Toolkit for Trade Unions on HIV and AIDS

Guide to the Toolkit
Introduction, learning activities, case studies and references

ILO Bureau for Workers’ Activities (ACTRAV)

INTERNATIONAL LABOUR ORGANIZATION, GENEVA
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PREFACE/ FOREWORD

The labour movement internationally, nationally and at branch level has risen to the challenge of fighting HIV/AIDS and undertaken activities at workplaces and beyond. Labour’s approach is rights-based. Trade Unions never forget that their first responsibility is to protect the rights, health and livelihoods of their members, their families and the wider community. Together Trade Unions can make an enormous contribution – through their organizations and at the workplace – to help nations achieve the vital goal of universal access to HIV prevention, treatment, care and support.

It is centrally important that their responses and tools take into account what has been learnt about the evolution of the epidemic, about specific needs and risks, and about effective strategies. Although the AIDS epidemic has stabilized globally, in many countries the numbers affected continue to rise. For every two people who go onto antiretroviral medication five more are newly infected.

This toolkit responds to the fact that rapidly, increasing numbers of trade unions now have HIV/AIDS policies, programmes and focal persons – in some cases as a full-time responsibility. Although many general educational materials are available, few meet the specific needs of trade union advocacy, organization and education in the field of HIV/AIDS. This toolkit offers information, guidance and practical support to trade unions whether they are initiating, expanding or consolidating HIV/AIDS activities.

It also has a special purpose in presenting the new ILO Recommendation on HIV/AIDS. In June 2010, the International Labour Conference adopted Recommendation 200 on HIV and AIDS and the world of work. This calls on ILO member States to put in place a national policy on HIV/AIDS and the world of work, in collaboration with organizations of workers and employers. The instrument endorses the ILO code of practice, as well as reinforcing and expanding on it.

The Workers’ Group at the Conference played an active role in developing the standard as well as helping shape the implementation process by drafting a Resolution which was adopted by the Conference at the same time as the Recommendation. Key points include a request that a Global Action Plan be established... with the representative employers’ and workers’ organizations to achieve widespread implementation of the Recommendation ... with the allocation of adequate technical cooperation resources to countries.

Trade unions around the world now have a standard they can use to ensure the right to non-discrimination and to confidentiality, the right to information and education for prevention, and the right to treatment. The Recommendation also provides an entry point for communication and partnerships with relevant governmental and non-governmental bodies. I hope that this toolkit will help unions and other workplace partners make the most of the opportunities before them and guide them in contributing to the implementation of the standard for the benefit of the community as a whole.

I wish to thank Mr Francois Murangira, formerly of ACTRAV and now Director of the ILO’s Office in Dakar, who originally conceived the idea for the toolkit; Mr Rawane Mbaye ACTRAV Desk Officer for Africa and Ms Amrita Sietaram ACTRAV Focal Point on HIV and AIDS who both oversaw its development; and Mr Stirling Smith and Ms Susan Leather who were responsible for the contents. Special thanks to:
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Dan Cunniah
Director ACTRAV
# USING THE TOOLKIT

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1. INTRODUCTION AND OVERVIEW

There is already a huge amount of literature about HIV and AIDS. Do we need one more toolkit?

There is growing recognition that the world of work is a vital entry point for the achievement of universal access. The ILO has a unique role to play - because of its rights-based approach, the expertise gained over more than ninety years, and its structure, bringing together governments, employers and workers.

The purpose of this toolkit is to support trade unions in the particular contribution they can make towards preventing HIV and reducing the impact of AIDS. We hope it will also be useful to other individuals and organizations with a stake in the world of work, especially employers – with whom unions work closely in many countries - and labour ministries.

United we stand

There is a danger in believing that the response to HIV and AIDS is just about promoting safe sex or expanding treatment...

In fact, HIV/ AIDS holds up a mirror to inequalities and injustices that are still prevalent in the 21st century.

And the trade union movement has always spoken out and acted against inequality and injustice. From its earliest years, the trade union movement has stood for certain core principles, expressed simply in phrases such as “United we stand, divided we fall”, “An injury to one is an injury to all” and “Solidarity forever”. These principles are also relevant in responding to HIV and AIDS.

Consider the HIV-positive worker so frightened of discrimination at his workplace that he does not get tested, and so cannot get the treatment, care and support he needs.
Consider the woman who is unable to ask her partner to use a condom, even though he may have other sexual partners.

Consider the miner or construction worker obliged to live and work away from his family for days, weeks or even months on end.

The principles of trade unionism apply to all these situations. As a movement we stand for the protection and promotion of fundamental human rights, including the right to demand better conditions for workers and their families.

It is sometimes said that HIV is a question of individual responsibility.

Trade unionists say that the capacity of the individual to take action is subject to many external and structural pressures, including social injustice and inequality. Through joint action and mutual responsibility, trade unions seek to challenge structural issues at the same time as supporting the individual, thus bringing about positive change.

**Overview of the toolkit**

The aim of this toolkit is to help trade unions formulate and implement national action plans and workplace policies and programmes to combat HIV/AIDS. A particular focus is on how workers’ organizations can help implement the new ILO Recommendation concerning HIV and AIDS and the World of Work (no. 200).

The toolkit contains:

- Six factual and ‘how to’ booklets related to HIV/AIDS and the world of work
- Collected learning exercises, case studies and information resources
- A CD-ROM with key ILO publications on HIV/AIDS and the world of work
- A DVD with the film ‘Workplaces in Africa respond to HIV/AIDS’ (in English and French)
2. THE BOOKLETS IN DETAIL

**Booklet 1:** Basic information on HIV and AIDS, the impact and the global response

Trade union focal persons don’t need to be experts on the science of HIV/AIDS, but some understanding of the mechanisms of the virus and implications of this for prevention and treatment are important. Trade unionists engaged in this issue may need to interact with medical and policy professionals and understand some of the language that they use.

In order for trade union focal points to operate effectively at national policy level, they need to have an understanding of HIV/AIDS statistics. There is therefore an overview of the different forms of the epidemic globally and a short explanation of the statistics published by UNAIDS and WHO.

Trade unionists also need to understand the broad policy framework for their country’s HIV/AIDS response, so information is included on core international policy documents such as the UN General Assembly Declaration of Commitment on HIV/AIDS (2001) and guidance given about the basic information they should obtain on their country’s AIDS programme.

Finally this booklet introduces some of the key players in the global response to HIV/AIDS.

**Booklet 2:** Respect for rights: the key to labour and workplace responses

Underlying any successful strategy to deal with HIV/AIDS is the protection of rights. There are still many countries where people living with HIV are denied their rights, including their rights at work, or where the lack of respect for human and labour rights increases workers’ vulnerability to HIV. This booklet explains the rights-based approach and the role trade unions can play.

It includes insights into risk and vulnerability in different industries and sectors, and shows how the Global Union Federations have applied rights-based responses at the sectoral level.

A key aspect of the respect for rights is gender equality.

More equal gender relations and the empowerment of women are vital to help prevent the spread of HIV infection and enable women to cope with AIDS. Responses to HIV/AIDS are strengthened by trade union campaigns for gender equality and against gender-based violence harassment and discrimination in the workplace. While this booklet has a specific component on gender, the promotion of gender equality is a priority throughout the toolkit.

For trade unionists, the most important text promoting rights in the field of HIV/AIDS is the ILO Code of practice on HIV/AIDS and the world of work - the basic reference for workplace action. The Code of Practice, approved in 2001 by the ILO Governing Body, rests on ten fundamental principles that protect the rights of working people, their families and communities. This key text has had an enormous impact on the law and policies in many countries, and has now been endorsed and strengthened by the Recommendation on HIV/AIDS and the World of Work, adopted at the International Labour Conference in June 2010. This booklet explains the development and key aspects of the new standard, and shows how trade unionists will be able to use it to enhance their work on HIV/AIDS, especially in combatting discrimination and promoting rights.
**Booklet 3:** Workplace action on HIV and AIDS: contributing to universal access

An effective HIV/AIDS programme rests on three pillars - prevention, care and support, and treatment - based on the firm foundation of respect for rights. These are also the pillars of universal access. This booklet explains the goal of universal access and offers guidance and examples of good practice in each area.

For every two people who start antiretroviral treatment, five are newly infected with HIV, so prevention remains a priority. The ways in which the virus spreads are well-known. The world of work is the right place to provide clear information about HIV transmission and education to prevent it.

With the correct care, support and treatment, those living with the virus can continue to lead a normal life, including work. We should never forget that 90 per cent of those living with the virus go to work every day. Booklet 3 examines the costs and benefits of care, support and treatment, including voluntary testing, at and through the workplace.

**Booklet 4:** Trade union education and training on HIV and AIDS

A major component of trade union action on HIV/AIDS is building the capacity of members through the provision of information, education and training. This programme, including the training of trainers, peer educators and focal persons, should be for trade unionists and workers and be delivered and organized by trade unions.

The booklet provides advice on designing and implementing a programme for a range of key individuals and groups. It includes:

**Planning:** needs assessment, setting targets, budgeting and administrative arrangements.

**Delivery:** teaching methodology (active teaching methods), materials development and communication skills.

**Monitoring, evaluation and follow-up:** training programmes, events and materials need to be evaluated so that achievements can be built on and necessary revisions made.

**Booklet 5:** Mobilizing resources for trade union action

Long-term trade union intervention on HIV/AIDS means developing projects as well as identifying partners and resources. Funding for HIV/AIDS programmes is increasingly decided and disbursed at country level, which can open more opportunities for unions.

The booklet will help you to identify sources of funding at country level, especially the Country Coordinating Mechanisms (CCMs) of the Global Fund, and make contacts with key players, such as National AIDS Committees, UNAIDS and bilateral donors, etc. Most donors now require that applicants for project funding follow quite detailed procedures. The booklet will help you to understand donor requirements and link these to the union’s needs.

Trade unions must become as competent and competitive as NGOs in the way they approach donors. This includes thinking about joint proposals - with employers and/or government partners as well.
Funding agencies have increasingly complex and demanding requirements for the submission of project proposals and budgets, for delivery, and for monitoring, evaluation and reporting. Trade unionists must be well-equipped to prepare, implement and manage short-term and long-term projects.

Booklet 6 will help you in the process of developing sound project proposals, including joint worker-employer proposals. Trade unions have got plenty of ideas - the challenge is turning these into sound and achievable proposals.

The booklet explains some current project planning methods and tools such as project cycle management and the logical framework matrix. These can seem daunting and complicated, but the booklet tries to make them more accessible.

Good luck!

Human AIDS ribbon at the International Labour Conference, June 2010 (ILO)
3. EXERCISES AND LEARNING ACTIVITIES

This section consists of exercises for use with union members in formal and informal learning situations.

There are four types of exercise:

- **Learning activities.** Small group work with a range of tasks and reporting mechanisms.
- **Role plays.** Participants learn through acting as somebody else in response to a given situation.
- **Energizers.** Short activities that help to break up longer days - and can also make important points.
- **Demonstrations.** Practical instructions showing how something works - in this case, using a condom.

They can be used outside the formal classroom, even where there is no building. Most can be used with workers who do not feel comfortable reading. You may need to make some changes depending on languages used and the cultural context.

Please adapt and improve them - do let the ILO know if you develop new ideas.

3.1 HIV/AIDS at work

**Learning activity 1: HIV/AIDS and the workplace - fact and fiction**

**Aim:**
To help you think about why HIV/AIDS is a workplace issue

**Task:**
In your group, discuss the following statements. State whether you would agree or disagree, and give your reasons.

- “HIV/AIDS is spread by ignorance, prejudice and complacency”
- “HIV/AIDS is more than a health issue. It affects us all”
- “Several workers in our enterprise have, sadly, died from AIDS. But we have always replaced them. There is such high unemployment that any worker can be replaced.”
- “Even if new workers are taken on, you can’t be sure they don’t have HIV or won’t get it.”
- “If experienced workers are lost, it costs a lot to replace them and productivity falls.”
- “HIV/AIDS is spread by sex and drug use. People bring it upon themselves. It’s nothing to do with the company.”
- “The workplace is not the right place to discuss things like safe sex.”
“If people fear discrimination or dismissal, it lowers everyone’s morale.”
“Workplaces can support public health services by distributing condoms and providing treatment.”
“HIV-positive staff should not be in contact with the passengers; if necessary they could be transferred to a position where they have no contact with passengers.”

Learning activity 2:
Dealing with fears about HIV/AIDS at work

Aim:
To consider some of the problems which fears and lack of information/understanding about HIV/AIDS can create.

Task:
In your group, discuss the following situations. How should a trade union respond?
- Workers refuse to eat with, or use the same toilet as, a worker with HIV
- Workers demand protective clothing because of their fear of being at risk of HIV infection
- Management propose to move a worker known to be HIV+ from a post where s/he meets the public
- First aiders have resigned their positions because they fear they are at risk from HIV infection if they carry out first aid procedures.

Learning activity 3:
HIV/AIDS and its impact at work

Aim:
To understand some of the implications of HIV for a workplace.

Task:
In your group, think about your workplace. What might be the consequences if a worker:
- Was off sick for one month with an illness caused by HIV?
- Had to leave his/her job because s/he was too ill with AIDS?
- Died as a result of AIDS?
- Was dismissed on suspicion of being HIV-positive while continuing to work normally?
Learning activity 4: Gender and learning

Aim:
To understand links between gender differences and HIV/AIDS, and how these affect programmes

Task:
In your group, think about the education and information available at your enterprise on HIV/AIDS.
Think about whether the messages given and approaches used apply equally to men and to women.
Think about the different ways in which men and women perceive key issues, such as:
- The way HIV is transmitted
- The myths about HIV
- The protection that is available to men and to women workers against HIV
- The rights and responsibilities of women and of men at the workplace and in the home

Now, decide if you need to review the education and information available at your enterprise, and how it is provided.

Learning activity 5: Workplace policies

Aim:
To develop workplace policies on HIV/AIDS

Task:
Read through and compare two different workplace policies* on HIV/AIDS.
- Which are the strong and weak points of each policy?
- Which do you prefer and why?
- Which one, or which points from each, would be most relevant to your enterprise?

* See part 6 of this booklet and the ILO/AIDS website
Learning activity 6: Workplace policies

Aim:
To help you think about reaching out to the local community

Task:
Consider the community around your workplace – the families of workers, service providers, small businesses, local residents... Include informal groups of workers, such as vendors and porters, as well as marginalized groups such as injecting drug users or sex workers.

How does your workplace relate generally to the local community?

How could your HIV/AIDS activities be shared outside the workplace? What other ways are there for your workplace to offer support?

3.2 General awareness

Learning activity 7: How is HIV transmitted?

Aim:
To understand how the virus is transmitted

Task:
Work with your neighbour, in pairs. Discuss all the ways you think that HIV can be spread. Swap your list with the next pair. Put a tick where you think the other group is right, a cross where it is wrong, and then display the chart for everyone to see.

Learning activity 8: Myths about HIV and AIDS

Aim:
To understand and confront common myths about HIV and AIDS

Task:
Work in pairs. Each pair must write on a large piece of paper (as large as possible) some of the ideas about HIV/AIDS that they may have heard. You need to leave some space for a reply. You then pass the paper to another pair and receive a different paper in turn. The pieces of paper can be pasted onto the wall and further discussion held. Each pair now prepares a response to the ideas expressed.
Energizer 1: 
Walk the plank

*You need:* a plank of wood long enough for at least six people to stand on. It should not be more than about 30 centimetres wide.

As this involves close physical contact, you need to think about your group. If you have a mixed group of men and women, some people might feel uncomfortable about doing this.

Get everybody to stand up and form a large circle around the plank of wood. Ask for volunteers to stand on the plank of wood. Get as many as possible standing on the plank. It is good if they hold on to each other.

Now explain that hundreds of years ago there was a practice of forcing people to “walk the plank” on ships. The plank would be stretched out over the sea, and pirates, or the enemies they had captured, would be forced to walk along the plank until they fell into the sea and drowned - or were eaten by sharks.

Explain that this is such a plank and the floor around it is the sea - *and you are a hungry shark waiting to eat anybody who steps off the plank!* 

Now ask the volunteers on the plank of wood to re-arrange themselves in alphabetical order, *without stepping off the plank of wood.* It is good to circle around, pretending to be the shark, and pretending to wait to catch those who “fall off”. If anybody does, they rejoin the circle.

Depending on the group, and the names, it usually takes a few minutes. If it is too easy, ask them to repeat using last names if they used first names previously, or vice-versa.

Now, finish off by asking why we do the exercise. The point is that AIDS is a threat to everybody - workers, employers, families, etc, and we need to help each other in order to defeat it.

It’s more complicated to write down these instructions than actually do the exercise. It has worked successfully in many countries. Try it! Don’t worry about pretending to be a shark and looking silly.

Outdoor activity at a factory in Moldova (ILO/AIDS)
Energizer 2:
Body parts – breaking down embarrassment

Aim:
To break the ice in talking about sex

Task:
Take a plain piece of paper. Write down two or three (more if you like) words describing sexual practices or parts of the body.

Put the piece of paper into a hat. Mix them up.

Everyone picks out a piece of paper, and reads out the words. Group members can ask questions for clarification (especially if different languages are used!) and should say if they would or wouldn’t use each term and why.

Note: you should give participants the opportunity not to read out if they’re really uncomfortable.

The purpose of this exercise is to break down embarrassment and ‘demystify’ words. The main way that the virus is transmitted is through sex. We can’t pretend otherwise. We have to be able to talk about sex.

This exercise works well in contexts where the participants share a common culture - because then the words are better known to all – but it can also be interesting in a mixed group when people start explaining the words to each other. You might like to wait until the group has been together for a while, so they feel relaxed.

Energizer 3:
Don’t die of ignorance!

You need: flash cards (A4 or A5 size are best) - you can make these yourself in advance.

Use the flash cards to ask how the HIV virus can be transmitted. Hold them up and ask: “Does this cause HIV to be transmitted?”

Here are some suggestions. You can add your own.

- KISSING
- HAVING SEX WITHOUT A CONDOM
- MOSQUITO OR INSECT BITES
- CASUAL PHYSICAL CONTACT
- HELPING A WORKER WHO IS BLEEDING AFTER AN ACCIDENT
- SHAKING HANDS
- BLOOD TRANSFUSION
- SNEEZING
- USING COMMON TOILETS
- SHARING FOOD AND DRINK

Note: each flash card could have a cartoon/picture
Energizer 4:
Find a friend

You need: plain paper and a pen

▷ Every participant is given a plain sheet of paper except two. On an extra piece of paper write a C (for condom) and on another write a + (for HIV-positive). Give them to two participants but don’t tell the others about them.

▷ Everybody is now asked to walk about the room, and shake hands with at least three people. They must write down the names of who they shake hands with.

▷ When everybody has done that for a few minutes, get everybody to sit down.

▷ Now ask for the person who has the piece of paper with + written on it to stand up. Explain that this stands for a person who is HIV-positive. Ask him or her to read out the names of the three people he/she shook hands with. Ask them to stand up and to read out the names of the people they shook hands with. Repeat the process.

▷ Almost everybody should now be standing up. Explain that this represents all the people who could be traced back to one individual who is infected, and that they would be at risk of being infected.

▷ Now ask if anybody has the C written on their piece of paper. Ask that person to hold it up. Explain that because this person used a condom, he/she wasn’t at risk.

This is a quick exercise, and gets people moving around, so is a good energizer.
Role play:
Talking about AIDS

Aim:
To practise talking to workers about HIV/AIDS

Task:
You will be divided into groups of four:

- one will be a union educator
- one will be a worker
- two will be observers

Scenario: The union educator approaches the worker to find out how much he/she knows about HIV and AIDS. If the worker has a partner, what is the attitude to casual sex, or using a condom? If he/she is a parent, what is he/she doing to inform and protect the children?

- Observers: Keep careful note of the concerns expressed by the worker - does the union educator provide helpful answers?
- You can exchange roles
3.3 Condom use

Here are some exercises to get people more comfortable talking about condoms, and using them.

Learning activity 9:
How hard is it to use a condom?

Aim:
To counter arguments that using a condom is difficult

Task:
Ask participants to compare a task they might do at work, for example, changing a tyre if they are a driver or operating a drill if they are a miner, and putting on a condom. Ask them to describe each step in the process. If you have a flipchart you can write this up using this table.

<table>
<thead>
<tr>
<th>Changing a tyre</th>
<th>Putting on a condom</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
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<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Energizer 5: Condomize!

**Aim:**
To overcome anxieties about and resistance to condom use.

**Task:**
Ask participants to write down why they will not use a condom, or the reasons their partner gives for not using a condom. Remember there are female condoms too!

- Put all the papers into a hat or box.
- Pick one out and read it – you can also write them up on a flipchart or board.
- Then encourage discussion of the different reasons given. Do they agree or disagree with them? Where opinions differ, try to guide the discussion towards positive attitudes to condom use, and help participants find answers to common objections.
Demonstration 1: correct use of male condom

**Aim:**
To provide participants with the opportunity to practise using condoms

**Background:**
If a condom breaks during sex, it is more likely to be because the user has not properly handled or put it on than because of a problem with storage or manufacture. Therefore, it is vitally important that union activists and peer educators help participants learn how to use a condom.

**Materials:**
Condoms, model of a penis or substitute

**Time:**
30 minutes

**Instructions**

**Step 1:**
Find a suitable model—ideally a wooden model of a penis—with which to demonstrate how a condom is put on. Other similarly shaped objects, such as a banana or the end of a broom handle, can also be used. If none of these is available, two fingers may be used.

**Step 2:**
Explain that participants need to protect themselves and that condoms, if used correctly, provide excellent protection.

**Step 3:**
Using your model, demonstrate how to put on a condom, while highlighting the following points:

- Check the expiry date and look for signs of wear such as discoloured, torn or brittle wrappers. Do not use condoms that have passed the expiry date.
- Tear the package carefully along one side. It is better not to do this using teeth or fingernails, to avoid damaging the condom.
- Place the rolled-up condom on the top of the penis.
- Pinch the tip of the condom to expel air leave space for the semen to collect.
- Place the condom on the end of the penis and unroll the condom down the length of the penis by pushing down on the round rim of the condom. If this is difficult, the condom is probably inside-out. You should not turn the condom the other way around as some semen could already be on it. You should open another condom and unroll it correctly over the penis.
- When the rim of the condom is at the base of the penis (near the pubic hair) penetration can begin.
- If you use a lubricant this should be water-based and applied to the outside of the condom.
After intercourse and ejaculation, hold the rim of the condom and pull the penis out before it gets soft. Tie the condom in a knot, sealing in the semen.

Wrap the used condom and dispose of it in an appropriate manner - for example, in a rubbish bin. Never flush a condom down the toilet, as it will block the plumbing system!

Follow the '3 Bs': bin it, burn it or bury it.

Use a fresh condom if you have intercourse again.

**Step 4:**
Hand out condoms to each of the participants. Have each participant practise putting the condom on the model and recite aloud each of the steps as they go. Ask the participants who are observing to point out any difficulties or omitted steps. If the group of participants is very large, they can be divided up into small groups to practise, and then report what has happened.

**Step 5:**
List the most common difficulties encountered. Ask the participants to suggest how these problems might be resolved. Some common problems include the following:

- Trying to roll the condom down when it is inside-out
- The condom is not rolled down all the way
- The condom is placed crookedly on the model
- The user is too rough when opening the package or uses teeth to open it
- The air in the tip is not squeezed out.

*Source: UN Cares website (http://www.uncares.org)*
Demonstration 2: correct use of female condom

Demonstrating the use of the female condom is not a procedure that most trainers are familiar with. While we normally have access to a penis model, vagina models are not so available.

If you want to demonstrate use of the female condom, you will need two people, one condom and one penis model. One person could cup their hands on as a substitute for the vagina.

More information and illustrations can be found in the UN Cares guide at http://www.uncares.org/UNAIDS2/common/docs/en-ch-2.pdf

**How to use a female condom**

1. Always check the expiry date on the packet; if the date marked has passed, the condom should not be used. The female condom comes pre-lubricated with a silicone-based lubricant. While the female condom is still in the unopened packet, spread the lubrication around with your fingers to ensure even coverage.

2. Tear open the packet carefully with clean hands, and avoid the use of sharp objects.

3. The female condom has a ring at each end. Pinch the inner ring (at the closed end of the condom) with your thumb and middle finger so that it becomes long and narrow in order for you to insert it, a bit like one does with a diaphragm.

4. You should find a comfortable position for insertion, such as squatting or sitting with one leg raised or lying down. Next, insert the female condom into the vagina. The vaginal opening should be relaxed.

5. Then, place your finger inside the female condom and push the inner ring as far as it will go up into the vagina, ensuring that the pouch does not get twisted during insertion. The inner ring should be at the cervix, and the outer ring (at the open end of the condom)
should remain on the outside of the vagina, covering part of the external genitalia. The female condom will line the inside of the vagina, whose natural shape, along with the inner ring which sits against the cervix when inserted properly, holds the condom in place.

 éxito

It is now safe to have penetrative sex. Note that the man’s penis need not be fully erect for penetration with use of the female condom. Be sure that the penis goes inside the female condom in order that the surface of the genitals of the male and the female are protected. You are not protected if the penis goes between the outside of the female condom and the wall of the vagina.

 éxito

After sexual intercourse, squeeze and twist the outer ring and gently pull the condom out to remove (you don’t have to remove it immediately). Do this before standing up, to prevent ejaculate (semen) from leaking out.

 éxito

Like the male condom, the female condom is a one-time use product; it should not be reused. Wrap the used condom in a tissue and dispose of it in a responsible and appropriate manner.

 éxito

Follow the ‘3 Bs’: bin it, burn it or bury it. Never flush it down the toilet, as it will block the plumbing system.

 éxito

Because the female condom is a relatively recent development, it is advisable that women practice its insertion and removal prior to first time use. Before making any decisions about future use and/or in order to find the most comfortable position for insertion, it is recommended that women try it at least three times.
Demonstration 3: How big is your condom?

Aim:
To make people confident about the reliability of condoms

Background:
Almost all workers know about condoms and why they should be used, but not everyone uses them. Some have never even tried them. One reason for not using condoms is that “they’re not strong enough”. This exercise allows participants to experience the resistance and flexibility of condoms.

Materials:
Condoms, water, two buckets and a funnel or cup. You might also need towels or cloths to mop up any spilt water.

Time:
30 minutes

Instructions

Step 1:
Fill one of the buckets with water.

Step 2:
Open a condom and slowly pour water into it, using a cup. Hold the condom over the bucket as you pour, to avoid spillage. After filling the condom with at least a litre of water, tie the top, making a kind of water balloon. (Practise this exercise before doing it in front of participants to see how much water can be poured in without breaking it.)
Step 3:
Ask participants what they have learned from this. Point out that condoms are very strong and can fit any size of penis (though different sizes are available). They can contain a large volume of water without breaking.

Step 4:
Take another condom out of the package, blow it up like a balloon and tie the top. Hand out a condom to each participant and have them blow up the condoms.

Step 5:
Have the participants take turns filling condoms with water.

Adapted from the ILO/FHI 'HIV/AIDS behaviour change communication - a toolkit for the workplace’
3.4 Know your status

Energizer 6:
Why not take the test?

Aim:
to encourage people to talk about confidential voluntary testing

Task:
Ask participants to write down why they don’t go for a test, or the reasons their partner or friends give for not going for a test.

- Put all the papers into a hat or box.
- Pick one out and read it – you can also write them up on a flipchart or board.
- Then encourage discussion of the different reasons given. Do they agree or disagree with them? Where opinions differ, try to guide the discussion towards positive attitudes to testing, and help participants find answers to common objections. Identify participants who are prepared to say they’ve had the test and why.

Toolkit for Trade Unions on HIV and AIDS
3.5 Some suggested ‘menus’

A one-hour informal meeting at a workplace, canteen, truck stop etc

Exercises:

- Walk the plank!
- Flash cards
- Why not use a condom? OR How hard is using a condom?
- Talking about HIV/AIDS

Half-day session (3-4 hours) as part of a longer training programme, run for workers by the union

Exercises:

- Walk the plank!
- Talking about AIDS
- Why not use a condom? OR How big is your condom?
- Find a friend
- Dealing with fears about HIV/AIDS at work
- Demonstration session on using condom
- Why not take the test?

Full day (6-7 hours), for active union members

Exercises:

- Walk the plank!
- HIV/AIDS and the workplace - fact and fiction
- Flash cards
- Dealing with fears about HIV/AIDS at work
- Find a friend
- Myths about HIV and AIDS
- Demonstration session on using condom
- Why not use a condom?
- Why not take the test?
- Talking about AIDS (role play)

Cartoons from Training of HIV/AIDS Committees at Local Government Authorities, Tanzania Commission for AIDS (TACAIDS), Dar es Salaam, Tanzania, 2004
4. **CASE STUDIES: EXAMPLES OF TRADE UNION ACTION**

There are references to trade union activities on HIV and AIDS in several of the booklets in this toolkit. The case studies here describe activities with workers’ organizations supported by the technical cooperation programme of ILO/AIDS.

Trade unions are also represented on the Executive Committee of the World AIDS Campaign, and organize extensive activities on World AIDS Day – see http://www.worldaidscampaign.org/en/ Constituencies/Labour. WAC has just brought out a new publication, The Labour Advocacy Toolkit: Organising to Achieve Universal Access to HIV Prevention, Treatment, Care and Support (see Section 3, Resources).

4.1 **Solidarity and collaboration with the Lao Federation of Trade Unions**

Thousands of labourers are working in hydroelectric dam construction sites across the Lao People’s Democratic Republic (PDR), in a move to make Lao PDR the “battery” of South-East Asia. Facing poverty and unemployment elsewhere, they have come from other parts of the country and also from across the border in neighbouring Thailand. Because dam workers are often in physically isolated areas, it is a challenge to reach them with health and safety education, including information on HIV.

In mid-2006 the Lao PDR government agreed to a joint initiative between the ILO and Union Aid Abroad – Australian People for Health, Education and Development Abroad, (APHEDA), to increase HIV awareness among dam workers and to help build the capacity of the different partners involved.

A baseline study at three construction sites revealed very low HIV awareness. Approximately 35 per cent of respondents believed that only the young were at risk, and the same percentage wanted HIV-positive colleagues to stay in hospital so they couldn’t spread the virus. Sixty per cent of workers thought they were safe from HIV if they didn’t leave their own country and about half had never had sex with a condom.

One of the main goals of the project was to increase collaboration among workers, unions, construction companies and the government. This began at national level with a series of workshops to build capacity and understanding among the key players, and then moved on to give special support to the Lao Federation of Trade Unions (LFTU).

The ILO training operates on a ‘cascade’ basis which starts off with a core group of LFTU staff who then in turn train co-workers. Participants learn about a variety of HIV-related issues and then work out plans for passing on the ideas and training techniques to others. One of the first groups began at Nam Nguyen I dam site with 50 workers - by the end of the week all trainees felt confident enough to set up mobile HIV sessions on the three dam sites.

A few weeks later training expanded to more workers, their partners, resettlement staff and beer shop staff on the three sites. Overall there were 750 participants including 276 women. Before they participated in the training programme many women reported they felt safe from HIV infection and thought condom use was “shameful” and “disgusting.” With training their attitudes changed considerably as they found out more about HIV and became interested in how to find and use condoms.
Participants shared information about sex workers from the capital city Vientiane and nearby rural areas, who often visit the workers’ camps at night or around pay day. The workshops heard that it is common for older or drunk customers to refuse condoms. Beer shop workers, though more knowledgeable than most, were very keen to learn the correct way to use a condom.

Migrant workers are often ill prepared for what awaits them when they leave home to work in an unfamiliar environment. The project took into account the difficulties they may face in accessing services and their vulnerability to discrimination and social exclusion.

**Building capacity in Guyana’s trade unions**

“The ILO programme is an opportunity we have grabbed with both hands,” says Dale Beresford, HIV/AIDS Coordinator of the Guyana Trades Union Congress (GTUC). “The GTUC did not have the financial resources to develop a policy and plan of action or conduct extensive training. However, the ILO initiative provided an opportunity to use the human resources of the unions to reach out to the members to build their capacity to respond to the epidemic. The end result is that the trained members are able to reach other workers including those living with HIV.”

The GTUC, with its membership of 15 unions, is now committed to including clauses on HIV in all its collective agreements. It has developed an HIV policy and plan of action which includes a framework for implementation, and sensitized the leadership of the affiliated unions in Demerara, Berbice and Essequibo counties.

Shop stewards have attended special workshops on gender, which focused on meeting the differently needs of men and of women in relation to HIV, and also on home-based care. They are now passing on their knowledge and skills to colleagues from the affiliated unions and the communities where they live.

Joan Stewart, a health visitor who participated in the workshops, said, “I have used the training that we received in home-based care to demonstrate to health centre clients how to care for family members who have AIDS. Part of the satisfaction I get is when I see patients recover after they have been cared for by their relatives.”

The ILO’s support to the GTUC is part of a workplace education programme in Guyana that places special emphasis on capacity building, to enable partners in government, workers’ and employers’ organizations to develop and implement their own HIV workplace interventions. To date 19 enterprises from the public service, banking, manufacturing, mining, forestry and private security sectors have active HIV/AIDS workplace programmes.

**Tapping into existing networks in India**

In a strategic link-up with the Indian Government’s Ministry of Labour and Employment (MOLE), the ILO has helped to bring HIV education to a wide audience of workers who are often hard to reach, whilst at the same time building capacity in an important ministry.

The Central Board for Workers’ Education (CBWE) has over fifty years’ experience of educating workers from the formal, informal and rural sectors, through a network of trained officers operating the length and breadth of India. With its vast reach and well-established programme, the CBWE offered an ideal channel for the ILO to reach informal sector workers who make up 70 per cent of the CBWE’s audience.
The CBWE is part of the MOLE, a key partner in the ILO’s HIV/AIDS workplace programme in India. Its education officers helped to plan the training programme, and said they felt the inclusion of HIV was both relevant and timely to their work. The ILO ran a series of nine ‘training of trainers’ workshops all over India covering the CBWE’s 263 officers and helped to develop a reference manual for use in the field.

Each workshop included a session where participants could talk to a person living with HIV. “These sessions have made a huge difference and are rated as one of the most effective aspects of the training,” says Afsar Syed Mohamed, former National Project Coordinator for the ILO’s programme in India.

The CBWE has now fully integrated HIV education in its programme, which reaches 300,000 workers every year, and there is a constant process of feedback and refresher training. The programme is backed by a communications pack including leaflets, posters, a booklet and flipbook; they are all available in a range of regional languages. Because the CBWE is already engaged in education work, the addition of HIV to its ongoing programme has been very cost-effective and has also ensured that the programme is highly sustainable.

Talking up HIV on Moscow’s buses

When the ILO first got in touch with the Moscow Region Transport Company, union leader Igor Belozerov was sceptical to say the least. “I was afraid this initiative wouldn’t work because it is really hard to discuss issues such as sex, HIV and people’s behaviour. But it’s been over a year since we engaged with the ILO and things are moving,” he says.

“Now, I talk to my son at home, I hear bus controllers discussing this [HIV] during the breaks between shifts, I see drivers sharing information during lunch and I hear others bringing some piece of information from home. I get calls from the regional administrators enquiring about our workplace programme.”

Belozerov’s initial reaction was perhaps understandable as the transport sector in Russia is already under pressure with severe labour shortages, low wages, lack of investment and out of date equipment. Increasing numbers of migrant workers have been recruited from other parts of the Russian Federation and neighbouring countries.

They live in dormitory accommodation, often separated from their families for long periods of time; they work long shifts and have limited access to health care. To cope with the stress they sometimes turn to alcohol and may have sexual partners without knowing about HIV risk or prevention.

The ILO started with a baseline survey and identified key areas for action including: raising awareness about HIV and safe sex; encouraging a culture of caring for personal health; promoting counselling and changing perceptions about people living with HIV.

Recruiting a team of peer educators was vital to achieving these goals, and the ILO persuaded the company to involve workers from all levels, not just middle-management. The interactive training approach was unfamiliar, but as workers got more engaged they admitted that, “it’s not a bad idea to discuss issues like AIDS, alcohol problems and sexual behaviour risks at the workplace.”

The ILO worked with the peer educators and company workers to develop a special first aid kit that is small enough to fit in the glove compartment of a bus or car. It contains basic
medical supplies and condoms, with a slogan printed across the front saying, ‘Think about yourself; think about your family.’ The kit is now being used by other transport companies.

As transport workers are ruled by shifts and tight work schedules, it was initially difficult for the peer educators to get people together for training. The training sessions had to be delivered in shorter sessions and moved closer to where the drivers meet and spend their spare time between shifts.

“The main achievement of the project is that workers are motivated to take care of themselves for the sake of their families, this is what is important to them in their lives,” says the ILO’s Irina Sinelina. Migrant workers have been particularly responsive, in part because they are far from home and feel more vulnerable.

**Giving tin miners round the clock protection in China**

China’s Yunnan province has one of the biggest tin reserves in the country and numerous tin production companies are operating here, employing large numbers of rural migrant workers.

Chang Xudong is chairman of the Yunnan tin mine trade union, and an experienced health and safety officer who has recently started including workshops on HIV awareness in routine safety training.

Xudong was one of 45 officials from three provinces who participated in a major initiative by the ILO to help develop HIV workplace policies and programmes in targeted enterprises. Key priorities are the prevention of HIV transmission and protection of HIV-positive employees’ rights.

Xudong is now also the HIV coordinator for China’s biggest mining company, the Yunnan Tin Group. He manages a large team of peer educators and says, “state-owned companies in China can implement quality programmes that address the risks of unprotected sex and injecting drug use, and encourage workers to access the health services they need.”

Xudong talks to the workers about high risk behaviour, “I ask them to please wear a helmet at work and a condom when they play,” says Xudong. “They were initially very shy and few turned up for the HIV workshops, but now they are more at ease talking about the issue.”

Chang Xudong talking about HIV in the workers’ club (ILO/AIDS)
Employers and unions act together in Zimbabwe

“I have lost a sister, other relatives and many friends at work because of AIDS so I can never relax and say I know enough about the disease. I always welcome training to get new information for myself and I share it with my family and friends,” says Betty Moyo, a shop steward from Zimbabwe’s Commercial Sector Union.

Betty is attending an HIV training workshop for workers and their families to equip them with skills for personal risk assessment to prevent infection, and provide information on referral services and access to treatment, care and support. It is part of a two-year joint initiative between the ILO and Sida to work with employers’ and workers’ organizations to design and implement effective HIV/AIDS workplace policies and programmes.

The initiative is led by the Employers’ Confederation of Zimbabwe (EMCOZ) and the Zimbabwe Congress of Trade Unions (ZCTU). On the basis of consultation between union leaders and management, key workers are identified and enlisted to act as ‘champions’ in the workplace to help identify needs and gaps in the provision of services and support implementation of HIV activities. The involvement of people living with HIV is strongly advocated and union leaders are trained to negotiate for HIV/AIDS services and benefits to be included in collective bargaining agreements.

The project has created a sense of urgency among employers and workers as well as promoting wider social dialogue. The employers are operating under the theme, ‘Making HIV/AIDS a Boardroom Issue,’ which means it is included in all key employer activities, including the annual congress and golf tournaments. Workers’ unions have established drop-in centres for their members in six districts where they can openly discuss HIV/AIDS and access on-site counselling services.

Alerting health care workers in Eastern Europe

The ILO and the World Health Organization have collaborated to produce a set of guidelines on HIV/AIDS for the health sector. They have been translated into several languages, including Romanian, and the ILO has started a series of consultations in Moldova with health care unions, nursing associations and hospitals to discuss how best to distribute and implement the guidelines.

Findings so far reveal that medical staff associate HIV with their patients and their work, but are not used to thinking of the epidemic in terms of their own vulnerability. Many have not taken on board that HIV is spreading into the general population and admitted that they don’t always take precautions as they don’t feel at risk.

Health workers often see HIV as a purely medical issue and are not aware of the social implications or how to deal with the stigma faced by those affected. Many doctors said they ‘feel fear’ when they see an HIV- positive person and they recognize that HIV is still very much a taboo subject. Confidentiality regarding HIV status is often not respected.
Discussions on the subject have generated large audiences and positive feedback. “I will be more careful” and “I will share this information with my colleagues” are two common responses.

The guidelines can be found at


**Men as partners in reproductive health**

In 2004, Union Aid Abroad-APHEDA, the overseas aid arm of the Australian Council of Trade and the South Pacific Council of Trade Unions (SPOCTU), prepared a report on HIV/AIDS in the South Pacific island states and territories.

The report found that trade unions had been ignored in the response to HIV/AIDS and that awareness of the ILO code of practice was very low. Following this, a joint ILO and United Nations Population Fund (UNFPA) project run in collaboration with employers’ and workers’ organizations was established in a number of states in the region.

Households and enterprises in the Pacific are mostly male-headed, and unilateral decision-making by men undermines gender equality at home and in the workplace. This also affects women’s and men’s sexual and reproductive health, including their vulnerability to HIV. Thanks to the project, male workers in Fiji, the Solomon Islands, Vanuatu, Papua New Guinea, Kiribati and Samoa are now being empowered to play a key role in promoting responsible sexual behaviour.

Through interactive training workshops, facilitators from the ILO and UNFPA address gender-based power imbalances by focusing on the roles and responsibilities of men in relation to family planning, sexually transmitted infections (STIs), HIV/AIDS and gender relations at work and at home. The sessions involve workers, trade union officials, managers
and clinic personnel in male-dominated industries, and aim to help men have a better appreciation of personal risk and improved skills in communication and counselling.

A recent evaluation of the project revealed a reduction in sick leave and absenteeism, alcohol and drug abuse, and domestic violence. At the same time, communication between couples as well as between workers and management has improved. In general, workshop participants report having a better understanding of gender and health issues in general.

The training draws on relevant ILO labour standards and includes sessions on the ILO Code of Practice and on HIV/AIDS workplace policies. The project has produced a training manual for peer educators and trainers, a video and other materials. While the training is designed specifically for men, a few women have participated and their presence and input has been well received.

The APHEDA /SPOCTU report on HIV/AIDS in the region can be found at:

5. RESOURCES: A GUIDE TO FURTHER INFORMATION

ILO/AIDS (the ILO Programme on HIV/AIDS and the World of Work) has a large range of publications available on-line, all freely downloadable, as well as a range of additional information and news: www.ilo.org/aids

You can also go to http://www.ilo.org and click on Themes - HIV/AIDS or click on Departments and Offices - Social Protection Sector (PROTECTION) - ILO/AIDS.

The new international labour standard on HIV/AIDS

The report of the HIV/AIDS committee at the 2009 International Labour Conference can be found at:

The report of the HIV/AIDS committee at the 2010 ILC can be found at:

The new Recommendation (including the Resolution concerning the promotion and implementation of the Recommendation) can be found at:

Trade union websites

The International Trade Union Confederation:
► http://www.ituc-csi.org/.

The Global Unions are a grouping of international trade union organizations that include the International Trade Union Confederation, the Global Union Federations and the Trade Union Advisory Committee (TUAC), an interface for trade unions with the organization for Economic Co-operation and Development (OECD):

The Global Unions’ AIDS Programme website has an earlier version where a great deal of material can be found:
► http://www.global-unions.org/hiv-aids/

See Booklet 2 for the websites of individual global unions.

The World AIDS Campaign has a section on Labour, which you can access through the Constituencies button. You will find a particularly useful resource there, a new publication: The Labour Advocacy Toolkit: Organising to Achieve Universal Access to HIV Prevention, Treatment, Care and Support. See
Employers’ organizations

The International Organisation of Employers:

- http://www.ioe-emp.org/

Pages specifically on HIV/AIDS:


The Global Business Coalition on HIV/AIDS, Tuberculosis and Malaria (GBC)

- http://www.gbcimpact.org/

The Global Health Initiative of the World Economic Forum:


Reasonable accommodation or adjustment is an important issue for workers, and the UK Employers’ Forum on Disability has a Briefing on this, *A practical guide to employment adjustments for people who have HIV*, London, 2002. This is a priced publication. See:

- http://www.employers-forum.co.uk.

United Nations websites

The website of UNAIDS is an important source of information:

- http://unaids.org

UNAIDS issues regular reports about the epidemic, provides estimates of infection rates for each country, and follows the progress of countries towards universal access. It also produces a *Best Practice* series, including a title on trade union programmes.

The UN agencies which come together to form UNAIDS include the ILO and:

United Nations Children’s Fund (UNICEF)

- http://www.unicef.org

United Nations Development Programme (UNDP)

- http://www.undp.org

United Nations Population Fund (UNFPA)

- http://www.unfpa.org

United Nations Office on Drugs and Crime (UNODC)

- http://www.unodc.org/

United Nations Educational, Scientific and Cultural Organization (UNESCO)

- http://www.unesco.org
World Health Organization (WHO)
   ▶ http://www.who.int

World Bank
   ▶ http://www.worldbank.org

On all the websites you should link to pages about HIV/AIDS, or you can use the search engine.

Other websites

Family Health International, a non-profit organization, has a large programme on HIV/AIDS. Of particular relevance is its Workplace HIV/AIDS Programs: An Action Guide For Managers at

The International HIV/AIDS Alliance is a policy and advocacy organization:
   ▶ http://www.aidsalliance.org/

NAM is an HIV information provider. Its mission is to support people living with HIV to live longer, healthier lives though providing accurate information on all aspects of treatment. Regular emails provide updates on research into treatment:
   ▶ www.aidsmap.com

The Kaiser Family Foundation is an independent US-based, non-profit foundation working in the field of health policy. It has a dedicated section on HIV and AIDS. It contains regularly up-dated fact sheets, news feeds and educational resources.
   ▶ http://www.kff.org/hiv aids/index.cfm

The International AIDS Vaccine Initiative is the place to look for news on research into a vaccine:
   ▶ http://www.iavi.org/

The US Department of Health and Human Services has an online resource on HIV/AIDS treatment, prevention and research:

Another US government source is at:

Of particular interest for the world of work, the US Centers for Disease Control and Prevention, or CDC, have set up a website for the workplace, called Business Responds to AIDS/ Labor responds to AIDS (BRTA/LRTA):
   ▶ http://www.hivatwork.org/
   ACCA (AIDS Control in Companies in Africa)
The website of the German GTZ gives information on workplace interventions. The ACCA Toolbox is a collection of information and implementation tools for workplace interventions against HIV/AIDS.

- www.gtz.de and www.acca-toolbox.org

**The gender dimensions of HIV/AIDS in the world of work**

There is a specific section of the UNAIDS website:


The Global Coalition on Women and AIDS, a UN-led initiative:

http://womenandaids.unaids.org/

The United Nations Development Fund for Women (UNIFEM)

- www.unifem.undp.org

has a dedicated section on HIV and AIDS. See

http://www.unifem.org/gender_issues/hiv_aids/
6. Workplace policies and agreements on HIV/AIDS

BRIDGESTONE INDIA PRIVATE LIMITED (BSID) has always cared for its employees and have implemented various welfare schemes for its employees since the inception of the Company.

Company has various programmes for the development of its employees and the company has sent several of its employees to Foreign countries for training. Company has welfare schemes like sports leave, medical allowances, periodic medical checkups, hospitalization benefits etc.

BSID initiated the workplace HIV/AIDS programme in November 2003, through the Master Trainers Training organized by ILO at Pithampur for various enterprises.

During this training every participating enterprise developed its approach, which was to create a cadre of peer educators in each enterprise. Since then Bridgestone India Private Limited (BSID) has conducted its initial peer educators training programme in coordination with ILO and have presently 61 peer educators including two female participants in two batches.

These peer educators are in turn taking the message of HIV/AIDS to the masses.

BRIDGESTONE INDIA PRIVATE LIMITED has developed its own HIV/AIDS policy based on the Guidelines of ILO code of Practice.

S Matsunaga
Ex-Vice Chairman and Managing Director
1st December 2004
HIV / AIDS Management Policy

We, the Chief Executive, Management and Staff of Gem Diamonds recognize the vital importance, both in terms of our business imperative and our moral and legal responsibility, of ensuring that the company uses a consistent approach when dealing with employees who are living with HIV/AIDS and that this approach is legally compliant and does not infringe on the constitutional and individual rights of our employees.

The company affirms the principles of equality and equity and further states that:-

- This policy will continue to be developed, implemented and reviewed in consultation with employees and their representatives.
- The management will regularly review the level of implementation of the HIV/AIDS Management Policy and its objectives at all operations to ensure they remain current and effective.
- Employees living with HIV/AIDS have the same rights and responsibilities as all other employees. Therefore the company will do everything in its power to protect employees living with HIV/AIDS against discrimination and ensure confidentiality regarding their HIV status.
- As HIV is not classified as a notifiable disease, Voluntary Counseling and Testing (VCT) will be encouraged. Testing will only be done with the informed consent of the employee, accompanied by counseling and the results will be made available to the employee only.

In fulfilment of this Policy the Company commits itself to:-

- Ensuring that effective educational programmes informing employees of the facts of HIV infection and AIDS are implemented and that all first aid and healthcare workers are educated regarding HIV/AIDS infections as well as other potentially infectious diseases and that they understand and adhere to the relevant operating procedures.
- Ensuring that the company, at the very least, complies with applicable HIV/AIDS related legislation in those countries where it operates and will ensure that fair and reasonable labor practices are applied.

Employees are expected to commit themselves to the following:-

- Employees who contract HIV/AIDS are not obligated to inform management. Should an employee with HIV/AIDS decide to disclose his/her status to a colleague, supervisor or manager, that person is expected to take all reasonable measures to ensure that this information remains private and confidential.
- Should any employee, after receiving reassurance and with all appropriate safety and health precautions being taken and supplied by the company, still remain unwilling to work with an HIV positive colleague, that employee will be subject to disciplinary action.

To this end, Gem Diamonds and its subsidiaries will provide the necessary financial, physical and human resources to provide for the implementation of, and compliance with, this policy.
HIV/AIDS

HIV IS A DISEASE THAT CAUSES AIDS AND IS A DEADLY KILLER
KISSOON GROUP OF COMPANIES

WORK PLACE POLICY ON HIV/AIDS

GENERAL STATEMENT

The Kisson Group of Companies recognizes the seriousness of the HIV/AIDS epidemic and its impact on the workplace. The Company supports national efforts to reduce the spread of the infection and minimize the impact of the disease.

OBJECTIVE

The purpose of this policy is to ensure a consistent and equitable approach to the prevention of HIV/AIDS among employees and their families, and to the management of the consequences of HIV/AIDS, including the care and support of employees living with HIV/AIDS. The policy has been developed and will be implemented in consultation with employees at all level.

POLICY FRAMEWORK AND GENERAL PRINCIPLES

The Kisson Group of Companies recognizes the ten key principles of the ILO Code of Practice on HIV/AIDS and the World of Work as a basis for its action on HIV/AIDS. It takes into account the Company's policy that has been in effect since 1969 prohibiting discrimination and protecting the safety and health of workers.

While the Kisson Group of Companies recognizes that there are circumstances unique to HIV infection, this policy rests on the principle that HIV infection and AIDS
should be treated like any other serious condition or illness that may affect employees. It takes into account the fact that employees may live full lives for a number of years. The Company’s commitment to maintaining a safe and healthy work environment for all employees is based on the recognition that HIV is not transmitted by casual contact.

SCOPE

This policy applies to Management and all permanent employees.

SPECIFIC PROVISIONS:

1. Protection against discrimination, victimization and harassment

All employees will be protected against discrimination, victimization or harassment based on their real or perceived HIV status.

2. EMPLOYMENT OPPORTUNITIES AND TERMINATION OF EMPLOYMENT

No employee will suffer adverse consequences, whether dismissal or denial of employment opportunities, merely on the basis of HIV infection.

3. TESTING

HIV screening will not be required of job applicants or persons in employment. However, the Company will promote and facilitate access to voluntary counselling and testing (VCT) for all employees. All VCT will comply with accepted national and international standards on pre- and post – test counselling, informed consent, confidentiality and support.
4. EPIDEMIOLOGICAL TESTING

Testing programmes for epidemiological purpose will be subject to appropriate consultation with recognized employee representatives and to independent and objective evaluation and scrutiny. All testing will be anonymous. The results of epidemiological studies will not be used as basis for discrimination against any class of employee in the workplace. In cases where employees wish to know their HIV status, as a result of their participation in anonymous epidemiological testing, voluntary testing and counselling will be assured.

5. CONFIDENTIALITY

Job applicants and workers will not have to disclose their HIV status.

Kiscom Group of Companies recognizes the sensitive issues that surround HIV/AIDS, where an employee chooses to reveal his or her HIV status to management, the Company will keep the identity of such person strictly confidential.

Mechanisms will be created to encourage openness, acceptance and support for those employees who voluntarily disclose their HIV status within the workplace, including:

- encouraging persons openly living with HIV or AIDS to conduct or participate in education, prevention and awareness programmes;

- encouraging the development of support groups for employees living with HIV/AIDS; and
ensuring that persons who are open about their HIV status are not unfairly discriminated against or stigmatized.

6. **AWARENESS – RISING AND EDUCATION**

Appropriate awareness and education programmes will be conducted to inform employees about HIV and AIDS which will enable them to protect themselves and others against infection by HIV. All programmes will take into consideration, the needs of both sexes. Some of these will include the families of employees and the local community when possible.

The Company recognizes the importance of involving employees and their representatives in the planning and implementation of awareness, education and counselling programmes, especially as peer educators and counsellors.

Practical measures to support behaviour change and risk management will include referral to sexually transmitted infection and tuberculosis treatment services in the community and distribution of male, and where possible, female condoms.

Training will be arranged for key staff, including Managers, Supervisors and Personnel Officers, trainers of trainers (both male and female), peer educators and occupational safety and Health Officers within the Company.

Reasonable time off will be given for participation in education and training about HIV/AIDS and related health matters.

7. **CARE AND SUPPORT FOR WORKERS AND THEIR FAMILIES**
The Company will treat employees who are infected or affected by HIV/AIDS with empathy and care. The Company will provide some reasonable assistance which may include counselling, time off, sick leave, and information regarding the virus and its effect.

8. WORK PERFORMANCE

It is the policy of the Company to respond to the changing health status of employees by providing suitable work sites for those infected with HIV. Employees may continue to work as long as they are able to perform duties safely and in accordance with performance standards accepted by the Kissoon Group of Companies. If any employee with AIDS is unable to perform his or her tasks adequately, the Manager or Supervisor must resolve the problem according to the Company’s normal procedures on poor performance/ill health.

9. BENEFITS

Employees living with HIV/AIDS will be treated no less favourable than staff with any other serious illness/condition in terms of statutory and company benefits, workplace compensation, where appropriate, and other available sources.

10. HEALTH CARE

The Company will help employees living with HIV/AIDS to find appropriate medical services in the community, as well as counselling services, professional support and self-help groups if required. Reasonable time off will be given for counselling and treatment.

11. IMPLEMENTATION AND MONITORING
The Kissoon Group of Companies has established an HIV/AIDS committee to coordinate and implement its HIV/AIDS policy and programme. The committee will consist of 8-10 employees representing all constituents of the Company, namely:

- 2 Managers
- 3 Supervisors
- 2 Accounts Department Staff
- 3 Employees

The implementation of this policy will confirm the Company’s normal disciplinary and grievance procedures. Confidentiality will be assured during any and all procedures.

In order to plan and evaluate its HIV/AIDS policy and programme effectively, the Kissoon Group of Companies will undertake a survey to establish baseline data and regular risk and impact assessment studies. The studies will include knowledge, attitudes and behaviour/practices (KAB/P). Studies will be carried out in consultation and with the consent of employees and their representatives, and in conditions of complete confidentiality.

The policy and related information on HIV/AIDS will be communicated to all Kissoon Group of Companies employees using the full range of communication methods available to the Company.

This policy will be reviewed annually and revised as necessary in the light of changing conditions and the findings of surveys/studies conducted.

HEMRAJ KISSOON
CHIEF EXECUTIVE OFFICER

WORKERS’ REPRESENTATIVE:
POLICY ON HIV / AIDS

- **MECON** will respect the right of confidentiality about the HIV status of its employees.

- **Employees** at all levels shall be regularly imparted awareness on HIV / AIDS.

- **Pre** placement and regular medical check ups will not include testing for HIV status.

- **Healthcare** personnel shall follow "universal precaution" to prevent spread of the disease.

- **Employees** and family members shall be provided counseling and support services on matters pertaining to HIV / AIDS.

- **MECON** shall not discriminate or allow discrimination against employees with known or suspected HIV / AIDS at work place.

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(R K Zaroo)  
Chairman-cum-Managing Director  
MECON LIMITED  
Ranchi - 834002
COLLECTIVE BARGAINING AGREEMENT

BETWEEN

(KWALINI PTY LTD)

(HEREIN AFTER REFERRED TO AS “THE COMPANY” ON THE ONE PART)

AND

MINING QUARRYING ALLIED WORKERS UNION (HEREIN AFTER REFERRED TO AS “THE UNION” ON THE OTHER PART)

1. PURPOSE OF AGREEMENT.

1.1 The purpose of this agreement is to maintain harmonious and mutually beneficial relationships between the Company, the employees and the Union, to set forth certain terms and conditions of employment relating to remuneration, hours of work, employee benefits and general working conditions affecting employees covered by this Agreement and to ensure that all reasonable measures are provided for the safety and occupational health of the employees.

1.2 The parties to this Agreement share a desire to improve the quality and effectiveness of the Company and to promote the well-being and increased productivity of its employees to the end that the clientele of the Company will be well and efficiently served. Accordingly, the parties are determined to establish, within the framework provided by the laws of Swaziland, an effective and regulated relationship at all levels within the Company in which members of the Union are employed.

2. INTERPRETATION.

2.1 For the purpose of this Agreement and unless the context otherwise requires:

“Allowance” means compensation payable for the performance of special and additional duties and means any employment benefit, which is intended as wages and capable of being expressed in terms of money.

“The Company” means (name of Company) as represented by its Board of Directors, or the Managing Director and includes any person authorised by the Board to exercise the authority of the Board.

“Compensatory leave” means leave with pay in lieu of cash payment.

“Employee” means a permanent employee of the Company whose work designation falls within the scope of the Recognition Agreement.

“Management” and “Management representative” have the same meaning and mean either the Company or staff or both, as the context requires.

“Staff” means an employee who has any one or more of the following attributes:

(a) has authority on behalf of the Company to employ, transfer, suspend, lay off, recall, promote, dismiss, reward, or discipline other employees or deal with their grievances, or to authorise or recommend such action when the exercise thereof is not solely of a routine or clerical nature, but requires the use of independent judgement;

(b) participates in the making of general company policy;

(c) works in a capacity which requires him to have knowledge of the financial position of the Company;

(d) has free personal access to other confidential information substantially affecting the conduct of the business of the Company.

“Union” means the (name of union);

“Representative means”: a Shop Steward duly elected in terms of Clause 55 of this agreement or: An accredited Union Official recognised by the Company.
“Casual Employee” means any employee the terms of whose engagement provides for his payment at the end of each day and who is not engaged for a longer period than twenty four hours at a time. Any casual who has been continuously employed for a period longer than 3 months will thereafter be entitled to the benefits enjoyed by a permanent employee.

“Temporary employee” means an employee engaged on a fixed contract of six weeks or less which does not provide for re-engagement at the end of that period.

2.1 Expressions used in this Agreement, if defined in the Employment and Industrial Relations Acts of Swaziland have the same meaning as given to them in those Acts.

3. APPLICATION.

3.1 The provisions of this Agreement apply to the Union members excluding those referred to point 3.2 below and the Company. Should this Agreement be translated into SiSwati, the English text shall be official.

3.2 This Agreement shall not apply to employees who may be designated as managerial and employees who fall under the definition of staff in the Industrial Relations Act 2000.

3.3 The terms and conditions of employment contained in this agreement may not be altered during the duration of the agreement except where any law or amendment or any law of Swaziland provides for more favourable conditions.

3.4 Should the Company regulations and directives provide for more favourable conditions than those provided for in this Agreement, then the Company may apply the more favourable conditions after consultation with the Union.

3.5 Except where specific reference is made in this Agreement, the Company regulations and directives which may be in force from time to time shall not form part of this Agreement.

4. GENERAL CONDITIONS.

4.1 Both parties to this Agreement agree to conduct themselves in a manner which is constructive and supportive of the objectives and principles of regulated relations between the parties and of the intent of this and any other Agreement.

4.2 Both parties agree to settle any problems and differences of interpretation through dialogue and consultation and further to communicate to each other any information which may affect both parties in their relationships.

4.3 Both parties agree that they will communicate with each other through their elected and appointed representatives.

4.4 Both parties agree to respect the right of the other to conduct its own affairs according to its constitution or to the rights normally belonging to Management.

4.5 The parties agree to meet in regular consultation to discuss matters of common interest to both parties with a view to setting down procedures for the conduct of such consultation but without restricting the right to informal and spontaneous communication.

4.6 Both parties agree that the election or appointment of employee representatives on any sub committee shall be conducted under arrangements to be agreed in writing between the Union and the Company.

5. NATIONAL SECURITY.

5.1 Nothing in this Agreement shall be construed to require the Company to do or refrain from doing anything contrary to any instruction, directive or regulation given or made by or on behalf of the Government of Swaziland in the interest of the safety or security of Swaziland.

6. PRECEDENCE OF LEGISLATION.
6.1 In the event that any law passed by Parliament, applying to any of all employees covered by this Agreement, renders null and void any provision of this Agreement, the remaining provisions of the Agreement shall remain in effect for the terms of the Agreement.

7. MANAGEMENT RIGHTS

7.1 Except to the extent provided herein, this Agreement in no way restricts the authority of those charged with managerial responsibilities at (name of Company).

8. RECOGNITION

8.1 The Company recognises the Union as the exclusive collective bargaining representative for the categories of employees except those mentioned in Schedule A of the Recognition Agreement concerning all terms and conditions of employment including wages and hours of work and any other issues that may be agreed by both parties.

8.2 The Company will not entertain collective bargaining with another organisation purporting to represent the categories of employees as defined in clause 3.2 above.

9. LEAVE FOR REPRESENTATIVES

9.1 When operational requirements permit, the Company will grant leave with pay:

(a) To an employee and his Representative who are party to a grievance or disciplinary hearing, to a conciliation hearing, to an arbitration hearing, or to an Industrial Court hearing, or to testify on any of the above.

(b) To a reasonable number of Representatives who are meeting with Management on behalf of the Union.

(c) To Union appointed members of the Union Executive to attend Government instituted meetings that require the presence of the Union Executive members. Written notification of such required attendance to be received by the Company at least five working days, where possible, prior to the date of such meeting.

(d) To a reasonable number of representatives for a meeting with Union members on Management’s request. Such approval to be obtained from the Human Resources Manager prior to arranging the meeting.

(e) To Union officials to attend executive council meetings, conventions for the Union, training related to the duties of a representative. The maximum number of days allowed per annum (with pay) will be 20 for Union Executive Members and 15 for Shop stewards (including Senior Shop stewards). Any further leave required for this purpose will be at the discretion of the I.R. or H.R. Manager.

10. TECHNOLOGICAL CHANGE

10.1 Both parties recognise the overall advantages of technological change. Both parties will, therefore, encourage and promote technological change and improvements in the industry.

11. INFORMATION

11.1 The Company agrees to supply each Shop Steward and Union Executive member with a copy of the Collective Agreement.

11.2 Notice boards will be made available to the Union for the posting of official Union notices in convenient locations as determined by the Company. Notices or other material shall require the prior approval of acknowledgement of the Human Resources Manager or his designated representative.

11.3 Upon request of either party, the parties to this Agreement shall consult meaningfully at the appropriate level about contemplated changes in conditions of employment or working conditions not governed by this Agreement and on matters including but not limited to training and orientation of employees.

11.4 Within five (5) days of notification of consultation served by either party the Union shall notify the Company in writing of the representative(s) authorised to act on behalf of the Union for consultation purposes.
12. **RESTRICTION ON OUTSIDE EMPLOYMENT**

12.1 Because of the nature of the work performed by the Company, employees shall not engage in other employment outside the hours they are required to work for the Employer.

12.2 The Company may make exception to clause 12.1 provided that the authority to hold other employment has been granted in writing to the employee by the Company and provided that the other employment is not specified by the Company as being in an area that could represent a conflict of interest.

13. **LEAVE – GENERAL**

13.1 An employee is entitled to be informed upon request of the balance of his annual and sick leave credits.

13.2 The amount of leave with pay credited to an employee by the Company at the time when this Agreement is signed, or at the time when he becomes subject to this Agreement, shall be retained by the employee.

13.3 An employee is not entitled to accumulate leave with pay during periods he is on leave without pay.

13.4 An employee may not take any other employment for remuneration while on leave.

13.5 An employee on a limited term contract who enters into a new contract will be credited with any annual leave, which was due to him on the expiry of his previous contract.

13.6 Leave may be granted only in complete days.

14. **ANNUAL LEAVE WITH PAY**

14.1 The year in respect of which annual leave is granted shall be the calendar year.

14.2 Paid annual leave is earned pro rata during each year.

14.3 If an employee becomes sick while on annual leave and is issued with a medical certificate which satisfies a medical officer employed by the Company that he was not fit for work during the period of leave covered by the certificate, the medical officer shall retrospectively approve sick leave for that period, in which case the number of working days involved will be added to the balance of the employee’s annual leave entitlement.

14.4 Annual leave shall be taken subject to the following conditions:

(a) **Annual leave should be granted at times convenient to the Company and the Company should ensure that it is taken when due;**

(b) **Annual leave may not normally be taken until an employee has completed 12 months of service.**

(c) **An employee must be granted, not later than six months after each twelve months of employment, not less than 10 days leave (12 working days in the case of shift workers) of which at least one period of leave shall be for a continuous period of not less than one week;**

(d) **An employee is required to take any balance of leave which he earns in a year in excess of that granted in accordance with paragraph (c) above by the end of the next year, at a time mutually convenient to the Company and the employee, failing which it will be accumulated or upon request by the employee when in excess of thirty days (30), be paid out to the employee.**

(e) **If necessary, the Company will recall an employee from leave, in which case he will be credited with the unused portion of his leave and be allowed to take it later.**

14.5 The conditions stated in clause 14.4 above are subject to the following exceptions in the case of employees on the monthly and weekly payrolls:

(a) **Leave which is expected to be earned during a year may be granted in that year, before it is earned;**
(b) If an employee's employment terminates at a time when he has taken leave which he has not earned, that leave will be deemed to be unpaid leave, and the Company will adjust any monies owing to him accordingly.

14.6 When an employee dies or otherwise ceases to be an employee, the employee or his estate shall be paid an amount equal to the earned annual leave accumulated at the time of the termination or death, as the case may be.

14.7 In the event of termination of employment for reasons other than death, the Company shall recover from any monies owed to the employee an amount equivalent to unearned vacation leave taken by the employee.

15. **SICK LEAVE WITH PAY**

15.1 Sickness resulting in absence from work must be reported as soon as possible to the employee’s supervisor. An employee may not be absent from his place of work for more than 24 hours without a doctor’s certificate.

If a medical officer certifies that an employee is not fit for work due to illness or injury, the Company will grant him paid sick leave during any calendar year as follows (after three months continuous service):
(a) 30 days at full pay per year, and
(b) 30 days on half pay per year.

15.2 Except where the employee is proven to be guilty of a breach of discipline or of safety regulations, an employee who has been injured on duty shall be paid compensation equivalent to his basic pay from the time of injury until he returns to work or until he is awarded compensation for temporary or permanent disablement in accordance with the Workmen’s Compensation Act, in which case no deduction from his sick leave credits shall be made.

15.3 **HIV & AIDS and CHRONIC ILLNESS MANAGEMENT PROGRAMME AT THE WORKPLACE**

The parties seek to protect, promote and advance the interest of workers infected and affected by chronic illnesses and HIV & AIDS through:
- Management and mitigation of the impact of Chronic Illnesses and Hiv & AIDS at the workplace
- Protection of the rights and obligations of those infected and affected by Chronic Illnesses and HIV & AIDS
- Elimination of stigma and discrimination based on Chronic Illnesses and HIV & AIDS status
- Prevention and reduction of the spread of Chronic Illnesses and HIV & AIDS through awareness and education
- Confidentiality of the status of Chronic Illnesses and HIV & AIDS
- Care and support of those infected and affected by Chronic Illnesses and HIV & AIDS
- Non-筛检 for purposes of exclusion from employment and work processes
- Continuation in employment of those infected as long as they are medically fit in appropriate work.

The parties aim at ensuring that:
- There is recognition of workers with Chronic Illnesses and HIV & AIDS and that the disease is accepted at workplace and society like any kind of disease.
- There is preservation of rights and dignity of workers infected and affected through the prevention of stigma and discrimination.
- There is recognition of gender dimension of HIV/AIDS. Equal gender relations and empowerment of women is regarded as a paramount importance to prevent the spread of chronic illnesses and HIV & A infection and enable women to cope with the devastating disease.
- There shall be dialogue, co-operation and partnership between employers and employees to look at the plight of workers infected and affected by Chronic Illnesses and HIV & AIDS and their dependents.
- Employers shall request pre-employment tests and personal information from applicants if and only if workers need financial assistance. The employer shall regard such information as private and confidential.
• There is protection of workers with chronic illnesses and HIV/AIDS such that the infection is not regarded as a cause for termination of employment.

All workers, including those with HIV/AIDS, are entitled to affordable health care services and their dependents can access statutory security programs and occupational schemes.

Workplace based HIV & AIDS and Chronic illness programs, amongst others, include:
• Development of workplace policies and agreements to prevent the spread of the infection and protect workers from stigma, discrimination and victimization based on HIV & AIDS status.
• Provision of Chronic illnesses and HIV & Aids education and information, which include Chronic illnesses and HIV & Aids prevention and control, rights and obligations of Chronic illnesses And HIV & Aids infected and affected employees, behavioural change and Chronic illnesses And HIV & Aids testing and counselling.
• Education Awareness and Prevention Programs
  education awareness and prevention programs should be developed jointly by employees and employers and should be accessible to all at the workplace. Education on Chronic illnesses and HIV & Aids should, where possible, incorporate employees’ families.
• Essential components of prevention programs are information provision, education, prevention and management of STDs, condom promotion and distribution and counselling on high risk behaviour. Workplace AIDS programs should cooperate with and have access to resources of National AIDS Programs.

Job Access
There should be no indirect pre-employment test for HIV. Employees should be given normal medical tests for current fitness for work and these tests should include testing for HIV. Indirect screening methods such as questions in verbal or written form inquiring about previous HIV tests and or questions related to the assessment of risk behaviour should not be permitted.

Workplace testing and confidentiality
There should be no compulsory workplace testing for HIV. Voluntary testing for HIV on the request of the employee should be done by a suitably qualified person in a health facility with informed consent of the employee in accordance with the normal medical ethical rules and with pre- and post- counselling.

Persons with HIV or AIDS should have the legal right to confidentiality about their HIV status in any respect of their employment. An employee is under no obligation to inform an employer of his/her status. Such information should not be disclosed without the employee’s consent.

Confidentiality regarding all medical information of an employee should be maintained, unless disclosure is legally required. This applies also to health professionals under contract to the employer, pension fund trustees and any other personnel who obtain such information permitted by law, ethics or from the employee concerned.

Job Status
HIV status should not be a factor in job status, promotion or transfer. Any changes in job status should be passed on existing criteria of equality of opportunity, merit and capacity to perform the work to a satisfactory standard.

HIV Testing and Training
In general, there should be no compulsory HIV testing for training. The principle of non-discrimination between individuals with HIV infection and those without or between Chronic illnesses and HIV & Aids costs and other health/medical conditions should govern HIV testing for training.

Managing Illness and Job Security
No employee should be dismissed merely on the basis of HIV status, nor should HIV status influence retermination procedure.

Employees with HIV-related illnesses should be entitled, without discrimination, to agreed existing sick leave provisions.

HIV infected employees should continue to work under normal conditions in their current employment for as long as they are medically fit to do so. When on
medical ground, they cannot continue with normal employment, efforts should be made to offer them alternative employment without prejudice of their benefits. When the employee becomes too ill to perform the agreed functions, the standard benefit and conditions and the standard procedures for termination of service for comparable life threatening conditions should apply without discrimination.

Occupational Benefits

Government, employers and employee representatives should ensure that occupational benefits are non-discriminatory and sustainable and provide support to all employees including those with HIV infection. Such occupational benefit schemes should make efforts to protect the rights and benefits of the dependents of the deceased and retired employees.

Information from benefit schemes on the medical status of an employee should be kept confidential and not be used by the employer or any other party to affect any other aspect of an employment contract.

Medical schemes and health benefits linked to employment should be non-discriminatory. Private and public health financing mechanisms should provide standard benefits to all employees regardless of their HIV status.

Counselling and advisory services should be made available to all employees on their rights and benefits from medical aid, life insurance, pension and social security funds. This could include information on intended changes to the structure, benefits and premiums to these funds.

Risk Management, And First Aid Compensation

Where there can be an occupational risk of acquiring or transmitting HIV infection, appropriate precautionary measures should be taken to reduce such risk, including clear and accurate information and training on the hazards and procedures for safe work.

Employees who contact HIV infection during the course of their work should follow standard compensation procedures and receive standard compensation benefits.

Under conditions where people move for work, government and organizations should lift restrictions to enable them to return to their families and dependents.

People who are in an occupation that requires travel in the course of their duties should be provided with the means to minimize the risk of infection including information, condoms and adequate accommodation.

Protection and Victimization

Persons affected by and believed to be infected by HIV should be protected from stigmatization and discrimination by co-workers, employers or clients. Information an education are essential to maintain the climate of mutual understanding necessary to ensure this protection.

Where employers and employees agree that there has been adequate information and education and provisions for safe work, then disciplinary procedures should apply to persons who refuse to work with an employee with HIV/AIDS.

Grievance Handling

Standard grievance handling procedures in organizations, in labour and civil law that apply to all workers should apply to HIV related grievances and should protect the confidentiality of the employee’s medical information.

Information

The parties should collect, compile and analyze data on HIV/AIDS, sexually transmitted diseases and TB and make it available to the workforce. The parties should co-operate in making available data for monitoring and planning and effective response to the health, human resource, economic and social impact of the HIV epidemic.

Monitoring and Review

Responsibility for monitoring and review of the code and its implementation should lie with the parties to this agreement.

Recognition of Chronic Illnesses and HIV & AIDS as a workplace issue

Chronic illnesses and HIV & AIDS is a workplace issue and should be treated like any other serious illness/condition in the workplace. This is not only because it affects the workplace, but also the workplace, being part of the local community, has a role to play in the wider struggle to limit the spread and effects of the epidemic.
Non-discrimination
In the spirit of decent work and the respect and the respect of human rights and
dignity of the person infected and affected by HIV/AIDS, there should be no
discrimination against workers on the basis of real and perceived status.
Discrimination and stigmatization of people living with Chronic Illnesses and Hiv & Aids inhibits efforts aimed at promoting Chronic Illnesses And Hiv & Aids prevention.

Gender Equality
The gender dimension of HIV & AIDS should be recognized. Women are more likely to be infected and are more often adversely affected by the HIV & AIDS epidemic than men due to biological and socio-cultural economic reasons. The greater the gender discrimination in societies and the lower the position of women, the more negatively they are affected. Therefore, more equal gender relations and the empowerment of women are vital to successfully prevent the spread of HIV infection and enable women to cope with HIV/AIDS.

Healthy work environment
The work environment should be healthy and safe, so far as is practicable, for all concerned parties, in order to prevent the transmission of HIV/AIDS, in accordance with the provisions of the Occupational Safety and Health Code Convention, 1981 (No. 155).

Social Dialogue
The successful implementation of Chronic Illnesses and Hiv & Aids policy and programme requires cooperation and trust between employers, workers and their representatives and, where appropriate, with active involvement of workers infected and affected by the epidemic.

Screening for purposes of exclusion from employment and work processes
Chronic Illnesses and Hiv & Aids screening should not be required of job applicants or persons in employment.

Confidentiality
There is no justification for asking job seekers or workers to disclose their HIV status nor should co-workers be obliged to reveal such personal information about fellow workers. Access to personal data relating to workers' HIV status should be bound rules of confidentiality consistent with ILO's code of practice on the workers' personal data, 1997.

Continuation of employment relationship
HIV infection is not a cause for termination of employment. As with other conditions, persons with HIV related illnesses should be able to work for as long as they are medically fit in appropriate work.

Prevention
HIV infection is preventable. Prevention of all means of transmission can be achieved through a variety of strategies which are appropriately targeted to national condition and which are culturally sensitive.
Prevention could be further achieved through changes in behaviour, knowledge, treatment and the creation of a non-discriminatory environment.
The social partners are in a better position to promote prevention efforts particularly in relation to changing attitudes and behaviours through the provision of information and education, and in addressing socio-economic factors.

Care and support
Solidarity, care and support should guide the response to Chronic Illnesses and HIV & AIDS in the world of work. All workers, including workers with HIV, are entitled to affordable health services.
There should be no discrimination against them and their dependants in access to and receipt of benefits from statutory social security programs and occupational schemes.

15.4 CHRONIC ILLNESS and HIV & AIDS LEAVE

15.4.1 Every employee, who has been in the continuous employment of the Company for
Twelve months or more, shall be entitled to chronic illness leave upon delivering to the Company:
a certificate issued by a medical officer setting evidence in support of the entitlement of Chronic illness leave as is reasonable, having regard to all the circumstances of the case.

15.4.2 Chronic illness leave shall be twelve weeks

15.4.3 Where an employee has completed one year or more continuous service with the company he/she will be granted chronic illness leave with full pay for a period of twelve weeks from the date of stopping work. Such leave refers to the first four confinements after the qualifying period of one year.

15.4.4 An employee who suffers requires extended confinement, shall be granted, in addition to the paid Chronic illness leave to which he/she is entitled in this article, sick leave, and thereafter, such additional leave on full pay not exceeding six weeks, as a medical officer may recommend.

15.4.5 Sick leave: An employee who suffers from chronic/acute illnesses and have exhausted the leave provided for them in item 15.4.1, 15.4.2, 15.4.3 and 15.4.4 shall be entitled to an extended leave of not exceeding (12) months at any given period, such leave may be unpaid subject to existing insurance scheme to which the employee may be a member. This type of leave shall not be unreasonably withheld.

16. **LEAVE WITHOUT PAY**

16.1 An employee who has no annual leave due to him or who wishes to take more leave than is due to him, may be granted unpaid leave. The amount of unpaid leave which may be granted is at the discretion of the Company provided that it may not exceed the number of days which, when added to any annual leave due, would bring the total leave to (12) months.

In the event of an employee taking unpaid leave in terms of this clause the company shall be liable to continue to pay the Company's contributions to the Retirement Fund, Medical Aid Scheme or any other benefit fund.

17. **CAREER DEVELOPMENT LEAVE WITH PAY – COST OF TRAINING**

17.1 (a) Career development refers to an activity which in the opinion of the Company is likely to be of assistance to the individual in furthering his career development and/or the Company in achieving its goals towards localisation. If approved the Company shall pay for the following career development activities:

(i) a course given by the Company;
(ii) a course offered by an Academic/Training Institution;
(iii) a seminar, convention or study session in a specialised field directly related to the employee’s work.

(b) The Company may approve career development leave with pay for any of the activities described in paragraph (a) above. The employee shall receive compensation for travelling time, meals and accommodation during the period spent on career development leave provided for in this article. This amount shall be determined by the Company to be appropriate under the circumstances and may be given to the employee in a lump sum.

(c) Employees on career development leave may be reimbursed for reasonable travel and other expenses incurred by them in addition to (b) above and which the Company may deem appropriate.

17.2 If an employee undertakes a training course in his own time and the Company thinks that it may enable him to do his work better, after approval the Company shall reimburse him the cost of the course after he has completed it satisfactorily.

18. **APPLICATION OF CLAUSE 17**

18.1 Nothing in Clause 17 shall grant a right to an employee to higher pay and/or promotion, which the Union recognises as belonging to the rights of Management.

19. **EXAMINATION AND STUDY LEAVE WITH PAY**

19.1 Paid leave shall be granted for the day on which the examination is to be written.
19.2 Paid leave shall be granted to employees to prepare for examinations on the basis of two days per subject prior to the date of the examination.
19.3 In the event of external examinations a further two days paid leave for travelling shall be granted.
19.4 The maximum total days paid study/examination leave may not exceed 30 days per annum.

20. MATERNITY LEAVE

20.1 Every female employee, whether married or unmarried, who has been in the continuous employment of the Company for twelve months or more shall be entitled to maternity leave upon delivering to the Company:
(a) a certificate issued by a medical officer employed by the Company setting forth the expected or actual date of her confinement;
(b) or
(c) Such other evidence in support of the entitlement of maternity leave as is reasonable, having regard to all the circumstances of the case.

20.2 Maternity leave shall not be less than twelve weeks, so arranged that the employee is allowed:
(a) such periods as she desires not exceeding six weeks before the date of confinement;
(b) a period of not less than six weeks from the date of the confinement.

20.3 Provided that she has obtained the approval from a medical officer employed by the Company, an employee may, at her own option, agree to a period of maternity leave of less than twelve weeks.

20.4 Where confinement takes place without an employee having been granted her entitlement of maternity leave, or where the period of such leave taken before her confinement amounts to less than six weeks, the period of maternity leave after confinement shall, if the employee so desires, be extended so that the total period of such leave amounts to not less than twelve weeks.

20.5 Where an employee has been granted maternity leave and the date of confinement is a latter date than that stated in the certificate or other evidence delivered to the Company as being the date on which confinement was expected, her maternity leave shall be extended to include the period that elapsed between those dates.

20.6 Where a female employee has completed one year or more continuous service with the company she will be granted maternity leave with full pay for a period not exceeding twelve weeks from the date of stopping work. Such leave refers to the first four confinements after the qualifying period of one year. Any additional leave granted in terms of the foregoing clauses would be without pay.

20.7 An employee who suffers any illness arising out of her confinement, shall be granted, in addition to the paid maternity leave to which she is entitled under the provisions of this article, sick leave, and thereafter, such additional leave on full pay not exceeding six weeks, as a medical officer may recommend.

21. FAMILY RESPONSIBILITY LEAVE

21.1 Family responsibility leave may not be accrued.

21.2 For the purpose of this article, immediate family is defined as defined in the Industrial Relations Act 2000.

21.3 Where a member of an employee's immediate family dies, he shall be entitled to leave with pay for a period of up to seven (7) days and not extending beyond the day following the funeral. In special circumstances and at the request of the employee, leave may be extended beyond the day following the day of the funeral but the total number of days granted must be consecutive and not greater in number than those provided above, and must include the day of the funeral.

21.4 If, during a period of annual, sick or compensatory leave, an employee is bereaved in circumstances under which he would have been eligible for leave under clauses 21.2, 21.3, he shall be granted leave and his annual, sick or compensatory leave credits shall be restored to the extent of any concurrent leave granted.
21.5 After expiry of the bereavement leave as stipulated in clause 21.4 a female employee on a regular contract who is the registered wife of a deceased husband, may be granted additional leave with pay for one calendar month or 30 consecutive days mounting period subject to satisfactory confirmation of the bereavement.

22. DUTY LEAVE WITH PAY.

22.1 The Company shall grant leave with pay to an employee for the period of time he is required to attend:

22.2 (i) before a court, judge or magistrate,
(ii) before a government commission of enquiry,
(iii) before the Swaziland National Council,
(iv) before an arbitrator or adjudicator,
(v) for royal duty, and
(vi) any other official call by any other institution or official body duly recognised by the Company

Provided that the employee produces written evidence of his obligation to attend to any of the above duties.

Duty leave must be applied for on the prescribed form, with written evidence attached, preferably three (3) days in advance, or alternatively written confirmation of Royal Duty should be provided on the employees return.

23. TRADITIONAL CEREMONIES AND SPORTING EVENTS.

23.1 Upon written request made by an employee and when operational requirements permit, the Company may grant leave with pay to a reasonable number of employees to participate in traditional ceremonies and international sporting events provided that the period of leave shall not be less than the number of days required, including travel to and from the ceremony or sporting event, as the case may be, and shall not in any case, exceed four weeks.

23.2 For the purposes of clause 22.1, traditional ceremonies shall mean any of the following: [...]
26.1 After the completion of a probationary period either the Company or the employee may terminate a contract of employment by giving the other, in writing, the following minimum period of notice:
   (a) if the period of continuous employment is less than one year – two days for each completed month subject to a minimum of two weeks;
   (b) if the period is more than one year – 24 days for the first year plus four days for each completed year thereafter.

26.2 Either the Company or the employee may terminate a contract by paying the other an amount equivalent to the basic pay which the employee would have earned during the prescribed period of notice.

27 SEVERANCE.

27.1 In the event of the termination of an employee’s services on grounds of the operational requirements of the Company, the employee shall be paid all amounts as provided for in legislation, however the parties may increase any such payments if agreed to by the parties prior to the terminations. Consultations between the parties shall be conducted in accordance to the provisions of relevant legislation.

28 HOURS OF WORK.

28.1 For the purpose of this Agreement, and unless otherwise specified, a week shall consist of seven (7) consecutive days beginning at 00:00 hours Sunday morning and ending at 24:00 hours Saturday. The day is a twenty-four (24) hour period commencing at 00:00 hours.

28.2 The manning, preparation, posting and administration of the shift schedules are the responsibility of the Company.

28.3 Provided sufficient advance notice is given and with the approval of the Company, employees may exchange shifts if there is no increase in cost to the Company.

28.4 Normal hours of work are shown below. They may be varied when necessary. Except where break times are specified, workers should not be allowed to leave their work places for meals or refreshments.

28.5 No employee may be allowed to work continuously for more than 16 hours.

28.6 Monthly payrolls – Day Workers.

   (a) Administrative work 40 hours a week, from 07.30 am to 16.30 pm Monday to Thursday, with a break from 12.30 pm to 1.30 pm. Working hours on a Friday are from 07.30 am to 14.00 pm with a break from 12.00 pm to 1.00 pm.

28.8 Monthly Payrolls – Shift Workers.

   (a) Shift Managers, Supervisors and Maintenance Co-ordinators work 42 hours a week, average a twenty-eight (28) day shift cycle of 12 hour shifts. Shifts are from 06.00 am to 18.00 pm and 18.00 pm to 06.00 am respectively. Employees are not entitled to any breaks.

28.9 Other Payrolls – day workers work 45 hours a week, from 06.45 am to 17.00 pm with a 30 minute break from 12 noon to 12.30 pm (8 hours a day) i.e. Monday to Thursday, Friday from 06.45 am to 14.00 pm with a break from 12 noon to 12.30 pm. The above hours include a 10-minute tea break in the morning and a 10-minute tea break in the afternoon. If a tea break is forfeited because of pressure of work no additional payment will be made. An additional period may be given at a later stage.

28.10 Other Payrolls – Shift Workers.

   (a) Continuous shift workers work 48 hours a week 4 x 12 hour shift from 06.00 am to 18.00 pm and 18.00 pm to 06.00 am. Employees are not entitled to any breaks.

29 STANDBY ORDER.
29.1 An employee placed on standby shall be required to be at a place and time stipulated by Management outside normal working hours and shall receive an allowance in accordance with Company policy.

30 **TIME AND ATTENDANCE**

30.1 All employees will record their presence when entering their premises and their absence when exiting the Company premises by means of a clocking control system.

30.2 Reasonable time is allowed for walking between the access control system and the place of work.

30.3 An employee may not record any work time but his own, or permit another person to record working time for him.

30.4 All overtime worked will be either pre-authorised or post-authorised by the relevant Line Manager/Supervisor.

30.5 Any substitutions or changes to working hours must be done on the attendance system by the relevant Line Manager/Supervisor.

31 **PAY**

31.1 An employee shall be paid for services rendered in accordance with the conditions of employment and in a manner described therein for each of the Company payrolls.

31.2 The Social Partners shall make detailed pay regulations and procedures for giving effect to the provisions of this Agreement.

31.3 Where a wage/salary increment and a salary revision are effected on the same date, the salary increment shall be applied first and the resulting rate shall be revised in accordance with the salary revision.

31.4 If, during the term of this Agreement, a new job grading system is established and implemented by the Company, the Company shall, before applying rates of pay to new grades resulting from the application of the system, negotiate with the Union the rates of pay and the rules affecting the pay of employees on their movement to the new grades.

31.5 In addition to pay for services rendered under clause 31.1 all employees, with the exception of expatriate employees, who have completed one year or more of full-time employment with the Company shall receive a service allowance at 1-12 years of 3 cent per hour per year of service.

32 **ACTING ALLOWANCE**

If an employee acts in a more senior position to his own, for at least one hour, he shall be paid an allowance equivalent to the difference between the employee’s basic pay and the basic pay attached to the position in which he acts.

33 **SHIFT ALLOWANCE**

33.1 This is an additional amount payable to shift workers as compensation for the inconvenience of shift work, and is calculated at 15% of basic pay for day shift and 20% for night shift.

33.2 A pro rata allowance is payable if an employee is absent, on leave or sick during part of the week.

34 **SHIFT SUNDAY ALLOWANCE**

34.1 When a shift worker works on a Sunday he is paid 2 times his basic rate of pay.

35 **STANDBY AND CALL OUT ALLOWANCE**

35.1 A day worker who is required to be on standby for periods of not less than and not more than seven (5) days at a time shall be paid a standby allowance of 20% of basic pay.
35.2 If called out, an employee shall be paid at normal overtime rates, with a minimum payment equivalent to 3 hours work plus one hour travelling time, whether the employee was on standby or not.

35.3 An employee who is required to be on standby on a recognised public holiday shall be paid double his basic rate.

35.4 No standby payment shall be granted if an employee is unable to report for duty when required to do so.

36 ADVERSE WORKING CONDITIONS

36.1 An employee, who works under adverse conditions from time to time, may be paid an allowance equivalent to 3 hours basic pay. In such cases the head of department must approve the payment.

37 OVERTIME

37.1 Overtime will be paid at the rate of 1.5 times basic salary for all days with the exception of Sundays and Paid Public Holidays, which will be paid at the rate of 2 times basic salary.

38 HOUSING

38.1 With the exception of its legal and contractual obligations, the Company accepts no obligation to house its employees. But within the limitations of its resources, it will attempt to accommodate those who live a long distance from their places of work. Housing allocations shall be made according to the guidelines and regulations which govern the various housing committees, the number and composition of which shall be decided by the Company from time to time provided that the Union shall be called upon to consult on each committee.

38.2 When the employment of an employee who occupies Company housing is terminated for disciplinary reasons, he is required to vacate the housing within three months of termination. An extension may be authorised by the General Manager depending on the merit of a specific case. For termination of employment for reasons other than disciplinary, the employee is required to vacate Company housing within the period agreed between the employee and the Personnel Department.

39 EDUCATION ALLOWANCE

39.1 The Company shall pay educational allowances for not more than three (3) of an employee’s children in one family in one year as follows: [....]

No education allowance is payable for a child who repeats a year in the same form or extra curricular tuition, guidance or for cultural or recreational activities. The amounts mentioned above are all inclusive and no additional allowances will be made in respect of registration fees, building, and maintenance or book fees. The normal requirement of proof of registration must be adhered to.

40 MEDICAL BENEFITS

40.1 The Company will provide free first aid and medical attention at its clinics for the employee and his dependents described in the following manner:

(a) If he is married under statutory law, the wife to whom he is married under statutory law, and any dependant children of either spouse by a previous statutory marriage registered with the personnel department.

Or

(b) If he is married under customary law, his wife and any registered dependant children.

40.2 The Company will reimburse an employee the cost of any treatment which has been received by him or her (but not his or her dependants) at a public hospital in Swaziland (e.g. Government Hospital Mbabane, Raleigh Fitkin Memorial Hospital Manzini).

(a) Provided that where an employee is admitted to public hospital the amount reimbursed should not exceed the scale of charges for accommodation and treatment in a public ward of a Government Hospital.
(b) Where an employee is admitted to a private hospital (e.g. Mbabane Clinic) the Company will reimburse the employee by an amount equivalent to the scale of charges for accommodation and treatment in a public ward of a Government Hospital.

40.3 The Company is a member of a medical aid scheme and pays 65% of the subscriptions of employees who join the scheme. Employee membership to the scheme is voluntary. Further schemes may be investigated and agreed by both parties from time to time.

Employees or their dependants as defined in clause 43.01 above, who need to travel for medical reasons may travel on the Company's scheduled bus runs or, if this is not possible, a car shall be provided. If in the opinion of the senior member of the medical staff on duty, a patient is so badly injured or ill that he must be moved to a Company clinic or to a hospital immediately, and it would be unsafe to move him by car, he may be moved by ambulance. The Company will not charge for use of transport for medical reasons so long as the journeys are properly authorised and justified in the opinion of the medical staff.

41 TRANSPORT TO AND FROM WORK.

41.2 The Company will provide transport by bus for employees between place of residence and the company at due times.

41.3 This transport is provided in employee's own time and not in the official paid hours of the employee. When an employee is called out to work outside normal hours, the Company will provide him with transport between his house and place of work.

42 LONG SERVICE AWARDS.

42.1 All permanent employees will receive a long service award after continuous service of a period indicated below, of an appropriate amount as follows:

[...]

The Company will pay any tax applicable on the above awards in order that the employee receive the monetary value of the award in full.

43 SECURITY CHECKS AND CARDS.

43.1 Upon suspicion, the Company may conduct security checks upon any employee on Company premises and at any time provided that the time of the check shall be considered reasonable under the circumstances. Upon request from a security guard or a representative of Management, an employee shall hand over his employee card and safety clearance for inspection.

44 STATEMENT OF DUTIES.

44.1 Upon his own written request and when a complete and current statement of his duties is available, an employee shall be entitled to a copy of his statement of duties not more often than once a year.

45 SUSPENSION.

45.1 Notwithstanding any other procedure which may be in force at any time, when a union member is suspended from duty for any reason, the Company shall notify the Union that such suspension has occurred.

46 ILLEGAL STRIKES & LOCKOUTS.

46.1 The Industrial Relations Act provides penalties for engaging in illegal strikes. Disciplinary action may also be taken, which will include penalties up to and including discharge, for participation in an illegal strike.

46.2 The Industrial Relations Act provides penalties for the unlawful lockout of employees. Any employer, who locks out, other than in compliance with the Industrial Relations Act, is liable to be fined and is also obliged to pay employees whatever they may have lost by way of wages and allowances etc., during the period involved.

47 SAFETY AND HEALTH.

47.1 The Company shall continue to make all reasonable provisions for the occupational safety and health of employees. The Company will welcome suggestions on the
subject from the Union, and the parties undertake to consult with a view to adopting
and expeditiously carrying out reasonable procedures and techniques designed or
intended to prevent or reduce the risk of employment injury and, to further establish
safety committees to that effect.

48 GRIEVANCE PROCEDURE.

48.1 The Company agrees that every employee complaint must be dealt with promptly
and fairly in accordance with the procedure laid down in appendix B.

48.2 The Union agrees that the grievance procedure shall be used to resolve disputes
and employee complaints and that it will not be used for any other purpose for which
there is another avenue of redress, including but not limited to an appeal from a
disciplinary action.

49 EMPLOYEE’S PERSONAL FILE.

49.1 Upon written request of an employee, the personal file of that employee may be
made available once per year for the employee’s examination in the presence of an
authorised representative of the Company.

50 NEGOTIATING PROCEDURE.

50.1 For collective bargaining to be conducted realistically and responsibly, it is necessary
for both parties to have adequate information on matters being discussed. The
Company is prepared to meet all reasonable requests from the Union for information
relative to planned negotiations.

In particular, the Company shall make available in convenient form, information
pertaining to the company financial position and published in annual reports and
other relevant documents.

51 DISCIPLINE.

51.1 The Union recognises that it is Management who institutes disciplinary action when
this action is made necessary, and the Company agrees that no disciplinary action
may be taken unreasonably or unfairly which is not in accordance with the Company
Disciplinary Code and Procedure.

51.2 An employee who feels that he has been disciplined unfairly may appeal against this
action.

51.3 The minutes and statements pertaining to any disciplinary enquiry shall be made
available to the Union who shall treat information contained in these documents in
the strictest confidence.

51.4 The introduction of written evidence that does not comply with the formal disciplinary
procedure may not be used to affect progressive penalties.

52 ESSENTIAL SERVICES.

52.1 The Union and the Company both agree that employees engaged in essential
services are those employees engaged in services considered to be essential.

52.2 Should any dispute be limited to Designated Employees alone and involve
negotiations for a Collective Agreement or a memorandum of understanding as the
case may be, the parties agree that the dispute may ultimately be submitted jointly to
third party adjudication or to the arbitration of the Industrial Court.

52.3 In the event of a strike or lockout, the Union will ensure that, on instruction from
Management, the factory and all moving plants on the estate, except for plants
designated essential services, will be shut down in accordance with standard
operating and safety procedures and that all plants will be in a safe condition before
employees leave their place of work.

53. GRIEVANCE PROCEDURE & DISCIPLINARY CODE & PROCEDURE

53.1 The Grievance Procedure and Disciplinary Code and Procedure annexed hereto
marked “C” and “D” respectively shall be observed by the parties.
54. **ADDRESS FOR SERVICE OF DOCUMENTS**

54.1 For the purpose of this Agreement and any Agreement pursuant to this Agreement, including the giving of notices and the serving of legal process, the Company and the Union choose their address for service of documents as follows:

54.2 Either the Company or the Union may at any time change their address for service of documents by notice in writing, which shall become effective 5 days after the giving of such notice.

54.3 Any notice given in connection with this Agreement or any pursuant to this Agreement shall:

   (a) be delivered by hand, or

   (b) be sent by prepared registered post to the address as chosen by the parties.

55. **CONFLICT OF INTERPRETATION**

55.1 In the event that the Union and the Company cannot agree as to the true meaning and intent of any of the provisions of this Agreement, its appendices and annexes, each party shall be required to show by means of evidence that the interpretation made by the other is incorrect. In the event of a continued disagreement, both parties agree to submit the matter to an independent third party for adjudication, CMAC (Conciliation Mediation Arbitration Commission) or the Industrial Court as the case may be.

56. **DURATION**

56.1 This Agreement shall come into force on the _______________ and shall remain in force until the _______________.

Signed on this _____ day of ___________ (year) at (Place).
GOVERNMENT OF INDIA
MINISTRY OF RAILWAYS
(RAILWAY BOARD)

No. 2005/H-I/7/6

The Chief Medical Directors
All Indian Railways
CMO/Konkan Railway
Sr. Proff. RSC/BRC.

New Delhi, dated 05.01.2005

Sub:- HIV & AIDS- Strategy of Management

The subject of prevention of HIV infection and other strategies of management of HIV positive persons was discussed in Railway Board on 22.12.04 where the Dy CMD/Nodal Officers of all the 16 zones participated.

After discussion following strategies were worked out which require to be strictly followed and implemented in all the zones.

Targets: four targets were set.
1. To have correct information about number of persons infected by HIV virus.
2. To take all the steps to prevent spread of HIV virus from infected persons to normal persons.
3. To take care of HIV positive persons adequately so that their period of "HIV positive but not yet developed AIDS syndrome" become longer and longer.
4. To treat AIDS cases adequately.

Target 1:- To have correct information about Number of persons infected by HIV virus.

Following steps are to be taken:
1.1 To ensure that adequate testing facilities for HIV infection is available at various Railway hospitals.
1.2 To do more number of screening test for HIV positivity after proper counselling.
1.3 Proper uro-genital clinic to be started in various Railway hospitals.
1.4 Out put given by VCTC should be properly monitored. Activities done by each of the person of VCTC should be assessed.
1.5 Sentinel survey should be done as below:

(a) Once a year – 1st one in Jan/Feb 2005
(b) Number of samples for Major Hospitals = 1000 samples
    Medium Hospitals = 500 samples
    Small Hospitals = 200 samples
(c) May be done for all samples on fixed days/week, which
    should rotate, or all the days of one week or two weeks.
(d) Doctors and Paramedical other than Pathology Department
    should not know about it i.e. which day, which week etc. –
    when the survey is being conducted.
(e) All the blood samples are to be taken in plain vial with serial
    number only identity of persons giving blood should not be
    available. For convenience of testing 10 samples be added
    up for testing of HIV.
(f) Percentage of people positive for HIV to be assessed.

**Target No.2**

To take all the steps to prevent spread of HIV virus from HIV
infected person to normal persons.

Following steps are to be taken

2.1 **Education/Training:**
   
   a) To all doctors and paramedical staff. Hundred
      percent coverage is a must.
   
   b) Massive health education drives to be given for
      Railway employees and their family members.

2.2 **To adopt universal aseptic precaution in Railway
Hospitals & Health Units**

   Hospital acquired infection control committee to be
   made operational. Proper system to be introduced in
   all the Railway Hospitals.

2.3 Special precaution to be taken for blood transfusion
    and blood product transfusion.

2.4 **Transmission from parents to child:** On this front,
    steps to be taken to prevent parent to child
    transmission with a target at nearly zero percent.
2.5 Availability of condoms in Railway Hospitals and Health Units:
(a) Now the condom will be available through District Health Officer of State Govt. where the Railway/Health Unit is physically located.
(b) Proper annual requirement/demand to be placed before District Health Officer of the State.
(c) To collect condom as per the demand placed and to arrange distribution through Railway Hospital & Health unit.

2.6 Disposal of Hospital waste:
Following two methods are recommended:
a) Where centralized collection system has been introduced by local civil authority – there Railway hospitals should join the system.
b) In other places one room in the corner of the hospital/health unit should be earmarked for sterilizing all the hospital waste by High Pressure Steam Sterilization. After this the sterile waste can be disposed off as domestic waste.

2.7 Post exposure treatment:
For this following steps are to be taken:
a) To educate all doctors and staff – what to do in the event of needle prick injuries and other injuries that took place in the hospital.
b) Minimum stock of A.R.T. medicines to be stored in all Hospitals and Health Units.

Every attempt should be taken to replace them by fresh stock long before expiry date but if not possible they are to be sanctioned written off if required.

c) Some nominated doctor/doctors in each division to be trained in the subject of post exposure treatment for prevention of HIV infection and they should guide local doctors about any such unfortunate incidence if takes place.
Target No.3

To take care of HIV positive persons adequately so that their period of “HIV positive but not yet developed AIDS syndrome” becomes longer and longer

For this following steps are to be taken

3.1 All HIV positive persons to be given a code No.

   a) For that Railway code of Zone followed by Division and serial case No. of that division to be used.
   b) When a HIV Positive person is transferred from one place to another place – New No. to be given in the new zone and against old No. to be mentioned that transferred to new area and new code No.
   c) Decoding should be possible only at Divisional level.

3.2 All HIV positive persons to be allotted to one or another medical officer. The Railway medical officer should behave like parents to these HIV positive persons.

3.3 All HIV positive persons are to be regularly followed up both clinically and also by various laboratory tests as recommended and should be given proper medial treatment including ART as per the latest recommendations.

Target No.4: To treat all AIDS cases adequately

All AIDS cases are required to be treated adequately as per latest recommendations.

All the above directions are required to be implemented properly in all the zones. Quarterly return on HIV/AIDS will be evolved shortly to watch programme implementation.

(Dr. D. K. Das)
Director General/RHS
Lafarge

Agreement on corporate social responsibility and international industrial relations signed between the Lafarge Group and the International trade union federations IFBWW, ICEM and WFBW to promote and protect worker’s rights

The IFBWW, International Federation of Building and Wood Workers, is a Global Union Federation organising more than 10.5 million members in 281 trade unions in 125 countries around the world in the building, building materials, wood, forestry and allied industries.

The ICEM, International Federation of Chemical, Energy, Mine and General Workers' Unions, is a Global Union Federation organising workers in the Chemical, Energy, Mine and related Process Industries including Cement, Glass and Ceramics. ICEM unites 425 member trade unions from 121 countries representing in total around 20 million workers in these industries.

The WFBW, World Federation of Building and Woodworkers Unions, represents 1.5 million workers in the building and wood industry and who are organised in 55 unions in 41 countries all over the world.

Lafarge is the world leader in building materials, holds top-ranking positions in all four of its Divisions: Cement, Aggregates & Concrete, Roofing and Gypsum. Lafarge employs 77,000 people in 75 countries.

PREAMBLE

Lafarge believes that there's a link between social and economic progress. The interests and success of Lafarge and its employees are interdependent. Lafarge commits itself to involve its employees directly in the Group future through an open dialog; Lafarge recognizes that employees may choose to be represented by elected employees and/or trade union organizations.

The Lafarge philosophy is to develop and maintain positive relationships with its employees in accordance with the Lafarge Principles of Action: “Lafarge responsibility is as much about complying with local and international laws and standards as it is about aligning our actions with our values. Respect for the common interest, openness and dialog, integrity and commitment are the main ethical principles of the Group and of the employees”.

Trade unions believe that decent wages and working conditions, a meaningful job with prospects, a safe and healthy working environment, the right to join free trade unions and the right to collective bargaining are preconditions for good industrial relations.

The signatories consider that this agreement is based on the joint commitment to respect human and social rights and to achieve continuous improvement within the areas of working conditions, industrial relations, health and safety standards in the workplace and environmental performance.

The signatories recognize that the subsidiarity principle is a key performance management process within the Group; therefore the signatories respect the principle that industrial relations issues are best resolved as close as possible to the workplaces.

Lafarge considers respect for worker's rights to be a crucial element in sustainable development. Lafarge will seek to use the services of those trading partners, subcontractors and suppliers, which recognise and implement the principles listed below.
FUNDAMENTAL PRINCIPLES

Lafarge commits itself to comply with the International Labour Organization (ILO) Declaration on Fundamental Principles and Rights at Work, the ILO Tripartite Declaration of Principles concerning Multinational Enterprises and Social Policy, the United Nations Global Compact and also the Organisation for Economic Cooperation and Development Guidelines for Multinational Enterprises.

No forced labour
It is prohibited to make direct or indirect use of forced labour, including bonded labour and involuntary prison labour (ILO Conventions 29 and 105).

No discrimination in employment
All workers, whatever their workplace, shall have equality of opportunity and treatment regardless of their ethnic origin, colour, gender, religion, political opinion, nationality, social origin or other distinguishing characteristics. Workers shall receive equal pay for work of equal value (ILO Conventions 100 and 111). Migrant and posted employees must be ensured at least the same rights and conditions as the national workforce working in the company.

No use of Child labour
It is prohibited to use child labour in any form whatsoever: only workers above the age of 15 years, or over the compulsory school-leaving age if higher, shall be employed (ILO Convention 138). In view of their age, children under the age of 18 shall not perform work, which, by its nature or the circumstances in which it is carried out, is likely to harm the health, safety or morals of children (ILO Convention 182).

Freedom of association and right to collective bargaining
Lafarge should uphold the freedom of association and the effective recognition of the right to collective bargaining (ILO conventions 87 and 98). The Lafarge Group guarantees that workers representatives shall not be discriminated against (ILO Convention 135).

Living wages
Workers shall be paid wages and benefits for a standard working week that should be at least at the level of current national legislation or collective agreements, as applied in the industry/sector concerned. All workers must be provided with clear verbal and written information about wage conditions in their native language.

Deductions from wages, unless permitted under national law, shall not be made under any circumstances without the express permission of the worker concerned.

Working hours
Working hours shall comply with appropriate national legislation, national agreements and industry/sector standards. Overtime shall not be excessive and shall always be remunerated at a premium rate. All workers shall be given a minimum of a one day weekly rest period.

Health, safety and working conditions
A safe and healthy working environment shall be provided (ILO Convention 155). Best occupational health and safety practices shall be followed and shall be in compliance with the ILO Guidelines for Occupational Health Management Systems. All workers shall be given training on occupational hazards and shall have the means of preventing them.

The signatories undertake to raise awareness of the HIV/AIDS problem and of the prevention programme in compliance with the ILO HIV/AIDS code of practice.

Skills training
All workers shall have the opportunity to participate in education and training programmes including training to improve workers’ level of skills so that they can use new technology and equipment. Whenever possible, the Lafarge Group in cooperation with trade unions shall develop workers’ training with a view to improving their level of skills and ensuring that they participate in their career development and increase their employability.
IMPLEMENTATION AND FOLLOW UP
The Lafarge Group will provide information concerning this agreement in written or verbal form in all countries where this agreement is applicable.
All signatories are strongly committed to the most widespread dissemination possible of the content of this agreement throughout the Lafarge operations.
A reference group consisting of representatives of the Lafarge management and the signatory international federations shall meet at least once a year, or whenever necessary, to follow up and review the implementation of this agreement.
The Lafarge Group shall make available to the reference group the resources needed for its mission.
The annual review of the present agreement should be incorporated into the Lafarge Group's reporting with the consent of all signatories.
All signatories agree that any difference arising from the interpretation or implementation of this agreement will be examined jointly, for the purpose of making recommendations to the signatories concerned.

DURATION
This agreement shall remain in force unless otherwise agreed by any party giving three calendar month's notice, in writing, to the other.

The present agreement may be revised at the request of one of the signatories no later than four years after it has been signed.

Paris, September 12th, 2005
The Lafarge Group, Christian Herrault
The IFBWW, Anita Normark
The ICEM, Fred Higgs
The WFBW, Stefaan Vantourenhout