



HIV/AIDS policy for the transport sector of Zimbabwe



*HIV/AIDS Policy
for the
Transport Sector
of
Zimbabwe*

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Membership of the Project Advisory Committee

Ministry of Health and Child Welfare

Ministry of Transport and Communications

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National Aids Council (NAC)

National Social Security Authority (NSSA),

National Employment Councils for the three transport sub-sectors

National Employment Council for the Air Transport Industry (NECATI)

National Employment Council for the Transport Operating Industry (NECTOI)

National Employment Council for the Railways (NECR)

Employers' Confederation of Zimbabwe (EMCOZ)

Employers' organization representative from each sub-sector

Air Zimbabwe

Road Transport Operators' Association (TOA)

National Railways of Zimbabwe (NRZ)

Zimbabwe Congress of Trade Unions (ZCTU)

Employees' organisations from each sub-sector

National Airways Workers' Union (NAWU)

Transport General Workers' Union (TGWU)

Zimbabwe Amalgamated Railwaymen's Union (ZARU)

Non-governmental organizations

Zimbabwe AIDS Prevention and Support Organisation
(ZAPSO)

Zimbabwe AIDS Prevention Project (ZAPP)

Zimbabwe AIDS Network (ZAN)

International organizations

International Labour Organisation – Southern African
Multidisciplinary Advisory Team (ILO/SAMAT)

Joint United Nations Programme on HIV/AIDS
(UNAIDS)

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Foreword

Zimbabwe National Transport Sector Policy

Zimbabwe is among the countries most affected by HIV/AIDS in the world. Current estimates show a prevalence rate of 24.6% for adults 15 to 49 years old (MOH Dec 2003). Over 2.3 million people are estimated to be living with HIV/AIDS. An estimated 2600 HIV/AIDS related deaths are reported every week. HIV and AIDS is therefore impacting negatively on the population and reversing the social development gains since independence.

HIV/AIDS has a complex and far-reaching impact on the world of work. Sectors with highly mobile populations are particularly vulnerable to HIV infection.

The transport sector is among those more vulnerable to the HIV/AIDS pandemic due to mobility of workforce particularly truck drivers and their attendants. The employees often travel long distances and spend long periods of time away from their families. In addition, the working conditions of transport sector workers and the tendency for risky sexual behaviour make them very vulnerable to HIV infection. However, AIDS is not a disease of the transport workers alone.

The transport sector comprises road, rail, water and air transport sub-sectors. It also includes the industries that maintain and provide support services to the sector, such as construction industries, fuel stations, truck and bus stops, border crossings, port areas, train stations and airports. Adequate transport infrastructure and transport services are essential for the normal functioning of a nation's economic, social and cultural life.

While the transport sector in this country, particularly the roads subsector, has had an early response to the pandemic, as in all

other sectors, there has been little change in attitudes and behaviour. This is evidenced by an increase in rates of infection and the negative impact on the labour market and families. Business has therefore no option but to step up action in the fight against HIV/AIDS. I believe intensified and concerted action could make all the difference in what has now become a desperate fight for survival – the fight against HIV/AIDS.

As efforts to scale up responses continue, developing guidelines to implement strategic responses and guide sub sector enterprises to develop structured responses has become even more critical. It is in this context that the need to develop a transport sector policy was recognized and acknowledged.

The aim of this policy is to guide and direct the process of dealing with HIV/AIDS in the workplace at all levels in the transport sector of Zimbabwe. The policy provides the framework in which the transport sector employers, workers and their representatives will design and implement programmes or formulate HIV/AIDS policies at sub sector or enterprise level and to implement, monitor and evaluate HIV/AIDS responses at the workplace.

The policy is a result of broad based consultations among workers, employers and their organizations in the transport sector and relevant government ministries (*tripartite social partners*) and draws from the National Policy on HIV/AIDS for the Republic of Zimbabwe, the Statutory Instrument 202 of 1998 (Labour Relations (HIV and AIDS) Regulations, 1998), the SADC Code of Conduct on HIV/AIDS and Employment and the ILO Code of Practice on HIV/AIDS and the World of Work. This policy is a model for a framework response against HIV/AIDS at work.

In recognition of the significant importance of the policy, the policy has been *noted* by the Cabinet Action Committee on Social Services to be read within the context of the Zimbabwe National Policy on HIV and AIDS.

The policy balances individual rights and social needs and provides a platform on which to build strategies for prevention and management of the epidemic at all levels. The policy, therefore, represents the common standards by which the transport sector should deal with the rights and responsibilities relating to HIV/AIDS. It also provides key principles and strategies for comprehensive programme responses in the workplace.

I am confident that the policy will provide a platform on which to motivate for openness, support and action within and across all sectors and workplaces as it emphasizes building partnerships, networks and collaboration among all stakeholders for concerted proactive responses to HIV/AIDS in the country.

L C Museka

Secretary for Public Service, Labour and Social Welfare
Government of Zimbabwe

18 November 2004

Abbreviations

AIDS	Acquired Immunodeficiency Syndrome
EMCOZ	Employers' Confederation of Zimbabwe
HIV	Human Immunodeficiency Virus
HCU	HIV/AIDS Co-ordinating Unit
ILO	International Labour Organization
NAC	National AIDS Council
NAWU	National Airways Workers' Union
NECATI	National Employment Council for the Air Transport Industry
NECR	National Employment Council for the Railways
NECTOI	National Employment Council for the Transport Operating Industry
NRZ	National Railways of Zimbabwe
NSSA	National Social Security Authority
NGO	Non-Governmental Organization
PLWHA	People Living with HIV/AIDS
SADC	Southern African Development Community
SAMAT	Southern African Multidisciplinary Advisory Team
SI	Statutory Instrument
STI	Sexually Transmitted Infection

TOA	Transport Operators' Association
TGWU	Transport General Workers' Union
UNAIDS	Joint United Nations Programme on HIV/ AIDS
ZAN	Zimbabwe AIDS Network
ZAPP	Zimbabwe AIDS Prevention Project
ZAPSO	Zimbabwe AIDS Prevention and Support Organisation
ZARU	Zimbabwe Amalgamated Railwaymen's Union
ZCTU	Zimbabwe Congress of Trade Unions

1. Preamble

The HIV/AIDS epidemic is growing at an alarming rate in most African countries, with Southern African countries experiencing the highest prevalence rates in the world. The epidemic has become a serious development issue no longer just a health problem. Its impact cut across all sectors of the society, leaving no-one unaffected. In high-prevalence countries such as Zimbabwe, HIV/AIDS affects individuals, their families and communities, enterprises and productivity, public services and the nation's entire development agenda.

In Zimbabwe, about 2.3 million people are estimated to be living with HIV/AIDS. The adult (15-49 years old) prevalence rate is estimated at 33.7% (UNAIDS, 2002)¹ and around 2500 HIV/AIDS related deaths are reported every week.

HIV/AIDS has complex and far-reaching impacts on all the sectors of the economy, but sectors with highly mobile employees such as the transport sector are particularly vulnerable due to inherent characteristics of their working conditions. The employees often travel long distances and spend long periods away from their families increasing the likelihood of risky sexual behaviour. The employees' comparative wealth, also enable them to purchase sex from commercial sex workers and other willing adults thus increasing their risks of infection.

The transport sector comprises road, rail, water and air transport sub-sectors. It also includes the industries that maintain and provide services to the sector, such as service stations, truck and bus stops, border crossings, port areas, train stations and airports. The existence of an adequate transport infrastructure and the

¹ United Nations Programme on HIV/AIDS (2002), Zimbabwe: Epidemiological Fact Sheets on HIV/AIDS and Sexually Transmitted Infections. July 2002.

provision of transport services are essential for the normal functioning of a nation's economic, social and cultural life.

Although there is a high awareness of HIV/AIDS issues, achieved through various preventive and awareness programmes, there has been little change in attitudes and behaviour. This is evidenced by an increase in rates of infection and the negative impact on labour markets and families.

2. Aim and scope of policy on HIV/AIDS

The aim of this policy is to guide and direct the process of dealing with HIV/AIDS in the workplace at all levels in the transport sector of Zimbabwe. The policy provides the framework in which the transport sector employers, employees and their representatives should formulate HIV/AIDS policies at individual enterprises and design, implement, monitor and evaluate practical and proactive HIV/AIDS programmes at the workplace.

This policy applies to all employers and employees, including applicants for work, in the public and private sectors and all aspects of work, formal and informal. For the purpose of this policy, all workplaces are referred to as enterprises.

3. Legal framework

The policy is a result of wide consultations among tripartite partners in the transport sector and other stakeholders. It draws from the National Policy on HIV/AIDS for the Republic of Zimbabwe, the Statutory Instrument 202 of 1998 (Labour Relations (HIV and AIDS) Regulations, 1998), the Labour Act Chapter 28:01, the Code of Conduct on HIV/AIDS and Employment in the SADC, the ILO Code of Practice on HIV/AIDS and the World of Work.

Zimbabwe has ratified the following ILO conventions among some of the labour related issues:

- (i) Discrimination (Employment and Occupation) Convention, 1958 (No. 111)
- (ii) Employment Injury Benefits Convention, 1964 (No. 121)
- (iii) Collective Bargaining Convention, 1981 (No. 154)
- (iv) Occupational Safety and Health Convention, 1981 (No. 155)
- (v) Occupational Health Services Convention, 1985 (No. 161)

These conventions, and others, have been taken account of in the ILO Code on HIV/AIDS and the World of Work.

This policy should be read in conjunction with the Constitution of Zimbabwe, with its various amendments, and all relevant labour legislation that includes the following:

- (i) Labour Relations Act, Chapter 28:01,

This Acts declares and defines the fundamental rights of employees, unfair labour practices, regulate conditions of

employment, negotiations, scope and enforcement of collective bargaining agreements and provide for the prevention of unfair labour practices, among others. Section 5, sub-section (1) of the Labour Act includes non-discrimination on the basis of HIV status.

- (ii) Statutory Instrument 202 of 1998, Labour Relations (HIV/AIDS) Regulations, 1998

The instrument covers the prevention and management of HIV/AIDS in the workplace and is meant to ensure non-discrimination of HIV-infected employees and establishes the rights and responsibilities of both employers and employees.

- (iii) Statutory Instrument 68 of 1990, National Social Security (Accident Prevention and Workers' Compensation Scheme) Notice, 1990

The instrument covers accident prevention, compensation for accidents in factory workplaces as well as diseases contracted during the course of duty, including HIV/AIDS.

- (iv) Pneumoconiosis Act, Chapter 15:08

The act provides for the control and administration of persons employed in dusty occupations, including those infected by HIV.

- (v) The Factories and Works Act, Chapter 14:08

The act provides for registration and control of factories, regulation of conditions of work in factories, supervision of the use of machinery and prevention of accidents, among other issues.

4. Key principles

The policy is guided by twelve key principles and these are described in the ensuing sections. These principles should be recognized when sub-sectors and enterprises are designing workplace HIV/AIDS policies and programmes.

4.1 Recognition of HIV/AIDS as a workplace issue

The recognition of HIV/AIDS as a critical workplace issue calls for commitment by the government, employers and employees to do everything possible to combat the epidemic. The transport sector employers, employees and their representatives should formulate sub-sector and enterprise policies based on the sector policy. The infected employees, if they so wish, should be given an opportunity to make an input into the workplace policies and programmes.

4.2 Prevention

Prevention is central to all efforts in combating the HIV/AIDS epidemic. A holistic, comprehensive, proactive and practical approach to HIV prevention is to be adopted. This involves the design, implementation and co-ordination of various interventions to change attitudes, beliefs and risky sexual behaviour of employees, spouses and communities. Employees should be provided with information and adequate education to ensure behaviour change. Such information should support shared confidentiality, especially with partners, to reduce the risk of re-infection and infection.

4.3 Non-discrimination

Human rights and dignity should be observed irrespective of HIV status. People living with HIV/AIDS (PLWHA) should be protected against stigmatization, victimization and discrimination by co-employees, clients and employers at the workplace.

4.4 No screening for purposes of exclusion from employment or work processes

Employees should not be tested for their HIV status for purposes of recruitment, termination of employment and access to training and promotion. The medical examinations should test the physical fitness of the employee or prospective employee to perform the job in question and should not include the test for HIV status. Indirect screening methods such as questions in verbal or written form about previous HIV tests or questions related to the assessment of risky behaviour, should not be permitted. While it is recognized that employers are not responsible for providing insurance services to employees, they should not enforce any testing for insurance purposes and all information that they already have on the employees' HIV status should remain confidential.

4.5 Confidentiality

All health information should be handled by medical personnel in accordance with the law. Confidentiality is premised on no compulsory disclosure of HIV/AIDS status or screening for HIV status. Disclosure of status should be on a voluntary basis, with written consent by the concerned employee and after counselling on the potential consequences. Employers and health care personnel should be provided with training and guidance

to ensure that confidential medical information is handled in accordance with the law.

4.6 Continuation of employment relationship

Employment should not be terminated on the basis of HIV status. Every employee should be treated the same irrespective of HIV status. As long as the employee is fit, he or she should be allowed to continue working. However, if the working environment is likely to worsen the condition of the employee, the employer may, in consultation with the employee and representatives, arrange for transfer to a more suitable job and location but with no loss in status and benefits. Where the employee with an HIV/AIDS-related condition is too ill to continue to work and where alternative working arrangements, including extended sick leave, have been exhausted, the employment relationship may cease in accordance with anti-discrimination and labour laws and respect for general procedures and full benefits.

4.7 Healthy working environment

Occupational health and safety should be assured in the workplace. A healthy working environment ensures security to both infected and uninfected employees. Practices and procedures should address vulnerability of employees and protect them from potential HIV infection.

4.8 Gender equality

Gender equality should be promoted in all workplace preventive and care programmes and the different needs of both men and women should be addressed in all programmes. Gender sensitivity and awareness, especially the need for women to know their rights, should be

ensured. Men and women should respect each other's sexuality. Policies and programmes should take cognizance of the fact that women are more vulnerable to HIV/AIDS due to their biological make-up, socio-economic and cultural factors.

4.9 Continuous social dialogue to include people living with HIV/AIDS, tripartite partners and the larger community

Open dialogue among social partners enhances responses to HIV/AIDS by transport enterprises, individuals, families and communities. The involvement of tripartite partners and other stakeholders in the community such as local authorities, self-help organizations, religious groups and their leaders, civic organizations and non-governmental organizations provides a supportive environment to combat HIV/AIDS. This encourages openness and voluntary disclosure of status by the infected thus helping to provide timely care and support to infected employees and their families by employers, co-employees and the community.

4.10 Care and support

A compassionate and caring social and workplace environment is necessary for positive support to people living with HIV/AIDS. Care and support of the infected and the affected families is essential in lessening the economic burden and social and psychological stress. Government and employers should assist in providing healthy food and treatment to the infected employees. Material and psychological support should be provided for affected family members, especially spouses and children.

4.11 Tripartite partners should be involved in policy formulation and implementation of HIV/AIDS programmes

The success of this policy depends on the full involvement of all transport sector tripartite partners in the formulation and implementation of policies and programmes at sector, sub-sector and enterprise levels. There is need for effective communication of HIV/AIDS policies at all levels.

4.12 Continuous review of policy

There should be continuous monitoring, evaluation and review of policies and programmes at the enterprise, sub-sector and sector levels.

5. Policy objectives and strategies

The policy on HIV/AIDS for the transport sector of Zimbabwe should be implemented by the bi-partite partners of business and labour. The role of Government is to provide the legal framework for effective implementation of the policy. A holistic, comprehensive and co-ordinated approach to fight HIV/AIDS in the transport sector of Zimbabwe will be achieved through the following objectives and strategies:

Objective 1 To ensure recognition of HIV/AIDS as a workplace issue as evidenced by commitment of tripartite partners

- (i) Each enterprise should establish an HIV/AIDS policy and programmes at the workplace
- (ii) Each enterprise should set up an HIV/AIDS committee made up of representatives of all stakeholders at the workplace
- (iii) Each enterprise should ensure that adequate resources are available for implementing HIV/AIDS programmes at the workplace
- (iv) Each enterprise should ensure that top management introduces the policy to all staff and maintains an interest in workplace HIV/AIDS programmes
- (v) The tripartite partners in the transport sector should establish structures and mechanisms at national, sectoral, sub-sectoral and enterprise levels to effectively implement, monitor and evaluate programmes in a participatory and consultative manner

- (vi) Employers and employees' representatives, through their national employment councils, should include HIV/AIDS issues in collective bargaining agreements in the context of national laws.

Objective 2 To prevent HIV and sexually transmitted infections by promoting sustained behaviour change through implementing holistic and comprehensive workplace programmes

Enterprises should:

- (i) provide education and training on HIV/AIDS prevention, starting with new employees at induction
- (ii) promote faithfulness as a prevention strategy
- (iii) provide male and female condoms in the workplace and educate on and encourage their correct use
- (iv) promote voluntary counselling and testing
- (v) encourage shared confidentiality on HIV status with spouses and workmates, and
- (vi) involve other stakeholders such as church leaders, civic organizations and community-based organizations, as appropriate, in the design and delivery of information, educational and communication materials on different preventive interventions

Objective 3 To eliminate discrimination, stigmatisation, rejection and denial of HIV infected employees. Protect employees from being retrenched or having employment terminated on the basis of HIV/AIDS status

Enterprises should:

- (i) put in place policies and procedures for protecting employees against discrimination at the workplace
- (ii) educate all employees on the provisions of SI 202 of 1998
- (iii) provide all employees with a copy of SI 202 of 1998, translated in local languages where necessary
- (iv) provide training to supervisory and managerial personnel to identify and manage workplace behaviour, conduct or practices which discriminate against or alienate employees with HIV/AIDS
- (v) design and implement programmes at the enterprise level to provide information and education on HIV/AIDS to employees and their families
- (vi) encourage shared confidentiality, especially partner notification

Objective 4 To ensure no screening for HIV status for purposes of discrimination of infected employees in decisions on termination, retrenchments, promotion and training

- (i) Enterprises should provide health education and awareness campaigns to employees and their families
- (ii) Government agencies, in consultation with bi-partite partners at the workplace, should provide guidelines to employers and health personnel on conduct of medical fitness examinations
- (iii) Government agencies, as members of the tripartite partnership, should strengthen enforcement of all relevant legislation

Objective 5 To ensure confidentiality and compliance with policy and legislation

- (i) Tripartite partners should design and provide training on management of health care information to health and non-health personnel at enterprise level and inspectorate staff from government agencies
- (ii) Enterprises should arrange to provide information and training to managerial and supervisory staff and employees on their rights and obligations with respect to management of health information
- (iii) Government agencies, in consultation with bi-partite partners at the workplace, should provide guidelines on workplace procedures to facilitate compliance with policies and the law by employers and employees
- (iv) Government agencies, as members of the tripartite partnership, should strengthen enforcement of all relevant legislation

Objective 6 To ensure continued employment relationship and that infected employees continue to work as long as they are certified fit for appropriate employment

Enterprises should:

- (i) put in place human resources policies and practices that ensure that HIV-infected employees continue to work as long as they are fit for the job
- (ii) where necessary, and after consultation with the employee and employees' representatives, transfer HIV-infected employees to a more suitable job and location without loss in status and benefits

- (iii) provide education and information to company management and supervisory staff and employees on their rights and obligations

Objective 7 To provide a healthy and safe working environment to protect employees against occupational hazards

Enterprises should:

- (i) design, develop and implement proactive systems that promote healthy and safe working environments
- (ii) provide information and training on use of protective devices equipment such as first aid kits to employees and place these in transport vehicles and the workplace in order to prevent infection of employees and the public
- (iii) have the requisite health and safety personnel or have access to the service
- (iv) shorten periods of absence from home and opportunities for indulgence in risky sexual behaviour
- (v) provide adequate accommodation to staff when working away from home base
- (vi) collaborate with service providers to minimize exposure of employees, for example, at border posts for long distance drivers

Objective 8 To mainstream gender into workplace policies and programmes

Enterprises should:

- (i) put in place gender sensitive policies and procedures for protecting employees against gender-based discrimination at the workplace

- (ii) provide training on gender dimensions of HIV/AIDS and gender awareness to management, employees and spouses
- (iii) implement programmes that target men and women explicitly or separately, taking into account cultural dimensions
- (iv) implement programmes that help women enforce their rights
- (v) implement programmes that target spouses as well as contacts
- (vi) provide counselling services and awareness sessions to employees and spouses
- (vii) encourage joint counselling and testing of employees and their spouses

Objective 9 To promote openness and dialogue among social partners in order to create an enabling environment for combating HIV/AIDS in the workplace

Enterprises should involve more stakeholders, as appropriate, in programme formulation, implementation, monitoring and evaluation. Examples of other stakeholders include the following:

- (i) church and religious leaders
- (ii) infected employees, their spouses and children
- (iii) civic organizations
- (iv) local authorities
- (v) community-based organizations
- (vi) non-governmental organizations
- (vii) suppliers and service providers

Objective 10 To provide care and support in order to reduce economic pressure on infected and affected persons due to illness and to ensure adequate resources for medical care, drugs for treatment and food

Enterprises and other social partners, should:

- (i) provide education and awareness on care and support for PLWHA to company management and employees
- (ii) promote joint voluntary counselling and testing of employees and spouses and encourage voluntary shared confidentiality of status with spouses and employers to enable care to be given early
- (iii) assist infected employees and their families with healthy food information and training, treatment and psychological support
- (iv) provide comprehensive treatment of opportunistic infections, including provision of anti-retroviral drugs
- (v) promote home-based care and visits, and
- (vi) promote income generating projects by PLWHA and their families
- (vii) establish employment assistance funds

Objective 11 Tripartite partners to be involved in policy formulation and implementation, and to ensure co-ordination and impact assessment of HIV/AIDS programmes

- (i) Enterprises should ensure effective communication of HIV/AIDS policies and programmes at all levels in the enterprise, including to infected and uninfected employees

- (ii) Tripartite partners should design and implement an advocacy and communication strategy at sectoral and enterprise levels
- (iii) Tripartite partners should agree and provide guidelines on fitness for duty medical examinations to employers and health personnel to ensure compliance with policy and law
- (iv) Enterprises should collect and synthesize information to determine the impact of HIV/AIDS on the workplace by assessing vulnerability of various categories of employees and the effect on enterprise profitability. The information should be used in strategic and business plans

Objective 12 Tripartite partners to monitor, evaluate and periodically review the HIV/AIDS policy and programmes

- (i) Tripartite partners should design a system and tools for monitoring, evaluating and reviewing the HIV/AIDS policies and programmes at sector, sub-sector and enterprise levels
- (ii) Tripartite partners should design and implement a system to co-ordinate the interventions and efforts of the various stakeholders at sector level
- (iii) The tripartite partners in the transport sector should commission periodic research to provide information on the status and progress of implementation of HIV/AIDS interventions for use in policy and programme reviews.

6. Implementation and coordination of policy and programmes

The tripartite partners in the transport sector should set up an HIV/AIDS Coordinating Committee (HCC) that will be responsible for coordinating the various efforts of different agencies responsible for implementing, monitoring and evaluating sector-wide programmes and projects through the national employment councils of each sub-sector. The Coordinating Unit should consult the various stakeholders and come up with indicators for monitoring and evaluating sector programmes and conduct periodic surveys to determine the state of progress on the various objectives through its research function.

The HCU will provide a link with other national and sub-regional initiatives. Indicators for the sector policy and programmes will vary depending on developments in the sector but initially will include the following:

6.1 Process indicators

- (i) The number of enterprises with workplace policies on HIV/AIDS
- (ii) The number of enterprises which have included HIV/AIDS in their organisational strategic plans
- (iii) The proportion of enterprise budgets allocated to and used for HIV/AIDS programmes
- (iv) The number of enterprises with employee assistance programmes to meet the needs of infected employees
- (v) The number of enterprises with active HIV/AIDS programmes
- (vi) The number of employees receiving treatment

- (vii) The number of outreach programmes implemented
- (viii) Number of workplace-based support groups for people living with HIV/AIDS

6.2 Impact indicators

- (i) Reduction in sexually transmitted infection rates
- (ii) Level of knowledge on HIV/AIDS issues
- (iii) Behaviour change
- (iv) The number of deaths through HIV-related illness
- (v) Impact of HIV/AIDS on productivity and profits of enterprises

Appendix 1. Institutional framework and responsibilities of various stakeholders

The key stakeholders in the transport sector include but are not limited to the tripartite partners, that is, government, employers and infected and uninfected employees and their representatives, including trade unions. Other stakeholders include health care service providers, community organizations, NGOs, religious groups and suppliers of goods and services to the transport sector.

1. The role of Government and its agencies

The Government and its agencies, in consultation with employers, employees through their representatives and other social partners, should:

- facilitate and participate in the periodic national policy review processes
- provide guidelines to assist employers in the care and management of HIV/AIDS in the workplace
- promote research on the impact of HIV/AIDS in the workplace and economy by providing the institutional and legal framework
- mobilize funding to support sectoral strategic plans on HIV/AIDS
- enact and revise the necessary legislation in order to eliminate workplace discrimination and ensure prevention, support and care

- supply technical information and advice to employers and employees on how to comply with regulations and the laws on HIV/AIDS in the workplace
- strengthen law enforcement structures and procedures
- provide guidelines to employers and health personnel on medical examinations for fitness for work
- ensure that all employees are covered under the NSSA scheme

2. The role of employers

Employers and their organizations, in consultation with employees and their representatives, should:

- formulate HIV/AIDS policies at individual enterprises
- comply with national laws and policies in relation to negotiating terms and conditions of service and include provisions on HIV/AIDS prevention, support and care in NEC and workplace collective bargaining agreements
- design, commit resources and implement programmes at the workplace to inform, educate and train employees about prevention, care and support, policy on HIV/AIDS and staff benefits and entitlements
- develop strategies to assess and respond to the economic impact of HIV/AIDS on their organizations
- design and implement personnel policies that are in line with this policy and the law
- develop grievance and disciplinary procedures specifying the circumstances and how such procedures can be commenced against any employee who discriminates on the ground of real or perceived HIV status or violates the workplace policy on HIV/AIDS

- support and encourage access to voluntary HIV counseling and testing of employees by qualified health services
- implement their workplace policy and programmes, monitor and evaluate to ensure compliance with sectoral policy and legislation
- establish comprehensive insurance schemes for their employees

3. The role of employees through their representatives and trade unions

The employees, in consultation with their representatives at the workplace and with their trade unions, should:

- actively participate and make an input into sector and workplace policy formulation, programme planning, implementation monitoring and evaluation
- be supportive to infected co-employees
- facilitate liaison with employers and government
- comply with national policies and laws when negotiating terms and conditions of employment relating to HIV/AIDS for collective bargaining agreements
- use existing unions and other enterprise structures to develop information, educational and communication materials and provide employees with information on HIV/AIDS, workers rights and benefits in the workplace
- work together with employers to develop strategies to assess and respond to the economic impact of HIV/AIDS on the enterprise
- work together with employers, government agencies and other social partners to raise awareness of HIV/AIDS prevention and management

- support and encourage employers in creating and implementing personnel policies that are in line with national, sectoral and workplace policies on HIV/AIDS
- champion the employees' cause by taking up issues at the workplace through grievance and disciplinary procedures or reporting all discrimination to the appropriate legal authorities
- develop and carry out training programmes for their members to better understand and articulate the needs of infected and uninfected employees
- advocate for and co-operate with employers to maintain a safe and healthy working environment
- observe rules of confidentiality when carrying out trade union duties
- ensure that factors that increase the risk of infection for certain groups of employees are addressed in consultation with employers
- encourage and support access to confidential voluntary counseling and testing
- network with regional and international organizations in championing the fight against HIV/AIDS in the workplace

4. The role of health care service providers

Public and private health care providers complement the efforts of the tripartite partners in combating the HIV/AIDS epidemic and should:

- participate in the wider social dialogue on HIV/AIDS
- make an input into sector HIV/AIDS policies and programmes

- provide health insurance and benefits on a non-discriminatory basis
- provide prophylactic and palliative health care services

5. The role of communities and NGOs

Communities and other stakeholders such as NGOs, self-help organizations, religious organizations and civic organizations reinforce the work of tripartite partners. They should:

- participate in the wider social dialogue on HIV/AIDS in the workplace and the community
- carry out advocacy work on HIV/AIDS prevention and care for the infected and affected population
- provide support and care for the infected and affected

6. The role of suppliers of goods and services to the transport sector

Suppliers of goods and services to the transport sector are equally affected by the HIV/AIDS epidemic and contribute to the efforts of the tripartite partners. They should:

- be familiar with the sector's policy on HIV/AIDS
- incorporate HIV/AIDS into their policies and strategies
- supply goods and services in a manner that will promote the sector to achieve the objectives of the policy and laws on HIV/AIDS in the workplace

Appendix 2. Glossary of terms

Agencies of Government: capable individuals or organizations that act on behalf of Government in implementing its programmes and/or enforcing laws. These may be Government departments, public institutions or private organizations.

Affected persons: persons whose lives are changed in any way by HIV/AIDS due to the broader impact of the epidemic.

AIDS: the Acquired Immune Deficiency Syndrome, a cluster of medical conditions, often referred to as opportunistic infections and cancers and for which, to date, there is no cure.

Code: a set of rules

Confidentiality: Keeping private information about someone, for example a patient or client, obtained in the course of employment or duty.

Counselling: An interpersonal interaction between a counsellor trained in techniques of counseling and a client presenting with a problem, that enables the client to talk about, cope and deal with the problem presented in an atmosphere of trust and acceptance and confidentiality.

Epidemic: An outbreak of disease on a scale not normally seen in a given population.

Discrimination: is used in this policy in accordance with the definition given in the Discrimination (Employment and Occupation) Convention, 1958 No. 11 of ILO to include HIV status, whether real or perceived.

Employer: is a person or organization employing people under a written or verbal contract of employment which establishes the rights and duties of both parties, in accordance with national law and practice.

Gender sensitivity: Being gender sensitive means having a sympathetic awareness of the social and cultural construction of male and female identity and roles while recognizing the reality of gender differences and complementarity.

HIV: the Human Immunodeficiency Virus is a virus that weakens the body's immune system, ultimately causing AIDS.

Multi-sectoral: An approach that actively involves different sectors, for example transport, agriculture, health, among others and includes Government, private enterprise, non-governmental organizations and other stakeholders.

People living with HIV/AIDS (PLWHA): An acceptable way of describing people who have HIV.

Positive living: The adoption of a healthy lifestyle by PLWHAs, to ensure a longer, more fulfilling life without adversely affecting themselves or others.

Post-test counseling: Counseling after an HIV test to help the client understand and cope with the test results, including ways to reduce the risk of infection if negative or transmission if HIV positive.

Pre-test counseling: Counseling before an HIV test, including a discussion of the test, the reason for doing it and the implication of being tested.

Principle: a general law or doctrine that is used as a guide to behaviour or practice.

Sex and Gender: Sex refers to biological differences between male and female, while gender refers to differences in social roles and relations between men and women. Gender roles are learned through socialization and vary widely within and between cultures. Gender roles are affected by age, class, race, ethnicity, religion and the geographical, economic and political environment.

Screening: may be through direct HIV testing or indirect by assessing risk-taking behaviour or asking questions about tests already taken or about medication.

Shared confidentiality: The sharing of HIV sero status and related issues with people who are important in the care and support of PLWHA.

Support groups: A group of people with the same problem coming together to provide each other with psychological, social, emotional, spiritual, material or other support.

Stakeholder: any individual, group of people or organization that has anything to do with HIV/AIDS in the transport sector, that is, either affected or has an effect.

STI: Sexually Transmitted Infection, which includes conditions commonly known as sexually transmitted diseases (STDs) such as syphilis, chancroid, chlamydia and gonorrhoea.

Termination of employment: is dismissal of an employee at the initiative of the employer or the conclusions of a contract at the initiation of the employee.

Tripartite partners: in the world of work comprise Government and its agencies, employers and their organizations and employees and their representatives (trade unions or any other elected representatives in accordance with national laws or regulations).

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