

“Leadership and HIV/AIDS – Advancing the Trade Union Response in Africa”



International Trade Union Confederation - Africa
pre-Congress event
24 November 2011

Parktonian Hotel, 120 de Korte Street, Protea room
Braamfontein, Johannesburg, South Africa



INTERNATIONAL TRADE UNION CONFEDERATION- AFRICA
2nd Congress
Johannesburg 25-27 November 2011



“Leadership and HIV/AIDS – Advancing the Trade Union Response in Africa”

ITUC Africa pre-Congress Event

In the Political Declaration on HIV/AIDS, adopted during the June 2011 United Nations General Assembly High Level Meeting on AIDS, all Member States committed to:

“mitigate the impact of the epidemic on workers, their families, their dependents, workplaces and economies, including by taking into account all relevant conventions of the International Labour Organization, as well as the guidance provided by the relevant International Labour Organization recommendations, including Recommendation No. 200” and called on “employers, trade and labour unions, employees and volunteers to eliminate stigma and discrimination, protect human rights and facilitate access to HIV prevention, treatment, care and support” (Paragraph 85 of the 2011 UNGA Political Declaration on HIV and AIDS).¹

Trade unions all over the world believed that this commitment could play a game-changing role for achieving universal access, finding new models of cooperation, reviewing the place of trade unions in the partnership landscape for HIV/AIDS and considering synergies of delivering on multiple development outcomes.

Trade union HIV/AIDS programs were born out of the recognition that AIDS is not simply a question of health but also a social and economic crisis the causes and consequences of which are to be found in the wide range of factors related to the world of work. The adoption of the new ILO standard on HIV and AIDS (Recommendation no 200, 2010) has diametrically influenced the framework for trade union HIV/AIDS response. A few days after the adoption of the new standard, the 2nd International Trade Union Confederation’ Congress in Vancouver² agreed its first resolution “Fighting HIV/AIDS”³ in which the trade union movement instructed the ITUC and regional organisations to work together in order to raise HIV/AIDS to greater prominence on the trade union agenda worldwide; promote the fullest and most effective implementation of the new ILO HIV and AIDS Recommendation no 200 (2010) both at the national and international level; and strengthen partnerships with, among others, employers, the ILO, the UNAIDS, the WHO, the Global Fund and other concerned international organisations.

With a view to contextualize the discussion on HIV/AIDS, leadership and accountability to Africa, the African Regional Organisation of the International Trade Union Confederation (ITUC-Africa) and the International Trade Union Confederation (ITUC) organised a pre-Congress event on HIV and AIDS that aimed to discuss the role of the world of work in defining the links between tackling HIV and attaining the Millennium Development Goals. ITUC-Africa represents 16 million workers through its 90 affiliated trade union centres in 47 African countries. The ITUC represents 175 million workers through its 351 affiliates in 151 countries worldwide. The 2nd ITUC Africa Congress, organized under the theme “Renewing the African Trade Union Movement Towards African Emancipation”, took place from 25th to 27th November 2011 in Johannesburg, South Africa.

The purpose of this event was to gather the trade union leadership in order to discuss:

- Progress made so far in Africa to give effect to the ILO Recommendation on HIV and AIDS and the World of Work, 2010 (no 200);
- Good practices of work done on HIV and AIDS by unions in Africa;
- Principles, strategies and types of support needed to further develop ownership of AIDS workplace responses;
- An integrated approach in engaging programmatic issues around both AIDS and the Millennium Development Goals, including resource mobilisation;
- Effective use of partnerships (regional level, national level).

The event drew together around 30 ITUC Africa Congress delegates, including ITUC Africa General Council Members, as well as leaders and experts from the ILO, UNAIDS, GFATM, representatives of the Government of South Africa, and others.

The event’s outcome document will aim at summarizing the conclusions on the way forward for trade unions in Africa with regard to HIV and AIDS and the MDGs.

¹ The text of the 2011 Political Declaration is available at: <http://www.un.org/Docs/journal/asp/ws.asp?m=A/65/L.77>

² Information about the 2010 ITUC Congress is available at: <http://www.ituc-csi.org/congress.html>

³ The text of the 2010 ILO HIV and AIDS Recommendation (np.200) is available at: <http://www.ituc-csi.org/resolution-on-fighting-hiv-aids.html?lang=en>

Program

9h00-9h30 Registration, coffee and tea		
9h30- 10h00 Part 1: Inauguration Chair: Mr Mody Guiro, President of ITUC Africa, General Secretary of CNTS Senegal		
9h30-10h00	Opening	*Mr Mody Guiro, President, ITUC Africa, General Secretary, CNTS Senegal *Mr Jaap Wiene, Deputy General Secretary, ITUC
10h00-11h30 Part 2: HIV and AIDS and the Role of the World of Work		
10h00-10h10	Implementation of ILO HIV and AIDS Recommendation (n. 200) in South Africa	*Mr Niresh Singh, Head, Policy Unit, Employment Equity Directorate, Department of Labour, South Africa
10h10-10h20	Partnerships in Integrated HIV Response and the Role of	*Dr Thobile Mbengashe, Chief Director: HIV and AIDS and TB; Department of Health, South Africa
10h20-10h30	2011 Political Declaration on AIDS – Maximising AIDS Response Progress in Africa	*Dr Mbulawa Mugabe, Deputy Director, UNAIDS Johannesburg
10h30-10h40	HIV and AIDS and the World of Work in Africa: the Way Forward	*Dr Alice Ouedraogo, Director, ILOAIDS Geneva
10h40-10h50	Protection of Human Rights at Work – Lessons Learned from the Global Level	*Dr Sophia Kisting, former Director, ILOAIDS Geneva
10h50-11h30	Discussion: Universal access and the world of work in Africa	*opening comment: Mr Vic Van Vuuren, Director, ILO Pretoria *list of speakers from the floor
11h30-12h00 Coffee break		
12h00-12h50	Discussion: How to End Workplace- related Discrimination on Grounds of Real or Perceived HIV Status?	*opening comment: Mr Mark Heywood, Executive Director, Section 27, TAC and South African National AIDS Council *list of speakers from the floor
12h50-13h00	Good Practice: Political Progress on HIV/AIDS and the Role of Trade Unions in Senegal	Mr Ousmane Diop, Confederal Secretary, CNTS Senegal
13h00-14h00 LUNCH		
14h00-16h30 Part 3: Merging Efforts and Resources Chair: Mr Wellington Chibebe, Deputy General Secretary, ITUC		
14h00-14h20	Funding Workplace Interventions and Advocacy	*Mr Svend Robinson, External Relations and Partnerships Cluster, GFATM Geneva *Mr Simphiwe Mabhele, HIV/AIDS focal point, ILO Pretoria
14h20-14h30	Good practice: GFATM Funding and Trade Unions in Africa – the Case of Zimbabwe	* Ms Siwela Sithokozile, 1st Vice President, ZCTU Zimbabwe
14h30-15h30	Discussion: How to Improve Funding for Workplace HIV/AIDS Interventions and Advocacy?	*Invited comment: Ms Nikki Soboi, COSATU/SACTWU South Africa *list of speakers from the floor
15h30-16h00 coffee break		
16h00-16h00 Part 4: Summary of the Discussions		
16h00-16h15	Summary of the Discussions	*Mr Yahya Msangi, OSH and HIV/AIDS Coordinator, ITUC Africa *Ms Zuzanna Muskat-Gorska, Global Trade Union HIV/AIDS Coordinator, ITUC
16h15-16h30	Closing	Mr Wellington Chibebe, Deputy General Secretary, ITUC

List of participants Guests

name	surname		organization	country	position
CHIGWEDERE	Pride	Mr	UNAIDS RST ESA	South Africa	Coordinator, Universal Access
HEYWOOD	Mark	Mr	Section 27/SANAC	South Africa	Executive Director/Vice Chairperson
KISTING	Sophia	Dr	Guest	South Africa	Former Director ILOAIDS
MABHELE	Simphiwe	Mr	ILO Pretoria	South Africa	HIV/AIDS Focal point
MBENGASHE	Thobile	Dr	Department of Health	South Africa	Chief Director: HIV and AIDS and TB
MUGABE	Mbulawa	Dr	UNAIDS RST ESA	South Africa	Deputy Director
OUEDRAOGO	Alice	Dr	ILOAIDS	Geneva	Director
ROBINSON	Svend	Mr	GFATM	Geneva	Senior Adviser
SINGH	Niresh	Mr	Department of Labour	South Africa	Head, Policy Unit, Employment Equity Directorate
VAN VUUREN	Vic	Mr	ILO Pretoria	South Africa	Director

ITUC Affiliates

name	surname		organization	country	position
MARCOLINO	Eugenia Amelia	Ms	CGSILA	Angola	Secretary, Womens Committee
CARVALHO FRANSISCO	Maria Fernanda	Ms	UNTA	Angola	Deputy General Secretary
ONYALO	David	Mr	CLC	Canada	International Department Officer
KASSAHUN FOLLO	Amenu	Mr	CETU	Ethiopia	President
THOMAS	Andrée	Ms	FO	France	Secrétaire Générale
ANSAH	Joshua	Mr	GTUC	Ghana	General Secretary
CAMARA	Seny	MR	CNTG	Guinea	General Secretary URT
JOEL	Chebii	Mr	COTU	Kenya	1 st President
KUBAI	M'tumitu Isaiah	Mr	COTU	Kenya	Executive Board member
HAUWA UMAR	Mustapha	Ms	NLC	Nigeria	Ag. Head Women Committee
MUKARUZIMA	Dativa	Ms	CESTRAR	Rwanda	National President of women committee
GUIRO	Mody	Mr	CNTS/ITUC Africa	Senegal	General Secretary
DIOP	Ousmane	Mr	CNTS	Senegal	Senegalese trade unions HIV/AIDS Coordinator
MARIMA	Hilda	MS	CONSAWU	South Africa	National Equity Office
BODIBE	Jacqueline	MS	COSATU	South Africa	Policy coordinator on OMS and HIV/AIDS
SEHLABAKA	Joseph	MR	FEDUSA	South Africa	Chair Person
DE KOCK	Manie	MR	FEDUSA	South Africa	Div Manager
BOKABA	Edna	Ms	FEDUSA	South Africa	HIV Co-ordinator
BONGANI	Dlamim	Mr	NACTU	South Africa	HIV/AIDS Coordinator
SOBOIL	Nikki	MS	COSATU/SACTWU	South Africa	Executive Director
BONGANI	Zamini	Mr	NACTU	South Africa	Education Coordinator
ABDALLA	Mohamed Adam	MR	SSWUF	South-Sudan	Secretary General
MGAYA	Nicholas	Mr	TUCTA	Tanzania	Secretary General
ADOSSI AMIVI	Esenam	Ms	CSTT	Togo	President, Women's Committee
MONCEF	Yaacoubi	MR	UGTT	Tunisia	Secretary General
MUMBA	Agness	Ms	ZCTU	Zambia	Chairperson Women's Committee
KATUMBA	Miriam	Ms	ZCTU	Zimbabwe	WAC Chairperson
SITHOKOZILE	Siwela	MS	ZCTU	Zimbabwe	1 st Vice President

Global Union Federations in Africa

name	surname		organization	country	position
AMUKO	Omara	Mr	GUFs - IUF	Uganda	OHSE Coordinator
KATENDE	Joseph	Mr	GUFs - ITF	Nairobi	HIV/AIDS Coordinator
MARIWO	Tsitsi	Ms	GUFs - PSI	South Africa	HIV/AIDS project coordinator ZA
OPANGA	Paul	Mr	GUFs -BWI	South Africa	Regional Education Officer Africa/MENA

ITUC/ITUC Africa

name	surname		organization	country	position
ADU-AMANKWAH	Kwasi	Mr	ITUC Africa	Togo	General Secretary
CHIBEBE	Wellington	Mr	ITUC	Brussels	Deputy General Secretary
MSANGI	Yahya	Mr	ITUC Africa	Togo	OSH and HIV/AIDS Coordinator
MUSKAT-GORSKA	Zuzanna	Ms	ITUC	Brussels	Global Trade Union HIV/AIDS Coordinator
WIENEN	Jaap	Mr	ITUC	Brussels	Deputy General Secretary



**Zero New Infections. Zero Discrimination. Zero AIDS-Related Deaths.
Implement the ILO Recommendation on HIV and AIDS.**



Distributed documents:

ITUC Africa and ITUC would like to express thanks to the UNAIDS Regional Support TEam office in Johannesburg for their support in providing publications and materials for the meeting

1. ILO Recommendation on HIV and AIDS and the World of Work no. 200 (2010)
2. UNAIDS (2011) Outlook Report: 30 years into the AIDS epidemic, Geneva, Switzerland
3. UNAIDS (2011) AIDS at 30: Nations at the crossroads, Geneva, Switzerland
4. UNAIDS (2010) Report on the global AIDS epidemic, Geneva, Switzerland
5. UNAIDS (2010) Global Plan towards the elimination of new HIV infections among children by 2015 and keeping their mothers alive
6. UN Political Declaration on HIV/AIDS: Intensifying our Efforts to Eliminate HIV/AIDS (2011)
7. UN Security Council Resolution 1983 (2011) (in which the UN Security Council Encourages Inclusion of HIV Prevention, Treatment, Care, Support in Implementing Peacekeeping Mandates)



Dr Mbulawa Mugabe, UNAIDS Johannesburg, Mr Wellington Chibebe, ITUC, Mr Niresh Singh, Department of Labour, South Africa, Dr Thobile Mbengashe, Department of Health, South Africa, Mr Mody Guiro, CNTS Senegal, ITUC, Dr Sophia Kisting, Mr Vic Van Vuuren, ILO Pretoria, Ar Alice Ouedraogo, ILOAIDS Geneva, Mr Jaap Wienen, ITUC

Record of the Meeting

9h30- 10h00 Part 1: Inauguration

Chair: Mr Mody Guiro, President of ITUC Africa, General Secretary of CNTS Senegal

Mr Mody Guiro, President of ITUC Africa, General Secretary of CNTS Senegal officially opened the meeting. He welcomed the guests and greeted the participants. He underlined that 2010 and 2011 has brought important political and standard setting developments – the adoption of the 2010 ILO HIV and AIDS Recommendation no. 200 and the adoption of the 2011 Political Declaration that recognised the role of the world of work in HIV/AIDS response. He reminded those in attendance that during the next three days the African Regional Organisation of the International Trade Union Confederation (ITUC-Africa) was going to hold its 2nd Congress under the theme of “Renewing the African Trade Union Movement Towards African Emancipation”. Therefore, the pre-Congress event on HIV/AIDS provided the opportunity to gather the trade union leadership in order to discuss principles, strategies and types of support needed to review ownership of the AIDS response by trade unions in Africa, as well as to reflect upon an integrated approach in engaging programmatic issues around both AIDS and the Millennium Development Goals, including resource mobilisation and the use of partnerships.

Mr Jaap Wiene, Deputy General Secretary of ITUC, emphasised that there is a need to capitalise on the last years’ achievements. In that context he invoked the leadership of Dr. Sophia Kisting that allowed for a successful standard setting process in the ILO (adoption of the ILO HIV and AIDS Recommendation no. 200, 2010). He underlined that Dr. Kisting was always the greatest friend of trade unions, employers, and governments in their efforts to develop a human rights-oriented response to HIV/AIDS in the workplace. Likewise, he conveyed thanks to the new Director of ILOAIDS, Dr. Alice Ouedraogo, for her kind support from the beginning of her appointment, and expressed hope for continuing a close relationship between trade unions and ILOAIDS.

10h00-11h30 Part 2: HIV and AIDS and the Role of the World of Work

Implementation of ILO HIV and AIDS Recommendation (n. 200) in South Africa

Mr Nireesh Singh, Head, Policy Unit, Employment Equity Directorate, Department of Labour, South Africa

Mr Singh provided a briefing of the South African Government activities to implement the ILO HIV and AIDS Recommendation no. 200. South Africa has developed a legal and policy framework for HIV/AIDS and the world of work, informed by decent work objectives, that is employment promotion, rights at work, social protection, and social dialogue. The regulation framework includes the South African Code of Good Practice on key aspects of HIV/AIDS and Employment, 2000 (that regulates various HIV-related aspects of employment) and the Employment Equity Act (that provides the framework for eradicating labour-related inequalities, including those created by the Apartheid system). Currently, South Africa is in the process of reviewing this framework in order to make it coherent with the new ILO Recommendation no. 200. The 2000 Code



of Good Practice on key aspects of HIV/AIDS and Employment is going to be replaced with the new “Code of Good Practice on HIV&AIDS in the World of Work”, which follows the progressive standard established by the ILO Recommendations in areas such as Scope (the Code explicitly lists persons in any employment or occupation, job seekers, volunteers, armed forces and all sectors of economic activity), requires reasonable accommodation measures, establishment of grievance procedures, consultation with workers on policy making and implementation, access to healthcare for workers and their dependants, and a special focus on young workers. Accordingly, strengthening of the judicial implementation is planned, following a positive development that took place this year involving an HIV-related employment discrimination case in which the South African court confirmed illegal character of dismissal solely on grounds of HIV status and for the first time invoked the ILO Recommendation no. 200. Consequently, the plan of action also includes support for the implementation of the new South African National Strategic Plan 2011-2016. Mr Singh underlined that HIV/AIDS response needs to encompass employment promotion, social protection and social dialogue.

Mr Wellington Chibebe, ITUC, Mr Nireesh Singh, Department of Labour, South Africa, Dr Thobile Mbengashe, Department of Health, South Africa, Mr Mody Guiro, CNTS Senegal, ITUC

Partnerships in Integrated HIV Response and the Role of the World of Work

Mr Thobile Mbengashe, Chief Director: HIV and AIDS and TB; Department of Health, South Africa

Mr Mbengashe gave an update on HIV prevalence and incidence in South Africa and underlined that without understanding societal issues around HIV/AIDS, especially those making people vulnerable to new infections, it is impossible to tackle this epidemic. He underlined that prevention, informed, voluntary counselling and testing as well as right to treatment are key priorities in the way forward. Mr Mbengashe stressed that the South African Government has made a long-term commitment to both scaling up HIV counselling and testing as well as scaling up access to treatment. However, it becomes clear that a truly integrated response must include not only financial provisions for the health system, but also arrangements for national health insurance, measures for tackling poverty and procedures for involving partners. He accentuated that the South African Government recognises that decentralisation of HIV/AIDS response makes a difference. For instance, community health workers can become the core of healthcare delivery, if adequately supported. But at the same time the Government is convinced that it is impossible to deliver

without dialogue and social consensus, as well as dealing with cross-cutting issues such as gender inequality and gender violence. Building such a multi-sectoral, multi-stakeholder response will contribute to effective tackling of the epidemic and eliminating broader socio-economic drivers of HIV/AIDS, while it will also strengthen efforts to bring more social cohesion and achieve various development goals.

2011 Political Declaration on AIDS – Maximising AIDS Response Progress in Africa

*Dr Mbulawa Mugabe, Deputy Director, UNAIDS Johannesburg, South Africa



Dr Mbulawa Mugabe, UNAIDS Johannesburg, Mr Wellington Chibebe, ITUC, Mr Niresh Singh, Department of Labour, South Africa
Dr Thobile Mbengashe, Department of Health, South Africa

Dr Mugabe provided an overview of the 2011 UN GA High Level Meeting on AIDS in June and its implications for the future of the global AIDS Response to 2015 and beyond. He underlined that strategic planning will require engaging more effectively with a broader range of stakeholders, and filling the partnership gaps in the HIV/AIDS response, such as an underplayed presence of trade unions. He observed that up to now the AIDS movement used to work with the private sector, identified as an important ally, but without a comparable involvement of labour. On the other side, labour accepted to be absent and did not speak on HIV/AIDS with a powerful enough voice. Dr. Mugabe indicated that in the post-HLM reality the role of unions could be very important. Social progressiveness, organisational capacity and sustainability of presence of the trade union movement gives a position to take the lead in locating the AIDS response at the vanguard of the equity and rights movement in the post-2015 development framework, if working hand in hand with the AIDS movement. The HLM and the new Political Declaration have provided a political framework for action against discrimination and for rights to health for workers, their families and communities. This document has also provided a platform to continue addressing broader equity concerns related to financing HIV response and equal access to treatment (and problems related to TRIPS+ agreements, intellectual property and trade barriers) that are close to the trade union agenda on global economy and rights. Dr. Mugabe suggested that

the labour movement should also consider its position on new challenges and issues such as the following: what can trade unions do to politically position AIDS responses, beyond workplace programs? What could be the new fields of such actions – targeting national AIDS policies and budgets with the trade union agenda? Working around the commitment of the private sector to financing AIDS responses? Organising sex workers (as one of the key populations in the HIV response)? Representation of HIV-positive workers?

HIV and AIDS and the World of Work in Africa: the Way Forward

*Dr Alice Ouedraogo, ILOAIDS Geneva Director

Dr Ouedraogo thanked everyone for the opportunity to address the meeting. She underlined that HIV/AIDS is indispensable to and mutually connected with the action on human rights. She observed that although the year 2011 witnessed many important processes on health and development, apart from those connected to HIV/AIDS – such as the High Level Meeting on Non-Communicable Diseases, the World Conference on Social Determinants of Health, Summit on Aid Effectiveness etc. – it cannot be said that HIV/AIDS response is in competition to other issues. On the contrary, bringing an end to the AIDS epidemic will allow improvement on other millennium development goals, and vice versa: realising progress in other areas of development and rights brings us closer to the success on HIV/AIDS. Dr Ouedraogo observed that the action on HIV/AIDS cannot be stopped now. Although the role of the world of work has not been fully optimised yet and much more can still be done, the new reality brings hope. The ILO Recommendation no. 200 is a great achievement and a reflection of an unambiguous commitment of the ILO constituencies – governments, workers, employers – to contribute to ending the epidemic. The Recommendation allows programming the HIV/AIDS response in the way that will be aligning the world of work actions with the changing context of HIV. Dr Ouedraogo stressed that this will require activism, as policies that stay on a shelf mean nothing. The principle of shared responsibility should be aligned with the recognition of the importance of partnerships. Dr Ouedraogo observed that the ITUC needs to take a step to utilise HIV/AIDS action as catalyst of change – to address vast development and equity issues, in alliance with partners.

Protection of Human Rights at Work – Lessons Learned from the Global Level

Dr Sophia Kisting, former ILOAIDS Geneva Director

Dr Kisting provided the review of lessons learned from the global-level action on developing the new standard on HIV and AIDS and the world of work. She underlined that although progress has been made on the response to HIV/AIDS in the world of work, we are still half way through. The workplace partners, including the trade union movement in Africa, needs to be more present in the HIV response. Otherwise, it will not be possible to tackle challenges brought by the financial crisis. HIV/AIDS and development issues need to be tackled together, such as HIV mother-to-child transmission and HIV-related maternal and child mortality in Africa – still the highest in the world – yet entirely medically preventable. Dr Kisting stressed that stigma and discrimination have not gone away and continue to create major barriers to end the AIDS epidemic. She also observed that unemployment affects people's lives in similarly destructive ways as HIV stigma. Dr Kisting therefore highlighted the role of the trade union movement in the fight for rights of people living with and affected by HIV. She stressed that although trade unions are not the only ones responsible for tackling these problems, they have the power to bring change, especially in times of shrinking resources. She underlined the sustainability of the labour movement, and the added value of grassroots-



Plenary discussion, Mr Joshua Ansah, GTUC Ghana, Mr Joel Chebii, COTU Kenya

based interventions that can be financed with comparatively little money. Dr Kisting stressed that the renewed HIV response needs to focus on tackling causes, not only consequences, and have good programming and multisectoral response. One of the areas to intensify cooperation is the potential of more exchange between ministries of health and ministries of labour in order to address aspects of the AIDS epidemic that are linked to labour and development. She underlined the need to address workers as vulnerable – and develop actions to protect young workers, women, the unemployed, informal workers and migrants. Dr Kisting also stressed the need to intensify multisectoral efforts to strengthen the public health sector (including by support given to healthcare workers) – since the vast majority of the population affected by poverty can only access healthcare through the public sector.

Opening Comment for the Discussion on Universal Access and the World of Work in Africa

Mr Vic Van Vuuren, Director, ILO Pretoria

Mr van Vuuren observed that in the reality of the current financial crisis, the financial markets do not look rosy and that most probably HIV/AIDS will be fighting for attention with other development goals. He stressed that while the AIDS epidemic is not going away, in 2011 we are dealing with a lost feeling of emergency when it comes to the global response. Even though we are dealing with peoples' lives, HIV/AIDS has become a side event. Mr van Vuuren underlined that pressing for policies and commitments becomes the key issue in the environment of uneven political commitment. He gave the example of the situation of South Africa after liberation from the Apartheid system in 1994. In the context of the labour market, there was a huge need for action to tackle profound inequalities created in the past. Recognition of existing inequalities and commitment to change was prevailing. Paradoxically, this positive attitude resulted in questioning the need for a specific regulation – an employment equity act. The commitment seemed unchangeable and a law seemed not needed. It was possible, however, to adopt the South African Employment Equality Act, and subsequently it appeared that had the law not been adopted, it would have been very difficult to deal with the remnants from the past, as commitment alone has tendency to fade with time. Mr van Vuuren further underlined that in the same way, when it comes to the current AIDS response, there is a need to put rules in order to secure progress and commitment to further change. Accordingly, the way forward with the AIDS response and the world of work is to develop a political and legal framework to guarantee rights. He also observed that there is the need to work out a true support of business – that goes beyond merely donating charity money to AIDS – and that now is the time for a more systemic action. Mr. van Vuuren underlined that the ILO Recommendation no. 200 can also be used to build the momentum around recommitting leaders to ending the AIDS epidemic. Lastly, he advised that workplace partners, including the labour movement, need to repackage their HIV/AIDS advocacy message to by-pass the “AIDS fatigue”, and to persuade all stakeholders to commit to take action on what we know is good for workers.



Dr Sophia Kisting, Mr Vic Van Vuuren, ILO Pretoria, Dr Alice Ouedraogo, ILO/AIDS Geneva

Discussion: Universal Access and the World of Work in Africa

In the discussion the participants underlined that poverty is still a strong driver of the AIDS epidemic and that it needs to be tackled, together with problems such as unemployment, a shrinking formal sector and shrinking decent job opportunities. They noted how much has been said during the meeting about what trade unions should do for AIDS response. They highlighted, however, that other partners at all levels of action need to be re-activated as well – with this including addressing global economy arrangements that stratify exploitation and deepen the current crisis. Trade unions remain committed to fight for the rights of HIV-positive workers but do not feel that they are winning the battle. Employers and governments must be committed as well. The participants also stressed the importance of trade union HIV/AIDS initiatives. While many of them started from below, like in Zambia, and were never supported by the Global Fund or other donors that promise assistance, the added value in terms of the reach to vulnerable populations (including young workers, women etc.) as well as in terms of building trustful environments for services was significant. However, trade unions need support and capacity building. We have to face the fact that capacity building schemes by governments or international agencies target almost exclusively NGOs. Trade unions are absent as recipients. This needs to be changed. The participants observed that at the same time there are new challenges to conduct workplace HIV/AIDS action – like reaching family members – and for new challenges we need new ways of dealing with them. The participants also stressed the need to talk more about the informal sector. The new ILO Convention on domestic work, which is subject to very strong informalisation, is almost absent of references to HIV/AIDS. Accordingly, there is the need to look at workers as vulnerable, including gender inequality – generally and at the labour market. It has been subsequently brought up that although after the adoption the ILO Recommendation no. 200 all governments were obliged to organise parliamentary discussions at the national level on how to implement the new standard, in reality in many countries such debate has not taken place. The participants stressed that there is a need to make it happen. Apart from that, the battle over financial aspects of the epidemic and injustice around pricing of drugs, intellectual property, WTO (TRIPS) and pharmaceutical markets is not over while many problems around HIV response can be solved by bringing the prices of medication down. Trade unions from many countries, including France, want to support this battle and organise exchange of information and common strategy-making between North and South as



Plenary discussion, Ms. Jacqueline Bodibe, COSATU South Africa, Ms Agnes Mumba, ZCTU Zambia

well as South-South. The participants also discussed the need for social dialogue and the need for the governments to work with trade unions and consult them before, not after, decisions or programming is done.

Opening Comment for the Discussion on How to End Workplace-Related Discrimination on Grounds of Real or Perceived HIV-status?

Mr Mark Heywood, Executive Director, Section 27, TAC and South African National AIDS Council



Plenary discussion, Mr Omara Amuko, IUF Uganda office, Mr David Onyalo, CLC Canada, Mr Kwasi Adu-Amankwah, ITUC Africa, Mr. Joseph Katende, ITF Nairobi office

Mr Heywood stressed that HIV discrimination in the workplace is still a major challenge. Although the workplace could be a great entry for fighting HIV discrimination, providing prevention and treatment, the recognition of the world of work in the AIDS response is still a lip service. He invoked the experience in South Africa, where trade union action triggered a human rights-oriented AIDS response. In the 90s the mining industry companies were conducting massive illegal HIV prevalence testing, and as a result they decided to deport Malawian migrants, largely affected by HIV. This attempt was stopped by the solidarity action of the South African trade unions. Mr Heywood also underlined that South African labour courts have already developed case law on HIV-related employment discrimination, but he also underlined that the problem is not solved and that discrimination in the workplace is growing in South Africa and elsewhere, killing people and killing the trade union movement. At the same time, several key elements of the workplace response are still missing – such as a mobilised, trained trade union action, with a plan and targets; such as business commitment; such as addressing issues such as systemic weakness of protections against HIV discrimination in the SMEs sector; such as addressing workplaces that put people at risk of infection because of inadequate safety and health measures or inadequate organisation of work. He underlined that among the issues that should be addressed by the global trade union movement are travel restrictions on grounds of HIV status as well as the global crisis of funding for the HIV response.

Discussion: How to End Workplace-Related Discrimination on Grounds of Real or Perceived HIV Status?

In the discussion the participants debated issues such as gender inequality and gender-based violence that often reach the workplace and the need for the emancipation of women and all groups subject to marginalisation, exclusion and exploitation. They highlighted that prohibition of mandatory workplace HIV testing is the key to realisation of other rights and that there is a need to ally efforts in order to fully eliminate employment-related mandatory testing and disclosure practices. They agreed that the issue of employment-related testing also creates concerns, such as in the case of domestic workers. Living in the same household and managing possible health conditions might create the need to make informed decisions. It was underlined that the way to deal with fear of workplace exposure to HIV infection is through knowledge, including deepened knowledge about the modes of transmission. A debate should continue to reaffirm that HIV testing brings a false feeling of security while it at the same time infringes on the dignity and human rights of the disempowered, such as in the case of domestic workers, who most often have no negotiating power. Concerns need, however, to be addressed by breaking stigma with information. Trade unions should take the lead in advocating for universal precaution and social inclusion principles, and in standing against unlawful testing practices and discrimination, following the trade union position in the negotiations on the ILO Recommendation no. 200. During the negotiations, the Workers' Group of the ILO HIV/AIDS Committee fought tirelessly against any exclusion from the prohibition of the workplace mandatory HIV testing principle. This commitment to a rights-based approach to AIDS needs to be maintained.

Trade Unions' Good Practice: Political Progress on HIV/AIDS and the Role of Trade Unions in Senegal

Mr Ousmane Diop, Confederal Secretary, CNTS Senegal

Mr Diop emphasised the need for a multisectoral action and partnerships in order to achieve political change on HIV/AIDS at the country level. He also stressed the crucial role of a well-established social dialogue between the government, trade unions and employers to accomplish progress on the workplace-related legal and policy framework that is crucial to achieve human rights and universal access. He provided an overview of the cooperation of social partners in Senegal on HIV/AIDS, including participation in the negotiations over the ILO Recommendation no. 200 at the International Labour Conference in 2009 and 2010. He also mentioned the adoption of the new law on HIV/AIDS in 2010 and the adoption of the new National Policy on HIV/AIDS and the World of Work in 2011. These acts were developed with the strong participation of trade unions. Subsequently, in 2011 trade unions and the ILO organised a national tripartite workshop in order to discuss the next steps with regards the ILO Recommendation. Mr. Diop underlined the importance of global advocacy on HIV and the world of work. He stressed that in 2011 Senegalese trade unions took part in the Universal Access Regional Hearing for West and Central Africa in Dakar. Trade unions were also taking the lead in advocacy related to the UN High Level Meeting on AIDS. As a result of dialogue with the government, trade unions were invited to join the country delegation to NY in order to represent the Senegalese civil society. This strong performance and position allowed for continuous advocacy during the HLM process and added



Mr Mark Heywood, SECTION 27/Treatment Action Campaign/SANAC, South Africa

to a positive outcome, i.e., securing the commitment of the governments to address HIV and AIDS and the world of work (Paragraph 85 of the 2011 Political Declaration).

Funding Workplace Interventions and Advocacy

*Mr Svend Robinson, External Relations and Partnerships Cluster, GFATM Geneva

*Mr Simphiwe Mabhele, HIV/AIDS focal point, ILO Pretoria



Plenary discussion, Ms. Edna Bokaba, FEDUSA South Africa, Mr. Joseph Sehlabaka FEDUSA, South Africa

Mr Robinson reported on the latest developments at the Global Fund Board meeting in Ghana and the cancellation of the Round 11 due to funding crisis. He underlined that the Global Fund may remain a source of funding for workplace interventions and advocacy. However, negotiations over the future of the Global Fund are ongoing, and there is the need for more clarity with regard to the arrangement for the future. He stressed that when it comes to relations between the Global Fund and trade unions, there is a need to consider three issues: what is the current engagement between the Global Fund and the unions, what are the realistic opportunities for improvement and how we can move forward. He underlined that there is a need for trade unions to reach out to the national forums of AIDS stakeholders in order to improve recognition of workplace action in the AIDS response. Country Coordinating Mechanisms that discuss and approve country proposals to the Global Fund are such forums, and so are National AIDS Councils. Both should be targeted by trade unions in order to secure presence in the national debate on programming the AIDS response, including funding.

Mr Mabhele provided an analysis of points of concern related to funding for workplace HIV/AIDS interventions and advocacy. He observed that the increase in spending on HIV/AIDS that has been noted since the 90s has not reached trade unions as recipients. Workplace interventions are usually understood solely as actions undertaken by the private sector. The private sector is in turn understood as “employers and their enterprises”. There is a kind of amnesia when it comes to the workforce and workers’ representatives as a part of this picture. Mr Mabhele observed that there are 29 business coalitions in Africa and that in the eyes of main HIV/AIDS donors, they are identified as main partners. This includes the current partnership policy of the Global Fund. The involvement of trade unions is not seen as meaningful. Another problem related to categories and definitions is the understanding of the workplace – employment – as only the formal sector. Categories such as the informal sector, volunteers and laid-off workers are not included. Consequently, incomplete terminology results in funding decisions and some interventions not being accepted. One of the tasks is to revise the vocabulary of strategic plans and national policies. Mr Mabhele highlighted that the ILO Recommendation no. 200 provides a very good support for such revision. Not only does it enumerate missing categories but it also deliberately speaks about “the world of work” instead of workplace/employment in order to cover all vulnerable situations, as well as the public sector. Another issue is paying attention to what kind of vocabulary will speak to the donors. The workplace remains a major context for stigma and discrimination, and trade unions should focus on bringing employment-related vulnerabilities when developing funding proposals. One of the ways to do so is to conceptualize around the Stigma Index research that is currently undertaken by GNP+ and UNAIDS. When it comes to projects funded by the Global Fund, there are few examples where business coalitions were implementing projects together with trade unions. Swaziland is one of the examples, but reportedly there were concerns with regards the qualitative evaluation of the cooperation. Trade unions expressed dissatisfaction that their participation was only on paper and that the program was dominated by the business-coalition in terms of providing expertise and assistance. To conclude, trade unions need to be part of the national response. The current crisis in the Global Fund means that there will be money only for highly structured priority interventions, and they will be identified according to the National AIDS Plans. These documents most often do not recognise workplace action as priority. There are opportunities though. Apart from advocacy targeting National AIDS Plans to include the workplace, trade unions should better mark their presence in the national AIDS response. In the face of shrinking resources, a strategic move of donors is to strengthen country action through support given to local indigenous organisations. This could be a change for trade unions. However, a criterion of “capacity to administer and manage funds” will continue to be used. Therefore, trade unions need to do the analysis of what capacity gaps they could have before developing a strategy to apply for funds.

Good Practice: GFATM Funding and Trade Unions in Africa – the Case of Zimbabwe

Ms Siwela Sithokozile, 1st Vice President, ZCTU Zimbabwe

Ms Sithokozile provided an overview of the Global Fund project trade unions are involved in in Zimbabwe. She observed that according to the country labour law, HIV-related discrimination is prohibited but the problem remains. The Zimbabwe project includes service delivery at the enterprise level – both access to antiretroviral treatment as well as prevention. It has been well evaluated in terms of outcomes. Ms Sithokozile, however, stressed that when it comes to the participation in the Country Coordinating Mechanism in Zimbabwe, it was difficult to arrange for the inclusion of trade unions. It has finally taken place, but it took a lot of effort to be included. Ms Sithokozile underlined that when it comes to the current funding crisis, it is obvious that the future of HIV interventions in Zimbabwe is in jeopardy. Zimbabwe might be one of the countries where HIV response will collapse, bringing unnecessary and avoidable deaths. She called on efforts to do everything to prevent it.



Plenary discussion, Ms. Mustapha Hauwa Umar, NLC Nigeria, Mr M'tumitu Isaiiah Kubai, COTU Kenya, Ms. Andrée Thomas, FO France

Opening Comment for the Discussion on How to Improve Funding for Workplace HIV/AIDS Interventions and Advocacy

Invited comment: Ms Nikki Soboil, COSATU/SACTWU South Africa, Executive Director of the SACTWU Workers Health Program



Plenary discussion

Ms Soboil provided an overview of the SACTWU Worker Health Program. She underlined that the membership of SACTWU is mostly female in a childbearing age, and as such forms part of the economically active population that is hardest hit by the HIV pandemic. The Program originated from initiatives started in 1998 and currently is providing the full continuum of care including prevention programs; HCT; HIV & TB treatment; support and more recently male medical circumcision. The program is highly esteemed in the country, and in the Western Cape province it has been the only NGO program outside the Department of Health authorised to provide TB treatment. Achievements in 2010 include the following: 35 322 workers and their dependents who received HCT; 558 members and dependants who were ever initiated into treatment; 6122 home-based care visits that were conducted; a 100% TB treatment success rate; and 131 673 workers who were reached through workplace education. The SACTWU program is funded through donor funding (PEPFAR grant) as well as financial participation of employers in nearly all sectors. According to the current arrangement, companies pay a levy towards an HIV/AIDS fund which was negotiated at the Bargaining Council level. The program employs experts as well as ex- SACTWU members unemployed due to an industry downturn. Ms Soboil under-

lined the importance of partnerships – with provincial & district departments of health, NGOs, Hospices, BC Clinics. She underlined that the model presented is scalable and replicable but the funding scarcity imposes new challenges: lengthy funding proposals, the need of a clear indication of trade union understanding of the epidemic and proposed interventions, validation of good governance with separate accountability and audit processes from the unions and strong monitoring and evaluation controls and processes.

Discussion: How to Improve Funding for Workplace HIV/AIDS Interventions and Advocacy

The participants underlined the need to talk about both the private and public sector when programming workplace interventions. There was a lot of concern regarding the funding crisis and cancellation of the Round 11 of the Global Fund. The participants also critically reviewed the amount of funding spent so far on HIV/AIDS response in comparison to results – such as missing the universal access commitments (achieving universal access by 2010, committed to in the 2006 UN Declaration of Commitment) and the inability to reach social determinants of the AIDS epidemic such as poverty and gender inequality. Also, participants voiced concerns that having in mind the lack of resources for new interventions and the lack of sufficient presence of trade unions on the CCMs, even if the presence improves, trade union proposals will not have a chance to get the funding. It was agreed that trade unions need to better document their work, especially if the work is done well. It was also underlined that the 2011 Political Declaration may be used to encourage governments to include the workplace in National AIDS Plans and that this process should be prioritised by trade unions. The participants agreed that resources are critically important and that trade unions cannot accept that donors say there is no more money. Stigma and discrimination are not going away, and there is the need for human rights-oriented, intensified action to tackle the epidemic by 2015. While commitment must not go away, there are many initiatives that can be cost effective while being independent and innovative.

16h00-16h00 Part 4: Summary of the Discussions

Summary of the Discussions

*Mr Yahya Msangi, OSH and HIV/AIDS Coordinator, ITUC Africa

*Ms. Zuzanna Muskat-Gorska, Global Trade Union HIV/AIDS Coordinator, ITUC

Mr Msangi and Ms Muskat-Gorska summarised the conclusions of the meeting. It has been decided that discussions undertaken during the meeting should have a reflection in the Congress outcome document and follow-up actions. The participants made the following recommendations:

1. The African trade union movement cannot lose the feeling of urgency with regards HIV/AIDS and its impact of the African societies, families, workplaces;
2. The African trade union movement is deeply concerned about the global crisis of financial commitment to HIV/AIDS response and cancelling of the Round 11 of the Global Fund. We urge donor governments to keep their promise and secure international funding for the AIDS response. We urge African governments to fulfill their commitment of the Abuja Declaration to secure 15% of the budget for health policy, strengthen their public health systems and secure effective implementation of universal access programs so that no lives are lost;
3. There is the need to commit to showing tangible results on trade union action on HIV/AIDS by the next ITUC Africa Congress. In the next four



Plenary discussion, Ms. Dativa Mukaruzima, CESTRAR Rwanda

years the ILO Recommendation should be fully implemented in the African countries;

4. The struggle should continue and the movement needs to show commitment, including the 2012 World AIDS Day (such as World AIDS Day Work Stoppage action);
5. In order to achieve this task, the trade union network on HIV/AIDS should be strengthened and assisted by ITUC Africa and the ITUC, according to the following:
 - i. ITUC Africa and the ITUC will increase its networks to involve more leaders in our policy;
 - ii. ITUC Africa and the ITUC will guarantee at the international level the coherence of HIV/AIDS advocacy, policy and action;
6. HIV/AIDS action should be more integrated with the following issues:
 - i. Employment policy (including promotion of youth employment)
 - ii. Social protection
 - iii. Informal economy
 - iv. Gender/equality
 - v. Migrants
 - vi. Public services (including health)
7. We count on the continued full commitment of all our trade union leaders. Trade union action on HIV/AIDS should continue to renew and strengthen African emancipation.

Closing

Mr Wellington Chibebe, Deputy General Secretary, ITUC

Mr Chibebe thanked all guests, participants and organisers and officially closed the session.



Plenary discussion

During the 2nd ITUC Africa Congress “Renewing the African trade union movement towards African emancipation” (25-27.11.2011, Johannesburg, South Africa), the Congress delegates recomitted to the ITUC 2nd Congress Resolution on Fighting HIV/AIDS (21-25.06.2010 Vancouver, Canada)

Attachment: ITUC 2nd Congress Resolution on Fighting HIV/AIDS (2010)



2nd WORLD CONGRESS

Vancouver, 21 - 25 June 2010

RESOLUTION

ON

FIGHTING HIV/AIDS

1. The HIV/AIDS pandemic is a global challenge to development and social progress. According to UNAIDS and the World Health Organisation an estimated 33.4 million people are living with HIV, with over 7,000 people infected with HIV each day and 2 million deaths in 2008 alone, 70% of these in Sub-Saharan Africa. Sub-Saharan Africa is home to 22.4 million people living with HIV or AIDS and is the most affected region in terms of numbers of infections and the scale of the pandemic's impact. The harsh reality is that the HIV/AIDS scourge continues to adversely affect women, who are more vulnerable to the pandemic. Most people infected with HIV are living under circumstances of economic and social disadvantage and the majority of new HIV infections occur in low-income countries.

2. Congress notes that the consequences of HIV/AIDS have profound implications for workers, their families and dependents and the exercise of human rights, and can cause or increase poverty, inequality and social injustice faced by workers and poor people around the world. It calls on others involved in this issue to recognise the crucial role of the workplace in prevention and treatment. Congress recognises the impact of the HIV/AIDS pandemic reflects and reinforces other sources of disadvantage and inequality in society, including that experienced by women and girls, youth, migrants, the unemployed, refugees and gays. The particular vulnerability of women and girls makes it essential to strengthen gender perspectives in the fight against HIV/AIDS.

3. Congress expresses its deep concern at the massive human suffering caused by the HIV/AIDS pandemic. It commits the ITUC to contribute effectively towards prevention, control and ultimately eradication of HIV and AIDS.

4. Congress reaffirms the importance of the role of the International Labour Organisation and its constituents in addressing workplace aspects of HIV/AIDS and welcomes the adoption of the new ILO Recommendation on "HIV and AIDS and the World of Work". In that regard, Congress emphasises:

- the absolute need to protect those infected with HIV/AIDS from all forms of discrimination at work and to extend to them the protections offered by ILO Convention 111 and other ILO Conventions;
- that privacy and confidentiality are essential for any successful workplace HIV/AIDS programme and that any workplace surveillance, including monitoring and managing of HIV/AIDS must take place without compromising workers' personal data privacy and confidentiality rights;

- the need for national and workplace HIV/AIDS programmes to be designed and implemented in consultation with the workers and their representatives;
- the need for workplace health programmes to be linked to public health services;
- the need for effective, tailor-made information and measures to reduce all high risk behaviour, including injecting drug use and high risk sexual behaviour.

5. Congress calls on Governments to work with their social partners in implementing the new ILO instrument, which underlines that all countries, whatever their infection rate, can benefit from a legal framework that brings HIV-related workplace challenges into the open, protects against discrimination, respects privacy and confidentiality rights, prevents risks of infection at the workplace and ensures the participation of all stakeholders from relevant institutions.

6. Congress expresses its deep concern about the impact of the global crisis on funding for HIV/AIDS initiatives and calls on all governments to keep their promises to deliver resources to meet the Millennium Development Goal on HIV/AIDS on achieving universal access to treatment by 2010, and to halt and begin to reverse the spread of the pandemic by 2015. The crisis has already put HIV prevention and treatment efforts in jeopardy. Congress notes the warnings already given by the World Bank and the Global Fund to Fight AIDS, Tuberculosis and Malaria in this regard and insists that the fight against HIV/AIDS must not become one more victim of the crisis.

7. Congress recognises that equitable and full access to health care, and in particular medicines for HIV, is a human right. Therefore the international community should promote effective actions and prioritise international development assistance policies and programmes. Congress insists on the need to build effective and universally accessible public systems of health care in all countries so that each state discharges its responsibility to realise the right to health of its citizens.

8. Congress supports education for HIV/AIDS prevention, through school, community-based and union-based programmes.

9. Congress fully supports the Global Unions HIV/AIDS Programme in promoting trade union action on HIV/AIDS in the workplace and undertaking a unified trade union advocacy campaign for a rights oriented approach to the HIV/AIDS pandemic.

ITUC Action Programme

10. Congress instructs the ITUC and regional organisations, working together with Global Unions partners and affiliates, to:

- (a) raise HIV/AIDS to greater prominence on the trade union agenda worldwide;
- (b) support affiliates' activities to educate, promote and develop understanding and commitment among workers by developing their capacity to adopt rights-based approaches to HIV/AIDS;
- (c) promote campaigns that ensure appropriate legislation on HIV/AIDS in line with the terms of this resolution and its implementation, providing speedy and effective remedies and access to treatment;
- (d) promote the fullest and most effective implementation of the new ILO instrument on HIV/AIDS and the world of work both at the national and international level;
- (e) engage employers' organisations in joint efforts to combat HIV/AIDS discrimination in the workplace and to participate in the financing of access to healthcare for those infected with HIV as well as the aid and protection measures needed, especially in the countries hardest hit by the epidemic;

- (f) carry out a campaign for combating the discrimination suffered by HIV-positive persons and for promoting measures facilitating the access, retention and return to employment of those persons;
- (g) strengthen partnerships with, among others, the ILO, UNAIDS, the World Health Organisation, the Global Fund to Fight AIDS, Tuberculosis and Malaria, and other concerned international organisations;
- (h) support trade union access to Global Fund financing;
- (i) address the challenges that make treatment inaccessible to workers in developing countries and other low and middle income countries, sometimes due to pharmaceutical patent protection implemented through the World Trade Organisation;
- (j) promote an effective global and regional trade union network to combat HIV/AIDS; and
- (k) integrate the gender dimension of HIV/AIDS in all activities.

June 2010

