

## 8 THE STATE OF THE HIV EPIDEMIC IN SOUTH AFRICA

### a Results of the Fifth South African National HIV Prevalence, Incidence, Behaviour and Communication Survey (SABSSM V) 2017

The most recent HIV prevalence and incidence data from the Fifth South African National HIV Prevalence, Incidence, Behaviour and Communication Survey (SABSSM V), conducted by the Human Sciences Research Council, was released on 17 July 2018. SABSSM V is the fifth survey in the series of household surveys conducted every 3-5 years since 2002, and provides information on national and sub-national progress toward HIV epidemic control in the country. The survey was a population-based, cross-sectional survey of households in South Africa, designed to assess the prevalence, incidence and trends of key HIV-related indicators. SABSSM V was conducted between January and December 2017.

Of 11 743 valid households, 82.2% completed a household interview. Of 13 669 eligible women, aged 15 to 64 years, 94.3% were interviewed and 67.7% provided a blood specimen for HIV-1 and additional testing. Of 10 801 eligible men, aged 15 to 64 years, 89.5% were interviewed and 58.4% provided blood specimen for testing. Of 11 845 eligible children aged 0 to 14 years, 56.0% were tested for HIV.

South Africa has a high-prevalence, heterosexually-driven, generalized HIV epidemic. Results from the survey have shown that approximately 7.9 million people of all ages were living with HIV (PLHIV) in South Africa in 2017. HIV prevalence among adults aged 15 to 49 years in South Africa was 20.6%; 26.3% among females and 14.8% among males. HIV prevalence among Black Africans was 16.6%; followed by Coloureds (5.3%); Whites (1.1%); and Indian/Asian (0.8%). The difference in HIV prevalence by sex is most pronounced among young adults: HIV prevalence among 20 to 24 year-olds is

three times higher among females (15.6%) than males (4.8%). Among adults aged 15 to 49 years, HIV prevalence varies geographically across South Africa, ranging from 12.6% in Western Cape Province to 27.0% in KwaZulu-Natal Province.

Annual incidence of HIV infection among adults aged 15 to 49 years in South Africa was 0.79%: 0.93% among females and 0.69% among males. This corresponded to approximately 199 700 people newly infected with HIV aged 15 to 49 years in 2017. There was an overall decline in incidence (44%) in the 15-49 age group when compared to the 2012 results. The decline was greater in females (56% decline) compared to males (18% decline). The incidence in females aged 15-24 was 1.51% and declined by 26% from 2.04% in 2012 whilst in males the decline was 17% from 1.2% to 1.0%. Nevertheless, this age group accounts for 38% of all new annual infections with 66 000 new infections in females and 22 000 infections in males.

The estimated number of people on antiretroviral therapy (ART) was 4 401 872, or 62.3 % of people living with HIV. The viral suppression rate was 87.3% of those who were on treatment; however viral suppression was lower in males (82.4%). The overall viral suppression of PLHIV was 62.3%. The UNAIDS 90-90-90 targets were 84.9% of PLHIV knew their HIV status, 70.6% of those who knew their status are on ARV treatment and of those on treatment 87.5% were virally suppressed.

**Source:** Centre for HIV and STIs, NICD-NHLS; [adrianp@nicd.ac.za](mailto:adrianp@nicd.ac.za)

## 9 VIRAL HEPATITIS C FOR KEY POPULATIONS IN SOUTH AFRICA

### a Results of the HCV survey

TB HIV Care, the University of Cape Town, Anova Health Institute, OUT Well-being and the National Institute for Communicable Diseases, funded by the Bristol-Myers Squibb Foundation, conducted a cross-sectional hepatitis study among key populations in seven cities. Overall, 3 443 men who have sex with men (MSM), sex workers (SWs) and people who use drugs (PWUD), including people who inject drugs (PWID), were recruited. The study estimated hepatitis B virus (HBV), hepatitis C virus (HCV) and HIV prevalence. Socio-demographic data were collected and point-of-care testing performed for HBV, HCV and HIV. HCV confirmation and genotyping occurred centrally.

Participants were predominantly male (52%) and black (61%). SWs were largely female (96%) with few female PWID and PWUD (13% and 19% respec-

tively). Most PWID (67%) and PWUD (53%) were homeless. HIV, HBV and HCV prevalence were 37%, 4% and 13% respectively. HIV prevalence was highest amongst SWs and MSM (47% and 43%, respectively), lowest in PWUD (13%). HBV prevalence was similar across groups. Almost half (45%) PWID had HCV infection (Durban 29%, Cape Town 33% and Pretoria 73%) (Figure 11). HCV genotypes 1a (67%) and 3a (14%) predominated. Overall, 2 646 people received one HBV vaccination.

Few participants (<1%) accessed treatment referrals. Qualitative interviews found that, despite 95% of interviewees intending to seek treatment, only 25% did. Reasons included previous stigmatisation, low sense of self-worth, and insufficient HCV understanding.