

**MINUTES OF THE MEETING OF THE PROVINCIAL COUNCIL ON AIDS, HELD ON THE 4 NOVEMBER 2009 AT  
14H00 AT THE OFFICE OF THE PREMIER AUDITORIUM**

Chairperson: Dr. Z.L. Mkhize  
Deputy Chairperson Prof Gqaleni

Premier

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**OPENING AND WELCOME**  
**SECTION 1: PROCEDURAL MATTERS**

- 1.1 Apologies
- 1.2 Adoption of the agenda
- 1.3 Confirmation of the minutes
- 1.4 Matters arising: Task Teams
  - 1.4.1.1 Partnership Conference
  - 1.4.1.2 Ward based programme and targets
  - 1.4.1.3 Midterm review
  - 1.4.1.4 Spending Assessment
  - 1.4.1.5 NGO coordination

**SECTION 2: ITEMS**

- 2.1 World AIDS DAY
  - Report from Civil Society
  - PCA FIFA World Cup plan and activities

**SECTION 3: URGENT ITEMS**

**SECTION 4: CLOSURE**

### **Apologies received prior to meeting from:**

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| 1. | MEC Senzo Mchunu  | MEC Education                     |
| 2. | Ms TP Poyo Dlwati | Legal Sector representatives      |
| 3. | Mrs Nathoo        | Children's Sector Representatives |
| 4. | Ms Y Bacus        | HOD Community Safety and Liason   |

### **Apologies received during the meeting**

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| 1. | Cllr Mthombeni | Mayor Umkhanyakude                   |
| 2. | Siddiq Adam    | HOD Agriculture an Rural development |
| 3. | Chris Hlabisa  | HOD Transport                        |
| 4. | Mr T Nene      | Department of Labour                 |

### **Non attendance with no apologies**

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| 1.  | Ms G Gumbi- Masilela | HOD Local Government and Traditional Affairs |
| 2.  | Mr S Gcabashe        | Chair Premier's Portfolio Committee          |
| 3.  | Mrs B Scott          | Chair Finance Portfolio Committee            |
| 4.  | Mr M Kubheka         | Parliament Representative                    |
| 5.  | Cllr M S Yengwa      | Mayor Umzinyathi                             |
| 6.  | Cllr Z Magwaza       | Mayor Zululand                               |
| 7.  | Cllr S M Sithole     | Mayor Uthukela                               |
| 8.  | Cllr M S Mlangeni    | Mayor Amajuba                                |
| 9.  | Mrs P Zondi Mabizela | Faith Based Organisation                     |
| 10. | Ms D Ngidi           | Women's Sector                               |
| 11. | Mr P Ndunakazi       | Labour Sector                                |
| 12. | Mr M Mabaso          | Youth Sector                                 |
| 13. | Ms N Alberts         | Business Sector                              |

<b>AGENDA ITEM</b>	<b>DISCUSSIONS</b>	<b>RESPONSIBILITY</b>
Opening and welcome	<p>The meeting commenced with a prayer at 14hrs</p> <p>The Chairperson, on his opening remarks, stated that the day for the Council should not be misused because it is important for the flagship programme. The Chairperson reported that KZN has the highest death rate in terms of HIV and AIDS and we need to control the pandemic. The Premier highlighted the KwaZulu Natal HIV and AIDS latest statistics which indicate that the situation is not good at all. The figures in KZN show that the highest prevalence is in Pietermaritzburg followed by eThekweni.</p>	Chairperson
	<b>PROCEDURAL MATTERS</b>	
<b>1. 1 APOLOGIES</b>	<p>MEC for Education, Ms Bacus, Mr Dimba Ugu District Municipality Mayor was represented by Deputy Mayor</p>	The Chairperson

	There were no other apologies.	
<b>1.2 ADOPTION OF THE AGENDA</b>	The agenda was adopted without change.	The Chairperson and PCA Members
<b>1.3 CONFIRMATION OF THE MINUTES OF THE PREVIOUS MEETING (12 AUGUST 2009)</b>	<p>The minutes of the previous meeting held on 12 August 2009 were confirmed with the following amendments:</p> <p>Correction of the spelling of Philip on Page 2 of the minutes.</p>	The Chairperson and PCA Members
<b>MATTERS ARISING</b>	<p>Dr. Ndlovu took the council through the task team responsibilities set at previous PCA Meeting.</p> <p>A report was made on the Partnership Conference. The Conference was reported to have gone ahead as planned. Further, decisions were to be taken at district level.</p> <p>The Chairperson requested that members of the council to comment on their observations regarding the conference.</p> <ul style="list-style-type: none"> <li>▪ MEC Local Government and Traditional Affairs reported that it was a wonderful opportunity for all stakeholders to share information. She, however, reported that the DAC should be revived as currently it exists in many districts in name only and there is no action taking place.</li> </ul>	<p>Dr. Ndlovu</p> <p>Dr. Lubisi</p> <p>PCA Members</p>

	<ul style="list-style-type: none"> <li>▪ eThekweni Mayor reported that there was a positive element and there is a clear programme. He suggested that there should be a budget aligned to the programme. He further reported that the DAC collapsed because there was no coordination between the districts and Department of Local Government. The Chairperson commented that SALGA should be part of the PCA and should be represented as such.</li> <li>▪ Umgungundlovu District Municipality Mayor stated that it was an eye-opener for the stakeholders who attended to realize the gravity of the challenges that is faced by PCA.</li> <li>▪ Civil Society reported that this was an opportunity to meet at a district and local level in the conference. It was further stated that this should be established as a programme in the districts.</li> <li>▪ Dr Gumede reported that the conference went well and was appropriately organized.</li> <li>▪ Disability Sector Representative reported that there is little access to information and documentation for blind individuals. As a result blind individuals are unable to fully participate in relevant programmes. The Chairperson acknowledged that this is a challenge and</li> </ul>	<p>Director-General Dr. Ndlovu Disability Sector in consultation with Department of Arts and Culture</p>
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	<p>tasked the Director-General and Dr. Ndlovu to sort out the issue. As result of the above the Chairperson felt that the Agenda should be read through so as to address the issue raised. The Disability Sector also suggested that the minutes and Agenda should be sent prior to the meeting to all blind members electronically so that they can print out the material in brail.</p> <p>MEC - Department of Social Development suggested that the speakers should first introduce themselves before commenting so as to identify themselves to all members.</p> <p>Social Cluster Chairperson reported that the idea was to incorporate the 11 commissions report into plans and further reported that the profiling of households has begun. He further reported that the task team has taken the decision not to wait for the household profiling to be completed before going ahead with the interventions. As a result they will be visiting eShowe war-room on Thursday, 05 November 2009.</p> <p>MEC – Local Government and Traditional Affairs reported that she has been bombarded by the negative perception of the programme because there are people who are reported to be wearing party T-Shirts and this creates tension which could turn out to be detrimental to the programme. She requested that we become sensitive to Ward Councilors and inform them when moving within their wards. Further, she requested that</p>	
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	<p>no party T-Shirts should be worn or distributed as this is a sensitive issue. In addition MEC – Social Development suggested that, when going to communities, we need to seek buy in from stakeholders.</p> <p>MEC – Economic Development suggested that teams split themselves so as to cover a larger area. He further stated that the council members should receive regular report back on progress of teams. He urged members not to be swayed by challenges as they will always be there.</p> <p>Sisonke District Municipality Mayor reported that the district has identified 4 wards, two at Umzimkhulu and two at Ingwe Local municipalities. He reported that the DAC has launched and are doing their best and very soon they are going to integrate Provincial Strategic Plan on HIV and AIDS and Flagship Programme.</p> <p>eThekwini Metro Mayor reported on the progress of eThekwini. He, at this point, handed over to the eThekwini HIV and AIDS Coordinator to brief members on progress made.</p> <p>She reported that there is an ongoing discussion on alignment led by Sipho Cele. In the most disadvantaged wards, cadres have been trained and have started the household profiling. The AIDS Council has been briefed.</p>	
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	<p>The Mayor of eThekweni reported that the AIDS Council was established long time ago and has been operating; however, they have been faced with challenges. He further reported that there is low morale within the council and the legal framework is an issue and they are working on reenergizing the council. The issue of stipend for the members was a challenge in eThekweni</p> <ul style="list-style-type: none"> <li>▪ PCA Deputy Chairperson mentioned that there are 2 levels of understanding during this reporting by districts, one being the status of the District AIDS Council which requires its own reporting, and secondly the implementation of the programme. He stated that the question needs to be raised of what is happening in districts and in the wards. Is training taking place? Is there gardening? Are interventions taking place? Have cadres started household profiling. There needs to be a focus on the District AIDS Council to see what challenges they face.</li> <li>▪ Ugu District Municipality Deputy Mayor reported the DAC meets regularly. Local Municipalities are represented in the council. On 30 October the district municipality plan was drawn. The ward-based community volunteers are present and they are linked to the household. Task teams have been formed and war-rooms meetings are taking place once a week. The district HIV and AIDS coordinator added that she is pleased with the progress, that plans for the</li> </ul>	
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	<p>World AIDS day are in place and most of the councilors are aware of the progress. This task team is based in the office of the Mayor.</p> <ul style="list-style-type: none"> <li>▪ Ilembe District Municipality Mayor stated that the district task team have met and briefed the councilors. The cadres have been identified for the 2 wards; the municipality is in the progress of identifying an HIV and AIDS district coordinator. He mentioned that they will be having a meeting within the next 2 to 3 weeks with other stakeholders. After this has been done they will then have a fully functional District AIDS Council.</li> <li>▪ MEC – Social Development stated that Mayors must be the champions for their municipalities. They must also ensure that the AIDS Councils are launched at district and local level and dates should be scheduled for such initiatives</li> <li>▪ Umgungundlovu District Municipality Mayor stated that there needs to be a clear directive to all districts and local municipalities and these should be sent from the Office of the Premier so as to synergise efforts. He further added that proper monitoring needs to be put in place.</li> <li>▪ Refugee Sector representative stated that refugee stakeholders in all districts need to be integrated. He reported that he is happy regarding what is happening at the Office of the Premier in terms of HIV and AIDS coordination efforts and in eThekweni</li> <li>▪ NGO Representative reported that uThukela</li> </ul>	
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	<p>district municipality met on 22 October. She further reported that the DAC was launched; however, it is not fully functional. In the district task teams of the Flagship Programme, the NGO Sector was initially not represented and the matter was later resolved within the district. They have nominated 4 civil society stakeholders to form part of the war-rooms. HOD responsible for uThukela district reported that she does not know why there is no official representing uThukela District Municipality. She further reported that there is a challenge with the participation of the leadership in the district. She then stated that NGO's are now coming on board and they contribute through the programme which they run on the ground.</p> <ul style="list-style-type: none"> <li>▪ uThungulu Municipality - Deputy Mayor reported that they have been planning meetings and they have been 30 houses built for OVC 's and there is a uniform programme in the district. Provincial task team coordinator highlighted on the progress in terms of interventions at eQhudeneni after the launch. She reported that the programme is showing some fruit, the data collection has started, there is an upcoming ward 3 visit to Mbongolwane, a house was built for an old lady at Nxamalala, deprived wards have been identified, there is a school that is being renovated, with the One Garden One Home programme- 900 hundred households, have been given seeds, Home Affairs has been</li> </ul>	
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	<p>visible, as a result 600 ID's and 1000 Birth Certificates have been distributed.</p> <ul style="list-style-type: none"> <li>▪ Amajuba District Municipality report by HOD – Social Development reported that the task team meets on a daily basis at the war rooms, they have established a partnership with NGO's in the area. With the build up to World AIDS day they have identified key stakeholders and a programme which includes Men's Awareness Campaign, Abstinence Campaign, AIDS Awareness in the form of a door to door. They want to know the status of the war-rooms and also to ensure that each one is functional. Dannhouser has been identified as the target place for World AIDS day. World AIDS day will be funded by an international funder.</li> <li>▪ uMkhanyakude District Municipality – The HOD Champion for the district reported that from the conference there was a serious challenge on the consultation. 2 wards have been identified at a local level and they are working hard at engaging stakeholders at a local level. One of the challenges is that the task team members did not understand the Flagship programme. They were later briefed on the programme. Mayors have been addressed in terms of the programme. With regards to One Church One Garden, church leaders have been briefed on the programme.</li> <li>▪ Zululand District Municipality reported that the programme is running and DAC is functional.</li> </ul>	
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	<p>Cadres have been identified and trained. Profiling of households will begin next week. Local war-rooms meet regularly. The planning of World AIDS day has been happening on a weekly basis. He, however, stated that there is an issue of stipend confusion amongst cadres. He further stated that one key issue is the lack of participation by local municipalities. NGO's are participating. He reported that Provincial departments are not participating in meetings and he has prepared a list of these departments.</p>	
<p><b>COMMENTS BY CHAIRPERSON</b></p>	<ul style="list-style-type: none"> <li>▪ The Chairperson stated that the council needs to be aware that there is a visible disjuncture as each district should be presenting one integrated and cohesive report; however, this is not what is happening. District stakeholders should be working together so as to arrive at an integrated report.</li> <li>▪ Reports in future are to be – One Report One District and to further arrive prior to the PCA meeting</li> <li>▪ He stated that reports should be standardized to include the following: <ol style="list-style-type: none"> <li>1. TB: Chairperson stated that the council should be informed about everything that is happening in each ward regarding TB which includes - defaulters, how many people have TB, are</li> </ol> </li> </ul>	

	<p>people getting treatment and all the specifics around TB. In addition, the council must be informed which parts of the district have a problem.</p> <ol style="list-style-type: none"> <li>2. Voluntary Testing and Counseling: He stated that we need to find ways to do away with the stigma surrounding HIV and AIDS so as to motivate individuals to partake in VCT. A task team is to be set up to develop a pamphlet which will promote VCT and to destigmatise HIV and AIDS. These pamphlets will be distributed during the household visits and at VCT centres in the wards.</li> <li>3. PMTC: Chairperson reported that there is 40% of woman who are not testing, this needs to be resolved.</li> <li>4. One Garden One Home: Chairperson stated that nutrition is vital in the fight against HIV and AIDS and poverty. He further wants the council to be informed as to how many households are having a problem with their gardens.</li> <li>5. OVC: Council should be informed regarding the number of OVC's, the challenges such as ID's and birth certificates and the grants. The Chairperson further stated that the members should not only report on the challenges but also provide possible solutions.</li> <li>6. Family Planning: Chairperson stated that the issue of family planning needs to be openly discussed; further the issues around family planning in the wards should be discussed.</li> </ol>	<p>Chairperson Dr. Dlomo Dr. Zungu Dr. Ndlovu Dr. Buthelezi</p>
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	<p>7. Support Groups, community activities and meetings should be reported. Chairperson stated that every ward should have a support group; further the community should also have means of supporting infected and affected individuals. He also reminded members that we should adopt a military style operation because our fight against this pandemic is a war. He stated that this should not happen in only a few wards but in all the wards.</p> <p>8. NGO and Churches: Chairperson requested that the NGO sector and Churches should assist in mobilizing in this programme.</p> <p>9. Civil Society: The council should be informed as to what is happening in these sectors. Are they present in the wards and what are they doing in the wards?</p> <p>10. Government Officials and Community Leadership: The Chairperson stated that the council should be informed whether or not there is support by government officials and community leadership.</p> <p>11. Behavioural Change Campaign: Chairperson shared an experience he encountered when he was in Uganda regarding the openness of the Ugandan public towards HIV and AIDS. He then stated that as South African we behave as though HIV and AIDS is a problem experienced somewhere else on the continent other than our own country, he stated that this must change.</p>	
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	<p>Chairperson stated that reports by districts without the above mentioned issues are not complete reports. He took note of the districts Mayors that were not present and were also not present in the previous meeting.</p> <p>Chairperson commented that from the reports received at the meeting it seems that some District AIDS Councils are functional and most are not.</p> <p><b>WORLD AIDS DAY(WADO</b></p> <ul style="list-style-type: none"> <li>▪ An integrated World AIDS day status was presented. Funding for this activity was mentioned as a challenge. There were no details available regarding the uMkhanyakude District regarding WAD. The provincial government is expected to contribute towards commemoration of the World AIDS day.</li> <li>▪ Chairperson stated that in Pietermaritzburg we require an additional emphasis and an aggressive programme to reduce the number of new infections.</li> <li>▪ Observer NGO Representative stated that there is a key messages document available from SANAC for the World AIDS Day. Further there is an easy to complete data capturing format on the SANAC website regarding the activities for the World AIDS Day. At this point Deputy Chair stated that although this information is helpful and crucial, all work must be done in a coordinated fashion and SANAC has not coordinated these efforts with the council.</li> </ul>	
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<b>PRESENTATION AND COMMENTS</b>	<p>MEC – Health and Dr. Zungu presented HIV and AIDS in Africa over time, a figure on twin disease: HIV and TB, on HIV and AIDS in South Africa, and prevalence of HIV according to age and gender. He further informed members regarding the aims NSP 2007-2011 goals were explained. He stated that a key factor of NSP is to half new infections by 50% by 2011, however, as a province we are not near achieving this goal. Graphs illustrated the points above.</p> <p>MEC – Health commented that the slides showed that the prevalence is low amongst boys and girls until the age of 14, and there is a steep rise in girls from age 14, and in boys it remains low until the age of 19 when it starts rising. This means that young girls are have sex with older men. It is thought that this is due to material acquisition by young girls. Therefore an aggressive campaign is required to be led by this house targeting old men who are having sex with young girls, and this should be discussed openly. Health cannot deal with this issue; it requires the leaders in this AIDS Council. Tying back to the presentation, the MEC went on to state that TB and HIV are now twin infections, as a result where a case of TB is found individuals must be tested for HIV and vice versa.</p> <p>The presentation was made which showed the</p>	



	<p>prevalence rate of KZN compared to Gauteng as an industrial province with a low infection, Limpopo and Eastern Cape, poorer provinces also with low prevalence compared to KZN. But KZN and Mpumalanga having high rates, especially districts of Mpumalanga and Eastern Cape bordering KZN showing a higher rate. It is against this background that the Chairperson raised an issue of culture which may be influencing the above rates. The issue of circumcision is one such cultural issue which requires dialogue in the wards and in the communities. He stated that there is a need to find a practical way of dealing with this without bringing up cross-cultural debates and without creating controversy.</p>	
<b>MID-TERM REVIEW</b>	<p>Mid-Term review was discussed by Dr. Ndlovu. Key stakeholders were requested to be available for interviews, including the Premier, MEC's, DG, HOD's, MPL's, Programme Managers in the Departments, Mayors, Chairs of Portfolio Committee's, Interdepartmental Committee, Employee Wellness Committee.</p> <p>The MidTerm Review Document in the pack.</p> <p>Departments were requested to send key programme managers. Dates are 12-16 November. Relevant stakeholders were requested to be open and honest as</p>	

	<p>this mid-term review is not an interrogation but a review of where we are as a province. Dr. Ngobese, the consultant tasked with the review, reported that she will email the schedule of questions to all stakeholders and requested that those with information should send this through to her so as to shorten the interview process. She also explained that the aim of the interview is to assess what has been done and what needs to be done regarding the gaps and challenges.</p> <p>Spending Assessment Workshop to assess the HIV and AIDS Spending by government and civil society in KZN on 09 11 2009 co-ordinated by Treasury and key Programme Managers and finance Managers from Government and Civil Society to attend</p>	
<b>NGO REPORT</b>	<p>PCA Deputy Chairperson reported that it is important to get a status of sectors in the AIDS Council so as to get a sense of which sectors are active in which wards. This will include meetings and activities. He further suggested that the NGO sector needs to have a face-to-face interaction where they will be given an opportunity to report about themselves. He further spoke about NGO data requiring updating.</p> <p>Recommendation that a meeting of all civil society stakeholders be convened. This was adopted by the Members of the Council</p> <p>An observer who was tasked in the previous meeting to facilitate the process of consolidating the provincial NGO data in the province reported that the process is under way. They are currently still matching NGO's with their wards. She reported that there are currently</p>	

	<p>more than 3 000 NGO's in the province.</p> <p>The Deputy Chairperson reported that the Provincial Men's Sector met where 2010 FIFA World Cup efforts were conceived. There is a need for a strategy for this event.</p> <p>The Chairperson added that as a council we need to think about behavioural change and condom distribution. A task team was put together to create a linkage on between 2010 and HIV and AIDS. He further stated that preparation around 2010 require brainstorming, as a result the Men's sector has been tasked to lead this under the leadership of the PCA Deputy Chairperson. Publicity is important on the issue of male and female condoms. He further requested Dr. Zungu to facilitate the logistical process of condom and leaflets distribution. The task team has further been requested to identify any other key considerations around 2010, including human trafficking, child prostitution and children being targeted. This task team is expected to put ideas together regarding this matter. This task team to link with the Crime and Justice Cluster</p>	<p>Prof. Gqaleni Dr. Lubisi Dr. Zungu Ms. Madondo Dr. Ndlovu Men's Sector Representative</p>
<b>OTHER ISSUES</b>	<ul style="list-style-type: none"> <li>▪ Central Mailing List: Member requested that a central mailing list be set up so as to ensure that all council members received all correspondence.</li> <li>▪ Chairperson stated that members of the council must attend when invited. Observers and other</li> </ul>	

	represented are welcome to come as long as they add value and report back. Chairperson further indicated that there needs to be a sense of responsibility and districts are expected to make reports.	
<b>CLOSURE</b>	There being no further business the meeting closed with at 16h45	