MEMORANDUM OF UNDERSTANDING

This Memorandum of Understanding (MOU) signed on

5th Day of December, 2013

BETWEEN

MINISTRY OF PETROLEUM & NATURAL GAS,
GOVERNMENT OF INDIA

&

DEPARTMENT OF AIDS CONTROL,
MINISTRY OF HEALTH & FAMILY WELFARE
GOVERNMENT OF INDIA
INTRODUCTION

India has one of the largest number of population living with HIV/AIDS in the world. Given the prevalence rate of 0.27 percent, 21 lakh people are estimated to be living with HIV/AIDS in the country. HIV is driven by a number of socio-economic factors; therefore, health interventions alone are not sufficient to address causes and consequences of the epidemic. It requires multi-faceted and multi-sectoral responses. Mainstreaming approaches to HIV have increasingly gained ground with the realization that the non-health sector can play an important and meaningful role in reducing vulnerability to HIV and mitigating its impact on those infected and affected.

Department of AIDS Control (DAC) and Ministry of Petroleum & Natural Gas (MoP&NG) are hereinafter referred to together as “the parties”

Article 1

1. DEPARTMENT OF AIDS CONTROL

1.1 Department of AIDS Control is the nodal agency for coordinating response with respect to HIV (Human Immuno Deficiency Virus) and AIDS (Acquired Immuno Deficiency Syndrome) in India. Department of AIDS Control has initiated several measures towards mainstreaming and partnership with various relevant Ministries in the country.

1.2 The National AIDS Control Programme is implemented through 38 State AIDS Control Societies (SACS)/ Municipal AIDS Control Societies in states and union territories. NACP places importance on mainstreaming HIV/AIDS by a) enhancing coverage and reach of information on STI/HIV prevention and services to large workforce, especially informal settings consisting of migrants b) providing STI/HIV related information and services through existing health infrastructure available in various ministries and its departments and autonomous bodies and c) facilitating Social protection through HIV inclusive schemes for people infected and affected with HIV/AIDS.

1 HSS NACO, 2011
2. MINISTRY OF PETROLEUM AND NATURAL GAS

2.1 India is the fifth-largest energy consumer in the world, with oil and gas accounting for 45% of the country’s energy needs. In the Asia-Pacific region, India is the fourth largest Oil consumer and is fast emerging as the focal point for the future development of the Asian natural gas market. India is and shall remain heavily dependent on coal for about half of its primary commercial energy requirements with the other half being dominated by oil and gas put together. Most of the incremental demand in the projected global oil consumption is expected to emanate from Developing countries including India where oil consumption is expected to grow at the rate of 2.4 percent as against the world average of 1.4 percent.

2.2 The Ministry of Petroleum and Natural Gas is entrusted with the responsibility of exploration and production of oil and natural gas, their refining, distribution and marketing, import, export, and conservation of petroleum products and liquefied natural gas. It has fourteen PSUs and subsidiary organizations, among which include several Central Public Sector Enterprise’s (CPSEs) enlisted as Maharatna, Navratna and Miniratna CPSEs:

2.3 Indian Oil Corporation Ltd., Oil & Natural Gas Corporation Ltd., ONGC Videsh Ltd., Oil India Ltd., Bharat Petroleum Corporation Ltd., Gas Authority of India Ltd., Hindustan Petroleum Corporation Ltd., Balmer Lawrie & Co. Ltd., Chennai Petroleum Corporation Limited, Mangalore Refinery and Petrochemicals Ltd, Engineers India Ltd. and Numaligarh Refinery Ltd. are the PSUs / subsidiaries under the control of Ministry of Petroleum & Natural Gas.

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2 Report by Ernst & Young- HR Challenges in the Indian Oil & Gas Sector, Petrotech 2010
3. RATIONALE FOR MAINSTREAMING HIV

3.1 As per HIV Sentinel Survey (HSS) 2011 report, 86% of those infected are in the age group of 15 to 49 years, which is one of the most productive segments of the society. There is an urgent need to protect the working force from the epidemic as well as provide optimum care and support services to affected and infected population. Thus, HIV / AIDS needs to become a part of workplace health promotion policies because the workplace has a vital role to play in the wider struggle to control the epidemic, as it affects workers and their families, enterprises and the communities which depend on them. HIV has negative effects amongst the workplace in terms of loss of income and benefit, loss of skills and experience, falling productivity and reduced profit. Workplace programme can raise awareness and support prevention, expand access to information & health services and prevent discrimination of workers infected or sick.

3.2 The epidemic in the country is changing according to emerging vulnerability factors related to Poverty, Migration, Marginalization, Gender, and therefore the need for collaboration between sectors, structures and systems that deal with migratory and floating population and their increased involvement in risk reduction and impact mitigation of the epidemic. This calls for sustained and committed actions in the workplace policy so that people who are vulnerable to HIV and those affected by HIV have access to health care facilities, policies to safeguard their jobs and address stigma & discrimination related issues that affects the work environment. Those who require employment or livelihood options should have the opportunity and choices.

3.3 Thus lack of awareness, difficult work situations and limited access to services and inadequate mechanism to address the challenge at operating locations / areas heighten the vulnerability to HIV / AIDS. Ministry of Petroleum & Natural Gas can contribute significantly towards limiting the spread of HIV and mitigate the impact of the epidemic by help prevention through education and peer support, offer care, support & treatment, ensuring job security and rights and ensure social protection.
4. SCOPE OF MAINSTREAMING HIV

4.1 Under the ambit of Corporate Social Responsibility (CSR) each Central Public Sector Enterprises (CPSE’s) has to make a budgetary allocation for CSR and sustainability activities/projects for the year. Through the proactive approach of Corporate Social Responsibility, many Public and Private sector enterprises under the Ministry of Petroleum and Natural Gas have made a significant effort to achieve socio-economic development of the surrounding areas of the plant/project. Broadly, under CSR the health related activities carried out by Oil PSUs are:

4.2 Indian Oil Corporation Ltd (IOCL) extends liberal medical facilities to the employees and their family members. At refinery location, they have 25-bedded hospitals for preventive and first aid care. For any specialized treatment, the employees are referred to nominated hospitals for further evaluation and treatment. At other locations, employees take treatment from Authorised Medical attendants and / or from nominated Hospitals. Provision of HIV/STI prevention, counseling and testing services in the remote locations is undertaken through Mobile Health vans. IOCL is operating 52 Mobile Medical Vans (40 in AP and 12 in UP), each covering 10 to 15 remote villages in a week in and around their Kisan Seva Kendras (KSK) for providing primary health care by providing free consultation by MBBS doctor and free medicines. The mobile medical vans cover about 600 villages and provides primary health care to about 15 lakh patients per year. Besides providing primary health care services, they also organize awareness camps on small family norms, HIV/AIDS, Hygiene, Eye etc.

4.3 Hindustan Petroleum Corporation Ltd (HPCL) extends liberal medical facilities to the employees and their family members. Long Distance Truckers (LDT) are among the high risk category for AIDS as identified by the Department of AIDS Control and this very target group is one of the most important and direct stakeholders in the supply chain of HPCL. Project Suraksha, one of the major CSR initiatives at HPCL which is a targeted intervention with LDTs for providing basic health facilities as well as AIDS Awareness, STI diagnosis and treatment. The Khushi Clinics, as they are called, has
been set up at certain highway retail outlets of the corporation which are frequented by the targeted population. These clinics include a doctor, a nurse, a counselor and out-reach-worker (ORW) who implement the project through different intervention methods like counseling, behavioral change communication sessions, social marketing of condoms etc. Beneficiaries may also include other transporters, contract laborers, work-shop mechanics etc. who are employed in the adjacent transport and industrial hubs. This engagement is an obvious and rational engagement for the corporation not only in terms of integrating CSR in the business but also innovative utilization of resources of the corporation i.e. space and building to make an impactful intervention that reaches out to a section of the supply chain elements who are otherwise neglected and unable to avail quality services during their stressful work periods. This arrangement ensures good health of the supply chain workers and consequently the safety of the inflammable products that is transported.

4.4 ONGC has an enduring commitment to being alive and sensitive to the social health and ethical issues confronting its employees and their families. The organization considers HIV/AIDS is not only a health problem but also an issue that impacts productivity and wellbeing of individuals in their work place. ONGC has issued work place policy of HIV/AIDS prevention and control on 4th January 2011 in line with National Work Policy on HIV/AIDS. All the employees and their dependents are given full care and support and those who are either HIV positive or harbouring diseases are not discriminated against at work place or while they are attended to medically. There is no gender difference observed in the level of care provided to these patients. The awareness activities on HIV are organized at all work centres through lectures and group discussions. The World AIDS Day on 1st December is being observed by medical sections by all work centres.

4.5 Bharat Petroleum Corporation Ltd (BPCL) extends liberal medical facilities to the employees and their family members. Under CSR, the projects on health, for e.g health-camps/mother and child healthcare, can be dovetailed with awareness on HIV/AIDS. BPCL encourages their Retail Outlets (petrol pumps) to display information on HIV/AIDS. On occasions like World AIDS day, important business locations like refineries, installations, depots, bottling plants can be encouraged to
create awareness on HIV/AIDS amongst truckers, migrant population, employees, contract workers as well as adjoining community.

4.6 Balmer Lawrie & Co. Ltd has initiated action for creating awareness on HIV/AIDS amongst different sections of the community through their partner NGOs engaged for CSR activities. The Company has conducted ‘Awareness Camps’ in collaboration with ‘West Bengal State AIDS Prevention & Control Society’. Under this program, camps were held in our Kolkata based plants/offices and various colleges in and around Kolkata to create awareness as also impart training to employees/students on HIV/AIDS issues.

4.7 Mangalore Refinery & Petrochemicals Ltd (MRPL), under the project theme “Swasthya Samrakshan” on health care and family welfare, conducts many CSR activities such as running a free Primary Health Centre at Chelaieru Rehabilitation Colony, distributing the medicines to the needy, organizing free computerized eye checkup camp and free distribution of spectacles, Medical Camps, Artificial Limb Camp, medical equipments to District Hospital and Primary Health Centres, financial assistance to Malaria Control Cell, distribution of Fogging Machine to local Panchayats and City Corporation, financial support to organize de-addiction camp, financial aid to patients who are suffering from major illness, supporting to organize medical workshop, world heart day etc.”

4.8 EIL organises awareness/preventive programmes for its employees on overall good health including prevention of HIV/AIDS, which are generally conducted by the empanelled / nominated hospitals. Under the CSR Policy of the EIL, Health Care is a thrust area for ensuring health services to the under privileged sections of the society. Under this initiative EIL provides Mobile Medicare Units, Ambulance, Mobile Eye Care Units, Cancer Detection equipments, free health & eye check up camps etc and has also facilitated construction / upgradation of Hospital Buildings.

4.9 GAIL (India) Ltd has been undertaking a range of initiatives focused at benefiting the socially & economically under-privileged segment of society, largely in and around its major work centres. GAIL (India) Ltd has provided support for setting up specialized medical units in Government hospitals, augmenting infrastructure,
facilities and equipment in hospitals/Community Health Centres, organizing medical camps for TB, Cancer patients, Thalassemia screening, Eye screening & rectification/spectacles distribution. GAIL has also established a Vitreo-Retinal Unit in Eye Hospital in Madhya Pradesh and has also provided Diagnostic equipment, Computerised ECG equipment, ambulances, biochemistry analysers to various hospitals. In order to enable specialized professional services, it has also provided and is maintaining a Tele-medicine centre in a Government Hospital in Uttar Pradesh. With the objective of contributing towards prevention of HIV/AIDS, the Company has been organizing regular ‘HIV / AIDS Awareness Generation Camps’ at its major work centres at Pata in District Auraiya in U.P. and Vijaipur, in District Guna in M.P. The beneficiaries of these camps are essentially drawn from the truckers community who constitute a vulnerable and high risk segment, as well as the local women and youth. Along with this, STI Clinics have also been set up at Pata and Vijaipur, where the testing services and Anti-Retroviral Therapy (ART) is being provided to people affected with HIV / AIDS.

4.10 OIL has organised 16 mobile dispensary camps per week in its operational areas, OIL also carries out other health-related CSR-activities for the surrounding population like school health programmes, regular immunization drives, free cataract surgeries, complicated ENT-surgeries at least once in a year, free dental camps, heart diseases and diabetes detection camps, free cancer detection camps, etc. OIL provides regular financial assistance to the premier health institutes of the North-East including a few in government sector. It also runs a Nursing School (recognized by both Assam Nursing Council and Indian Nursing Council) where students of North-East are imparted GNM – training free of cost.
Article 5

5. OBJECTIVES OF THE MOU

5.1 Reaching out to all employees in oil and Gas PSUs with information on HIV through integration in human resource training.

5.2 Reaching out to all contractual workers / migrants workers through risk reduction for migrant population in labour colonies and work sites through communication and mid media activities.

5.3 Providing package of services on ICTC/PPTCT/STI/HIV through integration in existing health infrastructure of PSUs.

5.4 Adoption of “National policy on HIV/AIDS and the World of Work” by all PSUs.

5.5 Provision of social protection to people living with HIV under Corporate Social Responsibility.

Article 6

6. KEY DELIVERABLES

6.1 Ministry/PSUs integrate HIV / AIDS in the HR training for ensuring HIV sensitive human resources and non stigmatizing environment.

6.2 Ministry / PSUs include HIV prevention and risk reduction for migrant population in labour colonies and work sites through communication and mid media activities.

6.3 Petrol pumps under each PSUs be encouraged to display information on importance of voluntary blood donation.

6.4 Adopt and implement the “National Policy on HIV/AIDS and the world of work” by all PSUs to protect the workforce from stigma and discrimination. It will also ensure retaining employment of HIV positive people.

6.5 The PSUs through Corporate Social Responsibility (CSR) activities undertake STI/HIV specific initiatives / projects among its health / medical care which caters to the specific needs of the marginalized communities of the society who are more vulnerable to HIV / AIDS.

6.6 Ministry/PSU share information related to HIV related activities undertaken by them with Department of AIDS Control.

6.7 Ministry / PSUs have a designated nodal officer for HIV / AIDS.
Article 7

7.1 ROLE OF MINISTRY OF PETROLEUM AND NATURAL GAS

7.1.1 Issue advisory/directive to PSUs for including HIV prevention and risk reduction for migrant population in labour colonies and work sites through IEC activities.

7.1.2 Issue advisory / directive to PSUs to integrate STI/HIV/AIDS in the Human Resource trainings.

7.1.3 Issue guidance to PSUs to integrate HIV/AIDS in the health and medical services.

7.1.4 Issue advisory for adoption and implementation of work place policies by PSUs.

7.1.5 Deputation of a nodal officer from Ministry of Petroleum and Natural Gas for HIV activities and coordinating with Department of AIDS Control.

7.2 ROLE OF PSUs UNDER MINISTRY OF PETROLEUM AND NATURAL GAS

7.2.1 Information, Education and Communication

- Inclusion of HIV prevention and risk reduction for migrant population in labour colonies and work sites through communication and mid media activities.

- Ensuring display of information on prevention and services in appropriate locations including work site, labour colonies and health service area.

- Promote Awareness generation through health camps and display of IEC materials like panels, hoardings etc in the strategic locations.

- Inclusion of information on STI/HIV prevention & services in all printed materials for dissemination.

- Observation of World AIDS Day (WAD), Voluntary Blood Donation Day (VBDD), and Voluntary Blood Donor Day.

7.2.2 Training

- Inclusion of STI/HIV/AIDS in the Human Resource training systems for creating awareness about prevention and services as well as ensuring non stigmatizing environment for PLHIV.

- Ensuring of information on STI/HIV prevention and services through capacity building and peer educators to employees, especially informal and contractual employees/workers.
• Ensuring of capacity building of medical and paramedical staff on STI/HIV counseling, testing and treatment.

7.2.3 **Integration of Services**

- Inclusion of HIV counseling and testing services in existing health services of PSUs and providing mobile services for HIV counseling and testing in remote locations.
- Inclusion of STI and ART treatment services in existing health services of PSUs and build referral linkages, whenever required and feasible.

7.2.4 **Work Place Policy**

Adopt and implement “National Policy on HIV/AIDS and the World of Work”

7.2.5 **Social Protection**

- Inclusion of STI/HIV specific initiatives/projects under its health/medical care through CSR funds.
- Facilitation of schemes and entitlements for social protection of PLHIV through Labour Welfare Association.

7.2.6 **Sharing of Information**

- Sharing information with Department of AIDS Control/ State AIDS Control societies on a quarterly basis.
- Reflection of activities on HIV/AIDS carried out by Ministry of Petroleum and Natural Gas in Annual report and Ministries website.
- Provision of sharing of web link of Department of AIDS Control with the website of Ministry of Petroleum and Natural Gas for information on HIV/AIDS prevention and services.

7.3 **ROLE OF DEPARTMENT OF AIDS CONTROL**

7.3.1 Providing technical support / training material for inclusion of HIV/AIDS in the human resource training systems.

7.3.2 Capacity building of health personnel to facilitate integration of HIV/AIDS in the Health Services (Doctors, nurses, laboratory technicians on syndromic case
Management of STI) which could be direct training or training of trainers as per the number of personnel.

7.3.3 Providing technical support for implementation of IEC and awareness activities in the townships around plants.

7.3.4 Coordinating and providing necessary technical support to Oil and Gas PSUs to integrate STI/HIV/AIDS services in health services.

7.3.5 Sharing nationally approved treatment protocols, guidelines and standards pertaining to STI/HIV/AIDS/ART.

7.3.6 Sharing reporting formats and monitoring mechanisms.

Article 8

8. EXECUTION OF MOU

8.1 Parties will set up a joint working group for drawing up an action plan for PSUs.

8.2 Parties would decide the modalities for execution of the proposal contained in the MOU based on the recommendations of the Joint Working group.

8.3 Parties agree to collaborate and work closely for fulfillment of objectives set in the MOU.

8.4 Both the parties would consult each other and review the progress for implementing objectives of this MOU on yearly basis.

8.5 This MOU will be operative with effect from 5th December, 2013 and any alteration/modifications can be carried out with the consent of both parties.

| SIGNED FOR AND ON BEHALF OF DEPARTMENT OF AIDS CONTROL, MINISTRY OF HEALTH & FAMILY WELFARE | SIGNED FOR AND ON BEHALF OF FOR MINISTRY OF PETROLEUM & NATURAL GAS |
| SHRI LOV VERMA SECRETARY, DEPARTMENT OF AIDS CONTROL, MINISTRY OF HEALTH & FAMILY WELFARE, GOVERNMENT OF INDIA | SHRI VIVEK RAE SECRETARY, MINISTRY OF PETROLEUM & NATURAL GAS, GOVERNMENT OF INDIA |

MoU signed between Department of AIDS Control and Ministry of Petroleum & Natural Gas Page 12 of 13
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<tr>
<td>AIDS</td>
<td>Acquired Immunodeficiency Syndrome</td>
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<td>ART</td>
<td>Anti-Retroviral Therapy</td>
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<td>BPCL</td>
<td>Bharat Petroleum Corporation Ltd.</td>
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<td>CPSEs</td>
<td>Central Public Sector Enterprise's</td>
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<td>CSR</td>
<td>Corporate Social Responsibility</td>
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<td>DAC</td>
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<td>GNM</td>
<td>General Nursing &amp; Midwifery</td>
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<td>HIV</td>
<td>Human Immunodeficiency Virus</td>
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<td>HPCL</td>
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<td>HRG</td>
<td>High Risk Group</td>
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<td>ICTCs</td>
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<td>IEC</td>
<td>Information, Education, Communication</td>
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<td>MoP&amp;NG</td>
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<td>NACP</td>
<td>National AIDS Control Programme</td>
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<td>Voluntary Blood Donation Day</td>
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