

AIDS and Business 2002 – the corporate awakening

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The world of commerce and industry is a behemoth which is often slow to change direction, but once it moves, it's virtually unstoppable. That is good news for South Africa, because business has finally woken up to the seriousness of the HIV epidemic and is taking steps to manage it.

It has been a slow process of recognition and understanding. Just over a decade ago, one of the concerns widely expressed by management in the retail world was "How will I handle the situation if my customers find out I have an HIV-positive staff member?"

A couple of years later, the concern was how to replace sick or dying staff members. Now retailers, manufacturers, miners and other businesses have realised that HIV is a far more holistic issue which is already impacting on every aspect of life and business. Washington Munetsi of Nestle is one of many who have realised that a catastrophe of such proportions has implications for the bottom line. Not only do companies face higher recruitment and training costs, they will also face a smaller consumer base, or consumers whose income has to be dedicated to more urgent medical and basic nursing needs.

The Medical Research Council's long awaited report says that AIDS is now the single biggest cause of death in South Africa. Those on the ground confirm that the numbers of sick, the fatalities, are very high and growing daily. Paul Matthew of The Learning Clinic says the road freight industry is losing 2000 drivers a year. In *Children Living with HIV/AIDS in South Africa: A Rapid Appraisal*, consultant Rose Smart writes: "South Africa has the fastest growing HIV/AIDS epidemic in the world, with more people infected than in any other country, with the exception of India. In 1999, at least one out of eight adults were estimated to be HIV-infected, representing about four million people. The highest rates are found in KwaZulu-Natal, Mpumalanga and the Free State."

Current thinking is that these figures have at least doubled, with one quarter of our population infected, most of them in the 15 to 45-year-old age group - the group from which the major part of our working adults is drawn, the most economically active group and the sexually active group in their prime reproductive years. This means that far more than 25% of any individual workforce could be infected, given that the incidence in the non-working population is much lower.

The highest rates are to be found in some of the more important industries in our economy, such as transport and mining. Both are severely affected

because of the way the industries are structured and the socio-economic factors which impact on employees. Large numbers of men are away from their homes and wives for prolonged periods. In such industries, the rate of infection is likely to be up to 65%.

With companies looking at the loss of between a quarter and half of their workforce - or more - it is no wonder that they have begun to take AIDS seriously. It is no longer a case of handing out a few condoms and sticking up a few posters from the Department of Health. How any company tackles the epidemic has become a strategic decision.

"This is going to hit your bottom line," says Sharon White, MD of AIDS Education and Training, who has been working in this field virtually since the start of the epidemic. "There are important questions you need to ask yourself: What does AIDS look like in your company? What programme do you currently offer on HIV? What can you offer? What do you offer for other life-threatening diseases? Where is the worst economic impact likely to be? How will the company pension fund be affected? What about other benefits? And finally, who do you entrust this to within the company? An HIV programme should not be made the responsibility of the staff nurse. It must be the responsibility of someone who can think strategically and is at a reasonably high level of management."

Unfortunately, this is not always the case. Looking at the experience in businesses across the board, it becomes apparent that the HIV programme only has high-level representation and patronage where a member of management has become an HIV champion at the outset. In many other companies, the HIV programme has to be fought for by someone like a staff nurse or counsellor, an individual who battles, sometimes at great personal cost, to get HIV onto the agenda of the Board.

Numerous companies have been through very similar learning curves: an individual wakes up to the business threat and the human tragedy and becomes an HIV champion. The company embarks on an education and awareness campaign. They learn by hard experience that top-down education does not work and the free condoms are being used as balloons. So they start investigating more pertinent means of communication, like industrial theatre. They discover peer education, one of the great awareness tools, which uses workers to talk to workers. Often, very successfully, commercial sex-workers are used to talk to workers.

Then they embark on some kind of surveillance to get an idea of the actual incidence in their workplace. The figures frighten them. They realise that the epidemic is progressing too fast, awareness is only one angle, and perhaps not the most effective one for them, certainly not alone. At this point, they start exploring a range of strategies, from the flavour-of-the-month (at this time, it's providing anti-retrovirals) to reducing sexually transmitted diseases (which reduces the rate of infection) to teaching people

life-skills which empower them to avoid infection, manage illness, and live better when they have the disease.

Realising that they are going to start losing key people, the company begins to explore other tactics - mechanisation, multi-tasking, multi-skilling. Then they reach the point many are at now, where they realise that all these weapons together are just not going to make enough of a difference - that they have to understand the social context in which the epidemic breeds, that they have to engage with People Living With AIDS in the community and even fight the conditions which fuel still greater rates of infection.

"You need to look at the social geography in which people live," says White. "What do they do after work? Under what conditions do they live? Many executives would be appalled if they could see the conditions under which workers are trying to manage this dreadful disease - in informal settlements where there's inadequate or no sewerage, no water, and uncollected rubbish lying in the streets. Simply improving such conditions can make an enormous difference to the life expectancy of a PWA."

This takes company executives way outside of the territory in which they are accustomed to dwell, and some are just not comfortable there. Others, however, see the opportunities that exist even in a grim epidemic like this one - opportunities for greater contact between staff and management, for "reconciliation at a large scale in a divided country" as Pierre Cloete of Iscor's Sishen Mine says, and a chance to remake business and society in ways that were unimaginable in the past.

"HIV/AIDS gives us a chance to really question the way we have traditionally responded to issues," says White. "What is the responsibility of a company to its staff and to the society in which it operates? What is the meaning of *ubuntu* - in a community where children are ostracised just because their parents died of the disease? How can we say we are implementing *ubuntu* in our companies when it's not happening on a wider scale? What are our responsibilities to each other as people?"

Business in South Africa has finally taken notice of the wave which has gathered and is now hanging over our heads, ready to break. We cannot stop it from smashing down on us now. But more business people are beginning to see that how we respond will determine the shape of the world that is left behind when the storm waters recede. And that's a sign of hope.