

HIV and AIDS

We demystify behavioural and social aspects of living with HIV and AIDS



Working to change the status of the HIV/AIDS epidemic lies in our hands as a nation. We undertake research to inform HIV/AIDS, prevention, care and impact mitigation.

HIV AND AIDS AND HEALTH SYSTEMS

The HSRC is home to a multitude of large, policy-relevant research projects on the behavioural and social aspects of the HIV epidemic, from studies that will help prevent mother-to-child transmission to investigating programmes that may contribute to prevention of infections in the young and in vulnerable groups such as orphans, gays and men who have sex with men (MSM). It also focuses on public health systems and how that can be improved.

Our initiatives have resulted in

- Findings that prevention remains the key strategy for curbing the HIV epidemic in the country;
- Sharing and transferring lessons learnt in implementing the SADC/EU Regional Multi-Sectoral Projects on HIV and AIDS;
- Applying monitoring and evaluation (M&E) to assess the outcome and impact of national HIV and AIDS policies and programmes;
- Co-ordinating the research sector of the South African National AIDS Council (SANAC);
- Looking into evidence from Botswana, South Africa, Swaziland and Zimbabwe on new infections in children aged 2 to 14 years who are not yet sexually active;
- A consistent finding that HIV and AIDS in the household affects enrolment, attendance, continuation and achievement in schooling;
- Organising a colloquium on getting HIV and AIDS research/evidence into policy and practice on the African continent;
- Kick-starting broad stakeholder involvement in the debate about National Health Insurance; and
- Improving the capacity of researchers to analyse the effects of social, economic, health care and policy changes on individuals aged 50+ years.

National household surveys

Population-based HIV/AIDS surveys, employing the second-generation surveillance approach at national, provincial, and local community levels, provide unique information for informing policy and programmes in response to the HIV/AIDS epidemic in South Africa and neighbouring SADC countries. The national HIV/AIDS household survey, now in its third cycle, serves as a primary data source for monitoring and evaluation (M&E) of the implementation of the 2007-2011 National Strategic Plan (NSP) for HIV and AIDS and STIs. The study found that a successful response to the epidemic will depend largely on changing the social norms, attitudes and behaviours that contribute to the spread of HIV in South Africa. To be effective, the extent of these behavioural and societal changes has to be very substantial and widespread. As HIV continues to spread, and neither a vaccine nor cure exists, prevention remains the key strategy for curbing the epidemic in the country. Prevention works. Evidence from Uganda, Kenya and Zimbabwe demonstrate that behaviour change is the main factor for the observed decline in HIV infection levels in these countries.

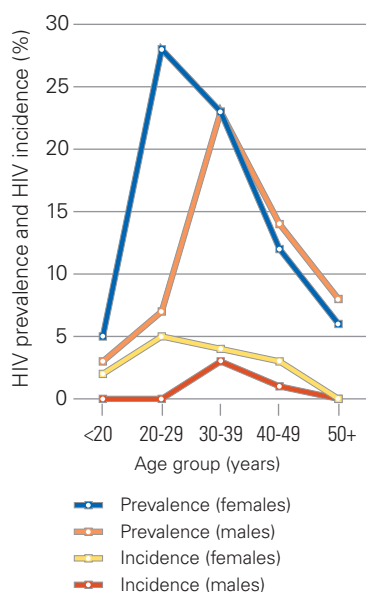


Figure 8. HIV prevalence and HIV incidence by age and sex, South Africa, 2005

HIV surveys in SADC

A consortium of organisations, led by the Social Aspects of HIV/AIDS Research Alliance (SAHARA) network, is conducting a two-year project to do national HIV prevalence and behavioural risk household surveys in Botswana, Lesotho, Mozambique and Swaziland. In relation to this project a workshop was held on sharing and transferring lessons learnt in implementing the SADC/EU Regional Multi-Sectoral Projects on HIV and AIDS.

National M&E programme impact assessment

The NSP recognises monitoring and evaluation (M&E) as an important policy and management tool. Various government departments, including the departments of Health, Social Development and Education (national and provincial levels), the Presidency, and SANAC, have requested the HSRC to assist in the outcome and impact assessment of national HIV and AIDS policies and programmes. In an assessment study of these programmes, commissioned by the DST, the analyses provided data on the progress towards attaining Millennium Development Goal (MDG) indicators in South Africa. It also presented conceptual frameworks and novel methodological approaches that are critical for assessing the impact of the NSP. National HIV incidence measures based on the new methodology presented in the report will provide information on the key MDG indicator, 'reduction of new HIV infections'. The reported estimates will serve as benchmark figures for future impact assessments. Also, work on a comprehensive M&E framework for national HIV and AIDS prevention and care programmes has been acknowledged by the South African government and HSRC researchers are actively providing technical guidance in the SANAC steering committees.

Research support for SANAC

The HSRC has received a US\$900 000 grant from the Bill & Melinda Gates Foundation to co-ordinate the research sector of SANAC in South Africa. The research sector comprises individuals from different organisations, including research institutes, universities and NGOs, committed to co-ordinating the work that supports the NSP. The grant will be used to organise meetings to develop sector and provincial evidence-based implementation plans and models to achieve a 50% reduction in new HIV infections; support the work of the research sector and its sub-committees; develop the capacity of scientists and counsellors in behavioural interventions who focus on target populations such as people living with HIV/AIDS, men who have sex with men, and HIV-negative people who frequent high-risk places; and provide support for technical staffing needs for the deputy chair of SANAC, including conducting secondary analysis of population-based data and other available information to answer specific research questions.

HIV infection in children

A new project on HIV infection in children is looking into evidence from Botswana, South Africa, Swaziland and Zimbabwe on new infections. It suggests a growing number of HIV infections among children aged 2 to 14 years who are not yet sexually active.

Joint learning to benefit families

The Joint Learning Initiative on Children and HIV/AIDS (JLICA) is a global effort to bring together the best available evidence to address the multi-sectoral challenges arising from the combined stresses of poverty and the AIDS epidemic on children, families, communities and social institutions. Learning Group 1: Strengthening Families, led by Professor Linda Richter, forms part of the larger study and has commissioned 12 expert papers and systematic reviews. In general, there is little scientific research on large-scale programming and the quality of evidence also does not yet support this. One consistent finding is that HIV and AIDS in the household affects enrolment, attendance, continuation and achievement in schooling. Programmes to support schooling, in the form of free education, income transfers to families to offset opportunity costs of school attendance, school meals, after-school programmes, and school health services, are all entry points to maintain education of children affected by HIV and AIDS. The findings from the JLICA will be released in late 2008 and will be presented to the Global Partners Forum. This will form the basis for key recommendations by the Inter-Agency Task Team on Children Affected by HIV/AIDS, as well as by other advocacy groups.

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Dr Olive Shisana, CEO of the HSRC, talks to some of the participants at the 4th SAHARA conference held in Kisumu, Kenya in 2007



Delegates at the SAHARA AIDS conference in Kisumu, Kenya.

Policy as practice

A colloquium on getting HIV and AIDS research/evidence into policy and practice on the African continent was organised and hosted in conjunction with the University of Limpopo. The colloquium, which was attended by 50 delegates, was opened by Minister of Social Development, Zola Skweyiya; and the key-note speaker was the United Nations

Educational, Scientific and Cultural Organisation (UNESCO)'s Assistant Director-General for Social and Human Sciences, Pierre Sane. Various case studies were examined and good practice in getting evidence into policy and practice highlighted. An outcome of the colloquium was a request by UNESCO to pilot test the Management of Social Transformations (MOST) Online Policy Research Tool.

National Health Insurance

In response to calls for more stakeholder involvement in the debate about National Health Insurance, a colloquium was held in July 2007, which was attended by a broad range of stakeholders including the Ministry of Health. The deliberations clearly demonstrated the need to expand work around this theme by looking at broader health issues on strengthening the public health system (human resources, financing, district health systems, and defining a basic package of services for South Africa). The colloquium report resulted in some stakeholders preparing implementation plans and budgets for tabling before government to illustrate the benefits, practicality and affordability of introducing a National Health Insurance (NHI) system.

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Global ageing and adult health

A large longitudinal study on global ageing and adult health (SAGE), which forms part of a World Health Organization (WHO) multi-country survey, is being conducted in South Africa. Other countries participating in the WHO study are Bangladesh, China, Indonesia, India, Ghana, Kenya, Mexico, Russia, Tanzania and Vietnam. In South Africa, the study is co-funded by the national Department of Health. The goals of SAGE are to promote a better understanding of the effects of ageing and well-being of individuals aged 50+ years; and to improve the capacity of researchers to analyse the effects of social, economic, health care and policy changes on current and future health.

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