



## HIV INFORMATION

### HIV Stats

#### Current HIV/AIDS Statistical Information

By the end of 2007, an estimated 33,000,000 people globally were living with HIV. Over 17% of that number, roughly 5.7 million people, are South Africans infected with HIV. South Africa is home to the largest number of individuals living with the virus in a single country.

#### National HIV and AIDS Estimates, 2007

<b>Adult (15-49) HIV prevalence rate</b>	18.1% (range: 15.4%-20.9%)
<b>Adults (15+) living with HIV</b>	5,400,000 (range: 4,700,000 – 5,200,000)
<b>Adults and children (0-49) living with HIV</b>	5,700,000 (range: 4,900,000 – 6,600,000)
<b>Women (15+) living with HIV</b>	3,200,000 (range: 2,800,000 – 3,700,000)
<b>AIDS Deaths in 2003</b> (adults & children)	350,000 (range: 270,000 – 420,000)

Source: Joint United Nations Programme on HIV/AIDS 2008 Report on the Global AIDS Epidemic

In 2007, an estimated 350,000 South Africans lost their lives to AIDS. That is a death toll of nearly 1,000 people per day – almost double the figure given by the same UNAIDS study conducted in 2001.



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The South African Department of Health Study (2007):

Based on its sample of more than 33,400 women attending antenatal clinics across all nine provinces, the South African Department of Health Study estimates that 28.0% of pregnant women were living with HIV in 2007. The provinces which recorded the highest HIV rates were KwaZulu-Natal, Free State and Mpumalanga.

While the number of teenage girls infected with HIV has dropped steadily and significantly in recent years, most recently estimated at 12.9% in 2007, HIV prevalence among older women has continued to rise to nearly one in three women (32.7%) between 25-29 years of age as measured in the *2008 South African National HIV Prevalence, Incidence, Behaviour and Communication Survey*.

### Estimated HIV prevalence among antenatal clinic attendees, by Province

Province	2001 prevalence %	2003 prevalence %	2005 prevalence %	2007 prevalence %
KwaZulu-Natal	33.5	37.5	39.1	37.4
Gauteng	29.8	29.6	32.4	30.3
Mpumalanga	29.2	32.6	34.8	32.0
Free State	30.1	30.1	30.3	33.5
Eastern Cape	21.7	27.1	29.5	26.0
North West	25.2	29.9	31.8	29.0
Limpopo	14.5	17.5	21.5	18.5
Northern Cape	15.9	16.7	18.5	16.1
Western Cape	8.6	13.1	15.7	12.6
National	24.8	27.9	30.2	28.0



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### Estimated HIV prevalence among antenatal clinic attendees, by age

Age group (years)	2001 prevalence %	2003 prevalence %	2005 prevalence %	2007 prevalence %
>20	15.4	15.8	15.9	12.9
20-24	28.4	30.3	30.6	28.1
25-29	31.4	35.4	39.5	37.9
30-34	25.6	30.9	36.4	40.2
35-39	19.3	23.4	28.0	33.2
40+	9.8	15.8	19.8	21.5

Source: <http://www.avert.org/safricastats.htm>

### A Resulting Crisis

With the prevalence of HIV among pregnant women in South Africa remaining high, a logical next step is to turn thoughts to their children, with the risk of mother to child HIV transmission and the potential for the children to be orphaned if the mothers are not receiving ARVs & medical treatment.

At the end of 2007, UNAIDS estimated the number of South African children having lost one or both parents to AIDS to be 1, 400,000<sup>†</sup> and climbing – the highest population of any country in the world. This number grows by over 400 children every single day. The result of these statistics is a population of children left to care for themselves or to be absorbed by communities already overburdened with caring for those living with HIV/AIDS. Traditionally, children across Africa who have lost their parents have been raised by others in their extended families and communities. The accelerated rate at which orphans are being left in the wake of the AIDS epidemic, however, has moved beyond what local communities and government support have been able to cope with, and has created two unnatural family systems in South Africa: child-headed households, and skipped generation households. In 2007, it was estimated that 148,000<sup>§</sup> children were living in homes where all family members were under 17 years of age, with the eldest child often sacrificing their own education and future in an effort to

<sup>†</sup> Source: Joint United Nations Programme on HIV/AIDS 2008 Report on the Global AIDS Epidemic

<sup>§</sup> Source: [http://www.ci.org.za/CHILDRENCOUNT/IMAGES/CONTENT/pdf/childhead\\_2007.pdf](http://www.ci.org.za/CHILDRENCOUNT/IMAGES/CONTENT/pdf/childhead_2007.pdf)



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provide for the younger children in their care.

Though “skipped generation” households have existed in South Africa for decades due to migrant labour, many families in which grandparents are caring for their grandchildren without parents present are now left without dependable income due to the death of the children’s parents, who previously supported many of these family systems from afar. The issue of “skipped generation” homes also raises the question of what sort of family structure will come to replace it with so many of the coming generation of “grandmothers” having lost their lives to AIDS in their 20s, 30s, and 40s.

Though the statistics regarding HIV/AIDS in South Africa are staggering and sobering, and in many areas remain dire, the government of South Africa has set ambitious goals for the country to halve the number of new HIV infections by 2011 and aim to ensure that at least 80% of those in need of ARV treatment receive access to medication by 2011 as well.\*\*

\*\* Source: <http://www.saf aids.net/?q=node/949>

