

HILLCREST AIDS



CENTRE TRUST

ANNUAL REPORT

APRIL 2014 - MARCH 2015

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WHO WE ARE

“HACT is quality, HACT is commitment, HACT is a way towards a fundamental better position in life for thousands of people who are impacted by, or live with, HIV and AIDS. HACT has an impressive output but an even more impressive outcome of her work. HACT’s work makes a real difference in the lives of people,” - Aad van der Meer – Meer Mens, the Netherlands.

THE Hillcrest AIDS Centre Trust (HACT) is a non-profit organisation providing unconditional love and hope to HIV/AIDS impacted communities in the Valley of 1000 Hills region of KwaZulu-Natal, South Africa.

All our projects, which include prevention, care, community outreach and income generation, work towards our vision of an AIDS free Valley of 1000 Hills.

HACT was founded in 1990 out of the ministry of the Hillcrest Methodist Church. Over the past 25 years we have grown and adapted, along with the needs of the people we serve, continuously evolving in response to

the HIV/AIDS pandemic.

Situated in the accessible and central town of Hillcrest, the Centre serves several poverty-torn and previously disadvantaged communities, with estimated HIV-infection rates of up to 40-60%.

Along with high HIV infection rates, the Valley of 1000 Hills region has high rates of unemployment, teenage pregnancy, drug and alcohol abuse, crime, and a high percentage of school dropouts.

HACT is the only organisation in the region providing palliative care to impoverished people, and specifically

to people with end-stage AIDS. We are also the only organisation in the area to address the HIV/AIDS pandemic specifically. Through the integration of our various projects we are not only able to change lives for the better, but offer a second chance at life as well.

Our organisational values are:

PASSION:

to serve with passion, energy and commitment, always acknowledging the privilege it is to be helping others.

FAITH:

seeking to do as Jesus would do: “A new command I give you: Love one another. As I have loved you, so you must love one another. By this everyone will know that you are my disciples, if you love one another.” NIV John 13: 34-35.

INTEGRITY:

the message and the messenger must be the same, we must practice what we preach and be honest in all things.

UBUNTU:

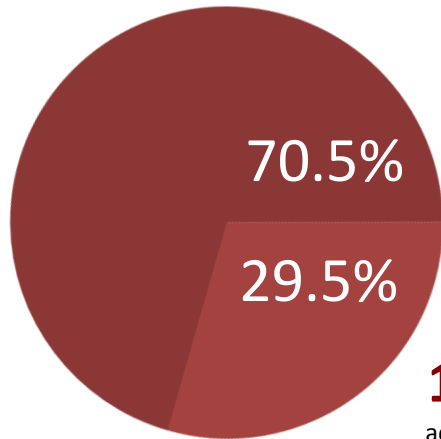
‘I am because you are’ – being community driven and constantly aware that our actions impact on those around us and that the sum is always better than the parts.

EMPOWERMENT:

helping people to take ownership over their lives.



OUR IMPACT THIS YEAR



were discharged
passed away with dignity
and respect

189 patients
admitted to the Respite Unit

1064

primary School children across
five schools enrolled in the
Life Skills programme

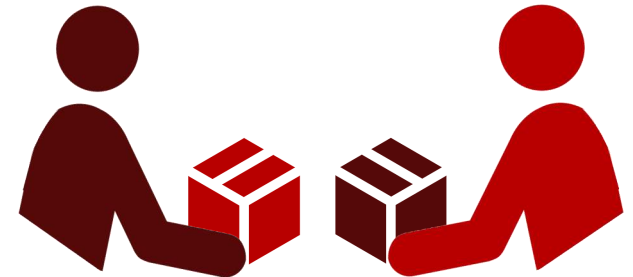


80

Peer Educators trained
within eight high schools

40 families

received food parcels every two weeks



7626 HIV tests conducted



20 Home-Based Carers provided love and care to **600**
HIV positive clients in their homes



10 Home-Based Carers provided love and care to more
than **420** orphaned and vulnerable children

More than **350 crafters**

received an income from
producing beautiful arts and
crafts for the Woza Moya store

20 women were
empowered by selling
donated clothing

Over **2000**

grandmothers

participated in one of our 46
Granny Support Groups

THANDI MAKES GREAT STRIDES TO RECOVERY

ONE of the many stories from our Respite Unit which stands out over the past year is that of Thandi (name changed). Thandi is a lively grandmother with one son, and a granddaughter. Originally trained as a pastry chef, she was diagnosed with HIV at the beginning of 2013.

Once diagnosed, Thandi battled for months on her own with the illness, unaware that she had subsequently contracted Tuberculosis (TB). Eventually, she defaulted on her ARV medication because she was too weak to get to a doctor for a repeat script.

Finally, emergency admission to hospital revealed a very high viral load (measure of the strength of the virus in her system) and very low CD4 cell count (measure of the strength of the immune system). She also had a severe cough.

Treatment for TB followed and Thandi was later discharged. Despite the TB medication, her condition deteriorated further. Six months after testing positive for HIV, Thandi lost her ability to walk or go to the toilet by herself. She desperately needed help.

Thandi heard about HACT through a relative, and was admitted weighing just 43kg and immobile – the TB had affected her spine. Before she was admitted to the Respite Unit, she was told by doctors at the hospital that she wouldn't walk again.

In the Unit, Thandi was given a chance to rest and recover and was put back on ARV medication. She regained her appetite and started to put on weight.

"Over the next few months, with the help of physiotherapists and wonderful carers, I started to regain feeling in my limbs, and slowly, slowly, I was able to move my legs. The healthy, fresh food also helped me get stronger".

Gradually, Thandi managed to climb out of bed and into a wheelchair by herself. Soon she was able to walk around the gardens using crutches, and then she learnt to walk a few meters unaided.

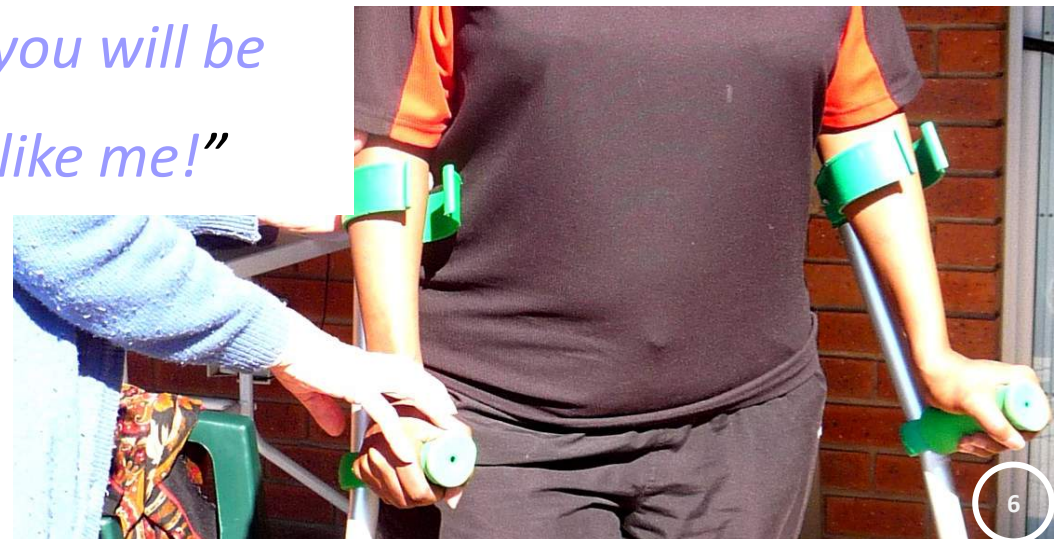
Thandi said, "I have learnt through all this that it is vital to check your HIV status early by getting tested, and if diagnosed positive, to take the medication. By doing this, you are much less likely to experience the kind of complications I had. Thankfully, I was given the right help and medication just in time; otherwise there would have been a bad ending to this story."

"The Unit is amazing! I say thanks to God for giving me this place. I say to people, if you take your medication and stay positive, you will be smiling like me!"

Thandi emphasises the importance of staying positive, eating healthily and having faith. She is very grateful for the time she spent in the Respite Unit which not only helped her recover physically, but also helped her stay positive and look forward to the future again.

"The Unit is amazing! I say thanks to God for giving me this place. I say to people, if you take your medication and stay positive, you will be smiling like me!"

Thandi was discharged after spending just over a year in the Unit and is now at home with her family.



VIEW FROM THE BOARD

“He stilled the storm to a whisper; the waves of the sea were hushed.” - Psalm 107:29

STEADY she goes. The Hillcrest AIDS Centre Trust continues on its chosen path of making a difference to those who have been infected by HIV, and to families whose loved ones may be HIV positive.

The angels in heaven must be rejoicing at the work done by the Trust. Despite numerous challenges and obstacles experienced by the Trust as an organisation and by several of the Trust's staff, I believe it can honestly be said that, "It is well with my soul".

This report will go into more detail concerning the challenges in sourcing the income required to run the organisation, but suffice to say that the income gaps are

being filled with new vessels. The income horizon is still not clear however, and much work and prayer will be needed.

Olivia and her staff continue to walk in faith trusting that God will provide since we believe that this is a ministry not created by man, but inspired and led by God.

Dave Smyly has resigned as Chairman of the Board of Trustees after many years serving in the chair and has been replaced by our erstwhile CEO, Julie Hornby. We wish Dave all God's richest blessings in his new venture

and are pleased that he will remain as a member of the Board.

Julie has adopted her new role with great enthusiasm. She is steadfast in her resolve and eager to support Olivia and her staff, and guide our Board through the trials and triumphs that await us. I am excited about the future of the Centre and am anticipating great things, signs and wonders as we move boldly through to 2016.

On behalf of the Board of Trustees

Mark van den Berg



MESSAGE FROM OUR CEO

“Trust in the Lord with all your heart, and lean not on your own understanding; in all your ways submit to him, and he will make your paths straight.” - Proverbs 3:5-6 (NIV)

I RECENTLY attended the South African AIDS Conference, at which HACT was honoured with a second place *Dira Sengwe Leadership in AIDS Award*, recognising our brave response to the HIV/AIDS pandemic. We are a relatively small, but ever-growing organisation, firmly rooted in the communities we serve.

Throughout our 25 year history we have fought hard to remain true to our values, always trusting God for provision. We have quietly gone about our way, ever-focussed on our beneficiaries' interests above anything else. And somehow, through it all, what has emerged over the years is an exemplary model of a community-based, holistic response to the HIV pandemic. I could not be prouder of our team.

It has been a somewhat tumultuous year for HACT. For the first time in a long time we started to feel the pinch of the global economic crisis, as evidenced by the financial loss we have reported.

We have grown at a fairly rapid rate, not intentionally, but simply because God has opened doors and shown us needs to respond to. We now employ 116 paid staff members, and 30 unpaid volunteers - our biggest team ever, and rightly so as the needs in the communities we serve have never been greater.

This year saw some changes to our management team, with new managers coming on board in critical positions: Finance and HR Manager, Nursing Services Manager and Children's and Home Based Care Programmes Manager. We also welcomed a new Trustee – Ms Sbu

Myeni – who is a committed community member with a passion to provide educational opportunities for bright young women. Sbu has a background in corporate finance and risk management and has started her own non-profit organisation, Imbeleko Trust. We are humbled to have her on our Board of Trustees.

Through every change we put our trust in God, as this is His organisation and He brings the right people at the right times for His purposes. We have leant into this trust substantially this past year, and have grown together as a team, acknowledging that we are the clay and God is the potter. Through the fire we come out even stronger and more beautiful than before.

At this juncture I would like to humbly thank our donors and grant-givers for enabling us to be God's hands here on earth – loving those who society has often turned its back on, and providing unconditional love and hope to all impacted by HIV/AIDS. We are eternally grateful.

If you are not yet a donor but are interested in contributing to the fight against HIV/AIDS in our region, please consider supporting our Respite Unit via a monthly or annual contribution of any size – please see page 10 for details.

National HIV/AIDS statistics

- 6.5 million people living with HIV in South Africa
- 3.5 million of these on ARV medication
- 16.9% of the population of KZN HIV positive
- 36% of females aged 30-34 years in KZN are HIV positive
- 1 in 3 female teenagers have a partner more than 5 years older ('sugar daddies')
- 400,000 were newly infected with HIV in the 15 – 49 year old age group in 2012
- 62.2% of men and 45% of women who are HIV positive are not aware of their status
- KZN has the highest HIV/AIDS-related stigma in South Africa



A woman with dark hair tied back, wearing a light-colored polo shirt with a logo that says "Sponsored By 31 Club making a difference", is standing in a hospital room. She is smiling and looking down at an open book she is holding. Her right hand is resting on the shoulder of a patient lying in a hospital bed. The patient is wearing a white hospital gown. In the background, there are blue and green striped curtains, a whiteboard, and a framed picture on the wall. The room appears to be a respite unit.

“The first thing that
I noticed was the
smiling faces of the
staff and their
kindness – I felt at
home!”

- Respite unit patient

HIV CARE

ADOPT-A-BED

“David was admitted to our Respite Unit at only 18 months old, orphaned and weighing not quite 3kg, he was too weak to cry or suckle. The situation was critical but the Respite Unit care givers never gave up hope. Once fully recovered, David was discharged from the Unit. A few months later, I unexpectedly bumped into David and his adoptive mom, and was moved to tears to see this bouncing little boy,” - Respite Unit staff member.*

*name changed

LITTLE David is one of many patients cared for in our ‘Othandweni’ (place of love) Respite Unit in Hillcrest. The Unit provides care in a ‘home away from home’, where patients are given a second chance at life. It is the only such facility in our region.

The Unit is open 24 hours a day, all year-round. The majority of patients are bed-ridden due to advanced stages of AIDS and opportunistic infections such as meningitis, TB and pneumonia. It is also home to patients needing palliative care. For those who are terminally ill, they are able to pass away with dignity and respect in an environment of acceptance and love.

To fund the care for just one patient like David, we need to secure R6000 a month to cover medication, 24 hour nursing care, food, pathology, x-rays, and various running costs such as cleaning, medical equipment, property maintenance, utility bills and security.

Adopt-a-Bed initiative

So we would like to tell you about our **Adopt-a-Bed initiative** and offer you the opportunity to help contribute towards these costs – either by sponsoring a bed in full or in part by making **regular (monthly) or once-off donations**. The bed would be adopted in your name or in the names of a group of donors.

Our vision is to have all 24 beds sponsored to ensure the long-term sustainability of the Unit. We want our

patients to rest assured that they will receive the care they need well into the future.

Times are tough for non-profit organisations across the country, with many international funding streams drying up due to global recession. We are feeling this pinch, with several of our international partners pulling out or reducing their contributions due to changed geographical and/or changed thematic focus.

How you can benefit

We are a registered non-profit organisation and can provide Section 18A tax certificates and level 4 (100%) BB-BEE certificates for any donations made. In addition to mentions in our publicity materials, we can offer print and online media coverage. Furthermore, we can offer on-site staff HIV education and testing, and volunteer days to encourage staff involvement and satisfaction. There are also tax benefits for our UK, Dutch and Australian funders.

Your impact

Since 2006, the Unit has admitted 150 people annually on average and has seen the number of those discharged increase to 70% – a remarkable achievement given that most patients enter the Unit close to death’s door. The other 30% of patients come to us to find a dignified and peaceful death, surrounded by the love, care and prayers from our care-givers and nurses.

We know that our work is far from over and that we still have a long way to go in the fight against HIV/AIDS – with more than one in three people in KwaZulu-Natal HIV positive. For many, our Respite Unit is the only hope they have to receive medical care, unconditional love and support.

For those able to return to their homes and resume or rebuild their lives, we provide follow up support so your donations will have a lasting impact. It is only together that we can turn the tide on AIDS, transform lives, and turn our community into a better place.

What your donations will pay for**

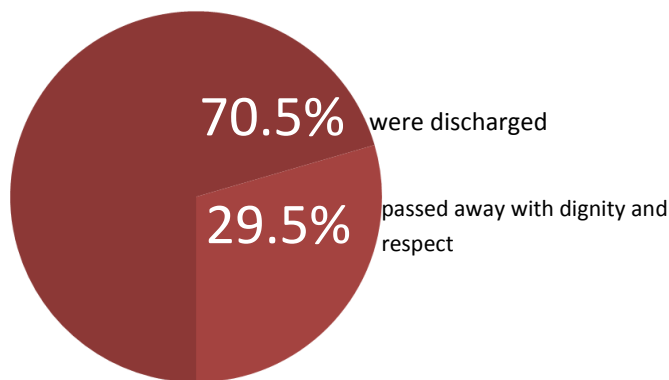
- ♦ R25—feeds one patient for a day
- ♦ R175—feeds one patient for a week
- ♦ R700—provides one patient with medication for a month
- ♦ R3, 500—covers the monthly cost of one full-time care-giver for six patients in the Unit
- ♦ R6, 000—contributes towards all costs in the Unit, including food, medication, medical waste removal, pathology, x-rays, patient transport, staffing, utility bills, property and equipment maintenance and security.

**Adopt-a-Bed is an income source for the Unit. Other sources include grants and donations (both monetary and in-kind).

A photograph of a Black woman and a Black man sitting together in a room with a brick wall. The woman, on the left, is wearing a grey short-sleeved top and has her hair in braids. She is smiling broadly, looking towards the man. The man, on the right, is wearing a white towel over his shoulders and is looking back at her. They are holding hands. A quote is overlaid on the image, and a page number is in the bottom left corner.

"At the beginning, when I looked in the mirror, I just saw bones covered in a layer of skin, but now when I look in the mirror I can see my old self again."

- Respite Unit Patient



OUR Respite Unit offers the highest quality care and unconditional love for each patient who passes through its doors. The highlights were celebrated and the lows were a test of faith and strength, making us stronger as an organisation.

We have built a firm relationship with local clinics and fortified this partnership by ensuring that clinic patients with advanced stages of AIDS and HIV-related illnesses are brought to the Unit to be cared for.

With thanks to funding from Goodwill and Growth for Africa UK (GAGA), we hired Killion Mshengu as a full-time patient advocate and driver, enabling our patients to obtain much needed disability grants.

Stigma is a silent killer

We continue to see patients who are chronic defaulters from ARV medication. In most cases, they default because they haven't accepted their status, and battle with internal and/or external stigma. Forgetting one's status is easier when not taking tablets daily. Many AIDS-related deaths can be attributed to defaulting, as an on-again/off-again approach to medication causes the virus to strengthen, making the medication less effective. In response to this, we create an environment in which HIV status is openly discussed. We also offer trauma and pastoral counselling to encourage

HIV CARE RESPITE UNIT

acceptance. Our counsellors facilitate disclosure discussions between a patient and his/her family.

Caring for Layla with Leprosy

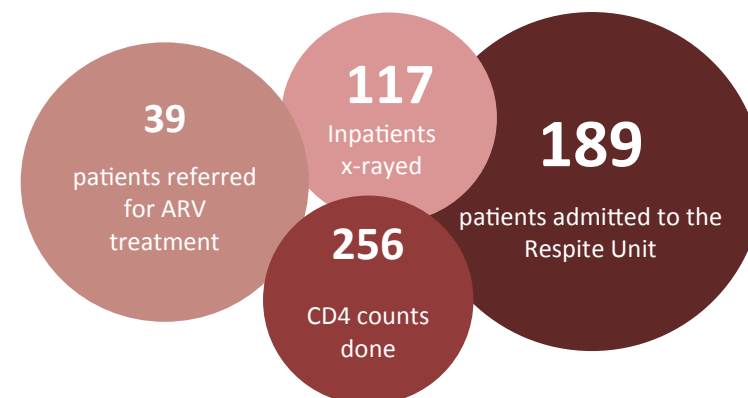
We discharged multiple long-term patients throughout the year, one of whom was an HIV positive leprosy patient named Layla (name changed). Our first ever leprosy patient in the Unit, she was admitted very ill. Layla was abandoned by her family, and the beds were full at leprosy care facilities. Our Nursing Services Manager hosted in-service training sessions about leprosy to help our carers better understand Layla's condition. Layla grew in strength and independence. After a year, her wounds healed completely. She was discharged to a specialised leprosy care centre where she will see out the rest of her days.

Grieving the loss of a little angel

In April, one of our youngest patients passed away. Phindi, aged 11, touched the hearts of many. She will be greatly missed and fondly remembered. Her loss has given us more passion and determination to fight HIV/AIDS, and to one day see an HIV-free generation.

Training nurses

We are excited that two of our staff, Rita Shange, our



Counselling and Testing Manager, and Londiwe Ngubane, Supervisor in the Respite Unit, have enrolled in their first year of nursing training. Home Based Carer (HBC) Nokuphila Khanyile has completed her first year of training; while HBC, Philisile Zondi, is in her final year. Up-skilling our staff not only benefits the Centre, it enables those who are breadwinners to support their families.

Thank you to our donors

We are grateful to HACT UK supporters, FOIL, Nurses for Nurses and GAGA UK for their sponsorship of our nursing trainings.

We send out a hearty thank you to our grant partners, the Stephen Lewis Foundation, Afrisun KZN Community Development Trust, Zulu Aid, RKSGB Foundation, Anglican Aid, Margaret Turnbull, and the Discovery Fund, Betty Lawes Foundation, US Ambassadors HIV and AIDS Community Grants, Solon Foundation, our volunteers who offer of their time freely to the patients in the Unit and to our loyal monthly and annual Adopt-A-Bed donors. Without your on-going support, the work we do would not be possible. Thank you!



*“The Hillcrest AIDS
Centre Trust shares
my values, hopes,
dreams and goals.”*

- Linda Chule, Home-Based Care and
Children’s Programme Manager

HIV CARE

HOME-BASED CARE

“Our Home Based Carers met a man who had known his HIV status for a long time yet was refusing to do a CD4 count (immune system test). One of our carers finally convinced him to come to HACT where he received counselling and checked his CD4 count. We were very glad to be able to refer him to start ARVs shortly afterwards,” - Linda Chule, the Home-Based Care and Children's Programme Manager.

WE are pleased to report that more than 600 HIV positive clients across five communities have been reached by our Home-Based Care (HBC) Programme over the past year. It has also been a year of change with new management of the programme and new developments underway.

The HBC Programme provides a range of services including counselling and mentoring, basic health care, household duties, ARV medication adherence support and disclosure support.

20 Home-Based Carers each have 30 clients in their own communities. The HBCs source the clients themselves, either from our Respite Unit discharge register, by word of mouth in their communities, or by attending HIV support groups run by local clinics.

New programme manager

The HBCs are managed by Linda Chule who joined the HACT team in January 2015 and also manages the Children's Programme. After studying Project Management, Linda took up a volunteer position at the NGO Love Life and took part in Love Life's HIV Prevention Campaign. She later took up a permanent position at the NGO. Her move to the HACT was a simple one as she desperately wanted to focus on helping the people in her local community. She described her appointment as a “blessing from God” - working with people and

making a positive difference in their lives is Linda's passion.

Linda has brought fresh and creative ideas to the programme, including the commencement of monthly team meetings for all 20 HBCs at which they share the challenges they face in the community, exchange ideas, and debrief from the heavy toll that the programme can take on them.

She has also overhauled some of the monitoring and evaluation tools used by the HBCs to ensure we capture an accurate picture of our impact through the programme.

Linda has driven a move towards ensuring patients who are admitted onto the HBC programme are those most in need – prioritising those who are most ill and weak, and are continued at home without a care-giver.

An exciting development is the commencement of discussions with our Respite Unit managers to work towards the vision that patients discharged from the Respite Unit join the HBC programme for a period of time. This will enable us to better monitor their progress and recovery. We look forward to following this development in the year ahead.

ARV medication adherence training

The Networking AIDS Community of South Africa (NACOSA), who are the funders of the HBC programme, held a two-day workshop which was attended by two HBCs.

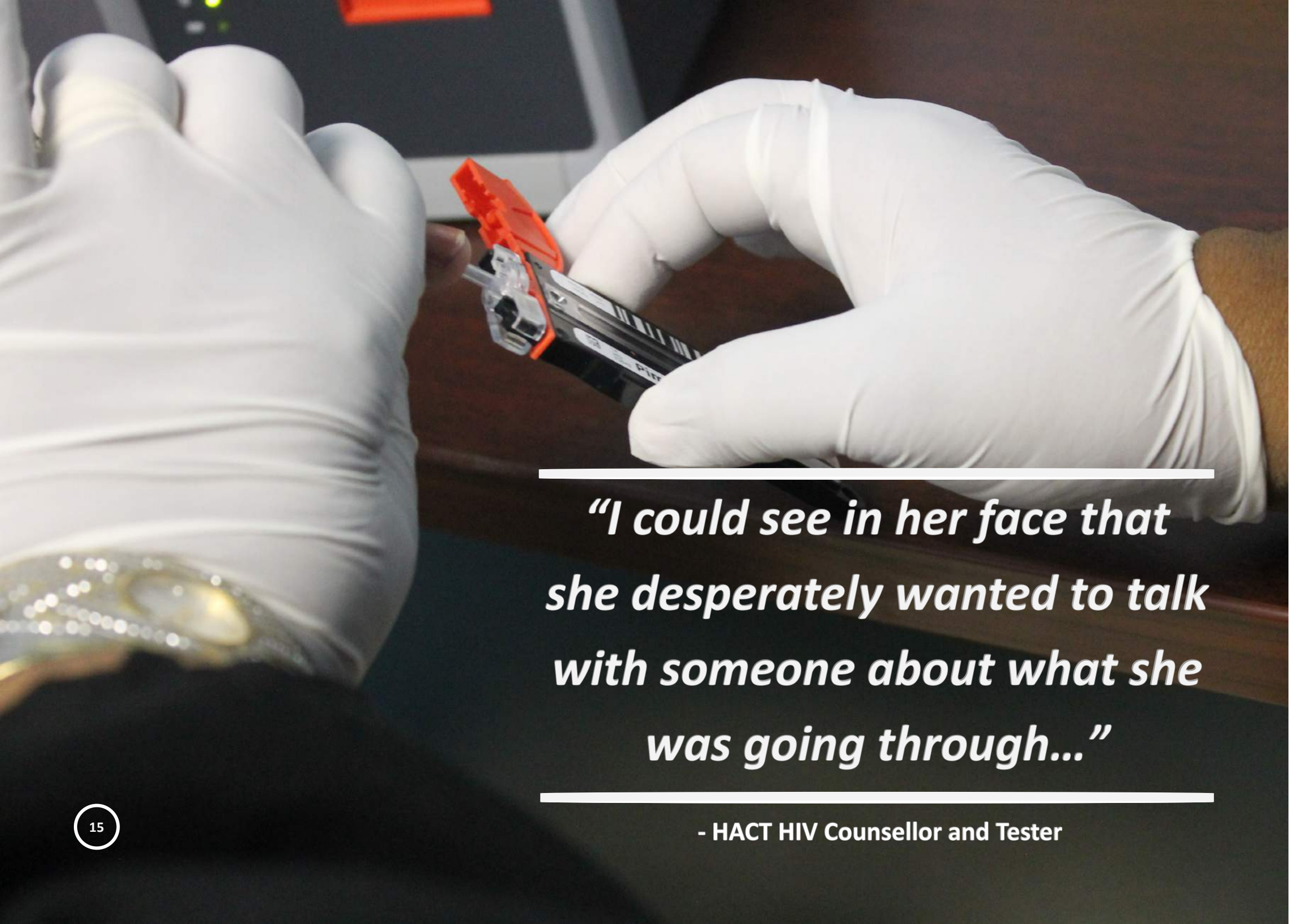
The workshop provided them with relevant information about the latest ARVs and ARV adherence developments and strategies, which were subsequently then shared with the other HBCs.

These training opportunities allow the HBCs to provide an improved level of service to their clients and the knowledge obtained can be shared more widely with staff working in HACT's Respite Unit and staff in local government clinics.

Our heartfelt thanks go to NACOSA for their continued support and funding of our Home Based Care Programme.

600 HIV
positive
clients
reached

20 Home-
Based carers
work across 5
communities



“I could see in her face that she desperately wanted to talk with someone about what she was going through...”

HIV CARE HIV COUNSELLING AND TESTING

7626

HIV tests were
conducted

88%

of the women
tested negative

30

workplace testing
campaigns took
place

90%

of the men
tested negative

89

Community Wellness
Campaigns hosted

OUR HIV Counselling and Testing (HCT) team has played a critical role this year, enabling people to know their status and combatting AIDS-related stigma. Research released at the 2015 South African National AIDS Conference suggests that close to 50% of people who are HIV positive do not yet know their status.

There is a pressing need to make testing accessible and easy. We celebrate each and every test which enables people to protect themselves from future infection if HIV negative, or start treatment to stay alive and well for years into the future if HIV positive.

Impact of HCT

Over the past year, the team of five HIV Counsellors conducted HIV tests for 7 626 people. Of the 3 896 females who were tested, 88% tested negative while 12% tested positive and of the 2 879 men who were tested, 90% tested negative while 10% tested positive.

The team aims to make HCT as accessible as possible, particularly to populations at high risk of HIV infection. To this end they have targeted taxi drivers at taxi ranks, deep rural communities, Granny Support Groups enabling grannies to bring their orphaned grandchildren for testing, as well as factories and farms. Over the year, the team conducted 89 community wellness

campaigns and 30 workplace testing campaigns.

The campaigns are hosted in conjunction with stakeholders and local organisations, clinics, schools, universities, businesses and churches, such as the Medical Research Council, Jes Foord Foundation and Durban University of Technology. An increased number of people came forward to test whilst still healthy – rather than waiting until they are sick or symptomatic.

In the largest campaign for 2014, the team worked with Chief Ngcobo in the town Loskop at a virginity testing ceremony. Hundreds of people were educated on the importance of abstinence and prevention, and the possible transmission of HIV/AIDS through childbirth. Two girls tested positive—their mothers had passed away from TB but the information about their status had been withheld from the children. Through early detection, the children were referred for ARV treatment and can now live long and happy lives.

Upgrade for counselling rooms

Thanks to the funding and manpower of Dutch volunteers on a Diaconal Church tour, our two Respite Unit counselling rooms had a complete makeover in September 2014. The group spent two weeks volunteering at HACT and several months raising funds ahead of the

trip. The Counselling team chose a calming paint scheme and new furniture for our counselling rooms.

Portable CD4 count machines

Goodwill and Growth for Africa (GAGA), one of HACT's UK funding partners, donated a portable CD4 count machine to the Counselling team this year. We now have two such machines - one for use in our counselling rooms, and one for community Wellness Campaigns.

The machines operate like HIV or blood sugar tests – a finger prick draws a small amount of blood and the machine reads the CD4 count levels within 20 minutes. This dramatically fast-tracks the testing and CD4 count process, and referral to government clinics for ARV initiation if HIV positive. It is much faster than the CD4 counts taken at government clinics - the portable machines have enabled us to quite literally save lives.

Partners and donors

We humbly thank the Solon Foundation, Zulu Aid, Networking HIV/AIDS Community of South Africa (NACOSA), and Goodwill And Growth for Africa (GAGA) UK for their continued support for our HIV Counselling and Testing department.

***“Ayanda now understands that he
is living with HIV,
and he knows the importance of
adhering to his medication...”***

- Home-Based Carer

PREVENTION CHILDREN'S PROGRAMME

"When the boys started attending the Support Group meetings, their aunt was very relieved. She asked for assistance to help her speak to Ayanda about his status. Ayanda now understands that he is living with HIV, and he knows the importance of adhering to his medication and taking good care of his body by eating well and staying active," - [HACT Home-Based Carer \(HBC\)](#).

THIS past year has seen many highlights in the Children's Programme, as well as challenges which come with the territory of community development projects.

We welcomed Linda Chule to the team in January as the new Programme Manager, and we are excited about her passion, enthusiasm, and plans for improving the programme. We have continued to provide support to more than 420 orphaned or vulnerable children across five communities in the Valley of 1000 Hills, while impacting almost 1900 people in the children's extended families and wider community. The programme is operated by ten community-based carers who conduct weekly support groups, and visit the homes and schools of each child on a regular basis.

Circles of support

A new initiative, called Circles of Support, kicked off early in the year with family representatives from 30 of the children attending meetings over the course of three months to discuss their challenges and to seek coping strategies. This was a pilot project implemented at three of our five community sites and, pending its impact, could be rolled out to all five community sites in future years. During the Circles of Support meetings, the families source valuable knowledge from the HBCs, and share their stories and ideas on raising children and coping with life in the community. The project acknowledges the fact that if HACT is aiming to assist

orphaned and vulnerable children, we need to work with the care-givers of the children too.

Support group nursery garden project

Throughout the year we organised stimulating activities and events packed with fun for the children to get involved in. We also embarked on a wonderful project, in partnership with our Horticulture Team, to enable the children from the Mlambo Support Group to create their own food garden. In this way, the children can learn gardening skills and grow nutritious food.

Sports days

A series of sports days were held over two weeks in May, to highlight the importance of sport and physical activity for children's health and well-being.

The events were led by a group of four International Citizen's Service (ICS) volunteers from Zoe Life, and enabled the children in the Support Groups to have a fun-filled day, learning key life-skills in the process. Some of the challenges the children face include the impact on their families and communities of HIV/AIDS and TB, financial hardship, peer pressure that encourages drug and alcohol use, and early sexual debut. A lack of positive adult role-models due to parents passing away or not being able to care for their children adequately is also a key challenge.

One of the children who participated in a sports day and has been part of a Support Group for a year said, *"Playing sports together helps us kids get to know each other and communicate; it helps us discover our talents, and takes our mind off our problems in a good way. I was in grade 12 when I heard about HACT's child support groups. I wanted to pass my grade so I could continue my studies. I also needed help with some challenging situations. Many of the young people here end up turning to drugs and alcohol to forget about their problems and then they get addicted. I didn't want this to happen to me. I am the future of my family."*

Thank you to our donor NACOSA (The Networking HIV/AIDS Community of South Africa) and to a generous donor who wishes to remain anonymous for supporting this immensely valuable work – these children are the future of our country. Thank you for enabling us to make a positive difference in their lives.

420 OVC
children
supported

1900 people
impacted

“Being part of this programme not only teaches me more about HIV/AIDS, but it gives me an insight into myself and my future.”

- Life Skills beneficiary

PREVENTION LIFE SKILLS

“The learner grew up without his father but through the effort made by his granny to send him to school he was able to be part of the Life Skills programme. He said in his own words, “Being part of this programme not only teaches me more about HIV/AIDS, but it gives me an insight into myself and my future,”” - **Sbu Mthethwa, Education Manager.**

EACH year we take a step towards our vision of an HIV-free generation through the implementation of our Life Skills programme. The programme, which supports the national Department of Education’s Life Orientation curriculum, takes place in five underprivileged primary schools in the Valley of the 1000 Hills. The schools in the programme are: St Leo Primary School in Molweni; Empilweni Primary School and Ukusakwabasha Primary School in KwaNyuswa; Khanyakhwezi Primary School in KwaNquetho, and Inchanga Primary School.

Our education team, consisting of an Education Manager and an Education Assistant, along with four young volunteer facilitators, deliver one Life Skills session every two weeks to each class of grades five to seven. Across all five schools there is a total of 1064 children enrolled in the Life Skills programme.

Utilising the young volunteer facilitators has been a positive step forward. In some schools there are up to 100 learners per class, calling for at least two facilitators at a time – one to facilitate the lesson and another to assist with discipline in the classroom and group work. The Life Skills curriculum is written in-house and aims to address the underlying causes of the HIV pandemic. Topics covered include goal setting, having a vision for one’s future, making good choices, healthy relationships, how to deal with instances of physical, sexual or emotional abuse, knowledge of local services

provided by non profit organisations or government clinics, sex and the consequences of it, HIV/AIDS and other sexually transmitted illnesses.

We are passionate about encouraging young people to live healthy, positive lifestyles as a way of preventing HIV, educating the next generation and equipping them for the future. So alongside our regular programme in the classroom, we encourage additional activities to stretch the learners further.

Spelling Bee

The Spelling Bee is one way of doing this. The second annual Spelling Bee took place in August and September 2014 involving 701 children from four schools. The children spent months learning hundreds of English words of various difficulties, supported by a team of volunteers from Zoe Life. They then competed in their school’s competition. The finalists went on to compete against other schools in a grand final hosted at the Hillcrest Methodist Church, which provided an opportunity for some friendly competition.

Participating in the Spelling Bee is a huge achievement for the children as their first language is isiZulu. Learning to become fluent in English is a critical academic milestone necessary to ensure they complete their exams, and have a chance at tertiary education or finding employment. The Spelling Bee is a fun way for the stu-

dents to cultivate their English skills whilst improving their public speaking and confidence. This event was such a success that it is now a planned annual event and has the support of both teachers and parents.

Talent, teamwork and a serious message

A successful Positive Lifestyles event was held again in May 2015. Four primary schools came together to convey a powerful message about HIV/AIDS and related issues in their communities through the mediums of song, dance and poetry. Using the performing arts, the learners communicated clear messages about living healthy, positive lifestyles and making wise decisions. The audience of fellow students, community members, teachers, parents and community and government leaders watched on in awe and were encouraged and inspired by the talents and knowledge the youth displayed.

Thank you to Key Trucks Foundation for their support, and to Oxfam Australia for their funding of this programme and their support as a partner of HACT’s over the past eight years.

701 learners
take part in
Spelling Bees

1064 children en-
rolled in the HACT’s
Life Skills programme
across five schools



**"I do my best to make others
happy to ensure that they
don't give up on themselves."**

- Peer Educator

PREVENTION

PEER EDUCATION

“A Peer Educator from Molweni faced numerous challenges when registering for university this year. We were delighted to be able to assist him and he is now a student at the University of KwaZulu-Natal and is studying engineering,”

Sbu Mthethwa, the Education Manager.

OUR Peer Education Programme has continued to grow over the past year with 80 students across eight high schools trained to educate their peers about healthy lifestyles and HIV awareness. The students were chosen for their natural leadership abilities and achievements inside and outside the classroom. Peer Educators provide positive influence to their peers in their schools and communities where they encourage positive behaviours and discourage risk-taking behaviours.

This year we welcomed a High School in the Shongweni Dam area to the Peer Education Programme. The Programme will help address the high levels of teenage pregnancy and drug abuse in the school, bring awareness of the consequences, and encourage long-term vision and goals for the lives of the students.

Peer educator mentors and awareness campaigns

To support the peer educators, teachers have been trained as Peer Education Mentors, tasked with ensuring the Peer Educators can share information with their peers at school. This has made the programme more sustainable because it is not dependent on HACT staff always being present at school; the Peer Education Mentors can continue to support and encourage the Peer Educators. Training Peer Educator Mentors has strengthened the relationship between HACT and the schools. In the past year, six teachers were trained as

Peer Education Mentors.

The Peer Educators also worked hard to run HIV awareness campaigns in their respective schools, using dance, drama and poetry to convey their educational messages. Eight Peer Education awarenesses were held by peer educators, including addresses at school assemblies, small discussion groups and creative arts performances

Peer Education camp

In November, 60 Peer Educators participated in a three day camp at Camp Anerley Camp Site which reinforced the messages they were taught during their initial training. It also allowed the young leaders to meet and connect with Peer Educators from other schools. For the majority of students, this was the first time they stayed away from home and, for that reason alone, the camp was an important step for the youth.

Career expos

Over the past year career expos have taken place in all the high schools involved in our Peer Education Programme. This element of the project was piloted last year with support from the ICS volunteers sent through Zoe Life. These events provide career path and subject selection guidance for tertiary study entry requirements. The students are encouraged to set career goals and are shown the importance of education as an

instrument for success.

Jes Foord Foundation partnership

Another highlight was the continued partnership with the Jes Foord Foundation (JFF), an organisation which provides support for rape survivors. HACT and JFF partnered to implement a youth mentorship scheme. The scheme is aimed at changing the behaviour of young men by encouraging abstinence, faithfulness and condom use, whilst challenging gender stereotypes. HACT's Education Manager, Sbu Mthethwa, was a mentor to 30 students, meeting with them regularly to provide one-on-one and group mentoring sessions. In March, 50 boys from five high schools participated in a motivational soccer day run by the Jes Foord foundation in the Valley of 1000 Hills.

Leadership training

Over the course of this year the Education Manager, Sbu Mthethwa, participated in a leadership development training programme run by Discovery Foundation – one of HACT's funding partners. Sbu was exposed to some of Discovery's top executive management team, learning about leadership styles and techniques. We are grateful to Discovery for this great opportunity.

Thank you to Oxfam Australia and HCI Foundation for funding this programme.



***“If you give information to a granny,
you give it to the whole family; if
you empower a woman, you
empower the whole community.”***

- Sr Cwengi Myeni, Granny Support Groups Manager

COMMUNITY OUTREACH

GRANNY SUPPORT GROUPS

“We work with more than 2000 grannies across six communities– so as you can imagine, we can influence a lot of people!”
- Sr Cwengi Myeni, Granny Support Groups Manager.

OUR Granny Support Groups project has gone from strength to strength over the past year, rapidly expanding from 36 to 46 support groups with 2000 grandmothers participating across the six communities. We are truly blessed by the enthusiasm and enterprising spirit of the grannies involved in the programme, and their efficiency in developing new initiatives. The appointment of a fourth Field Officer in 2014 means we now have a full team, enabling the groups to interact effectively with their local communities.

The Support Groups participate in projects which raise self-esteem, and harness and develop new skills for income generation. These include two very successful sewing schools based in the communities and run by community members, an income-generating chicken and egg project, traditional dress competitions, business skills training and vegetable garden initiatives.

Tourism

The Granny Support Groups hosted 18 groups of Dutch tourists over the year with HACT's partner, SRC-Cultuurvakanties. This tourism initiative began in 2013 when CEO Olivia Myeza and Education Manager, Sbu Mthethwa, spent two weeks in the Netherlands with our Dutch partners, Zulu Aid.

The tourists tour the Centre, shop in our craft store, and travel into KwaNyuswa for lunch with the grannies.

The grannies perform traditional songs and dances, and the visitors join in. Lunch is provided by a community restaurant, and a local home is hired as the venue. This is an exciting income generation project for the community which we hope will grow in the future.

New car to enable field officer visits

The generous donation of a Renault Duster from members of the Diakonia churches in The Netherlands was a big highlight of the year. The Granny Support Group field officers and staff use the car to reach previously inaccessible areas, making their work more efficient.

Dress-making graduation

The Dutch Diaconal volunteers attended the Dress Making School's 2014 graduation ceremony in November 2014 where 39 grannies received recognition for their six months training. This was a very special day with family and friends of the grannies attending the ceremony. Food was kindly sponsored by eThekweni Municipality.

The Dress Making School's training program enables the grannies to generate income and make clothes for themselves, their family and the community. The graduates receive their own sewing machine to take back to their Support Group and pass on the skills to other grannies. The program not only raises the self-esteem

of the women, but it empowers them to create their own income opportunities. Thirty-nine participants enrolled in the sewing school in early 2015.

Fifth annual Gogolympics

The greatly anticipated fifth annual Gogolympics was held in March 2015 to encourage physical activity and healthy living within the community. Hundreds of grannies trained hard and competed in a range of sports. The event received enormous support, media coverage and interest from the wider community. A donation of sporting goods worth R109, 000 from the KZN Department of Sport and Recreation will be used for future Gogolympics events. We thank eThekweni Municipality for providing the grannies with transport and fruit for the day, and thank event sponsors: Woolworths, Aquelle, Shoprite Checkers, Future Life Foundation, Steven Lewis Foundation, Zulu Aid and SRC.

We are deeply grateful to Stephen Lewis Foundation, Zulu Aid, the KZN Department of Sports and Recreation and eThekweni Municipality for their support of this project.

More than 2000
grannies reached by
our programmes

46 Granny
Support
Groups

39 graduated
from the
sewing school



*“With what I harvest from
my garden I no longer have
to go to the market to buy
vegetables.”*

- Community Vegetable Garden beneficiary

COMMUNITY OUTREACH

HORTICULTURE

“At the nursery, my time is spent supervising the work of the nursery staff, checking that our plants are strong and healthy and watering. I feel happiness each time someone buys a tree from our nursery. I feel happy because I can see that my all efforts are contributing towards making money to help other people,” - Jabulani Msomi, Horticulture staff member.

THE Horticulture Department has been very busy over this reporting year, creating vegetable gardens and chicken coops in the community to improve food security, erecting fencing, conducting training sessions, and improving the efficiency of our Izingadi Zethemba (Gardens of Hope) Plant Nursery. Staff development and organisation have been a key focus, with staff training at Silverglen Nursery and at the rooftop gardens at the Priority Zone in Durban.

Supporting our grannies and schools

The Horticulture Department plays a crucial role in many of HACT's community outreach programmes. Over the past twelve months, the team worked with schools, our Home-Based Carers and Granny Support Groups to encourage healthy eating and nutrition education, and gardening-related income generation.

The Granny Garden project has continued to grow, despite the harsh drought conditions, and the team has fenced five new gardens this year. We provide the Grannies with tools and seeds to help them get started, although the dry conditions have been challenging.

Building chicken coops

Over the year we have built three more chicken coops for the Granny Support Groups and also supplied them with laying chickens for their Chicken and Egg enterprises. We are very grateful to our wonderful supporter

Nina Michaelis who funded the coops. The chicken projects provide the grannies with a regular source of food, as well as being an income generation opportunity through selling the extra eggs.

Plant Nursery sales increase

Sales at the nursery have started to pick up with more stock moving this financial year than previously. Our plants have been particularly healthy this year, helped in part by the horticulture training given to our staff.

We have also taken on more regular garden servicing and landscaping work which has further pushed up the sale of our plants. We would love to expand this area of our work so please spread the word to your contacts!

The Nursery is always a hive of activity but experienced a special buzz at last year's Mandela Day when dozens of volunteers each spent their 67 minutes potting plants, bagging compost and weeding until literally every weed was removed!

The Nursery has an active Facebook page with regular updates and stories: www.facebook.com/HACTNursery

Thank you to our faithful donors — Zulu Aid, Libby Weir, and to Vicky and Christina's Restaurant for their regular donations and for supporting our Nursery landscaping enterprise.



A young child, likely a girl, is shown from the chest up, wearing a purple cardigan with a butterfly and floral pattern. The cardigan has large buttons and the word 'firefly' is visible on the sleeve. The child is looking down at their hands, which are clasped in front of them. The background is a blurred outdoor setting with dry ground and some greenery.

*“If Hillcrest AIDS Centre Trust
was not there for me, I
honestly believe that I would
have dropped out of school
and become a street child, a
‘nobody’.”*

- Feeding Scheme and School Support Fund
beneficiary

COMMUNITY OUTREACH

FEEDING SCHEME

“If Hillcrest AIDS Centre Trust was not there for me, I honestly believe that I would have dropped out of school and become a street child, a ‘nobody’. Their supplies of food, covering my school fees and supplying me with a uniform each year, has helped me a great deal. I am so grateful for their support throughout these years,” - Beneficiary of HACT’s Feeding Scheme and School Support Fund.



IMPLEMENTED as a short-term crisis intervention programme, the feeding scheme has provided 40 families across several nearby communities with food parcels every two weeks throughout the year.

Assisting in every situation

The Feeding Scheme is currently aiding families where at least one member is living with HIV or the family is impacted by HIV, and where the family has an immediate crisis of hunger, has no form of income and has no other way of accessing food.

Due to the high rates of unemployment, and families losing bread-winners to HIV/AIDS, many children are left to fend for themselves. Many grandmothers have taken up the care-giver and provider role for their grandchildren.

There are several child or granny-headed families on the Feeding Scheme. The food parcels are lovingly put together by a committed team of long-term volunteers. Food is purchased using donated funds and also sourced as donations from local supermarkets.

Where basic toiletries such as soap and

dishwashing detergent have been donated, we also include these. For families on the Scheme at Christmas time, we deliver an extra special Christmas parcel packed with more food than usual to mark the special occasion.

Over the course of the past 12 months, a total of 83 families were on the feeding scheme, with 43 transitioning off the scheme when one family member found work or accessed a grant. The Scheme is administered by our Counselling Department, who conduct a stringent screening process to determine that only the neediest families join the Scheme, and to ensure that they only stay on the Scheme for as long as they need to.

We would like to thank our sponsors and donors, Masscash t/a Westmead Cash ‘n’ Carry, Zulu Aid, Woolworths Kloof, Nina Michaelis, RCL Foods and Sapy (PTY) Ltd, our volunteers for their contributions and hard work, as well as the many in-kind donors who make the Feeding Scheme possible.



“...an extra R200 makes the difference between the children eating one meal a day or three.”

- Clothing Scheme and Feeding Scheme beneficiary

COMMUNITY OUTREACH

CLOTHING SCHEME & SCHOOL SUPPORT FUND

“When good clothing of the right size is available, I can make R150-R200 a week which makes me so happy,” said Ida. “The whole family only has R1400 a month to live on from my grant so an extra R200 makes the difference between the children eating one meal a day or three,” - Clothing Scheme and Feeding Scheme beneficiary.

WITH income generation and enterprise a firm priority for the Centre, we are keen to highlight our Clothing Scheme project in this report. Developed years ago to help provide an income for impoverished families in the Valley of 1000 Hills, it now assists 20 women to obtain a regular income for their families through the sale of second-hand clothing.

The beneficiaries of this project are usually Gogos (Grannies) who have lost their children to the HIV pandemic, and are now bringing up their grandchildren. The women are directed to the project via one of our other programmes, such as our Granny Support Groups or our Feeding Scheme.

The project is managed by our Counselling team, who meet with each potential candidate for the Clothing Scheme and conduct home visits to ensure the family is truly in need. The criteria for joining the Scheme is that the family must be impacted by HIV/AIDS and have no income coming into the home. There is a long waiting list of people to join the Scheme.

Throughout the year we receive donations of second hand clothing which are sorted into bags by staff from our Counselling team every Thursday, and collected by the women each Friday. The women receive their first bag of clothing for free; thereafter, each subsequent bag is sold to them for R15, in an effort to ensure the

programme is not a hand-out but rather enables these women to become entrepreneurs. The women soon become known in their communities for selling good quality second-hand clothes, and sometimes their sales begin before they have even left the Centre, selling to beaders, volunteers, staff and passers-by.

Over the past year, the women have reported they can earn between R150 to R500 per month if there is sufficient clothing to sell, making the difference between feeding their families one meal a day or three meals a day. They also use the income to pay for school uniforms and other necessities. We constantly need to replenish clothing stocks so please do get in touch if you have clothing to donate. Clothes for children, teens and young adults are particularly welcome, as well as branded clothing in small and medium sizes.

To all those who have contributed to the Clothing Scheme over the past year, we thank you so much! Your support has allowed these women to create an income and ensure their families are fed and clothed.

School Support Fund

Many of the children in the Valley have been given access to free schooling in recent years, but even with the relief of not having to pay for school fees, families still have to purchase costly school uniforms. Without the correct clothing, children are excluded from

school, which was why this Fund was introduced back in 2003.

This year we covered the cost of 70 school uniforms with the help of HACT UK, ensuring that more children could stay in school and feel just like the other children who have uniforms. Of those children, three of them were in Grade 12 and matriculated, with two being accepted into tertiary education as they received financial assistance. The other matriculant is currently taking a gap year and hopes to resume studies next year after securing financial aid.

We would like to thank each and every person who has contributed to this Fund as it makes the world of difference to these children's lives as well as to their futures. Thank you also to Edgars Watercrest and JET Watercrest for their supply of clothing.

20 women
generated an
income on the
Clothing Scheme

70 children able to
attend school in
brand new school
uniforms

A woman with dark skin and short hair, wearing a green patterned vest over a dark shirt, sits at a table covered with a blue cloth. She is looking upwards and to the left with a thoughtful expression. The room is dimly lit, with light coming from a window on the left. In the background, there are wooden cabinets, a yellow bucket, and various household items. The overall atmosphere is one of quiet reflection in a modest living space.

“With the income from Woza Moya I am able to put my kids through school, buy electricity, pay for water and build my own home.”

- Woza Moya crafter

INCOME GENERATION

WOZA MOYA

“Having somewhere stable to work, where you and your creativity will be welcome, is such a huge relief. With the income from Woza Moya, I am able to put my kids through school, buy electricity, pay for water and build my own home. I know roughly how much I will receive each month, so I am able to budget and plan financially,” - Woza Moya crafter.

THIS year has been a wonderful tribute to how interconnected our world has become. This report is dedicated to all the friends and volunteers who not only helped this year, but in all the years gone by. We have been greatly supported from both local and international volunteers who have heard about the work we do and wish to lend a hand in any way they can.

With very sad hearts we accepted Kerry Murray's resignation as Woza Moya financial manager this year. She left for a position at her children's school. Kerry served Woza Moya for eight years, taking Woza Moya from a fledgling business to what it is today. We thank her for her friendship and guidance, and for her patience, honesty and integrity. We wish her well and she will be sorely missed by all her friends and customers.

New wholesale and retail price list

We have had another successful year with a further increase in turnover, enabling us to reach the next stage of our business growth: to move from a charity craft shop to a fully-fledged business with a wholesale and retail pricelist. The renovations we did in May have increased shop sales threefold with extra space to add in other NGO partners and local products which have good synergy with our own. Locally grown coffee, handmade natural soaps, beautiful embroidery, leatherwork and locally made African print dresses can now

be bought in the shop - the variety of goods is mind-boggling.

The Woza Moya shop now helps support more than 1000 crafters and we have been working hard promoting our campaign 'You can't buy happiness but you can buy local and that is kind of the same thing'. This has been very successful with many customers committing to buying all their gifting needs at Woza Moya.

Bunny Kats, Green Hearts and Little Travellers

Our Sewing Project continues to grow under Zonke's care, with eight seamstresses in our sewing room amidst the ceramic training, quilting and fabric painting groups that are in action. The Bunny Kat orders continue to increase, and we received an order for 1000 Bunny Kats from Woolworths which were handed out to children at the Red Cross Children's Hospital on Mandela Day last year. They have also become the official mascot of Green Heart City Durban: a green heart is sewn on the Green Heart bunny jerseys and these are given out by the Green Heart City movement in Durban and to Mayors around the world. Bunny Kats now famously reside in India and Ireland.

Bunny Kats create employment for several people - from two permanent seamstresses, the skirt maker, a Bunny Kat jersey maker and two permanent staff who

embroider the Bunny Kat faces.

Our Little Traveller's have also done extremely well. This year, 60 000 Little Travellers were sold across the globe. We now have more than 50 different speciality Travellers made by 30 crafters, with the original Travellers made by the rest of the crafters. Many thanks to our wonderful supporter in Cape Town - Jason from African Creative - who has promoted Little Travellers to all bush camps and tourist destinations, resulting in Woza Moya becoming as well known locally as we are overseas. Our quilting group, recycling department and fabric painting projects continue to flourish and create employment for all involved.

A dream come true

Thanks to funding from the South African National Lottery Distribution Trust Fund, we finally have a coffee table book based on the Dreams for Africa project—the Dreams for Africa book is truly beautiful. Thank you to: Matthew Willman, Peter Upfold, Dominic Ronzo, Claudia Krumhoff and numerous other friends who assisted in so many ways.

We also thank the South African National Lottery for funding our projects this year which enabled us to attend the Design Indaba and the SARCD trade show in Johannesburg, as well as funding several of our training projects.



CAPTION: Nomathembu Mkhwanazi

“Being open about my
status has helped me
give hope to others
who are also in my
Situation.”

- Nomathembu Mkhwanazi

NOMA'S STRENGTH SHINES BRIGHT

A NEW HIV stigma index has been published showing that KwaZulu-Natal has the highest levels of stigma in the country. This is the story of a HACT staff member who has worked tirelessly to combat stigma. Noma's story reveals a woman of great courage and determination in the face of huge challenges.

Noma was 18 years old when she discovered she was HIV positive. She learnt her status in 1993 when she was pregnant with her first child. She was living with her aunt because her father passed away when she was young, and her mother had remarried. Noma had by this time already experienced much in her young life.

In the early 90s, many in South Africa had little or no knowledge of HIV/AIDS and how it is contracted. Fear of the virus inspired widely spread rumours which were the primary source of HIV/AIDS information for many people. Further, there was no treatment available as ARVs did not become freely available in South Africa until 2004, so a HIV diagnosis really was a death sentence.

When Noma saw a doctor about her pregnancy, she was horrified because he told her she would develop some terrible illnesses and die as a result of HIV. He said it was better to have an abortion as her baby would die in a similar way. Noma was told that either she and/or the baby would die at birth, so she decided to take matters into her own hands.

One day, Noma purchased some paraffin and matches. In the bathroom at home, she took the paraffin, struck the match and set fire to herself. She decided it was better to end things than to go through the suffering the doctor had described.

Thankfully, Noma was found just in time and lived to tell the story. However her legs and thighs suffered third degree burns and was admitted to hospital. The pain was so great she was unable to walk for some time. Her pregnancy continued and Noma gave birth to her first born. Tragically the baby only lived for three weeks.

In 1997, Noma gave birth again. The wonderful news was that her little baby girl hadn't contracted HIV. To be sure, Noma had her baby regularly tested until she turned four years old. At this time, there were still no ARVs, and many people in the communities around Noma were suffering and dying.

"It was a miracle that my baby didn't get HIV. I was very keen to tell people about HIV/AIDS and how to prevent it. I had a friend called Gugu Dlamini who lived in KwaMashu. She was the first woman in South Africa to disclose her HIV status very publically in the media. So we volunteered together, part time, telling people about the virus and how it affects the body."

"It was a miracle that my baby didn't get HIV. So I was very keen to tell people about HIV/AIDS and how to prevent it."

Then some dreadful news arrived. In 1998, Gugu was beaten, stabbed and stoned to death in front of her daughter by a group of men from her home township.

"They attacked Gugu for disclosing her status; they were scared that if she lived, if they came in to any kind of contact with her, HIV/AIDS would spread around the community. The men did not like it that a woman would talk openly about a disease which people associated with immorality."

"It was a painful time. I thought about Gugu, and I thought about me and my child – what would happen to me if people found out about my status? I was very frightened."

From then on Noma went quiet on the HIV issue out of fear of what the community might do to her if she continued speaking about it publically.

In 2000, Noma joined South Africa's national Treatment Action Campaign, and in 2003, went to Pretoria to join a protest, lobbying the government to provide free ARVs to all.

In 2004, the link between HIV and AIDS, and the effectiveness of ARV treatment, was at last accepted in South Africa, and the programme of providing free ARVs started. This was also the time that Noma started taking ARVs.

"I was among the first to receive the drugs and not long after I was pleased to find a job in a factory".

Sometime later, Noma became sick, and was in and out of hospital. She

used up her sick leave at work and then had to explain her status to her boss. HIV/AIDS still held stigma in South Africa and as she told her employer, she recalls his reaction,

“He was holding a pen in his hand which I had just used to sign a form. I noticed that he quickly took the edge of his coat and carefully wrapped it around the pen so that his hand was no longer coming into contact directly with the pen. This upset me a lot. He didn’t understand that you can’t transmit HIV/AIDS that way.”

In 2006, Noma was diagnosed with womb cancer. She had to face yet another very tough decision. She was told by the doctors that her womb had to be removed before it was too late. The surgeons said her CD4 count - the measure of the strength of her immune system - was too low for her to be operated on. Noma wouldn’t accept this so she tried a different hospital. She was told there would be a high risk of complications due to her low CD4 count, but the doctor agreed to do the operation.

Noma recovered well and was discharged a week later. She went back to work and then negotiated early retirement and a disability allowance. She felt a calling to go

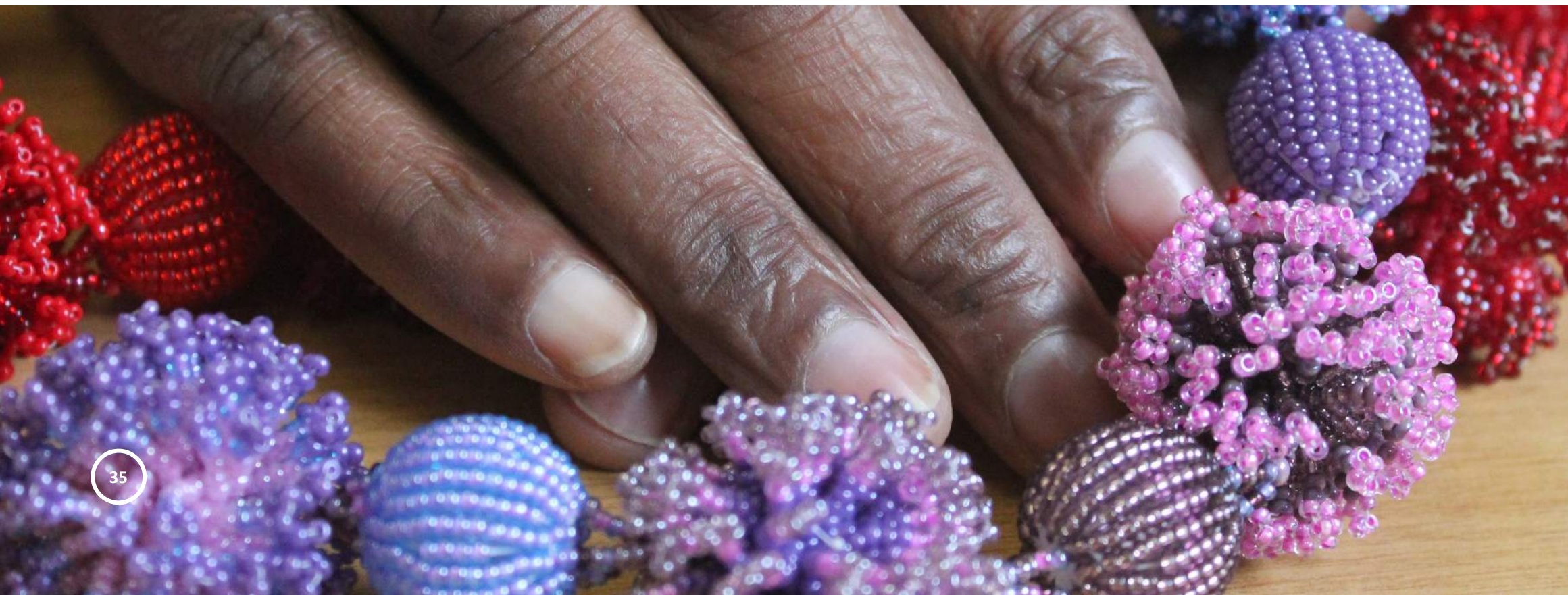
into home-based care and follow her passion to help others with HIV/AIDS, so she started to volunteer at HACT, undertaking her practical training at Hillcrest Hospital in 2007 where HACT’s respite beds were based before the Respite Unit was built. She also formed a support group in the local community and began teaching people about HIV/AIDS and how to prevent it.

Soon after, Noma was employed as a Home-Based Carer at HACT.

“There were times where I would do home visits and the people with HIV were not being washed or fed. I would check each home regularly and make sure the sick were looked after, and wash and feed them myself if necessary.”

“Then one day I felt the need to disclose my own status to the community. I was counselling others but I hadn’t told people that I had HIV. So I did disclose my status at a big church service. After that more and more people came to me for help.”

Noma has continued to work at the Centre as a cleaner in the Respite Unit, Admin Building, and, more recently, as an assistant in the Woza Moya shop. We love her dearly and particularly value her joy and enthusiasm.



ANNUAL FINANCIAL STATEMENTS

FINANCIAL REPORT

“For where your treasure is, there your heart will be also.” - Matthew 6:21 (NIV)



THE Annual Financial Statements for the financial year ended 31 March 2015 were prepared and reported on by the external auditors, Marwick & Company Inc., and approved by O Myeza, Revd. A Robinson and J Hornby on behalf of the Board of Trustees.

The financial position of the Trust as at 31 March 2015 reflects an accumulated surplus of R6 564 993 and net Current Assets of R3 619 959. The accumulated surplus was reduced by R1 515 558 in the reported financial year to 31 March 2015.

This was the result of expenses increasing by 11%, mostly of an inflationary nature, and not covered by the Trust's revenue, namely Donations, Grants and Self-Generated Income, which reduced by 2%. This inflationary increase effect on expenses has been countered by managing each expense to achieve reductions where possible and by factoring inflation into future grants.

A fundraising strategy is being refined with the aim of covering all expenses into the future, and new funding partners and income streams are being actively sought.

Presented here is a summary of the Annual Financial Statements. A copy of the full Annual Financial Statements is available on request.

ANNUAL FINANCIAL STATEMENTS

BALANCE SHEET AND COMPREHENSIVE INCOME STATEMENT

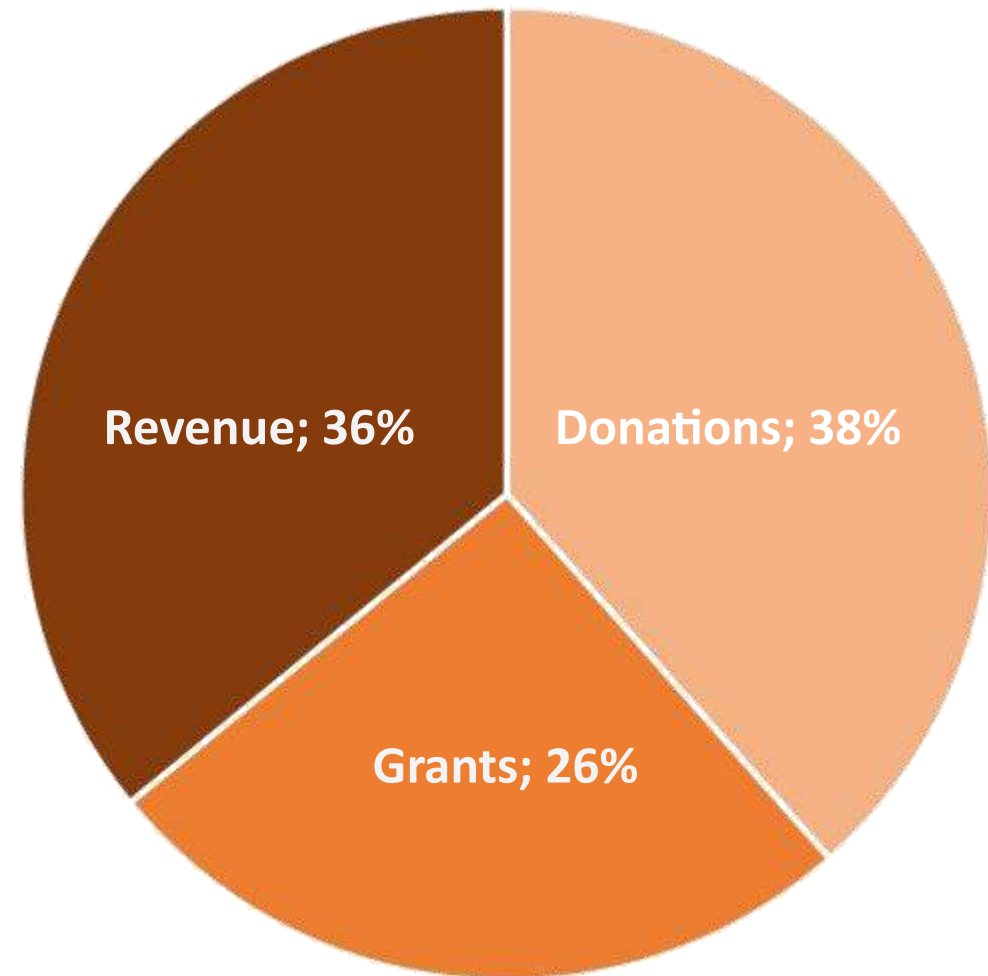
Non-Current Assets			
Property, plant and equipment	R	2 945 136	2 832 834
Current Assets			
Inventories	R	829 803	R 746 884
Trade and other receivables	R	522 416	R 422 897
Cash and cash equivalents	R	4 134 379	R 4 657 468
	R	5 486 598	R 5 827 249
Total Assets	R	8 431 734	R 8 660 083
Equity			
Trust capital	R	100	R 100
Accumulated surplus - Hillcrest AIDS Centre Trust	R	6 389 701	R 7 505 658
Accumulated surplus – Woza Moya	R	175 293	R 574 894
	R	6 565 093	R 8 080 651
Current Liabilities			
Trade and other payables	R	1 866 639	R 579 432
Total Equity and Liabilities	R	8 431 734	R 8 660 083

	2015	2014
Cost of sales		
Income Generation	R 2 733 118	R 2 808 160
Expenses	R 11 680 056	R 10 498 400
Administrative	R 2 284 134	R 2 246 852
Counselling	R 801 076	R 673 689
Education	R 921 240	R 841 969
Feeding Scheme	R 123 046	R 96 382
Grannies Support Group	R 656 145	R 392 826
Home Based Care	R 670 644	R 586 659
Horticulture and Nursery	R 764 463	R 719 038
Income Generation	R 1 931 976	R 1 663 849
Medication	R 397 571	R 390 469
Respite Unit	R 3 010 381	R 2 857 659
School fees	R 34 874	R 29 008
Children's Programme	R 84 505	R -
Deficit for the year	R (1 515 557)	R (187 363)

ANNUAL FINANCIAL STATEMENTS

CONSOLIDATED INCOME STATEMENT & INCOME OVERVIEW

	2015		2014	
Donations	R	4 959 987	R	4 692 050
Grants	R	3 306 099	R	3 792 684
Revenue	R	4 631 530	R	4 634 463
Administrative	R	197 403	R	335 015
Counselling	R	13 702	R	10 185
Education	R	6 312	R	8
Feeding Scheme	R	-	R	3 261
Granny Support Groups	R	1 736	R	-
Home-Based Care	R	360	R	2 491
Horticulture and Plant Nursery	R	391 868	R	319 812
Income Generation	R	3 895 268	R	3 901 502
Medication	R	73 379	R	37 667
Respite Unit	R	303	R	845
School Support Fund	R	51 200	R	23 677
Total Income	R	12 897 616	R	13 119 198



GRANT-GIVERS AND PARTNER ORGANISATIONS



Solon foundation

SRC Cultuurvakanties

RK SBG Foundation



THANKS TO OUR DONORS AND FRIENDS

“What counts in life is not the mere fact that we have lived. It is what difference we have made to the lives of others that will determine the significance of the life we lead.” - Nelson Mandela

31 Club	Catherine Metcalfe	Dirty Seagulls Foundation	Hillcrest Motors	Lara Morris	Neptune Shezi Industrial Holdings	Ronald Ingle	Stichting IBAFU
A Sukdeo	Charities Aid Foundation	Dr. Bugwandeen	Hillcrest Primary School - Grade 5	Laura Tetlow	Nina Michaelis	Roseway Waldorf School	Swanepoel HA
ABSA	Charleen Goschen	Durban Centre for Photography	Hlalanathi	Leather Finishing Products CC	Nina Raber	Ryan	Synergy Worldwide Logistics (Pty) Ltd
ACB Credit	Cellutology SA	ECB Education and Training	Holy Trinity Anglican Parish	Libby Weir	Njabulo Mncwabe	S and K Patter	T&K Read
Acti-Chem SA (Pty) Ltd	Cheryl	Erica Verbaan	Honourable Mr. Justice Malcolm J.D Wallis	Lisa Berg	Oasys	Santova Financial Services	Talloula
Albany Bakeries	Christine Parry	Euro Industrials	Hornby Smyly Glavovic Inc	Little Travellers Canada	Optima Management Services	Sarepta Church	Terrible Twins
Albon Doug & Yvonne	Claremont Graduate University	Exotex Textiles	Hyde Park United Methodist Church	Little Travellers Korea	PailPac	Shaun Lamont	Tetrapak SA
Amanda	Mr Clark	Fatima Goqa	Imana Foods	Liz Morton	Palo Thomas	Shoprite Community Network	The Spirit of Africa
Amanda Laird Cherry	Cleveland Clinic Nurses for Nurses	First Religious Society	Ingle RF	Lyndhurst Primary School	Pambula Rotary Club	Simisephi Madida	Thistledown Properties
Andrew Robinson	Clover	Fishwicks	International YMCA University	Malvern Preparatory School	Patricia Hutton	Siva Pillay	Tiger Brands
Andre Ruwer	Club Leisure Group	Fixfield Equestrian	J Du Preez	Mariannridge Methodist Church	Patrick Williams	SiVest SA	Toni Schumann
Anglican Aid	Colleen Eitzen	FOIL UK	J Reith	Mark Eksteen	Paypal	Smiths Plastics	Truly Grounded Coffee Shop
Anonymous Donor	Coral Vinsen	Forsdick Workwear	Jackie Thomson	Mark Van Den Berg	Pendalia	SORO	Trade Call Investments
Aquelle	Congo Rose	Foxfields	Janet Reid	Marriott	Penny & Ray	Sozo Food	Vicky Christina's
Averyl Morris	Counsellor Mkhize	Gill Browne	Jendal Furnishers	Marwick & Company Inc.	Perry Hill International Trading	SP Smith	Villanova University
Back-a-Buddy	CP Todd-Ngubane	Gill Dearman	Jeanie (JE) Pryce	Masscash t/a Westmead Cash & Carry	Peter Ikin & Isabel Blackett	SPAR Group Limited	Wanda Daly
Backworth Stud	CPB Gordges	Gorrilla Donation	Jenine Foley	Matt	Pick n Pay	Stichting IBAFU	Waterfall Methodist Church
Beate Kleim	Create	Graham Lopes	Jes Foord Foundation	Matt Liccketto	Pinetown Printers	St Agnes Church	Wave Paper
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Betty Lawes Foundation	Dalton Sugar	Heather Pitcher	Julie Hornby	Merpack	Rainbow	Susan Giles	Wilderness School
Bill Stanley	David R B Nicoll	Heavyweight Group	K - Rith	Meryl Erasmus	Raymond Van Staden	Suzanne Hofmeyr	Willy Miller
BG Ilbury	DB Print	Helen Beach	Kerry Ingredients South Africa	MHP Geomatics Inc	RCL Foods	6th Form - M. Turnbull	Westville Girls High School
BG Muller	Debonairs Hillcrest	Helen Cooke	Kerryn Sidea / McIntosh	MHP Geospace (Pty) Ltd	Redfern	Santova Finance	Woolworths
Brenda Ilbury	Deep Current	Hillcrest AIDS Centre Trust UK	Key Truck Centre New Germany	MHP Geospace E/C and KZN	Rentokil Initial	SAISG	Youth Connected
Bridget Young	Department of Sport and Recreation	Hillcrest Baptist Church	Koop Design	Micro Mega Publications	Retah	Shezi Industrial Holdings t/a Neptun Boot	Zoe and Jamie John
Brits	Department of Trade and Industry	Hillcrest FEVER	Kristi Mackintosh	Mr Wheelchair	Richard Worringham	Smiths Plastics	
Bronwyn Petzer	Des O'Brien	Hillcrest KwikSPAR	KZN Gallery	Multilayer Trading	Rio Clothing	Spar Group Ltd	
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Carol Constable	Diaconial Tour Group	Hillcrest Presbyterian Church		National Edging KZN	Rishi	St Agnes Church	
Carter Medical Supplies	Diane Gething					St Vincent de Paul	
Cash deep (Durban city branch)							

A photograph of two Black women outdoors. The woman on the left is wearing a bright pink patterned top and a red beaded necklace, smiling broadly. The woman on the right is wearing a black top and large hoop earrings, also smiling. They are both using their hands to form a heart shape in the center of the frame. The background shows a garden with various plants and a brick wall.

THANK YOU!

BANKING DETAILS FOR HILLCREST AIDS CENTRE TRUST

Account name: Hillcrest AIDS Centre Trust

Bank: ABSA

Account number: 4045374149

Branch: Hillcrest

Branch code: 631126

Swift Code: ABSAZAJJ

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This Annual Report was produced by: Lloyd Mackenzie and Rebekka Stredwick

HILLCREST AIDS



CENTRE TRUST

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KwaZulu-Natal South Africa

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Trustees: Dr Stephen Carpenter; Julie Hornby (Chairwoman and previous CEO); Linda Knox (founding CEO); Michael Mkhize; Sbusisiwe Myeni; Olivia Myeza (CEO); Dr Makhosana Nyamazana; David Neville-Smyly; Revd Andrew Robinson; Revd Gary Thompson; Mark van den Berg; Bishop Michael Vorster

A Ministry of Hillcrest Methodist Church. Unconditional love for all infected and affected by HIV/AIDS.

NPO number 005-800

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