

BAHA
March 2009



Papua New Guinea Business Coalition Against HIV & AIDS

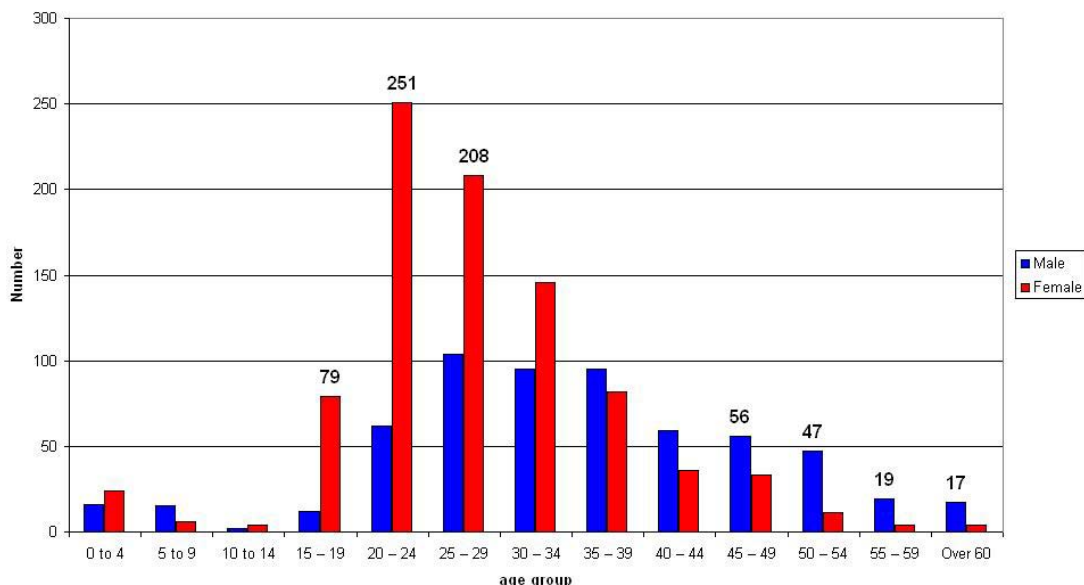
For circulation in your workplace & for your workplace notice board

HIV & young working women

251 preventable HIV infections!

From January to June 2008, 251 young women aged 20-24 tested HIV positive. It is 22 years since PNG registered its first HIV positive person. Therefore, most of these infections (and everyone under the age of 22) infected with HIV represents failure in our collective HIV awareness and prevention efforts.

New HIV infections by age & gender PNG jan - jun 2008 (n= 1559)



BAHA exists to assist the private sector develop workplace HIV education, care and treatment support designed to reduce this number. With education, support and treatment programs, young women are protected from infection and those already infected can be helped to be productive employees, mothers, and community members.

Young working women are critical to the future of PNG because women in this age group are entering new social roles as mothers and economic roles as income earners and employees. Without comprehensive HIV programs, more families will be left without mothers and providers. Fewer mothers and income earners increase the difficulty for everyone in the effort to reduce poverty and increase sustainable development in PNG.



This month we present a collection of stories from real young women who work and how HIV has affected their lives. We hope our stories encourage you to listen to the stories of young women where you work. When managers and HIV workplace champions listen and respond to the real threats that their own colleagues face, we can move beyond merely being aware of HIV. When we listen carefully to our own stories we can develop programs that target the real issues young women face in a workplace that place them at risk of HIV infection or prevents them from seeking treatment.

Young working woman, BAHA office assistant and writer of our young working women story award for March Chiharu Sai'i (click through to our new webpage to read all the stories)

The BAHA stories come from workplace champions or from BAHA employee's own families. This newsletter contains only two of the stories. The rest are on our "young working women and HIV" web page developed especially in time for the release of this newsletter. The web page has been developed by BAHA resources officer Joe Bukikun and aims to be a stand-alone collection of stories and resources for working women and HIV.

Our stories this month remind us we have a lot to learn and BAHA challenges all employers to create policy

and develop programs that ensure young female employees have:

- Equitable access to prevention through education, condoms and decent workplace conditions that also confront domestic violence issues
- Equitable access to treatment and care services
- Systems in place to prevent mother to child transmission of HIV

Whilst we have a lot of work to do in creating interventions designed for young females aged 15-29, males aged 35 and older are also on our agenda.

Our stories this month are real stories about the high and increasing vulnerability of young women to HIV due to gender based economic inequalities: ignorance, sexual violence in homes, the workplace and other social spheres including schools, lack of access to prevention, education and training and care.

Workplaces - especially workplaces dominated by older, powerful men, have to acknowledge that many of the roles and attributes assigned to young PNG women are not providing them with the ability to protect themselves against HIV or have the capacity to cope with its impact.

We look forward to another month of vibrant feedback to this month's challenging newsletter.

BAHA FACTS FOR MARCH 2009:

- **In March BAHA held its 20th workplace training course**
- **BAHA workplace training has included 429 employees from 207 different companies**
- **51% of HIV workplace trainees are women**

Liesel Unduka, HIV Smart young working woman, is a member of the Westpac HIV Committee and is responsible for communicating any information about HIV and related issues to her Westpac colleagues including the BAHA Newsletter



The BAHA “young working women” stories for March 2009

Each member of the BAHA staff was asked to collect and record a story from a working woman aged 19 to 24 years of age and how HIV has had an impact on their life in any way.

BAHA story number 1 “A Working Woman living with HIV”

A story collected by Joe Bukikun from Freddie an HIV workplace champion working in Madang

My friend and ex-work mate contracted the virus in 2007. She knew her status after having a chat with me on the importance of knowing our HIV status and the benefits one can enjoy after knowing their status be it “positive” or “negative”. I encouraged her to take the challenge because I did the test myself. I took her to the VCT site and she went through the counselling and testing.

She sort of broke down when she knew her result. She did not tell me but I could see in her eyes. She thanked me for being there for her. I dropped her off at her house and for two weeks did not hear or see her but got phone messages that she was sick. It was not normal because she calls and drops in to see me at least everyday.

I knew she was fighting with her thoughts because she is HIV positive. I ended up at her place one afternoon after work and had a chat with her, updating her on the latest in the office and some gossips about our friends as usual. While we were updating each other and laughing, she broke the news that she wanted to resign on the grounds that she is HIV positive and do not want our colleagues to know.

She asked for my opinion and my response was straight NO. I knew at that time, I have a big responsibility to look after my friend. I told her on what I have learnt in the trainings I have attended and encouraged her to come back to work so that she can be in contact with me everyday when she need me.

She agreed with my idea and she is now working. We attended HIV trainings together and she learnt a lot of things for herself. She is a member in one of the “people living with HIV and AIDS” (PLHIV) organisations, she is much better than me in terms of Positive Living, she has completed two years of training in her job and has just been promoted into a Manager position in Jan 2009.

Her HIV status is not known by her family members, our peers and even her employer. She is planning to disclose her status in 2011 on the same date she knew her status. She is like my right hand when I run short on my knowledge on HIV. I should say she is now two steps ahead of me in terms of knowledge about HIV. Congratulations!

Female workplace training participants Rose Toreas (BSP), Joycelyne Tsigoto (CPL) & Jennifer Harepa (Hanis Inn) at HIV workplace training Buka recently. Here women team up against men in the “know your STIs” challenge. (the women won!)



Story number 2 “Shana”

Contribution from a champion working in a large construction company as told to and recorded by Eileen Seneve

This is a story about a young lady - Shana works for a large construction company in Milne Bay and had attended BAHA Workplace Training in Alotau last year. Since that time, she has been very active in conducting HIV & AIDS programme for her company assisted by other champions. She shares her personal feelings on HIV. “It is a subject that makes me wonder and fearful of what might happen to the future generations, knowing that more than half our population are illiterate and I feel sad that we are unable to reach the rural areas to share our knowledge of HIV with them.”

She believes that positive attitude towards HIV and learning about it would help people to talk about it. She writes: “As a young woman I can only think of wanting to educate more people about HIV/AIDS. I don’t think money will solve the problem. Yes, it may assist us to go to rural areas to do the awareness but if we look at HIV as everyone’s responsibility, just by talking about it every day with friend and family, will make a difference. It costs nothing to talk. I only wish every one of the people we talk to, acquire the knowledge exactly the way we impart it. I think more awareness needs to be done both in the rural and urban areas, to the literate and illiterate.

When asked about the risk at her workplace she says, “The risks of HIV infection for me at work is relatively high because we work in a construction area where accidents are bound to occur. But I believe with the preventive measures the staff members are now being trained to take, with first aid and safety procedures, this may reduce the risk of any the infection.”



Because of sharing right information about HIV, she states, “At work, in the office and on the job sites, it is just another topic for open discussion among us. In my opinion, it is a great feeling to have relayed the basic facts about HIV/AIDS to the staff and their families and especially in a male dominated workforce, it is a satisfying experience to talk about HIV/AIDS with them and have them listen, as well as share their views on the subject.

Does she carry condom? “Oh, yes I can and yes I do carry them with me when I am going to the village on weekends, to give out to the young people who are still very negative about the condom. Confidently I can talk about the condom in public places, in the work place, in the village and near by communities. I feel comfortable talking about condoms with people, both men and women.

Shana – BAHA’s workplace champion shares the following information of knowing people who are living with the virus. Yes, I do know two women, personally, both living with HIV. Both have come out publicly with their status. For both of them, there is hope for the better, there is life, they feel confident of living life normally, and I am quite pleased to say one has a normal relationship with someone who doesn’t have HIV, but who cares for her very much. One of them has a child that was born negative and it gives her the will to live on for the child. Their example just shows that there is life still there for people with the virus. What is to stop them from living a normal life, the only thing would be a negative attitude!

Go to BAHA new webpage for MARCH 2009 from www.baha.com.pg and click on “young working women and HIV in PNG” to read the rest of the BAHA stories.

Also on the BAHA “young working women webpage” this month click through now - Audio files from Wantok Media Production of “Rosie’s story” for you to download and listen to our preview... order the full audio

version from BAHA - see a review of Vavine's Curse a PNG novel about a young woman and HIV by David Lornie – checkout BAHA's young working women and HIV website collection for March 2009 - Dr Gideon Nano – get to A and E immediately for PEP!

I didn't find anything hard about going for VCT, I went with friends for support, we all went to support each other. The staff at the House of Hope down at Ela Beach made us feel at home, the whole set up is homely, not like a hospital. We felt very welcome. It didn't take long Madeline Saga, BAHA staff

PNG FACTS: HIV and Young women – New HIV Infections from January to June 2008

- 1,559 newly confirmed HIV cases were reported
- 911 (58%) were females, 617 (40%) males
- The ratio of newly confirmed HIV infections in the first and second quarter of 2008 was almost 3 females to 2 males
- Females are infected at younger ages than males

“Every minute a woman dies in child birth or from pregnancy related complications” PGPD
www.pgpd.asn.au

Antiretroviral therapy (ART)

- 701 adults (379 males and 322 females) and 13 children (10 males and 3 females) started receiving antiretroviral therapy (ART)
- One hundred and twenty-four HIV infected pregnant women received ART to reduce transmission of HIV from mother to child
- 87 people (gender not specified) received emergency post exposure prophylaxis for HIV. (2008 STI, HIV & AIDS SIX MONTHLY SURVEILLANCE REPORT Jan – June, 2008 National Dept of Health STI, HIV & AIDS Surveillance Unit)

BAHA FACT from 7200 2242

Only 20% of all calls to BAHA Digicel Toll Free HIV infoline are from women.

Young working women and HIV: BAHA HIV workplace policy implications PEP

BAHA's focus on PEP is consistent with International Labour Organisation (ILO) guidelines and the World Health Organization (WHO). An HIV workplace policy creates a need for procedures to deal with HIV exposure through accident, assault or domestic violence. So BAHA members need to inform all employees about access to HIV post-exposure prophylaxis (PEP) as part as their company HIV policy.

Post-exposure prophylaxis (PEP) to HIV is the only way of reducing the risk of development of HIV infection in an individual who has been exposed to the virus – by either workplace accident, sexual assault or sexual accident.

The provision of post-exposure prophylaxis following exposure to HIV requires discussion, research and planning. Every day workers, especially health workers, emergency rescue staff, waste-disposal workers, law enforcement personnel, heavy machinery operators others may be exposed to infected blood and other body fluids while performing their work duties. In PNG, we know young women return to work after sexual assault. BAHA's members need to be fully informed about post-exposure prophylaxis (PEP) to prevent HIV infection and how to access or provide PEP, a short-term antiretroviral treatment that reduces the likelihood of HIV infection after possible exposure.

Your workplace guidelines need to address the practical aspects of the use of HIV PEP and provide a direct help to execution of services for both occupational and non-occupational exposure to HIV, including in cases of sexual violence or accidents.

PEP planning discussions may include ethical and human rights issues associated with HIV. This includes discussions about - the right to access PEP in the case of workplace accident or assault in a workplace. Questions may include - whether or not compensation be provided when a workplace could have accessed PEP and didn't? Will access to PEP be equitable and accessible for all those who require the treatment? None of these questions can be answered without full knowledge of PEP.

“A safe and healthy workplace requires HIV PEP to be widely available for all who need it.” Dr. Sophia Kisting, Director of the ILO's Programme on HIV/AIDS and the world of work

Workplace HIV programs include family planning programs for young working women

Family planning education in PNG in 2009 has to include HIV education on prevention of parent to child transmission of HIV. HIV and family planning programs both aim for healthy sexuality and use of family planning services. Family planning programs are most appropriate for workplaces where young women

work. Family planning programs as part of HIV programs create an opportunity for educating and counselling sexually active young women about the whole range of sexual risks, including those for unintended pregnancy and exposure to HIV. A family planning program can include unmarried young people who are not sexually active; unmarried, sexually active young people; married young people; mature women exposed to risk from their partners; men choosing condoms, men seeking information about vasectomy, and couples seeking family planning advice and services.

Young working women and condoms

Educated young women who work are more likely to know about how to prevent HIV infection. Well-trained young working women are less likely to have misconceptions about transmission, and more likely to use condoms. However, the best predictor of condom use is condom availability. All BAHA members have access to FREE Condoms and they need to be equally available to young women and men at your workplace. Whilst younger employees may find condoms acceptable, work also needs to be done to educate older men about the benefits associated with of condoms.

BAHA has made access to condoms easier Call Joe or download the new condom order form. Companies can now pick up direct form National Department of Health condom warehouse in Badilli with the new form.

BAHA promotes HIV Smart Shipping and transport



Shipping & transport industry leaders and HIV champions from Steamships Shipping, PNG Ports Corporation, POM Transport, Express Freight Management, Wartsila, Port Services, Consort Express Lines Ltd, Papua New Guinea Dockyard Ltd, Marine Engineering Services, Inchcape Shipping Services(PNG) Ltd, Rakip Agency Logistic Limited, P & O Maritime Services (PNG) Ltd, Post PNG Limited - Seafast Freight & Customs Services, Post PNG Limited - Seafast Freight & Customs Services, Bismark Shipping, Gobe Freight Services Limited, National Fisheries Authority, Nings Agency Limited, Maritime Safety, Swift Shipping Agency, Kyowa Line - Deugro PNG Ltd the BAHA Shipping & transport HIV Port Moresby Tokaut

NASFUND challenges members to “Check your HIV status. Call BAHA toll free 7200 2242 to find out how” in its new Text Bal superannuation balance innovation. Let BAHA know how your business promotes positive HIV messages to the wider world? Email us enquiries@baha.com.pg

From the BAHA enquiries line

BAHA has received several enquiries about programs promoting adult male circumcision as a form of HIV prevention. Male circumcision is the surgical removal of some or all of the foreskin (or prepuce) from the penis. Whilst there is evidence male circumcision reduces the risk of heterosexually acquired HIV infection in men, it is NOT a form of protection against infection. BAHA supports workplaces to conduct regular HIV education about all aspects of HIV and STI prevention, treatment and support methods and services. Good HIV education enables employees to make informed decisions about prevention, risk and treatment issues. BAHA promotes correct and consistent condom use as the only effective prevention of sexually transmitted HIV. BAHA will cover the issues of male circumcision in our Men’s only edition – due out in July.



www.baha.com.pg