

Star Apr 4

# Let go of AIDS program, committee tells U of T

By Peter Small  
TORONTO STAR

The University of Toronto should be stripped of responsibility for the most prestigious AIDS project in the country, says a powerful AIDS-user group overseeing the creation of the program.

U of T can't handle the project, designed to set up a registry of AIDS treatments used around the globe, the group says.

The advisory committee, made up mostly of AIDS treatment user groups, made the recommendation at a meeting with university officials last night.

And dozens of people staged a noisy protest outside the university's Medical Sciences building to demand that the university relinquish control of the Treatment System for AIDS and HIV victims.

Protesters chanted slogans and said people are dying while university officials drag their feet.

Health and Welfare Canada, which funds the project, does not have to accept the advisory com-

mittee's advice. But its recommendations do carry a lot of clout.

In fact, advisory committee member Joan Anderson, head of the Canadian AIDS Society, said U of T has already accepted the committee's advice and is simply awaiting instructions from health and welfare.

The committee passed a non-confidence vote against U of T, said Dr. Philip Berger, of the Toronto HIV primary care physicians group, after the meeting.

The closed-doors meeting was with the university's newly created project management committee, set up last month after U of T removed professor Kathryn Taylor as head of the project.

Taylor, a prominent researcher, was cleared after accusations of financial wrongdoing.

The meeting was chaired by Dr. Richard Ten Cate, head of a new university committee set up to manage the AIDS project. He could not be reached for comment last night.

The \$6 million program, supposed to be the centrepiece of the

government's national AIDS strategy, was slated to be running by June.

But U of T's management committee members announced last night they could not get it going until December, Berger said.

"U of T asked for an additional \$1.8 million to complete the design phase," he said.

The university has received \$1 million from Ottawa for the project and has spent nearly all of it.

Last night, five advisory committee members asked U of T to return to Ottawa the \$990,000 already spent.

U of T was supposed to produce a comprehensive work plan for the AIDS registry last night, Berger said. Instead they produced a summary.

The plan lacked essential elements, Berger said.

It assigned no-one to take charge of various parts of the AIDS project; it identified no job descriptions; had no chart outlining the steps planned to complete the project; and it offered no budget details.

Globe Apr 5

## U of T could lose AIDS project

### Committee disappointed by university's performance

BY ROD MICKLEBURGH  
Health Policy Reporter

TORONTO — The University of Toronto is now in danger of losing a million-dollar, blue-ribbon AIDS information project awarded to the university by the federal government amid much fanfare last June.

The project, known as the Treatment Information System for AIDS and HIV and reputed to be the most advanced of its kind in the world, was designed as the centrepiece of the federal government's national AIDS strategy.

"We are waiting for Health and Welfare to make a decision," U of T spokesman Richard Ten Cate said yesterday, after a recommendation by the project's advisory committee that TISAH be taken away from the university. "We expect they will decide very shortly, within days."

The recommendation followed the university's admission during a two-hour, closed-door meeting Wednesday night that it will need an extra \$1.8-million and a further six-month extension.

"It's a terrible situation," advisory committee member George Smith said. "When you give someone a project to do, you expect

them to do it. I'm really quite angry at the University of Toronto for messing this thing up.

"Meanwhile, we have people dying of AIDS. It's as simple as that."

TISAH has been mired in controversy ever since allegations of financial irregularities surfaced earlier this year against project director Kathryn Taylor, an associate professor at U of T.

Although an internal audit cleared Ms. Taylor of all allegations, the university removed her from the project and substituted its own management team, a move that was criticized at the time by the advisory committee.

Dr. Ten Cate, vice-provost of health sciences, acknowledged the situation gives the university a black eye.

"Nobody is going to be very pleased by this," he said.

But Dr. Ten Cate defended the request for extra money and more time to complete the project.

"What has happened is that the enormity and complexity of this project was not fully recognized," he said. "We would be deluding ourselves, the AIDS community and the public, if we didn't make a realistic assessment of what it's really going to cost."

"We now have a very sound, very realistic assessment. I just wish there was an easy solution."

But the advisory committee, made up of representatives of community AIDS groups and high-powered organizations such as the Canadian Medical Association, rejected the university's revised blueprint.

The new plan would see the project completed by the end of 1991, rather than its original target date of June 30.

"The university was crushed but gracious about our judgment," said committee member Dr. Phil Berger. "We have no confidence in their ability to complete the project. We don't think the government has any choice but to remove it from the university."

Health and Welfare minister Perrin Beatty, who announced the project last June, is expected to make the final decision.

"It will probably be sometime within the next two weeks that exactly what to do with it will be decided," said department spokeswoman Monette Hache.

"We're anxious to get it to continue without delay, and we intend to make every effort to move it forward."

# NDP accused of inaction

OPINION — Page A15

Monday

September 30, 1991

By Dr. Philip Berger

**O**N SEPT. 21 about 100 HIV (human immunodeficiency virus) infected persons and their supporters demonstrated in downtown Toronto. Led by the advocacy group AIDS Action Now! the demonstrators were protesting one year of inaction on AIDS by Ontario's NDP government.

A review of the NDP's record speaks louder than the protests of the AIDS activists.

In October, 1990, the previous NDP health minister, Evelyn Gigantes, declared that she would ask her officials to implement province-wide anonymous HIV testing. The minister's announcement acknowledged what many doctors active in the fight against AIDS have believed for years: Many people at highest risk are the least likely to come forward for testing.

It is only common sense that some individuals with the most to lose by identification — such as married bisexual men or intravenous drug users — will not come forward unless anonymity is guaranteed.

But Gigantes then terminated a process set up by the Liberal government which would have established anonymous testing in five centres across Ontario by December, 1990. Instead, the new Minister of Health, Frances Lankin, in May, 1991 finally issued a consultation paper on implementing anonymous testing in up to nine centres.

It took a sit-in of Lankin's office by AIDS activists on Sept. 20 to elicit the minister's commitment to establish some anonymous testing sites by the end of 1991.

In the same consultation paper, Lankin proposed that people testing HIV positive would not have their identity reported to medical officers of health provided that appropriate counselling and partner notification had occurred.

It all sounds good until one reads the policy paper and the legislation which demands the reporting of names — the Health Protection and Promotion Act.

The act requires doctors to report the names of HIV-infected persons under Sections 25 and 26. Section 27 requires

## For AIDS activists, NDP no better than rest

*Bob Rae's  
cabinet  
has proved  
no more helpful  
than previous  
governments*



GEOFFREY MOSS

hospital administrators to report the identity of all in-patient and out-patient HIV-infected persons to public health authorities — and this occurs with regularity in certain Ontario hospitals. Section 28 requires laboratories to report the identity of persons testing HIV positive — and this occurs universally in the government-run laboratories which do all the HIV testing. Section 29 requires school principals to report HIV-infected students to public health doctors.

The minister's proposed policy (approved by cabinet) calls only for a regulation amendment exempting physician reporting under Section 26. Physicians still would be required to

report under Section 25. Hospitals, schools and the provincial laboratories still would be required to report under the relevant sections of the act.

Under the NDP government proposals, the status quo of mandatory reporting of names will be maintained.

In July, the director of the Ontario Drug Benefit Plan (ODBP) wrote to physicians treating HIV-infected persons. He stated that the Ontario Ministry of Health was sensitive to special patient groups such as persons living with AIDS. He wrote (underlined in his letter) that physicians prescribing certain drugs for HIV-infected persons covered under the ODBP would no longer have to fill

in the cumbersome paperwork required to prescribe those drugs.

The program relieving HIV physicians of paperwork was supposed to commence in August, 1991. Thus far nothing has changed. HIV physicians still have to fill out forms — in duplicate.

In fact, the Ontario health ministry's record on AIDS is a catalogue of failures and unfulfilled promises:

- A promise to investigate travel grants enabling HIV-infected persons in smaller communities to seek expert primary care in larger centres; no follow-up by the ministry.

- An announcement promising to establish a provincial ethics committee to review research on HIV; no provincial ethics committee.

- A commitment to appoint HIV-infected persons to the Ontario AIDS Advisory Committee (OAAC); no appointments.

- A recommendation from OAAC to develop a catastrophic illness drug policy; no policy.

- A recommendation from OAAC to fund the basic HIV laboratory test beta-2-microglobulin; no OHIP coverage for the test.

- A promise to declare a provincial AIDS strategy; yet no provincial AIDS co-ordinator from May to September and no chair of OAAC since May.

AIDS activists should not be surprised that, after a year in power, the NDP government has contributed only platitudes to people infected with HIV. While in opposition, the NDP remained silent whenever any AIDS issue arose. Whether it was anonymous testing or talk of quarantine, the NDP had nothing to say.

The NDP government has conducted itself in a fashion no better than previous governments. Silence while in opposition was bad enough; apathy upon achieving power is unacceptable.

The AIDS activists are not far off when they shout that "killing time equals killing people."

□ Dr. Philip Berger is co-chair of the Toronto HIV Primary Care Physicians Group and a former member of the Ontario AIDS Advisory Committee.