



**INTERNATIONAL LABOUR ORGANIZATION (ILO)
MULTI-BILATERAL PROGRAMME OF TECHNICAL COOPERATION**

FINAL REPORT

Project No: INT/07/09/GTZ

Project Title: Implementing workplace policies and programmes

Period Covered: July 2007-September 2009

Total Budget: 1,098,875 Euro

Starting Date: 1 July 2007

End Date: 30 September 2009 (revised)

Evaluation Date: 7-18 September 2009 Moldova, Namibia, Ukraine, 21-30 September Mali

Implemented by: ILOAIDS

Donor: GTZ

Prepared by: ILOAIDS team

Reviewed by: ILOAIDS Technical Cooperation Manager

Place: ILOAIDS, Geneva

SUMMARY OF PROJECT OBJECTIVES/OUTCOMES

The objective of the project is to contribute to universal access by 2010 through enhanced world of work engagement and partnership at the workplaces of the four focus countries-Mali, Moldova, Namibia and Ukraine.

EXPECTED IMPACT/ DEVELOPMENT OBJECTIVE

The overall project development objective is to contribute towards the goal of universal access for prevention, treatment and care by 2010 through enhanced world of work engagement and partnership at the workplace.

IMMEDIATE OBJECTIVE / PROJECT OUTCOMES

Mali and Namibia

Immediate objective 1 (both Mali and Namibia): Mobilization and strengthened capacity of ILO constituents to prevent the spread of HIV in the world of work through a conducive policy framework and ability to access prevention, treatment and care services.

Immediate objective 2 (Mali): Creation of an enabling workplace environment for people living with HIV or AIDS and those affected, in terms of non-discriminatory measures, prevention and access to treatment and care services.

Immediate objective 2 (Namibia): Assist ILO constituents to implement workplace programmes to prevent the spread of HIV and AIDS and mitigate its negative impact on socio-economic development.

Immediate objective 3 (both Mali and Namibia): To build capacity through information exchange and knowledge transfer on good practices in world of work programmes with other countries in West Africa through the use of the existing ILO infrastructure in the region.

Moldova and Ukraine

Immediate objective 1: Strengthened capacity of government and the social partners to make effective use of global finances for an increased involvement of the world of work towards reaching the goal of Universal Access.

Immediate objective 2: ILO constituents empowered/enabled to develop/implement workplace policies and programme to prevent the spread of HIV and AIDS and to mitigate its negative impact on socio-economic development.

Immediate objective 3: To build capacity through information exchange and knowledge transfer on good practices in world of work programmes with other countries in Eastern Europe through the use of the existing ILO infrastructure in the region.

Major project outcomes:

Mali

1. Strengthened capacity of the ILO tripartite constituents in strategic planning and policy formulation on HIV and AIDS in the world of work.
2. Strengthened capacity of the Ministry of Employment in professional education to reduce the transmission of HIV and AIDS.
3. Strengthened capacity of labour inspectors to include HIV prevention and AIDS responses as part of their inspection.
4. To strengthen the ability of post HIV exposure prophylaxis among private enterprise health workers.
5. Establish tripartite group and review the legislation relating to HIV prevention, treatment and support of AIDS.

Moldova

1. Increased capacities of the ILO constituents, including from health care, transport and construction sectors, to adopt and implement HIV and AIDS workplace policies along with occupational safety and health policies.
2. Improved knowledge of women entrepreneurs on HIV and AIDS prevention in the world of work.
3. Increased awareness at regional level on Moldova HIV and AIDS at the workplace experience.

Namibia

1. The institution of a National Tripartite Memorandum of Understanding on the implementation of HIV/AIDS workplace programmes signed by all relevant Social Partners in Namibia
2. The Ministry of Labour and Social Welfare is capacitated to implement an internal HIV/AIDS workplace programme
3. The World of Work component is included into the new National Strategic Plan on HIV/AIDS (MTPIV)
4. Capacity of labour and occupational health and safety inspectors are strengthened to include HIV/AIDS into their advisory and regulatory services as part of their Ministerial mandate
5. Health care workers are capacitated to implement the joint ILO/WHO PEP guidelines
6. To capacitate trade union members and the employer's organization to integrate HIV and AIDS into their collective bargaining processes

Ukraine

1. Strengthened capacity of national level OSH institutions to address HIV and AIDS.
2. Capacity of health workers strengthened to address issues pertaining to HIV and AIDS in their workplaces.
3. Experiences in the implementation of work place policies in the education sector are documented and disseminated.
4. ILO/AIDS publications translated, edited, published and disseminated.
5. Sustainability of project results is ensured.

I. Country information and developments

Mali

Mali, like other Sub-Saharan African countries, is not spared by the HIV epidemic. Based on the most recent Demography and Health Survey of Mali (EDSM IV) conducted in 2006, the HIV prevalence is at 1.3% among adults 15 to 49 years of age in a population of 12 million. It was estimated that 130,000 persons have already been infected by HIV in the country, 27,000 of which were in need of ARV treatment.

The HIV epidemic in Mali is concentrated in the urban area (1.6% prevalence in urban compared to 0.9% in rural areas) with Bamako having the highest prevalence at 1.9%. Sex workers have higher HIV prevalence compared to the general population. The socio-economic disparity between men and women in Mali is one of the HIV vulnerability factors for women. Another vulnerability is Malian seasonally migrate as agricultural workers to neighbouring countries. The growing HIV prevalence in Mali is mainly among adults in the 20 to 49 age group, the most economically productive group of the country. It created a significant economic burden that affected the productivity and increase the costs to business.

Access to anti-retroviral treatment in Mali began in 2001. It is helped by rapid disbursement of national resources, the public declaration in April 2004 setting AIDS as a national priority issue, the free access to ART, treatment for opportunistic infections, and biologic monitoring as part of the decree, officially announced by the President of Mali, Mr Amadou Toumani Toure in July, 2004.

At the institutional level, Mali has created the National High Commission for AIDS control, which is a multi-sectoral policy coordination body (HNCLS). This coordinating body is composed of representatives from the public sector (technical Ministries), private sector, civil society and development partners.

Mali received Round 8 of Global Fund and has support from the World Bank MAP. It has also mobilized a large number of partners for HIV and AIDS. The civil society in Mali is leading these efforts making it possible for choices of care.

The mobilization based on ILO tripartite mandate (employers, workers and government) allowed access to resources. The social dialogue with different social partners is being elaborated to put in place interventions and strategies aiming at translating HIV awareness and changing the attitudes to reduce transmission. The world of work, the key domain of ILO, has a comparative advantage in engaging employers, workers and other service recipients of public and private institutions as an appropriate base for developing information, education and communication activities against HIV.

Moldova

It is considered as one of the poorest countries in Europe. In the past two decades, there is large population emigration in search of employment. Migrants are considered one of the highly vulnerable groups for HIV. The overall HIV prevalence in the country is low, cumulatively there are nearly 5,000 reported cases among a total of 3.8 million population. However, the newly reported cases are increasing steadily each year with a 30% increase in 2006-2007 period alone. In 2008, nearly 800 new HIV cases were registered. Among those HIV infected, 81% are between the age of 15 and 39 and 75% were through hetero-sexual transmission, with 44% being women. In 2001 there were 7 cases of pregnant women detected to be HIV positive. This number jumped to 83 cases in 2008. Despite the increasing epidemic, only 15% of people surveyed reported consistent condom use and 2/3 of respondents refused to work with a colleague with HIV in the same office. About 34% of workers were required to take an HIV test by their employers. Less than 4% of workers had taken part in any education programmes on HIV or AIDS at their workplace.

Namibia

Namibia has a generalized HIV epidemic, mainly through heterosexual transmission (MOHSS 2008a). The HIV prevalence among 15 to 49 year age group is 15%, of which 50% were women. About 20% of pregnant women were HIV positive¹ based on routine antenatal surveillance in 2006. The epidemic has cut across all sectors of society and is severely affecting the population. Life expectancy has declined in the past decade, from 61 years in 1991 to 49 years in 2001 (National Planning Commission 2003), and as many as 17 percent of children under the age of 18 are orphaned by at least one parent (NDHS 2006). While there are indications that the epidemic is stabilizing (MOHSS 2006), thousands more will become

¹ Source: UNAIDS country situation analysis, 2007.

infected over the next few years—barring major impact of HIV prevention efforts (MOHSS 2008). Approximately 204,000 individuals were living with HIV in Namibia in 2007. This number is predicted to increase to 247,000 by 2013 if prevention efforts remain at their current levels (MOHSS 2008). Evidence of the impact of HIV and AIDS in the workplace has not yet been documented nationally. However the epidemic threatens the world of work in many ways and negatively impacting the demand for, supply and quality of goods and services creating a mismatch between human resources and labour requirements.

Ukraine

It has one of the highest HIV prevalence in Europe. In 2008 alone, nearly 19,000 new HIV cases were registered with an incidence rate of approximately 41 per 100,000 and a mortality of 5.8 per 100,000, which is a 7% increase. The main mode of transmission is hetero-sexual at 42% followed by 37% from injecting drug use. Vertical transmission continues to claim newborns with 3,635 cases reported in 2008. With the support of the ILO/GTZ project, a new State Programme enacted by law of 19 February 2009 included workplace component covering the range of World of Work activities. HIV prevention was included in a General Agreement between the Cabinet of Ministries of Ukraine, All Ukrainian Employers Associations and Organizations, and All Ukrainian Trade Unions Associations and Organizations at regional and national levels. By now, approximately 200 enterprises, institutions or organizations have included HIV and AIDS in their collective bargaining agreements.

Overall progress within the context of the project

II.A Progress towards ILO's immediate objectives and indicators for Programme and Budget of 2008-09

Strategic objective 3: Enhance the coverage and effectiveness of social protection for all

Intermediate outcome 3d *Workplace policies respond to needs for HIV and AIDS prevention, treatment, care and support.*

Concerted efforts have been given in this project to build capacity of ILO tripartite constituents to be engaged in promoting HIV and AIDS prevention policies and impact mitigation programmes at workplaces in all four focus countries. Applying the ILO Code of Practice, it facilitated reduction of discriminatory employment practice on the basis of a person's HIV status at the work place.

Immediate outcome 3d1 *Increase tripartite constituent capacity to develop policies and programmes that address the HIV and AIDS epidemics in the world of work and within the framework of the promotion of decent work.*

Indicator for 3d1: *Number of Member States that integrate key principles of the ILO code of practice on HIV and AIDS and the world of work in their HIV and AIDS workplace policies*

- **Moldova** National AIDS Programme (2006-2010)
- **Namibia** National Strategic Plan on HIV/AIDS(MTPIV) 2010-2015
- **Ukraine** State Programme (2009-2013)

The implementation in Mali has been too short to result in policy changes. However, tripartite mechanism has been initiated for the work place HIV policies and programme as of September 2009.

Immediate outcome 3d3 *Increase the participation of employers' and workers' organizations in policy development and in accessing national and international funding*

Indicator for 3d3 *Number of member States in which employers' and/or workers' organizations actively participate in the drafting of national AIDS legal frameworks that integrate key principles of the ILO code of practice on HIV/AIDS and the world of work and in decision-making and delivery processes of national structures, including Global Fund Country Coordination Mechanisms*

-
- **Moldova** Ministry of Economics and Trade and the Confederation of Employers are represented in the Board of the National AIDS Council.
 - **Namibia** The Ministry of Labour and Social Welfare is indicated in the new Strategic Plan on HIV/AIDS (MTPIV) as having the mandate to coordinate the World of Work HIV/AIDS response at national level.

Note on progress

On Indicator for 3d1

- The Ministry of Economy and Trade of **Moldova** developed a workplace policy model on HIV and AIDS for implementation at local level, matching ILO recommendations and national context.
- As a result of the ILO/GTZ national legislation review on HIV and AIDS in the world of work, the Government of **Moldova** proposed amendments to the Labour Code to ensure HIV status is not the reason for discrimination at all stages of employment.
- A National Tripartite Memorandum of Understanding on the implementation of the ILO code of practice on HIV/AIDS in the workplace was signed by all social partners in **Namibia** on the 20th August 2009.
- The world of work component has been included in the new **Ukraine** State Programme of HIV prevention, treatment, care and support for PLHIV for 2009-2013.

On Indicator for 3d3:

- The project assisted the **Moldovan** Mid-term Review of the National AIDS Programme in 2008 and advocated for inclusion of ILO constituents among HIV and AIDS stakeholders.
- The **Moldovan** National Coordinating Council, as a result of this project's advocacy, approved in May 2009 the new members of the Board, including, as Government representative – Ministry of Economy and Trade, and as private sector representative – the Confederation of Employers from Moldova. Unfortunately it was not possible to include the trade union since the Global Fund regulations recommend limited seats for this sector on the CCM.
- During 2008-2009, the ILO/GTZ project provided assistance to **Moldovan** national partners to integrate the world of work policies on HIV and AIDS into the country's Round 9 application to the Global Fund- An evidence of implementing the co-financing mechanism.
- The HIV/AIDS workplace policies and programmes will be a component in the next National Strategic Plan 2010-2015 of **Namibia**.
- The **Namibian** Ministry of Labour and Social Services will be coordinating the national HIV/AIDS workplace responses with the inception of the new National Strategic Plan on HIV/AIDS.
- Social partners (trade unions) of **Ukraine** are members of the National Coordination Council on HIV, AIDS and TB.

Additional progress

Ukraine Education sector: Capacity of education sector workers of Chernivtsi oblast has been built through a series of training workshops as well as development and publication of information based on ILO Code of Practice. As a result HIV and AIDS issues have been included in the sectoral regional agreement concluded between the Regional Education Workers Union and the Regional Education Administration as well as in a number of collective agreements of educational institutions.

Ukraine Health sector: Capacity of health sector workers has been built in close collaboration with Health Workers' Union of Ukraine based on joint ILO/WHO Guidelines for Health Services as well as ILO Code of Practice. HIV and AIDS issue have been included in the National Sectoral Agreement.

Ukraine local tripartite cooperation: Capacity of the tripartite constituents at the three towns of Kyiv oblast has been built. An innovative model of local tripartite cooperation on HIV and AIDS involving also NGOs and mass media has been developed and is operational. All three local Coordination Councils have been

established and are functional. Both the health and the education sectors in these three localities have also been targeted to promote the development of workplace prevention policies and programmes.

Mali

The project aims to support Mali to make progress in achieving universal access in prevention, treatment, care and support of HIV/AIDS. It conforms with the UNAIDS directive for 2008-2012 and the UNDAF 2008-2012, as well as the National Strategy 2006-2010. It facilitates Mali's participation in the global agenda for HIV/AIDS control.

The project since its inception in June 2008 has held consultations with local and international entities such as: UNAIDS, UNDP, UNFPA, UNICEF, WHO, UNESCO, Mali National Council of Employers (CNPM), Mali National Workers' Union(UNTM), National Education and Cultural Union(SNEC), Youth Employment Promotion Agency(APEJ), the GTZ office in Mali, the United States Agency for International Development (USAID), the private sector association covering 50 enterprises, the National High Commission for AIDS Control (HCNLS), the Ministry of Labour, Civil Service and State Reform (MTFPRE), the Ministry of Employment and Professional Training (MEFP), and HIV focal points of Ministerial Departments of the Government.

Immediate objective To launch the project, create partnership and the necessary structure for project activities to improve visibility and resultant impact.

Partner: The United Nations System, the employers' and workers' organizations, the Ministries and institutions dealing with AIDS control.

1. Technical consultation on HIV

A technical consultation was held on 27 August 2008 to launch the ILO project on HIV prevention at workplace in Mali at the ILO Bamako office.

The **Immediate objective** of this activity was to inform and share the project document and initial workplan with stakeholders in HIV prevention and AIDS control and employers' and workers' organization to reach an agreed plan of action. The plan of action was concurred by ILO constituents.

Partner: ILO constituents.

2. Organize a capacity building workshop on project development for 27 HIV focal points of the Ministries, private sector association, Nation Union, Chamber of Commerce and Industry, Permanent Assembly of the Chamber of Agriculture, National Education and Cultural Union, The Federation of Workers' Union, and the Mali National workers' Union.

From 10th to 12th November 2008, the project conducted a technical training workshop with ILO constituents on the following:

- Project management
- Analysis of the strength and weakness of a project
- Identify possible adaptations or alternatives
- Identify a system for project operations
- Facilitate the formulation of proposals to mobilize additional financial resources from other donors for National AIDS response.

Thirty-eight people participated in this training workshop.

Activity partner HIV focal points of Ministries, private sector association (with 50 public and private enterprises) and workers' union.

Result of 2008 action plan

Immediate result Strengthen the capacity of ILO tripartite constituents in strategic planning and policy formulation on HIV and AIDS in the world of work.

3. On 18th March 2009, the project provided technical and financial support for a one day sensitization and behavioural change workshop at the Professional Training Centre of the Ministry of Employment and Professional Training with the objective of:

- Strengthen capacity of 100 youth (50 men and 50 women) on HIV prevention in general and negotiating use of male and female condoms.
- Promote voluntary HIV testing with individual, family and community.
- Engage 30% of youth conference participants to take their HIV testing voluntarily in a nearby centre and they were given the list of accredited HIV testing centres in Mali.

Over 100 youth and adults have taken part in training in collaboration with the Minister of Employment and Professional Training and the Minister of Basic Education, Literacy and National Language participated in the opening of the workshop.

Activity partner: The Training Centre of Ministry of Employment and Professional Training in Missabougou.

Results of 2009 work plan and activities:

Immediate result Strengthened the capacity of the professional training centres of the Ministry of Employment to reduce the HIV transmission in its population.

4. From 12 to 13 June 2009 the project conducted a training workshop for labour inspectors on HIV prevention in the work place so they could incorporate this consideration in their inspection function. The objectives are as follows :

- Inform on the pertinent international labour norms, in particular, on Convention number 111 concerning employment and professional discrimination, 1958 and applicable national legislations.
- Provide an indication of the level of knowledge among workers and managers about HIV and AIDS
- Integrate HIV issues in the occupational safety and health training in the work place
- Identify the violation or inadequacy in protection of workers' rights relating to HIV
- Improve the knowledge on AIDS treatment at workplace by conduct social impact and epidemiologic study.

Sixty labour inspectors at the national and regional levels have been trained

Partner of this activity: The Ministry of Labour, Civil Service, and State Reform at national and regional level.

Immediate result The labour inspector's capacity for HIV prevention has been strengthened for them to include this element in their inspection function.

II.B Progress towards DWCP immediate outcomes and priorities

At present **Mali** is not part of the DWCP. However discussions are in progress between the Government and the ILO sub-regional office in Dakar. The Project activities, however, have links with other projects and programmes of ILO.

The ILO/GTZ project and HIV activities are part of the **Moldova** DWCP for 2008-2011. ILO constituents had adopted and implemented OSH, HIV and AIDS workplace policies and programmes in partnership with national multi-sectoral bodies in accordance with the DWCP work plan. It is hoped, if successful, the Moldova application to the Global Fund Round 9 could further support the implementation of activities in the world of work after the end of this ILO/GTZ project.

HIV/AIDS has been indicated as a priority component in the DWCP for the period 2010-2013. The DWCP was finalized for adoption by the tripartite social partners through a validation workshop held on 19 August 2009 in **Namibia**.

The **Ukraine** DWCP included HIV specifically in *Outcome 3.1: Increased capacity of constituents to develop and implement policies and programmes on occupational safety and health and HIV/AIDS of Priority area 3 to improve the effectiveness of social protection policies, with special focus on vulnerable groups*. The ILO/GTZ Project contributed to achieving this outcome by building capacity of the constituents to address HIV and AIDS in the world of work and occupational safety and health. A study on impact of HIV and AIDS in the health sector has been conducted.

From 24 to 27 Novembre 2008, in a synergy between technical cooperation projects of ILO in Mali, the HIV project and the promotion of rural youth employment project and the employment promotion (PEJIMO) and poverty reduction project (APERP) is incorporating HIV prevention at the workplace.

The immediate objectives were

- Strengthen useful skills among youth to enable them to be retained in rural areas.
- Develop youth entrepreneur spirit.
- Learn and master the implementation and maintenance of rural work.

The HIV project coordinator introduced the following themes:

The definition of HIV and AIDS, the mechanism and evolution of HIV infection, the mode of HIV transmission, ways of prevention, support PLHIV, medical aspect and the ILO Code of practice. Approximately 60 people, including the mayor, villagers, advisors, members of cooperatives have taken part in this training to build their capacities.

Outcome: Strengthened capacity of youth and surrounding communities on HIV prevention at construction sites.

II.C Progress towards ILO common principles of action

Mali This project clearly contributed to the ILO common principles of action:

- Promote gender equality: Women, due to their biological, socio-cultural and economic factors are more at risk of HIV infection and more affected by HIV and AIDS. In addition, gender-based discrimination is prevalent in the society resulting in women having lower social status but more affected by HIV.

By using the collection of ILOAIDS guidelines and publications the project has built the capacity and sensitized for behavioural change. In addition, all the project activities have integrated gender considerations. Women are now motivated to take leadership in workshops.

- Social dialogue: The cooperation and trust between employer, workers and the government representatives as well as the active involvement of people infected and affected by HIV are necessary to have policy and programme success in countering the epidemics.

The project also promoted the tripartite constituents in all its HIV/AIDS activities in order to open a dialogue to develop a jointly agreed work plan. Since the start of the project, the ILO tripartite constituents have been invited to discuss and confirm a jointly agreed work plan for the project.

- The tripartism: government have to provide information and technical guidance to employers and workers and also efficiently set the legislation and regulations applicable on HIV/AIDS in the world of work.

The project, in partnership with its constituents has contributed to the analysis of existing legislation concerning HIV and AIDS in Mali.

Moldova The ILO/GTZ project in its capacity building and awareness raising activities promoted the ILO Code of Practice and Gender Equality principles through capacity building to empower women entrepreneurs in tackling HIV prevention in small and medium enterprise and ensured that ILOAIDS publications are translated and disseminated in the local language.

Namibia The ILO/GTZ capacity building activities emphasized and promulgated the importance of the *ILO code of practice on HIV/AIDS in the world of work* and followed a gender-sensitive approach. The National Tripartite Memorandum of Understanding on implementing HIV/AIDS workplace policies and programmes was build upon the ILO principles of tripartism and ensuring social dialogue amongst the social partners in Namibia.

Ukraine All of ILO/GTZ Project activities for constituents have been introduced to the International Labour Conference including informing the new recommendation on HIV and AIDS in the world of work. The Project has been collaborating with the National Tripartite Socio-Economic Council-an advisory body under the President of Ukraine to develop a National tripartite cooperation strategy on HIV and AIDS building on the principles of tripartism and social dialogue. Although political instability and crisis slowed down this endeavour, the tripartite constituents continue to collaborate with the ILO to make this strategy a reality. In cooperation with the ILO Social Dialogue Project in Ukraine, social dialogue has been included in the Project training in addition to gender issues.

III. Progress against project objectives/outcomes

EXPECTED IMPACT/ DEVELOPMENT	To contribute towards the goal of universal access by 2010 through enhanced World of Work engagement and partnership at the workplace.
Narrative assessment <u>Effectiveness</u> Mali 1) Participation in UNAIDS activities Elaborated joint HIV programme in the Mali One UN context. Also in the monthly UNAIDS meeting, provided support to national responses. In this regard, the coordinator has provided technical inputs for a costing study 2008-2009 with USD 100,000 PAF fund. The study consisted of the following: ➤ Support the three main directors and the coordinating capacity of the National High	

Commission for AIDS Control.

- Support the strengthening of national monitoring system.
- Support the dissemination of strategic information.
- Support World AIDS Day campaign.

Through these ILO/GTZ project activities, ILO has a visible role on HIV/AIDS in the United Nations System in Mali.

- 2) With the Project's focus on the Ministry of Labour, civil service and State reform and the Ministry of Employment and professional training and their structures, the private sector coalition and the workers unions have benefited from the capacity building in behavioural change and have instituted directive consistent with the ILO Code of Practice on HIV/AIDS in the world of work. The project presented the ILO code of practice and collection of reference materials gave ILO an unprecedented credibility in Mali.

Moldova

- 1) In 2009, ILO constituent, i.e. the Deputy Minister of Economy and Trade in charge of labour issues, and the President of the National Confederation of Employers were appointed to the National Coordination Council on TB, HIV and AIDS. The Project facilitated communication between ILO constituents and the Moldova Global Fund CCM Secretariat, which ensured inclusion of workplace HIV prevention in the country application to Round 9.
- 2) The result of the Project's compatibility analysis of the Moldovan national legislation in the world of work with the ILO and EU standards, the Moldovan Labour Code is being amended to ensure non-discrimination on the basis of HIV status.

Namibia

- 1) The project facilitated the establishment of the National Tripartite Memorandum of Understanding on implementing HIV/AIDS workplace policies and programmes which will eventually ensure compliance amongst social partners in Namibia.
- 2) The project assisted in incorporating the world of work component in the new National Strategic Plan on HIV/AIDS in Namibia.

Ukraine

The ILO/GTZ Project has effectively engaged the education and the health sectors in addition to decentralizing the tripartite model to three towns of Kyiv region. The major project achievements include the following:

- 1) ILO tripartite constituents, the United Nations and other social partners have adopted the system of training education workers on HIV in the educational institutions and for health workers to prevent occupational exposure to HIV as well as on non-discrimination and non-stigmatization, which are included in the new State Programme on HIV and AIDS, 2009-2013.
- 2) The Central Council of Education (trade union) and the Ministry of Education and Science have evaluated the Project favourably for its collaboration with both the Ukraine education workers' union and oblast Department of Education and Science (the state employer) in scaling up and decentralizing to 22 districts of Chernivtsi oblast on education sector training, proposal development and inclusion of HIV and AIDS related provisions in collective agreements in all regions and most schools of the oblast.
- 3) With support of ILO/GTZ project Canadian Embassy of Ukraine supported its partner NGO Association of Cities of Ukraine and Communities to implement the local tripartite model in one town of Kyiv oblast. It not only improved common understanding of HIV and AIDS issue

by the constituents and NGOs in the community but also stimulated the initiation of a Rehabilitation Centre for people living with HIV, drug and alcohol abuse.

- 4) The HIV and AIDS impact in health sector study conducted by this Project is the first such study covering workplace and occupational safety and health in the health sector.

Efficiency

The Project has achieved significant results in Moldova and Ukraine by efficiently maximizing the extremely limited resources allocated to each country through strategically designing well-targeted activities, selection of venues and mobilization of resources with partners.

In Namibia the project supported the Ministry of Labour and Social Welfare to align strategically with the National Plan on HIV/AIDS (2010-2011).

Relevance

Mali Through the different capacity building activities this project has assisted other technical partners in HIV prevention and AIDS control in Mali and specifically in promoting the comparative advantage of the work place. One entry point that could benefit from applying the Code of practice is for the next round of the Global Fund proposal by providing technical assistance in formulating the proposal to incorporate the work place component. Also the project could align with the national AIDS strategy to support the tripartite constituents.

Moldova The Project conducted a knowledge, attitude and practice survey on HIV and AIDS among employees from Moldova. The findings helped set priorities for future interventions on HIV in the world of work in Moldova and contributed to UNGASS reporting of Moldova. HIV intervention in the world of work has been considered for national planning and monitoring based on the Medium Term Evaluation of the National AIDS Program.

Namibia The project conducted baseline research to develop a targeted HIV and AIDS workplace programme for the Ministry of Labour and Social Welfare. It also supported a HIV/AIDS knowledge, attitude and practice survey, and an onsite VCT campaign for the employees of the Ministry of Labour.

Ukraine The Project interventions were in line with the National HIV and AIDS programme which contained workplace policy for various sectors and priorities identified by the tripartite national stakeholders for the DWCP – Ukraine for 2008-2011 signed in June 2008.

Sustainability

All activities were designed with sustainability at both national and local levels in mind by creating a tripartite mechanism and building capacities of the constituents while putting policies and programme in place.

Mali The project strengthened capacity of the ILO constituents (Ministry of Employment and Professional Training, Ministry of Labour, Civil Service and State Reform, Ministry of Foreign Affairs, the private sector coalition composed of 50 enterprises and unions through many trainings so they will be able to have sustainable knowledge to implement prevention, behavioural change and in HIV policy in each of their structures.

Moldova The project has trained members of private and public enterprises, Labour Inspection, National Employment Agency, and Global Compact Network representatives on HIV and AIDS related issues in the World of Works making them aware of the importance of establishing such policies and programmes.

Namibia The project focused on building the capacity of the Namibian Ministry of Labour and Social Welfare so the Ministerial staff could effectively develop and implement a HIV and AIDS workplace programme and coordinate the world of work response in Namibia

Ukraine Through training of trainers and during negotiations of collective agreements, with the Project's facilitation, skills and capacities of social partners have been built, resulting in establishing

HIV workplace policy for hospitals and educational institutions and three local coordinating councils for HIV in Kiev Oblast. The HIV provision in the world of work has been included in the national health sector tariff agreement concluded between health workers' union and Ministry of Health of Ukraine as well as in 18 regions of Ukraine including Crimea.

Partnership

Mali The important partners for the project are UNAIDS, the National High Commission on AIDS control (HCNLS), the Technical Ministries of the government and specifically the Ministry of Labour, Civil Service and Reform, the Ministry of Employment and Professional Training, the private sector coalition (with 50 private enterprises) and workers' unions (UNTM, CSTM) and Mali National Employers' Association.

Moldova Specific partnership have been built with private enterprises, Labour Inspection, National Employment Agency, Global Compact Network as well as representatives of NGO, media, health care workers to enable them to make direct contribution to Universal Access

Namibia A partnership has been established through contributing to the UN theme group on HIV and AIDS with UNDP to support public sector HIV and AIDS responses.

Ukraine Externally partnerships have been established through UNAIDS, Joint UN Team and Theme Group on AIDS with the United Nations system entities; and with bilateral donors such as GTZ, CIDA and Belgium Embassy in Ukraine. Within ILO cooperation has been strengthened with other ILO technical cooperation projects in Ukraine, namely Social Dialogue Project, IPEC programme and Migrant project.

Visible changes as a result of the ILO/GTZ Project

Mali This is the very first project on HIV in the work place for Mali. The social partners have visibly been motivated to adopt the *ILO code of practice on HIV/AIDS in the world of work*. The project also built capacities, disseminated ILO guides on HIV/AIDS which reoriented the partners in their policy and programme interventions in the world of work.

Moldova Prior to the ILO/GTZ Project, there was minimal HIV intervention for the work place. By the conclusion of this Project, at sectoral level there has been a clear recognition of the importance of tackling HIV and AIDS issue in the world of work. Although many private and public sector enterprises preferred informal policies, the Project assisted them to put HIV programme in place. The Romanian language translation and dissemination of ILOAIDS publications facilitated mobilization of national partners to adopt good practices. The Project specifically built capacities of partners in private enterprises, Labour Inspection, National Employment Agency, Global Compact Network as well as representatives of NGO, media, health care workers making direct contribution to Universal Access.

Namibia The Project engaged the Ministry of Labour and Social Welfare to lead its Ministerial workforce in reducing the impact of AIDS and to coordinate the world of work responses in Namibia.

Ukraine The Project contributed to improving understating that HIV and AIDS is a labour and social issue. By tackling the issue at both national and local levels, the ILO/GTZ project stimulated active engagement of constituents such as the trade unions, employers' organizations and associations, labour inspectors, State Occupational Safety and Health Department with its own Occupational Safety and Health inspection, the United Nations and other social partners. Training and local language translated publications are included in the State programme adopted by the Ukraine Parliament. The Law on HIV/ and AIDS prevention and social protection of population has now been amended taking into consideration gender issues. The new draft Labour Code of Ukraine now contains article on non-discrimination on the basis of real or perceived HIV status.

Mali Immediate Objective / Outcome No. 1	Mobilization and strengthened capacity of ILO constituents to prevent the spread of HIV in the world of work through a conducive policy framework and ability to access prevention, treatment and care services.
Outcome 1.1	Documents translated with the assistance of the ILO Dakar office for better dissemination. Progress: Documents translated and disseminated.
Outcome 1.2	Improved the coordination and implementation of activities with the recruitment of a national project coordinator. Progress: The national project coordinator and the assistant have been in place since June and September of 2008.
Outcome 1.3	Dissemination of the <i>ILO code of practice on HIV/AIDS in the world of work</i> . Progress: The <i>ILO code of practice on HIV/AIDS in the world of work</i> has been disseminated to social partners.
Outcome 1.4	The capacity of ILO constituents has been strengthened to support national strategic planning and formulation of policy on HIV and AIDS in the world of work. Progress: The technical Ministries for HIV prevention, the private sector coalition (consisted of 50 private enterprises), the employer, the union, the Chamber of Commerce and industry, the permanent assembly of agricultural chamber, the national education and cultural union, the federation of the workers' union, and also the Mali national union of workers have been trained on project cycle to facilitate their formulation of proposals for resource mobilization.
Outcome 1.5	Strengthened the capacity of inspector for labour and social security to integrate HIV and AIDS issues in their regulatory function, services and advice. Progress: The Ministry of Labour inspectors, for public function and for the State reform under the national and regional labour directorate have been trained on HIV prevention so they could include HIV and AIDS issues in their control, advice and sanction functions.
Outcome 1.6	Strengthened capacity of the Ministry of Employment for its professional training centre in order to reduce HIV transmission among its population and its neighbours. Progress: Young men and women have been sensitized on HIV prevention methods and AIDS in general and the negotiation of male and female condom use, voluntary counselling and testing of HIV for individual, family and communities. 30% of youth who participated in the training have taken HIV test voluntarily in a centre near them from the list of accredited VCT centres in Mali provided to them.
Mali Narrative Assessment	
<p>In the area of training for resource mobilization to support the development of Global Fund proposal, the social partners requested ILO to provide a second training where they could develop a proposal during the workshop and to submit a proposal to a potential donor in Mali. During this training all HIV focal point of the 27 government technical Ministries participated which increased ILO's visibility.</p> <p>The training of labour inspectors was opportune as majority of them were young women. Most participants were not familiar with the Convention 111 on workplace discrimination. It would be good if ILO could expand this training to the senior management of the Ministry of Labour. The text of Convention 111 has been distributed to all participants. The Ministry of Labour will include this information in its training of labour inspectors.</p>	

Moldova Immediate Objective / Outcome No. 1	Strengthened capacity of government and the social partners to make effective use of global finances for an increased involvement of the world of work towards reaching the goal of universal access.
Moldova Outcome 1.1	ILO/AIDS publications translated, edited, published and disseminated to national partners Progress: ILO Guidelines for the construction sector and HIV/AIDS translated, edited and distributed to national partners including the construction sector's National Federation of Trade Unions, the National Confederation of Employers, Labour Inspection and the Labour Institute. At the requests of partners, the ILO Code of Practice, ILO recommendations and other ILO/AIDS publication have been printed and disseminated.
Outcome 1.2	Capacity of labour inspectors strengthened to tackle the HIV/AIDS problem at the workplace Progress: labour inspectors from the North, South and Central region of Moldova trained on the Guidelines for Labour and Factory Inspectors on HIV and AIDS. Low cost awareness raising activities have been conducted and participants have been mobilized to promote HIV and AIDS workplace policies. Labour inspectors now have the capacity to reach local enterprises with information and to mobilize the enterprises for action.
Outcome 1.3	ILO constituents informed and mobilized to adopt and implement HIV workplace policies along with Occupational Safety and Health activities Progress: Trade unions and employers' representatives have been informed on Occupational Safety and Health, HIV and AIDS legal provisions and ILO/AIDS recommendations for implementation of HIV and AIDS workplace policies and on adoption of Occupational Safety and Health policies. Roundtables were organized with the Confederation of Trade Unions on Occupational Safety and Health Day with distribution of a two-page fact sheet on HIV prevention.
Outcome 1.4	Capacities of women entrepreneurs strengthened to adopt and implement HIV workplace policies Progress: A training module on HIV prevention for women entrepreneurs has been developed, piloted and integrated into regular business training programs for women. Modules of different length have been developed in consultation with the International Centre for Advancement of Women in Business and the ILO/AIDS Gender Focal point. A outdoor mobilization training on HIV and AIDS workplace policies have been conducted for 60 women entrepreneurs to empower and strengthen their capacity to tackle HIV issue in the families, at workplace, and in residential area.
<p>Moldova Narrative Assessment</p> <p>Labour inspectors participated in three workshops where ILO Guidelines for Labour Inspectors on HIV and AIDS in Romanian language was discussed and the participants defined their role in promoting HIV prevention. There is however, a need for further in-depth training for these labour inspectors.</p> <p>The Project promoted gender-balanced HIV workplace policies, ILO principles on gender relations and on empowering women in the world of work. Women entrepreneurs have been trained on HIV and AIDS workplace policies. The International Centre for Advancement of Women in Business (ICAWB) collaborated in the training for women entrepreneurs and will continue this type of training. ILO is developing different length of training modules on HIV in the workplace for women entrepreneurs to be used in future trainings.</p> <p>In 2009, project partners received 4,000 copies of ILO/AIDS resources. The Project raised general awareness and stimulated debate of the role of private sector, using TV talk show, publication of articles in media outlets, newsletters and websites to disseminate information of HIV and AIDS impact on national development, refer to www.aids.md, www.un.md, and www.ccm.md.</p>	

Ukraine	Improved coordination of activities through a National Project Coordinator
Outcome 1.1	Progress: All project activities are based on the work plan and the National Project Coordinator consulted and coordinated with national/sub-national partners in close consultation with ILO National Coordinator in Ukraine.
Outcome 1.2	State Programme on HIV prevention, treatment, care and support for people living with HIV includes world of work component and non-discrimination at work principle. Progress: tripartite constituents participated in the development of the State Programme on HIV prevention, treatment, care and support for people living with HIV. The Project provided inputs through the United Nations Joint Team on HIV and AIDS resulting in the inclusion of workplace activities in the new State Programme. The amendment of HIV and AIDS law on prevention and social protection of population removed a gender discriminatory article.
Outcome 1.3	Efforts have been taken to mobilize additional resources for involvement of ILO tripartite constituents in addressing HIV and AIDS at workplace Co-financing has been leveraged from national and sub-national partners and other ILO technical cooperation projects in Ukraine. Canadian Embassy in Ukraine is considering supporting the activities in Skvyra. Kyiv following an ILO PAF project. GTZ project on HIV/AIDS prevention at workplace in Ukraine is planning to conclude a MoU with ILO Ukraine.
Ukraine	Narrative Assessment
<p>Although the National Programme on HIV prevention, 2004-2008 contained provisions for the workplace but it was not budgeted thus not implemented. The 2009-2013 State programme now has budget allocation which would enable the implementation of the world of work component. In line with the Presidential decrees to strengthen education sector responses, the Project assisted in developing guidelines for teachers and building their capacities. The manual for education sector workers developed by the project will be reviewed for update by the Ministry of Education and Science. These actions were facilitated by the common objectives and division of labour in the context of UNAIDS and the Joint Team on HIV/AIDS. The success in engaging national/sub-national partners is evidenced by their readiness to contribute to project activities both in kind and in cash. The Skvyra, Kyiv is a local tripartite model currently under negotiation for CIDA funding. Three local Coordination Councils on HIV/AIDS have been established, however would benefit from further technical assistance. The Kyiv branch of the Association of Cities and Communities of Ukraine is a partner in pursuing the establishment of a Rehabilitation Centre for people living with HIV or suffering from alcohol and drug abuse. ILO and GTZ Ukraine are planning to sign a MOU for the implementation of the GTZ HIV in the workplace project in Ukraine. The Project collaborated and incorporated issues on social dialogue and child labour in its trainings.</p>	

Mali Immediate Objective / Outcome No. 2	Creation of an enabling workplace environment for people living with HIV or AIDS and those affected, in terms of non-discriminatory measures, prevention and access to treatment and care services.
Outcome 2.1	Establish a tripartite working group composed of focal points to review HIV related legislation. The tripartite group was established in September 2009 to review HIV legislation.
Outcome 2.2	Strengthened capacity of private enterprise health workers on the modern technique of post exposure prophylaxis. The private enterprise health workers became knowledgeable about the prevention techniques for accidental exposure to blood and were able to take the necessary actions in case of accidental exposure.
Outcome 2.3	Advocacy with women entrepreneurs to promote HIV prevention programme at the world of work and the association between HIV and migration. The HIV knowledge and capacity of private sector women's association leaders strengthened. The participants have been sensitized on the principles of HIV prevention and on developing strategies which integrate gender consideration and HIV with the formulation of action plan.
Outcome 2.4	Strengthened capacity of employers' organization and unions to support the enterprise to develop the policy and programme on HIV taking into account gender equality. Progress: The capacity of both employers and union leaders from different organizations have been strengthened on HIV and concrete plans developed with action plan and strategies which integrate gender considerations.
Mali Narrative Assessment In 2006, Mali has adopted the law relating to HIV prevention and control of AIDS. The project with the establishment of a tripartite group composed of focal points of ILO partners enforced the review of legislation to identify gaps and whether they conform to the international norms on human rights of PLHIV.	

Moldova Immediate Objective / Outcome No. 2	ILO constituents empowered and enabled to develop and implement workplace policies and programme to prevent the spread of HIV and AIDS and to mitigate its negative impact on socio-economic development.
Moldova Outcome 2.1 and 5.1	Capacities of medical workers strengthened to tackle the issue of HIV and AIDS and Occupational Safety and Health at their workplace
	Progress: Health care workers, including nurses, benefited from capacity building based on workshops organized by the Health Trade Unions and the National Nursing Association with assistance from the ILO/GTZ project. Over 2,000 copies of the ILO/WHO Guidelines for Health Services and HIV and AIDS in Romanian language were disseminated to health care workers in September 2009.
Outcome 3.1	Positive change in knowledge, attitudes and practices of Moldovan workers regarding HIV and AIDS
	Progress: Information leaflets about HIV and AIDS developed and approved by the Ministry of Health were reprinted and disseminated to employers' and workers' organizations, including during capacity building activities for project target groups.
Outcome 6.1	Capacity of ILO tripartite constituents from the transport and construction sectors strengthened in terms of HIV and AIDS work place programme development
	Progress: Training for the transport and construction sectors was conducted in September 2009 and raised awareness among ILO constituents to take action against HIV and AIDS. ILO publications on HIV and AIDS in transport and construction sectors have been distributed.
Moldova Narrative Assessment <p>The general population of Moldova have been increasingly affected by HIV. Health workers are in need of improved capacity on HIV, AIDS and occupational safety and health policies. Although national legal framework has instructions on HIV and AIDS management in health care institutions, over 800 participants to the ILO/GTZ workshops asserted that there has not been sufficient awareness raising and training to implement HIV and AIDS management policies in health care settings. Health care workers from rural areas of Moldova were introduced to the ILO/WHO Guidelines on Health Services and HIV/AIDS and provide their comments at the ILO/GTZ workshops. The workshop evaluation confirmed the usefulness of the ILO/WHO Guidelines. National partners and participants welcomed the assistance and the Romanian version of the Guidelines, which facilitated their future efforts in designing and implementing HIV/AIDS and OSH policies at their health institutions. The ILO/WHO guidelines have been provided to key medical educational institutions: National Nurses College, Moldova University of Medicine, Ministry of Health and Health Trade Unions.</p> <p>In addition, the ILO constituents from transport and construction sectors welcomed the ILO initiative on tackling the HIV epidemic in the world of work. Nevertheless, there is not enough mobilization for action on behalf of constituents to independently respond to the epidemic.</p>	
Ukraine Immediate objective/outcome 2	Strengthened capacity of OSH institutions to address HIV and AIDS in the context of occupational safety and health and in the context of workplace
Outcome 1.2	Progress: State Occupational Safety and Health Committee has been trained and developed the methodology to incorporate into their training centre curricula an HIV and AIDS section for OSH focal points from enterprises. An article on OSH and HIV has been published in the "labour Protection" magazine. The results from a pilot study on HIV and AIDS in the health sector of Ukraine was published in September 2009.

Outcome 1.3	Strengthened capacity of health workers to address HIV and AIDS in the context of their specific work place.
	Progress: The occupational safety and health and socio-economic impact study on health workers, patients and work environment has been disseminated through a workshop with health workers (particularly staff of emergency services) from all regions of Ukraine.
Outcome 1.4	Experiences in the implementation of work place programmes in the education sector are documented and disseminated
	Progress: Report on the experience of workplace programme in the education sector of Chernivtsi oblast has been prepared and served as a good practice for other regions of Ukraine. It has been published as a working paper and disseminated at a special national education sector workers' event in September 2009.
Outcome 2.3	Reprinting and further distribution of 500 copies of the ILO Code of Practice on HIV/AIDS and the World of Work in Ukrainian
	Progress: 1,000 copies of the ILO Code of Practice have been printed in Ukrainian and have been distributed among national and sub-national stakeholders.
Outcome 2.4	Booklet on ILO's HIV/AIDS related activities in the world of work in Ukraine is developed, published and distributed
	Progress: The booklet has been designed and published. It included ILO's approaches based on the ILO Code of Practice and achievements of ILO/GTZ project in Ukraine. Due to demand 3,500 copies were printed instead of planned 1,500.
Outcome 1.6	Sustainability of the project results is ensured.
	Progress: <ul style="list-style-type: none"> • All printed materials including ILO Code of Practice, report on education sector, Joint ILO/WHO Guidelines for Health Services on HIV/AIDS, report on the study in health sector have been distributed to constituents who will continue to use these reference materials after the completion of the project. • HIV/AIDS prevention in the education sector at Cherniytsi is being implemented based on the work plan involving most of educational institutions. • HIV/AIDS in the world of work is part of the sectoral agreements for the education and the health sector and part of the National General Agreement for 2008-2009 in addition to being part of many enterprise level collective agreements. It is also part of the State Programme on HIV/AIDS for 2009-2011. • Three local Coordination Councils on HIV/AIDS in the three pilot cities of Kyiv oblast have been established and are functional.

Ukraine Narrative Assessment

Prior to this Project and prior to 2009, the occupational safety and health sector did not cover HIV and AIDS. The Project launched activities in this sector and co-financed a joint workshop with the IPEC programme. The health sector impact study was the first such study in Ukraine and contributed new data and in initiating efforts to minimize risks of occupational exposure to HIV among health workers. It is recommended that such a study be conducted at the national level should there be resource to support it.

Joint ILO/WHO Guidelines played a very important role in capacity building of health workers. It equipped health workers with knowledge necessary to protect them at workplace. Inclusion of HIV/AIDS provisions in sectoral agreement can ensure sustainability of project activities in health sector.

Experience in education sector in Chernivtsi region is one of the projects' best practices in line with current national needs, new State programme, and Decrees of the President of Ukraine. Sustainability of these activities is ensured through the regional concept on HIV/AIDS prevention in the education sector of Chernivtsi oblast as well as through sharing this experience with other regions of Ukraine. Printed report on this work has been distributed to all regions of Ukraine.

All printed project materials received positive feed-back from project stakeholders especially the bilingual Modelling of Socio-economic Impact of HIV/AIDS in Ukraine. To have lasting impact, such Modelling should be regularly updated with future resource support.

Booklets on HIV/AIDS in the world of work and results of the Project have been widely distributed. ILO Code of Practice is the basis of the Project activities and remain the most relevant reference for Project partners,

Mali Immediate Objective / Outcome No. 3	To build capacity through information exchange and knowledge transfer on good practices in the world of work programmes with other countries in West Africa through the use of the existing ILO infrastructure in the region.
Outcome 3.1	Identify good practice in Mali and disseminate through ILO partners' focal points, national programme coordinators and social partners of ILO in West Africa. Progress: Defined the methodology for data collection and case identification. The focal points have been oriented and became familiar with the concept and criteria of good practice, promising experience contribute to reducing the epidemics and the good actions are disseminated through publications.

Mali Narrative assessment

The contacts and consultations with resource person or HIV focal points of 27 Technical Ministries of the government, the private enterprise who are members of the Coalition, the Mali National Council of Employer, the Mali national workers union, Mali Federation of workers Union (CSTM), the National Education and Cultural union (SNEC) were done and analysis of activities conducted. In order to ascertain the appropriate collection on work done related to ILO Code of Practice, it was necessary to have consultants use different criteria to determine what was relevant and what was not. Such distinction would enable one to differentiate what constituted good practice and what constituted promising practice.

The criteria of a good practice required quantifiable and qualifiable results, be transferable, based on evidence, has added value, be efficient and practical and the programme and system are functioning well currently. The criteria for a promising practice included the following: the success has yet to be proven, replicability not yet known, but endorsed by experts and being innovative.

Immediate Objective / Outcome No. 3	To build capacity through information exchange and knowledge transfer on good practices in World of Work programmes with other countries in Eastern Europe through the use of the existing ILO infrastructure in the region.
--	--

Moldova	Regional-level dissemination of the results of the national survey on Knowledge, Attitudes and Practices on HIV/AIDS among Moldovan workers
Outcome 4.1	Progress: The Moldovan knowledge, attitude and practice survey on HIV and AIDS conducted among employees in 2008 was presented at the 5 th European Conference on Clinical and Social research on AIDS and Drugs, in Vilnius, Lithuania, April 28-30 2009.
Outcome 7.1	National partners consulted on further priority interventions in the field of HIV/AIDS prevention at the workplace
	Progress: National partner consultation on priority interventions on HIV prevention at the workplace was held in September 2009.
Moldova	Narrative assessment
<p>The ILO/GTZ Project has been disseminating good practices on HIV prevention in the world of work with national partners. ILOAIDS publications, news and information about ILO interventions have been regularly placed on websites including on the national HIV/AIDS website www.aids.md for replication by professionals, civil society, and international partners. The National Coordinating Council newsletter monthly publishes results of the Project to share experiences among national counterpart (www.ccm.md). National partners from both the health and labour sectors such as the Centre for Preventive Medicine, National Employment Agency and the Labour Inspection have been encouraged to place their ILO/GTZ project experience on the website. The Project presented its experience at the third National Forum of NGOs working in the field of HIV/AIDS/STI prevention and Harm reduction in Chisinau on June 11, 2009 where the Romanian, Russian and English language documents have been further disseminated.</p>	
Ukraine	Efforts have been taken to share project developments and achievements with other national and international partners
Outcome 3.1	Progress: All reports, minutes and other information on the project have been sent regularly to ILO HQ and ILO sub-regional office and shared with national partners. The UN Joint Team on HIV/AIDS has been a useful forum for information sharing. The Project team held negotiations with GTZ, Canadian Embassy in Ukraine, Belgium Embassy in Ukraine and other international partners to provide the Project information and on resource mobilization.
Ukraine	Narrative assessment
<p>The Model of Socio-Economic Impact of HIV/AIDS in Ukraine has been published in two languages for dissemination both internally within Moldova, presented at national and UNAIDS organized events as well as in the Eastern European region and contributed to the Project's visibility. Project National Programme Coordinator is a member of the GTZ Moldova project steering committee and continues fruitful cooperation with GTZ in Ukraine. The ILO, UNAIDS and GTZ jointly developed a poster on HIV/AIDS at work targeting businesses. The Project maintained close contact with its counterpart in Moldova for mutual exchange of experiences and information sharing.</p>	

IV. Outputs obtained versus performance plan

Immediate Objective / Outcome No. 1 Mali		Mobilization and strengthened capacity of ILO constituents to prevent the spread of HIV in the world of work through a conducive policy framework and ability to access prevention, treatment and care services.	
Outputs		End of Project	Partner(s) Agency(ies)
Output 1.3	Target	500 copies of the <i>ILO Code of Practice on HIV/AIDS and the world of work</i> have been disseminated.	All 27 technical Ministries, representatives of employer and workers' organizations
	Actual	500 copies disseminated. (100%)	
Output 1.4	Target	The capacity to implement ILO Code of Practice strengthened to support national strategic planning and to elaborate HIV policy in the world of work.	
	Actual	38 representatives including focal point of technical Ministries, other social partners have taken part in this training workshop. (100%)	

Output 1.5	Target	60 inspectors of the Ministry of Labour of Public Works and Ministry of State Reform at the National and regional level include HIV prevention in their inspection, control, penalty and advice.	Ministry of Labour of Public Works and Ministry of State Reform
	Actual	60 Labour Inspectors from national and regional levels received training. (100%)	
Output 1.6	Target	Strengthen the capacity of 100 youth at the professional training centre of the Ministry of Employment on reducing HIV transmission in their communities.	Ministry of Labour of Public Works and Ministry of State Reform. Ministry of Employment and the Professional Training Centre
	Actual	50 men and 50 women have been sensitized on HIV and AIDS. 30% of these youth have taken their confidential HIV test voluntarily at testing centres near them and they have been given the list of available HIV testing centres in Mali. (100% sensitized and 30% from those have taken HIV test subsequently)	

Mali Narrative assessment

All the activities mentioned here are based on ILO's mandate in ensuring labour inspectors' competence relating to HIV and AIDS issues. However, due to resource limitations, it was not possible to scale-up the capacity of other partners who have also requested such assistance. The guidelines and other resource materials produced by ILO are fully utilized in the training modules.

Immediate Objective / Outcome No. 1		Strengthened capacity of government and the social partners to make effective use of global finance for an increased involvement of the world of work towards reaching the goal of Universal Access.	
Outputs		End of Project	Partner(s) Agency(ies)
Moldova Output 1.1.1	Target	2,000 copies of ILOAIDS publications disseminated to constituents and partners, including the ILO Guidelines for construction sector on HIV/AIDS	National partners
	Actual	2,000 copies disseminated as of September 2009. (100%)	
Output 1.2.1	Target	81 labour inspectors trained on the ILO Guidelines for factory and labour inspectors on HIV/AIDS on May 20, 26, 28, 2009	Labour Inspection
	Actual	81 labour inspectors trained and mobilized to take action against HIV and AIDS in the world of work (100%)	
Output 1.3	Target	Three roundtables on occupational safety and health Day and HIV/AIDS workplace action conducted	ILO National coordinator, Confederation of Trade Unions
	Actual	Three roundtables conducted in 2009 with 90 participants. (100%)	
Output 1.4	Target	Training module on HIV/AIDS prevention for women entrepreneurs developed and piloted	CMB Training Centre, ICAWB
	Actual	Finalized and suggested for regional sharing of experience. (100%)	
	Target	60 women entrepreneurs trained on HIV/AIDS workplace policies	
	Actual	64 women entrepreneurs and women-community leaders trained and mobilized to undertaken action on HIV prevention at the workplace. (106%)	

Moldova Narrative assessment

Besides 2,000 hard copies of the ILO COP and other ILOAIDS publications, national partners received these resources in electronic format. These publications are also available on the website. Constituents requested ILO COP on a regular

basis and it was distributed among their regional networks. The ILO/GTZ project provided national stakeholders with free HIV/AIDS leaflets and other reference materials for their further dissemination. In 2009, the ILO Guidelines for construction sector has been translated into Romanian to facilitate the mobilization of tripartite partners to adopt a sectoral policy on HIV prevention.

In labour inspectors training has strengthened 81 national labour inspectors' capacity in Northern, Central and Southern region of Moldova on May 20, 26, 28, 2009. Since the workshop, the participants have included HIV/AIDS education measures at work as part of the occupational safety and health training. On the occupational safety and health Day, 90 people participated at three roundtables to raise awareness on occupational safety and health and HIV prevention in the world of work. The ILO/GTZ project assisted the enterprise Union Fenosa on their occupational safety and health activities.

At the initiation of the International Centre for Advancement of Women in Business (ICAWB) from Moldova, the ILO/GTZ project developed different length of training modules on HIV prevention for women entrepreneurs. On July 10th 2009, in collaboration with ICAWB, The Project provided training to 64 women entrepreneurs on basic HIV/AIDS information and world of work HIV prevention policies based on ILO COP. Participants identified lack of top management commitment as one main barrier to implementation of HIV prevention policies. The training modules will be integrated into other training programmes for businesses. The modules have also been developed, piloted and disseminated at national level to interested stakeholders.

Outputs		End of Project	Partner(s) Agency(ies)
Ukraine Output 1.3	Target	2 training sessions for health workers with emphasis on gender.	Health worker union of Ukraine IPEC programme in Ukraine; Embassy of Canada in Ukraine; Health workers' union of Ukraine;
	Actual	1 training with IPEC, Ukraine programme co-financing. Canadian Embassy provided 89,000 UAH to implement the activities in Skvyra town; 2 trainings were conducted with co-financing from national partners.	

Ukraine Narrative assessment

In view of limited Project funding, national partners and other ILO TC projects in Ukraine contributed resources to ensure quality and effective delivery of activities. The Project assisted Kyiv regional branch of the Association of Cities of Ukraine and Communities in developing a successful proposal which received funding from Canadian Embassy of Ukraine to establish a local Coordination Council on HIV/AIDS in Skvyra town and a Rehabilitation Centre. Four training workshops covering 80 representatives from local authorities, employers, unions, private sector were conducted on HIV and the world of work.

Immediate Objective / Outcome No. 2 Mali		Creation of an enabling workplace environment for people living with HIV or AIDS and those affected, in terms of non-discriminatory measures, prevention and access to treatment and care services.	
Outputs		End of Project	Partner(s) Agency(ies)
Output 2.1	Target	Establish a tripartite working group composed of focal points and review legislations related to HIV.	ILO focal point, United Nations Systems agency, The National High Commission On AIDS Control, employer's organization and workers association.
	Actual	The tripartite group has been formed in September 2009.	
Output 2.2	Target	Strengthen capacity of 30 health workers from private health care and enterprise on HIV post exposure prophylaxis (PEP).	Private sector coalition and Ministry of Health
	Actual	30 health workers trained on PEP in September.	
Output 2.3	Target	Advocate with women entrepreneurs to establish HIV programme at the workplace and on the association between migration and HIV.	Private sector coalition
	Actual	40 women of the women's network of business (REFOE), Association of Women Engineers of Mali, and private enterprise have been sensitized on 13th August 2009 on HIV.	
Output 2.4	Target	To strengthen the employer's and union's capacity to develop HIV policy and programme taking into account equality between men and women.	Mali Federation of workers union and the Mali national Council of employers
	Actual	Gender consideration was integrated in the formulation of action plan and strategy through training.	

Immediate Objective / Outcome No. 2		ILO constituents empowered and enabled to develop and implement workplace policies and programme to prevent the spread of HIV and AIDS and to mitigate its negative impact on socio-economic development.	
Outputs		End of Project	Partner(s) Agency(ies)
Moldova Output 2.1.1	Target	200 health care workers trained on implementing the ILO/WHO Guidelines for health services and HIV/AIDS	Health Trade Unions, the Ministry of Health
	Actual	615 health care workers trained in 5 regions of Moldova trained (Chisinau, Ungheni, Balti, Soroaca, Hincesti) (307%)	
	Target	2000 copies of the ILO/WHO guidelines on health services and HIV/AIDS published and disseminated to health care workers	WHO, University of Medicine, Ministry of Health
	Actual	2000 copies have been published and distributed in 2009. (100%)	
Output 3.1	Target	2000 copies of leaflets containing basic HIV/AIDS information reprinted and disseminated to partners	All ILO partners
	Actual	2,000 distributed in 2009. (100%)	
Output 5.1.1, 5.1.2	Target	200 chief nurses trained on HIV/AIDS and occupational safety and health measures and policies in medical institutions.	Nursing Association from Moldova
	Actual	200 chief nurses trained from 4 regions of Moldova including rural areas (Edinet, Floresti, Straseni, and Calarasi) (100%)	
Output 6.1.1	Target	30 representatives from transport and construction	ILO tripartite partners from

		sectors mobilized and trained on HIV/AIDS workplace policies	construction and transport sectors
	Actual	30 representatives trained in September 2009. (100%)	
Moldova Narrative assessment			
<p>Six workshops were organized by the ILO/GTZ project in collaboration with the Trade Unions from Health sector to train health workers to implement the ILO/WHO Guidelines on health services and HIV/AIDS in Romanian language benefiting 615 health care workers.</p> <p>The University of Medicine, College of Medicine, Ministry of Health, Health Trade Unions and National Nursing Association received 2,000 copies of the ILO/WHO Guidelines in 2009. The Nursing Association from Moldova was particularly interested in implementing the ILO/WHO Guidelines in collaboration with the ILO. During 4 workshops outside Chisinau, more than 200 nurses have been trained on the Guidelines. In 2009, 800 copies of the ILO/WHO Guidelines in Romanian language have been distributed to members of this Association.</p>			
Ukraine Output 2.1	Target	Training of experts on occupational safety and health related to HIV.	
	Actual	26 experts of the Expert and Technical Centres of the State Occupational Safety and Health Committee have been trained on HIV/AIDS at work in the context of occupational safety and health. (100%)	State OSH committee
Output 2.1	Target	Training health workers on HIV in the context of occupational safety and health.	
	Actual	30 health workers (ambulance staff) have been trained on HIV/AIDS at work in the context of OSH. (100%)	State OSH committee
Output 2.2	Target	1000 copies of ILO Code of Practice in Ukrainian language disseminated.	
	Actual	1000 copies of ILO Code of Practice in Ukrainian language disseminated. (100%)	
Output 2.3	Target	1500 copies of the Booklet on HIV/AIDS and the world of work	
	Actual	3,500 copies of the Booklet of HIV/AIDS and the World of Work have been published (233%)	
Ukraine Narrative assessment			
<p>Printed materials are very much needed especially in rural areas where access to media and other sources of information is limited. The Project succeeded to print more copies of publications than planned originally from the same amount of resources.</p>			
Immediate Objective / Outcome No. 3 Mali		To build capacity through information exchange and knowledge transfer on good practices in the world of work programmes with other countries in West Africa through the use of the existing ILO infrastructure in the region.	
Output 3.1	Target	Identify good practice in AIDS control applying ILO's Code of Practice on HIV in the world of work approach and disseminate (publications) to all the social partners by September 2009.	Ministry of Employment and the Professional Training
	Actual	Identify good practices in Mali and disseminate through ILO focal points, coordinator of national programmes and social partners of ILO in West Africa.	
Immediate Objective / Outcome No. 3		To build capacity through information exchange and knowledge transfer on good practices in World of Work programmes with other countries in Eastern Europe through the use of the existing ILO infrastructure in the region.	

Moldova Outputs		End of Project	Partner(s) Agency(ies)
Output 4.1.1	Target	Successful poster presentation on Moldovan knowledge, attitude and practice survey at the 5 th European Conference on Clinical and Social Research on AIDS and Drugs	ILO Headquarters
	Actual	Completed in April 2009.	
Output 7.1.1.	Target	Project experience shared at national level, further interventions prioritized on HIV/AIDS action in the world of work	National Partners
	Actual	Completed in 2009.	
Output 1.5	Target	Disseminating information on HIV/AIDS impact on Child Labour on the occasion of June 12, 2009	Trade unions and Labour Institute
	Actual	30 participants informed on HIV/AIDS impact on child labour during a Roundtable on Corporate Social Responsibility and Child Labour for Trade Unions Representatives on July 11, 2009.	
	Target	National partners informed on HIV impact on the world of work and conducting HIV prevention activities for youth	Soros Moldova Foundation, AQA logistics, PAS Centre
	Actual	100 representatives of NGOs active in the field of HIV prevention received the ILO COP and a CD with ILO resources at the III National Forum of NGOs active in the field of HIV/AIDS/STI prevention on July 11, 2009 during a presentation on HIV prevention policies at the place of work	

Moldova Narrative assessment

The national survey on workers in Moldova was conducted in 2008 and presented at the 5th European Conference on Clinical and Social Research on AIDS and Drugs, held in Vilnius, on April 28-30 2009. Key findings were high stigma and discrimination towards PLHIV, medium level of knowledge about HIV and AIDS, low level of workplace HIV education among enterprises. On the International Day on Worst Forms of Child labour, the ILO/GTZ project collaborated with the Trade Unions with a roundtable on Corporate Social Responsibility relating to HIV impact on Child Labour. The Project made a presentation on June 11 2009 at the third National Forum of NGOs active in HIV/AIDS/STI prevention where 100 participants received the ILO COP and CDs with ILO resources in Romanian, Russian and English languages. On July 2nd, the Project coordinator participated in a TV talk show on "Migration and HIV/AIDS" covering discrimination of PLHIV in employment, including with mobile populations. The project publications are on www.aids.md and www.ccm.md and in the national newsletters to facilitate dissemination of ILO approach to tackling HIV in the word of work.

V. Problems/issues materially impairing the achievement of project objectives/outcomes, proposed solutions and actions taken or to be taken

A. Implementation	
Problem/Issues	Proposed solutions and action(s) taken or to be taken
Mali	<ul style="list-style-type: none"> The project began in July 2007 following the ILO/GTZ project agreement. However, the national Established the Institutional and operational arrangement of the project.

project coordinator was only recruited in June 2008 with administrative personnel in place in September 2008.

- The German Technical Cooperation did not account for the administrative delays for the start of the project by for ending the project in September 2009.
- The project was designed in Geneva thus did not reflect the specific needs and mandate of ILO in Mali. The project document ought to be elaborated based on the Mali's National AIDS Strategy of 2006-2010.
- The priorities for the Project were that of the GTZ. For better national support, it is preferable that the project document matched a defined Plan of Action and be consistent with the 2006-2010 National AIDS Strategy thus respond to the concerns of the country in containing the impact of the epidemics on socio-economic development. All the technical and financial partner interventions and support should be integrated with the National Strategic plan to ensure maximum results.
- The Project coordinator consulted partners to define its work plan following the development objective and the specific objectives of the project document. In view of the harsh terrain, it would be necessary to mobilize more resources to facilitate travel and participation for consultations.
- Each component of activity budget was too limited to mobilize the partners for the activities and for assuring visibility and impact.
- There was no project technical backstopping to allow a dynamic exchange in support of project implementation.
- To provide adequate financial resources for the project in order to achieve significant results. For instance a vehicle to facilitate project implementation.
- To provide project technical backstopping.

Moldova & Ukraine

- Lack of training for project staff in UNDP financial procedures and reporting.
 - Difficulties in implementation influenced by fluctuation between foreign currency exchange rate versus national currency and depreciation of Ukrainian hryvnya caused significant increase in project costs.
 - Absence of a Sub-regional Focal Point in Budapest office had an impact on project development, strategic planning and implementation.
 - Project budget very modest for delivering its objectives.
 - Trained project staff on basic financial, reporting procedure & formats (for example UNDP local, SRO financial department representative to visit and train project staff)
 - Reviewed activities and negotiated with implementing partners to reduce budgets or to receive partial support to implement project activities
 - To employ a Sub-regional Focal Point.
 - Mobilized in-kind and in-cash co-financing in some activities with partners.
-

Namibia

- Lack of office space and office equipment (telephone, e-mail, fax)
 - Project implementation started only in November 2008 thus reduced time for implementation of activities
 - Tremendous underestimation of country budget thus constrained implementation of work plan
 - Shortened implementation time thus not possible to complete all planned activities
- Project office has been assigned to ILO/TECL II project in March 2009 thus coordinator forced to work out of her own home by installing an ADSL telephone line at home for email and fax
 - The project advisory board revised the work plan in order to feasibly implement within the limit of budget and timeframe

B. Stakeholders, partners & implementing agencies**Problem/Issues****Proposed solutions and action(s) taken or to be taken**

Mali

The social partners are very motivated to work closely with this Project.

Moldova

- ILO constituents mobilized, but some private sector representatives still reluctant to independently carry out activities on HIV prevention
 - Informal HIV workplace policies are preferred to formal ones
 - Low commitment of Global Compact network in Moldova towards action on HIV/AIDS workplace policies
- The Project has been working on mobilizing private sector, however further capacity building including Training of Trainers and follow-up coaching are still needed.
 - Informal workplace policies & measures on HIV has been implemented as a result of this Project, however these were not integrated into existing official documents.
 - It has been a challenge to engage the Global Compact (GC) network as a whole despite efforts made to forge collaboration. On the other hand, the Project succeeded in engaging Global Compact member companies. It is suggested that ILO SRO or HQ Focal Point support the local initiatives to mobilize top Global Compact managers on HIV and AIDS workplace policies.

Namibia

- Social partners slow in making decisions thus retarded activity implementation
 - The limitation in resources and capacity of the Namibian Employers Federation and its poor relationship with the Namibian Business Coalition on AIDS negatively impacts private sector participation in the project
 - Union members lack capacity and resources to develop and implement HIV/AIDS workplace policies and programmes
- Strengthen the capacity of the Namibian Employers Federation and facilitate improvement of their relationship with private sector players
 - Advocate with union leaders to ensure sustained implementation of HIV/AIDS workplace policies and programmes

Ukraine

- | | |
|---|--|
| <ul style="list-style-type: none"> • Insufficient partner motivation due to lack of understanding the relevance of the HIV/AIDS as labour and social issue and limited project resources. • Partner staff turnover required repeated efforts to re-orient partners on ILO approaches to HIV/AIDS. | <ul style="list-style-type: none"> • The Project has devoted its efforts in increasing the motivation and understanding by national partners through training workshops, publications, etc. However, further investment for such engagement is required to gain traction. |
|---|--|

C. External factors (include particularly those external factors identified as being critical assumptions in the project document and/or emerging critical external factors)

Problem/Issues	Proposed solutions and action(s) taken or to be taken (If action necessary, identify person responsible)
----------------	--

Namibia

- | | |
|---|---|
| <ul style="list-style-type: none"> • No official office for project coordinator. • Late start of project with limited resources and time frame for full implementation of planned activities thus having to cut down the level of activities. | <p>The project advisory board revised the project workplan with reduced activities for implementation within the limiting parameters of the budget and timeframe.</p> |
|---|---|

Ukraine

- | | |
|---|---|
| <ul style="list-style-type: none"> • Difficult political situation and the impact of financial and economic crisis made implementation of some activities impossible or caused their delay. • Lack of statistical data on HIV/AIDS in the world of work in Ukraine (at least by sector of economy). | <ul style="list-style-type: none"> • Where possible the activities were conducted, some were postponed or reprogrammed. • Future resources needed to fill this information and knowledge gap. |
|---|---|

D. Other major issues/problems

Problem/Issues	Proposed solutions and action(s) taken or to be taken (If action necessary, identify person responsible)
----------------	--

None reported.

VI. Opportunities

Mali

1. Mali is very advanced in terms of HIV and AIDS responses. The government is very engaged with strong leadership commitment. Mali has received Global Fund Round 8 with two Principle recipients: The National High Commission in AIDS control and the Pivot group- an umbrella group of associations. It is potentially possible to advocate inclusion of the world of work as part of the beneficiaries of this grant.
2. The recruitment of consultants to support the formulation of a world of work component in the proposal for the next GF round would facilitate sustaining the efforts related to the world of work.

-
3. Resource mobilization with development banks such as World Bank MAP and the Islamic Development Bank could strengthen the achievement of the Project both for the ILO interventions and future projects relating to the world of work.

Moldova There are several opportunities for further intervention listed below:

1. Moldova received the Global Fund Round 6 grant. This grant included training for Trade Union representatives and engaging consultants to develop workplace policies for 5 large companies and allocated five small grants for implementation of such policies. AIDS Foundation East-West will start implementing these activities in 2010. However, the Ministry of Health decided not to announce open competition for new sub-recipients for the second phase thus ILO did not have a chance to apply for this grant.
2. The Moldova Global Fund Round 9 proposal included a world of work component focusing on strengthening capacities of the Labour Inspection.
3. The new GTZ project has been launched in the region although there were no activities in Moldova.
4. The national authorities planned to start working on the new State AIDS Programme, Operational National plan and the National AIDS Prevention Strategy in 2009. It would be crucial to advocate for inclusion of HIV policies and action at the workplace in all three documents.
5. European Commission Health Programme Funds could fund some projects in Moldova on health promotion at the workplace. Representatives of this program indicated that workplace policy projects are not yet covered and Moldova could apply as a partner within the EU Neighbourhood policy. Details on co-financing a project with ECHC should be further discussed with relevant ILO officers in charge (<http://ec.europa.eu/eahc/health/health.html>).
6. Romania-Ukraine-Moldova Cross Border Cooperation recently announced a call for proposal including education in professional organizations. It is suggested that ILO analyse the options for applying to conduct cross border activities for transport sector, for example between Moldova and Ukraine. http://www.ro-ua-md.net/index.php?page=PROGRAMME_ELIGIBLE_APPLICANTS.
7. After the conclusion of this Project, there are still efforts required on the part of ILO to further mobilize the national partners, particularly the Labour Inspection and the Employers' Confederation on HIV/AIDS workplace policies.

Namibia

1. There are multiple actors in the world of work thus required a coherent coordination by the Ministry of Labour and Social Welfare. The Ministry of Labour and Social Welfare, the Namibian Employers' Federation and the National Union of Namibian Workers have established a national tripartite committee which would be a subcommittee of the Labour Advisory Council (LAC). This LAC is mandated by the national Labour Act 2008 for its legitimacy and sustainability. A main role of the LAC is to lead the development and operationalization of a new national HIV Workplace policy. Social partners recommended establishing a HIV/AIDS unit in the Ministry of Labour and Social Welfare to ensure effective coordination of the world of work HIV response.

-
2. There is a National Code on HIV/AIDS which is only a guiding principle. The national HIV/AIDS policy, although mentioned workplace programme, is mainly a health-focused policy. There is a need to strengthen the aspect dealing with stigma, discrimination and other rights in this policy.
 3. A key extension of the tripartite committee would be to include civil society members, in particular, people living with HIV. The other important members are NABCOA and the Ministry of Health, both are willing to participate.
 4. There is a need to strengthen the capacity of the tripartite social partners. The Ministry of Health is encouraging the Ministry of Labour to engage in developing the new National Strategic Plan for HIV/AIDS (MTPIV) 2010-2015. The new MTPIV will include sectoral plans, where the Ministry of Labour and Social welfare could contribute. ILO has been asked to support the development of the labour component of the new plan.
 5. The GTZ/DED has been supporting the National Union of Namibian Workers (NUNW) till the end of September 2009. They will commit their own resources but may need co-financing.
 6. The Namibian Employers Federation has an occupational health specialist supported by GTZ fund. They would like co-financing to build capacity to carry out the HIV/AIDS activities.
 7. The Global Fund Round 2 and PEPFAR are the two main sources of external HIV fund. The country is applying for RCC Round 2 but Round 2 programme did not contain workplace component. It is hoped there may be possibility for sub-recipient ship. ILO does not qualify for PEPFAR fund as principle recipient but could partner with the 20 PEPFAR recognized implementing agencies in Namibia by submitting proposal for the 2010 work as a sub-recipient.
 8. Namibia plans to prepare a Global Fund Round 10 proposal which is an opportunity for ILO and its constituents to engage in the preparatory process and include a world of work component.

Ukraine The following are opportunities for ILO actions:

1. Based on the newly adopted State programme on HIV prevention, treatment, care and support of PLHA for 2009-2013, newly amended Law of Ukraine on HIV prevention and social protection of population and a number of Decrees of the President of Ukraine where education and health sector as workplaces are listed, many opportunities emerge at this stage to ensure implementation of these programme and legislative acts and further ILO interventions and assistance would be very much needed.
 2. In view of the new National Operational Plan for implementation of the State Programme on HIV prevention, treatment, care and support for PLHA for 2009-2013 there is a good chance to plan activities covering the world of work for the 5 years. This could contribute to Universal Access.
 3. The Chernivtsi oblast education sector model for HIV at workplace programme can be scaled up to other regions of Ukraine after the dissemination workshop in September 2009.
 4. The pilot study of HIV/AIDS in health sector demonstrated that there is a need to conduct such a study with national scale, should resources be made available. The study results were disseminated in September 2009.
 5. ILO negotiated with GTZ for areas of cooperation in order to conclude a Memorandum of Understanding.
-

-
6. The pilot of a de-centralized model in three towns of Kyiv oblast resulted in establishing a Rehabilitation Centre for people living with HIV, alcohol and drug abuse. This initiative needed further financial and technical inputs.
 7. Association of Cities of Ukraine and Communities, Health and Education Workers' Unions has been long term partners of ILO who could further expand the work should additional resources be made available.
 8. Explorations are under way to seek opportunities of PEPFAR fund.

VII. Lessons learned and emerging good practices

A. Improving the knowledge base

Mali The Project is promoting exchange of information and experience on policy, programme and interventions for HIV prevention in the world of work - the mandate of ILO in Mali. This activity will orient and familiarize the various focal points in HIV prevention and AIDS control on the concept and criteria of good practice and the experience and mandate of ILO in promoting and partnering in countering this epidemic. The good practices are being identified based on set criteria and the results will be disseminated in the form of a publication.

Moldova In 2008, the ILO/GTZ Project supported a national survey on HIV/AIDS knowledge, attitudes and practices among Moldovan employees. The findings have been translated into English. It is the first time such a survey has been conducted in Moldova. The findings served as a baseline for further ILO and other organizations to develop interventions in this area. For example, less than 4% of all respondents had taken part in any education activities on HIV/AIDS at their workplace.

Namibia The project conducted a HIV/AIDS knowledge, attitudes and practices survey amongst the Ministry of Labour and Social Welfare employees. The findings served as a baseline for the Ministerial HIV/AIDS workplace responses.

Ukraine The Project conducted the first study in the health sector as a workplace. The findings were relevant not only for health workers in Ukraine but also for the ILO and other national and international partners.

B. Strategies for thematic issues

Moldova

- **Private sector and Trade Unions** decision makers need further technical assistance. The occupational safety and health experts or enterprises medical workers have been mobilized but the bottleneck was to get approval from Heads of institutions on HIV workplace activities. In Moldova only 5 companies accepted to undertake HIV education and sustain these measures at their workplaces. Informal policies were more likely to be implemented than formal ones, which often remained on paper. Several private companies preferred informal approaches. Although tripartite negotiation on a workplace policy was recommended it was not always necessary to implement education or awareness raising activities.
- **Occupational Safety and Health** framework fitted with HIV/AIDS workplace policies in Moldova. Occupational safety and health officers and/or medical workers at the enterprise could combine both occupational safety and health and HIV/AIDS education for employees. The ILO/GTZ project has promoted the implementation of HIV/AIDS workplace policies along with

occupational safety and health policies at unit level. The Labour Inspection could receive further training to promote these initiatives.

- **Health sector workers**, especially those from rural area, welcomed ILO/GTZ initiatives. Over 800 medical workers were trained. The Round 8 Global Fund grant starting 2010 shall strengthen health care workers' capacities including distance learning at the University of Medicine. It is suggested that ILO develop a module on HIV/AIDS prevention policies for inclusion in the University curricula. It is under discussion with UNAIDS Moldova.

Namibia Transport, health, fishery and informal sectors are potential partners.

Ukraine

- **Education** There is a need for systematic capacity building of education sector workers, including not only teachers but also technical staff, given their potential in disseminating HIV related information.
- **Health** Health workers expressed concern of the unavailability of individual protection supply in addition to low awareness and understanding of social and labour aspects of HIV problem. There is a need to address stigma and discrimination of health workers as members of labour collective on the basis of real or perceived HIV status but also of patients on the part of health workers.
- **Occupational safety and health** There is potential for further strategic actions.

C. Capacity building and work with ILO partners

Mali The capacity building activities have been well-received by the private sector, the technical Ministries and the unions. However, it is unfortunate that there is a lack of consistent financial support for the activities which are priorities for both ILO mandate as for the country.

Moldova National partners appreciated ILO/GTZ assistance as necessary and supportive. They found, however, it is premature to expect them to take on the implementation independently and preferred to start as a partnership with ILO to build up their own capacities. Post training assessment was important. The post test questionnaire immediately after a training only measured short term effect. It is important to find ways to measure the longer term impact. However, 5 large companies from Moldova have now been implementing HIV/AIDS prevention and education activities.

Moldova is a low prevalence country, some national partners do not consider HIV as a priority. Consequently employers' representatives do not consider employee education necessary.

Government representatives from Moldova have been mobilized towards action on the world of work, though have insufficient number of specialists to fully engage with HIV/AIDS subject. Labour Inspection has been mobilized, though they found overwhelming to effectively undertake HIV prevention on top of an already long list of their Terms of References.

Strengthening civil society capacities can ensure longer term resources for sustainability because major donors, including the Global Fund preferred to disburse funds to NGOs for implementation. The ILO/GTZ Project collaborated with non-profit sector. A good example was with the CMB Training Centre (<http://www.cmb.md/en/37-hiv-aids-policies.html>). The organization hosted the ILO/GTZ experience on their website. Partnership was also developed with the International Centre for Promoting of Women in Business in Moldova.

Namibia The project has been operational for only 7 months, too short to build sustained knowledge transfer from capacity building. The Namibian tripartite partners are now cognizant of the role they could play in the National HIV/AIDS responses but lacked requisite resources and capacity to fulfil these obligations. The Ministry of Labour and Social Welfare, the Namibian Employers Federation and the National Union of Namibian Workers requested further assistance from the ILO to ensure knowledge and institutional capacity building.

Ukraine Partners' interest was a precondition for successful Project implementation. Partners did not fully realize their role and potential in addressing HIV/AIDS at workplace. Instability – political, economic and social – was an additional challenge. It was difficult at the start of the Project to convince partners. However, with time and systematic efforts this process was getting results although not quite 100 % of partners were convinced of the necessity to tackle HIV/AIDS in the world of work.

D. Mainstreaming successful approaches and achieving sustainability of impact

Moldova

- The capacity building methods employed by the ILO/GTZ Project could be replicated focusing on participants in the future as facilitators have been trained by now. Details on the training reports and techniques applied are available at <http://www.cmb.md/en/37-hiv-aids-policies.html>.
- Alternative training approaches, such as outdoor trainings, training for company's representatives and their families have been successful with lasting impact on partner's commitment to the subject.
- Sharing the Project experience regionally in Eastern Europe inspires Moldovan national partners to the possibility of the type of results achieved by Ukrainian counterparts thus motivated them to take actions.
- Promoted mainstreaming of HIV workplace policies into occupational safety and health programmes at national, sectoral and unit levels. Continued collaboration with Labour Inspection, Health Trade Unions, and the medical units of large enterprises.
- Trade Unions youth leaders, non-governmental organizations, and the Global Compact network companies need additional capacity building on HIV/AIDS impact and policies in the world of work focusing on their role in achieving sustainable outcomes.

Namibia The project facilitated the ILO constituents in defining their roles and responsibilities in the world of work component in the National Strategic Plan on HIV/AIDS (2010-2015).

Ukraine Major lessons learnt was that motivation and interests of partners were paramount in ensuring Project sustainability. It required consultations with and approval of the tripartite constituents before the inclusion of workplace component in the State Programme on HIV prevention for 2009-2013. For the first time in the country, now this component has been budgeted for the Ministry of Labour and Social Policy of Ukraine to implement some of the workplace activities.

E. Other lessons not covered above – For example, implementation issues and operational modalities, etc.).

None reported.