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To honor outstanding business action on HIV/AIDS, the Global Business Coalition on HIV/AIDS (GBC) presents its 2006 awards to six winning companies that conceived and executed creative and effective programs in the categories of workplace, community, core competency, national action, testing and counseling, and leadership. The winning programs exemplify best practices and represent the cutting edge of current industry engagement in both established and emerging economies. They are saluted for more than their individual excellence: Their examples set the pace for other businesses to heed the call to action and initiate further innovation. GBC also bestows commendations to 12 other companies whose HIV/AIDS work broke ground last year.

The six winning companies are based on three continents and in five countries. Still, despite their geographic diversity—or, perhaps, because of it—several trends and themes emerged. To begin with, this awards process illuminated the private sector's acknowledgment that AIDS is not just an African problem. To be sure, the continent's overwhelming HIV/AIDS burden made it the logical origin of response, with large national companies like Standard Bank of South Africa experiencing and addressing the medium and longer-term disease impacts. But today we see interventions in new global hotspots defined by both emerging pandemics and unprecedented economic development. Sensitized in hard-hit regions like South Africa, multinational companies like PepsiCo, for example, are taking proactive steps to mitigate the disease in regions not yet completely overwhelmed by HIV/AIDS. Businesses are also beginning to pay particular attention to Eastern European countries—Latvia, Moldovia, and Ukraine—which demonstrate the highest rates of new global infections. Five of GBC’s 18 honorees operate in Africa—in Kenya, South Africa, Tanzania, Burkina Faso, and Botswana—but as a whole, the group shows tremendous geographical diversity. Some of the best company programs were created in emerging economies where the HIV/AIDS epidemic threatens to derail progress, including Brazil, India, China, and Ukraine.

Anything but carbon copies of one another, the honorees come from a variety of industries—mining, financial services, healthcare products, pharmaceuticals, consumer goods, transportation, technology, media and communications, sports entertainment, and tourism. This diversity demonstrates that each business has core competencies it can utilize in the private sector response to HIV/AIDS. It also reflects a change similar to the one that occurred in the aforementioned geography example, for just as regional urgency is no longer the sole factor driving the response, particular industry vulnerability no longer defines company action. Case in point: Given the candid conversations and confidences that mark the relationship between salon workers and their customers, L’Oréal realized it was in a unique position to strike a blow against HIV/AIDS through its 400,000 person supply chain network. While it has no direct bottom-line stake in HIV/AIDS prevention, the company took the initiative to train its employees in hard-hit regions, such as South Africa, to serve as HIV/AIDS educators. This suggests that while the disease's economic and social impacts initially forced the mining, extractives, energy, and manufacturing industries to take action, the latest trend shows that AIDS is everyone's business. This is further evident as the Information and Communication Technology sector charters a fresh frontier, using computers and mobile phones to engage a new generation of tech-savvy consumers who are traditionally immune to or unmoved by HIV/AIDS messages.

Among the diverse industries actively fighting HIV/AIDS, companies are demonstrating critical advocacy and leadership skills, lending their brand's power and celebrity caché to create new programs and products. Recognizing that young people around the globe idolize its athletes, the National Basketball Association deploys its all-stars to the countries hardest hit by HIV/AIDS. At NBA-sponsored “Basketball without Borders” camps, the sky-high superstars score points by working to destigmatize the disease and empower young players who learn hoop skills and disease prevention in equal measure. Also interested in assisting high prevalence areas, American Express was the first company to commit to Product RED, the groundbreaking campaign to raise critical funds for the Global Fund to Fight AIDS, Tuberculosis and Malaria. The company created an unobtrusive way for global consumers to contribute to the fight against HIV/AIDS. Indeed, RED lets shoppers effortlessly contribute needed funds in the course of their normal daily spending, and American Express’s participation inspires other iconic brands to heed the call for private sector involvement with the Fund.

Sometimes the only source for accurate disease information in resource-limited settings with poor public health infrastructure, workplace programs are also evolving. At the bare minimum, companies must have firm policies that clearly elucidate zero-tolerance for stigma and discrimination. Comprehensive access to prevention, testing, treatment, and care are also becoming more routine, and we are beginning to see service expansion to employee dependents in remote or rural locations. Deeply concerned about the high disease prevalence among its workforce, Unilever Tea Kenya recognized that its remote location might inhibit employees from obtaining outside HIV/AIDS testing, counseling, and treatment. In response, it articulates clear stigma and discrimination policies and offers full services to 80,000 people—employees and their dependents—residing on the company estate. Faced with a different set of challenges, urban-based companies are also updating their services by negotiating insurance contracts based on consortium risk pools.

Similarly, companies are also recognizing the importance of extending services to their supply chains. Just as profit motivation inspires businesses to increase coverage, reach more consumers, and sell more products, a growing desire to eradicate HIV/AIDS has led businesses to conclude that if they truly want to impact the disease, they cannot be
content to merely create islands of excellence. Instead, companies must extend their efforts to suppliers, distributors, agents, manufacturers, and contractors.

Increasingly recognized as the cornerstone to comprehensive HIV/AIDS programs, testing strategies are also being improved and updated. Companies are making concerted efforts to decrease stigma and maximize the number of employees who decide to determine their status. They are creating policies in collaboration with people living with HIV/AIDS (PLWHAs), unions, and senior management; ensuring confidentiality; and guaranteeing immediate referral for treatment, lifestyle counseling, and close disease monitoring. By extending services to its broader community, Xstrata’s South African operation demonstrates an impressive commitment to and investment in families. Besides offering excellent methodology and monitoring systems, its testing and counseling program successfully mitigates disease stigma, as evidenced by the pace and rate of service uptake and its replication in ten South African company sites.

Whether at the national or local implementation level, public-private partnerships (PPPs) are gaining popularity and being touted as highly effective mechanisms to leverage diverse party strengths toward facilitation of a common goal. With administrative and management expertise, companies offer a very particular skill set; NGOs can provide the crucial interface to community based services such as testing and training; organizations led by people living with HIV/AIDS have keen insight into fighting stigma; governments can facilitate policy creation and execution; and international agencies like WHO and UNAIDS provide technical resources and assist in program design, monitoring, and evaluation. When organizations work together they produce exponential results by avoiding duplication and ensuring optimal use of resources. In partnership with the Government of Botswana (GOB) and the Bill & Melinda Gates Foundation, pharmaceutical supplier Merck’s HIV/AIDS strategy—The African Comprehensive HIV/AIDS Partnerships (ACHAP)—raises the bar for a global HIV/AIDS response, reshaping the way business, NGOs, and governments work together.

Finally, the honorees designated very different resources to their HIV/AIDS programs, clearly demonstrating that success is not determined solely by the amount of money spent. The best programs often couple a modest amount of funding with far more invaluable resources: creativity, human capital, and time.

Since its creation at the 2001 UNGASS, GBC has stressed the private sector role in fighting HIV/AIDS. Already responsible for 20 million deaths, the pandemic demands constant creativity and cross-sector industry involvement. Specific populations may be designated high-risk, but with an accelerating ability to infiltrate the general population, the disease ensures that no one is immune. Whether it’s mining or hair care, no industry can deny the disease’s impact on its workforce nor can any sector single-handedly manage the epidemic. Workplace programs have traditionally been the cornerstone for company HIV/AIDS action—especially in the hardest-hit regions—but GBC has always said that companies can fight the disease by expanding corporate social responsibility programs. With 30 awards submissions in categories outside the workplace, there has been a clear change in business thinking. A new trend has indeed emerged with a significant number of companies using their products, services, and relationships to effectively combat the epidemic.

This year’s honorees understand that HIV/AIDS poses an enormous threat to economic stability and global health, and rise to that challenge, vowing to render HIV/AIDS not a death sentence, but the preventable and treatable disease medical textbooks define it to be.

SIX IN 2006: KEY BUSINESS TRENDS IN FIGHTING HIV/AIDS

- Geographic Expansion to Emerging Economies
- Diverse Industry Engagement Facilitating a Holistic Disease Response
- Inclusion of Dependents in Comprehensive Workplace Programs
- Consolidated Industry Action Incorporating Supply Chains
- Cutting-Edge Testing Strategies to Ensure Maximum Service Utilization
- Collaborative Public-Private Partnerships to Increase Coverage and Efficacy of Prevention, Treatment, and Care
SETH BERKLEY
A medical doctor specializing in infectious disease epidemiology and international health, Seth Berkley is President, CEO, and founder of the International AIDS Vaccine Initiative. “It is clear that no lasting solution to the AIDS epidemic will come without creative partnerships between corporations, NGOs, and the public sector,” says Berkley, who has worked in more than 25 countries. “Lauded by G8 leaders this past summer, public-private partnerships engage industry, the public, and nonprofit sectors in accelerating product development and manufacture of drugs, vaccines, and microbicides for global threats like HIV/AIDS.”

DAWN AVERITT BRIDGE
A prominent HIV/AIDS advocate and consultant, Dawn Averitt Bridge’s 1988 HIV diagnosis gives her a keen understanding of the treatment, care, and social issues facing people who live with the disease. “Non-discrimination and community/government partnerships are very important,” she explains, “because they signal a corporate commitment to normalize HIV disease.” Averitt Bridge is the mother of two HIV-negative daughters and founder of the Well Project, which focuses on women’s treatment and prevention. She was honored to serve as a judge for this year’s GBC awards for business excellence: “Every time a company chooses to take action, they impact this pandemic,” she says.

ELISABETH GIRRBACH
A cultural anthropologist and public health specialist, Elisabeth Girrbach joined the German Technical Cooperation (GTZ) in 1996. Today, she heads GTZ’s regional project, “AIDS Control in Companies in Africa,” facilitating HIV/AIDS workplace programs in ten sub-Saharan African countries. Girrbach hopes that companies will continue to expand their programs and that future awards for business excellence will reflect exemplary action in additional categories. “Some companies expand their workplace program to suppliers and contractors, but this could be a separate [judging] component,” she notes, adding that company programs could also be evaluated based on their impact on both national and Millennium Development Goals.

DR. ALEX GOVENDER
As Volkswagen SA’s manager of Corporate Health and Safety Services, Dr. Alex Govender chairs the multi-stakeholder task team that created the automaker’s comprehensive HIV/AIDS workplace program. “Companies must persevere to improve HIV/AIDS programs,” says Dr. Govender, “not because of an award but because this is the right thing to do.” Dr. Govender works with the International Labour Organization and Rotary International to facilitate HIV/AIDS efforts and hopes that company programs will continue to evolve, developing stigma guidelines, supply-chain intervention strategies, and national HIV/AIDS reporting systems that include private-sector statistics.

JEAN OELWANG
As managing director of Virgin Unite, the independent charitable arm of the Virgin Group, Jean Oelwang works with all Virgin businesses, encouraging them to use their entrepreneurial spirit, resources, and people to tackle the toughest social challenges, including HIV/AIDS. “It is absolutely outrageous to allow 8,000 people to die every day from an epidemic that is preventable and treatable,” says Oelwang. “Businesses can play an important role in helping to stop AIDS from winning this war simply by using their existing resources to help in whatever way they can.”
NORBERT OTTEN
As DaimlerChrysler AG’s Director of Policy Issues since 2002, Dr. Norbert Otten supervises the company’s Corporate Social Responsibility Policy Group and also co-chairs the HIV/AIDS steering committee. Now based in the company’s Stuttgart headquarters, Otten cites DaimlerChrysler’s 2002 GBC Award for Business Excellence in the Workplace as a major milestone in its HIV/AIDS work. “I wanted to share this experience and motivate other companies,” says Dr. Otten, who joined DaimlerChrysler’s Washington D.C. office in 1999 as Director of Corporate Relations, where he contributed to the company’s post-merger process. “I strongly encourage the commended programs to continue their excellent work.”

ANTHONY PRAMUALRATANA
Dr. Anthony Pramualratana is Executive Director of the Thailand Business Coalition on AIDS (TBCA). Since 1994, he and his team have provided services to more than 3,000 companies in Asia, consulting on policy and community development, comprehensive program implementation, outreach to local hospitals, and income generation programs for people infected and affected by HIV/AIDS. Dr. Pramualratana advocates that multinational companies consider widespread adoption of the BPAS to inform their regional and country-level work. “To be truly effective in reducing new HIV transmissions and widespread discrimination,” he says, “national business corporations and SMEs must be involved.”

ANDY SEALE
Andy Seale is coordinator of the civil society partnership team at UNAIDS. “The winning companies understand that taking an active role in AIDS doesn’t just benefit employees and communities,” says Seale, who has worked closely with the private sector. “It also makes good business sense.” A founding member of the “UN+,” the U.N. system wide network of employees living with HIV, Seale encourages future award applicants to consider context: “A small effort in a country with an emerging epidemic can be more impressive than larger projects in countries that have been experiencing a generalized epidemic for many years.”

ANANDI YUVARAJ
Senior Programme Officer at the India HIV/AIDS Alliance, Anandi Yuvraj was infected with HIV after her husband had unprotected extra-marital sex. Diagnosed in 1997, she immediately resumed an active role in broadening political and social responses to the disease. In addition to creating a local organization to support HIV-positive people, Yuvraj also served as the Global Fund board representative of communities living with HIV/AIDS, tuberculosis, and malaria from 2003-2006. She is a national advisory board member of the Indian chapter of the International AIDS Vaccine Initiative, the Indian Council of Medical Research, and the Indian National AIDS Control Organization.
PERSONNEL: With more than 20,000 workers, Unilever Tea Kenya is the country’s single largest private sector employer.

LOCATION GUIDE: Kericho district, which neighbors Nyanza, the Kenyan province most affected by HIV/AIDS with infection rates up to 15%.

MINDING ITS BUSINESS: Officially formed in 1930, Unilever represents a conglomeration of companies that were well established before the start of the 20th century. Its founding companies produced products made of oils and fats, principally margarine and soap. Today, the company has 400 brands in more than 100 countries, offering a variety of products for cooking and eating, healthy living, beauty and style, and home care.

FIRST AID: Employees and their families live on company estates, making Unilever Tea responsible for some 80,000 people. Published in May 2002, the company’s HIV/AIDS policy provides education and communication programs; medical care policies that treat HIV/AIDS infected and affected people in a manner consistent with the treatment of people with other life-threatening diseases; and best practice strategies from within Unilever. The company deemed routine HIV screening, either in the pre-employment process or of existing employees, impermissible without informed consent.

FLASH POINT: In 1999, Kenya’s government declared HIV/AIDS a national disaster. At the end of 2003, UNAIDS estimated that Kenya had more than 1 million adults living with HIV/AIDS and was home to 650,000 AIDS orphans.

UNILEVER’S RESPONSE: With an annual medical budget of US$1.4 million, Unilever Tea Kenya owns and operates 22 dispensaries, four health centers, and an 85-bed hospital. Its internal activities fall into four areas: awareness and education; prevention; care and support; and capacity building. It offers mobile clinics; AIDS-awareness messages on paychecks; drama, music, and poster competitions; youth and school programs; health talks; and nutritional support. In-house trainers schooled by the National Organization of Peer Educators in turn have prepared 275 Unilever peer educators. In compliance with Kenya’s 2000-2005 strategic plan, the company makes a concerted effort to have greater involvement of people living with HIV (GIPA) in the creation and maintenance of company HIV programs. The HIV prevention programs focus on the distribution of male and female condoms, the prevention of mother-to-child transmission, and post-exposure prophylaxis. People living with HIV/AIDS benefit from a non-discrimination policy, support groups, Highly Active Antiretroviral Therapy (HAART), Voluntary Counseling and Testing (VCT), and registration in the HIV wellness program, which has already enrolled 750 individuals. Externally, the company collaborates with a variety of partners—Kenya HIV Aids Business Council, Kenya Tea Growers Association, Walter Reed, National Organization of Peer Educators, GTZ, World Economic Forum Global Health Initiative Taskforce, and schools—to bring its programs into the local community.

GBC STATUS: Unilever Tea Kenya has been a GBC member company since July 2001.

LEARN MORE: www.unilever.com
PERSONNEL: Financial services provider Standard Bank employs 28,518 people in its South Africa operations, and more than 6,000 workers in its operations around the world.

LOCATION GUIDE: Based in South Africa, Standard Bank operates in 17 African countries and 21 countries on other continents, including the key financial centers of Europe, the Americas, and Asia.

MINDING ITS BUSINESS: The company was established in 1862 as the Standard Bank of British South Africa Ltd, and was formed and registered as a South African company in 1962. Today, Standard Bank is one of the top four banks in South Africa, providing a range of retail, commercial, corporate, investment banking, and insurance services.

FIRST AID: In 1997, Standard Bank became a founding member of the South African Business Coalition On HIV/AIDS (SABCOHA). In 2002, the company launched its integrated HIV/AIDS program, which stressed the need for transparency, openness, and integrity. Standard Bank emphasizes a holistic approach to employee health through a dedicated corporate health department, and a free confidential counseling and advisory service for employees and their dependents, facilitated through the Independent Counseling and Advisory Service (ICAS). Treatment support is provided through its Bankmed medical program.

FLASH POINT: In 2004, the South African Department of Health Study of antenatal clinics estimated that 6.29 million South Africans were living with HIV, including 3.3 million women and 104,863 babies. The same study found that of the country’s nine provinces, Gauteng—where Standard Bank has its headquarters—had the second highest prevalence rate, with 33.1% of its population infected.

STANDARD’S RESPONSE: In addition to formalizing a clearly articulated HIV/AIDS non-discrimination policy, Standard Bank has spent the past three years implementing a variety of creative health programs and testing initiatives. The company has trained almost 450 “wellness champions,” who are provided with basic HIV/AIDS medical facts, the company’s policy on life-threatening diseases, and instructed in how to access services from ICAS and Bankmed. In 2003, free condom dispensers were installed across South African facilities and an estimated 100,000 condoms are distributed each month. In 2004, the company piloted its Bankmed Health Risk Assessment (HRA) tool to determine employee overall health. Body mass index, nutrition, stress level, exercise, and other lifestyle-related concerns were all measured. In 2005, Standard Bank launched its 16 Days of Activism: Issues of Gender Violence and Children’s Rights campaign, which highlighted violence as a human rights violation and focused on the link to women and HIV. Designed to encourage employees to take greater interest in their personal health and eventually undergo voluntary counseling and testing (VCT), the HRA will be rolled out to all South African staff in 2006.

GBC STATUS: Standard Bank is not a GBC member company.

LEARN MORE: www.standardbank.co.za
OUTSTANDING BUSINESS ACTION ON HIV/AIDS

PERSONNEL: A leader in snack foods and beverages, PepsiCo employs 157,000 people around the globe, with 1,600 employees in South Africa.

LOCATION GUIDE: A wholly owned subsidiary of PepsiCo since December 1999, the proudly South African Simba is based in Johannesburg.

MINDING ITS BUSINESS: PepsiCo Inc. was founded in 1965 when Donald M. Kendall and Herman W. Lay merged the Pepsi-Cola and Frito-Lay companies. PepsiCo today consists of Frito-Lay North America, PepsiCo Beverages North America, PepsiCo International, and Quaker Foods North America. Many of the company’s brands have been in business for more than 100 years; its products are now available in nearly 200 countries and territories, generating 2005 revenues of more than US$32 billion.

FIRST AID: In 2001, seven Simba employees were living with HIV/AIDS. Though not a huge number, this figure sounded an alarm, alerting the company of the growing threat to employee health. Simba decided to create an HIV/AIDS workplace program, but found the disease stigma had inhibited other companies from developing any models worth emulating. A true pioneer, Simba decided the best way to reach its employees was through its employees. It contacted the state’s Department of Health and obtained material to conduct Peer Educator training. Thirty-two peer educators and six professional HIV/AIDS counselors were trained and in 2002, Simba adopted a formal HIV/AIDS policy.

FLASH POINT: At the end of 2003, UNAIDS estimated that 5.3 million South Africans were infected with HIV. South Africa has the largest number of infected individuals living in any single nation and a prevalence rate of almost 22%. Some 13% of all the people living with HIV in the world are in South Africa, and data from antenatal clinics reveals that the HIV prevalence rate among pregnant women rose between 2000 and 2004.

PEPSICO’S RESPONSE: Simba spent three years establishing its extensive prevention and education programs, providing testing and treatment assistance to employees, and conducting community outreach in partnership with the Nelson Mandela Children’s Fund. In 2004 and 2005, the company worked with benefits consultant firm Alexander Forbes to extend its Direct AIDS Intervention Program to all employees and their spouses. Today, the full treatment program includes an independently administered 24-hour call center, ongoing clinical management, enhanced voluntary counseling and testing, drug and vaccine provisions, and confidential monitoring and training for all new programs. Simba’s model has become the best practice in PepsiCo’s HIV/AIDS workplace program shared among worldwide operations.

GBC STATUS: PepsiCo has been a GBC member company since May 2003.

LEARN MORE: www.pepsico.com
PERSONNEL: The world’s fourth largest publicly traded oil and gas company, Total employs 121,000 people worldwide, with 100 employees in Ouagadougou and Bobo-Dioulasso, its two Burkina Faso plants.

LOCATION GUIDE: Total is based in France and has operations in more than 130 countries.

MINDING ITS BUSINESS: Total’s operations span the entire oil and gas chain, from exploration, development and production to gas midstream refining and marketing, and crude oil and petroleum product trading and shipping. A world-class chemicals producer, Total also has interests in coal mines, cogeneration and power generation. Dedicated to securing the future of energy, the company is committed to developing renewable energies, such as wind, solar, and photovoltaic power. Total’s Burkina Faso operation distributes oil products.

FIRST AID: Total began implementing programs to prevent and treat HIV/AIDS in 2003. Its initiatives include information, prevention, voluntary testing and, where applicable, treatment for employees and their families. Special attention is paid to maintaining confidentiality and, in line with Total’s Code of Conduct, non-discrimination toward people living with HIV/AIDS. The company began conducting regular HIV/AIDS prevention campaigns in its sub-Saharan Africa and Caribbean subsidiaries and now holds them in its Asian operations. The company also runs prevention programs in its South Africa, Kenya, Nigeria, Djibouti, and Gambia subsidiaries; its Burkina Faso subsidiary is a pilot for the implementation of the company’s first comprehensive HIV/AIDS workplace program in this country.

FLASH POINT: Burkina Faso has the second highest HIV/AIDS prevalence rate in West Africa. At the end of 2003, UNAIDS reported that an estimated 270,000 adults (defined as individuals between the ages of 15–49) were living with HIV/AIDS, including 150,000 women. The country’s adult prevalence rate was 4.2%; Burkina Faso was also home to 260,000 AIDS orphans. In 2003, the country experienced 29,000 AIDS-related deaths among adults and children.

TOTAL’S RESPONSE: Supported by an HIV/AIDS committee comprised of eight employees, the Total Burkina Faso workplace program conducted a survey of the entire workforce. Aimed at assessing HIV/AIDS knowledge, the questionnaire showed that while all employees were aware of AIDS, 75% believed they knew no person at risk, many had limited understanding of the difference between HIV and AIDS, and only 21% had ever taken an HIV test. Initially focused on awareness and education activities, Total Burkina Faso offers voluntary confidential testing, and access to treatment for employees and their dependents living with HIV/AIDS. Since the program’s launch, 60% of the Burkina Faso plant’s workforce has been tested for HIV. Total is also striving to improve health care for villagers in the region. With the company’s financial support, a health post in Tambiga is being transformed into a Health and Social Welfare center improving access and quality of care for 12,000 people in the community.

GBC STATUS: Total has been a GBC member company since June 2003.

LEARN MORE: www.total.com
PERSONNEL: South West Railway employs 70,000 people in Ukraine.

LOCATION GUIDE: Headquartered in the capital city of Kiev, the Railway operates in seven of Ukraine’s 25 regions.

MINDING ITS BUSINESS: One of the oldest transportation companies in Eastern Europe, state-owned South West Railway has long functioned as a major throughway between southern Russia and Moscow, Warsaw, and the Baltic Sea ports. Today, the Railway spans approximately 4,000 miles of track, branching from Kiev and serving passengers at 300+ stations in many historical, resort, and industrial centers of modern Ukraine, as well as in some smaller remote towns. The Railway, which also provides freight train services, is one of six railways in Ukraine.

FIRST AID: In 2004, South West Railway responded to the new government’s HIV/AIDS warning, adopting a workplace policy in some of its subdivisions. That same year, in compliance with the resolution of the Trade Union of Railway Workers and Transport Builders of Ukraine, the company flashed the green light for HIV/AIDS prevention efforts to run on all of its tracks. SMARTWork—an HIV workplace program run by the Academy for Educational Development (AED)—was implemented throughout the Railway’s operations. Ukraine law mandates that treatment be administered at government-run clinics only, but the Railway provides employees with free condoms, voluntary counseling and testing, referrals for anti-retroviral treatment, and legal consultations on stigma and discrimination. In collaboration with international and local organizations such as International AIDS Alliance Ukraine, UNAIDS, and ANTIAIDS Fund, the Railway regularly holds educational seminars for workers and medical staff.

FLASH POINT: In 1994, Ukraine reported fewer than 80 new cases; by 1997, the number of total infections was 25,000. In 2005, with an estimated 1.7 percent of its adult population living with HIV/AIDS, Ukraine had Europe’s highest prevalence rate and was home to one of the world’s fastest spreading epidemics. Until 2004, the epidemic was most prevalent among intravenous drug users, who accounted for 70% of all government-registered cases. Today, women and children are also among the most affected populations. The combination of stigma, lack of knowledge, and law enforcement and healthcare system corruption exacerbates Ukraine’s HIV/AIDS situation. According to U.N. reports, only 14% of young people in Ukraine have a comprehensive understanding of HIV/AIDS; only 9% of young women can name three ways to prevent HIV transmission; and 79% of all Ukrainians have at least one general misconception about the disease.

SOUTH WEST’S RESPONSE: With young people facing the highest risk for HIV/AIDS infection, South West Railway initiated its Youth Volunteer Movement to train peer educators. In 2005, 16 young employee peer trainers conducted 150+ educational sessions delivering prevention messages and AIDS information to more than 2,500 coworkers; the young trainers are scheduled to expand South West’s programs to other Ukrainian railroads. In addition, the Railway sponsored 400 young employees in the 2005 Race for Life—an HIV/AIDS awareness event in Kiev. Through a partnership with ANTIAIDS Fund, the company placed prevention and informational videos throughout rail stations and in the Kiev subway. The short cartoon-like films feature a charismatic condom-conscious doctor who explains that AIDS cannot be transmitted by touching, kissing, or using a public toilet, but warns against sharing razors.

GBC STATUS: South West Railway is not a GBC member company.

LEARN MORE: www.swrailway.gov.ua/en
PERSONNEL: The National Basketball Association, a professional sports league, has 1,100 employees.

LOCATION GUIDE: Based in New York City, the NBA has 30 member franchises in North America.

MINDING ITS BUSINESS: Since its first tip off in 1946, the NBA has become a global sports and entertainment phenomenon that features 30 teams in the U.S. and Canada. The NBA—including the WNBA and NBA Development League—is also an established leader in sports marketing, currently maintaining its longest list of fully integrated domestic and global marketing partnerships with the most recognizable brands in the world. During the 2005-06 season, the NBA will distribute 44,000 hours of programming to 215 countries and territories in 43 languages and is on pace to eclipse attendance records for the third consecutive season. The league’s global appeal is further evidenced by its record 82 international players on NBA rosters, representing 38 countries and territories.

FIRST AID: The NBA’s “Basketball without Borders” program sponsors camps where promising basketball players under age 19 receive training in leadership, life skills, healthy and safe living, and HIV/AIDS awareness and prevention. The first camp was held in Treviso, Italy, for 50 teens from war-plagued Eastern European countries. Proving that basketball transcends language barriers and creates a common background for global peace, friendship, and sportsmanship, Basketball without Borders successfully convenes young people from diverse national and economic backgrounds. The program’s success is facilitated by high-level involvement from some of the most committed NBA players. To date, more than 120 NBA players, coaches and personnel from 29 teams have participated, guiding more than 700 young athletes from nearly 100 countries and territories. The NBA family—including superstars such as Dikembe Mutombo, Tony Parker, Yao Ming, Marcus Camby, and Bob Lanier—have traveled more than 85 million miles and logged more than 1 million hours of community service while participating in the program.

FLASH POINT: In Brazil, Argentina, China, and South Africa—countries with high incidences of HIV/AIDS targeted by the Basketball without Borders program—child mortality rates are 20 to 100 percent higher than they would be without the burden of the disease. In these countries, many children who survive their early years are not expected to live beyond their mid-30s.

NBA’S RESPONSE: Basketball without Borders camps have been held in Asia, Africa, Europe, and South America, all culminating with the Basketball without Borders Legacy Project: A refurbished recreation facility or state-of-the-art Reading & Learning Center left behind for a local NGO to ensure that families and children in the area have safe places to live, learn, and play. Legacy centers now stand in Rio de Janeiro, Buenos Aires, Beijing, Johannesburg, and Soweto. Launched in 2001, Basketball without Borders is a cornerstone of the company’s NBA Cares program, which pledges to contribute US$100 million for charity, donate more than 1 million hours of volunteer service to communities worldwide, and build more than 100 centers for families and children.

GBC STATUS: The National Basketball Association has been a GBC member company since January 2002.

LEARN MORE: www.nba.com
PERSONNEL: Healthcare company Johnson & Johnson employs 115,600 people on six continents.

LOCATION GUIDE: Along with its global headquarters in New Jersey, Johnson & Johnson has more than 200 operating companies in 57 countries. It sells products in more than 175 countries.

MINDING ITS BUSINESS: Since its launch in 1886, Johnson & Johnson has grown into the world’s most comprehensive and broadly based manufacturer of health care products, and leading provider of related services to the consumer, pharmaceutical, medical device, and diagnostic markets. Its work with community partners is focused on five platforms: Women’s and Children’s Health; Community Responsibility; Access to Health Care; Advancing Healthcare Knowledge; and Global Public Health.

FIRST AID: Launched in the mid-1990s, Johnson & Johnson’s HIV/AIDS philanthropic program structure and operations are modeled after its overall approach to community responsibility defined in the Company’s Credo. As a member of the donor community, Johnson & Johnson has sought to incorporate within its focused worldwide strategy the diverse, grass-root aspirations of national and community-based program efforts that impact the lives of women, children and families. Since most community caregivers are women, Johnson & Johnson’s more than 100 philanthropic investments in HIV programs in 30 countries attempt to capture the breadth of the epidemic reflected from their perspectives. The company focuses on preventing infections in women and children, and supporting communities by empowering caregivers.

FLASH POINT: According to the World Health Organization (WHO), Brazil has the second highest absolute number of AIDS cases in the Americas. More than 300,000 AIDS cases have been reported to its Ministry of Health, and it is estimated an additional 660,000 people are living with HIV. Since 1990, the number of AIDS cases among Brazilian women has increased significantly, including among girls between the ages of 13-19. Brazil’s diverse epidemic has touched all 26 of its states. AIDS has been identified as one of the major causes of death in Sapopemba (pop., 1 million), in the state of São Paulo. Meanwhile, the incidence rate almost doubled from 1995 to 2004 in the state of Ceará, with more than 4,000 cases (65% of Ceará’s total) registered in the municipality of Fortaleza.

JOHNSON & JOHNSON’S RESPONSE: Johnson & Johnson organizes its HIV/AIDS philanthropic investments into six key themes: Beyond the Dollars: Applying Core Business Strengths; Preventing Pediatric AIDS; Reducing Rates in Women; Supporting Caregivers; Building Capacities of Communities; and Caring for Orphans and Vulnerable Children. In 2004 and 2005, Johnson & Johnson donated much-needed fiscal support to two community programs in Brazil. First, the company sponsored an Associação Saúde de Família (ASF) project in Sapopemba, which increased sustainable access to HIV/AIDS prevention and care services for 108,000 women and adolescents. Through a second ASF project, Johnson & Johnson donated resources to a one-year study targeting 30,000 women and adolescents in Ceará. The interim report showed 46 teams of health professionals had been trained to conduct effective door-to-door prevention and care activities. Consequently, more than 25,000 door-to-door contacts were systematically and repeatedly performed from October to December 2005, facilitating condom distribution, HIV and syphilis testing, and Hepatitis B vaccination.

GBC STATUS: Johnson & Johnson has been a GBC member company since September 2002.

LEARN MORE: www.jnj.com
PERSONNEL: Kerzner International employs over 12,000 people worldwide and is the largest private employer in The Bahamas: 6,000 people work at its One&Only Ocean Club and Atlantis, Paradise Island resorts alone.

LOCATION GUIDE: Kerzner International has operations throughout The Bahamas, Mexico, the Maldives, Mauritius, and the UAE and support offices across Europe, South Africa and the US. New Kerzner properties are being developed in the United Kingdom, South Africa, Dubai and, Morocco.

MINDING ITS BUSINESS: Kerzner International is a leading international developer and operator of destination resorts, casinos, and luxury hotels. Its flagship brand is Atlantis, which includes a 2,317-room ocean-themed destination resort on Paradise Island, The Bahamas. Kerzner is now extending the brand with the development of Atlantis, The Palm, Dubai, a 1,500-room water-themed resort scheduled to open in late 2008.

FIRST AID: Launched in 1991, Kerzner International began its HIV/AIDS work by offering educational, awareness, and prevention campaigns at its former resort in Sun City, South Africa. When the company left South Africa and expanded into the Caribbean, Kerzner immediately recognized that limited funding for ARV therapies mandated private-sector involvement. With the Bahamian government and the Clinton Initiative as partners, Kerzner reached out to local communities and organizations to improve the quality of life for people living with the disease; reduce transmission rates among women and children; and develop a national /regional HIV/AIDS resource center. In anticipation of World AIDS Day, the Atlantis resort now designates November as AIDS Awareness Month and works with the Bahamian AIDS Secretariat, offering a series of educational programs to all hotel employees. Concerned that the Bahamas has only two HAART (highly active antiretroviral therapy) facilities, the company is currently working to decentralize HIV/AIDS care through patient outreach, healthcare worker training, record management, and pediatric care expansion programs.

FLASH POINT: The Caribbean has the second highest regional HIV/AIDS prevalence rate, exceeded only by Africa. The Bahamas’ first confirmed AIDS case was reported in 1983; by the end of 2000, AIDS was the leading cause of death in the general population, including those in the 15-44 age group. Unlike many Caribbean countries, the Bahamas has adopted a proactive HIV/AIDS policy: ARV treatment has been readily available since 1995. Still, in 2002, 15% of its 10,250 people living with HIV/AIDS declined to seek treatment.

KERZNER’S RESPONSE: In 2001, Kerzner began hosting the Michael Jordan Celebrity Invitational Golf Tournament at its Atlantis, Paradise Island Resort. For the past five years, the company has produced a highly lucrative celebrity-studded event featuring such high-powered names as Michael Jordan, Charles Barkley, Chris Tucker, Bill Clinton, John McEnroe, Barry Bonds, Mia Hamm, and Angie Everhart. Half of the proceeds from this annual event benefit the Kerzner HIV/AIDS Initiative, which has achieved its financial goal. By January 2006, a total of 2,000 Bahamians were receiving ARV treatment at a cost of US$140 per patient, a significant decrease from the original $3,500 price tag the drugs once fetched.

GBC STATUS: Kerzner International has been a GBC member company since September 2003.

LEARN MORE: www.kerzner.com
PERSONNEL: Pharmaceuticals and medical products, including nutritionals, diagnostics and devices; Abbott employs 65,000 people around the world.

LOCATION GUIDE: Abbott is based in suburban Chicago, with offices and affiliates in 100 countries on five continents.

MINDING ITS BUSINESS: Abbott was established in 1888 when Dr. Wallace C. Abbott transformed his home-based attic operation into a leading healthcare company. Today, Abbott discovers, develops, manufactures, and markets innovative products and services that span the continuum of care—from prevention and diagnosis to treatment and cure for some of the world’s most prevalent medical conditions, including HIV/AIDS.

FIRST AID: Abbott’s HIV/AIDS efforts date to 1985 when the company licensed its first HIV test. Abbott and the firm’s philanthropic arm—The Abbott Fund—are investing US$100 million to fight HIV/AIDS in the developing world. In 2000, the Fund collaborated with the Tanzanian government to introduce the Step Forward program at three sites. A long-term international program, Step Forward assists children, families and communities affected by AIDS by improving local health care services, providing voluntary HIV counseling and testing, supporting primary and secondary education programs, and providing for basic community needs. The initiative is currently operating in Burkina Faso, India, Malawi, Romania, and Tanzania. Abbott also regularly donates medical products and educational materials to regions where HIV/AIDS has had a devastating impact.

FLASH POINT: One of the poorest countries in the world, Tanzania has an average life expectancy of just 40 years. Tanzania is home to 1.6 million people currently living with HIV/AIDS, and this number is rising, with women representing well over 50% of the infected population. The country’s prevalence rates hover around 9%. In 2003, Tanzania had 980,000 AIDS orphans, the third highest number in sub-Saharan Africa. In that same year, Tanzania was fifth in the world in the number of AIDS-related deaths.

ABBOTT’S RESPONSE: Through its partnerships with the Tanzanian government and local NGOs, Abbott initiated a public–private partnership to modernize national public healthcare infrastructure. Abbott employees also volunteered in the areas of construction, engineering, facility and equipment maintenance, healthcare management, information technology, and security. Working in collaboration with a local team, Abbott built a three-story outpatient center and state-of-the-art clinical laboratory, trained 4,200 healthcare workers in effective HIV patient care, improved facilities at more than 32 schools and health centers, and provided volunteer counseling and testing (VCT) to 65,000 people. Program elements also included an innovative medical record-tracking system, a stigma-reduction plan that integrates people with HIV into the same setting as patients with other illnesses, and provision of community-based paralegal services to protect orphans and widows.

GBC STATUS: Abbott has been a GBC member company since January 2002.

LEARN MORE: www.abbott.com
PERSONNEL: Beauty products leader L’Oréal employs 52,403 people worldwide, with 700 working in South Africa.

LOCATION GUIDE: Headquartered in Clichy, France, L’Oréal has offices in 58 countries. Its products, including 17 global brands, reach 130 countries on five continents.

MINDING ITS BUSINESS: L’Oréal derives its name from the French word “auréole” (“aura of light”). In 1909, the company branded the first synthetic hair color invented by Parisian chemist Eugène Schueller. Today, L’Oréal is the world’s leading creator of makeup, perfume, and hair- and skin-care products. Beauty is the company’s core, but good looks are not its only specialty. Since 1998, L’Oréal has partnered with the United Nations Educational Scientific and Cultural Organization (UNESCO), instituting a “For Women in Science” program that annually recognizes five leading women researchers from different continents. To date, over 350 women have participated in the program through international fellowships.

FIRST AID: In 2002, L’Oréal launched a comprehensive HIV/AIDS prevention and treatment program for its 700 South Africa employees, providing voluntary counseling and anonymous testing, mother-to-child transmission prevention services, free condoms, a 24-hour HIV crisis hotline, and anti-retroviral treatment coverage to all employees and their dependents. Driven by the success of this workplace program, L’Oréal began searching for ways to bolster and expand its efforts. It didn’t have to look far: L’Oréal distributes six professional hair-care brands in 127 countries. Each product line has a professional training center network. Globally, these networks employ more than 3,000 trainers in 190 full-time centers, reaching 400,000 people. In sub-Saharan Africa, the SoftSheen Carson brand has contacts with thousands of hairdressers each year, providing an excellent opportunity to expand prevention efforts.

FLASH POINT: The World Health Organization (WHO) estimates that 1,000 South Africans die of AIDS-related illness daily. Going to funerals has become more commonplace than getting a haircut. Lack of education, exacerbated by 85% illiteracy rates, has halted prevention efforts and there is a particular need for innovative methods of introducing HIV/AIDS materials. Stigma about the disease, particularly prevalent in underdeveloped rural areas, continues to plague the country.

L’ORÉAL’S RESPONSE: Beauty may be in the eye of the beholder, but L’Oréal’s commitment to fight AIDS is visible to all. After calculating that they regularly reach two million hairdressers worldwide, the company realized that this network was a unique channel to communicate essential information about HIV/AIDS prevention. It launched its “Train the Trainers” program in South Africa to empower salon owners and workers with key HIV/AIDS prevention and anti-stigma messages imparted through movies and candid discussions not dependent on formal education. Initiatives like “One man, one blade” stressed the importance of sterilizing razor blades and became second-nature. In May 2005, “Hairdressers of the World against AIDS” was born and launched in partnership with UNESCO. Begun in Africa, the program reached India, Brazil, and France in 2005. By the end of this year, the initiative will reach at least seven countries—Estonia, Latvia, Lithuania, Malaysia, the U.K., Indonesia, and the Philippines. The culturally sensitive program concentrates on nation-specific concerns. In Brazil, for example, the initiative was rebranded “Attention to beauty is care for health” to reinforce local views about attention to splendor.

GBC STATUS: L’Oréal has been a GBC member company since February 2003.

LEARN MORE: www.loreal.com
PERSONNEL: British multinational manufacturer and healthcare product distributor SSL International, employs 5,000 people worldwide, with 1,000 workers based in the U.K.

LOCATION GUIDE: SSL maintains global headquarters in London and operates from commercial offices in more than 35 countries, selling to 130+ markets worldwide. It has manufacturing capabilities in Thailand, Spain, and the U.K., as well as joint venture manufacturing in India and China.

MINDING ITS BUSINESS: Parent company to Durex, the world’s leading condom manufacturer, SSL International was born in 1999 through the merger of Seton Healthcare, Scholl, and London International. Today, the company’s brands include Syndol (adult oral analgesics), Meltus (cough medicines), Sauber (hosiery), and Mister Baby (mother and baby products).

FIRST AID: Since 1995 Durex has conducted the Global Sex Survey, now under the aegis of its Durex Network initiative, an outgrowth of the company’s successful social marketing activity. The condom manufacturer has also coordinated National Condom Week since 1997, employing a variety of activities to educate U.K. teenagers and young adults on the importance of correct and consistent condom use. The Durex Network also sponsors Program H (targeting Brazilian men), Yaari Dosti (aimed at young men in India), and Dance4Life (reaching young people worldwide).

FLASH POINT: HIV/AIDS is often misperceived as a problem exclusive to the developing world. In “The Face of Global Sex,” the report summarizing results of “The Durex Global Sex Survey”—the world’s largest annual online sex survey—SSL dispels many myths and provides accurate information about global sexual attitudes and behavior. The 2005 survey revealed that a nation’s wealth is a major predictor of its rate of unprotected sex, and that people from higher-income countries are more likely to gamble with their sexual health than people in lower-income countries. Completed by more than 317,000 people in 41 countries, the data also revealed that almost half of all people worldwide (47%) say they have had unprotected sex with a partner whose sexual history they did not know, and that the average age for first sex is now 17.3 years old.

SSL’S RESPONSE: Ever since the earliest days of the AIDS pandemic, experts have debated whether sexual attitude and behavior campaigns should focus on specific high-risk groups. As creator of the world’s largest online survey of sexual attitudes and behavior, the Durex Network realized it was in a unique position to shed light on this important subject. After collating the 317,000 responses to its 2005 survey, it enlisted public health academics to produce and synthesize key findings. Now available free of charge online, “The Face of Global Sex” was presented to government leaders, international public health groups, academic panels, publications, and conferences to inform and spur action. The report, which underlines the importance of age-appropriate prevention policies and reiterates that safe-sex messages must be reinforced after young people complete school, produced an overwhelmingly positive response. Durex is committed to updating its findings annually, incorporating nation-specific findings and focusing on a key theme or issue each year.

GBC STATUS: SSL International has been a GBC member company since July 2001.

LEARN MORE: www.ssl-international.com
PERSONNEL: eLearning, gaming, and edutainment developer ZMQ Software Systems employs 27 people.

LOCATION GUIDE: New Delhi, India

MINDING ITS BUSINESS: Since 1998, ZMQ Software has been delivering solutions to corporate, educational, non-profit, and research organizations all over the world on a variety of platforms, including mobile phones and Internet-based Community Learning Centers.

FIRST AID: For several years, ZMQ Software has developed and distributed eTools, eGames, and eLearning CDs to promote HIV/AIDS awareness among children. On World AIDS Day 2005, the company launched its Freedom HIV/AIDS program. Supported by the Delhi State AIDS Control Society, the initiative provides four free cell phone “edutainment” games designed to increase HIV/AIDS awareness.

FLASH POINT: An estimated 5.13 million of India’s 1 billion people are living with HIV/AIDS, making the country’s epidemic second only to the devastating situation in South Africa. Stigma, illiteracy, and sexism present enormous hurdles to prevention efforts. Seldom educated alongside men, 60% of women in India have never even heard of AIDS; 33% of women with minimal disease knowledge do not know how to avoid infection. U.S. intelligence sources predict that if the disease remains unchecked, India will sustain between 20 and 25 million HIV infections by 2010 as the disease transcends traditional high-risk groups and moves into the general population.

ZMQ’S RESPONSE: Almost everyone in India has access to or owns a mobile phone, a unique opportunity ZMQ seized upon to deliver AIDS awareness information, including public-service announcements, to tech-savvy consumers unmoved by traditional messages. Boasting impressive pop culture appeal, its four free educational games—Safety Cricket, Messenger, Ribbon Chase, and Quiz with Babu—appeal to diverse audiences. A role-play game based on India’s favorite pastime, Safety Cricket encourages sports enthusiasts to protect themselves from unsafe sex, infected blood, and syringes. In Messenger, an easy-to-maneuver adventure game, players help “Dove” spread AIDS awareness to different villages. Ribbon Chase appeals to the professional gamer and challenges players to deliver red ribbons while being chased by the HIV virus. Quiz with Babu requires players to use reasoning to answer questions. Immediately popular, the games were available on 13 million devices on World AIDS Day and now run on more than 15 million phones. By the end of 2006, the company estimates more than 35 million users will be accessing the games. With expansion efforts aimed at China, South Africa, and Kenya, ZMQ has transformed mobile phones from basic communication devices into learning tools.

GBC STATUS: ZMQ Software Systems has been a GBC member company since March 2006.

LEARN MORE: www.zmqsoft.com
PERSONNEL: A subsidiary of Viacom Inc., television network BET has 350 employees.

LOCATION GUIDE: Washington D.C.

MINDING ITS BUSINESS: BET is the leading U.S. provider of television programming geared to a predominantly African-American viewing audience. Founded in 1979, BET was the first Black-controlled television company featured on the New York Stock Exchange. Reaching more than 80 million U.S. households, BET also has a cable jazz channel (BETJ). As the preeminent source of entertainment, music, news, and information for African-American consumers, BET provides contemporary entertainment from an authentic and unapologetic viewpoint of the Black experience.

FIRST AID: Deeply concerned about the impact of HIV/AIDS among its viewers, BET first teamed up with the Kaiser Family Foundation in 1998, creating a comprehensive and sustained media campaign to inform African-Americans about the disease and related issues. In November 2000, on the eve of World AIDS Day, the network partnered with the Kaiser Family Foundation, the Magic Johnson Foundation, XAIDS, Cable Positive, One Voice, and LIFEBeat to launch Rap-It-Up. A national awareness campaign designed to empower people, Rap-It-Up has been widely recognized, garnering numerous Emmy nominations. The campaign has been active in urban cities nationwide, sponsoring on-site HIV testing, team forums, a website, toll-free hotline, and integrated network programming.

FLASH POINT: In 2002, the Centers for Disease Control and Prevention (CDC) reported HIV/AIDS among the top three causes of death for African-American men in the 25-54 age group, and among the top four causes of death for African-American women of the same age. That same year, HIV/AIDS was the No. 1 cause of death for African-American women in the 25-34 age group. From 2001–2004, the rate of HIV/AIDS diagnoses for this demographic decreased, but the rate for African-Americans was still the highest for all racial and ethnic groups. In 2004, African-Americans accounted for 49% of the 42,514 estimated AIDS cases diagnosed in the United States. African-American women are particularly vulnerable to the disease and are 23 times more likely to be diagnosed with HIV/AIDS than white women.

BET’S RESPONSE: Focused on prevention, education, and awareness, BET’s Rap-It-Up recognizes the importance of contextualizing specific issues and targeting particular groups. BET, Kaiser Family Foundation, and Topics Education have created three classroom curriculums in partnership with Cable in the Classroom. The educational materials are complemented by the award winning documentary series, The Naked Truth (Part 1 and Part 3), and Jeff Johnson Chronicles (Part 1 and Part 2). These materials are available free of charge and currently being used by over 2,000 middle and high school teachers. In another initiative, the Rap-It-Up Road Tour partners with local organizations, dispatching a team of BET representatives to urban areas with high infection rates to facilitate distribution of condoms and educational materials, and onsite testing. Partnering with the Black AIDS Institute, BET sponsors a screenplay competition to attract aspiring writers and encourage them to incorporate AIDS messaging into their work. Nor has BET forgotten it must address the disease within its own ranks; each BET employee participates in an individual HIV/AIDS Awareness program and is strongly encouraged to volunteer with an HIV/AIDS organization.

GBC STATUS: BET has been a GBC member company since December 2001.

LEARN MORE: www.rap-it-up.com
PERSONNEL: A global, research-based pharmaceutical company, Merck & Co. Inc., employs more than 60,000 people worldwide.

LOCATION GUIDE: With global headquarters in Whitehouse Station, New Jersey, USA, Merck maintains operations in the Americas, Europe, Asia Pacific, the Middle East and Africa.

MINDING ITS BUSINESS: Established in 1891, Merck discovers, develops, manufactures, and markets vaccines and medicines to address unmet medical needs. The company works diligently to increase access to medicines through far-reaching programs that donate Merck products and ensure their delivery to developing countries. Merck also publishes unbiased health information as a public service.

FIRST AID: Merck launched its HIV/AIDS efforts in 1986, developing a full-scale HIV research program that clearly acknowledged the severity of the epidemic. In the 1990s, Merck scientists discovered two antiretrovirals, efavirenz and indinavir sulfate. Today, one of Merck’s HIV vaccine candidates is in Phase II development, with clinical trials under way on several continents. In 2001, the company introduced a differential pricing policy for the drugs Crixivan™ (indinavir sulfate) and Stocrin™ (efavirenz) based on where countries stand in the UNDP Human Development Index (HDI) and the impact of the epidemic as measured by adult HIV prevalence as reported by UNAIDS. For countries in the low HDI category and midrange HDI countries with HIV prevalence of 1 percent or more, Crixivan is now available at US$600 per patient per year, and the 600 mg formulation of Stocrin is available at US $277.40 per patient per year; at these price levels, Merck makes no profit on these medicines in the poorest countries and those hardest hit by the HIV epidemic.

FLASH POINT: In 2000, the sub-Saharan nation of Botswana had the highest reported HIV rate in the world. Approximately 300,000 people were infected with the virus, including at least 35% in the 15-49 age group. When Merck launched the African Comprehensive HIV/AIDS Partnerships (ACHAP) together with the Government of Botswana and the Bill and Melinda Gates Foundation that same year, the country had not yet experienced the full impact of the epidemic, yet HIV/AIDS was already threatening its very existence. In 2003, sentinel surveillance reports estimated that nearly 38% of the country’s adult population was HIV-positive.

MERCK’S RESPONSE: Merck’s collaboration with the Government of Botswana and the Bill & Melinda Gates Foundation has cultivated a sense of confidence and common cause. All ACHAP-supported programs adhere to the Government of Botswana’s National Strategic Framework for HIV/AIDS 2003-2009. Immediate ACHAP results include support to the Government’s antiretroviral treatment program, which, with more than 50,000 patients on treatment, is one of the largest such programs in Africa; financial grants to more than 100 local projects targeting behavior change, HIV/AIDS awareness and education, home-based care, orphan care and palliative care; the countrywide distribution of condoms; and support of a distance education program on HIV/AIDS education that has reached more than 4800 teachers and nearly four-fifths of all primary and secondary schools. WHO has stated that Botswana is one of only three African countries to have exceeded the target of treating more than 50% of the HIV patients who require antiretroviral therapy: Namibia at 51%, Uganda at 71%, and Botswana at 85%.

GBC STATUS: Merck & Co. Inc. has been a GBC member company since July 2001.

LEARN MORE: www.merck.com

OUTSTANDING BUSINESS ACTION ON HIV/AIDS

NATIONAL ACTION WINNER: MERCK (BOTSWANA)
PERSONNEL: Global communications consultancy APCO employs 400 people worldwide, with 65 in China.

LOCATION GUIDE: The company has offices in major cities throughout North America, Europe, Asia, Africa, and the Middle East. APCO China has offices in Beijing, Shanghai, Guangzhou, and regional headquarters in Hong Kong.

MINDING ITS BUSINESS: With its four offices in China, APCO is the country’s leading integrated public affairs and strategic communications firm. It has provided investment, government relations, and communications solutions to companies in China since 1989. Serving clients large and small, APCO China guides every stage of business development, including market research and entry, strategy formulation, partner identification and due diligence, joint venture negotiation, direct government advocacy, NGO and media engagement, investor relations, corporate social responsibility (CSR), crisis communication, and coalition building.

FIRST AID: APCO China’s HIV/AIDS initiatives began in 1997, when London International Group hired the company to help establish the first joint venture condom facility. APCO embraced the project, developing a thorough understanding of the condom market; two years later, it acquired a related assignment for the health consultancy Futures Group Europe. Though APCO was initially hired to help select an appropriate Chinese condom manufacturer, Futures’ China Director Tim Manchester became increasingly concerned about China’s lack of corporate involvement in HIV/AIDS initiatives. He noted the private sector’s absence and commissioned APCO to conduct a business action survey, which confirmed his suspicions. Next, UNAIDS hired the company to develop a “Blueprint for Corporate Engagement in China.” APCO consultants were extremely passionate about the project, and the United Nations publicly recognized company efforts as “above and beyond the call of duty.”

FLASH POINT: In January 2006, the Chinese Ministry of Health estimated that the country now has 650,000 cases.

APCO’S RESPONSE: When APCO launched its early HIV/AIDS activities, the disease was a taboo subject that companies were afraid to confront publicly. APCO has been advocating business action to other companies since 2003. In 2004, APCO offered invaluable services to the GBC, assisting with stakeholder relations, including managing the China Working Group, and brokering a partnership with the Chinese Ministry of Health. In March 2005, APCO organized the Joint Summit on Business and AIDS in China, which facilitated crucial business, civil society, and government partnerships. The company donated US$318,000 worth of pro bono services in 2005.

GBC STATUS: APCO Worldwide has been a GBC member company since June 2004.

LEARN MORE: www.apcoworldwide.com
PERSONNEL: Xstrata Plc employs 24,000 workers globally, with 11,500 people in South Africa.

LOCATION GUIDE: With headquarters in Zug, Switzerland, Xstrata Plc has operations in eight countries on four continents. Xstrata Coal South Africa operates 10 coal mines in Mpumalanga Province South Africa and has 4,000 employees.

MINDING ITS BUSINESS: Dedicated to the extraction of natural resources, Xstrata has mines in Australia, South Africa, Spain, Germany, Argentina, Peru, the U.K., and Canada. The company derives 50 percent of its profits from selling coal. Its South African branch is the third largest exporter of thermal coal globally.

FIRST AID: In 2002, Xstrata Coal South Africa (XCSA) identified 20% of its South African employees as HIV-positive through a Prevalence survey. In response, the company launched a comprehensive HIV/AIDS Workplace Program in 2004. In the program's early stages (the Initiation Phase), 78% of employees underwent voluntary testing and counseling. Recognizing the need to support access to appropriate care and treatment in the wider community, the company has recently expanded its primary healthcare services beyond the workplace within a Public-Private Mix service delivery model and is working towards strengthening health services in the districts where it has operations, through a partnership with the provincial government.

FLASH POINT: VCT is the most important entry point in a company’s comprehensive response to HIV and AIDS and can continue to drive the entire program, if this is implemented through an effective intervention strategy. Companies need to consider how to respond to changing intervention needs as their workplace programs mature. Systematizing HIV testing and counseling through a comprehensive workplace program can have profound impact on reducing stigma and discrimination. In a country where adult prevalence rates hover between 18.5% and 24.9%, the government of South Africa is struggling to improve this situation through its comprehensive treatment plan that recognizes the need for private sector participation in the National response. Workforce communities that have access to well managed business responses are bringing hope to employees and their families, with more companies also beginning to explore innovative public-private partnerships and co-investment schemes to strengthen access to services for HIV and AIDS prevention, diagnosis and treatment for the broader community.

XSTRATA’S RESPONSE: XCSA set high expectations from the start of its HIV/AIDS program. Its comprehensive response is driven by “100% Targets” to achieve universal access to HIV testing, prevention, treatment, and care for employees, their dependents, and sexual partners. In 2005, the percentage of employees who knew their status rose to around 89% from 78%; meanwhile, 79% of HIV-positive employees are receiving care and treatment. HIV testing at Xstrata is implemented in a way that promotes self-efficacy (personal health action) through transformational learning and by taking a ‘human needs’ approach to optimizing the experience and meaning of VCT. This is based on the “I Know! the way to live” methodology developed by Re-Action! (the company’s technical implementation partner). Xstrata has made a purposeful decision to move from an Initiation Phase VCT Intervention to Continuous Phase VCT that the company believes is an important investment into the sustainability and performance of its Response.

GBC STATUS: Xstrata Plc has been a GBC member company since February 2005.

LEARN MORE: www.xstrata.com
PERSONNEL: Anglo Coal South Africa employs 7,500 people; 1,998 employees work at Goedehoop Colliery.

LOCATION GUIDE: 40 km (24 miles) east of Witbank in the Mpumalanga province of South Africa, in the heart of the Witbank coal fields.

MINDING ITS BUSINESS: Part of the Anglo American family of companies, Anglo Coal is one of the world’s largest private-sector coal producers and exporters, with operations in South Africa, Colombia, Venezuela, and Australia. Goedehoop Colliery—Anglo Coal South Africa’s most profitable colliery—produces thermal coal for export. Goedehoop also produces a small amount of metallurgical coal for the domestic market.

FIRST AID: Anglo Coal detected the first HIV case in its ranks two decades ago. For 16 years, the company has actively addressed the disease within its workforce and throughout local communities in which it operates. Its earliest comprehensive workplace policies focused on education, awareness, and prevention, and have been expanded in compliance with global workplace HIV/AIDS standards. In addition to wellness, voluntary counseling and testing (VCT), antiretroviral therapy (ART), and gender-specific outreach programs, local mines now engage in community and governmental partnerships.

FLASH POINT: UNAIDS estimates that at the end of 2003, 5.3 million South Africans (21.5% of the adult population) were living with HIV. In 2004, the South African Department of Health study researched 16,000 women attending antenatal clinics across nine provinces. It found the highest prevalence rates in KwaZulu Natal, Gauteng, and Mpumalanga, which had a rate of 30.8%. In 2005, the South African National HIV Survey found that 15.2% of Mpumalanga’s residents aged 2 years and older were HIV-positive, the second highest overall prevalence rate by province.

ANGLO COAL S.A.’S RESPONSE: Believing VCT is integral to an effective AIDS program, Goedehoop created an AIDS Task Force to strategize an effective testing campaign. Comprised of management and union representatives as well as people living with HIV/AIDS, the task force launched extensive “Know Your Status” campaigns in August 2003. Early response was tepid—only 5% of the workforce was tested—but the task team realized that AIDS is a sensitive subject that mandates creativity and perseverance. Goedehoop leaders set specific goals for each World AIDS Day, vowing to encourage all employees to be tested by Dec. 1 and reduce the number of new infections to zero. VCT leadership also introduced “Oraquick Toothbrush” (swab tests) as a quick and painless alternative to blood tests. Today, the Goedehoop Testing Campaign has seen significant improvement: At the end of 2005, 96% of the company’s workforce underwent free VCT. To stress the importance of an annual HIV test, the company sets its “testing counter” to zero at the end of every year. Workers who test positive are guaranteed confidentiality, provided ARV treatment, and required to visit an onsite clinic for monthly checkups, CD4 count monitoring, and viral load tests.

GBC STATUS: Anglo American has been a GBC member company since November 2001.

LEARN MORE: www.angloamerican.co.uk
PERSONNEL: Financial services giant American Express employs 65,000 people worldwide.

LOCATION GUIDE: Headquartered in New York City, American Express operates in more than 130 countries.

MINDING ITS BUSINESS: Established in 1850, American Express was among the first and most successful express delivery businesses to arise during the United States’ rapid westward expansion. After issuing its premier charge card in 1958, the company began introducing local currency cards in markets outside the United States, establishing one of the world’s strongest and most identifiable business and brand names. It is led by CEO Kenneth Chenault, who joined the company in 1981.

FIRST AID: Prior to becoming founding partner of the groundbreaking RED campaign, American Express’ HIV/AIDS commitments were primarily focused on grant-making projects, AIDS walks, and employee volunteering. Since launching American Express RED at the World Economic Forum’s January 2006 conference, the company introduced an awareness campaign for U.K. employees.

FLASH POINT: More than 25 million people have died from AIDS-related causes since 1981. By the end of 2005, an estimated 40 million people were living with HIV/AIDS, including 12 million African AIDS orphans. Young people (ages 15-24) account for half of all new HIV infections worldwide. By December 2005, women accounted for 46% of all adults living with HIV worldwide, and 57% of all infected people in sub-Saharan Africa.

AMERICAN EXPRESS’ RESPONSE: Eighteen months ago, U2 leader Bono approached Chief Marketing Officer John Hayes with a bold new initiative. He identified his project with a simple moniker—Project (Red)—and a clear goal: Boost corporate donations to fight HIV/AIDS in Africa. American Express demonstrated significant leadership, providing its research, marketing, advertising, public relations and corporate social responsibility staff and expertise—as well as its financial resources—for both Project (Red) and a new credit card, American Express® RED. By the time Bono brandished his American Express® RED Card in Davos at The World Economic Forum, Giorgio Armani, Gap and Converse had also pledged to create Red products for the cause.

RETAIL THERAPY: Designed with a “Conscience Consumer” in mind, American Express® RED offers a simple, hassle-free way to support women and children affected by HIV/AIDS, without asking customers to change any of their shopping habits. Officially launched March 1st in the U.K., American Express® RED promises users that for every eligible pound spent, a minimum of 1% will be earmarked for the Global Fund to Fight AIDS, Tuberculosis and Malaria. Promising consumers that “you don’t have to sacrifice good value to do good,” American Express® RED raises critical funds for AIDS programs targeting Africa’s women and children.

GBC STATUS: American Express has been a GBC member company since December 2001.

LEARN MORE: www.americanexpress.co.uk
Created in 2004, the Business AIDS Methodology™ (BAM) is a structured approach to designing a corporate response to HIV/AIDS. Grounded in the experience of hundreds of businesses worldwide, yet specific to each corporation, the BAM facilitates our mission to harness the power of the global business community to end the HIV/AIDS pandemic.

The BAM acknowledges that as unique entities with specific assets, goals, and needs, companies require tailor-made plans of action. What works for one company may not work for another business even if it represents the same sector and displays similar demographics. This philosophy pervades our work—from the initial consultation to continued technical support for formulation and implementation of an effective HIV/AIDS business plan. As a result, the BAM facilitates action commensurate with a company’s overall business strategy, including its use of products and services, management of plants and production, response to markets and consumers, and interactions with governments and communities.

The BAM works: it creates high impact integrated business AIDS strategies to support and sustain GBC member companies.

1. Situation Analysis: GBC helps members define their specific goals and needs. After compiling strategic information, we apply our expert understanding of the industry, region, and key stakeholders and identify the best strategy to maximize company assets and produce quantifiable results.

2. Strategy Design: During this phase, GBC helps members design their HIV/AIDS strategy by identifying implementation partners, making connections with best practice companies, prioritizing options, and sharing effective models.

The Best Practice AIDS Standard™ (BPAS) tool is designed to help companies assess the range and depth of their business HIV/AIDS strategy, using their core competencies, community programs, and public advocacy campaigns. A self-assessment tool, BPAS allows companies to confidentially monitor their business AIDS response and examine their progress. It was created in direct response to ongoing member company requests. GBC believes that a candid evaluation is the first step in encouraging companies to improve programs that protect their workforce and supply chain, and maximize the impact of their products, services and philanthropic efforts on the global AIDS crisis.

Though the tool is simple to use and self-administrable, GBC is available to help member companies with the initial application.

GBC envisions BPAS as an evolving resource to reflect the innovation, new levels of commitment, and emerging operational research in the business response to HIV/AIDS.

The tool’s continued development is facilitated through a coordinated consultation process with GBC member companies, GBC partner organizations and affiliations, on both global and regional levels. GBC anticipates that companies will eventually use the BPAS for their external reporting.

**THE STANDARD HAS TEN PRIMARY COMPONENTS:**

1. Non-discrimination
2. Prevention, Education and Behavior Change
3. Testing and Counseling
4. Care, Support and Treatment
5. Product and Service Donation
6. Corporate Philanthropy
7. Community and Government Partnerships
8. Business Associates and Supply Chain Engagement
9. Advocacy and Leadership
10. Monitoring, Evaluation and Reporting