

The HIV and AIDS epidemic in South Africa: Where are we?

Geoffrey Setswe DrPH, MPH

Director: Social Aspects of HIV/AIDS and Health (SAHA)

Director: Social Aspects of HIV/AIDS Research Alliance (SAHARA)

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Overview

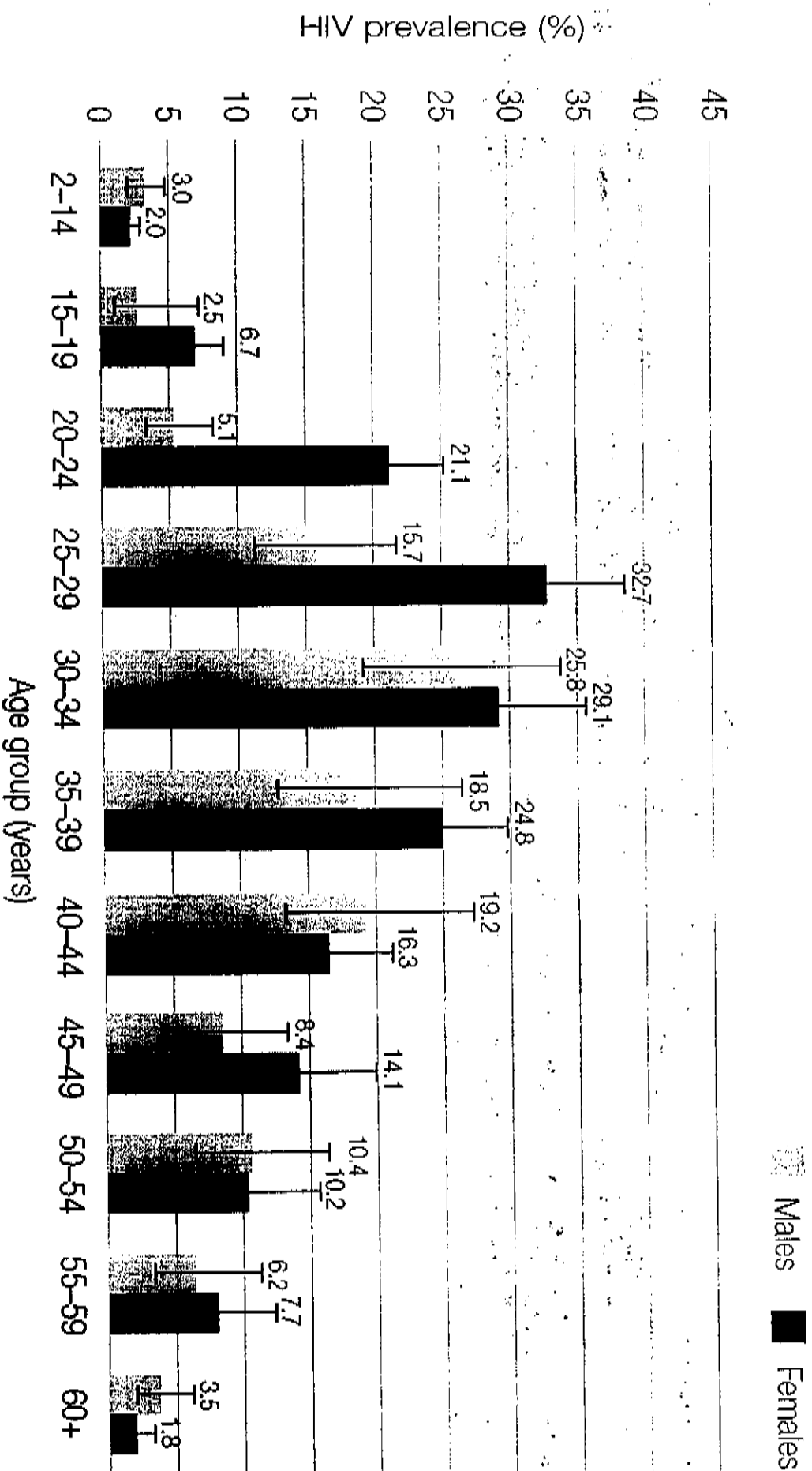
- HIV and AIDS prevalence and incidence
- Behavioural factors contributing to HIV/AIDS
- Exposure to communication campaigns

*“Of all diseases, AIDS provides the most dramatic and disturbing example of the capacity of a previously unknown pathogen to rapidly spread throughout the world... and cause social and economic upheaval on a scale that threatens to destabilize a large geographic area”
(WHO representative)*

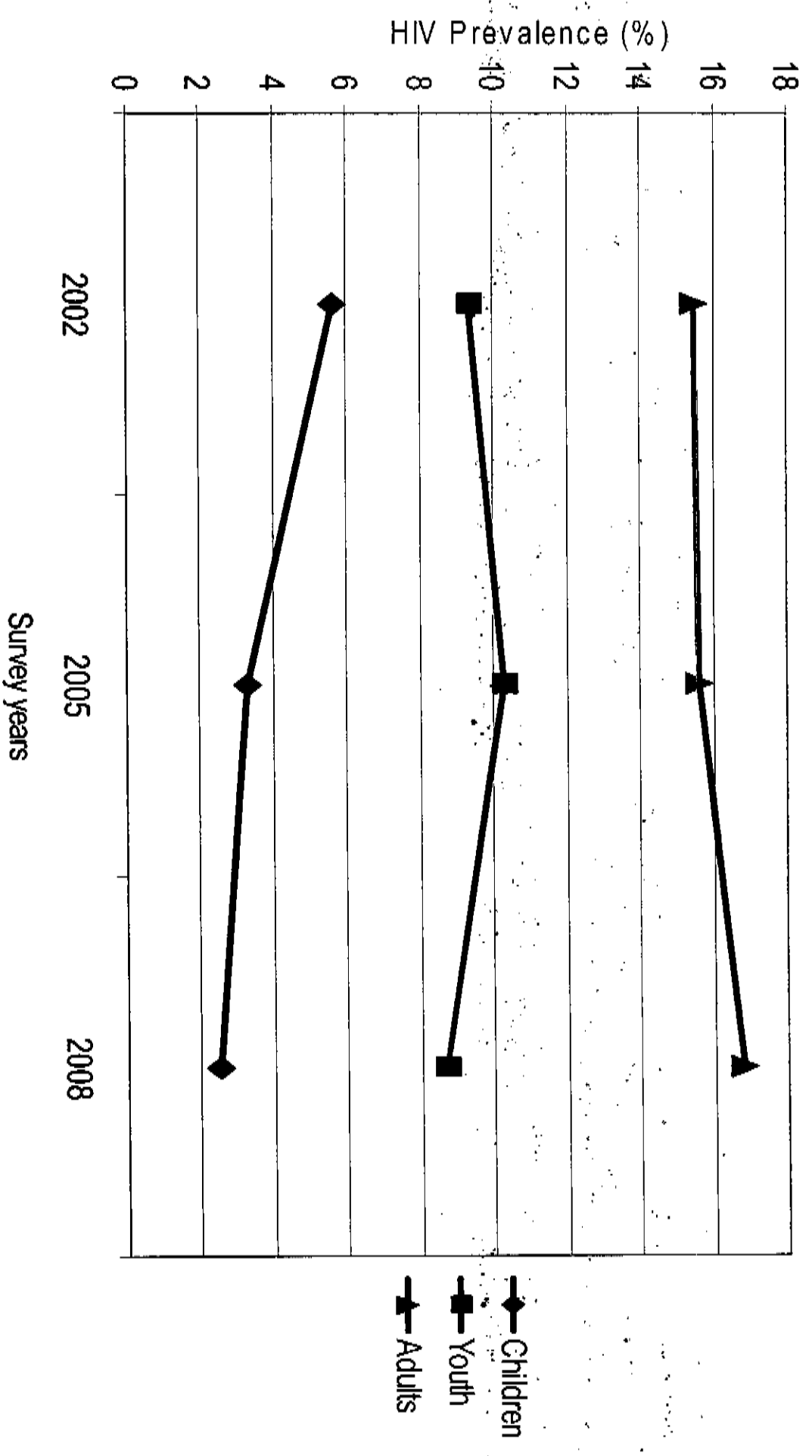
HIV prevalence trend

Year	HIV prevalence %	95% CI
2002	11.4	10.0-12.7
2005	10.8	9.9-11.8
2008	10.9	10.0-11.9

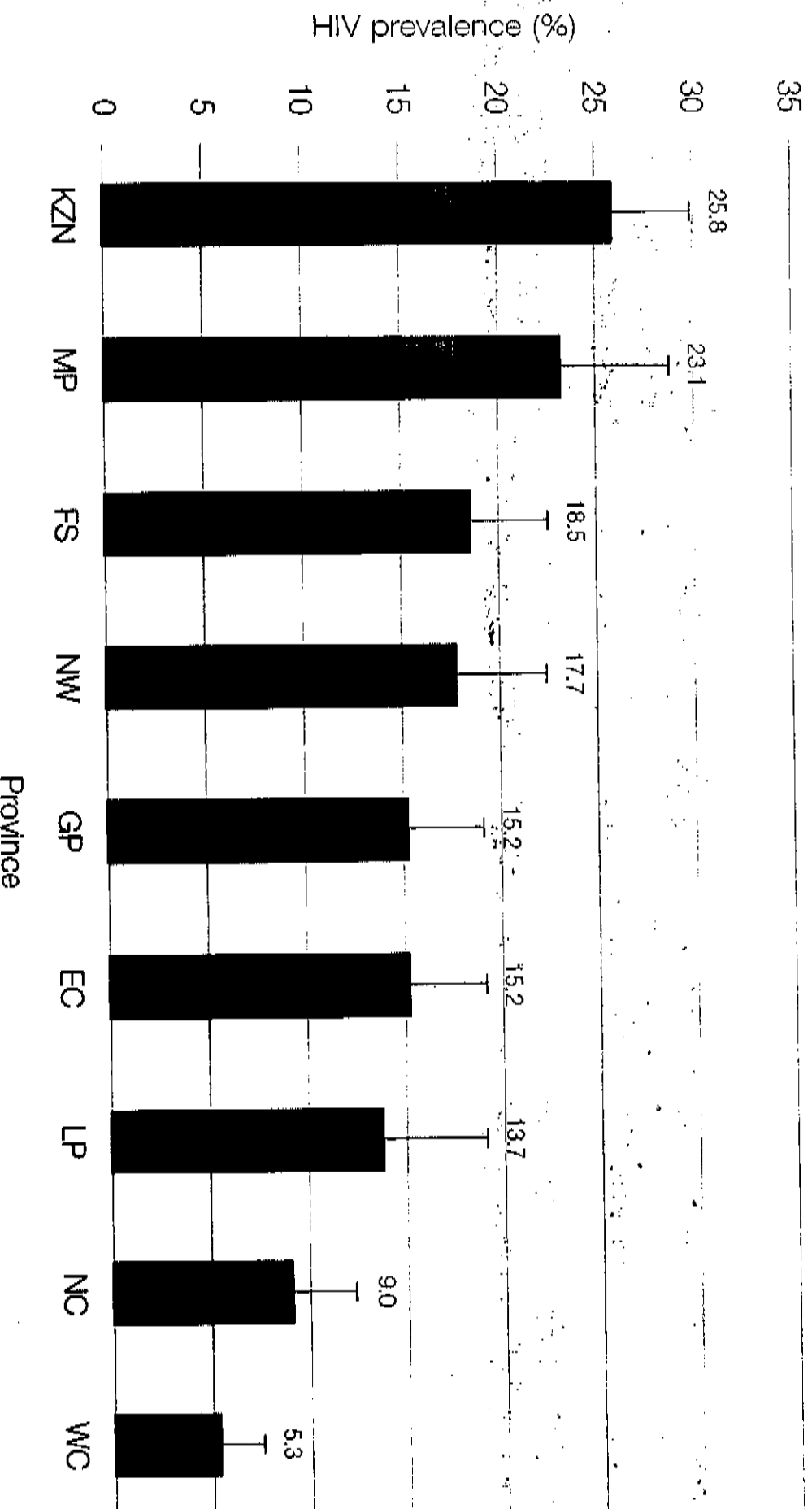
HIV prevalence, by sex and age, South Africa, 2008



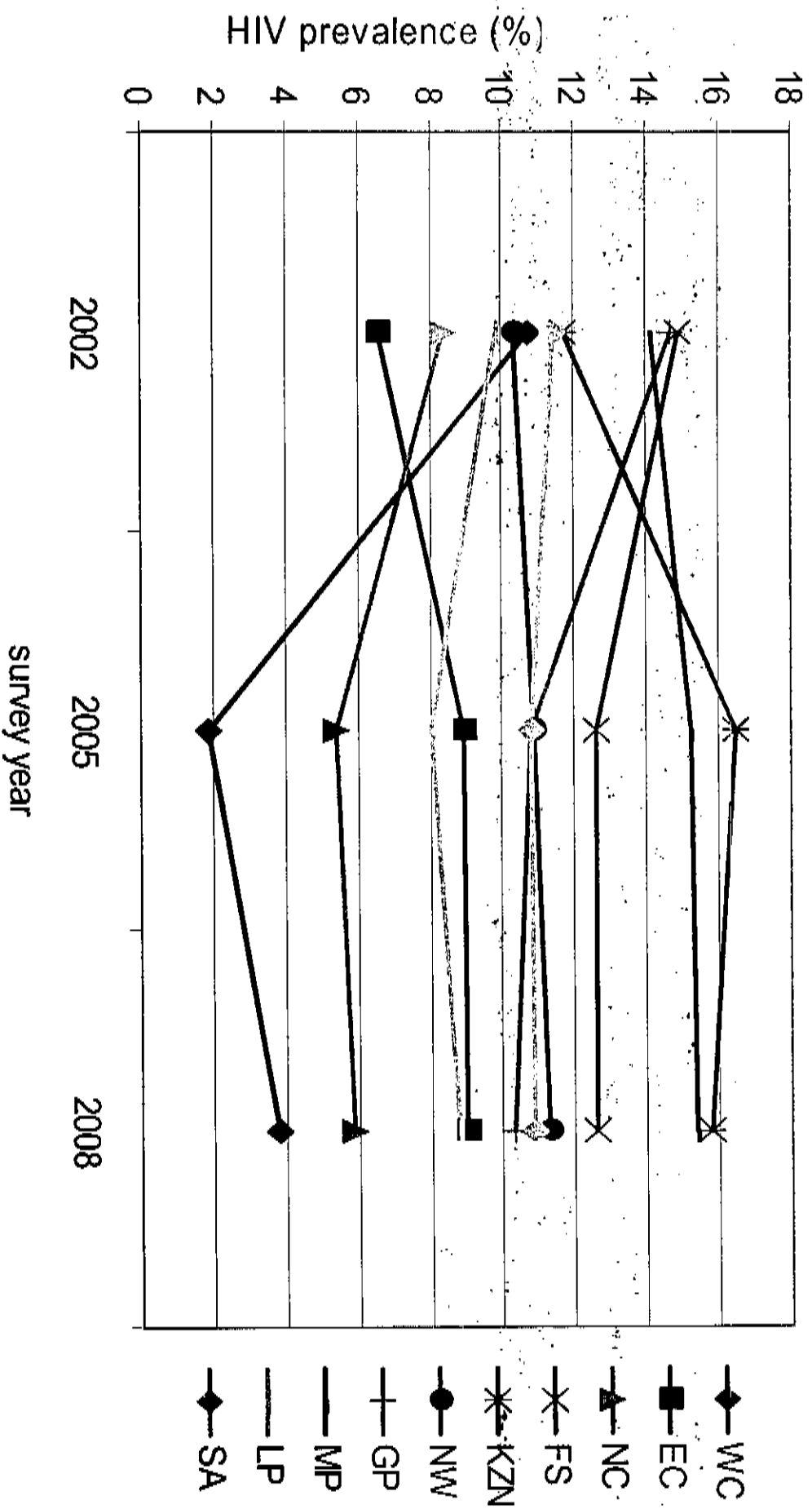
Trends in HIV prevalence (%) by age, 2002-2008



HIV prevalence among 15 - 49 year olds by province, South Africa 2008



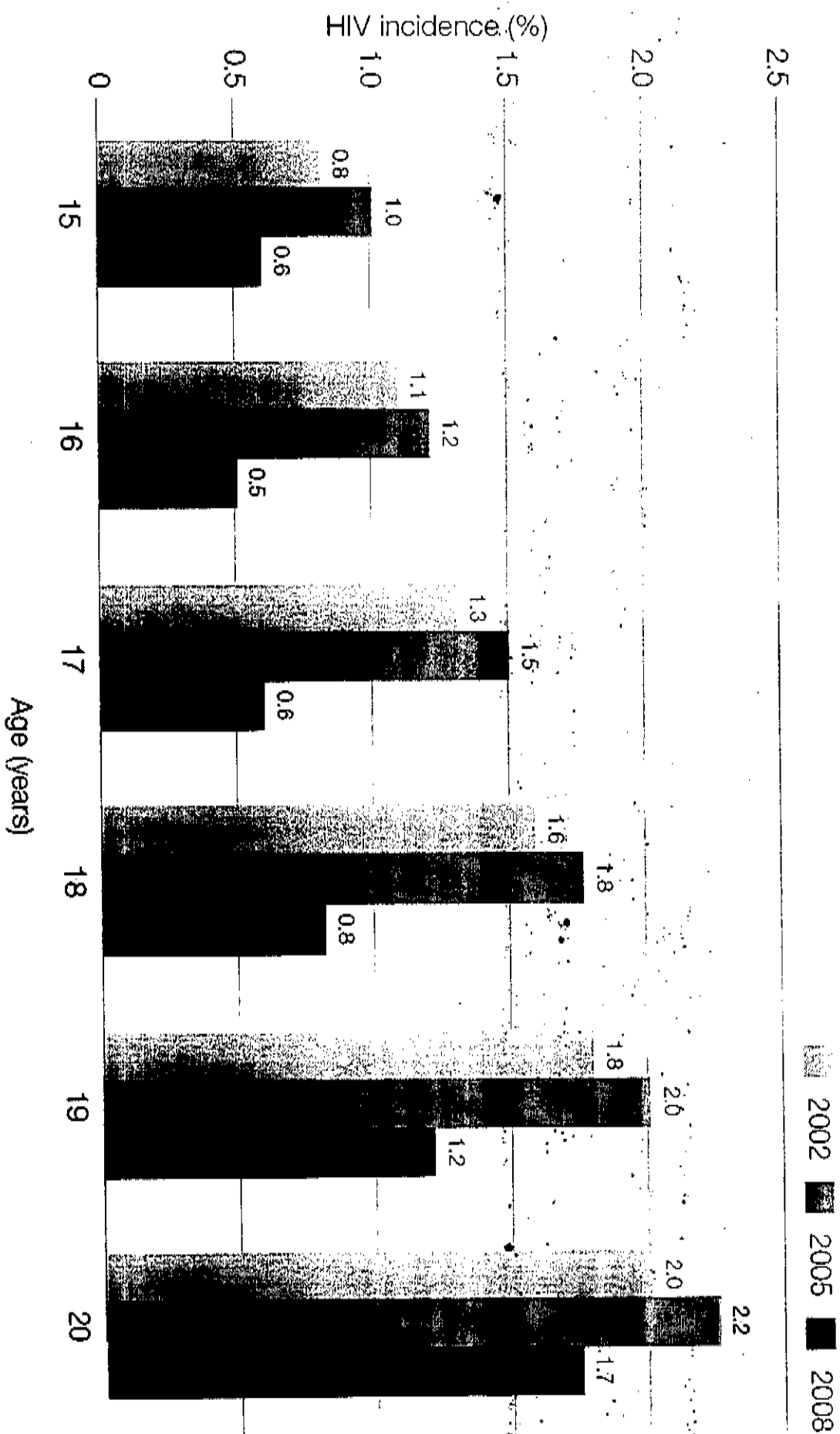
HIV prevalence by province, South Africa 2002-2008



HIV prevalence among the most-at-risk populations, South Africa 2008

Most-at-risk population	n	HIV + %	95% CI
African females 20-34	1395	32.7	29.7-36.0
African males 25- 49	944	23.7	20.1-27.7
Males 50 years and older	946	6.0	4.4-8.1
Men who have sex with men	86	9.9	4.6-20.2
People who are high-risk drinkers	965	13.9	10.4-18.2
Persons who use drugs for recreational purposes	490	10.8	7.2-15.8
People with disabilities	458	14.1	9.9-19.6

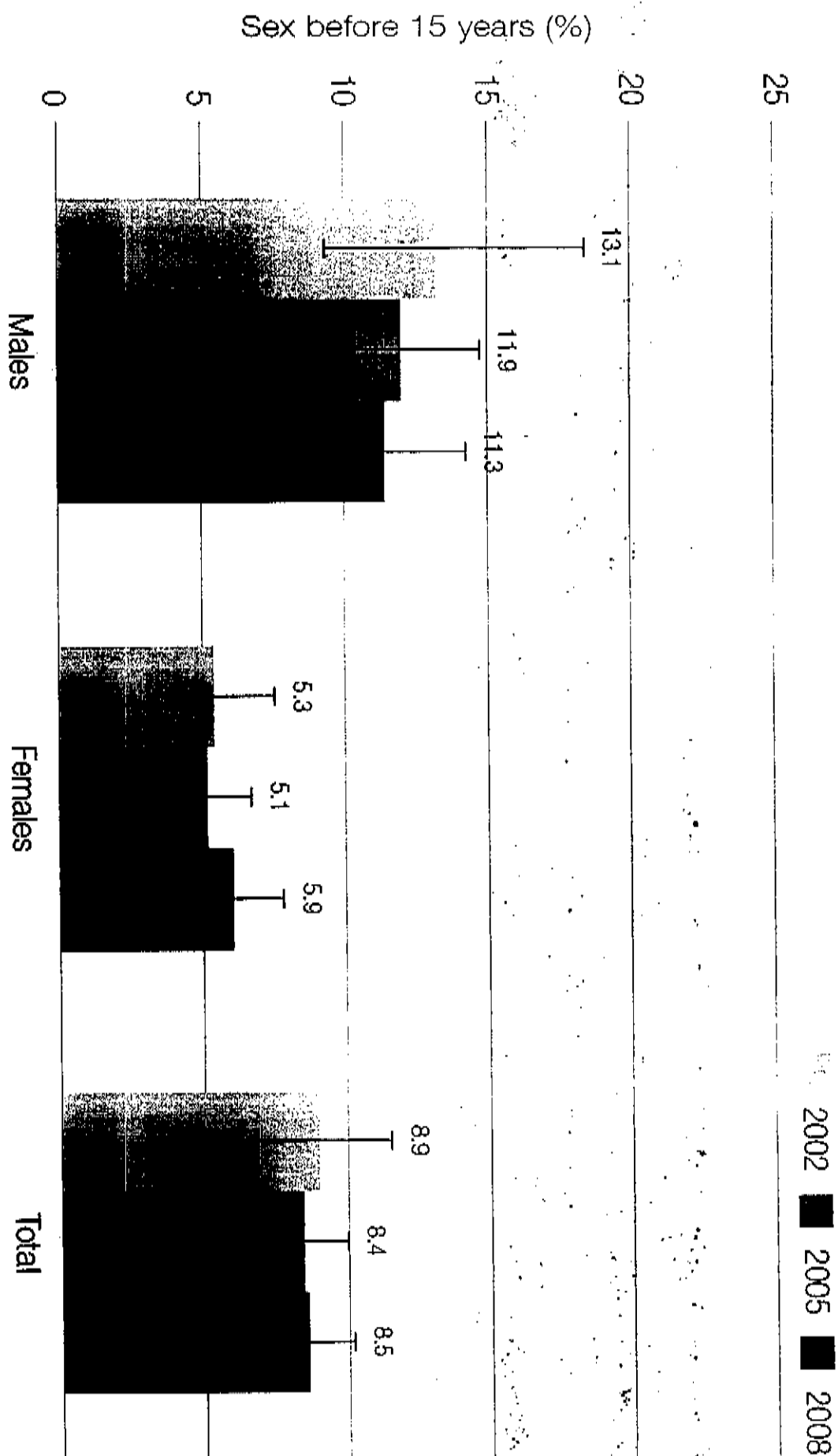
Comparison of HIV incidence among 15 - 20 year olds, South Africa 2002, 2005 and 2008



Behavioural Results



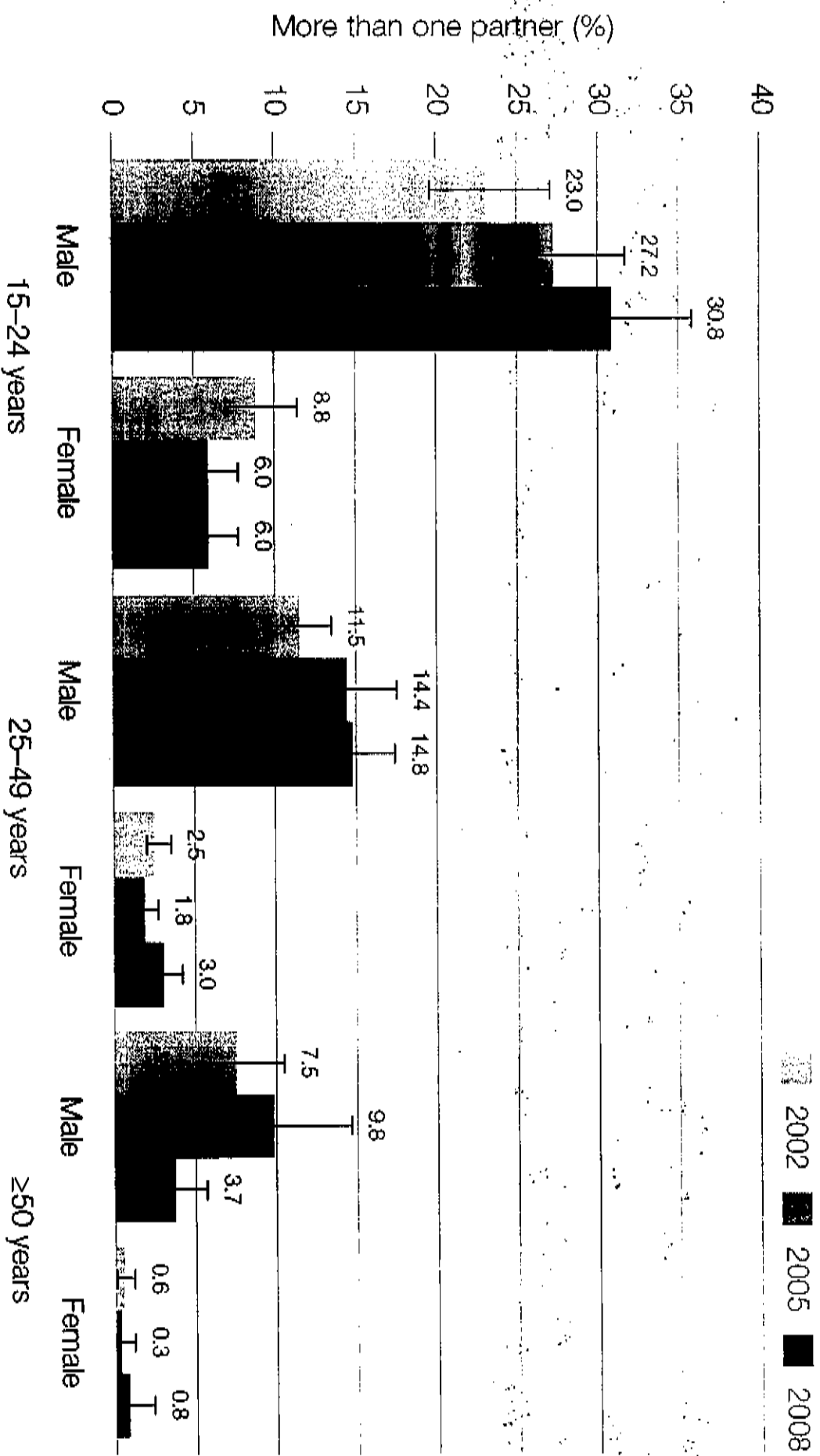
Sexual debut by sex among 15-24 year olds, South Africa 2002, 2005 and 2008



Intergenerational sex among 15-19 year olds, South Africa 2005 and 2008

		Within 5 years of own age (%)	Partner is 5+ years older (%)
2005			
Male		98.0	2.0
Female		81.4	18.5
Total		90.4	9.6
2008			
Male		98.5	0.7
Female		72.4	27.6
Total		85.1	14.5

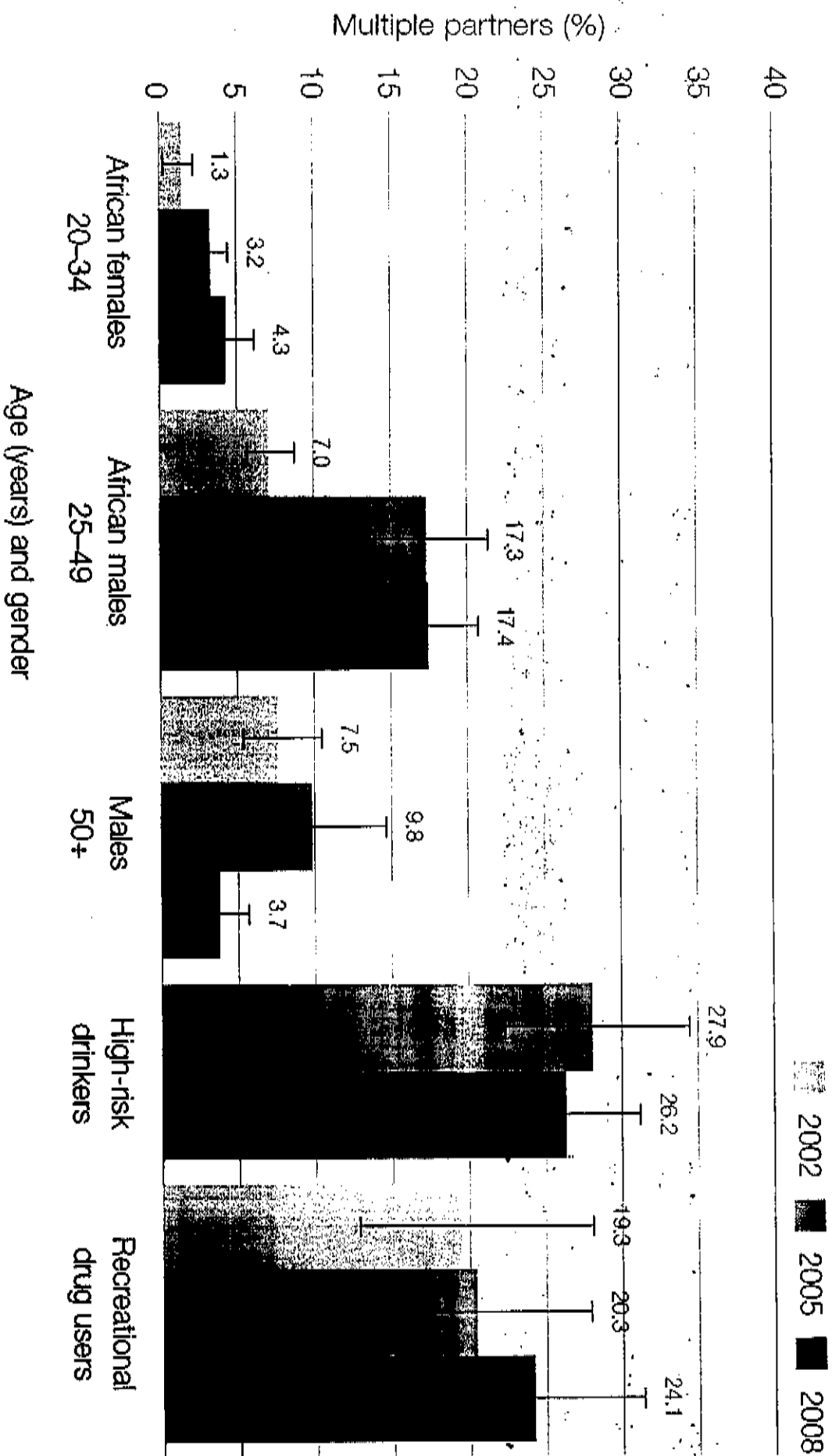
Multiple sexual partners, South Africa 2002, 2005 and 2008



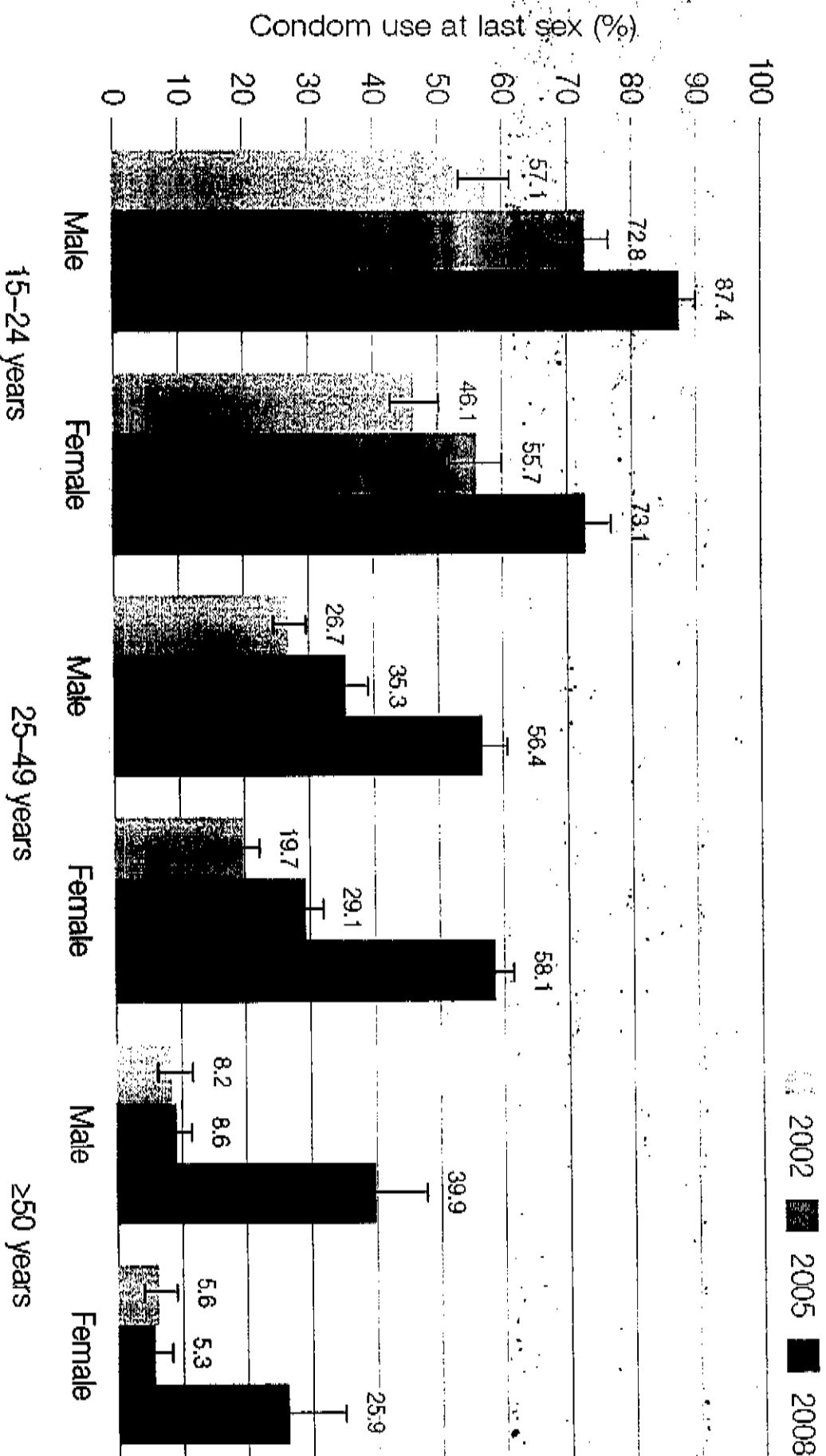
Multiple sexual partners among 15 -49 year olds by province, South Africa, 2002, 2005 and 2008

Province	2002 (%)	2005(%)	2008(%)
Western Cape	10.9	11.3	9.9
Eastern Cape	12.1	8.1	13.1
Northern Cape	5.6	7.5	8.8
Free State	5.7	5.4	14.6
KwaZulu-Natal	9.3	10.6	10.2
North West	10.7	11.4	12.9
Gauteng	9.6	11.3	8.6
Mpumalanga	10.5	7.2	9.4
Limpopo	6.9	9.5	10.8
National	9.4	9.8	10.6

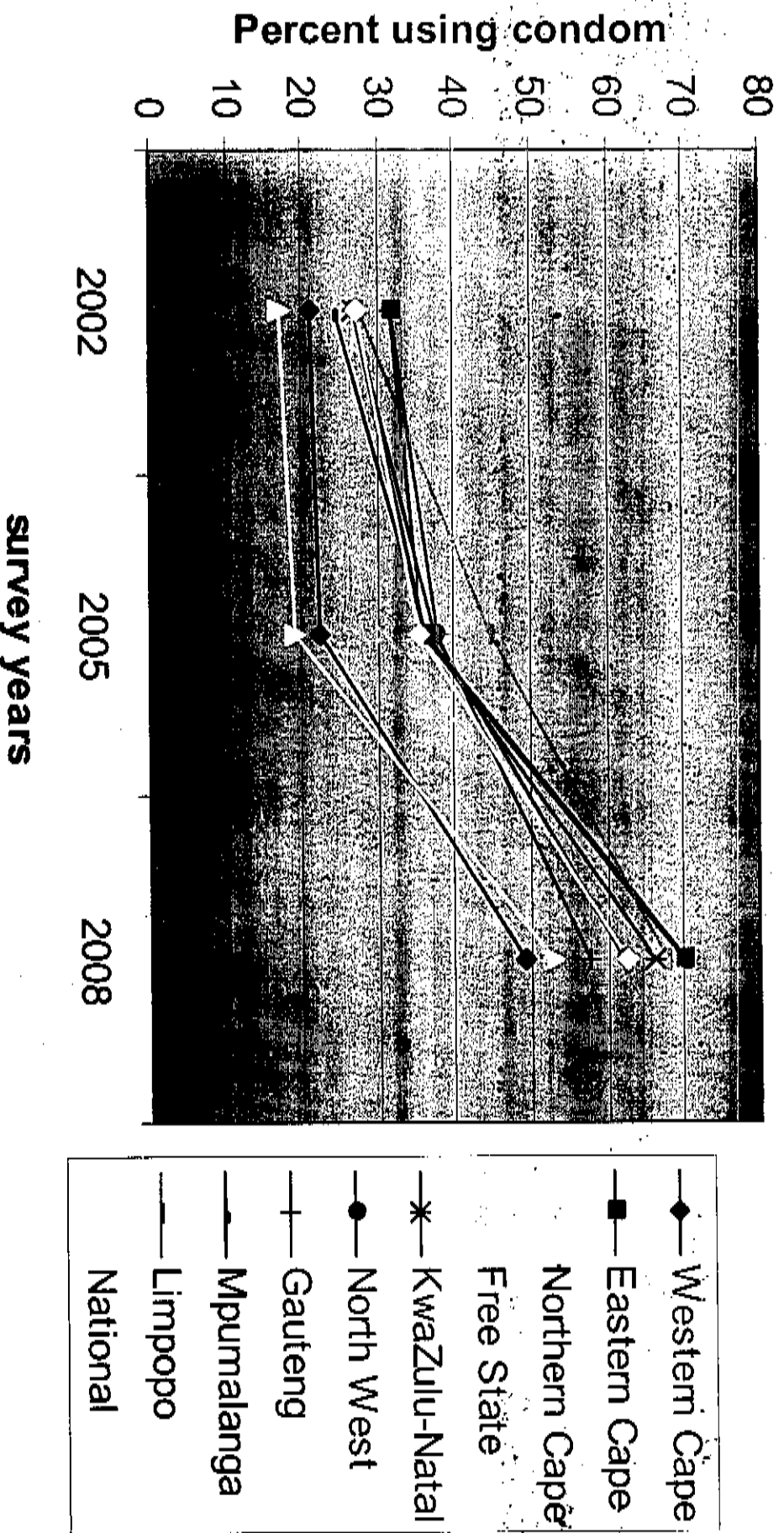
Most-at-risk population with multiple sexual partners, South Africa 2002, 2005 and 2008



Condom use by age group and sex, South Africa 2002, 2005 and 2008



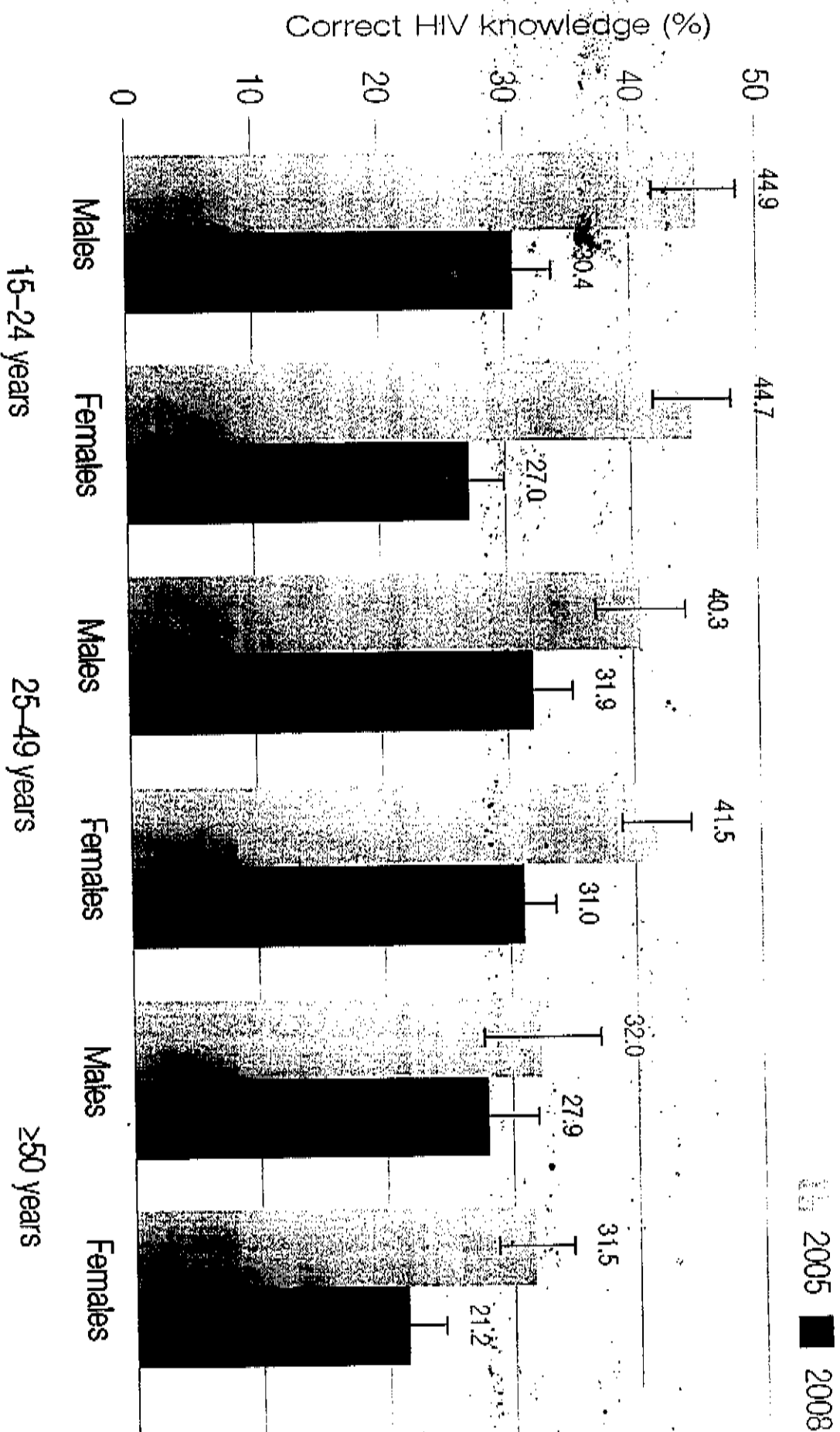
Condom use at last sex, by province, South Africa 2002, 2005 and 2008



Respondents aged 15 years and older who ever had an HIV test, South Africa, 2002, 2005 and 2008

2002		Yes %
Male		21.4
Female		21.4
Total		21.4
2005		
Male		27.6
Female		32.9
Total		30.5
2008		
Male		43.0
Female		56.7
Total		50.8

HIV knowledge by sex and age group, South Africa 2005 and 2008



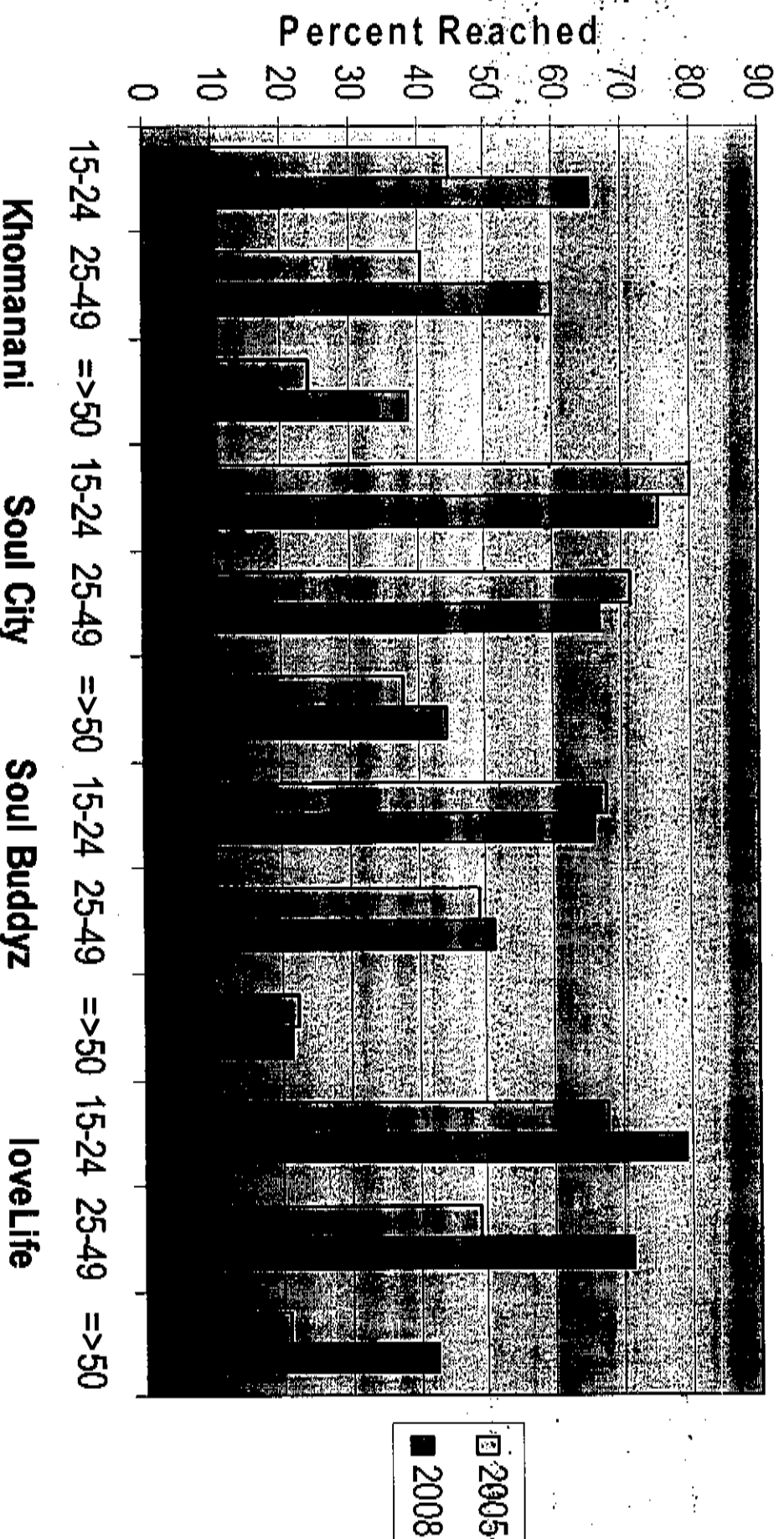
Exposure to HIV Communication Programmes



Reach of HIV/AIDS communication by age, South Africa, 2005 and 2008

Age	2005(%)	2008(%)
Youth (15-24 years)	86.3	90.2
Adults (25-49 years)	77.8	83.6
Adults (≥50 years)	47.2	62.2
Total	74.0	80.9

Reach of HIV/AIDS communication by programme and age, South Africa 2005 and 2008



Conclusions: successes

- Reduction in HIV prevalence among children
- Reduction in the new infections among teenagers aged 15 to 19 years
- Slight reduction of HIV in the youth
- Increased awareness of HIV sero-status
- Substantial increase of condom use among youth and all other age groups
- Increase in the population reached by communication programmes



Conclusions: successes

- Continued rising HIV prevalence among adults in KwaZulu-Natal and Eastern Cape
- HIV prevention knowledge has declined- Multiple sexual partners
- Khomanani campaign has a low reach compared to the other programmes



Recommendations

1. Need for targeted interventions programmes, particularly in KZN, Mpumalanga and Eastern Cape
2. Need for programmes to help people to have pregnancy without risking HIV
3. Implement anti-multiple and intergenerational sexual partnerships like community driven anti-smoking campaigns
4. Address high sexual partner turnover and intergenerational sex by changing community norms

Recommendations

6. Implement provider-initiated routine HIV testing in all health care facilities
7. Increase communication programme reach
8. Define country specific indicators including MARPs

