

LEKGOTLA'S

HOSPERSA'S JOURNEY TO STRENGTHENING
EQUALITY IN THE UNION, WORKPLACE AND
COMMUNITY



HOSPERSA
+

 **LRS**
LABOUR RESEARCH SERVICE

INNOVATIVE TRADE UNION BUILDING STRATEGIES

Over the past few years the Labour Research Service has been interested in finding, recording, assisting with and showcasing examples of trade union best practice that focus on issues of equality – particularly the impact of unequal gender relations. In our HIV work we have seen how unequal gender relations fuels the HIV epidemic and in our more general trade union work we see how the sexual division of labour devalues reproductive or “care work” and how young workers are faced with increasing forms of precarious work.

When HOSPERSA invited us to assist with facilitating their National Lekgotla in 2010 we were excited by the unions focus on “getting voices from below into a dialogue” – a dialogue to strengthen issues of equality. Faced with incredible challenges in the health sector, the Lekgotla participants took an open and honest approach to critically assessing themselves as health workers – their strengths and weaknesses as well as the broader challenge of working in a sector that is severely under resourced and devalued. Central to the dialogue was finding ways of strengthening the relationship between health workers and the community as a means of addressing the crisis in the health sector.

The Lekgotla approach was then taken forward into the provinces and as the LRS we had the privilege of observing, recording and assisting with the 8 provincial Lekgotla’s. Through the open dialogue we not only learnt a great deal about the challenges facing health workers – but were incredibly inspired by their commitment, energy and creativity in finding solutions. From this experience we believe that the Lekgotla as a methodology allows for honest reflection and participatory planning and as the LRS we have a role in sharing our experience of the Lekgotla methodology with other trade unions.

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Introducing the Lekgotla!

The South African union landscape, has in recent years focussed almost all its energies around monetary gratification and reward as the primary factor in pursuit of workplace equality. Collective bargaining agendas have seen very little thought or interest in understanding or revisiting our humanity, dignity and equality, none of which can be quantified in monetary terms. It is through our experiences and our manner of relating to each other that we experience a sense of dignity, equality and humanity.

Hospersa, has become increasingly concerned with the state of morale and poor public perception of the workforce, more particularly in the Public Service. We therefore identified the need to explore this less chartered territory, almost like searching within the unions' collective conscience, for experiences of equality or a lack thereof. HOSPERSA wanted to test the feelings and emotions that affect our members at the coalface.



HOSPERSA brought together shop stewards who were attracted to addressing issues of equality, i.e. Gender, HIV&Aids, Occupational Health & Safety as well as those affecting Young Workers and Nurses. A space needed to be created

for this reflection, and open dialogues provided such a space. This has been a new journey, looking at new ways of building the organisation, and creating a culture of unionism that brings a new perspective for the future.

Joining hands from below - the Lekgotla experience

2011 was an exciting year as HOSPERSA formalised in the Constitution trade union forums on HIV, Gender, OHS, Young Workers and Educators. Provincial Lekgotlas served as a platform to launch 4 of the constitutional forums and fledgling Nurses forums in the different provinces. The Lekgotla's also provided the space for the forums to evaluate and plan provincial actions. Lekgotla's took place in KZN, North West, Mpumalanga, Limpopo, Eastern Cape, Gauteng, Free State and the Western and Northern Cape had a joint Lekgotla.

The Provincial Lekgotla's brought us one step closer to the mandate of our December 2010 National Lekgotla – "to engage in a national dialogue on equality issues". Worker leaders and officials in each of the provinces came together to put a HOSPERSA stamp on gender, occupational health and safety and HIV issues and to empower both HOSPERSA nurses and young workers.

With the support of the Labour Research Service we have kept a careful record of the interesting experiences, stories and most importantly what we have learnt from the Lekgotlas'. This booklet includes many quotes and stories from Lekgotla participants.



Finding our own answers!

Providing safety, care, compassion, love and a sense of hope, all with no judgement – this is our Lekgotla.

In December 2010 we had a National Lekgotla, not a conference, a meeting or a workshop but a Lekgotla – a living conversation, a space where everyone is able to speak without being interrupted, to speak as equals and to move towards creating consensus. Like the traditional idea of the Lekgotla, the conversations we have been having are not only individuals communicating but it is about each person being connected to a community, a workplace, a union structure etc. We are in the Lekgotla representing a larger community and we are taking collective responsibility for addressing the challenges and celebrating the victories we experience in the health care sector today. Telling our stories is about sharing our memories and struggles and most importantly sharing our inspirational knowledge. Often we think we have very little to offer, but as we share our stories we learn to value our own experience as well as the experience of others.

Comrade Jones explains HOSPERSA's vision of Lekgotlas':

We need to know that as a HOSPERSA member I am also a member of the community, a worker and also a change agent. All the different caps that we wear are important and can help uplift the lives of our communities, improve the service we give to our members, enhance our professionalism and ensure the safety of our members and other workers in the workplace.

*The aim of calling the Lekgotlas' is to assist with a revival of union members, bring back life, give passion, rebuild the union and create a team. We are here together to create a space for us to express our views and discuss issues pertaining to the union in a free manner. It is not about right or wrong – but rather it is about sharing. In between PEC's there are POB's who constitutionally have a principle (coming from mandates) to take decisions on our behalf. The principles come from this dialogue. We are creating a think tank - an environment and a network where we can pick up a phone and be able to make contact with people who are dealing with the issues. In this way we are not only getting information but also acknowledging the person. I am not going to embarrass HOSPERSA because I did not know. There is **nothing wrong with not knowing – but there is something wrong with not***

networking. *If we create a think tank – being a shop steward is going to be easier and more enjoyable.*

We need to deal with the big monster that is communication. Let's debate, let's engage – but we need to have a target – what we want to go home with. This is part of dialogue. Even if your point is not taken this does not mean you are being ignored. We debate to agree and to disagree. If your point was not agreed upon – there might always be a plan B – your plan. It is not a competition but a dialogue, a bringing together of our many different opinions and ideas. All our opinions and ideas are valuable. We will at one point need to have one view, the HOSPERSA position but you have a think tank with many ideas that you can draw on.

Our partnering with a NGO like the LRS increases our research expertise because we know the kinds of questions to ask. Organisations like the LRS then become part of our broader network assisting us with developing a more global vision. We have our own internal expertise that we are growing with these Lekgotla's and we also have a network of external expertise. You do not only have to go out of HOSPERSA to get professional advice, you have experts in HOSPERSA – this is what we are recognising.

After you have debated, after you have dialogued it is not only your agenda – we are becoming one – now it is HOSPERSA's agenda. We are different in terms of our opinions but through dialogue we are able to bring our opinions together – into one. The spirit of unionism is not just about being the chairperson or winning my point of view - it is about together achieving a particular goal. We are creating a dialogue with many views but we need to move towards a consensus where we have a position even if it means agreeing to disagree.

Occupational Health and Safety Forum – “Striving for perfection in the workplace”

“Striving for perfection” and shaking the Government on OHS issues are the motto's driving the OHS work of HOSPERSA. As a union we are both examining our own practices as well as ensuring that Government meets its commitments.

As the only union in the workplace with the passion for occupational health and safety we are going to work hard to try and change people's attitude

and thinking towards health and safety. People know that they need to be proactive and take precautions but they do not. The question is why? The perfect example for this is the nurses conducting tests outside the venue today. They are handling blood but none of them are wearing gloves while they know that you must wear gloves each time you handle bodily fluids, especially blood. Each time you remind people about complying with safety standards they give you a long history. Seniors in my hospital often say that "we've been doing these things this way even before you were born". Doing something for a long time without an incident does not necessarily mean that it is correct. We also acknowledge that change is difficult but it is inevitable. It is difficult to unlearn a certain behaviour you have practiced for a while. It is almost as if you break away from the culture of doing this and need to challenge yourself every day to ensure that you practice it. Although difficult but this is highly possible. The question for us as a forum is "how are we going to ensure that people change their attitude and comply?"

In the Lekgotla's we agreed to intensify our campaign to advocate for retractable needles and N95 masks by encouraging workers to hold hands as we take forward OHS in the workplace.

As HOSPERSA our work goes beyond our own immediate health and safety needs and we have many examples of how our interventions have led to OHS challenges being addressed.

In one institution we have an example of a shop steward who took up the issue of water seepages from the surrounding mines and with the support of the



trade union the issue was addressed. In another case we managed to secure special lights for TB patients in the Far East Rand Hospital. As HOSPERSA we prepared a report and submitted it to the CEO. In the same hospital we are busy monitoring the servicing of fire extinguishers. As union members we have also been raising questions about the employment procedures for hospital security companies. In another case we got the owner of a tuck shop at Natal Spruit to address the unhygienic state of the tuck shop. One example where HOSPERSA came out shining was when there were a number of renovations at the local clinics and the water was cut off. As HOSPERSA we called an urgent bilateral – and ensured that all the clinics that were affected by the renovations had access to water.

One example of a struggle that is continuing is the conditions at a pharmacy depot where we are “baking the ARV’s” because of how it is being stored. HOSPERSA shop stewards took up the matter in a bilateral in Germiston – when we did not get valid answers we discussed it at a multilateral. We are recording the transgressions with our cell phones and this is what we can use when reporting to the labour inspectors,

Working with the community on health and safety issues is a challenge that we are taking up.

We need to actively work closely with our community so that communities can learn about OHS issues. Most accidents happen in our homes and we can teach community members who are unemployed about safety in their homes e.g. fire and babies drowning in baths, dumping of medical waste. We can



even reach workers outside of HOSPERSA who do not have exposure to OHS issues and give them the information that will enable them to challenge their employers. Most community members do not know that there is compensation for injury on duty. Most employers now use cost containment as an excuse of not procuring protective clothing and if we educate the community we will be empowering them to stand their ground.

OHS is about the health and safety of working women and men and from the Lekgotla's we have identified a number of issues that can assist in the education of the community.

- Educate parents about covering baths and buckets to prevent babies drowning
- Make sure that all bottles with toxic and flammable liquids are labelled and out of the reach of children
- Keep all medicines and pills away from children
- Lock all cupboards if you have a toddler in the house
- Ensure that all electric plugs are covered and cords are mounted or put behind furniture
- Educate the community about the danger of tampering with electricity cables
- Organize a clean-up campaign to ensure that there are no dumping sites in the community
- HOSPERSA can hand out refuse bags as a way of promoting a clean environment.

OHS is an area we all care deeply about and as HOSPERSA we could explore the possibility of having our own trained HOSPERSA safety inspector.

Young workers – “Informed, active, healthy, passionate and creative”

*Young workers who are full of energy and who bring a vibe into the union, this is the motto of the young worker forum. Young workers certainly did bring a vibe into the Lekgotla's with many questions, comments and suggestions but most of all an appreciation of the space and opportunity to be part of shaping the work of HOSPERSA. *This is the first space where we feel respected and listened to as young workers. It is not common to find spaces in the union where the views of young people matter and are taken seriously. We are often**

accused of being anti-union and of not listening to those that have worked hard to build the unions but here we feel equal even if there are still many challenges as most young people are discriminated against based on age and gender.

As the young workers forum in HOSPERSA we play a very important role in assisting other young workers realise that money is not everything. We remind them about the importance of having safe and happy working conditions. Our work starts when the young worker has to sign the employment contract as we often sign without reading the contract properly – we are so excited to get the job. We then find out afterwards what our conditions of employment are. When we go for interviews we are quiet without asking any questions.

Finding out and understanding what the needs of young workers are appears high on the agenda of the young worker forum – and conducting a survey using a written questionnaire is one of the proposals for finding out. Young workers it was felt might be more open in the beginning to anonymously fill in a questionnaire and then as they feel more comfortable begin to participate in other activities.

The young workers forum is very conscious of the need to shift attitudes in the workplace.

As young workers we experience problems when we need to apply for emergency leave. When I have a social problem and phone my supervisor or department to inform them that I need emergency leave as I cannot come to work due to a social problem. Instead of getting leave like anyone else, I get a moral lecture from my supervisor and often get told that I must not abuse this leave as I will need it for emergencies in future. If I want to get it I have to explain my problem to the supervisor and still he is the one who get to decide if this problem constitutes an emergency or not. This is clear discrimination against age. Requesting details of one's problems is a breach to one's confidentiality and privacy especially since older people are not interrogated to disclose their problem. The myth that we don't have problems and we are careless is wrong.

“Shifting attitudes”, the young workers forums recognises is a slow process that will need composure on the part of the forum members and a clear articulation of what counts as age discrimination. Participating in the Lekgotla's provides the forum members with an opportunity to both speak but also to hear the views of older workers who sometimes feel that young workers are arrogant and disrespectful of their experience as older workers. “Being able to dialogue

– listening and responding respectfully” – is seen as an important tool for bridging some of the divides between older and younger workers.

The young workers forum has challenges that go beyond the organising of young workers, the challenge of dealing *with a public sector highly disrespectful as they always sign agreements without workers consent. The last two big strikes in 2007 and 2010 made workers and especially young workers lose faith in unions. The local government elections confused young workers because most unions were campaigning for political parties. Unions are also seen as a vehicle of getting people into senior government positions, a practice known as “swelling the ranks”.* As HOSPERSA young workers forum we need young workers to understand the difference between unions and political parties.

Connecting with the community is a key component of the young worker forum plans for strengthening the profile of HOSPERSA.

A common problem affecting young people in the community is substance abuse and teenage pregnancy. As young nurses we are having community conversations with young people about sex, reproductive health and the use of contraceptives. We think it carries weight to get education from your peers especially in informal settings. It will also be a good opportunity to deal with the myths of contraceptives. Most young women do not know about cervical cancer and breast cancer. Targeting high schools by doing health talks on how to conduct a breast examination, the importance of pap smears and getting tested



for HIV is part of our vision for working in the community. We will bring on board companies that manufacture sanitary towels to donate pads as most students cannot afford to buy pads. Part of our programme will include popularising, distributing and demonstrating how to use male and female condoms.

HIV and Aids – “HOSPERSA sets an example”

“Our own wellness is as important as the wellness of those we serve” is part of what set the tone of the Lekgotla’s. GEMS, the Government Employees Medical Scheme set up a wellness day at each of the Lekgotlas. All participants in the Lekgotla were invited to voluntarily attend the wellness screening during the course of the day. Healthcare professionals were made available to individually discuss health history and to perform certain medical screening tests. The results of the tests and history were discussed personally, and advice given so that people could take the necessary steps. Head and neck massages were provided.

The following tests were done: blood pressure, blood sugar and cholesterol, weight and height, with body mass index, waist circumference and HIV counselling and testing was offered. All the information and test results were confidential.

The presence of GEMS and the encouragement by the facilitators for everyone to participate in the testing and to enjoy the massages created an atmosphere of care and thoughtfulness. In this non-judgemental and less



stressful environment more people (than would usually have tested) were willing to take the HIV test.

We had a lot more people testing for HIV in the Lekgotla because the setting was different. We used one of our bedrooms as a VCT room. It allowed people the privacy and the setting was warm, cosy and made participants feel free and safe. We observed that participants actively participate if they are at a different venue other than their workplace or being in one of the institutions as this also feels like work and reminds them of the same dynamics that they are trying to run away from. The massage was conducted in the adjacent room and people knew that they can go for a massage immediately after the test and this motivated us. We still need to have more open discussions on HIV and find HIV positive HOSPERSA members who are willing to give testimony and act as role models, but we have made an important start.

The Wellness Day at the Lekgotla offered the HIV team possible strategies for encouraging health care workers to take more responsibility for their health – not just through words alone but also through a positive and affirming experience. The professionalism of the GEMS team, the code of confidentiality and the sense of valuing the health of each participant present at the Lekgotla – created a very positive experience for those who tested – an experience that participants felt eager to replicate. The HIV forums started discussing possible HIV road shows targeting health care professionals. The road shows would include promoting HCT as well as training on OHS programmes like the prevention and treatment for needle-prick injuries and policies like PILLAR. Road shows would also be important opportunities for building relationships with NGO's dealing with HIV.

In developing a strategy to take forward the HIV counselling and testing the HIV forum identified 4 groups of people that they would most likely encounter:

- There are those who are willing to test,
- Those who are going for a test because they want to confirm that they are still negative,
- There is a group that needs to receive on-going counselling because they have already tested, they know their status and are living positively.
- The fourth group is the group who are afraid of testing. This is the group that we need to always encourage and motivate.

Working with the community is one of the clear strengths of the HIV forums. *We managed to align our activities with the national HCT campaign. We have conducted community outreach on HIV-Aids and visited taxi ranks, schools,*

homeless people, and churches. Last month I was doing a health and HIV-AIDS awareness in my church and it went well. Most members in my church are old and this sent a message that this awareness is not only for young people who do not know God and live in sin. HIV-AIDS affects all of us and we need to join hands and fight the disease as a collective. We have excellent statistics and managed to reach our annual targets and beyond but this does not necessarily make people practice safe sex. We are therefore encouraging the use of male and female condoms and encouraging women to form women's groups where they can discuss how to negotiate safe.

Gender – “Addressing the needs of men, women and people living with disabilities

Addressing gender inequality, employment equity and the obstacles facing workers living with disabilities were the key themes emerging from the Lekgotla discussions. Defining gender and gender relations, particularly how it relates to men and women was seen as part of the on-going discussions the forums will engage in.

When we take up gender issues we are not dealing only with women but we need to recognise that women are the people who are suffering – e.g. at the Nurses Summit the Minister of health – spoke about the suffering of women. We cannot be disrespectful to men but we need to get men to take responsibility. Men are the key people spreading HIV. Our discussions are about the roles that both men and women assume based on the system of patriarchy.

The Gender Forum is attempting to find ways to address deep seated discrimination and oppression.

In the hospital it feels like that from level 7 up it is through sexual exchange that you can buy promotion. Women experience discrimination every day in the hospitals even the cleaners only sweep the men's toilets and many of these cleaners are women.

Setting up a gender skills audit, dealing with the gender wage gap and gender job stereotyping are some of the workplace equity issues programmes that have started but it seems that for now the forums are having more success with community related issues.

As Gender Forums we want to educate the community about domestic violence and the lifetime scars it leaves on our women and children. We think if the education can be driven by other men it will have more impact. The

biggest problem is that men do not discuss their problems with other men and if they do they are ridiculed by others and labelled half men. We are designing this campaign as men reaching out to other men with the hope that it might bring change. We are asking women affected to share the pain they carry from the abuse. Although awareness is done every day, people seldom target a men's only audience. We are also addressing myths men have for example that women who have had hysterectomies' are cold in bed.

An important part of the work of the Gender Forum is related to dealing with the challenges facing people living with disabilities.

The physically challenged do not get the training or promotions they deserve. The hospital infrastructure does not take into account the needs of the physically challenged for e.g. the corridors are too small, lifts do not work and even though this is reported it does not get fixed – with the argument that there are no funds. People in wheel chairs cannot go to the Human Resources offices, cannot reverse the wheel chairs if a fire should breakout and there are no toilets on the ground floor. Most institutions are not user friendly for the physically challenged. The physically challenged also find themselves stuck in certain kinds of jobs. For e.g. you are a data-capturer you will remain a data-capturer as no provisions will be made to create the infrastructure to assist you take on jobs where you need to move around or where you might need special equipment. You will find for e.g. a blind person on level 8 being supervised by someone on level 5. It is assumed that you cannot manage people because you cannot see. We need to expose such issues. We need to raise our voices not only take up the issues in writing. These issues are burning issues that must be taken to the multi-disciplinary meetings.



One of the Gender Forum's most important assets is the active participation of people living with disabilities in the forum. This helps to keep the issues on the agenda of the forum and sensitises members of the forum to the challenges facing people living with disabilities.

Nurses Forum – “Revitalise the spirit of nursing within us”

Throughout the Lekgotla's the Nurses Forums had very lively and engaging discussions. Nurses together with the other participants in the forums took a long, hard look at what they see as the degrading of the profession and the loss of “spirit” amongst nurses. This loss of “spirit” was identified as the key challenge facing the Nurses Forum.

Our motto is- revitalize the spirit of nursing within us. All discussions by nurses testify that the spirit has been lost and we need to revive the spirit of nursing. To achieve this, we need to unleash the nurse within us so that we are able to reach our maximum potential. No one is born a nurse, we are however socialized to learn to care and this is lost when we choose our different careers. Now when you become a nurse it is not the four years of training that qualifies you as a nurse but the person within you. Nursing is one of the few professions that require passion and love for your work. If you read the bible you will learn that Jesus Christ was also a nurse because as he went through his journey he touched people and brought back the change in their lives. We cannot carry out our daily duties as nurses before we unleash the spirit within so that we can touch and change people's lives.

For the Nurses Forum the revitalisation of the profession needs to happen at a number of levels: the personal empowerment and commitment of the nurse, the involvement of the nurse at an institutional and the nurse as a role model at a community level.

At a personal level: *We want the nurses to stand up not only when there is a problem. Our aim is to ensure that we have a voice, express ourselves and get involved in union matters. As nurses most of the time we do not talk and we are afraid of being part of the union in case management ostracises us. We also do not make sure that our voices are heard in the Nursing Council for e.g. on issues of the changing of fees. As the nurses forum we would like to see empowering through sharing. We would like to see all nurses sent for assertive training on how to use the different channels of communication.*

As nurses we also need to value firstly value our own contribution, our creativity when things are tough and our ability to improvise. Nurses for example will go out to find disposable cutlery because there is no cutlery in the hospital or bring crockery from home. They end up washing disposable gloves when no gloves are available. Valuing what we do will also help us recognise how some of our actions can expose us and our patients to dangers when for example we reuse the disposable gloves. It feels like nurses are the only people working for the Department of Health and yet we are the last to be consulted.

Nurses trained in the tertiary institutions are exposed to technology while senior nurses are rich with experience. We need to find a way of integrating what we all bring into the workplace. We must see each other as a fruit salad - we put together different fruits with different colours and sizes. All fruits add flavour which makes the salad delicious and enjoyable. We need to learn from each and conduct in-service trainings in the workplace in order to capacitate each other. We need to work as a team because we need each other as workers.

We can look at the KZN Nurses forum as an example of working together: In KZN reporting we started a journal club in 2 hospitals. The club meets once a month to read journals and then have discussions. We organised a mental health day and we are discussing medical conditions like schizophrenia to improve our knowledge of nursing. We are encouraging role modelling where senior-staff are able to be good role models for junior staff in order to improve patient care and nursing as a profession.

At an institutional level: We have managed to get representation at an institutional level in various training committees. Some of us are members of these committees. Being part of these committees enables us to drive the development of nurses because the department tends to forget about nurses. Each time nurses need to go for training institutions complain about being short staffed and don't send nurses for training. As committee members we are able to ensure that all nurses attend training and are developed. We appreciate the engagement with other forums because we acknowledge and recognize that other forums exist and we are not an island as the nurse's forum. This is important because we need to know what other forums are discussing and look at items that we can tackle together as a collective. For example if I get a needle prick, I will need help from OHS.

At a community level: *As a nurse I represent the community and I need to keep in contact with the community. This we do through outreach projects, some of these are informal projects but we need to have more formal HOSPERSA projects. We are identifying one challenge that exists in the community and trying to engage with the community in order to address that particular problem. We recognise that we can have more impact on dealing with diseases like TB if we bridge the gap between the community and the nurses. There is a lack of trust and to treat a member of the community the person has to trust you. We are trying to be more visible in our communities through outreach projects, campaigns and working together with the community as partners. If we look at nursing in the past, the community trusted the nurses because they were able to go to communities after a woman has given birth and they would visit that home for a week. It will be impossible to do the same today but we need to find other ways of building trust and partnership, a partnership where the community can understand some of the challenges we face as nurses are prepared to support our struggle to improve our working conditions.*

What value can these dialogues bring

- We are creating think tanks, developing expertise , reviving the union , encouraging peer support and learning amongst more senior and new shop stewards
- The idea of debating, engaging, sharing ideas and finding solutions can be taken back to Branches and General meetings become important spaces for these dialogues
- These forums can be important recruitment tools ,you can grow Hospersa in quantity and quality
- Forums help everyone to participate , people get interested because it can be linked to their specific needs
- This will bring something different, a different perspective

Shaping our organisational culture – capturing strong feelings of the Participants

“ Hospersa Activism is about shop stewards who are not part of corruption, but part of solutions, who do not accept bribes, who know who they are and who respect themselves”

“ When young workers see older workers absent on pay day or going on lunch without returning , it is not a good example ”

“Most men do not even test for HIV, they test by proxy , that is after their partner has tested”

Key Recommendations from the Provincial dialogues

Nursing Representatives

- HOSPERSA must develop a Strategy for Nursing, focussing on the following;
- Building nurses capacity and confidence to address the issues affecting them
- Ensuring platforms for nursing issues to be formally addressed with the employer
- Addressing the abuse of nurses by, doctors, patients and community
- Building strong partnerships with the community to rebuild trust in nursing
- Campaigning for adequate nurse patient ratios, filling of nursing vacancies , provisioning adequate equipment and ongoing training
- Look at senior nursing mentors for young nurses ,
- A focus on ethics and accountability, and criteria for entry into nursing fields
- Resolve the barriers particularly short staffing that currently inhibits possibilities for nurses to be released for formal and ongoing in service training programmes
- Addressing the substandard nursing education, particularly those of private for profit nursing colleges.
- Addressing care for the carers , motivational and support networks



Gender Forum

- Build capacity and understanding on issues of gender and broader equality
- Ensure representation of people with disabilities on the Gender committee, and explore possibilities of a separate forum for consideration in future Constitutional changes.
- Develop programmes in partnership with communities to address Gender Based Violence
- Develop a union strategy addressing young women workers who are particularly susceptible to sexual harassment
- Popularize the male and female condoms, contraception and family planning
- Use Men and Women

Young Workers

- Develop strategies to attract young workers into unions particularly using social media
- Build capacity of young workers around their rights and responsibilities in the world of work
- Address the issues of money management , debt management and financial security
- Address the risky behaviours particularly stemming from alcohol and substance abuse
- Focus on family planning , contraception and safe sexual practices



HIV & AIDS

- Education of forums on HIV& AIDS , Prevention, Treatment ,Care and Support issues
- Increase members access to the Employee Wellness Programmes ,including HCT
- Education around Policies dealing with HIV& AIDS in particular the Policy for Incapacity Leave , Ill health & Retirement (PILIR) which is applicable in the Public service
- Occupational Exposure
- Address presenting challenges , that affect the Country HIV& AIDS Programmes in public hospitals

OHS

- Conduct OHS Inspections at the workplace by conducting Awareness Days in all Provinces
- Build members awareness and understanding of OHS Rights at the workplace
- Promote and campaign for Preventive OHS Strategies
- Education & Training on Compensation Policies and procedures
- Campaign for Safe Needle Devices, N 95 Masks and Hep B Vaccines
- Promote the reporting of all workplace injuries and diseases

Young Workers

- Build the young workers network and communication through social media
- Educate young workers on money management and financial planning
- Develop programmes that address risky behaviours, excessive drinking and substance abuse
- Develop empowerment programmes addressing the susceptibility of young women workers to sexual harassment in the workplace
- Look at mentoring programmes for seniors and juniors at the workplace, in the union and the community
- Promote healthy living

In Conclusion

This booklet represents the key themes that arose during the Lekgotla's as well as recommendations that were common to a few of the Provincial dialogues. This represents the voice of 193 Hospersa Shop stewards , and workplace leaders around HIV& AIDS, the voice of 103 women unionists, and 90 were male unionists who are at the coalface of service delivery.

This booklet explores possibilities of documenting HOSPERSA journey to addressing crucial union issues. It is intended to popularise the views and thoughts of our leaders in the union , towards shaping the HOSPERSA Equality Agenda for the years to come.



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