WORKPLACE POLICY ON HIV AND AIDS, TB and OTHER OPPORTUNISTIC ILLNESSES FOR THE TOURISM INDUSTRY IN ZIMBABWE
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2014

Facilitated by the Ministry of Tourism; the Zimbabwe Council on Tourism (ZCT) and the International Labour Organisation (ILO)

ACKNOWLEDGEMENTS

This publication is a result of the collaboration and effort of various stakeholders in the Tourism Sector including the following:

- The Ministry of Tourism
- The Zimbabwe Council on Tourism (ZCT)
- The Zimbabwe Tourism Authority (ZTA)
- Zimbabwe Catering and Hotel Workers Union
- Hospitality Association of Zimbabwe (HAZ)
- Catering Employers Association of Zimbabwe
- Safari Operators Association of Zimbabwe
- Tour Operators Association
- Airlines Association
- Hunters Association of Zimbabwe
- National AIDS Council (NAC)
- Ministry of Health and Child Welfare (MOHCW)
- Employers' Confederation of Zimbabwe (EMCOZ)
- Zimbabwe Congress of Trade Unions (ZCTU)
- The International Labour Organisation (ILO)

* Special thanks to the ILO for providing technical assistance and financial support to the process.
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FOREWORD

The development of the *Workplace Policy on HIV and AIDS, TB and Other Opportunistic Illnesses for The Tourism Industry In Zimbabwe* is a welcome progress for the Tourism and Hospitality Industry. The collaborative approach by all stakeholders in the process emphasises the growing awareness amongst all partners that the challenges of HIV and AIDS can only be successfully addressed by working together.

The tourism sector is one of the key and fast growing sectors in Zimbabwe contributing to economic growth. It employs a diverse workforce with a high employee turnover. Generally the sector is associated with fun and pleasure; with easier access to sex and availability of drugs and alcohol – all elements that could lead to higher probability of increased risk behaviours. In addition, tourism offers unique employment opportunities for young, low-skilled and migrant workers.

This policy document will guide our interventions as an industry, and also serves as an expression of our commitment and determination to face HIV and AIDS, not only as medical and health problems, but also to address them as cultural, social and economic issues that affect all sectors of our society.

Subsequent, with the guidance of this policy document, HIV and AIDS programmes will be implemented at sectoral, ministerial and enterprise levels. It important that we run programmes that: encourage workers to go for HIV testing and counselling and know their HIV status; prevent new HIV infections; address issues of stigma and discrimination experienced by people living with HIV in the workplace; and promote access to prevention and treatment services; amongst other things.

Ultimately, as an industry, we are aiming to contribute to the reduction of HIV and AIDS and its impact in the country. We want to promote tourism in Zimbabwe and become drivers in promoting healthy messages awareness raising amongst our key stakeholders:

- workers in the hospitality and tourism industry
- the local community which directly or indirectly interacts with the sector
- tourists

Together, we will win the fight against HIV and AIDS.

Hon. Walter Muzembi  
Minister of Tourism  
October 2014
ACRONYMS

AIDS  Acquired Immune Deficiency Syndrome
HIV   Human Immunodeficiency Virus
HTC   HIV Testing and Counselling
IEC   Information, Education and Communication
ILO   International Labour Organisation
NAC   National AIDS Council
PEP   Post Exposure Prophylaxis
SADC  Southern African Development Community
STI   Sexually Transmitted Infection
TB    Tuberculosis
VCT   Voluntary Counselling and Testing
ZNASP Zimbabwe National AIDS Strategic Plan national strategy
GLOSSARY OF TERMS

Affected person: One whose life has been affected in any way by HIV and AIDS.

AIDS: The acquired immune deficiency syndrome, caused by HIV is a cluster of medical conditions, often referred to as opportunistic illnesses and cancers that arise when the immune is severely weakened.

Antiretroviral therapy: The holistic treatment of HIV by taking ARV drugs as well as understanding the disease and its treatment, preparing to adhere to ARV regimens, ensuring proper nutrition, psychosocial support and palliative care, and caring for the care givers of people living with HIV.

Confidentiality: Keeping private information about someone, for example a patient or client, obtained in the course of employment or duty.

Counselling: An interpersonal interaction between a client presenting with a problem, that enables the client to talk about, cope and deal with the problem presented in an atmosphere of trust and acceptance and confidentiality.

Destination Access: The various modes of transportation that are used to reach tourist destinations and their dispersal.

Discrimination: Treatment or consideration of making a distinction in favour of or against a person based on his/her HIV status.

Employee: A person who is hired to provide services to another individual/company/organisation in exchange for compensation and who does not provide these services as part of an independent business.

Employer: A person or organisation employing workers under a written or verbal contract of employment, which establishes the rights and duties of both parties in accordance with the national law and practice.

Gender: The difference in social roles and relations between men and women. Gender roles are learned through socialization and vary widely within and between cultures. They are affected by age, class, race, ethnicity, and religion and by geographical, economic, cultural and political environments.

HIV testing: Any direct analysis of the body fluid of a person to determine the presence of HIV or antibodies to HIV or any indirect method, other than the testing of blood or other body fluid, through which an inference is made as to the presence of HIV.
**Human Immunodeficiency Virus (HIV):** A virus that weakens the body’s immune system, ultimately causing AIDS.

**Key populations:** groups of people that are at the greatest risk for HIV infection

**Mainstreaming:** The process of assessing the implications of HIV and AIDS of any planned action, including policies or programmes, in all areas and at all levels. It is a strategy for making HIV and AIDS an integral dimension of the design, implementation, monitoring and evaluation of policies and programmes.

**Reasonable Accommodation:** Any modification or adjustments to a job or to the workplace that is reasonably practicable and enables a person living with HIV or AIDS to have access to or participate or advance in employment.
1 PREAMBLE

The Tourism and Hospitality Industry is a diverse sector encompassing accommodation, destination access and tourist activities. It cuts across hospitality, tour operators, passenger transport operators, crafts and artifacts manufacturing and retail, as well as tourist information services.

The tourism sector can play a key role in the response to HIV and AIDS, tuberculosis (TB) and other opportunistic illnesses. This sector is characterized by a large network of people and operators that interact with each other across sectors and borders thereby increasing risk of exposure.

Having recognised the impact of HIV and AIDS, the sector commits to making a meaningful contribution towards reducing the impact of HIV and AIDS, TB and other opportunistic illnesses in Zimbabwe.

The Tourism and Hospitality Industry will therefore treat HIV and AIDS, TB and other opportunistic illnesses like any other serious illness or health condition in the workplace, in accordance with the Recommendation Concerning HIV and AIDS and the World of Work, 2010 (No. 200.)

This policy is guided by the following principles:

- Recommendation Concerning HIV and AIDS and the World of Work, 2010 (No. 200)
- The SADC Code of Conduct on HIV and AIDS and Employment (1997)
- Statutory Instrument 202 of 1998 (SI 202/98)
- Labour Statutory Instrument 64/2008 – Labour Relations (General (Amendment) Regulations.

These principles shall be observed when enterprises are designing their workplace policies and programmes. Enterprise level policies and programmes should be developed with full participation of the employer and employee representatives at Works Councils, with input from the infected and affected.

Through the NECs, the industry shall seek to improve the quality of life of the infected and the affected employee as well as to mitigate the socio-economic impact of HIV and AIDS at the workplace.
2 AIM and SCOPE OF THE POLICY

The objective of this policy is to set standards for the effective management of HIV and AIDS, TB and other opportunistic illnesses that apply to all stakeholders within the Tourism and Hospitality Industry.

This policy applies to all current and prospective employers and employees of the Tourism and Hospitality sector. The policy covers all workers working under all forms of arrangements, and at all workplaces, formal and informal, including persons in any employment or occupation, those undergoing training including interns and apprentices, job applicants, and suspended workers in economic activity within the sector.
3 LEGAL and POLICY FRAMEWORK

This policy draws from various global, regional and national commitments to combat HIV and AIDS and is subject to the following legal and policy frameworks.

International
1. Recommendation Concerning HIV and AIDS and the World of Work 2010, (No. 200)
2. ILO Code of Practice on HIV and AIDS and the world of work (2001) – emphasises on:
   (i) Confidentiality
   (ii) Continuation of employment relationship
   (iii) Issue of rights
   (iv) Testing, care and support
3. United Nations General Assembly Special Session on HIV and AIDS (UNGASS) Declaration which emphasises on:
   (i) Multi-sectoral approach
   (ii) Access to essential commodities (e.g. Male and female condoms)
   (iii) Access to Voluntary Counselling and Testing
   (iv) Access to highest attainable treatment

Regional
1. The SADC Code of Conduct on HIV and AIDS and Employment (1997) - The code represents the common standard by which countries in the SADC region should deal with the rights and duties relating to HIV, AIDS and Employment.
2. Maseru Declaration – emphasises on:
   (i) Accessibility to ART
   (ii) Mitigation of HIV and AIDS Impact
   (iii) Intensifying Resource Mobilisation
   (iv) Strengthening Monitoring and Evaluation

National
1. The Labour Act (Chapter 28:01)
   This Act defines the fundamental rights of employees, unfair labour practices, regulates conditions of employment, negotiations, scope and enforcement of collective bargaining agreements and provides for the prevention of unfair labour practices, among others. Sub-section (i) of section 5 of the Labour Act includes non-discrimination on the basis of HIV status.
This instrument covers the prevention and management of HIV and AIDS in the workplace. It is meant to ensure non-discrimination of HIV infected employees and establishes the rights and responsibilities of both employers and employees.

The national policy paved way for the establishment of the National AIDS Council to coordinate the national response.

This national strategic plan outlines the “three ones” which are:

(i) One agreed HIV and AIDS action framework that provides the basis for co-ordinating the work of all partners.
(ii) One national AIDS co-ordinating authority with a broad-based multi-sectoral mandate, and
(iii) One agreed country-level monitoring and evaluation system.
4 KEY PRINCIPLES

The policy document is guided by the following key principles:
• Recognition of HIV and AIDS, TB and other opportunistic illnesses as a workplace issue
• Non-discrimination
• Gender equality
• Safety and Healthy working environment
• Social dialogue
• Screening for purposes of employment
• Confidentiality
• Continuation of employment relationship
• Prevention
• Treatment, Care and Support
5  POLICY OBJECTIVES AND STRATEGIES

1.1 Recognition of HIV and AIDS as a Workplace Issue

Policy Statement
The Tourism and Hospitality Sector recognizes that HIV and AIDS is a serious public health, social and economic problem, greatly affecting the sector and requiring the commitment of all stakeholders – employers, employees, clients and guests - to collectively address the challenge.

We acknowledge that HIV and AIDS impacts on human rights, personal freedoms and gender equality for stakeholders, in particular workers, their families and immediate dependents and the community at large.

Strategies
It is therefore imperative for the sector to:
• Formulate and implement sound HIV and AIDS workplace policies.
• Allocate and avail adequate financial and non-financial resources to enable the implementation of HIV and AIDS policies and programmes.
• Promote active participation of stakeholders in empowering the individual, organizations and the community in addressing the challenge of HIV and AIDS, through:
  o Education and awareness programmes, including peer education.
  o Facilitation of access to HIV Testing and Counselling (HTC) services.
  o Facilitation of access to antiretroviral therapy (ART.)

5.2 Non Discrimination on Basis of HIV Status

Policy Statement
Workplace policies, programmes, structures and environment should ensure observance of human rights and dignity. There should be no stigmatization and or discrimination of clients, guests and employees, in particular job seekers and applicants, on the grounds of their HIV status, real or imagined.

Strategies
• Enforce the rights of all stakeholders (employees, employers, clients and guests) to protect them against discrimination and stigmatization as prescribed by relevant legislation.
• Ensure employers provide employees with access to, and are aware of, the provisions of the Statutory Instrument 202 of 1998 and other relevant industrial statutes.
• Engage in fair labour practices and prohibit HIV screening or use of known or perceived HIV status for the purposes of hiring, promotions, transfers, dismissals and retrenchment.
• Provide education for employers and employees to identify and manage workplace behavior which discriminates against employees living with HIV and AIDS.

5.3 Gender Equality

Policy Statement
This HIV and AIDS policy is sensitive and responsive to the different needs of men and women. The policy promotes the protection of their sexual and reproductive health, whilst prohibiting gender-based violence and harassment (both sexual and non-sexual) in the workplace.

Strategies
• Adopt a clause prohibiting gender-based violence and harassment in the organizations’ codes of conduct.
• Provide sexual and reproductive health education on the particular needs of men and women, including specific information for targeted groups such as young people.
• Disseminate information to sensitize employees on gender equality at all levels of an organization.
• Discourage employers from discriminating on the grounds of gender.
• Empower employees through education, particularly young women and men, to protect them from practices which make them vulnerable.
• Mainstreaming gender in all HIV and AIDS programmes.

5.4 Safe and Healthy Work Environment

Policy Statement
Employers should create a safe and healthy work environment that prevents transmission of HIV in the workplace. Safety and health measures should be put in place to reduce vulnerability and prevent new exposures and re-infection of employees.

Strategies
• Conduct education and disseminate information to all employees and their families on:
  o healthy living & nutrition advice
  o modes of transmission and measures to prevent exposure and new infections
- Importance of TB screening and treatment literacy
  - Establish rules and procedures with respect to exposure at the work place.
  - Ensure adequate provision of first aid kits and protective clothing, equipment, and sanitary facilities for all employees.
  - Identify and train first aiders, including on post-exposure prophylaxis (PEP) services.
  - Provision of recreational facilities/activities at the workplace and encourage all employees to participate.

5.5 Social Dialogue

Policy Statement
There should be open dialogue and transparency between employers and employees in order to create an enabling environment for combating HIV and AIDS in the workplace. Implementation of policies and programmes on HIV and AIDS should be based on cooperation and trust among employers, employees, their representatives, and the NECs, with the active involvement of persons living with HIV.

Strategies
- Establish communication avenues in order to allow employees to be open about their status to the employer and to peers.
- Institute a viable HIV and AIDS/Wellness Committee comprised of both employers and employees.
- Appoint a focal persons whose mandate shall be to promote and implement all HIV and AIDS programmes.
- Promote meaningful and voluntary involvement of People Living with HIV and AIDS.

5.6 No Screening for Purposes of Exclusion from Employment

Policy Statement
Employees and job applicants shall not be directly or indirectly screened for HIV before and during employment. However, they are encouraged to voluntarily participate in HTC and TB screening programmes. Routine fitness for duty medical examination shall apply to all employees or job applicants irrespective of HIV status.
Strategies
• To promote adherence to Statutory Instrument 202 of 1998 which stipulates that:
  o It shall not be compulsory for any employee to undergo, directly or indirectly, any testing for HIV.
  o No employer shall discriminate against, or stigmatise workers, in particular jobseekers and job applicants on the grounds of real or perceived HIV status.

5.7 Right to Continued Employment Relationship

Policy Statement
HIV infection shall not be a cause for termination of employment as long as the employee is fit for work. The employers are encouraged to, in consultation with the employee, or his/her representative, make provisions for suitable work where necessary.

Strategies
• Provide education and training to employers and employees on their rights and obligations in relation to the existing labour laws regarding HIV and AIDS such as the Statutory Instrument 202 of 1998.
• Encourage employees with HIV related illness to work for as long as they are medically fit in available appropriate work.

5.8 Confidentiality

Policy Statement
The Tourism and Hospitality Sector shall uphold the confidentiality of its employees, trainees and job applicants’ HIV status. Disclosure of one's status shall always be voluntary. However, shared confidentiality shall be promoted to facilitate access to treatment, care and support services.

Strategies
• Ensure information regarding workers', trainees', and job applicants' HIV status is not disclosed without their written consent.
• Create a conducive environment for disclosure in order for employees to access HIV services or other benefits. This includes:
  o Incorporating a clause on confidentiality of HIV status in the employment codes of conduct. Non-consensual disclosure of an employee's status shall be regarded an act of misconduct.
Facilitating training of peer educators and lay counsellors for the promotion of shared confidentiality, care and support.

5.9 Prevention Programmes

Policy Statement

Employers and employees shall develop and implement comprehensive workplace programmes on HIV prevention linked to behaviour change. Employers shall coordinate various interventions to change attitudes, beliefs and risky sexual behaviours of clients, guests, employees, their families and communities; making use of peer educators, counsellors and public private partnerships.

Strategies

• Design and implement programmes to provide information and education on HIV and AIDS to clients, guests, employees, their families and communities.
• Provide resources necessary for the training of peer educators and the implementation of peer education programmes.
• Promote abstinence and faithfulness to spouses.
• Provide female and male condoms in the workplace and educate employees on their correct and consistent use.
• Avail female and male condoms to clients and guests, taking into consideration cultural and religious backgrounds.
• Create awareness on HIV and AIDS, TB and other opportunistic illnesses and provide information, education and communication materials.
• Mainstream gender equality as a prevention strategy.
• Ensure access to PEP should an employee be exposed to the risk of HIV infection as a result of his/her job.
• Encourage early detection and treatment of opportunistic illnesses and sexually transmitted infections (STIs.)
• Promote access to HTC services for employees to know their status and encourage shared confidentiality with workmates and families for support.
• Educate employees on personal risk assessment and promote measures to reduce high risk behaviour, including for the key populations.
• Provide access to HIV prevention services along transport routes for mobile workers.
• Educate workers and their families on and promote male involvement in the elimination of parent to child transmission programmes.
• Promote uptake of voluntary medical male circumcision.
5.10 Treatment, Care and Support

Policy Statement
The sector shall ensure that treatment, care and support are provided for the infected and affected at all levels. Programmes should include measures of reasonable accommodation in the workplace for persons living with or affected by HIV and AIDS or related illnesses.

Strategies
- Encourage formation of support groups for people infected or affected by HIV and AIDS.
- Involve people living with HIV and AIDS in key decisions which affect them.
- Provide adequate information in the workplace on community resources including treatment programmes for HIV and opportunistic illnesses.
- Provide follow up services to HTC which include:
  - Facilitating access to ART for infected employees and their immediate families, e.g. through medical aid, company clinics / doctors, or referrals to the public health system
  - Promoting treatment adherence.
  - Facilitating psychosocial support for infected and affected employees and their families.
- Educate employees on nutrition and healthy lifestyles.
- Encourage employers to provide material support to the infected and affected employees and their families, e.g. dietary and nutritional support.

5.11 Budget and Sustainability

Policy Statement
Resource mobilization for HIV and AIDS programmes should be done collectively at all levels, i.e. at sector level by the NECs, and at enterprise level. Enterprises should provide financial, human and material resources, as well as allocate time for HIV and AIDS activities during working hours.

Strategies
To facilitate the funding of HIV and AIDS activities, it is necessary that:
- Enterprises budget for HIV and AIDS programmes.
- The NECs mobilize resources for HIV and AIDS programmes.
- NECs and Enterprises establish strategic partnerships with relevant organisations that provide low or no cost HIV and AIDS prevention, care, treatment and support services.
In ensuring sustainability of the action under the proposed programme, the key is to build the tourism and hospitality sector's institutional capacity in the provision and promotion of HIV and AIDS, TB and other opportunistic illnesses.

To ensure the sector's ownership and industry-led efforts, capacity-building of key stakeholders (e.g. employers, employees, their families, clients and guests) will be undertaken.

Collective and continued efforts to address the HIV and AIDS challenge in the Tourism and Hospitality Sector lies mainly in the HIV and AIDS knowledge and skills transfer, making use of, for example, peer educators, counsellors and public private partnerships. Stakeholders shall co-ordinate various interventions to change attitudes, beliefs and risky sexual behaviours at work and home.

Engagement with the Ministry of Health and Child Care, National AIDS Council (NAC) and other HIV and AIDS focused organisations will leverage resources and ensure a holistic approach to programming and sustainability of existing and new programmes. Delivery of these actions will be participatory in nature to ensure ownership and relevance.

Employers and employees witnessing benefits such as reduced HIV related workplace stigma and discrimination and hours of absence from duty attributable to HIV and AIDS workplace programmes are likely to fully adopt and continue the practice. Employee changes in HIV prevention and treatment-seeking behaviours accruing from HIV training will be passed on to future generations.

A good Tourism and Hospitality practice will facilitate resource mobilisation, up-scaling of programmes and increase positive impact on the sector.
6 ROLES AND RESPONSIBILITIES

6.1 The Stakeholders

- Government
- Employers and their organizations.
- Employees and their organizations.
- National Employment Council
- Health care providers
- Non-governmental organizations
- Suppliers of goods and services (informal and informal)
- Clients and guests

6.2 The Role of Government

Government, in consultation with other stakeholders, shall facilitate periodic national policy review processes. Furthermore, the government shall:

- Promote research and disseminate all relevant information on the latest trends of the epidemic and its prevalence at the workplace and across the population.
- Strengthen structures and procedures for the enforcement and the policing of the Sector HIV and AIDS, TB and other Opportunistic illnesses Policy.
- Provide primary health infrastructure and/or treatment referral facilities for communities including those that are away from urban centres.

6.3 The Role of NECs

The parties in the Tourism and Hospitality Sector shall set up HIV and AIDS committees at NEC level. The membership of the committee shall include the tripartite partners and shall be gender sensitive. The committees shall be responsible for:

1. Formulating, coordinating and implementing sector-wide awareness programmes and providing back up services to individual establishments.
2. Appointing coordinators who shall liaise with establishments, providing a go between role for stakeholders and cooperating partners.
3. Periodically monitoring and evaluating the effectiveness of the sector-wide policy and programmes. Give periodic reports to the principals during Full Council Meetings.
4. Linking the sector with other national and sub-regional initiatives.
6.4 The Role of Employers and their Organizations

Employers in consultation with employees and their Workers' Committees shall:

1. Establish HIV and AIDS Committees at the enterprise level.
2. Formulate HIV and AIDS policies at enterprise level.
3. Commit resources for the implementation and success of the sector HIV and AIDS policy at the workplace.
4. Implement, monitor and evaluate comprehensive HIV and AIDS workplace programmes.
5. Develop, review and monitor human resource policies in line with the sector HIV and AIDS, TB and other opportunistic illnesses Policy.
6. Both employer and employee organizations shall support the NECs' HIV and AIDS initiatives.
7. Form partnerships to reinforce the workplace programmes.
8. Encourage their suppliers to have HIV and AIDS policies and programmes at their workplaces and make it a requirement for preferred business partnerships.

6.5 The Role of Employees and their Organizations

Employees, in consultation with their organizations shall:

1. Actively participate in the HIV and AIDS committees formed at the enterprise.
2. Work with their organizations to effect behaviour change at the workplace.
3. Consult each other and make recommendations on training programmes that should be developed for the workplace, for example, the training of peer groups.
4. Encourage and support uptake of HTC.
5. Observe the rules of confidentiality at all times, reporting any discrimination to the appropriate authorities.
6. Encourage and support employers to develop, review and monitor Human Resources Policies that are in line with national, sectoral and workplace policies on HIV and AIDS.
7. Support the NEC initiatives.

6.6 The Role of Health Care Providers

Public and private health care providers complement the efforts of the tripartite partners in combating the HIV and AIDS epidemic and shall:
1. Make an input into the sector HIV and AIDS policies and programmes.
2. Provide quality health services, psycho-social support and treatment.
3. Provide prophylactic, ART and palliative health care services.
4. Participate in public private partnerships to increase access to prevention, care, treatment and support services.

6.7 The Role of Suppliers of Goods and Services
Suppliers of goods and services (including those trading informally) to the Tourism and Hospitality sector are equally affected by the HIV and AIDS epidemic and should contribute to the efforts of the tripartite partners by:

1. Familiarizing themselves with the sector policy on HIV and AIDS.
2. Supplying goods and services in a manner that will promote the sector's achievement of the objectives of the policy on HIV and AIDS at the workplaces.

7 EMERGENCY PLANNING AND RESPONSE
The sector and enterprises shall review their HIV related emergency preparedness from time to time.

8 MONITORING AND EVALUATION INDICATORS
Monitoring and Evaluation of workplace policies in HIV and AIDS ensures that the workplace programme is in line with the changing trends and ongoing research on HIV and AIDS. Continuous monitoring and periodic evaluation is essential in guiding the implementation of vibrant, relevant HIV and AIDS workplace programmes.

To monitor and evaluate workplace programmes the NECs shall set up an HIV and AIDS committee at industry level whose activities shall be led by a selected focal person at NEC level. The same should be promoted at enterprise level to spearhead the implementation of HIV and AIDS programmes at that level.

The NEC and enterprises shall:
• Ensure that monitoring system is in place at sector and enterprise level for continuous monitoring, periodic evaluation of the HIV and AIDS programmes at each level.
• Carryout a baseline studies to acquire key information that would work as the basis for subsequent assessments on the efficiency, quality and results of the HIV and AIDS policies and programmes.
• Assess and map the way forward on the negative impact of HIV and AIDS on company profitability so that these are minimised.
• Conduct periodic stakeholder consultations and reviews on policy and programme experiences in alignment with the Zimbabwe National AIDS Strategic Plan national strategy (ZNASP.)

A number of indicators can be used to monitor the implementation of this policy. These indicators could be adopted, together with indicators to be developed with the action plans designed to complement this policy.

8.1 Process indicators

Some indicators of process are:
1. The number of enterprises with workplace policies and programmes on HIV and AIDS.
2. The number of enterprises that include HIV in their strategic plans.
3. The proportion of enterprises' budgets allocated to and used for HIV programmes.
4. The number of enterprises with employee assistance programmes to meet the needs of employees living with HIV.
5. The number of employees trained in various HIV programmes.
6. The number of enterprises offering HTC.
7. The number of employees utilising HTC facilities.
8. The number of drop in centres and number of employees visiting them.
9. The number of community outreach programmes implemented.
10. The number of workplace support groups for people living with HIV and AIDS.
11. Resources mobilized for HIV and AIDS programmes at NEC level.
12. The number of hours spent on HIV and AIDS programmes at the workplace.

8.2 Impact indicators

Some indicators of impact are:
1. Reduction in incidence of sexually transmitted infections.
2. Increased levels of knowledge of HIV and AIDS issues.
3. Reduced number of deaths from HIV and AIDS related causes.
4. Reduced number of person hours lost through HIV and AIDS related absenteeism.
5. Reduced impact of HIV and AIDS on productivity and profitability.