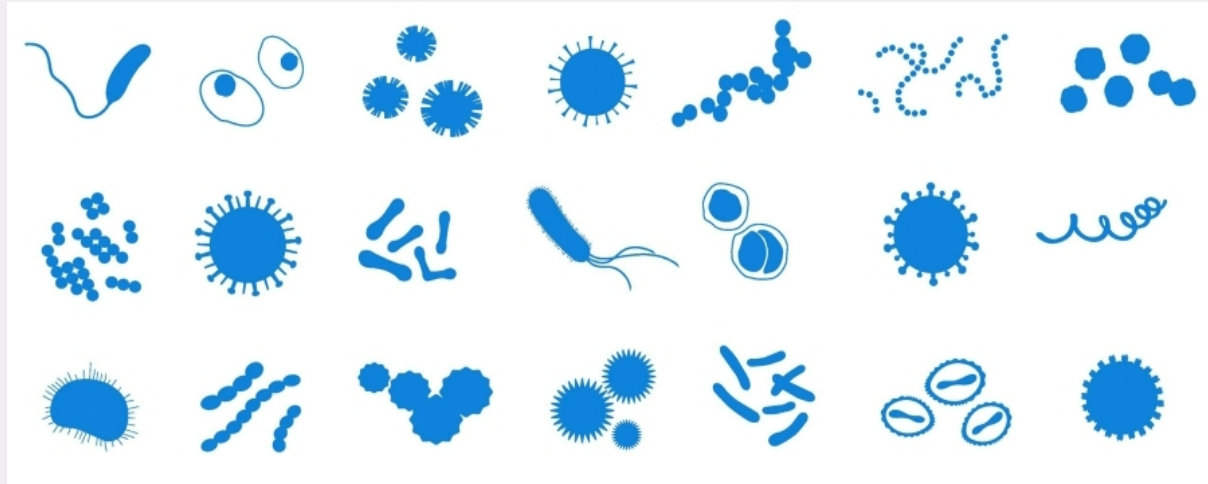
A decorative graphic on the left side of the slide consists of several vertical bars of varying heights and colors. The colors include red, teal, green, grey, yellow, and light blue. The bars are arranged in a way that they appear to be part of a staircase or a series of steps, with each bar having a different colored square at its top or bottom.

The Progression of Communicable Diseases in the Global & Local Context

Team Members- Cleo Smith, Itumeleng Seotlo, Kaho Daniel, Mahlaste Masola, Muplawa Amoni, Nishttha Ramnath, Nkayezi Nkosi, Osamamwen Osifo

What is a Communicable Disease?

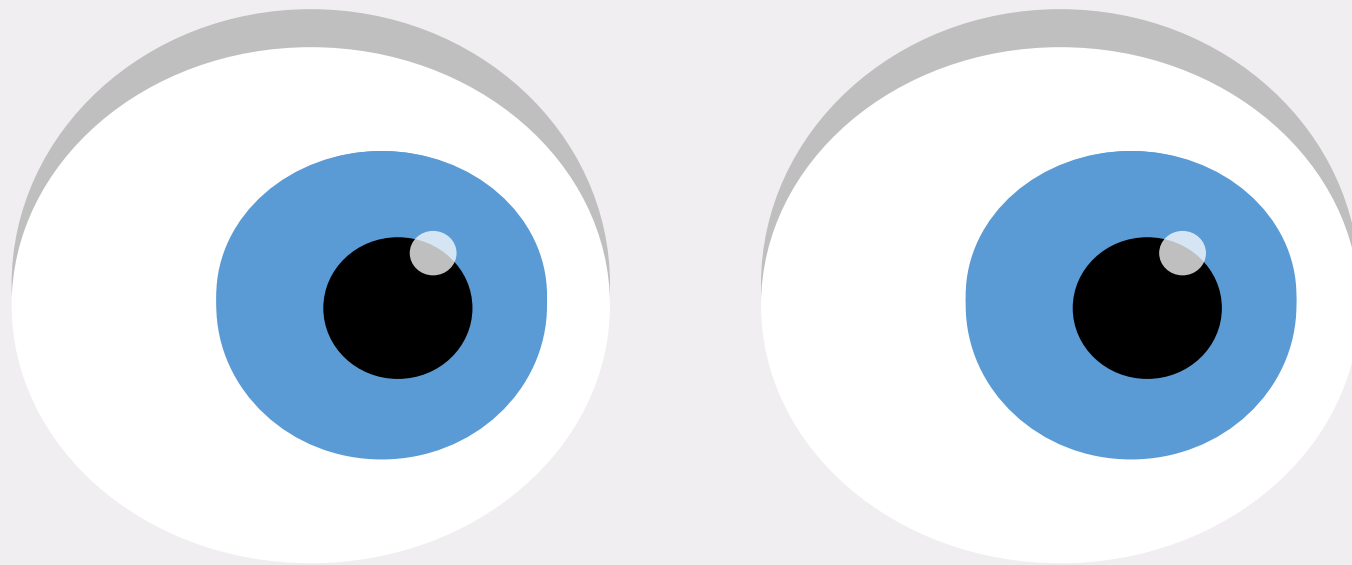
Communicable diseases are illnesses that spread from one person to another or from an animal to a person or from a surface or food (CDC, 2022).



Top Communicable Diseases

Locally	Globally
HIV	HIV
TB	TB
Covid 19	Hepatitis A, B and C
Influenza	Measles
Lower respiratory diseases	Salmonella and Escherichia coli
Diarrheal diseases	Malaria
Malaria	Covid 19
Sexually transmitted diseases	Sexually transmitted diseases
Neonatal Sepsis	Influenza
Hepatitis	Ringworm

QUIZ!?!?





When did HIV start in South Africa ?

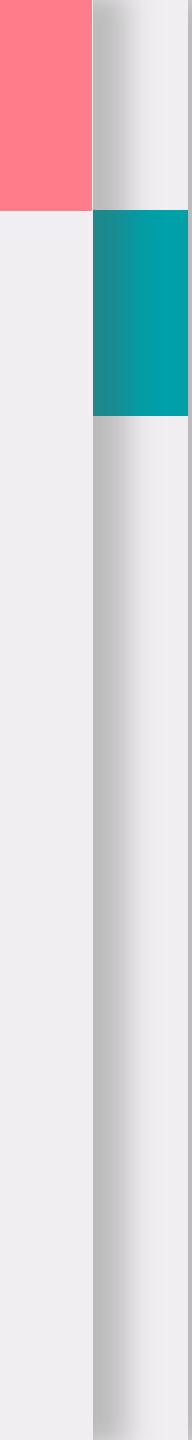
A) 300BC

B) 1978

C) 1982

C) 2023



A vertical bar on the left side of the slide, composed of several colored squares: red, teal, and grey.

Viruses are the smallest
disease-causing organisms.

A) True

B) False

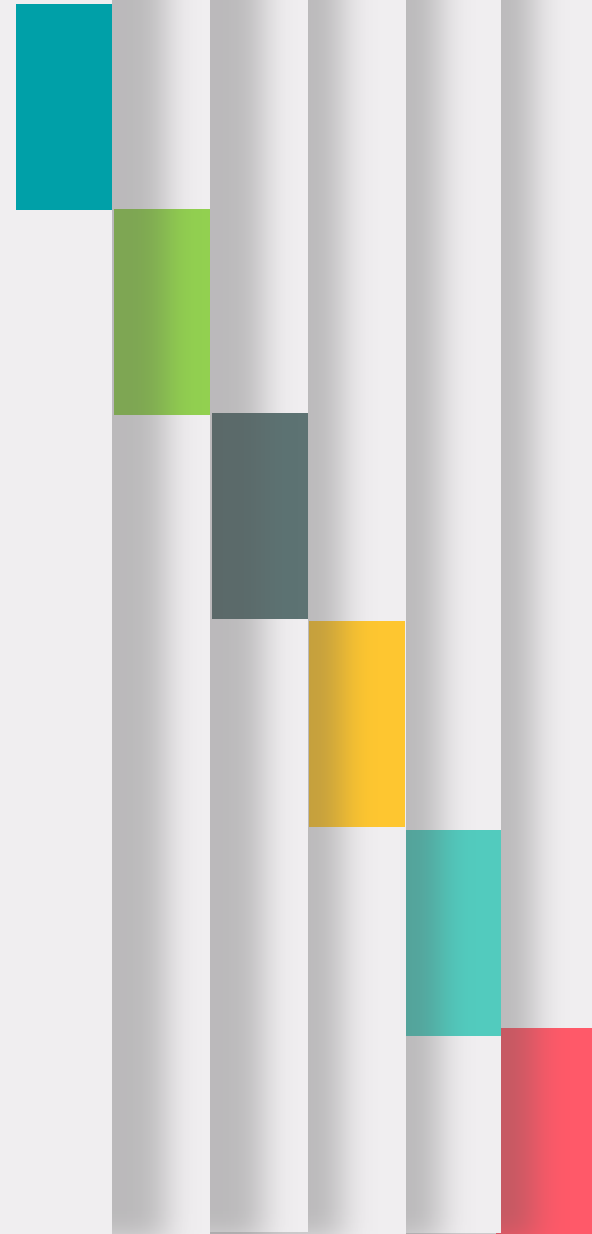
A vertical bar on the right side of the slide, composed of several colored squares: green, grey, yellow, teal, and red.

_____ is a disease that can be passed to a person from another person, animal or object.

A) Non-communicable disease

B) Communicable Disease

C) Pathogens



Objectives



Timeline of HIV



Compare & Contrast
Timelines



How long did it take to
implement & meet
changes?



What was the health
systems response over
the years?



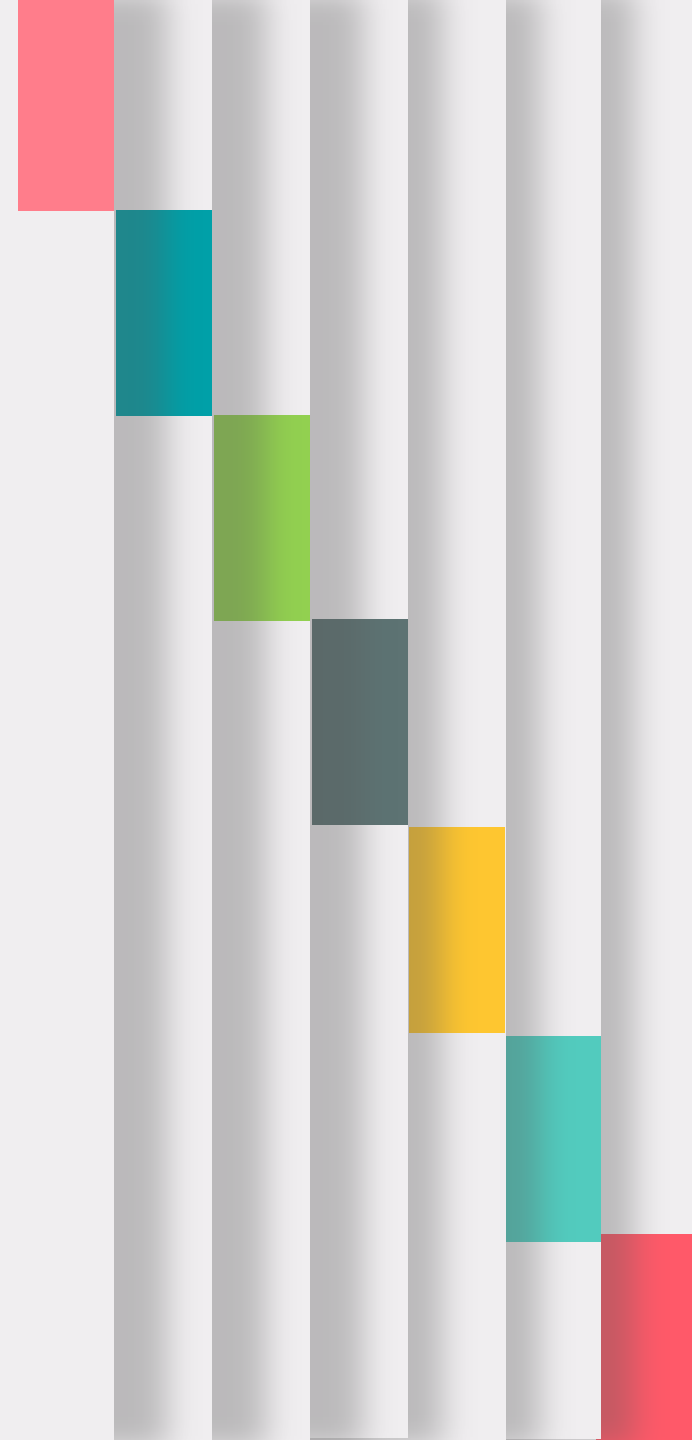
Epidemiological
Transition?



Challenges Around
Disease Management

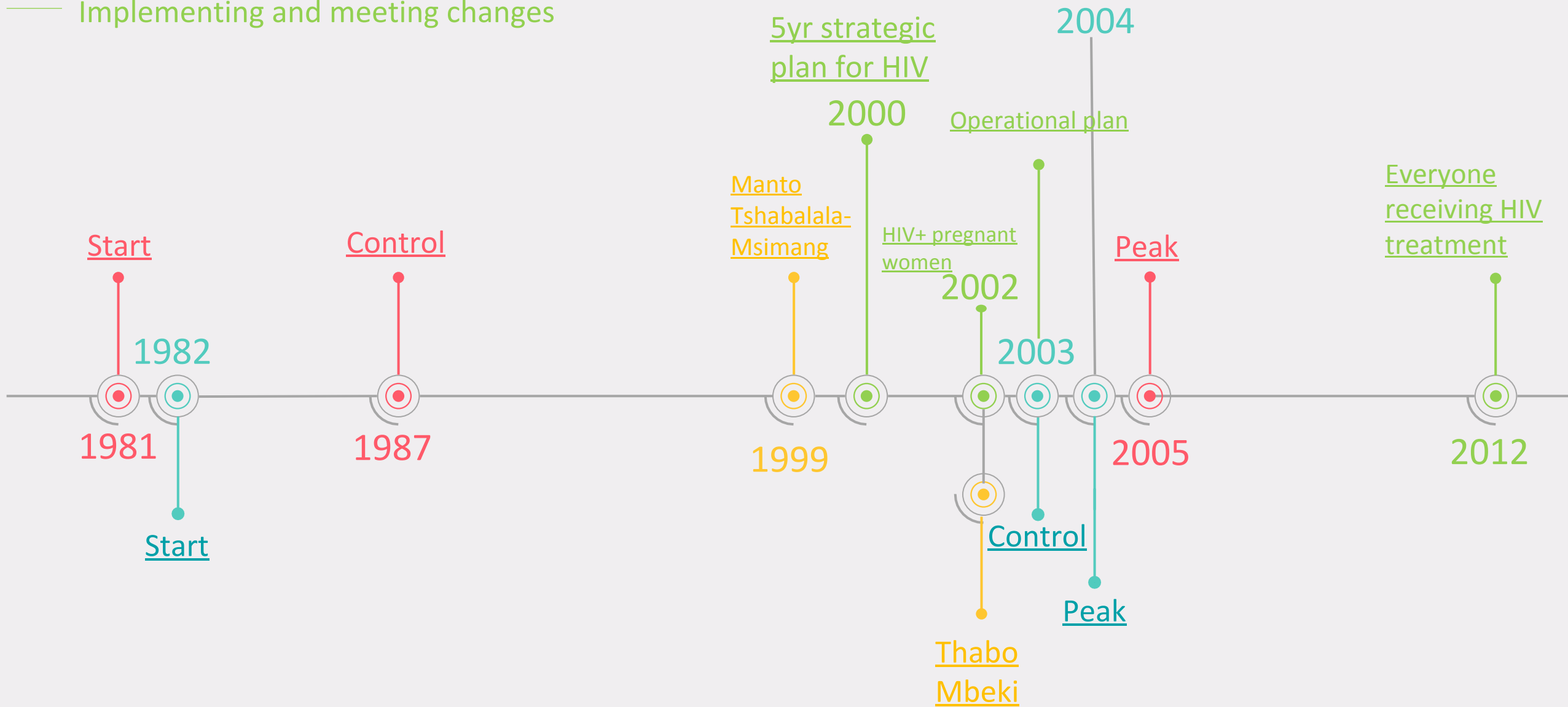


Key Populations
Affected?



- Global
- Local
- Why it took SA a long time
- Implementing and meeting changes

TIMELINE



Provincial Plans

Eastern Cape AIDS Council. [The Eastern Cape Provincial HIV & AIDS and STI strategic plan of action, 2007 - 2011](#). [Eastern Cape] : Eastern Cape AIDS Council, 2007?

Gauteng (South Africa). Department of Health. [Gauteng strategic plan on HIV, TB and STIs for 2012 to 2016](#). Marshalltown : Department of Health, 2012?

KwaZulu-Natal (South Africa). [Multi-Sectoral Response Plan for HIV, TB and STIs for KwaZulu-Natal Province, 2017-2022](#).

KwaZulu-Natal (South Africa). Office of the Premier. Chief Directorate: HIV and AIDS. [Multi-Sectoral Provincial Strategic Plan for HIV and AIDS, STIs and TB 2012-2016 for KwaZulu-Natal](#). Pietermaritzburg : Office of the Premier, 2012.

Western Cape (South Africa). Department of Health. [Provincial Strategic Plan on HIV/AIDS, STIs and TB, 2012-2016](#). Cape Town : Department of Health, 2012?

Compare & Contrast Timelines

- How similar are they?
 - Where did they change?



Global and Local timelines for the start of HIV/AIDS are similar

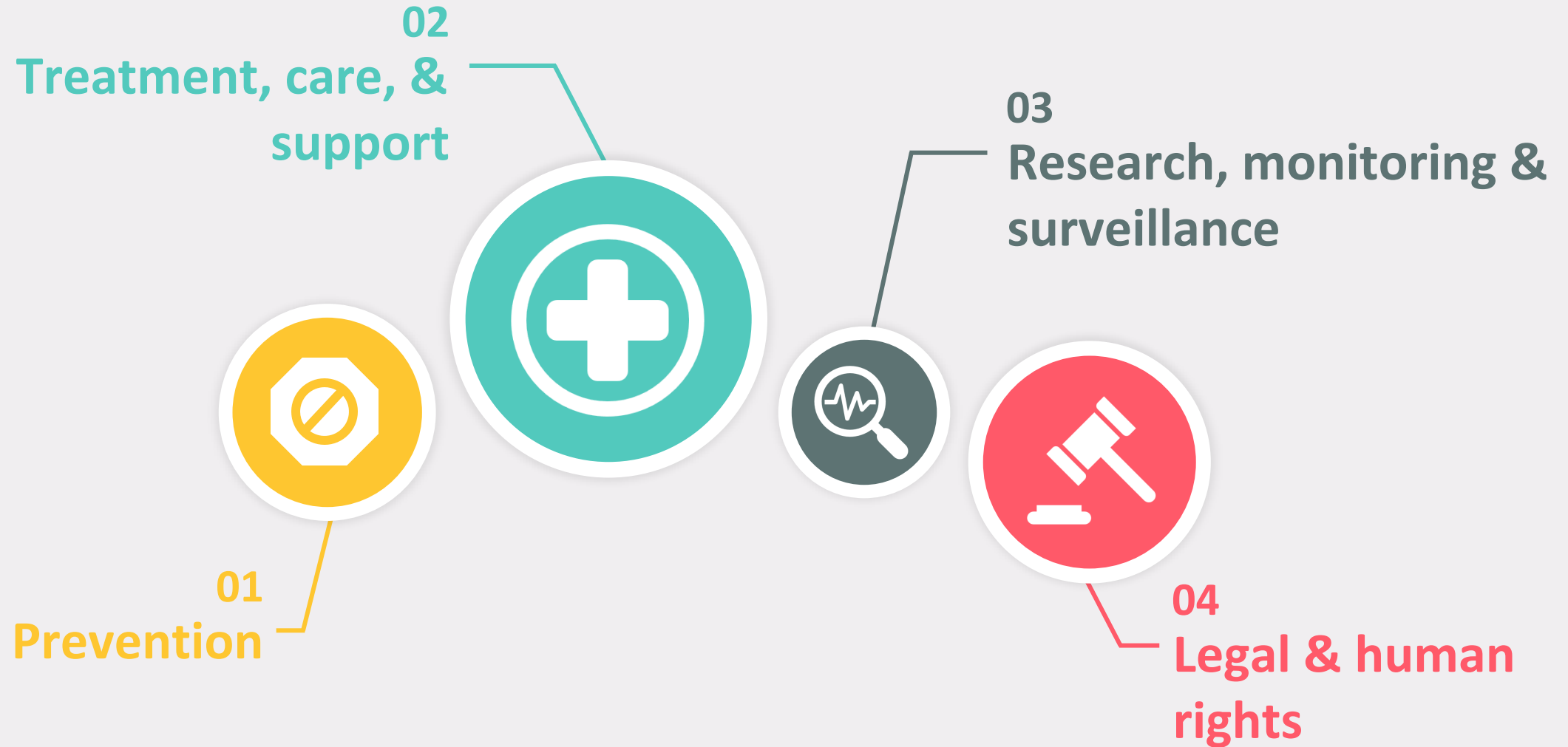


We note a difference in the number of years it took for the disease to get to its peak globally and locally



There is a significant difference in the ARV rollout globally and locally

How long did it take SA to implement & meet the changes?



Why do we see differences in HIV globally and locally (SA)?

GLOBALLY

- Regional variations
- Access to healthcare
- Lack of education & awareness

LOCALLY

- High prevalence rate
 - Gender inequality
- Stigma & discrimination

The Causes of Why it took South Africa a Long Time to Implement Changes in the Control of HIV/AIDS



South Africa has been dealing with the inevitable and massive rise of HIV for the past 25 years



The South African government's response to the HIV epidemic was described as denialist



Given the lack of understanding and availability of prevention techniques during the 1980s and 1990s



Prevention of mother-to-child transmission (PMTCT)



Political intervention, research methods, as well as the safety and effectiveness of the medicine itself, were all the subject of controversy.



Manto Tshabalala-Msimang was appointed health minister of South Africa in 1999 and served in that position until 2008.



Thabo Mbeki, the president of South Africa, publicly opposed the distribution of AIDS medications in South Africa on October 10, 2002, claiming that they are dangerously poisonous and continuing to debate whether HIV or poverty is the underlying cause of AIDS.



To suggest possibilities for broadening the HIV treatment response beyond PMTCT and post-exposure prophylaxis, the SA government later in April 2002 constituted a Joint Health and Treasury Working Force.



Ultimately, on April 1, 2004, ART initiation began at several service points throughout the country.

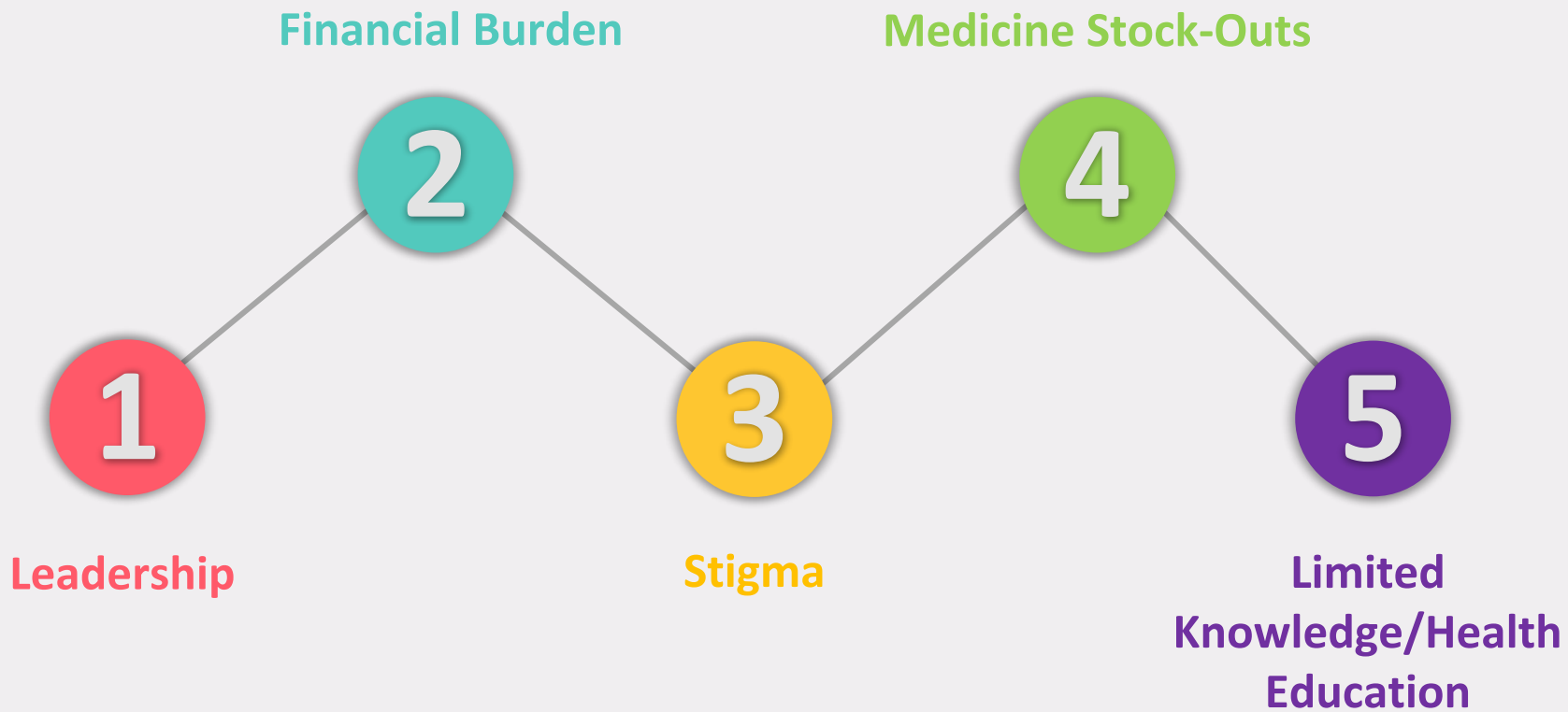
What was the Health Systems Response over the Years?



Did the Epidemiological Transition have anything to do with this?

- The epidemiological transition of low- and middle-income countries such as South Africa is characterised by partial changes, simultaneous occurrence of different disease types and reversals (Kabudula et al., 2017).
- South Africa was experiencing a steady decline in the overall mortality level, this was reversed by the HIV/AIDS epidemic which caused a drastic increase in mortality from the early 1990s (Kabudula et al., 2017).
- With the introduction and widespread uptake of antiretroviral treatment, mortality due to HIV has been reduced and has set the transition back on track.
- The transition is now in the phase that is dominated by mortality due to non-communicable diseases and injuries caused by changes in lifestyle. These changes were brought about over the last two decades by economic and social growth (Kabudula et al., 2017).
- The epidemiological transition was delayed by the HIV/AIDS epidemic.

Challenges Around Disease Management



Key Populations Affected By HIV



Globally

- Men who have sex with men (MSM)
- Transgender people
- Injecting drug users (IDU)
- Sex workers
- Migrant populations
- Prisoners

South Africa

- Men who have sex with men (MSM)
- African females aged 20-34
- African males aged 25-49
- High-risk drinkers
- People who use drugs for recreational purposes
- People with disabilities

Conclusion

Communicable
Diseases



HIV



Over time, provincial plans & systems were implemented to deal with the HIV epidemic.



SA has made progress in responding to the HIV epidemic, but there is still more work to be done

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