



Canadian Labour Congress
Congrès du travail du Canada



African & Canadian unions take the lead on AIDS

Canadian Embassy Campaign: G8/G20 & Universal Access

Information Backgrounder

From March 21-27 2010, trade unions and civil society organizations throughout the world will target Canadian Embassies in their countries. The campaign is launched in an effort to put pressure on Canadian Prime Minister Stephen Harper to lead the G8 in producing a concrete plan to achieve ***Universal Access to HIV & AIDS Prevention, Treatment, Care and Support*** at the upcoming G8 and G20 Summit Meetings in Ontario, Canada.

As leader of the host country, Prime Minister Harper will preside over the G8 Summit in Huntsville, June 25-26 and co-host the G20 Summit with South Korea in Toronto, June 26-27. He will be well positioned to shape the agendas of both Summits and, in particular, to reinvigorate the G8's past promises on HIV and AIDS.

The African Regional Organization of the International Trade Union Confederation (ITUC-Africa) and the Canadian Labour Congress (CLC) have issued a call on universal access, twinning embassy actions in Africa with an internal lobby in Canada¹. The Global Union AIDS Programme (GUAP) and the Global ITUC have also called on their respective members to engage in similar embassy actions in their own countries to broaden the scope of the campaign beyond Africa.

All lobbying will take place as part of a **Week of Action (March 21-27, 2010)** immediately in advance of the G8 Foreign Ministers' meeting scheduled for March 29-30, 2010 in Ottawa, Canada.

The embassy lobby outside Canada

Our lobby targets Canadian Embassies or Consulates, and highlights the G8's failure to fulfill its promise to achieve universal access to HIV and AIDS services by 2010. It demands a concrete, time-bound plan of action to ensure delivery. It also urges the G20 to ensure that economic recovery strategies recognize the financial consequences of the global HIV and AIDS pandemic and their connection to poverty and other development issues like education, gender, food security, water and climate change.

¹ The action is derived from a Partnership Agreement between ITUC-Africa and the CLC to jointly address HIV/AIDS issues, world-wide. In Canada, corresponding G8/G20 activities will be organized by the Canadian Union of Public Employees (CUPE), Canadian Federation of Nurses Unions (CFNU), Public Service Alliance of Canada (PSAC), National Union of Public and General Employees (NUPGE), and other civil society allies.

Unions insist that universal access goals are critical to social and economic stability as the vast majority of people living with HIV and AIDS are of working age (15 – 50 years). As such, HIV and AIDS is a workplace issue; it affects workers and their families, the enterprises and agencies they work for, and the delivery of public services that depend on them (see Appendix A for more information on the trade unions concern about HIV and AIDS).

Globally, nearly 33.4 million people are currently living with HIV. In 2008, 2.7 million people were newly-infected with HIV, and AIDS-related illnesses claimed the lives of over 2 million people; among the most heavily-affected regions are sub-Saharan Africa, the Caribbean, Asia and Eastern Europe and Central Asia.

Despite the fact that rates of infection are beginning to stabilize in sub-Saharan Africa, it remains the most heavily-affected region, accounting for 67% of all people living with HIV and 72% of deaths due to AIDS². The Caribbean is the second most affected region, with adult infection rates ranging from 1% to 11%. AIDS-related illnesses are the fourth or fifth leading cause of death for women and men, respectively³.

In Asia, rates of HIV infection are still comparatively low (less than 1%, with the exception of Thailand) but rising. Moreover, the sheer size of the country populations and absolute numbers of infected people translates into 6 million households that will fall victim to poverty by 2015⁴.

The global community remains vigilant of the HIV and AIDS epidemic in Eastern Europe and Central Asia, which is the only region where HIV prevalence clearly remains on the rise. An estimated 110,000 people were newly infected with HIV in 2008. This brings the number of people living with HIV in Eastern Europe and Central Asia to 1.5 million, compared with 900,000 in 2001, a 66% increase over that time period⁵. Compounding these problems are the inability of health care systems to adequately deliver prevention and treatment services, almost universally.

Although Africa maintains the centre stage on HIV and AIDS, other continents harbour the spectre of sleeping giants, with the only means of addressing the threats being through aggressive preventative approaches.

The Embassy lobby in Africa is set to deliver a clear message to the G8 and G20. As well, unions and civil society allies from other continents and countries will raise their voices, making our call a truly global effort.

2 2009 AIDS epidemic update, Joint United Nations Programme on HIV/AIDS (UNAIDS) and World Health Organization (WHO), December 2009.

3 <http://www.unaids.org/en/CountryResponses/Regions/Caribbean.asp>

4 <http://www.unaids.org/en/CountryResponses/Regions/Asia.asp>

5 <http://www.unaids.org/en/CountryResponses/Regions/EasternEuropeAndCentralAsia.asp>

Canadian Unions Will Target the Harper Government

During *the March 21-27 Week of Action* unions and civil society groups within Canada will launch a corresponding lobby. Actions throughout the country include an e-communication lobby, a conference in Toronto and a breakfast meeting with members of Parliament, to also deliver messages to G8/G20 about universal access to HIV and AIDS services. These services should include targeted prevention, generic medication, harm-reduction measures, voluntary testing and counseling – all underpinned by the protection of human rights⁶. The prevention of HIV must also be central to any new resources and initiatives for maternal, child and reproductive health care.

Our activities will put pressure on the governments of Canada and other industrialized countries to honour and strengthen their financial commitments related to the pandemic. This includes a commitment to replenish the Global Fund to fight AIDS, TB and Malaria. This is especially important, as front-line health care workers and public service providers continue to face gaps in resources and services for vulnerable groups such as women, children and youth, migrants, refugees, prisoners, sex workers, people who use drugs, men who have sex with men, and aboriginal peoples and their communities.

Decent Work and Employment Promotion as AIDS Strategies

HIV undermines workers' health and productivity throughout the world. For most of the world's working poor, sickness or injury – whether work related or not – can lead directly to job loss with no compensation or health care. This is a devastating prospect for many, because the high cost of health care is the single most important factor driving the working poor deeper into financial crisis. Over 100 million people fall into absolute poverty each year due to illness or disability with loss of employment income or benefits and/or medical costs which are not covered by anyone, the state or employers.

Issues of social protection and employment security must be prioritized in relation to AIDS and the economic crisis. This highlights the need to implement the ILO Jobs Pact, adopted in 2009. HIV and AIDS will remain drivers in the poverty cycle until Decent Work strategies are made to promote decent jobs, workers' rights, social protection and worker participation in decision-making at all levels (e.g. workplace to national fora). All of this must be accompanied by significant funding to strengthen health systems⁷.

6 All sectors must collaborate and work together to ensure accessible HIV testing and counseling services, to reinforce legal prohibitions against forced or mandatory testing. Generic medications must be made accessible, in addition to harm-reduction measures such as safe injection sites with corresponding drug laws and outreach programs. Resources for maternal and child health care related to the prevention and treatment of HIV&AIDS remain insufficient, as do provisions for sexual and reproductive health care and education. Finally, discrimination and stigmatization, including in the workplace, continue unabated for lack of human rights protections in both the North and the South.

7 New resources are required for Decent Work, employment promotion, and health system strengthening. Diverting resources from specific diseases, especially in sub-Saharan Africa, where the death toll due to malaria and HIV&AIDS is the highest, particularly for women and children, will only prolong suffering.

History of the G8's New Accountability Framework

African trade unions, working with their counterparts in industrialized countries, first targeted G8 leaders in 2005 calling for an accountability mechanism that would track health commitments, including for HIV and AIDS. Despite the success at the 2008 G8 Summit to create the new framework, trade unions now find it necessary to ensure the new "G8 Accountability Framework" is correctly implemented.

The Accountability Framework has since expanded beyond the scope of health issues to other G8 development commitments like poverty, education, gender, food security, water and climate change, and is now poised for further expansion. At the 2009 Summit, governments announced a reporting framework aimed at strengthening their accountability on all commitments by the G8 countries, starting with the Millennium Development Goals (MDGs).

The successes of the Accountability Framework, so far, show how trade unions and civil society organizations, by acting together, can bring about lasting change. They are now challenged to collectively extend this advantage in ushering an era to achieve an ILO Decent Work Agenda to ensure ***Universal Access to HIV & AIDS Prevention, Treatment, Care and Support.***

Contact information:

In Africa: Yahya Msangi at yahya.msangi@ituc-africa.org

In Canada: David Onyalo at donyalo@clc-ctc.ca

PLEASE NOTE:

the following documents will be posted online, as they become available:

For copies of this backgrounder on the Canadian Embassy Campaign:

English: <http://documents.clc-ctc.ca/international/HIV-G8-Backgrounder-EN.pdf>

Français: <http://documents.clc-ctc.ca/international/HIV-G8-Backgrounder-FR.pdf>

Español: <http://documents.clc-ctc.ca/international/HIV-G8-Backgrounder-SP.pdf>

For copies of the appeal letter to African trade unions & HIV/AIDS activists:

English: <http://documents.clc-ctc.ca/international/HIV-G8-AppealLetters-EN.pdf>

Français: <http://documents.clc-ctc.ca/international/HIV-G8-AppealLetters-FR.pdf>

Español: <http://documents.clc-ctc.ca/international/HIV-G8-AppealLetters-SP.pdf>

Appendix A:

Universal Access to HIV/AIDS Prevention, Treatment, Care & Support

The commitment to provide Universal Access to HIV and AIDS prevention, treatment, care and support arose from the demands of a dedicated, highly organized, informed, and creative civil society movement drawn mainly from the ranks of the HIV+. These activists simply refused to accept “no” for an answer; they always asked “why” and looked for “how” to get it done.

The campaign to secure the *global commitment* to Universal Access is arguably the single greatest civil society achievement in modern history. It has transformed the way global institutions respond to global issues like poverty, education, gender, and climate change, and has invigorated discussions about global health that lain dormant for 30 years.

In 2005, at the G8 Summit in Gleneagles, Scotland, governments of developed countries pledged to develop and implement a package for HIV prevention, treatment and care, with the aim of Universal Access to treatment for all who need it by 2010. In doing so, it agreed to work through UNAIDS, WHO, and other international bodies and called for support from philanthropic organizations and the private sector. Universal Access is a pledge to low and middle income countries, to help them scale up national responses.

Later, the Gleneagles pledge was embraced by the UN General Assembly World Summit in 2005, when member states committed to:

“setting, in 2006, through inclusive, transparent processes, ambitious national targets, including interim targets for 2008...”

Subsequently, ‘Universal Access’ has become a phrase that dominates the current global HIV and AIDS policy environment. It has been described as access for all people all over the world to a wide spectrum of responses, including education and

counselling, multi-sectoral care and support services, health services, as well as medicines, to:

- prevent the transmission of HIV;
- support persons living with HIV, their families and those who care for them, in living longer with HIV and slowing the onset of AIDS related-illness;
- help AIDS-affected families in mitigating the effects of the illness and death on their own households and communities.

Lagging Resource Commitments

At the end of 2007, the goal of placing 3 million people in antiretroviral treatment was finally reached.

However, countries are still far from reaching their universal access goals with approximately 2.7 million new infections in 2008 and an estimated 11 million people in need of antiretroviral therapy still unable to receive it.

Failure to dedicate sufficient resources is the key reason why it is unlikely that the goal of universal access will be achieved by 2010.

Universal Access and the G8

The G8 includes Canada, France, Germany, Italy, Japan, Russia, the United States, and the United Kingdom. Together, these countries represent approximately 65% of the world’s economy. They meet at an annual Summit to discuss the state of world [economy](#) and global issues. G8 Summits have increasingly become a focal point for activists on many development issues.

After their bold Declaration at Gleneagles, the G8 has yet to produce a comprehensive time-bound resource-backed plan to achieve Universal Access. AIDS activists have had to struggle to keep AIDS on the G8 agenda only to see a serial reaffirmation of their original commitment.

At the 2008 Hokkaido Summit, the G8 relented to demands for greater accountability by establishing a follow-up mechanism to monitor its progress on meeting its Health commitments.

Monitoring and Evaluation

Progress on Universal Access is measured by 8 of the 25 indicators provided by the UN General Assembly (UNGASS), with additional emphasis on indicators of inclusive target setting processes. A Country Response Information System (CRIS) is used by UNAIDS for monitoring and evaluating national responses to AIDS.

The Kaiser Family Foundation monitors funding from the G8, European Commission and additional donor governments which provide the bulk of international assistance for HIV/AIDS and other global health priorities through bilateral programs and contributions to multilateral organizations, including the Global Fund.

AIDS Accountability International (AAI) has also developed a scorecard that measures key elements required for effective national responses to HIV and AIDS.

Universal Access and Human Rights

Civil society has voiced urgent concerns about the prevention dimension of universal access, particularly as it concerns such marginalized groups as men who have sex with men, sex workers and injecting drug users – all of whom have limited access to education, prevention, care and support on HIV. Cultural practices continue to victimize women and girls who are unable to negotiate for safe sex.

Human rights violations continue to plague those most at risk while simultaneously fueling stigma and discrimination.

The *Political Declaration on HIV* in 2006 declared that non-discrimination, right to privacy, right to liberty and freedom of movement, right to education and information and the right to health should be observed as human rights, as these are all issues affecting these groups.

Major Timelines

- 2015 Deadline for reaching the Millennium Development Goals
- 2010 Deadline established by G8 for Universal Access
- 2005 G8 Gleneagles Commitment on HIV and AIDS
- 2001 Declaration of Commitment
- 2000 Adoption of the Millennium Development Goals by the United Nations

Resources



This tool-kit, developed by the Global Unions AIDS Programme with support from the World AIDS Campaign, is a step by step guide for trade unions to design country-level campaigns to achieve universal access.

<http://www.worldaidscampaign.org/en/Constituencies/Labour/Labour-Advocacy-Toolkit>

Useful Websites

www.unaids.org/en/PolicyAndPractice/TowardsUniversalAccess/default.asp

<http://aidsaccountability.org>

<http://www.kff.org/hivaids/global.cfm>