

**HOSPERSA maintains that a HIV-TB prevention disaster is in full progress amongst the health workforce. This lies squarely at the failure of Government to provide Occupational Health Protection , a fundamental right of health care workers.**

- South African Health Care workers deliver the biggest HIV program in the world. Of the global figure of 36.7 million HIV positive persons, South Africa has the largest epidemic , and accounts for 19 % of global infections , with just over 7 million South Africans being HIV positive. South Africa also has the biggest Anti Retroviral Treatment (ART) programme with 3.4 million people on treatment. Sadly , despite this massive country testing and treatment programme , we are losing the battle in terms of prevention and SA's new infections still account for 15% of all new infections globally and 11% of all global deaths.
- As we reflect on the country's progress this World Aids Day, we must spare some thought for the health workforce who are the real story behind these massive global figures. Whilst HIV remains our biggest country programme, it is one of many other health priorities that the health system has to address, within a desperately under-resourced and understaffed Public health system.
- HOSPERSA is extremely disappointed , and we believe that the Department of Health , is in dereliction of its fundamental occupational health & safety duties , to a workforce who is delivering such a global recognised programme. Despite the World Health Organisation identifying the huge risks faced by health care workers in relation to contracting HIV and particularly TB during the course of their work, the South African health ministry is in gross violation of the Occupational Health & Safety Act . and in fact does not have a National health and safety policy for its workforce. Whilst our National Strategic Plan for HIV, STI's and TB 2017-2022 also identifies the high risks faced by Health care workers by listing them as a key population for TB , there is still gross violations and neglect of responsibilities by the Department of Health in relation to protecting its workforce. Despite health workers being 8 times more at risk of contracting TB than the general population , again , the Ministry of Health has failed to develop a National TB infection Control policy for the health workforce.
- HOSPERSA has addressed our frustrations and concerns on these matters with the National Ministry of Health in a meeting with the Director General and her Management team of around 100 managers, on the 3 October 2017. The Director General acknowledged the Department's lack of Occupational Health & Safety Policy , and the TB crisis , and promised a swift response to Hospersa calls for an emergency task team to address these issues. Sadly, two months later and we are still awaiting a process to develop such a policy.
- Whilst SANAC promotes a prevention revolution , we believe that SANAC too has dismally failed Health Care Workers as an identified key population for TB.
- So this WAD , HOSPERSA has nothing to celebrate, but rather to note the gross violation and neglect of responsibility in terms of preventing HIV and TB transmission for around 300 000 health workers , employed in the public health service. We still have health workers who are injured and exposed to dangerous blood or bodily fluids daily because of poor or non existent health and safety programmes. Even worse ,after a health worker is injured in the neglectful system , the Health Department provides

them with a very toxic drug , that makes them very ill ( Trivada ) as a protective measure ( post exposure prophylaxis) Health workers who may earn more , choose to buy the drug with less side effects ( Dolutegravir ) in order to protect themselves without the terrible side effects. Since health workers are already in short supply , should the State not provide the protective drug with less side effects so that workers can return to duty sooner ? After the second or third needlestick or exposure to dangerous blood and bodily fluids, many health workers avoid the prophylaxis and expose themselves to possible infection with HIV. In other countries, risks for needlestick injury is reduced amongst the health workforce by using retractable or safe needle devices , and option for less invasive surgical procedures to reduce risk of HIV infection. These considerations are grossly lacking in South Africa even though the risks are at disproportionately high levels.

- Many nurses contract TB at work, and miss early diagnosis as there is no routine testing for them, nor access to an appropriate occupational health service . For those who so contract TB they endure a dismal compensation process and system, which only compensates for pulmonary TB ( Lung TB ) and fails to compensate for a common TB amongst health workers, i.e. Extra Pulmonary TB (TB outside of the lungs ) The States dereliction of its Occupational Health & Safety duties, worsens further as thousands of unpaid volunteers and community health workers who render HIV services, also have limited access to occupational health services.
- HOSPERSA remains committed to confronting this deep violation, and through our federation , FEDUSA , will be in a March in Cape Town on the 5<sup>th</sup> December 2017, to demand Occupational Health & Safety protection for workers in the health sector. HOSPERSA is also Mobilising support of NGO's and organisations committed to the cause of workers safety to consider the plausibility of litigation. HOSPERSA will also approach SANAC to make good on its National Strategic Plan for health workers.