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## ENABLING HIV RESPONSES:

### NATIONAL SOCIAL PROTECTION FLOORS

This technical note describes how the *Social Protection Floors Recommendation, 2012*<sup>i</sup> can be an enabler to strengthen HIV responses. The note serves as a reference for governments, employers' and workers' organizations, United Nations agencies, civil society organizations, HIV and AIDS specialists, social security administrators and other national stakeholders.

#### SOCIAL PROTECTION FLOORS

Social protection floors are nationally defined sets of basic social security guarantees which secure protection aimed at preventing or alleviating poverty, vulnerability and social exclusion<sup>ii</sup>.

#### **SOCIAL PROTECTION IS A RIGHT..... LEAVE NO ONE BEHIND.**

The ILO estimates that 80 percent of people worldwide do not have access to comprehensive social security, especially those in the informal economy and rural areas<sup>iii,iv</sup>. HIV and AIDS further diminish available household resources, impairing resilience of individuals, families, communities and countries.

Social security systems can act as social and economic stabilizer and help preserve both dignity and income for HIV-affected workers

and their families while reducing people's HIV vulnerabilities thus contributing to achieving the UNAIDS' vision of getting to zero new HIV infections, zero discrimination, and zero AIDS related deaths<sup>v</sup>.

The International Labour Conference, in 2012 adopted the Social Protection Floors Recommendation No. 202 that reaffirmed social security as a human right. This Recommendation provides guidance to help countries establish or update their social security programmes to prevent or reduce

poverty, inequality, social exclusion and social insecurity.

#### **FOUR BASIC SOCIAL SECURITY GUARANTEES**

.....also applicable to People living with HIV (PLHIV), at nationally defined level to provide:

- Access to goods and services, constituting *essential health care***, including maternity care, that is available, accessible, acceptable and with quality. For example: general health care, treatment for opportunistic infections, sexually transmitted infections and anti-retroviral therapy (ART).
- Basic income ***security for children***, include children with HIV or orphaned from AIDS parent(s), to access nutrition, education, care, other goods and services.
- Basic income ***security for persons in active age***, including PLHIV and key vulnerable populations (KVP) who are unable to earn sufficient income, especially in cases of sickness, unemployment, maternity or disability.
- Basic income ***security for older persons***.

Countries should provide these basic social security guarantees to all residents and children defined by national laws & regulation.

Implementing Recommendation 202 could facilitate HIV prevention, access to treatment, care and support for PLHIV, KVP and mitigate negative impact of AIDS. It includes prevention of mother to child transmission; access to food and nutrition, which is critical to support adherence and effectiveness of ART; cash transfer for needy individuals or families; and

old-age pension to older persons who are caring for members of family living with or affected by HIV including AIDS orphans.

The **KEY PRINCIPLES** of Recommendation 202 that are particularly relevant to ensure HIV sensitive national social protection systems<sup>vi</sup> are highlighted:

- **Universality** of protection, based on social solidarity (*cover needy PLHIV and KVP*);
- entitlement to benefit defined by national laws (include *needy PLHIV and KVP*);
- **Adequacy** and **predictability** of benefits (*enabling PLHIV adhere to treatment as predictable and adequate benefits allow them not forego treatment for other competing livelihood demands*);
- **Non-discrimination, gender equality** and responsiveness to special needs (i.e. *HIV sensitive*);
- **Social inclusion**, including persons in informal economy (*most PLHIV and KVP*);
- **Respect** for the **rights and dignity** of people covered by the social security guarantees (*accessing service, protection of confidentiality and privacy*);
- **Progressive** realization, setting targets and time frames (*to progressively cover needy PLHIV&KVP*);
- **Solidarity** in financing while seeking to achieve an optimal balance between responsibilities and interests among those who finance and benefit from social security schemes;

Additional principles include coherence with national social, economic and employment policies; financial, fiscal and economic **sustainability** regarding social justice and equity; regular implementation **monitoring** and periodic **evaluation** in consultation with representative organization of persons concerned (for example, *PLHIV associations*); financial and fiscal transparency, accountability, sustainability, coherence across the system, and good governance.

**COUNTRY APPLICATION of Recommendation 202** shall ensure HIV sensitivity so:

- Persons in need of health care, such as PLHIV or KVP, not face hardship or increased risk of poverty due to the financial consequences of accessing essential health care.
- Basic income security to allow life in dignity.

Regular review of the level of social security guarantees shall apply a transparent procedure based on national laws; and involve governments, employers, workers with consultation of **representative organization of persons concerned** (i.e. *PLHIV associations*).

Types of schemes to provide benefits may include universal benefit, social insurance, social assistance, negative income tax, public employment or employment support.

Countries need to raise awareness and disseminate information about Social Protection Floors and devise progressive extension implementation strategies. In such process, ensure reaching PLHIV and KVP, many are unaware of available programmes, enrollment procedures or discouraged by the system due to stigma or discrimination encountered in the process.

The **CRITICAL ROLE of HIV practitioners UNAIDS family, civil society organizations and national social security administrations** are: **to ensure** effective and HIV sensitive national social protection floors implementation by:

- **Inclusion of accessible, affordable and quality HIV and AIDS services in national Social Protection Floor (SPF) assessment**

The **national SPF assessment** is a key step in a country's effort to review and update their social security system. This is the window of opportunity for United Nations entities & partners to collaborate with concerned national SPF administrations. Countries previously did not include HIV services in their social security systems, when assess SPF, can include the costing of different levels of coverage for HIV & AIDS related services, both medical and social. This will facilitate a country's financial and fiscal planning to

progressively incorporate HIV and AIDS related social protection coverage.

➤ **Consultation with PLHIV representatives or associations in national SPF review, dialogue process and monitoring**

Improved **Social Protection Floor literacy** through raised awareness of available benefit, eligibility criteria and enrollment procedures; promotion of the ILO's one-stop-service for both SP and employment assistance which improves PLHIV & KVP uptake of SPF services; can be jointly facilitated by the UNAIDS, ILO's social partners, national social security administrations and civil society organizations to increase SP access by eligible PLHIV and their households.

➤ **Inclusion of support for disadvantaged groups and people with special needs in the social security extension strategies**

HIV practitioners, civil society organizations and the UNAIDS family can collaborate with the national social security system to facilitate active engagement representatives of PLHIV and KVP in the country SPF review dialogue. Apply the principle of **Greater involvement of PLHIV** can help improve the HIV-sensitivity of national social security systems.

➤ **Establishment of a legal framework to secure & protect private individual information in national social security data system**

The national social security administration, national and international HIV policy-makers

and practitioners could provide technical input to establish a sound legal framework to protect individual's information in a national social security data system. Protecting the privacy & confidentiality of HIV related information is critical to gain the trust of PLHIV who might otherwise shun the system for fear of being stigmatized or discriminated against, including in employment.

In conclusion, the UNAIDS cosponsors, ILO constituents, civil society organizations can collaborate with countries' social security administrations to implement the Social Protection Floor Recommendation thus contributing to realize the getting to Zero vision and the MDGs and post-2015 development goals in accordance with their respective mandates.

The ILO Recommendation concerning HIV and AIDS in the World of Work, 2010 (No.200) further affirmed the principle of non-discrimination in accessing social security, occupational insurance or related benefits<sup>vii</sup>.

Let's joint our efforts and act now.

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<sup>i</sup> Recommendation concerning national floors of social protection, June 2012 , No. 202.

<sup>ii</sup> Ibid, i.

<sup>iii</sup> World Social Security Report: Providing coverage in times of crisis and beyond, 2010/11

<sup>iv</sup> Social protection: A development priority in the post-2015 UN development agenda, Thematic Think Piece, UN system task team on the Post-2015 UN Development Agenda, ECA, ILO, UNCTAD, UNDESA, UNICEF, 2012

<sup>v</sup> UNAIDS strategy, 2011-2015

<sup>vi</sup> HIV and Social Protection Guidance Note, UNAIDS, 2011

<sup>vii</sup> Recommendation concerning HIV and AIDS and the World of Work, 2010 (No. 200), International Labour Conference, June, 2010