

# Prevention in Practice: South Africa Updates and Innovations on HIV Prevention in PBFW

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South Africa

Advancing HIV Prevention and PrEP  
for Pregnant and Breastfeeding Women

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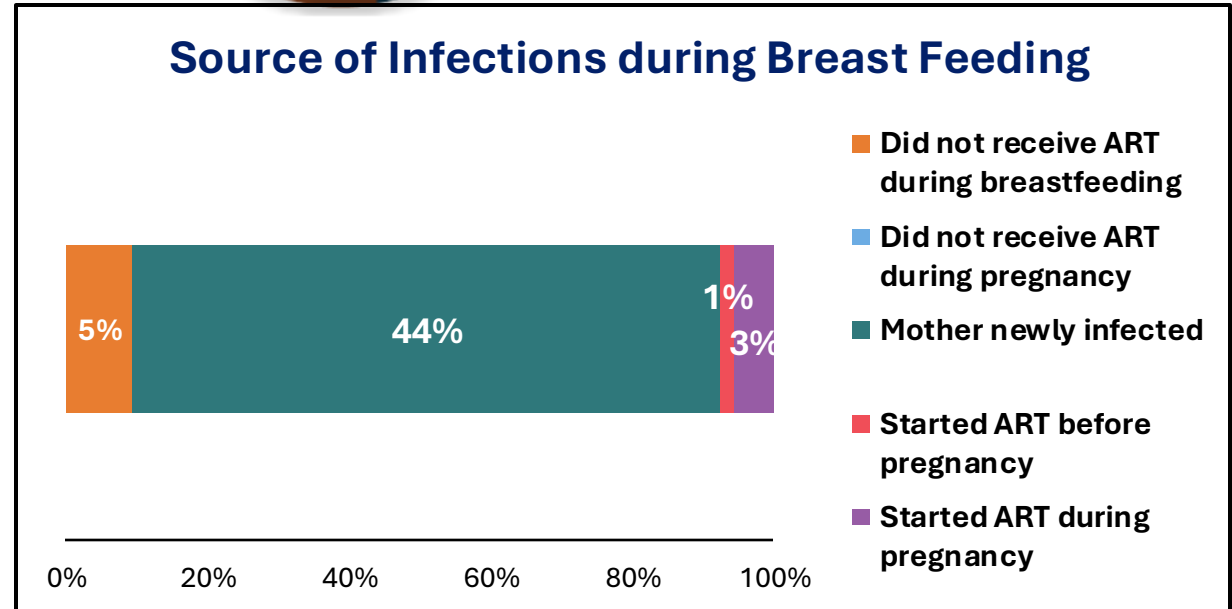
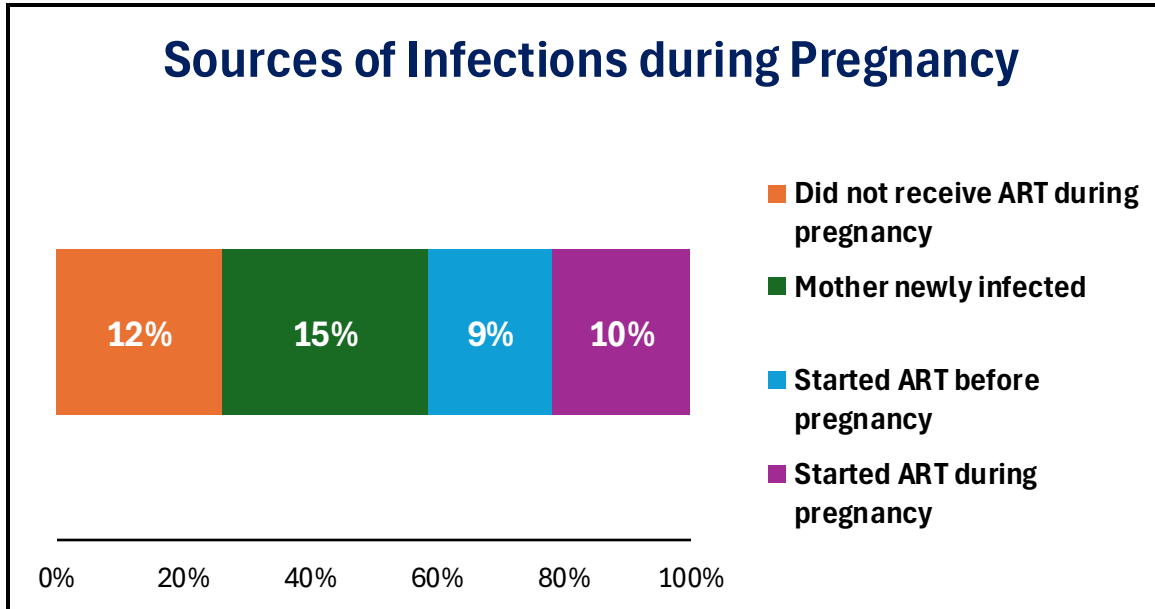
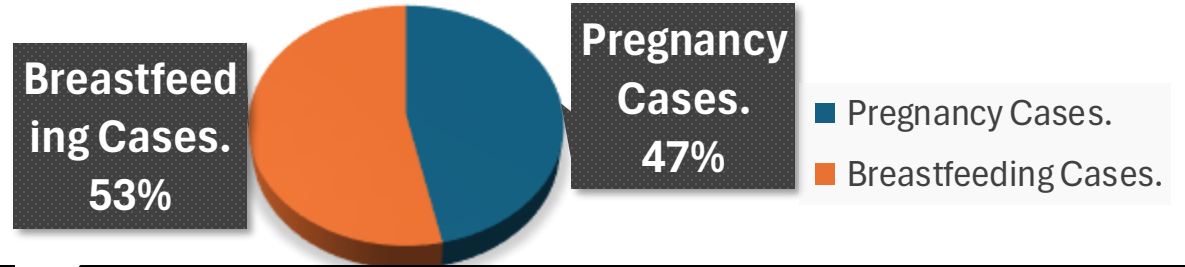
**HIV**  
Impact Network for  
Vertical Transmission  
**E**limination



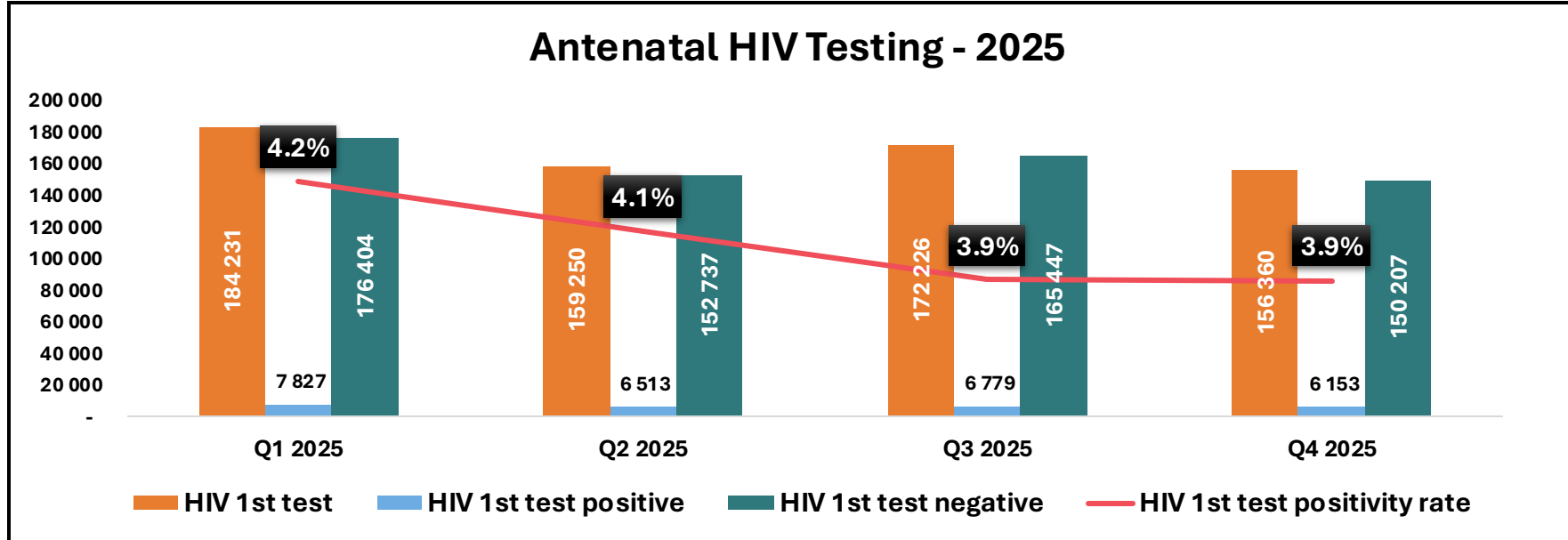
# South Africa - New Pediatric Infections 2024

**6 600** New infections among children

53% of infections occur during breast feeding and 47% during pregnancy

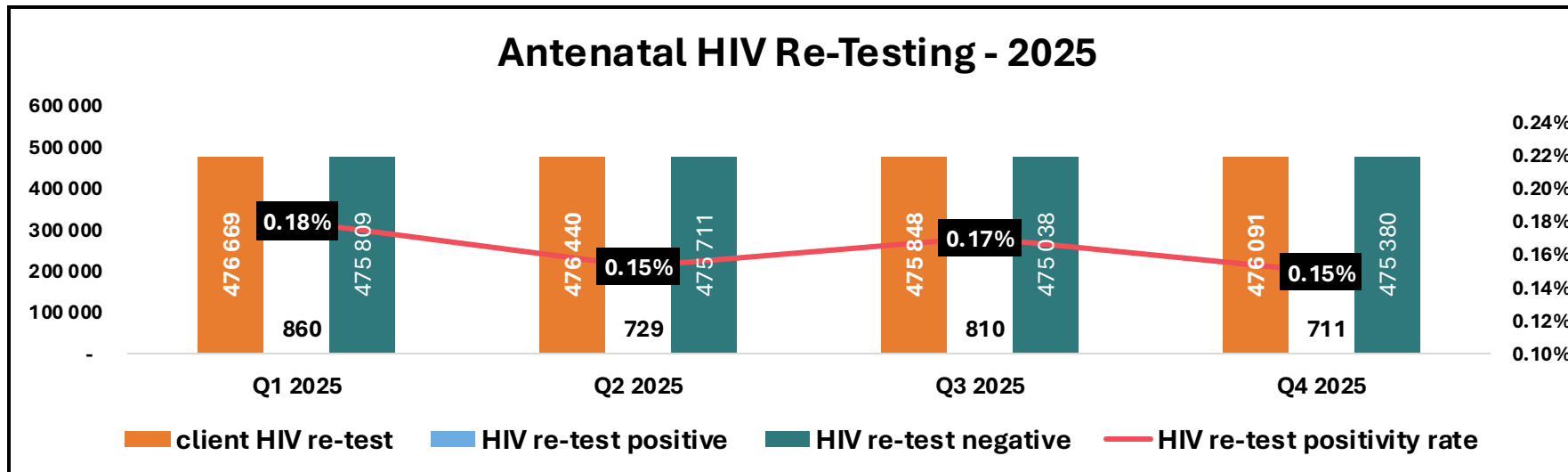


# Antenatal HIV Testing 2025



Testing coverage across all quarters between 156k–184k women tested

HIV positivity rate shows a gradual decline from 4.2% in Q1 to 3.9% in Q3 and Q4

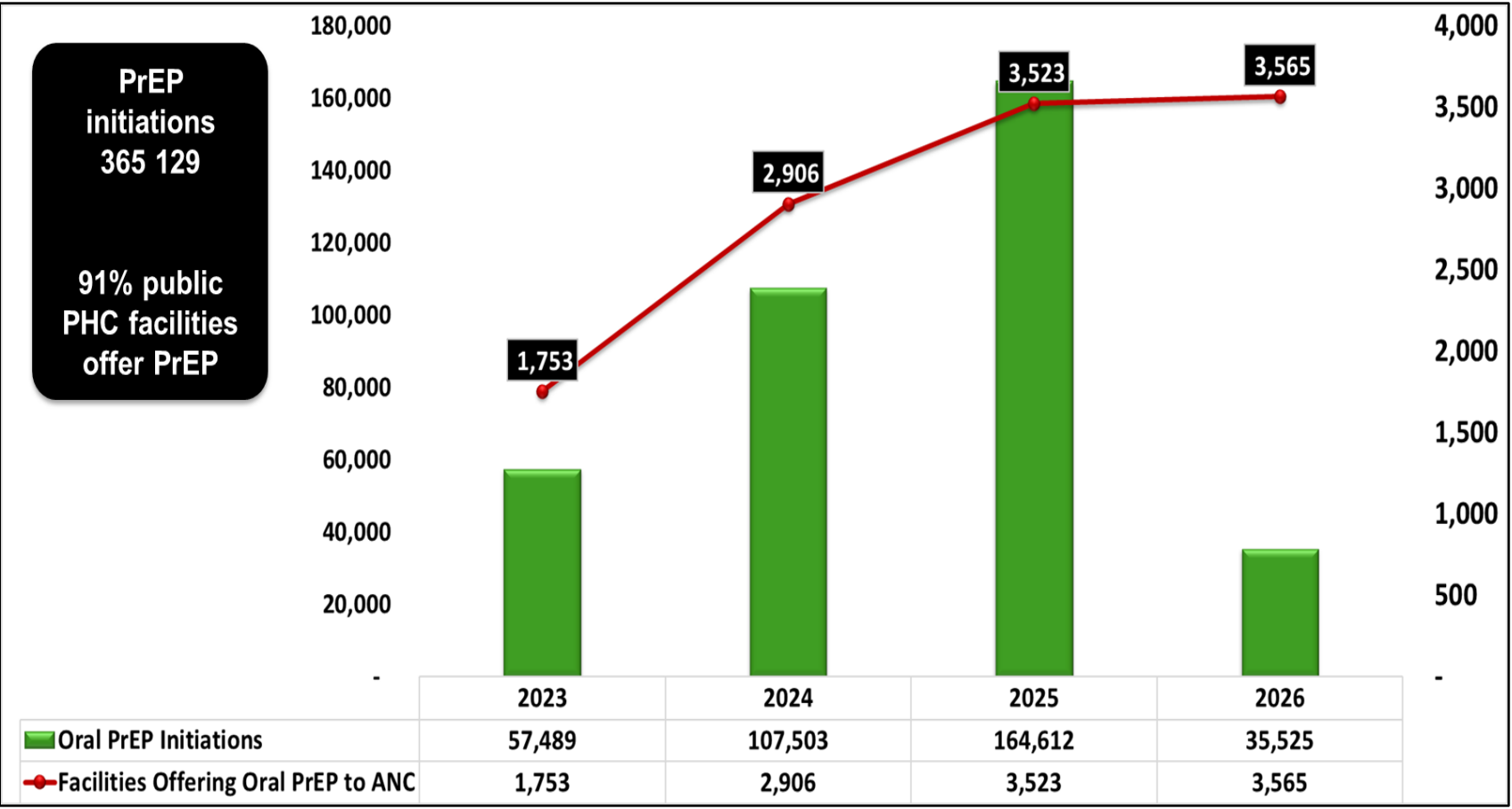


Re-testing coverage ~475k clients per quarter

Re-test positivity rate 0.15%–0.18%



# Oral PrEP in Antenatal Clinic (April 2023 to February 2026)



Scale-up of oral PrEP within ANC services offered through PHC facilities.

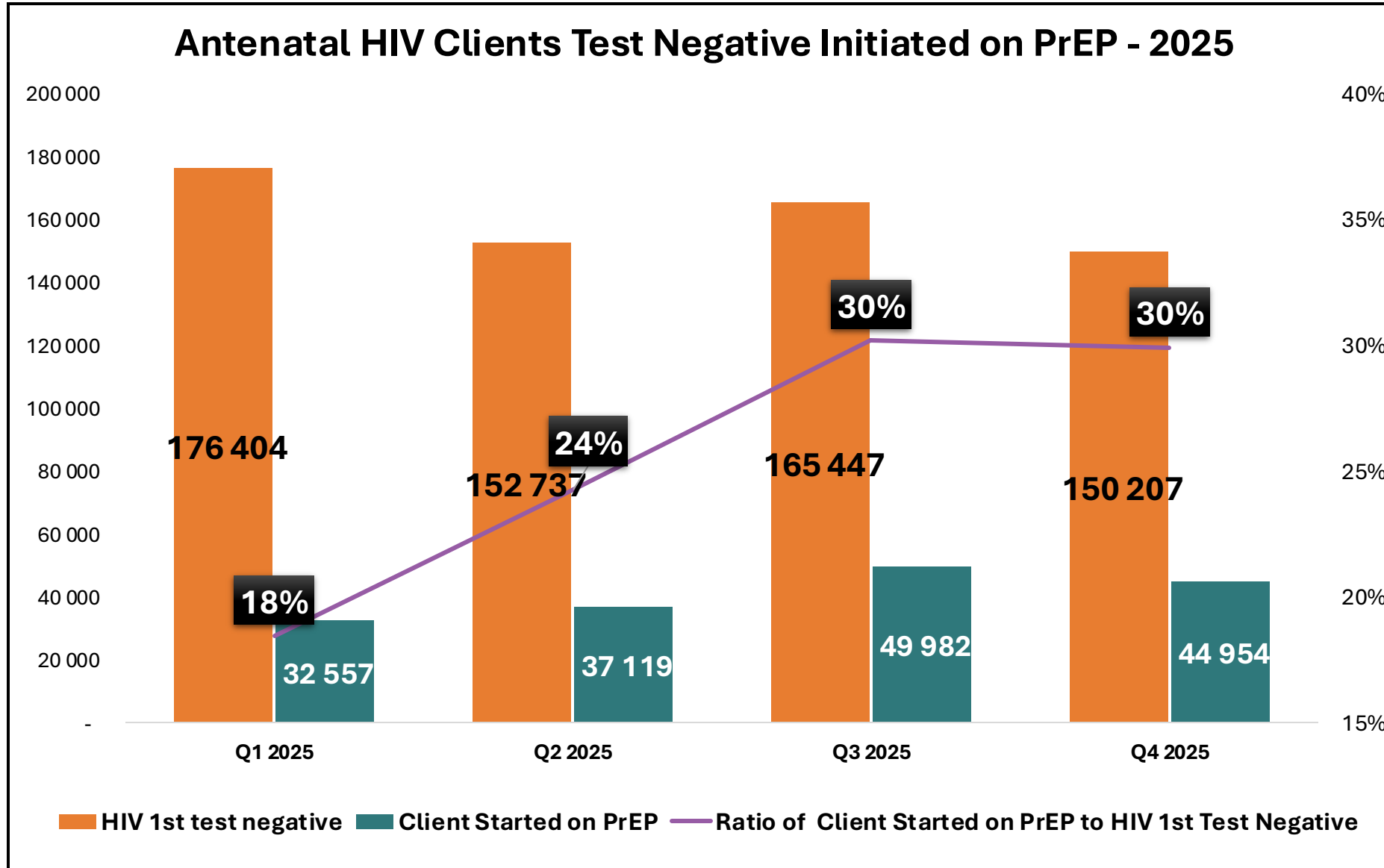
The period reflects the continued expansion of PrEP within ANC as a routine PHC service.

Integration into ANC has enabled:

- Systematic HIV risk screening at first booking
- Immediate same-day PrEP initiation

This aligns with global evidence that integration into ANC/PNC is essential for uptake among pregnant women.

# Trend in Antenatal HIV Testing and Oral PrEP Initiation, 2025



PrEP initiations increased from 32,557 (Q1) to ~50,000 (Q3)  
Slight decline observed in Q4

Coverage improved from 18% in Q1 to 30% in Q3 and Q4

Shows positive growth in PrEP uptake



# Integration of PrEP into Maternal, Child and Women's Health (MCWH)

- South Africa has fully integrated PrEP into ANC and PNC services as part of prevention of vertical transmission platforms.
- HIV testing at ANC is used as the entry point to offer PrEP to HIV-negative PBFW at substantial risk.
- PrEP is delivered alongside:
  - Routine ANC/PNC visits
  - Family planning and SRH services
  - STI screening and treatment
  - Partner testing and linkage to ART

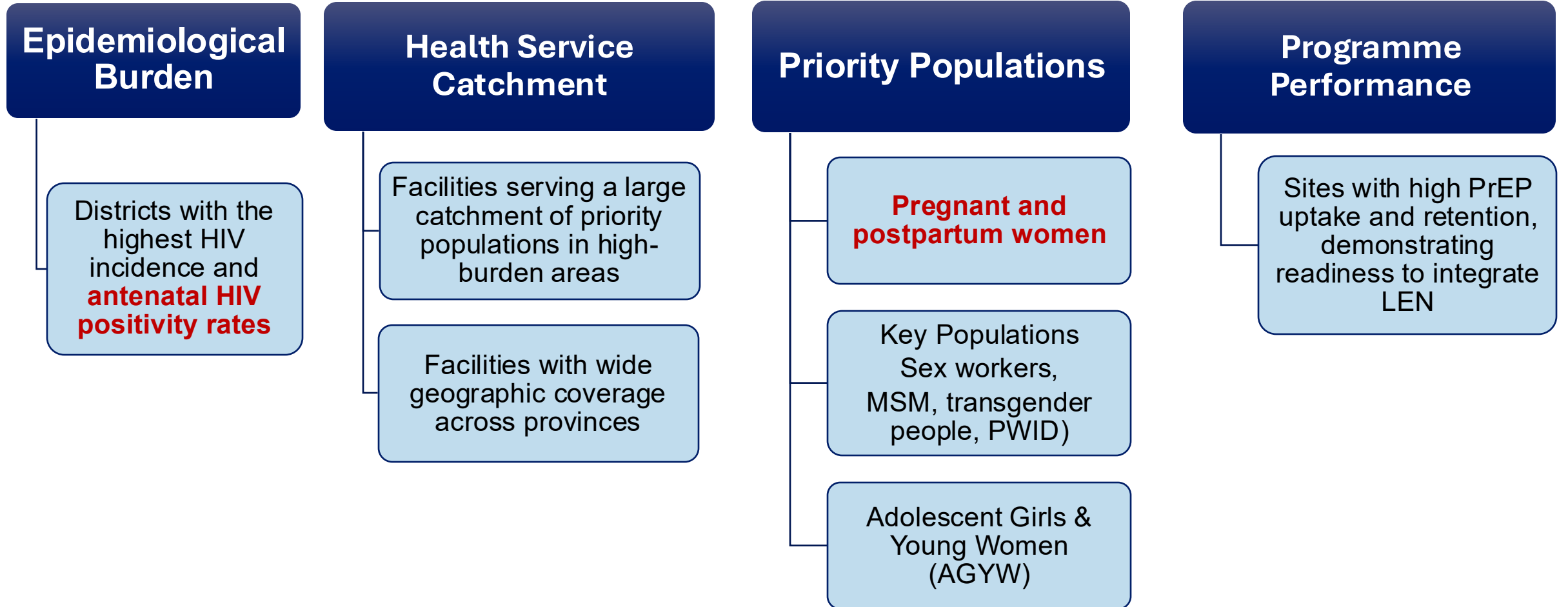
This model promotes a “one-stop, integrated mother–infant service”, reducing missed opportunities and improving uptake.

# ORAL PREP INITIATION TARGETS BY POPULATION CATEGORY

## 1 APRIL 2026 - 31 MARCH 2027

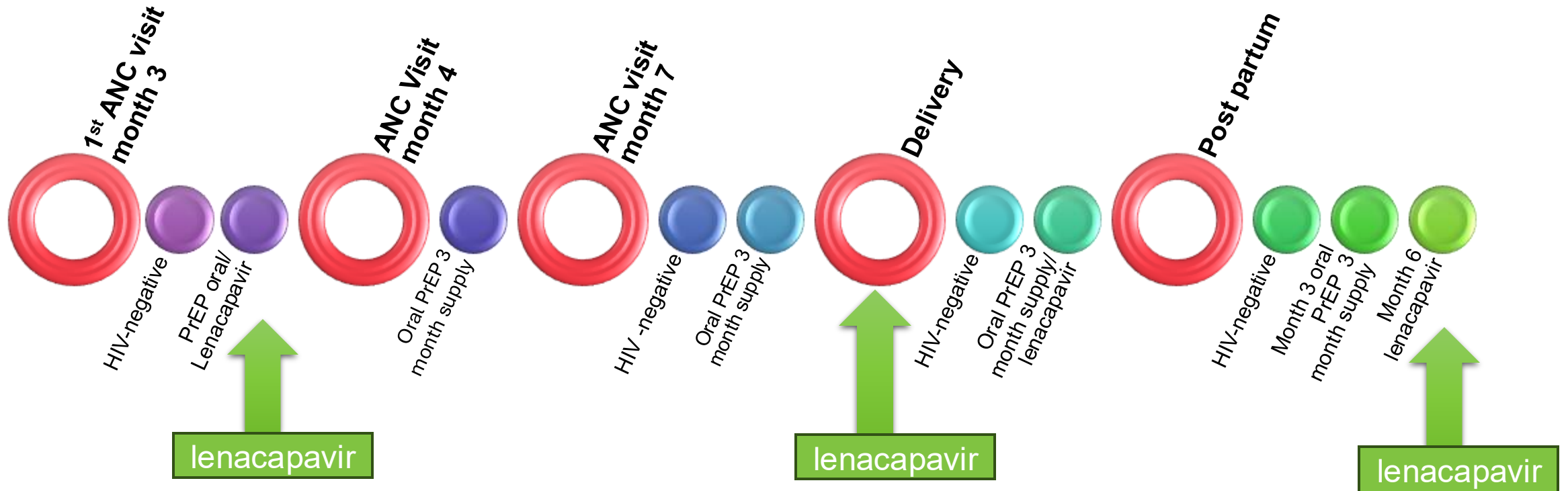
Population	Demand creation (combination HIV prevention )	HIV Testing	Projected PrEP initiation targets	Lenacapavir targets 2026-27
<b>General Population</b>	15 357 173	14 589 314	719 087 (57%)	219 680 (48%)
<b>GBMSM</b> (Gay, bisexual and other men who have sex with men)	271 628	258 041	103 219 (8%)	40 800 (9%)
<b>Sex workers</b>	82 151	82 151	49 291 (4%)	45 600 (10%)
<b>Transgender people</b>	58 271	58 271	34 968 (3%)	18 800 (4%)
<b>Antenatal</b> (1 <sup>st</sup> ANC HIV test negative results 2023-24)	654 996	654 996	344 564 (28%)	131 480 (29%)

# PRIORITISATION CRITERIA FOR LENACAPAVIR ROLL-OUT

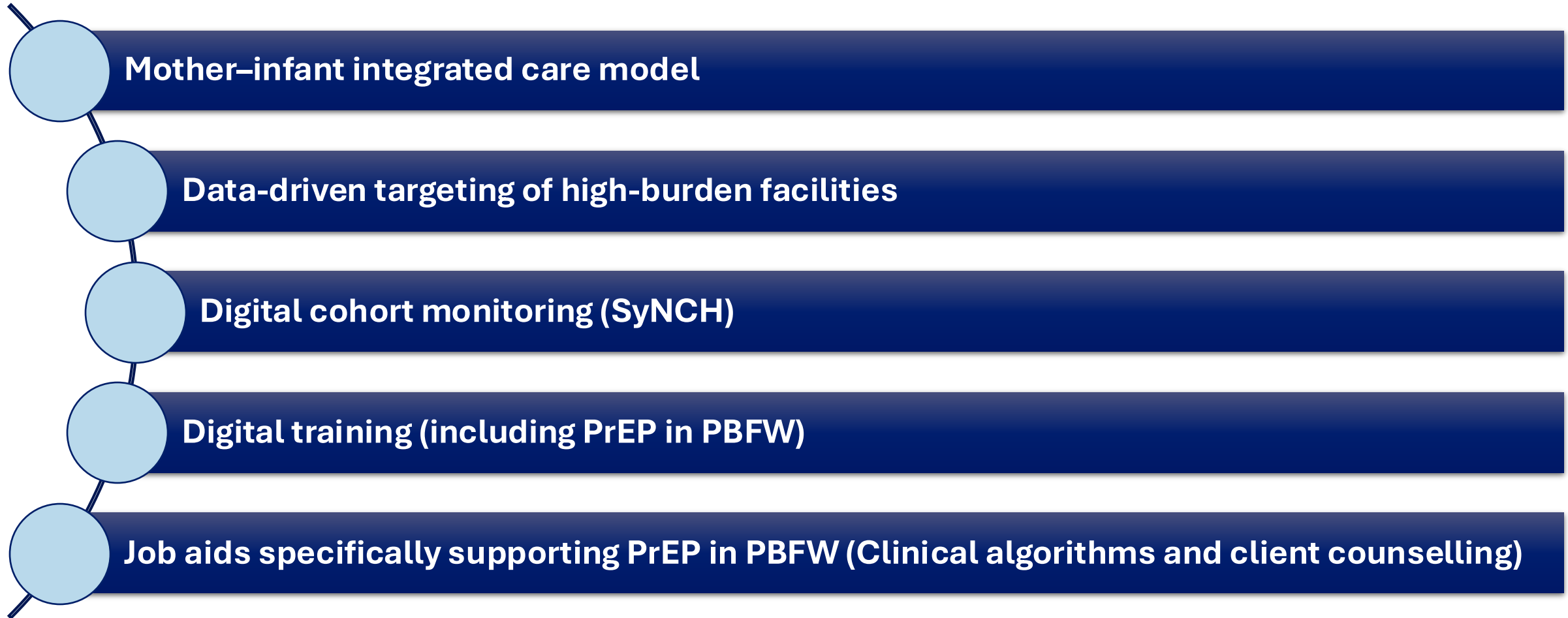


# Pre-Exposure Prophylaxis (PrEP) Continuum During Pregnancy and Postnatal Period

12 months of PrEP oral or 6-monthly injectable could keep the mother and her infant HIV negative



# Key Innovations



# Data-Driven Approach Utilised for Determining PrEP Targets and Identifying Priority Facilities

## Use of:

- ANC HIV positivity rates
- District HIV incidence
- Facility PrEP performance

## Ensures:

- High-impact rollout in high-burden settings
- Efficient use of limited commodities (especially for LEN Phase 1)

# Integration of Digital Systems (SyNCH)

Introduction of a national PrEP module for cohort monitoring of all PrEP users, including individuals who are pregnant and breastfeeding

Enabling:

- Tracking initiation, continuation, switching, and discontinuation across PrEP products
- Better programme visibility and accountability
- Appointment scheduling, client reminders, and health messaging
- Client mobility between facilities
- Side effects, adverse events, and pregnancy outcome monitoring

**SyNCH functions as both a service delivery platform and a robust M&E system, reducing reporting burden while improving decision-making for LEN rollout.**

# Monitoring & Evaluation Framework Embedded in SyNCH

## ○ Built-in Indicator Capture

- Routine capture of key PrEP and LEN indicators at client and facility level.
- Support for longitudinal tracking across visits and dosing intervals.

## ○ Data Quality & Validation

- Mandatory fields and system checks to improve data completeness and accuracy.
- Reduced reliance on parallel data collection tools.

## ○ Real-Time Dashboards & Analytics

- Facility, district, provincial, and national-level views.
- Near real-time visibility of uptake, continuation, and service performance.

## ○ Alignment with National & Donor Reporting

- Indicators aligned with NDoH M&E frameworks.
- Ability to generate routine and ad-hoc reports directly from SyNCH.

## ○ Learning & Adaptive Management

- Data supports program learning, rapid course correction, and scale-up decisions.

# Closing the Gap: From Access to Impact

## What Have We Achieved?

- PrEP fully integrated into ANC & MCWH platforms
- Coverage increased to 30% of eligible ANC clients
- Strong digital monitoring (SyNCH) for real-time decision-making
- 29% of LEN initiations from antenatal services

## What Still Needs Attention?

- High initiation but low continuation, especially postpartum
- Ongoing maternal HIV acquisition risk
- Oral PrEP alone is not sufficient for sustained protection

## Strategic Shift

- Introduce Lenacapavir (6-monthly PrEP)
- Strengthen mother–infant integrated care
- Accelerate and strengthen PrEP in high-burden districts & populations

# Thank You!



health

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Health  
REPUBLIC OF SOUTH AFRICA



**HIV**  
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