HIV/AIDS Profile: South Africa

Demographic Indicators

	with AIDS	without AIDS		with AIDS	without AIDS
Population (1000s)	43,421	44,468	Growth Rate (%)	.5 %	1.2 %
Crude Birth Rate	22	21	Crude Death Rate	15	7
Infant Mortality Rate			Life Expectancy		
Both Sexes	59	41	Both Sexes	51	66
Male	63	45	Male	50	62
Female	54	37	Female	52	69

Percent Urban	45		Total Fertility Rate	2.5	

Note: Above indicators are for 2000.

Estimated % of adults living with HIV/AIDS, end 1999 19.9 % Cumulative AIDS rate (per 1,000) as of 10/30/96 0.30 Cumulative AIDS cases as of 10/30/96 12,825

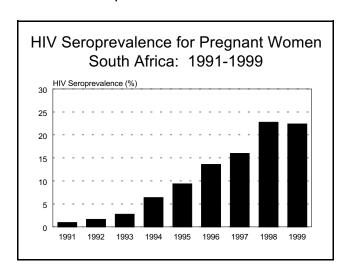
Sources: U.S. Census Bureau, UNAIDS, Population Reference Bureau, World Health Organization.

Epidemiological Data

Epidemic State: Generalized

The epidemic began in South Africa much later than it did in other countries in Africa. By the mid 1990s, infection rates among pregnant women were increasing tremendously. South Africa is now facing one of the most serious HIV epidemics in the world. Rural areas appear to be affected to the same extent as urban areas, particularly in KwaZulu/Natal Province, the hardest hit province.

• By the mid 1990s, the HIV epidemic had exploded among pregnant women in South Africa. Twenty-three percent of pregnant women were infected, according to the 1998 sentinel surveillance round conducted in all nine provinces of South Africa. In 1999, 22 percent of pregnant women tested were HIV positive.

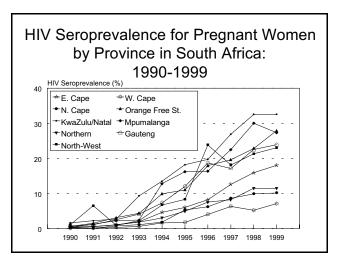


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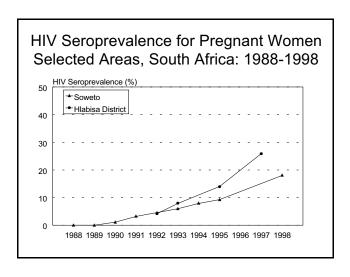
- Based upon sentinel surveillance data from all nine provinces, HIV seroprevalence levels have risen among all age groups of pregnant women during most of the 1990s. By 1998, 21 percent of those under 20 were infected, a very high level among pregnant women so young. By 1999, however, there was a decline to 17 percent among these women. Pregnant women in their 20s remain the most affected group.
- HIV Seroprevalence for Pregnant Women by Age in South Africa: 1991-1999

 HIV Seroprevalence (%)

 1991 | 1992 | 1993 | 1994 | 1995 | 1996 | 1997 | 1998 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 1999 | 199
- Annual sentinel surveillance surveys among pregnant women in all nine provinces of South Africa show a steady increase in HIV seroprevalence since 1990. KwaZulu/Natal Province has the highest infection levels; however, both 1998 and 1999 HIV prevalence were identical, 33 percent. In other provinces, HIV prevalence continued to increase.

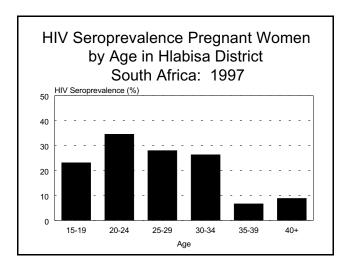


 Various studies done among pregnant women in selected areas of the country indicate a steadily worsening situation. In Hlabisa District, a rural area in KwaZulu/Natal Province, prevalence was 26 percent in 1997 and in Soweto, the 1998 prevalence was 18 percent.

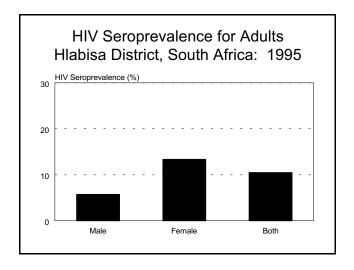


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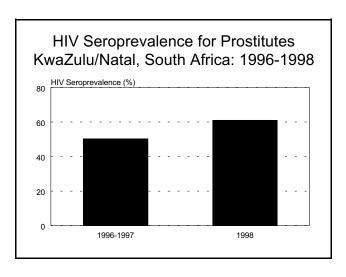
• In Hlabisa District, the highest infection rates were observed in pregnant women 20-24, 35 percent. Very high prevalence rates were also observed in those 15-19; 23 percent of these women were HIV positive.



• One study done in 1995 found high seropositivity among adults in Hlabisa District, 11 percent. Infection levels among women, at 13 percent, were more than double what was found among men, 6 percent.

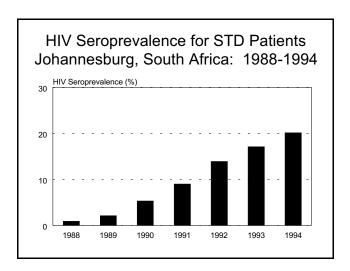


 HIV prevalence among prostitutes working mainly at truck stops increased between 1996-1997 and 1998 by 21 percent in KwaZulu/Natal Province.

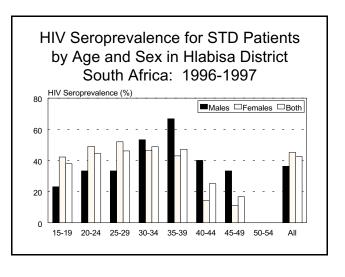


South Africa

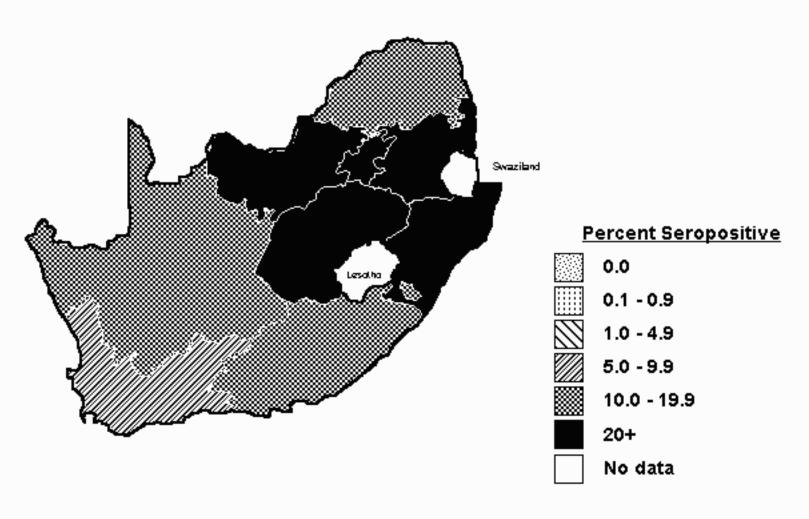
• Sentinel surveillance carried out in Johannesburg, documents the steady but marked increase in HIV prevalence among STD clinic patients over a 6-year period. Infection levels increased from 1 percent in 1988 to 20 percent in 1994.



• In Hlabisa District, HIV seroprevalence among STD clinic patients had reached alarmingly high levels by 1996-1997. Females had much higher rates than males up to age 30. Overall, 45 percent of female patients and 36 percent of male patients were infected in this rural area of South Africa.



Seroprevalence of HIV-1 for Pregnant Women South Africa: 1999



U.S. Census Bureau, Population Division, International Programs Center, Country Profile, September 2000.

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¹This source is not available in the June 2000 version of the HIV/AIDS Surveillance Data Base but will be included in future versions.