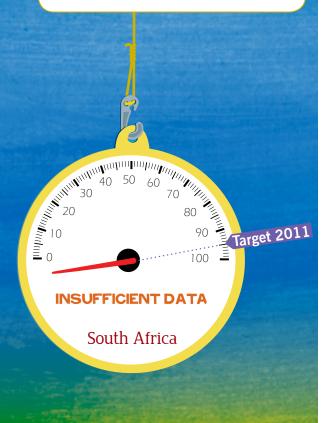
3. PMTCT child outcomes

The proportion of infants born to HIV-infected mothers, who are HIV-negative at 3 months in 2007 and 2008.



What do these figures mean for children?

This indicator shows HIV-free survival in babies born to mothers who were known to be HIV positive in pregnancy, and who were enrolled on the PMTCT programme. It is a good indication of the success of the PMTCT programme.

Unfortunately these data are only available for the Western Cape (WC). The data show that the WC is on track to meet the NSP targets for 2011.

In 2007, 93% of babies on the PMTCT programme in the WC who were tested at three months, were HIV negative. This figure increased to 95% in 2008, bringing rates of transmission down to 5% in the province. The WC is therefore likely to meet the NSP target to reduce mother to child transmission of HIV to less than 5% by 2011.

The lack of available data on PMTCT child outcomes from other provinces is of great concern. Urgent steps need to be taken to collect these data nationally and make them available to the public so that we can monitor progress towards achieving this critical NSP target.

What other information do we need to monitor PMTCT outcomes?

No data on PMTCT child outcomes were available from eight of the nine provinces. All provinces were to have rolled out this information system in March 2009 but information from these provinces was not available at the time of going to print.

Technical notes

Numerator: The number of babies on the PMTCT programme who were tested for HIV for the first time and found to be negative.

Denominator: The number of babies on the PMTCT programme where the mother agreed to have the baby tested for HIV after receiving pre-test counselling.

Data source: District Health Information System (Western Cape)

Strengths and limitations of data

The data presented here give an indication of HIV-free survival at three months. It is therefore a strong estimate of PMTCT programme effectiveness during pregnancy and labour. However, it is a less reliable measure of HIV infection associated with mixed feeding practices.

A further limitation of the data is the high loss to follow up: many mothers do not return to the health facility to have their babies tested. Due to high loss to follow up, this indicator should be used more for trends than as a direct measure of transmission.

