ACORD HIV and AIDS Induction Pack

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INTRODUCTION

The HIV and AIDS epidemic presents a formidable challenge to development institutions and agencies world over. Development institutions operating in many of the hard hit poorest regions of the world like Sub Saharan Africa (SSA) have experienced significant effects of HIV and AIDS on their workers including loss of staff to AIDS, reduced efficiency and productivity, staff turnovers and high costs of recruitment and retraining, among others. It is important to note that the vast majority of the people affected by HIV and AIDS are adults within the productive age, which explains the huge loss of human resource.

Realizing the serious impact of the epidemic on workers and based on her values of social justice for all, ACORD embarked on a process of making this right a reality for her employees through the development of a work place policy on HIV and AIDS. This process commenced in the year 2002, and has involved a number of activities such as: the review of policies from partner agencies; conducting a base line survey among staff and management to gather base line information on the HIV and AIDS status in ACORD programmes; drafting of a policy recommendations paper that formed the basis for subsequent discussions and inputs from all ACORD employees, management and the Board; ultimately leading to the policy approval by the Board in May 2006.

As part of the implementation process of the work place programs, ACORD emphasizes the provision of adequate and accurate information to all staff and families to facilitate them to take informed decisions regarding prevention, care and support and impact mitigation. “Knowledge has power to save”.

This induction pack is part of ACORD’s efforts to provide staff with the basic knowledge on the epidemic status, modes of HIV transmission and prevention methods. Specifically, the induction pack is aimed at developing knowledge and competence of ACORD employees and their families to effectively respond to the effects of HIV and AIDS.

Information in this pack is easy to read and can be used by Human resource / personnel officers in the processes of inducting new employees in the organization, and can also be accessed by staffs who wish to review and update their knowledge on HIV and AIDS. In addition, programmes can utilize this information during staff awareness sessions to generate discussions on
related issues, as well as preparation of short translations into local languages for support staff, most of whom may have limited knowledge of English. It should be noted that this induction pack is not comprehensive in itself in terms of providing all the vital HIV/AIDS information. Thus, continuous efforts should be made to solicit for supplementary sources of information such as: websites that present evolving dimensions of the epidemic; ACORD's HIV/AIDS workplace policy; and any other information sources available within countries that can further strengthen staffs’ knowledge on the HIV/AIDS epidemic.
Chapter One: WHAT I NEED TO KNOW ABOUT HIV AND AIDS

What is HIV?

- **H** - Human
- **I** - Immunodeficiency
- **V** - Virus

- HIV is a virus that damages a person’s immune system so that it cannot fight certain infections
- It may take several years to damage the immune system before a person becomes ill
- During these years a person may look and feel well – they may not even know they are infected with the virus
- The person is infected with HIV (HIV positive) but does not have AIDS

What is AIDS?

- **A** - Acquired
- **I** - Immune
- **D** - Deficiency
- **S** - Syndrome

- AIDS is a collection of symptoms and diseases a person gets due to the damage HIV inflicts to the immune system
- Some of the illnesses associated with AIDS are minor, some are serious and others are fatal
- Even when a person has developed AIDS they may have long periods between illnesses when they are well
- The overwhelming majority of people with HIV eventually get AIDS – the period it takes varies from person to person
How is HIV transmitted?

- Through unprotected sexual intercourse with an infected person (i.e. where there is no use of a condom)
- By getting infected blood into your blood stream (e.g. by receiving an infected blood transfusion)
- From contaminated needles, syringes or other skin piercing equipment (especially if you are an injecting drug user)
- From an infected mother to her baby (before or during birth or through breast feeding)

How is HIV NOT transmitted?

- Every day contact at workplace, school or home
- Kissing, touching, hugging and handshakes
- Sharing food or utensils
- Sharing telephones
- Toilet seats
- Public baths or swimming pools
- Mosquito or insect bites
Chapter Two: TAKING AN HIV TEST

Does it matter if I know my HIV status?

Most countries in SSA are experiencing the HIV and AIDS epidemic, including all those where ACORD operates. It is therefore important for all staff to know their HIV status and be able to make informed choices regarding their lifestyles. For those infected with HIV, knowing their status early will enable our health providers to start them on the right medication.

For those who are not infected, being tested relieves them of the anxiety as well as providing opportunities to face up to some of the difficult aspects in their lives like sexuality and relationships among others.

An HIV test tells if you have the virus

The test involves taking a blood sample, which is normally tested for HIV antibodies

- A negative test result means no HIV antibodies were found
- A positive test result means HIV antibodies were found and that one has been infected with HIV

- It normally takes three months for HIV antibodies to show up after infection – so if you think you have just been infected you may be asked to wait to take the test after 3 months
- You should seek advice both before and after the test from trained counsellors (usually available at the testing clinic)

The benefits of taking an HIV test

- If your results are negative, you can
  - confidently manage your life to stay negative
- If your results are positive, you can
  - ensure you don’t transmit HIV onto anyone else
– make informed decisions about sexual relationships and childbearing
– boost your immune system with a healthy lifestyle
– be treated of any opportunistic infections to slow down the progression to AIDS
– gain support from other people
– make short term and long term plans for your dependents, in the event of future ill health and death

Where can one take an HIV test?
In a number of countries voluntary counseling and testing facilities are now readily available. It may be helpful to get information provided by the HIV focal officer or any other responsible person on where these services can be accessed.

HOW CAN I AVOID HIV INFECTION?
Practice safer sex

• 80% of HIV transmissions are through unprotected sex with an infected person.
• Safer sex avoids the mixing of body fluids (semen, vaginal fluids, blood) that could contain HIV
  – Always use a male or female condom when having a sexual relationship with someone whose HIV status you do not know
  – Practice non-penetrative sex – such as masturbation, kissing, touching and holding each other
  – Engage in safer sex relationships – Avoid having multiple sexual partners; the more people you have unprotected sex with the more likely you are to become infected (and then to infect others).
  – Try to be faithful to your sexual partner (s), and vice versa (Zero grazing)
  – If possible, abstain from sex until you are ready to enter into a relationship with someone whose HIV status you know
  – Treat sexually transmitted diseases (STDs) from registered medical practitioners
Why are Sexually Transmitted Diseases (STDs) dangerous?

- STDs can increase chances of acquiring and transmitting HIV by up to 10 times (they can also cause infertility)
- These diseases include gonorrhoea, Chlamydia, syphilis, herpes or genital warts – in places these are very common
- Symptoms include burning sensations when peeing, sores or blisters near the mouth or genitals; in women, bleeding and vaginal pain are the most common symptoms.
- You should however note that it normally takes a much longer period for these symptoms to appear among women.
- Most of these symptoms can be treated very easily
- See your doctor if you have any of these symptoms
- Always make sure that your sexual partner (s) goes for treatment

Ensure safer access to medical services

- Identify sources of reliable medical help when travelling to higher risk areas
- Carry sterile disposable needles and syringes for personal use
- Ensure that any needles or syringes used have not been used before
- Reduce your risk of injury by following safety precautions
- Check that any skin piercing is done with new and sterilised equipment

If you must inject drugs follow safe use practices

- Always use your own set of drug equipment
- Never share needles and syringes with anybody, no matter how healthy they seem to be, or how well you know them
- Dispose of used needles and syringes in a rigid container with a sealed lid
• If you have to share equipment follow rigorous cleaning processes with water and bleach
• If you find a needle or syringe dispose of it carefully and wash your hands thoroughly afterwards.

PREVENTION OF MOTHER TO CHILD TRANSMISSION (PMTCT)

Maternal to child transmission (MTCT) of HIV can occur when the baby is still in the womb (in uteral), at birth or during breast feeding. It is estimated that mother to child transmission route contributes to 10%. In the absence of preventive measure, infants born to HIV infected mothers acquire HIV before or during delivery. The highest risk factor for MTCT is the viral load of the expectant mother. Untreated infections of the placenta also increase the likelihood of HIV transmission during pregnancy. This accounts for about 15-20% of infants born to HIV positive mothers.

At birth increased rupturing of the uterus during contractions and untreated sexually transmitted diseases increase the risk of HIV infection during the delivery process.

10-20% of the infants born to HIV positive mothers may acquire the HIV infection if they are breast fed.

To date it is estimated that each day 1800 children world wide become infected with HIV majority of who are new born. More than 85% of children infected with HIV live in Sub Saharan Africa. In total between 25-45% of infants born of HIV positive mothers may become infected through MTCT.

Can Mother to Child Transmission be prevented?
Transmission of HIV from an infected mother to her baby can be prevented through a number of strategies. These include implementing;

• Primary HIV prevention strategies integrated in reproductive health services like the antenatal, family planning programmes. It is always important for pregnant mothers to go for HIV testing as early as possible
- Prevention of unintended conception by HIV positive women.
- Ensuring that mothers access comprehensive antenatal care and support
- Promotion of voluntary testing and counselling for mothers and their spouses.
- Providing antiretroviral therapy for mothers and their new born babies. When one is found HIV positive, she can be given doses of Nevirapine, before, during and after birth to reduce chances of vertical HIV transmission.
- Counselling and educating HIV positive mothers on the risk of infection through breast feeding and alternative means of infant feeding. Where it is feasible, HIV positive women may be advised to go for bottle feeding using infant formula milk rather than breastfeeding.
Chapter Three: CAN I LIVE WITH HIV?

Scared of the results from the HIV test?

Learning you are HIV positive is traumatic and taking an HIV test has often caused anxiety and worry. However we need to be strengthened by the fact that we are not the first and there will be a counsellor to help us face up to it. It is encouraging to note that today living with HIV does not automatically mean we will die to morrow. Currently, life prolonging treatment can be accessed more easily than in the past.

Would you want to go it alone or with a friend and loved one? Support from loved ones would help especially for those that are extremely scared of the test results.

HIV testing may take you through a wide range of emotions and life challenges:

- Fear, loss, grief, depression, denial, anger, anxiety
- Your future hopes and expectations may have to be adjusted
- You will need counselling and support
- Your relationships with your partners and families will come under pressure (and they will also need support)

If I test positive will I have support from friends?

Although testing positive presents serious challenges, none of those tested positive should live alone. You may have to face ignorance and discrimination from some people (though you will probably find great support from most people)

To date a number of people within our communities are living with HIV and a good number have openly declared their status. There are a number of support groups one can join for support and encouragement. An HIV positive staff member should be able to access information from such associations within their locations. It is important to note here that ACORD is committed
to building a workplace that is supportive and caring for those who are infected or affected by the epidemic. We believe that together we can help one another. This is a process to be built among staff over time.

How long will I live with a positive HIV status?

Low cost treatments can prolong life

- Healthy lifestyle: increased exercise, reduced alcohol and tobacco consumption, high protein foods and vitamin supplements will boost your immune system
- Preventative treatments and vaccines such as flu jabs will reduce risk of some opportunistic infections.
- Effective treatment of common opportunistic infections like TB will reduce the impact on your immune system
- Emotional support from family, friends and HIV networks enhances the psychological strength to fight AIDS

ART: most effective treatment

- Antiretroviral Therapy (ART) is a treatment of drugs and care that can significantly prolong life
- In developed countries it is widely used and has substantially reduced AIDS fatalities
- In most developing countries it is still not widely available although that is beginning to change as drug prices decline

How feasible is it to access ART?

- The cost of the treatment varies by country and can be very high (although costs are reducing)
- It requires a rigorous regime of taking drugs every day *without fail* if it is to work
- It requires a relatively well developed health infrastructure for monitoring and testing with adequately trained medical practitioners
- Some people find the side effects very difficult to tolerate
Chapter Four: CAN WE IGNORE HIV AND AIDS IN OUR WORK?

NO!

In ACORD our work is composed of the various programmes we are engaged in as well as the actual workplace where we spend a greater percentage of our time. Ignoring the impact of HIV and AIDS in our programmes and work is tantamount to failure in meeting our personal as well as organization goals.

HIV / AIDS IMPACTS ACROSS ALL ACORD’S THEMES

Due to its adverse effects on the productive age group, HIV and AIDS undermines livelihoods and food security of families’ and Communities.. The burden of care and support for those infected and affected by HIV and AIDS normally shifts to either the children or grand parents who can barely engage in productive activities. In many countries different sectors such as education, health as well as the private companies are unable to cope with the increasing demand created by the HIV and AIDS epidemic.

Conflict and civil strife often created by disagreements over control and access to power, land and other resources among groups; economic, cultural, religious or ethnic in nature, often presents a risk factor for HIV transmission. In situations of extremely violent conflicts, the resulting displacement of communities to live in concentrated refugee settlements leads to: disruption of social values and traditional norms; sexual abuse especially rape and defilement; increased economic strain whereby young girls and women resort to commercial sex activities as a livelihood strategy; as well as eroding the traditional coping and resilience mechanisms. In regions experiencing conflict in Sub Saharan Africa, there is evidence of high HIV and AIDS prevalence rates.
HIV and AIDS is to a big extent fuelled by existing unequal power relations especially in marginalized communities, linked to a combination of predisposing factors such as the economic status, levels of education and political affiliation among others. Within such communities the gender inequalities affect various groupings differently. For instance women and girls in Sub Saharan Africa are more vulnerable to HIV and AIDS due to cultural beliefs and practices that limit their access to resources, power, income, education and social services.

ACORD employees are susceptible to HIV infection and AIDS effects since most of them work

- Away from their families and partners;
- in locations and regions with high incidence;
- In areas of conflict where cases of sexual assault for female employees may not be ruled out.

At the organization level the need to address HIV and AIDS related stigma and discrimination within the work place cannot be over emphasized.

Management challenges associated with the HIV and AIDS epidemic include increased absenteeism due to ill health or death of relatives, heavy costs on medical insurance covers, loss of institutional memory as long service and experienced staff continue to die off, Increased costs of retraining and lowered staff morale, and increased strain on personnel among others.

Realizing that we cannot attain development and social justice in Africa in the face of a growing HIV/AIDS epidemic, ACORD has for the last 3 years developed a Pan Africa HIV/AIDS thematic Programme to contribute to a reduction in the spread of HIV, and strengthen the capacity of affected communities cope with the impact. As part of this process, ACORD has also realized that this can only be feasible if it has a workforce that is AIDS competent, operating in an institutional framework that recognizes and deals with HIV/AIDS as a key workplace issue. To this end, an organizational HIV/AIDS workplace policy has been developed as a reflection of its commitment to reduce susceptibility to HIV and vulnerability to the impact of AIDS on staff, their families and the organization; and the development of this information pack is part of a comprehensive process of operationalizing the workplace policy in order to build an AIDS competent organization.
ACORD’S SUMMARY POLICY¹

ACORD will:

- Provide information to employees on HIV/AIDS, its impact, preventative measures and living positively
- Ensure Post-Exposure Prophylaxis (PEP) treatment is available for “emergency interventions” in all locations
- Provide male and female condoms free to all staff wherever appropriate
- Implement non-discriminatory policies, procedures and practices in managing individuals with HIV / AIDS
- Make every reasonable effort to accommodate the needs of people with HIV/AIDS
- Protect the right to confidentiality on medical status of all staff
- Prohibit the compulsory testing or screening for HIV pre-employment or at any other time
- Facilitate access to confidential voluntary counselling and testing and HIV and AIDS support services wherever possible
- Provide medical benefits under existing medical and health policies and will review the feasibility of extending treatment to include ART provision for employees only

¹See detailed workplace policy to gain more insights into the key principles and components of the policy
Useful resources for accessing updated information on HIV and AIDS
(A wide range of useful information can be accessed on the website below are a few web sites where more information about the HIV and AIDS epidemic can be accessed.)

1. Reports on the global epidemic: www.unaids.org
2. UN programs and published papers on HIV and AIDS: www.undp.org
3. Putting AIDS on the Agenda ;Sue Holden: www.oxfam.org.uk
4. WHO General health and medical information: www.who.int
5. Global network of people living with HIV and AIDS
8. Global fund Information on Tuberculosis, Malaria and HIV and AIDS: www.globalfund.org