CARE’s Fields of Service:
- Psycho-Social Counselling
- Home Based Care
- Poverty Alleviation
- Defaulters Tracing
- Training & Capacity Building
- Nutrition
- Youth Education Programmes

Inside this issue:
- Staff Awards
- Minenhle’s Story
- CARE in the Jo’burg Prisons
- “CARE” Poetry
- 2009 AIDS Conference
- Walk the Talk
- Spin the Bottle

CARE in Action

Impacting the Lives of Children

In the world of community based NGOs, an organisation like Community AIDS Response (CARE), providing frontline service in the prevention and treatment of HIV, is continually met with the challenge of re-evaluating itself in order to remain relevant and effective. The next frontier of service that CARE has identified within its purview for programme building is orphans and vulnerable children (OVC). With statistics quickly approaching 2 million, South Africa is home to more recorded children orphaned by AIDS than any other country in the world. The need is urgent and extensive.

For over 2 years, CARE has provided services for adults in the community surrounding the Thabo Mbeki informal settlement. Recently, Pastor Zwelile, leader of a local church, informed CARE staff members about an estimated 300 children living in the settlement who had lost parents. He shared that the children were being cared for by family and community members struggling to provide for them.

As a result of a donation coordinated by CARE supporter Bart Cox, made by several Dutch students and supplemented by Unitrans, on 23 May 2009, CARE organised its first event geared towards meeting the needs of OVCs. Over 100 children gathered and were given food parcels and school uniforms in an effort to contribute towards the educational needs of the children.

The CARE team visited again on June 20th to provide the children with a celebration in honour of Youth Day unlike any they had ever experienced. Hugs, smiles and squeals of excitement were shared as children enjoyed hot dogs, face painting, dancing and a jumping castle. “It was wonderful to see the kids happy and smiling. I felt so attached to them and their joy. Your heart gets involved!” reflected Lerato Molobesti, a member of the CARE team.

In the coming year, CARE plans to seek partners willing to take part in this new endeavour. Our vision is to establish a long term, sustainable effort to impact the lives of children through increased access to educational opportunities, medical care, and social welfare resources. Together we can change the future for the youngest of those whose lives have been affected by HIV/AIDS.

Words from the Executive Director

As September draws near, It is almost the end of another year at CARE. We have decided to launch a newsletter as a means to inform, update and reach out to many of our current and would-be friends, partners and donors.

Looking back on everything we have experienced during the year, CARE’s decision drivers have continued to be People, Cost, Reliability and Consistency. Our people continue to be our most valued asset, whether in our backrooms, board room or on the frontline. Provision of care and support services would not have been possible without all of our passionate men and women who daily stand to serve those in need. Above all, we salute the men and women who daily pluck up courage to come through the doors of the health facilities from which we provide our services and those that open their homes for us to support them in their day to day needs.

The work done by CARE would not be possible without the collaboration and partnership of those that provide us with the funding, moral support and in-kind gifts that daily translate to the caring touch that allows our clients the strength to face each and every passing day.

We salute you all.
Keith Muloongo
Executive Director, CARE
For the dedicated team at Community AIDS Response, those who stand out are the staff members who not only consistently display the highest levels of professionalism, but also approach clients with sensitivity, dignity and exceptional hearts of service. In July, 16 members of CARe’s staff were recognised for their outstanding job performances throughout the first half of 2009.

The following counsellors were commended for the consistent compassion and dedication exhibited in their work: Philisiwe Mageza, Leatile Makgamatho, Cynthia Ngidi, Johannah Manamela, Vuyani Sizani, and Linda Gumbi.

Four Community Adherence Support Project fieldworkers were acknowledged for going the extra mile to reach out to clients and encouraging them to return to antiretroviral treatment: Zanele Ngwenya, Cyla Nkoana, Nokuthula Khambule and Mapule Mokae.

The caregivers who make up the team from Home Based Care are confronted daily with the harsh realities of AIDS, and serve the gravely ill with love and empathy. The following caregivers carried out their responsibilities with excellence: Potie Ntini, Nefefe Tshifhiwa, Daniel Fengu, and Sister Mampa.

It is the exceptional support staff who facilitate the work done by the teams involved in direct care. Edwin Ramasika and Lerato Molobezi were recognised for going the extra mile to put forth their very best efforts to advance the mission and vision of CARe.

We applaud the long hours and tireless dedication demonstrated by all recognised staff members and extend an enormous “thank you!” to each one!

CARe Moves Into “Sun City”

In the early months of 2009, Community AIDS Response was approached by a social worker affiliated with Johannesburg Central Prison, commonly known as “Sun City.” He expressed that there were unmet needs surrounding the issue of HIV/AIDS among inmates. After meeting with prison staff to gain a clearer understanding of exactly which services were needed, CARe selected two counsellors, Christopher Ndlouv and Sarah Magagula, to spearhead CARe’s expansion in this new direction.

In 2006, Johannesburg Central Prison was licensed as one of the first South African prisons able to distribute antiretroviral medication to inmates from its own clinic. Recent estimates placed the number of prisoners receiving on-site ARVs at over 500. In accordance with a signed memorandum of understanding, CARe will provide counselling, palliative services and HIV training to this vulnerable and high-risk population. Such a significant move for the organisation poses unique challenges along with enormous growth potential into new fields of service for Community AIDS Response.
I heard the rumours
Say there is an institution
The home of everyone
CARe, you try your best
For one future, one nation
Our future counsellors
Our health leaders of tomorrow

I remember one day when I detect that
I've got HIV & AIDS
I started to remember the word “care”
The place called CARe
There was no one who cared for me
Because I've got 3 & 4 letters
That was my number plate
Every second, minute, hour, day

Week, month, year & every time
I regret and say “Why me?”
Who will care for me?

But CARe you're here for me
I was lonely
Worms were running in my mind
Swimming in my soul
Digging deep in my heart
But there is a place called home, a

CARe, you have the memorandum of
the world
People have many questions
Who will take care of us?
Our people had sold us to death
But you buy us to birth
To the new creation

2009 South African AIDS Conference

At the 2009 South African AIDS Con-
ference, held in Durban during the
month of April, Community AIDS Re-
ponse was given the opportunity to
present research findings that had been
more than a year in the making. If one
were to go by annual statistical reports,
it would appear as though HIV testing
rates have improved dramatically in
South Africa, with more people willing
to be tested each year. CARe staff
members Ringson Ngozo and Ndumiso
Tshuma hypothesized that a significant
number of those receiving HIV tests
were instead “repeat testers” who had in
fact been counted more than once in
nationally published statistical reports.
From February to April of 2008 a ran-
domized sample of 2443 VCT client
questionnaires, taken from the 5752
HIV tests given during that period at
Esselen Clinic in Hillbrow, were ana-
lyzed to ascertain what percentage of
clients were coming for repeated test-
ing. CARe’s researchers found that, of
those sampled, 40.3% of clients were
repeat testers. Of those tested more
than once, 51.8% had in fact returned
for testing 3 times or more.

Though the results are discouraging in
the sense that HIV testing statistics do
not necessarily reflect an increasing
number of people willing to be tested,
the information discovered is of critical
importance. International organisations
addressing HIV/AIDS have approached
CARe for the purpose of including
similar material in their own research.
It is our hope that the information
 gained may be used to improve aware-
ness campaigns within South Africa and
abroad.

CARe Staff “Walks the Talk”

It has become something of an annual
tradition for members of the CARe
team to take part in Johannesburg’s
yearly “702 Walk the Talk” event. The
morning of 26 July 2009 found 61 staff
members from all departments of Com-
munity AIDS Response taking part as an
endeavour to show team unity. Par-
cipating in the 8km walk departing from
the Marks Park Sports Club and winding
through Emmarentia, the delegation
from CARe joined an estimated 50,000
entrants, making the event the largest
of its kind in Africa. “I have done it for
2 years now, and enjoy taking part with
other NGOs and with some of CARe’s
donors. The road is never lonely!” said
Mmathabo Rangoshe, Counselling Ser-
vices Manager.

Providing an opportunity for members
of the community to come together
with local non-profit organisations,
CARe hopes that you’ll join us in 2010!
All learners, grades 5-12, who were interviewed were either aware of the game or had played it before was indicative of just how common this updated version of Spin the Bottle has become.

When describing the game, learners explained that they sit in a circle with one person in the middle who “spins the bottle”. When the bottle comes to a halt, the boy and girl the bottle points to will kiss, but if they choose to take the game further, they instead go into one of the vacant classes to engage in unprotected sex. Though played when teachers were not in their classrooms, learners admitted that they had taken part in the “kissing only” version of the game with teachers present while on school camps.

Upon hearing this information, we wanted to find out the learners’ level of understanding regarding STIs. Most had little or no knowledge of STIs other than HIV. Even with basic knowledge of HIV, the teens expressed that they did not feel that they were at risk because of their young age and the fact that most of their friends had not participated in sex with people outside of their immediate age group. The only concern admitted to by the students was a fear of pregnancy among the girls. The boys interviewed insisted that their participation in sexualized games presented no risk whatsoever.

It is disconcerting to hear that such high risk behaviour is taking place in schools where we expect our children to be supervised and protected. It is the responsibility of every South African to take part in making our youth aware of the risks and responsibilities that sexuality carries with it, particularly in a country where roughly 300,000 children under the age of 14 are living with HIV.