

Media alert: Ritshidze data reveal improved services for people living with HIV in KwaZulu-Natal clinics but key populations are being left behind

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10am onwards

Sign up for live stream: <https://bit.ly/RitshidzeKwaZuluNatal2022>

On 10 November 2022 Ritshidze will launch a detailed report into the state of the public healthcare system in KwaZulu-Natal that **reveals improvements in several areas including reduced waiting times, better staff attitudes, and longer ARV refills.** However, for LGBTQIA+ communities, people who use drugs, and sex workers, on the whole KwaZulu-Natal provided the least friendly and worst services across all provinces monitored.

The report will be presented to the KwaZulu-Natal Department of Health and other duty bearers at a community meeting in Umlazi, Durban. The report is based on the results of data collected through **Ritshidze's community-led monitoring** of 131 facilities in the province together with additional data collected through interviews with key populations in the community.

This is the second edition of the KwaZulu-Natal State of Health report; the **first was published in November 2021.** Data in this report were collected between July and August 2022. Like last year's edition, the 2022 report identifies challenges that discourage people from going to the clinic for HIV, TB and other health services.

Key issues found include:

- + **Waiting times have improved:** Positively, waiting times have improved in the province, down from 3:20 hours to 2:39 hours waiting after the facility opens. 30 facilities had average waiting times under 2 hours. **KZN continues to have the shortest waiting times reported out of all provinces monitored by Ritshidze.** Yet 48% of public healthcare users interviewed still think that waiting times are long, with 38% blaming staff shortages for the long hours waiting.
- + **No improvement in staffing levels:** 81% of facilities still reported shortages (same as last year) and 449 vacancies are still open (up from 400 last year). There is still a huge way to go to fill the human resource gap across sites in the province.
- + **Messy filing rooms increase waiting times in a quarter of clinics:** This year only 76% of facilities were observed to have a properly functioning filing room, down from 81% last year. 12 facilities improved in the year, while 19 facilities got worse. Difficulties finding files and lost files were another reason given by 18% of people for the long delays at the clinic.
- + **More PLHIV getting 3 month supply of ARVs:** Extending ARV refills can ease the burden on overstretched facilities and support people living with HIV to stay on treatment. Positively, this year many more people living with HIV reported 3-6 month refills, up from 31% to 49%. However this compares to 59% in Mpumalanga (the best performing province) and remains very low in comparison to other PEPFAR supported countries where 80% of people living with HIV received 3-6 month ART refills in 2021.

- + **Many staff provide a friendly, welcoming, and confidential service for people living with HIV and other public healthcare users:** Positively 82% of people thought that the staff were always friendly and professional, up from 75% last year — and 95% of PLHIV feel that facilities keep their HIV status private and confidential. **KwaZulu-Natal is performing best out of all provinces monitored by Ritshidze on these indicators.** However, there is still further to go to ensure everyone is treated with dignity, respect, and compassion at all times — especially for key populations.
- + **KZN provided the worst services for key populations across all provinces monitored.** Alarming only 28% of respondents reported that facility staff are always friendly and professional towards gay, bisexual, and other men who have sex with men (GBMSM), 19% towards people who use drugs; 16% towards sex workers; and 34% towards trans* people. Many key populations interviewed did not feel comfortable at facilities or safe and protected from abuse and harassment — and huge numbers complained of privacy violations. Shockingly, many people reported being refused access to services because of being a key population — including 8% of GBMSM, 25% of people who use drugs, 13% of sex workers, and 13% of trans* people in the province.
- + **Key populations struggle to get any specific services:** Lubricants were only available in 26% of sites. While notably PrEP was reported as available at all 131 facilities monitored, the facilities reporting offering PrEP to key populations was far lower and only 41% of GBMSM, 14% of people who use drugs, 31% of sex workers, and 59% of trans* people reported being offered PrEP at the facility. 65% of people who use drugs we spoke to wanted access to methadone and 54% of trans* people wanted access to hormones at their facilities.
- + **Limited change in treatment literacy levels since last year:** 89% of people living with HIV understood the benefits of an undetectable viral load on their health (the same as last year) and 82% understood that an undetectable viral load means they cannot transmit HIV (up from 80% last year). To improve this it is important to ensure that healthcare providers explain everyone's viral load test results, yet only 87% of people living with HIV reported their results were explained, down from 89% last year.
- + **Plans needed to mitigate against extreme weather events:** 23% of sites monitored were impacted by flooding in April. The infrastructure of 15 of those sites was damaged, and the contents of the facility was damaged at 10 sites. 5 sites were partially closed for one day or more, and 2 sites were completely closed for one day or more.
- + **Cleanest facilities reported:** On overall clinic cleanliness: 77% of public healthcare users reported that facilities were “very clean” or “clean” — and only 2% of public healthcare users reported that facilities were “very dirty” or “dirty.” **The province performed best both this year and last year on clinic cleanliness.**

These, among other issues, will be presented on Thursday together with the personal experiences of people living with HIV, key populations and other public healthcare users. This year's report will show what progress has been made in the last year and what still needs to improve. **The embargoed State of Health report is available upon request.**

Ritshidze is a programme of the PLHIV Sector made up of the National Association of People Living with HIV (NAPWA), Positive Action Campaign, Positive Women's Network, the South African Network of Religious Leaders Living with HIV (SANERELA+), and the Treatment Action Campaign (TAC).

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