No to academic freedom clause

London

BRITISH academics are not letting up in their efforts to persuade the government further to amend its proposals on the management of higher education. The government has already bowed to pressure by incorporating several amendments to the Education Reform Bill, soon to go before the House of Lords (see *Nature* 331, 645; 1988). Academics remain adamant that the bill must contain a provision to protect academic freedom upon the abolition of tenure for university staff. The Secretary of State for Education and Science, Mr Kenneth Baker, has consistently maintained that a clause protecting academic freedom would be impossible to word sufficiently precisely, and that the presence of such a provision would render it virtually impossible for an institution to dismiss an academic covered by such protection — that it would be tantamount to tenure.

Last week Baker offered instead to introduce a grievance procedure for dismissed academics, a move that seems likely to cut little ice with the academic community.

The Committee of Vice-Chancellors and Principals (CVCP) is puzzled by Baker's stance (in 1986 the government had no qualms about introducing a statutory right to freedom of speech on university campuses) and is now preparing for its campaign in the House of Lords. In a letter sent to Members of Parliament last week, the CVCP said: "Universities have a number of duties and responsibilities. Among them is to question received wisdom be it religious, political or scientific. Without it our society will be poorer and the international reputation of our universities will be damaged." The CVCP believes it has formulated a definition of academic freedom that would be workable: the freedom within the law to question and to test received wisdom and to put forward new and controversial or unpopular opinions without placing individuals in jeopardy of losing their jobs.

Baker's handling of the lobbyists is causing growing resentment within the Association of University Teachers, which represents more than 31,000 rank-and-file academics. Baker has been talking with the CVCP (albeit to no apparent avail) and has given assurances that he will continue discussions with vice-chancellors to evolve a form of grievance procedure, but has so far ignored the AUT. The AUT has condemned the discussions as "utterly useless" unless the voice of the "ordinary staff" is heard, and rejects the offer of a grievance procedure as "wholly inadequate".

Simon Hadlington

South Africa uses deportation in the battle against AIDS

Oxford

MORE than 1,000 migrant workers from Malawi, Uganda, Zambia and Zimbabwe are being deported from South Africa because they have been found to be carriers of HIV (human immunodeficiency virus), the Minister of Health and Population Development, Dr Willie van Niekerk, disclosed in Cape Town last month. This follows the introduction of compulsory AIDS screening for all black immigrant workers before they are given contracts. While claiming that its policy is in line with the United States and China, which require foreign immigrants to be screened for HIV, South Africa does not require AIDS screening for white immigrants (7,953 immigrants entered the country last year, most of them white). Nor does it require HIV testing for foreign students, as do the Soviet Union and India.

The incidence of AIDS in South Africa is low (only 2.24 cases per million), and has so far been predominantly confined to white homosexual males. Of the 76 cases reported to the country's AIDS advisory group by the end of last year, 65 were either homosexual or bisexual, three were haemophiliacs, three were related to blood transfusion, and five were contracted by heterosexual contact. Only three of all these cases were black, and only one female; a black woman who contracted

the disease from a blood transfusion.

The advisory group predicts that the prevalence of AIDS is likely to increase more rapidly among black South Africans, and that the pattern of the disease in the future will come to resemble that of the rest of Africa, rather than retaining its present Western character. At least 2,500 cases are expected by 1991. Already, 20 pregnant women, all black, among 37,920 black and white women who underwent routine antenatal tests between May and November last year, have been found to carry HIV-antibodies.

Potential for AIDS transmission is feared to be particularly high among migrant workers in South Africa's mines, where most of workers live in single-sex hostels. There are about 300,000 foreign migrants working legally in South Africa (mostly from Malawi and Botswana), although total estimates (including illegal workers) are closer to a million. About 6.6 per cent of those screened from Malawi have been found to be HIV-positive. The plea of the medical director of the country's blood transfusion service, Dr Maurice Shapiro, that "we should be tracking down those with the infection, counselling them and offering protection against discrimination and prejudice in the workplace", appears to have fallen on deaf ears, at least with regard to foreign migrant workers.

Michael Cherry

HIV testing for NIH laboratory workers gets under way

Washington

THE US National Institutes of Health (NIH) will offer serologic testing every four months to employees whose jobs routinely expose them to human immunodeficiency virus (HIV), the virus causing AIDS. NIH have identified approximately 200 workers in some 75 different laboratories who qualify. Robert W. McKinney, director of the NIH division of safety, says the programme, which starts next week, is voluntary, and any employees declining to participate will still be eligible for all health benefits.

Employees will be bled at four-month intervals, and their blood will be tested for antibodies to HIV using a commercially approved ELISA (enzyme-linked immunosorbent assay) test kit. Any positive or indeterminate ELISA result will be followed up with a Western blot, or in some cases experimental testing procedures not yet approved by the Food and Drug Administration, such as a test kit for HIV-2.

Employees will be tested in groups, and

no member of a group will receive test results until all results for the group are available. Employees will be notified by mail of negative results, and in person if the tests show evidence of HIV infection. If an employee's serologic status remains indeterminate after repeated testing, that person will be bled at more frequent intervals. Up to 5 weeks may transpire between testing and notification of results.

McKinney says his office took particular pains to maintain the confidentiality of employees. A file separate from other health information will be established for participants in the programme. Blood samples will be coded, and only the programme director and one deputy will be able to match the codes to the employees.

Safety officials at the Centers for Disease Control (CDC) in Atlanta are considering a testing programme for employees there, but a CDC spokesman says no decisions have been made on how or if such a programme will be implemented.

Joseph Palca