

August 2009



Working with

**HIV**

**A summary of NAT's HIV employment research**



**NAT is the UK's leading charity dedicated to transforming society's response to HIV. We provide fresh thinking, expert advice and practical resources. We campaign for change.**

## Contents

03	Foreword
04	Introduction
05	Working with HIV
06	Impact of HIV
10	Disclosure
14	Rights
16	Adjustments
18	Discrimination
20	Redress
22	Recommendations
23	Acknowledgments

# SHAPING ATTITUDES CHALLENGING INJUSTICE CHANGING LIVES

## Our vision:

Our vision is a world in which people living with HIV are treated as equal citizens with respect, dignity and justice, are diagnosed early and receive the highest standards of care, and in which everyone knows how, and is able, to protect themselves and others from HIV infection.

## Our strategic goals:

All our work is focused on achieving four strategic goals:

- effective HIV prevention in order to halt the spread of HIV
- early diagnosis of HIV through ethical, accessible and appropriate testing
- equitable access to treatment, care and support for people living with HIV
- eradication of HIV-related stigma and discrimination.

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# Foreword by Jonathan Elford

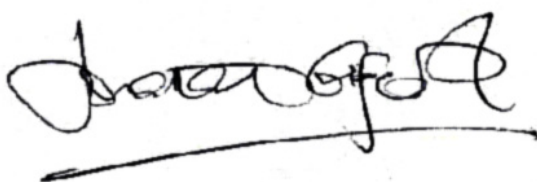
I am delighted to introduce NAT's report, *Working with HIV*. The origins of this report can be traced back to research carried out in north east London where, with colleagues, I examined the social and economic circumstances of people living with HIV in London.<sup>1</sup> This study found that nearly half the respondents were in work. This is below the national average. However, with improvements in treatment an increasing number of people living with HIV are now able to remain in the workforce. Despite this increase, little is known about the experiences of people living with HIV in the workplace.

I was therefore very pleased to work alongside Nicola Douglas in carrying out this research project for NAT looking at the employment experiences of HIV positive gay and bisexual men and black Africans. Part of this involved focus groups with both black Africans and gay men living with HIV. Quotations from the focus groups are included in this summary report.

We also conducted an online survey on the gay social networking website Gaydar. This has provided us with an important insight into the workplace experience of gay and bisexual men living with HIV in Britain. Unfortunately, the absence of an equivalent online social networking site for black African people means that there is still a need for further research exploring the employment experiences of this group.

The overall picture presented by the study is a positive one: people living with HIV who took part in the research were generally satisfied with their working lives and able to play an important part in the UK workforce, often with no or minimal additional support from their employers. People with HIV work in a huge variety of jobs in the private, public and not-for-profit sectors. And yet, important areas for improvement remain. Disclosing your HIV status at work remains difficult; discrimination still goes on; and some people are still unaware of their employment rights under the Disability Discrimination Act 2005.

NAT will now be working with people living with HIV, employers, HR professionals, trade unions, organisations that support people living with HIV and others to try to break down the remaining barriers and take forward the important recommendations in this report. The ultimate goal is for people with HIV to remain in employment and to make a vital contribution to the workforce.



Professor Jonathan Elford, City University London

1: Ibrahim F., Anderson J., Bukutu C., Elford J., (2008) 'Social and economic hardship among people living with HIV in London', *HIV Medicine* 9 (8): 616-624.

# INTRO

What are the employment experiences of people living with HIV in the UK? Do they face discrimination at work? Do they find it difficult to manage their HIV treatment as well as having a busy job? Have they told colleagues that they are living with HIV?

These are just some of the questions NAT sought to answer when it commissioned an employment research project in 2008.

Several studies have identified barriers to employment for people living with HIV. Levels of employment among people living with HIV are generally lower than for the general population. But an increasing proportion of people living with HIV are able to remain in the workforce now that treatments have improved. However, a literature search conducted for the project showed that the experiences of people living with HIV in the UK who are actually working remains under-researched.

In addition, there is little understanding of the extent to which HIV positive people know about and use the legal protections provided by the Disability Discrimination Act 2005 (which gives people living with HIV protection from discrimination in employment).

NAT wanted to close this gap. In 2008 we commissioned an independent research project to investigate the employment experiences of two groups of people living with HIV in the UK: gay and bisexual men and black African heterosexual men and women (the two groups most affected by HIV in the UK). The full research report is available on NAT's website – this report summarises the key findings from this research.<sup>2</sup>

The research involved a mixed-methods approach combining qualitative and quantitative techniques. The study received ethical approval from City University London. The first stage of the study involved five focus groups (three with heterosexual black Africans and two with gay and bisexual men, all living with HIV) in different parts of the UK, with a total of 38 participants. Quotes within this report setting out people's experiences are taken from focus group participants.

Building on the insights gained from the focus groups, an online survey of gay and bisexual men who were working was conducted on the gay social networking website Gaydar.<sup>3</sup>

There is no equivalent website for black African people. As the costs of accessing a large sample of black Africans through other means were high, the quantitative arm of this research was limited to gay and bisexual men.

The questionnaire was completed anonymously online by gay or bisexual men (referred to as "gay men" in this report) over 18 and in work. NAT was delighted by the response to the survey: 15,861 men responded, of whom 8,369 were eligible.<sup>4</sup> Of those respondents who were eligible, 1,830 were living with HIV.

By asking both HIV positive and HIV negative gay men to complete the questionnaire, NAT was able to compare the employment experiences of both groups. The headline findings of the survey are reported here – more detailed findings and analysis can be found in the full research report.

The research was timely given recent welfare reform and the focus on encouraging people living with HIV who have left the labour market to return to work.<sup>5</sup> With these changes it is important that people living with HIV, the organisations that support them as well as employers have a better understanding of employment issues for people living with HIV.

This report provides an overview of people's experiences as well as policy recommendations for the future. The report focuses on the survey we conducted among gay men living with HIV but also incorporates some of the findings from the focus groups with heterosexual black Africans as well as gay men.

2: Douglas, N. (2009) *I just get on with it: A study of the employment experiences of gay and bisexual men and black African men and women living with HIV in the UK*, [www.nat.org.uk](http://www.nat.org.uk).

3: The sample was similar in important respects to those recruited in other studies of gay and bisexual men – see full report for details.

4: To be eligible for the analysis respondents had to be working, over 18, living in the UK, describe themselves as gay or bisexual and be aware of their HIV status according to their most recent test.

5: For example the phasing out of Incapacity Benefit and its replacement with Employment and Support Allowance which puts a greater emphasis on getting people back into work. See [www.dwp.gov.uk](http://www.dwp.gov.uk).

# Working with HIV

## Gay men living with HIV are working in a huge variety of jobs.

One of the questions this research posed was, What type of jobs are gay men living with HIV doing? The findings revealed that HIV positive survey respondents were employed across a range of sectors, professions and trades. While the majority worked in the private sector, a sizable minority (over a quarter) worked in the public sector.

The types of jobs respondents did were varied. The largest proportions worked in the hospitality industries (10%), healthcare and medicine (9%), retail (7%), education (7%), Information Technology (6%) and financial services (6%).

The findings revealed that most respondents were in stable employment with permanent contracts (84%). Most respondents had had only one or two employers in the last five years (74%) and focus group participants spoke of their loyalty to employers who were supportive and accommodating.

**There was no significant difference between the HIV positive and HIV negative men's satisfaction with work.**

Over half of respondents in both groups were satisfied with important aspects of their work such as being able to use their initiative, sense of achievement and satisfaction with the work itself.

Both groups were equally likely to report a positive relationship with their manager, suggesting that HIV positive men were no less well integrated into their workplace than HIV negative men.

**“ HIV positive respondents worked in a diverse range of fields including advertising, the clergy, education, funeral services, healthcare and warehouse management.**

Deborah Jack, Chief Executive, NAT

### Points to note:

- ▶ **Gay men living with HIV are employed in a diverse range of sectors and professions.**
- ▶ **Many HIV positive respondents were in stable employment, with most having only one or two employers in the last five years.**
- ▶ **Most were satisfied with their work and there was no significant difference between HIV positive and HIV negative men's level of employment satisfaction.**

# IMPACT

## Over half the HIV positive gay men said HIV had no impact on their working life...

Over half the respondents (58%) said that living with HIV had no impact on their working life at the moment. Of those who reported an impact, the most common responses were to report feeling very tired (20%) and feeling very stressed or anxious (13%). One in ten (11%) noted that side effects from treatment had had some impact on their work.

## ...but initial diagnosis of HIV was a time when a sizable proportion of respondents did report an impact on their working life.

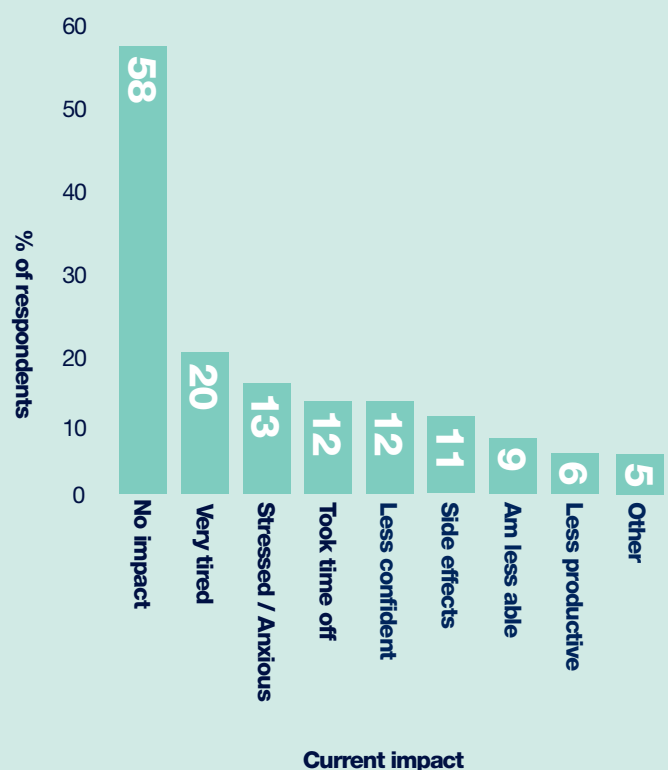
The most commonly reported consequences were stress, anxiety and tiredness. Almost a third reported that they needed some time off. However, it is important to note that almost a third of respondents said that their initial diagnosis had no impact on their working life.

Some focus group attendees also noted that starting or changing medication was another ‘flash point’ when HIV had an impact on their working lives.

“I’ve got a job to do and I’ve got to meet targets and so on and so forth. My personal life is completely different, I’ve got that time to think about it but having that kind of balance there for work that’s allowed me to keep some perspective on things, so it’s helped me.

Gay men’s focus group, Manchester

**Graph 1:**  
Current impact of HIV diagnosis on working life<sup>6</sup>



6: Percentages add up to more than 100% because men could tick more than one response.

# OF HIV

## Points to note:

- ▶ **More than half the gay men living with HIV reported that HIV had no impact on their work at the moment.**
- ▶ **Where respondents did report an impact, this was mostly feeling very tired or anxious.**
- ▶ **HIV had the biggest impact on people's working life at initial diagnosis and when starting or changing treatment.**
- ▶ **Almost half the respondents were able to use existing flexibility within their job to attend HIV clinics.**
- ▶ **A small proportion of respondents used annual leave to attend clinics and take up of the legal entitlement to disability leave to attend HIV clinics was low (5%).**

Regular clinic attendance is a feature of living with HIV as people need to monitor their condition. The research examined how much time respondents had spent away from work attending their HIV clinic in the last 12 months and how people were able to attend HIV clinic appointments during working hours.

**Over a third of HIV positive survey respondents (34%) had not taken any days off to attend their HIV clinic in the last 12 months.**

Just under a third (30%) had taken one to three days. Almost half the respondents used existing flexibility within their current working arrangements to attend their appointments (46%). Only 5% used disability leave.<sup>7</sup> A small proportion (9%) used their annual leave entitlement to attend HIV clinic appointments.

## Recommendation 1:

**Awareness among people living with HIV and employers around people's legal entitlement to disability leave must be increased.**

“When I first started medication, I had to apologise in the meetings saying that I may need to run for the toilet and sometimes I'd just had the need to go to the toilet just there and then and have to just leave the meeting and go away but that's eased up now quite a lot.

Gay men's focus group, Manchester

7: Disability leave is when employers agree for employees to have time off work for reasons relating to their HIV status and do not record this time off as sick absence. Instead it is recorded as disability-related leave.

# IMPACT

## Less than 10% of HIV positive gay men rated their mental or physical health as poor.

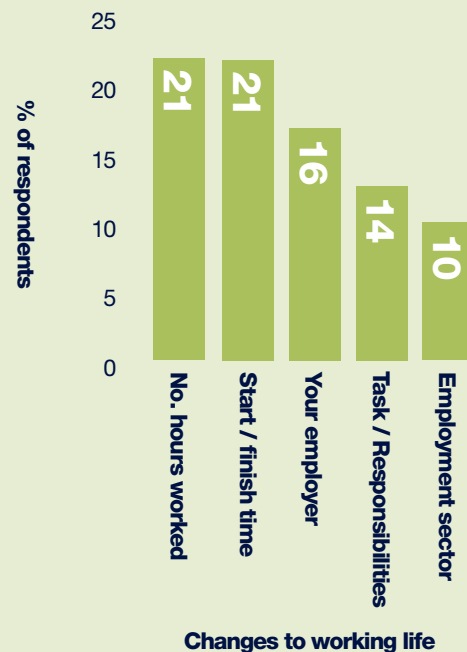
Overall, HIV positive respondents in this study were relatively unburdened by poor health. Less than 10% rated their mental or physical health as poor. However, the HIV negative men in this study were more likely than the HIV positive men to rate their physical (83% vs. 71%) and mental health (78% vs. 68%) positively.

Despite this difference in perception, there was no significant difference in the number of days sick leave HIV positive men took compared with HIV negative men for non-HIV related illness. The mean number of days off for HIV positive men was eight compared with seven for HIV negative men.

“ I’m used to the medication I’m taking, so I find that I actually take less time off sick than people who are actually not HIV positive. So for me at the moment it doesn’t really have an impact on my work and even with my hospital appointments, I find that it doesn’t really have an impact on my work.

African men and women’s focus group, Glasgow

**Graph 2:**  
Reported changes to working life as a result of living with HIV <sup>8</sup>



“ In a funny kind of way I’m completely easy about it and I think the fact that I just go about my daily life in the same way as everybody else is probably a very good thing.

Gay men’s focus group, London

<sup>8</sup>: Percentages add up to more than 100% because men could tick more than one response.



# OF HIV

## Points to note:

- ▶ **The majority of gay men living with HIV had taken no HIV-related sickness days in the last 12 months.**
- ▶ **Most respondents had not made any changes to their working lives because of their HIV status.**
- ▶ **Where limitations were reported, international travel and concern about applying for a new job caused most problems.**

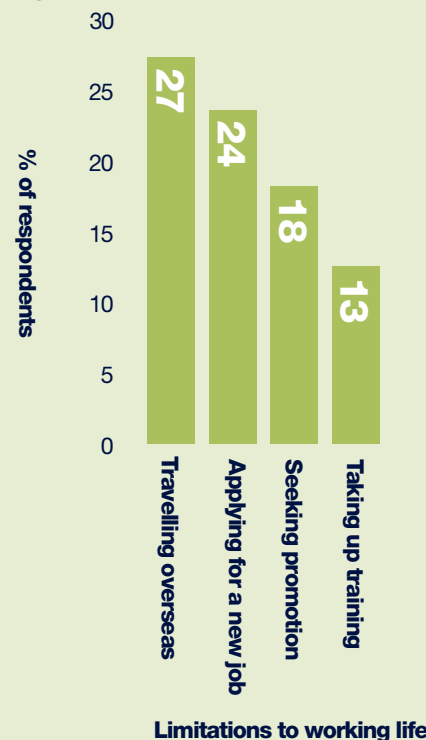
Most of the HIV positive men (70%) had taken no HIV-related sickness days in the last 12 months. The need for daily medication did not appear especially burdensome, with almost all respondents taking their medication only once or twice a day and less than a fifth taking it during working hours.

**The majority of respondents (63%) had not made any changes to their working lives because of their HIV status.**

Just over a third (37%) had made one or more changes, the most common change being to hours worked (21%).

## Graph 3:

**Reported limitations to working life as a result of living with HIV<sup>9</sup>**



The study also looked at how HIV had limited the respondents' working life. The most frequently reported limitation was international travel. This had proved difficult for over a quarter of respondents (27%). Nearly a quarter of respondents also felt that HIV had stopped them from seeking a new job.

## Recommendation 2:

**International travel restrictions on people living with HIV should be lifted.**

<sup>9</sup>: Percentages add up to more than 100% because men could tick more than one response.

# DISCLO

## Over half of respondents had disclosed their HIV status to someone at work...

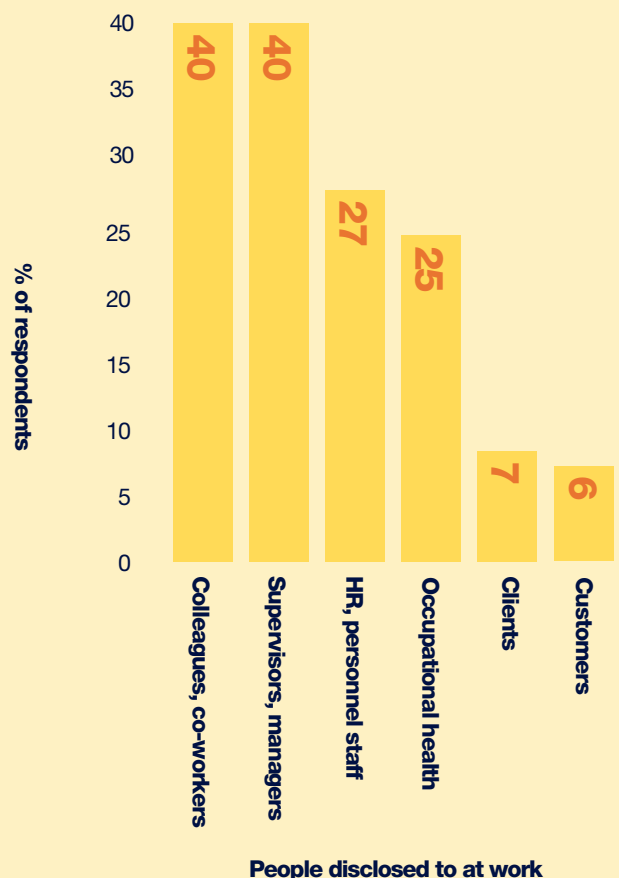
Focus group respondents noted that the decision to disclose at work had been a difficult one which involved weighing up a number of different factors.

**“ I was diagnosed and I remember my counsellor ... said have you thought about who you’re going to tell? And she said, just think hard and fast, it’s entirely your decision of course but once you tell someone you can’t untell them.**

Gay men’s focus group, London

Despite this, the survey revealed that over half of respondents had disclosed their HIV status to someone at work - 62% had disclosed their HIV positive status to one or more of the contacts listed in the questionnaire. Colleagues (40%) and managers/supervisors (40%) were most commonly disclosed to.

**Graph 4:**  
Reported disclosure of HIV status at work<sup>10</sup>



**...for over three quarters of the HIV positive men in this study (77%), the response to the disclosure of their HIV status at work was generally positive.**

Less than one in ten reported a negative response.

<sup>10</sup>: Percentages add up to more than 100% because men could tick more than one response.

# SURE

## Points to note:

- ▶ **The decision to disclose an HIV positive status at work is a complex and difficult one.**
- ▶ **Over 60% of HIV positive respondents had disclosed their HIV status to someone at work; this is significantly lower than the percentage who had disclosed their sexual orientation (92%).**
- ▶ **Respondents who had disclosed their HIV status were more likely to work in the public or not-for-profit sector.**
- ▶ **Respondents who had disclosed were more likely to be taking HIV treatment, taking HIV treatment during working hours and/or feel that they showed some physical signs of living with HIV.**
- ▶ **Less than one in ten reported a negative response when they disclosed their HIV positive status at work.**

The study looked at whether there were any differences between the men who had disclosed their HIV status at work and those who had not. The size of employer did not make a significant difference. However, men who had disclosed their HIV status were less likely to work in the private sector (56% vs. 73%) and more likely to work in the public sector (35% vs. 23%) or not-for-profit sector (10% vs. 5%) than those who had not disclosed.

The research also looked at whether there were any other differences between the men who had disclosed their HIV status at work and those who had not. The analysis revealed that HIV positive men who had disclosed their HIV status were more likely to be on treatment, to take treatment in working hours and to feel that their body showed some physical sign of living with HIV.

**A far greater number of HIV positive men had disclosed their sexual orientation than had disclosed their HIV status.**

62% of HIV positive men had disclosed their HIV positive status, whereas 92% had disclosed their sexuality to someone at work.

“**In the end people were quiet about it and they didn't go talking to other people about it and it was treated with respect.**

Gay men's focus group, London

# DISCLO

## Those who did not disclose their HIV status most frequently said they simply saw no need to.

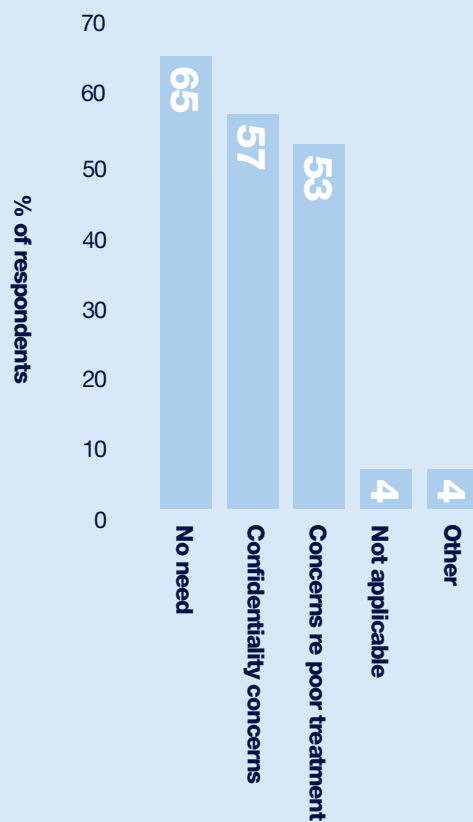
However, fear of poor treatment at work (53%) or breaches of confidentiality (57%) were also important factors in why survey respondents chose not to disclose.

“I’ll be honest, I lie. I lie and I’ll tell you the reason why I lie is because physically at the moment I feel perfectly well and if I’m in a job that doesn’t require me to reveal my status, I won’t. I’m a great believer that it’s my choice to tell as and when.

African women’s focus group, London

It is the practice of some employers to encourage applicants to disclose their HIV status (or status as a ‘disabled person’) in pre-employment health questionnaires. Men and women in the focus groups reported their fears that this information could be used to discriminate against them in the job application process. This fear is not unfounded. Research shows that some employers automatically exclude people during the recruitment process on health grounds.<sup>11</sup>

**Graph 5:** Reasons for non-disclosure of HIV status at work<sup>12</sup>



Reasons for non-disclosure

“I wouldn’t disclose on the form because of discrimination so I would rather get the job and then see someone and then disclose.

African men and women’s focus group, Luton

11: CIPD (October 2005) *Labour Market Outlook: Survey Report Summer/Autumn 2005*.  
 12: Percentages add up to more than 100% because men could tick more than one response.

# SURE

## Points to note:

- ▶ **Among HIV positive gay men who did not disclose their HIV status at work, the most common reason was that they saw no need to.**
- ▶ **Respondents feared discrimination or breaches of confidentiality if they disclosed their HIV status at work.**
- ▶ **Most gay men felt uncomfortable about being asked about their HIV status on pre-employment health questionnaires - half of those who had been given such a form had not disclosed their HIV status.**

Our survey showed that nearly a fifth of HIV positive respondents (18%) reported that they were specifically asked about their HIV status on a pre-employment health questionnaire for their current job. We asked respondents, who had been asked to disclose their HIV status, whether they had done so. Almost a quarter (23%) were either HIV negative or unaware of their HIV status at the time. The remainder were evenly divided between those who did and did not disclose their HIV status on the form (38% in each case).

We asked how respondents felt about being asked about their HIV status on a pre-employment health questionnaire. Almost three-quarters reported that it made them feel uncomfortable (72%).

## Recommendation 3:

▶ The Government should prohibit the use of pre-employment health-related questions which are not directly relevant to the candidate's ability to do the job they have applied for.

## Recommendation 4:

▶ Employers should take proactive steps to show that they are aware of the needs of people living with HIV at work and will respond appropriately to disclosure (for example, having a specific policy that addresses HIV, incorporating HIV in diversity/disability training and supporting World AIDS Day).

# RIGHTS

## Two thirds of HIV positive respondents were aware of their rights at work under the Disability Discrimination Act.

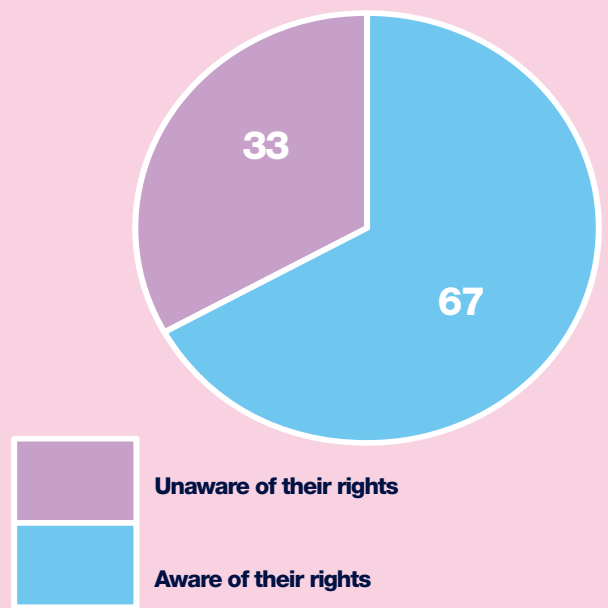
The survey looked at HIV positive respondents' awareness of the legal protections available to them as people living with HIV in employment. The Disability Discrimination Act 2005 (DDA 2005) protects people living with HIV from discrimination in the workplace.

The Act also entitles people to ask their employers for 'reasonable adjustments'. These are changes made to the workplace or role that take into account a person's disability so that they can continue to do their job.

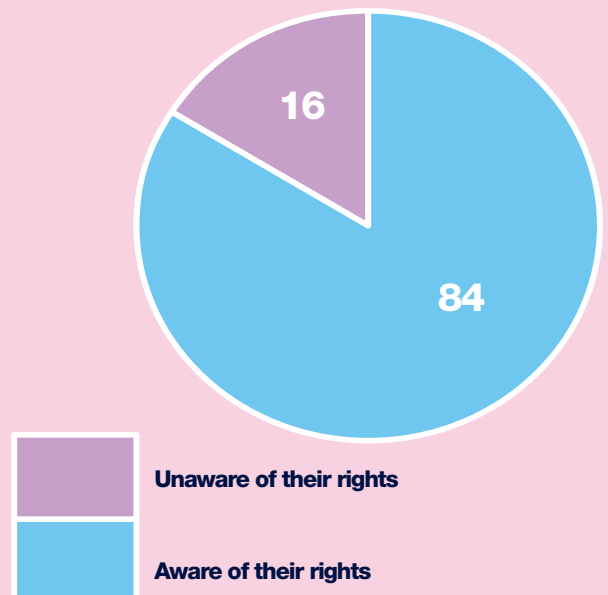
We were keen to explore participants' level of awareness of the Act. Two thirds of HIV positive respondents (67%) were aware of their rights at work under the DDA 2005. The remaining one third of the men were unaware of their rights.

Of further concern was the fact that, of the respondents who said they were aware of their rights under the DDA 2005, almost a third did not know that this entitled them to ask for 'reasonable adjustments' at work (30%).

**Graph 6:**  
Awareness of legal protections - HIV-related discrimination



**Graph 7:**  
Awareness of legal protections - Anti-gay discrimination



## Points to note:

- ▶ **Two thirds of HIV positive respondents were aware of their rights under the DDA 2005.**
- ▶ **Of these almost a third (30%) were unaware of their right to reasonable adjustments.**
- ▶ **Awareness of rights around sexual orientation was higher (84% as opposed to 67%).**

## Over three quarters of HIV positive respondents were aware of their rights as gay men under the Employment Equality [Sexual Orientation] Regulations 2003 (84%).

This is in contrast to the DDA 2005 where awareness was lower (67%) (see Graph 6 and Graph 7).

The Employment Equality [Sexual Orientation] Regulations 2003 provide legal protection from anti-gay discrimination at work.

We wanted to look at whether gay men living with HIV were more aware of their rights under these regulations, than their rights under the DDA 2005.

“If they were going to get difficult about it... [I would] say well, you know, I've been with you for an awful long time and you have an obligation nowadays to accommodate this illness.

Gay men's focus group, London

## Recommendation 5:

▶ **Further work is needed by key stakeholders including the Equality and Human Rights Commission and HIV support organisations to ensure that people living with HIV are aware of their rights at work under the DDA 2005.**

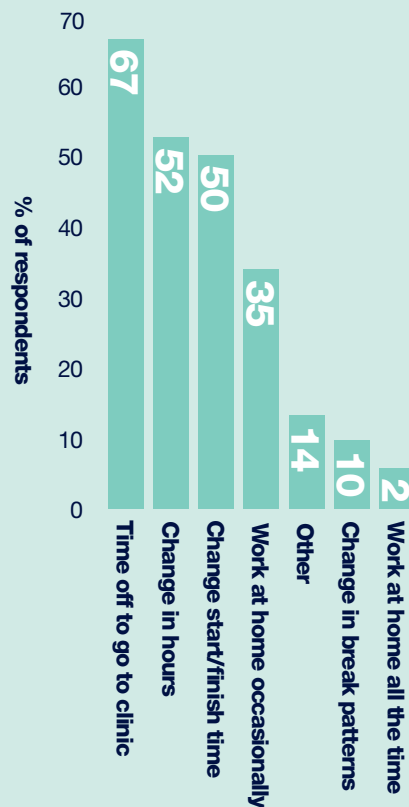
# ADJUST

## When respondents living with HIV needed adjustments at work, these were straightforward and inexpensive...

The research looked at how many respondents who were aware of their rights under the DDA 2005 and had disclosed their HIV status at work had asked for a reasonable adjustment. Almost a third of this subgroup had sought some form of adjustment (29%).

Among those who had made requests for adjustment, the most common requirements were time off for clinic appointments (67%), a change in hours worked (52%) and a change to start/finish times (50%).

**Graph 8:**  
Reasonable adjustments requested<sup>13</sup>



## Recommendation 6:

**Employers need to be made aware of the sorts of adjustments that people living with HIV may need in the workplace and the ease with which they can often be accommodated.**

**...however, just over one in ten requests were refused.**

The research also looked at how employers had responded to requests for reasonable adjustments linked to HIV status. Most requests among this group were fully or partially granted (89%). However, just over one in ten requests were refused.

<sup>13</sup>: Percentages add up to more than 100% because men could tick more than one response.



# MENTS

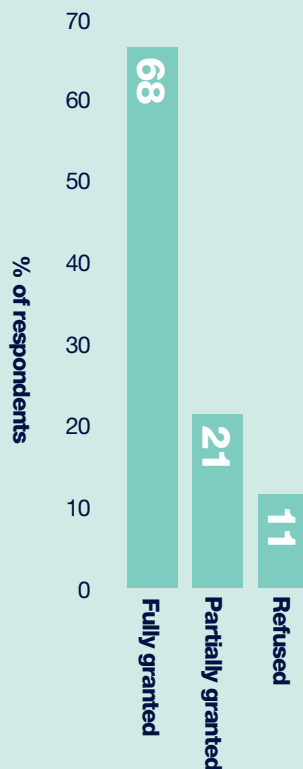
## Points to note:

- ▶ Almost a third of respondents (who had disclosed their HIV status at work and were aware of their rights under the DDA 2005) had asked for a reasonable adjustment.
- ▶ Requested adjustments were straightforward, usually involving flexibility around working hours.
- ▶ In most cases requests to employers were granted.

“ It was very, very difficult for me to get that time off. I ended up having to ask my work colleagues, to say look, I’m unable to come in on this day, could we swap so that I’ll cover you if you’ll cover me, that kind of thing and even now if I need anything, I work around with my work colleagues but I don’t tell them why, I just say look can we swap shifts?”

African men and women’s focus group, Luton

**Graph 9:**  
Employers’ response to request for reasonable adjustments<sup>14</sup>



Employers' response

Access to reasonable adjustments is limited to those who have disclosed their HIV status at work. This is an area where those who have not disclosed their status at work face disadvantage.

When we asked about what workplace changes employers could make that respondents would find helpful, these reflected the requests for reasonable adjustments - time off for clinic appointments was most popular, followed by the option to work at home occasionally. Again, these are relatively simple and inexpensive requests to accommodate.

<sup>14</sup>: Percentages add up to more than 100% because men could tick more than one response.

# DISCRIM

## Discrimination at work is still a reality for some people living with HIV.

A fifth of men who had disclosed their HIV positive status at work had experienced HIV discrimination in a current or previous job (7% current; 14% previous).

In each case, an additional 8% were uncertain about whether poor treatment was related to HIV discrimination. A similar proportion of the HIV positive respondents had experienced discrimination related to their sexual orientation in a current job (7%).

## The research asked respondents to describe the nature of the discrimination they had experienced in either a current or previous job.

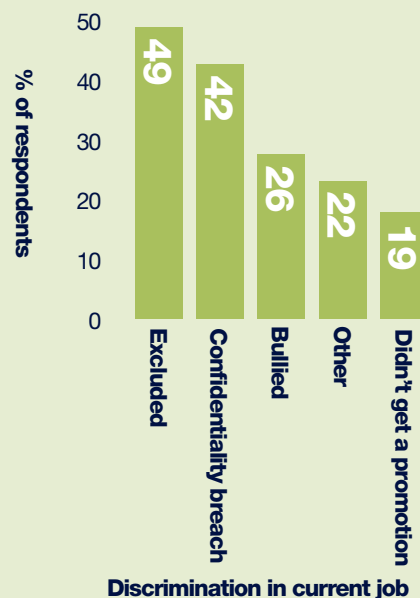
In each case, the two most commonly reported forms of discrimination were to perceive being treated differently or excluded (49% in current job, 50% in previous job) or to have their confidentiality breached in relation to information about their HIV status (42% in current job, 52% in previous job).

More than a third (40%) of respondents who had disclosed their HIV status and had experienced HIV discrimination in a previous job believed they had lost their job as a result.

“The organisation [detail removed] believed that my HIV status called into question my fitness to practice and that took eight months to investigate. And they have lost an employment tribunal in exactly the same situation... They told me that it was perfectly standard procedure, it had nothing to do with my HIV status and that it applied to everybody who made a health declaration. But obviously I spoke to colleagues who made health declarations and none of them had the same issues.

Gay men’s focus group, London

**Graph 10:** Nature of discrimination reported by respondents who had disclosed their HIV status in their current job<sup>15</sup>



15: Percentages add up to more than 100% because men could tick more than one response.

# INTEGRATION

## Points to note:

- ▶ **People still face HIV discrimination at work.**
- ▶ **Survey respondents most commonly reported breaches of confidentiality or being made to feel excluded.**
- ▶ **The number of HIV positive gay men who had experienced discrimination related to their sexual orientation in their current job (7%) was similar to the number who had experienced HIV-related discrimination in their current job (7%).**
- ▶ **40% of respondents who had disclosed their HIV status and experienced discrimination believed they had lost a previous job as a result.**
- ▶ **A quarter of respondents who had disclosed their HIV status and had experienced discrimination reported being bullied in their current job and a third reported being bullied in a previous job.**
- ▶ **Employment sector or size of employer did not affect whether men were likely to have experienced discrimination.**
- ▶ **Respondents who felt their body showed some physical sign of living with HIV were more likely to report HIV-related discrimination.**

Over a quarter (26%) of respondents who had disclosed their HIV status and had experienced discrimination reported being bullied in their current job while a third reported being bullied in a previous job.


The research examined whether there were any significant differences between those who had disclosed their HIV status and experienced discrimination and those who had disclosed their HIV status but did not experience discrimination.

Neither employment sector, nor size of employer made a significant difference as to whether men were likely to have experienced discrimination in a current job.

Although numbers were small, key sectors where discrimination occurred were healthcare, education and retail. This links to where the largest number of HIV positive respondents worked.<sup>16</sup>

Only one factor proved significant: respondents who perceived that their body showed some physical sign of living with HIV were more likely to report HIV discrimination.

## Recommendation 7:

 **Employers, professional associations and trade unions must take effective steps to tackle HIV-related discrimination in the workplace.**

16: NAT analysed the key sectors where discrimination had taken place – this information is not reported on in the full research report but is available from NAT on request.

# REDRES

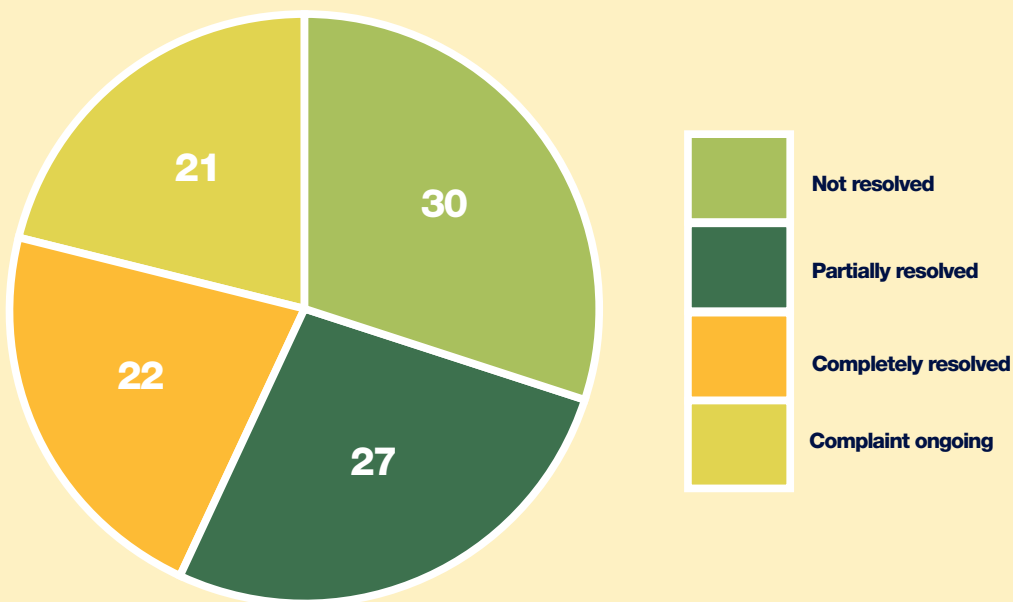
**A third of HIV positive respondents had made a complaint when they experienced discrimination...<sup>17</sup>**

The research looked at whether respondents, who had experienced HIV-related discrimination in a current or past job, had sought redress through official complaint mechanisms or grievance procedures. Nearly a third (32%) had done so.

“The HR department is just absolutely incompetent, to be fair... so I don't have much confidence and faith in them. I'd much prefer to come to something like GHT [George House Trust] and get their advice and sort of impetus and see what they could do to help.

Gay men's focus group, Manchester

**Graph 11:**  
Reported outcome of grievance procedures



<sup>17</sup>: This refers to HIV positive respondents who had disclosed their status at work and experienced discrimination.



## ...but almost a third of complaints were not resolved to the satisfaction of respondents (30%).

A further 21% of complaints were ongoing.

The survey asked HIV positive respondents where they would turn to for help if they were to experience HIV-related discrimination at work.

HIV support organisations were by far the most commonly preferred source of help (60%). Human Resources/Personnel departments (37%) and Managers/Supervisors (36%) were also commonly cited.

### Recommendation 8:

Steps should be taken to encourage and support people living with HIV who have experienced discrimination to seek redress through the range of employment dispute methods available. In parallel, steps should be taken to identify and address barriers to people living with HIV who have experienced discrimination seeking/ accessing redress.

We also asked respondents where they would most like to obtain advice and information about issues of employment for HIV positive people.

Again, overwhelmingly, respondents' first choice would be to obtain advice and information from HIV support organisations (69%).

## There was a strong preference for getting advice and help from HIV support organisations.

### Recommendation 9:

The Government should fund organisations that support people living with HIV to provide advice around employment, particularly given the recent increase in emphasis on keeping, or getting, disabled people back to work.<sup>18</sup>

### Recommendation 10:

Trade unions and professional associations need to make themselves more credible and approachable to people living with HIV and to take a proactive role in providing advice and support on HIV-related employment issues.

18: The DDA 2005 includes people living with HIV from the point of diagnosis within the definition of disability.

# 10 Recommendations

- 1** Awareness among people living with HIV and employers around people's legal entitlement to disability leave must be increased.
- 2** International travel restrictions on people living with HIV should be lifted.
- 3** The Government should prohibit the use of pre-employment health-related questions which are not directly relevant to the candidate's ability to do the job they have applied for.
- 4** Employers should take proactive steps to show that they are aware of the needs of people living with HIV at work and will respond appropriately to disclosure (for example, having a specific policy that addresses HIV, incorporating HIV in diversity/disability training and supporting World AIDS Day).
- 5** Further work is needed by key stakeholders including the Equality and Human Rights Commission and HIV support organisations to ensure that people living with HIV are aware of their rights at work under the DDA 2005.
- 6** Employers need to be made aware of the sorts of adjustments that people living with HIV may need in the workplace and the ease with which they can often be accommodated.
- 7** Employers, professional associations and trade unions must take effective steps to tackle HIV-related discrimination in the workplace.
- 8** Steps should be taken to encourage and support people living with HIV who have experienced discrimination to seek redress through the range of employment dispute methods available. In parallel, steps should be taken to identify and address barriers to people living with HIV who have experienced discrimination seeking/accessing redress.
- 9** The Government should fund organisations that support people living with HIV to provide advice around employment, particularly given the recent increase in emphasis on keeping, or getting, disabled people back to work.
- 10** Trade unions and professional associations need to make themselves more credible and approachable to people living with HIV and to take a proactive role in providing advice and support on HIV-related employment issues.

# Acknowledgments



Enormous thanks to **Levi Strauss & Co** who fully funded this project.

We would also like to say a very special thank you to Nicola Douglas who put a huge amount of time, energy and commitment into carrying out this research for NAT and to Professor Jonathan Elford, **City University London** who supervised the research and shared his expertise with such generosity of time and spirit.

This project would not have been possible without the generous and valuable contribution of a number of people. Many thanks to:

QSoft Consulting, who generously donated their resources to host the online survey and particularly the **Gaydar** Social Responsibility Committee for technical advice, support and infinite patience.

Those who provided input at an early stage to help shape the research: Grant Chambers (DHIVERSE, Cambridge), Maro McNab (Waverley Care), Chris Morley (George House Trust), Sue Murphy (Positive East).

Those who co-facilitated or assisted with co-ordination of the research focus groups: Anthony Townsend (NAT), Juliet Reid & Anna Botha (Centre for African Families Positive Health), Eunice Sinyemu (HIV Scotland), Tarsisio Nyatsanza (Waverley Care), Colin Armstead & Chris Morley (George House Trust), Allan Anderson (Positively Women), Garry Brough (formerly Bloomsbury Patients Group).

Dr Salih Solomon, Oriel College, Oxford who assisted with statistical analysis of online survey results. Maurice Hebert (NAT volunteer) who carried out desk research and data analysis. Nia Roberts (University of Oxford) who advised on literature searching and Anna Rambert (City University London) who advised on ethical approval.

Those who helped publicise the project: Tony Grew (Pink News), Living Well, Positive Nation and the numerous social, support and leisure groups for gay men that we contacted.

Finally our thanks go to those who provided feedback on the draft questionnaire, attended a focus group or completed the online questionnaire to help us advance our understanding of the needs and experiences of people living with HIV.



August 2009

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