

### 3. Cross-Cutting Issues

Cross cutting issues refer to those issues, which require a multi-sectoral response and thus need to be considered by all clusters.

BCM is currently undertaking a process of “mainstreaming” cross-cutting issues, through supporting the different directorates to consider and take account of these issues.

The issues discussed in this section include:

- HIV/AIDS
- Local Agenda 21
- Poverty
- Gender
- Disability
- Older Persons
- Youth & Children

#### 3.1 HIV and AIDS

BCM has developed a **HIV/AIDS Cross-Cutting Strategy**. This document will be reviewed in the second quarter of 2008.

The HIV and AIDS epidemic in South Africa is one of the most severe in the world. There are currently approximately 6 million people living with HIV/AIDS in Southern Africa. The 2006 HIV antenatal prevalence rate for the Eastern Cape was estimated to be the same as the National HIV prevalence rate of 29% with the general population HIV prevalence escalating from 12.7% in 2004 to 16,7% in 2006.

HIV and AIDS is a large and growing threat to BCM's ability to be a productive, inclusive, sustainable and well-governed city. HIV and AIDS is considered to be a strategic priority because of its potential to undermine development and exacerbate poverty. Major concerns are:

- between 1998 and 2008, average life expectancy is expected to fall from about 60 years to 40 years;
- In 2005 it was estimated that there was nearly a million children under 15 years of age who have lost their mothers to Aids;
- the South African Bureau for Economic Research has estimated that by 2015, the labour force in South Africa will decrease by 21% due to HIV/AIDS.

In addition, service delivery to and the ensuing income generation from households infected and affected by HIV and AIDS becomes a challenge during the course of the disease. During the early phases of the disease, the municipality may experience little or no disruption. However, during severe and final illness, consequences can be serious. For example, as the illness progresses, the infected individual/ breadwinner will be unable to work and will require a high level of care. The income earning capacity for the household will decrease and expenses will increase. Rents and loans will fall behind and tenants will risk losing their homes and assets. As child-headed households become more prevalent, the extended family may consist of non-economically viable relatives and orphans. Households' heads may die without a will before or after moving into their government subsidized home, which may open the door for unscrupulous relatives to appropriate the household's asset base.

In 2004, BCM undertook an Employee HIV Prevalence Study. This study was repeated in February 2007. The 2004 study results showed that the BCM HIV

prevalence was at 10.3%. In 2007 BCM Employee Prevalence rate was 9.6%. Results of the Economic Impact Study show that the cost to BCM, per employee lost to HIV and AIDS, averages two years' salary (1-2% of labour costs). Thus, both the prevention and treatment of HIV and AIDS are profitable investments for BCM. An aggressive strategy combining education, Voluntary Counselling and Testing (VCT), improved care, and treatment with anti-retroviral therapy (ART) is financially justified. BCM has embarked on a wellness programme which includes a workplace peer education programme and private-public partnership with Siyakhana, a Daimler Chrysler Chamber Health Trust initiative. BCM has also played a role in the development of a Local Government Workplace Toolkit by the Department of Provincial and Local Government (DPLG), which includes a DVD of BCM's response to HIV in the workplace.

BCM recognises that if left unaddressed, the epidemic threatens not only the health and welfare of BCM's citizens, but will ultimately impede the ability of the municipality to reach national development goals and to remain a sustainable entity. The Strategy attempts to respond to the epidemic through embedding HIV and AIDS responses into all BCM's operations as a service provider (external) and as an employer (internal).

### **3.2 Local Agenda 21**

Local 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.

There is international, national and local legal and regulatory support for the establishment of Local Agenda 21 (LA 21) Programmes.

Local Agenda 21 requires a multi-disciplinary approach. The Integrated Environmental & Sustainable Development Unit has overall strategic responsibility for LA 21 and plays an important role as the facilitator and co-ordinator of the LA 21 programme.

### **3.3 Poverty Alleviation**

The high levels of poverty are apparent in the statistics from Census 2001 where approximately 70% of households have an income of less than R1500 per month (the household subsistence level) and 28% of all households have R0 income. Of even greater concern is that these R0 income households have more than doubled since Census 1996, when 14% of the households in BCM had R0 income.

Poverty alleviation is a central issue for BCM and is addressed, within the available resources, through various IDP programmes and projects. Examples of these include BCM's LED programme, the provision of free basic services to qualifying households and the Mdantsane Urban Renewal Programme.

### **3.4 Gender Equity**

Gender inequalities exist in the social, economic, physical and institutional environment of Buffalo City.

The negative impact of these inequalities are chiefly borne by women:

- women constitute 53% of the population (Census 2001), yet there is poor representation of women in community structures;
- violence against women;
- women are more vulnerable to HIV/AIDS;
- women are generally poorer with less access to resources.

BCM has commissioned and launched a gender policy and strategy in 2007 which aims to promote the protection, development and attainment of gender equality both within the municipality and within the community.

It is significant that 59.2% of women in Amathole District are unemployed, compared to 55.9% male. This is higher than the provincial average of 57.8% and 51.4% for women and men in the Eastern Cape, respectively. Thus, women in BCM, similar to women in the Eastern Cape and South Africa are faced with various challenges relating to being unemployed.

In the Municipality, women account for 40% of the Mayoral Executive Committee. Both the Executive Mayor and the Speaker are women. In terms of employment equity, BCM has put in place an employment equity plan with monitoring indicators that are gender disaggregated. They show that women comprise 28% of the total staff of the directorates. The higher representation of women, approximately 32.45% is found in semi-skilled and discretionary decision-making levels.

Within BCM, several initiatives have been undertaken related to gender. For instance, BCM has undertaken a 10% target for awarding preferential procurement contracts to companies in which women specifically have a major share.. A sexual harassment policy is in place and sexual harassment is taken seriously by the Municipality.

The election of ward committees, undertaken in 2006, focused on ensuring equal representation of women. Currently, just below 50% of the members of ward committees in BCM are women. The Employment Equity Plan sets a target of 33% of women in senior management and 29% in top management. The Plan also notes the need to explore the establishment of a child-care facility

### **3.5 Children & Youth**

According to Census 2001, approximately 64% of Buffalo City's population can be categorised as either children 26% (0-14 yrs) or youth 38% (15-34 yrs). This group is the most vulnerable and is greatly affected by the social ills ravaging our society.

Many children in BCM 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 some day-care centres, especially in disadvantaged areas, is poor.

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

BCM has, in conjunction with UNICEF, developed a Youth Development Strategy and during 2006 commissioned a Youth At Risk Study with the University of Fort Hare. A Youth Summit to be held in the last quarter of 2007 will develop plans of action to address ways of involving young people in development programmes. A successful partnership with the Umsobomvu Youth Fund has been initiated with the development

of three Youth Advisory Centres being opened in KWT, Gompo and Mdantsane. These centres offer information to youth on career guidance and entrepreneurial opportunities.

Further initiatives include the establishment of the 45 Youth Forums in 2004 and the over-arching Buffalo City Youth Forum in June 2007.

### 3.6 People Living with Disabilities

According to Census 2001, approximately 5% of Buffalo City’s population are living with disabilities. The table below details the findings of the Census.

**Table B.10: People Living with Disabilities within Buffalo City (Census 2001)**

Sight	Hearing	Communication	Physical	Intellectual	Emotional	Multiple	Shape
1.03%	0.5%	0.15%	1.44%	0.5%	0.77%	0.45%	0.15%

There is a lack of sensitivity to the needs of those living with disabilities, for example:

- o there is a lack of care facilities for persons living with disabilities, especially children;
- o access to public buildings and education facilities is limited, as is the general access in streets.

BCM requires that all new public premises include suitable toilets, ramps and parking. In addition, the Municipality strives to provide suitable pavement access for the disabled with all new developments as well as in revamped properties.

During 2007 the BCM has commissioned and Council approved a Disabled Persons Policy and Strategy was adopted, which aims to promote the protection, development and attainment of disabled persons’ equality both within the municipality and within the community. BCM through a partnership with the Centre for Municipal Research and Advice has launched a project to provide greater access of persons with disabilities to information, education, training and services related to HIV and AIDS.

### 3.7 Older Persons

Approximately 8% of Buffalo City’s population is 60 years and older (Census 2001). There is, in general, a lack of sensitivity and awareness of the needs of older persons. BCM aims to monitor the development and implementation of its policies so as to, where appropriate, support sensitivity to the needs of older persons. The Executive Mayor annually hosts a Christmas Party for the BCM elderly community.