

# AIDS

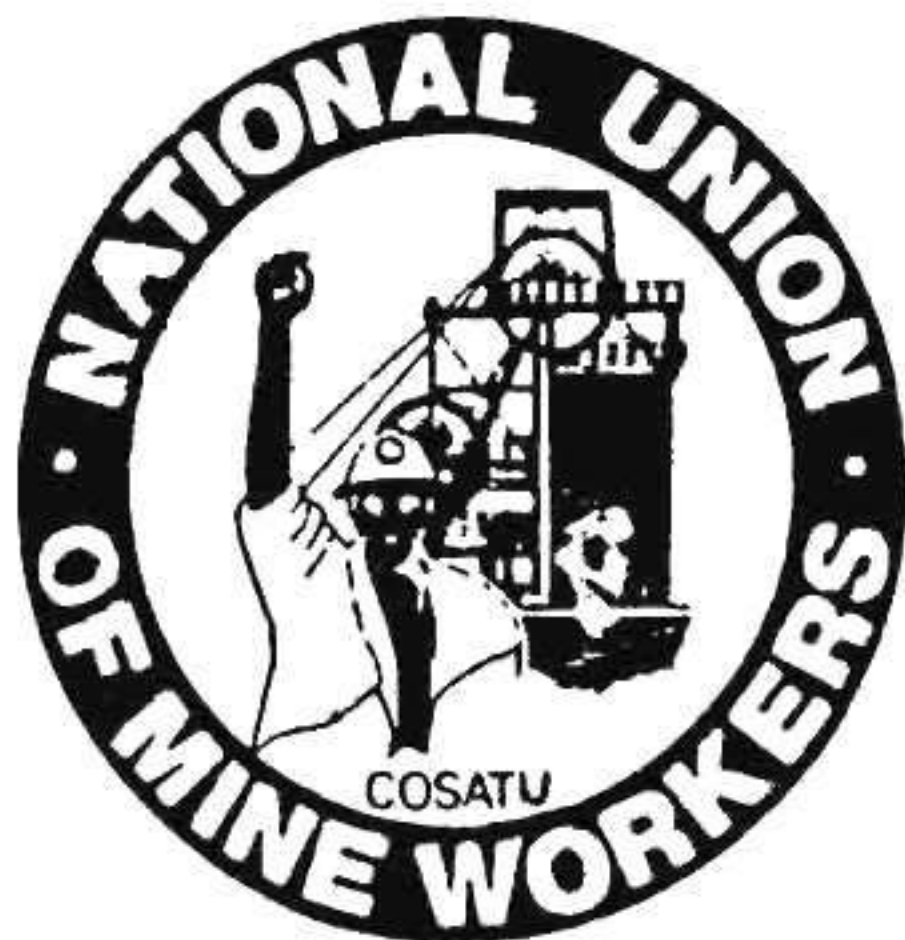
## whose responsibility?

*Every person, regardless of their race or class, can get AIDS if exposed to the virus that causes the disease. Some communities, however, may be forced to live lifestyles which could expose them more easily to the disease. This article from the National Union of Mineworkers (NUM) identifies AIDS as a disease which disproportionately affects disadvantaged sectors in our society. The NUM puts forward an agenda for the union movement regarding AIDS and presents its AIDS policy which it suggests could form the basis of a policy for the mining industry.*

“Once the AIDS (Acquired Immune Deficiency Syndrome) virus has entered a society, it tends towards the path of least resistance. Internationally, that line runs directly through some of the world’s least powerful communities: the poorest, most disadvantaged and underdeveloped groups whose members constitute an increasingly disproportionate share of the world’s total AIDS cases. This includes communities in the “Third World” and also impoverished ethnic minorities, often of “Third World” descent, within some developed nations.

AIDS is in reality the latest trend to emerge beside all those other epidemics - of infant mortality and malnutrition, of sexually transmitted and other diseases, of alcohol and drug misuse and of psychological distress and social disruption - which disproportionately affect the disadvantaged.

The AIDS pandemic<sup>☆</sup> cannot be properly understood apart from this background, and it is arguable that AIDS will ever be controlled, let alone eliminated, without a change in the combined conditions of underdevelopment, unbalanced development and political marginalisation which provide it with fertile soil.<sup>1</sup>



☆ Pandemic is a disease affecting entire countries at one time.

This quote, taken from *Blaming Others - Prejudice, Race and Worldwide Aids* - a book produced by the Panos Institute<sup>☆</sup>, captures the essence of the National Union of Mineworkers' (NUM) approach to AIDS. We believe that AIDS is chiefly a sociopolitical problem.

In South Africa we have a ready made "path of least resistance" which the AIDS virus can follow. Millions of South Africans live in desperate circumstances. They live in poverty, without permanent homes, in single sex hostels, under conditions of war, in dormitory cities and without access to the most basic of services, least of all health services.

Besides poverty and deprivation, many such South Africans find themselves in a perpetual state of transit. Some commute long distances to and from work on a daily or longer term basis. Others are job seekers who travel the length and breadth of the country in search of work.

For the migrant worker, the domestic worker and the shift worker, family life is fragile. For many, family ties are no longer permanent. They shift and change as circumstances are altered by factors beyond the control of the individual. The only permanency is that of human need. The need for security, friendship, emotional closeness and sexual intimacy. The same sexual intimacy that may give rise to AIDS.

This is the reality in which the AIDS virus spreads in South Africa. This is what derogatory words like "promiscuous" and sociological terms like "multiple partnerships" obscure. Much of the topical writing on AIDS and AIDS-sufferers is loaded with such terminology - terminology which ignores social reality and which serves to uphold the mythology that AIDS victims themselves are to blame for contracting the virus.

NUM objects to this approach. The vast majority of people have not chosen to live precariously. They have been condemned by social problems like the homeland policy, forced removals, labour migrancy, the hostel system and the black education system to put up with circumstances where health, whether mental or physical, depends on the position one holds in society.

The NUM argues that if an AIDS epidemic is to be averted, we have to confront and redress the effects of these policies in addition to embarking on a massive AIDS education and support programme that reaches into all sections of our society.

## **Management responsibility**

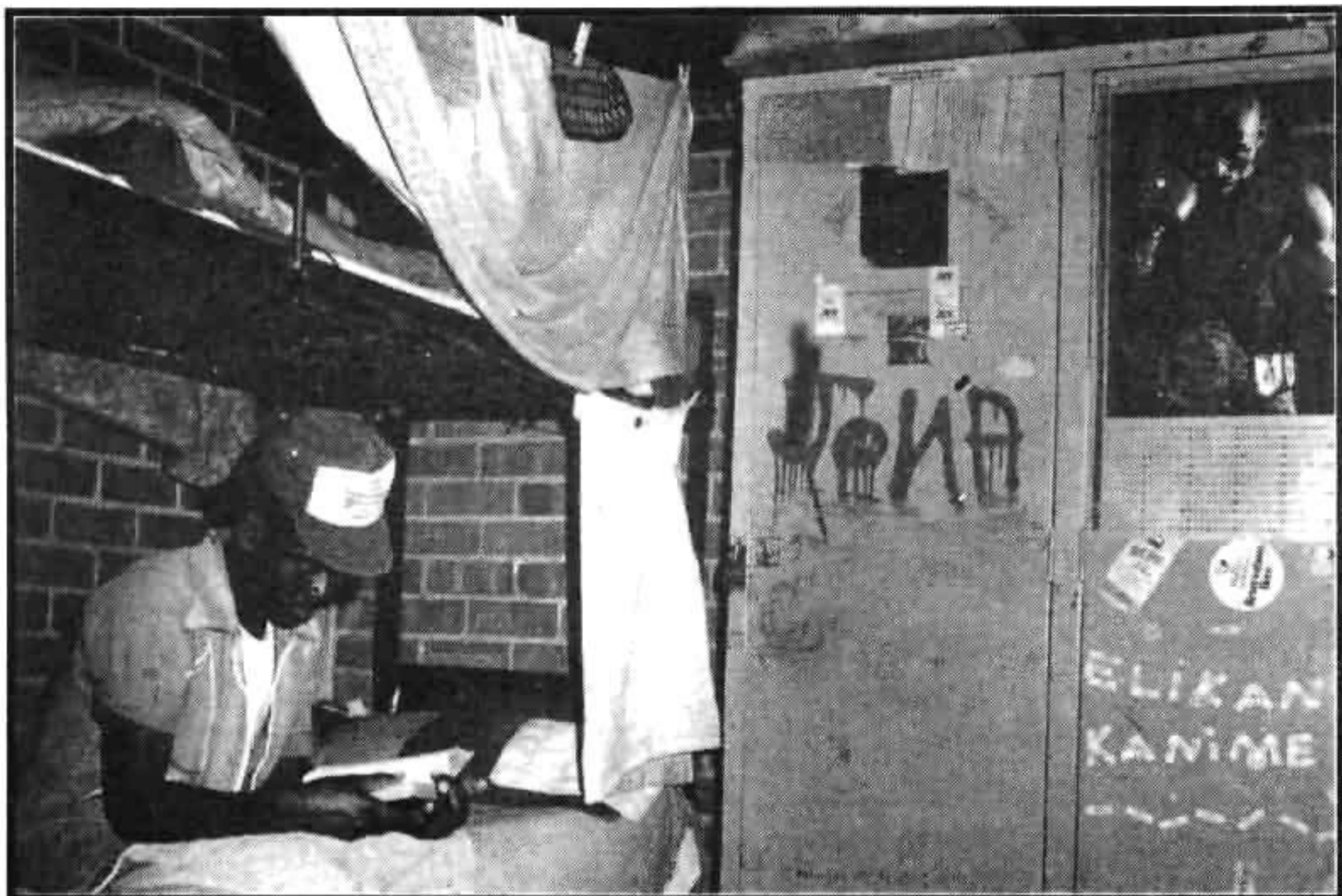
From the preceding discussion, it should be clear that our message to employers is that the social context of AIDS cannot be ignored. The workplace is not separate from broader society. Employment policies need to reflect this. Consider the following:

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☆ The Panos Institute is an international information and policy studies institute, dedicated to working towards greater public understanding of issues such as AIDS.



**Migrant workers return home to their families - the system of migrant labour has been blamed for facilitating the spread of AIDS.**



Single sex hostels force those involved in relationships to live apart, creating social conditions that contribute to the breakdown of family life.

**The provision and design of housing:** Many employers are guilty of treating workers as single men or women when they are, in fact, married. Many workers who live on their employers' property are virtual prisoners and are not even allowed to have visitors. It does not need to be spelt out that employment conditions of this kind contribute to the breakdown of family life and encourage social relationships of a fleeting nature.

**Job security:** It has come to our notice that many employers are not employing people who are HIV-positive<sup>☆</sup>. Others are trying to find ways of dismissing HIV-carriers. Yet, in the vast majority of jobs there is no danger of an HIV-carrier infecting his/her fellow workers, nor is his/her ability to work impaired.

**The inadequacy of public health services and absence of social security in South Africa:** This is one reason why some employers discriminate against HIV-carriers and AIDS-sufferers. They want to ensure that they do not have to carry part of the social costs of AIDS, a situation which may well be unavoidable should a significant proportion of their workforce be affected. This approach is very shortsighted. Sooner or later the costs of AIDS will affect all sectors of our society. No-one can go into quarantine. Ultimately

(☆ HIV is the name given to the virus [germ] that causes AIDS. A person who is HIV-positive is carrying the virus in his or her blood.)

employers will have to shoulder some of the costs and these costs could be greatly reduced if employers adopt humane work policies and play an active role in developing appropriate government policy with respect to health services and social benefits.

**The widespread practice of dismissing workers who are sick or injured:** The responsibility of supporting and caring for the sick and injured is effectively passed on to the individuals themselves, their families and their communities, the very families and communities who are under stress. This approach is almost guaranteed to worsen the problem by placing more people - dependents of the affected wage earners - in dire straits. The attitudes of employers need to change and government policy and the law need to incorporate the concepts of alternative work and retraining if this scenario is to be avoided.

## Union responsibility

As a mining union, the NUM is particularly concerned with the consequences of migrant labour and hostel life. Together with other unions, we also face the common responsibility of:

- informing our members about AIDS;
- fighting for job security, income security and medical benefits for those members who are HIV-positive;
- struggling for the eradication of those conditions which assist the spread of AIDS by placing individuals, families and communities under stress.



The Chamber of Mines has rejected the idea of negotiating a workplace policy on AIDS.

An AIDS education programme is already underway in the NUM. We have included a workshop on AIDS in our standard health and safety course. We are also considering a specific AIDS education project which will be taken to every mine or plant at which the union is organised.

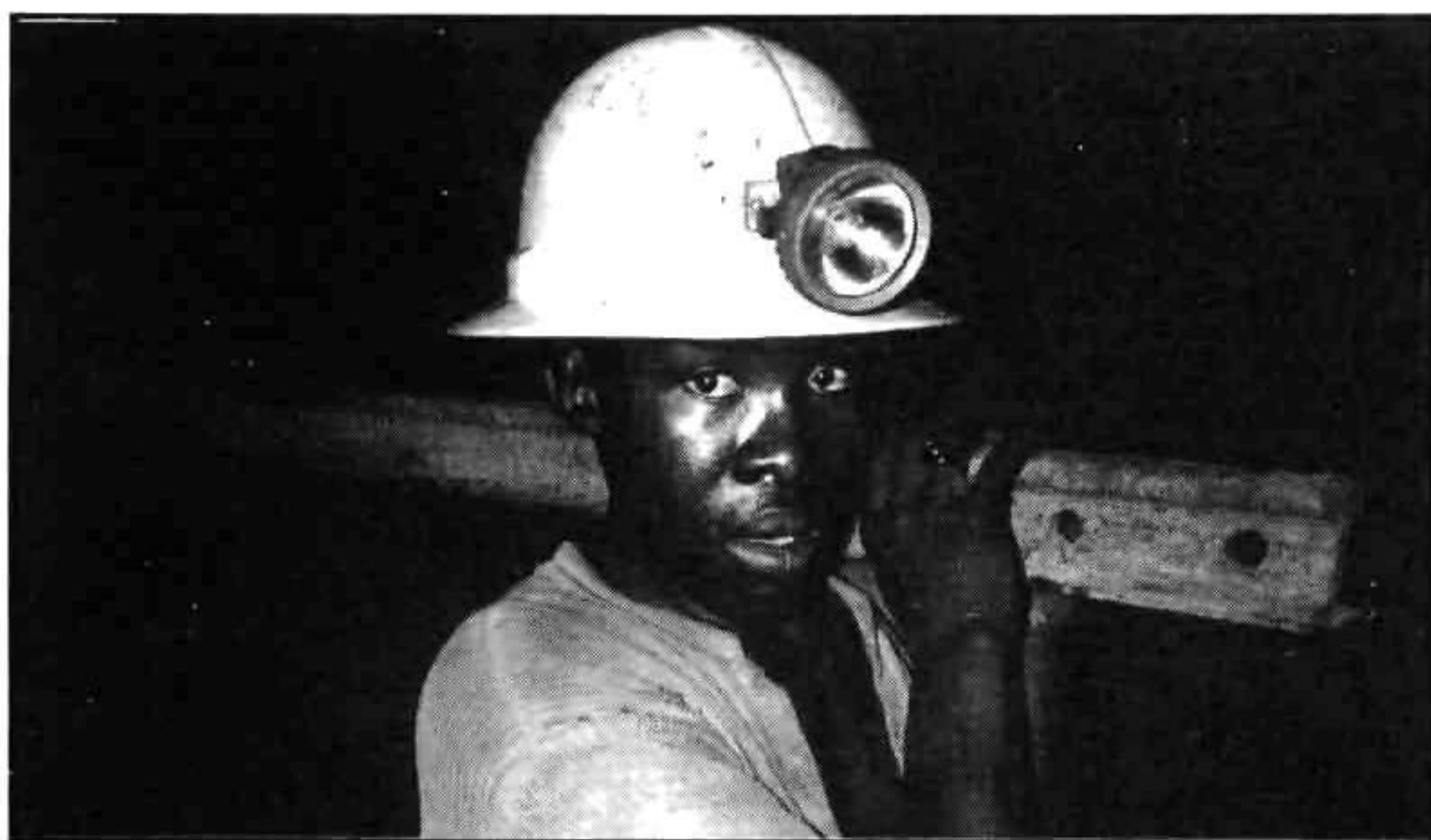
Although the Chamber of Mines has rejected the idea of negotiating a work-place policy on AIDS, the union has adopted a policy which could form the basis of a mining industry policy. Despite the Chamber's reluctance, we will continue to press for an industry policy in line with international initiatives such as the French "Charter on AIDS and Work" and the New York and New Jersey based "Citizens Commission on AIDS". The former has been drawn up by a working group convened by the French government and the latter lists ten principles relevant to the workplace and has been endorsed by companies such as Du Pont, Johnson and Johnson, Warner Lambert and Xerox.

The NUM policy is based on the standards recommended by the World Health Organisation and the International Labour Organisation<sup>2</sup> and also includes clauses which reflect the peculiarities of South Africa. It includes the following points:

### No discrimination on the basis of HIV-infection

An AIDS prevention programme should be directed to the protection of the rights of HIV-infected persons.

- Safeguards for individual workers: no worker who is HIV-positive should suffer any



Unions and managements have a responsibility to inform workers about AIDS.



Instead of single sex hostels, people have the right to decent family housing.

negative consequences such as dismissal.

- Safeguards for workers from specific recruitment areas: the prevalence of HIV infection in specified geographic areas should not affect the employment opportunities of workers from these areas. (The NUM does recognise that information about the geographic prevalence of the AIDS virus may be important in planning and assessing the efficacy of AIDS education campaigns. This data should not, however, be used to justify regional employment discrimination which is irrational and does not constitute an effective response to the disease.)

## No patient-specific testing

No individual worker should be required to undergo an HIV antibody test at the request, or upon the initiative, of a manager. Where testing is made available to workers, for instance at sexually transmitted disease (STD) clinics, testing should not be done unless counselling about its significance and its consequences is offered by adequately trained counsellors. Furthermore, test results should not be disclosed to those who have consented to being tested, without full counselling.

## Epidemiological testing

HIV screening of mineworkers for epidemiological purposes may be justified if the objectives of the screening programme are clearly defined. These objectives would,

however, have to be accepted by the NUM and be subject to objective evaluation and independent scrutiny. Such screening should furthermore be subject to an absolute guarantee of anonymity and confidentiality. There should, moreover, be an undertaking that the results of epidemiological studies will not be used as a basis for irrational and discriminatory employment policies. The report of the meeting on criteria for HIV screening programmes, WHO/SPA/GLO/87.2, Geneva 20-21 May 1987 should constitute the principles underlying any screening intervention for HIV.

## Lifestyle changes

It should be accepted that living conditions may generate circumstances which lead to exposure to HIV infection. In practice this means an obligation to provide decent living conditions in employment. The mine hostel and compound systems undermine any effective AIDS containment campaign. There should be a firm commitment, on an appropriate time scale, to the provision of family housing, facilities for visiting wives and other family members or friends, and humane hostel management.

## Information, education and counselling through negotiation and consultation

All mineworkers should have access to information about AIDS. The development of educational material and the training of counsellors should be undertaken jointly between workers and management. Provision should be made for peer counselling. No intervention in the context of AIDS - whether research, counselling, education or information - should be made without appropriate and extensive negotiation and consultation.

## Protection after incapacity

The average time between the development of full-blown AIDS and death is between 18 months and two years. Abandoning a worker who may have rendered years of service under these circumstances is inhumane. Incapacity benefits involving medical care and security of income should be provided.

## Public responsibility

The mining industry is in a unique position. It is a major income generator in South Africa and Southern Africa. It is also the largest employer of workers and has shaped the labour market to meet its needs (the migrant labour system, for example, was engineered to meet the mining industries' need for labour). There should be a commitment on its part



to combat the AIDS crisis. The mining industry has the resources to implement significant changes. It could create the basis for appropriate life-styles, lead the way in protecting HIV-infected persons from discrimination, develop appropriate treatment centres and implement effective, duly negotiated measures to assist the containment of the disease.

## Independent evaluation

The NUM recognises that most of the initiatives required to deal with the AIDS crises are unique. But the urgency of the AIDS problem will not tolerate untimely and inappropriate interventions as experience at home and abroad has shown. It is therefore crucial that all interventions aimed at containing the spread of the epidemic and providing care and counselling for those infected and affected by the problem, are independently evaluated.

## Conclusion

The NUM accepts that the problem of AIDS may assume epidemic proportions unless action is taken to stop it in its tracks. The government, business and the unions all have crucial roles to play. Our success or failure will ultimately depend on our ability to confront fundamental issues: employment policy and social policy. In the trade union movement, we believe that we have the will to do just this. Does the government and does business have the necessary will too? □

## References

1. R.Sabatier *Blaming others. Prejudice, race and worldwide AIDS*. The Panos Institute, 1988.
2. *London Declaration on AIDS Prevention* of the 28 January 1988 and the *Global Programme on AIDS Statement* from the Consultation on AIDS and the Workplace (Geneva 27-29 June 1988) as well as the Panos Institutes AIDS Unit's publication *Blaming Others. Prejudice, race and worldwide AIDS* (1988).

*This article previously appeared in the IPM Journal, August 1990.*

