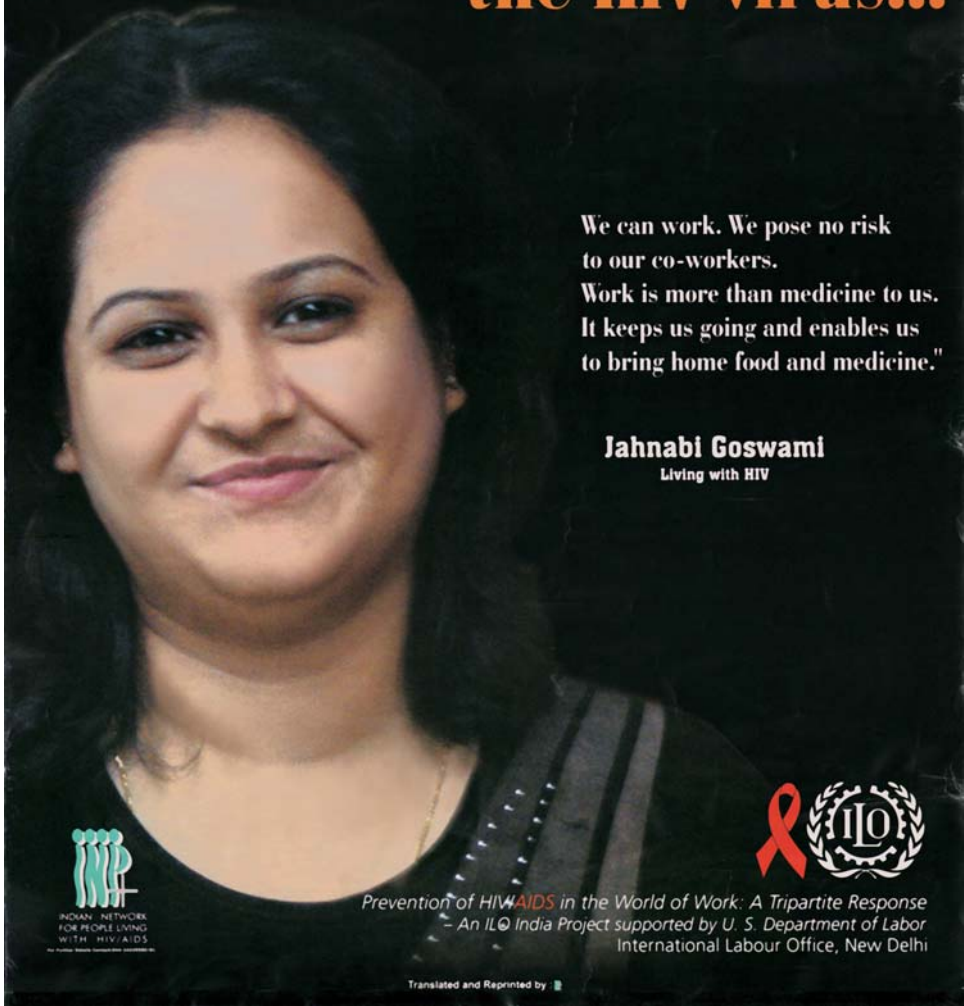




**HIV/AIDS
MEDIA MANUAL
India 2007**



**"If you take away our jobs,
you will kill us faster than
the HIV virus..."**



We can work. We pose no risk
to our co-workers.
Work is more than medicine to us.
It keeps us going and enables us
to bring home food and medicine."

Jahnabi Goswami
Living with HIV



Prevention of HIV/AIDS in the World of Work: A Tripartite Response
— An ILO India Project supported by U. S. Department of Labor
International Labour Office, New Delhi

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IMPACT and GOVERNANCE



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Vakandan

THE HIV/AIDS epidemic has the ability to affect adversely the future of societies and economies on a large scale. The *2005 Human Development Report* produced by UNDP says HIV/AIDS has inflicted the single greatest developmental reversal in human history. Between 1990 and 2003, many of the countries most severely affected by HIV/AIDS dropped sharply in the global ranking of countries on the Human Development Index. South Africa fell by 35 places, Zimbabwe by 23, Botswana by 21, Swaziland by 20, Kenya by 18, Zambia by 16 and Lesotho by 15.

HIV/AIDS can reverse progress in many areas. These range from life expectancy to industrial production. The impact of the epidemic is what makes it important to contain.

■ Population structures

The steady progress towards improved life expectancy, which was being achieved until the advent of the epidemic, has been reversed in the more

severely affected countries. Botswana is a country where the productive generation is being decimated. Adults aged 20-49 years have seen a huge rise in mortality rates and the earlier distribution of deaths according to age has been reversed. Whereas this age group had accounted for only 20% of all deaths between 1985 and 1990, today they account for almost 60%.

■ Poverty and inequality

HIV/AIDS tends to affect the poor more heavily than other population groups. In Botswana, it is estimated that, on average, every income earner is likely to acquire one additional dependent over the next 10 years due to the epidemic. But families in the poorest quar-

AIDS is no longer a death sentence for those who can get the medicines. Now it's up to the politicians to create the 'comprehensive strategies' to better treat the disease.

— BILL CLINTON
Former US president





HIV/AIDS
MEDIA MANUAL
India 2007



26

Taking action in the workplace

Singareni Collieries is a major employer in Andhra Pradesh, one of India's states with the highest HIV prevalence. The colliery, which supplies about 10% of the country's coal and employs over 93,000 people, sought to understand the current and potential impact of the epidemic on its staff and operations. Having estimated that approximately 2% of the workforce was currently HIV+ (slightly higher than in the local population as a whole), the study calculated a variety of costs that will accrue over the years, including loss of production, medical expenses, insurance costs and expenditure on employee replacement in cases of illness or death. Among other findings, the study found that if workers were untreated, the cost of compensating them as their illnesses progressed over 10 years would reach US\$ 21 million. In contrast, provision of antiretroviral therapy over the same period — thereby prolonging the working life of the employees and permitting them to sustain their families — would amount to only US\$ 1.24 million. In response to these and other findings, the company has implemented a variety of HIV prevention measures, and it is currently exploring with the government, unions and local nongovernmental organizations a variety of options for providing care and treatment to HIV+ workers.

— ILO, 2005

tile will acquire an additional eight people who will become dependent on their income as a result of HIV/AIDS, says UNAIDS' *2006 Report on the Global AIDS Epidemic*. Studies conducted in India have shown that households belonging to the poor and less educated or unskilled groups, as well as female members of households, face a proportionately greater economic burden due to HIV/AIDS.

■ Stigma and discrimination

Stigma and discrimination are among the worst consequences of the epidemic. They are also obstacles to HIV prevention and care and treatment for people living with HIV/AIDS (PLHA). HIV-related stigma consists of negative attitudes towards those infected or suspected of being infected with HIV. This could include those affected by HIV/AIDS by association, such as orphans or the children and families of PLHA. Discrimination, as defined by the UNAIDS Protocol for Identification of Discrimination against People Living with HIV, refers to any form of arbitrary distinction, exclusion or restriction affecting people because of their confirmed or suspected HIV+ status. HIV-related stigma and discrimination are found in all parts of the world, but their manifestation varies from place to place.

■ Healthcare

HIV is an expensive virus. In countries with high levels of HIV prevalence, the epidemic is having a serious impact on healthcare facilities. This happens at many levels. At a basic level, available resources begin to decrease and the tax base contracts as the most productive sections of society are affected. Of course, the epidemic places great demands on the existing healthcare infrastructure. In sub-Saharan Africa, people with HIV-related diseases occupy more than half of all hospital beds.

The Governance Factor

■ Why governance

Does governance — good or bad — have anything to do with the HIV/AIDS epidemic?

At first, it may seem far-fetched to imply a relationship between the two. But experts and political scientists say the



**HIV/AIDS
MEDIA MANUAL
India 2007**

two are intricately related. Simply put, they say that good governance is invaluable in controlling the spread of HIV/AIDS; conversely, bad governance allows infection and death rates to spiral out of control.

Donor nations and organizations are increasingly linking good governance to the release of funds for combating HIV/AIDS. Partly, this can be viewed as an effort to ensure proper utilization

because of the widespread devastation that HIV/AIDS is capable of causing. A badly managed epidemic can devastate societies, depress growth and dramatically lower life expectancy. Many African countries have been pinpointed as examples of bad governance. The other side of the coin is that countries such as Uganda and Thailand have demonstrated that the tide can be stemmed or turned with strategic vision and purposeful action.



27

of funds and to have them benefit the cause and persons for which they are intended. But beyond that, the principles of good governance are an important tool with which to analyse political and social processes.

■ The link between governance and HIV/AIDS

The Commission on Global Governance (1995) described governance as '...the sum of the many ways individuals and institutions, public or private, manage their common affairs'. Good governance is then synonymous with good management of common affairs.

Good governance is important

A UNDP official, Lee-Nah Hsu, proposed the following 'winning formula':

Development + Good Governance System = Low and Stable HIV Prevalence

It's not difficult to find examples to validate this hypothesis, even though it doesn't take into account social and cultural differences.

A government, by addressing the income and economic development aspects of its citizens' lives, is dealing with background HIV vulnerabilities that push the citizens to take risks that they would not have taken if the environment had been more propitious for their livelihood.



**HIV/AIDS
MEDIA MANUAL
India 2007**

For instance, rural migrant workers, whose skills are farm based, may have little choice but to take up sex work after they arrive in a city. If alternative employment or skills training is provided to them, they need not come to the city at all. Providing this employment or training would reduce the workers' vulnerability to HIV/AIDS and would constitute good governance.

■ **What is good governance?**

The UNDP says good governance is "...participatory, transparent and accountable. It is also effective and equitable. And

all the functions of the government and their involvement in the management of its institutions in ways that are clear, fair and consistent, and promote human rights and well-being. Good governance applies at all levels of society.

On the other hand, weak governance almost always projects the image of corruption. Corruption thrives on the absence of transparency and accountability. In turn, it hampers the other elements of good governance — rule of law, equity, responsiveness, effectiveness and vision.

■ **The elements of good governance**

Participation: All men and women should have a voice in decision-making, either directly or through legitimate intermediate institutions that represent their interests. Such participation is built on freedom of association and speech as well as the capacities to participate constructively.

Rule of law: Legal frameworks should be fair and enforced impartially, particularly the laws on human rights.

Transparency: Transparency is built on the free flow of information. Processes and institutions are directly accessible to those concerned with them and enough information is provided to understand and monitor them.

Responsiveness: Institutions and processes try to serve all stakeholders.

Consensus orientation: Good governance mediates differing interests to reach a broad consensus on what is in the best interest of the group and, where possible, on policies and procedures.

Equity: All men and women have opportunities to improve or maintain their well-being.

Effectiveness and efficiency: Processes



it promotes the rule of law. Good governance ensures that political, social and economic priorities are based on broad consensus in society and that the voices of the poorest and the most vulnerable are heard in decision-making over the allocation of development resources."

Good governance goes beyond just good government, for it connotes a good understanding by the citizens of

IN India, we still have an opportunity to prevent the AIDS epidemic from becoming as widespread and devastating as we see in Africa today.

— ATAL BIHARI VAJPAYEE
Former Indian prime minister



and institutions produce results that meet needs, while making the best use of resources.

Accountability: Decision makers in government, the private sector and civil society organizations are accountable to the public and institutional stakeholders. This accountability differs, depending on the organization and whether the decision is internal or external to it.

share a package of common features that are universally regarded as best practices:

- Strong political commitment at the highest level to dealing with the epidemic (this ensures policies and funding to address the epidemic)
- Multisector approaches to prevention and care and, at the gov-



Strategic vision: Leaders and the public have a broad and long-term perspective on good governance and human development, along with a sense of what is needed for such development. There is also an understanding of the historical, cultural and social complexities in which that perspective is grounded.

■ Good governance in action

Some countries have incorporated good governance measures to create effective programmes that have been successful in stemming the spread of HIV/AIDS. In each of these countries, national AIDS programmes

government level, involvement by multiple ministries

- Multilevel responses (at the national, provincial, district and community levels)
- Effective monitoring of the epidemic and risk behaviours, and dissemination of the findings both to improve policies and programmes and to sustain awareness
- A combination of efforts aimed at the general population and focused on groups at high risk, at the same time
- Implementation on a large scale
- Integrated prevention and care. ●

