

PRESENTATION TO PROVINCIAL AIDS COUNCIL



- PRESENTER : CLLR PMS NGUBANE
- DATE : 7 MARCH 2018
- VENUE : ROYAL SHOWGROUNDS

Quarter 1 (Apr-Jun 2017) Action Item Update



Challenge	Mitigation	Status
Increasing on Sexual assault cases for under 12 years age	Conducting awareness and also working with SAPS in the identification of hot spots	Identification of hotspot is in progress Involvement of Amakhosi was done.
Most of Sexual assault cases are reported after 72 hours, which makes management of the client very difficult since prophylaxis is not given if the client report after 72 hours	Engagement with Isibaya Samadoda, Religious Leaders, Amakhosi and other Community Leaders	Meetings ongoing

Challenges for Q3(October-Dec 2017) and Mitigation Plans



Challenge	Mitigation	Status
Poor linkage to care - outside of facility due to clients missing after getting the positive result	<ul style="list-style-type: none">• Community testing partners to be based outside facilities• Record all patient files from the HTA mobile clinic (e.g. men from the nearby taxi rank and commercial sex workers) into TIER.Net	TIER.Net loaded on mobile clinics computer Community based partners such as FPD and Red Cross implementing HTS services in community . Implemented and ongoing to improve linkage

Challenges for Q3 (October-Dec 2017) and Mitigation Plans



Challenge	Mitigation	Status
<ul style="list-style-type: none"> Increased HIV / AIDS and TB death rate especially males as they present late to facilities Mixing of prescribed TB medication and un prescribed medication. Increase in Teenage pregnancy rate also results in increased STIs (22%) 	<ul style="list-style-type: none"> Visit hot spots such as taverns and Izimbizos and community sports grounds and Taxi Ranks Stakeholder engagement to capacitate the THPs and educate on community dialogues Mapping of schools with high leaner pregnancy Involvement of all departments and NGOs at functional War Rooms 	<p>Testing at taverns around Msinga study conducted by Philanjalo</p> <p>On going dialogues</p>

UP COMING PLANS FOR THE NEXT QUARTER



- Increase community awareness's Launch of Key Population on 27 March 2018.
- Engagement of THPs on the mixing of medication.
- Open days to educate and market services.
- Celebrate TB day in all Local Municipalities.
- Roll out current plans to mitigate teenage pregnancy.

Achievements/Successes



- **Goal 1: Accelerate prevention to reduce new HIV, TB and STI infections**
 - Increased number of community dialogues to get their understanding of the conditions and implement activities according to community concerns
 - Improved intensive case finding by screening for early detection and **treatment**
- **Goal 2: Reduce morbidity and mortality by providing treatment, care and adherence support for all**
 - Sustainability of treatment care and support plan within the district including community
 - Linking of co - infected clients to household champions and Outreach **teams**

Achievements/Successes



- **Goal 3: Reach all key and vulnerable populations with customised and targeted interventions**
 - The population is free to access services from facilities that have been identified to care and treat Key Populations
 - On 15 December 2017 celebrated International Commercial Sex Workers' Day

Achievements/Successes



- **Goal 4: Address the social and structural drivers of HIV, TB and STIs**
 - Community awareness's TB blitz and door to door campaigns and referrals to relevant departments.
 - Involvement of Traditional Health Practitioners and Leaders in management of HIV/AIDS and TB through stakeholder engagement
- **Goal 5: Ground the response to HIV, TB and STIs in human rights principles and approaches**
 - HIV and AIDS mainstreamed in agendas for all sector group meetings /events
 - District Civil Society Forum was launched and is in place

Achievements/Successes



Goal 6: Promote leadership and shared accountability for a sustainable response to HIV, TB and STIs

- Dedicated office and budget for HIV and AIDS in the district and local municipalities
 - UMzinyathi District : R400 000
 - Nquthu : R280 000
 - Msinga : R195 000
 - Endumeni :R95 000
 - Umvoti
- Involvement of Religious, Traditional Leaders and Local Municipal Councillors in the management of HIV/AIDS and TB through Izimbizos

DAC Functionality



- **Challenge:** Quarterly DAC report submitted to the PCA Secretariat. Poor participation by Departmental representatives at DAC meetings except DOH. Key departments not represented in DAC M&E forum. Civil Society structure is non-functional. Other Local Mayors not attending DA C
- **Mitigation:** Orientate Departmental District Managers on their Department's role in the DAC. Orientate DAC members on M&E principles. Coordinate meeting to revive Civil Society structure
- **District Actions:** District Mayor to table this at the next Mayors Forum
- **District Performance:** Quarterly DAC report submitted to the PCA Secretariat in every Quarter

LAC Functionality

OUT OF THE THREE LOCAL AIDS COUNCIL ONLY ONE THAT IS NOT FUNCTIONAL



- **Challenge:** Non functionality of uMvoti Local Aids Council
- **Mitigation:** Elect Civil Society Chairpersons for Msinga and uMvoti LACs and finalise pending election for Civil Society Chairperson for the District
- **District Actions:** To be discussed at the next Mayors Forum Meeting
- **District Performance:** Districts reports are submitted timemously to PCA

WAC Functionality



THE DISTRICT MAYOR HAS A PLAN OF VISITING ALL WAR ROOMS WHERE THE WARDS AIDS COUNCIL FUNCTIONALITY WILL ALSO BE REVIEWED



HIV/AIDS Budget & Secretariat Availability

Secretariat Availability



LOCAL MUNICIPALITY	Permanent/Dedicated Secretariat Available (Yes/No)	
	LOCAL AIDS COUNCIL	FUNCTIONALITY
Nquthu	YES	FULLY FUNCTIONAL REPORTS SUBMITTED QUARTELY
Endumeni	YES	NOT FULLY FUCTIONAL
Msinga	YES	FULLY FUNCTIONAL REPORTS AND MINUTES FORWADED QUARTELY
uMvoti	NO	NO LOCAL AIDS COUNCIL



Thank You