

**AN EVALUATION OF THE EFFECT OF MANAGERS' LACK OF INTEREST IN
HIV/AIDS ISSUES IN THE WORKPLACE, ON THE SUCCESS OF HIV/AIDS
WORKPLACE PROGRAMMES IN THE DEPARTMENT OF AGRICULTURE:
WESTERN CAPE**

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Assignment presented in partial fulfilment of the requirements for the degree of
Master of Philosophy (HIV/AIDS Management) at Stellenbosch University



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December 2006

ABSTRACT

The Department of Agriculture: Western Cape has a consulted HIV/AIDS workplace policy and programme in place and unlike many other state departments, a budget for this purpose. Relevant public service regulations compel the effective management of HIV/AIDS in the workplace. Leadership responsibility, commitment, and participation are success factors necessary for the success of the workplace programme. Yet, managers seem to lack interest in any HIV/AIDS related activities and events held in the department.

The survey, a non-experimental descriptive quantitative research, was conducted in the department to determine the effect of the lack of interest of managers on the success of the HIV/AIDS workplace programme. A structured questionnaire was used for data collection.

The study identified that there are areas in the workplace programme that can be improved e.g. ensuring the availability of condom distribution facilities at all offices.

The study setting was the head office, experiment farms and satellite offices situated throughout the province. The study population was all managers with employees who report to them. Findings were analysed through coding and writing up of notes.

The study showed that most managers participated in HIV/AIDS related events/activities, and had good overall basic knowledge on HIV/AIDS. A few responses were inaccurate that will, if applied, have serious legal ramifications.

Middle managers gave the most inaccurate responses, displayed ignorance and participated the least in HIV/AIDS related activities.

OPSOMMING

Die Departement van Landbou: Wes-Kaap het sy eie MIV/VIGS beleid en programme in plek wat met die samewerking van alle belanghebbende partye gekonsulteer is. Anders as die meeste ander staatsdepartemente is daar ook 'n begroting vir hierdie doel beskikbaar. Die relevante Departement van Staatsdiens en Administrasie-regulasies verplig ons tot die effektiewe bestuur van MIV/VIGS in die werksplek. Leierskap-verantwoordelikhede, toewyding en deelname is van die belangrike faktore wat benodig word vir die sukses verbonde aan 'n werksplekprogram. Daar word egter 'n gebrek aan belangstelling by bestuurders ten opsigte van enige MIV/VIGS verwante aktiwiteite wat deur die departement aangebied word, bespeur.

Die opname, 'n nie-eksperimentele beskrywende kwantitatiewe navorsingsprojek, is binne die Departement van stapel gestuur om te bepaal wat die effek rakende die gebrek aan belangstelling deur bestuurders op die sukses van die MIV/VIGS werksplek programme het. Vir hierdie doel was 'n vraelys gestruktureer om sodoende relevante inligting / data te kollekteer.

Die studie het aangedui dat daar sekere areas in die werksplekprogramme is wat verbeter kan word, byvoorbeeld om seker te maak dat die verspreiding van kondome by alle kantore beskikbaar is.

Die afsetareas vir hierdie studie was hoofkantoor, die eksperimentele plase en satellietkantore regoor die provinsie. Die teikengroepe was alle bestuurders met werknemers wat aan hulle rapporteer. Die uitslae was geanaliseer by wyse van koderings en notas aan te teken.

Die studie het getoon dat die meerderheid van die bestuurders aan MIV/VIGS verwante aktiwiteite/gebeure deelneem, en dat hulle ook 'n goeie basiese kennis rondom MIV/VIGS het. 'n Paar van die insette ontvang , was nie akkuraat nie, en sou ons dit toepas, dit verreikende regsimplikasies inhou.

Middel bestuurders het die mees nie-akkurate terugvoering gegee, het onkunde geopenbaar en het die minste aan die MIV/VIGS aktiwiteite deelgeneem.

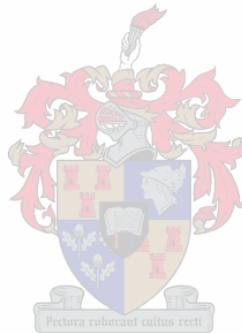
DECLARATION

I, the undersigned hereby, declare that the work contained in this assignment is my own original work, and that I have not previously, in its entirety or in part submitted it at any university for a degree.

Signature:

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Date: 28 November 2006



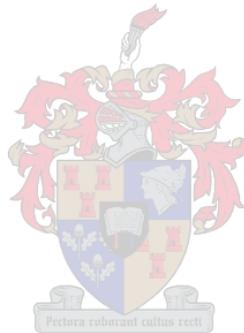


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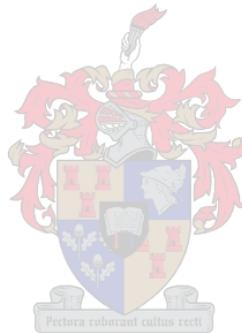
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1. INTRODUCTION

1.1 Motivation and rationale of the study

The Department of Agriculture: Western Cape has a fully consulted HIV/AIDS workplace policy, programmes and HIV/AIDS forum in place, with the Senior Manager: Human Resources Management, ultimately responsible for the management of HIV/AIDS in the workplace as prescribed by the Public Service Regulations of 2001, as amended.

The department has its own special HIV/AIDS component and budget, unlike many other state departments. Despite all these resources, the managers seem to lack interest in all HIV/AIDS related issues, activities, and VCT campaigns,

Most managers, especially those who have been in the public service for many years, seem to be disinterested in any HIV/AIDS related matter. Despite HIV/AIDS being high on the government's agenda, some managers never or seldom participates in, or attends any of the HIV/AIDS activities taking place in the department. Many state that it is a human resources issue, a side issue, not their core business, not affected by the crisis (pandemic), and expressed judgmental views (e.g., consider the distribution of condoms as morally wrong). Although the agricultural sector is a highly vulnerable one, most managers do not integrate it into their services to clients. HIV/AIDS activities, campaigns are largely attended by the human resources personnel and state-employed farm workers. This may create a perception that HIV/AIDS is limited to a certain population group or employees on the lower end of the occupational ladder and that HIV/AIDS is a human resource matter.

Managers should be the drivers of HIV/AIDS workplace programmes. If they are not interested, it will be difficult to give effect to the content of the Department's HIV/AIDS policy and workplace programme. Hopefully, through this study it will be possible to identify the specific areas requiring attention to obtain management commitment towards the implementation of a successful workplace programme.

2. LITERATURE REVIEW

The impact of HIV/AIDS is being felt the world over with Southern Africa being home to about 70% of total world figure of HIV. Our country and most certainly our workplaces, are no exceptions (Grant, Strode & Smart, 2002).

The literature review conducted did not reveal much on the actual disinterest of managers and its impact on the HIV/AIDS workplace programmes. Reference is repeatedly made to the attitude of managers. This has been accepted as meaning more or less the same as lack of interest.

In the early 1980s to the late 1990s managers' response to HIV/AIDS in developing countries was slow despite numerous warnings. Many believed that HIV/AIDS would pass them by or they would simply replace those becoming ill or died. It was only later realised that this would simply not be the case and that the impact on business and profits would be vast. HIV/AIDS was considered a health and not a business problem. Surveys conducted revealed that managers were uncomfortable with the topic of HIV/AIDS. They believed that HIV/AIDS was a sexual matter and therefore an individual private one. It was above all certainly not the purview of most businesses (HIV/AIDS Prevention Collection-Case Study seven). Responsible leadership in disease-riddled societies is necessary to rise to their task of responsible disease management (Whitehead, Barnett, George & Van Mullin, 2003).

An investigation of staff attitudes conducted by the Department of Social Services in Canterbury, England, revealed that the attitudes of staff influenced the quality of care provided and had an effect on the number of individuals who approached the Department for assistance. It was recommended that negative attitudes be challenged through training and supervision (Caroll. L, undated). Similarly it could therefore be argued that employees who require HIV/AIDS related assistance would not approach managers who portray the attitude of disinterest in HIV/AIDS issues.

Complete buy-in by management seems to be lacking. Managers do not fully comprehend the impact of HIV/AIDS on their business operations, productivity and profits as workers fall ill (Walbran, 2004).

Employees need to see concrete commitment from managers. Commitment and mutual trust are necessary ingredients to create an atmosphere conducive to VCT and disclosure of HIV status (Unilever, 2002).

Long-term business commitment is essential if efforts to stop the spread of HIV/AIDS and limit its social and economic impact are to be effective. The continued involvement of senior managers' long-term commitment and partnership are critical for the success of HIV/AIDS prevention and support efforts. Negative attitudes of employees and managers may lead to conflict, stigmatization, mismanagement discrimination ([http://www.unaids.org.html/pub/Topics/partnerships/Menu/PDF/Asia in Business Summary en pdf.pdf](http://www.unaids.org.html/pub/Topics/partnerships/Menu/PDF/Asia%20in%20Business%20Summary%20en.pdf)).

The public service is the single biggest employer in South Africa, employing 1.1 million people. In order to address the issue of HIV/AIDS in the workplace, the Public Service Regulations have been amended in terms of Section 14 of the Public Service Act of 1994, a framework is provided, and departments are compelled to allocate a senior manager to drive the management of HIV/AIDS in the workplace. In accordance with the Minimum Standards on HIV/AIDS, heads of government departments must designate a member of the senior management service, with adequate skills, seniority and support to implement a workplace HIV/AIDS policy and programme. However, support and commitment are required from all managers (Barrett, Strade & Smart, 2002).

In a survey of 103 countries involving 7789 top executives, the key success factors of successful workplace programmes included strong support and personal commitment and attention from top executives. Top management 'buy-in' and personal attention were found to be some of the key success factors (Taylor, De Young, & Boldrini, 2004).

According to the findings of the Sijam' kela Project, it was found that there was an erosion of employees' confidence in senior management leadership and the proper management of HIV/AIDS. Senior managers were merely interested in keeping up appearances, rather than trying to effect genuine change. Employees felt there was insufficient support from managers. Ignorance of managers and lack of interest in HIV issues, shift of their responsibility to the human resources section, were some of

the perceptions about senior managers cited by employees (Sijam'kela Project, 2003).

The literature reviewed seems to indicate that leadership commitment and attention i.e. the positive attitude of managers are key success factors in the success of workplace programmes. At the Barcelona AIDS Conference, Mr Nelson Mandela stated that there is no doubt that strong leadership, which starts at the top, is the key to the effective response in the war against AIDS. Such response is more effective (Galloway, 2002).

Strong leadership, active endorsement and participation by senior management (at the helm) is required to create an environment conducive to the management of HIV/AIDS in the work place (Fourie, 2003)

Management has largely devolved the responsibility to rather junior employees and had to be convinced that HIV/AIDS is a major problem that needed to be confronted. The attitudes of line managers were problematic and it was difficult to integrate HIV/AIDS programmes into management hierarchies (Dickson, 2003).

The literature survey suggests a link between management commitment, and success of workplace programmes.

The research question is therefore:

Is there a significant relationship between the lack of interest of managers in HIV&AIDS issues in the workplace and the success of the HIV/AIDS workplace programme in the Department of Agriculture: Western Cape?

3. RESEARCH OBJECTIVE

The purpose of the study is to determine whether there is a relationship between the seeming lack of interest of managers in HIV/AIDS issues in the workplace and the success of the HIV/AIDS Workplace programmes in the Department of Agriculture: Western Cape.

If a significant relationship exists, the information would be used to review the current programme and develop a workplace programme that is more successful as it would be based on responsible leadership, buy-in, and management commitment. It would further confirm that lack of commitment and interest from management would most likely result in low success of the HIV/AIDS workplace programme and even be true for other programmes introduced in the Department.

4. DEFINITION OF CONCEPTS

The purpose of the study is to investigate the relationship between lack of interest of managers in HIV/AIDS issues in the workplace, and whether this has an effect on the success of the HIV/AIDS workplace programme. It is therefore necessary to operationally define exactly what is meant by lack of interest of managers, success of the workplace programme as well as define who would be considered as managers for the purpose of the study.

Much of the literature reviewed makes reference to the attitude of managers, the need for strong corporate leadership and participation (Peoples Dynamics, 2003), and the attitudes of managers for not doing enough or not pursuing the fight against HIV/AIDS with the same vigor, used in other campaigns that affect the employees (SA Labour Bulletin, 2002). Management has the added responsibility of keeping the workforce healthy.

For the purpose of the study the following constructs were defined as follows:

4.1 Managers

In the Department, every manager is also expected to be a leader, someone who has vision and excites people to achieve the impossible. A leader is able to anticipate the future needs of the organization, has influence to change the attitudes and actions of others to attain set goals (Nel, Gerber, van Dyk, Haasbroek, Schultz, Sono & Werner, 2002).

Leadership responsibility was repeatedly referred to in the literature reviewed. For the purpose of the study managers will be senior managers on salary levels 13 to

15, middle managers on salary level 11 to 12, and junior managers on salary level 9 to 10, who have employees reporting to them.

4.2 Lack of interest by managers

- Non-attendance of HIV/AIDS awareness and information sessions
- Non-attendance of HIV/AIDS activities and events
- Lack of participation in HIV/AIDS related activities and events
- Level of basic knowledge of HIV/AIDS
- Level of personal involvement

4.3 Effectiveness of the workplace programme

- Number of employees who come for voluntary testing and counseling
- Number of employees who attend or participate in awareness and information sessions coming from the sections where the specific managers in the study are employed
- Willingness to render support and assistance to related organizations
- Creating an environment conducive to disclosure, openness and acceptance of HIV/AIDS among all staff
- Condom distribution and use promotion



5. RESEARCH HYPOTHESIS

The formulation of the hypothesis, logically follows the statement of the problem, (Christensen, 2004) i.e. is there a relation between lack of interest of managers in HIV/AIDS issues in the workplace, and the success of the workplace programme?

The scientific hypothesis can be defined as:

H1. There is a significant relationship between lack of interest of managers in HIV/AIDS issues in the workplace and the success of the HIV/AIDS workplace programme

The null hypothesis can be defined as :

Ho. There is no significant relationship between the lack of interest of managers in HIV/AIDS issues in the workplace and the success of the HIV/AIDS workplace programme

6. RESEARCH METHODOLOGY

6.1 Research design

The aim of the study was to determine whether there was a relationship between a lack of interest of managers in HIV/AIDS issues in the workplace and whether it affects the success of the HIV/AIDS workplace programme.

A non-experimental descriptive quantitative research study was conducted as this was most likely to describe the above situation or the relationship between the two variables, i.e. the lack of interest of managers in HIV/AIDS issues in the workplace, the independent variable, and the success of the workplace programme, the dependent variable. (Treece & Treece, 1996; Christensen, 2004).

The survey, a widely used non-experimental research technique was used allowing for the investigation of behaviors, attitudes and characteristics, a probe into a given state of affairs that exists at a given time. As a survey has the limitation that respondents may provide irrelevant responses or low response frequency, it was critical to maintain the anonymity and privacy of participants (Christensen, 2004).

6.2 Sampling and sample size

The target population comprised of employees who belonged to the management echelon i.e. those on salary levels 9 to 15, and who assumed responsibility for a group of employees. The target population included junior managers on salary level nine to ten, middle managers on salary levels eleven to twelve, and senior managers on salary levels thirteen to fifteen in the Department of Agriculture: Western Cape.

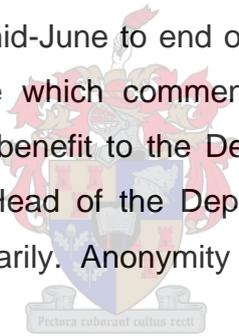
The sample size was envisaged to be 50% (49) of the 98 total manager population as this was still considered to be cost-effective and a manageable sample size. The survey method makes allowance for part of or the total population to be surveyed. Greater accuracy can be achieved with a bigger sample, but cost, time, and manageability must be considered (Christensen, 2004).

Some difficulty was expected in getting managers to participate in the study since it may be interpreted as focusing on their 'inefficiency'. Their responses may not be reliable. The focus of the questionnaire therefore placed emphasis on their participation and the success of the HIV/AIDS workplace programme as oppose to their seeming lack of interest in HIV/AIDS issues in the workplace. Managers at all service points in both rural and urban areas throughout the Province were included in the sample.

However In order to reduce participant error it was therefore necessary to employ some measure of deception to disguise the dependent variable being measured (Christensen, 2004). In this instance the lack of interest was disguised by seemingly testing the participation of the manager. It was felt that this would be less threatening and achieve a more accurate response.

6.3 Data collection

Data collection took place from mid-June to end of July 2006. Data were collected using a structured questionnaire which commenced with an explanation of the rationale for the study, potential benefit to the Department and that it enjoyed the support and permission of the Head of the Department of Agriculture: Western Cape. Their response was voluntarily. Anonymity and confidentiality were assured.



Due to the tendency for low response frequency, the questionnaire was mailed via the electronic mailing system of the Department of Agriculture: Western Cape to all managers instead of only 50%. Managers were geographically distributed through all regions in the Province covering both urban and rural areas. Managers were specifically cautioned not to submit their response electronically, but to submit a printed hard copy so that their anonymity could be maintained.

In order to maintain the privacy and anonymity of the respondents, completed questionnaires were returned to three central 'drop off' points i.e. at reception, the office of the EAP Services and directly, though anonymously through the internal mailing system. The latter proved to be the most convenient as the majority of questionnaires were returned in this way. A total of 25,5% completed questionnaires were returned.

The questionnaire was divided into three main sections, namely Section A: Management Participation, Section B: Basic Facts on HIV&AIDS, and Section C: Biographical information.

The questionnaire included questions that measured the lack of interest of managers in HIV/AIDS issues in the workplace. The success of the workplace programme was determined by questions related to the key concepts in the current HIV/AIDS workplace programme, such as the number of employees who attend the awareness, education and training sessions, wellness programmes, participating in VCT.

7. PROBLEMS ENCOUNTERED WITH DATA COLLECTION

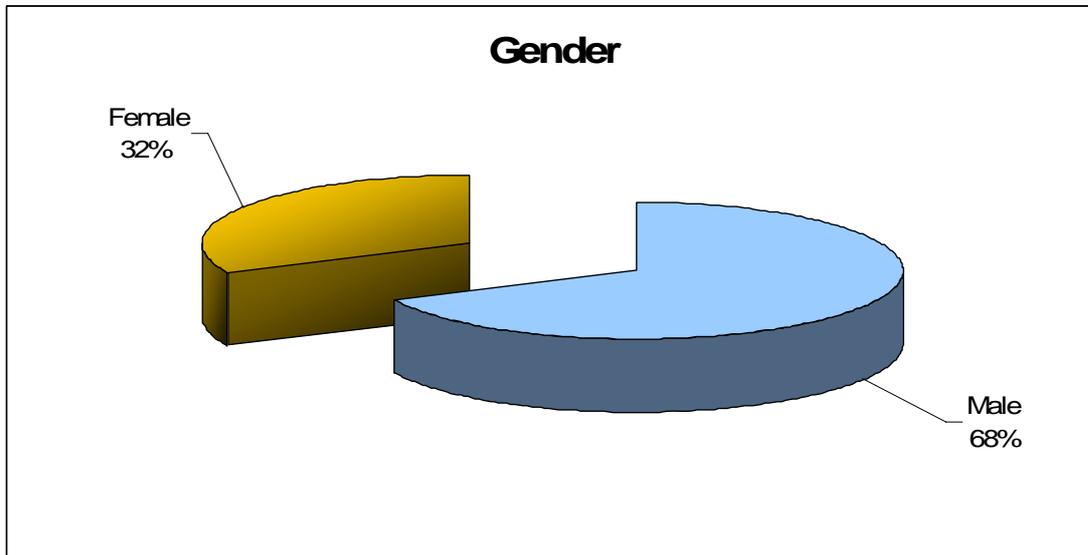
Despite a clearly written 'instruction' included in the cover letter attached to the questionnaire, a few participants still forwarded it electronically. In those instances, a hardcopy printout was made, where after the electronic mail received was immediately deleted to retain anonymity. The response was very slow and repeated e-mails were sent to all managers encouraging them to complete the questionnaire before or on the scheduled closing date. Provision had to be made for the easy return of questionnaires, and hence anonymous submission through the internal mailing system of the Department had to be included.

8. FINDINGS

The total sample size included all 98 managers and consisted of 75 males (76.5%) and 23 females (23.5%). The completed questionnaires were to be analysed using the SPSS, but it was decided to use Excel instead since the total of completed questionnaires amounted to 25.5% (25). This amount was small enough and allowed for meaningful analysis.

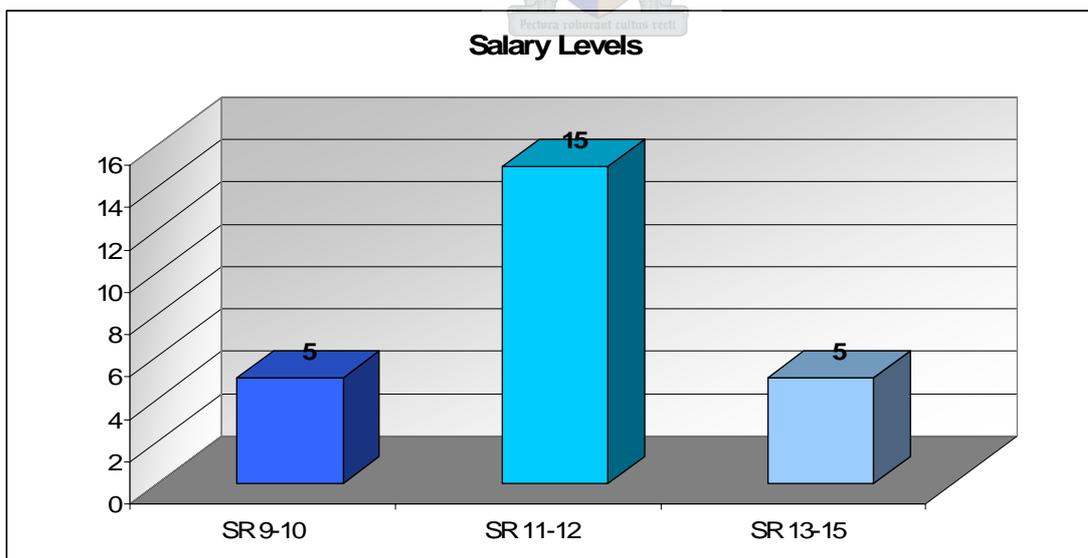
8.1 Biographical details

8.1.1 Gender



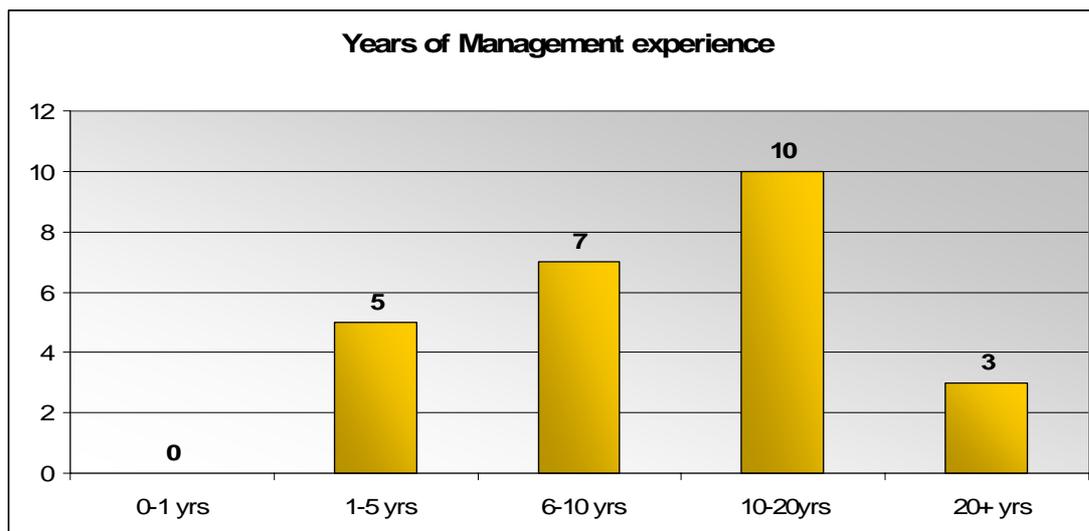
The total respondents consisted of 17 (68%) males and eight (32%) females. Of the respondents four (16%) fell into the age group 30-39 years; 10 (40%) into the age group 40-49 years, and 11 (44%) in the age group 50-65 years.

8.1.2 Salary levels



Five (20%) Of the respondents fell into the salary level 9-10 (junior management), fifteen (60%) in salary level 11-12, and five (20%) in salary level 13-15.

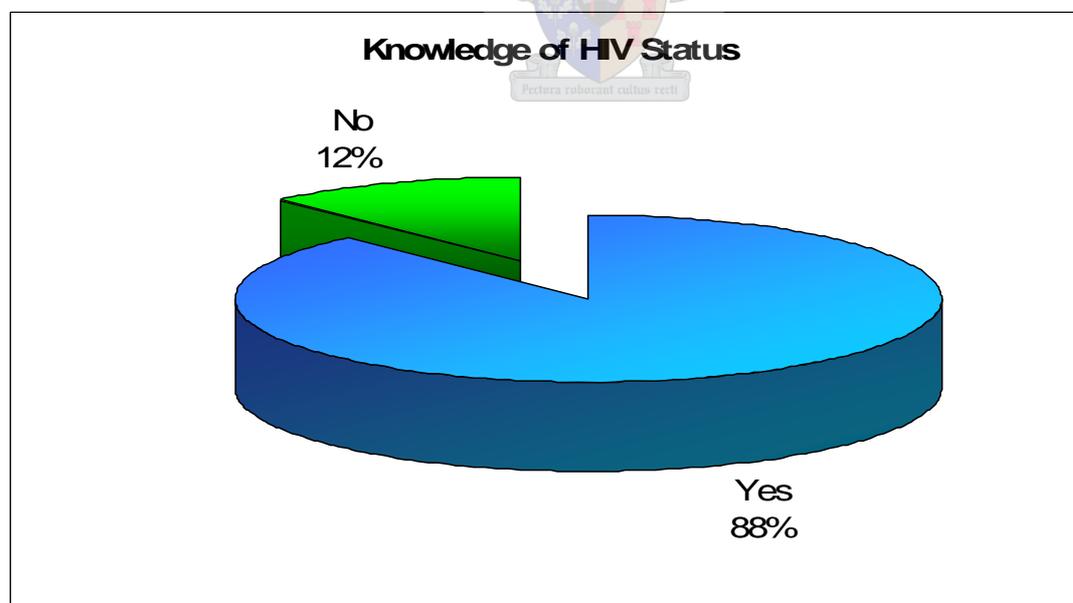
8.1.3 Years of management experience



Five (20%) of respondents had one to five years experience as a manager, seven (28%) had six to ten years experience, ten (40%) had 10-20 years experience, and three (12%) had more than 20 years of experience as a manager.

8.2 Basic facts on HIV/AIDS

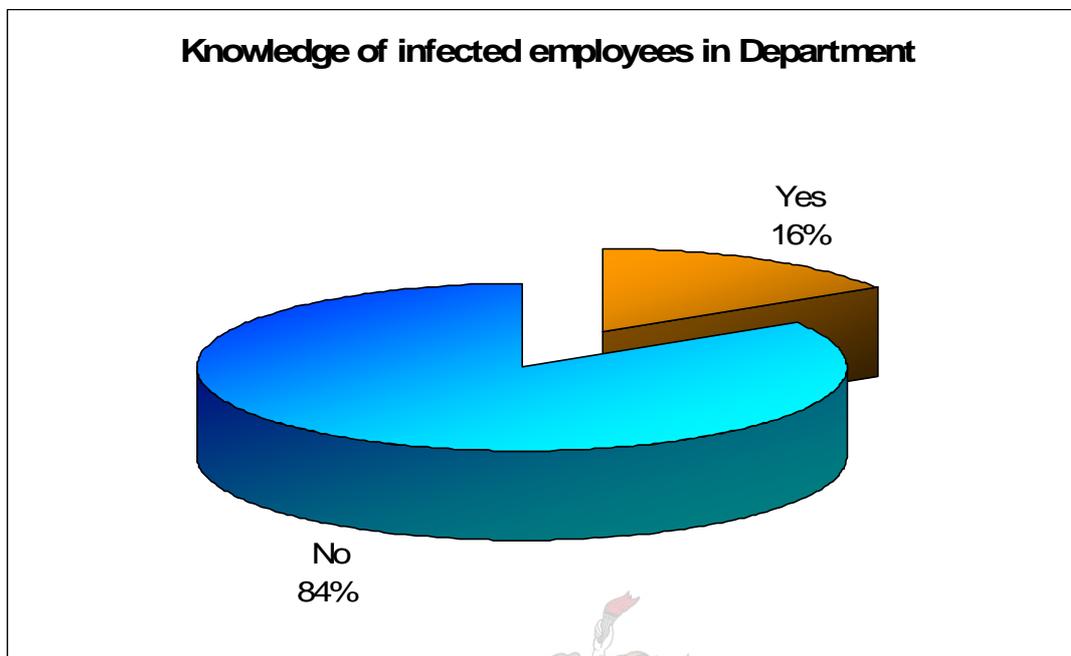
8.2.1 HIV status



Twenty-two (88%) of managers knew their HIV status whilst three did not know their status. Of the three respondents who did not know their status, two were females and one was a male.

Two out of the 17 male respondents did not know their status whilst one out of the eight female respondents did not know their status.

8.2.2 *Number of employees infected*

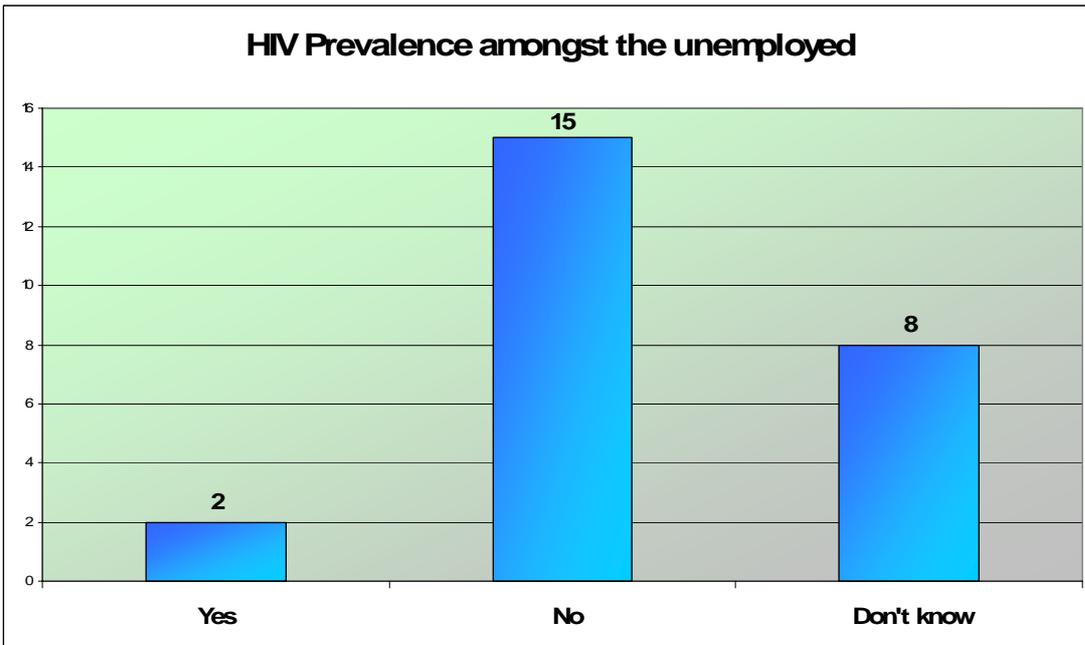


Twenty one (84%) of the total sample of 25 managers did not know how many employees were infected with the HIV whilst 16% did know.

Although five (43%) of all employees, tested positive for the HIV during the last VCT campaign, the aforementioned reflects that most managers are not aware thereof. Four managers, two females and two males, indicated that they did not know how many employees was HIV positive in the Department of Agriculture. The two females and one male were in the age group 40-49 years and the other male in the age group 50-65 years.

8.2.3 *Prevalence of HIV amongst the unemployed*

Two (8%) indicated that HIV is prevalent amongst the unemployed, 15 (60%) that it is not mostly prevalent amongst the unemployed and six (32%) indicated that they did not know whether HIV was prevalent mostly amongst the unemployed. Both the managers who indicated that HIV is prevalent amongst the unemployed were from the junior management level (salary levels 9-10).

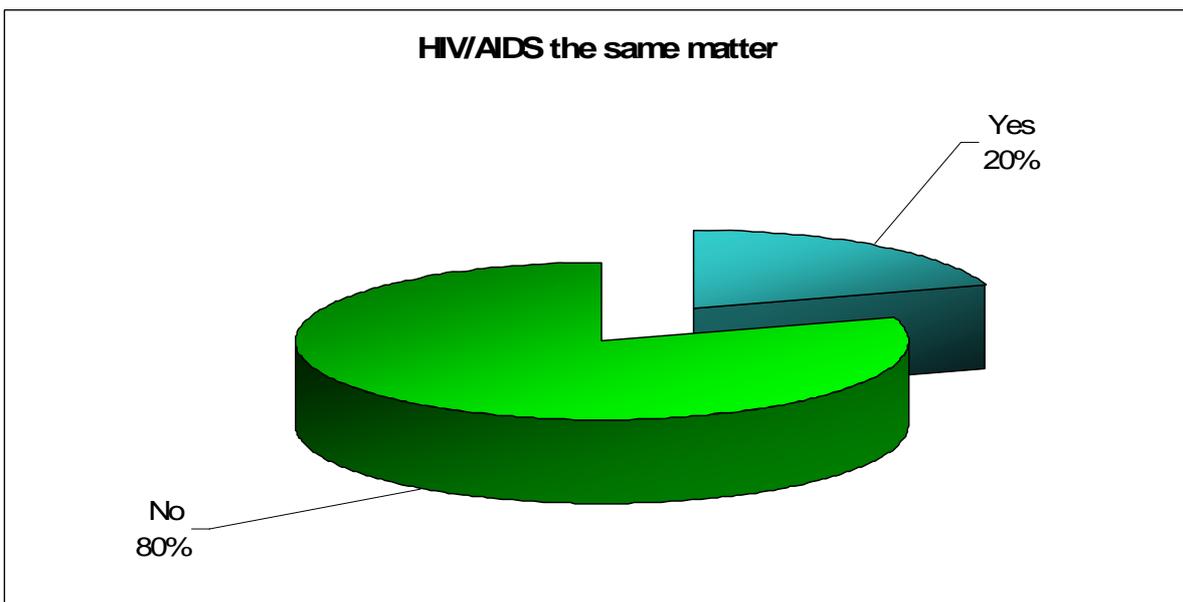


8.2.4 Poor people more likely to contract HIV than healthy people

Seven (28%) managers indicated that this is the case. Sixteen (64%) indicated that poor people were not more likely to contract HIV than healthy people. One respondent did not know. One indicated that it was not possible to draw a comparison between 'poor' people and 'healthy' people.

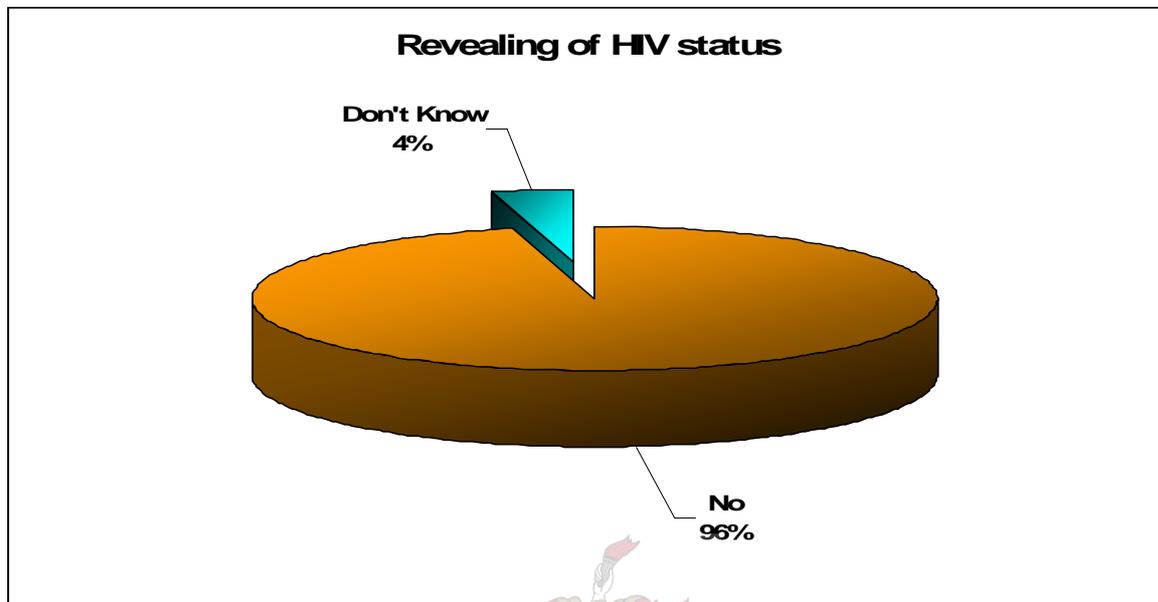
8.2.5 HIV/AIDS are one an the same

Twenty (80%) managers indicated that HIV/AIDS are not one and the same. Five (20%) of respondents, who were all males indicated that it is one and the same.



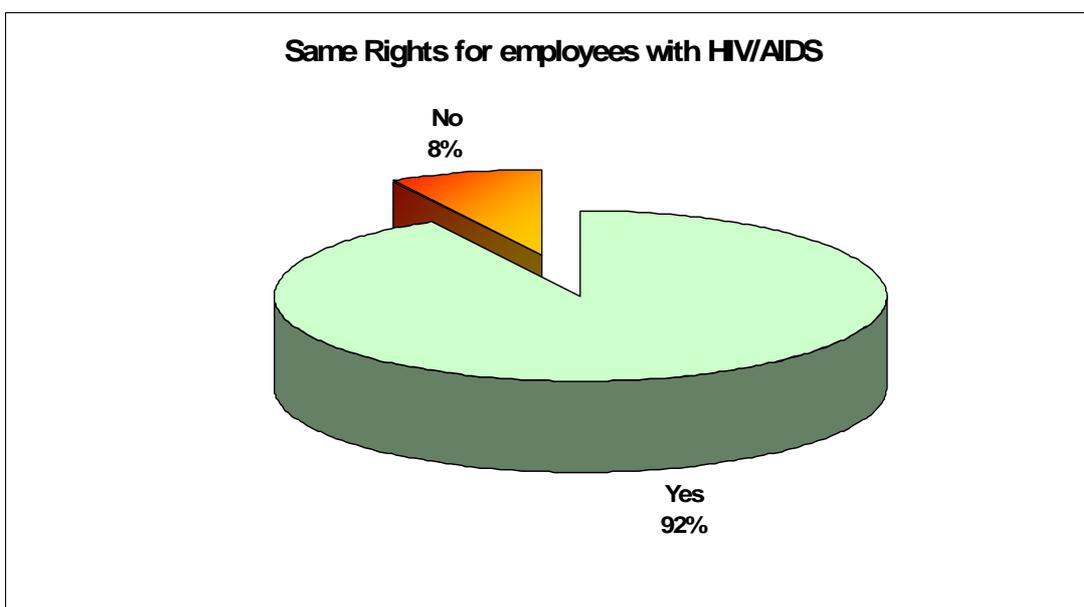
8.2.6 *Revealing of HIV status*

Twenty four (94%) of managers indicated that employees who become HIV positive are not legally compelled to disclose their status. However one (4%) manager did not know whether employees who become HIV positive can be legally compelled to reveal their status.



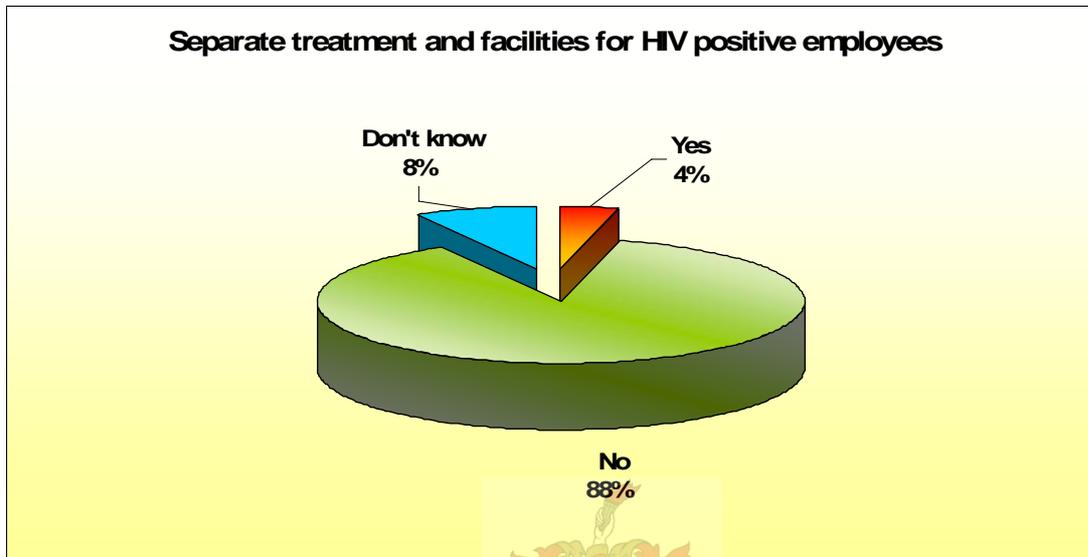
8.2.7 *Rights of employees with HIV/AIDS*

Twenty three (92%) managers indicated that employees who are HIV positive should be treated like everyone else with the same rights. Two (8%) managers indicated that such employees should not be treated with the same rights. Both these managers were males.



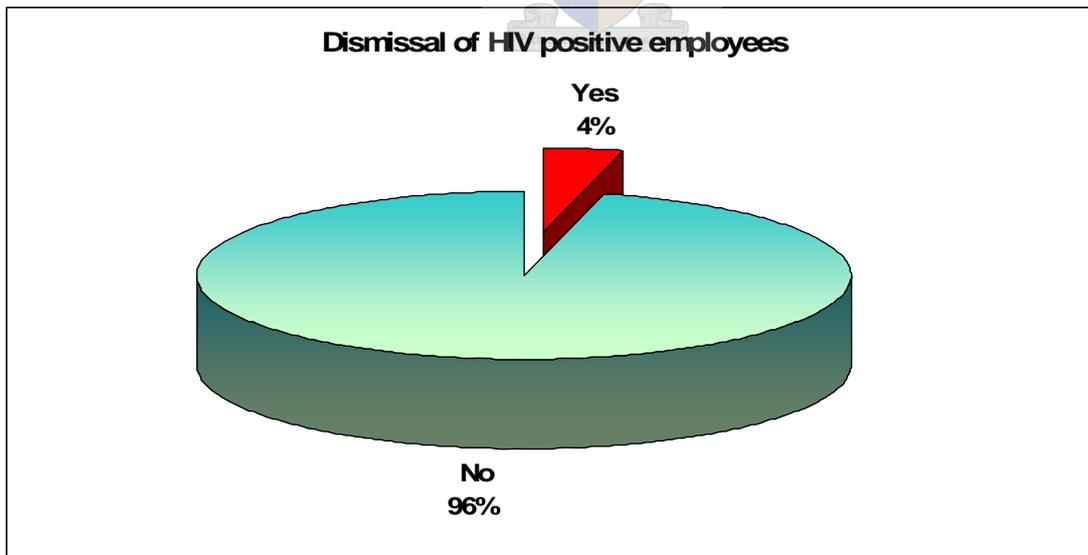
8.2.8 *Separate treatment and facilities for HIV positive employees*

The majority of managers, twenty two (88%) indicated that employees who are HIV positive should be treated like everyone else. One manager felt that they should be treated separately. He is a male in the age group 50-69 years. Three respondents indicated that they did not know. Two of these are in the age group 30-39 years whereas the other is in the 50-69 years age group.



8.2.9 *Dismissal of HIV positive employees*

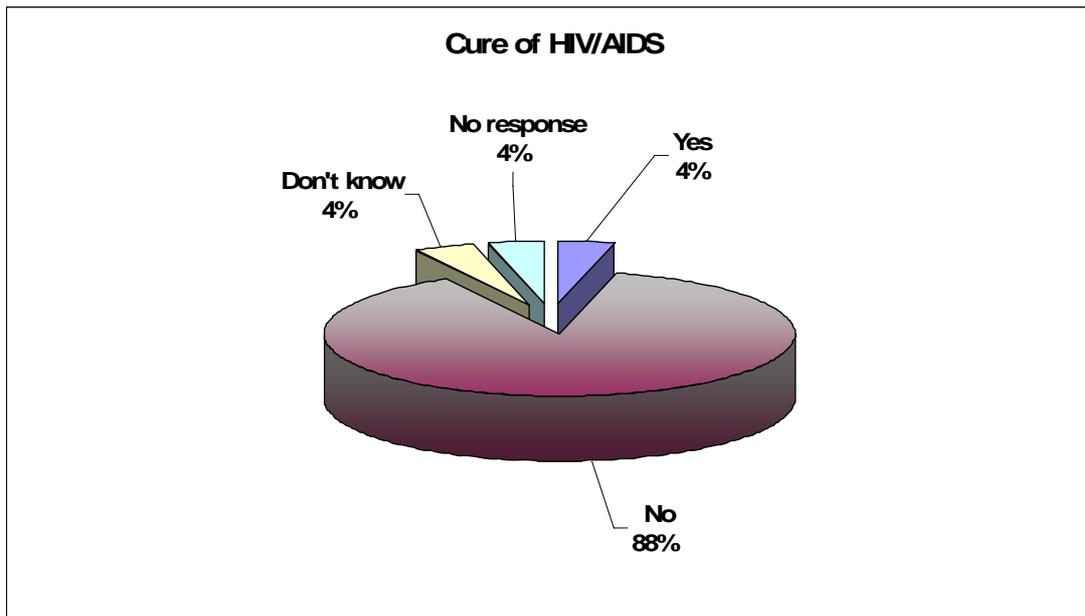
One male indicated that an employee can be legally dismissed for being HIV positive, whilst 96% (24) of respondents stated that this is not the case.



8.2.10 *Employment of HIV positive employees*

All managers indicated that an employee cannot be turned down for employment based on a positive HIV status.

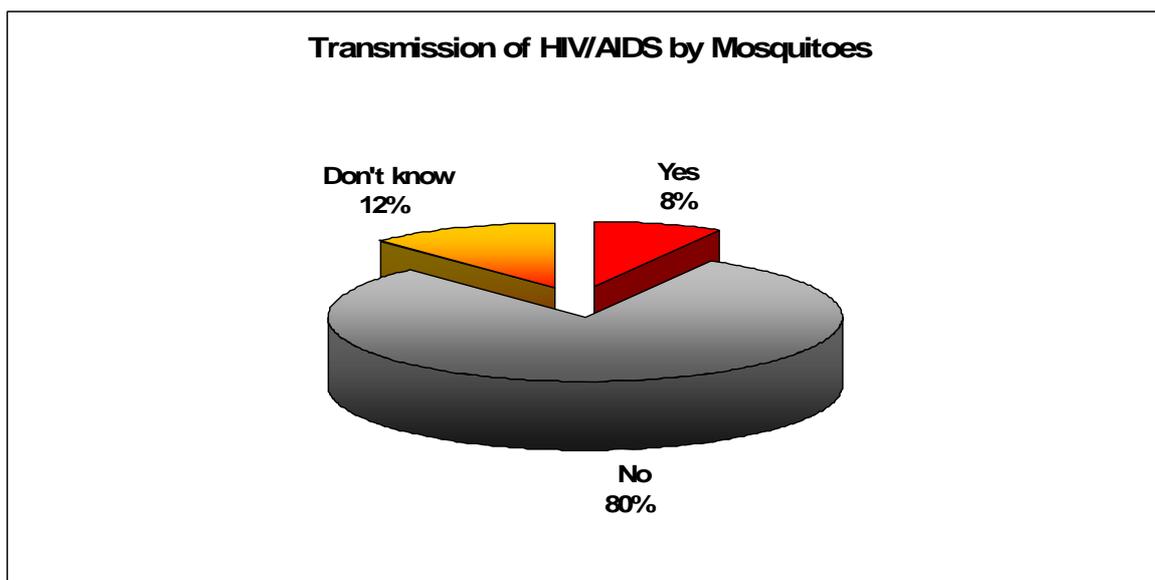
8.2.11 Cure of HIV/AIDS



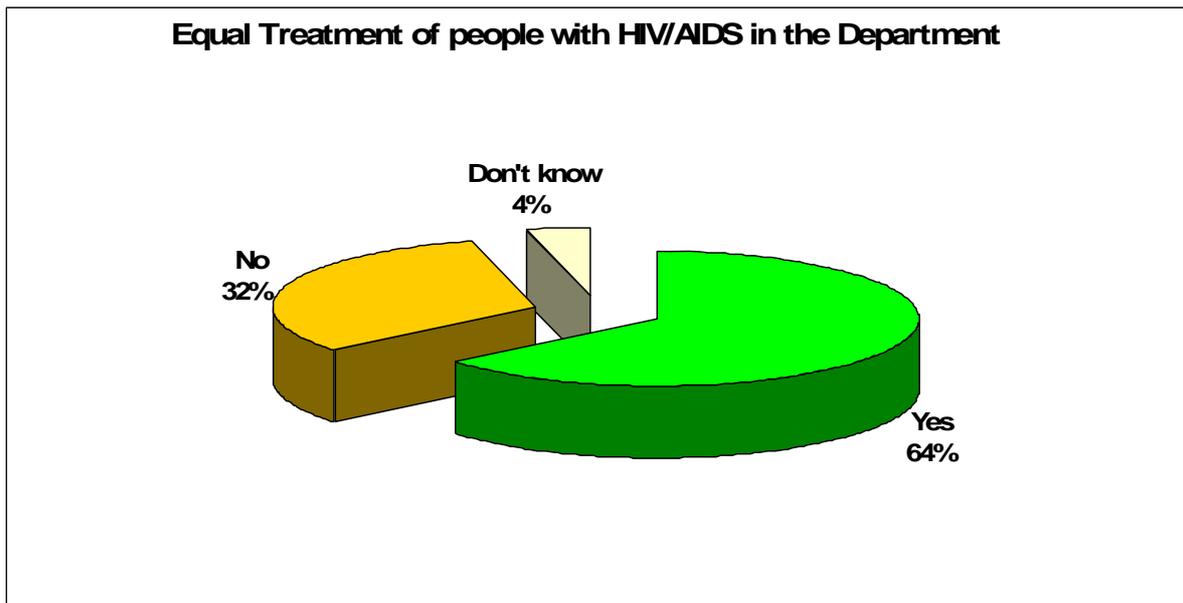
Twenty-two (88%) managers responded that HIV/AIDS cannot be cured, whilst one male in the age group 40-49 indicated that it can be cured. One respondent did not respond and one did not know.

8.2.12 Transmission of HIV/AIDS by Mosquitoes

Two (8%) all males, indicated that HIV/AIDS can be transmitted by mosquitoes, three (12%) indicated that they do not know and twenty (80%) indicated that this is not so.



8.2.13 Equal treatment of people with HIV/AIDS in the Department

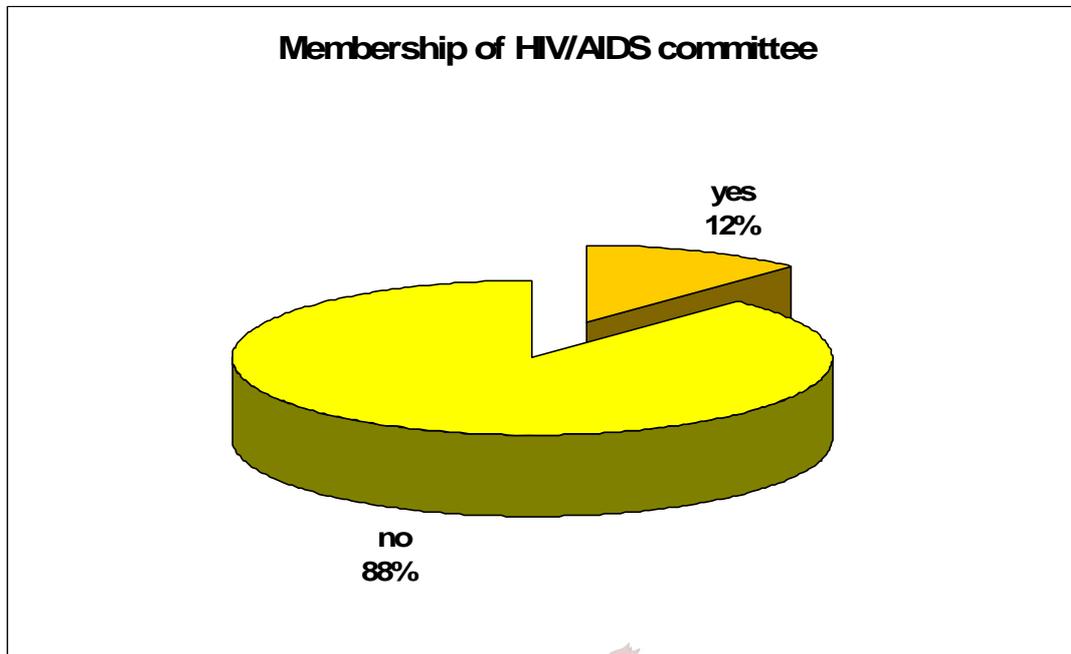


Sixteen (64%) of managers indicated that all people are equally threatened by HIV/AIDS, eight (32%) indicated that all people are not equally threatened and one did not know. One of the eight respondents, who felt that all people are not equally threatened by HIV/AIDS, was a male.

On the whole the majority of managers knew the basic facts about HIV/AIDS. However, the responses provided by the female respondents in the sample were more accurate than those of the male respondents. In one instance the response of the females were inaccurate. Most of the inaccurate responses were from the male respondents.

8.3 Management participation

8.3.1 Membership of the Departmental HIV/AIDS committee

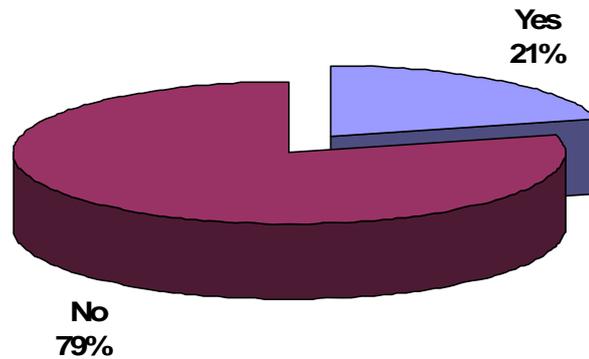


Three (12%) respondents indicated that they are members of the Departmental HIV Committee. All three fall within the age group 40-49 with two of them having 6-10 years management experience and one with one to five years experience. All three were female, two on middle management, and one on junior management level

8.3.2 Employees' involvement in Departmental HIV/AIDS Committee

Five (20%) managers indicated that they have subordinate employees who are part of the Departmental HIV/AIDS Committee. Three (12%) of these managers were females and two were males. Two managers were on the senior level, two on middle management and one on junior management level. One manager has one to five years management experience, three have 6-10 years and one has over twenty years experience as a manager.

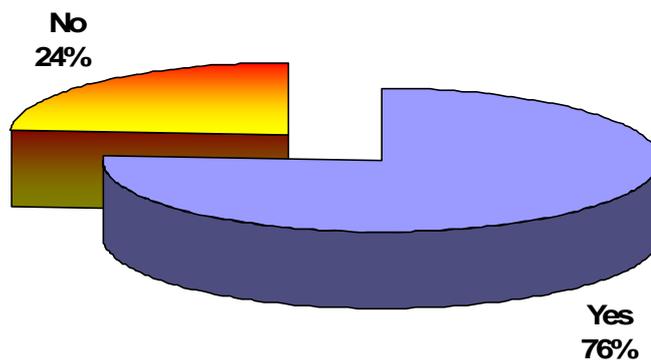
Employees' participation in Departmental HIV/ AIDS committee



Nineteen (72%) stated that they do not have subordinate employees who belong to the Departmental HIV/AIDS Committee. Most of these managers (40%) were middle managers. Ten of the managers had between 10-20 years of management experience. One manager, a female middle manager, did not provide a response.

8.3.3 Attendance of HIV/AIDS education, Information and awareness-raising sessions

Attendance of Departmental HIV/AIDS education, awareness and information-raising sessions

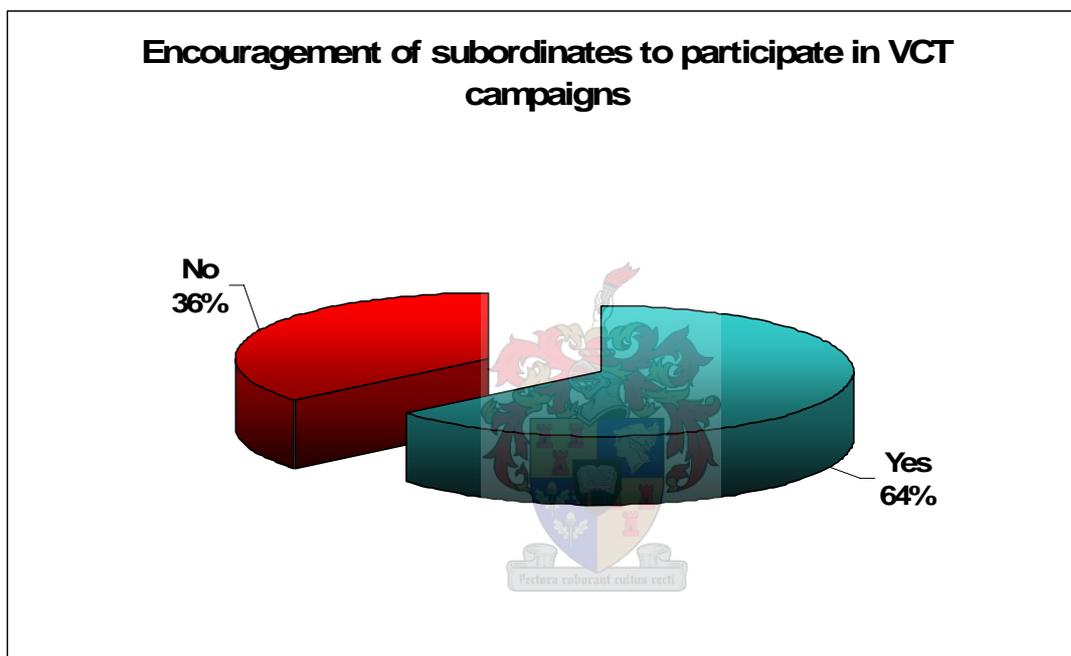


Nineteen (72%) indicated that they have attended such sessions of which fourteen (54%) were males and five females. Three (12%) were at junior management level, eleven (44%) at middle management and five at senior management level. Three

(12%) of the managers had one to five years experience, seven (85%) had six to ten years, six (24%) had 10-20 years and three (12%) had more than 20 years management experience.

Six (24%) of managers indicated that they have not attended any information and awareness-raising sessions. Three (12%) were females and three (12%) males. Two (8%) were junior managers, and four (16%) middle managers. Two (8%) indicated one to five years management experience, four (16%), and 10-20 years.

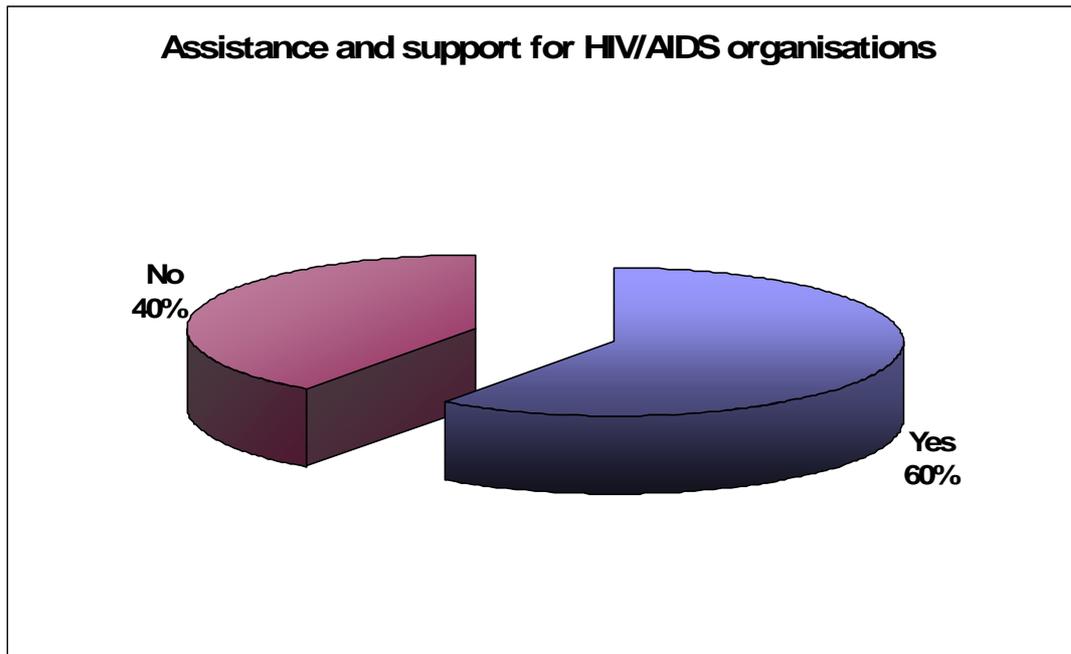
8.3.4 Encouragement of subordinates to participate in VCT campaigns



Sixteen (66%) responded, that they do encourage the subordinate employees to participate in VCT campaigns. Ten (40%) respondents were females and six were males. Two (8%) were at junior management level, nine (36%) at middle management and five (20%) at senior level. Three (12%) had 1-5 years of management experience, five (20%) had 6-10 years, five had 10-20 years, and three had more than 20 years.

Nine (36%) of managers indicated that they do not encourage their subordinate employees to participate in the VCT campaigns. Three (9%) of these managers were junior managers and six (24%) middle managers. Two (8%) had 1-5 years management experience, two (8%) had 6-10 years and five (20%) had 10-20 years.

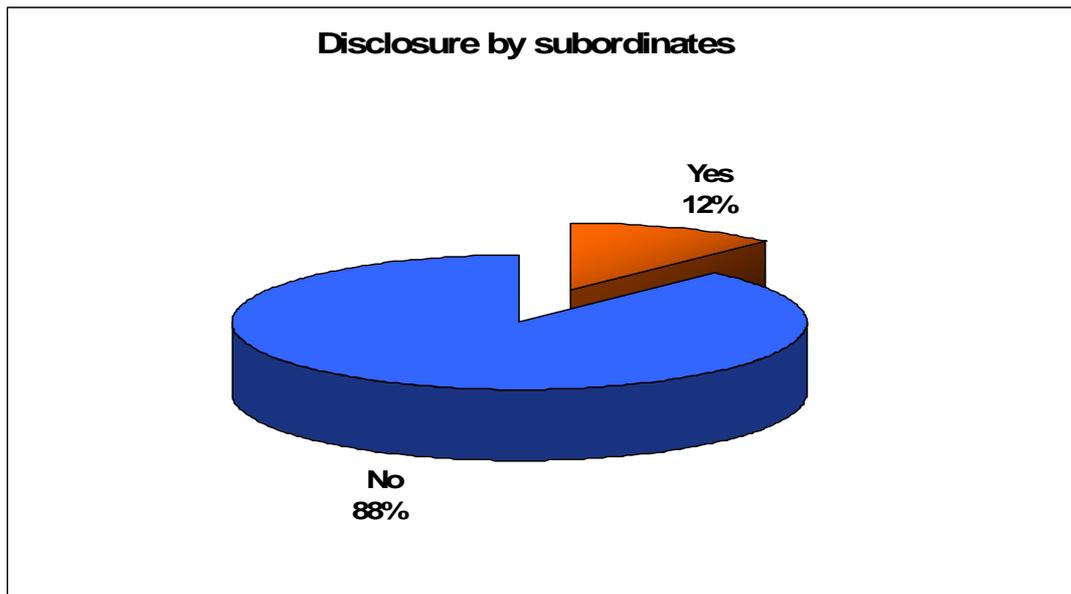
8.3.5 Assistance and support for HIV/AIDS organisations



Fifteen (60%) indicated that they do respond to requests for assistance and support. Eight (32%) were females and seven (28%) males. Three (9%) were junior managers, seven (28%) middle managers and five senior managers. Three had 1-5 years management experience, four (16%) had 6-10 years, six (24%) had 6-10 years and two (8%) had more than 20 years.

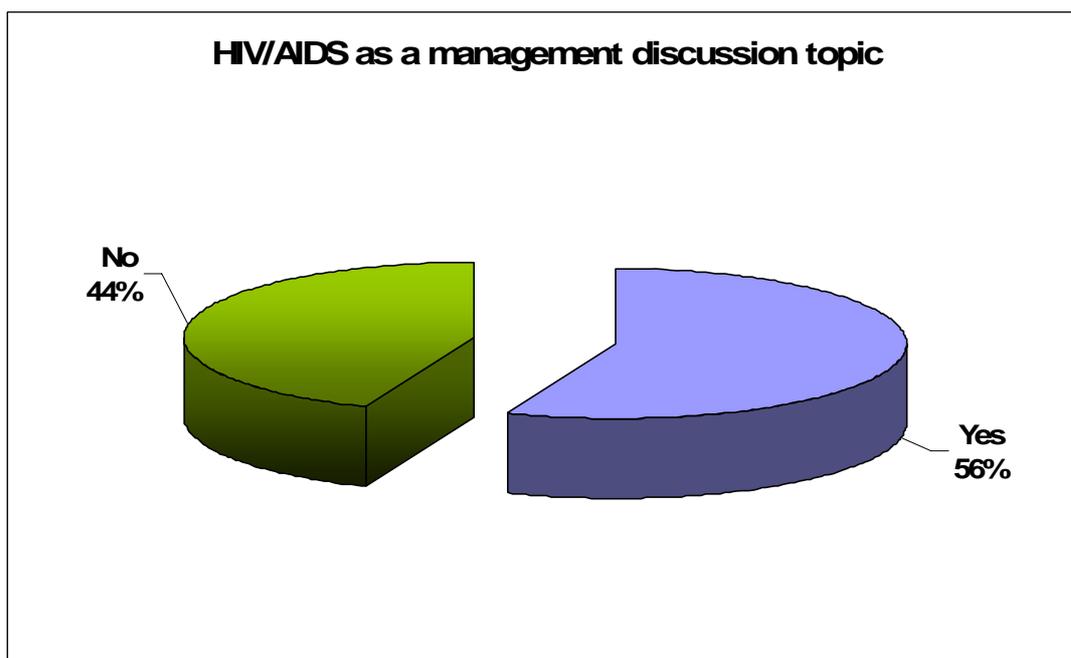
Ten (40%) responded that they do not respond to request for such assistance if whom nine (36%) were males and one (4%) was a female. Two (8%) were junior managers and eight (32%) were middle managers. Two (8%) managers had 1-5 years management experience, three (12%) had 6-10 years, four (16%) had 10-20 years and one (4%) had more than 20 years.

8.3.6 Disclosure by subordinates



Three (12%) Indicated that subordinate employees have disclosed their HIV status, of whom two (8%) were females and one (4%) was male. All were at middle management level. Two (8%) had six to ten years management experience and one (8%) had more than 20 years. Twenty two (88%) stated that no employees had disclosed his/her HIV status to them. Of these six (24%) were female and 16 were males. Five (20%) had one to five years management experience, five (20%) had 6-10 years, 10 (40%) had 10-20 years and two had more than 20 years.

8.3.7 HIV/AIDS as a management discussion topic

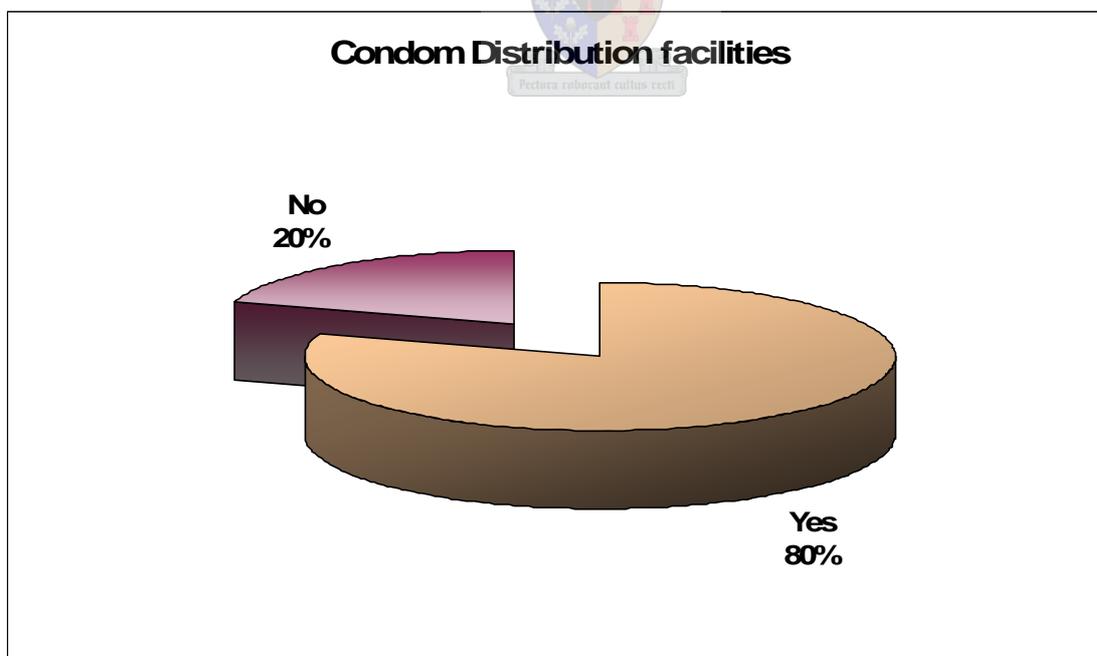


Fourteen (56%) responded that HIV/AIDS is a topic of discussion at their management meetings. Ten (40%) of these respondents were males and four females. Five were at junior management level, six (24%) middle management level and three (12%) senior management level. Two (8%) had one to five years experience, four (16%) had six to ten years, six (24%) had 10-20 years and two (8%) had more than 20 years.

Eleven (44%) indicated that HIV/AIDS is not a topic at management meetings. Four (16%) were females and seven (28%) were males. Nine (36%) were middle managers and two (8%) were senior managers. Three (12%) had one to five years management experience, three (12%) had six to ten years experience, four (12%) had 10-20 years and one (4%) had more than 20 years.

8.3.8 Condom distribution

Twenty (80%) indicated, that condom distribution facilities are available in their sections. Thirteen (52%) were females and seven (28%) males. Five (20%) are junior managers, 12 middle managers, and three (12%) senior managers. Five (20%) had 1-5 years management experience, five (20%) had 6-10 years, eight (32%) had 10-20 years, and two (8%) had more than 20 years experience.

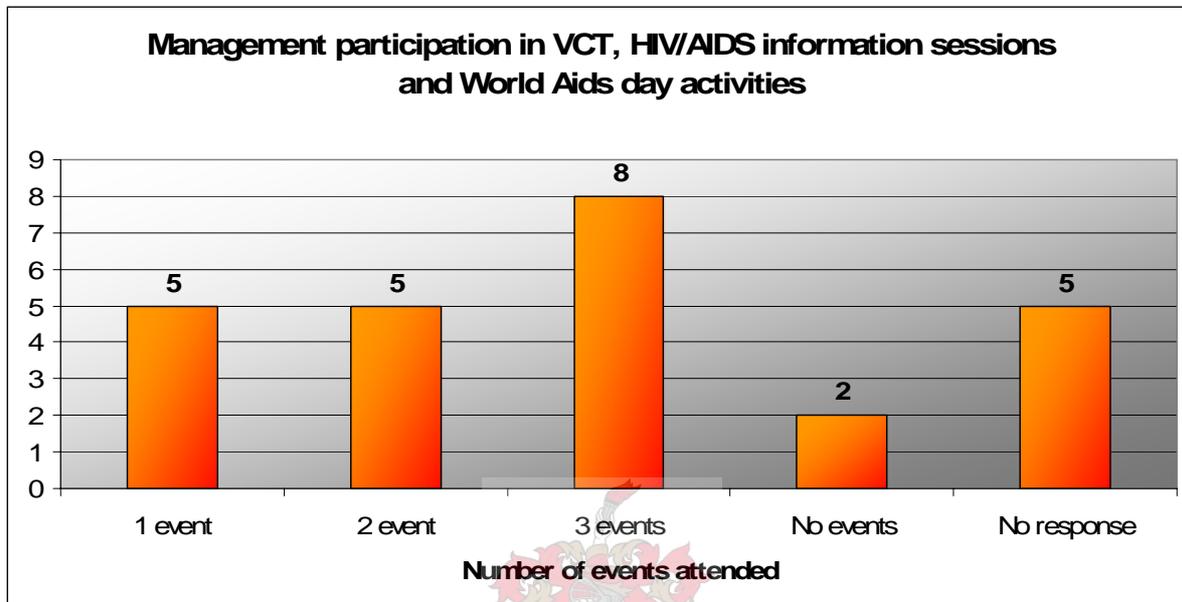


Five (20%) Indicated that they do not have condom distribution facilities in their sections of which four (16%) were females and one (4%) was a male. Three (9%)

were middle managers and two (8%) senior managers. Two (8%) had six to ten years, two (8%) had 10-20 years and one (4%) had more than 20 years.

8.3.9 *Manager's participation in Voluntary Counseling and Testing (VCT), HIV/AIDS information sessions and WORLD AIDS DAY activities*

Eighteen (72%) of managers indicated their participation in various combinations.



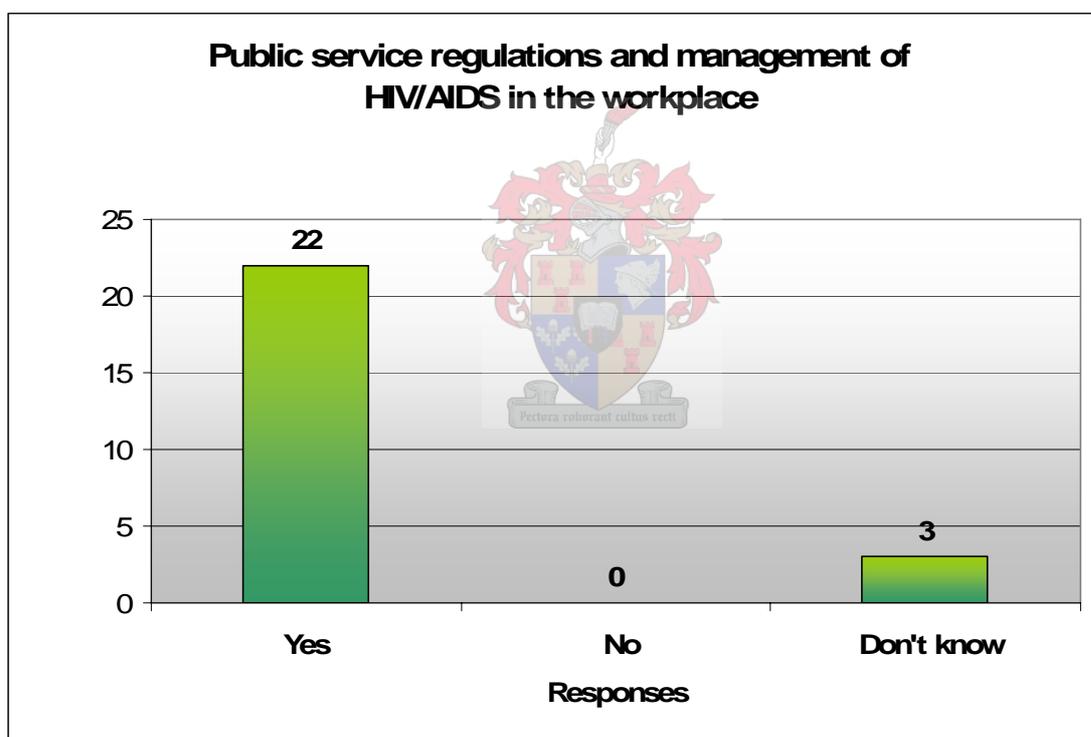
Eight (32%), indicated that they have participated in all three activities. Five (20%) are males and three (12%) are females with one (4%) in junior management, five (20%) in middle management and two (8%) in senior management. Four (16%) had six to ten years management experience, three (12%) had 10-20 years and one (4%) more than 20 years. Five (20%), participated in two of the three activities. One (4%) male at senior management level indicated that he participated in VCT and HIV&AIDS information sessions. The male had 20+ years management experience. One (4%) female participated in VCT and World AIDS day activities with 1-5 years experience at senior management level. Three (12%) participated in HIV/AIDS information session and World AIDS Day activities, they were all males; two junior managers and one senior manager, one had one to five years experience and two had 10-20 years experience.

Five respondents participated in only one of the activities listed above. One (4%) female at junior management level with one to five years experience, participated in only VCT. Two (8%), both males at middle management level participated only in HIV/AIDS information sessions; they had six to ten years and more than 20 years

experience respectively. Two (8%), a male and a female, participated only in the WORLD AIDS DAY activities, both were in middle management with 1-5 and 6-10 years experience respectively.

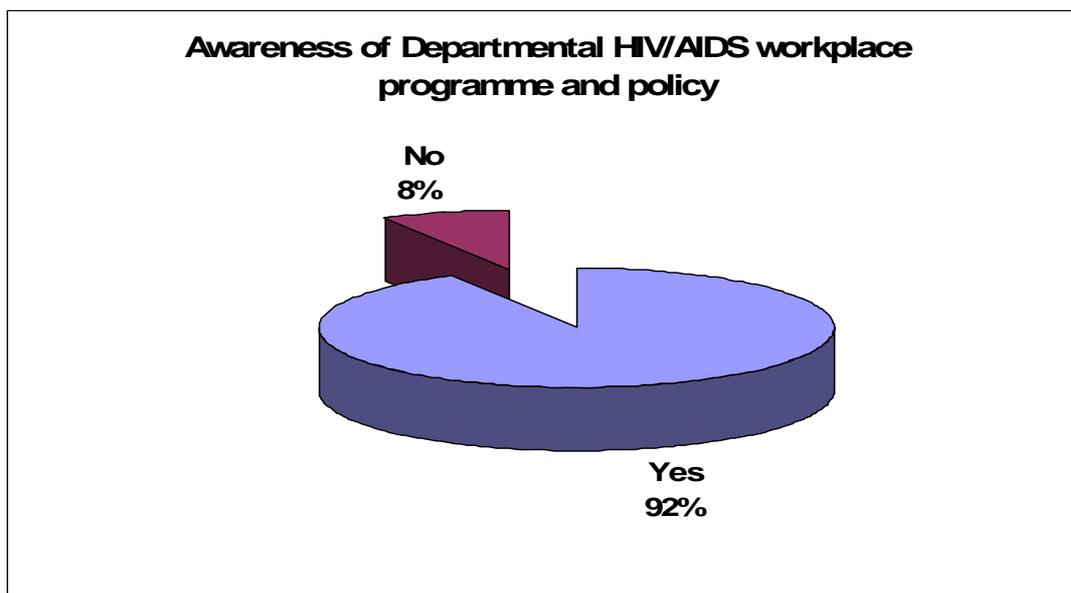
Two respondents indicated that they didn't participate in any of the activities. Both are males in middle management and one had six to ten years experience and the other had 10-20 years experience. Five did not respond, of whom three were male; two were female, one at junior management level and four at middle management level. One had one to five years experience, one with 6-10 years and three with 10-20 years management experience.

8.3.10 Public Service Regulations and management of HIV/AIDS in the workplace

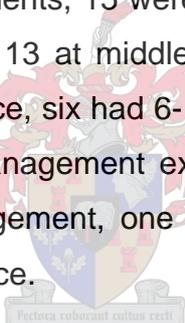


Twenty two respondents indicated that the management of HIV/AIDS in the workplace is a public service regulations requirement, of these 14 were male and eight were female. Five were junior managers, 12 middle managers and five senior managers. Five had 1-5 years management experience, six had 6-10 years, nine had 10-20 years and two had more than 20 years management experience. There was no non-response to this question. There were three 'do not know' responses. All three were female, middle management, one had 6-10 years experience, one had 10-20 years and one had more than 20 years management experience.

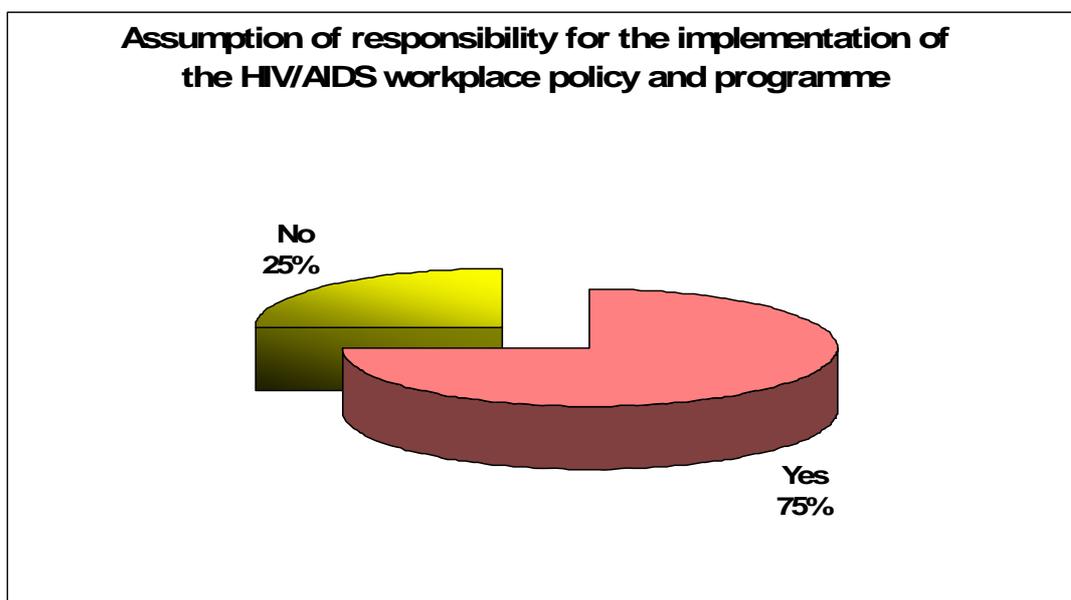
8.3.11 Awareness of HIV/AIDS Departmental Workplace Policy and Programme



Twenty-three respondents indicated that they were aware of the workplace policy and programme. Of those respondents, 15 were male and eight were female. Five were at junior management level, 13 at middle – and five at senior management level. Five had 1-5 years experience, six had 6-10 years, nine had 10-20 years, and three had more than 20 years management experience. The two 'no' responses were both males at middle management, one had 6-10 years and the other had 10-20 years management experience.

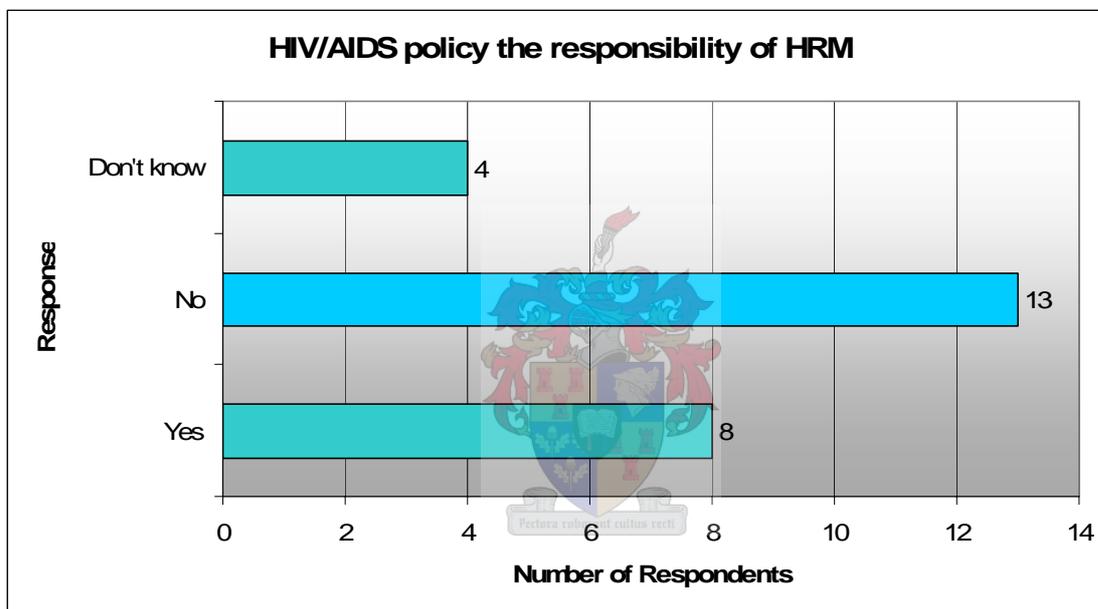


8.3.12 Assumption of responsibility for implementation of the HIV/AIDS workplace policy and programme



Eighteen responded that they do assume responsibility, 12 males and six females; four at junior management level, 10 at middle management and four at senior management level. Four had 1-5 years experience, five had 6-10 years, seven had 10-20 years and two had more than 20 years management experience. Six indicated that they do not assume responsibility; five were males and one female. Five were at middle management and one at senior management. Two had 6-10 years, three had 10-20 years experience, and one had more 20 years experience. One female at junior management with 6-10 years experience did not respond.

8.3.13 HIV/AIDS, the responsibility of the Human Resources Management Component

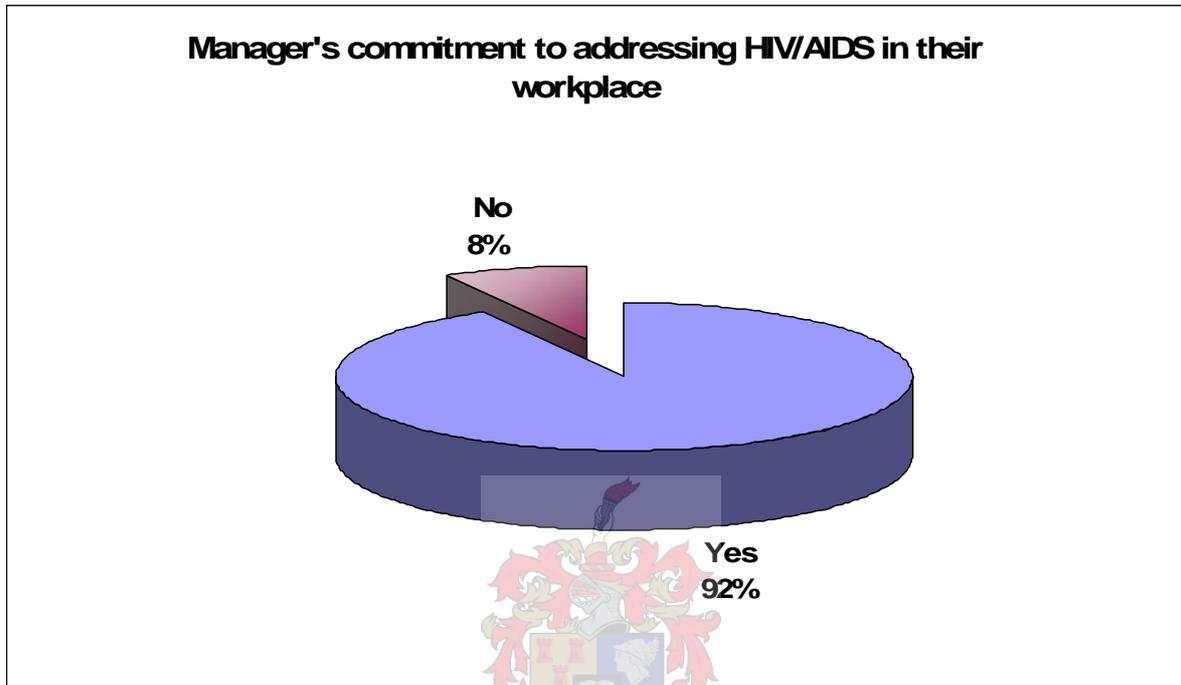


Seven respondents indicated that HIV/AIDS is the responsibility of the HRM component. Seven were males and one was female, three were at junior management level, five at middle management level and one at senior management level. One had 1-5 years experience, three had 6-10 years and four had 10-20 years management experience.

Thirteen stated that it was not HRM component's responsibility, seven were males and six were females. Three were at junior management level, six at middle management level, and four at senior management level. Four had 1-5 years experience, three had 6-10 years, four had 10-20 years, and two had more than 20 years management experience.

Four respondents indicated that they 'don't know' if HIV/AIDS is HRM component's responsibility; they were all males on middle management level. One had 6-10 years experience, two had 10-20 years and one more than 20 years management experience.

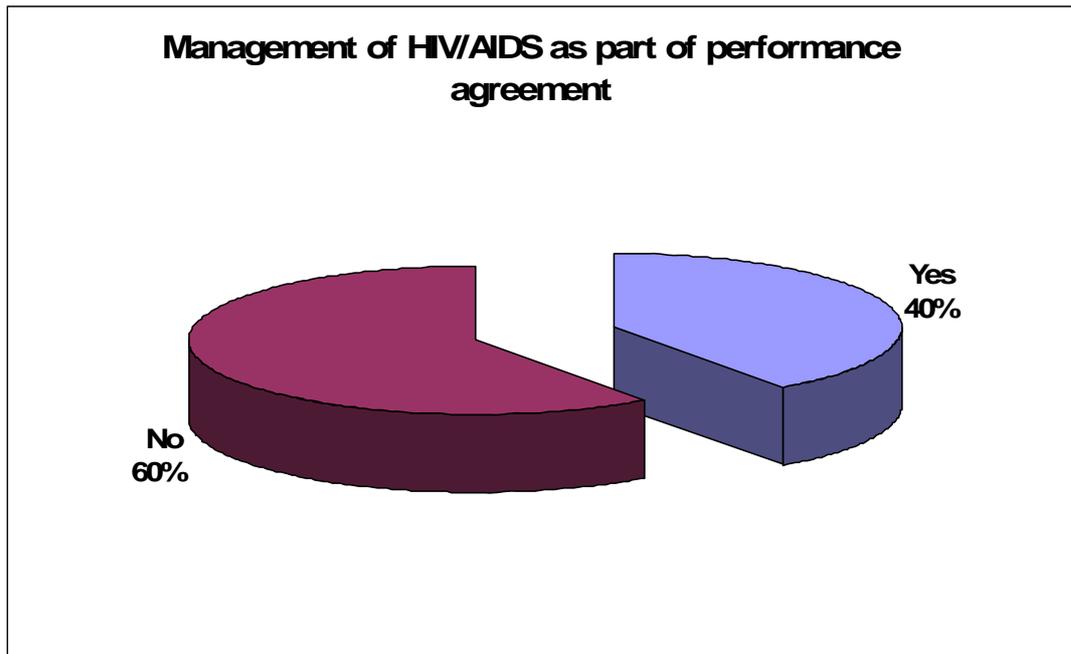
8.3.14 *Manager's commitment to addressing HIV/AIDS in the workplace*



Twenty three respondents indicated that they are committed to addressing HIV/AIDS in the workplace. Fifteen were male and eight were female. Five were at junior management level, 15 at middle and five at senior management level. Five had 1-5 years experience, five had 6-10 years experience, 10 had 10-20 years experience and three had more than 20 years experience.

There were two 'no' responses indicating non-commitment, both were male, in middle management with 6-10 years experience.

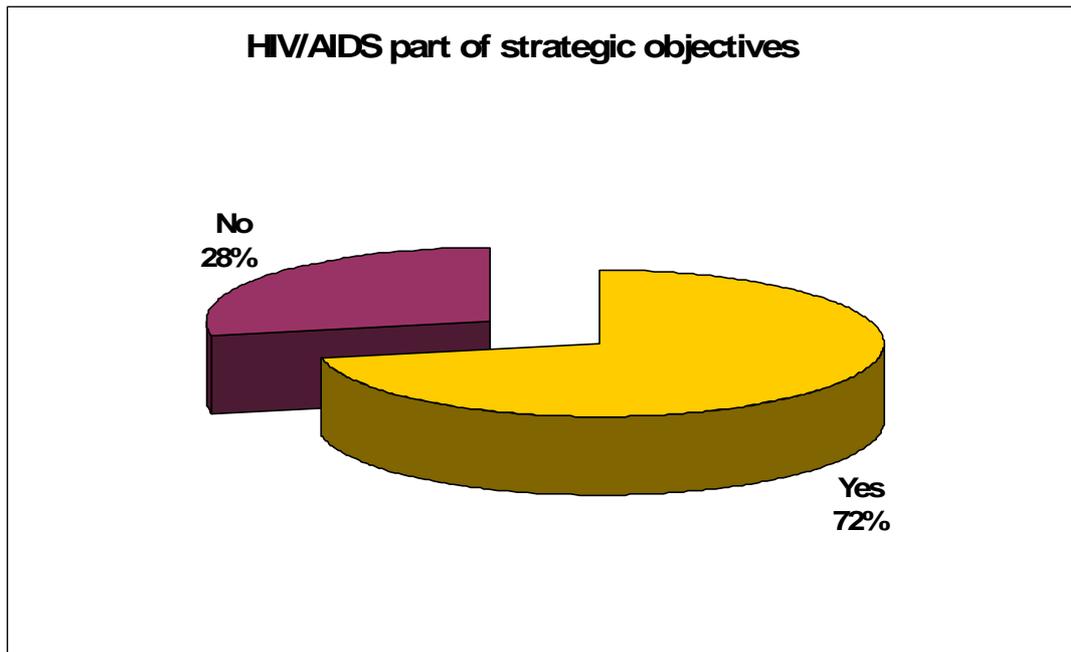
8.3.15 HIV/AIDS, inclusion in performance agreements



Ten respondents indicated that management of HIV/AIDS should form part of performance agreements. Six of the respondents were male and four were female. Two of the respondents were in junior management, five in middle management and three in senior management. Two had 1-5 yrs experience, three had 6-10 years experience, three have 10-20 years experience while two had more than 20 years management experience.

Fifteen respondents indicated that HIV/AIDS should not form part of performance agreements. Four of the respondents were female and 11 were male. Three are in junior management, 10 are in middle management, while two occupy senior management positions. Three had 1-5 years experience, four have 6-10 years experience, seven had 10-20 years experience and one had more than 20 years experience.

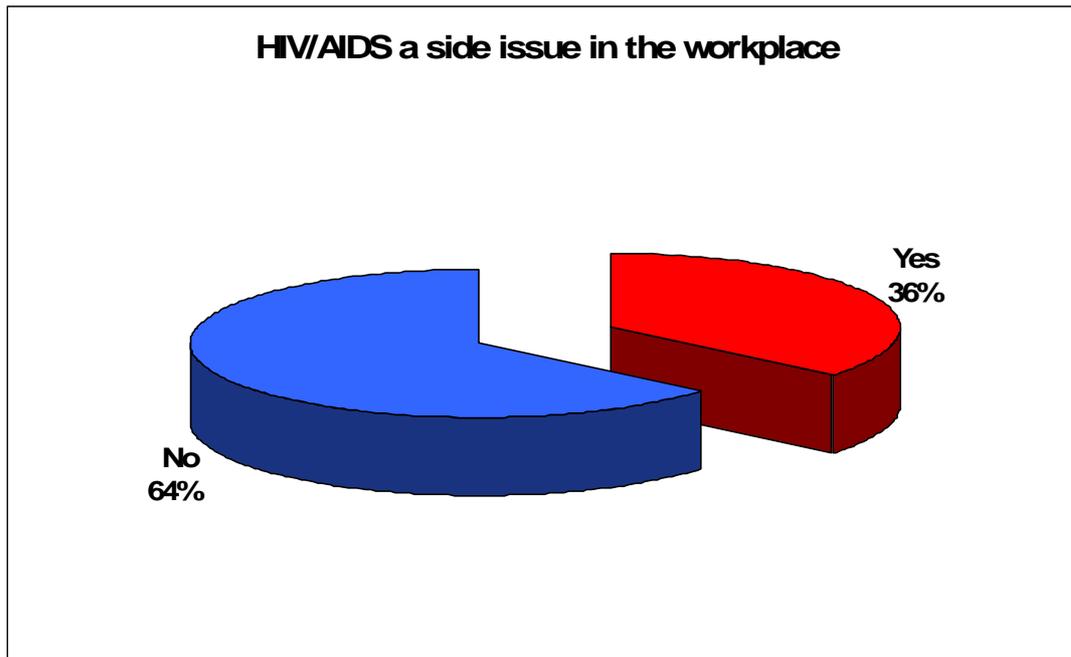
8.3.16 HIV/AIDS part of Departmental strategic objectives



Eighteen respondents agreed that HIV/AIDS programmes should form part of the departmental strategic objectives. Eleven of these respondents were male, seven were female. Three are in junior management, 19 are in middle management while five are in senior management. Four of the respondents have 1-5 years management experience, five had 6-10 years experience, six had 10-20 years experience, and three had more than 20 years management experience.

Seven respondents gave no response, six were male and one was female. Two were in junior management and five at middle management level. One respondent had 1-5 years experience in management, two had 6-10 years experience, and four had 10-20 years experience.

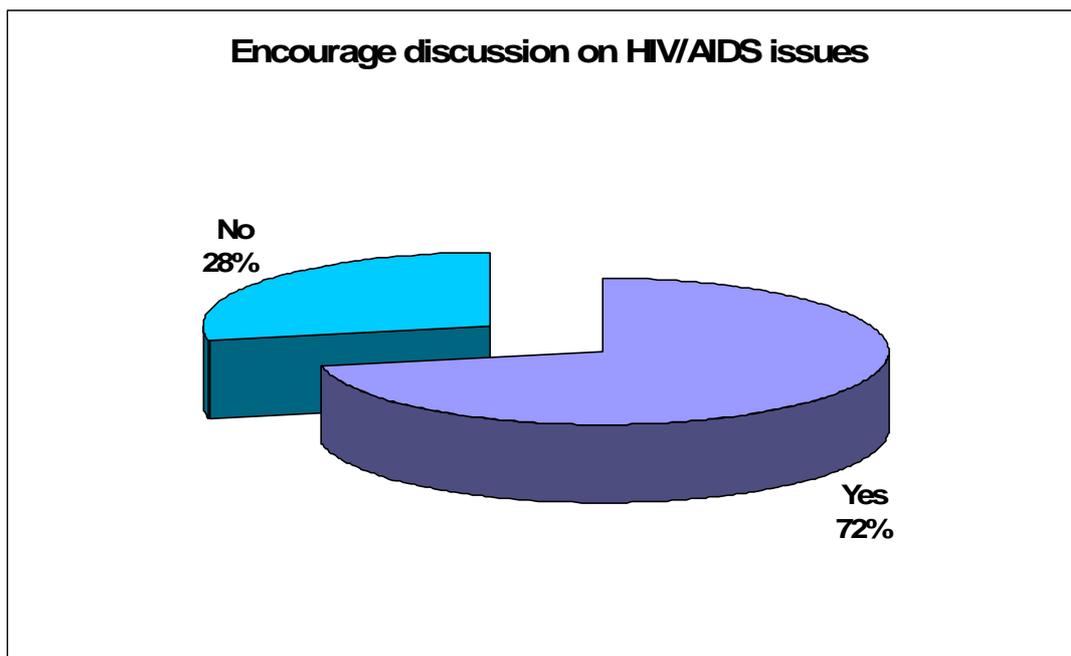
8.3.17 HIV/AIDS, A 'side issue' in the workplace



Nine respondents indicated that HIV/AIDS in the workplace is a side issue. Six of these respondents were male, while three were female. Two occupied junior management positions, six were in middle management and one in senior management. Three respondents had 1-5 years management experience, two had 6-10 years experience, and four had 10-20 years experience.

Sixteen respondents indicated that HIV/AIDS is not a side issue in the workplace. Eleven of these respondents were male and five were female. Two occupied junior management levels, nine were in middle management and four were in senior management. Two of the respondents had 1-5 years management experience, five had 6-10 years, six had 10-20 years, and three had more than 20 years management experience.

8.3.18 Encouragement of discussion on HIV/AIDS



Eighteen of the respondents indicated that management of their department encourages discussion on HIV/AIDS issues. Ten of these respondents were male and eight were female. Four were in junior management, 11 in middle management and three in senior management. Four respondents had 1-5 years management experience, four had 6-10 years experience, seven had 10-20 years experience while three had more than 20 years experience.

Seven respondents indicated that they do not encourage discussions on HIV/AIDS in their departments. All seven of the respondents were male. One respondent is in junior management, four are in middle management and two are in senior management. One has 1-5 years management experience, three have 6-10 years experience and three have 10-20 years management experience.

Correlations were made to determine the participation of management with the salary level of management. A positive correlation coefficient of 0.209 was found. It can therefore be interpreted that as salary level increases the level of participation decreases.

Participation in events correlated with the encouragement of employees. A negative correlation coefficient of -0.279 was found between management participation in events and staff encouragement to participate and reveal their HIV status. It can be

interpreted that as management participation in events increase, the need for staff encouragement will decrease. There is a definite relationship between lack of interest (as defined by management participation) and HIV programme success (i.e. a lesser need for staff encouragement).

A negative correlation coefficient of -0.137 was found between the participation of managers in events and participation on the Departmental HIV/AIDS Committee. A definite relationship exists between lack of interest (as defined by management participation) and their level of participation on departmental structures i.e. Departmental HIV/AIDS Committee.

A correlation coefficient of -0.087 was found between managements' participation in events and the age of managers. It was found that the younger managers are, the more they participated in events

9. DISCUSSION

The majority of managers (88%) did know their HIV status. Similarly the majority did not know the prevalence of HIV in the workplace.

Almost a third of them believed or did not know whether HIV is more prevalent among the unemployed. Almost a third (32%) believed or did not know whether poor people are more likely to contract HIV than healthy people. The majority believed that HIV/AIDS are one and the same.

However, the overwhelming majority (96%) knew that employees are not legally compelled to reveal their HIV status. The majority (92%) also knew their HIV positive employees should be treated in the same manner as all other employees. Similarly the majority (16%) indicated that employees cannot be legally dismissed for being HIV positive. All managers indicated that an employee cannot be turned down for employment based on a positive HIV status. The majority (88%) responded that it cannot be cured. Of concern is that 20% believed that HIV can be transmitted by mosquitoes.

Most managers (88%) 22 knew their HIV status with the exception 12% (3) middle managers (salary level 11-12) that did not know their HIV status. Two junior managers (salary level 9-10) believed that HIV/AIDS is most prevalent amongst unemployed people. One senior manager and six middle managers believed that poor people are more likely to contract HIV/AIDS than healthy people. One respondent indicated that it is not possible in this instance to draw comparison between 'poor people' and 'healthy people' as these are not opposites. One senior manager and one middle manager believed that HIV/AIDS is one and the same matter. All managers with the exception of one middle manager who had more than 20 years of management experience, indicated that an employee who becomes HIV positive is legally compelled to reveal his/her HIV status. One senior manager and one middle manager, both males, responded that HIV positive employees should not enjoy the same rights as other employees. One senior manager indicated that an employee can be dismissed for being HIV positive. One senior manager, male, believed that HIV/AIDS can be cured. Eight managers indicate that all employees are not equally threatened by HIV.

Although most managers knew the basic facts about HIV/AIDS, some inaccurate responses are of concern as it could hold serious implications e.g. legal implications for the Department of Agriculture: Western Cape for dismissal of an employee for being HIV positive, or declining an offer of employment based on a positive HIV status.

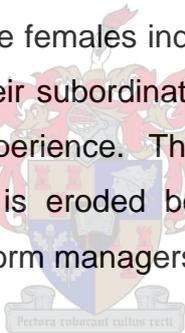
Management Participation

Only three females, (12%) indicated that they are members of the Departmental HIV&AIDS Committee. Only 20% of the managers' subordinates are part of the Departmental HIV/AIDS Committee. The majority is from the senior management level. Of concern is that (72%) of their subordinates do not participate on this committee. It is of further concern that the majority are middle managers with 10-20 years of management experience. The literature indicates that leadership commitment and attention i.e. a positive attitude are key success factors in the success of workplace programmes. The middle managers are at an operational level and are suppose to take the lead in this. According to Unilever, 2000 employees need to see concrete commitment from managers. Mutual trust and commitment are key ingredients to create an atmosphere conducive to VCT and the

disclosure of HIV status. Barrett et al, takes this even further by stating that commitment and support is required from all managers.

Although 72% indicated that they attended one or more information and awareness-raising sessions, a fair amount (28%) attended no such session. Of those who did not attend it is concerning to note that once again managers who have more than 10 years management experience. According to Taylor et al, for workplace programmes to be successful, personal commitment from managers is necessary.

More than (66%) respondents indicated that they encourage their staff to participate in VCT campaigns. Again those who do not encourage their staff to attend were managers with 10-20 years of experience. The largest group (60%) provides assistance and support to HIV/AIDS Organisations. Once again more females responded yes and those who did not, were managers with more than 20 years experience. Few (12%) of the respondents indicated that their employees disclosed their HIV status to him or her. More females indicated this than males. Once again the majority, who indicated that their subordinates did not disclose their status, are the managers with 10-20 years experience. The findings of the Siyam'kela Project note that employees' confidence is eroded because of insufficient support and therefore they are more likely to inform managers of the HIV status.



More than half (56%) of management indicated that they discussed this topic at management meetings. It is interesting to note that the majority who discuss this at work are those managers with 10-20 years experience. Those who did not discuss this topic at the meetings were more evenly spread. A large number (36%) indicated that they have condom distribution facilities. Again they are from the middle management echelon with 10-20 years experience. Those who did not discuss this at management meetings are evenly distributed, and of note are that the females are the majority of this group.

More than half of the respondents (52%) indicated that they had participated. More than half of this group participated in all three activities. Two thirds are males and they are mostly in the middle management. An equal number of respondents participated in one or two activities.

The male respondents who were not aware of the HIV/AIDS policy were both from middle management and one had 6-10 years and the other 10-20 years experience.

The majority (72%) of the managers indicated that they are responsible for the workplace Policy and Programme. It was interesting to note that all but one senior manager formed part of this group and that those managers with 10-20 years experience formed the biggest part. It could be that they wanted to keep up appearances as noted within the Siyam'kela Project.

Few respondents (35%) indicated that HRM is responsible for the HIV/AIDS program. Interesting to note is that one of these was from the senior manager group. A fair number (16%) did not know who the responsibility is vested in.

The majority of the respondents (92%) indicated that they are committed to the program. Two males with six to ten years experience differed.

However, 40% of the respondents feel that this should be part of their performance agreement. Furthermore, 92% of them indicated that they were aware of the Public Service Regulations. In these regulations it stipulated that HIV/AIDS should be part of the agreement. Once again middle management leads the way in disagreeing with this being part of the performance agreement. Of concern is that two of the five respondents from SMS do not agree to this. This is consistent with the Siyam'kela Project findings, that ignorance and lack of interest by managers cause them to shift the responsibility to Human Resources Management.

The majority, (72%) of managers feels that HIV/AIDS should form part of the departmental strategic objectives. All the female participants concurred with this statement. Interesting to note is that 25% gave no response. This could be attributed to either lack of knowledge or lack of interest. Once again, the largest group of respondents who did not respond was from the middle management with 10 - 20 years experience.

Similarly, a fair amount (36%) indicated that it should be a side issue. Again the biggest group was from middle management with 10-20 years experience.

The majority, (72%) indicated that they encouraged discussions around HIV/AIDS. It is again interesting to note that the biggest group had 10-20 years of experience.

However, a fair number (35%) indicated that they do not encourage discussions. The biggest grouping here is middle management with 10-20 years of experience.

It is worth noting that the middle managers with the most experience gave conflicting responses at times. Yet, it is evident that they are the respondents who mostly displayed ignorance of HIV/AIDS, and participated, the least in any related activities.

Lastly, it is worth noting that on reviewing the attendance registers for all HIV/AIDS related activities, events, information session and VCT campaigns held in the department since 2004 to 2006, a different picture emerges. During these period only eight managers attended information and awareness sessions. Four were junior managers on salary level 9-10, two middle managers on salary level 11-12 and two on senior managers on salary level 13-15. Thirteen managers participated in VCT campaigns, seven junior managers, six middle managers and three senior managers.



10. CONCLUSION

“AIDS is not what you are, but what you do” (Sella-Rolando, 1993).

The majority of respondents were 40 years and older and fell within the middle management level on salary level 11-12. The overall knowledge of HIV/AIDS was good. However, legal ramifications in the workplaces can occur if employees are compelled to reveal their HIV status, are not treated fairly like other employees, or have to use separate facilities, as the responses of a few respondents indicated the contrary in this regard.

Other concerns were that AIDS and HIV are same and that AIDS can be cured.

Seventy-two percent of managers participate in the Departmental HIV/AIDS Committee, whilst 28% do not participate. Interestingly these respondents are long serving employees at middle management level. This is concerning as middle

managers operate at the very coalface/operational level where the greatest impact can be made.

Condom distribution is not available at 20% of the service points of the Department and needs to be corrected.

Some inconsistencies in responses from especially the middle managers were found. They claim to be familiar with the Departmental HIV/AIDS Workplace Policy and Programmes and the expectations of the section 14 of the Public Service Regulations. However they do not believe that HIV/AIDS should be included in their performance agreements

The prevalence of HIV/AIDS in the Department is not known and the percentage of employees who tested positive during VCT campaigns has to be conveyed to staff.

The female respondents provided more accurate responses and participated in the Departmental HIV/AIDS Committee.

The responses from middle managers, especially those who are long-serving employees were less accurate which is concerning as they are ones who has to take the lead on implementation of the HIV/AIDS programmes in the workplace.

Whilst 72% of respondents indicated involvement in HIV/AIDS awareness and information session, the attendance registers for the period 2004-2006 seem to suggest differently.

11. RECOMMENDATIONS

The previous studies conducted revealed a link between attitude of managers and the success of an organisation's HIV/AIDS workplace programme. Although attitude of managers were specifically referred to in previous studies, this was seen as synonymous with the lack of interest of managers in HIV/AIDS issues in the workplace. Many of these studies highlighted the importance of personal commitment and attention of senior managers in the successful implementation of such programme.

The findings of this study are similar to those previously conducted.

The recommendations are made to improve management participation, basic knowledge on HIV/AIDS and ultimately a successful workplace policy and workplace programme. These recommendations are made based on the findings of the study.

Management Participation

The following recommendations are made to enhance management interest/participation in the HIV/AIDS Workplace Policy and programmes:

- Inclusion of HIV/AIDS in the job descriptions (inclusion of HIV/AIDS standards) of managers so that this is accepted as part of the employment offer.
- The inclusion of the managing of HIV/AIDS in the workplace as one of the key responsibilities in the performance agreement of every manager who is responsible for other employees.
- HIV/AIDS as topic should form part of the orientation and induction of managers.
- HIV/AIDS is included in the Departmental strategic plan. However managers should inculcate this into their areas of service delivery to clients.
- Middle managers are at the more direct coalface/operational level with employees and therefore greater focus should be place on this level of management with regards to training and awareness- raising.
- The role and responsibilities of managers in the implementation of the HIV/AIDS workplace programme must be clearly outlines with greater emphasis on the middle managers.

Basic knowledge of HIV/AIDS

The managers overall knowledge of HIV/AIDS was good. However a few lacked crucial knowledge that if not addressed will hold serious legal implications for the Department e.g. withdrawal of and employment offer to an employees who is HIV positive, or compelling and employee to reveal his/her HIV status.

- Basic facts on HIV/AIDS should be conveyed regularly including the legal implications.

- Make known the results of VCT campaigns e.g. the percentage of employees testing positive for the HIV, bringing home that HIV/AIDS is a reality in the Department and this will enhance awareness and HIV/AIDS as a reality in the Department. .
- Information and awareness - raising should include activities that also focuses on the agricultural sector, thus increasing interest.
- Conduct impact studies of HIV/AIDS on the Department so that the effect on the Department, the sector, human resources and service delivery can be understood if not managed effectively.
- There is a need to familiarize managers with particular reference to middle managers regarding the content of the HIV/AIDS workplace policy and programme.
- These findings be shared at the Provincial Employee AIDS and Human Capital Development forums where all the provincial state departments are represented. It will be proposed that training on AIDS standards be included in the orientation of all management.



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