NEWS MEDIA FACT SHEET

SOUTH AFRICAN BIO-BEHAVIOURAL SURVEY AND POPULATION SIZE ESTIMATION AMONG PEOPLE WHO INJECT DRUGS, 2023

What is the name and purpose of the survey?

- The South African Bio-behavioural Survey (BBS) and population size estimation among people who inject drugs (PWID), 2023.
- Biobehavioural surveys are critical because they allow us to estimate the population size of marginalised groups like PWID in sites across South Africa, estimate the prevalence of infections like HIV and viral hepatitis, assess health-seeking behaviour, gauge injecting practices and other risk factors, and examine the intersectionality between injecting drug use with behavioural, social and structural factors – including the ability to access healthcare services.

Which organizations funded the survey and where was it conducted?

- The BBS was conducted exclusively in South Africa at four sites namely eThekwini, Mashishing, Mbombela, and Tshwane between May and September 2023.
- The BBS survey was implemented by TB HIV Care and was made possible with funding from the U.S. President's Emergency Plan for AIDS Relief (PEPFAR) and technical assistance from the U.S. Centers for Disease Control and Prevention (CDC).

What is the demographical profile of the study population?

- 1, 259 people who inject drugs participated in the Survey after an informed consent process.
- Study population breakdown per site:
  - eThekwini : 468
  - Mashishing : 190
  - Mbombela : 276
  - Tshwane : 325

In the study population, what are the key statistical findings of the Survey?

- In **eThekwini**, an estimated 49.3% HIV prevalence; 5.8% prevalence for hepatitis B; an anti-HCV prevalence of 75.2%; and an HIV and anti-HCV co-infection prevalence of 43.2% among the PWID population.
- In **Mashishing**, an estimated 45.4% HIV prevalence; 0.9% prevalence for hepatitis B; an anti-HCV prevalence of 40.8% and an HIV and anti-HCV co-infection prevalence of 26.7% among the PWID population
- In **Mbombela**, an estimated 30.3% HIV prevalence; 1.6% prevalence for hepatitis B; an anti-HCV prevalence of 90.5%; and an HIV and anti-HCV co-infection prevalence of 28.1% among the PWID population.
- In **Tshwane**, an estimated 72.1% HIV prevalence; 2.8% prevalence for hepatitis B; an anti-HCV prevalence of 89.1% and an HIV and anti-HCV co-infection prevalence of 69.2% among the PWID population.