



# Study on Improvement of Road Safety and Health through Road Side Station Services along the Northern Corridor Final Report

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In Partnership with





Study conducted by



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# **List of Abbreviations**

ARV Anti-Retroviral Virus

CSWs Commercial Sex Workers

DRC Democratic Republic of Congo

FSW Female Sex Workers

HCT HIV counseling and Testing

HIV/AIDS Human Immuno Virus/Acquired Immune Deficiency Syndrome

IEC Information, Education and Communication

IT Information Technology

M&E Monitoring and Evaluation

MoH Ministry of Health

MoU Memorandum of Understanding

NC Northern Corridor

NGO Non-Governmental Organisations

NSA North Star Alliance

NCTTA National Corridor Transit and Transport Authority

RSS Road Side Stations

RWCs Roadside Wellness Centers

S&H Safety and Health

STIs Sexually Transmitted Infections

SWRW Safe Way Right Way

SW Sex Worker/s

TYPSA Engineers, Consultants and Architects

VCT Voluntary Counseling and Testing

# 1. Proposed Safety and Health Programme

#### 1.1 Introduction

This chapter outlines the proposed Safety and Health Programme. This involves two main areas: Safety and Health Programme details and Programme implementation strategy.

#### 1.2 Programme Objective

The Safety and Health Programme component of the Road Side Station seeks to implement interventions aimed at nurturing the right attitude and behaviour among Northern Corridor road users and communities with regard to road safety particularly around roadside stations. On the health sub-component, the interventions have been designed to focus on mitigating the spread of HIV/AIDS and other communicable diseases and alleviating their socio-economic impact on the lives of people who work and live along the northern transport corridor.

The implementation of the Road Safety and health campaign is expected to lead to improved safety and health for crew and long distance passengers. Also it is expected to lead to better health and safety of the communities living along the Northern Corridor. The Programme will be implemented by the NCTTA in partnership with North Star Alliance and in collaboration with the Safe Way Right Way amongst other stakeholders.

#### 1.2 Programme Details

The programme detail covers the description of different projects including key activities, project costs and overall plan and timeline.

#### 1.2.1 Key activities

Key activities are highlighted for the programme. These include the following projects:

- 1. Infrastructure Development Project
- 2. Expansion and upgrade of wellness centres Project
- 3. Harmonization and standardization of services project
- 4. Behavioural change communication project
- 5. Strengthening work place policies on Road safety and HIV/health issues Project
- 6. RSS Emergency Response Project
- 7. HIV prevention, care and treatment project
- 8. Knowledge Management, information management Project
- 9. Economic Empowerment and livelihood project

The programme details matrix is shown in *Table 1* 

Table 1 RSS Project document for Road safety sub program

Key activities	Overall plan
<ul> <li>1. RSS Infrastructure Development Project</li> <li>Provision of adequate parking and rest areas for drivers</li> <li>Expansion and upgrade of Wellness Centres Project</li> <li>Provision of adequate sanitary services</li> </ul>	<ul> <li>Safe Way Right Way (SWRW) and North Star alliance (NSA) and other partners are members of a project steering committee headed by NCTTA which ensures Safety and health issues are included in the RSS design and construction</li> <li>Equip RSS centres with wellness facilities</li> <li>Upgrade current wellness centres into RSS standards</li> <li>Upgrading RSS infrastructure to permanent structures</li> <li>Advocate for safety friendly infrastructure like bumps that do not lead to crashes</li> </ul>
<ul> <li>2. Harmonization and standardization of services project</li> <li>Guidelines and protocols</li> <li>Legislative reform issues and harmonization</li> <li>Review of national traffic laws</li> <li>Harmonization of the traffic regulations</li> <li>Build the capacity of different actors to implement the harmonized legislations, laws and protocols.</li> </ul>	<ul> <li>Advocate for Political goodwill for road safety</li> <li>Advocacy for harmonizing of legislations and address gaps to support the RSS programme</li> <li>Mandatory annual health checks, accreditation of wellness centres as a testing centres.</li> <li>Lobby for a review of traffic laws within countries served by the Northern Corridor. Review with the aim of updating and harmonizing the laws. Sensitisation of the traffic laws will be undertaken under the BCC project.</li> <li>Establish a capacity building project under the NCTTA to help stakeholders to deliver their responsibilities under the Charter (NCTTA will monitor and coordinate the CB project)</li> <li>Share data on risky drivers along the corridor using networked ICT</li> </ul>
<ul> <li>Behavioural change communication project</li> <li>Road safety behavioural change communication (IEC material development, Peer Education and driver training</li> <li>Defensive driving approach as basis for training</li> </ul>	<ul> <li>A communication strategy will be developed to cover all the issues related to education and awareness programmes that identifies target audience their knowledge attitudes and practices relevant to both road safety. The communication strategy outlines intended audiences and key activities for each strategy.</li> <li>It lays out lays out communication objectives, communication channels, messages concepts.</li> <li>A behavioural change that address the unwanted road behaviours like free wheeling</li> <li>IEC materials development through innovative ways like use of CD ROMs and radio programmes</li> <li>Design hand books for drivers; this should include more lessons on safety, time to spend in the yard, time of rest, time to leave, etc.</li> <li>Drivers of trucks must have been drivers of small cars showing respect, morality, courtesy.</li> </ul>

- 4. Strengthening work place policies on Road safety and HIV/health issues
  - Workplace policy on Road safety
  - Advocacy for Road safety and Occupational health incorporated and implemented within the workplace and environment
  - Care for accident victims at workplace
  - RSS Safety and Health Charter promotion
  - Capacity building of unions and transport companies
  - Promotion of self-regulations
  - Occupational health

- Radio programme
- Educational outreach programmes
- Sensitisation of the traffic laws
- Road safety caravans
- Promotion of road safety through Trade Union activities
- Joint publicity and enforcement campaigns
- Peer Education / Driver training
- Mass campaigns
- Bill Boards
- Recreational activities
- Television viewing rooms
- In door games
- Gym facilities
- Other Sports activities
- RSS will operate as hub and operational centres for promotion of workplace safety policy for fleet companies. RSS will assist companies as the bases for implementation of journey management plans
- Advocate and improve the use of condoms for drivers who are separate from their homes for long
- Advocate for two drivers per truck based on the Canadian experience : one to drive from Point A to Point B and the other one to drive from Point B up to the end of the journey
- Advocacy for Health, safety security and environment
- Promotion of road safety and occupational health policy
- Promotion of journey management
- Capacity building programmes have been identified for a number of stakeholders for the efficient operation of RSS. A capacity building strategy will be developed outlining the capacity gaps that need to be filled.
- CB for Trade Unions
- CB for RSS staff
- CB for transport owners
- Upgrading the existing wellness centres or set up new ones at the designated RSS sites
  to ensure delivery of Minimum Health Service Package (eye checks and hearing, BP,
  BMI, Blood sugar etc.) Define the minimum package.
- Under the flagship of SWRW, a charter is being implemented by the members who lead

	<ul> <li>to improved safety and health. The overall plan of this project is to popularize the charter for buy in and uptake by various stakeholders particularly the fleet owners and transporters.</li> <li>Promote a network of agencies that embrace safety and health charter</li> <li>Promotion of charter through trade unions</li> <li>Promotion and strengthening of charter among transporters</li> </ul>
<ul> <li>5. RSS Emergency Response Project</li> <li>Emergency rescue system</li> <li>Ambulance services</li> <li>First Aid services</li> </ul>	<ul> <li>The plan is to set up and operate a functional road emergency rescue systems. The project intends to adapt and expand the concept used by the Petroleum Institute of East Africa and will include the provision of ambulance system along the Northern Corridor</li> <li>Emergency response</li> <li>Ambulance provision</li> <li>Victim stabilization and referral</li> <li>First Aid training and services at RSS</li> <li>Advocate for cranes to assist in removing broken down vehicles along the corridor</li> </ul>
6. Knowledge Management, information management     • Data management, reporting, best practices documentation	<ul> <li>Develop an effective M &amp;E system that links up with the government departments at various levels</li> <li>Develop standard indicators and partnerships</li> <li>Setting up a standard IT monitoring system</li> <li>Establishing Electronic Data base, Data sharing and Reporting</li> <li>Referral site linkages and networking</li> </ul>

Table 2 Project document for Health sub program

Key activities	Overall pla
ney activities	O teran pra

#### 1. HIV prevention, care and treatment project

- Treatment for minor illnesses
- HTC,
- ARVs, TB
- STI/screening and treatment,
- Condoms supply and distribution
- And other health issues
- Workplace policy on HIV/AIDS
- Advocacy for HIV/AIDS workplace and environment

- Ensure delivery of a standardized and comprehensive Health Service Package to include occupational health (eye checks and hearing, BP, BMI, Blood sugar, etc.).
- Work with transport companies to incorporate Occupational health and safety in their workplace policies.
- Promotion of condom use and safe sex will be undertaken at workplace levels
- Promotion of HIV/STI prevention
- Promote the provision of self-screen kits for testing HIV for people who can't go to the laboratory to ensure secret is well kept
- Referrals for care and treatment of HIV and TB
- Support groups

- Care for HIV/AIDS victims care at workplace
- 2. Behavioural change and communication project
  - IEC materials development and production
  - Radio programme
  - Educational outreach programmes
  - Life-saving caravans
  - Promotion HIV/AIDS
  - through Trade Union activities
  - Mass campaigns
  - Promotion of condom use
  - Bill boards
  - Road safety behavioural change communication (IEC material development, Peer Education and driver training
  - Defensive driving approach as basis for training
  - Sexual behaviour change communication (IEC Material development, Peer Education, health education etc.)
- 3. Expansion and upgrade of wellness centres Project
  - Equip and rearrange health centres and facilities
  - Expand wellness centres along the Corridor for provision of comprehensive health package

- Advocate and improve the use of condoms for drivers who are separate from their homes for long.
- A communication strategy will be developed to cover all the issues related to health education and awareness programmes that identifies target audience their knowledge attitudes and practices.
- Peer led prevention activities
- Design and production of appropriate communication materials

- Mapping of existing services and providers or gather related information if it exists
- Strengthen existing activities and build capacity of actors
- Adopt lessons and best practices from across the globe
- Linkages with MOH in the respective countries

#### 4. Knowledge Management

- Develop standard indicators and partnerships
- Setting up a standard IT monitoring system
- Establishing Electronic Data base, Data sharing and Reporting
- Sharing of best practices

# 5. Economic Empowerment and livelihood project

- income generation amongst the SW
- Fund to provide micro finance for drivers, and other community members
- Create a livelihood fund for SW and drivers
- Enhance support for HIV/AIDS orphans

- Develop an effective M &E system that links up with the government departments at various levels
- Strengthening partnerships
- Create opportunities for learning and sharing best practices
- Networking the sites, information dissemination
- A small poverty alleviation programme will be created to ensure that both drivers and sex workers can attain alternative income generating activity for poverty alleviation and also avoid risky behaviours.
- CB Sex Workers and Truckers on Financial Management.
- Target programmes for well-educated young women who are involved in the sex trade

# 2. Programme Implementation Process

#### 2.1 Introduction

This chapter outlines the proposed programme implementation through which the safety and health programme will be delivered. It is necessary to highlight the institutional setting through which the programme will be delivered. In addition the programme must be anchored within government policies; with strategic priorities and action plans developed and budgeted for on a sustainable basis.

#### 2.2 Key Recommendations on the implementation process

Key recommendation of the implementation of the RSS wellness centres have been outlined in the matrix in *Table 2*.

Table 2 Key Recommendation for RSS Safety and Health Programme

MANAGEMENT SYSTEM ELEMENTS	Safety and Health
STSTEW ELEWENTS	
RSS Programme	Designate a regional agency office to coordinate RSS activities across the Northern Corridor. The NCTTA would be the preferred option.
Management	<ul> <li>Designate at national level a lead agency/department for the development and monitoring of road side stations which is essential for effective multi- sectoral coordination for road safety and health issues. It is recommended that at national level the Ministry of Infrastructure and transport is given an initial coordinating role, however Ministry of Health is another option. The overarching function of this lead department is the creation of a results framework for the delivery, coordination and monitoring of RSS and leadership of the implementation effort set out in the strategy and action plans which are agreed by the high-level coordination body.</li> </ul>
	Designate at national level a focal office within the MOH to health issues in RSS. Focal persons in Local Government and Police could be other options.
	Agree to designate an NGO or private sector to run the RSS on behalf of Government. The preferred organisation must have a track record and experience on wellness and safety along the Corridor
	<ul> <li>Build capacity in the lead agency/ road safety department and focal office in Ministry of Health with issues to be covered by RSS covering road safety strategy, drivers and users; road safety stratistics, research and analysis; road safety economics; road safety promotion and road safety strategy coordination. In regard to health include injuries and trauma care; HIV/AIDS prevention and care. The office would propose, in consultation with other key stakeholders, the outcome and institutional output targets for adoption across RSS.</li> </ul>
	Designate RSS as health centres within the national health ranking system (e.g. Dispensary or HC2)
	• Encourage local and municipal authorities to appreciate and be involved with issues of RSS and achieve a higher level of ambition in their road safety and health issues.
	Specify the responsibilities of the key government stakeholders – transport, justice, police, roads, health, and education - for road safety, ensuring that RSS benefits support from these agencies.
	<ul> <li>Upgrade road safety capacity across all departments and urban administrations to improve understanding of the road safety problem; crash injury problems and cost-effective, evidence-based strategies and countermeasures, HIV/AIDS prevention and care within areas of RSS.</li> </ul>
	Include the RSS issues into the national road safety strategy and national health strategy and supporting action plans to RSS as a strategy of improving road safety and health.
	Commence capacity building initiatives for the personnel that will manage the RSS.
	Ensure stakeholder accountability for results by, e.g. annual performance agreements, memoranda of understanding.
	Involve users of the Northern Corridor such as transporters and truck drivers unions in implementing the proposed project
Coordination	Advocate for political will in road safety activities and RSS in particular
	Establish a coordinating hierarchy comprising decision-making and consultation levels at three levels: regional, national and local level where RSS is located.
	Involve users of the Northern Corridor such as transporters and truck drivers unions in implementing the proposed project.
	The Regional levels of the coordination hierarchy should be entrusted within the NCTTA. It should have representation of key national and NGO sector in terms of collective decision making. A small secretariat at the NCTTA would be appropriate to coordinate the entire RSS issues.
	<ul> <li>National RSS Wellness Taskforce should be created which includes infrastructure/transport, police, roads, and justice, lands, health and education ministries with NGOs and private sector representation. The RSS national committee or task force composed of senior government officials are at the core of the hierarchy.</li> </ul>
	A local committee where RSS is located to oversee the operations of RSS for local leadership buy in and support
	Review and expand coordination arrangements between the wellness centres and local Government health centre including referrals and drug supply

	mechanisms
	Local administration to be responsible for the road signs to avoid vandalism
	Build or develop further key partnerships between stakeholders e.g. police and roads authorities to promote RSS.
	Engage the road safety NGO sector in the coordination hierarchy and create a range of partnerships to achieve results.
Legislation	<ul> <li>Consult Ministry of Justice if there is need as a matter of priority whether there is need to change the law or, following the minor amendments which have been identified for the smooth operation of RSS.</li> </ul>
	<ul> <li>Address any identified deficiencies in the mandatory third party motor vehicle insurance scheme and the health sector insurance schemes to produce country-wide coverage and assist drivers with health care</li> </ul>
	Consider how Defensive driving can be made a mandatory courses for PSV and HGV drivers along the Northern Corridor
Funding and resource	Consider self- paying schemes like laboratory services and Defensive driving courses and for inclusion in RSS activities
allocation	Establish sustainable sources and mechanisms for annual funding for RSS by e.g. earmarking resources from general taxation, creating a road safety fund from user fees and insurance levies.
	Develop long term funding proposals and associated prioritization and financial management systems with clear RSS funding streams in government budgets.
Promotion	Develop a communication strategy that includes:
	High-level multi-sectoral promotion and championing of government, community and business sector responsibilities for achieving road safety results based on the activities of RSS including Safety and Health
	High-level multi-sectoral promotion and championing using the national health education promotion framework to promote RSS
	Political leadership from all the key Government stakeholders can be demonstrated by:
	O launching the new road side stations
	O engaging public and Parliamentary support for road safety on an on-going basis
	O Showing a positive example in complying with road traffic law by showing companies with best practices along the Corridor groups.
	Promote workplace road safety policy amongst transport operators
Manifordina	Provide for knowledge transfer in transport and police sectors to achieve capacity for development of road user awareness and behaviour measures.
Monitoring and evaluation	<ul> <li>Study and review current Monitoring and Evaluation tools used safety and health in the region particularly by NSA and assess how such tools could be used RSS</li> </ul>
	Independently audit progress of implementation of agreed project scope on regular basis and report to lead agency and stakeholders
	A behavioural change that address the unwanted road behaviours like free wheeling
Information and	Develop pilot surveys and research strategy involving the RSS activities to understand more on safety and health issues.
knowledge management	Cooperate with the Universities and NGOs to start research on RSS potential in improving road safety
management	Police forces to share data on dangerous drivers
Emergency medical	Establish Emergency rescue based on RSS
services	Work with East African Petroleum Institute and agencies like Red Cross/St. John ambulance on boosting the capacity of RSS in emergency rescue
	Acquire ambulance services based at RSS
	Advocate for cranes to assist in removing broken down vehicles along the corridor
	·

- The choice of wellness centres location by Member States like Kenya
- The distance between RSS. The distance should not be less than 100 km
- The size of the wellness; the largest centre will prevail and;
- The appropriateness of the location (land, number of population deserved and also where those facilities exist to improve them)

#### 2.3 Mapping of wellness centres at Road Side Station locations

A separate but related study has studied and made recommendations suitable locations for the development of Road Side Stations<sup>1</sup> across the Northern Corridor.

However, it is recommended that not all RSS shall have wellness centres. Wellness centres have been proposed based on the following criteria.

Table 3 Location of proposed RSS wellness centres along the Northern Corridor

No	Burundi	D.R Congo	Kenya	Rwanda	Uganda	South Sudan
1.	BUGARAMA	GOMA	SALGAA	RUHANGO	PAKWACH	NIMULE
2.	KAYANZA	BENI	SULTAN HAMUD	NYACYONGA	KAMDINI	MINIOZZ
	KATANZA					
3.		BUNAGANA	JUA KALI	RUGENDE	IDUDI	
4.		BUKAVU	AWASI	RYABEGA	MBIKO	
5.			MIRITINI		LYANTONDE	
6.					MIGEERA	
7.					KABALE	

The Consultant has projected that within the next 2 years, 18 Road Side Stations will be opened. This was calculated on the assumption that within Year 1, 6 RSS will be set up and in Year 2 additional 12 RSS will be set up across the corridor. The Consultant recommends that the safety and health component can commence immediately in improvised structures as full infrastructural developments are undertaken.

Table 4 Year 1 proposed RSS wellness centres establishment or upgrade

No	Burundi	D.R Congo	Kenya	Rwanda	Uganda	South Sudan
1.	BUGARAMA	BUKAVU	SALGAA	RUHANGO	MIGEERA	NIMULE
2.			SULTAN HAMUD			

Table 5 Year 2 Proposed RSS wellness centres establishment or upgrade

No	Burundi	D.R Congo	Kenya	Rwanda	Uganda	South Sudan
1.	KAYANZA	BUNAGANA	JUA KALI	RUGENDE	ELEGU	NASITU
2.			AWASI	RYABEGA	LYANTONDE	
3.			MIRITINI		IDUDI	

<sup>&</sup>lt;sup>1</sup> TYPSA Engineering Establishment of RSS along the Northern Corridor, Draft Final Report, March 2014.

#### 2.4 Institutional Setting for Management of the RSS

#### 2.4.1 Regional Management of RSS wellness centres

It is recommended that at regional level, a regional steering committee comprising of NCTTA, SWRW, NSA and selected regional agencies to coordinate the RSS activities at regional level. This committee will be coordinating with the Main RSS Committee which oversees the infrastructure development as suggested in the TYPSA report.

It is suggested that NCTTA is the secretariat with a full time RSS Safety and Health coordinator.

The role of the regional S&H committee will be to:

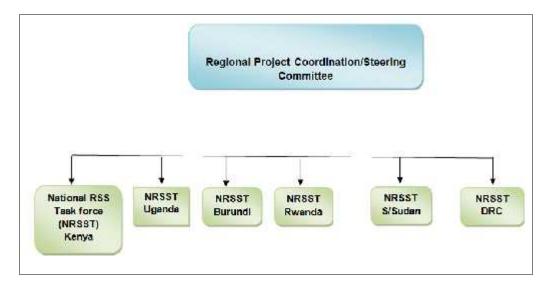
- 1. To oversee provide the guidance to the roll out of the RSS safety and health implementation process
- 2. Advise on coordination, mobilization, allocation and harmonization of funding for safety and health programme
- 3. Advise the National RSS Taskforce on issues of safety and health implementation
- 4. Track implementation and roll out of S&H Programme as well as review and update it from time to time.

Given the capacity gap and absence of institutional setting for road safety at regional level, it is recommended that provide technical assistance for the RSS Safety and Health roll out is required. It is therefore proposed that this Consultant/coordinator is based at the NCTTA.

#### 2.4.2 National Management of RSS Safety and Health Programme

At the national level, it is recommended that a national taskforce to oversee the implementation of RSS roll out is established. The diagram below suggests the proposed establishment process.

Figure 1 Proposed set up of the RSS.



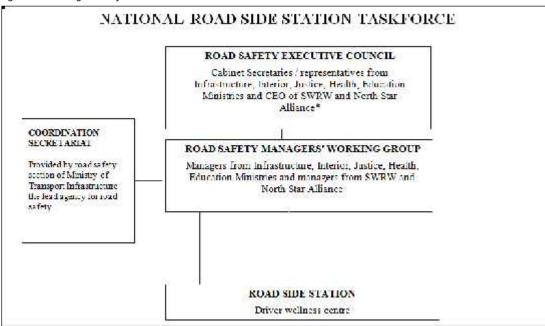
The task force at the national level shall have representatives form the key agencies including

- Ministry of Transport and Infrastructure,
- the Road Authorities,
- Ministry of Health,
- the private sector and
- Civil society.

The role of the National S&H Task Force is to:

- 1. To provide the guidance at national level to the roll out of the RSS establishment process
- 2. To coordinate amongst various stakeholders for the implementation of RSS
- 3. Advise on coordination, mobilization, allocation and harmonization of funding for road safety promotion.
- 4. Serve as the steering committee for this Programme at national level
- 5. Track implementation and roll out of this Programme as well as review and update it from time to time.

Figure 2 showing a task force at national level



<sup>\*</sup>In case of Kenya and Uganda and D.R. Congo where North Star Alliance is active

It is recommended that at National level, there should be a National RSS safety and Health Coordinator is appointed. It is recommended he/she is based at the Ministry of Transport and Infrastructure or health.

#### 2.4.3 Best Practice for National RSS Task force

Government of Kenya has set up a RSS taskforce in place to fast track the establishment of RSS. Already meetings are being held to ensure that the RSS roll out is harmonized and the task force has membership

from Ministry of Transport and Infrastructures, national Traffic Safety Authority, National Road Safety Trust, Safe Way Right Way, North Star Alliance, Trade Mark East Africa, Northern Corridor Transport Corridor Authority, Ministry of Lands and Ministry of Health.

Already, Kenya has agreed to start RSS activities at Salgaa and Sultan Hamud along the Northern Corridor.

#### 2.5 RSS wellness centre management mechanism

This report recommends that the delivery of services at RSS management at local level should be entrusted to either the private sector or NGO sector as shown in the region by agencies providing wellness services. The public sector including the national taskforce should focus on oversight, monitoring and guidance function rather than actual day to day implementation.

#### 2.5.1 Staff personnel required

It is recommended that 14 members of staff personnel to manage the RSS for its effective operation for purposes of managing both safety and health issues.

Table 6 P	Proposed RSS wellness centre staff establishment
	Description
1.	Centre Coordinator
2.	Clinician (Diagnosis and treatment)
3.	HTC Provider (HIV Counselling and Testing)
4.	Lab Technician (Lab)
5.	Pharmacist (Pharmacy)
6.	Nurse (CCC and Occupational Health)
7.	Data officer
8.	Finance Assistant
9.	Community mobilizer
10.	Cleaner
11.	Security
12.	HR Assistant
13.	M & E
14.	IT Officer

# 2.6 Proposed Budget

The programme estimates the cost to be US\$ 13,563,912 million. In the first year US\$ 4,733,304 million will be required and US\$ 8,830,608 million in the second year.

The summary of the costs include: Programme management \$1,511,982; Establishment and upgrade of wellness centres \$ 2,430,000; Harmonization and standardization of services project \$315,858; Road safety Behavioural change and communication \$ 1,418,580; Sexual Behavioural change and communication \$1,418,580; Emergency response\$ 1,944,000; Strengthening of Workplace policies \$184,716; HIV prevention, care and treatment project \$3,952,782 and; Economic empowerment project \$387,414.

A cost estimate of the 2-year safety and health programme has been undertaken. This was calculated on the assumption that within Year 1, 6 wellness centres will be established and year 2 additional 12 centres will be set up across the corridor.

The summary cost estimates is provided in *Table 7* below and the detailed are attached in *Appendix 1*.

Table 7 Safety and Health Budget costs

Project item	Year 1 costs	Year 2 costs	Sub-total estimates	Year 1 per 6 RSS	Year 2 per 12 RSS	Total cost per 18 RSS	
Programme management	203,713	156,713	360,426	503,994	1,007,988	1,511,982	
Establishment and upgrade of wellness centres	151,000	127,000	278,000	906,000	1,524,000	2,430,000	
Harmonization and standardization of services project	18,881	16,881	35,762	113,286	202,572	315,858	
Road safety Behavioural change and communication	78,810	78,810	157,620	472,860	945,720	1,418,580	
Sexual Behavioural change and communication	78,810	78,810	157,620	472,860	945,720	1,418,580	
Emergency response	108,000	108,000	216,000	648,000	1,296,000	1,944,000	
Strengthening of Workplace policies	10,262	10,262	20,524	61,572	123,144	184,716	
HIV prevention, care and treatment project	355,013	284,013	639,026	1,413,594	2,539,188	3,952,782	
Economic empowerment project	23,523	20,523	44,046	141,138	246,276	387,414	
Total	1,028,012	881,012	1,909,024	4,733,304	8,830,608	13,563,912	

# 2.7 Sustainability of the Programme

It is recommended in order to ensure the sustainability of the programme the following are the suggestions:

#### 2.7.1 Consider self-paying services

There is need for consideration of implementing self- paying schemes for services provided at wellness centres. These include laboratory services and Defensive driving courses among others.

#### 2.7.2 Consider creation of a safety and health fund.

It is recommended that development of safety and health fund is explored. This could be used to pool funds for the programme. This fund could include support form nation, regional and international agencies. At national level, it is expected that support from National Traffic Safety Authorities and private sector.

#### 2.7.3 Mainstream RSS wellness budget into Government budgets.

There is need to develop long term funding proposals and associated prioritization and financial management systems with clear RSS funding streams in government budgets. In order to achieve this, there has to be sustainable sources and mechanisms for annual funding for RSS by e.g. earmarking resources from general taxation, from user fees and insurance levies.

#### 2.7.4 Sustainable proposal development for funding wellness centres

Develop proposals for funding from development partners in regard to wellness centres on a regular basis. It is advisable that a wide range of development partners are approached rather than have a few partners who might withdraw and create lack of sustainability

#### 2.8 Programme implementation strategy

The implementation strategy covers oversight and management arrangements, Intervention areas, general objective, operational objectives, strategies, indicators, participating stakeholders, expected results timeframe and projected costs.

The implementation strategy for the programme is highlighted in the matrix below

Table 8 Matrix showing the Project Implementation Strategy

Project Area	General Objective	Activities	Strategies	Indicators	Participating stakeholders	Expected Results	Time fran		Q Q 3 4	Projected cost\$
Progran	nme Manageme	ent					1 2 3	4   1   2	3 4	
Safety and Health Program Management	Create strong awareness of the RSS Safety and Health Programme	1. Inform constituents of the existence of the program  2. Reinforce the adherence of involved actors in the program.  3. Create a favorable framework for program management.	Information and sensitization campaign regarding program implementation, and support for safety and health interventions through RSS  Create National Task Forces in each country to oversee the implementation of the programme	Number of Governments involved in meetings Number of sessions or informational meetings Number of NGOs involved in meetings Number of Trade Unions involved in meetings	NCTTA, SWRW, NSA Ministry of Transport, EAC, Transport owners. Truck drivers' union, Local administration	Strong Partnership built comprising of all stakeholder s built				\$1,511,982
1. RSS Infr	astructure Devel	opment Project								
RSS Infrastructure Development Project	Create a functional Road Side Station	Provision of adequate parking and rest areas for drivers     Expansion and Upgrade of Wellness Centres Project     Provision of adequate sanitary services	Refer to TYPSA document	Number of Governments involved in meetings Number of task forces meetings held Number of RSS constructed	NCTTA, SWRW, NSA Ministry of Transport, EAC, Transport owners, Truck drivers' union, Local administration	RSS infrastructu re developed along the NC				TYPSA Report
2.1 Provision of Adequate parking	Refer to TYPSA document	Refer to TYPSA document	Refer to TYPSA document	Number of parking spaces created per RSS Number of accommodation areas created Number of game rooms Number of Gym facilities available	Refer to TYPSA document	Refer to TYPSA document				

Project Area	General	Activities	Strategies	Indicators	Participating	Expected	Tin		fram					Projected
	Objective				stakeholders	Results	Q 1	Q 2	Q 0	Q Q	Q 2	Q 3	Q 4	cost\$
2.2 Expansion and upgrade of wellness centres Project for safety	Create optimal conditions for health care delivery for prevention and management of driver fatigue at RSS	1.Equip RSS as wellness and rest areas     2. Improve leisure facilities     3.Ensure drivers have adequate resting and accommodation	1.Equip the RSS centers with rest facilities  2.Enhance leisure facilities at RSS	# of wellness centres established # of wellness centres upgraded # of MoU with transport Unions to use the facilities	NCTTA, NSA, Ministry of Health, Ministry of Transport, Trade Unions and transport owners and other stakeholders, Local administration	Norms and standards of RSS established Working partnership with other teams								\$ 2,430,000
2.3 Expansion and upgrade of wellness centres Project for health	Create optimal conditions for health care delivery integrating counseling and testing, psychological support, and drugs at RSS	1.Equip RSS as health centers and improve access to health services to road users and communities along the corridor 2. Improve laboratory capability and supply Management 3.Ensure staff training 4.Enhance STI care and support 5.Enhance counseling and blood screening in health centers 6.Develop drug protocols for opportunistic Infections and PMTCT 7. Facilitate cooperation among all in health service delivery and follow-up	1.Equip and rearrange health centers  2.Enhance lab and imaging center  3.Train health care Providers  4. Manage STIs 5. Implement VCT  6. Ensure procurement of drugs, reagents, and consumables  7.Set up working partnerships	# of wellness centres established # of wellness centres upgraded # of MoU with Hospitals for referrals undertaken	NCTTA, NSA, Ministry of Health, Ministry of Transport, UNAIDS, EAC and transport owners, Truck drivers' union, Local administration	Norms and standards of RSS established  Drugs available  Working partnership with other teams								
2. Harmon	ization and Stand	ardization of services Proj	ect			<u>'</u>								
3.1 Guidelines and standards	Create a harmonized and standardized service provision	1.Develop guidelines and protocols	Harmonize legislations and address gaps to support the RSS programme	#of Mandatory annual health checks, # of accredited of wellness centres as a testing centres.	NCTTA, SWRW, NSA, Ministry of Health, Ministry of Transport, UNAIDS, EAC and transport									\$315,858

Project Area	General	Activities	Strategies	Indicators	Participating	Expected			fram					Projected
	Objective				stakeholders	Results	Q 1	Q 2	Q 0	Q ( 4 1	Q 2	Q 3	Q 4	cost\$
3.2 Information management			Information management of data management, reporting, best practices	#of data management system # of best practices in information management # of companies using fleet safety policies	owners  NCTTA NSA, Ministry of Transport, EAC and transport owners, Truck drivers' union, Local administration									\$90,000
3.3Harmonization of laws		1.Legislative reform issues and harmonization     2. Review of national traffic laws     3. Harmonization of the traffic regulations		# of traffic laws reviewed #of traffic laws harmonized										
3. Behavior	ural Change Com	munication												
4.1 Behavioural change communication	Reduce Road traffic crashes through awareness raising and prevention of crashes	1.Improve access to quality information regarding to road crash prevention 2.Reinforce prevention of crashes through for a change in habits 3.Reinforce participation of communities along the NC in the interventions	1. Transport operators mobilization for behaviour change 2. Community mobilization for behavior change 1. Sensitisation of the traffic laws 2. Promotion of self-regulations	# of sensitization sessions conducted # of people sensitized # of different road users approached # of IEC materials developed and disseminated # of programmes presented # of outreaches undertaken # of road safety caravans undertaken # of role models enlisted # of trade unions involved # of joint campaigns	TTCA, NSA, Ministry of Transport, EAC and transport owners, Truck drivers' union, Local administration	Sensitization carried out  Adoption of risk reduction behaviors  Training of leaders								\$ 1,418,580

Project Area	General	Activities	Strategies	Indicators	Participating	Expected	Time frame						Projected
	Objective				stakeholders	Results	Q 1	Q 2	Q Q 4	Q 1	Q 2	Q Q 3 4	cost\$
4.2 Sexual Behavioural Change Communication	Reduce STI/ HIV transmission via condom use	1.Improve access to quality information, encouraging abstinence, faithfulness, and condom use 2.Reinforce prevention of STI/HIV/AIDS for a change in habits 3.Reinforce participation of affected people in interventions	1.Community mobilization for behavior change  2.Condom social marketing and distribution	# of sensitization sessions conducted # of people sensitized # of HIV/AIDS patients	TTCA, NSA, Ministry of Health, Ministry of Transport, UNAIDS, EAC and transport owners, Local administration	Sensitization carried out  Adoption of risk reduction behaviors  Training of leaders Assured availability of condoms							\$ 1,418,580
4. HIV preve	ention, care and t	reatment project											
5.1 HIV prevention, care and treatment project	Improvement of psychosocial care for PLHIV and their families	1.Fight stigmatization     2. Organize social services to fight stigmatization and discrimination     3. Organize support groups for PLHIV	1. Set up community based network of partners to sensitize other partners and engage drivers in anti-stigma and anti-discrimination activities 2. Create social service area within health centers for support, meetings, discussions, VCT 3. Create PLHIV support Groups	# of RSS involved in health care delivery  # of patients getting Psychological counselling services	TTCA, NSA, Ministry of Health, Truck drivers' union, Local administration	Support for set-up network							\$3,952,782
5. Emergen	cy Rescue Project												
6.1 RSS Emergency Rescue Project	Provision of emergency rescue services	1. Enhance crash victim care and efficient Delivery to health units 2. Create RSS as emergency care centres for minor crashes 3. Enhance support to post crash care  HIV/Health workplace polici	Develop Emergency response activities based at the RSS     Provide Emergency care for the corridor	# of countries with RSS emergency fund system # of victims rescued and treated by the RSS system # of Companies with Emergency response programme	TTCA, NSA, Ministry of Health, Truck drivers' union, Ministry of Transport, EAC	Emergency system in place system in place Functional Emergency Rescue system Committee							\$1,944,000

Project Area	General	Activities	Strategies	Indicators	Participating	Expected			ram					Projected
	Objective				stakeholders	Results	Q 1	Q 2	Q Q 3 4	Q 1	Q 2	Q 3	Q 4	cost\$
6.1 RSS Workplace Safety policy	Control of road crashes in transport and freight companies work	1. Develop Road safety policy involving employees in their place of work  2. Sensitize staff to establish an internal road safety system 3. Train teams of mentor educator on road safety	1.Convince leaders, trade unions, or workers to promote road safety at transport organisation level to benefit workers and organisation as part of S&H programme	# of Capacity building programmes on advocacy # of Capacity building programmes on Charter &other safety issues	NCTTA, NSA, Ministry of Health, Ministry of Transport, EAC, Transport owners, Truck drivers' union,	Safety promoted at workplace								\$184,716
6.2 RSS Workplace Health project	Control of HIV/ AIDS in transport and freight companies work	1. Develop care of HIV+ employees in their place of work 2. Sensitize staff to establish mutual assistance system 3. Train teams of educator on STI/HIV prevention 3. Provide counseling, blood screening, condom distribution, STI treatment, and ART available at companies	1.Convince leaders, trade unions, or workers to establish a mutual assistance system funded by monthly contributions based on salary in order to provide ART to workers and their family members	# of Companies identified with HIV/AIDS policy programme # of workers Trade Unions working with TTCA on improving HIV/AIDS # of workers identified as seropositive	NCTTA, NSA, Ministry of Health, Ministry of Transport, UNAIDS, EAC, Transport owners, Truck drivers' union,	Employees treated for HIV								
6.3 RSS Safety and health Charter	Improvement of road safety through implementing a charter to promote self-regulation	Organize self-regulatory services to fight road crashes     Organize support groups for Charter throughout the freight and transport industry	1. Set up network of private sector partners to sensitize partners to adhere to a safety charter activities 2. Create social self-regulatory service for support, meetings, discussions, 3. Create safety and health charter support groups	# of transport owners involved in safety and health delivery # of trade unions that embrace and support the safety charter concept # of fleet owners who endorse the Charter	NCTTA, SWRW, Trade Unions and Transport owners, Truck drivers' union,	Support for Charter network								
7. Econom 7.1 RSS Livelihood Project	Reduction of socioeconomic consequences of HIV/AIDS	and livelihood Project  1. Enhance patient follow-up and homecare delivery  2. Create income-generation activities for socio-economic support  3. Enhance support to	1. Develop income generation activities for PLHIV and their families 2. Provide business skills to CSW and	# of countries with RSS live hood fund system # of commercial sex workers treated	NCTTA, NSA, Ministry of Health, Ministry of Transport, UNAIDS, EAC	Improved safety system								\$387,414

Project Area	General Objective	Activities	Strategies	Indicators	Participating stakeholders	Expected Results	Ti Q	me Q			QQ	Q Ç	QQ	Projec cost\$	ted
		HIV/AIDS orphans	drivers	by the system			1	2	3	4	1 2	3	4		

# Appendix 1Programme Projected Costs

#### **Detailed Budget for Safety and Health Programme**

Item	Project activity RSS safety and health wellness establishment	Year 1	Year 2	Total Estimates per RSS*	Year 1 Per 6 RSS*	Year 2 Per 12 RSS*	Total per 18 RSS* in one year
1. Programme Management							
1a. Regional Management office	Coordination of Regional RSS office (Based at NCTTCA)	35,715	35,715	71,430			
	Technical Assistance for RSS programme Travel and communication	84,000 72,202	37,000 72,202	121,000 144,404			
	Subtotal	191916	144916	336834			336,834
Personnel costs	Centre Coordinator	10,000	10,000	20,000	60,000	120,000	180,000
	Clinician (Diagnosis and treatment)	8,571	8,571	17,142	51,426	102,852	154,278
	Road safety officer	8,022	8,022	16,044	98,640	<u> </u>	
	HTC Provider (HIV Counselling and Testing)	3,571	3,571	7,142	21,426	42,852	64,278
	Lab Technician (Lab)	3,571	3,571	7,142	21,426	42,852	64,278
	Pharmacist (Pharmacy)	7,143	7,143	14,286	42,858	85,716	128,574
	Nurse (CCC and Occupational Health)	7,143	7,143	14,286	42,858	85,716	128,574
	Data officer	5,714	5,714	11,428	34,284	68,568	102,852
	Finance Assistant	2,857	2,857	5,714	17,142	34,284	51,426
	Community mobilizer	1,000	1,000	2,000	6,000	12,000	18,000
	Cleaner	2,143	2,143	4,286	12,858	25,716	38,574
	Security	2,143	2,143	4,286	12,858	25,716	38,574
	HR Assistant	2,858	2,858	5,716	17,148	34,296	51,444
	M & E	4,286	4,286	8,572	25,716	51,432	77,148
	IT Officer	4,286	4,286	8,572	25,716	51,432	77,148
	Sub total	65,286	65,286	130,572	391,716	783,432	1,511,982
2. HIV prevention,							
care and treatment	Medicine & Medical supplies	5,714	5,714	11,428	34,284	68,568	102,852
project	Condoms supply and distribution	300	300	600	1,800	3,600	5,400
	Electricity & water	1,143	1,143	2,286	6,858	13,716	20,574
	Stationery (Cartridges, toner, paper etc.)	1,071	1,071	2,142	6,426	12,852	19,278
	Sundry office supplies	500	500	1,000	3,000	6,000	9,000
	Repairs and maintenance	357	357	714	2,142	4,284	6,426
	Printing & Coping	714	714	1,428	4,284	8,568	12,852
	Driver Certification	2,857	2,857	5,714	17,142	34,284	51,426
	Travel cost (Fares)	357	357	714	2,142	4,284	6,426

	Telephone	429	429	858	2,574	5,148	7,722
	Monthly internet Access	1,429	1,429	2,858	8,574	17,148	25,722
	Software and IT System Installation & Maintenance	3,571	3,571	7,142	21,426	42,852	64,278
	Bank charges	571	571	1,142	3,426	6,852	10,278
	Sub total	355,013	284,013	639,026	1,413,594	2,539,188	3,952,782
Infrastructure	Office equipment	40,000	20,000	60,000	240,000	240,000	480,000
development project	Furniture	41,000	41,000	82,000	246,000	492,000	738,000
RSS wellness centre establishment	Other equipment	17,000	17,000	34,000	102,000	204,000	306,000
(Expansion and upgrade of wellness	Occupational Health and Safety equipment	45,000	45,000	90,000	270,000	540,000	810,000
centres Project)	Branding	8,000	4,000	12,000	48,000	48,000	96,000
, , , , , , , , , , , , , , , , , , , ,	Sub total	151,000	127,000	278,000	906,000	1,524,000	2,430,000
	Provision of adequate parking and rest areas for drivers  Provision of adequate sanitary services	Covered u	nder Main RS	S Component			
3. Harmonization and							
standardization of	Guidelines and protocols	4,000	4,000	8,000	24,000	48,000	72,000
services project	Legislative reform issues and harmonization	10,000	10,000	20,000	60,000	120,000	180,000
	Review of national traffic laws	See 1a abo	ove				
	Harmonization of the traffic regulations	1					
	Build the capacity of different actors to implement the harmonized legislations, laws and protocols.	2500	500	3,000	15,000	6,000	21,000
	Meetings and workshops Standards development sharing of best practices	2,381	2,381	4,762	14,286	28,572	42,858
	Sub total	18,881	16,881	35,762	113,286	202,572	315,858
4. Behavioural change							
communication	Peer Education and driver training	11,905	11,905	23,810	71,430	142,860	214,290
project (Road safety)	Road safety caravan	11,905	11,905	23,810	71,430	142,860	214,290
	Road safety behavioural change communication (IEC material development, Peer Education and driver training	11,905	11,905	23,810	71,430	142,860	214,290
	Life health caravan	11,905	11,905	23,810	71,430	142,860	214,290
	Outreach programmes	4,762	4,762	9,524	28,572	57,144	85,716
	Radio programme	9,524	9,524	19,048	57,144	114,288	171,432
	Defensive driving training	3,571	3,571	7,142	21,426	42,852	64,278
	Community Education and training	2,381	2,381	4,762	14,286	28,572	42,858
	Health and peer education (including balonzi)	5,000	5,000	10,000	30,000	60,000	90,000

	Billboards	5,952	5,952	11,904	35,712	71,424	107,136
	Sub total	78,810	78,810	157,620	472,860	945,720	1,418,580
4. Behavioural change							
communication	Peer Education and driver training	11,905	11,905	23,810	71,430	142,860	214,290
project (HIV/AIDS	Road safety caravan	11,905	11,905	23,810	71,430	142,860	214,290
Prevention)	Sexual behavioural change communication (IEC material development, Peer Education and driver training	11,905	11,905	23,810	71,430	142,860	214,290
	Life health caravan	11,905	11,905	23,810	71,430	142,860	214,290
	Outreach programmes	4,762	4,762	9,524	28,572	57,144	85,716
	Radio programme	9,524	9,524	19,048	57,144	114,288	171,432
	Health issues training	3,571	3,571	7,142	21,426	42,852	64,278
	Community Education and training	2,381	2,381	4,762	14,286	28,572	42,858
	Health and peer education (including balonzi)	5,000	5,000	10,000	30,000	60,000	90,000
	Billboards	5,952	5,952	11,904	35,712	71,424	107,136
	Sub total	78,810	78,810	157,620	472,860	945,720	1,418,580
6. RSS Emergency							
Response Project	Emergency rescue system (call out and emergence response system)	100,000		100,000	600,000		600,000
	Ambulance services (procurement of ambulance)		100,000	100,000		1,200,000	1,200,000
	First Aid services	8,000	8,000	16,000	48,000	96,000	144,000
	Sub total	108,000	108,000	216,000	648,000	1,296,000	1,944,000
7. Strengthening safety and health workplace policies	Workplace policy on Road safety  Advocacy for Road safety and Occupational health						
	Care for accident victims at workplace	See 4 abo	ve				
	RSS Safety and Health Charter promotion	2,500	2,500	5,000	15,000	30,000	45,000
	Capacity building of unions and transport companies	3,000	3,000	6,000	18,000	36,000	54,000
	HIV/AIDS prevention promotion through trade unions	4,762	4,762	9,524	28,572	57,144	85,716
	Occupational health promotion	See 4 abo	ve				
	Sub total	10,262	10,262	20,524	61,572	123,144	184,716
9. Economic Empowerment and livelihood Project		-	-				
ž	income generation workshop meeting amongst the SW and drivers	3,571	3,571	7,142	21,426	42,852	64,278

ĺ	Fund to provide micro finance for drivers	, 10,000	7,000	17,000	60,000	84,000	144,000
	SW and other community members						
	Create a livelihood fund for SW and	5,952	5,952	11,904	35,712	71,424	107,136
	drivers						
	Enhance support for HIV/AIDS orphans	4,000	4,000	8,000	24,000	48,000	72,000
Ì	Sub total	23,523	20,523	44,046	141,138	246,276	387,414