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# Grassroots Non-Governmental Organizations and the Fight against HIV/AIDS in South Africa: The Case of Alice Township

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#### **Abstract**

To win the battle against HIV/AIDS in South Africa the participation of multiple stakeholders such as the government, NGOs, medical practitioners, researchers, patients, and significant others is of paramount importance. This paper aimed at discussing pertinent efforts and limitations of grassroots health-based NGOs in the fight against HIV/AIDS in South Africa. A qualitative approach was adopted, and interviews were used to collect the data. The study established that: grassroots NGOs pressurized the government to respond to HIV/AIDS menace; the International NGOs were perceived to be more impactful in the fight against HIV/AIDS, and volunteers were the 'human resource engine' for grassroots health-based NGOs in the study area. Conclusively, grassroots health-based NGOs, albeit size, are unequivocally gap fillers and supplements of the governments' efforts in various operations to achieve a free AIDS society.

Keywords: Campaign; Free-HIV/AIDS-society; Government; NGOs; South Africa

#### Introduction

As important development agents and institutions, Non-Governmental Organizations (NGOs) have vastly and ubiquitously emerged and developed in both number and scope, and they have been branded as vehicles of facilitating development (Volmink & Van der Elst, 2019; Storeng, Palmer, Daire & Kloster, 2019; Tilahun, 2019; Banks & Brockington, 2019). Like the rest of the world, South Africa has innumerable NGOs, which have become a highly visible component of civil society (Godsäter, 2015; Breckenridge, Black-Hughes, Rautenbach & Mckinley, 2017). They have increasingly become significant players in the fields of human rights, the environment and different aspects of social development such as social welfare, health (Breckenridge et al., 2017; Enghel & Noske-Turner, 2018), education (Volmink & Van der Elst, 2019), housing, policymaking, planning and implementation of grass-root development programmes (Isharaza, 2019).

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In South Africa, as in many other settings, there has been thinking that NGOs are efficient, effective, innovative, flexible, independent, and responsive to the problems of poor people at the grass-roots level. To the contrary, poverty and vulnerabilities continue to rise to unfathomable levels in the world, evidenced by squalid living conditions and disease burden (Angotti et al., 2018). South African Townships for example are characterised by limited access to health amenities, poor housing conditions and limited access to quality education (Kajiita, 2017). These development gaps have prompted the rise of NGOs with mission to challenge, supplement or complement government interventions and service delivery. Painstakingly, the HIV/AIDS epidemic presents both health and economic challenges to the country. This has overwhelmed the government technically and financially for some years, and this is where the efforts of Non-Governmental Organizations become vital (South Africa National AIDS Council, 2017; Fu & Zhang, 2019). Therefore, this paper focuses on elucidating pertinent efforts and limitations of NGOs in their response to the health issues, with a particular focus on HIV/AIDS in South Africa.

### Literature Review

Unequivocally, the HIV/AIDS is one of the most challenging health issues in sub-Saharan Africa (WHO, 2018; Matlho, Randell, Lebelonyane, Kefas, Driscoll, & Negin, 2019), with South Africa reporting the highest prevalence and burden thereof (Gutreuter, Igumbor, Wabiri, Desai & Durand, 2019). Extensive research has reported that South Africa has the highest number of people infected with and affected by HIV/AIDS, and runs the largest antiretroviral therapy programme globally (Kader et al., 2014; UNAIDS, 2017; Breckenridge et al., 2017; Magidson et al., 2019). In addition to the disease burden, the country is also confronted with recreation use of antiretroviral drugs (Magidson et al., 2019) leading to lower adherence rates, lower viral suppression and high transmission risks in the communities (Kader et al., 2014), which definitely results to high mortality rates. Consequently, there are a high number of orphaned children because of HIV/AIDS in South Africa (Breckenridge et al., 2017). The orphaned children become vulnerable to infections, socially and financially, which then become a burden for the government and other social service providers.

Some of the contributory factors to the high incidences of HIV/AIDS in South Africa are associated with denial especially at the advent of the disease (Crewe, 2000; Mahajan, 2017), stigmatization of the disease, and feminization of HIV/AIDs (Kang'ethe, 2015). The state of denialism was detrimental to the effective combat of the disease. In China for example, the government denied the affliction of HIV/AIDS on people, resulting to censored information on the disease and covered HIV cases (Haung, 2006 Cite in Fu & Zhang, 2019). Denialism of HIV/AIDS in South Africa by senior political leaders then (late 1990s early 2000) undermined prevention and treatment efforts. This situation led to the emergence of NGO campaigns, such as those championed by Treatment Action Campaign (Crewe, 2000). Through these campaigns, the government of South Africa was pressurized to respond to the HIV/AIDS menace through prevention and treatment approaches (Crewe, 2000). Irrefutably, therefore, the NGOs, played an important role in the combat against HIV/AIDS in South Africa by complementing, supplementing or/and pressuring the government to act accordingly.

In China, for example, HIV/AIDS based NGOs are the most outstanding group of the civil society (Lo, 2019), whereas in South Africa Treatment Action Campaign has been recognized as the most outstanding NGO in the field of HIV/AIDS (Wilson, 2014). However, while this acclaim is made to those highly influence NGOs, the grassroots health-based (HIV/AIDS) NGOs, their efforts has been overshadowed, yet their efforts are significantly vital in achieving AIDS-free- society. Notably, the framing and positioning of the grassroots health-based NGOs can potentially limit or accelerate their success in prevention, treatment and management of HIV/AIDS (Fu & Zhang, 2019). For instance, according to Fu and Zhang (2019) study of NGOs' HIV/AIDS discourse on social media and websites'



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the framing of messages using semantics such as public policy, public education, and social support yield different results in different regions in the fight against HIV/AIDS. In addition to the communication approaches, the working relationships between the NGOs, the donors, communities and the government remains vital element in the success or limitation of NGOs achievement of its goals (Banks & Brockington, 2019). In the South African context, the government through its progressive constitution has enabled a harmonious working relationship with NGOs especially in the fight against HIV/AIDS (Kajiita, 2017; South Africa National AIDS Council, 2017). Therefore, the vitality of NGOs as agents of fighting HIV/AIDS is recognized and cannot be overemphasized. This paper reports on the efforts and limitations of grassroots based-health NGOs in the contribution to a free-AIDS-society in South Africa.

### **Problem Statement**

The HIV/AIDS continues to present pernicious social, health, and economic ramifications in Africa, with South Africa bearing the brunt of it, as it records the highest HIV/AIDS prevalence in the world (UNAIDS, 2018). The management of the HIV/AIDS patients and its spillover effects on other sectors of life is costly. The non-adherence to drug regimen and reactional use of ARVs in South Africa undermine the international as well as national commitments to having a free HIV/AIDS society (South African AIDS Council, 2017). To overcome the social, health and economic burden associated with HIV/AIDS, the efforts and interventions of NGOs as important vehicles of development need to be identified and empirically documented. While NGOs' success is significantly recognized in the fight against HIV/AIDS, this paper investigates how grassroots health-based NGOs in Alice, Eastern Cape Province, contribute to HIV/AIDS-free-society. Optimistically, the discussion in this paper will be helpful to the government as well as the NGOs to re-examine their capacity and positioning in addressing the menace of HIV/AIDS in the country.

### Methodology

South Africa hosts a constellation of NGOs, spanning from local grassroots NGOs to international NGOs. In this paper, the researchers focused on grassroots health-based NGOs, departing from the common research focus on National and International NGOs in combating the burden of HIV/AIDS (Balboa, 2014), which may not completely cover the grassroots related dynamics. This paper is drawn from a major empirical study that investigated the role of NGOs in the provision of health, education and housing services in Alice Township of the Eastern Cape Province, South Africa. The study adopted mixed methods where both the quantitative and qualitative research techniques were used. In this paper, however, part of the qualitative field data is triangulated with the literature in order to understand how the grassroots NGOs efforts and limitations impacts on their response to HIV/AIDS. Drawing from case studies in the research domain, and the available NGO literature, the researchers analyzed the activities of NGOs in response to HIV/AIDs.

The selected health-based NGOs focused on home-based care for the people living with HIV/AIDs, diabetes patients, tuberculosis (TB), other long-illness related diseases, counselling services and old-age care services. It suffice to highlight that, the proliferation of health-based NGOs in South Africa emanated from the vigorous campaigns lodged against the HIV/AIDs in the country. Therefore, NGOs had to develop and adopt both reactive and proactive measures to address health needs of the population.

A sample of 10 NGOs was purposefully selected based on the criteria that an organization was involved in programs related to HIV/AIDS. This included programs such as assisting HIV/AIDs orphans, testing and counselling, HIV/AIDS education and awareness, treatment, and home care. This heterogeneous sample was considered appropriate to generate insightful data to unearth the contribution



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of such organizations in combating HIV/AIDS. The paper was dominantly qualitative, necessitating the use of in-depth interviews as data collection method. The field data were analyzed inductively and findings were presented thematically (Patton, 2015), supported by the participants' verbatim. This being a health-related research, the study was approved by University of Fort Hare Research and Ethics Committee (UREC), and the researchers ethically observed all the requisite research principles and ethics, that is, participant's consent, anonymity, confidentiality and avoidance of harm for both the participants and the affiliated organizations.

The next section focuses on presentation of findings and interpretations.

### **Findings**

The data generated the following key themes: (1) NGOs putting pressure on the government to respond to HIV/AIDS; (2) NGOs collaborations with government in the HIV/AIDS campaign; (3) limited capacity of grassroots NGOs in HIV/AIDS activities; and (4) local NGOs use volunteers to expedite HIV/AIDS campaign at grassroots.

### NGOs Putting Pressure on the Government to Respond to HIV/AIDS

The South African civil society pre-democratic dispensation is reported to have been vibrant and effective towards fighting the discriminative apartheid regime (Weideman, 2015). However, after the 'common enemy' was defeated, the civic society had the task of redefining their roles, responsibilities, strategies and identity within the democratic dispensation (Weideman, 2015). Amidst this unprecedented restructuring, new dimensions within the sector to respond to funding changes as well as areas of focus emerged. The NGOs had to become highly sophisticated in demonstrating impact to the donors through accountability, monitoring and evaluation (Storeng et al., 2019). In the millennium, the civil society in South Africa has shown accelerated growth to respond to burden brought about by terminal disease such as HIV/AIDS, TB, and cancer among others (Storeng et al., 2019; Shilu bane & Geyer, 2013). In their endeavor to do so, they have also shown a conflictual relationship with the government bodies (Weideman, 2015). This is because of the pressure they amount on them to address the pertinent health issues in the country.

This pressure from both the national and grassroots based NGOs affects the working relationship between the NGOs and the government departments responsible for health wellbeing of the citizens. For instance, in the year 2003, the South African government was pressurized by the Treatment Action Campaign on the need to distribute free antiretroviral drugs for people living with HIV/AIDS (Wilson, 2014). The position of this campaign had such a high positive impact in the response and management of HIV/AIDS at the grassroots level in South Africa.

However, the data revealed that NGOs that pressurize the government to act on matters of citizen interest usually have a lukewarm working relationship between the dual. This was apparent especially where the NGOs tended to demand quality health services for the people rural areas, such as Alice. In this study, it was evidenced that the grassroots NGOs ensured that the provincial and the district Departments of Health and Social Development distributed condoms, ARVs, and commitment themselves to testing and counselling, and public health education. These type of NGOs positioned themselves as campaigners, and the efforts were geared towards policy formulation and implementation. The data revealed that the campaigns resulted into a conflictual engagement that limited the working relationship between the dual, thus making difficult for people in need to be timely served. This revelation is illustrated in the following participants' lamentation:



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"... the role of NGOs in pushing or motivating government departments to do their HIV/AIDS work I commendable. They fear that we are going to expose them. I wish that most of us the NGOs are well funded. We could fill in many of the gaps that the government has left. We have been able to show the government their gaps although most of the times the government officials are indifferent" (NGO Manager).

### NGO Collaborations with the Government in the HIV/AIDS Campaign not Smooth

Indubitably, a weaker collaboration between the government and the NGOs partly contributed to the failure by NGOs to scale up their HIV/AIDS service delivery programs in the study area. During the interviews with the NGOs representatives, the following narratives were captured, which illustrate the weak state of the collaborations between the NGOs and the government machinery in the health sector.

"We have been struggling to win contracts to partner with the government in some programmes in service delivery, but we have never been recognized for any partnership for reasons we do not know. I think the government is unhappy with us based on past pressure we have been giving it on creating a care center for people living with HIV/AIDS in this community" (NGO employee).

On the other hand, a government official fiercely expressed that working with grassroots based NGOs was not paying any significant 'dividends'. The government official perceived them as illegitimate, and therefore asserted that collaborating with such NGOs would not bring much impact. The interview extract below illustrate this contention.

"Partnering with small NGOs is a waste of funds because you use a lot of 'energy' to support them. Again, many people want to be served by trusted organizations, so the government or the donors are very keen when it comes to issues of collaboration and partnerships. When you collaborate or partner, you look at what you lack so that you can get it from the other party. So this 'other thing' the partners look for may be lacking in those small NGOs. This lowers their chances to get recognition for partnership. Some of these organizations are troublesome and sometimes their reports are exaggerated just to please the funders" (Department of Social Development Officer).

The above narrative reveal that some NGOs failed in the 'litmus test' of trust and accountability in serving communities living with HIV/AIDS. This conundrum was definitely 'suffocating' the role of NGOs in their efforts to collaborate and contribute to the fight against HIV/AIDS at the grassroots level where the need was dire.

### Limited Capacity of Grassroots NGOs in HIV/AIDS Activities

The study indicated that international NGOs compared to grassroots NGOs were praised for their accountability in planning and their professional relationship with the government. This finding presents a paradox because traditionally, international NGOs are on record as facing acute resistance from the governments in many countries. However, the international based NGOs were adequately equipped with astute professionals and enjoyed adequate resources to drive health related activities to address HIV/AIDS. These international NGOs in exhaustively included the World Bank's Multi-Country HIV/AIDS Program (MAP), Global Fund to Fight AIDS, Tuberculosis and Malaria (Global Fund) and US President's Emergency Plan for AIDS Relief (PEPFAR). They were successfully engaged in HIV prevention, treatment, care, support, and impact mitigation efforts across a range of advocacy and service delivery roles as also noted by Hushie (2019). Perhaps, this justifies the comments of the interviewees, who had the following to share:

"...I think the international NGOs perform better than these locally based NGOs because those are headed by professors, doctors and people who have been heading corporate companies for years. So



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when they plan for a programme, it goes well and their reputation goes higher. Then when it comes to even funding, they can write better and convincing proposals" (NGO employee).

"The experience of small NGOs is not very good when it comes to issues of public support. May be it is because they have a low capacity to influence very important people to support them as compared to organizations with high impact in the community. You will see locally-based organizations that are not known, but almost all international based NGOs in this area are known. Any service they provide is even noticed by non-beneficiaries. So we can simply say international NGOs are reliable, valid and feasible ..." (NGO Manager).

These narratives allude to the aspect of public trust with grassroots NGOs. According to Hou, Zhang and Guo (2019), trust in non-profit is very vital as it enhances the relationship between the organization, the donors and other stakeholders. From the extract above, we can argue that, the level of professionalism, level of education, the human resources and the 'financial muscle' influences how the grassroots-based NGOs are perceived by the government, donors and the public. This implies that, if the grassroots-based NGOs championing for HIV/AIDS are not well equipped with these qualities, they are likely to have little or no impact in the rural areas. Therefore, this is likely to negatively impact on the goals of having free-AIDS society in near future.

### Use of Volunteers to Expedites the HIV/AIDS Services

The findings revealed that the grassroots NGOs were at a huge advantage as they enlisted the support of volunteers in the campaigns and other technical services required to deliver health related services in the study area. This was a panacea owing to the grave lack of human resources and resources to recruit fulltime paid staff for grassroots NGOs.

This enlarged the horizon of the local NGOs in prevention, treatment and care pertaining to HIV/AIDS as also noted by Mahajan (2017). According to Southby, South, and Bagnall (2019), volunteering is a common practice within the NGO sector that indubitably increases their working capacity and coverage of the target areas. While there were many young people who were volunteering to assist orphaned children as a result of HIV, to the contrary, stigma and discrimination was confounding many potential volunteers to join the HIV/AIDS organizations in Alice Township. The following verbatim illustrate this finding.

"NGOs in their various sizes attract a number of volunteers. However, the HIV/AIDS NGOs face various challenges in attracting the volunteers in our area. However, as the state of stigma dwindles with time, the pace of volunteers joining these organizations has increased. The NGOs also benefit from the students who seek internships for experience and preparation for future employment" (NGO Manager).

In their study on building partnerships for community response to HIV/AIDS in rural South Africa, Nair and Campbell (2008) illustrated the vitality of technical NGOs in training volunteer health workers in home-based care, peer education, project management and procedures for accessing grants and services. Significantly, this aims to empower volunteers to lead HIV-prevention and AIDS-care efforts to make public services more responsive to local needs (Nair & Campbell, 2008). In resource strapped countries, the role of using volunteers in the HIV/AIDS campaign has been applauded (WHO, 2002). Thus, volunteerism was very instrumental in delivering services in Alice Township.

#### Discussion

South Africa continues to experience highest prevalence of HIV/AIDS in Africa. This protracted health challenge require the combined efforts in financial resources and human resources to effectively



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address it. The first theme was about NGOs pressuring the government to respond to issues of HIV/AIDS in South Africa. The analysis revealed that NGOs' campaigns had a positive influence on HIV/AIDS discourse in South Africa. As alluded earlier, NGOs in South Africa have played a pertinent role in combating and lessening the burden of HIV/AIDS (Dwyer-Lindgren et al, 2018), through concerted efforts in activism (Colvin, 2014), resource mobilization (Nalere, Yago & Oriel, 2015; Shilubane & Geyer, 2013; Gutreuter, Igumbor, Wabiri, Desai & Durand, 2019) and public education (Volmink & Van der Elst, 2019). These efforts have resulted into enabling the patients to access drugs (ARVs), mother-to-child transmission prevention, treatment and therapy, testing and counselling, and home-based care (Colvin, 2014; Mahajan, 2017; South African AIDS Council, 2017).

Notably, one of the most outstanding NGOs' efforts in history of HIV/AIDS prevention and treatment in South Africa, is where a campaign-orientated local NGO - the Treatment Action Campaign (TAC) led a ground-breaking interventions through advocacy, in which the government rolled out free ARVs in the country (Wilson, 2014; Mahajan, 2017). The accomplishment of this intervention did not come on a silver-plater, but it took a legal and a constitutional battle that culminated into the NGO (TAC) winning a constitutional case against the government (Mahajan, 2017). This victory is associated with the now celebrated mother-to-child prevention services in South Africa. Out of this courageous action, activists and NGOs in other countries such as Brazil and India also started to pressurize their governments to respond to the AIDS epidemic more assertively (Colvin, 2014). From these actions, we learn that effective response to an epidemic does not solely remain the role of the medical experts such as epidemiologists, doctors and scientists but significantly, the efforts of activists and NGOs in presenting and addressing societal grievances to the government authorities and other policy-makers. These activities immensely supplement the government's efforts in reducing the spread of HIV infections. This is more practical in developing countries such as South Africa, where many people affected by HIV/AIDS live in rural areas were grassroots health-based NGOs operate. This situation, therefore, necessitates the need for clear and strategic partnerships between the governments and the private organizations to achieve a free-AIDS-society. For instance, the establishment of South African National Aids Council (SANAC) and subsequently the adoption of National Strategic Plan on HIV, STIs and TB 2012-2016, provided such a platform for the government of South Africa to partner and collaborate with various NGOs to combat the diseases (Shibulane & Geyer, 2013). Therefore, this shows vitality of the health-based grassroots NGOs in utilizing their skills in keeping the government and other stakeholders to their task. The inclusion of NGOs role in the National Strategic Plan in South Africa is a prime opportunity for grassroots NGOs to ensure all the rural areas and Townships are adequately served.

The second theme was about the relationship between the government and NGOs. In South Africa, organs of civil society in the democratic dispensation are essential in supplementing the government efforts in designing and developing effective service delivery system (Patel, 2012). The preference perhaps, is attributed to the flexibility, responsiveness and innovation of the private sector, which embedded within their organizational framing. The NGOs' contribution to extra time, resources and technical commitment in the fight against HIV/AIDS is vital, but sometimes may not be received in good faith by the government (Robins, 2008; Matei & Apostu, 2014; kajiita & Kangethe, 2017; Van Steapele, Nencel & Sabelis, 2019). Unequivocally, there exist some elements of power imbalances between the NGOs and the government, especially between those NGOs, which seem to outdo the government in addressing the pertinent social and health issues (Pallas & Nguyen, 2018; Volmink & Van der Elst, 2019). This mistrust become a major blow to many grassroots health-based NGOs, which heavily rely on the government departments for funding. Consequently, in such scenarios NGOs activities become passive, resulting into little impact in the fight against HIV/AIDS, and other terminal illness (Alfred & Oliver, 2014). This does not present a healthy complementary function for grassroots health-based NGOs to reach the people living with HIV/AIDs in rural areas.



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The study established that, international NGOs (INGOs), unlike their counter parts (grassroots local NGOs), were transparent and made significant impact in the mitigating the HIV/AIDS in South Africa. Literature abounds that INGOs in South Africa focus on broad range of interventions such as social, economic, political and environmental aspects. They further focus on issues such as employment, microcredit schemes, and social mobilization among others (Colvin, 2014; Mahajan, 2017). However, the study also showed that INGOs in collaboration with grassroots heath-based NGOs provided medical and psychological treatment for HIV/AIDS patients and supplemented the government in the distribution of condoms to lessen the burden of AIDS in the communities. It is critical therefore, that the government recognize and support the grassroots health-based NGOs because they can reach deep into the rural areas that are not served by INGOs.

The burden of care negatively affects the economic productivity of the family through unprecedented cost of medication and treatment (Pillai et al, 2019). This is where grassroots health-based NGOs become handy in providing some relief to the family through counselling, provision of care and work-related arrangements. Based on this evidence, it is plausible to argue that despite the growing technologies in prevention and treatment of HIV/AIDS, the use of behavioral and social models, and biomedical interventions (Mahajan, 2017; UNAIDS, 2018), grassroots health-based NGOs remain significantly vital in ensuring such interventions reach to the rural areas. Moreover, South Africa has benefited from vigorous campaigns towards prevention, testing and treatment of HIV/AIDS and the antiretroviral therapy services from local and international NGOs (Crewe, 2000; UNAIDS, 2011; Shilubane & Geyer, 2013; Colvin, 2014; South Africa National AIDS Council, 2017). The NGOs have especially been important in strengthening the prevention endeavors on HIV/AIDS by supplying and distributing contraceptives, creating public awareness and education, resource mobilization, and destigmatization campaigns (Uys & Cameron, 2003; Kang'ethe 2015).

The role of TAC in fighting stigma and the rights of the minorities has been critical (Kang'ethe 2015). Another NGOs' landmark campaign that is associated to the prevention of HIV/AIDS in South Africa is male circumcision, which was termed by WHO as 'an important landmark in the history of HIV prevention' (WHO, 2012). Accordingly, WHO and UNAIDS is reported to have targeted twenty million males in southern and eastern Africa by the year 2015 (UNAIDS, 2011; Mahajan, 2017). This campaign benefited from the funding of reputable funders such as Gates Foundation, World Bank, and PEPFAR. Unlike these, highly supported and financial influential and affluent NGOs, the grassroots health-based NGOs in rural and Townships were limited by finances to adequately effectuate the agenda for AIDS-free-society.

Lastly, this study showed that volunteers were instrumental in expediting the campaigns and other programs undertaken by health-based NGOs. The literature on NGOs is well saturated with volunteerism discourses (Nair & Campbell, 2008; Kang'ethe, 2010; Beard et al, 2018; Southby, South & Bagnall, 2019) has a human resource engine for NGOs. The strength associated with grassroots NGOs in South Africa is that, they can facilitate a relatively high degree of community participation and therefore, they can accurately identify the specific needs of a community (Beard et al, 2018). This is because volunteers may live in the community or even belong to the community, which they serve (Nair & Campbell, 2008; Kajiita & Kang'ethe, 2017).

In a study by Breckenridge et al. (2017) in South Africa, NGO volunteers have worked with HIV/AIDS-orphaned-children to access foster care services, education, food and protection. Moreover, their study highlighted the support rendered to home-based careers by the volunteers. Importantly, the presence of local volunteers rendering services in HIV/AIDS programs is significantly important in assisting the local people, especially where myths and cultural practices are rigid and hinder interventions on HIV/AIDS impact. This is very important especially in South Africa where the prevalence of HIV/AIDS and stigmatization is rife (UNAIDS, 2018; Khan, 2019). Thus, the grassroots health-based



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NGOs use of local volunteers to provide services that ameliorate the ramification of HIV in rural communities of South Africa is a valuable and effective approach.

#### **Conclusion**

To win the battle against HIV/AIDS in South Africa require the participation of multiple stakeholders, such as the government, NGOs, medical doctors and researchers, patients and significant others. This paper established that grassroots health-based NGOs, albeit their sizes and capacity, they are gap fillers and supplements the governments' efforts in various operations to have a free-AIDS-society. Nonetheless, there continues to be an inherent power imbalance between the government and the NGOs, and between NGOs among themselves in South Africa. The power imbalances present limitations for grassroots NGOs to expedite operations on HIV/AIDs Programs. Operationally, NGOs are contested with 'doing right' and 'looking right', a scenario that can easily stifle the vision and mandate. This is more apparent in balancing between pleasing the government machinery and fighting for the rights of the citizens. From both the literature and the field data, the efforts of grassroots health-based NGOs were more on campaign and such efforts had wide and high impacts, in combating HIV/AIDS in South Africa. Therefore, it is necessary to support and recognize their concerted efforts in an endeavor to attain a free-HIV/AIDS-society in South Africa and the world at large.

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