



FACTS ON *the HIV/AIDS crisis and child labour*

The HIV/AIDS pandemic adds a new and tragic dimension to the problem of child labour in many countries around the world. Millions of children have been orphaned by the death of one or both parents from HIV/AIDS. Millions more will be.

Many of these orphans find security in the households of relatives. Others, however, drop out of school and look for work to survive. An especially harsh burden is placed on girls, who often have to provide care and household services for the entire family when a parent becomes ill or dies. Even children cared for by grandparents or other relatives may have to work to help provide income for guardians and siblings.

High mortality among adults in their reproductive and productive prime (15-49 years) and the number of children growing up without a responsible guardian have complex inter-generational impacts on the world of work. With a lack of adult mentors and limited prospects for schooling, children miss out on the developmental skills and technical know-how needed to access decent work in their adult lives. The impact of HIV/AIDS on communities and families undermines the process of socialization of children in its broadest sense, inverting care-giving roles and giving rise to social exclusion and loss of identity.

IPEC study on HIV/AIDS and child labour in Sub-Saharan Africa

A recent IPEC study, *Combating Child Labour and HIV/AIDS in Sub-Saharan Africa* (B. Rau, Geneva 2002), comprises reviews of policies and programmes to combat both AIDS and child labour in Tanzania, South Africa, and Zambia, as well as Rapid Assessment surveys on the impact of HIV/AIDS on child labour in these three countries plus Zimbabwe. The study confirmed a number of linkages between child labour and the HIV/AIDS pandemic as well as the need for a multi-dimensional approach to address the issue.

One of the valuable outcomes of the study was the identification of a broad range of responses, large and small, to these intersecting issues. In South Africa, Tanzania, and Zambia, interventions undertaken by governments, employers, trade unions, and community-based groups alike demonstrate that much has been learned about addressing

How the HIV/AIDS crisis links to child labour

The HIV/AIDS crisis has a number of links to child labour, for example it:

- adds to the number of vulnerable children, especially orphans and HIV-infected children;
- increases demands on public and private services, such as health care;
- increases the burden on community groups and institutions assisting both caregivers and vulnerable children;
- places an especially harsh burden on girls, who often must provide care and household services for the entire family;
- puts pressure on children to work to assist their parents, guardians and siblings in securing a livelihood.

In addition, child labourers are more at risk of becoming infected by HIV/AIDS because they are often working in situations where they are vulnerable to sexual abuse. This is particularly the case of children engaged in the worst forms of child labour, such as prostitution, street vending, and domestic work. Given their high proportion in prostitution, girls are especially at risk of becoming infected and further spreading the disease.



HIV/AIDS and child labour. It also identified a growing number of good practices that are worthy of closer study, further testing, and eventual replication.

In a general sense, the study found that, in spite of efforts made at various levels, the process to reverse the trend in the countries reviewed has been slow and that more complete information is badly needed. Without better information, efficient policy and programme planning are compromised.

Lessons learned from the interventions reviewed by the study:

- The focus on prevention must be strengthened.
- Governments must allocate more of their resources to provide an enabling environment for programmes and initiatives.
- Local communities' responses to HIV/AIDS should be encouraged and supported.
- The responsibility of men towards the care of children and prevention of the disease must be promoted.

In developing countries the human capital losses arising from the pandemic exacerbate a multitude of other problems faced daily by children, their families and communities. These include pervasive poverty, unemployment and lack of social services. The pandemic is also an additional and growing obstacle to education, as it has also claimed significant numbers of teachers among its victims in some countries. As a result, HIV/AIDS poses a particular challenge for the elimination of child labour and constitutes a real threat to the significant results achieved so far in the global fight against child labour.

Global estimates report three million children under age 15 suffering from HIV/AIDS and another 13 million from the same age group who have lost one or both parents to AIDS. Very little is known, however, about children who are infected and even less about those at high risk of becoming infected. A gender-disaggregated breakdown is especially lacking.

It is well established that poverty leads to child labour and vice-versa. Not only does HIV/AIDS add a tragic dimension to this vicious circle; it also makes the poverty-child labour link more difficult to break by exacerbating the root causes of child labour and adding strongly to the supply of child labourers. As a consequence of the losses in human resources due to the pandemic, inter-generation solidarity – of adults caring for children, sending them to school and ensuring the future of society – disintegrates.

While IPEC has been addressing vulnerable groups in child labour since its inception, up until recently, little attention has been given to the specific problems of children who become child labourers because of family or caregivers ill or dying from HIV/AIDS or children who become infected because of sexual abuse associated with their work. As a result, knowledge on

the subject is still limited compared with other vulnerable groups. Given the sharp rise in the number of children affected by the HIV/AIDS crisis over the past few years, particularly in Africa, IPEC, in coordination with ILO/AIDS, has begun to make a significant effort to close this information gap and identify appropriate responses. In addition to a recently issued report on HIV/AIDS and child labour and in Sub-Saharan Africa, four IPEC Rapid Assessment surveys of the problem have been completed for Tanzania, South Africa, Zambia and Zimbabwe. IPEC will also participate in the African Ministerial Meeting on Child Labour and HIV/AIDS to be held in Harare in 2003.

Role of the ILO

The ILO Programme on HIV/AIDS and the World of Work (ILO/AIDS), created in November 2000, assists all ILO units, programmes and field offices to integrate a response to HIV/AIDS in their ongoing activities. The *ILO Code of practice on HIV/AIDS and the world of work* provides international guidelines to inform workplace practice and national policy-making concerning HIV/AIDS. It contains several specific provisions that can help protect children in the context of HIV/AIDS.

From IPEC's perspective, action against HIV/AIDS-related child labour also fits well into the IPEC Time-Bound Programme approach, which emphasizes the need to address the root causes of child labour by linking action against child labour to the national development effort and emphasizing economic and social policies to combat poverty. This approach is founded on total commitment and active participation of governments, the social partners and other stakeholders. It can also address the combined problem of AIDS and child labour in policy and programme development, implementation and monitoring through enhanced inter-agency collaboration.

Relevant ILO Conventions and Resolutions

Convention No. 182 (1999) on the worst forms of child labour and associated Recommendation No. 190

Convention No. 138 (1973) on the minimum age for admission to employment and associated Recommendation No. 146

Convention No. 156 (1981) on workers with family responsibilities

Resolution concerning HIV/AIDS and the world of work (2000)

ILO Code of Practice on HIV/AIDS and the world of work (2001)