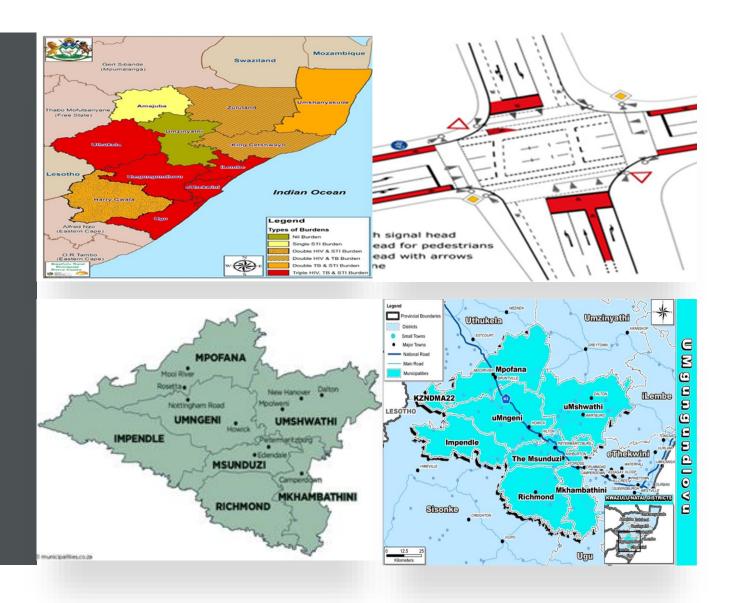


PROVINCIAL COUNCIL ON AIDS 19 September 2022

Presented by Cllr M Zuma, Mayor & Chairperson of uMgungundlovu District AIDS Council.

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Introduction & Overview

The uMgungundlovu District is a highly disease burdened district with a highest HIV prevalence.

The rising number of incidences related to GBV+Femicide is also escalating daily, and this has propelled the District to introduce a double pronged or multi-pronged approach to tackle HIV/AIDS, STI, TB & GBV+Femicide.

Umgungundlovu is the second largest District in KZN. (Second in size to the Ethekwini Metro)

Population that exceeds 1 209 480

87.5% of the population is considered indigent and totally dependent on state service delivery.

Comprises of 7 municipalities with Msunduzi being the largest with more than 60% of the District Population residing therein.

MULTISECTORAL APPROACH TO PREVENTION OF HIV, TB & STIS INFECTIONS

There has been an overall general improvement on HIV Testing Services - HTS performance. This is mainly due to partners' support in the district & initiatives aimed at upscaling intake of services & treatment.



TB screening is on target.



Our TB symptomatic numbers remain low.



Capturing of case ID registers are slowly improving.



Testing of all presumptive TB cases remains on target.











PROGRESS ON VACCINATION: 35 - 49

			Fully		% Fully Vaccinat
2.4			•	_	
Municipality	Target	1st Dose	vaccinated	1st Dose	ed
Impendle LM	3578	2365	1908	66%	53%
Mkhambathini					
LM	19040	5224	4606	27%	24%
Mpofana LM	11673	4312	3522	37%	30%
Msunduzi LM	195613	77153	70495	39%	36%
Richmond LM	17299	7574	6723	44%	39%
uMngeni LM	32887	12878	11765	39%	36%
uMshwathi LM	22785	6055	5139	27%	23%
District Total	302874	115561	104158	38%	34%
					N

PROGRESS ON VACCINATION: 18 - 34

				Fully		% Fully Vaccinate
Municipality	Target		1st Dose	Vaccinated	1st Dose	d
Impendle LM		4166	3139	1672	75%	40%
Mkhambathini						
LM		16734	5049	4009	30%	24%
Mpofana LM		9950	4143	2920	42%	29%
Msunduzi LM		151752	76804	61890	51%	41%
Richmond LM		13420	7196	5800	54%	43%
uMngeni LM		23478	11467	9784	49%	42%
uMshwathi LM		18997	5640	4284	30%	23%
District Total		238497	113438	90359	48%	38%

STRATEGIES: VACCINATION ROLL-OUT

- Continue to deploy outreach teams to farms, factories to reach out to men
- Continue to set u pop-up sites in hot spots and poorly performing municipal wards
- Continue to set up vaccination station points at the shopping centres and malls especially on weekends & public holidays
- Continue to target commuters, vendors and taxi drivers at all taxi ranks within sub districts
- Continue to schedule activities targeting men's health led by local community leadership in various sub districts
- Continue to set up pop-up sites at SASSA pay points in all municipalities

- Continue to target pregnant and lactating women in all health facilities including labour wards in hospitals
- Continue to target interfaith congregants to reach all age bands
- Continue to identify and vaccinate undocumented persons in all municipalities
- Continue to target vaccinating men at Harry Gwala Stadium during soccer matches

PRIORITY/FOCUS AREAS: ACCELERATION PLAN

Priority LMs:
Mkhambathini and
UMshwathi (Rationale:
poorly performing in all
age bands)

Priority wards in the poorly performing LMs:

Mshwathi: wards 3, 6 and 10

Mkhambathini: wards 3, 4 and 6

Young people between the ages of 12 to 34 years (Rationale: low vaccination uptake)

Men (Rationale : poor health seeking behaviour)

Farm workers (Rationale: restricted access to health care) School going children:
(Rationale:) low vac
uptake, poor
presentation at facilities,
parent influence

HIV TESTING (15 yrs & Older)

Indicator / Element	2020 / 21 Baseline	2021/22 Quarterly Target	2022 / 23 Q1	Narrative (Progress, challenges and remedial actions
HIV Testing (15yrs & Older)	12970	16220	2331	 Reduction in community screening. Career pathing for Counsellors. Remedial Action Integration of Health Services to include COVID screening. The District has put plans in place to improve HAST activities.

Delivery in Facilities (10 yrs to 14 yrs)

Indicator / Element	2020 / 21 Baseline	2021/22 Quarterly Target	2022 / 23 Q1	Narrative (Progress, challenges and remedial actions
Delivery in Facilities (10yrs – 14yrs old)	66	0	21	 Child & teenage pregnancy is high. Efforts to reduce reduce teenage pregnancy are in place. Remedial Action To support the educational campaigns conducted at community / ward level. To partner with support partners / Local AIDS Councils / OSS Structures in infilitrating children / teenagers with educational campaign on child & teenage pregnancy.

Delivery in Facilities (15yrs to 19yrs)

Indicator / Element	2020 / 21 Baseline	2021/22 Quarterly Target	2022 / 23 Q1	Narrative (Progress, challenges and remedial actions
Delivery in facilities (15yrs – 19yrs)	2846	0	784	 Teenage pregnancy is rife in high schools. Remedial Action Learner Support Agents (LSAs) are playing a huge role in curbing the rise in teenage pregnancy by facilitating educational talks, sexuality education and other programmes in partnership with schools-based organizations. Programmes provided by the schoolhealth outreach teams are effective and help in tackling some of the causes for teenage pregnancy.

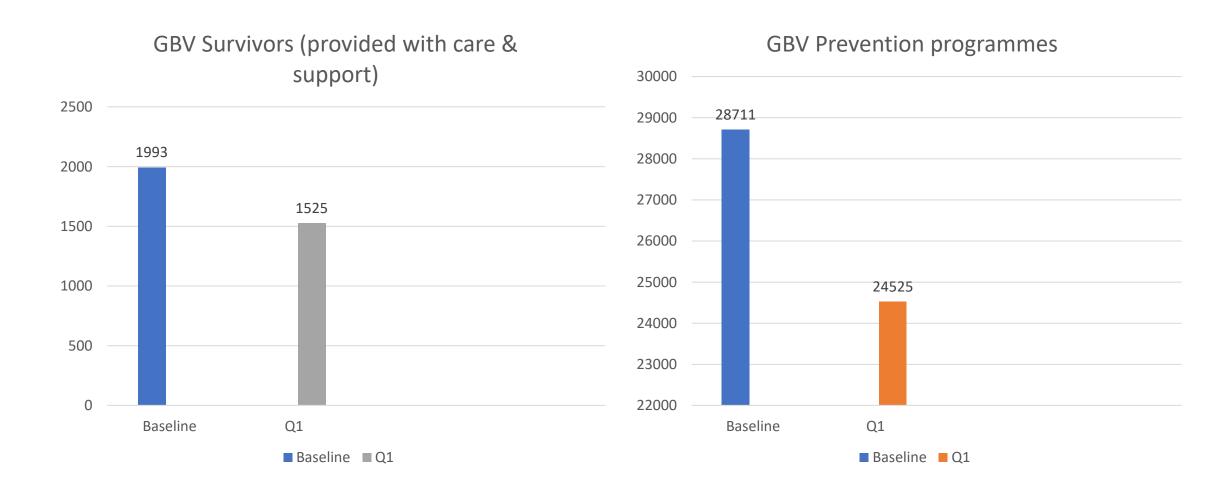
Remaining on ART (Antiretroviral Treatment)

Indicator / Element	2020 / 21 Baseline	2021/22 Quarterly Target	2022 / 23 Q1	Narrative (Progress, challenges and remedial actions
Remaining on ART (Adult & Children)	173409	190861	175304	 There has been a 92% initiation of clients that test positive. Clients that are not eligible are followed up, tracked and initiated once they qualify. Remedial Action Monitor the sprint reporting to identify facilities with low linkage to care. Encourage support groups for people to remain on ART.

TB Treatment Success Rate

Indicator / Element	2020 / 21 Baseline	2021/22 Quarterly Target	2022 / 23 Q1	Narrative (Progress, challenges and remedial actions
TB Treatment Success Rate	84.4%	90	81.3%	 TB Screenings are being done and targets met. Educational campaigns on TB Treatment have been escalated. Partners with mobile facilities continue with TB screening & educational campaigns. Remedial Action TB mobile services to rural areas / far end areas are being provided. Community education on the significance of TB treatment & successful completion thereof.

GBV SURVIVORS / GBV PREVENTION PROGRAMMES

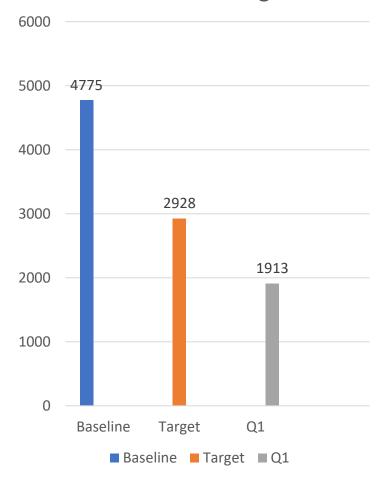


DAC / Partners / Office of the Premier / Social Development: Collaborative efforts.

- The uMgungundlovu District AIDS
 Council hosted a send-off of a
 young leader to Dubai on an
 International Young Leaders
 Conference, and this has been a
 collaborative effort with the
 Office of the Premier, the
 National Department of Social
 Development, Network of NGOs
 presiding under the District AIDS
 Council, and private partners.
- The young leader is Lindo Ndlovu

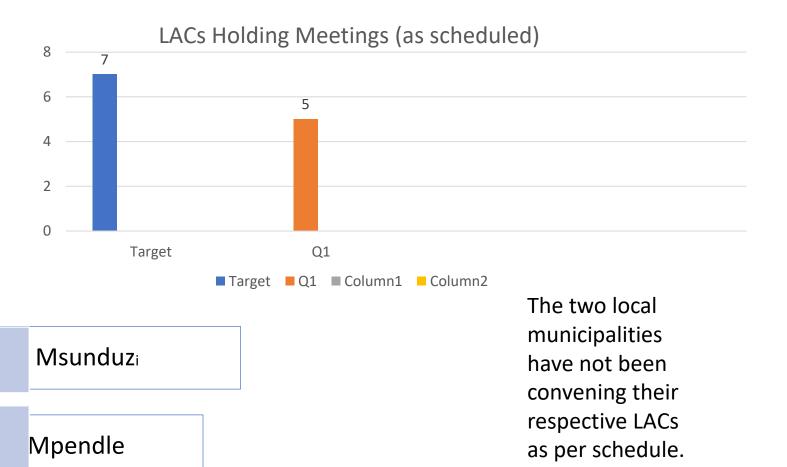
 cultivated and mentored under
 the Nelson Mandela Leadership
 Programme.

DSD Social Relief Programme

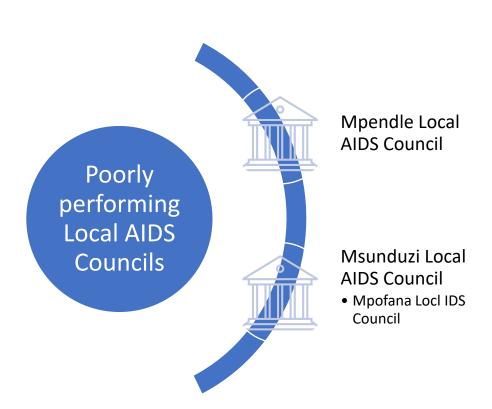




FUNCTIONALITY OF LACS



REVIVAL OF POORLY PERFORMING LACS



Measures undertaken thus far:

- 1. PCA Strengthening Workshop
- 2. DAC Support Visits to LMs
- 3. Brief Capacity Building
- 4. Revitalization & Launch of LACs
- 5. Revitalization of key sectors
- 6. Monitoring & Evaluation of performance.
- 7. Premier's Office three-day capacity building workshop.

DAC MULTI-SECTORAL PROGRAMMES (THANKS TO BE TBHIVCare & other Partners).

Sex Work Project (TBHIVCare / SAPS / DOH / DAC) Learner Support
Agents Project
(TBHIVCare / DOE /
NGOs / DAC)

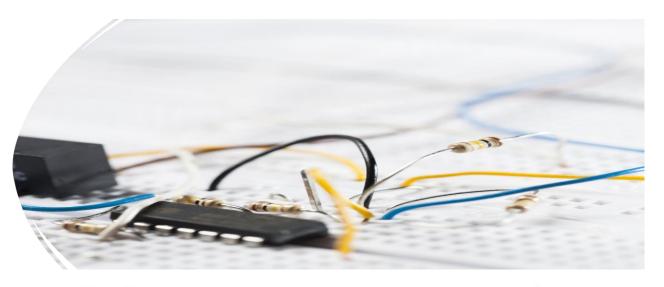
Integrated Response:

GBV+F /HIV, AIDS,

STIs & TB / OSS

Projects

Supported by LOTS/VulaTech Rapid Response Technology





Challenges

- Less programmes focussed to farmworkers in the District.
- WAC Functionality (only 42% were functional), need for revitalization of WACs.
- LAC Functionality only four are functional.

- Scarcity of financial resources — to drive programmes of the DAC / coordination thereof.
- Representation of other key government departments in the DAC meetings.

Conclusion

uMgungundlovu District prides itself for attaining its successes through partnership and working collaboratively with ALL key stakeholders, and this has certainly made the District achieve great significant milestones.



THANK YOU!