

**AIDS Impact**

*Promises to keep and miles to go...*

# Dynamics of HIV epidemic in Sub-Saharan Africa: Who are we leaving behind in treatment?

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- Sub-Saharan Africa carries the heaviest burden of people living with HIV globally.
- Access to life prolonging antiretroviral treatment varies considerably between countries and within country.
- Estimated proportion of those knowing their HIV and accessing treatment ranges from 87% in Zimbabwe to 91% in Tanzania.
- Generally, women are more likely to access treatment compared to males.
- An exception in few countries such as Zambia and eSwatini where males are 11.1% and 17.2% more likely to access treatment than females respectively.

# Country targets by age (90-90-90)

Age	Zimbabwe			eSwatini			Zambia			Tanzania		
	1st	2nd	3rd	1st	2nd	3rd	1st	2nd	3rd	1st	2nd	3rd
15-24	50.1	83.7	85.4	66.1	81.7	76.4	40.2	80.0	71.3	39.1	87.7	82.2
25-34	66.0	79.8	82.5	82.4	83.7	90.3	60.8	77.2	88.7	42.0	83.2	87.4
35-49	79.9	87.4	85.8	89.5	88.8	94.1	73.8	87.4	89.8	56.9	91.5	86.1

- The older you get the more likely you are to know HIV positive status
- Similar pattern in all these countries
- Youth in Zambia and Tanzania least likely to know their HIV positive status
- The older you get the more likely you are to be diagnosed and put on treatment
- Similar pattern exists with viral suppression



To date, the HSRC and its partners have undertaken five population-based HIV and behavioural surveys, in previous surveys were conducted in

**2002, 2005, 2008 & 2012**

These surveys have provided an important gauge of the HIV epidemic of South Africa



## HIV Surveillance

HIV surveillance has been key in monitoring the response to the HIV epidemic, ART exposure, incidence testing and Viral Load testing

## HIVDR

HIV Drug Resistance

HIV drug resistance (HIVDR) testing was included in the 2017 survey for the first time in the survey series





**Valid Households**  
11,776



**HIV Testing Response**  
61.1 %



**Household level response**  
82.2 %



# RESPONSE RATE SOUTH AFRICA 2017

**Blood Samples**

23,923



**Eligible individuals**  
■■■■■■■■ ■■■■■■■■ ■■■■■■■■ ■■■■■■■■  
39,132



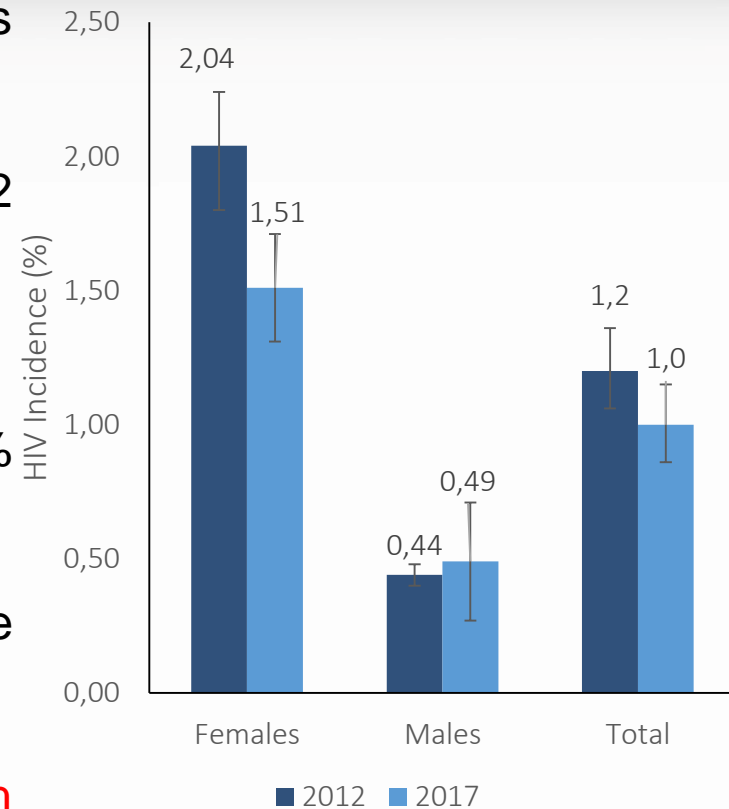
**Individual level response**  
93.6 %

# HIV Prevalence, 2017

Age	HIV prevalence (%)			Total PLHIV
	Overall	Males	Females	
<2	2.8	1.8	3.8	62 000
2-14	2.7	2.5	2.9	390 000
15-24	7.9	4.8	10.9	756 000
25-49	26.4	19.4	33.3	5 588 000
50+	12.5	11.5	13.3	1 124 000
Total	14.0	10.6	17.3	7 920 000

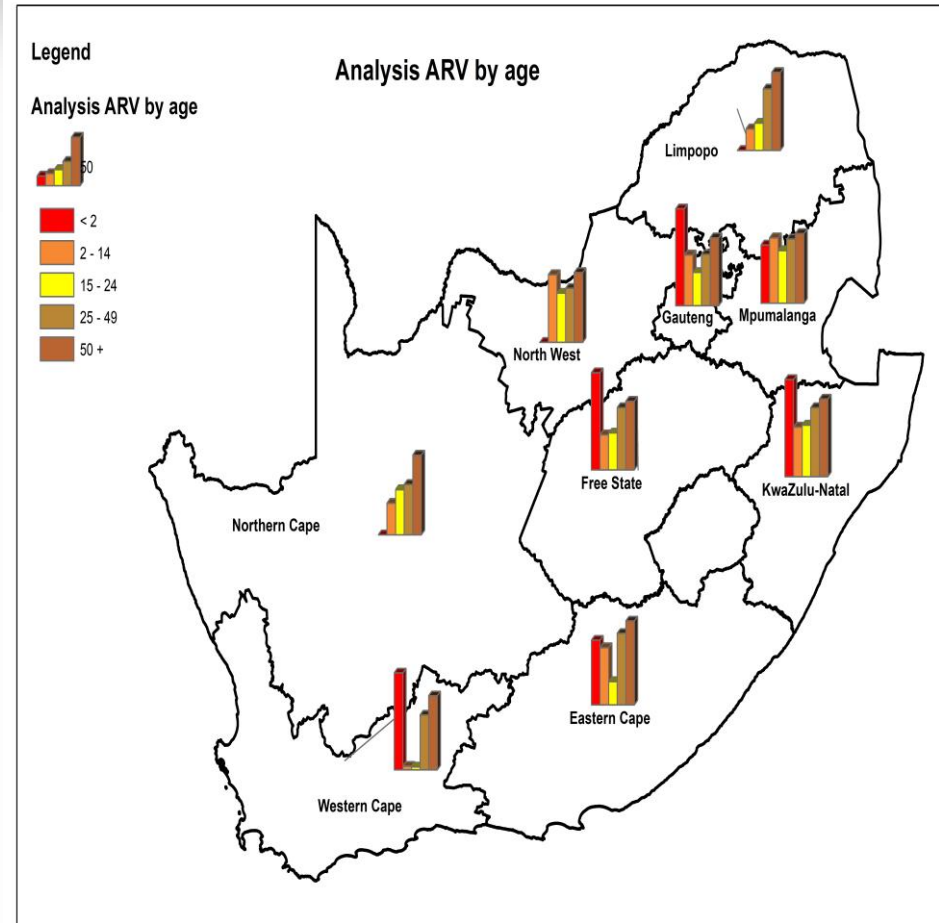
- Numbers of people living with HIV continue to increase in South Africa
  - 2012: HIV prevalence was **12.2%** translating to 6.4 million people living with HIV.
- Continued HIV incidence and people living longer due to expanded access to antiretroviral contribute to this increase
- Some indications of an ageing epidemic, amongst older people

- Incidence at 0.48 % (=> 231 000 new infections annually)
- Higher incidence among females (0.51% =>122 000) compared to males (0.46% 109 000)
- **Youth** Incidence was 1.0 % (=>88 000)
- **Youth** : three times higher among females (1.51% => 66 000) compared to males (0.49% => 22 000)
- Over a third (38.0%) of all new infections come from this age group
- From 2012 to 2017 HIV incidence among **youth** declined by 17%
- The decline in incidence was only among females (26%) whilst **among males incidence increased by 11%**



# Exposure to ARVs, 2017

Age	HIV+	ART	ART%
<2	62 000	23 003	76.5
2-14	390 000	117 000	48.0
<b>15-24</b>	<b>756 000</b>	<b>227 4000</b>	<b>39.1</b>
25-49	5 588 000	3 244 000	63.1
50+	1 124 000	753 000	76.7
Total	7 920 000	4 402 000	62.3



- A considerable proportion of <2 years on treatment.
- **Youth is considerably lagging behind in access to treatment irrespective of gender**
- In all provinces that have infants living with HIV, a considerably high proportion of these infants is on treatment.



- Viral load suppression threshold of <1 000 copies of HIV per ml in DBS samples

Age	ART Exposure (%)				Viral Suppression (%)		
	Total	Total %	Males	Females	Total	Males	Females
<2	13 900	76.5	48.0	100.0	67.8	46.7	77.2
2-14	117 000	48.0	49.1	47.2	50.7	56.6	45.4
<b>15-24</b>	<b>274 000</b>	<b>39.1</b>	<b>43.1</b>	<b>38.6</b>	<b>47.7</b>	<b>49.1</b>	<b>47.1</b>
25-49	3 244 000	63.1	53.3	68.5	62.8	51.0	69.6
50+	753 000	76.7	81.5	74.0	73.2	76.4	71.2
<b>Total</b>	<b>4 402 000</b>	<b>62.3</b>	<b>56.3</b>	<b>65.6</b>	<b>62.3</b>	<b>55.0</b>	<b>66.5</b>

- High exposure to ARVs consistently translated to high viral suppression for both males and females
- 15 to 24 year olds show low levels of viral suppression

# National Key Country Indicators

**Overall HIV  
Prevalence**  
**14.0%**

**Overall Drug  
Resistance**  
**27.4%**

## People aged 15 - 64

**Diagnosed  
(first 90)**  
**84.9%**

**ART exposure  
(second 90)**  
**70.6%**

**Virally suppressed  
(third 90)**  
**87.5%**

## For people 15 years and older

**HIV Testing**  
**75.2%**

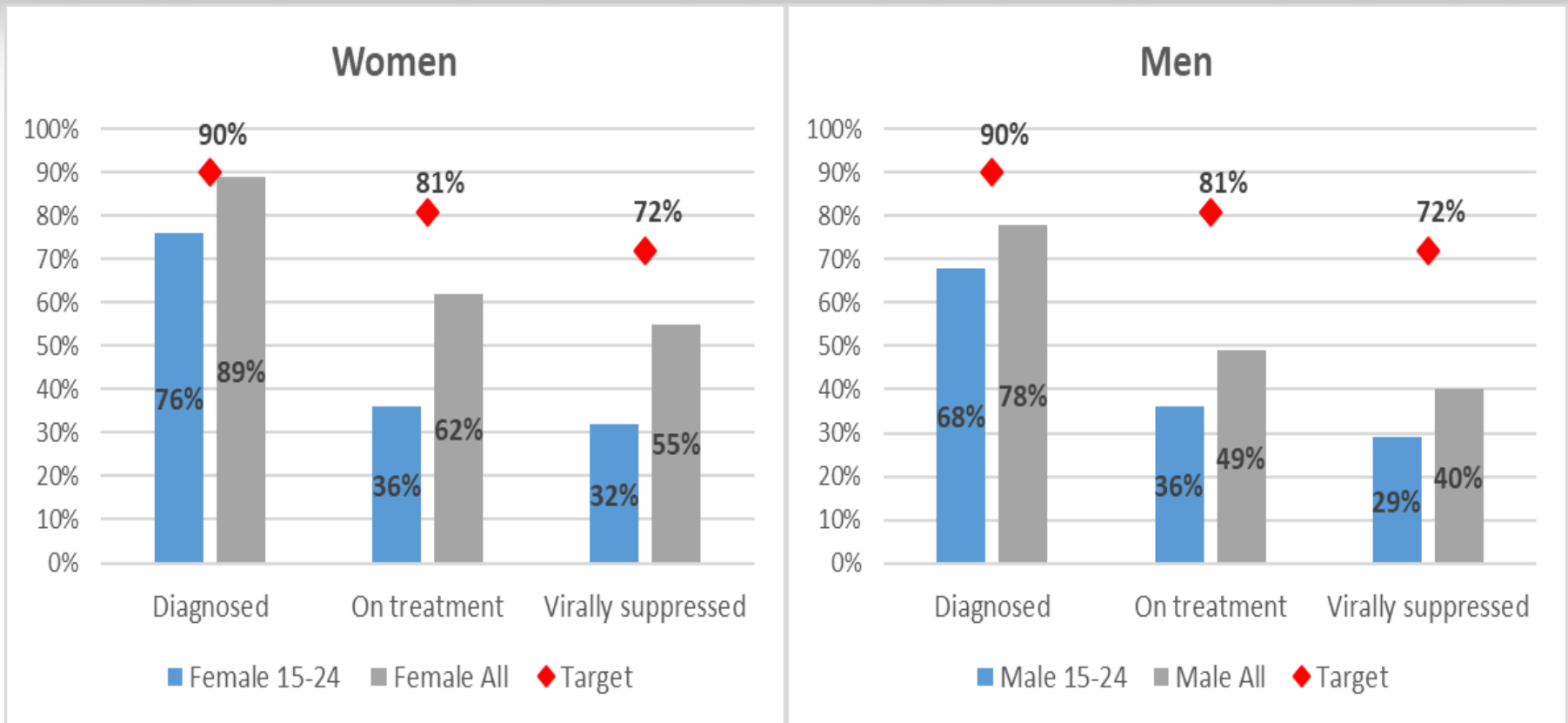
**Medical Male  
Circumcision**  
**30.8%**

**Condom use  
at last sex**  
**38.9%**



**HSRC**  
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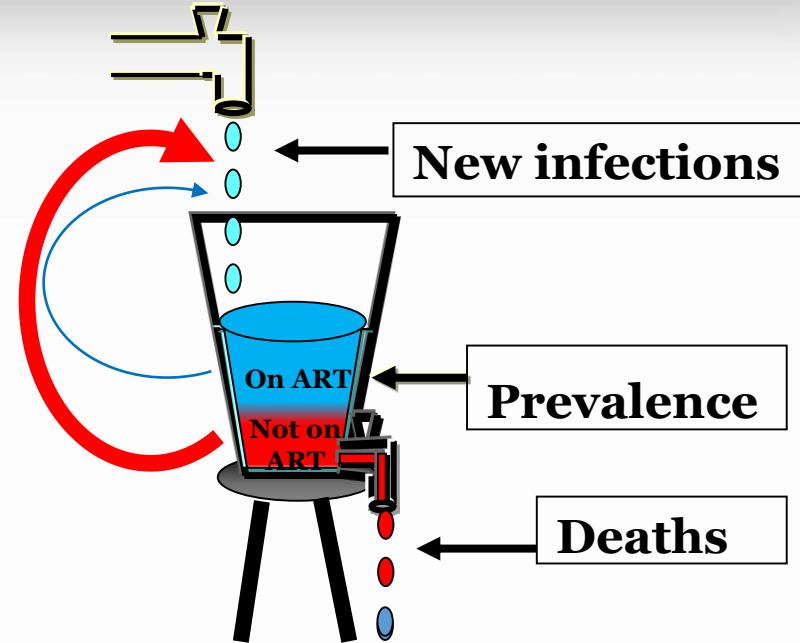




- Much less than the national average of youth that are HIV positive know their status

# Human Beings NOT just numbers

- These are not numbers but **human beings**
- **7 919 574** human beings in South Africa are living with HIV
- **4 402 000** are on ARVs
- **2 669 000** are not on life saving ARVs
- Most of those (60.1 %) that are HIV positive (thus needing ARVs) and not on ARVs are youth aged 15 to 24, compare this to only 23.3% among 50+
- 77.5% of youth not on ARVs is virally unsuppressed
- **Sadly, if they are not put on treatment immediately their chances of dying due to AIDS increases everyday that we don't put them on treatment**



# Some Concluding Remarks

- We have left our youth behind and are failing them, only 39% on treatment
- We need to do a lot more, **consistently**, than what we have done so far, if we are to end the scourge of HIV epidemic
- Putting people on treatment is saving lives demonstrating **progressive success** with a **challenge** still persistent among youth.
- Prevention of new infections especially among those younger than 35 years and youth in particular is a **serious challenge** that we face
- We need to invigorate, strengthen and sustain HIV prevention programs to stop continuing transmission of HIV
- More detailed analyses of the Youth in South Africa will be presented on **Tuesday, 12h45 to 13h45 Lunchtime Satellite Youth At Risk @ SYON 1**



U.S. President's Emergency Plan for AIDS Relief (PEPFAR)  
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Department of Science and Technology, South African National AIDS Council, Global Fund, Right to Care, UNICEF, Centre for Communication Impact, Soul City, LoveLife

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THANK  
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