

Paul Ross, Digital's manager of its HIV/Aids programme, believes that alleviating the fear of infected and uninfected alike is crucial to avoid workplace problems. "We made a conscious effort to manage our response to the epidemic instead of having it manage us."

Company officials concede, however, that some fears or intolerance are not diminished by education. But digital's approach is as far-sighted and praiseworthy as it is uncommon. Over the past decade, most businesses have ignored the epidemic. Or they have sought to rid themselves of employees they knew or suspected were infected - a practice made illegal in the US last year under the Americans with Disabilities Act.

But about 1 million Americans are infected with Aids, which is the second biggest cause of death for men aged 25-44 and the sixth leading cause for women aged 25-44. And that age group comprises more than 50 per cent of the US workforce.

More than two-thirds of companies with between 2,500 and 5,000 employees and nearly one in 12 companies with fewer than 500 employees have had an employee with HIV or Aids.

In response, the US Centres for Disease Control launched a "Business Responds to Aids" programme last month. The programme, backed by companies such as Levi Strauss, Polaroid, Federated-Allied, Coca Cola, and MGM/UA Communications, urges firms to join an education and prevention effort.

The CDC has prepared a manager's kit and a labour leader's kit to provide step-by-step guidance on how to develop an HIV/Aids policy and an education programme. The kits contain ad-

vice on health insurance issues as well as counselling and educational resources.

It also features a section on the "do's" and "don'ts" under the ADA. For example:

- Companies cannot refuse to hire an applicant with HIV or Aids because their insurance costs may rise.

- Job applicants cannot be required to take an HIV test.

- Companies cannot dismiss employees with HIV or Aids if they are able to perform the "essential functions" of a job given "reasonable accommodation" of their disability.

The CDC's effort to help businesses educate their workforces, and in so doing help prevent the spread of the disease, may be laudable, but it is expected to be an uphill battle.

Lee Smith, former president of Levi Strauss's international operations and now chairman of the Washington-based National Leadership Coalition on Aids, an educational organisation focusing

Age distribution of US workforce and persons with Aids



on business, recommends that, given staff turnover and transfers, Aids awareness programmes run continuously and to be updated with new information.

But he warns that Aids education "is not an easy sell. There are terrible barriers around this disease," says Smith, who noted that one in 25 people in Levi Strauss's San Francisco workforce was HIV positive. He said managers, the majority of whom are heterosexual men and some of whom are homophobic, deny it's a problem and believe it won't affect them.

Smith says he first attempts to persuade managers to institute an Aids education and prevention programme on moral grounds. If that fails, he argues the case on

the basis of costs, comparing the small amount required for a programme with the high cost of treatment.

For US companies, which face soaring health care costs, such arguments are compelling. Insurance premiums increase if an employee becomes infected with HIV, as is the case with any serious long-term illness.

At Digital, which is self-insured, Ross believes that the Aids programme has helped contain health care costs through early treatment and through helping to stem the spread of the disease. With average costs for treatment from diagnosis to death running at about \$100,000, "if we've saved 10 from becoming ill, we've saved a \$1m", he said.

Expert to lead Bank of England

LONDON: The British Government last week appointed Eddie George, Deputy Governor of the Bank of England, to take over as head of the British Central Bank from July 1.

George, 54, nicknamed "Steady Eddie", has a reputation as a safe pair of hands at the Central Bank, where he has held the number two post since 1990, helping to weather some of the biggest crises in the institution's long history.

He replaces Robin Leigh-Pemberton who opted not to seek a further five-year term. Leigh-Pemberton presided during a 10 year period which latterly included the scandal of the Bank of Credit and Commerce International in 1991 and sterling's forced exit from the European Exchange Rate Mechanism last year.

An announcement from Prime Minister John Major's office also said Rupert Pennant-Rea, a leading intellectual and the editor of *The Economist* weekly, would replace George as Deputy Governor at the Threadneedle Street bank headquarters. Pennant-Rea, 45, worked for the Central Bank between 1973 and 1977.

George was favourite for the top job, having helped rebuild the credibility of the Central Bank after the BCCI scandal, over which it was heavily criticised for failing to spot massive fraud earlier than it did.

A tough anti-inflation monetarist, George is also regarded as having coped well with the speculative "hurricane" that drove sterling out of the European Community's Exchange Rate Mechanism currency grid on September 16, destroying a key plant of British government economic policy.

George faces enormous problems when he takes over from Leigh-Pemberton on July 1. Britain remains mired in recession and the Conservative Party government has struggled to rebuild a cohesive economic policy in the wake of the ERM debacle.

He may also have a delicate path to tread in his relations with the Major government. The Bank of England is under direct political control through Chancellor of the Exchequer Norman Lamont and seems likely to remain so for the foreseeable future.

Under the proposals of the European Community Maastricht Treaty on closer EC economic and political unions, its members would be required to have an independent Central Bank before proceeding to the later stages of proposed monetary union.

Leigh-Pemberton, who in later years had a somewhat uneasy relationship with the government and politicians, has suggested that the Bank of England may need a more independent role with or without monetary union. Political sources, however, made it clear on Friday that Major had no plans to surrender political influence over such a crucial instrument of economic policy as the Central Bank.

Political sources said that Major saw monetary policy as something particularly sensitive in Britain, with its high proportion of home ownership and personal mortgages, in a way that did not apply in other European countries.

He had made clear privately he considered it inconceivable and impracticable to give the power over those matters to someone not accountable to Parliament, the sources said. (Reuters)

Europe starts to face the Aids issue

European-based companies have been slower than their US counterparts in establishing policies to deal with employees who are HIV positive or have Aids, write PAUL ABRAHAM in London, DAVID BUCHAN in Paris and CHRISTOPHER PARKES in Frankfurt.

One of the main reasons is that the disease has spread more slowly in Europe than North America. In the UK, for example, 3,995 people have died of Aids since 1982.

"HIV and Aids is a new issue in Europe, and only a small number of employees have so far been involved," said Glenys Rowe, an independent consultant on HIV and Aids implications for business.

Companies that addressed the problem early have mostly been branches of US multinationals or UK-based groups with subsidiaries in Africa and Asia. Public services such as police, fire, and ambulance brigades also have policies.

However, Rowe says that large and even small and medium-sized groups are now beginning to look at the issue. She says it is important for companies to prepare in advance. Some companies, for

Disease has spread more slowly than in US

According to the latest statistics, homosexual or bisexual men account for 65 per cent of new Aids diagnoses and drug addicts for 15 per cent. New diagnoses attributed to infection through heterosexual intercourse in the year to last September numbered fewer than 100. That the proportion of cases confirmed among this group has more than trebled in the past five years has gone almost unremarked.

example, have been placed in the difficult position of taking disciplinary action against an employee for absenteeism and then it being revealed during a hearing that he or she is HIV positive.

About half of the companies that consider adopting a policy for HIV do not do so, but incorporate the issue into existing health policies. A special policy would lead to discrimination, they fear. An effective policy would prevent discrimination in recruitment and continued employment, and counter victimisation by work colleagues. Rowe says a catalogue exists of terrible cases of victimisation. Organisations must prepare through education programmes to counter misconceptions about how the disease is spread.

One of the most encouraging signs, she believes, is the

launch of the UK Corporate HIV & Aids Project. This has linked the leading Aids charities with companies such as IBM UK Unilever, Body Shop, Kingfisher, Wellcome and Marks & Spencer. The project's aim is to produce a number of briefing sheets on a variety of policy issues when considering the impact of HIV and Aids on businesses.

In France, companies still focus on preventing the spread of Aids, rather than organising for a future in which a sizeable proportion of the workforce may be HIV positive.

But even on prevention, a degree of corporate complacency exists which is surprising given that ministerial responsibility for the infection of haemophiliacs with Aids-contaminated blood has been a big political issue in recent

months.

When the French Agency for the Fight against Aids recently surveyed more than 1,000 company personnel directors, they found that one in 10 firms had employees carrying the HIV virus. One in four companies had carried out prevention/information programmes.

But the 80 per cent of companies which had not so far introduced any specific programme said they saw no reason to do so in the future. Yet two-thirds of those interviewed also said that for companies to relay information on Aids to their staff was appropriate.

Companies with a relatively large number of white-collar employees tended to be more active on Aids information, while those in building sector were most passive not to say hostile, on the issue.