

The Health of Educators in Public Schools in South Africa

Why the study?

Health + Wellbeing + Productivity (of educators) = good quality education



2nd study

to assess the health & wellbeing of public school educators in South Africa

requested by **The National Department of Basic Education** conducted by the **Human Sciences Research Council**

AIM = investigate HIV epidemiological profile and wellbeing of educators



educators

+

school leaders

in the public education sector assess HIV prevention impact, care & treatment programmes on HIV prevalence

factors that influence health & wellbeing of educators



work dissatisfaction
overload
personal health issues
exposure to violence

including HIV, TB, and other non-communicable diseases

some of these factors were also identified in 2004 study

The current survey updates previous data & provides new information on HIV incidence & exposure to ART, STI's & TB. The survey also provides insights into the general health and wellbeing of educators in the school environment

surveys = policy guidances + strategies

resulting in the **improvement** to the health and wellbeing of educators

South Africa routinely conducts HIV incidence, prevalence & behaviour surveys in the general population and key sectors of the economy



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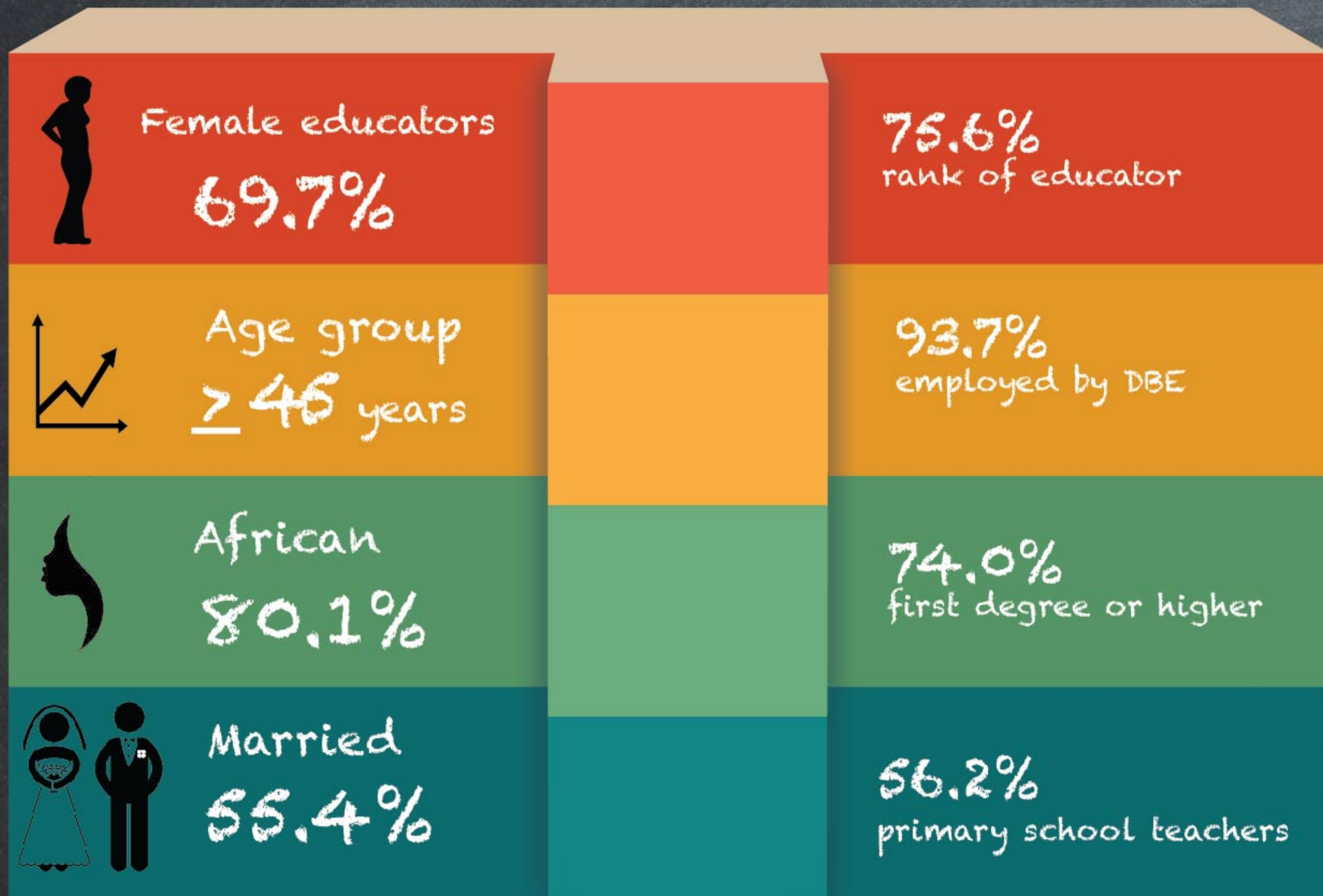


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Participants in the study

The final participants consisted predominantly of:



58% of educators remained in the same area after completion of initial training

One fifth of educators had **20 to 24** years of teaching experience.

Age distribution of South African educators



In **2015 / 16** the majority of educators were in the older age group (**≥ 45** age group)

In **2004** majority of educators were aged **35 to 44** years



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Perception and Awareness

Risk perception was high **88.4%** acknowledging that they were susceptible to HIV infection

Knowledge about risk behaviour and HIV transmission was high at **89.5%**

The availability of HIV Counselling and Testing (HCT) in schools was low at **7.7%** and more likely to be available in urban areas at **8.5%**.

88.3% of educators indicated an intention to test



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The study aimed to:

- ✓ Estimate the prevalence of HIV among public school educators.
- ✓ Establish an HIV incidence baseline among public school educators.
- ✓ Estimate the number of educators on ART
- ✓ Assess the relationship between behavioural factors and HIV infection among public school educators.
- ✓ Compare the HIV prevalence and risk behaviours among public school educators between 2004 and 2015/2016.

Additional objectives included assessing the extent of **TB infection** and **non-communicable diseases** including **mental health**, environmental issues such as **violence** in schools, and systemic issues such as **class sizes**, **job satisfaction** and **workload**.



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How the study was done

9 provinces

1380 public schools

primary, secondary, combined and intermediate schools

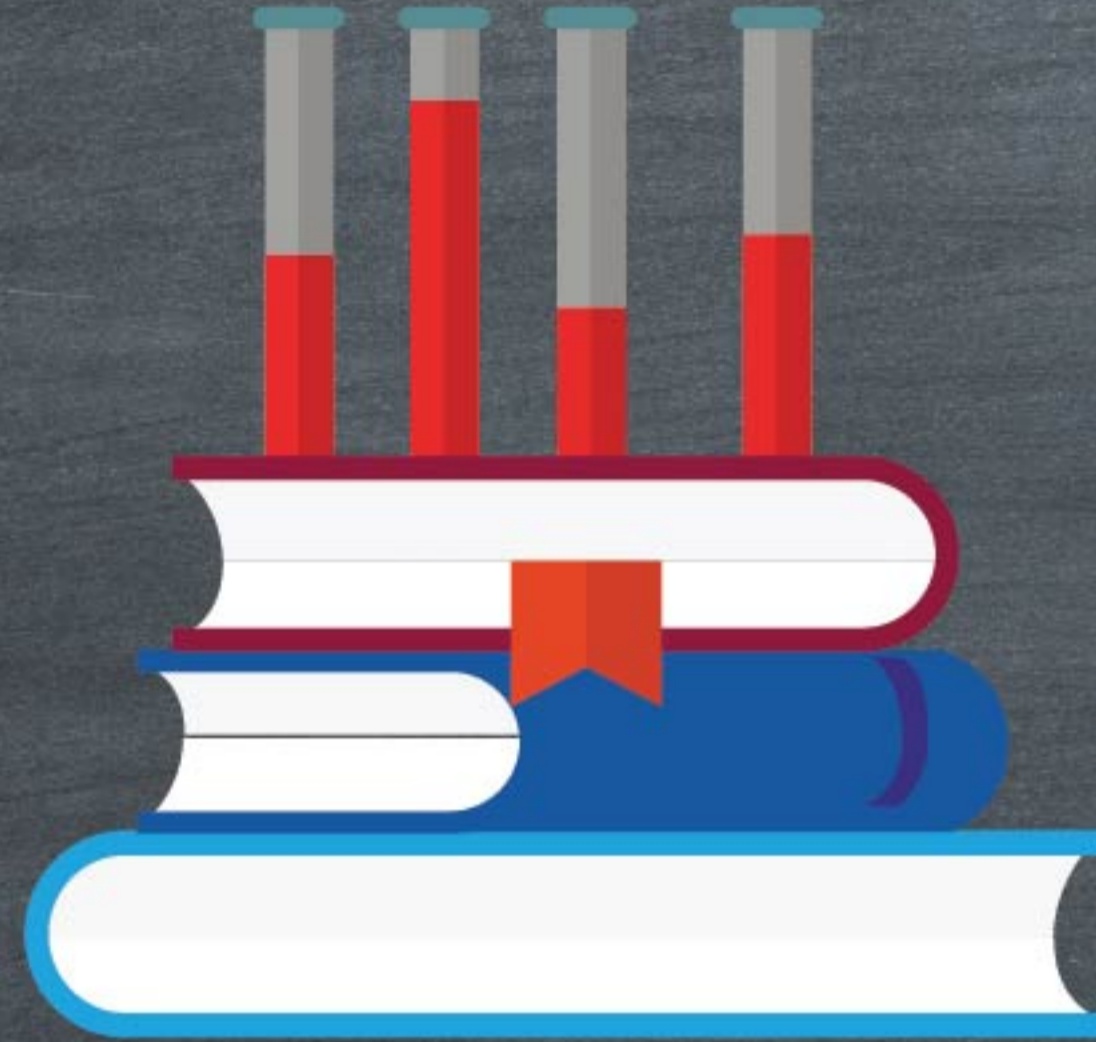
25,130 educators eligible to participate

85.5% completed a questionnaire

65.2% (16 391) also provided blood specimens for HIV testing

ILO provided funds for educators to obtain results from their private doctors

anonymous HIV testing



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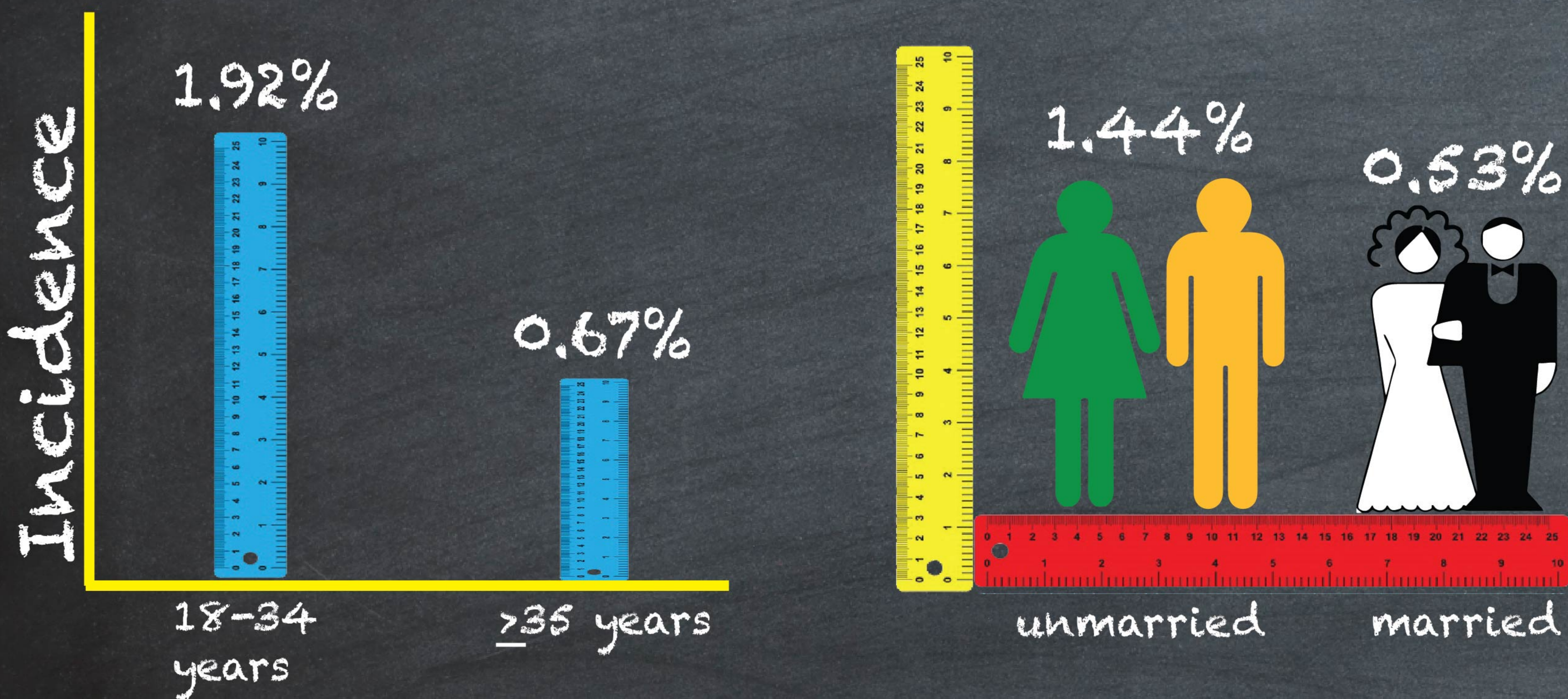
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HIV Incidence (recently infected)



0.84% (2 900) of educators were recently (within the last 12 months) infected with HIV

Females were 30% more likely to be recently infected than males



KwaZulu Natal

2.05%

KwaZulu Natal & the Eastern Cape had higher incidence rates than the national average of 0.84%

Eastern Cape

1.23%



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HIV Prevalence

Educators Living with HIV

= 15.3% (58 000)

12.7% vs 15.3%

2004

2015/16

This was 1.2 times higher than was found in the 2004 survey

HIV prevalence was significantly higher among females compared to males

16.4%

12.7%

There was no significant difference in 2004 by gender

HIV prevalence peak

Age shift could be reflecting increased survival rate due to ARV's

22.4%

21.4%

23.2%

20.4%

2004

2015/16

2015/16

35 - 44 years

Higher HIV prevalence

Africans

Poverty

rural teachers

Low education levels

unmarried and widowed

HIV prevalence in Mpumalanga & Limpopo

19.1% prevalence in 2004

Mpumalanga

18.3% prevalence in 2015

Limpopo

8.6% prevalence in 2004

8.1% prevalence in 2015



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ARV Exposure



Of the **58 000** educators living with HIV



55.7% exposed to ARV's

No significant difference between the proportions of males (**53.8%**) vs females (**56.4%**) who had accessed ART.

Exposure to ARVs was significantly higher among educators aged **>35 years (59.0%)** in comparison to younger educators **18 - 34 years (39.9%)**

This is consistent with the shift in HIV prevalence towards older age groups

Medical Aid + Access = ARV uptake



UNAIDS & DOH treatment targets



90% HIV+ and knowledge of status

90% target for ARV access & use

16% gap 25.3% in 90/90 targets

74% of educators knew their status

55.7% of educators are on ARVs



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TB, STIs and other diseases



10.3% had a symptom of TB



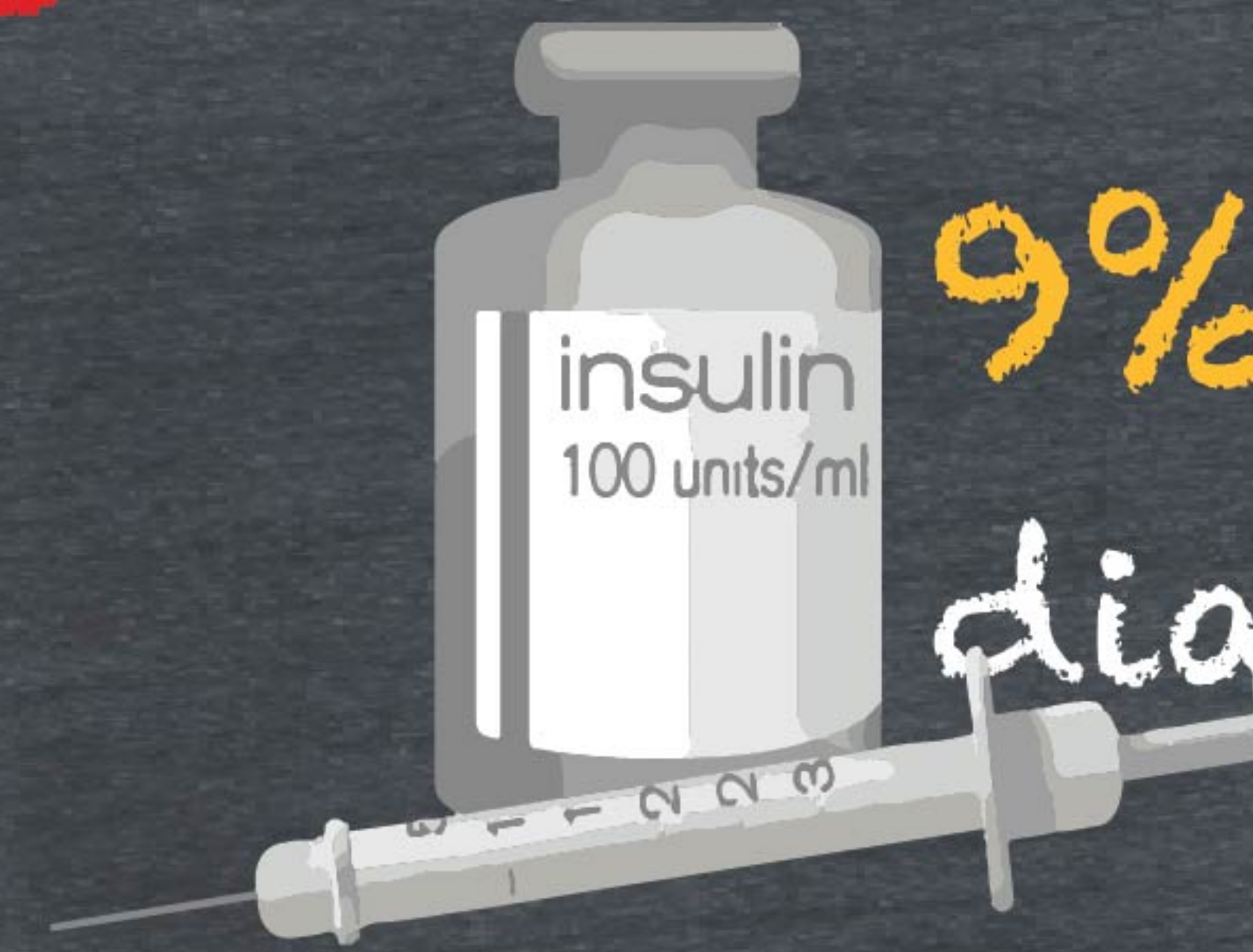
1.2% had an STI



75% physically and 71.3% emotionally healthy



22.1% had hypertension



9% had diabetes



only 3.7% were high risk alcohol drinkers

52% were satisfied in their jobs



49.7% indicated job related stress



64% teaching was their first choice



71.2% never considered leaving teaching



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South Africa & HIV/AIDS



South Africa has the highest burden of HIV globally, with the Joint United Nations Programme on HIV and AIDS (UNAIDS) estimating that

6.8 million

people are living with HIV in the country

South Africa has the highest incidence and prevalence of TB

(according to World Health Organisation (WHO))

Non-communicable diseases such as hypertension and diabetes mellitus also contribute to burden of disease



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