

# Confronting AIDS in the workplace

## International trends

*This article summarises the proceedings of a World Health Organisation (WHO) conference on "AIDS and the Workplace". The workplace is seen to provide a "strategic platform" for engaging in programmes against AIDS. Policy guidelines drawn up by various overseas union bodies are presented. A workplace AIDS policy for persons applying for employment and for those already in employment is suggested, as are guidelines for health promotion strategy and for workplace AIDS education. The issue of HIV in the workplace can become a source of discrimination against workers. This has already occurred in the South African mining industry.*

*The numerous guidelines formulated by the delegates to the WHO meeting provide insight into what is considered internationally to be ethical practice with regard to HIV/AIDS in the workplace. These guidelines can assist South African workers in formulating their own demands around this issue.*

A World Health Organization (WHO) report on the topic "AIDS and the Workplace" provides interesting insights on emerging international approaches to confronting the AIDS crisis. The report covers discussions held in Geneva in June 1988 attended by representatives of trade unions and employers from all over the world.

A representative of the Swedish Labour Ministry Action Group on HIV/AIDS reported that at first trade unions in Sweden regarded the problem as a public health issue which would best be dealt with by the government health authorities.

It soon became clear, however, that information disseminated by the health authorities did not reach the workplace. Furthermore, much of the information being distributed by the mass media contributed to confusion and anxiety rather than assisting the general public in becoming better informed.

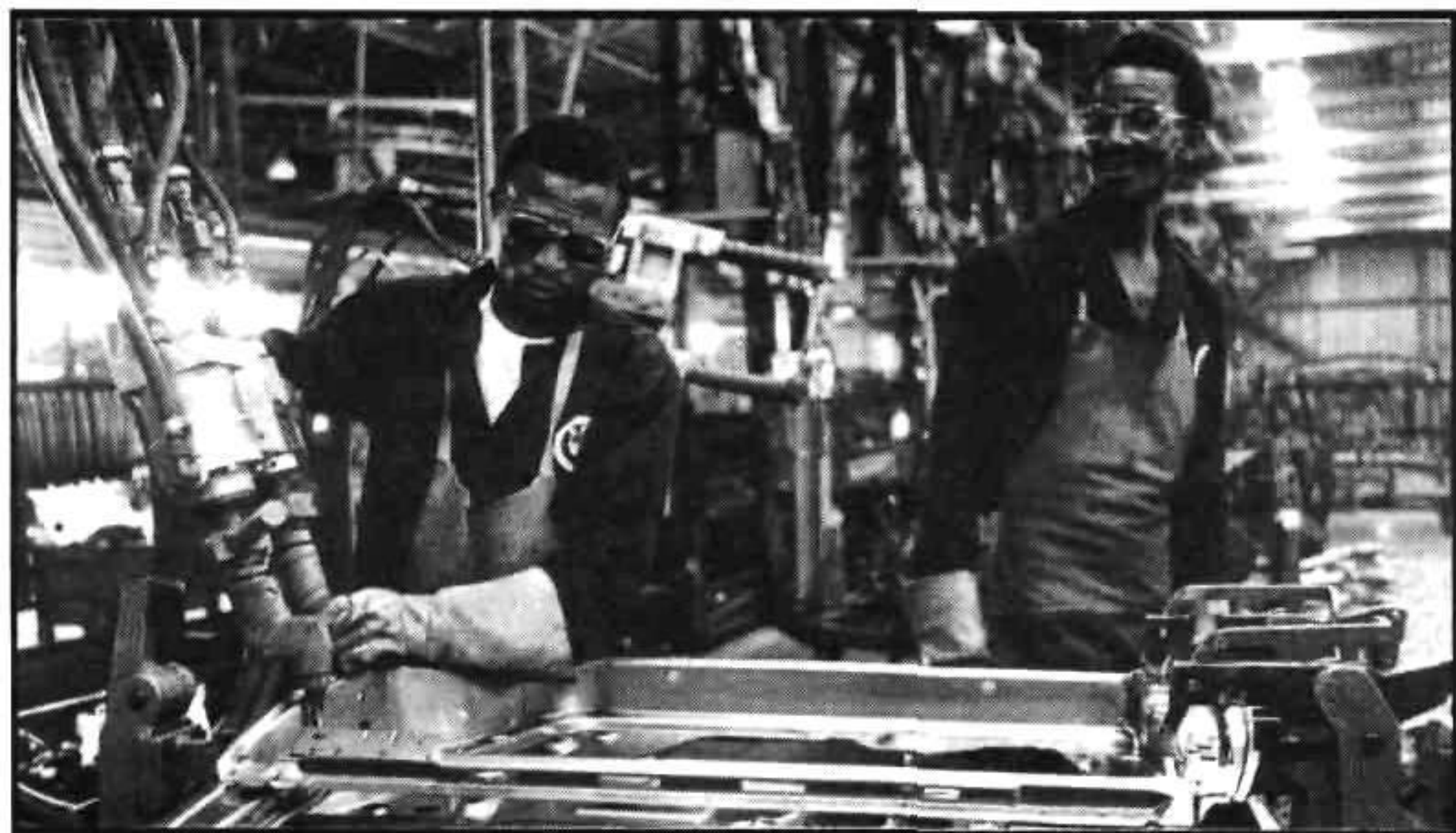
The unions realised that laws and negotiated agreements are not enough and that a change in public attitudes was needed. Health education would have to go beyond the promotion of condoms and deal with basic factors in relationships between people. The workplace was seen to provide a strategic platform for implementing such an approach. Such action could be undertaken by the unions alone, by the unions jointly with

employers, and by both in co-operation with the health authorities and other agencies.

In the USA several studies have shown that only a small percentage of companies have provided AIDS education and developed an AIDS policy. Workers' attitudes and behaviour show a high level of anxiety about working with HIV infected people. AIDS education programmes aim to reduce fear and hysteria and prevent the spread of AIDS.

The Australian Council of Trade Unions (ACTU), the British Trade Union Congress (TUC), and the Canadian Labour Congress (CLC) were also represented at the conference in Geneva. Each of these bodies has drawn up policy guidelines for confronting the problem of AIDS. Aspects of their various policies include:

- opposition to discrimination against workers with AIDS/HIV or those perceived to be at high risk, such as homosexuals and persons with haemophilia;
- opposition to the dismissal of HIV infected workers;
- opposition to compulsory screening. If screening is done it must be voluntary and with informed consent;
- commitment to the provision of adequate training and protective clothing and equipment in those workplaces where there may be a risk of transmitting the virus (eg in hospitals);
- confidentiality - in particular regarding HIV testing;
- improved awareness of health education;
- the need for clear and accurate information;
- ensuring that adequate public resources are put into combatting AIDS;
- the recognition that education is more effective than legislation in controlling the



**Most occupations do not involve any risk of catching AIDS from fellow workers.**

spread of the disease.

Certain companies have themselves responded in a relatively enlightened manner to the AIDS crisis. IBM's policy, for instance, stresses respect for the individual and the treatment of employees with AIDS in a manner similar to those suffering from any other serious illness in terms of confidentiality, access to benefits, and accommodation at work. The company does not test applicants or employees for HIV. Their strategy incorporates: assistance to employees and their families, education programmes and support of external programmes to combat AIDS (eg. research grants).



**No worker should have to undergo an AIDS test in order to get a job.**

The Swiss company, Ciba-Geigy, provides for counselling for employees with HIV and for the voluntary reassignment of such employees to reduce their risk of exposure to AIDS related diseases.

Certain delegates at the conference expressed their concern that voluntary programmes would only reach those who are already taking positive steps to reduce their risk behaviour. Others argued that the wishes of the individual should be respected and that voluntary participation would make participants more committed to the AIDS programmes.

The content of discussion at the conference was brought together in a detailed "Consensus Statement". "Concern about the spread of HIV/AIDS", according to the statement, "provides workers, employers, governmental agencies and other organisations with an opportunity to create an atmosphere conducive to caring for and promoting the health of all workers".

"In the vast majority of occupations, work does not involve a risk of acquiring or transmitting HIV between workers or between workers and clients". However, the statement notes that special attention needs to be given to specific occupations (such as health workers) where the risk of becoming HIV positive through work does exist.

The essential principles of AIDS policy should involve a recognition that "protection of the human rights and dignity of HIV-infected persons, including persons with AIDS, is essential to the prevention and control of HIV/AIDS. Workers with HIV infection who are healthy should be treated the same as any other worker. Workers with HIV-related illness, including AIDS, should also be treated the same as a worker with any other kind of illness".

Furthermore "most people with HIV/AIDS want to continue working, which enhances their physical and mental well-being and they should be entitled to do so. They should be allowed to contribute their creativity and productivity in a supportive occupational setting".

## **What should an AIDS policy contain?**

The statement proposes that any AIDS policy should have two main components relating to persons applying for employment and persons already employed.

### **Persons applying for employment**

Pre-employment HIV/AIDS screening as part of the assessment for fitness to work is unnecessary and should not be required. Screening of this kind refers both to HIV testing as well as asking questions about possible risk behaviours such as how many sexual partners the job applicant has.

Pre-employment HIV/AIDS screening for insurance or other purposes raises serious concern about discrimination and needs to be examined more closely. (Insurance policies and medical aid schemes taken out on commencing a job may insist on screening for HIV. This may be an indirect way of employers getting such information and acting on it in a discriminatory way.)

## Persons in employment

- 1. HIV/AIDS screening:** HIV/AIDS screening, whether direct (HIV testing) or indirect (assessment of risk behaviours) or asking questions about tests already taken, should not be required.
- 2. Confidentiality:** Confidentiality regarding all medical information, including HIV/AIDS status, must be maintained.
- 3. Informing the employer:** There should be no obligation on the employee to inform the employer regarding his or her HIV/AIDS status.
- 4. Protection of employee:** Persons in the workplace affected by, or perceived to be affected by HIV/AIDS, must be protected from the stigmatisation and discrimination by co-workers, employers, clients or unions. Information and education are essential to maintain the climate of mutual understanding necessary to ensure this protection.
- 5. Access to services for employees:** Employees and their families should have access to information and educational programmes on HIV/AIDS, as well as to relevant counselling and appropriate referral.
- 6. Benefits:** HIV-infected employees should not be discriminated against. Access to and receipt of benefits from statutory social security programmes and occupationally related schemes should not be forfeited once a person is found to be HIV-positive.
- 7. Reasonable changes in working arrangements:** HIV infection by itself is not associated with any limitation in fitness to work. If fitness to work is impaired by HIV-related illness, reasonable alternative working arrangements should be made.
- 8. Continuation of employment:** HIV infection is not a cause for termination of employment. As with many other illnesses, persons with HIV-related should be able to work as long as medically fit for available, appropriate work.
- 9. First aid:** In any situation requiring first aid in the workplace, precautions need to be taken to reduce the risk of transmitting blood-borne infections, including hepatitis B. These standard precautions will be equally effective against HIV transmission.

The conference also agreed upon certain guidelines for health promotion strategies for HIV/AIDS in the workplace.

The proposed aims of workplace AIDS education programmes are:

- to minimise fear and anxiety concerning HIV/AIDS;
- to help prevent the spread of HIV infection;
- to promote a sensitive and responsible attitude towards HIV infected persons;

- to keep HIV-infected persons and people with AIDS informed about their rights.

Proposed objectives of workplace AIDS health programmes are:

- to communicate accurate up-to-date information on HIV infection to all personnel and their families;
- to encourage individuals to change their attitudes and behaviour;
- to promote the health of HIV-infected people and people with AIDS within the workplace;
- to ensure that workplace AIDS education programmes are incorporated into general health programmes;
- to ensure that workplace AIDS education programmes are integrated with or complimentary to other community AIDS programmes.

The proposal suggests that programmes should include:

- continuing consultation with all the relevant groups during its implementation;
- the allocation of time within working hours for the programme;
- a recognition that AIDS education should not replace existing occupational health and safety programmes.

The conference suggested an effective workplace AIDS education programme should include the following characteristics:

- a managerial commitment to ongoing training and AIDS education, which will require training for managers on AIDS-related issues;
- involvement of the target personnel in programme development;
- employment of a variety of educational and communication techniques;
- utilization of small interactive group techniques where possible;
- positive and competent programme leadership;
- material and educational techniques in the programme that are appropriate to the group the programme is aimed at;
- access to counselling and support services for employers, employees and those involved in carrying out the training and educational programmes. □

AIDS is the name of a disease that is affecting more and more people by the day. It is a very serious disease for which there is no cure at this time. You can read more about this disease and how to prevent it in a book called "AIDS - everybody's problem". To get this book send R3.00 to:

The Workplace Information Group (WIG)  
P.O. Box 5244, Johannesburg, 2000.

The National Congress of Trade Unions (NACTU) has also brought out a pamphlet on AIDS. It can be obtained by writing to:

NACTU, Health and Safety Unit  
7th Floor, Lekton House, 5 Wanderers Street, Johannesburg, 2001.