



PROVINCIAL COUNCIL ON AIDS

23 August 2023

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

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INTRODUCTION

The uMgungundlovu District Municipality is located in the Midlands of KwaZulu-Natal. The uMgungundlovu is a home to Pietermaritzburg the capital city of KwaZulu-Natal. The District enjoys a competitive advantage in the field of agriculture. The uMgungundlovu District is made up of seven local municipalities, namely: uMngeni, Msunduzi, uMshwathi, Mpendle, Richmond, Mkhambathini, and Mpoofana.

The uMgungundlovu district is a combination of deep rural, semi-urban, and urban districts. The uMgungundlovu district is intrinsically cultural and it is dominated by people who practice varied cultural beliefs and norms, and the population of uMgungundlovu is largely youth.

Given a bulging population of youth and the social ills destroying the fiber of this society, the uMgungundlovu District AIDS Council has paid particular attention to the following strategic areas, which are namely: 1) teenage / learner pregnancies, 2) Severe Acute Malnutrition, 3) Gender-based Violence and Femicide, 4) TB – Tuberculosis, 5) Substance Abuse.

The above issues are highly prevalent in the uMgungundlovu district, and all efforts are directed toward them.



DELIVERY IN FACILITIES – TEENAGE / LEARNER PREGNANCIES

- The uMgungundlovu District AIDS Council has noted a sharp increase in teenage / learner pregnancies in the uMgungundlovu district.
- The two subdistricts had the highest rate in the district and, that is Impendle at 27,4% and uMshwathi at 20.6% in the last financial year. Therefore, denormalizing teenage pregnancy had to be conducted at Impendle and uMshwathi subdistricts in the last quarter.
- The Technical Working Group (TWG) comprised of the government departments, relevant civil society sectors or organizations, and the DAC Secretariat met to devise a strategy to address a high rise in teenage / learner pregnancies.
- The AIDS Council focussed its immediate interventions on the hot-spot areas, uMshwathi and Mpendle, and currently visiting other local municipalities with an aim to find solutions through focused group discussions in a multi-faceted and multisectoral approach. Moreover, it is to ensure an embracing approach involving learners, SGB, teachers, community, government departments, and non-government organizations working in the area.
- There is continued collaboration between DoH, school health teams, outreach programs, civil society, and the District Supporting Partners in denormalizing teenage pregnancy amongst high schools with the highest teenage pregnancies throughout the uMgungundlovu district.



CAUSES & PROPOSED SOLUTIONS: TEENAGE / LEARNER PREGNANCIES

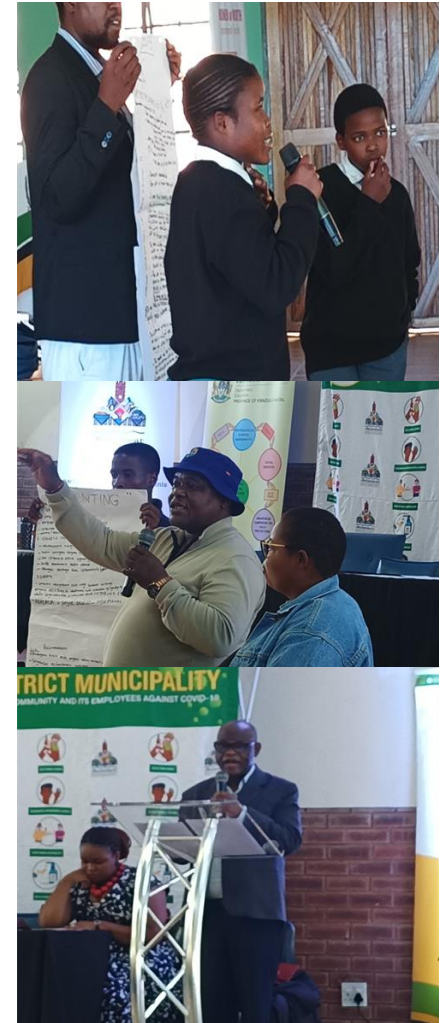
Panel discussions conducted between parents, learners, community, and government departments revealed that:

Root Causes: Teenage / Learner Pregnancies

- 1) Condomless anal or vaginal sex,
- 2) Engaging in the harmful use of alcohol and drugs,
- 3) Sharing contaminated needles, syringes, and other injecting equipment and drug solutions when injecting drugs, and
- 4) Lack of parental guidance and love.

Proposed prevention measures & solutions: Teenage / Learner Pregnancies

- 1) Getting regularly tested for HIV, and sexually transmitted infections and getting initiated to treatment soon, if found positive.
- 2) Access to harm reduction services for people who inject and use drugs.
- 3) Doctors may suggest medicines and medical devices to help prevent HIV including early pregnancy.
- 4) Antiretroviral drugs (ARVs), PrEP, and other long-acting products to prevent pregnancy.



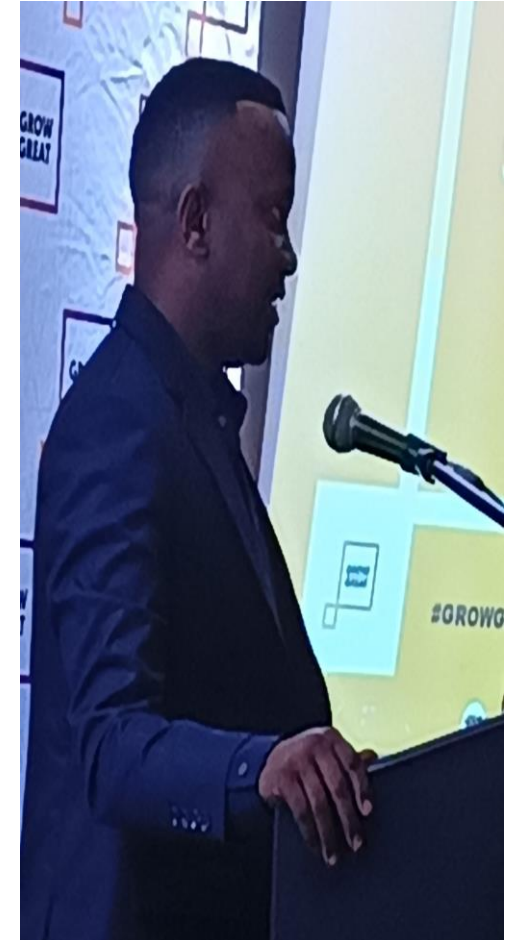
SEVERE ACUTE MALNUTRITION (SAM) / 90-90-90 CASCADE ON CHILDREN

Severe Acute Malnutrition (SAM)

- SAM deaths are largely due to chronic conditions and defaulting TB and ARV's.
- The District AIDS Council resolved that SAM death audits should be done in order to identify gaps and/or issues in child health and actions should be developed to address gaps. Also, resolved a need for continued nutrition assessment, classification, and identification of danger signs in children. Most importantly, engage traditional health practitioners and other civil society sector groups on this issue.

90-90-90 Cascade on children

- There is a high loss to follow-up rate among children in uMgungundlovu. There are initiatives in place to **1) improve linkages and tracing of children on ART, 2) Social Workers are recruited to develop and continue with counseling programs to improve adherence and disclosure, 3) work collaboratively with the government departments, DSD, and DoH in the main, to assist with psychosocial care of children on ART.**
- The District AIDS Council in partnership with Health Systems Trust, Civil Society, the Department of Health, the Department of Education, and the Department of Social Development met and established a District Stakeholder's Forum on Children, and a focused Technical Working Group on Children has been established as a result.

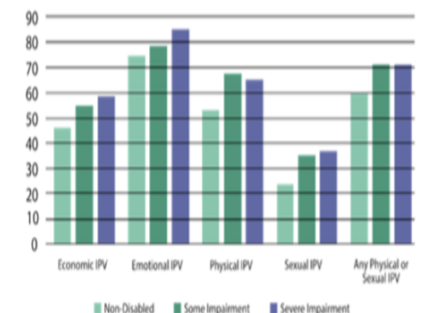


GENDER-BASED VIOLENCE & FEMICIDE (GBV+F)

- The uMgungundlovu District AIDS Council took note of a need and the importance of post-GBV quality care in services at a facility level (clinics). The uMgungundlovu is part of a pilot program on a pre-liminary adaptation of the GBV-Quality Assessment tool for South Africa, and this incorporates a Disability Awareness Checklist because one is fully aware that also the community living with disabilities is equally affected by GBV and other social ills in the community. Therefore, this is a pilot test in uMgungundlovu which is being currently implemented in partnership with the South African Medical Research Council (SAMRC).
- Sites identified are as follows: Northdale Crisis Centre. Two rural clinics: Gomane and Gcumisa, 2x TBHIVCare, Angel's Care Crisis Centre, and the Edendale Thuthuzela Care Centre.
- The intended objectives for this pilot project are briefly:
 - 1) Close the gaps in knowledge & skills in talking to patients about GBV, trauma containment, and patients with disabilities, LGBTQIA+ patients, 2) handle cases with mandatory reporting requirements, 3) build a stronger referral network systems, and 4) lastly, handling initial disclosures.
- As mentioned, this tool will cater to people with disabilities and with a much greater focus on women with disabilities. It is reported that women with disabilities are two times more likely to experience intimate partner violence (IPV) than their peers without disability. The risk increases with the severity of the disability.



Figure 4: Experience of IPV in the past 12m among disabled and nondisabled women participating in the What Works Stepping Stones Creating Futures Project in South Africa



TB LOSS-TO-FOLLOW & TB DEATH RATE

TB Loss-to-follow:

- The District AIDS Council picked up an increasing number of TB loss-to-follow cases presented at its council meeting, but strategies were devised and are in place to closely monitor the outreach activities and the outreach teams throughout the uMgungundlovu district.
- Planned initiatives are afoot to conduct file audits, and prioritized support visits in facilities with high losses to follow.

TB Death Rate:

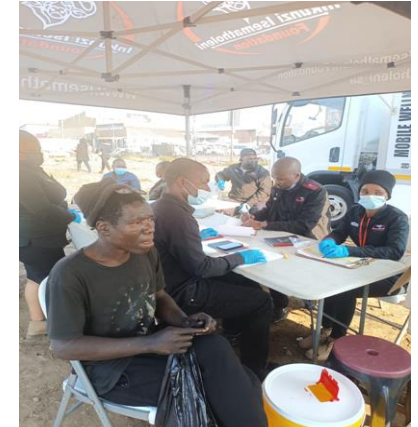
- Most cases are due to late presentation at facility level, and poor adherence to treatment.
- The highest death rates in the district were noted as follows: 1) Mpofana(16.7%), 2) Mkhambathini(11.1%), and 4) Impendle(12.5%) followed by 5) Msunduzi(9.4%), 6) uMngeni(12%) and lastly, uMshwathi(8.1%).
- The District AIDS Council and its partners agreed upon close monitoring of outreach activities and teams in the hot-spot sub-districts.
- Moreover, the District AIDS Council encouraged that an effort should be made to target all contacts of TB positives cases, increase the number of outreach activities being conducted by facilities, and conduct district hotspot mapping in order to target all high-risk areas.

SUBSTANCE ABUSE & LAUNCH OF DISTRICT DRUG ACTION COMMITTEE

The uMgungundlovu district is experiencing a sporadic rise in substance and illicit drug use. Unfortunately, this is coupled with misconceptions on interventions which are meant to address and tackle the issue. The substance abuse and the use of illicit drugs is ravaging the youth of uMgungundlovu district.

The misconceptions surrounding the wholistic package of services afforded to people who use drugs have compounded the already existing challenges facing the district, which are:

- 1) **an increasing number of cases of stigma and discrimination towards people who use drugs (PWUD) / people who inject drugs (PWID) with severe violations of basic human rights inflicted upon them.**
- 2) **growing number of PWUD/PWID versus insufficient capacity to tackle this issue effectively and efficiently, and**
- 3) **lack or shortage of rehabilitation centers in the district. This has worsened the issue as users, injectors or abusers of drugs to become more mobile rendering it more difficult to reach out to them for rehabilitation and harm reduction interventions.**



SUBSTANCE ABUSE & LAUNCH OF DISTRICT DRUG ACTION COMMITTEE

During an oversight visit led by the Office of the Premier, it was discovered that, amongst many other organizations, there is an organization called Inkunzi Isematholeni dedicated on tackling PWID/PWUD issues in the district, and it was comforting to note that:

- 1) They are a functional organization with adequate staff and resources to implement PWID/PWUD programmes in the district.
- 2) Their clients are getting a full package of care (Health or Clinical, Psychosocial, rehabilitation and skills development).
- 3) They implement family reunification services. (re-unification of clients with their families), and moral regeneration.
- 4) They recruit rehabilitated clients to becoming employees of the organization.
- 5) They have established support groups and pay weekly site visits strengthening trust relations with clients which has enabled an effective tracing of clients and linking them to care.
- 6) They implement harm reduction package of services which are hugely yielding positive results.



SUBSTANCE ABUSE & LAUNCH OF DISTRICT DRUG ACTION COMMITTEE

Due to the high prevalence of substance abuse in the district, the Municipality in partnership with the Department of Social Development will be launching the District Drug Action Committee on its first sitting on the 24th of August 2023.

The District Drug Action Committee is a multi-sectoral and multi-disciplinary coordinating structure aimed at, amongst many other strategic objectives, promoting harm reduction interventions amongst PWID / PWUD and implementing the District Drug Master Plan.

It is truly an honor to uMgungundlovu district to have in its midst organizations committed to working on reducing harm amongst PWID/PWUD, and in this instance: Inkunzi Isematholeni and other civil society sector groups / NGOs.



CONCLUSION



The uMgungundlovu District AIDS Council held its very effective and results-driven oversight visits which were championed by the Office of the Premier (HIV/AIDS Directorate) and in attendance by other key government departments. The oversight visits are indeed meant to improve the quality-of-service delivery outputs, and through the oversight visits very positive and constructive recommendations were reached in order to improve service delivery outputs by all organizations/government departments visited.



The uMgungundlovu District AIDS Council is continuously playing a key role in the development of the Mkhambathini Local Municipality's Multi-sectoral Local Implementation Plan for 2023 - 2028. The uMgungundlovu District AIDS Council is advocating for a bottom-up approach in the development of district / local multi-sectoral implementation plans for 2023 – 2028.



The AIDS Council will forever be grateful for the work most of the organizations/government departments are currently doing in the district. Thank you!





Thank you

