

FOIA MARKER

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PACHA [Presidential HIV/AIDS Advisory Council] - Committees - Discrimination

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VIA FAX

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Date:	8-7-97
# Of Pages To Follow:	6

Comments:

Here are the notes on the February meeting between ONAP + the various federal agencies that discriminate (except the Job Corps folks.)

Please keep me posted about how things are proceeding. Thanks! Hang in there, dear. Koxo, Be

212 788 5566 P.02/07

NOTES OF FEBRUARY 7, 1997 MEETING WITH FEDERAL AGENCIES RE: MANDATORY HIV ANTIBODY TESTING POLICIES AND PROCEDURES

The meeting was held at the Office of National AIDS Policy and was convened by Patsy Fleming. The focus of the meeting was on mandatory HIV antibody testing: which Federal agencies perform such testing and why. Federal agencies reporting at the meeting were:

- ◆ Defense Department
- ◆ State Department
- ◆ USAID
- ◆ Peace Corps

Dr. Helene Gayle, of the Federal Centers for Disease Control and Prevention, also participated in the meeting.

All of the agencies represented at the meeting perform mandatory HIV antibody testing.

Defense Department

1. Basic policy on mandatory testing developed in 1985 and sustained since then following policy reviews. The policy was developed after a recruit whose HIV positive status was unknown to the military was given a vaccination. The initial policy affected new recruits only; later expanded to include all active personnel.
2. The Department wanted the mandatory testing policy to be consistent with policies on other diseases.
3. Rationale for testing policy: see attached hand-out.
4. New applicants who test positive are referred to their local public health agency for follow-up.
5. Currently, less than 1,000 HIV positive individuals are on active duty.
6. "Difficult" issues:
 - ◆ should all active duty HIV positive individuals be retired/separated from duty?

- ◆ the policy limiting overseas deployment of HIV positive personnel
- ◆ effectively limits their career advancement. No study has been done
- ◆ on the career advancement of HIV positive individuals vs. HIV negative
- ◆ individuals. It was suggested at the meeting that such a study be conducted.

State Department

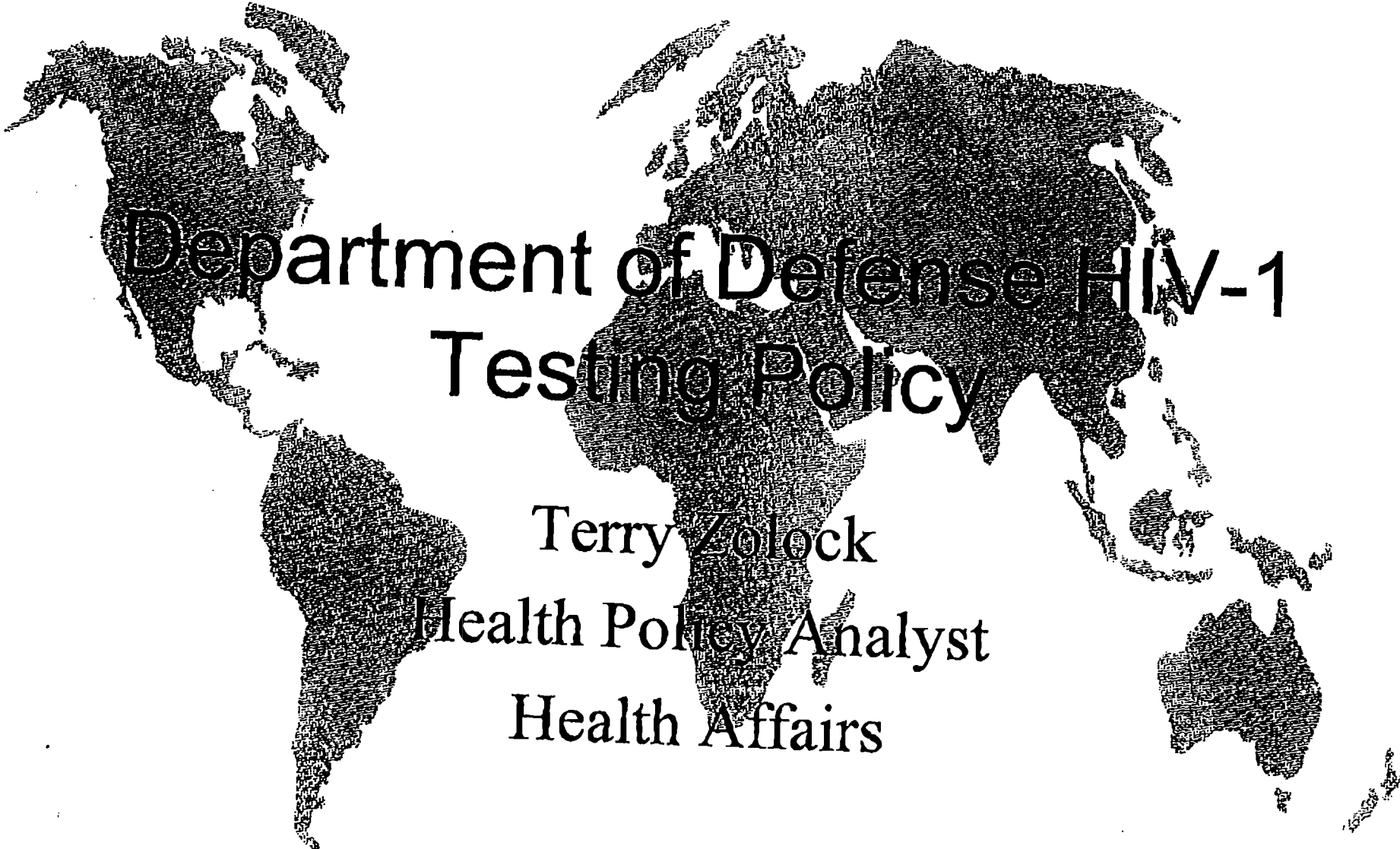
1. Within the Foreign Service, a medical clearance is needed for overseas assignment. Such clearance includes an HIV antibody test. A process to appeal a denial of worldwide clearance is available. No HIV positive individual has sought a waiver from the medical clearance requirement.
2. Estimate of the number of people who have tested positive: less than 100.
3. Counseling is available to those who test positive. The Department is very sensitive to issues of confidentiality, according to the Medical Director.
4. Rationale for mandatory testing:
 - ◆ potential exposure to high disease areas.
 - ◆ potential assignment to areas with poor health care systems.
 - ◆ maintain safety of "walk-in blood banks."

USAID and the Peace Corps

1. Both agencies' policies on mandatory testing are similar to the State Department's policy.
2. For USAID, any testing of local employees is done on a embassy-by-embassy basis.
3. The Peace Corps does not test stateside employees. HIV antibody testing began in 1987. To date, no one has tested positive.

At the conclusion of the meeting, Ms. Fleming noted the need for continued review of mandatory testing policies, in light of the advances in the medical treatment of HIV infection.

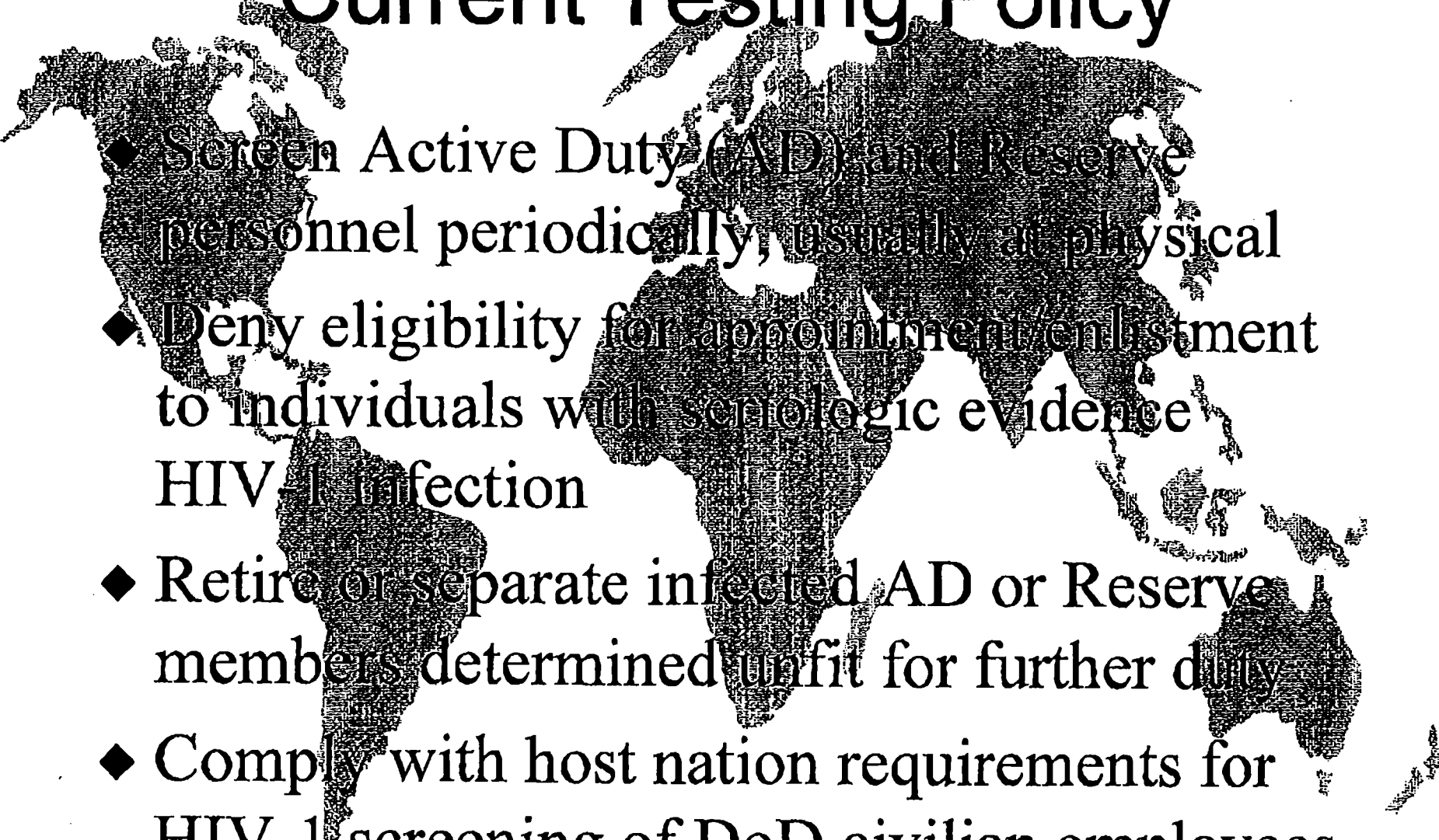
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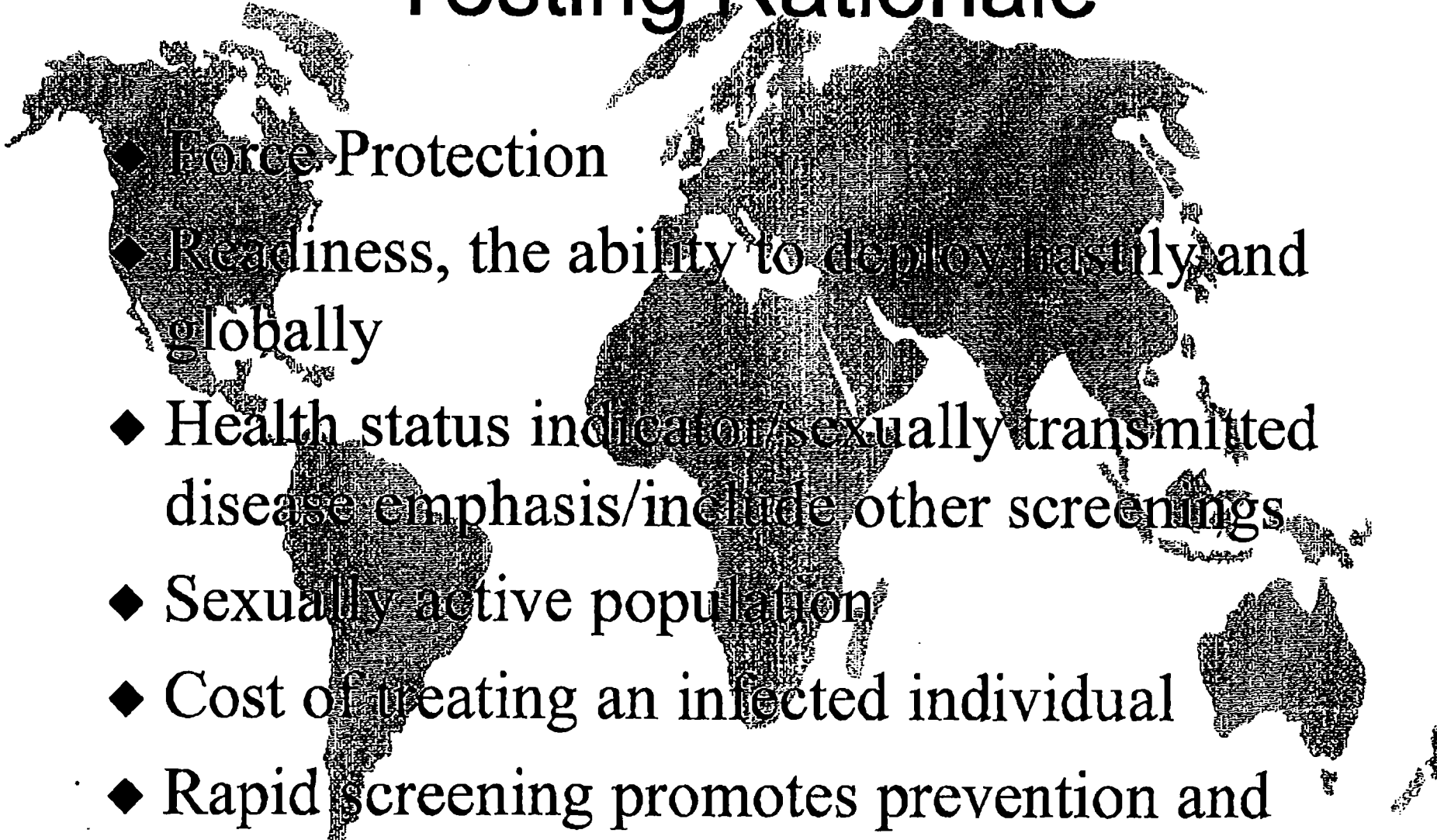
Department of Defense HIV-1 Testing Policy

Terry Zolock
Health Policy Analyst
Health Affairs

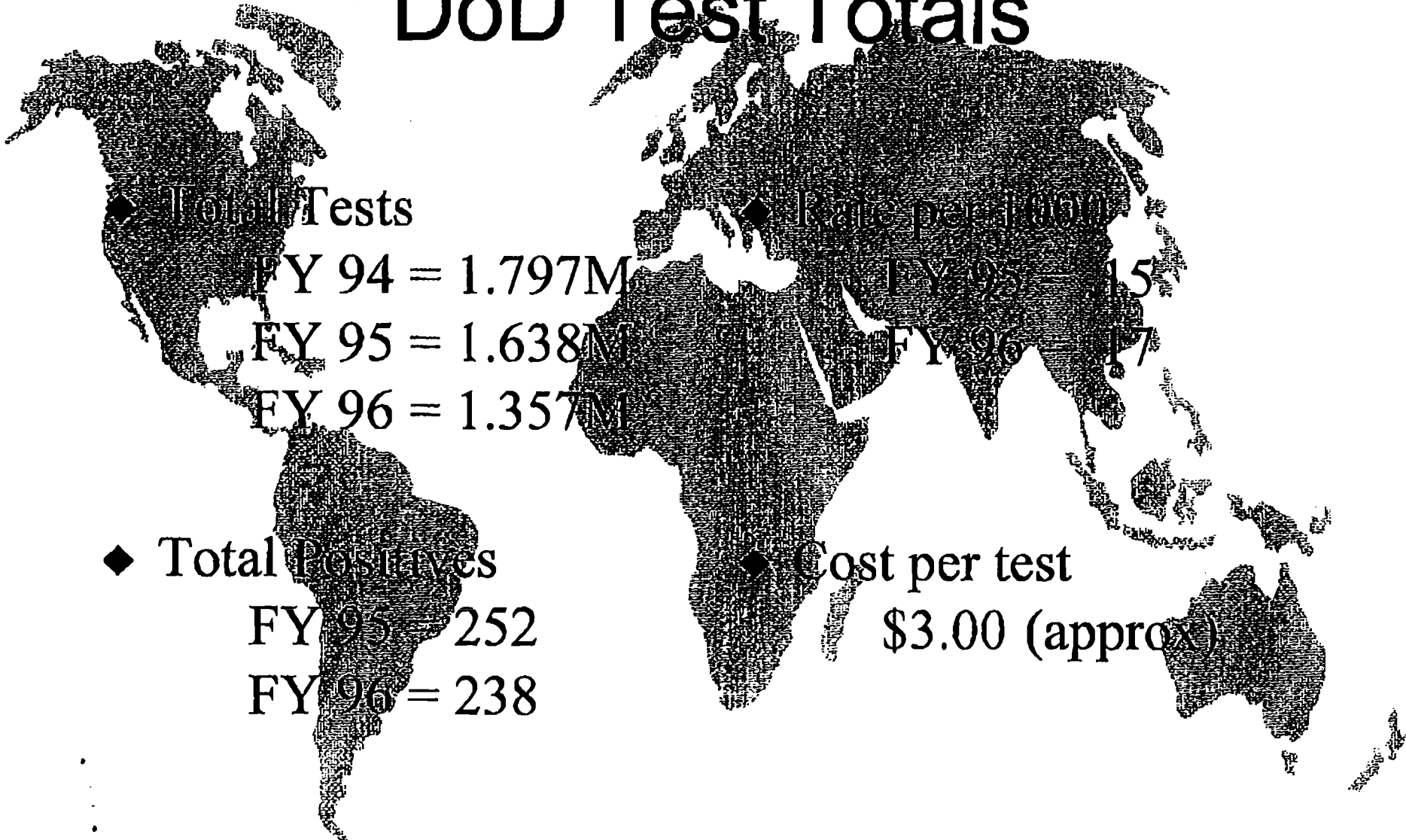
Current Testing Policy

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- ◆ Screen Active Duty (AD) and Reserve personnel periodically, usually at physical
 - ◆ Deny eligibility for appointment/enlistment to individuals with serologic evidence HIV-1 infection
 - ◆ Retire or separate infected AD or Reserve members determined unfit for further duty
 - ◆ Comply with host nation requirements for HIV-1 screening of DoD civilian employees

Testing Rationale

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- ◆ Force Protection
 - ◆ Readiness, the ability to deploy hastily and globally
 - ◆ Health status indicator/sexually transmitted disease emphasis/include other screenings
 - ◆ Sexually active population
 - ◆ Cost of treating an infected individual
 - ◆ Rapid screening promotes prevention and safe blood supply

DoD Test Totals



◆ Total Tests

FY 94 = 1.797M

FY 95 = 1.638M

FY 96 = 1.357M

◆ Rate per 1000

FY 95 = 15

FY 96 = 17

◆ Total Positives

FY 95 = 252

FY 96 = 238

◆ Cost per test

\$3.00 (approx)