



TB IN
SUPPLY CHAINS

IMPLEMENTATION GUIDE



ENDING WORKPLACE
TUBERCULOSIS

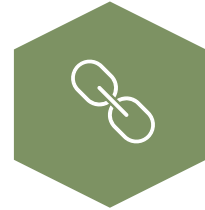
TACKLING TB IN SUPPLY CHAINS



LEADERSHIP FROM MANAGEMENT



ENGAGING SUBSIDIARIES



ACTION THROUGH THE SUPPLY CHAIN

OVERVIEW

COVID-19 has shown that no one is safe from a lethal respiratory pathogen unless all are safe. It has also shown that an infectious disease outbreak can have a major impact on the functioning and productivity of a company and its supply chain.

Like COVID-19, TB is a lethal respiratory pathogen. The two diseases share many similarities, and simple measures can protect workplaces from disruption caused by either.

Companies that are committed to improving working conditions and resilience throughout their supply chains can drive major improvements if that impact is driven from the top, by leaders who can make a compelling case for the importance of health from both a moral and economic perspective.

Subsidiaries in high TB burden countries also have a role to play. Any leaders wanting to introduce workplace TB programmes to expand or complement existing systems can contact us at partners@ewtb.org or review the materials on our website.

SUPPLY CHAINS

A driving force in the establishment of Ending Workplace TB was the belief that companies could have a significant impact on TB care and prevention worldwide through their supply chains.

We recognise, however, that many companies have limited insight into the policies and processes of some of their suppliers. If companies that want to strengthen TB care and prevention in their supply chains can motivate their suppliers to take action, we are on hand to help.

With that in mind, in addition to clear signals from senior management that workplace health, particularly in relation to lethal respiratory pathogens, is a priority, we propose that companies include questions specifically targeted to TB and pandemic resilience in their internal supply chain audits. This will be a clear signal to the senior management of your suppliers that workplace TB should be addressed. Suppliers can then draw on the information in any of our implementation guides as they look to strengthen their processes.

QUESTIONS FOR SUPPLIERS

The following questions may help you gain a clearer understanding of the extent to which your suppliers have engaged on the issues of TB and pandemic resilience in their workforces. We hope that these questions can begin a dialogues and encourage your suppliers to further engage with us. Contact us at partners@ewtb.org for more information.

1. *Outline the measures that you have implemented to protect workers from the spread of lethal respiratory pathogens such as TB and COVID-19 in your workplace.*

A strong answer would include education and awareness programmes, onsite disease control measures, understanding of the care pathway for workers with symptoms, and strong social protection policies. It would also acknowledge that the most effective way to prevent disease transmission in the workplace is quick diagnosis and treatment.

2. *Outline the steps that you are taking to build a workplace culture that promotes healthy behaviour, and in particular ensuring that people who are sick feel supported to take sick leave.*

Sick leave is the cultural cornerstone of a healthy workplace. If people are sick and coming into work, they pose a risk to themselves and to their colleagues. A strong answer would include a clear acknowledgement of the importance of building a health-seeking culture, an appreciation of the economic barriers to care that sick leave can help address, and the critical role that social and cultural norms can play in preventing or encouraging people to seek care. It would also recognise that stigmatising processes or policies, such as dismissing people who admit to having TB, are counterproductive because they result in people hiding their illnesses rather than getting treatment.

3. *When were your workers last systematically screened for TB and other respiratory conditions?*

Screening is the first step of the care pathway for almost all people. All workers in high-burden countries should be screened at least every year and preferably every six months.

HIGH TB BURDEN COUNTRIES

The following list of World Health Organization defined High TB Burden countries are those where TB is most likely to be a factor in workplaces. We strongly encourage any company with suppliers or subsidiaries in this country to make workplace TB a priority focus:

Angola, Bangladesh, Brazil, Cambodia, China, Central African Republic, Congo, DR Congo, Ethiopia, India, Indonesia, Kenya, Lesotho, Liberia, Mozambique, Myanmar, Namibia, Nigeria, Pakistan, Papua New Guinea, Philippines, Russian Federation, Sierra Leone, South Africa, Thailand, the United Republic of Tanzania, Viet Nam, Zambia and Zimbabwe.¹

¹ North Korea is also a high TB burden country.