

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

**Table 1: Summary of results by indicator and by typology**

Indicators	Target	Results					Capacity Development	
		Total No.	Policies and strategies	Programmes	Regulatory/ Legal Framework	Capacity Development		
						Institutional capacity	Data collection and analysis	
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.	28 member States, of which 12 in Africa, 6 in the Americas, 1 in Arab States, 2 in Asia Pacific, 7 in Europe	12 member States, of which 7 in Africa, 1 in the Americas, 1 in Arab States, 3 in Asia Pacific	Cameroon, Comoros, Cote d'Ivoire, Nigeria, Madagascar, Mauritius, Zimbabwe, Guatemala, Jordan, Lao People's Democratic Republic, Papua New Guinea, Solomon Islands					
8.2. Number of member States where tripartite constituents, with ILO support, take significant action to implement HIV/AIDS programmes at workplaces.	17 member States, of which 10 in Africa, 2 in the Americas, 2 in Arab States, 1 in Asia Pacific, 2 in Europe	37 member States, of which 21 in Africa, 6 in the Americas, 7 in Asia Pacific, 3 in Europe	Benin, Botswana, Burkina Faso, Burundi, Chad, Democratic Republic of the Congo, Ethiopia, Ghana, Kenya, Lesotho, Malawi, Mozambique, Namibia, Rwanda, Senegal, Uganda, United Republic of Tanzania, South Africa, Swaziland, Zambia, Zimbabwe, Brazil, Chile, Costa Rica, Honduras, Jamaica, Paraguay, Cambodia, China, Fiji, Indonesia, India, Sri Lanka, Thailand, Russian Federation, Tajikistan, Ukraine					

**Table 3: ILO results chain: Country examples** (Three to be selected from below)

Country	ILO contribution (outputs delivered by the Office)	Results (action taken by the country)	Gender-specific
Cambodia	<p>The ILO, based on results of its pilot legal aid service for the entertainment sector workers in 2010-2011, advocated with the national AIDS program to include legal services as part of an "essential package of services of the national AIDS program". In this process, the ILO</p> <ul style="list-style-type: none"> <li>▪ Conducted an <b>assessment</b> of working conditions in the entertainment sector</li> <li>▪ Organized a <b>dissemination</b> workshop with tripartite partners and civil society organizations to discuss the findings and identify actions</li> <li>▪ Based on the recommendations from the workshop, set up a <b>pilot HIV-OSH workplace programme for the entertainment sector</b></li> <li>▪ <b>Advocated</b> with tripartite partners for the inclusion of entertainment workers' need in OSH and HIV prevention programs</li> <li>▪ <b>Developed training materials &amp; communication tools</b> on HIV and OSH for entertainment workplaces</li> <li>▪ Conducted <b>regular monitoring</b> of enterprise HIV-OSH programs. Trained an NGO to facilitate the implementation of the pilot programme on HIV prevention and OSH for entertainment workers.</li> <li>▪ Funded a technical consultant to assist the Ministry of Labour and Vocational Training, social partners and other partners to develop a policy on HIV and AIDS and OSH for the entertainment sector.</li> </ul>	<p>The <b>legal aid service</b> established by the ILO for entertainment workers has been incorporated in the national AIDS programme, thus ensuring national scale-up of the service as well as sustainability.</p> <p><b>12</b> Entertainment establishments have now a workplace programme in line with the labour regulation-PRAKAS No. 086</p> <p>The Ministry of Labour and Vocational Training (MOLVT, <b>developed a new regulation (Prakas) on HIV, AIDS and OSH for entertainment workers</b> taking into account the key principles of R200. in consultation with other key line ministries, social partners and key stakeholders,</p>	x
China	<p>-Assessment of the healthcare workers' knowledge, attitude and behaviour concerning HIV and OSH in Henan and Anhui Provinces.            -Consultations among the State Council HIV and AIDS Committee, the China Centre for Disease Control (CDC), managers of two general hospitals in Henan, UNAIDS and other stakeholders to plan interventions in two general hospitals in China, based on the assessment findings.            - ILO report on HIV related Discrimination within Healthcare Settings used to develop an action plan to address HIV related discrimination at healthcare settings in China.</p>	<ul style="list-style-type: none"> <li>• Two general hospitals in Henan province established HIV and OSH program, based on bipartite consultation as well as national level inputs, consistent with the key principles of Recommendation 200.</li> <li>• Hospitals trained 42 health workers (28 females and 14 males) on HIV and OSH from two hospitals in Henan Province.</li> </ul>	x
Zimbabwe (suggested by African Region)	<p>-A Corridor Economic Empowerment Innovation Fund (CEEIF) established to provide loans for women and men operating along the transport corridors or associations of PLHIV, to start economic activities            - Business management training for women and men living with or affected by HIV provided in collaboration with SEDCO (Small Enterprise Development Corporation)            -technical comments provided to the Ministry of Labour and the social partners to developed the national policy on HIV and the world of work and the policies on HIV in the tourism and engineering sector            -HIV testing and counselling campaigns</p>	<p>Through the savings and credit cooperatives system, beneficiaries have access to social services such as medical insurance for individual group members who would otherwise not be able to afford it. A 6% increase in men not engaging in transactional sex and a 28% increase among female beneficiaries reporting not engaging in transactional sex at all were reported.</p> <p>30 beneficiaries, among people living with or affected by HIV, started a soap and floor polish manufacturing business and SACCOs members have gone into various types of businesses including cross border trading, laundry service provision, flea markets, take-away food and</p>	

Country	ILO contribution (outputs delivered by the Office)	Results (action taken by the country)	Gender-specific
	organized for communities along transport corridors and hot spots resulting in the testing of more than 1500 people.	laundry . Over 70% of intervention beneficiaries are women and young girls.	

#### Lessons learned (max. 200 words)

Changes in the HIV epidemic as well as a better reflection of the constituents' needs - highlighted by the revised strategy for HIV and AIDS interventions adopted only in March 2012 - have resulted in re-prioritizing programmes for scaling up access to HIV prevention and care (reported under indicator 8.2), over policies (reported under indicator 8.1), leading to over-reporting or under-reporting in the course of the biennium.

The impact of ILO's work is stronger where HIV and AIDS policies and programmes are integrated in broader strategic frameworks targeting OSH, social protection, health (including TB) and it is based on the collaboration with other Ministries. In particular, the VCT@Work Initiative has demonstrated the need for strong policy dialogue going beyond the ILO constituents and encompassing other key stakeholders such as Ministry of Health, National AIDS bodies, UNAIDS and civil society, which takes into account the complementarity of the different actors in service provision, policy development and coordination.

Interventions for this biennium took into account the need for evidence-based knowledge to inform focussed programmes. This has ensured targeted interventions that have combined HIV and AIDS prevention and care with economic empowerment approaches, addressing socio-economic drivers of the epidemic... Preliminary findings of the Global Product on the impact of the social protection floor on workers in the informal employment show the need for ILOAIDS to design focussed interventions in the informal economy tailored to address the provision of social protection mechanisms for informal sector workers and their households

**Table 4: Summary of most significant outputs by typology**

Knowledge generation and dissemination	<ul style="list-style-type: none"> <li>• Research on "What works" to identify 'what has proven to work in HIV and AIDS workplace initiatives implemented in ten African countries (Côte d'Ivoire, Ghana, Kenya, Madagascar, Morocco, Mozambique, Namibia, Senegal, South Africa, Zambia, and guide future programme design in different epidemic contexts.</li> <li>• Research on the impact of social protection schemes on workers in the informal economy affected by HIV and AIDS</li> <li>• ILO Global estimates on the impact of HIV/AIDS on the male and female labour force and the working age population</li> <li>• Country Survey on "Life of truck drivers. Working conditions and sexual health of Bolivian and Chilean truck drivers" <a href="http://www.ilo.org/santiago/publicaciones/WCMS_195197/lang--es/index.htm">http://www.ilo.org/santiago/publicaciones/WCMS_195197/lang--es/index.htm</a></li> <li>• Study on Discrimination against People Living with HIV within Healthcare Settings in China</li> </ul>
Policy advice and technical services	<ul style="list-style-type: none"> <li>• Two general hospitals in Henan province established HIV and OSH program, based on bipartite consultation as well as ILO technical inputs, consistent with the key principles of Recommendation 200.</li> <li>• In Zimbabwe, an Innovation Fund was established through ILO technical support to reduce HIV vulnerability of workers along the Transport corridors and "hot spots" allowing them to access credit and related services from microfinance organizations (MFIs) (Innovation Fund also replicated in South Africa, Mozambique, Zambia, Malawi and Tanzania)</li> <li>• The Technical Assistance guidelines for the implementation of the South Africa Code of Practice on HIV and AIDS and employment, developed through ILO advice, have been used to implement 5 workplace programmes have been in the country covering: the National Department of Labour, the National Health Laboratory Services (NHLS), the Health of other Service Personnel Trade Union of South Africa (HOSPERSA), the Federation of Democratic Unions of South Africa, and a Joint Labour Programme on HIV/AIDS for the Organized Labour.</li> </ul>
Capacity building	<ul style="list-style-type: none"> <li>• Training course on HIV and AIDS, a Social Protection perspective organized with ITC, Turin in 2012 built the capacity of 27 national experts (constituents, National AIDS Bodies representatives and policy makers) from 19 countries</li> </ul>
Policy dialogue and advocacy	<ul style="list-style-type: none"> <li>• VCT@Work Initiative jointly launched by ILO and UNAIDS to reach five million workers to undertake HIV voluntary counselling and testing by 2015. In September 9,800 workers 2013, approximately workers in 5 countries (Tanzania, Ghana, Zimbabwe, Nigeria, Lesotho, South Africa) undertook VCT</li> </ul>