There is a strong consensus within the global community to end AIDS by 2030.

Target 3.3 of Agenda 2030 focuses on ending AIDS as a public health threat by 2030. The UNAIDS Strategy (2016 – 21) on the fast track to end AIDS calls for the end of AIDS by 2030.

The United Nations Political Declaration on HIV and AIDS adopted by members States at the United Nations High Level Meeting in 2016 also calls for the end of AIDS in 2030.

To end AIDS, the HIV response must be fast-tracked. The 90-90-90 treatment targets are one of the key targets to be achieved by 2020. The first 90 focusses on HIV testing. Critical gaps exist in HIV testing. In 2016, UNAIDS reported that approximately 40% of all people living with HIV did not know their HIV status.

To contribute concretely to the 90-90-90 treatment targets and more specifically to HIV testing, the ILO, UNAIDS, International Organization of Employers (IOE) and the International Trade Unions Confederation (ITUC) launched the VCT@WORK Initiative at the International Labour Conference (ILC) in June 2013. VCT@WORK was launched because the workplace offers unique opportunities to reach women and men workers, their families and communities with HIV testing services in locations where they spend most of their daily lives.

The Initiative was initially implemented in over 30 countries but shrinking resources necessitated the repositioning of the Initiative in a limited number of countries in 2016. Retaining the focus on fast track countries, the initiative was implemented in 18 countries2 in 2016.

1 90% of all people living with HIV will know their HIV status, 90% of all people with diagnosed HIV infection will receive sustained antiretroviral therapy, and 90% of all people receiving antiretroviral therapy will have viral suppression
2 Cambodia, Cameroon, China, Congo DR, Egypt, Guatemala, Haiti, Honduras, India, Indonesia, Kenya, Mozambique, Nigeria, Russia Federation, South Africa, Tanzania, Ukraine and Zimbabwe
Since its launch, 4.1 million workers and their families have taken the HIV test and 104,926 tested positive and 103,286 were referred for treatment.

**STRATEGIC PILLARS OF THE VCT@WORK INITIATIVE**

The Strategic Pillars of the VCT@WORK Initiative are highlighted below:

**Advocacy, Communication and Training:** The initiative is built around the ILO’s communication campaign — *Getting to Zero at Work* — that focusses on reducing stigma and discrimination at work. In a carefully crafted communication strategy, messages are built around the ‘benefits of early HIV testing’ backed by the ‘protection of the rights of workers’ in case they are found to be living with HIV. HIV testing is supported by a strong behaviour change communication effort at workplaces, using a peer education approach.

**Evidence-informed:** Evidence is used to ensure that the VCT@WORK Initiative focusses on populations most at risk including workers in key economic sectors such as mining, transport, construction, health, tourism, etc, with a relatively higher burden of HIV than the general population. Mobile and migrant workers are also often the focus of HIV testing initiatives. In concentrated epidemics, the focus is on key populations.

**Rights-based approach:** The right to good health, right to work irrespective of the HIV status and ensuring non-discrimination are seen as critical elements to the success of the Initiative. Therefore, the Initiative is implemented within a rights-based framework following the principles as defined in the ILO’s *HIV and AIDS Recommendation, 2010 (No. 200)*. In addition, “*Respecting human rights in the implementation of the VCT initiative: operational guidelines*” have been developed in partnership with Global Network of People Living with HIV (GNP+) to provide guidance to partners on respecting human rights in the implementation of the VCT@WORK Initiative.

**Multi-disease testing:** HIV testing is promoted through an integrated and multi-disease initiative in order to de-stigmatize HIV testing and facilitate uptake of VCT services.

**Strategic partnerships:** Strategic partnerships with key players, engaged in HIV testing initiatives, world of work actors, national AIDS programmes and organizations of people living with HIV are forged.

**Mainstreaming HIV and AIDS:** The Initiative is embedded in the ILO’s work around the cross cutting policy driver of gender equality, diversity and non-discrimination; and is linked to different ILO outcomes: Creating and Extending Social Protection Floors (Outcome 3); Formalization of the Informal Economy (Outcome 6); Promoting workplace compliance through labour inspection (Outcome 7); and Protecting workers from unacceptable forms of work (Outcome 8).
**Monitoring and evaluation:** Partnerships are strengthened with national AIDS programmes, key testing initiatives at the country level and UNAIDS to ensure that HIV testing data for workers is collected, analysed and feeds into the national systems.

**Data Collection:** The standardized data collection tools designed by the ILO and partners ensure that the following indicators are used to generate information at all HIV testing sites:

1. Number of women and men workers reached with HIV information;
2. Number of women and men workers counselled;
3. Number of women and men workers who took the HIV test;
4. Number of women and men workers who tested HIV positive; and
5. Number of HIV + women and men workers who were referred to treatment.

A conscious effort was made to ensure the disaggregation by gender.

**Results:**

In 2016, over 1.2 million workers were reached with HIV information, including information on VCT. Over 1.1 million workers took the HIV test. A total of 17,773 workers - 1.5 % of those who took the test - were HIV positive, and were referred to treatment. The breakdown is in Table 1.

**Table 1: Results for the year 2016:**

<table>
<thead>
<tr>
<th></th>
<th>Men</th>
<th>Women</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of workers reached</td>
<td>1233234</td>
<td>68%</td>
</tr>
<tr>
<td>Number of workers who undertook counselling</td>
<td>1150553</td>
<td>69%</td>
</tr>
<tr>
<td>Number of workers who tested</td>
<td>1167742</td>
<td>69%</td>
</tr>
<tr>
<td>Number of workers who tested positive</td>
<td>17773</td>
<td>81%</td>
</tr>
<tr>
<td>Number of workers referred for treatment</td>
<td>17615</td>
<td>81%</td>
</tr>
</tbody>
</table>

Gender disaggregation shows that more men (69%) took the test than women (30%). The percentage of men testing HIV positive (81%) was much higher that of women (18%). This shows that the VCT@WORK is an effective way of reaching out to men, who are not being covered adequately in the AIDS response.
Cumulative results: June 2013 – Dec 2016

Over 6 million workers (3749420 male, 2261806 female and 41248 others) were reached with HIV information; over 4 million tested (2581041 male, 1524631 female and 35440 others) were counselled and took the HIV test. Over 100,000 (67727 male, 34698 and 862 others) HIV positive workers were referred to access anti retro-viral treatment.

<table>
<thead>
<tr>
<th>Time period</th>
<th>Total Workers reached</th>
<th>Total Counselling</th>
<th>Took HIV Test</th>
<th>Tested POSITIVE</th>
<th>Referred to Treatment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total</td>
<td>6052474</td>
<td>4152872</td>
<td>4138047</td>
<td>104926</td>
<td>103286</td>
</tr>
</tbody>
</table>
**Highlights:**

*Populations reached:* In 2016, the VCT@WORK Initiative focussed on key and vulnerable working populations such as entertainment and garment workers in Cambodia; maritime workers and seafarers in Ukraine; migrant coffee production workers in Guatemala; young workers, sex workers, clients of sex workers, cross border traders and migrant workers in Mozambique, retail workers in South Africa, mine and transport workers in India and Russian Federation, and young people in Zimbabwe.

*Locations:* High burden locations such as five high burden States in Nigeria i.e. Enugu, Kaduna, Rivers State, Abuja and Sokoto; the mining and agricultural communities in the high prevalence Hwange district and hotspots in Zimbabwe; hot spots on the transport route and border posts in Mozambique; the Mahwelereng and Tshamahansi village in South Africa; and the Sverdlovck and Chelyabinsk territories in the Russian Federation.

*Testing approaches:* Multiple complementary approaches were used to generate demand for HIV testing in countries. These include: multi-disease testing and health screening programmes (Zimbabwe); programmes on specific days such as World AIDS Day, Occupational Safety and Health Days and Week (Ukraine and Russian Federation); integration into 3-month South Africa Business Coalition AIDS programmes to reach 176 microenterprises in Mokopane and Waterberg district (South Africa); mobilizing churches in Mahwelereng and Tshamahansi and busy Taxi hubs in South Africa; partnering with mobile testing units in Haiti; adopting an integrated approach dealing with alcohol, drugs prevention and health promotion in Honduras; signing a general agreement between Cabinet Ministers, Employers and Trade Unions to scale up HIV testing in Ukraine; and engaging with big companies in India and Russian Federation.

*Halting mandatory testing:* In China, to stop mandatory HIV testing for workers, advocacy at the level of the UN Heads of Agencies led to the drafting of a paper titled “from mandatory testing to voluntary testing”

*Strategic partnerships:* Several strategic partnerships were forged at the national, regional and local levels to facilitate the mobilization of women and men workers to undergo HIV testing. Some of the
partners include the following: National AIDS Control Programme India, National Health Centre for HIV/AIDS, KHANA and the Cambodia Business Coalition (Cambodia); Department of Health, South African Aids Council, Old Mutual, Nedbank (South Africa); the Ministry of Social Policy, State Labour Service, Kyiv City Centre and the Federation of Trade Unions (Ukraine); Business Coalition Against AIDS (ECOSIDA), Associacao para o Desenvolvimento da Familia (AMODEFA) and Associacao Avante Mulher in Mozambique; the Trade Union Congress of Tanzania (TUCTA), Association of Tanzanian Employers (ATE) and Tanzanian AIDS Commission (TACAIDS) in Tanzania.

**Informal economy:** To reach workers in the informal economy, in Zimbabwe, the ILO worked with the Ministry of Small and Medium Enterprises and Cooperatives Development and the Zimbabwe Chamber of Informal Economies Association - an affiliate of the Zimbabwe Congress of Trade Union (ZCTU). Workers were mobilized through informal sector operators using local structures in partnership with the local government and city councils. HIV testing and counselling sessions were organized at 22 informal sector work sites (car repair shops, food processing units, flea markets, vegetable markets etc.) in eight locations in Harare which have high concentrations of informal sector workers. Mobile units provided VCT services to workers. In Tanzania, the informal economy workers were reached with VCT services at open markets, their place of work.

**Public Private Partnerships:** Public Private Partnerships (PPP) were effectively used to promote VCT@WORK. In Mozambique, the ILO collaborated with the Business Coalition on HIV and AIDS (ECOSIDA), Mozambique Railways Company (CFM), sugar industries, Mozambique Airlines, the Ministry of Health through its Provincial Directorates, the National AIDS Council (NAC), the Ministry of Transport, and the Ministry of Labour. In Indonesia, a partnership was established between the ILO and Pertamina, one of the biggest state-owned enterprises with more than 14,000 workers and 25,000 subcontracted workers throughout Indonesia. Pertamina developed a workplace policy to ensure a non-discriminatory working environment for PLHIV and initiated HIV information, counselling and testing for workers in all worksites across the country. In Russian Federation, the ILO partnered with the biggest Russian mining company, the Siberian Coal Energy Company (SUEK) and the territorial AIDS centres. The ILO undertook advocacy and provided awareness raising activities, and the company implemented the programme in all eight locations, reaching out to workers, their families and communities. In India, the ILO worked with 16 large corporate houses who developed HIV policy and programmes with a focus on VCT@WORK and implemented the programme at their own cost in partnership with the ILO and National AIDS Control Programme.

**Data analysis:** In India and Indonesia, the ILO assisted the national AIDS programmes in analysing the HIV testing data related to workers from the government testing centres. The sector-wise, gender-wise and state-wise analysis of data was presented in national workshops involving key stakeholders. The analysis of the selected states, where the ILO partners implemented the initiative and referred workers to take the HIV test at the government centres, provided very useful information and helped in focusing HIV programmes in the sectors and states.

**Advocacy and communications:** Communication and advocacy with top leaders were undertaken. Messages offering the benefits of HIV testing were developed. Celebrities living with HIV³ were

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engaged and their messages were promoted through social media. VCT was promoted in key events: Africa CEO Forum, World AIDS Days, OSH Days, Labour Days etc. Communicating benefits of HIV testing was found to be effective and so was the aspect of involving celebrities and organizing CEO testing events. In India, ILO, the Ministry of Labour and Employment, and the National AIDS Control Organization (NACO) developed and implemented a communication campaign called, The Earlier, the Better, involving people living with HIV who shared their testimonies emphasizing the benefits of knowing your status early.

Lessons Learned

1. As the initiative reached more men, it can be a good model to create demand for and enhance the uptake of HIV services among men, who are often inadequately reached in the AIDS response.
2. Peer educators at workplaces played an effective role in mobilizing workers, providing information and promoting VCT.
3. A strong communication strategy contributed to the success of the initiative. The Getting to Zero at Work campaign provided a solid basis for the implementation of the VCT@WORK Initiative. Communicating ‘the benefits of testing’ helped to convince workers to take the HIV test. Similarly, involving celebrities living with HIV was also found to be very effective.
4. Testing under the broad umbrella of wellness programmes reduces the stigma around HIV testing.
5. Employers’ and workers’ organizations (trade unions) played an important role in mobilization of enterprises and workers respectively.
6. Organization of CEO testing events proved to be very successful. It motivated workers to take the test and also dispelled their fears about facing discrimination or losing jobs if they test HIV positive.
7. Linking the initiative with national AIDS programme and other national initiatives such as the President’s Comprehensive Response Plan in Nigeria; the National Testing Initiative in South Africa; and the migrant workers’ initiative in India helped.
8. Public-private partnerships have a huge potential to scaleup HIV testing for men and women workers, including workers in the supply chains of companies.
9. It is important to track referrals from workplaces to testing centers and also from the testing centers to treatment services for workers who are found positive. This calls for setting up partnerships as well as an effective motoring system.
10. It is important to work with national AIDS programme to ensure that the data related to testing for workers is captured well, analysed and used to inform programmatic decisions.
11. Migrant and informal economy workers can be best reached by taking the HIV information and testing services to where they are. It is difficult for them to travel to testing centres as it means substantial opportunity cost to them, including the loss of daily wages.
12. The next stage involves negotiating with Managers to ensure workers living with HIV are given time off to visit health facilities for their medication. This is an emerging challenge for many workers who test positive.
SOME GOOD PRACTICES:

1. A joint approach to enhancing access to HIV testing and Social Protection for Workers in Kenya

Background
The ILO is prioritising both the scaling up of HIV-sensitive Social Protection and the VCT@WORK Initiative in Kenya and the strategy has been to build synergies between the two priorities. An innovative approach towards enhancing access to HIV testing in the informal economy and facilitating access to national social protection schemes has thus been developed.

Salient features of the strategy
To reach out to truckers, the ILO is partnering with the Central Organization of Trade Unions in Kenya (COTU-K), Kenya Long Distance Truck Drivers’, Allied Workers’ Union/Highway Community Health Resource Centre and Swedish Workplace HIV/AIDS Programme. This partnership provides HIV testing services along the northern transport corridor (Mombasa to Busia). Hotspots for sex workers have been identified as locations for onsite corridor (Mombasa to Busia). Hotspots for sex workers have been identified as locations for onsite testing and counselling (HTC) services.

For hair and beauty salon workers, the ILO is partnering with the Kenya Union of Hair and Beauty Salon Workers, an affiliate of COTU-K and the AIDS Healthcare Foundation. Union officials have been trained on HIV management in the workplace. Onsite integrated HIV testing and counselling services are provided in workplaces, along with awareness on the benefits of enrolling with the National Hospital Insurance Fund (NHIF). The union also mobilizes workers to become members of the Savings and Credit Cooperative (SACCO), encouraging them to save a portion of their income.

The Federation of Kenya Employers, through its Clustered HIV Enterprise Programmes (CHEP) Networks in Mombasa, Uasin Gishu and Laikipa Counties, reaches out to their member companies to scale up the HIV response at their workplace and beyond. VCT@WORK initiatives are organized targeting the informal economy workers from the Jua kali sector (small traders and artisans) with an integrated component of social protection. Officials of NHIF and National Social Security Fund (NSSF) from the specific counties are invited to sensitize workers on the importance of enrolling in the schemes. Wherever possible, workers are provided support for the onsite registration in NHIF.

Results
Between July 2013 and December 2016:

- Over 74,000 workers (44,000 men and 30,200 women), majority being in the informal economy, took the HIV test. Over 1000 found HIV positive were referred to access treatment and social protection.
Over 10,500 male and 8,000 female informal economy workers were enrolled with NHIF. Over 6,000 male and 5,100 female informal economy workers were enrolled with NSSF through different HIV testing events.

Around 500 hair and beauty salon workers have become members of SACCO and can source and access loans.

**Lessons Learned**
Integration of HIV, health services and social protection helps reduce stigma and discrimination.

Onsite HIV testing and enrolment into social protection schemes enhances the uptake of HIV services and coverage of social protection programmes amongst informal economy workers.

Workers in the informal economy are generally not aware of the benefits of social protection schemes, and the process of enrolling in them. Similarly, they are not aware about the benefits of timely HIV testing.

**Next Steps**

Building on the positive experience and partnerships that have been established, the ILO is expanding the VCT@WORK Initiative in other high and medium burden counties.
Under the UNDAF outcome on social protection, the ILO is scaling up the integration of HIV and social protection in more counties targeting workers from formal as well as informal economy.

2. VCT@WORK in Mozambique: Multi disease testing helps

**Background**

HIV prevalence in the adult population is 13.2 per cent in Mozambique. The HIV prevalence is showing an increasing trend; and is much higher in women (15.4 per cent) than men (10.1 percent). Only 33.5 percent of people living with HIV know their status.

Expanding HIV testing and strengthening HIV prevention programme are the national priorities. The ILO is working closely with national stakeholders in the implementation of HIV prevention and promoting HIV testing amongst workers under its voluntary counselling and HIV testing initiative for workers (VCT@WORK Initiative).

In order to normalize HIV testing and create demand, the ILO and its partners are using multi-disease testing approaches which is showing good results.
Salient features of the strategy

The ILO is working with a wide range of partners — ministry of health, ministry of labour, trade unions, employers’ organization, Business Coalition Against AIDS (ECOSIDA), Associacao para o Desenvolvimento da Familia (AMODEFA), Associacao avane Mulher, Cooperativa Wassala and Centro de Desenvolvimento comunitario and informal sector associations — to promote VCT@WORK and provide health services to workers in the formal and informal economies.

Under a broader wellness approach, multi-disease testing involves tests for HIV, TB, Malaria, blood pressure, diabetes and other health conditions.

The Ministry of Health, through the district health units, provides test kits and other laboratory equipment, provides medical staff to supervise, support and monitor the health events to ensure that the protocol for HIV testing is duly followed.

A network of civil society organizations acts as the implementing partner. Employers’ organization and unions mobilize workers to attend the health events in the workplace, which are organized with the technical support of the ILO.

The approach has been implemented in the transport corridors: the post border of Ressano Garcia between Mozambique and South Africa and strategic points along the Maputo Transport Corridors. Employers’ organizations and ECOSIDA have also mobilized some companies such as Mozambique Railways and Acucareira de Mafambisse Sugar Cane Factory. The VCT@Work Initiative has also been implemented in informal markets in Maputo and Beira cities, amongst farmers in Gaza and Maputo provinces and in 25 small and medium enterprises.

Results

During 2016:

- A total of 45 health events were organized.
- Over 55,000 workers (33,000 female and 22,000 male) attended the health events and accessed health information and services: testing for HIV, blood pressure, diabetes, malaria and condoms.
- 42,000 workers (23,000 female and 19,000 male) took the HIV test.
- 3700 (2530 female and 1170 male) who tested positive for HIV were referred to the government hospitals for seeking treatment and care.
Lessons Learned

- A multi-disease testing approach was found to be very effective. This is evident from the fact that a very high - 76 per cent of those who attended health events – took the HIV test as well.
- More women were reached and took the HIV test. This shows that the VCT@WORK Initiative can help in reaching out to women who are at a higher risk in the country.
- The VCT@WORK contributes to strengthening a multi-sectoral response to HIV and AIDS.
- The multi-disease testing increases the demand of health services.
- HIV testing must be accompanied by an awareness raising and demand creation effort in the workplaces.

Next Steps

- Encouraged by the good results of the multi disease approach, the ILO is expanding the VCT@WORK Initiative with a focus on covering the young women and men workers.
- Public-private partnerships created under the initiative are also being scaled up.

3. Trade unions lead the VCT@WORK in Ukraine

Background

Ukraine has one of the fastest growing rates of HIV infection in Europe. The HIV prevalence in the adult population was 0.9 at the end of 2015. The highest incidence of the disease is among young and working age people. Only 54 per cent of people living with HIV know their HIV status.

In order to reduce the HIV testing gap, the ILO has been implementing the voluntary counselling and HIV testing initiative for workers —VCT@WORK—since 2014 in Ukraine. A National Tripartite Cooperation Strategy on HIV and AIDS and the World of Work has been developed and the ILO is engaged in advocacy, capacity building and implementation of HIV testing efforts.

The Initiative involves wide-ranging partners:
National and Regional AIDS Centers, employers’ and workers’ organizations, Ukrainian Network of people living with HIV, ILO and UNAIDS.

**Salient features of the strategy**

The Initiative began in the Cherkassy region. The Federation of Trade Unions – the largest trade union federation in Ukraine having 44 national and 26 regional trade unions – signed an agreement of cooperation with the Regional AIDS Centre. The two agencies joined hands and reached out to workers with HIV information and services in six enterprises in the region.

The ILO trained HIV peer educators in unions as well as enterprises, who provided awareness on HIV and AIDS and created demand for HIV testing. HIV testing events were organized in workplaces in collaboration with the regional AIDS centre.

Building on the success of the initiative in the Cherkassy region, the ILO integrated VCT@WORK in its project — Reducing HIV Stigma and Discrimination to Protect Women and Men Workers from Unacceptable Forms of Work — supported by the Swedish Agency for International Development (Sida).

The Marine Transport Workers’ Union of Ukraine which has a membership of over 70 thousand (27 per cent women), expanded its HIV workplace programme, which is being implemented in Odessa, Kherson and Mykolayiv regions. The union felt it was necessary to intensify their response to HIV and AIDS as a 2015 global survey undertaken by the International Transport Workers’ Federation showed a high numbers of Ukrainian seafarers who stayed away from their partners had engaged in unprotected sex which enhanced their risk to sexually transmitted infections, including the HIV.

The union implemented the VCT@WORK Initiative through its young trade unions leaders who were trained by the ILO as peer educators. The ILO project also developed booklets providing information on HIV, voluntary counselling and testing, stigma and discrimination and law.

The Union procured HIV express test kits for use in the testing events for maritime workers and became the first union in the country to allocate funding for HIV tests. HIV testing was organized after awareness raising events and workshops.

**Results**

Over 8000 of workers in Cherkassy region were reached by awareness-raising activities, and over 2000 took voluntary
counselling and HIV testing during 2014-15.

Over 800 seafarers and their family members were provided awareness on HIV by the Marine Transport Workers Union in 2016 and over 100 took HIV test.

**Lessons Learned**

- Commitment of union leadership played a key role in the success of the Initiative.
- Implementing VCT@WORK within the framework of human right protection helps.
- VCT@WORK, when led by unions, is more effective as workers feel more assured that they will not face discrimination and they will not lose their job in case they turn out to be HIV positive.
- Mainstreaming HIV and undertaking VCT@WORK in the ILO Project “Reducing HIV Stigma and Discrimination to Protect Women and Men Workers from Unacceptable Forms of Work” was found to very effective.

**Next Steps**

- The Marine Transport Workers Union has developed a plan to expand its work on HIV and AIDS, including the VCT@WORK with a focus on reaching 10,000 young workers in 2017.
- The ILO will continue to provide technical support to unions, employers and government in Ukraine to expand VCT@WORK in order to reduce the HIV testing gaps and assist the country reach its fast track target of 90-90-90: 90 per cent know their HIV status; 90 per cent of those who know their status receive treatment; and 90 per cent of those who are on treatment suppress their viral load.

4. Siberian Coal Energy Company leads VCT@WORK in the Russian Federation

**Background**

Siberian Coal Energy Company (SUEK) is the largest coal mining company in the Russian Federation. The company has around 33,500 employees, plus a large number of contractual workers.

SUEK is the first private company in Russia that joined the ILO global initiative on Voluntary Confidential, Counselling and HIV Testing for workers (VCT@WORK). Making a modest beginning in 2015, SUEK expanded its VCT@WORK Initiative in coal and surface mines in all seven territories in partnership with the territorial AIDS Centers and the ILO.

**Salient features of the strategy:**

An orientation and work-planning meeting on VCT@WORK was organized in March 2015 by the SUEK and ILO involving the Health care units of the company. Key elements of the strategy adopted in the meeting were:

- Engage management and trade union leaders for mobilizing workers to seek HIV information and access voluntary HIV counselling and testing;
b) Broadcast pilot VCT@WORK events organized in selected sites to each of the seven territories in order to motivate them to be part of the Initiative;

c) Partner with the territorial AIDS Centers from the planning stage and engage them in video conferences. Territorial AIDS Center provided trainings on HIV to the health staff of the mines and youth leaders, focusing on advantages of early testing, and provided testing services through their teams.

d) Cover contractual workers and their families working around the mining sites as part of the company’s policy.

Information events with the territorial tripartite constituents (ministries of labour, territorial employers and trade unions federations) were also organized to help with the smooth implementation of the Initiative.

SUEK’s work on HIV and AIDS has been recognized at several important events. In October 2015, Dr. Anna Popova, Chief State Sanitary Physician presented the company’s work on HIV and AIDS at a special session on HIV and AIDS chaired by the Prime Minister Mr. Dmitry Medvedev. In April 2016, company’s approach to VCT@WORK was presented during the National Occupational Safety and Health Week in Sochi at a Round table on the “Role of the workplaces in the HIV prevention in Russia” organized by the ILO and Ministry of Labour and Social Protection. In April 2017, SUEK received a letter of appreciation for the HIV workplace activities from the Minister of Health of Russia.

Results

Between mid of 2015 and December 2016:

- Over 20,000 workers and contractual workers received basic information on HIV and AIDS and learnt about the benefits of early HIV testing.
Over 2,000 workers and contractual workers accessed HIV counselling and testing. Seven tested positive and were referred to access anti-retroviral treatment at government’s health centres.

12 management and three trade unions leaders of the SUEK sites participated in the VCT@WORK Initiative and took the HIV test.

SUEK developed strong partnerships with respective territorial AIDS Centers in seven territories of its presence.

Lessons Learned

1. SUEK enterprises’ management commitment, reflected through participation in the VCT@WORK events played an important role in the success of the Initiative.
2. Public private partnerships works well when solutions are explored together. SUEK purchased testing kits as territorial AIDS Centers were short of kits. This shows that test kits can easily be purchased by the companies and territorial AIDS centers can offer testing and counselling through their staff.
3. Round tables at the start-up sites with representatives of the management and unions played an important role.
4. Group pre-testing counselling with individual post-test counselling enables to shorten the time spent on the VCT procedure.
5. Acknowledgement of the SUEK’s work on HIV and AIDS at national platforms encouraged other employers in Russian Federation to develop their response to HIV and AIDS.

Next Steps

- SUEK plans to expand its VCT@WORK initiative as part of its overall Health programme and budget.
- SUEK plans to expand its partnership with territorial AIDS canters and the ILO in reaching out to other enterprises.
5. Employers’ Organizations and Hotel Associations Promote VCT@WORK in Uganda

Background

According to Uganda Population-based HIV impact survey 2016-17, HIV prevalence in the most productive age group (15-49 years) is 6 percent. The epidemic continues to disproportionately affect women, who show a higher HIV prevalence (7.5 per cent) than men (4.3 per cent) in this age group.

Prevalence of HIV varies in different regions and economic sectors. According to the National Macroeconomic AIDS impact study in 2008, the HIV prevalence in the tourism and hospitality industry among workers was found to be 10.3 per cent, much higher than the then national HIV prevalence amongst adult populations. Engagement of young, mobile and migrant workers, prevalence of unprotected sex, stressful working conditions, lack of legal protection, low level of knowledge about HIV and poor access to HIV services, particularly HIV testing, were seen as drivers of the epidemic in the sector.

Promoting HIV testing and counselling is a key component of the AIDS response in Uganda. In collaboration with the National AIDS Commission, the ILO has supported the Federation of Uganda Employers (FUE), and the Uganda Hotels Owners Association (UHOA) to put in place HIV and AIDS workplace programmes for the hotel workers. Promotion of voluntary HIV counselling and testing for hotel workers under the VCT@WORK initiative has shown promising results.

Salient features of the strategy

The VCT@WORK Initiative focuses on seven high HIV prevalence districts, particularly those having cross borderer high-ways running from the eastern Uganda to Western Uganda, connecting Kenya, Rwanda and Democratic Republic of Congo.

Advocacy was conducted with the senior management of hotels in collaboration with FUE and UHOA. Communication messages were developed around the benefits of early HIV testing. Peer educators were trained by the ILO for giving information on HIV and AIDS and creating demand for HIV testing.

A peer educator conducts an HIV session for hotel workers in Iganga district, Uganda.
HIV testing events were planned in consultation with the peer educators, the hotel management and the health departments in the targeted districts. Testing events were organized in different locations that included hotel gardens, town parks and community centres. The workers who tested HIV positive were provided post-test counselling by the hospital counsellors and were referred for further care and treatment.

Based on the needs of hotel workers, a package of health information was offered by different service providers. Workers accessed condoms, received information on safe male circumcision, family planning methods and were able to establish contacts with different health providers in their vicinity for further counselling and treatment.

Results

- Over 1000 hotel managers were reached through the advocacy and training sessions. Advocacy efforts resulted in in-kind contribution worth USD 150,000 by the hotel owners and board members to support the HIV programme in their hotels.
- Over 25,000 men and women hotel workers were reached out under the VCT@WORK Initiative in 10 hotels with HIV and other health information.
- Over 7000 workers accessed HIV Testing and Counselling. HIV positive workers were referred to the public health care facilities for initiation of HIV treatment and care.

Lessons Learned

- Advocacy with top management with the involvement of hotel associations and employers’ organization at sectoral level was the key to the success of the programme.
- Offering a package of health information and participation of different service providers in the HIV testing events was found to be very strategic. Workers appreciated getting all the necessary information in one go directly from the providers in their vicinity. This also resulted in strengthening linkages with care facilities.
- Initially workers were not able to access the services due to long working hours but having the services at workplaces and getting to meet the service providers during events in hotels helped in enhancing the uptake of services.

Next Steps

- Based on the success of the VCT@WORK Initiative and partnerships that have been set in place, the Uganda Hotel Owners Association is scaling up the programme through public-private partnerships.
- The HIV training programmes are being reviewed to cover other important issues such as violence, sexual harassment, occupational safety and health.
- In order to integrate HIV into collective bargaining agreement processes at the level of the hotel industry, the ILO intends to support the National Organization of Trade Unions in the development of a Collective Bargaining Guide for the hotel workers.
6. Caring for miners: Coal India Limited promotes VCT@WORK in India

Background

Coal India Limited (CIL) is the largest public sector coal company in India. It has seven coal producing subsidiaries and a mine planning/consultancy company spread over eight states of India. Operating through 82 mining areas, the company has around 314,000 employees, plus a large number of contractual workers.

A long standing partner of the ILO’s HIV and AIDS workplace programme in India, CIL is engaged in HIV and AIDS workplace programme in all locations since 2008. The company has developed an HIV and AIDS workplace policy and has trained a cadre of master trainers on HIV and AIDS with the help of the ILO.

Recognizing the need to expand HIV testing amongst its employees and contractual workers who are often migrants from neighboring states, the CIL has developed voluntary counselling and HIV testing programme.

Now, CIL is one of the lead companies engaged in the ILO’s global VCT@WORK Initiative. CIL presented its work and experiences at a national workshop organized by the ILO, NACO and the Ministry of Labour and Employment on the theme of Fast Track VCT@WORK in November 2016.

Salient features of the strategy

An orientation and work-planning meeting on VCT@WORK was organized on 24-25 August 2015 by the CIL and ILO involving the HIV nodal officers and HIV master trainers of the company.

Key elements of the strategy adopted in the meeting were:

a) Strengthen the capacity of master trainers and peer educators to promote voluntary HIV testing;

b) Engage unions through the Indian National Mineworkers’ Federation (INMF) for mobilizing workers to seek HIV information and access voluntary HIV counselling and testing;

c) Enhance access to HIV testing in and around coal mines in collaboration with the respective state AIDS control societies; and
d) Cover contractual workers and their families working around the mining sites as part of the HIV and AIDS policy as well as the company’s corporate social responsibility policy.

Results

Between August 2015 and December 2016:

- Over 400 master trainer and peer educators trained by the ILO created demand for HIV testing in and around mining areas using the communication materials developed by the ILO, NACO and ministry of labour under the [Earlier, the Better campaign](#).
- Following a public-private partnership approach, the company set up seven Integrated Counseling and Testing Centers (ICTC) across its eight subsidiaries in collaboration with NACO and state AIDS control societies. The centres were opened to contractual workers as well as communities around the company sites.
- A total of 29,580 employees and their dependants (22387 male and 7193 female) accessed HIV counselling and testing. 141 tested positive for HIV (120 male and 21 female). All have been put on anti-retroviral treatment by the company.
- A total of 6952 contractual workers (5001 males and 1951 female) accessed HIV counselling and testing. 8 were tested positive and were referred to access anti-retroviral treatment at government’s health centres.

Lessons Learned

6. VCT@WORK works better when it is inbuilt into an existing HIV and AIDS workplace programme.
7. Master trainers coming from the medical, the human resource department as well as unions played a key role in promoting HIV counselling and testing.
8. Having HIV counselling and testing centers (ICTCs) at the workplaces, and opening them to contractual workers as well as communities worked very well. Workers were able to access services close to their work sites rather than having to go miles.
9. Involvement of coal sector union such as INMF was found very useful. Workers felt reassured of protection of their rights with the engagement of union and the human resource department who worked hand in hand in the initiative.
10. Management commitment, reflected through the effective dissemination of company’s policy and presence in important events, also played an important role to the success of the Initiative.

Next Steps

- CIL, ILO and NACO have decided to expand the number of Integrated Counseling and Testing Centers (ICTC) particularly in the northern and eastern regions.
- CIL is planning to offer multi-disease testing to its employees and contractual workers in order to de-stigmatize HIV testing and promote a wider wellness approach in the company.