

Analysis of the Cross-Cutting Issues

4.1 ANALYSIS OF CROSS-CUTTING ISSUES

4.1.1 LOCAL AGENDA 21

Agenda 21 is the outcome of the United Nations Conference on the Environment and Development (UNCED), which was held in 1992 in Rio de Janeiro, Brazil. It is a global action plan to reduce environmental degradation and promote equitable development into the 21st century. Local authorities play an important part in the transformation towards sustainability, as many of the problems we are facing today, as well as solutions, have their roots in local activities.

LA 21 is a long-term process, which attempts to assist communities in dealing with local economic and social development and environmental development. It reflects the local needs and aspirations and links these in a global context.

Buffalo City is obligated by law to have an IDP in order to ensure a more integrated and sustainable approach to development. LA 21 in turn specifically provides for the application of a more sustainable approach to development. By definition, LA 21 requires a multi-disciplinary approach and must accommodate a wide range of legislation and policies.

There are a number of documents and activities in Buffalo City that deal with Local Agenda 21. The Draft Project Description document of the Sida – Buffalo City Partnership Programme reflects on LA 21.

The former King William's Town TLC has introduced the concept of LA 21 as one of the core components within its Comprehensive Urban Plan (CUP) Project. Within the LA 21 framework, it has proposed a strategy for local sustainable development. However, following the re-demarcation of municipalities, implementation could not be undertaken.

The former East London TLC did not undertake the LA 21 process to the same extent as the former King William's Town TLC. There have instead been uncoordinated approaches with individual departments undertaking their own initiatives.

Specific project ideas linked to Local Agenda 21 are recycling, sewing, environmental education, brick manufacturing and community garden projects.

According to the Amatole District Municipality, the municipality does apply the LA 21 principles on project planning despite the current lack of a formal structure. No budget is currently allocated specifically to LA 21 activities, and most projects are characterised by the absence or serious shortage of financial resources.

Services that could be regarded as LA 21-orientated are presently non-governmental in nature, and in some areas are totally non-existent, while where they do exist, they are often poorly run. In terms of human and technical resources available, there are no human and technical resources put aside specifically for LA 21. The Environmental Health Division deals with most of Agenda 21 related issues. The municipality plays an important role as facilitator, mediator and co-ordinator in the development of Local Agenda 21.

4.1.2 HIV/AIDS

4.1.2.1 General Background

AIDS is set to provide government and civil society in South Africa with its greatest challenge to date. It is widely recognised that health departments in South Africa do not have the capacity to deal adequately with HIV/AIDS/STD/TB, other than to do so in partnership with other agencies of government and civil society.

According to the results of the 11th annual antenatal HIV survey, carried out in October 2000, 24.5% of South Africa's pregnant women are HIV-positive. The findings of this study are used to inform intervention programmes and guide policy formulation.

Although there are problems with generalising these results to the South African population, some extrapolation to estimate the total number of people infected at the end of 2000 is possible. The estimated number of infected women between the age of 15 and 49 is 2.5 million, and the estimated number of infected men aged 15 to 49 is 2.2 million. Roughly 100,000 babies are infected.

Eastern Cape statistics show that 20.2% of pregnant women in the province were positive in the 11th annual survey. Of these, the largest percentage (32.4%) was in the 20-24 year age group. In the geographical area into which Buffalo City falls, 16% of pregnant women were found to be HIV-positive.

South Africa is now beginning to show the signs of a mature epidemic which demands that, in addition to the prevention efforts already in place, services expand to undertake the next stage of management of the effects of HIV, that of providing for the personal and social impact of HIV for those infected and affected by it.

Linking STDs and TB with this deadly epidemic is not difficult. The presence of certain STDs in either sexual partner increases the risk of HIV-infection during a single sex act 120-fold. An estimated 4 million cases of STDs occur each year in

South Africa, many of which are left untreated or are inadequately treated for a variety of reasons. TB and AIDS also share an unholy alliance – the presence of HIV infection increases the risk of contracting TB, often leads to misdiagnosis of active TB, and increases the risk of developing drug-resistant TB.

4.1.2.2 HIV/AIDS Related Problems

Buffalo City is currently dealing with the following problems: testing for HIV at Primary Health Care clinics is erratic; the supply of antiretroviral therapy for the prevention of mother-to-child transmission of HIV is only available at pilot clinics; drugs for the treatment of opportunistic infections of HIV disease are not always available; clinics lack capacity in terms of staff, skills and resources, to cope with the HIV epidemic; persons who do not have medical aid do not have access to antiretroviral therapy; care is usually provided by family members who are unskilled and lack resources; counselling services are inadequate due to large work loads at clinics; and home-based care services are inadequate.

The HIV-related problems that have an impact on Buffalo City municipality can be divided into internal and external (the list is not exhaustive).

Internal HIV-related problems are those affecting the municipality as an employer. These include:

Staffing Issues

Increased absenteeism; higher staff turnover; loss of key personnel to AIDS; emotional impact on staff of loss of family, friends, and colleagues; financial implications of additional recruitment, selection, and training of new staff; increased need for special leave e.g. family leave; transfer to lighter duties; and termination of employment.

Programme Issues

Provision of HIV/AIDS/STD/TB education/awareness programmes; provision of treatment and care packages, e.g. counselling, antiretroviral therapy, treatment of opportunistic infections; increased burden on occupational health service; increased employee benefit payouts; and counselling and peer educator training.

Industrial Relations Issues

Need to comply with legislation; possibility of industrial action; performance issues; disciplinary action; involvement of unions in programmes; and policy development and review.

In addition to the above, external HIV-related problems are factors affecting the municipality as a service provider, including the expected impact on the population of Buffalo City. Such impact includes:

Impact on Households and Individuals

Loss of earnings due to illness and death of primary/secondary breadwinner; increased costs due to cost of medication, and need for care; death of both parents leading to the existence of sibling households, in turn leading to child prostitution, poverty, lack of shelter, food and other basic needs; and socio-economic determinants of ill-health, e.g. poverty, exacerbated due to HIV-infection and illness due to AIDS.

Impact on Communities

Increase in poverty and other socio-economic problems and increase in number of orphans and street children.

Impact on Service Provision

Need for additional cemetery space; increased load on health services as a result of the need to provide a comprehensive package of primary health care for HIV/AIDS; increased demand for staff for health service as a result of staff losses due to AIDS and the increased load; cancelling services in order to meet the need for HIV/AIDS-related services; lowered productivity; and financial implications.

4.1.3 POVERTY ALLEVIATION

There is a high poverty level in Buffalo City, with 71% of the municipal population earning less than the household subsistence level (±R1500 per month). Poverty alleviation is a central issue that will be addressed through the projects and programmes that will be developed and implemented in the IDP process.

4.1.4 GENDER EQUITY

The focus is on gender imbalances and social problems, chiefly impacting on women. There is a poor representation of women in the community structure. Only 24% of the councillors are women although women constitute 52% of the community. Other important issues are violence against women and HIV/AIDS, to which women are more vulnerable. The demographic trends clearly demonstrate that women are generally poorer with less access to resources than other groups.

4.1.5 YOUTH AND CHILDREN

Buffalo City is experiencing a number of youth-related problems, namely HIV/AIDS; gangsterism, vandalism and crime; teenage pregnancy; alcohol and substance abuse; and non-completion of schooling.

Many children in Buffalo City are subject to child abuse and foetal alcohol syndrome (5% of children in the country are affected, which is the highest rate in the world). Furthermore, there are many abandoned and “street children”, as well as AIDS orphans. There is at present a lack of child-care facilities, especially for handicapped and disabled children, and the standard of day-care centres, especially in disadvantaged areas, is poor. Many of the child-care facilities in disadvantaged areas offer excellent child developmental programmes although they lack the basic physical requirements to offer quality care on the premises. There are 335 known day-care centres in the Buffalo City area.

The Child Care section of the Environmental Health Department provides an advisory/evaluation service for day-care centres in 13 of the 45 wards. The focus of the Child Care section is on the standards at centres in relation to programmes for the developmental needs of the children, nutrition, equipment, safety, health, hygiene and suitability of premises.

The municipality does not operate any child-care facilities; however, the municipality owns seven day-care centre properties and maintains the exteriors of the premises. Non-profit organisations rent the properties and pay nominal rents. The municipality owns three properties where the municipality has permitted the erection of day centres. The municipality has recently been involved in the planning, equipping and completing of four day-care centres in Duncan Village with Presidential Project funds. The municipality has also worked in close association with a private organisation in the erection of a day-care centre on municipal property in Dimbaza.

4.1.6 THE DISABLED

Approximately 4% of the country’s total population is disabled and 15-20% of the South African school going population is disabled to some degree. There is at present a lack of care facilities for disabled persons, especially children. The access to public buildings including education facilities is limited, as is the general access in streets.

The Department of Development Planning requires that new public premises comply with the National Building Regulations, which states that facilities are required to include suitable toilets, ramps and parking. The Municipality provides suitable pavement access for the disabled with new developments and where properties are revamped.

4.2 KEY FINDINGS

The key findings concerning the cross-cutting issues can be summarised in the following identified weaknesses and threats, strengths and opportunities.

4.2.1 WEAKNESSES AND THREATS

At present, there are no Local Agenda 21 projects being proposed by the Government. There is a lack of co-ordination between the departmental, sectoral and inter-governmental levels. Furthermore, there is an absence of a specific unit and structure for LA 21 issues within Buffalo City, a lack of knowledge and skills as well as financial support. General threats that affect LA 21 are increased crime and unemployment; illiteracy; lack of awareness and information; and continued environmental degradation.

There is a shortage of clinic staff to carry out HIV/AIDS testing, counselling, treatment and care; a shortage of home-based care facilities; absence of policy to deal with HIV/AIDS among the population; absence of adequate medical treatment for HIV and the possibility of resistance to available drugs; and an absence of employee assistance programmes.

The Municipality has to continue to rely on the goodwill and funding of the Provincial HIV/AIDS/STD Directorate for the continuation of the AIDS Training and Information Centre. A threat is the increase in prevalence due, in part, to the lack of reliable statistics and the non-notifiability of the disease. The drain in expertise due to the loss of key personnel is another threat, as well as loss of earnings of individuals and families.

Concerning gender, youth, children and disabled, the Municipality does not presently have a department that deals with the broad social issues in the community and there is no integrated municipal approach in respect of gender, youth, children and disabled. There are staff shortages for delivery of services in the whole Buffalo City area and a lack of financial funding.

4.2.2 STRENGTHS AND OPPORTUNITIES

Concerning Local Agenda 21, there is international, national and local legal and regulatory support for the establishment of LA 21 Programmes. The government is committed and there are good opportunities to receive NGO support.

With regard to HIV/AIDS, Buffalo City has staff trained in AIDS awareness and counselling, and there are at present strong partnerships with local NGO's and CBO's, a well-developed community outreach programme of education, training, and counselling, as well as links with provincial and national HIV/AIDS/STD programmes.

Opportunities for the future lie in the training of officials and councillors in the development and implementation of a Local Government response to HIV/AIDS; and in the establishment of an integrated programme for each department in the Municipality.

When it comes to the issues of gender, youth, children and disabled, Buffalo City is benefiting from the involvement of non-profit organisations. The Municipality has a competent Child Care Section.

In the future, it is possible to further develop the partnerships with non-profit organisations. It is moreover important to extend the Child Care Section services to the whole Buffalo City area.