

Protecting your Workforce from TB



An Introduction to TB at the Workplace



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Rationale for TB Management at the Workplace

Businesses have long-term interests in ensuring the national development of human capital to drive economic development and ensure market growth. Tuberculosis undermines all of this.

The management of tuberculosis is an economic issue...

Tuberculosis (TB) is treatable and curable. Yet, globally, 2 million people die from TB each year. They are mostly adults in their productive prime between the ages of 15 and 54. Everyone loses:

- **Businesses lose.** Workers are vulnerable to TB. A sick worker means disrupted workflow, reduced productivity, weeks or months of absenteeism and the direct costs of treatment. All this adds up to substantial costs to companies, individual workers and their families.
- **Businesses and communities lose.** TB is a major contributor to ill health and poverty in the community. The success of a business is closely linked to the health and prosperity of the community. The community is a source of workers, services, contractors and consumers; it is a key part of the overall business environment.
- **Businesses, communities and countries lose.** The macroeconomic impact of TB should be considered not only in terms of a country's per capita GDP, but also in lost lifespan and lifetime earnings. For example, on the global level, TB leads to a decline in worker productivity to the order of US\$ 12 billion annually. Workers may lose on average of 3 to 4 months of work time due to their TB illness.

TB poses a growing global threat...

There are 8 million new TB cases worldwide every year. There are 22 high-burden countries for tuberculosis, including India, China and Sub-Saharan Africa. Unless properly treated, each infectious pulmonary TB patient can infect up to 10-15 other people each year.

Tuberculosis is an infectious disease. Like the common cold, it spreads through the air. When an infectious person coughs, sneezes, talks or spits, he or she propels TB germs, known as bacilli, into the air. Left untreated, each person with active TB can infect an average of 10-15 people every year.

What's more, the ongoing emergence of multi-drug resistant TB, i.e TB in which the bacteria have become resistant to at least the two most important antituberculosis drugs, may aggravate the situation. MDR TB cases require longer periods of treatment with more costly and potent drugs, and with less chance of success. Even worse, the World Health Organization (WHO) estimates that the average person with MDR TB infects up to 20 other people in his or her lifetime. Today, strains of *Mycobacterium tuberculosis* that are resistant to a single anti-TB drug have been documented in all countries surveyed by the WHO/IUATLD during 1994-2003. Moreover, new strains of *Mycobacterium tuberculosis* resistant to all major anti-TB drugs have emerged.

Governments are tackling TB...

Ministries of Health in many countries are committed to TB control through National TB Programmes (NTPs). For example, the government of India's Revised National TB Control Programme run by the Ministry of Health is based on the WHO's recommended strategy of DOTS. More than 5 million patients have been treated under the programme and more than 900,000 lives have been saved. Other countries like China, the Philippines and Uganda have shown equal commitment through well structured NTPs. At the global level, more than 20 million patients have been treated under the programme. In particular, many of these governments have recognized that a multistakeholder approach is needed to achieve their case detection and treatment targets. That's why they are seeking the engagement of the business sector in their efforts for TB control.

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What can the Business and Public employment sectors do overall?

There are four ways in which the employment sector can contribute to TB control:

- Provide services in kind such as sharing core business and implementation skills (e.g., marketing, sales and distribution skills)
- Reach TB patients that are not easily covered by the public health system. Typically, the employment sector can more effectively reach potential TB patients who are among employees and their families, communities surrounding large businesses and business parks, particularly when located in remote or rural environments
- Support existing programmes through in kind product donations (e.g., drugs, diagnostics, IT equipment and other commodities) and direct funding.
- Contribute in reducing the stigma attached to the disease and discrimination suffered by patients by publicly promoting, and enabling TB care for those who suffer the disease.

Simply put, employment organizations can provide synergistic means to run TB control programmes. So where should a business start?

Manage TB in the workplace – it makes good business sense...

Businesses have a unique role to play in the elimination of TB. They have incredible management skills, existing health infrastructures and large workforces, among which many may be suffering from TB. These strengths combined with the technical expertise and resources available under NTPs can provide a critical mass of resources for successful TB control.

The workplace is a win-win setting for TB management: as more people are cured, the cycle of transmission is broken and fewer people are infected.

- **For the worker**, the workplace is ideal to gain awareness and receive treatment for TB. Importantly, good workplace activities can significantly help to minimize the stigma of TB among employees.
- **For the company**, TB management can save costs by reducing absenteeism, staff turnover – through prompt diagnosis and effective treatment – and transmission to other workers with attendant costs. TB management in the workplace is also an opportunity for businesses to concretely demonstrate their social commitment – part of a "local license to operate".

- **For communities**, as more people are cured, the cycle of transmission is broken and fewer people are infected. Ultimately, this leads to fewer cases of active TB. It cures people and returns them to an active, productive life, which in turn benefits their children and other dependants.

How can a company instigate TB control activities?

Partner with the public sector to share the load...

Contact the local public health authority in order to collaborate with the NTP. Most NTPs are keen to support companies who want to fight TB and offer a number of benefits that can be accessed either through the World Economic Forum and/or the Ministry of Health directly.

- Link your workplace TB control activities with the NTP. If the workplace has a basic health facility, link it with the NTP. All NTPs implementing the DOTS strategy should provide free diagnosis and free treatment.
- In countries or areas where the NTP is not implementing the DOTS strategy, the diagnosis and treatment of TB will take place at local health facilities and the employer could cover any costs incurred by employees.

Learn from other businesses...

In order to stimulate business involvement in TB control, the India Business Alliance to Stop TB and the China Business Alliance were developed by the World Economic Forum's Global Health Initiative (GHI). The India Business Alliance, a first for India and worldwide, was launched on World TB Day, 24 March 2004. Premier Indian companies like Aditya Birla, Eli Lilly, Larsen Toubro, Lupin, Modicare Foundation, Novartis India, Reliance Industries, Tata Steel and Triveni Sugar joined forces with the Revised National TB Control Programme (RNTCP), the Confederation of Indian Industry, the World Health Organization and the Global Partnership to Stop TB to fight TB. All companies, large or small, are welcome to join these types of public-private partnerships. To learn more about partnerships to help businesses stop TB, please contact gloalhealth@weforum.org

In addition to this a number of case studies are available illustrating how companies have successfully tackled TB. You can learn from important case studies such as the ones available at www.weforum.org/globalhealth/cases

Starting a TB Workplace Programme: Principles

Ten key principles should guide a workplace TB policy and programme...

1. Recognize that TB is a workplace issue.

TB affects workers and enterprises by increasing labour costs and reducing productivity. Start by implementing a workplace policy and by trying to institutionalize the right level of concern for TB by ensuring:

- Management is able to support TB patients
- Methods of planning are proactive and resources are deployed
- Processes for championing TB work through advocacy and communication
- Mechanisms to review programmes are in place.

Case studies¹ show that treating TB makes business sense, and the workplace is often the ideal place to identify cases and administer treatment. TB initiatives should also be integrated with relevant community programmes.

2. Create awareness. Businesses should educate general employees and train company healthcare professionals (physicians, nurses and paramedical staff) on TB epidemiology, diagnosis, transmission, prevention and treatment of TB/MDR TB. Education campaigns should be based on toolkits such as this and adapted for individual companies' cultures with help from healthcare staff and worker representatives. Only by creating a positive awareness and understanding of TB/MDR TB among employees can stigma be reduced or prevented and they can be urged to identify symptoms and seek treatment.

3. Ensure non-discrimination and respect confidentiality.

Individuals should not be discriminated against because of their real or perceived TB or drug resistance status. Discrimination and stigmatization of people with TB or those with MDR TB causes delay in diagnosis and makes it more difficult to cure patients. Pre-employment screening is rarely necessary and should not lead to discrimination. Even if test results during screening are positive, this should not be a reason for discrimination. Within the first two to four weeks of TB treatment, drug susceptible patients are normally no longer infectious and can be integrated in the workplace. TB workplace policies should include non-discrimination principles and be an integral part of existing employee policies. It is not necessary to disclose employees' personal information, including their TB or MDR status, to co-workers. Confidentiality ensures that workers trust a TB programme, making it effective.

4. Implement DOTS. The internationally recognized strategy for the management of TB is DOTS. It requires supporting patients directly, including observing treatment. It has been shown to prevent the emergence of multi-drug resistant TB. The World Bank ranked treatment of TB with DOTS as one of the most

cost-effective health interventions. It can be cured with a course of therapy costing as little as US\$ 14 per patient. TB cure rates well over 85% can be achieved with DOTS, even in resource poor environments.

5. Work with the National TB Control Programme.

National and regional TB Programme managers have a mandate and are keen to work with potential partners, including business, to implement TB management programmes. WHO - ILO guidelines encourage national and regional tuberculosis programmes to form partnerships with employers and develop TB workplace programmes. Any business can approach the NTP for technical expertise, the supply of standard drug regimens and the development of mutually beneficial programmes.

6. Monitor programme results. Monitoring diagnosis and treatment outcomes is important to ensure the proper management of TB and the assessment of a programme against objectives. Reporting cases of multi-drug resistant TB will not only help the NTP to identify those who may require second-line treatment, but early detection and treatment of these cases will also prevent the spread of MDR TB.

7. Report results. Reporting results to the NTP can enable the comparisons of programme success rate versus the national average. This helps when reviewing workplace and national programme impact. Transparency in sharing results also builds trust and stronger partnership with the NTP. It also helps the government achieve its targets.

8. Implement environmental controls. The spread of TB can be minimized by ensuring the flow of fresh air through proper ventilation, installation of air disinfection filtering devices and sunlight illumination. These are aimed at preventing or reducing airborne transmission from unsuspected cases or from diagnosed cases of TB to non-infected employees.

9. Develop a sustainable network of TB programme partners. There are many partners that can help start a workplace programme as well as provide resources in the long term. These can include NGOs, professional health associations and private sector organizations that specialize in TB management. A directory of potential partners can be found at www.weforum.org/globalhealth/directory

10. Link the existing workplace HIV programme to new TB programmes and vice versa. It is estimated that 50-60% of people living with HIV will develop TB. Businesses that are already addressing HIV should therefore consider implementing additional TB policies and treatment programmes and vice versa.

¹ Can be found on the website of the Global Health Initiative of the World Economic Forum. www.weforum.org/globalhealth



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