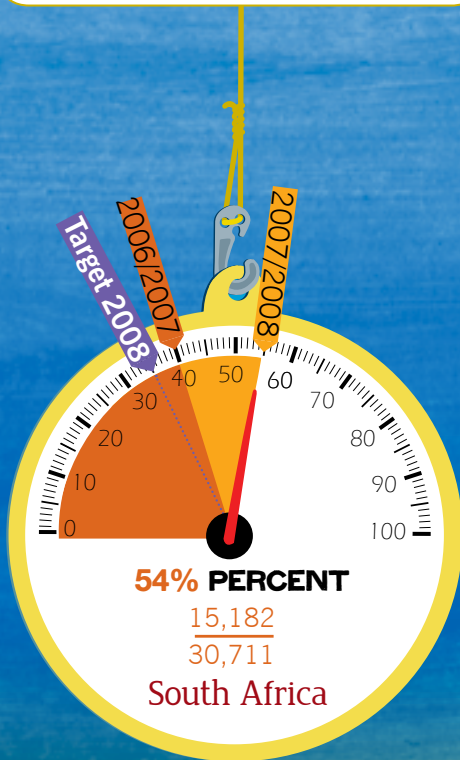


7. Maternal health

The proportion of **women progressing to AIDS who start antiretroviral treatment.**



What do these figures mean for children?

AIDS is the leading cause of death in women below the age of 49 years. Many of these deaths can be prevented if women have access to antiretroviral treatment (ART). ART keeps mothers and other caregivers alive and healthy for longer, which means that they are better able to care for their children. Over the last year, many more women in South Africa have been able to get antiretroviral treatment. However, there are also many more that still need treatment.

The proportion of women progressing to AIDS who access ART in South Africa has increased from 40% over the period from mid-2006 to mid-2007, to 54% over the period from mid-2007 to mid-2008.

In both 2007 and 2008, the proportion of women starting ART was higher than the National Strategic Plan's target for adult treatment uptake. This was set at 24% in 2007, and 35% in 2008.

Despite the good progress, much more needs to be done to ensure that all women who need treatment are able to get it. Between mid-2007 and mid-2008, 120,000 women who developed AIDS did not start treatment.

Women's access to treatment varies greatly between provinces, although all provinces have exceeded the treatment target of 35% for 2008. Rates of access range from over 75% in the Northern Cape and Western Cape to as low as 41% in the Free State.

What other information do we need to monitor anti-retroviral treatment for women?

It is not good enough to only be monitoring how many women start treatment.

We also need to monitor:

- the age at which women start treatment
- the extent to which they are surviving
- how many are continuing to take their medication.

Unfortunately, the Department of Health is not currently collecting this information at a national level, although the information is being collected in certain sentinel sites.

Technical notes

Numerator: Number of women starting antiretroviral treatment, over a given year.

Data source: Department of Health (public sector data), Adam and Johnson (2009) (disease management programmes and NGO services).

Denominator: Number of new AIDS cases in women, over the same period.

Data source: The ASSA2003 AIDS and Demographic model (Dorrington et al, 2006)

Strengths and limitations of data

A key strength of this analysis is that it combines antiretroviral treatment data from the public, private and NGO sectors. However, there are some odd trends for province-specific public sector data which suggest reporting errors or changes in indicator definitions. Private sector data gaps mean that the number of women on treatment could be under-estimated.

The proportion of women progressing to AIDS who start ART, in 2006/2007 and 2007/2008

