

## As the climate changes, so should businesses adapt: Expert

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WHEN France and several other parts of Europe were hit by a heat wave during recent summers, the number of heatstroke and dehydration victims swelled significantly. But with many healthcare professionals on their annual vacation, many did not receive adequate care.

Simply changing such practices, said climate expert Andrew Watkinson (picture), would demonstrate what it means to effectively adapt to the effects of climate change, such as more floods and droughts.

In the case of the heat waves, in which thousands were killed, Professor Watkinson said the medical professionals could reschedule their vacations, traditionally

taken in August across much of Europe.

Since the effects of climate change are “here to stay”, businesses and institutions need to start taking adaptive action, said the director of the Tyndall Centre for Climate Change Research.

“The Bali climate change talks have been about mitigation, but we also have to look at the gases we have already emitted ... the effects are almost pre-determined,” said Prof Watkinson, who spoke at the Climate Change Symposium yesterday at the National University of Singapore.

For instance, the warmer weather in the United Kingdom could make the country a more attractive tourist destination – but the industry will need to look at building the necessary infrastructure to accommodate the increased number of visitors, he said.

And while businesses should take the initiative to deal with climate change, Prof Watkinson emphasised the importance of the role of governments.

“In the UK, the retailers are very interested in addressing the issue of climate change, but they’re waiting for the government to steer it,” he said. “Governments need to clarify and give clear signals.”

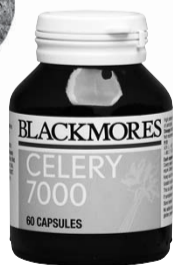
Echoing Prime Minister Lee Hsien Loong – who said at the recent United Nations Climate Change Conference in Bali that there was no “silver bullet” for climate change issues – Prof Watkinson pointed out that adaptation was not a “final process” and it was important to keep learning from experience.

“You need a road map that will give you choices,” he said. “You have to take into



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account that something might or might not happen, and your policy should be able to deal with a broad range of possibilities.”



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## An Aids test? 'It isn't for me'

Attitudes towards managing HIV must change, as voluntary screening pilot starts

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MCT

THE admission form looks the same – with the addition of a clause that could be crucial in the fight against Aids: “I do not want to be screened for HIV”.

From yesterday, all adult inpatients at Changi General Hospital (CGH) had to sign against that statement if they did not want to be tested for HIV.

But even as Singapore's pilot voluntary, opt-out HIV-testing scheme takes off, it seems more must be done to shift society's attitudes on managing the disease.

Most of the visitors at CGH whom TODAY spoke to were unaware of the scheme to increase HIV-testing rates. Of the eight polled who thought it was “a good idea”, five would not consent to testing because they “did not fall into the high-risk groups” – the kind of reaction HIV-prevention advocates are trying to change.

The process at CGH is simple enough: Conventionally, all patients being admitted sign a General Consent for Admission Form, which now has the added clause.

A CGH spokesperson said: “The consulting doctor will inform the patient of the HIV screening, provide him or her HIV Testing brochures to read, and answer any questions.”

If patients, or an authorised person, decline the test, they sign next to the opt-out option.

Otherwise, depending on their ward class, they will pay between \$6 and \$23 for the test.

According to CGH, it is still too early to disclose the take-up rate. But according to visitors like Mr Ong, 56: “It's not for me ... It's good for single, young men only. Elder and married men like me who have only one partner are more decent and safe.”

Mr C K Koh, 54, said: “Testing isn't for me – the more you know, the more problems there will be.”

But Action for Aids (Afa) executive director Lionel Lee stressed that HIV is everybody's problem and hopes the testing agenda will take root. “Once testing becomes a normal thing, like any test for a chronic disease, it will be more accepted by the population.”

Other hospitals, such as Singapore General Hospital and K K Women's and Children's Hospital will roll out voluntary, opt-out HIV testing for inpatients in the next few months, in line with HIV prevention guidelines from the American Centres for Disease Control.

Afa's anonymous testing programme had just 500 tests done when it started in 1997. It was 6,046 last year, and Mr Lee expects a 10-to-20-per-cent rise on that by the end of the year.