

# Situational Analysis on the National Workplace Response on HIV and AIDS

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## **Abstract**

Commissioned by the International Labour Organisation and in partnership with the Health Control Division of the Occupational Safety and Health Center and the Interagency Committee on HIV and AIDS in the Workplace

People within the most productive ages of 15 to 34 years old, the peak of productivity, make up majority of new HIV infections. The health, economic and social impact originating from the individual to the community to the national level is undeniable. While the role of the workplace in responding to the epidemic rise of HIV and AIDS in the Philippines has been regarded as a key intervention strategy for many years, its role in the national response has yet to be fully harnessed for the full benefits to be realized.

Study findings were based on the conduct of desk reviews, case studies, focus interviews and focus group discussions over a three-week period. Subjects included representatives from the National Government Agencies, particularly the Department of Labor and Employment, and the Department of Health; Local Government Units in Metro Manila, specifically those heading HIV responses and based in City Health Offices; employers' and workers' groups, specifically those that constitute the Tripartite Partners in the labor sector; and, non-government organizations of persons with HIV and corporate foundations.

The workplace actors, under the leadership of DOLE, have staged several workplace-based interventions in the past. While DOLE's programs concerning HIV are mainstreamed, employers and workers generally have a more challenging time sustaining their respective workplace-based interventions. The challenges involve factors such as the availability of annual budget to implement interventions, continuous availability of staff for trainings and consultations, and the lack of an effective and accountable referral mechanism which is critical when more information or aftercare may be required by workplace actors.

The policies most relevant to the workplace were reviewed. These include: 1. RA 8504 (Philippine AIDS Prevention and Control Act of 1998) 2. PNAC Resolution No. 1 (Rules and Regulations Implementing the Philippine AIDS Prevention and Control Act of 1998, RA 8504) 3. DOLE D.O. 102-10 (Guidelines for the Implementation of HIV and AIDS Prevention and Control in the Workplace Program) 4. DOLE D.O. 56-03 (Rationalizing the Implementation of Family Welfare Program in DOLE).

Policy-wise, higher level concerns, most especially those concerning stigma and discrimination of workers for any nature of work and in any workplace setting, thoroughly reflect international standards. The greater gap is found in implementation, and the root cause is policy. With Republic Act No. 7160 (Local Government Code) of 1991, the National Government Agencies (NGA) have taken a more developmental and recommendatory approach; the regulatory function has shifted to the Local Government Units (LGU).

Department of Interior and Local Government (DILG) Memorandum Circulars 99-233 (HIV and AIDS Education in Communities and Related Concerns), and 2013-29 (Strengthening Local Responses Toward More Effective and Sustained Responses to HIV and AIDS) in no way requires but rather “enjoins” LGUs to adopt the recommendations contained therein.

For the workplace to make an impactful contribution to the National HIV and AIDS Response, the DOLE and other workplace actors should find innovative ways to link up with LGUs. In addition, the existing efforts of non-government organizations in reaching more workers and employees also provide opportunities to implement meaningful workplace interventions. Together, the traditional and non-traditional workplace actors should determine better ways to collaborate and enhance the sustainability of workplace-based interventions for HIV and AIDS.