



Governing Body

310th Session, Geneva, March 2011

GB.310/17/1(Rev.)

FOR DECISION

SEVENTEENTH ITEM ON THE AGENDA

Report of the Director-General

First Supplementary Report: Global Action Plan to promote implementation of the HIV and AIDS Recommendation, 2010 (No. 200)

Overview

Issue(s) covered/Executive summary

The Global Action Plan proposed to promote the HIV and AIDS Recommendation, 2010 (No. 200).

Policy implications

The Global Action Plan sets out the actions proposed to be taken by the Office in providing technical and advisory support to the constituents to assist them in giving effect to Recommendation No. 200.

Financial implications

Resource gaps in relation to the activities proposed have been identified and a detailed budget and request for additional resources are being prepared.

Decision required

Paragraph 36.

References to other Governing Body documents and ILO instruments

GB.304/PFA/2(Rev.); GB.309/3/2(Rev.); GB.309/LILS/5.

Convention No. 111.

ILO Declaration on Fundamental Principles and Rights at Work, 1998.

ILO Declaration on Social Justice for a Fair Globalization, 2008.

Global Jobs Pact, 2009.

Executive summary

- Title:** Global Action Plan to promote implementation of the Recommendation concerning HIV and AIDS and the World of Work, 2010 (No. 200).
- Purpose:** To set out the actions the Office proposes to take by 2015, subject to the availability of internal and external resources, to promote implementation of Recommendation No. 200.
- Counterparts:** Collaboration is contemplated between ILO headquarters, the regions and field offices; between ILO–AIDS and the Bureau for Employers’ Activities (ACT/EMP), the Bureau for Workers’ Activities (ACTRAV), and with other units including the International Labour Standards Department (NORMES), the Employment Sector, the Social Protection Sector and the Social Dialogue Sector, the Bureau for Gender Equality, the Department of Statistics, the Department of Policy Integration and the International Training Centre of the ILO in Turin (ITC–ILO). In addition, the ILO will work with the International Organisation of Employers (IOE), the International Trade Union Confederation (ITUC), the Joint United Nations Programme on HIV/AIDS (UNAIDS) and its co-sponsors and in cooperation with other intergovernmental and non-governmental organizations, in particular the organizations of persons living with HIV (PLHIV) and national AIDS authorities.
- Duration:** Initial period of five years (2011–15).
- ILO unit responsible:** ILO Programme on HIV/AIDS and the World of Work (ILO–AIDS).

I. Context for the Global Action Plan

1. At its 309th Session, the Governing Body requested the Office to establish the Global Action Plan (GAP) called for in the resolution adopted by the International Labour Conference (ILC) in June 2010 concerning the promotion and the implementation of the Recommendation concerning HIV and AIDS and the World of Work, 2010 (No. 200).¹
2. The Recommendation optimizes the contribution of the world of work to the global HIV response. It builds on key principles established in the *ILO code of practice on HIV/AIDS and the world of work* (2001) and enhances the role of the world of work in facilitating access to prevention, treatment, care and support services. It calls on member States to develop, adopt, implement and monitor national tripartite workplace policies and programmes on HIV and AIDS and integrate these into national HIV policies and strategies.
3. The resolution also calls for States to use existing national mechanisms or establish new ones to review progress, monitor developments and share good practices on the implementation of national HIV workplace policies and programmes (paragraph 5).
4. To ensure successful and cost-effective implementation of the outcomes and outputs contemplated in the GAP, the Office intends to mainstream HIV issues into the activities of relevant existing and future ILO programmes at headquarters and in the field, in accordance with ILO Circular No. 187(Rev. 1), Series 2, of 26 February 2001.
5. Consultations are being carried out to ensure alignment of the GAP with the ILO Strategic Policy Framework 2010–15 and the ILO–AIDS Strategic Framework 2011–15, and coherence between the outcomes, outputs and indicators in the GAP and those in the outcome-based workplans for 2010–11 and 2012–13. Common outcomes and priorities have been identified and relevant outputs and indicators established to measure the impact of the Office’s work (see appendix).
6. The GAP takes into consideration the Social Protection Floor Initiative and the Declaration on Fundamental Principles and Rights at Work, the Declaration on Social Justice for a Fair Globalization and the Global Jobs Pact. As the ILO has been a co-sponsor of UNAIDS since 2001, the GAP also takes into consideration the UNAIDS Unified Budget and Accountability Framework and the UNAIDS priority areas, which focus on key themes including gender equality, human rights and social protection.
7. The GAP is structured around three main outcomes:
 - (a) reduction of stigma and discrimination on the basis of real or perceived HIV status against women and men workers, their families and dependants;
 - (b) increased access for workers, their families and dependants to prevention, treatment, care and support services through the world of work; and
 - (c) scaled-up action by world of work actors to the HIV response and increased access to funding for this purpose.

¹ GB.309/3/2(Rev.).

Human and financial resources

8. Full implementation of the activities envisaged will require effective mainstreaming of HIV issues in relevant ILO activities and additional resources beyond those allocated through the regular budget and technical cooperation resources currently available to ILO–AIDS. The Office will seek extra-budgetary resources, including RBSA, to support full implementation.

Building capacity

9. The Office will provide advice and support to enhance the capacity of ILO constituents to develop HIV workplace policies at national, sectoral and enterprise levels that reflect the principles of the Recommendation. This support will facilitate constituents' engagement with national AIDS programmes and donors, particularly the Global Fund to Fight AIDS, Tuberculosis and Malaria (GFATM), the President's Emergency Plan for AIDS Relief (PEPFAR) and different foundations. The Office will collaborate with ITC–ILO on an annual global training programme on HIV for ILO constituents and partners and mainstream HIV into relevant Turin Centre training programmes. Training manuals and tools will be developed or updated and training provided at the national level in collaboration with key national institutions.

Communication

10. The Office will develop and implement a communication strategy to promote the Recommendation, targeting ILO constituents, the private sector, the United Nations and other intergovernmental organizations, organizations representing PLHIV and other civil society organizations. The strategy will include documentation and dissemination of good practices.

II. Contributing to the Decent Work Agenda

A. Fundamental principles and rights at work

11. The Recommendation affirms that “the response to HIV and AIDS should be recognized as contributing to the realization of human rights and fundamental freedoms and gender equality for all” (Paragraph 3(a)). It establishes that “real or perceived HIV status should not be a ground of discrimination preventing the recruitment or continued employment, or the pursuit of equal opportunities” (Paragraph 10). In this regard, the Recommendation invites member States to consider affording protection equal to that available under the Discrimination (Employment and Occupation) Convention, 1958 (No. 111) “to prevent discrimination based on real or perceived HIV status” (Paragraph 9).
12. The Recommendation also provides that there should be no mandatory HIV testing and screening for employment purposes or mandatory disclosure of HIV status. It further provides that HIV status is not a valid ground for termination. The Office will provide technical and advisory services to member States to assist them in taking policy or legislative measures to prevent employment-related discrimination on the basis of real or perceived HIV status, in consultation with employers' and workers' organizations, organizations representing PLHIV and other relevant actors.

B. Employment

13. The Recommendation underscores the need for persons living with or affected by HIV to be able to continue in employment as long as they are fit to do so, with reasonable accommodation as necessary (Paragraph 13). Retention in employment is often the primary – if not the only – means of ensuring that workers have access to work-related services and benefits. The Recommendation calls on Members to promote recruitment and retention of PLHIV in employment and extend support to persons living with or affected by HIV or AIDS during periods of employment and unemployment, including through income-generating opportunities (Paragraph 22).
14. The HIV workplace policies and programmes envisaged should be integrated “in development plans and poverty reduction strategies, including decent work, sustainable enterprises and income-generating strategies, as appropriate” (Paragraph 4(b)). The Office will therefore develop materials to promote recruitment and retention of PLHIV in employment and assist constituents to stimulate income-generating opportunities for HIV-affected workers and their families.
15. The Office’s training programmes on entrepreneurship and skills development will mainstream HIV issues. Particular focus will be on women and girls, who are doubly disadvantaged owing to gender inequalities. The Office will develop and disseminate training materials aimed at enhancing the entrepreneurial capacity of key vulnerable groups.
16. Many national HIV strategic plans make reference to HIV-related stigma and discrimination and to the need to provide support to PLHIV, but do not articulate a targeted strategy aimed at removing barriers to access to employment and occupation. Nor do many involve ministries of labour and organizations of employers and workers and other relevant actors in the development of income-generating strategies or in the policy development process. Through national tripartite-plus workshops in those member States that request it, the Office will provide guidance on the development of HIV and TB workplace policies and programmes that are inclusive and targeted, and that reflect the principles of the Recommendation, and will support the process of submission under article 19 of the ILO Constitution.
17. The Global Jobs Pact calls for targeted HIV workplace prevention programmes. The development and effective delivery of these programmes require active involvement of world of work actors, including PLHIV, at national, sectoral and enterprise levels. The Office will intensify its technical cooperation projects in this area, developing and disseminating accessible promotional materials adapted to gender, cultural and language concerns, working through national actors to ensure that programmes are sustainable and cost-effective, and promote collaboration between workplace partners.
18. The Recommendation calls for measures to protect children and young workers and address their special needs in national HIV workplace policies and programmes (Paragraph 36). The dissemination of information on HIV through youth employment programmes, including vocational training programmes, is of particular importance. The Office will therefore assist constituents to address HIV and AIDS in such policies and programmes, in collaboration with the ILO Youth Employment Programme and the UNAIDS Inter-agency Task Team (IATT) on HIV and young people.

C. Social protection

19. The Recommendation calls for measures to take into account ILO standards on occupational safety and health, “and other relevant international instruments, such as joint International Labour Office and WHO guidance documents” (Paragraph 30). “Safety and health measures to prevent workers’ exposure to HIV at work should include universal precautions, accident and hazard prevention measures” (Paragraph 31). Since the adoption of Recommendation No. 200, the ILO and UNAIDS co-sponsors have adopted Joint WHO–ILO–UNAIDS policy guidelines on improving health workers’ access to HIV and TB prevention, treatment, care and support services.
20. The Recommendation states that “there should be no discrimination against workers or their dependants based on real or perceived HIV status in access to social security systems and occupational insurance schemes” (Paragraph 20). The Office will therefore promote extension of coverage under such programmes and schemes to PLHIV.
21. Given the significant discrimination encountered by migrant workers, Recommendation No. 200 makes particular mention of this category of workers (Paragraphs 27–28). The Office will therefore promote the right of migrant workers and their families to be free from discrimination on the basis of HIV and AIDS.

D. Social dialogue

22. Effective social dialogue is essential to implement the Recommendation. In collaboration with ACT/EMP and ACTRAV, the Office will produce training and advocacy materials to enhance social dialogue in the HIV response.
23. The Office will provide technical support to develop or adapt employers’ policies and programmes in consultation with ACT/EMP and the IOE. It will continue to work with ACTRAV, ITUC, the Organization of African Trade Union Unity (OATUU) and the sectoral global unions to ensure a harmonized approach to implementation. The Office will encourage the IOE and ITUC to update existing training materials or develop new ones in line with the Recommendation and will respond to requests to assist with adapting the 2003 IOE–ICFTU joint statement on HIV and AIDS in light of the Recommendation.
24. The Office will provide support for strengthened labour administration and inspection systems (Paragraph 44). Training programmes targeting labour inspectors, judges competent in labour matters, labour administration authorities and other government officials will be reviewed and new tools developed.
25. Sectoral guidelines on HIV will be developed or updated in consultation with SECTOR. This will ensure effective action in relevant sectors, including agriculture, mining, education, health, fishing and seafarers, construction and tourism (Paragraph 37(a)(iv)).

E. Gender equality

26. Gender and HIV are cross-cutting issues to be mainstreamed into all ILO activities. The Recommendation recognizes that women and girls are at greater risk than men and more vulnerable to HIV infection due to social and economic inequalities. Women’s empowerment is a key factor in the global response to HIV (Preamble, Paragraphs 14 and 16). The Office will take steps to integrate HIV issues and gender equality for both women and men into all relevant technical cooperation activities at the design and planning stages, to ensure that they are addressed in a systematic manner. The Office will take measures to

provide women and girls with entrepreneurial skills for economic empowerment while providing them with information on HIV prevention.

F. The regions

27. The Office is consulting with all ILO Regional Directors to ensure that effect is given to the Recommendation, by means adapted to the needs and characteristics of each region, including by facilitating collaboration between national ministries, particularly health, labour and education ministries. The Office will encourage increased collaboration on HIV and TB prevention, treatment, care and support, and on implementation of fully integrated programmes of action.
28. Information on the Recommendation is being integrated into regional tripartite meetings to encourage development or updating of workplace policies, and national tripartite-plus workshops will be held to develop or review strategies for their implementation. Participatory research to record and demonstrate the evolving impact of the epidemic on workplaces will be supported. The Recommendation is being disseminated widely and translations into local languages are being posted on the ILO–AIDS website.

G. Development cooperation and partnerships

29. The Office will seek to obtain and allocate resources needed to achieve outcomes and targets specified in the programme and budget and to deliver on specific country programme outcomes. Supplementary funding is being sought from external donors for implementation of the Recommendation.
30. The Recommendation offers a strong foundation for enhanced cooperation and collaboration between UNAIDS, its co-sponsors and national AIDS structures. As UNAIDS co-sponsor, the Office will continue to contribute to the UNAIDS Outcome Framework and key priority areas focusing on HIV tripartite-plus workplace policies and programmes that address stigma and discrimination and that ensure equal access to social protection for persons living with or affected by HIV. The Office will focus on scaling up HIV workplace programmes and policies and on private sector mobilization, partnering with agencies in the other priority areas.

H. Knowledge development and sharing

31. Research on HIV will be guided by the ILO knowledge strategy as well as its research and publications policy and will focus on three main areas: assessment of risk and vulnerability to HIV and TB in key economic sectors; inclusion of HIV in social protection policies and programmes; and implementation of the Recommendation in law and practice. ILO–AIDS will collaborate with constituents, UNAIDS, national AIDS programmes, academic and research institutions and organizations representing PLHIV. The ILO–AIDS website will continue to foster knowledge sharing, inside and outside the ILO.

I. Recurrent reporting and follow-up

32. The principle of a strong follow-up was supported by all constituents during the Governing Body discussion in November 2010. The resolution concerning the promotion and implementation of the Recommendation “invites the Governing Body to request regular reports from member States under article 19 of the ILO Constitution as part of the existing

reporting mechanisms, in particular General Surveys. Governmental reports relating to HIV and AIDS should be prepared in consultation with the most representative employers' and workers' organizations, including details of progress made and, where possible, examples of good practice" (resolution, paragraph 6).

33. Questions on HIV and AIDS will be included in questionnaires prepared for General Surveys on relevant Conventions and Recommendations. Consideration could be given to carrying out a General Survey focusing in part on the application of the Recommendation. The Committee of Experts on the Application of Conventions and Recommendations may also consider inclusion of relevant questions in instances where the application of other standards may be affected by HIV. Governments will be encouraged to include information on the application of the Recommendation in their regular reports to UNAIDS.

J. Monitoring, reporting and evaluation

34. Progress on outcomes and indicators outlined in the GAP will be monitored through programme implementation reports submitted to the Governing Body at the end of each biennium. The Office will ensure that these outcomes and outputs are implemented in a coordinated and cost-effective manner.

K. Resources

35. In addition to already existing regular budget and extra-budgetary resources, the Office will seek additional funding from the donor community to fill any resources gap.

36. *The Governing Body may wish to:*

Approve the Global Action Plan (2011–15) to promote the implementation of the HIV and AIDS Recommendation, 2010 (No. 200).

Geneva, 2 February 2011

Point for decision: Paragraph 36

Appendix

The Global Action Plan responds to the ILO Strategic Policy Framework 2010–15

1. The Global Action Plan focuses on three main outcomes, with proposed activities and concrete indicators to measure progress achieved.

Outcome 1: Reduced stigma and discrimination among women and men workers , their families and dependants		
Linked to: ILO Strategic Policy Framework outcome 8, indicator 8.1, outcomes 5, 6 , 7, 9, 10, 11 and 18		
Outputs	Activities proposed to be carried out by the Office	Indicators
A. National HIV and TB tripartite-plus workplace policies are developed or revised.	<ul style="list-style-type: none"> ■ Organize and carry out national tripartite-plus workshops to develop or update national HIV and TB workplace policies, involving the national constituents, organizations of PLHIV and relevant actors such as the health and education sectors. ■ Promote implementation of the Recommendation through other means such as collective agreements and sectoral policies. ■ Provide support to the tripartite Constituents to establish effective mechanisms for monitoring and implementation of the national workplace policies. 	90 countries have developed or revised national HIV and TB tripartite-plus workplace policies in accordance with Recommendation No. 200 by 2015.
B. Laws and regulations incorporating the principles of Recommendation No. 200 are developed or reviewed and revised.	<ul style="list-style-type: none"> ■ Assist constituents at the national level in disseminating information on the Recommendation to the national legislative bodies, including parliaments, in connection with submission of the Recommendation to the competent authorities. ■ Develop an assessment tool and checklist to assist countries to identify gaps in legislation. ■ Assist Members to review and, as appropriate, adopt legislation and policies to prevent HIV-related discrimination in employment and occupation. 	Ten countries have laws and regulations which incorporate the principles of Recommendation No. 200 that are developed, reviewed or revised.
C. Improved capacity to ensure compliance with labour laws and policies.	<ul style="list-style-type: none"> ■ Support compliance through promoting effective labour administration and inspection systems. ■ Update the existing global training HIV package for labour inspectors and a new training manual for labour judges. ■ Strengthen research and workplace policy development capacity of employers' and workers' organizations. 	Four regional trainings have been conducted for 100 labour judges as trainers. Four regional trainings have been conducted for 200 labour inspectors as trainers.
D. Knowledge products, tools and guidelines developed to support the formulation and implementation of the national HIV workplace policies and programmes.	<ul style="list-style-type: none"> ■ Support translation of the Recommendation into national languages. Develop policy guidance and tools. Conduct participatory research to increase global knowledge base. ■ Develop briefs on key thematic areas covered by the Recommendation. ■ Collect and disseminate evidence on stigma and discrimination and good practice at workplaces. 	One guideline has been developed for each of the tripartite constituents and one for parliamentarians by 2015. A world report on workplace discrimination and good practice.
Outcome 2: Increased access for women and men workers to services on HIV prevention, treatment, care and support through the world of work		
Linked to: ILO Strategic Policy Framework outcome 8, indicator 8.2, outcomes 1, 2, 3, 4, 16 and 17		
A. Workplace HIV policies and programmes are developed or updated and are implemented.	<ul style="list-style-type: none"> ■ Develop and disseminate guidelines for sectoral and enterprise-level policies. ■ Assist trade unions and employers' organizations to develop or adapt their own policies and programmes concerning HIV and TB. ■ Collaborate with the IOE and ITUC in adapting existing training manuals on HIV and AIDS. ■ Promote workplace measures that include education and training on HIV and TB transmission and prevention. 	20 countries have implemented workplace HIV and TB programmes through tripartite mechanisms by 2015.

<p>B. Increased opportunities for people living with or affected by HIV or TB, particularly women, to access income-generating opportunities.</p>	<ul style="list-style-type: none"> ■ Assist constituents in developing income-generating opportunities for HIV- or TB-affected workers, their families and dependants. ■ Mainstream HIV and TB concerns through the workplace, targeting at-risk workers. 	<p>15 countries have improved income-generating opportunities that include PLHIV, especially women.</p>
<p>C. Social protection schemes extended to people affected by HIV.</p>	<ul style="list-style-type: none"> ■ Integrate HIV and TB concerns in occupational health and social security systems to promote equal access. ■ Collaborate with public and private insurance providers (such as microinsurance institutions, savings and credit cooperatives) to promote equal access to coverage for people living with or affected by HIV. ■ Promote equal access to social protection schemes for workers in both formal and informal economies. ■ Support the UN Social Protection Floor and help ensure that it is HIV-sensitive. 	<p>Five countries have social protection schemes which address the needs of people living with or affected by HIV or TB.</p>
<p>Outcome 3: World of work actors respond in a timely and effective manner to HIV challenges, consistent with the Recommendation</p>		
<p>Linked to: ILO Strategic Policy Framework outcome 1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 12, 13, 16, 17 and 18</p>		
<p>A. National AIDS strategies and plans reflect the principles of the Recommendation.</p>	<ul style="list-style-type: none"> ■ Intensify and expand technical cooperation projects in promoting the implementation of the Recommendation. ■ Convene national tripartite-plus workshops to advocate inclusion of the principles of the Recommendation into national strategic plans on HIV and TB. ■ Create a network of focal points among the ILO constituents and national HIV and TB structures to encourage systematic collaboration and information exchange on the principles of the Recommendation. 	<p>25 countries develop national AIDS or TB strategies and plans that reflect the principles of the Recommendation.</p>
<p>B. HIV mainstreamed into relevant ILO departments and programmes.</p>	<ul style="list-style-type: none"> ■ Organize information sessions for ILO staff at headquarters and in field offices on the Recommendation. ■ Collaborate with ACT/EMP and ACTRAV to produce training and advocacy materials to promote the Recommendation through social dialogue. ■ Develop action plans targeting selected key economic sectors in collaboration with SECTOR. 	<p>Five key ILO departments include HIV in their programmes.</p>
<p>C. The Recommendation has been integrated into relevant global frameworks.</p>	<ul style="list-style-type: none"> ■ Collaborate with UNAIDS and co-sponsors to promote joint actions in implementing the Recommendation. ■ Develop joint action plans with the World Health Organization on covering HIV and TB in workplace occupational safety and health mechanisms including for the protection of health workers. ■ Advocate for the ILO social partners to be active participants in the UNDP/UNAIDS World Commission on HIV and the Law. 	<p>The principles of the Recommendation are integrated into three key global frameworks by 2015.</p>
<p>D. Knowledge and awareness on the principles of the Recommendation increased in the world of work and among key stakeholders.</p>	<ul style="list-style-type: none"> ■ Conduct annual global training course at the Turin Centre and assist constituents in organizing regional/local training activities. ■ Present the Recommendation at ILO regional/subregional meetings. ■ Develop and disseminate “Fact sheets” on the Recommendation for different ministries and civil society organizations. ■ Prepare advocacy briefs on the Recommendation for UNAIDS Country Coordinators and One UN coordination offices. ■ Promote awareness of rights of migrant workers in collaboration with MIGRANT. ■ Provide quarterly updates on national implementation of the Recommendation on the ILO–AIDS public website. 	<p>Ten international training courses.</p>

	<ul style="list-style-type: none"> ■ Prepare briefing notes for the GFATM technical review panel on the ILO Recommendation. ■ Organize session on implementation of the Recommendation at the 2012–14 International AIDS conferences. ■ Prepare submissions to professional journals and other publications to disseminate the Recommendation in academic and professional settings. ■ Encourage ministries of health and labour to collaborate more closely on HIV and TB. 	
E. Increased financial resources for ILO constituents to implement the Recommendation.	<ul style="list-style-type: none"> ■ Assist ILO constituents to develop proposals based on gap analysis for donors by 2012. ■ Promote the ILO Recommendation to the GFATM private sector and partnerships departments/units as well as PEPFAR and foundations. ■ Assist governments to include HIV and TB in annual national budgetary cycles. 	25 countries where the ILO has provided assistance in accessing financial resources for implementation.