

TOOLS FOR ACTION

An evaluation of the
Beyond Awareness Campaign's
AIDS Action Office



BEYOND AWARENESS CAMPAIGN
HIV/AIDS AND STD DIRECTORATE
DEPARTMENT OF HEALTH



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INTRODUCTION

An overview of the Beyond Awareness Campaign

The Beyond Awareness Campaign (BAC) is a project of the HIV/AIDS and STD Directorate of the national Department of Health. The first phase was initiated in 1997 and took the form of a tender that ran from from August 1997 to October 1998.

The campaign was followed by a further tender for a two year period running from November 1998 to October 2000. This tender was conducted by a consortium of four organisations – AIDS Media Research Project, DramAidE, Lindsay Smithers FCB advertising agency, and Wireless Additive.

The “Beyond Awareness” concept was developed by the HIV/AIDS and STD Directorate over a number of years and drew on a range of recommendations of the 1994 National AIDS Convention of South Africa (NACOSA) plan. These concepts were reviewed and developed into a set of well-defined communications activities which were widely consulted through a well represented National HIV/AIDS Communications Forum and various AIDS communications experts.

The campaign focuses on advertising, materials development, training and research and these activities were further expanded into the second phase of the campaign. Objectives include to:

- ❑ *intensify communication* of key resources around the HIV/AIDS epidemic directed at youth 15-25 years of age;
- ❑ *develop and distribute communications resources* that can support action around HIV/AIDS;
- ❑ *promote social action through targeted projects*, specifically including an AIDS Memorial Quilt Project, a Tertiary Institutions Project and a Mediaworkers Project;
- ❑ *build capacity amongst HIV/AIDS communicators* through providing resources and training;
- ❑ *conduct research* related to communications and *evaluation* of various aspects of the campaign.

The Campaign drew on wide-ranging research to achieve an integrated model for promoting awareness, as well as for endorsing existing appropriate sexual behaviours, promoting sexual behaviour change, promoting help seeking behaviour (eg. AIDS Helpline), promoting social action and promoting care and support of people infected with HIV/AIDS. Key elements of this model included:

- ❑ promotion of the red ribbon logo, which allowed for a recognisable icon to be attached to HIV/AIDS messages and activities, and allowed individuals to personalise their endorsement of HIV/AIDS issues by wearing the red ribbon symbol;
- ❑ promotion of the national multilingual toll-free AIDS Helpline which provided an important mechanism for dialogue;
- ❑ multilingual mass media advertising focusing on youth in the 15 to 25 year age group in lower to middle income groups. Budget constraints limited focus to a few key themes. These were promotion of:
 - the toll-free AIDS Helpline
 - the red ribbon
 - condoms
 - rights related to HIV/AIDS and gender;
- ❑ promotion of social action in the mass media through a Mediaworkers Project which identified and promoted articles and photographs of related activities in the print media. These are available through a website – www.lifanet.co.za;
- ❑ provision of communications resources through the AIDS Action Office;
- ❑ promotion of action through projects including:
 - an AIDS Memorial Quilt Project which provided resources and training in the making of memorial quilt panels for friends, lovers and family members of people who have died of AIDS;
 - a Tertiary Institution Project which recognised the importance of developing youth leadership and promoting institutionalised HIV/AIDS policies and programmes;
 - a Mural Project which worked closely with students and art departments at tertiary institutions to offer training and resources for painting murals on campuses and in surrounding communities;
 - a Living Openly Project which promoted openness around HIV amongst people living with HIV, their families and loved ones;
 - a Care and Support Project which developed a range of additional materials focusing on care;
- ❑ research and evaluation of various project components and key research related to HIV/AIDS communication.

THE AIDS ACTION OFFICE

The AIDS Action Office grew out of analysis of various research conducted during the first phase of the Beyond Awareness Campaign. This research identified a considerable lack of key resource materials nationally, particularly leaflets on key topics. There was a distinct lack of multilingual materials available. Furthermore, although provincial departments of health had attempted to co-ordinate materials development activities, there was little collaboration amongst provincial materials developers.

Considerable time was also spent in developing materials. Skills for such production were often not available at provincial level, and materials that were developed tended to be inconsistent in style and design.

A limited set of materials was produced by the HIV/AIDS and STD Directorate of the national Department of Health. These items included posters, calendars and booklets which were produced on an ad hoc basis. Materials tended to be directly distributed to provincial government departments, with a small proportion being retained for supplementary distribution through the national Department of Health stores.

A range of objectives were identified for the AIDS Action Office (AAO) service. These included:

- provision of a wide range of key materials to organisations and individuals throughout South Africa at no cost to the end user;
- provision of a system of reprinting and reproducing various materials;
- provision of secure warehousing of materials;
- provision of stock control and record-keeping systems;
- provision of a centralised telephone number for receiving orders and staff to manage orders;
- provision of delivery systems that could ensure delivery within 14 days;
- provision of systems for developing supplementary materials;
- promotion of the service;
- evaluation of the service.

Pilot phase

The 1999 period was viewed as a pilot phase where aspects of the service could be developed and refined. Resources included:

- an office and a small warehouse located in Auckland Park, Johannesburg, staffed by a Social Mobilisation Officer. Telephone, fax and e-mail facilities were included;

- ❑ a large warehouse located in Wynburg, Johannesburg, managed by ADWarehouse, who were subcontracted to manage storage, packing and courier distribution.

The service was cautiously promoted, primarily through meetings and workshops of the national and provincial departments of health, through various e-mail news groups, through existing HIV/AIDS networks and through media articles on the AIDS Action Office. Order forms were also distributed. However, it was preferred that users contact the AAO telephonically to assess what items were available and to allow clarity in terms of quantities available, amongst other guidelines.

Some 10-million items were initially produced to serve as the basic stock. A proportion of these were distributed directly to provincial governments as a stop-gap measure, whilst the AAO was being set up.

Initial stocks of the AAO also included older items that were transferred from the government stores. It was accepted that these items would not be reprinted once they had run out. Certain other production runs were also discontinued – for example calendars were not reprinted when they were no longer current, whilst other items such as directories and calendars were not reprinted if they could not be updated.

Growth in demand

Response to the service grew rapidly and the 4-million demand estimate was exceeded by July 1999. Distribution grew rapidly in the latter half of the year with over 3-million items being distributed in November, the month preceding World AIDS Day. This massive demand necessitated rapid review of budget allocations and parallel production of key items through supplementary tenders.

Operating a demand-based service that provides free materials is extremely difficult within the context of finite budgets. Rules and guidelines relating to quantities were developed as the project proceeded, with emphasis placed on rationalising quantities ordered by users. This latter aspect was often poorly understood by users, who were often disappointed when lesser quantities were dispatched. However, this approach had to be maintained as there was no ready access to additional funding.

Complexities of service delivery

Initially there were no guidelines regarding the time taken for delivery, and in many instances users expected that delivery would be virtually instantaneous. Poor planning and urgent emerging activities contributed to individuals from various national government departments utilising “governmental authority” to insist on overnight courier delivery of items for upcoming events amongst

other activities. This practice was extremely costly and soon brought to an end and was in due course obviated through the establishment and stocking of a materials “clearinghouse/resource centre” in the national HIV/AIDS and STD Directorate in Pretoria.

Managing higher cost utility items was also complex. Metal red ribbon pins were in high demand throughout the period and it was difficult to appropriately assess and refine requests without clear knowledge of the users themselves. This was further compounded with regard to caps and T-shirts, where guidelines were expanded to include written motivation for these items. Within the formal AIDS sector, there was generally a good understanding of the cost and value of these items and the need for restraint.

However, there was often a tendency to request high cost utility items for events, or activities that would not be sustained on an ongoing basis. For example, a request was made to supply the public relations agency of the South African Broadcasting Company (SABC), some 20 000 red ribbon pins for use by television front-line staff, continuity announcers, newsreaders and the like. This was duly done and implemented by the SABC and high visibility of the ribbon was generated during the period around World AIDS Day. However, after a two-month period this practice was not sustained, and thus the impact of an investment of over R40 000 was limited.

Outside of the formal AIDS sector, there was lesser understanding of the costs of utility items and strong evidence of a “culture of entitlement” as well as a desire to use items on a once-off basis. It was not uncommon, for example, to receive briefly worded faxes requesting immediate delivery of hundreds of T-shirts and caps for a particular AIDS event, workshop or conference.

Maintaining stocks of over eighty items was also complex, and had to be balanced by financial constraints said Beyond Awareness Campaign Manager, Warren Parker. “By far the most difficult part was rationalising and limiting the quantities that people could access”, said Parker. “Quite often there was an aura of dissatisfaction around quantities people could access, especially when it came to red ribbon pins, caps and t-shirts. In many instances there was the desire to use these items on a once-off basis for an event, or for workshop attendees.”

During the period there was anecdotal and actual evidence that items procured from the AAO were being sold. In some instances items were sold purportedly to “raise funds for AIDS organisations” whilst in other instances sale of items was clearly fraudulent. By and large however, such incidents were isolated, and were stopped through intervention by various organisations operating at provincial and local level.

It was not uncommon for staff members to be treated abusively, especially in instances where users felt they were entitled to larger quantities, or faster delivery times.

Complaints procedure

It was to be expected that during the pilot phase misunderstandings between users and the AAO would occur, and that inevitably there would be problems in service delivery. In general, complaints were made directly to the AAO staff members and then referred to the BAC Campaign Manager if unresolved.

In general there were a few problems specific to service delivery – for example, delays in delivery, lack of stock of certain items, and incorrect supply of items. A number of “complaints” also related to limits and guidelines placed on utility items – specifically limitations in terms of quantity, or the requirement that items not be used on a once-off basis during events.

Development of systems

The development of appropriate systems for managing the service was an ongoing activity of staff of the Beyond Awareness Campaign and ADWarehouse. New processes and systems were thus being proposed and implemented at the time of the research. Most of these were in response to the increased average number of users, and recognition of the need for greater communication of information between the AAO and the ADWarehouse, and between the AAO and users.

“We set ourselves a complex and difficult task”, said Warren Parker. “There was a strong commitment to empower and resource a wide range AIDS organisations, activists and activities by ensuring easy access to various basic communications tools as well as supplementary materials. This required efficient systems and careful budgeting, especially given that we were servicing an almost infinite demand, with limited financial, physical and staff resources.”

The tender system also did not allow for the development of long-term resources and systems. “The Beyond Awareness Campaign is a two-year tender, and thus it was necessary to develop systems quickly, but without the benefit of expanding staff and resources beyond the two-year timeframe. With a longer view we might have set systems up differently,” he said.

EVALUATING THE AIDS ACTION OFFICE

This research study was commissioned specifically to provide further insight into the future direction of the AAO service. Furthermore, the research sets out to evaluate various aspects of the development and provision of this service, and to provide insight into potentials for replicating the service in other contexts.

Objectives

The specific objectives of this research were to:

- quantify various aspects of the AAO activities;
- assess the relevance and impact of the BAC/AAO in terms of respondent perceptions with specific emphasis on:
 - accessing the service;
 - responsibility for providing the service;
 - quality and efficiency of the service;
 - use value of the materials;
 - potentials for additional materials;
 - contexts of use;
 - shifts made in materials production and access;
 - storage and redistribution of materials.
- provide insight into processes;
- provide insight into longer term activities.

Methodology

Twenty-seven users of the AAO were selected for interviews for this research. Selection was based on a review of the distribution database for the period January to December 1999. Respondents were selected specifically to include:

- regular users;
- once-off bulk users;
- organisations which had ordered a wide range of materials.

Attention was given in terms of representivity by province, rural and urban location, sectors and types of organisation. Respondents included:

- Department of Health, Gauteng, AIDS Directorate Media Unit (*Zanele Mashinini, media co-ordinator and Kevin Humphries, campaign manager*);
- Department of Health, Western Cape, Health Promotion Resource Centre (*Lesley Boardman, chief liaison officer*);

- Department of Health, Namaqualand region (*Earl Richards, HIV/AIDS and STD co-ordinator*);
- Department of Health and Welfare, Pietersburg, Northern Province (*Ms Maitisa, administrator*);
- Tshwanang AIDS Centre (ATICC), Phuthaditjhaba, Free State (*Ansie Claasens, manager*);
- Department of Education, Gauteng, Boksburg/Germiston (*Ricky Govender, deputy chief education specialist and HIV/AIDS co-ordinator*);
- District Health Services, Welkom, Free State (*Joanne van der Walt, community liaison officer*);
- Embhuleni Hospital, Elukwatini, Mpumalanga (*Anna Malaza, health promotion co-ordinator*);
- Matatiele Advice Centre, Matatiele, KwaZulu-Natal (*Mr Shabalala, co-ordinator*);
- ATICC, Welkom, Free State (*Diane Vorstman, secretary*);
- South African Police Services, Braamfontein, Gauteng (*Sgt Monica Kabelo, selected trainer on HIV/AIDS*);
- Department of Correctional Services, Rustenburg Prison, North West (*Mr Leifera, senior professional nurse*);
- Department of Correctional Services, Westville Prison, KwaZulu-Natal (*Zodwa Dlamini, senior social worker*);
- Sebokeng Hospital, Sebokeng, Gauteng (*Christopher Mooi, chief special auxillary officer*);
- AIDS Consortium, Johannesburg, Gauteng (*Valerie Fichardt, resource centre manager and Nombulelo Hadebe, resource centre assistant and distribution manager*);
- Cuyler Place of Hope, Uitenhage, Eastern Cape (*Sarah Smiles, chief executive officer*);
- Planned Parenthood Association of South Africa, Observatory, Cape Town, Western Cape (*May Bleeker, media resource centre manager*);
- Traditional Healers' Organisation, national organisation, Gauteng (*Phephisile Maseko, project leader*);
- Sasol Ltd, Rosebank, Gauteng (*Christine Randall, manager: group labour relations: Sasol, Rosebank, Gauteng*);
- Clothing Industry Health Care Fund, Salt River, Cape Town, Western Cape (*Zainab Ishmail, Wellness Programme manager*);

- South African Police Union, National (*Barries Barnard, editor: union newspaper*);
- Mohlareng Combined Farm School, Bredell, Gauteng (*Venessa Boikhutso, teacher*);
- Technikon North West, North West (*Tebogo Makgobo, student counsellor*);
- Public Health Programme, University of the Western Cape (*Nikki Schaay, lecturer and researcher*);
- Safety, Health and Environment Department, University of the Western Cape (*Geoffrey Adonis, safety, health and environmental officer*);
- Youth for Christ, Klerksdorp North West sub-region, North West (*Thebe Tinye, centre director*);
- Independent AIDS activist, Gauteng (*Tony Raftery*).

Management and staff of the BAC were also interviewed. These included Warren Parker, campaign manager; Mandi Mundawarara, projects co-ordinator, Sonwabile Xaba, social mobilisation officer; Christopher Mathonsi, Humphrey Baloyi, Natasha Tillett and Rob Speed at ADWarehouse.

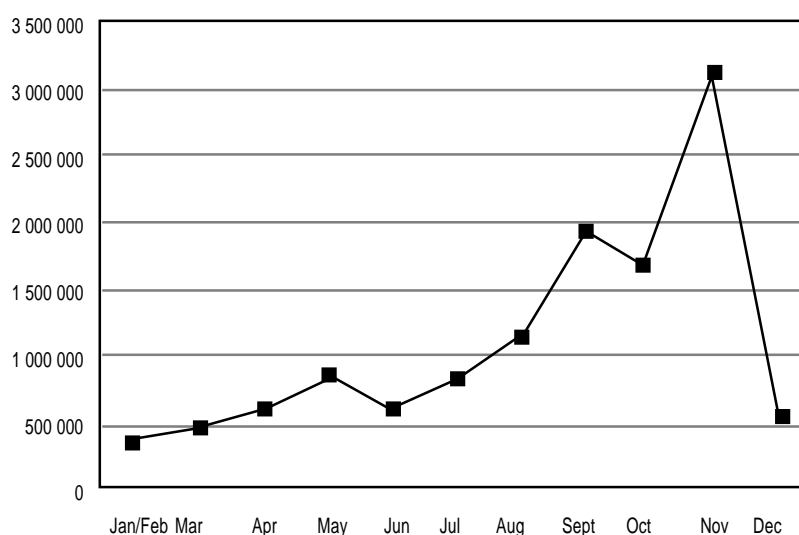
See Appendix Three for a detailed overview of respondents.

FINDINGS

Analysis of volumes

During the period January to December 1999 some 12 million items were distributed. Monthly totals fluctuated from 353 214 in January/February through to a peak of 3 149 701 items in November – the month preceding World AIDS Day. The graph below shows the pattern of distribution, and indicates a steady increase in use of the service over the year. The peak in September can be attributed to high volume orders by the Gauteng Department of Health in support of the All Africa Games, whilst the drop-off in December is consistent with the holiday period.

Materials distributed January to December 1999 (Total: 12,03 million items)



Of the total volumes distributed, some 43% were distributed to Gauteng. This can partially be attributed to the enthusiastic response of the Gauteng Department of Health HIV/AIDS Directorate which was, by far the most prolific user of the AAO service. The Directorate received some 1 039 248 units, some 8,6% of the total items distributed during 1999.

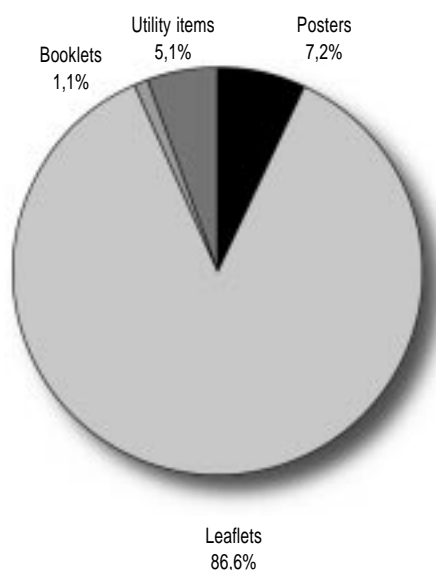
Volumes of materials distributed by province

Province	Total units	Percentage
Eastern Cape	879,678	7%
Free State	770,924	6%
Gauteng	5,141,653	43%
KwaZulu-Natal	1,404,311	12%
Mpumalanga	647,430	5%
Northern Cape	318,653	3%
Northern Province	575,632	5%
North West Province	833,403	7%
Western Cape	953,929	8%
National organisations	505,715	4%
	12,031,328	100%

A further reason for the high Gauteng volumes is the large number of HIV/AIDS organisations in the province. The next highest volumes were received by KwaZulu-Natal (12%) and Western Cape (8%).

Overall, some 1 730 orders were processed for courier delivery, with an estimated additional 300 orders being processed for collection directly from the smaller AAO warehouse, or from BAC consortium organisations. An average of 6 000 items were dispatched with each order.

Proportion of types of materials distributed January to December 1999
(Total: 12,03 million items)



Proportions of material types varied each month, but an analysis of annual averages showed that 86,6% of items distributed were leaflets followed by posters (7,2%), utility items (5,1%) and booklets (1,1%)

Number and proportion of organisations using AAO by sector

Sector	No. Organisations	Percentage
National and provincial government departments	254	23%
Local and district government departments	83	8%
Clinics and hospitals	97	9%
AIDS organisations	69	6%
NGO's and CBO's	195	18%
Political formations	15	1%
Workplace: Businesses	98	9%
Workplace: Trade unions and worker benefit orgs.	14	1%
Educational institutions	82	7%
Prisons, police and military	20	2%
Faith-based organisations	49	4%
Individuals	118	11%
Total	1 094	100%

Some 1 094 organisations and individuals accessed the AAO. Of these, nearly one quarter was national and provincial government departments, followed by non-governmental organisations and community-based organisations (18%).

The lowest proportion was union organisations at 1%.

It is important to note that most of the organisations accessing the AAO redistribute to other organisations and formations. In this sense the organisational reach of the AAO materials is many times greater than the number of organisations identified in the AAO database.

As an example of the range of orders processed by the AAO, an example of the November 1999 distribution is included in Appendix One.

Materials development, production and distribution

The vast majority of materials of the BAC were developed during the first phase of the campaign in 1998 by AIDS Media Research Project, a consortium partner. A range of over 80 items were available including:

- ❑ a set of eleven leaflets in all official South African languages which deal with a range of key topics including:
 - male condoms
 - female condoms
 - key points about HIV/AIDS
 - HIV/AIDS and STDs
 - caring for people with HIV/AIDS
 - living with HIV/AIDS
 - HIV/AIDS and rights
 - HIV/AIDS and the workplace
 - HIV/AIDS and counselling
 - HIV/AIDS and relationships
 - HIV/AIDS and TB;
- ❑ a set of three additional leaflets in a limited range of languages focusing on HIV/AIDS and TB; links between HIV/AIDS and STDs and school-based lifeskills;
- ❑ a set of 14 posters, mainly in English, focusing on key topics including the AIDS Helpline, condoms, STDs, and other issues;
- ❑ a comprehensive policy guideline and a resource guide for HIV/AIDS in the workplace;
- ❑ various booklets and a protocol flowchart related to HIV/AIDS and STD management;
- ❑ youth specific materials including a youth resource guide and a “Talking about AIDS” booklet;
- ❑ booklets related to BAC campaign activities including the AIDS Memorial Quilt Project and Murals Project;

- ❑ a comprehensive manual on HIV/AIDS communication, “Communicating Beyond Awareness” and various communications support booklets including “Language Guidelines for HIV/AIDS Communication”, and HIV/AIDS literature review, a catalogue of materials, a directory of resource libraries, a directory of South African HIV/AIDS organisations and an overview of AIDS statistics.
- ❑ a range of multilingual stickers with various slogans; as well as red ribbon and helpline stickers;
- ❑ metal red ribbon pins;
- ❑ T-shirts with various images and slogans;
- ❑ caps depicting the red ribbon and AIDS Helpline;
- ❑ leaflet dispensers;
- ❑ signs promoting free condoms.

An example of an order form is included as Appendix Two.

The annual budget period for the Beyond Awareness Campaign ran from November 1998 through to October 1999. During this period some R2 774 397 was spent on printing and production of materials. A further R445 000 was spent on warehousing and distribution. The materials stocks were supplemented by various parallel government tenders including some R1 500 000 which was utilised for printing of multilingual leaflets and R1 200 000 which was utilised for producing caps, T-shirts and metal red ribbon pins.

Considerable emphasis was placed on securing cost-effective printing and production of items. High quality was emphasised. Average unit prices included:

- R0.11 for colour 200 x 400mm leaflets;
- R0.90 for colour A2 posters;
- R1.99 for metal red ribbon pins;
- R12.00 for caps and R14.00 for T-shirts;
- unit costs ranging from R1.21 to R18.42 for books and booklets.

Additional materials development was undertaken during 1999 and included posters, supplementary leaflets and booklets. A leaflet dispenser was also developed during this period.

Maintaining stock levels

Maintaining stock levels of over 80 items was a complex process. Print runs were only cost-effective at high volumes, and close attention was paid to the timing of additional runs. In general, the commitment was to maintain sufficient stocks of the core leaflets and posters, with varying availability of other items.

One of the major challenges of the AAO initiative is the monitoring of stock outflows in relation to the availability of budget for reproducing items.

In certain instances, print runs were supplemented by the government printer and funded by the HIV/AIDS Directorate. This approach allowed for additional stocks to be made available. However, the government printing services do not adhere to strict timelines and in one instance reprinting of the leaflet series took four months, as compared to four weeks for the production of similar quantities by a commercial printer.

INTERVIEWS WITH RESPONDENTS

Accessing the service

Most respondents said they heard about the AAO through the Department of Health, either nationally or provincially. Many respondents said they attended workshops or meetings where a presentation was made about the AAO and its services.

Respondents offered a variety of reasons as to why they use the AAO. These included having:

- high quality HIV/AIDS materials and resources that assisted them in being effective in their work;
- accessibly-written materials that include all South African languages;
- materials in a wide range of topics;
- materials with broad appeal and wide application;
- free materials available in large quantities;
- simple and efficient systems to obtain materials;
- a system that all organisations, sectors and individuals could access;
- a partnership with government.

Responsibility for providing the service

All respondents agreed that the role of providing a range of free HIV/AIDS materials through a facility such as the AAO was an appropriate function of the national Department of Health.

When asked what they would do if the AAO service was no longer available various concerns were raised. Respondents working in provincial departments of health said that they would initially have to deal with the issue at budgetary level and that this would be a complex process. In addition, any reduction in the service would impact negatively on advances in HIV/AIDS work done thus far.

Respondents from non-governmental and other organisations raised similar concerns. For example, the respondent from the Mohlareng Combined Farm School commented that many parents couldn't afford school fees, let alone money for other things. "Our school is very poor," she said. "We need free materials." The respondent from the South African Police Union said, "If the AAO closed down we would be cut off from our main source of HIV/AIDS information. It would affect our campaign – they are our lifeline."

Quality and efficiency of the service

Most respondents were satisfied with their dealings with the AAO, and praised the work it was doing. Perceptions of AAO staff were extremely complementary and some descriptions included “excellent” and “very friendly”.

Several respondents, who previously obtained their materials from their respective provincial departments of health, or from the national department, noted that the AAO service is a great deal more cost effective and time-efficient than previous approaches. Previous experiences included dealing with cumbersome logistical problems such as having to organise vehicles to collect materials, bureaucratic processes and availability of only a limited range of materials.

Ordering materials

Overall it was clear that there was room for improvement in the ordering system. In particular, users needed to be informed about the range of materials available from the AAO. Users generally needed clear information, including:

- ❑ a regularly updated listing of materials available from the AAO;
- ❑ an indication of quantities available, and limits on orders;
- ❑ a system for backordering of materials not currently available;
- ❑ clarity on the limits on high cost items (red ribbon pins, caps, T-shirts).

Delivery of materials

Eighty-nine percent of respondents received their materials via courier. Two respondents collected their materials directly from the AAO, whilst another collected materials from a Department of Health office. There were occasions when unexpected needs arose, and users wanted to try and get materials in faster than the 14-day limit minimum period. This was seldom a simple process, both for users and for the AAO. However, most users were aware that they had to order 14 days in advance of when they required the materials.

The vast majority of respondents received their orders within 14 days and one reported they received their order within two days! Another said, “it just arrived here – like magic!”.

Whilst the overall impression of the AAO efficiency was positive, individual respondents outlined a range of issues worth noting:

- quantities ordered were not always delivered (19%);
- materials took longer than 14 days to arrive (14%);
- some materials were being substituted for others (7%);
- quantities of red ribbon pins, caps and T-shirts less than ordered.

Ten percent of respondents articulated some frustrations with aspects of the service to the point of wishing to complain about the service. One respondent, from the Health Promotion Resource Centre in the Western Cape, redistributed to over 250 other organisations, such as clinics and community-based organisations said she had “never received a decent order yet”. Problems included incorrect items received, delivery delays, lack of updated information on items available, and insufficient quantities supplied. The respondent from the Traditional Healers’ Organisation felt she was poorly dealt with during World AIDS Day and was not allowed a sufficient quantity of leaflets and T-shirts.

All respondents were impressed with the condition in which the materials arrived, and noted that items were well packed. One respondent commented that the packets were well-labelled with the leaflet or poster stuck on the outside of the packet. This latter aspect helped with checking which items had arrived.

There were a number of inconsistencies in despatch of various high-cost items. In six instances, AAO records showed these items had been sent, but respondents said they had never received them. On the other hand, a few respondents reported having received quantities of the above items but this was not reflected in the despatch data.

It was suggested that a list of contents should be inserted into the box so that recipients could check the list against items that were received.

The respondents from the AIDS Consortium noted a number of problems during the start-up phase of the AAO service, but that these were resolved over time. They added that they felt more communication regarding materials production schedules would be useful. For example, they thought that the BAC was going to produce T-shirts for World AIDS Day in 1999, but this did not happen. Had they known this, they would have produced their own.

Processes of selecting materials

Most respondents ordered materials on the basis of their programme needs. Activities typically included focus days or weeks, workshops, events, and visits to organisations. They also ordered according to target audience needs and size.

USE VALUE OF THE MATERIALS

There was great appreciation for the range of materials available through the Beyond Awareness Campaign. Respondents said that, with a few exceptions, the materials were all very useful and that the range fitted together well and provided a comprehensive coverage of the most important and most common

issues. Respondents who worked with a range of audiences specifically said that there were materials that met a wide range of needs.

Respondents shared a concern that materials should be appreciated and looked after. The Gauteng Department of Health's Media Unit, which redistributes on a large scale, said, "People travel all the way to pick up materials and they cherish what they have."

Half of the respondents felt that materials were sometimes wasted. This tended to happen at mass events, when materials were not properly explained. "I don't think materials should be distributed at rallies, or without some explanation on how to use them," said one respondent. "At big events the leaflets lie around and nobody collects them and they get food on and stamped on," said another.

Several respondents reported that they had learned lessons from this and now handed out materials as part of their education work after doing a presentation, rather than focusing on mass events.

Assessing the leaflets

With regard to the leaflets, topics most useful included Key points about HIV/AIDS; Caring for People with HIV/AIDS; Sexually Transmitted Diseases; Male and Female Condoms; HIV/AIDS Counselling and Living with HIV/AIDS.

Comments on the leaflet series included were that the series:

- catered for different language groups in one leaflet;
- catered for various audiences;
- covered the range of issues that people currently face;
- provided basic, valuable information, which answered people's most basic questions;
- promoted good messages, assisted people in getting the facts right, and in clarifying myths;
- promoted awareness, and helped people face realities of HIV/AIDS;
- explained things well;
- helped people deal with their fears, and helped them know what to do;
- supported people who were HIV positive;
- helped people negotiate and cope in whatever environment they were in;
- provided support as supplementary materials in HIV/AIDS programmes and activities, for example in workshops, training, school curriculum, and counselling;

- ❑ helped as stand alone information resources when, for example, prisoners or students did not want to discuss the issues with warders, teachers or parents;
- ❑ prompted people to ask more questions;
- ❑ were written in an easily understandable way;
- ❑ showed the government supports the struggles around HIV/AIDS;
- ❑ could be used to help build organisations.

One fifth of respondents felt that the male condom leaflet was less useful. Reasons included high existing levels of awareness on how to use a condom; the size of the leaflet which made it difficult to slip into an envelope with condoms, and difficulties with distributing in schools and in religious contexts where condom demonstrations were not normally allowed.

A number of respondents also noted that the female condom leaflet generated great interest in the female condom, but that stocks of female condoms were not available. At the time of the research female condoms were only available within research studies or in specific geographic areas where provincial departments of health were making it available.

Assessing the posters

Respondents viewed the Beyond Awareness Campaign posters as an important complementary element of the materials set. They displayed the posters in their offices, and used them in other work contexts, like training and events. Several respondents commented on the importance of posters that used heroes, humour, gave information, and were challenging and educative. Several respondents said they found that posters provoked informal discussions and played an important role in getting people talking about the range of issues around HIV/AIDS. One respondent remarked that the posters are: “clear, inviting and not punitive”.

A common response to the question as to which posters respondents found most useful was: “all are useful” and “all are good”. One respondent said that the posters are useful because they “all have a complementary part to play in raising awareness and offering information”. Another respondent who described himself as living in a conservative area said he felt it is good to have posters and issues that challenge stereotypes. However, he added, “how useful they are depends on the activist”.

Posters that respondents highlighted as being particularly striking or useful were:

- ❑ *UNAIDS Renaldo poster*: Respondents said that this poster fitted in with the dominant football culture. It was noted that Renaldo was a hero, people admired him, and were interested in what he had to say about

HIV/AIDS. The poster was thus a way of raising awareness and questioning, particularly amongst youth. Respondents said it helped people to change their attitudes towards HIV/AIDS. This poster was extremely popular amongst respondents, and generated discussion on the importance of posters that featured both male and female role models.

- ❑ *STD symptoms poster*: Respondents commented on the value of using humour in dealing with serious issues. They said the poster raised awareness and offered important information. It was specific and to the point, took away the stigma from people with an STD, and explained that they should go for treatment.
- ❑ *Helpline posters*: Respondents said these posters offered important information, were simple and effective, and promoted an important service.
- ❑ *HIV/AIDS 3D poster*: Respondents said the poster was colourful, and attracted attention. It gave an idea of how one could get the disease, and offered basic information around HIV/AIDS.
- ❑ *AIDS Declaration poster*: Respondents said that people wanted to know what their president had to say about HIV/AIDS. One respondent said that because the President was sitting with children, people went closer to see what the poster said. People admired him as a leader.
- ❑ *Calendars*: Respondents said the calendars helped people to plan around focus days. One respondent said he distributed the calendars to businesses to help get them proactive. Another said the calendars helped to promote “wellness”.
- ❑ *How to use a condom poster*: Respondents felt this poster offered basic information that was relevant.
- ❑ *Viva Condoms and Be Wise, Condomise posters*: Respondents felt these posters were direct and used humour to good effect. One respondent said they used the poster in conjunction with condom distribution.
- ❑ *STD protocol chart*: Respondents said these were useful for medical staff who used them in the clinics.

Eight respondents remarked on posters they found to be less useful than others. However, comments made are worth noting:

- ❑ *How to use a condom*: One respondent said it “feels like pornography when we put it up on the wall. It makes people feel self-conscious”. Another respondent concurred with this view saying it “is too big and open. Personally I don’t care, or feel uncomfortable, but others do”. He went on to say that the leaflet version was well received.
- ❑ *AIDS Declaration poster*: Some respondents said that this poster was too busy and difficult to read because it had too much text.

Assessing the booklets and books

Not all respondents had seen or used the full range of booklets and books available from the Beyond Awareness Campaign AAO. There were thus less detailed responses to these materials, but some publications did stand out.

- ❑ *Guidelines for a Workplace Policy* was rated very highly. Respondents commented that it was very useful in a training context. It had appeal and use value for the workplace, non-profit organisations and government departments alike.
- ❑ *The Workplace Resource Guide* was noted for its benefit to networking.
- ❑ *Communicating Beyond Awareness* was useful in informing their work in HIV/AIDS communication.
- ❑ *The STD Protocol Booklet* was particularly useful for health workers.
- ❑ *Language Guidelines for HIV/AIDS Communication in South Africa, the South African AIDS Memorial Quilt booklet, and the Partnership against AIDS briefing pack* were all mentioned as useful.
- ❑ *Laduma* was well received. One respondent, who works in a rural area in Mpumalanga, said: “The youth say the stories are interesting, and they get all the information they need. They identify with the story characters. The issues they face are the same, like STDs and being ‘love sick’. The question and answer style, and demonstrating how to use condoms, and explaining ulcers, is all helpful.” Another respondent said that people find it easier to confide more after reading it.

Assessing the utility items

Utility items available from the AAO include condom distribution signs, bumper stickers, red ribbon stickers, red ribbon pins, T-shirts and caps. Distribution of these items is in limited quantities. These items were positively viewed.

- ❑ The red ribbon stickers were found to be very useful, effective, and popular, especially for big events. The red ribbon items were useful for:
 - raising awareness about HIV/AIDS;
 - stimulating community interest and discussion;
 - showing involvement in HIV/AIDS work;
 - showing compassion for people living with HIV and AIDS.

Some respondents said the stickers provided a way of fighting the stigma associated with being HIV positive and awakening people to the epidemic. The word “identification/identity” came up several times, and it was explained that when people wore clothing and accessories with the AIDS symbol, it showed them as a group with a common purpose. The respondent from the Cuyler Place of Hope, who is herself HIV positive,

said the stickers were “very good to have to distribute during talks and funerals – especially if people living with HIV are open about it”.

The respondent from Youth for Christ in the North West Province said of the stickers: “It signals that you won’t have unprotected sex. It is a warning”. He added that it “also shows you work with or care for HIV positive people and people with AIDS”.

- With regard to the metal red ribbon pins, respondents generally saw these badges as treasured items, to be distributed selectively. This should not detract from the fact that they were in great demand and respondents felt they were undersupplied by the AAO. In the words of a respondent, “People are desperate for them, as they use them as a way of showing they care.”

The Traditional Healers’ Organisation respondent said the red ribbon pins were “a reminder to oneself to say ‘I mustn’t do anything wrong’.” Many respondents felt strongly that it was particularly useful for leadership – from school prefects to the President – to wear AIDS ribbons. “They are the backbone of programmes and they need to show support,” explained the respondent from the Department of Education.

The AAO policy that the pins should be given only to people who will wear them everyday has had impact. Most respondents also considered it important to give pins to people who are knowledgeable about HIV/AIDS, and who could explain and answer questions about the disease.

In light of the limited supply of the pins, respondents came up with their own selection criteria. These include giving to people who:

- would wear the badge everyday;
- were leaders in their field – for example in politics, business, civil society, education, religion, and government;
- were active committee members involved in HIV/AIDS work;
- were HIV/AIDS counsellors, field workers, peer educators, activists, and volunteers;
- had successfully completed an AIDS awareness or training course;
- could answer questions about HIV/AIDS;
- were fighting the stigma attached to being HIV positive or having AIDS;
- had won a competition in an HIV/AIDS event.

A few respondents commented that the pins had become a fashionable item to wear. They perceived this as a good thing as this promoted awareness. The pins stood out. One respondent commented that, “Even little children ask what they are for”.

The respondent from the Matatiele Advice Centre said that office staff “all wear their red ribbon pins on the left hand side, next to the heart”.

The respondent from Westville Prison in KwaZulu-Natal said she gave

them to social workers, staff, taxi drivers and scabha boys on taxis – to people who are visible to lots of people.

- As noted previously, T-shirts and caps with HIV/AIDS messages on them were in great demand. Most respondents understood that these were expensive items to produce. Nevertheless, many respondents felt that these items were “walking advertisements” for raising awareness and stimulating discussions around HIV/AIDS. They helped to break down stigma, and people were proud to wear them. The perception that the utility items helped give a group of AIDS activists a visible identity was raised several times, as was the notion that they “help to spread the message”, as well as offer important information, like the AIDS Helpline number. One respondent noted that caps were also useful for sun protection!

Respondents noted various ways in which these items were distributed including to:

- participants who attended an HIV/AIDS training course, to give them an identity in the community;
- people in positions of leadership and authority, staff, volunteers, community workers, health workers, counsellors, support groups, youth groups, drama groups, guest speakers and conference delegates;
- people who are knowledgeable about HIV/AIDS; • people who won competitions at HIV/AIDS events, both big and small.

Respondents felt that allocation of these items should be done selectively, some suggesting that people wanting them should write formal motivations to the AAO outlining reasons for receiving them and how they would be used.

The general impression respondents gave was that “something is better than nothing”, and they would rather receive a small quantity of T-shirts and caps than none at all.

A small number of respondents were concerned that money allocated to T-shirts and caps would be better utilised in producing other HIV/AIDS materials. The overwhelming view, however, was that these are important items to promote the visibility of the HIV/AIDS campaign. Some also felt that the red ribbon stickers were wasted because they were discarded after events.

Potentials for additional materials

Most respondents were happy with the range of materials the AAO offered. Most respondents did however have suggestions on topics that they felt should be added as well as topics that could be expanded. These included:

- nutrition;

- quality of life;
- care for people with AIDS, general and home-based care;
- relationships – including gender power relations, negotiating with a partner around testing, etc. Also, dealing with one’s own and others’ feelings around HIV/AIDS;
- HIV/AIDS and caring for yourself, including practical aspects of dealing with opportunistic infections, issues such as reinfection, promoting healthful practices, and first aid;
- HIV/AIDS, pregnancy and breastfeeding;
- traditional healers;
- HIV/AIDS and drug/alcohol abuse;
- the relationship between HIV and AIDS;
- bereavement;
- HIV/AIDS and homosexuality;
- young people and sexuality;
- HIV/AIDS and religion/spirituality;
- HIV/AIDS and 10 to 13 year olds specifically;
- HIV/AIDS and children;
- becoming an AIDS activist;
- becoming an AIDS counsellor;
- South African “celebrity” posters;
- more materials to directly assist teachers.

The respondent from the Traditional Healers’ Organisation argued strongly for materials that were aimed at both traditional healers and their clients. She said that traditional healers needed to be helped to know they can’t cure AIDS.

“Both traditional healers and their patients need to have an awareness around safer practices. We need a poster with a traditional healer wearing gloves and holding a razor blade with the message ‘one razor blade, one patient’”, she said.

Another point that emerged was that the materials should be used in conjunction with a talk or discussion – and not simply handed out without explanations. Some organisations, like the Clothing Industry Health Care Fund, actually had a policy for their medical staff that they should not hand out the leaflets without a verbal explanation.

A respondent located at a rural farm school felt there should be more materials specifically aimed at bringing parents and children together. She also expressed concern for those people living in rural areas where “education doesn’t reach, where there is no electricity, no TVs and high illiteracy”. She felt that radio should be used more for HIV/AIDS education in these areas.

Contexts of use

Respondents were drawn from a range of sectors and geographically diverse contexts and thus provided good insights into the range of situations where materials could be used. Respondents were resoundingly satisfied with the materials in terms of their applicability in various contexts – both as stand-alone items and in conjunction with discussion. Materials were used to support activities including:

- counselling;
- training;
- health education promotion;
- workshops;
- forums;
- cultural activities, like dance, drama, music;
- youth camps;
- exhibitions;
- libraries and resource centres;
- clinic consultations;
- door to door visits;
- street campaigns;
- campaigns;
- big events, like festivals, HIV/AIDS day focuses, orientations, parades;
- public vehicles, like taxis and trains;
- friends and relatives;
- redistribution.

Shifts made in materials production and access

There were a number of improvements in communication capacity of organisations since the inception of the AAO service. These included:

- being able to distribute to a wider area;
- no longer having to duplicate other materials;
- having good quality, useful, relevant materials;
- having materials in all languages;
- having materials delivered;
- allowing the opportunity for supplementary media production that could concentrate on additional specific issues, as well as allowing more time for awareness activities;
- filling gaps that existed before;
- providing a regular supply line;
- saving time;
- getting sufficient quantities to allow for redistribution;
- simplifying AIDS awareness activities;
- reaching wider audiences, especially the poor;
- helping with networking.

One organisation said because they stocked AAO materials, they had a constant stream of visitors to their offices asking for materials. This added to the workload, and people tended to be irritated if items were not available. There was also a sense of entitlement amongst some client groups around caps and T-shirts.

Use of materials other than the AAO materials set

Less than half of respondents said they used materials from organisations other than the Department of Health, the Department of Education, or their own materials. Some used materials from South African non-governmental organisations or businesses, and others from international sources.

Less than half of the respondents said they had produced their own HIV/AIDS materials. When materials were produced, these were usually low cost items such as drawings and pictures for use in workshops, hand-made posters and murals on walls. Larger organisations such as the Gauteng Department of Health and the Planned Parenthood Association of South Africa in Cape Town produced large quantities of their own materials. A small number of respondents had produced their own T-shirts, caps or red ribbon pins.

Storage and redistribution of materials

Storing and stocktaking AAO materials

Most respondents clearly valued their AAO materials, and most indicated that they had sufficient secure storage space for items. Most said they regularly take stock of their materials. A quarter of respondents did not take stock regularly and a number said that their stock moved so quickly they were constantly out of stock.

Promoting the AAO materials and service

All respondents said they promoted the AAO materials and this was done in a variety of ways:

- ❑ All respondents said they put up the posters in their own workplaces. This included on office walls, reception areas, corridors, boardrooms, notice boards, prison walls, clinics, halls, factories, classrooms, lecture theatres, residences, and toilets. Site visits to five organisations confirmed extensive work-based displays of the materials, particularly posters.
- ❑ Most respondents also said that leaflets were left at reception areas, or other places at the workplace that were easy for a visitor to see and pick up, and a number used the leaflet dispensers.
- ❑ The Gauteng Department of Health invited all Gauteng government employees to attend HIV/AIDS training courses. Those who were trained were given a set of materials and encouraged to use these in their communities.
- ❑ Most respondents said they promoted the materials at workshops, presentations, talks, big events, and in their ongoing programmes. Many said they put up displays at the venues. One organisation said they put their office stamp on the materials so users knew where to contact them for more information whilst others urged use through circulars and distribution of order forms.
- ❑ The respondent from the Health Promotion Resource Centre in the Western Cape said, “We are too scared to promote it too much because we don’t have many materials.” Because they cater for large volumes of respondents coming to request materials, they had produced a video that advised users on how to use the materials.
- ❑ The respondent from the South African Police Union said, “We make the materials visible everywhere. We put up posters in the toilets in police stations, for example. We put up our own condom dispenser, with pamphlets and condoms.” They also promoted materials through the union’s newspaper.

- ❑ The respondent from the Clothing Industry Health Care Fund said she sent out a formal letter to all factories (in her sector) for them to contact her for materials. The Fund had its own health centres, and posters were up on the walls, along with leaflets.
- ❑ The respondent from the Mohlareng Combined Farm School had an “open-door” approach to promoting the materials. “My classroom is always open, and the materials are on the library shelf at the back of my classroom so students can get materials without being watched or having to ask,” she said.

The majority of respondents felt positive about the AAO and referred others to use it directly.

Redistribution of materials

It was clear that direct deliveries from the warehouse represented only the first tier of materials distribution. A second tier of distribution operates widely and independently with many respondents distributing materials to individuals and organisations outside of their own organisation.

There were many networks, both large and small, formal and informal, and in rural and urban communities, where large-scale redistribution was regularly taking place. For example, there were non-governmental organisations distributing to different departments and levels of government, trade unions, companies, community-based organisations, and to other non-governmental organisations.

This phenomenon is a strong indicator that materials are reaching a wide range of diverse organisations with a wide geographical spread. What follows are some examples of organisations being serviced through redistribution:

- ❑ various sections of the health department;
- ❑ private clinics and hospitals;
- ❑ traditional healers;
- ❑ private doctors;
- ❑ pharmacies;
- ❑ schools;
- ❑ tertiary institutions;
- ❑ other government departments including, for example, departments of Safety and Security, Justice, Labour, Public Works, Land Affairs and Water Affairs;
- ❑ prisons;

- South African Broadcasting Corporation;
- trade unions;
- HIV/AIDS organisations;
- youth groups;
- advice centres;
- women's groups;
- welfare organisations;
- musician groups;
- faith based organisations;
- political organisations;
- private sector companies such as Rand Water, Anglo American and other mining houses, Transnet, WasteTec, Nampak, Woolworths, and Pick 'n Pay.

The Health Promotion Resource Centre in the Western Cape, for example, had a redistribution list of some 250 organisations and the AIDS Consortium redistributed to some 50 organisations.

Various organisations responded to requests, organised materials, and allowed for delivery and collection from their offices. For example, the respondent from the Namaqualand regional health department said: "We are very proactive with distribution. We have volunteers who call up users and ask them about their stocks and update them on any new materials. Then they also follow up to find out if it is being properly distributed." One respondent referred to the redistribution process as "spreading the gospel" about HIV/AIDS.

CONCLUSIONS

This research has highlighted the enormous demand for the AAO facility and materials across a wide range of organisations and sectors in South Africa. Over 12-million items were delivered to 1 094 organisations during 1999, with 3-million items going out in November, the month preceding World AIDS Day.

The availability of a wide range of large volumes of HIV/AIDS materials, accessibly-written and in all South African languages, has given impetus to, and transformed, important elements of the work users are able to do. Most respondents felt their HIV/AIDS work would be severely hampered if the AAO service and resources were constrained or discontinued.

One constraint is that the AAO was located within a relatively short-term tender, which made it difficult to set up systems more appropriate to a longer term initiative. Previous systems located directly in government were not efficient, thought has to be given to systems that allow for medium-term management of the service within tender arrangements.

The short-term nature of the project and the limitations of budget did not allow for widespread promotion of the resource. Clearly there is considerable need, and great potential to expand the reach of the resources, particularly within sectors that are only now beginning to become active in HIV/AIDS work.

More than meets the eye

Interviews were conducted with first-tier users of AAO materials – ie. those who had ordered from the AAO directly. What emerged from the interviews was the existence of a well-organised, extensive, second-tier distribution of AAO materials to partner organisations and constituencies. Data from the AAO thus represents a limited picture of the wide and diverse second-tier distribution. The research also highlighted that materials are used in a range of settings, and for a range of purposes.

The AAO ordering and delivery system works effectively, according to the vast majority of the respondents. Nevertheless, at the time of the research, both the AAO and the ADWarehouse were implementing new systems to limit some of the inefficiencies and problems born out of a growing demand-driven service. Included in future plans are concrete ways of ensuring better, regular communication with AAO users. This should include encouraging users to engage with the AAO to articulate where they identify gaps.

Future materials

Several of the respondents, whilst appreciating the value of existing generic base-line materials, argued that there is an emerging need for new materials on the great range of issues that HIV/AIDS continues to raise. They say there is a need for more in-depth materials on various issues, like healthful living.

To assess the direct impact of the AAO materials further research with end users of the materials would need to be undertaken.

Some consideration should be given to materials supporting illiterate audiences. However, this depends on organisations being able to adopt appropriate methodologies for the use of materials intended for illiterate or semi-literate audiences.

APPENDIX ONE: Sample of AAO Distribution: Month 11 (November 1999)

Organisation	Name	Address	Province	Date	Total order	Posters	Leaflets	Booklets	Utility	Caps/T-shirts
GOVERNMENT: NATIONAL / PROVINCIAL/REGIONAL										
ATICC: Durban	T Mdluli	Durban	KZN	17.11.99	2,400	0	2,400	0	0	0
ATICC: East London	N Gordo	East London	EC	26.11.99	1,857	56	1,800	0	1	0
ATICC: Foreshore	F Adam	Foreshore	WC	8.11.99	3,200	0	3,200	0	0	0
ATICC: Hillbrow	Daniel	Hillbrow	G	25.11.99	8,192	90	8,100	1	1	0
ATICC: Hillbrow	P Phoshoko	Hillbrow	G	15.11.99	2,754	41	2,700	2	11	0
ATICC: Hillbrow	P Phoshoko	Hillbrow	G	22.11.99	1,694	90	1,600	1	3	0
ATICC: Hillbrow	I Lawrance	Hillbrow	G	24.11.99	1,484	84	1,400	0	0	0
ATICC: Nelspruit	C Leyswelg	Nelspruit	M	26.11.99	8,522	300	8,200	21	1	0
ATICC: Nelspruit	E Nkosi	Nelspruit	M	30.11.99	1,912	110	1,800	1	1	0
ATICC: Phuthaditjhaba (Tshwaranang AIDS Centre)	A Klaase	Phuthaditjhaba	FS	8.11.99	6,480	2,000	4,400	50	0	30
ATICC: Pietermaritzburg	A Noosen	Pietermaritzburg	KZN	24.11.99	3,320	120	3,200	0	0	0
ATICC: Pietersburg	H Smith	Pietersburg	NP	9.11.99	3,520	120	3,400	0	0	0
ATICC: Witbank	W Miotshwa	Witbank	M	30.11.99	100	0	0	0	100	0
ATTIC: Durban	T Mdluli	Durban	KZN	4.11.99	801	100	700	0	1	0
Commission: Free State Youth	P Molebatsi	Bloemfontein	FS	11.11.99	3,141	100	3,040	0	1	0
Commission: Northern Province Youth	Ratshikhopha	Pietersburg	NP	8.11.99	30	0	0	0	0	30
Council: Agricultural Research	L Malope	Pretoria	NAT	12.11.99	800	100	700	0	0	0
Department of Agriculture: Mmabatho	Nomawethu	Mmabatho	NW	10.11.99	32,090	90	32,000	0	0	0
Department of Agriculture: Mmabatho	N Dondolo	Mmabatho	NW	26.11.99	600	0	600	0	0	0
Department of Agriculture: Pretoria	R Lebeso	Pretoria	NAT	22.11.99	10	0	0	0	10	0
Department of Agriculture: Pretoria	N Kambule	Pretoria	NAT	29.11.99	0	0	0	0	0	0
Department of Education: East London	W Mngxekeza	East London	EC	22.11.99	6	0	0	5	1	0
Department of Education: Empangeni	E Veldsman	Empangeni	KZN	1.11.99	22,352	400	21,900	10	42	0
Department of Education: Kimberley	D Benjamin	Kimberley	NC	26.11.99	2,482	80	2,400	1	1	0
Department of Education: Kwa Xuma	T Morakile	Kwa Xuma	KZN?	17.11.99	9,562	400	9,000	60	102	0
Department of Education: Pretoria	M Kgabi	Pretoria	NAT	11.11.99	6,201	100	6,100	0	1	0
Department of Finance: Pretoria	B Kliuwane	Pretoria	NAT	17.11.99	10	0	0	0	10	0
Department of Health	D Saso	????	?	18.11.99	2,484	84	2,400	0	0	0
Department of Health: EC	N Madonsela	Bisho	EC	2.11.99	4,962	160	4,800	2	0	0
Department of Health: EC	N Madonsela	Bisho	EC	22.11.99	1,640	0	1,640	0	0	0
Department of Health: EC	L Klaas	Kokstad	KZN	30.11.99	120	0	0	0	120	0
Department of Health: FS	M Motseki	Free State	FS	8.11.99	25,221	0	25,100	101	20	0
Department of Health: G	Z Mashinini	Johannesburg	G	18.11.99	5,614	1,600	4,000	14	0	0
Department of Health: G	Miriam	Johannesburg	G	29.11.99	9,605	600	9,000	4	1	0
Department of Health: G	Sam	Johannesburg	G	29.11.99	1,702	101	1,600	0	1	0
Department of Health: G	Z Mashinini	Johannesburg	G	30.11.99	1,300	1,300	0	0	0	0
Department of Health: M	L Nkosi	Nelspruit	M	25.11.99	4,945	200	4,550	85	110	0
Department of Health: National	R Schoeman	Pretoria	NAT	1.11.99	1,531	90	1,440	0	1	0
Department of Health: National	D Seakamela	Pretoria	NAT	2.11.99	3,281	80	3,200	0	1	0
Department of Health: National	R Schoeman	Pretoria	NAT	3.11.99	14,522	2,400	12,000	20	102	0
Department of Health: National	D Seakamela	Pretoria	NAT	4.11.99	4,904	400	4,500	2	2	0
Department of Health: National	R Schoeman	Pretoria	NAT	18.11.99	5,000	0	5,000	0	0	0
Department of Health: National	R Schoeman	Pretoria	NAT	26.11.99	485	20	460	5	0	0
Department of Health: National	Thomas	Pretoria	NAT	10.11.99	10	0	0	0	10	0
Department of Health: NC	C Modise	Kimberley	NC	22.11.99	3,364	164	3,200	0	0	0
Department of Health: NC	C Qula	Kimberley	NC	22.11.99	3,292	80	3,200	2	10	0
Department of Health: NP	M Makwea	Pietersburg	NP	8.11.99	2,941	200	2,600	41	100	0
Department of Health: NP	Mrs Lamola	Pietersburg	NP	16.11.99	29,083	1,600	27,200	82	201	0
Department of Health: NP	M Makuela	Pietersburg	NP	29.11.99	2,861	160	2,700	0	1	0
Department of Health: NP	Maitisa	Pietersburg	NP	30.11.99	18,882	290	18,500	22	70	0
Department of Health: NW	Mr Tlasana	Mmabatho	NW	23.11.99	215	0	200	15	0	0
Department of Health: WC	R van Wyk	Cape Town	WC	16.11.99	4,560	160	4,400	0	0	0
Department of Public Works	G Molokomme	Pretoria	NAT	22.11.99	1,303	102	1,200	0	1	0
Department of Social Services	J Criessel	Germiston	G	18.11.99	1,302	100	1,200	1	1	0
Department of Sports Arts and Culture	D Mduyana	Kimberley	NC	22.11.99	2,480	80	2,400	0	0	0
Department of Transport	P Mogatsi	Kimberley	NC	29.11.99	5,230	10	5,200	20	0	0
Department of Water	B Mayosi	Bellville	WC	26.11.99	4,072	70	4,000	0	2	0
Department of Water: National	M Mello	Pretoria	NAT	3.11.99	436	24	404	8	0	0
Department of Water: National	S Melio	Pretoria	NAT	12.11.99	10,702	500	10,200	0	2	0

Organisation	Name	Address	Province	Date	Total order	Posters	Leaflets	Booklets	Utility	Caps/T-shirts
Department of Welfare	F Madlopha	Durban	KZN	25.11.99	7,505	500	7,000	0	5	0
HIV/AIDS/STD Co-ordinator: Butterworth	N Lefume	Butterworth	EC	8.11.99	1,082	81	1,000	0	1	0
HIV/AIDS/STD Co-ordinator: Dunnotar	J Khumalo	Dunnotar	G	29.11.99	4,091	90	4,000	0	1	0
HIV/AIDS/STD Co-ordinator: Flagstaff	Ms Ntshangase	Flagstaff	EC	11.11.99	28,406	400	27,900	4	102	0
HIV/AIDS/STD Co-ordinator: George	L Mguzulwa	George	WC	22.11.99	781	80	700	0	1	0
HIV/AIDS/STD Co-ordinator: Germiston	Q Methebula	Germiston	G	11.11.99	1,279	24	1,250	0	5	0
HIV/AIDS/STD Co-ordinator: Hammanskraal	D Matwaisane	Hammanskraal	G	8.11.99	9,681	80	9,600	0	1	0
HIV/AIDS/STD Co-ordinator: Humansdorp	N Balcumeni	Humansdorp	EC	3.11.99	1,693	90	1,600	2	1	0
HIV/AIDS/STD Co-ordinator: King William's Town	H Mnyanda	King Williams Town	EC	4.11.99	1,692	90	1,600	1	1	0
HIV/AIDS/STD Co-ordinator: Klerksdorp	L Smith	Klerksdorp	NW	4.11.99	1,492	90	1,400	1	1	0
HIV/AIDS/STD Co-ordinator: Kuruman	J Balepile	Kuruman	NC	8.11.99	3,602	0	3,600	1	1	0
HIV/AIDS/STD Co-ordinator: Malmesbury	T Qukula	Malmesbury	WC	12.11.99	5,112	90	5,020	1	1	0
HIV/AIDS/STD Co-ordinator: Mount Frere	S Ntayiya	Mount Frere	EC	25.11.99	12	0	2	8	2	0
HIV/AIDS/STD Co-ordinator: Mount Frere	S Ntayiya	Mount Frere	EC	30.11.99	240	0	0	0	240	0
HIV/AIDS/STD Co-ordinator: Nylstroom	H Gouws	Nylstroom	NP	8.11.99	781	80	700	0	1	0
HIV/AIDS/STD Co-ordinator: Nylstroom	H Gouws	Nylstroom	NP	17.11.99	209	4	200	4	1	0
HIV/AIDS/STD Co-ordinator: Nylstroom	A Mayisa	Nylstroom	NP	26.11.99	355	50	300	5	0	0
HIV/AIDS/STD Co-ordinator: Phalaborwa	S Joeikia	Phalaborwa	NP	4.11.99	1,205	4	1,200	0	1	0
HIV/AIDS/STD Co-ordinator: Port Shepstone	M Mabuyi	Port Shepstone	KZN	2.11.99	1,481	80	1,400	0	1	0
HIV/AIDS/STD Co-ordinator: Potchefstroom	M Ntshale	Potchefstroom	NW	22.11.99	1,361	80	1,280	0	1	0
HIV/AIDS/STD Co-ordinator: Rustenburg	G Nare	Rustenburg	NW	9.11.99	3,593	90	3,500	2	1	0
HIV/AIDS/STD Co-ordinator: Schweize-Reneke	Verreira	Schweize-Reneke	NP	8.11.99	1,691	90	1,600	1	0	0
HIV/AIDS/STD Co-ordinator: Springbok	E Richards	Springbok	NC	9.11.99	2,451	40	2,400	10	1	0
HIV/AIDS/STD Co-ordinator: Springbok	E Richards	Springbok	NC	9.11.99	3,487	85	3,400	1	1	0
HIV/AIDS/STD Co-ordinator: Standerton	R Vellema	Standerton	M	10.11.99	4,373	170	4,200	2	1	0
HIV/AIDS/STD Co-ordinator: Standerton	S Valema	Standerton	M	18.11.99	50	50	0	0	0	0
HIV/AIDS/STD Co-ordinator: Standerton	R Vellema	Standerton	M	29.11.99	17,813	800	17,000	12	1	0
HIV/AIDS/STD Co-ordinator: Taung Station	C Mashuge	Taung Station	NW	29.11.99	7,647	205	7,440	1	1	0
HIV/AIDS/STD Co-ordinator: Upington	B van Wyk	Upington	NC	26.11.99	2,110	300	1,800	10	0	0
HIV/AIDS/STD Co-ordinator: Vryburg	P Mzinjzina	Vryburg	NW	4.11.99	4,691	90	4,600	0	1	0
HIV/AIDS/STD Co-ordinator: Witbank	D Mashego	Witbank	M	24.11.99	14,602	400	14,200	1	1	0
Natal Blood Transfusion Service	B Ndlela	Pinetown	KZN	8.11.99	18,414	2,300	16,000	112	2	0
National Centre for Health	S Mathinya	Braamfontein	G	30.11.99	6,601	400	6,200	1	0	0

GOVERNMENT: LOCAL AND DISTRICT

Centralised Store Returns	S Diale	Doornfontein	G	11.11.99	2,490	90	2,400	0	0	0
City Council	S Mattoko	Benoni	G	25.11.99	30,900	400	30,500	0	0	0
City Health Department	B Ngcobo	Durban	KZN	26.11.99	16,500	100	16,400	0	0	0
Community Health Centre: Chiawelo	G Leseyr	Potchefstroom	NW	18.11.99	2,502	101	2,400	1	0	0
Community Health Centre: Chiawelo	B Jacobs	Chiawelo	G	30.11.99	7,621	0	7,505	14	102	0
Community Health Centre: Koppies	J Human	Koppies	FS	23.11.99	1,370	60	1,310	0	0	0
Community Health Service: Pimville Clinic	X Gumbi	Soweto	G	25.11.99	3,302	700	2,600	1	1	0
District Council: Eastern Region	J Mokoka	Temba	NW	10.11.99	1,210	20	1,190	0	0	0
District Council: Winelands	L Heffenaar	Paarl	WC	11.11.99	11,224	140	11,060	4	0	20
District Health Programmer	M Marumo	Welkom	FS	8.11.99	2,302	101	2,200	0	1	0
District Health Services	D Mohabane	Kroonstad	FS	29.11.99	3,095	254	2,840	0	1	0
District Health System Provincial Hospital	R Serrippe	Free State	FS	8.11.99	5,131	620	4,500	10	1	0
District Health: Ugu North	K Nkuna	Scottburgh	KZN	30.11.99	0	0	0	0	0	0
District Office: Albany	B Yako	Grahamstown	EC	10.11.99	1,500	90	1,400	10	0	0
Family Planning Care	Sister Savage	Graaff Reinet	EC	11.11.99	3,478	750	2,400	128	200	0
Government Communications	C Mokgalaka	Mmabatho	NW	8.11.99	14,820	0	14,800	20	0	0
Grahamstown Health	J Adar	Grahamstown	EC	29.11.99	4,612	110	4,500	1	1	0
Health Department	T Nolabandoba	Pietermaritzburg	KZN	26.11.99	4,870	450	4,400	20	0	0
Health Educator	S Gordon	Stellenbosch	WC	25.11.99	1,710	0	1,600	110	0	0
Health Promotion Resource Centre: Wynberg	L Boardman	Wynberg	WC	22.11.99	3,761	160	3,600	0	1	0
Health Promotion: Chiawelo	Pat	Chiawelo	G	30.11.99	2,722	210	2,500	0	12	0
Health Promotion: Hillbrow	P Phoshoko	Hillbrow	G	30.11.99	200	0	0	200	0	0
Health Promotion: Hillbrow	T Nkuna	Hillbrow	G	22.11.99	5,856	600	5,200	4	52	0
Health promotion: Hillbrow	M Khumaw	Hillbrow	G	22.11.99	3,411	210	3,200	0	1	0
Health promotion: Hillbrow	J Nkuna	Hillbrow	G	24.11.99	761	50	710	0	1	0
Health Promotion: Johannesburg	A Nhlanguwini	Johannesburg	G	24.11.99	18,022	600	17,400	10	12	0
Health Promotion: Mount Ayliff	N Nonjeka	Staffords Post	EC	10.11.99	30	30	0	0	0	0
Health Region: West Rand	S Ngombela	Krugersdorp	G	29.11.99	58,630	2,500	56,000	100	0	30
Health Services: Emnambithi	Ramalingum	Ladysmith	KZN	3.11.99	4,601	400	4,200	0	1	0
Health Services: North West	M Sello	Ventersdorp	NW	10.11.99	1,400	0	1,400	0	0	0

Organisation	Name	Address	Province	Date	Total order	Posters	Leaflets	Booklets	Utility	Caps/T-shirts
Health Training & Infomation	Dapi	Thokoza	G	17.11.99	3,260	50	3,200	6	4	0
HIV/AIDS District Co-ordinator	N Malinga	Kroonstad	FS	18.11.99	5,920	500	5,400	20	0	0
Library Services: Cape Provincial	J de Villers	Cape Town	WC	3.11.99	846	60	780	6	0	0
Medical Command Eastern Transvaal	L Steenkamp	Nelspruit	M	9.11.99	8,420	4,800	3,600	0	20	0
Metropolitan AIDS Reasearch	Nursamill	Cape Town	WC	22.11.99	8,461	160	8,300	0	1	0
Metropolitan Council: Durban	N Makhathini	Durban	KZN	26.11.99	1,651	50	1,600	0	1	0
Metropolitan Local Council: Southern	C Senne	Johannesburg	G	26.11.99	26,525	6,000	20,500	0	5	20
Metropolitan Local Council: Western	M Madithupe	Roodepoort	G	9.11.99	2,228	165	2,060	0	3	0
Primary Health Care: Wits	Nel	Roodepoort	G	24.11.99	4,200	0	4,200	0	0	0
Social Services	P Cloete	Kathu	NC	16.11.99	19,000	1,000	18,000	0	0	0
Tourist Centre	P Setshedi	Bloemfontein	FS	10.11.99	12	0	0	0	0	12
Ukukhanya Komphakathi PHC	D Ngcobo	Lenasia	G	26.11.99	60,000	0	60,000	0	0	0
Welfare Department	N Zoleka	Port Elizabeth	EC	29.11.99	4,638	0	4,600	4	4	30
Youth Development	Batjha	Drome		26.11.99	8,051	0	8,000	1	30	20
CLINICS AND HOSPITALS										
Care Centre: St Francis	Tony Rafferty	Boksburg North	G	11.11.99	2,550	50	2,400	90	10	0
Care Centre: St Francis	Tony Rafferty	Boksburg North	G	23.11.99	3,480	200	3,200	0	0	80
Care Centre: St Francis	Tony Rafferty	Boksburg	G	29.11.99	25	0	0	0	0	25
Clinic: Alexandra	M Mlotshwa	Alexandra	G	30.11.99	1,250	100	1,150	0	0	0
Clinic: Boithusong	P Tsholo	Kutlwanoong	FS	12.11.99	100	0	0	0	100	0
Clinic: ERelebohile	O Serghthi	Hillbrow	G	4.11.99	15,123	101	15,010	10	2	0
Clinic: Esangweni	R Mothibi	Tembisa	G	30.11.99	4,252	251	4,000	0	1	0
Clinic: Hymertology	M Simpe	Potchestroom	NW	5.11.99	23,940	3,800	20,000	20	120	0
Clinic: Kempton Park	R Prinsloo	Kempton Park	G	4.11.99	5,462	0	5,440	12	10	0
Clinic: Kempton Park	P Machethe	Kempton Park	G	23.11.99	10,212	810	9,400	1	1	0
Clinic: Kutlwanoong	Sister Lizzy	Kutlwanoong	FS	12.11.99	2,340	700	1,610	0	0	30
Clinic: Metsimahalo	Sr Mofokeng	Oranjeville	FS	8.11.99	33,050	0	33,000	50	0	0
Clinic: Olifantshoek	Mrs Kotzee	Northern Cape	NC	9.11.99	2,331	230	2,100	0	1	0
Clinic: Orangeville	M Strydom	Oranjeville	FS	23.11.99	2,410	10	2,400	0	0	0
Clinic: Peterse Clinic	Sister Rode	Worcester	WC	5.11.99	12	0	0	0	10	2
Clinic: Philani	C Shabalala	Frankfort	FS	9.11.99	441	200	200	0	40	1
Clinic: Phomolong	J Mabitsele	Johannesburg	G	30.11.99	11	0	0	0	11	0
Clinic: Qalabotjha	L Komane	Villiers	FS	11.11.99	10	0	0	0	10	0
Clinic: Randvaal	C Nkosi	Randvaal	G	29.11.99	1,501	200	1,300	0	1	0
Clinic: Randvaal	S Akosi	Randvaal	G	26.11.99	3,511	100	3,410	0	1	0
Clinic: Relebohile	T Mokone	Vredefort	FS	25.11.99	34,630	11,000	23,600	30	0	0
Clinic: Sizweni	Paulina	Evaton	G	29.11.99	610	600	0	0	0	10
Clinic: Vlakkfontein	Lilly	Vlakkfontein	G	30.11.99	26,181	4,000	22,000	180	1	0
Clinic: War Memorial	S Jwambi	Alice	EC	3.11.99	53,031	600	52,400	1	0	30
Health Care Centre: Thlabane	L Foss	Thlabane	NW	3.11.99	13,517	450	12,950	2	55	60
Health Care Centre: Nkuna	Tzaneen	Tzaneen	NP	23.11.99	9,323	110	9,200	11	2	0
Health Care Centre: Nkuna	O Balayi	Tzaneen	NP	16.11.99	1,801	400	1,400	0	1	0
Hospice: GaRankuwa Sunshine	M Matlebyane	GaRankuwa	NW	29.11.99	3,200	0	3,200	0	0	0
Hospice: Viljoenskroon	H Evans	Viljoenskroon	FS	8.11.99	2,001	0	2,000	0	1	0
Hospital: Benoni	J Jime	Benoni	G	29.11.99	21,704	2,100	19,600	4	0	0
Hospital: GaRankuwa	E Modiragale	Pretoria	G	8.11.99	150	130	0	0	20	0
Hospital: GaRankuwa	M Makgoane	Pretoria	NW	9.11.99	150	130	0	0	20	0
Hospital: Hillbrow		Hillbrow	G	12.11.99	1,802	200	1,600	1	1	0
Hospital: Hillbrow	Ingrid	Hillbrow	G	25.11.99	3,300	500	2,800	0	0	0
Hospital: Klerksdorp	J Smit	Klerksdorp	NW	18.11.99	2,119	900	1,200	9	10	0
Hospital: Lenasia South	Lilly	Lenasia	G	2.11.99	3,045	320	2,720	5	0	0
Hospital: Livingstone	L Ncaca	Port Elizabeth	EC	4.11.99	23,000	23,000	0	0	0	0
Hospital: Louise Pasteur	E Mabena	Pretoria	G	10.11.99	300	300	0	0	0	0
Hospital: Mmamethate	R Kolokto	Mmamethate		29.11.99	11,043	440	10,400	100	103	0
Hospital: Odi Community	Ndud	Mabopane	NW	18.11.99	300	0	300	0	0	0
Hospital: Provincial	L Greyling	Port Elizabeth	EC	4.11.99	2,125	200	1,920	4	1	0
Hospital: Provincial	S Mohajane	Jagersfontein	FS	9.11.99	41,200	10,500	30,700	0	0	0
Hospital: Provincial	S Mohajane	Jagersfontein	FS	10.11.99	22,600	2,500	20,000	100	0	0
Hospital: RD	Mhlongo	Durban	KZN	5.11.99	2,802	100	2,700	0	2	0
Hospital: Sebokeng	C Mooi	Sebokeng	G	18.11.99	120	0	0	0	0	120
Hospital: Sebokeng	C Mooi	Sebokeng	G	23.11.99	22,020	1,000	21,000	0	20	0
Hospital: St Patrick	L Mdinyane	Bizana	EC	8.11.99	18,502	300	18,200	1	1	0
Hospital: Stanger	M Mbatha	Stanger	KZN	5.11.99	6,080	80	6,000	0	0	0
Hospital: Stanger	C Nxaba	Stanger	KZN	30.11.99	4,104	100	4,000	0	0	4

Organisation	Name	Address	Province	Date	Total order	Posters	Leaflets	Booklets	Utility	Caps/T-shirts
Hospital: Swastland	T Qukula	Malmesburg	WC	23.11.99	4,461	360	4,100	0	1	0
Hospital: Tshwaragane	J Balepile	Kuruman	NC	2.11.99	15,618	3,805	11,800	8	5	0
Hospital: University	Stofile	Bloemfontein	FS	17.11.99	260	160	100	0	0	0
Hospitals: Gauteng Provincial	GaRankuwa	NW	26.11.99	4,296	1,320	2,800	166	10	0	
Wellness Centre: Zenzeleni	A Ngoako	Galeshewe	NC	12.11.99	35	0	0	0	20	15
AIDS ORGANISATIONS										
Agape AIDS Support Group	Zelda	Paarl East	WC	4.11.99	902	100	800	2	0	0
AIDS Awareness project	S Bebenise	Maboloko	NW	18.11.99	1,500	0	1,500	0	0	0
AIDS Foundation	O Qulo	Durban	KZN	3.11.99	4	0	0	4	0	0
AIDS Prevention Group	C Manhaeve	Warmbaths	NP	16.11.99	2,640	200	2,440	40	0	0
Beaufort AIDS Action Group	L Smith	Beaufort West	WC	24.11.99	5,703	200	5,500	2	1	0
Dramaide	Thenjiwe	Durban	KZN	26.11.99	1,905	104	1,800	0	1	0
Generations AIDS Program	G Nhlabati	Meyersdal	G	29.11.99	10,502	501	10,000	1	0	0
NACOSA	L Simelane	Soshanguve	G	18.11.99	5,165	115	5,030	10	10	0
Ncohi Mbod AIDS Committee	A Moslane	Braamfontein	G	8.11.99	0	0	0	0	0	0
Orange Farm Anti-AIDS Club	M Nlatshwayo	Johannesburg	G	9.11.99	10,004	600	9,200	4	0	200
Phagameng AIDS Information	M Motshegoa	Nylstroom	NP	30.11.99	2,812	1,000	1,800	1	11	0
Phatanani AIDS Awareness	R Ramohohedi	Thohoyandou	NP	8.11.99	2,050	0	2,000	0	50	0
The AIDS Consortium	V Fichards	Braamfontein	G	17.11.99	14,190	180	14,000	0	0	10
The AIDS Consortium	V Fichards	Braamfontein	G	18.11.99	160	0	0	50	100	10
Township AIDS Project	A Otukile	Jabavu	G	29.11.99	12	0	0	0	0	12
Voorsman Leratong AIDS Centre	J Batlett	Welkom	FS	3.11.99	38,834	3,200	35,600	32	2	0
Winterveldt AIDS Awareness Project	E Mphelo	Winterveld	NW	5.11.99	6,610	0	6,600	0	10	0
Youth on Track AIDS Project	A Lesufi	Pretoria	G	2.11.99	30	0	0	0	10	20
NGOs and CBOs										
Active International Community Development	S Masete	Mpumalanga	M	8.11.99	1,708	108	1,600	0	0	0
Aurum Health Research	B Mahosela	Welkom	FS	18.11.99	3,267	2	3,250	4	11	0
Bakamuso Rural Development Project	L Makhubele	Tzaneen	NP	4.11.99	2,211	110	2,100	0	1	0
Batjha Youth Development	E Ntshidi	Lyndhurst	G	26.11.99	11,441	200	11,200	40	1	0
Bekokhwakhe	X Shange	Umbumbulu	KZN	3.11.99	4,627	50	4,520	55	2	0
Bellahia	Bela-Bela	Dyssensweg	N	11.11.99	381	70	310	0	1	0
Bophelong Home Information Services	L Misegoathe	Mothatlung	FS	17.11.99	604	4	600	0	0	0
Charts Work Child and Family Welfare	H Alli	Melvin	KZN	2.11.99	2,792	90	2,700	1	1	0
Cuyler Place of Hope	S Smiles	Uitenhage	EC	22.11.99	1,896	84	1,800	1	11	0
Cuyler Place of Hope	S Smiles	Uitenhage	EC	10.11.99	3,769	164	3,604	0	1	0
Cuyler Place of Hope	S Smiles	Uitenhage	EC	9.11.99	2,240	0	2,240	0	0	0
Disabled People	S Lebona	Reitzpark	FS	29.11.99	2,552	101	2,450	0	1	0
Education Support Centre	H Joubert	Nigel	G	29.11.99	466	50	400	15	1	0
Emily Jordan House	E Mabote	Kagiso	G	29.11.99	14,348	500	13,800	40	8	0
Fame Youth Club	T Radebe	Klerksdorp	NW	8.11.99	6,151	50	6,100	0	1	0
Fame Youth Club	B Yondi	Jouberton	NW	9.11.99	8,011	510	7,500	0	1	0
FAMSA	N Magungu	Stutterheim	EC	22.11.99	5,002	200	4,800	1	1	0
Friends for Life	L Sulupha		G	30.11.99	741	40	700	0	1	0
Fynbos Working for Water	B Mayosi	Bellville	WC	4.11.99	6,031	10	6,000	20	1	0
Godipola Youth Group	N Maisela	Dube	G	5.11.99	3,202	1	3,200	0	1	0
Health Care Trust	M Pinyana	Cala	EC	24.11.99	3,202	0	3,200	1	1	0
Hope for the Poor	G Mokou	Soweto	G	2.11.99	30,630	2,900	27,600	0	130	0
Independent Living Centre	L Mvuyana	Auckland Park	G	12.11.99	43,830	800	43,000	10	20	0
Ithavhama Training Initiative	M Takalo	Pietersburg	NP	11.11.99	2,952	150	2,800	1	1	0
Itoseng Youth Club Production	L Themba	Near Greblersdal	M	9.11.99	10,336	720	9,600	4	12	0
Lesedi La Setdhaba	T Moilda	Bloemfontein	FS	22.11.99	2,285	34	2,250	0	1	0
Lesedi Project	S Ralepeli	Cornelia	FS	4.11.99	3,713	1,000	2,700	1	12	0
Lesedi Project	S Ralepeli	Cornelia	FS	5.11.99	1,014	1,010	0	0	4	0
Life Line: Benoni	J Findlay	Benoni	G	4.11.99	3,380	375	3,000	4	1	0
Life Line: Mafikeng	J Afrika	Mafikeng	NW	2.11.99	5,306	5,300	0	6	0	0
Life Line: Mafikeng	Jabu Afrika	Mafikeng	NW	9.11.99	6,250	400	5,840	0	10	0
Lungelo Women's Organisation	Mataung	Meadowlands	G	30.11.99	925	120	800	3	2	0
Masiphathisane Project	N Molopyane	Pretoria	G	8.11.99	590	0	500	70	20	0
Mission to Live	N Nogxina	KwaMhlanga	M	4.11.99	3,400	0	3,250	50	100	0
Mthusimpilo Outreach Project	B Tsdego	Carltonville	G	25.11.99	2,300	0	2,300	0	0	0
National Language Project	A Nokhephu	Woodstock	WC	22.11.99	11	0	0	1	10	0
National Progressive Primary Health Care Network	I Nkhereanye	Klerksdorp	NW	8.11.99	10	0	0	0	10	0
National Progressive Primary Health Care Network	I Mkhreanye	Klerksdorp	NW	26.11.99	50	0	0	50	0	0

Organisation	Name	Address	Province	Date	Total order	Posters	Leaflets	Booklets	Utility	Caps/T-shirts
Norman House Place of Safety	C Neil	Edenvale	G	22.11.99	50	0	0	50	0	0
Norman House Place of Safety	C Neil	Edenvale	G	29.11.99	250	0	0	250	0	0
Oasis Rover Crew	Thabiso	Springs	G	11.11.99	60	0	0	30	0	30
Oasis Rover Crew	Thabiso	Springs	G	26.11.99	583	4	510	55	12	2
People Against Child and Women Abuse	R Shabalala	Mpumalanga	M	29.11.99	2,050	0	0	50	2,000	0
Phagameng	M Motshegooi	Nylstroom	NP	10.11.99	7,062	50	7,000	0	12	0
Phila Phidise	L Kidiwetse	Sasolburg	G	3.11.99	27,960	900	27,000	0	0	60
PPC Lime	I Ross	Lime Acres	NC	5.11.99	2,923	300	2,600	11	12	0
Reitsositse Health Education Force for Change	Keilelang	Itsoseng	NW	8.11.99	16,504	1,200	15,300	0	4	0
SA National Civic Organisation	O Serumula	Diepkloof	G	8.11.99	1,530	0	1,500	0	0	30
SA National Civic Organisation	O Serumula	Diepkloof	G	12.11.99	2	0	0	0	2	0
SA Red Cross	F Madika	Everton	G	8.11.99	4,150	3,900	250	0	0	0
SA Red Cross	S Madika	Everton	G	10.11.99	26,021	5,000	21,000	1	20	0
SA Red Cross	B Mbambo	Port Elizabeth	EC	26.11.99	110	0	0	0	100	10
Social Responsibility Co-ordinator	P Mofekeng	Free State	FS	3.11.99	120	0	120	0	0	0
Society for Family Health	T Matlael	Millpark	G	30.11.99	1,205	200	1,000	2	3	0
South African Community Organisation	S Masemdlu	Pretoria	G	4.11.99	9,721	820	8,900	0	1	0
South African Patriotic Club	Alex	Braamfontein	G	29.11.99	8,901	400	8,500	0	1	0
Trichardsdaal Youth	M Mokoena	Tzaneen	NP	3.11.99	15,014	3,750	11,100	162	2	0
Ubuntu Youth Organisation	K Telane	Sebokeng	G	26.11.99	6,395	185	6,200	10	0	0
WACA Youth Project	R Mokone	GaRankuwa	NW	11.11.99	100	90	0	0	0	10
Women Against Community Abuse	Brits		NW	16.11.99	560	500	0	0	10	50
World Health Organisation	E Chidonza	Pretoria	G	12.11.99	300	0	0	50	200	50
YMCA	A Maubane	Braamfontein	G	9.11.99	4,912	400	4,500	1	11	0
Young People's Division: Women's Missionary	S Sello	Kwa Xuma	KZN	3.11.99	64	0	0	4	0	60
POLITICAL FORMATIONS										
ANC Youth League: Butterworth	V Motshanda	Butterworth	EC	22.11.89	1,681	80	1,600	0	1	0
ANC Youth League: Somerset East	L Dulwana	Somerset East	EC	24.11.99	1,761	160	1,600	0	1	0
ANC Youth League: Vereeniging	M Tabo	Vereeniging	G	25.11.99	458	54	404	0	0	0
Democratic Party: Orange Grove	D Bergman	Orange Grove	G	29.11.99	2,980	180	2,800	0	0	0
Parliamentary Constituency	B Mabunda	Warmbaths	NP	26.11.99	50	0	0	0	0	50
R Constituency	R Constituency	Tzaneen	NP	23.11.99	20,307	1,100	19,200	0	7	0
WORKPLACE - BUSINESS										
AFRODC Occupational Healthcare	R Snyders	Bedfordview	G	8.11.99	340	90	250	0	0	0
AFROX	R Strydom	Port Elizabeth	EC	3.11.99	4,970	158	4,800	12	0	0
AFROX Occupational Health Care	J Koen	Postmasburg	NC	8.11.99	2,911	100	2,800	1	10	0
Beyond Millenium Tourism and Business	V Matshanda	Butterworth	EC	16.11.99	3,783	80	3,700	1	2	0
Cadbury	S Molefe	Denver	G	5.11.99	19,055	1,800	16,800	125	330	0
Communication Consultancy & Training	A Potgieter	Bethal	M	8.11.99	50,350	350	50,000	0	0	0
Council for Road Freight	D Wessemaar	Randburg	G	11.11.99	2,382	81	2,300	0	1	0
EDCON	H Sotenades	Johannesburg	G	5.11.99	900	100	800	0	0	0
EDCON	H Solerriades	Johannesburg	G	17.11.99	65,050	40	65,000	10	0	0
EDCON	H Solerriades	Crown Mines	G	23.11.99	445	32	404	8	1	0
Feroquip	Dawi	Nelspruit	M	18.11.99	415	15	400	0	0	0
Iscor Mine	R Mashigo	Thabazimbi	NP	12.11.99	10,202	200	10,000	1	1	0
Metropolitan Electrical City	D Setati	Johannesburg	G	30.11.99	2,242	13	2,200	25	4	0
Mooroesburgse Koring Boere	E Koeremoer	Moorreesburg	EC	10.11.99	10,000	10,000	0	0	0	0
Nampak Liquid	J Lepley	Industria West	G	3.11.99	13,420	410	12,900	100	10	0
Nampak Liquid	J Lepley	Industria West	G	26.11.99	4,078	55	4,000	13	10	0
Rand Air	Kerry	Wadeville	G	11.11.99	40	0	30	0	10	0
Red Cross Building	S Madika	Everton Vaal	G	12.11.99	3,932	330	3,600	0	2	0
SA Civil Aviation Authority	M Gingcana	Pretoria	G	8.11.99	358	30	320	2	6	0
SA Maritime Safety Authority	M Bester	Pretoria	G	24.11.99	9,304	1,000	8,300	0	1	3
SA Post Office	R Moholane	Braamfontein	G	16.11.99	3,715	200	3,500	10	5	0
Samcor Medical Centre	C Bonnecwe	Pretoria	G	8.11.99	8,630	2,000	6,600	30	0	0
Sasol Collieries	E Daniels	Mpumalanga	M	17.11.99	38,300	9,500	28,800	0	0	0
Sasol LTD	C Randall	Rosebank	G	25.11.99	69,150	2,550	66,600	0	0	0
Sasol Synthetic Fuel	B Mbabisa	Sasol	G	24.11.99	250	0	0	50	200	0
Sasol Synthetic Fuel	E Du Toit	Secunda	M	26.11.99	250	0	0	50	200	0
Sowetan	L Mazibuko	Johannesburg	G	10.11.99	9,541	3,320	6,200	15	6	0
Standard Bank of SA	C Stewart	Cape Town	WC	10.11.99	4,702	80	4,600	22	0	0
State Information Technology	D Mokgwetsi	Pretoria	G	9.11.99	226	90	135	0	1	0
Transmed Dispensary	J van Wyk	Outshoorn	WC	4.11.99	2,804	400	2,400	4	0	0

Organisation	Name	Address	Province	Date	Total order	Posters	Leaflets	Booklets	Utility	Caps/T-shirts
Transmed Medical Fund	F Prier	Alberton	G	2.11.99	14,620	3,800	10,800	0	0	20
Waltons Garage	M Wilton	Springs	G	9.11.99	10	0	0	0	10	0
WORKPLACE - TRADE UNIONS & OTHER WORKERS' BENEFIT										
Clothing Industry Health Care Fund	Z Ishmail	Salt River	WC	5.11.99	312	0	200	110	2	0
Clothing Industry Health Care Fund	Z Ishmail	Salt River	WC	8.11.99	36,634	30	36,551	53	0	0
Clothing Industry Health Care Fund	Z Ishmail	Salt River	WC	22.11.99	2,571	170	2,400	0	1	0
Communication Workers' Union	Marjorie	Bloemfontein	FS	11.11.99	3,100	100	3,000	0	0	0
COSATU	N Mokoena	Witbank	M	16.11.99	691	40	650	0	1	0
Demographic Nursing Organisation of SA	N Dyassop	Port Elizabeth	EC	9.11.99	3,200	0	3,200	0	0	0
Denosa	A Diesel	Port Elizabeth	EC	4.11.99	2,190	90	2,100	0	0	0
Mine Workers' Development	Suzan	Braamfontein	G	4.11.99	4,400	1,180	3,000	200	20	0
SADNU	B Molefi	Pretoria	G	18.11.99	360	0	0	250	100	10
South African Police Union	T Phetma	Port Elizabeth	EC	3.11.99	1,401	100	1,200	0	1	100
South African Police Union	T Phetuka	Port Elizabeth	EC	8.11.99	3,800	1,700	2,000	0	100	0
EDUCATIONAL INSTITUTIONS										
College of Education: Cape	L Pandy	Fort Beaufort	EC	3.11.99	842	150	690	2	0	0
Primary School: Boitumelong	S Mowela	Tembisa	G	22.11.99	3,200	100	3,000	100	0	0
Primary School: Fine Town	The Principal	Annerdale	G	10.11.99	901	100	800	0	1	0
Primary School: Matubeng	Mahlaphul	Mdantsane	EC	5.11.99	7,700	200	7,500	0	0	0
Primary School: Thuthukane Sizwe	I Thopane	Tsakane	G	10.11.99	7,432	60	7,300	0	2	70
Primary School: Tlakukani	Christine	Mamelodi	G	11.11.99	60	0	0	0	0	60
Primary School: Zimasa	M Mabutho	Western Cape	WC	25.11.99	13,346	0	12,000	0	15	1,331
School: Mehlareng Combined Farm School	V Baikhutso	Poredeil	?	3.11.99	12,820	400	12,400	0	20	0
Secondary School: ALRA	F Smith	Nigel	G	3.11.99	3,681	80	3,600	0	1	0
Secondary School: Garsfontein	D van Zyl	Garsfontein	G	18.11.99	5,486	1,400	3,800	166	120	0
Secondary School: Khanya Lesedi	M Nyawane	Heidelberg	G	8.11.99	11,563	4,300	7,200	63	0	0
Secondary School: Tongaat	V Moodley	Tongaat	KZN	9.11.99	16,100	0	15,600	0	0	500
Technikon: Eastern Cape	J Matikinca	Umtata	EC	18.11.99	1,600	400	1,200	0	0	0
Technikon: Mangosuthu	M Buthelezi	Umlazi	KZN	5.11.99	2,213	10	2,200	2	1	0
Technikon: North West	T Makgobo	Pretoria	G	3.11.99	1,400	1,000	400	0	0	0
Technikon: North West	T Makgabo	GaRankuwa	NW	16.11.99	11,306	500	10,800	4	2	0
Technikon: North West	T Mokgabo	GaRankuwa	NW	23.11.99	5,071	900	4,000	170	1	0
University of Cape Town	P Rademeyer	Rondebosch	WC	12.11.99	6,040	3,500	2,500	0	0	40
University of Cape Town: Occupational Health Nurse	S Key	Rondebosch	WC	9.11.99	12,250	2,050	10,200	0	0	0
University of Natal	M Ross	Congella	KZN	8.11.99	6,747	90	6,400	5	2	250
University of North West: Health Centre	T Ngakantsi	Mmabatho	NW	29.11.99	50,120	8,000	42,000	0	20	100
University of Port Elizabeth	A Goosen	Port Elizabeth	EC	12.11.99	12,300	300	12,000	0	0	0
University of Stellenbosch	A Bold	Matatieleland	WC	5.11.99	6,276	36	6,140	0	0	100
University of Western Cape	J Adonas	Bellville	WC	29.11.99	88,075	18,000	70,000	55	0	20
University: Medical University of Southern Africa	M Sebola	Medunsa	G	2.11.99	4,700	2,700	2,000	0	0	0
POLICE, PRISONS, MILITARY										
Correction Services: Rustenburg	Mr Lefeka	Rustenburg	NW	8.11.99	8,040	1,000	7,000	20	20	0
Correctional Services: Boksburg	S Luiters	Boksburg	G	25.11.99	2,130	0	2,130	0	0	0
Correctional Services: Nelspruit	A Mabunda	Nelspruit	M	25.11.99	150	0	0	50	100	0
Correctional Services: Pretoria	Masliela	Pretoria	G	8.11.99	5,420	400	4,900	120	0	0
Prison: Barberton Town	E Chiloane	Barberton	M	10.11.99	1,762	60	1,700	2	0	0
Prison: Barberton Town	E Chiloane	Barberton	M	25.11.99	3,501	400	3,100	0	1	0
South African Police Services: Braamfontein	A Bignaut	Braamfontein	G	17.11.99	100,480	480	100,000	0	0	0
South African Police Services: Kimberley	J Bean	Kimberley	NC	16.11.99	48,000	0	48,000	0	0	0
South African Police Services: Mpumalanga	M Moreli	M	M	4.11.99	2,301	200	2,100	0	1	0
South African Police Services: Potchestroom	M Montsi	Potchestroom	NW	5.11.99	11,616	200	11,400	12	4	0
RELIGIOUS ORGANISATIONS										
Anglican Church	B Cox	Johannesburg	G	29.11.99	11,202	2,600	8,600	0	2	0
Anglican Diocese of Highveld	L Coull	Edenvale	G	24.11.99	6,020	0	6,000	20	0	0
Christ the King	N Tshala	Rosettenville	G	18.11.99	12,653	50	12,551	51	1	0
Christian Social Service Council	S Kruger	Kempton Park	G	3.11.99	1,712	110	1,600	1	1	0
Christlike	L ven der Walt	Burgersdorp	EC	5.11.99	1,654	400	1,250	4	0	0
Church of the Province	H Mkhonza	Pretoria West	G	8.11.99	5,710	110	5,600	0	0	0
George Cristian Support Group	M van Rooyen	George	WC	5.11.99	250	0	250	0	0	0
Kerklike Maatskaplike Diens	M Bester	Drusang	WC	5.11.99	2,500	2,500	0	0	0	0
Methodist Church	M Mzondeki	Welkom	FS	8.11.99	7,641	440	7,200	0	1	0

Organisation	Name	Address	Province	Date	Total order	Posters	Leaflets	Booklets	Utility	Caps/T-shirts
Methodist Church of Southern Africa	S Ditabo	Hamanskraal	G	26.11.99	31,520	0	31,000	400	120	0
Rev Ngamalane	Rev Ngamalane	Soweto	G	2.11.99	8,660	2,660	6,000	0	0	0
St Mary's Anglican Church	Rev Mkhonza	Pretoria	G	8.11.99	400	400	0	0	0	0
OTHER										
A Galane	A Galane	Pietersburg	NP	11.11.99	76,520	4,000	72,000	0	520	0
A Giyose	A Giyose	Mafikeng	NW	8.11.99	67,520	3,500	63,500	0	520	0
ALPA	L Fourie	Kempton Park	G	18.11.99	3,292	90	3,200	1	1	0
CMR	L Dixon	Alberton	G	11.11.99	7,442	300	7,000	141	1	0
D Khakhane	D Khakhane	Bloemfontein	FS	3.11.99	2,382	81	2,300	0	1	0
D Mabuse	D Mabuse	Mamelodi	G	5.11.99	401	0	400	0	1	0
D Phelegi	D Phelegi	Monsterlus	NP	22.11.99	681	80	600	0	1	0
DACC	L Coull	Edenvale	G	10.11.99	20	4	10	5	1	0
DACC	L Coull	Edenvale	G	17.11.99	7,285	84	7,200	1	0	0
E Ngwekzi	E Ngwekzi	Pimeville	G	5.11.99	727	55	670	1	1	0
EAS Practitioner	M Brophy	Port Elizabeth	EC	4.11.99	181	40	140	0	1	0
Election House	N Malinga	Pretoria	G	9.11.99	25,014	0	25,002	10	2	0
F van Zyl	F van Zyl	Pretoria	G	4.11.99	6,500	2,500	4,000	0	0	0
F Vawda	F Vawda	Crosby	G	1.11.99	3,101	0	3,100	1	0	0
Fazi Operator	Reg	Bloemfontein	FS	29.11.99	8,900	100	8,800	0	0	0
G Kathula	G Kathula	Free State	FS	3.11.99	3,312	110	3,200	1	1	0
Information Control	van der Sandt	Uitenhage	EC	29.11.99	5,160	160	5,000	0	0	0
Ingeli Lidge	Carol		G	4.11.99	1,943	130	1,800	12	1	0
J Moela	J Moela	Witbank	M	30.11.99	24,346	4,500	19,200	626	20	0
J Nkuna	J Nkuna	Hillbrow	G	29.11.99	1,720	85	1,200	35	400	0
L Buurgault	L Buurgault	Durban	KZN	8.11.99	450	450	0	0	0	0
L Makgale	L Makgale	GaRankuwa	NW	11.11.99	3,300	3,300	0	0	0	0
M Febatse	M Febatse	Mamelodi	G	8.11.99	10,102	500	9,600	1	1	0
M Poetjie	M Poetjie	Meadowlands	G	8.11.99	6,422	1,110	5,300	1	11	0
Myburgh	Myburgh	Germiston	G	8.11.99	100	0	0	100	0	0
N Baker	N Baker	Johannesburg	G	30.11.99	50	0	0	50	0	0
N Myburgh	N Myburgh	Germiston	G	11.11.99	50	0	0	50	0	0
NADWA	T Dord	Port Elizabeth	EC	22.11.99	36,000	5,000	31,000	0	0	0
P Mokoke	P Mokoke	Soweto	G	9.11.99	30,444	440	30,000	0	4	0
P Pakatilla	P Pakatilla	Kinross	M	5.11.99	100	0	0	100	0	0
Pat Francis	P Francis	Cape Town	WC	12.11.99	3,470	340	3,100	0	30	0
T Nxumalo	T Nxumalo	Pimville	G	30.11.99	5,838	1,000	4,800	34	4	0
T Peo	T Peo	Boksburg	G	23.11.99	8,552	450	8,100	1	1	0
The Rec Room	F Potgieter	Pretoria West	G	4.11.99	16,012	3,320	12,500	40	2	150
Z Mohatle	Z Mohatle	Sebokeng	G	2.11.99	6,721	500	6,180	8	13	20
ZCBF	J Rogers	Richards Bay	KZN	8.11.99	690	0	640	0	0	50
BAC / Action Office										
AIDS Action Office	S Xaba	Auckland Park	G	1.11.99	500	100	400	0	0	0
AIDS Action Office	S Xaba	Millpark	G	8.11.99	1,900	100	1,800	0	0	0
AIDS Action Office	S Xaba	Millpark	G	16.11.99	1,891	90	1,800	1	0	0
AIDS Action Office	S Xaba	Millpark	G	18.11.99	5,411	410	5,000	0	1	0
AIDS Action Office	S Xaba	Millpark	G	24.11.99	5,201	200	5,000	0	1	0
AIDS Action Office	S Xaba	Millpark	G	29.11.99	2,756	350	2,400	5	1	0
AIDS Action Office	S Xaba	Millpark	G	30.11.99	2,405	0	2,400	0	5	0
AIDS Action Office	Mandi	Parkview	G	17.11.99	5,491	40	5,440	10	1	0
AIDS Action Office	Mandi	Parkview	G	29.11.99	1,546	190	1,300	55	1	0
TOTALS					3,149,701	286,632	2,843,552	7,060	8,460	3,997

APPENDIX TWO: AAO Order Form

AIDS Action Office. Postal: PO Box 994, Auckland Park, 2006. Physical: The Media Mill, The Annex, 7 Quince Street, Sunnyside, Johannesburg, 2092. Tel: (011) 482-6737 Fax: (011) 482-2099 e-mail: wba@icon.co.za

HIV/AIDS Materials are available free from the AIDS Action Office, and will be packaged and delivered within 14 days. **To place an order contact the AIDS Action Office at (011) 482-6737.**

The Beyond Awareness Campaign is a project of the HIV/AIDS and STD Directorate of the Department of Health, South Africa. It is managed by a consortium comprising four organisations: AIDS Media Research Project, DramAidE, Lindsay Smithers FCB, Wireless Additive.

beyond awareness campaign



AIDS HELPLINE
0800-0123-22

AMREP tel: (011) 646-1276 DramAidE tel: (0351) 93-911 ext 2272 Lindsay Smithers FCB tel: (011) 301-1300 Wireless Additive tel: (011) 482-6737

Items available include:

A2 Posters

- AIDS Helpline Poster (Green / White)
- How to use a Condom Poster
- Be Wise Condomise Poster (Youth)
- Be Wise Condomise Poster (White)
- Viva Condoms Poster
- STD Symptoms Poster
- STD Partner Referral Poster
- UNAIDS Renaldo Soccer Poster
- Talking About AIDS in the Community Poster

Multilingual Leaflets in all 11 languages

- Male condoms _____ (language)
- HIV/AIDS and STDs _____ (language)
- Key points about HIV/AIDS _____ (language)
- Caring for people with HIV/AIDS _____ (language)

- Living with HIV/AIDS _____ (language)
- HIV/AIDS and Rights _____ (language)
- HIV/AIDS and the Workplace _____ (language)
- HIV/AIDS and Counselling _____ (language)
- HIV/AIDS and Relationships _____ (language)
- HIV/AIDS and TB _____ (language)

Resource Guides

- HIV/AIDS Workplace Resource Guide
- Youth Action Guide

Utility items

- Metal Red Ribbon lapel badges
(Maximum 5 for individuals, 50 for organisations)
- Small Round Red Ribbon / Helpline Stickers (500s)
- Bumper Stickers • Various Slogans

Note: The above items are normally in stock. We reserve the right to reduce quantities ordered based on stocks available.

Items available in limited quantities include:

Posters

- STD Protocol Flowchart for Clinics (Clinics only)

Books / other

- STD Protocol booklet for clinicians
- AIDS Memorial Quilt Booklet
- AIDS Mural Booklet
- HIV/AIDS Materials Catalogue
- HIV/AIDS Resource Libraries in SA

- Communicating Beyond AIDS Awareness
- HIV/AIDS in SA: Impacts and priorities
- Guidelines for developing a workplace policy
- Free condoms available here sign
- Leaflet stands

Multilingual Leaflets in E/A/Z/Sotho/Tswana/Pedi/Xhosa

- Lifeskills _____ (Schools/DOEs only)

Note: The above items are not always available. We reserve the right to reduce quantities ordered based on stocks available.

PLEASE NOTE

- Items received from the AIDS Action Office **may not be resold**

TO RECEIVE YOUR ORDER: PLEASE ENSURE THAT THE CORRECT PHYSICAL ADDRESS, CONTACT TELEPHONE NUMBER, AND CONTACT PERSON'S NAME ARE PROVIDED TO THE ACTION OFFICE. PLEASE ENSURE THAT SOMEONE IS AVAILABLE TO RECEIVE THE ORDER DURING WORKING HOURS AT THE ADDRESS PROVIDED.

BEYOND AWARENESS CAMPAIGN • UTILITY ITEMS ORDER FORM • FAX TO: (011) 482-2099

The Beyond Awareness Campaign is a project of the HIV/AIDS and STD Directorate of the Department of Health, South Africa. It is managed by a consortium comprising four organisations: AIDS Media Research Project, DramAidE, Lindsay Smithers FCB, Wireless Additive.



AIDS HELPLINE
0800-0123-22

Name: _____ Organisation: _____

Physical Address: _____

Tel: _____ Fax: _____ E-mail: _____

We strongly believe that caps, t-shirts and other utility items are important tools for supporting action around HIV/AIDS. However these items are costly and we wish to ensure that they are used appropriately. Budgets available for producing these items are limited, so please ensure that items are ordered in appropriate quantities. Note that we reserve the right to limit quantities, and that orders will be met based on the availability of stocks. In general, the following guidelines apply.

- Items received from the Action Office **may not be resold**, or used in fundraising activities
- Items received from the Action Office **may not be offered as prizes** for competitions
- Items received from the Action Office **will not be provided for once-off events**.
- In the case of caps and t-shirts, individuals may receive **either a cap or a t-shirt, but not both items**. Individuals should also not receive these items more than once.
- Caps, t-shirts and red ribbon pins are **intended for individuals who will be using them in their day to day HIV/AIDS awareness activities**.

I understand the above guidelines and undertake to adhere to them.

Signed: _____ Name: _____ Date: _____

Please provide a brief motivation for the items you require.

Metal red ribbon pins • To be completed for orders of more than 50

Quantity required: _____ Motivation: _____

T-shirts • To be completed for any order (Note type of t-shirt. ___ Partnership ___ Youth ___ Quilt)

Quantity required: _____ Motivation: _____

Red ribbon caps • To be completed for any order

Quantity required: _____ Motivation: _____

APPENDIX THREE: Mini case studies of respondent organisations

Government: National, Provincial and Regional

Department of Health: Gauteng, AIDS Directorate Media Unit

The Media Unit produces a range of HIV/AIDS related media in line with the department's provincial campaigns and focuses. They produce, amongst other items, tatoos, cards, stickers, pamphlets, posters and banners. These are distributed along with AAO materials on a large scale to a wide range of sectors.

The Unit distributes materials at big events, like, for example, the All Africa Games, and Arts Alive.

An example of how the AAO materials were used was when Gauteng public sector employees were offered the opportunity to go for HIV/AIDS training. They were then encouraged to go on and train others in their communities. Those who chose to attend were given a set of the AAO leaflets. The Unit reports that some of these trainers have since come back for more materials.

The Unit's media co-ordinator, Zanele Mashinini and campaign manager, Kevin Humphries, expressed satisfaction with the AAO materials and service. They said that the AAO's service provided what they term "generic" HIV/AIDS materials and had enabled them to put their resources into producing materials for their own specific HIV/AIDS programmes and campaigns, as well as to focus on radio.

<i>Number of orders placed in 1999-2000:</i>	30
<i>Total units ordered:</i>	1 039 248

Department of Health: Western Cape, Health Promotion Resource Centre, Wynberg, Cape Town

The Resource Centre redistributed its AAO materials to around 250 users, mainly to clinics and also, amongst others, to non-profit organisations, in their region. Lesley Boardman, chief liaison officer, was one of the few respondents who experienced continual frustration with the supply of materials from the AAO. She said she had never received a correct order. Another difficulty she had experienced was getting the users she redistributed to used to receiving smaller quantities. Because of the great numbers of people requesting materials for their HIV/AIDS work, the Centre produced their own video to illustrate how people could use the AAO materials.

Another frustration she expressed was demoralisation regarding production of local materials to see to specific local needs. The Centre had been part of a

HIV/AIDS media partnership with non-governmental organisations, but budget restraints had curtailed this initiative substantially.

On the look and style of the AAO materials, Boardman said she felt the leaflets should be more varied, and that the AAO should look at other kinds of promotional materials, like flip charts. She commented that the Workplace Policy Guide files worked well.

Number of orders placed in 1999-2000: 8
Total units ordered: 164 964

Department of Health: Namaqualand region, Northern Cape

Earl Richards, HIV/AIDS/STD co-ordinator for Namaqualand said his region did not have access to radio or newspapers to raise awareness around HIV/AIDS, and that the AAO materials have “filled the gap”. His office conducted substantial and carefully monitored redistribution of the AAO materials they received. In total they redistributed to 129 users, including pubs and shebeens, clubs and hotels, local government, political parties, churches, non-governmental organisations, police stations, schools, and mines.

The materials had been valuable in what he described as the “conservative” area he works in. He said he felt it was “good to have issues that challenge stereotypes”.

Number of orders placed in 1999-2000: 10
Total units ordered: 24 181

Department of Health and Welfare, Primary Health Care Directorate:
Pietersburg, Northern Province

This office was the site of fairly wide redistribution to other users, particularly local government departments, trade unions, and mining companies. The respondent, Ms Maitisa is an administrator in the department. She said the courier service offered by the AAO were “the best” because it made things very efficient for her receiving materials. Maitisa commented on the quality of the AAO materials, saying the paper and the pictures were good. She found the metal AIDS ribbon pins were “very useful” and “popular” and said they exposed the HIV/AIDS issue to communities and traditional leaders, and generated awareness in a very effective way.

Number of orders placed in 1999-2000: 16
Total units ordered: 176 646

Tshwanang AIDS Centre (ATICC): Phuthaditjhaba, Free State

Like most of the respondents, Ansie Claasens, ATICC manager, said they redistributed the AAO materials. Their redistribution base was 100 users across various sectors. As an ATICC, they saw a lot of HIV positive people, and Claasens said the leaflets helped them to provide supplementary information. The ATICC used the materials in a wide range of ways, including counselling, talks, seminars, training, and specific focus days. The ATICC was one of the few organisations that produced some of their own HIV/AIDS materials. They produced licence disc holders with an HIV/AIDS message, and negotiated with the traffic department to hand them out to drivers applying for vehicle licences and renewals.

Number of orders placed in 1999-2000: 5
Total units ordered: 94 299

ATICC: Welkom, Free State

Like many of the respondents, the ATICC redistributed to a wide range of users. Before having access to the AAO materials, they used to make photostats of other materials, and also purchased materials.

With regard to the AAO materials, ATICC secretary, Diane Vorstman, said the materials were distributed and used in the life skills programmes in schools in the region.

Regarding how the AAO should control the very popular but expensive utility items, like T-shirts and caps, Vorstman thought they should be selectively allocated to “someone who earned it and works in the HIV/AIDS field and can answer questions (about HIV/AIDS).”

Vorstman raised a concern about the Beyond Awareness campaign needing to produce materials that reached illiterate people, like farmworkers.

Number of orders placed in 1999-2000: 12
Total units ordered: 70 637

Government: Local and District

Boksburg/Germiston district of Gauteng Department of Education

Ricky Govender is a deputy chief education specialist and HIV/AIDS co-ordinator. He works with, amongst others, principals, governing bodies, district officers, superintendents, and educators, and is extremely active in promoting the use of the AAO materials. He sent out circulars to school governing bodies, principals, and educators, together with AAO order forms to promote direct use of the AAO.

“Life is much, much better,” Govender said of the AAO. He said the AAO’s delivery system saved a lot of time. On the content of the materials he said they could use the pamphlets and posters for different levels of schools, and that the materials enhanced their programmes.

Number of orders placed in 1999-2000: 4
Total units ordered: 36 142

District Health Services: Welkom, Free State

Amongst other sectors, the District Health Services worked closely with all the mines around Welkom, to whom they distributed AAO materials. Ms J van der Walt, a community liaison officer, worked with a range of organisations in different ways around HIV/AIDS. One such way was the organisation arranging with taxi drivers to display materials in taxis. Van der Walt also worked with youth groups who redistributed the AAO materials.

An interesting way the AAO materials had been used was for a speech competition with their farm schools project. They ran a teachers’ education programme around HIV/AIDS. Teachers applied what they had learned and pupils then prepared speeches for a competition.

Number of orders placed in 1999-2000: 4
Total units ordered: 17 241

Police, Prisons and Military

South African Police Services: Braamfontein, Gauteng

Sergeant Monica Kabelo has been working in the SA Police Services (SAPS) in Braamfontein for five years. She was selected as a SAPS trainer on HIV/AIDS. Kabelo runs workshops and offers counselling. In her home community life, she was a founder of the Thusanang AIDS Education and Counselling Centre, a community-based non governmental organisation. This had enhanced her knowledge about, and commitment to being active in HIV/AIDS work.

Kabelo ensured that the AAO materials were prominently displayed at her police station. “In the control room there are condoms, pamphlets, and booklets. Materials are also promoted in the charge office – with posters on the walls”, where the public interface with police officers.

Number of orders placed in 1999-2000: 1
Total units ordered: 100 480

Department of Correctional Services: Rustenburg Prison, North West

The respondent, Mr Lefeira, is a senior professional nurse at the Rustenburg Prison, in the North West. He works with prisoners, mainly male youth, and with prison officials. The target population for the HIV/AIDS materials was around 1200 prisoners, sixty of whom were women, and staff. Lefeira was active in promoting the AAO materials, which were used during peer counselling, talks and events, and displayed in the resource centre.

Lefeira reported that the posters and leaflets were visible all over the prison. The materials were used during events like World AIDS Day and Condom Week. He said he was active because "People are dying now. Education can help to alleviate this. When I go out I spread the anti-AIDS gospel." One of the advantages he expressed about the materials was that prisoners often didn't believe what prison officials said about HIV/AIDS, and the materials "helped them accept the truth".

Lefeira appreciated that fact that he could obtain materials quickly via courier.

Number of orders placed in 1999-2000: 2
Total units ordered: 31 081

Department of Correctional Services: Westville Prison, KwaZulu-Natal

The respondent, Zodwa Dlamini, is a senior social worker at Westville Prison. She is also on the committee of non-governmental organisation, the SA Civil Military Alliance.

Dlamini's distribution of AAO materials was not restricted to the prison community – it stretched to handing out pamphlets in taxis, and getting them to community-based organisations, churches and HIV/AIDS organisations. "We need more and more strategies to flood them," she said.

Within the prison walls, she had been involved in promoting HIV/AIDS awareness events of different kinds, including sports against AIDS, and an AIDS speech hero competition. This competition was initially internal to Westville prison, but Dlamini said she hoped that it would go to inter-prison level, and then provincial level.

As an income-generating project, Dlamini said they were training prisoners to make beaded AIDS ribbons pins, which they hoped the AAO would help them to promote.

Number of orders placed in 1999-2000: 4
Total units ordered: 12 105

Clinics and Hospitals

Embuhleni Hospital: Elukwatini, Mpumalanga

Anna Malaza is a health promotion co-ordinator at Embuhleni Hospital, in Elukwatini, a rural area in Mpumalanga. "It has taken a long time for people to realise that AIDS is here in our community. People are dying left and right. AIDS is very high in my area," she said. Malaza described her area as being near mines and borders, and that people "go up and down". Unemployment was high and money desperately needed.

When she visited people's homes "the mother, the father, the children are no more lively" said Malaza.

Malaza said they need to have a centre for people who were HIV positive, and who had AIDS. She raised concerns about lack of adequate counselling and confidentiality around HIV/AIDS testing. "As a health worker I am close to people," she said. "They can tell me their secrets."

One of the interesting invitations she had received in her HIV/AIDS work was on World AIDS Day in 1999. Malaza said she was invited by the "shebeen ladies" to visit them on World AIDS Day, where they asked her for leaflets and posters for their clients.

Most commonly, she ran workshops and gave talks to a variety of audiences, at schools and with traditional healers, for example, and counselled TB and HIV positive patients in wards at the hospital. Malaza said she made use of the range of AAO materials in all of this work

The AAO materials were a very important resource in her work, she said. "We are very poor and don't have resources," she explained. She thanked the AAO for providing free materials, saying they had helped a lot. "Without the materials we were not able to convince our people that HIV/AIDS exists."

The materials, however, do not fill the gap presented by illiterate people, and this is something Malaza feels the Beyond Awareness Campaign could look into.

<i>Number of orders placed in 1999-2000:</i>	2
<i>Total units ordered:</i>	21 666

Sebokeng Hospital: Sebokeng, Gauteng

Christopher Mooi, chief special auxiliary officer at the hospital, works with in HIV/AIDS education with both patients in wards and clinics, and communities. He said the AAO leaflets gave him useful materials to work with, and he found that one response to the leaflets had been that people came back for HIV testing. In particular he used the leaflets which included seSotho.

Mooi said that the red ribbon pins, T-shirts and caps were very useful. He said there were people who were still negative towards people with HIV/AIDS. His perception was that the AIDS symbol on the utility items helped to get the community interested in the issue. HIV positive people also benefited, he said. "Infected people see there are those who do care for them." At events, he himself wore a red ribbon cap, T-shirt and red ribbon pin, and when people asked about his dress, it gave him an opportunity to explain HIV/AIDS issues. He said there was a high demand for utility items.

<i>Number of orders placed in 1999-2000:</i>	14
<i>Total units ordered:</i>	65 803

AIDS Organisations

AIDS Consortium: Johannesburg, Gauteng

The AIDS Consortium is a well-established non-governmental organisation that offers a networking and advocacy forum for its members. It is a regular and large-volume user of the AAO. Resource centre manager, Valerie Fichardt, and resource centre assistant and distribution manager, Nombulelo Hadebe, handle the selection, ordering and distribution of materials.

Because of the nature of the organisation and the demand, the AIDS Consortium has allocated a room to store and distribute HIV/AIDS materials from. It is a large room, with several rows of shelves on which the AAO materials are systematically stored and labelled. Hadebe is in charge of monitoring distribution, to around 50 users. The redistribution list includes schools, churches, trade unions, companies, non-governmental and community-based organisations, and government departments, amongst others.

Servicing organisations with HIV/AIDS materials was seen as an important function of the AIDS Consortium resource centre.

Fichardt and Hadebe said that before they had access to the AAO, their situation with regard to HIV/AIDS materials was "shaky". They got hold of materials through the health department, but this happened in a "very random" way. They said the AAO is a better option because it allowed them to bypass government bureaucracy, and now they get a regular flow of materials.

The AIDS Consortium does not produce many materials of their own – the AIDS Charter poster and booklet being an exception. They were however considering producing some materials, like T-shirts and cards, geared towards a specific event, the AIDS 2000 conference in Durban in July 2000.

They said they would like more regular information about the AAO's production schedule and items available. They would also like to be a distribution point for female condoms.

Number of orders placed in 1999-2000: 13
Total units ordered: 153 523

Cuyler Place of Hope: Uitenhage, Eastern Cape

Cuyler Place of Hope is a non-governmental organisation that was established by the private Cuyler Clinic as a way of “giving something back to the community.” The clinic covers rent, electricity and water bills, and one basic salary. The Cuyler Place of Hope is housed in a big building with five rooms, and plenty of space for storing the large volumes of materials that CEO, Sarah Smiles, regularly orders from the AAO. She stacks them on shelves, and clearly marks them, ordering additional stock regularly.

Smiles is HIV positive and was a Department of Health’s “Faces of AIDS” representative in the late 1990s. On being HIV positive, she said she tells people who were HIV positive to love their virus “because if you hate your virus, your muscles pull and this causes stress. ‘Make friends with your virus’,” is one of her favoured mottos.

The organisation runs a vegetable gardening project, sewing, and other income-generating projects for people who are HIV positive. It is also involved in a Department of Welfare washing project. Cuyler Place of Hope has recently joined the AIDS Memorial Quilt Project.

Smiles conducts a great variety of work around HIV/AIDS, both in Uitenhage and surrounding areas. She said she does, amongst other activities, door-to-door visits, talks, workshops, training, and lobbying. She used the AAO materials extensively for, amongst others, her outreach visits to doctors’ surgeries, factories, churches, schools, and commercial health workers.

She puts Cuyler Place of Hope’s phone number on the z-fold AAO leaflets. If someone follows this up and calls her, Smiles links them to a carer or care support. One disappointment she raised around HIV/AIDS resources was that she would like to get more female condoms, “because women like them.”

On utility items, Smiles rated the red ribbon stickers highly for use at funerals – if people living with HIV were open about their status. She said the ribbons were also helpful in provoking questions “even little children ask about it”, and also used it for raising awareness about HIV/AIDS issues during her late night work with commercial sex workers.

Number of orders placed in 1999-2000: 6
Total units ordered: 30 870

Non governmental organisations and community-based organisations

The Matatiele Advice Centre: Matatiele, KwaZulu-Natal

Mr Shabalala is co-ordinator of the Matatiele Advice Centre. Explaining how his organisation came to be doing HIV/AIDS work, he said migrant workers – some retrenched – were coming home sick with TB. But they could see it was not only from TB. People were being diagnosed with AIDS and dying at home without assistance from clinics and doctors. The Matatiele Advice Centre first only dealt with legal issues, but trends around HIV/AIDS in the community could not be ignored. They realised the need for awareness and educational work around HIV/AIDS, and for partnering with government around this.

Shabalala was invited by the Eastern Cape Health Department to attend an HIV/AIDS training workshop in Port Elizabeth in 1998. Following the workshop he returned to train the Centre's staff, volunteers, and board members. He said that in rural areas people didn't have much information, and there were few clinics. The AAO materials were particularly useful because of information being presented in isiXhosa, seSotho, Afrikaans and English. Shabalala said before he had access to the AAO materials, he only used a flipchart and kokis when facilitating workshops.

Shabalala said the AAO had to continue because, "There is an impact from this work. In the beginning it was difficult for us because we did not have materials. We were left behind. Now it is easy. With traditional cultures in rural areas, it takes a long time to get people to believe," he said.

<i>Number of orders placed in 1999-2000:</i>	4
<i>Total units ordered:</i>	13 197

Planned Parenthood Association of South Africa: Media Resource Centre, Cape Town

The PPASA produces its own range of materials for different audiences, which they sell. Their materials, amongst others, include topics such as youth and sexuality, relationships, and reproductive health. Media Resource Centre Manager, May Bleeker, said the AAO materials supplemented PPASA's materials.

The Resource Centre stocked and displayed materials from a range of organisations. One of the most effective posters, in Bleeker's view, was the "Viva Condoms" poster. She said she felt it combined loyalty to the country, with caring and solidarity.

Bleeker said there were gaps, or what she termed "unguarded areas" in the AAO materials. She highlighted HIV/AIDS in the mines, the economy, and in relationships in particular.

Bleeker said there was still a need for the current “key points” information, but that South Africa was now in a different phase. The AAO materials also needed to service another group of people, and look beyond raising awareness. They needed to move into providing more in-depth information around, for example, healthful practices (like people being more aware about carrying emergency first aid kits, including gloves and a mouth guard), relationships and negotiating around having HIV tests, and coping with HIV/AIDS in the home and the workplace. She highlighted two groups of people who needed more in-depth materials – those living with HIV and those around them, and people in the caring professions.

Bleeker gave a practical example of what she meant by offering more in-depth information. It was a book produced by National Association of People Living with HIV/AIDS called Food for the Living.

<i>Number of orders placed in 1999-2000:</i>	6
<i>Total units ordered:</i>	41 598

The Traditional Healers’ Organisation: Johannesburg, Gauteng

Phephisile Maseko is project leader of the Traditional Healers’ Organisation, which receives funds from the Department of Health. The organisation works both nationally and internationally, running workshops for traditional healers. Its membership in South Africa is 50 000, and intracontinentally is around 130 000. The organisation has members, amongst others, in Mozambique, Botswana, Swaziland, Zambia, Zimbabwe, and Uganda.

The organisation works with a primary health care approach. It has 26 staff nationally. Maseko complained about the limit on quantities of materials from the AAO, saying her organisation had a great demand for the materials. Explaining this further, Maseko estimated that 85% of the general public used traditional healers, and that it was important for both healers and healers’ clients to have access to materials. In Soweto alone the organisation had around 100 members.

Maseko expressed a concern that the AAO materials did not reflect or direct themselves to traditional healers. They did not show the positive role traditional healers could play. An ideal poster, she said, would have on it a nurse, football player, police officer and a traditional healer. This, she said would motivate traditional healers, and help them to know they can’t cure AIDS. Important media messages would highlight the importance of traditional healers wearing gloves and restricting razor blade use to “one razor blade, one patient”.

<i>Number of orders placed in 1999-2000:</i>	1
<i>Total units ordered:</i>	6 455

Workplaces

Sasol: Rosebank, Gauteng

Sasol distributed the AAO materials it received to its Sasolburg and Secunda operations. Manager of Group Labour Relations at Sasol, Christine Randall, said human resources and occupational health staff informed her as to which materials they wanted, and she then collected and distributed them. Sasol had an AIDS forum which human resources or occupational health representatives from each business unit attend. There they shared information about, amongst other issues, what materials were available.

Sasol was prompted into doing work around HIV/AIDS when they discovered workers were sick and dying through AIDS-related illnesses. Randall said one of the most useful of the AAO materials was the HIV/AIDS Workplace Guide. Although they found the AAO materials relevant and useful, Sasol is looking into to supplementing them by adding materials that are more Sasol specific.

Number of orders placed in 1999-2000: 3
Total units ordered: 98 906

Trade Unions and Worker Benefit Organisations

Clothing Industry Health Care Fund: Cape Town, Western Cape

When you arrive at the Clothing Industry Health Care Fund's offices you can't help but notice all the HIV/AIDS posters and large red ribbons blazing from the corridor walls. On World AIDS Day, staff held hands around their building, and handed out condoms and leaflets to passers-by.

Zainab Ismail, is the Fund's Well Programme Co-ordinator. The Fund caters for around 400 factories and 350 000 employees, and has eight health centres that cater for its members. Before access to the AAO, Ismail said they had very few materials.

She said that they use the materials extensively and, for example, posters were displayed and promoted at all the health centres. They had developed a policy that medical staff must offer explanations when they handed out leaflets.

Ismail said the Fund had produced some of its own materials, like T-shirts, rulers, printed balloons, and banners around specific campaigns. Nevertheless, she said she was happy to know that the AAO materials are there as a "back-up".

Number of orders placed in 1999-2000: 3
Total units ordered: 81 027

South African Police Union: national

The South African Police Union was galvanised into intensive HIV/AIDS awareness and education work following a survey and press statement in 1998, just before World AIDS Day, that claimed 25% of police officers were HIV positive. Denial, shock and disbelief followed, said Barries Barnard, editor of the union's newspaper. Discussions and planning sessions followed.

There were peer education training sessions in the union, but things moved quite quietly. However, having vast quantities of AAO materials and condoms to distribute helped stimulate the programmes, said Barnard. Both were promoted vigorously amongst police officers individually and in their work environment. Most SAPU organisers had trained as peer educators and immediately received materials such as leaflets to use in their work. SAPU redistributed AAO materials to pharmacies which serve Polmed members, and to doctors who have Polmed patients. Polmed is the police medical aid.

Number of orders placed in 1999-2000: 2
Total units ordered: 25 611

Educational Institutions

Mohlareng Combined Farm School: Gauteng

Venessa Boikhutso is a teacher at Mohlareng Combined Farm School, located on Erasmus Farm in Bredell, Gauteng. The school has 391 students, in grades ranging from 1-12. Students are mainly farmworkers' children and children who live in Thembisa. The school was very under-resourced, she said. Boikhutso, who was chosen to run the AIDS awareness campaign at her school, said the Gauteng Department of Education granted the school R1 000 for its AIDS awareness campaign. She had attended courses and talks on HIV/AIDS, one of which was run by Eskom.

Boikhutso ensured that the AAO materials were displayed everywhere in the school, and that students had unmonitored access to them where they were stored at the back of her classroom. "Everyday we bring HIV/AIDS into the curriculum," she said. She used the materials in her teaching, and had even used extracts in a comprehension test.

One of Boikhutso's concerns was that AIDS education doesn't reach most rural areas where there is no electricity, no TVs, and illiteracy. Her school was very poor – parents couldn't even afford to pay school fees – and so the free supply of HIV/AIDS materials was very important in their HIV/AIDS work. As Boikhutso said, "It is too big to do on our own."

Number of orders placed in 1999-2000: 2
Total units ordered: 17 633

Technikon North West: North West

Tebego Makgabo is a trained psychologist and a student counsellor at Technikon North West. He works closely with the campus clinic, with which he shares a “very good referral system.”

He described HIV/AIDS as “a burning issue on campus”. Makgabo said it was important that women students had access to a supply of female condoms. He said that men trick women into believing they are using a condom. Women, he said, were “interested in having control” by using female condoms but the campus could not supply these.

Makgabo said the AAO materials were used around pre-and post-test counselling, during orientation weeks, and with talks, amongst other contexts of use. He recommended that the AAO use more local heroes in their materials.

<i>Number of orders placed in 1999-2000:</i>	4
<i>Total units ordered:</i>	18 030

Public Health Programme: University of the Western Cape

Nikki Schaay has worked in the health field for many years, and has specifically focused on HIV/AIDS. She lectures in a Public Health Programme for masters students at UWC, mainly having health workers, teachers, and development workers as her students. She also runs workshops for a policy project, mainly for development organisations, teachers, trade unionists, local government and national government departments. She used the AAO materials in her work.

She was concerned about the lack of clarity of the future of the AAO. Schaay felt that clients of the AAO needed the security of knowing whether or not they would be able to continue getting materials in the same way. She also commented that the research being conducted in evaluating the AAO was important so people could articulate what worked and what didn't. She also felt it encouraged people to use the materials more responsibly.

<i>Number of orders placed in 1999-2000:</i>	6
<i>Total units ordered:</i>	16 531

Safety, health and environment: University of the Western Cape

Geoffrey Adonis is the Safety, Health and Environmental officer at the university. At all of his department's regular health and safety meetings, five minutes was devoted to discussing HIV/AIDS. The AAO materials were available in many parts of the campus, and Adonis used the internal e-mail to publicise what materials were available.

His perception was that the AAO materials had helped facilitate people speaking freely about the disease.

In his own work, Adonis had found the Resources catalogue particularly useful, saying it continues to help him with referrals and networking with people in the field.

Of all the AAO materials that have stood out for him, the AIDS Memorial Quilt booklet, and seeing the big wall quilt at a Department of Health conference in Gauteng. Of the quilt, he said, "It really moved me and made me want to get involved."

<i>Number of orders placed in 1999-2000:</i>	2
<i>Total units ordered:</i>	94 155

Faith-based organisations

Youth for Christ: Klerksdorp North West sub-region

Thebe Tinye, centre director, said that having access to HIV/AIDS materials through the AAO was important for their work in schools, church, and the community in the context that HIV/AIDS affected young people. Amongst other things, the materials had helped people in learning not to ill-treat people who were HIV positive, and to understand the rights of HIV positive people.

Tinye said they had found the workplace policy file particularly useful. They had used the resource to train young people in their rights, responsibility and behaviour.

Other contexts that they used the AAO materials included in counselling, at rallies, talks, workshops, and in drama and music productions.

<i>Number of orders placed in 1999-2000:</i>	6
<i>Total units ordered:</i>	16 884

Individuals

Tony Raftery: Gauteng

Tony Raftery was recognised at provincial government level as an official AIDS ambassador and activist. He was involved in the restructuring of the HIV/AIDS strategy for Gauteng.

A regular and large-volume user of the AAO, Raftery gives talks, runs workshops, does training, and also sometimes offers counselling. He works with a range of organisations and institutions – including factories, schools and government departments.

He used the AAO materials as supplementary material to take along, and use as back up to a presentation.

If the AAO service were to stop he said he would not be able to afford to buy materials to use in his work.

<i>Number of orders placed in 1999-2000:</i>	10
<i>Total units ordered:</i>	80 823