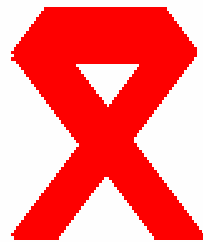


# **ROADS AUTHORITY**



## **HIV/AIDS POLICY**

Functional Building,  
Paul Kagame Road  
Lilongwe  
Malawi

## **RA' MISSION STATEMENT**

***Develop and maintain public road network infrastructure investment in a cost effective manner with a view to providing accessible, reliable, efficient, safe, sustainable and most economic transport system***

## **RA's HIV/AIDS VISION**

***To have a healthy working environment where HIV/AIDS is properly mitigated to enhance productivity of the workers in the organization through prevention, care and support programmes***

## Message from the Chairman of the RA Board

***"What is required now is for those in leadership positions to build the political will which is a necessity in the fight against the disease. Leaders must be prepared to fight the battle from the front and not the rear."*** Janet Kagame – wife of the President of Rwanda, speaking during a symposium on the role of leadership in scaling-up treatment at the International AIDS Conference in Bangkok.

This policy document is an important step forward since it comes at a time when the whole nation, right from the office of the President, is waking up to the call to face the epidemic realistically. The impact of the epidemic in the country and in the transport sector specifically, cannot be understated. The success of mainstreaming HIV and AIDS into the core functions of our organisation **cannot** bear fruit if the key decision makers are not part and parcel of the policy formulation, implementation as well as monitoring and evaluation of the programs.

Previous HIV and AIDS efforts in the sector and elsewhere have generally focused on creation of awareness. The critical aspects of treatment, care and support, capacity building, and research, among others, have not been given the attention they deserve. This document therefore dwells much on such issues.

Research has revealed that the transport sector has been heavily hit by the epidemic and RA is one of the high risk organisations because of the high mobility of the workforce as they supervise road projects. As such, there is need to arrest further spread of the epidemic as well as to take care of both the infected and the affected members of staff in the organisation.

You will agree with me that socially, the epidemic has not been selective. Of course, as human beings, time and time again our moral judgment fails us. Thus the question is on what are we doing **now and how it will impact on our organizations, colleagues, families and friends**. The nation's cream of engineers, administrators, economists, mechanics, drivers, you name it; have succumbed to the disease. Beloved and esteemed colleagues have passed away. Families are struggling to cope with the effects of this epidemic. The pandemic mocks our efforts to train our professional staff in specialized fields in terms of time and money.

The delivery of services has been affected so much yet the present economic status of the nation, in terms of its infrastructure and transport development, demands a lot of moral and professional discipline. Furthermore, globalization demands on us to maintain standards, which are achievable through the same qualified staff we are losing. There is, therefore, need for concerted effort to work

out strategies for mitigation of the problem and prolonging the life of our staff by mainstreaming HIV and AIDS issues in our core business.

The objectives of mainstreaming HIV and AIDS are to:

- (a) Provide employees and employers in the workplace with sufficient and updated information to enable them protect themselves from HIV and AIDS and cope with the presence of the disease;
- (b) Promote appropriate and effective ways of managing HIV and AIDS and related illnesses.
- (c) Develop strategies for assessing and reducing the impact of the epidemic in the workplace;
- (d) Build a supportive environment by reducing stigma and discrimination against HIV infected or AIDS affected individuals.

Our efforts should concentrate on the development of strategies and action plans for achieving the objectives of mainstreaming HIV and AIDS in our organisation with a deliberate bias towards sustaining life and enhance knowledge.

**Enock R Limbe**  
**Board Chairman**

## **CEOs Message**

HIV/AIDS is recognized as one of the cross-cutting issues that needs to be dealt with in an effort to reduce poverty in Malawi, and transport is one of the sectors said to have been badly affected by AIDS in this country. By virtue of offering connectivity within and across borders, the transport sector is also known to have contributed a lot to the spread of HIV across communities. Therefore, any effort towards redressing the HIV/AIDS situation will not only benefit the sector, but the entire population.

Although HIV/AIDS has made a complex and far-reaching impact in all sectors of the economy; sectors with highly mobile employees have been affected badly. RA is therefore, one of the most vulnerable to the HIV/AIDS epidemic due, largely, to the highly mobile nature of its core activities. Regulation and supervision of Road condition, as well as the very essence of construction of roads and bridges necessitate a lot of travel and long periods of absence from home and spouses. Human nature and all the intricacies that go with it, I am told, encourages the likelihood of risky sexual behaviors by employees because their comparative wealth, in the field, which presents a possibility to obtain services from commercial sex workers and members of the communities around the work sites.

The magnitude of the devastating negative impact of the pandemic can, therefore, not be over-emphasized as the epidemic has now reached crisis proportions in that it is affecting almost every aspect of human life. It is not surprising, therefore, that we are talking about introducing strategic interventions into the organisation to mitigate the spread of the epidemic.

Indeed, we have talked about HIV/AIDS for so long now and we can safely say that sensitization has been successfully done by all the stakeholders, as well as, other concerned partners and awareness is consequently high, close to 100%. The crux of the matter is now to take our concerted efforts another level by attempting to institute remedial strategies.

These efforts are aimed at:

- i) Reducing the prevalence rate of infections among employees;
- ii) Assist employees and their families assess and accept their infection risk
- iii) Re-enforce desired sexual behaviors that focus on HIV/AIDS prevention;
- iv) Create an open and stigma free working environment;
- v) Steadily improve upon the level of capacity of the identified focal points

In the face of so many uncertainties, conflicting evidence and rampant poverty, we have only managed to do so much. There have been accomplishments and short comings, opportunities and threats. In the process, we have learnt that this is a fight against the forces that oppose socio-economic development in the country. That explains why we would like to shift our focus to people-oriented approaches to sustain the professional skills we have in our organisation.

## **Possible Challenges**

The Organisation is likely to be limited by lack of capacity, in terms of subject mastery, to effectively guide and lead fellow employees. The good news, however, is that other organisations have successfully set out on the path to more people-oriented HIV/AIDS strategic interventions. Secondly, the focal points have other core business responsibilities that would compete with the tasks that we would want to entrust upon them, for time and other resources. Again, there is hope in knowing that we can learn from other success stories. Thirdly, the current secrecy, surrounding the issues relating to HIV/AIDS, will undoubtedly make the task of establishing a database extremely difficult or riddled with inaccurate information. That, it is envisioned, might hamper efficient planning, budgeting and monitoring of future and on-going activities respectively. Finally, the availability and flow of funds can be erratic and inadequate and in the process, reducing the best laid plans to a series of sporadic and uncoordinated pieces.

Finally, I would like to urge and encourage everyone within the Roads Authority to play a role that can make a difference for our common future

**Paul J Kulemeka**  
**Chief Executive Officer**

## **1.0 PREAMBLE**

The HIV/AIDS pandemic is a big threat to the world in general and to Malawi in particular. Malawi, like its neighbors in Sub-Saharan Africa, has been severely affected by HIV/AIDS. Transport is one of the vulnerable sectors in Malawi has been severely hit.

Roads Authority therefore acknowledges and recognizes that:

- (a) HIV and AIDS pandemic poses one of the greatest challenges to the public service delivery and economic sustainability in Malawi.
- (b) At present there is no known vaccine, cure or treatment for HIV infection and neither are these expected in the foreseeable future.
- (c) The spread of HIV infection can be reduced or eliminated by changes in behavior. Hence awareness on how the disease is spread and consequences in the workplace is required.
- (d) There is a direct link between HIV infection and sexually transmitted infections (STI). Hence early treatment of STIs is a must for an effective response to the epidemic and VCT should be encouraged.
- (e) HIV/AIDS related death, absenteeism, loss of productivity and the cost of replacing lost AIDS, which threaten the survival of the public service and other sectors of the economy of Malawi.
- (f) An HIV infected public servant can live a normal productive life and contribute effectively to the production of the public service in an environment, which offers care, and support programmes.
- (g) In line with international best practice, there is need that HIV/AIDS programmes be extended to family members of staff as well as where feasible the communities interacting with the staff.
- (h) Average working life of employees has been reduced from 25 years to 10 years due to the impact of AIDS which has also reduced life expectancy in Malawi in general.

Roads Authority can play a very important role to mitigate the spread of the pandemic and caring for the sick. To achieve this, RA requires the following:

- i) Leadership Commitment

- ii) Formulation of core senior management response (Management Responsibility)
- iii) Planning an Internal Impact assessment.
- iv) Planning an external impact assessment for RA
- v) Listing responses (analyzing the response)

The definition of Response of the Authority to the Prevention and control of the further pandemic would include:

- i) Reducing the risk of HIV/AIDS infection through increasing awareness, decreasing the number of sexual partners and increasing use of prevention materials like condoms.
- ii) Increasing the reach of the prevention efforts to highly mobile employees by providing a platform for communications.
- iii) Monitoring and assessing the impacts on the transportation sector plan for the future.
- iv) Seeking support from other key stakeholders focusing on education, condom distribution, diagnosis and the treatment of opportunistic infections associated with HIV.
- v) Support staff living with HIV/AIDS

On the basis of the above, RA has initiated and designed the following HIV/AIDS policy to be implemented at all its work places.

## **2.0 OBJECTIVES**

2.1 The HIV/AIDS policy is important because it is central to developing and implementing an effective work place programme.

2.2 This policy seeks to:

- a) Provide a framework of action when dealing with HIV/AIDS
- b) Prepare the Authority to face the presence of HIV infection and AIDS
- c) Define the Authority's position and practices in relation to employees with HIV/AIDS and how the Authority seeks to prevent the spread of HIV;
- d) Demonstrate the Authority's concern and commitment to taking active steps to manage the HIV/AIDS epidemic
- e) Create awareness among employees on the relationship between STIs including their infectious nature and the spread of HIV/AIDS.
- f) Promote effective ways of managing HIV/AIDS in the workplace and to create a balance between the rights and responsibilities of all parties.
- g) Enhance the conditions of those infected with the disease by creating a supportive environment fore them to continue



- working productively under normal conditions and in their employment for as long as they are medically fit to do so.
- h) Eliminate all forms of discrimination at the workplace based on HIV status and to further promote equality between those who are infected and those who are not infected.
  - i) Strive for effective collaboration in the fight against HIV/AIDS between communities from which the Authority draws its employees including surrounding communities.

### **3.0 LEGAL FRAMEWORK**

The Policy operates within the legal framework created by the Malawi Government through National Aids Commission, which undertakes to ensure and support that, all public and private sector workplaces DEVELOP AND IMPLEMENT an HIV/AIDS POLICY and HIV prevention, treatment, care and support programme (Chapter 7 of Government of Malawi National Policy Document October 2003).

### **4.0 RA'S POLICY ON HIV/AIDS**

The Roads Authority acknowledges the fact that HIV/AIDS pandemic is a reality in the workplace and may have detrimental effects on the goals and objectives of the Authority.

#### **4.1 Basic Principles of RA's HIV/AIDS Policy**

Given the nature and development of the disease and its effect on Road Sector activities, RA focuses primarily on prevention and on health support for HIV and AIDS patients. RA firmly opposes discrimination, in general, including discrimination of employees with HIV, and will make every effort to ensure that employees are not stigmatized. Their HIV status will not affect job security, terms of employment, or any other element of social policy. They will be treated in the same way as employees suffering from any other chronic disease with regard to absenteeism, assessment, and transfer to a less demanding position or working environment. HIV status will not be a criterion in redundancy selection.

RA will not oblige anyone to undergo an HIV test or treatment, whether it concerns employees, potential employees and their families.

Personal medical information, including a request for and the result of voluntary HIV tests, will be treated in the strictest confidence.

RA will co-operate where possible with relevant institutions and will do its utmost to allow local communities to benefit from the

spin-off of preventive activities that RA organizes for its employees and contractors.

To implement this policy, RA will offer two health programmes as follows:

#### 4.2 **Prevention programme**

- i) A prevention programme will aim at behavioral changes and promotion of safe sex.
- ii) An integrated prevention programme will include at least:
  - a) information and education to promote abstinence and faithfulness;
  - b) measures to increase the availability of condoms;
  - c) general protection and preventive measures;
  - d) management of sexually transmitted diseases (STDs);
  - e) counseling;
  - f) opportunities for voluntary HIV tests;
  - g) measures for the prevention of vertical transmission from mother to child.

Additional programmes will be developed for groups with an increased risk of infection (e.g., promotion girls, employees who live apart from their families). Evaluation of the risks could lead to radical changes in working conditions, training, coaching, and management control.

#### 4.3 **Health Support Programme for HIV and AIDS Patients**

Employees who test positive for HIV can be productive for a long time if they receive the right help and guidance. RA will establish an effective health support programme for employees with HIV and their immediate family. This will consist of:

- i) Counseling and care for AIDS patients.
- ii) Treatment of opportunistic infections;

#### **Anti-Retroviral Therapy**

RA will also provide anti-retroviral therapy following the basic principles outlined below and ***by way of exception therapy already started will, subject to conditions remaining the same, also be continued after redundancy due to re-organizations.***

## **Basic Principles**

The RA Management will include, under conditions set out below, anti-retroviral therapy in the existing medical curative programme (MASM) unless one is eligible for a comparable external programme. RA will organize access to anti-retroviral therapy in so far and as long as such therapy is not otherwise available, or, in the company's view, this therapy cannot be afforded and/or there is no access to the proper medical infrastructure. RA will offer anti-retroviral therapy within the context of existing local medical policy, including the conditions of entry and exclusion rules adopted as part of this policy.

The term *anti-retroviral therapy* should in this context also be understood to mean the necessary tests, the actual medication, and, where necessary, additional medical care.

RA will solely offer anti-retroviral therapy if a controlled supply of medication is reasonably guaranteed over an extended period without interruption. Therapy will not be offered if RA cannot guarantee a high level of quality.

Therapy will solely be offered in accordance with protocols laid down by MASM. RA reserves the right to reconsider both the medical organization and the procedures adopted to ensure their compatibility with the HIV/AIDS policy. The company will not accept responsibility in cases of voluntary termination of the therapy, failure to observe the conditions associated with provision of the medication, or possible failure and side effects of the therapy.

## **5.0 COMMUNICATION**

For RA and for the success of any HIV/AIDS programmes, it is important that the participants and general public are informed correctly. Information should cover the nature of the measures taken and the reasons behind them. The RA Management will be responsible for full and proper communication in this regard, which should be based on the following principles:

- i) RA will not pro-actively publicise its policy, and the latter will be implemented in a “low profile” way. It is not the intention to use this policy for “competitive advantage.”
- ii) If collaboration with other companies does not prove possible, RA will ensure timely communication of its chosen policy to the most relevant parties in good time.

- iii) Collaboration will be sought with international bodies such as the National Aids Commission, Ministry of Health and Population, Ministry of Labour World Health Organisation, USAID and the World Bank.
- iv) Criticism about the policy or its components will be countered by engaging in an open dialogue.
- v) RA management will, particularly in the initial phase, have to monitor public opinion actively.
- vi) RA management will do its utmost to support local initiatives that are aimed at supplying medication, including initiatives not aimed at its target group.

## **6.0 COSTS**

The costs of the HIV/AIDS programmes will be borne by the Roads Authority. For example excess bills arising from ARV therapy or HIV related diseases after MASM, the Authority will, through the HIV/AIDS programmes settle the bills without involving the individual members concerned.

## **7.0 CONDITIONS OF SERVICE**

### **7.1 Recruitment and Selection/Training and Development**

HIV status must not constitute a reason to preclude any person from employment as mentioned above and disclosure of HIV status must not under any circumstances, be used to discriminate against any person on any opportunity. HIV status must not be a basis for refusing to conclude, continue or renew an employment contract nor for refusing to train and develop an employee.

### **7.2 Voluntary Counseling and Testing (VCT)**

No employee must be required to undergo HIV testing, unless legislation changes determine such testing to be justifiable. The Authority will however promote access to VCT through referrals. Voluntary testing must be at the initiative of the employee and in line with the confidentiality clause in the policy framework. HIV testing must be carried out with informed consent, pre-test and post-test counseling at all times.

### **7.3 Sick Leave**

Employees with HIV/AIDS must be governed without discrimination by existing sick leave procedures as contained in the National Aids Commission policy document and the RA conditions of service.

#### **7.4 Alternative Work**

If the Authority is of the view that an employee with HIV/AIDS is not performing in accordance with the job that the employee has been employed to do as a result of poor health, the Authority must endeavor, as far as possible, to find less strenuous work, which the employee would be able to perform.

#### **7.5 Developmental Opportunities**

HIV status must not under any circumstances be used as criteria for refusing promotion, training or development of staff members.

#### **7.6 Termination of Employment**

No employee shall be dismissed from work merely on the basis of HIV status it must not influence any retrenchment procedures.

### **8.0 WORK PLACE INTERVENTION**

The Authority acknowledges that its ability to implement the programmed intervention is dependant upon a principle of consultation, inclusion and participation of all members of staff and stakeholders.

It further acknowledges that the best way of reducing and managing the impact of HIV/AIDS is through the implementation, monitoring and evaluation of a sustainable policy and programme.

### **9.0 IMPLEMENTATION AND COORDINATION**

The RA Focal Point Committee is responsible and accountable for all HIV/AIDS programmes in the Authority.

Their responsibilities will be to:

- i) Ensure that all employees are informed of the policy provisions;
- ii) Advise management regarding programme implementation and Progress;
- iii) Provide information on support and counseling to infected and affected employees;
- iv) Create a supportive and non-discriminatory working Environment;
- v) Ensure the availability and accessibility of personal protective equipment to employees;
- vi) Implement, monitor and evaluate the Authority's HIV/AIDS Programmes;

- vii) Liaise with other organizations engaged in similar efforts including the National Aids Commission;
- viii) To implement awareness raising programmes on a continuous basis based on information relating to the pandemic, its transmission and prevention.

### **9.1 Responsibility**

The Authority through the RA Focal Point Committee is held responsible and accountable for complying with this policy, HIV/AIDS educational and training programmes will take place during working hours and all employees are encouraged to attend these programmes.

### **9.2 Management**

- a) Being a responsibility assigned by the Minister, all managers are responsible for the implementation of this policy, ensuring compliance with and knowledge of its terms and for taking immediate and appropriate corrective action where warranted.
- b) It is expected of each manager to support this all-important issue as far as it is related to the employees entrusted to him/her and to open and maintain communication channels concerning HIV/AIDS and STIs.
- c) Management is encouraged to attend the programmes to give visible support to the Authority's programme.

## **10.0 PROGRAMME COMPONENTS**

In its initiatives, the Authority's HIV/AIDS Programme undertakes to provide:

- i) Information, education and communication activities, including media materials and peer education;
- ii) Condoms and encourage their proper use;
- iii) Referrals for the treatment of STIs and opportunistic infections for infected employee;
- iv) Counseling services as well as referrals for Voluntary Counseling and Testing (VCT);
- v) Support care and treatment for both infected and employees and their immediate families; and
- vi) An employee Assistance Programme (EAP)

## **11.0 GRIEVANCE PROCEDURES**

The Authority undertakes to create awareness and understanding amongst employees on the importance of maintaining confidentiality relating to the disclosure of one's HIV/AIDS status without the expressed consent of the individual concerned. For all related complaints, the Grievance Procedures as stipulated in the RA conditions of service will be in force.

## **12.0 INTERACTION**

### **12.1 Interaction with Community**

The Authority undertakes to utilize all opportunities to interact with civil society to contribute to the mission and objectives of the National HIV/AIDS and STIs Programme.

### **12.2 Interaction with Government**

The Authority must follow the National Aids Commission strategy and guidelines to ensure a uniform and concrete response by Government to the pandemic.

### **12.3 Interaction with Stakeholders**

The Authority must establish and maintain partnerships with stakeholders in order to coordinate and combine efforts in addressing all issues around HIV/AIDS with the transport fraternity.

### **12.4 Interaction with Consultants and Contractors**

The Authority must maintain strong relationships with contractors and consultants during project implementation to address the HIV/AIDS issues in the work places.

## **13.0 MONITORING AND REVIEW**

The Authority must ensure adequate and regular monitoring to the effect of successful implementation of the programme.

The Authority's policy on HIV/AIDS will be reviewed on a regular basis to take into account the progression of the pandemic, development in medical care, its impacts, experience in managing the disease in the work place and changes in legislation.

## **GLOSSARY OF TERMS**

<b>Affected Employee</b>	An employee who is affected in any way by HIV/AIDS, e.g. if they have any family member who is HIV Positive
<b>AIDS</b>	Is the acronym for the “Acquired Immune-deficiency Syndrome’. It is the clinical definition given to the onset of certain life threatening infections in persons whose immune systems have ceased to function properly as a result of infection with HIV.
<b>HIV</b>	Is the acronym for the “Human immune deficiency virus’. The virus attacks and slowly destroys the body’s natural immune system with the result that various life threatening infections or diseases occur. This virus can be present in a person for several years before the person becomes sick. HIV is transmitted from one person to another by sexual contact or when infected blood is passed directly into the body.
<b>HIV positive</b>	Means having tested positive for HIV infection.
<b>HIV testing</b>	Refers to the subjection of a person to a medical test to determine a person’s HIV Status. This may include medical examination, written or verbal enquiries about previous HIV tests, questions related to the assessment of ‘risk behavior’ (such as sexual practices or a person’s sexual orientation).
<b>Infected Employee</b>	An employee who has tested positive for HIV or has been diagnosed as having AIDS.
<b>Informed Consent</b>	A process of obtaining consents from a patient which ensures that the person fully understands the nature and implications of the test before his/her agreement to it.
<b>Pre and Post Test</b>	A process of counseling which facilitates an understanding of the purpose of HIV test. It examines counseling what advantages and disadvantages it holds for the Person and the influence the result, positive or negative will have on them. Reasonable Means any modification or adjustment to a job or to the working environment that will enable and infected employee to have access to or participate in or advance in employment.
<b>Accommodation Measure</b>	
<b>STIs</b>	Is the acronym for Sexually Transmitted Infections. All STIs are spread through sexual contact.
<b>VCT</b>	Voluntary Counseling and Testing
<b>TF</b>	Task Force.