UMZINYATHI DISTRICT MUNICIPALITY

PROVINCIAL COUNCIL ON AIDS REPORT
PRESENTED BY

DISTRICT AIDS COUNCIL CHAIRPERSON

CLLR PMS NGUBANE

13 SEPTEMBER 2017
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OVCs: child protection week was used to raise awareness in schools around the District on child abuse, human rights and gender based violence. Department of Social Development, Department of Education and NGO sector were leading.

This will also assist on lowering the rate of child abuse (Sexual abuse by relatives), Ukuthwalwa and teenage pregnancy in schools.

Social behavior change programme (You Only Live Once) is being implemented in schools by DSD in partnership with Aids Foundation South Africa in Msinga and Nquthu.
Targeting teenagers ages from 15. The main aim is to reduce the rate of new infections among young people and to reduce risky behaviors.

Substance abuse campaigns are being conducted throughout the District especially in school, with the view to reduce the substance abuse rate among young people, and to raise awareness of the effect of substance.
LIFE SKILLS

- Teenage pregnancy is very high particularly under Nquthu Municipality (Gateway Clinic)
- Community Dialogue will be held in this regard in the next Quarter
- The District held Zazi Campaign in Nquthu & Msinga
- The District together with Departments of Arts and Culture has a programme of engaging with maidens (Siyaya Emhlangeni Maidens Camp)
- Such platforms also helps maidens to get career guidance
PMTCT

- Baby PCR tested positive around 10 weeks rate.
- Currently it is 0.82% and the District is within target of <1%.
- Working towards elimination.
- HIV Testing and initiation of pregnant mothers on ART during antenatal care as per guidelines.
- Emphasis on disclosure to get support from the family.
- Prophylaxis for 6-12 weeks to all HIV exposed babies.
District is doing well and currently is at 1.28% and below the target of 2%.

Promotion of exclusive breastfeeding for 6 months after delivery.

Retesting of mothers every three months during breastfeeding.

Counselling on safe sex during breastfeeding.

Emphasis on disclosure to get support from the family.
The District is currently at 81% and above target of 75%.
Pregnancy test kits are available at all health facilities.
The availability of Family Health Teams is also assisting with this especially at Endumeni.
The CCGs have been trained on the screening of pregnant women and refer them to the clinic for ANC. For Q1 they have tested 2297, out of these women 178 were found to be pregnant and were referred to nearest clinics.
Promotion of testing all women at child bearing age in all Facilities.

Stakeholder engagement, School Health Teams work closely with DOE on identification of pregnant learners and referral to start ANC early.
Number of Infant Deaths in Health Facilities

- Quarter 1: 51
- Quarter 2: 55
- Quarter 3: 45
- Quarter 4: 45

TOTAL: 196

Q1 2017/18: 35

This includes babies from birth up to a year.

Most causes of death in this age group is prematurity (born before time), asphyxia (shortage of oxygen making baby not able to breath properly), sepsis (infection), severe acute malnutrition and herbal intoxication.
Interventions

- Training on Basic Antenatal Care and management of patient in Labour.
- Community awareness on dangers of un prescribed medicines and herbal medicines (Isihlambezo).
- Training on Help Babies Breath (HBB) and neonatal care.
- Implementation of Child survival strategies e.g. Vitamin A, Immunization, growth monitoring and management of malnutrition.
- CCGs are doing Mid Upper Arm Circumference MUAC to identify malnutrition early and refer to Facilities.
Number of Maternal Deaths in Facilities

- Q1 only 1 maternal death, the District doing well.

The District has put more efforts on:

- Early antenatal bookings.

- Trainings on management of pregnant woman, obstetrical emergencies and of Labour.

- Reduction of incomplete abortions due to availability of Choice on Termination of Pregnancy in all Sub Districts.
Number of Maternal Deaths in Health Facilities

- Establishment of Community forums at Sub District level.
- Stakeholder engagement where Maternal deaths were presented and roles and responsibilities of all stakeholders were discussed.
The District is having challenges on sexual assaulted cases for under 12 especially at Nquthu Municipality.

The District Municipality together with Department of Education held an awareness campaigns in ward 14 under Nquthu Local Municipality where the cases of sexual assault was reported.

The District has also engaged Amakhosi in such cases that in their community meetings they must talk about this.
Male Medical Circumcision remains a challenge

Currently the District is embarking on a strategy to recruit more males using Mayoral Izimbizo and Amakhosi

Amakhosi are playing a major role in supporting MMC
HCT and TB Screening

- HCT services have been accelerated to FET Colleges and Taxi ranks within the District
- All clients that are done for HIV counselling and testing are screened for TB
CONDOM DISTRIBUTION - Males

- There has been an increase due to increase in distribution sites and HTA sites.
- The use of Condom Distributors has assisted in improving the condom distribution in the district.
- Targets have been set for each health facility to ensure that the district target is achieved.
- Health Promoter is working with DOH in increasing the distribution of condoms.
The District is doing very well in terms of condom distribution we have reached our target.

CCGs and other field workers further assist with condom distribution.

Health Promoters from Office of the Premier have also helped in accelerating condom distribution.
Sexual Violence

- There is a decline in sexual violence
- Matter has been escalated in war rooms to make community aware
- Engagement of key leaders was done and campaigns have been scheduled to create awareness on sexual Violent cases
- Religious Sector and Amakhosi play a vital role
We are in a process of strengthening war rooms to focus on the issues dealing with HIV/AIDS, TB and STI.

As the new District Mayor I want HIV/AIDS statistics to be displayed in all war rooms.

I will have the programme of visiting every war room in the District in order to ensure that such statistics are displayed.
CORDINATION, MONITORING & EVALUATION

- Only 3 Municipalities are submitting reports

  - We are still having challenge with one Local Municipality in terms of submission of reports and establishment of LAC.

  - We have met with Umvoti in order to assist them with their LAC the Office of the Premier has also assisted in this regard.
Budget constraints at Local and District Level
The District budget for HIV/AIDS was cut from R1m to R400
Non functionality of ward Aids Committee
Launch of LGBTI sector
Non attendance by other sector Departments
Umvoti Local Municipality not yet launched its Local Aids Council
ACHIEVEMENTS

• Community Mapping and 2 days dialogue was held with assistance from Aids Foundation and KZN treasury
  ► District Implementation Plan has been held with all stakeholders
  ► Sector for People Living with HIV is active and they have their plan
  ► Meeting with Amakhosi is held quarterly to update them on any Social issues
The District has managed to trace back people who were diagnosed HIV positive before Universal Test & Treat (UTT) those that CD4 count was still high at that time.

Through campaigns we have managed to get defaulters back to treatment.

Training on Religious Leaders was done except for Umvoti.

Traditional Practitioners Forum was launched in August 2017.
THANK YOU

THUTHUKA MZINYATHI