

## Human Sciences Research Council

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### Mpumalanga Province grapples with highest HIV prevalence rate in SA

#### For immediate release

**eMalahleni, Tuesday, 17 September 2024**

The Human Sciences Research Council (HSRC) released the key findings of the Sixth South African HIV Prevalence, Incidence, and Behaviour Survey (SABSSM VI) for Mpumalanga Province on Tuesday, 17 September 2024 at a provincial dialogue held at the Anew Hotel Witbank, eMalahleni.

The survey found that compared to other provinces, Mpumalanga Province had the highest HIV prevalence at 17.4% in 2022. This translates to an estimated 890,000 people living with HIV (PLHIV) in the province.

According to the overall principal investigator of the study, the HSRC's Professor Khangelani Zuma, the survey showed that, in 2022, HIV prevalence in the province was 7.8% among youth aged 15–24 years overall, and 1.5-fold higher among males (9.8%) than females (6.3%) in this age group.

Among adults aged 25–49 years, HIV prevalence was 26.4% overall, and 1.6-fold higher among females (31.9%) than males (19.9%). By locality, HIV prevalence was higher among those residing in rural formal/farms (21.1%) and rural informal areas (18.4%) and lower in urban areas (15.5%), but the difference was not significant.

“A concerning state is that HIV prevalence peaked at 40.8% among those aged 45–49 years in 2022 compared to 39.0% in 2017 among those aged 35–39 years, suggesting a possibility of continued new infections. There was a notable downward shift in the epidemic curve in 2022 among respondents aged 15–44 years,” Professor Zuma noted.

The data presented are for three priority districts in Mpumalanga Province, namely Ehlanzeni, Gert Sibande and Nkangala districts, where oversampling was undertaken to enhance the precision of the HIV prevalence estimates. In 2022, HIV prevalence among all ages was highest in Gert Sibande (20.5%) and Ehlanzeni (16.0%) and lowest in Nkangala (13.1%).

#### **Antiretroviral treatment (ART)**

Antiretroviral treatment (ART) coverage in Mpumalanga increased to 81.8% in 2022 from 65.4% in 2017. This translates to an estimated 630,000 people living with HIV in the province receiving ART in 2022.

In 2022, ART use among all people living with HIV in the province was 56.4% among adolescents and youth aged 15–24 years and 83.9% among those aged 25–49 years. Among females, ART coverage was substantially lower among those aged 15–24 years (58.6%) than those aged 25–49 years

(85.2%). ART coverage among males aged 25–49 years was 81.6%; while it was 54.8% for male youth aged 15–24 years. ART coverage was 79.8% in urban areas and 79.7% in rural informal/tribal areas. By district, ART use was lowest in Nkangala (77.9%) and Ehlanzeni (79.4%).

The SABSSM VI survey, conducted between 2022 and 2023, aimed to maintain surveillance of HIV infection and behaviours in South Africa, evaluate the progress of the South African national HIV and AIDS, STI and TB Strategic Plan, and monitor HIV indicators for national and international reporting.

The survey's key objectives included estimating HIV prevalence and incidence, viral load suppression, and exposure to HIV-related services among adults and children. It also assessed progress towards the 2030 UNAIDS 95-95-95 targets, HIV drug resistance, and the relationship between social and behavioural factors, intimate partner violence, and HIV infection.

### **UNAIDS 95–95–95 targets**

The data reveals that, in terms of progress towards the 95-95-95 UNAIDS targets, 87.3% of people living with HIV aged 15 years and older were aware of their HIV status, 94.5% of those diagnosed were on ART and 94.0% of those on ART were virally suppressed in Mpumalanga Province. Nationally, 89.6% of people living with HIV aged 15 years and older knew their HIV status, 90.7% of those who knew their HIV status were on ART, and 93.9% of those on ART were virally suppressed.

Adolescents and youth aged 15–24 years lagged significantly behind on the first 95 target (70.6%) and the second target (79.7%) than those aged 25–49 years (87.8%) and (95.6%), respectively. By district, progress towards 95-95-95 ranged from 84.3-92.5-92.6 in Nkangala to 94.2-92.8-93.5 in Gert Sibanda.

South Africa has adopted the UNAIDS 95–95–95 treatment targets in its National Strategic Plan 2023–2028, aiming to achieve the following goals: 95% of all people living with HIV knowing their HIV status (first 95); 95% of those who know their status being on ART (second 95); and 95% of those on ART achieving viral suppression (third 95).

### **Viral load suppression (VLS)**

The survey further revealed that, in 2022, among all provinces, Mpumalanga had the second highest proportion of people living with HIV with VLS (82.5%), having increased from 2017 (60.0%). VLS was 73.0% among adolescents and youth aged 15–24 years. VLS was 82.8% among PLHIV aged 25–49 years and was substantially lower among females (81.9%) than males (84.6%) in this age group. By district, VLS ranged from 79.8% in Nkangala to 85.6% in Gert Sibande.

### **Knowledge of HIV status**

Professor Zuma expressed concern that people living with HIV aged 25–49 years accounted for the majority of people living with HIV in Mpumalanga Province who were unaware of their HIV status (62.3%), aware but not on ART (63.5%), and on ART but not virally suppressed (63.4%). However, adolescents and youth aged 15–24 years contributed disproportionately to gaps in treatment, accounting for just 9.4% of all people living with HIV. In this age group, 16.9% knew their HIV status, 16.7% knew their HIV status but were not on ART, and 13.7% of those on ART were not VLS.

People residing in urban areas accounted for the majority of people living with HIV overall. People living with HIV in rural informal or tribal areas were also over-represented in each of the gaps along the clinical cascade. Whereas people living with HIV in rural informal or tribal areas accounted for

about 45% of all people living with HIV, they accounted for 34% of those who were not on ART.

By district, the survey also revealed variable contributions to the total number of people living with HIV and the gaps in 95-95-95 targets. Gert Sibande accounted for 49.2% of all people living with HIV but 43.3% of all people living with HIV who were not on ART. Ehlanzeni accounted for 37.1% of all people living with HIV, but 54.2% of all people living with HIV who did not know their status.

## **KEY DRIVERS OF THE HIV EPIDEMIC**

### **Sexual debut before the age of 15 years**

Regarding the key drivers of the HIV pandemic, Professor Zuma noted that Mpumalanga Province had the lowest prevalence of sexual debut among provinces. The proportion of adolescents and youth aged 15 years who reported having sex before the age of 15 years decreased from 13.3% in 2017 to 5.4% in 2022.

However, sexual debut before the age of 15 years among adolescents and youth aged 15–24 years in 2022 was higher among males (6.1%) than females (4.8%). Among districts, early sexual debut ranged from 7.3% in Gert Sibande to 9.2% in Nkangala.

### **Multiple sexual partners**

The survey revealed that in Mpumalanga Province, 5.1% of people aged 15 years and older reported having multiple sexual partners in 2022 compared to 7.9% in 2017. The proportion of people aged 15 years and older who reported having multiple sexual partners was almost 3-fold (7.4%) higher in males than among females (2.7%) and was higher among those aged 15–24 years (6.2%) compared to other age groups. The proportion of people who reported having multiple sexual partners was similar across all locality types. By district, the prevalence of multiple sexual partners was highest in Nkangala (6.2%) and lowest in Gert Sibande (5.0%).

### **Condom use with the most recent sexual partner**

Regarding condom use, the survey revealed that in Mpumalanga Province, 46.1% reported using a condom use with the most recent sexual partner in 2022 compared to 46.3% in 2017. Condom use with the most recent sexual partner among people aged 15 years and older was similar among females (45.2%) and males (47.1%) and lower among those aged 25–49 years (46.1%) compared to those aged 15–24 years (61.0%). Condom use was substantially lower among those residing in rural formal/farms (26.0%) compared to those living in urban areas (50.1%). Among districts, condom use with the most recent sexual partner ranged from 39.5% in Ehlanzeni to 45.3% in Nkangala.

A higher proportion (32.4%) also reported that they never used a condom with their most recent sexual partner. Only 11.0% reported that they used condoms almost every time. Consistency of condom use with the most recent sexual among people aged 15 years and older in the province was lowest among those aged 25–49 years (23.7%) compared to those aged 15–24 years (37.5%). However, nearly 50% of youth reported using a condom sometimes or never using a condom. Consistency of condom use with the most recent sexual partner among people aged 15 years and older was highest in Nkangala (32.2%) and lowest in Ehlanzeni (18.0%).

### **Male circumcision**

In Mpumalanga, self-reported circumcision was 63.7% in 2017 and 71.8% in 2022. In 2022, self-reported male circumcision in the province was substantially lower among those aged 15–24 years

(69.1%) compared to other age groups, and highest in those residing in rural informal/ tribal areas (79.8%).

By district, self-reported circumcision among males aged 15–24 years ranged from 61.6% in Gert Sibande to 74.0% in Ehlanzeni district, and among those aged 25–34 years from 71.0% in Ehlanzeni to 73.2% in Nkangala, and among older males aged 25–49 years, from 69.1% in Ehlanzeni to 76.8% in Nkangala.

Mpumalanga had the 5<sup>th</sup> highest proportion of medical circumcisions in the country (68.1%). Self-reported medical circumcision was lower among those aged 25–49 years (67.9%), and similar across locality with an exception among those who reside in rural informal or tribal areas (60.7%). Medical circumcision ranged from 52.0% in Nkangala to 77.0% in Gert Sibande.

Male circumcision among children aged 14 years and younger in MP increased with age, starting from 0.0% among children aged 0–4 years up to 46.5% among children aged 12–14 years. Male circumcision among children aged 14 years and younger was lowest in Gert Sibande (11.5%).

### **Awareness of HIV testing sites**

Awareness of HIV testing sites is critical for accessing HIV testing services. In 2022, awareness of HIV testing sites by selected demographic variables among people aged 15 years and older in the province was generally high. Awareness was almost similar among males (93.6%) and females (94.1%) and lower among adolescents and youth aged 15–24 years (91.8%) compared to those aged 25–49 years (95.1%).

### **Access to HIV testing sites**

Access to HIV testing sites is important for scaling up the utilisation of HIV testing services. In Mpumalanga, the majority of people aged 15 years and older accessed public clinics or doctors for HIV testing (54.4%).

### **HIV testing**

HIV testing is a gateway to counselling on HIV prevention and linkage to care among people diagnosed with HIV. Among female adolescents and youth aged 15–24 years, 22.7% had never been tested for HIV and only 1.0% had been tested more than three years ago. Among male adolescents and youth aged 15–24 years, 26.2% had never been tested for HIV and 9.0% had been tested more than 3 years ago.

### **HIV testing by selected districts**

The survey revealed that almost 30% of women in Ehlanzeni (28.2%), Gert Sibande (20.6) and Nkangala (22.6) were never tested. Furthermore, more than half of females in Ehlanzeni (59.1%), Gert Sibande (62.3%) and Nkangala (54.7%) had been tested for HIV in the previous 3 years. By district, the survey shows that males in Ehlanzeni (33.5%), Gert Sibande (26.9%) and Nkangala (26.6%) had never received HIV testing.

### **Awareness and uptake of Pre-exposure Prophylaxis (PrEP)**

Overall, in 2022, 43.0% of sexually active adults aged 15 years and older in Mpumalanga had heard of PrEP, of whom 8.4% had taken PrEP. Of those who had ever heard, 3.2% were taking PrEP at the time of the survey. More females (50.6%) than males (35.7%) had ever heard of PrEP and ever taken PrEP (12.4% females vs 4.5% males).

Willingness to use PrEP to prevent HIV was higher in females (61.4%) than males (45.7%). Compared to other age groups, more adolescents and youth aged 15–24 years had heard of PrEP (54.0%) and of those who had ever heard, 6.2% were currently taking it and 51.8% were willing to take it to prevent HIV. Awareness of PrEP was higher in rural informal/tribal areas (45.5%) than rural formal/farms (35.2%).

Overall, 54.1% of respondents who had ever heard of PrEP but had never taken PrEP reported they would consider taking it to prevent HIV infection. Current use of PrEP was highest in Gert Sibande District (3.7%).

### **Key recommendations**

The survey recommends key actions to address the HIV epidemic as a public health threat in South Africa by 2030. These include targeted interventions for age groups most affected by HIV, particularly adolescent girls and young women, who require intensified prevention efforts.

Professor Zuma recommends a long-term strategy to care for individuals in an ageing HIV epidemic as well as tailored interventions to address gaps in the clinical cascade by district, locality and subpopulation.

“We also recommend a continued focus on increasing coverage and demand for medical male circumcision among males aged 15 years and older. We must also enhance public awareness and uptake of effective HIV prevention measures, such as regular HIV testing, condoms and PrEP,” concluded Professor Zuma.

The HSRC conducted the survey in partnership with the US Centers for Disease Control and Prevention (CDC), the South African Medical Research Council (SAMRC), the University of Cape Town (UCT), and the National Institute for Communicable Diseases (NICD).

The council has launched a provincial results dissemination roadshow, dubbed the Provincial Dialogue, which has already been successfully completed in the Eastern Cape, Limpopo, Gauteng and North West provinces. The next provinces in line for this initiative are Mpumalanga, Free State, KwaZulu-Natal, Western Cape, and Northern Cape.

Click on the link below to download the full provincial report, presentation, and a 20-year SABSSM anniversary video:

<https://hsrc.ac.za/special-projects/sabssm-survey-series/sabssm-vi-provincial-dialogue-mpumalanga-media-pack/>

Ends.

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**Notes to the editor**

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Our mandate is to inform the effective formulation and monitoring of government policy; to evaluate policy implementation; to stimulate public debate through the effective dissemination of research-based data and fact-based research results; to foster research collaboration; and to help build research capacity and infrastructure for the human sciences.

The Council conducts large-scale, policy-relevant, social-scientific research for public sector users, non-governmental organisations and international development agencies. Its research activities and structures are closely aligned with South Africa’s national development priorities.

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