DEALING WITH THE FEAR OF AIDS

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Managers need to deal with the fear of AIDS through in-house education and training. Without educational programs many people do not understand the epidemiological facts about AIDS and they fear workplace contagion.

Those who have been reading about the disease know that the AIDS virus is considered "fragile" and that it has never been known to be spread by ordinary workplace contacts (sneezing, handshaking, coffee cups, toilet seats, swimming pools, etc.). But managers and workers who do not yet know the facts may be extraordinarily and unreasonably afraid of contagion.

The spectre of AIDS brings forth deep feelings about sexuality, chastity, drug use and death. It is understandable that we resent having these ideas intrude into the work place. Nevertheless it is important to have in-house training programs.... preferably before the first case appears in your workplace.... for at least three reasons important to the business community.

The first reason is that peoples' feelings about AIDS vary very widely, from those who greatly fear contagion to those passionately committed to the rights and feelings of AIDS
victims and their families. The actions and interactions of employees can be very disruptive when an AIDS case appears, unless there have been effective educational programs.

The second reason is that until effective vaccines and treatment are available, prevention of the spread of the disease is our only powerful weapon against it. As the disease spreads into the general population, it is our whole work force we are protecting.... and our children and grandchildren. Prevention of AIDS is also our only present hope for limiting the financial costs of AIDS, whether to health plans or to taxpayers. It is no accident that the Economist has made this a special editorial message ("Sex transmits AIDS.... (we) have to get the message through plainly and without embarassment to everybody, heterosexual,.... bisexual or homosexual. Use condoms.")

Thirdly, even though AIDS is not casually transmitted in the work place, there is no effective way for an employer to exclude AIDS from the work place except by helping to prevent the spread of the disease by education. This is true for several reasons. Despite a recent Justice Department opinion, anti-discrimination laws still affect most employers, and several laws protect most clients and customers. Antibody tests still give false negatives as well as false positives. And many US companies with overseas subsidiaries may also have to deal with AIDS cases among overseas clients, customers and employees. There is then no practical possibility for an employer simply to decide to hide its head in the sand; most
employers, sooner or later, will deal with AIDS cases here or abroad. And this means dealing also with the fear of AIDS.

Here is what I recommend.

Every manager should inform himself or herself about the epidemiological facts concerning AIDS and ARC here and abroad. Employers should be sure they are up-to-date on the legal issues and handicap laws, for employees, clients and customers, in every jurisdiction relevant to them.

If a medium-sized or large company has not yet pulled together an AIDS task force, this is the time to do so. The task force should include human resource, equal opportunity, employee assistance, medical and legal department managers, and also those who deal with benefits, safety issues, complaint-handling, (for example, on hot-lines or in ombudsman offices) and security (for example, emergency medical technicians and police).

This task force should review medical and legal issues, policy making, management and employee training, communications plans and plans for dealing with concerns and complaints. Companies should especially plan for the possibility that some line and human resource managers may need to spend a lot of time with employees who are afraid and angry about AIDS or who are angry at those who are afraid.

Most management consultants recommend a company
approach that deals with AIDS victims on a case-by-case basis, (usually under the rubric of a general policy that deals with all catastrophic accidents and illnesses). This point of view has been recently affirmed by the American Medical Association. This approach also emerges as the most practical and humane, in the face of a disease whose progress varies greatly from individual to individual. Case-by-case handling works best where there has been good advance planning, and where managers are well-informed about the disease, about special legal considerations (for example, respect for privacy) and about company resources and plans.

It is particularly important that managers should be prepared for powerful feelings and wide divergence of opinion, among themselves and among employees. Anyone who doubts this phenomenon need only ask several colleagues how they would deal with an employee who is upset with a customer or co-worker who has AIDS or who is AIDS-antibody positive. Provoking such conversations, in a responsible way, is in fact a good idea for every manager, because there is a strong temptation to believe (or wish) that everyone else believes what one believes oneself. By contrast, what one is likely to find is sharp disagreement, strong emotion, considerable anger (in many directions), and little comprehension of the epidemiological facts or the complicated legal issues.

Tension about AIDS has also been amplified by the recent Justice Department opinion which appeared to suggest that
casual transmission of AIDS in the workplace is a distinct possibility. Any manager faced with this tension about workplace contagion should read the Department of Health and Human Services and Centers for Disease Control rebuttals, call the Centers for Disease Control hotline (800-342-AIDS), or call the Bureau of National Affairs (202-452-7889) or the American Management Association (212-586-8100) for information booklets.

Executives' hardest task may be to face their own fears about the disease. We should however try to do this, beginning with a straightforward reading of facts. Once that is accomplished, it is much easier to deal with fear of AIDS in the workplace. Good tools exist: resource materials, rational discussion, realistic planning and information dissemination.