

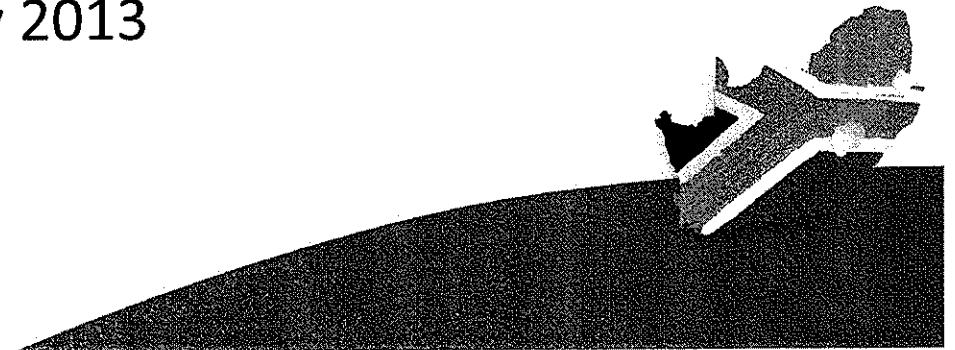
June 17/13



Progress Update on the National Strategic Plan for HIV, TB and STIs 2012 - 2016

Presentation to the Joint Committee on HIV and
AIDS

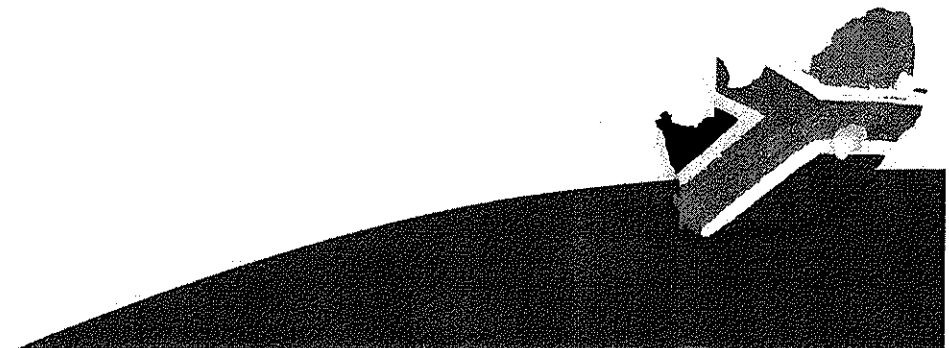
10 May 2013





Overview

- Implementation of the NSP programmes
- Financing and Resource Mobilisation
- The New Governance Structures of SANAC

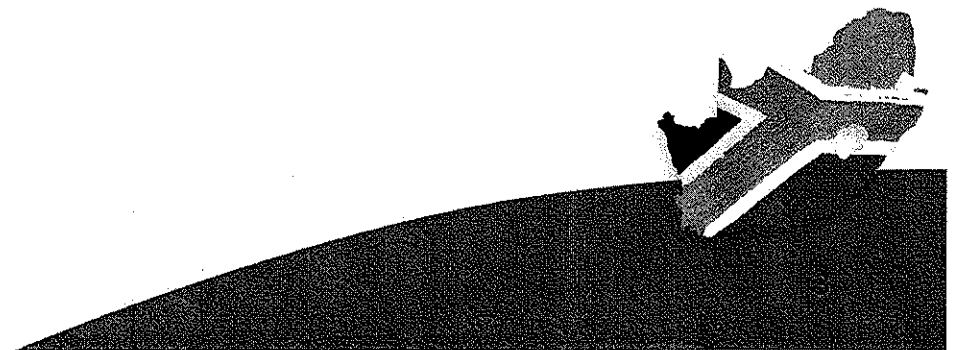




NATIONAL STRATEGIC PLAN

on HIV, STIs and TB

2012 – 2016

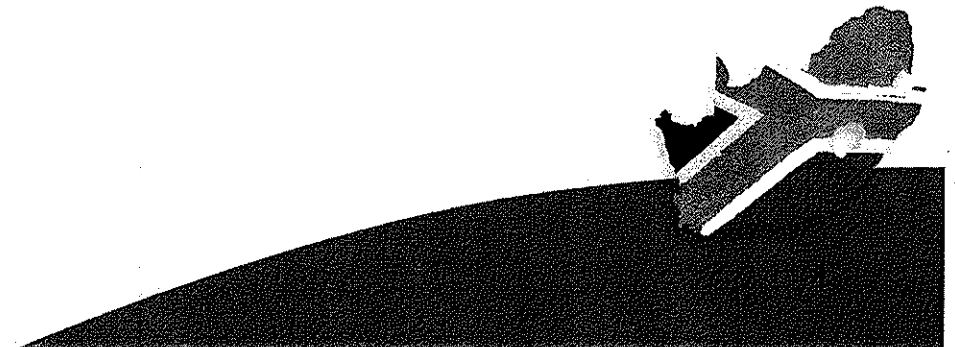




Key NSP Programmes

SO1 Structural Drivers

- Intergenerational and transactional sex
- Gender based violence
- Reducing poverty (uptake of CSG)
- Changing gender norms and lifeskills education (DBE draft policy)
- Parenting skills

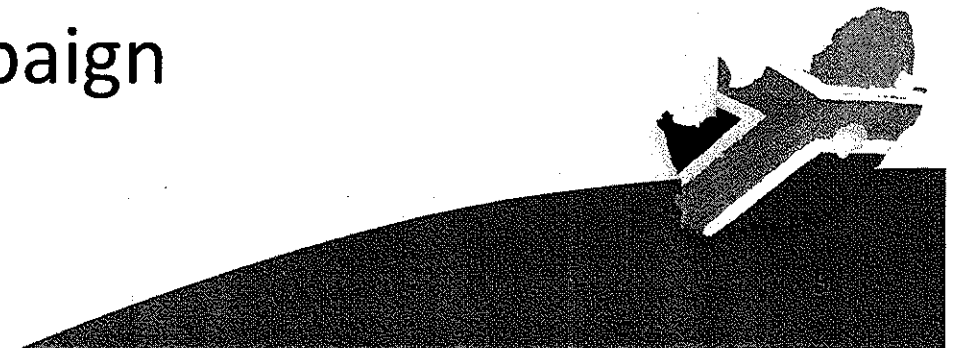




Key NSP Programmes

SO2 Prevention

- National Sex Worker Programme
- Truck Drivers
- Expansion of MSM services
- Male Medical Circumcision
- PMTCT (FDCs)
- Condom Review
- Re-launch of HCT campaign



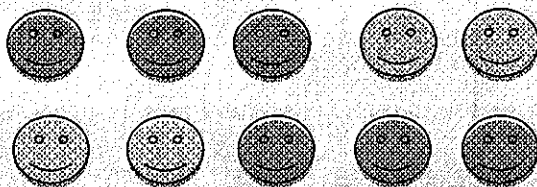


The 3rd NCS reveals substantial increases in behaviour that reduce the risk of contracting HIV

1

64.3% of all South Africans have ever been tested

17.4 million tested
10.6 million in the last year



Counseling and testing

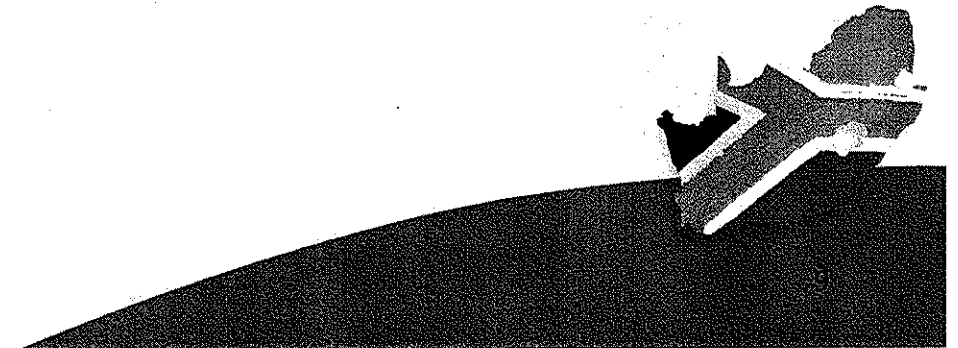




Key NSP Programmes

SO3 (AIDS)

- Antiretroviral Treatment (FDCs)
- TB Treatment
- Adherence Support
- Psychosocial support to OVC



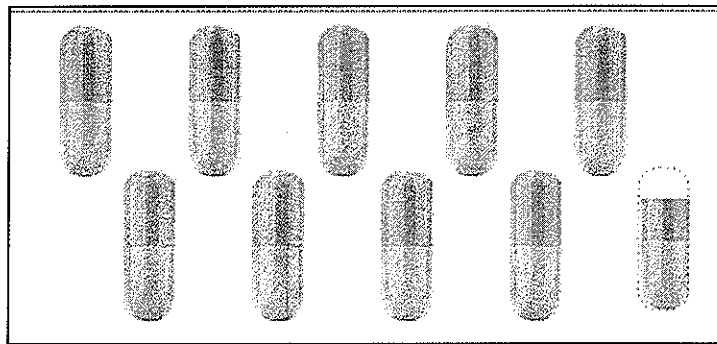


Target 3: Eliminate Mother-to-Child Transmission of HIV by 2015 and Substantially Reduce AIDS-related Maternal Deaths

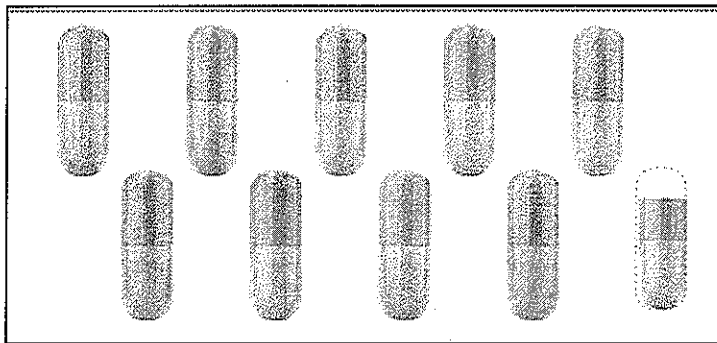


Between 2008 and 2011 the MCT rate dropped from 8% to 2.7% (DHIS Jan-Dec 2012)

ART coverage for HIV positive pregnant women has leapt from **87.3% to 99%** (SA GAPR, 2011; DHMIS 2012)



99% of infants born to HIV-infected women provided with ARV prophylaxis to reduce the risk of early mother-to-child transmission in the first 6-weeks (SA GAPR, 2011)



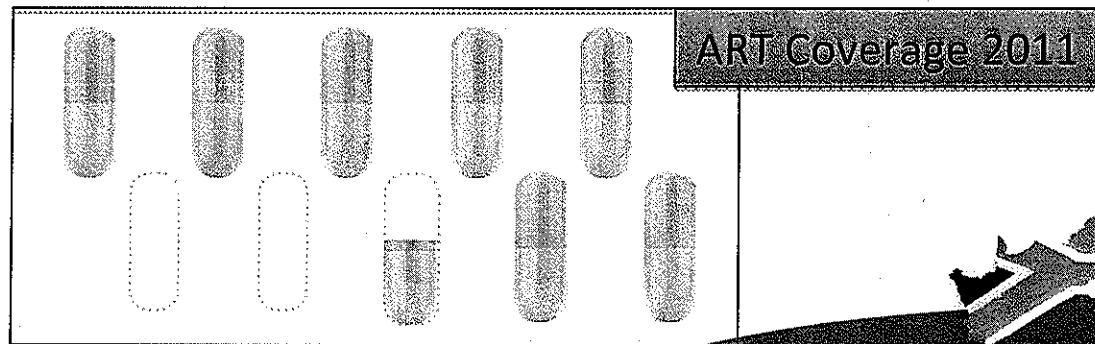
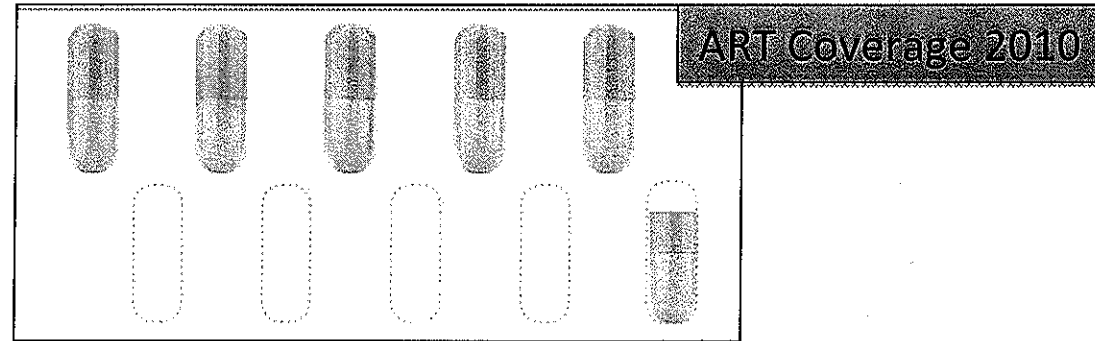


Target 4: Have 15 Million People Living with HIV on Anti-retroviral Treatment by 2015 (Global)



1.9 million eligible adults and children currently on ART (DHIS Jan-Dec 2012)

Percentage of eligible adults and children receiving antiretroviral therapy leapt from **58.3%** in 2010, to **75.2%** in 2011 (SA GAPR, 2011)

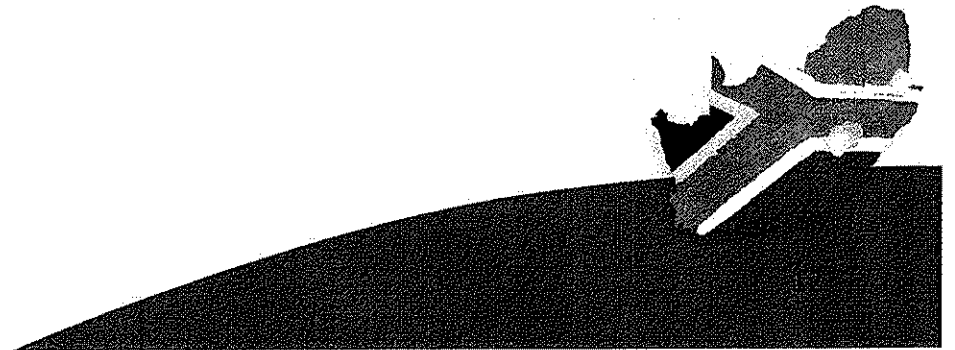




Key NSP Programmes

SO4

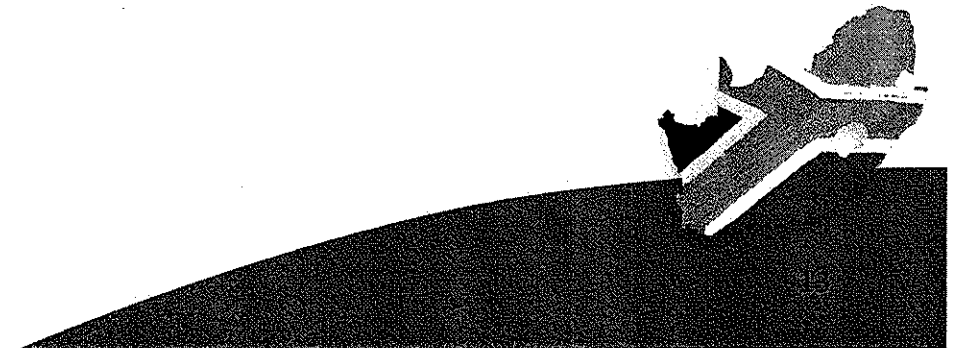
- Sexual Offences Act
- Stigma Index (PLHIV Sector)
- Overcrowding in Prisons
- Workplace discrimination





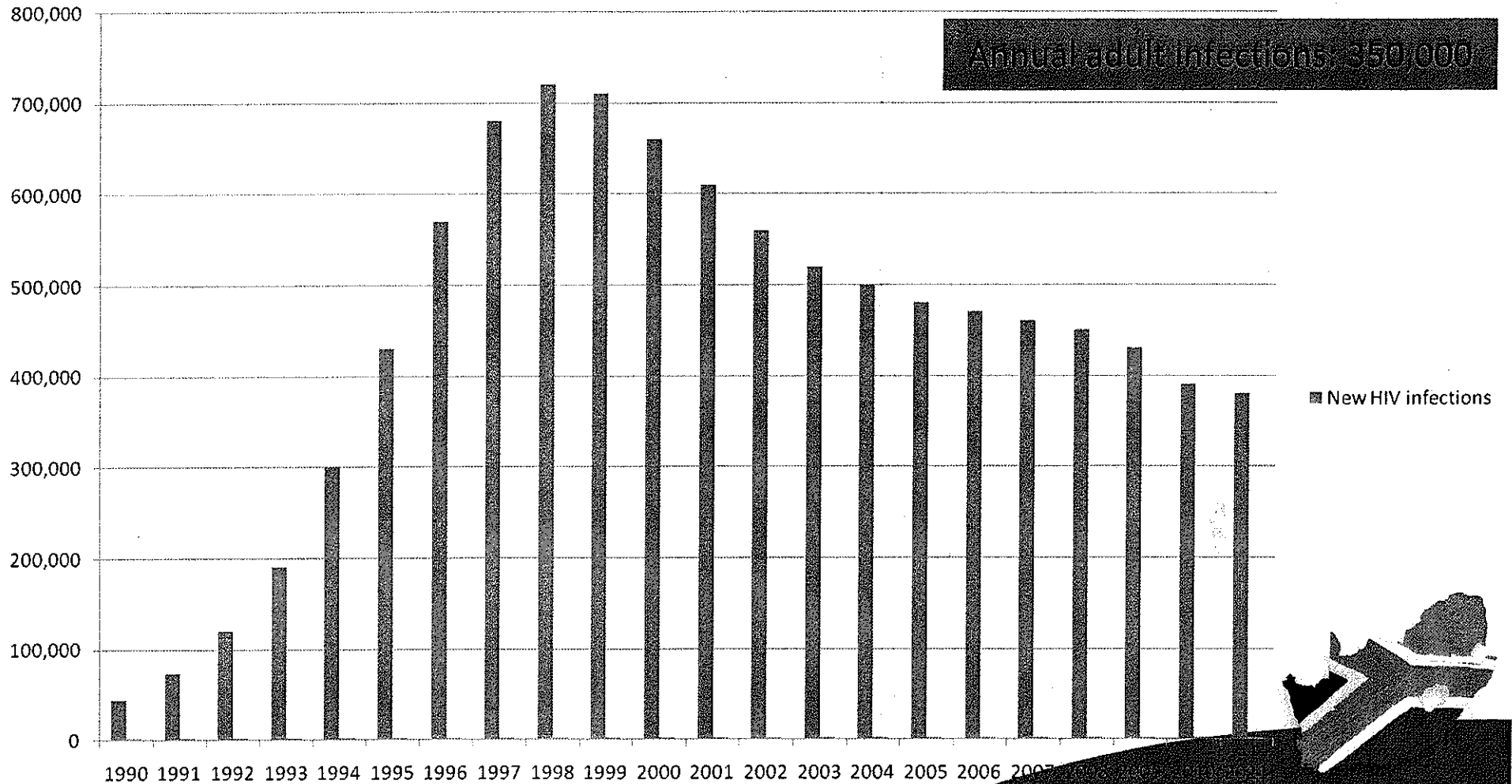
Monitoring Goals of the NSP

- Reduce HIV incidence by 50%
- 80 % on ART, 70% alive after 5 years
- Reduce TB incidence and mortality by 50%
- Human rights framework
- Reduce stigma by 50%

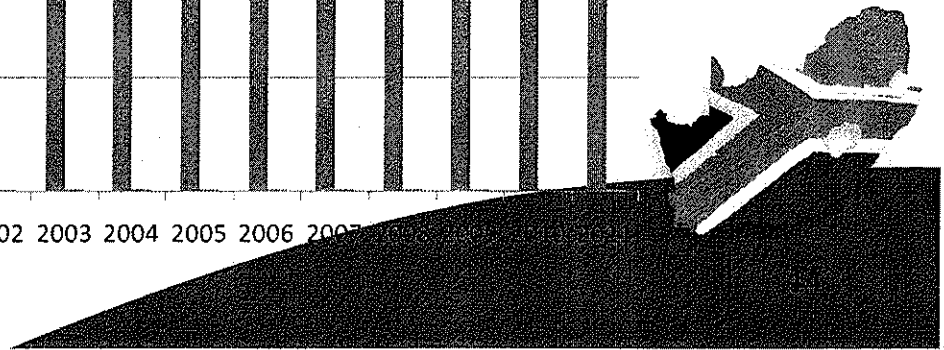




Number of New annual HIV infections (1990-2011)



UNAIDS Spectrum model, 2011 (preliminary)





ART Coverage

- 1.9 million on treatment as at December 2012
- Target new enrolments are 500 000, 535 000 and 550 000 for the next three years
- System is being rolled out to allow for tracking survival on treatment for 5 years (or even 12 months) – TIER.NET





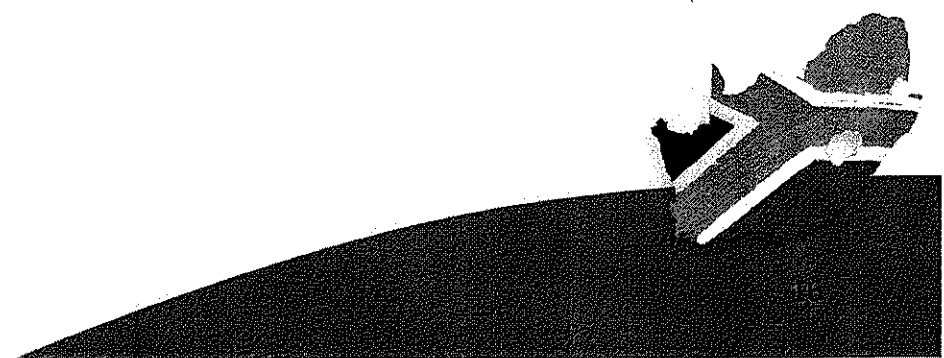
TB Incidence

2009 - 970 per 100,000

2010 - 981 per 100,000

2011 - 993 per 100,000

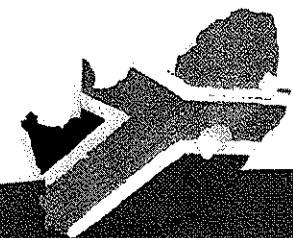
2012 - not available currently





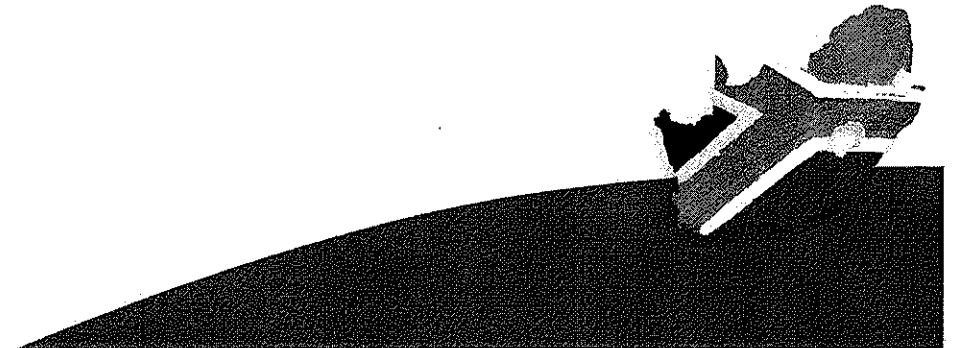
TB Mortality

TB Mortality 2010			
Province	Rank	TB Deaths	Percent
Mpumalanga	1	5595	13.4
Gauteng	1	9247	8.8
Limpopo	2	4199	8.4
Kwazulu Natal	1	18205	15.7
Free State	2	5004	11.1
North West	1	4942	12.3
Western Cape	1	3573	7.8
Northern Cape	1	1396	9.2
Eastern Cape	1	10205	12.7
Total		62366	
GP, KZN, EC		37657	60.4





Financing and Resource Mobilisation



Summary of HIV/AIDS Spending 2009/10 to 2015/16

<i>R millions</i>	2009/10	2010/11	2011/12	2012/13	2013/14	2014/15	2015/16
National DoH Total	4,852	6,404	7,853	9,131	10,969	12,805	14,481
DoH Core	476	353	360	368	435	493	524
DoH Conditional Grant	4,310	5,999	7,791	8,895	10,534	12,311	13,957
Provincial Own Dedicated (Health)	315	0	0	170	0	74	0
Education Grant	168	171	194	211	214	221	227
Sport and Recreation	27.5	28.7	30.4	32.2	33.7	DF1 33.3	36.6
Correctional Services	42.1	44.2	46.4	48.7	51.1	53.7	56.4
Social Development	587	625	745	745	776	796	832
Sub Total	5,926	7,221	9,167	10,470	12,044	13,984	15,633
Treatment of Opportunistic Infections	5,714	6,000	6,300	6,615	6,946	7,293	7,651
Public Spending	11,640	13,221	15,467	17,085	18,990	21,277	23,284
Donor	4,762	5,000	5,250	5,513	5,788	5,500	5,386
Total	16,402	18,221	20,717	22,598	24,778	26,777	28,670

- Approximate estimate of overall quantum of AIDS spending mainly in social sector
- Overall increase from R22.6 billion in 12/13 to R28.7 billion in 15/16
- HIV conditional grant (Health) increases from R8.9 billion to R13.96 billion over MTEF
- Excluding Defence (R40m in 09/10), DPSA, MRC, Universities, HISA as not easily obtainable from ENE data

Slide 19

DF1

In the Conditional grant table in slide 8 we used actual expenditure, which is different from the figures here. Should we change this?
David Francis, 2013/03/18

Summary of Expenditure

2009/10 to 2015/16

<i>R millions</i>	2009/10	2010/11	2011/12	2012/13	2013/14	2014/15	2015/16
National DoH Total	4,852	6,404	7,853	9,131	10,969	12,805	14,481
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DoH Conditional Grant	4,310	5,999	7,791	8,895	10,534	12,311	13,957
Provincial Own Dedicated (Health)	315	0	0	170	(DF2)	74	0
Education Grant	168	171	194	211	214	221	227
Sport and Recreation	27.5	28.7	30.4	32.2	33.7	35.3	36.6
Correctional Services	42.1	44.2	46.4	48.7	51.1	53.7	56.4
Social Development	587	625	745	745	776	796	832
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<i>Total</i>	16,402	18,221	20,717	22,598	24,778	26,777	28,670

DF2

In the Conditional grant table in slide 8 we used actual expenditure, which is different from the figures here. Should we change this?
David Francis, 2013/03/18



Global Fund Grants in South Africa

Principal Recipients	Start Date	End Date	Total Budget USD
National Dept of Health	1 July 2011	March 2013	100,270,275
Western Cape Dept of Health	1 July 2010	June 2013	64,304,183
Networking AIDS Community SA	1 April 2011	March 2013	19,516,564
National Religious Association Social Development	1 October 2010	Sept 2012	13,701,694
Right to Care	1 Jan 2012	Sept 2013	16,169,197
Total Budget			213 961 913



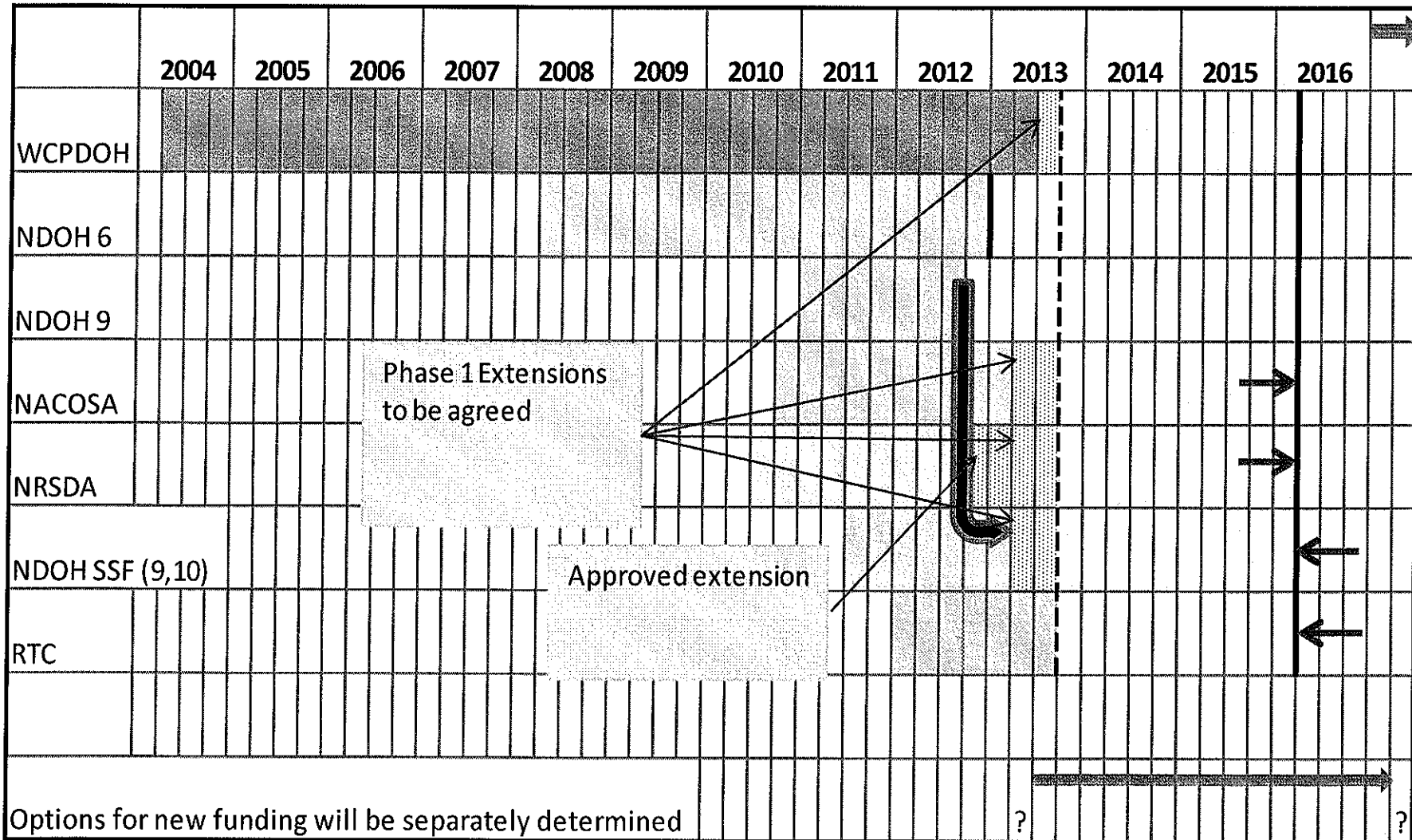


Global Fund Disbursements: 2010/2011/2012

Principal Recipient	2010	2011	2012
National Dept of Health (NDOH)	22 619 919	6 623 847	50 138 253
Western Cape Dept of Health (WCDOH)	11 822 841	7 689 714	24 607 408
Networking AIDS Community of South Africa (NACOSA)	4 779 830	6 151 385	10 795 267
National Religious Association of S(NRASD)	4 422 523	0	9 279 171
Right to Care (RTC)	N/A	N/A	7 013 416
Totals	43 645 113	20 464 946	101 833 515



Aligning the Grant Timeframes: 1 Oct 2013 to 31 March 2016



Key programmes and Budget allocations

Focus Area	Service Delivery Areas	Budget in USD	Budget %
Combination Prevention (23.5%)	Gender Based Violence	4 807 829	1.9 %
	OVC	8 594 84	3.4 %
	Sex workers	7 450 625	3 %
	MSM& LGBTI	10 163 995	4 %
	Prisoners	11 058 534	4.4 %
	VMMC	9 260 618	3.7%
	Low socio-economic Population	7 065 583	2.8 %
HIV Treatment, Care and Support (64.5%)	ART and Monitoring	138 661 786	55.3 %
	Of Which ARVs	105 388 661	42 %
	Adherence, Care and Support	19 178 443	5.6 %
	Pharmacovigilance	4 841 642	1.9 %
	Drug Resistance Testing	3 796 314	1.5 %
Supportive Environment (10%)	Community Systems Strengthening	13 523 663	5.4 %
	Programme Management and Monitoring and Evaluation	12 561 288	5%
	TOTAL BUDGET IN USD	250 965 163	



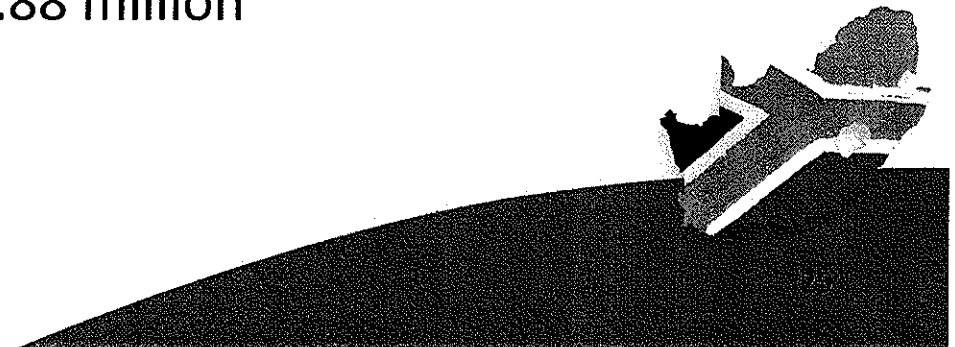
PEPFAR spending on Prevention 2011



- **Total 2011 PEPFAR Budget**
= \$ 548.7 million
- **Total 2011 PEPFAR Budget allocated to Prevention**
= at least \$152.9 million

AppORTIONED across:

- PMTCT = \$ 49.8 million
- Sexual prevention = \$ 52.2 million
- MMC = \$ 19.3 million
- HCT = \$ 30.88 million





PEPFAR spending on Prevention 2012



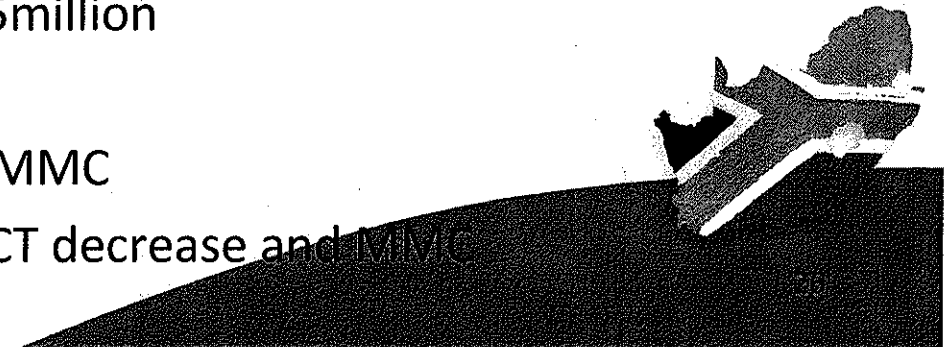
- **Total 2012 PEPFAR Budget**
= \$484 million (+ \$40million)
- **Total 2012 PEPFAR Budget allocated to Prevention**
= \$132 million (+ \$40million)
= \$172 million

Apportioned across:

- PMTCT = \$ 32 million
- Sexual prevention = \$ 50 million
- MMC = \$34.5 million
- HCT = \$15.5million

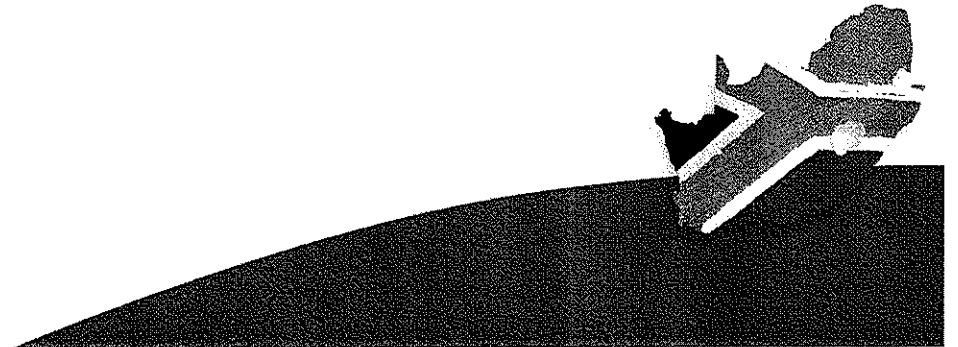
Excludes an \$40million HQ allocation to MMC

- Biggest changes to 2012 COP saw HCT decrease and MMC increase





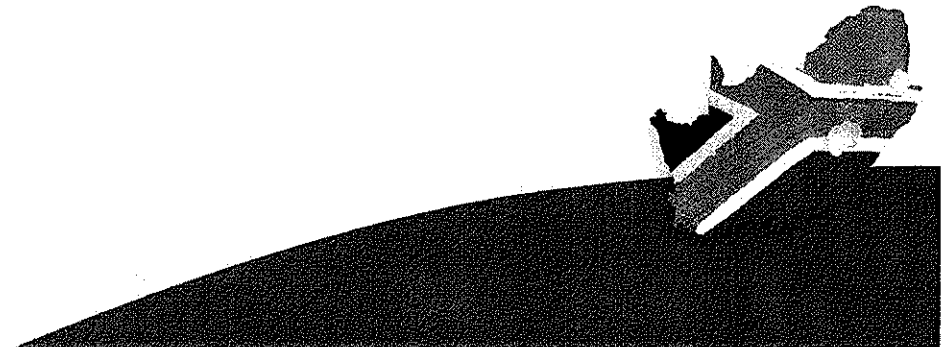
New SANAC Governance Structures





SANAC is ...

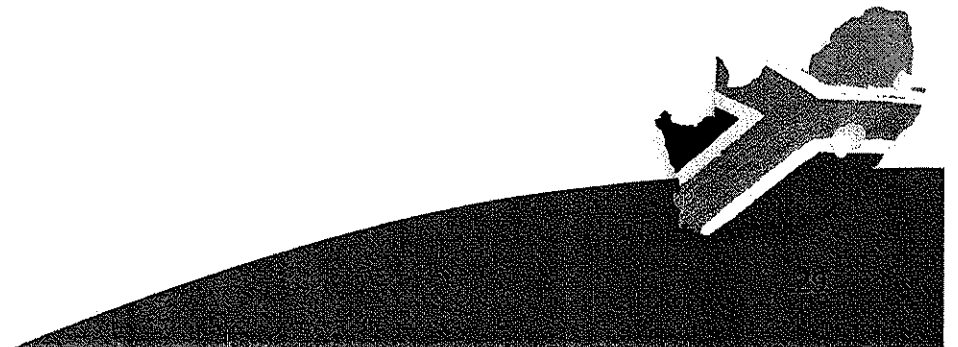
The South African National AIDS Council (SANAC) brings together government, civil society and the private sector to create a collective response to the scourges of HIV, TB and STIs in South Africa. The Council is chaired by the Deputy President of South Africa and meets four times per year.





The goals of SANAC and its structures are...

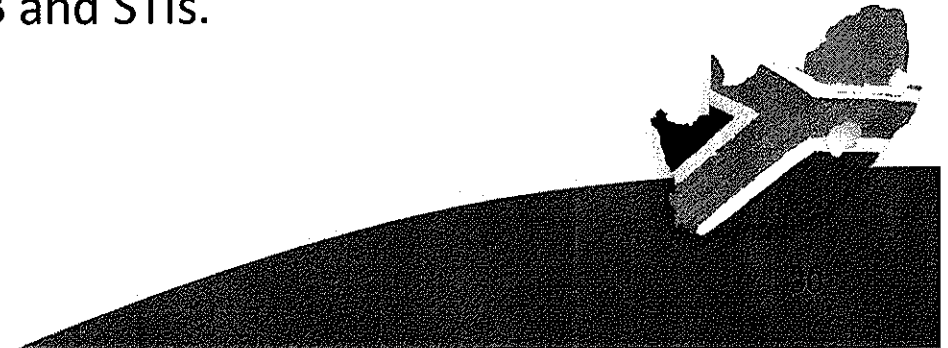
- foster dialogue between government, civil society and all other stakeholders and to oversee the country's response to HIV, TB and STIs;
- advise government on HIV and AIDS, TB and STI policy and strategy and related matters;
- strengthen the governance, leadership and management of the response to HIV, TB and STIs at national, provincial, district and local levels;
- strengthen the multi-sectoral response to HIV, TB and STIs as a contribution to the overall social and economic development of South Africa, including but not limited to policy review, programme management and co-ordination, technical assistance and capacity building and sectoral support;

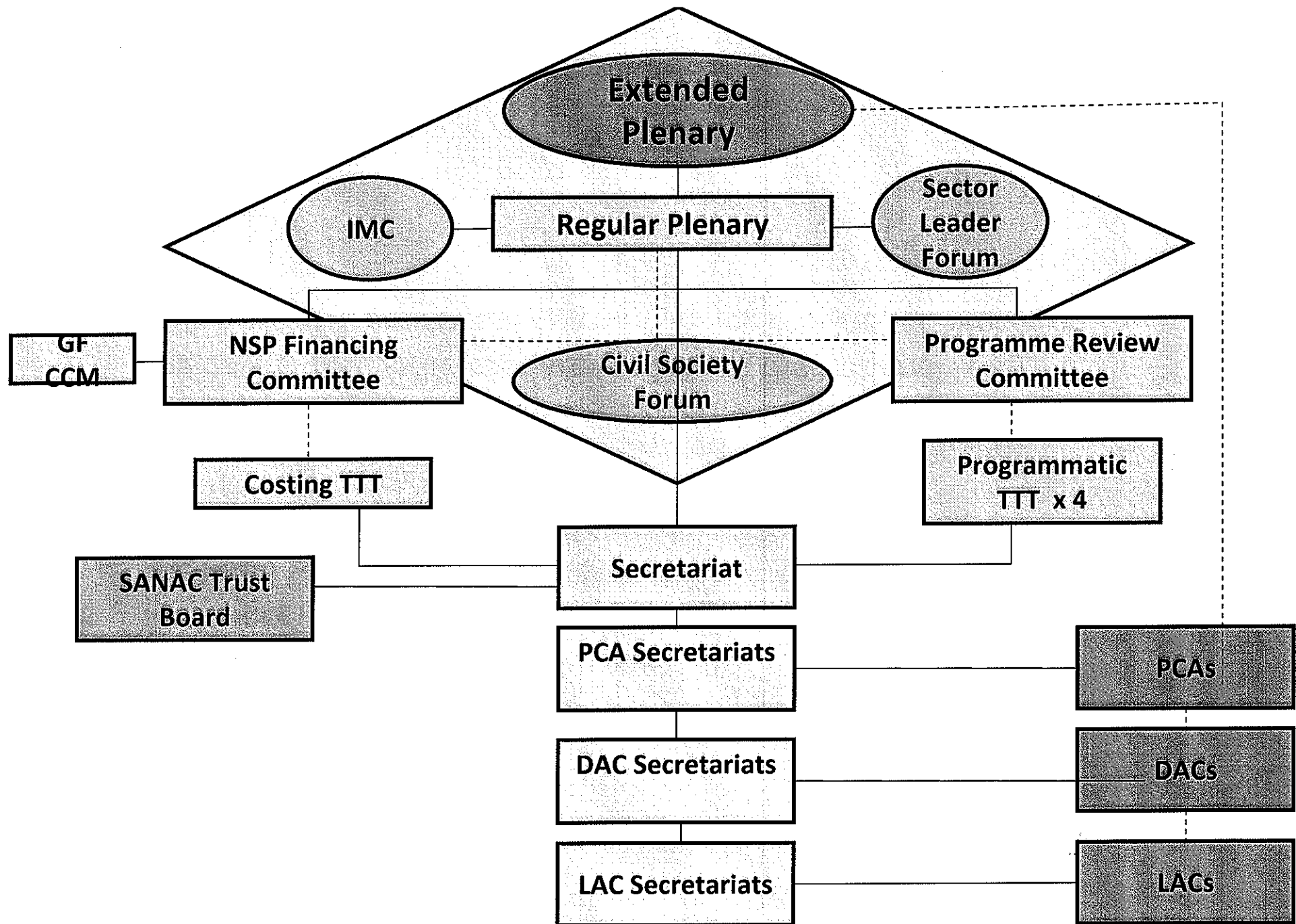




The goals of SANAC and its structures are...

- mobilise resources domestically and internationally to finance the response to HIV, TB and STIs, including but not limited to estimating expenditure and resource needs, fund-raising from domestic and international institutions, including Treasury, donor co-ordination and investigating new sources of funding for the multi-sectoral response and the NSP;
- ensure the monitoring of progress against the targets set in the NSP and ensure mid and end of term evaluations for the prevailing NSP;
- create and strengthen partnerships for an expanded national response in South Africa to HIV, TB and STI among government agencies, non-governmental organisations (NGOs), donors of funds, agencies of the United Nations, the South African private sector and people living with HIV, TB and STIs.

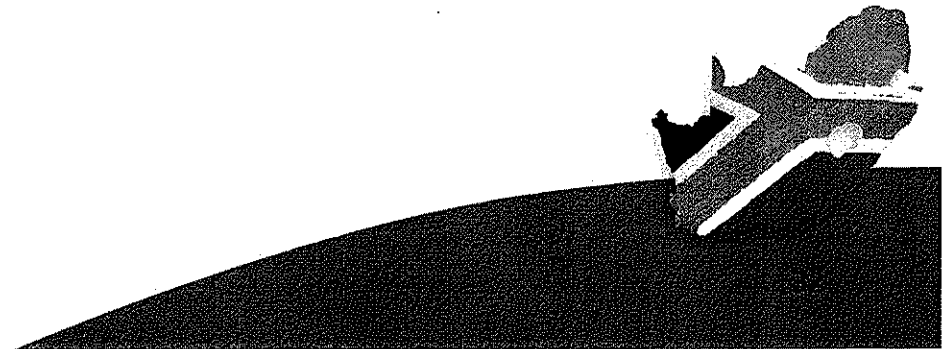






Conclusions

- A more comprehensive response is being implemented with prevention much higher on the agenda
- there is very good progress with treatment and PMTCT
- The multi sectoral response needs to be strengthened
- The Treasury continues to increase domestic investments in HIV and TB
- Additional resources are being provided by the Global Fund whilst bilateral donors are decreasing their investments
- The new SANAC structures are working at the National Level
- Only 5 of the 9 provinces have functioning Provincial Councils on AIDS





Thank you

