



## **ILO member States take significant steps in the development of a new human rights instrument on HIV/AIDS**

Governments, workers and employers representing the ILO's 183 member States have begun a two-year process to agree a ground-breaking labour standard on HIV/AIDS in the world of work. Dr. Sophia Kisting, Director of the ILO Programme on HIV/AIDS and the World of Work, explains the significance of this development, and how a new labour standard would help address the challenge posed by the epidemic in Asia and worldwide.

### **ILO: What is the significance of the discussions around the development of a new international standard on HIV/AIDS and the world of work?**

**Sophia Kisting:** The ILO is in the process of formulating an international human rights instrument on HIV/AIDS and the world of work in the form of a Recommendation. To date, HIV/AIDS has been covered implicitly by international ILO labour standards, such as Convention No. 111 on Discrimination (Employment and Occupation). The UN Commission (now Council) on Human Rights has repeatedly argued that the term 'other status' in instruments such as the International Covenant on Civil and Political Rights should be interpreted to include HIV status. However, if adopted in 2010, this standard will be the first international standard to focus explicitly on HIV/AIDS, human rights and the workplace.

### **ILO: How would such a Recommendation impact on the world of work and rights issues in the workplace?**

**Sophia Kisting:** The instrument would give new impetus to anti-discrimination policies at national and workplace levels. Through its emphasis on rights, and specific guidance on the components of a workplace package on HIV/AIDS, it would strengthen the contribution of the world of work to achieving universal access to HIV prevention, treatment, care and support. It would also provide a framework for coordinating workplace responses at country level and promote information-gathering and reporting. This is not just for the ILO to use: it would be a tool for UNAIDS (the Joint UN Programme on HIV/AIDS) and our fellow co-sponsors in supporting the development of national AIDS plans that are multi-sectoral, inclusive and effective. It's very encouraging that many of our constituents believe in the usefulness of establishing an ILO standard in this area and are already looking ahead to its implementation.

### **ILO: Are issues related to labour migration taken into account by the proposed Recommendation?**

**Sophia Kisting:** According to UN estimates, 95-100 million out of the approximately 200 million people living outside their country of birth in 2005 (2.9 per cent of the world's population) were international labour migrants. Being a migrant worker is not a risk factor in itself. However, certain factors associated with being on the move can increase the HIV risks and vulnerabilities of migrant workers. These may include separation from

families and homes, language barriers, poor living and working conditions, discrimination, and less access to HIV information and services than other population groups. In the context of the current economic crisis we have reports of increased human rights violations, and pressure on migrant workers to move from formal to informal employment or to return to their countries of origin. These trends are likely to exacerbate vulnerability to HIV.

ILO action on HIV and labour migration focuses on laws, policies and action in labour sending and receiving countries – including regional harmonization of relevant provisions – and pre-migration training for internal and international migrants through government authorities and recruitment agencies. The ILO has developed a policy brief on the HIV-related needs and rights of international labour migrants in collaboration with UNAIDS and the IOM. Our policy and programme advice and activities – across the board, including for migrants – are consistently gender-specific and take account of the different status of, pressures on, and needs of men and of women.

A new labour standard on HIV/AIDS and the world of work would help strengthen countries' efforts to reach migrant workers with HIV prevention, treatment, care and support and contribute to reducing stigma and discrimination.

**ILO: How might the current economic crisis impact on the process of developing this new international labour standard and the HIV/AIDS response generally?**

**Sophia Kisting:** The global economic crisis may change financial arrangements for countries largely dependant on external support for HIV programmes. In this way, the crisis puts at risk all efforts invested in prevention, treatment and care over recent years. Increased precariousness and loss of livelihoods may lead to increased risk of exposure to HIV infection as well as interrupted treatment, with possibly fatal consequences. A recent survey by the World Bank shows that treatment for up to 1.7 million people in Africa, Eastern Europe, the Caribbean and Asia may be interrupted or ended due to the global financial downturn. In the circumstances, a stronger international policy framework will ensure that human rights are safeguarded and will encourage the development of innovative strategies to ensure the sustainability of HIV/AIDS services. These would mainstream HIV/AIDS in existing world of work structures such as labour inspection, vocational training, health and safety committees, and the social protection systems which are so vital to combating poverty and extending access to health.

**ILO: What role does employment play in relation to HIV/AIDS and what should be done to reinforce it?**

**Sophia Kisting:** Poverty and income inequality exacerbate the impact of HIV in many countries, so support for job creation and skills development helps mitigate these drivers of the epidemic, especially where the particular needs of women are factored in. At the same time, high levels of youth unemployment and poverty can contribute to HIV vulnerability for young people. The fact that about 45% of all new HIV infections are among youth has serious implications for productivity today and the workforce of tomorrow. It is imperative that youth employment be fully supported and positioned as a key strategy in the prevention of HIV – this has been recognized in the new priority outcome areas established by UNAIDS and the draft Recommendation includes a section on youth. At the same time, with increased access to ARV treatment, more and more people living with HIV are fit to continue working indefinitely. Maintaining their jobs and their livelihoods is crucial to enable them to remain productive rather than being recipients of welfare. It is this employment perspective, underpinned by social protection, its rights-based approach and practical HIV services at the workplace that the ILO brings to the UNAIDS partnership and national AIDS programmes.

**ILO: How would the new labour standard on HIV/AIDS be implemented in Asia and the Pacific?**

In June 2010 the International Labour Conference will finalize the provisions of the Recommendation and address its adoption. ILO offices in all regions will be ready to receive an increased number of demands for information and technical support by the ILO's constituents.

Once a Recommendation is adopted, Governments have 12 months to submit the new instrument to their "competent national authorities", which are usually Parliaments. Governments give effect to the new instrument by adopting or modifying legislation and policy, as necessary. The International Labour Conference may also decide to establish a follow-up mechanism. Governments might be asked to report on the law and practice in their States and explain how effect has been given to the Recommendation.

**For further information please contact:**

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