

## POLICY TOOLS - CROSS CUTTING THEMES

### 4.2 HIV/AIDS AWARENESS

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**Problem:** The HIV/AIDS pandemic has been exacerbated by the increased mobility of individuals, transport labourers and employees

**Solution:** Raised awareness of the cause and effects amongst vulnerable groups working in the transport sector through health education, and prevention targeting migrant workers and other mobile 'vectors' of the disease

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#### BACKGROUND

In 2001 there were an estimated 40 million people who had contracted HIV world-wide, 75% of which are thought to have AIDS. The scale of the problem and the continuing spread of the disease is unprecedented, and is likely to be a demographic catastrophe, with an estimated 100 million people having contracted HIV by 2005 (DFID, 2001).

The HIV/AIDS pandemic is especially damaging to poor and vulnerable groups because it impacts largely on the most productive members of society, hence economically active adults can no longer provide food security and regular income for the household, leaving the young and elderly to care for infected patients. This reversal of roles, with the burden of care falling on dependents has implications for society and the wider economy, with children being removed from school to generate sufficient income for health care and burial costs, in addition to regular household expenditure.

Excluding transmission of HIV/AIDS by commercial sex workers (CSW), population mobility is largely responsible for the spread of the disease. One of the most significant transmitters of the disease are labour migrants who are typically transient and comprise people employed in the construction and maintenance of road infrastructure, transport operators working in the railways, airlines, shipping services, and in particular road transport operators and skilled professionals who manage the transport sector. It is critical that each of these groups is targeted for intervention in order to bring about behavioural change and raised awareness.

#### Construction and Maintenance Workers in Transport Infrastructure

Labourers who are contracted to undertake road surface maintenance and rehabilitation on road work sites are often away from home for long periods and are housed in camps which invite infidelity and polygamy, either from other labourers or from CSWs who work in the area. Rural communities in which the maintenance works are being undertaken are particularly vulnerable to the advances of labourers because of the extra income that can be earned as a sex worker. These newly infected people then transmit the disease to their spouses, and the disease is transferred to whole communities in this way.



Transport sector workers who supervise and manage infrastructure projects are equally susceptible to transmitting sexually transmitted diseases because they too are a mobile population who travel away from their families for prolonged periods.

**Recommendations for prevention in construction:** Governments and private sector firms have a vested interest in preventing the proliferation of HIV/AIDS amongst their staff, not least because of worker absenteeism due to illness and funeral attendance that reduces productivity. Firms that employ labour should

provide awareness programmes prior to the maintenance contract commencing that explain ways in which HIV/AIDS can be contracted and transmitted, and how it can be prevented. Integral to such training is the promotion of contraception, and in particular the distribution of condoms, the cost of which is prohibitive to a typical construction worker.

Other means of prevention include the employment of local labour at the site of construction and maintenance so that workers can return home to their families everyday and hence resist the temptation to be sexually promiscuous. Where the use of local labour is not possible, migrant labourers should be encouraged to travel with their family, or be encouraged to take regular leave.

### Transport Service Operators

Long distance train crews, truck and bus drivers are particularly susceptible to contracting sexually transmitted infections (STIs) also, because they too spend long periods away from their families. In the same way that labourers are exposed to increased sexual activity during road building, truck drivers display high risk sexual behaviour, particularly those that operate across borders.

**Recommendations for prevention amongst truck drivers:** Awareness campaigns and free sexual health advice and condoms are the best means of prevention for truck drivers, particularly at truck stops and cross-border points which involves educating and counselling truck drivers and sex workers about the cause and effects of HIV/AIDS (see **Box 1**).

#### Box 1: Indian national programme for preventing further infection of truckers

Approximately 20% of truck drivers and their 'crew' in India are infected with sexually transmitted infections, including HIV. In response to the problem, the National AIDS Control Organisation (NACO) set up a national programme to improve awareness, diagnosis and treatment of sexually transmitted infections among truckers. It aims to encourage networking between 38 NGOs working in sexual health and specific projects targeting truck stops throughout the country. The programme covers 5% of the highways in India (1,800 kilometres) and 150 truck stops, and on site clinics diagnose and treat truckers, promote low-risk sexual behaviour and condom use. The programme has so far reached 1.7 million truckers.

The Top Gear clinic based in Delhi and run by the Naz NGO not only provides counselling, medical assistance and condoms, but also a drop-in centre where truckers can rest, eat and watch television in a safe and non-sexual environment. Naz has produced a poster advertising the centre as a social club for truckers, and has been successful in raising awareness amongst truckers. The challenge now facing Naz is how to provide similar counselling and advice to sex workers so that they too alter their sexual practises to be safer.

**Source: Rao (1999)**

### Practical Prevention

In addition to targeting specific labour groups that are at risk of being infected and of transmitting the disease elsewhere, there are other measures that can be advocated by local government, NGOs, community based organisations, trade unions and employers:

- **Community theatre:** advocating safe sex using inter-active media channels such as theatre which is more accessible to poor, illiterate communities, and allows for dialogue between stakeholders.
- **Improved living conditions:** for transport operators and labourers including accommodation, schools and health centres encourages workers to travel and work with their families.
- **Alternative income:** providing women who would otherwise earn a living through prostitution, the opportunity to earn an income from the home that would be as lucrative as sex working.
- **Contract conditions:** government and private contractors can incorporate the provision of sexual health services as a condition in the terms of reference when awarding road maintenance contracts (Decosas, 1999).

One of the problems with identifying the extent of the impact of preventative programmes is that it is very difficult to measure improvements in sexual behaviour, especially since there is not yet a cure for HIV/AIDS, and hence it is virtually impossible to examine whether a change in sexual activities has had any discernible effect. Further research on the impact of transport activities on the prevalence of HIV/AIDS is essential to identify how best to eradicate its transmission. Moreover, monitoring of high risk groups is required to determine whether awareness and education campaigns have a discernible effect on the spread of the disease, measured by increased condom sales and attendance to clinics.

#### KEY REFERENCES

DFID (2001). HIV/AIDS Strategy. *London: Department for International Development*

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