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Business Responds to AIDS

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dealing

July 21, 2000

**National Partners
Executive Committee**

Chair

Lynn Franconi
Senior Vice President, Benefits
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Vice-Chair

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Meetings & Conferences

Kathron Compton
Director, Public Affairs
Society for Human Resource
Management

Sue Meisinger, SPHR
Executive Vice President/
Chief Operating Officer
Society for Human Resource
Management

Marketing & Recruitment

William H. Baumhauer
Chairman/President/CEO
Champs Entertainment Inc.

Mary Wilson Byrom
President and CEO
National AIDS Fund

Awards

Barry Greenberg
President
Celebrity Connection

Ruth Roman
Director, HIV/STD/TB
Prevention Programs
National Council
of La Raza

Public Policy & Education

Paul Di Donato
Executive Director
Fundors Concerned
About AIDS

Todd Cunningham
Senior Vice President,
Research & Planning
MTV

Sandra Thurman
Director, Office of National AIDS Policy
736 Jackson Place
Washington, DC 20503

Dear Ms. Thurman,

On September 7-8, 2000, the partners of Business and Labor Respond to AIDS Programs and the Centers for Disease Control and Prevention will present ***Now More Than Ever: Workplace Solutions*** in Washington, DC.

This year's conference, ***Now More Than Ever***, promises to an informative and skills building opportunity for all participants. The conference goal is to educate America's business and labor leaders about HIV and AIDS in the workplace. In order to achieve our national media goals, we have designed the conference plenary sessions to be inspirational, motivational, and catalytic for the conference attendees and the general public.

The conference is built around four issue messages: Education, Philanthropy, Managed Care, and International/Global Concerns – all in the context of business and labor. Given the creative format and luminary speakers we are inviting and the workplace leaders that will attend the conference, we expect a national media presence.

Business Responds to AIDS / Labor Responds to AIDS (BRTA/LRTA) is a public/private partnership, supported by the Centers for Disease Control and Prevention, representing America's leading businesses and labor organizations. Partners include Polaroid, the National Education Association, the National Council of La Raza, Fox Entertainment Group, Inc., MTV, and the AFL-CIO.

As a national leader in the fight against HIV/AIDS, it would a great honor to the BRTA/LRTA Partners and CDC if you would give the keynote address at the second plenary session. The theme of this session is the role of corporate community involvement and philanthropy in the fight against HIV/AIDS.

We'd like you to speak on this subject for approximately twenty minutes. You will have the opportunity to address America's business and labor leaders, as well as the national media, and recognize some of the good work that is taking place in the American workplace.

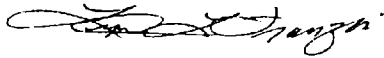
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Luncheon Session Information:

DATE: Thursday, September 7, 2000
TIME: 1:15 pm – 2:15 pm
PLACE: The Omni-Shoreham Hotel
Ambassador Ballroom
2500 Calvert Street, NW
Washington, DC

Thank you for your time. If you have any questions or need more information, please contact Melinda Farris or Peter Hahn at (703) 875-3127. Peter Hahn will follow up with your office next week to determine your availability.

Sincerely,



Lynn Franzoi
Chair



Peter Petesch
Vice-chair

2 - Business
response
to AIDS

Business/Labor Responds to AIDS Program

Purpose of BLTA Program:

- Establish workplace policies
- Conduct manager/labor leader education
- Conduct employee education
- Conduct family member education
- Promote community service/volunteerism among union members.

A national survey conducted of labor unions representing some 14 million union members and their families to learn what labor unions are doing about HIV in the workplace and what union members want to know.

LACK OF POLICIES

Only 36% of labor unions have dealt with HIV/AIDS issues in the workplace

19% said that no AIDS education program operated within their union

75% of union members said that their union should establish AIDS education programs.

63% of union members were unaware of any written policies concerning HIV/AIDS in their workplace.

89% of sites without written policies did not have an HIV education program.

MAJOR ISSUES OF CONCERN IN THE WORKPLACE

Privacy issues of major concern

Exposure to blood on the job

Confidentiality

Workplace discrimination

Information on where to go for help

Working with someone who may be HIV positive – occupational safety issues

OBSTACLES TO PROVIDING WORKPLACE EDUCATION

Lack of manager support for such programs

Lack of materials

Lack of access to trained educators

Lack of interest from employees

PREFERRED METHODS OF TRAINING

Most people wanted handouts they could take home.

People want to watch videos

Posters are important.

Do not like slides or overheads.

Most employees wanted the training to occur at work during work hours.

KEY LAWS

Americans with Disability Act

Federal privacy Act and State laws regarding confidentiality

AIDS INFORMATION FOR VERMONT

NUMBER OF AIDS CASES

1996	27
1997	20
1998	20

Cumulative Total as of 1999: 368

NUMBER OF HIV CASES IN 1999

Male Adult:	17
Female Adult:	2

AGE AT DIAGNOSIS

Under 13	less than 2%
20 – 29	13%
30 – 39	50%
40 – 49	27%
50+	8%

GENDER

Male	89%
Female	11%

DEATHS 184 or 53%

Vermont does NOT have HIV name reporting.

FEDERAL FUNDING IN VERMONT

Ryan White CARE Act (1999)

Early Intervention: \$333,746

HIV Formula Grant \$488,047

Total: \$821,047

HOPWA (1998) \$1,106.000

CDC (1999) \$1,611,000

KEY GROUPS IN VERMONT:

Vermont Cares

Vermont PWA Coalition

Vermont AIDS Hotline 1-800-882-2437 (some 20+ HIV testing sites in Vermont)

AIDS Walk (several) across the state coming up in September.

World AIDS Day December 1.



OFFICE OF NATIONAL AIDS POLICY
EXECUTIVE OFFICE OF THE PRESIDENT
THE WHITE HOUSE

FACSIMILE TRANSMITTAL SHEET

TO: Rosalyn Hamlett FROM: Cheryl
COMPANY: _____ DATE: _____

FAX NUMBER: 690-7318 TOTAL NO. OF PAGES INCLUDING COVER: _____
PHONE NUMBER: _____

RE: _____

☐ URGENT ☐ FOR REVIEW ☐ PLEASE COMMENT ☐ PLEASE REPLY ☐ PLEASE RECYCLE

NOTES/COMMENTS:

Please call w/questions - @ 456-7959
Thanks!
Cheryl

736 Jackson Place
Washington, DC 20503
(202) 456-2437
(202) 456-2438 (fax)

Thank you [Victor] for your gracious introduction, and for taking such an active role when it comes to helping to meet the complex challenges of HIV/AIDS in the workplace.

I am honored to be here for the second national BRTA/LRTA conference. As you may know, I attended the first conference in 1997. And this public-private partnership is even more important today than it was three years ago.

First, I'd like to thank Dr. Helene Gayle and all of her colleagues at the CDC who have worked so hard teaching Americans that the number one weapon against HIV/AIDS is prevention.

I'd also like to acknowledge John Sweeney's commitment in the fight against AIDS – both his leadership roles in AFL-CIO and LRTA.

John Sweeney understands what solidarity is all about. And he knows what it takes to make the dream of a proud and dignified living for all Americans come true.

During a recent memorial service for an AIDS victim, someone said, "The color of our world becomes a little duller each time a person with AIDS dies."

Of course, those of us who have suffered the personal loss of friends and family to AIDS understand the devastation and darkness caused by this disease.

But today I want to say that in our fight against AIDS, everything is not dark.

The truth is – for every AIDS death we prevent, the light in our world shines a little brighter.

And thanks to the courageous efforts of people like Dude Angius of the Los Altos Rotary, of organizations like the Ford Motor Company of South Africa, and this year's other winners, we're saving lives – and extending lives.

That's what our partnership is all about.

Confronting the unprecedented public health crisis of HIV/AIDS has required an unprecedented response.

And while this battle is far from over, we should be proud of how far we've come.

Death rates from HIV/AIDS in the U.S. have fallen dramatically by more than 70 percent since 1995 – and AIDS, once the 8th leading cause of death – is no longer even in the top 15.

Earlier this year, I approved an exciting new project in Maine through Medicaid, which gives people living with HIV access to promising therapies before they become disabled, impoverished, or develop full-blown AIDS.

We needed health policy changes that would help people with disabilities – including those with AIDS – return to the workplace and gainful employment without losing their health coverage.

That's why the President, HCFA, and a wide bipartisan array of Congressional leaders supported and passed the Work Incentives Improvement Act of 1999.

We're educating large and small business and labor unions on how to develop comprehensive and compassionate programs and practices that help managers, labor leaders, employees and their families know what they need to know about HIV/AIDS.

We established a permanent Office of AIDS Research at the National Institutes of Health – and released the first National AIDS Strategy.

Funding for AIDS research is up dramatically – as is funding for Ryan White services.

Our budget request for AIDS in FY 2001 is over 9 billion dollars – which included money to help us reach President Clinton's landmark goal of finding an AIDS vaccine by 2007.

The CDC has an exemplary new prevention initiative called SAFE, a Serostatus Approach to Fighting AIDS, which focuses on reaching HIV-positive people to ensure that they receive care and treatment.

We're also assisting in global HIV/AIDS prevention efforts through the LIFE initiative, which helps non-profit, non-governmental organizations, work with international organizations in HIV prevention.

I'm very proud of our accomplishments and the Administration's team of great public health leaders on HIV/AIDS like Surgeon General David Satcher, Dr. Eric Goosby, Drs. Jeff Koplan and Earl Fox at HRSA, and Sandy Thurman.

Still, I want to be clear: Accomplishments are not the same as victories. And we are a long way from victory.

That is true in this country. And it is even more true in some of the poorest communities around the world.

Even though we've made tremendous inroads against HIV/AIDS here at home, we are profoundly disturbed by the terrible toll that AIDS is taking globally, especially in sub-Saharan Africa.

That's why today I would like to briefly discuss the worldwide AIDS problem from a national security standpoint; its economic ramifications; and how our public-private partnership can continue to combat this 20th century plague.

Twenty years ago, the global community had not even heard of AIDS.

Today, the UN Secretary Kofi Annan describes the AIDS pandemic as "unexpected, unexplained, and unspeakably cruel."

Heads of State and other high-ranking world leaders have declared HIV/AIDS a global disaster, . . ."an outright threat to peace and prosperity."

Last January, before the U.N. Security Council, Vice President Gore declared that "we are putting the AIDS crisis at the top of the world's security agenda."

That's because when we discuss the AIDS pandemic, the statistics are so appalling, so outrageous, and so unimaginable.

We estimate that ³⁴~~25~~ million people, worldwide, are infected with the HIV virus.

Nowhere is the specter of AIDS worse than in the cities and villages of sub-Saharan Africa.

Today, a 15-year old in ^{South Africa}~~Zambia~~ has a ⁵⁰~~60~~ percent chance of dying of AIDS.

Equally threatening is the potential for explosive epidemics in Asia, the former Soviet Union, and parts of Eastern Europe.

This year, India could become the country with the largest number of new infections. By 2010, Asia may even surpass Africa in the number of HIV-infected persons.

By the end of this decade, more than 40 million children in Africa will have lost one of ^{both}~~or more~~ parents to the disease.

And life expectancy in the sub-Saharan region could plummet to ^{by 20 years or more}~~a mere 45 years~~, ^{to levels}~~not~~ not seen since the 1950's.

Not only are the catastrophic effects of the AIDS pandemic causing untold human suffering -- the disease is endangering economies, democracies and -- ultimately -- international global security.

For many nations in sub-Saharan Africa -- and other parts of the developing world -- health care infrastructure barely exists.

Simply put, these health systems cannot support the burden of AIDS.

We know that a failing health infrastructure leads to a failure of stability --and society.

We've already seen that this is true when it comes to economic development. According to a recent World Bank study, AIDS is likely to subtract up to 1.4 percent of the world gross domestic product annually.

By the year 2020, there will be 11.5 million fewer people in the labor market than there would have been without HIV/AIDS.

The Harvard Institute for International Development has stated that “a frontal attack on AIDS in Africa may now be the single most important strategy for economic development.

We also know that the relationship between this disease and political stability is indirect – but real.

AIDS affects political stability because its spread follows the same pattern in virtually every developing country.

First, it affects the elites – doctors, teachers, government officials.

Second, AIDS affects workers.

Third, it affects the military. These three groups represent the very people that keep communities, governments, and countries stable.

That’s the real human development tragedy of AIDS.

The fact is -- the threat to humanity brought on by AIDS will only multiply unless we address this crisis through partnerships at all levels.

That's why in this battle, there can be no "us" and "them."

The U.S. has a direct self-interest in helping the developing world fight the disease.

Many of the corporations represented at this conference have divisions overseas that have begun to experience the direct impact of AIDS on a daily basis.

There are some 5,500 AIDS-related funerals a day in Africa. That number will rise to 13,000 a day in the next five years.

So the AIDS pandemic is directly affecting corporations on the ground that can't get materials to the marketplace because their factory workers and drivers are sick -- or attending the funerals of family members.

Even UNAIDS estimates that as many as 3,000 fixed-term U.N. staff and their dependents worldwide are infected with HIV.

Some companies have found it necessary to create funeral leave policies that meet the realistic needs of their workers.

Others are adapting their business practices to reflect local customs in such areas as inheritance law.

Many Companies

~~Companies like British Petroleum and Barclay Bank~~ have even told us that they are now hiring two employees for every one skilled job, assuming that one will die of AIDS.

Whether it's increased benefits, training costs, or disruptions due to sick and bereavement leave, AIDS is seriously affecting the way business is conducted globally.

Partnerships are critical if we're to have a meaningful impact on the AIDS pandemic.

Without increased resources and a high level of coordination among the various sectors of government, industry, and cities and villages throughout the developing world – we will fail to stop this disease.

So today, I once again call upon our partners in the private sector – from the pharmaceutical industry to the entertainment industry – from AIDS researchers to those living with AIDS – from health organizations to manufacturers – from CEO's to employees – to continue the fight against HIV/AIDS.

Continue to implement workplace programs, at home and throughout the world.

Let the BRTA/LRTA programs be a guide in designing your workplace education programs and HIV/AIDS policies.

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Get involved in local AIDS Walks as well as other community service activities.

Most important, show support for HIV-positive employees.

If we are to conquer HIV – and I firmly believe we will – we must do more, we must do it better, and we must do it now.

But it will take more than words.

It will take education and action. It will take loud voices and bold visions. It will take the courage and commitment of science, business, and government alike.

But it must be done.

Thank you.



FAX TRANSMISSION

U.S. Department of Health and Human Services
Office of the Secretary

DATE: 9-6-00
TO: Sandy Thurman
HHH: Cheryl
FAX: 202-456-2439 PHONE: _____
FROM: ROSALYN HAMLETT, SPEECHWRITER

Phone: (202) 690-7470
Fax: (202) 690-7318

TOTAL NUMBER OF PAGES TRANSMITTED: _____

COMMENTS:

Please see Sec. Shalala's
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