



2009 ANNUAL REPORT

VISION

To reduce HIV infection and improve the quality of life of those infected and affected by HIV in the workplace.

MISSION

The mission of SWABCHA is to: contribute to the HIV and AIDS National response through effective coordination of and collaboration within the Private sector to ensure universal access to prevention, treatment, care and support for employers and employees in the private sector.

GOAL

25% of workers reached with at least a minimum HIV workplace program by 2012

Table of contents

1. Chairperson's statement

2. Acting CEO's Report

2.1 2009 Programs Report

2.2 Key achievements

2.3 2010 Forecast

3. Overview of the Epidemic

4. Strategic Objectives

5. Financial Statements

6. SWABCHA Contact details

7. Acronyms

1. Chairperson's statement



This year, 2008-2009, SWABCHA went through several phases of change. In June 2008, the organization registered as a non-profit NGO and was brought about by the need to have independent and strategic structures that allow for fundraising and direct reception of donor funds. The change has enabled SWABCHA to fall in line with other national business coalitions to enhance the ability to serve both the employers and the employees' needs in the HIV/AIDS response. This change necessitated the transformation of the logo and development of a new website. The website provides needed information for membership, links member companies directly to the office and enables potential members to join without the paperwork hassle through an on-line membership form. The website also showcases and acknowledges the different levels of support and contribution by member companies. SWABCHA has since gained two new contributing members this year.

Early in the year, the CEO resigned and left the organization in May 2009, and the organization has managed to pull through under the leadership of the acting CEO since June 2009. The board would like to thank the Acting CEO, for the seamless transition and the courage to step up to the responsibilities and manage the organization. The Acting CEO and the team of staff have proven their commitment and hard work during this trying period and we are grateful.

The SWABCHA team, with some board members, managed to raise funds to salvage the financial challenges faced by the organization caused by an unexpected decrease in administration funds allocation from NERCHA. In the face of these challenges the SWABCHA service provision and staff was kept functional. To date, all services are still running and additional packages have been included in the wellness package. Two new grants have been gained to augment the service and program delivery.

SWABCHA strives to improve services and program delivery, strengthen fundraising capacity and increase its membership. It is imperative that we recruit a CEO as soon as possible to carry the organization to new heights.

The upcoming 2010 World cup will create a thriving business environment, we must not however, ignore the ripple massive effects of the social behavior boom on HIV and TB spread

in the populations from which we employ. Great strides to invest in the onset of behavior change and health seeking behavior within our companies and surrounding communities need to be taken now.

Our sincere gratitude goes to the implementing partners in the private sector, that is, the companies whose hard-work and contribution made the work possible. We also thank our expert partners, donors and stakeholders who provided expertise, in-kind, financial and moral support to produce valuable materials and strategies that yielded great impact in the world of work.

I would also like to thank the Board Members for their invaluable advice, experience and insight to allow the organisation to grow.

2. Acting CEO's Report



2.1 Programs Report-2009

The national HIV prevalence rate among pregnant women attending antenatal care fluctuated from 42.6% in 2004, to 39.2% in 2006, an indication of a beginning of an end but then went up to 42.3% in 2008. This may slay hopes for change, but it also is an indication that the epidemic may be reaching a plateau. This may be a high figure to plateau but it is a beginning. The workplace, has proven to follow the same trend of prevalence, an indication that the productive population requires an even more aggressive, systematic and consistent effort to lighten the burden of HIV.

The *National Multi-sectoral Strategic Framework for HIV and AIDS 2009 – 2014*, provides a critical path for collaboration and partnership for SWABCHA in coordinating the private sector response. With support from government, UN agencies and international donor, SWABCHA initiated and expanded programming for the private sector, targeting big and micro, formal and informal companies as per their need. In this respect SWABCHA saw the development of;

- An interactive website
- Business plan 2009-2012
- Workplace policy guide
- Workplace peer education manual
- TB-HIV collaborative guide

SWABCHA further developed a peer educator badge, peer educator tool-bag and a twelve months training guide to assist in the implementation of practical workplace programs that are systematic, consistent and effective. Over 80 companies have accessed steady mobile wellness clinic visits at their doorstep; peer educators have been refreshed and mentored for effective program delivery.

2.2 Key achievements

Swaziland has faced indiscriminately like other countries the global and regional effects of the economic recession. The economic recession resulted in loss of family incomes due to massive retrenchments, increasing levels of unemployment and poverty. This created a population of cash-stripped families who cannot spend, plunging populations into high risk money making behaviours like commercial sex work, and causing downturn drops in business profits.

Resources for HIV-AIDS dwindled as focus was on survival; however, several milestones were met as noted below,

- First AGM 2009
- First Annual Report 2009
- An interactive website
- Business plan 2009-2012
- Workplace policy guide
- Workplace peer education manual
- TB-HIV collaborative guide
- Mobile Wellness Unit

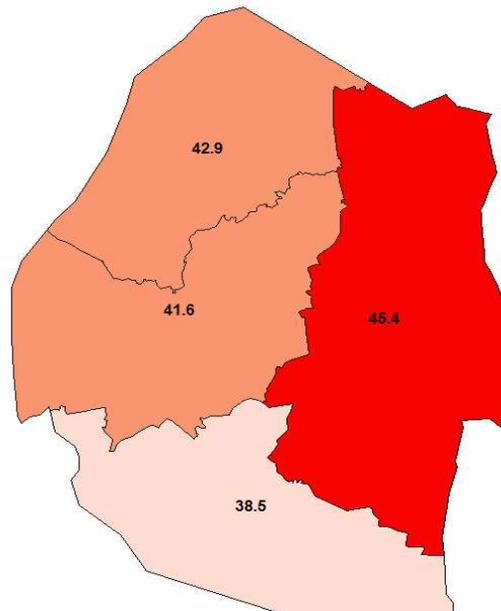
In this period a number of collaborations that will enhance the business coalition effectiveness and efficiency have been made and they include the following;

- SADC Meeting on the delivery of HIV-AIDS services in the private sector
- Pact Prevention Partners Technical Working Group
- Standardisation of private public workplace programs
- Stop TB Partnership

2.3 Forecast for 2009-2010

1. Strengthening private public partnership-SWABCHA is currently working with government through the Swaziland National AIDS Program and the Public Sector HIV-AIDS Committee, ILO and other workplace related organisations to develop standardised workplace intervention programs. SWABCHA is also exploring exchange of expertise in the private and public sector to improve efficiency and effectiveness of the national HIV-AIDS response in the Kingdom.
2. Expanding workplace programs to more companies-currently SWABCHA is working with about 100 companies on a continuous systematic workplace wellness program, about 80 of these companies programs are supported through donor funds. SWABCHA is making in-roads to expand provision of tailor-made in-house support to companies. Effort is also being made to support sector focussed interventions for issues that are sector specific.
3. Strengthen SWABCHA service delivery and coordination systems-With the expansion of reach and improvement of program delivery quality, SWABCHA will require a systemic growth to cater for the needs of a larger membership. SWABCHA will require institutional and capital growth in the coming year.
4. Increase resource base-SWABCHA is venturing into regional partnerships with other national business coalitions, local NGOs and companies to tap into regional and global resource to support the national response to HIV-AIDS.

3. Overview of the Epidemic in Swaziland



The current ANC prevalence of HIV stands at 42.3%. The productive population that is in the workplace is the most affected by the epidemic. Currently, the epidemic has accelerated because of the latest emergence of tuberculosis (TB), a more aggressively spreading epidemic due to its airborne mode of transmission. TB has aggravated both spread of and progression of HIV to AIDS. The co-infection rate of TB-HIV is 78% in Swaziland.

The Government of the Kingdom of Swaziland had committed to provide free antiretroviral and TB medication for all people needing such medication. This service is currently provided in twenty six government hospitals and health centres, and it has been decentralised to private clinics and through some NGOs, satellite clinics in Shiselweni mainly now provide antiretrovirals. A process of decentralizing this service closer to the people is on-going.

The impact of the progression of both TB and HIV pandemics greatly dents the profitability and success of business. With high absenteeism, low morale, high cost of medical and leave payouts, companies have lost highly qualified and long trained personnel, along with the tacit knowledge. The drive now is to start turning around the escalation of events through continuous social behaviour change mobilisation and creating health seeking behaviours in the prevention and on-set of illnesses.

4. SWABCHA Strategic Objectives

The Swaziland Business Coalition on HIV and AIDS (SWABCHA) is an independent, non-profit organisation that brings together private sector companies, unions, government, civil society organisations and development partners to ensure effective responses to HIV and AIDS in the workplace.

The SWABCHA Business Plan defines strategic, financial, and organisational priorities for three years (2009-2011). The plan links directly to the *National Multi-sectoral Strategic Framework for HIV and AIDS 2009 – 2014*, which designates SWABCHA as the coordinating body for the private sector.

To reach the goal of '25% of employees reached with at least a minimum HIV workplace programme by 2012', i.e. doubling the numbers of employees covered by workplace programmes in the next three years.

To coordinate the private sector response to HIV and AIDS

- Facilitate information exchange, assessments, joint planning activities and collaboration
- Provide referrals for technical support
- Operationalize a minimum package for workplace programs
- Monitor the private sector response
- Represent the private sector at regional and national planning and coordination fora

To increase and improve workplace HIV and AIDS programmes

- Provide/ensure technical support to assist creation/improvement of workplace HIV policies and programs
- Produce/ensure access to relevant materials to support scale-up of workplace responses
- Advocacy (including the business case for workplace programming)
- Ensure services where/when required
- Effective collaborations and strategic partnerships with other stakeholders

To strengthen SWABCHA capacity

- Increase financial sustainability through resource mobilization
- Increase organizational capacity – staff, Board, systems and procedures
- Secure sufficient and appropriate infrastructure
- Effective collaborations and strategic partnerships with other stakeholders

5. Membership

SWABCHA membership...each contributing company will send HALF A PAGE to showcase their wellness program and management involvement-be creative. A star indicating your category will be posted to your page

The SWABCHA team and board welcome First National Bank as a contributing member and to the board.

RSSC

Nedbank

Standard Bank

FSE&CC

Tambankulu

Ubombo Sugar

Sappi Usuthu

SWSC

Swaziland Beverages

SPTC

SEC

FNB

Inyatsi

6. Financial Statements

2009-2012 FINANCIAL PROJECTIONS

- Expenditure E 6.5 million
- Income (existing sources) E 3.7 million
- Fundraising target for new relationships with development partners E 2.87 million

7. SWABCHA Contact details

Residential address	Emafini Business Centre, Malagwane Hill, Mbabane
Postal address	PO BOX 636, Matsapha, Swaziland
Telephone	+268 4048252 or 4048269
Fax number	+268 4048254
Website	www.swabcha.org.sz

7.1 The Board

Company	Substantive Member	Designation	Board Designation
RSSC	Nick Jackson	Managing Director	Chairperson
Standard Bank	Tineyi Mawocha	Managing Director	Vice Chairperson
Nedbank	Ambrose Dlamini	Managing Director	Finance Chairperson
FSE & CC	Zodwa Mabuza	CEO	Member
Tambankulu	Naphtali Gumbi	HRM	Member
Ubombo Sugar	Simon Cleasby	Managing Director	Member
Sappi Usuthu	Shane Perrow	CEO	Member
SWSC	Bhembe Peter	CEO	Member
MTN	Tebogo Mogapi	CEO	Member
Swaziland Beverages	Zama Kunene	Managing Director	Member
SPTC	Nathi Dlamini	MD	Member
SEC	Pius Gumbi	Managing Director	Member
CONCO	M. Khumalo	CEO	Member
FNB	David Wright	CEO	Member
SNPF	Langalakhe Dlamini	Finance Manager	Member
UNAIDS	Sophia Monica Mokasa	Country Coordinator	Ex Officio member
NERCHA	Derek von Wissel	Director	Ex Officio member
FESBC	Tum du Pont	President	Ex Officio member
CANGO	Emmanuel Ndlangamandla	Executive Director	Ex Officio member
SWANNEPHA	Thembi Nkambule	National Coordinator	Ex Officio member
SFL	Vincent Ncongwane	General Secretary	Ex Officio member
SFTU	Jan Sithole	General Secretary	Ex Officio member
Ministry of Labour & Social security	Jinnoh Nkambule	Acting PS	Ex Officio member

7.2 The Technical Advisory Committee

Company	Focal Person
Tambankulu	Mr. Naphtali Gumbi (Chairperson)
NEDBANK	Ms Nomsa Sibandze (Vice-Chairperson)
RSSC	Dr Bongiwe Radebe
SWSC	Mr. Lucky Ndlovu
Swaziland Beverages	Ms Tenanile Dlamini
FESBC	Ms Zanele Dlamini
Department of Labour	Mr. Absalom Myeni
UNAIDS	Ms Thembisile Dlamini
Ubombo Sugar	Ms Thabsile Kunene
Standard Bank	Mr. Thulani Mchunu
Health Care Clinic	Dr. Richard Lemmer
SPTC	Ms Futhi Mkhonta
CANGO	Mr. Wandile Nkosi
MTN	Ms Ntomb'futhi Dlamini
SWANNEPHA	Ms Sibongile Mnisi
RSSC	Ms Dudu Motsa
SAPPI	Ms Gcebekile Dlamini
SEC	Ms Busi Dlamini
SWSC	Mr. Lucky Ndlovu
SFL	Ms Gugu Malindzisa
CONCO	Ms Gcebile Dlamini

7.3 The Secretariat

a. The new CEO



Mrs Thobile Dlamini

b. Finance & Administration



Sabelo Hleta- sabeloh@swabcha.org.sz

c. Monitoring & Evaluation



Ndumiso Sihlongonyane-
ndumisos@swabcha.org.sz

d. Data Capturer



Jabu Mzizi- jabu@swabcha.org.sz

e. Pact Project Officer



Letsiwe Seyama-
letsiwes@swabcha.org.sz

8. Acronyms

AGM	Annual General Meeting
AIDS	Acquired Immune Deficiency Syndrome
ANC	Ante Natal Care
HIV	Human Immunodeficiency Virus
ILO	International Labour Organisation
MARPs	Most At Risk Populations
MSM	Men having sex with Men
NGOs	Non-Governmental Organisations
NSF	National Strategic Framework
SADC	Southern Africa Development Community
SWABCHA	Swaziland Business Coalition on HIV-AIDS
TB	Tuberculosis
UN	United Nations