



health

Department:  
Health  
REPUBLIC OF SOUTH AFRICA

## **SOUTH AFRICA'S HIV RESPONSE RESTORES DONOR CONFIDENCE**

**Durban, South Africa: 20 July 2016-** South Africa's accelerated response to HIV has restored the confidence of international HIV/AIDS financing institution, The Global Fund as well as the United States of America in the country as a fitting recipient of funds to help fight the spread of HIV/AIDS.

This came to light late last night at the International Aids Conference taking place this week in Durban, where representatives from The Global Fund and the US shared the stage with South Africa's Minister of Health Dr Aaron Motsoaledi in a panel discussion about how South Africa will finance its ambitious plan to have an Aids-free generation by 2030.

One of the most notable areas of improvement is the provision of ARV treatment to HIV positive patients. In the twelve years between 2004 and 2016 South Africa has increased the number of people who receive ARVs from 400 000 to over 3.4 million people. The country runs what has become the biggest HIV treatment programme in the world, with more than 12 million people tested in 2015 and close to 170 000 babies tested at the crucial six-weeks stage.

Referring to these achievements, United States Global Aids Coordinator Deborah Birx said: "This is not the time to withdraw HIV/AIDS funding from South Africa. It is a time to support the country in the fight against this pandemic.

The sentiment was echoed by Mark Dybul of The Global Fund who added that the time is right for South Africa to start thinking of other creative ways to raise funds to finance its fight against HIV/AIDS such as targeted taxation and even money markets.

The pledge of support, however, did not come without any conditions. Donors will now put a lot of emphasis on efficiency as a criterion, determining their financial contribution on how much the necessary intervention should cost instead of how much it cost in the past.

Responding to this, Minister Motsoaledi said South Africa has already moved to ensure optimum efficiency in its HIV/AIDS interventions. The Minister cited as an example the reduction in the price of ARV drugs from approximately R10,000 per person per year to around R1,728 per person, which South Africa was able to lobby from manufacturers. This was reduced even further with the introduction of single-dose ARV treatment. “We intend to do the same in other areas, like in the treatment of cancer, which we believe can be much cheaper.”

Other areas where the Department of Health is looking to improve efficiencies is in procurement of equipment, pathology services, pharmaceuticals and its human resource policy. These are the four main cost drivers of any healthcare system.

Minister Motsoaledi emphasised the importance of striking a balance between the human resources for health and the burden of disease that the country is facing. He said: “We cannot let high cost specialist workers do work that can be done by low cost workers. Community healthcare workers, for instance, should be the heartbeat of our primary healthcare system, which in turn forms the basis for the creation of a healthy society. What is needed is to right-skill the crop of community healthcare workers that we currently have so they can fulfil this important role.”

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