

aids vancouver

THE BC BUSINESS & LABOUR
COALITION ON AIDS

MARKET SURVEY

February 1995

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EXECUTIVE SUMMARY

HIV/AIDS related situations have occurred in 25% of the organizations that were surveyed. On the whole, only 6% believed that their organization handled HIV/AIDS situations rather poorly to very poorly.

One out of every four organizations in British Columbia have either a written policy or a policy that has a statement pertaining to HIV/AIDS in the workplace. Of these respondents that had some form of HIV/AIDS coverage in the workplace, over 80% have coverage in the form of a written policy rather than a policy that includes a statement on HIV/AIDS.

Most respondents feel that there is no written policy in their workplace because HIV/AIDS issues are not a priority or concern at this time. A total of 48% stated that "AIDS in the workplace" policies were not an issue. Respondents rarely gave "negative" reasons toward why a policy had not been introduced into the workplace.

Fifty-two percent of the respondents credited management for introducing HIV/AIDS policies into the workplace. The results indicate that executive management holds most of the responsibility for introducing HIV/AIDS policies into the work environment.

Most organizations have employee assistance programs that extend coverage to workers with HIV/AIDS. In contrast, education programs concerning 'HIV/AIDS in the workplace' are not as prevalent. Only 14% of the organizations had offered an education program in the past 12 months. Most organizations felt that offering education programs on HIV/AIDS were not a priority or an issue at the present time.

When introducing or furthering a policy or education program, organizations felt that providing information on a 'model' or proven program is the most preferred form of support that could be given. Respondents also preferred consultations from other workplaces that have successfully introduced HIV/AIDS related policies.

Publically-owned organizations are more likely to have a written policy or statement in place than a private organization. Additionally, public companies were almost three times more likely than private companies to offer an education program on HIV/AIDS.

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Organizations that operate under a unionized environment were more likely to have coverage for HIV/AIDS in the workplace. When compared to non-unionized organizations, unionized organizations were twice as likely to have a written policy or statement.

The relative size of an organization seems to reflect the extent of HIV/AIDS coverage. Larger companies have a higher likelihood of having written policies or statements, employee assistance programs and education programs on HIV/AIDS.

When organizations had encountered none or one occurrence of an HIV/AIDS related situation, it did not change the likelihood that written policies or other forms of coverage would be in place. However, once organizations had encountered multiple HIV/AIDS related situations in the workplace, the likelihood of having written policies or statements in the workplace had increased substantially.

Most organizations felt that support to further or help introduce written policies or education programs should be primarily focused on convincing management that HIV/AIDS policies or programs are necessary. Secondly, respondents also felt that support would be invaluable if HIV/AIDS related information be available upon request. Thus, these organizations preferred not to be approached but wanted the option to request for help or information if they desired. Non-profit organizations were discovered to be unique in that they felt that the main focus of support should be directed at convincing the employees that policies and programs should be in place.

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INTRODUCTION

The BC Business and Labour Coalition on AIDS, composed of business and labour leaders from British Columbia, provides leadership for the business and labour community in response to HIV/AIDS. The aim of this volunteer group of committed individuals, in collaboration with local AIDS organizations, is to represent business and labour organizations' concerns on HIV/AIDS as a workplace issue. The coalition can assist in the development and promotion of workplace initiatives that include education, policy and community development.

The purpose of this study is to accurately assess the concerns and considerations of business and labour with regards to HIV/AIDS related issues in the workplace. The information abstracted from this study can be used to appropriately address and identify the Coalition's most relevant concerns.

RESEARCH OBJECTIVES

The objectives of the research are as follows:

- Assess the current levels of coverage for HIV/AIDS in the workplace.
- Determine the reasons why coverage for HIV/AIDS have not been introduced into the workplace.
- Evaluate how written policies concerning HIV/AIDS are introduced into the workplace.
- Identify and assess the suggestions that will encourage or aid the introduction of an HIV/AIDS education program or written policy into the workplace.
- Determine how common are HIV/AIDS related work situations .
- Assess the current capability of businesses to adequately handle HIV/AIDS related situations.
- Identify and characterize the companies that have HIV/AIDS related coverage for the workplace.

The data collected was cross-tabulated with 'identifying' variables such as privatization, unionization, size of companies and the number of previous HIV/AIDS related occurrences in the workplace. These cross-tabulations will indicate whether there is a relationship or influence on the respondents' activities or existing status. However, cross-tabulations can only indicate whether or not there is a relationship. The actual nature of the relationship can best be determined and explained with further analysis such as multivariate analysis.

RESEARCH METHODOLOGY

A telephone survey was administered between January 24 and February 3. Respondents to the survey were systematically chosen from a contact list provided by AIDS Vancouver. This contact list was comprised of various business organizations within British Columbia. It is the assumption that statistical sampling procedures were not used in the compilation of this contact list. Unsurprisingly, we discovered the sample pool to be under-represented in the following groups.

1. 'Small-size' organizations with under 50 employees
2. Non-profit organizations

These two groups represent a greater proportion of the actual population than what was accumulated in the sample pool. Market Reach Research recommends that any future studies be conducted in such a way to ensure accurate representation from the small organizations as well as non-profit organizations.

The participants in the survey were comprised of directors or 'head-professionals' representing their respective human resources departments or functions. Marketing research firms were not selected to participate in the survey.

A sample size of 331 was accumulated. The level of precision for this survey will fall within a maximum margin of error of +/- 5.4% when using a 95% confidence interval. For illustration, we assume the true population mean of a dichotomous variable (i.e. YES/NO) to be 50%. Based on this assumption we can be certain that, in 19 out of the 20 times an estimate of the mean is conducted, the estimate will fall within +/- 5.4% of the true population mean.

It should be noted that some of the cross tabulations will fall within a lower level of accuracy due to inadequate sample sizes of the sub-populations or cell frequencies. Sub-populations or cells require at least a frequency of 5 in order for accurate statistical testing. As a result, statistical tests used to measure significance and precision will be either modified or omitted in some instances.

The data is provided in tables in the appendices of the report. As multiple responses were encouraged for many of the questions, the summation of the 'percentage of respondents' measures will not total to 100%. Please disregard this number because it holds little interpretative value other than to acknowledge to the reader that this column pertains to the 'percentage of respondents' instead of 'percentage of responses'. Essentially, the 'percentage of respondents' measures cannot be added together and totalled when using multiple response questions.

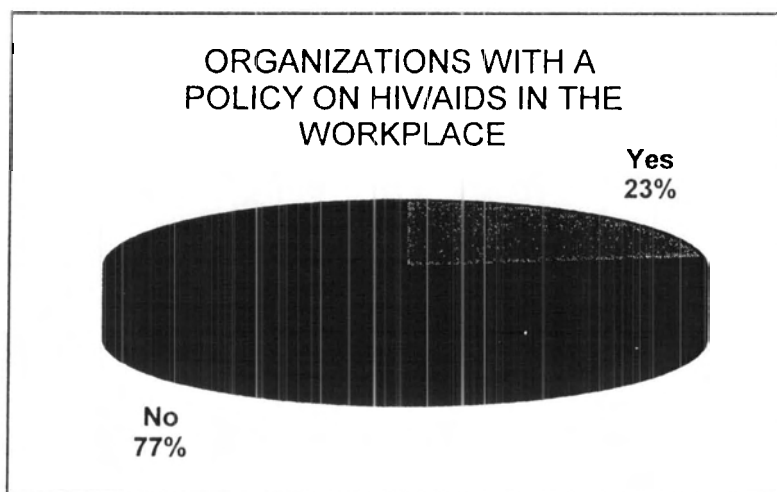
All verbatim "other" comments are included in the appendices.

RESEARCH RESULTS

Question 1.

LIKELIHOOD THAT ORGANIZATIONS WILL HAVE A WRITTEN POLICY ON HIV/AIDS

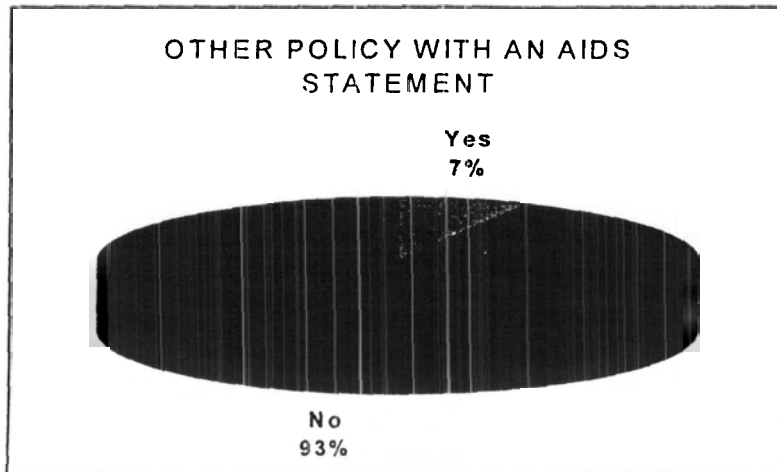
Only 23 percent of the 330 respondents had mentioned that their company has a written policy on HIV/AIDS. Consequently, cross-tabulations were conducted to better characterize this group of HIV/AIDS written policy holders. The results from the cross-tabulations are reported in the cross-tabulations section.



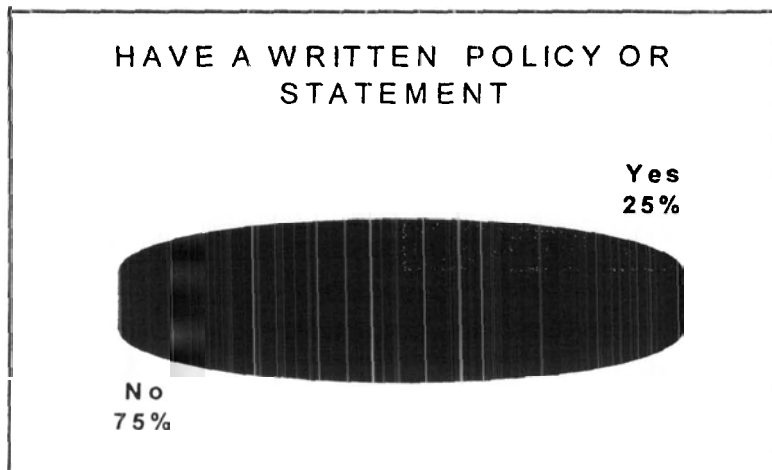
Question 2.

LIKELIHOOD THAT ORGANIZATIONS WILL HAVE ANY POLICY WITH STATEMENT ON HIV/AIDS

Of the respondents that stated there are no existing written policies in their workplace, further investigation was done to see if any written statement on HIV/AIDS existed at all. The findings show that of the respondents who answered 'NO' to having an HIV/AIDS policy, 7% had mentioned that there existed a written statement on HIV/AIDS in their workplace.



Further analysis reveals that only 83 respondents or 25% had mentioned having at least a policy with a written statement on HIV/AIDS.



Question 3.
REASONS WHY THERE IS NO POLICY ON AIDS IN THE WORKPLACE

When asked why there was not a policy in place, 48% of the respondents felt that 'Aids was not an issue' in their workplace. Three of the top four responses were 'Aids not an issue' (48%), 'Aids not seen as a priority' (14%) and 'Company is too small/Not many policies at all' (13%). These results seem to be based on similar dimensions of ignorance or lack of awareness.

The second most frequently mentioned reason for not having a written policy was due to the fact that companies 'Treat AIDS like any other illness'. As a result, 17% of the respondents had felt that their companies should not discriminate against other illnesses.

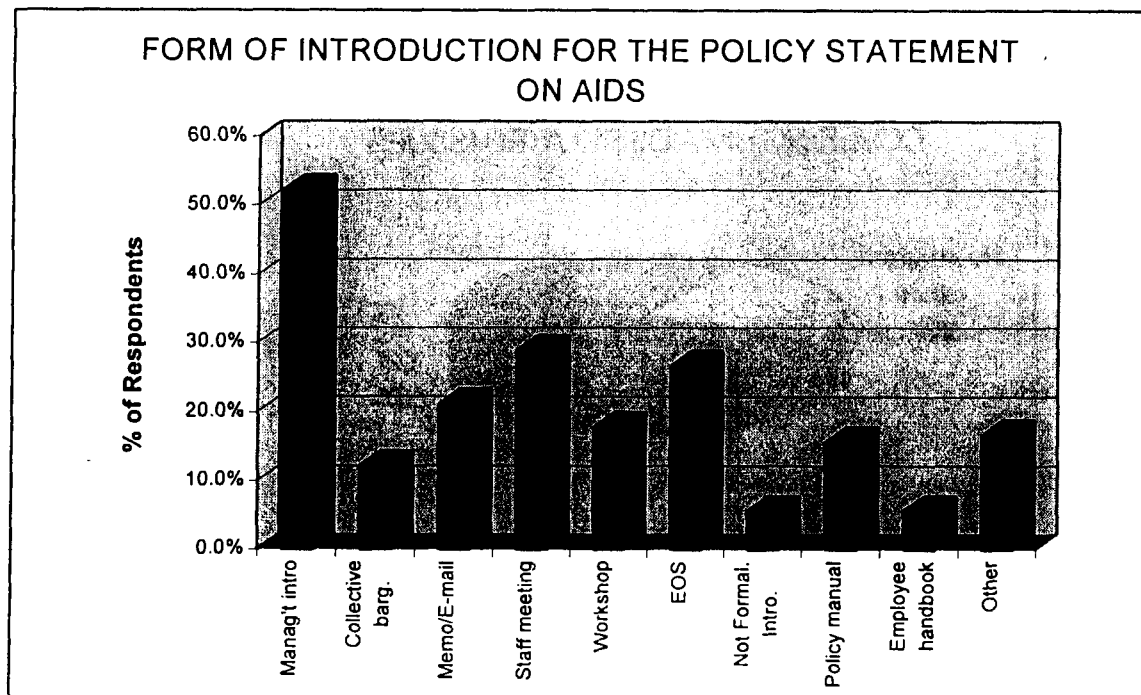
Respondents' reasons that were reported as relating to resistance or negativity were minimal. Consequently, 'Concerns about executive support', 'Employer resistance', 'Union resistance', 'Employees resistance' and 'Fears of adverse client reaction' each comprised less than one percent of the respondents.

The reasons given by respondents suggest that companies do not explicitly have an adverse or resistance-like reaction toward introducing HIV/AIDS related policies to their workplace. Instead, companies that have not introduced HIV/AIDS policies do so because HIV/AIDS is not viewed as a priority.

REASONS FOR NOT HAVING A POLICY ON AIDS IN THE WORKPLACE			
Question #3			
Most Frequent Responses	% of Respondents	Least Frequent Responses	% of Respondents
Aids not an issue	47.8%	Concerns about executive support	0.4%
Treat like any other illness	17.3%	Union resistance	0.4%
Aids not seen as a priority	13.7%	Fears of adverse client reaction	0.4%
Company too small/Not many policies	12.8%	Employer resistance	0.9%
Currently working on a program	4.0%	Employee resistance	0.9%
Not requested	2.7%	Up to head office	0.9%

Question 4.
METHODS USED TO INTRODUCE A POLICY STATEMENT ON AIDS INTO THE WORKPLACE

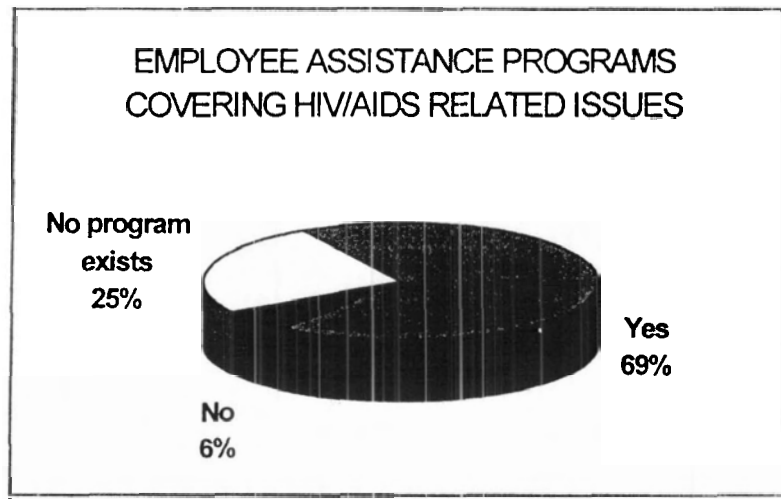
When respondents were asked how HIV/AIDS policy statements were introduced into their work environments, 52% had mentioned that management was responsible for bringing the policies into place. The next most frequent responses were introductions through staff meetings (29%), employee orientation sessions (27%) and memo/e-mail (21%).



Question 5.

LIKELIHOOD THAT ORGANIZATIONS WILL HAVE AN EMPLOYEE ASSISTANCE PROGRAM

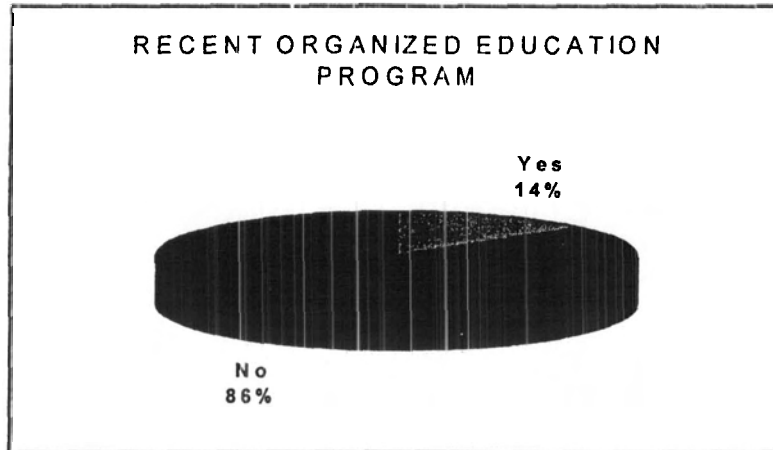
A total of 309 respondents answered this question. Analysis of the results reveal that 25% of the respondents stated that their companies do not have any form of employee assistance coverage. Of the remaining 75% or 231 respondents who have an employee assistance program, 92% or 212 of them mentioned that the program provides for HIV/AIDS related issues.



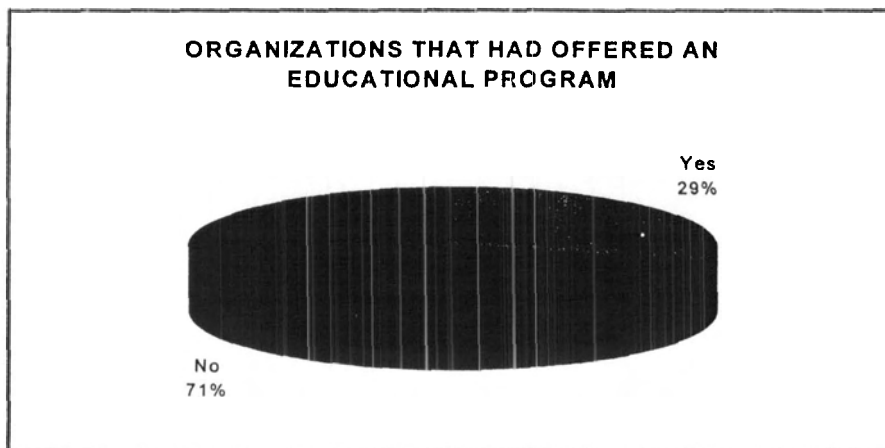
Question 6. AND 7.

LIKELIHOOD THAT ORGANIZATIONS WILL HAVE OFFERED AN EDUCATION PROGRAM

When asked whether any organized education program on HIV and AIDS had been offered in the past 12 months, only 14% of the respondents had offered such a program in that time.



The remaining 282 companies that had not offered an education program in the past 12 months were then asked if they had ever offered such a program. The results from this question were integrated so that we could determine the percentage of companies who had offered an education program regardless of whether or not it was offered in the past 12 months. These computations show that out of 318 companies, 29% had at one time or another offered an HIV/AIDS education program to the workplace.



Question 8.
REASONS WHY AN EDUCATION PROGRAM WAS NOT OFFERED

The results show that 47% of the respondents felt that introducing an education program was 'Not an issue', making it the most frequently recorded response. Furthermore, 'Aids not seen as a priority' was the next most frequently given response at 21%.

There is an indication that an attempt to introduce HIV/AIDS related education programs will not be met by resistance or negativity. Essentially, cost related issues for introducing a education program were rarely reported as reasons. From these results, the only perceived obstacle to introducing an education program is the fact that HIV/AIDS issues take on secondary importance. Thus, the solution for successful introduction of an education program requires the ability to educate or effectively communicate the importance and relevance of such programs.

REASONS WHY THERE IS NO EDUCATION PROGRAM IN THE WORKPLACE			
Question #8			
Most Frequent Responses	% of Respondents	Least Frequent Responses	% of Respondents
Aids not an issue	48.6%	Currently working on a program	0.5%
Aids not seen as a priority	13.7%	Can't afford the employee time	0.5%
Employees know from other sources	13.9%	Concerns about executive support	1.0%
Not requested	6.7%	Fears of adverse client reaction	1.0%
Treat like any other illness	4.8%	Up to head office	1.0%

Question 9.

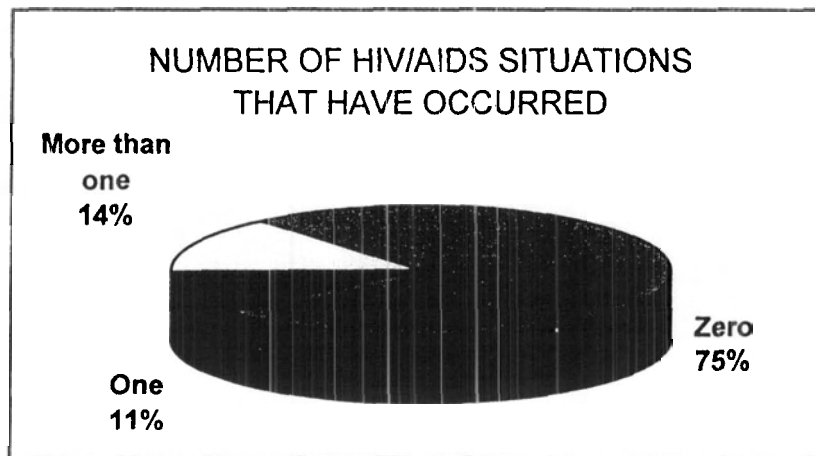
SUGGESTIONS THAT WILL HELP FURTHER OR INTRODUCE AN EDUCATION PROGRAM OR POLICY ON HIV/AIDS

Respondents were asked to comment and make suggestions as to what kind of support would be helpful in developing or furthering the implementation of an "AIDS in the workplace" policy or education program for your workplace. The top three most frequently quoted responses were; 'None' (23%), 'Model Policy' (21%) and 'Consultation from other workplaces' (14%). Aside from the 'None' responses, there seems to be an indication that most companies demand "model" policies or examples of successes to use as a benchmark.

TYPE OF SUPPORT FOR DEVELOPING OR FURTHERING AN AIDS POLICY OR EDUCATION PROGRAM	
Question #9	
Most Frequent Responses	% of Respondents
None	22.6%
Model Policy	20.7%
Consultation from other workplaces	13.5%
Brochures/ Handouts	11.7%
Information on laws and regulation	9.0%
Video/Training Aids	8.6%
Seminar/Workshop	8.3%
Have a business leader talk to CEO	7.9%
Information on work accommodations	7.9%

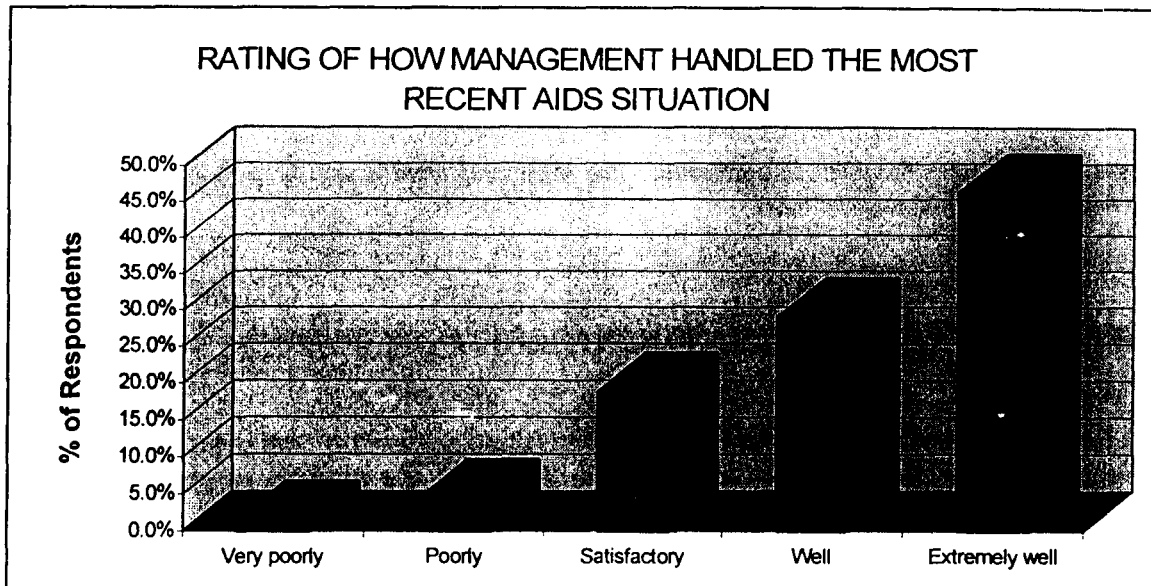
Question 13.
THE FREQUENCY OF WORK RELATED HIV/AIDS SITUATIONS

Some respondents were guarded about reporting the actual number of HIV/AIDS situations. As a result, these measures were recoded as categorical measures; 'Zero', 'One' and 'More than one' situation having occurred. One out of every four companies have encountered at least one HIV/AIDS situation affecting the workplace.



Question 14.
ABILITY OF MANAGEMENT TO HANDLE WORK RELATED HIV/AIDS SITUATIONS

There were too few occurrences to do any form of accurate testing for statistical significance. Of the 69 respondents that were able to comment on this question, 75% have handled HIV/AIDS situations well to extremely well in the past. In contrast, 6% of the companies had felt that management handled HIV/AIDS situations poorly to very poorly.



EVALUATING CROSS-TABULATION RESULTS

Cross-tabulations were used to profile the businesses and also to determine if a causal relationship can be derived. For example, this type of analysis is useful to determine if the size of the organization influences the likelihood that a written policy on HIV/AIDS will be in place.

These cross-tabulation results should be tested whenever possible for statistical validity. A Chi-square test was used to test for the existence of statistically supported relationships pertaining to each cross-tabulation. When testing for statistical validity of cross-tabulations results, the Chi-square measure is only accurate when there are at least 5 responses per cell or category. Consequently, this report will omit Chi-square testing whenever any of the cells have less than 5 responses. However, all attempts will be made to reorganize or modify the information such that appropriate statistical tests can be conducted.

Whenever a Chi-square statistics is computed, this report will refer to 99.0% as the critical percentage used to assess statistical significance.

THE EFFECT OF PRIVATE, PUBLIC AND NON-PROFIT ORGANIZATIONS

Only 10 non-profit organizations participated in this study. Unfortunately, this is too small a sample to derive representative information that is statistically verifiable. As a result, non-profit organizations were removed during the Chi-square tests for statistical significance.

The Likelihood Of A Written Policy

CAUTION: Of the respondents who said that their companies do have a written policy concerning HIV/AIDS, 65.3% were publicly-owned companies, 29.3% were privately-owned and 5.3% were non-profit organizations.

These results are useful for portraying the breakdown of written policies according to the different types of companies. However, this information is also vulnerable to sampling biases. To explain; for instance privately-owned companies might be more reluctant to divulge company information or participate in the survey. The results will undoubtedly be skewed to reflect the higher participation rate from public companies. Please use caution when interpreting this form of reporting. Consequently, this study will only report percentages within the sub-categories or identified groups that make intuitive sense.

Although they cannot be properly tested for statistical validity, non-profit organizations recorded the highest percentage having written policies concerning HIV/AIDS at 40.0%. Results also indicate that publicly-owned companies are more likely than privately-owned companies to have a written policy concerning HIV/AIDS in the workplace. One-third or 33.3% of the public companies have a written policy in place. In contrast, private companies which have a written policy on HIV/AIDS comprise 12.7%.

Type of Organization	% of Respondents with POLICY
Private	12.7%
Public	33.3%
Non-Profit	40.0%

A modified Chi-square statistic was conducted to test for statistical validity of a relationship. Namely, to test if public companies are more likely than private organizations to have a written policy concerning HIV/AIDS. Non-profit organizations were not included when testing for significance. A Chi-square statistic of 20.97 was determined. Using a critical value of 9.21 at 2 degrees of freedom and .990 critical percentage, this result indicates that there is a statistically significant discrepancy between privately-owned and publicly-owned companies.

The Likelihood Of A Written Policy Or Any Written Statement On HIV/AIDS

Tabulation was then conducted in order to determine the proportion of respondents having either a written policy or a written statement concerning HIV/AIDS in the workplace. This specific tabulation procedure is useful in assessing the overall penetration of HIV/AIDS related coverage for each business type; namely private, public or non-profit organizations.

Type of Organization	% of Respondents with POLICY or STATEMENT
Private	15.1%
Public	45.5%

The findings also reflect a higher penetration percentage of written policies or statements in publicly-owned companies in contrast to private organizations. Overall, there is an indication that the greatest area of need for introducing HIV/AIDS work policies concern the private sector.

A Chi-square calculation of 12.84 is evidence of a statistically supported relationship.

The Likelihood Of Employee Assistance Programs

In this study, employee assistance programs were recognized as encompassing a range from short-term disability coverage for accident and sickness to programs for psychological counselling.

Respondents indicated that public companies had the greatest percentage offering employee assistance concerning HIV/AIDS at 95.1%. In general, there were high percentages recorded of companies with employee assistance programs covering HIV/AIDS related issues regardless of the type of organization.

Type of Organization	% of Respondents with E.A.P.
Private	89.0%
Public	95.1%
Non-Profit	77.8%

Although cross-tabulation analysis did not identify differences due to the type of company, it did reveal that a greater percentage of the companies without any employee assistance program were privately-owned. Seventy-eight respondents or 25.2% stated having no employee assistance program at all. Of those respondents with no E.A.P., 76.9% were from private organizations.

The Likelihood Of An Education Program

Public companies were discovered to be most likely to have offered such a program at 17.7%. The other groups; namely private companies at 11.0% and non-profit organizations at 11.1% were less likely to have offered such an education program.

Type of Organization	% of Respondents that offered an EDUCATION PROGRAM in past 12 months
Private	12.7%
Public	33.3%
Non-Profit	40.0%

A Chi-square statistic of 2.88 was computed indicating that there are no statistically significant differences between public and private companies concerning HIV/AIDS related education programs.

DIFFERENCES BETWEEN UNION AND NON-UNION ORGANIZATIONS

The Likelihood Of A Written Policy

Analysis identifies 75 respondents who had stated that their companies have a written policy in place that pertains to HIV/AIDS in the workplace. Companies with unions in fact were more likely to have written policies in place than non-unionized companies. A total of 28.6% of unionized companies had written policies pertaining to HIV/AIDS. This is 13.4% greater than the percentage of non-unionized companies that had HIV/AIDS related written policies.

Unionized Organization	% of Respondents with POLICY
Yes	28.6%
No	15.2%

At 1 degree of freedom and using .990 critical percentage, the computed chi-square statistic of 8.406 exceeded the critical value of 6.63. Hence, there is statistical evidence to support this relationship.

The Likelihood Of A Written Policy Or Any Statement

Tabulation was performed to determine the breakdown of respondents who had either a written policy or a written statement concerning HIV/AIDS in the workplace. Unionized companies were 18.6% more likely than non-unionized companies to have some form of HIV/AIDS coverage as either a written policy or statement.

Unionized Organization	% of Respondents with POLICY or STATEMENT
Yes	37.1%
No	18.5%

A Chi-square statistic of 13.54 was computed. Thus, this statistical evidence contains a significant degree of validity to the claim that unionized companies are more likely to have HIV/AIDS related coverage in the workplace.

The Likelihood Of Employee Assistance Programs

Once again, employee assistance programs were interpreted as representing a broad range of coverage from short-term disability to psychological counselling. Unionized companies had the greatest percentage offering employee assistance coverage for HIV/AIDS at 94.5%. In comparison, 87.2% of the non-unionized companies had coverage on HIV/AIDS in their employee assistance programs.

Unionized Organization	% of Respondents with E.A.P.
Yes	78.3%
No	56.0%

As previously reported, the overall penetration level of employee assistance programs on HIV/AIDS is very high at 91.8% which was based on 231 respondents. Consequently, a computed Chi-square statistic of 3.78 reinforces the fact that employee assistance programs covering HIV/AIDS are independent of whether companies are unionized or not.

The Likelihood Of An Education Program

The likelihood that unionized companies would have offered an HIV/AIDS education program in the past 12 months was 6.7% greater than for non-unionized companies. However, a computed Chi-square statistic of 3.07 suggests that there is no statistically significant evidence to support this claim of dependence.

Unionized Organization	% of Respondents that offered an EDUCATION PROGRAM in the past 12 months
Yes	17.0%
No	10.3%

THE SIZE OF THE COMPANY

When respondents were questioned about the size of their company. The reported measures that were used in this analysis are reflective of the whole company. Therefore, if it was a national company, respondents reported the size of the whole company rather than the British Columbia region or any other sectioned regional measures on company sizes.

The Likelihood Of A Written Policy

There is strong evidence to suggest that the size of the company will determine the likelihood that a written policy on HIV/AIDS will be in place. Upon analysis of the following results, you will notice that the percentage of respondents who have the policy increases from 4.8% for companies with under 25 employees to 36.1% for companies with over 500 employees.

Number of Employees	% of Respondents with POLICY
<= 25	4.8%
26 - 50	11.5%
51 - 500	15.4%
> 500	36.1%

A Chi-square statistic computed to be 23.69 clearly shows that there is a statistically significant relationship.

The Likelihood Of A Written Policy Or Any Statement

Companies with over 500 employees had the highest percentage at 43% offering at least a written policy or statement concerning HIV/AIDS.

Number of Employees	% of Respondents with POLICY or STATEMENT
<= 25	4.8%
26 - 50	12.0%
51 - 500	22.8%
> 500	43.0%

A Chi-square statistic of 13.54 was computed. Thus, this statistical evidence contains a significant degree of validity to the claim that larger companies are more likely to have HIV/AIDS related coverage in the workplace.

The Likelihood Of Employee Assistance Programs

Companies with over 500 employees had the highest recorded percentage having HIV/AIDS related employee assistance programs in place.

Number of Employees	% of Respondents with E.A.P.
<= 25	47.4%
26 - 50	57.1%
51 - 500	57.4%
> 500	86.6%

A Chi-square test was not reported because it could not be accurately measured. Due to data limitations and the lack of responses for specific categories, a chi-square was not computed.

The Likelihood Of An Education Program

The companies grouped in the 'over 500' category were at least 10.3% greater than the other groups/categories. The results clearly illustrate that the larger companies are more likely to have offered an HIV/AIDS education program in the past year.

Number of Employees	% of Respondents that offered an EDUCATION PROGRAM in the past 12 months
<= 25	81.8%
26 - 50	85.7%
51 - 500	87.1%
> 500	97.4%

A Chi-square test was not performed due to 2 cells having less than 5 frequencies.

PREVIOUSLY EXPERIENCED HIV/AIDS SITUATIONS AND THEIR EFFECT

The Likelihood Of A Written Policy

A pool of 300 respondents were determined to be applicable for this analysis. The results also reveal a higher likelihood of having a policy in place after a company experiences more HIV/AIDS situations.

The percentage of companies that have the policy increases from 4.8% among companies that have never had an HIV/AIDS related occurrence to 44.2% where they have experienced multiple HIV/AIDS related situations.

Number of HIV/AIDS Situations in the Workplace	% of Respondents with POLICY
0 or none	13.3%
1	18.8%
More than 1	44.2%

A Chi-square statistic was computed at 22.96. This result is statistically significant. As a company experiences more HIV/AIDS related situations, the likelihood that they will introduce new policies as a response will increase as well.

The Likelihood Of A Written Policy Or Any Statement

Similar to the previous findings with written policies, companies were more likely to have at least a written statement if not a written policy in place when they had experienced an HIV/AIDS related situation in their own workplace.

Number of HIV/AIDS Situations in the Workplace	% of Respondents with POLICY or STATEMENT
0 or none	19.8%
1	18.8%
More than 1	56.1%

A Chi-square statistic was not conducted to test for statistical validity of the dependence effect.

The Likelihood Of Employee Assistance Programs

When respondents were asked to comment on their company's employee assistance programs, the following results were tabulated. Companies with more than one HIV/AIDS related experiences were the most likely to have an employee assistance program covering HIV/AIDS at 97.2%. Minimal differentiation was discovered between companies who have never experienced, experienced once and experienced multiple HIV/AIDS situations in their workplace.

More notably, 83.8% of the 74 companies that do not have an employee assistance program, had never encountered an HIV/AIDS related issue in their workplace. Perhaps it could be hypothesized that companies will not have an employee assistance program if they rarely encounter these situations in their own environment. Consequently, there is no pressure or need to introduce an employee assistance program.

Number of HIV/AIDS Situations in the Workplace	% of Respondents with E.A.P.
0 or none	89.7%
1	92.3%
More than 1	97.2%

A Chi-square statistic could not be computed.

The Likelihood Of An Education Program

The results below will illustrate how the likelihood of offering an education program on HIV/AIDS will depend upon the varying amount of exposure or experience to HIV/AIDS related situations. With companies that have never been exposed to an HIV/AIDS related situation, 9.3% of them were likely to have offered a program in the past 12 months. As companies experience more than one HIV/AIDS occurrence in their workplace, the likelihood that they will have education programs will increase to 19.0%.

Number of HIV/AIDS Situations in the Workplace	% of Respondents that offered an EDUCATION PROGRAM in the past 12 months
0 or none	9.3%
1	15.6%
More than 1	19.1%

A Chi-square statistic of 4.01 was computed. Consequently, there is no statistical support for this claim while using the specified critical values.

HOW TO IMPLEMENT RECOMMENDATIONS

Question #9 delved into determining the most frequent suggestions by respondents that would help develop or further the implementation of an 'AIDS IN THE WORKPLACE' policy or education program. The opinions given by respondents were many and varied. As a result, it was deemed necessary to cross-tabulate these results with 'identifying' variables such as privatization, unionization and relative size of companies. In essence, the purpose of cross-tabulation would be to identify a target group where a specific strategy can be exercised with greater likelihood of success.

Since there were many variations in the types of responses, the analysis could not proceed until the responses were grouped according to functional similarities. This was useful for simplifying the interpretation of this analysis.

Functional differences were identified among the responses. Essentially, four groups were identified and any variables that did not belong to these four dimensions were not included in the analysis. The recoding classification is shown below. The rationale is described on the following page.

Question #9 Recoded as '1' Focus on Management	Question #9 Recoded as '2' Focus on Employees
Model Policy Consultation from other workplaces Have a business leader talk to owner/CEO Model Education Program Expert/organization for informal support	Having an AIDS Conference Video/Training Aids Speaker Seminar/Workshop St. Johns Ambulance or WCB workshop Government involvement
Question #9 Recoded as '3' Information if Requested	Question #9 Recoded as '4' Do Nothing
Information on laws and regulation Information on work accommodations Information on health insurance Posters Brochures/Handouts General information Current information Promote general awareness in society	None

Rationale used to re-classify data.

1. These variables pertain to the fact that management must be convinced that HIV/AIDS policies or education programs are required in the work environment. These variables view management as the essential decision maker to introducing new policies or programs.
2. These variables concern the fact that efforts should be concentrated on the employees. Thus, the onus of successfully introducing a program or policy lies with convincing the employees.
3. These variables concern the fact that information in some 'passive' form is most recommended. Information or support should be available upon request. Respondents that give these type of suggestions probably feel that the responsibility to introduce 'AIDS in the Workplace' policies should be their own initiative.
4. This variable is essentially self-explanatory. These respondents are usually either satisfied with their existing policies or do not feel there is much merit to having an outside organization provide any assistance.

Targeting Private, Public And Non-Profit Organizations

Private and public organizations were found to be very similar in their suggestions for the furthering or introducing an education program or policy. Both private and public organizations felt that the main focus of support should be directed at management and at providing information for companies when requested.

Although the sample size was too small to ensure the statistical validity of the information, non-profit organizations felt that support should be focused mainly on convincing the employees that policies or education programs should be introduced or furthered.

Organization Type	Focus on MGMT	Focus on Employees	Information Upon Request	Do Nothing
Private	47.4%	28.1%	44.4%	24.4%
Public	46.0%	31.5%	55.6%	20.2%
Non-Profit	14.3%	42.9%	14.3%	28.6%

APPENDIX

Targeting Unionized And Non-Unionized Organizations

Both unionized companies and non-unionized companies believe the main focus should be directed at management.

The results also suggest that the likelihood that unionized companies will request information, pertaining to 'HIV/AIDS in the workplace', is 17.0% greater than for non-unionized companies. Unionized companies feel 8.8% more strongly that support should be focused on the employees. Additionally, 17.7% of unionized companies felt that no support was necessary while non-unionized companies felt stronger that nothing was needed at 28.6%.

These findings suggest that unionized organizations have a relatively more 'open' or 'active' environment toward HIV/AIDS concerns in the workplace.

Organization Type	Focus on MGMT	Focus on Employees	Information Upon Request	Do Nothing
Union	45.6%	34.0%	56.5%	17.7%
NON-Union	46.2%	25.2%	39.5%	28.6%

Targeting Different Organizations Based On Size

Medium-sized companies (51 to 500 employees) at 51.3% represented the greatest percentage recommending a management focus. These medium-sized organizations were also less likely to believe that no support is necessary. Only 17.9% felt that support was none of anyone's concern.

Small companies (under 25 employees) and large companies (over 500 employees) emphasized similar recommendations on how to introduce or further an HIV/AIDS program or policy. Both small companies at 65.7% and large companies at 51.3% strongly feel that support should be directed toward providing information that is available if requested.

Size of Organization	Focus on MGMT	Focus on Employees	Information Upon Request	Do Nothing
<= 50	37.1%	28.6%	65.7%	25.7%
51 - 500	51.3%	29.1%	41.9%	17.9%
> 500	43.4%	31.9%	51.3%	25.7%

Appendix I - General Data Tables

ORGANIZATIONS WITH A WRITTEN POLICY ON HIV/AIDS IN THE WORKPLACE		
<i>Question #1</i>	<i># of Respondents</i>	<i>% of Respondents</i>
Yes	75	22.7%
No	255	77.3%
Total	330	100.0%
Don't know	1	0.3%

OTHER POLICY WITH AN AIDS STATEMENT		
<i>Question #2</i>	<i># of Respondents</i>	<i>% of Respondents</i>
Yes	18	7.2%
No	231	92.8%
Total	249	100.0%
Don't know	7	2.7%

REASONS FOR NOT HAVING A POLICY ON AIDS IN THE WORKPLACE			
<i>Question #3</i>	<i># of Responses</i>	<i>% of Responses</i>	<i>% of Respondents</i>
Concerns about executive support	1	0.4%	0.4%
Employer resistance	2	0.8%	0.9%
Union resistance	1	0.4%	0.4%
Employees resistance	2	0.8%	0.9%
Fear of adverse client reaction	1	0.4%	0.4%
AIDS is not seen as a priority	31	11.9%	13.7%
Not likely to have employees with AIDS	4	1.5%	1.8%
Don't know how to implement policy	5	1.9%	2.2%
Not aware of policies on AIDS in the workplace	3	1.1%	1.3%
Not an issue/No reason to	108	41.4%	47.8%
Company too small/Not many policies	29	11.1%	12.8%
Treat it like any other illness	39	14.9%	17.3%
Currently working on a policy/program	9	3.4%	4.0%
Not requested	6	2.3%	2.7%
Under review/Updating policies	4	1.5%	1.8%
Up to head office	2	0.8%	0.9%
Other	14	5.4%	6.2%
Total	261	100.0%	115.5%
Don't know	12	4.4%	

Appendix I - General Data Tables (continued)

FORM OF INTRODUCTION FOR THE POLICY STATEMENT ON AIDS			
<i>Question #4</i>	<i># of Responses</i>	<i>% of Responses</i>	<i>% of Respondents</i>
Executive/Management introduction	47	25.8%	52.2%
Collective bargaining	11	6.0%	12.2%
Memo/E-mail	19	10.4%	21.1%
Staff meeting	26	14.3%	28.9%
Workshop	16	8.8%	17.8%
Employment Orientation Session	24	13.2%	26.7%
It was never formally presented	5	2.7%	5.6%
Policy/Training manual	14	7.7%	15.6%
Employee handbook	5	2.7%	5.6%
Other	15	8.2%	16.7%
Total	182	100.0%	202.2%
Don't know	3	1.6%	

EMPLOYEE ASSISTANCE PROGRAMS COVERING HIV/AIDS RELATED ISSUES		
<i>Question #5</i>	<i># of Respondents</i>	<i>% of Respondents</i>
Yes	212	68.6%
No	19	6.1%
No program exists	78	25.2%
Total	309	100.0%
Don't know	22	6.6%

WORKPLACES THAT OFFERED AN ORGANIZED EDUCATION PROGRAM ON HIV/AIDS IN THE PAST 12 MONTHS		
<i>Question #6</i>	<i># of Respondents</i>	<i>% of Respondents</i>
Yes	46	14.0%
No	282	86.0%
Total	328	100.0%
Don't know	3	0.9%

Appendix I - General Data Tables (continued)

WORKPLACES THAT HAVE OFFERED AN ORGANIZED EDUCATION PROGRAM ON HIV/AIDS		
<i>Question #7</i>	<i># of Respondents</i>	<i>% of Respondents</i>
Yes	46	16.9%
No	226	83.1%
Total	272	100.0%
Don't know	10	3.5%

REASONS FOR NOT HAVING AN EDUCATIONAL PROGRAM ON HIV/AIDS			
<i>Question #8</i>	<i># of Responses</i>	<i>% of Responses</i>	<i>% of Respondents</i>
Concerns about executive support	2	0.8%	1.0%
Employees would resist AIDS education	5	2.0%	2.4%
Fear of adverse client reaction	2	0.8%	1.0%
AIDS is not seen as a priority	43	16.9%	20.7%
Employees know about AIDS from other sources	29	11.4%	13.9%
The cost of AIDS education and materials	5	2.0%	2.4%
Can not afford the employee time away	1	0.4%	0.5%
Not the employers' responsibility	8	3.1%	3.8%
Don't know how to begin	8	3.1%	3.8%
Not an issue/No reason to	101	39.8%	48.6%
Company too small/Not many policies	8	3.1%	3.8%
Treat it like any other illness	10	3.9%	4.8%
Not aware of any educational programs	3	1.2%	1.4%
Can't offer a program for just one particular illness	2	0.8%	1.0%
Currently working on a policy/program	1	0.4%	0.5%
Not requested	14	5.5%	6.7%
Up to head office	2	0.8%	1.0%
Other	10	3.9%	4.8%
Total	254	100.0%	122.1%
Don't know	18	6.6%	

Appendix I - General Data Tables (continued)

TYPE OF SUPPORT FOR DEVELOPING/FURTHER IMPLEMENTING AN AIDS POLICY OR EDUCATIONAL PROGRAM			
<i>Question #9</i>	<i># of Responses</i>	<i>% of Responses</i>	<i>% of Respondents</i>
Model policy	55	13.0%	20.7%
Information on laws and regulation	24	5.7%	9.0%
Information on work accommodations	21	5.0%	7.9%
Information on health insurance	12	2.8%	4.5%
Consultation from other workplaces	36	8.5%	13.5%
Have a business leader talk to owner/CEO	21	5.0%	7.9%
Having an AIDS conference	11	2.6%	4.1%
Video/Training aids	23	5.5%	8.6%
Model education program	4	0.9%	1.5%
Posters	2	0.5%	0.8%
Brochure/Handouts	31	7.3%	11.7%
General information	18	4.3%	6.8%
Current information	14	3.3%	5.3%
Speaker	18	4.3%	6.8%
Seminar/Workshop	22	5.2%	8.3%
Promote general awareness in society	8	1.9%	3.0%
St. John's Ambulance or WCB workshop	2	0.5%	0.8%
Government involvement	4	0.9%	1.5%
Expert organization for informal support	6	1.4%	2.3%
Financial support	3	0.7%	1.1%
None	60	14.2%	22.6%
Other	27	6.4%	10.2%
Total	422	100.0%	158.6%
Don't know	65	13.3%	

TYPE OF ORGANIZATION		
<i>Question #10</i>	<i># of Respondents</i>	<i>% of Respondents</i>
Private	173	52.3%
Public	148	44.7%
Not for profit	10	3.0%
Total	331	100.0%

Appendix I - General Data Tables (continued)

ORGANIZATIONS THAT ARE UNIONIZED		
<i>Question #11</i>	<i># of Respondents</i>	<i>% of Respondents</i>
Yes	185	55.9%
No	146	44.1%
Total	331	100.0%

NUMBER OF EMPLOYEES IN THE ORGANIZATION IN TOTAL		
<i>Question #12</i>	<i># of Respondents</i>	<i>% of Respondents</i>
<= 25	21	6.4%
26 - 50	26	7.9%
51 - 500	150	45.5%
> 500	133	40.3%
Total	330	100.0%
Don't know	1	0.3%

NUMBER OF HIV/AIDS SITUATIONS THAT HAVE OCCURRED		
<i>Question #13</i>	<i># of Respondents</i>	<i>% of Respondents</i>
0	226	75.1%
1	32	10.6%
More than 1	43	14.3%
Total	301	100.0%
Don't know /Ref	30	9.1%

RATING OF HOW MANAGEMENT HANDLED THE MOST RECENT HIV/AIDS SITUATIONS		
<i>Question #14</i>	<i># of Respondents</i>	<i>% of Respondents</i>
Very poorly	1	1.4%
Poorly	3	4.3%
Satisfactory	13	18.8%
Well	20	29.0%
Extremely well	32	46.4%
Total	69	100.0%
Don't know	6	8.0%

Appendix II - Data Tables Crosstabulated by Privatization of Companies

TYPE OF ORGANIZATION BY ORGANIZATIONS WITH A WRITTEN POLICY ON HIV/AIDS			
TYPE OF ORGANIZATION	WRITTEN POLICY		Row Total
	Yes	No	
Private	22 12.7%	151 87.3%	173 100.0%
Public	49 33.3%	98 66.7%	147 100.0%
Not for profit	4 40.0%	6 60.0%	10 100.0%
Column Total	75 22.7%	255 77.3%	330 100.0%

TYPE OF ORGANIZATION BY ORGANIZATION WITH EITHER A WRITTEN POLICY OR STATEMENT				
TYPE OF ORGANIZATION	YES	NO		ROW TOTAL
		WRITTEN STATEMENT		
		YES	NO	
Private	22 12.8%	4 2.3%	146 84.9%	172 100.0%
Public	49 34.5%	14 9.9%	79 55.6%	142 100.0%
Column Total	71 22.6%	18 5.7%	225 71.7%	314 100.0%

Appendix II - Data Tables Crosstabulated by Privatization of Companies (continued)

TYPE OF ORGANIZATION BY E.A.P.'s COVERING HIV/AIDS IN THE WORKPLACE				
TYPE OF ORGANIZATION	E.A.P. COVERING AIDS IN THE WORKPLACE			Row Total
	Yes	No	No Program Exists	
Private	89 55.6%	11 5.9%	60 37.5%	160 100.0%
Public	116 83.5%	6 4.3%	17 12.2%	139 100.0%
Not for profit	7 70.0%	2 20.0%	1 10.0%	10 100.0%
Column Total	212 68.6%	19 6.1%	78 25.2%	309 100.0%

TYPE OF ORGANIZATION BY ORGANIZATIONS OFFERING AN EDUCATION PROGRAM IN PAST 12 MONTHS			
TYPE OF ORGANIZATION	ORGANIZED EDUCATION PROGRAM IN PAST 12 MONTHS		
	Yes	No	Row Total
Private	19 11.0%	153 89.0%	172 100.0%
Public	26 17.7%	121 82.3%	147 100.0%
Not for profit	1 11.1%	8 88.9%	9 100.0%
Column Total	46 14.0%	282 86.0%	328 100.0%

Appendix III - Data Tables Crosstabulated by Unions

UNIONIZED ORGANIZATION BY ORGANIZATIONS WITH A WRITTEN POLICY ON HIV/AIDS			
UNIONIZED ORGANIZATION	WRITTEN POLICY		Row Total
	Yes	No	
Yes	53 28.6%	132 71.4%	185 100.0%
No	22 15.2%	123 84.8%	145 100.0%
Column Total	75 22.7%	255 77.3%	330 100.0%

UNIONIZED ORGANIZATION BY ORGANIZATION WITH EITHER A WRITTEN POLICY OR STATEMENT				
UNIONIZED ORGANIZATION	YES	WRITTEN POLICY		ROW TOTAL
		NO		
	WRITTEN STATEMENT			
	YES	NO	NO	
Yes	53 29.8%	13 7.3%	112 62.9%	178 100.0%
No	22 15.1%	5 3.4%	119 81.5%	146 100.0%
Column Total	75 23.1%	18 5.6%	231 71.3%	324 100.0%

Appendix III - Data Tables Crosstabulated by Unions (continued)

UNIONIZED ORGANIZATION BY E.A.P.s COVERING HIV/AIDS IN THE WORKPLACE				
UNIONIZED ORGANIZATION	E.A.P.s COVERING AIDS IN THE WORKPLACE			Row Total
	Yes	No	No Program Exists	
Yes	137 78.3%	8 4.6%	30 17.1%	175 100.0%
No	75 56.0%	11 8.2%	48 35.8%	134 100.0%
Column Total	212 68.6%	19 6.1%	78 25.2%	309 100.0%

UNIONIZED ORGANIZATION BY ORGANIZATIONS OFFERING AN EDUCATION PROGRAM IN PAST 12 MONTHS			
UNIONIZED ORGANIZATION	ORGANIZED EDUCATION PROGRAM IN PAST 12 MONTHS		Row Total
	Yes	No	
Yes	31 17.0%	151 83.0%	182 100.0%
No	15 10.3%	131 89.7%	146 100.0%
Column Total	46 14.0%	282 86.0%	328 100.0%

Appendix IV - Data Tables Crosstabulated by The Relative Size of the Organization

NUMBER OF EMPLOYEES BY ORGANIZATIONS WITH A WRITTEN POLICY ON HIV/AIDS			
NUMBER OF EMPLOYEES	WRITTEN POLICY		
	Yes	No	Row Total
<= 25	1 4.8%	20 95.2%	21 100.0%
26 - 50	3 11.5%	23 88.5%	26 100.0%
51 - 500	23 15.4%	126 84.6%	149 100.0%
> 500	48 36.1%	85 63.9%	133 100.0%
Column Total	75 22.8%	254 77.2%	329 100.0%

NUMBER OF EMPLOYEES BY ORGANIZATION WITH EITHER A WRITTEN POLICY OR STATEMENT				
NUMBER OF EMPLOYEES	YES	WRITTEN POLICY		ROW TOTAL
		NO		
		WRITTEN STATEMENT		
		YES	NO	
<=25	1 4.8%	0 0.0%	20 95.2%	21 100.0%
26 - 50	3 12.0%	0 0.0%	22 88.0%	25 100.0%
51 - 500	23 15.4%	11 7%	115 77%	149 100.0%
> 500	48 37.5%	7 5.5%	73 57.0%	128 100.0%
Column Total	75 23.2%	18 5.6%	230 71.2%	323 100.0%

Appendix IV - Data Tables Crosstabulated by The Relative Size of the Organization (continued)

NUMBER OF EMPLOYEES BY E.A.P.s COVERING HIV/AIDS IN THE WORKPLACE				
NUMBER OF EMPLOYEES	E.A.P.s COVERING AIDS IN THE WORKPLACE			Row Total
	Yes	No	No Program Exists	
<= 25	9 47.4%	2 10.5%	8 42.1%	19 100.0%
26 - 50	12 57.1%	2 9.5%	7 33.3%	21 100.0%
51 - 500	81 57.4%	12 8.5%	48 34.0%	141 100.0%
> 500	110 86.6%	3 2.4%	14 11%	127 100.0%
Column Total	212 68.8%	19 6.2%	77 25.0%	308 100.0%

NUMBER OF EMPLOYEES BY ORGANIZATIONS OFFERING AN EDUCATION PROGRAM IN PAST 12 MONTHS			
NUMBER OF EMPLOYEES	ORGANIZED EDUCATION PROGRAM IN PAST 12 MONTHS		Row Total
	Yes	No	
<= 25	2 9.5%	19 90.5%	21 100.0%
26 - 50	2 7.7%	24 92.3%	26 100.0%
51 - 500	13 8.7%	136 91.3%	149 100.0%
> 500	29 22.1%	102 77.9%	131 100.0%
Column Total	46 14.1%	281 85.9%	327 100.0%

Appendix V - Data Tables Crosstabulated by Previous Experiences with HIV/AIDS in the Workplace

NUMBER OF SITUATIONS BY ORGANIZATION'S WITH A WRITTEN POLICY ON HIV/AIDS			
NUMBER OF SITUATIONS	WRITTEN POLICY		
	Yes	No	Row Total
0	30 13.3%	195 86.7%	225 100.0%
1	6 18.8%	26 81.3%	32 100.0%
More than 1	19 44.2%	24 55.8%	43 100.0%
Column Total	55 18.3%	245 81.7%	300 100.0%

NUMBER OF SITUATIONS BY ORGANIZATION WITH EITHER A WRITTEN POLICY OR STATEMENT				
NUMBER OF SITUATIONS	YES	WRITTEN POLICY		ROW TOTAL
		NO		
	WRITTEN STATEMENT			
	YES	NO		
0	30 13.5%	14 6.3%	179 80.3%	223 100.0%
1	6 18.8%	0 0.0%	26 81.3%	32 100.0%
More than 1	19 46.3%	4 9.8%	18 43.9%	41 100.0%
Column Total	55 18.6%	18 6.1%	223 75.3%	296 100.0%

Appendix V - Data Tables Crosstabulated by Previous Experiences with HIV/AIDS in the Workplace (continued)

NUMBER OF SITUATIONS BY E.A.P.'s COVERING HIV/AIDS IN THE WORKPLACE				
NUMBER OF SITUATIONS	E.A.P.'s COVERING AIDS IN THE WORKPLACE			Row Total
	Yes	No	No Program Exists	
0	131 63.0%	15 7.2%	62 29.8%	208 100.0%
1	24 77.4%	2 6.5%	5 16.1%	31 100.0%
More than 1	35 81.4%	1 2.3%	7 16.3%	43 100.0%
Column Total	190 67.4%	18 6.4%	74 26.2%	282 100.0%

NUMBER OF SITUATIONS BY ORGANIZATIONS OFFERING AN EDUCATION PROGRAM IN PAST 12 MONTHS			
NUMBER OF SITUATIONS	ORGANIZED EDUCATION PROGRAM IN PAST 12 MONTHS		
	Yes	No	Row Total
0	21 9.3%	205 90.7%	226 100.0%
1	5 15.6%	27 84.4%	32 100.0%
More than 1	8 19.0%	34 81.0%	42 100.0%
Column Total	34 11.3%	266 88.7%	300 100.0%

Appendix VI - Open-ended Responses

Question #2 - Other Policies that Include an HIV/AIDS Statement

Long term health policy
Life threatening illness guidelines
Infection control policies
Disability illness
General policy on communicable diseases

Harassment policy
Harassment Policy under Human Rights
Non-harassment and same sex benefits
Non-discriminatory work practices

Employee handbook policies
Police training/Education package
City of Vancouver guidelines
Collective agreement

Insurance policy (2 mentions)
Health and safety policy
Benefit statement and income protection

Don't know

BC Business & Labour Coalition on AIDS Market Survey

Hello, my name is _____ and I'm calling from Market Reach Research on behalf of Aids Vancouver and the BC Business and Labour coalition on AIDS. We are conducting a brief survey on the concerns and considerations of business and labour in terms of how HIV/AIDS impacts our lives and our work environment.

Your replies will remain anonymous and your participation is appreciated.

Is this an appropriate time to call or should I make an appointment to call at another time?

1. Does your organization have a written policy on HIV/AIDS in the workplace?

Yes (1) Skip to #4 No (2) Go to #2 Don't Know (99) *Ask if there is anyone else that can answer this question.*

2. Does your organization have any policy that includes an HIV/AIDS statement?

Yes (1) If yes ask... No (2) Skip to #3 Don't Know (99) Skip to #3

What policy includes HIV/AIDS? _____ Skip to #4

3. What in your opinion are the reasons there is no policy on AIDS in the workplace?

[Do not prompt]

- (1) Concerns about executive support
- (2) Employer resistance
- (3) Union resistance
- (4) Employees resistance
- (5) Fear of adverse client reaction
- (6) Concern about public image
- (7) AIDS is not seen as a priority
- (8) Not likely to have employees with AIDS
- (9) Do not know how to begin implementing a policy
- (10) Not aware that policies existed concerning AIDS in the workplace
- (11) Too expensive to change existing policy
- (12) Other _____
- (99) Don't know Skip to #5

4. How was your policy statement on AIDS introduced into your workplace?

[Read]

- (1) A. Executive/Management Introduction
- (2) B. Collective bargaining
- (3) C. Memo/E-mail
- (4) D. Staff meeting
- (5) E. Workshop
- (6) F. Employment Orientation Session
- (7) G. It was never formally presented
- (8) H. Other _____
- (99) I. Don't know

5. If your company has an employee assistance program (psychological counselling or short term disability) does it provide assistance on HIV/AIDS related issues?

Yes (1) No (2) No program exists (3) Don't know (99)

6. In the past 12 months, has any organized education program on HIV and AIDS been offered to employees and/or management.

Yes (1) Skip to #9 No (2) Go to #7 Don't Know (99) Skip to #9

7. Has it ever been offered?

Yes (1) Skip to #9 No (2) Go to #8 Don't Know (99) Skip to #9

8. Why in your opinion has an educational program on HIV/AIDS not been introduced?
[Do not prompt]

- (1) Concerns about executive support
- (2) Employees would resist AIDS education
- (3) Fear of adverse client reaction
- (4) Concern about public image
- (5) AIDS is not seen as a priority
- (6) Employees already know about AIDS from other sources
- (7) The cost of AIDS education and materials
- (8) Can not afford the employee time away for AIDS education
- (9) AIDS education is not the employers' responsibility
- (10) Don't know how to begin implementing a policy
- (11) Other _____
- (99) Don't know

9. What kind of support do you think would be helpful in developing or furthering the implementation of an 'AIDS in the workplace' policy or education program for your workplace?

[Do not prompt]

- (1) "Model" policy covering AIDS in the workplace
- (2) Information on laws and regulations related to AIDS
- (3) Information on work accommodations related to AIDS
- (4) Information on health insurance and benefits packages relating to AIDS
- (5) Consultation from other workplaces
- (6) Having a business leader talk with your workplace's owner or CEO
- (7) Having an AIDS conference sponsored by your trade or business association
- (8) Video/training aids
- (9) None
- (10) Other _____
- (99) Don't know

10. Is your organization a private or public company?

Private (1) Public (2)

11. Is your business or organization unionized?

Yes (1) No (2) Both (3)

12. How many people are employed by your organization in total?

- (1) Under 25 employees
- (2) Between 26 - 50 employees
- (3) Between 51 - 500 employees
- (4) More than 500 employees

13. How many HIV/AIDS situations have occurred in your organization?

Number of situations _____. If one or more go to #14

14. In your opinion, how were the most recent HIV/AIDS situation handled by Management?

(1) Very poorly (2) (3) Satisfactory (4) (5) Extremely well (99) Don't Know

THANK YOU VERY MUCH FOR YOUR TIME.