

# Child health: HIV/AIDS

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The Constitution of South Africa, Section 28 (1) (c), gives children “the right to basic nutrition, shelter, basic health care services, and social services”. The United Nations Convention on the Rights of the Child says that State Parties should recognise “the right of the child to the enjoyment of the highest attainable standard of health and to facilities for the treatment of illness and rehabilitation of health” (Article 24).

## The leading causes of deaths among children under five years of age in South Africa for 2000

Monitoring the deaths of children is crucial if we are truly committed to ensuring children's right to life, survival and development. The majority of causes of children's death in the country are preventable. HIV/AIDS remains the leading cause of deaths among children under-five years of age, nationally and across all provinces, primarily due to transmission before and during the birth process. Diseases of poverty account for at least 30% of all under-five child deaths. Injury-related causes rise in number for children older than five

years old (Bradshaw, Bourne & Nannan 2003).

Social determinants of health make children living in impoverished conditions more vulnerable to becoming ill more frequently, which could lead to their death. Thus health interventions alone would be insufficient – economic and environmental changes would also be required to ensure long-term improvements in the health status of children and the prevention of such deaths. (For more details about this indicator refer to page 68.)

Table 10: The percentage of leading causes of deaths among children under five years of age in South Africa for 2000

Province	HIV/AIDS		Diarrhoeal diseases		Lower respiratory infections		Low birth weight	
	% Male	% Female	% Male	% Female	% Male	% Female	% Male	% Female
Eastern Cape	27	30	15	17	7	7	5	6
Free State	40	43	11	10	8	8	7	7
Gauteng	46	49	5	6	5	5	5	5
KwaZulu-Natal	49	52	10	10	6	5	5	4
Limpopo	37	40	16	15	6	5	7	6
Mpumalanga	47	50	11	11	6	6	7	4
Northern Cape	25	28	17	15	5	8	10	9
North West	40	43	11	13	8	9	7	6
Western Cape	20	23	10	11	7	6	11	6
<b>South Africa<sup>1</sup></b>	<b>40</b>		<b>10</b>		<b>6</b>		<b>11</b>	

Source: Bradshaw D, Nannan N, Laubscher R, Groenewald P, Joubert J, Nojilana B, Norman R, Pieterse D & Schneider M (2004) *South African National Burden of Disease Study 2000: Estimates of Provincial Mortality*. Cape Town: Medical Research Council of South Africa, Burden of Disease Unit.

<sup>1</sup> The national estimates do not correspond exactly with the provincial estimates.

## The HIV-prevalence rate among children in South Africa from 2000 to 2005

The HIV-prevalence rate refers to the proportion of children, at a given period, who have HIV infection. South Africa is currently experiencing an overwhelming HIV pandemic. Many children are infected with HIV or have become ill and died due to AIDS. The majority of children are infected before and during the birth process. Children may also become infected through being sexually abused by an HIV-positive person or through sexual intercourse. It is of critical importance to know the numbers of children that are infected with HIV.

Current estimates from the Actuarial Society of South Africa (ASSA) model suggests a prevalence rate of 1% in 2000, almost doubling to 1.7% in 2005 for children under the age of 15. For children aged 0 – 5 years, the rate increased from 2.1% in 2000 to 3.4% in 2005. For children aged 6 – 12 years, the rate increased from 0.1% to 0.8% between 2000 and 2005. These figures bear out that the greater proportion of children with HIV are those younger than five years of age. A total number of 260,000 children under the age of 15 years are estimated to be living with HIV infection (ASSA 2004). (For more details about this indicator refer to page 68.)

**Table 11: The HIV-prevalence rate among children in South Africa from 2000 to 2005**

Age group	2000	2001	2002	2003	2004	2005
	%	%	%	%	%	%
0 – 5 years	2.1	2.6	3.0	3.2	3.4	3.4
6 – 12 years	0.1	0.2	0.3	0.4	0.6	0.8
0 – 14 years	1.0	1.2	1.4	1.5	1.6	1.7

Source: Actuarial Society of South Africa (2004) *ASSA2002 AIDS and Demographic Model*. Available: <http://www.assa.org.za>

## The proportion of children receiving antiretroviral therapy (ART) in South Africa from 2000 to 2004

The HIV pandemic is currently one of the largest and most serious infectious diseases affecting children in South Africa. Many children themselves are infected, as described previously. Children that become infected can progress to getting AIDS. They thus need antiretroviral (ARV) medication to delay the onset of AIDS, as it invariably leads to death. In November 2003, the government released an *Operational Plan for Comprehensive HIV and AIDS Care, Management and Treatment for South Africa*. Children are an important group of people infected with HIV/AIDS and therefore the monitoring of the extent to which children are prioritised in the ARV roll-out is a critical child rights issue. This indicator tells us how many children that should be accessing ARV treatment do in fact manage to do so.

It is difficult to comment on trends, as the ARV roll-out has only been in place for one-and-a-half years. The roll-out also began later in some provinces than in others. However, it is already clear that sites that provide ARVs to children are far fewer than those servicing adults. Whilst the current coverage for children, as a proportion of all people receiving ARVs, is 10% on average nationally, the inter-provincial variations range from less than 1% in Mpumalanga to nearly 17% in the Western Cape (Treatment Action Campaign 2005). The modelled data suggests that the average national proportion of children receiving ARVs has steadily increased from 2% in 2002 to 17% in 2004. (For more details about this indicator refer to page 68.)

**Table 12: The proportion of children receiving antiretroviral therapy (ART) in South Africa from 2000 to 2004**

Age group	2000	2001	2002	2003	2004
	%	%	%	%	%
0 – 18 years	2.0	4.0	6.0	8.0	17.0

Source: Actuarial Society of South Africa (2004) *ASSA2002 AIDS and Demographic Model*. Available: <http://www.assa.org.za>

### Sources

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