



Republic of Malawi

NATIONAL HIV AND AIDS WORKPLACE POLICY

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FOREWORD

This policy aims at guiding and promoting sustainable workplace interventions by the Government, workers' and employers' organizations, and other stakeholders in their efforts to combat all forms of stigma and discrimination in the workplace. The policy will be instrumental in helping to prevent the spread of the HIV and AIDS epidemic, mitigate its impact on workers and their families and provide social protection to help cope with the disease. It covers key principles such as the recognition of HIV and AIDS as a workplace issue, non-discrimination in employment, gender equality, screening and confidentiality, social dialogue, prevention, care and support as a basis for addressing the epidemic at the workplace.

In particular, the policy will effectively contribute to the objectives of the national development vision outlined in the Malawi Vision 2063, the Malawi National Strategic Plan for HIV and AIDS 2020-2025, and the Malawi Decent Work Country Programme (DWCP) II in cognizant that HIV and AIDS epidemic constitutes a serious public health problem which has far reaching consequences on socio-economic development and enjoyment of, employment and human rights.

Beyond the suffering it imposes on individuals and their families, the epidemic profoundly affects the social fabric of communities in society.

HIV and AIDS is a major threat to the world of work. It affects the most productive segment of the labour force and imposes huge costs on enterprises through declining productivity, increasing labour costs and loss of skills, experience, employee benefits, occupational safety and health and workplace morale. The epidemic and its impact strike hardest at vulnerable groups particularly women and children. The workplace and workplace interventions against the epidemic are therefore well positioned to contribute to the response as it offers an entry point to reach young and adult populations.

The effective implementation of the policy will demand a multi-sectoral approach involving various stakeholders. Government, through my Ministry as a policy holder, will continue providing overall guidance and direction in the implementation process of the policy. Further, Government will continue supporting the fight against HIV and AIDS in the workplace through various interventions and national budget allocation. I, therefore, call upon all social partners, Government Ministries, Departments and Agencies (MDAs), Civil Society Organizations (CSOs) and Development Partners to effectively collaborate and coordinate in eliminating any sort of discrimination due to HIV and AIDS in the world of work.

Honourable Vera Kamtukule

Deputy Minister of Labour

PREFACE

The HIV and AIDS pandemic has serious socio-economic impact in the world of work in both the formal and informal economies. It undermines the attainment of decent work and sustainable development. Workers have the right to work in an environment that protects them from stigma, discrimination, unwarranted dismissals and other workplace related abuses as stipulated in the Constitution of the Republic of Malawi.

The implementation of this policy will provide a number of opportunities by enabling employers, employees, workers' and employers' organizations, and Government to actively contribute towards national efforts to prevent and manage the HIV epidemic. In addition, the policy will ensure that there is consistency in the application and enforcement of legislation, regulations and practices with regard to HIV and AIDS at the workplace.

Adequate financing of HIV and AIDS workplace interventions and effective implementation of these interventions will contribute significantly towards the achievement of the aspirations of the Malawi National Strategic Plan for HIV and AIDS 2020–2025 and the Malawi Decent Work Country Programme II.

This policy is aligned to international commitments such as: ILO Conventions 155,184 and 190; ILO Code of Practice on HIV and AIDS and the World of Work of 2001; the ILO Recommendation concerning HIV and AIDS and the World of Work (No.200) of 2010; and Sustainable Development Goals (SDGs). These instruments call for protection of workers and aim to achieve social justice and decent work for all.

The development process of the policy involved a cross section of key stakeholders that included Development Partners, Government MDAs, Workers', and employers' organizations. Government is therefore grateful to all stakeholders for their unwavering technical and financial support during the development process of the Policy.

Dickson E. Chunga
Principal Secretary for Labour

ABBREVIATIONS AND ACRONYMS

AIDS	Acquired Immuno Deficiency Syndrome
ART	Anti-Retroviral Therapy
AU	African Union
CSO	Civil Society Organization
DHRMD	Department of Human Resources Management and Development
ECAM	Employers' Consultative Association of Malawi
FBO	Faith based Organization
GDP	Gross Domestic Product
HIV	Human Immuno Deficiency Virus
HTS	HIV Testing Services
ILO	International Labour Organization
MANASO	Malawi Network of AIDS Service Organizations
MANET+	Malawi Network of People Living with HIV/AIDS
MBBSS	Malawi Biological and Behavioural Surveillance Survey
MBC Health	Malawi Business Coalition for Health
MCTU	Malawi Congress of Trade Unions
MDAs	Ministries, Departments and Agencies
MDHS	Malawi Demographic and Health Survey
MIAA	Malawi Interfaith AIDS Association of Malawi
MGDS	Malawi Growth and Development Strategy
MoGCDSW	Ministry of Gender Community Development and Social Welfare
MoH	Ministry of Health
MoI	Ministry of Information
MoL	Ministry of Labour
NAC	National AIDS Commission
NAF	National Action Framework
NGO	Non-Governmental Organization
NSO	National Statistics Office
MNSP	Malawi National Strategic Plan

OPC	Office of the President and Cabinet
PEP	Post Exposure Prophylaxis
PLWHIV	People Living with HIV
SADC	Southern Africa Development Community
SDGs	Sustainable Development Goals
STI	Sexually Transmitted Infection
UNAIDS	United Nations Programme on HIV and AIDS
WHO	World Health Organization

GLOSSARY

Affected Employee	An employee whose life is changed by HIV or AIDS owing to the broader impact of the epidemic.
AIDS	Acquired Immune Deficiency Syndrome, a state of immune system depletion of the defence of the body from a cluster of medical conditions.
Attrition	The departure of employees from an organization for any reason (voluntary or involuntary), including resignation, termination, death, or retirement

Employee	<p>(a) A person who offers his services under an oral or written contract of employment, whether express or implied</p> <p>(b) Any person who performs work or services for another person for remuneration or reward on such terms and conditions that he is in relation to that person in a position of economic dependence on, and under an obligation to perform duties for, that person more closely resembling the relationship of employee than that of an independent contractor</p>
Employer	Any person, body corporate, undertaking, public authority or body of persons who or which employs an employee and includes heirs, successors and assigns of an employer.
Employees' Organization	Any combination of persons, the principal purposes of which are the representation and promotion of employees' interests and the regulation of relations between employees and employers and includes federation of trade unions but not an organization or association that is dominated by an employer or employers' organization.
Employers' Organization	Any combination established by employers, the principal purposes of which are the representation and promotion of employers' interests and the regulation of relations between employers and employees
Epidemiological	Related to disease patterns, causes, spread and mechanisms of control in society
Formal economy	The portion of the country's economy that is registered and regulated by the state, whose activities are reflected in official statistics on economic activity
Discrimination	Any distinction, exclusion or preference which has the effect of nullifying or impairing equality of opportunity or treatment in employment or occupation.
Informed Consent	A process of obtaining consent from a patient that ensures that every person fully understands the nature and implications of the test before giving his or her agreement to it.
HIV	Human Immuno-Deficiency Virus, a virus that weakens the body's immune system thereby causing AIDS
HIV Positive	Having tested positive for HIV infection.
HIV Testing	Taking a medical test to determine a person's HIV status.
Informal economy	The part of an economy that is not taxed or monitored by any form of Government or included in any gross national product (GNP).
Post Exposure Prophylaxis	Taking certain steps providing antiretroviral medication, as soon as possible after exposure to HIV to prevent infection.
Pre- and Post-Test Counselling	A process of counselling which facilitates an understanding of the nature and purpose of the HIV test. It examines what advantages and disadvantages the test holds for the person and

influence of the result, positive or negative. It implies that the individual understands what the test is, why it is necessary, the benefits, risks, alternatives, and any possible social implications of the outcome.

Prophylaxis	Any medical or public health procedure whose purpose is to prevent rather than treat or cure.
Reasonable Accommodation	Any modification or adjustment to a job or to the workplace that is reasonably practicable and will enable a person living with HIV or AIDS to have access to or participate or advance in employment.
Screening	Measures whether direct (HIV testing), indirect (assessment of risk-taking behaviour), or asking questions about tests already taken or about medication.
Stigma	The social mark that, when associated with a person, usually causes marginalization, or presents an obstacle to the full enjoyment of social life by the person infected or affected by HIV.
Social Partners	The Government, employers and their organizations and employees and their organizations.
Surveillance Testing	Anonymous and unlinked testing which is done in order to determine the incidence and prevalence of disease within a particular community or group to provide information to control prevent and manage the disease.
Universal precautions	Minimum standards of infection control used in the handling blood and other bodily fluids to reduce the risk of transmission of blood borne infections.
Vulnerability	The unequal opportunities, social exclusion, unemployment, or precarious employment, resulting from the social, cultural, political, and economic factors that make a person more susceptible to HIV infection and to developing AIDS.
Workplace	Any place or premises in which one or more persons are employed and includes apprentices, casual, part and full time employment and all types of employment contract. It applies to the workplace in the broad sense of the term.

CHAPTER 1

1.0 INTRODUCTION

HIV and AIDS is a huge burden to most countries in the world and Malawi is no exception. The disease burden related to HIV and AIDS remains high and adversely affects all the sectors of the economy and the general population. According to the Malawi National Strategic Plan on HIV and AIDS 2020-2025(MNSP), there are over 1 million people living with HIV in Malawi. The prevalence rate among the youth 15 years and above is over 9%. Though Malawi has made great progress to control the epidemic, there is still a long way to go in order to control new infections and upholds Government's commitment towards ending AIDS as a public threat by 2030.

The National HIV and AIDS Workplace Policy has been developed to provide guidance on implementation of HIV and AIDS interventions at the workplace. The Policy will guide institutions in the development of their own subset policies and guidelines on combating HIV and AIDS as well as any kind of stigma and discrimination due to the epidemic in the workplace. The Policy will be fundamental in reducing new HIV infections, mitigate the impact of the epidemic on workers and address the issues of stigma and discrimination in the workplace and scale up treatment, care and support for HIV infected employees.

The Policy applies to formal and informal economies, public and private entities. It will promote sustainable HIV interventions by the Government, workers' organizations and employer's organizations, and Civil Society Organizations(CSOs). In order to achieve its goal and objectives, six priority areas have been identified namely: HIV Testing Services; Prevention; Treatment Care and Support; Stigma and Discrimination; Coordination and Collaboration; and Information Management System.

1.1 Historical Background

Since the discovery of the first HIV case in Malawi in 1985, HIV and AIDS has had a profound and negative impact on the national development agenda including delivery of services by the workforce. Rising costs for the management of HIV and AIDS, attrition resulting to loss of skills and experience, productivity loss due to absenteeism as well as discrimination and stigmatisation; and loss of livelihoods are some of the factors attributed to the negative impact the Malawi economy has experienced from the HIV and AIDS pandemic. This is supported by the 2015 UNDP Development report which noted HIV and AIDS, poverty as well as governance as the major challenges Malawi faces in its development agenda.

Management of HIV and AIDS costs the nation US\$145.5 million per annum, which is equivalent to 10.2% of the GDP and of this, 32% is spent on treatment. According to the 2002 report on the impact of HIV and AIDS on Human Resources in the Malawi Public Sector by the UNDP, an increasing attrition trend was recorded in selected MDAs from 347 cases in 1990 to 2006 cases in the year 2000. High death rate, dismissal, redundancy and retirement were highlighted as some of the reasons to this high attrition rate and HIV and AIDS pandemic remained the highest contributing factor. While an average Malawian is expected to work for 25 years, it is assumed that an HIV adult infected Malawian between the ages of 15 and 65 will only work for 10 years representing 15 years of productive loss and thus reducing the efficiency age. Additionally, absenteeism due to prolonged illnesses results in huge costs on enterprises through low productivity and increased labour costs.

1.2 Current Status of HIV and AIDS in Workplace

More than 90% of HIV infections in Africa have been reported in the most productive age group of 15 to 49 according to PAN African Employers' Confederation 2009. In Malawi, the HIV prevalence amongst people aged 15 to 49 stands at 8.8% as per the NSO MDHS 2015-2016 estimate. In addition, HIV prevalence is higher among working women (11.2%) and men (7.1%) than among the none working counterparts (9.9% for women and 2.6% for men).

Employees in Malawi are a critical part of the social and economic engine of the society just like in all the sub-Saharan countries. They play a central role in governance and facilitating economic and social development. The efficiency and effectiveness of both the public and private sectors in providing necessary infrastructure and services is critical for economic growth and productivity of the country. HIV and AIDS undermines services delivery that facilitates social and economic development, provide good governance, and create an enabling environment for all in the development process.

1.3 Problem Statement

The first challenge that the HIV and AIDS epidemic has brought in the world of work is violation of fundamental rights at work based on real or perceived HIV status through discrimination and stigmatisation which results in low productivity. The 2016 Malawi Stigma Index Study included employers, fellow employees, health workers, school teachers and church leaders as some of the quota's instigating stigma and discrimination towards people living with HIV (PLWHIV) at the workplace. Discrimination at the work place was found to be prevalent where 11% of the respondents reported losing their job as a source of income while 5.6% reported a change in their job description or nature of their work due to HIV and AIDS a development that reduces staff morale. Refusal of

employment by employers to PLWHIV was also reported by 18% of the respondents in the Stigma Study Report with some employees being declared redundant after disclosing their sero-status to their employers. This denies opportunities to the skilled and experienced personnel who are pertinent for high productivity.

Stigma and discrimination on the basis of one's HIV status does not only affect employees' productivity through denial of employment and employment benefits but also defeats the efforts in increasing access to treatment care and support which are dependent on openness, trust and respect for basic human rights. This in turn affects the employees' productivity as their health is compromised by the HIV epidemic.

In addition to being discriminated against at the workplace on the basis of real or perceived HIV status, other employees are not compensated when they acquire HIV and AIDS in the line of duty. Absence of proper channels for such compensations at national level contravenes the prospects of decent work as prescribed in the ILO standards. Security agencies and health workers are more vulnerable to contracting HIV and AIDS in the course of their duties and the gap in the compensation mechanisms for the same need to be rectified if decent work for all is to be realised.

Workplace HIV and AIDS data unavailability and uncoordinated efforts by different stakeholders in the implementation of Workplace HIV and AIDS interventions are yet other areas that this Policy intends to address.

1.4 Purpose of the Policy

Malawi is implementing a number of interventions in respect to HIV and AIDS; however, the epidemic remains a serious public health problem that has socio-economic and human rights implications. Stigma and discrimination against people living with and affected by HIV and AIDS threatens fundamental rights and principles at work and undermines opportunities for people to obtain decent work and sustainable employment.

Despite the concerted efforts in the fight against HIV and AIDS, the fight has been without a guiding document in the world of work in Malawi. Consequently, prospects from the interventions against HIV and AIDS at the workplace have been gradually realised leaving a gap that still needs national policy response. Absence of the National HIV and AIDS Workplace Policy has rendered a number of challenges in the implementation of institutional HIV and AIDS workplace initiatives. Such

challenges include: obscure institutional HIV and AIDS workplace policies and guidelines; inconsistencies in the application and enforcement of legislations, regulations and practices with regard to HIV and AIDS at the work place; inconsistencies in data reporting and unavailability of reliable data on HIV and AIDS by the workplaces; as well as duplication of interventions by different stakeholders. This Policy, will therefore bring sanity and remove inconsistencies in as far as workplace HIV and AIDS management is concerned and will enable employers, employees, employers' and workers' organizations as well as Government to eliminate stigma and discrimination that persists against employees on the basis of their real or perceived HIV status.

1.5 Linkages with other relevant Policies and Legislations

The Policy is aligned to other national policies, pieces of legislations, and international instruments as outlined below.

1.5.1 National Policies

1.5.1.1 Malawi Vision 2063

The Malawi Vision 2063 envisions a healthy population with improved life expectancy working towards the socio-economic transformation of the country. The goal of this national vision is to attain universal health coverage with quality, equitable and affordable health care for all Malawians. In this respect, the National HIV and AIDS Workplace Policy will contribute to the attainment of the aspirations of the Malawi 2063.

1.5.1.2 Malawi National Strategic Plan for HIV and AIDS (2020-2025)

The MNSP guides implementation of HIV and AIDS activities in the country. Wellness and Workplace HIV Programmes is one of the strategies to end AIDS as public health threat. The plan recognizes that AIDS continues to pose a threat in the workplace hence there is a need to strengthen workplace HIV programmes and interventions. The current Policy provides a platform for the achievement of the strategy's goal of strengthening HIV programmes at the workplace.

1.5.1.3 Health Sector Strategic Plan II (2017-2022)

The HSSP envisions achievement of a state of health for all the people of Malawi that would enable them to lead a quality and productive life, in line with the current policy which aims at having a healthier workforce that works to their full potential.

1.5.1.4 National HIV and AIDS Policy

The goal of the policy is to prevent further spread of HIV infection, promote access to treatment for PLWHIV and mitigate the health, socio-economic and psychosocial impact of HIV and AIDs on

individuals' families and the nation. The goal of the current Policy is to prevent further spread of HIV infection specifically at the workplace.

1.5.1.5 National Gender Policy

The policy seeks to reduce gender inequalities; enhance participation of women and men in socio-economic development processes; and ensure sexual and reproductive health rights, and HIV AIDS status are improved. In line with this, the current policy emphasises on equal participation of men and women in the management of HIV and AIDS programs

1.5.1.6 Mental Health Policy

The goal of the Mental Health Policy is to improve the mental health status of Malawians, which will enable them to effectively contribute to, and enjoy socio-economic development. It guides in promoting mental and emotional health; and integrated mental health service at all levels. This correlates with the National HIV and AIDS Workplace Policy as psychosocial support is integrated within the current Policy.

1.5.1.7 The HIV and AIDS Strategy for Higher Education Institutions

The HIV and AIDS Strategy for Higher Education Institutions in Malawi 2016, recognises that higher education institutions in Malawi should not be spared in the HIV response. This is because students in Malawian precisely at tertiary level fall within the risk age group of 18-24 years. Higher Education institutions are also workplaces of which staff interfaces with students hence the need to keep on board higher education institutions in designing HIV prevention interventions.

1.5.2 National Guidelines

1.5.2.1 National HTS Guidelines

The National HTS Guidelines 2018 emphasise that as Malawi aims to scale up ART access, quality HTS are crucial. HIV positive individuals should be linked to treatment, care, and support; and high impact interventions should be scaled up. The workplace provides an ideal platform for such efforts and the HIV and AIDS Workplace policy augments the efforts which are pertinent in reducing HIV and AIDS related morbidity and deaths

1.5.3 Legislations

The Policy is also guided by various existing pieces of legislation, particularly those dealing with non-discrimination and respect for human rights and the rights of employees such as:

1.5.3.1 The Constitution of the Republic of Malawi

The Malawi Constitution prohibits any form of discrimination and guarantees equal and effective protection against discrimination on the grounds of one's status.

1.5.3.2 The Employment Act (Cap. 55:01)

One of the fundamental principles of the Act entails that no person shall discriminate against any employee or prospective employee on the ground of HIV and AIDs status in respect of recruitment, training, promotion, terms and conditions of employment, termination of employment or other matters arising out of the employment relationship.

1.5.3.3 The Labour Relations Act (Cap.54:01)

The Act promotes sound labour relations through the protection and promotion of freedom of association, the encouragement of effective collective bargaining and the promotion of orderly and expeditious dispute settlement, conducive to social justice and economic development. The Policy will encourage social dialogue thereby promoting social justice.

1.5.3.4 The Workers Compensation Act (Cap. 55:03)

This is an Act that provides for compensation for injuries suffered or diseases contracted by workers in the course of their employment or for death resulting from such injuries or diseases.

1.5.3.5 The Occupational Safety, Health, and Welfare Act (Cap.55:07)

This one makes provision for the regulation of the conditions of employment in workplaces as regards the safety, health and welfare of persons employed therein.

1.5.3.6 HIV and AIDS (Prevention and Management) Act

This prohibits discrimination on the basis of HIV and AIDs status. It also promotes the right to privacy and confidentiality with regard to information concerning one's HIV and AIDs status.

1.5.3.7 Gender Equality Act of 2013

The Act prohibits and provides redress for sex discrimination, harmful practices and sexual harassment, to provide for public awareness on promotion of gender equality.

1.5.3.8 Pensions Act of 2011

The Act provides for mandatory pension, and for matters relating to the supervision and regulation of pension funds and umbrella funds, and for matters connected therewith and incidental thereto. This act correlates with the Policy on non-discrimination and improvement of employee livelihood.

1.5.4 International Instruments

1.5.4.1 Sustainable Development Goals (SDGs)

The SDGs are premised on achieving a better and more sustainable future for all and leaving no one behind, and are intended to be achieved by the year 2030. The Policy is directly linked to SDGs 3, 5 and 8 which are to ensure healthy lives and promote wellbeing for all at all ages; achieve gender equality and empower all women and girls; and Promote sustained, inclusive and sustainable economic growth, full and productive employment and decent work for all.

1.5.4.2 UNAIDS End Inequalities End AIDS Global AIDS Strategy 2021-2026

The Global AIDS Strategy aims to reduce inequalities that drive the AIDS epidemic and prioritize people who are not yet accessing life-saving HIV services. It sets out evidence-based priority actions and bold targets to get every country and every community on-track to end AIDS as a public health threat by 2030.

1.5.4.3 AU Agenda 2063

The Agenda aspires for a prosperous Africa based on inclusive growth and sustainable development; and an Africa of good governance, democracy, respect for human rights, justice and the rule of law. The goals include: a high standard of living, quality of life and well-being for all; healthy and well-nourished citizens; and transformed economies and jobs

1.5.4.4 2003 Maseru Declaration on HIV and AIDS

Malawi is one of the countries that are signatory to the Maseru Declaration on HIV and AIDS that was adopted by Member States in the SADC on 4th July, 2003, in Maseru, Lesotho. One of the objectives of the declaration is to Combat HIV and AIDS and other deadly and communicable diseases. It recognizes that upholding human rights and fundamental freedoms for all including prevention of stigma and discrimination is a necessary element in our regional response to the HIV/AIDS pandemic.

1.5.4.5 International Labour Organization (ILO) Code of Practice on HIV and AIDS and the World of Work of 2001

The code of practice provides practical guidance to policy-makers, employers' and workers' organizations and other social partners for formulating and implementing appropriate workplace policy, prevention and care programmes, and for establishing strategies to address women and men workers in the formal and informal economies.

1.5.4.6 ILO Recommendation (No.200) of 2010 on HIV and AIDS and the World of Work

The recommendation stipulates that HIV and AIDS has a serious impact on the world of work in both the formal and informal sectors, and undermine the attainment of decent work and sustainable development; as such, should be recognised and treated as a workplace issue.

1.5.4.7 Discrimination (Employment and Occupation) Convention 1958 (No. 111)

The convention requires each Member for which the Convention is in force to declare and pursue a national policy designed to promote, by methods appropriate to national conditions and practice, equality of opportunity and treatment in respect of employment and occupation, with a view to eliminating any discrimination in respect thereof.

1.5.4.8 Violence and Harassment (Workplace) Convention 2019 (No. 190)

This Convention protects workers and other persons in the world of work, and it applies to all sectors, whether private or public, both in the formal and informal economy, and whether in urban or rural areas. It requires Member States to promote and realize the fundamental principles and rights at work, and adopt laws, regulations and policies ensuring the right to equality and non-discrimination in employment and occupation.

1.5.4.9 1997 SADC Policy of Conduct on HIV and AIDS in the Workplace

The Code was adopted by the SADC Council of Ministers in September 1997 and lays down guidelines on the handling of HIV and Aids in the workplace.

CHAPTER 2

2.0 BROAD POLICY DIRECTIONS

This section presents the broad Policy directions as goal, expected outcomes, objectives, and guiding principles.

2.1 Policy goal

To prevent HIV infection, control and manage the impact of HIV and AIDS at the workplace.

2.2 Policy Outcomes

The expected outcomes of the Policy are:

Reduced HIV and AIDS morbidity and mortality

Reduced stigma and discrimination

Strengthened coordination of HIV and AIDS workplace interventions
Strengthened workplace HIV and AIDS information management system

2.3 Policy objectives

The objectives of the Policy are to:

Enhance HIV Testing services (HTS) for employees
Prevent HIV infections at the workplace
Manage and mitigate the impact of HIV and AIDS at the workplace
Prevent stigma and discrimination on the basis of real or perceived HIV status at the workplace
Strengthen coordination of HIV and AIDS workplace interventions
Strengthen workplace HIV and AIDS information management system

2.4 Guiding principles

The Government of Malawi is a signatory to several global and regional commitments related to HIV and AIDS. In addition, various legislations and policies guide the development and implementation of the Malawi National Strategic Plan 2025-2025. The Policy will be guided by the following principles:

2.4.1 Human Rights Based Approach

The Policy will adopt a rights-based approach to effective implementation of HIV and AIDS programmes.

2.4.2 Empathy

The Policy will create a supportive and conducive environment for persons living with HIV and affected employees or those perceived to be HIV infected.

2.4.3 Gender sensitive

The Policy will be gender sensitive given that the needs and circumstances of women and men may not always be the same. Eliminating gender and other inequalities will help address some of the barriers in HIV response especially among women and girls who are disproportionately affected by the HIV and AIDS epidemic.

2.4.3 Confidentiality and Voluntary

HIV and AIDS screening shall be voluntary and confidential. HIV testing should never be used for screening as a prerequisite of job application, promotion, training or any other work related opportunities and benefits.

2.4.4 Non discrimination

Stigma and discrimination constitute major barriers to effective implementation of HIV and AIDS programmes. The Policy will enforce implementation of the legislations on HIV and AIDS in workplace to curb any other form of discrimination due to one's HIV and AIDS sero status.

2.4.5 Public health approach

The National Workplace Policy will adhere to the public health ethical principles by prioritizing evidence-based cost-efficient interventions and strengthen health systems to enable integration of high-quality services to deliver effective combination prevention to maximise impact of HIV and AIDS programming.

2.4.7 Evidence-based programming

Promoting research, learning, documentation and sharing of best practices for evidence-based programming. Furthermore, efforts will be made to continue scale-up coverage of evidence-based HIV services to ensure high quality interventions.

CHAPTER 3

3.0 POLICY PRIORITY AREAS

The Policy has six priority areas in order to achieve its goal and objectives. The priority areas are: HIV Testing Services; Prevention; Treatment, Care and Support; Stigma and Discrimination; Coordination and Collaboration; and Information Management System.

3.1 Priority Area 1: HIV Testing Services

HIV testing entails taking a medical test to determine a person's HIV status. HIV testing services (HTS) are crucial in the response to HIV and AIDS epidemic for all purposes, including the workplace as it motivates people towards positive behaviour change and offers an opportunity to access treatment, care and support services.

Access to HTS for employees is a challenge since most of them spend more time at work. It should therefore be accessible to and utilized by employees. In addition, there is no proper linkage between employees diagnosed with HIV and the corresponding treatment, care and support at the workplace. HIV testing must be voluntary and guided by the Malawi HTS guidelines.

Policy statement

The Policy will ensure that access to HTS is promoted at workplace.

Strategies

- i. Promoting HTS for all employees
- ii. Strengthening linkage to treatment, care and support for employees diagnosed HIV positive

3.2 Priority Area 2: Prevention

This aims at ending HIV and AIDS by preventing new HIV infections precisely at the workplace. Efforts in ending HIV and AIDS ought to be accelerated considering that currently the country is registering 19,753 new infections per annum (MoH/UNAIDS 2021 Malawi Spectrum Model).

Out of these, the majority are in the 15-49 age group, which is also a productive workforce. This age group is mostly found in a workplace setting where availability, access to and uptake of HIV prevention services still remain a challenge. To reduce the new infections, HIV and AIDS programming should be strengthened to ensure people are able to access prevention services at the workplace.

Policy statement

The Policy will ensure that sustainable, appropriate and effective workplace HIV and AIDS prevention and wellness programmes are in place.

Strategies

- i. Raising awareness on HIV and AIDS prevention strategies and instruments including alcohol and drug abuse
- ii. Ensuring the availability of functional and trained workplace peer educators

- iii. Promoting availability of condoms and lubricants in the workplace
- iv. Promoting availability of first aid kits, PPEs and sanitary facilities at the workplace
- v. Promoting inclusive recreational infrastructure and facilities at the workplace

3.3 Priority Area 3: Treatment, Care and Support

Treatment entails access to effective medication to those diagnosed with HIV and AIDS for a healthy and prolonged life while care and support entails interventions aimed at supporting those affected by the HIV and AIDS epidemic financially or psychologically. UNAIDS announced an ambitious target of 95-95-95 in 2014 which aims at having 95% of the people living with HIV and AIDS knowing their HIV positive status; 95% of the people knowing their HIV positive status being on treatment; and 95% of those on treatment having a suppressed viral load by 2030. According to National Statistics Office, MBBSS Report 2019-2020, progress on the targets in Malawi was at 91:87:94 by the end of June 2020 hence there is need to put up with the efforts to ensure that the targets are achieved.

Wellness of employees contributes to their productivity which is demoralised by the HIV and AIDS epidemic. Strengthening and enhancing treatment, care and support services at the workplace as well as good nutrition for effective treatment are therefore a must if economic growth is to be achieved through increased productivity of the workforce.

Policy Statement

This Policy will ensure that sustainable, appropriate and effective HIV and AIDS treatment; care and support programmes are in place in all work places.

Strategies

- i. Promoting access to Anti-Retroviral Therapy (ART)
- ii. Promoting access to psychosocial counselling and support
- iii. Promoting Health seeking behavior among employees including treatment of sexually transmitted Infections
- iv. Ensuring reasonable accommodation for employees not medically fit to perform their normal duties due to HIV and AIDS related illnesses
- v. Promoting information on good nutrition
- vi. Promoting health insurance coverage to all employees to enable them access quality health services at all times

- vii. Ensuring availability of mechanisms for compensating employees who have occupationally acquired HIV and AIDS

3.4 Priority Area 4: Stigma and Discrimination

The social mark that, when associated with a person, usually causes marginalization or presents an obstacle to the full enjoyment of social life by the person infected or affected by HIV is considered as Stigma while any distinction, exclusion or preference which has the effect of nullifying or impairing equality of opportunity or treatment in employment or occupation on the basis of one's HIV status is regarded as discrimination.

Discrimination against PLWHIV worldwide has been perpetrated through practices such as unfair dismissal and denial of employee benefits on the basis of someone's real or perceived HIV positive sero-status and Malawi has not been exceptional. There are anomalies in some workplaces whereby HIV testing is a prerequisite for recruitment, training, promotion, termination of employment or other matters arising out of an employment relationship.

Such practices are against fundamental principles of human rights and it is essential for co-employees to protect PLWHIV from stigmatization and discrimination. The stigma and discrimination undermines employees' welfare, safe healthy work environment and HIV prevention efforts, which depend on openness, trust and respect for basic rights.

Policy statement 1

The Policy will ensure that there is no stigma and discrimination of any kind against PLWHIV in the work place.

Strategies

- i. Promoting mainstreaming of HIV and AIDS issues into core functions of the workplace
- ii. Promoting institutional HIV and AIDS workplace policies
- vi. Strengthening legislations and regulations against stigma and discrimination including human rights in relation to HIV and AIDS at the workplace
- vii. Promoting social dialogue on wellness and HIV related matters
- viii. Promoting practices that foster equal access to employee opportunities and benefits to all irrespective of HIV status

Policy statement 2

This Policy will ensure that HIV testing is voluntary and confidential for all employees

Strategies

- i. Promoting voluntary disclosure of HIV status
- ii. Promoting confidentiality in handling employees' HIV and AIDS issues

3.5 Priority Area 5: Coordination and Collaboration

This priority area responds to weak coordination and collaboration among stakeholders who are implementing workplace HIV and AIDS interventions. The disjointed coordination platforms, weak partnerships; and poor monitoring and evaluation translate into inefficiencies in the provision of the services. A comprehensive HIV and AIDS workplace response will be driven by effective coordination and collaboration.

Policy Statement

The Policy will ensure effective coordination and collaboration in the implementation of HIV and AIDS workplace programmes.

Strategies

- i. Strengthening coordination and collaboration mechanisms for implementation of HIV and AIDS workplace programmes
- ii. Enhancing resource mobilization for implementation of workplace HIV and AIDS programmes
- iii. Promoting establishment of HIV and AIDS workplace committees

3.6 Priority Area 6: Management Information System

Workplace specific information on HIV and AIDS is crucial in accounting for progress in the fight against the pandemic. Though Malawi has HIV and AIDS information collection and consolidation system, there are challenges with accessing data specific to workplaces. No mechanism has been put in place for collecting, storing and processing workplace HIV and AIDS data to provide reliable information. Inadequate data contributes to poor planning in the national response workplace programmes. It is therefore imperative for workplaces to provide information that will feed into the national HIV and AIDS management information system.

Policy Statement

The Policy will ensure functional and effective HIV and AIDS workplace management information system

Strategies

- i. Promoting workplace HIV and AIDS management information system
- ii. Enhancing capacity of workplaces in HIV and AIDS management information system

CHAPTER 4

4.0 IMPLEMENTATION ARRANGEMENTS

To ensure the success of the Policy it is essential to put in place implementation mechanisms with clear demarcation of roles and responsibilities of various key stakeholders.

4.1 Institutional Arrangements

A successful and effective implementation of the Policy will require a multi-sectoral approach. Stakeholders involved will include Government Ministries, Departments and Agencies; workers' organizations; employers' organizations; Non-Governmental Organizations (NGOs); and civil society organizations (CSOs). The roles and responsibilities shall be as outlined below:

4.1.1 Ministry responsible for Labour

The Ministry is the Policy holder and will be responsible for providing coordination and guidance on the implementation of the Policy.

4.1.2 Ministry responsible for Health

The Ministry will coordinate biomedical response and wellness programmes at the workplace.

4.1.3 Office of the President and Cabinet

The OPC will provide overall direction and guidance in the implementation and review of the Policy.

4.1.4 Ministry of Justice

The Ministry will provide guidance on development and implementation of HIV and AIDS related legislations and regulations

4.1.5 Ministry of Finance

The Ministry will ensure timely budgetary allocation towards the implementation of workplace HIV and AIDS programmes.

4.1.6 DHRMD

The Department will manage and coordinate HIV and AIDS public sector response.

4.1.7 Ministry responsible for Industry

The Ministry will ensure adherence of the Policy within the informal economy.

4.1.8 National Aids Commission

NAC will provide technical support in the implementation, monitoring and evaluation of the Policy.

4.1.9 National Statistics Office

The NSO will incorporate workplace HIV and AIDS issues in the national surveys.

4.1.10 Workers' Organizations

Workers organizations will promote mainstreaming of HIV and AIDS subsidiary policies in all union programmes. Further the organizations will advocate and lobby for adequate resources, engage in social dialogue and collective bargaining in line with this Policy.

4.1.11 Employers' Organizations

Employers' organizations will ensure the development of HIV and AIDS subsidiary policies; raise awareness; and collaborate with Government and other agencies on workplace HIV and AIDS issues.

4.1.12 Malawi Business Coalition for Health (MBC Health)

The MBC Health will mobilise, coordinate and advocate for the implementation of this policy in the private sector, in order to ensure the sustenance of businesses and the lives of employees', their families and the surrounding communities.

4.1.13 CSOs

CSOs will lobby and advocate effective implementation of this policy in the informal and formal economies. They will promote transparency and accountability through checks and balances.

4.1.14 Development Partners

Development partners will mobilise and provide financial and technical support in the implementation of this policy

4.1.15 Non-Governmental Organizations (NGOs)

NGOs will track budget allocations, advocate, promote, mobilise resources, raise awareness, for HIV related programmes. They will also carry out research, evaluation, design and implement HIV and AIDS related programmes.

4.2 Implementation Plan

A detailed Implementation Plan to ensure effective implementation has been developed and is attached as Appendix I.

4.3 Monitoring and Evaluation

The implementation of the Policy requires an effective and efficient monitoring and evaluation (M and E) system to keep track of progress made and identify implementation challenges and bottlenecks. The M and E Plan is attached as Appendix II.

4.4 Review of the Policy

HIV and AIDS issues continually evolve. This calls for periodic reviews of the Policy to address emerging issues in the world of work related to HIV and AIDS. The Ministry responsible for Labour will facilitate annual reviews and a comprehensive national review of the Policy will be conducted every five years.

APPENDIX I: IMPLEMENTATION PLAN

Priority Area 1: HIV Testing Services			
Policy statement: This Policy will ensure that access to HTS is promoted at workplace			
Objective	Strategy	Responsibility	Time frame
To enhance HIV Testing services (HTS) for employees	Promoting HTS for all employees	MoH, MoL, NAC, MBC Health, ECAM, MCTU, all MDAs, CSOs, NGOs, Uniformed Forces, FEDOMA, MACOHA, FBOs	2021-2026
	Strengthening linkage to treatment, care and support for employees diagnosed HIV positive	MoH, MoL, NAC, DHRMD, MBC Health, MCTU, ECAM, all MDAs, CSOs, NGOs, Uniformed Forces, FEDOMA, MACOHA	2021-2026

Priority Area 2: Prevention			
Policy Statement 1: This Policy will ensure that sustainable, appropriate and effective workplace HIV and AIDS prevention and wellness programmes are in place.			
Objective	Strategy	Responsibility	Time frame
To Prevent HIV infections at the workplace	Raising awareness on HIV and AIDS prevention strategies and instruments including alcohol and drug abuse	MoH, MoL , NAC, all MDAs, MANET+, MANASO, FBOs, MBC Health, ECAM, MCTU, Academia, NGOs, Media, MoCENU, Uniformed Forces	2021-2026
	Ensuring the availability of functional and trained workplace peer educators	MoL , MoH, NAC, MANET+, MANASO, FBOs, MBC Health, MCTU, ECAM, Uniformed Forces	2021-2026
	Promoting availability of condoms and lubricants at the workplace	MoH , NAC, MoL, all MDAs, MANET+, MBC Health, MANASO, FBOs, MCTU, ECAM, Uniformed Forces	2021-2026
	Promoting availability of first aid kits, PPEs and sanitary facilities at the workplace	MoH , NAC, MoL, all MDAs, MANET+, MBC Health, MANASO, FBOs, MCTU, ECAM, Uniformed Forces, Malawi Red Cross	2021-2026
	Promoting inclusive recreational infrastructure and facilities at the workplace	MoL , MoH, NAC, all MDAs, MANET+, MANASO, FBOs, MBC Health, MCTU, ECAM, Uniformed Forces, FEDOMA, MACOHA, Academia, CSOs, NGOs	2021-2026
Priority Area 3: Treatment, Care, and Support			
Policy Statement: This Policy will ensure that sustainable, appropriate, and effective HIV and AIDS treatment, care, and support Programmes are in place in all work places			
Objective	Strategy	Responsibility	Time frame

To manage and mitigate the impact of HIV and AIDS at the workplace	Promoting access to Anti-Retroviral Therapy (ART)	MoL , MoH, NAC, DHRMD all MDAs, MANET+, MANASO, FBOs, MBC Health, MCTU, ECAM, Uniformed Forces, FEDOMA, MACOHA, Academia, CSOs, NGOs	2021-2026
	Promoting access to psychosocial counseling and support	MoL , MoGCDSW MoH, NAC, DHRMD all MDAs, MANET+, MANASO, FBOs, MBC Health, MCTU, ECAM, Uniformed Forces, FEDOMA, MACOHA, Academia, CSOs, NGOs	2021-2026
	Promoting Health seeking behavior among employees including treatment of sexually transmitted Infections	MoH , NAC, , all MDAs, MBC Health, MANET+, MANASO, FBOs, MCTU, ECAM, CSOs, NGOs, Uniformed Forces,	2021-2026
	Promoting reasonable accommodation for employees not medically fit to perform their normal duties due to HIV and AIDS related illnesses	MoL , , NAC, all MDAs, MANET+, MANASO, FBOs, MBC Health, MCTU, ECAM, Uniformed Forces, FEDOMA, MACOHA, Academia, CSOs, NGOs	2021-2026
	Promoting information on good nutrition	MoCENU, MoL, MoH , , NAC, all MDAs, MANET+, MANASO, FBOs, NICE Trust, MBC Health, MCTU, ECAM, Uniformed Forces, FEDOMA, MACOHA, Academia, CSOs, NGOs, Media	2021-2026
	Promoting health insurance coverage to all employees to enable them access quality health services at all times	DHRMD, MoL , ECAM, MoH, MCTU, MBC Health, CSOs, Uniformed Forces, all MDAs, FEDOMA, MACOHA	2021-2026
	Ensuring availability of mechanisms for compensating employees who have occupationally acquired HIV and AIDS	MoL, MoH , ECAM, MCTU, MBC Health, CSOs, NAC, MANET+, MANASO, all MDAs, NGOs	2021-2026

Priority Area 4: Stigma and Discrimination			
Policy statement 1: This Policy will ensure that there is no stigma and discrimination of any kind against PLHIV at the work place			
Objective	Strategy	Responsibility	Time frame
To Prevent stigma and discrimination on the basis of real or perceived HIV status at the workplace	Promoting mainstreaming of HIV and AIDS into core functions of the workplace	NAC, DHRMD, MANET+, MBC Health, all MDAs, MANASO, FBOs, MCTU, ECAM, FEDOMA, MACOHA, Uniformed Forces	2021-2026
	Promoting institutional HIV and AIDS workplace policies	MoL, DHRMD, ECAM, MCTU, NAC, MANET+, MBC Health, all MDAs, MANASO, FBOs, Uniformed Forces, FEDOMA, MACOHA	2021-2026
	Strengthening legislations and regulations against stigma and discrimination including human rights in relation to HIV and AIDS at the workplace	MoL, MoJ, ECAM, MCTU, NAC, MBC Health, MANET+, all MDAs, MANASO, FBOs	2021-2026
	Promoting social dialogue on wellness and HIV related matters	MoL, MCTU, ECAM, NAC, MoH, MBC Health, MANET+, MANASO, CSOs	2021-2026
	Promoting practices that foster equal access to employee opportunities and benefits to all irrespective of HIV status	MoL, MoGCDSW, DHRMD, MBC Health, MCTU, ECAM, NAC, MoH, MANET+, MANASO, CSOs, all MDAs, MHRC, Uniformed Forces	2021-2026
Policy statement 2: This Policy will ensure that HIV testing is voluntary and confidential for all employees			
Objective	Strategy	Responsibility	Time frame
To Prevent stigma and discrimination on the basis of real or perceived HIV status at the workplace	Promoting voluntary disclosure of HIV status	MoL, MoH, DHRMD, MoGCDSW, NAC, MBC Health, MCTU, ECAM, NAC, , MANET+, MANASO, CSOs, all MDAs, MHRC, Uniformed Forces	2021-2026

	Promoting confidentiality in handling employee's HIV and AIDS issues	MoL, DHRMD, MoGCDSW, NAC, MBC Health, MCTU, ECAM, NAC, MoH, MANET+, MANASO, CSOs, all MDAs, MHRC, Uniformed Forces	2021-2026
Priority Area 5: Coordination and Collaboration			
Policy statement: The Policy will ensure effective coordination and collaboration in the implementation of HIV and AIDS workplace programmes			
Objective	Strategy	Responsibility	Time frame
To Strengthen coordination of HIV and AIDS workplace interventions	Strengthening coordination and collaboration mechanisms for implementation of HIV and AIDS workplace programmes	MoL, NAC, MBC Health, MCTU, ECAM, MANET+, MANASO, CSOs, all MDAs, Uniformed Forces, DPs	2021-2026
	Enhancing resource mobilization for implementation of workplace HIV and AIDS programmes	MoL, MoF, NAC, MBC Health, MCTU, ECAM, MANET+, MANASO, CSOs, NSOs, DPs, all MDAs, Uniformed Forces	2021-2026
	Promoting establishment of HIV and AIDS workplace committees	MoL, NAC, DHRMD, MBC Health, MCTU, ECAM, NAC, MoH, MANET+, MANASO, CSOs, all MDAs, Uniformed Forces	2021-2026
Priority Area 6: Information Management System			
Policy Statement: The Policy will ensure functional and effective HIV and AIDS workplace information management system			
Objective	Strategy	Responsibility	Time frame
Strengthen workplace HIV and AIDS information	Promoting workplace HIV and AIDS information management system	MoI, MoL, DHRMD, E-Government, NSO, NAC, MBC Health, ECAM, MCTU, CSOs, MANET+, MANASO, all MDAs, NGOs, Uniformed Forces	2021- 2026

management system	Enhancing capacity of workplaces in HIV and AIDS information management system	MoI, MoL, DHRMD, E-Government, NSO, MoCENU, NAC, NICE Trust, MBC Health, ECAM, MCTU, CSOs, MANET+, MANASO, all MDAs, NGOs, Uniformed Forces	2021 – 2026
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APPENDIX II: MONITORING AND EVALUATION PLAN

Priority Area 1: HIV Testing Services						
Outcome: Reduced HIV and AIDS morbidity and mortality						
Objective	Output	Performance Indicator	Baseline	Target	Source of Verification	Assumptions/ Risks
To enhance HIV Testing services (HTS) for employees	HTS for employees increased	Proportion of workplaces promoting HTS	40%	80%	HIV and AIDS Workplace reports	-Stakeholders' commitment -Availability of resources
		Percentage of employees accessing HTS per annum	25%	90%	HIV and AIDS Workplace reports	-Stakeholders' commitment -Availability of HTS -Willingness of employees
	Awareness of employees on HTS raised	Number of sensitization meetings conducted on HTS per annum	1	4	HIV and AIDS Workplace reports	-Workplace's commitment to provide financial/ technical support
		Proportion of workplaces conducting sensitisation meetings on HTS per annum	15%	80%	HIV and AIDS Workplace reports	-Workplace's commitment to provide financial/ technical support
	HIV positive employee's access to treatment, care and support increased	Proportion of HIV positive employees accessing	0	95	HIV and AIDS Workplace reports	-Employees willingness to disclose

treatment, care and support per annum

Priority Area 2: Prevention

Outcome: Reduced HIV and AIDS morbidity and mortality

Objective	Output	Performance Indicator	Baseline	Target	Source of Verification	Assumptions/ Risks
To Prevent HIV infections at the workplace	Awareness on HIV prevention strategies including alcohol and drug abuse raised	Proportion of employees knowledgeable about HIV prevention strategies	50%	100%	HIV and AIDS Workplace reports	-Workplace's commitment to provide financial/ technical support
		Number of HIV prevention dissemination meetings at the workplace conducted per annum	2	4	HIV and AIDS Workplace reports	-Workplace's commitment to provide financial/ technical support
	Workplace peer educators identified and trained	Proportion of workplaces with active peer educators	9%	70%	HIV and AIDS Workplace reports	-Top management support
		Percentage of peer educators trained per annum	8%	70%	HIV and AIDS Workplace reports	- Top management support - Employees commitment and willingness
	Accessibility of condoms and lubricants at workplaces promoted	Proportion of workplaces with condom and lubricants distribution programme	60%	100%	Workplace Inspection reports and HIV and AIDS	-Top management support

					Workplace committee reports/ minutes	
	First aid kits, PPEs and sanitary facilities promoted	Proportion of workplaces providing first aid kits	40%	75%	Workplace Inspection Reports and HIV and AIDS Workplace reports	-Top management support
		Proportion of workplaces providing PPEs	25%	75%	Workplace Inspection Reports and HIV and AIDS Workplace reports	-Top management support
		Proportion of workplaces providing sanitary facilities	60%	100%	Workplace Inspection Reports and HIV and AIDS Workplace reports	-Top management support
	Inclusive recreational infrastructure and facilities at the workplace promoted	Inclusive recreational infrastructure and facilities at workplaces in place	2%	50%	Workplace Inspection Reports and HIV and AIDS Workplace reports	-Partners Support -Top management support -Employees mind set change

		Percentage of workplaces promoting physical exercise programs	5%	70%	HIV and AIDS Workplace reports	-Top management support -Employees commitment and willingness
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Priority Area 3: Treatment, Care and Support

Outcome: Reduced HIV and AIDS morbidity and mortality

Objective	Output	Performance Indicator	Baseline	Target	Source of Verification	Assumptions/ Risks
To manage and mitigate the impact of HIV and AIDS at the workplace	Employees access to ART increased	Proportion of employees positively living with HIV accessing ART	70%	100%	HIV and AIDS Workplace reports	-Employees commitment and willingness
	Employees access to psychosocial support increased	Proportion of employees positively living with HIV accessing psychosocial support	70%	100%	HIV and AIDS Workplace reports	-Top management support -Employees commitment and willingness
	Health seeking behaviour interventions promoted	Proportion of workplaces implementing health seeking behaviour interventions	5%	80%	HIV and AIDS Workplace reports	-Top management support - Employees commitment and willingness
	Reasonable accommodation of employees not medically fit promoted	Percentage of workplaces providing “reasonable accommodation” to employees not medically fit	12%	50%	Workplace Inspection reports and HIV and AIDS	-Top management support

					Workplace reports	
	Awareness on good nutrition enhanced	Number of dissemination meetings on good nutrition conducted at the workplace per annum	0	4	HIV and AIDS Workplace reports	-Top management support -Stakeholders commitment
	Medical insurance coverage to all employees provided-	Proportion of workplaces with their employees on medical insurance	20%	70%	HIV and AIDS Workplace reports	-Top management support -Availability of resources
		Proportion of employees living with HIV and AIDS on health insurance at the workplace	100%		HIV and AIDS Workplace reports	-Workplaces commitment to insure their employees
	Effective compensation mechanisms for employees who have occupationally acquired HIV and AIDS in place	Guidelines for compensating occupationally acquired diseases in place	0	1	Approved guidelines	-Stakeholders commitment

Priority Area 4: Stigma and Discrimination

Outcome: Reduced stigma and discrimination

Objective	Output	Performance Indicator	Baseline	Target	Source of Verification	Assumptions/ Risks
To prevent stigma and discrimination on the basis of real or perceived	HIV and AIDS mainstreamed in the annual work plans and budgets	Proportion of workplaces mainstreaming HIV and	60%	80%	HIV and AIDS Workplace reports	-Top management support

HIV status at the work place		AIDS in annual work plans and budget				
	Institutional HIV and AIDS work place policies developed	HIV and AIDS institutional workplace policy in place	0	1	HIV and AIDS Workplace reports	-Top management support -Stakeholders commitment
	Implementation of institutional HIV and AIDS work place policy enhanced	Proportion of workplaces implementing HIV and AIDS work place policy	20%	80%	HIV and AIDS Workplace reports	-Top management support
	Awareness on HIV and AIDS workplace related stigma and discrimination legislations raised	Proportion of workplaces sensitizing staff on stigma, discrimination, and human rights related legislations	20%	80%	Stigma index Study report	-Top management support
		Prevalence of HIV and AIDS related stigma and discrimination at the workplace	60%	5%	Stigma index Study	-Top management support
	Collective bargaining on HIV and AIDS between employers and employees enhanced	Percentage of collective bargaining agreements integrating HIV and AIDS issues submitted to the Registrar of Trade Unions	0	80%	Bargaining agreements	-Stakeholders Commitment
	Equal access to employee opportunities and benefits at workplace promoted	Proportion of workplaces with non-discriminatory clauses in their conditions of service and employment contracts	55%	90%	Workplace Inspection reports and Conditions of service and	-Stakeholders commitment -Top management support

					employment contacts	
	Voluntary disclosure of employee HIV status promoted	Number of awareness meetings on voluntarily disclosure conducted at the workplace per annum	0	4	HIV and AIDS Workplace reports	-Top management support
	Employees confidentiality in HIV and AIDS issues enhanced	Reliable HIV and AIDS records management system in place at workplaces	0	1	HIV and AIDS Workplace reports	-Top management support -Stakeholder commitment

Priority Area 5: Coordination and Collaboration

Outcome: Strengthened coordination of HIV and AIDS workplace interventions

Objective	Output	Performance Indicator	Baseline	Target	Source of Verification	Assumptions/ Risks
To strengthen coordination of HIV and AIDS workplace interventions	HIV and AIDS workplace coordination and collaboration mechanisms enhanced	Proportion of TWG meetings discussing HIV and AID workplace issues	15%	100%	TWG meeting minutes	-Stakeholders commitment
		Number of Sector Working Group meetings discussing HIV and AIDS workplace issues	10%	100%	SWG meeting minutes	-Stakeholders commitment
		Number of quarterly meetings conducted between national sectoral coordinating bodies and workplace committees	2	4	Meeting reports	-Availability of resources -Stakeholders commitment

		Proportion of affiliates reporting to sectoral coordinating bodies	20%	90%	Quarterly sectoral reports and affiliates activity reports	-Stakeholders commitment
		Number of stakeholders joint plans on HIV and AIDS workplace developed and implemented per annum	0	8	Quarterly sectoral reports and Affiliates activity reports	-Stakeholders commitment
		Number of joint workplace monitoring visits on HIV and AIDS conducted per annum	0	4	Quarterly sectoral reports and Affiliates activity reports	-Stakeholders commitment
	HIV and AIDS programmes resource mobilisation enhanced	Proportion of workplaces complying to prescribed minimum budget allocation for HIV and AIDS	55%	90%	Budget utilisation reports	-Top management support
		Proportion of workplaces with HIV and AIDS resource mobilisation strategy	0%	50%	Resource mobilisation strategy and HIV and AIDS Workplace reports	-Top management support - Availability of resources -Stakeholders commitment
	HIV and AIDS workplace committees strengthened	Proportion of workplaces with functional HIV and AIDS workplace committee	40%	100%	HIV and AIDS Workplace reports and Committee meeting minutes	-Top management support -Stakeholders commitment
		Number of orientation and refresher trainings to the committee members conducted per annum	0	4	Training reports	-Top management support -Availability of funds -Stakeholders commitment

Priority Area 6: Information Management System						
Outcome: Strengthened workplace HIV and AIDS information management system						
Objective	Output	Performance Indicator	Baseline	Target	Source of Verification	Assumptions/ Risks
To Strengthen workplace HIV and AIDS information management system	Functional HIV and AIDS Information Management Systems promoted	Functional HIV and AIDS Information Management system in place at National level	0	1	Availability of functional Information Management system	-Top management support -Availability of funds -Stakeholders commitment
		Percentage of Workplace Information Management Systems integrated to the National HIV and AIDS Information Management System	0%	100%	HIV and AIDS Workplace reports	-Top management support -Availability of funds -Stakeholders commitment
	Capacity of HIV and AIDS Information Management System enhanced	Proportion of workplaces with trained personnel in HIV and AIDS information Management System	0%	50%	Training reports	-Top management support -Availability of funds -Stakeholders commitment
		Number of HIV and AIDS information management system trainings conducted	0	4	Training reports	-Top management support -Availability of funds -Stakeholders commitment