Global trends

- According to the *AIDS Epidemic Update 2005*, an annual report by UNAIDS and the WHO, the number of people living with HIV/AIDS globally has reached its highest level ever, with an estimated 40.3 million HIV-infected people in 2005, up from an estimated 37.5 million in 2003. Almost 5 million people were newly infected with the virus in 2005, compared with 4.6 million new HIV infections in 2003. Despite recent, improved access to antiretroviral treatment and care in many regions of the world, the epidemic claimed 3.1 million lives this year, compared with 2.8 million AIDS deaths in 2003. On a regional basis, the number of people living with HIV has increased in all but one region (viz, Caribbean) in the past two years. Growing HIV/AIDS epidemics are under way in Eastern Europe and Central Asia where the number of people living with HIV has increased by one quarter (to 1.6 million) since 2003, and in East Asia where the number of people living with HIV in 2005 increased by one-fifth (to 870,000), compared with two years ago. Latin America has seen the highest number of new HIV infections ever. However, although the epidemic continues to grow both globally and regionally, there are signs of hope in some countries, notably Kenya, Zimbabwe, the Bahamas, Barbados, Bermuda, the Dominican Republic and Haiti where adult infection rates have decreased. According to Dr Peter Piot, executive director of UNAIDS, changes in behaviour, such as increased use of condoms, delay in first sexual experience and fewer sexual partners, have played a key part in these declines. However, the decline in infection rates in some of these countries could also be attributed to AIDS deaths exceeding new infections.

- The WHO will miss its 3 by 5 initiative target of treating three million HIV-infected people in developing countries with antiretroviral drugs by the end of this year because of a lack of cooperation and coordination internationally, a lack of national leadership, stigma surrounding HIV/AIDS, bureaucratic delays, inadequate funding and a lack of knowledge about treatments, according to a recent report produced by the International Treatment Preparedness Coalition and titled *Missing the target: A report on HIV/AIDS treatment access from the frontlines*. The report found that fewer than half of all HIV-infected people who are in need of antiretroviral drugs are receiving them. According to the director of the HIV/AIDS department at the WHO, ‘expanding access to treatment is only half the picture. The other critical and equally difficult challenge is reducing new HIV infections’. He states that ‘a new approach is required that goes beyond AIDS awareness billboards, abstinence education and condom demonstrations. The approach that excites public health advocates, and that seems increasingly achievable, is building and strengthening health care systems in the developing world so they can deliver both HIV treatment and prevention, including voluntary counselling and testing’.

African trends

- According to the latest *AIDS Epidemic Update*, sub-Saharan Africa remains the hardest-hit region in the world and is home to 25.8 million people living with HIV, almost one million more than in 2003. Two-thirds of all people living with HIV are in sub-Saharan Africa, as are 77% of all women with HIV. An estimated 2.4 million people died of AIDS-related illnesses in this region in 2005, up from 2.1 million AIDS deaths in 2003, while a further 3.2 million became infected with HIV in 2005, compared with 3 million new HIV infections in 2003. The HIV/AIDS epidemic continues to intensify in southern Africa, the epicentre of the global epidemic. HIV-infection levels among pregnant women are 20% or more in six southern African countries (Botswana, Lesotho, Namibia, South Africa, Swaziland and Zimbabwe), while in Botswana and Swaziland infection levels are around 30%.
Lesotho, the country with the third highest HIV-prevalence rate in the world, is to become the first country to offer HIV testing to its entire population of about 1.8 million. The US$12 million programme will offer confidential and voluntary HIV testing and counselling door-to-door with the aim of reaching all households in Lesotho by the end of 2007. The government plans to employ 7 500 additional health care workers to administer the tests.

The United Nations World Food Programme (WFP) is setting up ‘pit stops’ providing lifesaving information about HIV/AIDS to food-aid truck drivers and the communities they pass through in some of the world’s most infected countries. Recently, the first health centre opened its doors at Malawi’s Mwanza border crossing. About 70% of all road freight into Malawi passes through Mwanza, including trucks contracted by the WFP to bring supplies to more than four million hungry people in the drought-stricken country. Truckers are considered among the most at risk of contracting and transmitting HIV because of their mobility and exposure to casual sex.

South African trends

According to a survey (The impact of HIV/AIDS on selected business sectors in South Africa, 2005) conducted by the Bureau for Economic Research and funded by the South African Business Coalition on HIV & AIDS (SABCOHA), the mining, manufacturing and transport & storage sectors, are the worst affected among the sectors surveyed. The survey indicated that 81% of the financial services companies, 60% of the mines and about 50% of the manufacturing and transport companies surveyed have an HIV/AIDS policy in place. However, less than a third of the retailers, wholesalers, vehicle dealers and building and construction companies have implemented an HIV/AIDS policy. Approximately 44% of the companies surveyed indicated that they believe that the private sector’s response has been either lacking or completely inadequate. Two-thirds of mines and between 50% and 60% of the manufacturing, transport and financial services companies surveyed indicated that HIV/AIDS has already reduced labour productivity or increased absenteeism among employees. In the case of the impact of HIV/AIDS on employee benefit costs, the financial services sector appears to have been the hardest hit of all sectors surveyed, followed by the transport, mining and manufacturing sectors.

The Actuarial Society of South Africa recently released the new version of its AIDS and Demographic model that provides insight into the state of the HIV epidemic in each province in South Africa. According to ASSA2003, 5.2 million people in South Africa are currently living with HIV, reflecting an HIV-prevalence level of 11%. Approximately 530 000 new HIV infections and 340 000 AIDS deaths occurred between mid-2004 and mid-2005. Since the number of new HIV infections currently exceeds the number of AIDS deaths, HIV-prevalence is still slowly growing in South Africa. ASSA2003 estimates that approximately 1.5 million South Africans have died from AIDS-related illnesses since the start of the epidemic, and projects that the total number of HIV infections in the country will increase slightly from 5.2 million in 2005 to 5.8 million by 2010. On a provincial basis, KwaZulu-Natal is the worst affected province with an HIV-prevalence rate of 16% and an average life expectancy at birth of 43.3 years. Other severely affected provinces are Gauteng, Free State and Mpumalanga. At mid-2005, the proportion of AIDS-sick people on antiretroviral treatment ranged from 15% in KwaZulu-Natal to 50% in the Western Cape.

According to the South African national HIV prevalence, HIV incidence, behaviour and communication survey 2005, a household survey commissioned by the Nelson Mandela Foundation and published by the Human Sciences Research Council, 10.8% of the South African population aged 2 years and older are currently HIV positive, compared with 11.4% in the 2002 survey. On a racial basis, 13.3% of Africans aged 2 years and older (compared with 12.9% in 2002), 0.6% of whites and 1.9% of coloureds (both significantly lower than the 6.2% and 6.1% in 2002) and 1.6% of Indians (1.6% in 2002) are infected with HIV.

An intensive and practical two-day strategic management development course titled Implementing effective HIV/AIDS workplace strategies will be presented in February 2006 in Pretoria by the International Quality & Productivity Centre (IQPC). For more information on the course go to the IQPC website (www.iqpc.co.za).