

eThekwini PLHIV lead the way to HIV-
related awareness, education, and
response at the community level

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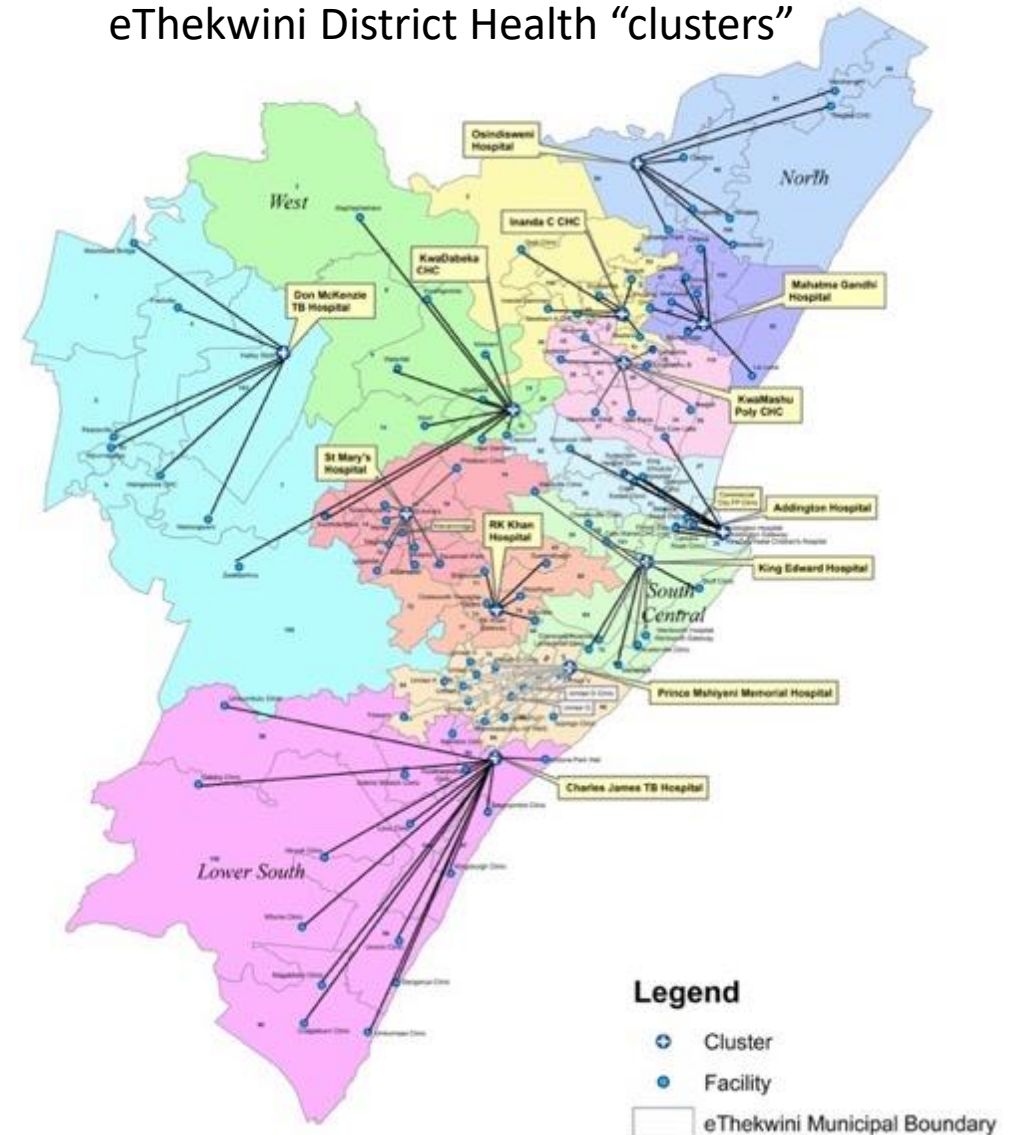
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eThekweni (Durban)

- eThekweni Metro (Durban) is located on the east coast of South Africa in the Province of KwaZulu-Natal (KZN)
- Size: 2 555km²
- Municipal wards: **111** (17 zones)
- Population: 3.9 million (34.7% of KZN population)
- 3rd largest metro in the country (following Johannesburg and Cape Town)
- Poverty:
 - 2.1 million live below the upper bound poverty line
 - **17.1% have no income** (2016 Stats SA Community Survey)
 - 8 802 live in **“child-headed” households** (child-headed = 15-19 yrs)
 - 42.14% live in women-headed households

eThekweni District Health “clusters”



eThekweni PLHIV

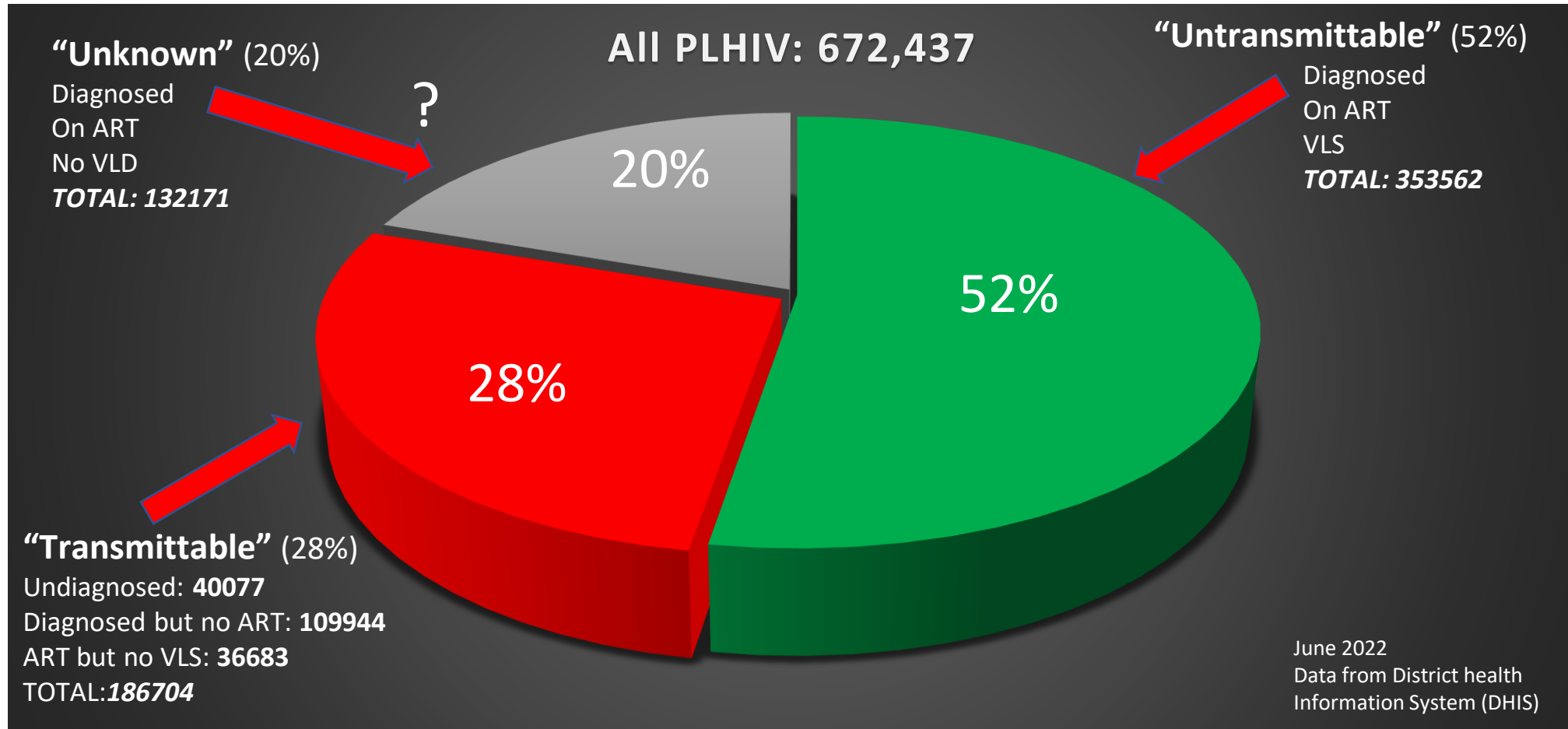
Population of PLHIV: 672,437

- 33% of all PLHIV in KZN
- 8% of all PLHIV in SA
- As of end of March 2022:
 - 94% of all PLHIV know their status
 - 83% are on treatment
 - *But...*
 - 28% of all HIV is transmittable
 - *And...*
 - More than 10 000 CLHIV not on ART



PLHIV Support group revitalization meeting

eThekweni HIV U=U



Our challenges...

- Doing well on diagnosis (96%) but challenges with **viral suppression** and staying in care and still challenges with some groups not taking up treatment (men)
- **“U=U”** and “Treatment as Prevention” – concepts not well known or understood among PLHIV or communities
- **Self-stigma** contributes significantly to poor adherence/ falling out of care
- **Support groups and adherence clubs have stopped functioning** – calls for “revitalization” from the PLHIV sector
- **Children living with HIV “left behind”** (self-stigma and lack of disclosure)
- Need for collaboration among partners providing different services (KP etc)
- Community ownership of response is weak because **Ward AIDS Committees are not functional** – poor understanding at ward level of PLHIV issues including impact of treatment, VLS, importance of staying in care, U=U, mental health

Our solution...

PLHIV *lead the way* to community awareness and ownership of HIV response

eThekweni Municipality has **prioritized support** for PLHIV leadership of the community response

- Activities to include
 - **Training of Ward AIDS Committees (WACs)**
 - **Revitalization of support groups** and adherence clubs
 - **Training of Traditional Health Practitioners**
 - **Treatment literacy**
- Support from mayor's office
 - Coordination of activities
 - Drivers and human resource support
 - Venues and refreshments for WAC trainings
- Support from Provincial HIV Directorate
 - Funds for PLHIV leadership to revitalize support groups and adherence clubs



For more information, visit your nearest public healthcare facility or contact the Mayor's Office - eThekweni District Aids Council Coordinator **Ms. Nthabiseng Malakoane** on 065 865 5602 or 031 311 2014. eThekweni Municipality cares and will assist those who are affected and infected with HIV.

Why PLHIV leadership?

Why PLHIV leadership?

- **Generalized epidemic:** anyone can be living with HIV
- **PLHIV understand the journey**
 - Share meaningfully about diagnosis to U=U
 - Personal stories are compelling – using Conversation Map
- **PLHIV understand the statistics**
 - PLHIV understand the data, the local facilities, and the challenges that they and their patients face
 - personally deal with the facilities in terms of HIV care and support (working with DoH)
- **PLHIV understand the response**
 - PLHIV leaders work closely with DAC and understand the vision and mechanism of the AIDS response
 - Well equipped to help communities know how to:
 - Develop sectors (from CBOs and NGOs)
 - Map partners
 - Profile community
 - Plan effectively



Meeting with Traditional Health Practitioners

PLHIV Leader-trainers

- Zonke, Phume, Ntokozo (youth)
- Speak comfortably about learning of status and living the journey
- Supported by other staff in office of District AIDS Coordinator (within Office of the Mayor)



Creating Awareness, Building Capacity in communities

What do we share with communities?

- **Journey of PLHIV** (Conversation Map)
- **HIV statistics** (local area)
- **HIV science** (U=U)
- **Treatment** (TLD, side effects, coping)
- **Response** to HIV (Structures, Strategies, Plans, Interventions)
- How to:
 - **Profile** community
 - **Map** partners
 - **Plan** strategically
 - **Report** on activities
- Tools we use:
 - **Conversation Map**
 - Ward AIDS Committee training modules
 - updated with information on PrEP, U=U, and impact of stigma/discrimination



Journey of PLHIV (Conversation Map)



We have expanded the use of the conversation map for PLHIV to a teaching tool for *communities...*

Understanding the journey of PLHIV is an important step in community awareness...



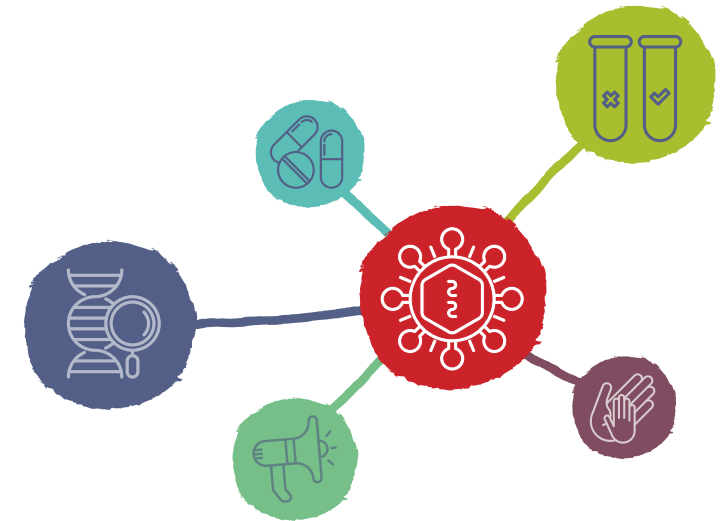
PLHIV leader-trainers are skilled

- International Treatment Literacy Campaign (ITPC) **trained PLHIV leaders** (FTC activity, August 2021)
- Excellent feedback on the ITPC training
- PLHIV leader-trainers are fully skilled and confident to:
 - Talk about what it means to ***live with HIV***
 - Lead the discussion around epidemiology (**share science, stats/cascades**)
 - Understand and convey concepts around preventing **transmission AND acquisition**
 - Understand and convey concepts around **stigma** and discrimination and how to eliminate it



IAPAC-ITPC Community Peer Educator Training to Optimise HIV Prevention, Treatment and Care

Training manual



Sponsored by



In partnership with



Through support from



Effectiveness? Feedback from community?

- All of the trained zones have requested follow-up training from our **“experienced” PLHIV**
- Department of Social Development has requested PLHIV leader-trainers to train groups of NPOs and ECD facilitators that they support (2 so far and 1 scheduled) - **“you have opened our eyes** in terms of understanding the HIV response” (transmittibility pie graph)
- People who hear the training in person and on air **disclose HIV status and challenges** of children living with HIV to trainers for help
- People **defaulting request support** from trainers with clinic challenges



Thank you!



community leaders “understanding”



Talking with ECD practitioners about the children “left behind”



ITPC training break!