



Position Statement

Reducing the Impact of HIV Infection and AIDS on Nursing and Midwifery Personnel

ICN Position:

The risk of exposure of nursing and midwifery personnel to HIV infection must be minimised. Measures need to be taken to prevent the transmission of HIV and other blood borne pathogens in health care settings, including reduction of the incidence of needlestick and other sharps injury.

Employers, national nursing and midwifery associations and individuals have a responsibility to see that nursing and midwifery personnel:

- Have access to information on prevention of HIV and other blood borne infections such as Hepatitis B and C.
- Have access to guidelines, policies and protocols regarding occupational exposure to HIV infection, Hepatitis B and C and other workplace issues.
- Have a safe work environment while providing quality care, including sufficient supplies and protective equipment.
- Have access to appropriate post-exposure follow-up care and monitoring, including immediate first-aid, post-exposure prophylaxis and documentation.
- Have access to Hepatitis B vaccine.
- Who are HIV-positive, and regardless of how they became infected, have access to confidential counselling and be allowed to work with duties modified, where appropriate, so the risk to their patients or themselves is reduced
- Who are HIV-positive are protected from discrimination such as job or housing loss.
- Who are HIV-positive have access to Antiretroviral Therapy (ARVs) as a matter of priority

HIV infection is a growing public health problem with complex social and behavioural issues related to protection, prevention of transmission and care for nursing and midwifery personnel caring for people living with HIV and AIDS.

The social stigma associated with HIV, the disease's long period of 'invisibility' and the determination of whether infection was related to behavioural risks such as sexual transmission or occupational exposure; add to the complexity of HIV and AIDS in the workplace.

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Background:

The widespread emergence of other infectious disease such as tuberculosis (TB), and the significant prevalence of Hepatitis B and C have increased the potential for occupational exposure by nurses/midwives, necessitating appropriate supplies and protective personal equipment and consistent use of standard precautions.

Preventive measures to be taken include:

- Using standard precautions
- Availability and rational use of personal protective equipment and supplies
- Cutting down on unnecessary injections, laboratory work and episiotomies
- Proper transport and disposal of sharps, blood specimens, biowaste and soiled linen
- Creating a less stressful work environment for nursing and midwifery personnel

The intensive nursing care demands of persons with HIV and the real or perceived risks and stressful work environment, can have a detrimental impact on the profession, including burnout, a high drop-out rate and fewer recruits. This could result in a nursing/midwifery shortage and in turn affect the quality of care. Measures for addressing the stress and burnout issues should be developed and integrated into care delivery systems.

Work-related incidence is still unclear, due to lack of research-based data such as longitudinal tracking of HIV exposure in the workplace, and underreporting of needlestick and other sharps injury or splashes.

Adopted in 1995

Revised and reaffirmed in 2008

Related ICN Positions:

- [Acquired Immunodeficiency Syndrome](#)
- [Reducing environmental and lifestyle-related health hazards](#)
- [Occupational health and safety for nurses](#)
- [Socio-economic welfare of nurses](#)

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