
2014-2015 UBRAF thematic report

HIV in the workplace

CONTENTS

ACHIEVEMENTS.....	3
MAJOR CHALLENGES AND HOW THESE WERE ADDRESSED.....	4
KEY FUTURE INTERVENTIONS	5

ACHIEVEMENTS

The Joint Programmes' work in the area of scaling up HIV workplace policies and programmes in 2014-2015 have included:

- The VCT@WORK Initiative: Launched in June 2013 by the ILO Director General and UNAIDS Executive Director and implemented across 2014 and 2015, the VCT@WORK Initiative was focussed on 36 countries in collaboration with Ministries of Labour, Employers' organizations, Workers' organization, the UNAIDS Secretariat, WHO, UNESCO, UNICEF, UNDP, the membership of the IATT on Workplace Programmes, networks of people living with HIV, CSOs and over 200 country partners. The VCT@WORK initiative was launched to concretely contribute to closing the treatment gap by generating demand for HIV testing among vulnerable workers and linking those who test positive to treatment and care services. To facilitate a rights-based approach to HIV testing, the ILO in collaboration with GNP+ and the membership of the IATT developed an operational guide to promote human rights principles during the implementation of the VCT@WORK Initiative. Over 2014-2015, approximately 4.3 million workers (1 971 645 men, 1 092 884 women and 31 190 others) were reached and 2.5 million (1 532 859 men, 843 791 women and 24 020 others) from different sectors were mobilized to test for HIV. A total of 66 715 tested positive (39 268 men, 19 872 women and 594 others) and referrals to treatment and care services were reported for 65 156 workers (38 761 men, 19 345 women and 594 others);
- Laws and policies: In Ukraine, the UNDP and ILO supported the amendment of the Labour Code of Ukraine through tailored advocacy. In November 2015, the Ukrainian Parliament adopted the amended labour code which states that it is forbidden for "any discrimination in the workplace, including violation of the principle of equal rights and opportunities, both direct and indirect restrictions of workers' rights based on race, colour, political, religious and other beliefs, sex, gender identity, sexual orientation, ethnic, social and foreign origin, age, health, disability, HIV and AIDS, family and property status, family responsibilities, and location". In East and Southern Africa, the ILO, UNAIDS, SADC and IOM, provided support to draft the SADC code of conduct for TB in the mining sector. The code has been approved by the SADC Council of Ministers and signed by the Heads of State. The code of conduct, which addresses the need of Mining workers, is aligned with the ILO Recommendation on HIV/AIDS (No. 200) and other ILO Conventions;
- Programmes: In 2014, the Regional Office of UNFPA for Eastern Europe and Central Asia launched a regional initiative "Silk Road: HIV/STI prevention and safe behaviour among truck drivers as clients of sex workers", in collaboration with ILO. The programme creates a less risky environment for sex workers while strengthening access to services and commodities for long distance truckers. In Southern and Eastern Africa, WFP continued its partnership with North Star Alliance to expand services across transport corridors through over 30 Road Wellness Centres in twelve countries in Africa. Each Road Wellness Centre is

supported by well-trained clinical and outreach teams and an electronic health passport system that allows patients to access their health records at every clinic within the network. The partnership expands access to VCT services and other health services;

- **Generating Evidence:** To generate evidence on what works in HIV and AIDS workplace programmes, the ILO in partnership with Human Sciences Research Council (HSRC), the HIV/AIDS, STIs and TB Research Programme (HAST), the Research Programme and the Social Aspects of HIV/AIDS research Alliance (SAHARA) network from South Africa, National AIDS Commissions, Business coalitions, Employees of employer Organizations, Workers organizations, Organizations of people living with HIV, NGOs, GIZ, the Swedish Workplace HIV and AIDS Programme (SWHAP), UNAIDS and UNDP, conducted a 10-country comprehensive study focussing on 66 workplaces in the public and private sectors as well as the formal and informal economy, to investigate what works in achieving good outcomes in HIV and AIDS workplace programmes. The findings have been extensively disseminated to country stakeholders and is informing the implementation of HIV workplace programmes targeted at vulnerable mobile and migrant workers in 15 countries;
- **Capacity Building:** To strengthen the capacity of national HIV workplace experts, the ILO in partnership with the UNAIDS Secretariat, UNICEF, WFP, WHO, GBC Health, GNP+ and others, trained 109 senior National HIV Workplace and Social Protection Specialists from 53 countries between 2013 and 2015, through the integrated multidisciplinary course titled “HIV and AIDS and the World of Work: a prevention & social protection perspective” at the International Training Centre in Turin. An independent impact assessment of the course (among beneficiaries) concluded that: 57% respondents said the training course led to the development of HIV workplace policies at national/sectoral levels; and 65% respondents said that the training helped them to mainstream other chronic illnesses, such as TB, into their HIV policy and/or programmes, among others. In Thailand, UNESCO, ILO and Youth LEAD supported the Thailand Service Workers Group (SWING) to develop an English as a Second Language syllabus for male and transgender sex workers, with the objective of improving financial, health and safety outcomes. The course has reached over 300 people, enabling them to better negotiate with their clients for safer health outcomes.

MAJOR CHALLENGES AND HOW THESE WERE ADDRESSED

One major challenge is how to exponentially increase the number of women and men workers voluntarily undertaking VCT within the context of their workplaces while addressing their concerns about confidentiality. Lessons from the VCT@WORK Initiative show that strong management commitment and support to HIV programmes, confidentiality and job security make it easier for workers to test in the workplace. Another key challenge is about “normalising” HIV testing. HIV testing will exponentially increase if

workers have total control of when and where to take the test. If workers can purchase self-testing kits and test at their own convenience, this will contribute towards significantly increasing the proportion of workers who know their HIV status. This approach will help make HIV testing more routine and less stigmatized. The low perception of risk to HIV in many countries with concentrated epidemics makes many workers feel they don't need to take an HIV test. Limited funding for scaling up the VCT@WORK Initiative is also a major challenge.

KEY FUTURE INTERVENTIONS

Key future interventions to address these challenges will include:

- Improving access to key populations: Going forward and within a context of declining financial resources, the partners implementing the VCT@WORK Initiative will strengthen partnerships with key stakeholders at the national level with the aim of better reaching key and vulnerable working populations. VCT@WORK will be implemented in key cities, municipalities and towns with a relatively high incidence. HIV testing in hotspots will increase the likelihood of reaching key working populations as well as improve the efficiency in finding PLHIVs;
- Enhancing sustainability: To achieve sustainability, the engagement with NACs is being strengthened. The sustainability of the VCT@WORK Initiative is dependent on the extent to which the country takes up and owns the initiative. Positioning the VCT@WORK as a national initiative and linking it closely to national testing goals is critical to its sustainability. Additional financial resources will be required from donors and other development partners to scale up HIV testing and this should also be envisaged as part of the sustainability plan for HIV testing. Finally, placing HIV testing within general health and wellness screening, similar to the approach used for eMTCT, especially in UNAIDS Fast Track countries could make HIV testing more routine and enhance its sustainability. The partners working in the VCT@WORK Initiative will focus on these issues during the 2016-17 biennium;
- Inspiring a major global HIV testing campaign: The VCT@WORK Initiative will strengthen partnerships with other on-going HIV testing initiatives (eg. PROTEST HIV) with the view to inspiring a global HIV testing initiative involving UNAIDS, Cosponsors and other partners. The first 90 is key to the achievement of the 90-90-90 treatment targets. The importance of HIV testing must be raised and high level political support must be mobilized around accelerating HIV testing. The partners of the VCT@WORK Initiative will continue to champion this course;
- Jointly addressing the Structural Drivers: The linkages and synergies between the work around reducing stigma and discrimination, scaling up HIV-sensitive social protection, employment and start your business programmes, and scaling up HIV testing must be strengthened. Within a context of declining financial resources for HIV-specific programming and taking into consideration the spirit behind the Sustainable Development Goals (SDGs), opportunities to build synergies with other programmes will be strongly pursued. Going forward a new way of working is essential to maximize the HIV response.

UNAIDS

20 Avenue Appia
CH-1211 Geneva 27
Switzerland