Population: 49 320 500

<table>
<thead>
<tr>
<th>Province</th>
<th>Population 2009 mid yr estimates</th>
<th>ANC HIV Prevalence (%) 2009</th>
</tr>
</thead>
<tbody>
<tr>
<td>EC</td>
<td>6 648 600</td>
<td>28.1</td>
</tr>
<tr>
<td>FS</td>
<td>2 902 400</td>
<td>30.1</td>
</tr>
<tr>
<td>GP</td>
<td>10 531 300</td>
<td>29.8</td>
</tr>
<tr>
<td>KZN</td>
<td>10 449 300</td>
<td>39.5</td>
</tr>
<tr>
<td>LP</td>
<td>5 227 200</td>
<td>21.4</td>
</tr>
<tr>
<td>MP</td>
<td>3 606 800</td>
<td>34.7</td>
</tr>
<tr>
<td>NC</td>
<td>1 147 600</td>
<td>17.2</td>
</tr>
<tr>
<td>NW</td>
<td>3 450 400</td>
<td>30.0</td>
</tr>
<tr>
<td>WC</td>
<td>5 356 900</td>
<td>16.9</td>
</tr>
</tbody>
</table>
Background

Tuberculosis
- Case detection: 83%
- Prevalence: 808 per 100 000 pop/yr
- Incidence: 970 per 100 000 pop/yr
- Mortality: 45 per 100 000 pop/yr (non HIV)
- Estimated MDR-TB cases: 13 000

Global Report on TB Control 2010

HIV
- Generalized epidemic
- Adult prevalence: 11-12%
- Around 5.6 million PLHAs
- >1.3 million PLHAs on ART
- 73% co-infection rate
- 52.5% TB/HIV co infected on ART
TB and HIV burden
WHO TB review (1996) and UNAIDS HIV review (1997) recommended strengthened TB/HIV collaboration


Phased implementation of TB/HIV Collaborative activities-2003

IPT policy -2004, revised 2010

Standardized National TB Screening tool
HIV entry trends 2006-2009

- Number of clients tested for HIV positive - new
- Number of HIV positive clients - new screened for TB
- Number of HIV positive clients new with confirmed TB (new TB cases)
- Number of PPD done to HIV+ clients
- Number of HIV positive clients start IPT.

Source: DHS
TB screening and IPT trends - South Africa
2006-2009

- Prop. of clients tested HIV positive - new
- Prop. of HIV positive clients - new screened for TB.
- Prop. of HIV positive client new with confirmed TB (new TB cases).
- Prop. of HIV positive client start IPT.

Source: DHIS
**New Policies: 2010**

- Adaptation of Presidential mandate of World AIDS Day 2009
  - Decentralisation of ART to PHC
  - Integration of TB/HIV care
  - ART at antenatal care clinics
  - Accreditation of facilities no longer policy but readiness of PHC assessed
  - Nurse initiated ART
  - Task Sharing
Priorities

- CD4<350
  - TB/HIV
  - Pregnant women at 14 weeks
- All HIV + Infants & M/XDRTB HIV co infected patients to commence treatment regardless of CD4 or clinical stage
- Urgent cases
  - CD4<100
  - Stage 4
Implementation

- HCT campaign target is 15m by June 2011 (with TB screening)
- Readiness assessment of PHC facilities
- HR development and training to ensure competencies – nurse initiation
- Measures of success: updated M&E
Findings of External Reviews of TB program and HIV/AIDS program conducted (Jun & Nov 09)

- High rates of HIV-TB co-infection (73%)
- HIV /TB integration is patchy and inconsistent

Facility manager’s guide to TB/HIV integration drafted but needs support to implement

Accelerate implementation of Isoniazid preventive therapy – PLHIV should either be on TB treatment or on IPT
Progress – Intensified Case Finding (ICF)

- Growing recognition by HIV services of the high TB burden in HIV patients (TB Screening component of HCT campaign)
- Increasing number of clients screened and tested for TB
- TB screening tool standardized and disseminated
- Pre-ART register developed and disseminated
# HCT Update YTD

<table>
<thead>
<tr>
<th>Province</th>
<th>Pre-Test C</th>
<th>Tested</th>
<th>Positive</th>
<th>Positivity</th>
<th>Screened TB</th>
<th>Referral</th>
<th>11 Month Target</th>
<th>Target Achieved</th>
</tr>
</thead>
<tbody>
<tr>
<td>Eastern Cape</td>
<td>1,008,439</td>
<td>799,547</td>
<td>99,674</td>
<td>12%</td>
<td>306,471</td>
<td>51,790</td>
<td>1,479,642</td>
<td>54%</td>
</tr>
<tr>
<td>Free State</td>
<td>560,976</td>
<td>472,383</td>
<td>93,022</td>
<td>20%</td>
<td>445,082</td>
<td>60,518</td>
<td>706,265</td>
<td>67%</td>
</tr>
<tr>
<td>Gauteng</td>
<td>1,997,934</td>
<td>1,921,716</td>
<td>488,485</td>
<td>25%</td>
<td>610,517</td>
<td>164,106</td>
<td>2,455,996</td>
<td>78%</td>
</tr>
<tr>
<td>KwaZulu-Natal</td>
<td>2,343,035</td>
<td>1,728,098</td>
<td>363,026</td>
<td>21%</td>
<td>1,371,004</td>
<td>217,190</td>
<td>2,243,438</td>
<td>77%</td>
</tr>
<tr>
<td>Limpopo</td>
<td>982,867</td>
<td>842,033</td>
<td>105,911</td>
<td>13%</td>
<td>157,255</td>
<td>16,646</td>
<td>1,129,777</td>
<td>75%</td>
</tr>
<tr>
<td>Mpumalanga</td>
<td>593,166</td>
<td>546,362</td>
<td>141,873</td>
<td>26%</td>
<td>273,787</td>
<td>44,660</td>
<td>803,604</td>
<td>68%</td>
</tr>
<tr>
<td>North West</td>
<td>921,691</td>
<td>724,775</td>
<td>124,972</td>
<td>17%</td>
<td>793,301</td>
<td>80,271</td>
<td>732,496</td>
<td>99%</td>
</tr>
<tr>
<td>Northern Cape</td>
<td>116,836</td>
<td>112,483</td>
<td>12,643</td>
<td>11%</td>
<td>29,175</td>
<td>6,298</td>
<td>247,824</td>
<td>45%</td>
</tr>
<tr>
<td>Western Cape</td>
<td>534,497</td>
<td>519,273</td>
<td>50,487</td>
<td>10%</td>
<td>445,044</td>
<td>39,710</td>
<td>1,178,902</td>
<td>44%</td>
</tr>
<tr>
<td>SA</td>
<td>9,059,441</td>
<td>7,666,670</td>
<td>1,480,094</td>
<td>19%</td>
<td>4,431,636</td>
<td>681,189</td>
<td>10,977,943</td>
<td>70%</td>
</tr>
</tbody>
</table>
Progress – Isoniazid Preventive Therapy (IPT)

- Policy 2003 – revised 2010
- Revised policy disseminated to all provinces
- Provinces have developed implementation plans with targets
- Most provinces have sentinel sites for intensified implementation
- Availability of INH 300 mg
- Political commitment and leadership
Progress – Infection Control (IC)

- Infection control policy
- Infection control plans
- Dissemination to provinces and districts
- Training of staff/IC officers in most facilities
- Pockets of good practice
- Agreement with CSIR for construction of MDR/XDR TB facilities (Global Fund RD 2)
Challenges - ICF

- Standardized reporting template not used by all provinces
- Assessments of facilities indicate that TB screening in HIV settings is done but is poorly captured/reported
- Inadequate recording and reporting
- Indicator definitions sometimes not understood
- PreArt register implementation slow despite training
Challenges in IPT

- Policy - adopted late by 2/3s of provinces
- HCWs - attitudes, capacity (training)
- Drug availability in facilities
- Tools - registers for TB screening and monitoring IPT uptake (ART, PMTCT)
- ACSM - community awareness
- M&E - responsibility for data capturing especially TB/HIV indicators
Challenges - IC

- Burden of TB
- Implementation of infection control plans
- Infrastructure and environmental delays to the basics
- Daily enforcement of administrative measures
**Plans and way forward**

- Need to escalate Three I’s implementation
  - Provincial plans and targets
  - Advocacy plan and strategy
  - National support to provinces
  - Provincial support to districts
- Lessons from and work with partners
  - Identify areas for collaboration and accelerated implementation
- Planned Program review by CDC ongoing
- Revised implementation framework to be circulated
Conclusions

- TB/HIV integration is being successfully implemented in some facilities.
- Performance varies depending on level of coordination between TB and HIV programmes.
- Performance improves when there is training, guidance, followed by supportive supervision.
Thank YOU!
Acknowledgements

- National & Provincial DOH staff
- Dr V. Tihon
- Dr N. Mhlongo-Sigwebela
- Dr L. Nshuti
- Prof H. Hausler
- Our Partners (CDC, USAID, GFATM, BTC)