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Abstract

MOPE0330 - Parental death and HIV risk among young people in South Africa: findings from a national representative sample

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Background: South Africa is one of the nations most severely affected by the HIV/AIDS epidemic. High rates of orphanhood, family disruption, and youth vulnerability have been observed in this global HIV epicentre. This study investigated the prevalence, sociodemographic characteristics, and HIV risk associated with parental death (loss of a mother, father, or both parents) among young people, aged 15-24, in South Africa.

Methods: Data were obtained from a cross sectional, nationally representative household survey (n=11,904), using a three stage, stratified, disproportionate systematic sampling of the nine provinces of South Africa. Participants completed individual face-to-face interviews and were tested for HIV antibodies.

Results: Overall 29% of the sample reported experiencing parental death: 25% reported a father deceased, 9% reported a mother deceased, and 4% reported both parents deceased. In general, young people in South Africa who experienced parental death were black, lived in rural informal areas, and had not completed compulsory education levels. Only 1.3% of the sample reported lacking an adult parent or caregiver living with them; however 8.3% of young people below 18 years old and whose mother had died also lacked an adult caretaker. Controlling for socio-demographic factors, parental death was associated with HIV seropositive status (OR=1.17; 95% CI=1.02-1.34) and reported experience of ever having vaginal sex (OR=1.22; 95% CI=1.09-1.35) and ever having oral sex (OR=1.15; 95% CI=1.00-1.33).

Conclusions: Loss of a parent is a potential risk factor for HIV status among young people in South Africa. Low educational completion and, for those under 18, lack of a caretaker are also associated with parental death. Findings suggest a need for HIV prevention and educational interventions for young people in South Africa who have experienced a parental death.