| Experience





Living with HIV in an HIV-negative workplace

The experiences of Phindile, a woman living with HIV in South Africa

Article produced as part of the KIC project

Living with HIV is not easy, especially if you are the only HIV-positive employee in an organization in which the rest of the staff are HIV negative or do not know their status. There is always a feeling of guilt and envy for not being negative like other workmates.

Whether they are on antiretroviral therapy or not, what HIV-positive employees need most is support by their colleagues. Unfortunately, colleagues often show more sympathy than support. This is not easily accepted by HIV-positive people because they eventually stigmatize themselves instead of being encouraged by the support. It is necessary for everyone in the organization to clearly understand how to treat an HIV-positive colleague. Both the HIV negative and positive need to know how and when to act to support and care for each other.

Ups and downs

As an HIV-positive employee I experience good and bad moments. There are times when I fail to cope physically. I sometimes experience unbearable headaches, sore eyes, running tummy/diarrhoea, nausea or just fatigue and it is during this time that I need a break from work. During these periods I feel physically able to perform only the least physical tasks. Trying to work when I am feeling like this worsens my situation. Often the only action that will help is going home to rest until I am ready to work productively again.

Emotionally, I sometimes feel low when I am sad, upset or even frustrated. It is hard to concentrate, be friendly and respond positively when someone tries to reach out and help. I feel guilty about this and do not want to burden my colleagues. HIV-positive people are likely to be more emotional than other people because of the

anger and frustration created through being sickly and the ever-present fear of death, rejection and shame.

I sometimes worry about my ability to meet work challenges. I wonder whether my colleagues have any confidence in my ability to fulfil my job requirements and I am afraid to let them down. At times it is not even easy to say no, to admit that I cannot undertake a particular task. However, this should not affect my colleagues' work in any way. Taking time off should not inconvenience or have a negative impact on the organization's work or my colleagues. As much as one does not plan to get sick, taking extra time off should be compensated for in some form. It's not easy though because whenever I am off sick, my body is at home

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but I keep thinking about what I should be doing at work. Yet I know that this does not help, because I should avoid any form of stress in order to be fit and ready to work again.

Some practical solutions

Policies/guidelines should be put in place to address such situations. In cases where someone is unable to perform under normal work routines, alternative work practices should be explored. A central issue is fatigue. This is an effect of antiretroviral treatment as well as a

Resources

Mainstreaming HIV/AIDS in practice.

A toolkit with a collection of resources, checklists and examples on CD Rom for SDC and its partners Swiss Agency for Development and Cooperation (SDC/DSC), 2004 (56 p.)



This toolkit offers a five-step approach to mainstreaming HIV/AIDS. The first three steps are linked to preparatory analysis of the situation and include: context and organizational analysis, analysing the impact of HIV/AIDS on what you do, and analysing the potential negative implications of what you do on HIV/AIDS. Step four is to develop a comprehensive Workplace Policy and Programme and step five is to plan and implement this policy.

www.deza.ch/ressources/deza product en 1280.pdf

Working positively:

A guide for NGOs managing HIV/AIDS in the workplace UK Consortium on AIDS and International Development, 2003 (26 p.)



This guide looks at the key issues involved in developing a workplace strategy and at how different NGOs and commercial companies are approaching these issues. It also provides a guide to the key components of a successful strategy and a list of useful reference documents.

www.aidsconsortium.org.uk/public.html

consequence of the normal course of living with HIV. There are some practical things that can be done to accommodate treatment regimes, e.g., having short breaks during extended meetings. This is important because one who is taking medication and antiretrovirals needs optimum absorption, balanced meals and plenty of rest.

Treatment regimes have a number of side-effects, which may be mild or need a little extra attention. For example, if I am having persistent headaches, fatigue, etc., reading or work that requires thorough thinking can be substituted by less taxing tasks. I am fortunate enough to be on antiretrovirals. It would have been very hard for my organization and I if this were not the case because drugs are a bit expensive and require continuous use. There is a need, though, for a medical aid scheme of some sort to cater for provisional needs such as visiting doctors.

It would also be important for the organization to have procedures on how to act in serious situations. I think basic First Aid training is needed to cater for HIV-related emergencies. For example, if I accidentally cut myself while on duty, blood will come out. With the First Aid kit (which should include latex gloves, etc.), someone can handle that instead of panicking or calling 911. This training, I think, would enable all staff to know exactly what to do while ensuring that they do not contract HIV.

Understanding the risks and dangers

The concern expressed is often that I present an infection risk to my colleagues and that precautions should be taken not to transmit HIV to them. While this is true, many people do not realize the danger they present to HIV-positive staff members. Having a cold or flu is considered to be a normal occurrence for most people. These are infections that we all have and get over. We are often not conscious of the fact that such common infections like this could be life-threatening to a PLWHA.

People in workplaces should talk to each other more. We need to, at a very practical level, understand what the risks and dangers of HIV in the workplace are. We also need to step into each others' shoes and build a conducive working environment that is healthy for all employees.

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