SOUTH AFRICA

STRATEGIC FOCUS

The U.S. Centers for Disease Control and Prevention (CDC) South Africa began its collaboration with South African non-governmental and community-based organizations in 1989 to address the country's growing HIV epidemic. In 1994, CDC South Africa strengthened its support and began working with the government of South Africa to develop national HIV clinical, ethical, and research guidelines along with HIV and Tuberculosis (TB) service delivery programs. With the U.S. President's Emergency Plan for AIDS Relief (PEPFAR) launch in 2003, this support rapidly expanded, and today strategically focuses on:

- HIV prevention,
- Integration of HIV and TB in clinical services,
- Health workforce capacity, placement, and retention,
- Health information systems, surveillance, and response systems that monitor HIV, TB, and other diseases of national significance, and
- Creation of a policy and legal framework for the National Public Health Institute (NPHI).

KEY ACTIVITIES AND ACCOMPLISHMENTS

Data-Driven Policy for Improved Impact: CDC South Africa supports the collection of HIV data through national population-based surveys, and routine program monitoring systems. Routine data analysis from multiple sources are conducted for program improvement and decision-making. A recently launched, multi-disciplinary quality improvement team analyzes data and addresses program gaps.

Voluntary Medical Male Circumcision (VMMC): Per program data in Fiscal Year (FY) 2018, CDC South Africa supported VMMC 284,202, representing well over half of all male circumcisions performed in South Africa during the same period.

HIV Case Finding: In FY 2018, program data indicates 3.6 million HIV tests were administered through CDC support. This was 99% achievement against the annual targets, and the positivity rate was 7%.

Key Populations (KP): CDC South Africa supported prevention activities, reaching 88,240 people classified as KPs in FY 2018.

DREAMS: Determined Resilient Empowered AIDS-Free Mentored Safe (DREAMS) uses multiple evidence-based interventions, including post-violence care and parenting/caregiver programs, and by facilitating access to existing resources such as education subsidies to address factors that increase girls' HIV risk.

TB/HIV: In the districts supported by CDC South Africa implementing partners in FY 2018, 92% of TB patients were tested for HIV, of whom 64% were HIV co-infected. Of these, 88% received antiretroviral treatment (ART). In addition to TB treatment, CDC has been supporting the scale-up of TB preventive treatment in South Africa, and the number of PLHIV receiving TPT increased from 84,327 in FY 2017 to 126,119 in FY 2018 (2018 PEPFAR Program data).

Adult and pediatric treatment: The Human Sciences Research Council 2017 HIV Impact Assessment Summary Report estimated that 85% of people living with HIV in South Africa knew their status, of whom 71% were receiving ART. Of those on treatment, 88% achieved viral load suppression. The National Department of Health and PEPFAR South Africa developed a Treatment and Retention Acceleration Plan, aiming to put an additional two million people on ART by December 2020.

Community Health Workers/Workforce Capacity: CDC South Africa and its partners focus on improved clinic-community engagement, including hiring more Community Health Workers (CHW) and their supervisors, as well as Outreach Team Leads (OTL) to focus on key HIV and TB outcomes, including HIV testing, linkage to treatment, retention, and adherence.

Human Resources for Health: CDC South Africa is supporting additional health workers in communities and facilities to increase the number of HIV positive persons on ART.

Prevention of Mother-to-Child Transmission: CDC supported implementing partners, collaborating with the United Nations International Children's Emergency Fund (UNICEF) and the National Department of Health, achieved 98% coverage of HIV testing and 96% treatment initiation for HIV-positive pregnant women in FY 2017 (PEPFAR program data). Mother-to-child transmission of HIV in South Africa recently decreased to 1% at birth.

Laboratory: The CDC South Africa supports national programs aimed at increasing laboratory diagnostic capacity and quality to facilitate improved public health laboratory services.

Key Country Leadership
President:
Cyril Ramaphosa

Minister of Health:
Zweli Mkhize

U.S. Chargé d' Affaires:
Jessye Lapenn

CDC/DGHT Director:
Amy Herman-Roloff

Country Quick Facts
(worldbank.org/en/where-we-work)

Per Capita GNI:
$5,720 (2018)

Population (million):
57.78 (2018)

Under 5 Mortality:
37/1,000 live births (2017)

Life Expectancy:
63 years (2017)

Global HIV/AIDS Epidemic
(aidsinfo.unaids.org)

Estimated HIV Prevalence (Ages 15-49): 20.4% (2018)

Estimated AIDS Deaths (Age ≥15): 67,000 (2018)

Estimated Orphans Due to AIDS: 1,200,000 (2018)

Reported Number Receiving Antiretroviral Therapy (ART) (Age ≥15): 4,625,410 (2018)

Global Tuberculosis (TB) Epidemic
(who.int/tb/country/data/profiles/en)

Estimated TB Incidence:
567/100,000 population (2017)

TB patients with known HIV status who are HIV positive:
60% (2017)

TB Treatment Success Rate:
82% (2016)

TB Mortality:
39/100,000 population (2017)

DGHT Country Staff: 113.1
Locally Employed Staff: 80.6
Direct Hires: 19.5
Fellows & Contactors: 13

Our success is built on the backbone of science and strong partnerships.