



International  
Labour  
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# VCT@WORK

5 million women and men workers reached with Voluntary  
and confidential HIV Counselling and Testing by 2015

*Together, making it happen!*

**“ Zero new infections,  
zero discrimination  
and zero AIDS-  
related deaths start  
at work. ”**



**Sharan Burrow**

General Secretary, International Trade Union  
Confederation (ITUC)



Zero new HIV infections. Zero discrimination. Zero AIDS-related deaths.  
Implement the ILO Recommendation on HIV and AIDS (No. 200)



Nearly 10 million people living with HIV are accessing antiretroviral treatment in low- and middle-income countries, enabling them to live longer, healthier and more productive lives.

However, as per the 2013 WHO guidelines, this represents only 34% of the total 28.3 million people who are eligible for treatment. UNAIDS estimates that around half of all people living with HIV globally, do not know their status, thus preventing them from accessing treatment.

**VCT@WORK** aims to reach 5 million women and men workers with Voluntary and Confidential HIV Counselling and Testing by 2015.

The initiative is led by the ILO with support of UNAIDS.

*“To reach this goal we need to work together to ensure that all workplaces are free from stigma and discrimination.”*

**Guy Ryder, ILO Director-General**



*“If workplaces embrace this new initiative it could signify one of the most important advances we’ve seen in expanding access to HIV testing within a healthy, enabling environment and linking to on-going support including treatment.”*

**Michel Sidibé, UNAIDS Executive Director**



The **VCT@WORK** initiative is part of the ILO's efforts to enable workers to know their HIV status and seek treatment if necessary. This will contribute to the achievement of the global target of providing antiretroviral treatment to 15 million people living with HIV by 2015, as set out in the 2011 United Nations General Assembly Political Declaration on HIV/AIDS.

- The **VCT@WORK** initiative is based on the guidelines and principles of the **ILO's Recommendation on HIV and AIDS and the World of Work (No. 200)**.
- It is a **partnership** involving ILO's tripartite constituents (governments, employers and workers) and other relevant partners to create an enabling environment for voluntary testing and counselling and ensuring access to testing, counselling and treatment for workers, their families and communities.
- It builds on the ILO's “**Getting to Zero at Work**” campaign and the work on development and implementation of workplace policies. It aims to protect the labour rights of people living with or affected by HIV, and to ensure that all workers are treated equally, regardless of their HIV status.

*“Women with a thousand arms who go to bed last and wake up first, women without whom our children’s education would be hopeless: let’s mobilize ourselves to fight against all forms of discrimination. Let’s make sure **all women**, especially those working in the **rural areas and in the informal economy**, have access to the **information they need** to achieve zero new HIV infections.”*

**Rabiatou Sérah Diallo, Honorary President,  
National Confederation of Workers of Guinea**



- Each minute, one young woman is infected by HIV.
- With HIV rates twice as high as in young men, young women (15-24 years) are more vulnerable to HIV globally.
- 22% of all new HIV infections are in young women.
- Nearly two of every three pregnant women in low- and middle-income countries do not know their HIV status.

*Source: UNAIDS (2012) Women out Loud*

## **TARGET POPULATIONS**

- Women and men workers, both in the formal and informal economy.
- Special focus on workers in sectors highly affected by the HIV epidemic due to their working and related living conditions. This could include mobile/transport workers, migrant workers, workers in the mining, health, tourism, agriculture sectors, young workers, uniformed services and others as identified under the National AIDS strategies/plans.

Globally, women comprise 52% of all people living with HIV in low and middle-income countries. Approximately 57% of all HIV-positive women live in sub-Saharan Africa.

HIV prevalence among young women remains more than twice as high as among their male peers in this region.

HIV continues to be driven by gender inequalities and harmful gender norms that promote unsafe sex and reduce access to HIV and sexual and reproductive health services for men, women and transgender persons.

Gender-based violence increases the risk of HIV infection. Two recent studies of women in Uganda and South Africa concluded that women who had experienced intimate partner violence were 50% more likely to have acquired HIV than women who had not experienced violence.

It is known that concerns regarding the possibility of stigma and discrimination, abuse and violence can deter women from seeking HIV testing or other essential health services.

Source: UNAIDS (2013) Global Report 2013

## **KEY PRINCIPLES**

Countries are encouraged to implement the **VCT@WORK** initiative based on the following principles:

- Consent
- Confidentiality
- Counselling
- Connection to treatment
- Addressing the issues of equity and gender
- Meaningful engagement of people living with HIV

*"Women continue to be more vulnerable to HIV infection, due to insistent patterns of social, economic and cultural inequality. **The first step in getting to zero infections is to improve women's access to socioeconomic opportunities and more secure employment.**"*

**Martle Keyter, Vice-President: Gender,  
Federation of Unions of South Africa (FEDUSA)**



HIV testing should be conducted in accordance with the provisions of ILO's HIV and AIDS Recommendation, 2010 (No. 200) which includes the following:

- Testing must be genuinely voluntary and free of any coercion and testing programmes must respect international guidelines on confidentiality, counselling and consent.
- HIV testing or other forms of screening for HIV should not be required of workers, including migrant workers, jobseekers and job applicants.
- The results of HIV testing should be confidential and not endanger access to jobs, tenure, job security or opportunities for advancement.
- Real or perceived HIV status should not be a grounds of discrimination , preventing the recruitment or continued employment, or the pursuit of equal opportunities.
- Real or perceived HIV status should not be a cause for termination of employment.
- Persons with HIV-related illness should not be denied the possibility of continuing to carry out their work, with reasonable accommodation if necessary, for as long as they are medically fit to do so.
- There should be no discrimination against workers or their dependants based on real or perceived HIV status in access to social security systems and occupational insurance schemes, or in relation to benefits under such schemes, including for health care and disability, and death and survivors' benefits.

*"HIV has not changed my determination or ability to work. I am still the same person. Like all young people I need a secure job, free from discrimination. **Young women like I need to feel safe at work.** Getting to Zero at Work is so critical for the youth."*

**Helena Nangombe, Member of the International Community of Women Living with HIV/AIDS (ICW) and the Advisory Group of the Global Coalition on Women and AIDS (GCWA)**



## **FUNDAMENTAL PILLARS**

The VCT@WORK initiative builds on four fundamental pillars:

- **Multi-disease testing:** To de-stigmatize HIV testing and facilitate increased uptake of VCT services, HIV testing will be promoted through integrated and multi-disease initiatives.
- **Strategic partnerships:** Country partnerships will be forged with Ministries of Health, National AIDS Councils, private sector, VCT Providers, ART Centres, Networks of People Living with HIV, Civil Society Organizations and others.
- **Social mobilization:** National world of work actors such as Ministries of Labour, employers' organizations, workers organizations', business coalitions and enterprises will be mobilized to promote VCT in or through workplace structures.
- **Monitoring and evaluation:** Country monitoring and evaluation systems will be adapted to track progress. A number of complementary monitoring approaches will be used to track progress. Good practices will be documented and disseminated.

**"HIV/AIDS is a union issue:** we say no to stigma and discrimination in the workplace."

**Sar Mora, President of the Cambodian Food and Service Workers' Federation (CFSWF)**



## **THE ROLE OF TRADE UNIONS**

Trade unions play an important role in national and international efforts to respond to HIV and AIDS. Their contribution towards implementing the VCT@WORK initiative is taking place at different levels:

- At the **national level, sectoral and enterprise level**, unions advocate for strengthened policy responses and appropriate legal frameworks to address discrimination, thus creating a conducive environment for VCT;
- At the **workplace**, unions are instrumental to secure non-discriminatory work environments for people living with or perceived to be living with HIV. Unions advocate for the development and implementation of HIV and AIDS workplace policy to ensure that mechanisms are in place to protect workers' rights and confidentiality;
- Unions integrate VCT messages in their events, meetings and programmes; and mobilize unions' leadership.
- Unions mobilize workers, their families and communities to access VCT and help in organization of VCT services in partnership with relevant actors; and
- Union members promote the benefits of VCT and of early treatment to their friends and family members and provide information on HIV prevention.

## **THE NEED FOR GENDER-TRANSFORMATIVE HIV RESPONSES**

- Addressing gender inequalities is a critical component of an effective HIV response. One hundred of the 109 countries reporting in 2013 indicated that elimination of gender inequalities is a national priority. However, only 52% of countries reported in 2013 that they were on track to eliminate gender inequalities. While commitments by national governments are encouraging, there is an urgent need to see them more consistently translated into robust actions. (UNAIDS Report 2013)
- Promoting women's economic empowerment can make a positive impact on the response to HIV. In some regions, obstacles posed by unequal access to decent jobs, credit and market information drive women into the informal economy with little access to social protection. This situation in turn increases the vulnerability of these women to HIV.
- Taking action through the workplace to promote gender equality and women's economic empowerment increases the bargaining power of women to negotiate safer sex, and help women afford and have access to HIV testing, counselling and treatment.
- Women's inclusion, especially at decision-making levels, in work-related groups and organizations such as trade unions allows them to better access their rights and lower their vulnerability to HIV.

***“Women’s empowerment is one of the only HIV vaccines available today. Women are lagging far behind men in access to land, credit and decent jobs. We must abolish the multiple barriers preventing them from seizing economic opportunities and empower them to reduce their vulnerability to HIV. Gender equality is key to getting to zero.”***

**Michelle Bachelet (Chile), Former Executive Director,  
United Nations Entity for Gender Equality and the  
Empowerment of Women (UN WOMEN)**



The **ILO Recommendation No. 200** calls for gender-responsive measures to be taken in and through the workplace to mitigate the impact of HIV:

- ensure respect for human rights including gender equality and fundamental freedoms;
- ensure gender equality and the empowerment of women;
- ensure actions to prevent and prohibit violence and harassment in the workplace;
- promote the protection of women and men's sexual and reproductive health and sexual and reproductive rights.



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For more information, please visit:  
[www.ilo.org/zero](http://www.ilo.org/zero) &  
[www.ituc-csi.org/hiv-aids](http://www.ituc-csi.org/hiv-aids)

