

We can't afford to become complacent

While education and better access to antiretroviral treatment (ARV) continues to improve HIV status in South Africa, we cannot afford to become complacent.



Urvashi Ramjee, head of claims management at Old Mutual Group Assurance

“We have work to do if we want to reach the United Nations goal of ending the epidemic of AIDS by 2030, and corporate businesses can play a leading role in removing the stigma attached to HIV,” says Urvashi Ramjee, head of claims management at Old Mutual Group Assurance

Approximately 12,6% (7,06-million) of the South African population is HIV positive, according to the Statistics South Africa (Stats SA) [Mid-year population estimates for 2017](#). While this is an increase from the estimated 4.94-million South Africans reported in 2002, Old Mutual Corporate statistics show that disability claims for the disease have decreased significantly. This demonstrates an improvement in the management of the disease, in line with Stats SA figures, which showed a decline in the infection rate from 1.9% in 2002 to 0.9% in 2017.

Improved ARV treatment

Old Mutual Group Assurance disability claims related to HIV/Aids have dropped from 16% in 2010 to 8% this year. “This is around a 1% decrease every year since 2010 and can be attributed to improved education and access to antiretroviral treatment (ARV), and the management of HIV, which has resulted in those infected with HIV living longer, healthier lives.”

She further explains that the improved rollout of ARVs in both the public and private sector hospitals and clinics has resulted in the elimination of waiting lists for ARVs. “In the past, individuals would have to wait for their immune system to show symptoms before receiving access to ARVs, whereas today, ARVs are administered to patients much sooner, meaning treatment is starting earlier and individuals are less impacted by the disease’s symptoms.”

For HIV positive individuals, managing the disease has also become less difficult and can be easier to manage than diabetes, says Ramjee. “ARVs are now compressed into one daily tablet while someone with diabetes is required to change their lifestyle to manage the disease. If an HIV individual is consistent and compliant with his/her treatment schedule, the statistics show that these patients can remain productive and healthy in the work-place.”

Decrease in Aids-related death

Ramjee says this is contributing to the second trend they have noticed in claims over the past seven years, namely that more people with HIV are returning to the workplace and at a much faster rate.

“Today, we are seeing more people return to work, whereas in the past, these claims ended due to death caused by the disease. This shift is supported by the Stats SA data which showed that the number of Aids-related deaths has decreased from 219 741 in 2010 to 126 755 in 2017.”

Most research points to an improved HIV status in South Africa, Ramjee cautions society not to become complacent toward the condition. “While the statistics may appear more optimistic than in previous years, HIV remains a real societal problem in South Africa.”

She points to research by [UNAIDS 2016 estimates/the Prevention Gap Report 201](#) which shows that sub-Saharan Africa’s estimated HIV incidence rate (per 1,000 uninfected population) in 2015 was 1.54% – the highest in the world, which reported an estimated 0.3% incident rate.

Workplace disease management

“Corporate businesses can play a role in removing the stigma attached to HIV and increasing the awareness about the disease as many individuals living with HIV have yet to be tested².

“Workplace disease management and wellbeing programmes are proving positive in assisting employees with access to information, counselling, education, and awareness of the importance of HIV testing, why treatment courses for HIV require lifetime compliance and the link between HIV and tuberculosis (TB) – especially in blue-collar environments where TB and HIV are prevalent. In our experience, a significant number of TB claimants are also HIV positive as many individuals only discover they are HIV positive when seeking treatment for TB.”

“By promoting these programmes in the workplace, HIV-related illnesses become easier to monitor and manage, meaning employees are able to remain in the workplace or return to work healthier and earlier than previously after a period of illness. From an employer perspective, by minimising claims due to early detection, it can improve the business’s bottom line from a productivity point of view, as well as from a cost perspective, with lowered group risk premiums,” Ramjee concludes.