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SPECIFIC GROUPS AND INDIVIDUALS:
OTHER VULNERABLE GROUPS AND INDIVIDUALS

The protection of human rights in the context of human immunodeficiency virus (HIV)
and acquired immune deficiency syndrome (AIDS)

Report of the Secretary-General

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Introduction

1. This report has been prepared in accordance with Commission on Human Rights resolution 1999/49, in which the Commission requested the Secretary-General to solicit comments from Governments, United Nations organs, programmes and specialized agencies and international and non-governmental organizations on the steps they have taken to promote and implement the Guidelines on HIV/AIDS and human rights (E/CN.4/1997/37, annex I).

2. The resolution further invited the human rights treaty bodies to give particular attention to HIV/AIDS-related rights and invited States to include appropriate HIV/AIDS-related information in their reports to the relevant treaty bodies.

3. In the same resolution, the Commission also requested all special representatives, special rapporteurs and working groups of the Commission to integrate the protection of HIV-related human rights within their respective mandates.

4. The operative paragraphs of the resolution relate, *inter alia*, to the following elements: (a) implementation of the Guidelines on HIV/AIDS and human rights; (b) strengthening national mechanisms for the protection of HIV/AIDS-related human rights, according special attention to women, children, and vulnerable groups; (c) international assistance for developing countries, in particular to prevent the spread of the epidemic; (d) coordinated, transparent, participatory and accountable national responses to HIV/AIDS in policies and programmes; (e) ensuring that laws, policies and practices in the context of HIV/AIDS are in accordance with human rights; (f) appropriate monitoring and enforcement mechanisms for HIV/AIDS-related human rights.

5. In accordance with paragraphs 11-13 of the resolution, the Secretary-General sent notes verbales dated 9 August 2000 to all Governments, relevant treaty bodies, special rapporteurs, relevant United Nations bodies, specialized agencies and non-governmental organizations, soliciting their views on the protection of human rights in the context of HIV/AIDS. Replies were received from the following Governments: Argentina, Belarus, Cambodia, Colombia, Georgia, Ghana, Guatemala, Mauritius, Mexico, Netherlands, Norway, Peru, Qatar and Switzerland.

6. Substantive replies were received from the following national human rights commissions: Human Rights and Equal Opportunity Commission of Australia, Human Rights Commission of Canada and National Human Rights Commission of Mexico. These national commissions have taken steps to protect people living with HIV/AIDS from discriminatory practices.

7. Replies were also received from the following United Nations treaty bodies, special rapporteurs, Secretariat departments, and specialized agencies: Committee on the Rights of the Child, Special Rapporteur on the right to education, Special Rapporteur on freedom of opinion and expression, Division for Social Policy and Development of the Department of Economic and Social Affairs of the Secretariat, United Nations Economic and Social Commission for Asia and the Pacific (UN/ESCAP), United Nations Relief and Works Agency for Palestine Refugees in the Near East (UNRWA), United Nations Conference on Trade and Development (UNCTAD),

UNAIDS, United Nations Development Programme (UNDP), United Nations Educational, Scientific and Cultural Organization (UNESCO), International Labour Organization (ILO) and World Health Organization (WHO).

8. Replies were received from the following intergovernmental organizations: Organization of African Unity and League of Arab States.

9. The following non-governmental organizations sent contributions: Council for International Organizations of Medical Sciences, Femmes Afrique solidarité, International Council of AIDS Service Organizations, International Council of Nurses and International Federation of Social Workers.

10. In line with the Secretary-General's last report on the same subject matter (E/CN.4/1999/76), this report has been divided into two chapters. The first provides a summary of the replies received on the Guidelines and their implementation. The second chapter relates to policies and activities relating to the promotion and protection of HIV/AIDS-related human rights.

I. THE GUIDELINES AND THEIR IMPLEMENTATION

11. In light of the views received, this chapter focuses on the comments on the implementation of the Guidelines on HIV/AIDS and human rights at the national level.

Guideline 1

12. Guideline 1 encourages States to establish an effective national framework for the response to the HIV/AIDS epidemic by integrating HIV/AIDS policy and programme responsibilities, across all branches of government.

13. The Government of Argentina reported that a national policy has been developed through the National Strategic Plan for HIV/AIDS and sexually transmitted diseases (STDs) in consultation with the provinces and principal municipalities by coordinating the various sectors of the national, provincial and municipal governments.

14. The Government of Colombia reported that a government decree on the rights and duties of people living with HIV/AIDS was issued in order to ensure the human rights and duties relating to diagnosis and treatment of HIV/AIDS. The decree ensures respect for the human rights of people living with HIV/AIDS. The right to treatment, including provision of medication, obligatory under article 8, is guaranteed based upon the right to health and the right to life contained in the Colombian Constitution. There is a functional group on STDs/HIV/AIDS, which has developed an evaluation mechanism for designing policies on prevention, treatment and rehabilitation. It comprises six subcommittees that discuss relevant issues with the participation of people living with AIDS, non-governmental organizations, the civil society, academicians and the community at large. There has also been developed a project, "*Una Option de Convivencia*," whose objective is to develop the theme of human rights and its application to people living with HIV/AIDS. The project includes creating awareness among regional departments in order to ensure its implementation nationwide.

15. The Government of Guatemala reported that a multisectoral commission has been established to support various institutions and ministries and which acts as coordinator of the national STDs/HIV/AIDS programme. The national programme aims to have an intersectoral, inter-agency and multidisciplinary focus with the participation of the civil society.

16. The Government of Mauritius reported that it is finalizing a National HIV/AIDS Strategic Plan which will touch upon various HIV/AIDS-related issues with a view to protecting human rights in the context of HIV/AIDS.

17. The Government of Norway reported that its recent National Plan of Action for Combating the HIV/AIDS Epidemic has adopted human rights as its guiding principles. The Ministry of Health and Social Affairs is designing new HIV prevention strategies which emphasize the human rights of people infected with HIV/AIDS in conformity with the Guidelines.

18. The Government of Peru reported that the targets under the National Population Plan 1998-2000, including the prevention of HIV/AIDS/STDs, are being accomplished by the joint efforts of a number of bodies such as the Ministry for the Advancement of Women and Human Development, the Ministry of Health and the Ministry of Education.

Guideline 2

19. Guideline 2 refers to the provision of political and financial support to ensure that community organizations are able to carry out their activities effectively and that community consultation occurs in all phases of policy design, programme implementation and evaluation.

20. The Government of Argentina reported that a technical advisory committee for the Coordinating and Executive Unit on HIV/AIDS/STDs was appointed by ministerial decision; it comprises specialists in the field and representatives of the National Network of People living with HIV/AIDS.

21. The Government of Cambodia stated that a candlelight rally was held to raise awareness of the need to improve the quality of life of people living with HIV/AIDS. Participants were people living with HIV/AIDS themselves, health care workers, families and friends, clergy, United Nations officials and journalists.

Guideline 3

22. Guideline 3 focuses on the review and reform of public health laws to ensure that they address the public health issues raised by HIV/AIDS; that the provisions applicable to casually transmitted diseases are not inappropriately applied to HIV/AIDS; and that they are consistent with international human rights obligations.

23. The Government of Argentina reported that the Ministry of Health and the Health Commission of the Chamber of Deputies have commenced a process of analysis of legislation on HIV/AIDS to advance a better understanding of the disease and to promote the human rights of people affected by the disease.

24. The Government of Cambodia expects that its National Assembly will promulgate a law on HIV/AIDS which will address the issue of the protection of the rights of people infected with the virus.

25. The Government of Georgia elaborated and adopted the law on HIV infection and prevention of AIDS in 1995. Under the newly amended provisions of this law, people infected with HIV/AIDS have the right to treatment at the AIDS Centre in Tbilisi. For those in rural areas who cannot afford to travel to the capital, the law also provides a free journey by public transportation four times a year.

26. The Government of Peru reported that the Ministry of Health set up the Sexually Transmitted Disease and AIDS Control Programme (PROCETSS) to strengthen and evaluate the national response to STDs/HIV/AIDS. The strategies for the implementation of this programme include giving priority to the prevention of the disease. The programme identified as its crucial components the promotion of the rights of people living with HIV/AIDS, information, education and communication, and access to comprehensive and quality health services.

Guideline 4

27. Guideline 4 requires States to review and reform criminal law and correctional systems to ensure that they are consistent with international human rights obligations; are not misused in the context of HIV/AIDS; and are not targeted against vulnerable groups.

28. The Government of Argentina reported that a joint programme of the Ministries of Health and Justice on "Healthy Prisons" is developing activities designed to reduce the vulnerability and risk levels of prisoners.

29. The Government of Georgia reported that it is considering amending prison legislation to ensure equal treatment of prisoners with HIV/AIDS within penitentiary facilities. The draft being considered also contains a provision on pre-term release of prisoners infected with HIV/AIDS.

30. The Government of Switzerland reported that access to information on AIDS and to preventive materials is not always guaranteed in prisons in practice and that there are some shortcomings in the care and psycho-social support provided.

Guideline 5

31. Guideline 5 encourages States to enact or strengthen anti-discrimination and other protective laws to protect vulnerable groups, people living with HIV/AIDS and people with disabilities from discrimination in the public and private sectors; to ensure privacy and confidentiality; to ensure ethics in research involving human subjects; and to provide for speedy and effective administrative and civil remedies when the laws are breached.

32. The Government of Argentina reported it has enacted an AIDS Act with a view to the elimination of discrimination against people infected and/or affected by HIV/AIDS. The enforcement of this legislation has been strengthened by a constitutional reform in 1994, which incorporated the international human rights norms.

33. The Government of Belarus stated that the Public Health Act prohibits discrimination against people with HIV/AIDS. The principle of confidentiality is also guaranteed under the same Act. People with HIV/AIDS may not be dismissed from their jobs nor denied access to medical facilities.

34. The Government of Colombia reported that it is prohibited to use HIV/AIDS test results to exclude those infected by the disease from work, study, travel, and other social and cultural activities. Thus, people living with HIV/AIDS enjoy the rights to privacy and confidentiality.

35. The Government of Ghana reported that it has developed an advocacy tool, AIDS Impact Model, which urges political, traditional and social leaders to advocate against discrimination against people living with HIV/AIDS. A National Policy on HIV/AIDS/STDs has been developed, which includes a section on "Legal and Ethical Issues". This section addresses a wide range of human rights issues such as the prohibition of mandatory testing, the right to confidentiality and non-discrimination. A National Strategic Framework to respond to the HIV/AIDS epidemic has been finalized. It focuses on an enabling environment to implement the Framework. It will review existing laws and enact new laws to protect the rights of people living with HIV/AIDS. It further seeks to provide increasing knowledge for the general public on HIV/AIDS, especially on the rights of people living with HIV/AIDS. This Framework will be implemented at the district and community levels through the District Response Initiative.

36. The Government of the Netherlands reported that a non-discrimination principle is entrenched in the Constitution. The Medical Examinations Act provides that no one may be denied employment or insurance on medical grounds.

37. The Government of Peru reported that campaigns are designed to prevent and combat discrimination against people infected with the disease by guaranteeing their fundamental rights. The "Family planning programme", compulsory in all departments and facilities of the Ministry of Health, the armed forces, the National Police and NGOs registered with the Health Ministry, encourages activities for the promotion of the rights of people infected with HIV/AIDS. The persons covered under this programme enjoy the rights to privacy, information, security of person, communication, decision-making and respect for their dignity, the right to a compliant and the right to compensation.

38. The Government of Qatar reported that medical services for citizens and resident foreigners infected with HIV/AIDS are provided equally, without discrimination.

39. The Government of Switzerland reported that there is no institutional discrimination against people with HIV/AIDS although there are some scattered individual cases of discrimination. It further reported that a national HIV/AIDS programme has been adopted and one of its objectives is to ensure that concerted action is taken to systematically reduce existing

inequalities in legal provisions relating to sickness, work and social insurance. It is to ensure that there is no discrimination in the enforcement of laws. To this end, NGOs are working to deal with specific discrimination cases at the national level.

40. The Human Rights and Equal Opportunity Commission of Australia stated that its complaint-handling role under the Human Rights and Equal Opportunity Act 1986 extends to examining complaints of discrimination in employment and occupation. One of the prohibitive grounds, "impairment", includes HIV/AIDS status. The Act also covers discrimination based on a belief about a person as one of the prohibitive grounds. The Act applies not only to recruitment and dismissal but also to benefits and conditions of employment. The Commission attempts to resolve complaints through conciliation, which may result in changes in employment policies and practices, job reinstatement, job promotion, an apology, withdrawal of the complaint, payment of damages or some other outcome. However, the Commission is not able to make binding determinations in respect of complaints against discriminatory actions that the Act does not make unlawful. The other legislation is the Disability Discrimination Act which makes it unlawful to discriminate on the basis of disability. The definition of disability under this Act covers HIV status.

41. The Human Rights Commission of Canada reported that it has devised a policy on HIV/AIDS-related discrimination based on the Human Rights Act which prohibits discrimination on the ground of disability; this extends to discrimination based on perceived disability. Individuals with HIV/AIDS may also be subjected to discrimination by virtue of their real or perceived membership in a risk group or their association with a person or people with HIV/AIDS.

42. The Human National Human Rights Commission of Mexico reported that it has established a working group to deal with cases of people living with HIV/AIDS. It has prepared primers on the human rights of people with HIV/AIDS as well as on the rights of people with HIV/AIDS who have been deprived of their freedom and placed in prisons or social rehabilitation centres. The first primer purports to set the minimum rights to be respected in accordance with the Guidelines. The second one sets out the rights of inmates and prisoners with a view to preventing arbitrary treatment.

43. The International Council of Nurses (ICN) reported that its constitution affirms a principle of non-discrimination. The ICN Code of Ethics for Nurses spells out the nurse's responsibility for providing care to all people and strict adherence to professional conduct based on respect for all people regardless of their status, including medical conditions such as HIV/AIDS.

Guideline 6

44. Guideline 6 recommends that States enact laws and regulations to ensure the widespread availability of good quality prevention measures and services; adequate prevention and care information, and safe, effective and affordable medication.

45. The Government of Argentina reported that an HIV/AIDS prevention campaign was undertaken in conjunction with the mass media along with a focused campaign executed with NGOs, aimed at a number of vulnerable population groups such as drug users, homosexuals and sex workers.

46. The Government of Belarus reported that people with HIV are eligible for medical treatment and its confidentiality is guaranteed. Out-patient treatment is being provided to people with HIV in their homes or in the workplace as well as in-patient care in national and departmental health care facilities. Clinical monitoring, including laboratory testing and aetiotropic treatments for AIDS and its complications, is provided free of charge.

47. The Government of Mexico stated that there is a need to reorient and strengthen the regulatory framework governing institutional activities in terms of diagnosis and treatment products and specific prevention and control activities. Epidemiological HIV/AIDS monitoring should be conducted based on the need to ensure respect for the dignity of the people concerned, including their right to equality, confidentiality, privacy and protection against discrimination.

48. The Government of the Netherlands reported that it supports organizations responsible for streamlining special care services and encourages research on new methods of HIV prevention, diagnosis and treatment. Systematic monitoring is undertaken on the efforts to prevent HIV infection among vulnerable groups as well as the population at large.

49. The Government of Peru reported that free anti-retroviral treatment is provided to women infected during pregnancy as well as to babies born to infected mothers.

50. The Government of Qatar stated that the public is being informed about the ways in which HIV/AIDS is transmitted and the ways to protect themselves from it, through various means such as lectures to schoolchildren and at sports clubs, newspaper articles, television programmes, pamphlets and leaflets. Citizens infected with HIV/AIDS are provided with medical services at a specialized clinic. Treatment, including the latest medication, is provided free of charge to AIDS patients. Information concerning AIDS status is kept confidential.

Guideline 7

51. Guideline 7 calls on States to implement and fund legal support that will: educate people about their rights; provide free legal services to enforce these rights; develop expertise on HIV-related issues; and utilize the courts and other means to protect the rights of individuals.

52. The Government of Argentina reported that a free HIV/AIDS hotline became fully operational in August 2000. It provides information on HIV/AIDS and human rights. Moreover, a Web site was opened containing information on legislation related to HIV/AIDS and explaining the rights of people infected by HIV/AIDS.

53. The Government of Belarus put in place a mechanism whereby consultations are held with people with HIV/AIDS to inform them of their rights.

54. The National Human Rights Commission of Mexico reported that it has organized a host of lectures and round tables to inform the public about the human rights of people living with HIV/AIDS. People living with HIV/AIDS, specialists and NGOs actively participated in discussions on the rights to medication, to be protected from discrimination and to be provided with assistance. The Commission further intensified its efforts to provide information on respect for the human rights of people living with HIV/AIDS as well as educational activities to inform the public about such concepts as marginalization, discrimination and social exclusion.

Guideline 8

55. Guideline 8 encourages the promotion of a supportive and enabling environment for women, children and vulnerable groups by addressing underlying prejudices and inequalities through community dialogue.

56. The Government of Argentina reported that, together with governmental and non-governmental organizations, it is undertaking activities to promote and disseminate the International Convention on the Elimination of All Forms of Discrimination and the Convention on the Rights of the Child.

57. The Government of Belarus reported that children may not be denied access to establishments intended for them, nor have any other rights infringed based on their HIV/AIDS status. This principle extends to other rights and legal interests of relatives of infected persons.

58. The International Federation of Social Workers submitted a report on “The role of the social welfare sector in Africa”, which contains a summary of advocacy work designed to strengthen the capacities of vulnerable children and families in the context of HIV/AIDS. The document aims to create awareness of the consequences of the HIV/AIDS epidemic on children and orphans in Africa.

Guideline 9

59. Guideline 9 recommends that States promote and support creative educational, training and media programmes designed to change attitudes of discrimination and stigmatization associated with HIV/AIDS to understanding and acceptance.

60. The Government of Ghana reported that a series of meetings took place to advocate for support for opposing discrimination and reducing stigma.

61. The Government of Peru reported that since it is of vital importance to provide information and to bring about a change in public attitudes, it has incorporated various elements relating to HIV/AIDS issues into the national plans of the Ministry of Education.

62. The Human Rights Commission of Canada reported that the level of misunderstanding about HIV/AIDS contributes to the discriminatory treatment of those with HIV/AIDS. In this regard, education is the key to combating discrimination based on this misinformation. The Commission continues to assist in fostering public understanding and encourages employers to commit themselves to non-discrimination regarding employees with the disease.

63. The International Council of Nurses has developed policy guidelines relating to HIV/AIDS and human rights for its national associations with a view to supporting nurses' work to counter discrimination and stigma against people living with HIV/AIDS. Furthermore, ICN has widely disseminated guidelines and other training manuals highlighting HIV/AIDS prevention and the protection of women against HIV infection.

Guideline 10

64. Guideline 10 recommends that States should ensure that HIV/AIDS-specific professional codes of conduct incorporating human rights principles are developed and a mechanism for their implementation and enforcement provided.

65. The Government of Belarus reported that the State HIV prevention programme is based upon the principle of observing the human rights standards entrenched in the Universal Declaration of Human Rights.

Guideline 11

66. Guideline 11 requires States to ensure monitoring and enforcement mechanisms to guarantee the human rights of people living with HIV/AIDS, their families and communities.

67. The Government of Belarus reported that an act amending and supplementing the State Aid to Families Raising Children Act was passed in 1999, in which the social protection of families raising children with HIV/AIDS has been strengthened. Those families will receive assistance until children reach 18 years of age. Social assistance is extended to HIV-infected adults in the form of allowances in cases where disability is certified following a diagnosis of pre-AIDS or AIDS.

Guideline 12

68. Guideline 12 refers to international cooperation, through UNAIDS and other United Nations agencies and programmes, to allow States to share knowledge and experience on HIV-related human rights issues, and to ensure that there are effective mechanisms at the international level to protect human rights in the context of HIV/AIDS.

69. The Government of Guatemala has taken a number of initiatives to strengthen the protection of human rights in the context of HIV/AIDS with cooperation at the bilateral and multilateral levels. The national STDs/HIV/AIDS programme forms part of the AIDS Thematic Group in Guatemala for UNAIDS, which promotes prevention based on a rights-based approach with the participation of NGO representatives. The Swedish International Development Agency (SIDA) has donated funds to Guatemala to carry out HIV/AIDS-related work. A number of international organizations such as the Central American HIV/AIDS Prevention Project, Médecins sans frontières and the Pan-American Health Organization, which administers the SIDA funds, are supporting the Ministry of Health of Guatemala in carrying out the national programme.

70. The Government of Norway stressed the importance of integrating HIV/AIDS-related work as part of its long-term development cooperation. Norway is striving to work towards the protection of human rights both at national and international level based on the principle that everyone is entitled to international human rights and people with HIV/AIDS should enjoy equal rights in order to avoid discrimination and isolation from society.

71. The Government of Peru reported that a cooperation agreement was concluded among Bolivia, Colombia, Ecuador, Peru, Venezuela and the European Economic Community. This agreement provides for cooperation in public health with a focus on the disadvantaged through joint research, technology transfer and the exchange of expertise in the prevention and treatment of AIDS. A bilateral agreement between Peru and the United States of America has been concluded to confront the threats posed by the disease by designing a monitoring and research system to identify, develop and execute measures for the prevention and control of infectious diseases, including AIDS.

72. The Government of Switzerland reported that it has consistently sponsored global programmes on AIDS to ensure that the rights of people infected with HIV/AIDS are respected.

73. The International Council of AIDS Service Organizations (ICASO) reported its activities with regard to the promotion and implementation of the Guidelines. ICASO has prepared two booklets to assist community-based organizations to utilize the Guidelines and these documents have been widely disseminated through its networks and at national, regional and international meetings and conferences on HIV/AIDS since 1997. ICASO has also published a document urging that the Guidelines be used in advocacy, education and awareness-raising.

II. POLICIES AND ACTIVITIES RELATING TO THE PROMOTION AND PROTECTION OF HUMAN RIGHTS IN THE CONTEXT OF HIV/AIDS

Policies and activities of United Nations bodies and programmes

74. The Committee on the Rights of the Child reported that it has continued to give a great degree of attention to the human rights problems faced by children affected by HIV/AIDS. On 5 October 1998, the Committee dedicated its annual day of general discussion to the theme of "Children living in a world with HIV/AIDS". Co-organized with UNAIDS, the day of general discussion brought together representatives of Governments, United Nations bodies and agencies and NGOs to discuss the implications of HIV/AIDS for the implementation of the Convention on the Rights of the Child. As a result of the discussions, the Committee adopted a set of 16 recommendations that have been widely cited and used when addressing the implementation of child rights with regard to HIV/AIDS. The Committee clearly identified the HIV/AIDS epidemic as one of the major risks facing the implementation of the human rights of children. The Committee has discussed the human rights problems faced by children in the context of the epidemic in almost 90 per cent of the States parties' reports it has examined. The Committee has adopted relevant recommendations, suggesting measures to improve respect for the human rights of affected children, in almost all cases.

75. The Special Rapporteur on the right to education noted that the Dakar World Education Forum had adopted a Framework for Action which urges Governments to commit themselves to the implementation of education programmes and actions to combat the HIV/AIDS pandemic as a matter of urgency.

76. The Division for Social Policy and Development of the United Nations Department of Economic and Social Affairs reported that it had appointed a focal point whose tasks include the following: (a) the assessment of the ongoing impact of the HIV/AIDS epidemic on families and their members as well as on family policies in developing and developed countries; and (b) the exploration of policy options and strategies in approaching the HIV/AIDS crisis from a family policy and development perspective. The Department is preparing a project which will examine the role and functions of families in the most HIV/AIDS-affected regional settings. This project will include a particular dimension concerning the protection of the human rights of families living with HIV/AIDS.

77. UNESCO initiated a project on the human rights of young people in the context of HIV/AIDS, with financial support from UNAIDS. The project aims to sensitize young people about their right and responsibility to act against HIV/AIDS-based discrimination and exclusion. UNESCO, together with youth organizations, particularly with organizations of medical, pharmaceutical and law students, is preparing an action-oriented resource manual on youth rights in the context of HIV/AIDS using the Guidelines as the framework of reference.

78. UN/ESCAP reported that it contributes to the creation of public awareness, support and an enabling environment for the promotion of all human rights for all, including disadvantaged and vulnerable groups and people with HIV/AIDS. Article 53 of the Agenda for Action on Social Development in the ESCAP Region calls for national and regional policies, plans and programmes to be formulated and implemented with a view to promoting behavioural change through public information and health, to providing support services for those already afflicted ensuring that there is no discrimination against them, and to eradicating sexual exploitation, especially of women and children. ESCAP has incorporated various dimensions of HIV/AIDS-related issues into its activities and various technical cooperation projects on economic and social development. ESCAP has been implementing a project on the right to development which contains a component on promoting the well-being of and non-discrimination against people with HIV/AIDS in close collaboration with Governments, NGOs and other United Nations bodies and agencies, particularly UNAIDS.

79. UNRWA reported that the Agency has developed an education programme for the prevention of HIV/AIDS implemented as a multisectoral activity targeting children, youth and women.

80. UNCTAD reported that the Third United Nations Conference on the Least Developed Countries, to be held in May 2001, will reflect the HIV/AIDS issue in one of the proposed interactive thematic sessions on the role of health in enhancing productive capacities.

81. UNAIDS provided information on its activities ranging from standard setting, technical assistance and advice, training, research and networking for the promotion and protection of human rights in the context of HIV/AIDS. UNAIDS has undertaken a host of actions in

collaboration with international, regional and national partners: (a) a pilot project to strengthen the capacity of national human rights institutions in India and Uganda to integrate HIV/AIDS issues into the work of commissions; (b) intensified country support and activities in Burkina Faso, Ghana and Malawi; (c) training of key national partners, AIDS service NGOs, human rights NGOs, political leaders, national AIDS programme managers and people living with HIV/AIDS; (d) research in specific human rights areas such as identifying the determinants of discrimination and stigma associated with HIV/AIDS; (e) global networking at international, regional and national levels, particularly with UNDP, the International Council of AIDS Services Organizations and organizations of people living with HIV/AIDS; and (f) technical assistance and advice for the Philippines in the drafting of legislation as well as for NGOs preparing court cases involving HIV/AIDS and human rights issues in the Supreme Courts of India and South Africa.

82. UNDP reported that as an active advocate for a rights-based approach to dealing with the HIV/AIDS epidemic, it has striven to support and facilitate a host of global networks on human rights and HIV/AIDS, mobilizing various partners from Government, civil society and the private sector. The main objective of these networks is to forge a consensus on appropriate legal, ethical and human rights responses to the epidemic. It further aims to build national capacity for the implementation of the human rights norms. UNDP has conducted training for key national partners, HIV/AIDS service organizations, human rights NGOs, political leaders, national AIDS programme managers, people living with HIV/AIDS and staff of United Nations agencies. Regional consultations have also been held in Africa, Asia, Europe and North America, and Latin America on ethical issues relating to HIV/AIDS. A national network on human rights and HIV/AIDS in Uganda has been expanded with support from UNDP. UNDP has provided key support to Nicaragua in the development of HIV/AIDS-related legislation and legal reform. UNDP uses the Guidelines on HIV/AIDS and human rights as an important advocacy tool at national and local levels and it further published a host of issues papers which in turn formed the backbone of UNDP's advocacy campaign for promoting the human rights of people affected by HIV/AIDS.

83. ILO reported that it organized a regional tripartite workshop on strategies to tackle the social and labour implications of HIV/AIDS. This workshop adopted a draft platform of action on HIV/AIDS in the context of the world of work in Africa, which emphasized the collective responsibility of Governments and employers' and workers' organizations in the fight against HIV/AIDS, reflecting the urgent need to educate workers on the disease and their rights; sensitize employers on the need to make HIV/AIDS a corporate priority; and increasing overall awareness by Governments about the negative impact of HIV/AIDS on development efforts. A special high-level meeting on HIV/AIDS and the world of work was organized and it adopted a resolution concerning HIV/AIDS and the world of work that focuses on action to combat the epidemic. The ILO Global Programme on HIV/AIDS and the World of Work was designed to implement the resolution. ILO hopes that the programme, using a rights-based approach, would: (a) increase awareness about the implications of HIV/AIDS for the world of work, with particular focus on employment, productivity and social security; (b) improve the capacity of the organization's constituents to design and implement appropriate policies and programmes for combating HIV/AIDS and its effects on the workplace, including stigma and discrimination; and (c) identify strategies and policy options for practical and implementable measures in the workplace to fight the epidemic.

84. WHO reported that the World Health Assembly adopted a resolution “HIV/AIDS: confronting the epidemic” which recognizes that poverty and inequality between men and women are driving the epidemic and that denial, discrimination and stigma continue to be major obstacles to an effective response to the epidemic. The resolution underscores the need to advocate respect for human rights in the implementation of all measures taken to respond to the epidemic. Human rights are considered an integral component in the area of HIV/AIDS in all aspects of designing, evaluating and monitoring WHO public health strategies. Parallel to ongoing activities in the area of health and human rights in WHO, an organization-wide WHO strategy on health and human rights is being developed and is expected to be adopted in 2001.

85. The Council for International Organizations of Medical Sciences reported that it co-sponsored a UNAIDS guidance document entitled “Ethical Considerations in HIV Preventive Vaccine Research”.

Policies and activities of regional organizations

86. The League of Arab States suggested the following points with regard to the resolution: (a) the action taken should be in conformity with the International Covenant on Economic, Social and Cultural Rights and a separate paragraph should be inserted in the resolution to this effect; (b) a paragraph should be inserted stating that the international community would have an obligation to provide economic support and to increase the volume of official development assistance; (c) the debts of the heavily indebted poor countries should be waived; (d) foreign direct investment to the poor countries should be increased proportionally to meet the costs of the fight against the AIDS epidemic; and (e) a paragraph should be inserted in the resolution to the effect that facilities for the purchase of pharmaceuticals to treat HIV/AIDS should be provided to the developing countries.

87. The Organization of African Unity reported that it adopted the OAU Declaration on HIV/AIDS in July 2001.¹

¹ *OAU LOME DECLARATION ON HIV/AIDS*, AHG/Decl.3 (XXXVI).