



**UTHUKELA DISTRICT PRESENTATION
QUARTER 3 2019/20
TO THE KZN PCA MEETING**

**PRESENTED BY: CLLR AS MAZIBUKO
MAYOR OF UTHUKELA DISTRICT MUNICIPALITY
CHAIRPERSON OF UTHUKELA DISTRICT AIDS COUNCIL**



**ACHIEVEMENTS, CHALLENGES AND MITIGATION
FOR FY 2019/2020 Q3**

**GOAL 1: ACCELERATE PREVENTION TO REDUCE NEW HIV, TB AND STI
INFECTIONS**

ACHIEVEMENTS, CHALLENGES AND MITIGATION FOR FY2019 / 2020 Q3
GOAL 1: ACCELERATE PREVENTION TO REDUCE NEW HIV, TB AND STI INFECTIONS

INDICATOR	LEADING DEPARTMENT RESPONSIBLE	ACHIEVEMENTS FY2019/2020 Q1& Q2	CHALLENGES	MITIGATION (PLANS TO ADDRESS CHALLENGE)	ACTUAL PERFORMANCE
Number of new HIV tests carried out.	DOH	Target Achieved (53568)	NIL	<ul style="list-style-type: none"> District Supporting Partner (HST) has added 5 more outreach teams for HIV testing focusing on High Transmitting Areas. Door to door Nqo Nqo Nqo activities in each sub District/Municipality contributed. 	<ul style="list-style-type: none"> Q1 43923 Q2 52599 Q3 57772
Number of new positive cases	DOH	Target Achieved (2360)	NIL	<ul style="list-style-type: none"> Improved implementation of index testing in all HIV testing sites through coordination of support for testers and collaboration with the district supporting partner (HST) 	<ul style="list-style-type: none"> Q1 2880 Q2 3171 Q3 3540
Infants 1 st PCR test positive around 10 weeks rate	DOH	Target not achieved (0.5%)	<ul style="list-style-type: none"> Poor compliance of breastfeeding women on ART, still marked. Inadequate viral load monitoring for pregnant and 	<ul style="list-style-type: none"> Support of all pregnant and breastfeeding women through implementation (Mother Mentor) project. Monitor viral load uptake at specified intervals at in all health 	<ul style="list-style-type: none"> Q1 0.12% Q2 0.33% Q3 0.59%

ACHIEVEMENTS, CHALLENGES AND MITIGATION FOR FY 2019/2020 Q3 continues
GOAL 1: ACCELERATE PREVENTION TO REDUCE NEW HIV, TB AND STI INFECTIONS

INDICATOR	LEADING DEPARTMENT RESPONSIBLE	ACHIEVEMENTS FY2019/2020 Q1 & Q2	CHALLENGES	MITIGATION (PLANS TO ADDRESS CHALLENGE)	ACTUAL PERFORMANCE
Baby HIV antibody test positive at 18 months rate	DOH	Target of <1% achieved	<ul style="list-style-type: none"> Poor compliance of breastfeeding women on ART, still marked. Inadequate viral load monitoring for breastfeeding clients in facilities at specified intervals, is still marked. 	<ul style="list-style-type: none"> Support of all pregnant and breastfeeding women through implementation (Mother Mentor) project. Monitor viral load uptake at specified intervals at facility level 	<ul style="list-style-type: none"> Q1 0.23% Q2 0.27% Q3 0.40%
Number of deliveries at public health facilities 10 -19 Years	DOH	<ul style="list-style-type: none"> Target not met (560) 	<ul style="list-style-type: none"> Decrease from previous quarter noted due to integration of Sexual and Reproductive Health Service with other services and Adolescence Youth Friendly Services (AYFS). In some facilities, inadequate service integration, still noted. 	<ul style="list-style-type: none"> Support implementation of AYFS and integration of services. 	<ul style="list-style-type: none"> Q1 636 Q2 657 Q3 566

ACHIEVEMENTS, CHALLENGES AND MITIGATION FOR FY 2019/2020 Q3 CONTINUES.....
GOAL 1: ACCELERATE PREVENTION TO REDUCE NEW HIV, TB AND STI INFECTIONS

INDICATOR	LEADING DEPARTMENT RESPONSIBLE	ACHIEVEMENTS FY2019/2020 Q1 & Q2	CHALLENGES	MITIGATION (PLANS TO ADDRESS CHALLENGE)	ACTUAL PERFORMANCE
Couple year protection	DOH	Target of 75% not achieved	<ul style="list-style-type: none"> Slight increase noted due to integration of Sexual and Reproductive Health Service with other Programmes. 	<ul style="list-style-type: none"> Support integration of Sexual and Reproductive Health Services with other Programmes. Mentor health care workers on insertion of Intra Uterine Contraceptive device. Daily monitoring of individual professional nurses long acting methods target. 	<ul style="list-style-type: none"> Q1:35 Q2 31 Q3 47
Number of Medical male Circumcision	DOH	Target achieved (1778)	<ul style="list-style-type: none"> Poor uptake of the service during the months of December and January. 	<ul style="list-style-type: none"> To conduct MMC camps weekly (minimum of 50 males in each camp) in all sub-districts to conduct a minimum of 10 daily at Philandoda Men's clinic Health Centre. DOH team to conduct their own camps in December and January , when partner is away on leave. 	<ul style="list-style-type: none"> Q1 3687 Q2 6374 Q3 2001

ACHIEVEMENTS, CHALLENGES AND MITIGATION FOR FY 2019/2020 Q3 CONTINUES.....
GOAL 1: ACCELERATE PREVENTION TO REDUCE NEW HIV, TB AND STI INFECTIONS

INDICATOR	LEADING DEPARTMENT RESPONSIBLE	ACHIEVEMENTS FY2019/2020 Q1 & Q2	CHALLENGES	MITIGATION (PLANS TO ADDRESS CHALLENGE)	ACTUAL PERFORMANCE
Number of Male condom distributed	DOH	Target not achieved (2,528,881)	<ul style="list-style-type: none"> Inadequate implementation of the existing condom distribution plan, especially by the Municipality (Only 4 boxes distributed) The CBOs are experiencing transport challenges. 	<ul style="list-style-type: none"> Close monitoring of the set individual cadre targets (CHWs and facilities, Partners, Private sector, etc.) To conduct condom BLITS in TAXI ranks with support from partners and Municipalities on monthly basis 	Q1 438 000 Q2 2 352 000 Q3 1 333 800
Number of female condoms distributed	DOH	Target not Achieved (46,102)	<ul style="list-style-type: none"> Poor uptake of female condoms by the clients associated with challenges to negotiate for condom use by the female clients 	<ul style="list-style-type: none"> Empower the young girls and women through She conquers program. Close monitoring of the set individual cadre targets (CHWs and facilities, Partners, etc) To conduct condom BLITS in TAXI ranks with support from partners on monthly basis. 	<ul style="list-style-type: none"> Q1 45 000 Q2 24 300 Q3 6400

ACHIEVEMENTS, CHALLENGES AND MITIGATION FOR FY 2019/2020 Q3 CONTINUES.....

GOAL 1: ACCELERATE PREVENTION TO REDUCE NEW HIV, TB AND STI INFECTIONS

INDICATOR	LEADING DEPARTMENT RESPONSIBLE	ACHIEVEMENTS FY2019/2020 Q1 & Q2	CHALLENGES	MITIGATION (PLANS TO ADDRESS CHALLENGE)	ACTUAL PERFORMANCE
Percentage of children screened for TB symptoms (children <5)	DOH	Target achieved (90%)	<ul style="list-style-type: none"> Target met 	<ul style="list-style-type: none"> Screen all the children that access our services, including those at household level (door to door/Nqo Nqo Nqo) 	<ul style="list-style-type: none"> Q1 94.3% Q2 95.7% Q3 93.7%
New male urethritis syndrome episodes treated rate	DOH	Target not achieved (14.4%)	<ul style="list-style-type: none"> District implemented strategies to improve case finding through implementation of HAST screening tool hence this lead to an increase in cases identified. 	<ul style="list-style-type: none"> Conduct assessment on STI management and interventions in facilities and mobile clinics using DISCA tool. Close monitoring of the District male wellness Centre service uptake 	<ul style="list-style-type: none"> Q1 17.3% Q2 18.2% Q3 18,5%

ACHIEVEMENTS, CHALLENGES AND MITIGATION FOR FY 2019/2020 Q3 CONTINUES.....
GOAL 1: ACCELERATE PREVENTION TO REDUCE NEW HIV, TB AND STI INFECTIONS

INDICATOR	LEADING DEPARTMENT RESPONSIBLE	ACHIEVEMENTS FY2019/2020 Q1 & Q2	CHALLENGES	MITIGATION (PLANS TO ADDRESS CHALLENGE)	ACTUAL PERFORMANCE
Children under 12 years sexually assaulted rate	DOH	Target not Achieved (0)	<ul style="list-style-type: none"> Sexual assault among children under 12 years has increased compared to quarter 2 (58%) 	<ul style="list-style-type: none"> Empower community members through quarterly community radio station presentations, Ward Based Outreach Teams, wardrooms and outreach campaigns. 	<ul style="list-style-type: none"> Q1 72 Q2 58 Q3 69
number of new sexual assault cases		Target not achieved (0)	<ul style="list-style-type: none"> Increased cases marked due to combination of social ills in communities 	<ul style="list-style-type: none"> Support integrated community awareness conducted by DSD, SAPS and Supporting Partners 	<ul style="list-style-type: none"> Q1 147 Q2 144 Q3 172
Number of infants death in public health facilities	DOH		<ul style="list-style-type: none"> Increased in the indicator due to late presentation in seeking health services by care givers. 	<ul style="list-style-type: none"> Motivate community for attending Phila Mntwana Centers (PMC) so as to get education on all health related issues including danger signs and early identification of diseases 	<ul style="list-style-type: none"> Q1 22 Q2 42 Q3 49
Number of maternal death in public health facilities	DOH		<ul style="list-style-type: none"> Decrease in neonatal deaths due to identification of challenges at ANC and proper management of infections e.g. UTI, STI 	<ul style="list-style-type: none"> Monitor implementation of Basic Antenatal Care (BANC) plus and management of infections during ANC through maternity case record audit 	<ul style="list-style-type: none"> Q1 1 Q2 5 Q3 2

**ACHIEVEMENTS, CHALLENGES AND MITIGATION
FOR FY 2019/2020 Q3**

**GOAL 2:REDUCE MORBIDITY AND MORTALITY BY PROVIDING
TREATMENT, CARE AND ADHERENCE SUPPORT FOR ALL**

ACHIEVEMENTS, CHALLENGES AND MITIGATION FOR FY 2019/2020 Q3

GOAL 2: REDUCE MORBIDITY AND MORTALITY BY PROVIDING TREATMENT, CARE AND ADHERENCE SUPPORT FOR ALL

INDICATOR	LEADING DEPARTMENT RESPONSIBLE	ACHIEVEMENTS FY2019/2020 Q1 & Q2	CHALLENGES	MITIGATION(PLANS TO ADDRESS CHALLENGE)	ACTUAL PERFORMAN CE
Number of adults and children living with HIV on ART	DOH	Target not achieved (97496)	<ul style="list-style-type: none"> HIV test positive for the district is low while client tested for HIV target is met this contributes to HIV low case finding there fore low ART initiations 	<ul style="list-style-type: none"> To coordinate and support implementation of index testing in all facilities 	<ul style="list-style-type: none"> Q1 89148 Q2 91036 Q3 93386

ACHIEVEMENTS, CHALLENGES AND MITIGATION FOR FY 2019/20120 Q3

GOAL 2: REDUCE MORBIDITY AND MORTALITY BY PROVIDING TREATMENT, CARE AND ADHERENCE SUPPORT FOR ALL

INDICATOR	LEADING DEPARTMENT RESPONSIBLE	ACHIEVEMENT S FY2019/2020 Q1 & Q2	CHALLENGES	MITIGATION (PLANS TO ADDRESS CHALLENGE)	ACTUAL PERFORMANCE
Viral Load Completion Rate at 6 months	DOH	Target not achieved (90%)	<ul style="list-style-type: none"> Inadequate implementation of adherence counselling for clients on chronic medication. 	Identify and add focal person to conduct monthly pro-active adherence counselling within patient flow for the first six months.	<ul style="list-style-type: none"> Q1 64.8% Q2 73% Q3 74%
Viral Load Completion Rate at 12 months		Target not achieved (90%)	<ul style="list-style-type: none"> All sub districts did not meet the targets because not all clients are taken viral loads according to their cohorts(treatment start dates) Some of the clients do not honor their due date for viral load. 	<ul style="list-style-type: none"> To monitor and support facilities on using viral load completion line lists and clients taken back to their cohorts through nerve center meetings and weekly reports 	<ul style="list-style-type: none"> Q1 60.6% Q2 66.50% Q3 66.5%

ACHIEVEMENTS, CHALLENGES AND MITIGATION FOR FY 2019/20120 Q3

GOAL 2: REDUCE MORBIDITY AND MORTALITY BY PROVIDING TREATMENT, CARE AND ADHERENCE SUPPORT FOR ALL

INDICATOR	LEADING DEPARTMENT RESPONSIBLE	ACHIEVEMENT S FY2019/2020 Q1 & Q2	CHALLENGES	MITIGATION (PLANS TO ADDRESS CHALLENGE)	ACTUAL PERFORMANCE
People living with HIV, on ART with viral load suppressed rate at 6 months	DOH	Target not achieved (90%)	Inadequate implementation of adherence counselling for clients on chronic medication.	<ul style="list-style-type: none"> ▪ The case managers were identified for each facility to conduct monthly pro-active adherence counselling within patient flow for the first six months. ▪ Facilities are conducting Enhanced adherence counselling to clients with high viral load. • Literacy classes were revived to improve adherence. 	<ul style="list-style-type: none"> ▪ Q1 92.5% ▪ Q2 90% ▪ Q3 74%
People living with HIV, on ART with viral load suppressed rate at 12 months	DOH	Target not achieved (90%)	Inadequate implementation of adherence counselling for clients on chronic medication.	<ul style="list-style-type: none"> ▪ The case managers were identified for each facility to conduct monthly pro-active adherence counselling within patient flow for the first six months ▪ Facilities are conducting Enhanced adherence counselling to clients with high viral load. ▪ Literacy classes were revived to improve adherence 	<ul style="list-style-type: none"> ▪ Q1 85.6% ▪ Q2 76.30% ▪ Q3 83.4%

ACHIEVEMENTS, CHALLENGES AND MITIGATION FOR FY 2019/2020 Q3
GOAL 2: REDUCE MORBIDITY AND MORTALITY BY PROVIDING TREATMENT, CARE AND ADHERENCE SUPPORT FOR ALL

INDICATOR	LEADING DEPARTMENT RESPONSIBLE	ACHIEVEMENTS FY2019/2020 Q1 & Q2	CHALLENGES	MITIGATION (PLANS TO ADDRESS CHALLENGE)	ACTUAL PERFORMANCE
Percentage of all people/clients started on TB treatment	DOH	Target achieved	Target met	<ul style="list-style-type: none"> Initiate all TB positive clients on treatment within 3 days. 	<ul style="list-style-type: none"> Q1 100% Q2 92.8% Q3 98.3%
TB treatment success rate	DOH	Target not achieved. (90%)	32% of patients were unevaluated due to hospitals referring patients to PHC clinics and not claiming back the outcomes.	<ul style="list-style-type: none"> Monitor hospitals to claim back outcomes and update on TIER. Net system. 	<ul style="list-style-type: none"> Q1 82% Q2 79% Q3 78.2%
TB clients lost to follow up rate	DOH	Target achieved (5%)	Target met.	<ul style="list-style-type: none"> Implement treatment literacy session prior to TB treatment. Improve support, tracking and tracing systems by linking every TB diagnosed patient with CCG. 	<ul style="list-style-type: none"> Q1 8.9% Q2 7.7% Q3 5%
Proportion of TB/HIV co-infected patients on ART	DOH	Target achieved (90%)	Target met	Initiate all and retain clients to care and provide on-going adherence counselling.	<ul style="list-style-type: none"> Q1 92% Q2 93% Q3 92%

**ACHIEVEMENTS, CHALLENGES AND MITIGATION
FOR FY 2019/2020 Q3**

**GOAL4:ADDRESS THE SOCIAL AND STRUCTURAL DRIVERS OF HIV, TB AND
STI`s**

ACHIEVEMENTS, CHALLENGES AND MITIGATION FOR FY 2019/2020 Q3
GOAL 4: ADDRESS THE SOCIAL AND STRUCTURAL DRIVERS OF HIV, TB AND STI's

INDICATOR	LEADING DEPARTMENT RESPONSIBLE	ACHIEVEMENTS FY2019/2020 Q1 & Q2	CHALLENGE	MITIGATION PLANS TO ADDRESS CHALLENGE)	ACTUAL PERFORMANCE
Number of newly registered OVC	DSD		<ul style="list-style-type: none"> Nil . 	<ul style="list-style-type: none"> Nil 	<ul style="list-style-type: none"> Q1 925 Q2 799 Q3 405
Number of registered OVC receiving care and support	DSD		<ul style="list-style-type: none"> Nil 	Nil	<ul style="list-style-type: none"> Q1 925 Q2 799 Q3 405
Number of new learner pregnancies	DOE		<ul style="list-style-type: none"> Decrease in teenage pregnancy is noted. 	<ul style="list-style-type: none"> Conduct Teenage pregnancy and substance abuse awareness campaign in different high schools. Conduct HIV/AIDS awareness campaigns in different primary schools 	<ul style="list-style-type: none"> Q1 59 Q2 95 Q3 49

ACHIEVEMENTS, CHALLENGES AND MITIGATION FOR FY 2019/2020

Q3

**GOAL6:PROMOTE LEADERSHIP AND SHARED ACCOUNTABILITY FOR A
SUSTAINABLE RESPONSE TO HIV, TB AND STI**

UPDATE ON DAC/LAC AND WACS FUNCTIONALITY FY 2019/20 Q3

DISTRICT /LOCAL MUNICIPALITY	LAC	WAC	ACTION PLAN
<p>UTHUKELA DISTRICT : Fully functional</p> <p>Last sitting: 07 November 2019</p> <p>Next Sitting: 13 February 2020</p>			
Alfred Duma (36 Wards)	<ul style="list-style-type: none"> Fully functional LAC meets quarterly not all sector departments and submit their reports. Compiled reports and submitted to DAC. 	<ul style="list-style-type: none"> WAC Training has not taken place due to unavailability of the Training Coordinator from HST 	<ul style="list-style-type: none"> Planned to establish the 17 WACs that are not functional.
Okhahlamba (15 Wards)	<ul style="list-style-type: none"> Fully functional LAC meets quarterly departments submits their reports to the LAC Report compiled and submitted to the DAC 	<ul style="list-style-type: none"> All 15 WAC established and trained but there is a challenge with 6 WAC's that are not working because they want stipend 	<ul style="list-style-type: none"> Convert the Ward Committee to be the Ward Aids Council in those wards which are no longer having any WAC.
Inkosi Langalibalele (23 Wards)	<ul style="list-style-type: none"> Functional LAC meets quarterly and departments submits their reports to the LAC Report compiled and submitted to the DAC. Launched civil society structure. 	<ul style="list-style-type: none"> 3 out of 20 WAC's established waiting for training. 	<ul style="list-style-type: none"> Planned to establish all 20 WACs and trained them all.

Achievements , Challenges and Interventions

Achievements

- Launched 16 Days of Activism for No Violence against women and children at Inkosi Langalibalele LM Ward 3.
- Commemorated World Aids Day on the 1st December 2019 at Alfred Duma LM Ward 29.

Challenges

- Poor attendance of other government departments, only key departments such as DSD, DOH, DHA & DOE attends most of the DAC & LAC Meetings.

Interventions

- Conduct follow up on HOD that have not yet submitted nominees for DAC representation by the end of March.

THE END

Together We Are Greater Than HIV/AIDS



THANK YOU



Uthukela District Municipality



16 Days of Activism



16 Days of Activism



WAD Commemoration



WAD Commemoration



WAD Commemoration

