DRUG-RESISTANT TUBERCULOSIS IN SOUTHERN AFRICA: A CONSEQUENCE OF SOCIAL AND HEALTH DISPARITIES AND ENVIRONMENTAL INSECURITY.

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Abstract: Tuberculosis is a highly contagious and air-borne bacterial infection that is as old as the world. The WHO Stop TB Partnership progress report for 2009 states that there are more than 2 billion people world-wide, or one third of the world’s population, infected with the TB bacilli, but only a tenth of all those infected will eventually develop the clinical disease. In 2008, there were over 9 million new cases of TB and a total of about 11 million cases, while about 2 million of these died, a quarter of whom were also infected with HIV. Multiple drug-resistant TB (MDR-TB) is a serious form of the disease that fails to respond to standard first line drugs, while extensively drug-resistant TB (XDR-TB) occurs when there is resistance to second-line drugs as well. Twenty-seven countries account for 85% of all MDR-TB in the world, and South Africa is one of the top 5 highest burden countries for MDR-TB. Given the economic importance of South Africa in the sub-region, many nationals from neighboring countries in southern Africa work in the mines in South Africa, and live in sprawling informal settlements or in packed hostels where many get infected with TB. The paper describes some of the localities with the highest burden of TB and MDR-TB, particularly in South Africa, and correlations are made between the levels of infection and the social and environmental determinants of ill-health. It is very plausible that tuberculosis of all forms is a consequence of disparities in the social and environmental factors that promote health.

Key words: Tuberculosis, drug-resistance, social determinants of health.