Abstract

South Africa has a high number of people living with HIV as UNAIDS (2009) projected the population of people living with HIV to be 5.7 million of which 20% of this population is said to be in employment. As a corrective measure, various strategies at national and company levels are being employed to get people to test for HIV. HIV testing helps people to know their status which is a gateway to informed prevention behavior and treatment. In workplaces, peer educators play an important role in getting workers to take up HIV test. As workplace peer educators mobilize workers to take up HIV test, they continue to face challenges. This precedes the broad objective of this study, which is to understand challenges faced by workplace peer educators in getting workers to take up HIV test.

This report is a product of in-depth interviews, with fourteen peer educators, two wellness officers and the wellness coordinator. Participant observations and document analysis were also employed in gathering data. The data collection process extended from July to December 2010 in a mining company in the North West province in South Africa. Findings of the research revealed that despite the company’s HIV testing programme being a success as evidenced by a recorded cumulative annual uptake rate of 82% (2009), peer educators still face challenges emanating from environmental, programmatic and socio-interactional and perceptual factors. Environmental factors include skepticism based on precarious employment contracts while programmatic factors include certification of test results, speculation of test results based on time spent in the testing cubicle, consent procedures and incentivisation of testing. Lastly socio-interactional and perceptual factors that include stigma and discrimination, cultural beliefs, poor disclosure strategies, perceived racialisation of workplace testing centers and male workers relying on results from partner’s antenatal test were identified as another set of challenges faced by peer educators.
The study suggests that in order to improve the HIV test uptake rate, in this context referring to the attainment of an absolute uptake rate, mitigation measures which include the use of trade unions in mobilizing workers for HIV testing, training on disclosure, re-negotiation and design of testing programmes and education must be considered. The adoption and administration of these measures into the case study company’s HIV test programme and other institutions facing the same challenges will help improve the HIV test uptake.