



Joint United Nations Programme on HIV/AIDS

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UN SYSTEM STAFF AND THEIR DEPENDANTS LIVING WITH HIV/AIDS

**KEY STEPS IN ESTABLISHING LOCAL HIV/AIDS CARE AND SUPPORT
FOR UN STAFF AND THEIR DEPENDANTS**

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Introduction

The growing HIV/AIDS epidemic is slowly starting to take its toll among United Nations staff, especially national staff in programme countries. Recent estimates by the UNAIDS Secretariat indicate that world wide as many as 3000 UN staff members and their dependants could be infected with HIV. Precise statistics are difficult to obtain since HIV positive staff are not commonly revealing their status to the organisation in fear of stigma, discrimination and possible loss of employment.

The United Nations personnel policy on HIV/AIDS was established in 1991. Most of the organizations in the UN system have adopted the policy (ACC decision 1991/10 "Principles and Strategies regarding the Impact of HIV/AIDS on the United Nations Personnel and Operational Policy), or developed a policy of their own. The UN policy states the responsibilities of the organizations including providing the staff with

1. updated information, education and other preventive health measures to enable the staff to protect themselves from HIV infection and to cope with the presence of AIDS;
2. voluntary testing with pre- and post-counselling and assured confidentiality;
3. terms of appointment and service which state that fitness to work is the only medical criteria for recruitment and continuation of employment, and
4. health insurance benefits programmes, which will be made available to all UN employees regardless of their HIV status.

The urgency to address the needs of UN staff and their dependants living with HIV/AIDS was reiterated by the Administrative Committee on Coordination (ACC) under the chairmanship of the UN Secretary General in April 2000 in Rome. The ACC agreed that high priority should be given to ensuring adequate insurance coverage and access to care for all UN staff, regardless of category. The ACC requested the UN system organisations to support the implementation of local HIV/AIDS care and support projects for UN staff and their dependants in a further 10 countries in which there are high concentrations of UN staff and a high prevalence of HIV/AIDS.

In response to the ACC request, this document aims to outline the key steps in developing local HIV/AIDS care and support programmes for UN staff and their dependants. The steps provide a generic framework to be adapted and prioritized for local conditions. Though they are presented in an order of priority, many of them can be implemented concurrently.

The leadership of the UN Resident Coordinator and the UN Theme Group on HIV/AIDS in the country is crucial in establishing a climate of trust and understanding free of fear for stigma, discrimination and loss of employment. As one of the first activities the UN Resident Coordinator may wish to appoint a **Focal Point** for the local HIV/AIDS care and support for UN staff and dependants.

KEY STEPS IN ESTABLISHING LOCAL HIV/AIDS CARE AND SUPPORT FOR UN STAFF AND THEIR DEPENDANTS

I. Information, awareness raising and prevention

Purpose: To provide staff and their families updated information, education and other preventive health measures to enable the staff to protect themselves from HIV infection and to cope with the presence of AIDS.

Partners: UN Resident Coordinator, UN Theme Group on HIV/AIDS, Staff Associations, UN Medical Services, UN Medical Dispensaries, NGOs, Groups of People Living with HIV/AIDS

Proposed Activities:

1. Local UN system wide distribution of the booklet "AIDS and HIV Infection. Information for United Nations Employees and Their Families". Available in English, French and Spanish at the UNAIDS website at the address

http://www.unaids.org/publications/documents/sectors/workplace/JC202-UN-Staff-E_Revision.pdf
http://www.unaids.org/publications/documents/sectors/workplace/JC306-UN-Staff-F_Revision.pdf
http://www.unaids.org/publications/documents/sectors/workplace/JC307-UN-Staff-S-Full_Revision.pdf

2. Local UN System wide HIV/AIDS awareness raising programmes on HIV prevention and discrimination issues based on the UNDG Technical Task Group training materials. Training also in local languages.
3. Stigma reduction activities (e.g. sensitisation groups, lectures, field visits - with staff and families)
4. Publication and dissemination of health insurance entitlements
5. Provide and keep up-to-date information on
 - confidential counselling and testing services available
 - medical facilities/institutions experienced in handling HIV care
 - websites providing information, guidance and support
6. Provide staff with information on policies and procedures for keeping HIV-related information secure and confidential
7. Provide supply of condoms to staff and brief staff and their families in proper use
8. Provide contract and recruitment advice for People Living with HIV/AIDS (PLWA)
9. Post Exposure Preventive (PEP) Treatment and briefing on security prevention of sexual assault
 - Reinforce awareness of and keep up-to-date, following inter-agency consultation, country Post Exposure Prophylaxis (PEP) Treatment Emergency Protocol to ensure the efficient and effective response to any incident involving potential exposure to the HIV virus

- Provide briefing on security prevention on sexual assault for both men and women including information on entitlements and benefits.
10. Provide staff with information on where safe blood can be obtained and information on the WHO Travel Kits including where they can be obtained

II. Mapping the existing situation and available resources in the country

Purpose: To gain required data on numbers of staff and facilities available to assess the needs and start implementing local HIV/AIDS care and support programmes for UN staff and their families

Partners: UN Resident Coordinator, UN Theme Group on HIV/AIDS, UNAIDS Country Programme Advisers, UN Medical Services, WHO Resident Representatives, (may require local consultants for mapping)

Proposed Activities:

1. Encourage UN medical services to collect data on PLWHAs and numbers making medical claims for reimbursement maintaining confidentiality;

Collect data on:

2. Nature and content of staff training to date on HIV, and needs for staff information and training on HIV/AIDS awareness, services, health insurance entitlements, recruitment and conditions of employment, Post Exposure Prophylaxis, condoms, stigma and discrimination, safe blood and travel kits.
3. Facilities available for Voluntary Counseling and Testing (VCT) and clinical care, follow-up counselling and psychosocial support
4. Laboratories
 - Identification of reliable labs for serology (toxoplasmosis, cryptococcus, etc.), virology (CD4/8, HIV)
 - Procedures for secure, confidential information management across all facilities
 - Availability of trained lab technician(s)
 - Testing for use of antiretrovirals
5. Medical treatment facilities and availability of drugs
 - Available out-patient and in-patient facilities
 - Mother-to-child transmission (MTCT) and ANC
 - TB and sexually transmitted diseases (STDs)
 - Reliable routes for drug supply
 - Essential drugs for opportunistic infections
 - Availability of Antiretrovirals in country
6. Access to reliable healthcare facilities/professionals who can assist and advice on use on drugs, provide ongoing physical monitoring and psychosocial support
7. Existing procedures for medical evacuation to receive HIV/AIDS related care in order to uniform the practise.

III. Ensuring confidentiality and secure information management

Purpose: To create an environment in the UN workplace free of fear and stigma to encourage staff and their families to seek HIV/AIDS information, care and support.

Partners: UN Resident Coordinator, UN Theme Group on HIV/AIDS, UN Medical Services, Heads of Administration and Human Resources in UN system organizations, Staff Health Insurances, members of local network providing HIV/AIDS services.

Proposed Activities:

1. Review current procedures and identify obstacles to confidential information management; existing procedures of handling medical communication and information storage, sick leave monitoring, processing of medical insurance entitlements
2. Revise and implement (where necessary) confidential protocols for medical information management, assessment and payment of claims for medical reimbursement and sickleave reporting
3. Review current procedures and implement (where necessary) confidential protocols for medical information storage and management across all HIV/AIDS services
 - Laboratories
 - VCT
 - Health care facilities
 - UN Medical Dispensary
 - Personnel
 - Administration
4. To train staff, UN Dispensary Physicians, UN Examining Physicians, personnel administrators and health insurance administrators on confidentiality and secure information management

IV. Establishing a network of treatment facilities - voluntary counseling and testing (VCT), laboratories, and medical care.

A. Network of Facilities

Purpose: Provide confidential up-to-date quality HIV/AIDS information, care and support to all UN staff and their families

Partners: UN Medical Services, UN Medical Dispensaries, UN Examining Physicians, community-based VCT services, medical treatment centers (in- and out-patient), laboratories, drug distributors and pharmacists, staff care focal point, (may require consultant support to implement)

Proposed Activities:

1. Selection of key partners
2. Establish procedures for confidential referrals and information management
3. Training of counsellors, laboratory technicians, local physicians and UN Medical Dispensary physicians in confidentiality, information management and coordination of HIV/AIDS care.
4. Regular meetings (? 3/12) of key partners to review
5. Disseminate information to all staff and families on the network (who and where to go)
6. Monitoring and evaluation
 - involving the UN Medical Dispensaries in overseeing confidentiality and quality of VCT and psychosocial services, laboratories and medical care facilities.

B. Access to drugs

Purpose: To ensure access to drugs and drug information of interest to PLWA, to all UN staff and their families.

Partners: UN Medical Dispensaries, drug importers/distributors, pharmacies and drug counselling centers.

Proposed activities:

1. Verify availability and cost of the complete list of drugs of interest to PLWA. This list is available in the UNAIDS Technical Update "Access to drugs".
2. Verify continuous availability of
 - 2.1. Drugs for palliative and supportive care, lower cost opportunistic infections, STD prevention and treatment;
 - 2.2. Post Exposure Prophylaxis with the antiretroviral drugs zidovudine (ZDV) and lamivudine (3TC);

- 2.3. HIV related cancers;
 - 2.4. Prevention of Mother-to-Child transmission and alternate for breastfeeding;
 - 2.5. TB treatment;
 - 2.6. Prevention of opportunistic diseases among HIV infected people; isoniazid prophylaxis to prevent TB, and cotrimoxazole for various other opportunistic infections;
 - 2.7. Anti-retroviral combination therapy for control of viral replication in HIV infected people.
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3. If drugs are not available locally, to import temporarily through UN channels, to raise the interest of local for-profit or not-for-profit organization to import and distribute.
 4. All drugs should be available at the same dispensing point (e.g. an accredited pharmacy) to avoid breaking confidentiality. Establish a third party billing system for the HIV drugs in order to allow easy and affordable access, and to protect confidentiality.
 5. Train/inform UN Dispensaries, care network members, pharmacists in HIV drugs and information management.
 6. Inform UN staff and their families on the procedures.

V. Monitoring and developing health insurance/social security schemes and contractual conditions

Purpose: To ensure adequate insurance coverage and access to care to all UN staff, regardless of category.

Partners: UNAIDS, CCAQ(PER), UN Medical Services, Heads of Administration and Human Resources in UN system organizations.

Proposed Activities:

1. At global level, the CCAQ (PER), in cooperation with UNAIDS and other partners is currently reviewing the various medical insurance schemes for UN system staff. On the basis of a comparative study on medical insurance schemes for national staff within the UN system and current data on the number of HIV-positive staff and their dependants, the CCAQ is requested to present to ACC at its Fall 2000 session proposals for improving and harmonizing medical insurance coverage for national staff within the UN system.
2. Encourage organizations to look into the matter of contractual status of the staff and to ensure that all staff and their families are covered by the medical insurance scheme.
3. At country level, disseminate information on health insurance entitlements available to staff and their families.
4. Train administrative and personnel staff in management of health insurance/social security schemes.

VI. Monitoring and evaluation of the implementation of the activities

Purpose: To ensure and expand high quality HIV/AIDS care and support to UN staff and their families.

Partners: UN Resident Coordinator, UN Theme Group on HIV/AIDS, UN Dispensaries, network of partners.

Proposed Activities:

1. Communicate the name and contact information of the Focal Point to the UNAIDS Secretariat for information sharing purposes.
2. Record keeping on numbers of staff and dependants attending for HIV care and support under the local HIV/AIDS care and support for UN staff and dependants - arrangement
3. Implementing staff training exercises
4. Monitor drug availability and issues affecting supplies to staff
5. Monitoring costs of the HIV related care and support activities for UN staff and dependants, including details on costs of HIV related drugs.
6. Reviewing project coherence - issues arising and obstacles to access to care

Annex 1: List of Reference materials

Access to drugs, UNAIDS Technical Update, UNAIDS, 1998

AIDS and HIV Infection. Information for United Nations Employees and Their Families, UNAIDS, 1999

Caring for carers, UNAIDS Case Study, UNAIDS, 2000

Facilitation Guide: AIDS and HIV Infection. Information for United Nations Employees and Their Families, UNGG Technical Task Group on HIV/AIDS, 1999

Principles and Strategies regarding the Impact of HIV/AIDS on the United Nations Personnel and Operational Policy, ACC decision 1991/10

Tools for evaluating HIV voluntary counselling and testing, UNAIDS, 2000

Voluntary Counselling and Testing (VCT), UNAIDS Technical Update, UNAIDS, 2000