International Trade Union Confederation
Africa Regional Organization

Achievements of involving workers in fighting HIV and AIDS in the workplace in Africa 2001-2010

in collaboration with
Norwegian Confederation of Trade Unions

Good practices derived from implementing the ITUC Africa/LO-Norway project on “Trade Union Actions against HIV/AIDS at the Workplace”
April 2011
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April 2011
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Foreword

Since the year 2001, the African Regional Organisation of the International Confederation of Free Trade Unions (ICFTU-AFRO) and its successor, the African Regional Organisation of International Trade Union Confederation (ITUC Africa) has been partnering with the Norwegian Confederation of Trade Unions (LO-Norway) to implement the trade union action programme against HIV/AIDS in selected countries in Africa. The aim of this report is to provide documentation of the achievements emanating from implementation of the action programme.

The positive contributions of the programme include the formation of partnerships with employers’ organizations at the regional and national level; the development, publication and dissemination of comprehensive training materials for trade unionists on HIV/AIDS, available in English, French, Portuguese and Kiswahili; and extensive educational activities for shop stewards in the programme countries, aimed at initiate initiating workplace-based HIV/AIDS sensitization.

Through these efforts, and those of others, we are happy to note that there are some encouraging signs concerning the reduction of HIV and AIDS prevalence in all project countries. By implementing the project, we had to overcome the stigma and discrimination that is still common around the globe, and allocate sufficient resources to stop the spread of the virus and ensure that treatment is available to all those affected.

However, the job is far from over. Millions of HIV-positive people still have no access to treatment, millions more are at high risk of infection, and there
are still disturbing signs of increasing incidence in several countries. We are especially concerned that the global economic crisis, and cuts to public expenditure on health, in particular, could undermine the progress that has been made.

As we look for further collaboration, we wish to stress the importance of action at the workplace in fighting the pandemic. The adoption of a Recommendation on HIV/AIDS and the World of Work by the ILO at its June 2010 International Labour Conference must provide further impetus to the work ahead. The ILO Recommendation, the first ever international human rights instrument to focus explicitly on HIV and AIDS and the world of work, clearly establishes the importance of action at the workplace, including voluntary testing and counselling, protection against discrimination; and focuses on the need for engagement with those most vulnerable and at risk. At the same time, we call upon governments to push ahead with a rights-based approach to tackling the HIV and AIDS pandemic.

Finally, we wish to express our deep appreciation to LO-Norway, and in particular Alice Gondwe-Siame, Camilla Houeland, Karin-Beate Theodorsen, Nina Mjøberg for their untiring support throughout the project years. We also applaud the secretary generals of ITUC Africa affiliates in Cote d’Ivoire, Ghana, Kenya, Malawi, Tanzania, Zambia, and Zimbabwe for allowing their educators and shop stewards to participate in the numerous activities of the project.

Kwasi Adu-Amankwah
General Secretary, ITUC Africa
Preface

The aim of this report is to document the good practices that have resulted from almost ten years of work under ITUC Africa/LO-Norway cooperation in HIV/AIDS in Africa. On behalf of the LO-Norway, I take pride to have had this long association with the project. I recall with delight as I participated at the discussion of the Resolution on HIV/AIDS during the former ICFTU-AFRO Congress in Dakar in 1997, when affiliates made deliberate attempts to examine the impacts of the pandemic on the working people. I also attended the deliberations of the sub-committee that drafted the Resolution on HIV/AIDS for the 17th Congress of the ICFTU in Durban in April 2000 that was in favour of launching a trade union action programme against HIV/AIDS. In a similar vein, I also recall the animated proceedings at the ICFTU-AFRO Pan African HIV/AIDS Awareness Conference held in Gaborone in September 2000, and the resulting Gaborone Trade Union Declaration on “Involving Workers in Fighting HIV/AIDS at the Workplace”.

The contribution from the LO-Norway to the programme was more of a call for duty for many of us who have lived through the diverse challenges of the pandemic. To many of us, the HIV and AIDS pandemic is not just about statistics. It is about the terrible impact it has had and continues to have on many of our families and friends. As such, it is more than a call to duty.

Given this background, it is indeed my pleasure and esteem honour to be a part of the project implementation and the documentation process. The idea of the latter process—a collection of national case studies on the role of trade unions in combating HIV/AIDS at the workplace—should give
us the impetus and the resolve to know that trade unions have the desire and the energy to make a difference. The case studies of the “success stories” will only be meaningful if they emphasize how these initiatives could be replicated and scaled-up within individual countries as well as more widely in Africa and beyond. Our expectation is that by providing clear information on the successful achievements, these stories will help trade unions to address our own particular and unique situations in combating the pandemic, while at the same time draw lessons that could inform future interventions at the workplace.

I consider myself lucky enough to have been associated with all the stages of the project. I have benefited from collaboration with Angela Lomosi in her capacity as the overall Regional Project Coordinator of the project, as well as most of the national coordinators. The project would not have been a success without the HIV/AIDS focal persons from the different project participating countries; they have worked very hard to produce the good results that have been reported in this report. I have also benefited as the representative of the LO-Norway in major international forums on HIV/AIDS.

We are indeed grateful to all the national coordinators for the job well done. We appreciate the initial data collection and compilation phase process undertaken by Dr Meja Kasim Kapalata. This work would not have taken this shape without the support and commitment of Dr Mohammed Mwamadzingo. Dr Mwamadzingo was the “architect” of the original project proposal and became the “consultant” for the final documentation process. He has been an asset to the trade union movement in Africa (and globally) and we wish to thank him for agreeing to undertake the final compilation of the success stories as presented in this document.

Alice Gondwe-Siame
Regional Consultant, LO-Norway
Acronyms and abbreviations

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<td>American Center of International Labor Solidarity (USA)</td>
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<td>AFL-CIO</td>
<td>American Federation of Labor and Congress of Industrial Organisations (USA)</td>
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<td>AIDS</td>
<td>Acquired Immune Deficiency Syndrome</td>
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<td>CGT-FO</td>
<td>Confédération générale du travail – Force Ouvrière (France)</td>
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<td>CLC</td>
<td>Canadian Labour Congress</td>
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<td>CSO</td>
<td>Civil Society Organizations</td>
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<td>EU</td>
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<td>FEDUSA</td>
<td>Federation of Unions of South Africa</td>
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<td>FES</td>
<td>Friedreich Ebert Stiftung (Germany)</td>
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<td>FGTB</td>
<td>Fédération générale des travailleurs de Belgique (Belgium)</td>
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<td>FNV</td>
<td>Federatie Nederlandse Vakbeweging (Netherlands)</td>
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<td>ICFTU</td>
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<td>ICFTU-AFRO</td>
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<td>ILO</td>
<td>International Labour Organization</td>
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<td>IMF</td>
<td>International Monetary Fund</td>
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<td>IPAA</td>
<td>International Partnership against AIDS in Africa</td>
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<td>JILAF</td>
<td>Japanese International Labour Foundation</td>
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<td>JTUC-Rengo</td>
<td>Japanese Trade Union Confederation</td>
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<td>LO-Denmark</td>
<td>Landsorganisationen i Danmark (Danish Confederation of Trade unions)</td>
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<td>LO-Norway</td>
<td>Landsorganisasjonen i Norge (Norwegian Confederation of Trade Unions)</td>
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<td>LO-TCO</td>
<td>Swedish Trade Union Council for International Development and Cooperation</td>
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<td>OATUU</td>
<td>Organisation of African Trade Union Unity</td>
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<td>SASK</td>
<td>Suomen Ammattiliittojen Solidaarisuuskeskus (Trade Union Solidarity Centre of Finland)</td>
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<td>Acronym</td>
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<td>British TUC</td>
<td>Trades Union Congress (Britain)</td>
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<td>UNAIDS</td>
<td>United Nations Programme on HIV/AIDS</td>
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<td>UNDP</td>
<td>United Nations Development Programme</td>
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<td>WHO</td>
<td>World Health Organisation</td>
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<td>WTO</td>
<td>World Trade Organisation</td>
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Executive summary

Meaning of HIV and AIDS

HIV stands for Human Immunodeficiency Virus. It refers to the name of the virus which infects a human’s immune system and damages it severely over a period of time. While some viruses, such as such as the ones that cause the common cold or the flu stay in the body only for a few days, the HIV never goes away. In other words, when a person becomes infected with HIV, that person becomes “HIV positive” and will always be HIV positive. Over time, HIV disease infects and kills white blood cells called CD4 lymphocytes (or “T cells”) and can leave the body unable to fight off certain kinds of infections and cancers.

AIDS stands for Acquired Immuno–Deficiency Syndrome. A healthy person usually has a CD4, (white blood cells) count of between 600 and 1,200. When the CD4 count drops below 200, a person’s immune system is severely weakened, and that person is then diagnosed with AIDS, even if he or she has not become sick from other infections.

AIDS is the advanced stage of HIV disease. A person with AIDS has an immune system so weakened by HIV that the person usually becomes sick from one of several opportunistic infections or cancers. If someone with HIV is diagnosed with one of these opportunistic infections (even if the CD4 count is above 200), he or she is said to have AIDS. AIDS usually takes time to develop from the time a person acquires HIV – usually between 2 to 10–15 years.

Once a person has been diagnosed with AIDS, she or he is always considered to have AIDS, even if that person’s CD4 count goes up again and/or they recover from the disease that defined their AIDS diagnosis.
For the purpose of this report, the phrases “HIV/AIDS” and “HIV and AIDS” are used interchangeably, but with a clear understanding that the project under consideration was concerned with the implications of both HIV and AIDS at the workplace.

This report is organized into five chapters. The first chapter is mainly derived from the project document and offers the justification on the important of trade union intervention in the fight against HIV and AIDS at the workplace. This is followed by second chapter that narrates the implementation modalities and achievements of the project at the regional level. The third chapter documents the project achievements or good practices as undertaken in the six core project countries: Cote d’Ivoire, Kenya, Malawi, Tanzania, Uganda and Zambia. A similar approach is followed in the fourth chapter, but for the auxiliary countries that participated in the project in a more ad hoc basis. The countries that fall under this category are Botswana, Eritrea, Ghana, Mozambique, South Africa, Swaziland and Zimbabwe. Lastly, the report highlights the way forward based on the lessons learnt from the project implementation in the last ten years.

Background to the project

For the past ten years, the African Regional Organization of International Trade Union Confederation (and its predecessor, ICFTU-AFRO), the Norwegian Confederation of Trade Unions (LO-Norway) and other cooperating partners have carried out various activities on HIV and AIDS prevention, treatment, care and support in selected countries in Africa. This report is an attempt to document the achievements of the project activities. The aim of this report is to enhance the sharing of knowledge regarding policies, programmes and projects carried out in the context of the project. It is expected that such “success stories” will demonstrate innovative policy prescriptions to enhance the quantity

1 The African Regional Organisation of the International Trade Union Confederation (ITUC Africa) is the main regional trade union organization representing the interests of working people in Africa. The ITUC Africa was founded at its inaugural Congress in Accra, Ghana in November 2007. It groups together the former affiliates of the African Regional Organisation of the International Confederation of Free Trade Unions (ICFTU-AFRO) and the regional organisation for Africa of the World Confederation of Labour (DOAWTU). The project under consideration was initially developed by ICFTU-AFRO was taken over by ITUC Africa at the inaugural Congress in 2007.
and quality of trade union interventions in HIV and AIDS in Africa. The project achievements should also emphasize how these initiatives could be replicated and scaled-up within individual countries, as well as more widely in Africa and beyond. By providing clear information on the successful experiences, these stories will help practitioners address their own particular and unique situations with the benefit of other peoples’ hindsight.

The documentation exercise is aimed at identifying relevant, policy-related results that highlight practical ways to combat HIV and AIDS at the workplace. It is intended that the documentation of the project outcomes will demonstrate existing policy, programme and project accomplishments that are relevant to the policy prescriptions in the context of the pandemic. It is also envisioned that the repository of collected stories will be a valuable tool for promoting wider awareness of what is working with regard to workers’ involvement in combating difficult situations in Africa.

Much of this report is based on the documentation provided by the national coordinators involved in the project implementation. The compilation was undertaken by a consultant identified by ITUC Africa, whom, with the support of the Regional Project Coordinator provided technical support and guidance in the data collection and compilation phase. The stories selected were largely based on the “priority areas” cited in the original project document. In addition, when preparing the stories, it was important to bear in mind the measurable impact of the initiative as regards one or more of the “project activities” listed in the project document.

Since its inception in 2001, the project managed to undertake various activities and achieved the following stated goals at regional and national levels.

**Capacity building**

At the regional level, project achievements include the building and strengthening of capacities of the participating ITUC Africa affiliates to respond to HIV/AIDS at the national and workplace levels. This has taken the form of training of national trade union leaders and their focal points on HIV and AIDS. In addition,
Achievements of involving workers in fighting HIV and AIDS in the workplace in Africa

the project enabled participating trade unions to become more effective in sourcing for funds at country level. The experiences shared during the regional project steering committee meeting have enabled national coordinators to be more aware of the importance of joining the Global Fund Country Coordinating Mechanisms (CCMs). The rotation of the steering committee across the participating countries also enabled coordinators to exchange views and learn from each other and thus build a strong bond among unionists.

Working together with employers

Since the third Project Steering Committee (PSC) meeting in 2006 the project put more emphasis on the need for trade unions and employers’ organizations to work together at regional and national levels to avoid duplication of activities, save on already scarce resources, and create a bigger impact. The main areas that trade unions could work jointly with employers on HIV/AIDS included capacity building, collective bargaining, campaigns, and resource mobilization.

These joint activities involving employers focused mainly on the overall welfare of workers’ and campaigns to make ARVs and treatment affordable to those who need support. On their part, employers were eager to work with trade unions other institutions at the national to support the strengthening of occupational health and safety programmes through information dissemination, protection at work, and elimination of the stigma and discrimination attached to HIV/AIDS. Some employers also participated in some lobbying activities to provide for affordable drugs for the treatment of opportunistic infections and ARVs.

In many countries, the project encouraged the establishment of a joint HIV/AIDS committee that comprised of both the workers and the employers in the formulation of workplace policies. The resulting policies represented a commitment by workers and employers aimed at protecting the HIV-positive worker from harsh working conditions or unfair dismissal. The policies also encouraged employers to provide treatment to workers whenever they became ill.
The close cooperation of employers and workers was also evident at the regional and international levels. A good example is the joint statement by the General Secretary of the International Confederation of Free Trade Unions (ICFTU) and the Secretary General of International Organization of Employers (IOE) on 12 May 2003. Another example is the joint communiqué between African Regional Organization of the ICFTU (ICFTU-AFRO) and the Pan-African Employers Confederation (PEC) issued on 24 August 2003.

**Participation in international forums**

Through the project support, the ITUC Africa has been visible in numerous international forums related to HIV and AIDS. These include the sponsorship of the Regional Project Coordinator and affiliates, active participation at the 2009 and 2010 discussions at the International Labour Conference, and the 17th session of the UN Commission on Sustainable Development in New York in May 2009.

**Achievements at national level**

At the national level, there have been several achievements, some of which are highlighted below:

- In various countries, shop stewards have been trained as trainers and peer educators on HIV/AIDS. Workers and their families have been mobilized to access VCT and give care and support to those infected;

- Workplace policies, including policies incorporating HIV and AIDS in Collective Bargaining Agreements (CBAs) have been developed at national level;

- Annual campaigns during the World Social Forum, the World Day for Safety and Health at Work (28 April), Labour Day (1 May), and during the World AIDS Day (1 December) permitted workers to lobby employers and government for access to treatment, and helped mobilize workers to access VCT;
HIV and AIDS bipartite committees have been formed at the workplace;

Many workers are now involved in care of People Living with HIV/AIDS (PLWHAs), either through workplace programmes or faith-based arrangements and home-based care;

There has been increased access to Anti-Retroviral Therapy (ART) and Voluntary Counselling and Testing (VCT) in most countries;

There has been an increase in the level of unionization as workers are now more willing to join the trade union due to the expanded services provided through HIV/AIDS education activities; and

There is increased rapport with the civil society, international organizations and government ministries.

Some of the notable achievements in specific countries include:

**Cote d’Ivoire:**

The Union Générale des Travailleurs de Côte d’Ivoire (UGTCI) has developed an HIV/AIDS Charter which, among other things, guarantees treatment, protection and treatment of all HIV positive workers. UGTCI was also involved in dealing with issues of stigmatization and marginalization at the workplace, especially in the hospitality industry. It also established a solidarity fund to support workers and families affected by HIV and AIDS.

**Ghana:**

The Timber and Woodworkers’ Union (TWU), an affiliate of the Ghana Trades Union Congress (GTUC) has a pool of 170 officials equipped with the knowledge and skills necessary for an effective workplace response to HIV and AIDS. The officials trained under the project have been active in the dissemination of information on basic facts about HIV/AIDS at the workplace, with a view to preventing the spread of infection through behavioural changes among peers.
Kenya:

The East African Portland Cement Company developed an HIV/AIDS policy and also encouraged workers to be tested. Those found positive were covered under the company medical scheme. Drugs were also provided for by the company.

Uganda:

Out of the 624 workers sensitized on HIV and AIDS at the Mukono District administration the Uganda Government and Allied Workers’ Union (UGAWU) was able to recruit 30 new members, while the National Union of Cooperative Movement Workers recruited 6 new members. UGAWU also received formal recognition from the district administration.

Malawi:

The Tobacco Tenants and Allied Workers’ Union was able to recruit 40 workers during one of the sensitization sessions at Kalundamawe.

Tanzania:

Trade unions were able to negotiate for light duty placements for workers living with HIV/AIDS at workplaces. This was achieved in the local government at Mukuranga District, Arusha Municipality and at Mufindi Tea Estates in Iringa.

Factors contributing to the project achievements

One of the principal factors that contributed to the positive achievements of the project is the unwavering support from the cooperating partners, and especially LO-Norway which enabled ITUC Africa to implement the proposed activities at regional level and facilitated the workplace-based initiatives at the national level. The personal commitment and remarkable support from Nina Mjøberg and Camilla Houeland gave massive encouragement to the project implementers at the national levels. In the same vein, the LO-Norway consultant Alice Gondwe-Siame was instrumental in providing valuable advice during the project implementation processes.
In addition, the establishment of an internal implementation mechanism in the form of the annual Project Steering Committee (PSC) contributed to the successful implementation of project activities. The PSC is comprised of the cooperating partner (LO-Norway), HIV/AIDS focal points from project participating countries, Global Unions Federations (GUFs), employers and ITUC-Africa secretariat. It is charged with the responsibility of evaluating progress, planning, making recommendations on the way forward, and allocating funds for project activities. This mechanism acted as a peer review process and a self-evaluation tool. Based on exchange of experiences, each of the national coordinators developed their respective new plans for the subsequent years. The meetings were also used to identify capacity gaps and resource persons invited to build the capacity of national coordinators, GUFs and employers.
Chapter one

Background to the Project

Mohammed Mwamadzingo,
Bureau for Workers’ Activities,
International Labour Office, Geneva

Introduction

Since the advent of the HIV and AIDS pandemic trade unions have remained central to the global AIDS response, often displaying courage and resilience in addressing the challenges presented by the pandemic. Trade unions remain best placed to know the exact needs of their members (workers) and their communities and how to address those needs.

According to the Joint United Nations Programme on HIV/AIDS, AIDS has killed more than 25 million people, and HIV has infected about 0.6% of the world’s population since its discovery in 1981 and up to 2006. In 2005 alone, AIDS claimed an estimated 2.4–3.3 million lives, of which more than 570,000 were children. A third of these deaths occurred in Sub-Saharan Africa, retarding economic growth and increasing poverty. According to current estimates, HIV is set to infect 90 million people in Africa, resulting in a minimum estimate of 18 million orphans

The latest statistics on the world pandemic of HIV/AIDS were published by UNAIDS/WHO in July 2008, and refer to the end of 2007. The statistics show

that more than 40 million adults and children worldwide were living with HIV/AIDS, 25 million of whom were living in Sub-Saharan Africa. More than 25 million people have died of AIDS. Africa alone has 11.6 million AIDS orphans, with women accounting for 50% of all adults living with HIV worldwide, and for 59% in Sub-Saharan Africa.

The ILO reports that the majority of the 33.4 million people living with HIV are employed and are in their most productive years, with skills and experiences their families, workplace and country can ill afford to lose. Yet, many workers are forced out of jobs because of stigma and discrimination. For others, their working lives are cut short because of lack of information about or access to, prevention, treatment, care and support. The social and economic impact of the disease is intensified by the fact that AIDS kills primarily people in the most productive and reproductive periods of their lives.

For the last ten years, and with support from the Norwegian Confederation of Trade Unions (LO-Norway) and other cooperating partners, the African Regional Organisation of the International Trade Union Confederation (and its predecessor, ICFTU-AFRO) has carried out educational activities on HIV/AIDS prevention, treatment, care and support in selected African countries. The ITUC Africa has also widely circulated a comprehensive training manual on HIV/AIDS in English, French, Portuguese and Kiswahili to all its affiliated unions and other relevant bodies. ITUC Africa has trained peer educators and worked closely with HIV/AIDS national coordinators from project participating countries to initiate workplace-based HIV and AIDS sensitization activities. These programmes have focused on the overall welfare of workers’ and supported campaigns of making ARVs and treatment affordable to those in need. In addition, ITUC Africa has endeavoured to collaborate with employers and other institutions at the national (through its affiliates) and international level in a bid to increase its influence.

The main strategic intervention and areas of action included using shop stewards at the enterprise level to reduce infections through information and education; mitigating the effects of HIV/AIDS by protecting human and

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2 International Labour Organization (2009), Facts on HIV and Work. Geneva
Achievements of involving workers in fighting HIV and AIDS in the workplace in Africa

Trade Union Actions against HIV/AIDS at the Workplace

Trade union rights and reducing stigmatization; and adapting and expanding approaches to halt transmission of the virus. Areas of action include: educating members in non-discrimination against workers living with HIV/AIDS; including relevant clauses in Collective Bargaining Agreements; developing preventive education programmes; strengthening health and precautions at work; providing extended leave for affected workers; counselling on HIV/AIDS and other STDs health-seeking behaviour; social marketing of condoms and STD diagnosis and treatment services.

ITUC Africa identified this approach on the realization that HIV/AIDS pandemic is a problem that requires not only individual, but also collective intervention. The fight against HIV/AIDS infection, the protection of vulnerable workers, and elimination of HIV/AIDS discrimination at work require increased sensitization campaigns by the workers themselves, through their unions. Union friendly organizations and development partners are therefore called upon to take a more prominent role in combating the impact of HIV and AIDS in the workplace and also make a contribution to the national efforts to control the spread of the disease.
Given this urgent demand from the workers point of view and the impact of the pandemic on development, it is necessary to sensitize and train shop stewards, as representatives for workers at the lowest level, on how to combat HIV/AIDS. Shop stewards are opinion makers and leaders, and as such their actions have far reaching implications to the affected and potentially-risk workers.

Justification of the project

The horrendous consequences of the HIV/AIDS pandemic affect the very social fabric of communities, productive populations, human resources development, equal treatment and human rights, gender relations, conditions of work, and occupational health and safety. The fact that HIV/AIDS is killing millions of people in Africa is, on its own, a direct threat to the development of many countries, as human resources are at the centre of progress and development, be it technological, environmental, social, political and economic. HIV/AIDS is, thus, not just a health problem; it is also a development problem that threatens the social and economic growth of almost all Sub-Saharan African countries. In fact, HIV/AIDS is now considered to be the single most important and daunting impediment to social progress to many countries in Africa.
Statistics have shown how alarming this pandemic has been: that is, its very worrying effects on the economic and social development. In particular, the concern of organized labour has been on the disturbing implications in the workplace. HIV/AIDS affects both old and young persons, but mainly affects people in their prime and most productive years. Eight out of every ten deaths from AIDS are in the age group of 20 to 49 years. This not only severely upsets the economic base of families but also their social fabric as well.

It is on this understanding that HIV/AIDS should be considered not only an health issue, but also a human rights, social, economic, and a general development issue in the region.

In addition to having a direct effect on the workers themselves, HIV/AIDS is a major problem at the workplace in terms of: pre-employment, terms and conditions of employment, and post employment issues. All these areas are directly or indirectly covered by the International Labour Organization’s instruments, including Conventions and Recommendations on consultations, discrimination, termination related issues and social security aspects. These instruments should be used as entry points to get commitments from the partner
Achievements of involving workers in fighting HIV and AIDS in the workplace in Africa

organisations to deal with HIV/AIDS in a much more aggressive manner.

As a regional trade union organisation, ITUC Africa considers the workplace a very important and effective starting point in tackling the disastrous effects of the HIV/AIDS pandemic. The workplace is a particularly effective forum for the following reasons:

(i) Large numbers of the age groups at risk (between 20-49 years), including men who are difficult to reach in community initiatives, are brought together;

(ii) Many workplaces have facilities that can be used for group discussions, the infrastructure in terms of clinics and provision of condoms while privacy is ensured. Furthermore, workers take awareness campaigns more seriously if they associate their work with economic security;

(iii) The works councils or health safety committees already existing within enterprises (comprising both management and workers) provide a good entry point to HIV/AIDS awareness campaigns and educational programmes;

(iv) Trade union leaders are also opinion leaders and, as such, command considerable respect and understanding among the societies they live in; and

(v) Organised workers are more likely to accept change and, thus, through the contacts they retain within their communities, they can also be able to influence other people outside the workplace.

How the project was developed

The project was developed on the premise that the raison d’être for the trade union movement—to defend and promote the welfare of women and men at the work place, in conditions of freedom, equity, security and human dignity—was threatened by the HIV/AIDS pandemic. As such, on the occasion of its 17th
Congress in Durban in April 2000 the International Confederation of Free Trade Unions-ICFTU (predecessor to ITUC) adopted a resolution in favour of launching a trade union action programme against HIV/AIDS. The ICFTU identified three priorities for such action: to adopt preventive measures, to mobilize against any form of discrimination, and to press the pharmaceutical companies to lower their prices. In its conclusions, the Congress entrusted the General Secretary of the ICFTU with the task of drawing up an action plan aimed at combating HIV/AIDS and mobilizing the necessary resources to this end.

Although the report does not mention the current international campaign to improve access to basic medicines (including anti-retroviral drugs that are effective in the treatment of HIV), it does repeatedly highlight the fact that trade unions, employers and governments have a crucial role to play in promoting awareness among workers, and it emphasizes, furthermore, that workers’ rights are seriously under threat: “People with HIV/AIDS are subject to stigmatization, discrimination or even hostility in the community and at work. The rights of people living with HIV/AIDS, such as the right to non-discrimination, equal protection and equality before the law, to privacy, liberty of movement, work, equal access to education, housing, health care, social security, assistance and welfare, are often violated on the sole basis of their known or presumed HIV/AIDS status.”

In passing the resolution, ICFTU agreed that affiliates will lobby their governments to set up measures to (stop) the spread of AIDS, which would include awareness campaign(s) to eliminate the (disease), fight the culture of denial of HIV/AIDS, lobby for legislation to protect the interests of HIV-infected workers, and pursue collective bargaining to ensure compliance by employers of rights of those workers. They will campaign for the provision of low cost life-saving drugs, in part through the redefinition of the WTO’s intellectual property agreement to enable production of cheaper drugs to fight AIDS. Trade unions will start programmes amongst workers, and their families on the spread of AIDS, and will approach UN institutions such as the ILO, WTO, and UNAIDS to request them to commit more resources to programmes to fight AIDS. The Congress agreed that an important aspect of the campaign would be to hold a follow-up meeting in 2002 to review the campaign progress.
Similarly, the African Regional Organisation of ICFTU (ICFTU-AFRO) and its affiliates had long called for deliberate intervention on this issue. ICFTU-AFRO had given much thought and consideration on how to combat this scourge. It has held numerous forums specifically called by the different organs of the organization to address this matter. For example, during the Congress held in Dakar in 1997, the affiliates made deliberate attempts to examine the menace. In addition, the Executive Board of ICFTU-AFRO mandated the Secretariat to make sure that systematic steps were under-way to make the organization incorporate HIV/AIDS in all the programmes and activities.

In April 2000, ICFTU-AFRO was instrumental in influencing the position of the ICFTU 17th World Congress to express its alarm that the world had failed to act effectively to respond to the devastating effects of HIV/AIDS on workers, their families and the community at large. The Congress emphasized that the workplace, in both the formal and informal sectors, is one of the most important and effective channels for addressing the disastrous effects of the HIV/AIDS pandemic. It further argued that many workplaces have facilities that could be used for group discussions that are ideal for education campaigns.

\[3\] The Congress called for, among other things, the establishment of a Programme of Action to combat the scourge and mobilize resources for its implementation; requested affiliates to impress upon their respective governments on the urgent need for the international community to intensify an internationally coordinated programme for curative research, prevention and treatment of the disease; requested affiliates to engage their respective governments and employers to support the strengthening of occupational health and safety programmes for informing and protecting groups at work, eliminate the stigma and discrimination attached to HIV/AIDS, fight the culture of denial of HIV/AIDS, help remove the cultural prejudices and barriers related to HIV/AIDS, maintain HIV/AIDS affected workers in social protection systems, and develop social and labour programmes that can mitigate the effects of HIV/AIDS; approach the relevant UN institutions (notably the International Labour Organization (ILO), World Health Organization (WHO) and UNAIDS) with requests for committing substantial

resources in programmes for fighting HIV/AIDS, in particular for treatment in Africa, as well as for supporting and strengthening similar work by national civil society organizations, including trade unions for work amongst their members and the community at large; strengthen the capacity of affiliates to deal with the impact of HIV/AIDS; actively support the treatment action campaign for access to low cost, good quality essential medicines by building solidarity across national borders, and initiating and facilitating these campaigns in countries where they had not yet begun; campaign for the provision of low cost life-saving drugs; and campaign for the elimination of discrimination in access to insurance, medical and pension schemes for persons with HIV/AIDS.

Meeting in Gaborone, Botswana, from 27 to 29 September 2000, the three-day conference on “Involving Workers in the Fight against HIV/AIDS in the Workplace” was organized by the African Regional Organisation of the International Confederation of Free Trade Unions (ICFTU-AFRO), in conjunction with the Botswana Federation of Trade Unions (BFTU). The conference was aimed at strengthening the role of trade unions in the fight against HIV/AIDS in the workplace. It also made an assessment, discussed the extent of the challenge and took stock of what the represented organizations have done in response to HIV/AIDS. The purpose was to draw from experiences in order to facilitate the design of a stronger trade union Framework of Action in combating the HIV/AIDS pandemic.

The conference adopted the Gaborone Declaration as a basis for the way forward and follow-up action at all levels. By adopting the Declaration and its resulting programme of action, the trade union movement in Africa undertook to further strengthen its capacities towards making the campaign against HIV/AIDS the mother of all its campaigns. The Framework of Action towards Involving Workers in the Fight against HIV/AIDS in the Workplace acknowledged that HIV/AIDS remained the greatest global public health disaster that the world has ever known. It committed unions to fighting the pandemic in the workplace.
Immediately after the Conference, the ICFTU-AFRO prepared a comprehensive project proposal entitled “Trade Union Action against HIV/AIDS at the Workplace”. With an initial life span of five years, the project was expected to cover nine countries in Sub-Saharan Africa, namely: Botswana, Cote d’Ivoire, Kenya, Namibia, South Africa, Swaziland, Uganda, Zambia, and Zimbabwe. The thrust of the project was to focus on shop stewards at the enterprise level. The identified areas of action would include: educating members in non-discrimination against workers living with HIV/AIDS; including relevant clauses in collective bargaining agreements; developing preventive education programmes; strengthening health and precautions at work; providing extended leave for affected workers; counselling on HIV/AIDS and other STDs healthy-seeking behaviour; social marketing of condoms and STD diagnosis and treatment services.

As a follow-up to the Gaborone conference, the ICFTU-AFRO made a comprehensive report to its Executive Board (October 2000), backed by
statistical information on the devastating impact of HIV/AIDS on African communities in general, and on workers in particular. The report emphasized that HIV/AIDS is a trade union issue. One of the objectives of the exercise was to bring to the attention of trade union leaders the impact of HIV/AIDS at the workplace in general, and on trade unionists, sensitize them, and ensure that they take the message to members at all levels.

In effect, the Executive Board of October 2000 was the launch pad of a five-year Project on “Trade Union Action against HIV/AIDS at the Workplace”. The project was an explicit and deliberate sustainable and evaluative intervention incorporating the shop steward as the entry point. The aim of this project was to urgently and energetically initiate a campaign on HIV/AIDS awareness and prevention in Africa. It is through the project that workers and their organizations intended to encourage African governments to show concern and political will to fight the HIV/AIDS scourge.

Project institutional framework

For effective coordination and management, the project established a five-tier system composed of the Project Advisory Committee, the Regional Project Coordinator, national project coordinators, national project coordination committee and coordinators at the workplace level.

(a) Project Advisory Committee:

The Project Advisory Committee (PAC) functioned as a think-tank and a monitoring agency of the project as it was charged with the overall coordination of the project. The composition of this committee included representatives of donor organizations, representatives from ITUC Africa, and one representative from each of the participating national trade union centres. The Global Union Federations (GUFs), the International Labour Organization (ILO), the UNAIDS, and other interested parties could be coopted if and when desirable.

(b) Regional Project Coordinator

The overall management of the project was the responsibility of the General Secretary of ITUC Africa, while the day-to-day operations were under the
supervision of the Regional Project Coordinator. The full-time Regional Project Coordinator took charge of the arrangement of the project activities and supervised all aspects of the project, implemented the work plan, and reported to the General Secretary. She worked closely with the identified trade union centres, donor organizations and other appropriate national institutions, the PAC and other project partners. The coordinator was also required to travel to the project countries.

(c) National Project Coordinators

Each of the selected national unions identified a National Project Coordinator responsible for adapting the regional work programme to suit national conditions. The identification of the National Project Coordinator was undertaken in close consultation with ITUC Africa.

The national coordinator was responsible for the management of the project at the national level, in close supervision with the Secretary General of the national centre and the regional project coordinator.

(d) National Project Coordination Committee

Each national trade union centre established a National Project Coordination Committee comprised of the national coordinator (as the convenor), and five others involved in trade union activities, including a direct representation by a member of the Executive Board of the national centre.

(e) Project shop stewards

The project had identified the shop steward as the main entry point to sensitize and train workers at the lowest level on how to combat HIV/AIDS.
Chapter two

Project implementation at regional level

Angela Lomosi,
Former Regional Project Coordinator,
ITUC Africa

Introduction

This project came into being primarily because the HIV/AIDS pandemic is a problem that requires not only individual, but also collective intervention. The fight against HIV/AIDS infection, the protection of vulnerable workers, and elimination of HIV/AIDS discrimination at work require increased sensitization campaigns by the workers themselves, through their unions. Union-friendly organizations and development partners are therefore being called upon to take a more prominent role in combating the impact of HIV/AIDS in the workplace in the communities and also make a contribution to the national efforts to control the spread of the infections.

The project was officially launched at the Executive Board meeting of ICFTU-AFRO in Nairobi in October 2000, with activities expected to commence on January 1, 2001. In addition to the long term support from LO-Norway, the project received funding from other collaborating partners over the years.
These project partners include FES, LO/FTF Denmark, LO/TCO Sweden, British TUC, JILAF Japan, FGTB Belgium, SASK Finland, CGT France, FO France, and ACILS.

The main activities of this project comprised the following:

- Sensitizing workers at the enterprise level on issues related to HIV/AIDS;
- Training and enhancing the capacities of enterprise-level staff on issues related to HIV/AIDS and the workplace, including integration of HIV/AIDS issues into trade union activities and within the branch structure;
- Examining of issues related to HIV/AIDS and the workplace, including gender, and youth;
- Sharing knowledge and experiences in dealing with HIV/AIDS;
- Social marketing of condoms; and
- Diagnosis and treatment of sexually transmitted infections (STIs).

The main strategic intervention in this project was the use of shop-stewards at the enterprise level to reduce infections through information and education; mitigating the effects by protecting human and trade union rights and reducing stigmatization; and adapting and expanding approaches to halt transmission of the virus. The areas of action included: educating members in non-discrimination against workers living with HIV/AIDS; including relevant clauses in collective bargaining agreements; developing preventive education programmes; strengthening health and precautions at work; and providing extended leave for affected workers.
Project achievements at regional level

Since the project was launched in 2001, many activities have been organized at the regional level, with many positive outcomes. The following sections of this chapter relate to the project achievements at the regional level.

Regional planning meetings

The first regional planning meeting of the project took place on 21 March 2001 in Nairobi. The meeting brought together participants from five countries: Botswana, Kenya, Uganda, South Africa and Zimbabwe, with the aim of developing an action plan for each participating country. It was expected that other countries would be included in the project as funds became available in subsequent years. The other target countries were Cote d’Ivoire, Namibia, Swaziland, and Zambia.

During the first year of project launch, various sensitization activities were undertaken in the targeted countries, with more emphasis on Botswana, Kenya and Zimbabwe. The first product that emanated from the project was the publication of training materials in the form of brochures on three topics, namely:

- Basic facts about HIV/AIDS;
- What to include in a workplace policy; and
- Questions about HIV/AIDS in the workplace.

The aim of publishing the brochures was to introduce the project to the participating national trade unions, and provide advance information to trade union educators and shop stewards on the work that would largely fall on them in the period ahead. The brochures were also used to sensitize trade union leaders on the seriousness of HIV/AIDS as a trade union issue.

The process of sensitizing trade union leaders on the effects of the pandemic continued at the regional level and including at the occasion of the XIIIth ICFTU-
AFRO Congress held in Nairobi in May 2001. There was a special three-hour programme exploring different elements resulting in HIV/AIDS infections of workers, how to live with HIV-positive persons, the role of trade unions in the prevention, and counselling of HIV/AIDS victims. This roundtable discussion also dealt with the provision of medication for those living with AIDS, and the campaign for cheaper drugs.

**Shop steward training**

Trade union training on HIV/AIDS has its own achievements and challenges during the period of project implementation. For instance, while in 2002 around 201 shop stewards were trained, the number increased to 1,887 in 2007. The training involved basic counselling skills, home-based care, sexually transmitted infections, training methodologies, basic facts on HIV/AIDS, and developing HIV/AIDS policy.

The aim of the training was to provide knowledge and skills to enable shop stewards to carry out integrated and effective prevention, care and support programmes at the workplace. Shop stewards were also sensitized on the need to include HIV/AIDS issues in Collective Bargaining Agreements.

Some of the topics included:

- Peer education on HIV/AIDS and other issues such as STIs, home-based care, nutrition, anti-retrovirals (ARVs), elimination of discrimination, and living positively with HIV/AIDS;
- Counselling of the infected and affected, VCT, and treatment;
- Abstinence and condom use among the workers;
- How to lobby employers to provide for affordable drugs for the treatment of opportunistic infections and ARVs; and
- How trade unions can be represented in the National AIDS Councils.
By December 2004, shop stewards had succeeded in carrying out integrated HIV/AIDS programmes on prevention, care and support at the workplace, such as: counselling of both the infected and affected, promotion of Voluntary Counselling and Testing (VCT) and referrals for support, condom promotion, lobbying for the employers to provide support and treatment for HIV-positive workers, and campaigns against discrimination of HIV-infected workers. Shop stewards were also initiating and running joint activities with employers at the workplace and in their communities.

Regional coordination and steering committees

The Regional Project Coordinator, Angela Lomosi, assumed her roles with effect from 1 September 2002. By that time, project activities were being carried out in six countries: Botswana, Kenya, Swaziland, Uganda, Zambia and Zimbabwe.

The Regional Project Coordinator worked closely with the national coordinators appointed by the affiliated national centres. The national coordinators played an important role in training, supporting and supervising the shop stewards who were carrying out activities at the workplace. In order for them to effectively monitor these activities on the ground, national coordinators held meetings with the shop stewards to assess the progress, achievements and the challenges they faced during implementation. The shop stewards invited the national coordinators to help in educating groups of organized workers that they had earlier mobilized. When the shop stewards reported lack of support from the workplace, the national coordinators made a follow up with the enterprises to talk to the employers to cooperate. The shop stewards approached the national coordinator in case they needed some clarification on the subject and in case they had any other difficulties.

The first regional project steering committee meeting was held in Nairobi in March 2004 bringing together all the national coordinators, ITUC Africa staff and a representative of LO-Norway. The meeting concluded that it was important for their national centres to lobby for their inclusion in the Country’s Coordinating Mechanisms (CCMs). It was also concluded that all the national
centres needed to be proactive in care and support and to raise funds at the national level.

Resources mobilization and building partnerships

During the entire project implementation period, LO-Norway remained the main cooperating partner. However, additional funds were also received from other collaborating partners including British Trades Union Congress (British TUC), Swedish Trade Union Council for International Development and Cooperation, and American Center for International Labor Solidarity. Close relationships were also maintained with the ILO. Similarly, further efforts were made to approach the World Bank, World Health Organization (WHO), and United Nations Programme on HIV/AIDS (UNAIDS) to urge them to commit more resources to workplace programmes involved in the fight against HIV/AIDS. It is through such expanded approaches that project implementation was extended to more countries comprising Botswana, Burundi, Côte d’Ivoire, Eritrea, Ethiopia, Ghana, Kenya, Malawi, Mozambique, Namibia, Rwanda, Swaziland, Tanzania, Uganda, Zambia and Zimbabwe.
One of the notable examples of partnership was when the project organized an HIV/AIDS Pre-Congress Workshop on ‘Integrating HIV/AIDS within the New Unified Regional Organisation (ITUC Africa) in Accra in November 2007. The workshop was supported by the ILO, Canadian Labour Congress (CLC) and the British TUC and hosted by the Ghana Trade Unions Congress (Ghana TUC). Participants were drawn from trade union organisations based in nine African countries namely Cote d’Ivoire, Ghana, Kenya, Malawi, Nigeria, South Africa, Tanzania, Uganda and Zambia. Other participants included a representative from the World Council of Churches (WCC), PLWHAs, a representative of the Global Unions, South Africa, and partners – ILO, CLC, LO-Norway and the British TUC. During this activity, participants drew a link between HIV/AIDS and decent work and developed a framework of action that would guide the regional organization for the next four years.

**HIV/AIDS Prevention Programmes**

Through project implementation, many workers were sensitized on behavioural change as a way of protecting them from being infected with HIV/AIDS and other sexually transmitted diseases (STDs). Workers were also taught to follow the ABCs of sex: Abstinence, Being faithful to one uninfected partner and Condom use. To reinforce behaviour change, workers and union members were encouraged to access voluntary counselling and testing in order to know their status.

The project provided a platform for shop stewards to emphasize on the correct and consistent use of condoms. In many of the training programmes, a condom demonstration was done using a penile model and a condom. People living with HIV/AIDS were encouraged to use condoms with their spouses to prevent HIV re-infection.

**Care, treatment and support programmes**

The project enabled shop stewards to provide direct support to workers who were both infected and affected by HIV/AIDS. This was done through regular visits in the communities and home-based care. During the community visits
the shop stewards also counselled the patients and their families. Families were also taught how to give proper care to the patients.

The HIV positive workers were taught on how to live longer with the virus. This entailed how to eat a balanced diet and snack regularly on fruits and vegetables, to use condoms whenever they had sex, to continue working normally if they still felt strong and healthy, to get regular counselling from a professional counsellor and to seek medical treatment whenever they felt unwell. They were encouraged to save some money for their dependants to use in future.

**Development and implementation of workplace policies including Collective Bargaining Agreements**

In many countries, the project encouraged the establishment of a joint HIV/AIDS committee that comprised of both the workers and the management in the formulation of workplace policies. As will be indicated in the country reports, the resulting policies represented a commitment by workers and employers aimed at protecting the HIV-positive worker from harsh working conditions or unfair dismissal. The policies also encouraged employers to provide treatment to workers whenever they became ill. Other consideration included ensuring that the HIV-positive employee had time off to rest, and provision of adequate benefits should the employee leave the enterprise due to illness or death. The policies also discouraged pre-employment and on-the-job HIV testing.

**Development of the HIV/AIDS training manual and other materials**

From the early stages of project implementation, and as specified in the project document, there was an intention to develop regional training manuals on HIV/AIDS. As such, a regional review workshop on the development of a training manual for shop stewards was held in Nairobi in January 2002. The workshop provided an opportunity to review the draft manual made available by the project secretariat.
Following the comments from the national coordinators, a further workshop was held in April 2002 to pre-test the improved draft. At the workshop, a small technical group, including educators and HIV/AIDS coordinators, reviewed the draft manual. Additional support was also provided by the technical expertise from the ILO.

The manual was finally published and initially distributed to all English-speaking affiliates of ITUC Africa, as well as the cooperating partners. The manual became particularly popular with unions in East Africa, to the extent that the ILO Office in Dar es Salaam decided to adopt and translate it into Kiswahili for use in the East African countries. In 2003, the manual was translated into Portuguese and French, and later on posted on IICFTU-AFRO’s website to allow for easy accessibility and reference by all interested parties.
HIV/AIDS and mainstreaming gender issues in trade unions

The project recognized that inequality, traditional social patterns and economic imbalances, make women more vulnerable to HIV/AIDS than men. The project was informed by the AIDS epidemic update of 2003, which said:

“Unlike women in other regions in the world, African women are considerably more likely—at least 1.2 times—to be infected with HIV than their male counterparts. These discrepancies have been attributed to several factors. They include the biological fact that HIV generally is more easily transmitted from men to women. Sexual activity tends to start earlier for women than men, and young women tend to have sex with much older partners.”

In this case, the project established new approaches to ensure that women workers are empowered to have an equal status in society. The project called
for trade unions to campaign against traditions that put women at risk. It also encouraged women workers to take personal responsibility by using the female condom and stop putting all the responsibility on men. The main concern was that the female condom was not always affordable and accessible to women.

During the project implementation, national coordinators conducted workshops for female shop stewards and members of the women’s committee to create awareness and also to promote the prevention of mother to child transmission of HIV among the female workers. These workshops were held in Kenya, Uganda and Zambia.

To support this initiative, the Canadian Labour Congress (CLC) provided additional support to conduct a regional workshop in April 2002 in Nairobi, targeted for the ITUC Africa Women Committee under the theme: “Organizing Women Workers to Fight against HIV/AIDS”. At the workshop, participants exhaustively discussed other issues that make African women more vulnerable. These issues included poverty, lack of women economic empowerment, and risky sexual behaviour.

**Campaigns, lobbying and advocacy**

Through the project, ITUC Africa intensified its lobbying and campaign for cheap and affordable anti-retroviral drugs for HIV treatment in order to ensure that African people in general and workers in particular have access to these drugs. ITUC Africa supported countries, such as India and Brazil, which continue to produce generic drugs. In the same vein, ITUC Africa expressed concern on the dangers that free trade and investment agreements negotiated between industrialized and developing countries may compromise development potential, compromise alternative regional arrangements and strengthen anti-social intellectual property obligations.

Through the project, HIV campaigns were organized at the national level and the workplaces by the national coordinators and the trained shop stewards. The HIV/AIDS activities were ordinarily held during the Labour Day (1 May) and World AIDS Day (1 December).
COTU-Kenya and ICFTU-AFRO campaign against HIV/AIDS during the World AIDS Day 2003

Discussions on the Proposed HIV/AIDS recommendation at the International Labour Conference (ILC) 2009

The ILC agenda for 2009 focused on a number of issues, among which was the discussion on an autonomous instrument on HIV/AIDS in the form of a Recommendation. The discussion began at a slow pace as workers insisted that they wanted a stronger instrument in the form of a Convention, and not a Recommendation that would not be binding, but both the employers and governments strongly declined, forcing the workers to compromise for the sake of progress. During the whole process, the input of the workers was very crucial as it greatly enriched the content of the document. One of the observations made was that employers were very cooperative and worked closely with workers to agree on most of the issues, and it is our hope that they can continue with the same spirit next year. The outcome of the first discussions was a document that was debated further at the ILC in the year 2010 as decided upon by the conference.
During the ILC 2009, ITUC Africa and OATUU worked closely with ITUC, partners, ILO and affiliates in strengthening discussions and, where needed, lobbied governments to support the trade union position. It is during this time that ITUC Africa and OATUU took time to finalize discussions regarding the upcoming joint workshop, and jointly lobbied for partners to support the activity.

Workers and Employers working together

To enhance the intervention of the project activities at the workplace, ITUC Africa organized a review workshop in Nairobi in April 2003 under the theme ‘Workers and Employers together against HIV/AIDS’. The workshop brought together participants from trade union centres, employers, Global Union Federations, Government of Kenya, ILO, International Organisation of Employers (IOE), WHO, IMF, UNAIDS, United States Center for Disease Control and Prevention (CDC), ACILS, and people living with HIV/AIDS, among others. The objective of the workshop was to explore possible areas of collaboration between workers and employers in the fight against HIV/AIDS. The participants recommended and concluded that workers and employers should collaborate in the following areas: capacity building, collective bargaining, engaging in social dialogue, resource mobilization and advocacy. A wider partnership that should include workers, employers and governments, WHO, UNAIDS, ILO, World Bank, IMF, CDC, other international organizations, and other relevant stakeholders engaged in the fight against HIV/AIDS was also recommended.
This close cooperation of employers and workers led to the issuing of a joint statement by the General Secretary of the ICFTU and the Secretary-General of IOE on 12 May 2003. The statement underlined the importance of employers and trade unions at both local and international levels working towards the fight against the HIV/AIDS pandemic. To intensify the fight against HIV/AIDS, the ICFTU-AFRO and Pan-African Employers Confederation (PEC) issued a joint communiqué on 24 August 2003 after giving a presentation on ‘the involvement of trade unions in the fight against HIV/AIDS’ at the ICASA conference 2003 in Nairobi. This was followed by another joint communiqué committing ICFTU-AFRO and PSI in fighting HIV/AIDS among health workers.
Workers and Employers together against HIV/AIDS in the workplace: Building capacity for joint action programmes, Activity held at the Speke Resort and Conference Centres Munyonyo, Kampala, Uganda,

A capacity building meeting was organized by the ICFTU-AFRO, the IOE, LO-Norway, the ILO and the ITC-ILO, Turin. The activity was held at the Speke Resort Conference Center in Kampala, Uganda on 12 to 14 December 2006 with the theme ‘Workers and Employers Together Against HIV/AIDS: Building Capacity for Joint Action Programmes in the Workplace’. The event was hosted by National Organisation of Trade Unions (Uganda) and the Federation of Uganda Employers (FUE). It was officially opened on behalf of H.E, the President of the Republic of Uganda, Hon. Yoweri Kaguta Museveni, by the Deputy Prime Minister, Hon. Kirunda Kivejinja. In attendance was the Minister for Gender, Labour and Social Development, Hon. Syda Bbumba.

The three-day capacity building activity brought together major stakeholders in the area of HIV and AIDS from the Global Fund to fight HIV/AIDS, Malaria and Tuberculosis, ILO, the Netherlands Embassy, and Participants from employer organizations and trade unions from the eight African countries which are participating in the IOE/ICFTU pilot programmes on HIV/AIDS in the workplace. The countries were Ghana, Mali, Côte d’Ivoire, Zambia, Malawi, Tanzania, Kenya and Uganda.

During the ILO’s 10th Regional African Meeting held in December 2003, the ICFTU-AFRO and IOE jointly managed to push a resolution on HIV/AIDS that called for joint action between workers and employers. Discussions on how to implement the Resolutions took place between ICFTU, ICFTU-AFRO, ILO-AIDS, ACTRAV, IOE and other partners and a joint meeting of IOE and the ICFTU were held in Geneva in March 2004 to develop and launch national action plans.
To implement this resolution, employers and trade union representatives from eight different countries met at the ILO Headquarters in Geneva in March 2004. The objective of the meeting was to provide an opportunity for both workers and employers to share experiences, and develop and launch joint action plans. In the meeting, both parties shared experiences and explored the different opportunities of working together at the national level.

Andrew Kailembo (right), General Secretary of ICFTU-AFRO exchange documents with Fred Muia, IOE Regional Adviser for Africa at the inaugural regional employers-workers workshop in Nairobi in April 2003

“ICFTU-AFRO will continue to enlist the support and cooperation of the employers. We strongly believe that the synergy that will be generated by us working together will definitely enable us to provide good workplace programmes that will effectively deal with prevention, care, support and treatment of people infected and affected by HIV/AIDS in the workplace and beyond. Close collaboration with the employers will make us win this war.”

Andrew Kailembo,
General Secretary, ICFTU-AFRO
Nairobi, 24 August 2003
International partnerships and conferences

With support from the project, the General Secretary and the Regional Project Coordinator were able to attend many international partners meetings and conferences relevant to the project objectives. Their presence in these forums raised the profile of trade union work on HIV/AIDS. For instance, during the AIDS conference held in Bangkok in July 2004, the World of Work featured prominently and both workers and employers had the opportunity to share their experiences. It is at this conference that ICFTU-AFRO and the General Secretary of the IOE renewed their commitment to work together at the global, regional and at the national levels.

In a similar vein, the project supported the regional coordinator to attend the pre-congress activity at the ICFTU Congress in Miyazaki in 2004. Although the pre-congress activity was on the New Partnership for African Development (NEPAD), she was able to participate and introduced critical and relevant issues on HIV/AIDS. During the congress there was an opportunity of meeting with the Executive Director of the Global Fund. The coordinator and others were able
Achievements of involving workers in fighting HIV and AIDS in the workplace in Africa

to brief him on frustrations faced by trade unions when trying to join the CCMs and lack of access to the global fund. It is due to this forum that the Executive Director of the Global Fund agreed to have a meeting with the Global Unions HIV/AIDS coordinator, and the different coordinators from the region, to discuss the issue of trade unions participating in CCMs at all levels.

In 2005, the project organized a one-day pre-congress workshop on HIV/AIDS with the theme: “Building Partnerships in Dealing with the Challenges Posed by the HIV/AIDS Pandemic at the Workplace: Workers Make a Difference” at the ICFTU-AFRO Congress in Tunis in 2005. The workshop brought together 50 participants from national trade union centres, ILO, People Living with HIV/AIDS, LO-Norway, TCO Sweden, British TUC, ICFTU and other organizations.

The meeting also gave an opportunity for an experience-sharing forum among the coordinators and other stakeholders with the aim of promoting cross-country exchange of best practices in building strategic and sustainable partnerships in the fight against HIV/AIDS. Participants developed a better understanding as to why collaboration is important, shared their views and experiences in this area, and also gave suggestions on the way forward.

Participants concluded that given the magnitude of the HIV/AIDS problem, it is important for trade unions to work closely together at the national, regional and global level, and to jointly undertake activities with employers, civil society, governments and the international community to address the impact of the pandemic. Secondly, collaborators should work together to avoid duplication and conflicts: each partner should better coordinate by bringing in their comparative advantage in the partnerships.

Thirdly, the partnership should focus on information sharing and pursue a common course. This will engage major stakeholders/partners and create synergy in getting the accepted results. Fourth, in order to succeed, trade unions, employers and governments need to work closely together with UN bodies such as WHO, World Food Programme (WFP), UNAIDS, ILO and other international organizations who are involved in the HIV/AIDS campaign. Lastly participants agreed to continue promoting the ILO Code of Practice and the
Achievements of involving workers in fighting HIV and AIDS in the workplace in Africa

World of Work with an aim of focusing on the critical areas of partnerships which are capacity building, collective bargaining, and protection of vulnerable workers and those infected with HIV/AIDS.
Chapter three

Project implementation at country level

Cote d’Ivoire

Kah Mlei Theodore,
Union Générale des Travailleurs de Côte d’Ivoire

Introduction

In the context of the project under consideration, Cote d’Ivoire is a late starter. Cote d’Ivoire was selected as a project country after the other countries had already made much progress. The main obstacle for delayed inclusion of Cote d’Ivoire in the earlier phases of the project is attributed to the political situation in the country since 2001.

Nevertheless, the national centre Union Générale des Travailleurs de Côte d’Ivoire (UGTCI) has managed to reach many workers with HIV/AIDS activities through education and training since the introduction of project activities in 2004. Many unionized workers have now acquired expertise in the areas of intervention, advocacy, prevention counselling, support and psycho-social care.
During project implementation the capacity of UGTCI and its affiliated unions was greatly enhanced. The following are some of the achievements of the project in Cote d'Ivoire:

(i) Establishment of a voluntary HIV/AIDS fund where both workers and employers make contributions.

(ii) Employers setting aside part of their profits to treat HIV infected employees.

(iii) Provision of services to both employees and their families

(iv) Employers registering their clinics with the National AIDS Commission in order to secure ARVs and make them available to employees and their families.

(v) Strengthened partnership between the private sector organizations, employers' federations and unions to the extent of employers inviting unions to join them in a bipartite arrangement.

(vi) Development of a code of practice for staff in the high risk sections e.g. staff in the hotel sector providing room service.

(vii) Establishment of workplace bipartite committees.

(viii) Joint initiatives between the private sector organizations, employers’ federations and trade unions to secure funding from the CCM.

(ix) Voluntary testing of a significant number of employees and subsequent provision of needed services to those who have voluntarily declared their positive status.

One of the main outcomes of the project in Cote d'Ivoire was the development of an HIV/AIDS Charter by the UGTCI. The Charter states that an HIV-positive person should be treated and protected and confidentiality should be assured for those who are found to be HIV positive.
UGTCl was also involved in dealing with issues of stigmatization and marginalization at the workplace, especially in the hospitality industry and also established a solidarity fund to support workers and their families affected by HIV/AIDS.

Workshop during an HIV/AIDS mapping exercise in Abidjan, December 2009

Examples of good practices in Cote d’Ivoire

The Hotels Sector

Unions in the hospitality sector have succeeded to convince employers to provide free condoms to all customers by depositing a packet containing three condoms in every room. Leaflets and brochures have also been developed under the private sector and employers’ task force. They are distributed to all hotel rooms, in restaurants and reception areas across the country. These materials are also made available to employees.

In addition, a strict code of practice was developed to guide the conduct of employees, particularly those providing room service. Most hotel employees allow unions to provide home care to infected employees and their families.
Practices in a banana company

In 2004, UGTCI organized training on prevalence and the way people have been affected with HIV in a banana company that had more than 6,000 employees. Through joint collaboration with the company management, trade unions initiated the establishment of HIV training programmes and established workplace committees.

Due to the size and scattered nature of the company, a central committee was established at its headquarters in Abidjan. The central committee manages ten sub-committees scattered in several plantations. The main tasks of each sub-committee are to train peer educators, carry out home visits, and to distribute free condoms. It is reported that by December 2009, over 80,000 condoms had already been distributed to workers and their families, and 250 peer educators been trained.

The principal inputs that contributed to the achievements in the banana company include the following:

(a) The establishment of an HIV/AIDS Fund, where each worker contributes 100 CFA per month. This voluntary contribution is directly deducted from employees' salary.

(b) Company-funded training of ten counsellors.

(c) Company funded specific HIV/AIDS training of one medical doctor.

(d) Free provision of ARVs to infected employees and their families. These ARVs are secured through financial support from the National AIDS Commission.

(e) A written agreement between the union and the company requiring retention of infected employees until when they can no longer exercise their work-related duties. The agreement also prohibits compulsory testing during recruitment.
The national power utility company

The National Power Company has about 3,200 employees throughout the country. The company conducts two campaigns each year where family retreats are organized throughout the country. Workers and their families attend these retreats, whereby free counselling, voluntary testing and free distribution of condoms take place. In collaboration with the union, the company has established a solidarity treatment fund. By end of November 2009, the fund was worth 20 million CFA. The union and the company have jointly established 10 committees that deal with HIV/AIDS throughout the country. The activities of these committees receive financial support from the company. In addition, the Company has established a ‘Presidential Award’ where the Company President awards the best worker or best committee on an annual basis.
Kenya

Millicent Ogila,
Central Organisation of Trade Unions (Kenya)

Introduction

The Central Organisation of Trade Unions—COTU (K) has participated in the ITUC Africa/LO-Norway project from the very beginning in 2001. COTU (K) has also benefited from sponsorship of other collaborating organizations such as the British TUC, ACILS, Government of Kenya, DANIDA BSPS, ILO, Action Aid, National Aids Control Council, amongst others. Most of the activities on HIV/AIDS involved awareness creation and sensitization of trade unionists on HIV/AIDS. The training activities sponsored by the British TUC manly targeted women at the shop floor.

Amongst the earlier activities of the project under consideration was the development of COTU (K) basic manual on HIV/AIDS, dealing with the definition, symptoms, prevention, and caring of people with HIV/AIDS. In addition, shop stewards were trained and given various skills to reach out to their peers with prevention, care and support programmes at the workplace. Furthermore, they were trained on the development of HIV/AIDS workplace policy.

Project achievements

The project has recorded the following achievements in Kenya:

Workers education:

COTU (K) has reported that they had trained about 4,250 shop-stewards on HIV/AIDS. These trainers have continued to train other peer educators.
Kenya: Number of workers reached by the project in 2005

<table>
<thead>
<tr>
<th>Name of workplace</th>
<th>Dates</th>
<th>Number of workers reached</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sunblest Bakers Ltd, Thika</td>
<td>July 2005</td>
<td>150</td>
</tr>
<tr>
<td>East African Portland Cement, Athi River</td>
<td>July 2005</td>
<td>500</td>
</tr>
<tr>
<td>Nakuru Blankets Company, Nakuru</td>
<td>August 2005</td>
<td>300</td>
</tr>
<tr>
<td>Delmonte Kenya Ltd, Thika</td>
<td>August 2005</td>
<td>1,500</td>
</tr>
<tr>
<td>Kenya Pipeline Company, Nairobi</td>
<td>September 2005</td>
<td>800</td>
</tr>
<tr>
<td>Total number of workers reached</td>
<td></td>
<td>4,250</td>
</tr>
</tbody>
</table>

**Workplace policy:**

Through the project, the national centre has developed an HIV/AIDS workplace policy. The policy has assisted their affiliates to come up with their sector-based HIV/AIDS policies. COTU (K) is now in the process of developing a peer educators training manual.

On the occasion of launching the HIV/AIDS policy document in August 2009, COTU (K) Executive Board formally adopted HIV/AIDS policy at the workplace. In their subsequent meeting on 2 October 2009 at the Tom Mboya Labour College they adopted a resolution in favour of launching a trade union action programme against HIV/AIDS in 2010 and beyond. This resolution was proposed to the Executive Board by some General Secretaries who felt that the issue was critical to workers and their families.

This declaration was based on the realization that throughout the history of mankind, societies have been affected by epidemics and other calamities that have forced individuals, families, communities and nations to mobilize and
develop concomitant responses. But, never before has the world community been faced with a serious uncontrollable disease as the HIV/AIDS pandemic.

The policy emerged from a long process of debates, consultations and planning predicated on a collective yearning to break new grounds. This process involved affiliates and the secretariat. The main strength of the policy is its simplicity, and the detailed exposition on what is to be done, why it must be done and how it must be done.

In collaboration with the Federation of Kenya Employers, COTU (K) was in the forefront in the formulation of the Kenya National Code of Practice on HIV/AIDS in the workplace and mitigating the impact of HIV/AIDS. COTU (K) is now recognised and fully participates in the Country Coordinating Mechanism (CCM).

**HIV/AIDS Campaigns:**

During Labour Day, COTU (K) has been engaged in campaigns to advocate for the employers to provide free anti-retroviral therapy for all workers. Campaign materials include banners, posters, T-shirts and caps given to workers who join the processions. Workers are also mobilized during the World AIDS Day, including offering community services at district hospitals.

The services offered on that day include cleaning hospital wards and surrounding areas, counselling patients, educating patients on prevention and living positively with HIV/AIDS, and feeding the sick patients. Some affiliates reported that they have been organizing similar campaigns at the workplace in the form of VCT field days, which include visit by their families and close relatives.

**Partnership:**

With assistance from the National AIDS/STI Control Programme (NASCOP), COTU (K) set up a mobile VCT site pitched at open grounds on 1 May 2005. Counselling and HIV testing was done on a voluntary basis by counsellors from NASCOP. By the end of the day, 125 workers were tested and some referred to hospital to access different services.
The trained trainers also sensitised workers and distributed condoms and brochures developed by different organisations, including those developed by ITUC Africa/LO-Norway project. Other materials came from Women Fighting AIDS in Kenya (WOFAK), Network of People Living with HIV/AIDS (NEPHAK), and the National AIDS Control Council (NACC).

Resource Mobilisation:

Five affiliates of COTU (K), namely Kenya Union of Printing, Publishing, Paper Manufacturers and Allied Workers (KUPRIPUPA), Kenya Plantation and Agricultural Workers Union (KPAWU), Tailors and Textiles Workers Union (TTWU) and Kenya Electrical Traders Allied Workers Union (KETAWU) applied for resources through the National Aids Control Council. The coordinators received training from the project on how to mobilise for resources.

Positive Living:

Some workers living positively, especially in the plantation sector, have come out openly about their status. This has the effect of sensitizing fellow workers on living positively, while at the same it encouraged others to undertake VCT. Those found positive have also joined the crusade and formed support clubs.

Joint activities with employers:

COTU (K) together with the Federation of Kenyan Employers has held joint sector-based activities focusing on managers and shop stewards. With support from some enterprises, some affiliates developed basic manuals on HIV/AIDS. Some of the manuals have been translated into Kiswahili for ease of understanding amongst workers and peer educators.

Kenya case study 1: The Del Monte story

Del Monte is an international company specializing in growing and processing of foods such as fruits and juices for local and export consumption. The company has a workforce of over 4,500 permanent employees and is situated in Thika, 50 kilometres at the outskirts of Nairobi. The company operates three shifts on a 24-hour basis.
The company employs 2,500 women, mainly in the processing and packaging department. Most of the male employees work in the farms and in the factory.

The workers are represented by two unions: the Kenya Plantation Agricultural Workers Union, and the Kenya Commercial Food and Allied Workers Union.

Del Monte has several facilities within the company estate and premises, including housing, a primary school, clinic and other recreation facilities. Although the company provides these facilities, it has noted that most workers do not live with their families. This makes employees to travel home during the mid month or end month to visit their families.

Although the company has a good reputation of taking care of its workers, it has faced some challenges. Workers were dying mysteriously. Records show that the company was losing four workers per month. It later emerged that most of the workers who were dying were young and did not live with their families. The revelation came from female workers who shared stories of how they engage in unprotected sex and with multiple partners. The company medical doctor was not in a position to compile statistical analysis of the diagnosis, and many workers preferred to go to the Thika District Hospital as they did not want their status to be known at the clinic.

It is in view of the above challenges that COTU (K), through ITUC Africa/LO-Norway project in collaboration with NACC and Centre for Disease Control (CDC) initiated training and sensitization activities at the company. Workers were taught about HIV/AIDS, STIs, VCT, living positively with HIV/AIDS, and on parent to child transmission of HIV, among other things. Sensitization workshops were held for two months continuously for both the workers and the management. During the workshops, persons living positively with HIV/AIDS were invited to
share their experiences on living positively, stigma and discrimination, nutrition, support groups and ARVs.

In addition, COTU trained trainers and peer educators to spearhead the workplace sensitization activities. Many workers were also counselled and tested during the workshops. Those who already knew their conditions confidentially talked with the counsellors and shared their concerns. Several information, education materials and condoms were distributed. Condom dispensers were also made available to workers at all times.

The company supported the programme and encouraged many workers to come out openly to declare their status. For those who already knew their HIV-positive status, they were advised to monitor their CD4 count and viral load at the nearby district hospital.

In addition, the company put in place an HIV/AIDS workplace policy and provided anti-retroviral drugs and food supplements. With support from FKE, the company also introduced a wellness programme that encouraged workers to visit the clinic to check on other diseases such as diabetes, obesity, etc.

Support groups for persons living positively with HIV/AIDS were also established to encourage workers to live positively with HIV/AIDS and to share experiences. Union members and other workers showed their solidarity by visiting the sick during their time off or in the evenings to pray with them and give them material support.

To document the achievements at Del Monte, COTU (K) published a best practice video in 2005.
Example of video productions made by the ICFTU-AFRO/LO-Norway project on HIV/AIDS

Kenya case study 2: Tripartism at the workplace against HIV/AIDS

The Ministry of Labour, COTU (K) and the Federation of Kenya Employers in collaboration with other civil society organizations through the support of the National Aids Control Council (NACC) and Centre for Disease Control Liverpool have formed a network called the Kenya Private Sector Advisory Network. The network was formed primarily to support workplace initiatives on HIV/AIDS. The network partnered with the ILO Office in Kenya to design a National Code of Practice on HIV/AIDS in the workplace.

In 2009, the network also launched a one month Rapid Results Initiative – Build-up activities prior to the World AIDS Day. The initiative involved the partners organizing workplace sensitization, voluntary and
counselling activities and to cover as many workplaces as possible for one month. The initiative reached 200 workplaces and over 1,800 workers. The exercise covered workers within the industries, within the cities and in municipalities across the country.

Kenya case study 3: Sony Sugar Company-South Nyanza

Sony Sugar Company lies in the vast sugar cane area of the Southern Nyanza, western Kenya. It has a workforce of 3,600 permanent employees and 600 casual employees. The company has been devastated by the HIV/AIDS scourge, as many have workers died.

The Kenya Sugar Union, an affiliate of COTU (K), together with the company management joined hands to organize activities on sensitization and VCT at the workplace. At the beginning, many workers shied away, but with time and stories from those counselled many came forward. Workers agreed to be tested and took it upon themselves to support each other by organizing home-based care and spiritual groups that would visit sick colleagues on rotational basis every evening.

Management worked closely with trade unions to support the orphans through schooling, housing, food and other necessities. The company has continued to support these children, and many have been able to perform well in national examinations. The company also provides ARVs and promotes peer education amongst workers.
Introduction

HIV/AIDS is one of the major challenges of the trade union movement in Malawi because of stigma and discrimination associated with the pandemic. As such, the advent of the HIV/AIDS project with the support of LO-Norway through ITUC Africa came as a blessing to the Malawi Congress of Trade Unions (MCTU) as it was a frustrating issue for many years. MCTU has been part of the mainstream project activities since 2005.

Through the activities of the project, MCTU has mainstreamed the fight against HIV/AIDS in almost all trade union activities, including membership organizing and recruitment, social dialogue, education, child labour, and occupational safety and health. Furthermore, the national centre has developed a policy for members of staff of the Congress Secretariat, as well as workers who do not have such a policy at the workplace.

With the publication of the trade union policy on HIV/AIDS, MCTU has encouraged its affiliated unions to follow suit. Up to half of the national unions have taken the challenge. For instance, the Teachers Union of Malawi has adopted such a policy and has also designed a special programme called Teachers Living with HIV/AIDS, with some of the union members being role models in spearheading healthy living. Other unions that have taken this initiative of developing policies include the Nurses Union of Malawi, the Sugar Union and the Tobacco Union. The Nurses Union has established a centre for care-giver programme on HIV/AIDS and has a VCT centre for its union members. The Sugar Union has a programme on awareness on HIV/AIDS at the workplace, while the Tobacco
Union has a voluntary HIV Union Club that supports and guides the affected and encourages people to go for testing.

The project’s visibility has also been enhanced through training activities. MTCU spearheads training of trainers activities to national HIV focal points. The ITUC Africa HIV/AIDS Shop Stewards Manual has been very useful in this regard. The focal points then train others across the sectoral unions. For instance, in 2007, the national coordinator, union focal persons, organisers and union leaders reached 527 union members and their families. These activities were generally undertaken in the ten sectoral unions affiliated to MCTU who are based in three regions of Malawi (the North, South and Centre).

MCTU has also been lobbying for resources on HIV/AIDS through the National Aids Commission.

**Project achievements**

The successes associated with the project on fighting HIV and AIDS in the workplaces in Malawi include the following:

- There is a clear change in the attitude of employers towards the pandemic. For example, employers in the water sector have allocated between one and two percent of their budget towards fighting HIV/AIDS in the workplace. Consequently, MCTU has noted an increase in the number of workers attending VCT. In addition, some employers offer nutritional support when needed;

- The training activities have had a positive effect on the behaviour of
workers, as indicated by the increase in the sharing of testimonies;

- There is an increase in trade union membership;
- There is ease of access and free distribution of condoms among workers.
- Some unions have instituted fund raising activities to support their members on nutrition and paying school fees for the orphans.

Malawi case study 1:

Construction and establishment of nurses and midwives union wellness centre and income generating activities

HIV/AIDS has brought a heavy burden on nursing care in Malawi. More and more nurses and other health care workers have become sick and bedridden. The risk of infection to HIV/AIDS on health workers is about 96%.

The Nurses and Midwives Union, an affiliate of MCTU, constructed a Wellness Centre for its members to provide VCT facilities. In addition, the union has ventured in various income generating activities ranging from agriculture-based initiatives to operating grocery kiosks for its members. The activities in agriculture have an added advantage in that besides income generation the crops, also help in nutrition support.

The wellness programme is targeting to reach 7,000 members of the union, with almost 70 percent of the beneficiaries being women. It lobbies for specialized treatment for its members, advocates for sick bays, and encourages positive health-seeking behaviour. It has also developed a database for health care workers living positively.
Achievements of involving workers in fighting HIV and AIDS in the workplace in Africa

Example of income-generating activities for the Nurses Union in Malawi

The programme has established 46 support groups across the country and acts as informal support systems for health care workers in mitigating HIV/AIDS and other related health problems.

The union has trained 64 members in basic entrepreneurship skills for income generating activities. Activities for the support group include provision for short term loans, nutritional supplements, support for needy orphans, and transport for hospital visits, social events, and funeral support and regular awareness meetings.
**Malawi case study 2:**

Collaboration between workers and employers in the fight against HIV/AIDS

The Lilongwe Water Board is one of the workplaces where workers and employers have intensified efforts in the fight against HIV/AIDS at the workplace. The Water Board management facilitated training of 33 peer educators and provided condoms as well as other awareness campaign materials. Much of the training has been undertaken during working hours.

Amongst the achievements of this collaboration include:

- Formulation of policy and translated into local languages (such as Chichewa) for easy access to all workers;
- Provision of treatment, care and support to the tune of Malawian Kwacha 5,000 extended to workers’ spouses and family members;
- Regular visits to sick workers by peers (a third of whom are women) who also bring material support; and
- Establishment of a joint HIV/AIDS and Occupationally Health and Safety workplace taskforce.

**Malawi case study 3:**

**You cannot tell an HIV positive worker by looks!**

A sick worker at one of the tobacco companies was transferred and later sacked just because management believed he was HIV-positive. The worker decided to be tested and was found to be negative. The
grievance was brought to the attention of the union who took up the issue with management and won the case. The worker has since been compensated and reinstated. Employer attitude towards HIV/AIDS has now changed.

Newspaper cutting featuring Hon Yonus Mussa, MP and Minister of Labour, Malawi

Malawi case study 4:

Teachers living positively with HIV/AIDS programme

The Teachers Union of Malawi, an affiliate of MCTU has a special programme referred to as the Teachers Living Positively with HIV/AIDS. The programme is a grouping of teachers who are HIV-positive.

The grouping is a national structure with over 3,500 members with the
aim of organizing activities that will contribute towards mitigating the impact of HIV/AIDS amongst teachers. Each member contributes MK 500 per year. The main activities involve organizing meetings to raise awareness on positive living and prevention of the spread of the virus. The group also conducts fund raising activities by engaging in farming (growing maize and groundnuts) whose proceeds are used to assist members in need of nutrition and finances.

The Ministry of Education provides 2% of its budget for HIV/AIDS interventions, including the provision of sibusiso, a nutrient supplement. Consequently, the organization has witnessed an increase in teachers going for HTC/VCT. There has also been an increase in union membership.

Examples of union achievements in the fight against HIV/AIDS in Malawi

<table>
<thead>
<tr>
<th>Name of union</th>
<th>Achievements and challenges in prevention, care, support and treatment</th>
</tr>
</thead>
</table>
| Electronic Media Workers Union      | • Food supplements like sibusiso are provided to those who declare their status. The challenge is that some beneficiaries' sell the food supplements instead of eating them.  
• Policy formulated and accessible to all workers.  
• Soft loans provided to those who declare their status. |
| Building Construction Civil Engineering Workers Union | • Transport is provided for sick workers to go to hospital.  
• HIV/AIDS policy and posters drafted in consultation with management.  
• Loans given to those who declare their status without restrictions.  
• Employer allocates 4% of annual budget towards HIV/AIDS.  
• Condom education and promotion. |
<table>
<thead>
<tr>
<th>Name of union</th>
<th>Achievements and challenges in prevention, care, support and treatment</th>
</tr>
</thead>
</table>
| Shipping Customs Clearing Union | • Workers and their families encouraged to access VCT facilities within their communities.  
• Cash amount of MK5000 given to those who declare their status.  
• An HIV/AIDS policy is in place, but it is in draft form.  
• Condom education and promotion. |
| National Organization of Nurses and Midwives of Malawi | • Have a Union VCT facility for its members  
• Negotiated with management for sick bays for special treatment of workers.  
• Lobbied for special days off for staff to access VCT.  
• Facilitated policy formulation and union constitution.  
• Support groups in place.  
• Support given to orphans (children of members).  
• Food supplement given to infected workers who have openly declared their status.  
• ART, care and support given to worker.  
• Started some Income Generating Activities (IGAs). |
| Malawi Housing Corporation Workers Union | • Provision of loans, transport and nutrition supplements.  
• Policy formulated. |
| Water Employees Union of Malawi | • Policy and HIV/AIDS nutritional manual developed.  
• Free condom promotion.  
• Provision of free ARVs by employers.  
• Extended support to family and spouse.  
• Provision of free nutrition supplement.  
• Good negotiations skills and good employer relationship. |
### Name of union

<table>
<thead>
<tr>
<th>Name of union</th>
<th>Achievements and challenges in prevention, care, support and treatment</th>
</tr>
</thead>
</table>
| Communication Workers Union-Postal Services Branch | • Support given to workers on ARVs by providing reasonable accommodation.  
• Provision of food supplements.                  |
| Civil Servants Trade Union                        | • HIV/AIDS talks mainstreamed in Occupational Health and Safety.        |
| Electricity Supply Company of Malawi (ES-COM) Staff Union | • Nutrition support.  
• Free supply of ARVs.  
• Grievance handling on stigma and discrimination. |
<table>
<thead>
<tr>
<th>Name of union</th>
<th>Achievements and challenges in prevention, care, support and treatment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Private Schools Employees Union</td>
<td>• Proper implementation of HIV policy.</td>
</tr>
<tr>
<td></td>
<td>• Union negotiated for the following:</td>
</tr>
<tr>
<td></td>
<td>• No screening for the purpose of employment, HIV-positive workers stay long at the workplace.</td>
</tr>
<tr>
<td></td>
<td>• Reduced deaths due to HIV/AIDS.</td>
</tr>
<tr>
<td></td>
<td>• Support the wellness programme.</td>
</tr>
<tr>
<td></td>
<td>• ARVs Provided.</td>
</tr>
<tr>
<td></td>
<td>• Counsellors trained.</td>
</tr>
<tr>
<td></td>
<td>• Policy in place and MK5000 given to HIV patients.</td>
</tr>
<tr>
<td></td>
<td>• Nutrition support.</td>
</tr>
<tr>
<td></td>
<td>• Less absenteeism noted.</td>
</tr>
<tr>
<td></td>
<td>• Reduced number of deaths.</td>
</tr>
<tr>
<td></td>
<td>• Reduced stigma and discrimination.</td>
</tr>
<tr>
<td></td>
<td>• Support for home based care.</td>
</tr>
<tr>
<td></td>
<td>• Trained 180 peer educators.</td>
</tr>
<tr>
<td></td>
<td>• Established some counselling centres.</td>
</tr>
<tr>
<td></td>
<td>• HIV/AIDS policy implemented.</td>
</tr>
<tr>
<td></td>
<td>• Established joint steering committee with management.</td>
</tr>
<tr>
<td></td>
<td>• Workers accessed VCT.</td>
</tr>
<tr>
<td></td>
<td>• Transport to hospital when sick leave is provided.</td>
</tr>
<tr>
<td></td>
<td>• HIV/AIDS workplace policy in place.</td>
</tr>
<tr>
<td></td>
<td>• A special allowance given to HIV infected workers who have openly declared their status.</td>
</tr>
<tr>
<td></td>
<td>• Cooperation with employers to implement AIDS workplace policy.</td>
</tr>
<tr>
<td>Transport and General Workers</td>
<td>• Draft policy is in place.</td>
</tr>
<tr>
<td>Union</td>
<td>• Access to ARVs.</td>
</tr>
<tr>
<td>Name of union</td>
<td>Achievements and challenges in prevention, care, support and treatment</td>
</tr>
<tr>
<td>-------------------------------------------</td>
<td>-------------------------------------------------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>Tobacco Tenant and Allied Workers Union</td>
<td>Support for HIV-infected workers by providing food items. Workers are encouraged to access VCT and ART in community hospitals. Access to counselling services. Building links with home based care centres for support. Notable behavioural change amongst workers.</td>
</tr>
<tr>
<td>Malawi Municipal Workers Union</td>
<td>Provision of nutrition support. Transport to go to hospital if sick is provided. Support during funeral. Employer allocated 2% of budget to HIV/AIDS.</td>
</tr>
</tbody>
</table>
Tanzania

Dr Meja Kassim Kapalata,
Trade Union Congress of Tanzania

Introduction

In 2001, Tanzania formulated a national policy on HIV/AIDS and established the Tanzania Commission for AIDS (TACAIDS) with the responsibility of coordinating HIV/AIDS activities through a multi-sectoral approach. Tanzania is now implementing a second term of Multi-sectoral Strategic Framework, covering the period 2008-2012.

As a follow up to this process, the Trade Union Congress of Tanzania (TUCTA)—and with the support of ITUC/LO Norway Project and contribution from other development partners such as CLC, TACAIDS/World Bank, and DANIDA—developed a policy on HIV/AIDS at the workplace in 2003. The policy gives guidelines on prevention, care, support and treatment and mitigation of the impact on workers infected and affected by the scourge. Special emphasis is placed on the importance of workplace policies that TUCTA affiliates would need to engage their employers in the formulation of bipartite approaches. The policy also addresses the importance of observing the rights of workers living with HIV/AIDS, as well as the importance of cooperation and collaboration with other stakeholders.

Project achievements

Peer education

TUCTA and its affiliated unions have trained 250 HIV/AIDS shop stewards as peer educators serving in different workplaces across the country. The shop stewards are focal people in workplace programmes, especially when it comes
to sensitizing workers and in negotiations for Collective Bargaining Agreements and workplace policies on HIV/AIDS.

In all the training sessions, TUCTA provided a person living with HIV/AIDS as a facilitator. It was quite moving to the participants whenever she revealed her status. Using and involving the worker living with HIV/AIDS helped participants to appreciate the experience of living with the virus and it also encouraged participants to test and know their status.

It was also a tradition that participants were encouraged to test on the last day of the training. It was observed that prior to the involvement of the person living with HIV/AIDS as a facilitator only a few participants would come forward for voluntary counselling and testing.

The capacity building in terms of training workplace peer educators has been very helpful in fighting the scourge in the workplaces in Tanzania.

For example, in a tobacco company with almost 3,000 workers, a trainer who could not find time to conduct training, decided to conduct education via audio-visual aid. Through the ITUC Africa/LO-Norway project, TUCTA provided a television to the branch union. The television was installed at the company canteen for the benefit of the workers, especially during lunch break.

The company management supported the initiative and in 2008 formally acceded to the provision of dedicated working time for HIV/AIDS education. Since then, the company management has trained more peer educators and now provides ARVs and nutrition for workers with HIV/AIDS.
Workplace policies

Through TUCTA’s initiatives, ten workplace policies on HIV/AIDS have so far been formulated through bipartite cooperation with management. These policies are basically designed by management and trade unions at the enterprise level, with TUCTA acting as a facilitator.

In 2003, TUCTA participated in the labour law reform and managed to lobby for the inclusion of HIV/AIDS provisions in the Labour and Employment Relations Act of 2004. The Act provides for penal sanctions against any type of discrimination related to HIV/AIDS. TUCTA also managed to lobby and influence a number of provisions on promoting safety and health at work in the Occupational Health and Safety Act of 2003, thanks to the trade union lobbying with the members of the Parliamentary Committee on Social Welfare.

At the workplace, the following companies agreed to formulate HIV/AIDS policies over the period between 2004 and 2010:

- Sunflag Ltd
- Mtibwa Sugar Estate
- Swissport Ltd – KIA
- Postal Corporation Ltd – Dsm
- Guardian
- Marine Ltd Mwanza
- Victoria Sea Farers
- Kamanga Ferry Ltd
- CDA
- Arusha and Arumeru Municipality
- Higher Learning Institutions (in process)
- Mzinga Corporation
- VETA – Vocational Education Training
- Moshi Transport Co Ltd.
- Sea Cliff Hotel Ltd.
- Mafinga Sao Hill
TUCTA undertook some field surveys in 2007 and 2008 and found that most the policies were indeed functional. In most of the workplaces management had in fact taken lead in the implementation of the policies, especially on provision of condoms, conducting in-house HIV/AIDS education, provision of nutrition for workers living with HIV/AIDS, and provision of ARVs. Some enterprises had amended their existing CBAs to include clauses on HIV/AIDS.

**Building partnerships, including trade unions and employers working together**

Partnership in pushing the agenda on HIV/AIDS in the workplaces is one of the good practices that can yield good results in fighting the scourge. In 2005, TUCTA organized a tripartite plus workshop bringing together participants from the Ministry of Labour, TACAIDS, Association of Tanzania Employers (ATE), GTZ, AMREF, and trade union leadership. The workshop was organized with the support of Canadian Labour Congress (CLC) with the objective of taking stock and mapping strategies on future cooperation and collaboration on HIV/AIDS in Tanzania. At the end of the workshop, participants resolved to work together and network to avoid duplication of activities. Employers pledged to work together with trade unions. Hitherto, trade unions had experienced some reluctance from some employers to cooperate in the formulation of workplace policies, especially when the initiative came from workers.

Again in 2007, TUCTA hosted the ITUC Africa/LO Norway HIV/AIDS Project Steering Committee in Dar es Salaam. During this meeting, representatives of Association of Tanzania Employers (ATE) and TACAIDS were invited to share their experiences in the fight against the scourge. Presentations were made by TACAIDS and ATE on the Global Fund Country Coordination Mechanism and workplace interventions, respectively. The presentations had the objective of exchanging experiences on the modalities of accessing the Global Fund, and practical joint work of management and trade unions in some enterprises in Tanzania.
The forum was also an opportunity for government officials to witness the efforts of trade unions in addressing HIV/AIDS. This forum acted as a catalyst for enhancing TUCTA’s cooperation and collaboration with employers in interventions against HIV/AIDS at the workplace. Following this interaction TUCTA’s proposal for funding from TACAIDS bore results and funds were given for running training for more workplace peer educators. During the meeting, TUCTA reminded TACAIDS on application for funds that had not been acted upon. It was encouraging to note that after a few days TUCTA received funding for training of shop stewards.

TUCTA and its affiliated unions participated fully in the formulation of the Tanzania Tripartite Code of Conduct on HIV/AIDS. The work to develop the code was initiated in 2003 under the supervision of the Ministry of Labour, Employment and Youth Development. It took a number of years of negotiations and pushing to complete it and have it ready for use. Ultimately, the Code was finalized and launched in 2008. It bears three logos: that of TUCTA, ATE and Government (Ministry of Labour). The code has been endorsed by the Cabinet of Ministers.

The Code contains provisions akin to the principles entrenched in the ILO Code of Practice on HIV/AIDS. It provides duties and responsibilities of the government, employers and workers in fighting HIV/AIDS.

**Information and educational materials on HIV/AIDS**

Information and educational materials in the form of flyers and pamphlets were developed to explain various issues such as basic facts about HIV/AIDS, the rights of workers living with HIV/AIDS, tips on formulation of workplace HIV/AIDS policies, and access to antiretroviral treatment (ART), care and support. The materials were prepared in Kiswahili so as to reach most workers.
Family day

The use of annual family days in fighting HIV/AIDS is one of the good practices against HIV/AIDS at the workplaces in Tanzania. This is usually an initiative of employers, but also takes on board the unions for effective implementation of the process. One of the workplaces that have had remarkable success on this undertaking is the Office of the Tanzania Commission of AIDS (TACAIDS).

In this case, the employer in collaboration with the Tanzania Union for Government and Health Employees (TUGHE) organize annual events to celebrate each New Year by convening a Family Day. During the Family Day, all employees with their families get together for a number of events. These events include sports and discussions. The events are also used to conduct educational sessions on HIV/AIDS among the family members, categorized by age groups.
The Family Day provides the opportunity of enjoyment for the New Year as well as for imparting knowledge about HIV/AIDS. Such events strengthen marriage bonds among couples of the workers family.

**Examples of union achievements in the fight against HIV/AIDS in Tanzania**

<table>
<thead>
<tr>
<th>Sector and union</th>
<th>Achievements</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Municipal Council (Teachers Union)</strong></td>
<td>CBA negotiated; Policy on HIV/AIDS at Municipal level in draft form; About 450 out of 3,260 workers have been tested and about 100 teachers found to be HIV-positive; 600 teachers reached during training; Money allocated by the Municipal Director to assist those who have voluntarily declared their HIV+ status; Tsh 50,000 given to a PLWHAs per month, currently 15 teachers benefiting; 90 peer educators have been trained.</td>
</tr>
<tr>
<td><strong>Ilala Municipal (Health) Sector</strong></td>
<td>Use of Post-Exposure Prophylaxis (PEP) by those who need it; Light duty given to those who have declared their status and can no longer do manual work; Free treatment for opportunistic diseases and infections; ARV treatment provided to People Living with HIV/AIDS (PLWHAs); 20 staff trained on Provider Initiated Testing and Counselling (PITC); VCT services available.</td>
</tr>
</tbody>
</table>
Achievements of involving workers in fighting HIV and AIDS in the workplace in Africa

<table>
<thead>
<tr>
<th>Sector and union</th>
<th>Achievements</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tanzania and Zambia Railways Authority; Tanzania Railways Limited</td>
<td>Health services, including ARVs, provided in all work stations, 3 Tanzania Railways Workers’ Union (TRAWU) staff have declared their status and are on treatment, but unfortunately one passed away; Sick workers visited at home and in hospital; HIV-positive workers given flexible reporting time to allow them to take their medication and proper diet.</td>
</tr>
<tr>
<td>Sokoine University of Agriculture (SUA)</td>
<td>Positive management response; Many workers and students are accessing HIV testing; ARVs provided at no cost; Treatment provided overseas if there is need; Research done on food for PLWHAs; New VCT centre established; Conduct home visits and patient can select own nurse; New clinic under construction at Mazimbu (80% finance by SUA and 20% from United States Agency for International Development (USAID) through the Tunajali (we care) project and ambulance service provided for very severely affected workers.</td>
</tr>
<tr>
<td>Morogoro Hotel, Hilux Hotel, Movenpick (Hotels), Mikumi and Arusha National Parks (Conservation) and Salvation Army and Skychef (Social Services):</td>
<td>Positive response from the management particularly at SkyChef, whereby employees’ families receive assistance from the employer; Inclusion of HIV AIDS issues in established CBAs; HIV-positive employees are given a special diet; HIV/AIDS policies at the Salvation Army, Sea Cliff Hotel, Movenpick Royal Palm Hotel, Mikumi National Park</td>
</tr>
<tr>
<td>Sector and union</td>
<td>Achievements</td>
</tr>
<tr>
<td>----------------</td>
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</tr>
<tr>
<td>Tanzania Postal Training Institute</td>
<td>Company covers 100% of treatment and funeral costs; Reasonable accommodation covered; Company policy on HIV/AIDS with assistance from AMREF and About Health Foundation; Discussions are on going to include the current CBA assistance to PLWHAs in paying school fees.</td>
</tr>
<tr>
<td>Long distance trucking/Marine Mwanza/Kamanga Ferry/Swissport/ KIA</td>
<td>Employment of special attendants in VCT centres; education fund at Kilimanjaro International Airport and Tanzania Posts Corporation; 84 counsellors employed in Tunduma and Kurasini; Treatment centres established along the highways; Incorporation of HIV/AIDS in CBAs – Tz Postal Corporation, Malawi Cargo (MCCL); SDV Transami Ltd; Compensation and legal support to victimized workers; Policy on HIV/AIDS – KIA (Swissport, Marine Mwanza); VCT site in Kurasini for long distance drivers.</td>
</tr>
<tr>
<td>Capital Development Authority (TAMICO)</td>
<td>Initially 25 self-declared workers (three-quarters of whom are women) experienced difficult times, but now they are accepted. They have formed their own network; 3% of income used for HIV/AIDS but in new CBA there is proposal to set aside 1,000,000 each month for provision of food to the 25 positive. Free treatment provided at private hospital (Mwangaza “Kijiji cha Matumaini”) and transport to clinics for worst cases, and self declared employees and home visits and counselling.</td>
</tr>
<tr>
<td>Alliance One Tobacco TZ Ltd (formerly Dimons)</td>
<td>HIV/AIDS issues included in the existing CBA and free treatment is offered to permanent and contract workers and the families.</td>
</tr>
<tr>
<td>Sector and union</td>
<td>Achievements</td>
</tr>
<tr>
<td>------------------</td>
<td>--------------</td>
</tr>
<tr>
<td>Tanzania Automo-</td>
<td>About 80% have come out for testing;</td>
</tr>
<tr>
<td>tive Technology</td>
<td>18 staff have declared their status;</td>
</tr>
<tr>
<td>Centre (Nyumbu)</td>
<td>Light duty and reduced working hours;</td>
</tr>
<tr>
<td></td>
<td>Food for victims,</td>
</tr>
<tr>
<td></td>
<td>Free ARVs provided;</td>
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<tr>
<td></td>
<td>Free treatment to workers and families and villagers;</td>
</tr>
<tr>
<td></td>
<td>VCT centre;</td>
</tr>
<tr>
<td></td>
<td>Home-based care with two motor cycles purchased for home based care;</td>
</tr>
<tr>
<td></td>
<td>Ambulance service provided for severe cases and provision of light duty to affected workers.</td>
</tr>
<tr>
<td>Tanzania Tele-</td>
<td>Free provision of ARVs and 'nutrishakes';</td>
</tr>
<tr>
<td>communication</td>
<td>Free transport to home and hospital;</td>
</tr>
<tr>
<td>Company Ltd</td>
<td>Home and hospital visits done;</td>
</tr>
<tr>
<td></td>
<td>Those who provide home support are provided with gloves, soaps, etc.;</td>
</tr>
<tr>
<td></td>
<td>Hospital visits;</td>
</tr>
<tr>
<td></td>
<td>Reduction in working hours;</td>
</tr>
<tr>
<td></td>
<td>Milk to all employees;</td>
</tr>
<tr>
<td></td>
<td>Family planning clinics offer drugs to prevent mother to child transmission.</td>
</tr>
<tr>
<td>Occupational</td>
<td>Notable reduced infection from 7% to 5.6%;</td>
</tr>
<tr>
<td>Safety and Health</td>
<td>Improved statistic for OSH and HIV/AIDS;</td>
</tr>
<tr>
<td>Authority Head-</td>
<td>Enhanced collaboration with trade unions;</td>
</tr>
<tr>
<td>quarters and</td>
<td>HIV/AIDS workplace policy formulated.</td>
</tr>
<tr>
<td>Zones</td>
<td></td>
</tr>
<tr>
<td>Sector and union</td>
<td>Achievements</td>
</tr>
<tr>
<td>-----------------------------------------</td>
<td>-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>TANOPHA</td>
<td>Supplying food supplements for those living with HIV/AIDS; Provide allowance of food for those living with HIV/AIDS; Some workers have come out in the open and declared their status; Reduced absenteeism and enhanced cooperation with workers living with HIV/AIDS.</td>
</tr>
<tr>
<td>Association of Tanzania Employers</td>
<td>Reduced stigma and discrimination; Reduced HIV infection and absenteeism; Enhanced cooperation and collaboration with workers; Nutrition support; Reasonable accommodation given to workers in some workplaces; Supply of ARVs by some employers in the workplace.</td>
</tr>
<tr>
<td>Tanzania Commission for AIDS</td>
<td>Some workers have openly declared their HIV-positive status; Reduced absenteeism; Allowances for food given to people living with HIV/AIDS; PLWHAs given food supplements; Cooperation with workers strengthened.</td>
</tr>
<tr>
<td>TPAWU</td>
<td>Cooperation with workers strengthened and this has allowed more workers to be sensitized on HIV/AIDS.</td>
</tr>
<tr>
<td>AIDS Business Coalition of Tanzania</td>
<td>Discrimination, infection, absenteeism and mortality reduced; Collaboration with trade unions enhanced; Supply of ARVs by some employers in the workplace; Support given to workers to get proper nutrition; Reasonable accommodation given to workers in some workplaces; Promotion of income generating activities for workers and some CBAs have clauses on HIV/AIDS.</td>
</tr>
</tbody>
</table>
Uganda

Stanley Kaggwa
National Organisation of Trade Unions (Uganda)

Introduction

The LO-Norway/ITUC Africa project has been supporting the National Organisation of Trade Unions (NOTU) to run a number of activities on HIV/AIDS since November 2002. However, as early as 1999, NOTU had taken keen interest on this matter by revising its education policy to include HIV/AIDS as one of the major topics to be undertaken by workers. These educational programmes took place during paid working hours, which enabled workers to share information on the scourge.

Uganda was the first country in Africa to openly talk about HIV/AIDS. This openness served as a springboard for mass awareness campaigns that were spearheaded by the President from the mid 1980s onwards. This also led to various government interventions aimed at fighting the scourge. Later in December 2005, President Museveni launched a book on HIV/AIDS at a conference in Kampala, which helped the populace to gain more knowledge and understanding about the disease, plus have further insight into their vulnerability to the infection, and the need to put in place prevention measures. Many agencies, including NGOs, private business sector, development partners and other civil society organizations, have since taken on the fight against HIV/AIDS in Uganda. The reasons for choosing the workplace included among others, recognizing that the workplace brings together many people of age groups at risk (20-49 years), and the shop stewards and peer educators that exist within enterprises provide a good entry point to HIV/AIDS awareness campaigns and educational programmes.
After recognizing that HIV/AIDS is a development and workplace issue, NOTU took up the challenge to provide education and training to the union members in order to empower them with skills and knowledge to fight the pandemic. This has been made possible with support from development partners.

**Project achievements**

**Workplace sensitization**

Since the project inception in 2002, NOTU and affiliates have conducted numerous HIV/AIDS workplace sensitization programmes. At the same time, NOTU used education on HIV/AIDS as an opportunity to recruit workers into the union, while reaching out to employers, most of whom accepted to work with unions in fighting the scourge.

Through the training activities of this strategy, over 5,000 members joined the unions, while over 15,000 copies of educational and information materials were distributed to workers. The table below gives an example of the project outreach in 2005.

**Example of project outreach in Uganda in 2005**

<table>
<thead>
<tr>
<th>Name of Union</th>
<th>Dates</th>
<th>Number of workers reached</th>
</tr>
</thead>
<tbody>
<tr>
<td>National Union of Educational Institutions</td>
<td>10/09/2005</td>
<td>61</td>
</tr>
<tr>
<td>Uganda Communication Employees Union</td>
<td>23/09/2005</td>
<td>58</td>
</tr>
<tr>
<td>Uganda Government and Allied Workers Union</td>
<td>17/09/2005</td>
<td>60</td>
</tr>
<tr>
<td>Uganda Fisheries and Allied Workers Union–Gerenge Beach</td>
<td>08/10/2005</td>
<td>50</td>
</tr>
<tr>
<td>Amalgamated Transport and General Workers Union (Trained Security Guards)</td>
<td>29/10/2005</td>
<td>71</td>
</tr>
<tr>
<td>Roofing Limited</td>
<td>15/10/2005</td>
<td>58</td>
</tr>
</tbody>
</table>
Achievements of involving workers in fighting HIV and AIDS in the workplace in Africa

<table>
<thead>
<tr>
<th>Name of Union</th>
<th>Dates</th>
<th>Number of workers reached</th>
</tr>
</thead>
<tbody>
<tr>
<td>Beverages Union–Coca Cola</td>
<td>15/10/2005</td>
<td>48</td>
</tr>
<tr>
<td>Railway Workers Union–Busembatia</td>
<td>21/10/2005</td>
<td>67</td>
</tr>
<tr>
<td>National Union of Plantation and Agriculture</td>
<td>12/11/2005</td>
<td>50</td>
</tr>
<tr>
<td>Workers (NUPAWU)– Sugar Branch</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Total number of workers reached</strong></td>
<td></td>
<td><strong>541</strong></td>
</tr>
</tbody>
</table>

In 2007, NOTU reached a total of 858 workers.

Trade unions in Uganda developed a sustainable labour policy on HIV/AIDS at the workplace as their contribution in protecting workers against the pandemic. The unions also secured additional funds from ITUC Africa, British TUC and ILO to conduct the training, education and controls programme mainly based on awareness.
Training peer educators

Over the years of project implementation, NOTU carried out training of focal persons in every union on issues concerning HIV/AIDS. During 2007 alone, six employers participated in workshops organized by trade unions. Through collaboration with employers, trade unions influenced treatment, care and support to workers. At the same time, NOTU managed to provide information and educational materials about HIV/AIDS and ARVs.

For the purposes of this report, trade unions in Uganda implemented a rapid assessment survey during a workshop that brought together union members from NOTU affiliates involved in the programme implementation. The respondents filled questionnaires and also provided additional information from their union’s activity reports.

The survey established that there was a high level of sensitization amongst unions. As indicated in the table below, 90% of the union workers have been sensitized at their workplace on issues concerning HIV/AIDS. This evidence demonstrates the achievement that the unions have attained in creating awareness among their workers on the dangers of the pandemic. The 10% of the workers not yet trained were actually newly employed.

<table>
<thead>
<tr>
<th>Responses</th>
<th>Frequency</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>18</td>
<td>90</td>
</tr>
<tr>
<td>No</td>
<td>2</td>
<td>10</td>
</tr>
<tr>
<td>Total</td>
<td>20</td>
<td>100</td>
</tr>
</tbody>
</table>

The figure below shows that union workers have been sensitized in several aspects related to HIV/AIDS at their workplaces. Most of the workers (45.5%) reported that they are able to handle HIV/AIDS management at the workplace, which includes sensitizing other members on stigma and discrimination plus supporting the infected and affected members. Others expressed that the workmates have been sensitized on HIV/AIDS workplace policy (15.5%) and are now aware of their human and trade union rights. The workers also reported
a considerable increase in condom use (22.7%), which serves as a preventive measure and change of behaviour. The respondents added that, management at their workplaces provides them with free condoms. The workers are also now knowledgeable as regards the methods of transmission and prevention of HIV infection. There is need to increase sensitization on HIV/AIDS workplace policy in all union branches given that some employers deny workers the opportunity to attend HIV/AIDS seminars and some mistreat those who are infected.

According to the table below, workers admitted that their employers allow them to continue working despite their being HIV-positive. This has been possible thanks to the CBA with clauses on HIV/AIDS, where there are provisions to support infected workers. Part of this support is extended to sickly workers by assigning them reduced workload (15.6%) and given time off to pick their medication/ARVs (8.9%). The workplace also provides counselling services to
the workers at the workplace. This also includes provision of condoms and treatment of opportunistic infections in some workplaces.

**Benefits of the HIV/AIDS workplace policy implementation**

<table>
<thead>
<tr>
<th>Benefits</th>
<th>Frequency</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Infected workers (HIV/AIDS) allowed to continue working</td>
<td>18</td>
<td>40.0</td>
</tr>
<tr>
<td>Sickly staff have a reduced workload</td>
<td>7</td>
<td>15.6</td>
</tr>
<tr>
<td>Infected workers given time off to pick medication</td>
<td>4</td>
<td>8.9</td>
</tr>
<tr>
<td>Counselling services at workplace</td>
<td>6</td>
<td>13.3</td>
</tr>
<tr>
<td>Free condoms</td>
<td>5</td>
<td>11.1</td>
</tr>
<tr>
<td>Treatment at workplace</td>
<td>5</td>
<td>11.1</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>45</strong></td>
<td><strong>100.0</strong></td>
</tr>
</tbody>
</table>

The figure below shows that unions have tried to ensure that all male and female workers (42.9%) attend HIV/AIDS sensitization seminars at the workplace. This is important because all workers are at risk of acquiring HIV. However, there is need for urging unions to scale up this aspect. The graph also shows that female trainers (17.9%) are less by half the number of male trainers (35.7%) in the unions. The number of female trainers needs to be raised for purposes of creating gender balance in HIV/AIDS knowledge among trainers, and also to create more opportunities for female workers who might want to confide in fellow women as regards the HIV/AIDS concerns they may have. Some isolated cases of sexual harassment especially to women have been reported, which puts women at a higher risk of acquiring HIV at the workplace. In addition workplaces do not seem to accord any special attention to female workers, yet they are more vulnerable to HIV infection and also shoulder burden of caring for sick family members as dictated by the social traditional roles.
Results show that workers have now attained considerable knowledge about HIV/AIDS transmission and prevention measures through sensitization campaigns at workplaces. There is also reduced stigma and discrimination towards workers who have been infected by the virus. This has led to in-built support mechanisms at workplaces which have made it possible for such workers to adopt positive living as they continue working. The use of CBAs and implementation of the HIV/AIDS workplace policy have played an instrumental role in garnering support from the management of different workplaces. The HIV/AIDS education intervention will go a long way in reducing infection rates at workplaces.
Testimonies by union representatives who benefited directly from the activity

Members from the Plantation union said, “continuous sensitization of workers and support mechanisms at workplaces enabled our HIV-infected workers to come up openly and willingly to testify about their status. They are now living positively while still working”.

One member of the Teachers Anti-AIDS Action Group (TAAG), under the Uganda National Teachers Unions (UNATU) said, “Because of the HIV/AIDS workplace policy, we are now able to access ARVs/treatment from the Kitovu Mobile Clinic, in Masaka district, where I teach. Other sick staff members also have a reduced workload at school and we are allowed to go and pick our medicines from the clinics”.

A member from the Building Union added, “In addition to benefits, workers infected with HIV/AIDS get treatment of opportunistic infections at workplaces, and also access ARVs through workplace programmes. And a worker who is very sick is allowed to rest, then resume duty when feeling better; thanks to our workplace policy!”

Before the NOTU/ITUC HIV/AIDS workplace education intervention, there was discrimination and stigmatization of HIV-infected workers, which made them fear to disclose their status. However, sensitization by peer educators and incorporation of relevant clauses on HIV/AIDS in collective bargaining agreements (CBAs) has encouraged the infected workers to speak out on their status. Furthermore, the CBAs supported the formation and implementation of the union HIV/AIDS workplace policy, thus enabling the HIV infected workers to keep their jobs until they are totally unfit to continue working, a situation which was unheard of earlier.

Moreover, after acquiring transmission and prevention information, the workers now take more precautions. These precautions include abstinence, continuous use of condoms, and regular VCT visits.
What lessons have we learnt from the identified success story?

- It is important to use peers to educate fellow workmates on HIV/AIDS. This creates an environment for workmates to discuss and share information any time.

- Designing HIV/AIDS programmes to reach out to the wider community can help reduce further stigma and infection rates.

- When employers are involved in the HIV/AIDS programme, they can be supportive to workers.

- Having support mechanisms at workplaces enables HIV/AIDS workers live positively and be productive.

- Continuity of HIV/AIDS sensitization helps promote behaviour change.
Achievements of involving workers in fighting HIV and AIDS in the workplace in Africa

Zambia

Stephen Mumbi
Zambia Congress of Trade Unions

Introduction

The LO-Norway/ITUC Africa project on HIV/AIDS was introduced in Zambia in April 2002. The choice of Zambia was necessitated by the alarming rates of infection amongst workers. Trade unions in Zambia were concerned that much of the government support would not reach the workplace. For instance, in 2002, the government was able to provide anti-retrovirals to only 10,000 people throughout the country. Unions were concerned that though a step in the right direction, the effort was too little and highly obscured.

Due to the high profile and interest on the issue, the project launch in Zambia received stupendous reception with wide media coverage. The official opening was graced by Dr. Kenneth Kaunda, former President of Zambia. It was also attended by other important personalities, including the American Ambassador to Zambia.

The objectives of the workshop were to:

(i) Identify and discuss the role shop stewards should play in the campaign against HIV/AIDS and Sexually Transmitted Diseases (STDs),

(ii) Create a critical awareness of the impact of HIV/AIDS on the productive labour and the trade union movement,
(iii) Review campaign, learning, training and skills that would support continuous education at the workplace,

(iv) Launch the special programme called “ZCTU Crusade against HIV/AIDS”, and

(v) Test some aspects of the regional educators’ manual designed for shop stewards and other materials on HIV/AIDS.

**Project achievements**

**Capacity of shop stewards**

Through the activities of the project, shop stewards have been able to train negotiators on HIV/AIDS issues for involvement in Collective Bargaining Agreements (CBAs). At the same time, many shop stewards have built the confidence of sensitizing their fellow colleagues on HIV/AIDS. They also referred workers for further assistance in hospitals and VCT centres.

On the other hand, shop stewards insisted on confidentiality of HIV test results. This confidentiality should be kept both by the doctor and employer.

Over the years, the shop stewards developed Information Education Communication (IEC) materials such as posters and brochures that were distributed to the workers. Shop stewards also made sure that condoms were accessible to all the workers at the workplace. The table below shows the extent of workers outreach through the project in 2007.
## Workers reached by the project in Zambia in 2007

<table>
<thead>
<tr>
<th>Name of union</th>
<th>Name of workplace</th>
<th>Dates</th>
<th>Number of workers reached</th>
</tr>
</thead>
<tbody>
<tr>
<td>National Union of Public Service Workers (NUPSW)</td>
<td>Group 4 Securicor</td>
<td>17/2/2007</td>
<td>23</td>
</tr>
<tr>
<td>National Union of Plantation and Agriculture Workers (NUPAW)</td>
<td>York Farm</td>
<td>23/2/2007</td>
<td>31</td>
</tr>
<tr>
<td>Hotel and Catering Workers Union (Z)</td>
<td>Holiday Inn, Pamodzi Hotel, Hotel Inter-Continental</td>
<td>15/2/2007</td>
<td>22</td>
</tr>
<tr>
<td>Hotel and Catering Workers Union (Z)</td>
<td>Lusaka Hotel, Food Fayre, LA Internet Café, Chicken Licken, Innscor (Z), HCAWUZ</td>
<td>14/2/2007</td>
<td>25</td>
</tr>
<tr>
<td>National Union of Commercial and Industrial Workers</td>
<td>Lamise Investments</td>
<td>12/2/2007</td>
<td>23</td>
</tr>
<tr>
<td>Zambia Union of Security Officers and Allied Workers</td>
<td>Safetech</td>
<td>16/2/2007</td>
<td>22</td>
</tr>
<tr>
<td>Depot Waal</td>
<td>National Union of Commercial and Industrial Workers (NUCIW)</td>
<td>24/2/2007</td>
<td>27</td>
</tr>
</tbody>
</table>

Workers reached by the project in Zambia in 2007

<table>
<thead>
<tr>
<th>Name of union</th>
<th>Name of workplace</th>
<th>Dates</th>
<th>Number of workers reached</th>
</tr>
</thead>
<tbody>
<tr>
<td>National Union of Public Service Workers (NUPSW)</td>
<td></td>
<td>20/2/2007</td>
<td>22</td>
</tr>
<tr>
<td>(NUPSW)</td>
<td></td>
<td>17/2/2007</td>
<td>25</td>
</tr>
<tr>
<td>Zambia Union of Security Officers and Allied Workers</td>
<td></td>
<td>17/2/2007</td>
<td>23</td>
</tr>
<tr>
<td>National Union of Plantation and Agriculture Workers (NUPAW)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(NUPAW)</td>
<td></td>
<td>17/2/2007</td>
<td></td>
</tr>
<tr>
<td>Hotel and Catering Workers Union (Z)</td>
<td></td>
<td></td>
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<tr>
<td>(Z)</td>
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</tr>
<tr>
<td>Hotel and Catering Workers Union (Z)</td>
<td></td>
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<tr>
<td>(Z)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>National Union of Commercial and Industrial Workers</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(NUCIW)</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>Zambia Union of Security Officers and Allied Workers</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>National Union of Commercial and Industrial Workers</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(NUCIW)</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Total number of workers reached: 220
Enhanced treatment portfolio

Zambia had notable success in scaling up ART treatment. The Government can take much of credit for providing strong leadership while at the same time recognizing that they cannot succeed alone. They involved faith based organization, civil society and non government organization’s and entered into partnership with the private sector to administer some treatment. ZCTU also partnered with their competitor the Federation of Free Trade Unions of Zambia (FFTUZ) and with Global Union Federations.

Campaign and lobbying

ZCTU and its affiliate unions subscribed to the commitment by ITUC Africa that: “no effective strategy to address the HIV/AIDS pandemic will succeed unless it includes a serious commitment to reach people where they work. Workers’ unions and vast networks of worker activists built within their families, communities and through alliances with our social partners work to advance the interests of people at the grassroots. As trade unionists, we pledge to take our efforts from the shop floor to the streets of the communities in which we live.”

In this regard, ZCTU also committed itself and its affiliated unions to observe that trade unions played a critical role in combating HIV/AIDS as a workplace issue. Using the rights-based approach and with the support of ITUC Africa/LO-Norway project, unions in Zambia advocated for the following:

- the creation of supportive national policy frame work;
- the creation of legal, social and cultural environment in which people living with HIV/AIDS are able to participate through a national code of practice;
- the elimination of discrimination and stigma; and
- scaling up prevention, treatment, care and support of HIV/AIDS at the workplace.
The main agenda for ZCTU in this crusade was stated as follows:

- contribute towards formulation and implementation of effective and non discriminatory HIV/AIDS policy and code of practice at national and workplace levels;

- provide an effective dependable means of coordination and networking of workers efforts in the fight against HIV/AIDS locally and regionally;

- participate in the development and implementation of workplace preventive and supportive measures;

- empower workers through collective bargaining and other means to campaign against discrimination, stigmatization and secure acceptable benefit schemes for persons living with HIV/AIDS; and

- develop training materials and maintain continuous campaigns in both the informal and formal sectors of employment.

**Linkages and partnerships**

ZCTU has formed various linkages with other stakeholders including PLWHAs. ZCTU also sits on the National AIDS Council Theme Group on Mainstreaming and Decentralisation and the HIV/AIDS Coordinating Committee for ILO constituents.

**Other achievements**

- Establishment of the ZCTU HIV/AIDS Crusade under the sponsorship of ITUC(2002)

- Development of the ZCTU HIV/AIDS Policy under ITUC sponsorship

- Development of HIV and AIDS workplace policy by affiliated unions
• Sitting on the National AIDS Council theme group on HIV/AIDS Mainstreaming and Decentralization.

• Inclusion, through the Tripartite Labour Council, of a Chapter in the Employment Act on HIV/AIDS.

• Inclusion of HIV and AIDS in Collective Agreements by affiliate unions

• Undertaking joint HIV/AIDS activities with the rival federation, the Federation of Free Trade Unions of Zambia (FFTUZ)

• Mainstreaming HIV and AIDS as a core component of ZCTU and affiliates.

• Undertaking joint activities with the Zambia Federation of Employers

Examples of union achievements in the fight against HIV/AIDS in Zambia

<table>
<thead>
<tr>
<th>Sector/Union</th>
<th>Achievement</th>
</tr>
</thead>
<tbody>
<tr>
<td>Printing Industries – NAMPAK Company Zambia</td>
<td>Formulated HIV/AIDS workplace policy in collaboration with employers.</td>
</tr>
<tr>
<td></td>
<td>Funds allocated for ART.</td>
</tr>
<tr>
<td></td>
<td>Counselling given for adherence to ART.</td>
</tr>
<tr>
<td></td>
<td>Many workers have been tested voluntarily.</td>
</tr>
<tr>
<td>Railway Transport Sector</td>
<td>HIV/AIDS workplace policy is in place; Negotiated clauses on HIV/AIDS in 25 CBAs.</td>
</tr>
<tr>
<td>Zambia National Union of Teachers (ZNUT) and Education International HIV/AIDS Programme for teachers</td>
<td>Formation of support groups 32 in number.</td>
</tr>
<tr>
<td></td>
<td>Reduced early deaths.</td>
</tr>
<tr>
<td></td>
<td>PLWHAs who declare their status openly are given financial support through their support groups.</td>
</tr>
</tbody>
</table>
### Achievements of involving workers in fighting HIV and AIDS in the workplace in Africa

<table>
<thead>
<tr>
<th>Sector/Union</th>
<th>Achievement</th>
</tr>
</thead>
<tbody>
<tr>
<td>University of Zambia Lecturers and Researchers Union (UNZURAU)</td>
<td>Have an HIV/AIDS workplace policy on prevention, care and support in place. Workers contribute to a medical scheme. Clauses on care and support are entrenched in CBAs</td>
</tr>
<tr>
<td>Basic Education Teachers Union of Zambia (BETUZ)</td>
<td>Have an HIV/AIDS workplace policy in place. Conducted couples sensitization. Fund raised to support orphans of the deceased teachers. Provision of food supplements. Improved access to VCT.</td>
</tr>
</tbody>
</table>

### Zambia case study 1: Mineworkers Union of Zambia

HIV/AIDS is one of the compulsory courses undertaken in the company’s internal training programme. The courses are conducted by experts and trained shop stewards. The subjects taught include counselling, lobbying, advocacy, awareness creation and campaigns. In collaboration with the trade unions, the company establishes support groups to ensure prevention, treatment care and support.

### Activities, Prevention, Treatment, Mitigation, Challenges

<table>
<thead>
<tr>
<th>Activities</th>
<th>Prevention</th>
<th>Treatment, care and support</th>
<th>Mitigation</th>
<th>Achievements and challenges</th>
</tr>
</thead>
<tbody>
<tr>
<td>Training and AIDS awareness</td>
<td>HIV/AIDS sensitization or awareness</td>
<td>Creation of workplace support groups</td>
<td>Existence of HIV/AIDS joint workplace committee</td>
<td>Existence</td>
</tr>
<tr>
<td>Development of an HIV/AIDS manual</td>
<td>Access to information</td>
<td>Access to appropriate information in dealing with stigma and discrimination</td>
<td>Availability of a resource guide on HIV/AIDS</td>
<td></td>
</tr>
<tr>
<td>Activities</td>
<td>Prevention</td>
<td>Treatment, care and support</td>
<td>Mitigation</td>
<td>Achievements and challenges</td>
</tr>
<tr>
<td>---------------------------------</td>
<td>-------------------------------------------------</td>
<td>-------------------------------------------------</td>
<td>-------------------------------------------------</td>
<td>-------------------------------------------------</td>
</tr>
<tr>
<td>Development of partnerships</td>
<td>Access to VCT and prevention</td>
<td>Provision of ART and HBC</td>
<td>Overcoming issues of confidentiality</td>
<td>Sustainability of care and support</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Training of women</td>
<td>PMTCT and overcoming and traditional practices and myths</td>
<td>Provision of home-based care and support</td>
<td>Reduced vulnerability</td>
<td>Increased knowledge on HIV/AIDS</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Advocacy</td>
<td>Access to information, VCT and universal precautions</td>
<td>On site clinics, hospitals, out-sourced medical schemes</td>
<td>Peer education Reasonable accommodation Effective grievances Disciplinary procedure</td>
<td>Sensitization about AIDS at workplace Policies to be made</td>
</tr>
</tbody>
</table>

Zambia case study 2: Zambia Graphics and Allied Workers Union (ZAGRAWU)

One of the major problems of HIV/AIDS workplace interventions is lack of sustainability. However, it is encouraging to note that at some workplaces, such as NAMPACK Company Zambia, the bipartite committee on HIV/AIDS has worked well to the extent that the company has mainstreamed HIV/AIDS activities as one of their core business.
### Achievements of involving workers in fighting HIV and AIDS in the workplace in Africa

<table>
<thead>
<tr>
<th>Activities</th>
<th>Prevention</th>
<th>Treatment, Care and support</th>
<th>Mitigation</th>
<th>Achievements and challenges</th>
</tr>
</thead>
<tbody>
<tr>
<td>Formulated the HIV/AIDS policy at NAMPAK Zambia</td>
<td>Workers are accessing ARVs and they have understood the importance of using condoms</td>
<td>The company allocates funds to HIV/AIDS issues for it to run the union and assist in education programmes</td>
<td>More employers have understood and some have even gone for VCT through the element of confidentiality</td>
<td>Policy formulation. Workers education on HIV/AIDS fund allocated by employer.</td>
</tr>
</tbody>
</table>

Workers are now accessing ARVs and workers have understood the importance of condom use

The union has difficulties with other companies to open up and to run or implement the policy which may be put in place

### Zambia case study 3: University of Zambia Lecturers and Researchers Union (UNZALARU)

HIV/AIDS clinic creation together with employer and provides VCT to both staff and students. Mobile VCT clinics and tents are also conducted by both parties.
## Trade Union Actions against HIV/AIDS at the Workplace

<table>
<thead>
<tr>
<th>Activities</th>
<th>Prevention, Care and Support</th>
<th>Treatment Mitigation</th>
<th>Achievement and Challenges</th>
</tr>
</thead>
<tbody>
<tr>
<td>Medical scheme</td>
<td>Union pays bill for all medical expenses</td>
<td>Services being obtained at UTH and other big health institutions</td>
<td>Members have access to confidentiality</td>
</tr>
<tr>
<td>Work place policy</td>
<td>Guiding members on prevention of HIV</td>
<td>Advocate with management on behalf of members</td>
<td>Document yet to be published</td>
</tr>
<tr>
<td>HIV/AIDS clinic creation</td>
<td>Employer provides VCT to both staff and students</td>
<td>Working well, but not widely accessed</td>
<td></td>
</tr>
<tr>
<td>Mobile VCT clinics/tents</td>
<td>VCT attained</td>
<td>VCT offered sensitization</td>
<td>Working well</td>
</tr>
</tbody>
</table>

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**Achievements of involving workers in fighting HIV and AIDS in the workplace in Africa**
Chapter four

Project implementation in other countries

Angela Lomosi and Mohammed Mwamadzingo

Botswana

The LO-Norway/ITUC Africa worked closely with the Botswana Federation of Trade Unions (BFTU) to ensure that shop stewards were mobilized for training on HIV/AIDS. The first shop stewards’ training was held in Tlokweng from 20 February to 1 March 2002 and was attended by 14 participants from five affiliated trade unions. The aim of this training was to help the shop stewards learn and implement different prevention, care and support strategies at the workplace.

With the support of the Canadian International Development Agency, OATUU Health, Safety and Environment Programme (HSEP) and Botswana Institute for Development Policy Analysis (BIDPA) a tripartite study was carried out on the impact of HIV/AIDS: Options for Intervention in 5 companies. BFTU produced a training manual entitled Workplace HIV/AIDS sponsored by the Organisation of African Trade Union Unit and the Southern African AIDS Training Programme. It was also reported that the Government of Botswana came up with a National Policy on HIV/AIDS, which has been adopted as a code to be observed by organizations, institutions, employers, among others.

Botswana is considered to be one of the richest countries in Africa because of its diamond resources and has a small population of 1.5 million people. Yet, it
remains one of the countries that have a high rate of infection. The Botswana government declared HIV/AIDS to be a national disaster, and took measures to develop a national policy and put in place support structures. However, a lot remains to be done especially at the workplace. Many workers have complained of the government not sharing the cake equally. There have been complaints of communities getting more attention from the government than the workplace, which remains ignored. This is the main reason that BFTU was included in the project.

Due to structural rigidities with unions in Botswana, BFTU participation in the project was highly sporadic. Nonetheless, the following achievements were reported by the shop stewards in Botswana:

- About 50% of the shop stewards had managed to facilitate the development and implementation of a HIV workplace policy. This policy will help to create an environment free from stigma and discrimination for HIV positive workers.
• The shop stewards took time to sensitize the management on the importance of carrying out prevention, care and support programmes at the workplace and solicited for support in the fight against HIV/AIDS at the workplace.

• The trained shop stewards took the initiative of forming HIV/AIDS committees (which comprised both the management and the workers) at the workplace, and for those who had existing HIV/AIDS committees present actively participated and advised the committee on how to address HIV/AIDS issues.

• Most of the shop stewards convinced the management to provide adequate condoms at the workplace. When condoms were provided, shop stewards took their time to educate workers on the importance of using them correctly and consistently.

Eritrea

With the support of the LO-TCO, the ITUC Africa project coordinator trained 110 participants in Asmara in December 2004. The participants included leaders and senior officials of the National Confederation of Eritrean Workers (NCEW), national federations affiliated to NCEW, base union leaders in Asmara, 10 representatives of employers, and 10 government officials from the Ministries of Health and Labour.

The objectives of the workshop were to:

1. build capacity of participants to initiate and implement HIV/AIDS prevention, care and support programmes at the workplace.

2. strengthen the capacity of trade unions and employers in addressing issues related to HIV/AIDS at the workplace.

3. facilitate the elimination of discrimination of workers infected and or affected by HIV/AIDS at the workplace through behaviour change.
4. sensitize trade union leaders on the importance of their active participation in the AIDS Country Coordination Mechanisms (CCMs) and encourage them to build partnerships with all other stakeholders for comprehensive care and support services.

The outcome of the workshop was a pledge by all the participants’ present at the workshop to jointly work together at all levels in the fight against HIV/AIDS.

Ghana¹

Although the project under consideration did not have explicit resources devoted to national level activities in Ghana, the Ghana Trades Union Congress (Ghana TUC) collaborated with ITUC-Africa at the regional level. The National HIV/AIDS Coordinator from Ghana TUC was invited and participated in many activities organized by the project.

The inclusion of Ghana was because of the realization that, as in other project countries, the Ghana TUC sees HIV/AIDS as a trade union issue. Ghana TUC has been carrying out education, sensitization programmes and campaign activities aimed at strengthening the capacity of the workplace as an entry point in the fight against the spread of HIV/AIDS.

In collaboration with the British TUC, Ghana TUC identified HIV/AIDS as an important area requiring urgent attention. As such, in 2008 the Bill Morris Testimonial Trust for HIV/AIDS in Africa, in collaboration the development arm of the British TUC (TUCAID) agreed to fund a project proposal submitted by the Ghana TUC. The aim of the project was to contribute to the prevention of the spread of the disease among workers in the timber and wood sector in Ghana.

¹ This section was developed from information provided by David Owusu Boatey of the Ghana Trades Union Congress.
The objectives of the project were stated as follows:

- To encourage workers know their HIV status;
- To ensure that HIV-positive workers have access to care and support which includes treatment and education;
- To enable GHANA TUC to have data on HIV-positive workers so that they can negotiate on their behalf to ensure that they are not victimized at the workplace; and
- To minimize stigmatization association with HIV/AIDS.

The project activities involved a comprehensive programme of training, education and outreach activities and the provision of VCT facilities at the workplace. Six training workshops were held in different parts of the country. During these workshops 1702 trade union officials were informed about the basic facts about HIV/AIDS, effective information dissemination, and counselling. The participants also enhanced their understanding of the implications of the pandemic for the workplace, including discrimination and stigmatization of affected workers and the role of trade unions in the fight against the disease.

As a direct result of the project, the Timber and Woodworkers Union of the Ghana TUC (TWU) now has a pool of some 170 officials equipped with the knowledge and skills necessary for an effective workplace response to HIV/AIDS. The officials trained under the project have been active in the dissemination of information on basic facts about HIV/AIDS at the workplace with a view to preventing the spread of infection through behavioural changes among peers.

About 1,100 workers who tested negative have received counselling on how to avoid infection and have been advised to go for further tests approximately three months after the initial tests. There is evidence that many of them have passed the facts about the disease on to family members, thereby facilitating the dissemination of information.

2 The initial plan was to train about 150 union officers. The number was increased following a request from the union.
Of the 45 workers who tested positive, the majority have been attending the HIV/AIDS clinics to which they have been referred and are receiving treatment, care and support. There is now a heightened awareness of risks of infection and of the need for protection among those who took part in project activities. Efforts are continuing to alert union members to the risks associated with the disease.

On the other hand, employers who collaborated with the TWU in organizing project activities, are pleased with the outcome and acknowledge its relevance to the workplace, appreciate its effectiveness and impact, and welcome further initiatives.

Several factors contributed to the successful completion of the project. The Ghana TUC played a pivotal role in the organization and management of project activities by making available to it the services of one of its experienced and dedicated officers. The General Secretary and other senior leaders of TWU showed firm commitment to the objectives of the project from inception, oversaw the organization of key events and made an invaluable contribution to its success.
Moreover, close collaboration with the regional health authorities, notably, with the clinical staff at the HIV/AIDS Unit at the Kumasi South Regional Hospital, was instrumental in securing the technical expertise and skills essential for organizing the VCT clinics at different workplaces. The support from the regional health authorities not only made it possible to keep costs of VCT to a minimum, but also considerably facilitated the referral and follow-up of the workers diagnosed with HIV/AIDS. The integration of the VCT component of the project into HIV/AIDS services already in place at the regional level proved to be a useful, effective and economical way of organizing VCT facilities at the workplace.

It has also been possible to reduce costs by adapting and reprinting existing information and education material produced by ITUC Africa and ILO for outreach activities targeted on rank and file union members and their families.

**Mozambique**

As a follow-up to the cooperation between the national trade union centre in Mozambique (Organizacaao dos Trabalhadores de Mozambique – Central Sindical, OTM-CS) and the ITUC Africa, the project delivered a training seminar for 60 shop stewards on “Peer educators and HIV/AIDS at the workplace” held at the OTM-CS School in Matola in November 2004. The participants also included Association of Operators and Workers in the Informal Sector (ASSOTOSI), Ministry of Labour, among others. At the end of the workshop, participants committed to educate and sensitize other workers on HIV/AIDS.

**South Africa**

Though not many national level activities were undertaken in South Africa in the context of the project, ITUC Africa affiliates have always been part of the regional activities. South Africa has hosted several regional workshops aimed at sharing experiences on trade union actions against HIV/AIDS. The National Council of Trade Unions in South Africa (NACTU) has been pivotal in these knowledge sharing exercises. NACTU has been carrying out training activities on HIV/AIDS as part of its regular educational activities since 1990.
NACTU together with COSATU and the National AIDS Programme produced a brochure/leaflet with the support of the National Primary Health care Network. However, not much has been done in the development of manuals. NACTU has been utilizing manuals produced by other organizations such as AIDS Law Project, AIDS Legal Network and Treatment Action Campaign (TAC).

Other training programmes include one facilitated by the American Solidarity Center. At the beginning of 2001, the American Solidarity Center started provincial workshops for the three federations (NACTU, COSATU and FEDUSA). The programme was funded by US Agency for International Development (USAID) through the “HIV/AIDS Training and Technical Assistance Support Programme” entitled “Fundamentals of HIV/AIDS and Approaches to Teaching about HIV/AIDS: A Training of Trainers (TOT) Provincial workshops”

Training under this programme has included describing how HIV/AIDS is transmitted and prevented, symptoms of HIV/AIDS and related opportunistic infections of HIV/AIDS, Prevention of HIV/AIDS at the workplace, Laws protecting workers living with HIV/AIDS, HIV/AIDS a trade union issue, and developing a workplace policy, campaign on drugs and medicines.

**Swaziland**

In response to a request by the Swaziland Federation of Trade Unions, the LO-Norway/ITUC Africa Project offered to train 28 shop stewards in Manzini in November 2002. SFTU was concerned that trade unions were losing members from the HIV/AIDS-related illnesses. The shop stewards were trained to carry out integrated HIV/AIDS programmes at the workplace. The training included basic counselling skills, home based care, sexually transmitted infections, training methodologies, basic facts on HIV/AIDS, living positively with HIV/AIDS, and developing a HIV/AIDS workplace policy.

Some of the project achievements in Swaziland include:

(i) Building the capacity of shop stewards to initiate and implement prevention, care and support programmes at the workplace;
(ii) Strengthening the capacity of trade unions in their work with employers in addressing issues related to HIV/AIDS at the workplace;

(iii) Facilitating the elimination of stigma and discrimination of workers infected and affected by HIV/AIDS at the workplace through behaviour change communications;

(iv) Strengthening coordination of HIV/AIDS intervention at the workplace;

(v) Being actively involved in the AIDS Country Coordination Mechanisms” (CCMs) and building partnerships with all the stakeholders for comprehensive care and support services;

(vi) Some companies joined workers to provide HIV/AIDS awareness and sensitization programmes. These programmes targeted workers and their families;

(vii) Some enterprises engaged unions to include HIV/AIDS issues in Collective Bargaining Agreements; and

(viii) Some employers provided condoms that were being put in the toilets at the workplace

Zimbabwe

The Zimbabwe Congress of Trade Unions (ZCTU) was one of the founding institutions at the onset of the LO-Norway/ITUC Africa project. The first activity under the project was a national workshop held in Harare in November 2001. The inclusion of ZCTU in the project was on the realization that the ZCTU Health and Social Welfare Department had long experience in implementing HIV/AIDS training under the Southern African AIDS Training Programme, a project financed by CIDA. Such training activities had been undertaken by the department since 1995.
Project activities in Zimbabwe were later scaled down due to the impending political dispensation. However, training activities continued to be carried out for HIV/AIDS trainers, peer educators (branch, provincial or regional union activists) shop stewards and counsellors. The training of trainers has targeted health and safety officers, organizers, women activists and educators. Training of trainers, peer educators and couples workshops covered topics such as: factors affecting the spread of HIV/AIDS, living with HIV/AIDS positive persons, counselling support, HIV/AIDS as a union issue, minimizing risks, and safe sex.

Counselling skills workshops covered topics such as, facts on HIV/AIDS transmission, introduction to counselling, basic counselling skills, qualities of a counsellor, steps in counselling different types of HIV/AIDS, psychological aspects of HIV/AIDS counselling, family myths on HIV/AIDS, bereavement, marital problems and marriages, child counselling, and home-based care for persons living with AIDS.

Over the years, ZCTU developed training manuals for trainers and shop stewards and carried out surveys in some parts of the country. The survey findings showed that while workers were well informed about HIV/AIDS.
Chapter five

Conclusions and way forward

Conclusions

In 2001, ICFTU-AFRO partnered with the LO-Norway to implement a special project entitled “Trade Union Action Against HIV/AIDS Project”. The first funding phase expired in 2005 and was renewed for a further period of five years. Over the years, the project implementation was successful in producing several good results. These include the formation of partnerships with employers’ organizations at the regional and national level, with the aim of strengthening the fight against HIV/AIDS at the workplace. Similarly, the project was able to publish comprehensive training manuals for shop stewards on HIV/AIDS. The manuals have so far been translated into English, French, Portuguese and Kiswahili. They are indeed popular among the trade union fraternity and have been widely disseminated to all national centres in Africa as well as to other relevant organizations.

Through the project activities, the ICFTU-AFRO (and later on the predecessor, ITUC Africa), worked closely with the HIV/AIDS national coordinators from six core countries who carried out educational activities in Cote d’Ivoire, Kenya, Malawi, Uganda, Tanzania and Zambia. During this time, over 1,350 shop stewards have been trained in various aspects about HIV/AIDS.

In spite of the many achievements on the fight against HIV/AIDS, the war is far from over. The international trade union movement is calling for governments to push ahead with a rights-based approach to tackling the HIV and AIDS pandemic. This is because while there are some positive signs concerning HIV/AIDS prevalence in some countries, millions of HIV-positive people still have no
access to treatment, millions more are at high risk of infection. Moreover, there are disturbing signs of increasing incidence in several countries. We have to overcome the stigma and discrimination which are still common around the globe, and allocate sufficient resources to stop the spread of the virus and ensure that treatment is available to all those affected. We are especially concerned that the global economic crisis, and cuts to public expenditure on health in particular could undermine the progress which has been made.

As move ahead, trade unions must continue to stress on the importance of action at the workplace in fighting the pandemic. Trade unions must also highlight the adoption of a Recommendation on HIV/AIDS and the World of Work by the ILO at the June 2010 Conference. The ILO Recommendation, the first ever international human rights instrument to focus explicitly on HIV and AIDS and the world of work, was adopted by an overwhelming majority of ILO delegates. It clearly establishes the importance of action at the workplace, including voluntary testing and counselling protection against discrimination, and focuses on the need for engagement with those most vulnerable and at risk.

This report was compiled with the expectation that by providing clear information on the successful achievements, these stories will help trade unions to address particular and unique situations in combating the HIV/AIDS pandemic at the workplace. Through the project implementation, the following lessons have emerged:

- Peer education is important to sensitize workmates on HIV/AIDS at the workplace. The use of shop stewards creates an acceptable environment for workmates to discuss and share information of many issues, including the fight against HIV/AIDS at the workplace.

- Trade unions can be in the forefront in designing HIV/AIDS programmes that could easily reach out to the wider community and thus contribute to the reduction of stigma and infection rates at the society level.
Achievements of involving workers in fighting HIV and AIDS in the workplace in Africa

- When employers are involved in the HIV/AIDS programme, they can be supportive to workers.
- Having support mechanisms at workplaces enables HIV/AIDS workers live positively and be productive.
- Continuity of HIV/AIDS sensitization helps promote behaviour change.

Many of the positive achievements of the project are attributable to the unwavering support from the cooperating partners. The support of LO-Norway in this case enabled ITUC Africa to implement the proposed activities at regional level and facilitated the workplace-based initiatives at the national level. The personal commitment of project coordinators and senior administrators at all level is also instrumental during the project implementation processes.

The establishment of implementation mechanism, such as the annual Project Steering Committee also contributed to the successful implementation of project activities. The PSC acted as a peer review process and a self-evaluation tool.

Way forward

The HIV/AIDS pandemic continues to be a global challenge to development and social progress. The reality is that most people infected with HIV are living under circumstances of economic and social deprivation, with most of the new HIV infections occurring in Sub-Saharan Africa. Moreover, the consequences of HIV/AIDS on workers, their families and dependents will still be apparent for the period ahead, further calling for consideration on intervention to safeguard consequences of the pandemic on human rights, poverty, inequality and social justice faced by workers and poor people around the world. More attention will need to be give to the implications on women, who are more vulnerable to the pandemic. The project approaches that have worked so well in the past will continue to be relevant in the future.

From the foregoing and in the context of the project under consideration, as the trade unions actions enter a new phase, with a new time frame, it is desirable...
that participating national trade union centres undertake baseline studies to determine the prevailing situation analysis. By documenting the starting point of the new project phase, it would assist in the tracking and following the contribution of the project, identify strengths and weaknesses, make necessary adjustments as dictated by the changing environment, as well as determine the level of efficiency in achieving the project goals and objectives.

For the project to achieve its stated overall development goal, participating organizations should clearly define a strategic policy framework that seeks to propose modalities and workable mechanisms on how the project goal can be achieved and to identify means of strengthening the capacity to implement those strategies. The way forward should be comprised of two stage implementation and monitoring strategy. All institutional arrangements for the project should be composed of developing annual work plans and performance indicators as determined by the Project Steering Committee.

Based on the lessons learnt, the next project phase must put emphasis on

- the absolute need to protect those infected with HIV/AIDS from all forms of discrimination at work and to extend to them the protections offered by various ILO Conventions 111;

- the importance of privacy and confidentiality at the workplace and insist that any workplace surveillance, including monitoring and managing of HIV/AIDS must take place without compromising workers’ personal data privacy and confidentiality rights;

- Governments to work with their social partners in implementing the new ILO instrument, which underlines that all countries, whatever their infection rate, can benefit from a legal framework that brings HIV-related workplace challenges into the open, protects against discrimination, respects privacy and confidentiality rights, prevents risks of infection at the workplace and ensures the participation of all stakeholders from relevant institutions;
• continued collaboration with employers’ organizations in joint efforts to combat HIV/AIDS discrimination in the workplace and to participate in the financing of access to healthcare for those infected with HIV as well as the aid and protection measures needed; and

• continued integration of the gender dimension of HIV/AIDS in all activities.
The African Regional Organisation of the International Trade Union Confederation (ITUC-Africa) is a pan-African trade union organization created in November 2007 following the merger of two former African trade union organizations, namely ICFTU-AFRO and DOAWTU. ITUC-Africa has 16 million declared members and 90 affiliated trade union centres in 47 African countries.

The mission of ITUC-Africa is to strengthen the trade unions in Africa and provide a common voice for all African workers to realize a healthy and safe working environment and a decent life for all by fighting all forms of exploitation and discrimination, defending human and trade union rights, promoting social justice, peace, democracy and vigorously pursuing the preservation of the environment.

LO-Norway is Norway’s largest and most influential workers’ organisation. About 850,000 workers are affiliated to the national unions which in turn are affiliated to LO. Fifty percent of LO’s members are women. In some unions, women make up three quarters of the membership.