

TB IN SOUTH AFRICA: IMPACT OF HIV INTERVENTIONS & INSIGHTS ON KNOWLEDGE ABOUT TB & STIGMA FROM HIV SURVEYS

Human Sciences Research Council(HSRC)

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Overview of Presentation

TB and HIV
intersection in
South Africa

Knowledge
about TB
transmission
and risk

TB Stigma

SBCC

NSP 2023-2028

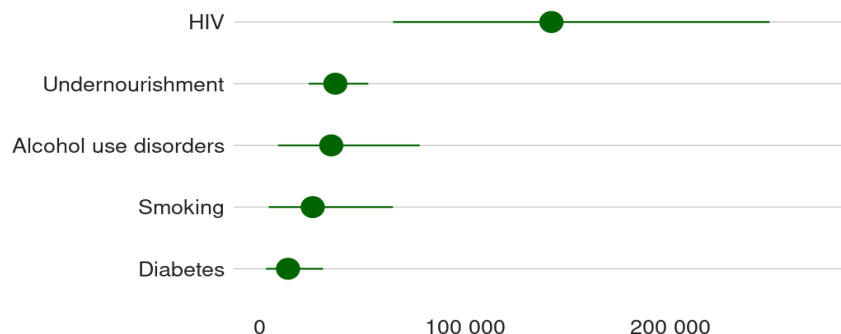
Concluding
Remarks

TB and HIV - Intersecting Epidemics

Estimates of TB burden, 2022

	Number	(Rate per 100 000 population)
Total TB incidence	280 000 (182 000-398 000)	468 (304-665)
HIV-positive TB incidence	152 000 (99 000-217 000)	255 (166-362)
MDR/RR-TB incidence**	11 000 (6 700-16 000)	19 (11-26)
HIV-negative TB mortality	23 000 (22 000-24 000)	39 (37-41)
HIV-positive TB mortality	31 000 (9 900-64 000)	52 (17-107)

Cases attributable to five risk factors, 2022



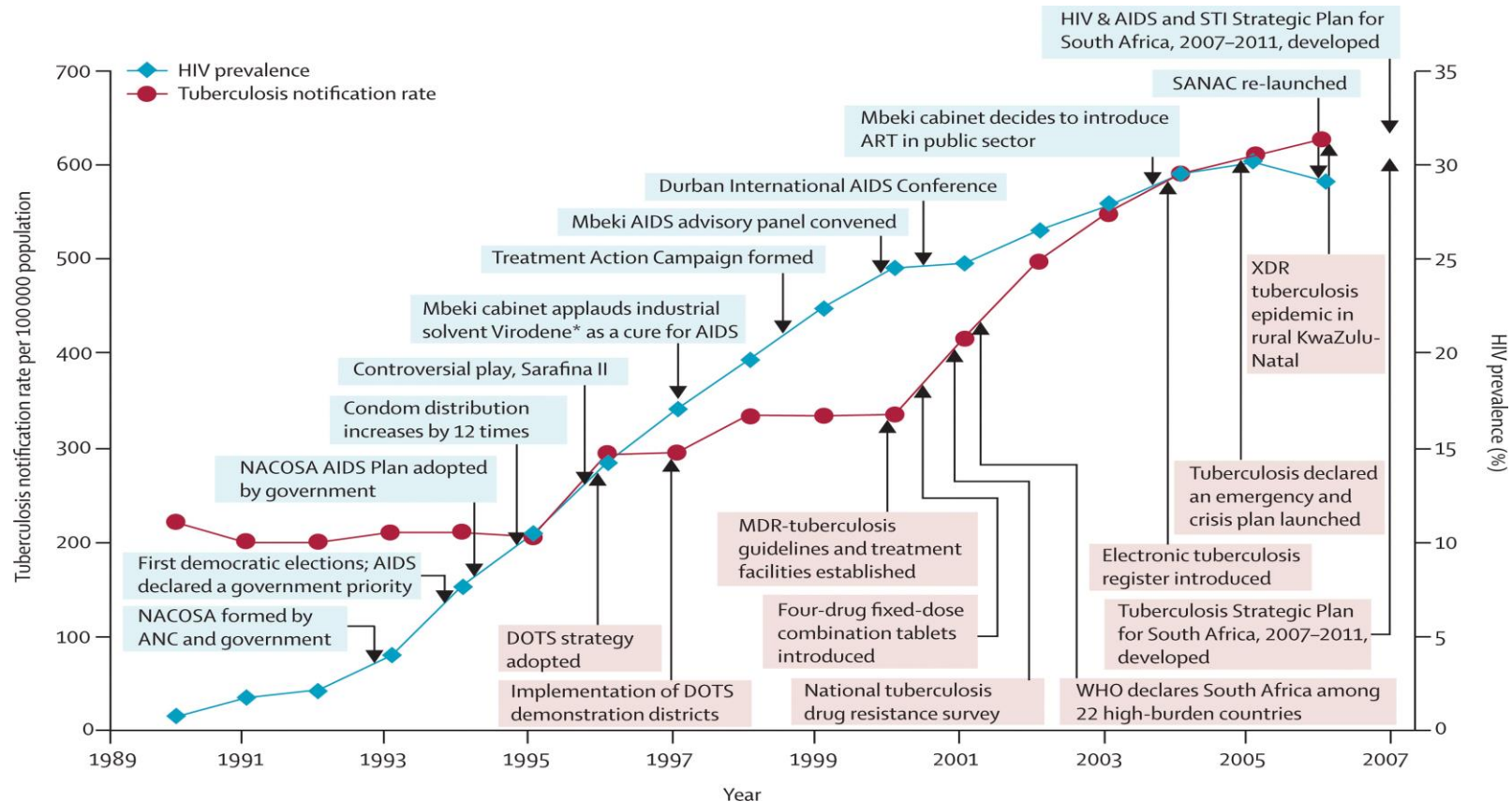
Patients with known HIV status who are HIV-positive **54%**
- on antiretroviral therapy **88%**

TB and HIV - Intersecting Epidemics

Social and structural drivers of TB and HIV intersect and overlap

	KEY POPULATIONS	OTHER PRIORITY POPULATIONS
HIV	<p>Increased risk of acquiring HIV, TB and STIs and suffering from punitive laws, stigma and discrimination.</p> <ul style="list-style-type: none"> • Sex workers and their clients • Trans and gender-diverse people • Men who have sex with men (MSM) • People who use drugs (PWUD) • People in prisons and other closed settings • People living with HIV (PLHIV) 	<p>Increased risk of acquiring HIV, TB and STIs because of biological, behavioural or structural factors.</p> <ul style="list-style-type: none"> • Adolescents and young people, especially AGYW • Survivors of SGBV <p>Face distinct barriers to accessing healthcare services</p> <ul style="list-style-type: none"> • Children, including orphans and vulnerable children • Migrants, mobile populations, and undocumented individuals • People with disabilities • People with mental health conditions • LGBTIQ+ persons • People living in rural areas, informal settlements, and inner cities
TB	<ul style="list-style-type: none"> • PLHIV • Children < 5-years old • Health workers • People in prisons and other closed settings • People living in informal settlements • Mineworkers and peri-mining communities • Sex workers • Migrants, mobile populations, and undocumented individuals 	<ul style="list-style-type: none"> • Contacts of PWTB • People with prior TB • Smokers • People with harmful alcohol- use • The elderly • Adolescents and young people • People with diabetes • Pregnant women • Men • People with disabilities • People with mental health conditions

Historical overview of major events in HIV and TB Epidemics in South Africa, 1989–2007



Lancet 2009 374921-933DOI: (10.1016/S0140-6736(09)60916-8)

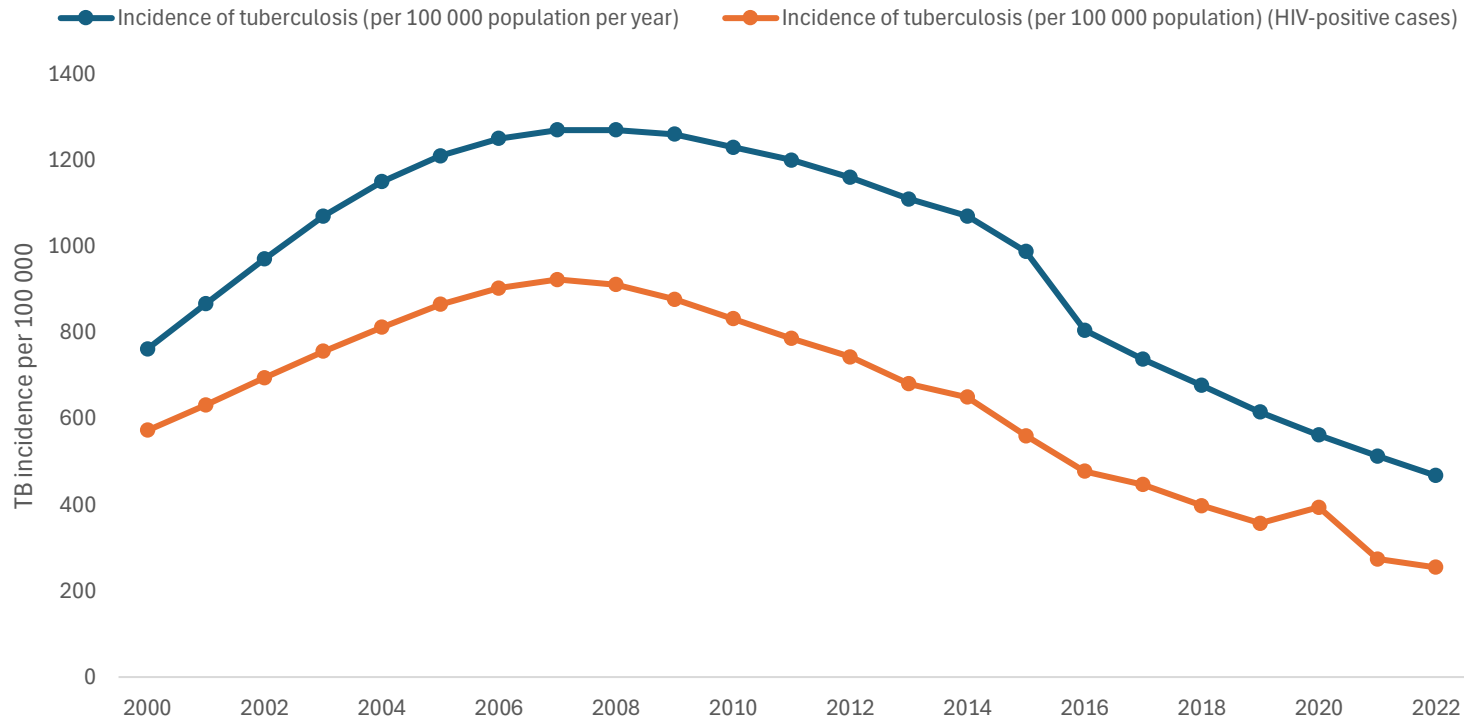
TB and HIV - Intersecting Epidemics



Slide : Prof Mlisana SAAIDS 2023

With increasing recognition of the TB / HIV syndemicity TB was included in the NSP from 2012

TB Incidence over time



Sources: TB incidence: WHO Global Health Observatory. : [https://www.who.int/data/gho/data/indicators/indicator-details/GHO/incidence-of-tuberculosis-\(per-100-000-population-per-year\)](https://www.who.int/data/gho/data/indicators/indicator-details/GHO/incidence-of-tuberculosis-(per-100-000-population-per-year)).

Aggressive scale up of antiretroviral treatment (ART) has curbed and reversed the rapid increase of TB

The impact of HIV and tuberculosis interventions on South African adult tuberculosis trends, 1990-2019: a mathematical modeling analysis

Kubanje et al, 2022

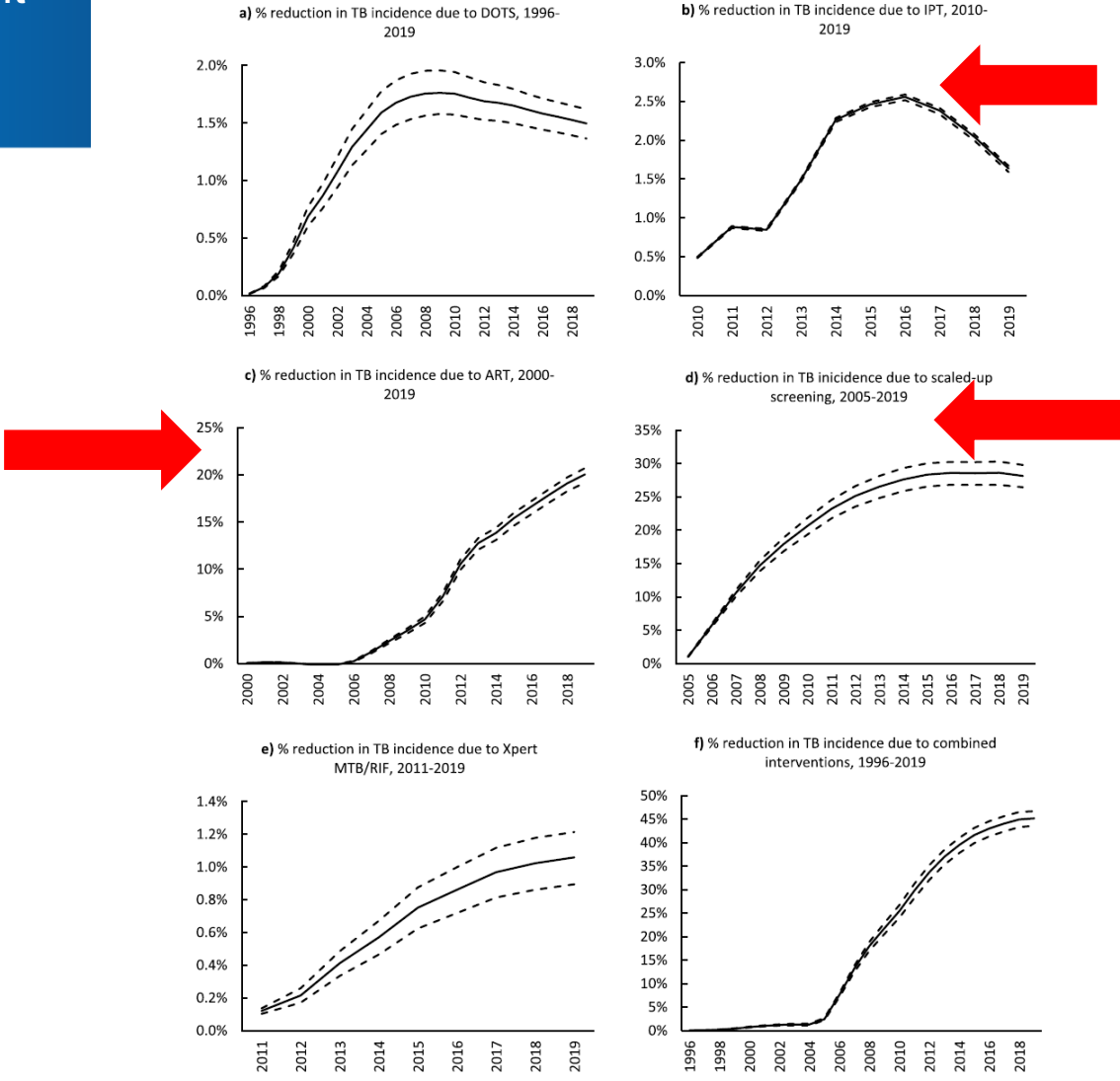
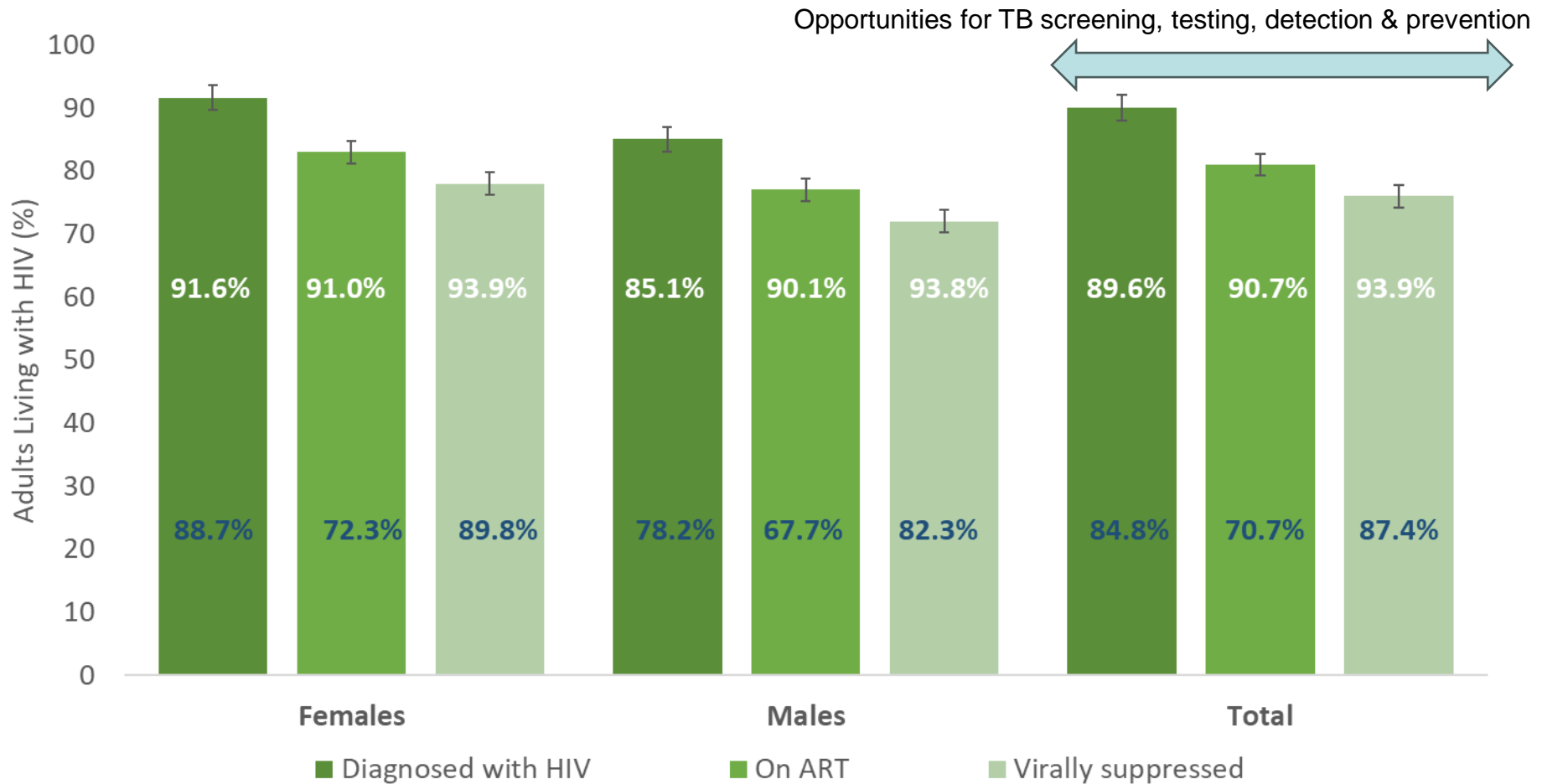


Figure 4. The impact of programmatic interventions on TB incidence: a) DOTS, b) IPT, c) ART, d) scaled-up TB screening, e) Xpert MTB/RIF, and f) all interventions combined. Solid lines represent the estimated mean reductions in TB incidence. All dashed lines represent the 95% confidence intervals. ART=antiretroviral therapy. DOTS=Directly Observed Therapy; IPT=isoniazid preventive therapy.

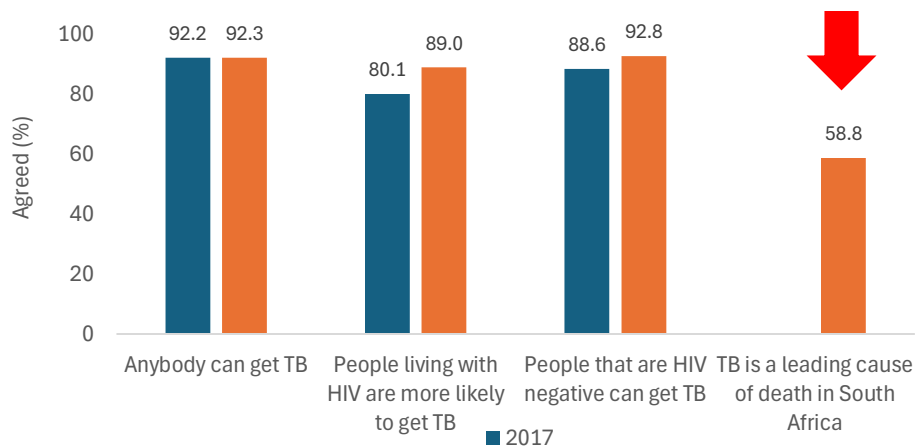
HSRC HIV Surveillance

- The South Africa National HIV Prevalence, Incidence, Behavior, and Communication Survey (SABSSM) series has been tracking the HIV epidemic and impact of different interventions since 2002
- PLHIV Stigma index – 2014 and 2021
- Biomarkers
 - Testing, infections, treatment coverage, and gaps, UNAIDS targets
- Knowledge, perceptions and attitudes about HIV and TB
 - Risk, behaviours, and stigma

95-95-95 Indicators for people 15 years and older living with HIV, SABSSMVI, 2022

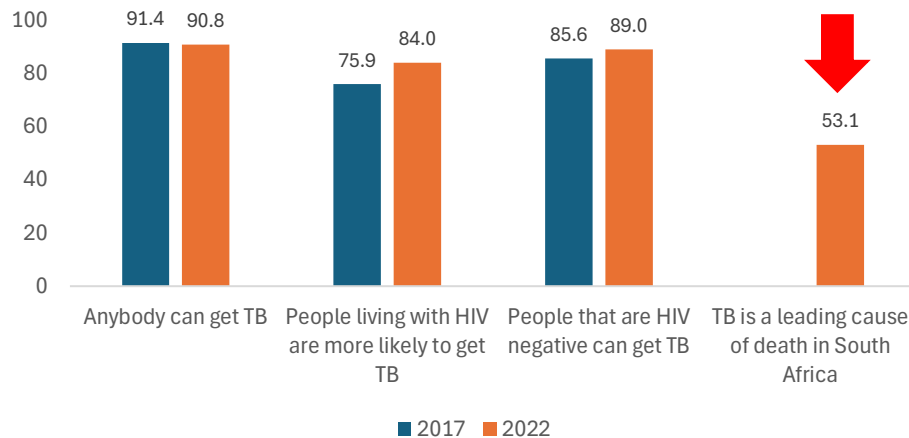


Knowledge about TB Risk in people 15 years & older, SABSSM 2017 & 2022



High levels of knowledge about TB transmission >90%

No variation by sex, age, locality type



TB Mortality

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NUMBER OF TB DEATHS 2022

54 200 (one person every 10 minutes)

Range 30 300-84 900. (55 400 in 2021 ↓ -2.1%)

TB Stigma

THE PEOPLE LIVING WITH HIV STIGMA INDEX 2.0 IN SIX DISTRICTS OF SOUTH AFRICA 2020 – 2021 *Report*

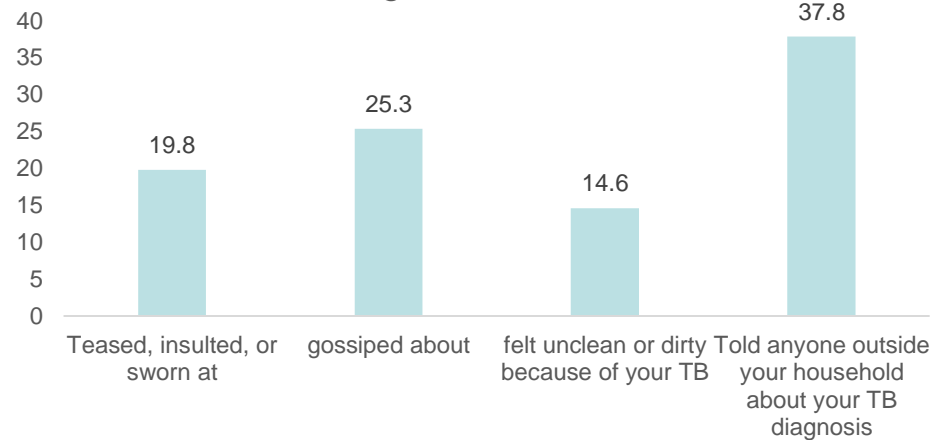


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Stigma associated with TB among PLHIV remains a challenge

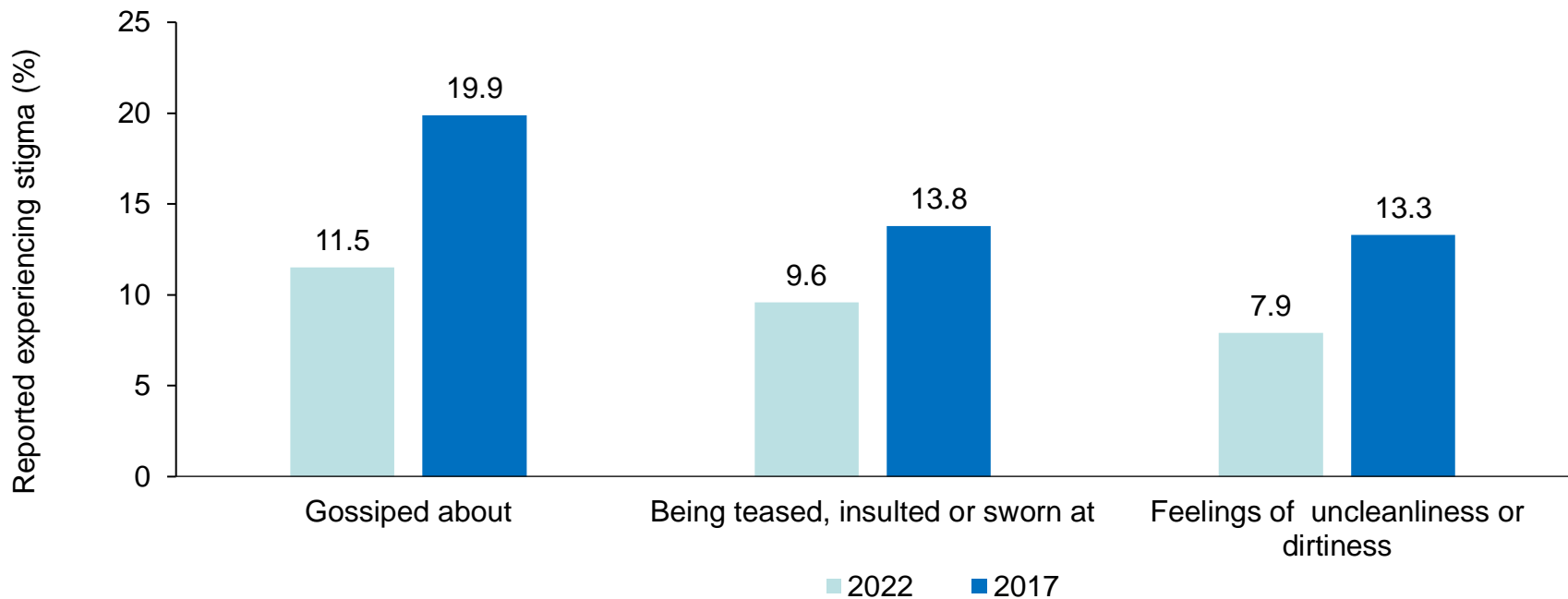
Stigma and disclosure among PLHIV diagnosed with TB



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Stigma in PLHIV 15 years & older who reported having TB, SABSSM, 2017 & 2022



Reported stigma in PLHIV who reported having TB

Social and Behaviour Change Communication Initiatives

- One of the responses to HIV has been Social and Behaviour Change Communication initiatives
- We found correlation between exposure to SBCC and HIV testing, rejection of myths
- Utilizing various media platforms such as radio, television, newspapers, and social media to drive action

NSP 2023-2028

The four strategic goals are:

GOAL 1:

Break down barriers to achieving outcomes for HIV, TB and STIs

GOAL 2:

Maximise equitable and equal access to services and solutions for HIV, TB and STIs

GOAL 4:

Fully resource and sustain an efficient NSP led by revitalised, inclusive and accountable institutions

GOAL 3:

Build resilient systems for HIV, TB and STIs that are integrated into systems for health, social protection, and pandemic response



CATASTROPHIC COSTS

56%

(Target is 0% of people with TB facing catastrophic costs by 2020)



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Concluding Remarks

- TB in SA remains intertwined with HIV
- HIV interventions have benefited TB
- Strengthening HIV interventions will continue to benefit TB
- Awareness of TB mortality is low
- People with TB face stigma
- Focus on TB in NSP still required



TB/HIV

Strengthen coordination and collaboration between tuberculosis and HIV programmes, with the support of relevant United Nations entities and other stakeholders to ensure universal access to integrated prevention, diagnosis, treatment and care services, by promoting testing for HIV among people with tuberculosis and screening all people living with HIV regularly for tuberculosis, providing tuberculosis preventive treatment, and addressing structural barriers to health services, such as stigma, discrimination and gender inequality.

Source: The Political Declaration of the UN High-Level Meeting on the fight against tuberculosis

Acknowledgements

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THANK YOU



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