



**National HIV/AIDS Transport Sector
Coordinating Committee**

TRANSPORT SECTOR STRATEGIC HIV/AIDS PLAN

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Strategic Document Key Persons

Kgomotso Kgang (NDOT)
Lydia Forssman (NDOT)
Dr Henning Morr (GTZ / EU/CBRTA)
Dudu Letseli (TETA)
Dr Ansa Jordaan (SACAA)
Althea Belford (NDOT)
Tracy Naik (CBRTA/GTZ/EU)
Abner Ramakgolo (NBC)

Finance / Sponsors

Marietjie Lotz (NDOT)
Ntheki Mkosana (NDOT)
Boshie Matlou (ILO)
Thulani Dlamini (SATAWU)
Dr Henning Morr (GTZ /EU CBRTA)
Malcom Larsen (FMG)
Colleen Larsen (FMG)

Communications / Media and Marketing

Blanche Esau (SAMSA)
Mike Mabasa (NDOT)
Tilly Naidoo (ACSA)
Tony Games (SARCC)
Margaret Mabonga (NDOT)
Colleen Larsen (FMG)
Selina Mofokeng (Intersite)
Vinothan Manikam (Intersite)
Felicity Human (Intersite)

Logistics

Tracy Naik (CBRTA/GTZ/EU)
Pontso Meshe (RAF)
Billy Motau (NDOT)
Boyce Nkosi (NDOT)
Maggie Mazibuko (NDOT)
Nontu Mthimkhulu (Intersite)

Chairperson

Mawethu Ntshongwana

Consultants: PMA Consulting.

Thabani Sibanda
Sam Mphuthi



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FOREWORD



The HIV-AIDS epidemic has impacted dramatically on all spheres of human life within the SADC region. Its continuing spread is a cross-border issue of critical significance for the transport industry. We recognise that there are many competing demands on government and private sector social responsibility resources – but we see this as a challenge to our collective creativity. The National Department of Transport has therefore fully committed itself to the development of a coordinated cross-sectoral HIV-AIDS strategy that will mobilise every available public and private resource to combat the further spread of the epidemic through the veins and arteries of our transport system.

One of the most important elements of this strategy is that it unites government policy with best practice in the transport-related agencies and with a range of independent initiatives developed over the past few years in the various sectors of the transport industry. This document reflects the creativity of all the caring employers and employees in the transport sector who have worked hard to address the HIV-Aids epidemic in a meaningful way.

There can be no pause or let-up in the battle against HIV-AIDS. So, whilst recognising the value of what has been achieved so far, government and the industry have also recognised the need to lift their joint efforts to a higher level. This level can only be reached by incorporating HIV-Aids programmes into every aspect of our daily lives. Every truck driver, taxi driver, bus operator, commuter, passenger, pilot, air steward and seafarer can either be part of the problem or become part of the solution. We are in close touch with each other and we are a potential army of millions of HIV-Aids activists. If we do things right and act together we can reach into the heart of every home in this country. Our transport network offers us a potent weapon in this battle. It moves millions of people every day, both within and across our borders. These movements can either continue to widen the spread of HIV-Aids or become a powerful channel for disseminating the information, knowledge and understanding upon which effective prevention depends.

We urgently need to consolidate a partnership that delivers telling results. We are therefore appealing to every individual, organisation and government department with a stake in the transport sector to participate actively in the implementation of the strategy. We need to be visible in our involvement in Aids education, workplace awareness, outreach programmes, educational projects and sensitisation campaigns. We need to get better organised, raise the tempo of our actions and demonstrate our passion and commitment. I believe that this document can play an important part in helping us all to achieve the goals we have set ourselves.



TRANSPORT SECTOR HIV/AIDS STRATEGIC AIDS PLAN



Abdulah M Omar
Minister Of Transport

CONTENTS

List of Acronyms	5
1. INTRODUCTION	6
2. SITUATION ANALYSIS	7
2.1 The Transport Industry in the SADC Region	9
2.2 HIV / AIDS in the Transport Sector in South Africa	9
2.3 Roadside Health and Information Units	11
3. STRATEGIC FRAMEWORK	11
3.1 Policy Positions	11
3.2 The overall goal of the Transport Sector HIV/AIDS	12
3.3 Main objectives	12
3.4 General Principles for the Transport Sector	13
3.5 Areas of Strategic Focus	13
3.5.1 Demographics	13
3.5.2 Gender Issues	13
3.5.3 The Socio-economic Environment	14
3.5.4 The Psychosocial Climate	14
3.5.5 The Socio-Cultural Environment	14
3.5.6 The Political Situation	14
3.5.7 The Institutional Development situation	14
3.5.8 Capacity Building	15
4. STRATEGY BASELINE	15
4.1 Policy Formulation and Development	15
4.2 Strategic Planning	15
4.3 Co-Ordination	15
4.4 Communication and Advocacy- Promotion of Best Practices	16
4.5 Monitoring & Evaluation Systems	16
5. PROGRAMME COMPONENTS AND PLANS	17
5.1 Programme Components and Accountability	17
5.2 Strategic Plans	18
5.3 Monitoring & evaluation Framework	19
5.4 Reporting Cycle	19
6. CONCLUDING REMARKS	21
References	22



**TRANSPORT SECTOR
HIV/AIDS STRATEGIC AIDS PLAN**





TRANSPORT SECTOR HIV/AIDS STRATEGIC AIDS PLAN



List of Acronyms

ACSA	Airports Company of South Africa
ATNS	Air Traffic Navigation Services of South Africa
CBRTA	Cross Border Road Transport Agency
EU	European Union
FESARTA	Federation of Regional of Regional Road Transport Agency
GTZ	German technical Department
ILO	International Labour Organisation
MEC	Ministerial executive committee
MTCT	Mother To Child Transmission
NACOSA	National AIDS Co-ordinating Committee
NDOT	National Department Of Transport
NBC	National Bargaining Council
NRA	National Road Agency
PWA	Person Living With Aids
RFA	Road Freight Association
SACAA	South African Civil Aviation Authority
SAMSA	South African Maritime Safety Authority
SADC	Southern African Development Community
SATAWU	South African Transport and Allied Workers Union
SARCC	South African Rail Commuter Corporation Ltd
SATCC	Southern Africa Transport Co-ordinating Council
STD	Sexually Transmitted Disease
TB	Tuberculosis
TETA	Transport, Education and Training Authority
UNAIDS	Joint United Nations Programme on HIV/AIDS
USAID	United States Agency for International Development



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VTC Voluntary HIV Testing and Counselling

1. INTRODUCTION

Purpose

The purpose of this document is to address HIV/AIDS in the Transport Sector through an integrated strategy.

This document constitutes the National Transport Sector Strategy developed by the National HIV/AIDS Transport Co-ordinating Committee. The intention of the strategic position stated here is to ensure that comprehensive support is provided in the implementation of targeted HIV/AIDS interventions at sector level in South Africa and neighbouring countries.

The challenges being addressed by the transport sector in respect of HIV/AIDS in South Africa and the Southern African Development Community (**SADC**) are well documented and are part of the inputs for this strategic document. The National HIV/AIDS Transport Co-ordinating Committee was established to drive a sector oriented strategy aimed at enhancing and consolidating effective interventions through partnerships in government, non-profit organisations and private enterprise.

Among the values guiding the development of the National Transport Sector HIV/Aids Strategy are the following:

- The need to ensure policy positions that are consistent with the challenges facing the transport sector
- The need to ensure optimal utilisation of resources through smart partnerships in the planning and implementation of HIV/AIDS interventions by transport sector partners
- The need to ensure well-informed decision-making through information sharing and knowledge management within the sector
- The need to promote effective interventions through sector-wide communication and advocacy initiatives

Various sources and processes informed the development of the strategic plan. Of particular importance was the consultative process undertaken by the National HIV/AIDS Transport Co-ordinating Committee, inputs from key provincial role players as well as the organising of the Road Show by the National Department of Transport. In this regard, stakeholder workshops were conducted, with materials being produced for incorporation into this strategic plan. Additional information was sourced from published literature as well as documented HIV/AIDS projects in the region.



TRANSPORT SECTOR HIV/AIDS STRATEGIC AIDS PLAN



In finalising this document, the National HIV/AIDS Transport Co-ordinating Committee has endeavoured to achieve a balance between incorporating all stakeholder inputs while ensuring that the document remains simple and practical in both structure and content. Based on the foregoing, the document has been divided into the following sections:

- Situation Analysis
- RSA Overview
- HIV/Aids in the Transport Sector
- Overall Goals of Strategic framework
- Programme areas
- Programme of action
- Conclusion

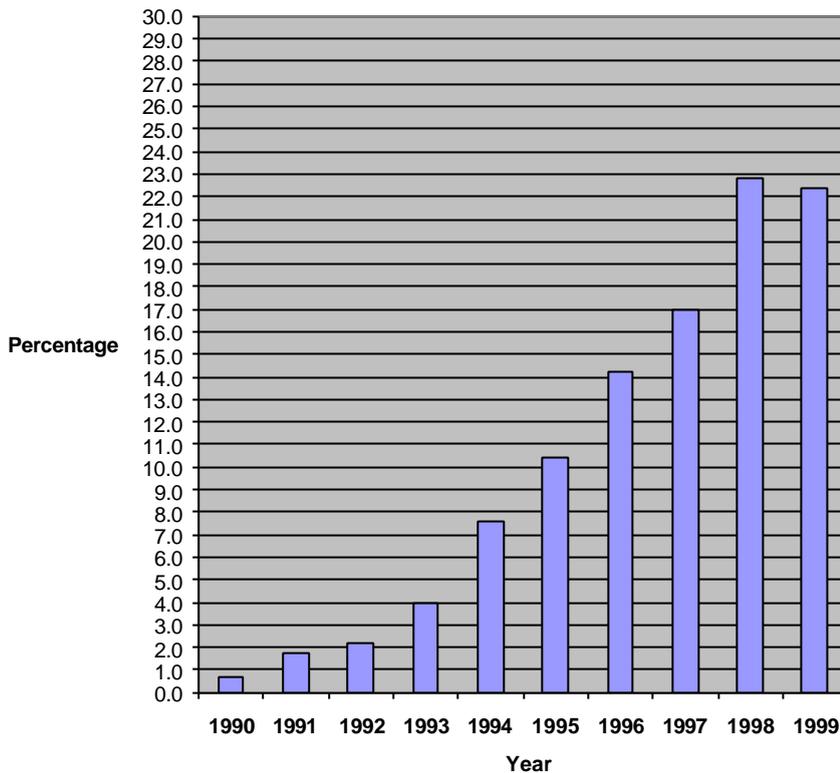
2. Situation Analysis

As in most parts of the SADC, South Africa recognises HIV/AIDS as one of the most serious challenges since independence and new political dispensation. In South Africa, prevalence rates suggest that close to 25% of the people may be living with HIV/AIDS. This information comes from The National HIV survey of women attending antenatal clinics at the public health services. These figures confirm the continued need for making HIV/AIDS a regional and national priority. The figure below provides tabulated estimates of HIV prevalence in the country.

Figure 1. The National HIV Survey Of Women Attending Antenatal Clinics Of The Public Health Services In South Africa, 1990 – 1999.



TRANSPORT SECTOR HIV/AIDS STRATEGIC AIDS PLAN



Adapted from HIV/AIDS & STD strategic Plan for South Africa 2000 – 2005

Available information suggests that women between the ages of 20 and 30 have the highest prevalence rates. The majority of the people hard hit by the epidemic are the young black and economically disadvantaged populations. As many as 4.2 million South Africans are estimated to be living with AIDS and 550,000 are believed to be infected every year. It is estimated that HIV will infect about 6 million South Africans and about 1 million children will be orphaned by 2005.

The epidemic is being amplified by high prevalence of STD's, multiple sexual partners and limited usage of condoms. The predisposing factors remain largely being, socio economic factors, migrant labourers, mobile sector (Transport Industry) illiteracy stigma and discrimination.

The government of South Africa has responded to the challenges brought about by the epidemic, beginning with the establishment of the National AIDS Coordinating Committee of South Africa (NACOSA). The committee was tasked with developing a national strategy on HIV/AIDS. Other initiatives that followed the establishment of this committee include South African National STD & AIDS and other Provincial STD and AIDS Directorate.

However, the response to the epidemic has been affected by a number of constraints namely limited human and financial resources, delay in the creation of district



TRANSPORT SECTOR HIV/AIDS STRATEGIC AIDS PLAN



structures, limited referral systems and networking to ensure sustained care, home based care and terminal care facilities, limited integration of STDs & HIV/AIDS with interventions for TB, lack of provincial policies, guidelines and management protocols, medical care, support and counselling and discrimination of people living with AIDS. However, currently the government has high levels of structure that address issues relevant to HIV/AIDS. These structures include: Parliamentary Portfolio Committees on Health, Departments of Health, Welfare, Education, Transport and Justice, Director Generals Forum, Inter-department Committee on Aids, Inter-Ministerial Committee on Aids, Inter-Provincial structures and MEC for Health and Provincial Departments. There is close liaison among these structures. These institutions have been able to draw the support of nongovernmental organisations and funding agencies (HIV/AIDS & STD Strategic Plan for South Africa 2000).

The participants to the Stakeholders Workshop on Prevention of HIV/AIDS in the Road Transport Sector in Southern Africa held on 31 August 2001 in Midrand indicated the following; acknowledgement of HIV/AIDS pandemic as a major threat to the social and economic development of South Africa, and committed themselves to strengthening HIV/AIDS prevention through condom promotion and distribution, peer education and contribute to national HIV/AIDS issues in the transport sector.

The Transport Industry In The SADC Region

A long existing history of population migration in the Sub-Saharan Africa has characterised pattern of social relationships and economic activities. Such movement of people across borders at given time has meant that there has been a huge demand for transport facilities. Also the countries in Sub-Saharan Africa have maintained significant trade in the region thus further promoting inter-country migration. Most of the countries are landlocked and this situation has ensured that road and rail transportation is an invaluable means of transporting both people and goods for trading. In addition air-travel in the region has become of significant convenience for business and holiday making. The World Bank (2000) notes that about 9.7 million people used air-travel and 830771 (ton –km million) goods were transported by rail in 1997. Everyday new relationships in social and business circles are created across borders of the region. As the world becomes increasingly globalised there are indications that populations will be more integrated than ever.

South Africa is part of this big picture. People in the SADC region have been coming to South Africa to work in the mines, the transport industry and various sectors of the economy for over a century. Some of these migrant workers settled in South Africa as they established families. Others returned to their countries of origin but not without establishing some form of social relationships with the local people. This



TRANSPORT SECTOR HIV/AIDS STRATEGIC AIDS PLAN



pattern of social relationships continues to exist, and it has become less complex due to availability of transport and the well-developed road, rail and air travel systems. Within South Africa there have been huge population movements in the past fifty years or so. Most of the movements have been male dominated, as the transport and mining industries have favoured employment of men. These men have been moving between their families and places of employment with much ease and efficiency. Also South Africa has added dimension to the transport industry with a coastline. Sailors from all over the world have used South African ports for many years. Travel has always been accommodative of new experiences, including diseases. This transport networking in the SADC region is a fertile ground for the spread of HIV/AIDS.

2.2 HIV / AIDS In The Transport Sector In South Africa

Studies have indicated that basic understanding of the biomedical facts is of limited value to truck drivers (Matthew 2000). The study by the Medical Research Council of South Africa reports that at one stop, 95% of the drivers involved in the survey were infected with HIV. Of the 34% who indicated that they had stopped for sex while on their routes, there was a high percentage of condom non-users (29%) (MRCSA 2000). Accounts of truck drivers not wanting to know the result of the voluntary testing were well documented (November 2000). Other studies have sited poor work conditions and long absence from their families as contributory factors in having sexual encounters outside their relationships. These findings lead to recommendations about policy reform, peer education, normative changes in the trucking community (Wilson, Sibanda, Nyathi, Lamson, and Sibanda 1991). Other behavioural surveillance research indicates the need to promote peer and other educational strategies, including condom use and health seeking behaviours for STDs. This needs to be supported by improved access to, and quality of, selected health facilities at the truck stops (US AID Impact Project 2000).

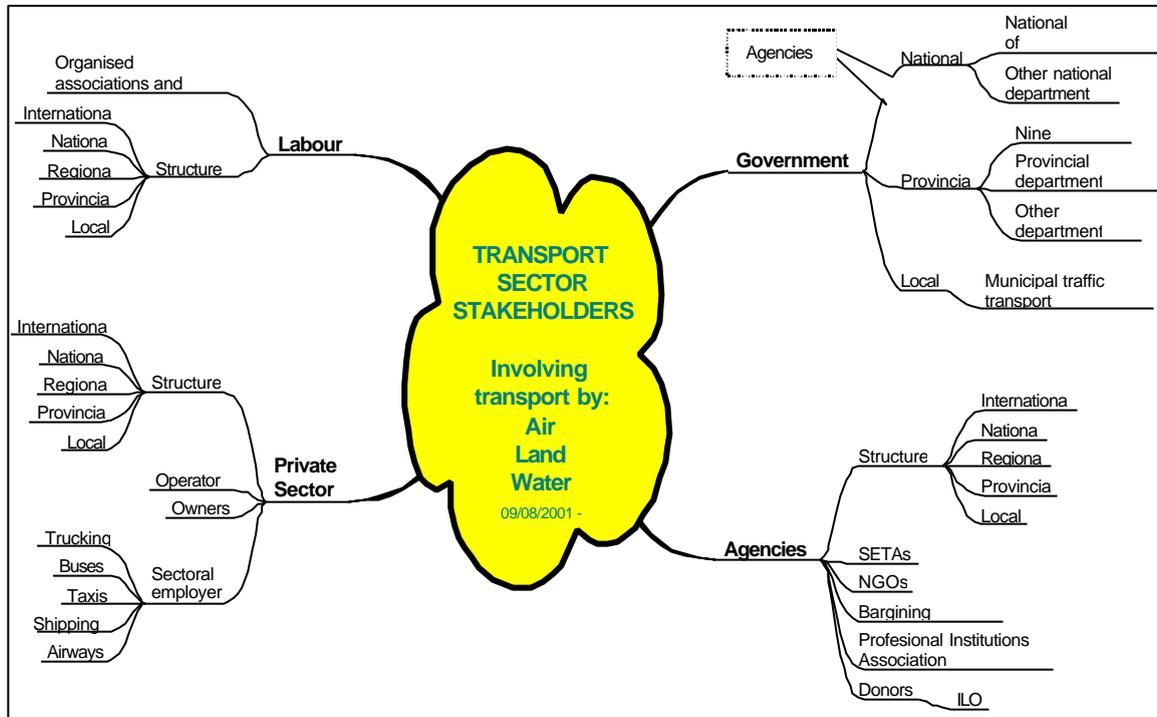
South African Civil Aviation Authority has identified the need for HIV/AIDS interventions. The Authority's medical services department hosted a workshop on HIV/AIDS in November 2000, which was attended by the aviation industry, medical services, the legal profession and the national and provincial departments of transport. A task group was formed to deal with legislation of testing for aviation personnel and to formulate an acceptable policy for the Aviation industry. The Authority promulgated a policy position that protects people living with HIV/Aids from discrimination, promote access to information and commits the industry to create a caring and supportive environment for employees living with HIV/Aids. The policy promotes confidentiality and recognises the rights and obligations of the industry's employees (South African Civil Aviation 2001).

While rail travel, public and private transport operate effectively within South Africa and the SADC region, very little information documentation is available. This situation applies to the maritime industry as well. However evidence suggests that these forms



of transportation contribute significantly to social relationships network and the pattern of the epidemic in the SADC region

Groupings of Transport Sector Stakeholders



Roadside Health And Information Units

The Roadside Health and Information Unit project is a product of the National Bargain Council for the Road Freight Industry. It is managed by the Learning Clinic (Pty) Ltd. Its main objective is to reduce transmission of HIV/AIDS by long distance truck drivers and commercial sex workers. The project has three levels of intervention namely the treatment of STDs for truck drivers, treatment of STDs for commercial sex workers and condom distribution for both truck drivers and commercial sex workers. STD treatments are supported by continued health education. A qualitative e research evaluation into the projects in Harrismith and Beaufort West suggests that there is a potentially good intervention even though interviewees highlight areas for improvement (McKay, Sarakinsky, Morr, Sekgobela, Mokotong, Mokotong and Sham 2001). These Roadside Health Information Units provide useful lessons for use in the broad intervention projects within the Transport Sector in South Africa.

3. STRATEGIC FRAMEWORK

3.1 Policy Positions



TRANSPORT SECTOR HIV/AIDS STRATEGIC AIDS PLAN



The SADC is committed to strengthening the response to HIV/AIDS epidemic in the member states. The SADC Health Ministers have shared visions and goals to reduce the impact of HIV through a multi-sector driven strategy.

The national government of South Africa endorses the policy position taken by SADC Member states and is a major participant in the deliberation of the SADC strategic framework. The National government supports initiatives that address the reduction of HIV transmission, support and care and research activities in all sector of the economy. The national government also recognises the role that the transport sector is playing in the economies of South Africa and the SADC region as a whole.

The provincial and local government structures articulate the need to address the impact of the epidemic in all spheres of life and are regarded as important structures to ensure the coordination and support of the national strategy on HIV/AIDS and STD's

In countries such as Botswana, Lesotho, Swaziland and Tanzania HIV/AIDS policies recognise HIV/AIDS as a national disaster. Botswana and Tanzania regard the epidemic as a national crisis. Lesotho has declared the epidemic a national disaster that requires national prioritisation. Mozambique has a Strategic Plan that views the epidemic as having a huge negative impact on social and economic development of the country.

3.2 The Overall Goal Of The Transport Sector HIV/AIDS Strategic Framework

The Transport Sector family commits to establish and maintain a healthy community and a stable and comparative transportation sector by effectively preventing and managing HIV/AIDS.

3.3 Main Objectives

1. Consolidate best practices
2. Mobilise resources
3. Involve stakeholders
4. Reduce the incidence of HIV/STD infections among the transport industry workers
5. Create policy environment for best practice initiatives in the transport.
6. Ensure the implementation of relevant policies, guidelines and legislation aimed at protecting the employees in the transport sector from unfair practices
7. Encourage the spirit of care and support among employees of the transport sector and their families



TRANSPORT SECTOR HIV/AIDS STRATEGIC AIDS PLAN



8. Mobilise and coordination of resources for the sector's response to HIV/AIDS initiatives

The Priority areas as adapted for the transport sector from the HIV/AIDS & STD Strategic Plan for South Africa are as follows:

Priority Area 1: Prevention

- Promote safe and healthy sexual behaviour
- Improve management and control of STDs
- Address issues relating to blood transfusion and HIV
- Provide appropriate post exposure services
- Improve access to Voluntary HIV testing and counselling (VTC)

Priority Area 2: Treatment Care And Support

- Provide care and support in Transport Communities
- Provide treatment, care and support services in health care facilities
- Provide adequate treatment, care and support services in communities
- Develop and expand provision of care to children and orphans
- Establish and encourage mobile clinics (Roads, Harbours, Borders)
- Explore possibility of providing anti-retroviral drugs / other treatments

Priority Area 3: Research, Monitoring And Evaluation

- Conduct policy research
- Conduct regular surveillance

Priority Area 4: Human And Legal Rights

- Create a supportive and caring transport environment
- Comply with appropriate legal and policy provisions

Priority Area 5: Training and Development

- Provide peer education training programmes
- Integrate education systems, infrastructure and practices
- Ensure Training programmes meet required unit standards and quality

3.4 General Principles for the Transport Sector

The following constitutes the guiding principles for the management of HIV/Aids Transport Sector

1. Identification, testing and implementation of culturally appropriate and relevant strategies
2. Encouragement of voluntary HIV/STD testing
3. Creating a non discriminatory work environment
4. Institute counselling and referral systems for support and care



5. Promotion of respect for rights and obligations of individuals
6. Implement prevention programmes

3.5 Areas Of Strategic Focus

In order for the Transport Industry HIV/AIDS Strategic Plan to succeed there is a need to identify key areas that will drive the interventions forward. It must be noted that there exists complex relationships between the Transport Sector and certain key situations and conditions. Some of the conditions or situations that are pertinent to ensuring the success of the Strategic Plan include; the demographic situation, the socio economic situation, the psychosocial situation, the political situation, the socio-cultural situation, the gendered situation, the institutional development situation and the capacity building situation.

Demographics

There is need to understand the demography of the transport sector in order to create well-targeted programmes. It is necessary to investigate the size, location, age, sex, race, education, income and the extent of the family composition. These are crucial factors that enable one to make an informed decision about the members of the transport sector.

Gender Issues

The gender composition of the transport sector is related to the demography issues. However, there is slightly different dimension to it in that the sector is predominated by men. The relationship dynamics are tilted against the other gender in that men in this work environment are seen as financially resourceful. Therefore men are likely to influence the pattern of sexual relationship with their stable partners, wives and commercial sex workers.

Socio-Economic Environment

The socio-economic environment determines a number of things, viz the ability to resist sexual demands, choice of a partner and the number of partners one can afford, can determine patterns of social relationships. A sex partner who is financially dependent is disadvantaged when negotiating sex.

Psychosocial Climate

There is a need to understand how psychosocial issues translate into social phenomenon. For example a commercial sex worker who has low self-esteem is less likely to negotiate for safe sex. A driver who is under the influence of alcohol may find himself having unprotected sexual intercourse.



TRANSPORT SECTOR HIV/AIDS STRATEGIC AIDS PLAN



The Socio-Cultural Environment

The socio-cultural factors are involved in the shaping of people's belief systems, values, perceptions, preferences and behaviours. Values may be against use of condoms in sexual relationships. Certain backgrounds permit multiple sexual relationships. Some of these factors are difficult to change but it is important to work with them in forms of achieving desired results. The factors have an important role in influencing sexual behaviour and attitudes towards sex and HIV/AIDS.

Political Environment

A conducive political environment is a prerequisite to successful programming. Appropriate policies, guidelines and legislation need to be encouraged, developed and received to meet the demands of HIV/AIDS issues. The political environment can affect work with commercial sex workers, participation of transport workers, condom marketing, access to health services and empowerment of women in relationships.

Institutional Development

Organisations involved in HIV/AIDS need to have operational and organisational capacity to sustain meaningful interventions. Such capacity could be developed through human resource development, management development, management information systems and other report requirements and ability to engage in institutional networking. While programmes on HIV/AIDS may be in place, absence of a well-developed institution sets such programmes for inefficiency, non-effectiveness or even collapse.

Capacity Building

The transport sector and related institutions are required to develop capacity to ensure sustainability. Such capacity development must ensure that individuals, families and the transport sector community receive appropriate support. Such support could be in the form of funding of projects, skills development for individuals and key family members and develop skills for fundraising for HIV/AIDS programmes for the transport sector community.

4. Strategy Baseline

The Strategy baseline put forward here are based on the understanding that the sector strategy focuses on cross-cutting issues rather than operational projects. Based on this understanding, the programme areas identified include the following:

4.1 Policy Formulation and Development

Representatives from the provincial governments and the eight sub sectors of the transport sector will be responsible for assisting in policy formulation, policy alignment, policy development and review. Their role will be focussing on macro



TRANSPORT SECTOR HIV/AIDS STRATEGIC AIDS PLAN



policy issues through policy workshops, external local and international expertise. They will be in a position to review institutional frameworks, procedures and methods of programme development and implementation. The provincial government representatives will ensure that there is an appropriate reporting requirement and relationships will relevant government structures. The sub sector representatives will ensure that they work from an informed basis as far as information and decision processes are concerned with regard to their respective sub sectors.

4.2 Strategic Planning

The strategic planning is seen to be the responsibility of the representatives from the eight sub sectors in the transport sector in South Africa. The representatives will develop strategies based on the previous experience in HIV/AIDS prevention and support within South Africa, the SADC region and international projects. The focus would be on identifying sub sector priorities and developing relevant strategies to meet the needs of each sector. The transport sector will rely on the proven ability of the private voluntary organisation and non-governmental organisation in developing such strategies. In addition, the sector will use the feedback that is received from various provincial and district structures to draw appropriate strategies.

4.3 Co-Ordination

The National Transport HIV/AIDS Coordinating Committee will be overall responsible for the coordination and monitoring of programmes. To ensure the success of the committee it is expected that each organisation will identify and appoint a special projects officer to manage the coordination within their organisation. Provincial structures have been designated coordination points for each sub sector where reasonable links have been established. Each provincial government have appointed a coordinator. Among other activities the provincial coordinator will maintain and establish provincial working groups as part of creating well coordinated programme of action. The coordination will oversee operational plans, budget cycles, programmatic and financial reporting. In addition to this the coordination will be responsible for ensuring that formative assessment and baseline research, monitoring and evaluation, management information systems, programme development, human resources development and appropriate intervention models within the sub sectors are in place. The coordination will ensure that capacity building and institutional development are done. Capacity building may involve skills development in the areas of programming and fundraising.

4.4 Communication and Advocacy – promotion of best practices

Communication will be developed among sector partners such as National Department of Transport, Cross Border Road Transport Association, Taxi Associations and Non Governmental Organisations. Such communication will ensure that there is continued networking and collaboration for purposes of mobilising resources, brainstorming on programming issues, stakeholders identifying their needs and assets as part of developing and implementing, their projects. It is



expected that advocacy for the transport sector and beneficiaries will be promoted by the national and provincial governments as well as other NGOs working in collaboration with the transport sector. (See Annexure A for comprehensive list)

4.5 Monitoring and evaluation systems

In order for one to have an idea of success or failure in a project, monitoring and evaluation systems may need to be put in place in an organisation. Currently, most organisations involved in AIDS interventions do not have a systematic way of monitoring the process and outcomes of their interventions. The monitoring is either based on personal communication, non-systematic observation and workshops. Appropriate methods of monitoring and evaluation need to be selected, determined on the basis of the character of the interventions. A common set of points has been identified in projects that have conducted monitoring and evaluation from time to time. The common issues for monitoring are:

- The most efficient monitoring and evaluation must be simple and usable
- Monitoring must be continuous
- The monitoring must be supportive, giving room for participation
- Monthly process indicator forms for monitoring monthly projects activities must be in place
- Written reports from participants stating accomplishment, limitations, frustrations, constraints and failures should be used in the monitoring
- Be able to draw an overall picture of the project activities with participants
- Be able to make a follow up of the project activities by regular site visits
- Examine record keeping and other documents of project experiences to guide planning and organizing
- Assessing whether or not content of the information on training is relevant by discussing with participants

The common issues for evaluation are:

- Components of evaluation must cover process and impact /outcome evaluations
- Be able to determine whether or not the project is accomplishing the stated objectives
- Be able to determine what the project has achieved since its inception
- When conducting evaluation make use of some of the following methods:
 - Direct field observation
 - Participant observation
 - Formal interviews
 - Informal interview
 - Conversation with key informants



TRANSPORT SECTOR HIV/AIDS STRATEGIC AIDS PLAN



- Focus group discussions
 - Survey questionnaires
- Collapse the information and reduce it to readable chunks in the form of a document
 - Keep the document in the appropriate readership deposit
 - Provide feedback to participants and other involved sectors as soon as possible
 - Be in a position to justify the project in terms of its outcome and economic costs.

5. Programme Components And Plans

5.1 Programme Components and Accountability

The National HIV/AIDS Transport Co-ordinating Committee will undertake a process to determine a comprehensive programme to implement the interventions aimed at achieving the goal and objectives stated in section 3 above.

Based on the programme areas in section it is anticipated that the following will constitute the programme components and the framework of accountability:

Table 1. Expected Functions

PROGRAMME COMPONENT / STRUCTURE	ROLE & RESPONSIBILITY
Minister of Transport	Overall Implementation of Strategy Plan
National Co-ordinating Committee	Policy Formulation and Strategic Planning Fund raising at National Level High Level Advocacy and Communication
Provincial Co-ordinating Committee	Alignment of Operational Policies Develop Provincial Priorities Co-ordination of Operational Plans Fund Raising at Provincial Level Advocacy and Communication
Local Co-ordinating Committee	Project Planning and Implementation Fund Raising at Local Level Advocacy and Communication
National Department of Health	National AIDS Policy Framework
National Department of Transport	National AIDS Policy Framework for Transport Sector
Provincial Department of Transport	Operational Policy Positions



TRANSPORT SECTOR HIV/AIDS STRATEGIC AIDS PLAN



Transport Sub-Sector Partners	Sub-Sector Support Programmes
Non-Government Organisation	Project Implementation Capacity Building
Private Enterprise	Work Place HIV/AIDS Policies Project Implementation

5.2. Strategic Plans

In line with the National AIDS Plan processes, the transport sector will put in place multi-year and annual plans. Of particular importance will be the following plans:

- Strategic Plan
- Annual Plan
- Medium-Term Plan

The National Co-ordinating Committee will determine the specific contents of the plans.

Table 2. Summary of the Programme Components for Strategic HIV/AIDS Plan

Objective	Recommended Activities
Prevention	Education and training programmes Provide condoms Promote voluntarily testing Promote responsible sexual behaviour Promote social development
Treatment and care	Implement Employee assistance programmes Medical Aids contributions Develop care programmes for employee orphans in partnership with Welfare Organisations Develop contingency plans Form partnerships with health care organisations
Research Monitoring, and evaluation	Undertake continuous research Evaluate impact of programmes
Human and Legal Rights	Develop policies using DOL as legal framework Implement
Training and Development	Providing training on management of Aids



TRANSPORT SECTOR HIV/AIDS STRATEGIC AIDS PLAN



5.3 Monitoring And Evaluation Framework

The monitoring and evaluation will have the following elements:

- Formative assessment and baseline research
- Process evaluation
- Impact evaluation

5.4 Reporting Cycle

Reporting will be done by the National HIV/AIDS Transport Co-ordinating Committee

- : -Monthly Reports
 -Quarterly Reports
 -Annual Reports
 -Term Review Reports

Table 3. Summary of the Plan of Action for the Transport Sector Strategic AIDS Plan

Objective	Activity	Responsible Office	Target audience	Time frame	Cost (R)
1.Overall Implementation of the Plan of Action	Delegation of Planning Implementing and monitoring	Minister of Transport	Transport Stakeholders	30 November 2001-ongoing	
2.Status review	<u>Series meetings</u> 1.Review of available documentation. 2.Review of project progress 3.Review of project needs and resources. 4.Documentation of proceedings.	Provincial, local government and sub sector representatives.	Government officials and sector representatives.	15 January to 25 January 2002.	Contributions by Sector Partners in the National HIV/AIDS Transport Co-ordinating Committee
3.Policy formulation, alignment and development	<u>Workshops</u> 1.Policy review of documentation. 2.Policy formulation. 3.Policy alignment. 4.Documentation.	Provincial, local government and sub sector representatives.	Government officials, non-governmental organisations, funding organisations and sector	28 January to 30 January 2002	



TRANSPORT SECTOR HIV/AIDS STRATEGIC AIDS PLAN



			representatives.		
3.Strategic planning	<u>Series meetings</u> 1. Identify project needs. 2. Making projects 3. Operational plans. 4. Budget. 5. Setting timeline 6. Procedure compliances.	Provincial government and sub sector representatives	Provincial governments Sub-sectors	15 January to 25 February 2002	
4.Coordination	1. Resources. 2. Tasks. 3. Communication 4. Meetings and workshops.	Provincial government representatives.	Government officials, funding organisations and sub sector representatives.	Ongoing	
5.Communication and advocacy	1. Policy issues. 2. Research findings. 3. Gender issues. 4. Work conditions. 5. Care and support. 6. Capacity building.	Provincial government, funding organisations, sector and non-governmental organisations representatives.	NDOT, employers, personnel, families, the community and government departments	Ongoing	
6.Research, monitoring and evaluation	1. Monitoring and evaluation framework 2. Formative assessment and baseline research. 3. Process evaluation. 3. Impact evaluation.	National Coordinating Committee Provincial government and sub sector representatives , academic institutions and funding organisations.	Stakeholders Pilots, drivers, commercial sex workers, commuters and Taxis.	1. Ongoing 2. Project inception. 3. Midterm of project. 4. End of project.	

6. CONCLUSION

The Transport Sector HIV/AIDS Strategic Plan is a guidance document .To give effect to the contents of this document all Transport Sector Stakeholders will have to commit themselves to participating in the implementation programme. In the words of the Minister of Transport ,” we are a mighty army of activist against Aids”, and we do care.

A Word of Thanks

The process to create one strategy for the whole Transport Sector started in April 2001, under the auspices of the National Department of Transport’s HIV/Aids Committee. The buy in from the members of the National Transport Coordinating Committee however, provided the success behind the strategy document. Thank You, to all who made this document happen.



TRANSPORT SECTOR HIV/AIDS STRATEGIC AIDS PLAN



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Annexure A

A LIST GENERATED BY STAKEHOLDERS ON BEST PRACTICES (27 July 2001)

Categories and Types of Best Practises

The following categories and types of best practises that need to be considered and developed were identified:

Management practises

- Ø Way forward for the integrative strategy and its branches
- Ø Integration and combing effort and resources between transport sectors and modes
- Ø Information management and flow
- Ø Sharing and showing of results
- Ø Benchmarks, targets and standards
- Ø Financial resources
- Ø How have others have identified, categorised and used best practises
- Ø International best practises
- Ø Information and research regarding the short, medium and long term impacts of HIV/AIDS and interventions
- Ø National, regional and local efforts and programmes

Marketing practises

- Ø Improvement of communication systems and information flow
- Ø Legislation practises
- Ø Incorporating and including all legislation from the Constitution to work-place policies
- Ø National HIV/AIDS and STD Strategic Plan, policies, programmes and interventions
- Ø Provincial and local government strategies, policies and programmes
- Ø Targeted interventions practises
- Ø Interventions and practises for people and organisations involved in cross-border and international transport, harbours, migration such as seafarers, truckers
- Ø Establishing and improving family and home values, ethics and morals
- Ø Orphans and elderly

Medical practises

- Ø Drugs, including anti-retroviral
- Ø Condoms and femidoms
- Ø Life style and behaviour management practises
- Ø Alleviation of poverty
- Ø Addressing poor nutrition
- Ø Understanding life conditions
- Ø Changing behaviours and attitudes
- Ø Wellness and healthy life practises
- Ø Changing peoples lifestyles and ways of living
- Ø Care and support practises
- Ø Employee Assistance Programmes
- Ø Management of death and disability
- Ø Insurance and medical aid schemes
- Ø Setting examples and role models
- Ø Changing attitudes towards PWAs
- Ø Counselling and voluntary testing
- Ø Testimonies of those infected (PWAs) and affected
- Ø Breaking down barriers and perceptions
- Ø Preventing and reducing stigmatisation
- Ø Improving understanding about HIV/AIDS
- Ø Spiritual support
- Ø Education, training and development practises
- Ø Education and religious resources, systems, infrastructure and practices



TRANSPORT SECTOR HIV/AIDS STRATEGIC AIDS PLAN



- Ø Standards and quality
- Ø Evangelism and discipleship methods and practises

Marketing of Best Practices

The following ideas for marketing and promoting best practises were identified:

- Ø Legislation
- Ø Incorporating and including all legislation from the Constitution to work-place policies
- Ø Creation of a manual of best practises
- Ø Improvement of communication systems
- Ø Across transport sectors
- Ø Information flow
- Ø Snap shots of results achieved
- Ø Training and development of marketing skills
- Ø Campaigns:
 - Ø Hand of compassion
 - Ø Changing of attitudes and behaviours
 - Ø Improve understanding of and action towards HIV/AIDS
 - Ø Marketing of actions, activities and interventions, eg for orphans and elderly, truckers, seafarers
 - Ø Mobile information and support kiosks and clinics – e.g train carriages parked at stations and in rural areas

Management of Best Practises Resources

The following ideas for managing best practises resources were identified:

- Ø Integrated strategy and action plan involving all the transport sectors and stakeholders
- Ø Integration and combing efforts and resources between transport sectors and modes
- Ø Implementation and synergy of all identifiable and effective efforts
- Ø Constant monitoring, review and evaluation to ensure everything is right
- Ø Sign posts and markers of progress and success
- Ø Benchmarks, targets and standards
- Ø Optimal use of resources and efficient application for most effective impact
- Ø Financial
 - Ø Donor funding and other resources
 - Ø Human
 - Ø Infrastructure – eg clinics, schools, churches, community facilities
 - Ø Training, education and development resources and infrastructure
 - Ø Available budgets and funds targeted for HIV/AIDS interventions
 - Ø National, provincial and local campaigns, programmes and interventions
 - Ø International – eg ILO, UNAIDS, FMG
 - Ø Strategies, programmes, interventions
 - Ø Money
 - Ø Knowledge
 - Ø People
 - Ø Technology
 - Ø Strategic partnerships with international, regional, local agencies, donors, investors, service providers
 - Ø Incentives and penalties
 - Ø Performance related
 - Ø Efficient delivery and effective impact
 - Ø Legislation
 - Ø Incorporating and including all legislation from the Constitution to work-place policies

Training and Development of Best Practises

The following ideas for training and development of best practises were identified:



TRANSPORT SECTOR HIV/AIDS STRATEGIC AIDS PLAN



- Ø Close working relationship with relevant NQF and SAQA structures
- Ø TETA
- Ø Health and Welfare SETA
- Ø Training and development programmes to meet all required unit standards
- Ø Establish training and development programmes which will be attractive to employers
- Ø Training and development involving all the transport sectors and stakeholders
- Ø Integration and combining efforts
- Ø International, regional and local opportunities
- Ø Research and development programmes

Principles Regarding Best Practises

The following ideas for principles regarding best practises were identified:

- Ø Bring hope, comfort and support
- Ø Extend a hand of compassion to all people
- Ø Stand united against HIV/AIDS
- Ø Appreciate the depth and magnitude of this project
- Ø Constantly strive for synergy between all efforts
- Ø Focus on the stability of the transport sector and its components
- Ø Promote honesty, good ethics and upright principles
- Ø Promote the growth of the economy
- Ø Set a good example
- Ø Encourage growth and development in the widest context
- Ø All embracing approach

Best Practises for Stakeholder Involvement

The following ideas for best practises for stakeholder involvement were identified:

- Ø Close working relationship with all sectors and role-players**
- Ø Integrate strategies and action plans involving all the transport sectors and stakeholders
- Ø Support and enhance the national, provincial and local effort
- Ø Involve neighbours in cross-border interventions
- Ø Involve international agencies, organisations and transport operators (air and sea)
- Ø Integrate and combine efforts and resources between transport sectors and modes
- Ø Involve leaders who are properly equipped

Best Practises for Ongoing Review and Report-back

The following ideas for best practises for ongoing review and report-back were identified:

- Ø Review and feed-back of best practises needs to be continuous
- Ø Efforts must be made to assess and address whether enough is being done
- Ø Show results on a regular basis to maintain focus on best practises
- Ø Recognise successes and learn from failures
- Ø Identify, establish and use benchmarks