

In Uganda, 80% of wage earners stop work due to TB at some point.

COMPANIES SHOULD CONSIDER ADDRESSING TB PREVENTION AND CARE AT THE WORKPLACE IF:

- the work takes place in a high burden TB country, or if there are employees with TB
- the work itself or the working conditions may contribute to the transmission or severity of TB such as mining or workers in close contact with potential TB patients or with each other
- HIV is an issue or the company has an HIV programme.

A new document from the World Health Organization, the Stop TB Partnership, and the International Labour Organization, entitled *Working together with businesses: Guidance on TB and TB/HIV prevention, diagnosis, treatment and care in the workplace*, informs on workplace policies and programmes.

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Stop TB Partnership



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Stop TB Partnership



TACKLING TUBERCULOSIS (TB) IN THE WORKPLACE

Stopping TB in the workplace makes good business sense

TB is a disease that strikes people in their prime working years—

- preventing them from supporting themselves and their families;
- creating absenteeism in the workplace, lowering productivity, and raising direct and indirect costs such as medical care and recruitment.

In places where it is widespread, TB hurts the livelihood of entire communities—slashing incomes by billions annually and shrinking the potential size of the market for goods or services.

Since employees spend most of their waking hours at work, the workplace is the ideal place to tackle TB:

- Recent advances in drugs and diagnostics could drastically reduce the TB epidemic; businesses can play a vital role in accelerating that impact by making these advances accessible to employees.
- Providing screening and treatment at work saves workers having to spend significant amounts of time and money travelling to health facilities that may be overcrowded, distant or under-resourced.
- For industries in which working conditions can increase the risk of spreading TB (see box), companies improving these conditions can prevent the spread of the disease while building goodwill among the wider community.

Addressing TB in the workplace doesn't need to be complicated or expensive:

- **TB control can easily be integrated** into an existing workplace HIV programme and/or overall health and wellness programme. Since TB and HIV are closely linked—the highest-risk group for TB infection is people living with HIV/AIDS—addressing TB will boost the fight against HIV, to which many companies are already committed.
- **TB treatment is inexpensive and easily accessible.** The medications to treat someone with TB cost around US\$ 25, and in many cases are paid for by the National TB Programme.



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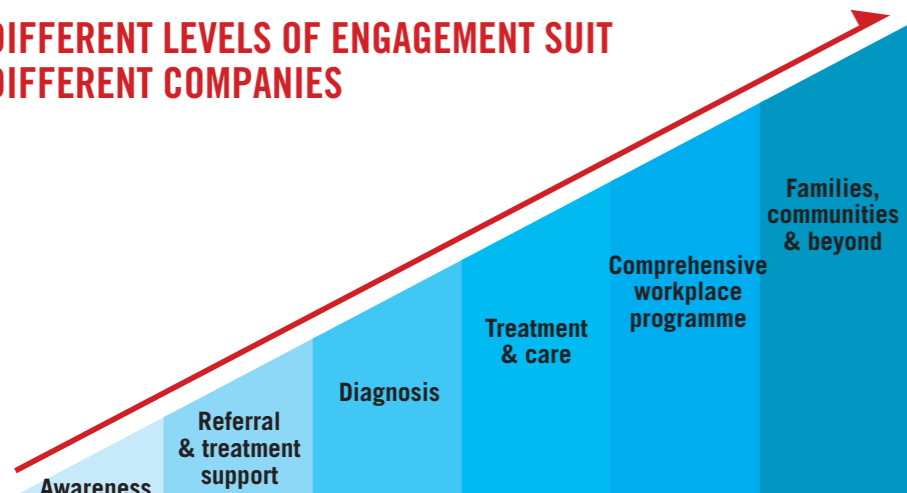


ELEMENTS OF A WORKPLACE TB PROGRAMME

The basics are simple—you may already be doing some of them:

- **Provide a healthy working environment** to help prevent transmission of TB: make sure workers are protected from dust, have enough fresh air and light and are not working in overcrowded conditions.
- **Check new workers for TB** to prevent the introduction of the disease into the workplace.
- **Support employees being treated** for TB (or any other condition) by providing sick leave, medical coverage and a non-discriminatory environment.

DIFFERENT LEVELS OF ENGAGEMENT SUIT DIFFERENT COMPANIES

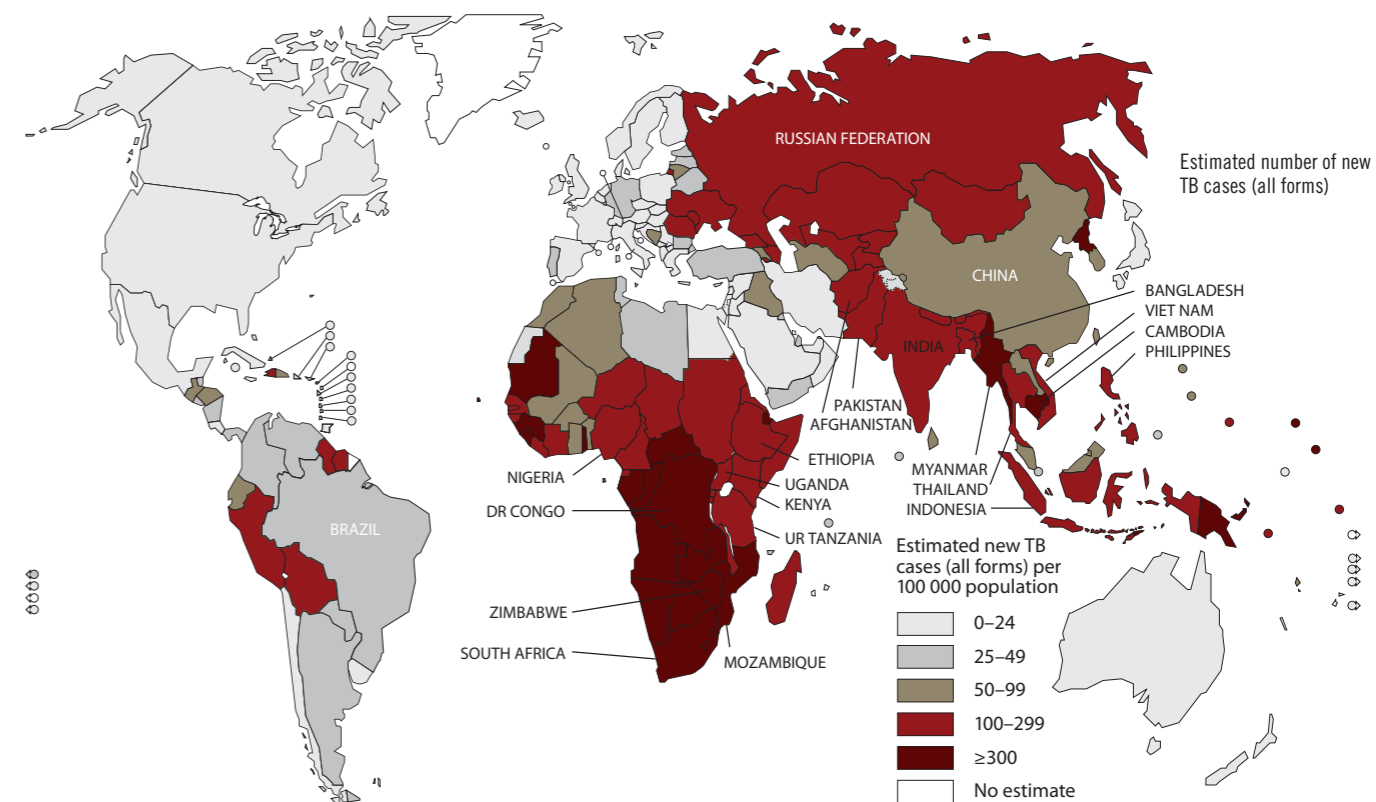


- **Adapt working conditions** to allow employees being treated and prevent them from transmitting TB to others—this should only be necessary in the first few weeks of treatment.
- **Include TB** in company-sponsored health awareness days or wellness programmes.

Elements of a more comprehensive TB programme include:

- **Diagnosis:** Awareness among all staff will help to identify employees at risk, and a non-stigmatizing environment will encourage staff to come forward if they think they may be infected.
- **Treatment:** Treatment at the workplace—either through an in-house programme or in collaboration with the public health system—minimizes time spent away from work and ensures that employees complete their treatment, which usually continues over six or more months.
- **Addressing the wider community:** Companies can ensure employees' family members are covered as well, either through the workplace programme or through insurance and/or improved access to the public health system. This creates goodwill among employees and beyond—and may as well increase local business prospects.

ESTIMATED TB INCIDENCE RATES, BY COUNTRY, 2010



HOW CAN MY COMPANY GET STARTED?

- **Learn** about TB in the workplace: a great start is *Working Together with Businesses: Guidance on TB and TB/HIV prevention, diagnosis, treatment and care in the workplace*, a new guide from the World Health Organization and the International Labour Organization.
- **Discuss** your plans with within the company and involve all levels of management, the National TB Programme, and other potential partners—there's a lot of knowledge and experience out there to help you get started (contact ppmtb@who.int for more information).
- **Identify** which elements you may already have in place, and how you can strengthen them and then develop a more comprehensive programme, if appropriate.

An employee with TB might lose an average of 3–4 months of work and income.

Did you know?

- After a tea plantation in Kenya made its **TB and HIV services available to 18 000 employees**, their dependents and the surrounding communities in 2007, they could **detect and treat 197 additional TB cases**.
- A garment factory committed to tackling TB in the workplace in Bangladesh detected **668 TB cases** between 2001 and 2007 and **achieved a cure rate of up to 93%** through this programme.
- A multinational fruit sourcing company in the Philippines educated over **3000 employees**, their families and the surrounding communities on TB between 2004 and 2008. Out of 400 referrals the company was able to facilitate the diagnosis and **treatment of 100 employees**.