

Has HIV and AIDS gone off the radar?

Siyakhana project manager Dr Simeon Odugwu contemplates this question.



To a degree we at Siyakhana believe the answer to the above question is a reluctant and qualified yes. Our efforts to recruit new businesses has not been as smooth as they were in the past and we ascribe this to a deteriorating level of attention to HIV and AIDS, possibly as a result of more publicised health concerns like swine flu and concerns for survival as a result of the recession.

The lack of a medical breakthrough and the relative status quo in the infection rate, has in our society of

quick fixes, resulted in people shifting their attention elsewhere.

We consider this unfortunate because one new infection is one too many and we call for ongoing vigour and commitment to turning the tide of new infections.

The extent to which we believe we can qualify our yes response, is that we at Siyakhana are pleased to note the improved political will and action from our national government to address HIV and AIDS which we reflect on in this edition. ♥

Stick to the meds

Siyakhana's Treatment Adherence Supporter Thandi Bam outlines her role.



Thandi knows from experience what ARV treatment and its necessary compliance can achieve in people's lives. "I like to talk about my own life because I am living proof that treatment adherence can make it possible to have goals and objectives to work towards."

In 2003, Thandi was bedridden with a CD4 count of 56, now she rises each day to do the work she loves, which is to train Siyakhana clients in living with HIV and to support those who are on ARVs to comply with their ongoing treatment.

Thandi's experience cuts deeply to the reality that AIDS is deadly. The loss of her 12 year old daughter this year in February to AIDS related meningitis stays in the room as she goes on to share how she encourages people to talk about their HIV status to

their partners and children, especially if their children are HIV positive and on treatment.

A former teacher Thandi says self-stigmatisation and fear of disclosure are the most common reasons that people don't comply with treatment. "Even though they know that treatment is a lifelong commitment, if they have not disclosed their status and are fearful that their ongoing treatment maybe detected and they fear the consequences, treatment default can occur."

It is here that Thandi steps in and when the GP network that Siyakhana clients access notify her of patients who have defaulted with their treatment, she seeks contact which may include a home visit to hear their challenges and to emphasise the importance of not having a break in treatment.

Thandi's openness about her own HIV status and her dreams about her future and seeing her 16 year old son grow up, undoubtedly assist her clients know that it is possible to control HIV and AIDS through treatment compliance, rather than hand over control to it. ♥



Over the 10 000 mark

Siyakhana project manager Dr Simeon Odugwu gives a snapshot of stats.

Since Siyakhana began offering companies in Buffalo City a comprehensive HIV and AIDS prevention, testing and treatment service in 2006, it has held 60 successful VCT campaigns and has counselled over 10 000 employees.

Of those well over 7000 have taken an HIV test and 750 have tested positive. Those who test positive are offered access to a general practitioner network for ongoing treatment. They also receive patient training from Siyakhana to learn about the HI virus and the implications of living positively, as well as the importance of having their blood tested periodically so that they begin treatment for HIV when indicated.

The prevalence landscape within companies we work with remains between 11 - 12%, although we have encountered some companies which do have a higher prevalence rate and in one case as high as 33%. This means then that in some companies there are very low prevalence rates which get us back to the mean of 11 - 12%.

In companies, management responses to HIV set the tone for the company wide response and we value the partnership with management towards fewer new infections. ♥

Siyakhana brings London to East London

Nursing at home best choice for Nancy Nojaholo.



When spirited Nancy retired from nursing in 2004, she had all the ambition to nurse abroad for 'those little extras' but is eternally grateful that rather her sights shifted from London to East London.

"Those greener pastures we were running abroad for are actually next to our home, next to our family. We don't need to go anywhere. It is all here," she says of her role as a Siyakhana nurse at NU1 clinic in Mdantsane.

"Since I started working here in 2007, we have seen the testing rate rise steadily. We now top 300 people per month. We are doing wonders now. There is enormous need for our skills and we don't need to take our services away from home." ♥

Nationally speaking

Siyakhana project manager Dr Simeon Odugwu reflects on national government's stance on HIV and AIDS.

It is heartening to note that over the past few months national government's response has been consistent with respected scientific thinking on HIV and AIDS which suggests improved political will to tackle it.

The national World AIDS Day theme of: "I am responsible, we are responsible, South Africa is responsible" bodes well for improved treatment delivery. In November national Health Minister, Aaron Motsoaledi reiterated that government aimed to have 80% of HIV positive people on treatment by 2011. Minister Motsaledi indicated that South Africa carries 13% of the global HIV burden, which is 23 times the global average. This is indeed a cause for

great concern, as is the reality that between 1997 and 2005, TB deaths increased by 334%. TB is the main cause of death of people with HIV.

We are pleased that through our Capacity Building project where we support government clinics by deploying nurses and counsellors there and that seven clinics in Buffalo City are able to provide a dedicated HIV and AIDS counselling and testing service. This has had a positive impact on testing and treatment take up.

It remains incumbent on us all to heed to call of: "I am responsible, we are responsible, South Africa is responsible." ♥