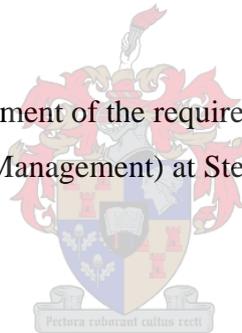


**The Impact of Human Immunodeficiency Virus & Acquired  
Immunodeficiency Syndrome in the Department of Agriculture: Western  
Cape: A Human Resource Management Planning Strategy**

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



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December 2005

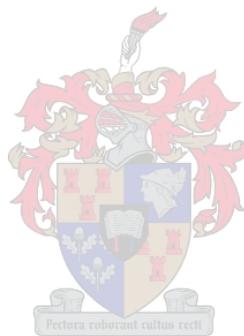
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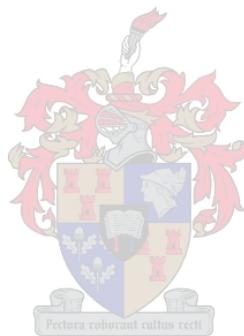
## **SUMMARY**

This briefing describes ways in which the human resource management strategy of the Department of Agriculture: Western Cape can be prioritised in terms of future human resource planning in the face of HIV and AIDS in the agricultural sector; how the acquiring of scarce skills can be planned and retained; and how existing skills can be optimally utilised in order to enhance service delivery within the Department. The research model used is the AIM-B model – taking into account factors such as training and development, recruitment and retention of scarce skills.



## OPSOMMING

Hierdie voorlegging verduidelik die maniere waarop die menslike hulpbronbestuurstrategie van die Wes-Kaapse Departement Landbou geprioritiseer kan word in terme van beplanning rondom sake soos MIV en VIGS in die landbousektor, die verkryging en behoud van skaars vaardighede, sowel as die optimale benutting van bestaande vaardighede om dienslewering binne die Departement te bevorder. Die navorsingsmodel wat gebruik is, die AIM-B model, neem faktore soos opleiding en ontwikkeling, werwing en die behoud van skaars vaardighede in gedagte.



## **KEY WORDS**

Human Immuno Deficiency Virus (HIV)

Acquired Immuno Deficiency Syndrome (AIDS)

Human Resource Management Strategy

Transformation

Scarce skills

Skilled and unskilled workers

KAP (Knowledge, Attitudes and Perception) studies

AIM-model

Institutional Audit

Voluntary Counselling and Testing (VCT)

Tuberculosis (TB)

Mainstreaming



# 1. INTRODUCTION

The most essential of all inputs into any organisation is undoubtedly the Human Resource element. Employees within an organisation control the effectiveness of the technological and capital element for input. For most managers, the staff component is often the most difficult to manage and optimize out of all other inputs. Organisations therefore spend a lot of time and money to ensure that they utilise their human resources effectively – staff selection; training; development programmes; motivation schemes; remuneration; etc. are examples of the lengths that management will go in order to utilise their workforce optimally.

According to SABCOHA spokesperson Leighton McDonald “South African businesses are already being confronted by the dire consequences of HIV and AIDS and the response of business to the pandemic urgently need to be speeded up.” (HR Focus).

As the disease depletes the labour force - especially the high-skilled sector, the potential for economic growth is reduced potentially by up to 2% per annum. The latest Bureau for Economic Research scenario indicates GDP 5.7% lower by 2015 as a result of AIDS (Metropolitan Life, 1996, p36).



The main aim of this paper is to provide information on the human resource management planning for the **Department of Agriculture: Western Cape** taking into account the challenges presented by HIV & AIDS in the workplace. The paper is structured as follows:

*Section 1* will outline the department's strategic approach, spelling out its vision; mission; objectives; and approach in combating the effects of the pandemic. There are further discussions in the workplace around whether to include a holistic health and wellness management strategy for staff and what the implications of the wellness programme should entail. A KAP study will be used for the basis to ascertain the knowledge base of all staff and this will outline the future training and awareness raising amongst staff members.

*In section 2*, I will outline the job analysis of scarce skills within the department and how this will assist in the institutional audit over the next 5-10 years. This audit will serve as a guide to the department ensuring that its most essential input in the organisation is ensured.

Finally, *Section 3* will include an institutional audit assessing the human resource supply and demands within the department. It will identify the gaps; as well as plan, monitor and evaluate the strategy for the institutional audit.

## 2. OVERVIEW OF THE WESTERN CAPE

The Western Cape has a 10.6% share of the national population, translating to a total of 4 524 335 people. 3 918 414.80 (88%) of the population resides within urban areas, whereas 605 920.20 (12%) resides in non-urban areas (Census, 2001). This indicates that the majority of the province's population is urbanized.

### 2.1 Age Distribution

**Table 1**

	Number	Percentage
85+	15 911	0.35
80-84	24 739	0.55
75-79	41 311	0.91
70-74	64 379	1.42
65-69	87 751	1.94
60-64	118 892	2.63
55-59	142 363	3.15
50-54	190 140	4.2
45-49	237 556	5.3
40-44	307 400	6.8
35-39	361 483	7.10
30-34	392 828	8.7
25-29	425 802	9.4
20-24	430 833	9.5
15-19	446 245	9.9
10-14	421 952	9.33
05-09	409 207	9.04
00-04	405 542	8.96
<b>TOTAL</b>	<b>4 524 335</b>	<b>100.0</b>

From the table above it is clear that approximately 37.23% of the population is younger than 20 years, 56.78% is between the ages of 20 and 64, whereas the rest 6.07% is older than 65.

## 2.2 Gender

It is clear from the table below that the female section of the population is slightly in the majority.

### Gender Distribution in the Western Cape

**Table 2**

<b>Male</b>	<b>Female</b>	<b>Total</b>
<b>2 192 321</b>	<b>2 332 014</b>	<b>4 524 335</b>
<b>48.9%</b>	<b>51.1%</b>	<b>100%</b>

## 2.3 Racial Distribution

The table below shows the Coloured population to be vastly in the majority, followed by the African and White populations comprising significant numbers.



### Racial Distribution in the Western Cape

**Table 3**

<b>RACIAL GROUP</b>	<b>NUMBER</b>	<b>PERCENTAGE</b>
Coloured	2 438 976	53.9
Indian	45 030	1.0
African	1 207 429	26.7
Whites	832 901	18.4

## 2.4 HIV Incidence

The rising incidence of HIV and AIDS in the country constitutes a great threat to the South African labour force. Currently an estimated 12.4% of the total Western Cape population is HIV positive and this is coupled with a definite rise in tuberculosis (TB) in persons who are HIV positive. According to the National HIV and Antenatal Sero-Prevalence Survey in South Africa of 2002, in 2002 26.5% of all antenatal mothers tested HIV positive. Although the statistics for the Western Cape remains lower than the other provinces there is concern as over a three-year period there has been a sharp increase from 8.7% - 12.4%.

Below is a table, which reflects 2000 - 2002 National HIV prevalence statistics for women attending antenatal Clinics per Province.

### HIV Prevalence of Women attending Antenatal Clinics in the Western Cape

**Table 4**

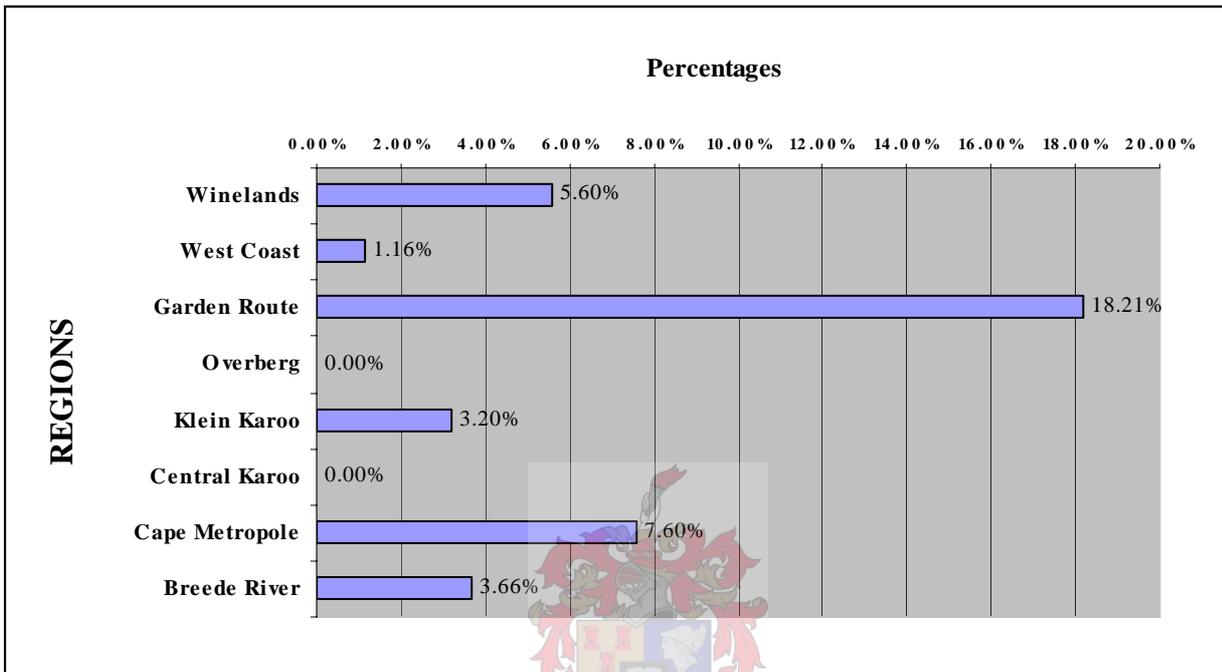
<b>PROVINCE</b>	<b>ESTIMATED HIV+95% CI 2000</b>	<b>ESTIMATED HIV+ 95%CI 2001</b>	<b>ESTIMATED HIV+ 95%CI 2002</b>
Kwa Zulu Natal	36.2 (33.4 – 39.0)	33.5 (30.6 – 36.4)	36.5 (33.8 – 39.2)
Gauteng	29.4 (27.2 – 31.5)	29.8 (27.5 – 32.1)	31.6 (29.7 – 33.6)
Free State	27.9 (24.6 - 31.3)	30.1 (26.5 – 33.7)	28.8 (26.3 – 31.2)
Mpumalanga	29.7 (25.9 – 33.6)	29.2 (25.6 – 32.8)	28.6 (25.3 – 31.8)
North West	22.9 (20.1 – 25.7)	25.2 (21.9 – 28.6)	26.2 (23.1 – 29.4)
Eastern Province	20.2 (17.2 - 23.1)	21.7 (19.0 – 24.4)	23.6 (21.1 – 26.1)
Limpopo	13.2 (11.7 – 14.8)	14.5 (12.2 – 16.9)	15.6 (13.2 – 17.9)
Northern Cape	11.2 (8.5 – 13.8)	15.9 (10.1 – 21.6)	15.1 (11.7 – 18.6)
Western Cape	8.7 (6.0 – 11.4)	8.6 (5.8 – 11.5)	12.4 (8.8 – 15.9)
<b>National</b>	<b>24.5 (23.4 – 25.6)</b>	<b>24.8 (23.6 – 26.1)</b>	<b>26.5 (25.5 – 27.6)</b>

It can be noted that for the Western Cape Province HIV incidence constitutes an estimated 12.4% of the National HIV prevalence.

Below is another figure that shows the prevalence of HIV in the Western Cape for Antenatal Clinic attendance per region in 1997.

**Figure 1 : HIV prevalence for Antenatal Clinic attendees by region**

Source : Western Cape Department of Social Services, HIV/AIDS Policy Document, 1997



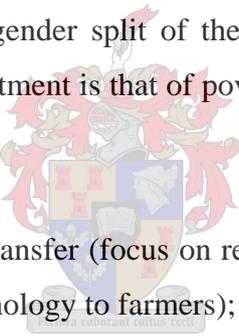
## 2.5 Economic Overview

Agriculture, forestry and fishing is not only the most important sector in this region, but has registered by far the highest percentage growth in its contribution to the GRP of the region over this period of time, while the other sectors have experienced much less growth, and all more or less at the same rate. The total output of the primary agricultural sector in the Western Cape grew from R10.4 billion in 1999 to R11, 8 billion in 2001. This is an increase of 13,5% over the two-year period. This growth trend has been consistent since the political transformation of 1994. However, the sectoral statistics hide the considerable structural change that took place between the industries and within the industries of the agricultural sector. The main industries include fruit (R2, 4bn), winter grain (1,8bn), white meat (R1, 6bn), viticulture (R1, 6bn) and vegetables (1,4bn). Furthermore, over the period 1996 -2001 the agricultural sector gained 32 00 permanent opportunities. The contribution of the sector to the overall economy is much greater than is suggested by the contribution to Gross Geographic Profit. (Department of Agriculture, *Annual Report, 2004-2006*)

The role of the Department of Agriculture in the economy is a function of backward and forward linkages to other sectors. The major challenge for the department has to do with food security for the inhabitants of the province as well as mobilizing around the **Human Immuno Deficiency Virus**. It is against this backdrop that the research study is done to get an understanding of the impact of HIV in the Department of Agriculture and ensuring that the human resource of the department is optimally ensured.

### **3. BACKGROUND OF THE DEPARTMENT OF AGRICULTURE: WESTERN CAPE**

The study involves the Provincial Department of Agriculture which is a government department located in the Western Cape province of South Africa. The staff compliment is 782 where 70% of the staff is male and 30% female. The agricultural college is attached to the department where it churns out future agriculturalist. The current enrolment number of the students is 300 per annum. The gender split of the students is 90% male and 10% female. The core business of the Department is that of poverty alleviation and food security through a set of policies, for example:

- 
- Technology Development & Transfer (focus on research, development and transfer of appropriate agricultural technology to farmers);
  - Agricultural engineering (promote sustainable utilisation of natural agricultural resources);
  - Veterinary Services (promotes animal production by minimising animal health risks);
  - Agricultural Training (provides training and creates opportunities for practicing and prospective farmers (commercial, emergent and subsistence);
  - Farmer settlement (provides agricultural infrastructure projecting rural communities and facilitates establishment of new farmers).

The Western Cape Department of Agriculture's strategy is focussed on servicing the needs of emerging black farmers following various land reform initiatives. This will effectively double the number of farmers in the Western Cape over the next 5-6 years and will require a significant increase in the department's resources. These funds will be channelled into

new initiatives regarding rural development, farm worker development, agri-businesses, water resource development, training, enhanced research and the extension of services. The latter remains the most crucial element of the agricultural development process. The capacity of staff – not only the number of field workers – must therefore reflect this.

Although the Western Cape Department of Agriculture is committed to the implementation of employment equity, the challenge of meeting transformation targets remains huge. For this reason, the department has set in place measures to redress this imbalance. These include the implementation of internships, learnerships and YPP (Young Professional Persons) mentoring programmes. These are aimed at promoting development and allowing for the recruitment of people from the identified groups to fill vacant posts.

A large percentage of the staff are unskilled and a small percentage professionals and highly skilled workers. The professional categories ranges from veterinary, agricultural scientist to agricultural economist. White males due to the apartheid educational policies hold these scarce skill occupations. According to Van der Walt, 2000 “the position with regard to skilled and unskilled workers in South Africa is very similar to that in other developing countries: where there is an oversupply of unskilled workers and a shortage of skilled workers. For the department to move ahead strategically a structured human resource plan should be put in place to ensure adequate manpower.

#### **4. LITERTURE REVIEW**

Literature reviews make the central issues that shape the research explicit and clear. It therefore serves as the very framework that will guide the research project, allowing for coherence and the establishment of boundaries. The literature review is therefore crucial in formulating the research framework.

The importance of a literature review, citing Christensen, can be outlined as follows: “(It) will tell you whether the problem you have identified has already been researched. If it has, you should either revise the problem in light of the experimental results or look for another problem, unless there is a good reason to replicate the study” (Christensen, 2004, p.93).

The envisaged study of ‘the impact of HIV & AIDS in the Department of Agriculture’ looks specifically at a government department whose priority it is to ensure food security for all South Africans.

In Metropolitan Life/Institute for Future Research/Sunter, C., *The High Road: Where are we now?* Tafelberg, Human & Rousseau, Cape Town, 1996. The writer gives a forecast of what the actual impact of HIV would be for the economy in general and this is devastating.

In Hughes, M ((2003) *HIV & AIDS in the business sector with reference to Eskom.* University of Stellenbosch. Cape Town. The writer gives an overview of the national and international perspectives of HIV & AIDS. He goes on further giving a response to the business world how to react to the epidemic.

Van der Walt, I.C (2000) *The impact of HIV/AIDS on the South African Labour Market,* University of Stellenbosch, Cape Town. The main objective of the study is to explore the impact of HIV & AIDS. Other labour market problems are also seen as contributing to further impacting on epidemic. These labour market issues are unemployment, productivity and the shortage of skills.

Oni, S.A., Obi, C.L., Okorie, A, Thabede, D and Jordan (2002) *Economic impact of HIV/AIDS on Rural Households, Small Holder Agricultural Production and Orphans in the Limpopo Province of South Africa,* University of Cape Town, Cape Town.

This paper looks at testing six specific hypothesizes, namely income, savings and borrowing, expenditure, agricultural productivity, gender prevalence and orphanage care on how it affects HIV & AIDS affected households. It is a provincial study of the Limpopo province in South Africa. The province is highly rural a high mortality rate that can be attributed to medical facilities in the province. What is striking of the province the population spread is relatively a youthful population.

Bill Rau (2002) *Workplace HIV/AIDS programmes: An Action Guide for Managers* cites that HIV and AIDS is not just a public health issue but a workplace and developmental challenge and the source is creating widespread insecurity. The effects of AIDS include loss of earnings; loss of skills; reduced productivity; and the loss of markets as the consumer base withered away. “Concern about the disease and its impact on companies is

now as widespread as the disease itself. Experiences from East and Southern Africa – where the epidemic is most advanced – demonstrates that HIV & AIDS affects employees at all levels, that it affects company profits and that employees react positively to workplace prevention and care programs” (Rau, 2002, p.8).

## 5. RESEARCH MODELS/MEASURING INSTRUMENTS

There are three different types of measuring instruments for measuring the impact of HIV in the workplace:

1. Conducting an HIV prevalence survey, this involves the overall percentage of HIV infection in a given population. (This method has its drawbacks as it challenges the confidentiality issue as information can leak out.)
2. The second method can be utilizing the HIV prevalence rate of the country/province and gauging the economic impact.
3. The last method is identifying and tracking company indicators tracking human resource and medical records and monitoring trends over time.

For this paper the second and the third approached will be utilised in conjunction with the AIM-B model. There are two versions of the model known as AIM-B designed for business by The Futures Group and the Global Business Council on HIV and AIDS.

The research model used assessing the impact of HIV and AIDS in the department will be the AIM-B model. Secondly, I will explain why this should be considered as a cost saving benefit tool to use in assessing the impact of HIV and AIDS.

**AIM-B** is an economic and demographic model designed to help managers analyse how HIV and AIDS is affecting their businesses and project how it will affect them in the future. The tool also serves as a guide for assessing the monetary impact if no programmes for HIV is put in place. The advantage and benefits of the AIM-B model is the utilization of strategic planning processes to improve health and well being of communities. The process affectively integrates both quantitative and qualitative data for decision-making.

“This simplified on-line version of AIM-B estimates the main direct costs of HIV and AIDS in health, recruitment and benefit costs. It does not estimate the epidemic's affect on productivity, labour relations, workforce morale or absenteeism. For a more thorough analysis of HIV and AIDS' current and future impact is available from [The Futures Group](#), who also advise businesses on how to analyse and manage the risks of HIV/AIDS, and to launch effective, sustainable prevention and care programmes” (Accessed on 10 August, 2004).

## 6. HIV PROJECTION

**Table 5**

**Metropolitan-Doyle summary of HIV/Aids projections**

	<b>2000</b>	<b>2005</b>	<b>2010</b>
Percentage of SA workforce which is HIV+	13.5%	20%	22.5%
Percentage of SA workforce which is AIDS sick	0.5%	1.65%	2.74%
New AIDS cases per annum	191 000	397 000	541 000
Number of AIDS orphans	153 000	1 000 000	2 000 000
Life expectancy of SA population: female	52 years	43 years	37 years
Life expectancy of SA population: male	49 years	43 years	38 years

It is evident from table 5 that when implementing any strategic human resource in an organisation the effect of HIV should be taken into account. It is estimated that by the year 2010 22,5% of the workforce would be HIV+ and that 2,74% of the workforce having AIDS.

Already increased absenteeism is on the rise with workers staying at home to either care for sick family members, attend funerals or recuperating from opportunistic infections.

Another contributing factor in the Western Cape is the high prevalence rate of TB. If this is not brought under control it could aggravate the problem. It would thus be important to include wellness management in any human resource strategy. Programmes to prevent secondary infections such as TB and pneumonia should be urgently implemented.

## 7. ANALYSIS/RESULTS

### 7.1 The impact on the workforce: Department of Agriculture - Western Cape

The staff compliment is 782 and as previously indicated 235 (30%) is female and 547 (70%) are male.

#### 7.1.1 Responses

- 782 are in the group to be analysed
- R116000000 is the average annual salary of this group
- 19.4 is the percentage of the workforce which is estimated is infected
- R50000 is the total cost of Recruiting a new worker
- R7000 is the total cost of Training a new worker
- R7500 is the total cost of Death benefits
- R15000 is the additional cost of health care per AIDS case

#### 7.1.2 Calculation of HIV Infection and Annual Number of New AIDS cases

- Estimated number of HIV+ employees 152
- Estimated number of employees presenting symptoms of AIDS per year 15
- Cost of Health Care R450 000
- Productivity Losses R870 000
- Cost of Death Benefits R112 500
- Cost of Training and Recruitment R855 000

**7.2 Annual cost to the department of agriculture R2 287 500.00**

### 7.3 Discussion

On analysing the above, it is evident that the effect AIDS will have on the core business of the Department of Agriculture will be adverse. Firstly, the operational cost will increase dramatically and the cost of health care will increase. It is estimated that one-fifth of the staff compliment is HIV positive and this relates to 152 in number of persons with HIV. This will have adverse effects on the moral, absenteeism and productivity of the organization and these factors will continue to have an impact of the delivery of services in

the Department of Agriculture: Western Cape. Citing UNAIDS the life expectancy of persons with HIV is currently 59 years. With the onset of the disease person's life expectancy would be reduced between 39-49 years. Cost for health and death benefits would escalate by 300%. The cost for training would also escalate.

#### **7.4 Recruitment cost**

Recruitment in the Department of Agriculture over the past four years has been attracting the youth (20–35) years. The disease would have the greatest impact on the young adults who are in their productive years of their lives. As the HIV+ workers becomes sick temporary staff would be needed or the recruitment of new staff. For entry-level post normally the Department would normally first advertise internally and then draw from the database of the excess staff within Government. Therefore, cost for advertising in local newspapers would be reduced substantially. Agency and administration fees would be minimized. With the entry post normally preference is given to school leavers who can be trained to do various administrative roles. But for the more skilled occupational categories such as economist, vets, engineers and agricultural scientist the criteria's for entry is different, as they all need to have minimal qualifications in their specific occupations.

Based on the AIM calculation it is estimated that 152 employees will be HIV positive. This represents 20% of the age group 20 – 29 and 5% of the total staff. It is further estimated that 3 employees will be presenting the symptoms of AIDS per year. The cost of health care was previously R15 000 but will increase to R112 500.00. Here death benefits would include time off for other staff members to attend the funeral, memorial services and just time spend arranging some of the mentioned events. Productivity losses would cost R870 000. 00. This would be both direct and indirect productivity losses.

This would direct impact on taxpayer's monies, as the Department is a government organization that gets its revenue from taxes. For government as a whole programme of service delivery is needed in the communities. Therefore, great focus should be put on ensuring a healthy workforce of its employees. It would also have adverse spill over effect on other government departments in the Western Cape.

## **8. AIDS IMPACT MODEL**

### **8.1 Cost saving devises for the department of agriculture**

In order to avoid huge cost spent on recruitment of new staff, death benefits and health care serious interventions should be made with regard to prevention of the further spread of the disease. The Department of Agriculture: Western Cape should have the following four elements in their programme:

### **8.2 PREVENTION STRATEGY**

A Prevention strategy that includes awareness raising among the staff and also their families. It would be futile if only the staff members benefit from the awareness raising but not their partners or their children. Therefore the Department should venture on an integrated approach.

The greater farming community should also be involved. This implies by not just focusing on the internal staff of the Department of Agriculture but also on their stakeholder in the broader farming community (farmers, farmworkers and their families). The prevention strategy should include awareness raising on STI and TB infections and those at risk of STI infection minimize their risk of HIV infection. The prevention strategy should include services such as prevention, behaviour change, health promotion, food security and Voluntary Counselling and Testing.

### **8.3 A WELLNESS MANAGEMENT STRATEGY**

A broad approach should be implemented and not just focussing on HIV solely but integrate health and wellness issues for the workers. A health and wellness programme could continue to address issues of HIV and AIDS but also include transversal issues such as disability, gender, disease management (in occupational and non-occupational categories) and also the implementation of an Employee Assistance programme (counselling).

HIV and AIDS will stay a challenge for the Agricultural community but the overall wellness of the workers should be emphasised. There is a critical need to educate those who control resources so that low-income earning employees have access to critical health

services in the workplace to manage diseases, silent killers such as hypertension, diabetes, etc.

#### **8.4 MANAGEMENT STRATEGIES**

Management strategies to deal with the direct and indirect cost of HIV and AIDS is crucial as this will give managers a broader understanding how resources should be allocated and how through proper resource allocations we can introduce an integrated approach and not work in silo's.

The first step for the proper management would be to include everyone in the strategy (unions, management, supervisors and team leaders, health care workers from other government departments, peer educators and employees). Reviving the HIV and AIDS committee and modifying all managers and committee members job descriptions to include roles relating to HIV and AIDS responsibilities. A holistic approach should be noted by including the families of staff members into the awareness programmes.

Management, unions and the committee members should be held accountable and responsible for regular feedback and also serves as an advisory committee. They should also be able to understand the adverse effect the epidemic especially in the workplace. Supporting the communities the workers come from would also help the organisation. By supporting the communities it would have a dualistic effect in the sense that the children and other unemployed adults would be made aware and also their peers.

A periodic impact assessment should be done to ensure short and long term planning for both budgetary and Human Resource related issues. Budgetary aspects would include calculating direct and indirect cost of absenteeism and sick leave, medical cost, disability and ill health retirement, pension and dependent benefits and funeral cost. Human resource cost such as replacement recruitment, reduced productivity and training should not be excluded.

## **8.5 A PARTNERSHIP STRATEGY**

Partnerships will always be an important link in the management of HIV in the workplace. Partners have various links to other resources and expertise in the field and this expertise can aid in organisations where limited and scarce resources need to be utilised.

## **INSTITUTIONAL AUDIT**

The above strategies should be interlinked especially the prevention and wellness management programmes. These two programmes will form part of the total prevention and care programme.

The programme should be underpinned by:

- An impact assessment to determine the nature and the extent of the problem as it is estimated that 1/5 of the total staff will be presenting with HIV.

For the management of HIV and AIDS in the Department it would be essential that strategies should be put in place to address both direct and indirect costs associated with HIV and AIDS in the workplace.

## **MONITORING AND EVALUATION**

What has been lacking within the Department of Agriculture: Western Cape no proper monitoring and evaluation programme has been in place of HIV programmes has taken place.

All programmes should be gender sensitive. Although women form a small number of the staff complement at the Department, women are placed under pressure to the extent that they have little or no control over their sexual relationships – this thus places them at greater risks.

Both prevention and care programmes need to recognize gender differences and these programmes should include supporting gender equality in the workplace.

## **9. GAP ANALYSIS**

“The long term success of any organisation ultimately depends on having the right people in the right jobs at the right time” (Smit, 2002, p112).

What can be deduced from the above statement is that for any organisation to implement its strategic plans and objectives are to ensure the right people with the necessary competencies to do the job.

The staff compliment is relatively youthful population as 60% of the staff is in the age category 18-49. This group is particularly vulnerable in the sense that their literacy levels are lower. They consist of clerks, agriculture scientist, agricultural economist, veterinarians, other professionals and farm workers. The skills level of this group ranges from very little education to having a doctorate in science, economics and other agricultural fields. On analysing the staff skills levels a large percentage is illiterate or semi-literate. A small percentage of the staff is highly skilled. Their salary incomes ranges from R22 000 – R425 000. The largest numbers of the workers are at salary level 2. Various awareness and education programmes around HIV should be implemented, as this is the group at risk.

### **VETERINARIANS**

What is striking of this group is that large proportions are married; others are single or have a live-in partner. This group is a very conservative group. The cost of training/replacement in this group is extremely high. Veterinary spend seven years at university in getting their doctorate degrees and these group skills are scarce. It should also be noted that the Department of Agriculture considers this group of professionals a scarce skill. Firstly that there is only an estimate of 2900 qualified in South Africa and half of them working abroad. Secondly  $\frac{3}{4}$  of those working in South Africa are from the previously advantage group (white male).

The possibility of a high number of persons becoming ill in the long run would jeopardize the morale and impacts on productivity. The awarding of bursaries and implementation of learnerships would ensure that the existence of this group of professionals. Another problem is the retention of this group is the retention of the professional and here the organisation will have to award special packages other than salary to attract and retain the individuals e.g. overseas trips, further study bursaries, etc.

The literacy rate of this group is high and so are the salaries. Replacement and training cost of these individuals are great as a number on average has 10 years or more experience in

their specific fields. This would also be the group who is driving the organizational strategy. This group is extremely difficult to replace.

### **AGRICULTURAL SCIENTIST**

The second group can also be classified as the scarce skill group. These are the agricultural scientists.

They form the top 25% of the staff compliment. This group is currently scarce as their skills are sought after. A number of these posts are currently vacant and cannot be filled as few persons have the necessary qualifications and experience.

The literacy rate of this group is high and so are the salaries. Replacement and training cost of these individuals are great as a number on average has 10 years or more experience in their specific fields. This would also be the group who is driving the organizational strategy. This group is extremely difficult to replace.

This is also the critical post group where strategic decision-making about the organisation is derived from. If replacement of staff is difficult, programmes should be put in place to ensure retention and upward movement internally. The implementation of learnership programmes within the organisation is imperative. These programmes that are a work-based route to a qualification that includes on-the-job training, coaching and mentoring.

More than 60% uses condoms (male and female) frequently and this is supplied at work or obtained from clinics.

The knowledge about HIV & AIDS seems high, as they are aware of the disease, how it is transmitted and the effects thereof. This awareness stems from the media, programmes at work or newspapers.

### **AGRICULTURAL ECONOMIST**

The age group of the economist are 25-35 and they are mostly male. The literacy rate of this group is high and so are the salaries. Replacement and training cost of these individuals are great as a number on average has 10 years or more experience in their specific fields. This would also be the group who is driving the organizational strategy and they play a

major role in the planning the organisational strategy for the future. This group is extremely difficult to replace.

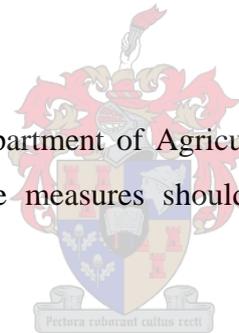
## **FARM WORKERS**

Farm workers form a large number of the staff establishment and 98% of them are male. There is also a racial break down that most are Coloured men.

This group of workers has indicated that they are aware of family members who is HIV positive or who have colleagues who have died of AIDS. Staff members are also eager to obtain more information about health matters and counselling.

The education level ranges from illiterate to semi-literate. Although the educational level of the farm workers is illiterate or semi-literate, skills they have acquired over the years are irreplaceable. The organisation is concerned that should a large number of the staff is infected with the virus.

The greatest challenge facing the Department of Agriculture is that of staff retention but given the HIV pandemic, alternative measures should be put in place to ensure the existence of effective service delivery.



## **SKILLED WORKERS**

A large number of this group is female. Their occupations classification ranges from Matric to having a Diploma or Degree. They are also considered a relative youthful population.

This group is also highly office bound. Replacement of the largest group, which are clerks, messengers, security and cleaners, will be relatively easy.

## **10. LESSONS TO BE LEARNED**

The HIV epidemic in South Africa is spreading rapidly and it is estimated that at least 12% of the total population is HIV+, and among adults the rate could be in the region of 20%. Aids will not solve the unemployment problem, because the medical and economic cost of

AIDS will be so high that they will seriously damage the economy long before the demographic effects of AIDS is felt.

The Department of Agriculture has a relatively youthful staff compliment and the following strategies should be in place for an effective HIV management programme. The following should be include in the management programme:

- A Prevention strategy (Peer education, workplace condom distribution, Voluntary Counselling and Testing, treatment of sexually transmitted diseases)
- A Wellness Management Strategy
- Partnership formation
- A monitoring and evaluation programme and
- An institutional audit

Other awareness programmes should be gender awareness topics should be included as men form the largest part of the employed population group in the department. Women should also attend these programmes, as they are most vulnerable.

The communication strategy for the implementation of the programmes is crucial and this can add value lead to the success or failure of a programme.

Engagement of management in discussions and action plans on promoting low-risk sexual behaviour amongst employees. One way to curb the HIV epidemic is to change the social culture of sexual activity that contributes to high-risk situations and behaviour. Monitoring of the departments practices to assure they are consistent with company policies, union/worker agreements and national and international legislation.

Informing workers that the company will assist employee support groups for people who are HIV-positive and employees who are caring for relatives and friends living with HIV and AIDS. Monitoring the prevalence of TB in the workplace would be one of the most important Wellness Management Strategies.

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