

HIV/AIDS IN SOUTHERN AFRICA

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Is Universal Access for HIV a Realistic Goal?

- Yes. Universal access to HIV prevention, treatment, care and support is not only realistic, it must be achieved.
- Yes, we must do it now.
 - ▣ The benefits –
 - in lives saved,
 - HIV infections and other illnesses prevented,
 - families and societies supported,
 - children schooled,
 - economies restored, and
 - futures safeguardedare worth every dollar and every hour of effort invested.
- And yes, we have a lot of work ahead of us to make universal access to HIV prevention, treatment, care and support a reality for all.



Is this massive undertaking worth the expense and the effort?

"YES."

- reducing child mortality (MDG 4),
- improving maternal health (MDG 5), and
- combating HIV and AIDS, malaria and other diseases (MDG 6)

Stronger Together!

2010 !!



STRONGER TOGETHER

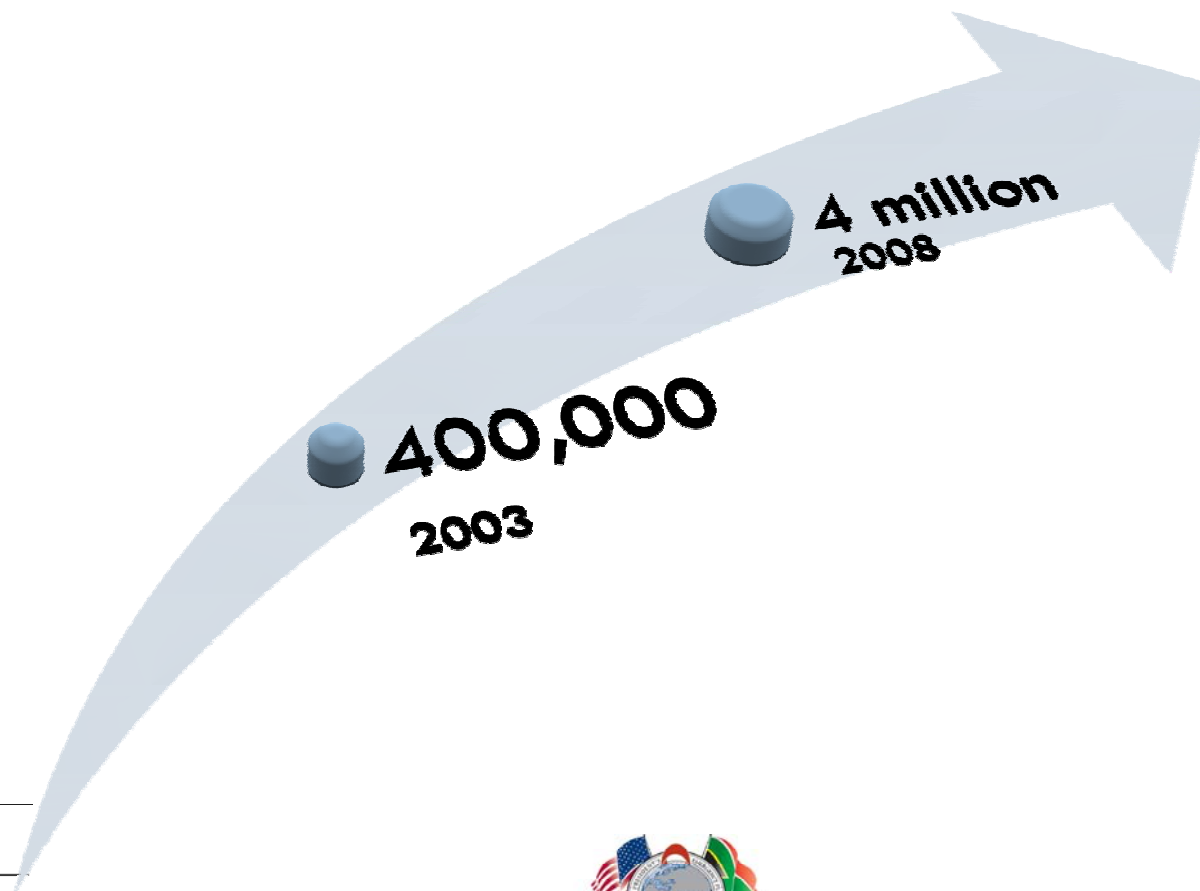


IAS's *Universal Access Now* campaign :

- Donors fully fund the Global Fund
- G8 nations, increase funding and political support for universal access
- G20 nations increase their commitments to the universal access effort
- African nations keep the promise of the 2001 Abuja Declaration commitment
- All nations increase national funding and political support for universal access



ART in low- & middle class countries




HIV Prevention



- Percentage of 15-49 yr reporting having taken a test has doubled in the recent years.
- scale up access to highly-effective prevention interventions
 - Circumcision
 - Harm reduction for people who use injection drugs,
 - Vaccine
 - Behavioural change



Universal access would:



Significantly reduce the impact of other serious diseases, such as tuberculosis

THE WORLD'S SEVENTH LARGEST KILLER!

“We cannot fight AIDS unless we do much more to fight TB.” – *Nelson Mandela*



Strengthen maternal and child health





Strengthen health systems

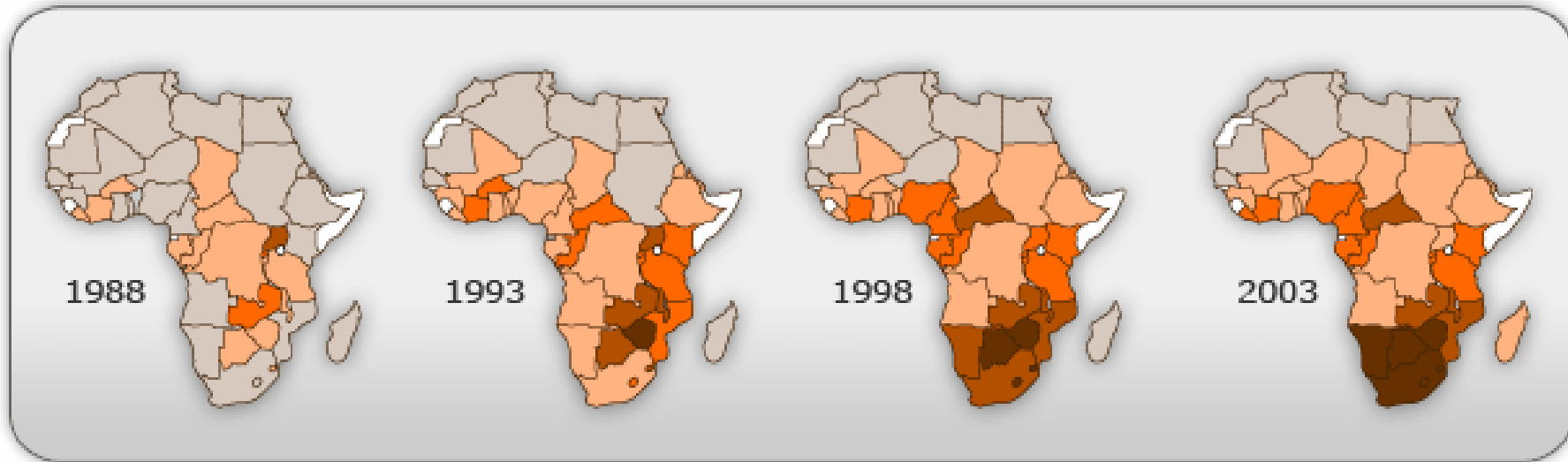




Foster economic growth and security



Sub-Saharan Africa



- 20%-30%
- 10%-20%
- 5%-10%
- 1%-5%
- 0%-1%
- data unavailable

Sub-Saharan Africa

- Sub-Saharan Africa is more heavily affected by HIV and AIDS than any other region of the world.
 - ▣ 22.4 million people are living with HIV ($\frac{2}{3}$ of global total)
 - ▣ 1.4 million people died from AIDS
 - ▣ 1.9 million people became infected with HIV
 - ▣ 14 million children have lost one or both parents to HIV/AIDS

Sub-Saharan Africa faces a triple challenge:

- Providing health care, antiretroviral treatment, and support to a growing population of people with HIV-related illnesses.
- Reducing the annual toll of new HIV infections by enabling individuals to protect themselves and others.
- Coping with the impact of over 20 million AIDS deaths, on orphans and other survivors, communities, and national development.

Prevalence rate

15-20% of adults

- South Africa
- Zambia
- Zimbabwe

exceeding 20%

- Botswana – (23.9%)
- Lesotho – (23.2%)
- Swaziland – (26.1%)

Statistics: Global vs Southern Africa

Indicator	Date Range	Data Type	Data				
			Global	Botswana	Lesotho	SA	Swaziland
PLWHA	2007-'08	#	33,4M (^{'08})	300,000 (^{'07})	270,000 (^{'07})	5,7M (^{'07})	190,000 (^{'07})
ALWHA	2007-'08	#	31,3M	280,000	260,000	5,4M	170,000
Prevalence Rate	2007-'08	%	0,8	23,9	23,2	18,1	26,1
WLWHA	2007-'08	%	50	61	58	59	59
CLWHA	2007-'08	#	2,1M	15,000	12,000	280,000	15,000
AIDS Deaths	2007-'08	#	2M	11,000	18,000	350,000	10,000
AIDS Orphans	2007-'08	#	17,5M	95,000	110,000	1,4M	56,000
ARV Need	2007-'08	#	9,5M	120,000	85,000	1,7M	59,000
ARV Coverage	2007-'08	%	42	79	26	28	42
TB Deaths	2008	#	1,3M	730	550	19,349	360

South Africa



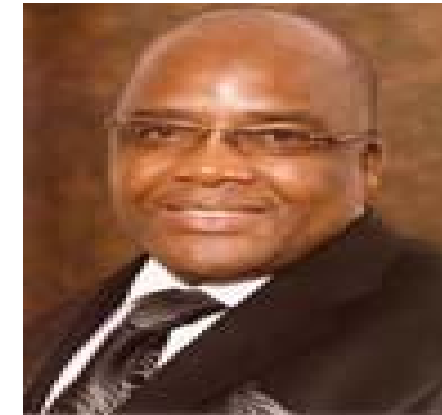


Target 6.A: Have halted by 2015 and begun to reverse the spread of HIV/AIDS

- HIV prevalence among population aged 15-24 years
- Condom use at last high-risk sex
- Proportion of population aged 15-24 years with comprehensive correct knowledge of HIV/AIDS
- Ratio of school attendance of orphans to school attendance of non-orphans aged 10-14 years

Target 6.B: Achieve, by 2010, universal access to treatment for HIV/AIDS for all those who need it

- Proportion of population with advanced HIV infection with access to antiretroviral drugs





- the country's national HIV coordinating body.
- the foremost authority providing leadership and advice on South Africa's response to HIV, AIDS, TB & STIs
- With a membership across
 - ▣ government,
 - ▣ civil society and
 - ▣ the private sector.



- launched in April 2010
- to scale up awareness of HIV
 - ▣ to bring about general discussion of HIV throughout the country
 - ▣ publicising the availability of free testing and counselling in health clinics
 - ▣ expel the myths and stigma of HIV
- aims to cover 50 percent of the population
- Aims to test 15M people by June 2011

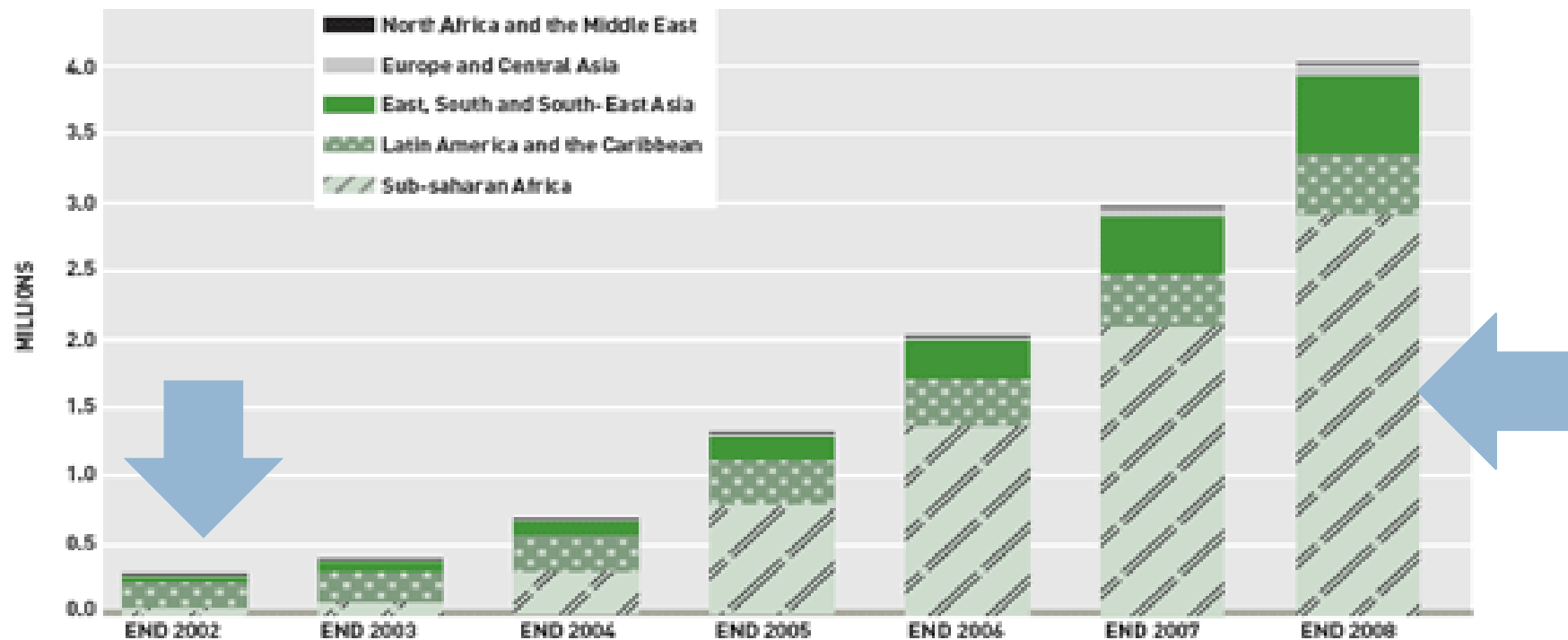
"I am Responsible, We are Responsible, South Africa is taking Responsibility"



Antiretroviral treatment in South Africa

- South Africa has the largest antiretroviral treatment programme in the world
- 200cells/mm³ **VS** 350 cells/mm³
- Cost?

**NUMBER OF PEOPLE RECEIVING ANTIRETROVIRAL THERAPY IN LOW- AND MIDDLE-INCOME COUNTRIES.
BY REGION. 2002-2008**



Source: WHO/UNAIDS/UNICEF.

Towards Universal Access: Scaling up Priority HIV interventions in the Health Sector. Progress Report 2009.

Key factors !



□ **Sustaining treatment programmes**

□ **Task-shifting**

□ **Doctors** → **Nurses** **initiation of ART**

□ **Nurses** → **Lay Counsellors** **HIV testing**

□ **Social Workers** → **Lay Counsellors** **provide support for orphans**

□ **Pharmacists** → **Pharmacy assistants** **prescribe ART**

Impact in Southern Africa

- **The impact on the health sector**
- **The impact on households**
- **The impact on children**
- **The impact on the education sector**
 - "Without education, AIDS will continue its rampant spread. With AIDS out of control, education will be out of reach." Peter Piot, Director of UNAIDS
- **The impact on enterprises and workplaces**
- **The impact on life expectancy**
- **The economic impact**



What needs to be done to make a difference?

- International support
- Domestic commitment
- Reducing stigma and discrimination
- Helping women and girls
- Gender violence, inequality and HIV in South Africa



The way forward

- Prevention
 - HCT
 - PMTCT
 - Circumcision
 - Behavioural change
 - Microbicides
 - Vaccine
- Treatment
- Communication !!!



THANK YOU!

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