UNITE TO END HIV
A Abstain from casual sex
B Be faithful
C Consistent condom use
D Detect early

Guidelines on

Managing HIV in the Workplace



ntuc National Trades Union Congress

Health Promotion Board

SNEF

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MESSAGE FROM SNEF



SIM GIM GUAN
Executive Director
Singapore National Employers Federation

Dear Members,

The first case of HIV in Singapore was first reported in 1985. Whilst HIV did not reach epidemic proportions, the Singapore National Employers Federation (SNEF) initiated a committee in 1992 to look into the issue of HIV in the workplace. The SNEF Guidelines on Managing HIV in the workplace was first released in 1993.

With new developments and understanding on HIV, SNEF worked with the Health Promotion Board and Ministry of Health to update the guidelines in 2001 and 2011/12. The updated guidelines enable employers to better manage issues faced by people living with HIV at the workplace.

Since the last update in 2012, the number of new cases of HIV infections reported in Singapore had fallen from 437 cases in 2012 to [1]250 cases in 2021.

While more is being done to reduce the number of new cases, employers too have an important role to play as most of those infected with HIV are of working age. We want employers and their employees to better understand HIV, so that they recognise that employees with HIV can be just as productive if they receive proper treatment and the virus will not spread through close contacts. This would ensure that employees with HIV would be treated fairly at the workplace and could remain economically active.

We hope that the guidelines will help employers develop workplace programmes to raise awareness about HIV and manage it in the workplace.

SOURCE: [1] MOH | UPDATE ON THE HIV/AIDS SITUATION IN SINGAPORE 2020 (JUNE 2021) https://www.moh.gov.sg/resources-statistics/infectious-disease-statistics/hiv-stats/update-on-the-hiv-aids-situation-in-singapore-2021-(june-2022)#:~:text=There%20were%20250%20new%20cases,passed%20away%20over%20the%20years.

INTRODUCTION



The Guidelines on Managing HIV in the Workplace was last reviewed in 2011/2012 by the Ministry of Health (MOH), Health Promotion Board (HPB) and Singapore National Employers Federation (SNEF), with the introduction of a three-tiered approach.

In 2017, SNEF, in partnership with HPB and National Trades Union Congress (NTUC), developed an Implementation Guide for Managing HIV In the Workplace to supplement the existing guidelines. The Implementation Guide aims to highlight actionable recommendations that employers could take up easily.

In 2022, with new subsidies for HIV treatment and the changing epidemiology of HIV in Singapore, both the Guidelines on Managing HIV and Implementation Guide are being updated to provide employers with the latest findings and recommendations.

This guideline aims to provide a better understanding of HIV and also to provide workplaces with information to:

Change the stigma and discrimination surrounding HIV
Encourage early detection and treatment, and
Reduce the spread of HIV









KEY FACTS & FIGURES

Here are some numbers on the perceived level of stigma and discrimination toward HIV in the workplace, according to a survey[2] by SNEF conducted in 2021.

84%
of respondents
felt that there are moderate to high levels of discrimination towards people living with HIV at the workplace.



40% of them noted a high presence of stigma

94.9%
of companies
do not have any HIV-specific programmes or policies



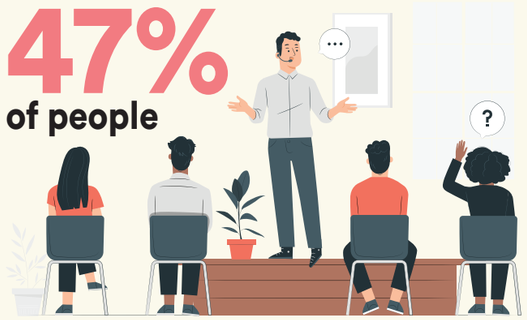
6 in 7 **respondents**



felt that general guidelines on managing HIV in the workplace are needed.

1 in 20 surveyed knows of HIV-specific programmes or policies available in their organisation.

47%
of people



surveyed cited worries about job implications arising from results as a top reason they are unwilling to go for early HIV tests.

Only about **3 in 10** of those surveyed note that HIV testing is available as an optional medical and health benefit in their organisation.





1 in 4
persons
is worried about the social stigma associated with HIV

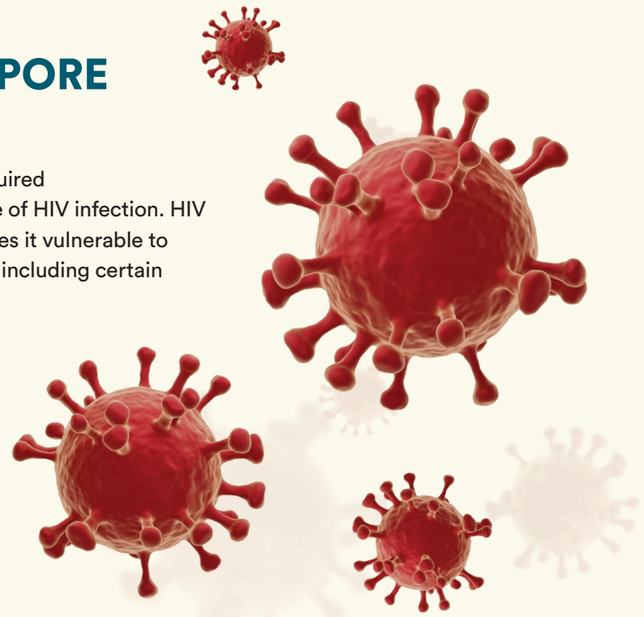
15%
stated that there is a lack of education and awareness about HIV testing



Some **2 in 3** **respondents**
felt that making HIV testing available by organisations would help encourage employees to test regularly

SOURCE: [2] SNEF survey on HIV at Workplace Guidelines & Implementation Guide, Nov 2021 (N=314)

01. HIV SITUATION IN SINGAPORE



What is HIV

Human immunodeficiency virus (HIV) is the virus that causes Acquired Immunodeficiency Syndrome (AIDS), which is the advanced stage of HIV infection. HIV infection damages the body's protective immune system and makes it vulnerable to other opportunistic infections and other HIV-associated diseases, including certain types of cancer.

Without treatment, HIV infection usually progresses to AIDS in 8 to 10 years. While there is still no cure for HIV infections, much progress has been made over the last few decades in the treatment of HIV. With proper treatment, a person living with HIV can expect a lifespan similar to individuals without HIV.

Mode of Transmission

HIV infection is preventable and is generally contracted outside of the workplace. In Singapore, transmission mainly occurs through unprotected sexual exposure to infected bodily fluids. Companies can educate their employees on preventing HIV infection as part of their usual workplace health initiatives.

There are 4 modes of transmission:

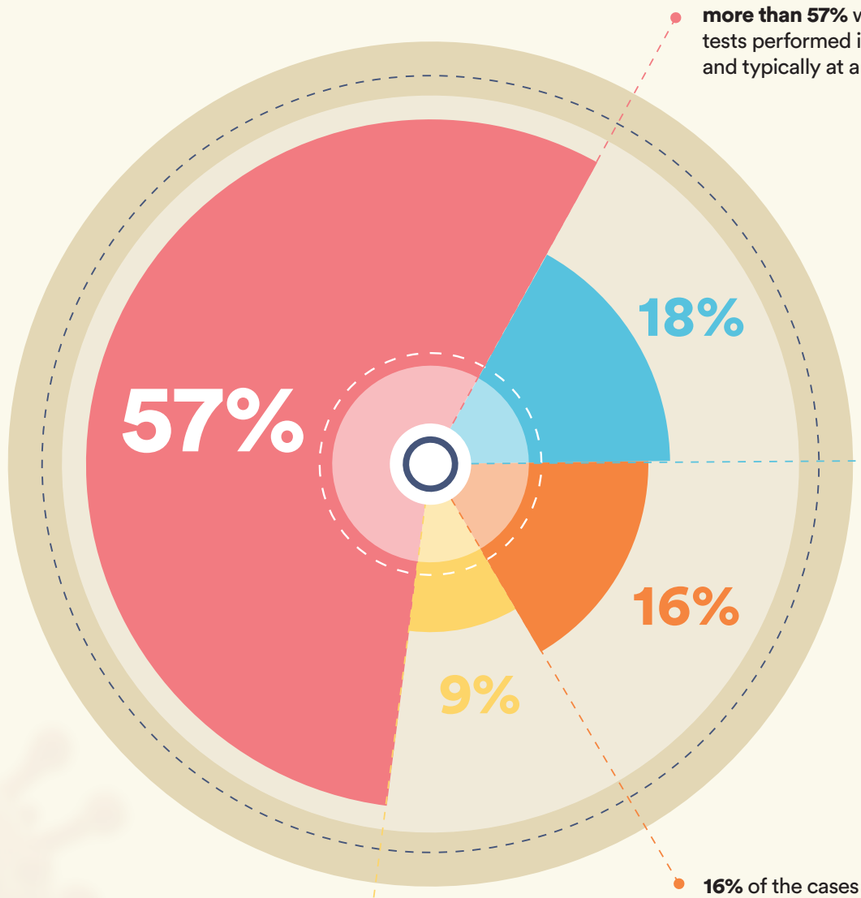
- Unprotected sexual intercourse with someone who is HIV-infected and not receiving treatment
- Receiving infected blood or blood products (though this is extremely uncommon in Singapore),
- Sharing of injection needles, and
- Pregnancy, delivery or breastfeeding if the HIV-infected mother is not receiving treatment.

HIV cannot be transmitted through:

- Coughing or sneezing
- Shaking hands, hugging or touching
- Mosquitoes, ticks or other insects
- Sharing of Toilet seats
- Swimming pools
- Saliva, tears and sweat
- Sharing of food and drinks
- Sharing of work surfaces and facilities

EPIDEMIOLOGY OF HIV IN SINGAPORE

Of the newly reported cases in 2021[3]



more than 57% were detected through HIV tests performed in the course of medical care and typically at a late stage of HIV infections

Another **18%** were detected during routine programmatic HIV screening

16% of the cases were detected through self-initiated HIV screening

The rest were detected through other forms of screening

There is no evidence to show that HIV has been transmitted in common workplace settings, and therefore no special precautions are needed to prevent HIV infection in the workplace other than providing a safe and healthy work environment.

Even in healthcare settings, where the likelihood of a healthcare worker being exposed to HIV-infected blood and fluids is generally higher, the risk of transmission remains low with proper precautions practised, thus it is rare to acquire HIV in such settings.

SOURCE: [3] MOH 2021 HIV STATISTICS
https://www.moh.gov.sg/resources-statistics/infectious-disease-statistics/hiv-stats/update-on-the-hiv-aids-situation-in-singapore-2021-(june-2022)#:~:text=There%20were%20250%20new%20cases,passed%20away%20over%20the%20years

CHARACTERISTICS OF ALL NEWLY DIAGNOSED SINGAPOREANS WITH HIV

Between 2015 to 2021[4], of the 2444 detected cases 96% of the HIV cases detected were transmitted through sexual contact while the other 4% were due to intravenous drug use, or were uncertain of the mode of transmission. There was no case of perinatal transmission or transmission through blood transfusion.

PEOPLE NOTIFIED WITH HIV BETWEEN 2015 - 2021

94%
male

of whom
74% single
18% married
8% divorced or widowed

6%
female

of whom
19% single
52% married
29% divorced or widowed

TESTING

At the early stage of HIV infection, there are often no symptoms, making it difficult to spot clinically. Testing is often the only way to know if a person has an HIV infection.



HIV testing involves either a quick oral swab or a blood test.





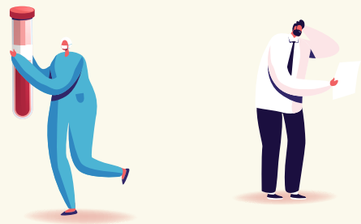


These tests can be administered at any GP clinic, polyclinic, hospital or anonymous HIV test site.

HIV testing is also offered to all pregnant women as part of routine antenatal screening on an opt-out basis.

At the workplace, HIV testing should not be required of job applicants or of persons in employment. If an HIV test must be done, it should be with the consent of the employee free from social pressure.





SOURCE: [4] MOH (2021) Annex A
https://www.moh.gov.sg/docs/librariesprovider5/default-document-library/annex-a---wad-202124953d6accd8479e94be20d606f0bd59.pdf

TREATMENT

Today, there are good treatment regimens[5] available to people living with HIV which can suppress the replication of virus in the body. In seeking treatment early and remaining adherent to treatment, people living with HIV can go on to lead many more years of active, productive lives after their diagnosis.

Voluntary periodic blood testing for HIV infection by those at increased risk of infection would allow for early detection and treatment, thus helping to curb the spread of the infection.

Cure

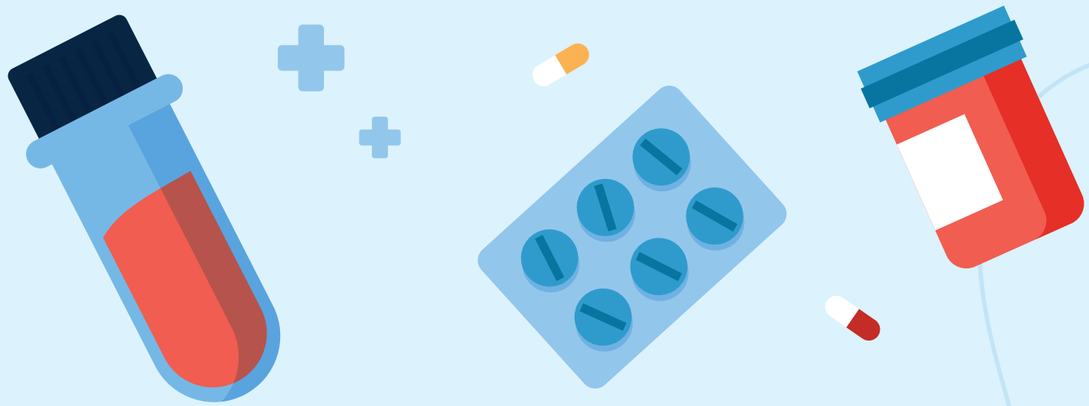
HIV can be treated, but currently cannot be cured.

Although there is no cure for HIV, there have been major advances in therapeutics that render HIV infection a manageable chronic health condition. This enables most people living with HIV to have near normal life expectancies.

HIV Prevention

HIV prevention and education form the core strategy of Singapore's HIV control. It is based on the four key principles of "ABCD". That is, "A" - Abstinence from casual sex, "B" - Being faithful, "C" Correct and Consistent condom use, and "D" - early Detection and treatment for viral suppression. Persons at higher risk of HIV (e.g. those who have engaged in unprotected intercourse with multiple partners) are encouraged to go for regular testing, so that any infection can be detected and treated early.

Today, there are good treatment regimens available to people living with HIV which can suppress the replication of virus in the body. In seeking treatment early and remaining adherent to treatment, people living with HIV can go on to lead many more years of active, productive lives after their diagnosis.



SOURCE: [5] MOH (2019)
https://www.moh.gov.sg/news-highlights/details/education-and-outreach-measures-on-hiv-infections#:~:text=That%20is%2C%20%E2%80%9CA%E2%80%9D%20%2D,%E2%80%9D%20%2D%20early%20detection%20and%20treatment.

ANTIRETROVIRAL THERAPY (ART)

Antiretroviral therapy (ART) is an effective treatment for HIV. It involves taking a combination of HIV medicine every day. ART is recommended for all people who are infected with HIV. Although ART cannot cure HIV, it can control the virus and help people with HIV live longer, healthier lives. ART can also reduce the risk of HIV transmission; however, it does not prevent transmission of other sexually transmitted infections (STIs).



Treatment as Prevention (TasP)

When people living with HIV take ART as prescribed, their viral load will often become suppressed and reach a level at which, under regular follow up, the viral load becomes undetectable (<50 copies/ml). People living with HIV who have undetectable viral loads have effectively no risk of transmitting HIV to others. Thus, early detection and treatment serves both to dramatically improve health outcomes for people living with HIV and to prevent onward spread.

While ART has proven highly effective in treating people living with HIV, the cost of treatment can be prohibitive. However, with more subsidies available, the cost of antiretroviral drugs has reduced substantially.



ART is required to be taken on a regular basis and it is important that the regimen is adhered to. People living with HIV also need to have medical check-ups 2 – 4 times a year to ensure the range of medication is still effective in suppressing their viral load while managing any side effects. Additionally, people living with HIV should also receive up-to-date vaccinations such as the annual influenza vaccine and ensure their other regular vaccinations are up to date per the National Adult Immunisation Schedule (NAIS) to guard against opportunistic infections.

After the onset of AIDS, managing opportunistic infections is more challenging thus, early detection and treatment of HIV is key.

Pre-Exposure Prophylaxis (PrEP) & Post-Exposure Prophylaxis (PEP)

PrEP & PEP are treatment plans for people who are at a high risk of HIV transmission but are currently negative for HIV.

PrEP is an antiretroviral medication to prevent HIV infections. It is mainly used by individuals who do not have HIV but are at high risk of HIV infection. It is not a substitute for other HIV prevention methods such as consistent condom use which is still important to prevent other sexually transmitted infections (STIs).

PEP refers to the use of antiretroviral drugs to reduce the chance of HIV transmissions after a recent single high-risk exposure. PEP should be used only in emergency situations and must be started within 72 hours after a recent possible exposure to HIV. For example. if a healthcare worker is accidentally pricked by a used needle, he/she would likely be given PEP as a precautionary measure.

Those who wish to use PrEP[6]/ PEP should see their doctor to be assessed for their suitability to be prescribed the drugs.

SOURCE: [6] PREP
https://www.ncid.sg/About-NCID/OurDepartments/Pages/National-HIV-Programme.aspx

SUBSIDIES

People living with HIV may apply for subsidies to offset the cost of treatment.

Funding for treatment includes

Government Subsidies:

50 to 75 percent off 16 types of antiretroviral drugs used for the treatment of HIV for eligible residents.

MediSave:

Fees can be offset by MediSave account.

TREATMENT AND SUPPORT CENTRES

National Centre for Infectious Diseases (NCID)

The National HIV Programme (NHIVP) was established under the National Centre for Infectious Diseases (NCID) to coordinate this country-wide HIV response. Through a multidisciplinary approach, the NHIVP collaborates with clinicians and healthcare professionals, public health practitioners, academics and other stakeholders.

In line with the Ministry of Health's objectives to end HIV in Singapore, the NHIVP will:

- Coordinate the formulation and recommendation of evidence-based guidelines on HIV testing, prevention, treatment and patient management;
- Monitor HIV trends in Singapore by working with the National Public Health Epidemiology Unit (NPHEU) to conduct national epidemiological surveillance of HIV and sexually transmitted infections (STIs);
- Provide enhanced training to healthcare professionals to strengthen their competence and confidence in the management of patients with HIV; and
- Develop HIV education campaigns to increase awareness and reduce related stigma in the general population.

Department of Sexually Transmitted Infections Control (DSC) Clinic

DSC Clinic is a specialist outpatient clinic for the diagnosis, treatment and control of Sexually Transmitted Infections (STIs) in Singapore, including HIV. The DSC Clinic is funded by the Ministry of Health Singapore providing services at an affordable rate.

Action for AIDS (AfA)

AfA is a non-governmental organisation dedicated to fighting HIV infection in Singapore. Action for AIDS's Coordinated Care provides support and care and also organises support group activities and empowerment workshops for newly diagnosed and/or person living with HIV into their support systems.

02. HIV AT THE WORKPLACE

Stigma & Discrimination

HIV should not affect one's employability. People diagnosed with HIV cite concerns about real and perceived workplace stigmatisation and discrimination when it comes to their employability. People living with HIV share their perspective:



RICHARD (EMPLOYEE)
Senior Engineer
Person Living with HIV



Prejudice and stigma towards people living with HIV at workplaces persist. Employment should be based on merit. Employees should not be discriminated against due to medical conditions, but be considered fairly based on their abilities.

Stigma and discrimination at the workplace are key contributing factors affecting the emotions and morale of people living with HIV. The availability of resources to help them manage their mental health makes it easier for them to care for their own well-being.

Employers may help their employees feel supported by creating an inclusive and supportive work environment. With less worry of any backlash, individuals at risk may be more encouraged to come forward and be tested early for HIV, and those diagnosed with HIV to be more willing to seek prompt treatment. They can then work and live better, and keep their mental wellness in check.

WORKPLACE SAFETY AND HEALTH

People living with HIV should not be treated differently at work as the modes of transmission are not applicable in normal workplace settings.

In such settings, employees should follow universal workplace standards, take necessary precautions and use personal protective equipment such as gloves, masks, goggles and gowns as appropriate, to prevent accidental contact of contaminated blood or fluids with the skin, eyes or mucous membrane.

Employers should comply with the Ministry of Manpower's Workplace Safety and Health Act (WSHA), which requires stakeholders to take reasonably practicable measures to ensure the safety and health of persons at the workplace.

Mental Health

Mental health refers to a person's overall emotional, psychological, and social well-being. It affects how people think, feel, and act.



Globally, an estimated

264 million people suffer from depression

with many also dealing with symptoms of anxiety. A recent World Health Organization-led (WHO)-led study estimates that depression and anxiety disorders cost the global economy some US$ 1 trillion each year in lost productivity.[7]

Situations that may contribute to mental health issues of people living with HIV include:

Difficulty in telling others about their HIV diagnosis → Stigma and discrimination associated with HIV → Loss of social support and resulting isolation → Difficulty in getting access to mental health services

People living with HIV, as well as those at risk, may face periods of mental distress, which in the long term leads to depression. This forms one of the key barriers as to why they might choose to delay seeking health support or accessing treatment.

SOURCE: [7] WORLD HEALTH ORGANISATION (2020)
Mental health in the workplace. https://www.who.int/teams/mental-health-and-substance-use/promotion-prevention/mental-health-in-the-workplace

03. THREE-TIER APPLICATION OF RECOMMENDATIONS

A three-tier approach provides practical steps that employers may adopt and implement in the workplace.

This is aligned with the Social-Ecological Model for HIV, empowering and supporting people living with HIV and persons at risk in the community.





Tier 1: Implementing Workplace Education

Objective: Integrating HIV education into workplace health initiatives

There is a lack of understanding on the subject of HIV and many misconceptions remain about the topic. Providing relevant information and training mitigates fear while giving employees the knowledge and tools to handle themselves well in the workplace in relation to HIV matters.

Tier 2: Achieving a Supportive and Inclusive Workplace Environment

Objective: Enhancing leadership knowledge and ensuring confidentiality

A supportive environment helps create a culture of empowerment, trust, care, respect, and shared beliefs among employees. Knowing, understanding and feeling that they belong to the work community provide people living with HIV with a sense of security and comfort. This has a positive impact on their mental health and overall wellness.



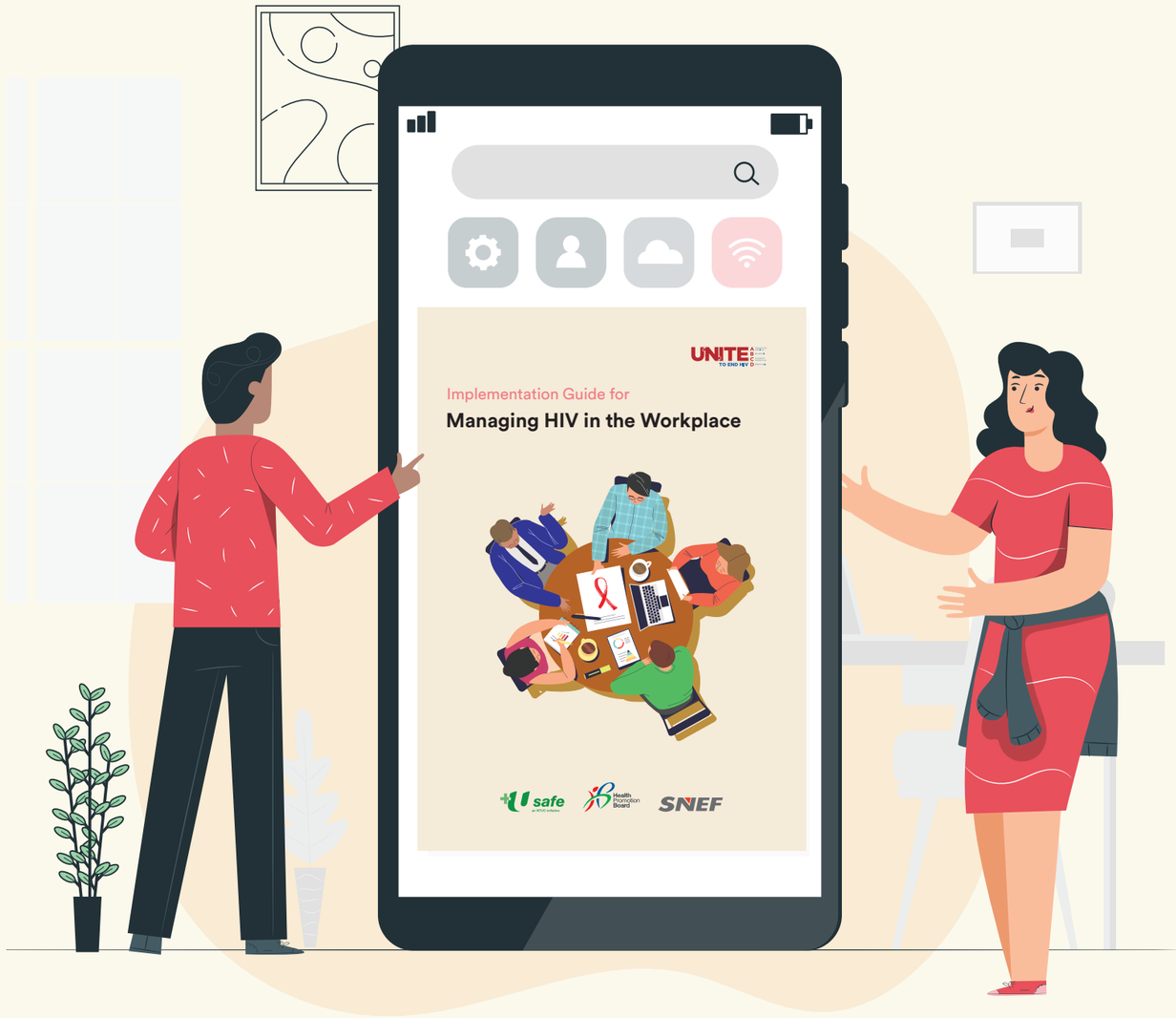


Tier 3: Establishing Workplace Policies

Objective: Establishing workplace policies that promote equality

Workplace policies formalise the approach of the organisation and provide guidance for decision-making at all corporate levels. They demonstrate and enforce the organisation's attitudes and commitment to eliminating discrimination toward people living with HIV.

PUTTING THE THREE-TIER APPROACH INTO ACTION



SCAN QR CODE

To view an implementation guide to see how this three-tier approach can be put into action at the workplace.

https://snef.org.sg/WID/HIVImplementationGuide2022.pdf

04. CONCLUSION

Increasing awareness and education on HIV at the workplace would reduce the stigma and discrimination around HIV and people living with HIV. It will in turn lead to more persons at risk of HIV infection being willing to be tested, and with early diagnosis and treatment, reduces the spread of HIV.



05. RESOURCES

Organisation	Services	Contact Details
Action for AIDS	Advocates for people living with HIV and provide testing, support and care.	**Tel:** 6254 0212 **Email:** info@afa.org.sg | support@afa.org.sg **Website:** www.afa.org.sg
Health Promotion Board	Provides general information about HIV.	**Tel:** 1800 225 4482* **Email:** hpb_mailbox@hpb.gov.sg (Attention: Communicable Diseases Department) **Website:** https://go.gov.sg/preventhiv
Ministry of Health	Determines key government policies and strategy for HIV.	**Tel:** 6325 9220 **Website:** www.moh.gov.sg
Ministry of Manpower (OSHD)	Determines key government policies on safety and health at the workplace.	**Website:** www.mom.gov.sg
National Centre for Infectious Diseases (National HIV Programme)	Leads the national HIV programme.	**Tel:** 6256 6011 **Email:** contact@ncid.sg **Website:** www.ncid.sg/Pages/default.aspx
National Trades Union Congress	Advocates on employee matters.	**Website:** www.ntuc.org.sg
National University Health System		**Website:** www.nuhs.edu.sg
Singapore General Hospital		**Website:** www.sgh.com.sg
	Advocates for fair employment practices.	**Website:** www.tal.sg/tafep
Tan Tock Seng Hospital	One of the key on-ground organisations supporting the fight against the HIV epidemic.	**Tel:** 6256 6011 **Email:** contact@ttsh.com.sg **Website:** www.ttsh.com.sg

*Kindly note that airtime charges apply for mobile calls to 1800 service lines and calls are free of charge only if made from regular land lines.