

# COLUMBIA SPECTATOR

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Columbia Daily Spectator, Volume CXII, Number 43, 12 November 1987 — Two years of debate and still no AIDS policy  
[ARTICLE+ILLUSTRATION]

## Two years of debate and still no AIDS policy

By Tracy Connor

Two years after its formation, the University AIDS committee has failed to release a uniform policy on treatment of Columbia affiliates afflicted with AIDS, due to disagreement among committee members.

The committee has not met as a full group since the end of last spring, at which point committee members said they thought the completion of a policy recommendation was imminent.

“I thought we were at a point where we were reaching an agreement on the policy, and then we seemed to have a problem,” commit-

tee chair and Senior Vice President Joe Mullinix said.

Mullinix said the long delay since the spring has been primarily due to “misinterpretation, misunderstanding, and people’s views changing.” He said he has met individually with several committee members in hopes of ironing out some of the problems.

“I gave them the rough drafts of the policy and report that we’ve been working on, and said let’s find out

what we all agree on. I'm expecting something very soon from all of these people. If we can do it without a minority report I'd be happy," Mullinix said.

Mullinix added, however, that if the process drags on too long the committee may file a report with a dissenting opinion.

Some committee members expressed concern over the delay in action. Paul Douglas, a committee member and coordinator for the Gay Health Advocacy Project (GHAP), said he sent a letter to Mullinix asking for a full committee meeting in the near future.

"I think the situation was that we were basically in agreement. It would be a great shame if a policy didn't come out that we can all stand behind," Douglas said.

According to Douglas, the main disagreement in the group lies in the conflict between members who would like to see an explicit policy in print, and others who wish to maintain more flexibility for the University.

"The problem is that on one side you have a pressure for explicit protection for a class, and on the other side you have legal or extra-legal pressure of not specifying policies," he said.

GHAP would agree to a policy recommendation stating that "the University does not discriminate against those who have AIDS or who are perceived to have AIDS, and does not tolerate discrimination against those persons," Douglas said.

But he added, "The University does not want to have its hand tied."

Mullinix agreed that while he does not see the committee advocating dealing with Columbia affiliates who have AIDS or the HIV virus on a strictly case-by-case basis, the University does not want to be legally tied down to a permanent policy that may not be 100 percent feasible.

"Those [Douglas'] are very charged words," Mullinix said.

"What does discrimination mean? If discrimination means we will never come to a conclusion about someone based in any way on the fact that they have AIDS, I don't think that works. Sometime in the future, the fact that a student or employee has AIDS could cause us to make some determination about what a person could do here," he explained.

"There are some who say that we have to allow the system to make judgements based on the circumstances," he continued.

"But there is no disagreement as to actual day-to-day application. When you chisel a policy in rock and that policy is going to be good for the next two, three years you want to strike a balance between providing adequate protection for people who have AIDS and providing enough flexibility for

action. But striking that balance is hard," he said.

The committee has developed a consensus on several points which will be contained in the final report when it is released, according to University Director of Health Services Richard Carlson.

"The committee, I think, is in agreement that people who have AIDS should not be discriminated against in the areas of admission, employment, services, and housing," Carlson said.

"The committee agrees that present evidence is that AIDS is not transmitted casually. And I think that the committee wants to stand up against discrimination for people who have AIDS or HIV infection. But some members of the committee don't want to close the door to an exceptional case," he said.

"We don't know what's going to happen two, three, four years down the road in terms of this infection. I think that a policy that says we'll never treat someone who has this infection any way differently is boxing yourself in," Carlson added.

Douglas said another delay was caused by some members' concern that the AIDS policy be legally viable.

"Freedom of the University to act as it needs is something they care about enough that they are willing to make all sorts of bizarre legal arguments about," Douglas said. "For the University sophists, the real motivation is they want freedom of action and accountability."

In spite of the delay in formulation of a policy, Douglas said his overriding concern is that a good policy be recommended, even if that means no policy for a limited time.

Another committee member, Columbia College Dean of Students Roger Lehecka, agreed. "I thought it was close to being done a year ago. We haven't met in quite a long time. We have a very wide agreement on the question, and I'm surprised we don't have a resolution because it seems we are so close to it," Lehecka said.

Mullinix said he feels the University has adequately handled situations concerning AIDS that have arisen in the past two years.

"But there's no doubt that in a sense it would be better if you had a policy, had a recommendation for a policy. That could alleviate some concerns and act as a guide to some of the managers here," Mullinix said.

While the committee has been busy writing the policy, according to Douglas, other concerns have been neglected. Douglas said he would like to see the group deal with issues such as extra funding for University Health Services' and GHAP's AIDS programs, insurance issues, and more specific

...and more specific anti-discrimination policies.

For the present, however, Douglas said he agrees the policy is the most important item on the committee's agenda. The policy is the second of the committee's two initial goals. The first was achieved last year when an educational AIDS handbook was published and distributed on campus.

Mullinix estimated that the policy recommendation could be completed by the end of the semester.

Once finished, Mullinix has final approval over the report's content. What happens to the final approved version is still unclear, although Mullinix said it may be published as a policy of the University or of University Health Services.



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**Joseph Mullinix**