



Advancing HIV management in South Africa: challenges and opportunities in achieving the 95-95-95 goals

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South Africa has made significant strides in HIV management, yet challenges persist in achieving the UNAIDS 95-95-95 goals. The country's HIV response is guided by the National Strategic Plan for HIV, TB and STIs 2023–2028, which aligns with global targets.¹ Despite progress, South Africa faces complex obstacles in fully realising these ambitious objectives.

Recent data from the Sixth South African National HIV Prevalence, Incidence, and Behaviour Survey (SABSSM VI) indicates that HIV prevalence in South Africa has decreased from 14.0% in 2017 to 12.7% in 2022, translating to approximately 7.8 million people living with HIV in 2022.² This reduction is attributed to various factors, including fewer new infections, more children born HIV-negative, and improved life expectancy for people living with HIV.

The South African government has implemented several policy changes to enhance HIV management. A notable initiative is the Pharmacy Initiated Management of Antiretroviral Therapy (PIMART) program, approved by the South African Pharmacy Council in 2020.³ PIMART aims to expand access to HIV services by allowing trained pharmacists to prescribe antiretrovirals. However, the implementation of PIMART is currently on hold due to legal challenges and ongoing multi-council consultations.

Progress towards the 95-95-95 goals has been mixed. SABSSM VI revealed that among people aged 15 years and older living with HIV in South Africa in 2022, 90% were aware of their status, 91% of those aware were on antiretroviral treatment (ART), and 94% of those on ART were virally suppressed.² While these figures show improvement from 2017, they fall short of the 95-95-95 targets.

Several factors contribute to the challenges in reaching these goals. Treatment disengagement is a significant issue, with an estimated one million people living with HIV who have previously taken ART not currently on treatment.⁴ This highlights the need for improved retention strategies and support systems for individuals on ART.

Another concern is late initiation of treatment. In 2023, over 46 000 adults started taking ART only after their CD4 counts had dropped below 200 cells per cubic millimetre of blood, indicating a compromised immune system.⁵ This suggests that despite wide-

spread HIV testing, a subset of the population is not accessing treatment in a timely manner.

Gender disparities also pose challenges. Women, particularly adolescent girls and young women aged 15–24, remain disproportionately affected by HIV.⁶ Biological factors, societal norms, and behavioural patterns contribute to their increased vulnerability.

Declining condom use is another worrying trend. Overall condom usage in South Africa decreased from 38.5% in 2017 to 31.8% in 2022.² This decline in preventive measures could potentially lead to an increase in new infections if not addressed.

The South African government has recognised these challenges and is implementing various strategies to overcome them. These include targeted interventions for key populations, expansion of community-based HIV services, and integration of HIV care into primary healthcare systems.⁴ The government is also exploring innovative approaches such as long-acting injectable antiretroviral therapy, which has shown promise in improving treatment adherence.

In conclusion, while South Africa has made substantial progress in HIV management, achieving the 95-95-95 goals requires addressing multiple complex factors. Continued efforts in policy implementation, community engagement, and innovative treatment approaches are essential to overcome the remaining obstacles and ultimately end the HIV epidemic in South Africa.

As we reflect on the progress in HIV care, we must also acknowledge the contributions of those who have dedicated their lives to the pharmacy profession. It is with great sadness that we note the passing of David Sieff, a pillar of the South African pharmacy community.⁷ David's unwavering commitment to the profession, particularly his work as editor of the Golden Mortar publication, has left an indelible mark on pharmacy practice in South Africa.⁸

David Sieff's career spanned all sectors of pharmacy, from community practice to hospital and hospice care. His numerous awards, including Honorary Life Memberships and the prestigious Julius Israelsohn award, testify to his distinguished career and significant contributions to the field.⁷ David's passion for learning, commitment to patients,

and tireless efforts in pharmacy education serve as an inspiration to all in the profession.

As we continue to strive towards ending the HIV epidemic, we can draw inspiration from dedicated professionals like David Sieff. Their commitment to patient care and professional excellence sets a high standard for all pharmacists to aspire to in our ongoing fight against HIV/AIDS.

As we approach the festive season, we extend warm wishes to all our readers. May the New Year bring renewed hope, improved health outcomes, and continued progress in our collective efforts against HIV/AIDS.

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