

Outcome 8: The world of work responds effectively to the HIV/AIDS epidemic.

Indicators	2014-15 targets	2014-15 results					
		Total No.	Africa	Americas	Arab States	Asia-Pacific	Europe-Central Asia
Indicator 8.1: Number of Member States that, with ILO support, develop a national tripartite workplace policy on HIV/AIDS, as part of the national AIDS response.	6 member States	3 member States	Seychelles Guinea			Cambodia	
Indicator 8.2: Number of Member States where tripartite constituents, with ILO support, take significant action to implement HIV/AIDS programmes at workplaces.	30 member States	33 member States	Benin Burkina Faso Cameroon Chad Democratic Republic of Congo Ethiopia Kenya Malawi Mozambique Nigeria Senegal South Africa Swaziland Uganda United Republic of Tanzania Zambia Zimbabwe	Bolivia Brazil Chile Dominican Republic Guatemala Honduras Paraguay		Cambodia China India Indonesia Sri Lanka Thailand Viet Nam	Russian Federation Ukraine

How the strategy delivered on the two or three areas of focus identified in the programme and budget 2014-15

Preventing new HIV infections among workers while addressing discrimination and extending social protection floors to workers living with or affected by the virus were the main areas of focus. To that end, the ILO focused on supporting constituents' efforts to offer voluntary HIV counselling and testing through the voluntary and confidential HIV counselling and testing initiative, VCT@WORK. Through direct support and national partners in 31 countries worldwide, testing was offered and data collected through a reporting tool developed by HIV/AIDS and the World of Work Branch (ILOAIDS). As a result, nearly 2 million workers received comprehensive information and counselling on HIV and AIDS and 1.2 million workers (55 per cent men, 38 per cent women and 1 per cent other) agreed to take the test. Some 3.2 per cent of these workers tested positive and were referred to appropriate centres for HIV treatment and care.

The ILO also provided technical and legal advice on specific workplace programmes and policies in 23 countries, where the workplace became a key entry point for prevention and care services for an additional 750,000 workers and their families. This work is the result of partnerships with national constituents, regional bodies such as the Southern African Development Community (SADC), HIV/AIDS coordination bodies and service providers. In Cambodia, China, Kenya, Senegal and South Africa, the ILO focused on the protection of health sector workers and the promotion of non-discrimination in health-care settings.

The findings of evidence-based research on good practices in 10 African countries and 66 workplaces were widely disseminated to policy-makers, businesses and trade unions. The research confirmed the importance of management commitment and worker involvement in successful workplace programmes and of enhancing knowledge of ways to prevent HIV-related stigma and discrimination. It also found good examples of the increased success of anti-retroviral treatment when it is available through the workplace.

The Swedish International Development Cooperation (Sida)-funded programme on Economic empowerment and HIV vulnerability reduction along transport corridors in Southern Africa, which covers six countries, enabled the ILO to provide business management skill training and support job creation through cooperative and micro-enterprise development and helped women and men workers to move out of informality. With increased income, workers reduce their vulnerability to HIV. A survey conducted among the beneficiaries in Zimbabwe showed that the number of women involved in multiple concurrent partnerships decreased from 14 per cent to 0 while awareness of HIV services increased from 71 per cent to 92 per cent.

An ILO research paper highlighted the challenges and barriers that workers living with HIV and their households face in accessing social protection programmes and made recommendations on ways to overcome them. On that basis, the ILO advocated for more HIV-sensitive social protection schemes and for expanded and inclusive coverage. In Mozambique, it supported the review of the National Basic Social Protection Strategy to address the specific needs of people living with HIV and in Indonesia, it supported the establishment of a national working group to monitor access to social protection services by people living with HIV and take corrective measures where necessary.

How the strategy delivered support to constituents

The ILO supported constituents at the country and subregional levels with a focus on key economic sectors where workers are at higher risk of HIV infection, such as mining, transport, retail and tourism. In South Africa, a joint effort by the social partners in the retail sector helped to increase the use of voluntary HIV counselling and testing by workers and a 2015 handbook on HIV in the retail

sector was developed with constituents' support to guide future activities. In the mining sector, the social partners implemented HIV/AIDS workplace policies and programmes with ILO assistance and in collaboration with the national AIDS centres. In Russia and Zimbabwe, a total of 29 mining companies have benefitted from this initiative to date. An ILO partnership with South Africa's University Research Council facilitated the implementation of HIV and tuberculosis (TB) programmes by constituents in the mining sector. For the tourism sector in Jordan and Uganda, the ILO helped produce advocacy and training tools to set up and manage HIV workplace programmes and in Zimbabwe, it supported constituents' efforts to draft a policy to steer HIV response in the tourism sector. In the transport sector, the "corridor approach", adopted in the countries covered by the Sida-funded project in southern Africa, involves both transport workers' and employers' organizations.

Data collected by the ILO shows that over 755 government officials, 847 representatives of employers' organizations and 1,814 representatives of workers' organizations have been trained in HIV prevention, treatment, care and support. Technical advice provided to employers' and workers' representatives in 28 countries enabled them to negotiate with the national AIDS coordinating bodies and ensure that the world of work was a priority in national strategic plans. Technical capacity building was provided to ministries of labour and social partners in 26 countries with a view to the formulation of policies and labour legislation and the negotiation of collective agreements that reflect the key principles of the HIV and AIDS Recommendation, 2010 (No. 200). In Nigeria, the HIV and AIDS Anti-Discrimination Act 2014 was drafted with technical input from the tripartite partners and signed into law in January 2015.

How the strategy helped to address gender equality and non-discrimination

Compliance with non-discrimination policies and laws has been addressed through a training handbook designed to help labour inspectors to identify cases of discrimination in the workplace or in legal proceedings; a total of 202 inspectors were trained. In Haiti and Guatemala, training enhanced the capacity of labour inspectors to include and address HIV-related issues during their workplace visits, including by advising employers and workers on the development and implementation of workplace policies and programmes that integrate the key human rights principles of Recommendation No 200.

Modules on sexual and reproductive health and rights, empowerment, gender-based violence and other gender aspects of HIV vulnerability were incorporated into the Organization's economic empowerment tools. In Ethiopia, the ILO collaborated with the Ethiopian Employers Federation and the Ethiopian Producers and Exporters Association to provide 6,000 internal migrant women workers in the horticulture industry with HIV, gender-based violence and reproductive health and rights materials. In Nigeria, the ILO supported the families of abducted Chibok girls through programmes that included components on gender-based violence and HIV prevention.

Significant external partnerships that have helped in delivering the strategy

The ILO's partnership with the secretariat of the Joint United Nations Programme on HIV/AIDS (UNAIDS) and its 11 co-sponsors is an essential alliance in support of the world-of-work response.

The ILO used the Joint WHO/ILO HealthWISE Guidelines to train 39 nurses from the Kenya National Union of Nurses as master trainers to enhance health workers' knowledge of HIV and TB in the context of occupational safety and health. In China, 11 hospitals with 31,000 health care workers received similar support and developed programmes to protect both health-care workers and

patients from HIV-related discrimination in health-care settings. In collaboration with UNAIDS, the United Nations Children’s Fund (UNICEF), the World Food Programme (WFP), the World Bank, the tripartite constituents and other partners, the ILO also published a global study: *Access to and Effects of Social Protection on Workers living with HIV and their Households*. In another partnership involving UNAIDS, WHO, UNICEF, WFP, the Global Network of People Living with HIV (GNP+) and the Global Fund to Fight AIDS, Tuberculosis and Malaria, it conducted two capacity-building courses for 45 national HIV and social protection stakeholders from different regions at the Turin Centre.

Implementation of the VCT@WORK Initiative in 31 countries from all regions rallied a large number of national, subregional and global partners, including UNAIDS, GNP+, the ACCORD Group, the International Organisation of Employers (IOE), the International Trade Union Confederation (ITUC), the International Transport Workers’ Federation (ITF), Sida, the Swedish Workplace HIV/AIDS Programme (SWHAP) and other partners and co-sponsors.

Significant outputs	
Knowledge generation and management	<ul style="list-style-type: none"> • Study: <i>Access to and Effects of Social Protection on Workers living with HIV and their Households</i> (2014). The evidence generated from the study has been used to advocate for the removal of exclusion clauses from social protection schemes in some countries, including Cambodia, Indonesia and Sri Lanka. • Study: <i>Effective responses to HIV and AIDS at work: A multi-country study in Africa</i> (2015). The study promotes the findings of an assessment of key factors in the effectiveness of HIV and AIDS workplace initiatives. A good-practice tool, it has been disseminated and is informing HIV workplace programmes in 15 countries. • HealthWISE Work Improvement in Health Services – Action Manual (2014) and Training Guide (2015). The HealthWISE tool serves as a quality assurance standard for the health workforce. In countries such as the United Republic of Tanzania and Senegal, it has been made an integral component of quality control. • Operational guidelines: Respecting human rights in the implementation of the VCT@Work initiative (2015). Implementation of the operational guidelines, which emphasize rights in the context of HIV testing, has led more people to volunteer to be tested. • Study: <i>Leaving No One Behind: Reaching Key Populations through workplace action on HIV and AIDS</i> (2014). The evidence generated from this study has been integrated into the curriculum of the ILO training programme on HIV/AIDS and social protection.
Upstream policy advice	<ul style="list-style-type: none"> • Policy advice and technical support for preparation of the Code of Conduct for TB/HIV in the Mining Sector, which was finalized in September 2014 and submitted for endorsement by the SADC Ministers of Labour and Health in 2015. The ILO contribution to this policy document has triggered a more systematic HIV-TB response within the mining sector by aligning Ministries of Health and Labour around HIV/TB co-infection. • Technical support for finalization of the East African Community (EAC) HIV and AIDS Workplace Policy for Community organs and institutions. As a result of this policy, a workplace component has been incorporated into the EAC HIV strategic framework, allowing world of work actors to set priorities within the HIV response.
Capacity development	<ul style="list-style-type: none"> • Two training programmes on “HIV and AIDS and the World of Work: a prevention and social protection perspective”, organized in collaboration with ITCILO. These training programmes have built the capacity of over 50 national experts from 20 countries to influence workplace policies and programmes in their countries.
Strategic normative support	<ul style="list-style-type: none"> • Handbook on HIV and AIDS for labour inspectors. This training tool enhanced the trained inspectors’ capacity to recognize discrimination cases and increase workplace compliance at the enterprise level.