



6. Combat HIV/AIDS, malaria and other diseases

The HIV pandemic and associated diseases are intensifying poverty, slowing economic growth and reversing a number of development gains. They have an impact on the labour force, on enterprise efficiency, and on the transfer of skills and experience. Recognizing that the workplace has a vital role to play in the wider struggle to limit the spread and effects of the HIV/AIDS epidemic, the ILO is a co-sponsor of the Joint United Nations Programme on HIV/AIDS.

Combating HIV/AIDS through decent work

Through the **Decent Work Agenda**, the ILO promotes integrated action in respect of rights, employment and income generation, and social protection, underpinned by a new dynamic in social dialogue. The ILO focuses on promoting understanding of **AIDS as a workplace issue**, mobilizing action in the world of work, and strengthening the capacity of workers' and employers' organizations to sustain effective programmes. Promotion of social protection contributes to provision of better health services for a wide range of diseases.

What impact? Research and policy analysis

The lack of qualitative and quantitative information on the nature and extent of the impact of HIV/AIDS on the labour force and production hampers effective policy response. The report *HIV/AIDS and work: global estimates, impact and responses* [65] stresses the pivotal importance of the labour market and human development aspects to sustainable economic and social progress.

Policy guidance

Discrimination on the basis of HIV status deprives workers of rights and livelihoods and employers of key staff. Since persons with HIV can still work, a number of countries have adopted or are considering legislation to prohibit such discrimination in employment.

The ILO *Code of Practice on HIV/AIDS and the World of Work* [66] sets out fundamental principles for policy development and practical guidelines for the development of programmes at enterprise, community and national levels. It promotes a comprehensive approach to workplace action, encompassing –

- the **protection of workers' rights**;
- **HIV/AIDS prevention** through education, gender-aware programmes, and practical support for behaviour change;
- **care and support**, including access to benefits, **reasonable accommodation** of tasks at the workplace, as well as treatment in settings where local health systems are inadequate.

An education and training manual on implementing the ILO Code of Practice on HIV/AIDS and the World of Work [67] guides the application of the Code. These two tools are being used to develop skills and institutional capacity. New guidance manuals target labour judges and inspectorates.

The impact of HIV/AIDS on children and child labour

The ILO's International Programme on the Elimination of Child Labour (IPEC) gives particular attention to categories of children suffering from the impact of HIV/AIDS – orphans, HIV/AIDS-infected and affected children - children who are vulnerable to commercial and sexual exploitation. Education on HIV/AIDS and reproductive health is also critical.

Relevant international labour standards [8]

- Social Security (Minimum Standards) Convention, 1952 (No. 102)
- Discrimination (Employment and Occupation) Convention, 1958 (No. 111)
- Medical Care and Sickness Benefits Convention (No. 130) and Recommendation (No. 134), 1969
- Occupational Health Services Convention, 1985 (No. 161)
- Worst Forms of Child Labour Convention, 1999 (No. 182)
- Maternity Protection Convention, 2000 (No. 183)

Target 7

To have halted by 2015 and begun to reverse the spread of HIV/AIDS

Indicators

18. HIV prevalence among 15-24 old pregnant women

19. Condom use rate of the contraceptive prevalence rate

19a. Condom use at last high-risk sex

19b. Percentage of population aged 15-24 with comprehensive correct knowledge of HIV/AIDS

19c. Contraceptive prevalence rate

20. Ratio of school attendance of orphans to school attendance of non-orphans

Target 8

To have halted by 2015 and begun to reverse the incidence of malaria and other major diseases

Indicators

21. Prevalence and death rates associated with malaria

22. Proportion of population in malaria risk areas using effective malaria prevention and treatment measures

23. Prevalence of death rates associated with tuberculosis

24. Proportion of tuberculosis cases detected and cured under international TB control strategy.

ILO/AIDS Global Estimates Report [65]:

26 million labour force participants and 36 million persons who make economic contributions are HIV-positive worldwide.



Technical cooperation: Advice and capacity building

ILO country-level work focuses on advisory services and on enhancing the capacity of organizations of employers and workers, along with others, to respond at the workplace. A comprehensive report provides details: *Technical cooperation: A means to implement the ILO Code of Practice on HIV/AIDS and the world of work* [68]. A new toolkit provides guidance for HIV/AIDS workplace behaviour change communication programmes.

Social dialogue and partnerships

The largest global organizations of employers and workers (the International Organization of Employers and International Confederation of Free Trade Unions) have launched a consolidated action plan on fighting HIV/AIDS together. They are carrying out joint activities in eight pilot countries. Guidelines help both employers' and workers' organizations promote and support action against HIV/AIDS among their members.

The ILO and WHO joined forces to produce *Joint Guidelines on Health Services and HIV/AIDS* to assist such services to provide their workers with a safe, healthy and decent working environment in order to reduce HIV/AIDS transmission and improve patient care [29]. In consultation with its social partners, the ILO is preparing guidelines for the education and transport sectors, as well as for small and medium-sized enterprises.

As a partner in the WHO/UNAIDS '3 by 5' initiative [69], the ILO guides workplace health services in this field and promotes a campaign to 'Know your status' [70]. The ILO develops public-private partnerships to extend access to treatment.

Social protection: Expanding social security and access to health care

The ILO Global Campaign on Social Security and Coverage for All [26] and other social protection initiatives contribute to MDG 6 through –

- assistance to countries in crafting workable policies to extend access to health care services to all, and particularly to HIV/AIDS victims;
- advice to countries on designing feasible basic income support policies for poor families, targeted also at those who often take care of HIV/AIDS victims and their families, such as girls and the elderly;
- analysis and advice concerning safe and healthy workplaces.

Such measures contribute to combating **malaria**, **tuberculosis** and other diseases as well as HIV/AIDS. In addition, provision of better maternity protection can contribute to reduction of mother-child HIV transmission and create opportunities to raise HIV/AIDS awareness.

ILO publications relevant to MDG 6

The ILO Code of Practice on HIV/AIDS. ILO, 2001.

Implementing the ILO Code of Practice on HIV/AIDS and the world of work: An education and training manual. ILO, 2002.

HIV/AIDS and work: Global estimates, impact and response. ILO, 2004.

HIV/AIDS behaviour change communication: a toolkit for the workplace. ILO, 2005.

Joint Guidelines on Health Services and HIV/AIDS. ILO/WHO, 2005.

Legal initiatives to address HIV/AIDS in the world of work. ILO, 2005.

Using the ILO Code of Practice and training manual – Guidelines for labour judges and magistrates. ILO, 2005.

A handbook on HIV/AIDS for labour and factory inspectors. ILO, 2005.

According to The Joint United Nations Programme on HIV/AIDS (UNAIDS) [64], the pandemic had claimed nearly 26 million lives by the end of 2003. In all, 38 million people are estimated to be living with HIV or AIDS, 66 per cent of them in sub-Saharan Africa and 18 per cent in South-East Asia. In Eastern Europe and Central Asia 1.5 million people were hit in 2003.

Tuberculosis (TB) is a major cause of death for people with HIV/AIDS. Multi-drug resistant TB is increasing in many countries, due to poor treatment practices. Eight million people develop TB, and nearly two million die annually, over 90 per cent of them in developing countries.

Malaria affects 300 million people and kills at least one million people each year, most of them in sub-Saharan Africa. About three-quarters of these are children under five.

Blue text and numbers in brackets [..] are linked to websites. See attached list of reference materials.

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