

2018

South Africa: HIV/AIDS

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Mendoza, Ninna Therese P. "South Africa: HIV/AIDS" (2018). *Global Public Health*.
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Quick Facts

Population: 54,841,552

Ethnic Breakdown: 80.2% (black African), 8.8% (colored), 8.4% (white), 2.5% (Indian/Asian)

Major Religions: Protestant or other forms of Christianity

Population Distribution:
65.8% Urban

Major Urban Centers:
Johannesburg, Cape Town, Durban, Pretoria

Fertility Rate: 2.2 children per woman (drastic decrease)

Average Life Expectancy: 63
(CIA, 2018)

Political Structure

South Africa is a parliamentary republic with executive, legislative, and judicial branches. The executive branch rules the country through various departments that focus on a specific issue, and the legislative branch discusses and decides laws. Lastly, the independent judicial branch, interprets and enforces laws according to the Constitution (Sahoboss, 2016). The national and provincial elections occur every five years. The national elections utilize a proportional representation voting system which means voters vote on a party to get a share of seats in Parliament directly proportional to the votes they receive. Provincial elections utilize a combination of proportional representation and a ward system (Electoral, 2018).

SOUTH AFRICA

The Largest HIV/AIDS Epidemic

Ninna Mendoza, Public Health Brief, PUBH-100



Image: Operation World, 2018

HIV/AIDS

The Human Immunodeficiency Virus (HIV) is a viral infection that can be contracted through bodily fluid exchange such as blood, semen, and breast milk. HIV weakens the immune system which makes individuals more likely to contract infections and diseases which the body is then unable to fight off. HIV advances to Acquired Immunodeficiency Syndrome (AIDS) when an individual exhibits serious clinical developments such as certain cancers. Tuberculosis is the most common cause of death for HIV patients (WHO, 2017). HIV/AIDS is a major public health issue in South Africa because it is the number 1 country in the world for the number of people living with HIV/AIDS and number 2 for HIV/AIDS deaths (CIA, 2018).

Risk Factors & Consequences

Certain factors can increase the risk of contracting HIV such as unprotected sex and sharing needles (WHO, 2017). Several key populations are at an increased risk for HIV. These populations include men who have sex with men (MSM), sex workers, drug users, women/adolescent girls, children, and orphans. Several of these groups experience social discrimination which becomes an obstacle for seeking out treatment (Avert, 2018). HIV-positive women are often viewed as promiscuous and face possible abuse and rejection from spouses and family. On the other hand, HIV-positive men worry about the stigma of the disease being viewed as a gay disease (Cloete et al., 2010).

Major Challenges

Illegal Drug Trade

The criminal and narcotics operations in South Africa has been growing. This country is a large hub for transshipments of illegal drugs such as heroin and cocaine. South Africa has also gained noticed as a major producer of synthetic drugs and marijuana. Additionally, it has the largest market in the world for methaqualone which is generally imported from India (CIA, 2018).

Border Disputes

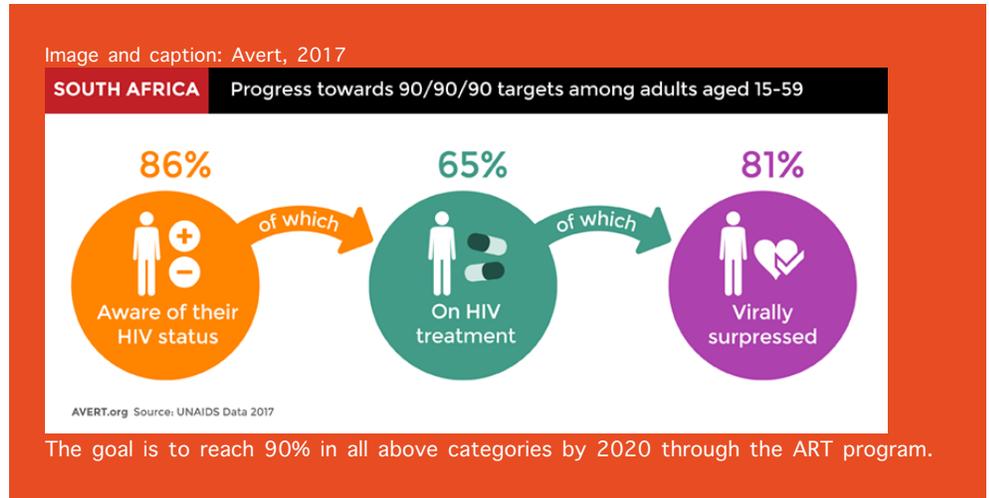
The borders of South Africa – specifically those of Lesotho, Mozambique, and Zimbabwe -- are risky areas plagued by illicit activities such as illegal migration, poaching, and smuggling. Additional military forces have therefore been sent to borders to assist police units in monitoring and controlling these activities (CIA, 2018).

Racial Tensions

The apartheid is a defining time of South African history where the white minority ruled. The effects of racial discrimination permeating that period are still being felt today. One example is the large gap in average incomes between whites and blacks (Grantcraft, 2015). This demonstrates the systemic inequalities that still plague people's everyday lives.

Identification & Treatment

HIV-infected individuals are most infectious during the first months after being infected, but oftentimes, they are unaware of their HIV status. Some people may never show symptoms and others may develop flu-like symptoms. Early diagnosis and treatment is essential to curb the development of the infection. Rapid diagnostic tests (RDTs) indicate whether HIV antibodies are present or missing. Unfortunately, no cure exists for HIV yet, but antiretroviral treatments (ART) have been developed which reduce transmission by 96% (WHO, 2017).



Intervention Options

It is key to understand social context when creating effective interventions. Individuals face long-term challenges of adhering to treatment which has led community-based support to move closer to HIV individuals. Moreover, a strongly negative stigma accompanies HIV which hinders people from seeking help (Masquillier, 2016). Therefore, easily-accessible multi-resource sites near communities with a high HIV prevalence could be created to promote providing not only sexual health check-ups and tests but health items such as condoms and feminine hygiene products so people do not feel they are being labeled as having HIV when they enter.

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