

# Why we need a strong Provincial AIDS Council in the Free State

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During the ANC's 52nd National Conference, the ANC committed to prioritize the strengthening of health and education delivery. Following this we have seen the political will to addressing the epidemic, at a national level. This must be translated into political will and action at a district and provincial level.

The Free State has expanded access to treatment and care for HIV yet as a province it is still far from meeting the National Strategic Plan (NSP) targets. The following steps must be taken to ensure that these targets are met.

## **Meeting the NSP targets and implementing updated treatment guidelines and policies**

Over the past few months, national government has taken a number of important steps to improve the national AIDS response and to meet the National Strategic Plan (NSP) targets to ensure access to ART for 80% of people in need and cut new infections by 50% by 2011. In line with this government aims to expand access to treatment through the accreditation of all health institutions in the country.

This year national government adopted updated policies and treatment guidelines to strengthen HIV treatment, care and prevention and expand access to ART. Government is also rolling out its HIV Counselling and Testing (HCT) campaign to increase the number of people that know their status. Civil society supports government in these efforts to expand HIV treatment, care and prevention.

In the Free State HIV prevalence amongst 15 to 49 year olds is 18.5%. The Free State province has an antenatal prevalence of 32.9%. Four of five districts in the Free State have an antenatal HIV prevalence above 30% and four of the five provinces have shown an increase in the antenatal HIV prevalence from 2007.

1. The Free State must properly implement the updated guidelines and the HCT campaign.
2. All healthcare facilities must be accredited to provide ART.
3. Further, all of the patients that were receiving ART through Prime Cure facilities that closed their doors during 2010 must be immediately absorbed by the Free State Department of Health and put onto ART.

## **Establishing and strengthening a Free State Provincial AIDS Council**

The establishment and strengthening of the Provincial AIDS Council is necessary to properly implement the updated treatment guidelines and HCT campaign in the Free State. The Provincial AIDS Council must be established through the Office of the Premier. Yet the Free State Premier has consistently blocked efforts to do this. By doing this the Premier is undermining national governments efforts to strengthen HIV/AIDS programmes.

Following the 2008/09 moratorium in the Free State, the Free State AIDS Coalition has sent repeated letters to the Premier and requests to meet regarding the establishment of the Provincial AIDS Council. He has only met with us one time.

4. It is the duty of the Premier to ensure that the Provincial AIDS Council is a strong, effective and accountable

mechanism for coordinating the AIDS response in the province.

5. The Provincial AIDS Council should align its structure with the National AIDS Council. A civil society representative should be elected to the position of deputy chair.

6. The Provincial AIDS Council must include all relevant civil society stakeholders, the private sector and relevant government departments.

7. The Provincial AIDS Council must meet regularly to carry out its mandate in line with meeting the objectives of the NSP.

### **Implementing a monitoring and evaluation tool and a provincial strategic plan**

The monitoring and evaluation of the ART rollout and the HIV programme in the province must be improved.

Improved monitoring and evaluation is necessary to identify gaps and barriers to meeting NSP targets.

8. The monitoring and evaluation tool developed last year must be authorised by the Premier to be implemented in the province.

9. Monitoring and evaluation must be strengthened to provide clear and transparent data on: the number of people living with HIV; the number of people on ART and the number of people on waiting lists for ART.

Each province must develop a provincial strategic plan to ensure that the NSP targets are met. The provincial strategic plan must be adopted by provincial government.

10. Provincial government must stop delaying the adoption of the provincial strategic plan in the Free State. This plan has been submitted to the Premier and is awaiting authorization.

### **Local and district AIDS councils must be functional and district health plans must be developed and implemented**

The district health system was formerly adopted under the National Health Act of 2003 (NHA). The aim of this was to expand access to healthcare through the decentralization of primary healthcare to a district level. District health delivery must be strengthened to improve antenatal, TB and HIV/AIDS service delivery and care.

11. District health plans must be developed and implemented as mandated under the NHA.

12. District and local AIDS councils must be functional and effective.

### **Supporting evidence based methods of treatment, prevention and care**

Under the leadership of President Jacob Zuma and the Minister of Health Aaron Motsoaledi, South Africa has clearly and unequivocally ended the decade of government endorsed AIDS-denialism which led to at least 170 000 new HIV infections and 340 000 avoidable deaths under former Health Minister Manto Tshabalala-Msimang. This has been reinforced with the implementation of updated evidence based treatment guidelines and policies. The Premier is undermining the implementation and uptake of these guidelines with incorrect, misleading statements about HIV treatment and ART.

Endorsed by:

The Treatment Action Campaign (TAC)

SECTION27

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The AIDS Alliance against HIV (AHA)