Expanding access to HIV/AIDS treatment, care and support through occupational health services

FACTS

The ILO estimates that over 70 percent of the 40 million adults presently living with HIV/AIDS are workers in their productive prime who are essential to national social and economic security and development. The provision of adequate care and support to this affected workforce is vital, not only to keep it alive, but also to mitigate the socio-economic impact of the epidemic. The ILO's tripartite constituents acknowledge that the 'world of work' can play a key role as a facilitator in providing essential care and support activities and that all the social actors must be involved to achieve this.

WHAT IS "CARE AND SUPPORT"?

For the ILO, 'care and support' for people living with HIV/AIDS is based on the rights of those affected to continue working without fear of stigma or discrimination and to have:

- Access to treatment and drugs and social protection schemes
- Information on living healthily and on referral to relevant community services
- Psycho-social support
- Working conditions reasonably adapted to their state of health

TOOLS TO DELIVER

The *ILO Code of Practice on HIV/AIDS and the world of work* is a recognized international guideline for action on HIV/AIDS that includes provisions for worker access to care, treatment and support through occupational health services (OHS). Its accompanying Training manual develops further practical means for improving this access through workplace structures and programmes. Two paragraphs of the Code are particularly relevant to OHS:

- 5.1 (e) "In countries where employers assume a primary responsibility for providing direct health-care services to workers, governments should offer guidelines to assist employers in the care and clinical management of HIV/AIDS. These guidelines should take account of existing services".
- 9.3 (a) "Some employers may be in a position to assist their workers with access to antiretroviral drugs. Where health services exist at the workplace these should offer, in cooperation with governments and all other stakeholders, the broadest range of health services possible to prevent and manage HIV/AIDS and assist workers living with HIV/AIDS."

The Occupational Health Services Convention, 1985 (No. 161) promotes a comprehensive approach to occupational health through the use of multidisciplinary teams to provide services including "preventive health care, health promotion, curative health care, first-aid, rehabilitation and compensation, as well as strategies for prompt recovery and return to work". In the context of HIV/AIDS, such teams could undergo in-service training to apply cost-effective case management and health care delivery.

¹ Implementing the ILO Code of Practice on HIV/AIDS and the world of work: an education and training manual.

WORKPLACE HEALTH CARE TO THE RESCUE?

Evidence from countries facing mature AIDS epidemics gives a measure of the seriousness of the impact the disease has on public health systems. Research in South Africa showed that in the year 2000, 24% of all public hospital admissions were for AIDS-related infections. Tracking of hospitalization in Nairobi over 10 years shows that AIDS patients represent an increasingly high proportion of hospital admissions, resulting in a rapid degradation in the quality of care in general and access to care by non-AIDS patients.

Many larger workplaces have in place some form of medical service accessible to employees and even their families. These services can administer therapies and provide the support and monitoring needed to ensure effective treatment. Their broader approach to care would make them useful partners in prevention and psycho-social support. Making treatment available for infected workers will encourage other workers with HIV/AIDS to be open about their status and result in reduced stigma and discrimination.

ENHANCED NATIONAL CAPACITIES

Increasing the capacities of national health care systems to respond to HIV/AIDS by:

- Extending treatment, care and support to the workplace through occupational health services as part of the efforts to scale up or accelerate access to treatment.
- Promoting *Confidential Voluntary Counselling and Testing* through 'know your status' campaigns.
- Establishing links with community outreach programmes, including the provision of mobile clinics to extend treatment, care and support to workers' families,
- Providing social protection coverage such as social security and health insurance schemes.

SUSTAINABLE STRATEGIES

Prevention programmes should continue to be given high priority, and access to HIV/AIDS treatment and care should be viewed as part of the continuum that exists between prevention and care. The provision of occupational vocational training and income generating activities should be an integral part of care and support to ensure that people living with HIV/AIDS maintain their dignity by contributing to health insurance schemes and to development in general.

BENEFITS

- Enhanced capacity of OHS to provide with cost-effective care, treatment and support.
- Expanded and improved primary health care delivery, CVCT and prevention programmes.
- Enhanced linkage with community outreach programmes and community based care.
- Enhanced social protection systems, care education and access to reliable information
- Improved and adapted working schedules and conditions for infected workers. .
- Decrease in AIDS related mortality rates and in new infections.

ILO AND WHO: A LONG STANDING AND CRITICAL PARTNERSHIP

The collaboration between the ILO and WHO on HIV/AIDS dates back to 1988 when both organizations jointly organised in 1988 a consultation on AIDS and the Workplace, which resulted in a joint statement that outlines the principles and policies on the use of the workplace for health activities and the provision of care and support. The mandates of the two organizations, workplace health for the ILO and public health for WHO, provides a complementary basis for improving integration of occupational and public health care systems. The International classification of the ILO Radiographs of pneumoconiosis is recognized world-wide as an authoritative reference document on occupational health care and endorsed by the WHO. The ILO and WHO have a Standing Commission on Occupational Heath and Safety. Recently they collaborated on developing the WHO ProTest for TB, and will soon publish jointly workplace guidelines on TB prevention and treatment.