

Outlined below are summaries of aggregated statistical trends (summative patterns) emerging from analysis of quantitative data from questionnaire responses:

- 64.77% of employers in the study sample reported declining workplace HIV programming budgets
- 71.59% of Company senior managers in the study are of the opinion that NATF is not benefiting their workplace HIV and AIDS programming interventions
- 34.62% of sampled company employees knew their HIV status
- 22.58% of employees who knew their HIV status disclosed their status to employers
- 55.24% of employees who voluntarily disclosed their HIV status were motivated by perceived programme beneficiation
- 40.51% employees felt their employers provided comprehensive HIV and AIDS interventions
- 79.74% of employees were aware of their AIDS levy mandatory contributions to NATF
- 82.38% of employees felt they actively participated in workplace HIV programme implementation
- 37.44% of employees were aware of employers workplace HIV policy provisions
- 18.94% of employees were aware of their employer workplace HIV programme budget
- 43.61% of employees were aware of the full range of workplace HIV programme services provided by their employer
- 61.23% were aware of collective bargaining parameters, recent agreements, limited scope
- 54.63% of employees were aware of Statutory Instrument 202 of 1998 regulatory frames
- 52.86% of employees were aware of SADC workplace HIV protocols and guidelines
- 44.49.% of employees were aware of ILO workplace HIV/AIDS values and principles
- 75.71% of employees were aware of the National response programme to HIV and AIDS
- 37.01% of employees were aware of Zimbabwe Business Council on AIDS practice code
- 76.7% of employees felt that employers do not have comprehensive workplace HIV/AIDS program?
- 66.7 % of employees felt their employers do not have workplace wellness programmes
- 66.7% of employees felt that they were not benefiting from workplace HI from workplace from all workplace HIV interventions

5.3 Discussion of study findings: Factors hindering beneficiation of workplace HIV programming interventions:

Employee responses to workplace HIV and AIDS programme beneficiation-related questions highlighted existence of several internal and external service access barriers and inhibitions including awareness, availability, affordability, relevance, stigma and discrimination factors. Some of the main factors perceived and cited as hindering, restricting and stifling employee programme beneficiation include marketing, packaging, communication and promotional considerations highlighted in the following:

- Limited awareness of the range of support services available for employee beneficiation
- High costs to be paid in the process of benefiting from the services (affordability)
- Bottlenecks and unfriendly procedures before enjoying available services (accessibility)
- Insensitive, inappropriate and cumbersome administrative processes not user friendly
- Requisite essential and ancillary services not always available when needed (availability)
- Practical logistical inconveniences such as language, timing and confidentiality barriers
- Lack of clarity on essential programming details like roles, accountabilities and schedules
- Information on eligibility criteria, access mechanisms and referral systems is oft known
- Limited disclosure of programme budgets, access requirements and eligibility criteria,
- Fragmentation of programme policy frames, operational mechanisms and activity sites

Some of the factors affecting employee and employer awareness levels, factors responsible for non-policy compliance, employer pull and push factors in implementing workplace HIV and AIDS policies; adverse effect of difficult business operational environment to workplace HIV and AIDS policy compliance, factors hindering and restricting employee workplace HIV and AIDS programme beneficiation

5.4 Key study arguments:

- Awareness does not always transform into expected behavior change;
- Policy awareness is not synonymous with management commitment;
- Policy awareness diluted and negated by resistance;
- Employee attitudes towards policy and programming awareness shape their employer expectations;
- Higher employee policy and programming awareness levels increases demand , increases stakeholder interest, demonstrates management commitment and broadens collective bargaining agenda

5.5 Policy Planning Guiding Principles:

Essential imperatives in policy planning and development include the following considerations:

- Policy planners need to answer what, why, where, when, how, who, with what questions
- Policy planning must be contextual (domesticated, localized and customized) to needs
- Policy objectives, priorities, deliverables, boundaries and execution strategies need clarity
- Policy language must be technically appropriate, user friendly and universally understood
- Policy execution-implementation must be consistent, time-bound and sustainable
- Policy targets must be realistic, achievable, pragmatic and benchmark with good practice
- Policy effectiveness and impacts need to be measurable, predictable and comparable

- Policy progress milestones must be specified, standard and transparent and acceptable

5.6 Policy Implications on Practice Improvement:

- Approved policies regulate, standardize, guide and influence behavior and practice
- Accepted policies have the legal effect of compelling compliance and collaboration
- Operational policy provides basis for rational, systematic and regular resource allocation
- Policy provides a blue-print to steer, track and measure programming performance
- Policy ensures predictability, consistency and integration of management decisions
- Policy streamlines and focuses bounds of stakeholder obligations and expectations

5.7 An overview assessment of workplace HIV programming in Zimbabwe

- A paltry 62 Private sector Companies have developed workplace HIV and AIDS policies
- Most workplace programming interventions are allocated token operational budgets
- Programming aspects of the workplace policy are derived from National Strategic frame
- Most workplace program technical are contracted out to capacitated external agencies
- Workplace policy and programming interventions are fragmented and uncoordinated
- Save routine mandatory reports submitted to NAC, workplace monitoring is weak
- Dominant and visible members of the ZBCA are ZSE listed blue-chip Companies
- Employees and employers are the major contributors to the National HIV Trust Fund
- Key national response programme to HIV and AIDS institutions have funding challenges
- Most workplace HIV and AIDS interventions are devoid of wellness program values

5.8 Attributes of effective workplace policies:

As argued by the ILO, effective workplace HIV policies:

- Provide leadership and make an explicit commitment to corporate action
- Ensure consistency with appropriate national laws
- Lay down a standard of behaviour for employees (outline expectations)
- Give guidance to supervisors and managers

5.9 Essential considerations in the development of a workplace HIV and AIDS policy

Once an institution has determined the nature of the probable impact, it is important to establish a framework within which a response can be implemented. A workplace policy provides a framework for action to reduce the spread of HIV and AIDS and manage its impact. It defines an institution's position on HIV and AIDS, and outlines activities for preventing the

transmission of the virus and providing care and treatment for staff (and sometimes their dependants). It also ensures that the response is balanced, activities complement each other, and resources are used most effectively.

5.10 Operational constraints of workplace HIV and AIDS programmes:

- Sustainable funding sources
- Integration of business modeling and social interests (inherent policy design conflicts)
- Distorted/skewed bottom-line effects (mismatch between costs and expected benefits)
- Difficult policy enforcement (programme is outside collective bargaining obligations)

5.11 Key Components of a Comprehensive Workplace Policy

A comprehensive workplace HIV and AIDS policy should answer the following questions;

- Who will be covered by the policy?
- Does the policy make mention of the need for endorsement by all levels of management, Union and other leadership?-Who are the key players/actors/What are the institutions?
- What are the key guiding principles?
- Does the policy comply with relevant national laws and regulations? Is the policy consistent with other labour related contracts?
- Will people with HIV and AIDS be entitled to the same rights, benefits and opportunities as people with other life threatening illnesses?
- What practices will be outlined for hiring, promotion and termination?
- What will be the policy related to HIV testing?
- What worker HIV and AIDS prevention, care, treatment and support services will be provided?
- Does the policy make provision for confidentiality of employee medical information and HIV status?
- What policy action will be needed to prevent stigma and discrimination?
- What practices will be included to ensure a safe and health workplace especially for those employees exposed to great risk of infection?
- What grievance procedures will be there for employees discriminated against because of their HIV status?
- What prevention education or other services will be provided to individuals, families and communities?
- Who will be responsible for implementing and enforcing the policy?
- How will the policy be monitored, reviewed and revised?

5.12 Structure of a workplace Policy

The workplace policy document should ideally be organized in paragraphs focusing on specific thematic areas for easy referencing. Most policies have the following paragraph parts:

Part 1 – Rationale of the Policy

Policy may start with a general statement or introductory remark that outlines why the organization wants to have an HIV and AIDS policy. This part essentially provides the broad rationale (significance, justification and strategic intent statement) for an HIV and AIDS policy and links it to other employer policies and practices

Part 2– Policy Statement or Objectives

The section highlights the, major issues that the organization wants to address and broadly states what the policy is all about

Part 3- Workplace Guidelines or Key Principles-

These are guidelines or instructions for management and employees to clarify what is expected of them. They expand on issues identified in the general statements. Key principles from the ILO Guidelines and SADC Codes of practice may be used if desired.

Part 4 – Outline of Workplace Programmes

The section outlines the prevention, care, treatment and support, mitigation activities the organization can engage into.

Part 5- Implementation Structure

The section outlines who will be responsible for implementing the policy and the resources required

Part 6 – Monitoring and Evaluation

This section outlines how implementation of programmes will be monitored and how often the policy will be reviewed

5.13 Workplace Programming Designs

Workplace programmes are developed based on the workplace policy. Such programmes should take the form of workplace HIV and AIDS prevention, care and support and mitigation programmes. ;

5.14 The Basics of Effective Response

An appropriate response to the epidemic needs to be holistic, systematic and coordinated, and guided by a clear policy statement. As argued by UNAIDS (2011), such an approach establishes a clear framework within which activities should take place and ensures that the response is balanced, available funds are used to best effect, and the activities undertaken work effectively together. Such a response needs to include three essential components of prevention of new infections, treatment and care of people living with HIV and AIDS and mitigation of the current and future impacts of the epidemic.

An effective response should also seek to address HIV and AIDS internally, among an institution's employees, and externally, among its clients. As employers, private and government institutions need to acknowledge the fact that HIV and AIDS may have potentially significant implications for their staff and functioning, and take steps to mitigate the impact of HIV and AIDS on infected and affected employees. Externally, they should work to

mitigate the impact of HIV and AIDS on communities they serve. This involves mainstreaming HIV and AIDS, or integrating responses to HIV and AIDS into their core functions.

SAFAIDS (2011) concurs with the UNAIDS by outlining the core components of the HIV and AIDS response in the workplace. Though workplace interventions vary according to the size of the workforce and employment terms, several common components can be identified.

5.15 Emerging data patterns and thematic focus trends:

Employee participation in workplace HIV and AIDS programming aspects impacts positively on employee beneficence and implementation effectiveness. Upholding the concept of client self-determination strengthens collaboration, collective decision ownership, stakeholder buy-in and mutual programme beneficence

The strategic value of workplace HIV policy awareness:

- Workplace HIV and AIDS programme policy communication, promotion and marketing strategies seek to raise awareness on employee welfare needs, secure requisite management attention and attract senior management interest (get employer commitment) to invest in human capital with a view to get commensurate return or yield in the form of employee morale, motivation and productivity
- Policy and programming awareness increases demand, provokes supportive actions, facilitates stakeholder collaboration, participation and provides catalysts for requisite changes.
- Policy awareness allows compliance measurement and benchmarking performance standards.

5.16 Effects of Policy and Programme Awareness on Employee Beneficence

Policy and programme awareness increases service demand and uptake in several ways that include the following:

- Encourage and motivate employees to seek services including voluntary counseling and testing, treatment initiation (antiretroviral therapy and opportunistic infection), nutrition-other therapies
- Facilitate and promote employees to better organize and mobilize themselves for effective advocacy and lobbying (collectively demand individual and collective rights, secure necessary management attention)
- Create conducive conditions for active employee participation in the design and management of workplace HIV and AIDS interventions-foster collaborative partnerships between employers and employees
- Stimulate sufficient market demand (attract the necessary attention of many service providers that compel other suppliers or service providers to bring alternatives at competitive prices)-increase range of available support services-respond to excess demand

- Empower labour unions-worker committees to intelligently engage, confront and negotiate with employers/management on the basis of knowledge or available evidence (knowledge is power)
- Support and encourage creation of an atmosphere (climate) that fosters healthy and harmonious industrial relations-conditions where employees and employers can trust each other, cooperate and work together to realize mutual benefits (common goals)

5.17 Linkages Employee Welfare and Motivation

It is apparent from the study findings and field observations that there is strong correlation between employee welfare investment and business performance. Both inductive and deductive inferences made in the study indicate strong associational relationships (linkages) between the two variables. Further, statistical analysis of study findings showed emerging patterns suggesting existence of strong correlative associations between other related variables for example:

- Companies with diverse employee support schemes reported higher levels of employee morale, motivation, loyalty and productivity
- Employers supporting diverse workplace HIV and AIDS interventions generally had a strong corporate social responsibility orientation
- Companies with incremental workplace HIV and AIDS programming budgets demonstrated higher awareness and appreciation of International Labor Organization (ILO) workplace values and principles SADC workplace HIV and AIDS protocols as well as national labor administration policy frames and programming guidelines
- Companies encouraging and promoting active employee involvement and participation in the design and management of workplace HIV and AIDS generally had better (positive) stakeholder rating on employee programme beneficitation
- Companies with heightened employee awareness of workplace HIV and AIDS policy and regulatory frameworks offered diverse and broad-based programming services
- HIV and AIDS workplace policy frame awareness and the productivity of employee living with HIV.
- HIV and AIDS workplace policy awareness and employee motivation.
- HIV and AIDS workplace policy awareness and range of company staff welfare support services
- HIV and AIDS workplace policy awareness and the home-work interface

6. Main Study Conclusions

- Workplace HIV programme beneficitation enhancement comes on the back of access to referral or extension services (broaden programme scope, reach, coverage and boundaries are extended by leveraging synergies)
- Workplace HIV and AIDS interventions become effective and sustainable when issues of employee welfare and wellness incorporate decent working

conditions, responsive employment terms, relevant incentives and adaptive (flexible) strategies

- Zimbabwean business entities do not prioritize workplace HIV and AIDS programming interventions and employee welfare support schemes (have little regard for social benefits) as they prioritize economic expedience by tightening survival strategies in an economical volatile operational environment
- Zimbabwe Stock Exchange listed Companies in Harare Metropolitan Province do not invest in sustainable internal capacities for effective and sustainable workplace HIV interventions (programme personnel are seconded from existing operational structures and given on the job-training, only short-term financial and activity planning is done, there is over-reliance on external partners for technical support, there is limited investment in programme supporting infrastructure, technology and institutions)
- Business communication strategies do not incorporate WKHA policy education and promotion

7. Study Summary Recommendations

There is need for Business Companies to regard the following as essential requirements in improving and enhancing workplace HIV programme beneficitation:

- Adopt participatory programme planning and management approaches
- Popularize (market, promote and encourage) programme policy and principles
- Increase and improve programme scope, coverage and reach (scale up activities)
- Introduce and strengthen the home-work interface (community outreach aspects)
- Mainstream and integrate programming key themes (broaden the interventions)
- Strengthen programme delivery, monitoring, evaluation and reporting mechanisms
- Encourage senior management active involvement and secure their commitment
- Locate programme policy administration under Human Resource Unit (one stop shop concept)
- Prioritize the programme in the allocation of operational and developmental resources
- Invest in programming strategic partnerships, linkages and networks (leveraging synergies)

8. Strategies to increase employee awareness of workplace HIV and AIDS policies:

- Adopting integrated corporate communication strategies (use of various communication modes)
- Involving employee representatives in programme development and dissemination of policy frames
- Scheduling regular community sensitization, employee education, awareness raising sessions
- Supporting peer educators and strengthening shop-floor information, education and communication (IEC)
- Training Senior and Line Managers to mainstream and integrate key workplace HIV policy and programming aspects in their regular briefs

9. Main Study Arguments:

Workplace HIV and AIDS interventions and employee welfare support cannot be strengthened without:

- Senior management commitment/prioritization
- Developing sustainable internal capacities
- Requisite supporting infrastructure/schemes
- Research prioritization in resource deployment
- Embedding or integrating research in all management functions and activities
- Developing strategic collaborative research partnerships with diverse stakeholders
- Strategic partnerships, alliances, networks and institutions (synergies)
- Paradigm shift towards continuous learning and improvement
- Upgrading mind-set and discovery philosophy

Summary Recommendations:

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