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TABLING OF THE ANNUAL GAUTENG HIV/AIDS REPORT

**GAUTENG PROVINCIAL LEGISLATURE
JOHANNESBURG, 13 NOVEMBER 2003**

We have requested the scheduling of this sitting so that we can report to the legislature and the people of our province on the work that we are doing, in partnership with them and various stakeholders, to win the fight against HIV/AIDS.

This annual report outlines key events and the ongoing expansion of Aids programme delivery in Gauteng for the 2002/3 financial year. It also analyses the status of the programme and the cumulative impact on HIV prevention and Aids care in Gauteng.

The objective of the Gauteng Aids Programme is to implement an effective Aids strategy, combining the resources of all government departments and civil society sectors both locally and provincially under the Partnership against Aids.

The Partnership against Aids provides the framework for collaboration among stakeholders. A strong communication campaign facilitates a public response on a large scale. Progress has been made in "mainstreaming" Aids programmes in all government departments at all levels and mobilising civil society.

Our programme is based on the national government's five-year HIV/AIDS and STI Strategic Plan's three key components - Prevention, Care and Support. Within this, numerous sub-programmes provide a comprehensive set of interventions to both prevent the spread of HIV and provide care and support for people infected and affected by HIV and Aids. In addition, ongoing, innovative work around mass social mobilisation has helped shift attitudes and has built the community support necessary for the success of other interventions.

The programme is led by the Gauteng Provincial Government working together with local leaders and provincial and local Aids Councils. It is funded from dedicated AIDS grants allocated by national and provincial government to drive programme development and expansion.

The report that we are presenting to the house and to the people of Gauteng today, shows that during the period under review we have made further progress in our fight against HIV/AIDS.

Our success is highlighted by the increased levels of awareness about HIV/AIDS, change in behaviour especially among the young people who fall within the high risk group, reduction in the number of new infections, increased number of people going for voluntary counselling and testing and the positive attitude shown by communities towards people living with HIV/AIDS.

Prevention education programmes are showing impressive results especially among youth under 25 years old. There is clear evidence that the youth are changing their behaviour in response to the prevention messages. Surveys commissioned by the Gauteng Department of Health show that 70% of Gauteng's youth under 25 years old use condoms.

The surveys also show that schools and the media have the greatest influence on youth of school-going age. The younger the learner the better the education and the stronger the degree of behaviour change.

The schools programme now reaches around 1.3 million learners in 90% of Gauteng schools. The programme includes life skills training, Aids content across the curriculum, appropriate learning material and awareness events such as drama and sports competition. More than 15 000 teachers have been trained to administer the programme.

There are more than 250 000 youth in higher learning institutions throughout Gauteng. Most of the higher learning institutions actively support the Aids programme. The Gauteng Provincial government has introduced peer education through student organisations and funds voluntary counselling and testing in four campuses.

However, while there are encouraging trends in the behaviour of the youth, some young people still do get infected, especially the unemployed and those living in poor communities. There is therefore a need to strengthen and intensify the prevention campaign.

A new prevention programme targeting youth at greatest risk of HIV/AIDS infection has been introduced. The programme uses peer education and focuses on mining towns, hostels, sex workers and prisoners.

Large peer education projects have been operational in the mining areas of Carletonville, Westonaria and Randfontein. The Accept sex-worker project was extended to the entire Johannesburg inner city. Future plans include taking the programme to the hostels where it will also be used to intensify the cultural programme in single sex hostels.

Peer education in special risk settings effectively focuses resources at the centre of the HIV epidemic and will remain an important programme to address the special problems associated with the epidemic.

Peer education projects are linked to local health services where people are encouraged to go for voluntary counselling and testing.

Door to door campaigns around World Aids Day and Aids Care Week target those at greatest need and risk, including in peri-urban areas, informal settlements and the inner city. The campaign provides education for people not easily reached through other programmes. The campaign's effectiveness has been increased over the past year through systemic training of volunteers.

There has been an increase in the number of people availing themselves for our voluntary counselling and testing services. The VCT service aims to strengthen preventative behaviour and initiate early care of HIV-related illness.

National government prioritised VCT in 2000 and set a national goal to test 12.5 % of people between the ages of 15 and 49 years by 2004. A grant was provided to extend access to dedicated VCT services. According to studies, by the end of 2002 over 10% of the youth in Johannesburg and hostel residents availed them for the service and tested for HIV.

Gauteng's VCT service made further progress during the 2002/3 financial year. We now have 84 dedicated VCT sites in the province. More than 38 000 people were tested at these centres in one year. Many more were tested through the general health services.

The HSRC study commissioned by the Nelson Mandela Foundation showed that people were aware of the VCT service but were concerned about confidentiality and how they would cope with a positive HIV test result.

In addition, a national study by the Health Systems Trust in 2002 of the first phase of the VCT service showed that the counsellors provided a service of good standard, with high client satisfaction (90%), but that management systems, monitoring, supervision, support and payment of counsellors needed improvement. Future priorities include integrating VCT services into the District Health System (DHS), the prioritisation of people at high risk of infection and ensuring ongoing counselling and follow-up of those who test positive.

The expansion of the prevention of mother to child transmission programme has increased the reach of the prevention programme. All public hospitals within Gauteng and big clinics providing obstetric services now administer the mother to child prevention programme.

Between May 2001 and January 2003, a total of 103 799 women accessed the PMTCT service, and 60 339 (58%) of them opted for VCT. Of those tested 17 741 (29%) were HIV positive. 12 000 mothers opted for the PMCT programme.

The PMTCT programme adds measures to reduce HIV infection to existing antenatal and obstetric services according to national guidelines. The additional measures include VCT, Nevirapine for mother and baby, safe obstetric measures and the option of either breast-feeding or bottle-feeding with subsidised milk. Support and follow-up is required for both mother and the baby, including an HIV test for the baby at 12 months to assess whether HIV was transmitted.

It is important to note that the PMTCT intervention reduces but does not eliminate HIV transmission from mother to baby. Tests on a limited number of babies at 12 months, showed a reduction in the rate of HIV transmission.

The post exposure prophylaxis treatment provided by the province's 26 medico-legal crisis centres is an important addition to the prevention package.

Care for people living with HIV/AIDS places an extraordinary load on health care services. This is expected to peak around 2010, with maximum impact on acute care in hospitals. Our Aids care strategy provides a framework to re-orientate existing services to cope with increasing TB and Aids care loads. The programme aims to provide comprehensive care for HIV/AIDS and TB through local clinics.

Bigger clinics with doctors will care for sicker patients with AIDS, including the addition of antiretroviral treatment and palliative care. Hospitals will provide care for people with severe illness and refer to clinics, step-down beds and home based care services.

The clinic-based service relies on the fact that access has expanded dramatically between 1994 and 2002. Clinic visits per year increased from 1.6 million in 1994 to 10.6 million in 2002 through 450 clinics.

TB treatment at primary health care clinics is well established. Over 25 000 patients were treated for TB in 2000/1. This increased to 35 000 in 2002/3, with an estimated 60% being HIV infected.

The Gauteng AIDS Programme also provides Palliative care, care that is provided when curative treatment will no longer have an effect. This programme covers home-based care services and hospice beds run by NGOs.

Home-based care projects were initiated in 1998 and expanded to a total of 69 projects catering for over 20 000 clients in 2002/3. The home-based care service is provided by NGOs funded by the Gauteng Department of Health.

Our social support programme aims to reduce the impact of AIDS and improve the quality of life for affected families and children.

During the year under review the Department of Social Services and Population Development finalised a strategy for children affected by AIDS as part of the Gauteng Programme of Action for Children, which caters for all children in need.

There has been a progressive expansion of social support programmes for families and individuals affected by HIV/AIDS. Support programmes for families include dedicated local orphan support projects. Currently there are 37 dedicated orphan support projects in the province. Families affected by Aids also receive poverty relief assistance including free or subsidised municipal services, social security grants and food support.

Social mobilisation around the campaign against HIV/AIDS has grown to unprecedented levels. The multi-sectoral partnership against Aids comprising the Gauteng Provincial Government, non-governmental organisations, civil society organisations, faith organisations, workers and business is growing stronger with more sectors and groups joining.

The scale of our social mobilisation programme is best illustrated by our 2002 World Aids day campaign. In December 2002, ten thousand volunteers visited 1.8 million homes to educate and inform residents about HIV/AIDS and link them to available services.

Social mobilisation provides the social context for individual behaviour change and is a fundamental factor behind Gauteng's successful response to the epidemic. The key objectives of our social mobilisation are to promote openness, integrate HIV/AIDS into local culture, volunteerism and special partnerships.

Drama, dance and music have proved to be some of the most effective vehicles for communicating messages to large audiences. We have used local traditional, gospel and youth artists to communicate Aids messages to mostly young audiences. Aids activism is now part of local youth culture.

Social and cultural communication interventions strengthen identity and human values and convey HIV/AIDS messages in an inspirational context. Special events have received strong support from the broadcast media especially the SABC, KayaFM and YFM.

Ongoing communications form the bedrock of our programme and provide important support to other interventions. The communications strategy has proved to be most effective. Our media campaign sets trends for the private sector by extending beyond conventional advertising methodology. There is large scale public identification with the red ribbon and the logo, "we can make a difference", as a result of our communication methods.

Increasingly there is acceptance that people living with HIV/AIDS should be given a chance to lead a normal life. This is very encouraging as it will lead to the destigmatisation of Aids.

The Gauteng AIDS Programme has strategically supported the call for "openness" on AIDS by funding, supporting and profiling organisations representing people living with HIV and Aids (PLWHA), Aids Counselling and Care (ACCT), Friends for Life, the National Association of People Living with HIV/AIDS (NAPWA) and Bambanani.

The strength of the Gauteng Partnership against Aids was highlighted by the Gauteng Aids Summit which was held last month. Over five hundred people attended the summit representing government departments, NGOs, civil society organisations, professional organisations, trade unions and business. The summit identified common priorities which could be implemented jointly and severally by partners.

Highlights of the Gauteng Aids Partnership initiatives over the past year include:

- * Co-sponsoring an Aids conference for trade union federations Cosatu, Nactu and Fedusa, and providing training for public sector unions;
- * Funding training projects for people with disabilities;
- * Maintaining communication with lobby groups;
- * Supporting the Faith Organisations HIV/AIDS Partnership;
- * Collaboration with the private sector on workplace Aids programmes and community projects.

The Gauteng Aids Council was also strengthened with renewed participation by the South African Business Coalition on HIV/AIDS. The Faith Organisations HIV/AIDS Partnership committed its members to work with government and other stakeholders to implement Aids programmes. Several faith organisations already receive government funding for training and service delivery including home-based care, hospice and children services.

The Gauteng's AIDS programme will be complemented by renewed focus on poverty programmes and the antiretroviral treatment. Significant resources are available in the form of service infrastructure, dedicated Aids budgets, NGOs, civil society partners, technical expertise and the private sector.

Limited expertise in project and programme management is still the key factor limiting rapid expansion of services. Stronger management and administrative capacity is required in government, community based organisations and NGOs for us to overcome the challenges created by the epidemic.

We have developed significant expertise on effective and sustainable intervention models. Our Aids Programme is linked with other inter-sectoral programmes including GPAC, the Youth Strategy and poverty eradication programmes.

The achievements of the Gauteng Partnership Against Aids in the past year reaffirms our belief that if we work together as government, civil society organisations, workers, business, professionals, community organisations, traditional healers, faith organisations and other sectoral groups we can overcome the challenges posed by HIV/AIDS.

We reaffirm our commitment to grow the Partnership against Aids and mobilise the widest community of Gauteng to join the fight against Aids.