

Facts on HIV and Work



"Social and economic inequality has been a key factor in the spread of HIV. The ongoing global economic crisis will aggravate this situation and hard won gains will undoubtedly be under pressure... At this turbulent time, strong leadership and a clear vision that connects people's lives and livelihoods with recovery and growth are all the more critical if we are to keep the promise to stop AIDS."

Juan Somavia, ILO Director-General, World AIDS Day 2008

The majority of the 33.2 million people living with HIV are employed and in their most productive years, with skills and experiences their families, workplace and country can ill afford to lose. Yet many workers are forced out of jobs because of stigma and discrimination. For others, their working lives are cut short because of lack of information about, or access to, prevention, treatment, care and support.

The world is now facing a global financial and economic crisis that has a number of implications for people who have contracted HIV and for those vulnerable to infection. The loss of work in an AIDS-affected household may lead to children being taken out of school and put to work. It also often means the end of HIV treatment for workers receiving antiretrovirals through their workplace or needing income to cover their costs. Increasing precariousness of employment may also result in coping strategies that increase exposure to the risk of HIV.

for approximately 45% of new HIV infections world wide (UNAIDS 2008). The ILO estimates that some 75 million young women and men are unemployed. The vast majority of them live in developing countries. High levels of youth poverty and unemployment contribute to HIV vulnerability, as when income is needed, young people may undertake work that is marginal, dangerous or illegal. This makes youth employment a key strategy for the prevention of HIV and AIDS and to facilitate access to treatment so that young workers can contribute productively to society.

Young people aged 15-24 account

The ILO gathers gender-disaggregated data on the impact of the

crisis. This is of enormous importance in preventing a worsening of the gender inequality which is already a factor driving the spread of HIV. Women represent two-thirds of people under 25 living with the virus (Unicef 2009). They also shoulder the greatest part of the burden of care. The ILO takes account of the different status of, pressures on and needs of men and women in its policy guidance and technical cooperation activities. The integration of HIV/AIDS in livelihood and entrepreneurship programmes for women helps address structural drivers of the epidemic as well as providing vital information and education.

Of the some 200 million people living outside their country of birth in 2005 (2.9% of the world's population) about half were men and women who had migrated for work. Untold numbers of migrant workers experience particular HIV risks and needs. Numerous factors may expose them to HIV risk and vulnerability including separation from families, regular partners, and familiar social situations; language barriers, discrimination and social exclusion; substandard living conditions, exploitative working conditions, and poor incomes; and sexual violence. The resulting isolation and stress may result in behaviours, such as unsafe casual or commercial sex, that potentially increase risk of exposure to HIV. This is exacerbated by inadequate access to HIV prevention, voluntary testing and treatment services and fear of being stigmatized for seeking information.

The role of the ILO

The protection of workers' rights, lives and health has been a key ILO objective since it was created 90 years ago. In 2000 ILO member States passed a Resolution that led to the creation of a **Programme on HIV/AIDS** and the world of work later that year. In 2001, the ILO Governing Body adopted the groundbreaking *ILO Code of Practice on HIV/AIDS and the world of work.* The Code provides guidance on HIV issues in the workplace and sets out key principles for policy development at the enterprise and national levels. It has been translated into nearly 60 languages and has been used as a basis for policy in over 1,000 enterprises and for national policy and legislation in 70 countries.

The success of workplace programmes has led to a growing demand for a new international labour standard on HIV/AIDS to reinforce the impact of the ILO Code of Practice, eliminate discrimination and promote universal access to prevention, treatment, care and support. The March 2007 session of the ILO's Governing Body put a standard-setting item on HIV/AIDS on the agenda of the International Labour Conference (ILC) in 2009. A second discussion will be held in June 2010 with a view to the adoption of an autonomous Recommendation on HIV/AIDS and the world of work. Through their initiatives at the country level and support for the new instrument, ILO constituents are playing a key role in strengthening the legal and policy framework to address the HIV/AIDS epidemic and ensure respect of human rights of people living with HIV.

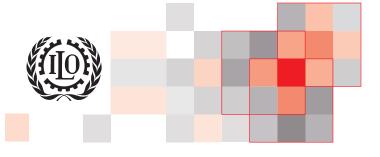
The ILO is one of the 10 cosponsors of the **Joint United Nations Programme on HIV/AIDS (UNAIDS)**, contributing leadership in the world of work for the development and implementation of prevention, care and support programmes for workers in the formal and informal economies. It also brings its expertise in a number of other areas including social protection, income generation and occupational health and safety. The ILO carries out activities with all of the other UNAIDS cosponsors: for example, the United Nations

Strengthening ILO instruments applicable to HIV/AIDS through a new international labour standard: the agenda of the International Labour Conference in 2009 and 2010 includes an item intended for "the development of an autonomous Recommendation on HIV and AIDS in the world of work."

The aim is to:

- Support national HIV/AIDS programmes through a strengthened world of work response
- Promote coordinated action among key workplace actors
- Reinforce the impact of the ILO Code of Practice
- Review developments since 2001 in the epidemic and global response

Educational, Scientific and Cultural Organization (UNESCO) for the development of HIV/AIDS workplace policies and programmes for teachers. The ILO has developed policy guidance with the World Health Organization (WHO) to ensure that health care workers have decent, safe and healthy working conditions, including the prevention of occupational exposure. These include Joint ILO/WHO Guidelines on health services and HIV/AIDS and Joint WHO/ILO Guidelines on post-exposure prophylaxis to prevent HIV infection. As tuberculosis is one of the leading causes of death for people living with HIV in low-and middleincome countries, the two agencies have produced the ILO/WHO Guidelines for Workplace TB Control Activities to address co-morbidity through workplace action.



International Labour Office 4 route des Morillons CH-1211 Geneva 22 Switzerland Tel: +41 22 799 79 12