THE ADMINISTRATION'S AIDS TRAINING PROGRAM

HEARING

BEFORE THE

SUBCOMMITTEE ON
CIVIL SERVICE

OF THE

COMMITTEE ON GOVERNMENT
REFORM AND OVERSIGHT
HOUSE OF REPRESENTATIVES

ONE HUNDRED FOURTH CONGRESS

FIRST SESSION

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THE ADMINISTRATION'S AIDS TRAINING PROGRAM

THURSDAY, JUNE 22, 1995

HOUSE OF REPRESENTATIVES,
SUBCOMMITTEE ON CIVIL SERVICE,
COMMITTEE ON GOVERNMENT REFORM AND OVERSIGHT,
Washington, DC.

The subcommittee met, pursuant to notice, at 9:40 a.m., in room 2154, Rayburn House Office Building, Hon. John L. Mica (chairman of the subcommittee) presiding.

Present: Representatives Mica, Gilman, Burton, Morella, Bass, Moran, and Mascara.

Staff present: George Nesterczuk, staff director; Garry Ewing, counsel; Susan Mosychuk, professional staff member; Caroline Fiel, clerk; Cedric Hendricks, minority professional staff; and Jean Gosa, minority staff assistant.

Mr. MICA. Good morning. I'd like to call to order this meeting of the House Subcommittee on Civil Service, and welcome our witnesses and also spectators today. And I hope they can—Caroline, can you try to get those folks in so we could get started quietly?

Again, I would like to welcome you to the House Civil Service Subcommittee hearing this morning. I have some opening comments and then I'll yield to my colleagues for opening comments. And we have our first witness with us also.

Ladies and gentlemen, the Civil Service Subcommittee meets today to discharge one of its most important functions: oversight of the rules and practices affecting the civil servants in the executive branch of government. In particular, we will examine employee training focusing especially on the administration's AIDS training program.

Employee training is an important issue. However, it is one that often generates little public interest. According to the Office of Personnel Management, Federal agencies spend more than $1 billion to train executive branch employees. When used wisely, money spent on training can be money well spent. A well-trained work force can be more productive, more efficient, and better equipped to lower the cost of government services.

As the Federal Government is reinvented, reengineered and restructured, training Federal employees becomes more important, not less important. That is why this subcommittee has a responsibility to look carefully at the training provided to Federal employees. We owe it to the taxpayers to make certain that their hard-earned tax dollars are used only for training that will truly make employees more efficient and government less costly. We also have

a responsibility to Federal employees. We owe it to them to make sure that the training they receive will give them the knowledge and skills they need to do the best job they can for the American people and to advance in their careers as far as their abilities will allow. And we also have an obligation, both to the taxpayers and Federal employees, to ensure that employees are not subjected to training that is inappropriate for their workplace, either in content or in the manner in which it is presented. This responsibility is especially critical when it comes to mandatory training.

By statute, the goal of all employee training should be to, and I quote, assist in achieving an agency's mission by improving employee and organizational performance. In short, it should be truly job related.

Unfortunately, recent reports of agency actions and congressional hearings suggests that some Federal training programs have slipped from their moorings. For example, Congressman Frank Wolf held a hearing on March 30, 1995, to examine controversial taxpayer-financed cult-like training. News articles have also described incidents in the administration's AIDS training program that, if true, seem totally unrelated to improving employees' on-the-job performance, and totally inappropriate for the Federal workplace. What role does speculating about the likely sexual practices of an employee's grandmother, descriptions of sex toys, including flavored condoms and other graphic descriptions of sexual practices, serve in our Federal employee training?

What role does providing instructions on bleaching needles used to inject illicit drugs have in our Federal training programs? We must ask ourselves some of these questions.

We cannot simply ignore these reports without breaking faith with both our constituents and Federal employees. This subcommittee has an obligation to determine whether the AIDS training program has gone astray. And if we find that it has, it is our duty to find a way to keep future programs within proper bounds.

I believe there may be a place for AIDS training in the workplace. AIDS is a horrific disease. It is fatal and there is no cure. It is rightly feared by everyone. Sometimes this fear leads to misunderstanding and embarrassing incidents. The recent flap over the Secret Service officers at the White House who wore gloves while inspecting the bags of a group of gay officials visiting the White House is a prime example. At first, it appeared they were discriminating against gays by doing this. But later reports we received say that officers were just following the recommendations of the Occupational Safety and Health Administration, and they always wear gloves when searching bags.

Therefore, it is appropriate to provide Federal employees with accurate information relating to the real risks they face and the potential of contracting AIDS in the workplace. It is appropriate to teach Federal employees what rights agency policies or Federal laws extend to employees who are HIV positive or who have AIDS. It is appropriate to teach Federal employees how to deal safely with workplace accidents or injuries that might expose them to AIDS or other contagious diseases. It is also appropriate to teach supervisors what to do if an employee discloses that he or she is HIV positive or has AIDS. And it is appropriate to teach Federal

employees, particularly supervisors and managers, about the insurance and retirement options available to employees who also are HIV positive or who have AIDS.

However, my constituents would, quite frankly, be outraged to discover that their tax dollars are used to force Federal employees to learn how to use a condom. They would rightfully ask, "How many employees need to know that in order to perform their Federal jobs?" My constituents would also be shocked to know that their tax dollars were used to teach Federal employees about the relative merits of microwaveable versus nonmicrowaveable Saran Wrap for use, not in the kitchen, but in the bedroom! The people in my district would also be appalled to find themselves footing the bill to distribute booklets advertising, "Wet, Wild and Well: Lesbian Safer Sex", and listing sex shops that would sell various items. Yet these are some of the very things that have happened in this AIDS training program for employees. I have a copy of one of the pamphlets here.

I looked at this material last night, and one of these is pretty explicit and, I understand, taxpayer-financed. I have also acquiesced to a request to hear from the group that publishes this pamphlet, which will be part of our last panel, I understand. This is the pamphlet I'm talking about, and, again, I understand it is taxpayer-financed.

My constituents would also object to training aimed at not just increasing employees' knowledge about AIDS and the HIV virus or their behavior on the job, but changing their personal attitudes and beliefs. Yet clearly that seems to be one of the goals of the administration's training program. In fact, the administration's guideline tells agencies that one of their most difficult tasks will be documenting whether the training, "has an impact on the knowledge, attitudes, beliefs and behavior of the employees."

It is no wonder that many Federal workers have found these training programs offensive, because the administration has made attendance at these programs mandatory for every employee, and all are forced to participate.

Many have been faced with a cruel dilemma. Do they violate their own consciences or religious principles by attending, or do they run the risk of being disciplined if they refuse? I would like to ask our staff to look into whether employees have been disciplined for not participating, and also ask them to see if these quotations in their employee records are left as a permanent mark against them.

In reading the material again last night, I was quite disturbed by the changes in the administration's position and also the imposition on some of the Federal employees that seemed unfair in making this mandatory.

We're pleased today to honor the requests of our distinguished colleague from California, Congressman Robert K. Dornan, to appear before this subcommittee and provide us with his evaluation of the administration's program.

We will also hear from Trudy Hutchens of the Concerned Women for America, and Robert Maginnis of the Family Research Council, both of whom attended a Federal AIDS training class for employ-

ees, and both of who have collected a great deal of information on these programs.

I'm especially pleased, too, that we'll have an opportunity to hear from two Federal employees, Thomas J. Herron and Lyn Mickley, about their experiences with the Agency's AIDS training programs. We appreciate your courage in coming forward to share your experiences, and your testimony I feel will be a great help to this subcommittee.

We'll also hear from representatives of the Departments of Energy, Health and Human Services, and Agriculture. I have some questions about some of their training methods after reading this information yesterday. They will explain their agency's AIDS training programs before the subcommittee. A witness from the Office of Personnel Management will also explain OPM's role in overseeing and coordinating these Federal training programs.

Our final panel will be representatives of two private companies who are familiar with AIDS training in the private sector and a representative of the Whitman-Walker Training Institute, which provides AIDS training. The Director of the Office of National AIDS Policy was invited to testify, but declined.

At this time I'd like to yield to our ranking member, Mr. Moran, the distinguished gentleman from Virginia.

Mr. MORAN. Well, thank you very much, Mr. Chairman.

You must have had quite a time preparing that opening statement last night. That's one of the more interesting statements that has been delivered, and I guess the staff must have had quite a time doing all the necessary research to prepare the statement.

Mr. MICA. And I read every bit of the damn background. It is about that thick.

Mr. MORAN. Holy smokes. I don't know, it is quite a way to spend one's time.

I have to confess I haven't read all of this stuff, but I have looked at the manual that was specifically referred to, the Department of Energy put it out. This is one of them. And that's been distributed to the subcommittee members.

I hope we can have a fair and instructive hearing on this issue. Of course, it comes as a result of the Reagan Commission on the Human Immunodeficiency Virus. They set up a commission to study what we can do about people in the Federal work force particularly who contract AIDS.

And this seems to be a natural continuance of that policy, instructing Federal employees on how they can contract AIDS, the extent to which someone who tests positive for AIDS for HIV, I should say, represents a health threat to them and some of the real facts which seem to be in short supply on this issue.

There seems to be a lot of fear and of course a whole lot of rumor and unsubstantiated information. And so I think that it is important for the Federal Government to educate its employees on the real facts and the real threat that people who might contract HIV virus represent. And not to do so would seem to be irresponsible on the part of the executive branch and I would think the legislative branch as well. And that's why we have mandatory training, because it could possibly affect everyone.

Now, the way in which the training is conducted, I'm interested to see how it is done. Some of it may not be consistent with what we would consider to be proper, but I'm not sure of that and I'm anxious to listen to people who actually provide the training and those who have been trained by it.

An example of the ignorance that exists with regard to AIDS was shown by the personnel at the White House when Secret Service personnel feel they need to don gloves because the President is being visited by gay and lesbian group indicates that there is clearly a widespread and deep misunderstanding of how one contracts the HIV virus. And I'd be interested to know why the Secret Service hadn't participated in mandatory training, or at least why they hadn't learned the lessons that they were supposed to learn from such training.

I guess about three-quarters of the work force has participated in it. It is a deadly disease, but I think ignorance is also a disease that we ought to try to avoid as well. You know, I had a full-time volunteer in my 1992 campaign, Mr. Chairman, he was a former priest. He was a stockbroker with me in the same firm. And we got to know each other, and he volunteered to run the phone bank. He contracted AIDS.

When it became obvious that he had AIDS, people avoided him like a leper. And the fact that people on my campaign staff understood how one contracts AIDS and were willing and in fact anxious to shake his hand and pat him on the back and show him the ordinary friendships that we show other human beings, meant a world of difference to him. He eventually died, but he made it clear to us that the acceptance that we showed him changed the last days of his life dramatically.

And it was all because people understood how one gets exposed to AIDS and understood a lot of the information that is common currency is not accurate. I would hope that we would use this hearing and this visibility to perhaps add a little quality to other people's lives by educating the American people on the real threats, how to avoid AIDS, but also how to show people who might test positive for HIV that they are still human beings that we want to treat with the same kind of respect and dignity that we would treat anyone with a deadly disease.

Clearly, it is a different disease than heart disease and cancer, which are also deadly, but they're not seen as infectious. Maybe an objective ought to be to treat everyone with such a disease in such a tragic situation with the same level of respect and dignity. So with that objective in mind, I appreciate you having the hearing and let's hear from the rest of our colleagues.

[The prepared statement of Hon. James P. Moran follows:]

COMMITTEE ON
GOVERNMENT REFORM AND OVERSIGHT
SUBCOMMITTEE ON CIVIL SERVICE
RANKING MINORITY MEMBER
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Statement of Representative James P. Moran
On AIDS Training in the Federal Workplace
Subcommittee on Civil Service
June 22, 1995

Mr. Chairman:

I appreciate your having this hearing today. It is proper that we take this opportunity to examine AIDS training policies and procedures in the federal workforce.

I am pleased that you are committed to a balanced and educated examination of this policy. AIDS is far too serious an issue to demagogue and politicize and this policy is far too important to the federal workforce and the nation as a whole.

At the outset, I believe it is important to provide some background into the development of this policy. The federal government first began giving serious attention to AIDS as a government-wide workplace issue seven years ago after the Reagan Commission on Human Immunodeficiency Virus Epidemic issued a report recommending a wide range of actions that employers should take to address the problems posed by HIV infection. President Reagan responded to the report by immediately directing federal agencies to adopt workplace policies to address the treatment of HIV infected persons in the workplace. President Clinton expanded the Reagan initiative by directing agencies to establish employee education and prevention programs.

Here is a copy of the "Employee HIV Education Manual" used by the Department of Energy. I know that this manual was sent to the office of every Subcommittee member and I hope you all had a chance to review it. This manual is an extremely helpful and extremely informative manual. It does not condone any sexual practice it does not advance any agenda. It only shows employees how to protect themselves from AIDS, how to recognize the early warning signs of AIDs, and how to treat a co-worker who has AIDS.

Mr. Chairman, when we examine this policy we must step back and look at the issue in its entirety rather than focus on the complaints of a few disgruntled employees. We have mandatory AIDS training in the federal workplace to ensure that federal employees are aware of what AIDs is, what behaviors can increase your risk of contracting AIDs, and how to treat those employees and those Americans who may have AIDS.

PRINTED ON RECYCLED PAPER

We have mandatory AIDS training in the federal workplace because we have federal employees who are ignorant of the AIDS disease and who do not know how to treat those who have AIDS. This was evident in the mid 1980s when Social Security workers would not help AIDS inflicted individuals who came into their office. This was evident last week when officers of the Secret Service donned rubber gloves to greet gay and lesbian visitors to the White House. AIDS training was necessary in the 1980s and is necessary today.

We have mandatory AIDS training because AIDS, unlike cancer or heart disease, is a highly contagious disease that has been spreading among all segments of the population. AIDS also differs from cancer and heart disease because people are not discriminated against because they have cancer or a heart attack. People are not afraid to shake hands with someone who has cancer or heart disease.

Almost three fourths of the federal workforce has participated in the AIDS/HIV education programs. The numbers of those complaining about the content or mandatory nature of the program has been extremely small. I am afraid that some are trying to use those complaints and anecdotes to advance their own agenda and eliminate a program that works well.

AIDS is a deadly disease. It is also a dreaded disease. People do not exactly how it is contracted and they are afraid. People are afraid that they can contract the disease from insect bites, toilet seats, and sharing papers. People who are ignorant of the disease shy away from those who have it or who they think may have it. They discriminate against innocent people whose only fault may be that they are inflicted with a deadly disease.

Mr. Chairman, all the Administration asks with this AIDs training program is that you respect the dangers of the disease and that you treat those who have the disease with the dignity and respect you owe every American and every human being.

I had a full time volunteer on my 1992 campaign who had AIDs and who subsequently died of AIDs. This poor man came into my campaign office every single evening to do the thankless task of running my phone bank. All he asked of me and all he asked of his fellow volunteers was that we give him the respect and dignity we owe to every person. It was hard for him. He lived in fear of the infections, illnesses, and virus that withered away at his body every day. He also lived in fear of the abuse, discrimination, and prejudice that withered away his soul every day. To you and me the simple touch of another person, a simple handshake or pat on the back is insignificant. To him it was a sign that he was welcome and accepted and that we would never let his disease create a wall between us.

Some see AIDS training as a means to advance a political

agenda or to celebrate or legitimize homosexuality. They are wrong. AIDS training is only used to protect federal employees and their co-workers. It acknowledges that federal employees do engage in sexual practices and reinforces that safest way to engage in those practices. Some fear that AIDs training is forcing people to do something contrary to their religious beliefs. The AIDS training only teaches people to treat those afflicted with a deadly disease with dignity and respect. I am not aware of any religion that does not do the same.

I am pleased that we are having this hearing today and I look forward to the testimony of our witnesses.

Mr. MICA. I thank the gentleman, the ranking member, and I'll yield to Mr. Mascara now for his opening comments.

Mr. MASCARA. Thank you very much, Mr. Chairman.

This morning we will be considering a very sensitive issue, AIDS training for Federal workers. In the wake of the first National AIDS Commission Report issued in the 1980's, President Reagan directed every Federal agency to adopt policies to address the treatment of AIDS-infected persons in the work force. This effort helped make training on AIDS a basic component of employee health information programs throughout government and the private sector.

In November 1993, President Clinton took a further step, directing agencies to implement an AIDS education and prevention program for all workers and to develop policies to ensure those who are infected with AIDS are treated with compassion and fairness.

AIDS takes thousands of lives each year. Obviously Federal workers, like every other American, should receive basic information on how to prevent the transmission of this tragic disease. However, because this disease is largely transmitted through sexual encounters or intravenous drug use, sensitivity must be shown in the instruction process.

Every effort must be made not to offend Federal employees. In those instances where workers do not run the risk of AIDS exposure as a result of their duties, attendance should be encouraged, not dictated. And I'm glad several of the agency witnesses today will clarify that this is the case in their departments.

My experience over the years has taught me people respond better to training and retain more information if the training is conducted under such acceptable conditions. Also, if workers have complaints about the AIDS training and the methods of instructions used, their complaints should be looked at promptly and, perhaps more importantly, such sensitive training should be monitored very closely and carefully by agencies and OPM to ensure that it is appropriate.

I regret that a representative of the Office of the National AIDS Policy is not here today to explain the administration's policy and answer questions. I think that would have helped defuse this issue and put the training into proper perspective.

The bottom line is workers need to be instructed to prevent all types of health hazards, including the transmission of communicable diseases like AIDS.

AIDS is not going to go away. Countless private sector firms provide AIDS training to their workers. Perhaps we need to take a cue from businesses across America and find out how they accomplish this goal, while still promoting harmony in the workplace and making every possible effort not to offend their employees.

I look forward to learning a great deal from this morning's testimony.

Thank you very much, Mr. Chairman.

Mr. MICA. I thank the gentleman.

Mrs. Morella had to vote, and I will also have to leave in order to present some legislation in another committee, so I will be in and out myself today. But thank you. And I know when she gets back, Mrs. Morella wants to give an opening statement. But we have our first witness and will now proceed.

I'd like to welcome our distinguished colleague, Mr. Dornan.

Mr. Dornan, you're recognized.

STATEMENT OF HON. ROBERT K. DORNAN, A REPRESENTATIVE IN CONGRESS FROM THE STATE OF CALIFORNIA

Mr. DORNAN. Thank you, Mr. Chairman.

Mr. Chairman, I appreciate the homework you have done on this very peculiar issue, because it makes my job much easier here. I want to thank you personally for convening these hearings on this matter of mandatory HIV/AIDS education training for all Federal employees, and I know that I speak for thousands of Federal workers.

This training, according to the mail and the phone calls that my office has been receiving, is an outrageous and fraudulent abuse of the taxpayers' money, and is also a clear violation of the moral and religious rights of our Nation's Federal employees. I am grateful again for your willingness to investigate this abuse.

As you know, on September 30, 1993, Mr. Clinton signed a directive instructing all Federal departments and agencies to provide comprehensive HIV/AIDS in the workplace training for employees. Since I was quoted in an article published in the Washington Times saying I would look into the many complaints I was receiving about that training in the Department of Defense, as the chairman of Military Personnel, many complaints were coming to me; and since that article was published, my office has been flooded with calls and letters from employees who do not understand that if they are civil servants, it is the committee that has the responsibility to look into their complaints.

Since then, that article, my office has been flooded with calls and letters from people who are outraged, and I mean outraged and upset about the content and particularly the delivery of the training, which apparently varies greatly. And I should emphasize that, it seems to vary greatly from agency to agency and location to location.

Many people would not leave their name with my office for fear of strong reprisal from superiors. And while this training was supposedly designed by the former AIDS czar, Kristine Gebbie, to foster tolerance in the workplace for HIV-infected employees, I am concerned that it is instead being used to aggressively advance a redefinition of the family and in many cases, judging again from my mail and the phone calls, a blatant pro-homosexual agenda.

Calls and letters to my office indicate that much of the training has included graphic discussions about sexual activities that many, maybe most, Federal employees find is lewd, objectionable, and humiliating. A Defense Department worker said her class included a slide show of some things you have already mentioned, Mr. Chairman, sex toys and flavored condoms.

Remember, this is all at taxpayer expense. We have to keep reminding ourselves of that. I've spoken with workers who said they were lectured about the probable sex practices of their grandparents or other relatives. In fact, according to an article in the Washington Times by a Federal worker who had the guts or was so outraged to print this over his real name, she said she was, "shocked and upset when the instructor personalized anal sex for

each person in the room by saying that our grandmothers probably practiced birth control by participating in anal sex."

Later she says, "I was highly offended. I have a very Godly grandmother. I just broke down and cried. I guess they are trying to say that homosexuals do it that way and so did your grandmother."

An employee of the U.S. Army Corps of Engineers wrote to me, Mr. Chairman, stating that, "the volunteer started talking about how to protect yourself during sexual acts. This included oral and anal sex. Not only did this volunteer describe these acts, but also did it in a crude way, with terms like, 'just put it down and go to town.' I found the entire episode offensive and upsetting. The session ended with this volunteer distributing condoms to those who wanted them." Here is another quote from a Bureau of Reclamation worker. He says he "found the graphic discussions of various sex acts including oral sex to be disgusting and out of place, especially in the mixed company of coworkers."

Another worker complained that she was, "offended by the sexually explicit material. Roll call was taken; I felt like a kindergarten child. Abstinence and self-control were not mentioned as the only means of certain prevention. Instead, it was condoms, condoms, condoms."

Still another related that the instructor gave specific graphic instructions on the use of condoms, dental dams, rubber gloves and Saran Wrap. He emphasized that you should only use nonmicrowaveable Saran Wrap to cover body parts while engaging in sexual activity. I guess that person also wrote to the committee, or maybe someone else at that bizarre training session.

Mr. Chairman, I find nothing objectionable about educating Federal workers on how AIDS is and is not transmitted in the workplace. I think it would be highly important for employees of the Public Health Service or the National Institutes of Health up here in Bethesda. I visited them many times.

Such information is relevant to their professional duties and could well mean the difference between life and death for some of their fellow citizens. Indeed, there is a plausible case to be made for describing universal precautions for workers as they relate to their particular duties and responsibilities as Federal employees.

However, the AIDS training in question goes far beyond this reasonable objective. Based on this evidence that I have received, there is no doubting that there is a hidden agenda behind these politically correct, politically correct in the extreme, training seminars.

Now, we've—it takes us about 7 minutes to go to vote. I can finish my statement in 3 minutes, if you want.

Mr. MICA. Please go ahead and conclude. And then if you'd return, if you'd like to be available for questions we'll do that after the vote.

Mr. DORNAN. I'd be more than happy to return.

Nowhere is this more evident than in the values survey that instructors must pass before they are entrusted with an assigned group of Federal employees they are supposed to educate. This survey probes deep into the potential instructor's personal feelings about sex and particularly homosexuality. Potential instructors are

then rated and depending on their score are assigned to become "lead trainers, co-trainers, or just assistant trainers." Trainers are therefore not scored on their knowledge of the issue at hand, but rather on their values, their personal values, as they relate to HIV/AIDS issues. Considering the system by which undesirable leaders are weeded out, it is obviously—obvious that those who hold traditional family values need not apply. And why would they, those who hold those values, knowing that they would have to lecture workers about the "benefits of non-insertive sexual activities," such as masturbation or massage, or encourage addicts to bleach their needles with Clorox before injecting themselves with dangerous, illegal narcotics, how did these people get on the Federal payroll anyway, feeding a narco-chain of distribution that involves violence and murder at every level.

Since President Reagan was quoted twice, let's remember what Nancy Reagan said, that you cause the death of human beings in Colombia when you shoot up with drugs in this country. You kill people in the Golden Crescent or the Golden Triangle when you stick a filthy or a clean Clorox-treated needle in your arm. People die in the drug wars in the Shan Province of Burma.

Mr. Chairman, it is not the responsibility of the Federal Government to subject Federal workers to seminars that lecture them on how to live their sex lives or use illegal killing drugs in order to avoid contracting HIV or AIDS. The last time I checked, abusing drugs and having sex in the workplace were not specified job responsibilities for Federal workers or any other workers. Why then are we instructing Federal employees under our oversight, many of them against their will, about such nonrelated work issues? If one of the goals of the training is to educate people about how not to contract the deadly virus that causes AIDS, then a case could easily be made for educating workers about the risks associated with heart disease, cancer, as these are the No. 1 and No. 2 leading causes of deaths in the United States and among Federal workers. Yet no such education initiatives are being pursued by the Clinton administration. Why the bizarre double standard of choice on AIDS education above all else?

I've two concluding paragraphs, I think we can make it. I'll press on, Mr. Chairman.

Federal training programs are required to meet statutory objectives in assisting agencies achieve their "mission and performance goals by improving employee and organizational performance." Clearly, the HIV training in question does not meet this objective. Sex education for adults does not in any way improve a Federal worker's ability to perform on the job.

Having said all this, Mr. Chairman, I find it outrageous that the Federal Government is coercing its employees and at our taxpayer expense to undergo hours of training which in many cases is not only highly offensive, but promotes homosexuality and also by inference drug abuse, as just another lifestyle choice. Because pro-homosexual policies have infiltrated the Federal Government at all levels since the Clintons took office, I have introduced legislation that would provide Federal programs from promoting, condoning, accepting or celebrating homosexuality, as you can see in the lobby

of the Interior Department this very morning. Congress has a responsibility to put an immediate end to such offensive nonsense.

I am hopeful that with the help of this subcommittee we can do so without further waste of taxpayer funds and equally precious time which also translates into money.

Thank you, Mr. Chairman, for the opportunity to testify.

[The attachments to Hon. Robert K. Dornan's prepared statement follow:]

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ATTACHMENTS to:

Testimony of Rep. Robert K. Dornan

Hearing before Subcommittee on Civil Service
"HIV/AIDS in the Workplace Training"
for Federal Employees

Chairman John L. Mica

Thursday, June 22, 1995

THE WORLD&I

The Social Impact of the AIDS Lobby

Robert L. Maginnis

The AIDS lobby has worked hard to capture America's attention—so hard, in fact, that its public relations campaigns now touch nearly every aspect of American life.

This is due in part to the scope of the epidemic, which is staggering by any standard. In spite of the world's best medical care, one million Americans are now HIV-infected and 339,250 have full-blown AIDS, according to the U.S. government. And the infection is spreading, especially among heterosexual minorities. By the end of this decade, some predict, AIDS may no longer be thought of as a gay disease but as a minority disease. AIDS is now the leading cause of death among black women aged fifteen to forty-four in New York City and New Jersey.

The costs are astounding. For fiscal year 1994, Congress has appropriated $2.5 billion for AIDS programs, including $1.3 billion for research. Another $10.4 billion will be spent in the United States treating HIV/AIDS patients in 1994.

The impact goes far beyond the loss of human life and direct medical costs. Each AIDS victim means lost productivity and more demand for scarce resources and social services. The epidemic also means more orphans. Over two million children, including 45,600 in the United States, have been orphaned by AIDS worldwide so far, and there will be an estimated ten million by the end of this decade.

DISSENTERS SEE RAYS OF HOPE

There are dissenters, however, to this gloomy prediction. James Mason, former assistant secretary of health, believes that the AIDS epidemic peaked between 1989 and 1992.

Dr. Robert Root-Bernstein, a Michigan State AIDS expert and author of *Rethinking AIDS*, contends that the government's Centers for Disease Control (CDC) keep changing the AIDS definition to hide the diminishing scope of the problem. He points out that the CDC has changed the diagnostic criteria three times and that the most recent change increased the number of new diagnoses 30 percent to 40 percent over 1992's count. Root-Bernstein accuses the government of hiding these developments.

Dr. Peter Duesberg of the University of California at Berkeley, one of the world's leading retrovirus researchers, wrote in *Policy Review* that the medical-industrial complex is wrong in pushing the HIV theory as the cause of the epidemic.

"Evidence increasingly indicates," he stated, "that large numbers of people infected with HIV, probably the majority, will never develop AIDS." Duesberg's 1990 article was criticized by many noted AIDS/HIV experts.

Michael Ellner, vice president of the Health-Education-AIDS Liaison of New York, agrees with Duesberg, stating, "Our national AIDS policy is crumbling due to

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its own errors and incompleteness . . . The whole thrust of HIV testing and research must be reconsidered."

MEMBERS OF THE AIDS-ACTIVIST ARMY

These dissenters confront mainstream science and a well-entrenched AIDS lobby. Battling for AIDS counseling, treatment, education, and cures are activist organizations in both the homosexual and straight camps. Some homosexual-led organizations, like the AIDS Coalition to Unleash Power (ACT UP), take a loud, confrontational approach. Others, like the Human Rights Campaign Fund (HRCF), take a methodical, highly sophisticated, politics-oriented approach.

ACT UP members stage protests against what they perceive to be foot-dragging by the government and the drug industry. They disrupt church services and yell down the president and other officials. HRCF lobbies Congress for AIDS funding and is a part of the thirty-member "Madison Project," which develops proposals to speed the discovery of a cure for AIDS. Both lobbying methods have proved to be effective.

These groups are supported by the media and entertainment industries. Stars such as Elizabeth Taylor give their names to AIDS projects like the new wing at Washington's Whitman-Walker Clinic for AIDS patients. Elizabeth Glaser, wife of a well-known TV actor and an HIV victim herself, founded the Pediatric AIDS Foundation in Santa Monica, California, and spoke about AIDS to the 1992 Democratic National Convention. Hollywood sponsors fund-raising concerts for AIDS. Show business personalities like billionaire music and film producer David Geffen sponsor fund-raising events and donate large sums of money to AIDS charities.

Sports celebrities also promote AIDS awareness. Magic Johnson, who retired from the National Basketball Association in 1991 after announcing he was HIV-positive, tours with his own all-star team, acting as a "goodwill ambassador" promoting condom use.

Hundreds of nonprofit organizations care for AIDS victims, finance AIDS research, and lobby government. The American Foundation for AIDS Research, for example, is the largest nongovernmental AIDS funding entity. The foundation gives millions of dollars in grants each year for AIDS research. Washington, D.C.'s Whitman-Walker Clinic runs a media campaign promoting condoms as a preventive measure. The clinic's simple message: "It doesn't matter what you call it. Wear it." The clinic has even created its own condom stamp meant to complement the government's new first-class "AIDS awareness" stamp on Christmas cards.

Television does its part by promoting "safe sex," a euphemism for, among other things, condom use, and by providing a platform for AIDS lobbyists to skewer Washington or to trumpet reports about the latest AIDS research. Commentators and hosts, however, seldom implicate the behaviors that contribute to the epidemic.

Now consider the AIDS lobby's impact on everyday America.

SHAKING THE COUNTRY TO ITS ROOTS

Few contemporary issues arouse more fear and hostility in the average American than AIDS. Mom and Pop America are suspicious that the government is hiding the truth about the virus. They are frustrated that while they fear their families may be in grave danger, the government is ignoring

them and listening only to special interest groups.

The average American has been told he must respond to AIDS/HIV information by grudgingly and explicitly warning his preteen children about the danger of AIDS. In his fear, the average American thinks twice when choosing a dentist and screens blood donors before having elective surgery. Mr. Average Citizen also worries that his kids in public school might be infected by HIV-positive classmates. He wonders whether the government really must spend so much on AIDS research because he believes the problem affects only homosexuals and those who are promiscuous or use drugs. He resents public-school sex experts who indoctrinate teens with graphic sexual imagery and then tell them to bet their lives on condoms.

The AIDS lobby's second major impact is that the government has assumed the major role in fighting the plague. It has assumed responsibility for finding a cure, counting the afflicted, treating the victims, educating the young, and enforcing special civil rights protections for those in the HIV/AIDS community.

President Clinton even has an AIDS czar, Kristine Gebbie. She, too, promotes condoms, rather than abstinence, even though most public health officials agree that abstinence is the only real solution to the epidemic.

Despite their gains, AIDS activists demand ever more aggressive action from government. They insist on more money for AIDS victims, the institution of needle-exchange programs, and explicit talk about how the virus spreads. Leaders like Anne Donnelly of Project Inform say, "We're losing a sense of urgency, losing sight that this is a public health emergency."

More and more laws are being passed to protect AIDS victims. The federal government has ordered hospitals to forfeit federal financing unless health-care workers infected with AIDS are hired without restrictions. This was part of a battle fought in 1991 over a congressional proposal to test all health-care workers for HIV. A gay activist organization, the Lambda Legal Defense and Education Fund, allied itself with medical groups to quash the testing initiative. The proposal failed in part because hospitals wanted to avoid higher liability insurance premiums for infected workers and knew that the AIDS stigma would severely limit a health-care worker's ability to find another job. It mattered little that most Americans favor mandatory AIDS testing for health-care workers.

The government controls most AIDS research funds. This money is parcelled out to private institutions with strict guidelines or trickles down to virtually every laboratory at the National Institutes of Health. This largess subsidizes such "AIDS" research as the National Cancer Institute's "gay gene" study, which received enormous publicity for its alleged proof that homosexuality is genetic. (In fact, from a strictly scientific perspective, the study did little more than suggest that there might be an inherited tendency in some people to be homosexual, but many gay advocacy groups used the study to support the conclusion that homosexuality is excusable, acceptable, and normal.)

The government also leads in AIDS education. Surgeon General Joycelyn Elders has begun a massive campaign against the spread of AIDS by distributing and advertising condoms. A similar effort was rejected by the CDC only a few years ago because the material was considered offensive to a majority of adults.

Today, Elders has the support of the CDC, which released a recent report claiming that condoms are effective against HIV. Relying primarily on a single European study, the report boldly dismissed scientifically established problems with condoms and ignored the fact that teens and adults do not use condoms correctly, if at all—even when taught to do so.

THE EFFECT ON BUSINESS

Finally, the AIDS lobby has an impact on business. The Americans with Disabilities Act, enacted in 1992, forces companies to hire HIV-positive applicants, thus elevating insurance premiums.

Several companies, such as AT&T, have joined the AIDS awareness effort by sponsoring films such as *Sex Education in America: AIDS and Adolescence*. This film promotes sex education and attacks abstinence programs. It tells teens that unless they have repressive parents who keep them locked up, they obviously need condoms. Elders stated at the film's Capitol Hill screening last November, "The only cure we have for AIDS is education, education, education."

Small-business owners are "criminalized" when they deny service to HIV-positive patrons. Under the Americans with Disabilities Act, federal law defines HIV as a handicap, making discrimination based on HIV illegal at most public accommodations, such as child-care centers, restaurants, health spas, and hospitals.

The health-care industry is particularly affected by AIDS, especially the nation's blood banks. HIV-1 testing of the blood supply, which increased per-unit costs by five dollars, was instituted in 1985. That was too late for thousands of blood recipients who became infected partly because AIDS lobbyists fought testing.

According to Alan Brownstein, executive director of the National Hemophilia Foundation, the epidemic has created "a heightened awareness of the responsibility to protect the recipients of blood." Although public anxiety remains, the CDC says the threat of contracting HIV from tainted blood is about one in 225,000.

Medical professionals are especially sensitive to the threat of contracting the virus. Indeed, the government has documented thirty-seven cases of health-care workers contracting the disease from patients. W. Shepherd Smith, Jr., of Americans for a Sound AIDS/HIV Policy contends that the true figure is much higher. Physicians face a less than sympathetic judicial system, which believes denying care to HIV patients is a civil rights issue. AIDS victims denied treatment have been awarded high damages, and doctors' insurance premiums continue skyward.

The AIDS lobby has manipulated practically every power center in America. While the average American suspects the lobby's motives, the AIDS juggernaut garners ever greater sums of taxpayer money for treatment, research, and education and is now trying to shift the blame for the epidemic to promiscuous heterosexuals rather than homosexuals.

No one seriously doubts that there is an AIDS crisis, but there is no consensus about the true nature of the epidemic or its solution. There is also little reason to hope that the AIDS lobby will step back from its current supercharged level of activity to reconsider the impact of its efforts on society and the collective good. ❑

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FEDERAL GOVERNMENT PROMOTES HOMOSEXUALITY USING "DIVERSITY" COVER

by
Robert L. Maginnis

The federal government is using taxpayer money to promote homosexuality as the moral equivalent of heterosexuality. This is happening under the guise of diversity and it links virtually every aspect of government to the homosexual agenda.

FEDERAL GOVERNMENT GRANTS HOMOSEXUALS OFFICIAL STATUS

During the first two years of the Clinton Administration, most federal agencies have amended their equal employment opportunity and civil rights policies to include the term "sexual orientation." These changes are not justified by law.

For example, Carol Browner, Administrator of the Environmental Protection Agency, sent a memo to all EPA employees on October 14, 1994 stating, "Today, the EPA joins the growing list of public and private sector employers which have added 'sexual orientation' to our equal employment opportunity policy."[1]

Housing and Urban Development Secretary Henry Cisneros did the same in August, 1994 with a memo that states, "Sexual harassment and discrimination based on sexual orientation are unacceptable in the workplace and will not be condoned at HUD."[2]

Department of Transportation Secretary Federico Pena published his statement in 1993 which declares, "[N]o one [can] be denied opportunities because of his or her race, color, religion, sex...or sexual orientation."[3]

The Federal Bureau of Investigation joined the chorus when director Louis Freeh stressed that "homosexual conduct is not per se misconduct" and adopted a new policy to admit homosexuals to the ranks of the Bureau.[4] Several homosexuals are now being trained to become FBI agents.

Freeh's boss, Attorney General Janet Reno, declared that the Department of Justice will not discriminate on the basis of sexual orientation when conducting security clearances.[5] Although homosexuality has long been a marker for

homosexual misconduct, Reno removed any reference to sexual orientation from application forms. Congressman Barney Frank (D-MA), an open homosexual, stated, "The clear implication is that, outside the uniformed military services, being gay will not be a relevant factor."[6]

Moreover, Reno ruled that a foreigner, who claimed that he was persecuted by his government for being homosexual, may be eligible to immigrate to the U.S.[7] In 1994 the Attorney General waived immigration laws so that avowed HIV-infected homosexuals could participate in New York's "Gay Olympics."[8]

This official recognition of homosexuals is taking place without legislative action. Indeed, there are no laws requiring these changes, and little chance that such laws could be passed. Homosexuals are being awarded a special class status based solely on behavior, not on a benign characteristic like race or gender.

The Administration's official recognition goes further. Office of Personnel Management Director James King sent a memo to all OPM employees in January, 1994 announcing the formal recognition of the Gay, Lesbian and Bisexual Employees (GLOBE) as a professional association. This recognition bestows on GLOBE the same privileges extended to other associations. For example, GLOBE can now use government facilities, communication systems, bulletin boards, and have official representation at personnel meetings.[9]

GLOBE's stated purpose is to "promote understanding of issues affecting gay, lesbian and bisexual employees; provide outreach to the gay, lesbian and bisexual community; serve as a resource group to the Secretary on issues of concern to gay, lesbian and bisexual employees; work for the creation of a diverse work force that assures respect and civil rights for gay, lesbian and bisexual employees; and create a forum for the concerns of the gay, lesbian and bisexual community."[10] There are more than 40 chapters throughout the federal government.[11]

The Department of Transportation GLOBE chapter earned some notoriety when posters depicting famous people alleged to be homosexual were displayed on bulletin boards. The posters were made at government expense and identified Eleanor Roosevelt, Virginia Woolf, Errol Flynn, and Walt Whitman as homosexuals.[12]

Federal Aviation Administration employee Anthony Venchieri complained when he received a DOT voice mail message inviting him to "celebrate with us the diversity of the gay and lesbian community." The message was broadcast to all 4,100 DOT voice-mail users. He was removed from the system after complaining but was later reinstated. FAA's Office of Civil Rights spokesman stated, "The Department of Transportation has officially recognized the organization [GLOBE]....The FAA complies with this recognition of an employee association which contributes to employee welfare and morale and assists in fostering a climate of diversity and inclusion."[13]

GLOBE also uses government facilities to promote homosexuality. During June 1994, many federal agencies permitted GLOBE chapters to use space to host homosexual programs. For

example, DOT hosted six events in the Washington headquarters. Those included: a panel of DOT officials discussing diversity; a presentation by Parents, Friends and Families of Lesbians and Gays; and a program on the gay and lesbian Asian Pacific American community.[14]

THE DIVERSITY AGENDA

"Diversity" is a vogue concept that is being used to advance the homosexual agenda.

The U.S. Fish and Wildlife Service has embraced diversity. In a July 1994 memo entitled, "Stepping Stones to Diversity: An Action Plan," the service proclaims, "Managing diversity needs to be a top service priority....The service must also recognize that the differences among people are important."[15]

DOT's Secretary Pena left no doubt about what he means by diversity. In a policy statement he defines it as "inclusion -- hiring, developing, promoting and retaining employees of all races, ethnic groups, sexual orientations, and cultural backgrounds...."[16]

The Department of Agriculture joined the diversity movement in March 1994 by establishing a GLOBE chapter.[17] A report in *The Sacramento Valley Mirror* shows just what the Department of Agriculture and, more specifically, a subordinate organization, the Forest Service, means by diversity.[18] According to that article, diversity means a redefinition of family, promoting gay pride month, and encouraging the use of federal resources to promote homosexual causes.

A letter from Region 5 Forester Ronald E. Stewart to his employees outlines Forest Service recommendations concerning homosexuals. Stewart's memo to "All Region 5 Employees" says, "We can not allow our personal beliefs to be transformed into behaviors that would discriminate against another employee."[19] The recommended policy:

Prohibits discrimination based on sexual orientation.

Empowers homosexuals to serve as mentors and network coordinators.

Incorporates sexual orientation awareness training.

Establishes a computerized network for isolated homosexual employees.

Awards pro-gay work settings.

Encourages local "multicultural awareness celebrations" like gay pride month.

Directs supervisors to consider an employee's domestic partner when assigning schedules.

Prohibits private permittees and concessionaires from discriminating against domestic partners.

Mandates unions to become proactive in the "sexual diversity" movement.

Requires that contracts include domestic partner services.

Guarantees government child care for children of an employee's domestic partner.

Considers gay and lesbian owned businesses when arranging local purchase agreements.

The proposals encourage Forest Service employees to lobby for the following.

Amend federal travel regulations to incorporate the needs of domestic partners.

Adopt this definition of a family: "A unit of interdependent and interacting persons, related together over time by strong social and emotional bonds and/or by ties of marriage, birth, and adoption, whose central purpose is to create, maintain, and promote the social, mental, physical and emotional development and well being of each of its members."

Advocate to the Small Business Administration the inclusion of gay- and lesbian-owned businesses eligible for minority set-aside contracts.

Advocate that retirement benefits include domestic partners.

Add non-discrimination provisions to all private sector contracts prohibiting discrimination based on sexual orientation except for bona fide religious and youth groups.

DIVERSITY TRAINING MANDATORY

Bureau of Labor Statistics Commissioner Katherine Abraham, whose performance agreement with Secretary of Labor Robert Reich includes diversity training, hosted three-hour diversity training sessions for BLS employees. The paid guest speaker began each session by stating, "Diversity means our national survival."[20] He closed the session by reading a letter from homosexual BLS employees complaining about discrimination. The guest concluded, "What's necessary in the workplace is for everybody to have the attitude that people are not good, not bad, just different."[21]

The U.S. Postal Service is also promoting diversity. During a November 1, 1994 diversity seminar a guest psychologist suggested that "aggressive recruitment is needed," that governments must, "develop, attract and retain members from under-represented groups." His speech followed legal counsel's presentation on the new non-discrimination policy for gays, lesbians, and bisexuals.[22]

The Forest Service has a training booklet entitled, "Valuing Diversity." Inside the booklet are statements such as: "Fact: Psychological and social influences alone cannot cause

homosexuality....Fact: A biological (genetic, hormonal, neurological, other) predisposition toward homosexual, bisexual, or heterosexual orientation is present at birth in all boys and girls." No source for these "facts" is provided, nor could there be.[23] So-called genetic studies on homosexuality are flawed and conducted by homosexual activists.

The U.S. Health and Human Services department sponsored a "Multi-Culture Day" in Dallas, Texas in April, 1994. An HHS employee gained official permission to man an exhibit, "Highlighting Our Gay and Lesbian Culture."[24]

Four federal agencies hosted a "Global Diversity Day" on May 25, 1994 at San Francisco's U.S. Customs House. The activities were attended by 300 federal employees and included displays by gay, lesbian, and bisexual representatives. On display were a rainbow flag that was flown at the 1993 March on Washington, posters displaying famous homosexuals, and cultural items such as books and GLOBE applications.[25]

Possibly the largest diversity event was hosted by the U.S. Navy on September 8, 1994 near the Pentagon. Diversity Day '94 included an opening ceremony with a welcome by a three-star admiral who stated, "The federal and private sector must make diversity part of business."[26] He also said that the work environment "is not a matter for moral issues."[27]

The government's guest speaker was diversity expert and professor at Northeastern Illinois University Dr. Samuel Betances. He equated racism, sexism, and homophobia and then stated, "We can start all over if need be."[28] He explained that former Alabama Governor George Wallace, a one-time racist, started over by recanting his racist beliefs.

Betances encouraged homosexuals to organize "to get respect" much like women, blacks, and Latinos organized.[29] He emphasized that all of us "must be prepared to unlearn" old ways. He observed that homosexuals are "part of the diversity equation whether we like it or not" and that they "need a climate of respect."[30]

The activities included a seminar entitled "Another Color of the Rainbow: Sexual Minorities in the Workplace" taught by an acknowledged lesbian, and a videotape, "On Being Gay," which promotes homosexuality as the moral equivalent of heterosexuality.

The U.S. Air Force Academy already has a diversity day scheduled for April 1995. The symposium is entitled, "Strength Through Diversity Leadership Symposium." Conference director Colonel David Wagie says that his program will not include "sexual orientation" issues. He explained, "We are interested only in using the term as officially defined and used by DOD."[31]

The Navy, however, is cruising toward sexual diversity. Secretary of the Navy John Dalton wrote the following in his diversity policy statement on May 23, 1994: "Our continued success requires that each civilian employee and applicant be afforded the opportunity to excel without regard to his or her race, color, gender, sexual orientation...."[32]

AIDS AWARENESS OR MORE DIVERSITY TRAINING?

President Clinton announced on September 30, 1993 to all heads of executive departments his HIV/AIDS policy. The policy requires each secretary to designate a senior staff member to implement HIV/AIDS education and prevention programs and to develop workplace policies for employees with HIV/AIDS.

The training has received a mixed review. Federal employees have called the Family Research Council to complain that they found the training offensive.

Two supervisors and 41 employees in the Federal Communication Commission's audio services division chose not to attend mandatory "AIDS Awareness Training." An FCC employee stated, "The classes are basically an adult version of high school sex ed, with the modern-day sensitivity training thrown in."[33]

Department of Energy Secretary Hazel O'Leary created "Walkin' the Talk" AIDS training materials for three-hour, mandatory training sessions. The DOE's Office of Economic Impact and Diversity coordinated the funds for the training. A memo from the Department's Federal Workplace HIV/AIDS Education Coordinator states, "All employees are required to complete this training."[34]

The training includes a brief history of HIV, symptoms and prevention and risk reduction. There is a discussion of needle sharing and sexual contact. Federal employees are told to reduce their HIV contraction risk by practicing "safer sex" by using barriers like condoms, dental dams, plastic wrap, and latex gloves. The manual states, "A dental dam (a small, square piece of latex) or plastic wrap may be used for any oral-vaginal or oral-anal contact. All types of barriers (condoms, dental dams, and plastic wrap) are effective against HIV transmission only if they are used correctly and consistently from start to finish."[35]

The training materials are based on government "evidence" and the materials espouse confidence in latex which is not supported by research. For example, the U.S. Centers for Disease Control and Prevention misrepresent a wealth of conflicting scientific evidence. The CDC does a disservice to the American public when it promotes condoms as a responsible prevention strategy. CDC places its hopes on the correct and consistent use of condoms, an unreached and unreachable goal."[36]

The Energy Department makes a disclaimer: "HIV is transmitted without regard to gender, age, race, ethnicity, sexual orientation, religion, or identification with any group. For this reason, we avoid referring to 'high risk groups.'" Not identifying "high risk groups" is irresponsible. The CDC HIV/AIDS Surveillance Report shows that at least 87 percent of HIV victims either contracted the virus from homosexual encounters or by sharing needles.[37]

Probably the most outrageous example of government-sponsored AIDS training was done for the

Forest Service. It took place in the Forest Service's Tahoe Region on May 6, 1994 and was conducted by a local health official with degrees in sexology, a self-described homosexual phlebotomist (individual who draws blood), and an HIV-positive woman from the community.[38]

Most of the "infectious disease training" addressed HIV/AIDS. The phlebotomist was an ex-convict who tried to debunk "homophobic" misconceptions. He speculated that many husbands were involved in homosexual affairs. He showed a variety of condoms and how to apply them to a life-size replica of erect male genitalia. He even explained a technique for using one's mouth to apply the condom. He also explained the proper cleaning techniques when sharing hypodermic needles.[39]

One of the workers in the audience later complained, "There seems to be no logic or equity in penalizing one employee for repeatedly bringing up 'Christmas' at work, during December because he or she believes in God, while instructing other employees how to use intravenous drugs or engage in anal sex."[40]

FEDERAL MONEY FUNDS "GAY SCIENCE"

In Fiscal Year 1993, in addition to more than $2 billion for AIDS, the U.S. Department of Health and Human Services awarded 84 grants worth over $20 million to research topics that primarily involve homosexuals.[41] These grants include:

"Phone counseling in reducing barriers to AIDS prevention," which studies homosexual men who are purportedly unable to avoid unsafe sexual behavior.[42]

A project that examines how "stress generated by societal reactions leads adolescents who are coming-out to be at higher risk of problems" than their heterosexual peers.[43]

A project entitled "Drinking, drug use and unsafe sex among gay and bisexual couples" which explores the relationship "between drinking, drug use and unprotected sex...among gay and bisexual couples."[44]

A study designed to analyze behavioral data about HIV transmission among bisexual men in Mexico.[45]

A study by Dr. Dean Hamer provides a good example of how federal funds are being used to help advance gay political activism.

Dr. Hamer, chief of the Gene Structure and Regulation Section, Laboratory of Biochemistry of the National Cancer Institute, National Institutes of Health, Department of Health and Human Services, published the results of his two year "gay-gene" research project, "A Linkage Between DNA Markers on the X Chromosome and Male Sexual Orientation," in the July, 1993 edition of *Science*.[46]

The Family Research Council published an investigative report on Dr. Hamer's study. The report shows problems with the study, Hamer's promotion of homosexuality in the media, and questions whether federal funds were properly used.[47]

While published NCI budgets do not identify money earmarked for Dr. Hamer's research, funding for Hamer's research (which totaled $420,000) apparently came from money designated for research into Kaposi's sarcoma (KS).[48] NCI's press office indicated that Hamer's study looked at KS, which is an AIDS-related cancer prevalent among gay men.[49] And Hamer promoted his research as a multifactorial study investigating host genetic factors for Kaposi's sarcoma and lymphoma.[50]

Yet, curiously, Hamer "ran no tests to determine whether his clients had KS."[51] And Hamer stated in a court deposition that he has never published anything on Kaposi's sarcoma."[52]

More taxpayer-funded gay research is in the works. Hamer wrote a letter to Health and Human Services Secretary Donna Shalala arguing for the creation of an NIH Office of Gay and Lesbian Health Concerns. The *American Medical News* reports that the HHS will seriously consider Hamer's proposal. Hamer envisions the office going beyond research into the origins of sexual orientation to include HIV and other sexually transmitted diseases, breast and gynecologic cancers, substance abuse and adolescent suicide.[53]

In addition, Angela Pattatucci, one of Hamer's research assistants, has an ongoing project that deals with genetics and lesbianism. According to Victoria L. Magnuson of Hamer's NIH office, Pattatucci's "lesbian study has a cancer component." Yet the advertising fliers developed for this study call it a study of the "genetic nature of sexual orientation...a gay gene study." They state that "per diem and travel expenses" would be covered by "NIH," and that subjects would be interviewed by "gay-positive" persons.[54]

(Pattatucci's track record raises serious questions about her objectivity as a researcher. She recently told *Network*, a homosexual magazine based in New Jersey, "I believe the most important thing a gay person can do is to be public about his or her homosexuality." That article included a picture of Dr. Pattatucci holding her jacket open to reveal a T-shirt with the word "DYKE" written in large, bold type.[55])

FEDERAL EMPLOYEES ON THE GAY AGENDA FRONT

U.S. Patent and Trademark Commissioner Bruce Lehman is a self-described homosexual who promotes Commerce Secretary Ron Brown's "Diversity Policy." For those who object, Lehman states, "As far as I'm concerned, it's got to be forced down their throats. If they want to be bigots, they can go work for someone else's department." The agency's director of human resources created a "diversity recruitment support team" to spend up to 15 days of diversity recruiting in 1995.[56]

The nation's former Surgeon General Joycelyn Elders told homosexual magazine *The Advocate*, "Americans need to know that sex is wonderful and a normal...and healthy part of our being, whether it is homosexual or heterosexual." She endorses adoption of children by homosexuals and called the Boy Scouts' ban on homosexual Scouts and Scout leaders "unfair."[57]

Roberta Achtenberg is HUD's assistant secretary for Fair Housing and Equal Opportunity. She appeared in San Francisco's 1992 gay pride parade riding in the back seat of a convertible next to her "partner" (Mary Morgan, a San Francisco municipal court judge) and "their" child. The sign on the car said: "Celebrating Family Values."[58]

While a member of the San Francisco board of supervisors and a member of a United Way chapter in that area, Achtenberg helped to defund the Boy Scouts for their moral standards. She has continued her activism in the federal government.[59]

In February 1994 Achtenberg signed a diversity policy that requires managers to "participate as active members of minority, feminist or other cultural organizations" to qualify for an "outstanding" rating.[60]

Some federal agencies have appointed homosexual watchdogs to ensure employee compliance with pro-gay diversity policies. For example, the Foreign Agriculture Service has a gay, lesbian and bisexual program manager. This is a collateral duty to take no more than 20 percent of the manager's time. Her task is to promote the gay, lesbian and bisexual employment program and to develop and disseminate information on employment matters throughout the agency.[61]

DISCOURAGING DISSENT

Federal employees who object to the diversity push beware! U.S. Merit Systems Protection Board Chairman Ben Erdreich has embraced diversity. The MSPB is the agency that rules on federal employee appeals of personnel actions. Erdreich told his employees on November 19, 1994: "I have a strong commitment to diversity and equitable treatment in the workplace....Managers will be graded on...respect for diversity in the workplace and [the extent to which they] perform responsibilities without regard to the differences of race, color...sexual orientation...."[62]

Department of Agriculture and senior EEO manager Karl Mertz ran into the diversity wall. On March 4, 1994 Mertz told a reporter when asked about then-Secretary Espy's gay-rights agenda, the AG Department should be headed "toward Camelot, not Sodom and Gomorrah."[63]

Mertz was later told that his interview conflicted with Department civil rights policy "which could seriously undermine your ability to perform your responsibilities." He was transferred to a non-management job.[64]

CONCLUSION

The Clinton Administration is methodically unleashing an avalanche of pro-homosexual policies and advocacy. It is costing the federal taxpayer millions of dollars and discriminates against workers who object on religious and/or other grounds. The 104th Congress should investigate this abuse and reverse the federal government's promotion of homosexuality under the label of diversity.

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ENDNOTES

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Mr. MICA. Thank you, Mr. Dornan. And as I understand it, you are on the National Security Committee and you are also chairman of the Subcommittee on Military Readiness. When we return——

Mr. DORNAN. Personnel, Mr. Chairman.

Mr. MICA. Personnel. When we return, I'd like to know what kind of taxpayer dollars are involved in this pamphlet that I understand is used by DOT in training. And if you could supply us with that information, I'll be in and out myself.

Mr. DORNAN. Shall do.

Mr. MICA. Thank you. And if you're going to raise your hands in the back, you all are going to be asked to leave. You do have a right to demonstrate outside the committee room, but please don't conduct demonstrations within the committee or disrupt the hearing. And this is your first warning.

Thank you. We will recess for approximately 15 minutes.

Thank you.

[Recess.]

Mr. BASS [presiding]. The Civil Service Subcommittee will come to order.

As vice chairman of the committee, I'll be acting as chairman. I regret to say the chairman has a conflict for a short period of time. He should be back.

[The prepared statement of Hon. Charles F. Bass follows:]

STATEMENT BY CONGRESSMAN CHARLES F. BASS ON FEDERAL EMPLOYEE TRAINING PROGRAMS

Mr. Chairman, I thank you for calling this important hearing today. I would also like to thank our witnesses for appearing before us today.

At President Clinton's behest, the Executive Branch has implemented workplace AIDS training programs. There have been many complaints about the subject matter contained in these programs, as well as about the mandatory participation requirement. In light of the widespread negative publicity surrounding these training programs, I believe it is appropriate that this Subcommittee examine this issue in depth. Our goal should be to evaluate AIDS training programs in the context of workplace appropriateness and value to the taxpayers. With this in mind, I look forward to today's testimony.

I thank the Chairman.

Mr. BASS. At this time, I will recognize Congresswoman Morella for an opening statement.

Mrs. MORELLA. Thank you. Thank you, Mr. Chairman.

I want to thank Chairman Mica for calling this hearing to examine the effectiveness and the responsiveness of governmentwide training policy and oversight in the administration of the AIDS prevention training initiative. Needless to say, the June hearings in this subcommittee have been to say the very least provocative, and this hearing has the potential to be just as provocative.

Let's talk about training. At its highest level, training enhances organizational performance and has measurable results that qualify and quantify the effort. The role in promulgation of training policy should be to facilitate this.

In my opinion, there have been three major authorities that currently provide the framework for conducting and evaluating training in the government: The Government Employees Training Act, which is Executive Order 11348, and the Government Performance and Results Act. These authorities provide a sufficient framework for effectively training Government employees.

I feel the breakdown in Government training is not so much the policies, but the implementation of policies. I am appalled at the lip service Federal agencies give to training and strategic planning. While you could count them on your hands, the agencies that are really pursuing the alignment of the training function with their strategic planning processes, alas, are too few.

I find it is hard to comprehend, when you look at the importance of training and retraining to Federal workers and agencies in this period of downsizing and reinvention. But, Mr. Chairman, I'm not here to admonish Federal agencies, but merely to suggest that they do a better job on this, and to put forth the recommendation that agency plans be developed for aligning training with the agency's strategic planning process.

Now I'd like to talk about the AIDS prevention training, which is probably the real issue of this hearing. I don't think anyone would argue about the importance of job-related or mission-related training, particularly in light of the survival training received by Air Force Capt. Scott O'Grady.

However, I believe President Reagan understood that you can't separate AIDS issues from organizational performance and bottom line results when he encouraged American businesses to examine and consider adopting education and personnel management policies addressing AIDS. Business leaders embraced this recommendation not just because it was the right thing to do, but because it also made business sense.

Congressional officials and policymakers who believe they can stand as onlookers as the effects of AIDS devastate our country and citizenry, are sadly mistaken. They don't understand the systemic effects, environmental and social issues have on an organization's performance, nor do they buy into the reasoning that if the pandemic that is AIDS is crippling our Nation, doesn't it seem logical that it will eventually cripple our workplaces?

AIDS is the principal cause of death for Americans between 25 and 44 years of age. Approximately 50 percent of permanent, full-time civil servants are in this age group. And also age is no re-

specter of one particular sex over another or socioeconomic background.

I can remember vividly at the Republican convention the one person in that convention who brought tears to everybody's eyes and total sirens in terms of hearing, was Mary Fisher, who is now a constituent of mine in Montgomery County, MD, and who spends a great deal of her time talking to people about how she has AIDS, the effect on her children, her lifestyle, and tries to educate people in terms of the need to understand and the devastating effects.

Indeed, the effects of AIDS are far-reaching and do and will continue to impact an agency's and a worker's ability to perform. An employee living with HIV/AIDS who is ostracized and no longer receives vital information from his or her colleagues, will see a decline in performance. The individual who is uneducated about HIV/AIDS, yet is uncomfortable because his or her colleague with AIDS sneezes, will see a decline in performance.

The Federal manager who is preoccupied with burning the office furniture of a former Federal employee with AIDS will see performance decline. In a publication entitled "HIV/AIDS, a Challenge for The Workplace", the National Commission on AIDS wrote, "as people with HIV disease remain at work longer, employers must be able to manage HIV-related workplace concerns on a day-to-day basis. The workplace, where most adults, including young adults, spend time every day, is a very logical point of access for prevention education to a significant proportion of the U.S. population."

To understand the need for AIDS awareness training, we need not look any further than to the White House, and this has been mentioned, where several gay legislators were given the rubber gloves treatment. The Secret Service men in earnest and ignorance thought they were protecting themselves.

AIDS is a terrible disease. However, the public's ignorance about AIDS strips away the remaining dignity from those who are fighting their greatest battle. Don't we owe these individuals the kindness, the respect and the understanding that can be brought about through training? However, my support for AIDS prevention training should not be confused for support with specific training methodologies. I do not condone or like statements involving the sexual practices of grandmothers.

I myself am a grandmother, and an instructor should have more decency than that. As a former English professor, I recognize how easy it is to deviate from the course outline or to make an unfortunate statement. An agency would have very little control over this, but if agencies are not fully establishing their policies, documenting their instructor guides, and properly preparing their trainers for this very sensitive subject, they have done irreparable damage to this initiative and a disservice to those who elected or were mandated to attend.

I am, however, pleased that anonymous information suggests that the AIDS awareness training for the most part went and is going well. But I would also call upon this subcommittee to assure that the next time governmentwide training is done, that the appropriate strategy is in place for a cohesive and cost effective training approach.

Again, I thank you, Mr. Chairman, Mr. Mica, for calling this hearing, and I appreciate your providing me the leeway to make this statement early also in the event I may have to go and vote for my Science Committee.

But I want to also as kind of a postscript indicate that I have—I have worked with a constituent who has experienced discrimination as a Federal employee living with AIDS. There was a breached confidentiality of his medical records and tremendous harassment. I believe that Federal AIDS training does have relevance, as I have said in my statement, in the work force, and, as we will also hear from the private sector, and Federal agency witnesses.

The problems here are particular instances, in which the implementation of that training is problematic. I don't, however, believe that the relevance of AIDS training to a productive work force is really in question.

I thank you again, Mr. Chairman.

[The prepared statement of Hon. Constance A. Morella follows:]

STATEMENT OF THE HONORABLE CONSTANCE A. MORELLA HEARING ON TRAINING POLICY AND OVERSIGHT & ADMINISTRATION AIDS TRAINING PROGRAM SUBCOMMITTEE ON CIVIL SERVICE JUNE 22, 1995

I would like to thank Chairman Mica for calling this hearing to examine the effectiveness and responsiveness of governmentwide training policy and oversight and the administration of the AIDS prevention training initiative. Needless to say the June hearings of this subcommittee have been very -- to say the least -- provocative, and this hearing has the potential for being just as -- provocative.

Let's talk about training. At its highest level, training enhances organizational performance and has measurable results that qualify and quantify the effort. The role and promulgation of training policy should be to facilitate this.

In my opinion, there are three major authorities that currently provide the framework for conducting and evaluating training in the Government. Two are clear cut, and one is not so clear cut -- the Government Employees Training Act, Executive Order 11348, and the Government Performance and Results Act.

Last year, through the Federal Workforce Restructuring Act, Congress amended the Government Employees Training Act, including the definition of "training." This modification placed emphasis on "mission-related" training rather than "job-related" training for employees. This, in turn, gave managers the flexibility to prepare employees for new responsibilities outside their current occupations to meet new skill demands or to help alleviate skill shortages.

E.O. 11348 directs OPM to provide assistance to the Federal agencies in the improvement of training programs and in developing sound training programs. The Government Performance and Results Acts (GPRA) was designed to

assure that programs in government have measurable objectives and that those objectives are accomplished. Some have jokingly called the Act Congress's insurance policy if Reinvention fails. This Act strengthens the framework for aligning training programs with the strategic planning processes and missions of government agencies.

Like most members of this subcommittee, I believe that most policies can be improved. These are no exceptions. However, I believe these authorities provide a sufficient framework for effectively training government employees.

The breakdown in government training is not so much the policies, but the implementation of policies. I am appalled at the lip service federal agencies give to training and strategic planning while doing nothing. In their *Training Needs Assessment Handbook,* OPM writes, "The concept of 'strategic' human resources development (HRD) refers to the systematic alignment of an agency's HRD functions with the agency's overall mission and strategic goals. The traditional HRD functions...are most effective when they are linked directly with the broader human resources functions...and also with the agency's mission, business, and performance goals."

Yet, you could count on your hands the agencies that are even pursuing the alignment of the training function with their strategic planning processes. A recent report, which included an evaluation of the training needs assessment practices of agencies, indicated that they varied, but they were not very strategic in their approach. I find this hard to comprehend when you look at the importance of training to federal workers and agencies in this era of downsizing and reinvention.

But, Mr. Chairman, I am not here to admonish Federal agencies, but to merely suggest that they do a better job on this *and to put forth the recommendation that agency plans be developed for aligning training with the agency strategic planning process.*

Now, I would like to talk about the AIDS prevention training, which is probably the real issue of this hearing. I don't think anyone would argue about the importance of job-related or mission-related training, particularly in light of the survival training received by Air Force Captain Scott O'Grady. However, I believe President Reagan understood that you can't separate AIDS issues from organizational performance and bottomline results, when he encouraged American businesses to examine and consider adopting education and personnel management policies addressing AIDS. Business leaders embraced this recommendation, not just because it was the right thing to do, but because it made business sense.

Congressional officials and policy makers who believe they can stand as onlookers as the effects of AIDS devastate our country and citizenry are sadly mistaken. They don't understand the systemic effects environmental and social issues have on an organization's performance. Nor do they buy into the reasoning that if the pandemic that is AIDS is crippling our Nation, doesn't it seem logical that it will eventually cripple our workplaces? AIDS is the principle cause of death for Americans between 25 and 44 years of age. Approximately 50 percent of permanent, full-time civil servants are in this age group.

Indeed, the effects of AIDS are far reaching and do and will continue to impact an agency's and a worker's ability to perform. Ane employee living with HIV/AIDS, who is ostracized and no longer receives vital information from his colleagues, will see a decline in performance. The individual, who is uneducated about AIDS, yet is uncomfortable because his colleague with AIDS sneezes, will see his performance decline. The federal manager, who is preoccupied with burning the office furniture of a former Federal employee with AIDS, will see his performance decline.

In a publication entitled, *HIV/AIDS: A Challenge for the Workplace*, the National Commission on AIDS wrote, "As people with HIV disease remain at work longer, employers must be able to manage HIV-related workplace concerns on a day-to-day basis. This means, among other things, staying

abreast of health care options, legal and regulatory requirements, coworker concerns, and maintaining a productive working relationship with affected individuals... The workplace -- where most adults, including young adults, spend time everyday -- is a very logical point of access for prevention education to a significant proportion of the US population."

To understand the need for AIDS awareness training, we need not look any further than to the White House, where several gay State legislators were given the "rubber gloves" treatment. The Secret Servicemen, in earnest and ignorance, thought they were "protecting" themselves.

AIDS is a terrible disease; however, the public's ignorance about AIDS strips away the remaining dignity from those who are fighting their greatest battle. Don't we owe these individuals the kindness, the respect and the understanding that can be brought about through training?

However, my support for AIDS prevention training should not be confused with support for specific training methodologies. I do not condone or like statements involving the sexual practices of grandmothers. I am a grandmother myself, and an instructor should have more decency than that.

As a former English professor, I do recognize how easy it is to deviate from the course outline or to make an unfortunate statement, particularly in response to a question. I believe most of the incidents cited are such deviations, and an agency would have very little control over them. But, if agencies are not fully establishing their policies, documenting their instructor guides and properly preparing their trainers for this very sensitive subject, they have done irreparable damage to this initiative and a disservice to those who elected, or were mandated, to attend.

In addition, I would call upon this subcommittee to assure that the next time governmentwide training is done that the appropriate strategy is in place for a cohesive and cost-effective training approach. I was astonished as I read

the testimony that OPM played virtually no training policy role in perhaps the most important governmentwide training initiative of the last decade. I was mystified at the lost opportunity for a coordinated effort to educate federal workers on AIDS prevention. I am, however, pleased that anonymous information suggests that the AIDS awareness training for the most part went, and is, going well. I know we will hear more about this today.

Again, thank you, Mr. Chairman, for calling this hearing. And I appreciate you providing me the leeway to make this statement early so that I can attend my full committee mark-up. I hope to return to this hearing.

Mr. BASS. Thank you very much, Mrs. Morella.

The Chair at this time will recognize the gentleman from New York, Mr. Gilman, for an opening statement.

Mr. GILMAN. Thank you, Mr. Chairman.

And I want to welcome our panelists who will be with us today, particularly Congressman Dornan who is waiting to testify.

Mr. Chairman, I am pleased to be able to participate in this hearing in order to discuss AIDS education training in the Federal workplace. And I welcome our witnesses from various departments of the Federal Government, and I hope that their testimony will help us more fully evaluate what aspects of this training have been successful and what portions need to be changed.

As many of us know, current statistics show that the HIV virus has infected millions of people in our Nation. Given these statements, the odds are that every workplace in America will eventually confront a portion of the AIDS epidemic. Accordingly, I believe that AIDS education in the workplace is important to reduce fear in the workplace by teaching employees just how the disease is spread and how to minimize the risk factors that enable this disease to spread. I believe that knowledge and education is an important tool in the battle against this deadly disease.

It is fair to say that this kind of education will cause some individuals to discuss issues that may make them somewhat uncomfortable. I hope that in today's hearing we will engage in a meaningful dialog that will help us develop ideas for a curriculum that will disseminate the information that is required to manage a situation where a fellow employee is tragically struck with this disease, while maintaining a reasonable comfort level for those who will receive this training.

Thank you, Mr. Chairman.

Mr. BASS. Thank you very much, Mr. Gilman. It is my understanding that the gentleman from Indiana does not have an opening statement at this time?

Mr. BURTON. No, Mr. Chairman, I am just here to listen and learn.

Mr. BASS. Very well. Thank you very much.

It is my understanding, Congressman Dornan, that you have delivered your testimony, and we are now at the point where we will be taking questions from members of the committee. And having had the opportunity to read your testimony during the brief recess that we took, I do have a couple of questions I would like to ask you.

First, from your review of the training materials that you make mention of, what portion of them in your opinion is appropriate or necessary for Federal employees to have in the process of the training parameters that you see as important?

Mr. DORNAN. Well, Mr. Chairman, I don't know how the other Members in the room discuss things at high schools when they are asked to come and visit with students. But I discuss HIV and AIDS quite comfortably and openly with high school children. Like Mrs. Morella, I have a 10th grandchild on the way. Our five children are all grown, in their late 30's. I have no problems with discussing AIDS. I discussed this virus with both President Reagan and then President Bush.

President Bush is only 9 years older than I am, but it might as well be 50 given the generational gap considering the uncomfortableness discussing some of these issues in public, particularly how you contract HIV, and including in the early years from polluted blood supplies. I watched an hour television show yesterday morning with all hemophiliac people who were all tested positive for HIV. I have no problem with discussing this in public and I think that it would be fine in certain Federal forums to discuss this, particularly the ignorance of how it is contracted, held by some fellow citizens.

I guess it is the way it is being done and that there are obvious, from what I can tell, hidden agendas here. Right down to what I said in my opening statement about how you select the instructors, this peculiar, if not offensive values quiz.

To illustrate this for some of my colleagues, let me tell you how I was first aware of this. In an unrelated subject involving sexual harassment, where obviously the U.S. Navy needed some training, I guess somebody in the White House decided they should start at the top at the Pentagon. So they called over 100 admirals and generals into a room where a female instructor in her 30's came before the admirals and generals and said they didn't get it, they had to get over their hang-ups. And she says, for example, watch this. And then she says vagina, vagina, vagina. Look, you're all blushing and getting uptight.

One of the admirals and two of the generals told me if there was any color in their face, it was anger that they were being treated by schoolchildren and wasting hours of valuable flag level talent to engage in that kind of stupidity.

Now did they need lectures on sexual harassment? Given Tailhook, the scandal in Las Vegas, obviously.

Did it have to be conducted in such a childish and offensive and stupid way?

Of course not. So that was my first contact with training sessions under the Clintons. And I pluralize the name Clinton, because obviously the First Lady has a key role in this. They have set up at the Pentagon an Office of Diversity Management. To set up an office like that, you have to have a directive. The hunt is on by this chairman to find the written copy of the directive setting up the Office of Diversity Management.

Then I started getting letters like the ones I have here and I've supplied them to the subcommittee, blocking out the names of all the people. And this started as early as last summer. I talked to Mr. Wolf about it, who Chairman Mica referred to, and my frustration was I had to keep telling civilian workers, including those at the Department of Defense, that you come under this distinguished subcommittee, not my chairmanship of military personnel. And now I find that it is creeping over on to the military side.

And I—because this man did use his name, Anthony, in an open letter last September, I'm sorry the wheels have ground so slowly here, to give these people some relief, but we have had an intervening major tidal change election. He says the diversity trainers lacked formal training in the subject. It was obvious. Under their leadership, we explored some of the hottest and most emotional social issues of the day. Sometimes painful emotional experiences,

showing they were affected by racism, sexism, anti-Semitism, and he puts in quotes, "homophobia," there is a thing called familia phobia, a phobia of the family, or other traumas.

In short order, tempers were on the boil, that white men were being on the receiving end of such invective as, quote, not getting it, not understanding life in a white male dominated society. Then it got into one's insensitivity. And he said, finally, when I brought up religious objections, he goes on to say, I was told my faith was my baggage.

How many times have I heard that in the last 10 years? And I had to work it out. So let me just say this. If Bob Dornan as a young Air Force lieutenant or captain was subjected to this, I would have walked. I would have raised holy hell. Nobody plays around with my faith.

And the problem here is you are going to have in the next panel, and I look forward to this, I think I will stay for it, Thomas Herron, who has written an extensive statement. I read it during the break. He's going to be fired if he doesn't subject his faith to what he thinks is a rude, obnoxious and in-his-face briefing. And they're trying to negotiate with him to get 70 percent of the briefing in public, and then they'll give him a makeup session in private on safe sex in the other, for the other 30 percent. This is bizarre.

Mr. BASS. Congressman Dornan, the clock should be running on me here. I'd like to ask you just to respond as briefly as you can to whether or not you think that it is appropriate, as is stated here in your testimony to educate Federal workers on how AIDS is and is not transmitted in the workplace and so forth.

Do you think there should be basic mandatory training on how to deal with AIDS versus all the other stuff that we have been talking about, the problems, so forth? Do you think that is an appropriate part of the training process for Federal employees?

Mr. DORNAN. I would say the way two surgeon generals ago did it, a pamphlet at taxpayer expense. They did this in England, sent to every Federal employee, maybe a little tougher than the vague one—it wasn't so vague, it was pretty good, that Doctor Koop mailed to every household in America at our taxpayer expense. And then if at a certain base or in a certain department there are complaints of people with the HIV virus saying they are being treated rudely or with insensitivity, then there might be some selective training verbally.

But to eat up millions of dollars of person hours bringing people into auditoriums and obviously with the training problem I'd say no. I'd say first you handle it by pamphlet, see what the feedback is.

Mr. BASS. All right.

Thank you very much, Congressman Dornan.

The Chair now recognizes the gentleman from Virginia, Mr. Moran, for 5 minutes.

Mr. MORAN. Thank you, Mr. Bass.

Bob, you were offered by a Federal employee in Denver, CO, more than 8,500 evaluation forms of HIV/AIDS training, and that were all positive. And I understand your office rejected them. Is that the case?

Mr. DORNAN. I think there was a cover letter with that, that explained the positive nature. So you probably had good instructors there. But we didn't know what to do with 8,000 forms. And I think we directed it to this committee, because they were civilian Federal workers and I can only handle people, men and women in uniform.

Mr. MORAN. OK. But——

Mr. DORNAN. I was briefed on it, Mr. Moran.

Mr. MORAN. But I would like to get a sense of the hundreds of thousands of people who have received HIV/AIDS training in the Federal Government, how many have found it objectionable? Do you have any estimate of that?

Mr. DORNAN. I don't, and I think that is why it is——

Mr. MORAN. I mean we have a handful of witnesses today, but if that is the total scope of those who find it objectionable, that is a pretty——

Mr. DORNAN. Well, I think what is enjoyable to consider is if the election on November 8th had gone the other way, we probably wouldn't be having these hearings at all. And innocent, decent people would be fired from their job. And that would be an outrage.

Mr. MORAN. Well, I don't know about that. I mean that's pure speculation on your part.

Mr. DORNAN. It is.

Mr. MORAN. Can you tell us what individual or organization provided the training to the Defense Department that you referred to, they had a slide show covering sex toys and flavored condoms, so on, what organization was that that provided that slide show?

Mr. DORNAN. The Department of Defense, I am happy to say, has not been subjected to the same types of briefings as have the civilian Federal workers. That is what I said was so frustrating and also why I am testifying here today, is I would have had hearings under the Military Personnel Subcommittee as chairman, but it appears that there is better discipline and control among the uniform supervisors in Department of Defense. It is the civilian workers in the Defense Department that think I am a chairman over them and I am not.

Mr. MORAN. Well, your testimony said a Defense Department worker said her class included a slide show of sex toys and flavored condoms. I am trying to find out who did that.

Mr. DORNAN. She is a civilian worker. I have her name. I will be glad to show you that letter in private, Mr. Moran.

Mr. MORAN. But who provided the training? That's what we're trying to get at.

Mr. DORNAN. She didn't go into that much depth. That is why this committee is holding these terrific hearings.

Mr. MORAN. Well, wait a minute. Certainly if we are going to come out publicly, I read about this stuff in the paper, it is on television, there is a big formal hearing here, clearly you looked into it to make sure that that was accurate.

Mr. DORNAN. Oh, I did. I had a Reserve Marine major call me from a building not 800 yards from here, the Department of Transportation, that said he was getting on his e-mail screen all of these invites to Lesbian Pride briefings.

Mr. MORAN. Wait a minute, I'm trying to get at——

Mr. DORNAN. That was the first warning on that radar.

Mr. MORAN. We have had conversations before, Bob, and I leave you and I never know what exactly the answer was to the question I asked sometimes. I'm going to try to——

Mr. DORNAN. It is just something wrong with the input, Mr. Moran. As I told you about your——

Mr. MORAN. That may be, so let me——

Mr. DORNAN. As I told you about your priest who died of AIDS for a moment of thrill, he might still be alive.

Mr. MORAN. What?

Mr. DORNAN. Yes, because I didn't track you, I didn't know why you brought up a former priest who came to work for you, who then people shook his hands and then all of a sudden you said he died. Well, maybe if he lived his life normally, he wouldn't have died.

Mr. MORAN. People shook his hands after he contracted AIDS.

Mr. DORNAN. As I shake hands with anybody who has AIDS.

Mr. MORAN. And you don't know that he died from sexual activity or from——

Mr. DORNAN. No, he might have had a heart transplant, gotten polluted blood.

Mr. MORAN. He could have had a blood transfusion, too. You made that assumption and to suggest that a former priest be for a moment, you know, just a momentary lapse and died of AIDS, that's a pretty stupid——

Mr. DORNAN. I was just showing that I didn't track your statements sometimes.

Mr. MORAN. All right. Can you tell us what individual or organization provided the training to the Army Corps of Engineers employee that complained to you?

Mr. DORNAN. Again, am I having trouble here? You handle the civilian employees. I handle the men and women in uniform.

Mr. MORAN. Well, you made these accusations. We have a formal hearing on television. I want to find out who did it.

Mr. DORNAN. I've got their letters here. They came to me and I'm giving the information to you.

Mr. MORAN. Who provided the—I'm not interested in the employees as much as the organization that provided the training, if they were paid for with taxpayers money. You said in your testimony an employee of the U.S. Army Corps of Engineers wrote in a letter to me talking about stuff I don't even want to repeat but you said it in your testimony. What organization provided that training?

Mr. DORNAN. Guess what, Mr. Moran?

Mr. MORAN. What?

Mr. DORNAN. Your excellent chairman is going to find that out in these hearings and tell you all about it.

Mr. MORAN. So you are making these accusations without finding it out yourself, without knowing even whether the information you were given is accurate? Is that the case?

Mr. DORNAN. Read my lips. That is your job, Congressman.

Mr. MORAN. No, it's your job to make sure that you don't make accusations that——

Mr. DORNAN. I verified this is a real person. All this mail is real. Do your job.

Mr. MORAN. How about the organization that provided the training to the Bureau of Reclamation employee, do you know who that was?

Mr. DORNAN. I am going to find out through your committee's hearings, and I am looking forward to it.

Mr. MORAN. Where was the value survey that you spoke of in your testimony administered to the trainers, where was the value survey administered?

Mr. DORNAN. I assume here in Washington, but I am going to find that out through the excellent investigating of your committee. Mr. Burton will tell me or Mrs. Morella, when she finds out.

Mr. MORAN. You suggested that if we're going to have training on HIV/AIDS, that we ought to have training on heart disease and cancer, because they are the No. 1 and No. 2 killers. Would you admit that there is a difference in the fact that HIV/AIDS can be infectious, whereas cancer and heart disease not, would you recognize that there is a difference?

Mr. DORNAN. Of course, but just as we have nutrition training in some Federal agencies, everything that increases the health of our Federal workers or workers in U.S. industry is good and can be part of on the work education and increase the work value of our work force in America, to keep them healthy. I am looking forward to these hearings, I'm going to learn a lot from these hearings.

Mr. BASS. Thank you very much, Congressman Dornan, and we'll probably hear more about this when OPM testifies because they're responsible for organizing these.

The Chair now recognizes the gentleman from Indiana, Mr. Burton, for 5 minutes.

Mr. BURTON. I won't take 5 minutes, I don't believe, Mr. Chairman.

I would just like to ask my good friend from California about the information that might be given out in the form of pamphlets to people telling them about how they can contract AIDS and the dangers of it. Some of the information that I have seen, in particular the information that was sent out by Dr. Koop, didn't jibe with some of the recommendations that have been made by other doctors and scientists.

For instance, and I'd just like to have your opinion on this, according to the information I have, there are 230 million AIDS viruses that will fit on a period at the end of a sentence. And it is in every bodily fluid. And that includes perspiration, saliva, blood, and all body——

Mr. DORNAN. Tears.

Mr. BURTON. Tears. And since there is a divergence of opinion among some scientists about transmission, shouldn't pamphlets illuminate those differences and say that if there are to be errors made, they should be made on the side of safety?

Mr. DORNAN. Well, I was one of those who circulated the letter. I think we only got about 55 signatures, to get Dr. Koop that appointment. It was a tough fight. And he disappointed me on some things, but I must defend him and say he was trying.

The body of knowledge on how you contracted the HIV virus was changing rapidly. The jury is still out on the No. 1 drug to help people, AZT.

It's not a scientific survey, but all of the famous people who are on it appear to have their health collapse more quickly, and there are people I see appear on television have been HIV positive for over 10, 12 years, that said it is because they don't take AZT. But none of us is qualified to see what is happening with that.

Maybe there is another subcommittee that can investigate it. But yes, the pamphlets should project the absolute state-of-the-art information. Maybe including the greatest mystery that they've told me about at the Louis Pasteur Clinic in Paris, I went personally, to the World Health Organization in Geneva, I went personally, the Pan-American Health Organization here, now the Centers for Disease Control in the Speaker's district, and up to NIH, and I think I'm the only Congressman that's been to all five of those places, that was true a year ago.

They tell me that everything is back to square one. It is very depressing. The search for a cure is a serious thing to mislead people. I've been told there never ever will be a cure, that it is a vaccine we're looking for, and they're back to square one. And the greatest mystery now in all these places is there appears to be people that have AIDS who didn't test positive on HIV.

Mr. BURTON. I guess the point I'd like to make is that I have no problem with informational pamphlets given to all Federal employees or anybody in the country talking about the dangers of AIDS and how AIDS is transmitted. But where there is doubt, where there are unanswered questions about how pervasive it is and how widespread it is and how it can be transmitted, it seems to me that we should give the widest latitude in the pamphlet to modes of transmission so people can protect themselves.

The Lancet and other publications I have seen have published articles saying that it has been transmitted through saliva, it has been transmitted through sweat or perspiration, and if that is the case, then even though it is a remote possibility, it is a possibility. And I think that employees who are going to be given pamphlets should know that leading medical publications, journals, around the world, do have a divergence of opinion, and that they ought to take the greatest measures possible to protect themselves.

And I think that should be in these pamphlets.

Mr. DORNAN. You're absolutely correct. Under my purview as a chairman, the HIV cases that we have in the military, most of them come from drug use, illegal drug use, that means they're violating the Uniformed Code of Military Justice, or young men allowed to go to houses of prostitution in Thailand and the Philippines before we were out of Subic.

I had a long argument with an admiral about why they let—why they use these places as ports of call for liberty. And he said, Congressman, boys will be boys.

I said what an ignorant line, you ought to go tell that to Pat Schroeder. I said haven't you realized that that line is not effective any more? He said, well, we give them all the condoms we can. And here is what should be in every condom pamphlet, should be taught across the Federal Government.

I said, admiral, how effective is a condom after the user has had 10 beers and liberty at the bar down the street, or 5 beers? How is his digital dexterity at that point? Oh, it is a tough world, isn't it, Congressman.

No, we've got a lot of tough decisions to make, and I hope you have good hearings here, because the pamphlet should be maybe longer, comprehensive, and a pamphlet is not worth anything if it doesn't discuss the Russian roulette involved with this No. 1 disease for young people if it doesn't discuss abstinence.

Mr. BURTON. I thank you, Mr. Chairman.

I yield back the balance of my time.

Mr. BASS. Thank you very much, Mr. Burton.

The Chair recognizes the gentleman from Pennsylvania, Mr. Mascara, for 5 minutes.

Mr. MASCARA. Thank you very much, Mr. Chairman.

We all agree that we have a problem. I'm going to be less combative.

Mr. DORNAN. All right.

Mr. MASCARA. But this is my hero.

Mr. MORAN. That's kind of disappointing.

Mr. DORNAN. We're friendly in the halls.

Mr. MASCARA. I have respect for my colleague, Mr. Moran, and I'm learning every day from Mr. Moran. But we all agree we have a problem. We all agree we need to do something about it.

We can't agree on how we should approach this problem. But I think we all agree that there is a cost associated with it.

And in my former life as an accountant, I would like to ask can someone put a number on what it is costing the Federal Government to participate in this training? Does anyone know that number?

I don't expect you to.

Mr. DORNAN. No, no, that's a great question. This hearing is costing taxpayers' dollars. And as I've learned listening to my liberal colleagues on the House floor, when they are absolutely correct on, say, anti-Semitism or racism, if there is only one class being taught at a college, just one that is bigoted and offensive, then all Federal aid should be cutoff until that one teacher or that one class is stopped.

So the numbers are important, the money is important, but if people are getting fired over conscience issues or this whole program is adrift, then it is up to us in the Congress to correct it. But I hope this subcommittee can find out what the cost factor is here in all this teaching.

Maybe a pamphlet would be more effective with a feedback in areas where there is some hurt because people don't understand this terrible killing and heartbreaking problem.

Mr. MASCARA. Well, but we still don't know, really know, what the cost is that is associated with the training?

Mr. DORNAN. No, and Mr. Mascara, I'm not diverting anyone here, but there is a related scandal that went on at the Transportation Department with our tower operators. I mean, a 30,000-year old Cro-Magnon warrior named Ramfa being used in training sessions for our tower operators?

One of the colleagues on your side of the aisle lately has taken to saying "beam me up", meaning what is this madness? So there is training sessions that went askew, and nobody had to give back the hundreds of thousands of dollars of outside consultant money to teach this garbage, with fear and threat of firing or no promotion if they didn't sit there and listen to that idiocy.

And that's in the same building down the street that this Reserve Marine major, an H–35C Stallion pilot, told me he's not going to take this diversity propaganda on his e-mail screen. So they cut-off his e-mail. He's still winning his battle, by the way, by coming to Congressmen and getting a little support so he wouldn't be fired.

Mr. MASCARA. So we really do not know?

Mr. DORNAN. No. I repeat, I hope you're going to get that information. And if you don't give it to me, Mr. Burton will. How much is all this costing? Great question.

Mr. MASCARA. I've heard all of these horror stories, and I'm familiar with them. But since I've been here since January 4, we're all talking about how can we cut, how can we save, we're wasting money, and we're attempting to solve a problem, I understand that and that's important to me.

But in this day and age when we're talking about savings and costs and cutting the size of government, I think we all need to know and somebody in this government should be able to tell us what it costs to do what we do that's so offensive.

Mr. DORNAN. I agree. And if it involves people dying, I know we'll find the money to educate in the right way. But these people, these are real people, suffering real offenses, they have real grievances, and that's one of the focuses.

I'm sure the chairman will also find out what it is costing us so we can factor it into our shrinking budget.

Mr. MASCARA. I have one other question, Mr. Chairman. What kind of support do you have for your bill that would prohibit us from spending money or banning us from spending money?

Mr. DORNAN. Oh, I don't have a bill yet. I am going to leave that to you. I am taking care of it on my end in the defense authorization bill.

And where I tried to save millions and millions of dollars because they can't do anything that they do in the military, is I've given an honorable discharge and the prospect of the exact same medical care being shifted from defense dollars to veterans affairs dollars, staying in the same hospital with the same doctors, and I in no way encouraged anybody to look at discharging any Federal civilian worker who has HIV, has tested HIV positive.

But in the military, they can't fly, they can't shoot, they can't go in an army fighting vehicle, they can't go in a submarine, a helicopter, a plane, they can't carry a side arm, they can't be an instructor on the firing range, and we have to fire healthy people to give them a safe job and in the Navy and Marine Corps they can only serve in few States, California and Virginia.

With civilians in the Defense Department or anywhere else, that's not true, so I have taken a strict focus on what I did with my bill and it passed subcommittee, the full committee and the floor, and I understand that the chairman of Military Personnel, our former colleague, Dan Coats, is putting it in over there. So that

seems to be a done deal. But that was my piece of the action to save millions of dollars and not to put out of the service healthy, deployable, combat-ready people to over-politically correct a situation with about 1,300 people in the military who are HIV positive.

In the Federal workplace, for civilians, I'd say treat them with respect. If you get violations or instances of ignorance and prejudice toward them, fine, take care of that by the supervisors. But we're going to find out, Mr. Mascara, although I know Mr. Mica will, how much is all this costing and what are we going to do to protect people's lives and dignity who don't want to go to a seminar that is offending their basic core values.

Mr. MICA. I thank you, Mr. Dornan.

Mr. MASCARA. Mr. Chairman, I have just one more.

Mr. MORAN. Frank's going to try to get the answer.

Mr. DORNAN. No, he's going to give me the answer.

Mr. MICA. We have three more panels.

Mr. MASCARA. I promised to be less combative than Mr. Moran and my question to you concerning whether or not there was a piece of legislation or a bill, you said none.

And I have a copy of H.R. 862. Could you explain how that interfaces, if it does at all, with the subject matter that we're entertaining here today? That's the prohibition on—this is H.R. 862—the Prohibition on Use of Federal Funds To Promote Homosexuality. Is that somehow tied in with what we're discussing here today?

Mr. DORNAN. Oh, no, no, no. That's the problem that you can see in the lobby of the Interior Department building. It is related, but it comes under the broader heading of the hidden agenda in pushing so-called diversity.

But, no, I wouldn't say that was related here. And I might observe something, Mr. Mascara, and Mr. Moran, too, sometimes somebody will say what's the theory of relativity? And you'll say, basically E equals MC squared, and their response will be, duh, answer my question. Sometimes you answer questions, and people just don't get it, to use that overworked phrase.

Mr. MICA. I thank the gentleman for his question.

Mr. Dornan, we have also Mr. Gilman.

The gentleman from New York is recognized.

Mr. GILMAN. Our very distinguished panelist, Mr. Dornan, from reviewing your testimony and your comments, if the materials were properly prepared and presented, you'd have no objection then to presenting this kind of training to Federal workers? Is that correct?

Mr. DORNAN. None. But I would also ask—I wouldn't object to it coming first, but I would also want to know what other programs do you have to save lives. Drunk driving programs, marital counseling, because our family breakup rate is shredding the whole fabric of our society, what other programs do you have? Is this one getting special treatment because it takes your breath away to look at some of the agendas out of this White House? I'm wondering, everybody is wondering what's going on. It is reflected in all my mail here.

Mr. BURTON. Would the gentleman yield?

Mr. GILMAN. Yes, be pleased to yield to the gentleman.

Mr. BURTON. I want to reiterate one thing I said. I think it is extremely important if we give out informational pamphlets, that

where there are questions that are unanswered, where lives might be jeopardized, where transmission is possible, that the pamphlet explain that these questions remain unanswered.

For instance, can you get it by kissing, can you get it through sweat, so forth and that sort of thing. And if that is the case, then I think an informational pamphlet ought to say that these questions do remain unanswered or that is a divergence of opinion on them, and because of that the person reading the pamphlet should take the widest possible measures to protect themselves. If you give them false or misleading information or inaccurate information, you really at some point might be jeopardizing somebody's life or health and safety.

And that's why I think it is important if we give out informational pamphlets, that's the only problem I have with Dr. Koop's pamphlet, is that it gave hard and fast answers where there still was a divergence of opinion among the scientific community.

Mr. DORNAN. We could not pass out Koop's pamphlet today, you're correct.

Mr. BURTON. So I think it is really important that if we're going to do a pamphlet, that where there is some difference of opinion, where there are some unanswered questions, we leave them unanswered and let people know to take protective measures. And I thank the gentleman for yielding.

Mr. DORNAN. We probably at some point should have a panel, maybe this is not the appropriate subcommittee, of Dr. Tony Fauci and some of the excellent people who have become friends of mine at the National Institutes for Health, and give them the pamphlet, sitting in front of a House committee or Senate committee and say is this pamphlet accurate, or is there misinformation or a lack of information that can cause people to die. Yes, we're dealing with life and death issues here, and this material should be precise and accurate.

Mr. GILMAN. Well, just so we're clear, all of us here on the panel, you have no objection to properly prepared information and distribution; is that correct?

Mr. DORNAN. None whatsoever.

Mr. GILMAN. Thank you. Thank you, Mr. Chairman.

Mr. MICA. Well, I thank the gentleman from New York.

I also thank Mr. Dornan. Mr. Dornan, this again is the pamphlet that I referred to, and I don't know the answer to the question, that's one reason we held this hearing, but on page 14, it talks about AIDS presentation and safer sex seminars and says "Wet, Wild and Well: Lesbian Safer Sex" and a 202 number. And I'm just wondering again if this is a part of their curriculum of this training in the Department of Defense. And you chair one of the subcommittees and I hope that we can find out how taxpayer dollars are being spent on some of these promotions.

Mr. DORNAN. I looked into this during the break, Mr. Chairman. And again, all of the people who wrote to me, most of them I had to refer to your subcommittee because they were civilian Federal workers.

And that pamphlet came up, but to my knowledge, and maybe we'll find out if this is televised or written about extensively, to my knowledge that stronger leadership in the military services under

DOD, they have not allowed that pamphlet to be circulated, to my knowledge. I may be wrong.

Mr. MICA. Well, we'll look further into that, and I hope you will, as chair of another subcommittee. We thank you for your testimony and participation today.

I'd like to excuse you now and call our second panel, if I may. First, we have Trudy Hutchens, Concerned Women of America. We have Thomas J. Herron, a Federal employee. We have Lyn Mickley, also a Federal employee. We have Robert Maginnis, from the Family Research Council. If you would come up and please stand to be sworn in.

Other than Members of Congress, it is the custom of this committee, which is an investigations and oversight committee of the House, and of this subcommittee to swear in our witnesses. So if you could remain standing, raise your right hands.

[Witnesses sworn].

Mr. MICA. Let the record reflect that the witnesses answered in the affirmative. And I'd like to call our first panelist, Trudy Hutchens, who is with the Concerned Women of America and, I understand, has done some extensive research on the question of Federal training relating to AIDS.

So welcome to the panel and Ms. Hutchens, you are recognized for 5 minutes.

And also, if you have written testimony, it will be made part of the record. If you can, summarize, because we do have three more panels and each of them are chuck-full of witnesses, but again, we welcome you and hope you can summarize in the 5 minutes.

Ms. Hutchens.

STATEMENTS OF TRUDY HUTCHENS, CONCERNED WOMEN OF AMERICA; THOMAS J. HERRON, FEDERAL EMPLOYEE; LYN MICKLEY, FEDERAL EMPLOYEE; ROBERT MAGINNIS, FAMILY RESEARCH COUNCIL

Ms. HUTCHENS. Mr. Chairman, members of the subcommittee, thank you for the opportunity to address you here today. My name is Trudy Hutchens and I am the research specialist for Concerned Women for America. I'm here today to testify on behalf of Beverly LaHaye, president of Concerned Women for America, and our 600,000 members nationwide.

Last year, President Clinton mandated that all Federal workers undergo AIDS training. Ostensibly his goal was to help prevent the spread of AIDS and to develop nondiscriminatory workplace policies for employees living with AIDS.

If the White House had stayed true to its stated goals, the program would have generated little controversy. Unfortunately, the mandate became a vehicle for activists to push acceptance of homosexuality on each and every Federal worker. I have spent months investigating this mandate and how it is being implemented.

While a few Government offices actually stuck to the stated goals, many other agencies used the mandate as a platform to discuss everything from flavored condoms to sex toys. On April 17, I attended an AIDS training class for FDIC employees.

Let me begin by sharing the high points of my own experience at the FDIC is training. Early in the class, the instructor presented

the information on how HIV is transmitted. However, the instructor quickly proceeded beyond information and into application.

He asked the class what would qualify as a nonrisky sexual activity. Masturbation was the first item listed on the overhead projector. The instructor continued by making jokes about phone sex being a nonrisky activity.

The instructor then proceeded to cover "somewhat risky" and "risky" sex activities. The discussion included topics like anal sex, exchanging sex toys, and oral-anal contact.

The entire 2 hour class was littered with the instructor's off-color jokes ranging from everything from condoms to bizarre lubricants. Clearly, this class did more to embarrass and perhaps desensitize workers than to effectively and efficiently educate them about AIDS.

The White House gave the agencies the option of either contracting organizations to come in and perform the training or recruiting volunteers from within the office to lead the seminars.

The Department of Agriculture opted for the latter. I received a copy of the Agriculture Department's "Train the Trainer" notebook. According to the facilitator's guide, volunteers for leadership must undergo a 4-day training seminar in order to become certified instructors. One of the exercises each volunteer must complete during the training is a values worksheet.

The survey asks participants how they feel about such issues as sex without love, love without sex, homosexuality for other people, and homosexuality for my child. It is not clear how much this—how much influence this values worksheet has on the volunteer's overall score, but regardless, the Department of Agriculture has no business probing employees about their beliefs on these subjects.

The Department of Agriculture goes out of its way to keep instructors from offending certain groups. It gives them a style guide which designates 23 terms they should avoid using. For example, the guide directs instructors never to use the term promiscuous, because that implies an inappropriate moral overtone. They should not refer to drug users as addicts, because such terms imply a judgmental attitude.

In other words, instructors should never use terminology that might make those living high risk life-styles uncomfortable. On the other hand, not a second thought is given to the sensibilities of those who hold traditional values.

Moreover, these classes refuse to discourage risky behavior. Instead of encouraging drug rehabilitation, the Centers for Disease Control manual urges drug abusers to use one's own injection equipment, or disinfect others with bleach.

The Department of Agriculture's trainer's handbook specifically coaches instructors on how to break down audience resistance. The document states that this resistance usually comes from religious beliefs or biases and prejudices. The trainer's handbook provides a list of labels for people who dare to challenge the curriculum. Trainers are further coached on how to avoid engaging those who do challenge them. They are effectively taught to limit or eliminate the challenger's opportunity to speak.

In conclusion, I have a hard time seeing how this program enhances the effectiveness or efficiency of the Federal workplace. The

administration is concerned—if the administration is concerned about educating Federal workers on AIDS, a one-page handout or a brochure that tells how AIDS is or is not transmitted would have been sufficient.

But this training is about more than education. It is about changing attitudes, as the White House guideline so blatantly states. As a result, it is imperative that Congress take action to more narrowly define what is appropriate for workplace training, and it is crucial that Congress establish some sort of accountability system so that these programs are monitored and don't again become a bully pulpit for activists pushing anti-family policies.

Thank you.

[Note.—The attachments to Ms. Hutchens prepared statement can be found in subcommittee files.]

[The prepared statement of Ms. Hutchens follows:]

Testimony of Trudy Hutchens
Research Specialist
Concerned Women for America
to The Subcommittee on Civil Service
of The Government Reform and Oversight Committee
United States House of Representatives
June 22, 1995

Mr. Chairman, Members of the Committee, thank you for the opportunity to address you today. My name is Trudy Hutchens and I am Research Specialist for Concerned Women for America. I am here today to testify on behalf of Beverly LaHaye, President of Concerned Women for America and our 600,000 members nationwide. Last year, President Clinton mandated that all federal workers undergo AIDS training. Ostensibly, his goal was to help prevent the spread of AIDS and to develop "non-discriminatory workplace policies for employees living with AIDS."

If the White House had stayed true to its stated goals, the program would have generated little controversy. Unfortunately, the mandate became a vehicle for activists to push acceptance of homosexuality on each and every federal worker.

I have spent months investigating this mandate and how it is being implemented. The agencies were given a certain amount of freedom in how they met the AIDS training requirements. While a few government offices actually stuck to the stated goals, many other agencies used the mandate as a platform to discuss everything from flavored condoms to sex toys. I have received phone calls from federal workers all over the country who were offended by these classes they were forced to sit through.

On April 17, I attended an AIDS training class for FDIC employees. What I experienced in that class was in-line with everything federal workers had reported to me.

AIDS Training at FDIC

Let me begin by sharing the high points of my own experience in the FDIC's AIDS education seminar. When I learned the class would be taught by the American Red Cross, I honestly thought it might prove to be one of the more innocuous versions of Federal AIDS Training. I was wrong.

Early in the class, the instructor covered information about how HIV is transmitted. He emphasized over and over again that HIV is transmitted through blood, semen, vaginal fluids, and breast milk. At that point, the class could have

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adjourned and the President's primary goal would have been met. However, the instructor proceeded beyond information and into application. He asked the class what would qualify as "non-risky" sexual activity? Masturbation was the first item listed on the overhead projector. The instructor continued by making jokes about phone sex being a "non-risky" activity.

The instructor then proceeded to cover "somewhat risky" and "risky" sex activities. The discussion included topics like "anal sex," "exchanging sex toys," and "oral-anal contact."

The entire two-hour class was littered with the instructor's off-color jokes ranging from anything from condoms to bizarre lubricants. I fail to see how these discussions are crucial to the federal workplace. Clearly, this class did more to embarrass and perhaps desensitize workers than to effectively and efficiently educate them about AIDS.

Implementing the Program

As I mentioned earlier, training varied from agency to agency. The White House gave the agencies the option of either contracting organizations to come in and perform the training or recruiting volunteers from within the office to lead the seminars. The Department of Agriculture opted for the latter.

I received a copy of the Agriculture Department's "Train the Trainer" notebook. The manual raised several disturbing issues. **The Facilitator's Guide** explains how the department selects its trainers. Volunteers for leadership must undergo a four-day training seminar in order to become "certified instructors." One of the exercises each volunteer must complete during the training is a worksheet titled "Values About HIV/AIDS-Related Issues." This survey probes into a person's deepest feelings about sex and homosexuality. It asks participants how they feel about such issues as **sex without love, love without sex, homosexuality for other people**, and **homosexuality for my child**. (See Appendix #1.)

After completing the survey, participants are to discuss their answers with another person and then with the entire class. They are also invited to change their answers as they change their minds.

At the end of the 4-day training seminar, the participants are given a score based on: peer feedback, self assessment, trainer feedback, and performance on pre- and post-assessment. Volunteers cannot become a "lead trainer" unless they are awarded a score between 90 and 100 percent. If they score between 80 and 89 percent, they are allowed to be a co-trainer. And if they score less than 80 percent they are eligible only to be an assistant trainer. Assistant trainers can only present courses with a lead trainer. It is not clear how much influence the "Values Worksheet" has on the overall score, but regardless, the Department of Agriculture has no business probing employees about their beliefs on these subjects.

Non-Judgmental Attitudes

The Department of Agriculture's "Train the Trainer" notebook spends a lot of time focusing on instructors' attitudes. Instructors must be careful not to offend

certain groups. Within the first page of the **Trainer's Script**, (See Appendix #2, p.1) the instructor is coached to "point out that it is sexual and drug use activities that transmit the virus without regard to gender and that sharing infected body fluids, not sexual orientation or identification with any group, leads to transmission. Note that for this reason, we avoid referring to 'high risk groups.'" The Department of Energy's trainers manual called "Walkin' the Talk" (See Appendix #3, p.TEXT-1) states this same sentiment almost verbatim. But homosexuals and drug abusers are groups who are defined by their behaviors; and those behaviors transmit AIDS. So even though homosexual males account for 57 percent of all AIDS cases in the U.S. and IV drug abusers account for another 23 percent, trainers are forbidden from referring to either as a "high risk group."

Further illustrating the great lengths trainers must go to in order to avoid insensitivity, the Department of Agriculture provides instructors with an **HIV/AIDS Style Guide** (See Appendix #4), which designates 23 terms they should avoid using. For example, the guide directs instructors never to use the term "promiscuous" because that "implies an inappropriate moral overtone." Instead they should say, "multiple sex partners." And they should not refer to drug "addicts" because such terms imply "a judgmental attitude, which is not appropriate."

In other words, instructors should never use terminology that might make those living high-risk lifestyles uncomfortable. On the other hand, not a second thought is given to the sensibilities of those who hold traditional values.

Embracing Homosexuality

Some facilitators also promote radical homosexual organizations in the AIDS training. The director of the Department of Agriculture's AIDS education program said she likes to provide a **Directory of HIV/AIDS-Related Services** (See Appendix #5) to all personnel undergoing the training. Listed in this document are such radical pro-homosexual groups as Whitman-Walker (listed 14 times), the Sexual Minority Youth Assistance League (SMYAL), and the AIDS Coalition to Unleash Power (ACT-UP). Whitman-Walker is a medical and counseling facility that readily promotes homosexuality, regularly advertising in Washington, D.C.'s homosexual newspaper, the *Washington Blade*. In fact, Whitman-Walker has been contracted to perform the AIDS training at a number of federal agencies. SMYAL is a homosexual youth organization, advancing the homosexual agenda among teens. It's difficult to find a group more radical than ACT-UP. This group has been known to give high school kids "safe sex" kits that explicitly coaches them on how to perform homosexual sex acts.

Some of the organizations listed provide such AIDS services as "condom availability." AIDS expert and president of Americans for a Sound AIDS Policy (ASAP), Shepherd Smith, reports that perhaps the biggest misconception about AIDS is the idea that condoms will end the epidemic. Still these organizations dispense thousands, all under the banner of "AIDS prevention."

The radical agenda is not limited to the Department of Agriculture. The Department of Energy's trainers manual titled "Walking the Talk" (See Appendix #3,

P. TEXT-7) could be accused of using homosexual terminology. It uses the term "serial monogamy" and defines it as "an exclusive sexual relationship with one individual at a time." It goes on to explain: "Practicing serial monogamy **and therefore having several sexual partners**, even over an extended period of time, may place one at risk ..." (emphasis ours). The definition of "serial monogamy" bears a striking resemblance to the definition of "monogamy" in the homosexual book, *The New Joy of Gay Sex*, which reads:

> "Monogamy means that two people have declared themselves lovers--an intimate emotional and sexual relationship... [it] can include **sexual adventures outside the relationship**." (emphasis ours).

The concept of monogamy traditionally consisted of moral commitment, not convenient compromise. Yet the federal government is now championing this progressive definition as a part of a new morality it is preaching under the guise of AIDS education.

Masturbation and Drug Use

Some of the manuals produced by other agencies actually promote masturbation and drug use. The Centers for Disease Control has published a participant's manual for use in AIDS training of federal workers. (See Appendix #6, p. 19.) The document, titled "HIV/AIDS At Work," urges participants to "avoid blood and body fluid exposure" through "non-insertive sexual activity (masturbation, massage, etc.)" Moreover, instead of encouraging drug rehabilitation, this document urges drug abusers to use "one's own injection equipment or disinfect [other's] with bleach."

A Captive Audience

The White House issued guidelines to direct the agencies in how to implement the program. (See Appendix 7.) Page #2 of the guidelines clearly states that the administration required each and every federal worker to undergo the training. It reads: "HIV/AIDS workplace training is mandatory for every federal employee." However, after the *Washington Times* reported on the story on March 29, the White House Office of National AIDS Policy (ONAP) capitulated. In early April, the *Washington Times* followed up its story with a report that the White House had backed off the mandatory requirement. The article said that AIDS Policy Director Patricia Fleming now claimed that the initiative was never meant to be mandatory.

The Defense Department, along with many federal agencies, was understandably confused about the policy. It asked ONAP to clarify. Upon receiving a response, the Defense Department issued a memo stating: "According to ONAP, Ms. Fleming's reported remarks in a recent *Washington Times* article were 'taken out of context.'" The memo went on to say that the Defense Department "reissued guidance ... stating that the HIV/AIDS workplace training is to remain mandatory for employees of the Department of Defense."

In mid-May, the White House Office of National AIDS Policy struggled to further clarify its position. "The policy is the same as it has always been," Richard Sorian, a spokesman for the office, told the *Washington Times*. "Each agency is required to set up the training program, but employees are not required to attend." Apparently, the Department of Defense is taking a hard line on this. I received a phone call just last week from a civilian woman who worked at Hill Air Force Base. She said she had refused to undergo the training and was told she would receive a formal reprimand. She said that being reprimanded would likely harm her career advancement. She is not the only federal employee who faced a letter of reprimand. In Appendix #8, I've included a copy of a letter I received from a employee of the Bureau of Reclamation. He stated that all employees were threatened with a letter of reprimand if they refused to attend the training.

Breaking Down Resistance

In the Department of Agriculture's Train-the-Trainers program, one section of the trainers handbook, titled "Themes for Facilitation/Presentation Skills Discussion," (See Appendix #9) specifically coaches instructors on how to "break down audience resistance." The document says that this resistance usually comes from "religious beliefs" or "biases and prejudices."

The trainers handbook provides a list of labels for those who dare to challenge the curriculum. (See Appendix 10.) Among those listed is "The partisan" who "takes an intransigent point of view on controversial issues such as needle distribution, condom distribution in schools, etc." Also included is "The moralist" who believes "People who are HIV infected through sex or drug use deserve what they get!" and "The mule" who is "stuck on a position or point of view."

Trainers are effectively directed to avoid engaging those who challenge them. Recommendations include: "Summarizing and moving on; stating, 'Let's hear from some folks who haven't had a chance to speak on this topic'; or diffusing the interferer by enrolling him or her as an expert and calling on him or her only at specified times." In other words, limit or eliminate the challenger's opportunity to speak.

The goal of this whittling away at audience resistance is to meet the "attitudinal objectives" laid out in the guidelines. (See Appendix #7.) Objective #4 states: "Feel <u>less judgmental</u> toward persons who are chronically ill, including those living with or perceived to be living with HIV/AIDS (with respect to the presumed or known behaviors that resulted in their infection)." (Emphasis theirs.)

Objective #5 reads, "Experience little or no fear of interacting with employees who are chronically ill, including those living or perceived to be living with HIV/AIDS." And if personnel don't meet this objective, they will likely face "disciplinary action." A handout titled "Employee Rights: Managers' Checklist" (See Appendix #11) directs managers and supervisors on how to handle employee misconduct. The sheet reads, "Information and counseling should be offered first (followed by corrective/disciplinary action) to employees reluctant or unwilling to work with HIV-positive employees." That means employees who are apprehensive

about working with someone infected with HIV could feasibly face a black mark on their record which could haunt them for years to come.

Model for All Businesses?

The Clinton administration hopes this initiative will have a far-reaching impact on society. The White House's official guidelines for the project read, "The Federal Workplace HIV/AIDS Education Initiative will serve as a model for all businesses on how to provide employees the information they need to prevent infection with HIV ..." (See Appendix #7, p. 1.) Considering what's being taught to federal workers, this is a frightening thought.

Conclusion

In conclusion, after spending months researching the Federal Workplace AIDS Education Initiative and how it has been implemented, I have a hard time seeing how this program enhances the effectiveness or efficiency of the federal workplace. If the administration is concerned about educating federal workers on AIDS, a one-page handout or a brochure that told how AIDS is transmitted would have been sufficient. But this training is about more than education. It is about changing attitudes, as the White House guidelines so blatantly state.

Webster's Dictionary defines **indoctrinate** this way: "to imbue with a partisan or sectarian opinion, point of view, or principle." This program has been implemented in such a way that it does just that. It forces discussions of bizarre sexual activities on federal employees and expects them to accept the activities as if they are normal and acceptable.

It is truly a sad state of affairs when grown men and women cannot discern what is and is not appropriate to discuss in an employee training seminar. Unfortunately, that is exactly the state in which we find ourselves as we review this program today.

As a result, it is imperative that Congress take action to more narrowly define what is appropriate for workplace training. And it is crucial that Congress establish some sort of accountability system so that these programs are monitored and don't again become a bully pulpit for activists pushing anti-family policies.

Responses to Rep. Jim Moran's Questions

QUESTION: Your statement indicates that your organization received calls from federal workers from all over America about AIDS/HIV training. What led these employees to call your organization?

Initially, calls came from CWA members who are also federal workers; therefore they were required to attend the AIDS training. Knowing that we monitor these issues, many of our members took the initiative to call and write us about how this AIDS training is being misused. As a result, we investigated the program and how it is being implemented. After we broke the story in our *Family Voice* magazine and began talking about it on the radio, calls flooded into our office from federal workers who were offended by what they were forced to sit through. Most would not reveal their names because they feared it would negatively impact their careers, but they wanted the truth to be told.

QUESTION: How did you gain access to the FDIC training course? Are you an FDIC employee?

I am not an FDIC employee. After hearing me discuss the subject on the radio, an FDIC employee called me saying he was scheduled to attend the AIDS training on April 17, and he asked if I would join him. This provided the ideal opportunity to get a first-hand account of what was being taught, so I accepted.

QUESTION: Did you ever attempt to convey your concerns about the FDIC program directly to either the trainer or officials at the FDIC?

Since I am not an employee at the FDIC and because I knew abuse of this program was not limited to this one occasion, contacting FDIC officials about the offensive nature of the training would have been pointless. However, the *Washington Times* article that exposed the AIDS training classes apparently caused a stir at the FDIC. In response to employee concerns about the nature of the training, an e-mail went out to FDIC employees assuring them that their training would not be offensive. The e-mail stated that the training would be "workplace specific." As my testimony shows, the training violated both of these assurances.

QUESTION: How did you obtain copies of the Training Facilitators Guides used by the Agriculture and Energy Departments?

The Department of Energy manuals were sent to me by a CWA member who works at that department. The Department of Agriculture manuals were a part of their train-the-trainers notebook which I obtained from the department's AIDS Specialist Betty J. Thomas. I received other department-specific information when I sent out a series of letters to the various departments asking how the AIDS education initiative was being implemented in the respective agencies.

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Mr. MICA. Thank you for your testimony. And I'm going to turn now to Mr. Robert Maginnis, from the Family Research Council, another organization that has looked into this matter.

Mr. Maginnis.

Mr. MAGINNIS. Thank you, Mr. Chairman.

Mr. Chairman, members of the subcommittee, it's a pleasure to address you today concerning the administration's AIDS training program.

My name is Bob Maginnis and I have a quarter century of training experience as an Army colonel. President Clinton announced on September 30, 1993, to all heads of executive departments, his HIV/AIDS policy. The policy requires each Secretary to designate a senior staff member to implement HIV/AIDS training programs and to develop workplace policies for employees with HIV and AIDS. The training has received a mixed review.

Some Federal employees have called the Family Research Council to complain that they found the training offensive. Others have said it was relatively benign.

Now, the administration's AIDS awareness training has numerous problems in my opinion. It does not reduce the risk of contracting HIV, and it merely recites the provisions outlined in the Americans with Disabilities Act as well as the Federal Rehabilitation Act of 1993—or 1973, rather.

The training duplicates other Federal AIDS education programs and it has been used to promote homosexuality.

You asked me to address four specific questions. No. 1, does the training meet the statutory objective? The governing statute defines training as the process of providing for and making available to an employee information which will improve individual and organizational performance and assist in achieving the agency's mission and performance goals. It remains a mystery, though, to me, as to how this training meets this objective.

The Government's publications provide little help. For example, the Treasury Department's AIDS awareness booklet quotes President Clinton. It says, "We need to set an example."

And what is that example, I ask? In a session I attended, the Agriculture Department outlined its training goal. I heard, the goals are to shatter the myths about AIDS, explain how to treat people with AIDS, to encourage employees to keep an open mind to better understand AIDS, and to emphasize that AIDS is difficult to contract. There was no attempt to link the agency's mission and goals with the training.

While Agriculture's AIDS goals could also be made for cancer or heart disease, which kill many more Americans every year, the Federal Government doesn't mandate 3 hours of training to prevent these diseases. In fact, Federal Government-sponsored AIDS awareness training may have been a good idea back in 1987, but after spending $500 million per year on AIDS education for many years, the Clinton administration's program appears to be a total waste of taxpayer money.

Conservative estimates of the cost to the taxpayer of the administration's program are somewhere between $80 and $100 million in lost productivity, material and fees. Congress should demand a full accounting of that.

The administration's AIDS program focuses almost exclusively on awareness and has little impact on behavior change. Since HIV is contracted through behavior and not from breathing bad air, training that ignores diagnosis and fails to contribute to behavior modification will have minimal impact.

Second, what have Federal civil servants told me about the training? I've heard from civil servants throughout the Nation. They complain that the training was offensive, a big joke, a waste of time, and it promoted homosexuality. Most objected that the training was mandatory, and those who protested were threatened with adverse personnel actions.

The training includes a brief history of HIV, symptoms, and some emphasis on prevention and risk reduction. There is a discussion of needle sharing and sexual contact. Federal employees were told to reduce their HIV contraction risk by practicing safer sex by using barriers like condoms, dental dams, plastic wrap, and latex gloves. An employee manual states the following, "A dental dam or plastic wrap may be used for oral, vaginal, or oral anal contact. All types of barriers are effective against HIV transmission only if they are used correctly and consistently from start to finish."

One employee labeled the training as a glorified high school sex education class with sensitivity training on the side. Others objected to the graphic explanations of sexual activities.

Third, what kind of AIDS training is appropriate for the Federal workplace? The Federal Government spends billions of dollars each year on AIDS research, education and treatment. Much of that money is wasted because it fails to involve diagnosis. If the Government wants to impact the epidemic in the workplace, it must link HIV diagnosis with followup counseling and training.

Such a program would be less expensive than the administration's program and far more productive. For example, an AIDS test now costs the Defense Department $2.49. The Federal Government could test the at risk civil servants and then with the results in hand, provide confidential followup counseling and training. Limiting the spread of the virus through behavior reinforcement or modification should be a top priority. A test-linked program is the only meaningful type of training that will help arrest the epidemic.

And finally, is legislation needed to better define the kinds of training in the Federal workplace? The answer is yes. Most of the AIDS training is not offensive, but there are alarming exceptions. For example, the Forest Service Tahoe region sponsored AIDS training last year. It was conducted by a sexologist, a self-described homosexual phlebotomist, and a HIV positive woman from the community.

The phlebotomist was an ex-convict who tried to debunk homophobic attitudes. He speculated that many husbands were involved in homosexual affairs. He showed a variety of condoms and how to apply them to a life size replica of an erect male genitalia.

So in conclusion, the Clinton administration has mandated AIDS awareness training to appease activists and to provide a platform for the promotion of homosexuality as a moral equivalency of heterosexuality. This training is a subset of the diversity agenda which permeates the Federal bureaucracy today.

Thank you, sir.

Mr. MICA. I thank you for your testimony. Now we have two Federal employees I'd like to turn to.

I'm going to ask Lyn Mickley for her testimony first. Thank you for appearing and you have 5 minutes to summarize.

Thank you.

Ms. MICKLEY. Thank you.

Mr. Chairman, members of the subcommittee, and Mrs. Morella, as a constituent of yours, it is a privilege to be here this morning to present testimony on my view of the AIDS training program at the National Institutes of Health.

I come here today not as a representative of the National Institutes of Health, but as a private citizen. I've been employed at the NIH since 1982, as a medical technologist, and for the last 9 years have been employed by the National Cancer Institute working in cancer research.

I appreciate the opportunity today to share my personal experience as one who attended the mandatory AIDS training program at NIH. In September 1994, I attended the mandatory "HIV/AIDS in The Workplace Training Seminar" developed by both the Office of AIDS Research and the NIH Training Center Division of Personnel Management. The seminar was put together in response to President Clinton's directive of September 1993, which required all Federal departments and agencies to provide HIV/AIDS training to its employees. According to literature sent to me by the Office of AIDS Research, the intent of this mandate was to, "educate Federal employees about the challenges posed by the HIV/AIDS epidemic and about fairness and equity issues in the workplace."

Key topics for each training session I have listed here in my testimony and in light of the time, I will not list them all. But would like to say that while all of these key topics were addressed in the seminar, I believe a disproportionate amount of time was devoted to how to protect oneself to avoid HIV infection.

As a health professional I agree that educating the public to dispel fears about contracting AIDS from a co-worker is a good thing. However, I do question the 2½-hour timeframe required for the training, the manner and presentation, the content of the training, and the cost to taxpayers to send more than 17,000 NIH employees to the sessions.

Let me share my personal experience. Upon arriving at the seminar, I was surprised to learn that the primary instructor was a psychosocial worker from the Whitman-Walker Clinic here in Washington. Given the many qualified doctors, researchers and HIV caretakers on the NIH campus, it certainly seemed odd to me that an outside entity was brought in to conduct this seminar.

After introducing herself, the instructor opened the session by telling us that she would be direct and forthright, and she was. In fact, the manner of presentation throughout seemed to reflect a casual indifference to the sensitivities of those present, and no thought seemed to have been given to the audience makeup.

For example, during the discussion of HIV prevention, the instructor covered the risk factors of different sexual behaviors. She mentioned that kissing, masturbating, hugging, and massaging presented low risks of infection. On the other hand, vaginal and anal sex without a condom presented a high risk of infection.

The instructor admitted she did not know where to place oral sex on the scale of risk of infection. But she did suggest that the only way to determine the risk factor for that kind of sexual behavior would be to do a study of partners who only participate in oral sex. And hoping to get a laugh from the audience, she suggested a sign-up sheet at the back of the room for those who wanted to participate in such a study. In an offhand remark, she stated that a person participating in oral sex would have to, "brush their teeth in preparation for the moment."

A second example of casual indifference was an apparent joking reference to sex toys. The instructor advised the audience not to share these toys, as they could provide a form of HIV transmission, which goes against what your mother always taught you to do, that is always to share your toys.

A third example was the instructor's advice to, "make your condom your friend." This was in reference to instruction on how to open a condom, and when you do so she instructed the audience not to use fingernails or teeth. I had difficulty finding any direct bearing of this instruction to the stated purpose of the seminar, which is, I will quote again, was "to educate Federal employees about the challenges posed by the HIV/AIDS epidemic and about fairness and equity issues in the workplace."

During the discussion of HIV transmission, the instructor, through the use of overheads and a lecture format, told how HIV is transferred from person to person, through sexual intercourse, dirty needles, blood transfusions, tattoos, needle sticks, and transmission from mother to baby. The training continued with a discussion of ways to prevent and reduce the risk of infections.

After a brief acknowledgment that abstinence was the only effective way to prevent HIV infection, the instructor proceeded to recommend ways to reduce the risk of infection. For drug users, she suggested sterilizing used needles with 1 part bleach and 4 parts scalding hot water. Then for about the next 30 minutes we were lectured on the use of condoms, what kind to buy, the colors they come in, the flavors they come in, proper storage and the use of spermicides.

Throughout the lecture I kept wondering what does this have to do with the workplace? In fact, it seems to me to be more of a class in sex education rather than a seminar to educate Federal employees about the challenges posed by the HIV/AIDS epidemic.

Mr. Chairman, you had asked me in your letter of invitation if the AIDS training program was well designed to meet the statutory objective of assisting the agency in achieving its mission and performance goals improving employee and organizational performance. In my opinion, it was not well designed. The training did not improve my performance in the work place.

In my opinion, increasing AIDS awareness in the workplace could be accomplished through the use of brochures, a few of which I submitted with my testimony, one in particular was put out by the Department of HHS and addressed specifically AIDS in the workplace. My suggestion would have been if every agency would have put out a similar brochure, that would have answered the questions of their individual employees, perhaps this training wouldn't have had to be done in the manner that it was.

Also, alternately, short optional training videos could have been used, but I don't feel that a 2½-hour mandatory training session was a necessity.

Again, thank you for your time, and I'd be happy to answer any questions you may have.

[The prepared statement of Ms. Mickley follows:]

Testimony of Lyn Mickley

before the Subcommittee on Civil Service

Committee on Government Reform and Oversight

House of Representatives

2154 Rayburn House Office Building
Washington, DC

"Federal Training Programs"

June 22, 1995

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I appreciate the opportunity to share my personal experience as an attendee at the mandatory AIDS training program at the NIH. In September 1994, I attended the mandatory "HIV/AIDS In The Workplace Training Seminar" developed by the Office of AIDS Research and the NIH Training Center, Division of Personnel Management. This seminar was put together in response to President Clinton's directive of September 1993, which required all Federal departments and agencies to provide HIV/AIDS training to its employees. According to literature sent to me by the Office of AIDS Research, the intent of this mandate was to educate Federal employees about the challenges posed by the HIV/AIDS epidemic, and about fairness and equity issues in the workplace.

Key topics for each training session were to include:

- The Rehabilitation Act of 1973 and other Federal policies and how these apply to people living with HIV/AIDS in the workplace.
- The changing demographics of the HIV/AIDS epidemic in the United States and the important events in the history of the epidemic.
- The difference between being HIV positive and having AIDS.
- How HIV attacks and destroys the immune system and the disease

progression.

- How to protect oneself to avoid HIV infection.
- Facts about HIV Antibody Testing—what it is, what it measures, the "window period", and the difference between "confidential" and "anonymous" testing; and
- Information about NIH, local, and national resources that can offer additional information, counseling, etc.

While these "key topics" were addressed in the seminar, a disproportionate amount of time was devoted to how to protect oneself to avoid HIV infection.

As a health professional, I agree that educating the public to dispel fears about contracting AIDS from a co-worker is a good thing. However, I do question the 2 ½ hour time frame required for the training, the manner of presentation, the content of the training, and the costs to taxpayers to send 17,000 NIH employees to the sessions.

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After introducing herself, the instructor opened the session by telling us that she would be direct and forthright—and she was. In fact, the manner of presentation throughout seemed to reflect a casual indifference to the sensitivities of those present. No thought seemed to have been given to the audience make-up. For example, during the discussion of

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through sexual intercourse, dirty needles, blood transfusions, tattoos, needle sticks, and transmission from mother to baby. The training continued with a discussion of the ways to prevent and reduce the risk of HIV infection. After a brief acknowledgment that abstinence was the only effective way to prevent HIV infection, the instructor proceeded to recommend ways to reduce the risk of infection. For drug users, she suggested sterilizing used needles with one part bleach and four parts scalding hot water. Then, for about the next thirty minutes, we were lectured on the use of condoms---what kind to buy, the colors they come in, proper storage, and the use of spermicides. Throughout the lecture, I kept wondering "What does this have to do with the workplace?" In fact, it seemed to be more of a class in sex education, rather than a seminar to educate Federal employees about the challenges posed by the HIV/AIDS epidemic.

Mr. Chairman, you had asked me in the letter of invitation if the AIDS training program was well-designed to meet the statutory objective of assisting the agency in achieving its mission and performance goals by improving employee and organizational performance. In my opinion, it was not well-designed. The training did not improve my performance in the workplace. In my opinion, increasing AIDS awareness in the workplace could be accomplished through the use of brochures or short optional training videos— not a 2 ½ hour mandatory training session.

Again, thank you for your time. I will be happy to answer any questions you may have.

Mr. MICA. I thank you for your testimony.

And now, we'll turn to Mr. Thomas Herron, the last Federal employee today.

Mr. Herron, I appreciate your complete documentation of your involvement in this matter, and also your testimony which I did review in advance and, again, the detail and manner in which you detailed the problems you experienced with your agency.

We look forward to your testimony.

Mr. HERRON. Thank you, Mr. Chairman.

Members of the subcommittee, ladies and gentlemen, my name is Tom Herron and I am a supervisory logistics manager at the Naval Air Technical Services Facilities, Philadelphia. However, I am here today as a private citizen and do not represent the Department of Defense in any official capacity. My opinions are my own.

I have been employed by the Federal Government for 21 years. When I took the oath to uphold the Constitution in 1974, I thought that the free exercise of religion clause of the first amendment applied to me as well as to every other Federal worker. I am here today to speak to you because on January 24th of this year, as a result of the mandatory AIDS training for Federal employees, I found myself in the position that no civil servant should face. That is either to violate my religious convictions or face losing my job.

About a year ago I received a copy of "AIDS at Work" issued by the Office of National AIDS Policy. After a careful review, I found that the mandatory training that was to be given to all Federal workers had as its stated goals the changing of employees' attitudes and behavior relating to people who might be suffering from HIV/AIDS rather than just giving factual knowledge about the disease. There were 17 attitude and behavioral objectives and only 15 knowledge objectives. In brief, this mandatory training was to instill politically correct ideas about the whole HIV/AIDS questions in our minds.

The training was to have a prevention module which was to include both abstinence and safer sex practices. There was no indication in "AIDS at Work" that many religious people hold that the only acceptable safe sex practice is a faithful monogamous union of a man and woman in marriage, or that this position would be honored during the instruction. This training also required every employee to attend the same detailed safe sex brief, without regard to interest, risk, or moral beliefs. Finally, a major emphasis of the training was the passing of AIDS information to children. As every Federal employee I have ever met was at least 18 years of age and legally an adult, why was this feature of the training necessary?

After careful review of "AIDS at Work," I found that the foundation of the Prevention Module was against my religious convictions and I sought to be exempted from at least that part of the mandatory training under the first amendment's protection. I wrote to several Members of Congress and to President Clinton during 1994. I did receive a reply from the White House stating that my request would be passed to Office of Personnel Management for review. That was on February 2d. I am still waiting for an answer.

In January, my agency announced that the mandatory AIDS training would begin shortly. I passed the reasons I could not in conscience attend the training up the chain of command. On Janu-

ary 24th of this year, I had a disciplinary hearing at which my manager told me that if I did not attend I would be considered insubordinate and would be terminated from Federal employment. Reluctantly, when faced about unemployment, I compromised my beliefs and attended the training.

Was the training that bad? Well, I would say it would get a PG rather than an X rating, it did contain the subtle attempts to manipulate our thought that "AIDS at Work" desired. The video shown told churches what doctrines they should preach and told parents how they should raise their children. Churches were to teach the safe sex message and parents were to buy condoms for their 10-year-old sons so they could practice. Both of these statements were in the video, "The Many Faces of AIDS," distributed by the American Red Cross and the Department of Health and Human Services.

The other video, "AIDS for Supervisors," put out by the Navy, had a section dealing with myths and rumors about AIDS. One of the myths to be exploded was "AIDS is a judgment on people who get it." How could anyone know the answer to this question? Have they had a private revelation from the Almighty?

Also, why do we have reminders to bleach needles when many Federal employees are subject to random drug tests? This AIDS training, in my opinion, is not well designed to meet agencies' needs in improving mission and performance goals. It deals too much with changing employees' attitudes and the factual information, safe sex, is very controversial. There is dissatisfaction among my fellow employees with the AIDS training, particularly among those with a strong religious background. This dissatisfaction is muted as people hear what can happen to them if they openly resist.

What would be appropriate AIDS training for the Federal workplace? All employees have received equal opportunity employment training. Perhaps only supervisors need a refresher on privacy protection, workplace accommodation and disability retirements.

In conclusion, AIDS is a public health problem. The training course was developed with all good intentions by the Office of National AIDS Policy. However, the spread of AIDS has not only a medical dimension, it has a moral and ethical one as well. Many Americans, including many civil servants, base their moral code in their religious beliefs. So mandatory training on moral questions can easily impinge on individuals' beliefs and their first amendment freedoms.

I hope this will be taken into account when future training courses of this type are mandated.

Thank you for the opportunity. I am ready to answer any questions.

[Note.—The attachments to Mr. Herron's prepared statement can be found in subcommittee files.]

[The prepared statement of Mr. Herron follows:]

WRITTEN SUBMISSION TO

U.S. HOUSE OF REPRESENTATIVES

COMMITTEE ON GOVERNMENT REFORM AND OVERSIGHT

SUBCOMMITTEE ON CIVIL SERVICE

BY

THOMAS J. HERRON

JUNE 22, 1995

HERRON

1

Mr. Chairman, members of the subcommittee, ladies and gentlemen my name is Thomas J. Herron and I am a supervisory logistics manager at the Naval Air Technical Services Facility in Philadelphia, PA. I have been employed by the federal government at NATSF for nearly twenty-one years. I enjoy my work and have always tried to follow all the rules and regulations that govern the lives of federal employees so you can understand that my testimony here today, as well as the events that led up to it, are very much out of character for me. However I will say that during my career I have always tried to follow the oath I took on October 9, 1974, when I entered the federal civil service, "to uphold the Constitution of the United States" as well as the principles of the Code of Ethics for Government Service, adopted by the 85th Congress. The Code (Attachment 1) states that "Any Person in Government Service Should: Put loyalty to the highest moral principles and to country above loyalty to persons, party or Government department."

Chairman Mica, is his letter inviting me to this hearing dated June 16, 1995, has asked me to relate my experience with the mandatory AIDS training program for federal employees. He also states in his letter that your subcommittee wishes to evaluate the HIV/AIDS training to see if they "meet the statutory objectives of assisting the agency in achieving its 'mission and performance goals by improving employee and organizational performance.'" I must state at the outset that I am here as an individual who is a federal employee. Also, I must make the normal disclaimer that what I am about to tell you may not reflect the official position of the Department of Defense. Any opinions expressed relating to the topic are my own but the facts in the case did happen as I will describe them in the narrative and I have placed 21 attachments to document my story. The Chairman also asked me to respond to three specific questions, hopefully I will indicate my position in the course of the narrative and I will specifically answer them at the conclusion.

My knowledge of the mandatory HIV/AIDS training began nearly a year ago due to the fact that I am my agency's collateral duty Occupational Safety and Health manager. As such I received an advanced copy of the report *AIDS at Work*, dated April 7, 1994, prepared by the Executive Office of the President, Office of National AIDS Policy. When I reviewed this document I found that there would be mandatory training for every federal employee that was to, in the words of the introduction, "to serve as a model for all businesses" in the country. During my review I found a number of objectionable things proposed in *AIDS at Work*. These included: (1) the

establishment of a 'politically correct' thought pattern in federal employees, in the words of the report, "to create positive attitudes about working with people...with AIDS/HIV." and to "feel less judgmental towards persons...living with HIV/AIDS (with respect to the presumed or known behaviors that resulted in their infection)." (2) The desired curriculum was to include 30% Prevention Education, "including both abstinence and safer sexual practices." There was no indication that many religious people hold that the only acceptable safe sex practice was a faithful, monogamous union of a man and woman in a legally binding marriage or that this position would be honored during the instruction. (3) The training, in the words of the report "required targeted continuous, linguistically specific and culturally based information. It is impractical to divide up a work place based on risk factors." So every employee was to hear the same graphic 'safe sex' information regardless of interest, risk or moral beliefs. Finally (4) the report had as a centerpiece the need for the training to have the passing of AIDS/HIV information to children. Why was this required when every federal employee I have ever met has been at least 18 years of age and is therefore legally an adult?

I sent these objections to the required training to several members of Congress during the latter part of 1994. I asked that they seek to add conscientious objector status so that federal employees, who felt this training was a violation of their First Amendment rights to freedom of religion, would not be faced with the horrible choice of going against the dictates of their religious beliefs or face loosing their jobs. I never heard back from the members on this issue. Attachment (2) is a sample of my letters outlining my objections.

Finally on December 19, 1994 I wrote to President Clinton, Attachment (3), asking for relief from having to attend the HIV/AIDS required training on grounds that it would violate my free exercise of religion guaranteed by the First Amendment to the U.S. Constitution. I told him in that letter that, as a practicing Catholic, I found the whole thrust of the training mandated by *AIDS at Work* was against the principles of my faith which holds that all sexual activity outside of marriage is seriously wrong.

Several days after I was forced to attend this training I received a reply from the White House dated February 2, 1995, Attachment (4). While the letter neither accepted nor rejected my request it did state that I had raised some issues that would be referred to the Office of Personnel Management for review. I was told to contact

OPM for further information on my request. To date I have written the Director of OPM, Mr. King, twice but have not received a reply.

Early in January 1995 my agency announced that all employees would be scheduled for this mandatory HIV/AIDS training, Attachment (5). On January 18, 1995 I wrote to the Technical Director, Naval Air Technical Services Facility, Mr. William Smith, stating that I could not attend the required training for the reasons I have described above, Attachment (6). Several days later I was told by my department head, Mr. Robert Leibrand, that there would be a meeting concerning my memo in the office of the head of the personnel department on January 24, 1995 and that I could bring representation. As I have been a first level supervisor for over eight years when I hear that an employee may bring representation I understand it to be a disciplinary meeting. I asked my department head, Mr. Leibrand, if this was the case and he said he did not know.

That discussion took place on a Friday and the proposed date for the meeting was the following Tuesday. When I came to work on Monday I wrote an email to Mr. Smith and Mr. Leibrand stating that my representative would be the former Director of the Philadelphia/South Jersey Chapter of the Catholic League for Civil and Political Rights, Mr. James Nolan, Attachment (7). Later that day I was told by Mr. Leibrand that Mr. Michael Abbott, the head of our servicing personnel office, had called our Technical Director and stated that as this was not a disciplinary meeting I was not allowed to bring a representative.

The meeting took place the following afternoon. Mr. Smith opened the meeting by stating that we were there only to discuss my memo of January 18th and not my letter to the President. He stated that HIV/AIDS training had been mandated by the President and that, therefore, we federal employees must assume that his directives had the force of law. Therefore, Mr. Smith stated, that if I persisted in not attending this required training he would recommend my termination from federal employment. I asked Mr. Smith if presidential directives negated the provisions of the U.S. Constitution. He replied that, "We federal employees must assume that the president is correct and attend mandatory training. If we find something offensive we can grieve later."

Present at this meeting with Mr. Smith were my department head, Mr. Leibrand, Ms. Patricia Raeder, an employee relations specialist from the personnel office, and Mr. Fred Burke, an EEO specialist. Mr. Burke was

also the designated instructor for the mandated HIV/AIDS training on our base. I asked Ms. Raeder if termination for the first offense of failing to attend a training class was the normal procedure for a personnel action of this type. "Absolutely." she replied, "Besides you're a supervisor, you must set an example for your employees."

Mr. Smith then presented me with a piece of paper, Attachment (8), and said, "This is a case similar to yours, you might want to read it." It was a summary of a decision by the Merit Systems Protection Board, *Ryan vs. Department of Justice*, 950 F.2d 458 (7th Cir. 1991) in which an FBI agent refused to investigate a pacifist group on the basis of religious convictions and was terminated. While I did not comment on this case at the meeting I did read it later and did not find the similarity. Ryan refused a work assignment not mandatory training.

Mr. Burke, the EEO specialist, then gave me a list, Attachment (9), of the remaining HIV/AIDS training classes that he would be conducting on our base and told me that I could go to any class up to February 23, 1995. I asked Mr. Burke if he, as an EEO specialist, was familiar with the contents of Title VII of the Civil Rights Act of 1964. He replied that he was and that it did contain a prohibition of discrimination on the basis of religion. Mr. Smith then added that I would be considered insubordinate after February 23, 1995 if I did not attend one of the classes.

I then stated that I had once again reviewed that basic document, *AIDS at Work*, and felt that the objectionable parts were contained in the module dealing with Prevention Education (30% of the total). As I wished to not be considered an insubordinate employee I proposed what I considered a reasonable accommodation. I asked that the prevention module be removed. Mr. Burke stated that he would give me a private class if I felt too sensitive to view this material with my co-workers. Let me add at no time during this entire process did my management offer to make a reasonable accommodation to my religious convictions by removing offensive materials. Their attitude always was the President has ordered this course, you must comply totally. Ultimately I declined the offer of a private screening of the videos as it was not a true accommodation. This ended the disciplinary meeting of January 24, 1995.

Immediately after the termination of the meeting I wrote a memorandum for the record, Attachment (10), stating the major discussions at the hearing. Ms. Patricia Raeder of the personnel office also prepared a

memorandum for the record of her opinion of what transpired at the meeting. A copy of her signed memo is Attachment (11). While there are minor differences in the two memos, it should be noted that they both agree on the fact that Mr. Smith threatened to fire me if I did not attend the HIV/AIDS training.

Just prior to the meeting of January 24, 1995 Mr. Leibrand had given me a series of documents that he had received from the personnel office. These were a series of six directives down the Navy chain of command on the mandatory HIV/AIDS training. They included President Clinton's memo of September 30, 1993 and Christine Gebbie's implementing instruction of November 3, 1993. These documents are Attachments (12) through (17).

After discussion of my situation with my wife, Kathleen, I called Mr. Burke on the morning of January 26, 1995 to say that I would attend one of the HIV/AIDS training classes with reservation and under protest. I kept a memo of this phone call as Attachment (18).

I attended the mandatory training class on HIV/AIDS on the afternoon of January 31, 1995. I took extensive notes and these are included as Attachment (19). Also Attachment (20) is one of the hand outs presented to all attendees by Mr. Burke and his associate instructor, Mr. Ed Coleman. Let me say at the outset that after attentively listening to what was presented during the class I found it offensive to my religious beliefs and I still considered that my First Amendment rights were violated by being forced to attend it. One of the most interesting features of this course was found in the page on Prevention in the hand out. Three no-risk sexual activities, from the point of view of catching AIDS, are listed. These are (1) no sex (i.e., abstinence), (2) masturbation and (3) sex only with an uninfected, monogamous partner who does not share needles and syringes. I say this is most interesting as the former Surgeon General, Dr. Elders, had been fired from her position not two months before this date for calling for masturbation education.

Our instructors, Mr. Burke and Mr. Coleman, stated that they had received training in this material from the American Red Cross and the Naval Hospital, New London, CT. We were then shown two videos one called "AIDS for Supervisors" issued by the Chief of Naval Education and Training (CNET) in cooperation with the Navy Bureau of Medicine (BUMED). The other was titled "The Many Faces of AIDS" and its credits indicated that it was

produced with support from the Department of Health and Human Services, the American Red Cross and the National AIDS Information Council. Mr. Burke did note during the training session that the information we were being given had been approved by the Red Cross. The instruction took place in the Defense Industrial Support Center's auditorium on our base. Employees had to sign an attendance sheet prior to the beginning of the class. I did note that a number of individuals signed in at the front of the auditorium and then proceeded to walk out the back door. Further, I noted that a number of employees appeared to be sleeping when the lights were turned off and the videos were running.

In my opinion the videos did contain information, from what must be considered official sources, to make federal employees change their presumed attitudes about HIV/AIDS and people who are infected with the disease. I realize that the phrase is worn by use but I see no other possibility but to label it as the establishment of politically correct thought patterns in federal employees. This is not a rash conclusion: there is a basic theme running through the document *AIDS at Work* to the two videos. The Office of National AIDS Policy report stated that the goal of the training was "to create positive attitudes about working with people....with HIV/AIDS" and to have employees "feel less judgmental towards persons....living with HIV/AIDS (with respect to the presumed or known behaviors that resulted in their infection.)" The official Navy video had a section dealing with "Rumors and Myths". One of the 'myths' was, according to the narrator, "AIDS is a judgment on the people who get it." It was never stated whose judgment the Navy was talking about here. As AIDS is a fatal disease, did the narrator mean a Divine judgment? After all who else could inflict fatal diseases on people? The word, "judgment" is readily known to anyone who has a passing knowledge of the Bible. If CNET/BUMED mean God in this context then I definitely feel that we are in a situation where an agency of the government is mandating to employees what religious beliefs they are allowed to have.

The other video, "The Many Faces of AIDS", certainly contained the "required targeted continuous, linguistically specific and culturally based information" that *AIDS at Work* mandated. It also told Churches what they should be preaching and what was the proper sex education that parents were to provide their children. In this video there were at least two people who stated that the Churches of this country had to be more proactive in AIDS education. The former Secretary of HHS, Dr. Louis Sullivan, told us that "churches should be more

supportive" of those with AIDS. A woman stated that "Churches must educate people in safe sex." When I hear comments of this type repeated in a video officially sanctioned by the Department of Health and Human Services in a government facility on government time I must ask; whatever happened to the so-called "wall of separation between Church and state"?

However the most objectionable part of "The Many Faces of AIDS" was a none-too-subtle put down of premarital chastity. They did this in the name of giving adults information to spread the safe sex message to children. An AIDS counselor was introduced and he stated, "All kids are at risk, all need the same explicit information." Then a nurse was shown who stated that she had a ten year old son. She told the audience, "Parents should get embarrassed. I'm going to give my son a package of condoms and say this isn't permission just practice now. Then put them in your bureau drawer and keep them for your wedding night." In *AIDS at Work* (p. 7) one of the Behavioral Objectives listed for training participants is to "4. Share HIV prevention information with others." Has the federal government, through official sanction of this video, determined that parents will be considered unfit if they do not "Share HIV prevention information" with their children by giving them packages of condoms?

After the videos were shown the training class concluded with one of the instructors, Mr. Coleman, explaining to us what dental dams and finger cots were and for what purposes they were used. I will state that I had never heard of either of them or did I feel that I had any great need to know.

Several days after the date I attended the HIV/AIDS training class, on Friday February 3, 1995, I received a call at my desk from Mr. Burke, the EEO counselor. (See Attachment (21) my memo for the record on this call.) "How did you like the training?", he asked. I replied that my opinion of the mandatory HIV/AIDS training had not changed; that I still firmly felt it to be a violation of my constitutionally guaranteed free exercise of religion. Further I told Mr. Burke that I had been considering the definition of 'hostile work environment' under the Navy's definition of sexual harassment. As I understood this a 'hostile work environment' could be created by an individual forcing a discussion of a sexual nature upon an unwilling co-worker. Therefore I could consider this mandatory training class creating a hostile work environment for me and that I was thus the victim of sexual harassment. Mr. Burke told me that I was taking the definition out of context. We soon terminated our phone conversation.

With that I will end my narrative of my experiences relating to mandatory HIV/AIDS training for federal employees. In summary let me state to the subcommittee that speaking for myself, as well as many other federal employees who are also religious believers, I am here today to ask for no special consideration from you. I only ask that our First Amendment right to free exercise of religion be reaffirmed. If this requires adding some type of conscientious objector status to attendance at training classes with high moral or ethical content, then this would be my recommendation to your subcommittee.

I have been asked by Chairman Mica to answer the following questions:

1) Based on your own experience with the Administration's AIDS training program, is it, in your opinion, well-designated to meet the statutory objectives cited?

I cannot see how the training class I attended would assist the Naval Air Technical Services Facility in achieving its mission and performance goals by improving employee and organizational performance. My agency's mission is to procure, manage and distribute technical manuals and engineering drawings in support of Naval aviation. While all employees receive Equal Employment Opportunity training, particularly supervisors, I must state that the HIV/AIDS training does not appear to me to fit the training goals that I have been aware of up to now. When I read pages 5 to 7 of the governing document, *AIDS at Work*, I see there are 15 knowledge objectives and 17 attitude and behavior objectives listed for both employees and managers. So from that I would conclude that giving employees knowledge about HIV/AIDS was secondary to changing their attitudes and behaviors. It is not, therefore, well suited to assist in improving my organization's performance as, in my opinion, it deals fundamentally with what are personal matters such as attitudes and behaviors.

2) Are you aware of any dissatisfaction among your fellow employees with the AIDS training conducted by your agency?

Yes, I am familiar with some dissatisfaction among some of my co-workers. It was particularly strong among those who came from a strong religious background. Few individuals would express their dissatisfaction openly to management; particularly when they heard of my proposed termination if I failed to attend the class. I can only judge from the employees I observed signing in at the class and walking out the back door, or sleeping

during the videos, that some of them might have been expressing some degree of unhappiness with the mandatory training. Finally I would add that while I expressed open reservation about the Prevention Education module due to my religious beliefs I never counseled or encouraged any employee to be insubordinate by not attending the HIV/AIDS training..

3) Given the statutory objectives what kind of AIDS training, if any, would you consider appropriate for the federal workplace?

I think it would be very hard, if not impossible, for the government to successfully develop a training course on a disease that has not just a public health dimension but a moral and ethical one as well. Tuberculosis, another contagious disease, is making a come back after many years but I do not see the federal government mandating training for all employees. As the spread of HIV/AIDS has a moral and ethical dimension for large numbers of people this equates to a religious matter. Therefore, as I think you can understand from my narrative some individuals will resist the imposition of moral goals that they feel contradict their religious beliefs even if the government, with all good intentions, is trying to improve public health. I think that the only appropriate training would be for supervisors and that would center on a refresher course dealing with privacy protection as well as disability retirements and accommodating employees with special needs.

I wish to express my deepest thanks to the subcommittee for allowing my to present my testimony.

Respectfully Submitted,

Thomas J. Herron

Mr. MICA. Thank you, Mr. Herron, and also our other panelists, for your testimony.

Mr. Herron, I read all of your testimony and some of the background information. Can you tell me what the policy is now in DOD? Is AIDS testing or AIDS training mandatory in DOD?

Mr. HERRON. Well, Congressman Mica, I have just heard word of mouth that it will not be repeated. I was speaking to the gentleman who was my instructor, and he said, well, they're not going to do it anymore.

Mr. MICA. But it is not mandatory anymore, you're saying?

Mr. HERRON. That's what I hear, but the documents that I have given you down the chain of command in the Navy, unless they have been rescinded or updated in some way, say it is.

Mr. MICA. You were called into a hearing at one point, I believe, and told to bring representation. And it is my understanding you took notes and also someone from—was it Office of Personnel?

Mr. HERRON. It was our local personnel office, she also took notes.

Mr. MICA. And they also indicated that you would be terminated if you did not attend these training sessions, is that correct?

Mr. HERRON. That's right, if I persisted in not going to it. They gave me a window. We have about 5,000 to 6,000 people employed on our base, and the training was staggered over a month. I missed the—we have a small agency. I missed the training dates for my agency and so I had to go and make up class with some other folks.

Mr. MICA. And you asked also for some opportunity to opt out of part of the training and that was also denied?

Mr. HERRON. Well, at the discipline hearing, I said my objections going back to the document, AIDS at Work, put out by ONAP, was in the prevention module, because that was a safe sex brief. I have no objection to learning or relearning, as a supervisor, personnel practices with handicapped or disabled employees, disability requirements, no problem with that whatsoever. Just with the safe sex part.

Mr. MICA. It appears that, Ms. Hutchens, Ms. Mickley and Mr. Herron, at least all agree that they don't object to AIDS training in the Federal workplace, it was some of the content and approach and some of the doctrine that was presented. Is that correct, from the three?

Ms. MICKLEY. Yeah. The manner I think in which it was presented, and the fact that, at least in my experience, I was part of a research institution where a lot of pretty credible sources of HIV researchers are there, and why there had to be an outside entity to come in to do that, why we couldn't have used someone in-house.

Mr. MICA. And it appears that AIDS training, as a requirement, appears to be sort of a bipartisan mandate, both from President Reagan and from President Clinton. Again, Ms. Hutchens, your objection is to the manner and the content?

Ms. HUTCHENS. The content, yes. But we also need to consider the taxpayer aspect of it. I believe that if you are going to address this in an office government worker setting, it can be effectively and efficiently done in a half hour, not 2 to 3 hours.

Mr. MICA. Mr. Herron, do you know if anything is in your personnel record as far as this matter?

Mr. HERRON. Not that I'm aware of, Mr. Chairman. It was—I think my management considered it overcome by events by the fact that I did attend the training. Although I did get a copy of the formal minutes of the discipline hearing.

Mr. MICA. Was it this Whitman-Walker Clinic, did they supervise your training, or was it another group? I know some are contracted and some are done internally. Do you recall who did the training?

Mr. HERRON. They were two of our EEO specialists, Mr. Chairman, and I believe they went to the naval hospital in New London, CT, the BUMED, and received their training there. They also mentioned that they had been certified by the American Red Cross. So it was Government employees doing the training.

However, the Whitman-Walker Clinic was featured in the "Many Faces of AIDS" video. There were a couple of people who worked there and they were featured—their comments were featured during the video.

Mr. MICA. You're in a supervisory position. Have you seen OPM guidelines on training and other guidelines relating to AIDS training?

Mr. HERRON. No, I have not, Mr. Chairman.

Mr. MICA. Are you aware of any guidelines?

Ms. MICKLEY. No.

Mr. MICA. So there's no guidelines.

Mr. Maginnis, you testified you estimated the cost of this exercise to the taxpayers, $80 to a $100 million. How did you come to that figure?

Mr. MAGINNIS. Sir, I contacted the Census Bureau and the Bureau of Labor Statistics to find out what the average wage was for the Federal employee this past year. And I received a different figure from each. And that's why I have a bracket. And I looked at the total number of civil servants, according to the Census Bureau this past year, and then I just multiplied the two. That's why I say somewhere——

Mr. MICA. Did you calculate that on 2 million employees and then another million in the military?

Mr. MAGINNIS. I did not——

Mr. MICA. Is this also for the active military, Mr. Herron?

Mr. HERRON. I believe it is. There were——

Mr. MICA. Probably in the 4 million range.

Mr. HERRON. I would assume so, yes.

Mr. MICA. Again, I don't know the exact figures. But 2½ hours of training, is that what you based it on?

Mr. MAGINNIS. I based on 3 hours, sir. I have a syllabus from some of the agencies where it outlines 3 hours. And so I used the 3-hour number, multiplied that times the average income both from the Department of Labor and Department of Census Bureau, and then multiplied it times the number of Federal civil servants.

So it was between 80 and 100. Of course, that doesn't include fees that are paid and other incidentals.

Mr. MICA. Are any of you aware how many contracts are let to private training organizations for this?

Mr. HERRON. No, I'm not.

Ms. MICKLEY. No, but there was also a $10 charge per individual, at least what was listed here and what came out of the Office of AIDS Research.

[The information referred to follows:]

OFFICE OF AIDS RESEARCH

HIV/AIDS In The Workplace: Awareness and Education

Training for Federal Employees

On September 30, 1993, President Clinton issued a directive to all departments and agencies stating that every Federal employee must receive comprehensive training on HIV/AIDS awareness and workplace policies. The intent of this mandate is to educate Federal employees about the challenges posed by the HIV/AIDS epidemic and about fairness and equity issues in the workplace. Because the Federal government is the single largest employer in the nation, it is hoped that by educating its three million employees about HIV/AIDS, we will have a good start on reaching out to share this important information with our families and communities.

To respond to this mandate, the NIH Office of AIDS Research, Office of the Director, and the NIH Training Center, Division of Personnel Management, have developed a training program designed for all employees. The program consists of two training modules, one for all non-supervisory employees and the other for managers and supervisors. The intent of both modules is to ensure that all employees are knowledgeable about and behave in accordance with guidelines concerning HIV/AIDS in the Federal workplace. The manager/supervisor module contains additional information about the responsibilities of supervisors in dealing with workplace issues related to HIV/AIDS.

Both types of modules will last approximately 2 1/2 hours. Most of the manager/supervisory training is scheduled in Executive Plaza South. Most non-supervisory training will be held in Building 1 in Wilson Hall, although several dates are also available in Lipsett Amphitheater and Masur Auditorium, both located on campus in Building 10.

(Additional training sessions for field locations will be announced separately. These will be held at the Parklawn Building; in Frederick and Baltimore, MD; in Research Triangle Park, NC; in Hamilton, MT; and in Phoenix, AZ.)

Key Topics for All Sessions:

- The Rehabilitation Act of 1973 and other Federal policies and how these apply to people living with HIV/AIDS in the workplace
- The changing demographics of the HIV/AIDS epidemic in the United States and the important events in the history of the epidemic
- The difference between being HIV positive and having AIDS
- How HIV attacks and destroys the immune system and the disease progression
- How to protect one's self to avoid HIV infection
- Facts about HIV Antibody Testing - what it is, what it measures, the "window period", and the difference between "confidential" and "anonymous" testing
- Information about NIH, local, and national resources that can offer additional information, counseling, etc.

Manager/Supervisor Sessions Will Also Cover:

- "Reasonable accommodation" and how to handle such requests
- Dealing with confidentiality and personal medical records
- Emotional issues that exist for employees who are living with life-threatening illnesses
- Common case scenarios that can occur when an employee has HIV/AIDS and how managers/supervisors can respond appropriately in these situations.

Cost: $10.00 per participant for either session.

HOW TO REGISTER:

Contact your Administrative Officer or your ICD HIV/AIDS Training Coordinator (consult list below) for specific registration procedures. Choose a course date from the dates listed in this flyer and apply for an appropriate session (manager/supervisor or non-supervisor) and make sure that correct information is listed on the registration form (your name, SSN, address, phone, and THE COURSE SECTION, DATE, and TIME).

Your ICD AIDS Training Coordinator will fax registration forms for your ICD to the NIH Training Center where they will be placed in sections of the courses on a "first-come, first-served" basis.

The NIH Training Center will confirm all accepted nominations via letters to individual participants (we must have accurate mailing addresses). If the course date you requested has been filled by earlier nominations, we will send you a confirmation letter for a later session. If you have not heard from the Training Center by one week prior to the course date you requested, call the HIV/AIDS Training Information Line - 496-3115.

Note: the nomination deadline is three weeks prior to the course date. Employees who have been confirmed for a specific session must attend that session or call their ICD HIV/AIDS Training Coordinator to arrange for a substitute participant. Participants will sign in at each session. If a manager, supervisor, or employee does not attend a session for which they have been nominated and confirmed by the NIH Training Center, the ICD will be charged.

ICD HIV/AIDS In The Workplace Training Coordinators:

Name	ICD	Bldg./Rm.	Tele.	Name	ICD	Bldg./Rm.	Tele.
Stacey Bauman	CC	10/1N252	6-1618	Lena Eads	NIDA/ARC	Balt.	410-550-1509
Karen Pascal	CC	10/1N252	6-1618	Maryann Pafitis	NIDA	Pkln 10-21	3-9593
Stacy Vandor	DCRT	12A/3031	6-6951	Donna Brooks	NIDCD	31/3C11	2-0508
Carol Striker	DRG	WW /438	4-7279	Gayle Mundell	NIDCD	31/3C11	2-0508
Sharon Nieberding	FIC	31/B2C29	6-4625	Syd Carter	NIDDK	31/9A30	6-4231
Deirdre McQueen-Davis	NCHGR	31/3B31	2-4833	Faye Harbrant	NIDR	31/2C23	6-6971
Pam Temple	NCI	EPS/519	6-0493	Jennifer Anderson	NIEHS	101	919-541-2361
Sonia Gaskin	NCRR	12A/4055	6-1989	Kellee Miller	NIGMS	WW/803	7-7767
Barbara DiSimone	NEI	31/6A18	6-4274	Margot Darby	NIMH	Pkln 7C15	3-9094
Ruth Fritz	NHLBI	31/5A10	6-3245	Carolyn Nichols	NIMH	10/4C101	6-5337
Susan Haas	NIA-Beth	31/2C02	6-5347	Marjorie Kuhn	NINDS	31/8A23	6-6334
Terri Neibuhr	NIA-Balt		410-558-811	Cherry Earl	NINR	31/5B06	2-2631
Barbara Lindstadt	NIAAA	Willco 406	443-0281	Marilyn Chalkin	NLM	38/2N05	6-4943
Holly Taylor	NIAID	31/7A04	6-9088	Lavinia Dowdy	OD		2-3392
Patricia Rados	NIAMS	31/4C21	6-0436	Angie Dixon	OD		2-3392
Sherrie Davis	NICHD	31/2A25	6-3365	Dolores Jeter	OD/ORS	31/2B13	2-1528

Mr. MICA. A $10 charge to attend?

Ms. MICKLEY. Yes, that came out of——

Mr. MICA. I haven't heard of that before.

Ms. MICKLEY. So if you add that on top of your salary.

Mr. MICA. Again, I am not aware of any charge in these. But we'll look into that matter, too.

Mr. Maginnis, also did you look into the aspect of training the trainers and the cost involved in that, the time?

Mr. MAGINNIS. I did not look specifically at that, no, sir.

Mr. MICA. And you don't know what percentage is done, say, in-house or what contracted services inform the training?

Mr. MAGINNIS. I've spoken with trainers that went through the training, but I don't know how much money was involved.

Mr. MICA. And, Ms. Hutchens, I think you referred to the Department of Agriculture's training manual for trainers, and some of the questions were quite objectionable. You don't feel that it is appropriate that taxpayer dollars be expended on training public employees at the Federal level in these specific questions and approaches?

Ms. HUTCHENS. Certainly, and I might also point out, again, that at the Department of Agriculture, the trainers went through a 4-day training seminar before they were allowed to lead classes.

Mr. MICA. Finally, Ms. Hutchens, Ms. Mickley, Mr. Maginnis, and Mr. Herron possibly, you have looked at the different programs. I have seen some of them—Department of Energy has one. Is there a model that you think should be the standards that you think are appropriate for taxpayer support for AIDS and HIV positive training?

Ms. MICKLEY. As I said, I think it is important to increase AIDS awareness for the general public, not just Federal employees. But——

Mr. MICA. The question was did you see any Federal program that you consider acceptable?

Ms. MICKLEY. I can only speak for the one I attended.

Mr. MICA. Ms. Hutchens.

Ms. HUTCHENS. From the ones I investigated, no, I didn't think any of them were acceptable.

Mr. MICA. Mr. Herron.

Mr. HERRON. I can only speak for the one I attended, sir. But I would add that I am a collateral duty occupational safety and health manager for my agency and we do give handouts to all our employees, let's say on the common cold, and boating and summer safety.

Mr. MICA. Is that where the rubber gloves for the White House security officers are contained?

Mr. HERRON. I heard that this morning.

Mr. MICA. I'm not sure myself.

Mr. Maginnis, did you see any programs that were acceptable with any of the Federal agencies?

Mr. MAGINNIS. Not in their entirety; no, sir.

Mr. MICA. I thank the witnesses and I'd yield to the ranking member, Mr. Moran.

Mr. MORAN. Thank you, Mr. Mica.

What was it that was not acceptable about the training, anybody that wants to answer?

Mr. MAGINNIS. Sir, I'll begin if you'd like.

I spoke with a naval captain who went through the training 2 months ago. And she told me that she felt like crawling under the chair when they pulled out a model, erect model of a male genitalia and started to explain how in detail to put on a condom. She found that very offensive.

Mr. MORAN. What was offensive to you? That's what I'm trying to determine. What was offensive about the training to you?

Mr. MAGINNIS. The training that I went to, sir, I did not find offensive. I found the material——

Mr. MORAN. You didn't find the training offensive?

Mr. MAGINNIS. I found the material they provided in the booklet offensive.

Mr. MORAN. But you didn't find the training you went through offensive?

Mr. MAGINNIS. I did not find anything that was said in the session that I attended offensive.

Mr. MORAN. What did you find offensive? Did you find anything in the training that you went through offensive?

Ms. MICKLEY. Yes, sir, and I think I stated that in my testimony, the three examples that I gave you, which was her discussion and her remarks on suggesting a sign-up sheet in the back of the room for those who wanted to participate in an oral sex study. I think these off-hand comments about brushing your teeth in preparation for the moment in response to participating in oral sex. That's pretty offensive, and I think it would be to you, sir.

Mr. MORAN. I can understand. What organization provided that training?

Ms. MICKLEY. The Whitman-Walker Clinic here in Washington.

Mr. MORAN. And what was the sites?

Ms. MICKLEY. Excuse me?

Mr. MORAN. Where was it provided?

Ms. MICKLEY. At NIH.

Mr. MORAN. At NIH, and provided by the Whitman-Walker, and those are the specifically offensive——

Ms. MICKLEY. Yes. I can add more, I have them. But they're all here in the testimony.

Mr. MORAN. No, I can understand why that would be considered offensive.

Mr. Herron.

Mr. HERRON. Yes, Congressman Moran. In attachment 19 to my written statement, I had my memo for the record of the training class. I'm describing here the video, "The Many Faces of AIDS," put out by the American Red Cross and HHS. A young woman named Candy, identified as an AIDS victim, was shown giving out condoms on the street. It was said she worked in the Whitman Clinic in Washington, DC. Candy said, "Anyone who doesn't use protection is insane. Some straight people engage in anal and oral sex just like gay people."

She also told the audience, "that just because a woman went out and bought condoms, no one likes to feel like a whore. A woman should tell her partner I'm not a virgin and neither are you." A lit-

tle bit later in the video, there was a lady sitting in a church and she said, "Churches have to preach the safe sex message." Churches must educate people in safe sex particularly.

And finally, there was a section in the Many Faces of AIDS that said how to spread the word to children. And an AIDS counselor stated, "All the kids are at risk, all need the same explicit information."

And also in the most explicit put down of premarital chastity in the video, a nurse was introduced who said she had a 10-year-old son. Quote, "parents who get embarrassed, bring home a package of condoms and say, this isn't permission, just practice now, then put them in your bureau drawer and keep them for your wedding night." Yes, Congressman, I found that offensive.

Also, there was a humorous point in the video or in the instruction, too, I should say, is that our instructors talked about the, and it is attachment 20 to my written submissions, about prevention. They list masturbation as an alternative, and the word obviously didn't get from Washington to Philadelphia, but I believe that's what the former Surgeon General was fired for directing on about December 1st, Dr. Elders. And here we have 2 months later, the same thing is——

Mr. MORAN. Who provided the training?

Mr. HERRON. These were Government, Federal employees, who were trained at the Navy hospital in New London with Red Cross input.

Mr. MORAN. So it wasn't contracted?

Mr. HERRON. No, it was not contracted.

Mr. MORAN. It was Federal employees.

And Ms. Hutchens.

Ms. HUTCHENS. Well, to find offensive things in the training I sat through at the FDIC, I hardly know where to begin. There was so much. The instructor thought it was perfectly appropriate to make jokes about everything from masturbation to phone sex and he thought it appropriate to discuss everything from anal sex to oral-anal contact. And then he went into a deluge of jokes about condoms and bizarre things to use for lubricants.

Mr. MORAN. OK. And this was a Federal employee?

Ms. HUTCHENS. This was held at the FDIC and it was—the instructor was from the American Red Cross.

Mr. MORAN. It was American Red Cross?

Ms. HUTCHENS. Right, which actually surprised me. I thought it might prove to be one of the more innocuous trainings.

Mr. MORAN. And who was offended, whose religious beliefs were offended? All three of you?

Mr. HERRON. Yes.

Mr. MORAN. And it was this business that churches should teach safe sex, is that what was religiously offensive?

Mr. HERRON. Well, that's partially it, Congressman. Also the fact that they put down premarital chastity.

Mr. MICA. There has been a suggestion—we're going to have a vote here so I want to move on. There is a suggestion that it promoted homosexuality. Does—is there a consensus among you that that was the case?

Mr. HERRON. I wouldn't say promote, I would say it was equated, a heterosexual, monogamous marriage and——

Mr. MORAN. OK, Ms. Hutchens, you think it was promoting——

Ms. HUTCHENS. If you look at all the attachments and the appendices I submitted along with my statement, you'll find all of the cases in the training manuals where homosexuality is promoted. I include the value survey that you questioned Congressman Dornan about.

I've got a copy of that. That's attached to my testimony. That was used at the Department of Agriculture. And it asks—it probes into people's beliefs about how they feel about homosexuality for other people, homosexuality for my child.

Mr. MORAN. Well, is that promoting homosexuality? How is that promoting homosexuality?

Ms. HUTCHENS. I don't see how it is not promoting homosexuality. It is actually probing into people, how they feel about these issues, discussions about anal sex and telling people that we shouldn't call people who are high risk groups, such as homosexuals and IV drug users, that we couldn't call them high risk groups. I mean we're——

Mr. MORAN. The value survey says that?

Ms. HUTCHENS. What?

Mr. MORAN. The value survey says that?

Ms. HUTCHENS. That's in another one of the attachments from both the Department of Energy and the——

Mr. MORAN. How does the value survey promote homosexuality?

Ms. HUTCHENS. It is probing into people's views about homosexuality. Why do they need to know how I feel about homosexuality, how I feel about homosexuality for my child? And why do they—as a taxpayer, as a taxpayer who lives in your district, why do my taxpayers' dollars have to go to support this?

Mr. MORAN. Ms. Hutchens, I am asking a question as to whether these training sessions promoted homosexuality. You have referred to a value survey. There may be deficiencies about that value survey. I haven't heard anything that you have said that in my judgment promotes——

Ms. HUTCHENS. Again, if you look thoroughly through the appendices that I included on my statement, I think it is very clear, all the areas from all the different manuals, participants manuals, trainers manuals, that it is promoted.

Mr. MORAN. OK. Well, I don't—I'm less than convinced by your reference to the values survey to asking——

Ms. HUTCHENS. Then I encourage you to read the testimony I submitted.

Mr. MICA. We're running out of time. I don't want to cut anybody short, but we've gone a little bit over, Mr. Moran. If we could, I'd like to yield quickly to Mr. Bass.

Mr. BASS. Thank you, Mr. Chairman. I only have one question, it won't take anywhere near 5 minutes. It is of Ms. Mickley.

As I understand from our schedule here, you're a Federal employee.

Ms. MICKLEY. Yes.

Mr. BASS. If the allegations and observations made by Ms. Hutchens and Mr. Herron occurred in your environment outside of

a training session, would you think that you might have grounds for a charge of sexual harassment?

Ms. MICKLEY. Could you repeat that, please?

Mr. BASS. Certainly.

We heard Ms. Hutchens and Mr. Herron talk about certain allusions to explicit sexual acts, so forth. If this—let's say, for example, your boss started to give you a training session, if you will, of this nature, that was not called an AIDS training seminar. Would this sound to you like you might have possible grounds to file charges against him or her for sexual harassment?

Ms. MICKLEY. Well, my boss, first of all, is a physician, and I would think he was explaining it more from a doctor/patient relationship as opposed to something that would be sexual harassment. So that's a hard one for me to answer.

Mr. BASS. OK. Thank you very much, Mr. Chairman.

I don't have any further questions.

Mr. MICA. Mr. Burton.

Mr. BURTON. I just want to say that I understand, some of my colleagues may not, but I understand what you're saying. And I think it is unbelievable that somebody's job should be jeopardized because of their religious beliefs that they have to go listen to some of this trash. And I think it is trash.

If they want to talk about how AIDS is transmitted, if they want to give you literature on how AIDS is transmitted, that's fine. But to get into sexual activities or possible sexual activities, where men and women are present together, is just wrong.

I wouldn't want my wife or my family to have to sit through that stuff. And I think this government is way out of line. If we're going to teach people about the dangers of HIV, fine. Let's do it in a responsible way.

But to start putting men and women in a joint session where they're talking about how to put a condom on an artificial penis is just wrong. And if my colleagues don't see that, then there is something wrong.

I yield back the balance of my time.

Mr. MICA. Well, I see that we're well into a vote, and I'd like to thank each of you. I will keep the record open and we will, if there's no objection, allow members from both sides of the aisle to submit questions to you, and if you would respond we'd appreciate it.

We thank you also, the Federal employees who have come forward to testify. We know you subject yourself to possible additional harassment. But we thank you for coming here at your expense and time.

We thank the organizations who have looked at this issue for their input. We are trying to see what the proper role of the Federal Government is in HIV and AIDS training. So we appreciate your contribution to our subcommittee.

We will recess now for approximately 10 to 15 minutes, and then come back for the next panel.

Thank you again. You're excused.

[Recess.]

Mr. MICA. I'll call this meeting of the Civil Service Subcommittee back to order.

We have our third panel with us: Mr. Thomas McFee, Assistant Secretary for Personnel Administration, HHS; Corlis S. Moody, Director of the Office of Economic Impact and Diversity of the Department of Energy; Wardell C. Townsend, Jr., Assistant Secretary for Administration, Department of Agriculture; and Allan Heuerman, Associate Director for Human Resources Systems in the Office of Personnel Management.

Lady and gentlemen, if you will remain standing, raise your right hands.

[Witnesses sworn].

Mr. MICA. Let the record reflect the witnesses answered in the affirmative.

We'll lead off with Mr. Thomas McFee with HHS.

Mr. McFee, are you ready and can you provide us with your testimony or with a condensation of it?

STATEMENTS OF THOMAS MCFEE, ASSISTANT SECRETARY FOR PERSONNEL ADMINISTRATION, HHS; CORLIS S. MOODY, DIRECTOR, OFFICE OF ECONOMIC IMPACT AND DIVERSITY, DEPARTMENT OF ENERGY; WARDELL C. TOWNSEND, JR., ASSISTANT SECRETARY FOR ADMINISTRATION, DEPARTMENT OF AGRICULTURE; AND ALLAN HEUERMAN, ASSOCIATE DIRECTOR, HUMAN RESOURCES SYSTEMS, OFFICE OF PERSONNEL MANAGEMENT

Mr. MCFEE. Good morning, Mr. Chairman, and members of the subcommittee. I am very pleased to be here this morning to discuss the Department of Health and Human Service's workplace policy and training related to AIDS. I'll present a summary and some highlights from my prepared testimony.

When AIDS first emerged as a public health concern in the mid-1980's, the Department of Health and Human Services moved quickly to prevent the spread of HIV/AIDS by raising employee awareness about the disease and to ensure that the work environment was both safe and free from legally prohibited discrimination against affected employees.

On March 24, 1986, then Secretary Otis R. Bowen issued a memorandum to all employees reassuring them that the contact people commonly have in the workplace did not place them at risk of HIV infection. He noted that HIV-infected employees were to be offered the same consideration and benefits available to any employee with a long-term or life-threatening medical condition.

His memorandum was followed by the issuance of the Department's first AIDS policy in 1988. This AIDS policy was followed by widespread employee education, which has been ongoing in some fashion since that time. Since 1986, changes in three areas have affected the issue of dealing with AIDS in the workplace.

First, the number of reported AIDS cases in the country has increased tenfold. To the extent that our employee population mirrors the society as a whole, the number of employees affected by HIV/AIDS has similarly risen.

Second, advances in detection and treatment have made it possible for HIV-infected individuals to maintain a productive work life longer than during the early years of the epidemic. Whereas once HIV/AIDS-infected employees were gone from the work force

before their coworkers were even aware that their colleagues had an illness, they now are more likely to continue to work for a longer period of time. This increases the chances for misunderstanding and discrimination, which impact on morale, productivity, and performance.

Finally, workplace policies, particularly in the area of leave and benefits and reasonable accommodations for disabling conditions, have changed considerably. Supervisors have to respond appropriately to requests for reasonable accommodation, leave, disability, retirement, and other benefits.

Given the impact of these changes, our Department, even prior to the announcement of President Clinton's AIDS training initiative, moved to address the need for further education related to AIDS in the workplace. I have provided the committee with an example of a brochure which we provided our employees with basic information about HIV/AIDS and the Department's policy. This was designed and distributed to all employees through our Employee Assistance Program in the fall of 1993.

The need for AIDS education within the Department varies given the work environment within which our staff are employed. My prepared testimony identifies three levels of risk and the different types of training that are provided for each of these.

At greatest risk for HIV/AIDS infection are our employees providing direct patient care, such as at NIH or the staff of the Indian Health Service clinics, or working in laboratories with blood or blood products. At somewhat less risk are employees who work in settings in which accidents are more common than in the normal office environment.

But even in the areas where there is a minimum level of risk, i.e. the regular office environment where most of our employees work, the risk of AIDS transmission may be minimal but accidents still occur and information is needed about universal precautions in dealing with these situations.

Beyond the obligation to assure a safe environment and reduce any health threat that might occur in the Department, we must prevent discrimination and maintain an environment that fosters organizational and individual performance. Although the medical facts regarding HIV transmission are generally understood on an intellectual level, that understanding does not always translate into appropriate behavior in the workplace. Discrimination and harassment of any kind have a direct and a negative impact on employee performance and morale. Eliminating ignorance that fosters such behavior minimizes the potential for its occurrence.

Discrimination and harassment are issues that are covered as part of the occupational safety training, and they are relevant to employees in all work settings in the Department. Our HIV/AIDS education efforts focused on these issues, with special emphasis given in sessions for supervisors on how to respond to HIV-infected employees or employees with AIDS and to the concerns of their coworkers. Informal feedback from trainers, based upon end of session evaluations, indicated that our employees felt they had learned new things, either about HIV/AIDS or about the Department's policy on AIDS in the workplace.

In responding to the President's initiative, we made an attempt to reach all employees. Face-to-face training sessions were held only in sites with large concentrations of employees, and attendance was required. The Social Security Administration trained 65,000 of their employees, which was almost half of the Department at that time, without using face-to-face training sessions but through satellite and video presentations. Employees who did not wish to attend the session, a self-study guide was made available. All employees were clearly told, however, that they could not discriminate against or harass employees or program beneficiaries affected by HIV/AIDS or any other chronic or disabling illness.

As you requested, my prepared testimony provides the subcommittee with cost information, with training coverage, with authorities for the training, and a discussion of the process that we went through to pick a contractor, High Tech International, to assist us in the development of a model training program. The model program included separate curricula for supervisors and employees, and as I mentioned a self-study guide was made available to the various agencies within the Department. All but two Public Health Service agencies chose to use it for their training. A suggested list of criteria to select in-house trainers was sent out when plans for accomplishing the training were solicited.

The criteria, which was previously provided to the subcommittee, included sensitivity to issues raised by the training, level of knowledge about HIV/AIDS, and the ability to deliver the curriculum.

Two of our components in the Public Health Service have special expertise and responsibilities in AIDS research and education, and have a population that is at higher risk. They elected to provide their own specialized HIV/AIDS training. The Centers for Disease Control and Prevention in Atlanta began HIV/AIDS training before the Presidential initiative was announced. They selected the Red Cross to deliver their training and continue to use them to fulfill the Presidential mandate.

The National Institutes of Health contracted with a local firm, the Whitman-Walker Clinic, well-known for its AIDS education program. NIH pared in-house staff with health educators from Whitman-Walker to deliver a program that added parts of the module that we had developed to cover Federal workplace policy.

At present, there are no plans for followup initiative in the Department. New employee orientations will contain information about the Department's AIDS policy, as they would other policies relevant to working in HHS. Required occupational health and safety programs will of course continue, as will optional health education sessions run by our EAP and occupational health units.

The training, as it unfolded in HHS, did not generate adverse publicity. In fact, there were only a handful of scattered individual complaints brought to my attention. I can report that our response was overwhelmingly positive from our employees.

I credit this response to the careful planning that went into the design of the curriculum, the explicitness from which we stated our objective of focusing on workplace issues, and the caliber of the trainers from within and outside the Department that delivered the curriculum.

I conclude my testimony with some examples of where mandatory training is used in the Department, and I would be happy to answer any of your questions.

[The prepared statement of Mr. McFee follows:]

McFEE

Good Morning Mr. Chairman and Members of the Subcommittee.

I am pleased to be here this morning to discuss the Department of Health and Human Services work place policy and training related to AIDS.

When AIDS first emerged as a public health concern in the mid-1980's, the Department of Health and Human Services moved quickly to prevent the spread of HIV/AIDS by raising employee awareness about the disease and to assure a work environment that was both safe and free from legally prohibited discrimination against affected employees. On March 24, 1986, then Secretary Otis R. Bowen, M.D., issued a memorandum to all employees reassuring them that the contact people commonly have in the work place did not place them at risk of HIV infection. He noted that HIV infected employees were to be offered the same consideration and benefits available to any employee with a long-term or life-threatening medical condition. His memorandum was followed by the issuance of the Department's first AIDS policy in 1988.

As Dr. Bowen stated in his 1986 memorandum, "fear based upon misinformation is both unfortunate and unnecessary." It is such fear that leads to discrimination against employees with HIV/AIDS. Education serves to alleviate fear, reduce the possibility for discrimination or transmission, and assure that HHS employees are informed about and comply with the Department's policies regarding

treatment of workers affected by HIV/AIDS. Thus the Department's first AIDS policy issuance was followed by widespread employee education, which has been on-going in some fashion since that time.

Since 1986 changes in three areas have affected the issue of dealing with AIDS in the work place.

- First, the number of reported AIDS cases in this country has increased over tenfold from about 39,000 in 1986 to 441,528 by the end of 1994.[1] To the extent that our employee population mirrors society as a whole, the number of employees affected by HIV/AIDS has risen similarly.

- Second, advances in detection and treatment have made it possible for HIV infected individuals to maintain a productive work life longer than during the early years of the epidemic. Whereas once HIV/AIDS affected employees were gone from the workplace before co-workers were aware of their colleagues' illness, they now are more likely to continue work for a longer period of time. This increases the chances for misunderstanding and discrimination which impact on morale, productivity, and performance.

- Finally, work place policies, particularly in the areas of

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[1]. The CDC expanded the AIDS case definition in 1993.

leave and benefits and reasonable accommodation for disabling conditions, have changed. Supervisors must respond appropriately to requests for reasonable accommodation, leave, disability retirement, and other benefits.

Given the impact of these changes, our Department -- even prior to the announcement of President Clinton's AIDS training initiative -- had moved to address the need for further education related to AIDS in the work place. A brochure providing employees with basic information about HIV/AIDS and Departmental policy was designed and distributed to all employees through our Employee Assistance Program (EAP) in September 1993.

The need for AIDS education within the Department varies given the work environment in which our staff are employed. At greatest risk for HIV/AIDS infection are our employees providing direct patient care (e.g., staff at the Indian Health Service clinics) or working in laboratories with blood or blood products. These employees receive intensive, special training on blood-borne pathogens (including the AIDS virus) on a regular basis in compliance with occupational health and safety standards.

At somewhat less risk are employees who work in settings in which accidents are more common than in normal office environments. Such settings include loading docks, kitchens, print shops, manufacturing, and emergency services (e.g., firefighters at the

National Institutes of Health). Here again, occupational health and safety requirements dictate a special level of education and training.

At minimal risk are our staff who are employed in office environments. Still accidents can occur, and information about the universal precautions to be taken in dealing with someone who is bleeding was included in our HIV/AIDS education.

Beyond the obligation to assure a safe environment and reduce any health threat that might occur the Department must prevent discrimination and maintain an environment that fosters organizational and individual performance. Although the medical facts regarding HIV transmission are generally understood on an intellectual level, that understanding does not always translate into appropriate behavior. Discrimination and harassment of any kind have a direct and negative impact on employee performance and morale. Eliminating the ignorance that fosters such behavior minimizes the potential for its occurrence.

On a legal note, the Vocational Rehabilitation Act of 1973 as amended to include language from the Americans with Disabilities Act prohibits discrimination against and harassment of individuals who have or are perceived to have a disability. AIDS in its final stages is a disabling condition, but even before the disease takes its toll HIV infected employees may be perceived by their

colleagues to be disabled and treated inappropriately as a result. Whether employees are dealing with program beneficiaries (e.g., patients or individuals applying for disability benefits) or colleagues with HIV/AIDS, they must comply with the requirements of the Vocational Rehabilitation Act of 1973, as amended, and follow Departmental policy.

These issues are not covered as part of occupational safety training, and they are relevant to employees in all work settings in the Department. Our HIV/AIDS education effort focused on these issues, with special emphasis given in sessions for supervisors on how to respond to HIV infected employees or employees with AIDS and to the concerns of their co-workers. Informal feedback from trainers based on end-of-session evaluations indicated that staff felt they had learned something new, either about HIV/AIDS or about the Department's work place AIDS policy.

In responding to the Presidential initiative we made every attempt to reach all employees. Face-to-face training sessions were held only in sites with large concentrations of employees, and attendance was required. For employees who did not wish to attend a session, a self-study guide was made available. All employees were clearly told, however, that they could not discriminate against or harass employees or program beneficiaries affected by HIV/AIDS, or any other chronic or disabling illness.

Over 109,000 employees were trained between September 1993 and March 1995. The direct cost of the training materials and delivery was just over $3.00 per employee trained. If you include the salaries of the attendees, the cost rises to approximately $34 per person trained. Training was provided under the authority of the Government Employees Training Act and P.L. 79-658, as amended, which establishes the Federal occupational health program.

HHS employees -- 130,000 at the time of the training -- are spread all across the country, some in extremely isolated locations. The time frame of a year to meet the Presidential mandate was relatively short given the size and geographic spread of our employee population. Consequently we had five major criteria for selecting a vendor for our training program: availability of an existing program that focused on work place issues and Federal work place policy; experience and reputation for quality in the field of HIV/AIDS training; ability to deliver training to our employees throughout the country; ability to meet our time frame; and cost.

Hi-Tech International, Center for HIV and Substance Abuse Training, was already under contract with the Public Health Service to design and deliver HIV/AIDS training to state and local substance abuse treatment providers. Their HIV/AIDS training was short, appropriate for the work place, and already in the public domain. They were willing and able to work with us to design an additional module to cover the work place policy. All training material would

be in the public domain, could be duplicated in-house, and could be made available in hard copy or on disk to other agencies to tailor for their own training purposes. For these reasons, Hi-Tech was selected. After the program was designed, it was pilot tested and revised before being put in final form.

The model program -- which in its final form included separate curricula for supervisors and employees and a self-study guide -- was made available to the various agencies within the Department, and all but two Public Health Service agencies chose to use it. Training was largely conducted by Hi-Tech's staff or by staff from the Public Health Services' Office of Federal Occupational Health. A few sites used in-house staff to deliver the training. A suggested set of criteria to select in-house trainers was sent out when plans for accomplishing the training were solicited. The criteria, which were previously provided to the Subcommittee, included sensitivity to the issues raised by the training, level of knowledge about HIV/AIDS, and ability to deliver the curriculum.

Two of our components in the Public Health Service have special expertise and responsibilities in AIDS research and education, and they elected to provide their own specialized HIV/AIDS training. The Centers for Disease Control and Prevention (CDC) in Atlanta had begun its HIV/AIDS training before the Presidential initiative was announced. They had selected the Red Cross to deliver their

training and continued to use them to fulfill the Presidential mandate.

The National Institutes of Health (NIH) contracted with a local firm, the Whitman-Walker Clinic, well known for its AIDS education program. NIH paired trained in-house staff with health educators from Whitman-Walker to deliver a program that added parts of the modules on Federal work place policy that were developed by Hi-Tech International to Whitman-Walker's standard curriculum.

At present there are no plans for an agency-wide follow-up initiative. New employee orientations will contain information about the Department's AIDS policy, as they would other policies relevant to working in HHS. Required occupational health and safety programs will, of course, continue, as will optional health education sessions run by our EAP and occupational health units.

The training as it unfolded in HHS did not generate adverse publicity. In fact, although there were scattered individual complaints, the response was overwhelmingly positive. I credit this response to the careful planning that went into the design of the curriculum, the explicitness with which we stated our objective of focusing on work place issues, and the caliber of the trainers from within and outside the Department who delivered the curriculum.

While agency-wide mandatory training is relatively rare, there are currently three such requirements.

1. Ethics Training: Section 301 of Executive Order 12674, signed on April 12, 1989, required the Office of Government Ethics to assist agencies in training staff under the new ethics regulations. Implementing regulations, 5 CFR 2638, Subpart G, mandate annual ethics training for all employees required to file a financial disclosure report (public or confidential). The design of this training has varied from year to year and from one part of the Department to another. The training was first required in 1992, and for that first year it was delivered primarily in a classroom setting. Since that time a number of different formats have been used including self-study guides, video tapes, and satellite broadcasts.

2. Computer Security Training: P.L. 100-235, the Computer Security Act of 1987, requires that all employees receive computer security orientation and training commensurate with their level of responsibility and access to computer systems. The Department has an Automated Information Systems Security Training and Orientation Program Guide that outlines appropriate content and type of training to be delivered depending on the kinds of jobs individuals hold. How the training is delivered varies throughout the Department. In my

office, for example, a self-study computer-based training was loaded on the LAN where each individual could complete it.

3. Project Officer and Contracting Officer Training: Training leading to certification is required for all contracting and project officers before they can serve in those capacities. A standard curriculum with courses tailored to the size and type of contract is delivered throughout the Department in classroom settings.

This concludes my testimony. I would be happy to answer any questions.

Mr. MICA. We thank you for your testimony and will now turn to Corlis S. Moody from the Department of Energy.

Ms. MOODY. Mr. Chairman and Members of the committee, thank you for asking the Department to testify about a very important issue, HIV/AIDS training. HIV/AIDS training is authorized by the Government Employee Training Act, which was amended in 1994, and states, "In order to assist in achieving an agency's mission and performance goals, to improve employee and organizational performance, the head of each agency shall establish, operate, maintain, and evaluate programs for the training of employees."

In addition, the efforts of the Reagan and Bush administrations culminated in President Clinton's memorandum of September 30, 1993, "AIDS at Work," which was a commitment to do everything possible to "prevent discrimination against those infected by HIV." In his memorandum, President Clinton called on each cabinet member to implement "ongoing HIV/AIDS education and prevention programs" by World AIDS Day 1994. The Department's training satisfies the requirements of the Government Employee Training Act and the President's memorandum.

HIV/AIDS creates a range of day-to-day management challenges related to HIV disease—job accommodation and disability requirements, concerns about confidentiality and privacy, discrimination issues, employee fears, harassment of infected workers, health insurance and health care costs, customer concerns, work disruptions, lawsuits and declines in worker productivity and morale.

A review of current events as well as research concerning workplace issues indicates that of the employees' concerns, fear is the greatest. Fearful employees, including managers and supervisors, may act toward others in a manner that leads to unfair treatment, low morale, and productivity problems.

In the past, fear has caused employees to avoid HIV/AIDS classes because of the undue stigma associated with the disease. Some employees feared being perceived as either having HIV/AIDS or knowing someone who does. This type of reasoning was one of the primary factors which led to the requirements listed in the Federal Workplace HIV/AIDS Education Initiative.

The Department's HIV/AIDS training was designed to educate employees and eradicate unnecessary fears so that employees can work together to achieve the Department's mission. The training was also designed to answer present and future work force needs. Let me explain with both national and local statistics.

In 1993, the National Commission on AIDS reported in its publication HIV/AIDS, a Challenge for the Workplace, June 1993. "The majority of the estimated one million HIV-infected individuals are between ages 25 and 44, so about 1 in every 100 adults in this age group is affected. They are most likely to be employed and in their prime working years. Sixty percent of the Nation's work force falls within this age range. People in this age range also are among the most sexually active and therefore at increased risk of contracting HIV."

As people with HIV/AIDS remain at work longer, employees must be able to manage HIV-related workplace concerns on a day-to-day basis. This means, among other things, staying abreast of

health care options, legal and regulatory requirements, coworkers concerns, and maintaining a productive working relationship with affected individuals.

The Department's training was successful in bringing these very topics together in a 2½-hour session. Of the 3,639 headquarters employees who evaluated our training program, 85 percent of employees rated the training as very good or excellent.

This year, the Centers for Disease Control reported that AIDS is now the leading killer of Americans between the ages of 25 to 44. We assume that the incidence of HIV infection for DOE employees is the same as in the general population. Therefore, HIV/AIDS education is of utmost importance to the Department of Energy's employees.

Detailed answers to your requested questions are included in the information attached to the testimony submitted. I will be happy to answer any questions you may have.

[Followup questions and answers of Ms. Moody follow:]

Question #1 - What is the problem in the workplace that your agency's AIDS training is designed to address, and how will you evaluate whether it is successful? Is there, for example, a health problem at your agency related to AIDS?

The Department of Energy's HIV/AIDS training was designed to educate employees and eradicate unnecessary fears of encountering employees or members of the public with HIV. It was also designed to update employees on policy information concerning many administrative procedures related to HIV/AIDS, as well a number of other health and leave issues.

As people with HIV/AIDS remain at work longer, employers must be able to manage HIV-related workplace concerns on a day-to-day basis. This means, among other things, staying abreast of health care options, legal and regulatory requirements, co-workers concerns, and maintaining a productive working relationship with affected individuals. The Department's training was successful in bringing these varied topics together in a two and one-half hour session.

To evaluate success, and compile opinions of the course, an evaluation form was given to each attendee. Of the 3,639 evaluations received at Headquarters for approximately 4,400 attendees, over 95% rated the training in top categories (good, very good and excellent) for overall impression of the training. Fewer than two percent rated the training as "poor" or "fair." Two percent of respondents did not complete the item on overall impression.

A separate evaluation provided by the Red Cross is attached for training performed in late 1993 and early 1994, and this reflects equivalent approval ratings. (A chart reflecting these numbers, as well as formal comments received from employees, is included in Section #2 of Binder #1, in the material provided to the Subcommittee staff on June 14, 1995.)

Based on these evaluations, it can be concluded that the Department was successful in meeting the goals and objectives as listed in the Federal guidelines issued by the Office of National AIDS Policy.

In response to your questions about problems associated with HIV/AIDS, a review of current events, as well as research concerning workplace issues indicates that fear is the greatest problem. Fear causes some employees to not work with someone with HIV/AIDS. Fearful employees may act toward others in a manner that leads to unfair treatment, low morale and productivity problems.

Conversely, employees with HIV/AIDS may fear that others will "find out" about their infection. They fear being mistreated, shamed and shunned, when they must come forward to discuss absences associated with their illness. These employees fear losing their jobs, and fear losing the respect of their fellow employees.

In the past, fear has caused employees to avoid HIV/AIDS classes because of the undue stigma associated with the disease. Some employees feared being perceived as either having HIV/AIDS or knowing someone who does. This type of reasoning was one of the primary factors which led to the requirements listed in the Federal Workplace HIV/AIDS Education Initiative.

Again "fear" is an important factor in computing the costs benefits analysis of this training. While I cannot give you specific dollar amounts, I can assure you that fear of coworkers with HIV/AIDS reduces productivity and increases conflicts. Consequently, managers lose production time. The Department's HIV/AIDS training reduced fear, and as a result, will reduce future loss of productivity and related personnel costs associated with these actions.

HIV/AIDS and other life threatening illnesses have a financial impact on the Department, both directly and indirectly. While the most commonly cited costs are associated with health, life and disability insurance and pension plan payouts, other less recognized costs involve those associated with employee replacement, retraining, and possible legal actions. Because the Department's training focused primarily on specific policies and procedures addressing these issues, we believe in the long run the Department will incur fewer complaints and therefore reduce the potential for any related legal and associated personnel costs.

The training was designed to answer present and future workforce needs. Let me explain with both national and local statistics. In 1993, the National Commission on AIDS reported in its publication, HIV/AIDS: A Challenge for the Workplace, June, 1993. "The majority of the estimated 1 million HIV-infected individuals are between 25 and 44 years of age, so about one in every one hundred adults in this age group is infected. They are most likely to be employed, and in their prime working years. Sixty percent of the nation's work force falls within this age range. People in this age range also are among the most sexually active and therefore, at increased risk of contracting HIV."

This year, the Centers for Disease Control reported that AIDS is now the leading killer of Americans between the ages of 25-44. We assume that the incidents of HIV infection for DOE employees is the same as in the general population. Therefore, HIV education is of utmost importance to the Department of Energy's employees.

Question #2 - Was employee attendance at your agency's AIDS training program mandatory?

Yes. After Kristine Gebbie's (former National AIDS Policy Coordinator) memorandum of April 7, 1994, attendance was required, but no enforcement actions have been taken against employees who did not attend.

Question #3 - How much has your agency spent (including all time employees spent in training) in conducting its AIDS training for employees.

Information in this part of the testimony will be limited to Headquarters training. We will provide information about regional HIV/AIDS education activities on July 17, 1995.

Since 1993, The Department has allocated $127,000 to cover administrative support, development, and class training for the HIV/AIDS initiative at Headquarters. These funds provided enough classes for all Headquarters employees. These will be the only Headquarters contract costs for the initiative.

For Headquarters employees, we estimate that 4,500 employees spent approximately 2.5 hours each in HIV/AIDS training, a total of 11,250 hours. We estimate the average hourly cost per employee to be $31; therefore, salary and training costs for AIDS training for these 4,500 employees is approximately $100 per employee. (Actual training expense, per employee, is $28).

Training costs for regional offices to be reported in July are expected to be less. Training was provided at many offices by employee assistance counselors, staff nurses, and local chapters of the Red Cross.

Question #4 - How does your AIDS training program meet the statutory objectives cited above?

HIV/AIDS creates a range of day-to day management challenges related to HIV disease -- job accommodation and disability requirements, concerns about confidentiality and privacy, discrimination issues, employee fears, harassment of infected workers, health insurance and health care costs, customer concerns, work disruptions, lawsuits, and declines in worker productivity and morale.

The National Commission on AIDS report, HIV/AIDS: A Challenge for the

Workplace, also states that "Managers must balance the needs of HIV-infected employees with the need to ensure a productive and safe workplace -- in compliance with pertinent laws such as the Americans with Disabilities Act, and regulations of the Occupational Safety and Health Administration". Departmental administrative procedures which included equal opportunity employment, employee assistance programs, leave administration, leave bank, insurance issues and disability retirement were all included in the HIV/AIDS training.

A number of administrative and compliance policies have been enacted since 1990. These policies must be communicated clearly to managers and employees. Information about recent Congressional Acts, such as the FEGLI Living Benefits Act, and the Federal Employees Family Friendly Leave Act, were included in the training because both directly relate to HIV/AIDS issues in the workplace. The HIV/AIDS training became a vehicle for managers to be updated about current important issues.

The following compliance issues were an important part of the case studies in the HIV/AIDS training.

(A) The Privacy Act protects medical documentation about a person's illnesses.

(B) The Rehabilitation Act was revised in 1992 to include language from the Americans with Disabilities Act of 1990. The ADA covers people "perceived or regarded as having HIV because of their status in a group perceived as being at high risk (for example, gay men, people of color in urban areas). Also covered are relatives and associates of people with HIV insofar as their association with the infected individual is the reason they are discriminated against. This is an important inclusion, since Federal employees often are caregivers for family members and loved ones.

(C) The Family and Medical Leave Act of 1993, resulted in changes to administrative policy at the Department, and this information directly relates to all employees who may be impacted by serious illnesses. In 1994, the definition of "family" was expanded by the Federal Employees Family Friendly Leave Act. This information and its interpretation was conveyed through this training.

(D) The Occupational Safety and Health Administration's Final Bloodborne Pathogens Standard took effect in March 1992. This standard is designed to protect an estimated 5.6 million employees who work in occupational settings where there is a risk of HIV or hepatitis B (HBV) infection because of exposure to blood and other body fluids. The standard mandates engineering controls, work practices, and personal protective equipment that, combined with employee training, will reduce on-the-job exposure risks. Significantly the standard also applies not only to health care workers but also to "downstream"

employees such as housekeeping staff, janitors, and others. This information was included in the training to answer questions about transmission at work.

Question #5 - What legal authority authorized the AIDS training you conducted?

HIV/AIDS training classes are authorized under the Government Employee's Training Act which states: "In order to assist in achieving an agency's mission and performance goals by improving employee and organizational performance. . ." "Agencies shall establish, operate, maintain, and evaluate programs for the training of employees." As noted earlier, this training was designed to educate employees and eradicate unnecessary fears so that employees can work together to achieve the agency's mission.

President Clinton's memorandum of September 30, 1993, culminated the efforts of the previous administration by calling on cabinet members to implement "ongoing HIV/AIDS education and prevention programs by World AIDS Day, 1994." The Department's training satisfies the requirements of the Government Employee's Training Act, as well as the President's memorandum. In addition, 5 U.S. C. , 7901 authorizes agencies to provide health service programs for their employees.

Question #6 - Who selected the individual trainers for your AIDS training program? What criteria were used in making that selection? Please identify and provide copies of any questionnaires, rating guides, or other documents used in making those selections?

Contractors were selected by Corlis S. Moody, Director of the Office of Economic Impact and Diversity, and Donald Donaldson, a Department of Energy Federal employee. Mr. Donaldson, a nationally recognized trainer, was assigned to lead the program because of his training qualifications, his teaching experience, educational background, and interest in HIV/AIDS.

Representatives from our personnel department were chosen from the Office of Employee Relations because of their job responsibilities which include training in personnel and managerial issues, as well as experience with the subject matter. These instructor's names and positions in the Department are included in the Introduction Section of the Binders submitted previously.

The Department used two contracting sources for the Federal Workplace HIV/AIDS Education Initiative. The companies trained and hired their own instructors. The Red

Cross used a training class to certify their instructors. Instructors of NOVA Research were hired by NOVA, and a review was made of their qualifications as listed in their capabilities statement. Donald Donaldson also monitored the classes and was responsible for improvements, as well as contractor oversight. He also instructed some of the classes. This information was provided to you previously.

Because the Department was a lead agency and attentive to the time frames stipulated in President Clinton's memorandum, the Department acted quickly and followed the lead of the White House Executive Offices and selected the National Chapter of the American Red Cross to conduct pilot sessions.

The Department initiated several pilot sessions with both Red Cross and Nova Research. Following the Federal guidelines for the initiative, the Department looked for instructors with proven track records in HIV education, and a company that could retain a staff of competent, consistent, reliable, instructors who could follow the Department's specific directions for the training.

Much of the information which shaped the Department's HIV training was designed to answer questions and gain experience from input by the members of the pilot groups (which included almost every major DOE organization, and Operations Offices).

NOVA Research was chosen because they could conduct an HIV/AIDS class which could evolve to meet the needs of our employees. Also they were chosen because of the experience of their instructors, as well as the experience they had with other organizations as listed in their capability statement. NOVA Research also was capable of providing the production capabilities to help publish a definitive HIV/AIDS workbook, later to become the Department's training manual, Walkin' The Talk.

Employee evaluations, both oral and written, were used to institute adjustments and ensure that the training objectives were met. Approximately 3,600 evaluations were submitted previously. As well, Mr. Donaldson coordinated with other agencies to enlist their suggestions and "lessons learned." He would then discuss this information with the trainers.

Question #7 - Do you have plans to do follow-up training?

Yes. Future training will provide information as its relates to other health and personnel issues, not just HIV/AIDS. Disease transmission information will be included which covers TB, Hepatitis B, Legionnaire's Disease, Ebola, HIV/AIDS and Bloodborne Pathogens. These classes will be provided on a voluntary basis and will be instructed by agency personnel and training experts, as well as by medical or

science professionals. However, policies and procedures which apply to HIV/AIDS, as well as all other life threatening illnesses, will be a part of required training for new supervisors and managers (as well as any managers and supervisors who may not have had the HIV/AIDS training.)

Question #8 - In the wake of adverse publicity AIDS training received, did your agency review its own training program? If so, what were the results of your review, and did you alter your program in any way after the review?

Yes. The Department's HIV/AIDS training was constantly monitored and changed to meet the needs of the employees and to meet the stated objectives and goals. Employee evaluations, recommendations, and opinions were considered very carefully.

As an example, information about First Aid Kits, their contents and locations became very important to employees. Employees wanted to know more about the blood supply and this information was added to the course. Television programs and newspaper articles about various types of viruses, especially Ebola, caused employees to ask more scientific questions. The novels Hot Zone, and The Coming Plagues added to these questions. As a result, NOVA Research Instructors were required to read a scientific and historical account of viruses, The Dancing Matrix by Renee Hellig.

Also, after the article, "Sessions on AIDS" by Mike Causey in the Washington Post which was critical of HIV/AIDS training at the Office of Personnel Management, the Department of Energy became even more sensitive to reports of employee concerns. The Department of Energy continually took every effort to make the HIV training effective, appropriate, and sensitive to the needs of all employees. Because of the standards developed for the Department's training, many agencies have looked to the Department for leadership in the development of their own programs.

The Department of Energy followed the Federal guidelines issued by the Office of National AIDS Policy very closely. Personnel representatives and Mr. Donaldson monitored the classes for quality. During the training at Headquarters very few employees asked to be excluded from the classes. Through their organizational training coordinators and their managers, employees knew they had the right to refuse the class and arrange for alternative education which included a self study manual and watching the Red Cross Video, "AIDS in the Workplace."

Any employee who had concerns about the training could call the Department's contacts, Donald Donaldson or Paul Harris. Responses were overwhelming in favor of the training with few complaints. Instructors were informed immediately of both positive and negative evaluations and changes to the training were made immediately.

Question #9 - What other agency-wide mandatory programs has your agency conducted over the last five years, and how does the AIDS training program compare in design and delivery with those other programs?

The Department provides annual mandatory ethics training to employees at the GS/GM 13 level and above, as required by Part 2638 of 5 CFR. Employees who have security clearances are required to attend annual briefings. Personnel Management training is required for newly appointed supervisors. In some occupational series, job-related training is required to ensure technical competence and compliance with safety and health laws and regulations.

The design and delivery of the HIV/AIDS is very much like the other required courses. For instance, the HIV/AIDS course had many case studies which reflected the many different administrative and policy issues concerning HIV/AIDS in the workplace. Many of these case studies were used for managers and all other employees. The evaluation was very much like the evaluation instrument used for other classes.

Question #10 - Why did it take your agency so long to provide the information Chairman Mica asked for in his letter of March 30, 1995? As of the date of this letter, we have not yet received that information. Please identify each person who worked on preparing your response, describe his or her role, and indicate how long it took each person to accomplish his or her tasks.

The Department first responded to the Committee with a letter and a copy of the training manual which was mailed on May 12, 1995. Unfortunately, the Committee staff did not receive them. Upon learning that the letter had not been received, I asked Donald Donaldson to hand deliver the material on June 14, 1995. We have been in contact with your staff since June 1 to inform you of the progress of the remainder of the information. We certainly want to work very closely with your staff on these issues.

The employees working on this project took a great deal of time to compile a package of information which would be organized and responsive to the Committee's requests. The compilation process, as well as the review process, took many hours. Because of time constraints and limited personnel, we have not yet totally concluded the survey of our regional offices, and will need until July 17 to provide this information.

Mr. Donaldson is the only Department employee designated to research and coordinate this project. Since receipt of your March 30 letter, he has spent all of his time on this project.

Mr. MICA. Thank you for your testimony. We'll call now on Wardell Townsend from the Department of Agriculture, welcome.

Mr. TOWNSEND. Thank you, Mr. Chairman.

I am pleased to appear before you on behalf of Secretary Dan Glickman to testify on the topic of training at the Department of Agriculture, and more specifically, on our implementation of the Federal Workplace HIV/AIDS Education Initiative.

Before I address the specific questions that were raised in your invitation to testify, I would like to set the context for USDA's HIV/AIDS training. For almost 10 years it has been widely recognized that HIV/AIDS, and AIDS, are health and employment policy concerns for both public and private employers.

In 1988, President Reagan directed every Federal agency, and he asked private sector employers as well, to provide information and education services, to employees regarding HIV and AIDS. As part of this effort, President Reagan asked the Attorney General to review how the Federal Government should provide direction and leadership in discouraging discrimination against HIV-infected individuals.

There have been ongoing efforts since this time to educate the Federal work force on HIV/AIDS issues. On April 21, 1995, the current Director of the National AIDS Policy Office distributed a memorandum to all agencies clarifying the HIV/AIDS Training initiative.

While each agency must have HIV/AIDS training programs, each agency should determine the scope of and participation in such training. The memorandum also stated that the standards chosen by the agencies for this determination should be consistent with the personnel policies for similar training programs.

As the Assistant Secretary for Administration, I am also USDA's Safety and Health Officer. In that capacity, I oversee a number of programs regarding safety, including training in the areas of radiation safety and fire fighting safety. And these, of course, would enhance the workplace and make it a safer environment for all Federal workers. I firmly believe that we have a responsibility to our employees to educate them regarding what is a potential risk within their work environment.

As a result of an alarming growth rate, many people have developed misconceptions regarding HIV/AIDS. Many of our managers in the work force want to better understand the legal and personnel issues in order to appropriately respect the rights of their employees who may have HIV—who may be HIV positive.

In addition, many employees who have coworkers with the disease want to know how they can be supportive and responsive. However, in some cases, they are fearful of contracting the disease from the same coworkers.

In summary, I'd like to address several of the specific questions raised in your invitation to testify, knowing that my full statement will be inserted in the record.

First, the Federal Workplace HIV/AIDS Education Initiative was designed to provide information to Federal employees that was preventive in nature. As early as January 1990, USDA had a written policy on AIDS in the workplace in compliance with the Office of

Personnel Management's guidelines, which authorizes agencies to establish health service programs for employees.

The purpose of this policy was to increase the understanding of AIDS and to facilitate the proper handling of personnel situations where AIDS is a factor. The goal of the Federal Workplace HIV Education Initiative is to provide all Federal employees with HIV/AIDS prevention information, and with information on workplace policies and procedures relating to persons living with HIV/AIDS and other chronic diseases.

This initiative is expected to improve employees' organizational performance in four ways: one, by informing employees regarding their obligations to comply with civil rights laws and other applicable statutes in their activities affecting other employees and program beneficiaries who have HIV or AIDS; two, educating Federal employees in HIV/AIDS prevention to help protect them from contracting the disease, either inside or outside the workplace, thereby prolonging their lives and on-the-job productivity and promoting a safe work environment, free of disruption and fear; three, educating Federal employees on workplace policies and procedures related to their responsibilities when interacting with and providing services to coworkers and customers living with HIV/AIDS or other chronic illnesses, as well as overall organizational performance; and fourth, informing USDA employees of risks to their safety and health that might arise in the workplace so that they will have the facts to enable them to respond to such risks if they arise.

Finally, as we have discussed with your subcommittee staff, it has taken USDA a considerable amount of time to gather the needed information to respond to the chairman's letter of March 30, 1995. Our organization, having over 100,000 employees and some 29 agencies around the world, we've delivered on just about all of the responses and I think in the next week or so you'll have the balance of USDA's responses.

[The prepared statement of Mr. Townsend follows:]

STATEMENT OF WARDELL C. TOWNSEND, JR.
ASSISTANT SECRETARY FOR ADMINISTRATION
U. S. DEPARTMENT OF AGRICULTURE
BEFORE THE
SUBCOMMITTEE ON CIVIL SERVICE
OF THE
COMMITTEE ON GOVERNMENT REFORM AND OVERSIGHT

Thursday, June 22, 1995

The USDA Federal Workplace HIV/AIDS Education Initiative

Mr. Chairman. I am pleased to appear on behalf of Secretary Glickman to testify on the topic of training at the Department of Agriculture (USDA), and more specifically, on our implementation of the Federal Workplace HIV/AIDS Education Initiative.

Before I address the specific questions that were raised in your invitation to testify, I would like to set the context for USDA's HIV/AIDS training. For almost ten years, it has been widely recognized that HIV and AIDS are health and employment policy concerns for both public and private employers. In 1988, President Reagan directed every Federal agency, and he asked private sector employers as well, to provide information and education services to employees regarding HIV and AIDS (Memorandum for Head of Departments and Agencies, August 5, 1988). As part of this effort, President Reagan asked the Attorney General to review how the Federal Government should provide direction and leadership in discouraging discrimination against HIV-infected individuals. There have been ongoing efforts since this time to educate the

Federal workforce on HIV/AIDS issues.

On September 30, 1993, President Clinton issued memorandum to all Federal agencies directing them to develop and fully implement comprehensive HIV/AIDS workplace policies and an employee education program. USDA took great care in designing an educational program as suitably informative on the issues surrounding HIV/AIDS as possible and to ensure that the material was sensitively administered to our employees. To assist agencies in implementing the President's directive, the former National AIDS Policy Office coordinator issued on April 7, 1994, guidelines for the Federal Workplace HIV/AIDS Education Initiative stating that the HIV/AIDS training was mandatory for every Federal employee. USDA's training was conducted pursuant to these guidelines.

On April 21, 1995, the current director of the National AIDS Policy Office distributed a memorandum to all agencies clarifying that, while each agency must have an HIV/AIDS training program, each agency should determine the scope of and participation in such training. The memorandum also stated that the standard chosen by the agencies for this determination should be consistent with personnel policies for similar training programs.

As the Assistant Secretary for Administration, I am also the USDA Safety and Health Officer. In that capacity, I oversee a number of programs that make the workplace a safer environment for all Federal workers. I firmly believe that we have a responsibility to our employees to educate them regarding what they believe to be potential risks within their work environment.

In the United States, AIDS is now the leading cause of death for Americans in their 20s, 30s, and 40s, a large segment of the working population. Even if the average Federal worker doesn't yet know someone with HIV or AIDS, the chances are that he or she soon will. We are not sure of the exact number of Americans who have been exposed to the AIDS virus. This means any number of people we know, work with, or come in contact with may have HIV or AIDS, and may or may not know it. AIDS is no longer confined to certain groups. It is growing at alarming rates among Americans in the prime of life, among minority groups, and among women and children.

As the result of this alarming growth rate, many people have developed misconceptions regarding HIV/AIDS. Many of our managers in the federal workforce want to better understand the legal and personnel issues in order to appropriately respect the rights of their employees who may be HIV positive. In addition, many employees who have co-workers with the disease want to know how they can be supportive and responsive and, in some cases, are fearful of contracting the disease from these same co-workers.

I would like to address the specific questions raised in your invitation to testify before this subcommittee.

First, the Federal Workplace HIV/AIDS Education Initiative was designed to provide information to Federal employees that was preventive in nature. As early as January 1990, USDA had a written policy on AIDS in the workplace in compliance with Office of Personnel Management guidelines, and 5 USC 7901, which authorizes agencies to establish health service programs for

employees. The purpose of this policy was to "increase their understanding of AIDS and to facilitate the proper handling of personnel situations where AIDS is a factor".

Second, USDA, did require that all employees receive HIV/AIDS training in compliance with the original guidelines issued by the National AIDS Policy Office. At the same time, accommodations were made available to those employees with strong religious or moral objections to attending this training. Under the new White House guidelines, issued on April 21, 1995, separate HIV/AIDS training is no longer mandatory. USDA therefore has included the HIV/AIDS education program as an integral part of its training on such subjects as health education, substance abuse, sexual harassment, and other health and safety related topics.

Third, USDA has spent approximately $200,000 on the delivery of HIV/AIDS training. Over 61,000 employees have received training lasting two and one half hours. Our best estimate of the cost of their time spent in training, including training and additional materials is $3.5 million. As I'm sure this subcommittee is aware, similar programs have been conducted by many private sector companies, both to alleviate the concerns and fears of their employees and to ensure that their employees were aware of their legal obligations to those with HIV/AIDS.

Fourth, the goal of the Federal Workplace HIV/AIDS Education Initiative is to provide all Federal employees with HIV/AIDS prevention information and with information on workplace policies and procedures related to persons living with HIV/AIDS and other chronic illnesses. This initiative is expected to improve employee and organizational performance by:

1) Informing employees regarding their obligations to comply with the civil rights laws and other applicable statutes, in their work activities affecting other employees or program beneficiaries with HIV/AIDS;

2) Educating Federal employees in HIV/AIDS prevention to help protect them from contracting the disease, either inside or outside the workplace, thereby prolonging their lives and on-the-job productivity, and promoting a safe work environment free from disruption and fear;

3) Educating Federal employees on workplace policies and procedures related to their responsibilities when interacting with, and providing services to, co-workers and customers living with HIV/AIDS and other chronic illnesses, as well as overall organizational performance; and

4) Informing USDA employees of risks to their safety and health that might arise in the workplace so that they will have the facts to enable them to respond to such risks if they arise.

Fifth, the authority for conducting this HIV/AIDS training was not statutory but rather based on the Presidential directive cited earlier. In our opinion this training program fulfilled the objectives of assisting USDA in achieving its mission and performance goals by improving employee and organizational performance.

Sixth, in implementing the HIV/AIDS Education Program, USDA used the "Train the Trainer" methodology . This method allowed a group of 184 individuals to be trained to conduct the full coursework for other USDA employees. This was a cost-effective approach to educating our world-wide workforce. Nine "Train the Trainer" sessions were held. The USDA instructors were selected by their agencies for these training sessions based upon an assessment of the individual's capabilities. Some agencies preferred to enlist their health personnel; while others used human resource professionals.

Seventh, as I mentioned earlier, further HIV/AIDS education will be conducted as an integral part of USDA's ongoing training on a variety of health and safety related issues.

Eighth, during the course of "Train the Trainer" sessions, evaluation and review of the materials were ongoing. Some employees raised personal objections to participating in the training course. As a result, those employees were permitted to forego the training. Constructive criticisms were used to upgrade and improve the training wherever possible. USDA took great care to ensure that our training program was suitably informative and sensitively administered. An introduction to the HIV/AIDS Education satellite video teleconference was written and broadcast to assure viewers that their personal beliefs were not under attack.

Ninth, USDA conducts several mandatory training programs, for example agency-wide mandatory ethics training. The requirement to conduct annual ethics training rests in regulation rather than law. Executive Order 12674 of April 12, 1989, required agencies to develop annual

training plans, which include mandatory briefings on ethics and standards of conduct for certain groups of employees, including senior executives, filers of confidential disclosure reports and others. Approximately 25,000 employees within the Department must be trained each year. Since issuance of that Executive Order, the Office of Government Ethics codified this annual training requirement in Title 5 of the Code of Federal Regulations (5 CFR 2638.704). Both USDA Ethics training and the Federal Workplace HIV/AIDS Education Initiative are conducted through a variety of methods including teleconferences and on-site training sessions.

Finally, as we have discussed with subcommittee staff, it has taken USDA a considerable period of time to gather the information needed to respond to the Chairman's letter of March 30, 1995. With an organization of over 100,000 employees in 29 agencies worldwide, an extensive effort was required to collect the information requested. We estimate that the request generated over 100 pounds of documents that required hundreds of staff-hours to produce and review. Much of what was requested was forwarded last week and efforts are under way to expedite and finalize the assembly of the remaining items.

I would like to thank you for the opportunity to discuss the Federal Workplace HIV/AIDS Education Initiative at USDA.

I would be pleased to respond to questions from the subcommittee.

Mr. MICA. We thank you for your testimony. And without objection, all of the witnesses' complete statements will be made a part of the record.

Our last witness in this panel is Allan Heuerman, with the Office of Personnel Management. We saved the best for last. Welcome, and you're recognized.

Mr. HEUERMAN. Thank you, Mr. Chairman, members of the subcommittee.

We appreciate this opportunity to be here today to discuss OPM's role in designing, implementing and overseeing the training of Federal employees. I will summarize my submitted statement.

The heads of Federal agencies and OPM both have responsibilities for training Federal employees that are defined in law. Agency heads are required to establish, operate, maintain and evaluate their own training programs. Primary responsibility for determining the types and methods of training to be used, as well as evaluating the results of training, rests with agency heads.

Under this authority, agencies conduct a great deal of employee training each year. For example, in fiscal year 1992, the most recent year for which we have data, Federal agencies sent employees to training in about 2.4 million instances.

OPM's statutory role involves coordinating and promoting Federal employee training programs, in addition to issuing regulations and collecting certain information. We exercise this leadership responsibility primarily through an interagency group of training directors, the Human Resource Development Council.

We participate in joint developmental projects, share best practices, and identify innovative approaches. OPM is expressly prohibited by law from prescribing the details of training programs that are designed by an agency for its own work force. As far as OPM's oversight authority is concerned, we are authorized to ask agencies to provide whatever information is needed for effective supervision and review of training programs for Federal employees.

The OPM Director also has authority to enforce Civil Service laws and regulations, including those relating to training. This authority is quite broad.

Consequently, we do not believe there is a need for an expanded statutory authority to conduct oversight.

Mr. Chairman, you also asked me to address the administration's HIV/AIDS training program. For approximately 10 years, it has been widely recognized that HIV and AIDS—both from a health standpoint and an employment policy standpoint—are a concern of both public and private employers. In 1988, President Reagan directed every Federal agency to provide information and education services to employees regarding HIV and AIDS.

President Reagan also directed OPM to offer Federal agencies assistance in this endeavor. Since 1988, there have been ongoing efforts at educating our work force on this issue. During this time, training on HIV and AIDS in the workplace has become a standard feature of employee health services programs in the government.

More recently President Clinton in November 1993, directed agency heads to implement HIV/AIDS training programs and to develop workplace policies which assure a nondiscriminatory work-

place. OPM helped distribute this directive by sending it to personnel directors of Federal agencies.

OPM staff also informally reviewed and commented on the recommended guidelines for the Federal workplace HIV/AIDS initiative produced by the Office of National AIDS Policy. The administration's policy with regard to HIV/AIDS training, as with previous administrations, is based on the premise that it is in the employer's interest to have an informed and educated work force with regard to HIV/AIDS as a health and workplace issue.

The policy continues a requirement not to discriminate against employees who are HIV-infected or who have other disabling medical conditions. We believe that by providing information instead of misconceptions, HIV/AIDS training helps to prevent workplace disputes and disruptions. For example, there have been instances of employees refusing to work in the same office as a co-worker infected with HIV.

By preventing such incidents, the training can help enhance productivity and ensure that all employees are treated fairly. HIV/AIDS training is not the first governmentwide training mandate. Other witnesses have also alluded to the Computer Security Act, training required in government ethics, and training for certification with respect to contracting and project officers before they can serve in those capacities.

Mr. Chairman, this concludes my testimony. I hope this information has been helpful to you. I would be glad to answer any questions.

[The prepared statement of Mr. Heuerman follows:]

STATEMENT OF
ALLAN HEUERMAN
ASSOCIATE DIRECTOR, HUMAN RESOURCES SYSTEMS SERVICE
U.S. OFFICE OF PERSONNEL MANAGEMENT

before the

SUBCOMMITTEE ON CIVIL SERVICE
COMMITTEE ON GOVERNMENT REFORM AND OVERSIGHT

on

OVERSIGHT OF CIVIL SERVICE TRAINING PROGRAMS

JUNE 22, 1995

MR. CHAIRMAN AND MEMBERS OF THE SUBCOMMITTEE:

THANK YOU FOR INVITING ME HERE TODAY TO DISCUSS OPM'S ROLE IN DESIGNING, IMPLEMENTING, AND OVERSEEING THE TRAINING OF FEDERAL EMPLOYEES.

THE HEADS OF FEDERAL AGENCIES AND OPM BOTH HAVE RESPONSIBILITIES FOR TRAINING FEDERAL EMPLOYEES THAT ARE DEFINED IN LAW. AGENCY HEADS ARE REQUIRED TO ESTABLISH, OPERATE, MAINTAIN, AND EVALUATE THEIR OWN TRAINING PROGRAMS. PRIMARY RESPONSIBILITY FOR DETERMINING THE TYPES AND METHODS OF TRAINING TO BE USED, AS WELL AS EVALUATING THE RESULTS OF THE TRAINING, RESTS WITH AGENCY HEADS.

UNDER THIS AUTHORITY, AGENCIES CONDUCT A GREAT DEAL OF EMPLOYEE TRAINING EACH YEAR. FOR EXAMPLE, IN FISCAL YEAR 1992, THE MOST RECENT YEAR FOR WHICH WE HAVE DATA, FEDERAL AGENCIES SENT EMPLOYEES TO TRAINING IN ABOUT 2.4 MILLION INSTANCES. TRAINING REMAINS VERY IMPORTANT IN A PERIOD OF DOWNSIZING, SINCE EMPLOYEES WHO STAY IN

THE FEDERAL WORKFORCE NEED TO BE PREPARED TO DO MORE OR DIFFERENT WORK.

OPM'S STATUTORY ROLE INVOLVES COORDINATING AND PROMOTING FEDERAL EMPLOYEE TRAINING PROGRAMS. WE EXERCISE OUR LEADERSHIP IN COLLABORATION WITH AN INTERAGENCY GROUP OF TRAINING DIRECTORS, THE HRD COUNCIL. WE PARTICIPATE IN JOINT DEVELOPMENTAL PROJECTS, SHARE BEST PRACTICES, AND IDENTIFY INNOVATIVE APPROACHES. WE ARE EXPRESSLY PROHIBITED BY LAW FROM PRESCRIBING THE DETAILS OF TRAINING PROGRAMS THAT ARE DESIGNED BY AN AGENCY STRICTLY FOR ITS OWN WORKFORCE.

OPM'S DIRECT TRAINING DELIVERY ROLE IS BECOMING LESS EXTENSIVE DUE TO PRIVATIZATION. HOWEVER, OPM WILL CONTINUE TO DEVELOP THE GOVERNMENT'S MANAGEMENT AND EXECUTIVE TALENT AT THE FEDERAL EXECUTIVE INSTITUTE AND THE MANAGEMENT DEVELOPMENT CENTERS.

AS FAR AS OPM'S OVERSIGHT ROLE IS CONCERNED, WE ARE AUTHORIZED TO ASK AGENCIES TO PROVIDE WHATEVER INFORMATION IS NEEDED FOR EFFECTIVE SUPERVISION AND REVIEW OF TRAINING PROGRAMS FOR FEDERAL EMPLOYEES. THIS AUTHORITY IS ALREADY QUITE BROAD, SO WE DO NOT BELIEVE THERE IS A NEED FOR EXPANDED STATUTORY AUTHORITY TO CONDUCT OVERSIGHT.

IT IS MORE IMPORTANT, I THINK, TO UNDERSTAND THE CONTEXT IN WHICH OPM CARRIES OUT THIS OVERSIGHT RESPONSIBILITY. AS I MENTIONED EARLIER, A TREMENDOUS NUMBER OF TRAINING PROJECTS ARE BEING

CONDUCTED THROUGHOUT THE GOVERNMENT, AND OUR EXPERIENCE HAS BEEN THAT ONLY A VERY LIMITED NUMBER OF QUESTIONABLE OCCURRENCES HAVE BEEN UNEARTHED IN FEDERAL TRAINING PROGRAMS OVER MANY, MANY YEARS. IT MUST ALSO BE UNDERSTOOD THAT OPM'S RESOURCES ARE EXTREMELY LIMITED AND SHRINKING. IN THIS ENVIRONMENT, WE MUST TAKE AN APPROACH TO OVERSIGHT THAT APPLIES THE LIMITED RESOURCES WE CAN DEVOTE TO IT MOST FRUGALLY AND EFFECTIVELY. THIS MEANS ESSENTIALLY THAT WE RESPOND WHEN ALLEGED ABUSES OF AGENCIES' AUTHORITY ARE BROUGHT TO OUR ATTENTION. WE TAKE OUR OVERSIGHT ROLE VERY SERIOUSLY, BUT ATTEMPTING TO MONITOR CLOSELY--ON A ROUTINE BASIS--EVERY ASPECT OF EVERY TRAINING PROGRAM AS IT IS IMPLEMENTED IN EACH AGENCY WOULD BE NEITHER FEASIBLE NOR A WISE USE OF RESOURCES.

MR. CHAIRMAN, YOU ALSO ASKED ME TO ADDRESS THE ADMINISTRATION'S HIV/AIDS TRAINING PROGRAM. FOR ABOUT TEN YEARS NOW, IT HAS BEEN WIDELY RECOGNIZED THAT HIV AND AIDS BOTH FROM A HEALTH STANDPOINT AND AN EMPLOYMENT POLICY STANDPOINT ARE A CONCERN OF BOTH PUBLIC AND PRIVATE EMPLOYERS. IN 1988, PRESIDENT REAGAN DIRECTED EVERY FEDERAL AGENCY, AND HE ASKED THE PRIVATE SECTOR, TO PROVIDE INFORMATION AND EDUCATION SERVICES TO EMPLOYEES REGARDING HIV AND AIDS (MEMORANDUM FOR HEADS OF DEPARTMENTS AND AGENCIES, AUGUST 5, 1988). PRESIDENT REAGAN ALSO DIRECTED OPM TO OFFER FEDERAL AGENCIES ASSISTANCE IN THIS ENDEAVOR. IN ADDITION, HE ASKED THE ATTORNEY GENERAL TO REVIEW HOW THE FEDERAL GOVERNMENT SHOULD PROVIDE DIRECTION AND LEADERSHIP IN DISCOURAGING DISCRIMINATION AGAINST HIV-INFECTED INDIVIDUALS.

SINCE 1988, THERE HAVE BEEN ONGOING EFFORTS AT EDUCATING OUR WORKFORCE ON THIS ISSUE. DURING THIS TIME, TRAINING ON HIV AND AIDS IN THE WORKPLACE HAS BECOME A STANDARD FEATURE OF EMPLOYEE HEALTH SERVICES PROGRAMS IN THE UNITED STATES. GOVERNMENT AGENCIES ARE AUTHORIZED BY LAW TO PROVIDE HEALTH SERVICES PROGRAMS TO THEIR EMPLOYEES.

MORE RECENTLY, PRESIDENT CLINTON, IN NOVEMBER 1993, DIRECTED AGENCY HEADS TO IMPLEMENT HIV/AIDS TRAINING PROGRAMS AND TO DEVELOP POLICIES WHICH ASSURE A NON-DISCRIMINATORY WORKPLACE (MEMORANDUM FOR THE HEADS OF EXECUTIVE DEPARTMENTS AND AGENCIES, SEPTEMBER 30, 1993). OPM HELPED DISTRIBUTE THIS DIRECTIVE BY SENDING IT TO PERSONNEL DIRECTORS. OPM STAFF ALSO INFORMALLY REVIEWED AND COMMENTED ON THE RECOMMENDED GUIDELINES FOR THE FEDERAL WORKPLACE HIV/AIDS INITIATIVE PRODUCED BY THE OFFICE OF NATIONAL AIDS POLICY. (GUIDELINES FOR THE FEDERAL WORKPLACE HIV/AIDS EDUCATION INITIATIVE "AIDS AT WORK," APRIL 7, 1994). OPM WORKED WITH THE DEPARTMENT OF HEALTH AND HUMAN SERVICES ON DEVELOPING AN HIV/AIDS CURRICULUM AND TRAINING MANUALS.

THE ADMINISTRATION'S POLICY WITH REGARD TO HIGHLIGHTING IDENTIFIED CONCERNS WITH HIV/AIDS, AS WITH PREVIOUS ADMINISTRATIONS, IS BASED ON THE PREMISE THAT IT IS IN THE EMPLOYER'S SELF INTEREST TO HAVE AN INFORMED AND EDUCATED WORKFORCE WITH REGARD TO HIV/AIDS AS A HEALTH AND WORKPLACE ISSUE. THE POLICY CONTINUES THE REQUIREMENT NOT TO DISCRIMINATE AGAINST EMPLOYEES WHO ARE HIV-INFECTED OR WHO HAVE OTHER DISABLING MEDICAL CONDITIONS. WE BELIEVE THAT BY

PROVIDING INFORMATION INSTEAD OF MISCONCEPTIONS. HIV/AIDS TRAINING HELPS TO PREVENT WORKPLACE DISRUPTIONS. FOR EXAMPLE, THERE HAVE BEEN INSTANCES OF EMPLOYEES REFUSING TO WORK IN THE SAME OFFICE AS A CO-WORKER WITH HIV. BY PREVENTING SUCH INCIDENTS, THE TRAINING CAN HELP ENHANCE PRODUCTIVITY AND ENSURE THAT EMPLOYEES ARE TREATED FAIRLY. AT THE SAME TIME, WE UNDERSTAND THAT SOME EMPLOYEES MAY HAVE STRONG, PERSONAL OBJECTIONS TO PARTICIPATING IN THESE TRAINING COURSES. IN SUCH INSTANCES, IT IS UP TO EACH AGENCY AS TO HOW TO HANDLE THESE SITUATIONS. FOR EXAMPLE, USDA HAD SOME EMPLOYEES WHO HAD STRONG RELIGIOUS OR MORAL OBJECTIONS TO THE TRAINING, AND THE DEPARTMENT MADE ACCOMMODATIONS FOR THEM.

HIV/AIDS TRAINING IS NOT THE FIRST GOVERNMENTWIDE TRAINING MANDATE. THE COMPUTER SECURITY ACT OF 1987 REQUIRED THAT ALL FEDERAL EMPLOYEES BE TAUGHT THE IMPORTANCE OF COMPUTER SECURITY, BASIC COMPUTER SECURITY POLICIES, AND EMPLOYEES' RESPONSIBILITY FOR COMPUTER SECURITY. ALSO, IN 1992, THE OFFICE OF GOVERNMENT ETHICS REQUIRED THAT EVERY FEDERAL EMPLOYEE RECEIVE AN ORIENTATION IN ETHICS. IN ADDITION, TRAINING FOR CERTIFICATION IS REQUIRED FOR ALL CONTRACTING AND PROJECT OFFICERS BEFORE THEY CAN SERVE IN THOSE CAPACITIES. AS IN THE CASE OF THE HIV/AIDS TRAINING, GUIDELINES WERE ISSUED TO HELP ASSURE UNIFORMITY OF THE INFORMATION DELIVERED TO EMPLOYEES.

I HOPE THIS INFORMATION HAS BEEN HELPFUL TO YOU, MR. CHAIRMAN. IF THERE ARE AREAS YOU WOULD LIKE TO DISCUSS IN GREATER DETAIL, I WOULD BE HAPPY TO RESPOND TO YOUR QUESTIONS.

Mr. MICA. Again, I thank all the panelists.

We have another vote, but I think I've got time to get my questions in, and I'll start with Mr. Heuerman. You testified that there were about 2.4 million employee training sessions; is that correct?

Mr. HEUERMAN. Yes, what we call instances of employee training. That is when an employee has been sent——

Mr. MICA. And these, it appears, last about 2, 2½ hours. I guess some of the sessions are 2½ hours and some of them have up to 4-day training sessions for the trainers.

Mr. HEUERMAN. In terms of the HIV/AIDS training that was done under the administration's policy, it is my understanding that these range from 2 to 3 hours. I believe the guidelines——

Mr. MICA. So we're looking at about 5 million hours?

Mr. HEUERMAN. Well, the 2.4 instances is total training of all kinds.

Mr. MICA. Six million hours, if we took about 2½ hours, it would be 5 to 6 million employee hours.

Mr. HEUERMAN. Well, again, the 2.4 million that I quoted in my testimony refers to all kinds of training, not HIV/AIDS training.

Mr. MICA. Oh, I see, OK.

Mr. HEUERMAN. Yes, it is total training for that fiscal year.

Mr. MICA. Do you have any estimate of what the cost is for the Government? Some previous witnesses have testified they estimated it was $80 to $100 million for the AIDS training programs, both for the in-house trainers and also for the employees.

Mr. HEUERMAN. No, sir, I do not have a governmentwide estimate of the cost of training for HIV/AIDS.

Mr. MICA. It also appears regarding OPM guidelines and policy, that there doesn't seem to be a very clear policy, or at least the agencies are not informed as to exactly what their responsibilities are. Do you think this is an accurate description?

Mr. HEUERMAN. With respect to HIV/AIDS training, the specific guidelines for this training were issued by the Office of National AIDS Policy on July 7, 1994. OPM did not issue any guidelines regarding HIV/AIDS training in addition to those guidelines issued by the Office of National AIDS Policy.

Mr. MICA. But you're charged with oversight of these programs; is that correct?

Mr. HEUERMAN. OPM does have oversight authority with respect to all aspects of personnel management.

Mr. MICA. Are you aware of problems with some of these agencies? We've had Mr. Herron, a Federal employee, and others testify here today, that they objected to these programs. What have you heard from Federal employees and also how do you handle these situations?

Mr. HEUERMAN. I would say the majority of inquiries we received directly from Federal employees had to do with the issue of whether or not they would have to attend training if they objected to it on religious grounds. And when we started receiving those kinds of inquiries, we researched the issue and discussed it with I know HHS specifically, and I believe also with the Office of National AIDS Policy.

And we have been advising employees and agencies for that matter that if an employee objects to attending what he or she believes

is a required training course on AIDS/HIV, that they are permitted under the civil rights laws to request reasonable accommodation to attending that mandatory training, and that the agency has an obligation to provide an alternative means of the employee receiving the information that the agency feels is important for the employee to know.

Mr. MICA. Is that now in a written form for the AIDS policy office or OPM?

Mr. HEUERMAN. It is not yet at this point. OPM does have some plans to issue that.

Mr. MICA. To your knowledge, has anyone been threatened with dismissal for not attending these courses? It appears that the courses were mandatory. For example, I think it was mandatory at some point at DOD. What is the situation now and has it indeed changed?

Mr. HEUERMAN. Well, with respect to being threatened with disciplinary action, I think I am personally aware of two stories that this took place. And of course Mr. Herron's report this morning regarding the meeting he had. The other incident, I don't recall specifically, but I vaguely recall reading another news report of an employee.

Mr. MICA. But if a Federal employee asks me now is it mandatory, do I say maybe? How would I respond as chairman of the Civil Service Subcommittee?

Mr. HEUERMAN. Well, I think the best statement in that regard with respect to administration policy is Patricia Fleming's April 21, 1995, Memorandum for Heads of Executive Departments and Agencies. And I will simply quote from that, "individual agencies should determine the scope of and participation in this stage of training for all personnel within their agencies."

Mr. MICA. So they are free to determine whether it is mandatory or nonmandatory?

Mr. HEUERMAN. That would be my interpretation, yes.

Mr. MICA. So some still could have a mandatory requirement?

Mr. HEUERMAN. I believe that's possible.

Mr. MICA. Another thing that concerns me, Mr. Townsend, is that some of these programs, I don't see anything offensive in the HHS program, but in the Department of Agriculture questionnaire for trainers, you get into such questions as sex without love, homosexuality, your attitudes for my child, sterilization for a woman who's HIV-infected—there are all kinds of questions that I wonder whether they come under the responsibility of the Federal Government.

And then I guess you score people. I'd be afraid to take this test and see how I was scored. I just don't know that this is the appropriate role of the Federal Government. Have any of you had any questions raised about this training?

Mr. TOWNSEND. Yes, Mr. Chairman, that particular instrument there, tool that you were looking at, was used in our train-the-trainer process. It was developed and provided to us by the contractor that provided the base for train-the-trainer. The tool itself was to help either self-selection—in other words, individuals who found that—in response to the questions, that they may have biases, unintended biases, perhaps. What—our effort was to gain the best

that we could in terms of balanced—balanced trainers, trainers who would not have strong biases.

Mr. MICA. I also have questions with the manual, which I guess you published too.

Is this your manual? It is from one of the training sessions, March 30, 1995, and it gets into sexual behavior for oral sex with a woman and then recommendations on nonmicrowaveable plastic wrap and then some other things I won't get into. I am wondering if this is an appropriate expenditure of taxpayer dollars for instructions like this. Do you feel it is appropriate?

Let the record show that there is some consultation with a higher pay grade level.

Mr. TOWNSEND. Mr. Chairman.

Mr. MICA. You don't want to make a statement on behalf of the Department?

Mr. TOWNSEND. Well, I will be—I could defer and answer, of course——

Mr. MICA. We will submit it in writing. But again, these things disturb a lot of the taxpayer population who are paying for this. Mr. Heuerman, do you oversee some of these types of activities with the agencies? Or don't you feel this is part of your oversight responsibility?

Mr. HEUERMAN. We do not oversee specific individual agency training programs, mainly because of lack of resources, and we think the law primarily places the responsibility for developing and evaluating training—specific training courses and their content and method—on agency heads.

Mr. MICA. We do have a vote now, and I would appreciate it if the members of this panel would remain. I think the minority may want to question you and I have several more questions.

So we will recess temporarily for about 15 minutes. Thank you.

[Recess.]

Mr. MICA. I would like to call the subcommittee back to order. I see our ranking member has returned and we will give him the opportunity now to question the panel.

Mr. Moran, you are recognized.

Mr. MORAN. Well, thank you very much, Mr. Chairman. Let me ask the panelists if any of the training instructors teach about the things that Mr. Dornan referred to in his testimony—flavored condoms, sex toys, grandmothers having anal sex. Is this any of the information that is being included in the instruction by the personnel under your direction? Whom shall we ask?

Tom McFee, you seem anxious to respond to that question.

Mr. MCFEE. It will be short. No.

Mr. MORAN. No. Good.

Anybody? Well, Mr. Dornan, though, refers in some graphic detail about this stuff. Where is all this stuff coming from, other than the fertile mind of Mr. Dornan?

Mr. MCFEE. I am answering in relationship to my Department. I can't answer for the other Departments, but——

Mr. MORAN. Department of Energy?

Ms. MOODY. I would have the same response. No, we were not using any of those issues in our training, and I am not aware of where it is coming from.

Mr. MORAN. Mr. Townsend, are you aware of any of this stuff being taught to Federal employees?

Mr. TOWNSEND. No, sir, I am not. Not aware of it—not aware of it at the Department of Agriculture. It is not a part of our training, training practice.

Mr. MORAN. It is not a part of any of the training manuals that you teach. Mr. Heuerman.

Mr. HEUERMAN. It is not part of the training that OPM provides to its employees.

Mr. MORAN. Well, let me see how we get at this, because I am trying to figure out what is driving all this and whether the information we are being given is accurate or representative of the subject that is before us.

I know that Mr. Dornan apparently enjoys talking about things like sex toys and condoms and all that stuff, but I don't know whether or not it is relevant to the issue before us; and the first thing to determine is whether it is any official part of any kind of training manual. And clearly it is not, and all of you testified to that extent.

Is there any advocacy of homosexuality in your training manuals such as was the accusation by some of the panel members? Do you recall that testimony? Is any of your training material specifically advocative of homosexuality?

Mr. MCFEE. No. The training material that was developed by HHS in no way condoned or promoted a homosexual or a promiscuous life-style.

Mr. TOWNSEND. And likewise, Mr. Moran, at the Department of Agriculture, I can say likewise. Our materials do not promote any particular life-style.

Mr. MORAN. And I assume you will agree, Ms. Moody?

Ms. MOODY. I agree.

Mr. MORAN. Now, Mr. Heuerman, are you aware of any training material provided to Federal employees that promotes the homosexual life-style, as Mr. Dornan said in testimony this morning?

Mr. HEUERMAN. I have not personally seen or reviewed any authorized training material put out by Federal agencies that promotes the homosexual life-style.

Mr. MORAN. Well, so we have a real disconnect from the people responsible for the training and what we heard from Mr. Dornan and from three panalists.

Hundreds of thousands of Federal employees, I gather, have been instructed, according to one of the Federal employees. He assumed that every Federal employee had. Mr. Mica suggested that people in the military have, as well, which brings you up to 4 million people. So out of those 4 million that are being used in the calculation to estimate the cost of this, how many complaints have we received? Are you aware?

Mr. MCFEE. Again, I can tell you that we trained over 109,000 employees and, up until today, I have known of only three complaints. Today I learned from Lyn Mickley that she had a complaint. I have not heard from her officially.

Mr. MORAN. Let me explore that. She was trained at the National Institutes of Health. Clearly, if she was this upset about the

training she did complain to the agency that she works for, didn't she?

Mr. MCFEE. I do not think she did. I checked with NIH, and they said they had no complaints from her; they did not know the nature of her complaint or even realize where she worked in NIH until they looked it up.

Mr. MORAN. So she never complained about the things that she brought before a House committee this morning?

Mr. MCFEE. Not that I have any record of.

Mr. MORAN. Holy smokes. Well, let me just ask one other question.

This video that we were told this morning was taught by the Red Cross and the Department of Health and Human Services, what role did you have in that, Mr. McFee? You represent the Department of Health and Human Services. How much did you pay for that video?

Mr. MCFEE. The video was produced by the Red Cross in cooperation with the Department. I am aware of the fact—I saw the film some time ago, and I remember that the then Secretary, Dr. Louis Sullivan, was in it and was urging people to make AIDS awareness an important issue.

Mr. MORAN. Sullivan was Bush's appointee, the Department of Health and Human Services?

Mr. MCFEE. I remember he was in the film.

Mr. MORAN. This is the film that was found to be so offensive?

Mr. MCFEE. At least I believe that is what the witness concluded, that the film was offensive.

The film was produced by the Red Cross. We did not get involved in a review of the production, but one of the requirements for support on these types of AIDS training initiatives is that any product produced has to be subject to a community sensitivity review, and there is a board comprised of people in the community, not just people that are concerned with the issue of AIDS, but a broad range of community people that have to review this product. It is my understanding that that Red Cross film went through that review.

Mr. MORAN. So you didn't see anything offensive in it?

Mr. MCFEE. I can't remember. It was a number of years ago that I saw it. I am sure that if I had seen something offensive, I would have remembered it.

Mr. MORAN. I don't know. I know the Red Cross very well. I have been very much involved with the Red Cross over the years, and of course it is run by Senator Dole's wife, Elizabeth Hanford Dole. I am a little surprised that they would be producing the kind of information that was found to be so offensive by our panelists, and particularly that Dr. Sullivan, whom I can't imagine anyone finding fault with in terms of his moral rectitude, would have participated in this very same video that is being used as an example of offensive material.

So there seems to be a disconnect here from what we are hearing is so offensive, some of the more bizarre accusations that Mr. Dornan has alluded to and what the facts are; and that is what we need to get to. So I hope we can do that, Mr. Chairman.

Mr. MICA. Thank you, and I will yield now to the gentlelady from Maryland, Mrs. Morella.

Mrs. MORELLA. Thanks, Mr. Chairman, I appreciate that. Just a few questions to our panelists here.

First of all, I am wondering, how is the selection of instructors for the agencies' HIV/AIDS prevention training done? How did you select who was going to be doing the instructing?

I guess I will ask the three agencies.

Mr. TOWNSEND. Mrs. Morella, Wardell Townsend with Agriculture. U.S. Agriculture was on a volunteer basis. The agencies established a—on a volunteer basis to accept people who would go into the training—or be trained as trainers; and through that process—there were also some points of self-review that was used as well, and of course it was on a voluntary basis that we had trainers come forward.

Mrs. MORELLA. Did you have final say about who was going to be doing the training as a result of maybe the course or questioning or—in other words, did you look to who was ultimately selected?

Now, you say voluntary basis.

Mr. TOWNSEND. Well, I am sure that—this was up to the agencies because the agencies put forward individuals they thought would serve them well, and I am sure that some of those had—were people from Personnel, Human Resources background for the most part.

Mrs. MORELLA. You see what I am getting at, just simply getting at the fact that you don't just say, I have a vacancy for teachers, but rather, people have to meet certain qualifications and maybe take some initial tests and prove that they can do it well; and I think a lot is in it.

Would the other agencies like to respond?

Mr. MCFEE. I would like to respond.

Mrs. MORELLA. Mr. McFee.

Mr. MCFEE. We provided the subcommittee with a very detailed list of the kind of criteria that we were looking for in trainers. They can be summarized really in three areas: attitudes, knowledge, and training skills. We used the same criteria for contract trainers, and we required our contractors to follow the same criteria that we used for our in-house trainers.

We did—one of the complaints, for example, that we got of the three complaints I was telling you about was complaining about some inappropriate deviation from the curriculum by a trainer. The minute we found out about that, we contacted the contractor immediately and that behavior stopped and we did not have any more problems with it. In one area, we actually canceled a contractor decided not to renew a contract and go to another organization because of the fact that we did not believe the trainers were well qualified and they had deviated from our curriculum.

Mrs. MORELLA. Do you feel you have a strong enough role in this—in the training procedure?

Mr. MCFEE. I think we did for this particular project because we paid very close attention to it right out of the Secretary's office.

Mrs. MORELLA. It seems to me that you have a very limited—a limited part, a limited role to play in this, and maybe it could in some way be enhanced and strengthened.

How about the other agencies? Would they like to comment?

Ms. MOODY. The Department of Energy started with the Red Cross, and in conjunction with the Red Cross and the consulting group called Nova Research, combined employees along with those two groups, to come up with pilot initiatives. Employees then gave input in the initial sessions and then we designed the training around it. Nova and Red Cross were both selected at minimal cost to the agency. We also had employees from our Employee Relations Group in Human Resources and others who were trained and had this sort of expertise.

Mrs. MORELLA. Would you like to comment?

Mr. HEUERMAN. I am not familiar with the precise arrangements OPM internally had for training its own employees. I do recall that the trainers—it was a voluntary basis. The trainers were trained themselves in terms of the subject matter and how to present. Their training was monitored, especially during their first few offerings of it. Additional information, I would have to provide you for the record.

[The information referred to follows:]

July 25, 1995

HIV/AIDS TRAINING PROGRAM AT THE U.S. OFFICE OF PERSONNEL MANAGEMENT

Training Program Development

- Program developed by an *HIV/AIDS Partnership Committee* chaired by the Deputy Chief of Staff, and including representation from AFGE Local 32, AFL-CIO, OPM Employee Health Services policy (responsible for agency wide HIV/AIDS policy), Employee Assistance Program (EAP) counselor, and the OPM training office

Training Materials

- Adapted from training manuals developed by the *Center for HIV/Substance Abuse Training* (under contract to HHS)

Instructor Selection Process

- Trainers were OPM employees who volunteered to teach the subject (see attached memorandum from Deputy Chief of Staff, dated April 6, 1994)

- Selection was made by the *Partnership Committee* based on the expectations outlined in the informational flyer attached to the April 6, 1994, memorandum referenced above

Instructor Training

- Initial cadre of instructors received their basic HIV/AIDS training from the contractors who developed the governmentwide training materials for HHS - subsequent instructors were trained by experienced OPM instructors

- OPM instructors received additional training by experts from the *National Center for Health Statistics* (Centers for Disease Control) and the *American Red Cross*

Attachment - April 6, 1994, Memorandum for all Employees

UNITED STATES
OFFICE OF PERSONNEL MANAGEMENT
WASHINGTON, D.C. 20415

OFFICE OF THE DIRECTOR

April 6, 1994

MEMORANDUM FOR ALL EMPLOYEES

FROM MICHAEL GRANT
DEPUTY CHIEF OF STAFF AND
OPM LIAISON TO THE WHITE HOUSE FOR HIV/AIDS

RE: HIV/AIDS TRAINING AT OPM

On September 30, 1993, President Clinton directed that by December 1, 1994, all federal workers be trained in HIV/AIDS, particularly as it relates to the workplace. The U.S. Office of Personnel Management has launched its effort to fulfill the President's mandate, and we need you, OPM employees to achieve our goal.

A committee of OPM employees- including representatives from AFGE Local #32, the Director of the AIDS in the Workplace Project for the AFL-CIO and HI-TECH, a group of training consultants who have expert knowledge of HIV/AIDS- has created a training program that conveys the up-to-date medical knowledge about HIV/AIDS and how supervisors and employees can deal with the issue in the federal workplace.

We are now looking for up to thirty individual OPM employees to become trainers and to conduct this training in joint employee-supervisor training sessions for all OPM employees. We are looking for people who display a sensitivity to the issue of HIV/AIDS and the topics that accompany discussion of the disease and its effect on the workplace. Although some knowledge of HIV/AIDS and the immune system is helpful, it is not a prerequisite for you to become a trainer. Your sensitivity to the issue and your ability to be an effective trainer are more important.

Please refer to the attached informational flyer and application for details on the project and how to become involved. Any questions can be directed to Kim Exeter at (202) 606-1993.

Attachment

Join the Fight Against HIV/AIDS!

Become A Trainer!

As part of its HIV/AIDS awareness initiative, OPM is seeking employees to conduct "HIV/AIDS In The Workplace" workshops. The workshops will provide information to OPM employees about the virus and its prevention, and general policies on HIV/AIDS at the worksite. As a first step, selected volunteers will attend a "train-the-trainer" workshop. **You need not be an expert!**

The train-the-trainer workshop will be held:

May 24-25, 1994

"HIV/AIDS In The Workplace" Trainer Application/Selection Process:

1. Applications (including supervisory approvals) are to be submitted to Kim Exeter, Training and Development Division, Room 1447, (or FAX (202) 606-1732) by April 22, 1994.

2. A Panel Interview will follow the initial screening of applications.

3. Employees will be notified of their selection by May 13, 1994.

4. In addition to the 16 hours of training, selected trainers will be expected to devote approximately 12 to 15 hours over a six-month period beginning June 1, 1994.

If you have any questions, please give Ms. Exeter a call on (202) 606-1993.

Application

"HIV/AIDS In The Workplace" Trainer

Complete the front and back of this application and submit it to Kim Exeter, Training and Development Division, Room 1447, or FAX (202) 606-1732 by April 22, 1994.

Name:_____
Organization: _____
Telephone number:_____ FAX number:_____
Building:_____ Room number:_____

As you know, discussions about HIV/AIDS often can generate strong feelings. As trainers, you will be expected to:

- **display sensitivity to the often controversial or emotionally charged issues (e.g., feelings of those infected with HIV/AIDS, or issues of gender, sexual orientation, and racial/ethnic differences);**

- **have a working knowledge of, or a willingness to learn, the up-to-date factual knowledge of HIV/AIDS; and**

- **have experience in training or believe you have the skills to be an effective trainer.**

In the space provided below (or continue on a separate sheet), please explain why you would like to participate as a trainer, and why you would be effective. Please include any experience, education, references or other appropriate information.

_____

_____

_____

_____

_____

_____

_____

_____

Supervisory Approval: _____ _____

Signature/Title **Date**

Mrs. MORELLA. Actually, OPM is the agency I meant to get at in terms of the limited role with regard to the training. So please forgive me.

But I am wondering, do you also share in any way? I mean, if a program is working in a superlative fashion, do you share it with any other agencies? Is there any mechanism for that?

Mr. MCFEE. I think Mr. Heuerman in his testimony mentioned that he worked with us. Our model program was shared with OPM. They used it with other agencies. We definitely do that.

Mrs. MORELLA. So OPM is the lead in terms of making sure that qualitative and effective programs are shared?

Mr. HEUERMAN. We do play a role in sharing training information of all kinds with Federal agencies working through this Human Resource Development Council that I mentioned. With respect to the AIDS/HIV training, as Mr. McFee just mentioned, we did work with HHS and some other agencies on developing one specific curriculum that was used by—at least a modification of it was used by OPM, I believe; and I believe it was also used by other agencies, but I am not sure specifically by whom. But as has been testified, there were a whole variety of specific training curriculums that were used under the guidelines issued by the Office of National AIDS Policy.

Mrs. MORELLA. Has the AIDS prevention training impacted on your mission-related training or impacted on your ability to fund or deliver your mission-based training?

Has there been an impact? Has it been an adverse impact?

Mr. MCFEE. I probably have a different answer than my colleagues will. Because our mission is related to public health issues, everything we did in AIDS training related to our mission.

Mrs. MORELLA. So it did not prevent any other mission base training from taking place?

Mr. MCFEE. No. It reinforced it.

Mrs. MORELLA. Good. It has not been an impediment?

Ms. MOODY. It has not been at Energy either, no impediment.

Mrs. MORELLA. Do you think it saves lives, frankly?

Ms. MOODY. I don't know that it saves lives at Energy, but I know that it certainly made an aware employee population that we would not have had had we not held the training, and certainly caused less fear in the workplace than there was in the beginning.

Mr. TOWNSEND. Mrs. Morella, at the Department of Agriculture, not in concrete terms, have we saved lives, but if you take it a couple of steps—not to be opaque about it, but if we can carry out our mission at the Department of Agriculture, in terms of our performance, more effectively and more efficiently, then in the end, yes, it will safe lives because we provide food, not just in the United States but around the world.

But within the context of a working environment, if you can minimize tension and stress and have people devoting their attention to other things than health concerns and working conditions, yes, you do improve efficiency and performance; and that is very important because the key here is education, and knowledge in the context, even in a working setting, can be power.

Mrs. MORELLA. So you feel it has been effective.

Mr. McFee, you would agree?

Mr. MCFEE. I definitely do and, of course, again, in our case with high-risk employees, those dealing with patients and in research with blood research, et cetera, I am sure that the whole AIDS training program, not only within our department, but that that is sponsored by CDC and the Federal Occupational Health program has saved countless lives.

Mrs. MORELLA. Does it promote homosexuality? I ask the three of you.

Mr. MCFEE. I just answered that question for Mr. Moran, and I can tell you, it in no way promotes homosexuality.

Mrs. MORELLA. It seemed to me that was the reason that some people were—felt very strongly against any of these programs. It seems to me if you think it has created a more productive, understanding, sensitive work force, if done the right way, and is not promoting a particular life-style, that maybe giving OPM even more strength and vigor to look at the method of instruction and the curricula, that this is something that is working and is important.

I thank you, Mr. Chairman.

Mr. MICA. I thank the gentlelady.

I have a couple of questions. One of the problems with the policy and the guideline is that this is a sort of Forrest Gump approach where you have got a box of chocolates and you never know what you are going to get.

Some of the examples, here again, I don't have any problem with HHS. Where the problem comes in with is some of the trainers that are employed, if they are under contract. We had a lady here today who obviously felt great distress; who felt that the material wasn't appropriate. She gave very specific examples of objectionable approaches to which I believe if did you this in the workplace, you could be charged with sexual harassment.

Isn't it correct, Mr. Heuerman, that up until this April edict, that you could be fired if you didn't attend, that participation was mandatory? Is that correct?

Mr. HEUERMAN. The——

Mr. MICA. It was in the Department of Defense, and still may be. Again, since that April memorandum that is now discretionary, we don't even know. But it can be mandatory within the agency. It is my understanding that these people testifying today were mandated to participate; is that correct?

Mr. HEUERMAN. The Kristine Gebbie memo of April 7, 1994, and the training guidelines that her office issued on July 7, 1994 did indicate that the training was required for all Federal employees.

Mr. MICA. So these people were under threat of being fired, and some people did feel distressed.

Mr. Townsend, do you feel, again, that it is appropriate for us, as a Federal Government responsible to the taxpayers, to rate people; and how would I be rated?

Now, I have a range of one to five, sex without love, acceptable to me, unacceptable to me. I would be very disinclined to have this acceptable. Would I be graded low?

Mr. TOWNSEND. Mr. Chairman, it is not likely that you would be taking that evaluation——

Mr. MICA. But if I were a trainer, this is how you evaluate. Is this not the material used for evaluation?

Mr. TOWNSEND. On a volunteer basis. On a volunteer basis. It is not mandatory.

Mr. MICA. Again, the trainers that you picked, you used these criteria to evaluate them. Homosexuality for my child, acceptable to me or unacceptable. It wouldn't be acceptable to me. I just don't consider that an acceptable life-style. I mean, if they chose that, that is another thing. For me, it is not acceptable. But then I would be graded down in this, right?

Mr. TOWNSEND. According to the scale, yes.

Mr. MICA. Sterilization for a woman who is HIV-infected, who has an HIV-positive child. These questions on selecting the trainers start to make me wonder about what we are doing.

And your manual—again, this is taxpayer money. Mr. Heuerman, and you have an oversight responsibility. Should we be using taxpayer money to advocate sexual behavior as the title here, or to recommend nonmicrowaveable plastic wrap for oral sex with a woman? Are these acceptable?

The problem is that we have a very wide range of training in this. The guidelines are not very clear and some of the trainers do go overboard—or some of the training for the trainers goes overboard. That is what I think people find objectionable. Up until April, people were working under the threat of losing their jobs and some still may be working under that hazard. It is very difficult.

In fact, I was surprised that Mr. Herron would even come forward, given the problems he has had and the harassment he has endured.

Mrs. MORELLA. Would the Chairman yield?

Mr. MICA. Yes, I will.

Mrs. MORELLA. On that issue, what happens if somebody doesn't score well on that? Do you throw them out?

Mr. MICA. No. Then you are downgraded.

Mrs. MORELLA. Not an instructor; is that it?

Mr. TOWNSEND. You can become an assistant to the instructor.

[The information referred to follows:]

SUBCOMM.

AUG 18 1995

DEPARTMENT OF AGRICULTURE

OFFICE OF THE ASSISTANT SECRETARY FOR ADMINISTRATION

WASHINGTON, D.C. 20250-0100

AUG 10 1995

Honorable John L. Mica
Chairman, Subcommittee on Civil Service
Committee on Government Reform and Oversight
U. S. House of Representatives
B 371-C Rayburn House Office Building
Washington, D.C. 20515

Dear Mr. Chairman:

In response to your June 23, 1995, letter requesting supplemental information regarding the Department of Agriculture's (USDA) AIDS training, I offer the following information:

(1) Why were the other 39,000 employees not trained during this period?

With an organization the size of USDA, it is not possible to train all of its workforce at one time. We relied heavily on telecommunications to conduct training, reaching over 60 percent of our workforce in a single broadcast--something never achieved before. Training was incomplete partly because the Department has different technology for delivery of training electronically, and because we have a considerable number of employees in the Forest Service at very remote work locations. Another factor is that USDA has been heavily involved in reorganization initiatives causing considerable delay in fully implementing the Federal Workplace HIV/AIDS Education Initiative.

(2) Will those other 39,000 employees be trained?

Ongoing employee HIV/AIDS training programs will be integrated with employee health training programs and other safety and health activities. From the onset of this initiative, we have encouraged the inclusion of HIV/AIDS training in conjunction with other established conferences or meeting activities. USDA certified trainers will be updated via video when new information becomes available. USDA agencies will continue HIV/AIDS training in conjunction with other scheduled training.

(3) If so, what will it cost you to train them, and will they be required to attend such training?

All HIV/AIDS Trainers were trained and certified during phase 1 of the action plan. The costs to provide HIV/AIDS training for the remaining employees will be relatively small. In addition, we have encouraged our agencies to incorporate this training in other scheduled training courses. HIV/AIDS training will not be mandatory.

(4) Please provide the information requested by question 6 of Chairman Mica's letter of June 13, particularly any materials used to rate, score or evaluate responses to the "Participants Values Worksheet" on pages TTT-2 through TTT-4 of the Department's "Train-the-Trainer" Manual. Please also explain why these documents were not provided to the Subcommittee before the hearing.

The purpose of the Value Worksheet needs clarifying. This worksheet is actually a portion of the Train-the-Trainer instruments used by the contractor. Its purpose is to enable potential trainers to conduct a self-assessment so they could examine in advance any potential for biases that could hinder their ability to present a fair and objective delivery of training information in a sensitive and caring manner. This assessment instrument is by no means a tool to rate a trainee's suitability, but rather a demonstration of an extra effort to ensure the quality of our training cadre. This information was provided to the Subcommittee in Enclosure 1A, Tab-2, before the hearing.

(5) Please identify each person who worked on preparing your response to Chairman Mica's letter of March 30, describe his or her role, and indicate how long it took each person to accomplish his or her tasks.

The Department's HIV/AIDS Program Manager, Betty J. Thomas, was primarily responsible for the coordination of all responses to the March 30 letter. Ms. Thomas received over 100 pounds of data from 29 USDA agencies. Seventeen of these agencies have field locations, requiring sufficient time for them to redirect the data call to their locations. To fulfill the Subcommittee's request, USDA staff spent hundreds of hours producing and compiling the materials. The response to the Subcommittee was reviewed by the staff officials indicated on the enclosed correspondence clearance sheet.

Sincerely,

Wardell C. Townsend, Jr.
Assistant Secretary
for Administration

Enclosure

Mr. MICA. But you have to instruct only with one of the people whose score is higher; is that correct?

Mrs. MORELLA. This is one of those situations where I think OPM has a role they should be fulfilling. They should not be out in the wings. They should be out in center stage working with USDA.

I would agree with you about that questionnaire. I think it is deplorable to have——

Mr. MICA. Again, different people with different sets of values, if the gentlelady will yield back. Some people are pretty liberal, some people are pretty conservative, just like we have in the Congress. But I mean, to a grandmother, a conservative, or a religious person—did you not testify that most of your complaints came in the religious area? Someone who is a fundamental Christian, for instance, is going to find some of this very offensive, are they not, sir?

Mr. HEUERMAN. That is what they indicated and——

Mr. MICA. And that is why you changed part of your policy; is it not? Under the Civil Rights Act, they have rights too, don't they?

Mr. HEUERMAN. Yes, and that is what we advised them, that an accommodation for religious reasons was provided for under the Civil Rights Act.

Mr. MICA. I don't want to take sides in this. I chair this subcommittee and my responsibility is to see that the public money is spent in the public interest with the Federal employee work force well served. And I don't object to AIDS training. It sounds like McFee over here has a program that has worked fairly successfully.

There are problems we saw with your training with at least one trainer. But it seems important that somebody oversee this. We are paying public money to recommend "Wet, Wild and Well Lesbian Safer Sex" with a publication that the Federal taxpayers are paying for. Somebody needs to be overseeing this.

Again, there are things that we consider appropriate, as a society, as a Congress, and as a subcommittee overseeing the Federal work force. That is our role here today. We are not playing God or making final life determinations. Helping people to extend their lives should be the purpose for this training.

Sorry, I got carried away here. I am not chiding you because some of you have done a good job. But obviously we have some problems with the program that we would like to address, and we seek your assistance—particularly OPM.

I am sorry the Office of AIDS Policy is not here. They should be. The administration should be taking a more active role so we can do a better job in this. I would appreciate your encouraging them to participate in this process.

Mr. Heuerman, can you urge the administration to work with us on this?

Mr. HEUERMAN. I will relay your request to the proper authorities. Thank you.

Mr. MICA. Were there further questions?

Mr. Moran.

Mr. MORAN. Yes, Mr. Chairman. I was going to defer, but since you just stirred it up again, you have referred half a dozen times to this manual. I understand, but all of the basic information in

this manual seems to be unoffensive and informative. It is, so we agree on that.

There is a list of 82 phone numbers that are described as resources in the metropolitan Washington area for women, and one of the numbers here is this Lesbian Safer Sex number that you referred to. It is 1 of 82, and I suppose it is to find some way to access people who are more aggressive or whatever, but all it is doing is listing a number. It is not encouraging, you know, lesbianism or promiscuity or anything else.

Mr. MICA. Will the gentleman yield?

Mr. MORAN. Yes.

Mr. MICA. The next page you have shows where to buy your dental dams. I never heard of dental dams before this hearing, so I am learning something.

Mr. MORAN. I don't know what dental dams are either. I don't find it offensive because I don't know what it is.

Mr. MICA. Then on the next page, Pleasure Chest. I know exactly where that is, but I don't——

Mr. MORAN. Where is it and what is it?

Mr. MICA. I don't even know if taxpayer money is involved in this, but I raise questions about some of these things, Mr. Moran, and their appropriateness; and some people do find it offensive.

Mr. MORAN. I understand that and obviously you know much more about these things than I do.

Mr. MICA. I am learning, Mr. Moran.

Mr. MORAN. I will defer to all your in-depth research, Mr. Chairman, but on the issue of the survey, you know, I can understand the assumptions that you make with regard to that survey, but it does seem to me that there is a need to do some screening of those people who do perform AIDS instructions.

I wish Mr. Dornan was here because I don't like to talk about him other than face to face, which is always a unique experience. His aide is here; I am sure she is going to communicate it. But Mr. Dornan is the type of person whom I would find offensive if he was delivering a lecture because of, actually, what happened today.

I talked about, as you recall, a friend of mine who had been an ex-priest and who then came to work for the campaign. He ran the phone bank, and he contracted AIDS; and Bob then later on gratuitously said, "Well, if your friend, the ex-priest, hadn't left the priesthood for momentary sexual pleasure, he wouldn't have died of AIDS."

Well, that showed a bigotry in my mind because in the first place, he assumed that he had participated in momentary sexual pleasure or whatever. He didn't know anything about this person. I know he has never met him, but that was the assumption. And it is that kind of bigotry, I think, that we find fairly pervasive in our society still, at this point, that is counterproductive certainly to learning the kind of information that we need to be understood by the American population.

It certainly is counter to the kind of humane attitude that we ought to have among our brothers and sisters, whether they are suffering from a deadly disease or not.

I would think that at the minimum, we should not make assumptions about their life-style or about their threat to us or to anyone

else. But only armed with accurate information can we treat people properly, particularly people who are suffering under tragic circumstances; and I find it offensive that people would rush to assumptions, very pejorative assumptions about other people, without having any information.

Some of the information I think we have gotten is either misleading, and in some cases inaccurate now; it ranges the whole gamut from very misleading to just minor.

Well, let me just ask, the woman from NIH said people are charged a $10 fee. I have never heard that. Is that true? Has anybody been charged a fee for those programs?

Mr. MCFEE. I was as surprised as you when I heard that. I know of no fee. It may have been a chargeback to the administrative office that she worked for or something, but I will look into that and let you know.

[The information referred to follows:]

RESPONSE TO CONGRESSMAN MORAN'S QUESTIONS REGARDING THE DEPARTMENT OF HEALTH AND HUMAN SERVICES' WORKPLACE HIV/AIDS TRAINING

1. You indicated that the need for AIDS education varies with the level of risk found in the particular workplace setting. Does your agency provide different educational programs to your employees based on their varying degrees of risk exposure?

Response: As stated in my testimony, the Department's employees are at varying levels of risk of HIV/AIDS infection depending upon the environment in which they work. Employees who provide direct patient care or work in research laboratories with blood or blood products, for example, are at higher risk of exposure to HIV/AIDS than are those in a general office environment.

The training materials used to meet the President's HIV/AIDS initiative and provided earlier to the subcommittee were developed for the general work force and were not specifically targeted at high risk employees. However, the Department conducts special, intensive training on blood-borne pathogens on a regular basis for all employees in high risk positions. This training complies with occupational health and safety standards applicable to the type of job and level of exposure in the work environment. The occupational health and safety experts at the Public Health Service have provided this kind of training for our employees for many years.

2. You indicated that a self-study guide was provided to employees who did not wish to attend the training. How was this guide developed?

Response: The self-study guide was developed under contract by HIV/AIDS training consultants from Hi-Tech International's Center for HIV and Substance Abuse Training. Designed to closely follow the face-to-face curriculum developed by Hi-Tech, the self-study guide was piloted several times before being distributed. A copy of that guide was previously provided to the subcommittee.

3. Were any of your employees disciplined in any way for not participating in the training?

Response: No employees of this Department were disciplined for refusing to participate in the training.

4. Various units within your department have used different organizations to provide their training. NIH used Whitman-Walker. The Centers for Disease Control used the Red Cross. The rest of your workers got their training from Hi-Tech. How do the different programs compare? How were each of these programs evaluated? What if any complaints were received about each of the programs? What if any action was taken on complaints received?

Response: The training covered two major areas: medical and epidemiological information on HIV/AIDS and work place policy issues related to dealing with employees affected by the virus. The presentation of medical/epidemiological information varied slightly depending on the contractor, though the content was similar. For example, Whitman-Walker's prevention module (used at the National Institutes of Health) was slightly expanded compared to that in the Department's model curriculum delivered by Hi-Tech and Federal Occupational Health instructors. The Red Cross (at the Centers for Disease Control and Prevention) put more emphasis on HIV/AIDS issues facing the community as a whole (e.g., in schools). The section on workplace policy issues was typically covered by Departmental personnel specialists who generally followed the outline developed by Hi-Tech, regardless of which contractor provided the medical/epidemiological modules. Copies of all three curricula have been previously submitted to the subcommittee.

Each of our contractors obtained written evaluations from participants at the end of each session. As stated in my testimony, we received very few complaints about the HIV/AIDS training. In fact, the majority of the written evaluations were quite positive. The few complaints we did receive did not focus on the training content as much as on individual trainers and how they handled the delivery of the training. The problems with individual trainers were addressed immediately by discussing the situation with the contractor who counseled the instructor about appropriate delivery of the training or, as a last resort, removed the trainer.

Mr. MORAN. OK. It appears that there is no policy to charge any $10 fee. I would really like to find out whether anyone has ever been charged a fee.

But here is someone who never even complained to the agency; I just hope we don't overblow this, and I think an important consideration is the fact that hundreds of thousands of people have, in fact, been instructed on the facts and the rumors and fallacious information that is out there so they can discern what is accurate and what isn't, and of those hundreds of thousands of people who have been instructed, there seems to be a very, very small number of people who have actually found it offensive.

But where information has been communicated in an offensive way, or information that in its very nature is offensive, we ought to go after that and we ought to see to it that that does not continue. But I think it would be both unfair and irresponsible to leave this hearing with the impression that the kind of instruction that is being provided to Federal employees is best described by the kind of wild, bizarre things that we heard, both from Mr. Dornan and from some of the other people. It appears to me that it is not reflective or indicative in any way of the vast majority of the instructors or of the instruction.

Thank you, Mr. Chairman.

Mr. MICA. I thank the gentleman and yield now to the gentlelady from Maryland, Mrs. Morella.

Mrs. MORELLA. I simply wanted to state something we all know, and that is, HIV/AIDS is a national crisis and indeed we have forgotten that the fastest growing group to get HIV/AIDS are women; and we have issues before us that deal with voluntary counseling of pregnant women with the problem of the neonatal situation, pediatric AIDS.

So it touches all of us, and so my feeling, and I think many other members of the committee, including the chairman, feel that we need to do something with regard to proper training, but we need the right vehicle for it, the right instructors for it so that our Federal work force can be the model for the Nation.

Thank you, Mr. Chairman.

Mr. MICA. I thank the gentlelady and I also thank the panel, and if you have additional statements you would like to be part of the record, we will make them part of the record.

And also there may be additional questions. I think we will have some additional questions, particularly for OPM; and we will ask that you respond and also make those part of the record.

The panel is excused. Thank you.

Our next panel—I think we have lost one of our witnesses due to the time constraints, but our final panel is Erline Belton, president and CEO of the Lyceum Group, and we also have Kenneth D. Goodman with the Whitman-Walker Training Institute.

Mr. MICA. And if I could ask the two witness, if you would remain standing or stand, it is the custom of this subcommittee and our full committee to swear our witnesses, so if you would please raise your right hands.

[Witnesses sworn.]

Mr. MICA. And the record will reflect that our friends with the rubber gloves have left, so we will just have the swearing-in ceremony and that will be all.

I would like to welcome you. I thank you so much for your patience and for your willingness to testify today, and I am going to call on Erline Belton first, president and CEO of the Lyceum Group. If you would like to summarize your testimony, we could submit the entire statement for the record and if you would proceed. Thank you.

STATEMENTS OF ERLINE BELTON, PRESIDENT AND CEO, THE LYCEUM GROUP; AND KENNETH D. GOODMAN, WHITMAN-WALKER TRAINING INSTITUTE

Ms. BELTON. I would like to submit the written testimony, and I think——

Mr. MICA. Without objection.

Ms. BELTON. Without objection, and I think it would be more appropriate for me to talk about some of the issues I have heard here today from a private-sector perspective, because I think it would be most helpful to you.

Just in the way of background, I was at a major corporation where we had 131,000 employees around the world in 31 countries, and we established in 1986 what we called an AIDS Education program office, and when I went to the CEO to do this, his first question to me was, what does it have to do with work?

What I am concerned about as a business woman is three things: economics, productivity and humanity, and that is what we were focused on in our corporation. It was a Fortune 500 corporation, and that is really what this ought to be focused on, because it is an economic issue. It is a productivity issue, and it is about being humane.

I think Congresswoman Morella put it very well. People are dying, and we need to be concerned about that. We need to get misinformation corrected, and that is a part of why we do this work anyway.

What I would like to address specifically is what we did, because I think it would be helpful.

One of the things that is very clear to me as I have listened to the testimony this morning is that some mistakes have been made, and I don't think you need to be beating yourself up for being less than perfect. This epidemic, we have no experience in how to do it, and so we have to make our mistakes; but the important thing is that we correct them, and we begin to do it in a way that makes sense.

I want to first address the whole issue of training. I have been in charge of training and organization development. I have been in corporate America for 18 years. I have never seen a training program where everyone came away happy, ever in my life, and it is probably never going to happen.

So it is important that you start from that premise, that whatever you do, someone will find fault. There will be some people who will be enormously satisfied, and there will be others who will find everything wrong with what you have done, even though you have

tried to do everything in what you perceive to be the correct way. So that is important for you to consider.

Now, as you are considering that, it is also important to consider that you have a philosophy and policies and guidelines that are consistent. Part of what I have been hearing is that there is not a lot of consistency; and you may want to take a look at, how do we get consistency so that you know what is happening across the board?

People have an enormous amount of flexibility. In the private sector, it wouldn't happen that way. I had responsibility for policy that governed 31 countries and the United States. If I had different policies for everybody, we would have huge problems. So that is something that I would recommend you look at quickly.

The other thing is, communication is very important, and a part of what I have heard here is that the communication has not been terrific. There is preparation work that goes with implementing a program as massive as the one you have tried to implement, and part of what people want to know is, why are we doing this? What are the philosophical underpinnings? What are the policies that guide this? What are my rights? It keeps coming up.

In relationship to your values survey for determining whether someone is qualified to train, in corporate America, we have characteristics that we want in trainers. We have a knowledge base, and, yes, we want to know what they value. And I want to say here that what is important is that you put somebody in the room who will respect the rights of individuals, whether they are homosexual or fundamentalists; it doesn't matter. They need to make space in the room for each and every person to be able to express their point of view without judging them, and that is the key issue here.

How do you get people to deliver the training who are not about judging, but who are about delivering information that will save lives, that will keep people working, having good relationships with one another and producing a government that is working and is not dysfunctional. That is the issue around any kind of a survey that you would do to determine what kinds of trainers you have.

I would go further and say that the whole question of mandating is an interesting question, and part of what I would suggest that you look at is the whole question of mandates, because you are mandating for what goal? What is the purpose of the mandate? And if you understand that, it might give you some direction about what it is you want to have happen.

In our company, we did not mandate, but what we did was we decided that we had a lot of information to deliver, people had a lot of flexibility around delivering training, but within the context of certain guidelines. Does that light mean my time is almost up? Oh, OK.

There is also information out there for you, because a lot of learning has been done in the private sector about how to do this and how not to do it; and I would suggest that you take a look at a study that was done by the National Leadership Coalition on AIDS where the private sector, in particular, they wanted to know how much employees wanted AIDS education training in the workplace.

We found something very astounding when that survey was completed. Over 50 percent of the workers said they wanted education and over 70 percent said they thought that the employer should provide it because they were a credible source.

Now, the question is, is the government a credible source? Only you can answer that, but I think it is worth looking at and perhaps answering.

Finally, in closing remarks, I would say that the effort that you have undertaken to understand this issue is an important one. The thing that you all seem to agree on is that training is needed and that it is necessary. So the question is, how can you bridge the things that you disagree on and find the common ground that makes you a leader as the major employer in this country? That is your challenge as far as I see it.

I believe training is necessary. It is important that you provide it and perhaps be a model to the world about how it is done because this is not just a national issue. It is a world issue.

So I thank you, and I will close with that; and I would say that as a mother, as a grandmother, as a taxpayer, I would like to see us lead on this issue. I would like to see our government step up to the bar and say, we stand for something, we care about humanity, compassion, lives and economics, and that it is all connected.

Thank you.

Mr. MICA. Thank you so much.

[The prepared statement of Ms. Belton and Mr. Lauber follows:]

STATEMENT OF

ERLINE BELTON AND MICHAEL R. LAUBER

ON BEHALF OF THE NATIONAL LEADERSHIP COALITION ON AIDS

BEFORE

THE HOUSE OF REPRESENTATIVES

COMMITTEE ON GOVERNMENT REFORM & OVERSIGHT

SUBCOMMITTEE ON CIVIL SERVICE

JUNE 22, 1995

MR. CHAIRMAN AND MEMBERS OF THE COMMITTEE. We appreciate this opportunity to appear before the Subcommittee on Civil Service and share our views on the importance of effective HIV/AIDS training in the workplace.

We are here today as business people to speak about the impact the AIDS epidemic has had on America's business community, and upon the Americans who staff our assembly lines, offices and plants. We are here to talk about the emotional toll and the economic damage that AIDS exacts from our workforce. And we are here to talk about what we believe is the Federal Government's role in defeating the ignorance that directly perpetuates the spread of HIV/AIDS.

First, we believe people must acknowledge that while AIDS may be 100 percent fatal, it is also 100 percent preventable. Scientists know precisely how the disease is transmitted. From that information, we know precisely what Americans must do to protect themselves. And we believe Americans have a right to that information, a right to protect themselves from this always-fatal virus.

Many businesses have addressed this dilemma effectively on a very pragmatic basis. We know, for example, that AIDS is the leading cause of death among Americans age 25 to 44. According to the Statistical Abstract of the United States, 54 percent of this nation's workforce fall into this same age category. So AIDS is striking hardest at the very core of this nation's workforce.

Two out of three of our nation's largest businesses, and at least one in 10 of our smallest businesses have already experienced AIDS in their workplace. When AIDS strikes among an ill-informed workforce, we have seen the workplace disrupted, coworker fears run rampant and production halted.

Treating an employee with AIDS costs businesses a lot of money. The CDC estimates it's costing this nation $15 billion a year. For non-healthcare related costs, an employer can expect to spend a maximum of $32,000 over five years on an HIV-infected employee, while the average cost runs about $17,000, again according to CDC statistics.

But these medical expenses -- and the expenses associated with loss of productivity and disruptions in the workplace -- are easily avoided through effective workplace education on HIV and AIDS.

Importantly, we believe effective workplace education protects a business's single most important asset: its investment in its employees. The business community views HIV/AIDS education as an economic issue. And we see the potential for greater economic damage in the future if we don't act now. AIDS threatens to make further inroads in the young adult population -- where the epidemic is growing fastest.

Educating our workforces on HIV and AIDS makes sound business sense. We believe strongly that all American workers should receive a comprehensive HIV/AIDS prevention education. And we believe we must look to the Federal Government for leadership and its strong support for this critically important workplace education.

At the same time we acknowledge that discussing AIDS may make some people uncomfortable. It is, for the most part, a sexually transmitted disease that all sexually-active adults are at risk of contracting. We believe, however, that the discomfort some may feel over a public discussion of sex is far outweighed by the critical life-saving information that this discussion can convey. And we believe adults -- with a compelling interest in protecting their lives and the lives of their families and loved

ones -- will respond favorably to an adult discussion of this issue.

Indeed, it may surprise you to learn that American workers already agree that AIDS education should be available. In a study done by The National Leadership Coalition on AIDS in 1992, 50 percent of working Americans cited AIDS as their chief health concern. More than 75 percent said that employers should offer AIDS education in the workplace. And 94 percent of employees whose boss offered AIDS workplace education approved of such a program.

AIDS is not a lifestyle issue, although some may focus on lifestyles they do not share with others as a rationale for eliminating such training. The Federal Government has had for years an effective anti-drug use training program. People agree you don't have to embrace a drug user's lifestyle to be against drugs. But you do have to understand what drive's people to take drugs, and you need to know enough about the drug user's lifestyle to help others and protect yourself.

At the same time, we cannot allow the misconception to be perpetuated that AIDS is a disease that strikes only homosexual men and only intravenous drug users. Statistics from the Centers for Disease Control and Prevention support the tragic realization that HIV and AIDS have made strong inroads into the heterosexual population, among Hispanics and women of color. It has moved into all socioeconomic levels and out into all parts of the country.

All Americans, everywhere, are at risk. That makes it a national problem requiring leadership from the federal government. The federal government can exercise that leadership by making HIV/AIDS in the workplace training mandatory for all federal employees. The federal government can demonstrate its strong support for the effectiveness of HIV/AIDS education through the example it sets with its own employees.

Help keep federal workers safe and productive through mandatory HIV/AIDS education in their respective workplaces. Help save taxpayer dollars by promoting a healthy federal workforce free of HIV and AIDS because an educated employee is key to prevention of HIV/AIDS. Help end AIDS by leading the way in educating all Americans about this tragic, always fatal disease.

Mr. Chairman, the business community is working hard to do its part to stem the spread of HIV and AIDS. HIV/AIDS education in the workplace works. It saves lives, protects our employees and helps keep us productive and profitable. We ask that the

federal government heed the lessons learned by the business community when responding to the information needs of federal employees.

Mr. Chairman, this concludes our statement. We appreciate the opportunity to appear before this subcommittee to discuss our views on the federal government's role in HIV/AIDS in the workplace education.

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Erline Belton, is President of The Lyceum Group and a partner in Belton & Nobles Consultants. She has been Senior Vice President for Human Resources for The Progressive Companies. Prior to this, she was International Corporate Employee Relations Director at Digital Equipment Corporation. Ms. Belton was an advisor for Harvard University's Center for Social Policy and Change for the Massachusetts School System as well as several corporations. Ms. Belton has also served as a member of the Board of Directors of The National Leadership Coalition on AIDS.

Michael R. Lauber is president and CEO of Tusco Display, one of the nation's leading point-of-purchase display manufacturers, located in Gnadenhutten, Ohio. Mr. Lauber is Chairman of the Board for the Point-of-Purchase Advertising Institute. He holds a B.A. in Economics and English from the College of Wooster and an M.B.A. from the Amost Tuck School of Business Administration at Dartmouth College. he has been an active member of the National Leadership Coalition on AIDS Minority and Small Business Advisory Panel. He also serves on the Coalition's Board of Directors.

The National Leadership Coalition on AIDS is the only national non-profit organization that deals exclusively with AIDS in the workplace. The Coalition is comprised of member businesses both large and small, as well as labor groups and non-profit organizations. The Coalition produces materials on AIDS workplace policies, practices, education and other tools that help businesses effectively minimize their legal risks, manage employee benefits and educate the workforce about AIDS. The Coalition's mission is to marshal the collective resources of business and labor to prevent and combat the spread of HIV disease.

Mr. MICA. And now we will yield to Mr. Kenneth Goodman with the Whitman-Walker Training Institute.

Mr. GOODMAN. Thank you. Mr. Chairman, members of the committee, ladies and gentlemen——

Mr. MICA. Now, do you have additional witnesses?

Mr. GOODMAN. These people will not be testifying, thank you. We ask for the indulgence of the committee in this. Ladies and gentlemen——

Mr. MICA. If they are not going to testify, would it be more appropriate if they——

Mr. GOODMAN. These persons are germane to the testimony of the witness. We ask for the indulgence of the committee. Thank you.

Mr. Chairman——

Mr. MICA. Wait a second. Could you identify the people that are sitting at the witness stand?

Mr. GOODMAN. Yes, sir. The person immediately to my right is Mr. Joseph Goodman; to his right, Ms. Nancy Goodman; and to her right, Ms. Shirley Goodman.

Mr. MICA. And they are not going to testify?

Mr. GOODMAN. They are not going to testify.

Mr. MICA. All right. Well, we will go ahead, but again, I will not hear from them during this hearing. Go ahead.

Mr. GOODMAN. Thank you. Thank you for bringing the attention of your committee to the important work which we do. We are eager for this opportunity to showcase the unprecedented success of our HIV/AIDS workplace training program.

My name is Ken Goodman, and I am here today with my family. I run the Whitman-Walker Training Institute, which is affiliated with the Whitman-Walker Clinic of Washington, DC. Whitman-Walker was founded in 1973, and today is the largest frontline provider for HIV and AIDS services in the mid-Atlantic States. We were the very first agency to provide HIV and AIDS education to the Federal Government, and today, we believe that we are the largest provider of these services to the Federal Government.

During the past 2 years, we have provided training and technical assistance to numerous agencies, amongst them the Departments of Commerce, Interior, Defense, Treasury, Transportation, and Labor, as well as numerous independent agencies ranging from the Panama Canal Commission to the General Services Administration to the Consumer Product Safety Commission.

I have been with Whitman-Walker since 1991, and was a member of the team that developed the guidelines issued from the Office of National AIDS Policy in 1994. Since our time is limited today and it is late, I know that everyone is impatient. I will keep my prepared comments very brief.

I will address two specific areas: first, the workplace training curriculum which we use; and second, the response to our training efforts by the Federal work force.

The workplace HIV/AIDS training program is a standardized 2-hour training, 3 hours for supervisors. It begins by describing HIV and AIDS, the progression of the disease, how the virus is transmitted and how it is not transmitted, risk reduction, and HIV testing.

It also includes a discussion of the epidemic itself globally, nationally and locally. The training concludes with an explanation of the Rehabilitation Act of 1973 and the Americans with Disabilities Act——

Mr. MICA. Go right ahead.

Mr. GOODMAN [continuing]. Specifically as it pertains to the handling of employee—I am sorry—specifically as they pertain to working with disabled employees; and the Privacy Act of 1974, specifically as it pertains to the handling of employee personnel and medical records.

These trainings are conducted in a format which is respectful, professional, nonthreatening and family friendly. I would like to repeat that because of the buzzing.

Mr. MICA. Go right ahead. Don't let us stop you.

Mr. GOODMAN. They are conducted in a format which is respectful, professional, nonthreatening and family friendly.

In his 10-point action plan of August 5, 1988, President Ronald Reagan called for, "the adoption of education policies based on the OPM and Centers for Disease Control guidelines." The curriculum we use is based on this conventional public health model. It emphasizes prevention, informed decisionmaking and disability awareness. This model is endorsed by the American Public Health Association, the American Medical Association, the American Nursing Association, the American College of Pediatrics, the American Red Cross, the U.S. Public Health Service, the National Institutes of Health, the Centers for Disease Control, and former Surgeons General C. Everett Koop and Antonia Novella. In short, Mr. Chairman, this model is endorsed by the virtual unanimous consensus of the public health community.

It has been suggested that these trainings involve extended discussions on various bizarre sexual practices and is an assault on religion and traditional family values. Nothing could be further from the truth. Congressman Dornan himself has argued in the past that, ideally, parents should educate their children about sex in the home. We agree. By providing to workers who are also parents and spouses—this crucial clinical information about sexually transmitted disease and other bloodborne infections, we are attempting to create happier, healthier families and, correspondingly, a healthier and more productive work force by reducing fear, alleviating stress, preempting costly discrimination suits and, most of all, by giving our employees the skills that they need to protect themselves and the ones they love from this awful disease.

The bottom line is, how has this training been received by the Federal work force? In a single word, Mr. Chairman, enthusiastically. Contrary to what you have heard today, the response to our HIV/AIDS trainings has been overwhelmingly—overwhelmingly positive. Our data, gathered from thousands and thousands of evaluations, which we can make available to the committee upon request, indicates that the vast majority of employees felt that the training was useful and appropriately presented.

Some of the data: When asked if they would like to see anything added to the presentation, the most common responses were, more time for questions, more information on department policy, and more information in general.

When asked about the information presented during the training, 29 percent said "extremely useful"; 63 percent said "very useful"; and an additional 6 percent indicated "useful" for an overall usefulness rating of 97 percent.

When asked their overall impression of the program, an astonishing 31 percent circled the box which said, "one of the best programs I have seen." The overall approval rating was 96.54 percent. Again, we will share this data with the committee or anyone else upon request.

Mr. Chairman, I am here today with my family for a reason. Years ago my father and I had a—kind of an odd conversation. We were joking around, and in the course of this conversation I said to him, "you know, dad, I am still waiting for the talk." And he froze and he said, "the what?" And I said, "you know, THE TALK, the birds and the bees, this conversation fathers are supposed to have with their children."

"Oh," he said, "that talk;" and then there was a very long pause, and finally he said to me, "well, the truth is, I am still waiting for mine."

Mr. Chairman——

Mr. MICA. Mr. Goodman, we thank you for your testimony.

Mr. GOODMAN. I am almost done, sir, with your indulgence.

Mr. MICA. I think the balance will have to be submitted for the record, unless you can summarize in about 1 minute.

Mr. GOODMAN. Thank you. I will do my best to do that.

In your invitation to testify, in the letter which you sent me, you asked me if I thought that the Federal Government had a special obligation to its employees and to their families with regards to HIV/AIDS training. The answer to your question is self-evident. Under our constitutional mandate to promote the general welfare, we must. Every public health official in the Nation will tell you that ignorance is one of the major risk factors associated with HIV infection.

The Federal workplace cries out for education, Mr. Chairman. Witness the unfortunate incident just last week at the White House.

If we turn back now, if we choose the path of ignorance over knowledge, if we somehow begin to suggest that the government does not have a vested, compelling interest in the public health or in the well-being of its work force, how will we explain it to our children if we fail them at this critical hour? Thank you.

[The prepared statement of Mr. Goodman follows:]

TESTIMONY OF KEN GOODMAN, WHITMAN-WALKER TRAINING INSTITUTE
HOUSE COMMITTEE ON GOVERNMENT OVERSIGHT AND REFORM
SUBCOMMITTEE ON CIVIL SERVICE
JUNE 22, 1995

Mr. Chairman:

Thank you for bringing the attention of your committee to the important work which we do. We are eager for an opportunity to showcase the unprecedented success of our Workplace HIV/AIDS training program.

My name is Ken Goodman, and I run the Whitman-Walker Training Institute, which is affiliated with the Whitman-Walker Clinic of Washington, DC. Whitman-Walker was founded in 1973 and today is the largest front-line provider of HIV/AIDS services in the Mid-Atlantic states. We were the first agency to offer HIV/AIDS education to the Federal government, and today we are the largest provider of these services to the government. During the past two years, we have provided training and technical assistance to the Departments of Commerce, Interior, Defense, Treasury, Transportation, and Labor, as well as to numerous independent agencies ranging from the General Services Administration and the Consumer Product Safety Commission to the Panama Canal Commission. I have been with Whitman-Walker since 1991, and was a member of the team that developed the training guidelines issued from the Office of National AIDS Policy in April 1994.

Since our time is limited today, and you have many questions, I will keep my

prepared comments very brief. I will address two specific areas: first, the workplace training curriculum which we use; second, the response to our training efforts by the federal workforce.

The Workplace HIV/AIDS Program is a standardized two-hour training [three hours for supervisors]. It begins by describing HIV and AIDS, the progression of the disease, how the virus is transmitted and how it is not transmitted, risk reduction, and HIV testing. It also includes a discussion of the epidemic itself, globally, nationally, and locally. The training concludes with an explanation of the Rehabilitation Act of 1973 and the Americans With Disabilities Act of 1990--specifically as they pertain to working with disabled employees--and the Privacy Act of 1974--specifically as it pertains to the handling of employee personnel and medical records. These trainings are conducted in a format which is respectful, professional, non-threatening, and family-friendly.

In his ten-point action plan of August 5, 1988, President Ronald Reagan called for the "adoption of education....policies based on the OPM and Centers for Disease Control guidelines." The curriculum we use is based on this conventional public health model. It emphasizes prevention, informed decision-making, and disability awareness. This model is endorsed by the American Public Health Association, the American Medical Association, the American Nursing Association, the American College of Pediatrics, the American Red Cross, the U.S. Public Health Service, the National Institutes of Health, the Centers For Disease Control, and former Surgeons-General C. Everett Koop and Antonia Novella. In short, this model is endorsed by the virtual unanimous consensus of the public health

community.

It has been suggested that these trainings involve extended discussions on various bizarre sexual practices and is an assault on religion and traditional family values. Nothing could be further from the truth. Congressman Dornan has argued in the past that, ideally, parents should educate their children about sex in the home. We agree. By providing to workers--who are also parents and spouses--this crucial clinical information about sexually transmitted disease and other bloodborne infections, we are attempting to create happier healthier families, and correspondingly, a healthier, more productive workforce by reducing fear, alleviating stress, pre-empting costly discrimination lawsuits, and most of all, by giving our employees the skills they need to protect themselves and the ones they love from this awful disease.

How has this training been received by the workforce? In a single word: enthusiastically. Again, contrary to what you've heard today, the response to our HIV/AIDS trainings has been overwhelmingly positive. Our data, gathered from thousands of evaluation forms, indicates that the vast majority of employees trained felt that the training was useful and appropriately presented. Some data:

> When asked if they would like to see anything added to the presentation, the most common responses were "More time for questions", "More info on department policy", and more information in general.

When asked about the information presented during the training, 29% said "extremely useful", 63% said "very useful", and an additional 6% indicated "useful" for an overall usefulness rating of 97%.

When asked their overall impression of the program, an astonishing 31% circled the box which said "one of the best I've seen". The overall approval rating was 96.54%.

The American Red Cross is another major provider of HIV/AIDS education to the Federal government. They, too, have similar evaluation data, reflecting similar success. While they were unable to attend today, I understand that they have submitted to the committee a complete report of their evaluation data and the success of their program.

Mr. Chairman, in your invitation to testify, you asked me if I thought that the Federal government has a special obligation to its employees and their families with regards to HIV/AIDS training. The answer to your question is self-evident; under our Constitutional mandate to promote the general welfare, we must. Every public health official in the nation will tell you that Ignorance is one of the major risk factors of HIV transmission. If we turn back now, if we start limiting knowledge rather than expanding it, if we suggest that the government does not have a compelling, vested interest in the public health, or in the well-being of its workforce, how will we explain it to our children if we fail them at this critical hour?

Mr. MICA. Well, we thank you, Mr. Goodman, and also Ms. Belton for your testimony. I think both of you have provided us some insight. The insight, Mr. Goodman, you have provided with your program, I have a number of questions which I would like to submit to you in writing, specifically on your program.

Ms. Belton, I think you have made some great observations, having endured the entire hearing, and from your perspective in the private sector.

I thank my colleague, the ranking member, Mr. Moran, for his participation and his comments—Mrs. Morella. It has been a very long hearing; we didn't expect this lengthy a hearing. It is a very important subject, and if we spend $1 or $100 million on this, we need to make sure we are doing an effective job and a job that is in the best interests of the Federal employee and the taxpayer. So that is our goal.

I wish we had more time. Not only do we have a vote; it is going to be followed by other votes. So I will conclude this hearing.

I will ask the minority to submit additional questions and if there are other questions from this side, we will leave the record open. I also invite any of those who didn't get an opportunity to testify to submit statements which will be made part of the record.

It is our intent to try to do a good and proper job in an important area that affects the very lives of many Americans and Federal employees.

So with those comments, I thank you for your participation and for your patience, and I declare this meeting adjourned. Thank you.

[Whereupon, at 2:17 p.m., the subcommittee was adjourned.]

[Additional material submitted for the record follows:]

Testimony of Stephen Michael
Chairman of the Coordinating Committee
ACT UP Washington
202.462.0104

House Government Reform and Oversight Committee on Civil Service
June 22, 1995

Good Morning
I am here today to tell the members of this committee, the congress and the American people that ACT UP Washington opposes the continuation of the current AIDS training in the federal workplace. The program is a charade, a fraud and a farce. The White House Office of AIDS Policy is little more than a press office on AIDS, a smoke and mirrors operation. The AIDS Office, down to but three and a half full time staff members, functions little more as the homosexual wing of Bill Clinton's reelection campaign.

ACT UP is the AIDS Coalition to Unleash Power. We were founded in 1987 and have chapters across this nation and in 8 countries committed to ending the AIDS epidemic. We have fought too long to promote sound AIDS policy recommendations to allow this administration to continue with its make-believe AIDS office pretending to have a national AIDS policy.

Ms. Patricia Fleming, the Director of AIDS Policy, deigned not to be here because she says she's White House staff. This is strange because the office is funded through the Department of Health and Human Services. The position is so ill-defined, no one knows who Ms. Fleming reports to, least of all Ms. Fleming - does she report to Donna Shalala, or to the White House Domestic Policy advisor Carol Rasco, or Chief of Staff Leon Panetta, or is it Assistant Secretary Phil Lee? I'd like to thank the committee for at least raising the office out of its low level obscurity. We were supposed to have an AIDS Czar who reports directly to the President, but Ms. Fleming has never met one on one with the chief executive. And that is why we have no coherent national AIDS policy. This tragedy was dramatized for the nation during the recent rubber-glove debacle.

The glove incident exposes the weakness of the White House Office of AIDS Policy. Clinton's AIDS czar simply does not have the power an authority to implement national AIDS policy, even within the confines of the White House grounds.

Security personnel never know hat they're going to find when they inspect a bag or perform a body search. Officers routinely encounter everything from dirty diapers to syringes to used sanitary napkins. The wearing or surgical gloves is not only sensible in some circumstances, it should be standard procedure.

Yet law enforcement still has no standard set of guidelines and procedures for dealing with HIV and other far more infectious agents like hepatitis B. A half day sensitivity training on AIDS, which is touted by the AIDS office as its major accomplishment, is no substitute for the real policies and procedures implemented by a real AIDS Czar.

In the area of police procedure alone, agencies involved range from the Secret Service and the ATF in the Treasury Department, the FBI and INS in Justice, the Departments of Defense, State, and Interior, not to mention state and local law enforcement authorities. Patsy Fleming lacks the authority to coordinate these Departments with the Centers of Disease Control and Prevention, the Occupational Safety and Health Administration (OSHA), and the Department of Health and Human Services to establish appropriate procedures.

The AIDS training in the federal workplace program is a joke, but we're not laughing. The priorities of the AIDS epidemic are overwhelming. We need a real AIDS czar to implement policy recommendations across government departments. Instead, the AIDS office is coordinating workplace training at places like the National Institutes of Health, where top researchers like Dr. Tony Fauci and Dr. Bob Gallo are told they must spend a half a day listening to a prevention lecture. Make no mistake ACT UP Washington does not support throwing away precious AIDS dollars with lectures on the history of anal sex.

As an HIV positive individual with valuable private sector skills I can attest to the fact that this nation has lost tens of billions of tax dollars because of AIDS. No one has calculated the future cost of HIV and AIDS. But we can be certain that the costs will be much greater than they are now. Lost productivity. Lost tax revenue and increased costs in care, treatment, housing and more.

With that in mind, it is criminal that this president through his office of AIDS policy has done nothing of substance to save lives. History will record that under Bill Clinton's watch, more Americans will have died from AIDS, become HIV positive or received an AIDS diagnosis than during the terms of Ronald Reagan and George Bush...times two! And make no mistake, deposed AIDS Czar Kristine Gebbie and current AIDS Czar Patsy Fleming exist only to cover up that record of death and buy the votes of the next generation of HIV positive Americans with more lies and deceptions. When ACT UP called AIDS genocide during the Reagan and Bush years, we meant it. We still mean it. Just because the president happens to be a Democrat we will not become silent. Just because this congress is Republican lead we will not not plead with you to do what the previous seven Democratic congresses have not. I urge this congress to join us in a real effort to find, fund and implement a cure to AIDS. This nation can afford to do no less. If this Republican congress develops a sound policy and leads on AIDS, we will follow.

The Clinton Administration continually points to the AIDS in the federal workplace program as proof of its commitment and accomplishments on AIDS. The White House AIDS press office deflects criticisms and challenges to the Clinton AIDS record and the string of broken promises.

Organizations like the Human Rights Campaign Fund view AIDS as nothing more than an opportunity to raise more funds. They have bent over backwards to apologize for Bill Clinton and his failed AIDS record. I say this to you today so that you all understand that the Human Rights Campaign Fund does not now, nor have they ever spoken to the needs of HIV positive Americans. Certainly not this HIV positive American. So when they, and Fleming's minions tell you that a discussion of flavored condoms aimed at the men and women who discovered this critter called HIV somehow saves lives...don't believe them.

A real AIDS Czar with cabinet-status could effectively implement AIDS policies on a national level. That was Bill Clinton's promise. There are four reports from the earlier National Commission on AIDS with a series of policy recommendations which form the blueprint of what should be a nationally coordinated response to the AIDS epidemic. Those reports and those recommendations are still gathering dust. There's no AIDS czar with the power and authority to implement them. Thank you for the opportunity to address my concerns to you today. ACT UP. Fight Back. Fight AIDS.

United States
Office of
Personnel Management
Washington, D.C. 20415-0001

In Reply Refer To: Your Reference:

AUG - 8 1995

The Honorable John L. Mica
Chairman, Subcommittee on Civil Service
Committee on Government Reform and Oversight
United States House of Representatives
B-371C Rayburn House Office Building
Washington, DC 20515-6143

Dear Representative Mica:

This is in response to your letter of June 23 requesting supplemental information on the U.S. Office of Personnel Management's (OPM) role in overseeing Federal employee training programs.

Question 1. Describe actions OPM took to look into the abuses of the Administration's AIDS training program.

The Federal Workforce AIDS Initiative was a White House initiative with specific guidelines to agencies for implementing HIV/AIDS training. Agency heads implemented the initiative and its HIV/AIDS training. When the Washington Times article of March 29, 1995, reported improprieties in the Department of Energy's (DOE) HIV/AIDS training, OPM staff made informal inquiries of DOE's staff. Following discussions with DOE's staff, we concluded that the agency would appropriately deal with the concerns expressed and that no OPM action was required.

The story also reported alleged complaints from unnamed Department of Defense (DOD) employees. We made no inquiries of DOD because no DOD agency was identified. Your panel asked witnesses at the June 24, 1995 hearing which DOD agencies were the subject of the complaints. The witnesses did not know.

Question 2. Describe actions OPM took to look into abuses of the FAA training programs.

In 1993, OPM learned of alleged improprieties with Federal Aviation Administration management courses. Again, OPM staff informally discussed the procurement and conduct of agency diversity and sexual harassment training with Department of Transportation officials. We concluded that agency management was aware of the allegations and was taking appropriate corrective action.

Question 3. Does OPM currently have the authority to prevent an agency from conducting training that does not meet the statutory goals established by title 5 U.S.C. § 4103 or that is not being conducted in a manner suitable for the Federal workplace?

Section 4103(a) of title 5, United States Code, vests general responsibility for training in agency heads. OPM's primary role is to provide policy direction, oversight, guidance as to proper interpretation and application of the law, and assistance to agencies wishing to improve their internal training programs.

When we learn of complaints or alleged inappropriate actions, we work with agencies to solve or resolve the matter. We first ensure that agency officials with authority to correct the problem are fully aware of its implications for their organization. The great majority of the personnel concerns that come to our attention are successfully resolved by this approach.

If unsuccessful in gaining an agency's cooperation, OPM has authority to require that agencies adhere to the provisions contained in the laws and regulations that we administer. Although it has not been necessary for OPM to exercise its authority in this manner with regard to agency training programs, we would take whatever action was necessary to correct serious problems in the training area. For example, we might raise the issue at a higher level within the Administration, or even refer it to the Office of the Special Counsel or to the Department of Justice. It should be noted that section 5 U.S.C. 4118 does not authorize the Office of Personnel Management to prescribe the types and methods of intra-agency training or to regulate the details of intra-agency training programs.

I hope this is helpful to you. Should you need additional information, please contact Ira N. Forman, Director of our Congressional Relations Office, on (202) 606-1300.

Sincerely,

for Donald E. Brooks

Allan Heuerman
Acting Associate Director for
Human Resources Systems Service

United States
Office of Personnel Management
Washington, DC 20415-0001

In Reply Refer To: Your Reference:

AUG - 8 1995

The Honorable John L. Mica
Chairman, Subcommittee on Civil Service
Committee on Government Reform and Oversight
United States House of Representatives
B-371C Rayburn House Office Building
Washington, DC 20515-6143

Dear Representative Mica:

This is in response to your July 10, 1995, request to answer questions posed by Congressman James Moran related to your recent hearing on the Administration's AIDS training program. Congressman Moran asks the following questions:

Question 1. What exactly does OPM do when alleged abuses of agencies' training authority are brought to its attention?

When we learn of complaints or alleged inappropriate actions, we work with agencies to solve or resolve the matter. We first ensure that agency officials with authority to correct the problem are fully aware of it, and its implications for their organization. The great majority of the complaints that come to our attention are successfully resolved by this approach.

If this approach does not resolve the issue, OPM has authority to require that agencies adhere to the provisions contained in the laws and regulations that we administer. Although it has not been necessary for OPM to exercise its authority in this manner with regard to agency training programs, we would take whatever action was necessary and consistent with OPM's authority to correct serious problems in the training area. For example, we might raise the issue at a higher level within the Administration, or even refer it to the Office of the Special Counsel or to the Department of Justice. It should be noted that section 5 U.S.C. 4118 does not authorize the Office of Personnel Management to prescribe the types and methods of intra-agency training or to regulate the details of intra-agency training programs.

Question 2. What specific guidance did OPM offer for the Administration's HIV/AIDS training guidelines and for the development of the HHS curriculum and training manuals? Was your guidance adopted?

> OPM staff reviewed the "Recommended Guidelines for Federal Workplace HIV/AIDS Initiative: AIDS at Work" and responded informally to the Office of National Aids Policy (ONAP) staff. Our comments in general were that the guidelines should be less prescriptive in terms of course content, that agencies should have more flexibility in designing the curriculum, and that agencies should decide whether or not supervisors and employees should participate in the training together. Our comments were considered, with others, and integrated into the final document, published April 7, 1994.
>
> OPM participated with other agencies in an interagency workgroup hosted by Department of Health and Human Services, to develop an HIV/AIDS curriculum and training manuals. Our staff was satisfied with the curriculum material developed by the group. That curriculum was used by OPM interagency training delivery centers. Approximately 16,000 Federal employees received this HIV/AIDS training from OPM training centers. We also used the manual for internal OPM training.

Question 3. Should Congress take action to provide OPM additional resources to permit routine oversight of agency training programs to ensure that they meet the statutory objectives.

> There are millions of training instances a year, with very few problems. The "training law" places primary responsibility on agency training staff and management responsible for taking appropriate and prudent actions regarding the training of Federal employees. Complaints can and should be corrected by their efforts to the maximum extent possible. We believe OPM has sufficient resources to review periodically Federal agency training programs and to address serious complaints that are not resolved by the agency.

I hope this is helpful to you. Should you need additional information, please contact Ira N. Forman, Director of our Congressional Relations Office, on (202) 606-1300.

Sincerely,

for Donald E. Stroke

Allan Heuerman
Acting Associate Director for
Human Resources Systems Service

DEPARTMENT OF AGRICULTURE
OFFICE OF THE SECRETARY
WASHINGTON, D.C. 20250

June 26 1995

Honorable John L. Mica
Chairman, Subcommittee on Civil Service
Committee on Government Reform and Oversight
U.S. House of Representatives
B 371-C Rayburn House Office Building
Washington, D.C. 20515

Dear John:

This is in further response to your March 30, 1995, request for information on the Department of Agriculture's (USDA) implementation of the Executive Office of the President Federal Workplace HIV/AIDS Education Initiative (FWAEI). As discussed with members of your Subcommittee staff, the remaining requested information for items 1, 2, 11, and 12 is enclosed.

1. Copies of all correspondence, notes, memoranda, recordings, or other documents (including non-identical copies of all such documents and documents stored on computers, computer disks or tapes, or electronic mail) that relate or refer to any conversations or correspondence regarding AIDS training in the Federal workplace between any officer or employee of the Department of Agriculture and any person employed by or acting in behalf of (1) the White House National AIDS Policy Office, (2) the President, (3) any of his principal assistants, or (4) representatives of the Office of Personnel Management.

Enclosure 6 contains three correspondence sections to address (1) the White House AIDS Policy Office, (2) the President, and (3) the Office of Personnel Management.

2. Copies of all correspondence, notes, memoranda, recordings, or other documents (including non-identical copies of all such documents and documents stored on computers, computer disks or tapes, or electronic mail) that relate or refer to any complaints, comments, suggestions or other remarks by employees of the Department of Agriculture related to AIDS training at the Department.

Enclosure 7 is divided into two sections to address (1) employee complaints and (2) employee correspondence and employee HIV/AIDS training evaluations.

11. Copies of all correspondence, notes, memoranda, recordings, or other documents (including non-identical copies of all such documents and documents stored on computers, computer disks or tapes, or electronic mail) that relate or refer to criteria for the selection of instructors for AIDS training.

Recognizing the diversity of our workforce, the USDA agencies selected their AIDS instructors based on their assessment of the individual's capabilities. The AIDS instructors were subsequently certified based on peer feedback, self-assessment, trainer feedback, and performance on a pre-post test assessment. (See Enclosure 1A, Tab 2, page TTT-4.)

12. Describe all actions you have taken to protect your employees from the kinds of abuse detailed in the *Washington Times* article and explain when you took such actions.

(1) In the design and development of USDA's HIV/AIDS employee education program, numerous hours were spent with our contractor to ensure that the utmost sensitivity of this national and global health epidemic be demonstrated in the production of this employee education program for USDA employees.

(2) To represent the diverse employee population of USDA, a participatory advisory forum consisting of the 29 Agency AIDS Coordinators was established. This forum provided management with valuable information that contributed to the development of USDA's successful employee education program. Monthly meetings were held to advise and address any issues agencies might encounter with regard to AIDS training.

(3) Our rigorous certification process as explained in response to item 11 above demonstrates the extra effort we gave to ensuring the quality of our training cadre.

The information we have provided in this and our earlier response clearly demonstrates that the information contained in the *Washington Times* article does not represent the quality and content of USDA's HIV/AIDS program.

For additional information, please have a member of your staff contact Betty J. Thomas at (202) 720-8247.

Sincerely,

DAN GLICKMAN
Secretary

Enclosures

6/22/95

Department of Energy
Washington, DC 20585
August 7, 1995

The Honorable John L. Mica
Chairman
Subcommittee on Civil Service
Committee on Government Reform and Oversight
U.S. House of Representatives
Washington, DC 20515

Dear Mr. Chairman:

On June 22, 1995, Corlis S. Moody, Director, Office of Economic Impact and Diversity, testified regarding the Administration's AIDS training program.

Enclosed are the answers to the questions submitted by you and Representative Moran to complete the hearing record.

If we can be of further assistance, please have your staff contact our Congressional Hearing Coordinator, Barbara Barnes, on (202) 586-6341.

Sincerely,

Carolyn Herr Watts
Acting Assistant Secretary
Congressional and Intergovernmental Affairs

Enclosure

Printed with soy ink on recycled paper

QUESTIONS FROM CONGRESSMAN JOHN L. MICA

QUESTION #1: Why did the Department evaluate the impact of training on employee attitudes (e.g., on their willingness to do volunteer work)?

ANSWER: In the early months of the Federal Workplace HIV/AIDS Education Initiative, the Department did evaluate the impact of the HIV/AIDS training on employee attitudes in limited pilot testing of new survey instruments. These early evaluations were used based on recommendations of the Office of National AIDS Policy, the National Headquarters of the American Red Cross, and the Centers for Disease Control Business Responds to AIDS evaluation staff. Only a small population of the DOE employees, and for the most part only attendees of pilot sessions, were asked questions concerning attitudes.

The American Red Cross pilot tested an instrument in a few initial presentations that were made to DOE staff in Washington, DC and Golden, Colorado. This early survey included items that assessed employee attitudes relevant to the role of HIV/AIDS in the workplace. No other attitudes were assessed. The Red Cross indicated to the pilot attendees that "there were no right or wrong answers to these questions." Because of survey administrative difficulties, an inadequate number of responses were received for these items. Thus, attitude measures were

neither recorded nor included as a criterion for effectiveness assessment. This has been documented in the Red Cross Final Evaluation previously sent in Binder #1, Section #2.
The Red Cross training survey at our Nevada Operations office as well as the two pilots mentioned earlier, did include the following question: "How likely are you to volunteer for HIV/AIDS related community work?" That is the only place in Red Cross evaluations that we find wording similar to yours. The Red Cross included this question to respond to the Centers for Disease Control Business Responds to AIDS initiative which defines five principles of workplace education, including volunteering in the community. The summary evaluation for the Nevada Operations Office is in Binder #4.

Another survey instrument, designed by the Center for Disease Control Business Responds to AIDS evaluation staff, was used in one pilot session at the Oakland Operations Office and these are included in Binder #6.

In early 1994, the Department selected another contractor, NOVA Research Company, to provide the HIV/AIDS training at Headquarters, and a new course was implemented. The evaluation instrument designed for these classes, representing a significant majority of the training at Headquarters, did not include questions relating to employees' attitudes. These evaluations were included in our previous submission to you.

The information binders provided to you on July 21, 1995 contain all the surveys and evaluations we received from the HIV/AIDS training coordinators in our regional and area offices. For the most part the evaluations used throughout the regions were shorter and did not include questions about employees' attitudes.

I want to emphasize that the comments we received from our employees throughout the Department were taken very seriously. These comments provided the best guidance in correcting misunderstandings, and more importantly, improving the HIV/AIDS training.

QUESTIONS FROM CONGRESSMAN JOHN L. MICA

QUESTION #2: Do you think it is appropriate for a government agency to attempt to change employees minds about AIDS or any other topic, rather than just their behavior on the job?

ANSWER: The Department did not attempt to change employees minds about HIV/AIDS. Any questions asked of our employees attending the HIV/AIDS training were intended to measure the effectiveness of the training and gather their concerns and comments. These comments were always used to improve content and delivery of the course. The Department used materials and instruction techniques to educate our employees about HIV/AIDS in order to reduce fear and to answer employee concerns. The Department followed the recommended guidelines from the Office of National AIDS Policy very closely and the instructors were required to present the subject matter in a professional and clinical manner. More importantly, the HIV/AIDS training focused on those issues which were specific workplace issues.

In conclusion, we followed the guidelines closely, followed directions from the Office of National AIDS Policy, took our employees concerns seriously, and made improvements to the course design, delivery, and the evaluation tool.

QUESTIONS FROM CONGRESSMAN JAMES MORAN

QUESTION #1: You indicated that 85% of the employees who received training at your department rated it very good or excellent. How did the other 15% of the participants rate the training? Did you take any action as a result of what you learned from those giving the training less than a very good rating?

ANSWER: The following information was compiled from evaluations received from Headquarters employees who attended the HIV/AIDS training and were asked about their "overall impression" of the training.

- Approximately, 4,400 employees attended
- 3,639 completed evaluations
- 1,594 (44%) rated the training as "Excellent"
- 1,448 (41%) rated the training as "Very Good"
- 407 (11%) rated the training as "Good"
- 63 (1%) rated the training as "Fair"
- 43 (1%) rated the training as "Poor"
- 84 (2%) did not complete this question

Any questions asked of our employees attending the HIV/AIDS training were intended to measure the effectiveness of the training and gather concerns and comments. This information was used to improve content and delivery of the course. The Department listened seriously to the concerns of our employees and made many improvements throughout the past two years to the course design and delivery, and the evaluation tool.

Yes, the Department took action to respond to valid employee concerns, and implemented their suggestions for improvement. Many employees who rated the training other than favorable often did not include comments on which the Department could take action.

QUESTIONS FROM CONGRESSMAN JAMES MORAN

QUESTION #2: What if any disciplinary action was taken against those of your employees who declined to participate in AIDS/HIV training?

ANSWER: The Department did not take disciplinary action against employees who did not attend the training. During the training at the Department very few employees formally asked to be excluded from the classes. Through their training coordinators and their managers, employees knew they had the right to refuse the class and arrange for alternative education which included a self study manual and watching the Red Cross Video, "AIDS in the Workplace." Any employee who had concerns about their attendance at the training could call the Department HIV/AIDS training contact or the Office of Employee Relations.

QUESTIONS FROM CONGRESSMAN JAMES MORAN

QUESTION #3: How has your AIDS/HIV training program been evaluated? What if any changes have been made in the program as a result of what has been revealed in participant's evaluations?

ANSWER: The HIV/AIDS training program was evaluated in several ways. In the beginning several pilot courses were conducted by the National Headquarters of the American Red Cross. Much of the information which shaped the Department's HIV training was received through candid discussion with members of the pilot groups which included almost every DOE organization.

In addition, in the early months of the Federal Workplace HIV/AIDS Education Initiative, the Department and the National Headquarters of the American Red Cross evaluated the impact of the HIV/AIDS training using a "pilot" survey instrument. These early evaluations were used based on recommendations of the Office of National AIDS Policy, the National Headquarters of the American Red Cross, and the Centers for Disease Control Business Responds to AIDS evaluation staff. Only a small population of the DOE employees, and for the most part, only attendees of pilot sessions completed these surveys at Washington DC and Golden, Colorado.

The Red Cross Final Evaluation from this training was previously sent to Chairman Mica on June 14, 1995 in enclosure Binder #1, Section #2. A similar survey was conducted at the Nevada Operations Office and the results of this survey are included in enclosure Binder #6 which was sent to Chairman Mica on July 21, 1995.

Another survey instrument, designed by the Center for Disease Control Business Responds to AIDS evaluation staff, was used in one pilot session at the Oakland Operations Office and these evaluations are also included in Binder #6.

In early 1994, the Department selected another contractor, NOVA Research Company, to provide the HIV/AIDS training at Headquarters, and a new course was implemented which used a new survey instrument. This survey, used in a significant majority of the Headquarters courses, was brief and focused on gathering concerns from the employees, as well as information about course content and delivery. These evaluations were included in our previous submission to Chairman Mica on June 14, 1995.

The information binders sent July 21, 1995 to Chairman Mica contain all the surveys and evaluations we received from the HIV/AIDS training coordinators in our regional and area offices. For the most part the evaluations used throughout the regions were shorter and focused on gathering employee comments and information about the content and delivery of the course.

Our training at the Department was successful for a few simple reasons . The Department seriously listened to any employee concerns and continually incorporated their suggestions into our training. The questions asked of the employees attending the HIV/AIDS training were intended to measure the effectiveness of the training and gather concerns and comments. These comments were often used to improve content and delivery of the course. These comments provided the best guidance in correcting misunderstandings, and more importantly, improving the HIV/AIDS training.

DEPARTMENT OF AGRICULTURE
OFFICE OF ASSISTANT SECRETARY FOR ADMINISTRATION
WASHINGTON, D.C. 20250-0100

SEP 1 8 1995

Honorable John L. Mica
Chairman, Subcommittee on Civil Service
Committee on Government Reform and Oversight
U.S. House of Representatives
B 371-C Rayburn House Office Building
Washington, D.C. 20515

Dear Mr. Chairman:

Thank you for your letter of July 10, 1995, regarding my testimony on the Department of Agriculture's (USDA) HIV/AIDS employee education training program. The responses to the questions submitted by Congressman Jim Moran follow:

(1) Were any employees ever disciplined for refusing to participate in your HIV/AIDS training?

No

(2) How is your training program evaluated?

The USDA HIV/AIDS training program evaluation process involves feedback from employees attending the training by completing program evaluation forms. For the March 30 Interagency HIV/AIDS Training Program, over 10,000 viewer evaluations were received. Overall, the evaluations indicated the training program was well received by its audience. Of those, 81 percent rated the training program as effective, 12 percent rated the training ineffective or not useful, and 3 percent rated the program very ineffective or not at all useful. The remaining 4 percent did not express an opinion.

(3) Your statement indicates that your training materials were upgraded as the result of the information gained through program evaluations. Explain the specific changes made?

As mentioned in my June 22, 1995, statement, constructive criticisms were used to upgrade and improve the training wherever possible. The specific program changes included the following:

- Increased the teachback segment of the Train-the-Trainer (TTT) training instruction to afford the trainees the opportunity to become more familiar with the content and training curricula. Overall, this exercise helps in assessing the trainee's readiness to teach others and assists in self-assessment.

- Additional training materials were provided to the trainers:

  - a list of USDA certified HIV/AIDS instructors and Safety Officers
  - a comprehensive vocabulary/"terms most often used" pertaining to the subject matter were added to the training manual
  - contact information for state AIDS offices throughout the country.

- Adjusted time allocation of the TTT program to provide additional time for the Person With AIDS (PWA) presentation.

In view of public interest regarding our HIV/AIDS Employee Education Program, we are organizing a working group to review all HIV/AIDS education training materials. Additionally, we will continue to evaluate overall program effectiveness and make adjustments where appropriate.

Sincerely,

Wardell C. Townsend, Jr.
Assistant Secretary
for Administration

7/26/95

OFFICE OF THE DIRECTOR

UNITED STATES
OFFICE OF PERSONNEL MANAGEMENT
WASHINGTON, D.C. 20415

OCT - 2 1995

Honorable John L. Mica
Chairman
Subcommittee on Civil Service
Committee on Government Reform
and Oversight
U.S. House of Representatives
Washington, D.C. 20515

Dear Mr. Chairman:

The additional information you requested regarding the privatization of OPM's Workforce Training Service is enclosed.

If you have further questions or need additional information, please contact Mr. Ira N. Forman of our Office of Congressional Relations.

You have set a very full agenda for the Subcommittee this fall, and I look forward to testifying again.

Sincerely,

James B. King
Director

Reductions-in-Force

OPM issued 202 separation notices in the Workforce Training Service (WTS) Reduction-in-Force. Of that number 71 employees were eligible to retire and 61 elected to exercise this option. If buyouts had been authorized for this purpose 131 of the targeted employees would have been eligible. However buyouts were not authorized or paid as a result of the RIF due to the privatization of training functions.

All impacted employees have been offered assistance through OPM's Career Transition Program. This program provides logistical and counseling support including, but not limited to, job search, resume/application assistance, assistance in identifying occupations in demand, and assistance in identifying training necessary/available to pursue careers in such occupations.

Of the WTS employees who participated in the OPM program, 91 percent have successfully completed transition. There are 16 individuals still in the process of transitioning. Five of those are in Washington, D.C., four are in Denver, four in the San Francisco Region, and three in the Dallas Region.

Most of those separated accepted employment with either the Graduate School or Brookings. Many others found positions in Federal agencies, including OPM. As of our latest information seven people have been hired into private sector positions. Jobs have also been located in state and local government, and at least one individual has accepted such employment. Another person has started a private business.

Overhead Accounts

In response to the question of how much money and how many positions were attached to the training portion of the revolving fund, we can state that common services of approximately $5.8 million were associated with the training portion of the revolving fund. Based on an average annual compensation level of $43,000, this would equate to 135 positions if all funds had been directed to personnel expenses. As you might expect with common services, there were positions supporting more than one program so this is the best way to estimate the number of positions.

Elimination of revolving fund functions will result in the elimination of related overhead activities.

Legal Authority to Sell

The concerns Ms. Mitchelson addressed in her testimony were that, first, OPM had no statutory authority to sell to the private sector, and second, if OPM intended to contract for the performance of its training obligations then OPM would have to conduct that procurement in accordance with the requirements of the Federal Acquisition Regulations (FAR) and the Competition in Contracting Act (CICA).

Even if OPM had the statutory authority to sell to the private sector, it still would have been required to conduct a competitive procurement. Also, the statutory authority would have to be fairly specific as to what could be sold to the public, given that there are statutory authorities that allow sale of certain items by other agencies to the public. An example is the Federal Property and Administrative Services Act of 1949, which authorizes the General Services Administration to sell government property to the public. See 40 § U.S.C. 484.

Privatization Options Costs

In our February "Options Paper" we estimated that the cost of outright termination of the training program would be $39.2 million, versus $34.2 million for the cost of an instrumentality, as defined in the options paper. As of June 30, 1995, we estimated that these costs would be $35.0 million and $31.3 million, respectively. Included in both June estimates is $30.2 million of "fixed costs". The fixed costs represent:

a. The Revolving Fund Training Program deficit at June 30, 1995.
b. An estimate for the cost of severance pay for the employees who would be separated from government service.
c. An estimate of the undepreciated costs of the assets which would be written off when operations cease.
d. An estimate of the uncollectible accounts receivable which we would write off.

The June estimates include variable costs of $4.8 million and $1.1 million, respectively .
The variable costs represent:

a. Estimate of the cost for incremental staff time for implementation of the instrumentality option.
b. Estimates of the incremental costs for compensation, outplacement/retraining services for affected employees and costs of representing the Agency in adverse actions arising from the implementation of the termination option.
c. The decrease in the deficit for the four months ended June 30, which we estimate would not have been realized under the termination option.

These amounts are still estimates, as full costs have not yet been realized.

Conflicting Responsibilities

OPM has responsibility for overseeing all civil service laws, rules and regulations including those relating to training provided to Federal employees. Training is just one area where OPM has maintained an operational program and an oversight responsibility for that program. We do not believe there is an inherent conflict between direct delivery of training and our Governmentwide responsibility to oversee training. Furthermore, OPM's direct training delivery role is becoming much less extensive due to privatization.

Also, OPM has created an organizational entity, the Office of Merit Systems Oversight and Effectiveness (OMSOE), which is charged with ensuring that government human resources management programs, including training, are carried out in accordance with applicable laws and the merit system principles. This is an independent organization that reports to the Director of OPM.

While we remain ready to expand oversight of agency training programs should it become necessary, there have not historically been significant problems in this area. The primary responsibility for determining the types and methods of training to be provided and for evaluating the results of training rests with the head of each agency. We take our oversight role very seriously, but attempting to monitor closely every aspect of every training program offered at every agency is not feasible, nor is it a wise use of the limited resources available. Rather, we set broad standards and guidelines for agencies, including OPM, to follow. The independent nature of OMSOE should allow it to exercise any oversight necessary without internal conflict or compromise. Our commitment is to ensure that any training delivered by OPM meets all applicable laws and that it focuses on the goals of improving individual and organizational effectiveness.

OPM has not encountered problems meeting the standards and guidelines. If such a problem should arise the independent nature of the OMSOE should enable us to deal with the situation without any conflict of interest.

Scope of Privatization

Each agency will have to make decisions on what training should be conducted by its' own employees and what training should be contracted with vendors be they private companies, individuals or governmental entities. Commercial vendors provide a substantial portion of government training already either through contracts with agencies or through individual training requests. It is likely that agencies will decide to provide some "in house"

training which is agency unique or for which security arrangements preclude the use of outside trainers. Nevertheless, the downsizing of government, especially administrative positions, will lead to more training being accomplished through outside vendors.

Extent of Transfer

The value of the prior contractual obligations which the Graduate School is fulfilling for OPM is about $8.6 million.

OPM has/or will surplus all unneeded space, facilities, equipment and furniture in accordance with GSA regulations. GSA will dispose of the space and equipment in accordance with their procedures. OPM will not transfer any space, facilities, furniture or equipment to the Graduate School.

The estimated value of the assets to be turned over to GSA cannot be calculated until they are finally surplussed. We will provide you with that estimate when it is available.

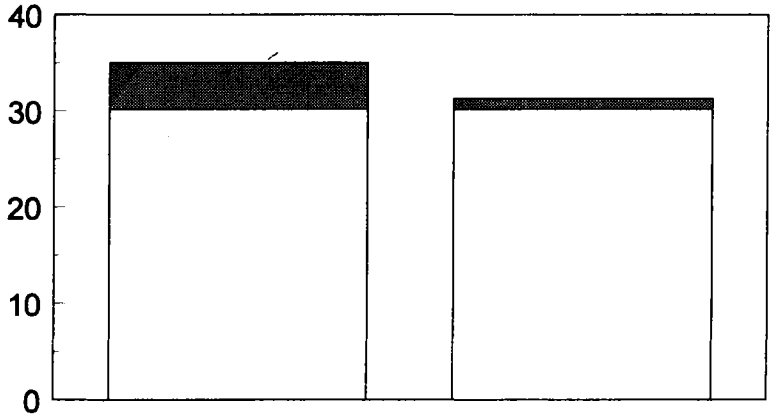
OFFICE OF PERSONNEL MANAGEMENT
COMPARISON - TERMINATION OF TRAINING VS USDA GRADUATE SCHOOL PRIVATIZATION
ESTIMATE - AS OF JUNE 30, 1995
($m IN MILLIONS)

	TERMINATION ESTIMATE	PRIVATIZATION ESTIMATE	VARIABLE COST ESTIMATE	
FIXED:				
DEFICIT - 6/30	$15.5	$15.5	$0.0	
SEVERANCE PAY	5.4	5.4	0.0	
ASSET WRITEOFFS	4.9	4.9	0.0	
UNCOLLECTIBLE ACCOUNTS RECEIVABLE	4.4	4.4	0.0	
SUB TOTAL	30.2	30.2	0.0	
VARIABLE:				
MARCH-JUNE NET PROFIT	2.3		2.3	MARCH THROUGH JUNE PROFITS NOT REALIZED IF DECISION TO TERMINATE
INCREMENTAL STAFF TIME		0.1	(0.1)	COST OF STAFF TIME DEVOTED TO PRIVATIZATION
INCREMENTAL COMPENSATION COSTS	0.4		0.4	COMPENSATION FOR 220 @ $50k FOR 1 PAY PERIOD
OUTPLACEMENT/RETRAINING	0.5	0.3	0.2	INCREMENTAL COSTS FOR TOTAL TERMINATION
UNEMPLOYMENT	0.6	0.3	0.3	INCREMENTAL COSTS FOR TOTAL TERMINATION
ADVERSE ACTIONS	1.0	0.4	0.6	INCREMENTAL COSTS FOR TOTAL TERMINATION
SUB TOTAL	4.8	1.1	3.7	
ESTIMATE - 6/30	$35.0 (1)	$31.3 (2)	$3.7	INCREMENTAL COST OF COMPLETE TERMINATION

(1) DIFFERENCE OF $4M FROM FEBRUARY'S ESTIMATE DUE PRIMARILY TO CHANGE IN DEFICIT
(2) DIFFERENCE OF $3M FROM FEBRUARY'S ESTIMATE DUE PRIMARILY TO NO CAPITALIZATION REQUIREMENT

07/25/95
05:35 PM

OFFICE OF PERSONNEL MANAGEMENT
TRAINING TERMINATION VS. PRIVATIZATION
($ in millions)



	TERMINATION	PRIVATIZATION
FIXED	30.2	30.2
VARIABLE	4.8	1.1

TRNGPRV PRE

DEPARTMENT OF AGRICULTURE
OFFICE OF ASSISTANT SECRETARY FOR ADMINISTRATION
WASHINGTON, D. C. 20250-0100

AUG 11 1995

Honorable John L. Mica
Chairman, Subcommittee on Civil Service
Committee on Government Reform and Oversight
U. S. House of Representatives
B 371-C Rayburn House Office Building
Washington, D.C. 20515

Dear Mr. Chairman:

I am submitting the following clarification to the June 22, 1995, testimony regarding the Federal Workplace HIV/AIDS Education Initiative.

Specifically, pages 123, 138, and 139, I offer the following reply to your statements in reference to the Values HIV/AIDS Worksheet and the Department of Agriculture's (USDA) March 30 video satellite broadcast HIV/AIDS educational package:

Page 123: (2917-2926)
Mr. Townsend: Mr. Chairman, that particular instrument you were looking at, was used in our train-the-trainer process. It was developed and provided by the contractor. The purpose of the Values about HIV/AIDS Related Issues Worksheet was to assist the trainees in identifying his/her own values, and to understand differing values of those individuals they would be responsible for training. This instrument is by no means a tool to rate a trainer's suitability but rather a demonstration of an extra effort to ensure the quality of our training cadre.

Page 123: (2938)
Mr. Townsend: Mr. Chairman, the publication in question represents HIV/AIDS educational materials in association with USDA's video satellite broadcast that aired March 30, 1995. The specific document you referenced was taken from the resource book provided by the American Association of World Health announcing World AIDS Day held December 1, 1994, on "AIDS and Families." The Office of Personnel Management distributed this publication to all Federal agencies with permission to reproduce. USDA agencies participating in the broadcast were allowed to provide additional materials in their employees' education packages. This publication was used by one of USDA's agencies participating in the March 30, 1995, satellite broadcast on HIV/AIDS. We are unaware of any adverse comments or actions received from USDA employees regarding this particular publication.

Page 138: (3307-3308)
Mr. Townsend: Qualified volunteer trainers for USDA were first, nominated by their agencies and second, met criteria for certification. Certification for training was based on peer feedback, self-assessment, trainer feedback, and performance on a pre- and post- assessment. A cumulative score of 90 was necessary to become lead trainer, 80 for co-trainer, and below 80 earned the assistant trainer designation. There was no single factor to determine the quality of trainers selected to present USDA's HIV/AIDS training activity. Moreover, the failure to be selected as a trainer was in no way viewed as a negative determination as to the employee not selected at the end of training.

Page 139: (3311-3312)
Mr. Townsend: It is important to stress that certification of trainers was based on peer feedback, self-assessment, teachback, and trainer feedback. There were no right or wrong answers to the worksheet but, more importantly, it provided a means to determine how trainers would address issues and concerns that could be raised by participants.

We appreciate the opportunity to review and respond to the HIV/AIDS testimony for the record.

Sincerely,

Wardell C. Townsend, Jr.
Assistant Secretary
for Administration

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