Special High-Level Meeting on HIV/AIDS
and the World of Work

Tripartite Technical Panel

Thursday, 8 June 2000

Summary of proceedings

Chairperson: H.E. Mr. Ove Hygum, Minister of Labour, Denmark

Opening and introduction

THE CHAIRPERSON – We are meeting to discuss the effects of a disease which, over a few years, has taken on staggering proportions. I wish to focus our attention on the cry for help from the ILO’s constituents in the most affected countries, particularly sub-Saharan Africa. The threat of HIV/AIDS to the world of work was one of the principal subjects covered by the ILO’s Ninth African Regional Meeting, held in Abidjan in December 1999. There, the ILO constituents from the African region endorsed the Platform for Action on HIV/AIDS in the Context of the World of Work in Africa. Its preamble is a cry of pain straight from the heart: “HIV/AIDS threatens every man, woman and child in Africa today. The pandemic is the most serious social, labour and humanitarian challenge of our time”. And it admits that “a culture of silence, fear and denial continues to reign and prevent action. The stigma and the fear engendered by HIV/AIDS fuels discrimination, persecution and ignorance”. However, the Platform is also a courageous and positive document which offers a way forward. It establishes a close

connection between the threat of HIV/AIDS and the world of work, and takes a significant first step in mapping out what employers’ and workers’ organizations, ministries of labour and the ILO can do to help those living with HIV/AIDS and to protect those at risk of infection.

The Platform for Action calls for a multidimensional response. In the absence of a medical cure, it advocates the application of a “social vaccine”, embracing social inclusion, income and job security, social security and solidarity. It also proposes a set of common values: tripartism, allied with civil society, non-governmental organizations (NGOs) and other stakeholders; social justice and compassion for those living with HIV/AIDS; a sense of shared responsibility; good governance, transparency and accountability; and partnerships among international and national agencies. Some specific aims are: fighting the culture of denial; raising awareness through information, education and communication; and strengthening the social partners’ capacity to address the pandemic. It is imperative that HIV/AIDS prevention strategies address gender equality and combat the alarming rise in the number of AIDS orphans, who may be drawn into child labour. Partnerships are vital. I am pleased that a cooperation framework agreement has been signed between the ILO and UNAIDS. I urge the ILO to introduce strategies to mitigate the effects of HIV/AIDS on workers and the world of work, and I call on the ILO constituents to work together; political will and financial support are greatly needed. I ask every one of you to consider the terrifying consequences of a whole continent falling apart – consequences of a political and economic nature, but first and foremost the human consequences.

Presentations by panellists

Mr. DIOP (Executive Director, Social Protection Sector, ILO) – The HIV/AIDS pandemic represents a major challenge in the world of work and in society as a whole. It is
a threat to development in that economic growth may be reduced by as much as a quarter in high-prevalence countries. The labour force could fall by one-fifth, and its composition could change significantly. HIV/AIDS also endangers enterprise performance, entailing increased costs on account of rising health care, absenteeism, recruitment, training and retraining. There are huge implications for small and medium-sized enterprises, and in particular for the rural and informal sectors; the transport, tourism and mining sectors are highly vulnerable, too. It is imperative to overcome the persistent culture of denial of the pandemic; prevention of the disease is a duty and care of those afflicted is a right. HIV/AIDS in the world of work must be addressed immediately at the national and enterprise levels. A strong political commitment and a broad multisectoral approach involving all the social partners are prerequisites for developing rapid-response programmes and projects which would yield immediate results, through an arsenal of measures. Inter-country, subregional, regional and global partnerships must be forged and fostered. Capacity building in HIV/AIDS workplace issues must be addressed urgently. The ILO is ready to take up the challenge now; with its tripartite structure, competence and institutional capacity, it is an ideal channel for awareness raising, prevention, protection and support initiatives at all levels. The key is solidarity; it is time for all partners in the world of work to act together to stem the tidal wave of the HIV/AIDS catastrophe.

Mr. OWUOR (Executive Director, Federation of Kenya Employers) – With two-thirds of those afflicted worldwide being Africans, and 96 per cent of them in the productive group of 15-49 years of age, the pandemic is devastating the African economies. The impact on enterprises includes loss of human capital, especially of skilled workers and professionals, diminishing production capacity because of absenteeism, high staff turnover, high retraining and replacement costs, high employee health care costs, and falling agricultural capacity. Under the Private Sector Initiative on HIV/AIDS, a group of companies in Kenya is working with the National AIDS Control Council and the local UNAIDS Office to develop national and sectoral strategies involving workers, their
families and communities. Activities have included developing a standard enterprise policy, disseminating information, incorporating AIDS education in training programmes, and developing AIDS-awareness and condom-distribution programmes in the workplace. Companies have complied with certain of the 1988 ILO/WHO criteria for combating discrimination against affected workers.

For the fight against AIDS to succeed there must be strong political will, as demonstrated by President Moi in Kenya, who declared AIDS a national disaster in 1999, and by President Museveni in Uganda in the late 1980s. The struggle is hampered by ignorance of the causes, resistance to sex education by religious groups, lack of access to medical treatment for want of funds, low commitment by some employers, who see preventive programmes as too costly, and workers’ tendency not to reveal their HIV status.

The ILO can make an important contribution by helping employers’ organizations to sensitize their members through education and prevention programmes. It should set up a permanent unit within its regular budget and develop a global strategy. The HIV/AIDS programme, with the International Programme for the Elimination of Child Labour (IPEC), must address the desperate needs of AIDS orphans. More countries should lend support to the initiative by the United States in providing assistance to the worst-affected African countries. The example of the five multinational drug companies which have reduced the prices of their anti-retro viral drugs should be followed. More international collaboration is urgently needed in the search for a cure, as for other pandemics such as smallpox.

Dr. LYOMOKI (General Secretary, Uganda Medical Workers’ Union) – This High-Level Meeting demonstrates the ILO’s commitment and solidarity in the global fight against HIV/AIDS, and should establish its role and priorities. The pandemic will be a serious problem for many years to come; in 1999, 5.6 million people were estimated to be newly infected. Although rates have begun to decline, the levels are still dangerously high.
Some occupations are predisposed to the virus because of the nature of the work, and the resulting social relations. Businesses have suffered reduced productivity and increased costs owing to absenteeism and higher employee benefits. Workers’ organizations must contend with many issues related to HIV/AIDS: hiring, transfer and dismissal of workers; confidentiality of medical information; protecting workers’ benefits; stigmatization of workers living with HIV/AIDS; blood exposure on the job; awareness and prevention education and training policies; and the absence of appropriate legal provisions.

The three strategic issues are: reducing new infections through information and education; mitigating the effects by protecting human rights and reducing stigmatization; and adapting and expanding approaches to halt transmission of the virus. So far workers’ organizations have been largely excluded because of insufficient capacity and inadequate recognition of their role. But the International Confederation of Free Trade Unions – African Regional Organization (ICFTU-AFRO) has argued that the workplace is an important and effective forum for tackling HIV/AIDS, as it reaches large numbers of the age groups at risk and makes use of existing structures. Areas of action include: educating members in non-discrimination against workers living with HIV/AIDS; including relevant clauses in collective bargaining agreements; developing preventive education programmes; strengthening health and safety precautions at work; and providing extended leave for affected workers. There must be behavioural change if there is to be a chance of success. The private sector’s contribution is essential, and governments must make a strong commitment at all levels.

Dr. CARRASCO (Regional Secretary, Latin American Council and the Caribbean AIDS Service Organizations, Venezuela) – Nearly six million people were infected by HIV in 1999, 1.3 million of them in Latin America and 360,000 in the Caribbean; the incidence in the latter is the highest after Africa. Anti-viral drugs have transformed HIV/AIDS into a chronic condition, and this should modify the criteria for disability. Discriminatory policies
and segregation of workers exist because of ignorance of means of transmission, lack of information and employers’ fear of heavy medical costs. Since 1986 diagnostic techniques have become available, but they are abused for discriminatory purposes, such as the selection and dismissal of workers and related violations of human rights. HIV testing is routine in pre-employment screening and is often included in standard medical tests; in Venezuela this is frequently done without informing the worker. No distinction is made between HIV-positive status and full-blown AIDS. A career in the armed forces has been declared incompatible with HIV/AIDS. With all this in mind, special regulations have been introduced to protect individual rights. Brazil is more progressive in this respect, but dismissals still occur in small enterprises. Several Latin American countries have anti-discrimination legislation, but implementation is lacking. The policies of multinational enterprises are often ignored by local subsidiaries. Medical confidentiality is frequently breached. The result is that workers leave or are forced to leave their jobs because of shame and harassment.

Workplace prevention programmes are scarce for several reasons: HIV/AIDS is thought to affect only marginalized groups or undesirable individuals; sexual conduct is not discussed openly; the perception of risk is diminished by cultural and social factors such as “machismo”; poor working conditions make implementation difficult. Neither employers’ nor workers’ groups pay sufficient attention to productivity losses due to HIV/AIDS. Social protection does not reach migrant or displaced workers who are affected. The ILO should initiate consultations leading to the adoption of a Convention on HIV/AIDS in the workplace in order to eradicate denial of the pandemic and discrimination against those affected, to promote adequate prevention and assistance, and to address the issue in an integrated manner encompassing workers and their families.

*General debate*
A major theme discussed by the participants was the mobilization of the tripartite constituents. Several speakers called for partnerships between international organizations, employers’ and workers’ organizations, NGOs and other stakeholders. The HIV/AIDS crisis required a multisectoral approach. Reference was made to the “social vaccine”, with the participation of all the social partners. Strategies should be developed at all levels to change attitudes towards HIV/AIDS. The Minister for Labour of Kenya reiterated that employers’ and workers’ organizations should be encouraged to play a more proactive role in HIV/AIDS policy issues.

Many sub-Saharan African governments spoke of initiatives such as legislation prohibiting HIV testing by employers and discrimination on the grounds of HIV/AIDS, national HIV/AIDS control organizations and strategies, awareness-raising and prevention programmes, codes of conduct, guidelines for employers’ and workers’ organizations, and assistance in formulating workplace policies and educational programmes. The Minister of Labour and Vocational Training of Malawi said that his government had recently launched a national strategy to deal with HIV/AIDS. He added that the challenge was to take effective measures to change behaviour. The Government delegate of Nigeria stated that an interministerial committee to combat HIV/AIDS, with the President as Chairperson, had been established. The Government had allocated US$1 million for programmes to fight the pandemic. Some governments were undertaking research to support policies aimed at mitigating the health and economic impact of the disease and were gathering data on such groups as small enterprises and the informal sector, which had a high incidence of HIV/AIDS. It was recognized that women and children were especially vulnerable, and the need to develop social protection measures targeted at them was underlined. A representative of Public Services International believed that one of the most effective strategies against HIV/AIDS was to improve the social and economic status of women. Attention should also be paid to retaining older workers in the workplace. One Government representative said that his Government paid special attention
to sensitizing migrant workers through the media. All these efforts were at various stages of implementation.

Several speakers referred to the catastrophic health situation in their countries in relation to HIV/AIDS, with the attendant social, economic and psychological stress. Health services were often unable to cope, and drugs were beyond the reach of national or household resources. The representative of the Government of India asked for a waiver from relevant obligations under the Agreement on Trade Related Aspects of Intellectual Property Rights (TRIPS Agreement) in order that developing countries might produce their own drugs. The representative of the Government of Côte d’Ivoire pointed out that in some countries compensation was not paid for HIV/AIDS as an occupational illness even for those occupations at risk of infection (such as health-care workers). The representative of the Government of France raised the question of global security, which had been discussed in the United Nations Security Council in January 2000. He also referred to the agreement between five pharmaceutical companies and multilateral agencies to reduce significantly the price of anti-retroviral drugs, and underlined the need to ensure implementation of the price agreements with the pharmaceutical companies. He also suggested that the ILO might consider becoming a UNAIDS co-sponsor.

Many employers’ organizations had also taken initiatives to combat the pandemic. These included awareness-raising programmes for transport drivers and operators, with information, education, provision of condoms and clinical help. The programmes invariably offered counselling for HIV/AIDS victims and their families. In other countries good results had been obtained through an open and transparent policy with help from the international community, and a strong commitment by all stakeholders. In parallel, preventive policies were being designed and implemented by the business community in other countries.
Activities undertaken by workers’ organizations were also discussed. The Workers’ delegate of the United Kingdom, and Worker Vice-Chairperson of the Governing Body, declared that HIV/AIDS had become a labour issue. He pledged the full support of the Workers’ group of the Governing Body and the Conference to support the ILO’s initiative to combat the spread of HIV/AIDS. One speaker said that trade unions were best placed to spread the message in the place of work, where people went almost every day. A representative of the Organization of African Trade Union Unity (OATUU) explained that his organization undertook activities at various levels. These included capacity building for unions, mass sensitization campaigns, training and model guidelines. HIV/AIDS components had been incorporated into collective bargaining agreements and in workplace occupational health and safety programmes. A representative of ICFTU-AFRO emphasized that special attention was paid to pre- and post-recruitment issues in relation to non-discrimination, counselling and support. In one country an HIV/AIDS dimension was integrated into the workers’ education programme delivered through the national labour institutions.

Many speakers referred to the ILO’s role in the combat against HIV/AIDS and proposed future action. The ILO was the only organization to bring together all the social partners, and it was uniquely placed to advise on best practice on HIV/AIDS in the workplace. Its clear comparative advantage lay within the principles outlined by the Director-General of the ILO and the Executive Director of UNAIDS in the morning session. The Minister of Labour of South Africa, in a message to the meeting, expressed the view that the ILO should use its regular and extra-budgetary resources to assist the constituents with guidelines on HIV testing and the development of a code of practice on HIV/AIDS. The Minister of the Public Service, Labour and Employment of Senegal acknowledged the ILO’s guiding principles outlined in the discussion document prepared for the Special High-Level Meeting. In relation to the fight against HIV/AIDS, he would like to see ILO support for enterprise development, social security, and occupational health
and safety programmes. The Government delegate of Namibia believed that the ILO should shorten its action response time. He called for a special chapter on HIV/AIDS to be included in the *Global Report*. The Employers’ delegate of Nigeria thought the ILO should bring pressure to bear on member States regarding pre-employment HIV/AIDS testing and workplace policy. He supported Dr. Carrasco in the call for an ILO instrument on HIV/AIDS. Other Employers’ representatives wished the ILO to draw up a global awareness programme, with sensitization for high-risk groups, and to support income-generating activities.

The ILO’s signing of the agreement with UNAIDS was welcomed by many speakers. A representative of UNAIDS called for international partnership against HIV/AIDS in Africa. He pledged support for the ILO, and for employers’ and workers’ organizations in their actions to bring an end to the pandemic and alleviate its effects. The representative of the Government of the Netherlands stated that her country intended to increase its voluntary contributions to UNAIDS by 10 per cent. A representative of the World Bank, one of the seven UNAIDS co-sponsors, said that the Bank was committed to contributing to sustainable HIV/AIDS prevention programmes in Africa and elsewhere.
Conclusions

THE CHAIRPERSON – The wide range of statements made today clearly highlights a general consensus that HIV/AIDS has become a labour issue and should be addressed comprehensively by the partners in the world of work. All agree that HIV/AIDS is a threat to human rights and workers’ rights, to the welfare and well-being of workers and their families, to jobs and development, to social security, to productivity and to gender equality. HIV/AIDS also exacerbates the problem of child labour. It is a major factor undermining the guiding principle of decent work and is an essential concern to the ILO and its tripartite constituents. On the basis of these discussions, specific guidance for the ILO’s future work in addressing the HIV/AIDS issue has emerged. The ILO has been called upon to:

- mobilize the tripartite constituents to stimulate political action and change attitudes by working with decision-makers at all levels of the government and the community;

- strengthen the role of ministries of labour in developing a regulatory framework and programmes of action;

- launch an awareness-raising and advocacy campaign for action to prevent the further spread of HIV/AIDS and to mitigate its effects on the workforce and in the workplace;

- formulate and actively promote international guidelines, including a code of practice, to protect the rights of workers as an essential first step in building a coherent programme on HIV/AIDS prevention and assistance. This might include consideration of a possible ILO instrument. In this context, special attention should be given to ensuring non-discrimination based on HIV/AIDS status and the
confidentiality of medical and insurance information, as well as eliminating screening for HIV/AIDS as part of the employment process and in routine workplace physical examinations;

- develop and maintain a programme of statistical surveys and analytical studies to provide an accurate and broad picture of the economic impact of HIV/AIDS on the world of work, with particular attention to its effects on the labour force, employment situations and social security;

- collect and disseminate information, statistics, policies, legislation and examples of good practice in respect of HIV/AIDS and the world of work. This could include the development and maintenance of an online database:

- provide capacity-building programmes to enable governments and employers’ and workers’ organizations to address the HIV/AIDS problem effectively;

- initiate the development of information and training materials to support awareness and prevention programmes;

- promote policies and programmes which allow persons living with HIV/AIDS to remain in productive employment for as long as possible;

- promote programmes to provide counselling, care and support to workers living with HIV/AIDS, and to their families;

- pursue a strategy that will integrate the HIV/AIDS dimension into the ILO’s mainstream activities and technical cooperation programmes at the inter-regional, regional and national levels when implementing the four strategic objectives of decent
work. This should include the elimination of child labour, and the cross-cutting themes of gender and development;

- develop specific programmes to reach workers in the informal sector through community-based approaches and partnerships with relevant NGOs;

- encourage and support the development of gender-sensitive programmes which integrate an HIV/AIDS aspect into legislation against domestic and sexual violence;

- work with the social partners to develop targeted interventions for the most vulnerable workers in high-risk sectors such as transportation, tourism, mining, health care, law enforcement and firefighting;

- identify a wide range of interventions to respond to the special needs of highly vulnerable groups, particularly women, migrant workers and children at risk of being drawn into child labour;

- provide information and training to judges of industrial tribunals/courts and other segments of the legal community;

- implement a policy and a programme on HIV/AIDS awareness, prevention and protection for ILO staff;

- develop partnerships, particularly with UNAIDS and its co-sponsors, to ensure harmony, coherence and synergy in policies and programmes in order to avoid duplication of effort and to contribute to medium- and long-term strategic planning;

- ensure a continuing and increased financial commitment by the ILO to address the issue of HIV/AIDS in the world of work.
The Chairperson concluded the session by referring to the most moving testimony of Ms. Mercy Elizabeth Makhalemele during the morning session, which had brought tears to the eyes of many delegates. However, he emphasized that “Tears are not enough. We must take immediate and urgent action and mobilize the necessary resources to undertake and sustain these actions”.