



International
Labour
Office
Geneva

Finding ways to cope with the HIV impact in Zimbabwe

Stomping feet, clapping hands, the sound of singing and shrill ululating – this enthusiastic welcome is how the workers' HIV/AIDS training sessions always begin, and today is no different. Participants have come from all over Zimbabwe, often enduring long journeys to the workshop venue, because they want to learn how to protect themselves from HIV infection and to share experiences. The attendance level is high and evidences that there is a hunger for information on strategies to cope with the many different ways that HIV is affecting the workforce and their families.

"I have lost a sister, other relatives and many friends at work because of AIDS so I can never relax and say I know enough about the disease. I always welcome training to get new information for myself and I share it with my family and friends," says Betty Moyo, a shop steward from the Commercial Sector Union. The CSU represents informal economy operators who face an insecure existence, working long hours on low wages and often spending extended periods away from home - all factors that make them vulnerable to risky behaviour.

Like Betty, Wilson Chidzambwa has lost friends to AIDS. He is an entrepreneur in the informal economy with an



"HIV is a threat to my business and to my future. I have to learn more about how to protect myself and my family. I value these training opportunities," says Wilson Chidzambwa

up and coming small enterprise named Simbihairaswi Pot Molding (literally 'no scrap metal should be thrown away!') based in Zvishavane, a small town in the south of Zimbabwe. His business is insecure and even coming to the workshop means he will lose earnings, but he participates and encourages his friends to learn about HIV.

Zimbabwe has experienced a significant decline in HIV prevalence from a peak of 29.3 per cent in 1997/98 to current national estimates of 15.6 per cent (DHS 2007) among the adult population. Even so the country continues to suffer the serious impact of the epidemic across all sectors. It has meant increased operating costs, reduced productivity and, often, complete failure: many businesses, particularly small and medium enterprises (SMEs), tell the story. There is plenty of evidence of families who have lost everything and children who are battling to keep households going as parents and other adults succumb to AIDS.

The declining economy with hyperinflation and over 80 per cent unemployment has further weakened health and other social services. In mid 2007 the ILO, in cooperation with the Swedish International Development Agency (Sida), set up a two-year joint initiative to help employers' and workers' organizations to design and implement effective HIV/AIDS workplace policies and programmes. Using a range of behaviour change strategies and other interpersonal interventions to increase knowledge and awareness of HIV, the project brings workers and employers together to build capacity and achieve a common goal of protection against HIV and mitigation of its impact. The initiative is led by the Employers' Confederation of Zimbabwe (EMCOZ) and the Zimbabwe Congress of Trade Unions (ZCTU).

The HIV training programmes equip workers and their families with skills for personal risk assessment to prevent infection, and provide information on referral services and access to treatment, care and support including antiretroviral therapy (ART). Workforce and management are sensitized on strategies to reduce workplace discrimination and promote safety at work

using the ILO Code of Practice on HIV/AIDS in the World of Work as well as the statutory instruments and national policy on HIV/AIDS.

Based on consultative processes with union leaders and management, influential workers are enlisted to act as 'champions' in the workplace to support enterprise level implementation of HIV activities and help identify the needs of workers and gaps in the provision of services. The involvement of people living with HIV is strongly advocated, and special attention is given to the gender aspects of HIV and AIDS. Union leaders are trained and supported to negotiate for HIV mitigation strategies and benefits to be included in collective bargaining agreements.

A sense of urgency brings change

The project has created a sense of urgency among employers and workers and promoted wider social dialogue. Project implementation has been multi-faceted ranging from sector-wide HIV policies to enterprise level initiatives encouraging behaviour change to reduce risk. Coordination structures have been strengthened for a more effective private sector response, including the creation of a private sector partnership forum.

The employers are operating under the theme, 'Making HIV and AIDS a Boardroom Issue,' which means HIV issues are included in all key employer activities, including the annual congress and golf tournaments. While it is usually very difficult to access top management, the strategy has made it easier to communicate about HIV and this has led to an increased programme uptake at enterprise level.

Workers' unions have set up drop-in centres for their members in six regions around the country. Each centre provides a meeting place for workers where they can openly discuss and share knowledge on HIV and AIDS, access information in print, audio-visual or digital form, and benefit from counselling services.

Some of the centres have internet access attracting more young workers.

The impact assessment of HIV/AIDS on the small and microenterprise (SME) sector has helped identify gaps in implementation and inform strategies to scale up responses and strengthen coordination. The programme has already developed a monitoring and evaluation tool for data collection at the workplace which feeds into the national monitoring system. The project ends in 2009 but those involved believe that action will be sustained because key staff in the union centres and employers' affiliates have greater capacity and confidence to manage their own HIV programmes. Businesses are already cost sharing on programme implementation and the cascade method of training has inbuilt institutional capacity strengthening features that are already showing positive results.

For more information please contact the ILO HIV/AIDS Technical Specialist for Southern Africa:

Ms. Evelyn SERIMA

serima@ilo.org

Telephone: +263 436 9805/12

