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HIV in the workplace

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ACHIEVEMENTS

The International Labour Organization (ILO) and partners have taken a global leadership role in providing technical advisory support, normative guidance, resource mobilization support, capacity building and direct funding support to countries in order to design, implement, monitor and evaluate HIV workplace programmes. Of the countries that reported in the 2014 National Commitments and Policy Instrument (NCPI), 84% indicated that workplace programmes were addressed in their multisectoral strategies, and 78% of governments indicated that HIV prevention workplace programmes were being implemented in their countries.

In 2014, the Inter-Agency Task Team (IATT) organized its work around one key priority area and two sub-priority areas. In 2014 the three areas were:

- scaling up the VCT@WORK initiative in high-impact countries (key priority);
- developing new indicators for measuring employment-related discrimination; and
- establishing a global information hub for workplace HIV material.

Scaling up the VCT@WORK initiative in high-impact countries

An operational guide was developed in collaboration with the Global Network for and by People Living with HIV (GNP+) and other IATT members, and it was finalized to ensure that key human rights principles are upheld in the implementation of the VCT@WORK initiative. The guidance, which has yet to be launched, was shared with high-impact countries to facilitate the ongoing VCT@WORK initiative.

Scaling up HIV testing in high-impact countries

In 2013, the Joint United Nations Programme on HIV/AIDS (UNAIDS) reported that 19 million of the 35 million people living with HIV globally were unaware of their HIV status. To achieve the Fast-Track 90-90-90 targets and take a major step towards ending AIDS by 2030, HIV testing must be scaled up exponentially, especially among key populations and those populations that have been left behind. The VCT@WORK initiative was developed on this basis: it was launched in June 2013 by ILO, the UNAIDS Secretariat, governments, and employer and worker organizations with the aim of mobilizing five million workers to test for HIV by December 2015.

ILO—with support from the United Nations Development Programme (UNDP), United Nations Educational, Scientific and Cultural Organization (UNESCO), World Health Organization (WHO), UNAIDS, the IATT membership, networks of people living with HIV, civil society organizations and more than 200 country partners—mobilized networks and constituencies in 32 countries (including 25 high-impact countries) to generate demand for HIV testing. Over the past 18 months, more than 1.2 million workers have taken an HIV test (58% men, 40% women and 2% other), and approximately 3% (36 376 workers; 62% men, 36% women and 2% others) have tested positive and been referred to treatment and care services for follow-up.

The VCT@WORK initiative is being implemented as part of an integrated approach that combines programmes and initiatives to reduce HIV-related stigma and discrimination in the workplace with extended social protection services to cover people living with HIV. Some emerging positive outcomes from the VCT@WORK initiative include:

- enhanced partnerships with national AIDS councils, community service organizations and the private sector;
- better recognition of the contribution of the workplace to the national response;
- stronger commitments from business leaders
- increased outreach to company subsidiaries, supply chains and surrounding communities; and
- improved advocacy with the private sector to encourage financial contributions towards the sustainability of antiretroviral therapy.

Examples of joint work at the country level include:

- In Cameroon, UNDP, ILO and UNESCO provided financial support in a joint effort towards implementing the VCT@WORK initiative. Networks of people living with HIV provided in-kind contributions, while the National AIDS Commission provided condoms. With encouragement from the Ministry of Labour, employers and trade unions, 32 978 workers (66% men and 34% women) from 70 organizations in the public and private sectors undertook voluntary counseling and testing (VCT) in 2014.
- In Nigeria, ILO collaborated with UNICEF, the UNAIDS Secretariat, the Federal Ministry of Labour, the Nigeria Labour Congress, the National Employers Consultative Association, networks of people living with HIV, and national and state AIDS control agencies to mobilize workers from Delta State, Lagos State and the Federal Capital Territory to test for HIV within the context of a broader health and wellness medical check-up. A total of 36 603 workers (49% men and 51% women) tested in 2014.
- The World Food Programme (WFP) continued its partnership with North Star Alliance to expand services across transport corridors through 30 Road Wellness Centres in twelve countries in Africa. Each Road Wellness Centre is supported by well-trained clinical and outreach teams, and they feature an electronic health passport system that allows patients to access their health records at every clinic within the network. The partnership expands access to voluntary and confidential HIV counselling and services, as well as other health services. In 2014, it served more than 226 000 clients and distributed more than 1.29 million condoms.

Developing indicators for ending HIV-related discrimination at work

In June 2014, the IATT called for the establishment of an ILO-led working group to develop indicators to measure HIV-related stigma and discrimination in workplaces. The indicators will be made available to private sector actors in order to establish a baseline for assessing

the nature and extent of stigma and discrimination in workplaces, to inform the design and delivery of targeted interventions, and to measure progress achieved in addressing HIV-related stigma and discrimination. The indicators will focus on the following three specific groups:

- employers and managers (or supervisors);
- workers and their representatives; and
- members of key affected populations, including people living with HIV and affected communities.

Global workplace information hub

An information hub was established by the IATT in 2014 and hosted by ILO. Information in the hub comprises research studies, good practices and other relevant publications pertaining to the workplace and private sector engagement. The goal of the hub is to provide a one-stop shop for HIV workplace material for national stakeholders.

MAJOR CHALLENGES AND HOW THESE WERE ADDRESSED

A key challenge has been how best to get more workers to undertake VCT while protecting their rights to consent and confidentiality. The main lesson learned in this regard is the importance of strong management support that ensures confidentiality. Additionally, the link to the continuum of care and support must be assured. For example, in the entertainment sector in Asia, sex workers were more likely to undertake testing at their place of work if they knew their results would be given only to them, and that there was no risk of them losing their jobs if they were found to be HIV-positive. In large companies where medical services are provided on site through clinics, integrating HIV testing works well if management support is assured; otherwise external mobile services work better.

Another key challenge in many countries has been a shortage of testing capacity, laboratory staff, counselors, reagents and test kits necessary for scaling up HIV testing. One solution to this problem would be the introduction of rapid testing, such as finger prick or saliva testing. To reach the 90-90-90 targets, HIV testing has to be revolutionized, demystified and made more routine.

The low perception of risk of HIV in many countries with concentrated epidemics makes many workers feel they don't need to take an HIV test. To overcome this, the creation of broad partnerships has facilitated HIV testing within the context of general health and wellness tests. This increases the appeal and relevance to workers, and it enhances the uptake of HIV testing. Demonstrating clear and strong linkages between workers' health and productivity has proven to be effective in attracting the attention of both companies and workers.

Limited funding for scaling up the VCT@WORK initiative is one of the main challenges. To overcome this persistent challenge, strategic partnerships were forged with many providers

at the country level. While this has not totally addressed the problem of low funding, it has strengthened the joint financial contributions to the initiative. Mobilizing the private sector to contribute towards HIV testing has shown modest results. In Cameroon, for instance, the private sector has contributed financially towards the purchase of antiretroviral medicines, while positioning the VCT@WORK initiative as a national HIV testing initiative has proved successful for mobilizing some financial resources in several other countries.

Placing people living with HIV at the centre of HIV testing efforts and demonstrating the life-saving benefits of antiretroviral therapy has been critical to encouraging workers to take the HIV test. Witnessing the benefits of treatment contributes towards reducing stigma and discrimination around HIV and AIDS, while proving that treatment is available provides workers with a sense of assurance that there is hope even if one tests positive.

Globally, a higher proportion of women know their HIV status than men. While prevention of mother-to child transmission services contributes to enhanced uptake of HIV testing for women, the VCT@WORK initiative is reaching more men (because most workplaces have more male employees than female employees) and contributing to closing the testing gap between women and men.

KEY FUTURE INTERVENTIONS

- Going forward, the VCT@WORK initiative will strengthen partnerships with key stakeholders at the national level, with the aim of more effectively reaching key and vulnerable working populations. VCT@WORK would be implemented in key cities, municipalities and towns with a higher than average incidence. Similarly, HIV testing in hotspots would increase the likelihood of reaching key populations such as sex workers, mobile and migrant workers, women and young people.
- To achieve sustainability, the engagement with national AIDS councils must be strengthened. The sustainability of the VCT@WORK initiative depends on the extent of country ownership. In this regard, the approach would be to better position VCT@WORK as a national initiative. Additional financial resources would be mobilized from donors to sustain and scale up HIV testing in high-impact countries. Efforts at getting the private sector to contribute resources also would be intensified.
- To achieve the Fast-Track 90-90-90 targets, HIV testing has to be significantly scaled up. This will not be achieved through a business as usual approach; instead, there is an urgent need to generate a strong momentum around HIV testing and prioritize this in high-impact countries. The VCT@WORK initiative would strengthen partnerships with other ongoing HIV testing initiatives (e.g. PROTEST HIV) with a view to inspiring a global HIV testing initiative involving the UNAIDS Secretariat, Cosponsors and other partners. To this end, ILO will present a paper to UNAIDS providing the key elements for such a global HIV testing campaign. This initiative would be linked to reducing discrimination and scaling up social protection.

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