Children’s HIV / AIDS Scorecard

Turning Statistics into Knowledge for Advocacy

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Overview

- HIV/AIDS in SA
- About the Scorecard – ‘logic chain’
- Shifting the balance of information
- Challenges
- Presentation
HIV/AIDS in South Africa

- In 2009, HIV prevalence in general population was estimated at 17.8%
  - 5.3 million ‘adults’ > 15 years (62% women)
  - 334,000 HIV-positive children <15 years
- In 2009, an estimated 314,000 South Africans died of AIDS – including 30,000 children
- Provincial variability: 6.2% in WC vs 25% in KZN
Country response

- Government slow to respond – emergence of large civil society contingent to ‘fill the gap’
- National HIV and AIDS and STI Strategic Plan (2007-2011) now provides overarching framework to guide prevention, treatment, care and support
- Civil society plays important role in implementation, monitoring and evaluation
- Children’s Sector activities co-ordinated by Yezingane Network
Yezingane Network

- The network provides
  - platform for engaging on issues of concern to children
  - unified voice for children at the highest levels of governance

- Plays active role in National Strategic Plan

- HIV/AIDS Scorecard (2009 +2) one of several outputs = to monitor implementation of the NSP

- Designed to build collective advocacy!
Children’s HIV/AIDS Scorecard

- Presents information on the extent to which we are achieving the targets of the NSP
- Focus on **few** critical indicators for **children**
- Contracts technical experts – leaders in each field
- Most accurate and current data on key indicators
- Compares data over time and btw provinces
- Compares progress against national targets
- Comments on appropriateness of targets
- Highlights information and action needed
Scorecard indicators

Prevention:
- Proportion of adolescent girls visiting antenatal clinics who test HIV-negative
- Proportion of HIV-positive pregnant women who access PMTCT services
- Proportion of babies born to HIV-positive mothers, who test HIV-negative
- Number of babies who die within their first year of life
- Proportion of eligible children given post-exposure prophylaxis (PEP) after rape

Treatment:
- Proportion of HIV-positive children who start antiretroviral treatment (ART)
- Proportion of women who start antiretroviral treatment

Care and Support:
- Number of social workers available to provide services to children and families
- Proportion of eligible children <1 year who receive the child support grant (CSG)

Leadership and Governance

[Logo: Yezingane Network]
‘Logic chain’ for Scorecard
Using evidence to improve service delivery for children

Important information (Statistics)
‘Logic chain’ for Scorecard
Using evidence to improve service delivery for children

Important information (Statistics) → Make it accessible (Knowledge)
‘Logic chain’ for Scorecard
Using evidence to improve service delivery for children

1. Important information (Statistics)
2. Make it accessible (Knowledge)
3. Put knowledge in the right hands – groundswell of informed activities
‘Logic chain’ for Scorecard
Using evidence to improve service delivery for children

Important information (Statistics) → Make it accessible (Knowledge) → Put knowledge in the right hands – groundswell of informed activities → Advocacy → Action → Accountability
‘Logic chain’ for Scorecard
Using evidence to improve service delivery for children

Important information (Statistics) → Make it accessible (Knowledge) → Put knowledge in the right hands – groundswell of informed activities

Improved services

Advocacy
Action
Accountability
‘Logic chain’ for Scorecard

Using evidence to improve service delivery for children

Important information (Statistics) → Make it accessible (Knowledge) → Put knowledge in the right hands – groundswell of informed activities

Improved services

Improved M&E

Advocacy
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‘Logic chain’ for Scorecard
Using evidence to improve service delivery for children

Important information (Statistics) → Make it accessible (Knowledge) → Put knowledge in the right hands – groundswell of informed activities

Better Child Outcomes ← Improved services ← Improved M&E

Advocacy
Action
Accountability

Yeizingane NETWORK
Shifting balance of information
Multiple information sources

Few technical experts
Multiple information sources

Few technical experts

Numerous NSP indicators (>100) for monitoring HIV/AIDS pandemic – encompassing adults and children
Technical experts

Indicators for monitoring HIV/AIDS pandemic – encompassing adults and children
Increase number and range of people with access to information

Technical experts

Indicators for monitoring HIV/AIDS pandemic – encompassing adults and children
Increase number and range of people with access to information

Focus on fewer, critical indicators for children

Indicators for monitoring HIV/AIDS pandemic – encompassing adults and children
Move from ...

Numerous indicators for monitoring HIV/AIDS pandemic – encompassing adults and children
Towards ...

Mass of child rights advocates with access to information

Focus on critical indicators for children
Multiple indicators (>100)

Child indicators ‘lost’ among adults

Poorly defined measures

Information in hands of few technical experts
Multiple indicators (>100)  
Focus on 10 critical indicators

Child indicators ‘lost’ among adults

Poorly defined measures

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Multiple indicators (>100)  Focus on 10 critical indicators

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Information in hands of few technical experts
Multiple indicators (>100) ➔ Focus on 10 critical indicators

Child indicators ‘lost’ among adults ➔ Focus on children

Poorly defined measures ➔ Clearly defined measures

Information in hands of few technical experts ➔
Multiple indicators (>100)  Focus on 10 critical indicators
Child indicators ‘lost’ among adults  Focus on children
Poorly defined measures  Clearly defined measures
Information in hands of few technical experts  Improve information access and popularise use of evidence at all levels.
Challenges

- Focus – which indicators?
- Data
  - Availability (national surveys / admin data)
  - Disaggregation
  - Quality
- Presentation (hard copy)
  - Technical rigor vs accessibility
  - Language
  - Graphics
6. Are children getting access to antiretroviral treatment?

The number of children under 15 starting antiretroviral treatment as a proportion of the number of new HIV infections in children.

<table>
<thead>
<tr>
<th>Province</th>
<th>2008</th>
<th>2009</th>
</tr>
</thead>
<tbody>
<tr>
<td>Eastern Cape</td>
<td>18%</td>
<td>17%</td>
</tr>
<tr>
<td>Free State</td>
<td>20%</td>
<td>20%</td>
</tr>
<tr>
<td>Gauteng</td>
<td>24%</td>
<td>22%</td>
</tr>
<tr>
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<td>34%</td>
</tr>
<tr>
<td>Western Cape</td>
<td>36%</td>
<td>39%</td>
</tr>
</tbody>
</table>

Data strengths:
- Combines antiretroviral treatment data from public, private and NGO sectors.
- Confirms antiretroviral treatment data from previous years.

Data limitations:
- The number of children on treatment could be underestimated.
- Some smaller disease management programmes have not provided data.
- It is not known how many people pay for their own treatment, outside of a recognised ART programme.

Other information needed:
- Access to treatment for 15-16 year olds. Children are defined in the South African Constitution as all people under the age of 18 years.
- The Department of Health data collection system defines children as 0-14 years.
- Service access and coverage for different children age group categories.
- Extent to which children are surviving on treatment and continuing to take their medication.

37% of children who require ARVs are currently receiving treatment compared to the target of 25%. However, there are big variations in access between provinces.

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NATIONAL
- 37%
- 25%

What does the NSP say about ART?
- The NSP target for pediatric treatment is 24,000 children starting on treatment during 2008. Duls aute iure dolor in reprehenderit in voluptate velit esse cillum dolore eu fugiat nulla pariatur.

How are we doing?
- Given that South Africa entitled 21,000 children on treatment between mid-2007 and mid-2008, it is likely we will reach our NSP target by the end of 2008.

Some discussion
- Access to treatment for children in South Africa has improved but a lot still needs to be done. Also, there are big variations between provinces. Half or more of the children born with HIV in Northern Cape, North West, Gauteng and Western Cape got treatment. The very high access of 97% in the Western Cape results from their successful PMTCT programme.

Actions we can take:
- Lorem ipsum dolor sit amet, consectetur adipiscing elit.
- Sed exiam tempor incididunt ut labore et dolore magna aliqua.
- Duis ad minim veniam, quis nostrud exercitation ullamco laboris nisi ut aliquip ex ea commodo consequat.

Without any intervention, more than 40% of children infected with HIV as babies will die before their first birthday.

The majority of children infected with HIV are infected at birth. ART coverage in children in South Africa increased from 3% between mid-2006 and mid-2007, to 6% between mid-2007 and mid-2008. This means that more than 21,000 children started treatment from mid-2007 to mid-2008, compared with less than 17,000 in the previous year.

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Oriented positively so higher bar = better
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- Sdo eiusmod tempor incididunt ut labore et dolore magna aliqua.
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Impact

• Improved access to information
• Critical engagement with information
• Encouraging greater focus on children as separate ‘category’ amongst technical experts
• Establishing critical relationships to inform data systems
• Informing policy reviews
• Informing policy development and resource allocation

……..Improving service delivery for children
Thank you

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