

Consolidated Private Sector Inputs

Towards the Zero Draft of the

National Strategic Plan on HIV, TB and STIs 2017 - 2022

22 September 2016

1. Background

The development of the National Strategic Plan on HIV, TB and STIs required meaningful engagement and involvement of the Private Sector. Considering the complexities and how the private sector is designed in South Africa, the South African Business Coalition on Health and AIDS (SABCOHA) fulfilled the role of coordinating all of the inputs received from a broad range of representatives in the private sector, including Business Unity South Africa (BUSA), Durban Chamber Foundation/Durban Chamber of Commerce, American Chamber of Commerce in South Africa (AMCHAM - South Africa) and all their respective members.

In order to get inputs for the new NSP, SABCOHA applied the following *strategy*

- Outlined almost all strategic players in the private sector by association, membership and industries.
- Consulted with the employers' associations (multi sectoral and sector specific) in the country in order to reach their members.
- Identified relevant meetings and events scheduled by the private sector in order to request a platform to get inputs towards the new NSP. This was achieved through presentations at the Mine Medical Practitioners Congress, The Durban Chamber Foundation SME HIV Summit
- Facilitated a national consultation for SANAC with various stakeholders in the Private Sector, including formal and informal businesses and small or medium enterprises on the 12th of September 2016. An additional consultation was conducted with BUSA members on the 21st of September 2016.

The Private Sector has been engaging and implementing HIV and AIDS programmes through their businesses, workplaces and and through other means since the early years of the AIDS epidemic.

Considering the 90-90-90 Strategy to reach targets, the South Africa Investment Case and recently adopted UN Political Declaration on HIV and TB, it is important to engage and ensure meaningful involvement of the Private Sector. According to the Quarterly Labour Force Survey (QLFS) released by Statistics South Africa (STATSSA) in May 2016, there are approximately 15 million people who are in some form of employment in South Africa (formal and informal).

Whilst the government employs approximately 1.3 million, the private sector accounts for the remainder of people who are in employment, be it formal or informal employment. The private sector is the largest contributor to GDP, particularly the 8 sectors that include manufacturing,

mining, agriculture, communication, tourism, wholesale and retail, finance and business services. This contribution cannot be left unnoticed, therefore continuous engagement of the private sector will assist in fast tracking the targets towards ending AIDS by 2030.

Defining the Private Sector in South Africa

The private sector is defined as the part of the country's economic system that is run by individuals and companies, rather than the government. Therefore SABCOHA defines the private sector as organizations that are run with the intention of making profit either by individuals or groups, and therefore the strategy to engage with the private sector should include business organizations and their members that operate in the formal or informal space.

The private sector in South Africa is comprised of individuals, groups of individuals or multinational organizations. These organizations are either affiliated to an association or a group of organized business or independent.

2. Private Sector comments/inputs for consideration:

- 2.1. **Acknowledgement of the Private Sector contribution:** The new NSP should consider a brief section that relates to the work that has been done and is currently being done by various sectors, including the Private Sector. Highlights of the sectoral work that has been done by various industries such as Wholesale and Retail, Agriculture, Textile, Transport, Mining etc. In this way we encourage information exchange and continuity of good practice.
- 2.2. **Improved Monitoring, Reporting and Evaluation Systems:** Whilst the private sector has developed strategic information systems, either collectively or by individual companies, the new NSP should allow a platform for an improved Private Sector monitoring, reporting and evaluation system. The BizWell tools are an example of what could be advocated through the NSP. The public and private sector systems should allow flow of information, without compromising confidentiality on businesses.
- 2.3. **Strengthen M&E reporting of key industries:** Capacity constraints to analyse available data must be addressed to achieve smart reporting outcomes. Information systems are critical to move forward - Health Information Exchanges would create a mechanism to share information that is available without the additional admin burden to report.
- 2.4. **Indicators linked to the Private Sector:** Whilst the Private Sector may align its work on HIV, TB and STIs with the national indicators, it will be important to outline some of the indicators that are linked to the Private Sector.
- 2.5. **Commitment and allocation of Resources by the Private Sector:** The new NSP should include a section reflecting resources required for implementation (Financially-Costed-NSP). This will enable all stakeholders, including Government, Private Sector, Civil Society, Development Partners and Donor Agencies to make financial commitments where feasible.
- 2.6. **Multi-sectoral and stakeholder approach:** SANAC to maintain and strengthen the multi-sectoral nature of the HIV, TB and STIs response in South Africa. The Private Sector is also a multi-sectoral/multi-industry structure and therefore the NSP should allow space and platforms for almost all the sectors/industries of the economy in South Africa. The Private

Sector to be allocated a reasonable number of seats in various structures of the South African National AIDS Council.

- 2.7. **Meaningful Strategic Partnerships:** There is a need to build and improve on the relationship between the Private Sector and Government to focus on opportunities. The new NSP should make provisions and facilitate clear agreements and expectations between public and private sectors, and any other stakeholder that wants to get into partnership with the Private Sector. This could be done through public-private partnerships.
- 2.8. **Innovative and creative approaches through technology:** More innovation around social media and cell phone technology is required. Technology and social media - how can it leverage between businesses and expand access to information; education and training beyond the Helpline. Innovative approaches to develop public private partnerships that have measurable impact on public health solutions. The new NSP should allow for dialogues between government and cellular networks providers (majority form part of the private sector) and forge strategic partnerships that will enable easy flow of information and knowledge sharing through technology.
- 2.9. **Return on Investment for SMMEs:** The Small, Micro and Medium Sized Enterprises form part of the private sector, however the levels of engagement in the HIV and TB response vary from one enterprise to the other. Through strategic partnerships, perhaps between associations of SMMEs and the Department of Small Business Development, incentive programmes should be established and linked to targets that are HIV, TB and STIs related. The Private Sector would want to see a clear indication of the return on investment, therefore the new NSP should consider reflecting returns for the private sector.
- 2.10. **Integration of a shared value:** Identified attributions of the relationship between economic results and social outcomes. Integration of a shared value in private sector engagement to enhance collaboration in public health service delivery between the South African government and the private sector.
- 2.11. **Improved cooperation with Higher Education Institutions:** The new NSP should focus on the younger generation to achieve the three Zero's or 90-90-90 targets. It should reflect and facilitate strategic partnerships between the Private Sector and the Higher Education and Training HIV/AIDS Programme.
- 2.12. **Creating and maintaining a non-discriminatory and safe working environment:** Several departments have developed instruments such as legislation, policies and guidelines to realize non-discrimination and safe-working environment. Reference should be made to these, and make them work. The Employment Equity Directorate of the Department of Labour has developed and adopted a Code of Good Practice on HIV and AIDS and the World of Work, 2012. This should be used to engage the Private Sector more in responding to HIV, TB and STIs.
- 2.13. **Commitment and accountability:** Though a highly regulated environment can be burdensome, it is better to improve on existing legislation. The new NSP should allow for a strong business case for the Private Sector and the communities within which they operate.

- 2.14. **Priorities towards Getting to Zero and achieving 90-90-90 targets:** The following should be considered as part of the priorities:
- *Interventions for young people:* The private sector has industries/sub-sectors that employ a significant number of young people, therefore strategic partnerships should be established with these employers and their associations
 - *Treatment:* Whilst the private sector has the capacity to provide treatment, the NSP should consider strong referral systems to allow those who may exit the private sector and depend on the public sector.
 - *Wellness and Disease Management:* The Private Sector prefers a multi-disease approach in order to address issues related to productivity, absenteeism and presenteeism. The interventions should consider both communicable and non-communicable disease, including lifestyle conditions. The NSP should not only focus on HIV, TB and STI's, but also include general Health, Wellness and Disease Management (Lifestyle) in all programmes as has been successfully implemented by many private sector companies.
 - *Gender Equality and Diversity:* All programmes should be Gender Sensitive and responsive. Upholding of human rights and gender issues should be stated as a cross cutting issue in all program planning.
- 2.15. **Roles and Responsibilities:** Government - Private Sector - Civil Society should be clearly defined in the new NSP to avoid duplication of resources and ensure accountability. Defining Private Sector should be considered broadly and not limited to health care providers.
- 2.16. **Target Populations in the Private Sector:** The Private Sector has sub-sectors with populations that are extremely vulnerable not only in relation to health but also in relation to socio economic factors, being the Informal Sector and Domestic Workers. Targeted interventions and effective programmes are required to address these gaps.
- 2.17. **Procurement of Treatment:** Procurement of Anti-Retroviral and TB drugs is key to an effective response. Availability and access to medicine must be increased. Government has an active role to play in the establishment of a National Priority Setting Authority for health to determine cost effectiveness and affordability (cost benefit analysis of programmatic interventions or health and economic evaluations to serve as basis). There is a trade-off between equity and efficiency. If the pricing of HIV and TB drugs could be standardised across the public and private sector it will enhance programmes especially in the private sector. Drug prices should be renegotiated at national level to secure pricing for the country as a whole.
- 2.18. **Aligning the NSP with Decent Work:** Aligning the NSP with the Decent Work Country Programme. The country is currently developing the next Decent Work Country Programme (DWCP) through the National Development Labour Council (NEDLAC). This is a document that outlines employment and labour related priorities (and actions to be taken)

linked to Decent Work and economic growth. The NSP should allow space for alignment between these two documents.

- 2.19. **Meaningful engagement of PLHIV by the Private Sector:** All Sectors including the Private Sector should meaningfully engage PLHIV and their networks to ensure grassroots input in programme formulation
- 2.20. **Public-Private Partnerships Coordination:** SANAC should consider establishing a unit or mechanism to coordinate public private partnerships to be located within SANAC and a designated Private Sector coordinating body.
- 2.21. **Prevention Activities:** It is recommended that Government should consider engaging all levels of Private Sector more actively in prevention campaigns and mass screening activities.
- 2.22. **Engaging SMMEs and the Informal Economy:** SMME's are vulnerable due to not having a strong focus on health and wellness within their companies. It is far more important to access new markets and increase turnover/profits/employment creation. From consultations with this sector it is clear that there is a willingness within SMEs to participate in the dialogue on HIV treatment in SA.
- 2.23. **SMMEs Participation in AIDS response structures:** Acknowledgement of the SMMEs as part of the Private Sector in the NSP is important as micro, small and medium sized businesses provide 60% of jobs in South Africa and contribute more than 40% of the country's total remuneration. This could be achieved through allowing SMEs to participate in the Provincial and Local AIDS Councils.

3. Conclusion

SABCOHA would like to acknowledge the participation and positive response from various industry bodies, private sector companies and SMME's in the NSP consultation process. This was achieved through meetings, a national consultation, questionnaires and personal inputs. We further acknowledge the input from the SANAC team and consultants that supported SABCOHA in facilitation of the National consultation.

ILO further provided invaluable support in the process from the drafting of the action plan to the submission of this report.

To get to Zero, all sectors in society have to actively participate in making the new NSP a success and the Private Sector is ready and willing to contribute in achieving this goal.

Compiled By: **South African Business Coalition on Health and AIDS (SABCOHA)** based on the inputs provided by various Private Sector stakeholders through meetings and consultations.