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Treatment Action Campaign World AIDS Day Message

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We welcome the new NSP 2012-2016

Today, 1 December 2011, World AIDS Day, TAC and SECTION27 join the rest of South Africa and the world in welcoming the launch of a new five year National Strategic Plan on HIV, TB and STIs (2012-2016). The plan?s target is that by 2016 80% of people are on ARV treatment, that deaths from TB have been halved, and that new HIV infections are cut by 50%. This plan is unique, because millions of people?s lives depend on its successful implementation. Already there are over a million people on treatment. By the time the plan is complete that number must be three million.
We therefore congratulate the Minister of Health and the South African National AIDS Council (SANAC) on ensuring that the NSP has been completed on time and making a political commitment to its implementation.

The NSP 2012-2016 succeeds the 2007-2011 plan. It is the beginning of a new era in the response to HIV, TB and the social drivers of these epidemics. Since the last five year plan, we have seen a revolution in the response to AIDS. South Africa started the last plan with Manto Tshabalala-Msimang as the Minister of Health and Thabo Mbeki as President. Although the plan was adopted by the government, it was resisted by the Minister. Some of the key interventions it proposed, such as a programme to provide voluntary male medical circumcision (VMMC) on a large scale were delayed; for several years the roll of ARVs was kept as slow as possible. Preventable infections and deaths continued.

Five years later all that has changed. We have almost all the tools and policies to fight HIV and TB. What we need now is accountability for implementation. We have mass programmes on HIV Counselling and Testing (HCT), VMMC, prevention of mother-to-child transmission (PMTCT) and access to HIV and TB drugs. What we need now is to be sure of the quality and sustainability of these interventions.

The NSP 2012 -2016 has been developed through an unprecedented degree of collaboration between civil society and the department of health, under the auspices of SANAC. It is a bold plan. South Africa is showing leadership at a time when many other parts of the world are retreating from their commitments on HIV. In parts of Africa large numbers of people are dying again and they are losing hope.

But despite this TAC and SECTION27 are aware of the challenges that lie ahead. Some of these are summarised below:

- The NSP must be properly budgeted for! Although the plan makes a commitment to being fully costed and budgeted for we will remain vigilant to see that this actually happens. By the 2013/14 financial year we expect to see clear budgets for the implementation of the NSP in the national budget, provincial budgets and the budgets of government departments.
- Operational plans must be agreed at provincial and local level by April 2012! The NSP is a national guideline. But its first test will be in its implementation by Provinces and municipalities. Provincial and local operational plans must reveal real programmes at community level around HIV prevention in places like schools, workplaces, taverns and churches. There must be measurable programmes for voluntary HIV testing in schools and among people with higher risk of HIV. We must see plans to stop violence against women. We

must see clinics with systems for infection control.

- Human rights need to be protected and not just talked about! The NSP makes some bold commitments that will need leadership from the government, including the long delayed issue of the decriminalisation of sex work (promised in the last NSP)
- The South African National AIDS Council (SANAC) must be made a statutory body that is efficient, transparent and effective! In the last five years SANAC has played a growing leadership role and has improved its visibility. But it has also wasted money and become an institution where some of its members lack accountability and scrutiny. This must change. More than many other institutions SANAC is entrusted with people?s health and lives. It cannot become another feeding trough.
- TAC and SECTION27 will continue to assist the government at every level. We will help to build effective local and district AIDS councils and communities where people know about their rights. But we will also remain independent, monitoring to make sure that the plan is felt in villages and factories, not just in conference rooms and hotels.

This statement has been adopted from the TAC NSP Review publication. To request a hard copy, please send an email nsp@tac.org.za.

Dwindling Funds for HIV and AIDS

The dwindling funding for HIV and AIDS is a big worry for TAC. We are especially worried how this year's theme of 'Getting to Zero' - Zero New Infections, Zero Discrimination, Zero AIDS-related Deaths - will be realised without the corresponding funds to work towards achieving these goals worldwide. Getting to Zero requires concerted effort and together we can make it a reality.

The TAC is an award winning South African social movement campaigning to save the lives of people living with HIV and TB. In the 12 years since it was established TAC has helped to save and better millions of people?s lives in South Africa. It has also contributed to the deepening of democracy in South Africa, through its use of the courts, advocacy and promotion of human rights constitutionalism. Internationally, TAC has been one of the most influential AIDS activist movements; an organisation that has catalysed action on HIV/AIDS across the world. Yet today TAC faces a real threat of imminent closure due to a dire funding crisis.

TAC has helped save one and a half millions lives. Our organisation continues to do critical work to alleviate the HIV and TB epidemics. For example in the last few months we have helped develop the new National Strategic Plan on HIV, TB and STIs (2012-2016), resolved a shortage of a critical medicine for treating a fatal opportunistic infection and brought together clinicians, government and civil society organisations to take action against the TB epidemic. Our HIV and TB policy briefings are influential and are read and debated by thousands of people.

Our volunteers distribute over five million condoms a year and our treatment literacy practitioners provide information about HIV treatment and prevention to patients in clinics in much of the country. Our 130 branches identify problems in clinics and try to get local health authorities to work effectively.

We exposed the Tara Klamp debacle and we have won numerous complaints at the Advertising Standards Authority against quack health practitioners. We have been an outspoken civil society voice on diverse issues, from the Medicines Control Council's recent court case against Adcock Ingram to denouncing the Protection of State Information Bill.

Our members have ensured that the justice system has prosecuted murderers and rapists in places like Khayelitsha. We publish Equal Treatment, arguably the best popular health magazine in the developing world.

We also need to exist in order to enforce several court orders we have won over the years and to fight upcoming court

cases, such as one against Christ Embassy, a church whose public advertisements have in the past claimed that they can cure AIDS.

We have in the last year also started two fledgling websites, Quackdown and TB Online.

All of this essential work is at risk of coming to an end if we do not get the necessary funds to continue our work. As traditional sources of funds for HIV and AIDS face a crisis, we appeal to individuals to make a tax deductible donation to TAC via Greater Good. US donors can give via the South Africa Development Fund on Network for Good. Every cent counts.

For more information/Comment, contact:

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