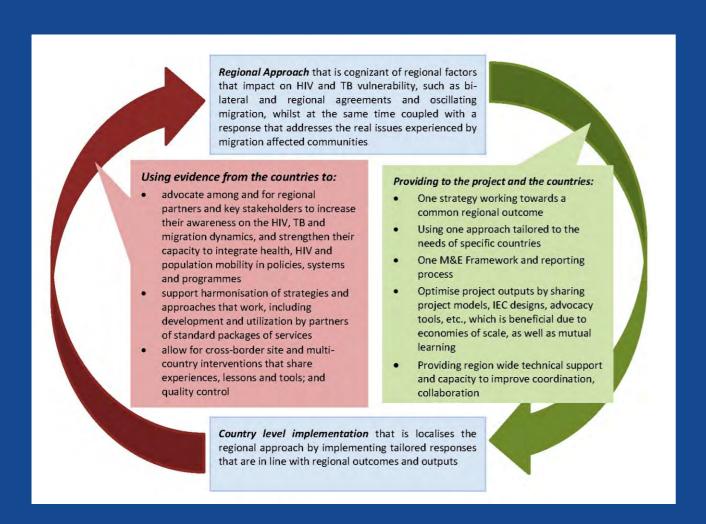
Approach

Responding to HIV and TB within the SADC mining sector requires a regional approach that is cognizant of regional factors that impact on HIV and TB vulnerability, such as bi-lateral and regional agreements and oscillating migration between the different countries, whilst at the same time coupled with a response that addresses the real issues experienced by migration affected communities.

- Bring together regional stakeholders to share lessons and experiences, as well as to increase coordination and cooperation among key technical partners and stakeholders;
- Advocate among and for regional partners and key stakeholders to increase their awareness on the HIV, TB and migration dynamics, and

- strengthen their capacity to integrate health, HIV and population mobility in policies, systems and programmes;
- Support harmonisation of strategies and approaches that work, including development and utilization by partners of standard packages of services;
- Optimise project outputs by sharing project models, IEC designs, advocacy tools, etc., which is beneficial due to economies of scale, as well as mutual learning and growing;
- Allow for cross-border site and multi-country interventions that share experiences, lessons and tools; and
- Provide region wide technical support and capacity to improve coordination, collaboration and quality control.





International Organization for Migration (IOM)
Organisation internationale pour les migrations (OIM)
Organización Internacional para las Migraciones (OIM)





he mining industry is a major contributor to the economies of southern Africa, either through the extraction of minerals or the provision of labour to neighbouring countries.

South Africa, as the leading producer of various minerals in southern Africa, attracts migrant labour from neighbouring countries. According to TEBA Ltd, over a third of their mine workers in South Africa come from the neighbouring countries of Lesotho, Mozambique and Swaziland.

Mineworkers are disproportionately affected by TB and HIV due to a number of structural, environmental and individual factors. These include poor living and working conditions, few recreational activities, access to sex workers and multiple and concurrent sexual partnerships.

TB is closely linked to the gold mining sector due to

several factors, including long term exposure to silica dust. This is of particular concern as people living with HIV are more likely to develop TB than those without HIV and also are highly vulnerable to Multi Drug Resistant (MDR) Extreme Drug Resistant (XDR) - TB.

TB and HIV acquired in the mines may fuel transmission in the worker's home region and deplete household resources.

As mineworkers frequently move between urban and rural areas and across borders, they often encounter difficulties in accessing health care services due to lack of harmonized treatment regimens and cross-border referral mechanisms. These challenges contribute to lack of adherence to treatment and continuity of care, which often creates drug resistance.

Partnership on Health and Mobility in the Mining Sector of Southern Africa



The spaces of vulnerability associated with the mining sector are conducive to both men and women engaging in multiple concurrent sexual partnerships, a major driver of the HIV epidemic in southern Africa.

To address the above, the project, Partnership on Health and Mobility in the Mining Sector of Southern Africa, funded by the Minister of Foreign Trade and International Cooperation of the Netherlands, aims to address heath vulnerabilities of migrant mine-workers, their families and affected communities in southern Africa.

The project directly responds to the recently signed SADC Declaration on TB in the Mining Sector, which is an expression of the highest

Implementation

The overall objective of the project is to contribute to improved health outcomes of 20,000 migrant mine-workers, their families and affected communities in southern Africa, with particular focus on mine worker sending, transit, and destination communities of Mozambique, South Africa, Lesotho and Swaziland.

political will towards a policy environment that supports improved health outcomes for mineworkers, their families and affected communities.

The three year project is implemented by IOM Regional Migration Health Team in partnership with Voluntary Service Organisation (VSO), Regional AIDS Initiative of Southern Africa (RAISA). It will run from January 2013 to December 2015.

To ensure the maximum impact, the project is focusing on countries that have historically been the most affected, both in terms of labour migration dynamics as well as disease burden.

This will be achieved through the following four key components.

Key Activities

Research and Information Dissemination

This component focuses on producing and distributing strategic information on HIV and TB in the mining sector of southern Africa. It will include a series of baseline studies to assess the current situation on the ground and at the policy level.

Research findings generated through the project will contribute to policy and programmatic interventions.

Advocacy for Policy Development

IOM will continue to raise awareness of migrant issues and build capacity for implementation of relevant policies through a series of country/bilateral/multicountry/regional consultations and campaigns. In addition, VSO strengthens the capacity of mineworker and ex-mineworker associations in Lesotho, Mozambique and Swaziland to effectively advocate for and implement initiatives that respond to the needs and rights of their members as regards HIV/TB and sustainable livelihoods.

Service Delivery and Capacity Building

This component undertakes pilot interventions which directly improve access to services for mine worker destination, sending and transit communities.

IOM supports partners to develop and implement locally owned and responsive comprehensive combination HIV prevention and care projects in mine worker sending and receiving communities utilising the Service Delivery and Capacity Building Framework.

VSO in partnership with private mobile phone companies will increase family income among households of widows and orphans in migrant mine worker sending communities in Lesotho, Mozambique and Swaziland, through involvement of

estimated 1,100 widows and women in phone businesses.

Regional Coordination

This component facilitates coordination and partnerships among both internal project implementing partners/beneficiaries and external stakeholders.

Internally, Project Steering Committees at both regional and national levels will be established, and peer to peer exchanges will be organised. Moreover, for efficient and effective project governance and control, a regional Monitoring and Evaluation framework and a regional communication strategy will be established and utilised.

Externally, IOM continues to work closely with SADC and other regional partners to facilitate bilateral and multilateral cooperation through organisation of a Regional Stakeholders Consultation, and establishment of a Regional Partners Forum.

Of note, IOM works closely with the Global Business Coalition (GBC) Health to facilitate collaboration and coordination among the private sector in addressing migration and health in the mining sector of Southern Africa.

