

Demographic Indicators

	With AIDS Series	Without AIDS Scenario		With AIDS Series	Without AIDS Scenario
Population (1,000s)	48,783	53,679	Growth rate	0.8	2.0
Crude birth rate	20	21	Crude death rate	17	6
Infant mortality rate			Life expectancy		
Both sexes	45	24	Both sexes	49	71
Male	49	28	Male	50	69
Female	41	19	Female	48	74

Total fertility rate		2.4			
Estimated percentage of adults living with HIV		17.8			
Estimated new AIDS cases		594,053			
Estimated AIDS deaths		551,113			
Percent urban (2007)		53			

Note: Indicators are for 2008 unless otherwise noted. The "With AIDS Series" shows an estimate of demographic indicators in the country including AIDS mortality. The "Without AIDS Scenario" reflects a hypothetical population if the country was not affected by the AIDS epidemic.

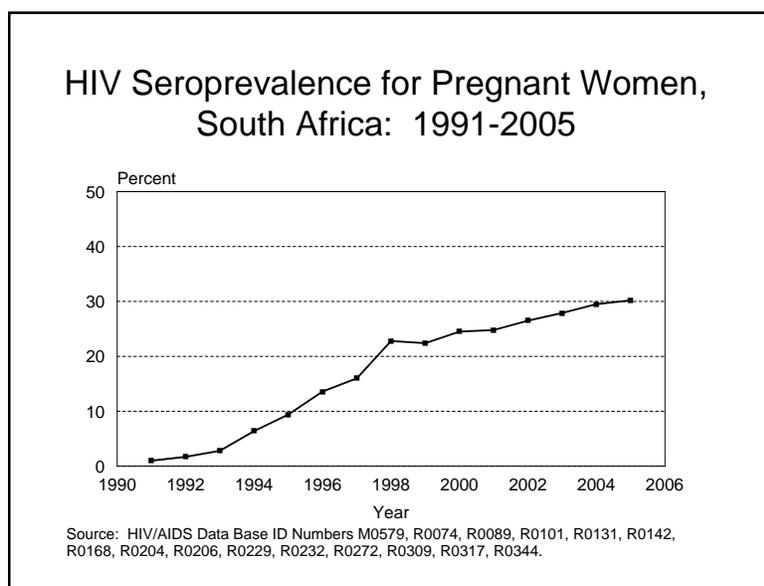
Sources: U.S. Census Bureau, International Data Base and unpublished tables. "Percent urban" from the Population Reference Bureau.

Epidemiological Data

Epidemic State: Generalized

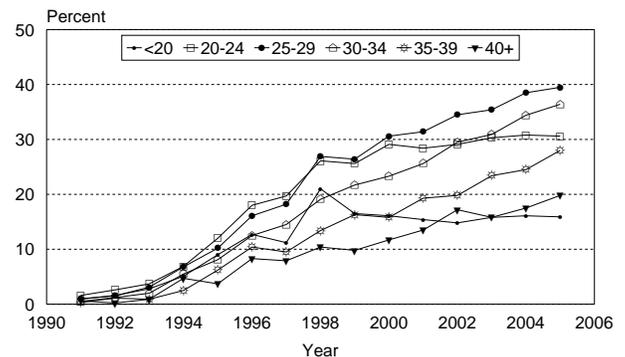
The epidemic began in South Africa much later than it did in other countries in Sub-Saharan Africa. But, by the mid-1990s, prevalence among pregnant women was increasing tremendously. South Africa is now facing one of the most serious HIV epidemics in the world, with an estimated 18 percent of adults HIV positive. Population-based surveys have found rates between 10 percent and 15 percent among adults in most provinces. Prevalence among pregnant women continues to increase, with a third of pregnant women tested HIV positive in many provinces, and high levels are still found in high-risk groups.

By the mid-1990s, the HIV epidemic had expanded among pregnant women tested in South Africa and rates continue to increase. Almost one-third of all pregnant women tested in all nine provinces were HIV positive in 2005.



Sentinel surveillance data show that HIV seroprevalence levels increased among all age groups of pregnant women tested during the 1990s. Rates were highest among pregnant women in their twenties. From 2000 to 2005, levels for those under 20 and ages 20 to 24 appeared to stabilize at 16 percent and 30 percent respectively, while levels in the older age groups continued to increase. In 2005, 40 percent of pregnant women ages 25 to 29 were HIV positive, the highest rate among all age groups.

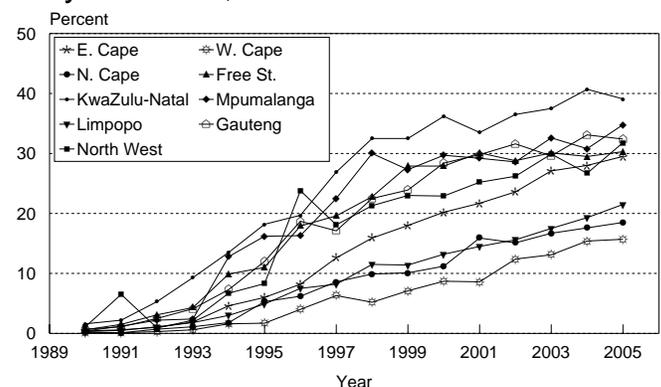
HIV Seroprevalence for Pregnant Women, by Age, South Africa: 1991-2005



Source: HIV/AIDS Data Base ID Numbers M0579, R0074, R0089, R0101, R0131, R0142, R0168, R0204, R0206, R0229, R0232, R0272, R0309, R0317, R0344.

Annual sentinel surveillance surveys among pregnant women in all nine provinces of South Africa show a steady increase in HIV seroprevalence since 1990. In 2005, KwaZulu-Natal Province had the highest prevalence rate at 40 percent. Rates for the other provinces in 2005 ranged from 16 percent in Western Cape to 35 percent in Mpumalanga.

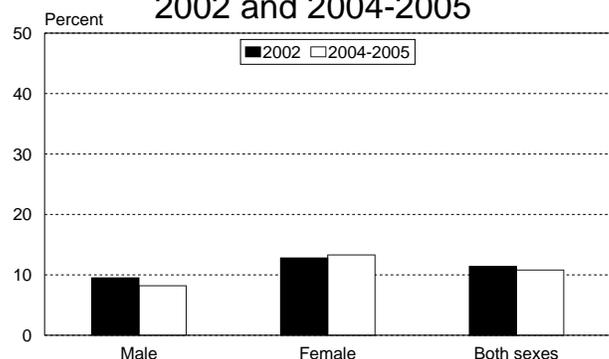
HIV Seroprevalence for Pregnant Women, by Province, South Africa: 1990-2005



Source: HIV/AIDS Data Base ID Numbers M0579, R0066, R0074, R0089, R0101, R0131, R0142, R0168, R0204, R0206, R0229, R0232, R0272, R0309, R0317, R0344.

Two population-based surveys conducted in 2002 and 2004-2005 tested the general population, including children ages 2 to 14. Results show HIV prevalence at 11 percent, with the rate for females higher than males in both years.

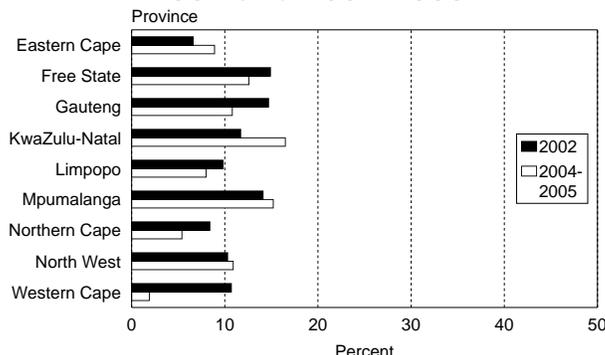
HIV Seroprevalence for the General Population, by Sex, South Africa: 2002 and 2004-2005



Source: HIV/AIDS Data Base ID Numbers S0671, S0778.

Rates were lower among the general population in the 2004-2005 survey compared with 2002 in five of the nine provinces, with the biggest decline occurring in Western Cape from 11 percent in 2002 to 2 percent in 2004-2005. KwaZulu-Natal had the highest HIV prevalence at over 16 percent in 2004-2005.

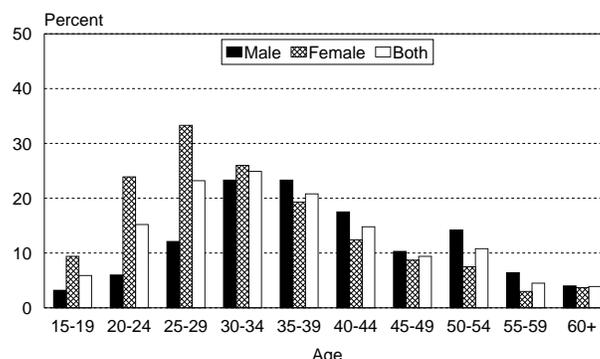
HIV Seroprevalence for the General Population, by Province, South Africa: 2002 and 2004-2005



Source: HIV/AIDS Data Base ID Numbers S0671, S0778.

HIV prevalence was higher for females in the younger age groups, with the highest rate occurring in females ages 25 to 29, approximately 33 percent. Twelve percent of males in the same age group were HIV positive. Prevalence for males was higher in the older age groups, with peak prevalence occurring among those in their thirties at 23 percent.

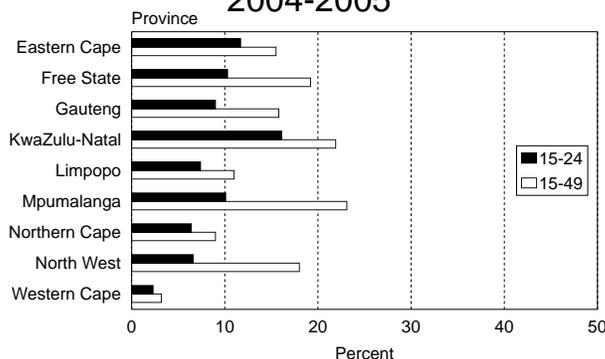
HIV Seroprevalence for Adults, by Age and Sex, South Africa: 2004-2005



Source: HIV/AIDS Data Base ID Number S0778.

Western Cape had the lowest HIV prevalence among the nine provinces for adults, 3 percent, and young adults, 2 percent. In the other provinces, the adult HIV rates ranged from 9 percent in Northern Cape to 23 percent in Mpumalanga and the rates for young adults ranged from 6 percent in Northern Cape and North West to 16 percent in KwaZulu-Natal.

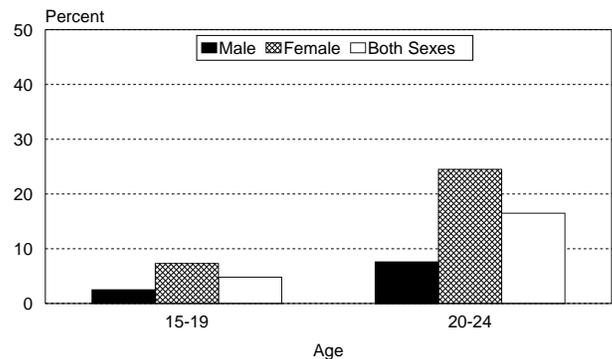
HIV Seroprevalence for Adults, by Age and Province, South Africa: 2004-2005



Source: HIV/AIDS Data Base ID Number S0778.

A national household survey of young adults, ages 15 to 24, conducted in 2003 found 10 percent HIV positive, 5 percent for males and over 15 percent for females. Rates were higher for females than males ages 15 to 19 and 20 to 24. Almost one-fourth of females in their early twenties were HIV positive compared to nearly 8 percent of males the same age.

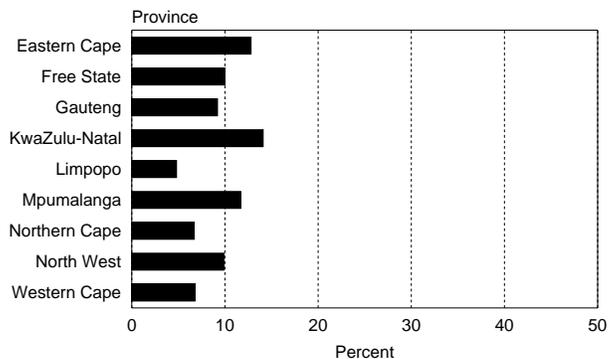
HIV Seroprevalence for Young Adults, by Age and Sex, South Africa: 2003



Source: HIV/AIDS Data Base ID Number P0288.

KwaZulu-Natal had the highest HIV prevalence, 14 percent, for young adults in 2003 among the nine provinces in South Africa. The lowest was found in Limpopo at 5 percent.

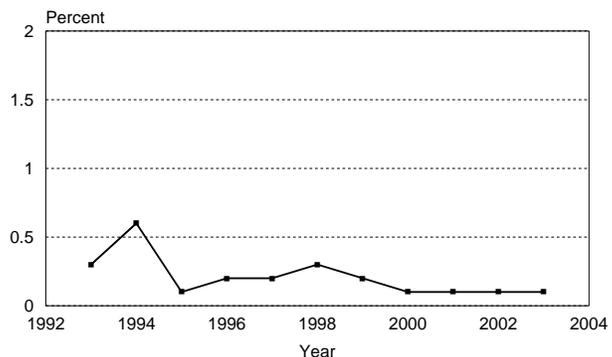
HIV Seroprevalence for Young Adults, by Province, South Africa: 2003



Source: HIV/AIDS Data Base ID Number P0288.

Despite a slight spike in HIV prevalence among blood donors in 1994, rates have remained well below 1 percent and have declined further since 1999, most likely due to stricter screening practices.

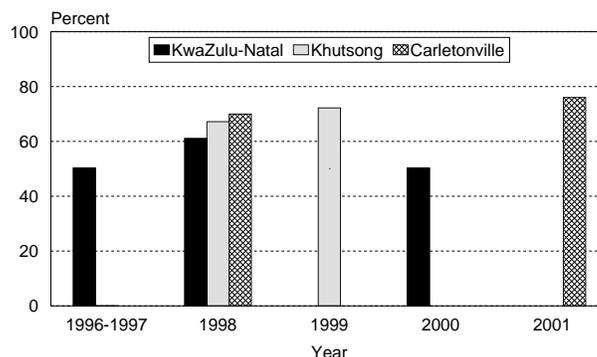
HIV Seroprevalence for Blood Donors South Africa: 1993-2003



Source: HIV/AIDS Data Base ID Numbers D0205, H0250, R0128.

High rates of HIV prevalence among sex workers were found in three areas of South Africa from 1996 to 2001. About three-fourths of sex workers tested were positive in Khutsong in 1999 and Carletonville in 2001. Half of those tested in KwaZulu-Natal were HIV positive in 2000.

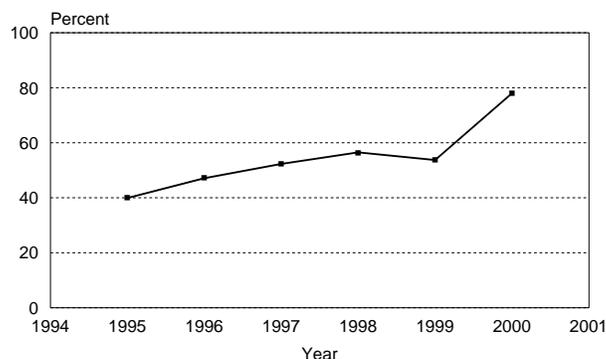
HIV Seroprevalence for Sex Workers, in Three Areas, South Africa: 1996-2001



Source: HIV/AIDS Data Base ID Numbers M0561, M0677, N0343, R0180, V0111, W0222.

High rates of HIV prevalence have also been found among people seeking treatment for sexually transmitted infections (STI) in Durban. Rates steadily increased, from 40 to 60 percent from 1995 to 1998, but jumped to almost 80 percent in 2000.

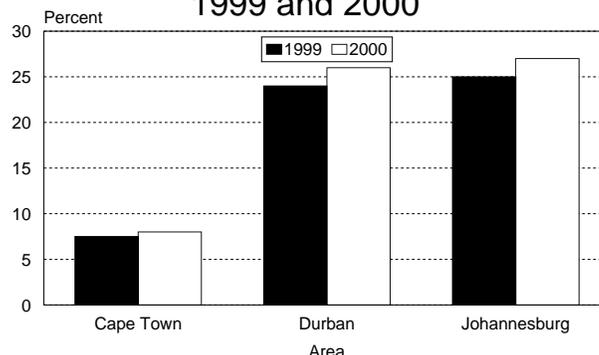
HIV Seroprevalence for STI Patients, in Durban, South Africa: 1995-2000



Source: HIV/AIDS Data Base ID Numbers M0692, S0572.

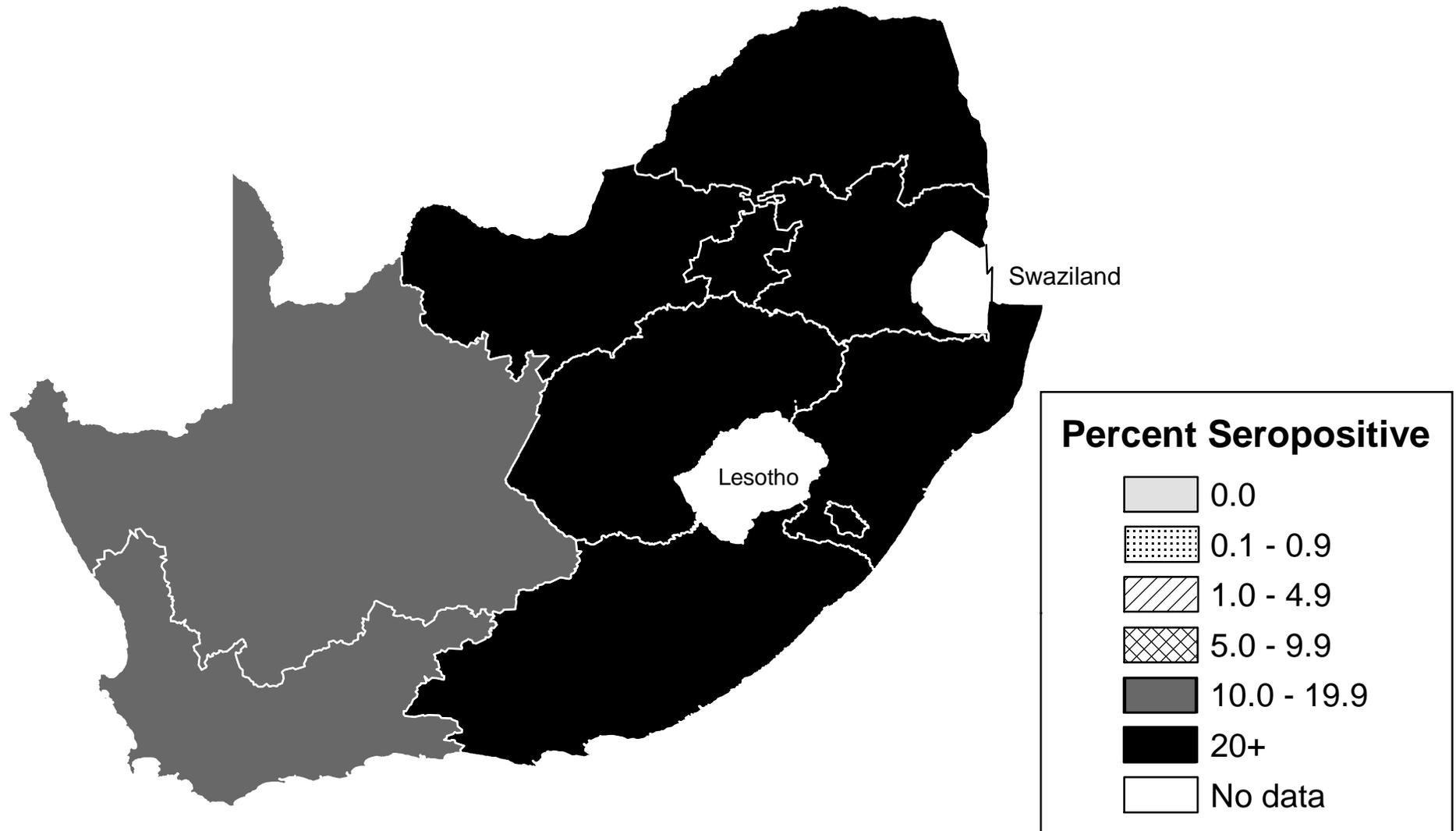
For prisoners tested in Cape Town, Durban, and Johannesburg HIV prevalence remained stable from 1999 to 2000. Over a quarter of prisoners tested in Durban and Johannesburg were HIV positive in 2000. Cape Town had the lowest rate for both years at 8 percent.

HIV Seroprevalence for Prisoners, in Selected Areas, South Africa: 1999 and 2000



Source: HIV/AIDS Data Base ID Number V0107.

Seroprevalence of HIV for Pregnant Women, by Province, in South Africa: 2005



Sources by HIV/AIDS Data Base ID Number:

- D0205 Datakonsult, 1993, Report on Blood Transfusion Service, World Health Organization, Global Program on AIDS, report.
- H0250 Heyns, A. P., R. J. Benjamin, J. P. Ronel Swanevelder, et al., 2006, Prevalence of HIV-1 in Blood Donations Following Implementation of a Structured Blood Safety Policy in South Africa, Journal of the American Medical Association, vol. 295, no. 5, pp. 519-526.
- M0561 Morar, N. S., G. Ramjee, S. S. Abdool Karim, 1998, Safe Sex Practices among Sex Workers at Risk of HIV Infection, 12th World AIDS Conference, Geneva, 6/28 - 7/3, Poster 33287.
- M0579 Makubalo, L. E., 1998, Eighth Annual National HIV Sero-Prevalence Survey of Women Attending Antenatal Clinics in South Africa 1997, Department of Health, Health Systems Research and Epidemiology, June, report.
- M0677 Marais, D. J., E. Vardas, G. Ramjee, et al., 2000, The Impact of Human Immunodeficiency Virus Type 1 Status on Human Papillomavirus (HPV) Prevalence and HPV Antibodies in Serum and Cervical Secretions, Journal of Infectious Diseases, vol. 182, no. 4, pp. 1239-1242.
- M0692 Moodley, P., D. Wilkinson, P. D. J. Sturm, et al., 2001, Association between HIV-1 Infection, the Aetiology of Genital Ulcer Disease and Response to Syndromic Management, Presented at International Congress of Sexually Transmitted Infections, ISSTD/IUSTI, Berlin, Germany, 24-27 June 2001, Abstract in International Journal of STD & AIDS, vol. 12, suppl. 2, pp. 106-107.
- N0343 Ndhlovu, L., J. Van Dam, C. Searle, 2003, The HIV Environment and Risk Factors for Different Community Members in a Mining Town of Carletonville, South African AIDS Conference, Durban, South Africa, 8/3-6, Abstract T3-P8.
- P0288 Pettifor, A. E., H. V. Rees, A. Steffenson, et al., 2004, HIV and Sexual Behaviour among Young South Africans: A National Survey of 15-24 Year Olds, Reproductive Health Research Unit, University of the Witwatersrand, Johannesburg, report.
- R0066 RSA Department of National Health and Population Development, 1991, First National HIV Survey of Women Attending Antenatal Clinics, South Africa, October/November 1990, Epidemiological Comments, vol. 18, no. 2, pp. 35-44.
- R0074 RSA Department of National Health and Population Development, 1992, Second National HIV Survey of Women Attending Antenatal Clinics, South Africa, October/November 1991, Epidemiological Comments, vol. 19, no. 5, pp. 80-92.
- R0089 RSA Department of National Health and Population Development, 1993, Third National HIV Survey of Women Attending Antenatal Clinics, South Africa, October/November 1992, Epidemiological Comments, vol. 20, no. 3, pp. 35-50.
- R0101 RSA Department of National Health and Population Development, 1994, Fourth National HIV Survey of Women Attending Antenatal Clinics, South Africa, October/ November 1993, Epidemiological Comments, vol. 21, no. 4, pp. 68-78.
- R0128 RSA Department of Health, 1994, Blood Donor Surveillance by All the Blood Transfusion Services in the RSA, Epidemiological Comments, vol. 21, no. 11, p. 232.
- R0131 RSA Department of Health, 1995, Fifth National HIV Survey in Women Attending Antenatal Clinics of the Public Health Services in South Africa, Oct./Nov. 1994, Epidemiological Comments, vol. 22, no. 5, pp. 90-100.
- R0142 RSA Department of Health, 1996, Sixth National HIV Survey of Women Attending Antenatal Clinics of the Public Health Services in the Republic of South Africa, October 1996, Epidemiological Comments, vol. 23, no. 1, pp. 3-16.

Sources by HIV/AIDS Data Base ID Number:

- R0168 RSA Department of Health, 1997, Seventh National HIV Survey of Women Attending Antenatal Clinics of the Public Health Services in the Republic of South Africa, October/November 1996, Epidemiological Comments, vol. 23, no. 2, pp. 4-16.
- R0180 Ramjee, G., S. S. Abdool Karim, A. W. Sturm, 1998, Sexually Transmitted Infections among Sex Workers in KwaZulu-Natal, South Africa, Sexually Transmitted Diseases, vol. 25, pp. 346-349.
- R0204 RSA Department of Health, 1999, 1998 National Antenatal HIV Sero-Prevalence Survey in South Africa, Health Systems Research and Epidemiology, Department of Health, Republic of South Africa, Final report.
- R0206 RSA Department of Health, 2000, 1999 National HIV Sero-Prevalence Survey of Women Attending Public Antenatal Clinics in South Africa, Health Systems Research and Epidemiology, Department of Health, Republic of South Africa, Summary report.
- R0229 RSA Department of Health, 2001, 2000 National HIV and Syphilis Sero-Prevalence Survey of Women Attending Public Antenatal Clinics in South Africa, Department of Health, Republic of South Africa, report.
- R0232 RSA Department of Health, 2002, 2001 National HIV and Syphilis Sero-Prevalence Survey of Women Attending Public Antenatal Clinics in South Africa, Department of Health, Republic of South Africa, Summary report.
- R0272 RSA Department of Health, 2003, National HIV and Syphilis Antenatal Sero-Prevalence Survey in South Africa: 2002, Department of Health, Republic of South Africa, Summary report.
- R0309 RSA Department of Health, 2004, National HIV and Syphilis Antenatal Sero-Prevalence Survey in South Africa: 2003, Department of Health, Republic of South Africa, Summary report.
- R0317 RSA Department of Health, 2005, National HIV and Syphilis Antenatal Sero-Prevalence Survey in South Africa: 2004, Department of Health, Republic of South Africa, Summary report.
- R0344 RSA Department of Health, 2005, National HIV and Syphilis Prevalence Survey South Africa: 2005, Department of Health, Republic of South Africa, Summary report.
- S0572 Smith, A., 2000, HIV/AIDS in KwaZulu-Natal and South Africa, AIDS Analysis Africa, vol. 11, no. 1, pp. 5-9.
- S0671 Shisana, O., L. Simbayi, D. Phil, et al., 2002, Nelson Mandela/HSRC Study of HIV/AIDS, South African National HIV Prevalence, Behavioural Risks and Mass Media: Household Survey 2002, The Nelson Mandela Foundation, The Nelson Mandela Children's Fund, Swiss Agency for Development and Cooperation, The Human Sciences Research Council (HSRC), report.
- S0778 Shisana, O., T. M. Rehle, L. C. Simbayi, et al., 2005, South African National HIV Prevalence, HIV Incidence, Behaviour and Communication Survey, 2005, Nelson Mandela Foundation, Human Sciences Research Council, Cape Town, South Africa, report
- V0107 Vardas, E., C. Parry, A. Pluddermann, et al., 2000, The Prevalence of HIV Infection in South African Arrestees, XIII International AIDS Conference, Durban, South Africa, 7/9-14, Poster MoPeC2445.
- V0111 Van Dam, J., R. Ballard, G. Neilssen, et al., 2000, STD and HIV Infection in Carletonville, South Africa: A Community-Based Survey, XIII International AIDS Conference, Durban, South Africa, 7/9-14, Poster WePeC4391.
- W0222 Williams, B. G., C. MacPhail, C. Campbell, et al., 2000, The Carletonville-Mothusimpilo Project: Limiting Transmission of HIV Through Community-Based Interventions, South African Journal of Science, vol. 96, pp. 351-359.