

**REMARKS BY THE DEPUTY MINISTER OF HEALTH, DR SIBONGISENI
DHLOMO ON THE OCCASION OF THE LAUNCH OF THE NATIONAL YOUTH
HIV PREVENTION STRATEGY, AT MDAVULA STADIUM, COLLINS CHABANE
LOCAL MUNICIPALITY, LIMPOPO PROVINCE**

Programme Directors,

Minister Nkoana-Mashabane,

Deputy Ministers Reginah Mhaule and Nocawe Mafu,

MECs present,

Hosi Chauke of Mdavula village, Ndabezitha,

SANAC Co-Chair, Ms. Steve Letsike,

UNAIDS Country Director, Ms Eva Kiwango,

SANAC CEO, Dr. Thembisile Xulu,

Development Partners,

Youth Leaders and all young people present,

The leadership of the Vhembe District and Collins Chabane
Municipalities,

Members of the media,

Esteemed guests, ladies and gentlemen,

Good morning!

Young people, particularly Adolescent Girls and Young Women between the ages of 15 and 24 remain disproportionately affected by HIV, with rates of 1300 new infections per week. These persistent high rates of HIV transmission are particularly rife among young, black women. Add to this the high rates of unintended and unsupported pregnancies that sometimes lead to unsafe abortions, the spread of sexually transmitted infections, substance abuse and gender-based violence.

These are major challenges not only for the health and education sectors but for the future prospects of the country as a whole. They further undermine the agency of young people and compromise their well-being and socio-economic growth.

HIV data emanating from the review of the previous National Strategic Plan for 2012 to 2016 indicated that a third of all new HIV infections occurred amongst the youth. In response, President Ramaphosa, who was then the Chairperson of SANAC, called for a collective response to curb the spread of HIV among the youth, particularly adolescent girls and young women. This gave rise to the launch of the three-year national campaign known as “She Conquers” on 24 June 2016. The Campaign was a direct response to the alarming rates of HIV infection, school drop-outs, teenage pregnancy, illegal abortions, gender-based violence, substance abuse and the lack of economic opportunities for girls, especially the black girl child.

Although infection rates among adolescent girls and young women have come slightly down, they are nowhere near the optimum bar. On the other hand, new HIV infection rates have been steadily increasing a couple of years now.

Therefore, HIV prevention among the youth in their diversity remain a priority to us as SANAC and as government. We will not realise our goal

of ending AIDS by 2030 if we do not proactively address HIV infection challenges among the youth.

They account for a large proportion of the general population.

- In 2020, the total number of young people between the ages of 15 and 24 was 9,57 million.
- 3,6 million of them were at school and doing grades 9 to 12.
- About 1,7 million were in tertiary institutions and,
- A whopping 3,2 million were not in education, employment or training (NEET). This number remains a concern to us as government.

In South Africa, youth programmes and initiatives play a vital role in providing access to and accelerating uptake of comprehensive healthcare and prevention services. However, the mid-term review of the current National Strategic Plan for HIV, TB, STIs 2017-2022 (NSP) indicates a very limited number of existing interventions targeting adolescent boys and young men (ABYM) in their diversity. With an exception to hugely successful Voluntary Medical Male Circumcision programme (VMMC), there is a wide service gap in the provision of ABYM focused HIV care, prevention, and treatment.

Several lessons have been drawn from various studies, evaluations and assessments of current programmes targeting predominantly AGYW. The outcomes of these is unanimous in identifying the need for integrated programming to address the needs of adolescents and young

people in their diversity, including adolescent boys and young men, alongside adolescent girls and young women.

The “She Conquers” Assessment urged a transition in thinking from focusing on Adolescent Girls and Young Women only, to youth in all their diversity. Similarly, The Zimele Project Appraisal 2016-2019 of the Global Fund-supported “cash plus care” Randomized Control Trial, concluded that young men and boys cannot be left out of programmes that aim to achieve HIV prevention and improved sexual and reproductive outcomes among young women and girls.

The learnings from all these initiatives call for deliberate youth-led approaches in the development, coordination and operationalization of key youth interventions, to ensure that adolescent boys and young men, youth with disabilities and youth living with HIV are not left behind and, future strategies are multi-sectoral in nature and have a deliberate role for each stakeholder.

Working hand-in-hand with the youth, we are here to take an imperative step towards ensuring that young people in their diversity are seen and heard when it comes to their HIV prevention, sexual and reproductive health and socio-economic needs.

Our steps have been guided by the priorities stipulated in the National Development Plan 2030, the National Adolescent and Youth Health Policy, the current National Strategic Plan for HIV, TB and STIs 2017 –

2022, the National Youth Development Policy and very robust youth-led consultative processes coordinated by SANAC.

The learnings and recommendations from the various strategies and consultations have resulted into intensified efforts and a deliberate youth-led process for the development of a revitalized and optimised youth prevention strategy.

The three-year National Youth HIV Prevention Strategy (2022-2025) rests on the integration of critical health and social services; youth development programmes; social & behaviour change communication and, improved access to quality health products and services.

The key purpose of the strategy is to raise awareness about HIV, TB, STIs, Sexual and Reproductive Health and other key issues pertinent to the wellbeing of young people. It also seeks to encourage health seeking behaviour through the utilization of health and social services, reinforce knowledge and benefits of behavioural change and prompt an action.

Guided by the leadership of young people, the strategy is named “**Zikhala Kanjani?**” which utilises and embraces the informal colloquial language of young people. The Nguni term loosely asks the question, how is something happening without a particular act or process having taken place.

We hope that, by using the youth lexicon, chosen by them, we will be able to reach the youth in their diversity with key HIV and SRH messaging, in a language that truly resonates with them.

For example, to communicate various messages, the term Zikhala Kanjani can be used as follows:

- **Zikhala Kanjani without a condom?** *To encourage condom use*
- **Zikhala Kanjani without testing for HIV?** *To encourage HIV testing*
- **Zikhala Kanjani ungawaphuzi amaphilisi?** *To encourage treatment adherence*
- **Zikhala Kanjani unga vaccinate-ile?** *To encourage COVID-19 vaccination*
- **Zikhala Kanjani ungekho grand?** *To encourage mental health.*

Given its unique coordinating role, the strategy development was coordinated by SANAC through a consultative multisectoral process to ensure that it is inclusive, targeted and nuanced. To also ensure that, each one of us find expression in the objectives of the campaign and remain accountable for the role we have to play in the various spaces we occupy.

We had to ensure that the strategy is launched during youth month in celebration of the spirited youth of South Africa who continue to be inspired by the youth of 1974.

As government we remain committed to improve the lives of young people as they remain paramount to progress and development of our

country. We are working hard to increase economic opportunities in response to the high unemployment rate. Poverty and unemployment are cited as one of the key social and structural drivers of HIV infections in Goal 4 of the current National Strategic Plan.

We invite all partners, stakeholders and indeed young people themselves, to join hands with government to ensure a successful implementation of this campaign.

We call on agencies such as the National Youth Development Agency to scale up their interventions to improve the lives of young people.

We call onto the Departments of Basic and Higher Education to ensure that we keep young people in schools and collaborate with the Department of Health and other key implementing partners to ensure that young people have access to sexual and reproductive services.

We call on the Department of Social Development to scale up their interventions for young people, especially for drug prevention and rehabilitation programmes, continue to foster dialogue and social behaviour change through programmes like YOLO (You Only Live Once) and Boys Championing Change.

Everyone has a role to play and we must all be counted in the effort.

This campaign should be an opportunity for us to demonstrate our support and adoption of youth-led, youth-centred and youth-informed approaches. This will strengthen meaningful involvement and participation of young people for continuity, custodianship and sustainability of programmes for young people.

Let the campaign serve as a guiding framework that does not seek to reinvent wheel but to integrate scale up on existing interventions and accelerate reach and impact.

SANAC is currently coordinating the development of the new National Strategic Plan for HIV, TB and STIs for the period 2023 to 2028. Provinces and Districts will follow suit with their Provincial and District Implementation Plans. We urge everyone to ensure that this strategy is integrated into all those Plans.

Zikhala Kanjani?

I thank you.