

## Infants and HIV/AIDS in South Africa: The fragility of life

By Sue Moses

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South Africa's infant mortality rate (IMR) remains high, in spite of UNICEF reporting in *The State of the World's Children 2008* that the number of deaths of young children has declined globally. Research by the Centre for Actuarial Research, the Medical Research Council (MRC) and the Actuarial Society of South Africa estimated the country's IMR to be 48 deaths for every 1,000 live births in 2006.

The AIDS pandemic is a critical factor fueling infant deaths. The MRC's National Burden of Disease Study 2000 found that 40% of children who do not live to their fifth birthday die as a direct consequence of AIDS. Estimates from the ASSA2003 Aids and Demographic Model suggest that the proportion of children living with HIV has grown steadily since 2000, with children under the age of five being disproportionately infected. According to researchers from the Infectious Diseases Epidemiology Unit, University of Cape Town, vertical transmission of HIV from mother to infant is the most significant route of HIV infection in children in South Africa, with the risk of transmission from mothers to their infants estimated between 19% and 36%.

These figures highlight difficulties with the delivery and take-up of prevention of mother-to-child transmission (PMTCT) services. A number of studies have examined the delivery of PMTCT services in South Africa from a health systems perspective. However, our understanding of infant health and survival in the presence of HIV and poverty is undermined by the absence of any detailed analysis of HIV-infected women's experiences of pregnancy and birth (including experiences and decision-making related to the PMTCT programme), and of the everyday experiences of infants born to HIV-positive mothers during the first year of life. We know little about who actually holds the baby, nurtures, feeds, clothes, washes, changes, and makes decisions on behalf of her or him, especially with regard to health and the transmission of HIV from mother to child.

In order to address this gap in understanding, Prof Pamela Reynolds from Johns Hopkins University, in collaboration with the Children's Institute is undertaking ethnographic research to explore in-depth the experiences of HIV-positive mothers and their infants. The project, recently underway, will follow a small sample of mother-infant dyads (approximately 10 – 15) from the time of the woman's first antenatal visit until the end of the first year of the infant's life. All matters that impinge on the life of the infant and mother will be documented. The project aims to provide a full and careful description of the political, social, economic, cultural and moral context that affects the quality of their lives, including their health trajectories. Ultimately, it hopes to inform policy and interventions made on behalf of HIV-positive mothers and their infants.

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The Children's Institute, University of Cape Town, aims to contribute to policies, laws and interventions, that promote equality and realise the rights and improve the conditions of all children in South Africa, through research, advocacy, education and technical support.

