

igration

A Bulletin of News, Information and Analysis on Migration Health in Southern Africa

IOM Regional Office for Southern Africa • Pretoria • South Africa



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IOM International Organization for Migration OIM Organisation Internationale pour les Migrations OIM Organización Internacional para las Migraciones



IOM Project Partner wins Award at the 2009 Investing in the Future Awards



Hlokomela (Farm workers care for each other) - an HIV prevention and care programme for farm workers was awarded the "Investing in Life Award" at this year's Investing in the Future Awards ceremony held at Illovo's Summer Place, in Johannesburg, South Africa on the 29th of October 2009.

The Investing in the Future Awards is a joint initiative of the Mail and Guardian (M&G) newspaper in partnership with the Southern Africa Trust (HTT), aimed at honouring companies and organisations that contribute to the wellbeing of society by investing in people.

The Hlokomela project was launched in 2005 by the Hoedspruit Training Trust in partnership with IOM's migration health programme, to address the HIV vulnerability of The project was farm workers. informed by the results of a study conducted by IOM, in partnership with the Japan International Cooperation Agency (JICA), in 2003, which revealed high levels of

mobility and migration on commercial farms and relatively high levels of risky sexual behaviour.

Initially implemented on 18 farms, the project has now expanded to 49 agricultural farms in the Hoedspruit area of the Limpopo province, and works with farm workers, managers, owners and the community to implement a comprehensive prevention and care programme.

"The innovative dimension of the Hlokomela Project lies in its holistic approach, emphasis on local ownership and interdependence on networking.

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Editorial >>>

Dear Reader

As newly arrived Regional Representative for IOM's Regional Office for Southern Africa, I'm pleased to present the second issue of the "Eye on Migration Health" – a newsletter which consolidates migration health activities in various parts of the region.

With more people travelling and to more destinations in search of work or safety, human mobility in southern Africa is increasingly impacting upon the health of migrants as well as on the public health of countries in the region. Limited or no access to health care due to legal, economic, language or socio-cultural factors has resulted in the marginalization of various migrant groups.

In southern Africa, particular concerns are adverse reproductive health and communicable disease outcomes, such as HIV, STIs, and Tuberculosis. These diseases are non-discriminatory in that they affect both migrants and non-migrants, both within and across



Bernardo Mariano
Regional Representative for Southern Africa

borders. Therefore a coordinated regional approach to tackling these concerns is essential to positively impact on the Millennium Development Goals.

Migration health however, is more than just a focus on diseases among mobile populations. It touches broader determinants of health such as housing, education, occupational health, nutrition, food security as well as environmental conditions.

IOM's Migration Health Unit (MHU) believes that addressing the well-being of migrants and respecting the rights of migrants is a long term investment for the benefit of all. Inadequate attention to the health needs of migrants can negatively impact on the public health of host countries, while well-managed migration health will facilitates the integration/reintegration of migrants, contributes to stable societies, and ultimately enhances development for all.

This issue of the *Eye on Migration Health* Newsletter introduces various activities undertaken by IOM, such as research, workshops, on-the-ground implementation, and development initiatives that highlight the challenges faced by migrants in their day-to-day lives. There is also a story on how IOM contributes and encourages responsible media reportage on migration through tailor-made media training workshops that enhance the knowledge, skills and experience of journalists in this area.

The Newsletter concludes with our usual back-page migrant story from southern Africa; this time we met Richard, a 50 year-old truck driver from Okakakara in the north of Namibia who tells us about his experiences on the road.

We welcome your feedback, so please do contact us with any suggestions or comments.

Bernardo Mariano (IOM Regional Representative for Southern Africa)

Continues from page 1...

The programme sees farm management, farm workers and their families as part of one community," says Christine Du Preez, programme manager for Hlokomela.

The judges felt that the cornerstone of the Hlokomela project design lay in its empowerment of people through targeted peer education. Hlokomela encourages local ownership and team-building and "goes the extra mile," in terms of improving the quality of life, service delivery and innovation that impacts positively on the lives of migrant farm workers.

Previous winners of the "Investing in Life Award" include Standard Bank's corporate health programme and the Walter Sisulu Paediatric Cardiac Centre for Africa.

Based on the success of the Hlokomela project, IOM, with funding from the United States Agency for International Development (USAID) is now implementing the Ripfumelo Project which targets 20 000 migrant farm workers and their families on 120 farms in Limpopo and Mpumalanga provinces of South Africa.

Read more about the Ripfumelo project on page 2.

"Hlokomela encourages local ownership and team-building and "goes the extra mile," in terms of improving the quality of life, service delivery and innovation that impacts positively on the lives of migrant farm workers."

Traditional Methods of Promoting HIV Education not having the desired effect on Migrant Farm Workers

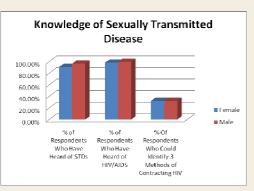
IOM recently completed a baseline assessment on farms in Musina in the Limpopo province of South Africa, in order to understand farm workers' HIV related knowledge, attitudes, beliefs and perceptions; to identify prevalent gender norms and beliefs; and to investigate factors that increase HIV vulnerability.

The assessment, which was conducted on five farms, involved 511 respondents, with the majority (71%) of the respondents being between the ages of 20-39 years and with just over half (55%) being male. Of the total, over two thirds (65%) are from Zimbabwe with the remaining being of South African origin. Just over half (54%) of the respondents had reached secondary schooling.

Knowledge and Beliefs Related to STIs, HIV and AIDS

The assessment revealed that awareness and education campaigns do exist on the farms, and that there is a fair level of knowledge concerning HIV and modes of transmission among farm workers. However, when asked to identify three modes of transmission, less than half of the respondents were able to do so. This seems to indicate that traditional methods of promoting HIV education are not having the desired effect. Of particular concern, is the belief held by half the respondents (45% of female and 50% of male) that the people living with HIV are infected because of their own carelessness.

The assessment also found that 37% of respondents believed that HIV can be transmitted through mosquito bites, while less than half that amount (13%) thought that HIV could be transmitted



through sharing cutlery with an HIV positive person, eating food prepared by an HIV positive person and by working with an HIV positive person.

While the majority of respondents (87%) believe that it is important to know your HIV status, less than half of the males (33%) reported that they had actually gone for testing, versus 53% of the female population.

Reasons for this discrepancy were beyond the scope of the assessment, however when this statistic is combined with the knowledge that 20% of the respondents thought it was acceptable for a man to have more than one sexual partner, there is cause for concern.

Condom Use

While most respondents indicated that they could obtain condoms if they wanted to and that unprotected sex was the main means of HIV transmission, misconceptions do exist as almost 70% of respondents reported that they have never used a condom, and just over 20% use condoms sometimes.

Key informant interviews indicated that respondents thought free condoms were of poor quality. The assessment further found that a third (33%) of respondents thought that using condoms reduced sexual pleasure. These are clearly issues that will have to be addressed through current prevention programmes available to farm workers.

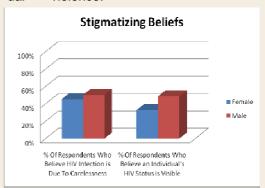
Gender Norms

The assessment found that there are distinct gender discriminatory perceptions and practices among the farming community: Just under one third (30%) of the respondents believe that women should not be able to hold the same job for the same pay as men; and While 36% of the respondents indicated that it was acceptable for a man to have more than one sexual partner, almost no one believes that it is acceptable for a woman to have more than one sexual partner.

Results also indicate disturbing perceptions on relationships and sexual practices:

22% of respondents feel that women need to be pressured to have sex sometimes; 16% feel that it is acceptable for a man to beat his girlfriend if she does not obey him; and 40% feel that a man should control the decision making process in a relationship.

These findings present a noticeable gender power imbalance and leave women open to physical as well as sexual violence.



Factors that increase HIV vulnerability

The continued vulnerability of migrant populations remains a concern. The survey results indicate that almost 10% of the females interviewed had engaged in sexual acts because there were material services to gain. The survey also found that just over 10% of women had been forced to have sex. This is another indication that the migratory process is not without its risks and does leave the female portion of the population open to abuse.

"This assessment has identified a number of issues to be taken forward during the design and implementation of the USAID Ripfumelo project. Firstly, there is a need to intensify education on HIV in order to increase knowledge and understanding amongst farm workers. Secondly, there is a need to tailor-make interventions so that they address specific mobility and migration related vulnerabilities," says Dabea Gaboutloeloe, IOM's Migration Health coordinator.

**The USAID Ripfumelo Project is an HIV prevention and care programme that targets 20 000 migrant farm workers and their families on 120 farms in the Limpopo and Mpumalanga

IOM and USAID officially launch Ripfumelo HIV care and prevention programme

The International Organization for Migration (IOM) and the United States Agency for International Development (USAID) officially launched the Ripfumelo HIV prevention and care programme targeting commercial farm workers in three districts in the Limpopo and Mpumalanga provinces of South Africa on the 13th of August, 2009.

The launch event included a seminar jointly organised and co-hosted by IOM and the Musina Local Municipality, in close collaboration with the Provincial Department of Health and Social



RIPFUMELO

Development and Limpopo Office of the Premier. The seminar brought together stakeholders from Government, NGOs and academia in order to, address issues related to increasing migrants' access to health services, as well as finding solutions to challenges relating to migrants' health.

The commercial agricultural sector particularly in Musina (one of the *Ripfumelo* Project sites) employs a large number of seasonal workers, many of whom are cross-border migrants. This, amongst other things is what prompted the seminar in order to raise awareness and increase understanding among different stakeholders on migrant health issues as well as to facilitate networking and increased coordination among stakeholders at local, district and provincial level on the issue of migrant health.

The Musina Local Municipality has experienced an increase in the number of migrants over the past year and this has stretched the already overburdened health system and created a breeding ground for other communicable diseases.

Médecins Sans Frontières (MSF) relieves some of the burden of providing medical assistance through two mobile clinics one which operates from Monday to Friday at the Department of Home Affairs (DHA) compound in Musing; and the other which travels to farms in the Musing area.

Miff's Giuseppe De Molar was present at the seminar and presented on recent research findings on migrants' health in Musing. These included the fact that access to healthcare for refugees, asylum seekers and migrants is still difficult, despite their legal right to access healthcare. The fear of arrest, deportation and xenophobia, coupled with a lack of information about their rights has kept many migrants from accessing basic services necessary for survival.

Also present at the seminar, the World

Health Organisation's Dr. Kalpesh Rahevar who explained how the increased volume of population movement around the world is presenting unique challenges to existing health services in receiving countries like South Africa. Lynette Mudekunye of Save the Children spoke on the challenges faced by unaccompanied minors including being often turned away from health service providers precisely because they are unaccompanied by an adult, and also because they are unable to afford the medical fees required.

The USAID funded Ripfumelo Project targets 20 000 migrant farm workers and their families on 120 farms and presents social change communication as the main method for addressing HIV and AIDS. The social change communication approach encompasses gender dynamics, peer education, access to health services, contextual factors which contribute to vulnerability, workplace policies relating to HIV and AIDS and workplace programmes that build the capacity of migrant workers.

More info visit out website at http://www.iom.org.za/ripfumelo



Peer Educators successfully complete training programme

IOM Zambia's migration health programme recently graduated twenty peer educators in Katete, Eastern Province, a town on the main thoroughfare linking Zambia with Malawi and Mozambique. The major industry and source of income for families in this district is a cotton ginnery which attracts labour migrants from throughout the province and beyond.

In partnership with Zambian NGO Comprehensive HIV and AIDS Programme (CHAMP), IOM runs

programmes targeting mobile workers at the ginnery who often cannot access prevention, treatment and care services. The 20 graduates have been trained to work with these often hard-to-reach mobile workers in Katete. In particular, they will focus on addressing the gender dynamics of labour migration by employing a range of social and behavioural change communications in their approach.

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Present at the graduation ceremony were the Katete District Commissioner (DC) and the District Director of Health, who both congratulated the graduates and described the challenges of reaching Mozambican irregular migrants who come to Zambia for a short period and often fall outside the mandates of social and community service providers.

Community members travelled from far and wide to attend the graduation, which included a formal ceremony followed by netball and soccer matches. Mobile health services were provided on-site and attendees had the opportunity to check their weight, glucose levels and blood pressure.

Additionally participants were provided access to dental services and voluntary HIV counselling and testing facilities.

Prior to their graduation, peer educators had already been working on social change communication, community outreach, and recreational activities to address issues that are particularly important to their beneficiaries. One of the highlights, they reiterated, has been the darts league that they established. The league provides ginnery workers with social activities outside of the workplace, and brings people together. They will continue to develop and implement innovative programmes targeting migrants and mobile workers in Katete.

Promoting Responsible Media Reporting on Migration, Diversity and Development

Media has the responsibility to report accurately, fairly and ethically on a wide range of issues including social issues. However, due to some challenges in the newsroom including tight deadlines and a lack of time and resources for proper investigation of stories, it is often difficult for journalists to report adequately on relevant social issues.

During the month of August 2009, IOM, in collaboration with Frayintermedia, conducted a series of media sensitisation workshops in three separate locations: Gauteng (South Africa), Limpopo (South Africa), and Lusaka (Zambia).

The journalists came from various spectra of media including print, broadcast and online media. The training was designed to improve the quality of media reporting on diversity and migration, including migration health and HIV, by knowledge, skills and building the experience of journalists. The workincreased awareness shops also among journalists of migrants' rights and the role played by media in shaping public opinion, particularly in emergency and conflict situations.

During the three-day training workshops, the journalists were given the opportunity to interact with migrants and local residents from diverse backgrounds in their own settings, in order to better understand the challenges they face.

In South Africa, the journalists visited migrant shelters and farms in Musina, as well as Alexandra township in Johannesburg – one of the townships that were most affected by xenophobic violence in May 2008.

In Lusaka, journalists visited the Zambia-Zimbabwe border town of Kirundi, which is characterised by high levels of population mobility, particularly truck drivers and informal cross-border traders, mostly from Zimbabwe. Through these interactions the journalists were able to gain insights into how structural and environmental factors such as lack of shelter and limited access to health-care can increase the vulnerability of migrants to negative health outcomes including vulnerability to infectious diseases.

Monica Mayuni, a journalist from the Daily Mail in Zambia who participated in the programme described the workshop as "good, unique and interesting.



"Journalists take a break from interviewing migrants and locals at Alexandra Township – Johannesburg, South Africa." Pic. IOM

I say so because you did not only give us the techniques of writing and why it is important for journalists to use the correct terms when writing about migrants, but our tour to Kirundi and talking to some of the migrants and getting their real life experiences was captivating and I am personally grateful for that."

Through these workshops 35 journalists were trained. IOM also conducted a similar sensitization workshop with partner ABC Lwazi, which saw nine presenters and producers from community radios in nine provinces of South Africa receiving training on responsible reporting on migration in February 2009.

"The workshop was good, unique and interesting. I say so because you did not only give us the techniques of writing and why it is important for journalists to use the correct terms when writing about migrants, "

Monica Mayuni, Journalist, Daily Mail—Zambia.

"One Love Campaign" - addressing Multiple Concurrent Partnerships

A Multiple Concurrent Partnership (MCP) is defined as a relationship where the man or woman has more than one sexual partner at the same time, and the partners overlap for weeks, months or years. This is a common practice in sub-Saharan Africa and research evidence over the years has shown that MCP is one of the primary factors in the spread of HIV in the region.

In response to this, Soul City has embarked on a unique three-year prevention campaign focusing on MCP that has been rolling out across the region since 2008. The "One Love Campaign" is a multi-media, multi-country HIV prevention campaign targeted specifically at countries in Southern Africa. The core message of the campaign focuses on eliminating secrets and lies in core relationships by communicating effectively and challenging harmful cultural practices that put people at risk of HIV.

The campaign was informed by an extensive 10-country research study conducted by Soul City and its regional partners in South Africa, Botswana, Lesotho, Malawi, Mozambique, Swaziland, Namibia, Zambia, Zimbabwe and Tanzania. The study confirmed MCP as a key driver and sought to further identify the reasons why people have MCPs. Some of the common reasons included sexual dissatisfaction and lack of communication in relationships. More common drivers of MCP were identified as emotional and physical dissatisfaction, social and cultural norms, the need for money and material possessions as well as alcohol. Also evident in sub-Saharan Africa is the fact that populations in this region are highly mobile as people search for better income opportunities in different locations and countries.



Mobility, and the loneliness and isolation this generates, contributes to the phenomenon of MCP. Migrant and mobile workers often live and work under difficult circumstances where preventing HIV is not perceived as a priority; this puts them at a higher risk of HIV infection. In most cases, migrant workers are often separated from their permanent partners for long periods and this in turn means that they are more inclined to engage in short and long -term sexual relationships with more than one partner at the same time.

It has also been shown that mobile populations have limited access to quality information that addresses their needs. In response to this gap, Soul City, in collaboration with IOM and Trucking Wellness is providing relevant information and educational materials to migrants and the communities with which they interact in key border communities and "hot spots" along transport corridors, as part of the One Love Campaign.

For more information visit www.onelovesouthernafrica.org or contact Soul City at soulcity@soulcity.org.za

IOM hosts Photography Exhibition -"The Search for a Better Life" in Lusaka, Zambia

IOM Regional Office for Southern Africa, in collaboration with IOM Zambia and the Market Photo Workshop's Photojournalism and Documentary Programme, recently held a photo exhibition at Zambia's Henry Tayali Gallery in Lusaka.

The "Search for a Better Life" featured a selection of photographs depicting the socio-economic living and working conditions of migrant and mobile workers in the mining town of Solwezi, the cotton ginning town of Katete, and IOM's Migrant Support Centre in Chirundu. The photographs were taken by two Market Photo Workshop students, Mpho Khwezi and Davina Jogi, who travelled to vari-



ous parts of Zambia in 2008 capturing on film the daily joys and challenges of migrants, including issues relating to accessing health services and HIV vulnerability. Their trips were facilitated by IOM's implementing partner, Zambian NGO CHAMP.

The launch ceremony was presided over by the Permanent Secretary of the Zambian Ministry of Home Affairs, Mrs. Ndiyoi Mutiti, who delivered a poignant speech touching on Zambia's long history of hosting migrants from neighbouring countries. She encouraged authorities, civil society, families and local communities to be part of the process of dealing with some of the tensions that can result from migration.

Her sentiments were echoed by the United Nations Resident Coordinator in Zambia, Mr. Macleod Nyirongo: "Migrants' rights are human rights, and we cannot distinguish between the two." Mr. Nyirongo emphasized that the right to the highest attainable standard of health is not only the right to health-care but also to underlying determinants of health such as safe drinking water, adequate sanitation and housing, education, and health-related information. The event brought together stakeholders from government, civil society, media and the general community of Lusaka.

A selection of some of the photographs can be viewed on page 10 and 11 of this newsletter.

Promoting Health of Migrants in Southern Africa

Health is a basic human right, and addressing the health needs of migrants benefits both migrants and host communities alike – this was the main conclusion of the 16th Migration Dialogue for Southern Africa (MIDSA) "Promoting Health and Development: Migration Health in Southern Africa", which was held in Dar es Salaam, Tanzania from the 10th to the 12th of June 2009.

With more people travelling and to more destinations in search of work or safety, human mobility in Southern Africa is increasingly impacting upon the health of migrants as well as on the public health of countries in the region. Limited or no access to health care due to legal, economic, language or socio-cultural factors has resulted in the marginalization of various migrant groups.

Hosted by the Government of Tanzania and co-organised by the International Organization for Migration (IOM) and the Southern Africa Migration Project (SAMP), in special collaboration with the World Health Organization (WHO), the specific objectives of this dialogue were, to raise awareness and increase understanding among SADC Government officials on migrant health issues globally and within the SADC region; to share good practices of governmental and non-governmental responses to improve migrant health; to identify and agree on the main needs, gaps and challenges with regard to policies and programmes as well as to facilitate networking and increased coordination among SADC Ministries of Health, Home Affairs and other relevant sectors on the issue of migrant health.

Some of the recommendations resulting from the MIDSA were that:

- Ministries responsible for immigration should undertake a policy review to ensure that immigration policies explicitly reflect the rights of migrants to access health care and services:
- SADC Member States should promote the inclusion of migrant health into primary health care reform principles and ongoing health systems strengthening efforts;
- SADC Member States should implement existing SADC policies and protocols as well as bilateral agreements that facilitate migrants' access to health;
- SADC Member States should adopt, then implement, the draft Policy Framework on Population Mobility and Communicable Diseases to ensure policy coherence in the Region;



Delegates at the MIDSA conference

 SADC Member States under the initial leadership of the Ministries of Health should designate focal points responsible for establishing mechanisms to facilitate multi-sectoral dialogue and promote partnerships on migration and health, including public-private collaborations to provide and contribute to health services for migrant populations.

The complete report of the MIDSA can be downloaded from www.iom.org.za/ publications/midsa

MIDSA is a consultative process for SADC states (Angola, Botswana, DRC, Lesotho, Madagascar, Malawi, Mauritius, Mozambique, Namibia, Seychelles, South Africa, Swaziland, Tanzania, Zambia and Zimbabwe) initiated in 1999 allowing members to meet in an informal and non-binding scenario and to exchange views on common challenges and solutions on migration issues.

"SADC Member States should promote the inclusion of migrant health into primary health care reform principles and ongoing health systems."

IOM detects possible TB problem amongst returning migrants at Plumtree Centre - Zimbabwe

The Plumtree Reception and Support Centre (PRSC) in Zimbabwe sees an average of 157 returnees a day. During its first year of operation, the centre has picked up three "known" cases of multi-drug resistant (MDR) TB amongst the returnees that pass through the centre. This is particularly worrying because of the infectious nature of TB.

Prompted by this, the Migration Health Unit at IOM Zimbabwe in close consultation with the Center for Disease Control (CDC) Zimbabwe developed and piloted a Tuberculosis Rapid Assessment Tool (TBRAT) to help them in estimating the prevalence of TB in the returnee population.

TBRAT uses a scoring system based on a selection of categories which include signs and symptoms of TB, past TB diagnosis, HIV status, physical appearance and other actors.

This tool was field tested for a two-week period (24 July – 7 August 2009) by IOM nurses to document the possible number of TB suspects that were passing through the border among the returned migrant population. Since a TB case cannot be confirmed without a lab test and x-rays, the results of the TBRAT over this period were limited only to "probable" TB cases. Of the 1826 returnees that were assessed over a two-week period, 22 "probable" cases of TB were detected.

This can be generalized to roughly 532 TB cases per year – which is indicative of an underlying TB problem amongst returnees. This information would be useful towards forming a more intensive approach to TB screening in order to improve timely referrals to hospitals, and IOM is currently engaging relevant stakeholders in order to decide on the way forward.

"This is in line with our mission to ensure that returning migrants are transported to their destinations in a reasonable state of physical, mental and social wellbeing which does not jeopardize their safety as well as that of others travelling with them" states Dr. Tete Amouh, Migration Health Advisor at IOM Zimbabwe.



New Publications >>>>

"Gender Manual" – an action oriented training manual on Gender, Migration and HIV



This is a training manual on Gender, Migration and HIV, that has been developed by IOM in partnership with the Sonke Gender Justice Network (Sonke).

The training manual is intended to build the technical capacity of individuals and organisations in order to address specific gender and HIV vul-

nerabilities that occur within migrant settings. It has been designed both for use as a "train-the-trainer" (ToT) tool as well as an 'on-the-ground' tool for facilitators in different settings. This manual can be used at workshop settings, and also as a resource and facilitation guide for those working on issues of migration, gender, HIV, sexuality, health, violence, human rights and citizenship.

The development of this manual emanates from the partnership between IOM and Sonke which started in 2006 when they worked together with the Hoedspruit Training Trust (HTT), to integrate gender-related activities into their HIV programme targeting farm workers in Limpopo province, South Africa. The lessons learned from this intervention and other subsequent interventions in various settings have been incorporated into this manual. In addition, an in-depth review of various training manuals addressing related content was conducted and relevant activities were adapted for the manual. This was done through a desktop review, meetings and conversations facilitated by both Sonke and IOM.

Working Beyond Borders" - Radio mentaries

Docu-



IOM's regional office for southern Africa, in partnership with ABC Ulwazi has produced a six-part series of radio documentaries that portray the day-to-day lives of labour migrants from the region. These documentaries tell the real life stories of labour migrants and their encounters and interactions with the South African public. They

light both the positive and negative consequences of labour migration with particular reference to HIV and human rights vulnerabilities that are associated with mobility.

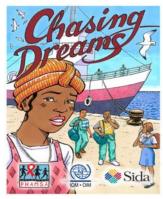
The making of these documentaries involved interviews with migrant workers who are employed in the six sectors of the South African economy most characterised by employment of migrant workers and high mobility, as well as experts from these fields including employers and other stakeholders.

The series contains six 20-minute episodes, each concentrating on the Fishing, Commercial Agriculture, Mining, Road Transport (trucking), Construction, and Informal Cross Border Trade sectors of South Africa.

The documentaries are aimed at raising awareness of the dynamics of labour migration in the region and have already been aired in nine radio stations in all the provinces of South Africa. They are available in English, Afrikaans, isiZulu and seSotho.

>>> More New Publications

"Chasing Dreams" - a comic resource exploring the challenges facing a migrant community, with a particular focus on HIV vulnerability.



"Chasing Dreams" aims to raise awareness of the challenges facing migrants, mobile workers and the communities with whom they interact. Of particular significance is their vulnerability to HIV.

While the story is set in Walvis Bay, Namibia, the themes are relevant to service providers, managers

and policy makers throughout southern Africa and around the world.

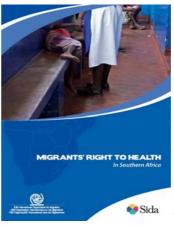
Walvis Bay, with its harbour, fishing industry and two main highways linking Namibia with the rest of southern Africa is an attractive prospect for migrant workers. However, the jobs they find in the fishing industry separate them from their families for long periods at a time, and may place extreme stress on relationships.

The employment contracts of fisherman are often unfair and difficult to understand. Often relationships between the fishermen and their managers or officers are plagued by poor communication, unfair labour practices and a lack of respect and dignity. The existing vulnerability of the local community leads to relationships of transactional sex, including the relationships between foreigners and sex workers and between moneyed fishermen and poor youth. Female migrants who cannot find jobs often have to turn to the sex industry for an income.

These are a few of many themes highlighted in *Chasing Dreams*, which aims to encourage policy makers in government and the private sector to make decisions that reduce the HIV vulnerability of migrant and mobile populations and the communities with which they interact in Namibia.

During the writing of the comic, a participatory methodology of workshops and interviews were held with fishermen, sex workers, school children, public service officials, management from fisheries companies and Walvis Bay community members in order to capture real life stories and issues faced by each group. As part of the project's commitment to building local capacity for educational media development, IOM and Event Horizon Productions (EHP) also facilitated a two-day comic development workshop with students at the Katutura Community Art Centre in Windhoek.

Migrants' Right to Health in Southern Africa



The right to health is not only the right to healthcare, but it is also the right to underlying determinants of health such as safe drinking water, adequate sanitation and housing, education and health related information.

This report traces some of the relevant constitutional, legislative and international standards that are applicable in each of the Southern African Development Community (SADC) mem-

ber states regarding migrants' right to health.

The survey reveals that the law in all SADC member states contains either expressly or implied provisions that guarantee migrants right to health.

This report can be used as a quick reference tool to government officials, migrants and service providers in protecting and promoting migrants' right to health in SADC member states.

>>> Upcoming Events

November 2009: Durban, South Africa

IOM will host a regional consultation on HIV responses among seafarers and port-based communities from the 4th to the 6th November

November 2009: Thohoyandou, South Africa IOM in partnership with the Vhembe District Municipality will host a migrant health forum for collaboration and partnerships between stakeholders on the 18th of November 2009.

November 2009: Walvis Bay, Namibia IOM will officially launch the comic publication

IOM will officially launch the comic publication "Chasing Dreams" on the 25th of November.

December 2009: Midrand, South Africa

IOM will host a satellite session on Migration Health at the Southern Africa HIV and AIDS Research Alliance (SAHARA) conference from the 30th November to 2nd December 2009



"THE SEARCH FOR A BETTER LIFE"

A selection of photographs depicting the socio-economic living and working conditions of migrant and mobile workers in the mining town of Solwezi, the cotton ginning town of Katete, and the border town of Chirundu. The photographs were taken by two Market Photo Workshop students, Mpho Khwezi and Davina Jogi, who travelled to various parts of Zambia in 2008 capturing on film the daily joys and challenges of migrants, including issues relating to accessing health services and HIV vulnerability.







- 1. A man lifts a child into a truck. Company trucks only carry people in the back of the cab, where they cannot be easily seen, but this driver had no such worries (and may have owned the truck himself).
- 2. The driver takes payment for a lift. There is no set price for riding, it just depends who has the best offer or how much space is available.
- 3. Zimbabwean traders catch some sleep at a market in Chirundu, a town in Zambia on that country's border with Zimbabwe.
 - 4. Trucks line up while making the crossing from Zimbabwe to Zambia.











5. Cotton workers at Dunavant ginnery in Katete, 6. Miners going to work in Solwezi, 7. A man lifts a child into a truck for a ride to Ndola from Solwezi, 8. Activity at a market in Solwezi.

>>> Migrant Stories from Southern Africa

IOM has been commissioned by the United States Agency for International Development (USAID) to conduct a regional assessment of migrant and mobile populations and their partners, in order to gather information across the region to accurately target and ultimately reduce HIV transmission in these populations.

This journey has taken IOM researchers to eight Southern African countries where they interacted with labour and economic migrants employed in the agriculture, mining, transport, construction, informal cross border trade and the maritime sectors. The story below was captured by one of the IOM researchers.

This assessment is being conducted in: Angola, Lesotho, Malawi, Mozambique, Namibia, South Africa, Swaziland and Zambia; and will assist USAID in forming a regional strategy for addressing HIV prevention within migrant settings.

>>>The findings of this assessment will be published in the next issue of "The Eye on Migration Health."

Meet Richard

He is from Namibia, and his story was captured by one of the IOM researchers in Walvis Bay - Namibia.

Richard* is a 50 year-old truck driver from Okakakara in the north of Namibia. He completed a few years of high school but worked on the family farm after leaving school at the age of 16. Richard has been married several times and has eight children from six different women. Although he describes multiple partners as "dangerous" and "exhausting" he also says: "there is nobody who is having only one partner: our fathers had many wives so why not us?"

At the age of 35, Richard decided to become a truck driver, and has been doing this job for the last 15 years. His current wife and children remain in the north, while his other children and various ex-partners are in various locations in the north.

Richard transports containers on his truck from the port at Walvis Bay to various locations in southern Africa, particularly Angola, Zambia and Botswana. He works on a six month contract and, like others who carry containers, is paid per delivery. He does not get any benefits such as medical aid and the small transport company he works for has never provided him or his colleagues with condoms, HIV education or training. What he knows about HIV he has heard on the radio or seen in adverts for the New Start Centre.

When Richard and his fellow drivers arrive in Walvis Bay they typically have to wait for several days to pick up a new load of containers. They park their trucks in an open space near a service station and wait around for their bosses to call them and give instructions of where to go next.

He is never sure where he will be sent, but on many occasions, he has driven to Oshakati, on the border with Angola. While Richard waits, he spends the days chatting to other drivers or sleeping in his truck. At night, they might go to a shebeen or a club to have some drinks and meet women. Richard admits that boredom does make them go to the bars and pick up women at times. He says that women like truck drivers because they perceive them as having lots of money.

While he is parked in Walvis Bay, Richard has to use the service station toilets as there are no other facilities available. If he wants a shower, he occasionally makes use of a friend's place, but he normally goes for three days without a bath since his friend is not always able to offer him the use of his bathroom.



At the border posts, conditions are even worse. He normally waits for a week for a departure permit and he once had to wait a whole month. The border with Zambia is the worst in his experience.

On the routes travelled by Richard he has never seen a place which offers HIV prevention or treatment. He only knows the New Start Centre in Walvis Bay and the clinic in his home town. In the other countries he has visited he has also never come across HIV prevention services although he confides that he "does not even think of such things" when he is travelling outside Namibia.

* Real name has been withheld

For more information contact

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