

Noah District Research, 2010

REPORT SUBMITTED BY:
THE MONITORING AND EVALUATION UNIT OF:
NURTURING ORPHANS OF AIDS FOR HUMANITY (Noah)

COMPILED BY:
Janet Michel, Nomxolisi Malope, Beverley Sebastian & Rufaro Musvaire.

March, 2011

Particulars of the Organisation

Registered name of organisation	Noah (Nurturing Orphans of AIDS for Humanity)
Type of organisation	Association incorporated in terms of section 21 of the Companies Act, 1973. NPO 021/901
Registration number	2002/021668/08
VAT registration number	4860213513
Physical address of organisation	Block A The Pavilion, 9th Avenue Rivonia, 2128, Block 2 100 on Armstrong, La Lucia, Durban, 4320
Postal address of the Organisation	PO Box 4043 Rivonia, 2128 PO Box 1299 Umhlanga, 4320
Indicate Area of Operation (i.e. Town/City)	Noah operates 101 Arks across KwaZulu Natal and Gauteng, in both rural and urban environments.
Telephone Number	(011) 234 2270 / (031) 566 5395
Fax Number	(011) 234 2271 / (031) 566 5054
Contact	Beverley Sebastian – M&E Manager
Email address	bev@noahorphans.org.za
Website address	www.noahorphans.org.za

Today they live in our world; Tomorrow we live in theirs

Contents

Introduction.....	5
Purpose.....	5
Methodology.....	5
Research Questions.....	6
Report Outline	6
KwaZulu-Natal Districts	7
1. Amajuba District.....	8
2. eThekweni	11
3. Ilembe.....	13
4. Sisonke.....	14
5. Ugu	16
6. Umgungundlovu	18
7. Umkhanyakude	19
8. Umzinyathi.....	20
9. Uthungulu.....	22
10. Uthukela	24
11. Zululand	25
Nutrition profile of KwaZulu-Natal	27
Summary of HIV Prevalence in KwaZulu-Natal Districts	27
Projects in KZN	28
Gauteng Districts	33
1. City of Johannesburg	34
2. Ekurhuleni	35
3. Metsweding	37
4. Sedibeng	38
5. City of Tshwane	39
6. West Rand	41
Nutrition profile of Gauteng	42

Summary of HIV Prevalence in Gauteng 42

Projects in Gauteng..... 43

Introduction

Due to a high HIV prevalence rate, there is an orphan and vulnerable children (OVC) crisis in South Africa. According to **the United Nations Children's Fund (UNICEF)**¹, there are more children orphaned or left vulnerable by AIDS in South Africa than anywhere else in the world. In South Africa alone, about 3.8 million children have lost one or both parents². AIDS orphans are often subjected to a life of poverty; stigma; malnutrition; poor health and nutrition; limited educational and vocational opportunities; and inadequate social and emotional support. In response to the realisation that we face an "epidemic of orphans" following the AIDS pandemic in South Africa, Nurturing Orphans of AIDS for Humanity (Noah), was conceptualised in 2000. Noah works on franchising community-based models of orphan care through which motivated individuals from communities are guided to set up their own community of care (referred to as an Ark).

To meet the growing need and improve service delivery to vulnerable children, coordination of effort on a district level is imperative. In achieving this, further investigations into the socio-economic factors that affect vulnerable children per district, are necessary.

Purpose

To better coordinate services and plan more effectively, Noah's monitoring and evaluation (M&E) department commissioned this desktop study to profile the districts within which its Arks are located. Profiles comprise analysis of the socio-economic (including HIV burden) factors prevalent in the districts that affect vulnerable children. In particular, profiles include:

- Geographical layout of Arks and demographic information.
- Community profiles (key to addressing local issues).
- Dynamics in the districts within which the Arks are located that could impact positively or negatively e.g., districts that have poor service delivery.
- Location of businesses, NGOs and institutions that are potential partners in advancing the goals of Noah.
- Health District information including a breakdown of health facilities.

Methodology

A desktop study was employed using data from multiple sources including internet searches, monthly reports and the Noah 2010 evaluation report funded by Rockefeller Brothers. Where

¹ United Nations Children's Fund (UNICEF). Annual Report South Africa. 2008.

² South Africa General Household Survey. 2008.

information could not be found from these sources, District Municipalities were directly contacted.

Research Questions

There were 2 Research Questions in this study, these were:

1. What are the Community Profiles in the areas where Noah services children?
2. What are the socio-economic dynamics of the districts in which Noah services children?

Report Outline

This report provides district information for KwaZulu-Natal and Gauteng Provinces. To support future planning, where possible, it also includes information about districts where Noah is not present. Note that all numerical data per Ark is taken from October 2010 reported data.

KwaZulu-Natal Districts

KwaZulu-Natal (KZN), with a population of over 10 million people in 2008, has the highest population in South Africa, including the highest population under one year of age. It ranks as the second lowest province in terms of access to piped water with only 73.2% having access to piped water³. KZN also experiences wide inequity between districts. The HIV prevalence is 30.4% which is well above the national average of 24.3%; nine of the 11 districts fall in the 10 highest HIV prevalence rates in South Africa⁴.

According to the District Health Barometer (2008/09)⁵, 85.3% of all children under one year of age in KZN were fully immunised in 2008/09. This falls below the target of 90% but is an improvement on the 82.1% recorded in 2007/08. It should be noted, however, that the districts range from Amajuba at 61.1% to uMgungundlovu with an unrealistically high coverage of 124.1%. The table below compares districts in the province on poverty rankings.

Poverty rankings in KwaZulu-Natal Districts⁶

Rank	Umkhanyakude	Human Development Index	Income per capita	Average Income per annum
11	Umkhanyakude	77.1	Umkhanyakude	R5 040
10	Zululand	72.4	Zululand	R6 414
9	Sisonke	71.6	Umzinyathi	R6 789
8	Umzinyathi	69.6	Sisonke	R7 933
7	Uthukela	64.1	Uthukela	R8 036
6	Uthungulu	63.7	Ilembe	R8 090
5	Ilembe	62.5	Ugu	R9 855
4	Ugu	60.2	Amajuba	R10 419
3	Amajuba	56.8	Uthungulu	R11 399
2	Umgungundlovu	51.1	Umgungundlovu	R15 203
1	Ethekwini	31.5	Ethekwini	R23 345

The KZN district map outlines where each of the districts are located within the province and relative to each other.

³ Health Systems Trust. District and Province Profiles. Online: http://www.hst.org.za/uploads/files/secB_kzn.pdf

⁴ Health Systems Trust. The District Health Barometer 2008/09. Online: <http://www.healthlink.org.za/publications/864>

⁵ Ibid.

⁶ Central Policy Unit Document on Informa-Bits 2003. January 2004. Online: <http://amajuba.gov.za/demography>

Map of KwaZulu-Natal Districts⁷

Noah has partnerships with community Arks in 10 of the 11 districts in KZN the exception being Sisonke District.

1. Amajuba District

Background

Amajuba is located in the north-western part of KZN with Mpumalanga province to the north, Free State to the west and Zululand, Umzinyathi and Uthukela Districts as neighbouring districts to the south and east.

Population

The total population of the district is 593 269⁸.

⁷ KwaZulu-Natal District Map. Online: <http://www.kzntopbusiness.co.za/site/municipal-structure>

⁸ Amajuba District Municipality. Online: <http://amajuba.gov.za/demography>

Income and/or unemployment levels⁹

Income levels in the district are generally low. Annual household incomes for Amajuba District are summarised in the figure below. The number of households that have an annual income of R9 600 per annum or less (R800 per month or less) has more than doubled since 1996 (from 29 624 in 1996 to 59 153 in 2001). Of these 48% have no income (29.48% of all households) compared to 35.87% in 1996 (14% of all households). Households with no income are those in which there is not one income earner.

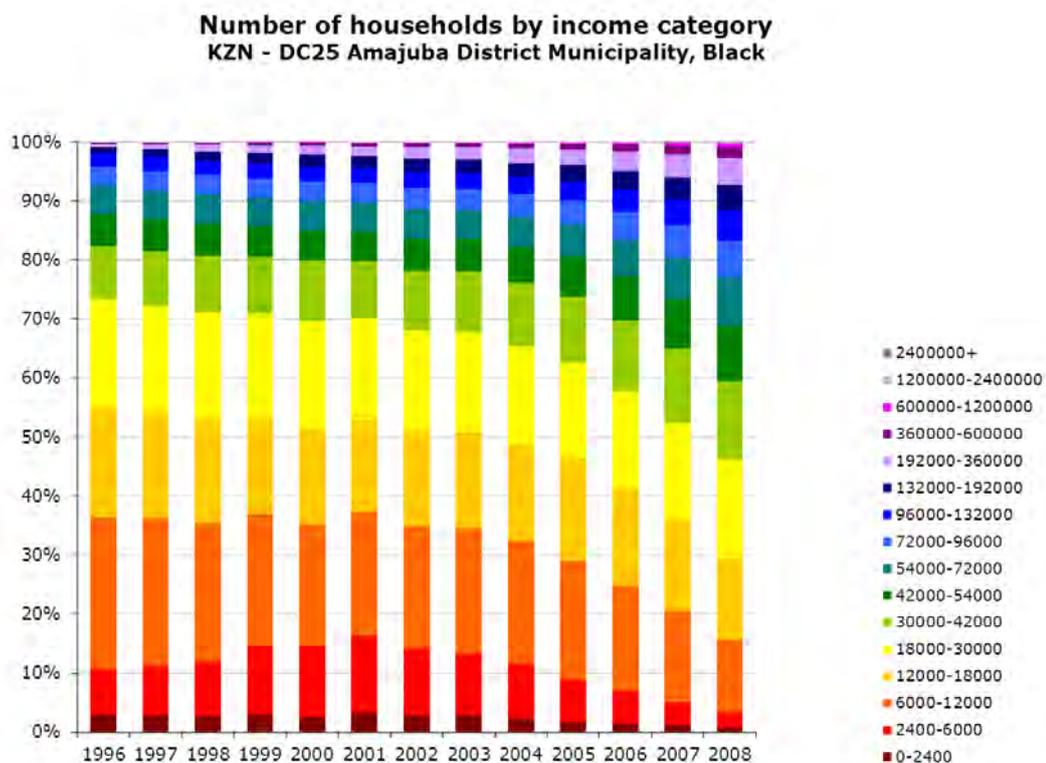


Figure 1: Annual household income in Amajuba District Municipality, 1996 - 2008

Figure 1 shows that between 1996 and 2004 about 35% of households in Amajuba earned less than R12 000 per annum. Although by 2008 this had decreased to 15%, nearly 50% of households still earn less than R30 000 per annum in the district.

Healthcare¹⁰

The district provides health services to the population using the Primary Health Care (PHC) approach. This is provided by facilities at different levels of health care. The district has 24 clinics; seven mobile units; one district hospital; and two regional hospitals. In 2008/09

⁹ Amajuba District Municipality. Online: <http://amajuba.gov.za/demography>

¹⁰ Health Systems Trust. The District Health Barometer 2008/09. Online: <http://www.healthlink.org.za/publications/864>

Amajuba had the lowest total PHC expenditure per capita as well as the lowest non-hospital PHC per capita expenditure.

HIV

The HIV prevalence rate of the district is ranked at a high of 49 (the closer the score is to one the lower the prevalence) and sits at 31.0%¹¹.

Projects of Interest in the District

Name of Project	Type of Project	Contact Information
*The Amajuba Child Health and Well-Being Research Project	Research – see * below for more info	Telephone: +27-11-276-8888 Email: wmacleod@bu.edu Website: http://www.bu.edu/cghd/projects/the-amajuba-child-health-and-well-being-research-project/
Association for Rural Advancement	Land Rights NGO	Telephone: +27 033 - 345-7607/8318 Fax: +27 033 - 345-5106 Website: www.afra.co.za
Amajuba Berries Project	Community Project - Job creation	Tel: (+27) 735 5410 Fax: (+27)866394438 Email: admin@amajubaberries.com Website: http://www.amajubaberries.com

*The Amajuba Child Health and Well-Being Research Project led by Tim Quinlan, was a collaboration between the Centre of Global Health and Development (CGHD) and the University of KwaZulu-Natal Health (UKZN), Health, Economics and AIDS Research Division (HEARD). The shared goal was to improve understanding of how the recent death of a parent affects the well-being of school-aged children in an area so heavily affected by HIV/AIDS. The CGHD followed a cohort of 157 recent orphans and 568 non-orphans, as well as their caregivers and household heads, in Amajuba District annually for three years. Their research showed that within two years after the death of a parent, orphans experienced health and nutrition deficits compared to non-orphans. Those who had lost both parents reported worse overall health and more serious illness in the last six months, while children who had lost only one parent were less likely to seek care for serious illness. Orphans in the study sample experienced hunger more frequently than non-orphans; however, they did not experience greater levels of depression or anxiety¹².

¹¹ Ibid.

¹² The Amajuba Child Health and Well-being Project. Online: <http://www.bu.edu/cghd/projects/the-amajuba-child-health-and-well-being-research-project/>

Noah in the District

District Name	Name of Arks	Location	Total OVC served
Amajuba	Inqaba	Okhalweni Primary	380
	Madadeni	Qedizaba Primary	197
	Ujabulile	Hlokamani Primary	185
	Siyanoqoba	Blaauwbosch Primary	148
	Uthando Lukababa	Thiyasizwe Primary	131

- Total number of Arks = 5
- Total number of OVC = 1041

Schools with feeding schemes in the district = all primary schools where Ark is located.

2. eThekwini

Background

eThekwini Metropolitan Municipality includes the city of Durban.

Population

The district has a population of 3 206 837.

Income and/or unemployment levels

The eThekwini area is also characterised by high levels of unemployment (45%), despite the fact that education levels are quite high, with over 80% of the study sample having secondary level education or higher. Possibly linked to lack of employment is the high level of alcohol use in this community. About one quarter of men visit shebeens, with about the same proportion admitting to have drunk heavily at least once in the past month preceding the study. This is important, since alcohol abuse is linked to increased risk taking such as increases in casual sex.

Healthcare

District health services in eThekwini Municipality are jointly provided by the Provincial Department of Health and the Local Government authority, the former contributing 60% and the latter 40%¹³. There are 120 clinics; eight community health centres; 25 mobile units; four district hospitals; and one central hospital.

¹³ KwaZulu-Natal Health: eThekwini Health District. Online: <http://www.kznhealth.gov.za/ethekwini.htm>

HIV

eThekwini has an HIV prevalence rate of 34.3% - ranked a high 51 on the Health Systems Trust's district rank¹⁴. According to a study conducted by Health Development Africa in 2009, there are low rates of marriage in this district, as low as 1% for men and 4% for women describing themselves as married. In fact, the number of people living with a married or steady partner was generally very low, especially for men.

Projects of interest in the District

Project Name	Type of Project	Contact Information
Zibambele Poverty Alleviation Programme	Poverty alleviation programme by improving maintenance of infrastructure of roads	Mark Tomlinson Programme Manager Roads & Stormwater Department Tel: +27 31 311 5959 Email: TomlinsonM@durban.gov.za

Noah in the District

District name	Name of Ark	Location	Total OVC served
eThekwini Metropolitan	Emalandeni	Inkonkoni Primary	124
	Masizenzele	Skhumbuzo Primary	157
	Hlangabezu Noah	Located in a container in the community	241
	Sinothando	Located in a building in the community	212
	Entukusweni	Ntukuso Primary	181
	Emngcweni	Emngcweni Primary	160
	Umthombo	Andrew Zondo Primary	236
	Christianenberg	Christianenburg Primary	175
	Vumelani	Located in a community church	150
	Siyajabula	Located in a building in the community	198
	Insika	Zandile Primary	225
	Sithokozise	Sithokoziso Primary	319
	Ikhaya LikaBaba	Excelsior Primary	149
Sidelile	Sidelile High	164	

¹⁴ Health Systems Trust. The District Health Barometer 2008/09. Online:

<http://www.healthlink.org.za/publications/864>

District name	Name of Ark	Location	Total OVC served
	Siyawela	Located elsewhere	577

- Total number of Arks = 15
- Total number of OVC = 3 268
- Schools providing feeding schemes = all primary schools.

3. Ilembe

Background

Ilembe Health District is situated at KwaDukuza, about 75 km from Durban. The district comprises of a small urban area, the remainder being largely rural.

Population

The District has a population size of 617 622¹⁵.

Income and/or unemployment levels¹⁶

For the district as a whole, approximately 72% or nearly three quarters of the population have an annual household income of less than R18 000. This translates to a monthly income level of below R1 500. **Considering these income levels in terms of “minimum living levels,”** the severity of poverty levels in the district municipality is evident.

The Bureau of Market Research at the University of South Africa defines minimum living levels as **“the minimum financial requirements of members of a family if they are to maintain their health and have acceptable standards of hygiene and sufficient clothing for their needs.”** The minimum living levels in 1996 ranged from R431 for a single-member household to R1 840 for an eight member household in South Africa. Assuming an average household size of six in Ilembe District, it is clear that the majority (more than 70%) of households have an income below the minimum living levels.

Close to 80% of households in Ndwedwe and Maphumulo have an income below the minimum living levels. The situation is only slightly better in eNdongakusuka and KwaDukuza where 71% and 62% of households respectively, have incomes below the minimum living levels.

¹⁵ KwaZulu-Natal Health: Ilembe Health District. Online: <http://www.kznhealth.gov.za/ilembe.htm>

¹⁶ Ilembe District Municipality.

Healthcare

Ilembe District has 30 clinics; two community health centres; 10 mobile units; two district hospitals; three regional hospitals; and one provincial tertiary hospital.

HIV

According to the DHIS, the HIV prevalence among antenatal clinic (ANC) clients tested is ranked 47, while one survey ranked HIV prevalence in ANC clients at 43.

Projects of interest in the District

In managing the health environment and the AIDS pandemic in Ilembe, the Council is faced with the major challenge of responding to the issue of HIV/AIDS and AIDS-related issues, such as AIDS orphans. To address this, the Council has approved a number of projects that are aimed at providing care for AIDS orphans.

Noah in the District

District	Name of Ark	Location	Total OVC served
Ilembe	Shaka'shead	Located elsewhere	337
	Emantanjeni	Umvozana Primary	305
	Ekunqobeni	Ekunqobeni Primary	217
	Nkobongo	Located elsewhere	388

- Total number of Arks = 4
- Total number of OVC = 1 247
- Schools providing feeding schemes = All primary schools

4. Sisonke

Background

Sisonke Health District is found in the south of KZN. The district is divided into five municipalities: Greater Kokstad, Ingwe, Kwa-Sani, uMzimkhumu and Ubuhlebezwe.

Population

The population is estimated at 508 033¹⁷.

¹⁷ Sisonke District. Online: [http://sanral.ensightnetworks.com/content/Appendix_5_Social_Report_\(Par_B\)~1.pdf](http://sanral.ensightnetworks.com/content/Appendix_5_Social_Report_(Par_B)~1.pdf)

Income and/or unemployment levels¹⁸

INCOME	MUNICIPALITY				
	Ingwe	Kwasani	Kokstad	Ubuhlebezwe	Umzimkhulu
R1 - R 400	23	8.5	10.9	13.2	15.4
R401 - R 800	29.6	24.5	17.9	25	22
R801 - R1 600	33	37.5	31.6	44	46.6
R1601 - R3 200	6.5	10	12.3	6.2	7
R3201 - R6 400	4.4	9.5	13	5.2	4.2
R6 401 - R12 800	3.2	4.9	11.5	4.1	3.4
R12 801+	0	5	3	2	2

A large number of the work force in Sisonke District earns less than R1 600 a month. This is attributed to the low levels of education in the district¹⁹.

Healthcare

Sisonke District has 37 clinics; one community health centre; 12 mobile clinics; and four district hospitals.

HIV

According to the 2008 Sero-Prevalence Survey, the HIV prevalence in this district stood at 35.8% which was an increase from the 2007 prevalence of 34.1%.

Projects of interest in the District

The municipality has an HIV/AIDS strategy which looks at broad programmes of dealing with pandemic in the greater municipal area. Woza Moya Project operates in the rural area of Ixopo in Sisonke District. It provides home-based care and implements a comprehensive programme addressing the needs of OVC and their primary caregivers. They also operate a drop in centre which provides paralegal services, counselling and hosts support groups and income generating activities.

Noah in the District

There are no Noah Arks in the district.

¹⁸ Statistics South Africa, 2007.

¹⁹ KwaZulu-Natal Development Plan. Online:

http://www.devplan.kzntl.gov.za/idp_reviewed_2010.../Draft%20IDP%201011.pdf

5. Ugu

Background

Ugu Health District is found in the lower South Coast of KZN. The neighbouring districts are eThekweni and Sisonke.

Population

The estimated population is 714 453²⁰.

Income and/or unemployment levels²¹

Ugu consists of six local municipalities: Umuziwabantu, Ezinqoleni and Vulamehlo are located inland, while Umzumbe, Umdoni and Hibiscus Coast on the coast. Areas along the coast have well developed infrastructure and reasonable economic growth, while the large rural areas are characterised by poor infrastructure and high unemployment levels. The population is largely low-income; more than 44% of households earn less than R1 500 per month and almost 60 percent earn less than R2 500 per month. The unemployment rate for the district as a whole is estimated at 30%.

Rural households depend largely on external income sources, e.g. government grants and remittances from relatives working in urban areas.

Ugu is the most popular tourism destination in KZN. The district's excellent sporting facilities, notably its golf courses, are internationally known and host a number of international events. One leisure resort in the district has conducted a feasibility study which has shown that an investment in a golf course of approximately R2 million would garner some R560 000 a year net profit. Ugu District features sites that are suitable for ecologically balanced development to meet the demands of local and foreign travelers. A 10 000 ha tract has been identified in tribal trust areas as suitable for a game farm and leisure development.

Despite the vast potential in the district, there is lack of access to economic opportunities and social services. There is also a high level of unemployment in the node. According to the abovementioned feasibility study, the unemployment level within Ugu District municipality is currently estimated at 30%. The majority of the people within this node are employed in the domestic industry, tourism industry and sugarcane and banana farms in the area.

²⁰ District Health Information System Estimate, 2007

²¹ <http://www.waterdialogues.org/south-africa/documents/p.118UguCaseStudySummary.pdf>

Healthcare²²

There are five Hospitals in Ugu District, they are; Dunstan Farrell, GJ Crookes, Murchison, Port Shepstone, and St Andrews. The district provides health service to the population using the PHC approach through the District Health System; this is done at all levels of care. There are 57 clinics; 21 mobile clinics; three district hospitals; one regional hospital; and one specialised hospital.

HIV

HIV prevalence in 2008 stood at 40.6% - a leap from 37.3% in 2007.

Projects of interest in the District

A specific objective is a district-wide Integrated HIV and AIDS Strategy which aims at prevention; care for the affected and infected; and awareness programmes.

Noah in the District

District	Name of Ark	Location	Total OVC
Ugu	Nobantu	Located in a stand-alone house.	247
	Zibambele	Located in a community member's house.	244
	Intokozo	Located in a Resource Centre previously a crèche.	332
	Siyathuthuka	Located in a community hall.	122
	Injabulo	Maria Trost Junior Primary.	208
	Vusimpilo	Icabhane Primary School	358
	Sethembile	Mqhakama High	292
	Sfisokuhle	Located in a Resource Centre.	306
	Sbong'uNoah	Mgayi Primary	320

- Total number of Arks = 9
- Total number of OVC = 2 429
- Schools providing feeding schemes = all primary schools.

²² KwaZulu-Natal Health, Ugu District Information.

6. Umgungundlovu

Background

The uMgungundlovu District Municipality is located in the KwaZulu-Natal Midlands. Collectively the district is made of seven local municipalities²³.

Population

The district has a population of 995 303²⁴.

Income and/or unemployment levels²⁵

Close to 70% of households have incomes less than R1 500 per month. Most of the economic activity is concentrated in Pietermaritzburg, which contributes 75% of uMgungundlovu's gross geographic product. The average unemployment rate in the district is about 40% with some local municipalities recording up to 50-70% unemployment rate. The bulk of employment opportunities are in the farming, manufacturing and social services sector. Some are temporarily employed by surrounding sugarcane farmers where they earn below minimum living wages.

Healthcare

The district has 50 fixed clinics, 19 mobile clinics, four community health centres and nine hospitals. The hospitals are Appelsbosch Hospital, Edendale Hospital, Doris Goodwin Hospital, Fort Napier Hospital, Grey's Hospital, Northdale Hospital, Richmond Hospital, Townhill Hospital and Umgeni Hospital.

HIV

The HIV prevalence among ANC clients in Umgungundlovu between the year 2008 and 2009 was ranked 45. HIV prevalence in 2008 was 45.7%, a dramatic increase from 40.8% in 2007. The figure is alarming as it indicates that almost every second pregnant woman in the district is HIV positive. The implications for the OVC are enormous.

²³ Umgungundlovu District Municipality. Online:

http://umdm.gov.za/index.php?option=com_content&view=article&id=84&Itemid=58

²⁴ Ibid.

²⁵ Ibid.

Noah in the District

District	Name of Ark	Location	Total OVC
Umgungundlovu	Inqola	Trustfeed Primary school	84
	Embeka	Mbeka Primary	113
	Inyaninga	Inyaninga Primary	132
	Etsheni	Located in a community hall.	128
	Inhliziyo	Located in a community hall.	128
	Vuka	Vuka Primary	192
	Gcinamanyavu	Gcina Primary	190

- Total number of Arks = 7
- Total number of OVC = 967
- Schools providing feeding schemes = all primary schools

7. Umkhanyakude

Background

Umkhanyakude District, named after the famous yellow-barked fever tree, literally meaning "seen from afar", is the northernmost district in KZN and contains many areas of outstanding natural beauty²⁶.

Population

The district has a population of 573 341²⁷.

Income and/or unemployment levels

As measured by the Health System Trust, Umkhanyakude has one of the highest levels of deprivation (4.5 out of 5) in South Africa²⁸. Social grants are the main source of income in the district. On average, income distribution among households is wide but a cumulative 87.5% of households in the district earn at most R54 001 per annum²⁹.

²⁶ Umkhanyakude Health District. Online: <http://www.kznhealth.gov.za/umkhanyakude.htm>

²⁷ Ibid.

²⁸ The Municipal Outreach Project. Online: <http://www.eumunicipaloutreach.org.za/newsletters/newsletter-60-from-the-richest-to-the-poorest-and-those-in-between-2013-26-february-2010/>

²⁹ Umkhanyakude District: Socioeconomic Profile. Online: http://www.tikzn.co.za/Investment_Map/uMkhanyakudeDistrictMunicipality/SocioEconomicProfile.aspx

Healthcare

The Department of Health has five district hospitals in the district: Manguzi, Mosvold, Mseleni, Bethesda and Hlabisa. All five hospitals were originally missionary hospitals which became nationalised around 1980.³⁰ There is a general improvement on the indicators of TB, STI and child health. The trend with maternal health indicators is not clear but could be worsening due to high prevalence of HIV/AIDS in the district. Umkhanyakude has 53 clinics and 15 mobile clinics.

HIV

According to the 2008 Sero-Prevalence Survey the HIV prevalence in this district stood at 39.9% from 39.8% prevalence in 2007. It is still above the provincial average prevalence rate of 38.7%.

Projects of interest in the District

The Africa Centre for Population Studies is based in the district. Mpilonhle HIV Prevention and Management amongst Adolescents is also very active in the district. In short, when it comes to HIV prevention and management programmes, Umkhanyakude is one of the well served districts.

Noah in the District

District	Name of Ark	Location	Total OVC
Umkhanyakude	Noah's Ship	Located elsewhere	186
	Melusi	Indukebandla Primary	253
	Nansimpilo	Imanyiseni Primary	280
	Sisizisizwe	Veyani Primary	246
	Nkomo	Inkomo Primary	167
	Noah's Ship	Located at a Resource Centre	354

- Total number of Arks = 6
- Total number of OVC = 1486
- Schools providing feeding schemes = all primary schools

8. Umzinyathi

Background

³⁰ Ibid.

Umzinyathi District is situated in the central part of KZN. The neighbouring districts are Amajuba, Zululand, Uthungulu, ILembe, Umgungundlovu and Uthukela. The district covers an area of 8,079 square kilometres and is 80% rural. It comprises four municipalities namely Endumeni, Nquthu, Msinga, and Umvoti. The major towns are Dundee and Greytown³¹.

Population

The total population of the District 2006/7 is 456 459³².

Income and/or unemployment levels³³

The population of Umzinyathi is generally poor with 90% of households earning a monthly income of R1 000 per month. Eighty per cent of the population resides in deep rural and under-developed areas. The number of people registered as unemployed is just under 20%. Based on the 1996 census, 23% of households in the district have no income and 56% have an annual income of under R18 000.

Healthcare

There are four district hospitals namely, Charles Johnson Memorial, Church of Scotland, Dundee Hospital and Greytown Hospital. Eighty eight per cent (88%) of the population relies on public health services for health care³⁴. The impact of HIV/AIDS is being felt dramatically in the district with the increase in the number of orphans, escalating infant mortality and the continuing demise of **'bread winners' and other family members**. The AIDS pandemic in Umzinyathi District presents the biggest challenge for the development of the area³⁵. Umzinyathi District has 45 clinics; 11 mobile clinics; and four district hospitals.

HIV

In 2008 the HIV prevalence in this district stood at 29.2% a drop from 33.6% in 2007.

Noah in the District

District	Name of Arks	Ark location	Total OVC
Umzinyathi	Siyacathula	Siyacathula Primary	137

- Total number of Arks = 1

³¹ Umzinyathi Health District. Online: www.kznhealth.gov.za/umzinyathi.htm

³² Umzinyathi District Municipality. Online: www.ewisa.co.za/.../KZNDISUmzinyathi/Umzinyathi%20District%20Municipality_171104.pdf

³³ Ibid.

³⁴ Umzinyathi Health District. Online: www.kznhealth.gov.za/umzinyathi.htm

³⁵ Umzinyathi District Municipality. Online: www.ewisa.co.za/.../KZNDISUmzinyathi/Umzinyathi%20District%20Municipality_171104.pdf

- Total number of OVC = 137
- Schools providing feeding schemes = Siyathula Primary School.

9. Uthungulu

Background

The Uthungulu Health District comprises of six local authority areas.

Population

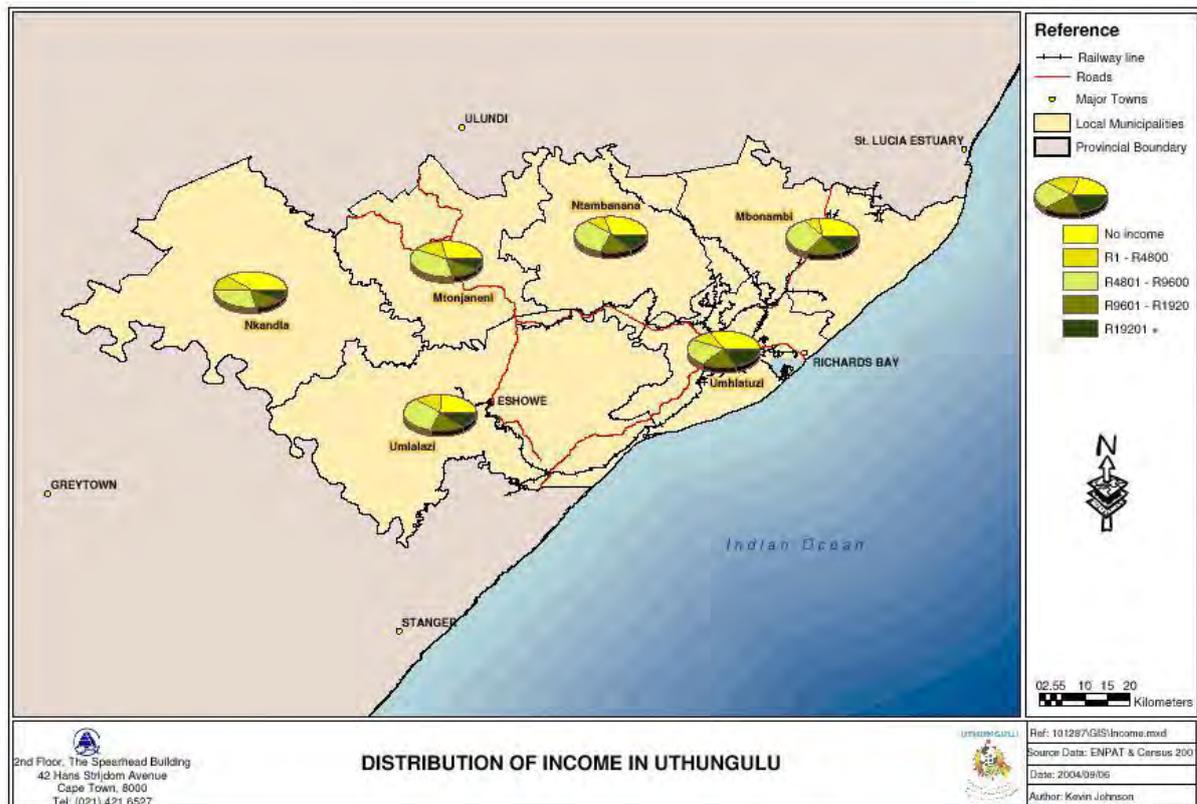
The district has a population of 898 913³⁶.

Income and/or unemployment levels

The unemployment rate is 24% and poverty is rife in Uthungulu District. The income distribution map below³⁷ shows that over a third of households in the district have an income of less than R4 800 per annum.

³⁶ Uthungulu Health District. Online: <http://www.kznhealth.gov.za/uthungulu.htm>

³⁷ Towards a Disaster Management Plan for the Uthungulu District Municipality. 2008. Online: devplan.kzntl.gov.za/.../DISASTER%20MANAGEMENT%20PLAN%20- %20Uthungulu%20DM%20version%2011.pdf



Healthcare

The general health of the people and the occurrence of cholera, malaria and HIV/AIDS in the district impacts on the socio-economic wellbeing of the people and the nature, extent and cost of service delivery in the district³⁸. The district has two regional hospitals, six district hospitals, 44 fixed clinics and 14 mobile clinics with 256 visiting points. The district also has six local authority clinics³⁹.

The hospitals in the district are Catherine Booth, Ekombe, Eshowe, Lower Umfolozi, Mbongolwane, Nkandla, Kwamagwaza and Ngwelezana.

HIV

HIV prevalence stood at 36.1% in 2008, an increase from 35.9% in 2007. According to the Uthungulu District Municipality Integrated Development Plan Review (2006/2007), there is a need for more strategic and driven HIV/AIDS awareness programmes in Uthungulu as the level of AIDS related deaths especially amongst the youth is very high. However, funding for

³⁸ Uthungulu District Municipality Integrated Development Plan Review: 2006/2007. Online: www.devplan.kzntl.gov.za/idp_reviewed_2006_7/.../Final_2June06.pdf

³⁹ Uthungulu Health District. Online: <http://www.kznhealth.gov.za/uthungulu.htm>

such programmes is an issue and a database of potential funders who can provide aid such as the United Nations Development Programme needs to be established in the district.

Noah in the District

District	Name of Ark	Location	Total OVC
Uthungulu	Obanjeni	Obanjeni Primary School	273
	Zamimpilo	Located in a Resource Centre.	315
	Siyadingana	Esikhawini Combined	260
	Lihlithemba	Liththemba Primary	139
	Zimisele	Kwazikhwake Primary School.	218
	Nhliziyonye	Located in a Resource Centre.	287
	Amandawe	Amandawe Primary	176
	Sibonelo	Located in a church.	139
	Ncemaneni	Ncemaneni Primary	187
	Vulinqondo	Vulinqondo Primary	312
	Vuma	Inhlisa Primary	119
	Nombuyiselo	Injabulo Yesizwe Primary School	342

- Total number of Arks = 12
- Total number of OVC = 2 767
- Schools providing feeding schemes = all primary schools
- Duplication of services = 83%

10. Uthukela

Background

The Uthukela Health District comprises five local authority areas.

Population

The district has a population of 553 671⁴⁰.

Income and/or unemployment levels⁴¹

⁴⁰ Uthukela Health District. Online: <http://www.kznhealth.gov.za/uthukela.htm>

⁴¹ Uthukela District Municipality, Integrated Development Plan 2010/2011. Online: <http://devplan.kzntl.gov.za/.../uThukela%20DM%2010-11%20ADOPTED%20IDP.Pdf>

Unemployment sits at 65% in Uthukela. The highest numbers of households are to be found in the income categories between R6 000 and R42 000 per annum. These income categories account for almost 65% of all households in the district. This proportion is higher than the provincial (51%) and national (47%) averages.

Healthcare

The district has one regional hospital, three district hospitals, three primary health care facilities, 24 fixed clinics and 17 mobile clinics with 177 visiting points. There are also nine local authority clinics in the district. There are three Hospitals in Uthukela they are; Emmaus, Estcourt and Lady Smith hospitals.

HIV

According to the 2008 Sero-Prevalence Survey the HIV prevalence in this district stood at 38.6, a jump from 36.2% in 2007.

Noah in the District

District	Name of Ark	Ark location	Total OVC served
Uthukela Municipality	Isisekelo	Ifalethu Primary	134
	Sakhisizwe	Located at Resource Centre	260
	Sinethemba	Located at a Resource Centre	153
	Thandanani	Mancamakazane Primary School	195
	Sakhimpilo	Located in a church	222

- Total number of Arks = 5
- Total number of OVC = 964
- Schools providing feeding schemes = all primary schools

11. Zululand

Background

Zululand District is situated in the northern part of KZN. It is neighboured by Uthungulu District in the south, Umkhanyakude District is in the north-east, Mpumalanga Province and Swaziland in the north, Amajuba District in the northwest and Umzinyathi District in the southwest. Matshamhlophe is a rural area in Zululand which, until 1995, was heavily affected

by violent faction fighting that claimed the lives of many men and women and as a result left children parentless.

Population

The district has a population of 823 786.

Income and/or unemployment levels⁴²

An overwhelming 49.6% of the employed population earn less than R800 per month in Zululand. Conversely, **only 4.2% of the total district's population earn more than R800 per month**; in other words 4.2% of the population is financially supporting the majority of the **district's population**. eDumbe and uPhongolo local municipalities have the worst dependencies with 69% and 65% respectively of the employed earning less than R800 per month. Overall, **a vast majority of Zululand's population is poor**.

Healthcare

Zululand has six hospitals and 67 clinics.

HIV

The HIV prevalence in this district stood at 36.1 in 2008, an increase of 1.5% from 2007.

Noah in the District

District	Name of Ark	Ark location	Total OVC served
Zululand	Matshamhlophe	Bhobhobho Primary School	163
	Khayelihle	Bhekuzulu Primary School	163
	Inqanawe	Located at a Resource Centre	300
	Siyanakekela	Inhliziyonhle Primary School	145
	Maphophoma	Fundukhuphuke Primary School	209

- Total number of Arks = 5
- Total number of OVC = 980
- Schools providing feeding schemes = all primary schools

⁴² Zululand: Physical and Socio-Economical Profile. Online:

www.zululand.org.za/.../DC26_WSDP_Section_3_Physical_profile_V01_105.pdf

Nutrition profile of KwaZulu-Natal⁴³

In South Africa one in ten children suffers from severe malnutrition, 50% of these being preschool children. Statistics released in June 2008 by Stats SA show that food inflation averaged 18.9% in KZN and was six percentage points above the national average of 18.3%. In KZN in 1999, 48% of children experienced hunger, while 20% of all children were at risk of experiencing hunger. The problem is compounded by the myriad of HIV-induced social problems such as elderly and child headed households which exacerbate food insecurity. KZN being the province with the highest HIV prevalence also has the highest number of OVC in the country.

Summary of HIV Prevalence in KwaZulu-Natal Districts⁴⁴

Amajuba: According to 2008 estimates, HIV prevalence in this district stood at 34.7% which is slightly lower than the provincial prevalence rate of 38.7%.

Ethekwini: HIV prevalence in this district stood at 40.3% in 2008. Although slightly lower than the 2007 prevalence rate of 41.6%, it remains higher than the provincial rate of 40%.

Ilembe: HIV prevalence in this district stood at 35.8% in 2008. This was a considerable drop from a prevalence rate of 41.4% in 2007.

Sisonke: According to the 2008 Sero-Prevalence Survey, the HIV prevalence in this district stood at 35.8% which was an increase from the 2007 prevalence of 34.1%.

Ugu: HIV prevalence in 2008 stood at 40.6% - a leap from 37.3% in 2007.

Umgungundlovu: HIV prevalence in 2008 was 45.7%, a dramatic increase from 40.8% in 2007. The figure is alarming as it indicates that almost every second pregnant woman in the district is HIV positive. The implications for the OVC are enormous.

Umkhanyakude: According to the 2008 Sero-Prevalence Survey the HIV prevalence in this district stood at 39.9% from 39.8% prevalence in 2007. It is still above the provincial average prevalence rate of 38.7%.

Umzinyathi: In 2008 the HIV prevalence in this district stood at 29.2% a drop from 33.6% in 2007.

⁴³ South Africa National Food Consumption Survey, 1999.

⁴⁴ National Antenatal Sentinel HIV and Syphilis Prevalence Survey, 2008.

Uthungulu: HIV prevalence stood at 36.1% in 2008, an increase from 35.9% in 2007.

Uthukela: According to the 2008 Sero-Prevalence Survey the HIV prevalence in this district stood at 38.6, a jump from 36.2% in 2007.

Zululand: The HIV prevalence in this district stood at 36.1 in 2008, an increase of 1.5% from 2007.

Projects in KZN

There are various organisations and potential partnerships in the province. These are located in various districts which may partner with the Arks. Among them are:

a) Sinani⁴⁵

Sinani is a Nguni word which means “we are with you.” Sinani, otherwise known as the KZN Programme for Survivors of Violence, is a dynamic non-government organisation which has earned a positive reputation for collaborative partnerships with communities affected by violence, poverty and HIV & AIDS. Sinani works on request from community leadership and community based organisations, to bolster locally appropriate interventions addressing peace; economic development; HIV prevention and support to people affected by HIV and AIDS. Together with community partners, Sinani assesses local dynamics and tries to draw on existing resources and traditional ways of addressing these problems, while introducing new learning and networking. The organisation is structured into three core programmes: Peace-Building, Poverty Alleviation, HIV and AIDS.

b) Gijima⁴⁶

Gijima KZN is a potential partner present in all the districts in KZN. The Gijima KZN Local Economic Development Support Programme has been specifically designed to support projects that could assist disadvantaged people to improve their lives through economic activity. It provides access to an ambitious European Union fund that has been specifically set up for this purpose. Part of the goal is also to create a better environment for economic growth; this means developing the capacity and skills base of local municipalities so that a climate is created for local economic development. Their objectives are promoting pro-poor local economic development and building the capacity of local government in managing local economic development.

⁴⁵ Sinani Project. Online: www.survivors.org.za

⁴⁶ Local Economic Development KwaZulu-Natal. Online: www.gijimakzn.org.za/

c) Churches

Churches are reliable potential partners with continuity and sustainability as demonstrated by some Arks. The infrastructure is readily available and the church is there to serve the needy. The area is characterised by informal settlements and high unemployment, especially in Emalandeni and a large number of children are vulnerable. A large percentage of the children hardly attend school due to poor guidance by parents or guardians or out of necessity to care for their relatives. In October 2003, Reverend Ngubane invited Noah to establish a **children's** care programme for the OVC in the A and V sections of Umlazi. Our partner, Nkonkoni offered a classroom and an outbuilding to be used for a kitchen, office, day care and after care programmes. Emalandeni kaNoah Ark was officially established as a feeding satellite in October 2006. The Ark offers day care, aftercare and feeding scheme programmes.

The Ark was established with Noah in partnership with Eagle Christian Fellowship International. The church has been conducting various social development projects with neighbouring Lamontville District and underprivileged OVC attending Excelsior Primary School. There is growing momentum for churches to become involved in the fight against HIV/AIDS. Essentially they have no choice as increasing numbers of congregants or their loved ones die and nowadays, according to one pastor, "you see more people at the cemeteries than at the soccer stadiums." Debbie Mathew, Director of AIDS Foundation of **South Africa; "I think the churches are becoming more comfortable because it is such a common thing now. You also find now they have to bury so many people who've died of AIDS in their own congregations.⁴⁷"**

The South African Council of Churches⁴⁸ has pledged to work diligently to stop the spread of HIV. Faith-based organisations are also starting to meet regularly through UKZN's **HIV/AIDS** Network to discuss how they are going to address HIV/AIDS.

"When you compare our faith-based efforts with those of other African countries that have been more vocal and taken a more proactive approach, I think you can say we've been slow to catch on with faith-based groups and prevention," says Professor Suzanne Leclerc-Madlala, an anthropologist at UKZN⁴⁹.

⁴⁷ Quote by Debbie Mathew. Extracted from article Religion and HIV by Abbi Van Sickle. 2003. Centre for the Study of AIDS. Online: <http://www.csa.za.org/article/articleview/188/1/1/>

⁴⁸ South African Council of Churches. Online: <http://www.sacc.org.za/programmes.html>

⁴⁹ Quote by Professor Suzanne Leclerc-Madlala. Extracted from article Religion and HIV by Abbi Van Sickle. 2003. Centre for the Study of AIDS. Online: <http://www.csa.za.org/article/articleview/188/1/1/>

“There is a real misunderstanding with the idea of the ABC [abstain, be faithful, condomise] message,” she said. “It seems to be seen as an ‘either or’ campaign – either you promote condoms or abstinence as the answer. That approach derails us right away. That simply limits our options. We can use both⁵⁰.”

Although not all faith organisations are combining those prevention options, several organisations in KZN are working to combat the spread of HIV, including evangelical churches, the Shembe Church and the Catholic Church.

d) KwaZulu-Natal Empowerment for Food Security Programme⁵¹

The KZN Empowerment for Food Security Programme is a joint collaboration between the KZN Provincial Department of Agriculture and the Government of Flanders. The objective is to improve the livelihoods of poor households by creating sustainable access to nutritious food for all household members. This programme aims to train communities to produce their own food. Diverse food security projects that address the needs of the community will be implemented by a team of dedicated professionals. The priorities of this programme are to; improve the nutritional quality of food consumed through better cooking practices and educated choices; increase household income as a means of increasing access to food; encourage dietary diversity; encourage equal distribution of food within the household; improve agricultural production and storage; invest in infrastructure such as irrigation; water harvesters and fencing to facilitate sustainable livelihoods and local ownership; develop audio-visual training material for beneficiaries to facilitate learning on basic tenets of food security; food security projects to be implemented; to facilitate participatory monitoring and evaluation by beneficiaries; increase market opportunities; and create political and institutional awareness on food security.

The programme is implemented across four districts in eight municipalities; these districts are Zululand, Ugu, Umkhanyakude and Umgungundlovu. The target groups are poor population groups in rural areas. This programme especially aims to target women; single unemployed mothers; lactating women; grandmothers providing care for grandchildren or foster children; child headed-households; and unemployed youth and people living with HIV/AIDS. Schools with a large proportion of vulnerable children will be targeted as a means to establishing food gardens as interventions to malnutrition.

⁵⁰ Ibid.

⁵¹ KwaZulu-Natal Empowerment for Food Security Programme. Online: <http://agriculture.kzntl.gov.za/portal/Services/InvestmentsPartnershipsInterGovCooperation/KZNEmpowermentforFoodSecurityProgramme/tabid/426/Default.aspx>

e) Project Preparation Trust of KwaZulu-Natal⁵²

Project Preparation Trust (PPT) is an independent public interest organisation that specialises in the preparation of projects for historically disadvantaged communities and special needs groups. PPT is a not for profit organisation and was registered with the Master of High Court in 1993, the year before the election of South Africa's first democratic government. PPT's primary beneficiaries or clients are historically disadvantaged communities, and especially those who are the poorest of the poor and those in special need such as people infected or affected by HIV/AIDS, vulnerable children and people residing in highly marginalised rural or informal settlements.

PPT's vision is a society in which all citizens have equitable access to basic services and economic opportunities. The mission of PPT is to enable sustainable socioeconomic and built environment development for the benefit of disadvantaged communities. This is achieved mainly through providing project preparation and related services to disadvantaged communities, their local governments, government departments and other development stakeholders; obtaining funding for project preparation; unlocking capital and other resources for project implementation; transferring skills to government and other stakeholders; and promoting best practice including holistic and sustainable development.

PPT's core function is preparing projects and mobilising capital and other resources for disadvantaged communities. In many instances the projects with which PPT is involved are innovative pilots, which test improved development solutions and approaches. PPT takes a holistic and integrated approach ensuring the involvement of a range of complementary government departments, funders and support agents. Funding for preparing projects is sourced mainly from municipalities, government departments or donors. PPT's main focuses are housing; special needs housing and HIV/AIDS relief; economic development and poverty alleviation; integrated development; and skills transfer and capacity building.

f) Amangwe Village⁵³

The village was launched in December 2003 as the result of the combined efforts of local industry working through their development agency and the Zululand Chamber of Business Foundation.

⁵² Project Preparation Trust of KwaZulu-Natal. Online: www.pptrust.co.za/

⁵³ Amangwe Village. Online: <http://www.amangwe.org.za/>

So great is the impact of HIV/AIDS in northern KZN, that the major local industries - Mondi Kraft, BHP Billiton, Richards Bay Minerals, Richards Bay Coal Terminal - have combined efforts to address the crisis. "We come from a region where HIV infection is estimated to be 38% [for adults]," explains Mqaise. "Although our work force's prevalence is far below that, we are part of the community. We cannot be complacent. We need to be proactive."

The food garden supplies Ethembeni **Hospital's** kitchen with vegetables and herbal remedies. The gardeners also teach patients' families how to grow their own food and supply them with the seeds to do so. The second focus of the village is to assist orphans and vulnerable children. Three social workers are based at the village; their role is to keep track of orphans, abused children and those caring for dying parents.

Social worker Lungi Blose says that they are monitoring 148 kids and also help families to apply for various grants. A day care centre is being set up to care for younger children in child-headed households to enable their older siblings to go to school. Six cottages are likely to be used for foster care and places of safety for children who have no other place to go, although the village does not want to establish an orphanage.

The third focus area is on community outreach, education and training. This involves home-based care; income generation; peer educator training (local people who are trained to educate others about HIV/AIDS); and teacher training.

People are trained on-site in a range of skills including gardening and catering. Richards Bay Minerals sponsored a rural food store that sells produce from the gardens to the locals. "AIDS is more than a health issue. It is a social issue. If we are to address AIDS, we need to address poverty," says Stander.

g) The Outreach Social Care Project⁵⁴

The Outreach Social Care Project (OSCAR) has been operating in and around Pietermaritzburg in KZN since 2007. OSCAR principally works with OVC and child-headed households, providing assistance in gaining access to education, legal assistance, social grants and other services alongside psychological support and peer education.

OSCAR has a team of 30 care givers and 20 community volunteers who have received training in opportunistic infection control, nutrition, first aid, home based care and counselling. The community volunteers facilitate the HIV prevention work alongside providing home based care and counselling support.

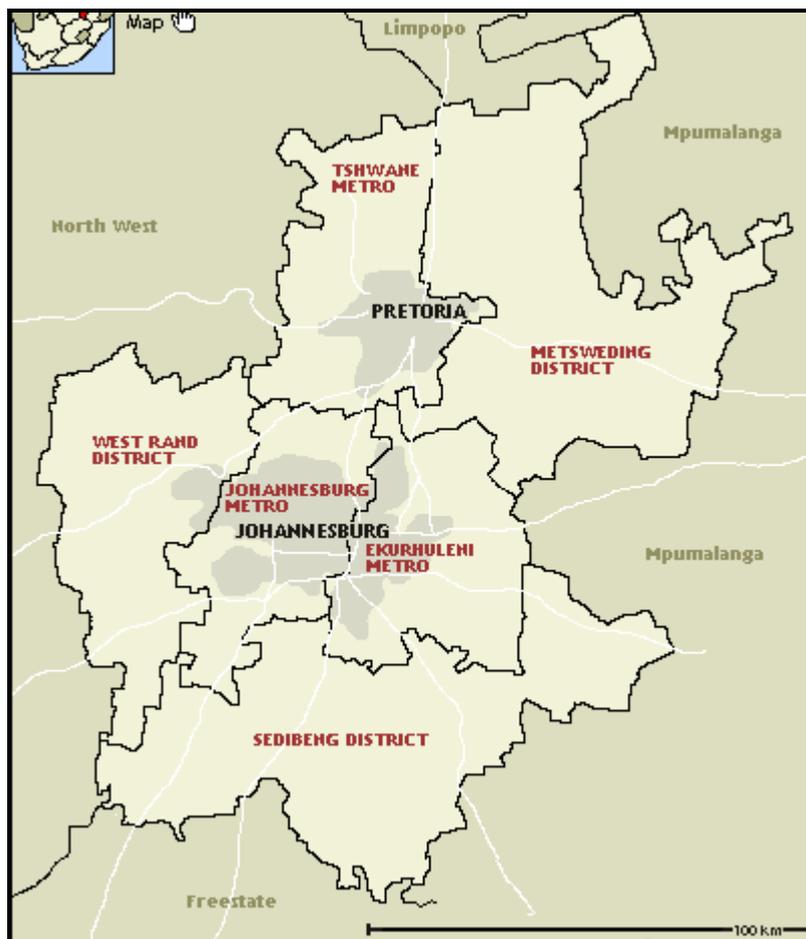
⁵⁴ The Outreach Social Care Project. Online: <http://www.backabuddy.co.za/charity/profile/outreachsocialcareproject>

OSCAR also works with teachers in the Pietermaritzburg area, giving training on HIV and AIDS; how to work with OVC and; increasing sensitivity towards the issues faced by OVC.

Gauteng Districts

Gauteng has six districts: City of Johannesburg, Sedibeng, Ekurhuleni, Tshwane, Metsweding and West Rand. The map of Gauteng shows the location of all six districts. Noah operates in 29 Arks in Gauteng.

Map of Gauteng Districts⁵⁵



⁵⁵ http://www.toursa.com/travel_south_africa/southafrica_gauteng_accommodation_info.aspx

1. City of Johannesburg

Background

Johannesburg is South Africa's largest city.

Population⁵⁶

Johannesburg has a population of 3.3 million people, half of which lives in Soweto and adjacent suburbs. The majority of the population is formed by South Africa's black residents who mostly live in Soweto, while white residents amount to 500 000.

Income and/or unemployment levels⁵⁷

The average annual income of households in Gauteng amounted to R131 563 in 2006. However there are wide disparities among the different racial groups, education levels and dwelling types. A typical African household in a semi-formal settlements earns less than R50 000 per annum. Despite the having the highest per capita income in the country, there are high unemployment rates in the district.

Healthcare

Health services consist of two district hospitals, two central hospitals, three regional hospitals, 111 clinics, nine community health centres and 14 mobile units.

HIV

According to the 2008 estimates the HIV prevalence in this district stands at 29.9%⁵⁸.

Projects of interest in the District

An organisation called **Children's Association for Care and Response (CAF CAR)**⁵⁹ provides services ranging from health care and early childhood development to HIV/AIDS programmes to children⁶⁰. **An African way of caring with a focus on the child and society, using the "Motho ke motho ka banang"** principle (a person is a person through other persons or it takes a village to raise a child) is applied in all the activities.

⁵⁶ City of Johannesburg. Online: www.joburg.org.za

⁵⁷ New Bureau for Market Research Report on Gauteng income and expenditure patterns. Online: <http://www.bizcommunity.com/Article/196/19/27276.html>

⁵⁸ National Antenatal Sentinel HIV & Syphilis Prevalence Survey, 2008.

⁵⁹ Children's Association for Care and Response <http://www.cafcar.org.za/>

⁶⁰ <http://www.cafcar.org.za/>

Noah in the District

District Name	Name of Ark	Total OVC served
Orange Farm	Located in a Resource Centre	155
Kliptown	Located at a Resource Centre	288
Freedom Park	Located at a Resource Centre	88
Meadowlands	Mathafeni Primary School	176
Olievenhoutbosch	Located at a Resource Centre	76
Malvern 1	Located in a church	115
Moletsane	Ntokozweni Community Centre	116
Mzimhlophe	Located at a Resource Centre	138
Protea Glen	Located in a church	259

- Total number of Arks = 13
- Total number of OVC = 1 411
- Schools providing feeding schemes = all primary schools and some high schools.

2. Ekurhuleni

Background⁶¹

Ekurhuleni, a Tsonga word, means "a place of peace" is in the eastern part of Gauteng. Ekurhuleni (also known as the East Rand) produces 23% of the gross geographic product of Gauteng.

Population

The district has a population of 2 622 298⁶².

Income and/or unemployment levels⁶³

Household income and per capita income exceed the national average by 10% and 33% respectively. The percentage of people living in poverty nationally is 44.4%, compared to 24.2% in Ekurhuleni. Unemployment rates are similar to the national average (34.3% vs. 37%), but higher than that of the Gauteng province on average (30%), while the percentage of people in poverty (24.2%) is lower than the national average of 44.4%, but similar to Gauteng's average (22.9%).

⁶¹ City of Ekurhuleni <http://www.ekurhuleni.gov.za/about-ekurhuleni>

⁶² Health Systems Trust. The District Health barometer 2008/09. Online: <http://www.healthlink.org.za/publications/864>

⁶³ Draft 2009-2013 Ekurhuleni Metropolitan Municipality Integrated Development Plan. Online: <http://mfma.treasury.gov.za/.../GT000%20Ekurhuleni%20%20-%20IDP%20-%202009-10.pdf>

Healthcare in Ekurhuleni⁶⁴

Health services consist of one district hospital, five regional hospitals, 83 clinics, eight community health centres and seven mobile units⁶⁵. Health care services are provided by the numerous hospitals and clinics distributed throughout Ekurhuleni. However, not all facilities provide a full range of services and some facilities in densely populated areas experience severe capacity problems. The Ekurhuleni Metropolitan Municipality Development Plan states that initiatives for example, the establishment of Multi-Purpose Service Delivery Centres, are in place to provide adequate facilities and services in marginalised areas.

HIV

HIV prevalence in this district stood at 31.5% in 2008 slightly lower than the 2007 prevalence rate of 33.3%. However, it remains higher than the provincial rate of 29.9%⁶⁶.

Projects of interest in the District

Among other programmes in Ekurhuleni which deal with HIV activities and OVC programme is the Nelson Mandela Foundation⁶⁷.

Noah in the District

Ark Name	Location of Ark	Total OVC
Actonville	Located in containers in the community	297
Katlehong	Vumbeni Primary School	130
Vosloorus	Located at a Community Centre	276
Daveyton	Located at a Community Centre	291
Kingsway	Located at a Community Centre	169
Bapsfontein	Bapsfontein Primary School	133
Mayfield	Located at a Community Centre	199
Putfontein	Located at a Resource Centre	122
Wattville	Located at a Resource Centre	173
Zenzele	Isiphethu Primary School	45
Ivory Park 1	Located at a Resource Centre	306
Ivory Park 2	Located at a Resource Centre	111

- Total number of Arks = 12
- Total number of OVC = 2 252

⁶⁴ City of Ekurhuleni <http://www.ekurhuleni.gov.za/about-ekurhuleni>

⁶⁵ Ibid.

⁶⁶ National Antenatal Sentinel HIV & Syphilis Prevalence Survey, 2008.

⁶⁷ <http://www.nelsonmandela.org/index.php/foundation/mandela-day/2010/messages/>

- Schools providing feeding schemes = all primary schools

Successes

The Arks have assisted children in getting social grants.

Challenges

There are a number of challenges prevalent such as HIV/AIDS related illnesses; and some problems with access to electricity, water and sanitation.

3. Metsweding

Background⁶⁸

Metsweding is far north eastern region of Gauteng. Metsweding District has urban and peri-urban localities but it is largely rural. The competitive advantage of Metsweding is its proximity to large consumer markets of Gauteng but with lower costs than the rest of the province.

Population

This district has a population of 217 443⁶⁹.

Income and/or unemployment levels⁷⁰

The region has a labour force of 33.3%, although there is a proportion of 71.6% economically active individuals. The largest share (76.6%) of the employed population in Metsweding earns less than R3 200 per month. It is evident that the majority of the population in Metsweding is very poor and is experiencing relatively low living standards and a poor quality of life. These low income levels indicate that the majority of the population is dependent on a small income implying that the local population of Metsweding is less able to afford basic services such as water, sanitation and so on compared to the rest of Gauteng. About 16.73% of the labour force is unemployed.

Income brackets for Metsweding, 2001⁷¹

Income Bracket	Percentage
----------------	------------

⁶⁸ Preview on Metsweding Municipal Imbizo (08/12/2005) <http://www.polity.org.za/article/africa-preview-on-metsweding-municipal-imbizo-08122005-2005-12-08>

⁶⁹ Health Systems Trust. The District Health Barometer 2008/09. Online: <http://www.healthlink.org.za/publications/864>

⁷⁰ Metsweding District Municipality Integrated Development Plan, 2009-2010

⁷¹ Ibid.

Income Bracket	Percentage
R1-R400	13.8%
R401 - R800	26.6%
R801 - R1 600	22.6%
R1 601 - R3 200	13.6%
R3 201 - R6 400	10.5%
R6 401 - R12 800	6.8%
R12 801 - R25 600	3.6%
R25 601 - R51 200	1.3%

Healthcare

Health services consist of one district hospital, five regional hospitals, 83 clinics, eight community health centres and seven mobile units. The district has seen an exponential increase of HIV reported cases from 1996 at 3%; to 7% in 1997; 9% in 2000; 11% in 2002; and 12 in 2004⁷². Although no recent statistics are available for the district, national trends indicate that these trends have stabilised over some time. Health services consist of 10 clinics, 1 specialised hospital and 3 mobile units. There are no District and regional hospitals in this district⁷³.

HIV

HIV prevalence in this district stood at 25.1% in 2008. This was a considerable drop from a prevalence rate of 32.8% in 2007 and is now lower than the provincial rate⁷⁴.

Noah in the District

There are no Arks in this district.

4. Sedibeng

Background

Sedibeng comprises the southern part of Gauteng and straddles the banks of the Vaal River at the border between Gauteng and the Free State.

Population

⁷² Ibid.

⁷³ Gauteng Department of Health, Metsweding District.

⁷⁴ National Antenatal Sentinel HIV & Syphilis Prevalence Survey, 2008.

The district has a population of 929 105⁷⁵.

Income and/or unemployment levels⁷⁶

Sedibeng has the highest unemployment levels in Gauteng. Just over 87% of households in the district have an income of less than R76 800 per annum or R6 400 per month compared to an average of 79.5% in the whole of Gauteng. About 22.9% of households in the district have no income at all compared to 19.4% in the province.

Healthcare in Sedibeng

Health services consist of 2 District hospitals, one regional hospital, 34 clinics, 5 community health centres and 12 mobile units⁷⁷.

HIV

According to the 2008 Sero-Prevalence Survey, the HIV prevalence in this district stood at 31.8%, a slight decrease from the 2007 prevalence rate of 32.8%⁷⁸.

Noah in the District

There are no Arks in this district.

5. City of Tshwane

Background⁷⁹

Tshwane is the metro area that includes Pretoria, Centurion and other nearby areas. The City of Tshwane is the second largest municipality in Gauteng and is among the six biggest metropolitan municipalities in South Africa. Pretoria, as one components of Tshwane, is the administrative capital of South Africa and houses the Union Buildings.

Population

The district has a population of 2 181 690⁸⁰.

⁷⁵ Health Systems Trust. The District Health Barometer 2008/09. Online:

<http://www.healthlink.org.za/publications/864>

⁷⁶ Social Study for the Environmental Management Framework for the Sedibeng District Municipality. Online:

www.socialassessment.co.za/environmental_m_plan_sedibeng.pdf

⁷⁷ Gauteng Department of Health, Metsweding District.

⁷⁸ National Antenatal Sentinel HIV & Syphilis Prevalence Survey, 2008.

⁷⁹ City of Tshwane - <http://www.tshwane.gov.za/AboutTshwane/Pages/default.aspx>

⁸⁰ Ibid.

Income and/or unemployment levels⁸¹

Even though Tshwane ranks highly in terms of human development, the majority of households still fall within the lower income groups. About 15% of households have no income and the unemployment rate is 31.9% of which 53% of the unemployed fall within the 20-24 year old age group.

Healthcare

Health services consist of five district hospitals, two regional hospitals, two central hospitals, 59 clinics, six community health centres and six mobile units⁸².

HIV

HIV prevalence according to the 2008 Sero-Prevalence Survey stood at 26.1% a slight drop from 26.7% in 2007.

Projects of interest in the District

There are a lot of activities and programmes run by different non-profit and community based organisations in the district. The list of all NGOs and their activities can be found at <http://www.sscn-sa.ning.com/page/description-of-member>

Noah in the District

Ark Name	Location of the Ark	Number of OVC
Mathibestad	Located at a Resource Centre	
Ga-Rankuwa	Located at a Resource Centre	286
Soshanguve	Sinqobile Primary School	126

- Total number of Arks = 3
- Total number of OVC = 394
- Schools providing feeding schemes = all primary schools

⁸¹ Dr Ntsikane Maine, City of Tshwane in the Quest to Eradicate Hunger. 15 July 2009. Online: <http://www.slideshare.net/motladidiale/tshwane-hunger-summit-co-t-agric>

⁸² Ibid.

6. West Rand

Background⁸³

The West Rand is in the western part of Gauteng province. West Rand District Municipality comprises four municipalities, Mogale City, Randfontein, Westonaria and Merafong City. It also includes the District Management Area, a unique area with special needs and the home of the Cradle of Humankind - a World Heritage Site.

Population

The district has a population of 817 249⁸⁴.

Income and/or unemployment levels

There is an 18% unemployment rate in the West Rand.

Healthcare

Health services consist of one district hospital, one regional hospital, 29 clinics, two community health centres and eight mobile units⁸⁵.

HIV

HIV prevalence in 2008 was 27.8% a considerable improvement from 32.4% in 2007⁸⁶.

Projects of interest in the District

The municipality has trained over 183 894 people in the district who were reached by the 441 volunteers trained on HIV, STIs and TB. Nearly 45 000 of the trained population were in the 15-40 years age range.

Noah in the District

Ark Name	Ark Location	Total OVC
Brandvlei	Rodora Primary	207
Swaneville	Located at a community resource centre	225
Muldersdrift	Reamogetswe - located in a home	55
	Phomelelo-Lesego Primary School	57

⁸³ West Rand District Municipality <http://www.saeconomy.co.za/westranddi.htm>

⁸⁴ Health Systems Trust. The district health barometer 2008/09. Online: <http://www.healthlink.org.za/publications/864>

⁸⁵ Ibid.

⁸⁶ National Antenatal Sentinel HIV & Syphilis Prevalence Survey, 2008.

- Total number of Arks = 4
- Total number of OVC = 544
- Schools providing feeding schemes = all primary schools

Nutrition profile of Gauteng⁸⁷

According to the 1999 National Food Consumption Survey, children in Gauteng have one of the lowest carbohydrate intakes in South Africa. Micronutrient intakes particularly of vitamins A, C, E and folate among children aged nine years and below in the province are also low. About 40% of households in Gauteng report to be food insecure. 20% of children are stunted, 9% are underweight and about 1% experience wasting in Gauteng. Stunting reflects on the socioeconomic conditions in an area and from the Gauteng data, it is evident that poverty is rife hence household food insecurity. At the same time, the burden of HIV in South Africa's economic hub has also resulted in malnutrition remaining at high rates among children.

Summary of HIV Prevalence in Gauteng⁸⁸

City of Johannesburg: According to the 2008 estimates the HIV prevalence in this district stood at 29.9% exactly the same as the Provincial Prevalence rate

Ekurhuleni: HIV prevalence in this district stood at 31.5% in 2008 slightly lower than the 2007 prevalence rate of 33.3%. It remains higher than the provincial rate of 29.9%.

Metsweding: HIV prevalence in this district stood at 25.1% in 2008. This was a considerable drop from a prevalence rate of 32.8% in 2007. It is now lower than the provincial rate.

Sedibeng: According to the 2008 Sero-Prevalence Survey the HIV prevalence in this district stood at 31.8% a slight decrease from the 2007 prevalence rate of 32.8%.

Tshwane: HIV prevalence according to the 2008 Sero-Prevalence Survey, stood at 26.1% a slight drop from 26.7% in 2007.

West Rand: HIV prevalence in 2008 was 27.8% a considerable improvement from 32.4% in 2007.

⁸⁷ National Food Consumption Survey, 1999.

⁸⁸ National Antenatal Sentinel HIV and Syphilis Prevalence Survey, 2008.

Projects in Gauteng

a) Cotlands⁸⁹

Cotlands, with its headquarters in Johannesburg, offers shelter for abused, abandoned, HIV-positive, orphaned and terminally ill children from birth to twelve years of age. The service areas in Gauteng are Johannesburg South and Soweto. It also offers community based services to vulnerable children. **Cotland's** activities always reflect the changing needs of society.

Partnerships include with other NGOs, local government and the private sector, Cotlands provides a range of services that will ensure provision of food security, reverse the spread of HIV/AIDS, create jobs and foster self-sustainability. To achieve this, Cotlands includes food garden initiatives, income generating projects and educational components in all its outreach activities. Among Cotlands outreach programmes in Gauteng are home based care, Chris Hani Baragwanath Counselling Project, orphan care, early childhood development centre, food gardens, support groups and income generation.

b) Thokomala Project⁹⁰

Thokomela Project operates in Gauteng and works primarily with children infected and affected by HIV. The Project has a mentorship programme which includes aiding and guiding OVC with school projects; career guidance and overall development.

c) Anova's Tirisanong Project⁹¹

Tirisanong, **which means "working together"**, works with the Gauteng Department of Health in hospitals and primary care clinics in and around Soweto. The project supports the implementation of the Prevention of Mother to Child Transmission (PMTCT) as well as the Comprehensive HIV/AIDS Care, Management and Treatment (CCMT) programmes. The Tirisanong team supports Chiawelo Clinic in Soweto with paediatric HIV/AIDS management and enrolling children on ARVs. The Tirisanong doctor works closely with the primary healthcare nurse who he mentors in the management of children.

d) Diocesan HIV/AIDS Programme⁹²

Home-based care projects initiated by Anglicans in the Diocese, comprising Anglicans and members of other church denominations and faiths and involved in the care of members of

⁸⁹ Cotlands. Online: www.cotlands.co.za

⁹⁰ Thokomala Project. Online: <http://www.dow.com/webapps/lit/litorder.asp?filepath=ap/pdfs/noreg/838-00501.pdf&pdf=true>

⁹¹ Anova Health Institute <http://www.anovahealth.co.za/projects/entry/tirisanong/>

⁹² Diocesan HIV/AIDS Program. Online: http://www.diocesehighveld.org.za/homebasedcare_eastrand_gauteng.html

the community are Tshepo-Hope Care and Tsakane Zakheni Home-based Care in Tembisa West. Parishes are linked to the various projects and this ensures a steady stream of resources into the projects.

Funding received from various donors benefits volunteers in the home-based care and counselling services as they are able to receive stipends and other incentives. The Hardship Fund was established to provide assistance to people in dire need. It enables projects to supply E-pap (an immune-boosting porridge) and other nutritional foods to adults and children either for nothing or at a very nominal cost. E-pap is taken not only by the very poor to enable them to take their TB and other medication with the added advantage of strengthening them and enhancing their quality of life, it is also taken by a number of caregivers who are themselves HIV positive. The Fund assists very poor people to bury their loved ones. It also assists with patient transport to hospitals and clinics, food parcels when required. The Children's Education Fund helps orphans and vulnerable children to be transported to schools. It pays for school uniforms when needed, school stationery, books and school educational trips etc.

e) The Amazing Grace **Children's Centre**⁹³

The Amazing Grace Children's Centre, just South of Johannesburg, provides access to education, health care, safe living conditions and a healthy diet daily to children from two main centres and those orphans of HIV/AIDS victims living with extended families in their home environment. Amazing Grace dedicates projects to enhancing community-based responses to the needs of OVC and their households. The projects at the centre are available to families, children living without parent/guardian, children with HIV, children being abused sexually, physically or emotionally, and/or street-children. Services are divided into three main categories:

Place of Safety - short-term housing, food, clothing, health care, education and psychosocial support for street children and/or children in abusive environments.
Family Preservation - the project is designed to enhance the capacity of families and communities to care (or continue to care) for children through training, reintegration and life skills.

Orphanage - supplies long-term housing, food, clothing, health care, education and psychosocial support for children with no parents/guardians and when all other options for extended family or community support have been exhausted.

⁹³ The Amazing Grace Children's Centre. Online: <http://www.agch.org.za/>

f) **The Thusanani Children's Foundation**⁹⁴

The Thusanani Children's Foundation is a small charity which works at grassroots level in South Africa with a focus on underprivileged children in children's homes, crèches and informal settlements in Gauteng. The Foundation aims to help babies and young children who have been orphaned through HIV/AIDS, abandonment or abusive home environments. The Foundation promotes the normal development of children under six years of age through providing occupational therapy. Some of the activities include care worker training; play therapy; adoption assessments; and outings for underprivileged children.

g) **Naledi Projects**⁹⁵

Naledi Projects focuses on ensuring access to the basic needs for survival to vulnerable children. Therefore, the primary concerns for these children are health provisions; healthy nutrition and education. The organisation works closely with local partners in Gauteng to collaborate in the development cooperation field, especially for children in townships around Johannesburg, who are mostly AIDS-orphans being taken care of by their grandmothers or living on their own.

h) **Refilwe Community Project**⁹⁶

Refilwe is a Christian-based organisation committed to excellence in its stewardship and accountability of all human, financial and physical resources. The vision of the project is to assist and guide the poor and needy who come into its sphere of influence to be empowered to achieve sustainability in the spiritual, mental, physical and material aspects of their lives.

⁹⁴ **The Thusanani Children's Foundation.** Online: <http://www.thusanani.org.za/>

⁹⁵ Naledi Projects. Online: <http://www.naledi-projects.org>

⁹⁶ Refilwe Community Project. Online: <http://www.refilwe.org/>