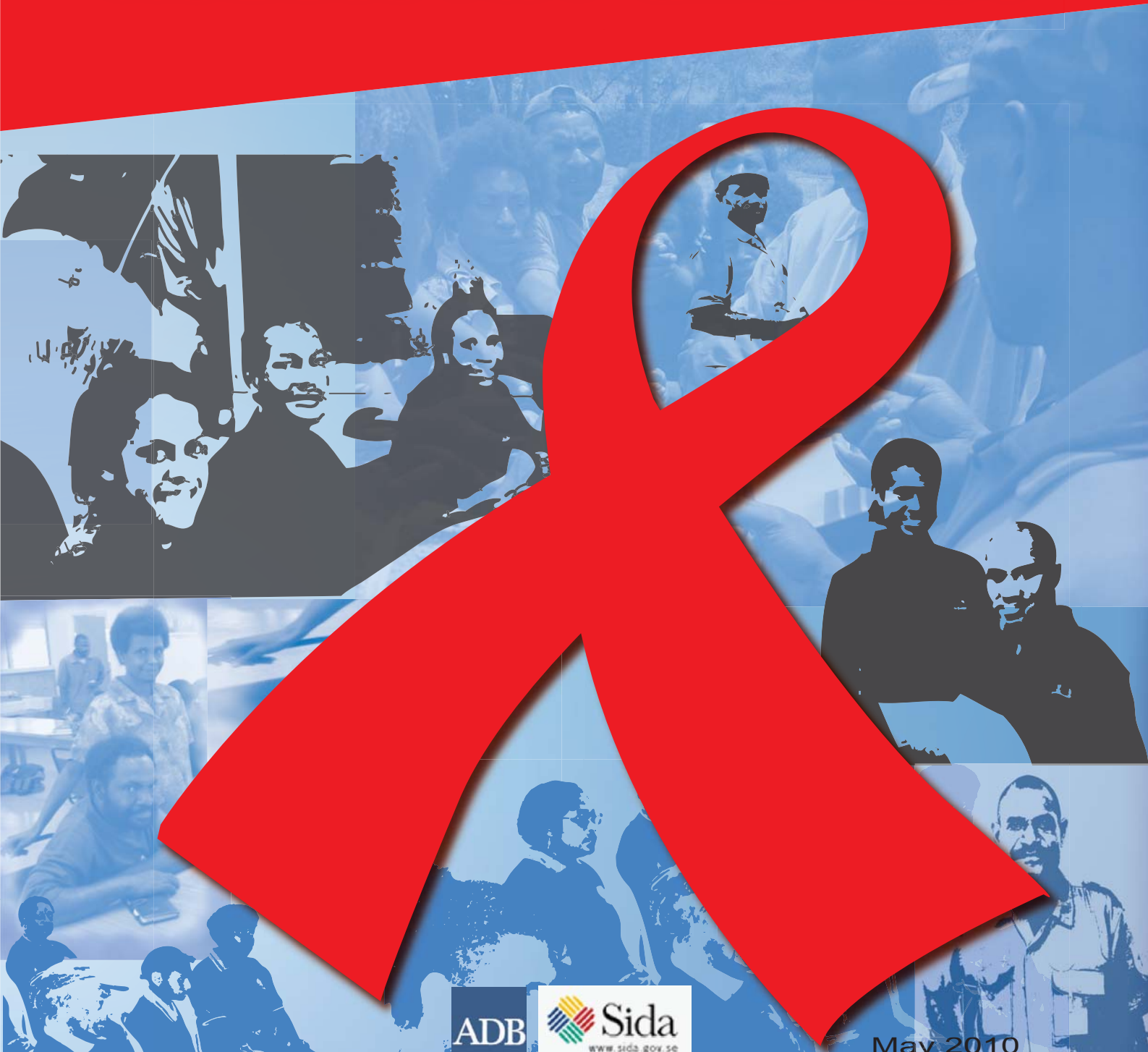




LAE CHAMBER OF COMMERCE Inc.

Guidelines for Workplace Action to Reduce HIV and AIDS



ADB



May 2010

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Funded by
Asian Development Bank (ADB)
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May 2010

Foreword

Papua New Guinea's situation in relation to HIV and AIDS is serious. We have a generalized epidemic, which means that every Papua New Guinean is at risk of being infected or affected by HIV or AIDS. HIV and AIDS are now in every part of the country, and in every sector of the population.

Since taking up my duties with the National AIDS Council, I have been deeply concerned at the rate at which the epidemic is continuing to grow, despite the many millions of Kina and years of well-intended efforts devoted to turning it around. I am convinced that we must greatly intensify our focus on prevention.

I therefore welcome this initiative by the Lae Chamber of Commerce to stimulate its member companies and other employers to prevent the spread of HIV through activities based in their workplaces.

These ***Guidelines for Workplace Action to Reduce HIV and AIDS*** contain all the basic information that employers and employees need to get started on this vital work. They comply with national standards and international best practice, and support the pioneering work done by the Papua New Guinea Business Coalition on HIV and AIDS (BAHA) with the private sector.

I am especially glad to see the importance given to involving women equally with men, and to ensuring that workplace programmes address the issues that make women and girls particularly vulnerable to HIV and AIDS.

I would like to congratulate the Lae Chamber of Commerce, and its funders the Asian Development Bank and the Swedish Cooperation Fund, for preparing this very useful publication.

I urge all employers and employees to accept their personal responsibility to do everything in their power to prevent the further spread of the epidemic. Please read and use these ***Guidelines***, and make the prevention of HIV and AIDS standard practice in your workplace.

A large, stylized handwritten signature in black ink, likely belonging to Wep Kanawi, is positioned over the bottom half of the page. The signature is fluid and cursive, with a long horizontal stroke extending to the right.

Wep Kanawi, CSM, OBE

A/Director, National AIDS Council Secretariat

Preface

The Lae Chamber of Commerce Incorporated is a very active and progressive organisation that advances the interests of its members and the private sector as a whole in Lae and Morobe Province.

For many years the LCCI has battled for a fair go on issues of importance to the private sector, particularly on Government legislative, policy and administrative matters. It is now looking at ways to steer the private sector into combating HIV and AIDS, and the inequality between men and women which contributes to the spread of the epidemic.

The planned expansion of Lae Ports, and the many other large economic development projects affecting the Province, made this new focus essential. It is well known that infrastructure construction and economic development lead to increased movement of people, separation of families, new spending power for some and greater poverty for others, and increased violence against women. These factors lead to a rise in the spread of HIV if measures are not taken.

In 2009, the Chamber was able to secure funding from the Asian Development Bank through the Swedish Cooperation Fund¹ to start a three year project known as “Mobilising the Private Sector to Respond to Gender and HIV and AIDS Issues”. The Lae Chamber of Commerce is proud to introduce these **Guidelines for Workplace Action to Reduce HIV and AIDS**, which mark the start of many tasks the Chamber plans to undertake and are designed to help organisations decide on what steps they should take to introduce a workplace policy into their company.

Although our Project is linked to the development of the Lae Ports, it extends beyond to all companies in Lae that could face devastation if HIV and AIDS continue to spread exponentially throughout the Province, as they are now doing. We believe that to restrict the circulation of the **Guidelines** to the Chamber’s members only would be to deny many businesses and other organisations the opportunity to access this crucial information. Hence we framed it to include non-member organisations so that they too can benefit from our efforts against the HIV/AIDS epidemic.

I am pleased to introduce these **Guidelines** to you and hope that you are able to put the valuable information to good use for the benefit of your company.



Alan McLay, OL

President

Lae Chamber of Commerce and Industry Inc.

¹ Under HIV/AIDS Co-operation Fund Grant 0102, generously donated by the Government of Sweden

Acknowledgements

Lae Chamber of Commerce Incorporated would like to thank the Asian Development Bank and the Swedish Cooperation Fund (SIDA) for their generous support in funding this project.

The manual was compiled by the Project's consultant, Dr Christine Bradley, with assistance from Project Team members Nellie McLay and Meredith Tutumang.

Consultations and discussions were held with many people during the passage of Guidelines from its inception through to its publication. The Chamber would like to express its thanks to all those who participated in meetings, commented on drafts, shared their expertise, or otherwise contributed their time and energy into making this manual as useful and as relevant as possible. In particular, the Chamber appreciates the co-operation of BAHA, from both the national and Lae regional offices.



Explanation of terms

AIDS: Acquired Immune Deficiency Syndrome, a cluster of medical conditions (often referred to as “opportunistic infections” caused by the HIV virus. Most of these can be treated with antiretroviral and other medications but not permanently cured. With appropriate treatment and care, a person may live many years even after developing AIDS.

BAHA: PNG Business Coalition Against HIV/AIDS

BCC: Behaviour change communication; refers to sharing knowledge about HIV and AIDS in ways which assist people to take action to change their behavior and reduce their risk of HIV.

HAMP Act: PNG’s *HIV/AIDS Management and Prevention Act*, 2003, which prohibits discrimination on the grounds of HIV status, and defines people’s rights to confidentiality and to the means of protection from HIV infection. Under this law, it is an offence to require or pressure a person to have an HIV test, or to tell anyone about the results of a person’s test without that person’s permission. It is a criminal offence for a person with HIV to knowingly transmit the infection to others.

HIV: Human Immunodeficiency Virus, a virus that weakens the body’s immune system, eventually causing AIDS. A person may live for many years without showing any signs of the infection.

IECs: Information, education and communication materials, such as leaflets, posters, videos, messages on T-shirts, stickers, etc.

LCCI: Lae Chamber of Commerce Incorporated

NACS: National AIDS Council Secretariat

Positive living: Methods by which people infected with HIV can care for their physical and mental health and nutrition, so they can live relatively normal lives.

Positive person: A person living with HIV, also known as an HIV+ve person.

Sex and gender: There are both biological and social differences between men and women. The term “sex” refers to biologically determined differences (which cannot be changed) while the term “gender” refers to the ways in which men and women have learned to behave, which are affected by cultural, social and economic conditions and are changeable.

STIs: Sexually transmitted infections, of which the main ones are syphilis, chancroid, chlamydia, gonorrhea and herpes. STIs provide a gateway to the HIV virus, because they create small breaks in the skin of the genital or anal areas which allow the HIV virus to enter the bloodstream of a sexual partner. They can also cause infertility and lead to domestic violence. STIs must be included in programmes to reduce the spread of HIV.

VAW and GBV: The terms violence against women, or gender based violence, refer to the forms of physical and sexual violence which females experience more than males, such as wife-beating, rape or forced sex (including within marriage), gang rape, sexual harassment, and sexual exploitation or sexual abuse as children. These greatly increase the vulnerability of women and girls to HIV/AIDS, are a major driver of the epidemic and must be addressed in programmes to reduce the spread of HIV. GBV is a broader term than VAW because it also includes the violence often inflicted on men who have sex with men. This is another route for HIV transmission which must be addressed in programmes.

VCCT: Voluntary confidential counseling and testing for the HIV virus, also known as **VCT**. People access this service of their own free will, and results are confidential. This means that the results are only given to the person tested, not to his or her family or employer, unless the person tested gives permission.

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1. Basic Workplace Toolbox for HIV and AIDS

The following “tools” are essential for tackling HIV and AIDS through workplace activities:

- ✓ Recognition by employers that helping to protect their workers from HIV is good for the organisation, good for the community and good for the country.
- ✓ An environment of trust, so that employees do not fear discrimination or loss of employment if they have HIV.
- ✓ Respect for human rights and the HAMP Act, which protect employees from being pressured to take an HIV test and from discrimination on the basis of HIV status.
- ✓ A workplace HIV and AIDS policy, with monitoring and follow-up, developed with input from people living with HIV.
- ✓ Workplace conditions of equality and respect between men and women, and protection for female employees against exposure to sexual or physical violence in the course of their work.
- ✓ Accurate knowledge about how HIV is transmitted and not transmitted.
- ✓ Provision of male and female condoms in the workplace, easily and discreetly accessible to female as well as to male staff.
- ✓ Access to Voluntary Confidential Counselling and Testing for HIV, with results given only to the individual and not to the employer.
- ✓ Information about STIs and how to obtain free and confidential treatment.
- ✓ Information about how to access local legal, health and other services for those suffering from domestic violence, sexual assault or harassment and other forms of gender based violence.
- ✓ Information about local services for treatment, care and support groups for people living with HIV or AIDS, and assistance for families affected by HIV or AIDS.
- ✓ Coverage for HIV and AIDS in the organisation’s health insurance policy.



2. Why should workplaces tackle HIV and AIDS?

Protecting their workforce is in the interests of all employers

AIDS is potentially a far greater threat to a business or organisation than other serious illnesses because it takes workers in the prime of their productive lives. Yet recognizing and preventing the infection is difficult because fears of stigma and discrimination drive it underground. Most people who have the infection do not know it and are afraid to know it. They continue to spread the virus, even infecting their future children.

Treatment (but not cure) is now available for HIV and AIDS, and people with the virus can lead long and productive lives with the right support. We **MUST** make it easier and safer for people to find out their own HIV status, and get the help they need to stop spreading the infection to others and to take care of their own health. Workers need to feel that their workplace is a safe place to discuss these issues, without fearing stigma and discrimination.

If workplaces do not take action, we will see:

- Increased absenteeism and lower productivity, through employees' own illness, or through the burden of caring for HIV-infected family members
- Higher labour turnover
- Loss of valuable experience and expertise
- Higher costs of recruitment and training
- Higher costs of health insurance and employee benefits
- Increased spread of HIV affecting all sectors of society, whether rich or poor, in all areas of the country
- A huge burden of unnecessary suffering for those with HIV and their families.

The workplace itself may also be a source of HIV risk for some people, such as female employees who experience sexual harassment, or any employee involved in a work-related accident where there is contact with blood.

Whether an employer is a private sector business, a government body, or a civil society or faith-based organisation, all have a duty to do everything possible to prevent the spread of HIV and reduce the impact of infection.

HIV infection is preventable, and workplace HIV interventions are relatively inexpensive. Levels of HIV infection are still low enough that, with good planning, businesses and organisations can maintain healthy workforces and communities. Small investments now mostly in terms of time and organisation can avert much greater economic and human costs later.

PNG has a generalised HIV epidemic

In the entire Asia-Pacific region, PNG is one of only four countries to have a generalised epidemic of HIV and AIDS. This means that **everyone** is potentially at risk of being infected or affected by HIV and AIDS. The risk is not restricted to certain groups such as users of injected drugs, homosexuals, or sex workers and their clients, as in some other countries.

In PNG, the main means of transmission is through sexual intercourse without using a condom. Once infected in this way by a male partner, pregnant or breastfeeding mothers may pass the infection to their babies.²

PNG prevalence rates are still much lower than those of most of the sub-Saharan countries of Africa where AIDS continues to cause such devastation. But authorities believe PNG rates are increasing by around 30% every year, including in rural areas.³

HIV and STI prevalence rates vary enormously around the country. The Highlands provinces and the NCD have the highest rates of HIV. In the Western Highlands, nearly one in eight people (12.9%) tested in VCCT clinics in 2008 had HIV.⁴ In Morobe overall, HIV prevalence rates are not yet at these levels. In 2008, 4% of people tested at VCCT sites in Morobe were found to have HIV.⁵ But these figures can be misleading.

For pregnant women tested in Morobe as part of their antenatal care, HIV prevalence rates are already as high as for pregnant women tested in antenatal care in the Western Highlands and the NCD. At one period during 2008, Lae's Malahang antenatal clinic had the highest rate of HIV infection amongst all pregnant mothers tested in antenatal care in the country.⁶

The partners of pregnant women who have HIV are likely also infected and may in fact have been the source of infection for the pregnant women. But the men may not know about their own HIV status, since men are not routinely tested during their wives' antenatal care and the wives may keep quiet about their test result for fear of a violent reaction.

Although Morobe's rates overall are still lower than the Highlands provinces, Lae is the destination of many people travelling down from the Highlands on the Highlands Highway, carrying their HIV and STIs with them. STIs, which contribute to the spread of HIV, are also extremely high in these provinces, including Morobe, while services to treat them are either non-existent or not accessible for most people.



² One in three babies born to HIV+ve mothers becomes infected with HIV, unless special medical care is given. *Inter-Agency Task Team, PNG Prevention of Parent to Child Transmission and Paediatric Review*. UNICEF 2009.

³ National Department of Health and WHO: *The 2007 Estimation Report of the HIV Epidemic in Papua New Guinea*, p30.

⁴ National Department of Health, *The 2008 STI, HIV and AIDS Annual Surveillance Report*, Sept 2009, p11.

⁵ As above, p 16.

⁶ National Department of Health, *The 2009 STI, HIV and AIDS First Quarter Surveillance Report, January – March 2009*, Figure 4 p13, and *The 2008 STI, HIV and AIDS Annual Surveillance Report*, Sept 2009, Figure 6, p11.

HIV and STIs spread where there is money and where there is poverty

Morobe province is experiencing rapid economic growth. Large infrastructure projects (such as the major development of Lae Ports, the improvements to the Highlands Highway and services for the new Liquified Natural Gas project) bring jobs for some, but also higher HIV risks. Many years of experience around the world and in PNG have shown that large infrastructure construction projects contribute to the spread of HIV and AIDS, especially when connected with the transport sector.

The influx of male workers and would-be workers, and the rapid growth of “entertainment” services tapping into the new wealth of men away from their families can lead to a massive increase in the sexual risk behaviours that promote the spread of HIV, unless preventive action is taken.

The rapid growth of other sectors in Morobe, such as mining, resource extraction, primary industry and manufacturing, also add to the spending-power and mobility of some sectors of the population (mostly males), but have the potential to increase the poverty and vulnerability to HIV and AIDS of those left behind, mainly women and children.

HIV and STIs spread where there is violence against women

The HIV virus can enter the bloodstream through any damaged area of skin, such as happens to the genitals of women during rough or forced sex, or with girls before their organs are mature at around age twenty. Not only sexual abuse but physical abuse of women creates conditions that promote the spread of HIV, and women with abusive husbands have higher rates of HIV and STIs.⁷ PNG has amongst the highest rates and most severe forms of violence against women for countries not at war or recovering from war, and “the risk of violence both at home and in the community is a constant presence in the lives of many women in large parts of PNG”.⁸

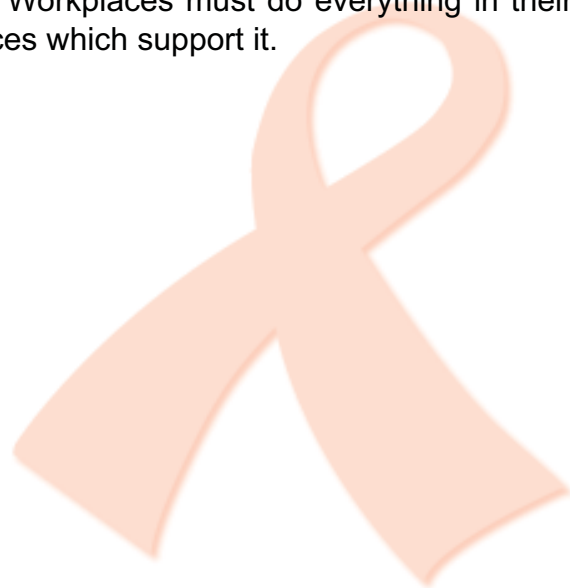


⁷ National AIDS Council 2006, *National Gender Policy and Plan on HIV and AIDS 2006 -2010*, p7.

⁸ AusAID Office of Development Effectiveness, 2008, *Violence against women in Melanesia and East Timor*, p104

Research has established that two out of every three PNG women experience domestic violence as a national average (much more than that in some areas), and over 50% have experienced forced sex.⁹ Of women interviewed at the STI Clinic at Lae's Angau hospital in 2008, 76% reported forced sex by their husbands/partners and 78% believed that their husbands/partners were having other sexual relationships and therefore putting them at risk of HIV.¹⁰ As well, many females experience rape or gang rape. Half are under 16 years old, and half of these are under 12 years old, with offenders often being family members.¹¹ The younger the woman or girl, the greater the risk of internal damage from coerced sex, and the greater the risk of HIV transmission.

Although many people view physical and sexual violence against women as normal, and link it with the payment of brideprice and cultural attitudes, it is a major driver of the AIDS epidemic. Workplaces must do everything in their power to change the attitudes and practices which support it.



⁹ The research is summarized in Bradley C. and Kesno J., 2001, ***A Long-Term Integrated Strategy on Family and Sexual Violence***, PNG Institute of National Affairs Discussion Paper No. 84.

¹⁰ National Department of Health and the National Research Institute, 2009, ***Bio-Behavioural Sentinel Surveillance Survey among men and women attending Lae Friends STI Clinic 2008***, p17-18

¹¹ National AIDS Council 2006, ***National Gender Policy and Plan on HIV and AIDS 2006 -2010***, p16

3. How can these Guidelines help?

The purpose of these Guidelines is to encourage companies and organisations to introduce workplace programmes to reduce the spread and impact of HIV and AIDS, and to guide them in the practical steps for doing so. Not all organisations and companies are able to take all the actions recommended. Large organisations have more resources at their disposal and can do more than smaller ones.

It is up to each organisation and company to do the best it can, in discussion with its workers, and with input, if possible, from the “experts” – people already living with HIV or AIDS. But certain actions are prohibited by the HAMP Act, such as compulsory testing of employees for HIV, revealing a person’s HIV status without permission, or discriminating against an employee because he or she is HIV+ve.

Many resources are available to help implement workplace action on HIV and AIDS (see Annex 5). The PNG Business Coalition on HIV and AIDS (BAHA) is the main organisation already working with the private sector to develop workplace policies tailored to the needs of each company.

These LCCI Guidelines are intended to support the work of BAHA in two ways. They can help to raise awareness among employers of the need to create their own workplaces policies, and they can assist companies and organisations to sustain their efforts at implementation once their policy has been adopted. Further information on the work of BAHA, and the supportive role of the LCCI, is given in chapters 8 and 9.

Background to the Guidelines

As mentioned in the Preface, these **Guidelines for Workplace Action on HIV and AIDS** have been created under the project “*Mobilising the Private Sector to Respond to Gender and HIV and AIDS Issues*”. This document is based on several months research and consultation with national, provincial and community stakeholders, steered by the LCCI and involving over a hundred people.

The Guidelines comply with international standards¹³ and with PNG’s national laws¹⁴ and policies relating to HIV and AIDS. The PNG government is also a signatory to the **United Nations Convention on the Elimination of All Forms of Discrimination Against Women**, and equal opportunities for women are promoted under PNG’s **National Constitution**.

¹³ Relevant international standards are laid down in the International Labour Organisation’s **ILO Code of Practice on HIV/AIDS and the world of work**, the World Economic Forum’s review of **Business Coalitions Tackling AIDS**, and the **Guidelines for APEC Member Economies for Creating and Enabling Environment for Employers to Implement Effective Workplace Practices for People living with HIV/AIDS and Prevention in Workplace Settings** by the Organisation for Asia-Pacific Economic Co-operation (APEC).

¹⁴ For PNG, the Guidelines comply with the **National Strategic Plan on HIV/AIDS 2006-2010**, the **National Gender Policy and Plan on HIV and AIDS 2006-2010**, the 2009 **National HIV and AIDS Prevention Strategy**, the **HIV/AIDS Management and Prevention Act** of 2003, and the various policies and guidelines of the National Department of Health relating to services and treatment for HIV/AIDS, STIs and gender based violence.

4. Key principles

Every employer, whether large or small, has a responsibility to take all steps within its means to prevent the spread of HIV and to reduce the impact of the epidemic. Approaches and activities should be founded on the key principles developed by PNG's National AIDS Council and by the International Labour Organisation (ILO). These represent current national and international best practice.

Both sets of key principles share the following features:

- ✓ Recognition of HIV and AIDS as a workplace health and safety issue
- ✓ Duty of employers to provide information, condoms, and links to relevant services
- ✓ Support for human rights and protection of equal opportunities for all employees
- ✓ No compulsory HIV testing of employees
- ✓ No discrimination by employers or co-workers against employees suspected to be HIV +ve
- ✓ The right of individuals to complete confidentiality about their HIV status
- ✓ The promotion of equality between women and men, to reduce women's additional vulnerability to HIV and AIDS
- ✓ Continuation of the employment relationship.

The two sets of key principles are provided in full as Annexes 1 and 2 in a form easily photocopied as handouts.



5. Core activities for workplaces

Tackling HIV in workplaces requires more than just providing information to employees about how the infection is spread. The overall task is to create an atmosphere of trust and respect in the workplace, so that workers can face their fears and take steps to address their own HIV risk. This is not easy, and it takes time. Strong, but sensitive, leadership from management can work wonders.

Many social, cultural and economic practices and attitudes affect people's ability to change their sexual behavior. Women and adolescents face greater difficulties because they are usually under men's control and vulnerable to male violence against them. Fears, misinformation, prejudices and religious moralizing create obstacles to HIV prevention. A broader range of activities is therefore necessary to create an enabling working environment, in which prevention of HIV and support for persons living with the infection is normalized.

Wherever possible, the core activities are best provided through the employer's own workplace programmes, but assistance with all aspects is available through the organisations listed in Annex 5, and through the LCCI or BAHA.



1. Education for all employees

Information on the following topics should be provided, either by trained employees of the company or organisation, or through arrangement with other organisations.

- ✓ How HIV is spread, and how people can avoid infection, including avoiding transmission to babies.
- ✓ Visual demonstration of how to use the male and female condom¹⁵
- ✓ Explanation of Voluntary Confidential Counselling and Testing, the value of knowing one's HIV status, and who workers can safely tell about a positive test result.
- ✓ Availability of local services for:
 - ✓ HIV voluntary and confidential counseling and testing, and treatment
 - ✓ STI treatment
 - ✓ Domestic and sexual violence protection and treatment
 - ✓ Care and support of people living with HIV or AIDs and their families.
- ✓ The additional vulnerabilities of women and girls to HIV, in particular through sexual violence against them (rape, forceful sex, child sexual abuse, and sexual harassment in workplaces and educational/training establishments) and physical violence (domestic violence).
- ✓ The importance of gender equality for reducing the spread of HIV and STIs.
- ✓ The human rights and HIV protection needs of men who have sex with men.
- ✓ The role of alcohol and drugs in increasing the risk of HIV transmission.
- ✓ The provisions of the HAMP Act 2003 which protect human rights and make it an offence to intentionally infect another person.
- ✓ Worker's rights for health and safety in the workplace, including the special work-related safety needs of females.
- ✓ Positive living and the importance of nutrition.



¹⁵ These should NEVER be used together, as the friction will cause them to break.

2. Provision of male and female condoms

Both kinds of condoms should be made consistently available to employees of both sexes, since each kind has its advantages and disadvantages and people have preferences. They should be made available in locations where people can access them privately – this is especially important to female staff. More public forms of distribution can also be set up, but this should not be the only option. Supplies of **free** condoms and lubricant can be obtained from BAHA or Morobe Provincial AIDS Committee (MPAC).

3. Access to services for HIV and AIDS, STIs and violence against women

Wherever possible, companies and organisations should make the following services available to employees in the workplace, either through their own health programmes, or by making arrangements with an outside provider:

- ✓ Voluntary and Confidential Counselling and Testing (VCCT) for HIV
- ✓ Treatment for STIs
- ✓ Assistance with accessing services for domestic and sexual violence
- ✓ Emergency post-exposure prophylaxis (PEP) to prevent HIV infection from work-related injuries or sexual assault.

Except for private health clinics, most of the above services can be provided free.

4. Inclusion of workers' spouses/partners

Experience has shown that prevention of HIV is much more effective when both partners in a sexual relationship understand the issues and are able to discuss them. For example, wives may get angry and blame the company if they find a condom in their husband's pocket, or husbands may react with violence if their wife suggests using a condom, unless both parties understand the issues.

Companies and organisations should make efforts to reach workers' spouses with HIV and AIDS-related information, and, if possible, facilitate their access to VCCT, STI treatment, and services on domestic and sexual violence. HIV counselling and testing of couples jointly makes it more likely that the couple will be mutually supportive, so that women can enroll in programmes to prevent transmission of HIV to their babies without being blamed and punished.



5. Care and support for persons living with HIV or AIDS

Employees living with HIV are not obliged to inform employers or colleagues of their status, but if they choose to do so, the employer should be prepared to offer:

- ✓ Adjustment of work duties as needed;
- ✓ Assistance with health care costs, disability allowances and survivor benefits under the company's health insurance;
- ✓ Linkages with organisations offering assistance to people living with HIV and AIDS and their families;
- ✓ Enforcement of protection for HIV+ve employees against discrimination by co-workers or supervisors.

6. Workplace policy

Every workplace should have a policy which addresses the above issues, and also makes any special provisions needed for the protection of workers and their families which might be required by the nature of the business or job category. For example, work which involves absences from home might require schedule adjustments to keep absences short, or pay arrangements to ensure that families are provided for during the breadwinner's absence to minimize the risks that the partner left at home will sell sex to survive. Hotel housekeeping staff might need to be provided with rubber gloves when cleaning up used condoms. Married housing rather than single quarters might be a worthwhile investment for companies which provide housing for their workers.

The policy needs to conform to the provisions of PNG's Constitution and legal code. A sample template, developed by **BAHA**, is provided as Annex 3. It is recommended that every company and organisation ready to set up its own workplace policy should contact **BAHA** for assistance (see chapter 8 and Annex 5). BAHA can also advise on how the workplace policy can be monitored and evaluated, and linked in with provincial and national data systems.

7. Workforce planning

Companies need to stay informed about the spread of the epidemic, both locally and in the country as a whole. They should analyse the implications for their workforce in terms of absenteeism (e.g. due to HIV-linked illness, caring for infected relatives, attending funerals), and the disability and death of employees at various levels within the organisation. The more highly trained and skilled its workforce, the more vulnerable a company will be to disruption of business and reduction in profits caused by HIV and AIDS. The company's health insurance policy will also need to be regularly reviewed to ensure appropriate levels of coverage for HIV and AIDS related conditions.



6. Steps for setting up a workplace policy

An HIV and AIDS workplace policy is intended to meet the needs of both employers and employees. It should be created through a collaborative process and ongoing discussion between employers and employees, during paid work-time. The principles of zero tolerance for any form of stigmatization or discrimination at the workplace, and confidentiality of HIV status, are fundamental. The following steps can be adapted to suit the size and composition of the company or organisation, preferably in discussion with BAHA (see chapter 8).

1. **Form an HIV and AIDS committee**, with representatives of senior management, supervisors, workers, human resources staff, and persons living with HIV and AIDS (if they agree). In larger organisations, the committee might include a representative of the training unit, the occupational health and safety committee and the industrial relations unit. Decide on terms of reference, methods of operation, and time-frame.
2. **Invite an organisation with HIV and AIDS workplace policy experience** to come and address the committee to provide guidance and resource materials, and answer questions. In Lae, the organisation with the most experience in this area is BAHA (see Chapter 8). The committee might also want to consult another company which has already implemented its HIV and AIDS policy, or the LCCI. Contact information is provided in Annex 5
3. **Arrange HIV and AIDS training** for some or all committee members. This process of building the capacity of leaders within the workplace does not have to be completed before the next steps for setting up a workplace policy can be taken. Training can be a continuous process, according to the availability of staff and of the training organisations, such as BAHA, ADRA, Tingim Laip etc (see Annex 5)



4. **Assess the HIV risks** associated with the nature of the organisation's business for all categories of worker, recognizing the different vulnerabilities of males and females, of younger workers, and of those who travel away from home. For larger organisations, it is advisable to do an anonymous baseline survey of knowledge, attitudes and practices relating to HIV and AIDS, STIs and violence against women, to enable the company to monitor the effects of its policy and programme over time. Assistance can be provided with this.
5. **Compile an inventory** of what health and information services are already available, both at the workplace and in the community, such as education materials, materials, trainers, care and support workers etc (refer also to Annex
6. **Develop a draft policy.** This is best done with direct assistance from BAHA, using a template provided by them, which can be amended to suit the circumstances of the company and the workforce. (See the introduction to BAHA's workplace policy template at Annex 3.) Circulate the draft for comment, revise and adopt it.
7. **Draw up a costed plan of action** with targets and lines of responsibility (BAHA or the LCCI can provide a sample work plan).
8. **Launch the policy** formally at the organisation's head office, and also at branches and affiliates.
9. **Disseminate information about the policy** and plan of action through, for example, notice boards, mailings, pay slip inserts, special meetings, induction courses, training sessions.



7. Implementation and maintenance of the policy

The organisation's work on HIV and AIDS does not end with the signing of the policy. Implementation is an ongoing task. It takes time to cover all aspects of the education and information programme, and messages and methods need to be constantly revised and renewed so that workers remain interested and alert to their level of risk. As workers develop confidence that they will not be stigmatised and discriminated against if they contract HIV, maintaining the policy becomes easier. The open involvement of workers with HIV or AIDS is a milestone of success, and further contributes to effective HIV prevention.

Methods that can be used are:

- ✓ Authorising key staff members to act as **HIV focal points** and take responsibility for a systematic and sustained programme of activities, with annual, quarterly and monthly plans and reports.
- ✓ Coverage of the HIV and AIDS workplace policy in **inductions** for new workers, and **in-service trainings** for staff.
- ✓ Regular presentations to workers on topics related to HIV and AIDS, STIs and VAW as part of daily or weekly **“toolbox” meetings**, either by trained staff members or invited speakers.
- ✓ **Peer education:** where certain workers are trained to
 - ✓ Give accurate information about HIV and AIDS, STIs and VAW to their peers, either informally through one-on-one discussions as opportunities arise naturally, or through formal presentations in tea-breaks, lunch-hours, or at section meetings;
 - ✓ Distribute written information among their peer groups and their families;
 - ✓ Refer peers to appropriate services on HIV and AIDS, STIs and GBV.
- ✓ Liaising with **organisations of people living with HIV or AIDS**, such as the Morobe Network of Positive Living (MNOPL) to give presentations.
- ✓ Showing HIV and AIDS related **audio-visual aids** such as videos/CDs/DVDs, or role-playing real-life scenarios, followed by a focus group discussion.
- ✓ Inclusion of information in the organisation's **newsletters**.
- ✓ Display of **posters and information leaflets** at work stations and on notice-boards.
- ✓ **HIV and AIDS messages** on stickers for helmets or vehicles, bags, notepads and register books, other workplace items and equipment.
- ✓ Activities in connection with **special events**, such as World AIDS Day (December 1st), PNG's 20 Days of Activism on Violence Against Women (November/December), International Women's Day (March 8th), PNG Women's Day (late March), or office events such as sports days.

- ✓ Experimenting with different ways of making **male and female condoms** accessible to both male and female workers, considering the need for discreet as well as public access points, such as:
 - ✓ containers¹⁶ located in toilets and ablution facilities, or change-rooms where workers change in and out of work-clothing;
 - ✓ containers placed in reception or waiting areas, or where workers clock in/out;
 - ✓ enclosure with pay packets;
 - ✓ for hotels and guest houses, inclusion with complimentary items provided in rooms;
 - ✓ for beer wholesalers and retailers, distribution with 6-packs of beer;
 - ✓ BAHA-sponsored Red Buckets in public areas outside workplaces;
 - ✓ other ideas?
- ✓ Publicising a schedule of when **VCCT** will be provided at the workplace, or providing transport to workers/spouses to attend another VCCT facility
- ✓ Providing **STI treatment** as part of the company's health programme, or providing referrals and transport for workers/spouses to receive confidential treatment at another facility.
- ✓ Ensuring that **emergency prevention of HIV infection (PEP)** is available for workplace injuries and sexual assault, and that all employees are aware of how to access this.
- ✓ Conducting occasional anonymous in-house **surveys of knowledge, attitudes and practices** relating to HIV and AIDS to give feedback on the effectiveness of the policy and the methods being used.



¹⁶ Condom dispensers previously provided to some workplaces by the National AIDS Council are no longer functioning, as the condom packages designed to fit them are no longer available.

8. The role of BAHA

The PNG Business Coalition Against HIV and AIDS (BAHA) represents the formal private sector response to HIV.¹⁷ BAHA is a not-for-profit organisation, directed by a board of private sector interest groups and major sponsors. It works in line with the National AIDS Council's ***National Strategic Plan on HIV and AIDS 2006-2010*** and ***National Gender Policy and Plan on HIV and AIDS 2006-2010***.

BAHA's strategy in managing the impact of HIV is the development and implementation of HIV workplace policies and programmes.

Since its inception in 2007, BAHA has helped over 230 companies develop workplace policies and programmes, trained over 750 employees in HIV programme implementation and led public awareness of HIV in the workplace through its newsletters, website and campaigns. Work countrywide is coordinated from Port Moresby by a team of eleven staff, and two in Lae for the Momase region. BAHA has been funded mostly by the PNG private sector with some support from AusAID.

BAHA's work focuses on:

- ✓ Leadership and partnership initiatives within the private sector;
- ✓ Workplace policy development services, with emphasis on vulnerability issues at the workplace that contribute to the spread of HIV;
- ✓ Policy implementation and support activities;
- ✓ Training, monitoring and certification of HIV policy and programmes for private sector staff;
- ✓ Information, education, and communication materials (including an electronic newsletter and interactive databases);
- ✓ BAHA promotions such as World AIDS Week, Wear RED Days, Red Ribbons; workplace access to PEP for HIV; condom distribution; and the BAHA toll-free information phone-line.

Other activities are:

- ✓ Business executive briefings;
- ✓ Policy awareness with employees;
- ✓ Regional Tokauts;
- ✓ HIV education and workplace innovation awards;
- ✓ Annual calendar;
- ✓ Industry-specific campaigns such as HIV-Smart Hotels, aviation, mining, shipping, security, and Red Bucket Hosts (condom distribution).



Further information can be obtained from www.baha.com.pg

¹⁷ This section on BAHA was supplied by BAHA's Port Moresby head office at the request of the LCCI.

9. The role of the LCCI

Lae's Chamber of Commerce is the largest in Papua New Guinea, with well over two hundred members. It has been representing private sector interests in Lae city and Morobe province since 1959. In January 2009 it began to implement, at the invitation of the Asian Development Bank, a project to mobilize the private sector to respond to gender and HIV and AIDS issues, in connection with the major development and expansion of Lae Ports.

One of the Project's tasks is to develop and promote these good practice **Guidelines for workplaces on HIV and AIDS**. The Chamber offers the following free services to support companies and organisations in adopting these **Guidelines**, and in working with BAHA to develop their own workplace policies.

- ✓ Initial contacts with key individuals, especially in the private sector;
- ✓ In-house briefings and public presentations to executives and senior management to orient them to the **Guidelines** and its components;
- ✓ Liaison with BAHA and other organisations to train nominated employees;
- ✓ Liaison with BAHA for assistance in drafting a workplace policy;
- ✓ In-house briefings with middle management on implementing workplace activities on HIV and AIDS, STIs and VAW;
- ✓ Assistance with establishing appropriate methods of condom distribution;
- ✓ Facilitation of training for peer educators;
- ✓ Provision of supplementary materials to support a workplace policy, such as information on policies and procedures on sexual harassment, and domestic violence issues affecting the workplace; leaflets, posters, stickers, CDs/DVDs, and other materials on various aspects of the AIDS epidemic relevant to the workplace, as needed (see Annex 5).
- ✓ Linkages with other organisations providing information, training or services related to reducing the spread and impact of HIV and AIDS.



Annex 1

The Twelve Principles of Workplace Policy for HIV/AIDS

PNG National AIDS Council 2003

1. Human rights and equal opportunity principles should be respected at all times in the workplace.
2. There should be no discrimination against employees with HIV in job applications, promotions, training, access to sickness and retirement benefits, etc.
3. Employees with HIV should be allowed to continue working so long as their physical condition permits normal work performance standards.
4. Where an employee with HIV is no longer able to work to normal performance standards, the infection should be treated like any other life threatening illness, in assessing the employee's reclassification, assignment to lighter duties, retirement, etc.
5. Employers should encourage voluntary confidential testing with pre- and post-test counselling. There should be no mandatory pre-employment or general workplace screening for HIV.
6. A person with HIV should not be required to inform his or her employer.
7. Confidentiality of employees' medical and insurance information must be maintained.
8. Co-workers should not refuse to work or withhold their services from fear of working with an HIV-infected employee.
9. Employers should provide or facilitate awareness about HIV and AIDS.
10. Employers should provide or facilitate access to available community counselling services.
11. Employers should provide or facilitate access to condoms and other prevention measures.
12. Training in infection control guidelines should be part of occupational health and safety programs in the workplace, and appropriate infection control equipment should be provided.

Important Note on Gender Equality:

Since the National AIDS Council's adoption of the **National Gender Policy and Plan on HIV and AIDS 2006-2010** as the country's official policy to accompany the **National Strategic Plan on HIV and AIDS 2006-2010**, implementation of all principles must take account of the different needs of women and men and promote the equal ability of both to protect themselves from HIV infection and the impact of the AIDS epidemic.

ILO Code of Practice on HIV and AIDS and the World of Work 2001

Key Principles

1. Recognition of HIV/AIDS as a workplace issue

HIV/AIDS is a workplace issue and should be treated like any other serious illness/ condition in the workplace. This is necessary not only because it affects the workforce, but also because 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.

2. Non-discrimination

In the spirit of decent work and respect for human rights and dignity of persons infected or affected by HIV/AIDS, there should be no discrimination against workers on the basis of real or perceived HIV status. Discrimination and stigmatization of people living with HIV/AIDS inhibits efforts aimed at promoting HIV/AIDS prevention.

3. Gender equality

The gender dimensions of HIV/AIDS should be recognized. Women are more likely to become infected and are more often adversely affected by the HIV/AIDS epidemic than men due to biological, socio-cultural and economic reasons. The greater the gender discrimination in societies and the lower the position of women, the more negatively they are affected by HIV. 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.

4. Healthy work environment

The work environment should be healthy and safe, so far as is practicable, for all concerned parties, in order to prevent transmission of HIV, in accordance with the provisions of the Occupation Safety and Health Convention, 1981 (No: 155). A healthy work environment facilitates optimal physical and mental health in relation to work and adaptation of work to the capabilities of workers in light of their state of physical and mental health.



5. **Social dialogue**

The successful implementation of an HIV/AIDS policy and programme requires co-operation and trust between employers, workers and their representatives and government, and where appropriate, with the active involvement of workers infected and affected by HIV/AIDS.

6. **Screening for purposes of exclusion from employment of work processes**

HIV/AIDS screening should not be required of job applicants or persons in employment.

7. **Confidentiality**

There is no justification for asking job applicants or workers to disclose HIV-related personal information. Nor should co-workers be obliged to reveal such personal information about fellow workers. Access to personal data relating to a worker's HIV status should be bound by the rules of confidentiality consistent with the *ILO Code of practice on the protection of workers' personal data*, 1997

8. **Continuation of employment relationship**

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

9. **Prevention**

HIV infection is preventable. Prevention of all means of transmission can be achieved through a variety of strategies which are appropriately targeted to domestic conditions and which are culturally sensitive. Prevention can be furthered through changes in behavior, knowledge, treatment and the creation of a non-discriminatory environment. The workplace partners are in a unique 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.

10. **Care and support**

Solidarity, care and support should guide the response to 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 programmes and occupational schemes.



Introduction to the BAHA workplace policy template

All employers are encouraged to work with BAHA to develop a workplace policy tailored to their own organisation. BAHA's workplace policy template has been developed over the last three years, through the process of working with hundreds of PNG companies to develop their workplace policies. The template is now a detailed 28 page document which provides sample wordings under the headings listed below. See Annex 5 for BAHA's contact information.

1. INTRODUCTION AND KEY PRINCIPLES	-----
2. PURPOSE	-----
3. SCOPE	-----
4. EMPLOYMENT CONDITIONS AND RIGHTS	-----
4.1 NO HIV DISCRIMINATION	-----
4.2 NO GENDER DISCRIMINATION	-----
4.3 CONFIDENTIALITY	-----
4.4 THE PROMOTION OF STAFF MEMBERS' WELL - BEING	-----
5. TREATMENT AND CARE	-----
5.1 ACCESS TO TESTING AND TREATMENTS	-----
5.2 CARE AND SUPPORT	-----
6. EDUCATION/PREVENTION OF HIV INFECTION	-----
6.1 SHARED RESPONSIBILITY	-----
6.1.1 INDIVIDUAL EMPLOYEE'S RESPONSIBILITIES	-----
6.2 EDUCATION PROGRAMS	-----
6.3 PARTNERSHIP & COOPERATION	-----
6.4 SPECIFIC RISK FACTORS	-----
6.5 SAFER SEX	-----
6.6 CONDOMS	-----
6.7 INJECTABLE MEDICATION AND VACCINATION	-----
6.8 OCCUPATIONAL HEALTH AND SAFETY	-----
6.9 UNIVERSAL PRECAUTIONS	-----
6.10 POST EXPOSURE PROPHYLAXIS (PEP) TREATMENT	-----
7. IMPLEMENTATION AND MONITORING	-----
7.1 HIV & AIDS COMMITTEE	-----
7.2 HIV & AIDS COORDINATOR	-----
7.3 COMMUNICATION OF POLICY	-----
7.4 REVIEW	-----
Appendix I: Condom procurement and distribution for [Insert Company Name]	-----
Appendix II: Universal precautions and checklist	-----
Appendix III: Tuberculosis (TB)	-----
Appendix IV: Procedure for Post Exposure HIV Prophylaxis (PEP) for use on [Insert Company Name] notice boards	-----
Example: Procedure for PEP: Post Exposure HIV Prophylaxis	-----
Example: [Insert Company Name] Accident Report Form	-----
Example: HIV Post Exposure Policy	-----
References	-----

Code of Conduct for trainers and activity leaders in HIV and AIDS prevention and response

It is important for people involved in HIV and AIDS programmes as trainers and activity leaders to practice what they preach and lead by example. Whether paid employees or volunteers, their lifestyle must reflect what they are promoting.

Persons who are known to have multiple casual sex partners, be physically or sexually abusive of their partners, or have excessive use of alcohol or drugs are not suitable for this work.

Everyone involved in promoting the prevention of HIV transmission, or in reducing the impact of the epidemic, is expected to:

1. Be a role model of good HIV prevention practice in their own behavior, both in the workplace and in their personal lives.
2. Demonstrate respect for both sexes equally.
3. Demonstrate respect and compassion for people living with HIV or AIDS, with no implication that they are morally inadequate, sinful or otherwise to blame for their condition.
4. Refrain from making judgements or expressing criticism about people who maintain themselves by selling sex, or about men who have sex with men.
5. Maintain complete confidentiality at all times about the HIV status of others, unless explicitly authorized by them to discuss it.
6. Not profit personally from involvement in the work, such as by selling condoms or other items obtained for free. (An official allowance or coverage of expenses by a sponsoring organisation, in line with accepted and transparent practice, is permissible).
7. Ensure that the information which they transmit conforms with the official policies and information bulletins of the National AIDS Council and other legitimate authorities, and is not based on hearsay or rumours from unauthorized sources (such as stories about miracle cures, or illness caused by condom use, etc).
8. Take care to present sexually explicit information in ways which maintain a professional and respectful atmosphere, avoiding titillation and inappropriate humour.
9. Uphold the principles of peer education and protection from sexual harassment by avoiding one-on-one private information sessions with persons of the opposite sex.

Resources and contacts

LOCAL ORGANISATIONS PROVIDING SERVICES ON HIV AND AIDS PREVENTION AND RESPONSE

LCCI (Lae Chamber of Commerce Inc.)

President: Alan McLay

Postal Address: PO Box 265, Lae 411, Morobe

Ph: 472 2340, **Fax:** 472 6038, **Fax:** 472 6038, **Email:** lcci@global.net.pg

Location/Street Address: Professionals' Building, 5th St, Lae

Hours of Operation: 8.00am-4:30pm, week days only.

Website: www.lcci.org.pg

LCCI Project: Mobilising the Private Sector to Respond to Gender and HIV Issues

Team Leader: Nellie McLay

Technical Co-ordinator: Meredith Tutumang

Ph: 479 3103

Other information as above.

For services provided, see chapter 9 and the information and education section of this annex.

BAHA (PNG Business Coalition Against HIV and AIDS)

BAHA assists employers to develop and implement workplace policies and programmes to minimize the impact of AIDS on their businesses. For further details, see chapter 8, or BAHA's comprehensive website, listed below.

Lae Office

Ph: 472 4183, **Fax:** 472 4314, **Email:** bahalae@online.net.pg

Postal Address: P.O BOX 5143, Lae 411, Morobe

Location/Street Address: Hornibrooks Complex, Malaita Street

Port Moresby Office

Ph: 325 9228, **Fax:** 323 5503, **Hotline:** 325 2852, **Free Information Line:** 7200 2242

Location/Street Address: Nasfund Office, 4 Mile, Hubert Murray Highway

Hours of Operation: 8:00 am - 4:00pm, week days only

Website: www.baha.com.pg

Morobe Provincial AIDS Committee Secretariat (MPACS)

MPACS is the provincial branch of the National AIDS Committee Secretariat (NACS) and coordinates the multi-sectoral response on HIV and AIDS in Morobe Province. It can arrange for HIV trainings according to national standards, and can provide IEC materials and male and female condoms to HIV and AIDS prevention programmes. MPACS can also refer individual clients to appropriate service providers.

Ph: 430 4344, **Fax:** 472 0877 (care of Save The Children)

Email: charlespepe@daltron.com.pg

Postal Address: P.O. Box 1547, Lae 411, Morobe

Location/Street Address: Huon District Authority Building, Level 1, Markham Road, Lae

Hours of Operation: 8:00 am-4:00 pm week days only

PNG Family Health Association (PNGFHA)

PNGFHA works on sexual and reproductive health issues for men, women and youth. It provides family planning services through community based distributors, runs trainings for communities on sexual health issues, HIV, STIs and violence against women and children, and can provide free condoms (male and female) and IECs. At its Lae office, PNGFHA has a Youth Centre that young people can access for information and counselling, and a clinic that provides various health and counselling services (see section on HIV and STI services).

Ph: 472 6523, **Fax:** 472 6296, **Email:** pngfha@datec.net.pg or rhonaeengo@yahoo.com

Postal Address: P.O. Box 893, Lae 411, Morobe

Location/Street Address: Central Arcade Building, Ground Floor, Room 5, Seventh Street, Lae

Hours of Operation: 8:00 am-4:00pm, week days only

Website: www.pngfha.org.pg

COMPASS

This programme is run from PNGFHA's office and concentrates on training men and boys to care for their own sexual and reproductive health, and that of their families. Community members needing testing or treatment for HIV or STIs are referred to appropriate clinics. COMPASS can also provide IECs and condoms.

Ph: 472 6047, **Fax:** 472 6250, **Email:** compass@datec.net.pg

Postal Address: P.O. Box 2958, Lae 411, Morobe

Location/Street Address: Central Arcade Building, Level 1, Room 18, Seventh Street, Lae

Hours of Operation: 8:00 am- 4:00 pm, week days only

Website: www.pngfha.org.pg

Well Women's Clinic , Angau Memorial Hospital

This Clinic provides check-ups and health information to healthy women to help them maintain good health. Information includes STIs, HIV and AIDS, and referrals are made to other services at the Hospital for testing, counseling and treatment if necessary.

Ph: 473 2179, **Fax:** 472 3015

Location/Street Address: Angau Memorial Hospital, Markham Road, Lae

Hours of Operation: 8:00 am- 4:00 pm, week days only

Adventist Development Relief Agency (ADRA)

ADRA offers capacity building for organizations working on HIV and AIDS, through training programmes and mentoring. It also provides training, supervision and financial support to Small Enterprise Development (SED) projects for people living with HIV and AIDS.

Ph: 472 7088, **Fax:** 472 7638

Location/Street Address: Lot & Section, Abel Tasman Rd, Lae

Hours of Operation: 8:00am-5:00pm Monday-Thursday and 8:00am-12:00pm Friday

Website: www.adra.org.pg

Tingim Laip Project

This project focuses on AIDS prevention in high risk settings, especially through Behavior Change Communication and support to local AIDS Site Committees. The organisation provides nationally accredited trainings in Basic HIV and AIDS, Basic HIV and AIDS Counselling, Home Based Care, and Peer Education. IECs and male and female condoms can be sourced free from the Tingim Laip office.

Ph: 472 5521. **Fax:** 472 5521

Location/Street Address: Post PNG Building, Level 1, Suite 14, Town

Hours of Operation: 8:00 am- 4:00 pm, week days only.

Lae Ports AIDS Site Committee

This Committee is made up of representatives of companies that operate in and around the Lae Ports site and community members who are trained as peer educators. Members carry out HIV prevention activities in the Ports, the Ports expansion area, and associated communities, through co-ordinating peer educators, distributing male and female condoms, providing IECs, sponsoring sports activities and making referrals to VCCT and STI services for individual clients.

Ph: 472 4822 (Milford Tiriwa, Chairman in 2010), or contact through Tingim Laip's office, 472 5521, or LCCI's HIV and AIDS Project, 479 3103. **Fax:** 472 4822

Location/Street Address: Maritime Workers Union office, Lae Ports

Hours of operation: 8:00am-5:00pm, week days only.

NOTE: The Committee will be working out of the new Lae Ports Seafarers' Centre at the Port once construction is completed in mid 2010, and will have a new phone number.

Morobe Network of Positive Living (MNOPL)

MNOPL provides emotional and practical support to people and children living with HIV and AIDS, and their families. The group organizes support meetings and ensures all members and new friends are linked to the services they need for successful positive living, and treatment options where necessary.

Ph: and Fax: Care of Tingim Laip office or BAHA Lae, **Chairman's mobile:** 71252201

Location/Street Address: Care of Tingim Laip office, Post PNG Building, Level 1, Suite 14

Hours of Operation: 8:00 am-4:00 pm, week days only

YWCA

YWCA provides training for young women on Basic HIV and AIDS, leadership, violence against women and human rights.

Ph: 472 1691, **Fax:** 472 1436

Postal Address: PO Box 1463, Lae 411, Morobe

Location/Street Address: YWCA Centre, Huon Rd, Lae

Hours of Operation: 8:00 am- 4:00 pm, week days only

Poros Sapot Project

This project provides support to female sex workers and men who have sex with men. It trains them on how to protect themselves from HIV, STIs and violence, refers them for VCCT and STI treatment, provides male and female condoms, and advocates on behalf of Project clients in cases of abuse or neglect by authorities. It provides special assistance to Project clients who are minors, and trains managers and staff of hotels and places of entertainment in HIV and VAW prevention. All services are at no charge.

Ph: 472 0881, **Fax:** 472 0877

Postal Address: P.O Box 176, Lae 411, Morobe Province

Location/Street Address: Dang Brothers Building, Top Floor, Fifth Street, Lae

Population Services International (PSI)

PSI is a branch of an international organisation which provides many services related to HIV and AIDS. In Lae, it specializes in the social marketing of condoms, where companies can purchase condoms at a reduced price. PSI also provides BCC training on sexual and reproductive health for men and women in industrial or resource extraction settings.

Ph: 472 5672, **Fax:** 472 7789

Postal Address: P.O Box 390, Lae 411, Morobe Province

Location/Street Address: Doyle Street, Eriku, Lae

Hours of Operation: 8:00am-4:30pm, week days only.

Anglicare Lae

Anglicare offers awareness on STIs, HIV and AIDS, gender and sexuality, stigma and discrimination, and violence against women and children. Trainings on Basic HIV and AIDS, Basic Counselling for HIV and AIDS, Home Based Care, and Peer Education are also available on request by organisations. Individual clients can be counselled on HIV, AIDS and STIs and referred for testing and treatment to appropriate clinics.

Ph: 472 7893, **Fax:** 472 7893

Postal Address: P.O Box 2599, Lae 411, Morobe Province

Location/Street Address: Buablon Hostel, Cassowary Road, Lae

Lae City Mission and Anglicare

These two organizations jointly a programme for children who are orphaned due to AIDS or vulnerable to HIV and AIDS because of their life circumstances. Services include accommodation and meals, school fees, clothing and education on HIV, STIs and children's rights. The programme is run from the Haus Clare.

Crisis Centre Office, Haus Clare

Ph: 472 7964, **Fax:** 472 4371

Postal Address: P.O Box 2599, Lae 411, Morobe Province

Location/Street Address: House Clare, Vee St, Coronation Drive, Lae

Hours of Operation: 24 hrs 7 days a week

SERVICES FOR FREE AND CONFIDENTIAL HIV COUNSELLING AND TESTING (VCCT)

Anua Moriri Clinic, Angau Hospital

This is the main clinic providing HIV testing and counselling, and other medical services for HIV and AIDS, for the whole of Morobe Province,

Ph: 473 2146, **Fax:** 472 3015

Location/Street Address: Angau Memorial Hospital, Markham Road, Lae

Hours of Operation: 8:30am-4:00pm, week days only.

Friends Clinic, Angau Memorial Hospital

This is the main STI clinic for Morobe, but it can also provide VCCT.

Ph: 473 2108, **Fax:** 472 3015

Location/Street Address: Angau Memorial Hospital, Markham Road, Lae

Hours of Operation: 8:30am-4:00pm, week days only.

Lae District Urban Clinics

The following urban clinics provide VCCT to both males and females, usually by a provider of the same sex as the client.

- ✓ Butibam Clinic
- ✓ Malahang Clinic
- ✓ Buimo Clinic
- ✓ Haikos Clinic
- ✓ Milford Haven Clinic
- ✓ West Taraka Clinic
- ✓ Tent City Clinic
- ✓ Igam Barracks Clinic

Call the Lae District office on 472 3421 or Huon District office for more information on hours of service at each clinic.

ADRA VCCT Centre.

Ph: 479 1510, **Fax:** 472 7638, **Email:** afanaso@adra.org.pg

Location/Street Address: Town Street, Boundary Road, Eriku, Lae

Hours of Operation: 8:00am-5:00pm Monday-Thursday and 8:00am-12:00pm Friday

Website: www.adra.org.pg

Susu Mamas

Susu Mamas provides primary health care to families and babies, both at its office and in communities through their mobile service. As well, they can counsel clients about HIV, and can help HIV infected parents prevent transmission to their babies. Testing for HIV is only done at the Eriku Clinic.

Ph: 472 3672, **Fax:** 472 3672, **Email:** laeadmin@susumamas.org.pg

Location/Street Address: Morobe Special School, Bumbu Rd, Eriku, Lae

Hours of Operation: 8:00am-4:30pm week days only,

PNG Family Health Association (PNGFHA)

PNGFHA provides basic counselling to clients that request VCCT and then refers them for the test itself to Anua Moriri Clinic at Angau Memorial Hospital.

Ph: 472 6523, **Fax:** 472 6296

Postal Address: P.O Box 893, Lae 411, Morobe

Email: pngfha@datec.net.pg or rhonaeengo@yahoo.com

Location/Street Address: Central Arcade Building, Ground Floor, Room 5, Seventh Street, Lae

Hours of Operation: 8:00 am-4:00pm, week days only

Website: www.pngfha.org.pg

Marie Stopes Clinic

This clinic provides VCCT, STI treatment, male and female condoms, and family planning consultations. Well Man and Well Women check-ups are also available. Some services are free, and some have a charge.

Ph: 430 3941 or 472 5397, **Fax:** 430 3941

Postal Address: P.O Box 2254, Lae 411, Morobe Province

Location/Street Address: YWCA Centre

Hours of Operation: 8:00am-4:00 pm, week days only.

TREATMENT SERVICES FOR HIV AND AIDS

Anua Moriri Clinic, Angau Memorial Hospital

This is the only public clinic which provides free anti-retroviral treatment to slow down the progress of AIDS, once a person reaches a certain stage of the illness. (No actual cure exist yet). Once started, the treatment must be continued for life. The clinic conducts tests to monitor the treatments, provides counselling to clients and their families, and connects them with other support services.

The clinic also assists pregnant women who have HIV to avoid transmitting the infection to their children, and encourages the fathers to fully participate in this process.

Ph: 473 2146, **Fax:** 472 3015

Location/Street Address: Angau Memorial Hospital, Markham Road, Lae

Hours of Operation: 8:30am-4:00pm, week days only.

Private clinics

Some private clinics can provide treatments related to HIV and AIDS, but the client (or his or her employer) will be charged for the consultations and the medications. Anti-retroviral treatment, once started, must be continued for life. (Consult the phone book for contact information).

TREATMENT SERVICES FOR STIs

Friends Clinic, Angau Memorial Hospital

This is the main clinic providing STIs examination and treatment for both men and women. Clients have the right to be seen by a health worker of the same sex as themselves. Appointments for examinations should be made a day earlier to avoid a long wait, as clients with appointments are seen first.

Ph: 473 2108 (for appointments), **Fax:** 472 3015

Location/Street Address: Angau Memorial Hospital, Markham Road, Lae

Hours of Operation: 8:30am-4:00pm, week days only.

Susu Mamas

STI treatments are only provided at their Eriku Clinic, not during community visits.

Ph: 472 3672, **Fax:** 472 3672, **Email:** laeadmin@susumamas.org.pg

Location/Street Address: Morobe Special School, Bumbu Rd, Eriku, Lae

Hours of Operation: 8:00am-4:30pm week days only

Lae District Urban Clinics

The following urban clinics provide treatment for STIs, but only on certain days of the week, which are subject to change depending on conditions.

- ✓ Butibam Clinic
- ✓ Malahang Clinic
- ✓ Buimo Clinic
- ✓ Haikos Clinic
- ✓ Milfordhaven Clinic
- ✓ West Taraka Clinic
- ✓ Tent City Clinic
- ✓ Igam Barracks Clinic

Call the Lae District Office on 472 3421, or Huon District Office on 473 1802 for more information on particular clinic's hours of service.

Other clinics

The following clinics are expected to be able to provide treatment for STIs by mid 2010:

- ✓ PNGFHA Clinic , ph: 472 6523
- ✓ ADRA Clinic, ph: 479 1510
- ✓ Mainland Holdings Clinic, ph: 472 3499

SERVICES ON VIOLENCE AGAINST WOMEN

Women and Children's Support Centre, Angau Hospital

Started by the Soroptomists and now run by MSF (Doctors without Borders), the Centre provides free assistance to adults and children who have experienced family or sexual violence: medical services, counselling, legal aid, PEP for prevention of HIV after rape, practical assistance with clothing and food, referrals to the police, the District or Village Court for a protection order, and emergency accommodation.

The service is open at 8:00am-4pm Monday to Friday and is located at the back of the new medical wards. At other times, some help is available from the Accident and Emergency Department of the hospital. Communities are informed about the Clinic through an outreach programme. Communities are informed about the Clinic through an outreach programme.

Ph: 472 6680, **Fax:** 472 5206 **Email:** msfh-lae-pc@field.amsterdam.msf.pg
Location/Street Address: Angau Memorial Hospital, Markham Road, Lae at the back of the hospital near the Anua Moriri Clinic.
Hours of Operation: 8am to 4pm Mon - Fri, 8am- 1pm , week day, Sat and public holidays. Information can also be obtained from Angau Hospital's VAW nurse specialist **Anastasia Wakon** on 4292375

Sexual Offences Squad (SOS) and the Women's Desk at Lae Police Station

Women who have been sexually assaulted should go first to the Women and Children's Support Centre at Angau Hospital , and receive medical and psychological treatment. The case may then be referred to female police officers at the SOS Office at the back of the main Police Station.

Women who have been physically assaulted can go direct to the Women's Desk in the Juvenile Reception Centre at the Police Station, or can go first to the Women and Children's Support Centre at Angau Hospital first, and ask for a police officer to interview them there.

Ph: 472 2222, **Fax:** 472 6522, marked "Attention OIC SOS"
Location/Street Address: Lae Police Station, Top Town, Lae
Hours of Operation: Cases can be reported 24 hours, 7 days a week, follow up is done 4pm, week days only

Lae District Court

Lae District Court provides Interim Protection Orders (IPOs) for women and children for men, women & children who are at risk of violence, or harassment. Mr.Nick Sawong is the contact person to provide assistance with obtaining an IPO.

Ph: 472 3211, **Fax:** 472 2936
Location/Street Address: Lae District Court House
Hours of Operation: 24 hours, 7 days a week. After hours or in emergencies, call Nick Sawong on 7606 4311

Poros Sapot Project

Poros Sapot assists female sex workers and men who have sex with men who have experienced violence to get protection from the police and the law, and advocates on their behalf when they are neglected or abused by authorities.

Ph: 472 0881, **Fax:** 472 0877
Postal Address: P.O Box 176, Lae 411, Morobe Province
Location/Street Address: Dang Brothers Building, Top Floor, Fifth Street, Lae

Lae City Mission Meri Seif Haus

This service provides emergency accommodation for abused women and children and refers them to other organisations for further assistance. The Seif Haus can be accessed through City Mission's Crisis Centre at House Clare, Vee St.

Ph: 472 7964, **Fax:** 472 4371

Postal Address: P.O Box 2599, Lae 411, Morobe Province

Location/Street Address: The location of the Seif Haus is confidential, for the safety of the residents

Hours of Operation: 24 hrs, 7 days a week

Salvation Army Safe House

The Safe House provides emergency accommodation to women and children who are at risk of violence. Normally, it can only be accessed with a referral from the Women and Children's Support Centre at Angau Hospital. But if the Centre is closed, the Sexual Offences Squad at the Main Police Station can sometimes arrange for admission for abused women and children

For contact information, see the listings above.

INTERNET REFERENCE MATERIALS

Available on BAHA's website, www.baha.com.pg

- ✓ PNG National AIDS Council, *National Strategic Plan on HIV/AIDS 2006 - 2010*
 - ✓ PNG National AIDS Council, *National Gender Policy and Plan on HIV and AIDS 2006 - 2010*
 - ✓ PNG National AIDS Council, 2006, *Integrating Gender into HIV and AIDS Activities: A Guide for Implementers:*
 - ✓ The HAMP Act: *National HIV and AIDS Management and Prevention Act*
 - ✓ The BAHA-approved Workplaces Policies of many businesses in PNG
 - ✓ BAHA's monthly news letters
 - ✓ Articles and reports on HIV and AIDS.
 - ✓ Information about emergency prevention of HIV infection from injury or rape (PEP), advice on women's issues, information for health workers and for people living with HIV, and many other matters relevant to HIV and AIDS
 - ✓ A search and enquiry function.
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Available on the website of the International Labour Organisation, www.ilo.org

- ✓ Manuals and tools for addressing HIV and AIDS in the workplace, including transport and infrastructure sectors.
 - ✓ Manuals and tools for trade unions addressing HIV and AIDS
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Available on UNAIDS website, www.unaids.org

- ✓ Best practices for workplace action on HIV and AIDS (put "workplace best practice" into the search box).
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Available on the website of AusAID's Office of Development Effectiveness www.ode.ausaid.gov.au

- ✓ *Violence against women in Melanesia and East Timor: Building on Global and Regional Promising Approaches*, 2008, with a Country Supplement on PNG.
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