

**REMARKS BY THE MINISTER OF HEALTH AT THE LAUNCH OF
RESULTS OF THE FIFTH SOUTH AFRICAN NATIONAL HIV
PREVALENCE, INCIDENCE, BEHAVIOUR AND COMMUNICATION
SURVEY, 2017 (SABSSM V), 17 JULY 2018**

Prof Crain Soudien, CEO of the Human Sciences Research Council

Prof Helen Rees, Chairperson of the SAMSSM Review Panel

Prof Leickness Simbayi and the research team

UN Resident Coordinator, Ms Nadros Bekele-Thomas

Ms Steve Litsike, Deputy Chair of SANAC

Mr Steve Smith, US Health Attache

Ms Bronwyn Pearce, CEO of the Centre for Communication Impact

Ms Precious Matsoso, the Director-General of Health

Distinguished researchers and scientists

Members of the media

Good morning

I wish to thank the researchers from the HSRC for the work done to conduct the 5th South African National HIV Prevalence, Incidence, Behaviour and Communication Survey. As they reminded us, the first

survey was conducted in 2002, followed by surveys in 2005, 2008 and 2012. In today's presentation they therefore were able to track progress made since the 2012 survey.

It is indeed significant that the 2017 report is launched just a day before Madiba's 100th birthday given that it was our beloved President commissioned the first survey in 2002. Madiba was very concerned about the impact of the HIV epidemic on South Africans and it is in his honour that we launch these results today.

These results come at the right time, ahead of the International AIDS Society Conference to be held in Amsterdam next week. South Africa can therefore showcase our response to the HIV epidemic globally at this conference using the latest data.

In welcoming the 2017 SABSSM results allow me to reflect on key aspects of the presentation by the team.

It is indeed gratifying to know that some of our hard work since 2012 is beginning to pay off.

The researchers estimated number of new HIV infections in 2012 in people older than 2 years of age was 378 700 or 0.85%. Incidence in 2017 is reported to be 231 100. This group represents 38% of all new infections (88 400 of the 231 100) in 2017 and justifies our focus on this group when the President Ramaphosa launched the She Conquers Campaign in 2016!

South Africa adopted the UNAIDS 90-90-90 targets to be reached by December 2020. This study has helped to determine our progress towards these targets and to provide a 2017 benchmark against these targets. According to our researchers we are currently at 85-71-86. This means that we are very close to the first 90 – which is the percentage of those that are HIV positive who know their status. The second 90 refers to those that are on treatment. Although we have 4.4 million people on treatment, we still have some way to go to ensure that those that are HIV positive are on treatment, that is, we need to strengthen linkage to care. The third 90 refers to the percent of those that are on treatment and virally suppressed. Here we are very close to the target.

As reported by the researchers, we need to focus on getting more men and young people who are HIV positive on treatment. We therefore need to find creative ways of getting more men and young people

between the ages of 15 and 24 tested for HIV and initiating them on treatment (and of course ensuring that they are virally suppressed). The campaign to test and initiate 2 million people in HIV treatment announced by the President in his 2018 State of the Nation Address in February this year will indeed include a focus on men and young people. We will be launching this campaign within the next few months.

As the researchers reported the key reason for the declines in new HIV infections across all age ranges is that large numbers of people are on ARVs and are virally suppressed. Our plans are to increase the number of people on ARVs to over 6 million by the end of 2020. This is a tall order and the support of all our partners will be critical in achieving this.

Given the large number of people with HIV on ARVs and virally suppressed, it is not surprising that prevalence has increased between 2012 and 2017. Indeed, this is to be expected. This report makes clear that the increase in prevalence is not due to increasing incidence. There is therefore only one explanation – prevalence is increasing because people on ARVs are living longer. This is corroborated by data on life expectancy from STATSSA which estimated that life expectancy in 2008 was 56.1 years, rising to 61.1 years in 2012 and 64 years in 2017.

However, let's be clear. We must also ensure that our prevention campaign is strengthened to ensure that we are able to close the tap more rapidly. This means that people who are sexually active must use condoms consistently – as the 2017 data suggests young people especially are having sex at a younger age but not using condoms consistently. We need to work harder to ensure that young people delay sexual debut but if they are having sex they must use condoms consistently. In this regard an issue of concern is the perception of risk of acquiring HIV. It is clear from the study that a large percentage of respondents did not consider themselves to be at risk. We need to think about how to change this because unless people do think about the risks they will continue to participate in risk sexual behaviour.

We know that medical male circumcision is protective. It is gratifying to see that the number of medical circumcisions is rising. We need to increase the rate of circumcisions especially among those between 15 and 35 years of age. With our partners we will increase our focus on this age cohort.

We know that multiple concurrent partnerships increases the risk of HIV acquisition. It is gratifying to see that the proportion of men who reported multiple sexual partners has declined. However, the proportion of

women who reported multiple partners has increased! We need to investigate this data further to better understand this data.

Information about HIV appears to have increased, even if marginally. In addition, the report suggests that stigma is on the decrease. However, it is clear that we need to focus on providing more information on HIV and how it is transmitted as well as the importance of being on treatment as soon as one is diagnosed HIV positive.

This report provides us with much data. I am sure that the researchers together with implementing partners will spend many hours, days and months analysing the data. As government we will do everything possible to not only reach the 90-90-90 targets by December 2020 but also to reduce new HIV infections. However, as we often say, government alone cannot solve this challenge. We need increased involvement of people living with HIV and all sectors of community.

Deputy President Mabusa as the chair of SANAC working with Ms Steve Litsike will also review these results so that we can realign the work of the various sectors of SANAC to take our response to the HIV epidemic to a higher level.

In conclusion, I wish again to appreciate the efforts of the researchers in conducting this hugely complex research. In addition, I wish to publicly thank the respondents of the study – without them we will not have the data or know what is happening with this epidemic. I also wish to thank our development partners who helped to fund this study. These studies are hugely expensive and we cannot conduct them without support.

Thank you!