

Action against AIDS in the workplace

Business action against AIDS

**Workplace policy:
key components and sample language**

**Workplace policy:
10 steps for implementation**

**The ILO Code of Practice:
key principles**

Trade union action against AIDS

The Asia-Pacific Region

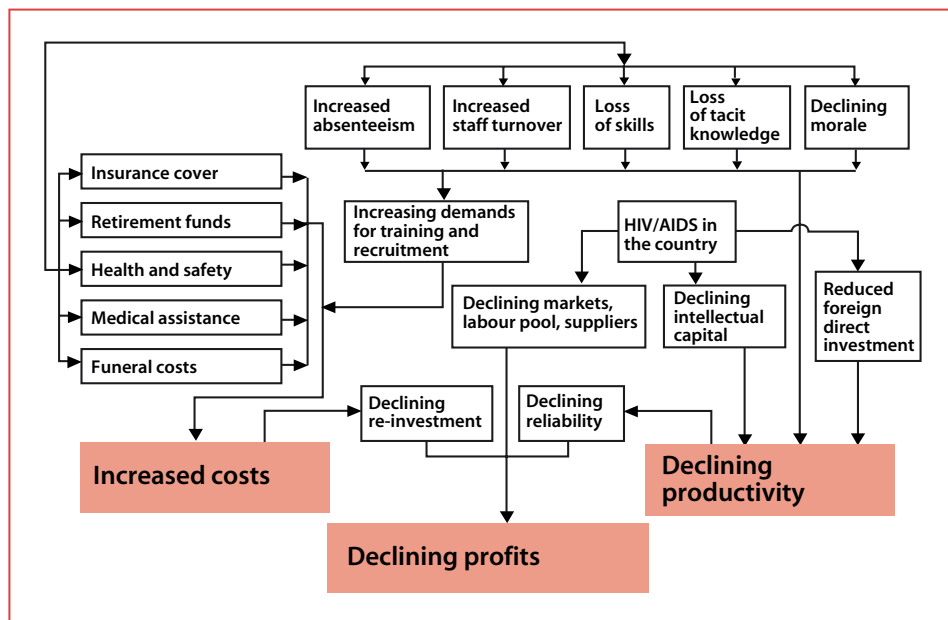
Successful businesses are those that adapt to the changing environment in which they operate. Challenges may include changes in technology, legislation, markets or labour supply. They also include HIV/AIDS. Planning and operations need to anticipate rising production costs, even in low-prevalence countries. Around the world, the HIV/AIDS epidemic is reducing profitability through:

- ▶ cutting the supply of labour and skills;
- ▶ undermining income and restricting demand;
- ▶ increasing business costs; and
- ▶ disrupting production and reducing productivity.

HIV/AIDS also affects the business environment by putting pressure on public services, reducing savings and investments, and slowing economic growth. The World Bank estimates that negative growth in GDP can be expected when national HIV prevalence rates reach 5%.

Impact on enterprises

The costs of HIV/AIDS to businesses are direct and indirect—many of the ‘hidden’ costs have only recently become apparent. This chart illustrates how these costs combine and reinforce each other to reduce the revenue and profits of enterprises.



Source: UNAIDS (adapted by ILO)

Business costs

Enterprises in many countries report increases in absenteeism, staff turnover, and the cost of recruitment and training. Other costs include medical care, insurance coverage, retirement funds and funeral fees. More difficult to measure are the impact of an increasing burden of work, the loss of colleagues and the fear of infection, which can lower morale and productivity in the workplace. In addition, a decline in profits reduces the tax base, discourages foreign investment and adversely affects consumer and business confidence.

In the United States of America, some firms report costs ranging from US\$3500 to US\$6000 per year for each worker with HIV/AIDS. In South Africa, the Goldfields Mining Company finds that HIV/AIDS costs the company US\$4 for every ounce of gold produced. A Thai Government study calculated that the direct and indirect cost of HIV/AIDS to the nation was US\$1.2 billion in 2000.

Supply of skills and labour

Worldwide, over 40 million people are living with HIV/AIDS. Nine out of every ten are adults in their productive and reproductive prime. The International Labour Organization estimates that at least 25 million workers aged 15–49 carry the virus. HIV/AIDS is changing the age and sex distribution of the labour force, causing a loss of skills and experience, and jeopardizing human resource development. Of all the factors that affect enterprise efficiency and profit, the skills base is one of the most important. **The business response to HIV/AIDS: impact and lessons learned** (UNAIDS, 2000) points out that, “with the progressive changes in the ways companies are valued, strength of intellectual capital is becoming increasingly important relative to financial capital”.

The human toll

As a part of society, business suffers as social costs rise. One trigger for the Heineken company to fund treatment for HIV/AIDS was the need to relieve its managers of the “intolerable stress” of making decisions that affected the job security, the health and the very survival of its employees and their families. Companies also seek to play a social as well as an economic role, not just for the sake of their own employees, but in a spirit of corporate social responsibility.

Why some Indian employers took action to respond to AIDS

- ▶ “We are responsible and good corporate citizens over and above our normal operations.”
- ▶ “A healthy workforce is the biggest asset for a company.”
- ▶ “Any prevention effort will go a long way in slowing the progression of the disease across the globe.”

Source: *An operational manual for enterprises* (ILO, New Delhi, 2002).

The advantage of strong company policies

Business has a vital role to play in the wider response to HIV/AIDS, starting in the workplace. The need is to find efficient and cost-effective interventions that limit the spread of infection and mitigate its impact. Programmes usually include prevention, especially through awareness-raising and education, and care and support.

Prevention costs less

Several studies on the impact of HIV/AIDS on businesses suggest that a company’s investment in prevention, as well as in medical care for opportunistic infections such as tuberculosis and treatment of sexually transmitted infections, reduces turnover rates and labour costs. Preliminary research shows that providing treatment and care to keep employees in the workforce is often less expensive than the costs of HIV/AIDS, even for small businesses.

Many interventions cost little or nothing. For example: a company policy on HIV/AIDS; information and awareness-raising; ensuring affected employees have access to statutory benefits; and reasonable accommodation in adapting tasks and workloads to the capacity of sick workers. An **Employers’ Handbook on HIV/AIDS: a guide for action** has been published by the International Organisation of Employers (IOE, 2002); this includes case studies of a range of actions by companies, as well as detailing impact costs for employers.

A number of impact assessment tools exist, some of them helping businesses to compare the costs of a workplace programme with the costs of doing nothing. The Tata Tea Company in India has one such model; others have been developed by the Global Business Coalition and the Futures Group. More information may be obtained from the ILO, or Family Health International in **Workplace HIV/AIDS Programs: an action guide for managers** (FHI, 2002).

A survey by the Kenyan Federation of Employers revealed that HIV/AIDS is costing companies an average of US\$25 per employee annually, and that costs would increase to an average of US\$56 per employee by 2005, if the rate of infection continued unchecked. On the other hand, a comprehensive prevention programme would cost US\$15 per employee in the first year, thereafter decreasing over time.

The business response in Asia

The recognition that HIV/AIDS is a matter of enlightened self-interest, as well as corporate responsibility, is driving companies to engage in HIV/AIDS-related work. There are examples across the region of businesses working together to establish effective workplace programmes and policies, in many cases in close collaboration with government and workers' organizations.

A major impetus to action was the conference, 'Business and Labour responds to HIV/AIDS in Asia', where employers, trade unionists and government officials, as well as international agencies and donors, exchanged information on successful initiatives to combat the epidemic in the region through workplace action.

The Thailand Business Coalition on AIDS was created by businesses with the support of the Thailand Ministry of Public Health and the World Health Organization. The Federation of Indian Chambers of Commerce and Industries, as well as a number of individual employers, are taking part in a campaign under the auspices of the ILO 'Prevention of HIV/AIDS in the world of work: a tripartite response', which has included the establishment of state-level business coalitions against AIDS, starting in Maharashtra. The China Enterprise Confederation has become a member of the UN Theme Group on HIV/AIDS in China.

At the regional level, the Asian Business Coalition on AIDS is a public-private partnership consisting of Asian countries, including Bangladesh, Cambodia, India, Indonesia, Malaysia, the Philippines, Thailand and Vietnam. The Coalition's goal is to manage HIV/AIDS in the corporate sector by preventing the further spread of HIV among employees and ensuring that employees with HIV do not suffer discrimination.

Case study

A model for workplace action in Thailand

Employers and their workforces are partnering with the Thai Ministry of Labour and Social Welfare (MOLSW) to create a model for HIV/AIDS prevention and management in the industrial estates of Rayong Province, near Bangkok. Institutional capacity-building at factory and provincial levels (with funds from the World AIDS Foundation) will take place in parallel with the development of a supportive policy environment at the national level. The success of the pilot programme will be measured against the capacity of enterprises to adapt and extend the model to other provinces.

The package includes:

- ▶ translation of the ILO Code of Practice into Thai;
- ▶ training of key officials at the MOLSW, including factory inspectors;
- ▶ legal and social security reform;
- ▶ advice to the social partners on policy and programme implementation;
- ▶ development of training materials with local NGOs and courses for factory managers and workplace (peer) educators; and
- ▶ the introduction of incentives for companies to implement workplace programmes and a certification scheme (AIDS Standard Organization).

A workplace policy provides the framework for enterprise action to reduce the spread of HIV/AIDS and manage its impact. An increasing number of companies have a policy on HIV/AIDS. Everyone should.

A policy:

- ▶ makes an explicit commitment to corporate action;
- ▶ ensures consistency with appropriate national laws;
- ▶ lays down a standard of behaviour for all employees (whether infected or not);
- ▶ gives guidance to supervisors and managers;
- ▶ helps employees living with HIV/AIDS to understand what support and care they will receive, so they are more likely to come forward for voluntary counselling and testing;
- ▶ helps to stop the spread of the virus through prevention programmes; and
- ▶ assists an enterprise in planning for HIV/AIDS and managing its impact, and, ultimately, saving money.

A policy may consist of a detailed document just on HIV/AIDS, setting out programme, as well as policy issues; it may be part of a wider policy or agreement on safety, health and working conditions; or it may be as short as, “This company pledges to combat discrimination on the basis of HIV status and to protect health and safety through programmes of prevention and care”. The ***ILO Code of Practice on HIV/AIDS and the world of work*** provides guidelines for the development of policies and programmes on HIV/AIDS in the workplace. These encourage a consistent approach to HIV/AIDS, based on 10 key principles, while being flexible enough to address the different needs of individual workplaces.

Policies should be shaped by local needs and conditions, so no one policy is relevant to all situations, but the following components can usefully be included. Suggested language is in italics.

I. General statement

The policy begins with a general statement or introduction that relates the HIV/AIDS policy to the local context and existing business practices, including some or all of the following:

- ▶ the reason why the company has an HIV/AIDS policy;
- ▶ a statement about how the policy relates to other company policies; and
- ▶ policy compliance with national and local laws, and trade agreements.

The company may also establish an agreement with its contractors, suppliers and distributors to adopt all, or some, of the provisions of the policy.

Sample language

Company X recognizes the seriousness of the HIV/AIDS epidemic and its significant [or potential] impact on the workplace. The Company supports national efforts to reduce the spread of infection and minimize the impact of the disease.

*The purpose of this policy is to ensure a consistent and equitable approach to the prevention of HIV/AIDS among employees and their families, and to the management of the consequences of HIV/AIDS, including the care and support of employees living with HIV/AIDS. The policy has been developed and will be implemented in consultation with employees at all levels. It is in compliance with existing laws regarding HIV/AIDS [where relevant—otherwise insert ‘existing laws on discrimination, working conditions, and safety and health’] and with the ***ILO Code of Practice on HIV/AIDS and the world of work***.*

II. Policy framework and general principles

The policy establishes some general principles as the basis for other provisions.

Sample language

Company X does not discriminate or tolerate discrimination against employees or job applicants on any grounds, including HIV status. While Company X recognizes that there are circumstances unique to HIV infection, this policy rests on the principle that HIV infection and AIDS should be treated like any other serious condition or illness that may affect employees. It takes into account the fact that employees with HIV may live full and active lives for a number of years. The Company’s commitment to maintaining a safe and healthy work environment for all employees is based on the recognition that HIV is not transmitted by casual contact.

III. Specific provisions

The policy includes provisions in the following areas:

- ▶ the protection of the rights of those affected by HIV/AIDS;
- ▶ prevention through information, education and training; and
- ▶ care and support for workers and their families.

Stigma, discrimination and rights

No rights—from confidentiality to access to benefits—should be affected by an individual's HIV status, whether real or suspected. Stigma and discrimination compromise employee welfare and a safe and healthy work environment. They also undermine HIV-prevention efforts, which depend on an atmosphere of openness, trust and respect for basic rights.

Sample language

1. **Rights of employees who are HIV-positive.** *HIV-positive employees will be protected against discrimination, victimization or harassment through the application of normal company disciplinary and grievance procedures, and the provision of information and education about HIV and AIDS to all employees.*
2. **Employment opportunities and termination of employment.** *No employee should suffer adverse consequences, whether dismissal or denial of appropriate alternative employment opportunities, merely on the basis of HIV infection. [A collective agreement would probably spell out the grounds for dismissal.]*
3. **Testing.** *Company X rejects HIV testing as a prerequisite for recruitment, access to training or promotion. However, the company promotes and facilitates access to voluntary confidential testing with counselling for all employees. Testing programmes to establish local/national HIV prevalence will be the subject of appropriate consultation with recognized employee organizations and will be subject to independent and objective evaluation and scrutiny. The results of epidemiological studies will not be used as a basis for discriminating against any class of employee in the workplace. All testing will comply with generally accepted international standards on pre- and post-test counselling, informed consent, confidentiality and support.*
4. **Confidentiality.** *The Company recognizes the sensitive issues that surround HIV/AIDS and, therefore, undertakes to handle matters in a discreet and private manner. Where an employee with HIV has revealed his/her status to management, the Company will keep the identity of the person confidential. However, in line with the Company's philosophy of openness, employees will be encouraged to be open about their HIV status.*

Awareness-raising and education

In the absence of a vaccine or cure, information and education are vital components of an AIDS-prevention programme, because the spread of the disease can be limited by informed and responsible behaviour; the workplace community and practical measures such as condom distribution are also important means of supporting behavioural change.

Sample language

1. *Awareness and education programmes will be conducted to inform employees about HIV and AIDS, and help them to protect themselves and others against infection. Programmes will take into account the different needs of male and female employees, and some will include the families of employees and the local community.*
2. *The Company recognizes the importance of involving employees and their representatives in the planning and implementation of awareness, education and counselling programmes, especially as peer educators and counsellors.*
3. *Practical measures to support behavioural change and risk management will include the treatment of sexually transmitted infections (STIs) and tuberculosis (TB) [or, where impossible, referral to STI and TB treatment services in the community], sterile needle- and syringe-exchange programmes [if relevant to the local situation], and the distribution of male and female condoms.*
4. *Training will be arranged for key staff, including managers, supervisors and personnel officers; union representatives; trainers of trainers (both male and female); peer educators; and occupational safety and health officers.*
5. *Reasonable time off will be given for participation in education and training.*

Care and support for workers and their families

It is in the interest of both the company and its employees that infected individuals be offered assistance in order to remain at work for as long as possible.

Sample language

1. **The promotion of employees' well-being.** *The Company will treat employees who are infected or affected by HIV/AIDS with empathy and care. Consequently, the Company will provide all reasonable assistance, which may include counselling, time off, sick leave, family responsibility leave, and information regarding the virus and its effects.*
2. **Work performance and reasonable accommodation.** *It is the policy of the Company to respond to the changing health status of employees by making reasonable accommodation. Employees may continue to work as long as they are able to perform their duties safely and in accordance with performance standards. If an employee with AIDS is unable to perform his/her tasks adequately, the manager or supervisor must resolve the problem according to the company's normal procedure on poor performance/ill-health.*
3. **Benefits.** *Employees living with HIV/AIDS will be treated no less favourably than staff with any other serious illness/condition, in terms of statutory and company benefits, workplace compensation, where appropriate, and other available services.*
4. **Health care.** [This paragraph will need to be amended according to the size of the company and resources available for medical care.]
 - ▶ *The occupational health service will offer the broadest range of services to prevent and manage HIV/AIDS, including the provision of antiretroviral drugs, treatment for the relief of HIV/AIDS-related symptoms and opportunistic infections (especially tuberculosis), and reproductive and sexual health services and advice on healthy living, including nutritional counselling and stress reduction. The dependants of employees will also be eligible for medical treatment.*
 - ▶ *Appropriate support and counselling services will be made available to employees.*

Possible alternative

4. **Health care.** *This Company will help employees living with HIV/AIDS to find appropriate medical services in the community, as well as counselling services, professional support and self-help groups, if required. Reasonable time off will be given for counselling and treatment.*

IV. Implementation and monitoring

If the policy does not take the form of a negotiated agreement, a short clause could be added whereby management and worker representatives pledge their full support to the policy.

Sample language

1. *Company X has established an HIV/AIDS committee [or responsible officer, in a smaller workplace] to coordinate and implement the HIV/AIDS policy and programme. The committee consists of employees representing all constituents of the company, including general management [spell out constituents, e.g. staff committee, medical services, human resources department, etc.]. The committee/responsible officer will report regularly to the executive board.*
2. *In order to plan and evaluate its HIV/AIDS policy and programme effectively, Company X will undertake a survey to establish baseline data, as well as regular risk and impact assessment studies. The survey will include knowledge, attitudes and behaviour/practices. Studies will be carried out in consultation with, and with the consent of, employees and their representatives, and in conditions of complete confidentiality.*
3. *This policy, and related information on HIV/AIDS, will be communicated to all Company X employees, associated businesses and the wider public using the full range of communication methods available to the Company and its network of contacts.*
4. *This policy will be reviewed annually and revised as necessary in the light of changing conditions and the findings of surveys/studies conducted.*

Budget and finance

Companies should make every effort to establish a budget for HIV/AIDS activities, but should bear in mind the following: many interventions can be put in place at little or no cost; smaller companies can work together to share costs; and services and resources may exist in the community or may be sought, for example, through the local UN Theme Group on HIV/AIDS or the new Global Fund to Fight AIDS, Tuberculosis and Malaria. Technical assistance to conduct surveys may be sought through UNAIDS and the ILO.

Further advice on, and examples of, workplace policies may be obtained from the Asia Business Coalition, Family Health International, the Global Business Coalition, the International Labour Organization, the International Confederation of Free Trade Unions and its Asia-Pacific office, the International Organisation of Employers, and the World Economic Forum (addresses on jacket cover and see below).

Some useful websites:

www.ilo.org/aids

www.unaids.org

www.abcon aids.org

www.weforum.org/globalhealth

www.ioe-emp.org

www.icftu.org

www.icftu-apro.org

www.fhi.org

www.businessfightsaids.org

After establishing the core elements of a workplace policy, we turn to the process of agreeing and implementing the policy. The policy will be more appropriate and the implementation more effective if it is based on consultation and collaboration between employers and representatives of the workforce. Partnership with trade unions can also reduce costs for the company—unions can help organize programmes and provide trainers and educators.

Developing and implementing the policy

Appendix III of the *ILO Code of Practice on HIV/AIDS and the world of work* gives a checklist of steps for agreeing and implementing a workplace policy on HIV/AIDS:

1. HIV/AIDS committee is set up with representatives of top management, supervisors, workers, trade unions, human resources department, occupational health services, health and safety committee, and persons living with HIV/AIDS. In smaller workplaces, an existing committee may be used or a responsible officer appointed in either case to make sure that regular reports are made to the highest decision-making body in the enterprise.
2. Committee decides its terms of reference and decision-making powers and responsibilities: these must be approved by existing decision-making bodies (e.g. workplace committee, executive board).
3. Review of national laws and their implications for the enterprise; this should go beyond any specific laws on HIV/AIDS and could include antidiscrimination laws, for example, and relevant ILO conventions.
4. Committee assesses the impact of the HIV/AIDS epidemic on the workplace and the needs of workers by carrying out a confidential baseline study—important for planning a programme and for monitoring the effectiveness of the response.
5. Committee establishes what health and information services are already available, both in the workplace and in the local community: useful to avoid duplication. Information about community services is an essential part of a 'no/low-cost' response in enterprises with few resources.
6. Committee formulates a draft policy that contains a commitment to nondiscrimination, covers prevention and care, and takes account of best practice. Draft is circulated for comment, then revised and adopted; the wider the consultation, the fuller the sense of 'ownership' and support. The policy should be written in clear and accessible language.
7. Committee draws up a budget, seeking funds from outside the enterprise, if necessary, and identifies existing resources in the local community. Although funds are important, the absence of funding should not mean that no action is possible.
8. Committee establishes plan of action, with timetable and lines of responsibility to implement policy; it is important to have at least one named HIV/AIDS coordinator/focal point to ensure implementation, especially where it is not possible to set up a committee just for HIV/AIDS.
9. Policy and plan of action are widely disseminated through, for example, notice boards, mailings, pay slip inserts, special meetings, induction courses and training sessions, and programmes of information, education and care are put in place.
10. Committee monitors the impact of the policy and revises it as necessary. The HIV/AIDS epidemic is evolving rapidly, and so is the response. Workplace policies and programmes must not stand still.

The *ILO Code of Practice on HIV/AIDS and the world of work* is a set of internationally recognized guidelines that promote and support action against HIV/AIDS in the world of work. Developed in consultation with Member States and approved by representatives of government, employers and workers from all regions, the Code contains fundamental principles for policies at national and enterprise levels, and practical guidance for workplace programmes.

The 10 key principles *(text from the Code is in italics)*

- 1. Recognition of HIV/AIDS as a workplace issue:** *HIV/AIDS is a workplace issue* because it affects workers and enterprises—cutting the workforce (by up to 30% in some countries), increasing labour costs and reducing productivity. *It should be treated like any other serious illness/condition in the workplace:* this statement aims to counter discrimination and also the fears and myths that surround HIV/AIDS. *The workplace has a role to play in the wider struggle to limit the spread and effects of the epidemic:* later sections of the Code, especially those on prevention, training and care, clearly explain this role.
- 2. Nondiscrimination:** *There should be no discrimination against workers on the basis of real or perceived HIV status.* Nondiscrimination is a fundamental principle of the ILO and is at the heart of the ILO's response to the epidemic. The principle of nondiscrimination extends to employment status, recognized dependants, and access to health insurance, pension funds and other staff entitlements. *Discrimination and stigmatization of people living with HIV/AIDS inhibits efforts aimed at promoting HIV/AIDS prevention:* if people are frightened of the possibility of discrimination, they will probably conceal their status and are more likely to pass on the infection to others. Moreover they will not seek treatment and counselling. All successful prevention initiatives have been part of a wider approach that included establishing an atmosphere of openness, trust and a firm stand against discrimination.
- 3. Gender equality:** *The gender dimensions of HIV/AIDS should be recognized. Women are more likely to become infected and are more often adversely affected by the HIV/AIDS epidemic than men, for biological, sociocultural and economic reasons.* It is, therefore, important that HIV/AIDS programmes respond to the circumstances and needs of men and women separately, as well as together—both in terms of prevention and social protection to mitigate the impact of the epidemic.
- 4. Healthy work environment:** *The work environment should be healthy and safe, as far as is practicable, for all concerned parties.* This includes the responsibility for employers to provide information and education on HIV transmission, and appropriate first-aid provisions in the event of an accident. It does not, however, give employers the right to test employees for HIV in the interest of public health, because casual contact at the workplace presents no risk of HIV transmission. *A healthy work environment facilitates... adaptation of work to the capabilities of workers, in light of their physical and mental health,* thereby mitigating the impact of AIDS on workers and the enterprise alike.
- 5. Social dialogue:** *The successful implementation of an HIV/AIDS policy and programme requires cooperation and trust between employers, workers and their representatives and government, where appropriate:* this is not only fundamental to the way the ILO works, but is very practical in that any policy is more likely to be implemented effectively if it has been developed with the full participation of all concerned parties.
- 6. No screening for purposes of exclusion from employment or work processes:** *HIV/AIDS screening should not be required of job applicants or persons in employment.* HIV testing not only violates the right to confidentiality, but is impractical and unnecessary. At best, an HIV test result is a 'snapshot' of someone's infection status today. It is no guarantee that he or she will not become infected tomorrow, or next month. It should also be remembered that people with HIV may remain perfectly fit and healthy for many years.
- 7. Confidentiality:** *There is no justification for asking job applicants or workers to disclose personal HIV-related information. Nor should co-workers be obliged to reveal such personal information about fellow workers.* The right to confidentiality does not, of course, only apply to HIV/AIDS; rules of confidentiality have been established in the *ILO Code of Practice on the protection of workers' personal data*, 1997.

- 8. Continuation of employment relationship:** *HIV infection is not a cause for termination of employment. As with many other conditions, persons with HIV-related illnesses should be encouraged to work for as long as medically fit in available, appropriate work.* This principle is based on the fact that being HIV-positive is not the same as having AIDS and a number of possible opportunistic infections. Reasonable accommodation to help workers continue in employment can include rearrangement of working time, special equipment, opportunities for rest breaks, time off for medical appointments, flexible sick leave, part-time work and return-to-work arrangements.
- 9. Prevention:** *HIV infection is preventable. Prevention of all means of transmission can be achieved through a variety of strategies—guidelines and examples are given in succeeding sections of the Code, especially section 6.* Prevention can be furthered through a combination of information, participatory education (including personal risk assessment and life skills), practical support for behavioural change (such as condom distribution), and treatment for sexually transmitted infections.
- 10. Care and support:** *Solidarity, care and support should guide the response to HIV/AIDS in the world of work.* Prevention, care and treatment should be seen as a continuum, rather than separate elements, of a workplace programme. The availability of treatment encourages confidential voluntary testing, making it easier to provide care and encouraging prevention. Care and support include the provision of voluntary testing and counselling; treatment for opportunistic infections, especially tuberculosis (and antiretroviral therapy, where affordable); workplace accommodation; employee and family assistance programmes; and access to benefits from health insurance and occupational schemes (more details in section 9 of the Code).

An education and training manual has been produced by the ILO to guide implementation of the Code of Practice.

The concerns of trade unions have always included the major social issues of the times; now, there is HIV/AIDS. The epidemic is concentrated among adults of working age: of the 40 million people estimated to be infected today, 90% are adults and at least 25 million are workers in their productive prime (aged 15–49). Their rights, livelihoods and survival are under threat.

The responsibilities of trade unions and labour organizations have traditionally included:

- ▶ representing the interests of workers, protecting their rights and combating discrimination;
- ▶ ensuring safe and healthy working conditions;
- ▶ promoting access for all workers to a fair income, social insurance and basic health care; and
- ▶ participating in social dialogue on national issues affecting employment, the labour market and human resources.

The comparative advantage of trade unions

Nationally and internationally, trade unions are able to: mobilize extensive networks of members and contacts; negotiate workplace agreements/policies with employers and help with implementation; make use of experience in education and training; and build on their influence in the community and with government.

The comparative advantage of the workplace

The workplace is one of the most important and effective points for tackling the epidemic, because it is where working people come together on a regular basis; communications systems are in place for enterprise and public information; and existing structures and facilities can be used for prevention, care and support.

In the light of the epidemic and its consequences for working people, their families, communities and workplaces, trade unions are adapting and extending their responsibilities in the following areas:

Protecting the rights and dignity of those infected and affected by HIV or AIDS

A core union responsibility, the protection of the rights of workers is essential in order to combat the fear and denial that still surround the epidemic, and to promote effective prevention. A core provision in workplace policies and agreements should be nondiscrimination on the basis of HIV status.

Prevention of HIV

Trade unions have experience in education and training; this can include sessions on HIV/AIDS and the training of workplace representatives as peer educators. Prevention programmes should include the following: informing workers on how HIV is and is not transmitted; helping workers assess the risks of their own behaviour; education in life skills; and practical support for behavioural change (e.g. condom distribution). Occupational health and safety is also a basic concern: in the face of HIV/AIDS, unions can ensure appropriate first-aid measures, including knowledge of universal precautions and availability of basic protective equipment.

At the initiative of the public service trade union, a government office in Thailand set up a programme to train six people from each department, at all levels of responsibility, to become HIV/AIDS focal points. They were then authorized to hold regular information and discussion sessions for their colleagues during working hours.

Care and support

In the context of HIV/AIDS, care and support in the workplace range from protecting workers against stigma and discrimination to ensuring their access to available medical benefits and social security. Workers can help employers set up structures of care and support that are affordable, even in small enterprises. These should include information on community services, especially where counselling or medical treatment is not available in the workplace; encouraging workers to undertake voluntary confidential counselling and testing; supporting self-help groups; providing treatment for opportunistic infections and antiretroviral therapy, where possible; and adapting jobs and the work environment to help people with chronic sickness or disabilities (including AIDS) to continue working as long as possible.

Indian trade unions are developing policies to respond to HIV/AIDS as part of a campaign of HIV prevention with the ILO, funded by the United States Department of Labor. Training programmes and materials are being developed for workers and employers, and a demonstration project has been set up with the Mumbai District AIDS Control Society to show how to promote action in the workplace, based on the ILO Code of Practice.

Understanding and managing the impact of HIV/AIDS

Knowledge is needed in order to plan effectively for the management and mitigation of the personal, social and economic consequences of the epidemic—including the impact on human resources. The trade unions can support national efforts to analyse and monitor the epidemic and the effectiveness of responses—for example, by supporting anonymous testing for epidemiological surveillance, and by sharing examples of good practice.

A number of global union federations (representing building and wood workers, garment workers, teachers and public sector workers) have conducted surveys among their members to find out how HIV/AIDS is affecting their work and union activity, and what action they are taking in response. Most unions say the way forward is to integrate a component on HIV/AIDS into all ongoing activities, and strengthen the capacity of members to negotiate a workplace agreement on HIV/AIDS.

Advocacy and partnerships

Advocacy is needed at all levels to persuade governments that national AIDS policies must be multisectoral and include the world of work; persuade employers of the urgent necessity of setting up workplace programmes; and support campaigns around the availability of drugs and the strengthening of health systems. Trade unions can make a valuable contribution to national AIDS councils or committees.

Policy development

The International Confederation of Free Trade Unions (ICFTU) encourages its affiliated organizations—national union centres and the global union federations—to develop policies for their own organizations, as well as workplace policies or clauses in collective agreements. Programmes to implement these policies should provide training components for all relevant workplace actors, and structures for measuring and monitoring the impact of the epidemic and the effectiveness of the response.

Bringing together trade unions from all over Africa in Gaborone, Botswana, in 2000, ICFTU-AFRO issued the *Gaborone Trade Union Declaration* and resulting *Framework of Action on HIV/AIDS*. A manual to guide trade union interventions in the region has also been produced.