Tuberculosis

## Guidelines for workplace control activities

A social, labour and economic issue

TB is one of the world's leading causes of illness and death. Two million people die each year and three-quarters of cases are among men and women between the ages of 15 and 54, the most productive age group. TB is a problem not only for individuals but also for families, communities, companies and countries. The AIDS epidemic has fuelled the increase in TB, as people with weakened immune systems due to HIV are particularly vulnerable to TB.

In high HIV prevalence settings, many workers are vulnerable to TB. Sick workers mean the loss of skills and experience weeks or months on end, disrupted production and reduced productivity. There are also the direct costs of treatment. In Uganda, 80% of wage earners stop work due to TB at some point with the average time lost from normal activities being 9.5 months. TB is also a major contributor to ill-health and poverty in the community, affecting both family and enterprise security. The macroeconomic impact reflects the cumulative loss of individual and business earnings - it's estimated that productivity losses total about US$12 billion each year.

TB incidence in Africa in 2001

per 100 000 pop
- < 10
- 10 - 24
- 25 - 49
- 50 - 99
- 100 - 299
- 300 or more
- No estimate

Source: WHO
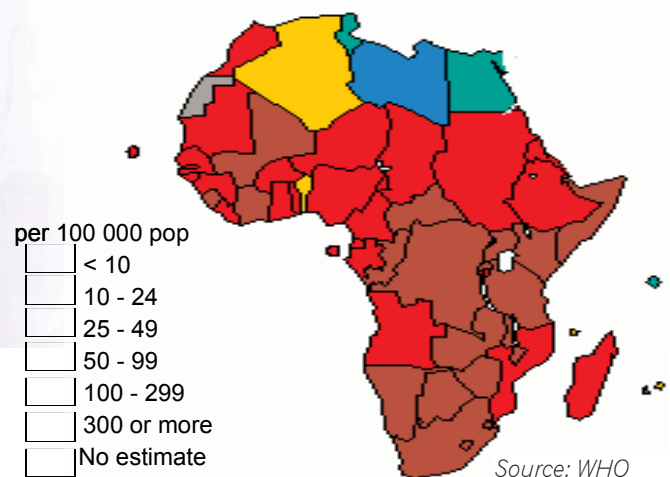
A workplace challenge

TB is not only treatable, but it can be cured. And the workplace is ideally suited to the prevention and control of TB, a "win-win" situation for both worker and employer. While the individual receives vital information, and treatment where necessary, the employer saves costs, disruption and productivity losses.

A workplace policy and programme on TB should be linked to other health issues, especially HIV/AIDS, and should be developed through collaboration between management and workers. The full participation of workers and their representatives helps ensure effective implementation, making it possible to sustain an acceptable level of TB control at a reasonable cost.

A workplace policy
- makes an explicit commitment to corporate action;
- ensures consistency with appropriate national laws;
- establishes the rights of those affected;
- gives guidance to managers, supervisors and occupational health services;
- helps employees with TB to understand what support and care they will receive, so they are more likely to come forward for appropriate treatment;
- helps to stop the spread of TB through prevention programmes; and
- assists in planning for TB control and impact management.

Cost effective TB management at AngloGold (South Africa)

AngloGold South Africa, estimates that each case of TB in its operations in the Vaal River and West Vilts regions, cost $410 per case in lost shifts among unskilled employees. AngloGold runs a comprehensive TB management programme for the workplace. They have found that an effective TB detection and management programme can lead to net cost savings. AngloGold spends about US$90 per employee per year and benefits US$ 105 through the prevention of active TB among HIV-positive employees.

Source: World Economic Forum

The ILO and WHO, with the help of other partners in the world of work, have collaborated to develop international guidelines on TB management at the workplace. These outline how any business, large or small, or public sector workplace can make a contribution to TB management and control.

TB management at the workplace

The basic principles of workplace policy

Recognition of TB as a workplace issue

TB is a workplace issue because it affects the health of workers and the productivity of enterprises. The workplace has a role to play in broader global efforts to limit the spread and effects of TB. Workplace programmes should be gender-sensitive, taking into account women's greater vulnerability to TB and its impact as a result of higher levels of poverty, the burden of care, and the increasing incidence of HIV among women.

Non-discrimination

No one should experience discrimination on the basis of their TB status, whether in terms of continuing employment relationships or access to health insurance, occupational safety, and health care schemes. Employees with TB should be entitled to work for as long as they are medically fit and appropriate work is available.

Confidentiality

Neither job applicants nor employees should be asked to disclose information on the basis of their perceived TB or HIV/AIDS status. Access to personal data should be bound by the rules of confidentiality and be in accordance with the ILO code of conduct on the protection of worker's personal data.

Healthy work environment

The work environment should be healthy and safe, as far as practicable, in order to prevent the transmission of TB. This includes the responsibility for employers to provide information and education on TB transmission, appropriate environmental measures, and protective clothing where relevant.

Care and support

Workplaces should provide access to health services that fulfil the needs of male and female employees with TB and related illnesses, or should refer workers to treatment and care services in the community. The DOTS approach is preferred (see below). Measures to accommodate and support workers with TB should be made through flexible leave arrangements, rescheduling of working times, and arrangements for return to work.

Social dialogue

Control and management of TB in the workplace is more effective when planned and implemented on the basis of collaboration between managers and the workforce. A workplace health and safety committee with broad representation should be responsible for overseeing implementation.

Implementing DOTS (directly observed treatment strategy)	The internationally recognised strategy for the management of TB is DOTS. It requires direct supervision and support for patients, including observation of treatment. Daily contact with workers makes the workplace an ideal setting for implementation.

ILOAIDS

Because of the close links between TB and HIV/AIDS, work on TB is undertaken by the ILO's global Programme on HIV/AIDS and the world of work.

Established in 2000, this Programme mobilizes the potential contribution of its tripartite constituents - governments, employers, and workers - to combat the spread and impact of the epidemic. It has produced a *Code of Practice on HIV/AIDS and the world of work*, and accompanying education and training manual.

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Further information
and resources

Global Partnership to Stop TB, Global Drug Facility (GDF)
for projects to fund and useful TB awareness materials
www.stoptb.org

World Health Organization
www.who.int

WHO Africa
www.whoafr.org

Global Fund to Fight AIDS, TB and Malaria
www.globalfundatm.org

Green Light Committee
for improved access to second-line anti-TB drugs
www.who.int/gtb/policyrd/PDF/DOTSGLC.pdf

World Economic Forum - Global Health Initiative
globalhealth@weforum.org

South African Chamber of Mines
www.bullion.org.za

South African Chamber of Business
www.sacob.co.za