

All roads lead to Harare: the response of the Zimbabwe transport industry to HIV/AIDS*

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Abstract

This paper reports some of the experiences of the STD/AIDS Education for Transport Workers project in Zimbabwe from 1995 to 1997. Here we emphasize two findings. The first is that the commercial sex workers patronized by transport workers are easier than the transport workers to approach, interview, engage in peer-educator training and otherwise organize for the dissemination of knowledge and materials concerning sexually transmitted diseases and HIV. The second is that standard KAP or KABP surveys miss a good deal of behaviour specific to truck drivers.

The epidemiological context

Zimbabwe (Map 1) lies inland of Mozambique, north of South Africa, northwest of Botswana and southeast of Zambia. Paved, well serviced roads run through the country and its neighbours. The easy movement of people by bus and truck through this area contributes to high urban rates of sexually transmitted diseases (STDs) and HIV, and circular migration between urban and rural localities causes high rural rates of both. This paper reports aspects of the Zimbabwe response to the HIV epidemic amongst transport workers, 1995 to 1997.

By 1995 systematic HIV-related data were not available from transport companies but many of them were reporting substantial AIDS-related illnesses and deaths. Given the high rates of HIV infection in the country as a whole (US Bureau of the Census 1998), we can only assume that HIV rates amongst drivers are very high, possibly over 25 per cent.

The epidemiological context is one in which drivers are rarely home and commercial sex workers are rarely in short supply at various places along the drivers' routes. These are most commonly at small service towns and settlements on the sides of major highways, but they are also found at border crossings and at the edges of large cities. Twenty-one of these localities (Map 1) came to be targeted by the project as described below.

* This work incorporates portions of Mukodzani (1997).

Map 1: Project sites in Zimbabwe

Through Zimbabwe and much of sub-Saharan Africa, there is no general belief that a man who is abstinent while separated from his wife is being virtuous. Adultery was traditionally conceptualized as occurring when a married woman had a sexual partner who was not her husband; it was only rarely conceptualized as occurring when a married man had a sexual partner who was not his wife. Times have changed only incrementally. A woman today may successfully petition for divorce if she can *prove* a husband's infidelities. Some urban marriages begin with promises of mutual fidelity in a modern cosmopolitan sense, Christian denominations normally support an egalitarian definition of adultery, and fear of HIV may reduce extramarital liaisons to some extent. But these modern considerations exist against a backdrop of traditional notions that men need sex and will seek it elsewhere if separated from their regular partner or partners. Indeed, one need not be geographically separated from one's wife to expect extramarital liaisons as the norm. As one driver put it: 'It is not manly to stick

with regular partners. Men need variety' (Sibanda, Murombedzi and Tawanda 1997:14). Pool et al. (1996:215) have recently noted the '*macho* discourse of carefree lust and womanizing' observed amongst some Tanzanian men when asked about their sexual attitudes and activities. It is no different in Zimbabwe and a basic grasp of African *machismo* and its local styles is necessary when working with matters of sexual behaviour amongst African men. The result in the transport industry is a large population of mobile workers, some portion of whom have casual sex over an interlinking area stretching from the Great Lakes to the southern tip of the continent. Around Zimbabwe (Wilson et al. 1994:103) drivers who eschew casual sex are commonly derided and called *amapostori* or *abadliswayo*, the first name coming from an apocalyptic church and the second referring to a man whose wife has given him herbs to keep him faithful: 'wowsers/killjoy' and 'hen-pecked', roughly. We can deduce from Wilson et al. (1994:101) that about half the married drivers operating in Zimbabwe had regular girlfriends on the road and that a similar portion of married men availed themselves of sex workers when travelling.

Drivers surveyed in 1995 (Maradzika, Rusakaniko and Siziya 1995) and 1997 (Sibanda et al. 1997) were all Zimbabwe nationals or driving for Zimbabwe-based companies. They were representative of Zimbabwe cultural groups as a whole. They reported few differences in HIV-related behaviour according to cultural or ethnic group. There was a noteworthy trend according to religion in 1997: transport workers reporting no organized religion were most likely to have had a non-regular sexual partner in the past three months, Catholics were next, Protestants ranked third and persons of Apostolic denominations ranked lowest. The figures were 27.1, 26.4, 22.9 and 14.6 per cent respectively (Sibanda et al. 1997:27). But the question was phrased in terms of non-regular partners and some of the drivers simply have multiple regular partners. Otherwise the drivers and sex workers surveyed reported no clear differences in their responses according to ethnic or religious affiliation and we are, broadly, dealing with a national sexual culture as it exists in Zimbabwe amongst these and other kinds of workers.

The NECTOI response

STD/HIV prevention work in the Zimbabwe transport industry was consolidated in 1992 into a program of the National Employment Council for the Transport Operating Industry (NECTOI, '*neck-toy*').¹ The NECTOI peer education project was funded from 1995 to 1997 by Family Health International/AIDSCAP. Knowledge, attitudes, beliefs and practices (KABP or KAP) surveys were administered in 1995 and 1997 amongst transport workers (truck drivers, bus drivers and their assistants) and sex workers whose main clientele comprised transport workers (Maradzika et al. 1995; Sibanda et al. 1997).

By 1995 over 95 per cent of transport workers and 90 per cent of sex workers had enough knowledge of HIV to name one or more ways to avoid contracting it. But less than half of transport workers and only slightly more than half of sex workers perceived themselves to be at risk of contracting HIV. Drivers tended to be married and claimed few non-regular partners while assistants tended to have girlfriends with whom they claimed to use condoms. But self-reported condom use in their last encounter with a non-regular partner was only 71 per cent amongst transport workers and 82 per cent amongst sex workers. So clear imperatives from 1995 were to improve awareness of personal risk and use of condoms. More generally, the project came to have two major objectives: to reduce the prevalence of STDs amongst drivers and their sexual partners, and to reduce high-risk sexual behaviour in the target population.

¹. Zimbabwe has a system of employment councils for the various industries sponsored and staffed both by industry and labour representatives.

The intervention employed was peer education. Intervention was aimed at promoting partner reduction, early STD-treatment-seeking behaviour, use of preventive measures such as condoms and reduction of predisposing factors such as drug and alcohol use amongst transport workers and their sexual partners.

Three hundred and seventy peer educators were trained in the 21 project sites. Various methods were used to get the message across to the transport and sex workers. One which was particularly successful occurred through the agencies of drama groups which were established at each of the 21 project sites. The spirit of community theatre is inherent in African culture and audiences were enthusiastic.

The most successful engagements with transport workers and secondary audiences were with the secondary audiences and not the drivers directly. An exception was successful radio programming which we believe is reaching a larger portion of transport than sex workers. The trucks normally have radios and the radio program for truck drivers plays in the evening when many of the drivers are on the road and some drivers make a point of listening to the program even if stationary. Otherwise, the people with whom drivers come into contact are easier to find, approach, and organize for training and distribution of materials (including condoms). These secondary audiences are all represented amongst the peer educators today:

1. Commercial sex workers.
2. Hotel/beerhall workers.
3. Petrol attendants.
4. Security guards.
5. Immigration and customs officials.
6. Police.
7. Other volunteers.

Drivers were found to be quite reluctant to be interviewed out on the road. The 1995 and 1997 surveys were accomplished only after transport companies made their premises available for interviews and encouraged their workers to take part. For similar reasons, they are rarely 'in place' for any kind of training or information session. They come and go more or less randomly and time at their companies' terminals is limited to exchanging paperwork and equipment or freight. Trying to get commercial, corporate or service messages through to drivers is a formidable task, especially if trying to get a particular message through to *all* drivers. So NECTOI does what it can to get through to drivers by radio and on their companies' premises where condoms are distributed by peer educators; but there is little face-to-face contact between drivers and project personnel. Opportunity for this is profoundly limited. Another factor encountered is that drivers are generally paid by the kilometre or trip and have other pay for the things they do beyond simply driving the truck to a particular destination. Basically it is piece work. So where some kinds of workers may be called upon to stay late after work and participate in a survey or information session, and the company can simply give them additional hourly pay for doing so, trucking companies are not generally structured to easily provide the extra pay that drivers might expect from participating in HIV/AIDS activities.

Aside from those more or less physical limits to the situation, drivers are extremely autonomous individuals. Their work requires little interaction with supervisors and this is often done over the phone rather than face-to-face. More than other workers, drivers are left to their own devices and not questioned much about how they get the job done so long as their employers receive no complaints from customers or reports of infractions from highway law enforcement agencies. This is an important dimension of typical driver personalities and

contributes further to the difficulty of getting them to participate in survey or information programs or to be forthcoming about their sexual behaviour (or other aspects of their personal or professional life) when they do. Orubuloye, Caldwell and Caldwell (1993) reported difficulties similar to those in Zimbabwe in attempting to work with Nigerian truck drivers. There the problem was overcome by engaging attractive undergraduate females to do the surveys while, as mentioned above, the surveys that monitored the NECTOI program were accomplished through the prodding of employers. Wilson *et al.* (1994) accomplished some of their interviews along the drivers' routes but do not elaborate on how they overcame problems of driver reticence. The results were different types of biases which show up clearly in the kinds of answers the Zimbabwe drivers gave when interviewed on company premises as compared to the Nigerian and Zimbabwe drivers interviewed along their routes, the former giving relatively compliant answers in their place of employment, the latter perhaps engaging in a bit of bragging with the interviewers,² who were young and female in the Nigerian instance.

As drivers are difficult to reach individually and are rarely found together in groups, NECTOI is mainly working with people in a position to influence driver behaviour, especially driver behaviour at those times and places where sexual relations with sex workers or other non-regular partners most often occur, especially the sex workers themselves: hence the focus on the 21 project sites mentioned above. The project covers all transport companies in Zimbabwe and has established AIDS peer education programs in most major towns. The transport industry project is integrated into the national HIV/AIDS response through the National AIDS Coordination Program and has worked now for over two years to recruit sex workers, hospitality workers, transport service industry workers (petrol attendants, etc.), security guards and police, customs and immigration officers. The drama troupes have young volunteers with no other attachment to the transport industry and their performances occur in contexts beyond core audiences in the transport world.

As NECTOI began to approach the various groups represented at project sites it was soon surprised that in all localities it was the sex workers who were most anxious to co-operate in the surveys, attend peer-educator training sessions, pass on AIDS education materials and distribute condoms. A problem from the beginning was that they participated at a much higher level than budgeting had originally assumed. Their participation in the absence of gratuities is perhaps the clearest evidence of their motivation. While sex workers are an otherwise secretive group, the project purpose interested them from the beginning and their eager participation has stood as quite a contrast to the reluctance of the transport workers.

Results

Perception of personal risk may have improved amongst transport and sex workers between 1995 and 1997, the 1995 study finding that 52.7 per cent of drivers felt they had no risk of contracting HIV while survey results for 1997 showed a much lower percentage (30.2%). Corresponding figures for sex workers were 44.6 per cent and 13.2 per cent. Indicators of actual behaviour seem less changed as shown in Table 1.

² Nigeria has much lower rates of STDs and HIV amongst its general population and fear of HIV/AIDS would be expected to be lower in that country: this was clear in the drivers' answers about, for instance, fear of personal risk.

Table 1
No condom with last non-regular partner (%)

	Drivers	Sex workers
1995	24.7	17.8
1997	19.0	9.4 ^a

^a rather uncertain owing to a large number of 'Not Stated'.

We do not know the extent of HIV amongst transport and sex workers at the study sites. A small number of drivers may be the women's most regular customers and constitute the core of infection amongst drivers or infection may be more general in the group. Never-married and divorced, widowed or separated drivers, for instance, report higher rates of recent non-regular partners. But 21.9 per cent of married men reported one or more non-regular sexual partners in the previous three months. The NECTOI strategy has been meant to get through to all of them.

This happens slowly as a combination of messages reach the drivers. The messages are consistent and persistent. Through the radio, old messages are reinforced and new ones introduced. This information percolates through as drivers converse with each other and the results have been high rates of awareness and self-reported compliance since the beginning of the project.

A persistent report of the sex workers is the offering of higher fees for sex without condoms, which they sometimes accept as rent and other financial pressures bear down upon them. There may be a core of these women who make that decision more often than others or infection may be more general. As with the drivers, messages are meant to reach all of them. This is easier amongst the sex workers because large numbers of them attend peer educator training sessions, distribute condoms and introduce consistent messages about HIV/AIDS to their associates.

NECTOI found that most sex workers are happy to be otherwise employed and that when alternate employment can be identified most are glad to leave commercial sex work. A general socio-economic problem of the service towns and settlements which constitute the majority of the project sites is the general lack of employment opportunities beyond a few service sector jobs, a very few government jobs in some instances, and small-scale hawking and vending. NECTOI is therefore working with the private sector at employment schemes which may attract current sex workers. NECTOI is also working with the peer educators to increase the availability and accessibility of condoms and this has greatly improved over the last two years. The project provides free transport of quantities of condoms that need to be moved about the country and this has resulted in increased condom use amongst truck drivers, sex workers and the community in general. In the majority of project sites an open communication channel has been established between sex workers and health workers resulting in increased early STD-treatment seeking. The incidence of STDs has generally stabilized in Zimbabwe and the transport industry project has contributed to this stabilization.

The project has worked to identify and co-operate with NGOs, Zimbabwe government agencies and other bodies active in reducing STD and HIV transmission amongst the broader communities represented at the project sites. One of the tasks which became necessary as part of this integration was to help overcome some of the traditional antagonism of STD clinic workers towards sex workers. Through the NECTOI project sex worker peer educators have become some of the most articulate promoters of condom use and some of them participate in

condom promotion projects outside the scope of the NECTOI work. There they participate as regular community workers, the chagrin of the STD clinic workers notwithstanding.

Appropriateness of KABP (KAP) surveys

Zimbabwe drivers were interviewed in 1995 (Maradzika *et al.* 1995) and 1997 (Sibanda *et al.* 1997) using standard knowledge, attitudes, beliefs and practices (KAP or KABP) questionnaires. Sibanda *et al.* (1997:6) mention use of AIDSCAP Baseline Survey questionnaires and give the actual questions used in appended materials as did Maradzika *et al.* (1997) who also mention that the standard FHI/AIDSCAP questionnaire was altered, but emphasize that no more than five per cent of the main content of the questionnaire was affected (Maradzika *et al.* 1995:8-9). While this resulted in comparability between the studies mentioned and those of other populations, certain behaviour specific to truck drivers did not become apparent through these surveys and they are probably not the place to start surveying drivers when trying to obtain a general picture of their sexual activities.

Wilson *et al.* (1994) surveyed drivers in Zimbabwe after first doing informal interviews. A major finding of that work was that many drivers had multiple *regular* partners spread along their routes, something which KAP surveys do not so plainly reveal. Thus, when a KAP questionnaire asks about condom use with last non-regular partner, there may be the assumption that the subject has only one regular partner, something which may only be true for half or less than half of Zimbabwe truck drivers. The Wilson study also differed from the KAP surveys in that they were largely done in the field rather than places of employment where, we feel, drivers may have been giving relatively compliant answers. Wilson *et al.* (1994) paint quite a different picture of drivers and their lives in Zimbabwe from that obtained in the KAP surveys, one that much resembles results obtained by Orubuloye *et al.* (1993) for drivers in Nigeria, the most salient results there also being the propensity towards multiple regular partners and expressions of carefree attitudes with respect to sexual activity when travelling.

So we end up concerned about two aspects of methodologies for surveying drivers: (1) the difference between the kinds of answers obtained from similar populations when the survey is done on an employer's premises as opposed to what is obtained out on the road, and (2) the difference between the general picture of lifestyle and risk behaviour that is obtained from KAP surveys as opposed to what is obtained from surveys more specific to truck drivers. For Africa, at least, it seems that a clearer picture of truck driver behaviour is obtained from surveys which are done along the routes that they run and contain questions specific to their patterns of mobility. We expect that this is also true of truck drivers in other countries and continents where equality between the sexes in marriage is not assumed, or is not assumed amongst those segments of the population from which most truck drivers originate.

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