

Track 3 – Epidemiology and prevention

Rapporteurs:

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Track Sessions

1. Epidemiology of prevention
2. Combination prevention – Biomedical approaches
3. Combination prevention – Social and Behaviour Change Communication
4. Gender and social norms



Main themes - Epidemiology

1. Elaborating epidemiology of key populations for targeted interventions
 - *Epidemiology of a Metro* – limited information for Durban planning use although highest prevalence Metro in SA and equivalent scale to Lesotho + Botswana epidemic
 - *MSM in small towns* - 4-5% of population; high vulnerability and linkages to epidemic in women
 - *Farm workers* – need to prioritise groups such as seasonal workers and certain provinces/areas; challenge of access to services
 - *Hep B in Pregnant women* – new needs to integrate into maturing HIV interventions?
 - *Tertiary students* - relatively low HIV prevalence but high risk behaviour

Main themes - Epidemiology(2)

2. Refining understanding of “core” epidemiology
 - *Low participation of people who know their HIV status* can lead to under-estimates of prevalence in sero-surveys
 - *Modelling suggests STI treatment DOES reduce incidence* but modest effect late in epidemics. RCTs do not have sufficient power to pick it up
 - STI treatment is still important for HIV and other reasons; treat HSV?
 - *Infection of pregnant women* after initial ANC tests
3. Clear evidence of declining HIV & all cause mortality rates at population level
4. Negative impact (e.g.transactional sex, abuse) on children with sick parents not just orphans
5. Negative effects of ART sites with high patient load – more loss to follow-up and poorer viral suppression

Main themes - prevention

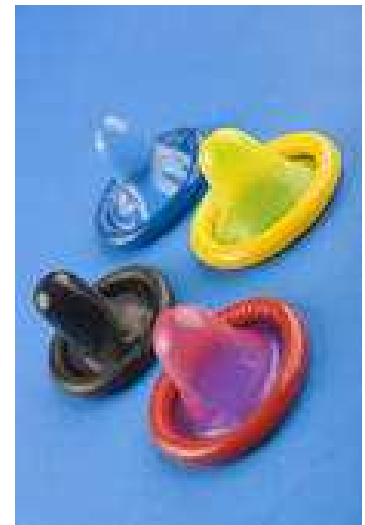
1. Priority of prevention – treatment is unsustainable with ongoing high incidence
2. Successes
 - I. PMTCT coverage and declining transmission – national MTCT now <5% but large provincial and local variation
 - II. Clear shifts in knowledge, attitude and reported behaviours
3. Need to reinforce and upscale in order to shift social norms and ensure impact on incidence
 - Destructive social norms among youth, men conducive to MCP, transactional and intergenerational sex



Main themes – prevention (2)

4. Stronger understanding of how to address norms and risk situations
 - Differentiating sub-groups within MCP; reasons for behaviour transitions at different stages of life
 - How “cultural norms” positions can be converted to more actionable discussions of risk and how to reduce it
 - Slang discourse and pressures among youth

Avoid interventions designed for “laboratory environments” abstracted from social reality of people, and why and how they act



Main themes – prevention (3)

5. Confirming effects of prevention SBCC initiatives

- Need for evidence based interventions and tight M&E
- RCT and biological end points probably not needed or feasible

6. Combination prevention –social, behavioural, biomedical and structural interventions are needed

- Artificial choice between “biomedical” and “social/ behaviour change” strategies
 - Neither is sufficient without the other and need to maximise synergy
- Need and frameworks exist for prioritised, strategic combination approaches and multiple methods

Combination prevention

“No magic bullets”

“Just because we only have a hammer in our own toolbox does not mean that we should see everything as a nail”

Main themes – prevention (4)

7. Medical Male Circumcision

- Men at highest risk may not actually be getting MMC?
- Health workers have concerns about disinhibition
- KZN - limited uptake of OPD MMC: need to offer at MMC points where uptake is high

8. Mental health / psycho-social issues can affect intervention outcomes

- Depression and suicide risk among HIV+ mothers and other pregnant women
- Concurrent pregnancy and HIV diagnosis hinders disclosure especially with high unplanned pregnancy rates

Main themes – prevention (5)

9. SA men's attitudes to microbicide use
 - Generally supportive BUT some worry about disempowerment, increasing “promiscuity” of women, lower condom use
 - Involve men and consider their responses in messaging

Issues requiring further attention

- Clarifying the place of Treatment as Prevention - effective, feasible strategies?
- Economic analyses of prevention options – needed to achieve an optimal mix with available resources
- Positive prevention – operationalising ideas
- Are we doing enough, and in the right way, to support youth to protect themselves??

ANSWER THE QUESTION:
..WHERE DID YOU SLEEP
LAST NIGHT?



11-10-08
ZAPIRO