

The route of the problem: Part 2

This is a war we have to fight it together,' says Paul Matthew, managing director of the Learning Clinic about the HIV/AIDS epidemic

In 1999 Mac Maharaj, the former Minister of Transport, brought all the role-players together and Trucking against AIDS, a prevention and education programme, was born. It is housed in the bargaining council of the industry and is supported by a steering committee from the industry and unions. The National Bargaining Council (NBC) and the Department of Health fund the programme. It has also received support from companies such as Shell, Engen and Daimler Chrysler.

The NBC set up an HIV/AIDS committee consisting of employers and unions to oversee the programme. Abner Ramakgolo, SATAWU's road freight national co-ordinator, praises this committee: 'We are not arguing on petty issues. The usual "us and them" problems of the NBC are absent.'

The Learning Clinic, a consultancy focusing on the road freight industry, was appointed to run the programme for the industry. Trucking against AIDS has different education programmes depending on the target. Firstly, peer education trains workers to educate fellow

In the previous edition of the Bulletin, Etienne Vlok examined HIV/AIDS in the trucking industry and found that stakeholders have to work together to confront the epidemic successfully. In this edition, he examines a programme housed in the bargaining council - Trucking against AIDS.

workers. Secondly, awareness training focuses on HIV/AIDS, STDs and condom use. The third part is roadside training in mobile clinics. The NBC seconded three trainers to the Learning Clinic to do awareness training and peer education.

At the start of Trucking against AIDS in 1999 the trainers studied the activities of drivers and sex workers, especially at the hot spots - areas where sex workers are active such as truck stops and tollgates. According to Paul Matthew, the research showed that the trainers had to focus on STD training.

A joint project between SA Labour Bulletin and the American Center for International Labor Solidarity (ACILS) and sponsored by ACILS



SATAWU congresses have addressed HIV/AIDS.

According to the Learning Clinic, more than 1 000 workers have done the awareness training and 97 truckers and ten sex workers the peer education. The mobile clinic in Harrismith has seen 2 225 workers go through it and the one in Beaufort West 4 814. 'This is just what four trainers have done,' Paul Matthew emphasises proudly.

The programme also involves the local churches and youth groups. Matthew explains: 'In the communities we focus on HIV/AIDS education hoping that the youth do not get into sex work and, if they do, that they are educated. We will not be able to stop them. We have found 11 and 12 year old male and female sex workers.'

Trevor Matthew, training co-ordinator of the Learning Clinic, adds: 'Sex workers are from the communities the drivers go through. We cannot educate the drivers but leave the root of the problem.'

The unions' role

Some of the success of the project can be attributed to the unions. 'We have had

great support from them,' declares Paul Matthew. 'All seven industry unions have supported us through the bargaining council.' Representatives from Trucking against AIDS have also addressed SATAWU congresses. This is an important way for the project to get into companies, as many congress participants who see the presentation get their employers to invite the project to their companies.

Yet the unions could take it further, admits Paul Matthew. 'Unions should put pressure on the employers to set up compulsory programmes. We also need to have their representatives more visible at the clinics.' Another way the unions can support the programme is by using their contacts with donors to ensure more support for Trucking against AIDS.

Paul Matthew also urges the employers to take the issue more seriously and develop policies. He admits the programme's management workshops have not worked. 'We need more buy-in from the companies. Out of 3 500

companies in the industry, we only work in 16. Though some are involved through the Road Freight Association they could do more.'

Educating the drivers

Educating truck drivers is not easy because they are on the road for long periods of time. So the project had to come up with a specific strategy. Ramakgolo, who is also SATAWU's interim health and safety co-ordinator explains: 'Drivers are not allowed to drive after 11pm as stipulated by the law. So the trainers do the education at the truck stops in the evenings.'

Sethula Ramabu, one of the trainers, shows me a flip chart with cartoons and photos that is used to educate the drivers and sex workers. 'The awareness programme is thought provoking, not like a lecture. We start with STDs, showing photos of the different ones and identifying them. We talk about how dangerous they are, how they can be treated, how they affect unborn babies, what medication to take and issues around traditional healers and medicines. We emphasise treatment for both partners and finishing the medicine. It is all done in the drivers' home languages. After this we discuss HIV. We start with the STDs because people who have them are really vulnerable to the virus. We say how the virus can be contracted and show the stages from being HIV positive to having full-blown AIDS. Then we explain AIDS in detail. We talk about daily contact and the stigma of disclosing. We emphasise how you can get tuberculosis and clear up the confusion that one can treat tuberculosis even if you are HIV positive. We talk about blood tests, counselling and the window period. We show how quickly the virus can spread in a community.'

Asked about the drivers' responses,

Ramabu says one would be surprised at how the drivers participate. 'When we started we dealt with myths. Now there is an improvement and good results. We take it for granted that people know but some don't know the difference between HIV and AIDS.'

Justice Mocketsi, another trainer, is very enthusiastic about the project. He explains the secret of its success: 'Our presentation is very interactive and people ask questions. We talk about prevention and the use of condoms. People tell us how they use a condom and we correct them if necessary. Since August 2000 we have distributed 5 000 female and 45 000 male condoms and material on HIV/AIDS. The programme receives this and any other materials from the local government.'

Unions have been criticised in the past because of their lack of education on the rights of those with HIV/AIDS. Many members do not understand how legislation protects them from discrimination on the basis of their HIV status. The Trucking against AIDS programme addresses this by including workers' rights in its training. When Ramabu and Mocketsi find cases of discrimination they refer it to the AIDS Law Project. They often use these case studies in future training. At its management workshops, Trucking against AIDS talks about implementing an HIV/AIDS policy. They discuss with managers what problems can occur when a company does not have a policy and has to deal with HIV/AIDS issues. The trainers also educate management on how to implement policies and have a workplace that is friendly to people living with AIDS.

Clinics

Apart from the training programmes, Trucking against AIDS also uses mobile clinics. This consists of two containers put

up in a hot spot. One container is a classroom where a trainer educates drivers and their partners and the other container is a clinic where a nurse offers primary health care, STD treatment and medication. According to Ramakgolo, the medicines at the clinics are free and supplied by the industry and the Department of Health.

Currently there are temporary clinics in Harrismith and Beaufort West. They cater for drivers in two important ways: firstly, instead of closing at 3pm like regional clinics when drivers are still on the road, they are open from 4pm to midnight. Secondly, the mobile clinic is physically accessible to drivers and their rigs, which is not the case at the regional clinics.

'The clinics do not test for HIV,' Paul Matthew points out, 'because we cannot diagnose someone and then expect them to get in their trucks and drive.'

The success of the clinics can be seen in the response from the Beaufort West community when the mobile clinic there closed for December. Trevor Matthew explains: 'According to a Beaufort West municipal employee the community and truckers wanted to know what happened to the clinic. So we had to put a notice to say that we will be reopening. It shows the community takes notice of what we are doing.'

Due to the success of the clinics, the programme hopes to have ten clinics on all the major routes by 2002. The next two will be at Messina and Komatiport in the Maputo corridor. From now on all the clinics will be permanent.

Successful?

Both Matthew and Ramakgolo see the programme as a success. For Matthew this programme, its training and provision of treatment and medication is an example of going 'beyond awareness' in the fight

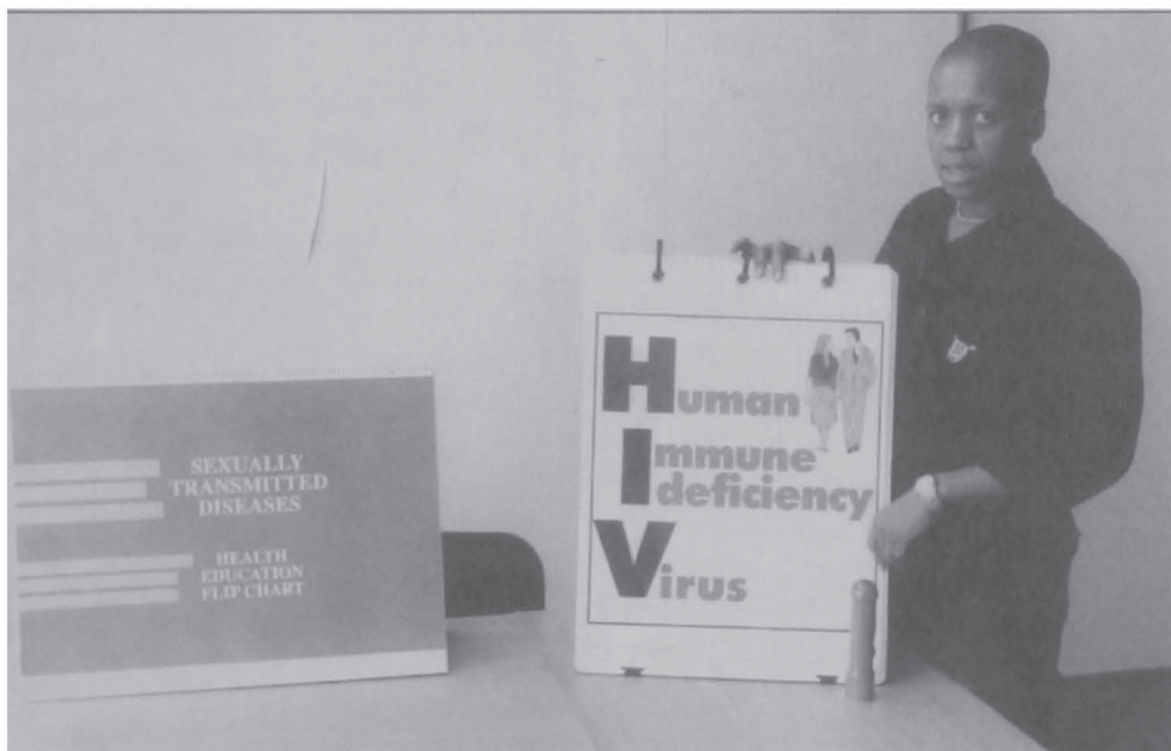
against the epidemic. For Ramakgolo a sign of the success of the programme has been that drivers did not talk about HIV/AIDS in 1996. 'Now, five years later, they want to talk about it.'

Someone who is not so enthusiastic about all the aspects of the programme is Patrick O'Leary, managing editor of *Fleetwatch*. Having been part of the birth of Trucking against AIDS, he explains his initial vision for it: 'The programme was going to stand up at the AIDS conference in 2000 with a success story. But after two years we have found that Trucking against AIDS is only involved with a few companies. Maybe I was too idealistic.' He acknowledges that the programme is doing a good job with the drivers but feels a gap exists because it has not reached management.

When O'Leary confronted those who run the programme, they said that they had shifted its focus to the clinics and truckers. But for O'Leary this is not acceptable: 'You cannot shift from management. You have to involve the leadership.' O'Leary reacted in two ways: firstly, his magazine, *Fleetwatch*, advertised Trucking against AIDS seminars for management without cost. Secondly, he started presenting separate HIV/AIDS seminars for management. When companies then ask him to talk to their workers, he referred them to the trainers from Trucking against AIDS.

Sex work

Companies and unions can do awareness training, have education courses and provide treatment, but drivers will still be spending time away from home and sex workers will still be working at truck stops and tollgates. As long as the trucking industry exists, there will be a market for sex work at hot spots. So it is crucial that sex workers are educated also and that is



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what Trucking against AIDS is doing

Problem solved? No, the government has a role. According to Sharon White, managing director of AIDS Education and Training and one of the initiators behind Trucking against AIDS, the decriminalisation of sex work would help with the fight against HIV/AIDS 'because then we would deal with it in an open, blatant manner and assist the women to help themselves'.

Paul Matthew agrees 'It will help because you can monitor the situation properly and slow the epidemic down. In the Netherlands, sex workers are monitored and there are compulsory STD and HIV tests.'

Discrimination and abuse

Educating truck drivers on the need to protect themselves by wearing condoms might not be that successful. The *Mall & Guardian* reports that the Medical Research Council found sex workers at a truck stop used condoms infrequently

even though they were easily obtainable. Sex workers cited the loss of clients and non-payment for sex as some reasons for straight sex. Often when sex workers insist on clients using condoms it leads to physical abuse because the clients feel that condoms do not leave them satisfied. When clients agree to use a condom they insist on paying less for it. Ramakgolo confirms that 'in most cases the drivers want flesh to flesh. They think a condom is like sitting in the toilet and doing it alone'.

Does a client have a choice as to whether he would like to wear a condom or not? Maybe if he respected the sex worker, he would not insist on 'flesh on flesh' and he would not abuse her if she insisted on a condom.

One way to achieve this is by including gender relations in HIV/AIDS education. SATAWU is investigating the relationships between sex workers and drivers and educating drivers that it is wrong to insist on 'flesh on flesh'. One way to do it,



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according to Ramakgolo, is to explain to them what damage they can do to themselves.

Trucking against AIDS also addresses abuse and discrimination Ramabu explains: 'In the beginning the whole issue was complex due to myths and cultural beliefs. After training, we have debates to see whether it really is cultural beliefs causing the abuse and discrimination or whether it is just certain men's own interest.' The trainers also talk about rape and how it can increase the chances of infection with the virus because of breakages in the vaginal walls. They also discuss how this increases the chance of a rapist being infected with the virus if the woman is positive and the man negative.

Jane Barrett of SATAWU, hits the bull's eye: 'Tackling gender relations is critical to any successful campaign against HIV/AIDS. So long as women feel powerless in sexual relations with men, so long will they not be in a position to demand the use of condoms. Neither will they feel free and

able to say no to sexual advances from men. Women need to be in control of their bodies and to be able to choose when and how to have sex.'

If that woman is a sex worker and she chooses to have sex with a condom, she should not be subjected to 'flesh on flesh'. Trucking against AIDS and the employers and unions need to be congratulated for its inclusion of education on gender relations that will hopefully change the current situation.

Too late

Researching this article scared me. When do people and organisations respond to HIV/AIDS? Only when they realise it is going to affect them. It applies to a truck driver who has to be told how he can be infected with HIV if he rapes someone, before he wears a condom. It applies to an employer who has to see his or her profits drop, before he or she educates drivers, adopts a policy or makes resources available. By that time it might be too late. ★