



Identify internal impacts within the Ministry or Department

Consider the following questions to help to identify where your Ministry may be vulnerable to impacts of employee infections. Review each of these areas of action and consider which may be relevant to your Ministry.

Suggested indicators are given in Chart 1 in the document *Planning Tools*.

- Complete a similar chart for areas that are relevant to your Ministry.
- Tick those areas where data may be useful for motivation or planning within your Ministry.

Numbers of HIV-infected employees

The scale of the epidemic will result in considerable human suffering for infected employees. In addition, the ability of some Ministries to fulfil their functions will be severely impacted.

Estimates of the size and spread of the epidemic are available from the Ministry of Health in most countries. It may be possible to use these estimates to develop a rough idea of how many Ministry employees are currently HIV- positive. You may need to obtain special projections of the expected scale of the epidemic in the future: growing numbers of people with HIV infections and AIDS can be expected in many countries. You can expect that some categories of staff will be disproportionately affected; these will include younger people, those who are mobile, such as migrants, and those who live in conditions of

social instability. Evidence suggests that skilled and wealthy people (mainly men) may have more opportunities for high-risk sex.

- What is the current level of infection?
- How many new infections are expected each year?
- What are future levels of infection, AIDS sickness and AIDS deaths likely to be?
- Which categories of employee may be exposed to particularly high-risk situations?

Absenteeism and productivity

Absenteeism due to illness, compassionate leave and funerals can impose large costs or inefficiencies on an organisation. HIV/AIDS in different categories of personnel may affect the Ministry in different ways. There may be people in key positions in the Ministry whom it would be difficult to replace in the event of illness or absenteeism. There may be key work processes that are particularly vulnerable to unanticipated low productivity or absence of personnel.

- Which work processes or occupations are particularly vulnerable to stoppages, absenteeism and difficulties replacing employees?
- Are there effective systems to monitor absenteeism and associated impacts?
- What are the kinds and levels of costs or inefficiencies associated with absenteeism?
- Would estimation of future costs of absenteeism be useful?
- Do attitudes and support mechanisms foster early disclosure of HIV status to allow forward planning?

This document is one in a series of pamphlets targeted at Government Ministries.

The aims are:

- to assist priority sectors to identify areas where they are vulnerable to the impacts of HIV/AIDS.
- to suggest specific steps that can be taken.

Recruitment and training

HIV/AIDS within the Ministry, as well as in wider society, may substantially deplete the skills-base through illness and death among trained personnel.

- What are the levels and trends in staff turnover?
- What are recruitment and training costs, and how significant may they become?
- Are training and recruitment efficiently designed to deal with pressures created by HIV/AIDS?
- Are systems in place for planning and monitoring around ongoing skills requirements?
- Can recruitment and appointment processes be streamlined to ensure timely replacement of ill workers?
- Which work processes within the Ministry are most vulnerable to AIDS impacts? What are potential skills shortages, where replacement staff may be hard to come by?

Morale

Increased illness and deaths among family, friends and colleagues may adversely affect employee morale.

- What impacts of HIV/AIDS on infected staff, their co-workers and their families may affect morale and productivity?

Benefits

Employee benefits that are likely to be affected by HIV/AIDS include medical insurance, sick and compassionate leave, loans, retirement, death and disability cover, and funeral benefits. For assessment of HIV/AIDS impacts on certain benefits e.g. pensions, expert opinion may be required.

- What are the expected impacts of HIV/AIDS on future claim levels and costs for:
 - medical insurance?
 - sick leave?
 - compassionate leave?
 - death and disability cover?
 - funeral benefits?
- Is there any evidence of increased claims on benefits as yet?
- Are there effective systems to monitor impacts on employee benefits?

- Have all options for restructuring benefits to make them sustainable and meet employee needs been considered?

Note: Collecting information on impact on absenteeism, and impact on benefits, may require the establishment of management information systems. What is needed is a way to track the impact over time.

Gender

HIV/AIDS tends disproportionately to affect women because of biological susceptibility and because they are often disempowered in sexual relations, socially and economically.

- What factors affect women staff members' ability to protect themselves from HIV infection?
- What factors affect women and men's ability to deal with their own illness or AIDS among household members?
- Are assessments and intervention strategies sensitive to the different needs and responses of men and women?

Capacity to respond

The Ministry's capacity to respond to employee infections is critical to reduce the impact of these infections. Capacity issues include appropriate dissemination of HIV/AIDS workplace policies, support services or employee assistance programmes, allocation of personnel and resources for HIV/AIDS issues and HIV/AIDS impact monitoring systems.

- Is there an HIV/AIDS policy in place?
- Is the current HIV/AIDS policy adequate to protect employees and the employer from unnecessary costs?
- Do line and other managers feel confident in applying the policy and managing HIV issues in the workplace?
- What services are available to support affected or infected employees?
- Have committees, teams and/or persons responsible for HIV/AIDS issues been identified? Do they have adequate expertise and resources?
- Are there effective systems to monitor impacts on employee benefits, absenteeism, and other costs?

Responses in areas of internal impact

Review each of the following areas of action and consider which may be relevant to your Ministry. Ensure the involvement of all relevant stakeholders in planning action responses. It will also be important to develop and disseminate an HIV/AIDS policy as this will help to guide response planning and implementation.

Suggested indicators are given in Chart 3 in the document *Planning Tools*.

- Complete a similar chart for areas that are relevant to your Ministry.
- Tick those areas where data may be useful for motivation or planning within your Ministry.

Prevention of new infections

- Implement effective workplace HIV prevention programmes that include:
 - treatment of sexually transmitted infections
 - condom distribution
 - provision of education and information
- Evaluate existing prevention programmes to identify any deficiencies.
- Strengthen workplace HIV prevention programmes if needed.
- Address situations that put employees at high risk of infection e.g. migrant labour, long periods away from home.
- Ensure prevention programmes target key workers and workers at high risk.

Absenteeism and productivity

- Consider appropriateness of adapting and re-organising work.
- Develop systems to incorporate HIV/AIDS impacts in human resource planning.
- Consider strategies such as multi-skilling, creating reserve pools of labour and overtime arrangements.
- Create an enabling environment that will facilitate early disclosure of HIV-positive status to allow forward planning and succession management.

- Develop performance appraisal systems to identify and manage impacts on productivity.
- Streamline recruitment and appointment processes to be most resource-effective if feasible; liaise with other appropriate Ministries to achieve this.
- Co-operate with the same Ministry in neighbouring countries to share sector-specific lessons.

Recruitment and training

- Include HIV/AIDS prevention as a part of all training initiatives; include training on HIV/AIDS impact management where appropriate.
- Consider HIV/AIDS in the design of training. Emphasise training which enables rapid payback of investment, such as in-service training and short-course programmes.
- Mobilise external training institutions to include HIV/AIDS prevention in training courses and to consider HIV/AIDS impacts in course design and numbers of student enrolments.
- Evaluate bursary and loan schemes for HIV/AIDS vulnerability and develop equitable ways to reduce HIV/AIDS impacts on sustainability and effectiveness.*

Morale

- Develop systems to provide support in the workplace for those infected and affected by HIV/AIDS.

Benefits

- Include personal financial planning and other planning issues in HIV education programmes.
- Revise employment frameworks to ensure that benefits are sustainable and equitable and meet the needs of employees and their dependents.
- Develop health care strategies to prolong productivity and quality of life.
- Encourage medical schemes to develop cost-effective treatment protocols and policies.
- Establish clear medical and functional criteria to define HIV/AIDS disability.

Gender

- Ensure that HIV/AIDS prevention programmes address the need for women's equality to negotiate safer sex.
- Educate all levels of staff in gender sensitivity.
- Ensure that no form of sexual harassment is tolerated in the workplace.
- Co-operate with other programmes that offer reproductive health education and services.

Capacity to respond

- Develop or review Ministry HIV/AIDS workplace policy to ensure that it is in line with HIV/AIDS policy in other government bodies and ethical standards.
- Conduct information campaigns for human resource and line managers on HIV/AIDS policy and other HIV/AIDS issues.
- Establish management information systems to track the impact of AIDS on the following at least:

- Absenteeism
- Sick leave
- Death in service
- Benefits.

- Identify persons responsible for HIV/AIDS responses within the Ministry and ensure that they have sufficient authority and capacity.
- Set up a dedicated HIV/AIDS committee to co-ordinate HIV/AIDS activities.
- Include HIV/AIDS as an ongoing agenda item in relevant management meetings.
- Network with persons/task teams in other Government Ministries.
- Insert HIV/AIDS as a line item in budgets, unless inappropriate.
- Make confidential contact points with management available for employees.
- Ensure contact details for counselling and support services are available and that these services are familiar with the Ministry's approach to HIV/AIDS.

* this is controversial and needs to be discussed with employee representatives.

The full Toolkit range:

Generic:

- Understanding HIV/AIDS
- Why HIV/AIDS is a Government Issue
- HIV/AIDS and Ministry Employees
- Planning Tools

Ministry and/or Department:

- HIV/AIDS and Agriculture
- HIV/AIDS and Education
- HIV/AIDS and Finance
- HIV/AIDS and Health
- HIV/AIDS and Housing and Public Works
- HIV/AIDS and Labour
- HIV/AIDS and Welfare

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