

## SWHAP East Africa Regional Newsletter April 2014

### Sandvik Youth HIV Programme reaches 10,000 community members

Peer Educators from Sandvik Tanzania organised a youth football tournament raising awareness on HIV and AIDS in the Nyamagana Community. During a three month period from October to December 2013, 156 boys from 12 teams participating in the tournament and 10 000 spectators received training on HIV and healthy lifestyle choices. One of the objectives was to provide the youth in the area with age appropriate information on sex and sexuality as this can delay sexual debut and contribute to more responsible sexual behaviour. The final match of the tournament was held on World AIDS Day with VCT provided for all. 524 people were counselled and tested.



*Sandvik Peer Educators mentoring tournament participants*

This initiative is part of the Sandvik community outreach programme and took place in a district that has a high number of children under the age of 18. In 2010 young people aged between 15-24 accounted for 42% of new HIV infection in people aged 15 and older. Approximately 2.1 million adolescents were living with HIV at the end of 2012, with almost 80% of this figure in sub Saharan Africa (UNAIDS). Young people are vulnerable to infection as they face barriers to accessing sexual and reproductive health information and services. Sports programmes such

as these are useful in developing positive social behaviours and risk awareness. Additionally the team nature of soccer makes it an excellent tool for breaking down stigma and discrimination.

Sandvik credit the success of the tournament to the participatory approach used in planning the tournament. Stakeholders were involved at all stages and local district leaders mobilised community participation.

### Networking

The first Champion's Network meeting was held in Kenya and Tanzania in March. Participants discussed the dimensions of wellness and shared examples of how they were managing the transition from HIV and AIDS to wellness in their workplaces and communities. Discussions also focused on the importance of establishing baselines and accurate health profiles for employees. This information would allow companies to determine where health related costs lie and the appropriate focus of resources.



*Tanzania Champions*

### Ericsson Regional Exchange

Prior to the steering committee training Ericsson Uganda, Tanzania and Rwanda held a regional exchange meeting. They shared on the progress of their respective programmes and the challenges they

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are facing. Regional exchanges are a useful way of extending workplace programmes across regions using structures already in existence at the companies. At the end of last year in commemoration of World AIDS Day Ericsson in East Africa ran a successful testing campaign in the three countries, where more than 150 people were tested for HIV, diabetes, and blood sugar.

### International Women's Day

To commemorate International Women's Day Agro EcoEnergy organised an awareness session for the female employees at the company. Eleven women gathered for a demonstration on the female condom and a talk on HIV and AIDS. Female condoms when used consistently and correctly provide dual protection from STIs including HIV and unintended pregnancy. The female condom is a female initiated and female controlled device, allowing women some measure of control over their sexual and reproductive health.

Pregnancy and the consequences of child birth remain the leading cause of death and disability among women of reproductive age in the developing countries. Millions of women lack the means to prevent unwanted pregnancies, and to prevent and address the complications and disease during pregnancy ([www.womendeliver.org](http://www.womendeliver.org)).

Addressing the reproductive health needs of women is one of the important considerations in achieving gender equality.



Female condom demonstration at Agro EcoEnergy Tanzania

### Peer Educator Profile



Claudette A. Jollebo, Peer Educator and Steering Committee member, Tamarind Translations, Kenya

#### What motivated you to become a Peer Educator?

*I was in a peer education programme before which helped me realise and recognize the impact that behaviour change communication can have in helping people not only to be informed but also to make positive choices in their lives.*

#### What are the best things about being a Peer Educator?

*You are able to make a difference by reaching out to people, giving a listening ear, providing information and linking individuals to health services or relevant institutions as per their need.*

#### What challenges do you face?

*Our peer education programme is an online platform, it therefore takes a little more time to get feedback from members during discussions. It takes continuous and consistent sensitisation and follow-up to see change.*

#### What advice would you give to other Peer Educators?

*As a Peer Educator, it is important to listen before you act and not make assumptions of any situation that you come across or that is presented to you. Also acknowledge that every individual is unique in their own way and therefore there is no generalisation in handling situations presented to you.*

#### A note from the Coordinator



Welcome to the SWHAP Peer Educator Newsletter for East Africa for 2014. This will be a quarterly newsletter that will give you updates for regional activities. The Newsletter will also carry your contribution in articles or messages you would like passed on to others in the SWHAP network. We will also endeavour to feature programme case-studies as we promote best practices, share and learn from each other.

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