

GLOBAL HEALTH INITIATIVE

Private Sector Intervention Case Example

Building an HIV/AIDS workplace programme that addresses BMW South Africa's specific context

Case categories

Company: BMW Industry: Automotive Location: South Africa Programme: HIV/AIDS

Key questions

- Is an un-linked prevalence survey necessary to motivate the creation of a comprehensive HIV/AIDS programme?
- How can BMW extend this programme to suppliers and contractors when those companies are often much smaller than BMW?
- How can BMW SA increase the number of HIV+ employees enrolled in the insurance scheme's comprehensive treatment programme including anti-retrovirals.

Overview

Company

The BMW Group is a major global automotive company.

- The BMW Group focuses mainly on manufacturing and distributing automobiles and motorcycles. BMW has 23 production and assembly plants, 28 sales subsidiaries, a research and development network and worldwide market presence. In 2002 the company employed 101,395 people, its revenues were US\$ 44.3 billion and its net income was US\$ 2.1 billion.
- In South Africa, BMW has a corporate and wholesale administration unit as well as a manufacturing plant in Rosslyn, which manufactures approximately 55,000 cars per year, 80% of which are exported to the USA, Japan, Australia and New Zealand. Across the two locations, BMW employs approximately 3,000 employees and approximately 1,800 contractors. BMW indirectly employs workers through contracts with local suppliers as well as 56 dealers in South Africa.

Business Case

BMW South Africa established a targeted HIV/AIDS programme in order to define prevalence and economic impact. The mission of BMW South Africa's HIV/AIDS programme is to make a commitment to establishing a workplace driven for the benefit of associates, in the fight against HIV/AIDS.

- BMW South Africa implemented a targeted programme based on needs identified through their 2001 Knowledge, Attitude and Practice (KAP) survey. The rationale behind the intervention was based on a combination of a strong belief in the principles underlying corporate social responsibility and the potential economic impact that BMW might incur if HIV/AIDS were not addressed in the workplace.
- BMW South Africa's 2002 HIV/AIDS budget is US\$ 54 per employee per year.

Project Description

BMW South Africa developed its HIV/AIDS programme through a multi-stakeholder HIV/AIDS committee to address needs identified in its 2001 KAP assessment.

- BMW South Africa developed its HIV/AIDS policy in December 2000. The policy was
 developed by the HIV/AIDS committee and is chaired by the plant manager, who is a
 board member. It is also composed of representatives from the union, finance, human
 resources, medical services, management and other interested parties.
- BMW South Africa built its prevention and awareness programme around training, peer educators, condom distribution, the treatment of syndromic sexually transmitted infections (STIs), events, workshops, forums and industrial theatre.
- The voluntary counselling and testing (VCT) project was launched in 2002 based on the feedback from the 2001 KAP assessment. The service is available to all employees for free at workplace clinics. Since the VCT campaign was launched in 2002, an estimated 77% of employees have been tested.
- HIV+ employees gain access to BMW's comprehensive care, support and treatment programme, including access to Highly Active Anti-Retroviral Treatment (HAART).

Project Evaluation

BMW South Africa regularly reviews and adapts project performance.

The project has a full-time project 'champion,' with a non-medical background, a dedicated project budget, a multi-stakeholder HIV/AIDS committee, and reports regularly to the board. Activity measures are monitored on a monthly basis.

In the future, the programme hopes to have 100% of employees in the company knowing their status and to increase the involvement of the supplier and dealer network.

Business Case

Vision

The mission of the BMW South Africa HIV/AIDS programme is to make a profound and important commitment to establishing a workplace programme driven for the benefit of associates, in the fight against HIV/AIDS. The specific objectives of the programme include:

- To reduce the number of new infections
- To maintain a productive, viable, and sustainable workforce
- To reduce the impact of HIV/AIDS on all employees and their families
- To promote the concept of HIV/AIDS advocacy
- To ensure a safe working environment
- To develop support structures and 'safety' nets

Case for Action

BMW South Africa implemented a targeted programme based on needs identified through the KAP survey. This rationale behind the intervention was based on a combination of a strong belief in the principles underlying corporate social responsibility and the potential economic impact that BMW might incur if HIV/AIDS were not addressed in the workplace.

- BMW South Africa has not conducted a workplace-specific un-linked HIV sero-prevalence survey, but instead relies on more accurate estimates provided through their VCT programme. With a response rate of 65%, acknowledging a significant selection bias, the programme estimates a workplace prevalence of 6%.
- Although BMW South Africa tracks deaths in service and ill-health retirements, they
 did not use these statistics as a significant motivation behind the creation of
 their programme.
- In 2001, BMW South Africa conducted a KAP assessment with the purpose of identifying and structuring the next phase of its HIV/AIDS programme. The University of Pretoria's School of Health Systems and Public Health conducted the KAP assessment. The survey received responses from 432 employees and achieved a 74% response rate. The sample was distributed across four segments: hourly paid men (116), hourly paid women (101), salaried men (103) and salaried women (112). The results were later weighted to correct for differences between the respondents and workplace demographics. The findings are described in the executive summary of the KAP survey, which is available in the 'Documents' section of this case study. The study explored attitudes and practices and asked BMW employees what they would like the company to do in order to address the epidemic.
- BMW South Africa has not conducted an economic impact assessment describing
 the specific economic threats to BMW South Africa. Instead, BMW South Africa relies
 on their social commitment to their employees.

Financing

BMW South Africa's 2002 HIV/AIDS budget is US\$ 54 per employee per year or 0.01% of salary expenses.

- BMW South Africa's US\$ 161,000 2002 workplace budget, which corresponds to US\$ 54 per employee per year, is allocated to activities as follows: VCT programme promotion (10%); VCT and wellness programme medical expenses (30%); forums, events, and workshops (12%); awareness (8%); training and education (6%); external physician networking programme (2%); external promotion of HIV/AIDS programme (30%).
- BMW South Africa's 2002 budget is 2.7 times larger than its 2001 US\$ 60,000 HIV/AIDS programme budget.
- BMW South Africa's direct medical expenses, including Highly Active Anti-Retroviral
 Treatment (HAART), are provided through the externally administered health plan.
 BMW South Africa currently estimates that providing the HAART treatment to an
 employee costs an estimated US\$ 200 per month, and this cost is decreasing
 along with the price of drugs

Project Description

Policy

BMW South Africa developed its HIV/AIDS policy in December 2000.

- Non-discrimination: (1) employees will not be dismissed on the ground of their HIV status; (2) employees will undergo a medical exam before starting employment, but the exam does not include an HIV test and hiring decisions are based on the employees' physical ability to meet the requirements of the job.
- Confidentially and disclosure: (1) employees are not required to disclose status;
 (2) if status is disclosed, it cannot be disclosed to others without written consent;
 (3) In the 2001 KAP survey, 66% of employees believed that BMW South
 Africa would keep their status confidential; (4) if the medical staff with access to
 confidential medical information breaches the confidentiality policy, it is grounds for
 immediate dismissal; (5) physical and structural changes were made to the clinic
 facilities to increase confidentiality.
- Benefits: (1) more than 90% of employees participate in BMW South Africa's health insurance plan; (2) BMW South Africa supplies 60% of the cost of the insurance premiums for each participant; (3) all of the health plan's options provide coverage for HIV/AIDS treatment, including HAART, up to US\$ 2,500 per registered participant per year; (4) if the employee is not insured, but learns of his/her HIV+ status in the VCT campaign, the employee may immediately join the health plan without penalty or discrimination for HIV related medication (5) BMW's medical aid, disability, and group life insurance plans do not discriminate against HIV/AIDS status.
- III-health retirement: (1) the employee, management, or a medical practitioner can initiate an ill-health retirement request; (2) the committee first establishes if the employee can fulfil the requirements of a different job; (3) if not, the employee is placed on temporary leave with 75% of current salary and health benefits, with monthly monitoring to encourage returning to work; (4) in rare cases, the process will recommend permanent ill-health retirement.
- Contractors and on-site suppliers: (1) on-site contractors and suppliers are not required to adhere to BMW South Africa's HIV policy; (2) contractors have access to BMW South Africa medical facilitates on a fee for service basis.

Prevention and Awareness

BMW South Africa built its prevention and awareness programme around training, peer educators, condom distribution, syndromic treatment of STIs, events, workshops, forums and industrial theatre.

- To raise awareness and influence changes in practices and behaviours the
 programme uses events (e.g. World Aids Day), workshops (e.g. business impact
 of HIV/AIDS), forums (e.g. women's forums to help them identify their risks and
 empower them to change), and industrial theatre. The messages and groups
 targeted were determined based on the KAP survey. These activities are
 coordinated to complement on-going communications campaigns. Awareness is
 continuous and ongoing and there is a planned scheduled activity on a monthly
 basis.
- Certain employee groups received specialized training. The KAP survey indicated that employees did not view their shop stewards as knowledgeable or accessible HIV/AIDS resources. In 2002, all 14 shop stewards were trained to address this need. In 2002, 6 managers were exposed to a two-day external training course and about 46 managers and supervisors attended internal group training sessions. The internal sessions trained the managers in the policy as well as managing interpersonal, legal, and economic HIV/AIDS issues. In 2003, 82 team leaders and supervisors attended nine sessions on the legal aspects of an HIV/AIDS-related illness or death as well as how to deal with the emotional and psychological sides of coming to terms with the loss of a loved one. All new employees receive the BMW South Africa HIV/AIDS policy and are educated regarding the HIV programme.

Project Description (continued...)

Prevention and Awareness

(...continued)

- 58 peer educators, a 1:52 ratio, were trained through both internal and external providers. The peer educators are selected based on the following capabilities: (1) ability to correct misunderstandings in a sensitive manner; (2) ability to help people express feelings and share experiences; (3) strong communication skills; (4) strong empathy and maturity; (5) high employee popularity. The peer educators are provided with a role proposal which encourages them to: (1) plan and organize monthly HIV/AIDS training during staff meetings; (2) organize, conduct and facilitate group meetings; (3) promote current communication campaigns; (4) promote condom usage; (5) provide support, assistance, and referrals to employees. The peer educators provide monthly activity and condom usage reports and participate in monthly peer educator support group sessions.
- Free government male condoms are available at approximately 100 workplace dispensers and through peer educators. In the first ten months of 2002, BMW South Africa distributed an average of 3.3 condoms per employee per month. In the first six months of 2003, the condom rate of distribution increased to 10 condoms per employee per month. Female condoms are provided at the clinic and people living with HIV are contracted to ensure that condom containers are filled.
- Syndromic Treatment of STIs is available at the company clinics (one main and two satellites) and through external providers (e.g. private or government institutions). BMW estimates that, in the past, most employees obtained STI treatment through the external providers. BMW started treating and tracking STI treatments at the workplace in 2002. In the first 9 months of 2002, BMW treated an annualised rate of 15.6 cases per 1,000 employees per year. In 2002, seven occupational health workers were trained in STI management. The STI treatment rate has decreased by 50% to an annualized rate of 7.1 cases per 1,000 in first six months of 2003.

Voluntary Counselling and Testing

The VCT project was launched in 2002 based on the feedback from the 2001 KAP assessment. The service is available to all employees for free at workplace clinics. Since the VCT campaign was launched in 2002, an estimated 77% of employees have been tested.

- The service is available to employees for free at workplace clinics. Dependants can obtain VCT services through external providers and will be compensated through the medical scheme.
- Seven occupational health nurses (428:1 ratio). Across the two locations there
 are six full-time occupational health nurses who were trained in VCT counselling
 and protocols. To balance the full-time female medical staff, a seventh male
 occupational health nurse was hired to support the VCT project.
- BMW South Africa has outsourced the VCT diagnostic support to a local university, Medunsa, microbiology department for an estimated US\$ 6 per test.
- To date, BMW South Africa has provided VCT services to 2,370 employees, which corresponds to 77% of employees. BMW South Africa has counselled over 88% of its employees with a 85% 'consent rate' to testing after being counselled. The goal is to have everybody know their status by the end of the campaign. To increase the uptake of the programme, BMW South Africa has emphasized the availability of comprehensive care, support and treatment including access to the Aid for Aids programme. Also, VCT uptake by department is tracked and linked to department evaluations as well as the HIV/AIDS programme evaluation.
- BMW South Africa hopes to obtain a prevalence estimate through their VCT programme.

Project Description (continued...)

Care, Support and **Treatment**

HIV+ employees gain access to BMW's comprehensive care, support and treatment programme, including access to Highly Active Anti-Retroviral Treatment (HAART).

- The VCT programme has informed 155 HIV+ employees of their status. 90% of these employees have enrolled in the BMW South Africa on-site wellness programme.
- The wellness programme provides on-site: (1) prophylactic antibiotics such as co-trimozazole, for people living with AIDS; (2) counselling services with a psychologist; (3) nutrition counselling and supplements; (4) a scheduled exercise programme with planned goals; (5) TB case identification through self-presentation and active case finding. Treatment (including directly observed therapy) is also provided on-site with the support of the local health department.
- Employees and dependants can confidentially join a treatment programme called Aids for AIDS (AFA), which is offered by BMW South Africa's third party health plan administrator, Medscheme, Since its launch in 2002, the programme has enrolled 71 health plan members. This represents 46% of the employees who have learned their status in the VCT programme. This number is lower than the 90% enrolled in the BMW South Africa wellness programme because of the time lag in AFA's reporting and the reluctance of some employees to notify their insurance company of their status.
- Note: as the VCT, wellness and AFA programme statistics change daily. the numbers are being provided to demonstrate the relatively rapid uptake of the services since their launch earlier in 2002.

Capacity **Building**

BMW networks with a number of external groups to develop and improve the care, support, and treatment available to BMW employees in their home communities.

- Many of the employees receive their medical treatment from external providers. In October 2002 and February 2003, BMW South Africa provided workshops for 20 physicians and will be coordinating and funding additional training in HIV clinical management.
- BMW South Africa, along with Department of Health officials, have also taken steps to bridge the gap between traditional and modern medicine by giving HIV/AIDS training to 33 local traditional healers in August 2003.
- In September 2003, BMW South Africa invited 50 leaders of religious groups to a workshop centred on breaking the silence surrounding HIV/AIDS, counselling skills and networking.

Programme Evaluation

Key Success Factors

Although BMW South Africa has only recently launched their latest HIV/AIDS programme, they have already established the following lessons.

- A culture of trust and management leading by example have helped generate rapid VCT uptake. The provision of free HAART treatment for all HIV+ employees provides an incentive for employees to participate in the programme.
- **Invest in a number of small changes** to improve confidentiality and employee trust (e.g. change waiting room and consultation room design).
- Develop the programme based on company-specific needs determined through a multi-stakeholder designed KAP survey.
- Communication focuses on "empowering the individual to value life" as well
 as practical role-playing examples to help employees cope with likely
 situations (e.g. how to negotiate with your partner to use a condom, how to tell
 your kids about sex, how to tell your spouse if you are positive).

Selfevaluation Process

BMW South Africa regularly evaluates the programme's performance.

- The HIV/AIDS programme is managed by a full-time medical doctor and has a separate programme budget and work-plan.
- BMW South Africa tracks key statistics on a monthly basis, including: VCT uptake, STI treatments, wellness programme enrolments, peer educator feedback, and condom distributions. The VCT statistics are transparently shared with all departments to encourage higher uptake.
- The HIV/AIDS committee, chaired by the plant manager who is a board member, and is also composed of representatives from the union, finance, human resources, medical services, management and other interested parties. There is a small working committee that meets weekly. The committee performs the following functions: (1) develops and maintains the HIV/AIDS policy; (2) designs and evaluates the strategy and action plans; (3) recommends and monitors the programme's budget.

Future Goals

In the future, BMW South Africa will focus on the following areas:

- Rolling out a similar programme to BMW South Africa's 56 dealers, and exploring
 ways to encourage similar programmes for suppliers. For example, HIV/AIDSrelated television sessions have been broadcasted to the entire dealer network,
 and one dealership has already implemented an internal programme of its own.
 The programme has also been presented to two suppliers thus far.
- Continuing the testing campaign.
- Having a fully functional biokinetic centre in place where employees can participate in active reconditioning including prescribed, goal-driven exercise programmes.
- Expanding women's forums to include training in how to become financially independent and self-defence classes.
- Creating an environment where the employees can and do publicly declare their status.
- Development of a multi-purpose care centre in the surrounding community. This site will include VCT, youth programmes, early childhood development and a hospice together with income-generating projects for those living with HIV.

Case-specific HIV/AIDS Resources

Documents

BMW South Africa HIV/AIDS Policy

BMW South Africa 2001 KAP Survey Executive Summary

BMW South Africa August 2002 Programme Presentation

BMW South Africa 2002 Budget and Workplan

AFA Clinical Guidelines (Provided with the permission of AFA. Their contact details are listed below.)

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The World Economic Forum Global Health Initiative Private Sector Case example was written by Peter DeYoung and developed in collaboration with the featured company, however, GHI member companies and partners, the World Economic Forum and the contributing company do not necessarily subscribe to every view expressed herein. The case is based on a self-reporting model. Although the GHI makes reasonable efforts to ensure the accuracy of the statements, this report should not be viewed as an external audit of the programme described.

This case study is a part of the GHI's Case Study and Supporting Document Library, which is available at www.weforum.org/globalhealth/cases. Please contact Peter DeYoung at the World Economic Forum for any questions, feedback or submissions related to this case study.

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