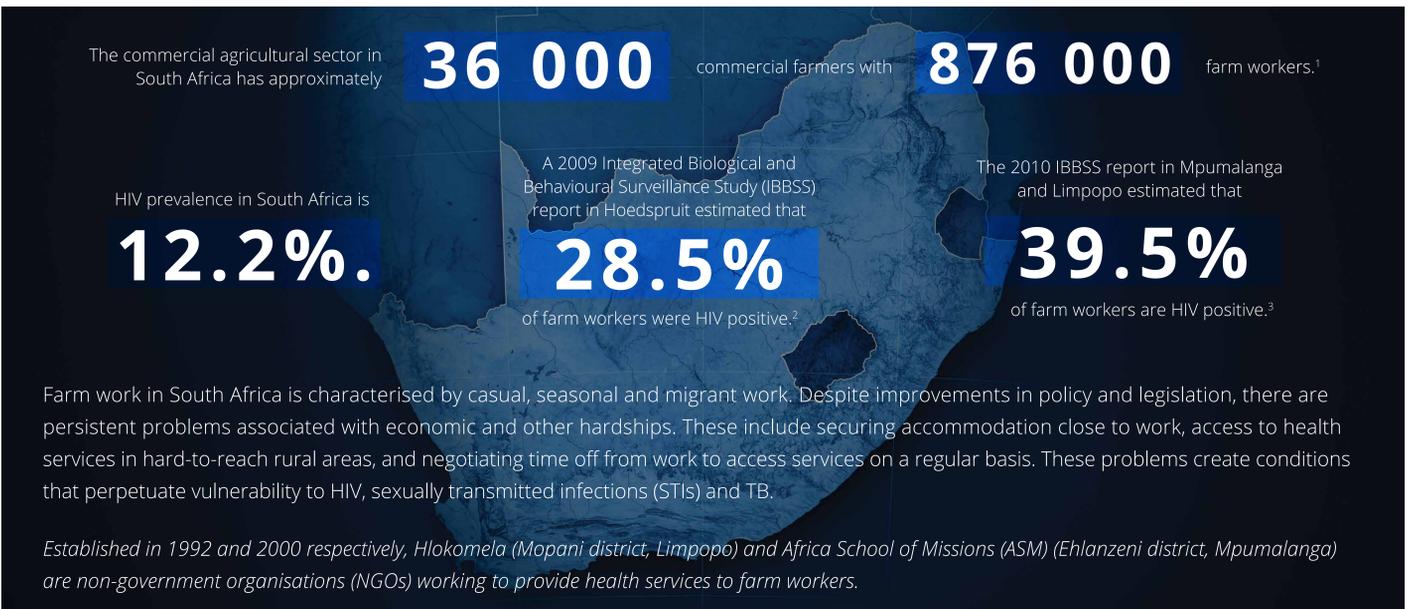




THE PARADOX OF PARACETAMOL

Mediating health and HIV service provision for farm workers: A study of employer knowledge, attitudes and practice in two districts in South Africa



AIM OF THE STUDY

To examine the role of farm employers in mediating the delivery of health and HIV services to farm workers.

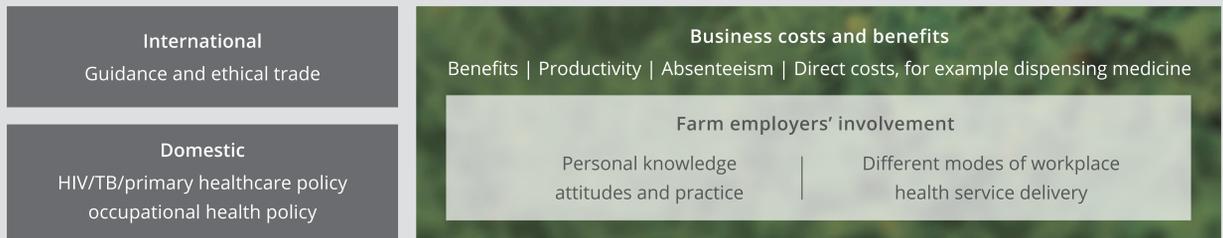
METHODS

A mixed methods study (secondary quantitative and primary qualitative data) purposively sampled 20 commercial farms in Mopani and Ehlanzeni districts. These farms are serviced by the Department of Health (DoH) mobile clinic service and NGO mobile and local health services (Hlokomela and ASM). The sample was divided into three groups: less than 100, between 100 and 500, and more than 500 workers. In-depth, semi-structured interviews were conducted with the employer at each site to explore attitudes and practices to HIV and related health services for farm workers. Complementary information was collected from NGOs and the DoH about health service provision and the policy environment.

RESULTS

The 'paradox of paracetamol' describes the attitudes among farm employers to HIV, health and wellness of their workers. "Panado" (a paracetamol-based painkiller), was referenced by farm employers to describe both the promise and failure of health services, highlighting a complex set of contradictions faced by the employers.

POLICY ENVIRONMENT for workplace health services in the agricultural sector



THERE ARE CONTRADICTIONS IN THE FARMING SECTOR AROUND ACCESS TO HEALTH SERVICES FOR FARM WORKERS

In the policy environment

The domestic policy environment is progressive. Employers are informed about HIV and worker rights to HIV care and support. Yet there is no enforcement of, or guidance to employers in relation to HIV on farms. International compliance for ethical trade in agriculture fails to consider HIV-only aspects of occupational health and safety. Domestic policy prohibits the dispensing of medicine at workplaces, while employers illicitly dispense "Panado" (paracetamol) as an act of care and to prevent unnecessary productivity loss in seeking care.

"What's wrong with you? I have a headache, and then I give them "Panado" (paracetamol)." – (Employer)

Business costs and benefits

Access to healthcare is time and productivity for the employer, which, when pitted against workers' rights to privacy, places employers in an ambivalent position.

"I don't want the specifics (HIV stats) and I want the people to know that I don't have the specifics (HIV stats) because tomorrow I could fight with them about something else and they say 'No, it is because you know I am HIV positive and you don't want me on the farm anymore'." – (Employer)

Farm employers' involvement in health service delivery

Employers dismiss DoH services as poor because they only provide "Panado" (paracetamol). Despite different modes of workplace health service delivery, including NGOs, government mobile and fixed health services, farm employers mediate workers' access to these services. NGO services have a stronger relationship with employers.

"They (employers) don't want to give them (farm workers) time (to visit mobile service). The farmers want them (farm workers) to use their own time, which is impossible." – (Mobile health services)

CONCLUSION

NGO services ease the mediation of the persistent contradictions, but do not resolve these for either the employer or worker. Farm workers' access to HIV-related services is determined by their employers.

This research was funded by the Discovery Fund.

¹ Statistics SA, Quarterly Labour Force survey Q1; 2016

² IOM, *Integrated Biological and Behavioural Study (IBBS) in the commercial agricultural sector in South Africa*, Pretoria, March 2009

³ IOM, *Integrated Biological and Behavioural Surveillance Survey (IBBS) in the commercial agricultural sector in South Africa*, Pretoria, November 2010