

DATABASE OF SELECTED IMPLEMENTING PARTNER ORGANISATIONS FOR THE STIGMA & DISCRIMINATION PROJECT 2019 - 2022

NAME OF IPO	PROVINCE	DISTRICT	CONTACT DETAILS	SUMMARY PROFILE			
LIMPOPO							
1. Christian Ministers Fraternity of South Africa	LIMPOPO	Greater Sekhukheni	Frank M. Mabutla 795/6 Thuto Street, Zone 4, Seshego, 0742 081 369 2945/ 083 766 7383/ 079 088 2710 secretarycnfsa@gmail.com/ fmabutl@gmail.com	Christian Ministers Fraternal of South Africa (CMFSA) is a registered Non-Profit Organisation that was established in 2012 as a fellowship of religious leaders striving for the same purpose of community development. CMFSA recognises that the world is dynamic and requires comprehensive, multifaceted strategies and involvement of serious activities and professionals from different sectors to at least manage change in dealing with HIV/AIDS, TB, and STIs for the better and benefit of the community at large. Bringing sustained change requires addressing many social factors including those of individual attitude, Community norms and values, practices, tradition and culture, government policies, laws, Institutions, CSOs, media, family, economic, political and social pressure. We understand that effective response to HIV/AIDS, TB, STIs and GBV requires organization to build relationship with non-traditional partners. Our social change strategies such as Community System Strengthening programs promote a health relation and social responsibility. These include amongst others: working with government departments to help develop new policies and implement existing ones, Advocacy, activism and community mobilisation to ensure deliverables by civil society and government municipalities to honour their commitment and obligation, build effective network and sustain relationship, Strengthening organisational capacity, Introduce communication strategies for social change, Community Awareness Campaigns, workshops, door-to-door and dialogues, Individual skills building, Research, Monitoring and evaluation to ensure impact and positive outcomes. CMFSA is non-sectarian and aiming to advance the physical, social, intellectual, moral and spiritual interests of all South Africans, CMFSA has properly constituted board of directors that provide oversight organizational matters. The founders also ensure that adequate skilled and experienced staff is tapped in to manage the implementation of programmes. Our Key programmes include HIV/AIDS,			



			and Women Empowerment, Home and Family Life, Poverty and Hunger, Human Rights, ND Democracy and Social Cohesion.
2. Tiangmaatla Multipurpose Centre	Capricorn District	Melida Matsi Stand 4005, Next to Sebayeng Clinic Sibayeng, Limpopo, 0752 015 590 2376/ 073 953 0642 mokgobjam@webmail.co.za	Tiangmaatla Multipurpose Centre was founded in 2003 as Tiangmaatla Home Based Care, by our current Managing Director Melida Matsi, in an effort to combat the HIV/AIDS epidemic within the community. By 2004 Tiangmaatla had grown to 13 people all volunteers, who go out in to the community each day to promote health habits and help ensure that the community members were adhering to treatment.
			Tiangmaatla moved to its first office in 2005, after receiving grant from the South African Department of Health. During the first two years at the new office Tiangmaatla staff still all volunteers used cardboard boxes as furniture, however in 2007 Thobela FM, a local radio station, donated chairs and a computer to Tiangmaatla. Through these early ears the staff was providing care service to approximately 20 HIV/AIDS patients in the community along with general health outreach to the entire community.
			In 2009 Tiangmaatla received funding from the National Lotteries Commission to build its own office which was completed in 2010. In these years Tiangmaatla expanded the services it offered beginning to operate a Drop In Centre which provides meals and educational opportunities to Orphans and Vulnerable Children in the community.
			In 2011 Tiangmaatla received funding from the International Development Trust, which allowed Tiangmaatla to create 50 work opportunities for community members. These community members were employed in several different areas including Gardening/ Environment. Sewing and fabric printing. Expansion continued in the following years with the installation of mobile classrooms in 2013, donated by Breadline Africa, and 2014 saw the addition of a bakery. By 2015 Tiangmaatla had expanded to manage providing care to 221 patients, and serving 160 Orphans and Vulnerable Children, and manage a staff of 459 people across the entire Capricorn District. Many of these staff were place at the districts clinics and hospitals and were responsible for maintaining the environment around the clinics and hospitals. During this time Tiangmaatla added a Youth Development Centre which was staffed by the youth peer educators in the community
			to provide education and skill development to local youth along with conducting health campaigns in the community on various topics such



			as STIs, Gender Based Violence, Healthy Lifestyle etc.
3. Nhlayiso Community Health Drop In Centre (NCHDIC)	Mopani District	Meriam Mathye 1588A Cnr Bankuna & Themba Street, Teba Building, Nkowankowa, 0887 082 815 9535/ 063 536 6489 healthymind20@gmail.com	Nhlayiso Community Health Drop in Centre (NCHDIC) is one the active existing non-profit organisation is South Africa. Nhlayiso CHDIC is a community based organisation situated in the area of Nkowankowa, Greater Tzaneen Municipality under Mopani District in the Limpopo province. The organisation was founded in 2001 and registered in 22 August 2002 as a non-profit organisation with the Department of Social Development. NCHDIC came into existence with an aim of providing care and support to people living with HIV and AIDS including other chronic illmesses, orphans and vulnerable children and to respond to the growing mortality rate resulting from the HIV epidemic ad increasing number of orphans and vulnerable children. At the heart of our programmes we seek to reduce risky sexual
			behaviour among different key population as identified in the country's national strategic plan. The organisation is aiming at reducing the level of stigma and discrimination against all diseases, combat/reduce death rate, have fewer orphans and win community trust by helping them to address their needs and any social issues affecting them, such as poverty eradication, reduction in equality, encourage youth to start businesses focusing on reduction of unemployment, make verifiable impact and motivate young people to use available resources to access opportunities.
			 Programmes rendered by Nhlayiso CHDIC are as follows: Home Based Care (HBC): Home Based Care aims at caring for the clients at home while prescribing medicine, monitoring, clinical service, spiritual, psychological, integrated prevention, and nutrition and food security. Community health care workers were also trained to render the services by giving care and support to the clients. They were also trained to assist primary caregivers. Orphan and Vulnerable Children (OVC): The main essential purpose of the OVC programme is to meet the emotional cognitive, sensory, spiritual, moral, physical, social, educational, and development of each child through the ethos of children's rights. All activities play work spaces and materials are developmentally appropriate and support active learning for orphans and vulnerable children. NCHDIC has provided support to thousands of Orphans and vulnerable



				children with the following activities: HIV and AIDS prevention education, childhood protection, psychosocial support, home visits, life skills, homework supervision and educational support. • Social Behaviour and Change (SBC): It is a strategy used to address issues at social and behavioural level. Through the programme we render five indicators such as (a) You Only Live Once (YOLO) programme targeting young people aged 14-24 years. (b) Communities as a whole are reached through Community Capacity Enhancement (CCE), whereby communities come together to tackle social and behavioural issues leading to HIV/AIDS and come with solutions. (c) Men are reached through Men Championing Change (MCC) programme, whereby men come together to share, debate and educate one another while focusing on gender based violence (GBV) prevention, and understanding the relationship between HIV and gender inequality. (d) Families are reached through Family Matters Programme (FMP), through this parents are encouraged to come together to share parental skills, empowering parents to take charge in communicating and educating young people to take charge of their lives. (e) Ke-Moja (I'm fine without Drugs) is a program whereby young people and communities are educated while given the platform to share their views on how to create a drug free Environment.
			NORTH WEST	
4. Tshupe Hospice	NORTH WEST	Bojanala District	Lerato Ruth Rangaka 2872 Motsatsi Street, Tlhabane 014 565 3493 tshupe@telkom.net/ leratorangaka@icloud.com	Historical Background Tshupe Hospice was founded by Mr and Mrs Rangaka owners of Foro Spar on the 1 st August to address the presenting problem of children foraging for food in and around their business. Upon trying to investigate the cause for this, it was discovered that the parent of primary care givers of these minors were infected with HIV/AIDS, TB, Cancer and other terminal diseases. Initial plan of action: establishment of after school feeding scheme for
				affected children with a resident teacher to assist with homework after



				 Registration as an NPO. Key Programmes: Home based care, Day Care (Monday-Friday), In patient unit (2 wards with 12 beds male and female) with a qualified nursing sister in charge where HIV/AIDS pateints are collected from home and given 2 healthy meals to ensure that adherence treatment thus improving the physical health and appearance to alleviate discrimination and stigma. Social protection progranne (previously OVC) where 70 children are provided with meals, extra mural activities, team building exercises and camping trips if funds available. Milestones: In 2010 Tshupe won both district and provincial community of the year. In the same year (2010) the organisation was awarded a 1 star rating by the Hospice Palliative Care of SA The organisation also received a merit certificate of compliance by Lotto (previous funder) The organisation has successful fundraising initiatives namely Laundromat, ice cream machine, and photo development machine to ensure sustainability of current programs.
5. Sophakama Community Based Development Care and Support Programme	EASTERN CAPE	Nelson Mandela Bay Metro	Michael Matanzima Africa House, Room 15, 6 Graham Street, North End, Port Elizabeth, 6001 041 484 4922/ 083 241 7627 matanzimam@sophakama.org.z a	Sophakama has proven track record of delivering HIV/TB and health related services to communities fighting stigma and discrimination and acceptance of status. In relation to this project, Sophakama will improve the quality of intervention in support of fighting stigma and discrimination and providing care to TB and TB/HIV co-infected patients in the NMBHD sub district. Sophakama has provided HIV/TB support care to the communities they work in for many years. Sophakama has 28 dot Supporters and 18 Community Home Based Carers (CHBC) who are trained to give continuous support in areas such as primary health care, psychosocial, spiritual, social, and physical needs (a holistic and integrated approach). Family members are also trained and empowered to take care of their family members who are sick. Currently, 275 clients both DS TB and DR TB receive support from Sophakama's DOT Supporters



while on HIV testing Services we reach 939 clients per month, of which majority (65%) are women).

The CHBS's work in parallel with Sophakama Peer Educators who do door to door visits to identify households that need care and support. The Peer Educators assist to prepare the client and their family for treatment as well as stress the importance of adhering to medication. Peer educators also assist with tracing lost-to-follow up patients, treatment interrupters as well as newly diagnosed patients who are not yet on treatment and conduct awareness, imbizos.

Sophakama is very good at tracing treatment defaulters for the local clinic. All listed patients (both male and female) benefit from this tracing service and by being supported to adhere to treatment. During the past 12 months a total of 300 defaulters were traced with males being the majority of these cases (63%).

Sophakama's involvement in combating TB is not new and past experience includes:

- 28 DOT supporters work in communities to educate people on symptoms and treatment of TB and Drug resistant TB & the importance of early testingand infection control measures.
- Education and awareness campaigns on prevention and treatment of TB
- Workshops
- Adherence club
- Conduct dialogues, world TB Day, World Diabetic Day, World AIDS Day
- Screening for TB Door-To-Door Campaigns
- Sputum collection
- Distribution of pamphlets

Sophakama also provides DOT support to people living with TB as well as assisting with the tracing of defaulters. The CHBC's are trained in Sputum taking and whilst TB IEC materials are distributed, they target patients, family members, communities and people living with HIV/AIDS.

Sophakama participates in regular targeted awareness campaigns in hot spot areas in the communities and also conducts regular imbizos



			and dialogues on Tb & HIV in communities. Annual commemoration dates are always supported and Sophakama conducts activities on World TB Day (March), World Diabetic Day and Worl AIDS Day (1 December).
6. We Care	Amathole District	Nokwanda Ntloko No 4 Merriman Street, Extension 2 Butterworth, 4960 073 431 7627/084 739 2691 Wecare.aoc@gmail.com	We Care was registered in 2002 with the Department of Social Development as a Non-Profit Organisation. The main aim was and is to fight and reduce the spread of HIV/AIDS and to service the community with educational, preventative, and therapeutic services and skills. We are surrounded by unhealthy dense populated informal settlements and rural areas where there is high prevalence of TB HIV/AID, substance abuse and gender based violence, crime, teenage pregnancy and unemployement. There 55% of unemployed youth. The main form of employment is general work and government. There is also high level of poverty which is one of TBHIV drivers. Statistics depicts low level of education and income. We have also seen it as a priority to create employment hence for the past 10 years we have been participating in EPWP-IDT NSS program. We Care was established in 1998 by one of the members when she lost her sister in law due to HIV/AIDS related diseases.
			 Key Programmes: Psychosocial Support Services (PSS) - OVCY support, in and out school youth mentorship, support lay counselling services. Prevention Services- TB HIV/AIDS awerenes education, door to door, prevention, care and treatement adherence support, TB screening, pregnancy testing, open and closed support group formation and meetings, TB/HIV Stigma and Discrimination Community Dialogues trained by Soul City, YOLO (You Only Live Once) Sessions, clinic/community health talks, public education through community radio stations and IEC material distribution. Milestones: We once received award by EU PDPHCP Eastern Cape DOH for the best performing NPO service delivery in Amathole. We have managed to stay in EPWP-IDT program for the past 9 years without fail. Our existence and experience has made us known and noticed even nationally hence NDSD recognised We Care as an established organisation during revitalising process of HCBC Programme and was nominated to present good practises in DSD national symposium. We



			(PLHA, LGBTIQ) Stigma and Discrimination reduction dialogues and support groups. Their students will find a safe space to talk, the university had incidents of suicide. Stakeholder collaborations is one of our strength even beyond Mnquma. We are conducting health talks in clinics outlining kinds of stigma and effects. HIV activists/champions youth and women talk openly with their status encouraging people to test with 'Siyaphila' slogan. Our 18 months mentorship by NACOSA has been the highlight of 2017-2018. Being an SR has been so challenging in a positive way, knowing how to manage the Global Fund finances and monitoring the programs, it has been the best journey in the history of We Care. We became the first runner up in the Easter Cape Shallote Maxeke Awards in HIV/AIDS Category.
7. Manguzela Thandanani Home Based Care	Alfred Nzo District	Nyameka Ngxongo Dengwane Location, Magadla A/A, Matatiele, 4730 073 641 6247 manguzelahome@gmail.com	Manguzela Thandanani Home Based Care is a Non-Profit Organisation REG NO: 063-407NPO that is working together with government departments and all other stakeholders including Department of Health, Social Development, Municipality, CBOs, Traditional leaders, Healers and Surgeons. The project aims at fighting discrimination, family based care, domestic violence in the communities. It also minimise the spread of TB infections, STIs, TB and educated young people about teenage pregnancy. The organisation is also doing adherence clubs to the communities that we support since our funder is the Department of Health.
			Background of Manguzela Thandanani Home Based Care Manguzela Thandanani Home Based Care was established in 2002 and registered in 2008. There were many deaths, Stigma & Discrimination in the communities that we support, then the organisation saw the need of educating communities, giving care and support to orphans, people living with HIV (affected and infected), taking care of the sick people in their places of residence and also encourage those on treatment to adhere on their medication. Testing and Counselling was also introduced to the programmes so that everyone must know their status, then adherence clubs for making sure that people's viral loads are suppressed.
			Aims and Objectives:



			 To fight stigma and discrimination towards PLWHIV, TB To fight domestic violence in communities To educate our communities about primary health care and promote healthy life styles. To conduct awareness campaigns and assist and compliment clinics, hospitals and other government institutions relevant in our programmes Values: Non-Racism, Non-Sexism, Non-Discrimination, Honesty, Confidentiality, Accountability, and Respect.
8. Ubuhlebethu 1203 Organisation NPO	Buffalo City Metro	Mandisa Ratya 21 Gordon Road, Southernwood East London 067 165 1225/ 063 177 3843 Ubuhlebethu1203.org@gmail.co m	Ubuhlebethu 1203 is a registered non-profit organisation that offers care for physical needs of children, youth and families while ministering to their emotional and spiritual needs. It was established in 2016 by Mandisa Ratya as a memory of her oldest daughter who dies because of HIV/AIDS related illness. She also developed a passion for orphaned and vulnerable children after she started providing fostering care to her sister's children, children from church and the community. She decided to register the organisation as a non-profit organisation in 2017. Since its inception, the organisation has thrived to exist as a one stop HIV/AIDS Advocacy and Foster Care Hub with a desire to provide an ideal home to orphans and vulnerable children, students and young people with the general. The organisation is led by young people with the youngest women who's the chairperson of the board of directors. These young people with the key leadership roles in the organisation are the products of the children who grew up in the orphanage or foster homes with experience of rejection, stigmatisation, and discrimination. Their vision has assisted the organisation to design its programmes in a child and youth friendly services, better access with peer to peer methodology. The organisations key programmes: 1. Fostering Homes for Orphans and Vulnerable Children, Students and Youth (OVCSI): The programme services are for OVCSIs between 0-18 years old. 2. OVC: Community Based Orphans and Vulnerable Children: provides the comprehensive HIV/AIDS management care and support services by implementing the ACT and DREAMS to



			eradicate the HIV/AIDS epidemic, STI, and TB to OVCs. 3. Community Outreach and Awareness Campaign on HIV/AIDS, TB and STIs: 2000 adolescents, youth and families with information advice, awareness and social mobilization for access to health services without stigma and discrimination. 4. Sports, Art and Culture Adolescent Youth Programme: provides stigma free health related awareness campaigns during school sports arts and culture events implemented in Buffalo City Metropolitan Municipality. 5. Work Related Learning (WIL) Youth Programme: Provides learnership, internship, and short skills programmes to unemployed youth with high school or higher education qualifications.
9. Hospice Association of Transkei	OR Tambo District	IPO appointment processes are being finalised.	Hospice Association of Transkei has been serving the OR Tambo District communities since 1992. The vision of the Hospice of Transkei is to provide palliative care to patients that are terminally ill. Transkie Hospice has successfully implemented an intergraded community Home Based Care Model since its birth in 1992. This has resulted in improved quality of life for people living with HIV/AIDS contributing to the decrease in mortality rate in HIV/AIDS patients co-infected with TB. HAT is a key partner that made the implementation of MDR TB decentralised model in King Sabata Dalindyebo a Success. This was done through a grant funded by URC TBSAP between 2017 to date. HAT is only working in King Sabata Dalindyebo and could see opportunities in other areas in OR Tambo but do funding constraints, activities could not be expanded. HAT implemented the Stigma and Discrimination Reduction Program funded by NACOSA through Global Fund in August 2018 to March 2019. The following activities were implemented: a) Community stakeholder workshops to develop a stigma campaign and a multi stakeholder steering committee within the district. b) Quarterly community dialogues to discuss issues of stigma with key, vulnerable and affected populations and agreement on local actions that will be driven and monitored by the steering committee. c) Awareness raising through door-to-door and community events and distribution of relevant stigma materials.



			GAUTENG	 d) Support groups: Formation or strengthening of HIV and TB-led care and support groups with a focus on psychosocial support for addressing stigma and self-stigma, responding to incidences of discrimination and promoting treatment literacy and adherence. e) Beneficiary surveys: Beneficiary surveys or focus group discussions with PLHIV, TB, and key and vulnerable populations to collect information and lessons learned on experiences of coping with and/or overcoming external stigma and internal stigmatization and responding to incidences of discrimination. HAT has 24 Staff members, 1 manager, 1 social worker, 1 professional nurse, 1 enrolled nurse, 1 admin clerk, 1 data capture, and 12 CHCWs.
10. Lethukukhanya	GAUTENG	Joburg City	Josiah Ntsibande	Lethukukhanya Health Institute/Project was founded in 1995 as a skills
Health Institute			84 Helen Joseph Street The Markade Building, 7 th Floor, Office 729 Johannesburg 011 036 6872/ 072 138 2437 josiahn@lethukukhanya.org.az	development provider (SDP) in the field of health and social development related programmes, based in Johannesburg, Gauteng. The organisation was founded by two former and retired nurses and civil society members involved in community development. The organisation also does community outreach programmes/projects. Key programmes and milestones: • Jozi Ihlomile HIV/AIDS door to door education, employed 195 educators and coordinators who visited 1,872,000 households in region A and D of the City of Johannesburg. • Trained more than 600 primary school teachers in Gauteng on HIV/AIDS and Life Skills programmes in conjunction with Matthew Goniwe School of Leadership & Governance (MGSLG). • Organised sport tournament in Diepsloot for young people on management of HIV/AIDS through sport. • Doing Home Based Care for more than 100 elderly in Dobsonville and Braamfischerville, Soweto • Running service centre for (day care) for more than 60 elderly in Dobsonville. • Running a wellness programme in region F servicing more than 1000 daily. • Trained more than 1200 learners on Social Auxiliary Work, some of them benefited through learnerships



			 Trained more than 350 learners on Ancillary Health Care Work, some of them also benefited through learnerships. Trained more than 295 learners on short/skills programmes like: Advanced HIV/AIDS, STIs, TB and DOTS, and Home Based Care. More than 70% of our learners get employed after training as we place them during training to organizations for experiential training. Others continue with their studies in tertiary institutions.
11. Methodist Wattville Outreach	Ekurhuleni	Judith Sunday 1038 Ngengebula Street, Wattville 011 915 6569/ 082 760 5001 methwattoutrcommprog@gmail. com	The Methodist Wattville Outreach (M.W.O) is a Non-Profit Organisation. The main focus of the organisation is to provide Basic Health Care Services, to the forgotten & neglected senior citizens of Wattville and surrounding areas, including Home-Based Card to patients who are bedridden. The M.W.O was established on the 19 th August 2003 under leadership of Mrs F.V Gama a professional nurse and consisted of 5 caregivers who were providing health care to patients in their homes. Our Mission: Commitment to care for, and support communities by providing excellent and efficient services for healthy people. Our Vision: To be a successful caring organisation providing balanced range of services and opportunities to the community. Be competent, compassionate, consistent and ethical in the way we conduct our services. We are having project manager, administrator, supervisor (retired professional nurse, trained counsellors, and peer educators through the department of health. Our Programme and Services: 1. HTS and Social Mobilisation programme, funded by the Department of Health. We provide the following: Blood Pressure monitoring and sugar level testing, testing for HIV/AIDS, TB Screening, STIs screening, Adherence Clubs, HIV/TB infected and affected supporting groups, pregnancy testing (elimination of mother to child transmission), cholesterol and weight monitoring, Social mobilisation (distribution of condoms and health education), Mobilisation on



			 VMMC, HIV Testing and Gender Based Violence on campaigns throughout Ekurhuleni East and North Sub regions. Educating Adolescent Young Girls and Young Women in prevention on sex reproductive. Refer or linked clients to facilities for further handling depending on their needs. 2. Service Centre and Home Based Care which is funded by the Department of Social Services. For Home Based Care: We have 9 volunteers and 1 retires professional nurse +/-300 Patients at homes, who are given care and support by our caregivers daily. AND For Service Centre: 2 cooks 150 beneficiaries, who attend Monday to Friday 3. Decanting funded by Aurum Institute Clients from Clinics, (who are adhering well on their treatment from our organisation.
12. Nqobile Women's Development Project	Sedibeng	Mtomkhulu Makelefane Unit 7 Phase One, Industrial Park, Residensia 016 593 3604/ 083 430 4286 Jawsnqobile1@gmail.com	It was idealized in May 1997 and registered in 2004. It was started by a group of unemployed women who were concerned about the scourge of HIV & AIDS, on how it was impacting the community in general, but women in particular. It was discovered that most of the women were killed HIV & AIDS epidemic and TB. Majority of these women decide to do something about this, the department of health was approached and five volunteers were trained on HIV/AIDS basic information. Then at a later stage one of the volunteers was sent to different trainings including HIV & AIDS trainers training. Later the DOH asked her to assist on training other members, later she was also asked to train other NPOs and later she also trained lay counsellors, this made our relationship to strengthen. Then a HIV & AIDS programme was started to minimise the HIV & AIDS spread around our area and later it was funded as prevention of HIV programme, we also reached sex workers that were not considered because sex work is not legalised in our country. Our organisation has been funded by Social Development for the past 16 years and it is a huge success as more work opportunities were created through EPWP programme and also the community were



			reached and helped throughout the programme were door to door were done and people were assisted through different channels and the following assistance was given to society, such as food parcels distribution, identity document, birth certificate, pension grant, social grant, foster care grant applications, home based care, hospice care, palliative and psychosocial support. The organisation currently employed 42 young people with skills and competency to deliver on the programmes funded.
			It was also funded by Department of Health for 14 years and the funding was stopped the year 2014as the department wanted to absorb peers working under the Department of Health. The programme was a success as we learn more throughout the peer education programme, client were encouraged to live a healthy lifestyle, condoms were distributed throughout our demarcation, education were done people were taught about STIs, HIV&AIDS stages, TB, Teenage pregnancy, chronic diseases, infection control, taking charge. Peers were trained for 69 days, others as counsellors and PHC (Primary Health Care). We provide 100 food parcels every month to the needy families as part of poverty alleviation programme through the department of social development. We work closely with our neighbouring schools like a nearby school 'Themba Secondary School' where children are assisted in any kind of information they need, we also offer them psychosocial support and assist them in bursary applications, Till this time we assisted 20 learners to get bursaries from the Depart of Social Development.
13. West Rand Youth Development	West Rand	Boyce Moatshe 131 Cnr Okavango & Okatsha, Kagiso II, Mogale City, 1754 011 410 8724/ 011 410 8724 wrydevelopment@gmail.com	West Rand Youth Development (WRYD) was founded in February and was officially registered on the 2 nd of June 2011. WRYD is an NGO focused on empowering the youth by providing them with needed skills, awareness, knowledge and possibly, if necessary or required, facilities to efficiently exist in the world of today. The idea for such an organisation was influenced by the sad discovery of a high lacking for institutions that cater for the development needs of the youths in the West Rand. There is no denying that the youth of
			today are the leaders of tomorrow, therefore nothing could be more critical than empowering them, by doing so securing the future of this country. The organisation falls under the "youth development" sector and places



			its focus on skills development and awareness programs. We create projects that ensure that such sectors of development receive recognition and growth and we aim to ensure sustainability in the outcomes of the project. West Rand Youth Development has been successful in creating awareness programmes that speak to HIV//AIDS & Teenage pregnancy. These awareness programmes speak to the Adolescent Girls and Young Women population. We have also managed to train more than 200 young people in basic, accredited computer training in the past 3 years. We have also been able to find more than 120 young people in the same number of years.
14. Tshwaranang Support Group	Tshwane	Ntombi Pege 986 Block U, Mabopane 081 319 0409/ 079 489 8887 tshwaranangng@gmail.com	Tshwaranang Support Group was established in 200by Ntombi Pege, with vision of uplifting the lives of people infected and affected by HIV/AIDS and other chronic illnesses. We offer our services in Bloc U, Mabopane, the informal settlements of Slovoville and Winterveld and the surrounding areas. In these areas people who disclose their HIV status are stigmatised severely affecting their self-esteem. This discourages community people from using voluntary Counselling and Testing services, even at the bed-ridden stage of infection. This stigmatization and discrimination poses a challenge to us as lay counsellors, Community Health workers and HIV Activists regarding the services we provide and making entry to the people needing our care and psychosocial support services, particularly marginalised groups.
			Tshwaranang Support Group prides itself on making a positive impact on 70% of people who are now living positively with HIV/AIDS in our area of work. Over the past 10 years we have continued to establish ourselves as a trustworthy support organisation for people diagnosed with HIV/AIDS, for their families and the entire community. The major challenge facing our organisation is the fact that the people we have serviced are spreading the message about what we are offering and as a result, the organisation is growing very fast as the demand is growing. To date we have serviced 4000 clients. Our funders and clients over the years include the Department of Health, the National Lotteries Commission, the American Embassy, Old Mutual, the European Union, Gambling Board, NACOSA, Tshwane



				Outreach and CaSIPO.
				While many other HIV/AIDS NGO's operating in our area (Tshwane Health District) focus mainly on prevention on the spread of the HI Virus, Tshwaranang Support Group goes beyond these services to work with clients in the most advanced stages of the epidemic- positive living with HIV through disclosure and acceptance; management of opportunistic infections; adherence clubs which promote the National Strategic Plan for people already on treatment and virally pressed. We have seen so many clients turn around their lives, come to terms with their status, developing a fighting attitude and becoming productive members of society again, even participating in the organisation again. Tshwaranang is concerned not only with the broader community. Since 2001, eight members of staff who started as volunteers with a school leaving certificate are now qualified nurses; two home-based carers are qualified pharmacists; three home-based carers have qualified as social workers.
				Services rendered • Empowerment of young women and girls #WARRIORS
				 Treatment literacy and support for people currently enrolled on anti-retroviral treatment (ART) through hospitals and clinics Physical, psychosocial, and spiritual care and support for people infected and affected by HIV/AIDS/TB/STIs and other chronic illnesses.
				 HTS (HIV Testing Services) Prevention of HIV transmission through distribution of information, education, and communication (IEC) pamphlets, condom distribution and condom demonstrations.
				 Treatment literacy and support for people currently enrolled on anti-retroviral treatment (ART) through hospitals and clinics. Care and support for vulnerable populations, including
				LGBTIQ+ community • Adherence clubs for people on chronic medication
			FREE STATE	
15. Mangaung Mens Forum	FREE STATE	Mangaung	Teboho Simon Motseki 155 Hospital Road Office No: H29	Background Mangaung Men's Forum (MM) organisation: MMF is the organisation established to services of men in the Mangaung Metro Municipality. Fortunately Mangaung expanded to al districts in the



		Botshabelo 060 479 9856 mangaung.menforum@gmail.co m	province of the Free State rendering services to all men of the Free State, MMF has formal structures from the board of director down to volunteers. MMF focuses on GBV, HIV, TB, and STIs. We operated since 2015 as a registered organisation. We experienced that, for the organisation to operate well and deliver good services to our community we need to have funds and proper staff. MMF was once funded by the Department of Health in 2017 and since from there we have never received and funding from other donors. We implemented our activities through the assistant from Brothers for Life, SANAC, and Department of Health. We had no funds in the organisation, we however visited areas where we can meet with men.
16. Golden Gateway Hospice	Thabo Mafutsanyane	Magdalena Mans 13 Union Street, Bethlehem, 9700 058 303 7109/ 058 303 3082/ 082 200 4169 gghospice@isat.co.za/ reception@gghospice.co.za	Golden Gateway Hospice officially opened their doors on the 5 th November 1991. It started in a small flat, let to them by the local Methodist church, employing one professional nurse and supported by a group of volunteers. Due to Hospice recognising that their service is that of caring for the terminally ill, Golden Gateway Hospice started to admit HIV/AIDS patients from 1994. On the 1 st December 1999, Golden Gateway Hospice registered as and NGO. Today: • Golden Gateway Hospice owns the building in the Union Street, Bethlehem, where the offices are situated. We are a member of the H.P.C.A (Hospice Palliative Care of South Africa). The Hospice has been accredited to the standards of HPCA and COHSASA with a 5 star rating. • Golden Gateway Hospice approaches provided comprehensive health care to people living with a life threatening illness. Hospice is a philosophy of care that believes every person with life-threatening or life limiting conditions has the right to quality of life and dignity in death. We render palliative care to the sick and our approach is to improve the quality of life of patients and their families. • We have a day-care centre which looks after 60 children who are either infected or affected by HIV/AIDS, an early childhood development program prepare these 3-6 year old children for school.
			We manage programmes for orphaned and vulnerable, infected and affected children at our multi-purpose centre. Team's liaisons with various stakeholders on child abuse psychosocial support which is focused on interventions to



			 motivation and education for medical male circumcision. Hospice employs 18 staff members which includes a general manager/professional nurse, enrolled nurse, financial manager, home base/orphan and vulnerable care worker, reception, M&E personal, cleaners, school manager, teachers and cooks. Over and above our permanent staff, volunteers from all ages, race and background kindly offer their services to assist hospice in reaching out to the community. In the past three year we have introduced the Soul City Anti Stigma Programme which is more to do with HIV/AIDS, Anti Stigma campaigns, support of adherence clubs, paediatric and palliative care, and school talks on sexual behaviours, gender based violence, child abuse including bullying. They identify
			hot spots regarding prevalence of other diseases and they do YOLO (You Only Live Once).
		MPUMALANGA	
17. Khanyisa Mhlabentabeni Home Based Care	Gert Sibande	Mandla Matthews Thabethe 43 Aramburg, Elukwatini, 1192 072 117 2642 Kmhbc31@gmail.com / mmthabethe31@gmail.com	Khanyisa Mahlalentabeni Home Based Care is a community home based welfare organisation in Gert Sibande District, under Chief Albert Luthuli Municipality in ward 10. It was founded in the year 2000 and formerly registered in 2008. The formation of the organisation was informed by the high levels of stigma based on uninformed community opinion. The community was not well informed on HIV and AIDS, TB and STIs.
			The organisation is founded on humanitarian principles to serve and support the key vulnerable populations of Gert Sibande, particularly those affected by HIV and AIDS. It later on analysed and identified the need to respond to other social challenges. It also provides support to a wide range of children in need of care in



18. Obrigado Home Based Care	Ehlanzeni	Victory Ngomane Stand No. 20075, Old Zoeknog Clinic Building 076 221 5120/ 072 538 2614 Obrigadohbc@gmail.com	Gert Sibande. At present, Khanyisa Mahlalentabeni Home Based Care is rendering services to a few casual beneficiaries. Khanyisa Mahlalentabeni is a Swazi word meaning, 'Light in the mountain' and the organisation stands for protection and empowerment of children and key vulnerable population, giving them hope and strengthening their capacity to be the best that they can be. The organisation believes in the inherent potential in human beings that we ensure effective delivery of health, nutrition, education and social services as vehicle of social change. Most children are from the surrounding densely populated township and informal settlements that are subjected to indecent accommodation, poor sanitation, inadequate food, rampant drug and alcohol abuse. The majority of these children are orphans and others are living in single parent headed homes, grandparent headed or child headed households. Our community development approach aims at addressing historical imbalances through collective empowerment, facilitating processes that help the poor, vulnerable and marginalised to regain control over their lives. Obrigado Home Based Care was established in 2000 by the lady called Maggie Lawrence. Due to lack of health services provided to the community, people were suddenly infected, affected and dying to the outbreak of various diseases such as TB, Malaria and STIs, and HIV/AIDS. The organisation was established in response to the incrementing of poverty rate, the rapidly spreading of HIV/AIDS pandemic and an increasing number of orphans, vulnerable and childheaded children (OVC). The aim of the organisation was to improve the TB and HIV care patients in our community at household level in line with World Health Organisation (WHO) strategies. The organisation conducts home visits and identifies TB suspects, trace HIV defaulters and TB patients who will be referred to the clinic for further management by professionals. Awareness campaigns and health education were planned with relevant stakeholders at community level
			implementation. The organisation has been providing services for TB, HIV, and PWD



				since its establishment (from the 2000); we managed to decrease the spread of HIV and TB epidemic, and abled to assist PWD with wheelchairs, crashes, and other resources and access to pay points and also referred them to relevant institutions. The organisation was receiving funding to run a programme of Stigma and Discrimination Reduction. The organisation also runs support groups and adherence clubs assisting Zoeknog clinic.
	1.5	1.51	KZN	
19. Lungelo Youth Development	KZN	King Cetshwayo District	Mary Mlambo Mzingazi Agrivillage, Richards Bay 079 798 0528 mlambosm@mweb.co.za	Background Information Lungelo Youth Development (LYD) a registered Non-Profit Organisation (Registration No. 116-102) recognises the key role the youth play in shaping the future of our country, yet hundreds of young people are lost to TB, HIV, Substance abuse and other social ills.
				We aspire to produce young people who are empowered through Health education and awareness campaigns to realize their full potential and understand their roles and responsibilities in making meaningful contribution to the development of their immediate community and the country.
				Founders: The founder Mrs Mary Mlambo, studies business management from GIBS business school, worked as a financial advisor registered with Financial Services Board (FSB) holding management position in various companies for 28 years.
				How it started: The founder identified a need for a youth centre with the aim to provide a resource centre for children development and a platform to address societal issues affecting the youth. The organisation was founded 2012.
20. Melitha International Development and Restoration Centre		Ethekwini Metro	Ntombenhle Lukela 47 Third Avenue, Ashley, Pinetown 031 701 3605/ 072 229 0036 melithadevelopment@gmail.com	Melitha was established in 2009 and was officially registered as NPO in 2015. Melitha is registered in terms of the Non-Profit Organisation (NPO) Act of 1997 with the Department of Social Development. Melitha is registered as a PBO with SARS. Melitha was founded by a women with passion and drive to positively change the lives of communities affected by HIV and other social ills. Melitha has over the years managed to reach out to marginalised communities and breaking stereotypical barriers utilizing community-centred approaches and community based interventions model. Melitha has successfully



			implemented projects throughout the greater part of eThekwini (South, North, and West) and also the greater part of uMthwalume- Ugu Municipality. Melitha has gained a vast experience through its contracted work and projects by NACOSA, WitsRHI, AFSA, and Pepfar. Here are the programmes and milestones achieved by Mellitha. Psycho-social therapy Sexual Reproductive Health (SRH) Tb screening and referral HTS Child sexual Assault Training of ward AIDS committees in eThekwini all 110 wards per (NSP-2017_2020) Contracted by WitsRHI to implement DREAMS program in eThekwini district to reduce new HIV infections AMONG adolescent girls and young women, empowering girls to be resilient, determined, mentored, empowered and AIDS free. Contracted by Afsa implementing TB/HIV screening, referrals, and linkages to care, educating communities about Stigma and Discrimination.
21. Othandweni Lunchon Club	Zululand	Thabile Millicent Nomathemba Zulu R618 Vryheid Main Road (between Nongoma Police Station and Benedictine Hospital) Nongoma 076 438 3188/ 072 612 6934 othandwenicbo@gmail.com	 Othandweni Luncheon Club is Non-Profit organisation registered in 2013 under NPO Directorate. The organisation is under Zululand in Nongoma Municipality. The founder of the organisation conducted a community survey and identified a direct need to establish a structure to care for vulnerable elderly local citizen women who were vulnerable since they were orphan from HIV/AIDS. The survey also identified a huge challenge of HIV infections in teenagers and youth between ages 14-24. A high rate of teenage pregnancy was also identified in the community posing a high rate of new HIV infections and sexually transmitted infections. This contributed to high morbidity rate in the area, hence the need to establish a social behaviour change.
22. Siyamthanda Kwa-Xolo	Ugu	Precious Xolo Gcilima, Ward 7 078 998 8245/060 584 2032 siyamthandashelter@gmail.com	Siyamthanda Kwa-Xolo was started as an NPO providing Home Based Care and support to communities of Kwa-Xolo and Kwa-Nzimakwe. It was discovered that there was also an issue of people who suffered trauma due to the political violence that left families and have never dealt with it, as a result woman and children suffered domestic violence



and other traumas and then the Margate policing community forum after seeing the high rape and domestic violence statistics to women and children.

It happened that Mrs S.N Mdluli who was and is still passionate about women and children issues in the area. She had been in talks with the late Xolo Tribal Authority about women and children issues in the area, even after passing of the great Chief Xolo Mrs Mdluli continued with talks with the incoming chief Xolo and she got in contact with the Network Action Group (NAG).

Mrs Mdluli and Nag then canvassed amongst existing community based organisations to find suitable organisation to carry out the shelter.

Siyamthanda Kwa-Xolo Hannes Shelter and Madikiza outreach was constructed in Gcilima, after the donors whose daughter died in a terrorist attack in Norway. Hanne had a passion for abused women in KwaZulu Natal South Africa (hence the shelter).

The Madikiza family from Kwa-Xolo area had a great passion for the community and its wellbeing had given their homestead to Chief Xolo and had requested that it be used for community projects (hence the Madikiza Outreach).

Chief Xolo, NAG, Mrs Mdluli were of great assistance in securing funding from the Department of Social Development.

The shelter is here to provide a safe environment for women and children affected by domestic violence, rape, and other traumas. It aims to establish an emergency short term shelter in partnership with all victims of domestic violence rape and traumas. The shelter was opened and funded by social development and Norway and we provide psychosocial services, we have recreational activities and we run an outreach programme in the community.

In the year 2017 the shelter has provided services to 79 clients of these 44 clients were admitted in the shelter and 35 clients were walk ins (these numbers include children). 3 awareness campaigns were done reaching a number of 248 people and youth. A community dialogue was conducted and 24 people from the area attended.



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23. Umvoti AIDS Centre	UMgungundlov u District	Sithuthukile Mchunu Lot 586 Bell Street Greytown 033 413 2745/6/ 064 870 5351 finance@umvoti.org	Madikiza outreach programme as part of Siyamthanda does health talks at clinics, schools, and in the community, conducting home visits and supporting clients on chronic illnesses where by DOT is done as part of client adherence in treatment. Umvoti AIDS Centre was established in 2001 by Mrs Joan Dutton, Miss Mamsie Mkhize and Mrs June Litterick. UAC is and NGO based in Greytown and a town in the district of Umzinyathi, Kwa-Zulu Natal, South Africa. The town is the home to one of the world's largest pant seed research facilities is at the heart of an area dominated by agriculture and large pickets of tribal authority land home to many of South Africa's most disadvantaged people. UAC mostly operates in Umvoti and Umshwati, with around 16 000 beneficiaries of various programmes receiving direct services in the past year, this including operations outside of the Umzinyathi, in Umgungundlovu. In 2009 we were donated a 6- hectare piece of land situated in the middle of informal settlements and hostels on the outskirts of Greytown, on which we have developed office space, a warehouse, safe park, a community garden and crèche and ECD facilities and a place of safety for child abuse victims. Our community links are excellent, with tribal authority leaders on our board and excellent business links to the farming community, again through our board. We are supported by partnered with Government Departments, host operation Sukuma Sakhe, the Child Welfare Forum and many other accountability structures in our community and are endorsed publicly by our mayor, local media and many other stakeholders. We have continued to build on our services and currently receive funding for a wide range of social and health interventions. The services
			that we offer include home based care, after school program, adherence clubs and support groups for people living with HIV, day care centre, HIv prevention program, blocks making project for women, drop in centre, eco brick recycling project and food security.
		WESTERN CAPE	
24. Khumbulani Health Education and Resource Centre	City of Cape Town Metro	Gloria Bebeza I370 Mateta Street Khayelitsha 021 360 8007/ 083 733 2657 gloriabebeza@yahoo.com	Khumbulani Health Education & Resource Centre was officially formed in 2001 and registered as Non- Profit Organisation (NPO) as a response to the scourge of HIV AIDS epidemic in Khayelitsha and surrounding areas. It aimed at mobilising support and care to individuals and households infected and affected by HIV AIDS and Tuberculosis.



			Its founders are member of the community of Khayelitsha who possesses skills and knowledge on community development especially with focus on women and children. The organisation has the following programmes: • Early Child Hood Development with greater focus on Orphaned and Vulnerable Children. • School After Care • Youth Development • Psycho Social Support • HIV Support Group
			Khumbulani Centre has in the past 5 years provided educational, awareness, counselling, nutritional, and referral services to the community of Khayelitsha and surroundings reaching an estimated number of 4300 individuals and families affected and infected by HIV/AIDS, TB and substance abuse. To the above end the organisation has initiated, supported, capacitated support groups for youth ages 15-24, Adult Support Group, Psycho Social Support which are hosted weekly. The Youth Support Group represent a section of in and out school youth. Approximately 75% of those attending are female. The organisation sexual reproductive health programme includes condom usage demonstration, condom distribution, stigma and discrimination reduction, and other safe sex and risk reduction practices.
			One of the major lessons learnt during the implementation of the above is that whilst communities are aware of AIDS and TB, the social behaviour has not changed as intended, Individuals are still engaging in unprotected sexual intercourse, multiple partners, and rare attention to screening. These are more prevalent amongst teenage youth.
25. SisterLove International South Africa	Eden District	Nontyatyambo Makapela 3A/5 Eton Road Parktown 011 482 2202/ 084 618 2384 nmakapela@sisterlove.org	SisterLove International South Africa was registered as a local NGO in March 2017. SisterLove has worked in communities in four districts in South Africa i.e. Ekurhuleni, COJ, uMgungundlovu, and eThekwini under the Dreams Innovation Challenge.
			SisterLove is focused on supporting capacity-building with local community-based groups to address the HIV epidemic through sustainable organizational and program development. SisterLove has an extensive history as a community-based advocate and educator of evidence based prevention options for women and girls.



In July 2016, SisterLove convened WomenWow! 2013 where more than 250 women across Africa, Europe, and America made history at the first pre-conference solely focused on women of African descent in the build up to the International AIDS Conference (IAC) which took place in Durban, South Africa. Over 100 scholarships were awarded, with due consideration for young women who make up a large proportion thereof. WomenNow!'s investment in the leadership and empowerment of young women, especially those in high burden communities, extends beyond scholarships. The content and design of sessions were crafted to ensure and enabling environment for young women's voices to be heard and for their allies to listen. During the 2016 International AIDS Conference, SisterLove learned that they were being awarded funding by DREAMS Innovation Challenge (Gauteng & KZN sites) supported by the US President's Emergency Plan for AIDS Relief (PEPFAR). ISTARSHIPP- Innovative Strategies for Those at Risk Seeking High Impact Prevention & PrEP (Pre Exposure Prophylaxis) - a project of SliSA- is an innovative suite of strategies that are intended to accelerate the reduction of new HIV infections among Adolescent Girls & Young Women (AGYW) and their male counterparts.

The primary goal for iSTARSHIPP is to educate, prepare, advocate and support communities, especially women/girls and young men, for the implementation of High Impact Prevention programs including prevention technologies such as PrEP, PEP, TasP, VMMC, microbicides, and vaccines.