

## **MEMORANDUM OF UNDERSTANDING**

**This Memorandum of Understanding (MoU) signed on  
26<sup>th</sup> day of December, 2017**

**Between**

**Ministry of Labour and Employment**

**&**

**National AIDS Control Organization**

**Ministry of Health & Family Welfare**

**Government of India**

*Signature*

## **Introduction**

India has the third largest number of people living with HIV/AIDS in the world. Given the prevalence rate of 0.26 percent, around 21 lakh people are estimated to be living with HIV/AIDS in the country. HIV is driven by a number of socio-economic factors; therefore, health interventions alone are not sufficient to address causes and consequences of the epidemic. It requires a multi-sectoral response. Mainstreaming approaches to HIV have increasingly gained ground with the realization that the non-health sector can play an important and meaningful role in reducing vulnerability to HIV and mitigating its impact on those infected and affected.

National AIDS Control Organisation (NACO), Ministry of Health and Family Welfare and Ministry of Labour & Employment are hereinafter referred to together as "the parties"

## **Article 1**

### **1 NATIONAL AIDS CONTROL ORGANIZATION**

- 1.1** National AIDS Control Organization (NACO) is the nodal agency for coordinating response with respect to Human Immunodeficiency Virus (HIV) and Acquired Immunodeficiency Syndrome (AIDS) in India. Department of AIDS Control has initiated several measures towards mainstreaming and partnership with relevant Ministries.
- 1.2** The National AIDS Control Programme (NACP) is implemented through 38 State AIDS Control Societies (SACS)/Municipal AIDS Control Societies in States and Union Territories. NACP places importance for mainstreaming HIV/AIDS by a) enhancing coverage and reach by information on STI/HIV prevention and services b) Integrating services through existing health infrastructure available in Ministries/Departments and Public Sector Undertakings (PSUs) and c)


facilitating social entitlements for social protection of people infected and affected with HIV/AIDS.

## **Article 2**

### **2 MINISTRY OF LABOUR & EMPLOYMENT (MOLE)**

- 2.1** The Ministry of Labour & Employment's mandate inter-alia is to work towards improving the working conditions and quality of life of workers, and ensuring occupational health and safety of labour force. The Ministry also seeks to promote the welfare of workers and provide social security to the workers both in organized and unorganized sectors. The Ministry achieves this through enactment of various labour laws, which regulate terms and conditions of service and employment of workers. It has prestigious Autonomous Institutions and organizations like VV Giri Labour Institute (VVGLI), Central Board of Workers Education (CBWE), and Office of the Chief Labour Commissioner, Employees' State Insurance Scheme (ESIC), and Employees' Provident Fund (EPF) etc attached to it.
- 2.2** The Ministry also has several divisions under looking at various issues of labour force like Child Labour, Women Labour, Industrial Safety and Health, Industrial Relationship etc. The Ministry has been proactively involved in Government of India efforts on HIV/AIDS prevention and mitigation of its impact through care & support to infected and affected population particularly in the world of work through some of initiatives taken by the Ministry.

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### Article 3

#### 3 RATIONALE FOR MAINSTREAMING HIV

- 3.1** The epidemic in the country is changing according to emerging vulnerability factors related to poverty, migration, marginalization and gender. These vulnerabilities are often the cause or consequences of nature, duration or location of livelihood. Thus, the world of work has the responsibility to address them through their policies and programmes.
- 3.2** HIV/AIDS is a major threat to the world of work. It has shown maximum impact on the most productive segment of labour force. As per HSS 2011 report, 86% of those infected are in the age group of 15 to 49 years. This age group is one of the most productive segments of the society irrespective of the sectors, in which, they are engaged. It affects the business growth because of loss of skilled workers, absenteeism due to prolong illness, increase in health expenditure as well as prevalent stigma and discrimination at workplace setting.
- 3.3** As per the NSSO Report 2009-10, the total employment in both the organized and unorganized sector in the country has been of the order of 46.5 crore. Out of this, about 43.7 crore were engaged in the unorganized sector. Unorganized sector plays a critical role in the economy and livelihood of the people, mostly migrants. The unorganized sector is characterized by the lack of labour law coverage, seasonal and temporary nature of occupations, high labour mobility, dispersed functioning of operations, casualization of labour, lack of organizational support, low bargaining power, etc. all of which make them vulnerable to socio-economic hardships. Thus it becomes extremely important to have a strategic initiative for informal workers including migrants at both source and destination. They are more vulnerable to HIV.

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**3.4** Given the significant differences in labor-market conditions across the different regions, size and nature of India's migration presents a number of challenges. There is increasing evidence and growing recognition on role of migration/mobility in the spread of HIV infection<sup>1</sup> in India. Migration complicates the HIV epidemic by creating living conditions that heighten engagement in risky and by providing a vehicle through which infection can move from high to low epidemic regions. Evidence from Sentinel Surveillance clearly substantiates this.

#### **Article 4**

#### **4 SCOPE FOR MAINSTREAMING HIV**

**4.1** The MOLE being the nodal ministry for workplace has immense opportunity for addressing HIV/AIDS through its number of policies and programme.

**4.2** "National Policy on HIV/AIDS and World of Work" has been implemented by Ministry of Labour and Employment with the support of NACO & International Labour Organisation (ILO) in 2009. A National Steering Committee (NSC) has been set up for reviewing the implementation of the policy. The policy stresses on non-discriminatory work environment for workers living with HIV and AIDS, protection of the workforce from HIV ensuring optimum care & support to people infected and affected by HIV and mitigating its social and economic impact. Given the large canvass of world of work in India, scaling up the implementation of this policy would go a long way in contributing towards NACP.

**4.3** Working closely with employers and workers organizations, ILO and NACO, the Ministry of Labour and Employment is engaged in two

<sup>1</sup>Saggurti, Niranjan et al. 2008. "HIV risk behaviors among contracted and non-contracted male migrant workers in India: Potential role of labour contractors and contractual systems in HIV prevention."

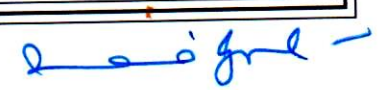


major initiatives “the Getting to Zero at Work Campaign” and “the Voluntary Counseling and Testing for workers (VCT@WORK) in India.

**4.4** Ministry of Labour and Employment also has number of autonomous bodies and affiliated institutions which can contribute significantly to NACP through mainstreaming HIV in their agenda. For instance

- Inclusion of HIV/AIDS awareness program in the curriculum in all trainings throughout the country. E.g. Directorate General of Employment and Training (DGET).
- Capacity building and creation of a pool of resource persons for workplaces in unorganized sectors through Central Board of Workers Education (CBWE), VV Giri National Labour Institute (VVGNI).
- Integration of HIV/AIDS throughout the health infrastructure available through Dispensaries and Hospitals of ESIC in the health infrastructure: ESIC, and labour welfare.
- Facilitating access of workers living with HIV to social protection schemes
- Engage with Labour Unions for contacting workforce in both organized and unorganized sector.

**4.5** Now, therefore, in consideration of the foregoing rationale and scope, the parties Ministry of Labour & Employment and National AIDS Control Organization, Ministry of Health & Family Welfare have mutually agreed to cooperate and collaborate in the overall goal of Ending AIDS epidemic by 2030.



## Article 5

### 5 OBJECTIVE OF MOU

- 5.1 Reaching out to the large number of working population both in organized and unorganized sectors with information on STI/HIV/AIDS and related services, particularly HIV testing under the VCT@WORK and treatment of workers living with HIV.
- 5.2 Providing package of Integrated Counseling and Testing Centre (ICTC) /Sexually Transmitted Infections (STI)/HIV services through integration in existing health infrastructure
- 5.3 Mobilization of various key stakeholders like Employer Organizations, trade unions, and industries of public and private sector for HIV/AIDS intervention as suggested in National Policy on HIV/AIDS and the world of work adopted by MOLE.

## Article 6

### 6 AREAS OF WORK

- 6.1 Build capacity of the training institutions under Ministry of Labour and Employment to help better understand issues relating to AIDS and Tuberculosis that can affect the well-being of workers and impact productivity.
- 6.2 Review the existing guidelines and various schemes & Acts related to labour welfare for making it HIV sensitive.
- 6.3 Mobilize employers' and workers' organisations, large public and private sector companies to engage in HIV/AIDS and TB programme and expand public private partnerships.



**6.4** Share national protocols and guidelines pertaining to testing and treatment of STI/HIV/AIDS.

**6.5** Scale up work on reducing stigma and discrimination against workers living with HIV under the Getting to zero at Work campaign.

#### **Article 7**

##### **7.1 ROLE OF MINISTRY OF LABOUR & EMPLOYMENT**

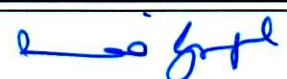
**7.1** Issue directives to all Department of Labour offices, to depute a nodal officer for HIV/AIDS and TB in State and Union Territories to carry out HIV/AIDS and TB work for implementation of national policy.

**7.2** Bring on board all stakeholders- Employer Organisations, Central Trade Unions and other relevant partners etc. to engage in or carry out interventions on HIV/AIDS, Tuberculosis and issues affecting well-being of workers, with a particular focus on workers engaged in the unorganized sector.

**7.3** Integration/expansion of services related to STI/HIV/AIDS in the existing health infrastructure of Department of Labour like Employees State Insurance Corporation hospital and dispensaries in all States and UTs.

**7.4** Scaling up HIV/AIDS/TB in the training programmes of Ministry of Labour and Employment institutions.

**7.5** Reflect activities on HIV/AIDS and TB carried out by Ministry of Labour and Employment and its institutions in Annual Report and Ministry's website.





## **7.2 ROLE OF NATIONAL AIDS CONTROL ORGANIZATION**

- 7.2.1** Provide technical support and assistance to Ministry and State Labour Departments, Employer Organization, Trade Unions through State AIDS Control Societies for capacity building and other key activities on HIV/AIDS prevention.
- 7.2.2** Provide support for implementation of scaling up the VCT@WORK Initiative and getting to Zero@Work campaign.
- 7.2.3** Provide support for awareness generation among labour workforce including migrants in formal and informal settings.
- 7.2.4** Share appropriate communication materials and training modules on prevention of HIV for working population with autonomous and affiliated institutions, State Labour Departments, employer organizations and trade unions., which can be replicated.
- 7.2.5** Encourage the State AIDS Societies for strengthening partnership with Department of Labour, Employers organizations, Trade Unions, Private Sector and PLHIV for HIV prevention in key prevalent sectors.

### **Article 8**

#### **8 EXECUTION OF MOU**

- 8.1** Parties will set up a joint working group for drawing up an action plan.
- 8.2** Parties would decide the modalities for execution of the proposal contained in the MOU based on the recommendations of the Joint Working group. ILO can be part of Joint Working group as technical experts.

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**8.3** Parties agree to collaborate and work closely for fulfillment of objectives set in the MOU.

**8.4** Both the parties would consult each other and review the progress for implementing objectives of this MOU on a biannual basis.

**8.5** This MOU will be operative with effect from the date 26<sup>th</sup> December, 2017 and any alteration / modifications can be carried out with the consent of both parties.

**8.6** The Joint Working Group will align its working to the overarching framework of National Policy on HIV/AIDS and World of Work.

The parties herein have appended their respective signatures the day and the year above stated.

**SIGNED FOR AND ON BEHALF OF  
NATIONAL AIDS CONTROL  
ORGANIZATION, MINISTRY OF HEALTH  
& FAMILY WELFARE**



**SHRI ALOK SAXENA  
JOINT SECRETARY  
MINISTRY OF HEALTH AND FAMILY  
WELFARE  
GOVERNMENT OF INDIA**

**DATED – 26<sup>TH</sup> December, 2017**

**SIGNED FOR AND ON BEHALF OF  
MINISTRY OF LABOUR EMPLOYMENT**



**SHRI MANISH GUPTA  
JOINT SECRETARY  
MINISTRY OF LABOUR & EMPLOYMENT  
GOVERNMENT OF INDIA**

**DATED – 26<sup>TH</sup> DECEMBER, 2017**

## List of Acronyms

AIDS	Acquired Immunodeficiency Syndrome
AIOE	All India Organisation of Employers'
AITUC	All India Trade Union Congress
ART	Antiretroviral Therapy
ASSOCHAM	Associated Chambers of Commerce and Industry of India
BMS	Bharatiya Mazdoor Sangh
CBWE	Central Board of Worker Education
CII	Confederation of Indian Industry
CITU	Centre of Indian Trade Union
ESIC	Employees' State Insurance Corporation
FICCI	Federation of Indian Chambers of Commerce and Industry
HIV	Human Immunodeficiency Virus
HMS	Hind Mazdoor Sabha
HRG	High Risk Group
HSS	HIV Sentinel Surveillance
ICTCs	Integrated Counselling and Testing Centres
IDUs	Injecting drug users
IEC	Information, Education & Communication
ILO	International Labour Organisation
INTUC	Indian National Trade Union Congress
MOLE	Ministry of Labour and Employment
NACO	National AIDS Control Organisation
NACP	National AIDS Control Programme
PLHA	People Living with HIV/AIDS
PPTCT	Prevention of Parent to Child Transmission
PSU	Public Sector Undertaking
RSBY	Rashtriya Swasthya Bima Yojana
SACS	State AIDS Control Societies
STI	Sexually transmitted infection
UT	Union Territory

