

1.0 INTRODUCTION

Swaziland is one of the most affected countries by the HIV/AIDS pandemic, statistics indicates a 26% adult prevalence rate of which the age is 15 – 49 years are the most affected (UNAIDS 2008). This age group is the most economic productive (workforce) of the country.

In response to this pandemic, in the year 2000, the government of Swaziland established the National Emergency Response Council on HIV and AIDS (NERCHA) to coordinate a national response to the pandemic. In 2004, Government also established and launched the Public Sector HIV and AIDS Coordinating Committee (PSHACC), which initiated a workplace program to deal with the pandemic (which by its nature impacts the workplace). PSHACC is chaired by the Under Secretary of the Ministry of Public Service. PSHACC has as its members, the Under Secretaries (US) who chair the Wellness Committees in their different ministries. The Ministry of Public Works and Transport is part of the PSHACC establishment/initiative or program. This policy have been developed in the context of the PSHACC Policy and also the National (NERCHA) Policy.

1.1 Ministry of Public Works and Transport

The Ministry of Public Works and Transport is one of the largest ministries in Swaziland (considering the number of her workforce). It has 1834 workers. The ministry is composed of six (5) departments, namely Roads Department, Buildings Department, Road Transportation Department (RTD), Administration, , and Central Transport Administration (CTA).

The ministry's workforce varies remarkably in terms of education and professional qualifications, something that has an impact on their social behavior. Additionally, the geographic location of works sites/camps in the ministry worsen the of practice concurrent multiple partners as employees live far away from home for long periods of time.

The ministry has established vibrant wellness committees in response to this situation. The Wellness Committees are tasked with developing awareness programs to educate on prevention, care and support, and programs to mitigate the impact of HIV/AIDS and other chronic illness in the workplace. As part of its strategy of addressing the effects of HIV/AIDS and other chronic illness among its workforce, the ministry has trained counselors and peer educators in all its

departments, stations and depots.

PREAMBLE

The Ministry of Public Works and Transport recognizes the seriousness of HIV/AIDS, Tuberculosis and other chronic illnesses at the workplace. As a result, staff will be educated on the policy (as a management tool) that provides guidelines on HIV/AIDS and other chronic illnesses to management.

Consequently, dialogue sessions and education programs will be established. During these sessions, the Ministry will endeavor to inform and educate staff in order to promote behavioral change among them. Hard copies in two (2) languages (siSwati and English) will be provided. Moreover, the same information will be made available through an electronic library (website) of the Ministry.

This policy document therefore gives details and directions on;

- The Ministry's stance on hiring people with HIV/AIDS and/or other chronic illnesses
- Rights and job security for people living with HIV/AIDS and other chronic illnesses
- HIV /chronic illness testing and confidentiality
- Employee benefits including training and promotions
- Performance measurement and grievance procedures
- First aid precautions
- Prevention
- Awareness and education programs and wellness management.
- The Ministry's stand and support on wellness issues pertaining the transport industry and the contractors with ongoing contracts

In doing so, the Ministry will take cognizance of the duties and regulations imposed by law.

“Our Human Resource is the most valuable resource”

This statement is frequently made when employers have resolved to give recognition to each and every member of their respective workforce for the selfless contribution they have made towards realizing the vision of their organization.

It is in regard of the above statement that the Ministry of Public Works and Transport recognizes the full impact of HIV and AIDS, Tuberculosis and other medical conditions in the workplace. The ministry has taken this major step in producing a tailor-made wellness policy that seeks to protect and support the health and productivity of the ministry's workforce.

Ntuthuko

Several intervention have been made by government since His Majesty King Mswati 111 declared HIV and AIDS as a national disaster in 1999. Despite these efforts, the HIV/AIDS prevalence rate remains unacceptably high in the Kingdom with the 2007 Demographic and Health Survey (DHS) placing the rate at about 26% percent of the adult population (15-49years).

The government being the largest employer, having the majority of the labour force falling under this age bracket took the initiative of forming the Public Sector HIV and AIDS Coordinating Committee (PSHACC). PSHACC is there to ensure that all Government Ministries/Departments comply with the Public Sector's commitment in all National HIV/AIDS, TB response and wellness issues.

It is to this effect that the ministry has participated in initiatives aimed at creating robust programmes to promote health at the workplace through increased access to preventive, treatment, care and support services to ensure a healthy and productive workforce that effectively delivers public services. Workers' social educational, psycho-social, emotional and other needs are being addressed in a holistic manner through comprehensive employee wellness programmes that include the services of a fully functional wellness corner.

I therefore implore each and everyone in this ministry to exploit the opportunities that have been presented by this policy to empower themselves in order to enjoy the full benefits; also have a positive impact on their families and communities they live in. I also urge the management to fully commit and support the implementation of this policy.

2.0 VISION

To be a Ministry with a healthy and productive workforce free of HIV/AIDS, TB and all other medical conditions..

3.0 MISSION

The Ministry of Public works endeavors to improve the life, health and welfare of employees through organizing educational campaigns, and establishing programmes for providing employees with treatment, care and support for improved productivity.

4.0 GUIDING PRINCIPLES

The following principles shall serve as a guide to ministry's HIV/AIDS policy:

- Confidentiality: All information about the health status of employees shall remain confidential unless voluntarily and knowingly disclosed by the employee for his/her own benefit or it is required by the court of law
- Accountability-All the activities carried out by the workplace committees are on behalf of the entire workforce which should be consulted on any decision regarding their programmes and other decisions on such activities
- Integrity: Members of the workplace wellness committees and everyone working on such matters should uphold the highest level of integrity in all his/her dealings on such matters at all times
- Commitment-The success of all efforts in the fight against HIV and AIDS in the workplace requires that all parties (the Ministry and employees) commit themselves towards fulfilling their individual obligations such as providing support, care etc as well as taking necessary precautions and all medications as prescribed by health workers.
- Transparency: All procedures and processes for accessing the workplace wellness services should be clearly understood by all employees and presented in a language best understood by all.
- Communication: There should be clear means of communication between all those working on wellness programmes and those accessing services from the same
- None discrimination: There will be no discrimination on selection and appointment including when providing assistance on the sick and healthy while observing Government Orders on issues of health.

5.0 GOALS, OBJECTIVES AND STRATEGIES OF THE POLICY

5.1 GOAL OF THE POLICY

To provide a comprehensive framework for responding to and managing the

impact of HIV and AIDS, TB and all other medical conditions in the workplace

POLICY STATEMENT

The Ministry shall endeavor to mobilize all necessary resources and support for the implementation of this workplace wellness policy in order to provide education to prevent employees from getting infected, to care and support those who are already infected and affected

5.2 POLICY OBJECTIVES

The policy seeks to:

- Create effective preventive structures and measures that will reduce the incidence rate and re-infections within and among the employees of the Ministry.
- Establish responsive and accessible care and support services and centers that will meet the needs of those that are infected and affected
- Create strategic partnerships with key stakeholders for the effective implementation of the workplace wellness programme
- Advocate for a budgetary provision and support towards the implementation of the policy.
- Develop strategies to effectively address and mitigate the impact of HIV and AIDS in the workplace

6.0 WELLNESS ISSUES

The following wellness issues were identified as the most relevant in combating the scourge.

1. 1.Stigma and discrimination
2. 2.Loss of self-confidence among employees in the workplace
3. 3.Fear to take HIV tests
4. 4.Lack of budgetary support for the programme
5. 5.Shortened and unproductive life for employees
6. 6.Poor access to health facilities and services

7. 7.Denial
8. 8.Absenteeism
9. 9.Low productivity
- 10.10.Early retirement due to medical grounds
- 11.11.Lack of protective clothing
- 12.12.Lack of proper accommodation for on-site employees
- 13.13.Inaccessible structures for the disabled for the on-site employees
- 14.14.Lack of ownership of the Wellness Programme
- 15.15.Socialization in the different cadres
- 16.16.Poverty: Salaries/resources are over stretched due to huge families
- 17.17.Lack of workplace support

6.1 PREVENTION

As the old adage says, ‘prevention is better than cure’, and recognizing the fact that the ministry has the largest number of employees, there is a strong need to empower the workforce with all matters related to HIV/AIDS (and other chronic illnesses) in all our departments. The Ministry shall endeavor to inform, educate and empower the workforce with all relevant information in the prevention of HIV/AIDS and other chronic diseases

6.1.1 STRATEGIES

- Our strategy is to: Provide educational information to promote behavioral change
- Make available information on HIV/AIDS and other medical conditions
- Provide a conducive working environment for staff through team building activities
- Promote and facilitate an after hours habitable environment through the establishment of residential committee structures
- Provide periodic screening, testing and counseling
- Provide physical fitness and exercise
- Nutrition and diet

7.1 .0 TREATMENT, CARE AND SUPPORT

In as far as caring of and supporting staff is concerned; the Ministry recognizes the need for all employees to access treatment and professional support on time even while at work. **The Ministry shall ensure that all employees do have access to treatment, care and support services (where feasible and practicable) to address their (employees) health conditions at all times**

7.2.1 STRATEGIES

- Enhance habitability of accommodation structures
- Provide protective clothing and the use thereofProvide first aid material
- Establish care and support structures (counselors, peer educators) and centers
- Establish home based care structures
- Establish a fully functional wellness corner
- Access to treatment such as ART and palliative care services
- Facilitate referral service locally and internationally.

7.3.0 IMPACT MITIGATION

Due to the effect of HIV/AIDS and other chronic illnesses related to it, there is a need to reduce the severity of such effects on the health, financial and economic/business/productivity and welfare of employees in the workplace. The Ministry endeavour provide /give the necessary support to the workforce in times of their need in order to enable them to manage and mitigate the impact resulting from HIV and AIDS infections and effects and other chronic illness

7.3.1 STRATEGIES

- Provide suitable work environment/redeployment during times of illness
- Educate and inform through psychological counseling
- Educate and inform through spiritual counseling
- Forbidding any form of discrimination in the workplace and encouraging employees to support each other during such times
- Develop an effective communication system for dealing with such cases.

8.0 MANAGEMENT GUIDE

8.1 BUDGETTING AND PLANNING

The management shall undertake the responsibility of budgeting for all wellness events and activities as planned by the wellness committee. The wellness focal person shall be responsible of bringing to board all partners that can work with the ministry and our stakeholders

- Resource Mobilization
- Partnerships

8.2 EDUCATIONAL AND AWARENESS CAMPAIGN

- By having social dialogues bi- monthly basis, held at work stations, residential places
- Have family days quarterly
- Partner with other social partners (PSI, AHF, NERCHA, FLAS, SWAGAA, Health ministry etc) in awareness campaigns.

8.3 RECRUITMENT AND TRAINING

- No mandatory HIV testing
- A right to confidentiality
- Development and training shall not be subject to employees status, except when prohibited by learning institution
- All officers shall be given the same consideration for training and development opportunities irrespective of their HIV/AIDS status
- Officers shall be encouraged to seek medical advice before undertaking long-term and stressful training programmes

- General medical check-up shall be the basis of making decision in terms of training if required by institution

8.4 TRANSFER/DEPLOYMENT/PLACEMENT

- No employee shall be transferred because of his/her HIV status, or any other chronic illness
- Employees who disclose their status shall not be transferred or deployed to high exposure areas
- Employees who have disclosed their status and are now physically weak or ill shall be considered for redeployment to areas or roles of less intensity
- The ministry shall create a safe working environment, to prevent against infection.
- The ministry shall look into the employee's marital setup before deployment and transfer

8.5 PROMOTIONS

- Every qualifying employee shall be eligible for promotion regardless of status

8.6 CAPACITY DEVELOPMENT

- The ministry shall create a safe working environment , including providing proper equipment and training to prevent against infection
- The ministry shall provide resources for capacity building for its structures

8.7 GRIEVANCE PROCEDURE

The ministry shall use the office of the under secretary to deal with grievances with concern to wellness issues. The ministry shall capacitate the wellness committee members to take care of issues that might negatively affect staff members

- The affected party may communicate a grievance to the ministerial focal person for redress who will then consult with the supervisor of the affected employee In the event the issue is irreconcilable the Wellness Committee Chairperson should be informed to consider taking action
- All grievances shall be handled fairly and in accordance with the statutory

laws

8.8 SICK LEAVE

- Sick leave for all employees shall be treated in accordance with General Orders
 - Doctors and health care workers shall not be required to give information to ministry about any workers' status
- The ministry shall not disclose the status of an employee to anyone without the employees express and written permission.
- The ministry shall collect and keep confidential data only for purposes of program development and improvement.

8.9 RETIREMENT ON MEDICAL GROUNDS

- All employees shall not be retired simply because of their HIV status
- Retirement of employees shall follow the prescriptions as laid down in the General Orders

9.0 INSTITUTIONAL ARRANGEMENTS

The Ministry's wellness programme and policy shall be administered and implemented through the following structure;

Wellness Chairperson

Wellness Coordinator

Committee Members

Regional Coordinators

Union members

HIV/AIDS infected members/support group members

Peer Educators/counselors

THE RESPONSIBILITY OF THE WELLNESS COMMITTEE

9.1 WELLNESS CHAIRPERSON

At all times the chairperson of the wellness committee should be the ministry's Under Secretary. The reason being that normally the US is in charge of the overall personnel, s/he is someone who is an authority thus can make decisions for the ministry.

9.2 WELLNESS COORDINATOR

The wellness coordinator should coordinate all the PSHACC and wellness programmes and be someone accessible and committed. S/he should be someone with integrity and confidentiality.

9.3 WELLNESS MEMBERS

The wellness members should be made up of all the present departments of each ministry such as accounts, planning, legal advisor, human resources records managers and roads department, building department, road transportation board.

The members shall have a term of three (3) years in the office.

9.4 REGIONAL COORDINATORS

The regional coordinators work hand in hand with the ministerial wellness committee together with the departmental wellness-committees. Information flows from the ministry (through ministerial committee), to regional coordinators and then to departmental committees and vice versa.

9.5 UNION MEMBER

In those departments where union members are present, they should form part of the committee. They are the linkage between the government programme and their respective unions.

9.6 HIV/AIDS, TB and OTHER CHRONIC ILLNESS INFECTED MEMBERS

For those members of staff who have declared their status, it would be best to

ensure they form part of the wellness committee as their contribution can go a long way in motivating, counseling and support of others. This will also ensure that all programmes and initiatives developed can directly meet (their) intended objectives (as the old adage says ‘nothing for us without us’).

9.7 PEER EDUCATOR

It should be an officer who is in the has same qualities (such as educational background, spiritual or social background) with a certain category of staff, someone accessible, one with good communication skills. This person should be part of the committee.

9.8 PEER COUNSELLOR(S)

Each ministry should have a Peer Counselor(s) who have undergone professional training on peer counseling and this person(s) should form part of the committee structure.

9.9 CARER OF CARERS

The shall be carer of carers (both male and female) who shall

Talk and relate to terminally ill patients.

Provide home based case (HBC)

Provide palliative care

10.0 STAKEHOLDERS

The Ministry shall endeavor to utilize all opportunities in which they interact with the stakeholders, the public society and other agencies to contribute to the mission and objectives of the wellness programme that all workers are healthy and productive.

11.0 MONITORING AND EVALUATION

The wellness policy will be monitored and evaluated through relevant instruments which will be put in place for this purpose. The results of the monitoring and evaluation will be instrumental in giving an insight on the future

direction in terms of planning, programming and budgeting. The workplace wellness program will be evaluated every three years to check on its impact based on the indication outlined in the PSHACC Policy.

12.0 REVIEW OF THE POLICY

The policy will be revised based on the results of the program evaluation and based on the needs as they may arise.

13.0 CONCLUSION

HIV/AIDS (and other chronic illnesses) is a fact of life and needs to be treated sensitively. Its management makes a financial and business sense (a healthy worker is a productive worker). The policy seeks to provide a safe environment for all employees of the ministry, while protecting the privacy of those infected. This proactive management practice will ultimately create a climate of understanding and build trust between the ministry and its workforce.