

HIV AND AIDS IN SOUTH AFRICA: A SOCIAL AND MORAL RESPONSIBILITY IN SHAPING ORGANISATIONAL ACTION

*Renitha Rampersad**

Abstract

In recent years, the interest in corporate social responsibility issues has shown an increase. Worldwide problems, especially those related to HIV/AIDS, caught public attention towards Corporate Social Responsibility (CSR) themes. In a country with more people living with HIV/AIDS than in any other nation (UNAIDS 2007), prevention and treatment is critical. HIV/AIDS is seen to be threatening the communities in which businesses are functioning and is further threatening the business itself.

This article examines the moral and social responsibility of the corporate sector in its effort to deal with the issue of HIV/AIDS. Big business leaders have recognized the threat of HIV/AIDS to the workplace and have positioned responses towards the disease from an ethical, legal and cost-effective business perspective; however the response from small to medium businesses is relatively weak.

This article conveys a descriptive critique, based on bibliographic research on Corporate Social Responsibility, HIV/AIDS and related concepts.

Keywords: Corporate Social Responsibility, HIV/AIDS, Private Sector, Socio-Economic Transformation, Policy

**Department of Public Relations Management, Faculty of Management Sciences, Durban University of Technology, South Africa*

Tel: 27 31 373 6876

Email: renithar@dut.ac.za

1 Introduction

Brad Mears, CEO of the SA Business Coalition on HIV/AIDS, believes that HIV/AIDS is impacting on economic activity and social progress around the world. He adds further, that the hidden costs of the pandemic on the business sector is slowly emerging and is hampering human resource development, undermining the skills base and driving away foreign investment (Jenvey, 2012).

Globally, approximately 33.3 million people are living with HIV. An estimated 22.5 million people living with HIV resided in sub-Saharan Africa in 2009, representing 68% of the global HIV burden. In 2009, the estimated number of deaths due to AIDS was 1.8 million people worldwide, a major decline from the peak of 2.1 million [1.9 million - 2.3 million] in 2004. The decline reflects the increased availability of antiretroviral therapy (ART), as well as care and support to people living with HIV, particularly in middle –and low–income countries (UNAIDS, 2010).

The HIV/AIDS pandemic engulfing Africa has completely reversed the improvements in health that were achieved during the 1980s. While populations continue to increase, they are not increasing as rapidly as if there were not an AIDS epidemic. For 29 African nations, it is estimated that by 2015 the total

population will reach 698 million, about 61 million (8 percent) less than it would have been in the absence of AIDS. The impact of the AIDS epidemic will be felt severely in the working population, since a large proportion of the HIV–infected population is in the age group 20–49 years. The effects of a reduced labor force on society and the economy, may be a drop in household income and increase of debt, early entry of children in the labour market in order to supplement family income, continued presence of older household members in the labour market and a loss of family support and social exclusion for those infected with HIV. This may be further aggravated on a National Level through redistribution of scarce resources with an increasing demand for expenditure on health and social services, a collapse of the educational system due to high morbidity and mortality rates in the teaching force and school-age population, employers are likely to face increased labour costs because of low productivity, absenteeism, sick leave and other benefits, early retirement, and additional training costs (Anderson, *et al.* 2000).

The article initially orients the reader to the current HIV/AIDS situation in Sub-Saharan Africa and more specifically its effects on South Africa. Discussion continues towards the subject of Corporate Social Responsibility (CSR) and socio-economic

transformation in South Africa as far as HIV/AIDS policy and programme goals are concerned.

2 Literature Review

2.1 The Business Response

There is a substantial body of literature examining the effect of HIV/AIDS on the economic well-being of the Business sector. Much of this literature is focused on the efforts of large, multinational companies in Southern Africa, particularly in South Africa, to provide extensive HIV/AIDS services to employees affected by HIV/AIDS Whiteside and Sunter, 2000; Rosen and Simon, 2003; UNAIDS, 2000; SABCOHA, 2002/2004; Bloom et al. 2006).

South Africa has the highest prevalence of HIV and AIDS in the world; with HIV prevalence statistics showing that 17.8% of adults (15-49) are HIV-positive (Department of Health, 2010). HIV prevalence in South Africa is not confined to certain groups, although some groups are more affected than others. It is estimated that between 10% and 40% of employees in South African small-and medium-sized business are HIV-positive, yet few such companies have implemented HIV/AIDS programmes. However, South Africa's larger companies are developing some of the most comprehensive and successful programmes, which can be used as blue-prints by those countries yet to feel the impact of the disease (Jenvy, 2012). The impetuses spurring large corporations to act quickly, include recognition of the current as well as the looming costs of HIV/AIDS, assessment of the potential for positive outcomes, and financial resources (Rampersad and Hart, 2008).

Political change and the efforts to balance out the unequal distribution of wealth have driven CSR forward in South Africa. This has clearly defined the role of CSR, in that although it is no longer a voluntary act, business has moved beyond the demands of legislation (Juggernath, Rampersad and Reddy, 2011). For many companies, corporate social responsibility programmes emerge as a result of both internal motivators and external pressures. Internal motivators include corporate values, reputation and image, business strategy, and employee recruitment. External pressures include customers and consumers, community expectations, and the regulatory environment (Mirvis and Googins 2006). Companies have also begun to feel morally obligated, whether through internal or external influences, to respond to HIV/AIDS. Those companies without a workplace HIV/AIDS policy, particularly small-and medium-sized enterprises and low-resourced companies, demonstrate that individual champions foster interest in HIV/AIDS and acquire buy-in from company leadership to offer HIV/AIDS services to employees. Such interest from company leadership is vital to the success of any HIV/AIDS programme.

Around the world, the phrase "corporate social responsibility" is commonly used to describe the practice of good corporate citizenship. The use of the phrase "corporate social investment" is a peculiarly South African development. It may be argued that this is a result of history and developments in South Africa. Prior to democratic change in the early nineties, big business argued that CSR was "neither an admission of guilt for their share of the agony of the deprived, nor is it implying responsibility for the socio-economic welfare of the country". Corporate support for apartheid capitalism and the resultant exploitation of black people earned capitalism a dirty name among many South Africans. Today, largely through the private sector's growing role in socio-economic reconstruction and development reference is made to the "new partnership" between government and business in the context of South Africa (Skinner and Merham, 2008).

The King Committee on Corporate Governance, however, has criticized the South African corporate community for having an inadequate understanding of the economic impact of AIDS. The committee has called on company directors to move beyond putting HIV/AIDS policies in place, towards monitoring performance indicators and reporting to stakeholders on a regular basis. This is an indication that although companies have policies in place, decision making and implementation of HIV/AIDS related workplace activities, are lacking. A good system of corporate governance contributes to the sustainable economic growth, to strengthening of business and to attracting of domestic and foreign sources of capital and their protection. It ensures the structure through which the goals of the company, the means for attaining the goals and the ways of monitoring the results are determined. Legal, regulatory and institutional environment influence on corporate governance, as well as business ethics, shared awareness of the interests of the environment and social interests also influence the long-term reputation and the success of the business (Radovic and Radukic, 2012).

In recent years, the interest in CSR issues has been increasing. Worldwide problems, especially those related to HIV/AIDS, caught public attention towards CSR themes. In 2003, the Johannesburg Stock Exchange (JSE) expressed a need to hold large corporations accountable for their investment actions by launching a socially responsible investment (SRI) index. The SRI index was instituted to identify those companies listed on the JSE that integrate the principles of SRI and sustainability into their business activities, and to facilitate investment in such companies. The SRI Index has been structured to reflect the complex nature of social responsibility in South Africa and, hence, it has detailed criteria for each of the triple bottom lines. In addition, the SRI Index identifies criteria for corporate governance, which is the foundation on which each of the triple bottom lines rests as good corporate governance plays

a major role in ensuring that sustainability issues are identified, managed and resolved. The Index is structured along the three pillars of the triple bottom line, namely, environment, society and economy. A company must address each of these pillars if it is truly to be said to have integrated sustainability into its business practices (JSE SRI Index, 2003). While the economic dimension is about profitability, the social dimension means that companies have to go beyond fulfilling their legal responsibilities and invest in human capital, as well as take actions to contribute to the welfare and interests of the staff and community (Terry, 2010: 18).

CSR dictates the need for managers to act ethically and respond to HIV and AIDS, which have seen particularly large companies, respond to the pandemic through community support, education and behavior change programmes. Research has found that it is mostly multinational companies, who typically have more financial resources and more social pressure to undertake corporate social responsibility, that have established workplace HIV/AIDS policies, which may address several topics related to HIV/AIDS - including prevention initiatives and stigma, discrimination, or confidentiality issues, however may not include details about a company's commitment to improve access to HIV/AIDS services for employees and their families (Rosen *et al.* 2006). The discussion that follows highlights two of South Africa's leading corporates on HIV/AIDS programmes.

SA Breweries has been cited as one of the top – class HIV/AIDS programmes which is being used worldwide. Their strategy consists of two programmatic interventions:

1. Interventions aimed at managing employees infected or affected by HIV and AIDS- for example, through HIV counseling and testing, early diagnosis and managed health care; and

2. Interventions aimed at preventing new infections - for example, through education programmes that promote behavior change. These education programmes include providing education and information on condom usage, multiple sex partners, STIs, myths and misconceptions, discrimination, fear, and stigma.

The Life Threatening Diseases Policy provides guidelines for managers and is aimed at ensuring confidentiality and fair treatment of employees, informing employees of their rights, and providing an education framework. Results from this policy indicates that :

- Around 80% of staff have voluntarily tested for HIV, and almost 80% of those testing positive have enrolled in managed health care programmes;

- Around 80% of staff report positive beliefs and attitudes towards HIV and AIDS; and

- According to KAP surveys, the HIV and AIDS strategy is effective because staff trust it (SABMiller, 2007).

Anglo American in 2002 became the first major employer to offer free antiretroviral treatment (ART) to its employees. In 2008, the scheme was extended to employees' direct dependants. Their programme is now the largest workplace HIV/AIDS programme in the world. In 2009, the Global Business Coalition (GBC) on HIV/AIDS, Tuberculosis and Malaria recognised Anglo American's Thermal Coal business performance with a business excellence award for the best HIV/AIDS workplace programme in the world. The Anglo American HIV/AIDS workplace and voluntary counselling and testing (VCT) programme has been held up as 'best practice' by the GBC. They continue and are committed to eliminating the stigma and discrimination related to HIV/AIDS. They also aim to ensure that all employees know their HIV/AIDS status and their focus continues to be on early diagnosis and access to treatment. They currently exceeded their aim of 80% voluntary testing for HIV in 2009, and continue to strive for 100% uptake (Anglo American HIV/AIDS Fact Sheet, 2012).

These cases demonstrate proactive leadership amongst major companies in managing an HIV/AIDS workplace strategy. Unfortunately as discussed earlier, it is mainly listed companies, who are financially stable that respond to developing and leading effective workplace policies and programmes whereas medium to small sized companies seem to be taking HIV/AIDS in their stride. Strategic decision making and planning is a systematic way of making key business decisions, determining tactics and the implementation of actions that shape and direct the business towards the future (Vunjak, Zelenovic, Birovljev, & Milenkovic). It is a basic premise that a healthy workforce will ensure a financially stable business. Therefore it is imperative for all businesses large or small to act on business policies and programmes as far as HIV/AIDS is concerned.

2.2 HIV/AIDS and the Law

Within the corporate context visibility has been reduced by the fears of workers that they will be discriminated against should they be HIV-positive. There are also systemic features of the corporate environment that affect visibility. Social distance between management and workers, as a result of class, race and gender, has had an important role in obscuring the view of company decision-makers as to the impact of the disease (Dickenson and Steven, 2005). Such stigmatisation have undermined and reduced the effectiveness of HIV/AIDS programmes.

Because of such stigmatisation, the World Health Organisation (WHO) in the 1980's began to promote a rights-based response towards HIV/AIDS. They argued that there was a strong public health rationale for respecting and protecting rights in the context of HIV/AIDS. In 1996, UNAIDS developed the International Guidelines on HIV/AIDS and Human

Rights. South African employment law takes account of these international norms, standards and human rights principles, which are contained in the Constitution of the Republic of South Africa, Act No. 108 of 1996 (“the Constitution”). Chapter 2 of the constitution sets out the fundamental rights and freedoms of all persons (USAID, 2011).

The Employment Equity Act No. 55 of 1998 (EEA), aims to achieve equity in the workplace by prohibiting unfair discrimination and implementing affirmative action measures. While section 5 of the EEA requires employers to promote equality in the workplace by forbidding unfair discrimination, section 6 of the Act protects employees from unfair discrimination on a wide number of grounds, including an employee’s HIV status. This means that employees and job applicants may not be unfairly discriminated against on the basis of their HIV status. However, section 6(2) (b) stresses that it is not unfair discrimination to “distinguish, exclude or prefer a persons on the basis of an inherent requirement of a job”. This would apply to employees or applicants to the workplace who are not capable of performing core duties of a job because of HIV or AIDS (Heywood *et al.* 1999).

Employment practices must comply with laws and regulations including not requiring HIV screening test except for specific circumstances, such as blood supplies for transfusion. Senior management must unequivocally endorse non-discriminatory employment practices and education programmes. The company must protect the employee’s medical confidentiality, while an employee contracting the disease will not be obliged to inform the company of their status. However the company must encourage employees to seek medical guidance and counseling, while HIV testing should be performed with appropriate pre-and post-test counseling (Jenvy, 2012).

The above discussion interprets an internal perspective towards the management of HIV/AIDS, however since employees live in communities (many of them impoverished) CSR presents an opportunity not only to project a response to HIV/AIDS beyond the company, but also to build alliances with workers and communities. However, the building of such company workforce-community alliances around HIV/AIDS has been limited (Dickenson and Stevens, 2005). Business must take into consideration that their employees are members of the community where transmission occurs and interventions should extend into neighboring communities. Because of their vast resources the business sector will often be better able than governments or communities to access and effectively apply resources to alleviate the impact of HIV/AIDS on their employees and their immediate families. This could be a bonus for the broader community and society as a whole. **292**

Di

3 Discussion and Conclusion

Research has confirmed that leadership and ethics are pivotal roles in initiating and developing CSR programmes across organisations. Good leadership is an essential part of any HIV/AIDS initiative and this paper presents a case for effective leadership which reveals that a leader with a strong vision can motivate action and encourage buy-in and ensure that employees takes HIV/AIDS seriously.

CSR has been the vehicle through which listed South African companies have responded to the HIV/AIDS pandemic; however there is a call for company directors to move beyond just putting HIV/AIDS policies in place, and towards monitoring and reporting to stakeholders on a regular basis.

The literature provided is evidence that the South African Business Sector is responding to the challenge of HIV/AIDS. Further research could emphasize the role of the business sector in the actual services that are offered and how funds are secured to do so. This paper has given an example of just two successful programmes, there are many other successes of large companies which can assist smaller entities towards developing efficient policies and programmes. The examination of the challenges for HIV/AIDS service provision in small to medium companies and the reasons for the lack of HIV/AIDS services within this zone, must also be ascertained.

References

1. Anderson, K, Farren, V, Leland, S, & Vanderslice, L. (2000), “ The Impact of HIV/AIDS on Human Resources”. Washington, D.C., United States Agency for International Development [USAID], Center for Development Information and Evaluation, Research and Reference Services Project, 2000 Dec 10. 22 p. (Document No. PN-ACK-428).
2. Anglo American HIV/AIDS Fact Sheet (2012), Available online at: <http://www.angloamerican.com/~media/Files/A/Anglo-American-Plc/pdf/development/HIV-AIDS-Fact-Sheet-2011.pdf> (Date accessed: 11 May 2012).
3. Bloom, D, Bloom, L, Steven, D, & Weston. M. (2006), “ Business and HIV/AIDS: A healthier partnership? A global review of the business response to HIV/AIDS 2005-2006”. Geneva: World Economic Forum.
4. Department of Health. (2010). National Antenatal Sentinel HIV and Syphilis Prevalence Survey in South Africa, 2009. Pretoria.
5. Dickenson, D, & Stevens, M. (2005). “Understanding the response of large South African companies to HIV/AIDS. Journal of Social Aspects of HIV/AIDS, 2(2). 286-295
6. Heywood, M., & Hassan F. (1999), “Employment, equity, and HIV/AIDS: A step in the right direction”. Industrial Law Journal, Vol. 20. pp. 845-855.
7. Jenvy, N. (2012), “Taking Action against HIV/Aids can save companies millions”, Sunday Tribune, February 19, 2012.

8. Johannesburg Stock Exchange (2005). Available online at www.jse.co.za/sri/docs/Background%20and%20Criteria.final.06%2010%2003.pdf (Date accessed: 10 May 2012).
9. Juggernath, S, Rampersad, R, & Reddy, K. (2011). "Corporate Responsibility for socio-economic transformation: A focus on broad-based black economic empowerment and its implementation in South Africa", *African Journal of Business Management*, 5(20), pp. 8224-8234.
10. Mirvis, P, & Googins, B, (2006), "Stages of Corporate Citizenship: A Developmental Framework", A Center for Corporate Citizenship at Boston College Monograph.
11. Radovic, M, & Radukic, S. (2012). The Boards of Directors in function of improvement of the competitiveness of the Serbian companies. *Technics Technologies Education Management*, 7(1). pp. 128 – 136.
12. Rampersad, R, & Hart, J, L. (2008), "Corporate HIV/AIDS efforts in South Africa: Prevention, Education, and treatment for employees". *HIV/AIDS: Prevention and Health Communication*. Cambridge Scholars Publishing. UK.
13. Rosen, S, Feeley, F, Connelly, P, & Simon. J (2006). *The private sector and HIV/AIDS in Africa: Taking stock of six years of applied research*. Boston: Centre for International Health and Development.
14. Rosen, S, & Simon. J. (2003). "Shifting the burden: The private sector response to HIV/AIDS in Africa", *Bulletin of the WHO*, Vol. 81. pp.131–137.
15. SAB Miller. (2007). *Living and working with HIV/AIDS*. Available online at: http://www.sabmiller.com/files/reports/2007_hiv_report.pdf. [Date accessed 23May 2012].
16. Skinner C, & Mersham, G. (2008). "Corporate social responsibility in South Africa: Emerging trends", *Society and Business Review*, 3(3). pp. 239-255.
17. South African Business Coalition on HIV/AIDS (Sabcoha) (2002). *Evaluation of workplace responses to HIV/AIDS in South Africa*. Johannesburg: Sabcoha.
18. South African Business Coalition on HIV/AIDS (Sabcoha) (2004). *The economic impact of HIV/AIDS on business in South Africa 2003*. Johannesburg: Sabcoha.
19. Terry, G. (2010). "Corporate Social Responsibility: Altruism as a business imperative", *Inside Mining*, 3(1). pp. 16-19.
20. UNAIDS (2010). *Global Report: UNAIDS report on the global AIDS epidemic 2010*. Geneva.
21. UNAIDS (2000). *The business response to HIV/AIDS: impact and lessons learned*. Geneva: UNAIDS, The Global Business Council on HIV/AIDS and The Prince of Wales Business Leaders Forum.
22. USAID/Health Policy Initiative (2011). *HIV and AIDS guide for Business Leaders*.
23. Vunjak,N, Zelenovic, V, Birovljev,J, & Milenkovic, I. (2012). *Strategic Planning in Banking*. Technics Technologies Education Management, 7(1). pp. 196 – 203.
24. Whiteside, A, & Sunter, C. (2000), "AIDS: the challenge for South Africa", Cape Town: Human & Rousseau Tafelberg.