GLOBAL REPORT

UNAIDS REPORT ON THE GLOBAL AIDS EPIDEMIC | 2010

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GLOBAL REPORT

UNAIDS REPORT ON THE GLOBAL AIDS EPIDEMIC | 2010

UNAIDS VISION

ZERO NEW HIV INFECTIONS.

ZERO DISCRIMINATION.

ZERO AIDS-RELATED DEATHS.

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FOREWORD

Ebube Sylvia Taylor at the 2010 United Nations Millennium Development Goals Summit

"No child should be born with HIV; no child should be an orphan because of HIV; no child should die due to lack of access to treatment," urged Ebube Sylvia Taylor, an eleven year old born free of HIV, to world leaders gathered in New York to share progress made towards achieving the Millennium Development Goals by 2015.

We have halted and begun to reverse the epidemic. Fewer people are becoming infected with HIV and fewer people are dying from AIDS.

We must be proud of these successes and the potential of our shared future—breakthroughs in a prevention revolution are at hand with a new microbicide gel holding promise for a generation of women who will be able to initiate usage and take control of their ability to stop HIV. Political breakthroughs will be achieved as more countries abolish discriminatory practices led by voices of a new law commission, and Treatment 2.0—a breakthrough that could save an additional 10 million lives.

However we are not yet in a position to say "mission accomplished".

Growth in investment for the AIDS response has flattened for the first time in 2009. Demand is outstripping supply. Stigma, discrimination, and bad laws continue to place roadblocks for people living with HIV and people on the margins.

To fulfill Ebube's hope, we must break the trajectory of the AIDS epidemic by redoubling our efforts to ensure countries meet their goals towards universal access to HIV prevention, treatment, care and support. We must leverage the growing integration of AIDS with maternal and child health and all of our Millennium Development Goals.

We know that there are solutions. We know that there is political and societal will to bring change. The real challenge is following through. This new fourth decade of the epidemic should be one of moving towards efficient, focused and scaled-up programmes to accelerate progress for Results. Results. Results.

Michel Sidibé
UNAIDS Executive Director
Under Secretary-General of the United Nations

INTRODUCTION

On the cusp of the fourth decade of the AIDS epidemic, the world has turned the corner—it has halted and begun to reverse the spread of HIV (Millennium Development Goal 6.A). The question remains how quickly the response can chart a new course towards UNAIDS' vision of zero discrimination, zero new HIV infections, and zero AIDS-related deaths through universal access to effective HIV prevention, treatment, care and support.

Since 1999, the year in which it is thought that the epidemic peaked, globally, the number of new infections has fallen by 19%. Of the estimated 15 million people living with HIV in low- and middle-income countries who need treatment today, 5.2 million have access—translating into fewer AIDS-related deaths. For the estimated 33.3 million people living with HIV after nearly 30 years into a very complex epidemic, the gains are real but still fragile. Future progress will depend heavily on the joint efforts of everyone involved in the HIV response.

At a time of financial constraint, good investments are more important than ever. The evidence supporting increased investment in the HIV response has never been clearer or more compelling. New data from 182 countries, along with extensive input from civil society and other sources, clearly show that steady progress is being made towards achieving universal access to HIV prevention, treatment, care and support. HIV prevention is working. Treatment is working.

Increasing evidence definitively demonstrates that investments in the HIV response can lead to clear reductions in discrimination and stigma, help people in accessing information and services to reduce their risk of HIV infection, and deliver the treatment, care, and support that will extend and improve the lives of people living with HIV.

» **More than 5 million people are now receiving HIV treatment**
In 2009 alone, 1.2 million people received HIV antiretroviral therapy for the first time—an increase in the number of people receiving treatment of 30% in a single year. Overall, the number of people receiving therapy has grown 13-fold, more than five million people in low- and middle-income countries, since 2004. Expanding access to treatment has contributed to a 19% decline in deaths among people living with HIV between 2004 and 2009. This is just the beginning: 10 million people living with HIV who are eligible for treatment under the new WHO guidelines are still in need.

Efforts are now underway for Treatment 2.0, a new approach to simplify the way HIV treatment is currently provided and to scale up access to life-saving medicines. Using a combination of efforts, this new approach could bring down treatment costs, make treatment regimens simpler and smarter, reduce the burden on health systems, and improve the quality of life for people living with HIV and their families. Modelling suggests that, compared with current treatment approaches, Treatment 2.0 could avert an additional 10 million deaths by 2025.

In addition, the new platform could reduce the number of people newly infected with HIV by up to one million annually if countries provide antiretroviral therapy to all people in need, following revised WHO treatment guidelines.

HIV prevention works—new HIV infections are declining in many countries most affected by the epidemic
In 33 countries, HIV incidence has fallen by more than 25% between 2001 and 2009. Of these countries 22 are in sub-Saharan Africa. The biggest epidemics in sub-Saharan Africa—Ethiopia, Nigeria, South Africa, Zambia, and Zimbabwe—have either stabilized or are showing signs of decline.

Howevever, several regions and countries do not fit the overall trend. In seven countries, five of them in Eastern Europe and Central Asia, HIV incidence increased by more than 25% between 2001 and 2009.

These figures demonstrate that positive behaviour change can alter the course of the epidemic—while stigma and discrimination, lack of access to services and bad laws can make epidemics worse. In both cases, the effects are often profound.

Among young people in 15 of the most severely affected countries, HIV prevalence has fallen by more than 25% as these young people have adopted safer sexual practices. Similar to treatment access, the room for continued improvement on this success is great. Young people's knowledge about HIV is increasing but needs to grow further.

Virtual elimination of mother-to-child transmission of HIV is possible

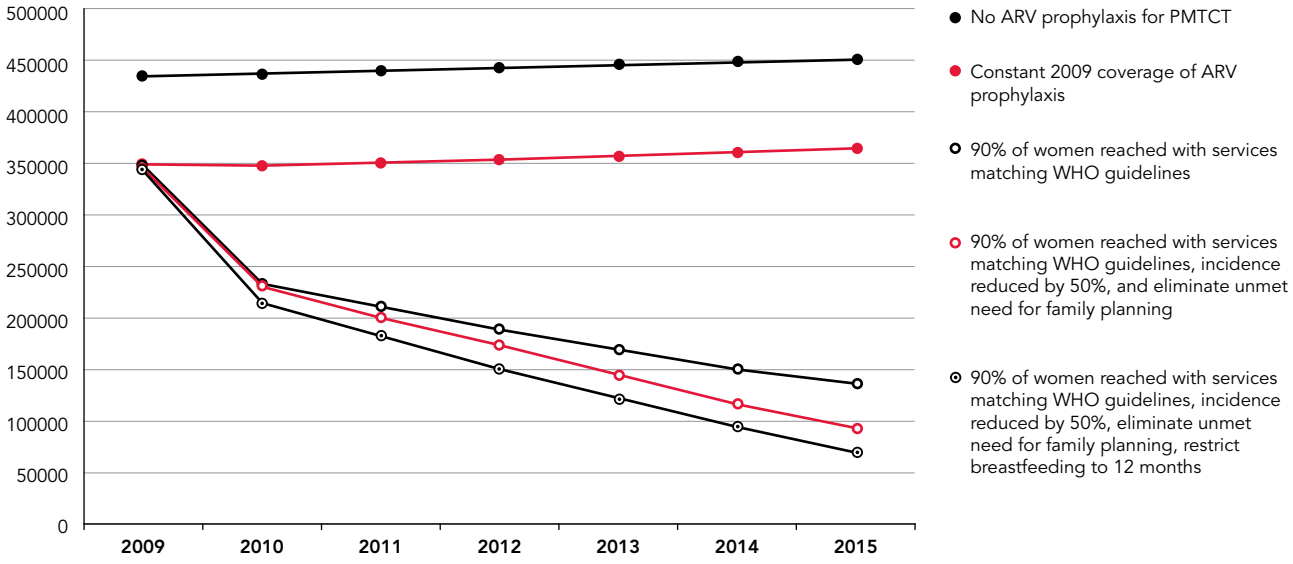
In 2009, an estimated 370 000 children [220 000–520 000] contracted HIV during the perinatal and breastfeeding period, down from 500 000 [320 000–670 000] in 2001.

Figure 1.1

The virtual elimination of mother-to-child transmission of HIV is possible

Estimated New HIV infections among children 0-14: Different scenarios for 25 countries

Source: Mahy M, Stover J, Kiragu K, et al. What will it take to achieve virtual elimination of mother-to-child transmission of HIV? An assessment of current progress and future needs. Sex Trans Infect (Suppl) 2010.



Although this is a significant reduction, HIV continues to weigh heavily on maternal and child mortality in some countries. But in South Africa, which achieved almost 90% coverage of treatment to prevent mother-to-child transmission of HIV, transmission to infants has been drastically reduced. In many communities, countries and regions of the world, however, access to services to halt mother-to-child transmission needs to be scaled up.

10m

Treatment 2.0 could avert an additional 10 million deaths by 2025.

In 2009, UNAIDS called for the virtual elimination of mother-to-child transmission of HIV by 2015 (Figure 1.1). In the 10 most severely affected countries, this is a realistic aim and can be achieved with significantly increased action to implement proven strategies to eliminate HIV transmission to young people.

Women and girls need support

Slightly more than half of all people living with HIV are women and girls. In sub-Saharan Africa, more women than men are living with HIV, and young women aged 15–24 years are as much as eight times more likely than men to be HIV positive. Protecting women and girls from HIV means protecting against gender-based violence and promoting economic independence from older men.

>50%

Slightly more than half of all people living with HIV are women and girls.

Human rights are increasingly a part of national strategies

Human rights are no longer considered peripheral to the AIDS response. Today, the vast majority of countries (89%) explicitly acknowledge or address human rights in their national AIDS strategies, with 92% of countries reporting that they have programmes in place to reduce HIV-related stigma and discrimination.

At the same time, however, criminalization of people living with HIV still presents significant challenges to the AIDS response. More than 80 countries across the world have laws against same-sex behaviour, and the free travel of people living with HIV is restricted in 51 countries, territories and areas. Such laws are not only discriminatory and unjust—they also drive HIV underground and inhibit efforts to expand access to life-saving HIV prevention, treatment, care and support.

Financing the response is a shared responsibility

Increasingly, countries with heavy HIV burdens are assuming their responsibilities to resource the response to the degree that their means permit. Domestic expenditure is the largest source of HIV financing globally today, accounting for 52% of resources for the HIV response in low- and middle-income countries. Improving financing for the global response will require ongoing efforts to mobilize domestic resources among countries that appear to be under-investing in the HIV response, increasing the efficient use of funds for HIV and other related health and development programmes, and increasing external aid in a global environment of constrained resources.

A fragile progress

Despite extensive progress against a number of indicators on the global scale, many countries will fail to achieve Millennium Development Goal 6: halting and reversing the spread of HIV (Figure 1.2 and Figure 1.3).

Figure 1.2

Millennium Development Goal 6 indicators

Population-adjusted averages for indicators for Millennium Development Goal target 6.A (halt and begin to reverse the spread of HIV/AIDS), 1999–2003 and 2004–2009.

Source: DHS and UN Population Statistics.

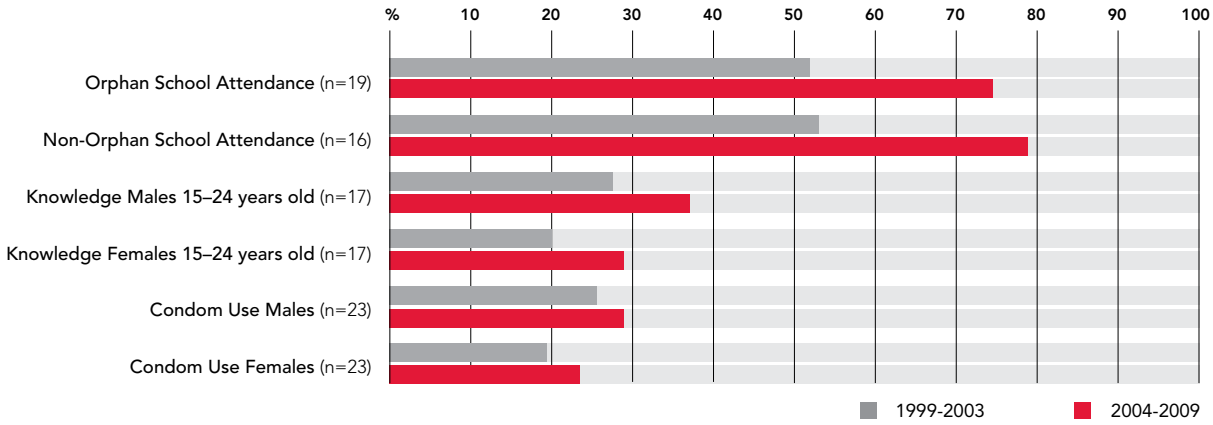
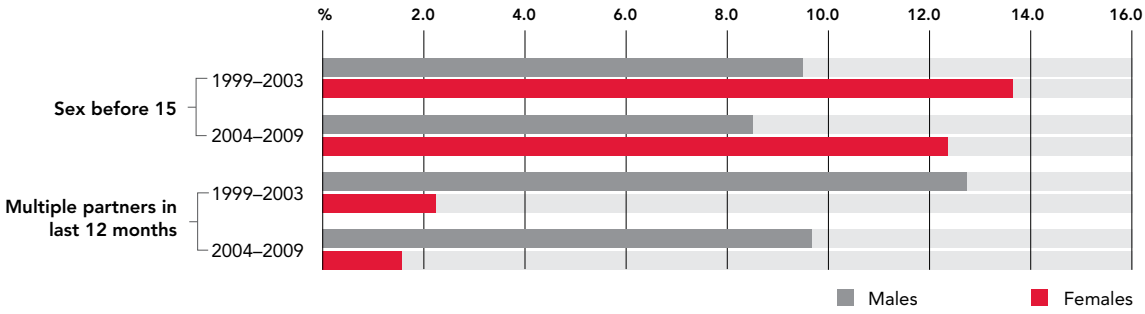


Figure 1.3

Young people and sexual risk

People aged 15–25 years who had sex before age 15 years and who had multiple partners in the past 12 months.

Source: DHS and UN Population Statistics.



Having more than 5 million people receiving treatment is a major public health achievement—but still represents only 35% of the people who need HIV therapy now, according to WHO guidelines issued in early 2010. Reaching the two thirds of people who need treatment, but are not yet receiving it, and financing this expansion in access to HIV therapy will require a continued and expanded global commitment to providing high quality HIV care for all.

Knowledge of the epidemic and how to prevent HIV infection has increased among young people aged 15–24 years—people frequently at the highest risk for infection. Six countries have achieved greater than 80% condom use at last higher-risk sex among males, and two countries have achieved this high level of condom use among females (see the HIV prevention scorecard).

"MANY PEOPLE STILL LACK READY ACCESS TO CONDOMS AND LUBRICATION, AND PEOPLE WHO INJECT DRUGS ALSO LACK SUFFICIENT ACCESS TO STERILE NEEDLES."

Young people still lack knowledge and, importantly, often lack the tools they need to practice HIV risk-reduction strategies, however. Many people still lack ready access to condoms and lubrication, and people who inject drugs also lack sufficient access to sterile needles.

A new vision

Fulfilling the UNAIDS vision of zero new infections will require a hard look at the societal structures, beliefs and value systems that present obstacles to effective HIV prevention efforts. Poverty, gender inequity, inequity in health and the education system, discrimination against marginalized people, and unequal resource pathways all affect—and often slow—the HIV response.

In a world that has had to learn to live with an evolving and seemingly unstoppable epidemic over the course of three decades, UNAIDS' vision of zero discrimination, zero new infections and zero AIDS-related deaths poses a challenge. But it is not a hopeless challenge. The vision of eliminating the toll that HIV imposes on human life can be made real using the knowledge and resources available today. Planners, programme administrators and implementers must make a sustained and dedicated effort to use the best social and scientific knowledge available. Strengthened programming using the latest knowledge and best practices to deliver effective prevention, treatment and care services to people in need, or at risk, is highly effective.

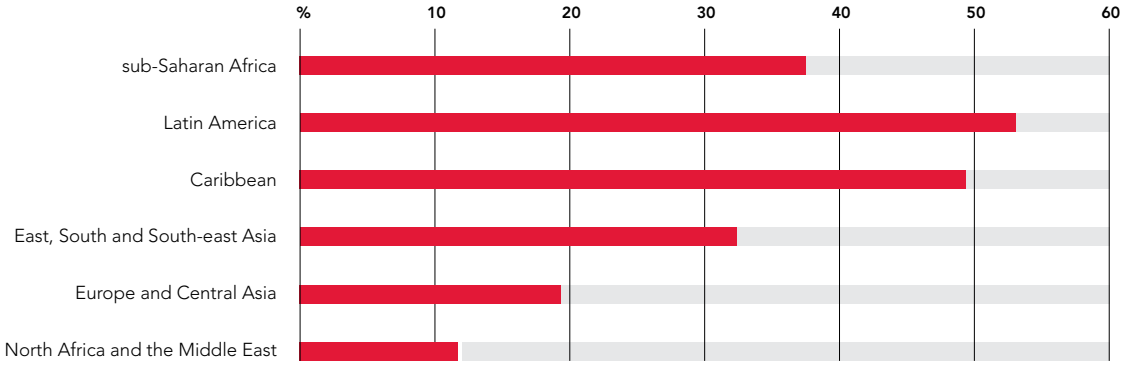
Building social coalitions to reduce vulnerability to HIV infection supports individuals and strengthens communities. Safeguarding the health of mothers and infants and optimizing infant feeding provides a strong basis for the growth of new generations. Investing in health care and social support systems, working to eliminate violence against women and girls and promote gender equality and working to end stigma and discrimination against people living with HIV and members of other marginalized groups help to provide social environments that are effective against the spread of HIV and promote more general mental and physical well-being. And in providing HIV-specific services with an awareness of other health and social issues and forging appropriate linkages, the response to HIV can make an important contribution to global health.

Figure 1.4

Treatment coverage in low- and middle-income countries

Population-adjusted averages for treatment coverage in low- and middle-income countries by geographical region in 2009 based on 2010 WHO guidelines: Millennium Development Goal target 6.B (achieve, by 2010, universal access to treatment for HIV/AIDS for all those who need it). The regional figure for North America is not shown because of lack of data.

Source: WHO Towards Universal Access 2010.



The Millennium Development Goals are intertwined. Without achieving substantive progress towards the HIV-specific Goal 6, few other Goals are likely to be reached; likewise, without integration and significant progress towards most other Goals being made, Goal 6 will probably not be achieved.

Stopping infections, saving lives and improving the quality of life of people living with HIV have always been at the heart of the global AIDS response. The successes and continuing challenges described in this report should serve as catalysts for continued action. ■

AIDS SCORECARDS

For the first time, UNAIDS is publishing scorecards to provide a quick overview of the progress made by United Nations Member States in the global AIDS response. Five scorecards for (1) HIV incidence (2) prevention, (3) treatment, care, and support, (4) human rights and gender equality, and (5) investment, show the top national values for key indicators at the end of each chapter. They provide a snapshot of achievements, failures and obstacles in achieving universal access to HIV prevention, treatment, care and support. Readers seeking more detailed data can find a comprehensive tabulation of all available data on each of the indicators used for the international monitoring of national responses to HIV in the annexes.

EPIDEMIC UPDATE

» THE OVERALL GROWTH OF THE GLOBAL AIDS EPIDEMIC APPEARS TO HAVE STABILIZED. THE ANNUAL NUMBER OF NEW HIV INFECTIONS HAS BEEN STEADILY DECLINING SINCE THE LATE 1990s AND THERE ARE FEWER AIDS-RELATED DEATHS DUE TO THE SIGNIFICANT SCALE UP OF ANTIRETROVIRAL THERAPY OVER THE PAST FEW YEARS. ALTHOUGH THE NUMBER OF NEW INFECTIONS HAS BEEN FALLING, LEVELS OF NEW INFECTIONS OVERALL ARE STILL HIGH, AND WITH SIGNIFICANT REDUCTIONS IN MORTALITY THE NUMBER OF PEOPLE LIVING WITH HIV WORLDWIDE HAS INCREASED.

New HIV infections are declining

In 2009, there were an estimated 2.6 million [2.3 million–2.8 million] people who became newly infected with HIV. This is nearly one fifth (19%) fewer than the 3.1 million [2.9 million–3.4 million] people newly infected in 1999, and more than one fifth (21%) fewer than the estimated 3.2 million [3.0 million–3.5 million] in 1997, the year in which annual new infections peaked (Figure 2.1).

In 33 countries, the HIV incidence has fallen by more than 25% between 2001 and 2009 (Figure. 2.2); 22 of these countries are in sub-Saharan Africa. In sub-Saharan Africa, where the majority of new HIV infections continue to occur, an estimated 1.8 million [1.6 million–2.0 million] people became infected in 2009; considerably lower than the estimated 2.2 million [1.9 million–2.4 million] people in sub-Saharan Africa newly infected with HIV in 2001. This trend reflects a combination of factors, including the impact of HIV prevention efforts and the natural course of HIV epidemics.

Figure 2.1
Number of people newly infected with HIV

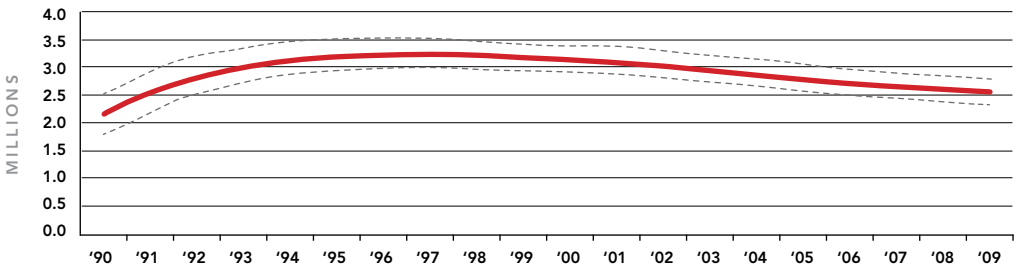
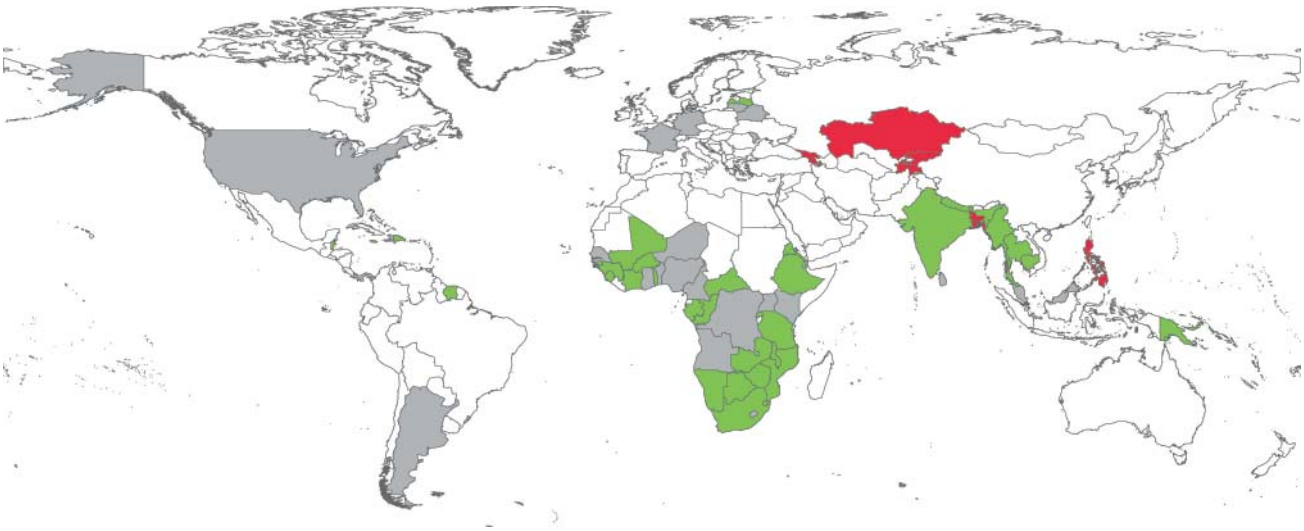


Figure 2.2

Changes in the incidence rate of HIV infection, 2001 to 2009, selected countries

Source: UNAIDS.



Increasing >25%
Stable
Decreasing >25%
Not included in analysis

In the absence of a reliable diagnostic test that can directly measure the level of new HIV infections in a population, estimates of HIV incidence have been produced through modeling The map includes 60 countries for which reliable estimates of new HIV infections over time were available from the 2010 round of country-specific estimation using the EPP/Spectrum tools, and 3 countries for which peer-reviewed publications with incidence trends were available. The EPP/Spectrum methods estimate HIV incidence trends from HIV prevalence over time combined with the changing level of antiretroviral therapy. The criteria for including countries in this analysis were as follows. EPP files were available and trends in EPP were not derived from workbook prevalence estimates; prevalence data were available up to at least 2007; there were at least four time points between 2001 and 2009 for which prevalence data were available for concentrated epidemics and at least three data points in the same period for generalized epidemics; for the majority of epidemic curves for a given country, EPP did not produce an artificial increase in HIV prevalence in recent years due to scarcity of prevalence data points; data were representative of the country; the EPP/Spectrum–derived incidence trend was not in conflict with the trend in case reports of new HIV diagnoses; and the EPP/Spectrum–derived incidence trend was not in conflict with modelled incidence trends derived from age-specific prevalence in national survey results. For some countries with complex epidemics including multiple populations groups with different risk behaviours as well as major geographic differences, such as Brazil, China and the Russian Federation, this type of assessment is highly complex and it could not be concluded in the 2010 estimation round. UNAIDS will continue to work with countries and partners to improve the quality of available information and modeling methodologies to include HIV incidence data for additional countries in future reports.

Note about Figures:
Dotted lines in figures represent ranges, solid lines represent the best estimate.

Several regions and countries do not fit the overall trend. In seven countries, the HIV incidence increased by more than 25% between 2001 and 2009. In Western, Central, and Eastern Europe, Central Asia, and North America, the rates of annual new HIV infections have been stable for at least the past five years. However, evidence is increasing of a resurgence of HIV in several high-income countries among men who have sex with men. In Eastern Europe and Central Asia, high rates of HIV transmission continue to occur in networks of people who inject drugs and their sexual partners.

Young people leading a revolution in HIV prevention

A recent analysis among young people provides further evidence of decreasing incidence and safer sexual behaviour (Table 2.1). Seven countries showed a statistically significant decline of 25% or more in HIV prevalence (the percentage of people living with HIV) by 2008 among young pregnant women attending antenatal clinics.

Table 2.1

HIV prevalence and behaviour

Trends in HIV prevalence and behaviour among young people in countries most severely affected by HIV

Source: UNAIDS.

	Prevalence data were available from antenatal care surveillance	Prevalence trend among antenatal care attendees		National HIV prevalence surveys conducted	Trend in HIV prevalence from national surveys		Percentage who have had sex by age 15		Percentage who have had sex with more than one partner in past year		Proportion who have had more than one partner not using condoms during last sex	
	PERIOD	URBAN	RURAL	YEARS	F	M	F	M	F	M	F	M
Angola	2004–2007		↑									
Bahamas	2000–2008	↓										
Belize	NA											
Botswana	2001–2006	⊙↓	⊙↓	2004, 2008	⊙↓	⊙↓						
Burundi	2000–2007	↓	↑	2002, 2007	↓	↑	↑					
Cameroon	NA						⊙↓	⊙↓	⊙↓	⊙↓	⊙↓	⊙↓
Central African Republic	ID						↑	↓				
Chad	ID						↓	↑	↓	⊙↓	↑	↓
Congo	NA											
Côte d'Ivoire	2000–2008	⊙↓	⊙↓				⊙↓	↑	⊙↓	⊙↓	⊙↓	↓
Djibouti	ID											
Ethiopia	2001–2005	⊙↓	↓				⊙↓	⊙↓	⊙↓	⊙↓		↑
Gabon	ID											
Guyana	NA											
Haiti	2000–2007	↓	↑				↑	↑	↑	↓	↑	⊙↓
Kenya	2000–2005	⊙↓	⊙↓	2003, 2007	↓	↑	↔	↓	⊙↓	⊙↓	↑	⊙↓
Lesotho	2003–2007	↓	↓									
Malawi	1999–2007	⊙↓	↑				⊙↓	⊙↓	↑	⊙↓	↔	↓
Mozambique	2001–2007	↔					↓	↑				
Namibia	2002–2008	⊙↓	⊙↓				↔	↓	↔	↓	⊙↓	↓
Nigeria	2003–2008	↓	↓				⊙↓	↓				
Rwanda	2002–2007	↓	↓				↑	↑	↔	↓		
South Africa	2000–2007	↔		2002, 2005, 2007		⊙↓			↓	↑		
Suriname	NA											
Swaziland	2002–2008	↓	↔									
Togo	2004–2007	↑	↑									
Uganda	2003–2008	↑	↑				⊙↓	↓	↑	↔	⊙↓	⊙↓
United Republic of Tanzania	2002–2006	↓	↓	2003, 2004, 2007	↓	⊙↓	↓	⊙↓	⊙↓	⊙↓	⊙↓	⊙↓
Zambia	2002–2006	↓	↓	2002, 2007	⊙↓	↑	⊙↓	⊙↓	⊙↓	⊙↓	⊙↓	↓
Zimbabwe	2000–2006	⊙↓	⊙↓	2002, 2006	⊙↓	↓	↓	⊙↓	⊙↓	⊙↓	↔	↔

NOTES: NA=Not Available ID=Insufficient Data M=Male F=Female

↑ Increasing Trends ↓ Decreasing Trends ↔ No Evidence of Change ◯ Declining trend is statistically significant

Five countries—Botswana, South Africa, United Republic of Tanzania, Zambia, and Zimbabwe—showed a significant decline in HIV prevalence among young women or men in national surveys. Sexual behaviour changed in most countries. In eight countries with significant declines in HIV prevalence, the sexual behaviour of either men or women also changed significantly.

New infections among children decreasing

As access to services for preventing the mother-to-child transmission of HIV has increased, the total number of children being born with HIV has decreased. An estimated 370 000 [230 000–510 000] children were newly infected with HIV in 2009 (a drop of 24% from five years earlier).

AIDS-related deaths are decreasing

The number of annual AIDS-related deaths worldwide is steadily decreasing from the peak of 2.1 million [1.9 million–2.3 million] in 2004 to an estimated 1.8 million [1.6 million–2.1 million] in 2009 (Figure 2.3). The decline reflects the increased availability of antiretroviral therapy, as well as care and support, to people living with HIV, particularly in middle- and low-income countries; it is also a result of decreasing incidence starting in the late 1990s.

19%

Estimated decrease in AIDS-related deaths globally among children from 2004 to 2009.

The effects of antiretroviral therapy are especially evident in sub-Saharan Africa, where an estimated 320 000 (or 20%) fewer people died of AIDS-related causes in 2009 than in 2004, when antiretroviral therapy began to be dramatically expanded (Figure 2.5).

AIDS-related mortality began to decline in sub-Saharan Africa and the Caribbean in 2005. Different patterns have emerged in other regions. In North America and Western and Central Europe, deaths due to AIDS began to decline soon after antiretroviral therapy was introduced in 1996. In Asia and Central and South America, the number of deaths has stabilized, but there is no indication yet of decline. Deaths continue to increase in Eastern Europe.

Globally, deaths among children younger than 15 years of age are also declining. The estimated 260 000 [150 000–360 000] children who died from AIDS-related illnesses in 2009 were 19% fewer than the estimated 320 000 [210 000–430 000] who died in 2004. This trend reflects the steady expansion of services to prevent transmission of HIV to infants and an increase (albeit slow) in access to treatment for children.

Table 2.2

Regional HIV and AIDS statistics, 2001 and 2009

Regional figures on adults and children newly infected and living with HIV and AIDS-related deaths

Source: UNAIDS.

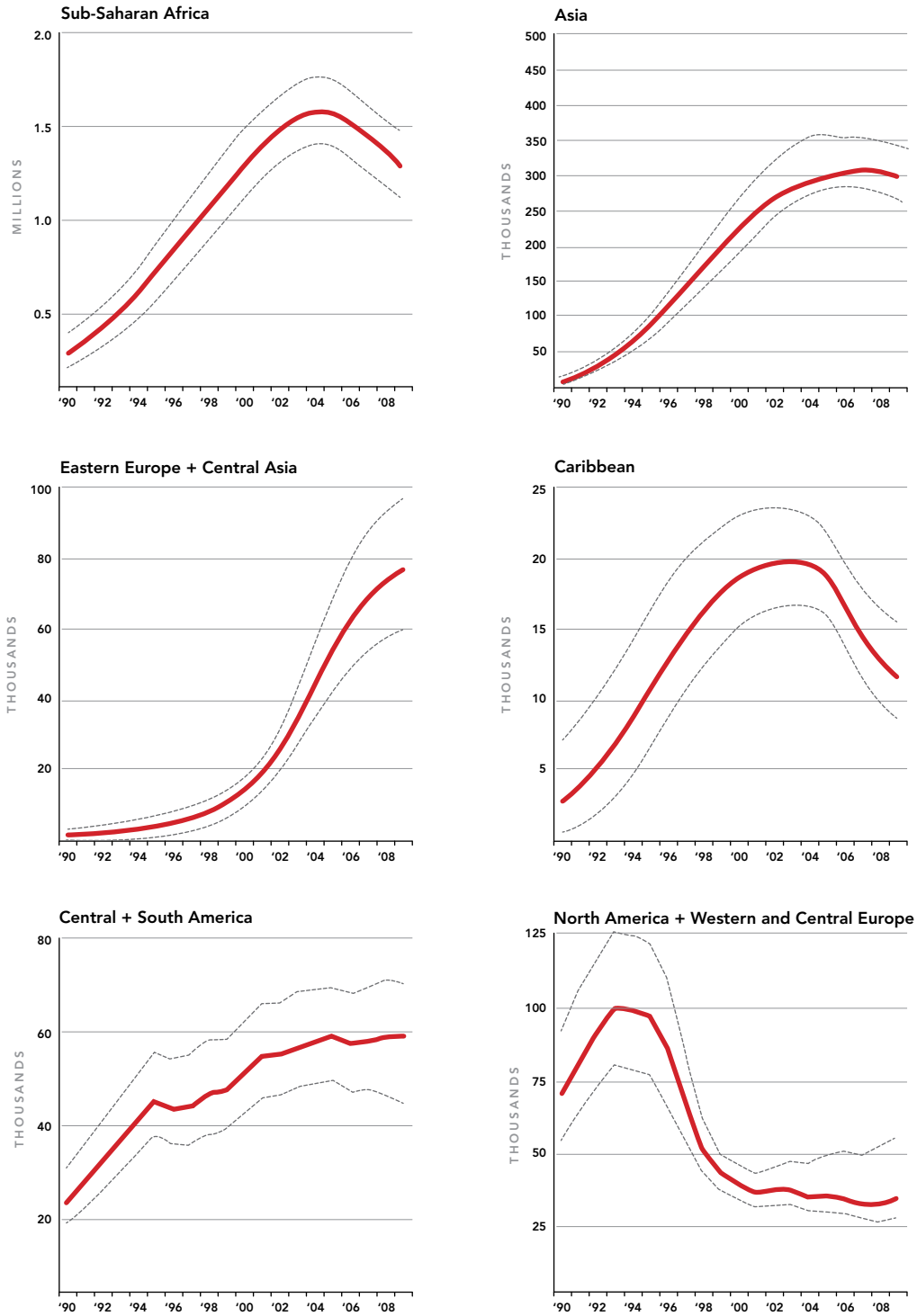
		Adults and children living with HIV	Adults and children newly infected with HIV	% Adult prevalence (15–49 years)	AIDS-related deaths among adults and children
SUB-SAHARAN AFRICA	2009	22.5 million [20.9–24.2 million]	1.8 million [1.6–2.0 million]	5.0 [4.7–5.2]	1.3 million [1.1–1.5 million]
	2001	20.3 million [18.9–21.7 million]	2.2 million [1.9–2.4 million]	5.9 [5.6–6.1]	1.4 million [1.2–1.6 million]
MIDDLE EAST AND NORTH AFRICA	2009	460 000 [400 000–530 000]	75 000 [61 000–92 000]	0.2 [0.2–0.3]	24 000 [20 000–27 000]
	2001	180 000 [150 000–210 000]	36 000 [32 000–42 000]	0.1 [0.1–0.1]	8300 [6300–11 000]
SOUTH AND SOUTH-EAST ASIA	2009	4.1 million [3.7–4.6 million]	270 000 [240 000–320 000]	0.3 [0.3–0.3]	260 000 [230 000–300 000]
	2001	3.8 million [3.5–4.2 million]	380 000 [350 000–430 000]	0.4 [0.3–0.4]	230 000 [210 000–280 000]
EAST ASIA	2009	770 000 [560 000–1.0 million]	82 000 [48 000–140 000]	0.1 [0.1–0.1]	36 000 [25 000–50 000]
	2001	350 000 [250 000–480 000]	64 000 [47 000–88 000]	<0.1 [<0.1–<0.1]	15 000 [9400–28 000]
OCEANIA	2009	57 000 [50 000–64 000]	4500 [3400–6000]	0.3 [0.2–0.3]	1400 [<1000–2400]
	2001	29 000 [23 000–35 000]	4700 [3800–5600]	0.2 [0.1–0.2]	<1000 [<500–1100]
CENTRAL AND SOUTH AMERICA	2009	1.4 million [1.2–1.6 million]	92 000 [70 000–120 000]	0.5 [0.4–0.6]	58 000 [43 000–70 000]
	2001	1.1 million [1.0–1.3 million]	99 000 [85 000–120 000]	0.5 [0.4–0.5]	53 000 [44 000–65 000]

		Adults and children living with HIV	Adults and children newly infected with HIV	% Adult prevalence (15–49 years)	AIDS-related deaths among adults and children
CARIBBEAN	2009	240 000 [220 000–270 000]	17 000 [13 000–21 000]	1.0 [0.9–1.1]	12 000 [8500–15 000]
	2001	240 000 [210 000–270 000]	20 000 [17 000–23 000]	1.1 [1.0–1.2]	19 000 [16 000–23 000]
EASTERN EUROPE AND CENTRAL ASIA	2009	1.4 million [1.3–1.6 million]	130 000 [110 000–160 000]	0.8 [0.7–0.9]	76 000 [60 000–95 000]
	2001	760 000 [670 000–890 000]	240 000 [210 000–300 000]	0.4 [0.4–0.5]	18 000 [14 000–23 000]
WESTERN AND CENTRAL EUROPE	2009	820 000 [720 000–910 000]	31 000 [23 000–40 000]	0.2 [0.2–0.2]	8500 [6800–19 000]
	2001	630 000 [570 000–700 000]	31 000 [27 000–35 000]	0.2 [0.2–0.2]	7300 [5700–11 000]
NORTH AMERICA	2009	1.5 million [1.2–2.0 million]	70 000 [44 000–130 000]	0.5 [0.4–0.7]	26 000 [22 000–44 000]
	2001	1.2 million [960 000–1.4 million]	66 000 [54 000–81 000]	0.4 [0.4–0.5]	30 000 [26 000–35 000]
TOTAL	2009	33.3 million [31.4–35.3 million]	2.6 million [2.3–2.8 million]	0.8 [0.7–0.8]	1.8 million [1.6–2.1 million]
	2001	28.6 million [27.1–30.3 million]	3.1 million [2.9–3.4 million]	0.8 [0.7–0.8]	1.8 million [1.6–2.0 million]

Figure 2.3

Annual AIDS-related deaths by region, 1990-2009

Source: UNAIDS.



Trends in the number of people living with HIV

UNAIDS estimates that there were 33.3 million [31.4 million–35.3 million] people living with HIV at the end of 2009 compared with 26.2 million [24.6 million–27.8 million] in 1999—a 27% increase (Figure 2.4 and Figure 2.5). Although the annual number of new HIV infections has been steadily declining since the late 1990s, this decrease is offset by the reduction in AIDS-related deaths due to the significant scale up of antiretroviral therapy over the past few years (Table 2.2).

This report revises the estimate of the number of people living with HIV in 2008 of 33.4 million [31.1 million–35.8 million] published in *AIDS epidemic update: November 2009*, to 32.8 million [30.9 million–34.7 million], which is within the uncertainty range of the previous estimate. This revision is based on additional data becoming available for many countries, including data from population-based surveys such as in Mozambique. *AIDS epidemic update: November 2009* included Mexico in Latin America. This report includes Mexico in North America and categorizes the rest of Latin America as Central and South America. This report presents trend analysis based on the new definition of these regions.

The estimated number of children living with HIV increased to 2.5 million [1.7 million–3.4 million] in 2009 (Figure 2.3). The proportion of women living with HIV has remained stable, at slightly less than 52% of the global total (Figure 2.6).

Figure 2.4

Global prevalence of HIV, 2009

Source: UNAIDS.

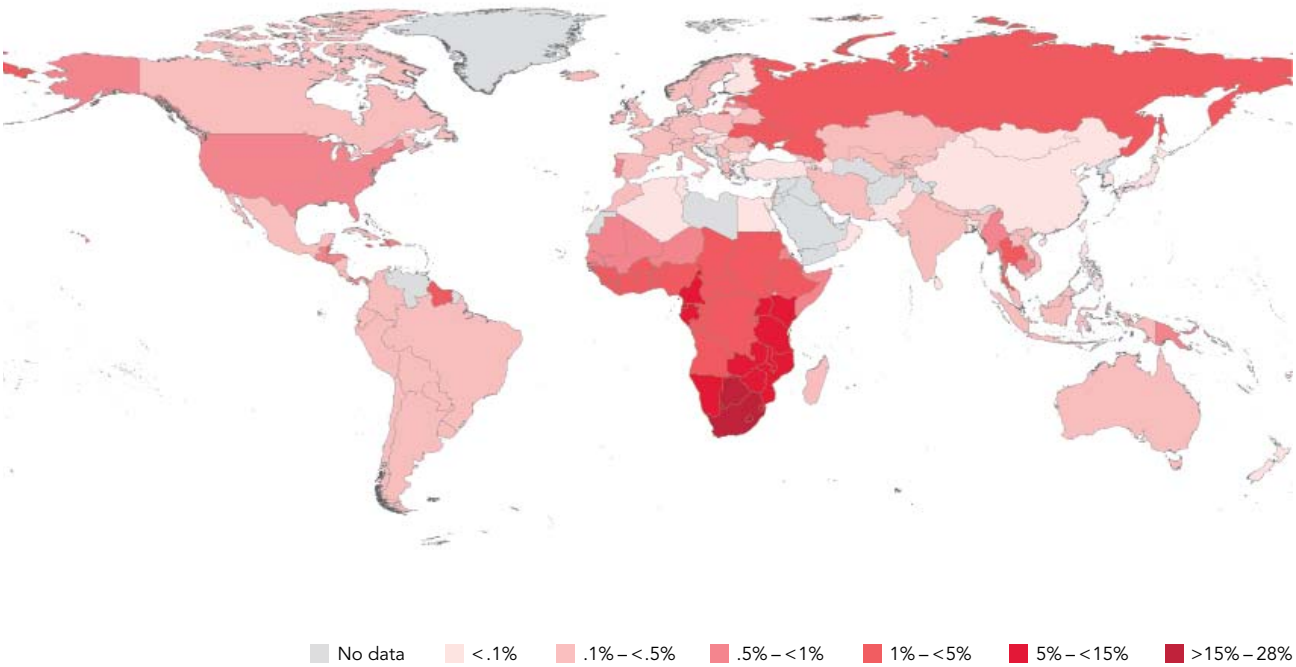
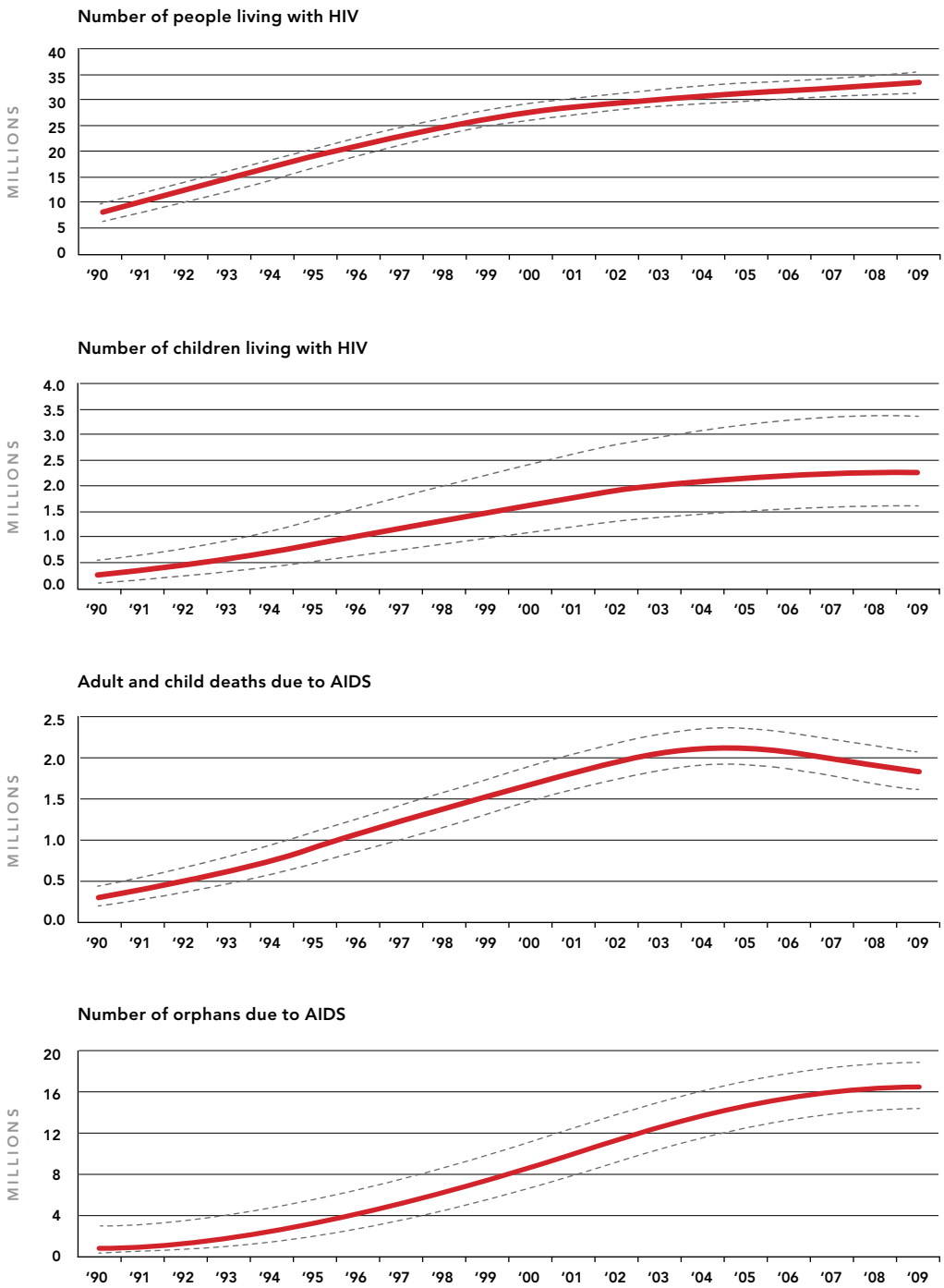


Figure 2.5

Global HIV trends, 1990 to 2009

Source: UNAIDS.



Sub-Saharan Africa still bears an inordinate share of the global HIV burden. Although the rate of new HIV infections has decreased, the total number of people living with HIV continues to rise. In 2009, that number reached 22.5 million [20.9 million–24.2 million], 68% of the global total. Sub-Saharan Africa has more women than men living with HIV.

The largest epidemics in sub-Saharan Africa—Ethiopia, Nigeria, South Africa, Zambia, and Zimbabwe—have either stabilized or are showing signs of decline. The estimated 1.3 million [1.1 million–1.5 million] people who died of HIV-related illnesses in sub-Saharan Africa in 2009 comprised 72% of the global total of 1.8 million [1.6 million–2.0 million] deaths attributable to the epidemic.

Figure 2.6

Trends in women living with HIV

Proportion of people 15 years and older living with HIV who are women, 1990–2009.

Source: UNAIDS.

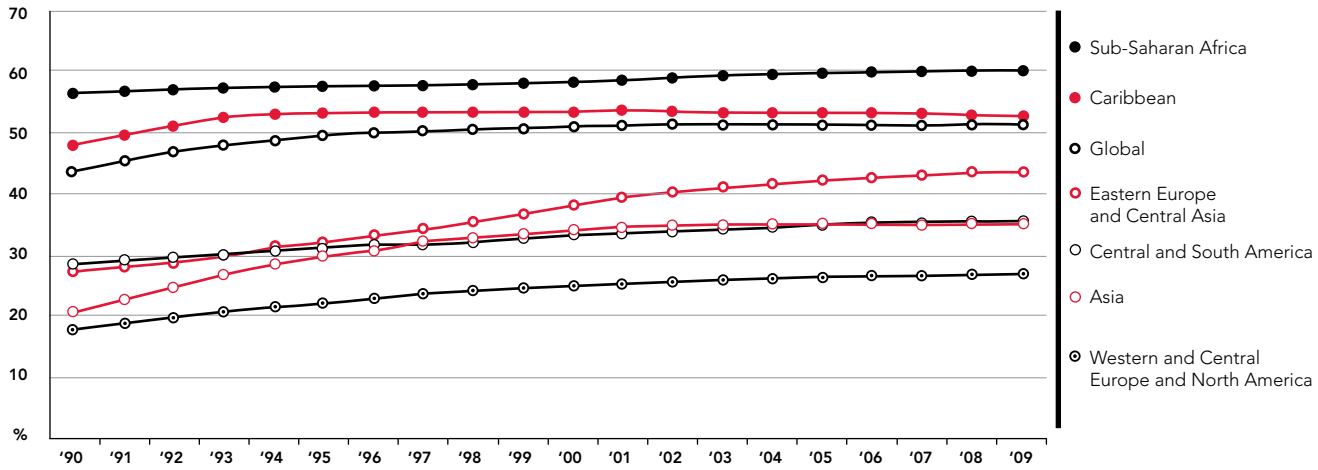


Table 2.3

AIDS statistics for sub-Saharan Africa, 2001 and 2009

Source: UNAIDS.

		People living with HIV	People newly infected with HIV	Children living with HIV	AIDS-related deaths
SUB-SAHARAN AFRICA	2009	22.5 million [20.9–24.2 million]	1.8 million [1.6–2.0 million]	2.3 million [1.4–3.1 million]	1.3 million [1.1–1.5 million]
	2001	20.3 million [18.9–21.7 million]	2.2 million [1.9–2.4 million]	1.8 million [1.1–2.5 million]	1.4 million [1.2–1.6 million]

Figure 2.7

HIV prevalence in sub-Saharan Africa

HIV prevalence among adults aged 15–49 years old in sub-Saharan Africa, 1990 to 2009.

Source: UNAIDS.

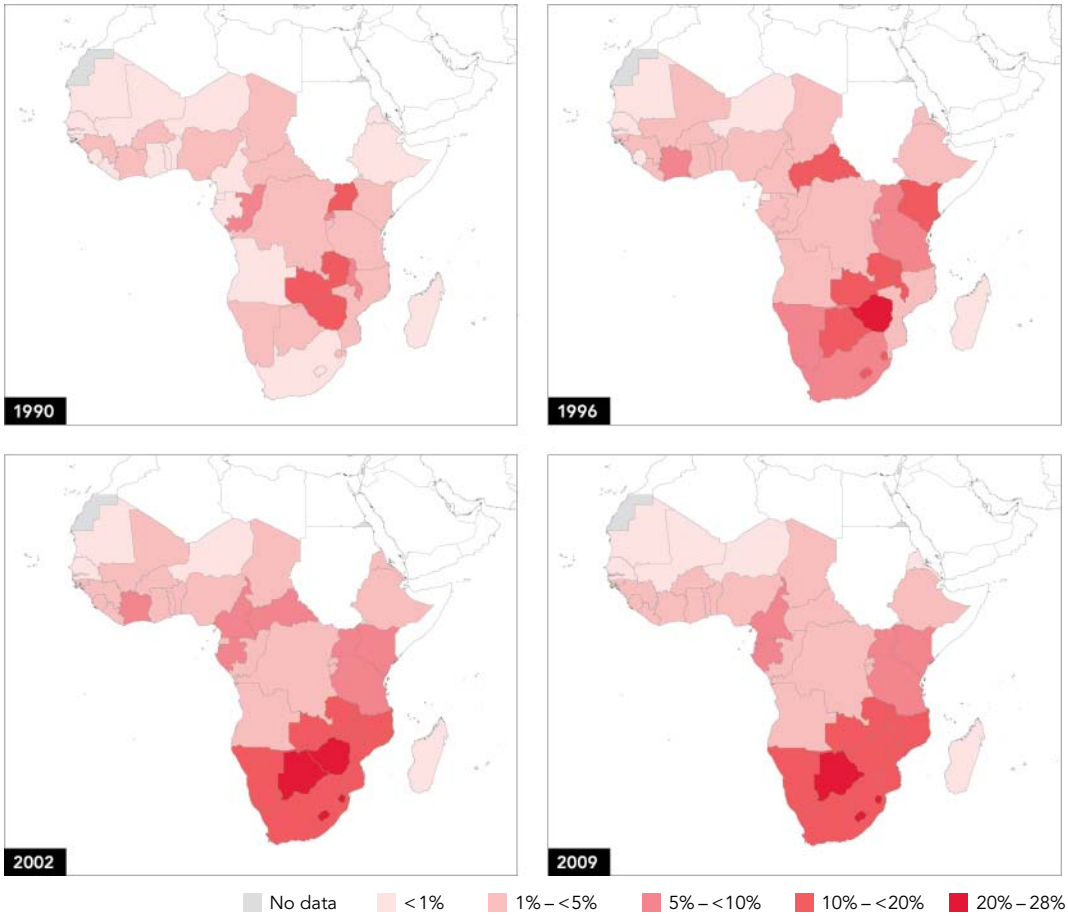
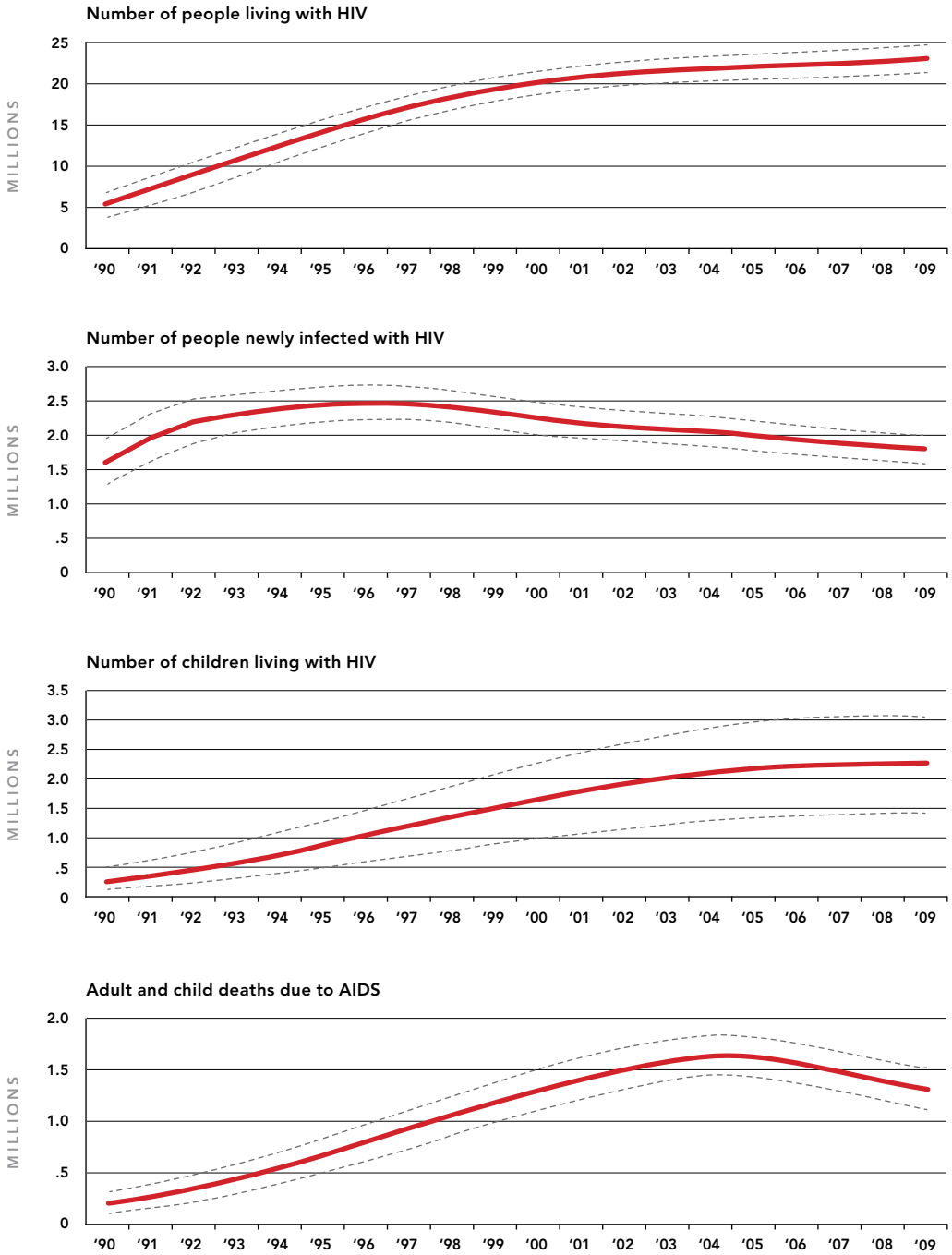


Figure 2.8

HIV trends in sub-Saharan Africa

Source: UNAIDS.



SUB-SAHARAN AFRICA

Sub-Saharan Africa still bears an inordinate share of the global HIV burden

The epidemics in sub-Saharan Africa vary considerably, with southern Africa[1] still the most severely affected (Table 2.2 and Figure 2.8). An estimated 11.3 million [10.6 million–11.9 million] people were living with HIV in southern Africa in 2009, nearly one third (31%) more than the 8.6 million [8.2 million– 9.1 million] people living with HIV in the region a decade earlier.

Globally, 34% of people living with HIV in 2009 resided in the 10 countries in southern Africa; 31% of new HIV infections in the same year occurred in these 10 countries, as did 34% of all AIDS-related deaths. About 40% of all adult women with HIV live in southern Africa.

HIV incidence falling in 22 countries in sub-Saharan Africa

The HIV incidence (number of people newly infected with HIV) appears to have peaked in the mid-1990s, and there is evidence of declines in incidence in several countries in sub-Saharan Africa. Between 2001 and 2009, the incidence of HIV infection declined by more than 25% in an estimated 22 countries.

5.6m

With an estimated 5.6 million people living with HIV in 2009, South Africa's epidemic remains the largest in the world.

In Zimbabwe, the main behavioural change appears to have been a reduction in the proportion of men with casual partners, while condom use with non-regular partners has remained high since the late 1990s (1,2).

With an estimated 5.6 million [5.4 million–5.8 million] people living with HIV in 2009, South Africa's epidemic remains the largest in the world. New indications show a slowing of HIV incidence amid some signs of a shift towards safer sex among young people (3). The annual HIV incidence among 18-year-olds declined sharply from 1.8% in 2005 to 0.8% in 2008, and among women 15–24 years old it dropped from 5.5% in 2003–2005 to 2.2% in 2005–2008 (4).

Other epidemics in southern Africa have also levelled off at very high levels. At an estimated 25.9% [24.9%–27.0%] in 2009, Swaziland has the highest adult HIV prevalence in the world.

The epidemics in East Africa have declined since 2000 but are stabilizing in many countries. The HIV incidence slowed in the United Republic of Tanzania to about 3.4 per 1000 person-years between 2004 and 2008 (5). The national HIV prevalence in Kenya fell from about 14% in the mid-1990s to 5% in 2006 (6). The HIV prevalence in Uganda has stabilized at between 6.5% and 7.0% since 2001. The HIV prevalence in Rwanda has been about 3.0% since 2005.

The HIV prevalence in West and Central Africa remains comparatively low, with the adult HIV prevalence estimated at 2% or under in 12 countries in 2009 (Benin, Burkina Faso, Democratic Republic of the Congo, Gambia, Ghana, Guinea, Liberia, Mali, Mauritania, Niger, Senegal, and Sierra Leone). The prevalence of HIV is highest in Cameroon at 5.3% [4.9%–5.8%], Central African Republic 4.7% [4.2%–5.2%], Côte d'Ivoire 3.4% [3.1%–3.9%], Gabon 5.2% [4.2%–6.2%], and Nigeria 3.6% [3.3%–4.0%].

[1] Angola, Botswana, Lesotho, Malawi, Mozambique, Namibia, South Africa, Swaziland, Zambia, and Zimbabwe.

Slight declines in prevalence have been detected in household surveys in Mali and Niger and among antenatal clinic attendees in Benin, Burkina Faso, Côte d'Ivoire, and Togo (7).

Reducing new HIV infections among children

There has been pronounced progress in reducing the incidence and impact of HIV among children younger than 15 years in southern Africa. There were 32% fewer children newly infected—an estimated 130 000 [90 000–160 000] versus 190 000 [140 000–230 000]—and 26% fewer AIDS-related deaths among children—90 000 [61 000–110 000] versus 120 000 [88 000–150 000]—in 2009 compared with 2004. About 890 children became newly infected with HIV in Botswana in 2007, down from 4600 in 1999 (information from NACA).

South Africa is one of the few countries in the world where child and maternal mortality has risen since the 1990s (8). AIDS is the largest cause of maternal mortality in South Africa and also accounts for 35% of deaths in children younger than five years (3).

AIDS-related mortality decreasing

The scaling up of treatment is profoundly affecting sub-Saharan Africa. At the end of 2009, 37% of adults and children eligible for antiretroviral therapy were receiving it in the region overall (41% in Eastern and Southern Africa and 25% in Western and Central Africa), compared with only 2% seven years earlier (9). AIDS-related deaths decreased by 18% in southern Africa—an estimated 610 000 [530 000–700 000] people died from AIDS-related illnesses in southern Africa in 2009, compared with 740 000 [670 000–820 000] five years earlier.

In Botswana, where antiretroviral therapy coverage exceeds 90%, the estimated annual number of AIDS-related deaths declined by half (from 18 000 [15 000–22 000] in 2002 to 9100 [2400–19 000] in 2009), while the estimated number of children newly orphaned by AIDS fell by 40% (10). The extensive provision of antiretroviral therapy has averted an estimated 50 000 adult deaths and, if this is sustained, Botswana could avert a further estimated 130 000 deaths through 2016 (11).

AIDS-related deaths in Kenya fell by 29% between 2002 and 2007 (6). In rural Malawi, provision of antiretroviral therapy was linked to a 10% drop in the adult death rate between 2004 and 2008 (12). Antiretroviral therapy and other types of treatment have expanded since the early 2000s, but the number of AIDS-related deaths remains high.

Most people receiving antiretroviral therapy in sub-Saharan Africa start treatment late (13), which limits the overall impact of HIV treatment programmes. The infrastructure, systems, and staff required to properly monitor treatment retention and loss are becoming increasingly inadequate as programmes are scaled up. As HIV testing expands, systems are strengthened to monitor the health status of people living with HIV, and access to treatment is provided at the appropriate time, AIDS-related mortality is likely to further reduce.

25.9%

At an estimated 25.9% in 2009, Swaziland has the highest adult HIV prevalence in the world.

SUB-SAHARAN AFRICA

Addressing sexual behaviour to prevent the sexual transmission of HIV

The vast majority of people newly infected with HIV in sub-Saharan Africa are infected during unprotected heterosexual intercourse (including paid sex) and onward transmission of HIV to newborns and breastfed babies. Having unprotected sex with multiple partners remains the greatest risk factor for HIV in this region. Large proportions of people living with HIV are in long-term relationships—62% in Kenya and 78% in Malawi, for example (14).

As mainly heterosexual epidemics evolve, the numbers of discordant couples (only one person is infected with HIV) increase and HIV transmission within long-term relationships increases (15). Research in 12 countries in eastern and southern Africa shows that prevalence of discordant couples is high, ranging between 36% and 85% (16).

Urban data in Zambia suggest that 60% of the people newly infected through heterosexual transmission are infected within marriage or cohabitation (17), compared with more than half (50%–65%) in Swaziland (18), 35%–62% in Lesotho (19) and an estimated 44% in Kenya (20).

Prevention strategies, however, often do not adequately address the patterns of HIV transmission. Couples testing and other prevention services for serodiscordant couples receive inadequate support (20).

Increasing evidence indicates that unprotected paid sex, sex between men, and the use of contaminated drug-injecting equipment by two or more people on the same occasion are significant factors in the HIV epidemics of several countries with generalized epidemics. Together, those modes of transmission are believed to account for about 33% of new HIV infections in Kenya and almost 40% in Ghana, for example. However, comparatively little funding is channelled into prevention services for populations at higher risk (20).

Paid sex remains an important factor in many of the HIV epidemics in Western, Central and Eastern Africa. It is estimated that almost one third (32%) of new HIV infections in Ghana, 14% in Kenya and 10% in Uganda are linked to sex work (HIV infection among sex workers, their clients, or their other sex partners) (20, 21).

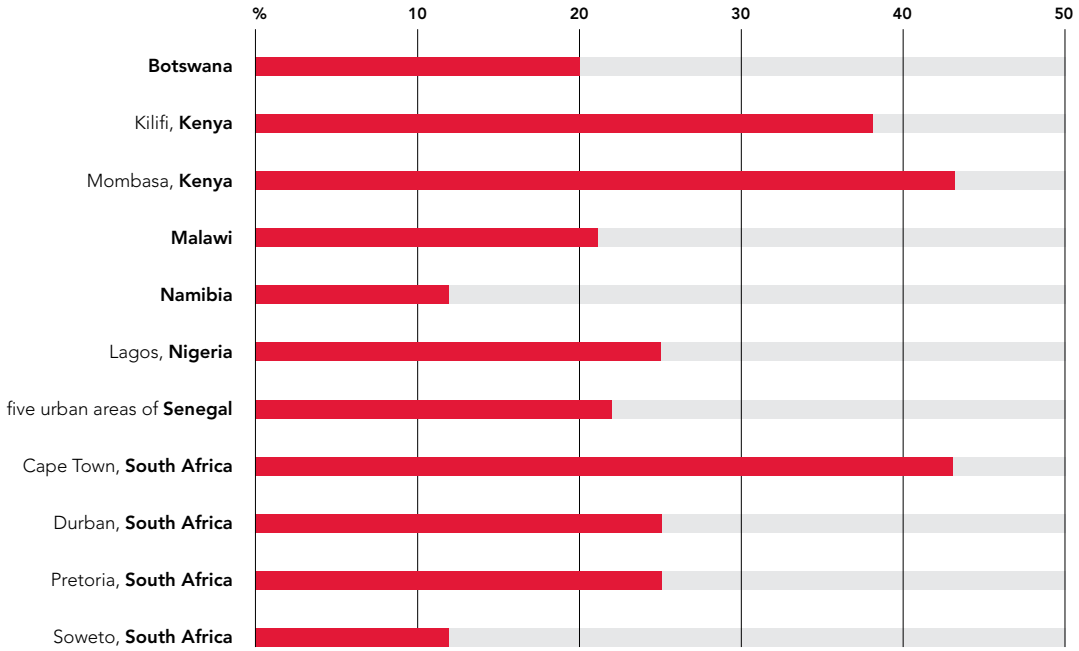
Results from recent studies in sub-Saharan Africa indicate the existence of groups of men who have sex with men and high levels of HIV infection among them (Figure 2.9) (22). Up to 20% of new HIV infections in Senegal (23) and 15% of those in Kenya (20) and Rwanda (24) could be linked to unprotected sex between men. Available evidence suggests that in sub-Saharan Africa, as elsewhere in the world, the majority of men who have sex with men also have sex with women. In Senegal, four fifths (82%) of the surveyed men who have sex with men said that they also have sex with women (25). In Malawi, one third of men who have sex with men were married or cohabiting with a woman (26), as were two thirds of those surveyed in the Nigerian state of Enugu (27).

Figure 2.9

HIV among men who have sex with men in sub-Saharan Africa

HIV prevalence (%) among male adults 15–49 years old who have sex with men in seven countries in sub-Saharan Africa, 2009 or latest available year.

Source: Baral et al. (28); Nigeria Federal Ministry of Health (29); Lane et al. (30); Parry et al. (31); Sander et al. (32); Sander et al. (33); and Wade et al. (34).



Injecting drug use appearing in sub-Saharan Africa

Injecting drug use is a relatively recent phenomenon in sub-Saharan Africa that features in some of the region's epidemics, including in Kenya, Mauritius, South Africa, and the United Republic of Tanzania. Uniquely in sub-Saharan Africa, injecting drug use is the main driver of the comparatively small HIV epidemic in Mauritius (35). Available research shows high HIV prevalence among people who inject drugs: 36% among those tested in Nairobi (Kenya) (36), 26% in Zanzibar (37), and an estimated 12% in South Africa (38). In 2007, 10% of people who inject drugs surveyed in the Kano region of Nigeria tested HIV-positive (29). Overall, however, injecting drug use remains a minor factor in most of the epidemics in the region. In Kenya, for example, it accounted for an estimated 3.8% of people newly infected with HIV in 2006 (20). ■

Table 2.4
AIDS statistics for Asia, 2001 and 2009

Source: UNAIDS.

		People living with HIV	People newly infected with HIV	Children living with HIV	AIDS-related deaths
ASIA	2009	4.9 million [4.5–5.5 million]	360 000 [300 000–430 000]	160 000 [110 000–210 000]	300 000 [260 000–340 000]
	2001	4.2 million [3.8–4.6 million]	450 000 [410 000–500 000]	100 000 [69 000–140 000]	250 000 [220 000–300 000]

Figure 2.10
HIV prevalence in Asia
HIV prevalence among adults aged 15–49 years old in Asia, 1990 to 2009.

Source: UNAIDS.

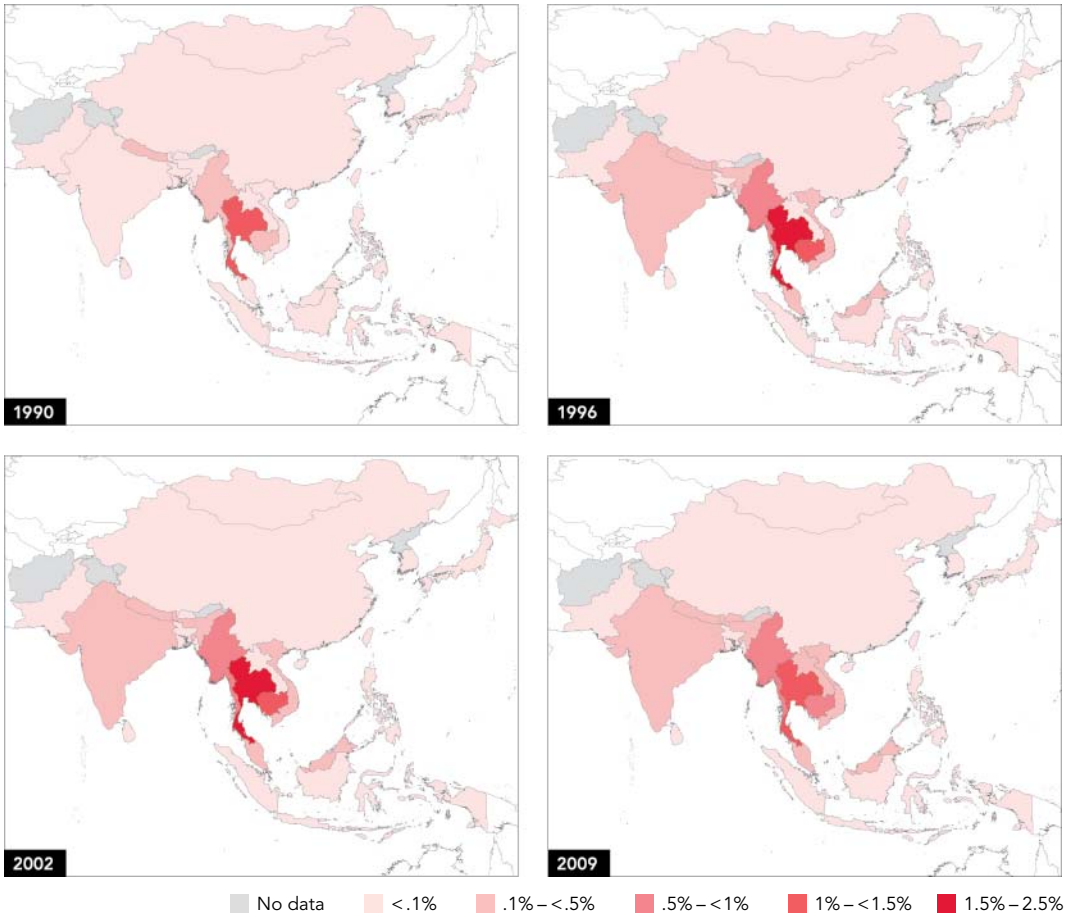
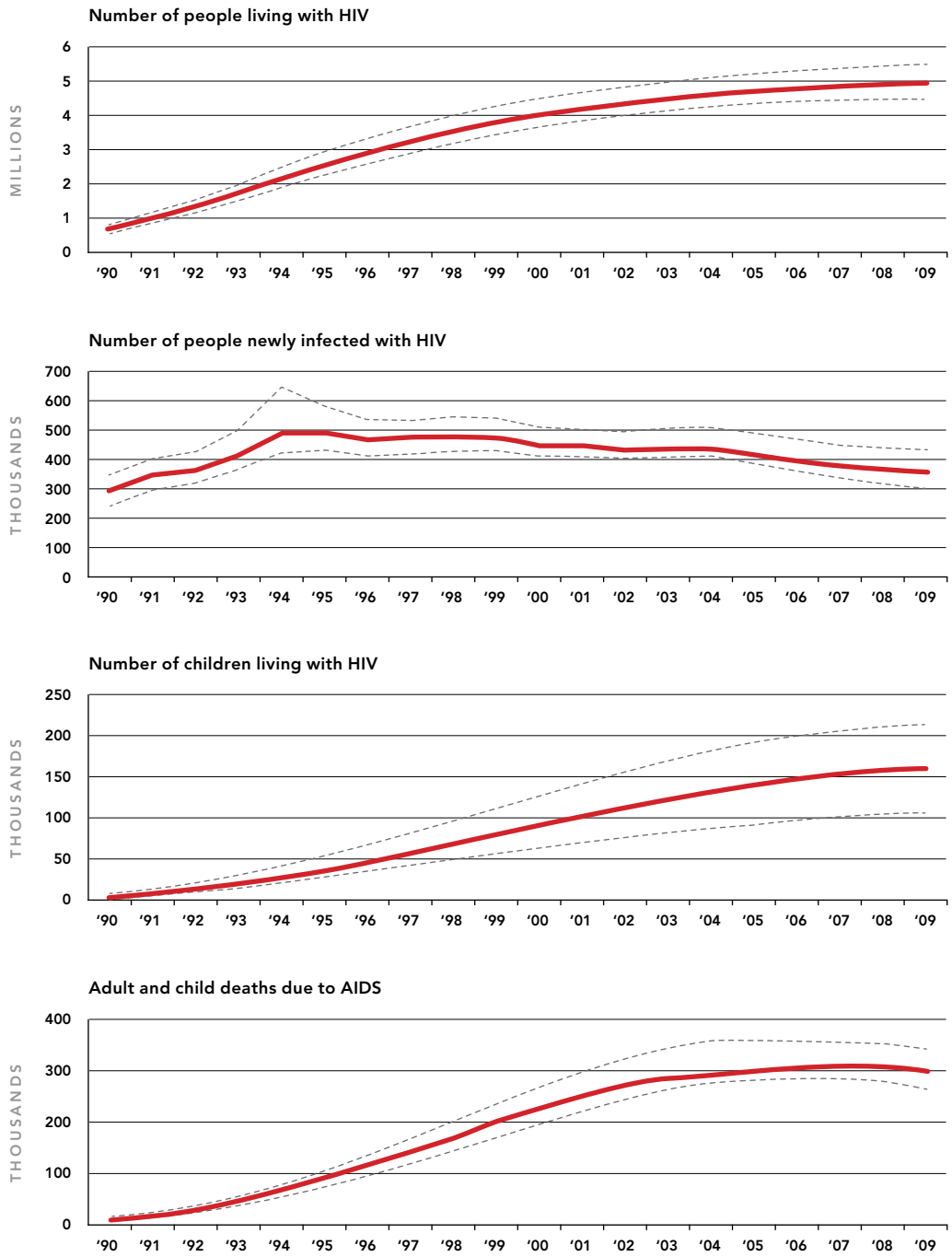


Figure 2.11
HIV trends in Asia

Source: UNAIDS.



ASIA

Asian epidemic largely stable

In Asia, an estimated 4.9 million [4.5 million–5.5 million] people were living with HIV in 2009, about the same as five years earlier (Table 2.4 and Figure 2.11). Most national HIV epidemics appear to have stabilized. No country in the region has a generalized epidemic. Thailand is the only country in this region in which the prevalence is close to 1%, and its epidemic appears to be stable overall. A resurgent epidemic in the late 1990s (when up to 60 000 people were becoming newly infected annually) has since receded. The adult HIV prevalence was 1.3% [0.8%–1.4%] in 2009, and the HIV incidence had slowed to 0.1% (39). In Cambodia, the adult HIV prevalence declined to 0.5% [0.4%–0.8%] in 2009, down from 1.2% [0.8%–1.6%] in 2001. But the HIV prevalence is increasing in such low-prevalence countries as Bangladesh, Pakistan (where drug injecting is the main mode of HIV transmission), and the Philippines.

"HIV PREVALENCE IS INCREASING IN LOW-PREVALENCE COUNTRIES SUCH AS PAKISTAN, WHERE DRUG INJECTING IS THE MAIN MODE OF HIV TRANSMISSION."

New HIV infections—mixed progress

There were 360 000 [300 000–430 000] people newly infected with HIV in 2009, 20% lower than the 450 000 [410 000–500 000] in 2001. Incidence fell by more than 25% in India, Nepal, and Thailand between 2001 and 2009. The epidemic remained stable in Malaysia and Sri Lanka during this time period.

Incidence increased by 25% in Bangladesh and Philippines between 2001 and 2009 even as the countries continue to have relatively low epidemic levels.

Epidemic patterns vary—between and within countries

The overall trends in this region hide important variation in the epidemics, both between and within countries. In most of them, the epidemics appear stable. In many countries in the region, national epidemics are concentrated in a relatively small number of provinces. In China, five provinces account for just over half (53%) of the people living with HIV (40), and HIV infection levels in Indonesia's Papua province are 15 times higher than the national average (41).

Asia's epidemics remain concentrated largely among people who inject drugs, sex workers and their clients, and men who have sex with men. Incidence patterns can vary considerably in large countries such as India. About 90% of people newly infected with HIV in India are believed to have acquired it during unprotected sex, but the common use of contaminated injecting equipment by two or more people on the same occasion is the main mode of HIV transmission in the country's north-eastern states (42).

Sex work—central to the region's epidemics

Paid sex features centrally in the region's HIV epidemics. In some countries such as Viet Nam, condom use during commercial sex is infrequent. Further, the people who inject drugs in some countries are also buying or selling sex. Almost one in five (18%) surveyed female sex workers in Myanmar tested HIV-positive in the mid-2000s. In southern India, up to 15% of female sex workers were living with HIV (43). The Indian state of Karnataka has shown evidence that intensive HIV prevention efforts among female sex workers can be highly effective. A four-year prevention programme in 18 of the state's 27 districts almost halved HIV prevalence among young antenatal clinic attendees (from 1.4% to 0.8%) (44).

Injecting drug use—fuelling new epidemics

It is estimated that as many as 4.5 million people in Asia inject drugs, more than half of whom live in China (38). India, Pakistan, and Viet Nam also have large numbers of people who inject drugs. In Asia, on average, an estimated 16% of the people who inject drugs are living with HIV, although the prevalence is considerably higher in some countries. In studies in Myanmar, up to 38% of the people who inject drugs have tested HIV-positive; this is estimated to be 30%–50% in Thailand and more than half in parts of Indonesia (41,45,46). In Viet Nam, between 32% and 58% of people who inject drugs are living with HIV in various provinces (47–49). In China, an estimated 7%–13% of the people who inject drugs are living with HIV (40).

Men who have sex with men—marginalized but not marginal to the growth of the epidemic

High HIV prevalence among men who have sex with men has been reported in several countries: 29% in Myanmar (50), 5% nationally in Indonesia (41), 6% in the Laotian capital of Vientiane (51), between 7% and 18% in parts of southern India (52), and 9% in rural parts of Tamil Nadu state in India (53). The epidemic among men who have sex with men in Thailand had been largely ignored until a study uncovered 17% prevalence in Bangkok in 2005. Subsequent studies in 2005 and 2007 found that the infection levels had risen to 28% and 31% (54), and an annual HIV incidence of 5.5% was recorded in 2008 (55).

Surveys have also found rising HIV prevalence in China among men who have sex with men, including in Shandong (56) and Jiangsu provinces (57) and in the city of Beijing (58). Although studies in Asia suggest that a significant proportion of men who have sex with men also have sex with women (51), the risk of living with HIV appears to be much higher for men who only have sex with men (56,59).

As the epidemics mature in Asia, HIV is spreading more widely, especially to the female partners of people who inject drugs and the clients of sex workers and their other sex partners. In Asia overall, women account for a growing proportion of HIV infections: from 21% in 1990 to 35% in 2009.

New HIV infections among children

The estimated number of children younger than 15 years living with HIV has increased marginally, from 140 000 [92 000–190 000] in 2005 to 160 000 [110 000 –210 000] in 2009. But decreasing HIV incidence and slowly widening access to services that prevent mother-to-child transmission of HIV have led to a steep drop in the number of children becoming newly infected. An estimated 22 000 [15 000–31 000] children aged 0–14 years became infected in 2009—a 15% decrease on the 1999 estimate of 26 000 [18 000–38 000]. AIDS-related deaths in this age group have declined by 15% since 2004, from 18 000 [11 000–25 000] to 15 000 [9000–22 000].

AIDS-related mortality stable

The number of deaths has stabilized in Asia, but there are no indications of a decline. There were an estimated 300 000 [260 000–340 000] AIDS-related deaths in 2009 compared with 250 000 [220 000–300 000] in 2001. ■

Table 2.5

AIDS statistics for Eastern Europe and Central Asia, 2001 and 2009

Source: UNAIDS.

		People living with HIV	People newly infected with HIV	Children living with HIV	AIDS-related deaths
EASTERN EUROPE + CENTRAL ASIA	2009	1.4 million [1.3–1.6 million]	130 000 [110 000–160 000]	18 000 [8600–29 000]	76 000 [60 000–95 000]
	2001	760 000 [670 000–890 000]	240 000 [210 000–300 000]	4000 [2000–6100]	18 000 [14 000–23 000]

Figure 2.12

HIV prevalence in Eastern Europe and Central Asia

HIV prevalence among adults aged 15–49 years old in Eastern Europe and Central Asia, 1990 to 2009.

Source: UNAIDS.

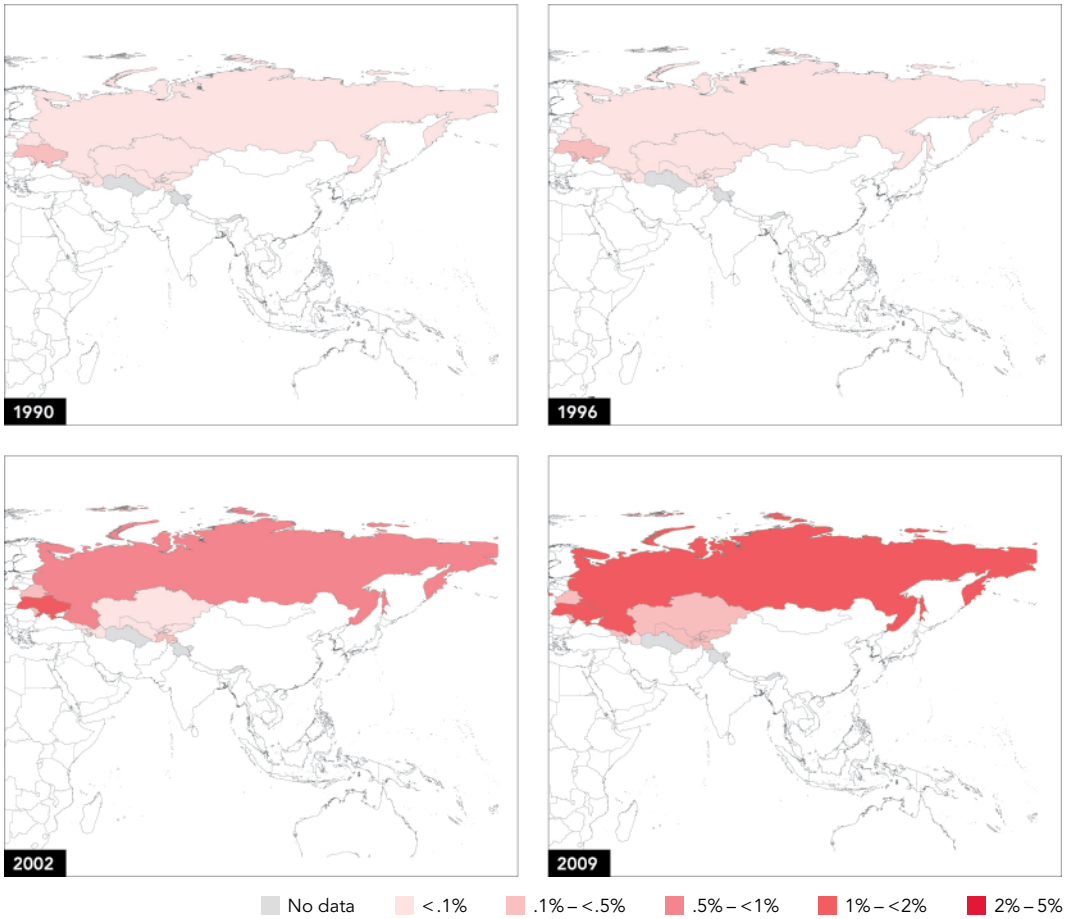
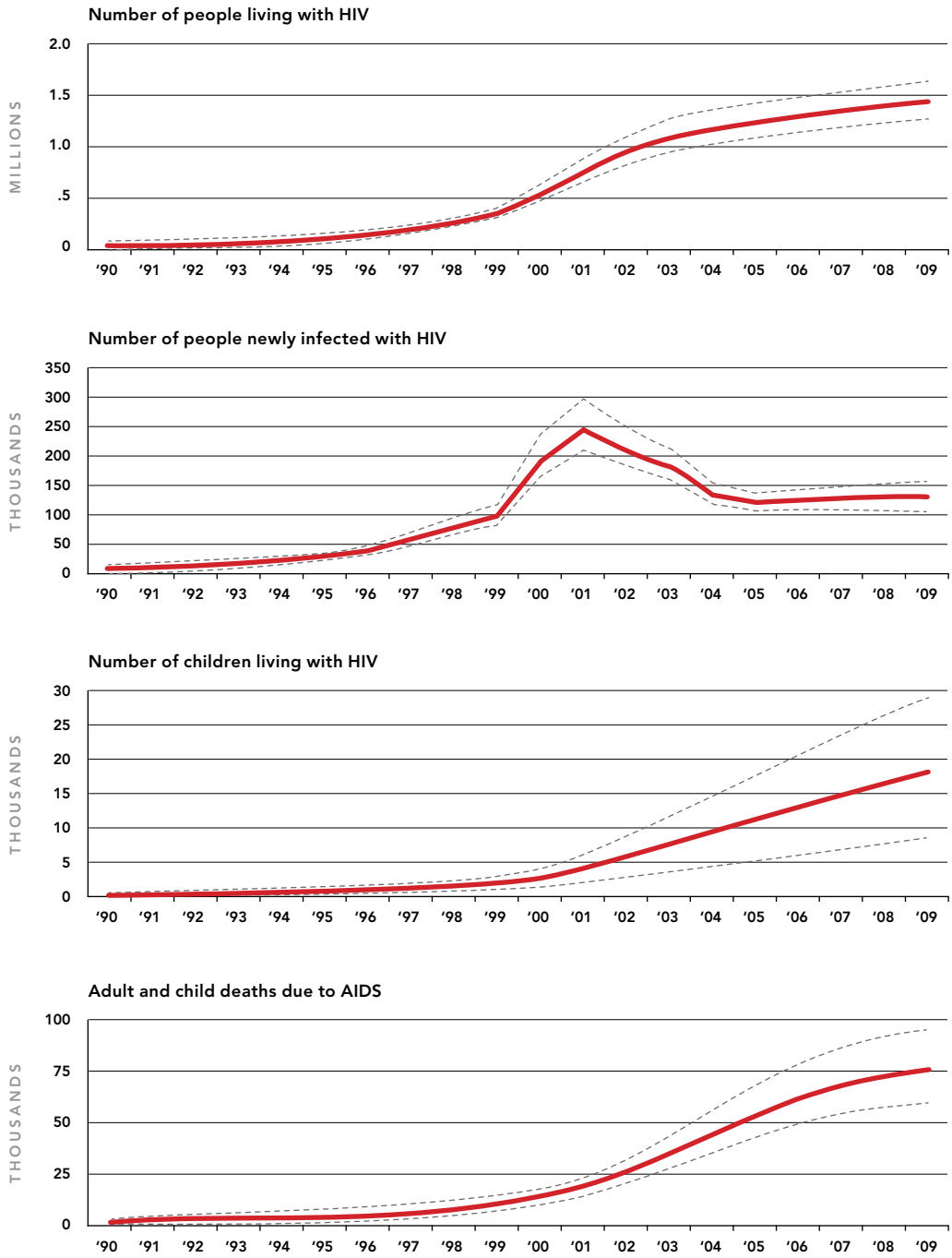


Figure 2.13

HIV trends in Eastern Europe and Central Asia

Source: UNAIDS.



EASTERN EUROPE AND CENTRAL ASIA

200%

The number of people living with HIV in Eastern Europe and Central Asia has almost tripled since 2000.

The largest regional increase in HIV prevalence

In Eastern Europe and Central Asia, the number of people living with HIV has almost tripled since 2000 and reached an estimated total of 1.4 million [1.3 million–1.6 million] in 2009 compared with 760 000 [670 000–890 000] in 2001 (Table 2.5 and Figure 2.13). A rapid rise in HIV infections among people who inject drugs at the turn of the century caused the epidemic in this region to surge.

Overall, the HIV prevalence is 1% or higher in two countries in this region, the Russian Federation and Ukraine, which together account for almost 90% of newly reported HIV diagnoses.

At 1.1% [1.0%–1.3%], the adult HIV prevalence in Ukraine is higher than in any other country in all of Europe and Central Asia (60). Annual HIV diagnoses in Ukraine have more than doubled since 2001.

The HIV epidemic in the Russian Federation also continues to grow, but at a slower pace than in the late 1990s. Newly reported HIV cases have increased in several of the countries in Central Asia, including Uzbekistan, which has the largest epidemic in Central Asia (61).

Concentrated epidemics—sex work, drug use and sex between men linked

The HIV epidemics in Eastern Europe and Central Asia are concentrated mainly among people who inject drugs, sex workers, their sexual partners and, to a much lesser extent, men who have sex with men. An estimated one quarter of the 3.7 million people (most of whom are men) who inject drugs in the region are living with HIV (38). In the Russian Federation, more than one third (37%) of the country's estimated 1.8 million people who inject drugs are believed to be living with HIV (38), compared with between 39% and 50% in Ukraine (60). Surveys among people who inject drugs in 2007 found HIV prevalence as high as 88% (in the city of Kryvyi Rih) (62).

High HIV prevalence has also been found in prison populations, especially among incarcerated people who inject drugs (63). An estimated 10 000 prisoners are living with HIV in Ukraine (60).

The interplay between sex work and injecting drug use is accelerating the spread of HIV in the region. At least 30% of sex workers in the Russian Federation, for example, have injected drugs (64), and the high HIV infection levels found among sex workers in Ukraine (14% to 31% in various studies) (60) are almost certainly due to the overlap of paid sex with injecting drug use.

Because most people who inject drugs are sexually active, sexual transmission of HIV has increased in older epidemics such as that in Ukraine, making these more challenging to manage (65). As the epidemic spreads from (predominantly male) people who inject drugs to their sexual partners, the proportion of women living with HIV is also growing. By 2009, an estimated 45% of the people living with HIV in Ukraine were women, compared with 41% in 2004

and 37% in 1999. Different people using the same contaminated injecting equipment within a short time frame remains a core driver of these epidemics. An estimated 35% of women living with HIV probably acquired HIV through injecting drug use, while an additional 50% were probably infected by partners who inject drugs (61,66).

Unprotected sex between men is responsible for a small share of new infections in the region—less than 1% of people newly diagnosed with HIV infection for whom the route of transmission was identified (67). Nevertheless, official data may underplay the actual extent of infection in this highly stigmatized population (68). In small surveys, the HIV prevalence among men who have sex with men has ranged from zero in Belarus, Lithuania and parts of Central Asia to 5% in Georgia (69), 6% in the Russian Federation (70) and between 4% (in Kyiv) and 23% (in Odessa) in Ukraine (60).

"AS THE EPIDEMIC SPREADS FROM PREDOMINANTLY MALE POPULATIONS WHO INJECT DRUGS TO THEIR SEXUAL PARTNERS, THE PROPORTION OF WOMEN LIVING WITH HIV IS ALSO GROWING."

AIDS-related mortality

AIDS-related deaths continue to rise in the region. There were an estimated 76 000 [60 000–95 000] AIDS-related deaths in 2009 compared with 18 000 [14 000–23 000] in 2001, a four-fold increase during this period. ■

Table 2.6
AIDS statistics for the Caribbean, 2001 and 2009

Source: UNAIDS.

		People living with HIV	People newly infected with HIV	Children living with HIV	AIDS-related deaths
CARIBBEAN	2009	240 000 [220 000–270 000]	17 000 [13 000–21 000]	17 000 [8500–26 000]	12 000 [8500–15 000]
	2001	240 000 [210 000–270 000]	20 000 [17 000–23 000]	18 000 [9100–27 000]	19 000 [16 000–23 000]

Figure 2.14
HIV prevalence in the Caribbean
HIV prevalence among adults aged 15–49 years old in the Caribbean, 1990 to 2009.

Source: UNAIDS.

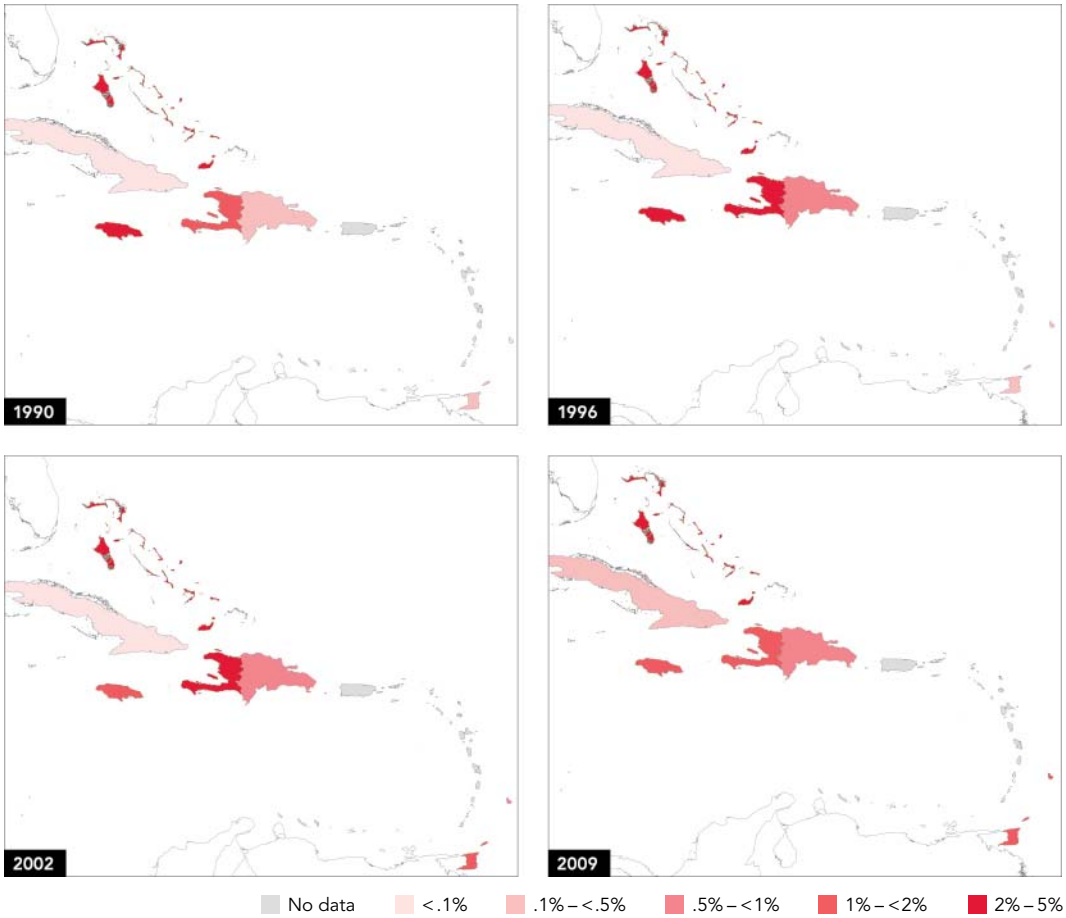
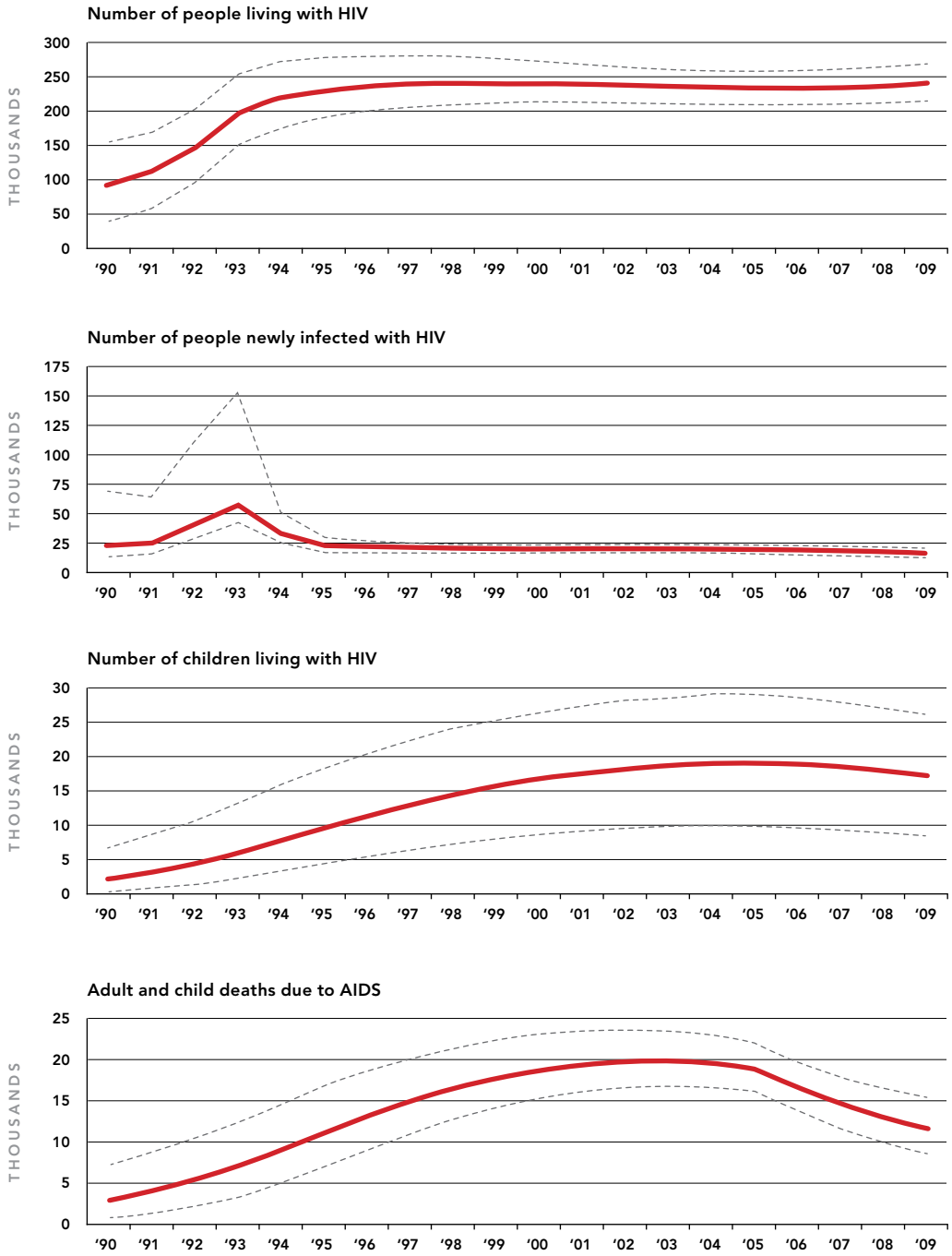


Figure 2.15

HIV trends in the Caribbean

Source: UNAIDS.



CARIBBEAN

High HIV prevalence but fewer people living with HIV

The HIV prevalence among adults in the Caribbean is about 1.0% [0.9%–1.1%], which is higher than in other all regions outside sub-Saharan Africa (Table 2.5 and Figure 2.13). However, the number of people living with HIV in the Caribbean is relatively small—240 000 [220 000–270 000] in 2009—and has varied little since the late 1990s.

The burden of HIV varies considerably between and within countries. The exceptionally low HIV prevalence in Cuba (0.1% [0.08%–0.13%]) contrasts, for example, with a 3.1% [1.2%–5.4%] adult HIV prevalence in the Bahamas (64). Meanwhile, 12% of pregnant women using antenatal facilities in one of Haiti's cities have tested HIV-positive, compared with less than 1% in the west of the country (71). In the neighbouring Dominican Republic, HIV infection levels also vary considerably, with HIV prevalence among communities near sugar plantations (the bateyes) about four times higher than the national average (72).

0.1%

Estimated HIV prevalence in Cuba, which is exceptionally low.

New HIV infections slightly declining

New infections have slightly declined between 2001 and 2009. An estimated 17 000 [13 000–21 000] people became newly infected with HIV in 2009, about 3000 less than the 20 000 [17 000–23 000] in 2001.

Unprotected sex between men and women—especially paid sex—is believed to be the main mode of HIV transmission in this region (73,74). The Caribbean remains the only region, besides sub-Saharan Africa, where women and girls outnumber men and boys among people living with HIV. In 2009, an estimated 53% of people with HIV were female.

High infection levels have been found among female sex workers, including 4% in the Dominican Republic (72,76), 9% in Jamaica (77), and 27% in Guyana (78). Most countries in the region have focused their HIV prevention efforts on paid sex.

Unsafe sex between men is a significant but largely hidden facet of the epidemics in this region, where several countries still criminalize sexual relations between men (79). One in five men who have sex with men surveyed in Trinidad and Tobago were living with HIV, for example, and one in four said they regularly also had sex with women (69). In Jamaica, a study found an HIV prevalence of 32% among men who have sex with men (73). Evidence indicates increasing HIV infections among men who have sex with men in Cuba (80) and the Dominican Republic (81).

In Bermuda and Puerto Rico, unsafe injecting drug use contributes significantly to the spread of HIV. In Puerto Rico, contaminated injecting equipment accounted for about 40% of males becoming newly infected in 2006 and for 27% among females (82).

AIDS-related mortality declining

AIDS-related deaths are falling in the Caribbean. An estimated 12 000 [8500–15 000] people lost their lives due to AIDS in 2009 compared with 19 000 [16 000–23 000] deaths in 2001. ■

"THE CARIBBEAN REMAINS THE ONLY REGION, BESIDES SUB-SAHARAN AFRICA, WHERE WOMEN AND GIRLS OUTNUMBER MEN AND BOYS AMONG PEOPLE LIVING WITH HIV."

Table 2.7

AIDS statistics for Central and South America, 2001 and 2009

Source: UNAIDS.

		People living with HIV	People newly infected with HIV	Children living with HIV	AIDS-related deaths
CENTRAL AND SOUTH AMERICA	2009	1.4 million [1.2–1.6 million]	92 000 [70 000–120 000]	36 000 [25 000–50 000]	58 000 [43 000–70 000]
	2001	1.1 million [1.0–1.3 million]	99 000 [85 000–120 000]	30 000 [20 000–42 000]	53 000 [44 000–65 000]

Figure 2.16

HIV prevalence in Central and South America

HIV prevalence among adults aged 15–49 years old in Central and South America, 1990 to 2009.

Source: UNAIDS.

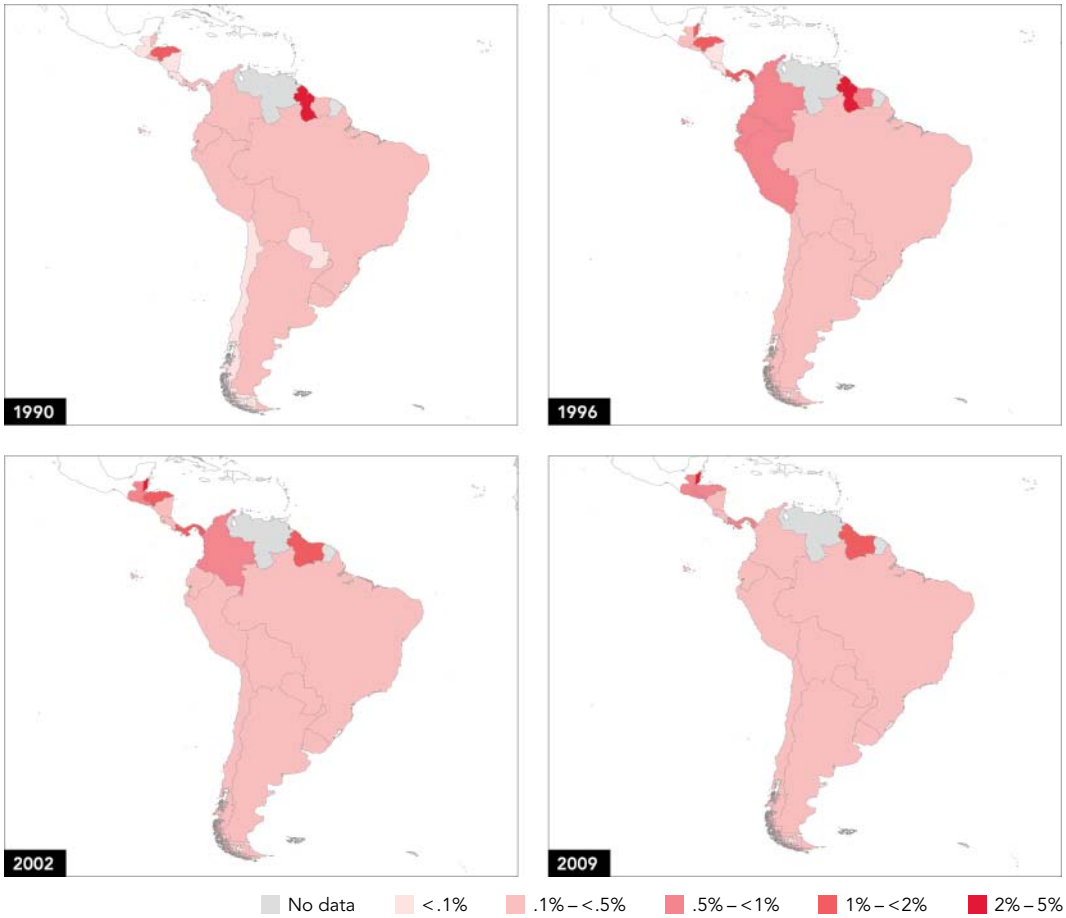
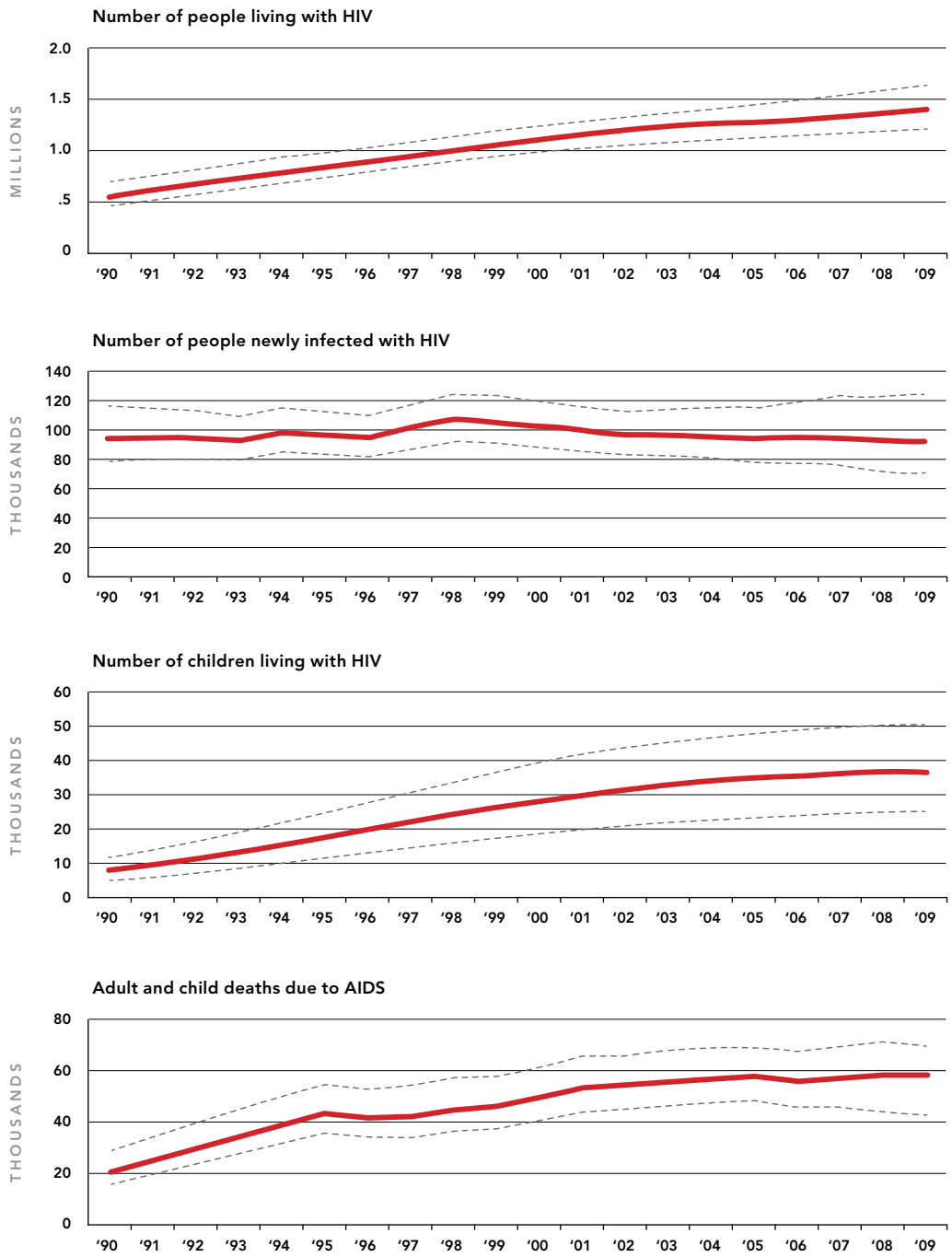


Figure 2.17

HIV trends in Central and South America

Source: UNAIDS.



CENTRAL AND SOUTH AMERICA

Stable epidemic—but HIV prevalence rises with high access to antiretroviral therapy

The HIV epidemics in South and Central America have changed little in recent years (Table 2.6 and Figure 2.14). The total number of people living with HIV continues to grow to an estimated 1.4 million [1.2 million–1.6 million] in 2009 from 1.1 million [1.0 million–1.3 million] in 2001) due largely to the availability of antiretroviral therapy.

About one third of all people living with HIV in Central and South America live in populous Brazil, where early and ongoing HIV prevention and treatment efforts have contained the epidemic. The adult HIV prevalence in Brazil has remained well under 1% for at least the past decade.

Concentrated epidemics—primarily among men who have sex with men

Most of the HIV epidemics in this region are concentrated in and around networks of men who have sex with men. Surveys conducted in groups of urban men who have sex with men have found HIV prevalence of at least 10% in 12 of 14 countries (69), including in Costa Rica (83). High rates of HIV infection have been found in networks of men who have sex with men. In five Central American countries, the annual HIV incidence was 5.1% (84) among men who have sex with men, while an incidence of 3.5% has been found among men who have sex with men who attended public health clinics in Lima, Peru. These rates were higher than those observed among the men who have sex with men in Europe and North America (85).

Social stigma, however, has kept many of these epidemics among men who have sex with men hidden and unacknowledged. Several countries, especially in Central America and in the Andes, continue to have fewer programmes that address the key role of unsafe sex between men in their HIV epidemics (64).

1/3

Proportion of the population living with HIV in Central and South America that live in Brazil.

Fear of being stigmatized can compel many men who have sex with men to also have sexual relationships with women. In Central America, for example, more than one in five men who said that they had sex with other men reported having had sex with at least one woman in the previous six months (84).

Stopping HIV among sex workers—investments are reaping dividends

Most countries have focused attention on preventing HIV transmission during paid sex, and there are indications that these efforts are paying off. High condom use rates and low HIV prevalence have been reported among female sex workers in Santiago, Chile (86), El Salvador (87) and Guatemala (88).

Injecting drug use has been the other main route of HIV transmission in this region, especially in the southern cone of South America. It has been estimated that as many as 2 million people in Central and South America inject drugs and that more than one quarter of these might be living with HIV (38).

As in other regions with many people who inject drugs, prisoners and detainees also have a high HIV prevalence. Close to 6% of male inmates tested at a São Paulo (Brazil) penitentiary, for example, were living with HIV (89). Such evidence has prompted some countries to move towards introducing HIV prevention services in prisons.

Meanwhile, heterosexual HIV transmission is increasing in the older epidemics in South America. When injecting drug use receded as a mode of transmission in Argentina's HIV epidemic, for example, an estimated four of five new HIV diagnoses in the mid-2000s were attributed to unprotected sexual intercourse, mainly between men and women (90). Almost half (43%) of the new HIV infections in Peru are now attributed to heterosexual transmission (91), although most of those infections are believed to occur during paid and other forms of higher-risk sex.

"THE NUMBER OF CHILDREN LIVING WITH HIV REMAINS SMALL IN CENTRAL AND SOUTH AMERICA AND APPEARS TO BE DECLINING."

HIV among children

The number of children (younger than 15 years of age) living with HIV, however, remains small in Central and South America (around 4000 children newly infected in 2009) and appears to be declining. This trend is occurring despite the comparatively low coverage of services for preventing the transmission of HIV to infants. At the end of 2009, 54% [39%–83%] of the pregnant women living with HIV in the region were receiving antiretroviral drugs to prevent transmission to their newborns, only slightly higher than the global coverage of 53% [40%–79%] in low- and middle-income countries (9). ■

Table 2.8

AIDS statistics for North America and Western and Central Europe, 2001 and 2009

Source: UNAIDS.

		People living with HIV	People newly infected with HIV	Children living with HIV	AIDS-related deaths
NORTH AMERICA AND WESTERN AND CENTRAL EUROPE	2009	2.3 million [2.0–2.7 million]	100 000 [73 000–150 000]	6000 [3500–8000]	35 000 [29 000–56 000]
	2001	1.8 million [1.6–2.0 million]	97 000 [82 000–110 000]	7400 [4500–10 000]	37 000 [32 000–44 000]

Figure 2.18

HIV prevalence in North America and Western and Central Europe

HIV prevalence among adults aged 15-49 years old in North America and Western and Central Europe, 1990 to 2009.

Source: UNAIDS.

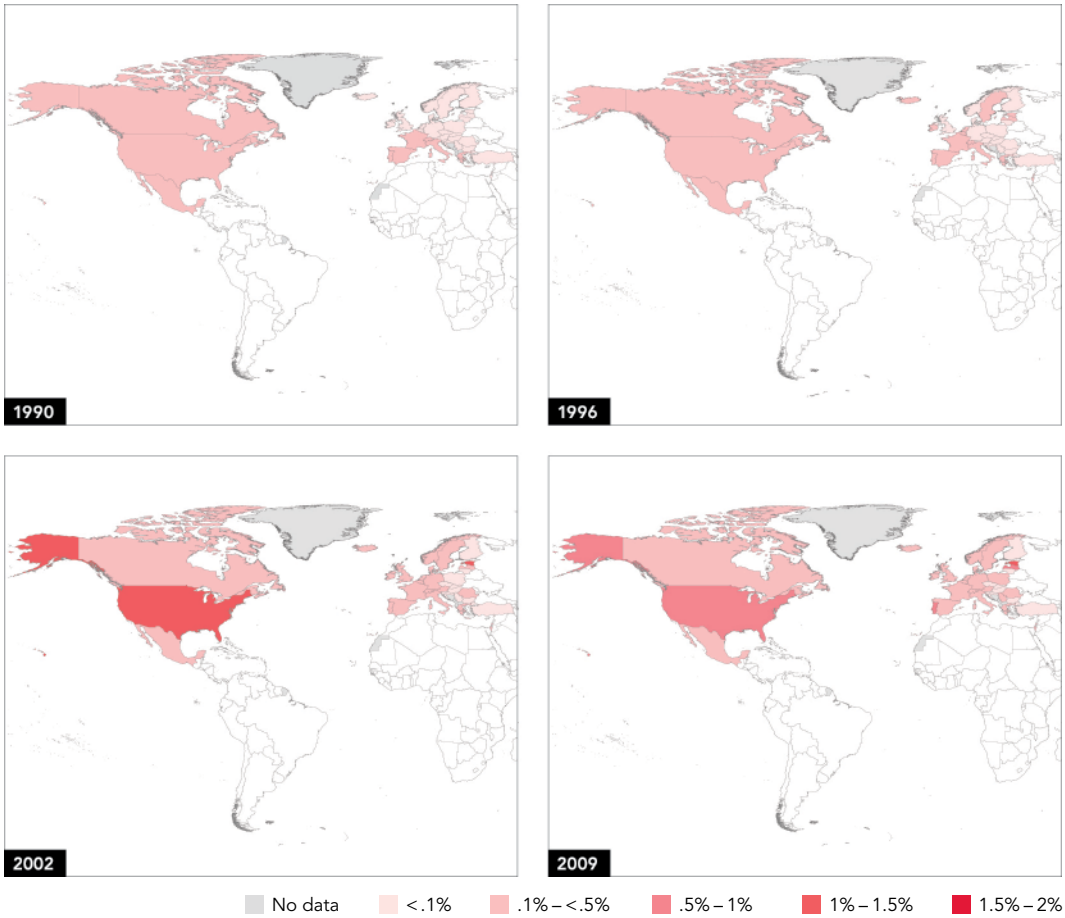
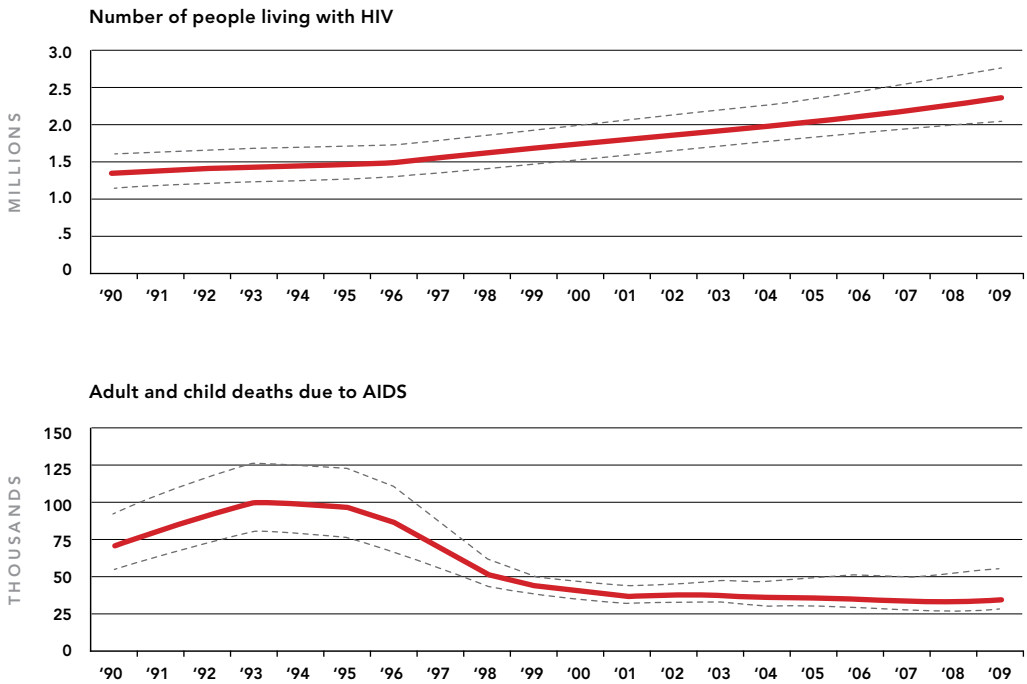


Figure 2.19

HIV trends in North America and Western and Central Europe

Source: UNAIDS.



NORTH AMERICA AND WESTERN AND CENTRAL EUROPE

AIDS is not over in the higher-income countries

The total number of people living with HIV in North America and Western and Central Europe continues to grow and reached an estimated 2.3 million [2.0 million–2.7 million] in 2009—30% more than in 2001 (Table 2.8, Figure 2.18).

Unprotected sex between men continues to dominate patterns of HIV transmission in North America and Western and Central Europe, although injecting drug use and unprotected paid sex also feature (especially in Mexico and parts of southern Europe).

In France, for example, men who have sex with men account for more than half the men newly diagnosed with HIV, yet they represent only 1.6% of the country's population (92,93). This epidemic pattern means that men outnumber women among people living with HIV. In 2009, women comprised about 26% of the people living with HIV in North America and 29% of those in Western and Central Europe.

Resurging epidemics among men who have sex with men

There is strong evidence of resurgent HIV epidemics among men who have sex with men in North America and in Western Europe (94). Data from 23 European countries show that the annual number of HIV diagnoses among men who have sex with men rose by 86% between 2000 and 2006 (95).

3160

Number of new HIV diagnoses among men who have sex with men in 2007 in the UK, the most ever reported up to that point.

The 3160 new HIV diagnoses among men who have sex with men in 2007 in the United Kingdom were the most ever reported up to that point (96). National surveillance data also show significant increases in new HIV diagnoses between 2000 and 2005 among men who have sex with men in Canada, Germany, the Netherlands, Spain, and the United States of America (97). In the United States of America, new HIV infections attributed to unprotected sex between men increased by more than 50% from 1991–1993 to 2003–2006 (98). Similar trends have been reported in Canada (99).

Increases in higher-risk sexual behaviour are associated with this trend. Researchers in Catalonia (Spain), for example, have reported that one third (32%) of men who have sex with men had recently had unprotected anal sex with a casual partner (100), and surveys in Denmark and Amsterdam (the Netherlands) have reported similar findings (101,102).

The HIV epidemics are disproportionately concentrated in racial and ethnic minorities in some countries. In the United States of America, for example, African-Americans constitute 12% of the population but accounted for 45% of the people newly infected with HIV in 2006 (98). African-American males are 6.5 times and African-American females 19 times more likely to acquire HIV compared with their Caucasian counterparts (103).

In Canada in the mid-2000s, aboriginal people comprised 3.8% of the population but accounted for 8% of the cumulative people living with HIV and 13% of the people newly infected annually. Two thirds (66%) of the people newly infected inject drugs (99).

Rates of new infections among people who inject drugs have been falling overall—largely due to harm-reduction services. In the Netherlands (67) and Switzerland (98), for example, HIV infections due to 'social' drug using—several people using the same contaminated injecting equipment—have almost been eliminated: at most 5% of new infections (in 2008 and 2007, respectively) were attributable to injecting drug use.

The epidemic is also declining among people who inject drugs in North America. Fewer than 10 000 people who inject drugs contracted HIV in 2006 in the United States of America, for example, one third as many as in 1984–1986.

Multiple use by different people of contaminated drug-injecting equipment can still dramatically accelerate an HIV epidemic, as Estonia has discovered. Hardly any people newly infected with HIV were detected there a decade ago; within a few years, a majority of the surveyed people who inject drugs (72% in one survey) were living with HIV (38).

There are also flashpoints along the border between Mexico and the United States of America where intersecting networks of drug use and paid sex appear to be driving the spread of HIV. Studies have found an HIV prevalence of 12% among female sex workers who inject drugs in Ciudad Juarez and Tijuana (104) and 3% among other people who inject drugs (105) in Tijuana. These localized epidemics have considerable potential for growth. In a large study among pregnant women in Tijuana, for example, the HIV prevalence was 1%, and among those who used drugs it was 6% (106).

Immigrants living with HIV have become a growing feature of the epidemics in several countries in Europe. Heterosexual transmission accounts for about half of the people newly infected with HIV in Central Europe (67), but many of these people were infected abroad (mostly in sub-Saharan Africa, the Caribbean, and Asia).

In the United Kingdom, about 44% of the people newly infected with HIV in 2007 had acquired HIV abroad, mainly in sub-Saharan Africa (96). Overall in Europe, almost one in five (17%) people newly diagnosed with HIV in 2007 were from countries with generalized epidemics (107). ■

19x

Increase in likelihood that African-American females will aquire HIV, compared to their Caucasian counterparts, in the United States.

Table 2.9

AIDS statistics for the Middle East and North Africa, 2001 and 2009

Source: UNAIDS.

		People living with HIV	People newly infected with HIV	Children living with HIV	AIDS-related deaths
MIDDLE EAST AND NORTH AFRICA	2009	460 000 [400 000–530 000]	75 000 [61 000–92 000]	21 000 [13 000–28 000]	23 000 [20 000–27 000]
	2001	180 000 [150 000–200 000]	36 000 [32 000–42 000]	7100 [3800–13 000]	8300 [6300–11 000]

Figure 2.20

HIV prevalence in Middle East and North Africa

HIV prevalence among adults aged 15–49 years old in Middle East and North Africa, 1990 to 2009.

Source: UNAIDS.

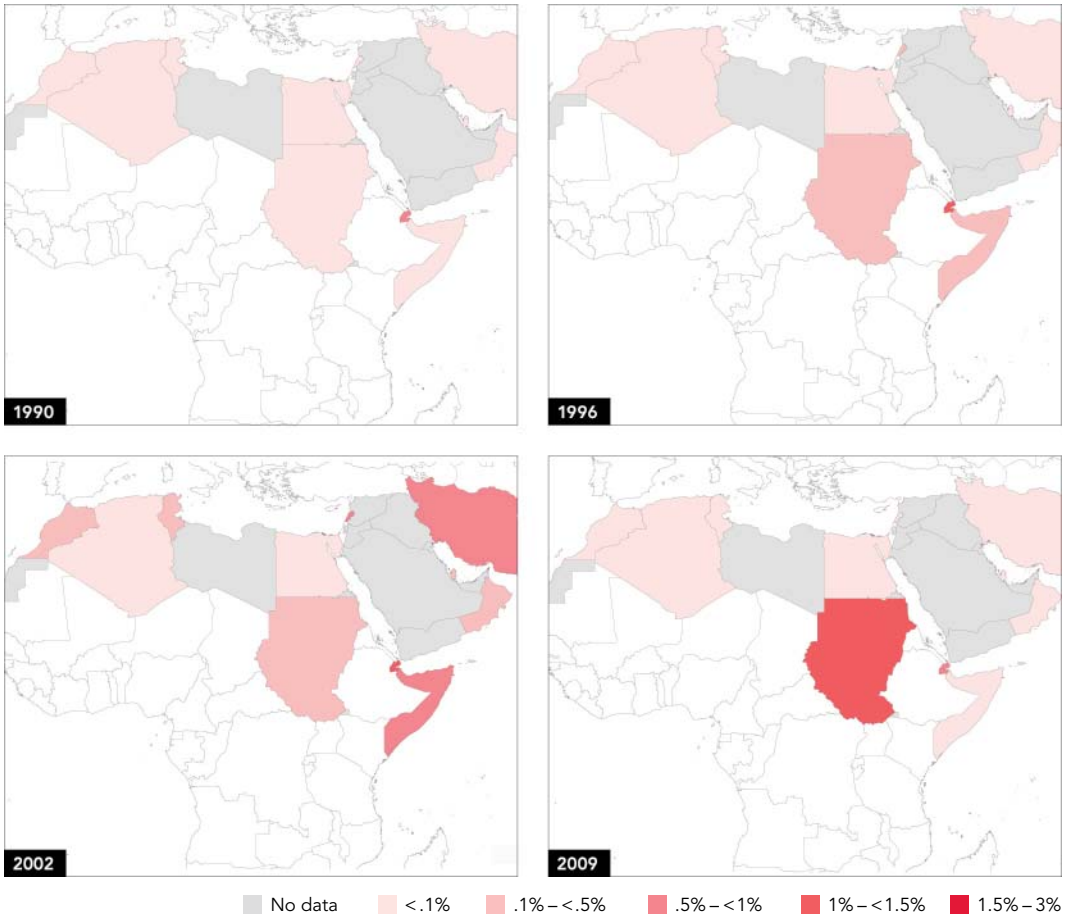
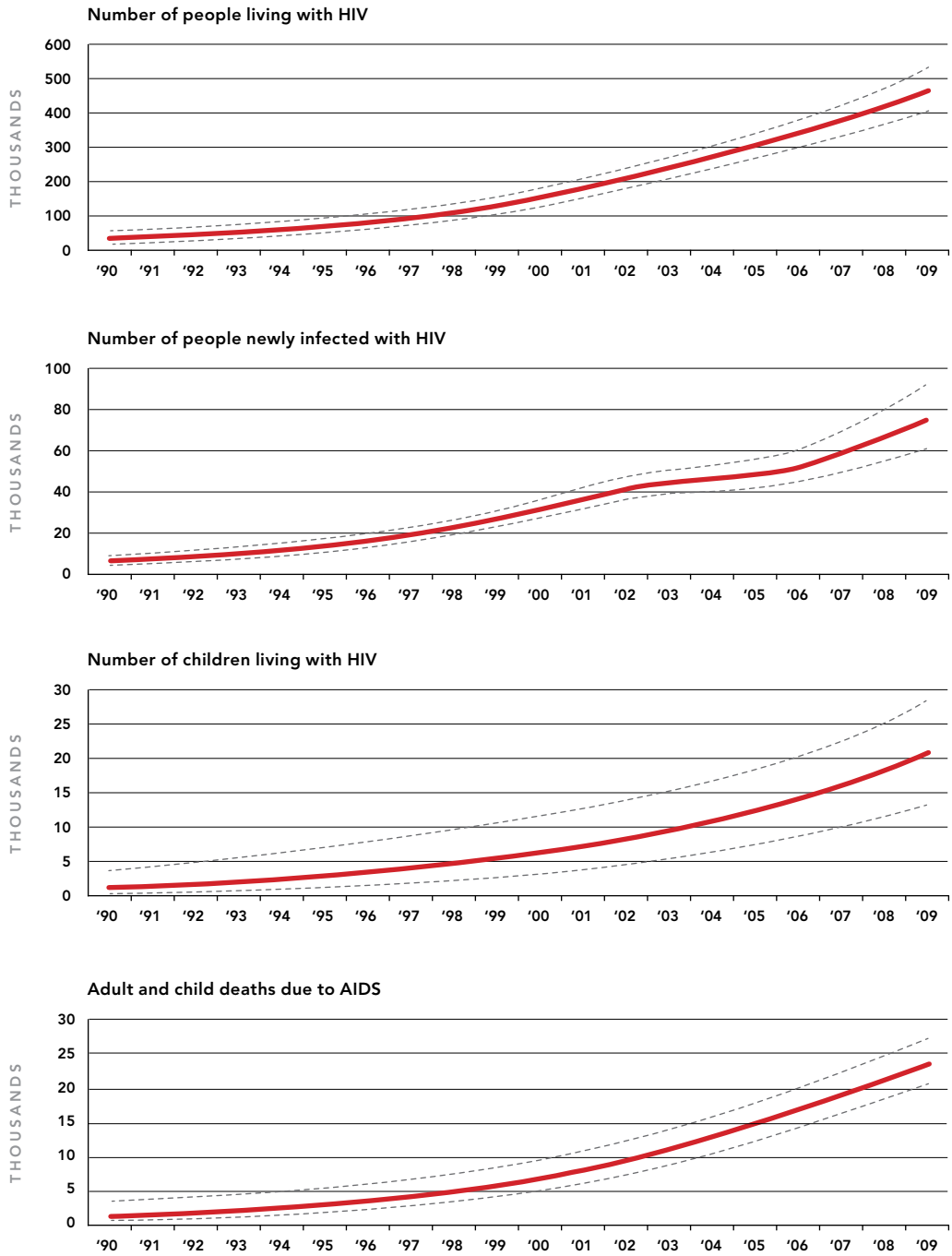


Figure 2.21

HIV trends in the Middle East and North Africa

Source: UNAIDS.



MIDDLE EAST AND NORTH AFRICA

Increasing HIV prevalence, new HIV infections and AIDS-related deaths

An estimated 460 000 [400 000–530 000] people were living with HIV in the Middle East and North Africa at the end of 2009, up from 180 000 [150 000–200 000] in 2001 (Table 2.9 and Figure 2.20). The number of people newly infected has also increased over the last decade. There were 75 000 [61 000–92 000] people newly infected in 2009, more than twice the number (36 000 [32 000–42 000]) in 2001. AIDS-related deaths have nearly tripled: from 8300 [6300–11 000] in 2001 to 23 000 [20 000–27 000] at the end of 2009.

Reliable data on the epidemics in the Middle East and North Africa remain in short supply, creating difficulty in tracking recent trends with confidence. The available evidence points to increases in HIV prevalence, new HIV infections, and AIDS-related deaths.

The HIV prevalence is low—with the exceptions of Djibouti and southern Sudan, where HIV is spreading in the general population, and pregnant women using antenatal services have a HIV prevalence of more than 1%.

The Islamic Republic of Iran is believed to have the largest number of people who inject drugs in the region, and its HIV epidemic is centred mainly within this population group. An estimated 14% of people who inject drugs country-wide were living with HIV in 2007 (108).

80%

Prevalence of hepatitis C virus among detained people who inject drugs in Tehran.

The extremely high prevalence of hepatitis C virus (80%) found among detained people who inject drugs in Tehran (109) indicates considerable potential for the spread of HIV among and beyond people who inject drugs. It has been estimated that close to half (45%) of the Iranian prison population is incarcerated for drug-related offences (110,111). Exposure to contaminated drug-injecting equipment features in the epidemics of Algeria, Egypt, Lebanon, the Libyan Arab Jamahiriya, Morocco, Oman, the Syrian Arab Republic, and Tunisia.

Men who have sex with men disproportionately affected

Sex between men is heavily stigmatized in this region and is a punishable offence in many countries. HIV services for men who have sex with men tend to be limited (112). Evidence indicates that men who have sex with men bear a disproportionate share of the HIV burden in at least some countries.

In surveys in Sudan, 8%–9% of men who have sex with men were living with HIV (70), compared with 6% in Egypt (113). As in other regions, many men who have sex with men also have sex with women (114).

Sex work networks exist but have low HIV prevalence

The available evidence suggests that HIV transmission is still limited in paid sex networks. When surveyed in 2006, about 1% of female sex workers in Egypt were living with HIV (113), compared with an estimated 2%–4% in Algeria, Morocco and Yemen (112). There are not enough data to determine the extent to which HIV is being transmitted to sex workers' male clients and other sex partners and to their respective partners. ■

"SEX BETWEEN MEN IS HEAVILY STIGMATIZED IN THE MIDDLE EAST AND NORTH AFRICA AND IS A PUNISHABLE OFFENCE IN MANY COUNTRIES."

Table 2.10
AIDS statistics for Oceania, 2001 and 2009

Source: UNAIDS.

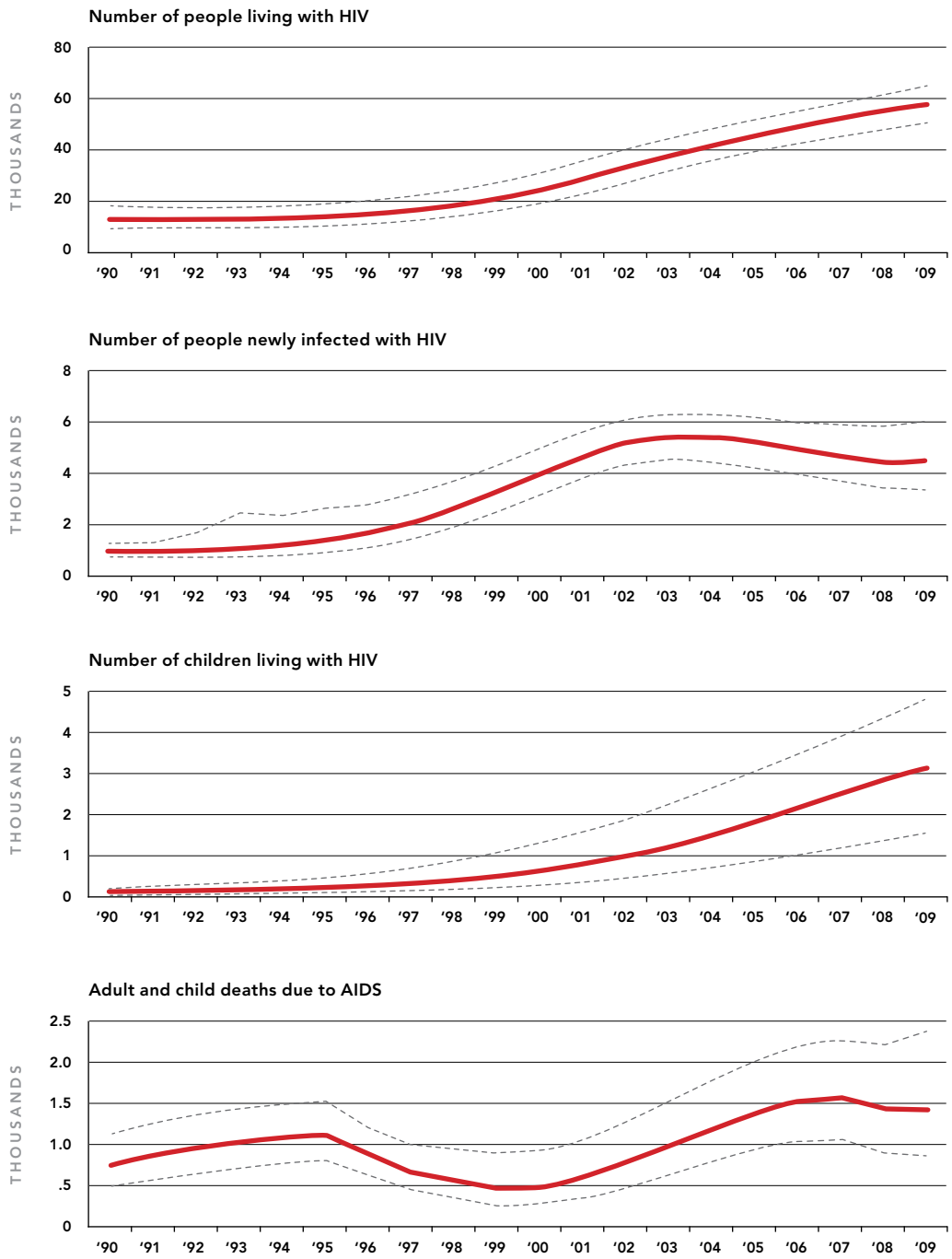
		People living with HIV	People newly infected with HIV	Children living with HIV	AIDS-related deaths
OCEANIA	2009	57 000 [50 000–64 000]	4500 [3400–6000]	3100 [1500–4800]	1400 [900–2400]
	2001	28 000 [23 000–35 000]	4700 [3800–5600]	<1000 [<500–1600]	<1000 [<500–1000]

Figure 2.22
HIV prevalence in Oceania
HIV prevalence among adults aged 15–49 years old in Oceania, 1990 to 2009.

Source: UNAIDS.

Figure 2.23
HIV trends in Oceania

Source: UNAIDS.



OCEANIA

HIV epidemic begins to stabilize

The HIV epidemic in Oceania is small, but the number of people living with HIV in this region nearly doubled between 2001 and 2009—from 28 000 [23 000–35 000] to 57 000 [50 000–64 000] (Table 2.10 and Figure 2.22). However, the number of people newly infected with HIV has begun to decline from 4700 [3800–5600] in 2001 to 4500 [3400–6000] in 2009.

"THE HIV EPIDEMIC IN PAPUA NEW GUINEA IS THE LARGEST AND THE ONLY GENERALIZED ONE IN OCEANIA."

The HIV epidemic in Papua New Guinea is the largest and the only generalized one in this region. Recent analysis of available data across the country shows that the epidemic is starting to level off. The national adult HIV prevalence in 2009 was estimated at 0.9% [0.8%–1.0%], with about 34 000 [30 000–39 000] people living with HIV. The estimates were calculated using data from antenatal clinics in all parts of Papua New Guinea that offer HIV testing to pregnant women as part of routine care. Programmes that aim to prevent mother-to-child transmission of HIV substantially increased the number of sites providing testing services to women during recent years, from 17 in 2005 to 178 in 2009, also resulting in more information available for the estimation process.

161

From 2005 to 2009, increase in number of testing sites with programmes that aim to prevent mother-to-child transmission of HIV.

Sexual transmission promotes HIV epidemics

The HIV epidemics in Oceania are mainly driven by sexual transmission. Unprotected heterosexual intercourse is the main mode of transmission in Papua New Guinea, whereas unprotected sex between men predominates in the epidemics of the smaller Pacific countries and in those of Australia and New Zealand (115).

As in many other high-income countries with older HIV epidemics, new HIV diagnoses have increased among men who have sex with men in Australia and New Zealand in the past decade. The trend may point to increased higher-risk sexual behaviour in this population group (116,117).

A lack of survey data creates difficulty in determining the role of commercial sex work in Papua New Guinea's epidemic, but paid sex appears to be commonplace among mobile populations, including migrant workers, transport workers, and military personnel (118).

Injecting drug use—a small but significant factor

Injecting drug use is a minor factor in the epidemics in this region. But in parts of Australia, it features prominently in the HIV epidemic among aboriginal people. HIV infection among Aboriginal and Torres Strait Islander people was attributed to injecting drug use in 22% of cases over the past five years (117). However, in French Polynesia and Melanesia (excluding Papua New Guinea), people who inject drugs comprise 12% and 6%, respectively, of cumulative HIV case reports (115).

Children newly infected—Papua New Guinea has most of the burden

Mother-to-child transmission of HIV is a significant factor only in Papua New Guinea's epidemic, where nearly 10% of all people newly diagnosed with HIV to date acquired it during perinatal exposure (115). ■

SCORECARD: INCIDENCE

Changes in the incidence rate of HIV infection, 2001 to 2009, selected countries

Increasing >25%

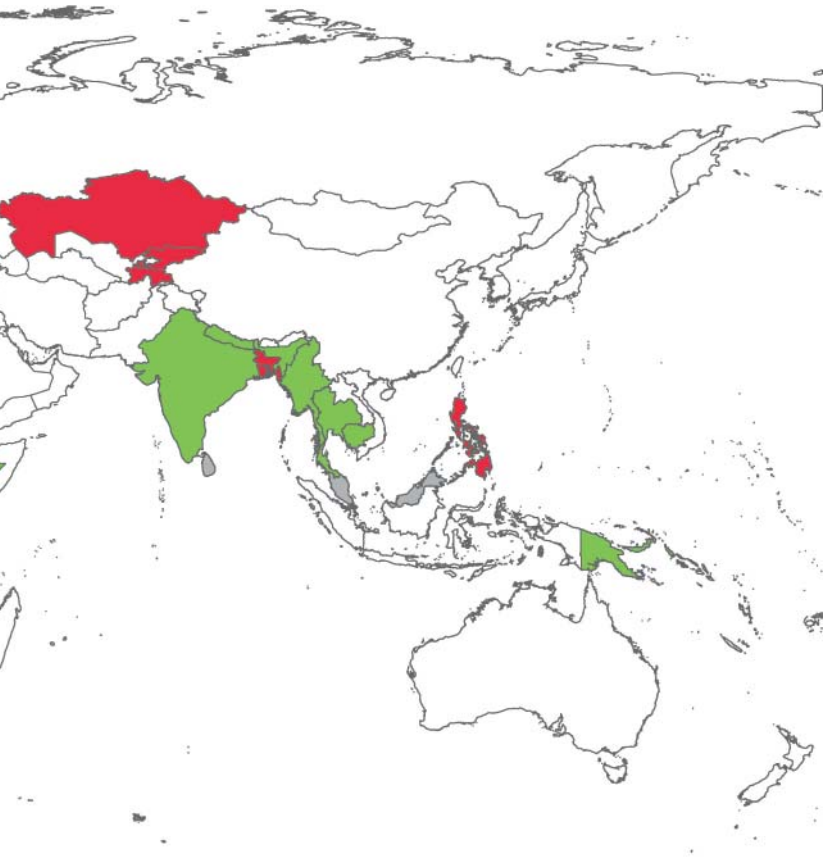
Armenia
Bangladesh
Georgia
Kazakhstan
Kyrgyzstan
Philippines
Tajikistan

Stable

Angola
Argentina
Belarus
Benin
Cameroon
Democratic Republic of the Congo
Djibouti
France
Germany
Ghana
Haiti
Kenya
Lesotho
Lithuania
Malaysia
Niger
Nigeria
Panama
Republic of Moldova
Senegal
Sri Lanka
Uganda
United States of America

Decreasing >25%

Belize
Botswana
Burkina Faso
Cambodia
Central African Republic
Congo
Côte d'Ivoire
Dominican Republic
Eritrea
Ethiopia
Gabon
Guinea
Guinea-Bissau
India
Jamaica
Latvia
Malawi
Mali
Mozambique
Myanmar
Namibia
Nepal
Papua New Guinea
Rwanda
Sierra Leone
South Africa
Suriname
Swaziland
Thailand
Togo
United Republic of Tanzania
Zambia
Zimbabwe



In the absence of a reliable diagnostic test that can directly measure the level of new HIV infections in a population, estimates of HIV incidence have been produced through modeling The map includes 60 countries for which reliable estimates of new HIV infections over time were available from the 2010 round of country-specific estimation using the EPP/Spectrum tools, and 3 countries for which peer-reviewed publications with incidence trends were available. The EPP/Spectrum methods estimate HIV incidence trends from HIV prevalence over time combined with the changing level of antiretroviral therapy. The criteria for including countries in this analysis were as follows. EPP files were available and trends in EPP were not derived from workbook prevalence estimates; prevalence data were available up to at least 2007; there were at least four time points between 2001 and 2009 for which prevalence data were available for concentrated epidemics and at least three data points in the same period for generalized epidemics; for the majority of epidemic curves for a given country, EPP did not produce an artificial increase in HIV prevalence in recent years due to scarcity of prevalence data points; data were representative of the country; the EPP/Spectrum–derived incidence trend was not in conflict with the trend in case reports of new HIV diagnoses; and the EPP/Spectrum–derived incidence trend was not in conflict with modelled incidence trends derived from age-specific prevalence in national survey results. For some countries with complex epidemics including multiple populations groups with different risk behaviours as well as major geographic differences, such as Brazil, China and the Russian Federation, this type of assessment is highly complex and it could not be concluded in the 2010 estimation round. UNAIDS will continue to work with countries and partners to improve the quality of available information and modeling methodologies to include HIV incidence data for additional countries in future reports.

HIV PREVENTION

KEY FINDINGS

- The global incidence of HIV infection declined by 19% between 1999 (the year of peak incidence) and 2009; the decline exceeded 25% in 33 countries, including 22 countries in sub-Saharan Africa.
- In 2009, 370 000 [230 000–510 000] children were infected with HIV through mother-to-child transmission. This is a drop of 24% from five years earlier. However, rapid expansion of delivery of effective advances in preventing mother-to-child transmission is being held back by inadequate access to antenatal and postnatal services.
- HIV prevention investments are about 22% of all spending in 106 low- and middle-income countries.
- Globally, comprehensive and correct knowledge about HIV among both young men and young women has increased slightly since 2008—but at only 34%, the number of young people with this comprehensive knowledge is barely one third of the UNGASS target of 95%.
- Trend analysis shows a general decline in the percentage of people who have had more than one sexual partner in the past year in sub-Saharan Africa.
- Condom availability in places of need is increasing significantly, with 25.8 million female condoms provided through international and nongovernmental funding sources in 2009. Condom distribution increased by 10 million between 2008 and 2009.
- Recent promising results of a tenofovir-based gel have raised hopes that an additional effective female-initiated prevention option may soon become viable.

» **New HIV infections are declining globally**

Dedicated efforts to promote and support combination HIV prevention are producing clear and impressive results. The incidence of HIV infection declined by 19% between 1999 and 2009 globally; the decline exceeded 25% in 33 countries, including 22 countries in sub-Saharan Africa. But while parts of the world experienced significant and encouraging decreases in HIV incidence between 2001 and 2009, during the same period the incidence increased by more than 25% in seven countries, including five in Eastern Europe and Central Asia. And HIV incidence remained stable in 23 countries between 2001 and 2009. Behaviour change is the most important factor accounting for these encouraging declines in new HIV infections in many countries. Among young people, noteworthy drops in HIV incidence have been associated with a significant positive trend (for either or both sexes) in important behaviour indicators, including increased condom use, delayed sexual debut, and reductions in multiple partnerships (1).

Correct and consistent condom use has been found to be greater than 90% effective in preventing transmission of HIV and other sexually transmitted infections. Eleven countries reported levels of 75% or greater among either men or women for condom use at last higher-risk sex. Major successes in HIV prevention have been achieved in concentrated epidemic countries that have devoted substantial programming efforts and funds to prevention among people at higher risk of exposure to HIV. Too often, however, prevention responses still do not focus on these key populations.

In 2009, 370 000 [230 000–510 000] children were infected with HIV through mother-to-child transmission (down from 500 000 [320 000–680 000] in 2001). Although this is an important achievement for the health of both mothers and infants, further rapid expansion in delivering advances in preventing mother-to-child transmission is being held back by inadequate access to antenatal and postnatal services.

Focusing HIV-prevention investments appropriately

HIV prevention investments are about 22% of all spending in 106 low- and middle-income countries. Even with existing resources, one notable challenge to strengthening the effects of the response to the epidemic has been the reluctance of planners and implementers to focus prevention efforts where they produce maximum impact. HIV prevention investments do not always follow epidemic patterns. In Eastern Europe and Central Asia, areas experiencing

primarily concentrated epidemics, 89% of HIV-prevention investments in these regions are not focused on people at higher risk, such as people who inject drugs, sex workers and their clients, and men who have sex with men. A notable proportion of new infections are found among these population groups, even in countries with generalized epidemics, yet prevention spending often ignores this reality. For example, the proportion of HIV prevention expenditure devoted to programmes for sex workers and their clients, men who have sex with men and people who inject drugs is only 1.7% in Burkina Faso, 0.4% in Côte d'Ivoire and 0.24% in Ghana, yet the percentage of new infections in these population groups is 30%, 28% and 43%, respectively (2).

370K

In 2009, an estimated 370 000 children were infected with HIV through mother-to-child transmission (down from 500 000 in 2001).

In both Kenya and Mozambique, between one quarter and one third of new HIV infections occur among people who inject drugs, men who have sex with men, and sex workers and their clients (3). The proportions of Kenya's and Mozambique's total AIDS spending directed to HIV prevention among these key populations are 0.35% and 0.25% respectively, and almost all is from international sources. Spending directed specifically to support these populations in their response to HIV is only one hundredth of their respective share of the national epidemic (4).

Similarly, investment focused on young people often does not achieve an appropriate balance between the need for continued investment in HIV prevention among all young people and the need to pay particular attention to the special needs of young people at higher risk from drug use, sex work, or unprotected sex between men. For example in Asia, 90% of resources for young people are spent on low-risk youth, who represent just 5% of the people becoming infected with HIV (5).

Combination HIV prevention efforts are bearing results

Where key behavioural indicators related to the risk of HIV infection—condom use, sex before age 15 years (early sexual debut) and multiple partnerships—all have positive trends, the incidence of HIV infection is markedly reduced (1).

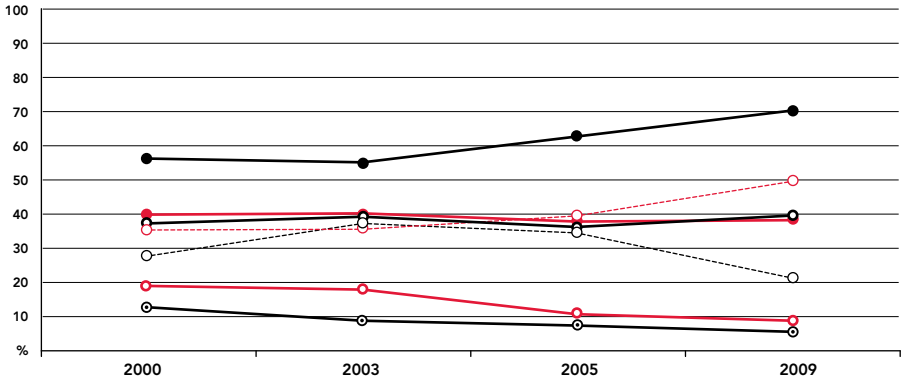
Evidence that combination HIV prevention efforts that address the most pressing HIV risks have decisively changed the course of the epidemic continues to accumulate. In Namibia, improvements across key knowledge and behaviour indicators—including comprehensive knowledge, age of sexual debut, engagement in higher-risk sex, and condom use among both males and females aged 15–24 years—were associated with declines in HIV prevalence among young people, from slightly more than 10% in 2007 to about 5% in 2009.

Figure 3.1

HIV prevention in Zambia, 2000-2009

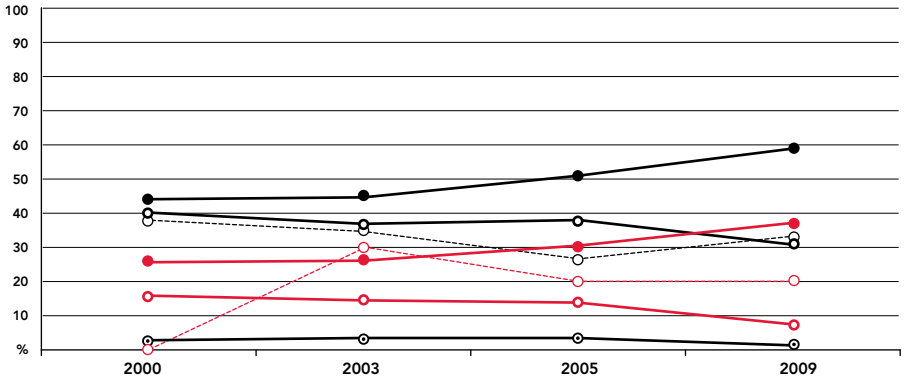
Source: Zambia Sexual Behavior Survey.

Males 15–24 years



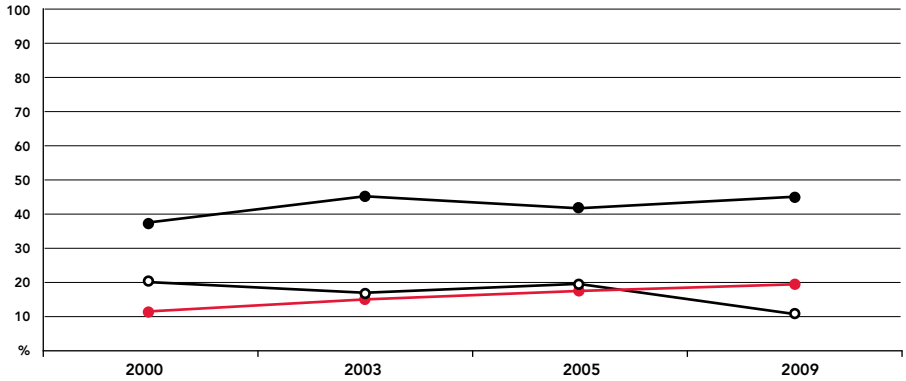
- Young people never having had sex (15-19 years)
- Young people never having had sex (15-24 years)
- Never married respondents who had sex in the last 12 months who used a condom with their last sexual partner
- Condom use at last sex with a non-marital, non-cohabiting sexual partner
- Condom use at last sex, among respondents who had >1 partner in the last year
- Proportion of respondents who had had sex before age 15
- Proportion of respondents that had >1 partner in past year

Females 15–24 years



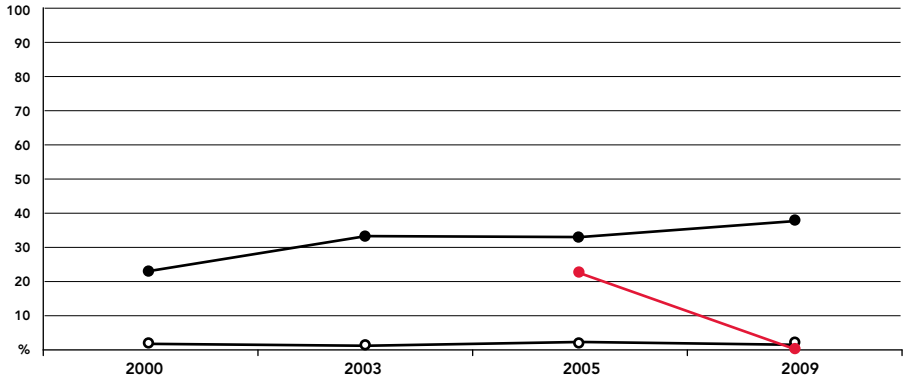
- Young people never having had sex (15-19 years)
- Young people never having had sex (15-24 years)
- Never married respondents who had sex in the last 12 months who used a condom with their last sexual partner
- Condom use at last sex with a non-marital, non-cohabiting sexual partner
- Condom use at last sex, among respondents who had >1 partner in the last year
- Proportion of respondents who had had sex before age 15
- Proportion of respondents that had >1 partner in past year

Males 25–49 years



- Condom use at last sex with a non-marital, non-cohabiting sexual partner
- Condom use at last sex among respondents who had >1 partner in the last year
- Proportion of respondents that had >1 partner in past year

Females 25–49 years



- Condom use at last sex with a non-marital, non-cohabiting sexual partner
- Condom use at last sex among respondents who had >1 partner in the last year
- Proportion of respondents that had >1 partner in past year

[1] Limited data (nine of 41 countries) are available from Western and Central Europe, and to a lesser extent, the Middle East and North Africa (eight of 20 countries). Sub-Saharan Africa is the region with the most complete data on comprehensive knowledge of HIV, largely due to the Demographic and Health Surveys that have been undertaken in 85 countries, with major support from the United States Government together with participating countries and other funders.

Between 2001 and 2009, overall HIV incidence in Namibia decreased by more than 25%. Similar trends were also recorded in Zimbabwe. But when different types of behaviour change vary—for example, when condom use increases and multiple partnerships do also, or vice versa—the effects of changes in reducing incidence are less easy to identify clearly.

In Zambia, HIV incidence declined by more than 25% between 2001 and 2009. The country has successfully increased both the age of sexual debut and abstinence among young people (6). The number of both young and older adults who have multiple partners has also declined. However, the proportion of men and women 15–24 years old with more than one partner in the past year who used a condom at last sex has also markedly declined.

Although fewer young men and women in Zambia are sexually active and fewer have had more than one partner in the past 12 months, condom use within this population has decreased rather than increased. For maximum effect, all routes to reducing the risk of sexual exposure to HIV must be pursued simultaneously (Figure 3.1).

Behaviour change and increased comprehensive correct knowledge reduces HIV incidence and prevalence in most countries with high HIV prevalence

Globally, comprehensive and correct knowledge about HIV among both young men and young women has increased slightly since 2003—but at only 34%, the number of young people with this comprehensive knowledge is only slightly greater than one third of the UNGASS target of 95%.[1] Ten countries have achieved comprehensive correct knowledge levels above 60% for either men or women 15–24 years old (Figure 3.2).

Opportunities to improve HIV prevention knowledge and behaviour still abound. Less than half of young people living in 15 of the 25 countries with the highest HIV prevalence can correctly answer five basic questions about HIV and its transmission (these include Botswana, Burundi, Cameroon, Central African Republic, Chad, Congo, Cote d'Ivoire, Guinea-Bissau, Kenya, Malawi, Nigeria, South Africa, Togo, United Republic of Tanzania and Zambia). Young people ages 15–24 years old showed gradually improving knowledge about HIV in these 25 countries but still fall short of the global targets for comprehensive knowledge set in 2001.

Complex, changing, and multiple relationships

Understanding the varieties and patterns of sexual relationships is a necessary element in implementing effective prevention programmes. In most countries, a minority of males and females report having had sex with more than one partner in the last year. Trend analysis shows a general decline in the percentage of people who had more than one partner in the past year in sub-Saharan Africa, with some exceptions, such as Botswana, Congo, South Africa and Uganda. In Uganda, men older than 25 years are increasingly

Figure 3.2

Young people's knowledge of HIV

Countries with comprehensive correct knowledge of HIV exceeding 60% among people 15–24 years old.

Source: Country Progress Reports 2010.

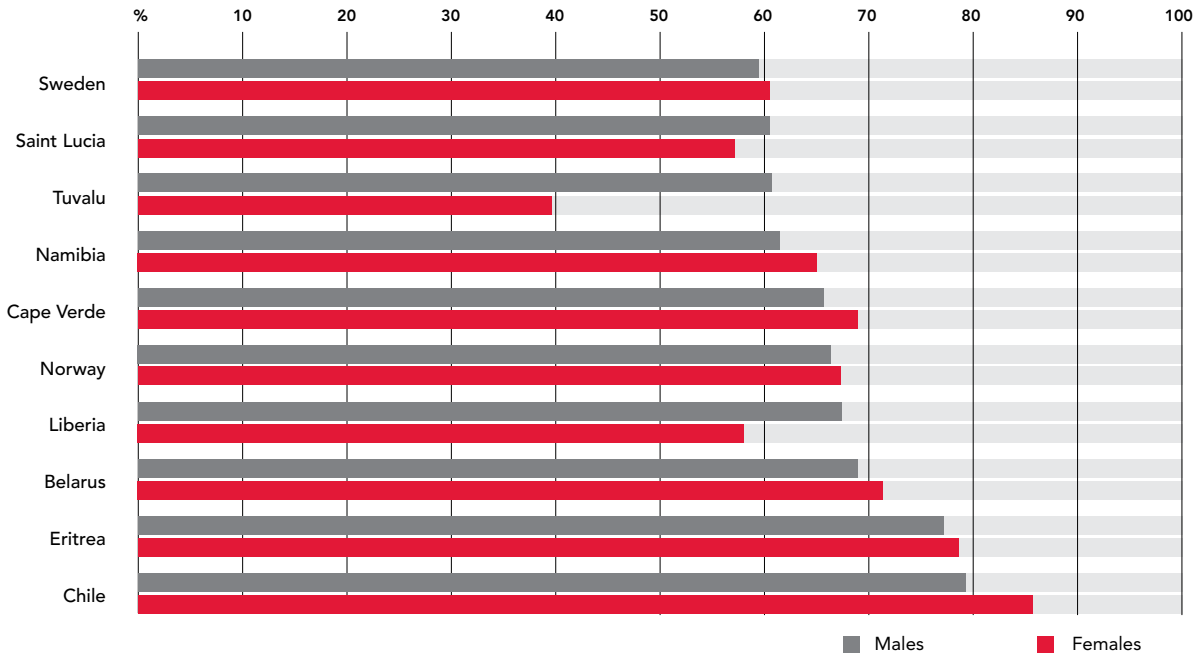
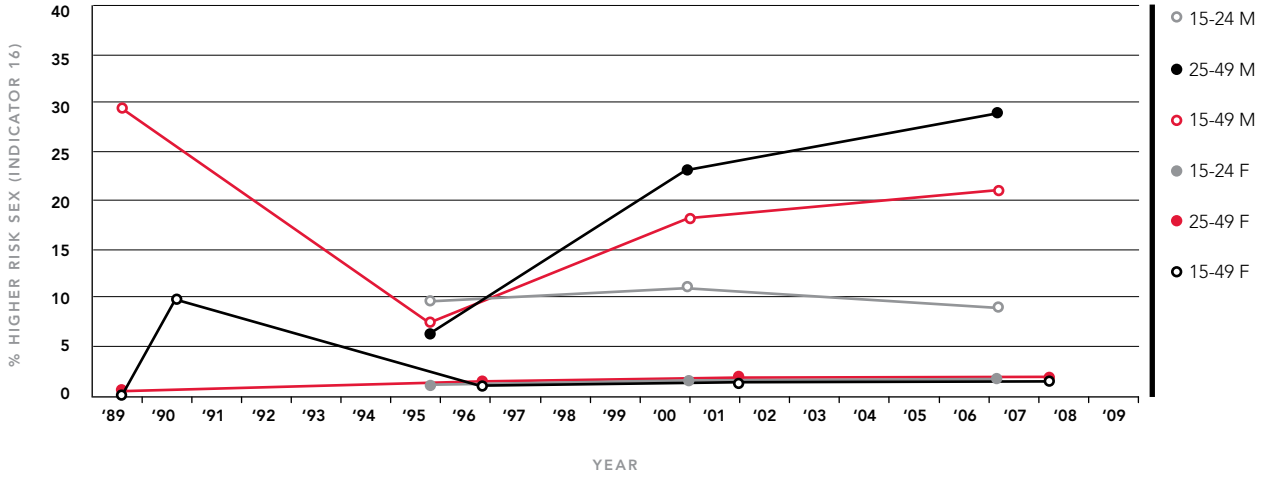


Figure 3.3

Multiple sexual partners in the past year, Uganda

Percentage of the population (ages 15–49 years old) that have had multiple sex partners in the past year in Uganda, by sex and age group, 1989–2006.

Source: Demographic and Health Surveys and other population-based behavioural survey data.



reporting multiple partners, while the number of women reporting sex with more than one partner has remained fairly stable (Figure 3.3).

In 59 of the 93 countries reporting these data—including 18 of the 25 countries with the highest prevalence of HIV—less than 25% of men reported sex with more than one partner in the last 12 months. A substantially larger number—84 countries—reported that less than 25% of women had sex with more than one partner in the past 12 months. On average, the proportion of men who reported having had sex with more than one partner in the past year was 16 percentage points higher than among women. Ten countries reported that 26% to 50% of men had more than one partner in the past year; two countries reported that 26% to 50% of women did so.

75%

Level of condom use in risky sex by men and women reported by 11 countries

Condom availability and condom uptake is improving

Eleven countries reported levels of 75% or greater among either men or women for condom use at last higher-risk sex—these countries include Botswana, India and South Africa. Country progress reports show that the median percentage of condom use at last sex for males with more than one partner in the past 12 months is 48% versus 38% for women. Of the 83 countries for which data are available, 32 reported 60% or greater condom use at last sex among the men who have had sex with more than one partner in the past 12 months versus 20 of 80 reporting countries among women.

Trend data from Demographic and Health Surveys show that condom use is increasing in sub-Saharan Africa. Botswana reported that at least 80% of men used a condom at last higher-risk sex; no countries reported this level of condom use for women. In contrast, 14 countries report condom use rates of 20% or less at last sex for those with more than one partner in the past year among either males or females, including the high-prevalence countries of the Democratic Republic of the Congo, Ethiopia, Malawi, Rwanda, Uganda and the United Republic of Tanzania.

In Asia, women in Cambodia, Myanmar and Thailand and men in Timor-Leste reported lower than 25% condom use at last higher-risk sex. The other countries in Asia showed higher rates of condom use at last higher-risk sex or did not report on this indicator. Of the countries reporting this indicator in Eastern Europe and Central Asia, most reported between 51% and 80% using a condom at last higher-risk sex.

Reports of condom use by sex workers at last sex with a client are encouraging. Of 86 countries providing data, 26 reported that 90% or more of sex workers report having used a condom with their last client, with another 13 countries reporting condom use levels from 80% to 90%. At the same time, 47 countries—more than half of those reporting—report rates of condom use by sex workers with their last client below 80%, including less than 60% in 17 countries. Greater condom promotion efforts are needed to increase the levels of usage of this technology for protection against HIV by sex workers and their clients.
The availability of female condoms in places of need is significantly increasing,

Ukraine—significant strides in protecting people who use drugs from HIV infection

For many years, Ukraine has had the most severe HIV epidemic among people who inject drugs in Eastern Europe and Central Asia. However, four years of comprehensive, sustained funding for and implementation of evidence-based harm reduction programming have helped reduce the HIV incidence among people who inject drugs in Ukraine. Data from multiple sources, from behavioural surveillance, sentinel surveys and programmes serving people who inject drugs all indicate that HIV transmission among people who inject drugs in Ukraine appears to be significantly decreasing. HIV infections among people who started injecting drugs in only the past two years (and are thus more likely to represent incident infections rather than ones acquired much earlier) decreased from a peak of 30% in 2004 to 11% in 2008 (14).

Behavioural surveillance in Ukraine shows that people who inject drugs are increasingly adapting key HIV risk-reduction measures. The percentage of people who inject drugs who report using sterile injecting equipment at last injection rose from 80% in 2006 to 86% in 2008. In 2009, about 4600 people who inject drugs were accessing opioid substitution therapy at any time (15). Although the HIV epidemic among people who inject drugs in Ukraine has stabilized, they remain at high risk of acquiring HIV, whether by sharing contaminated equipment or through the sexual transmission of HIV from people who inject drugs to their partners (Figure 3.4).

Figure 3.4

Harm reduction programmes and HIV prevalence in Ukraine

Association between harm reduction programmes and HIV prevalence in Ukraine, 2004–2009.

Sources: M Mahy, C Chhea, T Saliuk, O Varetska, R Lyerla (2010). A proxy measure for HIV incidence among populations at increased risk to HIV Vol 2(1):8, Journal of HIV/AIDS Surveillance and Epidemiology. UNGASS Country Progress Reports 2010.

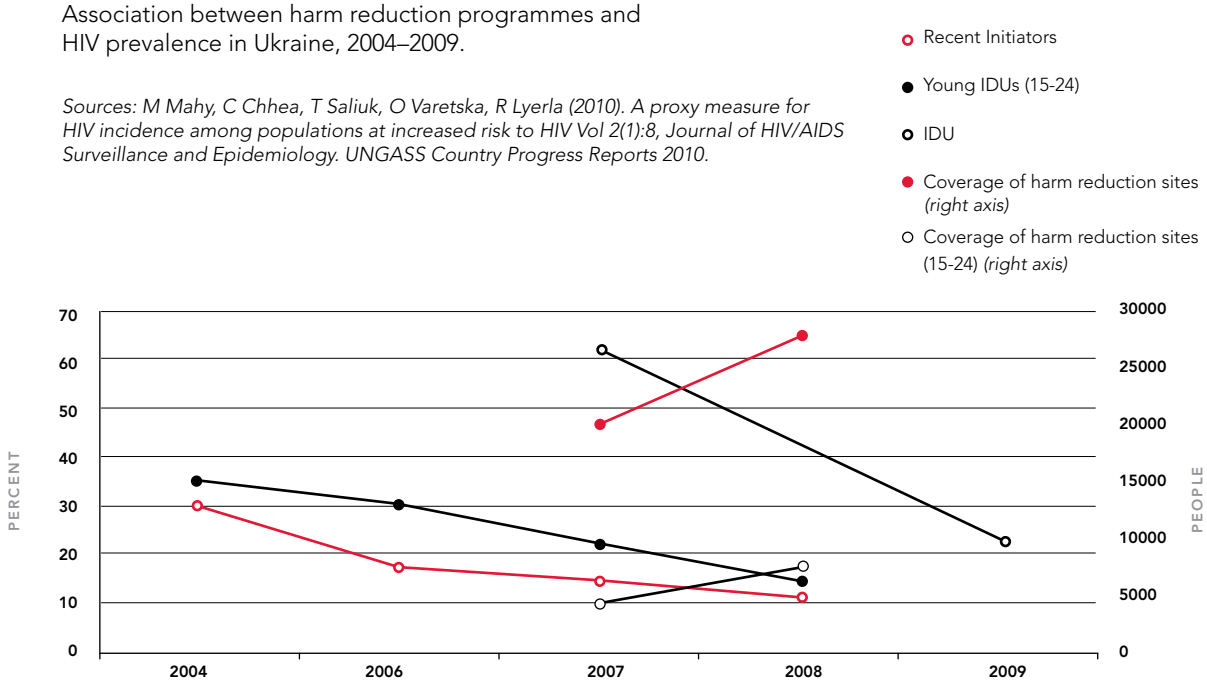
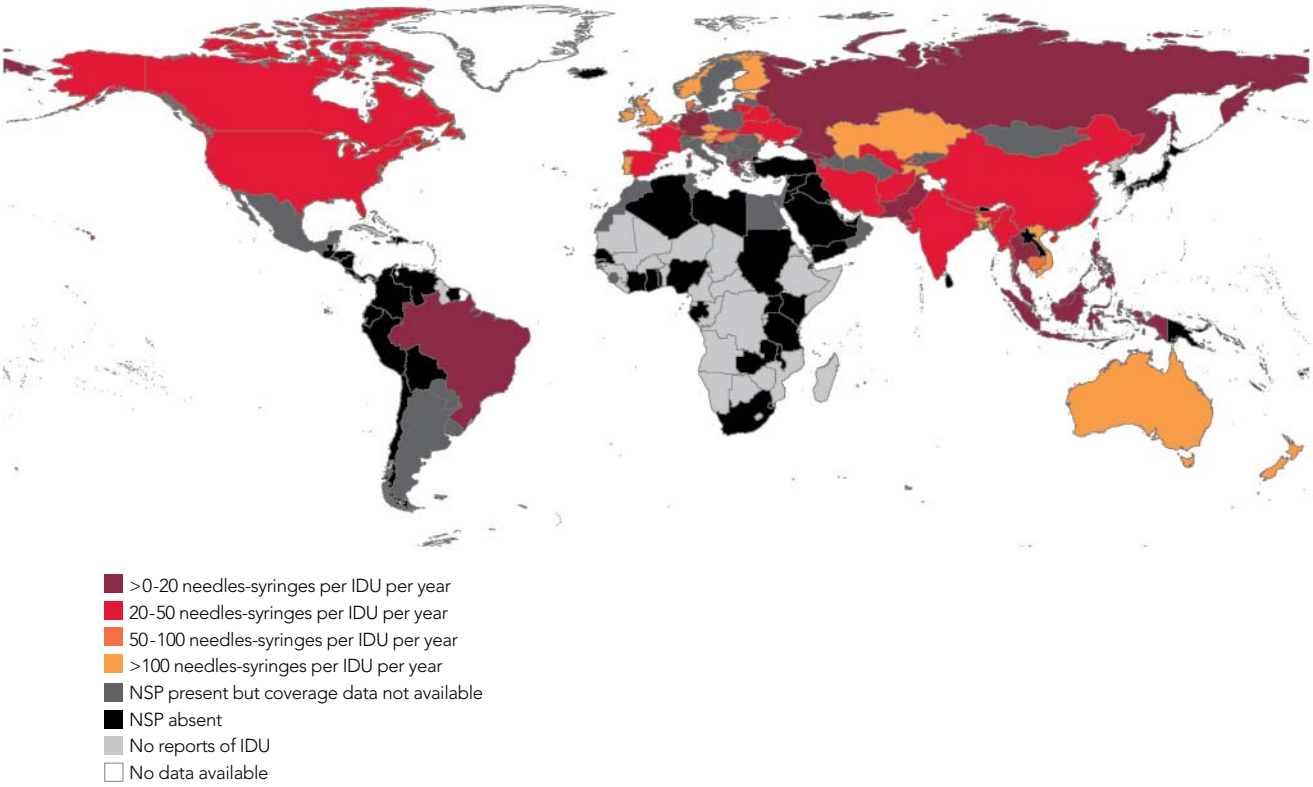


Figure 3.5

Availability of sterile injecting equipment, 2010

Global estimates of the availability of sterile injecting equipment per person who uses drugs per year, 2010.

Source: Mathers BM, Degenhardt L, Ali H, Wiessing L, Hickman M, Mattick R, et al. HIV prevention, treatment and care for people who inject drugs: A systematic review of global, regional and national coverage. The Lancet 2010;375:1014-28.



with 25.8 million condoms provided through international and nongovernmental funding sources in 2009, as opposed to 10.7 million condoms financed through these sources in 2006. Between 2008 and 2009 alone, condom distribution increased by 10 million. Global distribution of female condoms, however, still lags far behind that of male condoms.

HIV prevention efforts focused on people who inject drugs

An estimated 15.9 million [11.0 million–21.2 million] people inject drugs worldwide; of these, nearly 20%, an estimated 3 million [500 000–5.5 million] are living with HIV (12)(Table 3.1). Access to HIV prevention services, including harm-reduction programmes assisting people who use drugs, has increased, but not at the required scale. Globally, the median coverage of HIV prevention services was 32%. Although both men and women who inject drugs experience a significant burden of HIV disease, infection with other

bloodborne viruses and also potentially life-threatening conditions such as tuberculosis, women who inject drugs face even greater risks. Studies indicate that women who inject drugs are more likely to face violence and greater levels of stigma and are more likely to die earlier (13).

Making injecting safer for people who use drugs by providing sterile equipment is relatively easy and inexpensive and can significantly reduce levels of HIV transmission. Half of the 50 countries that report data about the use of safe injection equipment estimate that 80% or more of the people who inject drugs used a sterile needle at last injection. In Eastern Europe and Central Asia, where the HIV epidemics are primarily driven by injecting drug use, five of nine countries (Belarus, the Republic of Moldova, the Russian Federation, Ukraine and Uzbekistan) reported in 2009 that more than 80% of people who inject drugs used sterile injecting equipment at last injection. Eight of 12 countries reporting in South and South-East Asia report rates of sterile needle usage at last injection exceeding 80%. In Central and South America, Argentina reports more than 80% using a sterile needle at last injection (most other countries do not report on this indicator). In Oceania, Australia reports more than 80% using a sterile needle at last injection (other countries not reporting).

In North America and Europe, 10 countries report exceeding 80% usage of sterile equipment and nine below. In the Middle East and North Africa, all three reporting countries had levels below 80%. In the other regions, a large majority of countries did not report on this indicator.

According to WHO, UNODC and UNAIDS target-setting guidelines (16), the availability of fewer than 100 syringes per person who injects drugs per year is considered low, 100–200 medium, and more than 200 high. In addition to the survey data on the extent to which sterile needles were used at the most recent injection, Figure 3.5 illustrates that the number of sterile needles made available per estimated person who injects drugs is very low.

Men who have sex with men—a key population still needing support

Access to HIV prevention programmes and services for men who have sex with men has increased somewhat in the past two years but remains inadequate overall (Figure 3.6). Safer sex behaviour, especially not having unprotected penetrative sex, is effective in protecting individuals and the larger communities of men who have sex with men from HIV and other sexually transmitted infections. Data from 78 countries show that condom use by men who have sex with men was less than 50% in 24 countries, between 50% to 60% in 16 countries, 60% to 80% in 28 countries and more than 80% in only seven countries: Andorra, Cambodia, Guyana, Myanmar, Panama, Suriname, and Uzbekistan. Figure 3.7 gives the median and range of the proportion of reported condom use at last sex by men who have sex with men by geographical region.

Among countries reporting to UNGASS in 2010, a global median of 42% of men who have sex with men reported receiving an HIV test and the result in the past 12 months. A man knowing his HIV-positive status can protect his health by receiving appropriate treatment early and also be encouraged through

Table 3.1

Countries in which HIV infections among people who inject drugs represent 20% or more of the total number of people living with HIV

Source: Mathers et al. (12).

Azerbaijan
Canada
China
Estonia
Georgia
Indonesia
Iran (Islamic Republic of)
Italy
Kazakhstan
Kyrgyzstan
Malaysia
New Zealand
Pakistan
Russian Federation
Spain
Tajikistan
Ukraine
United States of America
Uzbekistan

counselling and support to lessen the risk of transmitting the virus to his future partners. A man who tests HIV-negative can be supported to continue to avoid being infected. Some regions report testing rates considerably above the median, such as in Central and South America, where Argentina, El Salvador, Guyana, and Paraguay reported that more than 80% of men who have sex with men have had an HIV test and know the results in the past 12 months.

80%

Argentina, El Salvador, Guyana, and Paraguay reported that more than 80% of men who have sex with men have had an HIV test and know the results in the past 12 months.

A recent survey by the Global Forum on MSM and HIV assessed the availability of and access to testing and prevention services for sexually transmitted infections and HIV among men who have sex with men in eight regions (18). Of the 17 services assessed (including sexually transmitted infection and HIV testing and counselling, HIV treatment, free condoms, mental health services, circumcision, and mass-media campaigns to reduce HIV and to reduce homophobia), only in two areas (sexually transmitted infection testing and circumcision) did a majority of respondents (only 51% in both cases) report that the services were easily accessible. Respondents also noted the many barriers to their access to services, including homophobia, stigma, criminalization of same-sex acts, policy barriers, and insensitivity or lack of awareness among health care providers.

Commercial and transactional sex

HIV prevention programmes among sex workers have achieved major progress both in increasing condom use in sex work and in reducing associated HIV infections. Considerable room remains, however, to improve the availability and use of condoms among sex workers and their clients. In 27 of 87 countries, data indicate that 90% or more of sex workers report condom use with their last client. A further 17 countries report condom use by sex workers at 80% to 90%. In contrast, 17 countries report rates of less than 60%.

In countries with concentrated epidemics, HIV prevalence trends among recent initiates into sex work provide insight into the trajectory of the HIV epidemic and are a proxy measure of HIV incidence. Figure 3.8 illustrates the case of sex workers in Cambodia: HIV prevalence among those engaged in sex work for less than one year declined steadily from 2002 to 2006, tracking a decline in estimated incidence. HIV prevalence also declined among sex workers who have been working for more than two years, but prevalence remains considerably higher than for those more recently engaged in sex work.

In India, the Avahan programme, underway since 2003, has demonstrated significant results among sex workers (19). The combined prevention approach of Avahan (community outreach, empowerment, condom programming and sexually transmitted infection and HIV testing services) explicitly addresses individuals with great vulnerability to HIV infection in six high-prevalence states: sex workers, men who have sex with men, people who inject drugs, and men at higher risk along key trucking routes. Recent results from an Avahan study of sex workers in Karnataka, in south India, showed that, from the time the programme was first implemented, the HIV prevalence in this population declined from 20% to 16% and condom use at last client sex increased from 66% to 84% (20).

Figure 3.6

HIV prevention programmes for selected populations

Median coverage of HIV prevention programmes for selected population groups, 2008 and 2010.

Source: Country Progress Reports 2010.

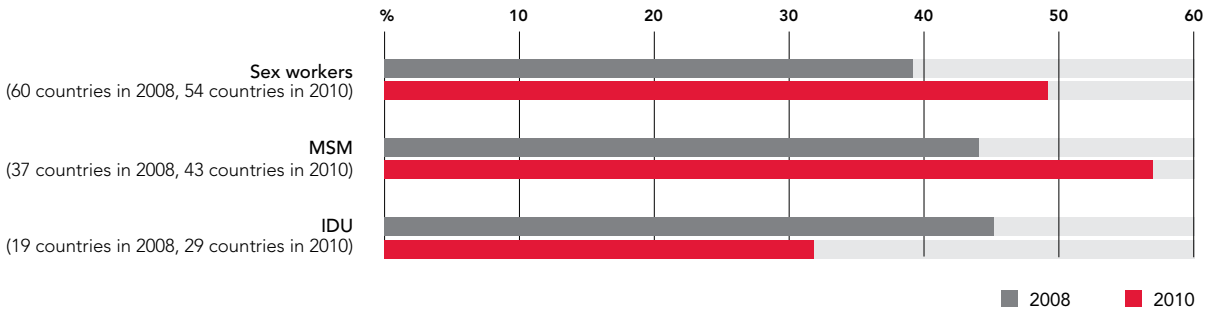


Figure 3.7

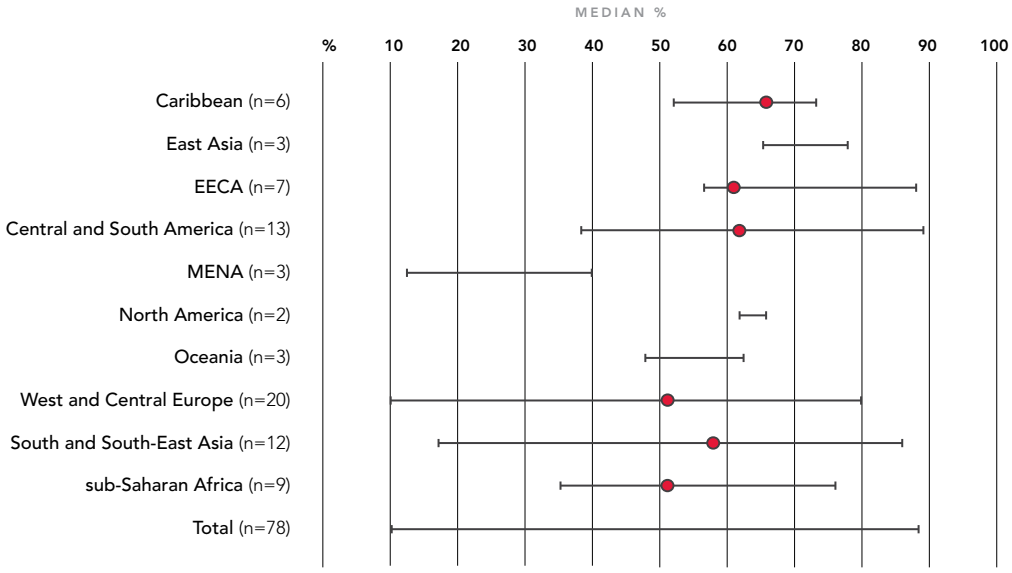
Condom use by men who have sex with men

Percentage (median and range) of men who have sex with men who used a condom at last sex by geographical region, 2010.

Source: Country Progress Reports 2010

Median

Medians were not calculated where number of countries was 5 or less



Structural approaches to HIV prevention

Tackling the social and economic drivers of HIV risk and vulnerability can significantly influence the epidemic if these approaches are implemented systematically.

One example of social change that could directly reduce the number of new HIV infections is reducing the violence faced by people who inject drugs. Moving beyond the availability of sterile needles and syringes and treatment programmes to reduce HIV for people who inject drugs—changes in the social, economic and policy environment can also have a marked effect. For example, an association has been observed between police violence against people who inject drugs and specific types of higher-risk behaviour such as using preloaded syringes. Building on this association, recent modelling has estimated the number of HIV infections that could be averted if police violence against people who inject drugs was eliminated (Figure 3.9).

Another approach is the IMAGE Programme in South Africa, which combines microfinance for women with gender training and community mobilization. The programme was evaluated as a randomized trial and found positive effects on household economic well-being and women's empowerment, a 50% reduction in intimate partner violence, and reduced HIV risk behaviour among young women participants. The programme has scaled up to reach more than 12 000 women in South Africa.

Schooling for girls has the potential to reduce HIV risk. The positive effects of both school participation and HIV programmes in schools on HIV-related risks have been well established (22). Age-disparate partnerships, in which young women are in relationships with men at least five years older, are also associated with elevated risk of HIV infection (23). Cash transfers are emerging as a potential intervention to mitigate certain social or economic drivers of HIV vulnerability.

Several recent studies provide evidence of the effectiveness of cash transfers in educational retention and HIV prevention. In Zomba, Malawi, for example, both conditional and unconditional cash transfers for adolescent girls resulted in increased school attendance among beneficiaries (24). Early marriage, pregnancy, and self-reported sexual activity declined notably among beneficiaries of both types of cash transfers. According to the evidence, observed changes in self-reported sexual `account for less than half of the programme's effects on HIV, with the rest due to a change in the risk profile of the girls' sexual partners (25). These results suggest that structural interventions such as cash transfers might be a promising tactic for overcoming age-disparate sex, a key driver of the epidemic in several countries.

In addition, structural approaches that strengthen solidarity and collective action `can play a critical role in enhancing resilience to HIV among marginalized groups, including sex workers. Avahan, the India AIDS Initiative funded by the Bill & Melinda Gates Foundation (19), has found that structural activities can be feasible and cost-effective, and can contribute to more sustainable HIV prevention when integrated into a package of prevention activities. Pathfinder International, a key partner of Avahan, and its local implementing nongovernmental organization partner in Kolhapur are implementing a structural intervention that provides supported peer-led outreach, crisis response services and community mobilization to street-based sex workers, whose visibility makes them vulnerable to arrest and to violence from police, clients, and gangs (26).

Food insecurity is widespread globally (more than 1 billion people are undernourished) and forces people to use various types of coping behaviour, some of which increase the likelihood of engaging in unprotected sex, particularly sexual risk-taking among women, as they may engage in transactional sex to procure food for themselves and their children. A study, conducted in Botswana and Swaziland, showed that food insecurity was associated with inconsistent condom use with a "non-primary" partner: women reporting food insufficiency in the previous 12 months had 80% increased odds of selling sex for money or resources, 70% increased odds of engaging in unprotected sex and reporting lack of sexual control and 50% increased odds of intergenerational sex (27). Similarly, a study in Uganda that investigated the relationship between food insecurity and transactional sex showed the negative effects of food insecurity on control over condom use and the risk of staying in abusive relationships (28). Gender inequality, often reinforced by intergenerational sex, further weakens women's negotiating power. A study from Nigeria reported that 35% of female sex workers said that poverty and lack of means to obtain food caused them to join the sex trade, and to engage in unprotected sex with clients (29). These associations remained even when controlling for other markers of socioeconomic status.

Figure 3.8

Condom use and HIV prevalence among sex workers in Cambodia

Percentage of sex workers using condoms and HIV prevalence among brothel-based sex workers in Cambodia by length of time involved in sex work, 1998–2007.

Source: M Mahy, C Chhea, T Saliuk, O Varetska, R Lyerla (2010). A proxy measure for HIV incidence among populations at increased risk to HIV Vol 2(1):8, Journal of HIV/AIDS Surveillance and Epidemiology.

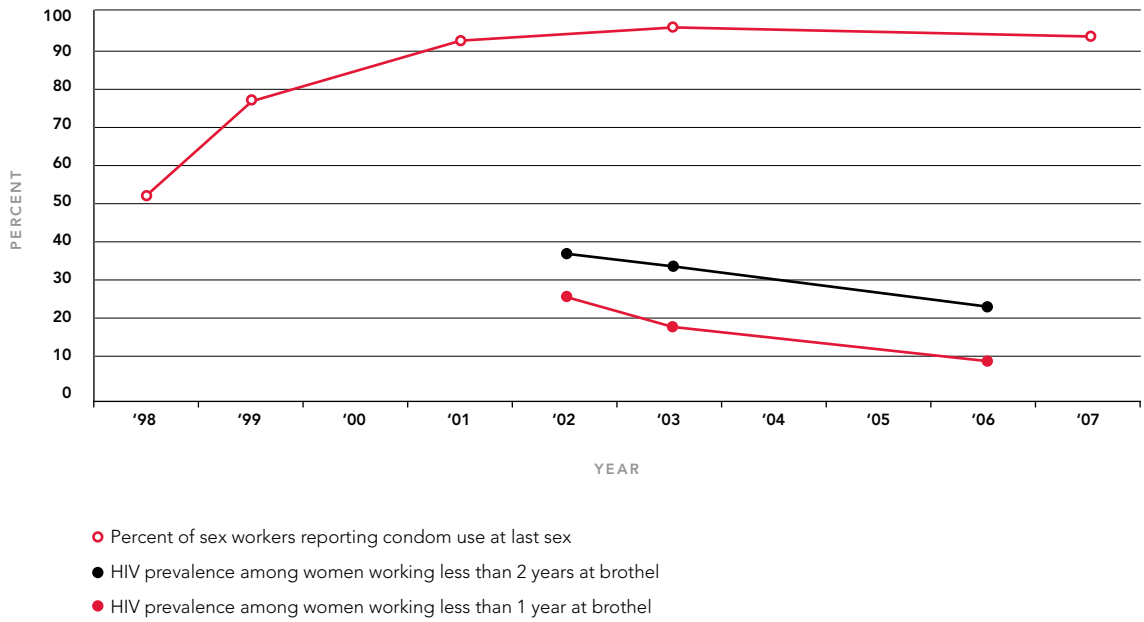
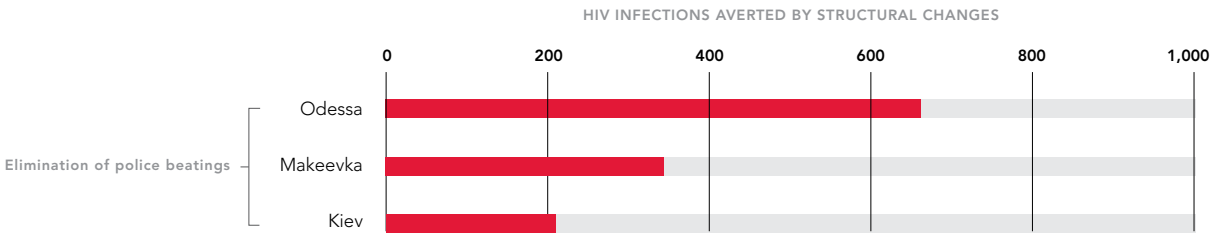


Figure 3.9

Averting HIV infection by eliminating police beatings of people who inject drugs, Ukraine

HIV infections that could be averted by eliminating police beatings of people who inject drugs in three cities in Ukraine

Source: Strathdee et al 2010



[2] Countries with the largest number of pregnant women living with HIV in 2009: Angola, Botswana, Burkina Faso, Burundi, Cameroon, Chad, Cote d'Ivoire, Democratic Republic of the Congo, Ethiopia, Ghana, India, Kenya, Lesotho, Malawi, Mozambique, Namibia, Nigeria, Rwanda, South Africa, Sudan, Swaziland, Uganda, United Republic of Tanzania, Zambia, Zimbabwe.

Significant strides in preventing mother-to-child transmission

Preventing mother-to-child transmission of HIV has been a fundamental advance in the AIDS response for the past decade. Infection rates among children born to mothers living with HIV have dropped significantly in recent years, from 500 000 [320 000–680 000] in 2001 to 370 000 [230 000–510 000] children infected with HIV in 2009.

Several countries have advanced efforts to prevent the mother-to-child transmission of HIV. Botswana, Namibia, South Africa and Swaziland have achieved more than 80% coverage of antiretroviral prophylaxis to prevent mother-to-child transmission. Seven other countries in sub-Saharan Africa have coverage levels of 50% to 80%. Sub-Saharan Africa as a whole achieved 54% [40%–84%] coverage. In East and Southern Africa, 68% [53%–95%] of pregnant women living with HIV received antiretroviral medication to prevent mother-to-child transmission in 2009 (up substantially from 15% in 2005). In West and Central Africa, however, coverage lags at 23% [16%–44%] (30).

Worldwide, 53% [40%–79%] of women in low- and middle-income countries received antiretroviral medication to prevent the mother-to-child transmission of HIV in 2009, versus 45% [37%–57%] in 2008 and 15% in 2005 (31). The gap in reaching the target of 80% coverage of antiretroviral prophylaxis for preventing mother-to-child transmission is becoming more concentrated in a handful of countries, with 14 countries comprising more than 80% of the global gap. Nigeria alone now contributes to 32% of the gap, with the Democratic Republic of the Congo next, contributing 7% of the gap (Figure 3.10, Figure 3.11).

The proportion of pregnant women in low- and middle-income countries who received an HIV test reached 26%, up from 21% in 2008 and 7% in 2005 (31)—progress, but still a low figure, on the path towards the UNAIDS goal of virtually eliminating the mother-to-child transmission of HIV by 2015. In the 25 countries with the greatest number of pregnant women living with HIV,[2] the percentage receiving HIV testing and counselling varied greatly—from more than 95% in South Africa and Zambia to 9% in the Democratic Republic of the Congo and 6% in Chad (31).

Coverage for services for preventing mother-to-child transmission has lagged behind antenatal care access (Figure 3.12). In addition, women living with HIV continue to have a high unmet need for family planning: in some countries, more than one quarter of women living with HIV do not desire their current pregnancy or would like to delay their next pregnancy by two years. Strengthening family planning services and the delivery of maternal, newborn and child health care would produce better outcomes for babies and their mothers.

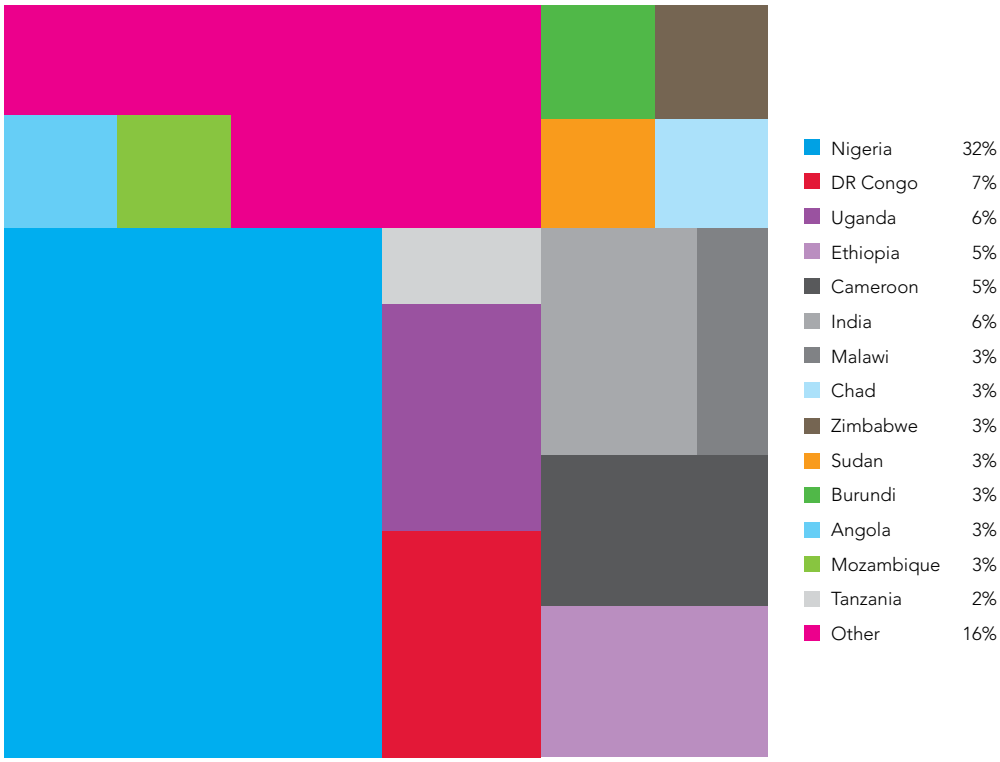
The efficacy of antiretroviral drugs in preventing mother-to-child transmission of HIV varies with the type of regimen used and the duration over which it is given. Combination regimens which include different types of antiretroviral drugs are more efficacious than monotherapies. Monotherapies are also prone to building antiretroviral resistance in the virus, which may limit future therapeutic options when treatment is needed. According to the 2010 WHO

Figure 3.10

Gaps in antiretroviral therapy to prevent mother-to-child transmission

Global gap in providing antiretroviral therapy to 80% of mothers to prevent mother-to-child transmission in low- and middle-income countries.

Source: WHO Towards Universal Access 2010.



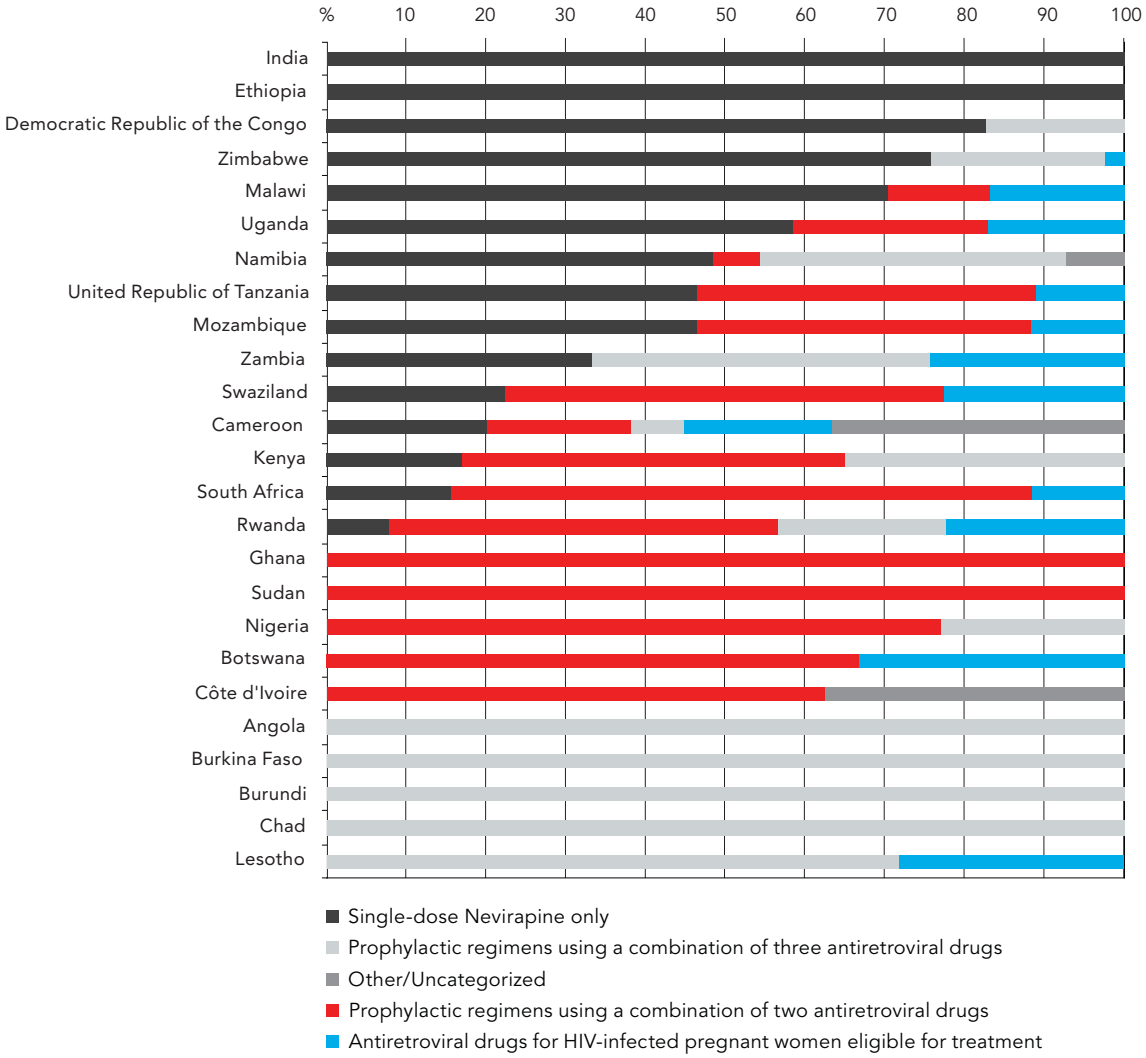
treatment guidelines it is recommended that pregnant women living with HIV and their exposed infants receive combination therapy rather than single-dose Nevirapine. Antiretroviral prophylaxis is also recommended during breastfeeding in settings where breastfeeding is judged to be the safest infant feeding option. In addition, all women eligible for treatment under WHO guidelines should receive an appropriate combination therapy for their own health.

In the 59 low- and middle-income countries that provided disaggregated data for their prevention of mother-to-child regimens around 30% of pregnant women received single-dose Nevirapine, while 54% received a combination regimen to avoid mother-to-child transmission of HIV. About 15% of all mothers received ongoing antiretroviral therapy based on eligibility criteria for treatment. Figure 3.11 shows the distribution of regimens given for the prevention of mother-to-child transmission in 2009 for the 25 countries with the greatest number of HIV positive pregnant women. Of those countries 10 have moved from using single-dose Nevirapine to providing more efficacious combination regimens.

Figure 3.11

Distribution of prophylactic regimens for the prevention of mother-to-child transmission

Source: Country Progress Reports 2010



However, in India, Ethiopia, the Democratic Republic of Congo, Zimbabwe and Malawi over two thirds of women who were provided with antiretrovial drugs for the prevention of mother-to-child transmission were still offered single dose Nevirapine. In these countries there is an urgent need to update the regimens in line with the global standards.

New tools to expanding effective HIV prevention

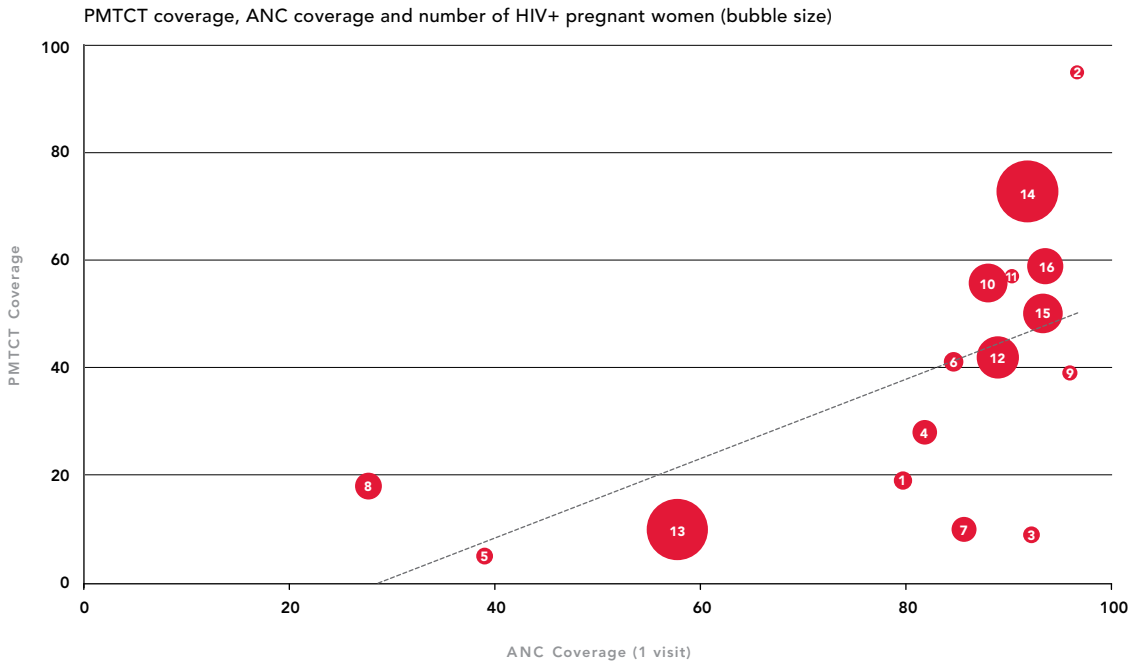
The goals and targets set at the United Nations General Assembly Special Session on HIV/AIDS (UNGASS) in 2001, which emphasize increasing knowledge and behaviour change, continue to be the mainstay of HIV prevention efforts. Since 2001, major advances in HIV prevention tools and methods have been integrated progressively into increasingly effective HIV prevention programmes.

Figure 3.12

Preventing mother-to-child transmission

Coverage of antenatal care services and services for preventing mother-to-child transmission among women living with HIV in high-prevalence countries, 2010

Source: WHO and UN Statistics Division



Among these are efforts to prevent mother-to-child transmission and to promote male circumcision. On the horizon is the potential of expanded efforts to reap the prevention benefits of access to antiretroviral therapy, topical uses of antiretroviral drugs in microbicides, and the potential expansion of the prophylactic use of antiretroviral drugs before exposure to HIV.

Male circumcision

Three clinical trials have demonstrated that adult male circumcision significantly reduces the likelihood of uninfected men acquiring HIV from an HIV-infected female sex partner. UNAIDS and WHO have recommended that male circumcision be scaled up in areas of high HIV prevalence and low rates of male circumcision. A review of nine country experiences of scaling up adult male circumcision in Southern and Eastern Africa shows significant roll-out in the Nyanza province of Kenya and considerable experience gained in other areas (Table 3.2).

Table 3.2

Scaling up male circumcision

Recent roll-out of the scaling up of adult male circumcision in nine countries.

Source: Meeting reports and presentations. Durham, NC, Clearinghouse on Male Circumcision for HIV Prevention, 2010.

	Number circumcised	Time period	Number of sites established
BOTSWANA	6 180	April 2009 – March 2010	35
KENYA	91 300 (90 000 in Nyanza alone)	2009 – June 2010	
NAMIBIA	350	September 2009 – June 2010	3
RWANDA	542	October 2009 – April 2010	9
SWAZILAND	10 000	2008 – June 2010	
UGANDA	5 340	October 2008 – March 2010	
UNITED REPUBLIC OF TANZANIA	4 700	September 2009 – May 2010	3
ZAMBIA	9 906 10 000 9 179	January – June 2010 2009 2007 – 2008	56
ZIMBABWE	6 070	May 2009 – April 2010	5

Microbicides

Recent promising results of a tenofovir-based gel have raised hopes that an additional female-initiated prevention option may soon become viable. This landmark proof-of-concept study by the Centre for the AIDS Programme of Research in South Africa (CAPRISA) (34) found that the microbicide gel studied reduced HIV infection by 39% and herpes simplex virus-2 infection by 51% and that the gel was both safe and acceptable when used once in the 12 hours before sex and once in the 12 hours after sex by women aged 18–40 years.

"RECENT PROMISING RESULTS OF A TENOFOVIR-BASED GEL HAVE RAISED HOPES THAT AN ADDITIONAL FEMALE-INITIATED PREVENTION OPTION MAY SOON BECOME VIABLE."

Moving forward, based on these data, and making a safe and effective tenofovir gel available to women who want it will require: rapidly moving to additional trials to confirm results; determining the requirements for the approval by national drug regulatory authorities of this new indication for tenofovir; conducting the operations research needed to determine how to deliver and sustain product supplies within combination prevention programmes; determining the frequency of HIV testing needed to ensure the safe use of the microbicide gel; and accelerating studies to expand knowledge of whether the product is safe and effective for women younger than 18 years of age and pregnant women. ■

THE HIV TREATMENT AND PREVENTION CONTINUUM

When the United Nations General Assembly Special Session on HIV/AIDS was held in 2001, access to antiretroviral therapy in low- and middle-income countries was in its infancy. By 2006, Member States unanimously supported goals towards universal access to HIV prevention, treatment, care and support. This commitment was underpinned by successful country experiences in accelerating access to HIV treatment.

Antiretroviral therapy is now better seen as having several crucial roles in the AIDS response. This is especially true when prevention and treatment interact in synergy, for example in the prevention of mother-to-child transmission, in post-exposure prophylaxis, and in the beneficial results from reduced viral load at both the individual and population levels in reducing the onward transmission of HIV. Trials are also underway to examine their role in pre-exposure prophylaxis.

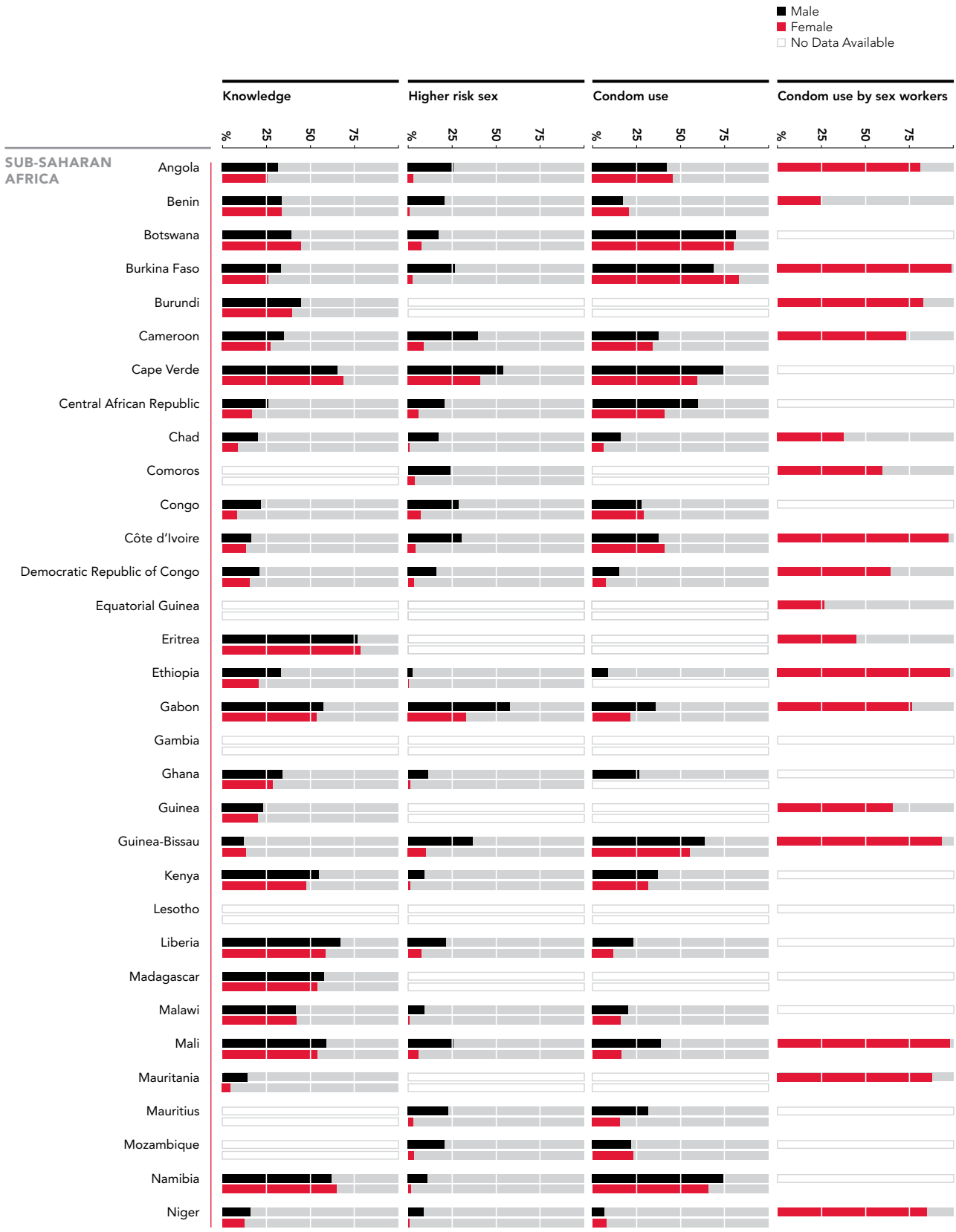
A concerted focus on bridging the gap between HIV treatment need and HIV treatment access will maximize the potential of antiretroviral therapy to contribute to secondary individual, family and population-level HIV prevention benefits. These secondary benefits will be realized where antiretroviral therapy reaches everyone in need of treatment and where people living with HIV are able to shape HIV prevention programming in a framework of "positive health, dignity and prevention". Treatment is not a "magic bullet" to bring HIV epidemics to a halt (35), but antiretroviral therapy as an element of combination HIV prevention programmes seems likely to have potentially significant secondary benefits beyond prevention programmes that do not include increased treatment access. The action agenda to build stronger prevention and treatment responses in tandem requires:

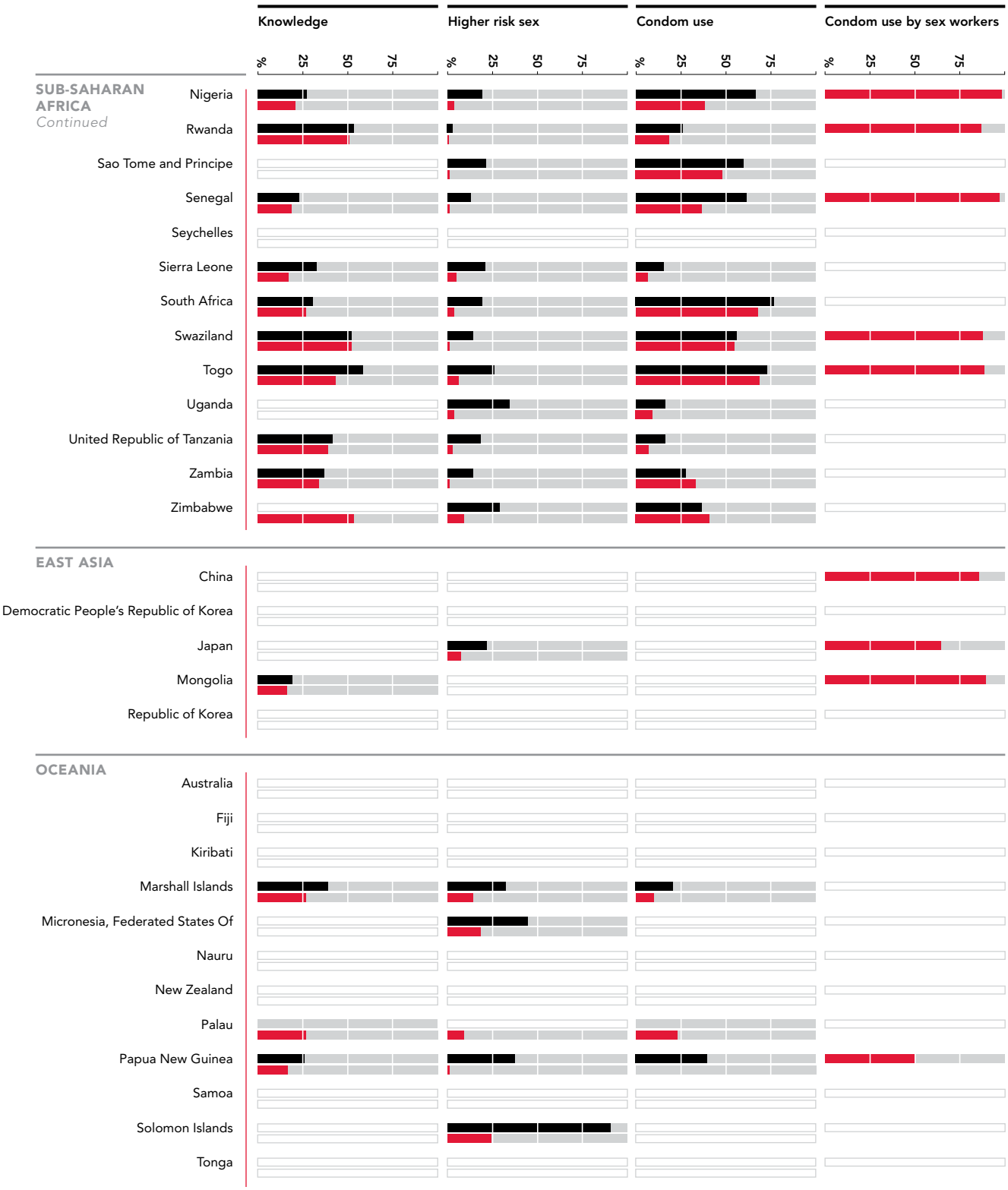
- non-stigmatizing health services;
- effective referral systems across HIV, tuberculosis, and sexually transmitted infection behaviour and social support services;
- increased investment in the capacities of people living with HIV and key affected communities to organize and empower themselves; and
- social and behavioural change communication around risk and treatment.

ACTION ITEMS

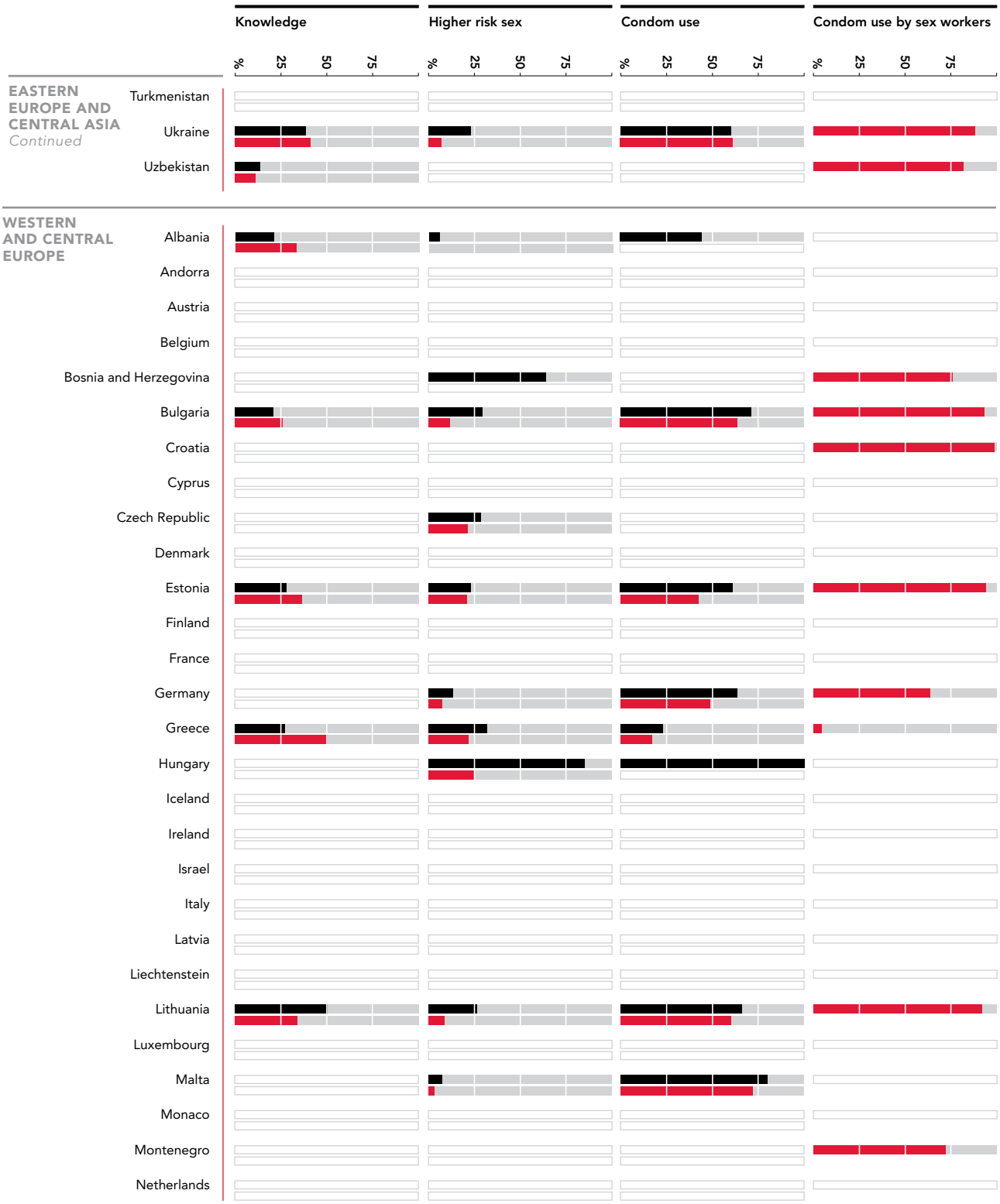
- HIV prevention programmes must be scaled up rapidly to deflect the upward trajectory of the epidemic.
- Investments in HIV prevention programmes are insufficient and should increase. National programmes should ensure that investments are given priority according to epidemic patterns to reach the populations most in need.
- HIV prevention programmes must include a combination of behavioural, biomedical, and structural responses, and these activities should operate in synergy.
- HIV prevention programmes should reach men who have sex with men, sex workers and their clients, transgender people, and people who inject drugs. Behaviour change and condom promotion efforts must work in tandem.
- The virtual elimination of mother-to-child transmission of HIV is possible. Current advances in stopping new infections among children must be accelerated by integrating services in antenatal care settings.
- New HIV prevention methods such as male circumcision must be scaled up in countries with generalized epidemics.
- The results from the CAPRISA microbicide gel trial hold promise for a woman-initiated and controlled HIV prevention option. The international community must fully support the next steps to confirm the trial results at the earliest.

SCORECARD: HIV PREVENTION




Knowledge
Higher risk sex
Condom use
Condom use by sex workers
% 25 50 75
SUB-SAHARAN AFRICA
Continued
Nigeria
Rwanda
Sao Tome and Principe
Senegal
Seychelles
Sierra Leone
South Africa
Swaziland
Togo
Uganda
United Republic of Tanzania
Zambia
Zimbabwe
EAST ASIA
China
Democratic People's Republic of Korea
Japan
Mongolia
Republic of Korea
OCEANIA
Australia
Fiji
Kiribati
Marshall Islands
Micronesia, Federated States Of
Nauru
New Zealand
Palau
Papua New Guinea
Samoa
Solomon Islands
Tonga

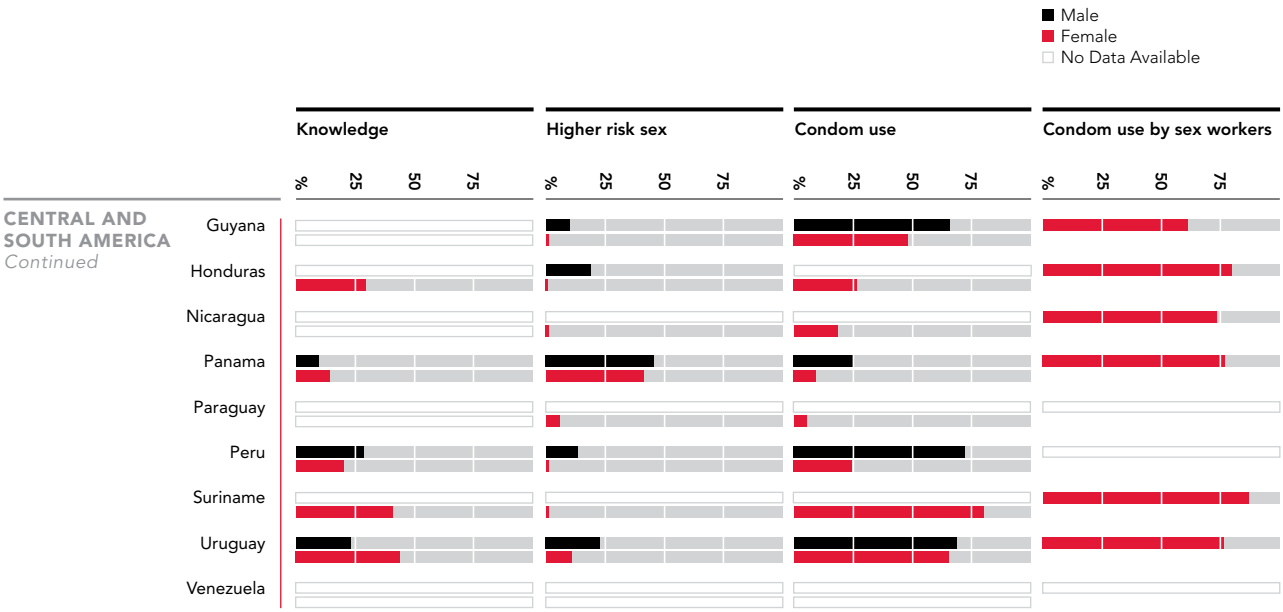
SCORECARD: HIV PREVENTION

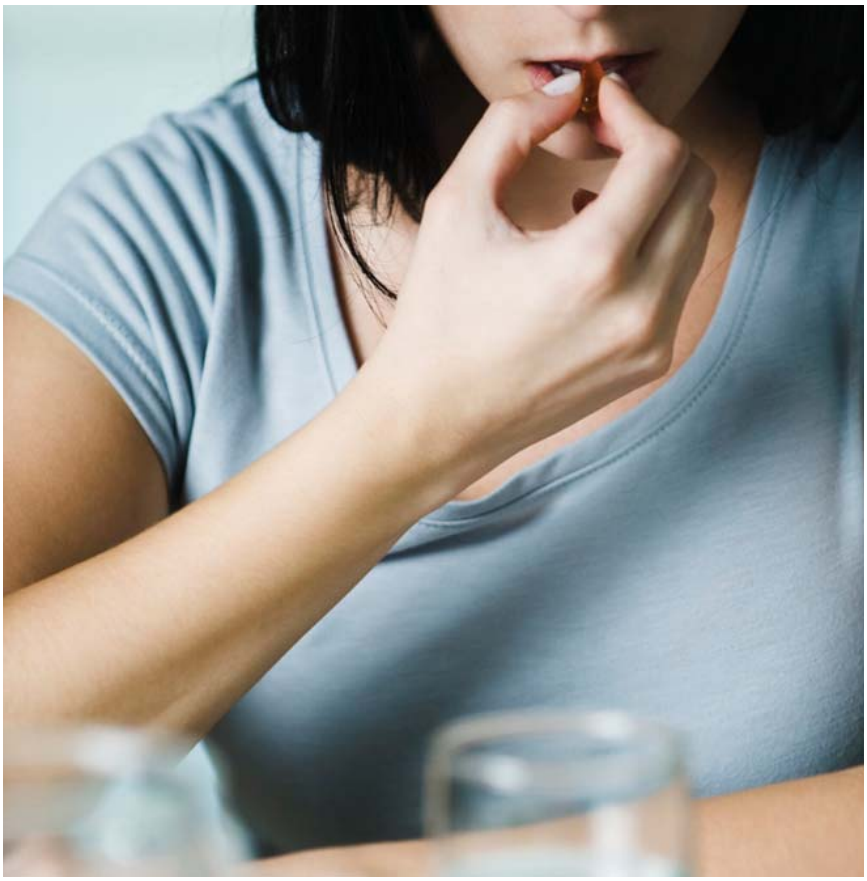

Knowledge
Higher risk sex
Condom use
Condom use by sex workers
% 25 50 75
EASTERN EUROPE AND CENTRAL ASIA
Continued
Turkmenistan
Ukraine
Uzbekistan
WESTERN AND CENTRAL EUROPE
Albania
Andorra
Austria
Belgium
Bosnia and Herzegovina
Bulgaria
Croatia
Cyprus
Czech Republic
Denmark
Estonia
Finland
France
Germany
Greece
Hungary
Iceland
Ireland
Israel
Italy
Latvia
Liechtenstein
Lithuania
Luxembourg
Malta
Monaco
Montenegro
Netherlands

SCORECARD: HIV PREVENTION

Knowledge
Higher risk sex
Condom use
Condom use by sex workers
% 25 50 75
MIDDLE EAST AND NORTH AFRICA
Continued
Saudi Arabia
Somalia
Sudan
Syrian Arab Republic
Tunisia
United Arab Emirates
Yemen
CARIBBEAN
Antigua and Barbuda
Bahamas
Barbados
Cuba
Dominica
Dominican Republic
Grenada
Haiti
Jamaica
Saint Kitts and Nevis
Saint Lucia
Saint Vincent and the Grenadines
Trinidad and Tobago
CENTRAL AND SOUTH AMERICA
Argentina
Belize
Bolivia
Brazil
Chile
Colombia
Costa Rica
Ecuador
El Salvador
Guatemala

SCORECARD: HIV PREVENTION





HIV TREATMENT

4

KEY FINDINGS

- An additional 1.2 million people received antiretroviral therapy in 2009, bringing the total number of people receiving treatment in low- and middle-income countries to 5.2 million, a 30% increase over 2008.
- At the end of 2009, 36% (about 5.2 million) of the 15 million people in need in low- and middle-income countries were receiving antiretroviral therapy.
- Fewer people are dying from AIDS-related causes. About 14.4 million life-years have been gained by providing antiretroviral therapy since 1996.
- About 50% of pregnant women testing HIV positive were assessed for their eligibility to receive antiretroviral therapy for their own health.
- Children and marginalized populations (such as people who inject drugs) are less likely to receive antiretroviral therapy than the population at large.
- While steady progress is being made in scaling up access to HIV services for people with tuberculosis (TB), the percentage of people with TB who received an HIV test in 2009 remained low, at 26%. Progress in scaling up TB services for people living with HIV is also very slow.
- Children orphaned by AIDS were nearly as likely to attend school as other children.
- The availability of palliative and home-based care services for people living with HIV remains uneven.

» **More people received antiretroviral therapy in all regions in 2009**

Advances toward universal access to treatment, care and support services were a significant achievement in 2009, especially given the considerable challenges that accompanied the flattening of global funding for HIV programmes in low- and middle-income countries. More people are receiving antiretroviral therapy in all regions of the world than at any previous time in the epidemic. However, progress toward universal access goals remained mixed, with substantially greater gains in some settings and on certain aspects of treatment, care, and support than in others.

As of December 2009, an estimated 5.2 million people in low- and middle-income countries were receiving antiretroviral therapy (1). This represented an increase of 1.2 million people, or 30%, over the number receiving such treatment 12 months earlier.

In sub-Saharan Africa, nearly 37% [34%–40%] of people eligible for treatment were able to access life-saving medicines in 2009. Similarly 42% [35%–47%] in Central and South America, 51% [40%–60%] in Oceania, 48% [42%–55%] in the Caribbean, and 19% [15%-21%] in Eastern Europe and Central Asia were accessing such treatment. The increase in the number of people receiving antiretroviral therapy in 2009 was virtually even across Eastern Europe (34%), sub-Saharan Africa (33%), Asia (29%) and the Caribbean (30%). Only in Central and South America (6%), where antiretroviral therapy coverage was already high, was the rate of increase in access in 2009 significantly lower. Antiretroviral therapy coverage for children is lower than that for adults; a low percentage of pregnant women were assessed for their eligibility and received antiretroviral therapy for their own health; limited data show low coverage for key populations at higher risk. Coverage needs to be more equitable.

The number of health facilities delivering antiretroviral therapy increased by 36% in 2009, and the average number of people receiving antiretroviral therapy per health facility rose from 260 in 2008 to 274 in 2009, according to data submitted by 99 countries.

In 2010, WHO issued revised treatment guidelines (2) recommending earlier initiation of antiretroviral therapy, at a CD4 count of <350 cells/mm^3. These new criteria increased the total number of people medically eligible for antiretroviral therapy by roughly 50%—from 10 million to 15 million in 2009.

Half or more of all adults eligible for treatment (CD4 <350 cells/mm^3) were receiving antiretroviral therapy in 29 of the 109 low- and middle-income countries for which data are available by December 2009. Eight countries—Botswana, Cambodia, Croatia, Cuba, Guyana, Namibia, Romania and Rwanda—achieved antiretroviral therapy coverage of 80% or more.

Of the 19 of the 25 low- and middle-income countries with the largest number of people living with HIV, Rwanda achieved 88% coverage among adults, Botswana 83%, and Namibia 76%. Eleven countries (Cameroon, Côte d'Ivoire, Ghana, India, Indonesia, Mozambique, South Africa, Ukraine, United Republic of Tanzania, Viet Nam and Zimbabwe) had coverage of less than 40%. Indonesia and Ukraine reported less than 20% of eligible adults were receiving antiretroviral therapy (Table 4.1).

Antiretroviral therapy coverage for children is lower than that for adults

The number of children younger than 15 years receiving antiretroviral therapy increased by about 80 000 (or 29%) in 2009, from 275 000 to 354 000. However,

37%

People in sub-Saharan Africa eligible for treatment who were able to access life-saving medicines in 2009.

KEY ELEMENTS OF WHO'S 2010 REVISION OF ANTIRETROVIRAL TREATMENT THERAPY GUIDELINES

Start antiretroviral therapy earlier: Begin antiretroviral therapy when the CD4 cell count is less than 350 cells/mm^3.

Use less toxic and more patient-friendly options: Reduce the risk of adverse events and improve adherence by using less toxic drugs and fixed-dose antiretroviral therapy combinations.

Improve management of coinfections between HIV and TB or hepatitis B: Start antiretroviral therapy in all people living with HIV who have active TB and chronic active hepatitis B disease irrespective of CD4 cell count.

Promote strategic use of laboratory monitoring: Use laboratory monitoring such as CD4 and viral load counts to improve the efficiency and quality of HIV treatment and care.

Table 4.1

Treatment coverage for adults and children, 2009 (2006 and 2010 WHO guidelines)

Coverage of antiretroviral therapy among adults and children in 25 countries with the most people living with HIV, 2009 based on 2006 and 2010 WHO guidelines.

Source: Country Progress Reports 2010 and UNAIDS estimates.

	Children[d]			Adult Coverage 2010 Guidelines (CD4 350)[c]			Adult Coverage 2006 Guidelines (CD4 200)[c]		
	Point Estimate[a]	Low	High	Point Estimate	Low	High	Point Estimate	Low	High
Botswana	90%	76%	>95%	83%	77%	>95%	>95%	>95%	>95%
Brazil[b]		65%	>95%		50%	89%		65%	>95%
Cameroon[b]	11%	8%	20%	30%	27%	34%	46%	40%	54%
China[b]		21%	74%		19%	38%		31%	67%
Côte d'Ivoire[b]	15%	10%	30%	29%	26%	32%	44%	38%	49%
Democratic Republic of the Congo		9%	23%		15%	20%		22%	32%
Ethiopia[b]		14%	38%		52%	65%		72%	94%
Ghana	12%	8%	24%	25%	23%	29%	40%	34%	46%
India[b]		24%	59%		23%	27%		37%	45%
Indonesia		14%	48%	21%	14%	30%	34%	24%	58%
Kenya	32%	22%	59%	50%	46%	55%	72%	64%	81%
Lesotho	23%	17%	39%	50%	45%	54%	75%	65%	86%
Malawi	29%	21%	51%	48%	44%	54%	72%	62%	81%
Mozambique	14%	10%	26%	32%	29%	35%	51%	43%	59%
Nigeria	10%	7%	19%	23%	21%	25%	35%	30%	41%
Russian Federation[b]		17%	60%		16%	23%		27%	42%
South Africa	54%	41%	94%	36%	35%	37%	56%	49%	63%
Sudan[b,e]	2%	1%	4%						
Thailand		73%	>95%	61%	49%	77%	75%	61%	95%
Uganda	18%	12%	33%	43%	38%	48%	62%	54%	72%
Ukraine		69%	>95%	9%	8%	10%	15%	13%	17%
United Republic of Tanzania	17%	11%	34%	32%	29%	35%	49%	43%	55%
Viet Nam		54%	>95%	33%	25%	44%	44%	35%	55%
Zambia	36%	26%	65%	68%	62%	76%	>95%	84%	>95%
Zimbabwe	30%	23%	50%	34%	32%	37%	52%	47%	57%

[a]Point estimates published for countries with generalized epidemics only.
[b]Estimates of the number of people needing antiretroviral therapy are currently being reviewed and will be adjusted, as appropriate, based on ongoing data collection and analysis.
[c]The coverage estimates are based on the estimated unrounded numbers of adults receiving antiretroviral therapy and the estimated unrounded need for antiretroviral therapy (based on UNAIDS/WHO methods). The ranges in coverage estimates are based on plausibility bounds in the denominator: that is, low and high estimates of need. The estimates are standardized for comparability according to UNAIDS/WHO methods.
[d]The coverage estimates are based on the estimated unrounded numbers of children receiving antiretroviral therapy and the estimated unrounded need for antiretroviral therapy (based on UNAIDS/WHO methods). The ranges in coverage estimates are based on plausibility bounds in the denominator: that is, low and high estimates of need.
[e]Data for antiretroviral therapy coverage for adults in Sudan are not available for 2009.

children continued to have less access to antiretroviral therapy than adults (28% coverage of children, compared with 37% coverage of adults).

An estimated 90% of the world's children living with HIV reside in sub-Saharan Africa. Antiretroviral therapy coverage of children in the region is slightly below the global average, at just 26%. Among the 25 countries with the greatest number of people living with HIV, only Botswana reported antiretroviral therapy coverage of children of greater than 80% (Table 4.1).

A number of countries report sharply lower antiretroviral therapy coverage for children than for adults. Adult coverage is higher in 12 of the 14 high-burden countries for which coverage estimates for both adults and children are available. In six countries, antiretroviral therapy coverage of children is less than half that of adults, with particularly large differences in countries such as Cameroon (30% adults versus 11% children), Mozambique (32% versus 12%) and Uganda (43% versus 18%). By contrast, two of the 12 countries (South Africa and Botswana) report greater antiretroviral therapy coverage for children than for adults.

Very few pregnant women living with HIV receive antiretroviral therapy for their own health

Access to services for preventing mother-child-transmission of HIV increased between 2008 and 2009, but still few pregnant women living with HIV are screened for their own health. The proportion of pregnant women who tested positive for HIV and were assessed for their eligibility to receive antiretroviral therapy for their own health increased from 34% to 51%. Only 15% of pregnant women living with HIV whose HIV status is detected while accessing maternal and child health services were also provided antiretroviral therapy for their own health at the same time.

15%

15% of pregnant women living with HIV whose HIV status is detected while accessing maternal and child health services were also provided antiretroviral therapy for their own health at the same time.

In the 12 high-prevalence countries that reported on antiretroviral therapy access for pregnant women in both 2007 and 2009, the total number of women enrolled in treatment roughly doubled, from more than 18 000 to more than 37 000. In Swaziland, a major effort to provide antiretroviral therapy in maternal and child health settings increased the number of women beginning therapy from 259 in 2007 to 1844 in 2009.

Access to antiretroviral therapy eludes marginalized populations

Few data are available about access to antiretroviral therapy by sex workers, men who have sex with men and people who inject drugs. Most countries do not collect such data. For example, in Eastern Europe and Central Asia, only four of the 12 countries collect such data. Many countries in Asia, Central and South America and other regions report that negative attitudes on the part of health care workers often deter people at high risk of HIV infection from seeking treatment services (4). Further obstacles to antiretroviral therapy access include laws in a number of countries with sizeable populations of people born outside national borders that limit antiretroviral therapy access to citizens (5). Many prison systems limit access to antiretroviral therapy, according to country reports to UNAIDS (6).

Of the 21 countries that have data on antiretroviral therapy coverage for people living with HIV who inject drugs, 14 countries treat 5% or fewer of all such individuals (7). In only nine countries does treatment reach more than 10% of people living with HIV who inject drugs.

Treatment retention is possible and can be achieved

New data provide strong evidence that high antiretroviral therapy retention rates are achievable. Of the countries for which data are available, 26 report that at least 95% of people are still receiving treatment one year after initiating antiretroviral therapy. Of the 25 countries with the highest number of people living with HIV, Botswana, Brazil and Cameroon report that 90% or more remain on treatment 12 months after initiation. Ghana, India, Kenya, Lesotho, Thailand, Uganda, Ukraine, and Viet Nam all report retaining at least 80% of people in treatment for at least one year. Sudan reports a 12-month retention rate of 56% and Chad only 47%.

"NEW DATA PROVIDE STRONG EVIDENCE THAT HIGH ANTIRETROVIRAL THERAPY RETENTION RATES ARE ACHIEVABLE. OF THE COUNTRIES FOR WHICH DATA ARE AVAILABLE, 26 REPORT THAT AT LEAST 95% OF PEOPLE ARE STILL RECEIVING TREATMENT ONE YEAR AFTER INITIATING ANTIRETROVIRAL THERAPY."

One likely reason for lower treatment retention rates is initiating treatment at a late stage of HIV illness and the premature death of the treatment recipient. Evidence shows that retention rates need to be improved, at least in part, through ongoing efforts to initiate HIV treatment earlier. Long-term retention in treatment is critical for health outcomes, but many people are lost to follow-up during the first year. Loss to follow-up in antiretroviral therapy programmes tends to increase over time.

In Malawi, which has rapidly scaled up antiretroviral therapy in recent years, data suggest that 70% of the people initiating treatment are still recorded as "in treatment" after 24 months, dropping to about 55% after 48 months (Figure 4.1). In Burundi and the Central African Republic, the 48-month retention rate is between 60% and 70%, whereas in Botswana it exceeds 80%. Retention rates may not always be directly comparable, however, as some countries may report data from tertiary hospitals only, report survival rather than retention, or erroneously record transfers to different treatment sites as loss to follow-up.

Better understanding of the factors that depress longer-term retention is needed, and new strategies are needed to increase retention in antiretroviral therapy programmes. Possible factors limiting treatment retention include constraints within health and community systems such as overly centralized treatment programmes that limit geographical accessibility; health worker shortages; drug stock-outs; and weak community treatment literacy.

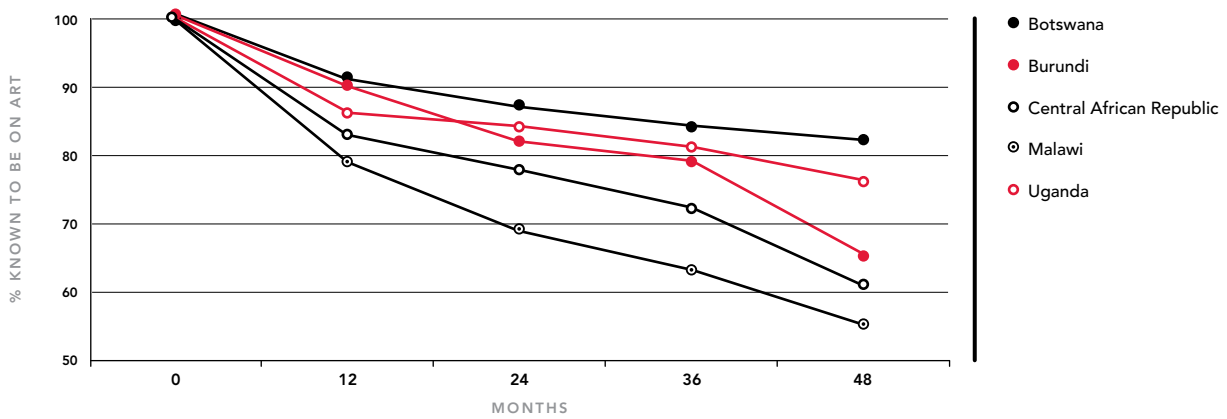
Health systems challenged by and benefit from HIV treatment, care and support

In many countries, overburdened health systems are struggling valiantly to address the challenges posed by HIV, including health worker shortages, centralized programmes, fragmented rather than integrated and holistic services delivery, and weak procurement and supply systems. This is especially true for health systems in sub-Saharan Africa, which must care for two of three people living with HIV but have only 3% of the world's health care providers (8). Challenges associated with health-system capacity are not limited to

Figure 4.1

Adult retention in antiretroviral therapy in selected countries, 0–48 months, 2009

Source: WHO Towards Universal Access 2010.



sub-Saharan Africa, however. Countries in Asia, the Middle East and North Africa report that an inadequate supply of health care workers skilled in delivering antiretroviral therapy impedes treatment scale-up.

In response, many countries have implemented innovative strategies to expand the capacity of health systems to address HIV and other challenges. These include increasing the use of civil society partners to manage health care facilities, other forms of task-shifting in clinical settings, and institutional twinning arrangements between local clinics and institutions in high-income countries. Shortages of human resources for health have severely hampered the rolling out of antiretroviral therapy in sub-Saharan Africa. Current roll-out models are hospital- and physician-intensive. A recent review (9) has shown that task-shifting, or delegating tasks performed by physicians to staff with lower-level qualifications, including lay and community workers, is an effective strategy for addressing shortages of human resources for health in HIV treatment and care.

South Africa is using a nurse-driven model to decentralize antiretroviral therapy provision and expedite treatment scale-up. A randomized controlled trial that has assessed the effectiveness of task-shifting for antiretroviral therapy delivery in urban clinics of Johannesburg and Cape Town found that nurse-managed antiretroviral therapy was not inferior to doctor-managed antiretroviral therapy: both treatment arms had similar outcomes of viral suppression, adherence, toxicity, and death (10). Similarly, in Rwanda, nurses accurately determined eligibility for antiretroviral therapy for more than

INNOVATION AND FLEXIBILITY FOR INCREASING ACCESS TO ANTIRETROVIRAL MEDICINES

THE MEDICINES PATENT POOL

The Medicines Patent Pool was set up in July 2008 by the global health financing mechanism UNITAID, to increase access to newer antiretroviral medicines by creating a pool of patents and intelligence on antiretroviral drug production.

The Medicines Patent Pool aims to increase access to treatment by promoting price reductions of existing antiretroviral drugs, stimulating the production of newer first- and second-line drugs and increasing the number of generic producers of these medicines.

The United States National Institutes of Health recently announced that they will be sharing patents with the Medicines Patent Pool. This is the first time that a patent holder has shared intellectual property on antiretroviral medicines with the newly established Medicines Patent Pool.

MAKING THE MOST OF THE TRIPS AGREEMENT

The World Trade Organization Declaration on the TRIPS Agreement and Public Health (the Doha Declaration) emphasizes that the TRIPS Agreement does not and should not prevent states from taking measures to protect public health and reaffirms their right to use, to the full, the provisions of the TRIPS Agreement that provide flexibility for public health purposes, in particular to promote access to medicines for all. The Doha Declaration also clarifies some of the flexibility contained in the TRIPS Agreement, including that national authorities are free to determine the grounds on which compulsory licences are granted to allow the purchase and use of otherwise protected products, correcting the misconception that some form of emergency is required for issuing a compulsory licence.

Although a number of middle- and low-income countries such as Brazil, Thailand and, more recently, Ecuador have used the flexibility available to them under the TRIPS Agreement and Doha Declaration to make HIV medicines more affordable, in recent years fewer countries have taken advantage of such opportunities.

However, some middle- and low-income countries are entering bilateral and regional trade agreements with high-income countries that impose intellectual property protection that is stricter than necessary under the TRIPS Agreement and that may limit their rights to promote access to affordable HIV medicines and other pharmaceutical products in their countries.

99% of the people examined (11). In Mozambique, people seen by mid-level health workers (with 2.5 years of training) were almost 30% more likely to have CD4 counts done six months after antiretroviral therapy was initiated than those seen by doctors and were 44% less likely to be lost to follow-up. There were no significant differences in mortality, CD4 counts done at 12 months, or adherence rates (12). A study from Malawi found that the training of lay workers as pharmacy assistants reduced prescribing errors by 25% by unburdening the system (13). In the Democratic Republic of the Congo, a study (14) examined concordance between the decisions of doctors and nurses to initiate antiretroviral therapy and found 95% agreement on initiating therapy.

Task-shifting offers high-quality, cost-effective care to more people than a physician-centred model. The main challenges to implementation include adequate and sustainable training, support and pay for staff in new roles, integrating new members into health care teams, and compliance with regulations. Task-shifting should be considered for careful implementation where shortages of human resources for health threaten roll-out programmes.

Systemic deficiencies in commodity procurement and supply management undermine treatment efforts in many countries. Of 94 countries, 38% responding to surveys report at least one drug stock-out in 2009 (1). The Islamic Republic of Iran, Tunisia, Yemen and several countries in Central and South America cite drug supply interruptions as notable barriers to access to antiretroviral therapy (6). In an effort to avoid stock-outs, Rwanda has moved to convene a Coordinated Procurement and Distribution System, which unites the national government, donors, international organizations, and other country-level partners in a common effort to ensure an uninterrupted supply of HIV drugs and other commodities (1).

Across health systems, scaling up antiretroviral therapy provision presents not only challenges but also opportunities and benefits that extend well beyond HIV. In hyper-endemic settings in which people living with HIV have accounted for the bulk of hospital patients in recent years, the scaling up of therapy is freeing up health system capacity to address other health priorities and is reducing absenteeism and deaths among health care workers living with HIV. In addition, infrastructure improvements financed by HIV funding—including refurbished clinics, improved laboratory capacity and strengthened systems for commodity procurement and supply management—are enhancing the availability and quality of care services for everyone, regardless of HIV serostatus.

Reducing the burden of HIV among people with tuberculosis

Tuberculosis (TB) is a leading cause of death among people living with HIV. In 2009, there were an estimated 380 000 deaths from TB among people living with HIV. In sub-Saharan Africa, which accounts for 78% of people with HIV-related TB (1), the HIV prevalence among people with TB is as high as 80% in some countries. However, only 79 000 (0.2%) people living with HIV received isoniazid preventive therapy, a treatment that can greatly reduce a person's risk of developing TB disease.

Under newly released WHO guidelines, everyone with TB who is living with HIV should receive antiretroviral therapy, regardless of their CD4 count. In 2009, 1.6 million people with TB (26% of the total) were tested for HIV, up from 22% in 2008 and 4% in 2003. Of the people tested, 450 000 were found to be HIV positive; 75% of those who were positive received co-trimoxazole and 37% received antiretroviral therapy. Two of the 21 countries with the highest burden of HIV-related TB provide treatment for both diseases for over half the people who need it (Figure 4.2 and Figure 4.3).

Widening the provision of antiretroviral therapy reduces the incidence of TB and AIDS mortality. Multiple research studies show that antiretroviral therapy

"TUBERCULOSIS (TB) IS A LEADING CAUSE OF DEATH AMONG PEOPLE LIVING WITH HIV. IN 2009, THERE WERE AN ESTIMATED 380 000 DEATHS FROM TB AMONG PEOPLE LIVING WITH HIV."

Figure 4.2

Coverage of TB services among people living with HIV, 2009

Coverage services aimed to reduce the burden of TB per 1000 people living with HIV globally.

Source: UNAIDS estimates, WHO Towards Universal Access 2010 and WHO Global TB Control Report 2010.

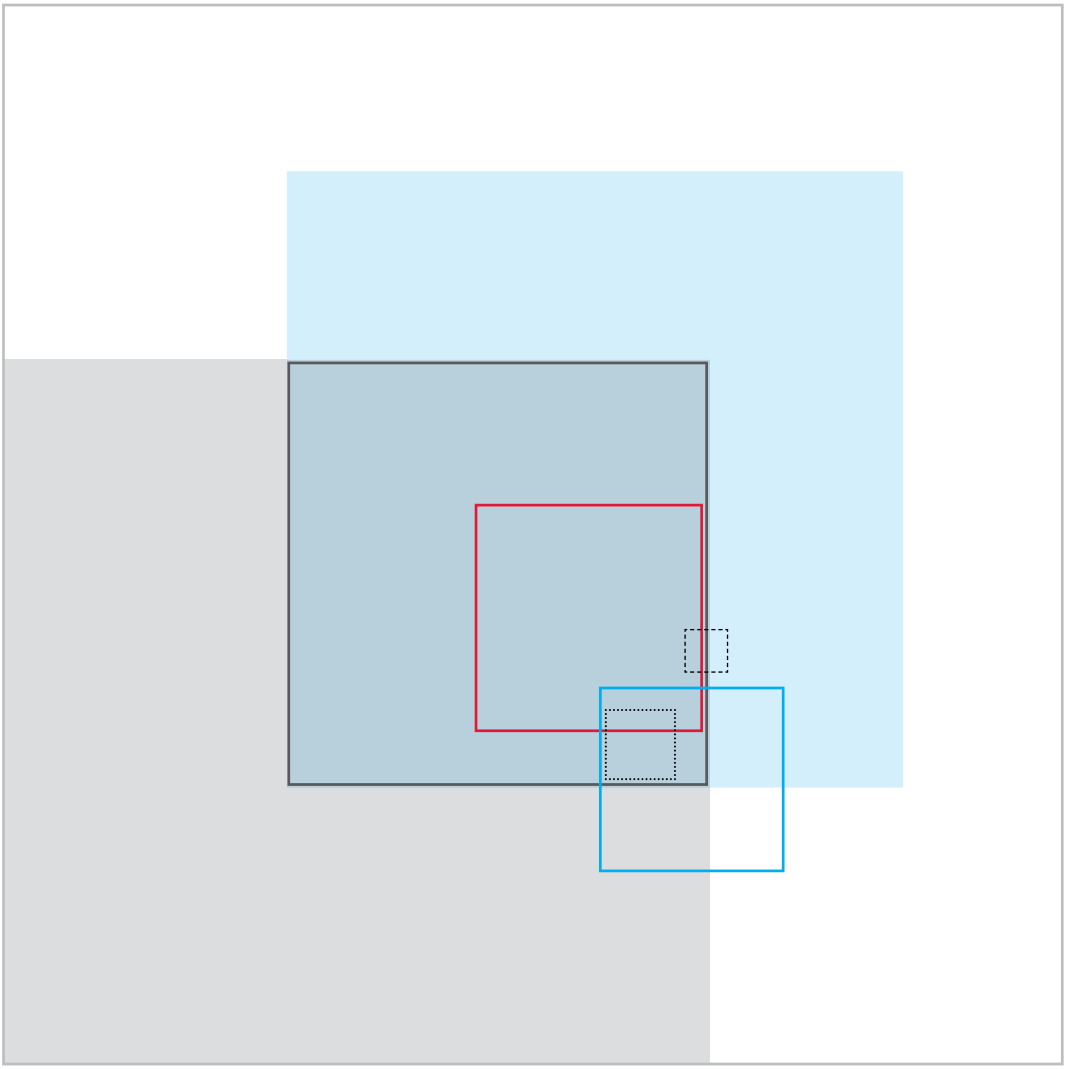
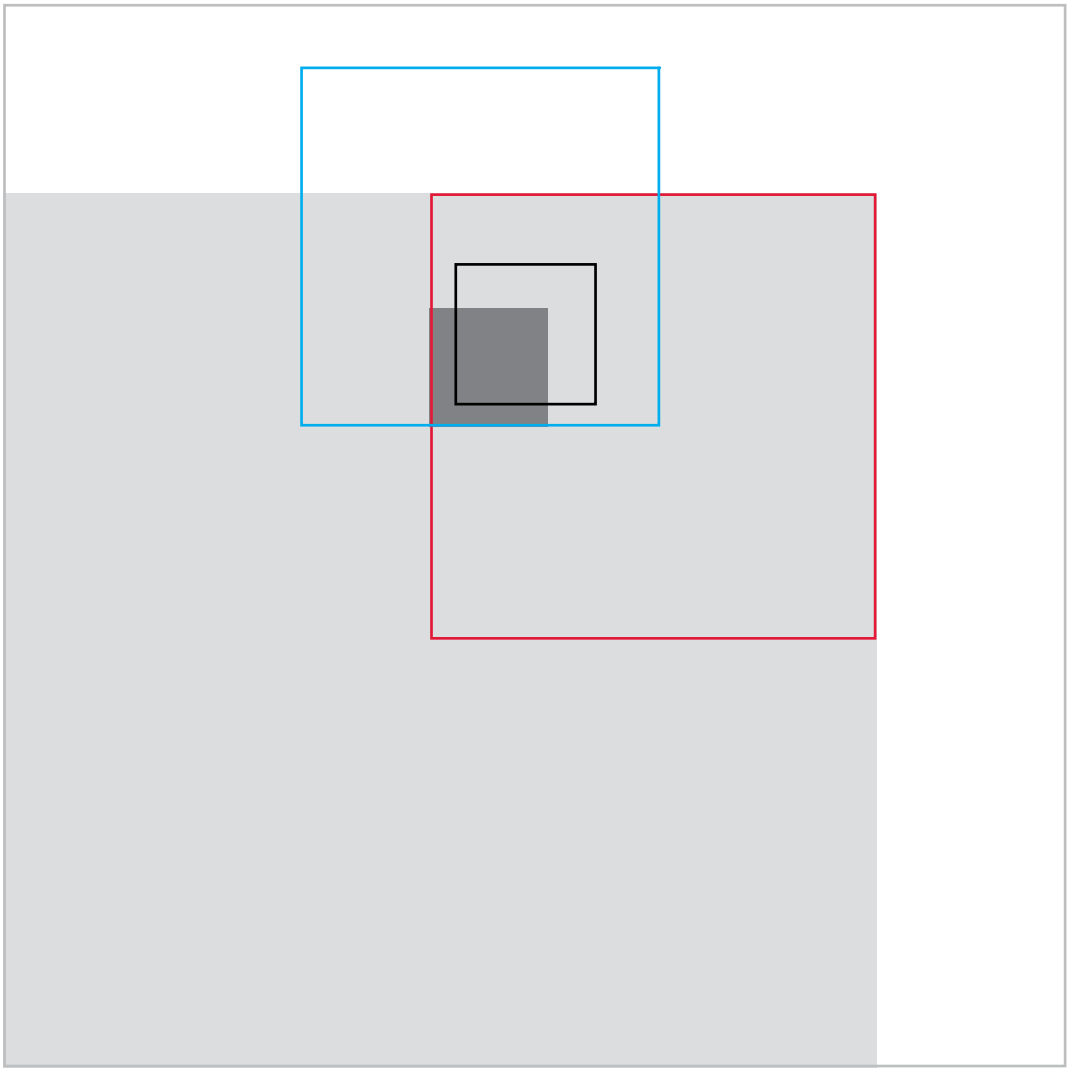


Figure 4.3

Coverage of HIV services among people with TB, 2009

Coverage of services aimed to reduce the burden of HIV per 1000 people with TB globally, 2009.

Source: WHO Global TB Control Report 2010.



4

TREATMENT 2.0

Treatment 2.0 is a new approach to simplifying the way HIV treatment is currently provided and to scale up access to life-saving medicines. Using a combination of efforts, it could reduce treatment costs, make treatment regimens simpler and smarter, reduce the burden on health systems and improve the quality of life for people living with HIV and their families. Modelling suggests that, compared with current treatment approaches, Treatment 2.0 could avert an additional 10 million deaths by 2025. (Figure 4.4)

In addition, the new approach could also reduce the number of people newly infected with HIV by up to 1 million annually if countries provide antiretroviral therapy to everyone who needs it, following the 2010 WHO treatment guidelines. Today, 5 million of the 15 million people in need are accessing these life-saving medicines.

Achieving the full benefits of Treatment 2.0 requires progress across five areas.

1. **Optimize drug regimes:** UNAIDS calls for the development of new pharmaceutical compounds that will lead to a "smarter, better pill" that will be less toxic, longer-acting and easier to use. Combined with dose optimization and improved sequencing of first and second line regimens this will simplify treatment protocols and improve efficacy. Optimizing HIV treatment will also result in other health benefits, including much lower rates of TB and malaria among people living with HIV.

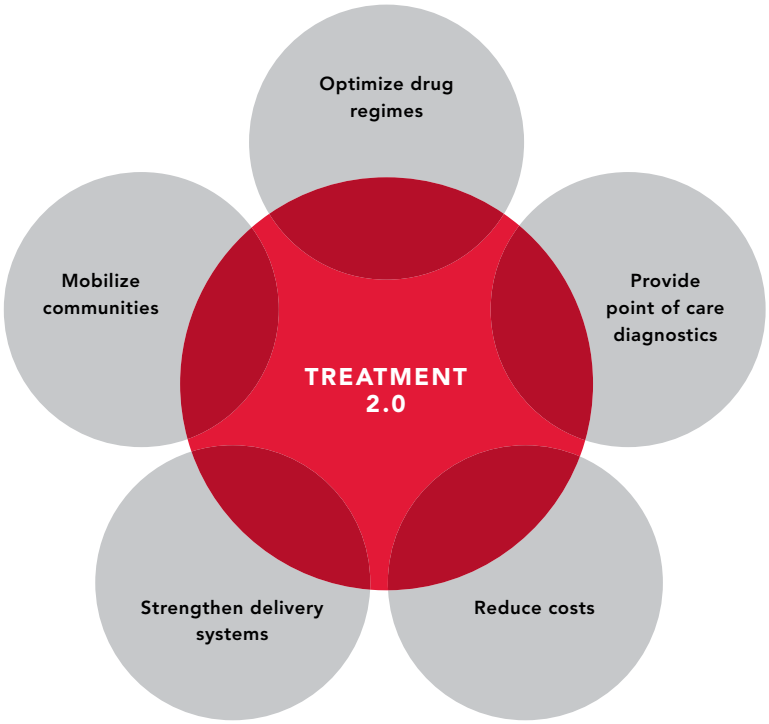
2. **Provide access to point of care diagnostics:** Monitoring treatment requires complex equipment and specialized laboratory technicians. Simplifying diagnostic tools in order to provide viral load and CD4 cell counts at the point of care could help to reduce the burden on health systems. Such a simplified treatment platform will defray costs and increase people's access to treatment.

3. **Reduce costs:** Despite drastic reductions in drug pricing over the past decade, the costs of antiretroviral therapy programmes continue to rise. While drugs must continue to be made more affordable- including first and second line regimens – potential gains are highest in reducing the non-drug-related costs of providing treatment, such as hospitalization, monitoring treatment, and out-of-pocket expenses. These costs are currently twice the cost of the drugs themselves.

4. **Adapt delivery systems:** Simpler diagnostics and treatment regimes will also allow for further decentralizing and integrating service delivery systems, thereby reducing redundancy and complexity, and facilitating a more effective continuum of care. Task-shifting and strengthening procurement and supply systems will be important elements of this change.

5. **Mobilize communities:** Treatment access and adherence can be improved by involving the community in managing treatment programmes. Strengthening the demand and uptake for testing and treatment will both improve treatment coverage and help to reduce costs for extensive outreach. Greater involvement of community based organizations in treatment maintenance, adherence support and monitoring will reduce the burden on health systems.

Figure 4.4
Five pillars of Treatment 2.0



can reduce the incidence of TB among people living with HIV. Data from Botswana (Figure 4.5) indicate a decline in the number of TB cases reported nationwide that has coincided with rapid antiretroviral therapy roll-out since 2002–2003. Improvements in Botswana's national TB programme over this same period, including case detection and reporting, mean that this decline probably reflects a true reduction in TB infections due to antiretroviral therapy.

Effect of antiretroviral therapy on mortality

The expansion of antiretroviral therapy has yielded remarkable health dividends in countries in which an HIV diagnosis was regarded as a death sentence only a decade ago. Emerging evidence shows associations between rolling out treatment and reduced population mortality in high-prevalence settings. In South Africa's North West Province, the roll-out of antiretroviral therapy, one of the earliest and most aggressive efforts to improve access, coincides and appears to be associated with a decline in mortality in most affected age groups (Figure 4.6). The data also suggest initial mortality declines by 2007 in the Western Cape and KwaZulu-Natal. The preliminary findings of a study on death registration undertaken by the Medical Research Council of South Africa provide supporting evidence of continued declines in mortality.

Estimates suggest that, worldwide, about 14.4 million life-years have been gained due to the provision of antiretroviral therapy (Table 4.2). More than 1.2 million life-years are estimated to have been gained in Brazil between 1996 and 2009,

Figure 4.5

Antiretroviral therapy and TB incidence in Botswana

Reported incidence of TB and number of people receiving antiretroviral therapy in Botswana, 1990–2007.

Source: Ministry of Health, Botswana.

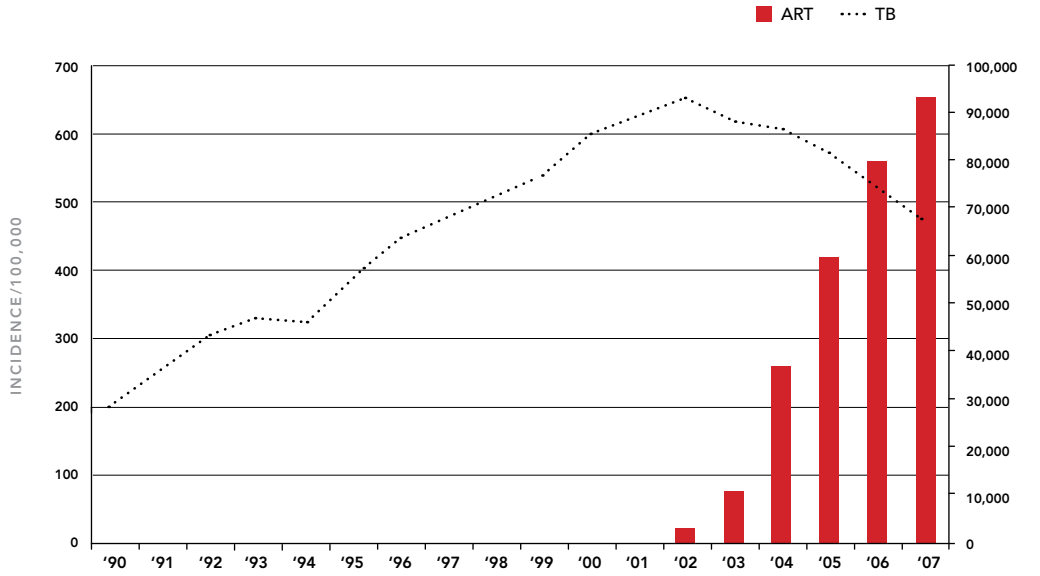
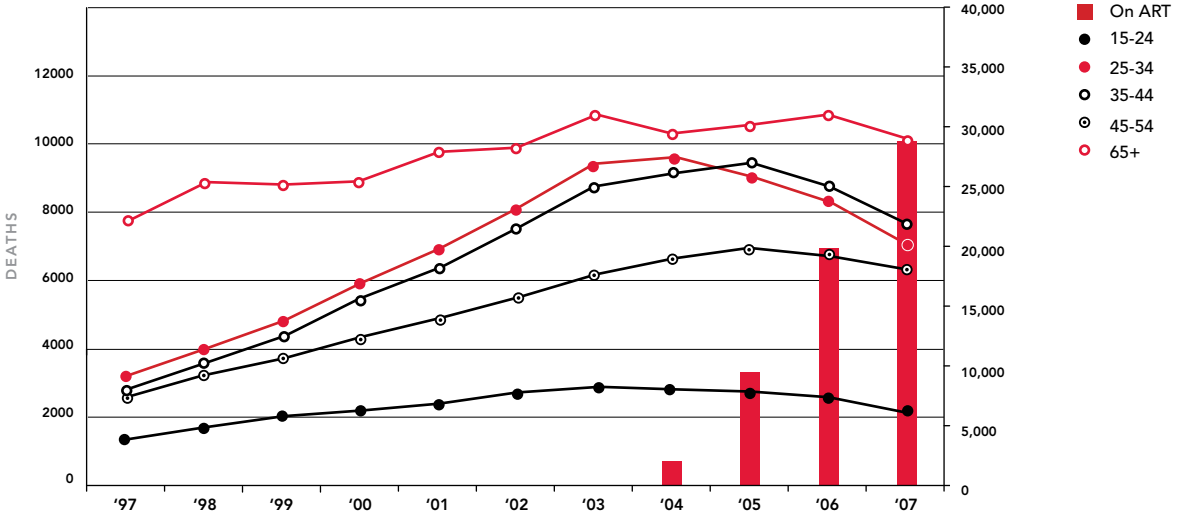


Figure 4.6

Antiretroviral therapy and mortality, Northwest Province, South Africa

Number of people ever receiving antiretroviral therapy and annual number of deaths by age group, Northwest Province, South Africa, 1997–2007.

Source: Ministry of Health, South Africa.



which has had a long-standing policy of universal therapy coverage. In South Africa, more than 970 000 people are now enrolled in antiretroviral therapy and more than 700 000 life-years have already been gained. Kenya and Nigeria have both enrolled more than 300 000 in treatment, leading to about 320 000 life-years gained in each country. Later roll-out of antiretroviral therapy and/or low coverage mean that significant gains in life-years have yet to be documented in some of the concentrated epidemic countries such as Indonesia, Ukraine and Viet Nam.

The availability of palliative and home-based care services remains uneven

People living with HIV, including people enrolled and people waiting for treatment, have a range of care and support needs in addition to antiretroviral therapy. These include the need for psychosocial, physical, socioeconomic, and legal care and support. Home-based care, which includes the care of people who are home-bound or bedridden, distribution of basic supplies, palliative care, and providing care and support to children orphaned because of AIDS, are essential elements of care and support programmes.

Most countries (162 of 171) report they have "a policy or strategy to promote comprehensive HIV treatment, care and support". Access to these comprehensive services is far from complete, however. Because of a lack of clarity about what comprises comprehensive care and support, current national HIV policies or strategies may not address many central aspects of care and support.

Only 44% of governments (and 35% of civil society responses) report that most people in need have access to home-based care services (Figure 4.7). As Uganda notes in its 2010 country report (6), inadequate political will and insufficient resourcing are significant challenges in increasing access to high-quality care and support services.

While 73% of governments responding agree with the statement that the majority of people in need have access to palliative care and treatment of common HIV-related infections, only 57% of civil society respondents agree that that statement is true (Figure 4.8).

More often than not, volunteers rather than governments provide the bulk of needed psychosocial, physical, socioeconomic, and legal care services and support. Families and communities—particularly women, whose contribution to the HIV response often goes unrecognized and unsupported—meet most care and support responsibilities. At the same time, these families and communities

COMMUNITIES LEAD IN EXPANDING HIV TREATMENT

Community leadership helps drive the expansion of antiretroviral therapy worldwide. For example, the Lao People's Democratic Republic has made concerted efforts to mobilize people living with HIV to support antiretroviral therapy initiatives, resulting in earlier diagnosis of HIV infection and increased survival rates (4). Through support provided by the HIV Collaborative Fund, about 30 community-based organizations headed by people living with HIV provide treatment literacy and adherence support services, home-based care, and HIV prevention education. In China, ongoing monitoring of more than 14 000 people by AIDS Care China indicates that individuals receiving such community-based services are more likely to adhere to treatment regimens and are better equipped to manage drug toxicity.

In Kenya, the AIDS Law Project and the East African Treatment Access Movement filed a legal challenge in 2008 requesting suspension of a national law prohibiting the importation or manufacture of affordable generic antiretroviral drugs. In April 2010, the court hearing the lawsuit stayed enforcement of the legislation, finding that people living with HIV would suffer irreparable damage as a result of the law.

Also in Kenya, in the Lurambi area in the west of the country, a mass campaign to mobilize the population for HIV testing and referral led to the testing of more than 47 000 residents in seven days, including 87% of the target age group 15–49 years. The 4% who tested positive were given a three-month supply of co-trimoxazole and were referred to treatment (18).

Community groups mostly undertake these efforts with little financial or technical support. At present, relatively few funding channels exist to build the capacity of grassroots community groups, and many antiretroviral therapy programmes have yet to integrate community workers into their operations. In May 2010, the Global Fund to Fight AIDS, Tuberculosis and Malaria issued its first guide on strengthening community systems in the context of Global Fund programming. The guide aims to encourage new funding channels to increase the capacity of communities to participate in designing, delivering, monitoring, and evaluating initiatives to improve health outcomes.

Table 4.2

Adult life-years gained by antiretroviral therapy

Adult life years gained due to antiretroviral therapy in 25 countries with the highest number of persons living with HIV.

Source: UNAIDS estimates, WHO Towards Universal Access Report 2010 and WHO Global TB Control Report 2010.

	Number of people living with HIV, 2009	Number of people receiving antiretroviral therapy in December 2009	Antiretroviral therapy coverage (2010 WHO guidelines)			Life years among adults gained due to ART between 1996 and 2009
			Point Estimate	Low	High	
Botswana	320 000 [300 000 - 350 000]	145 190	83%	>95%	77%	271 000
Brazil	[460 000 - 810 000]			50%	89%	1 215 000
Cameroon	610 000 [540 000 - 670 000]	76 228	30%	34%	27%	97 000
China	740 000 [540 000 - 1 000 000]	12 762		38%	19%	84 000
Côte d'Ivoire	450 000 [390 000 - 510 000]	72 011	29%	32%	26%	80 000
D.R. Congo	[430 000 - 560 000]	34 967		20%	15%	42 000
Ethiopia		176 632		65%	52%	160 000
Ghana	260 000 [230 000 - 300 000]	30 265	25%	29%	23%	26 000
India	2 400 000 [2 100 000 - 2 800 000]	320 074		27%	23%	233 000
Indonesia	310 000 [200 000 - 460 000]	15 442	21%	30%	14%	13 000
Kenya	1 500 000 [1 300 000 - 1 600 000]	336 980	50%	55%	46%	326 000
Lesotho	290 000 [260 000 - 310 000]	61 736	50%	54%	45%	48 000
Malawi	920 000 [830 000 - 1 000 000]	198 846	48%	54%	44%	161 000
Mozambique	1 400 000 [1 200 000 - 1 500 000]	170 198	32%	35%	29%	139 000
Nigeria	3 300 000 [2 900 000 - 3 600 000]	302 973	23%	25%	21%	316 000

	Number of people living with HIV, 2009	Number of people receiving antiretroviral therapy in December 2009	Antiretroviral therapy coverage (2010 WHO guidelines)			Life years among adults gained due to ART between 1996 and 2009
			Point Estimate	Low	High	
Russian Federation	980 000 [840 000 - 1 200 000]	75 900		23%	16%	65 000
South Africa	5 600 000 [5 400 000 - 5 900 000]	971 556	36%	37%	35%	707 000
Sudan	260 000 [210 000 - 330 000]	3 825		0%	0%	3 000
Thailand	530 000 [420 000 - 660 000]	216 118	61%	77%	49%	389 000
Uganda	1 200 000 [1 100 000 - 1 300 000]	200 413	43%	48%	38%	293 000
Ukraine	350 000 [300 000 - 410 000]	15 871	9%	10%	8%	16 000
United Republic of Tanzania	1 400 000 [1 300 000 - 1 500 000]	199 413	32%	35%	29%	150 000
Viet Nam	280 000 [220 000 - 350 000]	37 995	33%	44%	25%	27 000
Zambia	980 000 [890 000 - 1 100 000]	283 863	68%	76%	62%	270 000
Zimbabwe	1 200 000 [1 100 000 - 1 300 000]	218 589	34%	37%	32%	172 000

often struggle to access adequate resources, training and support to provide these critical responses (Figure 4.9).

No decline in the number of children orphaned by AIDS

Despite the modest decline in HIV adult prevalence worldwide and increasing access to treatment, the total number of children aged 0–17 years who have lost their parents due to HIV has not yet declined. Indeed, it has further increased from 14.6 million [12.4 million–17.1 million] in 2005 to 16.6 million [14.4 million–18.8 million] in 2009. Almost 90% live in sub-Saharan Africa. The number of orphans due to AIDS living in six countries—Kenya, Nigeria, South Africa, Uganda, United Republic of Tanzania, and Zimbabwe—is more than 9 million, with Nigeria alone counting 2.5 million orphans due to HIV. More than 10% of all children aged 0–17 years have lost one or two parents due to HIV in Zimbabwe (16%), Lesotho (13%), and Botswana and Swaziland (12%).

Among the most remarkable contributions to the global response to HIV are the systems and networks, both formal and informal, that have been established to support children orphaned by the epidemic (Figure 4.10). The narrowing of the difference in school attendance between orphans and non-orphans is one main achievement of this response. Most households caring for children affected by HIV, however, are still not accessing any external care and support. ■

Figure 4.7

Access to home-based care

Assessment by governments as to whether most people in need have access to home-based care.

Source: Country Progress Reports 2010.

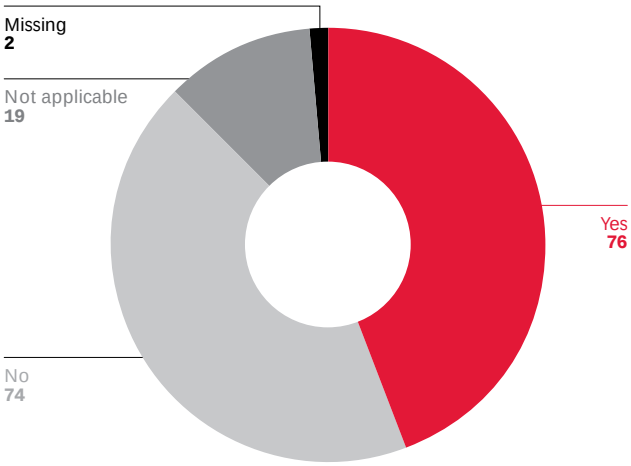


Figure 4.8

Availability of palliative care

Assessment by governments as to whether most people in need have access to palliative care.

Source: Country Progress Reports 2010.

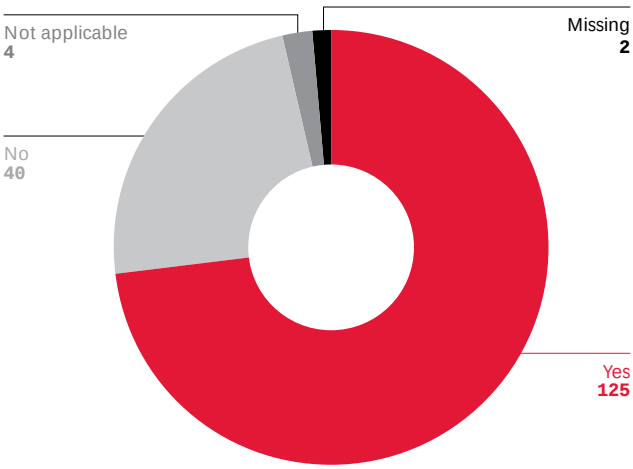


Figure 4.9

Types of care and support work performed by volunteers

Types of care and support work for people living with HIV performed by 1366 volunteer caregivers interviewed in Cameroon, Kenya, Malawi, Nigeria, South Africa and Uganda.

Source: Compensation for Contributions: report on interviews with volunteer caregivers in six countries. Hairu Commission and Community Agency for Social Enquiry, Sept 2009.

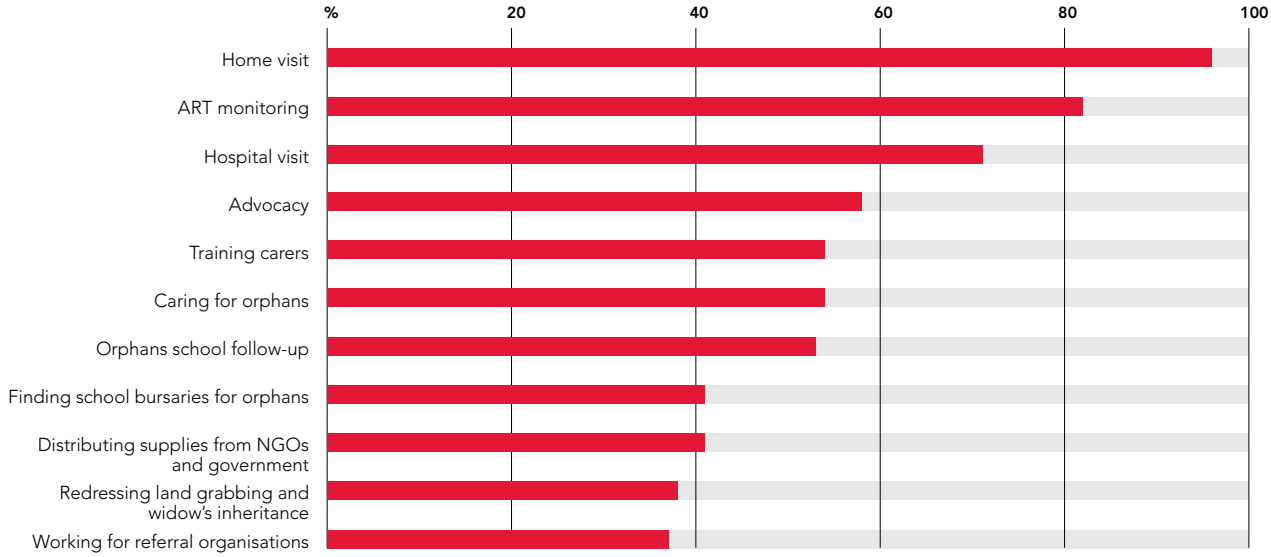
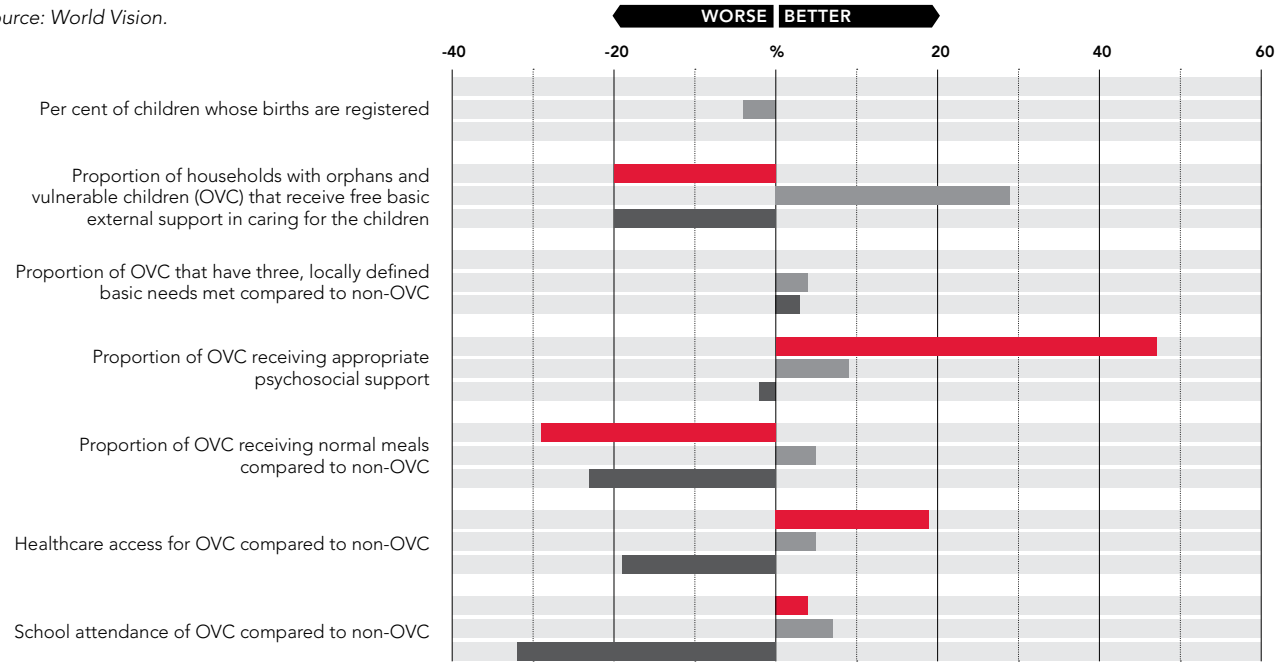


Figure 4.10

Trends in support for orphans and vulnerable children, 2005 to 2010

Changes in the coverage of support services for orphans and vulnerable children in three countries with high HIV prevalence, 2005 to 2010.

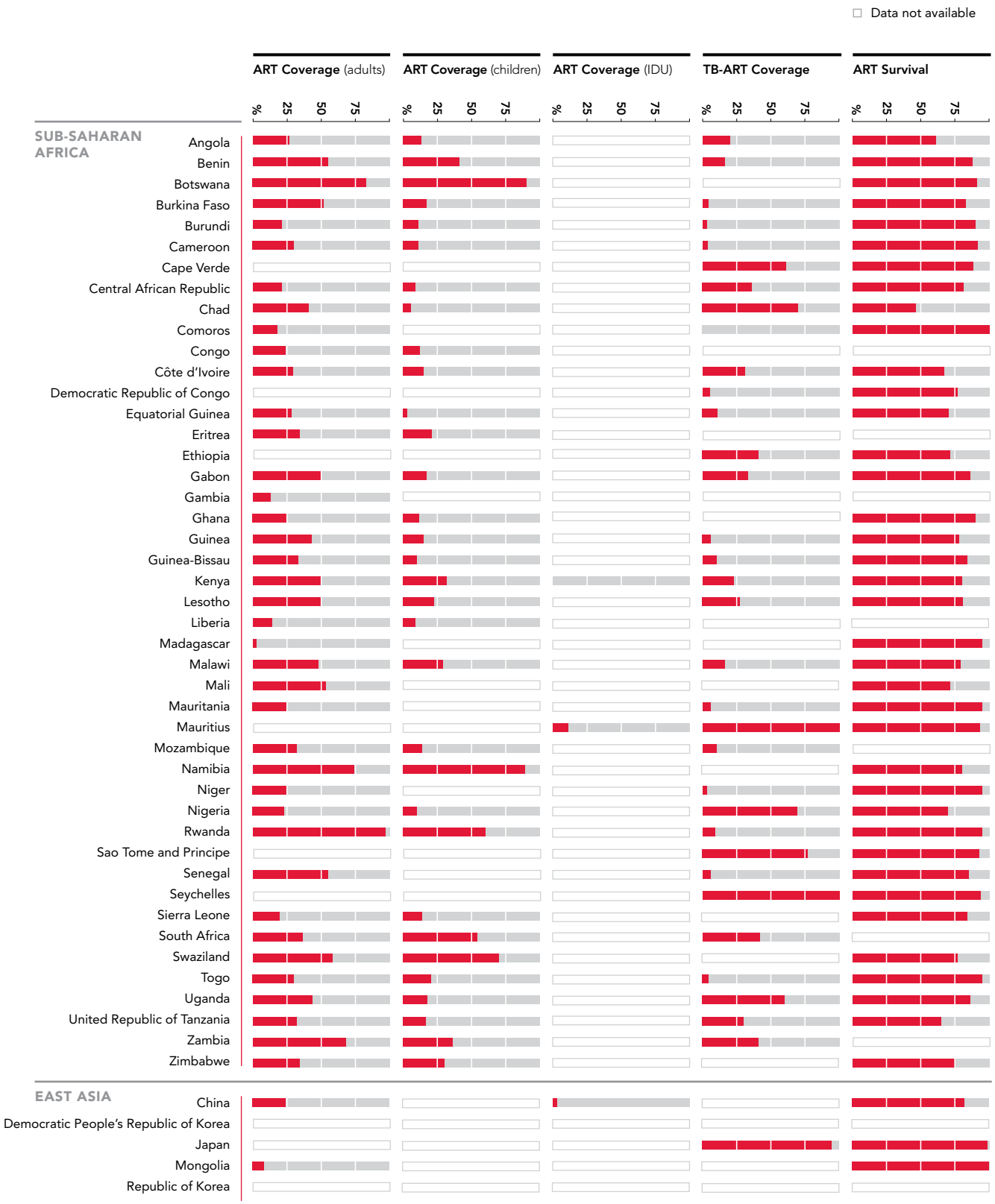
Source: World Vision.

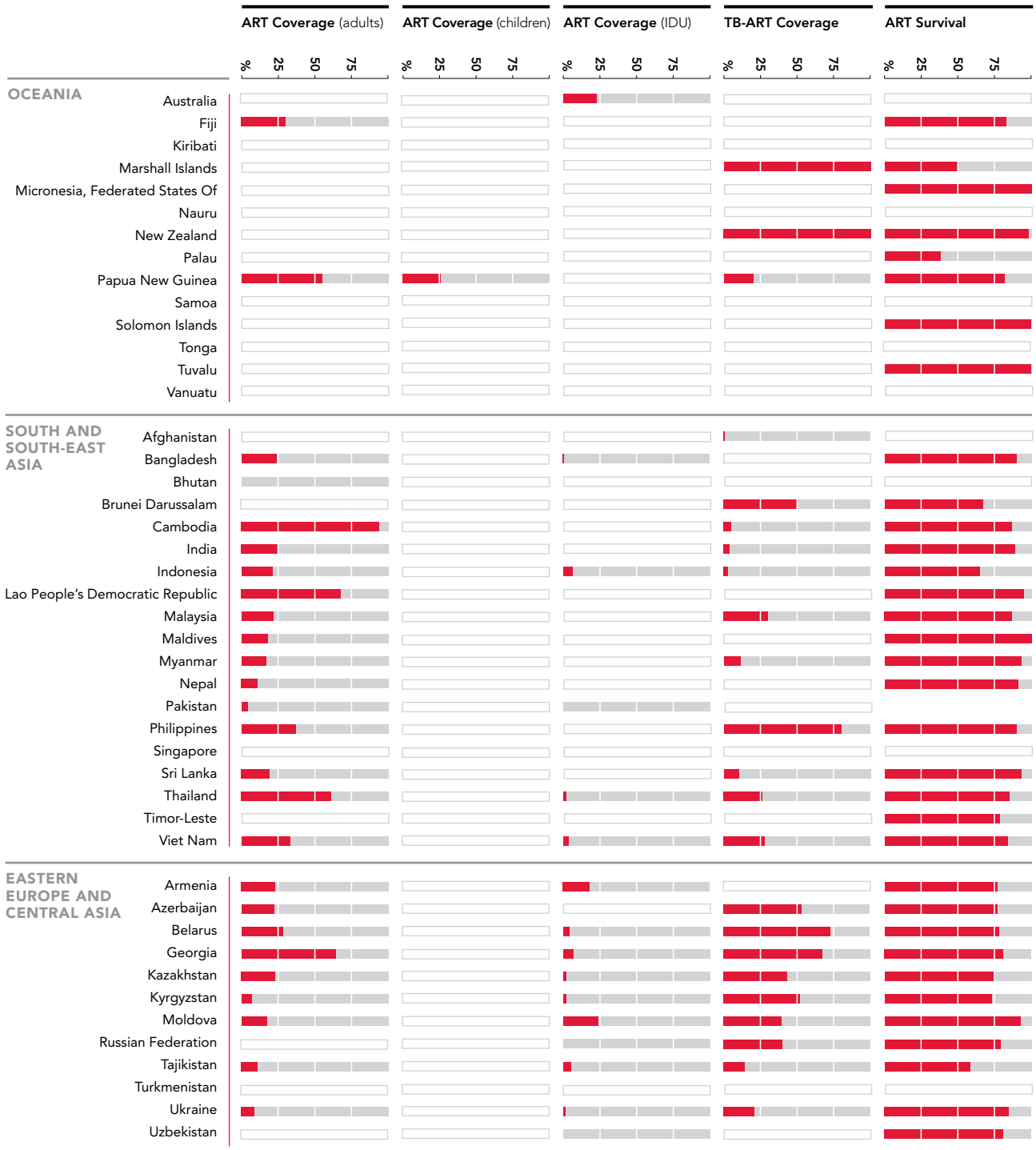


ACTION ITEMS

- HIV treatment must be scaled up to keep pace with increasing demand.
- HIV testing and counselling must be expanded, as most people get to know their status very late and access treatment later, which reduces the effectiveness of treatment programmes.
- An integrated HIV and TB programme is essential to meet the challenges posed by the dual epidemics.
- Maternal and child health services must be strengthened so that all pregnant women living with HIV can access comprehensive services for preventing maternal and child mortality and infants from becoming newly infected and for providing antiretroviral therapy for mothers.
- Children's access to antiretroviral therapy must improve. This will require maternal and child health and antiretroviral therapy centres to work closely. In addition, better diagnostic tools and antiretroviral therapy formulations for children continue to be needed.
- Current approaches to treatment have not been optimal for the 15 million people in need. Treatment 2.0—a radically simplified treatment platform—holds promise to simplify treatment and provide all people needing it with a better pill less likely to lead to resistance, simpler diagnostics and monitoring, easier HIV testing, and more community empowerment. All stakeholders should unite to make this a reality.
- Social support for orphans must continue, and recent success in rolling out programmes of support such as cash transfers, food support, and education bursaries must be expanded and sustained.
- Investments in treatment have brought results for AIDS-related mortality and reducing the number of people newly infected with HIV. These investments must be continued and sustained over the long term.

SCORECARD: HIV TREATMENT




ART Coverage (adults)
ART Coverage (children)
ART Coverage (IDU)
TB-ART Coverage
ART Survival
% 25 50 75
OCEANIA
Australia
Fiji
Kiribati
Marshall Islands
Micronesia, Federated States Of
Nauru
New Zealand
Palau
Papua New Guinea
Samoa
Solomon Islands
Tonga
Tuvalu
Vanuatu
SOUTH AND SOUTH-EAST ASIA
Afghanistan
Bangladesh
Bhutan
Brunei Darussalam
Cambodia
India
Indonesia
Lao People's Democratic Republic
Malaysia
Maldives
Myanmar
Nepal
Pakistan
Philippines
Singapore
Sri Lanka
Thailand
Timor-Leste
Viet Nam
EASTERN EUROPE AND CENTRAL ASIA
Armenia
Azerbaijan
Belarus
Georgia
Kazakhstan
Kyrgyzstan
Moldova
Russian Federation
Tajikistan
Turkmenistan
Ukraine
Uzbekistan

SCORECARD: HIV TREATMENT

ART Coverage (adults)
ART Coverage (children)
ART Coverage (IDU)
TB-ART Coverage
ART Survival
% 25 50 75
MIDDLE EAST AND NORTH AFRICA
Continued
Egypt
Iran, Islamic Republic of
Iraq
Jordan
Kuwait
Lebanon
Libyan Arab Jamahiriya
Morocco
Oman
Qatar
Saudi Arabia
Somalia
Sudan
Syrian Arab Republic
Tunisia
United Arab Emirates
Yemen
CARIBBEAN
Antigua & Barbuda
Bahamas
Barbados
Cuba
Dominica
Dominican Republic
Grenada
Haiti
Jamaica
Saint Kitts and Nevis
Saint Lucia
Saint Vincent and the Grenadines
Trinidad and Tobago
CENTRAL AND SOUTH AMERICA
Argentina
Belize
Bolivia
Brazil
Chile
Colombia
Costa Rica
Ecuador
El Salvador
Guatemala
Guyana
Honduras
Nicaragua
Panama
Paraguay
Peru
Suriname
Uruguay
Venezuela

CHAPTER 5

HUMAN RIGHTS AND GENDER EQUALITY

5

KEY FINDINGS

HUMAN RIGHTS

- Failing to address the human rights of key populations at higher risk of exposure to HIV facilitates the growth of the epidemic and enhances its socially damaging effects.
- Punitive laws that affect people living with HIV, or other people at higher risk of exposure, remain widespread. Laws protecting such people exist in many countries, but there are not enough data to show whether they are actively or widely enforced.
- Stigma, discrimination, and violence against transgender people, and men who have sex with men, increase their risk of HIV infection and also for their male and female partners.

GENDER EQUALITY

- The vulnerability of women and girls to HIV remains particularly high in sub-Saharan Africa; 80% of all women in the world living with HIV live in this region.
- Efforts to promote universal access to HIV prevention, treatment, care and support services require a sharper focus on women and girls. Fewer than half of countries report having a specific budget for HIV-related programmes addressing women and girls.
- Despite evidence that beneficial behaviour change can be achieved, few HIV programmes engage men and boys.

» **Human rights and gender equality are critical to effective responses to HIV**

In the context of HIV, protections comprise legal approaches that implement international human rights commitments as well as efforts to address harmful social and gender norms that put women, men, and children at increased risk of HIV infection and increase its impact. A rights-based approach to HIV requires: realization and protection of the rights people need to avoid exposure to HIV; enabling and protecting people living with HIV so that they can live and thrive with dignity; attention to the most marginalized within societies; and empowerment of key populations through encouraging social participation, promoting inclusion and raising rights-awareness. Significant advances have been made in expanding HIV prevention, treatment, care, and support services in recent years but some key populations at higher risk such as sex workers, people who inject drugs, and men who have sex with men, remain often underserved. Resources directed towards the needs of these populations, including support for them to claim and exercise their rights, are often not proportional to the degree to which they are affected by the epidemic.

Stigma and discrimination

In 2010, 91% of governments reported that they address stigma and discrimination as cross cutting issues in their national strategies. Further, from nongovernmental sources that have consistently reported on the National Composite Policy Index (NCPI) since 2006, reports of programmes to address stigma and discrimination have doubled in less than five years (92% in 2010 against 46% in 2006). This improvement indicates increased acknowledgement of the importance of working to eliminate stigmatization of, and discrimination against, people living with HIV.

However, these reports refer only to the existence of such programmes. They do not confirm whether efforts are implemented at sufficient scale and of a quality to make real and sustained improvements to the lives of people living with HIV and other members of key populations at higher risk of exposure.

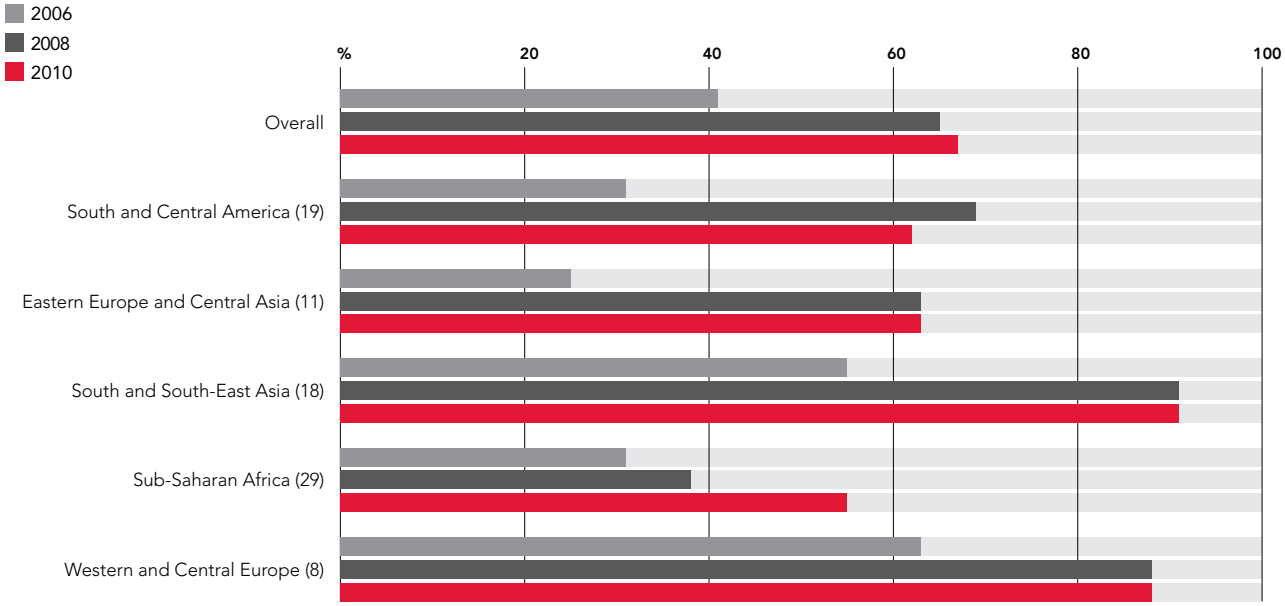
In 2008–2009, the UNAIDS Secretariat commissioned the International HIV/AIDS Alliance to review the national AIDS planning documents of 56 countries to ascertain whether they included programmes to increase access to justice and reduce stigma and discrimination (e.g. law reform; know your rights/legal literacy; and human rights training for service providers, provision of legal services, and programmes supporting the human rights of women and

Figure 5.1

Countries with laws or regulations that create obstacles

Percentage of countries in which nongovernmental sources report laws or regulations that create obstacles to effective HIV prevention, treatment, care, and support for population groups at higher risk and other vulnerable population groups.

Source: Country Progress Reports 2006, 2008, 2010.



The following regions are not displayed due to insufficient countries: Caribbean, Middle East and North Africa, East Asia, Oceania, and North America.

girls). This study (to be published in 2010) found that, although about 90% of country activity plans included stigma and discrimination reduction programmes, fewer than 50% of countries costed or budgeted such programmes. Further, the review indicated that countries rarely included a comprehensive package of programmes to reduce stigma and discrimination in their national strategies (1).

The United Nations Development Programme, UNAIDS, and the Global Fund to Fight AIDS, Tuberculosis and Malaria examined whether human rights programmes were included in the Global Fund's HIV portfolio for Rounds 6 and 7. This 2009-2010 study found that one third of the key human-rights programmes identified by Country Coordinating Mechanisms as being necessary for an effective HIV response were not implemented. The same study also found that less than one quarter of planned programmes explicitly engaged men who have sex with men, transgender people, people who use drugs, sex workers, and prisoners (2).

Results from the People Living with HIV Stigma Index illustrate the need to increase efforts to reduce stigma and discrimination as part of national HIV responses. The Index, currently being rolled out in more than 70 countries and with preliminary results from 10 now available (Bangladesh, China, Dominican Republic, Fiji, Myanmar, Paraguay, Rwanda, United Kingdom—including a separate component for Scotland—and Zambia), provides rich evidence of the multi-layered ways in which stigma and discrimination manifest in the lives of people living with HIV.

In China, for example, more than 30% of people living with HIV said they had been subject to verbal abuse, 9% had been physically harassed, 14% refused employment, and 12% denied health care (2). In Paraguay, 12% were excluded from social gatherings, 11% were physically harassed and 9% physically assaulted (3). In Rwanda, more than 50% were verbally insulted, 36% physically harassed and 20% physically assaulted, 65% experienced loss of job or income and 88% were denied access to family planning services due to their HIV status (4). In the United Kingdom, 17% reported having been denied health care (5).

High percentages of respondents in all countries reported internalized stigma: feeling ashamed, guilty, suicidal, and blameworthy.

An extensive survey by the nongovernmental organization representatives of the UNAIDS Programme Coordinating Board in 2010 showed that people living with HIV and key populations at higher risk continue to experience high levels of HIV-related stigma and discrimination. Slightly less than half of respondents experienced negative attitudes or exclusion from family members. Other experiences in at least one third of the sample included loss of employment, refusal of care by health care workers, social or vocational exclusion, and/or involuntary disclosure (6). Several examples from the UNGASS narrative reports (7) also show that stigma and discrimination continue to hinder effective HIV responses. Narrative reports from Cambodia, Malaysia, Nepal, and Pakistan include stigma and discrimination as barriers to providing prevention, treatment, and care services to key population groups and to providing treatment and care for people living with HIV (8).

Several countries reported that stigma and discrimination in health care facilities adversely affect access to and the provision of services. For example, in Central and South America, several reports note that some health care personnel are likely to discriminate against people living with HIV and deny services to population groups at higher risk such as sex workers and men who have sex with men; in Mexico, service providers may treat people who inject drugs as "delinquents" (8). Country progress reports for 2010 from Lesotho, Mozambique and Senegal (7) mentioned stigma and discrimination towards sex workers and sexual minorities as barriers to their accessing health services, HIV testing, and HIV treatment.

There continue to be reports from many parts of the world of violence against and murder of individuals based on their perceived or actual sexual orientation (9–11). For example, the shadow report submitted under UNGASS reporting on Honduras described several murders and a climate of impunity for perpetrators of violations of human rights that seriously undermines the HIV response (12). Such grave situations call for concerted action and advocacy by both human rights and HIV stakeholders.

Meaningfully involving people living with and vulnerable to HIV in national HIV responses is a part of realizing human rights.

SOURCES TO ASSESS STIGMA AND DISCRIMINATION

UNGASS country report narratives
Country progress reports submitted by governments (7) include a narrative on progress made in the AIDS response. Often these include narratives that provide a rich context on the impact of stigma and discrimination. In some instances nongovernmental organizations also submit shadow reports, which provide a point of view different from the official version. Together, they may provide a realistic picture of national and community efforts to eliminate stigma and discrimination.

National Composite Policy Index
The National Composite Policy Index (NCPI) is an integral part of the core UNGASS indicators, which comprises a series of questions on each country's legal and policy landscape in relation to HIV. The NCPI is divided into two parts: (a) the government's responses to the questions and (b) the responses of civil society organizations, the United Nations and bilateral agencies (nongovernmental sources). Most questions are answered yes/no. The answers are not independently verified but provide a snapshot of how different organizations view the various national AIDS policies and their implementation.

People Living with HIV Stigma Index
The People Living with HIV Stigma Index is an innovative way to measure HIV-related stigma and discrimination experienced by people living with HIV. National networks of people living with HIV lead the implementation of the Index. The Index is supported jointly by the Global Network of People Living with HIV, International Community of Women Living with HIV, International Planned Parenthood Federation and UNAIDS.

The Greater Involvement of People Living with HIV (GIPA) has been a key human rights principle within the HIV response since the Paris Declaration of 1994. In 2010, governments in 96% of countries reported that their national HIV strategy explicitly addressed the involvement of people living with HIV, up from 75% in 2006. Civil society has been leading efforts to assess the nature and quality of this participation. The Global Network of People Living with HIV has implemented the GIPA Report Card in six countries and is currently implementing assessments in four others. In Kenya, 33% of respondents indicated that they either "somewhat agreed" or "strongly agreed" that people living with HIV were meaningfully involved in developing the country's national AIDS plan; in Nigeria, the figure was 60%; and in Zambia, 66%. Fear of stigma was cited as one of the most significant barriers to greater involvement in the national response in all three countries (13).

Laws, policies, and regulations that create obstacles to effective HIV responses are increasingly acknowledged but too often remain

Countries increasingly acknowledge the demonstrated and potential negative effects of punitive legislation, policies, and regulations on access to, and uptake of, HIV prevention, treatment, care, and support services and on the rights and dignity of people living with or vulnerable to HIV (14). In 2006, nongovernmental sources in 41% of countries reported that the countries had laws, policies, or regulations that posed obstacles to effective HIV service provision for key populations at higher risk. In 2010, sources in 67% of the same countries reported the existence of such obstacles. In Asia and the Pacific, nearly 90% of nongovernmental sources reported the existence of laws that pose obstacles to effective HIV responses for key populations at higher risk. In the Middle East and North Africa 56% of countries, and 55% in sub-Saharan Africa reported similar laws.

Government and civil society responses to the National Composite Policy Index (NCPI) in this area differ notably. In 2010, the governments of 78 countries (46% of those reporting) acknowledged the existence of laws, regulations, and policies that obstructed access to prevention, treatment, care, and support services for populations at higher risk; in contrast, civil society from 106 countries (62%) reported the same (Figure 5.1).

These reports do not capture the full reality of laws that can act as obstacles to the HIV response. For instance, 79 countries and territories criminalize same-sex sexual relations between consenting adults, with six countries retaining the possibility of applying the death penalty for such acts (15). More than 100 countries criminalize some aspect of sex work (16,17). Fifty-one countries, territories, and entities are reported to impose some form of restriction on the entry, stay, and residence of people living with HIV (Figure 5.2) (18,19).

In their narrative UNGASS reports (7), several countries recognized that criminalization of same-sex practices, sex work, and/or provision of sterile needles and syringes, and of punitive law enforcement are barriers to fully effective HIV responses. Bangladesh, for example, reports that existing laws are often used to harass vulnerable people, leading to the weakening of programme

REMOVING PUNITIVE AND DISCRIMINATORY LAWS: HIV-RELATED RESTRICTIONS ON ENTRY, STAY, AND RESIDENCE

In 2010, a number of countries lifted their HIV-related restrictions on entry, stay, and residence: the United States of America (January); China (April); and Namibia (July). However, such restrictions continue in 51 countries—an indicator of the discrimination still faced by people living with HIV in today's highly mobile world..

Figure 5.2

HIV-related restrictions on entry, stay, or residence

A total of 51 countries, territories, and areas impose some form of restriction on the entry, stay, or residence of people living with HIV based on their HIV status.

Source: Mapping of Restrictions on the entry, stay and residence of people living with HIV (UNAIDS, May 2009), and latest developments as of July 2010.

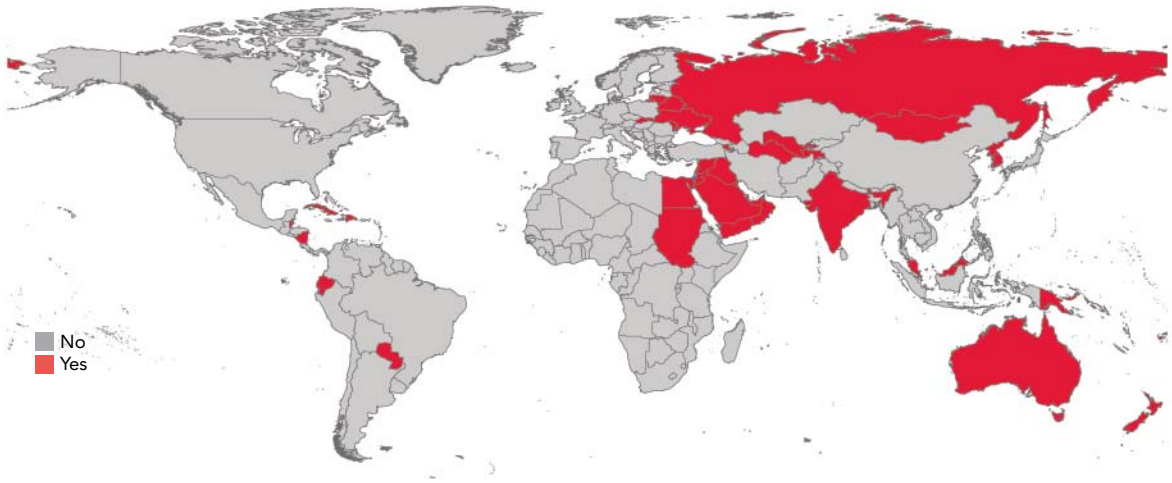
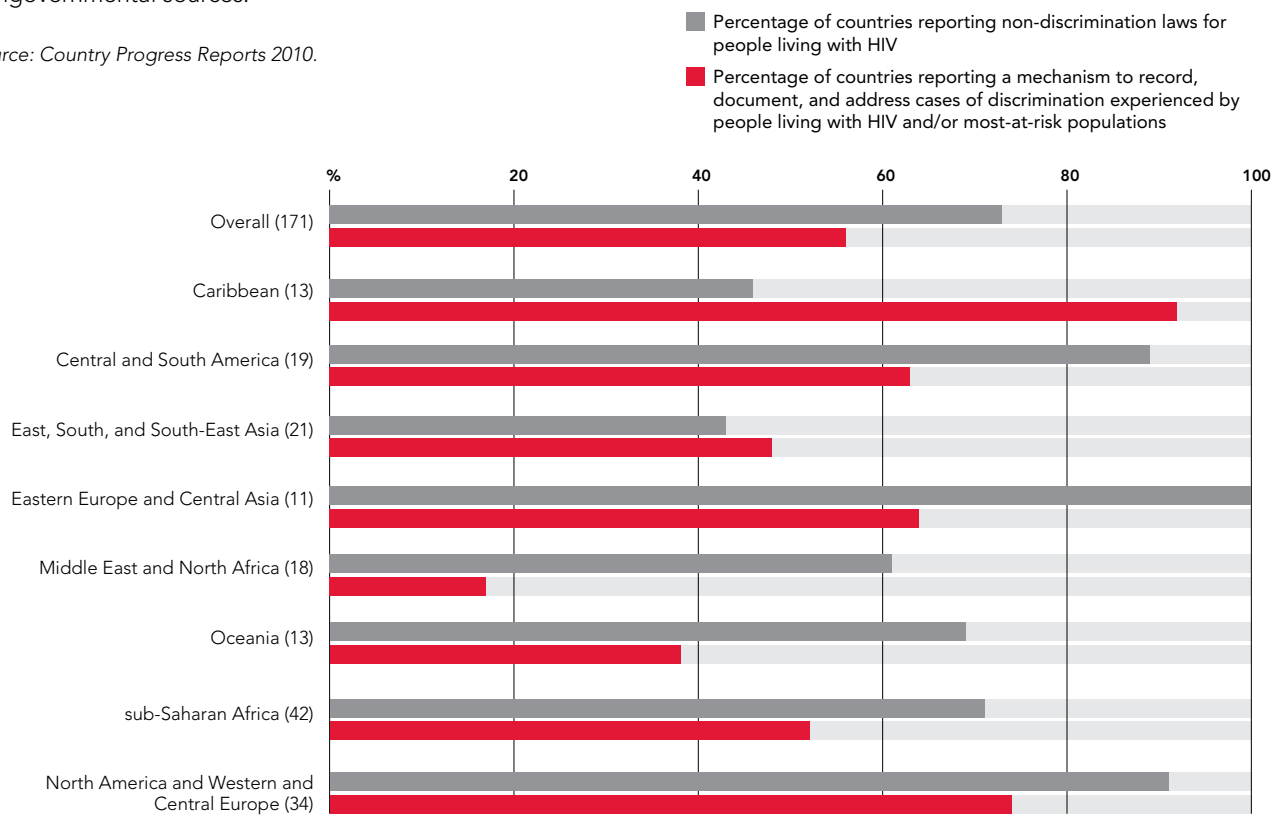


Figure 5.3

Legal protections against discrimination for people living with HIV

Percentage of countries with legal protections against discrimination for people living with HIV and mechanisms for redress, as reported by nongovernmental sources.

Source: Country Progress Reports 2010.



implementation supporting people at higher risk of exposure to HIV. Malaysia's report recognized the challenges posed by contradictory harm reduction and drug control policies. Reports from Botswana, Ghana, Malawi, Mozambique, and Zambia acknowledge that criminalizing homosexuality makes providing services to men who have sex with men more difficult. Reports from Lebanon, Saudi Arabia, and the Syrian Arab Republic also note that laws that prohibit adultery, homosexuality, and sex work may hinder HIV prevention efforts (7).

56%

Percentage of countries reporting having a mechanism to record and address cases of discrimination.

Studies confirm that punitive laws have negative effects on access to HIV services and on the claiming and exercise of human rights by men who have sex with men (20), sex workers (21,22), and people who use drugs (14,23,24). Among those working in the response to HIV another concern is the apparent increased trend of passing laws that criminalize HIV transmission and/or the failure to disclose one's HIV status. Such laws contradict the commitment made by governments in the Political Declaration on HIV/AIDS in 2006 "to promote a social and legal environment that is supportive of and safe for voluntary disclosure of HIV status" (25). Countries in North America and Western Europe have long criminalized HIV transmission, and about 20 countries in sub-Saharan Africa have also chosen to do so in the past six years (26).

Parallel to increased acknowledgement of laws that pose obstacles to HIV responses, more countries report the existence of laws and regulations that protect people living with or vulnerable to HIV from discrimination but data are insufficient to indicate whether they are adequately enforced. In 2010, nongovernmental sources in 71% of countries reported the existence of laws protecting people living with HIV from discrimination versus 67% in 2008 and 56% in 2006 (of the same 85 countries reporting in all three years). Most worrying, however, is that the 2010 data indicate that almost one third of countries still do not have such protective legislation. In addition, only 56% of countries report having a mechanism to record, document, and address cases of discrimination experienced by people living with HIV or other people vulnerable to HIV (Figure 5.3).

In 2010, governments in 106 countries (62%) reported having laws or regulations that specify protections for key populations at higher risk such as women, young people, men who have sex with men, people who inject drugs, sex workers, prisoners and migrants. Nongovernmental sources in 112 countries (65%) reported the same. In 2004, when the first UNGASS reports were submitted, nongovernmental sources in only 32% of countries reported the same (of the 88 countries reporting that year). This suggests increased understanding among policy makers that protective laws are important in effectively responding to HIV (Figure 5.4).

Despite reporting of an increase in protective laws, there is little evidence whether these laws are effectively enforced or whether people living with HIV and other people key in the response have access to justice or can seek redress for wrongs experienced. For instance, while nongovernmental sources in 61% of countries in North Africa and the Middle East report the existence of non-discrimination laws, only 17% report having mechanisms to record, document, and address cases of discrimination experienced by people living with or vulnerable to HIV.

Figure 5.4

Non-discrimination laws protecting key populations at higher risk

Countries in which nongovernmental sources report non-discrimination laws protecting key populations at higher risk.

Source: Country Progress Reports 2010.

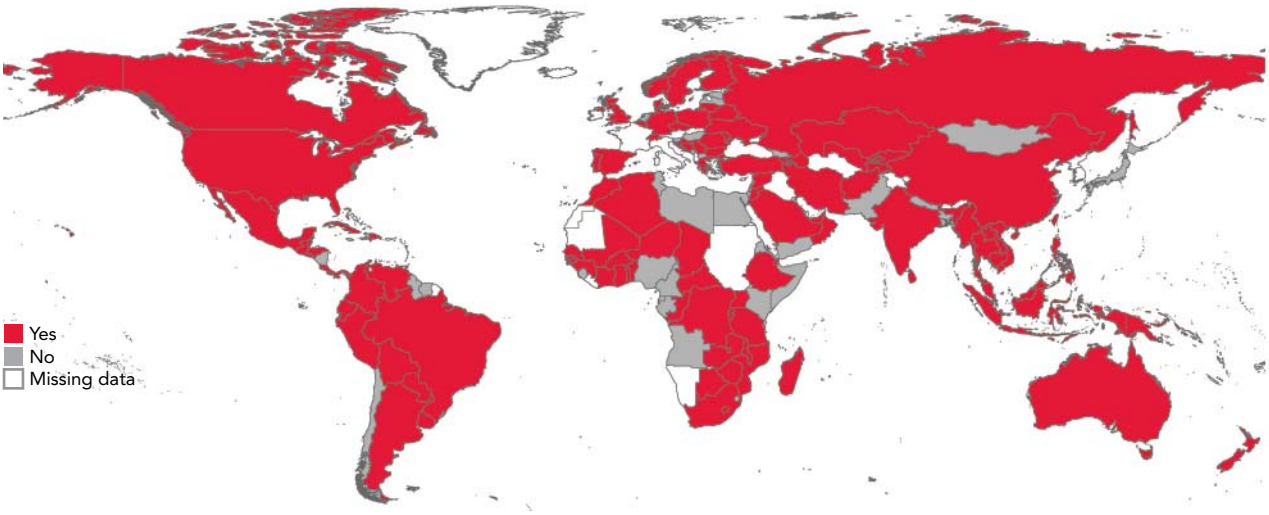
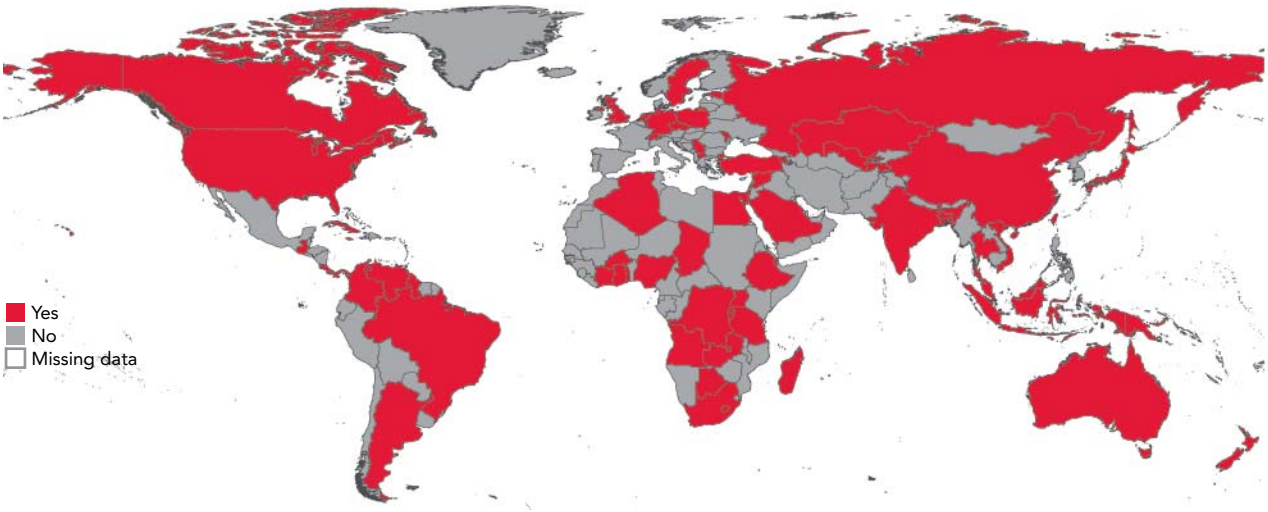


Figure 5.5

Legal aid for HIV casework

Countries in which nongovernmental sources report legal aid systems for HIV casework, 2010.

Source: Country Progress Reports 2010.



THE GLOBAL COMMISSION ON HIV AND THE LAW

On 24 June 2010, UNDP and UNAIDS launched the Global Commission on HIV and the Law composed of renowned and independent global leaders in the areas of law, public health policy and governance. The establishment of the Commission is an essential milestone in supporting countries to remove punitive laws, policies, practices, stigma and discrimination that block effective responses to HIV. The Commission is supported by a Technical Advisory Group of law, human rights and public health experts.

As an outcome of its first meeting in October 2010, the Commission will focus on the following issues: criminalization of sex workers, drug users, people living with HIV, men who have sex with men, gender inequality and violence against women, and legal barriers to treatment. Through its work, the Commission will marshal the evidence on the impact of the law on the HIV response, and make actionable recommendations on how to create effective, protective and enabling legal responses to HIV.

In the course of 2011, the Commission will hold a number of regional policy dialogues that will allow submissions from regional and national stakeholders, including governments, civil society, people living with HIV and representatives of key populations. These submissions will shape the final report and recommendations of the Commission, expected in December 2011.

Access to HIV-related legal services is one effective means to protect the human rights of people living with HIV and other key populations as are efforts to sensitize officials engaged in the administration of justice. However, nongovernmental sources in only 51% of countries report having legal aid systems for HIV casework. Although this represents an increase from 2006, when 33% of countries reported having such systems, the figure has remained the same since 2008. Legal aid systems appear to be more common in high-income countries, with 75% of countries reporting such systems (NCPI), whereas only 48% of low-income countries and 40% of lower-middle-income countries report having them (Figure 5.5).

Gender equality

Although gender relationships, practices and HIV epidemics differ around the world, power imbalances, harmful social gender norms, gender-based violence and marginalization clearly increase the vulnerability of both women and men to HIV infection. The consequences of gender inequalities in terms of low socioeconomic and political status, unequal access to education, and fear of violence, add to the greater biological vulnerability of women and girls being infected with HIV. Too often they have little capacity to negotiate safer sex, access the services they need, and utilize opportunities for empowerment (27). In nearly all countries in sub-Saharan Africa and certain Caribbean countries, the majority of people living with HIV are women, especially girls and women aged 15–24 years (28,29).

In sub-Saharan Africa, women are more likely to become infected with HIV than are men (Figure 5.6). The most recent prevalence data show that in sub-Saharan Africa, 13 women become infected for every 10 men infected. One half of people living with HIV globally are women and 76% of all HIV-positive women live in sub-Saharan Africa.

Conversely, traditional roles and societal values related to masculinity might encourage boys and men to adopt risky behaviours, including excessive alcohol use and concurrent sexual relationships, so increasing their risk of acquiring and transmitting HIV. Many harmful norms related to masculinity and femininity also stigmatize transgender people, men who have sex with men, and other sexual minorities.

Levels of new HIV infections in sub-Saharan Africa continue to remain higher among women, a pattern that applies to every subregion in sub-Saharan Africa. Female-to-male ratios of new HIV infections range from 1.22:1 in West and East Africa to 1.33:1 in southern Africa, despite the different types of epidemics and predominant modes of transmission in these subregions.

In other regions, men are more likely to be infected with HIV than women, often in concentrated epidemics involving men who have sex with men or people who inject drugs. Men who have sex with men continue to bear a high burden of HIV infection even in regions with generalized epidemics. In sub-Saharan Africa, HIV programming has largely neglected same-sex behaviour because of homophobia and the widespread criminalization of homosexuality.

Figure 5.6

People newly infected with HIV, 2009

Number of people newly infected with HIV annually by sex and geographical region, 2009.

Source: UNAIDS 2010.

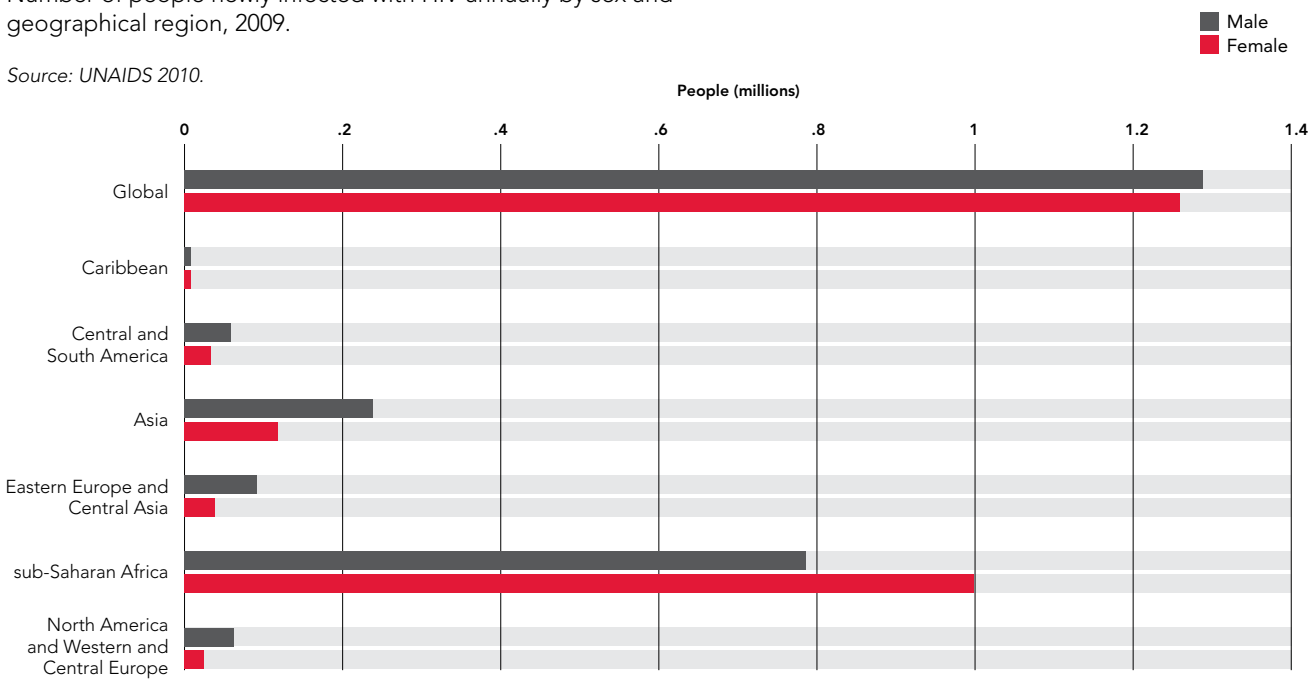
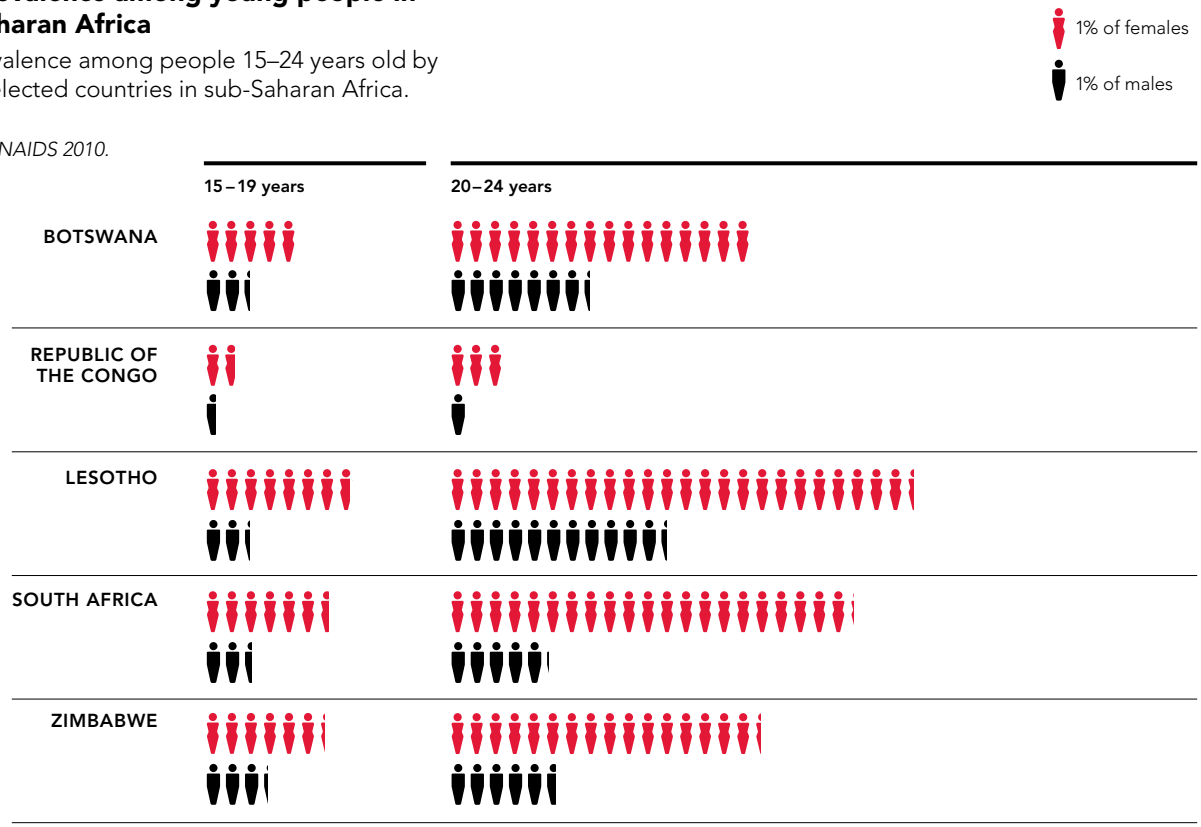


Figure 5.7

HIV prevalence among young people in sub-Saharan Africa

HIV prevalence among people 15–24 years old by sex in selected countries in sub-Saharan Africa.

Source: UNAIDS 2010.



Research has found significantly higher levels of infection among men who have sex with men than among men in general, and has also confirmed that many men who have sex with men also have sex with women (30). Understanding the complexities of relationships engaged in by some married and long-term partners is important in focusing the HIV response. A recent study conducted in Botswana, Malawi, and Namibia found that 34% of men who have sex with men were married to women, and a total of 54% reported sex with both men and women in the previous six months (31). Marriage thus serves as a way to protect against possible prosecution and stigma against men who have sex with men (32,33). In Asia, data obtained through the Asia Intimate Partner Transmission Study (34) indicate that women are predominantly infected by their husband or intimate partner. For example, recent data on HIV infection patterns in India reveal that 90% of women in India were infected within long-term relationships.

"THE NUMBER OF COUNTRIES WITH A SPECIFIC BUDGET FOR HIV ACTIVITIES RELATED TO WOMEN IS LOW: 46% OF REPORTING COUNTRIES."

Sociocultural practices significantly contribute to the risk of HIV infection, especially among young women

The effects of gender constructs are reflected in HIV infection rates among young women in Africa. Demographic and health surveys in selected countries in Africa show that young women are at particularly high risk of HIV infection, with rates substantially increasing among women 20–24 years old versus 15–19 years old (Figure 5.7). This is probably because young women, who are biologically more susceptible to HIV than men, also often have older male sexual partners, who are more likely than younger men to be infected with HIV. As a result, while levels of HIV infection among men rise slowly and peak at a lower level than female infection rates when men are in their mid- to late thirties, prevalence among women rises rapidly at a young age, with higher peaks when women are in their late twenties (35).

Data from sub-Saharan Africa indicate that women also engage in multiple concurrent partnerships (36). A recent ethnographic study conducted in the United Republic of Tanzania showed that both parents and daughters widely accepted transactional sex, including sex for power, pleasure, and material gain. The authors conclude that programmes that encourage young women to incorporate demands for safer sex into negotiations for gifts and money may ultimately be more effective than those that seek only to restrict transactional sex or highlight its health risks (37). Another study found that more affluent women are at greater risk of contracting HIV, as they are more mobile, more likely to live in an urban area, and more able to afford a lifestyle that includes having a higher number of sexual partners (38).

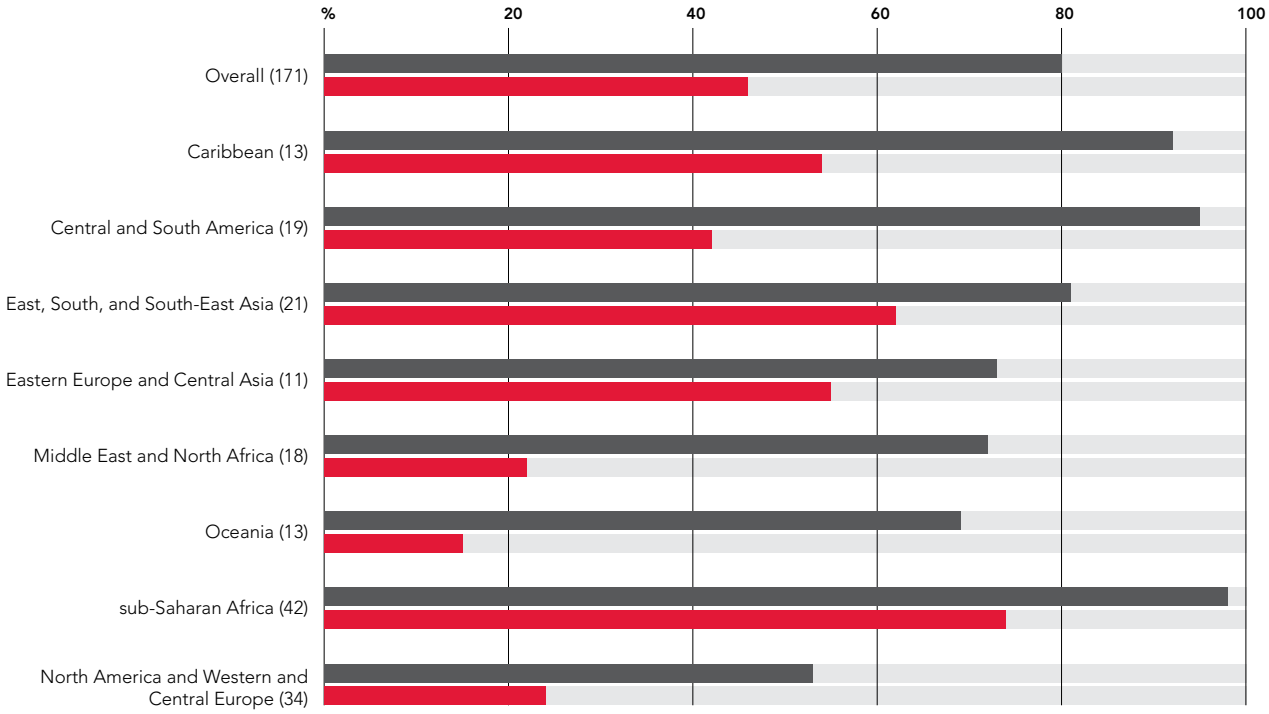
A 2009 study in Brazil (39) shows men who have sex with men have much higher levels of HIV infection than men in general (10.5% versus 0.8%). The study found that although men who have sex with men report more casual sexual partners than men in general, condom use among was only at about 50%, despite a comprehensive programme to increase condom use among men who have sex with men. Furthermore, young men who have sex with men used condoms with slightly less frequency than men in general (54% versus 57%) (39).

Figure 5.8

Multisectoral HIV strategies specifically including and budgeting for women

Percentage of countries in which governments report that multisectoral HIV strategies specifically include and budget for women.

Source: Country Progress Reports 2010.



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Women are included in HIV strategies but budgetary allocations are insufficient

Governments in 80% of countries (137 of 171) reported that they include women as a specific component of a multisectoral HIV strategy, but the rate of inclusion of women differs by geographical regions (Figure 5.8). The number of countries with a specific budget for HIV activities related to women is considerably lower: 46% (79 of the 171) reporting countries. Among countries in sub-Saharan Africa, nearly all strategic plans include interventions benefiting women, and three quarters of countries allocate budget accordingly, indicating a greater awareness of the need for and benefits of women-centred AIDS responses.

"VIOLENCE AND THE THREAT OF VIOLENCE CAN HAMPER WOMEN'S ABILITY TO ADEQUATELY PROTECT THEMSELVES FROM HIV INFECTION AND/OR ASSERT HEALTHY SEXUAL DECISION-MAKING."

The HIV epidemic is intertwined with sexual and reproductive health

Data on unmet sexual and reproductive health needs, especially among young women a population highly affected by HIV and violence, underline the urgency to address Millennium Development Goals 3, 4, 5 and 6 simultaneously. A WHO report on women and health (40) highlights the critical role of gender inequality in increasing vulnerability to HIV infection and other conditions and limiting access to health care services and information. A review of maternal mortality data revealed that HIV-related causes contributed to at least 20% of maternal deaths (41).

Countries with high HIV prevalence rates among young women are equally challenged by high teenage pregnancy rates, and the consequences of unintended pregnancies in terms of unsafe abortion.

According to WHO, each year about 16 million women 15–19 years old around the world give birth, with most living in sub-Saharan Africa. In addition, at least 2.5 million adolescents have unsafe abortions every year (42). Further, anecdotal reports indicate that women living with HIV are pressured, and even forced, to undergo sterilization or to have an abortion.

Recent research carried out by civil society on sexual and reproductive health policies, undertaken in 12 countries in sub-Saharan Africa, Central and South America, the Caribbean, South-East Asia, and Eastern Europe by GESTOS, Brazil (43) confirms that countries have reproductive and sexual health policies oriented towards women in place but generally fail to translate these into comprehensive services, leaving many sexual and reproductive health needs unmet.

Violence and HIV infections are often associated and require integrated responses

Violence and the threat of violence can hamper women's ability to adequately protect themselves from HIV infection and/or assert healthy sexual decision-making. In addition, women living with HIV are more likely to experience violence due to their HIV status (44).

The WHO study also found that many women have a traumatic experience when engaging in sexual intercourse for the first time, with the prevalence of forced first sex among adolescent girls younger than 15 years ranging between 11% and 45% globally. In addition, younger women, especially those 15–19

Figure 5.9

Violence against women

Proportion of ever-married women 15–49 years old who ever experienced physical or sexual violence from their most recent spouse or co-resident partner, by country, 2008 or most recent survey.

Source: Demographic Health Surveys, 2002-2008, excepting Bangladesh, Ethiopia, Japan, Kenya, Samoa, Serbia, Tanzania and Thailand (WHO Multi-Country Study on Women's health and Domestic Violence, 2004).

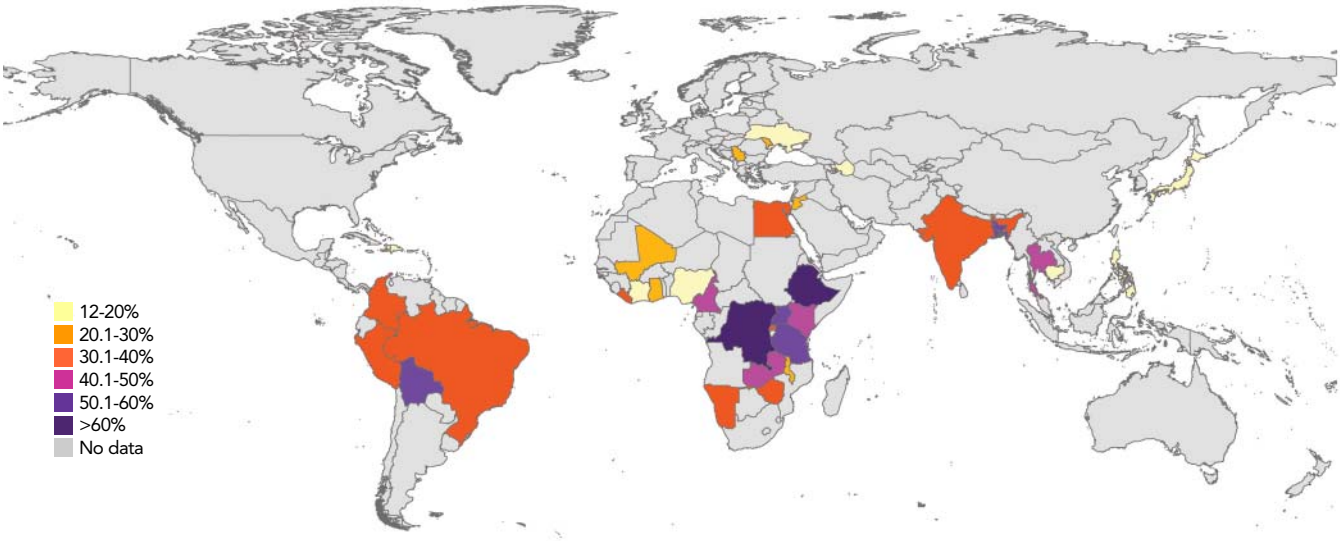
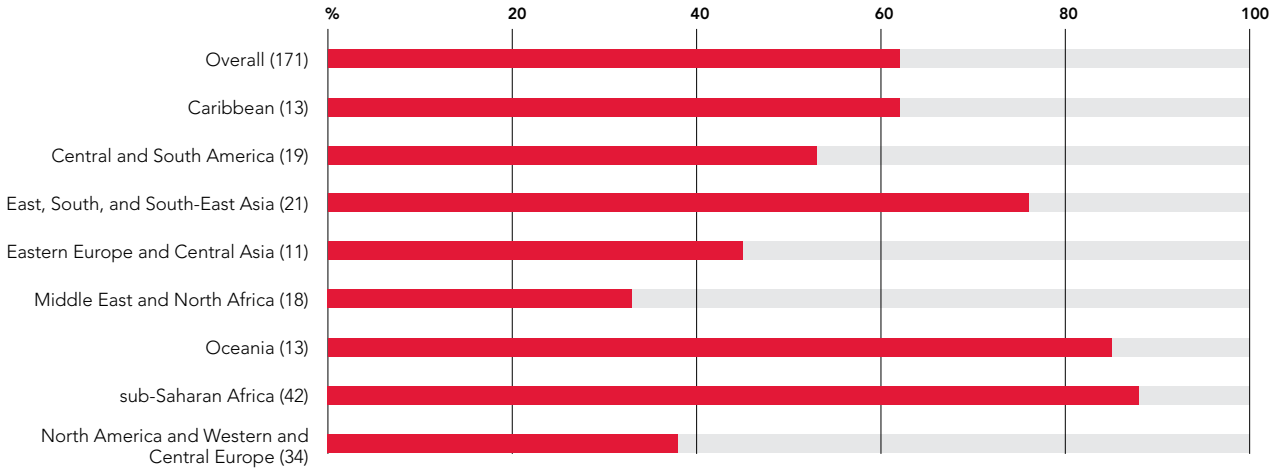


Figure 5.10

Governments involving men in reproductive health programmes

Percentage of countries in which governments report involving men in reproductive health programmes through information, education and communication, 2010.

Source: Country Progress Reports 2010.



years old, were generally at higher risk of physical and/or sexual violence by a partner. In Swaziland, which has one of the highest levels of HIV prevalence, a 2007 study (45) showed that 33% of females 13–24 years old reported experiencing some form of sexual violence before reaching 18 years of age.

A 2010 study in South Africa (46) confirmed the association between violence and HIV infection. Power inequity in relationships and intimate partner violence increased the incident risk of HIV infection among young South African women. Prevalence of the population-attributable risk was 14% for power inequity in relationships and 12% for intimate partner violence. The GESTOS research (43) found that few countries have undertaken focused actions to prevent violence or to empower women survivors of violence. This finding is confirmed by the recent WHO/UNAIDS publication (44), indicating that effective programmatic models such as Stepping Stones, IMAGES, and Sasa! have so far only been incorporated to a limited extent in the HIV response. It is notable that countries might have laws in place to punish rapists, but few have legislation that penalizes domestic violence (43).

"MEN WHO HAVE SEX WITH MEN AND TRANSGENDER PEOPLE ALSO FACE INCREASED VULNERABILITY TO HIV INFECTION DUE TO VIOLENCE AND STIGMA."

Figure 5.9 shows that the prevalence of violence against women can be as high as 50% in some countries. The limited availability of epidemiological data on violence underlines the urgent need for additional evidence to guide policy and programmatic action to address it.

UNGASS reports for several countries in sub-Saharan Africa (7) outline the increased HIV vulnerability of women due to violence and sexual coercion and highlight the link with armed conflict, including sexual violence against women in refugee camps. Other countries underline that violence against sex workers affects their capacity to insist on the use of condoms. Reporting on gender-based violence is not even. Outside sub-Saharan Africa, UNGASS reports are silent on violence against women and girls. In sub-Saharan Africa, countries have not reported on violence against men who have non-heterosexual identities or practices and transgender people.

Men who have sex with men and transgender people also face increased vulnerability to HIV infection due to violence and stigma. Historically, community-based organizations, rather than nationally funded HIV programmes, have led in attempting to increase access for men who have sex with men and transgender people. Such "self-help" efforts are hampered where homosexuality is criminalized, as in sub-Saharan Africa, where men who have sex with men experience violence, live under the threat of anti-sodomy laws, and are often excluded from HIV responses (47).

Engaging men is crucial in effectively responding to HIV

Despite evidence of positive changes in men's and boys' behaviour and attitudes when they participate in programmes that address HIV, sexual and reproductive health, and gender-based violence (48), few such programmes are in operation (49). UNGASS reporting also confirms that governments in only 60% of countries report having promoted greater involvement of men

in reproductive health programmes in information, education, and communication on reproductive health (Figure 5.10). The failure to engage men also directly affects their health. For example, fewer men than women access HIV-related treatment. ■

ACTION ITEMS

HUMAN RIGHTS

- Laws, policies, and regulations that create obstacles to effective HIV responses are increasingly acknowledged by key actors in the response. Countries should now take action to decriminalize sex workers, people who use drugs, men who have sex with men and transgender people, and reform other laws that block effective responses to HIV.
- Despite increased reporting on protective laws, countries and other stakeholders should establish effective enforcement mechanisms and provide people living with HIV and other key populations with access to justice and redress through HIV-related legal services and legal literacy programmes.
- Although progress has been noted, HIV-related stigma and discrimination are still highly prevalent globally and are not yet being sufficiently addressed. Countries and other stakeholders should urgently scale up comprehensive programmes that build capacities of HIV-related service providers, address stigma and discrimination in laws, institutions and communities, and empower those affected by HIV.
- To help to realize human rights in the context of HIV, there must be more meaningful involvement of people living with and those vulnerable to HIV in national HIV responses, as well as meaningful coverage of all affected populations. The GIPA principles must be fully implemented.

GENDER EQUALITY

- To achieve universal access goals towards HIV prevention, treatment, care and support, the AIDS response needs to be women and girls centred and include a dedicated budget to address their needs.
- Given that violence is widespread and that there is a clear association between violence against women and the spread of HIV, national HIV responses must include specific interventions to address violence.
- All countries need to ensure that women have access to integrated quality HIV and sexual and reproductive health services that enable women to exercise their rights.
- Men and boys need to be engaged in innovative approaches to change harmful social and cultural practices and norms, as part of HIV prevention.
- Countries need to address the needs of men who have sex with men through prevention interventions that go beyond health service provision.

SCORECARD: HUMAN RIGHTS AND GENDER EQUALITY

- Yes/Agree
- No/Disagree
- Data not available
- No NCPI report
- No UNGASS report

A NCPI Part A (government response)

B NCPI Part B (civil society response)

SUB-SAHARAN AFRICA	Laws & regulations protecting people living with HIV against discrimination	Laws, regulations, policies protecting specific sub-populations		Laws, regulations, policies obstructing access to prevention, treatment, care and support for vulnerable subpopulations		Mechanism to record, document and address cases of discrimination experienced by people living with HIV, vulnerable subpopulations	Women as a specific component of the national strategic plan	Women component of the national strategic plan budgeted	IEC activities on fighting Violence Against Women
	B	A	B	A	B	B	A	A	A
Angola	Yes/Agree	No/Disagree	No/Disagree	No/Disagree	Yes/Agree	Yes/Agree	Yes/Agree	Data not available	Yes/Agree
Benin	Yes/Agree	Yes/Agree	Yes/Agree	No/Disagree	No/Disagree	No/Disagree	Yes/Agree	Yes/Agree	Yes/Agree
Botswana	No/Disagree	No/Disagree	Yes/Agree	No/Disagree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree
Burkina Faso	Yes/Agree	Yes/Agree	Yes/Agree	No/Disagree	No/Disagree	Yes/Agree	Yes/Agree	Data not available	Yes/Agree
Burundi	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree
Cameroon	No/Disagree	No/Disagree	No/Disagree	No/Disagree	No/Disagree	No/Disagree	Yes/Agree	Yes/Agree	Yes/Agree
Cape Verde	Yes/Agree	Yes/Agree	Yes/Agree	No/Disagree	No/Disagree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree
Central African Republic	Yes/Agree	Yes/Agree	Yes/Agree	No/Disagree	No/Disagree	Yes/Agree	Yes/Agree	No/Disagree	Yes/Agree
Chad	Yes/Agree	Yes/Agree	Yes/Agree	No/Disagree	No/Disagree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree
Comoros	No/Disagree	No/Disagree	No/Disagree	No/Disagree	No/Disagree	No/Disagree	Yes/Agree	Yes/Agree	Yes/Agree
Congo	No/Disagree	No/Disagree	Yes/Agree	Yes/Agree	Yes/Agree	No/Disagree	Yes/Agree	Yes/Agree	Yes/Agree
Côte d'Ivoire	No/Disagree	No/Disagree	Yes/Agree	No/Disagree	No/Disagree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree
Democratic Republic of Congo	Yes/Agree	Yes/Agree	Yes/Agree	No/Disagree	No/Disagree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree
Equatorial Guinea	Yes/Agree	Yes/Agree	No/Disagree	No/Disagree	No/Disagree	No/Disagree	No/Disagree	No/Disagree	Yes/Agree
Eritrea	No/Disagree	Yes/Agree	No/Disagree	Yes/Agree	No/Disagree	No/Disagree	Yes/Agree	No/Disagree	Yes/Agree
Ethiopia	Yes/Agree	Yes/Agree	Yes/Agree	No/Disagree	No/Disagree	No/Disagree	Yes/Agree	No/Disagree	Yes/Agree
Gabon	No/Disagree	No/Disagree	No/Disagree	No/Disagree	No/Disagree	No/Disagree	Yes/Agree	Yes/Agree	Yes/Agree
Gambia	No/Disagree	No/Disagree	No/Disagree	No/Disagree	Yes/Agree	Yes/Agree	Yes/Agree	No/Disagree	Yes/Agree
Ghana	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree
Guinea	Yes/Agree	Yes/Agree	Yes/Agree	No/Disagree	No/Disagree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree
Guinea-Bissau	Yes/Agree	Yes/Agree	Yes/Agree	No/Disagree	Yes/Agree	No/Disagree	Yes/Agree	No/Disagree	Data not available
Kenya	No/Disagree	No/Disagree	No/Disagree	Yes/Agree	Yes/Agree	No/Disagree	Yes/Agree	Yes/Agree	Yes/Agree
Lesotho	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree
Liberia	No NCPI report	No NCPI report	No NCPI report	No NCPI report	No NCPI report	No NCPI report	No NCPI report	No NCPI report	No NCPI report
Madagascar	Yes/Agree	Yes/Agree	Yes/Agree	No/Disagree	Yes/Agree	No/Disagree	Yes/Agree	Yes/Agree	Yes/Agree
Malawi	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	No/Disagree	Yes/Agree
Mali	Yes/Agree	Yes/Agree	Yes/Agree	No/Disagree	No/Disagree	No/Disagree	Yes/Agree	Yes/Agree	Yes/Agree
Mauritania	No NCPI report	No NCPI report	No NCPI report	No NCPI report	No NCPI report	No NCPI report	No NCPI report	No NCPI report	No NCPI report
Mauritius	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree
Mozambique	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree
Namibia	No NCPI report	No NCPI report	No NCPI report	No NCPI report	No NCPI report	No NCPI report	No NCPI report	No NCPI report	No NCPI report
Niger	Yes/Agree	Yes/Agree	Yes/Agree	No/Disagree	No/Disagree	No/Disagree	Yes/Agree	Yes/Agree	Yes/Agree
Nigeria	No/Disagree	No/Disagree	No/Disagree	Yes/Agree	No/Disagree	No/Disagree	Yes/Agree	Yes/Agree	Yes/Agree
Rwanda	Data not available	Yes/Agree	Yes/Agree	Yes/Agree	No/Disagree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree
Sao Tome and Principe	Yes/Agree	Yes/Agree	No/Disagree	No/Disagree	No/Disagree	No/Disagree	Yes/Agree	Yes/Agree	Yes/Agree
Senegal	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree
Seychelles	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	No/Disagree	Yes/Agree	Yes/Agree	Yes/Agree
Sierra Leone	Yes/Agree	Yes/Agree	No/Disagree	No/Disagree	No/Disagree	Yes/Agree	Yes/Agree	Data not available	Yes/Agree

		Laws & regulations protecting people living with HIV against discrimination	Laws, regulations, policies protecting specific sub-populations		Laws, regulations, policies obstructing access to prevention, treatment, care and support for vulnerable subpopulations		Mechanism to record, document and address cases of discrimination experienced by people living with HIV, vulnerable subpopulations	Women as a specific component of the national strategic plan	Women component of the national strategic plan budgeted	IEC activities on fighting Violence Against Women
		B	A	B	A	B	B	A	A	A
SUB-SAHARAN AFRICA *Continued*	South Africa	■	■	■	■	■	▒	■	■	■
	Swaziland	▒	▒	▒	▒	■	▒	■	■	■
	Togo	■	■	■	■	■	■	■	■	■
	Uganda	■	■	■	▒	▒	■	■	■	■
	United Republic of Tanzania	■	▒	■	▒	■	▒	■	□	■
	Zambia	■	■	■	■	■	■	■	■	■
	Zimbabwe	■	■	■	■	■	▒	■	■	■
EAST ASIA	China	■	■	■	▒	■	■	■	■	■
	Democratic People's Republic of Korea	▣	▣	▣	▣	▣	▣	▣	▣	▣
	Japan	■	□	▒	□	■	■	□	□	□
	Mongolia	■	■	▒	■	■	▒	■	■	■
	Republic of Korea	▣	▣	▣	▣	▣	▣	▣	▣	▣
OCEANIA	Australia	■	■	■	▒	■	■	■	▒	■
	Fiji	■	▒	▒	■	■	▒	■	■	■
	Kiribati	▣	▣	▣	▣	▣	▣	▣	▣	▣
	Marshall Islands	■	■	■	■	■	▒	■	□	■
	Micronesia, Federated States of	■	▒	▒	▒	▒	▒	□	□	□
	Nauru	■	▒	■	■	■	■	□	□	■
	New Zealand	■	■	■	▒	▒	▒	□	□	□
	Palau	■	▒	▒	▒	▒	■	■	▒	■
	Papua New Guinea	■	■	■	■	■	■	■	▒	■
	Samoa	■	■	■	■	■	▒	■	▒	■
	Solomon Islands	▒	▒	▒	■	■	▒	■	▒	■
	Tonga	▒	▒	▒	▒	▒	▒	■	▒	■
	Tuvalu	▒	▒	▒	▒	▒	■	■	■	■
	Vanuatu	▒	▒	▒	▒	■	▒	▒	▒	□
SOUTH AND SOUTH-EAST ASIA	Afghanistan	▒	▒	■	■	■	▒	▒	▒	■
	Bangladesh	▒	▒	▒	■	■	■	■	■	■
	Bhutan	▣	▣	▣	▣	▣	▣	▣	▣	▣
	Brunei Darussalam	▒	▒	▒	■	■	▒	□	□	□
	Cambodia	■	■	■	▒	■	▒	■	■	■
	India	■	■	■	■	■	■	■	■	■
	Indonesia	▒	■	■	■	■	▒	■	■	■
	Lao People's Democratic Republic	▒	■	■	▒	▒	■	■	■	■
	Malaysia	▒	▒	■	■	■	■	■	■	■

SCORECARD: HUMAN RIGHTS AND GENDER EQUALITY

- Yes/Agree
- No/Disagree
- Data not available
- No NCPI report
- No UNGASS report

A NCPI Part A (government response)

B NCPI Part B (civil society response)

		Laws & regulations protecting people living with HIV against discrimination	Laws, regulations, policies protecting specific sub-populations		Laws, regulations, policies obstructing access to prevention, treatment, care and support for vulnerable subpopulations		Mechanism to record, document and address cases of discrimination experienced by people living with HIV, vulnerable subpopulations	Women as a specific component of the national strategic plan	Women component of the national strategic plan budgeted	IEC activities on fighting Violence Against Women
		B	A	B	A	B	B	A	A	A
SOUTH AND SOUTH-EAST ASIA *Continued*	Maldives	No/Disagree	Yes/Agree	No/Disagree	Yes/Agree	Yes/Agree	No/Disagree	Yes/Agree	No/Disagree	Yes/Agree
	Myanmar	No/Disagree	Yes/Agree	Yes/Agree	No/Disagree	Yes/Agree	No/Disagree	Yes/Agree	Yes/Agree	Yes/Agree
	Nepal	No/Disagree	No/Disagree	No/Disagree	Yes/Agree	Yes/Agree	No/Disagree	Yes/Agree	Yes/Agree	Data not available
	Pakistan	No/Disagree	No/Disagree	No/Disagree	Yes/Agree	Yes/Agree	No/Disagree	Yes/Agree	Yes/Agree	Yes/Agree
	Philippines	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	No/Disagree	Yes/Agree	Yes/Agree	Yes/Agree
	Singapore	No/Disagree	No/Disagree	No/Disagree	No/Disagree	Yes/Agree	Yes/Agree	Yes/Agree	No/Disagree	Data not available
	Sri Lanka	No/Disagree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	No/Disagree	No/Disagree	No/Disagree	Yes/Agree
	Thailand	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	No/Disagree	Yes/Agree
	Timor-Leste	Yes/Agree	Yes/Agree	Yes/Agree	No/Disagree	No/Disagree	Yes/Agree	Yes/Agree	Data not available	Yes/Agree
	Viet Nam	Yes/Agree	Yes/Agree	Yes/Agree	No/Disagree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree
EASTERN EUROPE AND CENTRAL ASIA	Armenia	Yes/Agree	Yes/Agree	Yes/Agree	No/Disagree	Yes/Agree	No/Disagree	No/Disagree	No/Disagree	Data not available
	Azerbaijan	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	Data not available	Yes/Agree
	Belarus	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree
	Georgia	Yes/Agree	Yes/Agree	No/Disagree	Yes/Agree	Yes/Agree	Yes/Agree	No/Disagree	Data not available	Data not available
	Kazakhstan	Yes/Agree	No/Disagree	Yes/Agree	No/Disagree	No/Disagree	No/Disagree	Yes/Agree	No/Disagree	Yes/Agree
	Kyrgyzstan	Yes/Agree	Yes/Agree	Yes/Agree	No/Disagree	No/Disagree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree
	Moldova, Republic of	Yes/Agree	Yes/Agree	Yes/Agree	No/Disagree	No/Disagree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree
	Russian Federation	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	No/Disagree	Yes/Agree	Yes/Agree	Yes/Agree
	Tajikistan	Yes/Agree	Yes/Agree	Yes/Agree	No/Disagree	No/Disagree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree
	Turkmenistan	No report	No report	No report	No report	No report	No report	No report	No report	No report
	Ukraine	Yes/Agree	Yes/Agree	Yes/Agree	No/Disagree	Yes/Agree	No/Disagree	No/Disagree	No/Disagree	Yes/Agree
	Uzbekistan	Yes/Agree	Yes/Agree	Yes/Agree	No/Disagree	No/Disagree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree
WESTERN AND CENTRAL EUROPE	Albania	No report	No report	No report	No report	No report	No report	No report	No report	No report
	Andorra	No report	No report	No report	No report	No report	No report	No report	No report	No report
	Austria	No report	No report	No report	No report	No report	No report	No report	No report	No report
	Belgium	Yes/Agree	Data not available	Yes/Agree	Data not available	Yes/Agree	Yes/Agree	Data not available	Data not available	Yes/Agree
	Bosnia and Herzegovina	Yes/Agree	Yes/Agree	Yes/Agree	No/Disagree	No/Disagree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree
	Bulgaria	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	No/Disagree	Yes/Agree	No/Disagree	No/Disagree	Data not available
	Croatia	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	No/Disagree	No/Disagree	Data not available
	Cyprus	No report	No report	No report	No report	No report	No report	No report	No report	No report
	Czech Republic	Yes/Agree	Yes/Agree	Yes/Agree	No/Disagree	Yes/Agree	Yes/Agree	No/Disagree	No/Disagree	Data not available
	Denmark	No/Disagree	Yes/Agree	Yes/Agree	Yes/Agree	No/Disagree	Yes/Agree	No/Disagree	No/Disagree	Data not available
	Estonia	Yes/Agree	No/Disagree	No/Disagree	No/Disagree	No/Disagree	No/Disagree	Yes/Agree	Data not available	Yes/Agree
	Finland	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	No/Disagree	Data not available	Data not available	Data not available
	France	No report	No report	No report	No report	No report	No report	No report	No report	No report
	Germany	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	Data not available	Yes/Agree

	Laws & regulations protecting people living with HIV against discrimination	Laws, regulations, policies protecting specific sub-populations		Laws, regulations, policies obstructing access to prevention, treatment, care and support for vulnerable subpopulations		Mechanism to record, document and address cases of discrimination experienced by people living with HIV, vulnerable subpopulations	Women as a specific component of the national strategic plan	Women component of the national strategic plan budgeted	IEC activities on fighting Violence Against Women
	B	A	B	A	B	B	A	A	A
WESTERN AND CENTRAL EUROPE *Continued*									
Greece	■	■	■	■	■	■	■	■	■
Hungary	■	■	■	■	■	■	■	■	□
Iceland	▣	▣	▣	▣	▣	▣	▣	▣	▣
Ireland	■	■	□	■	■	■	■	■	■
Israel	■	■	■	■	■	■	□	□	□
Italy	▣	▣	▣	▣	▣	▣	▣	▣	▣
Latvia	■	■	■	■	■	■	■	■	□
Liechtenstein	▣	▣	▣	▣	▣	▣	▣	▣	▣
Lithuania	■	■	■	■	■	■	■	■	■
Luxembourg	■	■	■	■	■	■	■	■	□
Malta	□	■	□	■	□	□	■	□	□
Monaco	▣	▣	▣	▣	▣	▣	▣	▣	▣
Montenegro	■	■	■	■	■	■	■	■	■
Netherlands	■	■	■	■	■	■	□	□	■
Norway	■	■	■	■	■	■	■	■	■
Poland	■	■	■	■	■	■	■	■	■
Portugal	■	■	■	■	■	■	■	■	■
Romania	■	■	■	■	■	■	■	■	■
San Marino	▣	▣	▣	▣	▣	▣	▣	▣	▣
Serbia	■	■	■	■	■	■	■	■	■
Slovakia	▣	▣	▣	▣	▣	▣	▣	▣	▣
Slovenia	■	■	■	■	■	■	■	■	□
Spain	■	■	■	■	■	■	■	■	■
Sweden	■	■	■	■	■	■	■	■	■
Switzerland	■	■	■	■	■	■	■	■	□
Macedonia, The Former Yugoslav Republic of	■	■	■	■	■	■	■	■	□
Turkey	■	■	■	■	■	■	■	■	■
United Kingdom of Great Britain & Northern Ireland	■	■	■	■	■	■	■	■	■
NORTH AMERICA									
Canada	■	■	■	■	■	■	■	■	■
Mexico	■	■	■	■	■	■	■	■	■
United States of America	■	■	■	■	□	■	□	□	□
MIDDLE EAST AND NORTH AFRICA									
Algeria	■	■	■	■	■	■	■	■	■
Bahrain	■	■	■	■	■	■	■	■	□
Djibouti	■	■	■	■	■	■	■	■	■

SCORECARD: HUMAN RIGHTS AND GENDER EQUALITY

- Yes/Agree
- No/Disagree
- Data not available
- No NCPI report
- No UNGASS report

A NCPI Part A (government response)

B NCPI Part B (civil society response)

	Laws & regulations protecting people living with HIV against discrimination	Laws, regulations, policies protecting specific sub-populations		Laws, regulations, policies obstructing access to prevention, treatment, care and support for vulnerable subpopulations		Mechanism to record, document and address cases of discrimination experienced by people living with HIV, vulnerable subpopulations	Women as a specific component of the national strategic plan	Women component of the national strategic plan budgeted	IEC activities on fighting Violence Against Women
	B	A	B	A	B	B	A	A	A
MIDDLE EAST AND NORTH AFRICA *Continued*									
Egypt	Yes	Yes	No	No	Yes	No	Yes	No	Yes
Iran, Islamic Republic of	Yes	Yes	Yes	Yes	Yes	No	Yes	Yes	Data not available
Iraq	No NCPI report	No NCPI report	No NCPI report	No NCPI report	No NCPI report	No NCPI report	No NCPI report	No NCPI report	No NCPI report
Jordan	No	No	Yes	No	Yes	No	Yes	No	Yes
Kuwait	No	No	No	Yes	No	No	No	No	Data not available
Lebanon	No	Yes	No	Yes	Yes	No	Yes	No	Yes
Libyan Arab Jamahiriya	Yes	No	No	No	No	No	Data not available	Data not available	Yes
Morocco	No	No	Yes	Yes	Yes	No	Yes	Yes	Yes
Oman	Yes	No	Yes	No	Data not available	Yes	Yes	No	Data not available
Qatar	Data not available	No	Data not available	No	Data not available	Data not available	Data not available	Data not available	Data not available
Saudi Arabia	Yes	Yes	Yes	No	No	Yes	Yes	Yes	Data not available
Somalia	No	No	No	No	No	No	Yes	No	Yes
Sudan	No NCPI report	No NCPI report	No NCPI report	No NCPI report	No NCPI report	No NCPI report	No NCPI report	No NCPI report	No NCPI report
Syrian Arab Republic	Yes	Yes	Yes	Yes	Yes	No	Data not available	Data not available	Data not available
Tunisia	No	No	No	No	Yes	No	Yes	No	Data not available
United Arab Emirates	Yes	Yes	Yes	Yes	Yes	No	Data not available	Data not available	Data not available
Yemen	Yes	No	No	No	No	No	Yes	No	Yes
CARIBBEAN									
Antigua & Barbuda	No	No	No	No	No	Yes	Data not available	Data not available	Yes
Bahamas	Yes	Yes	Yes	Yes	Yes	Yes	Yes	No	Yes
Barbados	No	No	No	Yes	Yes	No	Yes	Yes	Yes
Cuba	Yes	Yes	Yes	No	No	Yes	Yes	Yes	Yes
Dominica	Yes	Yes	No	Yes	Yes	Yes	Yes	Yes	Yes
Dominican Republic	Yes	Yes	Yes	No	Yes	Yes	Yes	No	Yes
Grenada	Yes	No	No	Yes	Yes	Yes	Yes	No	Yes
Haiti	No	No	No	No	No	Yes	Yes	Yes	Yes
Jamaica	No	No	No	Yes	Yes	Yes	Yes	Yes	Data not available
Saint Kitts and Nevis	No	No	No	Yes	Yes	Yes	Yes	No	Data not available
Saint Lucia	Yes	No	Yes	Yes	Yes	Yes	Yes	No	Yes
Saint Vincent and the Grenadines	No	No	No	No	No	Yes	Yes	Yes	Yes
Trinidad and Tobago	No	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Data not available
CENTRAL AND SOUTH AMERICA									
Argentina	Yes	Yes	Yes	Yes	Yes	Yes	Yes	No	Yes
Belize	No	Yes	Yes	Yes	Yes	No	Yes	Yes	Yes
Bolivia	Yes	Yes	Yes	No	No	Yes	Yes	No	Yes
Brazil	Yes	Yes	Yes	No	No	Yes	Yes	Yes	Yes
Chile	Yes	No	No	Yes	Yes	No	Yes	No	Data not available
Colombia	Yes	Yes	Yes	No	No	No	Yes	Yes	Yes

CENTRAL AND SOUTH AMERICA
Continued

	Laws & regulations protecting people living with HIV against discrimination	Laws, regulations, policies protecting specific sub-populations		Laws, regulations, policies obstructing access to prevention, treatment, care and support for vulnerable subpopulations		Mechanism to record, document and address cases of discrimination experienced by people living with HIV, vulnerable subpopulations	Women as a specific component of the national strategic plan	Women component of the national strategic plan budgeted	IEC activities on fighting Violence Against Women
	B	A	B	A	B	B	A	A	A
Costa Rica	■	■	■	■	■	■	■	■	□
Ecuador	■	■	■	■	■	■	■	■	□
El Salvador	■	■	■	■	■	■	■	■	□
Guatemala	■	■	■	■	■	■	■	■	■
Guyana	■	■	■	■	■	■	■	■	■
Honduras	■	■	■	■	■	■	■	■	□
Nicaragua	■	■	■	■	■	■	■	■	■
Panama	■	■	■	■	■	■	■	■	■
Paraguay	■	■	■	■	■	■	■	■	■
Peru	■	■	■	■	■	■	■	□	■
Suriname	■	■	■	■	■	■	■	■	□
Uruguay	■	■	■	■	■	■	■	■	■
Venezuela	■	■	■	■	■	■	■	■	■

HIV INVESTMENTS

6

KEY FINDINGS

- A total of US$ 15.9 billion was available for the AIDS response in 2009, US$ 10 billion short of what is needed in 2010.
- In low- and middle-income countries, domestic resources account for over half of all AIDS-related investments. In low-income countries, however, 88% of spending on AIDS comes from international funding.
- The majority of international funding for AIDS comes from bilateral donors. The United States of America is the largest international donor.
- Investment in treatment and care is increasing—but many countries depend on international assistance for their treatment and care programmes.
- HIV prevention programmes largely rely on international funds.
- One third of countries make the AIDS response a high budgetary priority, based on disease burden and national income.

» **Investing for AIDS is a shared responsibility**

Investing for AIDS is a shared global responsibility that is paying clear dividends —it saves lives now, improves the quality of life of people living with HIV, and will lessen future burdens of cost and disease. In 2009, international donors and governments together provided US$ 15.9 billion for the global AIDS response, more than half of which came from domestic sources in low- and middle-income countries.

As a result of this unprecedented health investment, HIV prevalence is falling due to programmes that reduce risk behaviour, more than 5 million people are receiving life-saving antiretroviral therapy, millions of orphans have received basic education and health care, and more tolerant and enabling social environments have been established in many countries through campaigns to reduce HIV-related stigma and discrimination. None of this would have been possible without the strong mobilization of the global community and the unprecedented levels of funding provided collectively by donors, governments, the private sector, philanthropic organizations and individuals to address HIV.

However, the gap between investment needs and resource availability is widening at a time of fiscal constraints. In 2009, there was a US$ 10 billion gap as, for the first time, international assistance did not increase from 2008 levels.

In most countries, the AIDS response is funded by a complex interplay of domestic public spending, multilateral and bilateral aid, private-sector and philanthropic support and individual out-of-pocket spending. In many low- and middle-income countries, the largest source of HIV funding—52%—is domestic expenditure. Government donors provide an additional 42% and the international philanthropic sector 5% (1).

International investment levels have largely reflected the epidemic distribution. Donors' HIV-related spending is higher in countries with high HIV prevalence. The sharing of the responsibility has largely matched the financial capabilities of individual countries and the magnitude of national epidemics.

Middle-income countries contributed a far greater proportion of the resources to their national AIDS response. Low-income countries' share of investment for the national AIDS response was much smaller.

DOMESTIC INVESTMENT PRIORITY INDEX (DIPI)

A new UNAIDS Domestic Investment Priority Index attempts to measure the extent of investment priority given by governments to support their national AIDS response. The Index is calculated by dividing the percentage of government revenue each country directs to the AIDS response by the population HIV prevalence. A high value usually indicates a high level of priority.

$$\textbf{Domestic investment priority index} = \frac{\text{Public expenditure on AIDS response}}{\text{Government revenue}} \times \frac{\text{National population}}{\text{People living with HIV}}$$

On average, the percentage of government revenue allocated to the AIDS response was one fifth of the population HIV prevalence. Fifty-five countries allocated more than 0.5% of total government revenue. Data from 121 countries show that one third of all countries make investments at a level that is commensurate with their national income levels and share of the global epidemic burden. Among the 104 countries reporting, the median level of priority is 0.35. The Priority Index of a large majority of countries (70%), however, falls below this average—suggesting that many countries need to invest more in their AIDS responses.

Eight of 14 countries in West and Central Africa and six of 16 countries in east and southern Africa appear to be spending less on the AIDS response than might be expected given their disease burden and government resources. The Russian Federation and Ukraine, the two countries in Eastern Europe and Central Asia with the highest HIV prevalence, are spending at relatively low levels given their disease burden and ability to pay. The Domestic Investment Priority Index implies that both countries could contribute more domestic resources to the AIDS response (Figure 6.1). Figure 6.2 shows the distribution of funds to different elements of the epidemic response.

Figure 6.1

Domestic Investment Priority Index for countries with the highest HIV prevalence

	Year	DIPI	Median spending
Botswana	2008	0.31	●
Brazil	2008	0.80	●
Cameroon	2008	0.06	●
China	2009	0.69	●
Colombia	2009	0.52	●
Congo	2009	0.68	●
Côte d'Ivoire	2008	0.05	●
Democratic Republic of the Congo	2008	0.28	●
Ghana	2008	0.10	●
India	2009	0.07	●
Indonesia	2008	0.29	●
Kenya	2009	0.33	●
Lesotho	2008	0.33	●
Malawi	2009	0.03	●
Mozambique	2008	0.03	●
Nigeria	2008	0.13	●
Russian Federation	2008	0.19	●
South Africa	2009	0.18	●
Thailand	2009	0.37	●
Uganda	2008	0.72	●
Ukraine	2008	0.09	●
Viet Nam	2009	0.05	●
Zimbabwe	2009	0.04	●

DIPI=Domestic Investment Priority Index

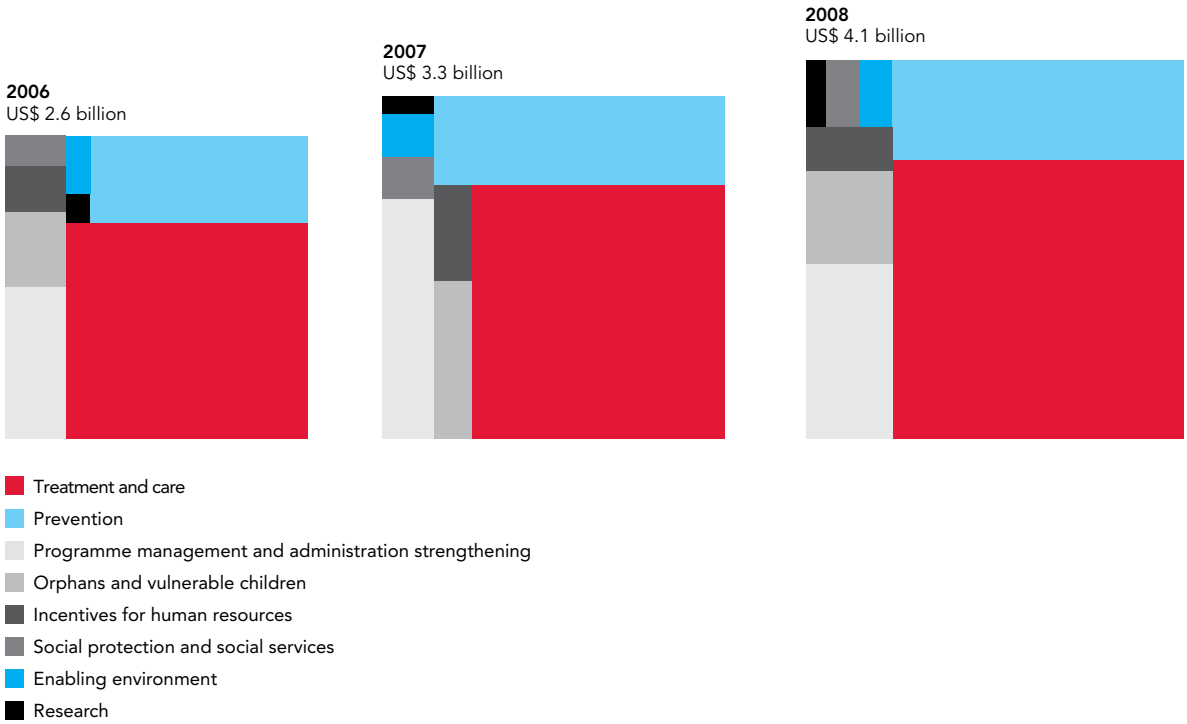
● Above median ● Below median

Figure 6.2

HIV spending in low- and middle-income countries

HIV spending in current US dollars by programmatic area in 43 low- and middle-income countries, 2006–2008.

Source: Country Progress Reports 2010.



International investments are not increasing; donor fair share is not being met

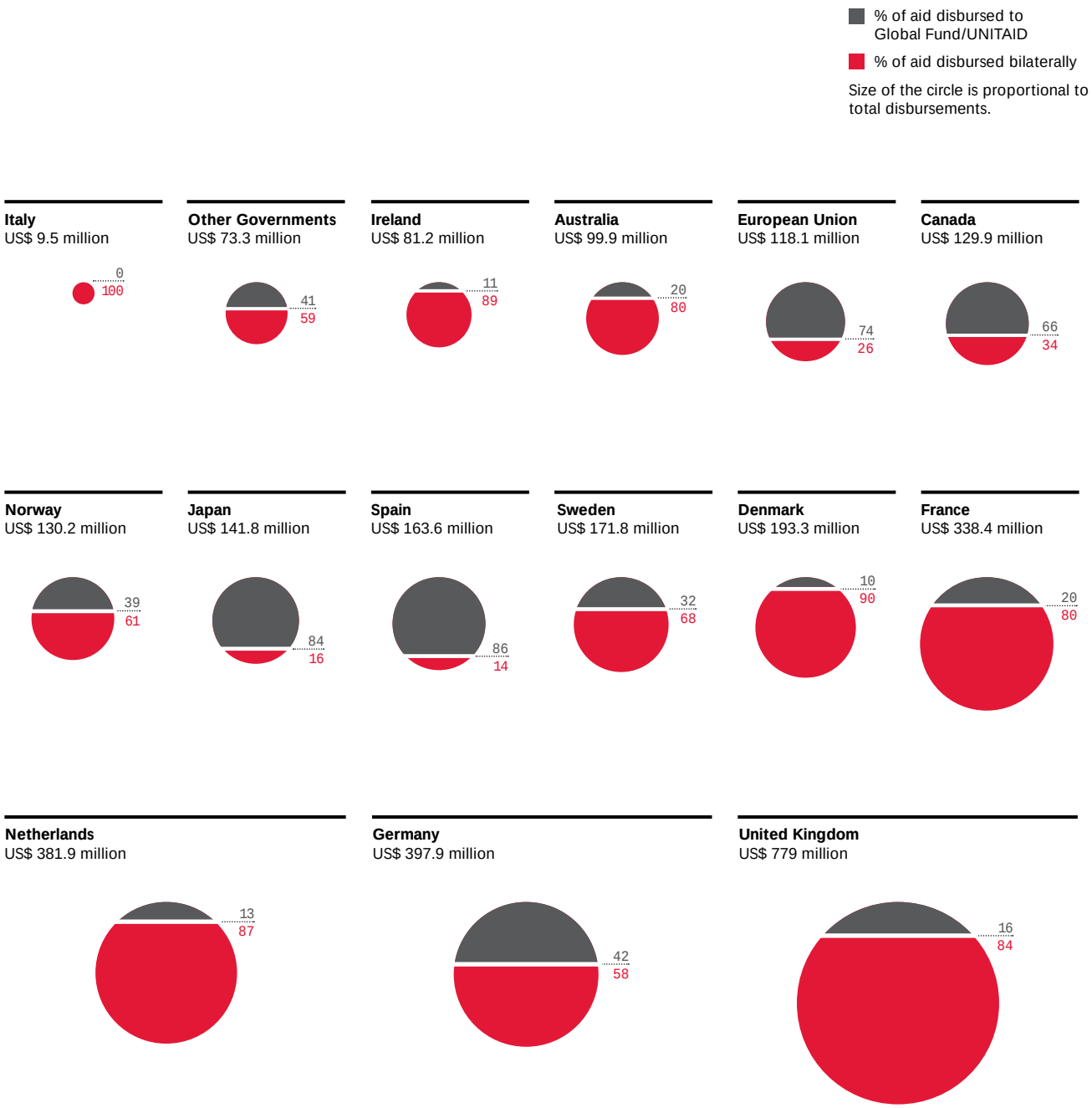
Donor governments' actual disbursements for the AIDS response in 2009 stood at US$ 7.6 billion in 2009, a slight decrease from the US$ 7.7 billion made available in 2008. These disbursements include both bilateral aid (funds disbursed directly from a donor country to a recipient country) and contributions to multilateral organizations (Figure 6.3). The majority of these resources went to the countries most affected by the epidemic. The top 20 recipients of aid account for 71% of the people living with HIV globally. Low-income countries received 78% of international funds, with another 14% going to lower-middle-income countries.

International assistance is crucial to sustaining the AIDS response. Of the 132 countries reporting HIV spending by funding source, 70 countries (53%) rely on international funds to finance 50% or more of HIV spending. And for the majority of the low- and middle-income countries, increasing domestic investment priority to the optimum levels is not sufficient to meet the needs of the AIDS response. The United States of America was the largest international

Figure 6.3

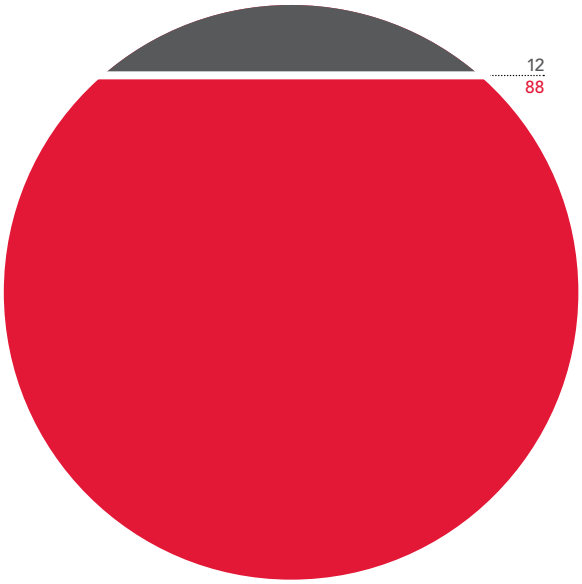
Channels used by major donor countries for disbursing international AIDS funding in 2009

Source: Kates et al. 2010.

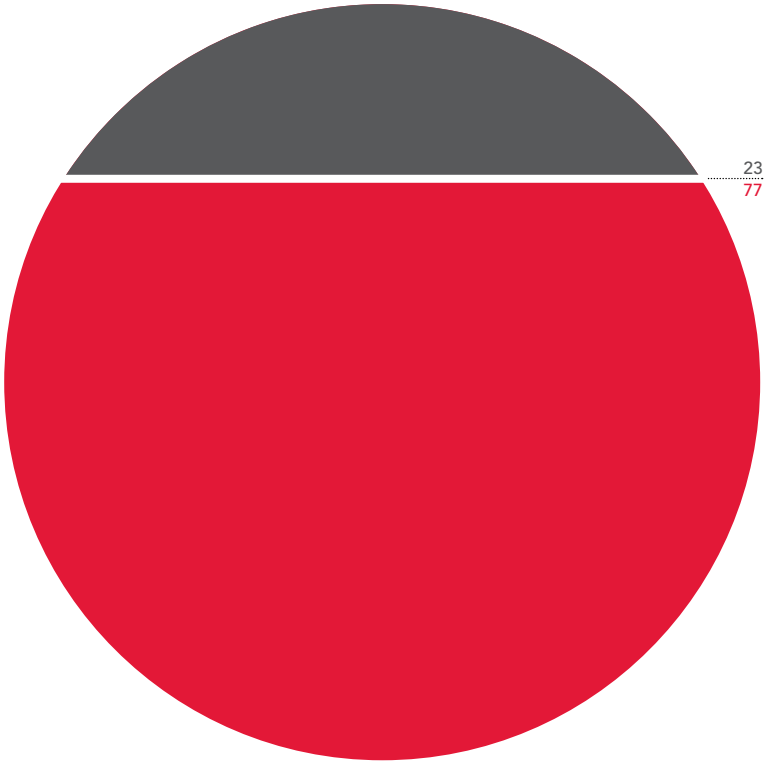


Bilateral funding includes HIV-earmarked multilateral funding; multilateral funding includes Global Fund contributions adjusted to represent the estimated HIV share based on Global Fund grant distribution by disease to date (61% for HIV) and UNITAID contributions adjusted to represent the estimated HIV share based on distribution by disease to date (49% for HIV).

United States
US$ 4.4 billion



Total
US$ 7.6 billion



donor, accounting for 58% of all donor-government disbursements for AIDS and for 27% of the funding available for AIDS from all sources (donor governments, multilateral institutions, domestic government spending, and private and individual out-of-pocket spending). The United Kingdom accounted for 10% of total donor government disbursements for AIDS, and Germany and the Netherlands accounted for 5% each.

International investment funding channels

Bilateral funding remains the principal source of international AIDS funds for low- and middle-income countries. Of the US$ 7.6 billion donor governments made available for AIDS in 2009, US$ 5.9 billion (77%) was provided as bilateral aid. The United States of America, the largest donor, provides a vast majority (88%) of its resources directly to countries.

However, a sizeable proportion (23%) of all international assistance is available through multilateral institutions such as the Global Fund to fight AIDS, Tuberculosis and Malaria and UNITAID. Canada, the European Union, France, Japan and Spain each provided more than two thirds of their HIV-related international assistance through the Global Fund and UNITAID in 2009. The Global Fund, which accounts for 72% of disbursements from multilateral sources, was the main source of AIDS funding in 52 of its 92 recipient countries.

Donor fair share of international investments for AIDS response is not being met

Comparing donor country funding for AIDS with their national gross domestic product (GDP) is one way of determining whether the contribution represents a fair share to the HIV response (Figure 6.4). Some donors give less in absolute terms than others but dedicate a greater share of their GDP to international assistance on AIDS. Most donor countries have the potential to provide substantially more resources than they are currently providing.

Improving cost-effectiveness can help bridge the resource gap

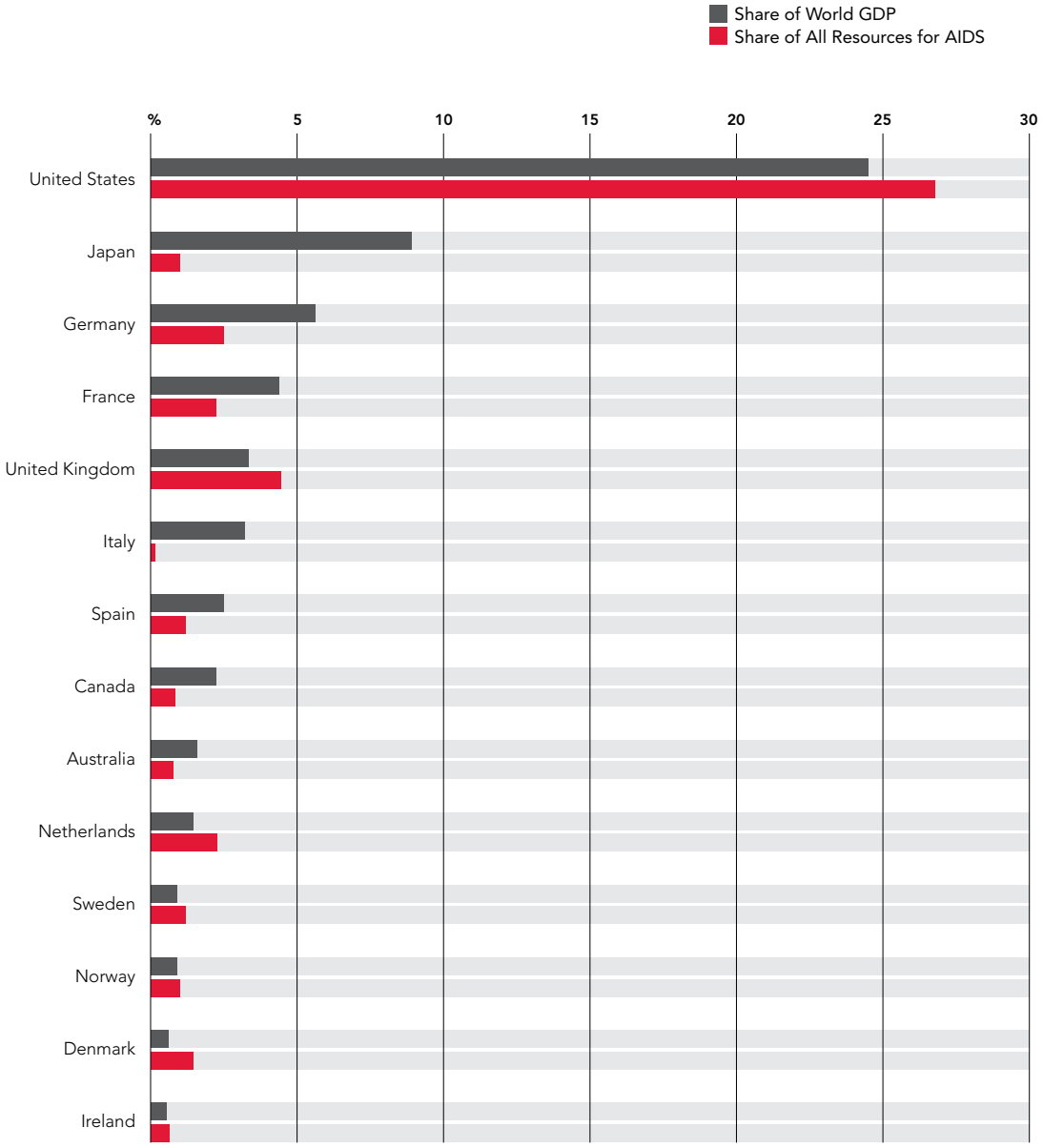
The resource availability for the AIDS response has always fallen short of what is needed. National programmes have had to ensure that programme choices are effective and efficient to have the maximum impact in averting new HIV infections and AIDS-related deaths. Countries have seen best results when resources are tailored to epidemic patterns and have followed evidence: for example, treatment programmes that use the most effective combination of drugs and male circumcision as a priority component of prevention in generalized epidemics. In many countries, programmes promoting abstinence received far more resources than efforts to increase condom use or reduce multiple partners. Evidence from Zambia shows that, without the right mix of behavioural interventions, gains are minimal.

The use of antiretroviral drugs for preventing mother-to-child HIV transmission has been reported with costs of US$ 34 per disability-adjusted life-year

Figure 6.4

Donor share of the world GDP and all resources available for AIDS, 2009

Source: Kates J et al. 2010.



GDP = gross domestic product. Bilateral funding includes HIV-earmarked multilateral funding. Bilateral funding includes multilateral funding earmarked for HIV but does not include the Global Fund or UNITAID. Global Fund contributions are adjusted to represent the estimated HIV share based on Global Fund grant distribution by disease to date (61% for HIV). UNITAID contributions are adjusted to represent the estimated HIV share based on distributions by disease to date (49% for HIV). The resources available are estimated and represent disbursements from all sources.

Figure 6.5

Price trends for commonly used antiretroviral therapy regimens

Price trends for some of the most commonly used antiretroviral therapy regimens for adult patients in low-income countries, 2008-2010.

Source: World Health Organization. Transaction prices for Antiretroviral Medicines and HIV Diagnostics from 2008 to March 2010. A summary report from the Global Price Reporting. Mechanism. Geneva May, 2010.

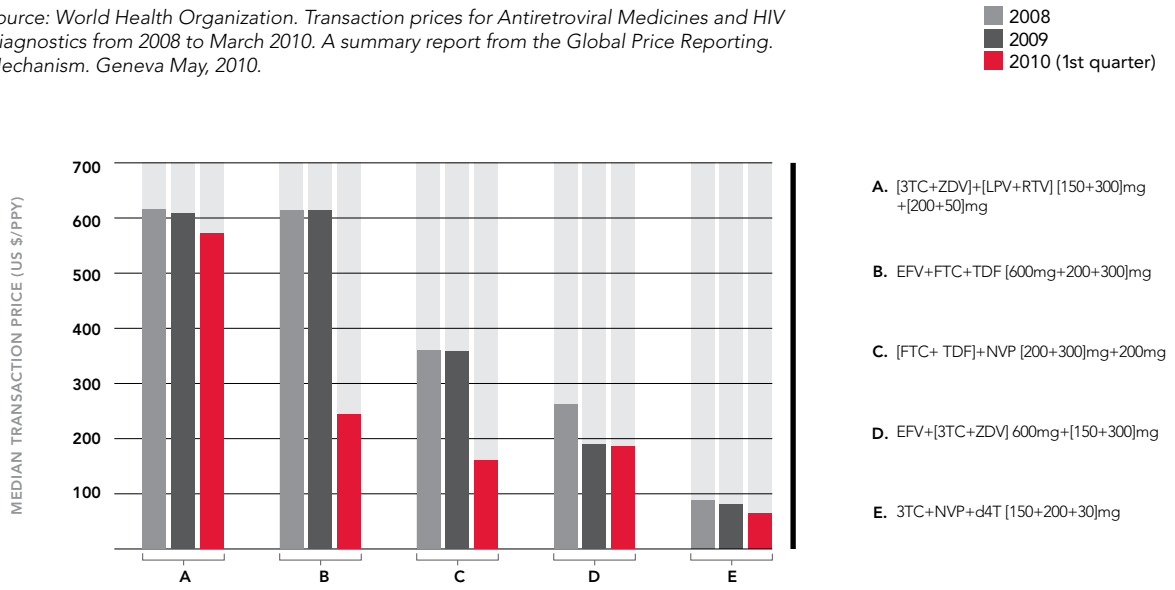
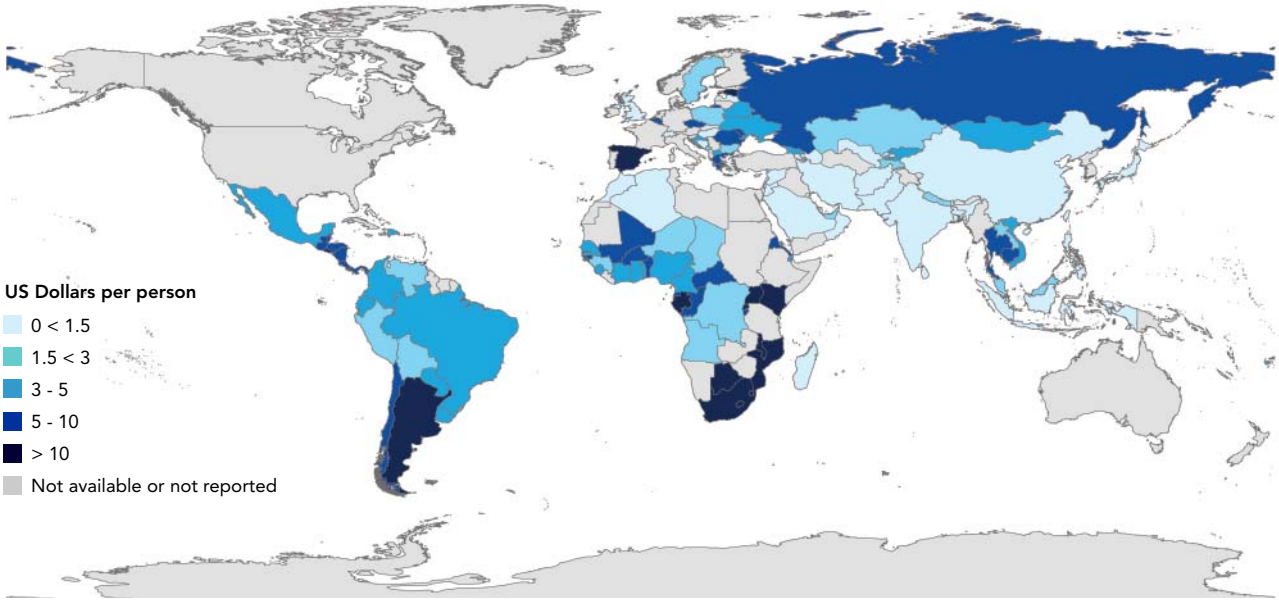


Figure 6.6

Domestic and international HIV spending per person

Domestic and international HIV spending in international US dollars (purchasing power parity) per person by country, 2009 or last available year.

Source: Country Progress Reports 2010.



saved; however, providing full treatment to the pregnant woman saves the life of the mother and protects an infant from HIV infection and orphanhood. There is also scope for innovation in promoting cost–effectiveness. Malawi is considering providing all pregnant women living with HIV with full antiretroviral therapy (for their own health and for stopping the mother-to-child transmission of HIV). Although this is potentially expensive at the beginning, the cumulative benefits over the long term are better mother-to-child outcomes, reduced maternal mortality, reduced orphanhood, and increased school retention rates.

Reducing the unit cost of procurement as well as delivery of services is one way to improve value for money. Antiretroviral therapy costs today are in many cases a fraction of what they used to be, due in large part to efficiency gained in service delivery and reduction in commodities prices (Figure 6.5). The median price of the most commonly prescribed regimen for adults has dropped to around US$ 0.17 per day. Prevention costs have also declined. Stopping a single case of infection among infants now costs a mere US$ 5 compared with thousands of dollars a few years ago. The cost of condoms has also declined to as low as US$ 0.04 per unit.

Investment for the AIDS response must be predictable and sustainable

As resource availability for HIV increased over the last decade, spending on HIV prevention, treatment, care and support have increased. Overall investments for the AIDS response grew by 82% between 2006 and 2008. Treatment and care programmes received 56% and HIV prevention programmes received 20% of the total resources available. Nearly 71 countries depend on international sources for funding more than 50% of their prevention activities. In contrast, the cost of treatment and care programmes on average appears to be shared equally between domestic sources and international sources. However, 26 countries reported that nearly 77% or more of their treatment and care expenditure relies on external sources (Figure 6.6, Figure 6.7 and Figure 6.8).

At a time when demand for universal access for prevention and treatment is growing, lack of additional resources is slowing down the pace of achieving results for people. As countries strive to increase their investments for the AIDS response, attention is needed to make long-term resource availability predictable. ■

Figure 6.7

Annual HIV domestic and international spending

Annual HIV domestic public and international spending in current US dollars, total and per person living with HIV, among the 15 low- and middle-income countries with the highest spending, 2009 or last available year, international dollars (purchasing power parity).

Source: Country Progress Reports 2010

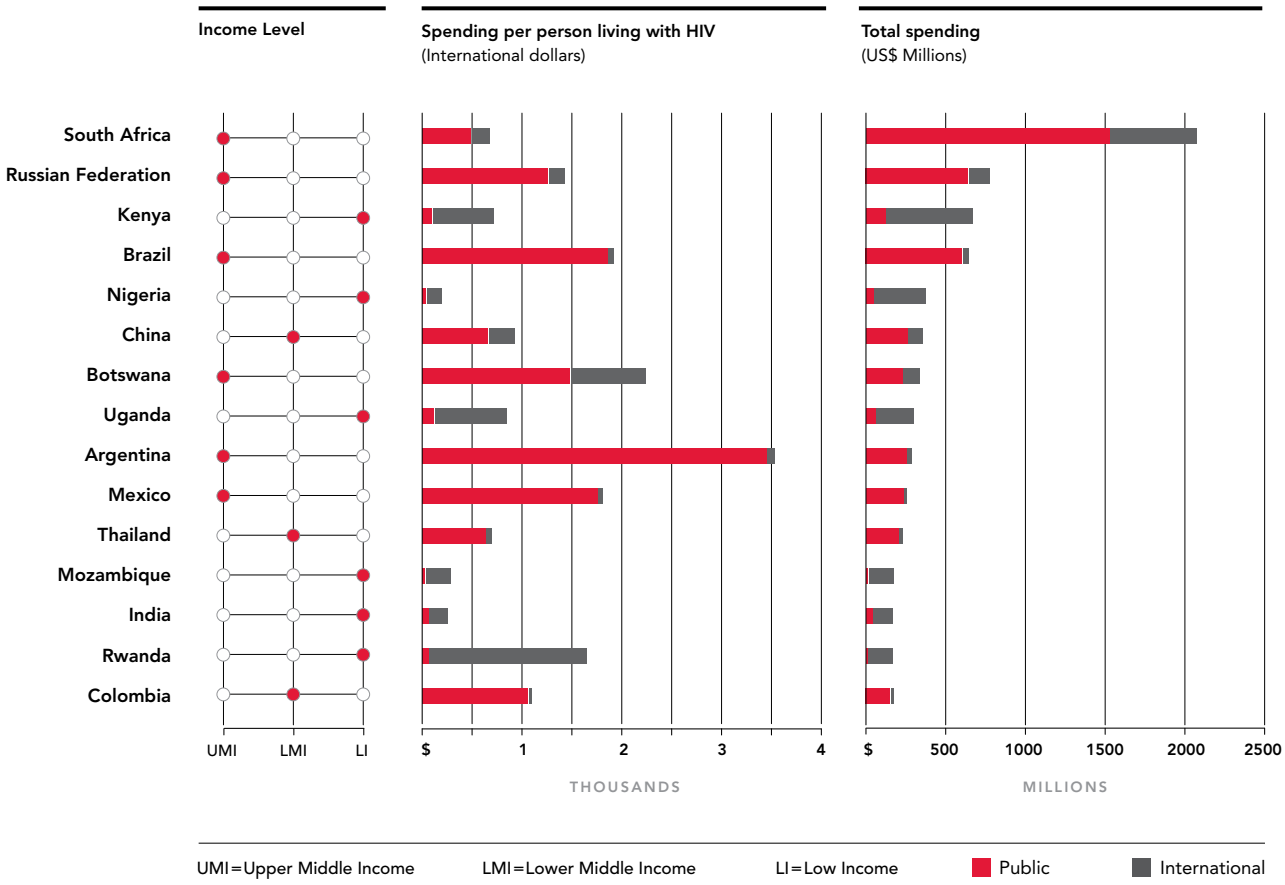
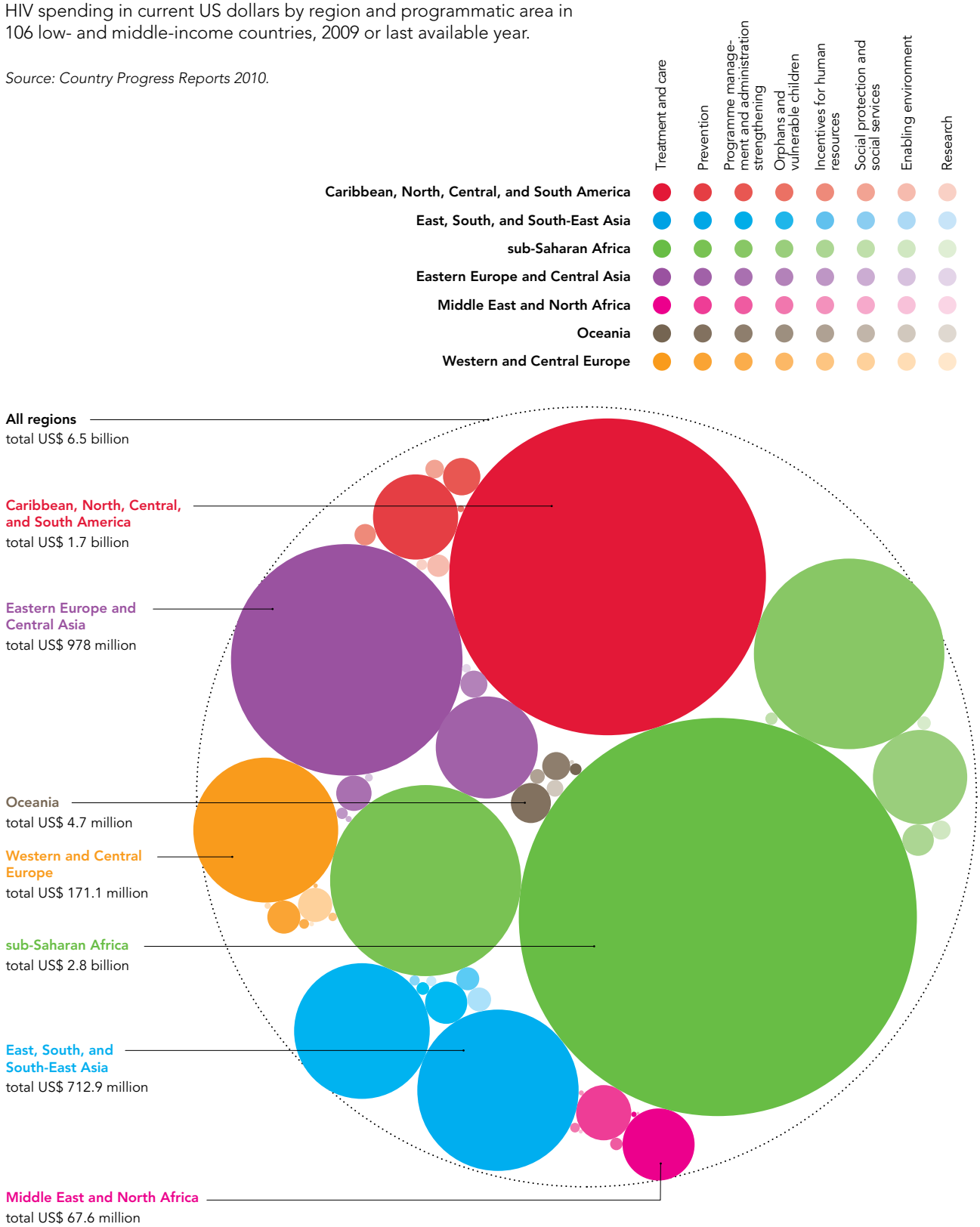


Figure 6.8

Regional HIV spending in low- and middle-income countries

HIV spending in current US dollars by region and programmatic area in 106 low- and middle-income countries, 2009 or last available year.

Source: Country Progress Reports 2010.



6

ACTION ITEMS

- The AIDS response must be fully funded. This is a shared responsibility between governments, donor countries, civil society and the private sector.
- Donor countries must continue to increase their allocations to the AIDS response.
- Countries that have the potential to increase domestic investments must do so to accelerate progress towards universal access to HIV prevention, treatment, care, and support.
- Resources for AIDS programmes must be predictable. National strategic plans must be realistic.
- Each national programme should set priorities to ensure that available resources are invested appropriately in cost-effective programmes.
- Donor investments must match country priorities.
- Investments must be evidence informed and reach populations most in need first so that the returns are maximized and meet human rights standards.
- HIV treatment programmes should be expanded urgently and utilize optimal combinations of high-quality and less-toxic drugs that reduce mortality over the long term.
- HIV prevention investments are cost-effective when they include combination approaches that maximize synergies rather than isolated interventions.

SCORECARD: HIV INVESTMENTS

Public
International
Data not available

% of HIV spending from public and international sources

		Year	Domestic priority to HIV	Total prevention	Total care and treatment	Total HIV spending
SUB-SAHARAN AFRICA	Angola	2009	0.29			
	Benin	2009	1.42			
	Botswana	2008	0.31			
	Burkina Faso	2008	1.25			
	Burundi	2008	3.11			
	Cameroon	2008	0.06			
	Cape Verde	2009	-			
	Central African Republic	2008	0.12			
	Chad	2008	0.34			
	Comoros	-	-			
	Congo, Republic of the	2009	0.68			
	Côte d'Ivoire	2008	0.05			
	Democratic Republic of Congo	2008	0.28			
	Equatorial Guinea	2009	0.19			
	Eritrea	2009	-			
	Ethiopia	-	-			
	Gabon	2009	0.18			
	Gambia	2008	0.23			
	Ghana	2008	0.10			
	Guinea	2009	0.24			
	Guinea-Bissau	2009	0.46			
	Kenya	2009	0.33			
	Lesotho	2008	0.33			
	Liberia	-	-			
	Madagascar	2008	7.03			
	Malawi	2009	0.03			
	Mali	2008	0.38			
	Mauritania	-	-			
	Mauritius	-	-			
	Mozambique	2008	0.03			
	Namibia	-	-			
	Niger	2008	0.21			
	Nigeria	2008	0.13			
	Rwanda	2008	0.61			
	Sao Tome and Principe	2009	-			
	Senegal	2008	0.38			
	Seychelles	2009	-			
	Sierra Leone	2007	0.11			
	South Africa	2009	0.18			
	Swaziland	2007	0.11			
	Togo	2008	0.11			
	Uganda	2008	0.72			
	United Republic of Tanzania	-	-			
	Zambia	-	-			
	Zimbabwe	2009	0.04			
EAST ASIA	China	2009	0.69			
	Democratic People's Republic of Korea	-	-			
	Japan	2009	0.67			
	Mongolia	2009	1.05			
	Republic of Korea	-	-			

% of HIV spending from public and international sources

		Year	Domestic priority to HIV	Total prevention	Total care and treatment	Total HIV spending
OCEANIA	Australia	-	-			
	Fiji	2009	0.55			
	Kiribati	-	-			
	Marshall Islands	2009	-			
	Micronesia, Federated States of	2009	-			
	Nauru	2009	-			
	New Zealand	-	-			
	Palau	2009	-			
	Papua New Guinea	-	-			
	Samoa	2009	-			
	Solomon Islands	2009	-			
	Tonga	2009	-			
	Tuvalu	2009	-			
	Vanuatu	2009	-			
SOUTH AND SOUTH-EAST ASIA	Afghanistan	2009	-			
	Bangladesh	2009	0.00			
	Bhutan	-	-			
	Brunei Darussalam	-	-			
	Cambodia	2008	1.35			
	India	2009	0.07			
	Indonesia	2008	0.29			
	Lao People's Democratic Republic	2009	0.18			
	Malaysia	2009	0.27			
	Maldives	-	-			
	Myanmar	2008	-			
	Nepal	2007	0.19			
	Pakistan	2009	1.21			
	Philippines	2009	0.69			
	Singapore	2009	0.43			
	Sri Lanka	2009	0.32			
	Thailand	2009	0.37			
	Timor-Leste	2009	-			
	Viet Nam	2009	0.05			
EASTERN EUROPE AND CENTRAL ASIA	Armenia	2009	0.30			
	Azerbaijan	2009	0.37			
	Belarus	2009	0.35			
	Georgia	2009	1.06			
	Kazakhstan	2009	1.18			
	Kyrgyzstan	2009	2.06			
	Moldova	2009	1.16			
	Russian Federation	2008	0.19			
	Tajikistan	2009	0.88			
	Turkmenistan	-	-			
	Ukraine	2008	0.09			
	Uzbekistan	2009	2.49			

SCORECARD: HIV INVESTMENTS

Public
International
Data not available

% of HIV spending from public and international sources

		Year	Domestic priority to HIV	Total prevention	Total care and treatment	Total HIV spending
WESTERN AND CENTRAL EUROPE	Albania	-	-			
	Andorra	-	-			
	Austria	-	-			
	Belgium	2008	0.37			
	Bosnia & Herzegovina	2009	0.38			
	Bulgaria	2009	-			
	Croatia	2009	1.90			
	Cyprus	-	-			
	Czech Republic	2009	6.68			
	Denmark	-	-			
	Estonia	2008	0.33			
	Finland	-	-			
	France	-	-			
	Germany	-	-			
	Greece	2008	0.65			
	Hungary	2009	0.16			
	Iceland	-	-			
	Ireland	-	-			
	Israel	-	-			
	Italy	-	-			
	Latvia	2009	0.05			
	Liechtenstein	-	-			
	Lithuania	-	-			
	Luxembourg	2009	0.00			
	Malta	-	-			
	Monaco	-	-			
	Montenegro	2009	-			
	Netherlands	-	-			
	Norway	-	-			
	Poland	2009	0.63			
	Portugal	-	-			
	Romania	2009	2.02			
	San Marino	-	-			
	Serbia	-	-			
	Slovakia	-	-			
	Slovenia	-	-			
	Spain	2009	0.82			
	Sweden	2009	0.00			
	Switzerland	2009	0.05			
	The Former Yugoslav Republic of Macedonia	2008	2.70			
	Turkey	-	-			
	United Kingdom of Great Britain & Northern Ireland	2009	0.06			
NORTH AMERICA	Canada	-	-			
	Mexico	2009	1.09			
	United States of America	-	-			
MIDDLE EAST AND NORTH AFRICA	Algeria	2009	0.05			
	Bahrain	-	-			
	Djibouti	2009	0.00			

% of HIV spending from public and international sources

		Year	Domestic priority to HIV	Total prevention	Total care and treatment	Total HIV spending
MIDDLE EAST AND NORTH AFRICA *Continued*	Egypt	2008	0.74			
	Iran, Islamic Republic of	2008	-			
	Iraq	-	-			
	Jordan	2009	1.14			
	Kuwait	2009	0.23			
	Lebanon	-	-			
	Libyan Arab Jamahiriya	-	-			
	Morocco	2008	0.26			
	Oman	2009	-			
	Qatar	-	-			
	Saudi Arabia	2009	-			
	Somalia	2009	-			
	Sudan	-	-			
	Syrian Arab Republic	2009	-			
	Tunisia	-	-			
	United Arab Emirates	2009	-			
	Yemen	2009	-			
CARIBBEAN	Antigua & Barbuda	2009	-			
	Bahamas	2009	-			
	Barbados	2009	0.61			
	Cuba	2009	-			
	Dominica	2009	-			
	Dominican Republic	2008	0.21			
	Grenada	2009	-			
	Haiti	-	-			
	Jamaica	-	-			
	Saint Kitts & Nevis	2009	-			
	Saint Lucia	-	-			
	Saint Vincent & the Grenadines	2009	-			
	Trinidad & Tobago	2009	0.20			
CENTRAL AND SOUTH AMERICA	Argentina	2008	1.06			
	Belize	2009	0.19			
	Bolivia	2009	0.31			
	Brazil	2008	0.80			
	Chile	2008	1.07			
	Colombia	2009	0.52			
	Costa Rica	2008	1.16			
	Ecuador	2009	0.00			
	El Salvador	2008	1.22			
	Guatemala	2008	0.00			
	Guyana	-	-			
	Honduras	2008	0.84			
	Nicaragua	2008	3.96			
	Panama	2008	0.83			
	Paraguay	2009	0.68			
	Peru	2009	0.35			
	Suriname	-	-			
	Uruguay	2007	0.36			
	Venezuela	2009	0.21			

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ANNEXES

178 ANNEX 1
HIV AND AIDS ESTIMATES AND DATA, 2009 AND 2001

208 ANNEX 2
COUNTRY PROGRESS INDICATORS AND DATA, 2004 TO 2010

A1

Epidemiology data tables

The estimates and data provided in these tables relate to 2009 and 2001, unless stated otherwise. These estimates have been produced and compiled by UNAIDS/WHO. They have been shared with national AIDS programmes for review and comments but are not necessarily the official estimates used by national governments. For countries where no recent data were available or where the analysis could not be completed, country-specific estimates have not been listed in the table. In order to calculate regional totals, older data were used to produce estimates for these countries.

The estimates are given in rounded numbers. However, unrounded numbers were used in the calculation of rates and regional totals, so there may be minor discrepancies between the regional and global totals and the sum of the country figures.

The general methodology and tools used to produce the country-specific estimates in the table have been described in a series of papers in Sexually Transmitted Infections 2010: "Methods and tools for the 2009 HIV and AIDS estimates and projections, and related analyses 86 (Suppl 2)". The estimates produced by UNAIDS/WHO are based on methods and parameters that are informed by the UNAIDS Reference Group on HIV/AIDS Estimates, Modelling and Projections, described in reports available at www.epidem.org/. This group is made up of leading researchers in HIV and AIDS, epidemiology, demography and related areas. The Reference Group assesses the most recent published and unpublished work drawn from research studies in different countries. It also reviews advances in the understanding of HIV epidemics and suggests methods to improve the quality and accuracy of the estimates.

According to suggestions from the Reference Group, software has been developed to model the course of HIV epidemics and their impact. Country analysts were trained in the use of these tools during a series of workshops in 2009. These changes in procedures and assumptions and improved coordination with countries have resulted in improved estimates of HIV and AIDS for 2009. To allow readers to assess recent trends in the epidemic, we also present 2001 estimates developed using the same methodology and data as for the 2009 estimates.

The new estimates in this report are presented together with ranges, called 'plausible bounds'. These bounds reflect the certainty associated with each of the estimates. The wider the bounds are, the greater the uncertainty surrounding an estimate. The extent of uncertainty depends mainly on the type of epidemic, the quality, coverage and consistency of a country's surveillance system and, in generalized epidemics, whether or not a population-based survey with HIV testing was conducted.

Adults in this report are defined as men and women aged 15+ years, per the recommendations of the UNAIDS Reference Group on Estimates, Modelling and Projections. The group also recognizes the burden of infection and disease beyond the age of 49. However, the HIV prevalence percent (%) continues to be for adults aged 15–49 years to allow comparisons across countries.

Notes on specific indicators are listed in the following tables

1. ESTIMATED NUMBER OF PEOPLE LIVING WITH HIV, 2009 AND 2001

These estimates include all people with HIV infection, whether or not they have developed symptoms of AIDS, in 2009 and 2001.

ADULTS AND CHILDREN
Estimated number of adults and children living with HIV in 2009 and 2001.

Adults are 15 years and over. Children are defined as those aged 0–14 years.

ADULTS (15+ YEARS)
Estimated number of adults living with HIV, 2009 and 2001.

ADULT (15–49 YEARS) PREVALENCE (%)
To calculate adult HIV prevalence the estimated number of adults (15–49 years) living with HIV in 2009 was divided by the 2009 adult population (15–49 years) and similarly for 2001.

WOMEN (15+ YEARS)
Estimated number of women (15+ years) living with HIV in 2009 and 2001.

CHILDREN (0–14 YEARS)
Estimated number of children under age 15 living with HIV in 2009 and 2001.

YOUNG WOMEN (15–24 YEARS) PREVALENCE (%) 2009
Estimated percent of young women aged 15–24 who are living with HIV in 2009.

YOUNG MEN (15–24 YEARS) PREVALENCE (%) 2009
Estimated percent of young men (15–24 years) who are living with HIV in 2009.

2. NEW HIV INFECTIONS

ADULT (15–49 YEARS) INCIDENCE
To calculate the adult HIV incidence, the estimated number of adults (15–49 years) newly infected with HIV in 2009 was divided by the 2009 adult population (15–49 years) not infected at the start of 2009 and similarly for 2001.

ADULTS AND CHILDREN NEWLY INFECTED 2009
Estimated number of people newly infected with HIV in 2009.

ADULTS NEWLY INFECTED 2009
Estimated number of adults (15+ years) newly infected with HIV in 2009.

3. HIV-RELATED DEATHS: ADULTS AND CHILDREN

Estimated number of adults and children who died of HIV-related causes during 2009 and 2001.

4. ORPHANS DUE TO AIDS

ORPHANS (0–17 YEARS) CURRENTLY LIVING.

Estimated number of children (0–17 years) in 2009 and 2001 who have lost one or both parents to AIDS.

5. TRENDS OF HIV PREVALENCE IN KEY POPULATIONS AT HIGHER RISK OF HIV

These indicators are recommended for reporting against the goals of the 2001 United Nations General Assembly Special Session on HIV/AIDS in countries with low-level epidemics or concentrated HIV epidemics. In theory, assessing progress in reducing the occurrence of new infections is best done through monitoring changes in incidence over time. However, in practice, prevalence data, rather than incidence data, are what are actually available. In analysing prevalence data of key populations at higher risk of HIV, it is desirable to report on those persons who are newly initiated to behaviours that put them at risk for infection. In this round of UNGASS reporting, guidance was provided to encourage this type of reporting, though whether or not this restricted analysis was used for reporting is not represented in this table.

The specific populations at higher risk of HIV in the tables include:

- injecting drug users
- female sex workers
- men who have sex with men

ESTIMATED PEOPLE LIVING WITH HIV

	2009 Adults + Children		2001 Adults + Children		2009 Adults (15+)	
	estimate	[low – high estimate]	estimate	[low – high estimate]	estimate	[low – high estimate]
GLOBAL	**33 300 000**	**[31 400 000 – 35 300 000]**	**28 600 000**	**[27 100 000 – 30 300 000]**	**30 800 000**	**[29 200 000 – 32 600 000]**
SUB-SAHARAN AFRICA	**22 500 000**	**[20 900 000 – 24 200 000]**	**20 300 000**	**[18 900 000 – 21 700 000]**	**20 300 000**	**[19 000 000 – 21 600 000]**
Angola	200 000	[160 000 – 250 000]	140 000	[110 000 – 190 000]	180 000	[140 000 – 220 000]
Benin	60 000	[52 000 – 69 000]	50 000	[42 000 – 62 000]	55 000	[48 000 – 63 000]
Botswana	320 000	[300 000 – 350 000]	270 000	[250 000 – 290 000]	300 000	[280 000 – 330 000]
Burkina Faso	110 000	[91 000 – 140 000]	140 000	[120 000 – 180 000]	93 000	[77 000 – 120 000]
Burundi	180 000	[160 000 – 190 000]	170 000	[160 000 – 190 000]	150 000	[130 000 – 160 000]
Cameroon	610 000	[540 000 – 670 000]	480 000	[430 000 – 530 000]	550 000	[500 000 – 610 000]
Central African Republic	130 000	[110 000 – 140 000]	180 000	[160 000 – 220 000]	110 000	[98 000 – 120 000]
Chad	210 000	[170 000 – 300 000]	140 000	[99 000 – 180 000]	180 000	[150 000 – 280 000]
Comoros	<500	[<200 – <500]	<100	[<100 – <200]	<500	[<200 – <500]
Congo	77 000	[68 000 – 87 000]	69 000	[61 000 – 80 000]	69 000	[61 000 – 78 000]
Côte d'Ivoire	450 000	[390 000 – 510 000]	630 000	[560 000 – 710 000]	380 000	[340 000 – 440 000]
Democratic Republic of the Congo	…	[430 000 – 560 000]	…	[310 000 – 420 000]	…	[380 000 – 490 000]
Equatorial Guinea	20 000	[14 000 – 26 000]	5700	[3900 – 9100]	18 000	[13 000 – 23 000]
Eritrea	25 000	[18 000 – 33 000]	26 000	[19 000 – 34 000]	22 000	[16 000 – 29 000]
Ethiopia	…	…	…	…	…	…
Gabon	46 000	[37 000 – 55 000]	36 000	[29 000 – 46 000]	43 000	[35 000 – 51 000]
Gambia	18 000	[12 000 – 26 000]	4300	[2400 – 8400]	17 000	[11 000 – 24 000]
Ghana	260 000	[230 000 – 300 000]	250 000	[220 000 – 280 000]	240 000	[210 000 – 260 000]
Guinea	79 000	[65 000 – 95 000]	78 000	[57 000 – 120 000]	70 000	[58 000 – 84 000]
Guinea-Bissau	22 000	[18 000 – 26 000]	14 000	[12 000 – 17 000]	20 000	[16 000 – 24 000]
Kenya	1 500 000	[1 300 000 – 1 600 000]	1 500 000	[1 400 000 – 1 600 000]	1 300 000	[1 200 000 – 1 400 000]
Lesotho	290 000	[260 000 – 310 000]	240 000	[220 000 – 270 000]	260 000	[240 000 – 280 000]
Liberia	37 000	[32 000 – 43 000]	51 000	[36 000 – 70 000]	31 000	[27 000 – 37 000]
Madagascar	24 000	[19 000 – 30 000]	18 000	[15 000 – 22 000]	23 000	[18 000 – 28 000]
Malawi	920 000	[830 000 – 1 000 000]	860 000	[770 000 – 960 000]	800 000	[730 000 – 890 000]
Mali	76 000	[61 000 – 96 000]	89 000	[72 000 – 110 000]	66 000	[52 000 – 84 000]
Mauritania	14 000	[11 000 – 17 000]	8900	[7300 – 11 000]	13 000	[11 000 – 16 000]
Mauritius	8800	[6400 – 12 000]	3100	[2 100 – 4 200]	8700	[6300 – 12 000]
Mozambique	1 400 000	[1 200 000 – 1 500 000]	850 000	[760 000 – 940 000]	1 200 000	[1 100 000 – 1 400 000]
Namibia	180 000	[150 000 – 210 000]	160 000	[140 000 – 200 000]	160 000	[140 000 – 190 000]
Niger	61 000	[50 000 – 77 000]	53 000	[43 000 – 67 000]	53 000	[43 000 – 67 000]
Nigeria	3 300 000	[2 900 000 – 3 600 000]	2 700 000	[2 300 000 – 3 100 000]	2 900 000	[2 600 000 – 3 200 000]
Rwanda	170 000	[140 000 – 190 000]	170 000	[150 000 – 210 000]	140 000	[120 000 – 160 000]
Senegal	59 000	[50 000 – 69 000]	33 000	[29 000 – 38 000]	54 000	[46 000 – 63 000]
Sierra Leone	49 000	[40 000 – 63 000]	25 000	[13 000 – 39 000]	46 000	[38 000 – 59 000]
South Africa	5 600 000	[5 400 000 – 5 900 000]	4 600 000	[4 500 000 – 4 700 000]	5 300 000	[5 100 000 – 5 500 000]
Swaziland	180 000	[170 000 – 200 000]	130 000	[120 000 – 150 000]	170 000	[160 000 – 180 000]
Togo	120 000	[99 000 – 150 000]	100 000	[82 000 – 130 000]	110 000	[91 000 – 140 000]
Uganda	1 200 000	[1 100 000 – 1 300 000]	980 000	[870 000 – 1 100 000]	1 000 000	[940 000 – 1 100 000]
United Republic of Tanzania	1 400 000	[1 300 000 – 1 500 000]	1 400 000	[1 200 000 – 1 500 000]	1 200 000	[1 100 000 – 1 400 000]
Zambia	980 000	[890 000 – 1 100 000]	830 000	[750 000 – 900 000]	860 000	[800 000 – 940 000]
Zimbabwe	1 200 000	[1 100 000 – 1 300 000]	1 700 000	[1 600 000 – 1 800 000]	1 000 000	[950 000 – 1 200 000]

	2001 Adults (15+)		2009 Adult (15–49) prevalence percent		2001 Adult (15–49) prevalence percent	
	estimate	[low – high estimate]	estimate	[low – high estimate]	estimate	[low – high estimate]
GLOBAL	**26 700 000**	**[25 400 000 – 28 000 000]**	**0.8**	**[0.7 – 0.8]**	**0.8**	**[0.7 – 0.8]**
SUB-SAHARAN AFRICA	**18 500 000**	**[17 500 000 – 19 700 000]**	**5.0**	**[4.7 – 5.2]**	**5.9**	**[5.6 – 6.1]**
Angola	130 000	[100 000 – 170 000]	2.0	[1.6 – 2.4]	1.9	[1.4 – 2.4]
Benin	47 000	[40 000 – 56 000]	1.2	[1.0 – 1.3]	1.4	[1.2 – 1.7]
Botswana	260 000	[240 000 – 280 000]	24.8	[23.8 – 25.8]	26.3	[25.5 – 27.4]
Burkina Faso	120 000	[99 000 – 150 000]	1.2	[1.0 – 1.5]	2.1	[1.7 – 2.5]
Burundi	150 000	[140 000 – 160 000]	3.3	[2.9 – 3.5]	5.0	[4.8 – 5.1]
Cameroon	440 000	[400 000 – 490 000]	5.3	[4.9 – 5.8]	5.5	[5.1 – 6.0]
Central African Republic	170 000	[150 000 – 200 000]	4.7	[4.2 – 5.2]	8.9	[8.1 – 10.6]
Chad	130 000	[91 000 – 170 000]	3.4	[2.8 – 5.1]	3.2	[2.3 – 4.0]
Comoros	<100	[<100 – <100]	0.1	[<0.1 – 0.1]	<0.1	[<0.1 – <0.1]
Congo	61 000	[54 000 – 71 000]	3.4	[3.1 – 3.8]	3.8	[3.4 – 4.4]
Côte d'Ivoire	570 000	[510 000 – 640 000]	3.4	[3.1 – 3.9]	6.5	[5.9 – 7.1]
Democratic Republic of the Congo	…	[270 000 – 360 000]	…	[1.2 – 1.6]	…	[1.1 – 1.5]
Equatorial Guinea	5400	[3700 – 8700]	5.0	[3.5 – 6.6]	1.9	[1.3 – 3.1]
Eritrea	23 000	[18 000 – 31 000]	0.8	[0.6 – 1.0]	1.2	[0.9 – 1.5]
Ethiopia	…	…	…	…	…	…
Gabon	34 000	[27 000 – 43 000]	5.2	[4.2 – 6.2]	5.3	[4.3 – 6.8]
Gambia	3900	[2200 – 7500]	2.0	[1.3 – 2.9]	0.6	[0.3 – 1.1]
Ghana	230 000	[200 000 – 260 000]	1.8	[1.6 – 2.0]	2.3	[2.0 – 2.5]
Guinea	70 000	[52 000 – 100 000]	1.3	[1.1 – 1.6]	1.7	[1.2 – 2.4]
Guinea-Bissau	13 000	[11 000 – 16 000]	2.5	[2.0 – 3.0]	2.0	[1.7 – 2.4]
Kenya	1 300 000	[1 200 000 – 1 400 000]	6.3	[5.8 – 6.5]	8.4	[8.1 – 9.0]
Lesotho	230 000	[210 000 – 250 000]	23.6	[22.3 – 25.2]	24.5	[23.1 – 26.1]
Liberia	46 000	[33 000 – 63 000]	1.5	[1.3 – 1.8]	3.1	[2.2 – 4.1]
Madagascar	17 000	[14 000 – 20 000]	0.2	[0.2 – 0.3]	0.2	[0.2 – 0.3]
Malawi	760 000	[690 000 – 840 000]	11.0	[10.0 – 12.1]	13.8	[12.7 – 15.1]
Mali	80 000	[66 000 – 98 000]	1.0	[0.8 – 1.3]	1.6	[1.3 – 1.9]
Mauritania	8600	[7100 – 11 000]	0.7	[0.6 – 0.9]	0.6	[0.5 – 0.7]
Mauritius	3100	[2100 – 4200]	1.0	[0.7 – 1.3]	0.4	[0.3 – 0.5]
Mozambique	800 000	[720 000 – 870 000]	11.5	[10.6 – 12.2]	9.4	[8.7 – 10.3]
Namibia	150 000	[130 000 – 180 000]	13.1	[11.1 – 15.5]	16.1	[13.6 – 19.0]
Niger	49 000	[40 000 – 61 000]	0.8	[0.7 – 1.0]	1.0	[0.8 – 1.3]
Nigeria	2 400 000	[2 100 000 – 2 700 000]	3.6	[3.3 – 4.0]	3.8	[3.4 – 4.2]
Rwanda	150 000	[140 000 – 170 000]	2.9	[2.5 – 3.3]	3.7	[3.4 – 4.4]
Senegal	31 000	[26 000 – 35 000]	0.9	[0.7 – 1.0]	0.6	[0.6 – 0.7]
Sierra Leone	24 000	[13 000 – 38 000]	1.6	[1.4 – 2.1]	1.1	[0.6 – 1.7]
South Africa	4 400 000	[4 300 000 – 4 500 000]	17.8	[17.2 – 18.3]	17.1	[16.7 – 17.5]
Swaziland	130 000	[120 000 – 140 000]	25.9	[24.9 – 27.0]	23.6	[22.4 – 24.8]
Togo	98 000	[76 000 – 120 000]	3.2	[2.5 – 3.8]	3.6	[2.8 – 4.3]
Uganda	840 000	[760 000 – 920 000]	6.5	[5.9 – 6.9]	7.0	[6.4 – 7.4]
United Republic of Tanzania	1 200 000	[1 100 000 – 1 300 000]	5.6	[5.3 – 6.1]	7.1	[6.7 – 7.7]
Zambia	730 000	[670 000 – 790 000]	13.5	[12.8 – 14.1]	14.3	[13.7 – 15.0]
Zimbabwe	1 500 000	[1 400 000 – 1 700 000]	14.3	[13.4 – 15.4]	23.7	[22.8 – 24.9]

A1

ESTIMATED PEOPLE LIVING WITH HIV

	2009 Women (15+)		2001 Women (15+)		2009 Children (0–14)	
	estimate	[low – high estimate]	estimate	[low – high estimate]	estimate	[low – high estimate]
GLOBAL	**15 900 000**	**[14 800 000 – 17 200 000]**	**13 600 000**	**[12 900 000 – 14 700 000]**	**2 500 000**	**[1 600 000 – 3 400 000]**
SUB-SAHARAN AFRICA	**12 100 000**	**[11 100 000 – 13 200 000]**	**10 900 000**	**[10 100 000 – 11 700 000]**	**2 300 000**	**[1 400 000 – 3 100 000]**
Angola	110 000	[85 000 – 130 000]	77 000	[59 000 – 100 000]	22 000	[12 000 – 35 000]
Benin	32 000	[27 000 – 37 000]	27 000	[23 000 – 33 000]	5400	[2900 – 7800]
Botswana	170 000	[160 000 – 190 000]	150 000	[140 000 – 160 000]	16 000	[9900 – 20 000]
Burkina Faso	56 000	[44 000 – 70 000]	73 000	[60 000 – 92 000]	17 000	[8100 – 25 000]
Burundi	90 000	[78 000 – 100 000]	90 000	[81 000 – 99 000]	28 000	[17 000 – 40 000]
Cameroon	320 000	[290 000 – 370 000]	260 000	[230 000 – 290 000]	54 000	[29 000 – 78 000]
Central African Republic	67 000	[57 000 – 78 000]	99 000	[86 000 – 120 000]	17 000	[8200 – 25 000]
Chad	110 000	[88 000 – 160 000]	76 000	[54 000 – 98 000]	23 000	[12 000 – 35 000]
Comoros	<100	[<100 – <100]	<100	[<100 – <100]	…	…
Congo	40 000	[35 000 – 47 000]	36 000	[31 000 – 42 000]	7900	[4000 – 12 000]
Côte d'Ivoire	220 000	[190 000 – 260 000]	320 000	[280 000 – 370 000]	63 000	[32 000 – 91 000]
Democratic Republic of the Congo	…	[220 000 – 300 000]	…	[160 000 – 220 000]	…	[33 000 – 86 000]
Equatorial Guinea	11 000	[7600 – 14 000]	3100	[2100 – 5100]	1600	[<1000 – 2600]
Eritrea	13 000	[9800 – 18 000]	14 000	[11 000 – 19 000]	3100	[1500 – 5000]
Ethiopia	…	…	…	…	…	…
Gabon	25 000	[20 000 – 30 000]	20 000	[16 000 – 25 000]	3200	[1700 – 4800]
Gambia	9700	[6200 – 14 000]	2300	[1300 – 4400]	…	…
Ghana	140 000	[120 000 – 160 000]	130 000	[120 000 – 150 000]	27 000	[14 000 – 41 000]
Guinea	41 000	[34 000 – 50 000]	41 000	[30 000 – 61 000]	9000	[4300 – 14 000]
Guinea-Bissau	12 000	[9300 – 14 000]	7800	[6400 – 9300]	2100	[1100 – 3200]
Kenya	760 000	[650 000 – 860 000]	780 000	[700 000 – 870 000]	180 000	[98 000 – 260 000]
Lesotho	160 000	[140 000 – 180 000]	140 000	[130 000 – 160 000]	28 000	[17 000 – 37 000]
Liberia	19 000	[16 000 – 22 000]	27 000	[19 000 – 37 000]	6100	[3000 – 9900]
Madagascar	7300	[5800 – 9000]	5400	[4500 – 6400]	…	…
Malawi	470 000	[410 000 – 530 000]	440 000	[390 000 – 500 000]	120 000	[68 000 – 170 000]
Mali	40 000	[31 000 – 52 000]	48 000	[40 000 – 59 000]	…	…
Mauritania	4000	[3200 – 4900]	2600	[2100 – 3200]	…	…
Mauritius	2500	[1800 – 3400]	<1000	[<1000 – 1200]	…	…
Mozambique	760 000	[680 000 – 840 000]	470 000	[430 000 – 530 000]	130 000	[70 000 – 180 000]
Namibia	95 000	[79 000 – 110 000]	90 000	[76 000 – 110 000]	16 000	[9100 – 23 000]
Niger	28 000	[23 000 – 36 000]	25 000	[20 000 – 32 000]	…	…
Nigeria	1 700 000	[1 500 000 – 1 900 000]	1 400 000	[1 200 000 – 1 600 000]	360 000	[180 000 – 520 000]
Rwanda	88 000	[76 000 – 98 000]	91 000	[83 000 – 110 000]	22 000	[11 000 – 34 000]
Senegal	32 000	[27 000 – 38 000]	18 000	[16 000 – 21 000]	…	…
Sierra Leone	28 000	[22 000 – 35 000]	14 000	[7500 – 23 000]	2900	[1500 – 4500]
South Africa	3 300 000	[3 000 000 – 3 500 000]	2 600 000	[2 500 000 – 2 700 000]	330 000	[190 000 – 440 000]
Swaziland	100 000	[91 000 – 110 000]	74 000	[69 000 – 82 000]	14 000	[8300 – 18 000]
Togo	67 000	[54 000 – 83 000]	57 000	[45 000 – 72 000]	11 000	[3700 – 18 000]
Uganda	610 000	[540 000 – 680 000]	490 000	[430 000 – 560 000]	150 000	[80 000 – 210 000]
United Republic of Tanzania	730 000	[650 000 – 830 000]	720 000	[640 000 – 800 000]	160 000	[83 000 – 240 000]
Zambia	490 000	[440 000 – 550 000]	420 000	[380 000 – 470 000]	120 000	[64 000 – 160 000]
Zimbabwe	620 000	[530 000 – 710 000]	890 000	[800 000 – 990 000]	150 000	[92 000 – 200 000]

	2001 Children (0–14)		2009 Young women (15–24) prevalence (%)		2009 Young men (15–24) prevalence (%)	
	estimate	[low – high estimate]	estimate	[low – high estimate]	estimate	[low – high estimate]
GLOBAL	**2 000 000**	**[1 200 000 – 2 700 000]**	**0.6**	**[0.5 – 0.7]**	**0.3**	**[0.2 – 0.3]**
SUB-SAHARAN AFRICA	**1 800 000**	**[1 100 000 – 2 500 000]**	**3.4**	**[3.0 – 4.2]**	**1.4**	**[1.2 – 1.7]**
Angola	14 000	[6900 – 24 000]	1.6	[1.1 – 2.2]	0.6	[0.4 – 0.9]
Benin	3100	[1600 – 6600]	0.7	[0.5 – 1.1]	0.3	[0.2 – 0.4]
Botswana	14 000	[7800 – 19 000]	11.8	[9.0 – 15.9]	5.2	[3.7 – 7.3]
Burkina Faso	24 000	[12 000 – 37 000]	0.8	[0.6 – 1.2]	0.5	[0.3 – 0.6]
Burundi	26 000	[16 000 – 36 000]	2.1	[1.6 – 2.7]	1.0	[0.8 – 1.2]
Cameroon	33 000	[18 000 – 50 000]	3.9	[3.1 – 5.4]	1.6	[1.2 – 2.1]
Central African Republic	17 000	[8600 – 25 000]	2.2	[1.4 – 3.1]	1.0	[0.6 – 1.4]
Chad	13 000	[6400 – 22 000]	2.5	[1.7 – 5.2]	1.0	[0.7 – 2.0]
Comoros	…	…	<0.1	[<0.1 – <0.1]	<0.1	[<0.1 – 0.1]
Congo	8300	[4200 – 12 000]	2.6	[2.1 – 3.6]	1.2	[0.9 – 1.6]
Côte d'Ivoire	59 000	[31 000 – 95 000]	1.5	[1.1 – 2.3]	0.7	[0.5 – 1.1]
Democratic Republic of the Congo	…	[26 000 – 70 000]	…	[0.9 – 1.5]	…	[0.4 – 0.6]
Equatorial Guinea	<500	[<200 – <1000]	5.0	[2.7 – 7.9]	1.9	[1.0 – 3.2]
Eritrea	2300	[1200 – 4100]	0.4	[0.2 – 0.7]	0.2	[0.1 – 0.3]
Ethiopia	…	…	…	…	…	…
Gabon	2000	[1200 – 3100]	3.5	[2.1 – 5.2]	1.4	[0.8 – 2.0]
Gambia	…	…	2.4	[1.4 – 4.0]	0.9	[0.5 – 1.6]
Ghana	18 000	[9900 – 29 000]	1.3	[0.9 – 1.8]	0.5	[0.4 – 0.7]
Guinea	8400	[3500 – 18 000]	0.9	[0.6 – 1.3]	0.4	[0.3 – 0.6]
Guinea-Bissau	<1000	[<1000 – 1400]	2.0	[1.5 – 2.9]	0.8	[0.5 – 1.1]
Kenya	170 000	[98 000 – 230 000]	4.1	[3.0 – 5.4]	1.8	[1.3 – 2.4]
Lesotho	18 000	[11 000 – 23 000]	14.2	[11.2 – 19.2]	5.4	[4.1 – 7.4]
Liberia	4600	[2100 – 8400]	0.7	[0.2 – 1.2]	0.3	[0.1 – 0.5]
Madagascar	…	…	0.1	[<0.1 – 0.1]	0.1	[0.1 – 0.4]
Malawi	100 000	[57 000 – 140 000]	6.8	[5.3 – 9.2]	3.1	[2.3 – 4.2]
Mali	…	…	0.5	[0.2 – 0.9]	0.2	[0.1 – 0.4]
Mauritania	…	…	0.3	[0.1 – 0.5]	0.4	[0.2 – 1.4]
Mauritius	…	…	0.2	[0.1 – 0.3]	0.3	[0.2 – 0.4]
Mozambique	53 000	[30 000 – 77 000]	8.6	[7.0 – 12.1]	3.1	[2.4 – 4.4]
Namibia	7900	[4400 – 11 000]	5.8	[3.7 – 8.6]	2.3	[1.3 – 3.6]
Niger	…	…	0.5	[0.4 – 0.6]	0.2	[0.2 – 0.3]
Nigeria	270 000	[130 000 – 410 000]	2.9	[2.3 – 3.9]	1.2	[0.9 – 1.6]
Rwanda	23 000	[11 000 – 38 000]	1.9	[1.3 – 2.3]	1.3	[0.9 – 1.6]
Senegal	…	…	0.7	[0.5 – 1.0]	0.3	[0.2 – 0.4]
Sierra Leone	<1000	[<500 – 2100]	1.5	[0.9 – 2.5]	0.6	[0.3 – 1.0]
South Africa	170 000	[97 000 – 220 000]	13.6	[12.3 – 15.0]	4.5	[4.1 – 5.0]
Swaziland	7600	[4700 – 10 000]	15.6	[12.6 – 21.3]	6.5	[4.8 – 8.8]
Togo	6700	[2700 – 11 000]	2.2	[1.5 – 3.1]	0.9	[0.6 – 1.2]
Uganda	150 000	[84 000 – 210 000]	4.8	[4.0 – 6.4]	2.3	[1.8 – 2.8]
United Republic of Tanzania	150 000	[83 000 – 210 000]	3.9	[3.1 – 5.3]	1.7	[1.3 – 2.3]
Zambia	100 000	[57 000 – 140 000]	8.9	[7.3 – 12.0]	4.2	[3.2 – 5.5]
Zimbabwe	160 000	[100 000 – 210 000]	6.9	[5.3 – 9.3]	3.3	[2.5 – 4.4]

A1

ESTIMATED NEW HIV INFECTIONS

	2009 Adult (15–49) incidence rate		2001 Adult (15–49) incidence rate		2009 Adults + children newly infected	
	estimate	[low – high estimate]	estimate	[low – high estimate]	estimate	[low – high estimate]
GLOBAL	**<0.10**	**[<0.10 – <0.10]**	**<0.10**	**[<0.10 – <0.10]**	**2 600 000**	**[2 300 000 – 2 800 000]**
SUB-SAHARAN AFRICA	**0.41**	**[0.36 – 0.46]**	**0.61**	**[0.54 – 0.65]**	**1 800 000**	**[1 600 000 – 2 000 000]**
Angola	0.21	[0.14 – 0.28]	0.22	[0.17 – 0.28]	22 000	[16 000 – 29 000]
Benin	0.10	[<0.10 – 0.13]	0.11	[<0.10 – 0.15]	4900	[3400 – 6500]
Botswana	1.56	[1.11 – 2.27]	3.03	[2.64 – 3.48]	14 000	[10 000 – 20 000]
Burkina Faso	<0.10	[<0.10 – 0.11]	0.11	[<0.10 – 0.16]	6800	[4300 – 11 000]
Burundi	…	[0.17 – 0.28]	…	[0.34 – 0.47]	…	[11 000 – 17 000]
Cameroon	0.53	[0.43 – 0.61]	0.59	[0.50 – 0.69]	58 000	[48 000 – 67 000]
Central African Republic	0.17	[<0.10 – 0.25]	0.56	[0.43 – 0.69]	5200	[3100 – 7100]
Chad	…	[0.15 – 0.87]	…	[0.39 – 0.55]	…	[12 000 – 47 000]
Comoros	…	[<0.10 – <0.10]	…	[<0.10 – <0.10]	…	[<100 – <100]
Congo	0.28	[0.23 – 0.35]	0.43	[0.36 – 0.51]	6500	[5200 – 7900]
Côte d'Ivoire	0.11	[<0.10 – 0.20]	0.39	[0.30 – 0.51]	17 000	[11 000 – 27 000]
Democratic Republic of the Congo	…	[0.13 – 0.18]	…	[0.13 – 0.18]	…	[49 000 – 67 000]
Equatorial Guinea	…	[0.23 – 1.20]	…	[0.38 – 0.83]	…	[1200 – 4500]
Eritrea	<0.10	[<0.10 – <0.10]	<0.10	[<0.10 – 0.14]	1300	[<1000 – 2300]
Ethiopia	…	…	…	…	…	…
Gabon	0.43	[0.10 – 0.61]	0.63	[0.46 – 0.85]	3600	[1300 – 5000]
Gambia	…	[0.21 – 0.83]	…	[<0.10 – 0.22]	…	[1900 – 6400]
Ghana	0.15	[0.12 – 0.19]	0.18	[0.15 – 0.22]	22 000	[17 000 – 27 000]
Guinea	0.10	[<0.10 – 0.13]	0.15	[0.11 – 0.21]	6200	[3800 – 8400]
Guinea-Bissau	0.21	[0.14 – 0.32]	0.32	[0.24 – 0.40]	2100	[1400 – 2900]
Kenya	0.53	[0.34 – 0.70]	0.55	[0.38 – 0.76]	110 000	[81 000 – 150 000]
Lesotho	2.58	[2.18 – 3.04]	2.88	[2.53 – 3.40]	23 000	[20 000 – 27 000]
Liberia	…	[<0.10 – 0.17]	…	[<0.10 – 0.22]	…	[<1000 – 3800]
Madagascar	…	[<0.10 – <0.10]	…	[<0.10 – <0.10]	…	[1800 – 3700]
Malawi	0.95	[0.67 – 1.23]	1.35	[1.15 – 1.61]	73 000	[57 000 – 91 000]
Mali	<0.10	[<0.10 – 0.12]	<0.10	[<0.10 – 0.14]	4600	[1300 – 8300]
Mauritania	…	[<0.10 – 0.11]	…	[<0.10 – 0.11]	…	[<1000 – 1900]
Mauritius	…	[<0.10 – 0.22]	…	[<0.10 – 0.12]	…	[<1000 – 1800]
Mozambique	1.19	[0.99 – 1.35]	1.77	[1.56 – 1.96]	130 000	[110 000 – 150 000]
Namibia	0.43	[<0.10 – 0.93]	2.29	[1.77 – 2.90]	5800	[2100 – 11 000]
Niger	<0.10	[<0.10 – <0.10]	<0.10	[<0.10 – <0.12]	6100	[4300 – 8400]
Nigeria	0.38	[0.33 – 0.44]	0.39	[0.33 – 0.47]	340 000	[280 000 – 390 000]
Rwanda	0.18	[<0.10 – 0.32]	0.34	[0.26 – 0.41]	8800	[3800 – 15 000]
Senegal	<0.10	[<0.10 – 0.11]	0.10	[<0.10 – 0.12]	6000	[4100 – 7900]
Sierra Leone	0.14	[<0.10 – 0.35]	0.22	[0.16 – 0.29]	4700	[3000 – 9900]
South Africa	1.49	[1.27 – 1.76]	2.35	[2.14 – 2.60]	390 000	[340 000 – 440 000]
Swaziland	2.66	[2.19 – 3.14]	4.07	[3.72 – 4.46]	14 000	[12 000 – 16 000]
Togo	0.27	[0.15 – 0.39]	0.37	[0.28 – 0.48]	10 000	[6200 – 14 000]
Uganda	0.74	[0.62 – 0.85]	0.71	[0.61 – 0.82]	120 000	[100 000 – 140 000]
United Republic of Tanzania	0.45	[0.34 – 0.57]	0.64	[0.55 – 0.76]	100 000	[82 000 – 130 000]
Zambia	1.17	[0.96 – 1.40]	1.72	[1.52 – 1.95]	76 000	[62 000 – 89 000]
Zimbabwe	0.84	[0.54 – 1.19]	1.94	[1.62 – 2.36]	62 000	[45 000 – 80 000]

ESTIMATED AIDS-RELATED DEATHS

	2009 Adults newly infected		2009 AIDS-related deaths in adults + children		2001 AIDS-related deaths in adults + children	
	estimate	[low – high estimate]	estimate	[low – high estimate]	estimate	[low – high estimate]
GLOBAL	**2 200 000**	**[2 000 000 – 2 400 000]**	**1 800 000**	**[1 600 000 – 2 100 000]**	**1 800 000**	**[1 600 000 – 2 100 000]**
SUB-SAHARAN AFRICA	**1 500 000**	**[1 300 000 – 1 600 000]**	**1 300 000**	**[1 100 000 – 1 500 000]**	**1 400 000**	**[1 200 000 – 1 600 000]**
Angola	17 000	[12 000 – 23 000]	11 000	[7700 – 16 000]	10 000	[6500 – 14 000]
Benin	4000	[2700 – 5400]	2700	[1800 – 3700]	3100	[1900 – 5200]
Botswana	13 000	[9400 – 19 000]	5800	[2300 – 14 000]	15 000	[12 000 – 18 000]
Burkina Faso	5000	[2800 – 7900]	7100	[4800 – 9700]	15 000	[11 000 – 19 000]
Burundi	…	[7000 – 11 000]	15 000	[12 000 – 17 000]	14 000	[12 000 – 17 000]
Cameroon	48 000	[39 000 – 56 000]	37 000	[29 000 – 46 000]	31 000	[25 000 – 37 000]
Central African Republic	3600	[1800 – 5200]	11 000	[8800 – 13 000]	15 000	[12 000 – 20 000]
Chad	…	[8000 – 39 000]	11 000	[8100 – 15 000]	8900	[5400 – 13 000]
Comoros	…	[<100 – <100]	<100	[<100 – <100]	<100	[<100 – <100]
Congo	5100	[4100 – 6300]	5100	[4100 – 6400]	5800	[4800 – 7100]
Côte d'Ivoire	11 000	[5700 – 19 000]	36 000	[29 000 – 44 000]	51 000	[37 000 – 66 000]
Democratic Republic of the Congo	…	[38 000 – 52 000]	…	[26 000 – 40 000]	…	[24 000 – 34 000]
Equatorial Guinea	…	[<1000 – 3800]	<1000	[<1000 – 1400]	<500	[<200 – <500]
Eritrea	<1000	[<500 – 1700]	1700	[1000 – 2500]	1800	[1200 – 2600]
Ethiopia	…	…	…	…	…	…
Gabon	3100	[<1000 – 4300]	2400	[1600 – 3400]	2000	[1500 – 2800]
Gambia	…	[1600 – 5800]	<1000	[<500 – 1200]	<500	[<200 – <1000]
Ghana	18 000	[14 000 – 23 000]	18 000	[14 000 – 22 000]	16 000	[13 000 – 21 000]
Guinea	4800	[2600 – 6600]	4700	[3100 – 6900]	6300	[3000 – 14 000]
Guinea-Bissau	1600	[1100 – 2300]	1200	[<1000 – 1600]	<1000	[<1000 – <1000]
Kenya	92 000	[61 000 – 120 000]	80 000	[61 000 – 99 000]	120 000	[100 000 – 150 000]
Lesotho	20 000	[17 000 – 24 000]	14 000	[10 000 – 18 000]	14 000	[12 000 – 18 000]
Liberia	…	[<200 – 3100]	3600	[2800 – 4600]	3900	[2300 – 6200]
Madagascar	…	[1600 – 3400]	1700	[1400 – 2000]	1300	[1100 – 1600]
Malawi	56 000	[40 000 – 72 000]	51 000	[38 000 – 67 000]	68 000	[57 000 – 81 000]
Mali	3400	[<500 – 6800]	4400	[3000 – 6100]	7200	[4200 – 11 000]
Mauritania	…	[<1000 – 1700]	<1000	[<1000 – 1000]	<500	[<500 – <1000]
Mauritius	…	[<1000 – 1800]	<500	[<500 – <1000]	<200	[<100 – <200]
Mozambique	110 000	[91 000 – 120 000]	74 000	[57 000 – 92 000]	43 000	[34 000 – 53 000]
Namibia	4400	[<1000 – 9300]	6700	[2500 – 11 000]	8100	[6200 – 11 000]
Niger	4600	[3200 – 6100]	4300	[3300 – 5600]	3300	[2500 – 4500]
Nigeria	270 000	[230 000 – 310 000]	220 000	[170 000 – 260 000]	210 000	[130 000 – 260 000]
Rwanda	6000	[1100 – 12 000]	4100	[<1000 – 9700]	15 000	[12 000 – 21 000]
Senegal	4800	[3100 – 6300]	2600	[1900 – 3500]	1800	[1500 – 2300]
Sierra Leone	3900	[2300 – 8900]	2800	[2100 – 3700]	<1000	[<500 – 2200]
South Africa	340 000	[300 000 – 400 000]	310 000	[260 000 – 390 000]	220 000	[180 000 – 260 000]
Swaziland	12 000	[10 000 – 14 000]	7000	[4600 – 10 000]	6800	[5700 – 8400]
Togo	8700	[5100 – 12 000]	7700	[5300 – 10 000]	6400	[4600 – 8400]
Uganda	100 000	[84 000 – 120 000]	64 000	[49 000 – 80 000]	89 000	[75 000 – 100 000]
United Republic of Tanzania	88 000	[66 000 – 110 000]	86 000	[69 000 – 110 000]	110 000	[94 000 – 130 000]
Zambia	59 000	[48 000 – 71 000]	45 000	[30 000 – 60 000]	68 000	[57 000 – 78 000]
Zimbabwe	48 000	[31 000 – 66 000]	83 000	[70 000 – 97 000]	130 000	[110 000 – 160 000]

A1

ESTIMATED ORPHANS DUE TO AIDS

HIV PREVALENCE (%) IN MOST-AT-RISK GROUPS IN CAPITAL CITY

	2009 Orphans (0–17) currently living		2001 Orphans (0–17)		Injecting drug users		Female sex workers		Men who have sex with men	
	estimate	[low – high estimate]	estimate	[low – high estimate]	Year	HIV (%)	Year	HIV (%)	Year	HIV (%)
GLOBAL	**16 600 000**	**[14 400 000 – 18 800 000]**	**10 000 000**	**[7 900 000 – 12 500 000]**	**…**	**…**	**…**	**…**	**…**	**…**
SUB-SAHARAN AFRICA	**14 800 000**	**[12 800 000 – 17 000 000]**	**8 900 000**	**[6 900 000 – 11 200 000]**	**…**	**…**	**…**	**…**	**…**	**…**
Angola	140 000	[95 000 – 200 000]	65 000	[30 000 – 110 000]	…	…	…	…	…	…
Benin	30 000	[18 000 – 53 000]	13 000	[5100 – 100 000]	2009	4.2	2009	24.7	…	…
Botswana	93 000	[71 000 – 120 000]	56 000	[45 000 – 72 000]	…	…	…	…	…	…
Burkina Faso	140 000	[100 000 – 170 000]	140 000	[100 000 – 190 000]	…	…	2005	16.3	…	…
Burundi	200 000	[170 000 – 230 000]	130 000	[110 000 – 160 000]	…	…	2007	39.8	…	…
Cameroon	330 000	[270 000 – 420 000]	140 000	[91 000 – 230 000]	…	…	2009	35.5	…	…
Central African Republic	140 000	[110 000 – 180 000]	82 000	[54 000 – 120 000]	…	…	…	…	…	…
Chad	120 000	[79 000 – 170 000]	50 000	[26 000 – 91 000]	…	…	2009	20.0	…	…
Comoros	<100	[<100 – <100]	<100	[<100 – <100]	…	…	…	…	…	…
Congo	51 000	[41 000 – 66 000]	51 000	[34 000 – 73 000]	…	…	…	…	…	…
Côte d'Ivoire	440 000	[330 000 – 550 000]	270 000	[170 000 – 440 000]	…	…	…	…	…	…
Democratic Republic of the Congo	…	[350 000 – 510 000]	…	[290 000 – 450 000]	…	…	…	…	…	…
Equatorial Guinea	4100	[2500 – 6400]	<1000	[<500 – <1000]	…	…	…	…	…	…
Eritrea	19 000	[12 000 – 28 000]	8 700	[4100 – 18 000]	…	…	2008	7.8	…	…
Ethiopia	…	…	…	…	…	…	…	…	…	…
Gabon	18 000	[12 000 – 25 000]	7 600	[5200 – 11 000]	…	…	2010	23.6	…	…
Gambia	2800	[1400 – 6500]	<1000	[<500 – 6400]	…	…	…	…	…	…
Ghana	160 000	[120 000 – 210 000]	60 000	[42 000 – 120 000]	…	…	2009	25.0	…	…
Guinea	59 000	[34 000 – 120 000]	40 000	[12 000 – 100 000]	…	…	2008	32.7	…	…
Guinea-Bissau	9700	[7700 – 12 000]	2800	[1800 – 3900]	…	…	2009	39.6	…	…
Kenya	1 200 000	[980 000 – 1 400 000]	820 000	[640 000 – 1 100 000]	…	…	…	…	…	…
Lesotho	130 000	[110 000 – 160 000]	52 000	[41 000 – 68 000]	…	…	…	…	…	…
Liberia	52 000	[34 000 – 76 000]	19 000	[9900 – 33 000]	…	…	…	…	…	…
Madagascar	11 000	[9 300 – 14 000]	9500	[7600 – 12 000]	…	…	2007	0.5	…	…
Malawi	650 000	[540 000 – 780 000]	430 000	[330 000 – 550 000]	…	…	2006	70.7	…	…
Mali	59 000	[36 000 – 93 000]	35 000	[15 000 – 89 000]	…	…	2006	35.3	…	…
Mauritania	3600	[2700 – 4800]	1500	[<1000 – 2200]	…	…	2007	7.6	…	…
Mauritius	<1000	[<500 – <1000]	<200	[<100 – <500]	2009	47.1	…	…	…	…
Mozambique	670 000	…	220 000	…	…	…	…	…	…	…
Namibia	70 000	[50 000 – 96 000]	30 000	[22 000 – 42 000]	…	…	…	…	…	…
Niger	57 000	[44 000 – 73 000]	17 000	[12 000 – 24 000]	…	…	2009	35.6	…	…
Nigeria	2 500 000	[1 800 000 – 3 100 000]	1 300 000	[420 000 – 1 900 000]	2007	5.6	2007	32.7	2007	13.5
Rwanda	130 000	[98 000 – 180 000]	170 000	[140 000 – 250 000]	…	…	…	…	…	…
Senegal	19 000	[15 000 – 25 000]	8700	[6600 – 11 000]	…	…	2006	19.8	2007	21.8
Sierra Leone	15 000	[9 200 – 26 000]	2100	[1000 – 7000]	…	…	2005	8.5	…	…
South Africa	1 900 000	[1 600 000 – 2 400 000]	580 000	[460 000 – 750 000]	…	…	…	…	2008	13.2
Swaziland	69 000	[55 000 – 86 000]	29 000	[23 000 – 37 000]	…	…	…	…	…	…
Togo	66 000	[47 000 – 89 000]	25 000	[12 000 – 45 000]	…	…	2005	44.5	…	…
Uganda	1 200 000	[1 000 000 – 1 400 000]	1 100 000	[860 000 – 1 400 000]	…	…	…	…	…	…
United Republic of Tanzania	1 300 000	[1 100 000 – 1 500 000]	840 000	[690 000 – 1 000 000]	…	…	…	…	…	…
Zambia	690 000	[570 000 – 810 000]	580 000	[410 000 – 770 000]	…	…	…	…	…	…
Zimbabwe	1 000 000	[910 000 – 1 200 000]	760 000	[630 000 – 940 000]	…	…	…	…	…	…

ESTIMATED PEOPLE LIVING WITH HIV

	2009 Adults + Children		2001 Adults + Children		2009 Adults (15+)	
	estimate	[low – high estimate]	estimate	[low – high estimate]	estimate	[low – high estimate]
EAST ASIA	**770 000**	**[560 000 – 1 000 000]**	**350 000**	**[250 000 – 480 000]**	**760 000**	**[560 000 – 1 000 000]**
China	740 000	[540 000 – 1 000 000]	…	[240 000 – 470 000]	730 000	[540 000 – 1 000 000]
Democratic People's Republic of Korea	…	…	…	…	…	…
Japan	8100	[6300 – 10 000]	6500	[5200 – 8100]	8100	[6300 – 10 000]
Mongolia	<500	[<500 – <1000]	<100	[<100 – <200]	<500	[<500 – <1000]
Republic of Korea	9500	[7000 – 13 000]	5200	[4100 – 6700]	9500	[7000 – 13 000]
OCEANIA	**57 000**	**[50 000 – 64 000]**	**29 000**	**[23 000 – 35 000]**	**54 000**	**[47 000 – 61 000]**
Australia	20 000	[15 000 – 25 000]	13 000	[10 000 – 16 000]	20 000	[15 000 – 25 000]
Fiji	<1000	[<500 – <1000]	<200	[<100 – <500]	<1000	[<500 – <1000]
New Zealand	2500	[2000 – 3200]	1600	[1400 – 2100]	2400	[2000 – 3200]
Papua New Guinea	34 000	[30 000 – 39 000]	14 000	[9400 – 21 000]	31 000	[27 000 – 35 000]
SOUTH AND SOUTH-EAST ASIA	**4 100 000**	**[3 700 000 – 4 600 000]**	**3 800 000**	**[3 500 000 – 4 200 000]**	**4 000 000**	**[3 600 000 – 4 400 000]**
Bangladesh	6300	[5200 – 8300]	1100	[<100 – 2400]	6200	[5100 – 8100]
Bhutan	<1000	[<1000 – 1500]	<200	[<100 – <500]	<1000	[<1000 – 1500]
Cambodia	63 000	[42 000 – 90 000]	92 000	[63 000 – 130 000]	56 000	[38 000 – 82 000]
India	2 400 000	[2 100 000 – 2 800 000]	2 500 000	[2 300 000 – 2 900 000]	2 300 000	[2 000 000 – 2 600 000]
Indonesia	310 000	[200 000 – 460 000]	11 000	[<100 – 34 000]	300 000	[200 000 – 460 000]
Lao People's Democratic Republic	8500	[6000 – 13 000]	<1000	[<100 – 1700]	8300	[5800 – 12 000]
Malaysia	100 000	[83 000 – 120 000]	67 000	[57 000 – 80 000]	100 000	[83 000 – 120 000]
Maldives	<100	[<100 – <100]	<100	[<100 – <100]	<100	[<100 – <100]
Myanmar	240 000	[200 000 – 290 000]	250 000	[190 000 – 310 000]	230 000	[190 000 – 280 000]
Nepal	64 000	[51 000 – 80 000]	60 000	[49 000 – 72 000]	60 000	[48 000 – 75 000]
Pakistan	98 000	[79 000 – 120 000]	39 000	[32 000 – 48 000]	95 000	[76 000 – 120 000]
Philippines	8700	[6100 – 13 000]	1700	[<100 – 4000]	8600	[6000 – 13 000]
Singapore	3400	[2500 – 4400]	2800	[2200 – 3800]	3300	[2400 – 4300]
Sri Lanka	2800	[2100 – 3800]	1300	[<1000 – 1900]	2800	[2100 – 3700]
Thailand	530 000	[420 000 – 660 000]	640 000	[480 000 – 820 000]	520 000	[410 000 – 640 000]
Viet Nam	280 000	[220 000 – 350 000]	140 000	[110 000 – 180 000]	270 000	[220 000 – 350 000]
EASTERN EUROPE AND CENTRAL ASIA	**1 400 000**	**[1 300 000 – 1 600 000]**	**760 000**	**[670 000 – 890 000]**	**1 400 000**	**[1 200 000 – 1 600 000]**
Armenia	1900	[1500 – 2400]	1400	[1100 – 1700]	1900	[1500 – 2300]
Azerbaijan	3600	[2600 – 5200]	1300	[<500 – 1700]	3500	[2500 – 5100]
Belarus	17 000	[13 000 – 20 000]	6300	[5100 – 7800]	16 000	[13 000 – 20 000]
Georgia	3500	[2600 – 4900]	1200	[<100 – 1700]	3400	[2500 – 4800]
Kazakhstan	13 000	[9000 – 19 000]	1800	[<1000 – 3400]	13 000	[8900 – 19 000]
Kyrgyzstan	9800	[6500 – 16 000]	<1000	[<100 – 11 000]	9700	[6400 – 16 000]
Republic of Moldova	12 000	[9900 – 16 000]	12 000	[9900 – 16 000]	12 000	[9800 – 15 000]
Russian Federation	980 000	[840 000 – 1 200 000]	430 000	[350 000 – 550 000]	960 000	[830 000 – 1 100 000]
Tajikistan	9100	[6400 – 13 000]	4100	[3100 – 5300]	8900	[6300 – 12 000]
Ukraine	350 000	[300 000 – 410 000]	290 000	[250 000 – 330 000]	350 000	[300 000 – 410 000]
Uzbekistan	28 000	[18 000 – 46 000]	<1000	[<100 – <100]	28 000	[18 000 – 45 000]
WESTERN AND CENTRAL EUROPE	**820 000**	**[720 000 – 910 000]**	**630 000**	**[570 000 – 700 000]**	**820 000**	**[720 000 – 910 000]**
Austria	15 000	[12 000 – 20 000]	5300	[3900 – 7000]	15 000	[12 000 – 20 000]
Belgium	14 000	[11 000 – 18 000]	12 000	[9500 – 16 000]	14 000	[11 000 – 18 000]
Bulgaria	3800	[2800 – 5200]	1 800	[1300 – 2300]	3800	[2700 – 5200]

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ESTIMATED PEOPLE LIVING WITH HIV

	2001 Adults (15+)		2009 Adult (15–49) prevalence percent		2001 Adult (15–49) prevalence percent	
	estimate	[low – high estimate]	estimate	[low – high estimate]	estimate	[low – high estimate]
EAST ASIA	**350 000**	**[250 000 – 480 000]**	**0.1**	**[0.1 – 0.1]**	**<0.1**	**[<0.1 – <0.1]**
China	…	[240 000 – 470 000]	0.1	[0.1 – 0.1]	…	[<0.1 – 0.1]
Democratic People's Republic of Korea	…	…	…	…	…	…
Japan	6400	[5200 – 8100]	<0.1	[<0.1 – <0.1]	<0.1	[<0.1 – <0.1]
Mongolia	<100	[<100 – <200]	<0.1	[<0.1 – <0.1]	<0.1	[<0.1 – <0.1]
Republic of Korea	5200	[4100 – 6700]	<0.1	[<0.1 – <0.1]	<0.1	[<0.1 – <0.1]
OCEANIA	**28 000**	**[22 000 – 34 000]**	**0.3**	**[0.2 – 0.3]**	**0.2**	**[0.1 – 0.2]**
Australia	13 000	[9900 – 16 000]	0.1	[0.1 – 0.2]	0.1	[0.1 – 0.1]
Fiji	<200	[<100 – <500]	0.1	[0.1 – 0.2]	<0.1	[<0.1 – 0.1]
New Zealand	1600	[1400 – 2100]	0.1	[0.1 – 0.1]	0.1	[0.1 – 0.1]
Papua New Guinea	13 000	[9100 – 19 000]	0.9	[0.8 – 1.0]	0.5	[0.3 – 0.7]
SOUTH AND SOUTH-EAST ASIA	**3 700 000**	**[3 400 000 – 4 100 000]**	**0.3**	**[0.3 – 0.3]**	**0.4**	**[0.3 – 0.4]**
Bangladesh	1100	[<100 – 2300]	<0.1	[<0.1 – <0.1]	<0.1	[<0.1 – <0.1]
Bhutan	<100	[<100 – <500]	0.2	[0.1 – 0.3]	<0.1	[<0.1 – 0.1]
Cambodia	83 000	[58 000 – 110 000]	0.5	[0.4 – 0.8]	1.2	[0.8 – 1.6]
India	2 500 000	[2 200 000 – 2 800 000]	0.3	[0.3 – 0.4]	0.4	[0.4 – 0.5]
Indonesia	11 000	[<100 – 34 000]	0.2	[0.1 – 0.3]	<0.1	[<0.1 – <0.1]
Lao People's Democratic Republic	<1000	[<100 – 1700]	0.2	[0.2 – 0.4]	<0.1	[<0.1 – 0.1]
Malaysia	67 000	[56 000 – 80 000]	0.5	[0.4 – 0.6]	0.4	[0.3 – 0.5]
Maldives	<100	[<100 – <100]	<0.1	[<0.1 – <0.1]	<0.1	[<0.1 – <0.1]
Myanmar	250 000	[190 000 – 310 000]	0.6	[0.5 – 0.7]	0.8	[0.6 – 0.9]
Nepal	57 000	[47 000 – 69 000]	0.4	[0.3 – 0.5]	0.5	[0.4 – 0.6]
Pakistan	39 000	[32 000 – 47 000]	0.1	[0.1 – 0.1]	0.1	[<0.1 – 0.1]
Philippines	1600	[<100 – 3900]	<0.1	[<0.1 – <0.1]	<0.1	[<0.1 – <0.1]
Singapore	2700	[2100 – 3700]	0.1	[0.1 – 0.1]	0.1	[0.1 – 0.1]
Sri Lanka	1300	[<1000 – 1900]	<0.1	[<0.1 – <0.1]	<0.1	[<0.1 – <0.1]
Thailand	610 000	[470 000 – 790 000]	1.3	[1.0 – 1.6]	1.7	[1.3 – 2.1]
Viet Nam	140 000	[110 000 – 170 000]	0.4	[0.3 – 0.5]	0.3	[0.2 – 0.3]
EASTERN EUROPE AND CENTRAL ASIA	**750 000**	**[660 000 – 880 000]**	**0.8**	**[0.7 – 0.9]**	**0.4**	**[0.4 – 0.5]**
Armenia	1400	[1100 – 1700]	0.1	[0.1 – 0.1]	0.1	[0.1 – 0.1]
Azerbaijan	1200	[<500 – 1600]	0.1	[<0.1 – 0.1]	<0.1	[<0.1 – <0.1]
Belarus	6300	[5000 – 7800]	0.3	[0.2 – 0.3]	0.1	[0.1 – 0.1]
Georgia	1200	[<100 – 1700]	0.1	[0.1 – 0.2]	<0.1	[<0.1 – 0.1]
Kazakhstan	1800	[<1000 – 3400]	0.1	[0.1 – 0.2]	<0.1	[<0.1 – <0.1]
Kyrgyzstan	<1000	[<100 – 11 000]	0.3	[0.2 – 0.5]	<0.1	[<0.1 – 0.3]
Republic of Moldova	12 000	[9800 – 16 000]	0.4	[0.4 – 0.6]	0.4	[0.3 – 0.6]
Russian Federation	430 000	[350 000 – 550 000]	1.0	[0.9 – 1.2]	0.5	[0.4 – 0.6]
Tajikistan	4000	[3000 – 5200]	0.2	[0.1 – 0.3]	0.1	[0.1 – 0.1]
Ukraine	290 000	[250 000 – 330 000]	1.1	[1.0 – 1.3]	0.9	[0.8 – 1.1]
Uzbekistan	<1000	[<100 – <100]	0.1	[0.1 – 0.2]	<0.1	[<0.1 – <0.1]
WESTERN AND CENTRAL EUROPE	**620 000**	**[570 000 – 700 000]**	**0.2**	**[0.2 – 0.2]**	**0.2**	**[0.2 – 0.2]**
Austria	5300	[3900 – 7000]	0.3	[0.2 – 0.4]	0.1	[0.1 – 0.2]
Belgium	12 000	[9500 – 16 000]	0.2	[0.2 – 0.3]	0.2	[0.2 – 0.3]
Bulgaria	1800	[1300 – 2300]	0.1	[0.1 – 0.1]	<0.1	[<0.1 – <0.1]

	2009 Women (15+)		2001 Women (15+)		2009 Children (0–14)	
	estimate	[low – high estimate]	estimate	[low – high estimate]	estimate	[low – high estimate]
EAST ASIA	**220 000**	**[160 000 – 300 000]**	**98 000**	**[71 000 – 140 000]**	**8000**	**[3600 – 13 000]**
China	230 000	[160 000 – 300 000]	…	[67 000 – 130 000]	…	…
Democratic People's Republic of Korea	…	…	…	…	…	…
Japan	2700	[2100 – 3400]	2200	[1700 – 2700]	…	…
Mongolia	<200	[<100 – <200]	<100	[<100 – <100]	…	…
Republic of Korea	2900	[2200 – 4000]	1600	[1200 – 2000]	…	…
OCEANIA	**25 000**	**[22 000 – 28 000]**	**12 000**	**[9400 – 16 000]**	**3100**	**[1500 – 4800]**
Australia	6200	[4800 – 7800]	3900	[3100 – 4900]	…	…
Fiji	<200	[<200 – <500]	<100	[<100 – <100]	…	…
New Zealand	<1000	[<1000 – 1000]	<1000	[<500 – <1000]	…	…
Papua New Guinea	18 000	[16 000 – 21 000]	7600	[5100 – 11 000]	3100	[1600 – 4800]
SOUTH AND SOUTH-EAST ASIA	**1 400 000**	**[1 400 000 – 1 700 000]**	**1 300 000**	**[1 300 000 – 1 600 000]**	**150 000**	**[97 000 – 200 000]**
Bangladesh	1900	[1500 – 2400]	<500	[<100 – <1000]	…	…
Bhutan	<500	[<200 – <500]	<100	[<100 – <100]	…	…
Cambodia	35 000	[23 000 – 52 000]	51 000	[34 000 – 71 000]	…	…
India	880 000	[730 000 – 1 000 000]	880 000	[780 000 – 1 000 000]	…	…
Indonesia	88 000	[58 000 – 130 000]	3200	[<100 – 9600]	…	…
Lao People's Democratic Republic	3500	[2400 – 5500]	<500	[<100 – <500]	…	…
Malaysia	11 000	[8600 – 15 000]	6100	[4100 – 8100]	…	…
Maldives	<100	[<100 – <100]	<100	[<100 – <100]	…	…
Myanmar	81 000	[67 000 – 96 000]	67 000	[53 000 – 83 000]	…	…
Nepal	20 000	[16 000 – 25 000]	19 000	[15 000 – 22 000]	…	…
Pakistan	28 000	[23 000 – 35 000]	11 000	[9000 – 13 000]	…	…
Philippines	2600	[1800 – 3900]	<500	[<100 – 1100]	…	…
Singapore	1000	[<1000 – 1300]	<1000	[<1000 – 1100]	…	…
Sri Lanka	<1000	[<500 – <1000]	<500	[<200 – <500]	…	…
Thailand	210 000	[160 000 – 260 000]	220 000	[160 000 – 300 000]	…	…
Viet Nam	81 000	[63 000 – 100 000]	39 000	[31 000 – 50 000]	…	…
EASTERN EUROPE AND CENTRAL ASIA	**690 000**	**[600 000 – 790 000]**	**330 000**	**[290 000 – 390 000]**	**18 000**	**[8600 – 29 000]**
Armenia	<1000	[<500 – <1000]	<500	[<500 – <1000]	…	…
Azerbaijan	2100	[1500 – 3000]	<1000	[<500 – <1000]	…	…
Belarus	8300	[6700 – 10 000]	2300	[1900 – 2900]	…	…
Georgia	1500	[1100 – 2100]	<500	[<100 – <1000]	…	…
Kazakhstan	7700	[5300 – 11 000]	1100	[<1000 – 2000]	…	…
Kyrgyzstan	2800	[1900 – 4700]	<500	[<100 – 3200]	…	…
Republic of Moldova	5100	[4100 – 6600]	3700	[2900 – 4800]	…	…
Russian Federation	480 000	[400 000 – 570 000]	190 000	[160 000 – 250 000]	15 000	[6800 – 24 000]
Tajikistan	2700	[1900 – 3700]	1100	[<1000 – 1500]	…	…
Ukraine	170 000	[140 000 – 200 000]	130 000	[110 000 – 150 000]	…	…
Uzbekistan	8000	[4900 – 13 000]	<500	[<100 – <100]	…	…
WESTERN AND CENTRAL EUROPE	**240 000**	**[210 000 – 270 000]**	**180 000**	**[160 000 – 200 000]**	**1400**	**[<1000 – 1800]**
Austria	4600	[3500 – 5900]	1600	[1100 – 2100]	…	…
Belgium	4400	[3400 – 5500]	3700	[2900 – 4800]	…	…
Bulgaria	1100	[<1000 – 1500]	<500	[<500 – <1000]	…	…

A1

ESTIMATED PEOPLE LIVING WITH HIV

	2001 Children (0–14)		2009 Young women (15–24) prevalence (%)		2009 Young men (15–24) prevalence (%)	
	estimate	[low – high estimate]	estimate	[low – high estimate]	estimate	[low – high estimate]
EAST ASIA	**2800**	**[1200 – 5400]**	**<0.1**	**[<0.1 – <0.1]**	**<0.1**	**[<0.1 – <0.1]**
China	…	…	…	[<0.1 – <0.1]	…	[<0.1 – <0.1]
Democratic People's Republic of Korea	…	…	…	…	…	…
Japan	…	…	<0.1	[<0.1 – <0.1]	<0.1	[<0.1 – <0.1]
Mongolia	…	…	<0.1	[<0.1 – <0.1]	<0.1	[<0.1 – 0.1]
Republic of Korea	…	…	<0.1	[<0.1 – <0.1]	<0.1	[<0.1 – 0.1]
OCEANIA	**<1000**	**[<500 – 1600]**	**0.2**	**[0.2 – 0.3]**	**0.1**	**[0.1 – 0.3]**
Australia	…	…	0.1	[<0.1 – 0.1]	0.1	[<0.1 – 0.3]
Fiji	…	…	0.1	[<0.1 – 0.1]	0.1	[<0.1 – 0.3]
New Zealand	…	…	<0.1	[<0.1 – 0.1]	<0.1	[<0.1 – 0.1]
Papua New Guinea	<1000	[<500 – 1500]	0.8	[0.6 – 1.2]	0.3	[0.2 – 0.5]
SOUTH AND SOUTH-EAST ASIA	**100 000**	**[67 000 – 140 000]**	**0.1**	**[0.1 – 0.1]**	**0.1**	**[0.1 – 0.1]**
Bangladesh	…	…	<0.1	[<0.1 – <0.1]	<0.1	[<0.1 – <0.1]
Bhutan	…	…	<0.1	[<0.1 – 0.1]	0.1	[<0.1 – 0.1]
Cambodia	…	…	0.1	[0.1 – 0.3]	0.1	[<0.1 – 0.2]
India	…	…	0.1	[0.1 – 0.2]	0.1	[0.1 – 0.2]
Indonesia	…	…	<0.1	[<0.1 – 0.1]	0.1	[<0.1 – 0.1]
Lao People's Democratic Republic	…	…	0.2	[0.1 – 0.3]	0.1	[0.1 – 0.2]
Malaysia	…	…	<0.1	[<0.1 – <0.1]	0.1	[0.1 – 0.2]
Maldives	…	…	<0.1	[<0.1 – <0.1]	<0.1	[<0.1 – <0.1]
Myanmar	…	…	0.3	[0.2 – 0.3]	0.3	[0.3 – 0.4]
Nepal	…	…	0.1	[0.1 – 0.2]	0.2	[0.1 – 0.6]
Pakistan	…	…	<0.1	[<0.1 – 0.1]	0.1	[<0.1 – 0.2]
Philippines	…	…	<0.1	[<0.1 – <0.1]	<0.1	[<0.1 – <0.1]
Singapore	…	…	<0.1	[<0.1 – 0.1]	<0.1	[<0.1 – 0.2]
Sri Lanka	…	…	<0.1	[<0.1 – <0.1]	<0.1	[<0.1 – <0.1]
Thailand	…	…	…	[0.4 – 0.7]	…	[0.4 – 0.5]
Viet Nam	…	…	0.1	[<0.1 – 0.1]	0.1	[0.1 – 0.1]
EASTERN EUROPE AND CENTRAL ASIA	**4000**	**[2000 – 6100]**	**0.2**	**[0.2 – 0.3]**	**0.1**	**[0.1 – 0.1]**
Armenia	…	…	<0.1	[<0.1 – <0.1]	<0.1	[<0.1 – <0.1]
Azerbaijan	…	…	0.1	[0.1 – 0.1]	<0.1	[<0.1 – 0.1]
Belarus	…	…	0.1	[0.1 – 0.1]	<0.1	[<0.1 – 0.1]
Georgia	…	…	<0.1	[<0.1 – 0.1]	<0.1	[<0.1 – <0.1]
Kazakhstan	…	…	0.2	[0.1 – 0.3]	0.1	[<0.1 – 0.1]
Kyrgyzstan	…	…	0.1	[<0.1 – 0.1]	0.1	[<0.1 – 0.2]
Republic of Moldova	…	…	0.1	[0.1 – 0.1]	0.1	[<0.1 – 0.1]
Russian Federation	2000	[<1000 – 3100]	0.3	[0.3 – 0.4]	0.2	[0.1 – 0.2]
Tajikistan	…	…	<0.1	[<0.1 – 0.1]	<0.1	[<0.1 – 0.1]
Ukraine	…	…	0.3	[0.2 – 0.4]	0.2	[0.1 – 0.2]
Uzbekistan	…	…	<0.1	[<0.1 – 0.1]	<0.1	[<0.1 – 0.1]
WESTERN AND CENTRAL EUROPE	**2200**	**[1300 – 3100]**	**0.1**	**[<0.1 – 0.1]**	**0.1**	**[0.1 – 0.2]**
Austria	…	…	0.2	[0.1 – 0.3]	0.3	[0.1 – 0.9]
Belgium	…	…	<0.1	[<0.1 – 0.1]	<0.1	[<0.1 – 0.1]
Bulgaria	…	…	<0.1	[<0.1 – <0.1]	<0.1	[<0.1 – <0.1]

ESTIMATED NEW HIV INFECTIONS

	2009 Adult (15–49) incidence rate		2001 Adult (15–49) incidence rate		2009 Adults + children newly infected	
	estimate	[low – high estimate]	estimate	[low – high estimate]	estimate	[low – high estimate]
EAST ASIA	**<0.10**	**[<0.10 – <0.10]**	**<0.10**	**[<0.10 – <0.10]**	**82 000**	**[48 000 – 140 000]**
China	…	[<0.10 – <0.10]	…	[<0.10 – <0.10]	…	[47 000 – 140 000]
Democratic People's Republic of Korea	…	…	…	…	…	…
Japan	<0.10	[<0.10 – <0.10]	<0.10	[<0.10 – <0.10]	<500	[<200 – <500]
Mongolia	<0.10	[<0.10 – <0.10]	<0.10	[<0.10 – <0.10]	<100	[<100 – <200]
Republic of Korea	<0.10	[<0.10 – <0.10]	<0.10	[<0.10 – <0.10]	<1000	[<500 – 1000]
OCEANIA	**<0.10**	**[<0.10 – <0.10]**	**<0.10**	**[<0.10 – <0.10]**	**4500**	**[3400 – 6000]**
Australia	…	[<0.10 – <0.10]	…	[<0.10 – <0.10]	…	[<1000 – 1500]
Fiji	…	[<0.10 – <0.10]	…	[<0.10 – <0.10]	…	[<100 – <200]
New Zealand	…	[<0.10 – <0.10]	…	[<0.10 – <0.10]	…	[<100 – <200]
Papua New Guinea	<0.10	[<0.10 – 0.13]	0.13	[0.11 – 0.16]	3200	[2100 – 4800]
SOUTH AND SOUTH-EAST ASIA	**<0.10**	**[<0.10 – <0.10]**	**<0.10**	**[<0.10 – <0.10]**	**270 000**	**[240 000 – 320 000]**
Bangladesh	<0.10	[<0.10 – <0.10]	<0.10	[<0.10 – <0.10]	1400	[1000 – 2400]
Bhutan	…	[<0.10 – 0.13]	…	[<0.10 – <0.10]	…	[<200 – <1000]
Cambodia	<0.10	[<0.10 – <0.10]	<0.10	[<0.10 – 0.11]	1700	[<1000 – 4200]
India	<0.10	[<0.10 – <0.10]	<0.10	[<0.10 – <0.10]	140 000	[110 000 – 160 000]
Indonesia	…	[<0.10 – <0.10]	…	[<0.10 – <0.10]	…	[29 000 – 87 000]
Lao People's Democratic Republic	…	[<0.10 – <0.10]	…	[<0.10 – <0.10]	…	[<1000 – 3400]
Malaysia	<0.10	[<0.10 – <0.10]	<0.10	[<0.10 – <0.10]	10 000	[8400 – 13 000]
Maldives	…	[<0.10 – <0.10]	…	[<0.10 – <0.10]	…	[<100 – <100]
Myanmar	<0.10	[<0.10 – <0.10]	<0.10	[<0.10 – <0.10]	17 000	[14 000 – 20 000]
Nepal	<0.10	[<0.10 – <0.10]	<0.10	[<0.10 – <0.10]	4800	[2700 – 7800]
Pakistan	…	[<0.10 – <0.10]	…	[<0.10 – <0.10]	…	[7300 – 15 000]
Philippines	<0.10	[<0.10 – <0.10]	<0.10	[<0.10 – <0.10]	2100	[1200 – 4900]
Singapore	…	[<0.10 – <0.10]	…	[<0.10 – <0.10]	…	[<100 – <500]
Sri Lanka	<0.10	[<0.10 – <0.10]	<0.10	[<0.10 – <0.10]	<500	[<200 – <1000]
Thailand	<0.10	[<0.10 – <0.10]	<0.10	[<0.10 – <0.10]	12 000	[9800 – 15 000]
Viet Nam	…	[<0.10 – <0.10]	…	[<0.10 – <0.10]	…	[16 000 – 38 000]
EASTERN EUROPE AND CENTRAL ASIA	**<0.10**	**[<0.10 – <0.10]**	**0.14**	**[0.11 – 0.16]**	**130 000**	**[110 000 – 160 000]**
Armenia	<0.10	[<0.10 – <0.10]	<0.10	[<0.10 – <0.10]	<500	[<200 – <500]
Azerbaijan	…	[<0.10 – <0.10]	…	[<0.10 – <0.10]	…	[<500 – 1100]
Belarus	<0.10	[<0.10 – <0.10]	<0.10	[<0.10 – <0.10]	1500	[1100 – 2200]
Georgia	<0.10	[<0.10 – <0.10]	<0.10	[<0.10 – <0.10]	<1000	[<500 – 1200]
Kazakhstan	<0.10	[<0.10 – <0.10]	<0.10	[<0.10 – <0.10]	1900	[1200 – 3600]
Kyrgyzstan	<0.10	[<0.10 – 0.22]	<0.10	[<0.10 – <0.10]	2600	[1400 – 6500]
Republic of Moldova	<0.10	[<0.10 – <0.10]	<0.10	[<0.10 – <0.10]	<1000	[<1000 – 1200]
Russian Federation	…	[<0.10 – 0.14]	…	[0.17 – 0.25]	…	[67 000 – 120 000]
Tajikistan	<0.10	[<0.10 – <0.10]	<0.10	[<0.10 – <0.10]	1400	[<1000 – 2300]
Ukraine	…	[<0.10 – 0.12]	…	[0.10 – 0.16]	…	[16 000 – 32 000]
Uzbekistan	…	[<0.10 – <0.10]	…	[<0.10 – <0.10]	…	[3100 – 11 000]
WESTERN AND CENTRAL EUROPE	**<0.10**	**[<0.10 – <0.10]**	**<0.10**	**[<0.10 – <0.10]**	**31 000**	**[23 000 – 40 000]**
Austria	…	[<0.10 – <0.10]	…	[<0.10 – <0.10]	…	[<1000 – 2100]
Belgium	…	[<0.10 – <0.10]	…	[<0.10 – <0.10]	…	[<100 – <500]
Bulgaria	…	[<0.10 – <0.10]	…	[<0.10 – <0.10]	…	[<500 – <1000]

A1

ESTIMATED NEW HIV INFECTIONS

ESTIMATED AIDS-RELATED DEATHS

	2009 Adults newly infected		2009 AIDS-related deaths in adults + children		2001 AIDS-related deaths in adults + children	
	estimate	[low – high estimate]	estimate	[low – high estimate]	estimate	[low – high estimate]
EAST ASIA	**81 000**	**[47 000 – 140 000]**	**36 000**	**[25 000 – 50 000]**	**15 000**	**[9400 – 28 000]**
China	…	[46 000 – 140 000]	26 000	[24 000 – 49 000]	…	[9100 – 28 000]
Democratic People's Republic of Korea	…	…	…	…	…	…
Japan	<500	[<200 – <500]	<100	[<100 – <500]	<100	[<100 – <200]
Mongolia	<100	[<100 – <100]	<100	[<100 – <100]	<100	[<100 – <100]
Republic of Korea	<1000	[<500 – 1000]	<500	[<500 – <1000]	<500	[<100 – <500]
OCEANIA	**3700**	**[2600 – 5300]**	**1400**	**[<1000 – 2400]**	**<1000**	**[<500 – 1100]**
Australia	…	[<1000 – 1500]	<100	[<100 – <1000]	<100	[<100 – <200]
Fiji	…	[<100 – <200]	<100	[<100 – <100]	<100	[<100 – <100]
New Zealand	…	[<100 – <200]	<100	[<100 – <100]	<100	[<100 – <100]
Papua New Guinea	2400	[1400 – 4100]	1300	[<1000 – 1900]	<1000	[<500 – <1000]
SOUTH AND SOUTH-EAST ASIA	**250 000**	**[220 000 – 300 000]**	**260 000**	**[230 000 – 300 000]**	**230 000**	**[210 000 – 280 000]**
Bangladesh	1400	[<1000 – 2400]	<200	[<100 – <500]	<100	[<100 – <200]
Bhutan	…	[<200 – <1000]	<100	[<100 – <100]	<100	[<100 – <100]
Cambodia	1200	[<200 – 3500]	3100	[<1000 – 5600]	7400	[5000 – 11 000]
India	120 000	[100 000 – 150 000]	170 000	[150 000 – 200 000]	140 000	[120 000 – 170 000]
Indonesia	…	[29 000 – 86 000]	8300	[3800 – 15 000]	<200	[<100 – 1900]
Lao People's Democratic Republic	…	[<1000 – 3100]	<200	[<100 – <500]	<100	[<100 – <100]
Malaysia	10 000	[8400 – 13 000]	5800	[4500 – 7200]	3900	[3000 – 5200]
Maldives	…	[<100 – <100]	<100	[<100 – <100]	<100	[<100 – <100]
Myanmar	16 000	[14 000 – 19 000]	18 000	[13 000 – 23 000]	16 000	[12 000 – 20 000]
Nepal	4300	[2300 – 7200]	4700	[3800 – 5700]	4000	[3200 – 4900]
Pakistan	…	[6700 – 14 000]	5800	[4500 – 7400]	1400	[<1000 – 1900]
Philippines	2100	[1200 – 4800]	<200	[<100 – <500]	<100	[<100 – <500]
Singapore	…	[<100 – <500]	<100	[<100 – <200]	<100	[<100 – <500]
Sri Lanka	<500	[<200 – <1000]	<200	[<100 – <500]	<100	[<100 – <100]
Thailand	12 000	[9500 – 14 000]	28 000	[21 000 – 37 000]	52 000	[39 000 – 68 000]
Viet Nam	…	[15 000 – 37 000]	14 000	[9500 – 20 000]	5500	[3900 – 7500]
EASTERN EUROPE AND CENTRAL ASIA	**130 000**	**[100 000 – 150 000]**	**76 000**	**[60 000 – 96 000]**	**18 000**	**[14 000 – 23 000]**
Armenia	<500	[<200 – <500]	<100	[<100 – <200]	<100	[<100 – <100]
Azerbaijan	…	[<500 – 1100]	<200	[<200 – <500]	<100	[<100 – <100]
Belarus	1500	[1100 – 2200]	<1000	[<500 – <1000]	<200	[<100 – <500]
Georgia	<1000	[<500 – 1200]	<100	[<100 – <200]	<100	[<100 – <200]
Kazakhstan	1900	[1200 – 3600]	<500	[<200 – <1000]	<100	[<100 – <100]
Kyrgyzstan	2600	[1400 – 6500]	<500	[<100 – <500]	<100	[<100 – 3300]
Republic of Moldova	<1000	[<1000 – 1200]	<1000	[<1000 – 1100]	<1000	[<500 – <1000]
Russian Federation	…	[64 000 – 110 000]	…	…	…	…
Tajikistan	1300	[<1000 – 2200]	<500	[<500 – <1000]	<200	[<200 – <500]
Ukraine	…	[16 000 – 32 000]	24 000	[20 000 – 29 000]	13 000	[9400 – 16 000]
Uzbekistan	…	[3100 – 11 000]	<500	[<200 – 1000]	<100	[<100 – <100]
WESTERN AND CENTRAL EUROPE	**31 000**	**[23 000 – 39 000]**	**8500**	**[6800 – 19 000]**	**7300**	**[5700 – 11 000]**
Austria	…	[<1000 – 2100]	<100	[<100 – <100]	<100	[<100 – <100]
Belgium	…	[<100 – <500]	<100	[<100 – <500]	<100	[<100 – <100]
Bulgaria	…	[<500 – <1000]	<200	[<200 – <500]	<100	[<100 – <200]

ESTIMATED ORPHANS DUE TO AIDS

HIV PREVALENCE (%) IN MOST-AT-RISK GROUPS IN CAPITAL CITY

	2009 Orphans (0–17) currently living		2001 Orphans (0–17)		Injecting drug users		Female sex workers		Men who have sex with men	
	estimate	[low – high estimate]	estimate	[low – high estimate]	Year	HIV (%)	Year	HIV (%)	Year	HIV (%)
EAST ASIA	**52 000**	**[35 000 – 78 000]**	**18 000**	**[10 000 – 37 000]**	**…**	**…**	**…**	**…**	**…**	**…**
China	…	…	…	…	2009	9.3	2009	0.6	2009	5.0
Democratic People's Republic of Korea	…	…	…	…	…	…	…	…	…	…
Japan	…	…	…	…	…	…	…	…	2009	4.0
Mongolia	…	…	…	…	…	…	…	…	2009	1.8
Republic of Korea	…	…	…	…	…	…	…	…	…	…
OCEANIA	**6300**	**[4000 – 10 000]**	**2700**	**[1900 – 4400]**	**…**	**…**	**…**	**…**	**…**	**…**
Australia	…	…	…	…	2008	1.5	2008	0.1	…	…
Fiji	…	…	…	…	…	…	…	…	…	…
New Zealand	…	…	…	…	2004	0.3	…	…	…	…
Papua New Guinea	…	…	…	…	…	…	2009	7.4	2009	4.4
SOUTH AND SOUTH-EAST ASIA	**1 000 000**	**[820 000 – 1 100 000]**	**500 000**	**[420 000 – 620 000]**	**…**	**…**	**…**	**…**	**…**	**…**
Bangladesh	…	…	…	…	2007	1.6	2007	0.3	…	…
Bhutan	…	…	…	…	…	…	…	…	…	…
Cambodia	…	…	…	…	2007	24.4	…	…	2005	4.5
India	…	…	…	…	2009	9.2	2009	4.9	2009	7.3
Indonesia	…	…	…	…	2007	52.4	2007	7.8	2007	5.2
Lao People's Democratic Republic	…	…	…	…	…	…	…	…	…	…
Malaysia	…	…	…	…	…	22.1	…	…	2009	3.9
Maldives	…	…	…	…	…	…	…	…	…	…
Myanmar	…	…	…	…	2008	36.3	2008	18.1	2008	28.8
Nepal	…	…	…	…	2009	20.7	2008	2.2	2009	3.8
Pakistan	…	…	…	…	2008	20.8	2009	1.0	…	…
Philippines	…	…	…	…	2009	0.2	2009	0.2	2009	1.0
Singapore	…	…	…	…	…	…	…	…	2009	2.6
Sri Lanka	…	…	…	…	…	…	…	…	2009	0.5
Thailand	…	…	…	…	2009	38.7	2009	2.8	2009	13.5
Viet Nam	…	…	…	…	2009	18.4	2009	3.2	2010	16.7
EASTERN EUROPE AND CENTRAL ASIA	**73 000**	**[59 000 – 91 000]**	**15 000**	**[9000 – 22 000]**	**…**	**…**	**…**	**…**	**…**	**…**
Armenia	…	…	…	…	…	…	…	…	…	…
Azerbaijan	…	…	…	…	2008	10.3	2008	1.7	2008	1.0
Belarus	…	…	…	…	2009	13.7	2009	6.4	2009	2.7
Georgia	…	…	…	…	2008	2.2	2009	2.0	2007	3.6
Kazakhstan	…	…	…	…	2009	2.9	2009	1.3	2009	0.3
Kyrgyzstan	…	…	…	…	2009	14.3	2009	1.6	…	…
Republic of Moldova	…	…	…	…	…	…	…	…	…	…
Russian Federation	37 000	[27 000 – 50 000]	1200	[<1000 – 1700]	2009	15.6	2009	4.5	2009	8.3
Tajikistan	…	…	…	…	2008	17.6	2008	2.8	…	…
Ukraine	…	…	…	…	2009	22.9	…	…	2009	8.6
Uzbekistan	…	…	…	…	2009	11.0	2009	2.2	2009	6.8
WESTERN AND CENTRAL EUROPE	**26 000**	**[22 000 – 42 000]**	**50 000**	**[41 000 – 60 000]**	**…**	**…**	**…**	**…**	**…**	**…**
Austria	…	…	…	…	2009	4.0	…	…	…	…
Belgium	…	…	…	…	2008	8.7	2009	0.4	2010	5.6
Bulgaria	…	…	…	…	2008	6.8	2008	0.7	2008	3.3

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ESTIMATED PEOPLE LIVING WITH HIV

	2009 Adults + Children		2001 Adults + Children		2009 Adults (15+)	
	estimate	[low – high estimate]	estimate	[low – high estimate]	estimate	[low – high estimate]
Croatia	<1000	[<1000 – 1 100]	<1000	[<500 – <1000]	<1000	[<1000 – 1100]
Czech Republic	2000	[1700 – 2300]	1300	[1200 – 1600]	2000	[1700 – 2300]
Denmark	5300	[4000 – 6300]	3300	[2800 – 3800]	5300	[4000 – 6300]
Estonia	9900	[8000 – 12 000]	4700	[3800 – 5700]	9800	[8000 – 12 000]
Finland	2 600	[2200 – 3100]	1600	[1300 – 1900]	2600	[2200 – 3100]
France	150 000	[120 000 – 190 000]	120 000	[100 000 – 140 000]	150 000	[120 000 – 190 000]
Germany	67 000	[56 000 – 75 000]	49 000	[42 000 – 56 000]	67 000	[56 000 – 75 000]
Greece	8800	[7300 – 11 000]	8100	[6800 – 9500]	8800	[7300 – 11 000]
Hungary	3000	[2200 – 3900]	2800	[2100 – 3700]	3000	[2200 – 3900]
Iceland	<1000	[<500 – <1000]	<500	[<500 – <500]	<1000	[<500 – <1000]
Ireland	6900	[5200 – 8700]	4500	[3400 – 5900]	6900	[5200 – 8700]
Israel	7500	[5600 – 9900]	5200	[3900 – 6800]	7500	[5600 – 9900]
Italy	140 000	[110 000 – 180 000]	130 000	[99 000 – 170 000]	140 000	[110 000 – 180 000]
Latvia	8600	[6300 – 12 000]	4700	[3500 – 6 200]	8600	[6300 – 11 000]
Lithuania	1200	[<1000 – 1600]	<1000	[<1000 – <1000]	1200	[<1000 – 1600]
Luxembourg	<1000	[<1000 – 1200]	<1000	[<500 – <1000]	<1000	[<1000 – 1200]
Malta	<500	[<500 – <500]	<500	[<200 – <500]	<500	[<500 – <500]
Netherlands	22 000	[17 000 – 32 000]	18 000	[14 000 – 24 000]	22 000	[17 000 – 32 000]
Norway	4000	[3000 – 5400]	3000	[2300 – 4100]	4000	[3000 – 5400]
Poland	27 000	[20 000 – 34 000]	21 000	[16 000 – 28 000]	27 000	[20 000 – 34 000]
Portugal	42 000	[32 000 – 53 000]	31 000	[24 000 – 41 000]	42 000	[32 000 – 53 000]
Romania	16 000	[12 000 – 20 000]	16 000	[12 000 – 20 000]	15 000	[11 000 – 20 000]
Serbia	4900	[3500 – 7100]	1900	[<500 – 2800]	4900	[3400 – 7100]
Slovakia	<500	[<500 – <500]	<200	[<200 – <500]	<500	[<500 – <500]
Slovenia	<1000	[<500 – <1000]	<500	[<200 – <500]	<1000	[<500 – <1000]
Spain	130 000	[120 000 – 150 000]	120 000	[100 000 – 130 000]	130 000	[120 000 – 150 000]
Sweden	8100	[6100 – 11 000]	6300	[4900 – 8700]	8100	[6100 – 11 000]
Switzerland	18 000	[13 000 – 24 000]	13 000	[9500 – 17 000]	18 000	[13 000 – 24 000]
Turkey	4600	[3400 – 6100]	1700	[1300 – 2300]	4500	[3300 – 6100]
United Kingdom of Great Britain and Northern Ireland	85 000	[66 000 – 110 000]	43 000	[35 000 – 54 000]	85 000	[66 000 – 110 000]
MIDDLE EAST AND NORTH AFRICA	**460 000**	**[400 000 – 530 000]**	**180 000**	**[150 000 – 210 000]**	**440 000**	**[380 000 – 510 000]**
Algeria	18 000	[13 000 – 24 000]	6800	[4900 – 9000]	17 000	[12 000 – 24 000]
Djibouti	14 000	[10 000 – 18 000]	12 000	[9000 – 16 000]	13 000	[9400 – 16 000]
Egypt	11 000	[8400 – 17 000]	3300	[2900 – 5300]	10 000	[8100 – 16 000]
Iran (Islamic Republic of)	92 000	[74 000 – 120 000]	54 000	[45 000 – 65 000]	91 000	[72 000 – 110 000]
Lebanon	3600	[2700 – 4800]	3800	[2900 – 5100]	3400	[2600 – 4600]
Morocco	26 000	[19 000 – 34 000]	14 000	[11 000 – 18 000]	25 000	[19 000 – 33 000]
Oman	1100	[<1000 – 1400]	<500	[<500 – <1000]	1100	[<1000 – 1400]
Qatar	<200	[<100 – <200]	<100	[<100 – <100]	<200	[<100 – <200]
Somalia	34 000	[25 000 – 48 000]	11 000	[<500 – 14 000]	32 000	[23 000 – 46 000]
Sudan	260 000	[210 000 – 330 000]	72 000	[35 000 – 98 000]	250 000	[200 000 – 310 000]
Tunisia	2400	[1800 – 3300]	<1000	[<500 – 1000]	2400	[1700 – 3300]

	2001 Adults (15+)		2009 Adult (15–49) prevalence percent		2001 Adult (15–49) prevalence percent	
	estimate	[low – high estimate]	estimate	[low – high estimate]	estimate	[low – high estimate]
Croatia	<1000	[<500 – <1000]	<0.1	[<0.1 – <0.1]	<0.1	[<0.1 – <0.1]
Czech Republic	1300	[1200 – 1600]	<0.1	[<0.1 – <0.1]	<0.1	[<0.1 – <0.1]
Denmark	3300	[2800 – 3800]	0.2	[0.1 – 0.2]	0.1	[0.1 – 0.1]
Estonia	4700	[3800 – 5700]	1.2	[1.0 – 1.5]	0.6	[0.5 – 0.8]
Finland	1600	[1300 – 1900]	0.1	[0.1 – 0.1]	0.1	[<0.1 – 0.1]
France	120 000	[100 000 – 140 000]	0.4	[0.3 – 0.5]	0.3	[0.3 – 0.4]
Germany	49 000	[42 000 – 56 000]	0.1	[0.1 – 0.2]	0.1	[0.1 – 0.1]
Greece	8000	[6800 – 9500]	0.1	[0.1 – 0.2]	0.1	[0.1 – 0.1]
Hungary	2800	[2100 – 3700]	<0.1	[<0.1 – 0.1]	<0.1	[<0.1 – 0.1]
Iceland	<500	[<500 – <500]	0.3	[0.2 – 0.4]	0.2	[0.2 – 0.3]
Ireland	4500	[3400 – 5900]	0.2	[0.2 – 0.3]	0.2	[0.1 – 0.2]
Israel	5100	[3900 – 6800]	0.2	[0.1 – 0.2]	0.1	[0.1 – 0.2]
Italy	130 000	[99 000 – 170 000]	0.3	[0.2 – 0.3]	0.3	[0.2 – 0.4]
Latvia	4700	[3500 – 6200]	0.7	[0.5 – 0.9]	0.4	[0.3 – 0.5]
Lithuania	<1000	[<1000 – <1000]	0.1	[<0.1 – 0.1]	<0.1	[<0.1 – <0.1]
Luxembourg	<1000	[<500 – <1000]	0.3	[0.2 – 0.4]	0.3	[0.2 – 0.3]
Malta	<500	[<200 – <500]	0.1	[0.1 – 0.1]	0.1	[0.1 – 0.1]
Netherlands	18 000	[14 000 – 24 000]	0.2	[0.1 – 0.3]	0.2	[0.1 – 0.3]
Norway	3000	[2300 – 4100]	0.1	[0.1 – 0.2]	0.1	[0.1 – 0.2]
Poland	21 000	[16 000 – 28 000]	0.1	[0.1 – 0.1]	0.1	[0.1 – 0.1]
Portugal	31 000	[24 000 – 41 000]	0.6	[0.4 – 0.7]	0.5	[0.4 – 0.6]
Romania	16 000	[12 000 – 20 000]	0.1	[0.1 – 0.1]	0.1	[0.1 – 0.2]
Serbia	1900	[<500 – 2700]	0.1	[0.1 – 0.2]	<0.1	[<0.1 – 0.1]
Slovakia	<200	[<200 – <500]	<0.1	[<0.1 – <0.1]	<0.1	[<0.1 – <0.1]
Slovenia	<500	[<200 – <500]	<0.1	[<0.1 – 0.1]	<0.1	[<0.1 – <0.1]
Spain	110 000	[100 000 – 130 000]	0.4	[0.3 – 0.4]	0.4	[0.4 – 0.5]
Sweden	6300	[4900 – 8700]	0.1	[0.1 – 0.2]	0.1	[0.1 – 0.2]
Switzerland	13 000	[9500 – 17 000]	0.4	[0.3 – 0.5]	0.3	[0.2 – 0.4]
Turkey	1700	[1300 – 2300]	<0.1	[<0.1 – <0.1]	<0.1	[<0.1 – <0.1]
United Kingdom of Great Britain and Northern Ireland	43 000	[35 000 – 53 000]	0.2	[0.2 – 0.3]	0.1	[0.1 – 0.2]
MIDDLE EAST AND NORTH AFRICA	**170 000**	**[150 000 – 200 000]**	**0.2**	**[0.2 – 0.3]**	**0.1**	**[0.1 – 0.1]**
Algeria	6700	[4800 – 9000]	0.1	[0.1 – 0.1]	<0.1	[<0.1 – <0.1]
Djibouti	11 000	[8600 – 15 000]	2.5	[1.9 – 3.2]	2.9	[2.2 – 3.9]
Egypt	3200	[2900 – 5300]	<0.1	[<0.1 – <0.1]	<0.1	[<0.1 – <0.1]
Iran (Islamic Republic of)	54 000	[44 000 – 64 000]	0.2	[0.1 – 0.2]	0.1	[0.1 – 0.1]
Lebanon	3700	[2800 – 5000]	0.1	[0.1 – 0.2]	0.2	[0.1 – 0.2]
Morocco	14 000	[10 000 – 18 000]	0.1	[0.1 – 0.2]	0.1	[0.1 – 0.1]
Oman	<500	[<500 – <500]	0.1	[<0.1 – 0.1]	<0.1	[<0.1 – <0.1]
Qatar	<100	[<100 – <100]	<0.1	[<0.1 – <0.1]	<0.1	[<0.1 – <0.1]
Somalia	10 000	[<500 – 13 000]	0.7	[0.5 – 1.0]	0.3	[<0.1 – 0.3]
Sudan	68 000	[34 000 – 89 000]	1.1	[0.9 – 1.4]	0.4	[0.2 – 0.5]
Tunisia	<1000	[<500 – 1000]	<0.1	[<0.1 – 0.1]	<0.1	[<0.1 – <0.1]

A1

ESTIMATED PEOPLE LIVING WITH HIV

	2009 Women (15+)		2001 Women (15+)		2009 Children (0–14)	
	estimate	[low – high estimate]	estimate	[low – high estimate]	estimate	[low – high estimate]
Croatia	<500	[<500 – <500]	<200	[<200 – <500]	…	…
Czech Republic	<1000	[<1000 – <1000]	<500	[<500 – <500]	…	…
Denmark	1400	[1100 – 1700]	<1000	[<1000 – 1000]	…	…
Estonia	3000	[2400 – 3800]	1400	[1100 – 1700]	…	…
Finland	<1000	[<1000 – <1000]	<500	[<500 – <1000]	…	…
France	48 000	[38 000 – 59 000]	37 000	[31 000 – 44 000]	…	…
Germany	12 000	[11 000 – 14 000]	9000	[7700 – 10 000]	…	…
Greece	2700	[2200 – 3200]	2500	[2100 – 2900]	…	…
Hungary	<1000	[<1000 – 1300]	<1000	[<1000 – 1200]	…	…
Iceland	<200	[<200 – <500]	<100	[<100 – <200]	…	…
Ireland	2000	[1500 – 2600]	1300	[1000 – 1800]	…	…
Israel	2200	[1700 – 2900]	1500	[1200 – 2100]	…	…
Italy	48 000	[36 000 – 61 000]	42 000	[32 000 – 56 000]	…	…
Latvia	2600	[1900 – 3500]	1400	[1000 – 1800]	…	…
Lithuania	<500	[<500 – <500]	<500	[<200 – <500]	…	…
Luxembourg	<500	[<500 – <500]	<200	[<200 – <500]	…	…
Malta	<100	[<100 – <200]	<100	[<100 – <100]	…	…
Netherlands	6900	[5200 – 9700]	5400	[4200 – 7400]	…	…
Norway	1200	[<1000 – 1600]	<1000	[<1000 – 1200]	…	…
Poland	8200	[6200 – 11 000]	6400	[4800 – 8500]	…	…
Portugal	13 000	[9900 – 16 000]	9400	[7300 – 12 000]	…	…
Romania	4700	[3500 – 5900]	4600	[3600 – 5900]	…	…
Serbia	1200	[<1000 – 1600]	<500	[<100 – <1000]	…	…
Slovakia	<100	[<100 – <200]	<100	[<100 – <100]	…	…
Slovenia	<200	[<200 – <500]	<100	[<100 – <100]	…	…
Spain	32 000	[27 000 – 36 000]	28 000	[23 000 – 32 000]	…	…
Sweden	2500	[1900 – 3400]	1900	[1500 – 2700]	…	…
Switzerland	5700	[4100 – 7500]	4000	[3000 – 5200]	…	…
Turkey	1400	[1000 – 1800]	<1000	[<500 – <1000]	…	…
United Kingdom of Great Britain and Northern Ireland	26 000	[20 000 – 32 000]	13 000	[10 000 – 16 000]	…	…
MIDDLE EAST AND NORTH AFRICA	**210 000**	**[180 000 – 240 000]**	**74 000**	**[61 000 – 87 000]**	**21 000**	**[13 000 – 28 000]**
Algeria	5200	[3700 – 7200]	2000	[1500 – 2600]	…	…
Djibouti	7400	[5300 – 9500]	6600	[5000 – 9000]	…	…
Egypt	2400	[2500 – 4900]	<1000	[<1000 – 1600]	…	…
Iran (Islamic Republic of)	26 000	[20 000 – 33 000]	15 000	[12 000 – 18 000]	…	…
Lebanon	1100	[<1000 – 1400]	1100	[<1000 – 1500]	…	…
Morocco	8100	[6000 – 11 000]	4300	[3300 – 5600]	…	…
Oman	<500	[<500 – <500]	<200	[<200 – <200]	…	…
Qatar	<100	[<100 – <100]	<100	[<100 – <100]	…	…
Somalia	15 000	[11 000 – 21 000]	4700	[<200 – 6300]	…	…
Sudan	140 000	[110 000 – 180 000]	39 000	[20 000 – 53 000]	…	…
Tunisia	<1000	[<1000 – 1000]	<500	[<100 – <500]	…	…

	2001 Children (0–14)		2009 Young women (15–24) prevalence (%)		2009 Young men (15–24) prevalence (%)	
	estimate	[low – high estimate]	estimate	[low – high estimate]	estimate	[low – high estimate]
Croatia	…	…	<0.1	[<0.1 – <0.1]	<0.1	[<0.1 – 0.1]
Czech Republic	…	…	<0.1	[<0.1 – <0.1]	<0.1	[<0.1 – 0.1]
Denmark	…	…	0.1	[<0.1 – 0.1]	0.1	[0.1 – 0.1]
Estonia	…	…	0.2	[0.2 – 0.3]	0.3	[0.2 – 0.4]
Finland	…	…	<0.1	[<0.1 – 0.1]	0.1	[<0.1 – 0.2]
France	…	…	0.1	[0.1 – 0.2]	0.2	[0.1 – 0.6]
Germany	…	…	<0.1	[<0.1 – <0.1]	0.1	[0.1 – 0.1]
Greece	…	…	0.1	[<0.1 – 0.1]	0.1	[<0.1 – 0.2]
Hungary	…	…	<0.1	[<0.1 – <0.1]	<0.1	[<0.1 – 0.1]
Iceland	…	…	0.1	[<0.1 – 0.1]	0.1	[<0.1 – 0.4]
Ireland	…	…	0.1	[<0.1 – 0.1]	0.1	[<0.1 – 0.3]
Israel	…	…	<0.1	[<0.1 – 0.1]	0.1	[<0.1 – 0.2]
Italy	…	…	<0.1	[<0.1 – <0.1]	<0.1	[<0.1 – 0.1]
Latvia	…	…	0.1	[0.1 – 0.2]	0.2	[0.1 – 0.2]
Lithuania	…	…	<0.1	[<0.1 – <0.1]	<0.1	[<0.1 – <0.1]
Luxembourg	…	…	0.1	[<0.1 – 0.2]	0.1	[<0.1 – 0.4]
Malta	…	…	<0.1	[<0.1 – <0.1]	<0.1	[<0.1 – 0.1]
Netherlands	…	…	<0.1	[<0.1 – 0.1]	0.1	[<0.1 – 0.3]
Norway	…	…	<0.1	[<0.1 – 0.1]	<0.1	[<0.1 – 0.2]
Poland	…	…	<0.1	[<0.1 – <0.1]	<0.1	[<0.1 – 0.1]
Portugal	…	…	0.2	[0.1 – 0.4]	0.3	[0.1 – 0.9]
Romania	…	…	<0.1	[<0.1 – 0.1]	0.1	[<0.1 – 0.2]
Serbia	…	…	0.1	[<0.1 – 0.1]	0.1	[0.1 – 0.2]
Slovakia	…	…	<0.1	[<0.1 – <0.1]	<0.1	[<0.1 – <0.1]
Slovenia	…	…	<0.1	[<0.1 – 0.1]	<0.1	[<0.1 – 0.1]
Spain	…	…	0.1	[0.1 – 0.1]	0.2	[0.1 – 0.2]
Sweden	…	…	<0.1	[<0.1 – 0.1]	<0.1	[<0.1 – 0.2]
Switzerland	…	…	0.1	[0.1 – 0.2]	0.2	[0.1 – 0.6]
Turkey	…	…	<0.1	[<0.1 – <0.1]	<0.1	[<0.1 – <0.1]
United Kingdom of Great Britain and Northern Ireland	…	…	0.1	[<0.1 – 0.2]	0.2	[0.1 – 0.6]
MIDDLE EAST AND NORTH AFRICA	**7100**	**[3800 – 13 000]**	**0.2**	**[0.2 – 0.3]**	**0.1**	**[0.1 – 0.1]**
Algeria	…	…	<0.1	[<0.1 – 0.1]	0.1	[<0.1 – 0.2]
Djibouti	…	…	1.9	[1.0 – 2.9]	0.8	[0.4 – 1.3]
Egypt	…	…	<0.1	[<0.1 – <0.1]	<0.1	[<0.1 – <0.1]
Iran (Islamic Republic of)	…	…	<0.1	[<0.1 – <0.1]	<0.1	[<0.1 – <0.1]
Lebanon	…	…	<0.1	[<0.1 – 0.1]	0.1	[<0.1 – 0.1]
Morocco	…	…	0.1	[<0.1 – 0.1]	0.1	[<0.1 – 0.3]
Oman	…	…	<0.1	[<0.1 – <0.1]	<0.1	[<0.1 – <0.1]
Qatar	…	…	<0.1	[<0.1 – <0.1]	<0.1	[<0.1 – <0.1]
Somalia	…	…	0.6	[0.4 – 1.1]	0.4	[0.3 – 0.7]
Sudan	…	…	1.3	[0.9 – 1.8]	0.5	[0.4 – 0.7]
Tunisia	…	…	<0.1	[<0.1 – <0.1]	<0.1	[<0.1 – 0.1]

A1

ESTIMATED NEW HIV INFECTIONS

	2009 Adult (15–49) incidence rate		2001 Adult (15–49) incidence rate		2009 Adults + children newly infected	
	estimate	[low – high estimate]	estimate	[low – high estimate]	estimate	[low – high estimate]
Croatia	…	[<0.10 – <0.10]	…	[<0.10 – <0.10]	…	[<100 – <100]
Czech Republic	…	[<0.10 – <0.10]	…	[<0.10 – <0.10]	…	[<100 – <100]
Denmark	…	[<0.10 – <0.10]	…	[<0.10 – <0.10]	…	[<200 – <500]
Estonia	…	[<0.10 – 0.14]	…	[0.13 – 0.21]	…	[<1000 – 1000]
Finland	…	[<0.10 – <0.10]	…	[<0.10 – <0.10]	…	[<100 – <200]
France	<0.10	[<0.10 – <0.10]	<0.10	[<0.10 – <0.10]	6900	[3900 – 10 000]
Germany	<0.10	[<0.10 – <0.10]	<0.10	[<0.10 – <0.10]	3300	[2500 – 4200]
Greece	…	[<0.10 – <0.10]	…	[<0.10 – <0.10]	…	[<200 – <500]
Hungary	…	[<0.10 – <0.10]	…	[<0.10 – <0.10]	…	[<100 – <1000]
Iceland	…	[<0.10 – <0.10]	…	[<0.10 – <0.10]	…	[<100 – <100]
Ireland	…	[<0.10 – <0.10]	…	[<0.10 – <0.10]	…	[<100 – <500]
Israel	…	[<0.10 – <0.10]	…	[<0.10 – <0.10]	…	[<200 – <500]
Italy	…	[<0.10 – <0.10]	…	…	…	[1700 – 6200]
Latvia	<0.10	[<0.10 – 0.10]	<0.10	[<0.10 – 0.11]	<1000	[<500 – 1200]
Lithuania	<0.10	[<0.10 – <0.10]	<0.10	[<0.10 – <0.10]	<100	[<100 – <200]
Luxembourg	…	[<0.10 – <0.10]	…	[<0.10 – <0.10]	…	[<100 – <100]
Malta	…	[<0.10 – <0.10]	…	[<0.10 – <0.10]	…	[<100 – <100]
Netherlands	…	[<0.10 – <0.10]	…	[<0.10 – <0.10]	…	[<500 – 1100]
Norway	…	[<0.10 – <0.10]	…	[<0.10 – <0.10]	…	[<100 – <500]
Poland	…	[<0.10 – <0.10]	…	[<0.10 – <0.10]	…	[<500 – 1300]
Portugal	…	[<0.10 – <0.10]	…	[<0.10 – <0.10]	…	[<1000 – 2300]
Romania	…	[<0.10 – <0.10]	…	[<0.10 – <0.10]	…	[<500 – 1000]
Serbia	…	[<0.10 – <0.10]	…	[<0.10 – <0.10]	…	[<500 – <1000]
Slovakia	…	[<0.10 – <0.10]	…	[<0.10 – <0.10]	…	[<100 – <100]
Slovenia	…	[<0.10 – <0.10]	…	[<0.10 – <0.10]	…	[<100 – <200]
Spain	…	[<0.10 – <0.10]	…	[<0.10 – <0.10]	…	[2200 – 4100]
Sweden	…	[<0.10 – <0.10]	…	[<0.10 – <0.10]	…	[<100 – <500]
Switzerland	…	[<0.10 – <0.10]	…	[<0.10 – <0.10]	…	[<500 – 1000]
Turkey	…	[<0.10 – <0.10]	…	[<0.10 – <0.10]	…	[<500 – <1000]
United Kingdom of Great Britain and Northern Ireland	…	[<0.10 – <0.10]	…	[<0.10 – <0.10]	…	[1500 – 6000]
MIDDLE EAST AND NORTH AFRICA	**<0.10**	**[<0.10 – <0.10]**	**<0.10**	**[<0.10 – <0.10]**	**75 000**	**[61 000 – 92 000]**
Algeria	…	[<0.10 – <0.10]	…	[<0.10 – <0.10]	…	[1100 – 3700]
Djibouti	0.25	[0.10 – 0.34]	0.29	[0.18 – 0.51]	1300	[<1000 – 1800]
Egypt	…	[<0.10 – <0.10]	…	[<0.10 – <0.10]	…	[<1000 – 2900]
Iran (Islamic Republic of)	…	[<0.10 – <0.10]	…	[<0.10 – <0.10]	…	[5600 – 11 000]
Lebanon	…	[<0.10 – <0.10]	…	[<0.10 – <0.10]	…	[<100 – <500]
Morocco	…	[<0.10 – <0.10]	…	[<0.10 – <0.10]	…	[1200 – 5800]
Oman	…	[<0.10 – <0.10]	…	[<0.10 – <0.10]	…	[<200 – <500]
Qatar	…	[<0.10 – <0.10]	…	[<0.10 – <0.10]	…	[<100 – <100]
Somalia	…	[<0.10 – 0.29]	…	[<0.10 – <0.10]	…	[4200 – 13 000]
Sudan	…	[0.17 – 0.35]	…	[<0.10 – 0.10]	…	[38 000 – 74 000]
Tunisia	…	[<0.10 – <0.10]	…	[<0.10 – <0.10]	…	[<500 – <1000]

ESTIMATED AIDS-RELATED DEATHS

	2009 Adults newly infected		2009 AIDS-related deaths in adults + children		2001 AIDS-related deaths in adults + children	
	estimate	[low – high estimate]	estimate	[low – high estimate]	estimate	[low – high estimate]
Croatia	…	[<100 – <100]	<100	[<100 – <100]	<100	[<100 – <100]
Czech Republic	…	[<100 – <100]	<100	[<100 – <100]	<100	[<100 – <100]
Denmark	…	[<200 – <500]	<100	[<100 – <200]	<100	[<100 – <100]
Estonia	…	[<1000 – 1000]	<500	[<500 – <1000]	<200	[<100 – <200]
Finland	…	[<100 – <200]	<100	[<100 – <100]	<100	[<100 – <100]
France	6800	[3900 – 10 000]	1700	[1400 – 3900]	1200	[<1000 – 3000]
Germany	3300	[2500 – 4200]	<1000	[<1000 – 1900]	<1000	[<500 – <1000]
Greece	…	[<200 – <500]	<500	[<200 – <500]	<500	[<500 – <500]
Hungary	…	[<100 – <100]	<200	[<100 – <200]	<500	[<200 – <500]
Iceland	…	[<100 – <100]	<100	[<100 – <100]	<100	[<100 – <100]
Ireland	…	[<100 – <500]	<100	[<100 – <200]	<100	[<100 – <100]
Israel	…	[<200 – <500]	<100	[<100 – <200]	<100	[<100 – <100]
Italy	…	[1700 – 6200]	<1000	[<1000 – 4100]	1300	[<1000 – 2400]
Latvia	<1000	[<500 – 1200]	<1000	[<500 – <1000]	<200	[<100 – <500]
Lithuania	<100	[<100 – <200]	<100	[<100 – <100]	<100	[<100 – <100]
Luxembourg	…	[<100 – <100]	<100	[<100 – <100]	<100	[<100 – <100]
Malta	…	[<100 – <100]	<100	[<100 – <100]	<100	[<100 – <100]
Netherlands	…	[<500 – 1100]	<100	[<100 – <500]	<100	[<100 – <100]
Norway	…	[<100 – <500]	<100	[<100 – <200]	<100	[<100 – <100]
Poland	…	[<500 – 1300]	<200	[<100 – <1000]	<100	[<100 – <200]
Portugal	…	[<1000 – 2300]	<500	[<100 – 1300]	<500	[<500 – <500]
Romania	…	[<500 – 1000]	<1000	[<500 – 1200]	<500	[<200 – <1000]
Serbia	…	[<500 – <1000]	<200	[<100 – <500]	<500	[<100 – <500]
Slovakia	…	[<100 – <100]	<100	[<100 – <100]	<100	[<100 – <100]
Slovenia	…	[<100 – <200]	<100	[<100 – <100]	<100	[<100 – <100]
Spain	…	[2200 – 4100]	1600	[1200 – 2000]	1800	[1500 – 2100]
Sweden	…	[<100 – <500]	<100	[<100 – <500]	<100	[<100 – <100]
Switzerland	…	[<500 – 1000]	<100	[<100 – <500]	<200	[<100 – <500]
Turkey	…	[<500 – <1000]	<200	[<100 – <500]	<100	[<100 – <200]
United Kingdom of Great Britain and Northern Ireland	…	[<100 – <100]	<1000	[<500 – 1600]	<500	[<200 – <500]
MIDDLE EAST AND NORTH AFRICA	**68 000**	**[55 000 – 84 000]**	**24 000**	**[20 000 – 27 000]**	**8300**	**[6300 – 11 000]**
Algeria	…	[1000 – 3600]	<1000	[<1000 – 1100]	<500	[<200 – <500]
Djibouti	1100	[<500 – 1500]	1000	[<1000 – 1400]	<1000	[<500 – 1400]
Egypt	…	[<1000 – 2700]	<500	[<500 – <1000]	<200	[<100 – <500]
Iran (Islamic Republic of)	…	[5400 – 11 000]	6400	[5200 – 8000]	2000	[1600 – 2600]
Lebanon	…	[<100 – <500]	<500	[<500 – <500]	<500	[<200 – <500]
Morocco	…	[<100 – <100]	1200	[<1000 – 1600]	<1000	[<1000 – 1000]
Oman	…	[<200 – <500]	<100	[<100 – <100]	<100	[<100 – <100]
Qatar	…	[<100 – <100]	<100	[<100 – <100]	<100	[<100 – <100]
Somalia	…	[3700 – 11 000]	1600	[1200 – 2300]	<1000	[<100 – <1000]
Sudan	…	[34 000 – 67 000]	12 000	[9200 – 15 000]	3500	[<1000 – 6700]
Tunisia	…	[<500 – <1000]	<100	[<100 – <200]	<100	[<100 – <100]

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	ESTIMATED ORPHANS DUE TO AIDS				HIV PREVALENCE (%) IN MOST-AT-RISK GROUPS IN CAPITAL CITY					
	2009 Orphans (0–17) currently living		2001 Orphans (0–17)		Injecting drug users		Female sex workers		Men who have sex with men	
	estimate	[low – high estimate]	estimate	[low – high estimate]	Year	HIV (%)	Year	HIV (%)	Year	HIV (%)
Croatia	…	…	…	…	…	…	…	…	…	…
Czech Republic	…	…	…	…	2009	0.1	…	…	2009	2.6
Denmark	…	…	…	…	…	…	…	…	2009	11.8
Estonia	…	…	…	…	2007	62.5	2006	7.7	2007	1.7
Finland	…	…	…	…	2009	0.7	…	…	…	…
France	…	…	…	…	…	…	…	…	…	…
Germany	…	…	…	…	…	…	…	…	…	…
Greece	…	…	…	…	…	…	…	…	…	…
Hungary	…	…	…	…	…	…	…	…	2009	2.6
Iceland	…	…	…	…	…	…	…	…	…	…
Ireland	…	…	…	…	…	…	…	…	…	…
Israel	…	…	…	…	…	…	…	…	…	…
Italy	…	…	…	…	…	…	…	…	…	…
Latvia	…	…	…	…	2007	22.6	…	…	2008	4.0
Lithuania	…	…	…	…	2008	8.0	…	…	…	…
Luxembourg	…	…	…	…	2008	1.8	…	…	…	…
Malta	…	…	…	…	…	…	…	…	…	…
Netherlands	…	…	…	…	…	…	…	…	…	…
Norway	…	…	…	…	…	…	…	…	…	…
Poland	…	…	…	…	…	…	…	…	…	…
Portugal	…	…	…	…	2008	14.0	…	…	…	…
Romania	…	…	…	…	2009	1.1	2009	1.0	2009	4.4
Serbia	…	…	…	…	2008	4.8	…	…	2008	6.1
Slovakia	…	…	…	…	…	…	…	…	…	…
Slovenia	…	…	…	…	…	…	…	…	2009	1.6
Spain	…	…	…	…	2008	19.5	2008	0.9	2008	10.2
Sweden	…	…	…	…	…	…	…	…	…	…
Switzerland	…	…	…	…	2006	10.9	…	…	2007	8.1
Turkey	…	…	…	…	…	…	…	…	…	…
United Kingdom of Great Britain and Northern Ireland	…	…	…	…	…	…	…	…	…	…
MIDDLE EAST AND NORTH AFRICA	**96 000**	**[73 000 – 120 000]**	**36 000**	**[22 000 – 63 000]**	**…**	**…**	**…**	**…**	**…**	**…**
Algeria	…	…	…	…	…	…	…	…	…	…
Djibouti	…	…	…	…	…	…	2008	20.3	…	…
Egypt	…	…	…	…	…	…	2006	0.9	2006	5.6
Iran (Islamic Republic of)	…	…	…	…	…	…	…	…	…	…
Lebanon	…	…	…	…	…	…	…	…	2008	1.0
Morocco	…	…	…	…	2009	2.1	2009	2.4	…	…
Oman	…	…	…	…	…	…	…	…	…	…
Qatar	…	…	…	…	…	…	…	…	…	…
Somalia	…	…	…	…	…	…	2008	5.5	…	…
Sudan	…	…	…	…	…	…	2008	0.9	…	…
Tunisia	…	…	…	…	2009	3.1	2009	0.4	2009	4.8

ESTIMATED PEOPLE LIVING WITH HIV

	2009 Adults + Children		2001 Adults + Children		2009 Adults (15+)	
	estimate	[low – high estimate]	estimate	[low – high estimate]	estimate	[low – high estimate]
NORTH AMERICA	**1 500 000**	**[1 200 000 – 2 000 000]**	**1 200 000**	**[960 000 – 1 400 000]**	**1 500 000**	**[1 200 000 – 2 000 000]**
Canada	68 000	[53 000 – 83 000]	49 000	[40 000 – 62 000]	68 000	[53 000 – 83 000]
Mexico	220 000	[180 000 – 280 000]	180 000	[150 000 – 210 000]	220 000	[180 000 – 270 000]
United States of America	1 200 000	[930 000 – 1 700 000]	940 000	[730 000 – 1 200 000]	1 200 000	[930 000 – 1 700 000]
CARIBBEAN	**240 000**	**[220 000 – 270 000]**	**240 000**	**[210 000 – 270 000]**	**220 000**	**[200 000 – 250 000]**
Bahamas	6600	[2600 – 11 000]	5900	[3900 – 8500]	6100	[2400 – 11 000]
Barbados	2100	[1800 – 2500]	<1000	[<1000 – 1 000]	2100	[1800 – 2500]
Cuba	7100	[5700 – 8900]	2600	[1900 – 3400]	7000	[5600 – 8800]
Dominican Republic	57 000	[49 000 – 66 000]	54 000	[45 000 – 65 000]	54 000	[45 000 – 62 000]
Haiti	120 000	[110 000 – 140 000]	130 000	[110 000 – 160 000]	110 000	[95 000 – 130 000]
Jamaica	32 000	[21 000 – 45 000]	32 000	[23 000 – 41 000]	31 000	[20 000 – 43 000]
Trinidad and Tobago	15 000	[11 000 – 19 000]	10 000	[7900 – 14 000]	14 000	[11 000 – 19 000]
CENTRAL AND SOUTH AMERICA	**1 400 000**	**[1 200 000 – 1 600 000]**	**1 100 000**	**[1 000 000 – 1 300 000]**	**1 400 000**	**[1 200 000 – 1 600 000]**
Argentina	110 000	[88 000 – 140 000]	80 000	[66 000 – 99 000]	110 000	[87 000 – 140 000]
Belize	4800	[4000 – 5700]	3600	[3000 – 4200]	4400	[3600 – 5300]
Bolivia	12 000	[9000 – 16 000]	12 000	[9100 – 16 000]	11 000	[8400 – 15 000]
Brazil	…	[460 000 – 810 000]	…	[380 000 – 560 000]	…	[450 000 – 800 000]
Chile	40 000	[32 000 – 51 000]	24 000	[19 000 – 31 000]	39 000	[31 000 – 50 000]
Colombia	160 000	[120 000 – 210 000]	210 000	[170 000 – 260 000]	150 000	[120 000 – 200 000]
Costa Rica	9800	[7500 – 13 000]	4400	[3400 – 5900]	9600	[7300 – 12 000]
Ecuador	37 000	[28 000 – 50 000]	36 000	[27 000 – 47 000]	36 000	[27 000 – 49 000]
El Salvador	34 000	[25 000 – 44 000]	25 000	[19 000 – 33 000]	32 000	[24 000 – 42 000]
Guatemala	62 000	[47 000 – 82 000]	31 000	[23 000 – 41 000]	60 000	[45 000 – 79 000]
Guyana	5900	[2700 – 8800]	7800	[5300 – 12 000]	5500	[2400 – 8200]
Honduras	39 000	[26 000 – 51 000]	44 000	[33 000 – 61 000]	37 000	[24 000 – 49 000]
Nicaragua	6900	[5200 – 9100]	3700	[2900 – 4800]	6700	[5000 – 8900]
Panama	20 000	[14 000 – 36 000]	26 000	[17 000 – 50 000]	20 000	[13 000 – 36 000]
Paraguay	13 000	[9800 – 16 000]	9200	[7200 – 13 000]	12 000	[9600 – 16 000]
Peru	75 000	[58 000 – 100 000]	82 000	[65 000 – 100 000]	73 000	[56 000 – 98 000]
Suriname	3700	[2700 – 5300]	3300	[2300 – 4500]	3600	[2700 – 5100]
Uruguay	9900	[8400 – 12 000]	7000	[5900 – 8200]	9600	[8100 – 11 000]
Venezuela	…	…	…	…	…	…

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ESTIMATED PEOPLE LIVING WITH HIV

	2001 Adults (15+)		2009 Adult (15–49) prevalence percent		2001 Adult (15–49) prevalence percent	
	estimate	[low – high estimate]	estimate	[low – high estimate]	estimate	[low – high estimate]
NORTH AMERICA	**1 200 000**	**[950 000 – 1 400 000]**	**0.5**	**[0.4 – 0.7]**	**0.4**	**[0.4 – 0.5]**
Canada	49 000	[40 000 – 62 000]	0.3	[0.2 – 0.4]	0.3	[0.2 – 0.3]
Mexico	180 000	[150 000 – 210 000]	0.3	[0.3 – 0.4]	0.3	[0.2 – 0.4]
United States of America	930 000	[730 000 – 1 200 000]	0.6	[0.4 – 0.8]	0.5	[0.4 – 0.7]
CARIBBEAN	**220 000**	**[200 000 – 250 000]**	**1.0**	**[0.9 – 1.1]**	**1.1**	**[1.0 – 1.2]**
Bahamas	5400	[3400 – 7600]	3.1	[1.2 – 5.4]	3.1	[1.9 – 4.4]
Barbados	<1000	[<1000 – 1000]	1.4	[1.2 – 1.6]	0.5	[0.4 – 0.6]
Cuba	2600	[1900 – 3400]	0.1	[0.1 – 0.1]	<0.1	[<0.1 – 0.1]
Dominican Republic	50 000	[43 000 – 60 000]	0.9	[0.7 – 1.0]	0.9	[0.8 – 1.1]
Haiti	120 000	[100 000 – 140 000]	1.9	[1.7 – 2.2]	2.6	[2.3 – 3.0]
Jamaica	31 000	[22 000 – 39 000]	1.7	[1.1 – 2.5]	1.9	[1.3 – 2.4]
Trinidad and Tobago	10 000	[7800 – 14 000]	1.5	[1.1 – 2.0]	1.2	[0.9 – 1.6]
CENTRAL AND SOUTH AMERICA	**1 100 000**	**[1 000 000 – 1 200 000]**	**0.5**	**[0.4 – 0.6]**	**0.5**	**[0.4 – 0.5]**
Argentina	79 000	[65 000 – 97 000]	0.5	[0.3 – 0.6]	0.4	[0.3 – 0.5]
Belize	3300	[2800 – 3800]	2.3	[2.0 – 2.8]	2.2	[1.9 – 2.6]
Bolivia	11 000	[8600 – 15 000]	0.2	[0.1 – 0.3]	0.2	[0.2 – 0.3]
Brazil	…	[360 000 – 550 000]	…	[0.3 – 0.6]	…	[0.3 – 0.5]
Chile	24 000	[18 000 – 30 000]	0.4	[0.3 – 0.5]	0.3	[0.2 – 0.3]
Colombia	210 000	[160 000 – 260 000]	0.5	[0.4 – 0.7]	0.8	[0.7 – 1.1]
Costa Rica	4400	[3300 – 5800]	0.3	[0.2 – 0.4]	0.2	[0.1 – 0.2]
Ecuador	35 000	[26 000 – 46 000]	0.4	[0.3 – 0.6]	0.5	[0.4 – 0.6]
El Salvador	24 000	[18 000 – 32 000]	0.8	[0.6 – 1.1]	0.8	[0.6 – 1.0]
Guatemala	30 000	[22 000 – 40 000]	0.8	[0.6 – 1.0]	0.5	[0.4 – 0.7]
Guyana	7000	[4600 – 11 000]	1.2	[0.5 – 1.9]	1.4	[0.9 – 2.2]
Honduras	42 000	[31 000 – 57 000]	0.8	[0.5 – 1.0]	1.2	[0.9 – 1.6]
Nicaragua	3600	[2800 – 4700]	0.2	[0.1 – 0.3]	0.1	[0.1 – 0.2]
Panama	25 000	[16 000 – 49 000]	0.9	[0.6 – 1.5]	1.4	[0.9 – 2.7]
Paraguay	9000	[7000 – 12 000]	0.3	[0.2 – 0.4]	0.3	[0.2 – 0.4]
Peru	81 000	[64 000 – 99 000]	0.4	[0.3 – 0.5]	0.5	[0.4 – 0.6]
Suriname	3200	[2300 – 4400]	1.0	[0.7 – 1.4]	1.0	[0.7 – 1.4]
Uruguay	6800	[5800 – 8000]	0.5	[0.4 – 0.6]	0.4	[0.3 – 0.4]
Venezuela	…	…	…	…	…	…

	2009 Women (15+)		2001 Women (15+)		2009 Children (0–14)	
	estimate	[low – high estimate]	estimate	[low – high estimate]	estimate	[low – high estimate]
NORTH AMERICA	**390 000**	**[310 000 – 510 000]**	**270 000**	**[220 000 – 320 000]**	**4500**	**[4000 – 5800]**
Canada	21 000	[16 000 – 25 000]	15 000	[12 000 – 18 000]	…	…
Mexico	59 000	[47 000 – 75 000]	41 000	[33 000 – 49 000]	…	…
United States of America	310 000	[220 000 – 430 000]	210 000	[160 000 – 270 000]	…	…
CARIBBEAN	**120 000**	**[100 000 – 140 000]**	**120 000**	**[100 000 – 140 000]**	**17 000**	**[8500 – 26 000]**
Bahamas	3700	[1500 – 6400]	3300	[2100 – 4600]	…	…
Barbados	<1000	[<1000 – <1000]	<500	[<500 – <500]	…	…
Cuba	2200	[1700 – 2700]	<1000	[<1000 – 1000]	…	…
Dominican Republic	32 000	[26 000 – 37 000]	29 000	[24 000 – 35 000]	…	…
Haiti	67 000	[56 000 – 78 000]	73 000	[61 000 – 87 000]	12 000	[5700 – 18 000]
Jamaica	10 000	[6700 – 14 000]	9900	[7300 – 13 000]	…	…
Trinidad and Tobago	4700	[3500 – 6100]	3300	[2600 – 4300]	…	…
CENTRAL AND SOUTH AMERICA	**490 000**	**[420 000 – 590 000]**	**370 000**	**[330 000 – 420 000]**	**36 000**	**[25 000 – 50 000]**
Argentina	36 000	[28 000 – 45 000]	25 000	[20 000 – 30 000]	…	…
Belize	2600	[2100 – 3100]	1900	[1600 – 2200]	…	…
Bolivia	3600	[2700 – 4800]	3500	[2700 – 4600]	…	…
Brazil	…	[180 000 – 330 000]	…	[140 000 – 210 000]	…	…
Chile	12 000	[9700 – 15 000]	7200	[5500 – 9300]	…	…
Colombia	50 000	[38 000 – 65 000]	65 000	[51 000 – 80 000]	…	…
Costa Rica	2800	[2100 – 3600]	1300	[<1000 – 1700]	…	…
Ecuador	11 000	[8400 – 15 000]	11 000	[8200 – 14 000]	…	…
El Salvador	11 000	[8500 – 14 000]	8000	[6000 – 11 000]	…	…
Guatemala	20 000	[15 000 – 26 000]	9600	[7200 – 13 000]	…	…
Guyana	2800	[1100 – 4200]	3800	[2400 – 5700]	…	…
Honduras	12 000	[7900 – 16 000]	13 000	[9700 – 18 000]	…	…
Nicaragua	2100	[1600 – 2800]	1100	[<1000 – 1400]	…	…
Panama	6300	[4200 – 11 000]	7600	[4900 – 15 000]	…	…
Paraguay	3800	[2900 – 4800]	2700	[2100 – 3700]	…	…
Peru	18 000	[14 000 – 25 000]	15 000	[12 000 – 19 000]	…	…
Suriname	1100	[<1000 – 1600]	<1000	[<1000 – 1300]	…	…
Uruguay	3100	[2600 – 3600]	2100	[1800 – 2500]	…	…
Venezuela	…	…	…	…	…	…

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ESTIMATED PEOPLE LIVING WITH HIV

	2001 Children (0–14)		2009 Young women (15–24) prevalence (%)		2009 Young men (15–24) prevalence (%)	
	estimate	[low – high estimate]	estimate	[low – high estimate]	estimate	[low – high estimate]
NORTH AMERICA	**5200**	**[2900 – 7700]**	**0.2**	**[0.1 – 0.3]**	**0.2**	**[0.2 – 0.4]**
Canada	…	…	0.1	[<0.1 – 0.2]	0.1	[<0.1 – 0.5]
Mexico	…	…	0.1	[0.1 – 0.2]	0.2	[0.1 – 0.2]
United States of America	…	…	0.2	[0.1 – 0.3]	0.3	[0.2 – 0.5]
CARIBBEAN	**18 000**	**[9100 – 27 000]**	**0.8**	**[0.6 – 1.0]**	**0.4**	**[0.3 – 0.7]**
Bahamas	…	…	3.1	[0.8 – 6.6]	1.4	[0.5 – 2.8]
Barbados	…	…	1.1	[0.8 – 1.4]	0.9	[0.7 – 1.1]
Cuba	…	…	0.1	[<0.1 – 0.1]	0.1	[<0.1 – 0.3]
Dominican Republic	…	…	0.7	[0.4 – 0.9]	0.3	[0.1 – 0.4]
Haiti	12 000	[6300 – 19 000]	1.3	[1.0 – 1.8]	0.6	[0.4 – 0.8]
Jamaica	…	…	0.7	[0.3 – 1.4]	1.0	[0.4 – 3.1]
Trinidad and Tobago	…	…	0.7	[0.3 – 1.2]	1.0	[0.4 – 3.3]
CENTRAL AND SOUTH AMERICA	**30 000**	**[20 000 – 42 000]**	**0.2**	**[0.1 – 0.3]**	**0.2**	**[0.2 – 0.5]**
Argentina	…	…	0.2	[0.1 – 0.3]	0.3	[0.1 – 0.8]
Belize	…	…	1.8	[1.4 – 2.7]	0.7	[0.5 – 1.1]
Bolivia	…	…	0.1	[<0.1 – 0.1]	0.1	[<0.1 – 0.3]
Brazil	…	…	…	[0.1 – 0.4]	…	[0.1 – 0.3]
Chile	…	…	0.1	[0.1 – 0.3]	0.2	[0.1 – 0.7]
Colombia	…	…	0.1	[0.1 – 0.3]	0.2	[0.1 – 0.7]
Costa Rica	…	…	0.1	[0.1 – 0.2]	0.2	[0.1 – 0.3]
Ecuador	…	…	0.2	[0.1 – 0.3]	0.2	[0.1 – 0.8]
El Salvador	…	…	0.3	[0.1 – 0.5]	0.4	[0.2 – 1.3]
Guatemala	…	…	0.3	[0.2 – 0.6]	0.5	[0.2 – 1.4]
Guyana	…	…	0.8	[0.2 – 1.5]	0.6	[0.2 – 1.0]
Honduras	…	…	0.2	[0.1 – 0.4]	0.3	[0.1 – 1.1]
Nicaragua	…	…	0.1	[0.1 – 0.1]	0.1	[0.1 – 0.2]
Panama	…	…	0.3	[0.1 – 0.5]	0.4	[0.2 – 1.3]
Paraguay	…	…	0.1	[0.1 – 0.2]	0.2	[0.1 – 0.6]
Peru	…	…	0.1	[0.1 – 0.2]	0.2	[0.1 – 0.3]
Suriname	…	…	0.4	[0.2 – 0.7]	0.6	[0.2 – 2.0]
Uruguay	…	…	0.2	[0.1 – 0.3]	0.3	[0.1 – 1.0]
Venezuela	…	…	…	…	…	…

ESTIMATED NEW HIV INFECTIONS

	2009 Adult (15–49) incidence rate		2001 Adult (15–49) incidence rate		2009 Adults + children newly infected	
	estimate	[low – high estimate]	estimate	[low – high estimate]	estimate	[low – high estimate]
NORTH AMERICA	**<0.10**	**[<0.10 – <0.10]**	**<0.10**	**[<0.10 – <0.10]**	**70 000**	**[44 000 – 130 000]**
Canada	…	[<0.10 – <0.10]	…	[<0.10 – <0.10]	…	[<1000 – 3800]
Mexico	…	[<0.10 – <0.10]	…	[<0.10 – <0.10]	…	[8800 – 21 000]
United States of America	<0.10	[<0.10 – <0.10]	<0.10	[<0.10 – <0.10]	54 000	[24 000 – 110 000]
CARIBBEAN	**<0.10**	**[<0.10 – <0.10]**	**<0.10**	**[<0.10 – 0.11]**	**17 000**	**[13 000 – 21 000]**
Bahamas	…	[<0.10 – 0.62]	…	[<0.10 – 0.43]	…	[<200 – 1200]
Barbados	…	[<0.10 – 0.16]	…	[<0.10 – 0.13]	…	[<200 – <500]
Cuba	…	[<0.10 – <0.10]	…	[<0.10 – <0.10]	…	[<500 – <1000]
Dominican Republic	<0.10	[<0.10 – <0.10]	<0.10	[<0.10 – 0.10]	3600	[1600 – 5000]
Haiti	0.15	[0.10 – 0.19]	0.19	[0.15 – 0.23]	8800	[6500 – 11 000]
Jamaica	0.13	[<0.10 – 0.27]	0.19	[0.10 – 0.25]	2100	[<1000 – 4200]
Trinidad and Tobago	…	[<0.10 – 0.21]	…	[0.10 – 0.19]	…	[<1000 – 1800]
CENTRAL AND SOUTH AMERICA	**<0.10**	**[<0.10 – <0.10]**	**<0.10**	**[<0.10 – <0.10]**	**92 000**	**[70 000 – 120 000]**
Argentina	<0.10	[<0.10 – <0.10]	<0.10	[<0.10 – <0.10]	7500	[4100 – 11 000]
Belize	0.20	[0.13 – 0.32]	0.30	[0.23 – 0.35]	<500	[<500 – <1000]
Bolivia	…	[<0.10 – <0.10]	…	[<0.10 – <0.10]	…	[<1000 – 1600]
Brazil	…	[<0.10 – <0.10]	…	[<0.10 – <0.10]	…	[18 000 – 70 000]
Chile	…	[<0.10 – <0.10]	…	[<0.10 – <0.10]	…	[1400 – 4300]
Colombia	…	[<0.10 – <0.10]	…	[<0.10 – <0.10]	…	[2800 – 16 000]
Costa Rica	…	[<0.10 – <0.10]	…	[<0.10 – <0.10]	…	[<500 – 1100]
Ecuador	…	[<0.10 – <0.10]	…	[<0.10 – <0.10]	…	[1100 – 6200]
El Salvador	…	[<0.10 – 0.11]	…	[<0.10 – 0.14]	…	[1200 – 4000]
Guatemala	…	[<0.10 – 0.15]	…	[<0.10 – 0.12]	…	[3600 – 11 000]
Guyana	…	[<0.10 – 0.17]	…	[<0.10 – <0.10]	…	[<100 – <1000]
Honduras	…	[<0.10 – <0.10]	…	[<0.10 – 0.13]	…	[<1000 – 3700]
Nicaragua	…	[<0.10 – <0.10]	…	[<0.10 – <0.10]	…	[<500 – 1300]
Panama	…	[<0.10 – 0.11]	…	[<0.10 – 0.14]	…	[<1000 – 2200]
Paraguay	…	[<0.10 – <0.10]	…	[<0.10 – <0.10]	…	[<1000 – 1600]
Peru	…	[<0.10 – <0.10]	…	[<0.10 – <0.10]	…	[2300 – 6700]
Suriname	<0.10	[<0.10 – <0.10]	0.11	[<0.10 – 0.16]	<500	[<100 – <500]
Uruguay	…	[<0.10 – <0.10]	…	[<0.10 – <0.10]	…	[<500 – <1000]
Venezuela	…	…	…	…	…	…

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ESTIMATED NEW HIV INFECTIONS

ESTIMATED AIDS-RELATED DEATHS

	2009 Adults newly infected		2009 AIDS-related deaths in adults + children		2001 AIDS-related deaths in adults + children	
	estimate	[low – high estimate]	estimate	[low – high estimate]	estimate	[low – high estimate]
NORTH AMERICA	**69 000**	**[43 000 – 120 000]**	**26 000**	**[22 000 – 44 000]**	**30 000**	**[26 000 – 35 000]**
Canada	…	[<1000 – 3800]	<1000	[<500 – <1000]	<1000	[<500 – <1000]
Mexico	…	[8300 – 20 000]	…	[6400 – 12 000]	…	[9800 – 15 000]
United States of America	54 000	[24 000 – 110 000]	17 000	[13 000 – 36 000]	17 000	[14 000 – 23 000]
CARIBBEAN	**15 000**	**[12 000 – 19 000]**	**12 000**	**[8500 – 15 000]**	**19 000**	**[16 000 – 23 000]**
Bahamas	…	[<100 – 1100]	<500	[<200 – <1000]	<1000	[<500 – <1000]
Barbados	…	[<200 – <500]	<100	[<100 – <100]	<100	[<100 – <100]
Cuba	…	[<500 – <1000]	<100	[<100 – <500]	<200	[<100 – <200]
Dominican Republic	3200	[1300 – 4400]	2300	[1300 – 3400]	3900	[2900 – 5500]
Haiti	7600	[5400 – 10 000]	7100	[5200 – 9400]	12 000	[9200 – 14 000]
Jamaica	2000	[<1000 – 4000]	1200	[<500 – 2100]	2700	[2100 – 3500]
Trinidad and Tobago	…	[<1000 – 1700]	<1000	[<500 – <1000]	<1000	[<500 – <1000]
CENTRAL AND SOUTH AMERICA	**87 000**	**[66 000 – 120 000]**	**58 000**	**[43 000 – 70 000]**	**53 000**	**[44 000 – 65 000]**
Argentina	7400	[4100 – 11 000]	2900	[1600 – 4500]	2800	[1600 – 4100]
Belize	<500	[<500 – <1000]	<500	[<500 – <500]	<500	[<200 – <500]
Bolivia	…	[<500 – 1500]	<1000	[<1000 – 1200]	<1000	[<1000 – 1100]
Brazil	…	[17 000 – 69 000]	…	[2000 – 25 000]	…	[7200 – 24 000]
Chile	…	[1200 – 4000]	…	[<1000 – 2200]	…	[<500 – 1200]
Colombia	…	[2300 – 16 000]	14 000	[11 000 – 18 000]	13 000	[9800 – 17 000]
Costa Rica	…	[<500 – 1000]	<500	[<100 – <1000]	<100	[<100 – <200]
Ecuador	…	[<100 – <100]	2200	[1300 – 3300]	2800	[2100 – 3700]
El Salvador	…	[1000 – 3800]	1400	[<1000 – 2100]	<1000	[<200 – 1100]
Guatemala	…	[3200 – 10 000]	2600	[1600 – 3700]	1500	[1000 – 2100]
Guyana	…	[<100 – <1000]	<500	[<100 – <1000]	<1000	[<1000 – 1300]
Honduras	…	[<1000 – 3400]	2500	[1700 – 3400]	3700	[2800 – 5000]
Nicaragua	…	[<500 – 1300]	<500	[<200 – <500]	<200	[<200 – <500]
Panama	…	[<1000 – 2100]	1500	[<1000 – 3600]	1600	[<1000 – 3200]
Paraguay	…	[<1000 – 1600]	<500	[<500 – <1000]	<500	[<500 – <1000]
Peru	…	[2100 – 6300]	5000	[3800 – 6600]	6300	[5200 – 7900]
Suriname	<200	[<100 – <500]	<200	[<200 – <500]	<500	[<200 – <500]
Uruguay	…	[<500 – <1000]	…	…	…	…
Venezuela	…	…	…	…	…	…

ESTIMATED ORPHANS DUE TO AIDS

HIV PREVALENCE (%) IN MOST-AT-RISK GROUPS IN CAPITAL CITY

	2009 Orphans (0–17) currently living		2001 Orphans (0–17)		Injecting drug users		Female sex workers		Men who have sex with men	
	estimate	[low – high estimate]	estimate	[low – high estimate]	Year	HIV (%)	Year	HIV (%)	Year	HIV (%)
NORTH AMERICA	**140 000**	**[110 000 – 180 000]**	**210 000**	**[160 000 – 260 000]**	**…**	**…**	**…**	**…**	**…**	**…**
Canada	…	…	…	…	2008	12.7	…	…	2008	14.7
Mexico	…	…	…	…	2009	5.0	2009	0.9	2009	10.2
United States of America	…	…	…	…	…	…	…	…	…	…
CARIBBEAN	**140 000**	**[110 000 – 170 000]**	**100 000**	**[63 000 – 170 000]**	**…**	**…**	**…**	**…**	**…**	**…**
Bahamas	…	…	…	…	…	…	…	…	2009	25.6
Barbados	…	…	…	…	…	…	…	…	…	…
Cuba	…	…	…	…	…	…	2009	0.1	2009	0.7
Dominican Republic	…	…	…	…	…	…	2008	4.8	2004	10.7
Haiti	…	…	…	…	…	…	2009	5.3	…	…
Jamaica	…	…	…	…	…	…	2009	4.9	2007	31.8
Trinidad and Tobago	…	…	…	…	…	…	…	…	…	…
CENTRAL AND SOUTH AMERICA	**240 000**	**[200 000 – 280 000]**	**190 000**	**[150 000 – 240 000]**	**…**	**…**	**…**	**…**	**…**	**…**
Argentina	…	…	…	…	2008	11.9	2008	1.9	2008	11.8
Belize	…	…	…	…	…	…	…	…	…	…
Bolivia	…	…	…	…	…	…	…	…	2008	11.6
Brazil	…	…	…	…	2009	5.9	…	…	2009	12.6
Chile	…	…	…	…	…	…	…	…	2009	20.3
Colombia	…	…	…	…	…	…	2008	1.6	…	…
Costa Rica	…	…	…	…	…	…	…	…	2009	12.7
Ecuador	…	…	…	…	…	…	…	…	…	…
El Salvador	…	…	…	…	…	…	2009	4.1	2009	9.8
Guatemala	…	…	…	…	…	…	2006	1.0	2006	18.3
Guyana	…	…	…	…	…	…	2009	16.6	2009	19.4
Honduras	…	…	…	…	…	…	2006	2.3	2006	6.6
Nicaragua	…	…	…	…	…	…	…	…	2009	4.2
Panama	…	…	…	…	…	…	…	…	…	…
Paraguay	…	…	…	…	…	…	2008	1.8	2008	9.6
Peru	…	…	…	…	…	…	…	…	2009	10.1
Suriname	…	…	…	…	…	…	…	…	…	…
Uruguay	…	…	…	…	…	…	…	…	2008	9.1
Venezuela	…	…	…	…	…	…	…	…	…	…

A1

Monitoring progress in national responses to HIV

In adopting the 2001 *Declaration of Commitment on HIV/AIDS*, Member States of the United Nations agreed to systematically review and regularly report on their progress in realizing universal access to HIV prevention, treatment care and support by 2010. As part of that review process and on behalf of the United Nations Secretary-General, the United Nations Joint Programme on HIV/AIDS (UNAIDS) requests Member States to submit biennial reports to UNAIDS—the Country Progress Reports—against a set of standardized core indicators.

The information provided by Country Progress Reports represents the most comprehensive and readily accessible data on the status of the epidemic and progress being made by countries in the response. The primary purpose of this annex is to compile that data in one place, thus providing a transparent monitoring of progress towards the targets set in the *Declaration of Commitment* and the Millennium Development Goals. The data compiled allow a deeper understanding of the global, as well as regional and national responses to the epidemic.

INDICATORS

Core indicators for reporting have been consolidated and refined in each round of reporting since 2003, when the first UNGASS Progress Report, Follow-up to the 2001 UNGASS: Progress Report on the Global Response to HIV/AIDS, was published. This ongoing work is done in collaboration with global partners and the UNAIDS Monitoring and Evaluation Reference Group (MERG), which sets the international standards for monitoring and evaluation. Details on how the indicators were constructed are available on the UNAIDS Web site in the document *UNGASS Monitoring the Declaration of Commitment on HIV/AIDS: Guidelines on the Construction of Core Indicators* (March 2009).

All countries, regardless of their economic or epidemiological status, were requested to report on all indicators, where appropriate. Countries were expected to consider each indicator in light of the individual dynamics of their epidemic. When countries chose not to report on a particular indicator, they were asked to provide an explanation as to why they chose not to report. This allowed for an analysis that differentiates between an absence of data, the inapplicability of particular indicators to particular country situations, or the non-relevance of the particular issue, such as orphans and vulnerable children in low-prevalence settings.

RESPONSE RATES

In 2010, 182 countries (94% of UN Member States) submitted Country Progress Reports to UNAIDS. The proportion of Member States submitting such reports has increased consistently over each of the four rounds of reporting, as seen in figures 1 and 2. In the first round of reporting slightly more than half (54%) of Member States reported, increasing to 64% in 2006 and 77% in 2008.

All but two regions have response rates above 90%. There was a substantial increase in the numbers of reports received from Western and Central Europe, which resulted in an increase in the response rate for this region from 67% in 2008 to 88% in 2010. No change in response rate was observed in East Asia with three of the five countries in the region submitting reports, as was the case in 2008.

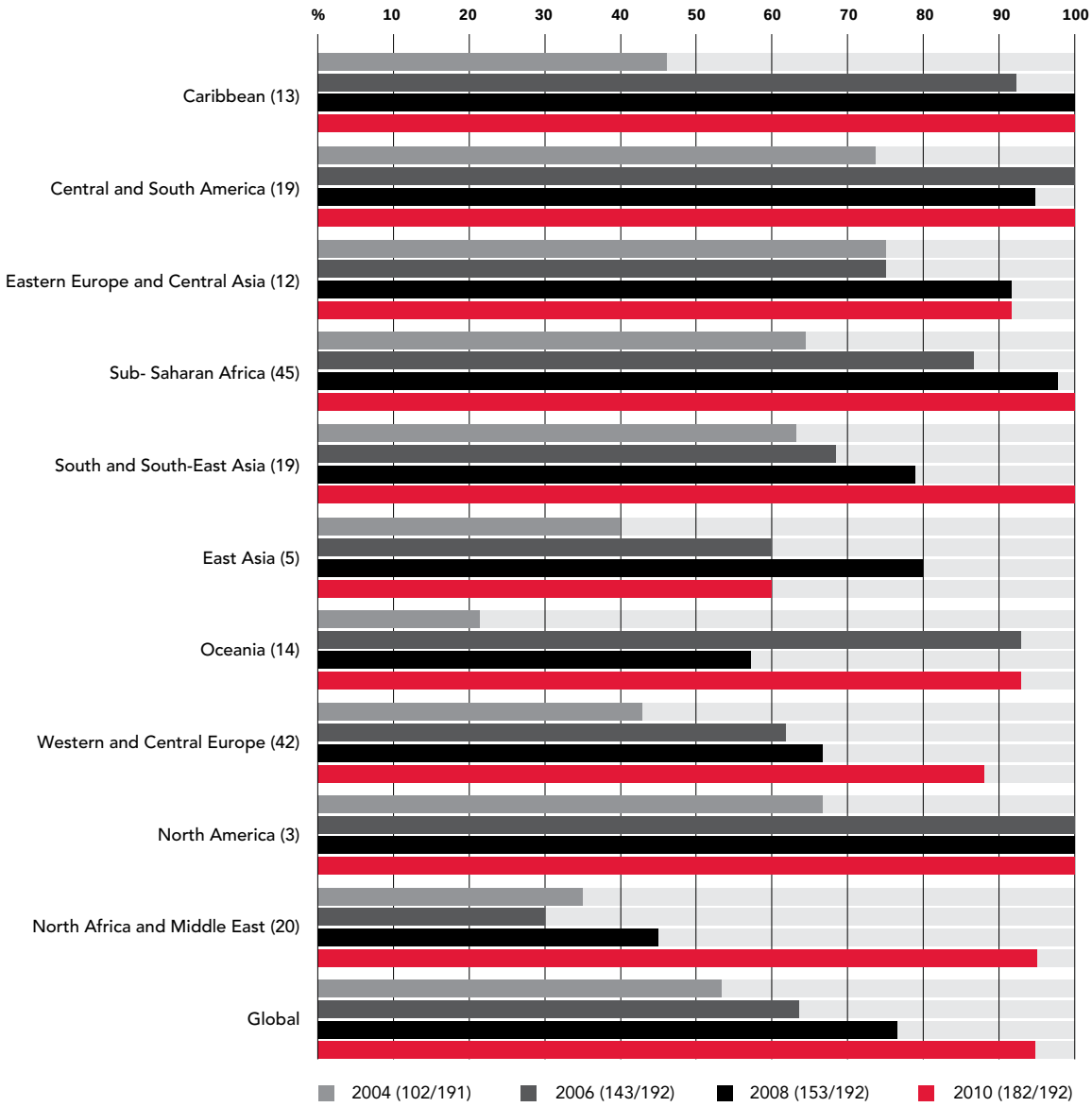
The most remarkable increase in response rates was seen in North Africa and the Middle East, where the percentage of Member States submitting Country Progress Reports jumped from 45% in 2008 to 95% in 2010.

Figure A2.1

Response rates by region and reporting round*

UNGASS Submissions by region (UN Member States reporting/total number of UN Member States)

** Includes all country progress reports submitted to UNAIDS, including late or incomplete submissions*



A2

Figure A2.2

Country Progress Reports received by year*

** Includes all country progress reports submitted to UNAIDS, including late or incomplete submissions*

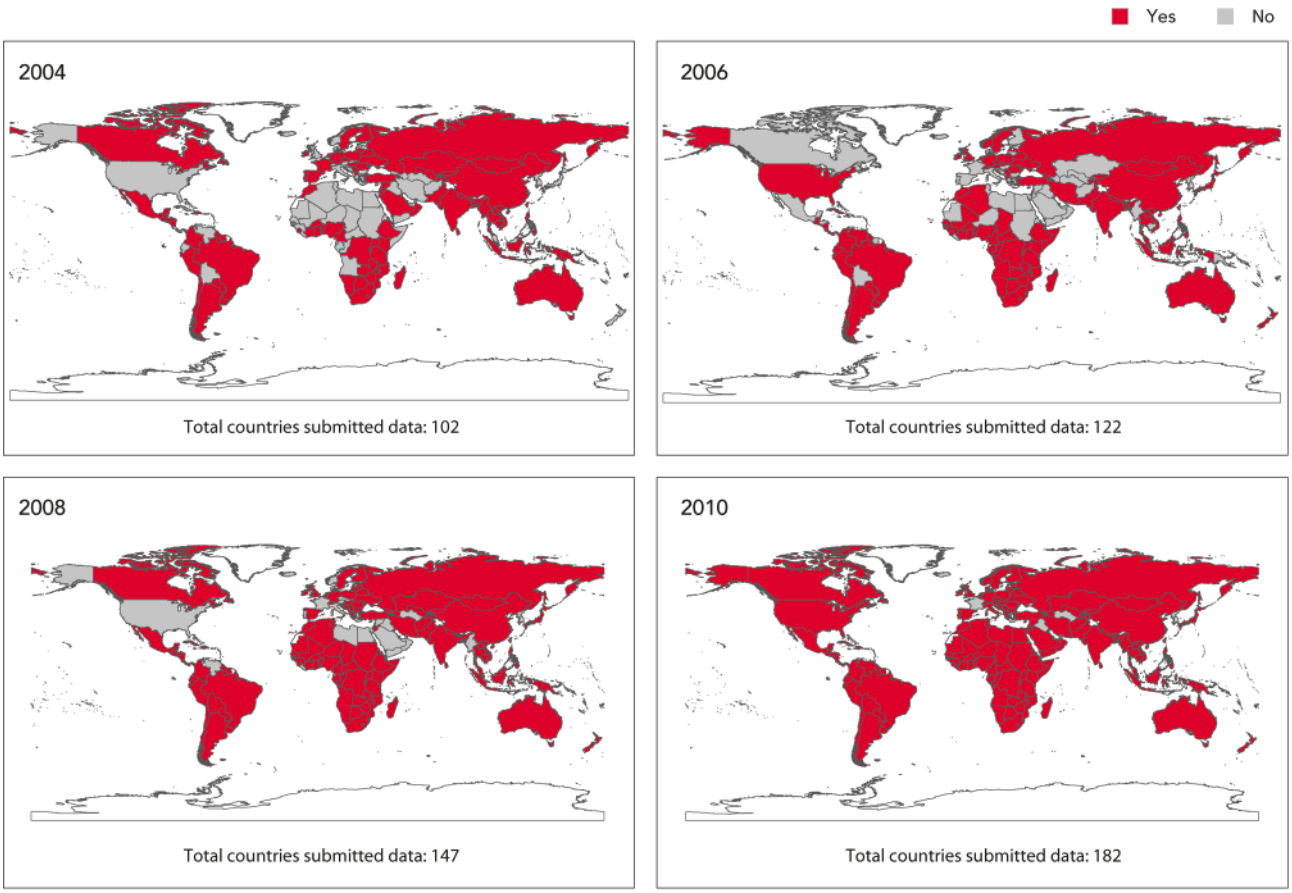


Table A2.1

Countries that did not provide reports on the implementation of the *Declaration of Commitment* in 2010 (n=10)

Andorra	Iceland	San Marino
Democratic People's Republic of Korea	Iraq	Turkmenistan
Republic of Korea	Kiribati	
France	Liechtenstein	

Table A2.2

Countries that provided reports on the implementation of the *Declaration of Commitment* in 2010 (n=182)

Afghanistan	Djibouti	Luxembourg	Samoa
Albania	Dominica	Madagascar	Sao Tome and Principe
Algeria	Dominican Republic	Malawi	Saudi Arabia
Angola	Ecuador	Malaysia	Senegal
Antigua and Barbuda	Egypt	Maldives	Serbia
Argentina	El Salvador	Mali	Seychelles
Armenia	Equatorial Guinea	Malta	Sierra Leone
Australia	Eritrea	Marshall Islands	Singapore
Austria	Estonia	Mauritania	Slovakia
Azerbaijan	Ethiopia	Mauritius	Slovenia
Bahamas	Fiji	Mexico	Solomon Islands
Bahrain	Finland	Micronesia, Federated States of	Somalia
Bangladesh	Gabon	Moldova	South Africa
Barbados	Gambia	Monaco	Spain
Belarus	Georgia	Mongolia	Sri Lanka
Belgium	Germany	Montenegro	Sudan
Belize	Ghana	Morocco	Suriname
Benin	Greece	Mozambique	Swaziland
Bhutan	Grenada	Myanmar	Sweden
Bolivia	Guatemala	Namibia	Switzerland
Bosnia and Herzegovina	Guinea	Nauru	Syrian Arab Republic
Botswana	Guinea-Bissau	Nepal	Tajikistan
Brazil	Guyana	Netherlands	Thailand
Brunei Darussalam	Haiti	New Zealand	The Former Yugoslav Republic of Macedonia
Bulgaria	Honduras	Nicaragua	Timor-Leste
Burkina Faso	Hungary	Niger	Togo
Burundi	India	Nigeria	Tonga
Cambodia	Indonesia	Norway	Trinidad and Tobago
Cameroon	Iran, Islamic Republic of	Oman	Tunisia
Canada	Ireland	Pakistan	Turkey
Cape Verde	Israel	Palau	Tuvalu
Central African Republic	Italy	Panama	Uganda
Chad	Jamaica	Papua New Guinea	Ukraine
Chile	Japan	Paraguay	United Arab Emirates
China	Jordan	Peru	United Kingdom of Great Britain and Northern Ireland
Colombia	Kazakhstan	Philippines	United Republic of Tanzania
Comoros	Kenya	Poland	United States of America
Congo, Republic of the	Kuwait	Portugal	Uruguay
Costa Rica	Kyrgyzstan	Qatar	Uzbekistan
Côte d'Ivoire	Lao People's Democratic Republic	Romania	Vanuatu
Croatia	Latvia	Russian Federation	Venezuela
Cuba	Lebanon	Rwanda	Viet Nam
Cyprus	Lesotho	Saint Kitts and Nevis	Yemen
Czech Republic	Liberia	Saint Lucia	Zambia
Democratic Republic of the Congo	Libyan Arab Jamahiriya	Saint Vincent and the Grenadines	Zimbabwe
Denmark	Lithuania		

A2

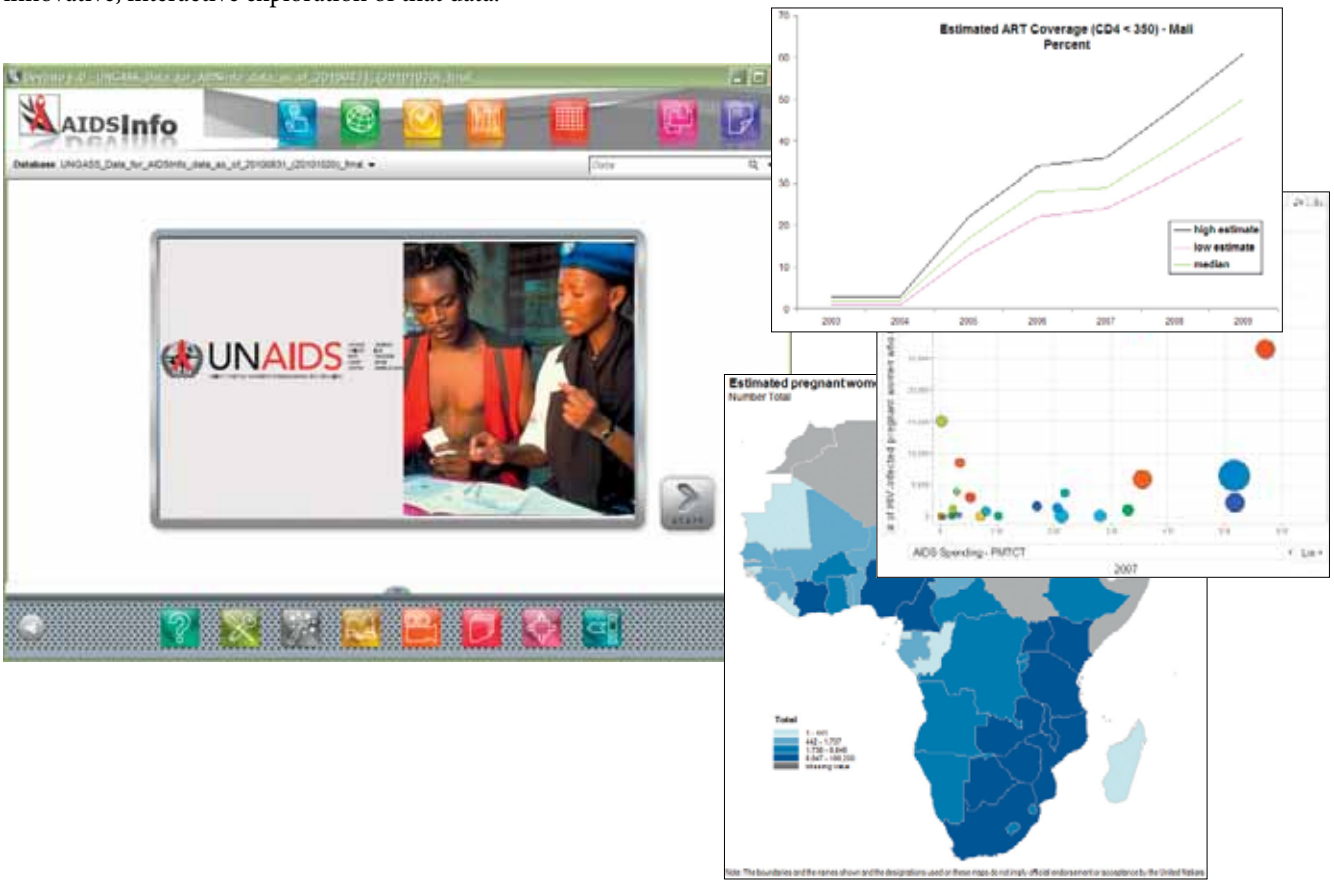
www.AIDSInfoOnline.org

To facilitate the use of AIDS-related data in countries and globally, UNAIDS has developed AIDSInfoOnline. AIDSInfoOnline is a data visualization and dissemination tool, based on the DevInfo project. It contains data from multiple agencies, including WHO, Measure DHS, UNAIDS and UNICEF. AIDSInfoOnline is populated with multisectoral HIV data, including AIDS spending, epidemiological estimates, country-reported programmatic data and National Composite Policy Index responses from government and civil society.

AIDSInfoOnline's data visualization capabilities allow for rapid production of charts, maps and tables, along with export of data and graphics to numerous formats for presentation and analysis. AIDSInfoOnline allows comparison of similar indicators from multiple sources. It is provided free of charge and installable on a PC or as a web-based service.

Under development for AIDSInfoOnline are e-learning materials to familiarize users with the tool and its advanced features, continued sourcing of relevant and complementary data into the database and assistance and guidance to regional and national entities that want to establish HIV/AIDS data hubs.

AIDSInfoOnline aims to be the leading source of HIV/AIDS data globally and provide its users with the most innovative, interactive exploration of that data.



DATA VALIDATION

A comprehensive review of the national Reports was conducted by evaluation specialists at UNAIDS to ensure the completeness, accuracy and harmonization of data in relation to the core indicators. UNAIDS contacted 150 countries with follow-up data questions. The majority of issues regarding reported data were resolved through these communications. Data issues that were not resolved as of the publication date were not included in the data analyses summarized in this report.

In addition, a reconciliation process took place for data reported to UNAIDS, the Global Fund to Fight AIDS, Tuberculosis and Malaria, UNICEF, the US President's Emergency Plan for AIDS Relief, WHO and Measure DHS (data collected through the Demographic and Health Survey programme). As a result of discrepancies identified in this reconciliation, direct communications were undertaken with national focal points for UNGASS reporting in 113 countries to obtain clarification and resolution of outstanding questions. Over 85% of these 113 countries responded with clarifying information.

Due to their complex nature, separate validation processes were undertaken for the National AIDS Spending Matrix and the National Composite Policy Index, a questionnaire that assesses progress in the development of national HIV policies and strategies. A comprehensive data review was undertaken at UNAIDS to check the completeness and accuracy of the funding matrices submitted. One hundred and eleven countries were contacted with follow-up data questions, the majority of which were resolved through these communications. The Policy Index reports were checked for internal consistency and completeness of the response. Confusing or illogical values were corrected; countries were contacted in cases of substantial missing data and multiple, non-consolidated Policy Index submissions. To resolve data issues relating to the Policy Index, 67 countries were contacted, the majority of countries responded.

NATIONAL COMPOSITE POLICY INDEX (NCPI)

The National Composite Policy Index, (NCPI), is a questionnaire completed through a review of relevant documents and interviewing people most knowledgeable about the topics covered. One part[1] of the NCPI is completed by government officials, while another part[2] is completed by representatives from civil society and bilateral or multilateral organizations. The recommended consultative process for completing the NCPI aims to foster an environment conducive to including both government and nongovernment perspectives in the consolidated NCPI response that is eventually submitted by the government as part of its UNGASS report. It is strongly recommended that a final workshop is organized with key stakeholders, including representatives from networks of people living with HIV and from populations at higher risk of HIV and other vulnerable populations, to present, discuss and validate the NCPI responses and write-up before the final submission. In general, NCPI responses provided by the government are often more optimistic than those provided by nongovernment respondents.

As there are over 200 data points for each country NCPI, not all data are included in the data tables presented in this report, but are available alongside individual country reports on the UNAIDS website and on AIDSInfoOnline.org. Validated data from 171 UN member states were included in the analyses summarized in this report.

CHALLENGES IN MONITORING KEY POPULATIONS AT RISK

Ensuring country-level representative samples and establishing a global information system regarding programme coverage and risk behaviours for key populations at higher risk for HIV[3] present significant technical and ethical challenges. Methods are being developed to improve sampling of these often hard-to-reach populations, such as respondent-driven sampling. While new methods may lead to samples that are more representative, it is recognized that obtaining a truly representative national sample may never be feasible. However, even though countries may not be able to attest to the national representativeness of samples used for surveys of key populations at higher risk for HIV, repeated measures using the same sampling frame and methodology can produce reliable data on trends in behaviours and service coverage.

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[1] Government officials complete questions on the national strategic plan, political support, and key policies and strategies of HIV programmes.

[2] Nongovernment representatives complete questions on the country's human rights context in relation to HIV; civil society involvement in the HIV response; and key policies and strategies of HIV programmes.

[3] These groups were previously referred to as most-at-risk populations.

The data from behavioural surveillance surveys (BSS), which are often obtained from urban convenience samples in programme catchment areas, are likely to produce a bias when measuring service coverage and risk behaviours. In order to enable the monitoring of trends countries were advised to keep theses biases constant by using a consistent methodology and sampling frame. In order to better understand potential biases and accurately interpret the data obtained in these surveys countries were encouraged to report data for these indicators that had been reviewed and endorsed by technical experts within the country, such as monitoring and evaluation technical working groups or national research councils.

During the global data analysis, a number of methodological differences among countries were observed in the approach for data collection on key populations at risk. These differences mostly relate to group definitions, measurement tools and time periods applied for the data collection. All recognized differences are systematically presented in the footnotes provided in the tables.

On a country level, it is important to interpret these indicator data alongside the country-reported NCPI, which provides an overview of the policy environment and programmatic response regarding key populations at risk in a given country, from the perspective of both the government and nongovernmental groups and civil society.

NATIONAL CONSULTATION

While they are perhaps most pronounced in monitoring the behaviours and service coverage of key populations at risk of HIV, methodological challenges affect any efforts to obtain national estimates of behaviours and services. It is therefore important to assess potential biases and other weaknesses of all available data in order to obtain the most robust assessment possible of the status of the national response.

Countries are strongly encouraged to undertake a consultation process with all relevant stakeholders to review and consolidate national-level data. The purpose of this consultation is to collectively assess the strengths and weaknesses of these data, and to obtain consensus on the interpretation of these data. Such discussions allow for a better understanding of national responses, and contribute to a strengthening of multisectoral responses.

The vast majority of Country Progress Reports received provided information about the consultation process that was used for the validation and interpretation of the data reported. These reports are available in full and unaltered on the UNAIDS website at www.unaids.org.

COUNTRY DATA TABLES

The following tables present data submitted to UNAIDS in Country Progress Reports, as a part of the monitoring of progress towards the *Declaration of Commitment*. Where indicators and methods were consistent across reporting years, all available data from previous years are provided in order to allow the reader to examine changes over time. Where possible the year that the data were collected was differentiated from the year of reporting. The percentages and numbers in the tables are rounded to the nearest whole number. Some of the Country Progress Report data were still under review with countries at the time of production of this reference report. Where this is the case, it has been explicitly footnoted in the Indicator Data Tables.

Countries may not have submitted data for a given indicator because either (1) no data were available with which to construct the indicator according to the UNGASS definition, (2) the country uses an alternate methodology or indicator for tracking this particular issue, or (3) the country chose not to report on the indicator because it was considered not relevant to the county's epidemic. In some instances an alternative source was used to provide values when a country submission was not received for that indicator. An example of this is the blood safety indicator, where supplementary values were provided by the World Health Organization (Department of Blood Transfusion Safety). Where no data were reported for a given indicator, and no data for that country are available from another comparable source, that country has been excluded from the relevant data table.

Values printed in the tables are those endorsed by countries. In some instances these values differ from those originally submitted as a result of the reconciliation process. As such, some values in these data tables may differ from those published in individual Country Progress Reports.

In addition to data reported by countries, values for these countries from the most recent Demographic and Health Survey or Multiple Indicator Cluster survey are provided. In the absence of confidence intervals and detailed

methodological notes with which to interpret original country submissions, these values allow for some very simple data triangulation. However, in many instances the DHS or Multiple Indicator Cluster Survey was used as the source of country reporting, which should not be misinterpreted as a convergence of values from different sources rather than a repetition of the same data.

MONITORING PROGRESS TOWARDS MILLENNIUM DEVELOPMENT GOAL 6

Progress towards Millennium Development Goal (MDG) 6, "to halt and begin to reverse the HIV epidemic", is monitored using data contained in Country Progress Report submissions received from Member States of the United Nations. These reports include data on 25 standardized core indicators for use in monitoring progress towards the *Declaration of Commitment* made in the 2001 United Nations General Assembly Special Session on HIV/AIDS (UNGASS).

This report describes and presents individual country data for the 25 UNGASS indicators. five of which are also explicitly included in the core set of indicators used for monitoring progress towards MDG 6 and are available in the MDG database at www.mdgs.un.org. Data for these five indicators are sourced from Country Progress Reports and provided to the United Nations Statistics Division by UNAIDS, UNICEF and WHO. Table A2.3 shows the response rates for these indicators over the four rounds of UNGASS reporting.

Table A2.3

Response rates for the indicators for monitoring progress towards Millennium Development Goal 6: to halt and begin to reverse the HIV epidemic

		2004	2006	2008	2010
ANTIRETROVIRAL THERAPY	Number of responding countries	113	118	117	154
	Response rate	60%	61%	61%	80%
ORPHANS' SCHOOL ATTENDANCE	Number of responding countries	N/A	N/A	50	46
	Response rate	N/A	N/A	26%	24%
YOUNG PEOPLES' KNOWLEDGE	Number of responding countries	38	16	110	119
	Response rate	20%	8%	57%	62%
CONDOM USE	Number of responding countries	34	20	91	106
	Response rate	18%	10%	47%	55%
PREVALENCE	Number of responding countries	N/A	N/A	91	106
	Response rate	N/A	N/A	47%	55%

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National commitment indicators

AIDS SPENDING

As the national and international response to AIDS continues to scale up, it is increasingly important to accurately track in detail both where the funds originate and how they are spent at the national level. The data are used to measure national commitment and action, which is an important component of the UNGASS *Declaration of Commitment on HIV/AIDS*. When aggregated across multiple countries, the data help to evaluate the status of the response globally. In addition, the data help national-level decision-makers monitor the scope and effectiveness of their programmes, and provide the basis for resource allocation and improved strategic planning processes.

Since different countries can choose from among different methodologies and tools to monitor the flow of AIDS funding (e.g. National AIDS Spending Assessments (NASA), AIDS sub-account of the National Health Accounts (NHA) and ad hoc Resource Flows Surveys), the National AIDS Spending Matrix includes a spreadsheet that allows financial data from any of these three methodologies to be easily entered, reviewed and reported. While NASA provide information on expenditures on activities performed outside the health system, methods have been developed to allow comparison between NASA and NHA for AIDS health expenditures. Both tools can therefore track AIDS-health expenditures. A similar alignment process was undertaken for the UNFPA/UNAIDS/Netherlands Interdisciplinary Demographic Institute Resource Flows Project.

Definition

Domestic and international AIDS spending by categories and financing sources

Methodology

This indicator is measured using a National AIDS Spending Assessment, which documents actual expenditures classified by eight AIDS spending categories and by three main sources of financing, including public expenditure from its own sources (i.e. such government revenues as taxes) and from international sources.

Spending categories

1. Prevention.
2. Care and treatment.
3. Orphans and vulnerable children.
4. Programme management and administration strengthening.
5. Incentives for human resources.
6. Social protection and social services (excluding orphans and vulnerable children).
7. Enabling environment and community development.
8. Research (excluding operations research included under programme management).

Financing sources

1. Domestic public.
2. International.
3. Domestic private (optional for UNGASS reporting).

Table A2.4

Response rates for AIDS spending

		2004	2006	2008	2010
AIDS SPENDING	Number of responding countries	N/A	95	106	137
	Response rate	N/A	50%	55%	71%

In 2010, 137 countries (71% of UN Member States) reported on domestic and international AIDS spending. Response rates for this indicator increased consistently over each round of reporting: 95 countries reported in 2006, 106 in 2008 and 137 in 2010. Eastern Europe and Central Asia, Central and South America, South and South East Asia and sub-Saharan Africa are the regions with the highest response rate, with more than 80% of the countries on these regions reporting on HIV spending. Not all countries reported a complete spending matrix. Some countries reported only total spending (11%) hence spending figures were not disaggregated among the eight AIDS spending categories (Prevention, Treatment and care, OVC, etc.). Out of the 122 countries that did report on spending using the AIDS Spending Categories, 112 countries reported spending on some or all of the sub categories of the eight AIDS Spending Categories such as: Antiretroviral therapy, Home-based care, Prevention of mother-to-child transmission or Blood safety among others.

GOVERNMENT HIV AND AIDS POLICIES—NATIONAL COMPOSITE POLICY INDEX

Purpose

To assess progress in the development and implementation of national-level HIV policies, strategies and laws.

The NCPI is an extensive questionnaire with close to 200 questions. It is the most comprehensive standardized questionnaire available to asses the following broad areas of policy, strategy and programme implementation for the HIV response:

Part A—completed by government respondents

1. Strategic plan
2. Political support
3. Prevention
4. Treatment, care and support
5. Monitoring and evaluation

Part B—completed by civil society respondents

1. Human rights
2. Civil society involvement
3. Prevention
4. Care and support

Although the NCPI is often referred to as an 'indicator' or index, it is not used in that sense. The NCPI provides a unique opportunity for the variety of stakeholders to take stock of progress made and to discuss what still needs to be done to support an effective and efficient HIV response. Many of the Country Progress reports received in 2010 describe the role the NCPI has had in strengthening in-country collaboration and increasing shared ownership of the HIV response.

The NCPI is an integral part of the UNGASS set of indicators and has been so since the first reporting round. Some of the questions have been the same since 2004 and the majority of the questions are similar in this reporting round to what they were in 2006 and 2008. This makes it possible to do trend analyses.

Many of the standardized responses are complemented with open text boxes. These text boxes facilitate a better understanding of the current country situation, provide examples of good practice for others to learn from and can pinpoint issues for further improvement.

Out of the 182 countries that submitted UNGASS reports, 171 countries (94%) also submitted the NCPI. This is an inspiring increase (in 2004 only 88 countries submitted NCPI reports). All countries except one submitted both part A and part B in this year's round of reporting. Representatives from around 2000 organizations, the majority being civil society organizations, took part in the preparation of the reports.

Table A2.5

Response rates for the National Composite Policy Index

		2004	2006	2008	2010
NATIONAL COMPOSITE POLICY INDEX	Number of responding countries	88	95	137	171
	Response rate	47%	50%	71%	89%

Full NCPI reports including the answers from both the standardized responses and the text boxes are found next to the individual country reports on the UNAIDS web site. A small subset of the information available is presented in the following tables. Full access to NCPI data is available through www.AIDSInfoOnline.org.

Indicators for health sector interventions

BLOOD SAFETY

HIV is efficiently transmitted via transfusion of unsafe blood and blood products. The establishment of systems to ensure that all donated blood is screened for transfusion-transmissible infections, including HIV (and also hepatitis B and C) is a core component of every national blood programme. Globally, however, there are significant variations in the extent to which donated blood is screened, the screening strategies adopted and the overall quality and effectiveness of the blood screening process. As a result, in many countries the recipients of blood and blood products remain at unacceptable risk of acquiring life-threatening infections that could easily be prevented.

Purpose

To assess progress in ensuring a safe blood supply. The indicator applies to all countries and it is measured

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annually using the WHO Global Database on Blood Safety protocol.

Definition

The percentage of donated blood units screened for HIV in a quality-assured manner.

Numerator: number of donated blood units screened for HIV in blood centres/blood screening laboratories that have both: (1) followed documented standard operating procedures and (2) participated in an external quality assurance scheme.

Denominator: total number of blood units donated.

Table A2.6

Response rates for blood safety

		2004	2006	2008	2010
BLOOD SAFETY	Number of responding countries	N/A	N/A	130	165
	Response rate	N/A	N/A	68%	86%

ANTIRETROVIRAL THERAPY

Purpose

To assess the progress of countries in providing antiretroviral combination therapy to adults and children with advanced HIV infection. The indicator is applicable to all countries and data for the numerator is collected continuously (monthly or quarterly) with the denominator estimated.

Definition

Percentage of adults and children with advanced HIV infection receiving antiretroviral therapy.

Numerator: number of adults and children with advanced HIV infection who are currently receiving antiretroviral therapy in accordance with the nationally approved treatment protocol (or WHO/UNAIDS standards) at the end of the reporting period.

Denominator: estimated number of adults and children with advanced HIV infection.

All analyses of this indicator reflect numerators which were reconciled between UNAIDS, WHO and UNICEF. To ensure comparability between countries, denominators estimated using the UNAIDS/WHO Reference group on Estimates, Modelling and Projections methodology were used for all analyses. The country-reported denominators are also presented in the data table.

Table A2.7

Response rates for HIV treatment

		2004	2006	2008	2010
HIV TREATMENT	Number of responding countries	113	118	117	154
	Response rate	60%	61%	61%	80%

RETENTION ON ANTIRETROVIRAL THERAPY AFTER 12 MONTHS

The goals of any programme of antiretroviral therapy (ART) are to increase survival and quality of life among infected individuals. As ART is scaled up in countries around the world, it is also important to understand why and how many people drop out of treatment programmes. These data can be used to demonstrate the effectiveness of those programmes and highlight obstacles to expanding and improving them.

Purpose

To assess progress in retaining infected adults and children on ART.

Definition

Percentage of adults and children with HIV known to be on treatment 12 months after initiation of antiretroviral therapy.

Numerator: number of adults and children who are on ART at 12 months after initiating treatment.

Denominator: total number of adults and children who initiated ART who were expected to achieve 12-month outcomes within the reporting period, including those who have died since starting ART, those who have stopped ART and those recorded as lost to follow-up at month 12.

This indicator reflects retention rates on ART, rather than survival rates. To determine survival rates individuals who stopped ART or were lost to follow-up would need to be excluded. In cases where it is known that a reported data value is not consistent with this definition, this has been footnoted in the data tables.

Table A2.8

Response rates for survival (retention) on antiretroviral therapy

		2004	2006	2008	2010
SURVIVAL ON ANTIRETROVIRAL THERAPY	Number of responding countries	N/A	11	106	143
	Response rate	N/A	6%	55%	74%

PREVENTION OF MOTHER-TO-CHILD TRANSMISSION

In the absence of any preventive interventions, infants born to and breastfed by HIV-infected women have roughly a one-in-three chance of acquiring infection themselves. This can happen during pregnancy, during labour and delivery or after delivery through breastfeeding. Comprehensive programmes to reduce the number of children who become infected with HIV utilize four strategies, known as the "four prongs" for the prevention of mother-to-child transmission. These are: primary prevention of HIV for women of child bearing age; prevention of unwanted pregnancies for women living with HIV; antiretroviral prophylaxis for the mother; and antiretroviral prophylaxis for the child. The risk of mother-to-child transmission can be further reduced through the implementation of safe delivery practices and safe breastfeeding. This indicator measures one of the four prongs—the provision of prophylactic antiretroviral therapy to the mother.

Purpose

To assess progress in preventing vertical transmission of HIV.

Definition

Percentage of HIV-infected pregnant women who received antiretrovirals to reduce the risk of mother-to-child transmission.

Numerator: number of HIV-infected pregnant women who received antiretrovirals during the last 12 months to reduce mother-to-child transmission.

Denominator: estimated number of HIV-infected pregnant women in the last 12 months.

All analyses of this indicator reflect numerators which were reconciled between UNAIDS, WHO and UNICEF. To ensure comparability between countries, denominators estimated using the UNAIDS/WHO Reference group on Estimates, Modelling and Projections methodology were used for all analyses. The country-reported denominators are also presented in the data table.

For data representing 2007, some countries did not report data reflecting 12 months and in these instances the data were projected in order to reflect a consistent time period.[4]

Table A2.9

Response rates for prevention of mother to child transmission

		2004	2006	2008	2010
PREVENTION OF MOTHER TO CHILD TRANSMISSION	Number of responding countries	52	45	100	135
	Response rate	28%	24%	52%	70%

The data tables include additional data on the prevention of mother-to-child transmission provided by the World Health Organization. These data were gathered through the joint WHO/UNICEF/UNAIDS monitoring of progress towards Universal Access in the Health Sector.

CO-MANAGEMENT OF TUBERCULOSIS AND HIV

Tuberculosis (TB) is one of the most common causes of morbidity and mortality in people living with HIV, including those on antiretroviral therapy. Intensified TB case-finding and access to quality diagnosis and treatment of TB in accordance with international/national guidelines are essential for improving the quality and quantity of life for people living with HIV.

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[4] Method for projection – all values reported that represent less than 12 month period are projected taking the number of HIV positive pregnant women on antiretrovirals per month and dividing by the number of months the data represents and multiplying by 12 months.

Purpose

To assess progress in detecting and treating TB in people living with HIV.

Definition

Percentage of estimated HIV-positive incident TB cases that received treatment for TB and HIV.

Numerator: number of adults with advanced HIV infection who are currently receiving antiretroviral combination therapy in accordance with the nationally approved treatment protocol (or WHO/UNAIDS standards) and who were started on TB treatment (in accordance with national TB programme guidelines) within the reporting year.

Denominator: estimated number of incident TB cases in people living with HIV.

Table A2.10

Response rates for co-management of tuberculosis and HIV

		2004	2006	2008	2010
CO-MANAGEMENT OF TUBERCULOSIS AND HIV	Number of responding countries	N/A	N/A	88	119
	Response rate	N/A	N/A	46%	62%

General population indicators

SUPPORT FOR CHILDREN AFFECTED BY HIV AND AIDS

Care and support for orphaned children comes from families and communities. As the number of orphaned and vulnerable children continues to grow, those supporting families and communities themselves require support.

Purpose

To assess progress in providing support to households that are caring for orphaned and vulnerable children aged 0–17.

Definition

Percentage of orphaned and vulnerable children aged 0–17 whose households received free basic external support in caring for the child.

Numerator: number of orphaned and vulnerable children who live in households that received at least one of four types of support for each child.

Denominator: total number of orphaned and vulnerable children aged 0–17.

For the purposes of this indicator an orphan is defined as a child below the age of 18 who has lost one or both parents.

A child made vulnerable by HIV is below the age of 18, and:

(i), has lost one or both parents; or

(ii), has a chronically ill parent (regardless of whether the parent lives in the same household as the child); or

(iii), lives in a household where, in the last 12 months, at least one adult died and was sick for three of the four months before he or she died; or

(iv), lives in a household where at least one adult was seriously ill for at least three of the past 12 months.

A number of countries chose to report on this indicator using data obtained through HIV testing programmes. These data are not comparable to data obtained through general population-based surveys.

Table A2.11

Response rates for support for children affected by HIV and AIDS

		2004	2006	2008	2010
SUPPORT FOR CHILDREN AFFECTED BY HIV AND AIDS	Number of responding countries	N/A	8	36	42
	Response rate	N/A	4%	19%	22%

ORPHANS SCHOOL ATTENDANCE

AIDS claims young adults just at the time in their lives when they are forming families and bringing up children. As a result, orphan prevalence is rising steadily in many countries, while fewer relatives within the prime adult ages mean that orphaned children face an increasingly uncertain future. Orphanhood is frequently accompanied by prejudice and increased poverty, factors that can further jeopardize children's chances of completing school education and may lead to the adoption of

survival strategies that increase vulnerability to HIV. It is important therefore to monitor the extent to which AIDS support programmes succeed in securing the educational opportunities of orphaned children.

Purpose

To assess progress towards preventing relative disadvantage in school attendance among orphans compared to non-orphans.

Definition

Current school attendance among orphans and non-orphans aged 10–14.

Part A: Current school attendance of orphans aged 10–14

Numerator: number of children who have lost both parents and who attend school.

Denominator: number of children who have lost both parents.

Part B: Current school attendance of children aged 10–14 both of whose parents are alive and who live with at least one parent.

Numerator: number of children whose two parents are alive who are living with at least one parent and who attend school.

Denominator: number of children whose two parents are alive who are living with at least one parent.

Table A2.12

Response rates for orphans' school attendance

		2004	2006	2008	2010
ORPHANS' SCHOOL ATTENDANCE	Number of responding countries	N/A	N/A	50	46
	Response rate	N/A	N/A	26%	24%

LIFE SKILLS-BASED HIV EDUCATION IN SCHOOLS

Life skills-based education uses participatory exercises to teach behaviours to young people that help them deal with the challenges and demands of everyday life. Such education can include decision-making and problem-solving skills, creative and critical thinking, self-awareness, communication and interpersonal relations. It can also teach young people how to cope with their emotions and causes of stress. When adapted specifically for HIV education in schools, a life skills-based approach helps young people understand and assess the individual, social and environmental factors that raise and lower the risk of HIV transmission. When properly implemented, it can have a positive effect on behaviours, including delay in sexual debut and reduction in number of sexual partners.

Purpose

To assess progress towards implementation of life skills-based HIV education in all schools.

Definition

Percentage of schools that provided life skills-based HIV education in the last academic year.

Numerator: number of schools that provided life skills-based HIV education in the last academic year.

Denominator: number of schools surveyed.

Table A2.13

Response rates for life skills-based HIV education in schools

		2004	2006	2008	2010
LIFE SKILLS-BASED HIV EDUCATION IN SCHOOLS	Number of responding countries	N/A	N/A	74	99
	Response rate	N/A	N/A	39%	52%

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YOUNG PEOPLE'S KNOWLEDGE ABOUT HIV PREVENTION

HIV epidemics are sustained primarily through sexual transmission of infection to successive generations of young people. Sound knowledge about HIV and AIDS is an essential prerequisite—albeit insufficient in itself—for adoption of behaviours that reduce the risk of HIV transmission.

Purpose

To assess progress towards comprehensive knowledge of the essential facts about HIV transmission.

Definition

Percentage of young people aged 15–24 who both correctly identify ways of preventing the sexual transmission of HIV and reject major misconceptions about HIV transmission.

Numerator: number of respondents aged 15–24 years who gave the correct answer to all five of the following questions:

1. Can the risk of HIV transmission be reduced by having sex with only one uninfected partner who has no other partners?
2. Can a person reduce the risk of getting HIV by using a condom every time they have sex?
3. Can a healthy-looking person have HIV?
4. Can a person get HIV from mosquito bites?
5. Can a person get HIV by sharing food with someone who is infected?

Denominator: number of all respondents aged 15–24.

Table A2.14

Response rates for young peoples' knowledge

		2004	2006	2008	2010
YOUNG PEOPLES' KNOWLEDGE	Number of responding countries	38	16	110	119
	Response rate	20%	8%	57%	62%

HIV TESTING IN THE GENERAL POPULATION

HIV testing and counselling is a critical element in the HIV response, as it facilitates HIV treatment and care and other prevention. In addition, testing increases the awareness of people living with HIV of their own status and encourages them to take protective measures. Finally, HIV testing increases social awareness of HIV and can reduce stigma and discrimination towards people living with HIV. Trends in the uptake of HIV testing and counselling can be assessed based on the results of successive surveys conducted in the same country over time. It should be noted that while this indicator measures the proportion of the general population who have been tested in a 12 month period, this should not be taken to imply that all people should be tested annually. The frequency with which people should be tested should be determined based on their individual behaviour patterns and the nature of the HIV epidemic in their country.

Purpose

To assess progress in implementing HIV testing and counselling.

Definition

Percentage of women and men aged 15–49 who received an HIV test in the last 12 months and who know their results.

Numerator: number of respondents aged 15–49 who have been tested for HIV during the last 12 months and who know their results.

Denominator: number of all respondents aged 15–49.

A number of countries chose to report on this indicator using data obtained through HIV testing programmes. These data are not comparable to data obtained through general population-based surveys and are footnoted in the data table.

Table A2.15

Response rates for HIV testing in the general population

		2004	2006	2008	2010
HIV TESTING IN THE GENERAL POPULATION	Number of responding countries	N/A	N/A	102	116
	Response rate	N/A	N/A	53%	60%

SEX BEFORE THE AGE OF 15

A HIV prevention strategy adopted by many countries is to delay the age at which young people first have sex and discourage premarital sexual activity because it reduces their potential exposure to HIV. There is also evidence to suggest that first having sex at a later age reduces susceptibility to infection per act of sex, at least for women.

Purpose

To assess progress in increasing the age at which young women and men aged 15–24 first have sex.

Definition

Percentage of young women and men aged 15–24 who have had sexual intercourse before the age of 15.

Numerator: number of respondents aged 15–24 who report the age at which they first had sexual intercourse as under 15 years.

Denominator: number of all respondents aged 15–24.

Table A2.16

Response rates for sex before the age of 15

		2004	2006	2008	2010
SEX BEFORE THE AGE OF 15	Number of responding countries	N/A	23	108	117
	Response rate	N/A	12%	56%	61%

HIGHER-RISK SEX

The spread of HIV is, for the most part, a function of unprotected sex. Individuals who have multiple partners (concurrently or sequentially) have a higher risk of HIV transmission than individuals that do not link into a wider sexual network.

Purpose

To assess progress in reducing the percentage of people who have higher-risk sex.

Definition

Percentage of women and men aged 15–49 who have had sexual intercourse with more than one partner in the last 12 months.

Numerator: number of respondents aged 15–49 who have had sexual intercourse with more than one partner in the last 12 months .

Denominator: number of all respondents aged 15–49.

Table A2.17

Response rates for higher-risk sex

		2004	2006	2008	2010
HIGHER-RISK SEX	Number of responding countries	12	19	97	108
	Response rate	6%	10%	51%	56%

CONDOM USE DURING HIGHER-RISK SEX

Condom use is effective in protecting against HIV and other infections transmitted through sexual intercourse. Condom use rates are an important measure of protection against HIV, especially among people with multiple sexual partners.

Purpose

To assess progress towards preventing exposure to HIV through unprotected sex with non-regular partners.

Definition

Percentage of women and men aged 15–49 who had more than one partner in the past 12 months who used a condom during their last sexual intercourse.

Numerator: number of respondents aged 15–49 who reported having had more than one sexual partner in the last 12 months who also reported that a condom was used the last time they had sex.

Denominator: number of respondents aged 15–49 who reported having had more than one sexual partner in the last 12 months.

Table A2.18

Response rates for condom use during higher-risk sex

		2004	2006	2008	2010
CONDOM USE DURING HIGHER-RISK SEX	Number of responding countries	34	20	91	106
	Response rate	18%	10%	47%	55%

A2

Indicators for key populations at higher risk of HIV

KNOWLEDGE ABOUT HIV PREVENTION AMONG KEY POPULATIONS AT RISK

Concentrated epidemics are sustained by sexual transmission of HIV in paid sex and between men who have sex with men or transmission through the use of contaminated injecting equipment. Accurate information about HIV and AIDS is an essential prerequisite if people are going to adopt behaviours that reduce their risk of infection. This indicator should be calculated separately for each population that is considered to be at higher risk of HIV: sex workers, injecting drug users and men who have sex with men.

Purpose

To assess progress in building knowledge of the essential facts about HIV transmission among key populations at risk.

Definition

Percentage of key populations at risk who both correctly identify ways of preventing the sexual transmission of HIV and reject major misconceptions about HIV transmission.

Numerator: number of respondents from populations at higher risk of HIV who gave the correct answer to all five of the following questions.

1. Can the risk of HIV transmission be reduced by having sex with only one uninfected partner who has no other partners?
2. Can a person reduce the risk of getting HIV by using a condom every time they have sex?
3. Can a healthy-looking person have HIV?
4. Can a person get HIV from mosquito bites?
5. Can a person get HIV by sharing food with someone who is infected?

Denominator: number of respondents from populations at higher risk of HIV who gave answers, including "don't know", to all five questions.

Table A2.19

Response rates for knowledge of key populations at risk

		2004	2006	2008	2010
SEX WORKERS	Number of responding countries	N/A	21	67	84
	Response rate	N/A	11%	35%	44%
MEN WHO HAVE SEX WITH MEN	Number of responding countries	N/A	16	47	54
	Response rate	N/A	8%	24%	28%
INJECTING DRUG USERS	Number of responding countries	N/A	16	33	43
	Response rate	N/A	8%	17%	22%

HIV TESTING IN KEY POPULATIONS AT HIGHER RISK OF HIV

HIV testing and counselling is a critical element in the HIV response, as it facilitates HIV treatment and care and prevention activities. In addition, testing increases the awareness of people living with HIV of their own status and encourages them to take protective measures. Finally, HIV testing increases social awareness of HIV and can reduce stigma and discrimination towards people living with HIV. Trends in the uptake of HIV testing and counselling can be assessed based on the results of successive surveys conducted in the same country over time. The frequency with which people should be tested should be determined based on their individual behaviour patterns and the nature of the HIV epidemic in their country. In some epidemiological contexts it may be appropriate for members of key populations at higher risk of HIV to be tested annually. It should be noted that HIV testing should be voluntary and confidential, and that due care should be taken to protect the rights of those tested. This is particularly important in contexts where the behaviours of key populations at risk of HIV are illegal or heavily stigmatized and where any breeches of confidentiality can have serious legal and social ramifications.

Purpose

To assess progress in implementing HIV testing and counselling among key populations at risk.

Definition

Percentage of respondents from key populations at risk who received an HIV test in the last 12 months and who know their results.

Numerator: number of respondents from key populations at risk who have been tested for HIV during the last 12 months and who know the results.

Denominator: number of respondents from key populations at risk included in the sample.

Table A2.20

Response rates for HIV testing in key populations at risk

		2004	2006	2008	2010
SEX WORKERS	Number of responding countries	N/A	21	87	96
	Response rate	N/A	11%	45%	50%
MEN WHO HAVE SEX WITH MEN	Number of responding countries	N/A	22	70	83
	Response rate	N/A	12%	36%	43%
INJECTING DRUG USERS	Number of responding countries	N/A	18	44	59
	Response rate	N/A	9%	23%	31%

PREVENTION PROGRAMME COVERAGE FOR KEY POPULATIONS AT HIGHER RISK OF HIV

Key populations at risk are often difficult to reach with HIV prevention programmes. However, in order to prevent the spread of HIV among these populations as well as into the general population, it is important that they access these services. This indicator should be calculated separately for each population that is considered to be at higher risk of HIV: sex workers, injecting drug users and men who have sex with men.

Purpose

To assess progress in implementing HIV prevention programmes for key populations at risk.

Definition

Percentage of key populations at risk reached with HIV prevention programmes.

Numerator: number of respondents from key populations at risk who replied "yes" to both (all three for injecting drug users) of the following questions:

Do you know where you can go if you wish to receive an HIV test?

In the last twelve months, have you been given condoms?

(for injecting drug users) In the last twelve months, have you been given sterile needles and syringes?

Denominator: total number of respondents from key populations at risk surveyed.

Table A2.21

Response rates for HIV prevention programmes for key populations at risk

		2004	2006	2008	2010
SEX WORKERS	Number of responding countries	N/A	27	63	74
	Response rate	N/A	14%	33%	39%
MEN WHO HAVE SEX WITH MEN	Number of responding countries	N/A	18	43	53
	Response rate	N/A	9%	22%	28%
INJECTING DRUG USERS	Number of responding countries	N/A	22	30	39
	Response rate	N/A	12%	16%	20%

CONDOM USE BY SEX WORKERS

Various factors increase the risk of exposure to HIV among sex workers, including multiple, non-regular partners and more frequent sexual intercourse. However, sex workers can substantially reduce the risk of HIV transmission, both from clients and to clients, as well as to regular partners, through consistent and correct condom use.

Purpose

To assess progress in preventing exposure to HIV among sex workers through unprotected sex with clients.

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Definition

Percentage of female and male sex workers reporting the use of a condom with their most recent client.

Numerator: number of respondents who reported that a condom was used with their last client in the last 12 months.

Denominator: number of respondents who reported having commercial sex in the last 12 months.

Table A2.22

Response rates for condom use by sex workers

		2004	2006	2008	2010
CONDOM USE BY SEX WORKERS	Number of responding countries	N/A	32	91	101
	Response rate	N/A	17%	47%	53%

CONDOM USE BY MEN WHO HAVE SEX WITH MEN

Condoms can substantially reduce the risk of sexual transmission of HIV. Consequently, consistent and correct condom use is important for men who have sex with men because of the high risk of HIV transmission during unprotected anal sex. In addition, men who have anal sex with men may also have female partners. Hence condom use during male-to-male sex may be an important determinant of spousal transmission.

Purpose

To assess progress in preventing exposure to HIV among men who have unprotected anal sex with a male partner.

Definition

Percentage of men reporting the use of a condom the last time they had anal sex with a male partner.

Numerator: number of respondents who reported that a condom was used the last time they had anal sex.

Denominator: number of respondents who reported having had anal sex with a male partner in the last six months.

Table A2.23

Response rates for condom use by men who have sex with men

		2004	2006	2008	2010
CONDOM USE BY MEN WHO HAVE SEX WITH MEN	Number of responding countries	N/A	29	68	82
	Response rate	N/A	15%	35%	43%

CONDOM USE BY INJECTING DRUG USERS

Safer sexual practices among injecting drug users are essential, even in countries where other modes of HIV transmission predominate. The high risk of HIV transmission from contaminated injecting equipment places the sexual partners of injecting drug users at higher risk of HIV. Condom use by injecting drug users is therefore an important aspect of the prevention of HIV sexual transmission.

Purpose

To assess progress in preventing sexual transmission of HIV.

Definition

Percentage of injecting drug users reporting the use of a condom the last time they had sexual intercourse.

Numerator: number of respondents who reported that a condom was used the last time they had sex.

Denominator: number of respondents who report having had sexual intercourse in the last month.

Table A2.24

Response rates for condom use by injecting drug users

		2004	2006	2008	2010
CONDOM USE BY INJECTING DRUG USERS	Number of responding countries	N/A	N/A	43	51
	Response rate	N/A	N/A	22%	27%

SAFE INJECTING PRACTICES BY INJECTING DRUG USERS

Safer injecting practices among injecting drug users are essential, even in countries where other modes of HIV transmission predominate, due to the high risk of HIV transmission from contaminated injecting equipment. Harm-reduction programmes aim to prevent HIV transmission among injecting drug users through a range of services which seek to reduce illicit drug use, reduce injecting frequency and reduce the re-use of used injecting equipment. While this indicator is designed to measure the behavioural outcome of services aimed at reducing the use of contaminated injecting equipment, any behaviour changes that are observed may not necessarily be attributable to such services.

Purpose

To assess progress in preventing injecting drug use-associated HIV transmission.

Definition

Percentage of injecting drug users reporting the use of sterile injecting equipment the last time they injected.

Numerator: number of respondents who report using sterile injecting equipment the last time they injected drugs.

Denominator: number of respondents who report injecting drugs in the last month.

Table A2.25

Response rates for safe injecting practices

		2004	2006	2008	2010
SAFE INJECTING PRACTICES	Number of responding countries	N/A	N/A	44	55
	Response rate	N/A	N/A	23%	29%

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COUNTRY REPORTS OF DOMESTIC AND INTERNATIONAL AIDS SPENDING BY SERVICE CATEGORIES AND FINANCING SOURCES

	Survey Year	Total reported domestic public and international expenditure million USD	SHARE BY FINANCING SOURCE					
			Public	International				
			Domestic public (%)	Bilaterals (%)	Global Fund (%)	UN (%)	All other multilaterals (%)	All other international sources (%)
Caribbean								
Antigua and Barbuda[1]	2008	0.329	78.9%	0.0%	21.1%	0.0%	0.0%	0.0%
Antigua and Barbuda[1]	2009	0.391	66.3%	0.0%	33.7%	0.0%	0.0%	0.0%
Bahamas	2008	4.442	89.7%	2.8%	0.0%	3.4%	0.0%	4.0%
Bahamas	2009	4.889	90.0%	0.0%	0.0%	3.8%	0.0%	6.2%
Barbados	2009	11.903	67.3%	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR
Cuba	2007	44.509	80.3%	0.0%	19.7%	0.0%	0.0%	0.0%
Cuba	2008	46.616	79.7%	0.0%	20.3%	0.0%	0.0%	0.0%
Cuba	2009	76.893	81.5%	0.0%	18.0%	0.0%	0.0%	0.5%
Dominica[5]	2008	0.178	17.3%	42.2%	31.7%	8.5%	0.0%	0.3%
Dominica[5]	2009	0.178	17.3%	42.2%	31.7%	8.5%	0.0%	0.3%
Dominican Republic[8]	2008	23.416	34.8%	6.8%	53.9%	2.9%	0.2%	1.3%
Grenada	2008	0.484	100.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Grenada	2009	0.194	100.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Saint Kitts and Nevis	2007	1.343	100.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Saint Kitts and Nevis	2008	1.487	92.3%	0.0%	7.7%	0.0%	0.0%	0.0%
Saint Kitts and Nevis	2009	1.210	89.4%	0.0%	10.6%	0.0%	0.0%	0.0%
Saint Vincent and the Grenadines	2008	1.625	11.4%	0.0%	3.3%	0.0%	85.3%	0.0%
Saint Vincent and the Grenadines	2009	2.629	8.4%	0.0%	5.3%	1.1%	85.1%	0.0%
Trinidad and Tobago	2007	9.716	96.8%	0.0%	0.0%	0.0%	1.6%	1.6%
Trinidad and Tobago	2008	15.033	90.6%	0.0%	0.2%	3.8%	0.0%	5.3%
Trinidad and Tobago	2009	13.533	84.4%	0.0%	0.0%	5.2%	10.3%	0.1%
Central and South America								
Argentina	2007	209.455	97.4%	0.0%	2.4%	0.3%	0.0%	0.0%
Argentina	2008	248.773	97.4%	0.0%	2.3%	0.2%	0.0%	0.0%
Belize	2009	2.024	32.2%	0.0%	10.2%	8.6%	42.9%	6.1%
Bolivia	2008	5.394	17.5%	8.2%	46.8%	14.8%	1.2%	11.5%
Bolivia	2009	7.418	12.6%	4.9%	58.6%	14.0%	0.0%	9.9%
Brazil[2]	2007	575.139	99.5%	0.1%	0.0%	0.4%	0.0%	0.0%
Brazil[2]	2008	623.134	99.0%	0.1%	0.0%	0.5%	0.0%	0.4%
Chile[4]	2008	88.012	99.0%	0.1%	0.8%	0.1%	0.0%	0.0%
Colombia	2007	69.262	99.1%	0.0%	0.0%	0.9%	0.0%	0.0%
Colombia	2008	103.557	99.5%	0.0%	0.0%	0.5%	0.0%	0.0%
Colombia	2009	108.792	99.5%	0.0%	0.0%	0.5%	0.0%	0.0%
Costa Rica	2008	19.885	93.1%	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR
Ecuador	2008	25.972	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR
Ecuador	2009	31.900	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR
El Salvador	2007	38.261	90.8%	1.3%	4.5%	0.3%	2.2%	0.9%
El Salvador	2008	39.227	79.7%	4.7%	7.1%	1.9%	0.0%	6.5%
Guatemala	2007	43.648	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR
Guatemala	2008	51.350	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR
Honduras	2007	18.420	43.2%	13.6%	28.4%	6.7%	0.2%	7.8%
Honduras	2008	24.320	38.3%	14.3%	36.1%	4.7%	0.0%	6.6%
Nicaragua	2007	12.665	45.4%	54.6%	0.0%	0.0%	0.0%	0.0%
Nicaragua	2008	14.909	42.3%	57.7%	0.0%	0.0%	0.0%	0.0%
Panama	2008	13.628	86.6%	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR
Paraguay	2008	9.298	65.3%	14.9%	12.4%	5.8%	0.4%	1.2%

TOTAL HIV EXPENDITURES ON SELECTED SERVICES (MILLION CURRENT USD DOLLARS)

Prevention						Care and Treatment		Orphans and vulnerable children	Programme Support			Other HIV expenditures
Total for prevention	Communication for social and behavioral change	Voluntary counseling and testing	Programmes for sex workers and their clients for MSM and for harm reduction for IDUs	Male and female condom social marketing and public and commercial sector provision	Prevention of mother to child transmission	Total for care and treatment	Antiretroviral therapy		Total for programme management and administration strengthening	Planning, coordination and programme management	Monitoring and evaluation	
NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR
NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR
0.708	0.007	0.241	NA/NR	0.035	0.182	3.492	0.693	NA/NR	0.033	NA/NR	NA/NR	0.208
0.399	NA/NR	0.245	NA/NR	NA/NR	0.102	3.093	0.292	NA/NR	1.114	NA/NR	NA/NR	0.281
NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR
8.967	5.584	0.801	NA/NR	2.582	NA/NR	32.604	11.314	NA/NR	0.176	0.176	NA/NR	2.762
5.543	0.313	0.088	0.102	4.167	0.003	15.420	13.163	0.014	21.148	2.758	NA/NR	4.491
16.422	2.124	0.061	0.106	10.537	0.044	26.035	15.184	0.044	31.945	12.072	NA/NR	2.447
NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR
NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR
5.450	0.481	0.497	0.283	0.561	0.721	7.220	2.657	0.024	9.036	4.650	0.329	1.686
NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR
NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR
0.033	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	0.012	NA/NR	NA/NR	1.290	0.015	0.019	0.008
0.035	0.017	0.007	NA/NR	0.003	NA/NR	0.184	0.090	NA/NR	1.228	0.050	NA/NR	0.040
0.106	0.013	0.012	NA/NR	0.013	NA/NR	0.065	0.028	NA/NR	1.010	0.025	NA/NR	0.029
NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR
NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR
4.535	2.329	0.033	0.350	0.001	0.194	3.481	2.535	NA/NR	1.310	0.111	NA/NR	0.390
6.864	3.335	0.132	0.211	NA/NR	0.340	5.016	3.350	NA/NR	2.870	0.455	0.004	0.283
5.739	3.290	0.005	0.051	NA/NR	0.471	6.538	4.221	0.048	0.774	0.618	NA/NR	0.434
28.705	3.065	NA/NR	0.017	2.867	5.826	156.449	46.787	0.269	10.302	8.418	0.044	13.730
35.216	4.665	NA/NR	0.010	2.813	5.795	186.732	50.532	0.353	5.823	3.667	0.016	20.649
0.541	0.246	0.011	NA/NR	0.031	0.035	0.402	0.198	0.043	0.800	0.618	0.080	0.238
2.178	0.193	NA/NR	0.004	0.096	0.369	1.384	0.164	0.010	0.566	0.158	0.174	1.256
2.775	0.727	NA/NR	0.072	NA/NR	0.126	2.303	0.404	0.008	0.753	0.187	0.170	1.580
82.027	15.222	8.896	0.022	37.915	3.694	438.853	362.674	0.036	19.692	6.561	2.274	34.531
41.759	16.241	7.967	0.100	0.092	3.799	522.611	427.759	NA/NR	23.447	6.063	2.324	35.316
20.321	0.550	1.952	2.349	0.348	1.332	57.672	53.450	0.005	0.784	0.681	0.033	9.230
9.193	0.821	1.731	0.122	0.388	1.043	56.118	24.853	0.077	1.664	0.272	0.164	2.210
20.788	1.066	3.583	0.107	0.232	2.713	77.010	33.783	0.075	3.594	1.675	0.185	2.092
21.464	2.426	2.577	0.127	0.644	1.996	83.036	37.316	0.073	2.037	0.565	0.214	2.182
6.480	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	11.987	NA/NR	NA/NR	0.576	NA/NR	NA/NR	0.842
13.596	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	9.093	NA/NR	0.043	1.534	NA/NR	NA/NR	1.706
16.195	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	12.250	NA/NR	0.052	1.643	NA/NR	NA/NR	1.759
11.209	0.962	1.355	0.286	1.037	0.534	21.090	7.103	0.347	3.409	1.230	0.390	2.206
8.338	0.845	0.682	0.441	0.071	0.435	25.957	8.163	0.130	3.588	2.025	0.061	1.214
10.447	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	28.613	NA/NR	0.035	3.998	NA/NR	NA/NR	0.555
14.000	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	30.927	NA/NR	0.039	5.835	NA/NR	NA/NR	0.548
9.844	1.060	2.483	0.358	0.493	0.968	4.727	1.482	0.582	2.388	0.852	0.195	0.878
14.420	1.408	0.881	0.764	0.591	1.286	5.749	3.139	0.609	1.883	0.490	0.448	1.660
3.703	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	2.234	NA/NR	NA/NR	1.519	NA/NR	NA/NR	5.209
4.669	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	2.261	NA/NR	0.029	2.428	NA/NR	NA/NR	5.522
0.922	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	11.302	NA/NR	0.093	0.658	NA/NR	NA/NR	0.652
1.164	0.164	0.427	NA/NR	0.078	0.053	6.990	1.902	0.024	0.623	0.417	0.097	0.497

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COUNTRY REPORTS OF DOMESTIC AND INTERNATIONAL AIDS SPENDING BY SERVICE CATEGORIES AND FINANCING SOURCES

	Survey Year	Total reported domestic public and international expenditure million USD	SHARE BY FINANCING SOURCE: Public	International				
			Domestic public (%)	Bilaterals (%)	Global Fund (%)	UN (%)	All other multilaterals (%)	All other international sources (%)
Paraguay	2009	11.418	67.6%	10.4%	14.5%	5.1%	2.1%	0.3%
Peru	2007	34.892	37.6%	7.2%	13.1%	4.1%	0.0%	37.9%
Peru	2008	41.056	45.3%	1.1%	36.8%	2.7%	0.0%	14.1%
Peru	2009	43.639	54.8%	0.0%	36.4%	1.1%	0.0%	7.8%
Uruguay	2007	7.534	90.9%	0.0%	0.0%	5.2%	3.8%	0.1%
Venezuela	2007	79.818	99.9%	0.0%	0.0%	0.1%	0.0%	0.0%
Venezuela	2008	71.723	99.8%	0.0%	0.0%	0.2%	0.0%	0.0%
Venezuela	2009	78.801	99.9%	0.0%	0.0%	0.1%	0.0%	0.0%
East Asia								
China	2008	323.834	72.9%	4.0%	13.6%	2.4%	0.0%	7.1%
China	2009	353.535	76.0%	3.1%	13.0%	2.0%	0.0%	5.8%
Japan	2009	73.197	100.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Mongolia	2008	5.044	31.2%	1.8%	46.1%	14.2%	2.8%	3.9%
Mongolia	2009	4.664	24.8%	4.8%	57.5%	4.2%	5.7%	2.9%
Eastern Europe and Central Asia								
Armenia	2008	2.605	21.4%	0.5%	56.9%	9.2%	0.0%	12.0%
Armenia	2009	2.301	27.5%	1.1%	51.6%	10.7%	0.0%	9.1%
Azerbaijan	2008	5.002	63.7%	2.1%	25.4%	5.9%	0.0%	2.9%
Azerbaijan	2009	6.062	68.4%	0.4%	19.1%	4.6%	0.0%	7.6%
Belarus	2008	18.616	72.7%	0.0%	19.3%	2.3%	2.1%	3.5%
Belarus	2009	16.660	68.1%	0.0%	24.8%	3.6%	0.0%	3.5%
Georgia	2008	8.043	15.8%	13.1%	58.1%	6.9%	0.0%	6.1%
Georgia	2009	8.387	26.6%	7.5%	59.4%	3.1%	0.0%	3.3%
Kazakstan	2009	22.778	71.4%	4.7%	22.7%	1.2%	0.0%	0.0%
Kyrgyzstan	2008	8.796	16.5%	5.5%	58.5%	3.0%	10.8%	5.7%
Kyrgyzstan	2009	9.987	18.1%	20.0%	45.3%	6.4%	6.5%	3.6%
Republic of Moldova	2008	12.871	38.6%	0.4%	23.2%	10.1%	27.7%	0.0%
Republic of Moldova	2009	11.482	48.3%	0.9%	32.8%	11.1%	6.9%	0.0%
Russian Federation[11]	2008	777.021	90.2%	0.1%	8.4%	1.3%	0.0%	0.0%
Tajikistan	2008	6.178	16.5%	0.0%	59.2%	7.2%	6.8%	10.3%
Tajikistan	2009	7.479	15.4%	0.0%	61.6%	4.5%	8.6%	9.9%
Ukraine	2007	77.575	60.3%	8.7%	23.6%	2.7%	3.6%	1.1%
Ukraine	2008	100.004	59.5%	8.7%	26.8%	1.7%	1.7%	1.6%
Uzbekistan	2009	15.940	51.7%	0.0%	40.6%	3.0%	4.7%	0.0%
Middle East and North Africa								
Algeria	2008	3.802	69.8%	0.4%	27.5%	2.4%	0.0%	0.0%
Algeria	2009	2.721	93.7%	4.2%	0.0%	2.0%	0.0%	0.0%
Djibouti	2007	3.691	0.0%	0.0%	7.1%	27.1%	65.8%	0.0%
Djibouti	2008	3.221	0.0%	0.0%	57.3%	11.8%	30.9%	0.0%
Djibouti	2009	2.007	0.0%	0.0%	30.5%	69.5%	0.0%	0.0%
Egypt	2007	5.737	59.7%	16.3%	0.0%	10.7%	0.6%	12.7%
Egypt	2008	7.538	50.3%	3.7%	17.8%	12.9%	1.2%	14.0%
Iran (Islamic Republic of)	2008	36.011	87.6%	0.0%	8.7%	3.7%	0.0%	0.0%
Jordan	2009	3.099	40.2%	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR
Kuwait	2007	4.219	100.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Kuwait	2008	4.696	100.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Kuwait	2009	4.578	100.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Lebanon	2007	4.400	72.7%	0.0%	0.0%	10.2%	0.0%	17.0%

TOTAL HIV EXPENDITURES ON SELECTED SERVICES (MILLION CURRENT USD DOLLARS)

Prevention						Care and Treatment		Orphans and vulnerable children	Programme Support			Other HIV expenditures
Total for prevention	Communication for social and behavioral change	Voluntary counseling and testing	Programmes for sex workers and their clients for MSM and for harm reduction for IDUs	Male and female condom social marketing and public and commercial sector provision	Prevention of mother to child transmission	Total for care and treatment	Antiretroviral therapy		Total for programme management and administration strengthening	Planning, coordination and programme management	Monitoring and evaluation	
1.342	0.187	0.171	0.031	0.091	0.147	8.698	1.899	0.021	0.940	0.667	0.106	0.416
7.393	1.012	NA/NR	2.196	0.033	1.044	10.689	4.841	0.171	1.562	0.727	0.359	15.075
14.135	0.860	NA/NR	2.493	0.022	4.355	16.864	10.541	1.120	1.992	1.130	0.756	6.944
13.550	0.410	NA/NR	4.870	0.000	3.521	22.307	18.359	0.679	2.230	1.181	0.794	4.873
1.607	0.163	0.299	0.014	0.152	0.064	4.823	4.187	NA/NR	0.076	0.021	NA/NR	1.028
3.471	0.138	NA/NR	0.159	0.437	0.960	75.245	73.636	NA/NR	0.172	NA/NR	NA/NR	0.930
5.662	0.133	NA/NR	0.116	0.385	0.835	64.145	59.561	NA/NR	0.263	NA/NR	NA/NR	1.653
6.013	0.095	NA/NR	0.309	NA/NR	0.697	69.644	65.588	NA/NR	0.325	NA/NR	NA/NR	2.819
NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR
NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR
NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR
2.756	0.149	0.145	0.015	0.099	NA/NR	0.600	0.004	0.005	1.371	0.564	0.046	0.311
2.589	0.085	0.101	0.006	0.022	NA/NR	0.104	0.005	0.005	1.649	0.407	0.024	0.315
1.100	0.104	0.197	0.253	0.023	0.089	0.705	0.142	NA/NR	0.425	0.257	0.080	0.375
0.894	0.051	0.153	0.172	0.024	0.082	0.690	0.156	NA/NR	0.305	0.163	0.071	0.413
3.512	0.152	0.003	0.422	0.089	0.393	0.621	0.065	0.000	0.241	0.084	0.005	0.629
3.940	0.101	0.002	0.248	0.050	0.468	0.917	0.114	NA/NR	0.343	0.081	0.024	0.861
12.365	0.323	0.890	0.995	0.000	0.213	2.578	1.060	0.094	2.010	0.291	0.142	1.569
10.057	0.101	0.833	1.341	0.000	0.461	2.856	1.028	0.100	2.370	0.269	0.201	1.278
3.218	0.260	0.424	1.380	0.259	0.090	2.408	1.352	NA/NR	0.591	0.081	0.011	1.826
2.995	0.132	0.500	1.534	0.024	0.098	2.794	0.954	NA/NR	1.278	0.060	0.018	1.320
15.923	0.373	0.662	2.996	NA/NR	0.291	2.463	0.689	NA/NR	4.042	0.595	0.423	0.351
5.547	0.257	0.188	2.921	0.020	0.035	0.351	0.086	0.067	1.883	0.022	0.061	0.949
6.422	0.261	1.863	2.265	0.020	0.157	0.781	0.031	0.065	1.683	0.005	0.154	1.037
8.966	0.070	0.452	0.402	0.048	0.088	2.060	0.673	0.138	1.259	0.221	0.106	0.448
6.565	0.049	0.443	0.667	NA/NR	0.058	2.634	1.299	0.078	1.081	0.096	0.117	1.125
181.902	7.859	10.100	8.083	2.002	9.398	447.312	228.410	64.972	45.272	5.244	0.763	37.563
2.930	0.094	0.104	0.485	NA/NR	0.168	0.407	0.055	NA/NR	2.397	0.791	0.137	0.444
2.878	0.112	0.181	0.794	NA/NR	0.208	0.722	0.068	NA/NR	3.065	0.738	0.185	0.814
28.679	0.592	7.377	8.779	0.955	1.964	37.445	7.669	0.504	5.406	1.131	0.706	5.541
22.808	0.936	3.806	9.687	1.481	1.867	48.799	21.632	2.562	21.256	2.978	2.176	4.578
3.153	0.031	0.141	0.014	NA/NR	0.228	4.250	0.134	1.029	4.556	0.227	0.154	2.951
0.432	0.361	0.003	0.034	0.013	NA/NR	2.788	2.430	NA/NR	0.107	0.069	0.003	0.475
0.736	0.071	0.002	0.006	0.004	NA/NR	1.819	1.681	NA/NR	0.078	0.060	NA/NR	0.087
NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR
NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR
NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR
2.420	0.345	0.350	0.194	NA/NR	0.002	1.325	0.824	0.005	0.747	0.027	0.007	1.239
2.601	0.295	0.301	0.307	NA/NR	0.010	1.492	0.464	0.007	1.324	0.147	0.093	2.115
20.402	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	4.302	NA/NR	NA/NR	4.639	NA/NR	NA/NR	6.667
NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR
NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	1.508	1.508	NA/NR	2.711	0.273	NA/NR	0.000
NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	1.785	1.785	NA/NR	2.910	0.293	NA/NR	NA/NR
NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	1.860	1.860	NA/NR	2.718	0.276	NA/NR	NA/NR
NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR

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COUNTRY REPORTS OF DOMESTIC AND INTERNATIONAL AIDS SPENDING BY SERVICE CATEGORIES AND FINANCING SOURCES

	Survey Year	Total reported domestic public and international expenditure million USD	SHARE BY FINANCING SOURCE: Public	International				
			Domestic public (%)	Bilaterals (%)	Global Fund (%)	UN (%)	All other multilaterals (%)	All other international sources (%)
Lebanon	2008	7.300	43.8%	0.0%	0.0%	44.5%	0.0%	11.6%
Lebanon	2009	4.450	71.9%	0.0%	0.0%	5.6%	0.0%	22.5%
Morocco	2007	10.313	50.3%	5.8%	29.3%	7.8%	2.9%	3.9%
Morocco	2008	12.566	44.4%	3.7%	36.7%	7.9%	0.0%	7.3%
Oman	2009	0.812	76.5%	0.0%	0.0%	23.5%	0.0%	0.0%
Saudi Arabia	2009	19.389	99.7%	0.0%	0.0%	0.3%	0.0%	0.0%
Somalia[5]	2008	5.995	0.2%	0.0%	83.5%	13.0%	2.9%	0.4%
Somalia[5]	2009	5.982	0.0%	0.0%	83.7%	13.0%	2.9%	0.4%
Syrian Arab Republic	2007	1.638	91.5%	0.0%	0.0%	7.3%	0.0%	1.2%
Syrian Arab Republic	2008	1.986	88.1%	1.3%	0.0%	9.9%	0.0%	0.8%
Syrian Arab Republic	2009	1.977	91.1%	1.1%	0.0%	6.4%	0.0%	1.3%
United Arab Emirates	2009	17.584	99.8%	0.0%	0.0%	0.2%	0.0%	0.0%
Yemen	2009	4.956	2.5%	0.0%	83.5%	14.0%	0.0%	0.0%
North America								
Mexico	2008	266.037	99.4%	0.1%	0.0%	0.2%	0.0%	0.3%
Mexico	2009	218.421	99.4%	0.1%	0.0%	0.4%	0.0%	0.2%
Oceania								
Fiji	2007	1.849	20.1%	49.6%	0.1%	25.9%	1.0%	3.3%
Fiji	2008	2.506	15.9%	44.1%	3.6%	24.6%	11.4%	0.4%
Fiji	2009	2.100	11.8%	35.7%	15.9%	27.6%	8.0%	1.0%
Marshall Islands	2008	0.578	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR
Marshall Islands	2009	0.539	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR
Micronesia, Federated States of	2008	0.355	0.0%	68.2%	8.1%	0.0%	12.5%	11.3%
Micronesia, Federated States of	2009	0.540	0.0%	45.9%	14.3%	0.0%	31.4%	8.3%
Nauru	2008	0.081	43.7%	0.0%	54.2%	2.1%	0.0%	0.0%
Nauru	2009	0.097	53.8%	0.0%	46.2%	0.0%	0.0%	0.0%
Palau	2007	0.057	0.0%	100.0%	0.0%	0.0%	0.0%	0.0%
Palau	2008	0.057	0.0%	100.0%	0.0%	0.0%	0.0%	0.0%
Palau	2009	0.067	0.0%	100.0%	0.0%	0.0%	0.0%	0.0%
Samoa	2009	0.792	78.1%	0.0%	21.9%	0.0%	0.0%	0.0%
Solomon Islands	2008	0.598	16.4%	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR
Solomon Islands	2009	0.575	18.8%	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR
Tonga	2008	0.210	0.0%	0.0%	47.2%	16.0%	36.8%	0.0%
Tonga	2009	0.279	26.5%	1.0%	42.2%	5.5%	24.8%	0.0%
Tuvalu	2008	0.054	11.8%	0.0%	88.2%	0.0%	0.0%	0.0%
Tuvalu	2009	0.038	16.6%	0.0%	83.4%	0.0%	0.0%	0.0%
Vanuatu	2008	1.092	6.6%	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR
Vanuatu	2009	1.115	6.5%	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR
South and South-East Asia								
Afghanistan	2008	3.241	4.0%	7.8%	0.0%	5.8%	82.3%	0.0%
Afghanistan	2009	5.159	2.6%	5.5%	21.1%	8.4%	62.4%	0.0%
Bangladesh	2008	37.265	0.0%	13.1%	38.6%	43.0%	5.4%	0.0%
Bangladesh	2009	26.938	0.0%	17.4%	38.4%	36.9%	7.4%	0.0%
Cambodia	2007	53.259	11.4%	45.8%	31.1%	10.5%	0.0%	1.2%
Cambodia	2008	51.847	10.1%	39.9%	36.8%	9.1%	4.1%	0.0%
India[6]	2008	145.590	16.5%	19.1%	41.1%	0.7%	22.6%	0.0%
India[6]	2009	140.002	16.5%	19.1%	41.1%	0.7%	22.6%	0.0%
Indonesia	2007	58.671	26.3%	57.2%	6.2%	9.2%	1.1%	0.0%

TOTAL HIV EXPENDITURES ON SELECTED SERVICES (MILLION CURRENT USD DOLLARS)

Prevention						Care and Treatment		Orphans and vulnerable children	Programme Support			Other HIV expenditures
Total for prevention	Communication for social and behavioral change	Voluntary counseling and testing	Programmes for sex workers and their clients for MSM and for harm reduction for IDUs	Male and female condom social marketing and public and commercial sector provision	Prevention of mother to child transmission	Total for care and treatment	Antiretroviral therapy		Total for programme management and administration strengthening	Planning, coordination and programme management	Monitoring and evaluation	
NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR
NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR
3.911	0.812	0.502	0.491	0.171	0.012	4.457	1.666	NA/NR	1.680	1.006	0.374	0.264
4.685	0.797	0.475	0.962	0.325	0.106	4.848	1.429	NA/NR	1.612	1.210	0.300	1.421
0.217	0.044	NA/NR	NA/NR	NA/NR	0.039	0.297	0.134	0.045	0.162	NA/NR	NA/NR	0.091
5.968	NA/NR	5.146	NA/NR	NA/NR	NA/NR	10.094	9.209	NA/NR	3.264	NA/NR	NA/NR	0.063
1.088	0.264	0.023	NA/NR	0.004	NA/NR	1.040	0.048	0.016	2.400	0.697	0.263	1.451
1.088	0.264	0.023	NA/NR	0.004	NA/NR	1.040	0.048	0.016	2.400	0.697	0.263	1.438
NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	1.027	0.424	NA/NR	0.506	0.486	NA/NR	0.104
0.007	NA/NR	0.007	NA/NR	NA/NR	NA/NR	1.211	0.502	NA/NR	0.596	0.576	NA/NR	0.172
0.050	NA/NR	0.050	NA/NR	NA/NR	NA/NR	1.381	0.548	NA/NR	0.461	0.461	NA/NR	0.085
0.018	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	2.826	2.390	NA/NR	14.638	NA/NR	NA/NR	0.102
NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR
50.606	6.496	3.569	1.765	0.440	13.897	200.711	156.923	0.014	8.617	4.178	0.121	6.089
48.242	3.252	3.751	1.680	0.507	15.805	163.405	122.275	0.012	5.537	3.738	0.124	1.226
0.800	0.382	0.051	0.019	0.002	0.044	0.091	NA/NR	NA/NR	0.486	0.348	0.083	0.472
0.917	0.141	0.027	0.015	0.022	0.056	0.095	NA/NR	NA/NR	0.713	0.569	0.025	0.782
0.635	0.264	0.002	0.017	0.050	0.001	0.079	NA/NR	NA/NR	0.704	0.582	0.041	0.681
0.302	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	0.000	NA/NR	NA/NR	0.275	NA/NR	NA/NR	0.000
0.158	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	0.084	NA/NR	NA/NR	0.289	NA/NR	NA/NR	0.008
0.184	0.015	0.009	NA/NR	0.000	NA/NR	0.040	NA/NR	NA/NR	0.033	0.016	0.012	0.098
0.170	0.004	0.012	NA/NR	0.005	NA/NR	0.041	NA/NR	NA/NR	0.110	0.043	0.010	0.219
0.040	0.007	0.002	NA/NR	0.002	NA/NR	NA/NR	NA/NR	NA/NR	0.041	0.032	NA/NR	0.000
0.030	0.006	0.001	NA/NR	0.001	NA/NR	NA/NR	NA/NR	NA/NR	0.058	0.038	0.005	0.009
NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	0.031	0.013	NA/NR	0.027
NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	0.014	0.014	NA/NR	0.038	0.034	NA/NR	0.005
NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	0.018	0.018	NA/NR	0.036	0.028	NA/NR	0.013
0.765	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	0.027	0.027	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR
0.204	0.018	0.000	0.005	0.022	0.009	0.038	NA/NR	NA/NR	0.158	0.061	0.015	0.198
0.122	0.028	NA/NR	NA/NR	NA/NR	NA/NR	0.014	NA/NR	NA/NR	0.134	0.015	0.008	0.305
0.013	NA/NR	NA/NR	NA/NR	0.001	NA/NR	0.103	NA/NR	NA/NR	0.015	0.015	NA/NR	0.078
0.021	0.005	NA/NR	NA/NR	0.001	NA/NR	0.104	NA/NR	NA/NR	0.032	0.027	0.004	0.123
NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	0.054	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	0.000
NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	0.038	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR
NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR
NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR
1.472	0.069	0.003	0.725	NA/NR	0.009	0.019	NA/NR	NA/NR	0.615	0.365	0.013	1.135
2.456	0.154	0.275	0.950	0.001	0.016	0.107	NA/NR	0.001	1.162	0.435	0.063	1.433
25.566	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	2.408	NA/NR	NA/NR	7.175	NA/NR	NA/NR	2.117
17.334	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	2.403	NA/NR	NA/NR	6.378	NA/NR	NA/NR	0.823
23.273	2.269	1.537	4.078	2.912	1.524	13.482	7.052	2.788	9.494	7.134	0.919	4.222
19.929	2.538	0.821	2.477	4.077	0.742	14.809	4.467	2.225	10.280	6.836	0.901	4.605
98.974	18.647	21.843	NA/NR	3.178	0.071	24.171	23.636	NA/NR	21.535	NA/NR	4.314	0.910
71.989	9.524	14.110	NA/NR	0.316	0.002	52.245	52.152	NA/NR	15.468	NA/NR	1.500	0.299
24.369	0.532	0.008	1.961	0.136	0.017	9.270	0.083	NA/NR	20.191	0.030	0.056	4.841

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COUNTRY REPORTS OF DOMESTIC AND INTERNATIONAL AIDS SPENDING BY SERVICE CATEGORIES AND FINANCING SOURCES

	Survey Year	Total reported domestic public and international expenditure million USD	SHARE BY FINANCING SOURCE: Public	International				
			Domestic public (%)	Bilaterals (%)	Global Fund (%)	UN (%)	All other multilaterals (%)	All other international sources (%)
Indonesia	2008	49.563	40.0%	39.5%	11.7%	4.5%	3.0%	1.1%
Lao People's Democratic Republic	2007	5.147	1.3%	19.4%	36.0%	20.3%	7.9%	15.0%
Lao People's Democratic Republic	2008	5.017	2.0%	13.5%	39.6%	29.9%	6.9%	8.1%
Lao People's Democratic Republic	2009	5.997	1.9%	19.4%	42.0%	22.2%	3.5%	11.0%
Malaysia	2008	24.289	98.8%	0.0%	0.0%	1.2%	0.0%	0.0%
Malaysia	2009	27.700	98.4%	0.0%	0.0%	1.1%	0.0%	0.5%
Myanmar	2007	32.763	3.6%	0.0%	0.0%	0.0%	0.0%	96.4%
Myanmar	2008	32.802	4.7%	0.0%	0.0%	0.0%	0.0%	95.3%
Nepal	2007	17.662	3.5%	67.8%	14.9%	7.5%	0.0%	6.3%
Pakistan	2008	14.195	68.5%	2.8%	7.7%	18.5%	2.5%	0.0%
Pakistan	2009	19.999	78.4%	0.5%	5.5%	13.3%	1.8%	0.6%
Philippines	2007	4.827	33.5%	47.3%	0.6%	16.5%	1.7%	0.3%
Philippines	2008	6.577	25.5%	9.0%	44.0%	16.7%	4.0%	0.9%
Philippines	2009	10.466	16.2%	7.3%	63.9%	11.7%	0.7%	0.2%
Singapore	2007	11.350	100.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Singapore	2008	15.338	100.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Singapore	2009	16.088	100.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Sri Lanka	2008	1.568	29.5%	0.0%	17.3%	13.9%	39.2%	0.0%
Sri Lanka	2009	1.555	33.2%	0.0%	28.4%	18.6%	19.8%	0.0%
Thailand	2007	199.645	82.7%	0.5%	16.0%	0.8%	0.0%	0.0%
Thailand	2008	209.123	85.4%	1.2%	12.9%	0.5%	0.0%	0.0%
Thailand	2009	213.775	93.3%	0.9%	5.1%	0.6%	0.0%	0.0%
Timor Leste	2008	1.827	0.0%	0.0%	87.9%	12.1%	0.0%	0.0%
Timor Leste	2009	1.803	1.2%	0.0%	96.7%	0.0%	0.0%	2.1%
Viet Nam	2007	66.281	12.0%	67.5%	3.5%	4.6%	11.8%	0.6%
Viet Nam	2008	108.814	8.0%	74.0%	3.5%	4.2%	9.8%	0.5%
Viet Nam	2009	102.988	2.1%	87.1%	0.1%	1.8%	8.1%	0.8%
Sub-Saharan Africa								
Angola	2008	31.766	75.8%	0.0%	21.2%	0.4%	2.5%	0.0%
Angola	2009	24.839	64.6%	0.0%	32.5%	1.7%	1.2%	0.0%
Benin	2007	16.836	27.1%	28.0%	17.8%	17.9%	6.2%	3.0%
Benin	2008	20.770	19.9%	21.7%	28.7%	18.2%	5.5%	6.0%
Benin	2009	28.789	45.2%	9.4%	25.8%	11.7%	3.5%	4.3%
Botswana	2008	339.868	67.3%	21.3%	0.0%	0.4%	0.0%	10.9%
Burkina Faso	2007	36.336	25.0%	36.3%	15.2%	13.3%	5.1%	5.1%
Burkina Faso	2008	48.011	25.3%	21.3%	25.0%	14.4%	4.0%	10.1%
Burundi	2007	25.964	29.5%	21.3%	27.1%	12.5%	0.2%	9.3%
Burundi	2008	26.060	22.5%	25.2%	22.1%	12.4%	1.0%	16.9%
Cameroon	2007	36.559	18.7%	9.7%	54.1%	8.8%	0.0%	8.7%
Cameroon	2008	39.972	17.6%	18.7%	47.7%	10.5%	0.0%	5.4%
Cape Verde	2008	2.570	1.2%	92.9%	0.0%	3.4%	2.1%	0.3%
Cape Verde	2009	1.111	1.7%	85.9%	0.0%	3.5%	1.4%	7.6%
Central African Republic	2007	10.332	4.6%	18.8%	37.6%	36.2%	0.0%	2.7%
Central African Republic	2008	20.282	3.5%	13.3%	47.3%	33.7%	0.0%	2.2%
Chad	2007	8.617	34.1%	37.5%	7.8%	14.5%	3.1%	3.0%
Chad	2008	13.895	16.1%	41.2%	15.8%	17.6%	6.7%	2.6%

TOTAL HIV EXPENDITURES ON SELECTED SERVICES (MILLION CURRENT USD DOLLARS)

Prevention						Care and Treatment		Orphans and vulnerable children	Programme Support			Other HIV expenditures
Total for prevention	Communication for social and behavioral change	Voluntary counseling and testing	Programmes for sex workers and their clients for MSM and for harm reduction for IDUs	Male and female condom social marketing and public and commercial sector provision	Prevention of mother to child transmission	Total for care and treatment	Antiretroviral therapy		Total for programme management and administration strengthening	Planning, coordination and programme management	Monitoring and evaluation	
24.703	0.649	3.021	5.641	0.183	0.003	7.325	5.504	0.032	10.307	3.528	1.353	7.197
2.582	0.393	0.026	0.443	0.561	0.189	0.339	0.182	0.015	1.065	0.608	0.119	1.145
1.571	0.211	0.079	0.107	0.029	0.049	0.791	0.643	0.016	1.330	0.722	0.123	1.309
2.160	0.406	0.083	0.343	0.085	0.101	0.962	0.503	0.099	1.466	0.679	0.158	1.310
11.000	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	9.861	9.286	0.000	3.429	3.429	NA/NR	0.000
13.459	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	10.447	9.559	0.000	3.529	3.529	NA/NR	0.265
16.844	1.310	0.031	8.032	NA/NR	1.132	11.758	5.556	0.419	2.191	0.195	0.142	1.552
15.546	NA/NR	0.041	8.301	NA/NR	1.672	12.680	10.629	0.674	1.578	0.608	0.245	2.324
8.187	0.638	0.487	2.186	NA/NR	0.126	2.936	0.667	0.159	5.110	1.553	0.253	1.269
9.709	2.317	NA/NR	3.739	NA/NR	NA/NR	1.443	1.443	NA/NR	2.360	2.360	NA/NR	0.683
15.522	3.483	NA/NR	8.288	NA/NR	NA/NR	1.521	1.521	NA/NR	2.521	2.521	NA/NR	0.436
3.845	0.017	0.025	0.090	2.763	0.009	0.151	0.005	NA/NR	0.473	0.023	0.018	0.358
3.462	0.109	0.096	0.522	0.082	0.004	0.679	0.081	0.123	1.334	0.282	0.012	0.979
5.860	0.077	0.278	0.607	0.000	0.037	0.911	0.184	0.036	2.703	0.481	0.122	0.956
2.721	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	7.965	NA/NR	NA/NR	0.664	NA/NR	NA/NR	0.000
4.241	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	9.330	NA/NR	NA/NR	1.767	NA/NR	NA/NR	0.000
4.125	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	9.075	NA/NR	NA/NR	2.888	NA/NR	NA/NR	0.000
1.030	NA/NR	NA/NR	0.064	NA/NR	NA/NR	0.071	0.047	NA/NR	0.088	0.087	NA/NR	0.379
0.917	NA/NR	NA/NR	0.130	NA/NR	NA/NR	0.076	0.054	NA/NR	0.102	0.099	NA/NR	0.459
28.186	0.188	5.497	1.029	2.529	3.542	143.334	93.625	3.006	19.449	10.948	1.511	5.669
45.287	0.920	0.694	0.566	1.529	4.110	137.646	61.295	1.507	11.984	6.425	0.143	12.699
29.259	1.424	1.096	1.418	0.708	3.893	162.604	92.680	1.535	7.421	0.575	0.274	12.956
0.570	0.211	0.060	NA/NR	NA/NR	0.016	0.019	0.019	NA/NR	1.003	0.728	NA/NR	0.236
0.358	0.053	0.008	NA/NR	0.003	0.002	0.061	0.061	NA/NR	1.166	0.694	NA/NR	0.218
24.553	4.874	3.459	0.051	0.007	2.226	25.900	12.670	0.578	9.326	2.607	2.540	5.924
39.344	7.050	4.911	0.117	0.051	4.226	42.324	21.245	1.818	16.312	3.714	7.628	9.016
35.872	3.736	5.634	0.012	NA/NR	4.573	47.383	21.868	3.231	10.278	1.755	6.781	6.223
12.215	1.733	0.897	0.244	1.418	5.430	13.105	4.615	NA/NR	5.562	1.793	NA/NR	0.884
7.263	1.292	1.418	0.453	0.604	2.030	8.636	3.714	NA/NR	7.135	2.544	0.531	1.806
4.667	0.472	1.134	NA/NR	0.785	0.937	6.776	2.664	0.231	4.228	3.718	0.091	0.935
5.745	1.017	0.937	NA/NR	1.349	0.431	5.902	4.408	0.500	7.295	5.003	1.029	1.328
9.530	0.359	1.078	NA/NR	1.335	1.197	6.578	3.645	0.727	9.721	6.763	0.518	2.233
29.766	2.160	8.566	NA/NR	3.127	5.621	165.330	48.827	80.607	49.952	40.913	2.617	14.213
7.064	2.132	0.544	NA/NR	0.948	1.010	13.060	9.248	2.930	9.130	4.185	0.765	4.153
12.956	1.945	1.993	0.362	1.630	0.918	15.661	6.495	2.632	10.487	6.528	1.780	6.275
5.899	1.015	0.766	0.073	0.941	0.861	7.420	3.210	2.616	7.175	5.783	1.195	2.852
5.736	0.783	0.865	0.069	0.846	0.857	8.684	2.501	2.664	6.134	4.719	0.792	2.842
10.000	1.646	0.946	0.004	0.931	1.376	15.297	11.474	2.251	5.920	2.907	0.369	3.092
11.435	2.313	1.561	NA/NR	2.780	0.565	16.036	11.055	3.148	6.089	5.260	0.486	3.263
0.749	0.253	0.012	NA/NR	NA/NR	NA/NR	1.233	0.624	0.074	0.366	NA/NR	NA/NR	0.147
0.153	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	0.415	0.214	0.133	0.381	0.212	0.137	0.029
2.387	0.224	NA/NR	NA/NR	0.878	0.176	4.207	1.008	0.113	2.915	1.890	0.151	0.710
3.031	0.493	0.195	0.000	1.208	0.178	8.230	NA/NR	0.979	5.665	3.672	0.454	2.377
3.324	0.704	0.158	0.039	0.970	0.116	3.210	3.035	0.025	1.417	1.235	0.077	0.640
5.323	1.821	0.033	NA/NR	1.903	0.300	4.088	3.036	0.188	3.402	2.252	0.133	0.894

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COUNTRY REPORTS OF DOMESTIC AND INTERNATIONAL AIDS SPENDING BY SERVICE CATEGORIES AND FINANCING SOURCES

			SHARE BY FINANCING SOURCE					
	Survey Year	Total reported domestic public and international expenditure million USD	Public	International				
			Domestic public (%)	Bilaterals (%)	Global Fund (%)	UN (%)	All other multilaterals (%)	All other international sources (%)
Congo	2007	9.442	10.2%	1.9%	51.3%	14.7%	21.8%	0.0%
Congo	2008	11.629	11.0%	5.8%	34.9%	2.8%	45.5%	0.0%
Congo	2009	17.395	52.5%	4.1%	25.0%	2.1%	16.4%	0.0%
Cote d'Ivoire	2007	67.012	9.1%	72.6%	13.4%	4.5%	0.0%	0.4%
Cote d'Ivoire	2008	62.011	8.4%	76.8%	11.4%	2.4%	0.0%	0.9%
Democratic Republic of the Congo	2008	85.964	3.6%	13.9%	40.0%	18.5%	16.8%	7.3%
Equatorial Guinea	2007	1.310	74.0%	6.7%	0.0%	19.3%	0.0%	0.0%
Equatorial Guinea	2008	2.827	33.5%	7.1%	41.9%	17.4%	0.0%	0.0%
Equatorial Guinea	2009	2.797	32.8%	4.2%	55.3%	7.6%	0.0%	0.0%
Eritrea	2008	14.457	5.9%	2.7%	46.7%	18.7%	26.0%	0.0%
Eritrea	2009	13.661	8.9%	4.7%	30.1%	23.8%	32.5%	0.0%
Gabon	2007	10.471	58.2%	2.6%	24.0%	10.9%	4.4%	0.0%
Gabon	2008	11.852	87.4%	4.6%	3.5%	4.4%	0.0%	0.0%
Gabon	2009	12.263	77.1%	2.1%	15.3%	5.5%	0.0%	0.0%
Gambia	2007	4.893	4.5%	0.8%	51.4%	17.3%	4.3%	21.6%
Gambia	2008	4.985	3.6%	1.9%	63.2%	14.6%	0.1%	16.7%
Ghana	2007	52.308	21.5%	12.9%	46.2%	1.0%	16.1%	2.3%
Ghana	2008	37.928	14.1%	11.9%	29.2%	7.2%	18.7%	19.0%
Guinea	2007	7.402	0.6%	35.5%	7.1%	21.9%	18.1%	16.9%
Guinea	2008	13.184	2.0%	19.9%	14.0%	15.8%	33.1%	15.3%
Guinea	2009	10.231	6.5%	25.7%	21.7%	23.6%	0.0%	22.5%
Guinea-Bissau	2008	3.648	7.3%	24.1%	11.0%	42.8%	3.3%	11.5%
Guinea-Bissau	2009	5.256	4.5%	28.1%	45.9%	19.0%	0.1%	2.3%
Kenya	2007	418.582	13.7%	68.3%	6.3%	1.5%	0.0%	10.2%
Kenya	2008	659.866	11.2%	79.3%	1.5%	2.4%	0.1%	5.6%
Kenya	2009	687.258	14.2%	75.2%	2.8%	2.2%	0.0%	5.5%
Lesotho	2007	53.737	37.2%	16.0%	16.1%	16.3%	3.9%	10.5%
Lesotho	2008	81.315	56.9%	18.5%	8.9%	5.0%	0.1%	10.6%
Madagascar	2008	11.954	45.3%	36.2%	0.5%	18.1%	0.0%	0.0%
Malawi	2008	106.722	1.8%	19.9%	65.1%	3.2%	1.6%	8.4%
Malawi	2009	103.907	1.4%	26.4%	54.7%	2.5%	6.0%	8.9%
Mali	2007	40.800	12.5%	19.2%	30.6%	31.3%	6.1%	0.3%
Mali	2008	40.390	10.9%	16.3%	25.9%	37.6%	8.8%	0.5%
Mozambique	2007	104.542	5.7%	68.0%	5.0%	8.5%	1.0%	11.8%
Mozambique	2008	144.946	3.5%	70.0%	2.8%	8.0%	5.9%	9.8%
Niger	2007	14.522	4.4%	10.0%	24.2%	37.5%	23.2%	0.7%
Niger	2008	12.457	4.5%	12.6%	25.5%	40.1%	5.6%	11.8%
Nigeria	2007	299.242	14.7%	65.9%	6.6%	3.1%	9.8%	0.0%
Nigeria	2008	394.664	7.6%	80.8%	6.9%	1.5%	3.1%	0.0%
Rwanda	2007	74.565	8.2%	62.7%	15.1%	4.3%	3.8%	5.9%
Rwanda	2008	110.812	5.5%	58.1%	24.3%	2.5%	2.9%	6.7%
Sao Tome and Principe	2007	0.098	47.5%	0.0%	0.0%	0.0%	23.0%	29.5%
Sao Tome and Principe	2008	0.093	45.8%	0.0%	0.0%	0.0%	19.5%	34.7%
Sao Tome and Principe	2009	1.065	3.6%	0.0%	60.5%	31.9%	0.4%	3.5%
Senegal	2008	25.570	25.0%	40.7%	30.4%	3.9%	0.0%	0.0%
Seychelles	2007	0.479	96.1%	0.0%	0.0%	3.9%	0.0%	0.0%
Seychelles	2008	0.573	83.9%	0.0%	0.0%	12.1%	2.0%	1.9%
Seychelles	2009	0.575	80.4%	4.3%	0.0%	15.3%	0.0%	0.0%
Sierra Leone	2007	9.173	2.2%	15.0%	24.6%	20.1%	34.7%	3.3%

TOTAL HIV EXPENDITURES ON SELECTED SERVICES (MILLION CURRENT USD DOLLARS)

Prevention						Care and Treatment		Orphans and vulnerable children	Programme Support			Other HIV expenditures
Total for prevention	Communication for social and behavioral change	Voluntary counseling and testing	Programmes for sex workers and their clients for MSM and for harm reduction for IDUs	Male and female condom social marketing and public and commercial sector provision	Prevention of mother to child transmission	Total for care and treatment	Antiretroviral therapy		Total for programme management and administration strengthening	Planning, coordination and programme management	Monitoring and evaluation	
3.787	0.091	0.455	0.009	1.015	0.287	1.145	0.422	0.956	2.586	1.764	0.083	0.968
4.118	0.008	0.243	0.080	0.961	0.217	0.332	NA/NR	2.044	3.694	2.119	0.280	1.440
2.826	0.078	0.441	0.032	0.374	0.412	8.557	6.038	0.874	3.953	1.422	0.371	1.184
18.448	0.925	1.118	1.698	5.043	1.005	28.610	NA/NR	1.962	15.310	8.249	1.007	2.681
19.417	1.726	1.477	2.011	4.966	0.239	17.631	NA/NR	1.631	18.411	9.406	0.675	4.922
18.115	0.801	1.730	0.291	2.978	1.727	25.521	NA/NR	4.703	28.544	21.112	1.600	9.082
0.013	0.006	NA/NR	NA/NR	NA/NR	0.003	0.007	NA/NR	NA/NR	1.169	0.197	0.003	0.120
0.329	0.117	0.001	NA/NR	0.017	0.084	0.228	0.178	0.046	2.029	0.683	0.078	0.195
0.258	0.060	NA/NR	NA/NR	0.022	0.078	0.231	0.213	NA/NR	2.190	1.165	NA/NR	0.117
3.574	0.340	0.459	NA/NR	0.200	0.061	3.943	0.408	1.384	3.200	0.257	0.588	2.356
3.641	0.680	NA/NR	NA/NR	0.273	0.118	4.130	NA/NR	1.155	2.464	NA/NR	0.136	2.270
3.728	0.055	0.198	0.042	0.235	0.006	3.333	2.214	0.344	2.494	0.784	0.301	0.573
4.542	NA/NR	NA/NR	0.032	0.065	NA/NR	2.524	1.819	0.117	4.358	0.290	0.165	0.310
4.488	0.045	NA/NR	0.022	0.080	0.010	3.898	3.196	0.110	3.478	0.173	0.065	0.289
0.700	0.209	0.085	NA/NR	NA/NR	0.106	0.651	0.163	0.265	2.046	0.227	0.434	1.231
0.563	0.067	0.124	NA/NR	NA/NR	0.183	1.019	0.225	0.227	2.048	0.170	0.374	1.129
6.336	1.742	0.339	0.577	1.190	NA/NR	21.026	6.119	0.153	18.466	2.292	0.482	6.327
8.307	2.596	2.303	0.080	0.043	0.514	9.554	NA/NR	0.422	11.562	2.823	1.091	8.083
3.675	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	1.820	NA/NR	0.020	1.322	NA/NR	NA/NR	0.565
4.087	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	2.875	NA/NR	0.001	4.965	NA/NR	NA/NR	1.256
2.650	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	5.626	NA/NR	0.192	1.063	NA/NR	NA/NR	0.700
1.238	0.577	0.274	0.000	0.041	0.196	1.009	0.801	0.052	0.944	0.712	0.004	0.406
1.001	0.389	0.042	0.176	0.017	0.224	1.495	1.140	0.109	1.949	1.753	0.019	0.701
87.310	13.472	30.670	0.581	4.075	15.043	257.239	147.934	31.067	36.432	23.880	0.000	6.533
158.619	45.742	32.005	0.500	4.758	29.333	379.551	226.436	50.887	67.159	39.811	0.061	3.650
181.152	39.484	41.119	0.500	6.246	29.847	376.273	207.071	55.427	68.239	39.060	0.061	6.167
4.802	0.246	1.848	NA/NR	0.473	1.377	25.393	17.211	4.699	7.918	5.007	0.612	10.924
9.869	0.409	1.694	NA/NR	0.531	4.125	41.210	9.995	10.839	14.968	3.979	0.868	4.429
5.003	1.179	0.151	0.247	1.328	0.008	0.112	NA/NR	NA/NR	4.959	3.421	0.478	1.881
20.598	2.398	7.043	0.243	NA/NR	4.132	33.459	6.379	7.623	24.246	6.450	3.627	20.796
17.704	0.868	3.058	0.335	NA/NR	3.602	39.925	0.781	4.448	23.127	8.409	2.940	18.702
10.857	2.324	1.334	0.216	1.498	0.597	9.413	6.352	1.341	12.292	8.676	0.438	6.897
11.987	0.895	3.169	0.525	1.001	0.665	7.787	4.805	1.544	12.397	8.003	0.728	6.675
25.779	4.774	2.440	0.000	0.029	5.166	28.690	14.308	8.983	32.587	25.987	2.160	8.503
38.543	4.581	4.481	0.462	0.003	8.681	41.850	21.237	13.022	35.818	28.114	2.501	15.714
5.168	0.091	1.335	0.207	0.850	0.062	3.700	2.752	0.586	3.910	3.671	0.124	1.158
2.822	0.035	0.358	0.008	0.749	0.025	2.615	1.288	0.639	4.837	4.485	0.325	1.545
37.654	4.606	3.741	0.228	2.336	7.501	135.088	67.342	5.715	102.825	33.919	11.476	17.959
57.949	8.043	7.852	0.527	2.025	12.599	185.912	79.196	9.972	117.521	38.549	13.137	23.310
17.115	2.176	2.069	NA/NR	0.628	2.710	27.794	1.671	9.359	10.791	5.809	1.879	9.506
29.308	1.895	1.981	NA/NR	1.425	3.131	44.670	14.411	12.850	13.273	6.588	3.415	10.711
0.052	0.009	0.010	0.001	0.014	NA/NR	NA/NR	NA/NR	NA/NR	0.028	0.028	NA/NR	0.019
0.044	0.004	0.014	0.003	0.015	0.001	NA/NR	NA/NR	NA/NR	0.026	0.026	NA/NR	0.023
0.453	0.123	0.112	0.004	0.052	0.005	0.069	0.015	0.035	0.119	0.045	NA/NR	0.389
7.148	1.028	1.766	0.645	1.773	1.100	4.373	3.699	1.478	10.460	6.733	1.304	2.112
0.029	NA/NR	NA/NR	NA/NR	NA/NR	0.014	0.327	0.171	NA/NR	0.119	0.119	NA/NR	0.005
0.098	0.027	NA/NR	0.012	NA/NR	0.008	0.271	0.141	0.123	0.020	0.020	NA/NR	0.062
0.133	0.025	NA/NR	NA/NR	NA/NR	0.008	0.212	0.102	0.091	0.073	0.018	NA/NR	0.066
5.611	1.554	0.113	0.215	0.312	0.224	1.043	0.663	0.193	1.545	1.075	0.196	0.779

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COUNTRY REPORTS OF DOMESTIC AND INTERNATIONAL AIDS SPENDING BY SERVICE CATEGORIES AND FINANCING SOURCES

	Survey Year	Total reported domestic public and international expenditure million USD	SHARE BY FINANCING SOURCE: Public	International				
			Domestic public (%)	Bilaterals (%)	Global Fund (%)	UN (%)	All other multilaterals (%)	All other international sources (%)
South Africa	2008	1,694.000	77.0%	21.3%	0.7%	0.2%	0.4%	0.4%
South Africa	2009	2,088.000	72.7%	26.3%	0.2%	0.3%	0.2%	0.3%
Swaziland	2007	49.447	39.6%	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR
Togo	2007	10.203	9.5%	4.1%	56.5%	10.8%	1.3%	17.7%
Togo	2008	15.368	7.0%	15.3%	47.4%	6.5%	23.7%	0.1%
Uganda	2007	270.011	2.5%	92.7%	0.0%	4.9%	0.0%	0.0%
Uganda	2008	296.650	13.0%	83.0%	0.8%	3.2%	0.0%	0.0%
Zimbabwe	2008	27.344	1.3%	34.7%	0.0%	2.4%	0.0%	61.7%
Zimbabwe	2009	39.548	19.5%	21.4%	17.1%	1.1%	0.0%	40.9%
Western and Central Europe								
Belgium	2008	111.777	100.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Bosnia and Herzegovina	2008	2.760	10.9%	0.0%	70.8%	12.5%	5.9%	0.0%
Bosnia and Herzegovina	2009	3.584	8.4%	0.0%	76.4%	10.8%	4.4%	0.0%
Bulgaria[3]	2007	6.666	50.8%	0.0%	43.4%	5.9%	0.0%	0.0%
Bulgaria[3]	2008	9.212	66.0%	0.6%	30.6%	2.8%	0.0%	0.0%
Bulgaria[3]	2009	10.702	52.7%	0.2%	44.4%	2.7%	0.0%	0.0%
Croatia	2007	8.908	99.1%	0.0%	0.0%	0.9%	0.0%	0.0%
Croatia	2008	9.957	98.3%	0.0%	0.0%	1.7%	0.0%	0.0%
Croatia	2009	10.367	98.2%	0.0%	0.0%	1.8%	0.0%	0.0%
Czech Republic	2007	56.998	97.6%	0.0%	0.0%	0.0%	0.0%	2.4%
Czech Republic	2008	64.279	98.0%	0.0%	0.0%	0.0%	0.0%	2.0%
Czech Republic	2009	69.311	96.6%	0.0%	0.0%	0.0%	0.0%	3.4%
Estonia	2008	18.373	100.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Greece	2008	96.058	100.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Hungary[5]	2007	2.275	100.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Hungary	2008	3.673	100.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Hungary	2009	3.496	100.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Latvia	2009	2.264	94.4%	0.0%	0.0%	5.6%	0.0%	0.0%
Luxembourg	2009	7.356	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR
Montenegro[7]	2007	1.471	0.0%	0.0%	100.0%	0.0%	0.0%	0.0%
Montenegro[7]	2008	0.597	0.0%	0.0%	100.0%	0.0%	0.0%	0.0%
Montenegro[7]	2009	0.830	0.0%	0.0%	100.0%	0.0%	0.0%	0.0%
Poland	2007	41.202	100.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Poland	2008	62.586	100.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Poland	2009	55.520	100.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Romania	2008	87.241	92.7%	0.0%	6.0%	0.9%	0.0%	0.5%
Romania	2009	84.256	95.1%	0.0%	3.9%	0.5%	0.0%	0.4%
Spain	2007	551.413	100.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Spain	2008	916.739	100.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Spain	2009	1,031.381	100.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Sweden	2007	21.598	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR
Sweden	2008	22.155	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR
Sweden	2009	19.085	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR
Switzerland[9]	2008	14.898	100.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Switzerland[9]	2009	14.843	100.0%	0.0%	0.0%	0.0%	0.0%	0.0%
The former Yugoslav Republic of Macedonia	2008	3.659	56.5%	0.7%	31.4%	10.8%	0.0%	0.7%
United Kingdom	2007	1,204.082	100.0%	0.0%	0.0%	0.0%	0.0%	0.0%
United Kingdom	2008	925.714	100.0%	0.0%	0.0%	0.0%	0.0%	0.0%

[1] Antigua and Barbuda 2008 and 2009 expenditures for HIV patients' hospitalization, ARV, and out-patient clinic visits for care and treatment are not reported.

[2] Brazil sub-national spending at state, federal district and municipal level is not reported, except for acquisition of opportunistic infection drugs.

[3] Bulgaria opportunistic infection treatment expenditures not reported.

[4] Chilean armed forces HIV-related expenditures were not reported.

[5] The country reported biannual figures for HIV spending. The expenditures were therefore divided in two and distributed equally over the two years.

[6] India: The values reported reflect only NACO's (public) spending from the budgetary funds. The extra budgetary expenditures by donors and others is not reflected in the table provided and is still under compilation and analysis in a separate study.

[7] Montenegro spending includes only the budgeted activities of the GFATM project proposal.

[8] Dominican Republic: Blood safety expenditures were not reported.

[9] Switzerland: Only central government funding is reported.

[10] Timor Leste: Original submission for 2008 was for a one and a half year period (Aug. 2007 – Dec. 2008). The current figure for 2008 was derived by adjusting all figures by 2/3.

[11] Blood safety spending reported by Russia included expenditures such as equipment upgrades; some of which were not HIV related.

TOTAL HIV EXPENDITURES ON SELECTED SERVICES (MILLION CURRENT USD DOLLARS)

Prevention						Care and Treatment		Orphans and vulnerable children	Programme Support			Other HIV expenditures
Total for prevention	Communication for social and behavioral change	Voluntary counseling and testing	Programmes for sex workers and their clients for MSM and for harm reduction for IDUs	Male and female condom social marketing and public and commercial sector provision	Prevention of mother to child transmission	Total for care and treatment	Antiretroviral therapy		Total for programme management and administration strengthening	Planning, coordination and programme management	Monitoring and evaluation	
NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR
NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR
8.567	3.167	2.243	NA/NR	0.713	0.344	9.384	6.244	15.027	6.933	3.136	0.879	9.535
4.245	0.483	0.114	0.146	0.671	0.216	2.074	1.480	0.189	2.727	2.131	0.197	0.969
5.887	2.005	0.614	0.139	0.378	0.246	2.496	1.011	0.805	5.130	3.289	0.566	1.049
70.370	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	114.934	NA/NR	25.749	55.450	NA/NR	NA/NR	3.508
64.185	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	147.367	NA/NR	15.246	65.502	NA/NR	NA/NR	4.349
NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR
NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR
6.576	0.206	NA/NR	2.426	NA/NR	NA/NR	102.713	79.482	NA/NR	2.488	NA/NR	0.358	0.000
NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR
NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR
2.880	0.418	0.553	0.598	NA/NR	NA/NR	2.935	2.027	NA/NR	0.349	0.122	0.139	0.501
4.711	0.214	1.265	0.832	NA/NR	NA/NR	3.502	2.831	NA/NR	0.321	0.108	0.136	0.677
5.710	0.198	1.645	1.084	0.122	NA/NR	3.421	2.713	0.200	0.881	0.514	0.350	0.489
2.219	NA/NR	0.284	0.580	NA/NR	NA/NR	6.531	NA/NR	NA/NR	0.159	0.111	NA/NR	0.000
2.128	NA/NR	0.272	0.615	NA/NR	NA/NR	7.677	NA/NR	NA/NR	0.153	0.107	NA/NR	0.000
2.287	NA/NR	0.307	0.869	NA/NR	NA/NR	7.562	NA/NR	NA/NR	0.152	NA/NR	0.100	0.366
32.921	0.103	0.456	8.289	0.003	2.446	15.687	10.779	NA/NR	0.147	0.030	0.010	8.243
34.591	0.088	0.415	8.565	NA/NR	2.442	19.867	12.204	NA/NR	0.617	0.031	0.009	9.204
36.831	0.022	0.326	8.309	0.003	2.629	21.537	13.746	0.026	0.477	0.024	0.016	10.440
5.989	NA/NR	0.523	2.671	NA/NR	0.024	12.010	NA/NR	NA/NR	0.375	NA/NR	0.212	0.000
13.969	NA/NR	0.897	NA/NR	NA/NR	NA/NR	81.231	79.063	NA/NR	0.781	NA/NR	NA/NR	0.077
1.733	0.029	0.052	0.124	0.003	NA/NR	0.449	0.051	NA/NR	0.075	NA/NR	NA/NR	0.017
2.546	0.295	0.055	0.016	0.027	0.109	0.448	0.045	NA/NR	0.531	NA/NR	NA/NR	0.148
2.492	0.293	0.052	0.068	0.026	NA/NR	0.423	0.042	NA/NR	0.493	NA/NR	NA/NR	0.089
0.736	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	1.494	NA/NR	NA/NR	0.034	NA/NR	0.012	0.000
1.661	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	4.942	4.517	NA/NR	0.023	0.003	0.021	0.730
0.812	NA/NR	0.065	0.322	NA/NR	NA/NR	0.185	NA/NR	NA/NR	0.277	0.277	NA/NR	0.197
0.313	NA/NR	0.025	0.126	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	0.168	0.168	NA/NR	0.116
0.480	NA/NR	0.027	0.197	NA/NR	NA/NR	0.048	NA/NR	NA/NR	0.154	0.154	NA/NR	0.147
4.237	0.261	0.149	2.774	NA/NR	0.682	36.614	35.292	0.013	0.018	NA/NR	0.017	0.319
5.420	0.430	0.784	0.148	NA/NR	0.881	56.035	56.035	NA/NR	0.023	0.013	0.003	1.107
2.661	0.211	0.409	0.145	NA/NR	0.960	51.726	51.726	NA/NR	0.025	0.013	0.003	1.108
4.726	NA/NR	0.003	0.411	0.037	NA/NR	54.667	54.040	0.003	0.748	0.030	0.054	27.097
3.372	0.066	0.066	0.459	0.070	NA/NR	54.767	54.067	0.001	0.388	0.017	NA/NR	25.727
36.532	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	500.918	500.918	NA/NR	NA/NR	NA/NR	NA/NR	13.963
40.374	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	859.361	859.361	NA/NR	NA/NR	NA/NR	NA/NR	17.004
21.649	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	997.670	997.670	NA/NR	NA/NR	NA/NR	NA/NR	12.063
NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR
NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR
NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR
4.611	2.456	NA/NR	0.996	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	1.019	0.649	0.371	9.268
4.594	2.447	NA/NR	0.993	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	1.016	0.646	0.369	9.234
2.833	0.207	0.301	1.858	0.005	NA/NR	0.172	0.154	NA/NR	0.478	0.282	0.070	0.176
46.939	NA/NR	NA/NR	4.082	NA/NR	NA/NR	1,106.122	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	51.020
35.714	NA/NR	NA/NR	2.857	NA/NR	NA/NR	857.143	NA/NR	NA/NR	NA/NR	NA/NR	NA/NR	32.857

A2

National Composite Policy Index (NCPI) 2010

UNGASS Indicator 2

	2004 NCPI Submission	2006 NCPI Submission	2008 NCPI Submission	2010 NCPI Submission	Strategic Plan	Civil society involvemnt in planning	NAC	M & E Plan	Laws that protect MARPs/ vulnerable population	Laws that pose obstacles	HIV Prevention Services Implementation: PMTCT	Condom promotion	HIV testing and counseling	Harm reduciton for IDU	Risk reduction for men who have sex with men	Risk reduction for sex workers	Treatment Implementation: Antiretroviral therapy	Paediatric AIDS treatment	HIV testing and counselling for TB patients
	A &/ B			A | B	A	B	A	A	A | B	A | B	A | B	A | B	A | B	A | B	A | B	A | B	A | B	A | B	A | B
Afghanistan	■	■	■	■ ■	■	4	■	■	■ ■	■ ■	▣ ▣	■ ■	■ ■	■ ■	■ ■	■ □	■ ■	▣ ■	■ ■
Albania	■	■	■	■ ■	□	□	□	□	□ □	□ □	□ □	□ □	□ □	□ □	□ □	□ □	□ □	□ □	□ □
Algeria	■	■	■	■ ■	■	5	■	■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■
Andorra	■	■	■	■ ■	□	□	□	□	□ □	□ □	□ □	□ □	□ □	□ □	□ □	□ □	□ □	□ □	□ □
Angola	■	■	■	■ ■	■	3	■	■	■ ■	■ ■	■ ■	■ ■	■ ■	▣ ■	▣ ■	■ ■	■ ■	■ ■	■ ■
Antigua and Barbuda	■	■	■	■ ■	■	3	■	■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ▣	■ ■	■ ■	■ ■	■ ■	■ ■
Argentina	■	■	■	■ ■	■	2	■	■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■
Armenia	■	■	■	■ ■	■	4	■	▣	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■
Australia	■	■	■	■ ■	■	4	■	■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■
Austria	■	■	■	■ ■	□	□	□	□	□ □	□ □	□ □	□ □	□ □	□ □	□ □	□ □	□ □	□ □	□ □
Azerbaijan	■	■	■	■ ■	■	0	■	▣	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■
Bahamas	■	■	■	■ ■	■	4	■	■	■ ■	■ ■	■ ■	■ ■	■ ■	▣ ■	■ ■	■ ■	■ ■	■ ■	■ ■
Bahrain	■	■	■	■ ■	■	2	■	■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■
Bangladesh	■	■	■	■ ■	■	3	■	■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■
Barbados	■	■	■	■ ■	■	2	■	■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ▣	■ ■	■ ■	■ ■	■ ■	■ ■
Belarus	■	■	■	■ ■	■	4	■	■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■
Belgium	■	■	■	■ ■	■	1	■	■	□ ■	□ ■	■ □	■ ■	■ ■	■ ■	■ ■	■ ■	■ □	■ □	■ □
Belize	■	■	■	■ ■	■	4	■	■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■
Benin	■	■	■	■ ■	■	4	■	□	■ ■	■ ■	■ ■	■ ■	■ ■	▣ ▣	▣ ▣	■ ■	■ ■	■ ■	■ ■
Bhutan	■	■	■	■ ■	□	□	□	□	□ □	□ □	□ □	□ □	□ □	□ □	□ □	□ □	□ □	□ □	□ □
Bolivia	■	■	■	■ ■	■	3	■	■	■ ■	■ ■	■ ■	■ ■	■ ■	▣ ■	▣ ■	■ ■	■ ■	■ ■	■ ■
Bosnia and Herzegovina	■	■	■	■ ■	■	4	■	■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	▣ ■	▣ ■	■ ■	■ ▣	■ ■
Botswana	■	■	■	■ ■	■	4	■	■	■ ■	■ ■	■ ■	■ ■	■ ■	▣ ■	▣ ■	▣ ▣	■ ■	■ ■	■ ■
Brazil	■	■	■	■ ■	■	3	■	■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■
Brunei Darussalam	■	■	■	■ ■	■	□	■	■	■ ■	■ ■	■ ■	■ ■	■ ■	▣ ▣	■ ■	▣ ▣	■ ■	■ ■	■ ■
Bulgaria	■	■	■	■ ■	■	4	■	▣	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■
Burkina Faso	■	■	■	■ ■	■	4	■	■	■ ■	■ ■	■ ■	■ ■	■ ■	▣ ■	▣ ■	■ ■	■ ■	■ ■	■ ■
Burundi	■	■	■	■ ■	■	5	■	■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ▣	■ ■	■ ■	■ ■	■ ■	■ ■
Cambodia	■	■	■	■ ■	■	4	■	■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ▣	■ ▣	■ ■	■ ■	■ ■	■ ■
Cameroon	■	■	■	■ ■	■	5	■	■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ▣	▣ ■	■ ■	■ ■	■ ■	■ ■
Canada	■	■	■	■ ■	■	3	■	■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■
Cape Verde	■	■	■	■ ■	■	3	■	■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■
Central African Republic	■	■	■	■ ■	■	3	■	■	■ ■	■ ■	■ ■	■ ■	■ ■	▣ ▣	▣ ▣	■ ■	■ ■	■ ■	■ ■
Chad	■	■	■	■ ■	■	5	■	■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■
Chile	■	■	■	■ ■	■	0	■	■	■ ■	■ ■	■ ■	■ ■	■ ■	▣ ■	■ ■	■ ■	■ ■	■ ■	■ ■
China	■	■	■	■ ■	■	2	■	■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■
Colombia	■	■	■	■ ■	■	1	■	■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■
Comoros	■	■	■	■ ■	■	4	■	■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■
Congo, Republic of the	■	■	■	■ ■	■	3	■	■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■
Costa Rica	■	■	■	■ ■	■	5	■	■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ▣	■ ■	■ ■	■ ■	■ ■

■ Yes/Agree ■ No/Disagree □ Data not available ▣ In progress ▣ Not applicable Number SCALE: 0= low; 5 = High

National Composite Policy Index (NCPI) 2010

	2004 NCPI Submission	2006 NCPI Submission	2008 NCPI Submission	2010 NCPI Submission	Strategic Plan	Civil society involvemnt in planning	NAC	M & E Plan	Laws that protect MARPs/ vulnerable population	Laws that pose obstacles	HIV Prevention Services Implementation: PMTCT	Condom promotion	HIV testing and counseling	Harm reduciton for IDU	Risk reduction for men who have sex with men	Risk reduction for sex workers	Treatment Implementation: Antiretroviral therapy	Paediatric AIDS treatment	HIV testing and counselling for TB patients
	A &/ B			A | B	A	B	A	A	A | B	A | B	A | B	A | B	A | B	A | B	A | B	A | B	A | B	A | B	A | B
Croatia	■	■	■	■■	■	4	■	■	■■	■■	■■	■■	■■	■■	■■	■■	■■	□■	□■
Cuba	■	■	■	■■	■	4	■	■	■■	■■	■■	■■	■■	▣□	■■	■■	■■	■■	■■
Cyprus	■	■	■	■■	□	□	□	□	□□	□□	□□	□□	□□	□□	□□	□□	□□	□□	□□
Czech Republic	■	■	■	■■	■	5	■	▣	■■	■■	■■	■■	■■	■■	■■	■■	■■	■■	■▣
Côte d'Ivoire	■	■	■	■■	■	4	■	■	■■	■■	■■	■■	■■	■■	■■	■■	■■	■■	■■
Democratic People's Republic of Korea	■	■	■	■■	□	□	□	□	□□	□□	□□	□□	□□	□□	□□	□□	□□	□□	□□
Democratic Republic of Congo	■	■	■	■■	■	3	■	▣	■■	■■	■■	■■	■■	□▣	□▣	■■	■■	■■	■■
Denmark	■	■	■	■■	■	1	■	■	■■	■■	■■	■■	■■	■■	■■	■■	■■	■■	■■
Djibouti	■	■	■	■■	■	4	■	■	■■	■■	■■	■■	■■	▣□	■	■■	■■	■■	■■
Dominica	■	■	■	■■	■	4	■	▣	■■	■■	■■	■■	■■	▣□	■■	■■	■■	■■	■■
Dominican Republic	■	■	■	■■	■	3	■	■	■■	■■	■■	■■	■■	■■	■■	■■	■■	■■	■■
Ecuador	■	■	■	■■	■	5	■	■	■■	■■	■■	■■	■■	■▣	■■	■■	■■	■■	■■
Egypt	■	■	■	■■	■	3	■	■	■■	■■	■■	■■	■■	■■	■■	■■	■■	■■	■■
El Salvador	■	■	■	■■	■	3	■	■	■■	■■	■■	■■	■■	■■	■■	■■	■■	■■	■■
Equatorial Guinea	■	■	■	■■	■	5	■	■	■■	■■	■■	■■	■■	▣■	▣■	▣■	■■	■■	■■
Eritrea	■	■	■	■■	■	5	■	■	■■	■■	■■	■■	■■	▣▣	▣▣	■■	■■	■■	■■
Estonia	■	■	■	■■	■	2	■	▣	■■	■■	■■	■■	■■	■■	■■	■■	■■	■■	■■
Ethiopia	■	■	■	■■	■	4	■	▣	■■	■■	■■	■■	■■	■▣	■▣	■■	■■	■■	■■
Fiji	■	■	■	■■	■	4	■	■	■■	■■	■■	■■	■■	▣▣	■■	■■	■■	▣■	■■
Finland	■	■	■	■■	■	3	■	▣	■■	■■	■■	■▣	■■	■■	■■	■■	■■	■■	■■
France	■	■	■	■■	□	□	□	□	□□	□□	□□	□□	□□	□□	□□	□□	□□	□□	□□
Gabon	■	■	■	■■	■	4	■	▣	■■	■■	■■	■■	■■	■■	▣▣	■■	■■	■■	■■
Gambia	■	■	■	■■	■	4	■	■	■■	■■	■■	■■	■■	■■	■■	■■	■■	■■	■■
Georgia	■	■	■	■■	■	3	■	■	■■	■■	■■	■■	□■	■■	■■	■■	■■	■■	■■
Germany	■	■	■	■■	■	5	■	■	■■	■■	■■	■■	■■	■■	■■	■■	■■	■■	■▣
Ghana	■	■	■	■■	■	4	■	■	■■	■■	■■	■■	■■	▣■	■■	■■	■■	■■	■■
Greece	■	■	■	■■	■	2	■	■	■■	■■	■■	■■	■■	■■	■■	■■	■■	■■	■■
Grenada	■	■	■	■■	■	3	■	■	■■	■■	■■	■■	■■	▣▣	■■	■■	■■	■■	■■
Guatemala	■	■	■	■■	■	3	■	■	■■	■■	■■	■■	■■	■▣	■■	■■	■■	■■	■■
Guinea	■	■	■	■■	■	4	■	■	■■	■■	■▣	■■	■■	▣■	▣■	■■	■■	■■	■■
Guinea-Bissau	■	■	■	■■	■	4	■	■	■■	■■	■■	■■	■■	▣▣	▣▣	■■	■■	■■	■■
Guyana	■	■	■	■■	■	3	■	■	■■	■■	■■	■■	■■	▣▣	■■	■■	■■	■■	■■
Haiti	■	■	■	■■	■	4	■	▣	■■	■■	■■	■■	■■	■■	■■	■■	■■	■■	■■
Honduras	■	■	■	■■	■	3	■	▣	■■	■■	■■	■■	■■	■■	■■	■■	■■	■■	■■
Hungary	■	■	■	■■	■	2	■	▣	■■	■■	■■	■■	■■	■■	■■	■■	■■	■■	■■
Iceland	■	■	■	■■	□	□	□	□	□□	□□	□□	□□	□□	□□	□□	□□	□□	□□	□□
India	■	■	■	■■	■	2	■	■	■■	■■	■■	■■	■■	■■	■■	■■	■■	■■	■■
Indonesia	■	■	■	■■	■	1	■	■	■■	■■	■■	■■	■■	■■	■■	■■	■■	■■	■■
Iran, Islamic Republic of	■	■	■	■■	■	4	■	■	■■	■■	▣■	■■	■■	■■	■■	■■	■■	■■	■■

■ Yes/Agree ■ No/Disagree □ Data not available ▣ In progress ▣ Not applicable Number SCALE: 0= low; 5 = High

A2

National Composite Policy Index (NCPI) 2010

	2004 NCPI Submission	2006 NCPI Submission	2008 NCPI Submission	2010 NCPI Submission	Strategic Plan	Civil society involvemnt in planning	NAC	M & E Plan	Laws that protect MARPs/ vulnerable population	Laws that pose obstacles	HIV Prevention Services Implementation: PMTCT	Condom promotion	HIV testing and counseling	Harm reduciton for IDU	Risk reduction for men who have sex with men	Risk reduction for sex workers	Treatment Implementation: Antiretroviral therapy	Paediatric AIDS treatment	HIV testing and counselling for TB patients
	A&/B			A|B	A	B	A	A	A|B	A|B	A|B	A|B	A|B	A|B	A|B	A|B	A|B	A|B	A|B
Iraq	No/Disagree	No/Disagree	No/Disagree	No/Disagree	Data not available	Data not available	Data not available	Data not available	Data not available	Data not available	Data not available	Data not available	Data not available	Data not available	Data not available	Data not available	Data not available	Data not available	Data not available
Ireland	No/Disagree	No/Disagree	No/Disagree	Yes/Agree	Yes/Agree	Data not available	Yes/Agree	No/Disagree	No/Disagree	Yes/Agree	Not applicable	Not applicable	Not applicable	Not applicable	Not applicable	Not applicable	Yes/Agree	Yes/Agree	Yes/Agree
Israel	No/Disagree	Yes/Agree	No/Disagree	Yes/Agree	No/Disagree	4	Yes/Agree	Data not available	No/Disagree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree
Italy	No/Disagree	No/Disagree	No/Disagree	Yes/Agree	Data not available	Data not available	Data not available	Data not available	Data not available	Data not available	Data not available	Data not available	Data not available	Data not available	Data not available	Data not available	Data not available	Data not available	Data not available
Jamaica	Yes/Agree	No/Disagree	Yes/Agree	Yes/Agree	Yes/Agree	3	Yes/Agree	Yes/Agree	No/Disagree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	No/Disagree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree
Japan	No/Disagree	Yes/Agree	Yes/Agree	Yes/Agree	Data not available	3	Data not available	Data not available	Yes/Agree	Data not available	Yes/Agree	Not applicable	Not applicable	No/Disagree	No/Disagree	No/Disagree	Yes/Agree	Yes/Agree	Not applicable
Jordan	Yes/Agree	No/Disagree	No/Disagree	Yes/Agree	Yes/Agree	2	Yes/Agree	Yes/Agree	No/Disagree	No/Disagree	Not applicable	No/Disagree	Yes/Agree	Not applicable	No/Disagree	No/Disagree	Yes/Agree	Yes/Agree	Yes/Agree
Kazakhstan	Yes/Agree	No/Disagree	Yes/Agree	Yes/Agree	Yes/Agree	3	Yes/Agree	Yes/Agree	No/Disagree	No/Disagree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree
Kenya	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	3	Yes/Agree	Yes/Agree	No/Disagree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	No/Disagree	No/Disagree	Yes/Agree
Kiribati	No/Disagree	No/Disagree	No/Disagree	No/Disagree	Data not available	Data not available	Data not available	Data not available	Data not available	Data not available	Data not available	Data not available	Data not available	Data not available	Data not available	Data not available	Data not available	Data not available	Data not available
Kuwait	No/Disagree	No/Disagree	No/Disagree	Yes/Agree	Yes/Agree	Data not available	Yes/Agree	No/Disagree	No/Disagree	Yes/Agree	Yes/Agree	No/Disagree	No/Disagree	No/Disagree	No/Disagree	No/Disagree	Yes/Agree	Yes/Agree	Yes/Agree
Kyrgyzstan	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	3	Yes/Agree	In progress	Yes/Agree	No/Disagree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	No/Disagree
Lao People's Democratic Republic	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	4	Yes/Agree	Yes/Agree	Yes/Agree	No/Disagree	Yes/Agree	Yes/Agree	Yes/Agree	Not applicable	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree
Latvia	No/Disagree	No/Disagree	Yes/Agree	Yes/Agree	Yes/Agree	3	Yes/Agree	Yes/Agree	No/Disagree	No/Disagree	Yes/Agree	No/Disagree	Yes/Agree	Yes/Agree	No/Disagree	No/Disagree	Yes/Agree	Yes/Agree	Yes/Agree
Lebanon	Yes/Agree	No/Disagree	No/Disagree	Yes/Agree	Yes/Agree	5	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree
Lesotho	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	4	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	Not applicable	No/Disagree	No/Disagree	Yes/Agree	Yes/Agree	Yes/Agree
Liberia	No/Disagree	No/Disagree	No/Disagree	No/Disagree	Data not available	Data not available	Data not available	Data not available	Data not available	Data not available	Data not available	Data not available	Data not available	Data not available	Data not available	Data not available	Data not available	Data not available	Data not available
Libyan Arab Jamahiriya	No/Disagree	No/Disagree	No/Disagree	Yes/Agree	No/Disagree	2	Yes/Agree	No/Disagree	No/Disagree	Yes/Agree	Yes/Agree	No/Disagree	Yes/Agree	No/Disagree	No/Disagree	No/Disagree	Yes/Agree	Yes/Agree	Yes/Agree
Liechtenstein	No/Disagree	No/Disagree	No/Disagree	No/Disagree	Data not available	Data not available	Data not available	Data not available	Data not available	Data not available	Data not available	Data not available	Data not available	Data not available	Data not available	Data not available	Data not available	Data not available	Data not available
Lithuania	Yes/Agree	No/Disagree	Yes/Agree	Yes/Agree	Yes/Agree	4	Yes/Agree	Yes/Agree	No/Disagree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree
Luxembourg	Yes/Agree	No/Disagree	No/Disagree	Yes/Agree	Yes/Agree	5	Yes/Agree	In progress	Yes/Agree	No/Disagree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree
Macedonia, FYR	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	5	Yes/Agree	Yes/Agree	No/Disagree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	No/Disagree	No/Disagree	No/Disagree	Not applicable	Not applicable	Yes/Agree
Madagascar	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	4	Yes/Agree	Yes/Agree	Yes/Agree	No/Disagree	Yes/Agree	Yes/Agree	No/Disagree	Not applicable	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree
Malawi	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	4	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	No/Disagree	Yes/Agree	No/Disagree	No/Disagree	Yes/Agree
Malaysia	No/Disagree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	4	Yes/Agree	Yes/Agree	No/Disagree	Yes/Agree	Yes/Agree	No/Disagree	Yes/Agree	No/Disagree	No/Disagree	No/Disagree	Yes/Agree	Yes/Agree	Yes/Agree
Maldives	No/Disagree	No/Disagree	No/Disagree	Yes/Agree	Yes/Agree	3	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	No/Disagree	Yes/Agree	Not applicable	No/Disagree	No/Disagree	Yes/Agree	Not applicable	No/Disagree
Mali	No/Disagree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	5	Yes/Agree	Yes/Agree	Yes/Agree	No/Disagree	Yes/Agree	Yes/Agree	Yes/Agree	Not applicable	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree
Malta	Yes/Agree	No/Disagree	No/Disagree	Yes/Agree	No/Disagree	Yes/Agree	No/Disagree	In progress	No/Disagree	Data not available	Yes/Agree	Data not available	Yes/Agree	Yes/Agree	Data not available	No/Disagree	Yes/Agree	Yes/Agree	Yes/Agree
Marshall Islands	No/Disagree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	Data not available	Yes/Agree	In progress	Yes/Agree	Yes/Agree	Yes/Agree	No/Disagree	Yes/Agree	Not applicable	No/Disagree	Yes/Agree	Yes/Agree	Not applicable	Yes/Agree
Mauritania	No/Disagree	No/Disagree	No/Disagree	No/Disagree	Data not available	Data not available	Data not available	Data not available	Data not available	Data not available	Data not available	Data not available	Data not available	Data not available	Data not available	Data not available	Data not available	Data not available	Data not available
Mauritius	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	4	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	No/Disagree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree
Mexico	Yes/Agree	No/Disagree	Yes/Agree	Yes/Agree	Yes/Agree	2	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	No/Disagree	Yes/Agree	No/Disagree	Yes/Agree	No/Disagree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree
Micronesia, Federated States of	No/Disagree	Yes/Agree	No/Disagree	Yes/Agree	No/Disagree	1	Yes/Agree	Yes/Agree	No/Disagree	No/Disagree	Yes/Agree	Yes/Agree	Yes/Agree	Not applicable	Yes/Agree	No/Disagree	Yes/Agree	Yes/Agree	Yes/Agree
Moldova	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	4	Yes/Agree	Yes/Agree	Yes/Agree	No/Disagree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	No/Disagree	No/Disagree	Yes/Agree	Yes/Agree	Yes/Agree
Monaco	No/Disagree	No/Disagree	No/Disagree	No/Disagree	Data not available	Data not available	Data not available	Data not available	Data not available	Data not available	Data not available	Data not available	Data not available	Data not available	Data not available	Data not available	Data not available	Data not available	Data not available
Mongolia	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	4	Yes/Agree	In progress	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	Not applicable	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree
Montenegro	No/Disagree	No/Disagree	Yes/Agree	Yes/Agree	Yes/Agree	4	Yes/Agree	In progress	No/Disagree	Yes/Agree	Yes/Agree	No/Disagree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	Not applicable	No/Disagree
Morocco	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	5	Yes/Agree	Yes/Agree	No/Disagree	Yes/Agree	No/Disagree	No/Disagree	Yes/Agree	Yes/Agree	No/Disagree	Yes/Agree	Yes/Agree	Yes/Agree	No/Disagree
Mozambique	No/Disagree	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	3	Yes/Agree	Yes/Agree	Yes/Agree	Yes/Agree	No/Disagree	Yes/Agree	No/Disagree	No/Disagree	Not applicable	Not applicable	No/Disagree	No/Disagree	Yes/Agree

Yes/Agree | No/Disagree | Data not available | In progress | Not applicable | Number SCALE: 0= low; 5 = High

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	A &/ B			A | B	A	B	A	A	A | B	A | B	A | B	A | B	A | B	A | B	A | B	A | B	A | B	A | B	A | B
Myanmar	■	■	■	■ ■	■	3	■	■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■
Namibia	■	■	■	■ ■	□	□	□	□	□ □	□ □	□ □	□ □	□ □	□ □	□ □	□ □	□ □	□ □	□ □
Nauru	■	■	■	■ ■	■	□	■	■	■ ■	■ ■	▣ ■	■ ■	■ ■	▣ ▣	■ ■	■ ■	▣ ▣	▣ ▣	▣ ▣
Nepal	■	■	■	■ ■	■	4	■	■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■
Netherlands	■	■	■	■ ■	■	5	■	■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■
New Zealand	■	■	■	■ ■	▣	3	■	■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■
Nicaragua	■	■	■	■ ■	■	4	■	■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■
Niger	■	■	■	■ ■	■	4	■	■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■
Nigeria	■	■	■	■ ■	■	4	■	■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■
Paraguay	■	■	■	■ ■	■	3	■	■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■
Peru	■	■	■	■ ■	■	3	■	■	■ ■	■ ■	■ ■	■ ■	■ ■	■ □	■ ■	■ ■	■ ■	■ ■	■ ■
Philippines	■	■	■	■ ■	■	5	■	■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■
Poland	■	■	■	■ ■	■	2	■	■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■
Portugal	■	■	■	■ ■	■	3	■	▣	■ ■	■ ■	■ ▣	■ ■	■ ■	■ ■	■ ▣	■ ■	■ ■	■ ▣	■ ■
Qatar	■	■	■	■ ■	■	□	■	▣	■ □	■ □	■ □	□ □	□ □	□ □	□ □	□ □	■ □	■ □	■ □
Republic of Korea	■	■	■	■ ■	□	□	□	□	□ □	□ □	□ □	□ □	□ □	□ □	□ □	□ □	□ □	□ □	□ □
Romania	■	■	■	■ ■	■	3	■	■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■
Russian Federation	■	■	■	■ ■	■	3	■	■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■
Rwanda	■	■	■	■ ■	■	5	■	■	■ □	■ ■	■ ■	■ ■	■ ■	▣ ▣	■ ■	■ ■	■ ■	■ ■	■ ■
Saint Kitts and Nevis	■	■	■	■ ■	■	3	■	▣	■ ■	■ ■	■ ■	■ ■	■ ■	▣ ▣	■ ■	■ ■	■ ■	■ ■	■ ▣
Saint Lucia	■	■	■	■ ■	■	3	■	■	■ ■	■ ■	■ ■	■ ■	■ ■	▣ ▣	■ ■	■ ■	■ ■	■ ■	■ ■
Saint Vincent and Grenadines	■	■	■	■ ■	■	3	■	■	■ ■	■ ■	■ ■	■ ■	■ ■	▣ ▣	■ ■	■ ■	■ ■	■ ■	■ ■
Samoa	■	■	■	■ ■	■	5	■	▣	■ ■	■ ■	■ ■	■ ■	■ ■	▣ ■	■ ■	■ ■	■ ■	■ ■	▣ ■
San Marino	■	■	■	■ ■	□	□	□	□	□ □	□ □	□ □	□ □	□ □	□ □	□ □	□ □	□ □	□ □	□ □
Sao Tome and Principe	■	■	■	■ ■	■	4	■	■	■ ■	■ ■	■ ■	■ ■	■ ■	▣ ▣	▣ ▣	■ ■	■ ■	■ ■	■ ■
Saudi Arabia	■	■	■	■ ■	■	□	■	■	■ ■	■ ■	■ ■	■ ▣	■ ■	■ ■	■ ▣	■ ▣	■ ■	■ ■	■ ■
Senegal	■	■	■	■ ■	■	5	■	■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■
Serbia	■	■	■	■ ■	■	4	■	■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■
Seychelles	■	■	■	■ ■	■	2	■	■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■
Sierra Leone	■	■	■	■ ■	■	3	■	■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■
Singapore	■	■	■	■ ■	■	3	■	■	■ ■	■ ■	■ ■	■ ■	■ ■	▣ ■	■ ■	■ ■	■ ■	■ ■	■ ■
Slovakia	■	■	■	■ ■	□	□	□	□	□ □	□ □	□ □	□ □	□ □	□ □	□ □	□ □	□ □	□ □	□ □
Slovenia	■	■	■	■ ■	■	3	■	■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■
Solomon Islands	■	■	■	■ ■	■	4	■	■	■ ■	■ ■	■ ■	■ ■	■ ■	▣ ■	■ ■	■ ■	■ ■	▣ ▣	■ ■
Somalia	■	■	■	■ ■	■	2	■	▣	■ ■	■ ■	■ ■	■ ■	■ ■	▣ ■	▣ ■	■ ■	■ ■	■ ■	■ ■
South Africa	■	■	■	■ ■	■	3	■	■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■
Spain	■	■	■	■ ■	■	2	■	■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ■	■ ▣
Sri Lanka	■	■	■	■ ■	■	2	■	■	■ ■	■ ■	■ ■	■ ■	■ ■	▣ ■	■ ■	■ ■	■ ■	■ ■	■ ■
Sudan	■	■	■	■ ■	□	□	□	□	□ □	□ □	□ □	□ □	□ □	□ □	□ □	□ □	□ □	□ □	□ □
Suriname	■	■	■	■ ■	■	2	■	■	■ ■	■ ■	■ ■	■ ■	■ ■	▣ ▣	■ ■	■ ■	■ ■	■ ■	■ ■

■ Yes/Agree ■ No/Disagree □ Data not available ■ In progress ▣ Not applicable Number SCALE: 0= low; 5 = High

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National Composite Policy Index (NCPI) 2010

	2004 NCPI Submission	2006 NCPI Submission	2008 NCPI Submission	2010 NCPI Submission	Strategic Plan	Civil society involvemnt in planning	NAC	M & E Plan	Laws that protect MARPs/ vulnerable population	Laws that pose obstacles	HIV Prevention Services Implementation: PMTCT	Condom promotion	HIV testing and counseling	Harm reduciton for IDU	Risk reduction for men who have sex with men	Risk reduction for sex workers	Treatment Implementation: Antiretroviral therapy	Paediatric AIDS treatment	HIV testing and counselling for TB patients
	A &/ B			A|B	A	B	A	A	A|B	A|B	A|B	A|B	A|B	A|B	A|B	A|B	A|B	A|B	A|B
Swaziland	Yes	Yes	Yes	Yes Yes	Yes	4	Yes	Yes	No No	No Yes	Yes Yes	Yes Yes	Yes Yes	No No	No No	Yes No	Yes Yes	Yes Yes	Yes Yes
Sweden	Yes	No	Yes	Yes Yes	Yes		Yes	In progress	Yes Yes	Yes Yes	Not applicable Yes	Yes Yes	Yes Yes	No No	Yes Yes	Yes Yes	Yes Yes	Yes Yes	Yes Yes
Switzerland	No	Yes	Yes	Yes Yes	Yes	4	Yes	Yes	No Yes	Yes Yes	Yes Yes	Yes Yes	Yes Yes	Yes Yes	Yes Yes	Yes No	Yes Yes	Yes Yes	Yes Yes
Syrian Arab Republic	Yes	No	No	Yes Yes	No	4	Yes	No	Yes Yes	Yes Yes	Yes No	No Yes	Yes Yes	No No	No No	No No	Yes Yes	Yes Yes	Yes No
Tajikistan	Yes	Yes	Yes	Yes Yes	Yes	4	Yes	Yes	Yes Yes	No No	Yes Yes	Yes Yes	Yes Yes	No No	No No	No No	Yes Yes	Yes Yes	Yes Yes
Thailand	Yes	No	Yes	Yes Yes	Yes	3	Yes	In progress	Yes Yes	Yes Yes	Yes Yes	No No	No No	No No	No No	No No	Yes Yes	Yes No	Yes Yes
Timor-Leste	No	No	No	Yes Yes	Yes	3	Yes	Yes	Yes Yes	No No	Yes No	Yes Yes	Yes Yes	No No	Yes Yes	Yes Yes	Yes Yes	Yes Yes	Yes Yes
Norway	No	Yes	No	Yes Yes	Yes	2	Yes	In progress	Yes Yes	Yes Yes	Yes Yes	Yes Yes	Yes Yes	Yes Yes	Yes Yes	Yes Yes	Yes Yes	Yes Yes	Yes Yes
Oman	Yes	No	No	Yes Yes	Yes	1	Yes	In progress	No Yes	No Not applicable	Yes Yes	No No	Yes Yes	No No	No No	No No	Yes Yes	Yes Yes	Yes Yes
Pakistan	Yes	Yes	Yes	Yes Yes	Yes	3	Yes	Yes	No No	Yes Yes	No No	Yes Yes	No No	Yes Yes	Yes Yes	Yes Yes	Yes Yes	Yes Yes	Yes Yes
Palau	No	Yes	Yes	Yes Yes	Yes	3	Yes	In progress	No Yes	No No	Yes Yes	Yes Yes	Yes Yes	Yes Not applicable	Yes In progress	Yes Not applicable	Yes Not applicable	Yes Yes	Yes Yes
Panama	No	Yes	Yes	Yes Yes	Yes	5	Yes	Yes	Yes Yes	Yes No	Yes Yes	Yes No	Yes No	In progress Not applicable	Yes No	Yes No	Yes Yes	Yes Yes	Yes Yes
Papua New Guinea	Yes	No	Yes	Yes Yes	Yes	4	Yes	Yes	Yes Yes	Yes Yes	No No	Yes Yes	Yes Yes	In progress No	Yes Yes	Yes Yes	Yes Yes	No No	No No
Togo	No	Yes	Yes	Yes Yes	Yes	4	Yes	Yes	Yes Yes	Yes Yes	Yes No	Yes Yes	Yes No	No No	Yes No	Yes No	Yes Yes	Yes No	Yes No
Tonga	No	No	No	Yes Yes	Yes		Yes	In progress	No No	No No	Yes No	Yes Yes	Yes Yes	Yes No	Yes Yes	In progress Yes	In progress Yes	In progress Yes	Yes Yes
Trinidad and Tobago	No	Yes	Yes	Yes Yes	Yes	2	Yes	In progress	Yes No	Yes Yes	Yes Yes	Yes Yes	Yes No	No No	Yes No	Yes No	Yes Yes	Yes Yes	Yes Yes
Tunisia	No	No	Yes	Yes Yes	Yes	3	Yes	Yes	No No	No Yes	Yes Yes	Yes No	Yes Yes	No No	No No	No No	Yes Yes	Yes Yes	Yes Yes
Turkey	Yes	Yes	Yes	Yes Yes	Yes	2	Yes	In progress	Yes Yes	No Yes	Yes No	Yes Yes	Yes No	In progress No	In progress Yes	In progress Yes	Yes Yes	Yes Yes	Yes No
Turkmenistan	No	No	No	No No	No		No	No	No No	No No	No No	No No	No No	No No	No No	No No	No No	No No	No No
Tuvalu	No	No	Yes	Yes Yes	Yes	5	Yes	In progress	No No	No No	Yes Yes	Yes Yes	Yes Yes	In progress No	In progress No	In progress No	Yes Yes	Yes Yes	Yes Yes
Uganda	Yes	Yes	Yes	Yes Yes	Yes	5	Yes	Yes	Yes Yes	No No	No No	No Yes	No Yes	In progress In progress	In progress In progress	No No	Yes Yes	No No	Yes Yes
Ukraine	Yes	Yes	Yes	Yes Yes	Yes	3	Yes	Yes	Yes Yes	No Yes	Yes Yes	Yes Yes	No No	No No	No No	No No	No No	Yes Yes	Yes No
United Arab Emirates	No	No	No	Yes Yes	No	4	Yes	In progress	Yes Yes	Yes Yes	Yes Yes	In progress No	Yes Yes	In progress No	In progress No	In progress No	Yes Yes	Yes Yes	Yes Yes
United Kingdom of Great Britain and Northern Ireland	No	Yes	Yes	Yes Yes	Yes	2	No	Yes	Yes Yes	No Yes	Yes Yes	Yes Yes	Yes Yes	Yes Yes	Yes Yes	Yes Yes	Yes Yes	Yes Yes	Yes No
United Republic of Tanzania	Yes	No	Yes	Yes Yes	Yes		Yes	Yes	No Yes	No Yes	Yes Yes	Yes Yes	Yes Yes	No No	In progress No	In progress No	Yes No	No No	Yes No
United States of America	No	Yes	No	Yes Yes	No	3	Yes	Yes	Yes Yes	Yes No	Yes Yes	Yes Yes	Yes Yes	Yes Yes	Yes Yes	Yes Yes	No No	No No	No No
Uruguay	Yes	Yes	Yes	Yes Yes	Yes	4	Yes	Yes	Yes Yes	No No	Yes Yes	Yes Yes	No Yes	No No	No No	Yes No	Yes Yes	Yes Yes	Yes Yes
Uzbekistan	Yes	No	Yes	Yes Yes	Yes		Yes	Yes	Yes Yes	No No	Yes Yes	Yes No	Yes Yes	Yes Yes	Yes No	Yes Yes	Yes Yes	Yes Yes	Yes Yes
Vanuatu	No	No	No	Yes Yes	Yes	5	Yes	In progress	No No	No Yes	Yes Yes	Yes No	Yes No	In progress In progress	Yes No	Yes No	Yes Yes	Yes In progress	Yes No
Venezuela	No	No	No	Yes Yes	Yes	2	No	In progress	Yes Yes	No No	Yes Yes	Yes No	Yes No	In progress No	Yes No	Yes No	Yes Yes	Yes Yes	Yes Yes
Viet Nam	Yes	Yes	Yes	Yes Yes	Yes	2	Yes	Yes	Yes Yes	No Yes	Yes No	Yes Yes	Yes Yes	Yes No	Yes No	Yes No	Yes Yes	Yes No	Yes Yes
Yemen	No	No	No	Yes Yes	Yes	3	No	In progress	No Yes	No No	Yes Yes	Yes No	Yes No	No In progress	No No	No Yes	Yes No	Yes No	Yes Yes
Zambia	Yes	Yes	Yes	Yes Yes	Yes	4	Yes	Yes	Yes Yes	Yes Yes	Yes Yes	Yes Yes	Yes Yes	No No	No No	Yes Yes	Yes Yes	Yes Yes	Yes Yes
Zimbabwe	Yes	No	Yes	Yes Yes	Yes	4	Yes	Yes	Yes Yes	Yes Yes	Yes Yes	Yes Yes	Yes Yes	In progress In progress	In progress No	Yes Yes	Yes No	Yes No	Yes Yes

Yes/Agree No/Disagree Data not available In progress Not applicable Number SCALE: 0= low; 5 = High

PERCENTAGE OF DONATED BLOOD UNITS SCREENED FOR HIV IN A QUALITY-ASSURED MANNER

	2007[1]	2009
	Indicator Value	Indicator Value
Afghanistan	39	52
Albania		100
Algeria	100	100
Angola		26
Antigua and Barbuda	33	100
Argentina	100	100
Armenia	100	100
Australia	100	100
Austria	100 [2]	100
Azerbaijan		100
Bahamas	100	100
Bahrain	100 [2]	100
Bangladesh		100
Barbados	100	100
Belarus	100	100
Belgium	100	100
Belize	100	100
Benin	99	99
Bhutan	50 [2]	
Bolivia	88	69
Bosnia and Herzegovina	0	0
Botswana	100	100
Brazil		100
Brunei Darussalam		100 [3]
Bulgaria	100	100
Burkina Faso	66	75
Burundi	100	100
Côte d'Ivoire	100	100
Cambodia	97	100
Cameroon		100
Canada	100	100
Cape Verde	61	100
Central African Republic	76	84
Chad	100	100
China	100	100
Colombia	100	100
Comoros	100	62
Congo, Republic of the	100	100
Costa Rica	100	100
Croatia	86	100
Cuba	100	100
Cyprus	100	100
Czech Republic	100 [2]	100
Democratic Republic of the Congo	47	55
Denmark		100
Djibouti		100
Dominica	100	100
Dominican Republic	100	86
Ecuador	100	100
Egypt		100
El Salvador	100	100

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UNGASS Indicator 3

PERCENTAGE OF DONATED BLOOD UNITS SCREENED FOR HIV IN A QUALITY-ASSURED MANNER

	2007[1]	2009
	Indicator Value	Indicator Value
Equatorial Guinea		0
Eritrea	100	100
Estonia	100	100
Ethiopia	100	100
Fiji	100	100
Finland	100	100
Gabon	100	100
Georgia	0	0
Germany	100	100
Ghana	100	100
Greece		100
Grenada	91	100
Guatemala	100	75
Guinea	53	100
Guinea-Bissau	100	0
Guyana	100	100
Haiti	100	100
Honduras	46	48
Hungary	100	100
India	100	100
Indonesia		100
Iran, Islamic Republic of	100	100
Ireland	100	100
Israel	100	
Jamaica	100	100
Japan	100	100
Jordan	100	100
Kazakhstan	95	100
Kenya	100	100
Kuwait	100 [2]	100
Kyrgyzstan	88	52
Lao People's Democratic Republic	100	100
Latvia	100	100
Lebanon	100	100
Lesotho	100	100
Lithuania	100	100
Luxembourg	100 [2]	100
Madagascar	99	100
Malawi	99	100
Malaysia	100	100
Maldives	0 [2]	100
Mali	94	100
Malta	100 [2]	
Marshall Islands	100	97
Mauritania	100	100
Mauritius	100	100
Mexico	100	100
Micronesia, Federated States of		100
Moldova	74	100
Monaco		94
Mongolia	72	70
Montenegro	100	0

	2007[1]	2009
	Indicator Value	Indicator Value
Morocco	100	100
Mozambique	36	70
Myanmar		76
Namibia	100 [2]	100
Nauru		100
Nepal	100	39
Netherlands	100 [2]	100
New Zealand	100	100
Nicaragua	90	100
Niger	100	26
Nigeria	100	100
Norway	100 [2]	100
Oman		0
Pakistan	87	
Palau	100	100
Panama	100	100
Papua New Guinea	100	100
Paraguay	95	100
Peru	99	88
Philippines		96
Poland	100 [2]	
Portugal		100
Qatar		100
Republic of Korea	100 [2]	
Romania	100	100
Russian Federation		79
Rwanda	100	100
Saint Kitts and Nevis	100	100
Saint Lucia	100	100
Saint Vincent and the Grenadines	100	100
Samoa	100 [2]	
Sao Tome and Principe	0	100
Saudi Arabia		100
Senegal	78	86
Serbia	100	49
Seychelles	100	100
Sierra Leone	100	100
Singapore	100	100
Slovakia		100
Slovenia	100	100
Solomon Islands		79
Somalia		0
South Africa	100	100
Spain	100	100
Sri Lanka	42	100
Sudan		0
Suriname	100	100
Swaziland	100	100
Sweden	100	100
Switzerland	100	100
Syrian Arab Republic		0

	2007[1]	2009
	Indicator Value	Indicator Value
Tajikistan	97	100
Thailand	99	100
Timor-Leste	58 [2]	100
Togo	85	92
Tonga		100
Trinidad and Tobago	100	100
Tunisia	100	100
Turkey	100	100
Uganda	100	100
Ukraine	0	
United Arab Emirates		100
United Kingdom of Great Britain and Northern Ireland	100	100
United Republic of Tanzania	100	36
Uruguay	100	100
Uzbekistan		82
Vanuatu		91
Venezuela		100
Zambia	100	100
Zimbabwe	100	100

[1] Report date 2007, but data collection can vary from 2005-2007.
[2] Data provided by WHO Department of Blood Transfusion Safety.
[3] Data collection started before 2008.

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REPORTED NUMBER OF PEOPLE RECEIVING AND NEEDING ANTIRETROVIRAL THERAPY AND COVERAGE, 2008-2009. LOW- AND MIDDLE-INCOME COUNTRIES[a]

	REPORTED NUMBER OF PEOPLE RECEIVING ANTIRETRO-VIRAL THERAPY, 2008[b,c]	MONTH AND YEAR OF REPORT	REPORTED NUMBER OF PEOPLE RECEIVING ANTIRETRO-VIRAL THERAPY, 2009[b,c]	MONTH AND YEAR OF REPORT
Afghanistan	0	Dec 08	12	Dec 09
Albania	110	Dec 08	114	Dec 09
Algeria	1 111	Dec 08	1 526	Dec 09
Angola	14 139 [f]	Dec 08	20 640	Dec 09
Argentina	40 240 [f]	Dec 08	42 815	Dec 09
Armenia	100	Dec 08	179	Dec 09
Azerbaijan	159	Dec 08	238	Dec 09
Bangladesh	283	Dec 08	353	Dec 09
Belarus	1 249	Dec 08	1 776	Dec 09
Belize	630	Dec 08	855	Dec 09
Benin	12 078	Dec 08	15 401	Dec 09
Bhutan	30	Dec 08	…	
Bolivia (Plurinational State of)	758 [f]	Dec 08	1 115	Dec 09
Bosnia and Herzegovina	33	Dec 08	38	Dec 09
Botswana	117 045	Dec 08	145 190	Dec 09
Brazil	194 984 [f]	Dec 08	…	
Bulgaria	251	Dec 08	327	Dec 09
Burkina Faso	21 103	Dec 08	26 448	Dec 09
Burundi	14 343	Dec 08	17 661	Dec 09
Cambodia	31 999	Dec 08	37 315	Dec 09
Cameroon	59 960	Dec 08	76 228	Dec 09
Cape Verde	360	Dec 08	611	Dec 09
Central African Republic	10 551 [f]	Dec 08	14 474	Dec 09
Chad	17 900 [f]	Oct 08	32 288	Dec 09
Chile	10 904 [f]	Dec 08	12 762	Dec 09
China	48 254	Dec 08	65 481	Dec 09
Colombia	17 551 [f]	Dec 08	16 302	Dec 09
Comoros	8	Dec 08	12	Dec 09
Congo	9 400	Dec 08	7 998	Dec 09
Cook Islands	1	Dec 08	…	
Costa Rica	2 886 [f]	Dec 08	3 064	Dec 09
Côte d'Ivoire	51 820 [f]	Dec 08	72 011	Dec 09
Croatia	398	Dec 08	441	Dec 09
Cuba	3 999	Dec 08	5 034	Dec 09
Democratic People's Republic of Korea	0	Dec 06	…	
Democratic Republic of the Congo	24 645 [f]	Dec 08	34 967	Dec 09
Djibouti	816	Dec 08	913	Dec 09
Dominica	36 [f]	Dec 08	38	Dec 09
Dominican Republic	11 072 [f]	Dec 08	13 785	Dec 09
Ecuador	3 728	Dec 08	5 538	Dec 09
Egypt	291	Dec 08	359	Dec 09
El Salvador	7 104	Dec 08	8 348	Dec 09
Equatorial Guinea	839	Dec 08	1 645	Dec 09
Eritrea	4 299 [f]	Dec 08	4 955	Dec 09
Ethiopia	132 379	Dec 08	176 632	Dec 09
Fiji	39	Dec 08	52	Nov 09
Gabon	7 773	Dec 08	9 976	Dec 09
Gambia	770	Dec 08	921	Sep 09
Georgia	498	Dec 08	655	Dec 09
Ghana	21 548 [f]	Dec 08	30 265	Dec 09

UNGASS Indicator 4
MDG 6b indicator

ESTIMATED NUMBER OF PEOPLE NEEDING ANTIRETROVIRAL THERAPY BASED ON WHO 2010 GUIDELINES, 2009[b,d]			ESTIMATED ANTIRETROVIRAL THERAPY COVERAGE BASED ON WHO 2010 GUIDELINES, 2009[b]			ESTIMATED NUMBER OF PEOPLE NEEDING ANTIRETROVIRAL THERAPY BASED ON WHO 2006 GUIDELINES, 2009[b,d]			ESTIMATED ANTIRETROVIRAL THERAPY COVERAGE BASED ON WHO 2006 GUIDELINES, 2009[b,e]			ESTIMATED NUMBER OF PEOPLE NEEDING ANTIRETROVIRAL THERAPY BASED ON COUNTRY REPORT, 2009[d]
Estimate	Low estimate	High estimate	Estimate	Low estimate	High estimate	Estimate	Low estimate	High estimate	Estimate	Low estimate	High estimate	
…			…			…			…			…
…			…			…			…			…
6 000	4 500	8 000	25%	19%	34%	3 700	2 700	4 900	42%	31%	56%	…
86 000	65 000	110 000	24%	19%	32%	59 000	43 000	79 000	35%	26%	48%	84 250
61 000	42 000	74 000	70%	58%	>95%	50 000	37 000	58 000	86%	74%	>95%	…
<1 000	<1 000	<1 000	24%	20%	29%	<500	<500	<1 000	39%	32%	47%	352
1 100	<1 000	1 400	21%	16%	29%	<1 000	<500	<1 000	36%	26%	51%	418
1 500	<1 000	2 000	23%	17%	39%	<1 000	<500	1 200	40%	28%	71%	740
6 000	4 700	7 800	29%	23%	37%	3 700	3 000	4 500	48%	40%	59%	2 852
2 100	1 800	2 500	40%	34%	47%	1 500	1 200	1 800	57%	49%	69%	1 394
29 000	24 000	34 000	53%	45%	64%	21 000	17 000	26 000	72%	59%	88%	20 396
<500	<200	<500	14%	10%	29%	<200	<100	<200	26%	16%	53%	…
6 000	4 700	7 600	19%	15%	24%	3 900	3 100	5 000	28%	22%	36%	5 050
…			…			…			…			50
170 000	150 000	190 000	83%	77%	>95%	140 000	120 000	150 000	>95%	94%	>95%	161 706
…[g]	220 000	390 000	…	50%	89%	…[g]	190 000	300 000	…	65%	101%	…
1 400	1 100	1 800	23%	18%	30%	<1 000	<1 000	1 100	38%	29%	50%	…
58 000	46 000	71 000	46%	37%	58%	44 000	34 000	55 000	60%	48%	77%	56 241
91 000	79 000	100 000	19%	17%	22%	65 000	53 000	78 000	27%	23%	33%	57 438
40 000	28 000	55 000	94%	68%	>95%	33 000	24 000	44 000	>95%	86%	>95%	40 483
270 000	230 000	310 000	28%	25%	33%	190 000	150 000	220 000	41%	34%	51%	164 070
…			…			…			…			…
74 000	64 000	85 000	19%	17%	23%	51 000	41 000	61 000	28%	24%	35%	40 334
90 000	73 000	110 000	36%	30%	44%	61 000	47 000	79 000	53%	41%	68%	66 000
20 000	17 000	24 000	63%	53%	76%	16 000	12 000	19 000	81%	68%	>95%	15 520
…[h]	170 000	350 000	…	19%	38%	…[h]	97 000	210 000	…	31%	67%	190 000
95 000	79 000	120 000	17%	14%	21%	63 000	53 000	75 000	26%	22%	31%	22 924
<100	<100	<100	18%	13%	24%	<100	<100	<100	29%	21%	40%	12
35 000	30 000	41 000	23%	19%	27%	25 000	20 000	30 000	33%	26%	41%	…
…			…			…			…			…
4 500	3 100	6 100	68%	50%	>95%	3 500	2 500	4 800	86%	64%	>95%	…
260 000	220 000	300 000	28%	24%	32%	180 000	150 000	220 000	39%	33%	47%	164 000
<1 000	<500	<1 000	80%	62%	>95%	<500	<500	<1 000	>95%	75%	>95%	…
3 500	2 900	4 100	>95%	>95%	>95%	2 900	2 400	3 400	>95%	>95%	>95%	5 034
<1 000	<1 000	<1 000	0%			<500	<500	<1 000	0%			…
…[h]	170 000	240 000	…	14%	21%	…[h]	110 000	180 000	…	20%	32%	283 055
6 400	4 700	8 200	14%	11%	20%	4 300	3 100	5 700	21%	16%	29%	4 235
…			…			…			…			13
29 000	25 000	34 000	47%	41%	55%	22 000	18 000	25 000	64%	55%	77%	19 410
19 000	14 000	26 000	30%	21%	40%	16 000	10 000	22 000	36%	25%	54%	13 128
3 300	1 600	3 000	11%	12%	22%	1 900	1 600	3 000	19%	12%	22%	1 500
16 000	10 000	22 000	53%	38%	84%	13 000	8 100	16 000	66%	51%	>95%	…
6 600	4 700	8 800	25%	19%	35%	4 300	2 800	6 000	39%	27%	58%	3 108
14 000	10 000	18 000	37%	28%	49%	9 700	7 300	13 000	51%	39%	68%	7 182
…[h]	280 000	390 000	…	45%	62%	…[h]	200 000	310 000	…	58%	86%	336 160
<200	<200	<500	30%	23%	40%	<200	<100	<200	52%	38%	73%	…
21 000	16 000	26 000	47%	38%	61%	15 000	12 000	19 000	66%	53%	86%	14 258
5 000	3 100	7 300	18%	13%	30%	3 300	2 000	5 000	28%	18%	45%	1 500
1 000	<1 000	1 300	65%	51%	91%	<1 000	<500	<1 000	>95%	77%	>95%	686
130 000	110 000	150 000	24%	21%	28%	85 000	69 000	100 000	36%	29%	44%	70 988

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REPORTED NUMBER OF PEOPLE RECEIVING AND NEEDING ANTIRETROVIRAL THERAPY AND COVERAGE, 2008-2009. LOW- AND MIDDLE-INCOME COUNTRIES[a]

	REPORTED NUMBER OF PEOPLE RECEIVING ANTIRETRO-VIRAL THERAPY, 2008[b,c]	MONTH AND YEAR OF REPORT	REPORTED NUMBER OF PEOPLE RECEIVING ANTIRETRO-VIRAL THERAPY, 2009[b,c]	MONTH AND YEAR OF REPORT
Grenada	46 [f]	Dec 08	54	Dec 09
Guatemala	9 694	Dec 08	10 362	Dec 09
Guinea	9 212	Dec 08	14 999	Dec 09
Guinea-Bissau	1 832 [f]	Dec 08	2 764	Dec 09
Guyana	2 473	Dec 08	2 832	Dec 09
Haiti	19 990 [f]	Dec 08	26 007	Dec 09
Honduras	6 288	Dec 08	7 075	Dec 09
Hungary	559 [f]	Dec 08	547	Dec 09
India	234 581 [i]	Dec 08	320 074 [i]	Dec 09
Indonesia	10 606 [f]	Dec 08	15 442	Nov 09
Iran (Islamic Republic of)	878	Sep 08	1 486	Jan 10
Iraq	4	Dec 08	…	
Jamaica	4 444 [f]	Dec 08	7 244	Dec 09
Jordan	58	Dec 08	63	Dec 09
Kazakhstan	707	Dec 08	1 035	Jan 10
Kenya	250 576 [f]	Dec 08	336 980	Dec 09
Kiribati	6	Dec 08	…	
Kyrgyzstan	89	Dec 08	231	Jan 10
Lao People's Democratic Republic	1 009	Dec 08	1 345	Dec 09
Latvia	334	Dec 08	439	Dec 09
Lebanon	285 [f]	Dec 08	354	Dec 09
Lesotho	45 262	Dec 08	61 736	Dec 09
Liberia	2 017 [f]	Dec 08	2 970	Dec 09
Libyan Arab Jamahiriya	1 000	Dec 07	…	
Lithuania	127	Dec 08	145	Dec 09
Madagascar	162	Dec 08	214	Dec 09
Malawi	147 497 [f]	Dec 08	198 846	Dec 09
Malaysia	8 197	Dec 08	9 962	Mar 10
Maldives	2	Dec 08	3	Dec 09
Mali	16 475 [f]	Dec 08	21 100	Dec 09
Marshall Islands	4	Dec 08	4	Dec 09
Mauritania	1 072 [f]	Dec 08	1 401	Dec 09
Mauritius	491 [f]	Jan 08	652	Dec 09
Mexico	55 599 [f]	Dec 08	60 911	Dec 09
Micronesia (Federated States of)	2 [f]	Dec 08	5	Dec 09
Mongolia	5	Dec 08	9	Dec 09
Montenegro	25	Dec 08	31	Mar 10
Morocco	2 207	Dec 08	2 647	Dec 09
Mozambique	128 330	Dec 08	170 198	Dec 09
Myanmar	15 191	Dec 08	21 138	Dec 09
Namibia	59 376	Dec 08	70 498	Sep 09
Nauru	0	Dec 08	…	
Nepal	1 992 [f]	Jul 08	3 226	Jul 09
Nicaragua	744 [f]	Dec 08	1 063	Dec 09
Niger	2 846	Dec 08	6 445	Dec 09
Nigeria	238 659	Dec 08	302 973	Dec 09
Niue	0	Dec 08	…	
Oman	412	Dec 08	486	Dec 09
Pakistan	875 [f]	Dec 08	1 320	Dec 09
Palau	3	Dec 08	3	Dec 09

ESTIMATED NUMBER OF PEOPLE NEEDING ANTIRETROVIRAL THERAPY BASED ON WHO 2010 GUIDELINES, 2009[b,d]			ESTIMATED ANTIRETROVIRAL THERAPY COVERAGE BASED ON WHO 2010 GUIDELINES, 2009[b]			ESTIMATED NUMBER OF PEOPLE NEEDING ANTIRETROVIRAL THERAPY BASED ON WHO 2006 GUIDELINES, 2009[b,d]			ESTIMATED ANTIRETROVIRAL THERAPY COVERAGE BASED ON WHO 2006 GUIDELINES, 2009[b,e]			ESTIMATED NUMBER OF PEOPLE NEEDING ANTIRETROVIRAL THERAPY BASED ON COUNTRY REPORT, 2009[d]
Estimate	Low estimate	High estimate	Estimate	Low estimate	High estimate	Estimate	Low estimate	High estimate	Estimate	Low estimate	High estimate	
…			…			…			…			59
24 000	18 000	31 000	44%	33%	59%	16 000	12 000	21 000	63%	48%	84%	14 966
38 000	30 000	46 000	40%	32%	50%	27 000	20 000	35 000	56%	43%	74%	22 500
9 100	7 300	11 000	30%	25%	38%	6 000	4 700	7 600	46%	36%	59%	5 885
2 900	1 700	4 200	>95%	68%	>95%	2 700	1 700	3 700	>95%	76%	>95%	3 390
60 000	49 000	71 000	43%	37%	53%	43 000	34 000	52 000	61%	50%	76%	38 491
21 000	16 000	27 000	33%	26%	44%	15 000	12 000	18 000	47%	38%	61%	13 356
2 100	1 600	2 600	27%	21%	34%	1 600	1 200	2 000	35%	28%	44%	…
1 200 000	1 100 000	1 400 000	26%	23%	28%	790 000	700 000	890 000	41%	36%	46%	580 000
73 000	50 000	110 000	21%	14%	31%	45 000	26 000	64 000	34%	24%	58%	40 200
40 000	33 000	48 000	4%	3%	4%	23 000	18 000	29 000	6%	5%	8%	16 540
…			…			…			…			…
16 000	12 000	20 000	46%	36%	62%	11 000	8 500	13 000	67%	55%	85%	14 000
…			…			…			…			…
3 800	2 600	5 400	27%	19%	40%	2 300	1 600	3 300	45%	31%	66%	1 900
710 000	610 000	800 000	48%	42%	55%	520 000	430 000	610 000	65%	55%	79%	555 000
…			…			…			…			…
1 900	<1 000	2 700	12%	9%	24%	1 000	<1 000	1 600	22%	15%	46%	450
2 000	1 200	2 800	67%	48%	>95%	1 300	<1 000	1 900	>95%	71%	>95%	1 461
3 600	2 700	4 600	12%	9%	16%	2 100	1 600	2 800	21%	16%	28%	…
1 900	1 500	2 500	18%	14%	24%	1 200	<1 000	1 600	29%	22%	37%	1 171
130 000	110 000	140 000	48%	43%	54%	90 000	75 000	110 000	68%	58%	83%	122 818
22 000	17 000	27 000	14%	11%	17%	15 000	11 000	19 000	20%	15%	27%	10 023
…			…			…			…			…
<1 000	<500	<1 000	27%	21%	34%	<500	<500	<500	42%	32%	52%	274
10 000	8 300	12 000	2%	2%	3%	6 000	4 900	7 600	4%	3%	4%	5 000
440 000	370 000	500 000	46%	40%	53%	310 000	260 000	370 000	63%	53%	77%	305 805
43 000	34 000	55 000	23%	18%	29%	26 000	22 000	31 000	38%	32%	44%	20 977
<100	<100	<100	17%	14%	23%	<100	<100	<100	28%	22%	36%	71
42 000	34 000	51 000	50%	41%	61%	32 000	26 000	40 000	65%	53%	81%	31 410
…			…			…			…			8
5 700	4 700	6 900	25%	20%	30%	3 500	2 800	4 300	41%	33%	51%	2 790
2 900	2 200	3 800	22%	17%	30%	1 700	1 300	2 300	38%	28%	51%	1 587
110 000	89 000	130 000	54%	46%	68%	86 000	69 000	98 000	71%	62%	88%	74 000
…			…			…			…			5
<200	<100	<200	8%	6%	15%	<100	<100	<100	15%	10%	31%	53
…			…			…			…			388
9 800	7 500	13 000	27%	21%	35%	6 300	4 900	8 100	42%	33%	54%	5 266
570 000	500 000	650 000	30%	26%	34%	380 000	310 000	470 000	45%	36%	55%	445 672
120 000	98 000	140 000	18%	15%	22%	75 000	60 000	89 000	28%	24%	35%	74 058
93 000	77 000	110 000	76%	62%	92%	70 000	56 000	86 000	>95%	82%	>95%	76 727
…			…			…			…			…
31 000	26 000	36 000	11%	9%	13%	19 000	16 000	23 000	17%	14%	21%	16 950
2 600	2 100	3 300	40%	32%	51%	1 700	1 400	2 200	62%	49%	79%	1 580
29 000	26 000	31 000	22%	21%	25%	19 000	15 000	23 000	33%	28%	42%	16 738
1 400 000	1 200 000	1 700 000	21%	18%	25%	990 000	790 000	1 200 000	31%	25%	38%	882 139
…			…			…			…			…
<500	<500	<1 000	>95%	83%	>95%	<500	<200	<500	>95%	>95%	>95%	513
36 000	27 000	48 000	4%	3%	5%	21 000	16 000	27 000	6%	5%	8%	13 422
…			…			…			…			…

A2

REPORTED NUMBER OF PEOPLE RECEIVING AND NEEDING ANTIRETROVIRAL THERAPY AND COVERAGE, 2008-2009. LOW- AND MIDDLE-INCOME COUNTRIES[a]

	REPORTED NUMBER OF PEOPLE RECEIVING ANTIRETRO-VIRAL THERAPY, 2008[b,c]	MONTH AND YEAR OF REPORT	REPORTED NUMBER OF PEOPLE RECEIVING ANTIRETRO-VIRAL THERAPY, 2009[b,c]	MONTH AND YEAR OF REPORT
Panama	3 972 [f]	Dec 08	4 463	Dec 09
Papua New Guinea	5 195	Dec 08	6 751	Dec 09
Paraguay	1 613	Dec 08	2 073	Dec 09
Peru	10 232 [f]	Dec 08	14 780	Dec 09
Philippines	532	Dec 08	750	Dec 09
Poland	3 822	Dec 08	4 329	Dec 09
Republic of Moldova	682	Dec 08	984	Dec 09
Romania	7 434	Dec 08	7 244	Dec 09
Russian Federation	54 900	Dec 08	75 900	Dec 09
Rwanda	63 149	Dec 08	76 726	Dec 09
Saint Kitts and Nevis	…		…	
Saint Lucia	85 [f]	Dec 08	124	Dec 09
Saint Vincent and the Grenadines	120 [f]	Dec 08	162	Dec 09
Samoa	8	Dec 08	…	
Sao Tome and Principe	109	Dec 08	169	Dec 09
Senegal	9 252 [f]	Dec 08	12 249	Dec 09
Serbia	842	Dec 08	790	Dec 09
Seychelles	113	Dec 08	139	Dec 09
Sierra Leone	1 950 [f]	Feb 09	3 660	Dec 09
Slovakia	97	Dec 08	…	
Solomon Islands	3 [f]	Dec 08	4	Dec 09
Somalia	413	Dec 08	578	Dec 09
South Africa	730 183	Dec 08	971 556 [j]	Oct 09
Sri Lanka	142 [f]	Dec 08	207	Dec 09
Sudan	1 151 [k]	Dec 08	3 825 [k]	Dec 09
Suriname	858 [f]	Dec 08	996	Jul 09
Swaziland	32 701	Dec 08	47 241	Dec 09
Syrian Arab Republic	73 [f]	Dec 08	99	Dec 09
Tajikistan	138 [f]	Dec 08	322	Dec 09
Thailand	185 086 [f]	Sep 08	216 118	Sep 09
The former Yugoslav Republic of Macedonia	23	Dec 08	24	Dec 09
Timor-Leste	29	Dec 08	31	Dec 09
Togo	11 211	Dec 08	16 710	Dec 09
Tonga	2	Dec 08	…	
Tunisia	326 [f]	Dec 08	412	Dec 09
Turkey	900	Dec 08	1 000	Dec 09
Turkmenistan	0	Dec 08	…	
Tuvalu	1	Dec 08	1	Dec 09
Uganda	153 718	Sep 08	200 413	Sep 09
Ukraine	10 629 [f]	Dec 08	15 871	Dec 09
United Republic of Tanzania	154 468	Dec 08	199 413	Dec 09
Uruguay	…		2 510	Dec 09
Uzbekistan	1 200	Dec 08	1 753	Dec 09
Vanuatu	2	Dec 08	2	Dec 09
Venezuela (Bolivarian Republic of)	27 240 [f]	Dec 08	32 302	Dec 09
Viet Nam	25 597	Dec 08	37 995	Dec 09
Yemen	189	Dec 08	274	Dec 09
Zambia	219 576 [f]	Dec 08	283 863	Dec 09
Zimbabwe	148 144 [f]	Dec 08	218 589	Feb 10

ESTIMATED NUMBER OF PEOPLE NEEDING ANTIRETROVIRAL THERAPY BASED ON WHO 2010 GUIDELINES, 2009[b,d]			ESTIMATED ANTIRETROVIRAL THERAPY COVERAGE BASED ON WHO 2010 GUIDELINES, 2009[b]			ESTIMATED NUMBER OF PEOPLE NEEDING ANTIRETROVIRAL THERAPY BASED ON WHO 2006 GUIDELINES, 2009[b,d]			ESTIMATED ANTIRETROVIRAL THERAPY COVERAGE BASED ON WHO 2006 GUIDELINES, 2009[b,e]			ESTIMATED NUMBER OF PEOPLE NEEDING ANTIRETROVIRAL THERAPY BASED ON COUNTRY REPORT, 2009[d]
Estimate	Low estimate	High estimate	Estimate	Low estimate	High estimate	Estimate	Low estimate	High estimate	Estimate	Low estimate	High estimate	
12 000	8 200	22 000	37%	21%	54%	8 400	6 100	14 000	53%	32%	73%	20 836
13 000	10 000	16 000	52%	42%	65%	8 800	6 500	11 000	77%	59%	>95%	9 061
5 600	4 200	7 400	37%	28%	49%	3 600	2 900	4 500	57%	46%	70%	3 066
40 000	33 000	48 000	37%	31%	44%	26 000	22 000	31 000	57%	47%	67%	20 201
2 000	1 000	2 800	37%	27%	75%	1 300	<1 000	1 800	60%	42%	>95%	919
20 000	14 000	27 000	22%	16%	31%	17 000	12 000	22 000	26%	19%	35%	5 000
5 800	4 800	7 200	17%	14%	20%	3 500	2 900	4 400	28%	22%	34%	2 780
9 000	5 300	13 000	81%	55%	>95%	7 700	4 700	10 000	95%	71%	>95%	7 244
…[h]	320 000	460 000	…	16%	24%	…[h]	180 000	280 000	…	27%	42%	79 116
88 000	71 000	100 000	88%	74%	>95%	72 000	55 000	88 000	>95%	87%	>95%	104 900
…			…			…			…			…
…			…			…			…			134
…			…			…			…			182
…			…			…			…			…
…			…			…			…			1 096
24 000	20 000	28 000	51%	43%	62%	17 000	13 000	21 000	72%	58%	92%	16 198
2 100	1 600	2 700	38%	30%	51%	1 400	1 100	1 800	55%	44%	75%	950
…			…			…			…			146
20 000	16 000	24 000	18%	15%	23%	13 000	9 400	16 000	29%	22%	39%	7 277
<200	<200	<500	62%	46%	86%	<200	<100	<200	78%	56%	>95%	…
…			…			…			…			4
10 000	7 300	13 000	6%	4%	8%	6 300	4 200	8 700	9%	7%	14%	5 213
2 600 000	2 500 000	2 800 000	37%	35%	39%	1 700 000	1 500 000	2 000 000	56%	48%	65%	1 630 000
1 100	<1 000	1 400	20%	15%	26%	<1 000	<500	<1 000	33%	24%	45%	510
74 000	60 000	90 000	5%	4%	6%	46 000	34 000	61 000	8%	6%	11%	45 466
1 900	1 400	2 600	53%	39%	72%	1 300	1 000	1 700	76%	57%	>95%	…
80 000	71 000	88 000	59%	53%	66%	56 000	47 000	65 000	85%	72%	>95%	52 965
…			…			…			…			…
3 000	2 300	3 900	11%	8%	14%	1 700	1 300	2 300	19%	14%	25%	579
350 000	280 000	440 000	61%	50%	78%	290 000	230 000	350 000	76%	62%	95%	285 271
…			…			…			…			442
…			…			…			…			151
58 000	44 000	73 000	29%	23%	38%	40 000	29 000	51 000	42%	33%	57%	33 030
…			…			…			…			…
<1 000	<1 000	1 000	53%	41%	72%	<1 000	<500	<1 000	79%	60%	>95%	470
1 600	1 200	2 100	62%	48%	84%	1 100	<1 000	1 500	90%	67%	>95%	1 400
…			…			…			…			…
…			…			…			…			1
520 000	430 000	600 000	39%	33%	46%	380 000	300 000	450 000	53%	44%	67%	373 383
160 000	140 000	190 000	10%	9%	11%	99 000	85 000	110 000	16%	14%	19%	33 016
660 000	580 000	750 000	30%	27%	34%	450 000	380 000	550 000	44%	36%	53%	361 295
5 100	4 300	6 100	49%	41%	59%	3 700	3 100	4 400	67%	57%	81%	3 018
…[g]			…			…[g]			…			2 850
…			…			…			…			2
…[g]			…			…[g]			…			161 510
110 000	84 000	150 000	34%	26%	45%	85 000	67 000	110 000	45%	35%	56%	67 047
…			…			…			…			3 150
440 000	380 000	510 000	64%	56%	75%	330 000	270 000	390 000	85%	72%	>95%	416 533
640 000	580 000	720 000	34%	30%	38%	450 000	390 000	520 000	49%	42%	57%	389 895

A2

REPORTED NUMBER OF PEOPLE RECEIVING AND NEEDING ANTIRETROVIRAL THERAPY AND COVERAGE, 2008-2009. HIGH INCOME COUNTRIES[a]

	REPORTED NUMBER OF PEOPLE RECEIVING ANTIRETRO-VIRAL THERAPY, 2005-2008	MONTH AND YEAR OF REPORT	REPORTED NUMBER OF PEOPLE RECEIVING ANTIRETRO-VIRAL THERAPY, 2009	MONTH AND YEAR OF REPORT
Andorra	25	Dec 07	…	
Antigua and Barbuda	148	Sep 07	98	Dec 09
Australia	9 933	Dec 07	…	
Austria	2 250	Dec 08	1 800	Sep 09
Bahamas	1 244	Sep 07	1 506	Dec 09
Bahrain	…		…	
Barbados	719	Dec 08	804	Dec 09
Belgium	6 928	Dec 07	…	
Brunei Darussalam	10	Dec 08	15	Jan 10
Canada	27 000	Dec 08	…	
Cyprus	151	Dec 07	187	Dec 09
Czech Republic	570	Jun 07	706	Oct 09
Denmark	3 000	Dec 08	3 000	Oct 09
Estonia	772	Dec 07	1 263	Dec 09
Finland	450	Aug 06	…	
France	79 680	Dec 08	…	
Germany	36 500	Dec 08	37 000	Jun 09
Greece	3 746	Dec 07	…	
Iceland	100 [l]	<05	…	
Ireland	1 600	Dec 05	…	
Israel	2 876	Dec 08	…	
Italy	95 000	Dec 08	…	
Japan	48	Dec 06	94	Mar 09
Kuwait	…		131	Dec 09
Luxembourg	344	Dec 08	434	Dec 09
Malta	65	Jun 07	100	Dec 09
Monaco	45	Dec 05	…	
Netherlands	7 919	Apr 07	…	
New Zealand	…		1 204	Jun 09
Norway	900	Dec 05	…	
Portugal	12 366	Dec 08	18 107	Dec 09
Qatar	…		70	Jan 09
Republic of Korea	…		…	
San Marino	…		…	
Saudi Arabia	865	Dec 08	…	
Singapore	…		…	
Slovenia	157	Jul 07	…	
Spain	82 710	Dec 08	79 500	Dec 09
Sweden	2 800	Dec 06	4 185	Dec 09
Switzerland	…		…	
Trinidad and Tobago	3 172	Dec 08	2 639	Dec 09
United Arab Emirates	59	Sep 07	…	
United Kingdom	39 556	Dec 07	39 704	Dec 09
United States of America	268 000 [l]	<05	…	

… Data not available or not applicable.

[a] Countries classified by World Bank income status.

[b] Antiretroviral therapy data by age and available.

[c] Private sector data have been included in the total number of people on treatment, when available, but only South Africa and India have specified how many of the total number number of people on treatment received it through private facilities.

[d] The needs estimates are based on the methods described in the explanatory notes.

[e] The coverage estimates are based on the estimated unrounded numbers of people receiving antiretroviral therapy and the estimated unrounded need for antiretroviral therapy (based on UNAIDS/WHO methodology). The ranges in coverage estimates are based on plausibility bounds in the denominator: that is, low and high estimates of need.

[f] Updated 2008 value. See last year's annex (http://www.who.int/entity/hiv/data/tuapr2009_annex1.xls).

[g] Estimates of the number of people needing antitretroviral therapy are currently being reviewed and will be adjusted, as appropriate, based on ongoing data collection and analysis.

[h] At the request of the country, only ranges in the estimates are being presented.

[i] By December 2009, the government reported that 285 074 people were receiving antiretroviral therapy through the public sector sites. A further estimated 35 000 people were treated in the unorganized private sector – the same figure as in 2008. Overall, an estimated 320 074 people were receiving antiretroviral therapy by the end of 2009, including those enrolled through private facilities.

[j] The number collected from public sector health facilities only is 919 923 and was provided by the Department of Health based on routine monitoring data. The majority of these facilities report people currently on treatment. The main AIDS Disease Management organisation, Aid for AIDS, reported that they had 51 633 patients on treatment in 2009, and the government estimated that this represents the majority of people on treatment in the private sector.

[k] Two separate reports were received for 2009 from Sudan: northern Sudan, 1996; southern Sudan, 1829. The figure of 1151 for 2008 applies to northern Sudan only.

[l] '<05' indicates that data exist but no update has been received since December 2004. These data should be interpreted cautiously, as they may reflect the situation in early 2004 or even 2003.

PEOPLE RECEIVING ANTIRETROVIRAL THERAPY IN LOW- AND MIDDLE-INCOME COUNTRIES, AND ESTIMATED CHILDREN RECEIVING AND NEEDING ANTIRETROVIRAL THERAPY, AND COVERAGE, 2009. LOW- AND MIDDLE-INCOME COUNTRIES[a]

REPORTED NUMBER OF MALES AND FEMALES RECEIVING ANTIRETROVIRAL THERAPY

	Month and year of report	Males	% of total	Females	% of total
Afghanistan		…		…	
Albania		…		…	
Algeria	Dec 09 [d]	762	51%	739	49%
Angola	Dec 08 [d]	2 444	31%	5 440	69%
Argentina	Dec 08 [d]	26 791	64%	15 250	36%
Armenia	Dec 09	114	64%	65	36%
Azerbaijan	Dec 09	178	75%	60	25%
Bangladesh		…		…	
Belarus	Dec 09	1 032	58%	744	42%
Belize	Dec 09	444	52%	411	48%
Benin	Dec 09	6 468	42%	8 933	58%
Bhutan	Dec 08	14	47%	16	53%
Bolivia (Plurinational State of)	Dec 09	721	65%	394	35%
Bosnia and Herzegovina	Dec 09 [d]	26	70%	11	30%
Botswana	Dec 09	56 566	39%	88 624	61%
Brazil	Dec 08 [d]	106 769	57%	79 867	43%
Bulgaria	Dec 09	223	68%	104	32%
Burkina Faso	Dec 09	8 609	33%	17 839	67%
Burundi	Dec 09	5 869	33%	11 792	67%
Cambodia	Dec 09	17 873	48%	19 442	52%
Cameroon	Dec 09	25 196	33%	51 032	67%
Cape Verde	Dec 09	272	45%	339	55%
Central African Republic	Dec 08 [e]	4 321	45%	5 229	55%
Chad	Dec 09	11 888	37%	20 400	63%
Chile	Dec 09	10 376	81%	2 386	19%
China	Dec 09 [d]	38 350	59%	26 659	41%
Colombia	Dec 09	12 254	75%	4 043	25%
Comoros	Dec 09	6	50%	6	50%
Congo	Dec 08 [d,e]	3 565	40%	5 347	60%
Cook Islands		…		…	
Costa Rica		…		…	
Côte d'Ivoire	Dec 09	21 603	30%	50 408	70%
Croatia	Dec 09	366	83%	75	17%
Cuba	Dec 09	4 027	80%	1 007	20%
Democratic People's Republic of Korea		…		…	
Democratic Republic of the Congo		…		…	
Djibouti	Dec 09	451	49%	462	51%
Dominica	Dec 09 [d]	10	91%	1	9%
Dominican Republic		…		…	
Ecuador		…		…	
Egypt		…		…	
El Salvador	Dec 08 [e]	4 262	60%	2 842	40%
Equatorial Guinea	Dec 08 [e]	235	28%	604	72%
Eritrea	Dec 09	2 153	43%	2 802	57%
Ethiopia	Dec 09 [d]	90 527	45%	111 693	55%
Fiji	Nov 09	25	48%	27	52%
Gabon	Dec 09	3 492	35%	6 484	65%
Gambia		…		…	
Georgia	Dec 09	468	71%	187	29%
Ghana	Dec 09 [d]	10 477	33%	20 954	67%

UNGASS Indicator 4
MDG 6b indicator

REPORTED NUMBER OF ADULTS AND CHILDREN RECEIVING ANTIRETROVIRAL THERAPY					ESTIMATED NUMBER OF CHILDREN NEEDING ANTIRETROVIRAL THERAPY BASED ON UNAIDS/WHO METHODS, 2009[b]			ESTIMATED ANTIRETROVIRAL THERAPY COVERAGE AMONG CHILDREN, DECEMBER 2009[c]		
Month and year of report	Adults (15+)	% of total	Children (<15)	% of total	Estimate	Low estimate	High estimate	Estimate	Low estimate	High estimate
Dec 09	12	100%	0	0%	…			…		
Dec 09	99	87%	15	13%	…			…		
Dec 09	1 429	94%	97	6%	…	<100	<500	…	36%	>95%
Dec 09	19 092	93%	1 548	8%	12 000	6 300	18 000	13%	8%	25%
Dec 08 [e]	40 041	95%	2 000	5%	…	<500	<1 000	…	>95%	>95%
Dec 09	172	96%	7	4%	…	<100	<100	…	54%	>95%
Dec 09	235	99%	3	1%	…	<100	<200	…	3%	9%
Dec 08 [e]	277	98%	6	2%	…	<100	<200	…	6%	16%
Dec 09	1 681	95%	95	5%	…	<100	<200	…	77%	>95%
Dec 09	775	91%	80	9%	…	<200	<500	…	28%	66%
Dec 09	14 266	93%	1 135	7%	2 700	1 500	4 100	41%	28%	77%
Dec 08	29	97%	1	3%	…	<100	<100	…	8%	33%
Dec 09	1 065	96%	50	4%	…	<200	<1 000	…	8%	28%
Dec 09	37	97%	1	3%	…			…		
Jan 09	136 700	94%	8 490	6%	9 400	8 200	11 000	90%	76%	>95%
Dec 08 [d]	178 697	96%	7 939	4%	… [f]	8 200	12 000	…	65%	>95%
Dec 09	324	99%	3	1%	…	<100	<100	…	10%	33%
Dec 09	25 094	95%	1 354	5%	8 000	3 900	12 000	17%	11%	35%
Dec 09	16 065	91%	1 596	9%	14 000	8 500	20 000	11%	8%	19%
Dec 09	33 677	90%	3 638	10%	…	2 800	6 100	…	60%	>95%
Dec 09 [e]	73 114	96%	3 114	4%	28 000	15 000	41 000	11%	8%	20%
Dec 09	574	94%	37	6%	…			…		
Dec 09	13 750	95%	724	5%	7 600	3 600	11 000	9%	6%	20%
Dec 09 [d]	31 514	98%	774	2%	12 000	6 600	19 000	6%	4%	12%
Dec 08 [e]	10 865	98%	186	2%	…	<500	<1 000	…	21%	59%
Dec 09	63 887	98%	1 594	2%	…	2 100	7 600	…	21%	74%
	…		…		…	1 000	3 400	…	<1%	<1%
Jan 09	11	92%	1	8%	…	<100	<100	…	14%	50%
Dec 08 [e]	8 912	95%	488	5%	4 000	2 000	5 900	12%	8%	24%
Dec 08	1	100%	0	0%	…			…		
Dec 09	3 003	98%	61	2%	…	<100	<200	…	33%	>95%
Dec 09	67 662	94%	4 349	6%	29 000	14 000	42 000	15%	10%	30%
Dec 09	438	99%	3	1%	…	<100	<100	…	30%	>95%
Dec 09	5 014	100%	20	0%	…	<100	<100	…	22%	59%
	…		…		…	<100	<100	…		
Dec 08 [e]	20 470	83%	4 053	17%	… [g]	17 000	46 000	…	9%	23%
Dec 09	889	97%	24	3%	<1 000	<500	<1 000	4%	2%	8%
Dec 09	37	97%	1	3%	…			…		
Dec 08 [e]	10 266	93%	782	7%	…	<1 000	2 900	…	27%	84%
Dec 09	5 131	93%	407	7%	…	<500	1 000	…	39%	>95%
Dec 09	332	92%	27	8%	…	<100	<500	…	12%	36%
Dec 09	8 048	96%	300	4%	…	1 100	1 500	…	20%	28%
Dec 09	1 618	98%	27	2%	<1 000	<500	1 500	3%	2%	7%
Dec 09	4 631	93%	324	7%	1 500	<1 000	2 400	21%	14%	45%
Dec 09	166 640	94%	9 992	6%	… [g]	27 000	74 000	…	14%	38%
Nov 09	51	98%	1	2%	…	<100	<100	…	20%	>95%
Dec 09	9 701	97%	275	3%	1 600	<1 000	2 500	17%	11%	34%
Dec 08 [e]	461	60%	309	40%	…	<500	1 300	…	25%	88%
Dec 09	627	96%	28	4%	…	<100	<100	…	62%	>95%
Dec 09	28 648	95%	1 617	5%	13 000	6 700	20 000	12%	8%	24%

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PEOPLE RECEIVING ANTIRETROVIRAL THERAPY IN LOW- AND MIDDLE-INCOME COUNTRIES, AND ESTIMATED CHILDREN RECEIVING AND NEEDING ANTIRETROVIRAL THERAPY, AND COVERAGE, 2009. LOW- AND MIDDLE-INCOME COUNTRIES[a]

REPORTED NUMBER OF MALES AND FEMALES RECEIVING ANTIRETROVIRAL THERAPY

	Month and year of report	Males	% of total	Females	% of total
Grenada	Dec 09	27	53%	24	47%
Guatemala	Dec 09	5 904	57%	4 458	43%
Guinea	Dec 09	5 850	39%	9 149	61%
Guinea-Bissau	Dec 09	840	30%	1 924	70%
Guyana	Dec 08 [e]	1 113	45%	1 360	55%
Haiti	Dec 09	10 871	42%	15 136	58%
Honduras	Dec 09	3 323	47%	3 752	53%
Hungary	Dec 08 [d,e]	467	84%	86	16%
India	Dec 09 [d]	168 598	59%	115 036	41%
Indonesia	Dec 08 [e]	7 934	75%	2 682	25%
Iran (Islamic Republic of)	Jan 10	1 198	81%	288	19%
Iraq	Dec 08	4	100%	0	0%
Jamaica		…		…	
Jordan	Dec 08 [e]	44	76%	14	24%
Kazakhstan	Jan 10	691	67%	344	33%
Kenya	Sep 09 [d,e]	107 401	36%	190 429	64%
Kiribati		…		…	
Kyrgyzstan	Jan 10	158	68%	73	32%
Lao People's Democratic Republic	Dec 09	722	54%	623	46%
Latvia	Dec 08 [e]	240	72%	94	28%
Lebanon		…		…	
Lesotho	Dec 09	22 471	36%	39 265	64%
Liberia	Dec 09	1 079		1 891	
Libyan Arab Jamahiriya		…		…	
Lithuania	Dec 09	113	78%	32	22%
Madagascar	Dec 09	106		108	
Malawi		…		…	
Malaysia		…		…	
Maldives	Dec 09	3	100%	0	0%
Mali	Dec 09	7 596	36%	13 504	64%
Marshall Islands	Dec 09	1	25%	3	75%
Mauritania	Dec 09	723	52%	678	48%
Mauritius		…		…	
Mexico	Dec 09	47 384	78%	13 527	22%
Micronesia (Federated States of)	Dec 09	2	40%	3	60%
Mongolia	Dec 09	1	11%	8	89%
Montenegro	Mar 10	26	84%	5	16%
Morocco	Dec 09	1 372	52%	1 275	48%
Mozambique	Sep 09 [d,e]	43 159	37%	72 854	63%
Myanmar	Dec 09	11 987	57%	9 151	43%
Namibia	Sep 09 [d]	26 212	37%	44 365	63%
Nauru	Dec 08	0		0	
Nepal	Jul 09	1 928	60%	1 298	40%
Nicaragua	Dec 09	679	64%	384	36%
Niger	Dec 09	2 836	44%	3 609	56%
Nigeria	Dec 09	105 122	35%	197 851	65%
Niue	Dec 08	0		0	
Oman	Dec 08 [e]	262	64%	150	36%
Pakistan	Dec 09	944	72%	376	28%
Palau	Dec 09	1	33%	2	67%
Panama		…		…	

REPORTED NUMBER OF ADULTS AND CHILDREN RECEIVING ANTIRETROVIRAL THERAPY					ESTIMATED NUMBER OF CHILDREN NEEDING ANTIRETROVIRAL THERAPY BASED ON UNAIDS/WHO METHODS, 2009[b]			ESTIMATED ANTIRETROVIRAL THERAPY COVERAGE AMONG CHILDREN, DECEMBER 2009[c]		
Month and year of report	Adults (15+)	% of total	Children (<15)	% of total	Estimate	Low estimate	High estimate	Estimate	Low estimate	High estimate
Dec 09	51	94%	3	6%	…			…		
Dec 09	9 594	93%	768	7%	…	<1 000	2 500	…	31%	77%
Dec 09	14 325	96%	674	4%	4 400	2 100	6 900	15%	10%	32%
Dec 09	2 646	96%	118	4%	1 100	<1 000	1 700	10%	7%	21%
Dec 08 [e]	2 308	93%	165	7%	…	<200	<500	…	73%	92%
Dec 09	24 909	96%	1 098	4%	5 700	2 700	8 600	19%	13%	41%
Dec 09	6 356	90%	719	10%	…	<1 000	1 800	…	40%	81%
Dec 08 [e]	553	99%	6	1%	…	<100	<100	…	29%	>95%
Dec 09 [e]	302 122	94%	17 952	6%	…	30 000	76 000	…	24%	59%
Dec 08 [e]	10 260	97%	356	3%	…	<1 000	2 600	…	14%	48%
Jan 10	1 432	96%	54	4%	…	<500	1 300	…	4%	14%
Dec 08	4	100%	0	0%	…			…		
Dec 09	6 808	94%	436	6%	…	<500	<1 000	…	52%	>95%
Dec 08 [e]	56	97%	2	3%	…			…		
Jan 10	844	82%	191	18%	…	<100	<200	…	>95%	>95%
Dec 09	308 610	92%	28 370	8%	89 000	48 000	130 000	32%	22%	59%
Dec 08	6	100%	0	0%	…			…		
Jan 10	130	56%	101	44%	…	<100	<100	…	>95%	>95%
Dec 09	1 250	93%	95	7%	…	<100	<500	…	36%	>95%
Dec 09	413	94%	26	6%	…	<100	<100	…	34%	>95%
Dec 07 [d,e]	…		9		…	<100	<200	…	9%	28%
Dec 08 [e]	42 224	93%	3 038	7%	13 000	7 800	18 000	23%	17%	39%
Dec 09 [e]	2 704	91%	266	9%	2 900	1 400	4 500	9%	6%	19%
	…		…		…			…		
Dec 09	143	99%	2	1%	…	<100	<100	…	20%	67%
Dec 09	209	98%	5	2%	…	<500	<1 000	…	1%	2%
Dec 09	181 482	91%	17 364	9%	61 000	34 000	84 000	29%	21%	51%
Dec 08 [e]	7 696	94%	501	6%	…	<1 000	<1 000	…	88%	94%
Dec 09	3	100%	0	0%	…	<100	<100	…	0%	0%
Dec 09	19 834	94%	1 266	6%	…	2 300	7 200	…	18%	55%
Dec 09	4	100%	0	0%	…			…		
Dec 09	1 359	97%	42	3%	…	<200	<500	…	9%	28%
	…		…		…	<100	<100	…		
Dec 09	59 317	97%	1 594	3%	…	1 300	3 200	…	50%	>95%
Dec 09	5	100%	0	0%	…			…		
Dec 09	9	100%	0	0%	…	<100	<100	…	0%	0%
Mar 10	30	97%	1	3%	…			…		
Dec 09	2 502	95%	145	5%	…	<200	<500	…	29%	>95%
Dec 09	160 805	94%	9 393	6%	66 000	36 000	93 000	14%	10%	26%
Dec 09	19 603	93%	1 535	7%	…	1 900	4 900	…	32%	83%
Sep 09	62 310	88%	8 188	12%	9 200	7 300	13 000	89%	65%	>95%
Dec 08	0		0		…			…		
Jul 09	3 048	94%	178	6%	…	<1 000	2 600	…	7%	23%
Dec 09	1 007	95%	56	5%	…	<100	<200	…	34%	79%
Dec 09	6 187	96%	258	4%	…	1 800	5 900	…	4%	15%
Dec 09	284 881	94%	18 092	6%	180 000	94 000	270 000	10%	7%	19%
Dec 08	0		0		…			…		
Dec 09	460	95%	26	5%	…	<100	<100	…	>95%	>95%
Dec 09	1 263	96%	57	4%	…	<1 000	2 300	…	2%	8%
Dec 09	3	100%	0	0%	…			…		
Dec 09	4 207	94%	256	6%	…	<500	<500	…	79%	>95%

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PEOPLE RECEIVING ANTIRETROVIRAL THERAPY IN LOW- AND MIDDLE-INCOME COUNTRIES, AND ESTIMATED CHILDREN RECEIVING AND NEEDING ANTIRETROVIRAL THERAPY, AND COVERAGE, 2009 LOW- AND MIDDLE-INCOME COUNTRIES[a]

REPORTED NUMBER OF MALES AND FEMALES RECEIVING ANTIRETROVIRAL THERAPY

	Month and year of report	Males	% of total	Females	% of total
Papua New Guinea	Dec 09	2 936	43%	3 815	57%
Paraguay	Dec 08 [d]	1 022	69%	461	31%
Peru	Dec 09	10 346	70%	4 434	30%
Philippines	Dec 09	726	97%	24	3%
Poland	Dec 09	3 130	72%	1 199	28%
Republic of Moldova	Dec 09	571	58%	413	42%
Romania	Dec 09	3 538	49%	3 706	51%
Russian Federation		…		…	
Rwanda	Dec 09	29 795	39%	46 931	61%
Saint Kitts and Nevis		…		…	
Saint Lucia	Dec 09	59	48%	65	52%
Saint Vincent and the Grenadines	Dec 09	87	54%	75	46%
Samoa		…		…	
Sao Tome and Principe	Dec 09	62	37%	107	63%
Senegal	Dec 09	4 427	36%	7 822	64%
Serbia	Dec 09	598	76%	192	24%
Seychelles	Dec 09	78	56%	61	44%
Sierra Leone	Nov 08 [d,e]	1 542	37%	2 680	63%
Slovakia	Dec 08	70	72%	27	28%
Solomon Islands	Dec 09	1	25%	3	75%
Somalia		…		…	
South Africa	Oct 09 [d]	349 967	35%	649 939	65%
Sri Lanka	Dec 09	120	58%	87	42%
Sudan	Dec 09 [d,h]	1 141	57%	855	43%
Suriname		…		…	
Swaziland	Dec 09	17 300	37%	29 941	63%
Syrian Arab Republic	Dec 09	66	67%	33	33%
Tajikistan	Dec 09	218	68%	104	32%
Thailand		…		…	
The former Yugoslav Republic of Macedonia	Dec 09	18	75%	6	25%
Timor-Leste	Dec 09	15	48%	16	52%
Togo	Dec 09	5 307	32%	11 403	68%
Tonga		…		…	
Tunisia	Dec 09	262	64%	150	36%
Turkey		…		…	
Turkmenistan		…		…	
Tuvalu	Dec 09	1	100%	0	0%
Uganda	Sep 09 [d]	64 604	37%	110 763	63%
Ukraine	Dec 09	8 356	53%	7 515	47%
United Republic of Tanzania	Sep 09 [d]	70 558	36%	126 854	64%
Uruguay		…		…	
Uzbekistan		…		…	
Vanuatu	Dec 09	0	0%	2	100%
Venezuela (Bolivarian Republic of)	Dec 09	23 338	72%	8 964	28%
Viet Nam	Sep 09 [d,e]	16 854	72%	6 558	28%
Yemen	Dec 08 [e]	123	65%	66	35%
Zambia	Dec 09	124 189	44%	159 674	56%
Zimbabwe	Dec 08 [d]	49 701	37%	85 625	63%

… Data not available or not applicable.

[a] Countries classified by World Bank income status.

[b] The needs estimates are based on the methods described in the explanatory notes to the annexes. The estimates for individual countries may differ according to the local methods used.

[c] The coverage estimates are based on the estimated unrounded numbers of children receiving antiretroviral therapy and the estimated unrounded need for antiretroviral therapy (based on UNAIDS/WHO methodology). The ranges in coverage estimates are based on plausibility bounds in the denominator: that is, low and high estimates of need.

[d] Point estimates and ranges are given for countries with a generalized epidemic, whereas only ranges are given for countries with a low or concentrated epidemic.

[e] The latest available breakdowns refer to partial or cumulative data sets and do not reflect national-level data.

[f] The latest available breakdowns are not as recent as the latest reported national-level data.

[g] Estimates of the number of children needing antitretroviral therapy are currently being reviewed and will be adjusted, as appropriate, based on ongoing data collection and analysis.

[h] At the request of the country, only ranges in the estimates are being presented.

[i] Breakdowns by sex and age groups were only received for northern Sudan, therefore data should be interpreted cautiously.

REPORTED NUMBER OF ADULTS AND CHILDREN RECEIVING ANTIRETROVIRAL THERAPY					ESTIMATED NUMBER OF CHILDREN NEEDING ANTIRETROVIRAL THERAPY BASED ON UNAIDS/WHO METHODS, 2009[b]			ESTIMATED ANTIRETROVIRAL THERAPY COVERAGE AMONG CHILDREN, DECEMBER 2009[c]		
Month and year of report	Adults (15+)	% of total	Children (<15)	% of total	Estimate	Low estimate	High estimate	Estimate	Low estimate	High estimate
Dec 09	6 324	94%	427	6%	1 700	<1 000	2 600	26%	17%	49%
Dec 08 [e]	1 483	92%	130	8%	…	<200	<500	…	49%	>95%
Dec 09	14 263	97%	517	3%	…	<500	1 400	…	36%	>95%
Dec 08 [e]	521	98%	11	2%	…	<100	<200	…	8%	30%
Dec 09	4 192	97%	137	3%	…	<100	<100	…	>95%	>95%
Dec 09	950	97%	34	3%	…	<100	<100	…	45%	>95%
Dec 09	7 052	97%	192	3%	…	<500	<500	…	52%	71%
Dec 08 [e]	52 902	96%	1 998	4%	…	3 400	12 000	…	17%	60%
Dec 09	70 047	91%	6 679	9%	11 000	7 000	17 000	60%	40%	>95%
	…		…		…			…		
Dec 09	121	98%	3	2%	…			…		
Dec 09	159	98%	3	2%	…			…		
	…		…		…			…		
Dec 08 [e]	104	95%	5	5%	…			…		
Dec 09	11 455	94%	794	6%	…	1 600	4 300	…	18%	51%
Dec 09	779	99%	11	1%	…	<100	<100	…	55%	>95%
Dec 09	130	94%	9	6%	…			…		
Dec 09	3 423	94%	237	6%	1 700	<1 000	2 600	14%	9%	25%
Dec 08	97	100%	0	0%	…	<100	<100	…	0%	0%
Dec 09	4	100%	0	0%	…			…		
Dec 08 [e]	404	98%	9	2%	…	<1 000	1 900	…	0%	1%
Oct 09	885 286	91%	86 270	9%	160 000	92 000	210 000	54%	41%	94%
Dec 09	196	95%	11	5%	…	<100	<100	…	34%	92%
Dec 09 [d,h]	…		188		8 700	4 400	13 000	2% [h]	1%	4%
Dec 08 [e]	778	91%	80	9%	…	<100	<200	…	74%	>95%
Dec 09	42 469	90%	4 772	10%	6 800	4 400	9 000	70%	53%	>95%
Dec 09	91	92%	8	8%	…			…		
Dec 09	313	97%	9	3%	…	<100	<200	…	5%	21%
Sep 09	208 042	96%	8 076	4%	…	7 900	11 000	…	73%	>95%
Dec 09	23	96%	1	4%	…			…		
Dec 09	28	90%	3	10%	…			…		
Dec 09	15 682	94%	1 028	6%	5 200	1 800	8 800	20%	12%	58%
Dec 08	2	100%	0	0%	…			…		
Dec 09	400	97%	12	3%	…	<100	<100	…	35%	86%
Dec 07 [d,e]	…		9		…	<100	<100	…	10%	21%
	…		…		…			…		
Dec 09	1	100%	0	0%	…			…		
Sep 08	187 000	93%	13 413	7%	76 000	41 000	110 000	18%	12%	33%
Dec 09	14 151	89%	1 720	11%	…	1 500	2 500	…	69%	>95%
Dec 08	186 591	94%	12 822	6%	75 000	38 000	110 000	17%	11%	34%
Dec 06	2 350	94%	160	6%	…	<100	<200	…	81%	>95%
Dec 07 [d,e]	…		225		… [f]			…		
Dec 09	1	50%	1	50%	…			…		
Dec 09	31 518	98%	784	2%	… [f]			…		
Dec 09	36 008	95%	1 987	5%	…	1 700	3 700	…	54%	>95%
Dec 08 [e]	265	97%	9	3%	…			…		
Dec 09	262 743	93%	21 120	7%	59 000	32 000	82 000	36%	26%	65%
Feb 10	197 068	90%	21 521	10%	71 000	43 000	95 000	30%	23%	50%

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PERCENTAGE OF ADULTS AND CHILDREN WITH HIV KNOWN TO BE ON TREATMENT 12 MONTHS AFTER INITIATION OF ANTIRETROVIRAL THERAPY[1]

	2005				
	Males	Females	Both sexes		Total
			<15	15+	
Albania					
Algeria					
Angola					
Antigua and Barbuda					
Argentina					
Armenia					
Austria					
Azerbaijan					
Bahamas					
Bangladesh					
Barbados	93	94			93
Belarus					
Belize					
Benin					
Bolivia					
Bosnia and Herzegovina					
Botswana			92		
Brazil					
Brunei Darussalam					
Bulgaria					
Burkina Faso					
Burundi					
Cambodia					
Cameroon					
Cape Verde					
Central African Republic					
Chad					
Chile					
China					
Colombia					
Comoros					
Costa Rica					
Côte d'Ivoire					
Croatia					
Cuba					
Cyprus					
Democratic Republic of the Congo					
Djibouti					
Dominica					
Dominican Republic					
Ecuador					
Egypt					
El Salvador					
Equatorial Guinea					
Eritrea					
Ethiopia	90	86			89
Fiji					
Finland					
Gabon					
Gambia					
Georgia	85	100			88
Germany					
Ghana					
Greece					

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2007					2009				
Males	Females	Both sexes		Total	Males	Females	Both sexes		Total
		<15	15+				<15	15+	
									89
									98
					59	62	73	61	61
53	57			55[2]					78
				90					
80	100		84	84	77	75		77	77
					90	90			90
57	43		86	86[3]	72	94		77	77
68	71	90	68	70	83	98	30	97	91
									90
93	96		95	95	89	89	100	88	89
74	77	97	74	75	78	79	100	77	78
									76
				73	87	88	98	87	88
97	96	100	97	97	81	75	75	79	79
				100[3]					72
82	86			85[4]					91
					98	99	99	99	99
					67			67	67
89	93	33	97	91	91	86		90	90
77	71	77	73	73	87	80	86	82	83
77	82	77	81	80	88	91	88	90	90
		94	87	88			94	87	87
96	96	97	96	96	90	93	97	92	92
93	86	100	88	89			92	88	88
85	85	89	85	85					81
					38	54	14	50	47
				89					94
84	91	96	85	85	81	86	86	82	82
				76					
40	60	0	100	100[3]	100	100	100	100	100
				91					94
86	91	82	90	89					67
100	88	0	97	97	89	100		89	89
96	96	100	96	96	93	98	100	94	94
									11
66	72	62	70	70					77
				82	78	77		77	77
					100	100		100	100
		89	90	90					83
									95
							95	74	75
				85			87	95	90
									70
				93					
				70					72[8]
		100	78	79	96	93		83	83
				90					95
50	62	63	58	58	83	88	50	87	86
				92					
71	86	75	71	75[5]	79	87	82	81	81
77	80			78					79
									90
95	96	100	95	96	97	98	100	97	97

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PERCENTAGE OF ADULTS AND CHILDREN WITH HIV KNOWN TO BE ON TREATMENT 12 MONTHS AFTER INITIATION OF ANTIRETROVIRAL THERAPY[1]

	2005				
	Males	Females	Both sexes		Total
			<15	15+	
Grenada					
Guatemala					
Guinea					
GuineaBissau					
Guyana					
Haiti					
Honduras					
Hungary					
India					
Indonesia					
Iran, Islamic Republic of					
Jamaica					
Japan					
Jordan					
Kazakhstan					
Kenya					
Kuwait					
Kyrgyzstan					
Lao People's Democratic Republic					
Lebanon					
Lesotho					82
Lithuania					
Luxembourg					
Madagascar					100
Malawi					83
Malaysia					
Maldives					
Mali					
Marshall Islands					
Mauritania					
Mauritius					
Mexico					
Micronesia, Federated States of					
Moldova					
Mongolia					
Montenegro					
Morocco					
Mozambique					
Myanmar					
Namibia					91 [2]
Nepal					
New Zealand					
Nicaragua					
Niger					
Nigeria					98 [6]
Oman					
Pakistan					
Palau					
Panama					
Papua New Guinea					
Paraguay					
Peru					
Philippines					

2007					2009				
Males	Females	Both sexes		Total	Males	Females	Both sexes		Total
		<15	15+				<15	15+	
83	100	100	83	88	56	67	100	50	60
				91	82	83	90	82	83
					75	79	19	81	78[7]
				62	81	85	65	84	84
70	78	97	73	75	70	75	65	73	72
				84					
				91	76	81	95	78	79
99	98	83	99	99	99	99	100	99	99
				80					89
									65[8]
78	79	75	78	78	69	72	68	70	70
			88	88					92
				100					99[8]
				98	95	100	100	95	96
72	61	8	73	68	73	80	100	69	75
				87					80[7]
					100	100	0	100	100
70	57	100	66	68	67	85	82	66	73
90	90	93	90	90	93	97	100	95	95
				100					100
74	75	79	73	74					81
54	71		58	58	83	100		88	88
					87	89		89	89
				94	91	97	100	95	95
				69			79	79	79[8]
				87					87
					100			100	100
72	72	72	72	72					72
	100		100	100[3]	50	50		50	50
				92	92	97	93	95	95
84	90		85	85	94	85		93	93
					88	89	35	96	88
					100	100		100	100
82	93	88	87	87	90	85	100	88	88
67			67	67[3]	100			100	100
75	20		60	60[3]	83	50		75	75[8]
				93	89	93	100	91	91
				97					
					90	85	94	87	88
		82	69	71			80	80	80
				85	88	94	98	90	91
				98					98[8]
				100					67
		36	47	47	95	95	67	96	95
		92	95	95	67	72	70	70	70
					84	79	100	83	83
				87					
100	100		100	100[3]					38
				96			94	76	77
67	56	10	67	61	91	91	67	91	82
30	14	6	44	49					85
85	87	95	85	85			82	87	86
96	96		96	96					90

A2

PERCENTAGE OF ADULTS AND CHILDREN WITH HIV KNOWN TO BE ON TREATMENT 12 MONTHS AFTER INITIATION OF ANTIRETROVIRAL THERAPY[1]

	2005				
	Males	Females	Both sexes		Total
			<15	15+	
Portugal					
Qatar					
Romania					
Russian Federation					
Rwanda					
Saint Kitts and Nevis					
Saint Lucia					80
Saint Vincent and the Grenadines					
Sao Tome and Principe					
Senegal					
Seychelles					
Sierra Leone					
Slovakia					
Solomon Islands					
Somalia					
South Africa					
Sri Lanka					
Sudan					
Suriname					
Swaziland					
Sweden					
Switzerland					
Syrian Arab Republic					
Tajikistan					
Thailand					
The former Yugoslav Republic of Macedonia					
TimorLeste					
Togo					
Trinidad and Tobago					
Tunisia					
Turkey					
Tuvalu					
Uganda					
Ukraine	69	75	70	100	72
United Arab Emirates					
United Kingdom of Great Britain and Northern Ireland					
United Republic of Tanzania					
Uruguay					
Uzbekistan					
Venezuela					
Viet Nam					
Zambia					
Zimbabwe					

[1] Data values represent 1 cohort with 12 month minimum survival, with patients lost to followup and death included in the denominator, unless otherwise noted.
[2] Represents cumulative survival.
[3] Represents <10 persons alive and still on ART in last 12 months.
[5] Represents 2006.
[6] Represents 8 month survival.
[7] Represents 2007.
[8] Reflects greater than 12 months survival.

2007					2009				
Males	Females	Both sexes		Total	Males	Females	Both sexes		Total
		<15	15+				<15	15+	
									84
					100	100	0	100	100
									93
									79
				91					95[8]
				100	100		100		100
100	97	100	98	98	100	100	100	100	100
43	80	50	63	62	90	82	100	86	86
65	82	100	74	75	100	83		88	88
79	94			89					85
62	43	100	53	55	94	94	100	93	94
				81	84	84			84
					89	93		90	90
					100	100		100	100
									72
				53					
				64	96	86		93	93
									57
				80			57	63	62
63	65	65	64	64			78	77	77
					99	98	100	99	99
92	84		89	89					
					100	100		100	100
55	61		57	57	54	71		58	58
85	85	88	85	85	78	93	90	85	85[8]
43	50		44	44[3]	71	100		78	78
									78
90	90	90	90	90					95
							9	77	86
93	90			92			100	96	96[8]
26	16	3	24	23					
					100			100	100
				88					86
73	83	91	76	78					85
									99
					92	84	79	89	89
									65
				74				87	87
							84	80	81
					86	80	87	84	84
		93	81	82			81	84	84
87	90	92	88	88					
				93	72	77			75

A2

PREVENTING MOTHER-TO-CHILD TRANSMISSION OF HIV IN LOW- AND MIDDLE-INCOME COUNTRIES, 2009[a]

	NUMBER OF PREGNANT WOMEN LIVING WITH HIV WHO RECEIVED ANTIRETROVIRALS FOR PREVENTING MOTHER-TO-CHILD TRANSMISSION	PERIOD
Afghanistan	…	
Albania	…	
Algeria	65	Jan 09–Dec 09
Angola	3 053	Jan 09–Dec 09
Argentina	2 039	Jan 08–Dec 08
Armenia	13	Jan 09–Dec 09
Azerbaijan	11	Jan 09–Dec 09
Bangladesh	7	Jan 08–Dec 08
Belarus	194	Jan 09–Dec 09
Belize	63	Jan 09–Dec 09
Benin	1 703	Jan 09–Dec 09
Bhutan	19	Jan 08–Dec 08
Bolivia (Plurinational State of)	105	Jan 09–Dec 09
Bosnia and Herzegovina	1	Jan 08–Dec 08
Botswana	12 406	Jan 09–Dec 09
Brazil	5 988	Jan 09–Dec 09
Bulgaria	9	Jan 09–Dec 09
Burkina Faso	2 084	Jan 09–Dec 09
Burundi	1 837	Jan 09–Dec 09
Cambodia	798	Jan 09–Dec 09
Cameroon	9 092	Jan 09–Dec 09
Cape Verde	61	Jan 09–Dec 09
Central African Republic	2 157	Jan 09–Dec 09
Chad	989	Jan 09–Dec 09
Chile	121	Jan 09–Dec 09
China	1 554	Jan 09–Dec 09
Colombia	519	Jan 09–Dec 09
Comoros	1	Jan 09–Dec 09
Congo	441	Jan 09–Dec 09
Cook Islands	…	
Costa Rica	31	Jan 08–Dec 08
Côte d'Ivoire	11 064	Jan 09–Dec 09
Croatia	2	Jan 09–Dec 09
Cuba	50	Jan 09–Dec 09
Democratic People's Republic of Korea	…	
Democratic Republic of the Congo	2 232	Jan 09–Dec 09
Djibouti	63	Jan 09–Dec 09
Dominica	2	Jan 09–Dec 09
Dominican Republic	949	Jan 09–Dec 09
Ecuador	477	Jan 09–Dec 09
Egypt	11	Jan 09–Dec 09
El Salvador	170	Jan 08–Dec 08
Equatorial Guinea	365	Jan 09–Dec 09
Eritrea	464	Jan 09–Dec 09
Ethiopia	6 721	Jan 09–Dec 09
Fiji	5	Jan 09–Nov 09
Gabon	577	Jan 09–Dec 09
Gambia	885	Jan 09–Sep 09
Georgia	12	Jan 09–Dec 09
Ghana	3 643	Jan 09–Dec 09

UNGASS Indicator 5

ESTIMATED NUMBER OF PREGNANT WOMEN LIVING WITH HIV NEEDING ANTIRETROVIRALS FOR PREVENTING MOTHER-TO-CHILD TRANSMISSION BASED ON UNAIDS/WHO METHODS[b]			ESTIMATED PERCENTAGE OF PREGNANT WOMEN LIVING WITH HIV WHO RECEIVED ANTIRETROVIRALS FOR PREVENTING MOTHER-TO-CHILD TRANSMISSION[c]		
Estimate	Low estimate	High estimate	Estimate	Low estimate	High estimate
…			…		
…			…		
…	<200	<500	…	14%	59%
16 000	8 400	25 000	19%	12%	36%
…	<1 000	2 400	…	86%	>95%
…	<100	<100	…	65%	>95%
…	<100	<500	…	5%	17%
…	<100	<200	…	4%	13%
…	<100	<500	…	>95%	>95%
…	<200	<500	…	22%	61%
3 700	1 900	5 800	46%	29%	92%
…	<100	<100	…	95%	>95%
…	<200	<500	…	22%	83%
…			…		
13 000	6 900	17 000	>95%	74%	>95%
…	3 700	12 000	…	49%	>95%
…	<100	<100	…	23%	82%
6 500	3 500	11 000	32%	19%	60%
15 000	8 400	21 000	12%	9%	22%
…	<1 000	3 000	…	26%	>95%
34 000	18 000	50 000	27%	18%	50%
…			…		
6 300	3 200	9 500	34%	23%	67%
16 000	8 300	29 000	6%	3%	12%
…	<500	<1 000	…	15%	55%
…	2 600	11 000	…	14%	59%
…	<1 000	3 900	…	13%	55%
…	<100	<100	…	10%	33%
3 800	1 900	5 600	12%	8%	23%
…			…		
…	<100	<200	…	17%	53%
20 000	10 000	31 000	54%	36%	>95%
…	<100	<100	…	15%	67%
…	<100	<200	…	39%	>95%
…	<100	<100	…		
…[d]	20 000	54 000	…	4%	11%
<1 000	<500	1 000	10%	6%	21%
…			…		
…	<1 000	3 000	…	32%	95%
…	<500	<1 000	…	48%	>95%
…	<200	<500	…	3%	10%
…	<500	<1 000	…	19%	71%
1 400	<1 000	2 300	26%	16%	50%
1 400	<1 000	2 200	34%	21%	71%
…[d]	17 000	51 000	…	13%	40%
…	<100	<100	…	28%	>95%
1 900	<1 000	2 900	30%	20%	60%
…	<1 000	2 000	…	43%	>95%
…	<100	<100	…	19%	86%
13 000	6 900	20 000	27%	18%	53%

A2

PREVENTING MOTHER-TO-CHILD TRANSMISSION OF HIV IN LOW- AND MIDDLE-INCOME COUNTRIES, 2009[a]

	NUMBER OF PREGNANT WOMEN LIVING WITH HIV WHO RECEIVED ANTIRETROVIRALS FOR PREVENTING MOTHER-TO-CHILD TRANSMISSION	PERIOD
Grenada	2	Jan 09–Dec 09
Guatemala	440	Jan 09–Dec 09
Guinea	783	Jan 09–Dec 09
Guinea-Bissau	383	Jan 09–Dec 09
Guyana	183	Jan 09–Dec 09
Haiti	2 960	Jan 09–Dec 09
Honduras	255	Jan 09–Dec 09
Hungary	5	Jan 09–Dec 09
India	11 319	Jan 09–Dec 09
Indonesia	196	Jan 08–Dec 08
Iran (Islamic Republic of)	25	Mar 08–Feb 09
Iraq	0	Jan 08–Dec 08
Jamaica	379	Jan 09–Dec 09
Jordan	0	Jan 09–Dec 09
Kazakhstan	193	Jan 09–Dec 09
Kenya	58 591	Jan 09–Dec 09
Kiribati	0	Jan 08–Dec 08
Kyrgyzstan	58	Jan 09–Dec 09
Lao People's Democratic Republic	24	Jan 09–Dec 09
Latvia	56	Jan 09–Dec 09
Lebanon	…	
Lesotho	8 846	Jan 09–Dec 09
Liberia	377	Jan 09–Dec 09
Libyan Arab Jamahiriya	…	
Lithuania	12	Jan 09–Dec 09
Madagascar	17	Jan 09–Dec 09
Malawi	33 156	Jan 09–Dec 09
Malaysia	300	Jan 09–Dec 09
Maldives	0	Jan 09–Dec 09
Mali	1 710	Jan 09–Dec 09
Marshall Islands	1	Oct 08–Sep 09
Mauritania	68	Jan 09–Dec 09
Mauritius	41	Jan 09–Dec 09
Mexico	124	Jan 09–Dec 09
Micronesia (Federated States of)	…	
Mongolia	1	Jan 09–Dec 09
Montenegro	0	Jan 09–Dec 09
Morocco	90	Jan 09–Dec 09
Mozambique	68 248	Jan 09–Dec 09
Myanmar	2 398	Jan 09–Dec 09
Namibia	6 744	Apr 08–Mar 09
Nauru	…	
Nepal	56	Jul 08–Jun 09
Nicaragua	91	Jan 09–Dec 09
Niger	1 737	Jan 09–Dec 09
Nigeria	44 723	Jan 09–Dec 09
Niue	…	
Oman	9	Jan 09–Dec 09
Pakistan	25	Jan 09–Dec 09
Palau	…	

ESTIMATED NUMBER OF PREGNANT WOMEN LIVING WITH HIV NEEDING ANTIRETROVIRALS FOR PREVENTING MOTHER-TO-CHILD TRANSMISSION BASED ON UNAIDS/WHO METHODS[b]			ESTIMATED PERCENTAGE OF PREGNANT WOMEN LIVING WITH HIV WHO RECEIVED ANTIRETROVIRALS FOR PREVENTING MOTHER-TO-CHILD TRANSMISSION[c]		
Estimate	Low estimate	High estimate	Estimate	Low estimate	High estimate
…			…		
…	<1 000	2 900	…	15%	56%
4 600	2 300	7 200	17%	11%	34%
1 600	<1 000	2 400	24%	16%	49%
…	<100	<500	…	88%	>95%
5 000	2 600	7 500	60%	39%	>95%
…	<500	1 300	…	20%	82%
…	<100	<100	…	14%	63%
…	23 000	65 000	…	17%	48%
…	1 100	4 600	…	4%	17%
…	<500	1 300	…	2%	7%
…			…		
…	<200	<1 000	…	46%	>95%
…			…		
…	<200	<1 000	…	38%	>95%
81 000	41 000	120 000	73%	50%	>95%
…			…		
…	<100	<500	…	23%	>95%
…	<200	<500	…	5%	20%
…	<100	<200	…	52%	>95%
…	<100	<100	…		
14 000	8 400	18 000	64%	48%	>95%
2 400	1 100	3 700	16%	10%	33%
…			…		
…	<100	<100	…	92%	>95%
…	<500	1 100	…	1%	5%
57 000	31 000	83 000	58%	40%	>95%
…	<100	<1 000	…	55%	>95%
…	<100	<100	…	0%	0%
…	2 100	6 700	…	26%	82%
…			…		
…	<200	<1 000	…	12%	37%
…	<100	<200	…	33%	>95%
…	1 500	4 500	…	3%	9%
			…		
…	<100	<100	…	10%	33%
…			…		
…	<200	<1 000	…	13%	49%
97 000	53 000	130 000	70%	51%	>95%
…	1 800	5 600	…	43%	>95%
7 700	4 100	11 000	88%	61%	>95%
…			…		
…	<1 000	2 100	…	3%	10%
…	<100	<500	…	45%	>95%
…	2 300	7 000	…	25%	74%
210 000	110 000	300 000	22%	15%	42%
…			…		
…	<100	<100	…	29%	>95%
…	1 000	3 700	…	1%	2%
…			…		

A2

PREVENTING MOTHER-TO-CHILD TRANSMISSION OF HIV IN LOW- AND MIDDLE-INCOME COUNTRIES, 2009[a]

	NUMBER OF PREGNANT WOMEN LIVING WITH HIV WHO RECEIVED ANTIRETROVIRALS FOR PREVENTING MOTHER-TO-CHILD TRANSMISSION	PERIOD
Panama	118	Jan 09–Dec 09
Papua New Guinea	263	Jan 09–Dec 09
Paraguay	148	Jan 09–Dec 09
Peru	550	Jan 09–Dec 09
Philippines	3	Jan 09–Dec 09
Poland	81	Jan 09–Dec 09
Republic of Moldova	109	Jan 09–Dec 09
Romania	152	Jan 09–Dec 09
Russian Federation	9 380	Jan 09–Dec 09
Rwanda	7 030	Jan 09–Dec 09
Saint Kitts and Nevis	1	Jan 09–Dec 09
Saint Lucia	6	Jan 09–Dec 09
Saint Vincent and the Grenadines	14	Jan 09–Dec 09
Samoa	…	
Sao Tome and Principe	11	Jan 09–Dec 09
Senegal	917	Jan 09–Dec 09
Serbia	2	Jan 08–Dec 08
Seychelles	12	Jan 09–Dec 09
Sierra Leone	637	Jan 09–Dec 09
Slovakia	2	Jan 09–Dec 09
Solomon Islands	1	Jan 09–Dec 09
Somalia	0	Jan 09–Dec 09
South Africa	188 200	Jan 09–Dec 09
Sri Lanka	4	Jan 09–Dec 09
Sudan	245	Jan 09–Dec 09
Suriname	83	Jan 08–Dec 08
Swaziland	8 182	Jan 09–Dec 09
Syrian Arab Republic	2	Jan 09–Dec 09
Tajikistan	25	Jan 09–Dec 09
Thailand	5 457	Oct 08–Sep 09
The former Yugoslav Republic of Macedonia	0	Jan 09–Dec 09
Timor-Leste	1	Jan 08–Dec 08
Togo	1 451	Jan 09–Dec 09
Tonga	…	
Tunisia	3	Jan 09–Dec 09
Turkey	4	Jan 06–Dec 06
Turkmenistan	…	
Tuvalu	…	
Uganda	46 948	Jan 09–Dec 09
Ukraine	3 645	Jan 09–Dec 09
United Republic of Tanzania	58 833	Jan 09–Dec 09
Uruguay	70	Jan 08–Dec 08
Uzbekistan	304	Jan 09–Dec 09
Vanuatu	…	
Venezuela (Bolivarian Republic of)	233	Jan 09–Dec 09
Viet Nam	1 372	Jan 09–Dec 09
Yemen	13	Jan 09–Dec 09
Zambia	47 175	Jan 09–Dec 09
Zimbabwe	28 208	Jan 09–Dec 09

[a] Countries classified by World Bank income status.

[b] The needs estimates are based on the methods described in the explanatory notes. The estimates for individual countries may differ according to the local methods used.

[c] The coverage estimates are based on the numbers of pregnant women living with HIV receiving antiretrovirals and the estimated unrounded need for antiretrovirals (based on UNAIDS/WHO methods). The ranges in coverage estimates are based on plausibility bounds in the denominator: that is, low and high estimates of need. Point estimates and ranges are given for countries with a generalized epidemic, whereas only ranges are given for countries with a low-level or concentrated epidemic.

[d] The data may include double-counting.

ESTIMATED NUMBER OF PREGNANT WOMEN LIVING WITH HIV NEEDING ANTIRETROVIRALS FOR PREVENTING MOTHER-TO-CHILD TRANSMISSION BASED ON UNAIDS/WHO METHODS[b]			ESTIMATED PERCENTAGE OF PREGNANT WOMEN LIVING WITH HIV WHO RECEIVED ANTIRETROVIRALS FOR PREVENTING MOTHER-TO-CHILD TRANSMISSION[c]		
Estimate	Low estimate	High estimate	Estimate	Low estimate	High estimate
…	<200	<1 000	…	19%	>95%
2 000	<1 000	3 000	13%	9%	27%
…	<200	<500	…	38%	>95%
…	<500	1 700	…	33%	>95%
…	<100	<500	…	1%	4%
…	<100	<500	…	27%	>95%
…	<100	<200	…	71%	>95%
…	<100	<500	…	76%	>95%
…	5 100	16 000	…	57%	>95%
11 000	5 400	16 000	65%	43%	>95%
…			…		
…			…		
…			…		
…			…		
…			…		
…	2 000	5 900	…	16%	45%
…	<100	<100	…	3%	10%
…			…		
3 300	1 800	5 100	19%	12%	36%
…	<100	<100	…	50%	>95%
…			…		
…	1 000	3 700	…	0%	0%
210 000	120 000	290 000	88%	66%	>95%
…	<100	<100	…	9%	31%
14 000	7 300	22 000	2%	1%	3%
…	<100	<200	…	82%	>95%
9 300	5 700	12 000	88%	68%	>95%
…			…		
…	<100	<500		9%	36%
…	4 900	8 300	…	66%	>95%
…					
…			…		
5 600	2 200	9 400	26%	15%	67%
…			…		
…	<100	<100	…	6%	25%
…	<100	<200	…	3%	13%
…			…		
…			…		
88 000	48 000	130 000	53%	37%	>95%
…	1 200	4 800	…	76%	>95%
84 000	45 000	120 000	70%	48%	>95%
…	<100	<500	…	31%	>95%
…[d]			…		
…			…		
…[d]			…		
…	1 700	4 700	…	29%	79%
…			…		
68 000	37 000	94 000	69%	50%	>95%
50 000	28 000	69 000	56%	41%	>95%

A2

MATERNAL AND INFANT HIV TESTING AND INFANT PROPHYLAXIS IN LOW- AND MIDDLE-INCOME COUNTRIES[a]

PREGNANT WOMEN TESTED FOR HIV

	Reported number	Estimated coverage
Afghanistan	…	
Albania	…	
Algeria	…	
Angola	203 463	26%
Argentina	598 123[d]	87%
Armenia	40 679	86%
Azerbaijan	172 153[d]	>95%
Bangladesh	91	<1%
Belarus	150 186[e]	>95%
Belize	6 310	85%
Benin	171 532[f]	49%
Bhutan	…	
Bolivia (Plurinational State of)	73 369	28%
Bosnia and Herzegovina	1 012	3%
Botswana	44 386[h]	93%
Brazil	2 381 280[d]	79%
Bulgaria	…	
Burkina Faso	310 583	42%
Burundi	113 053	40%
Cambodia	153 884	42%
Cameroon	291 473	41%
Cape Verde	8 500	71%
Central African Republic	43 775	28%
Chad	32 119	6%
Chile	144 772	57%
China	3 741 337[k]	20%
Colombia	353 764	39%
Comoros	1 034	5%
Congo	28 699	23%
Cook Islands	…	
Costa Rica	…	
Côte d'Ivoire	342 698	47%
Croatia	…	
Cuba	122 611[e]	>95%
Democratic People's Republic of Korea	…	
Democratic Republic of the Congo	253 297	9%
Djibouti	9 371	39%
Dominica	947	…
Dominican Republic	114 046	51%
Ecuador	286 211[e]	>95%
Egypt	1 750[g]	<1%
El Salvador	65 712	53%
Equatorial Guinea	16 228	63%
Eritrea	46 544[d]	25%
Ethiopia	488 554	16%
Fiji	9 041[d]	52%
Gabon	9 321	23%
Gambia	31 071	50%
Georgia	58 769[d]	>95%
Ghana	388 254	51%

Supplemental data received obtained by World Health Organization through the monitoring of progress towards Universal Access in the Health Sector

INFANTS BORN TO WOMEN LIVING WITH HIV RECEIVING ANTIRETROVIRALS FOR PREVENTING MOTHER-TO-CHILD TRANSMISSION		INFANTS BORN TO WOMEN LIVING WITH HIV RECEIVING CO-TRIMOXAZOLE PROPHYLAXIS WITHIN TWO MONTHS OF BIRTH		INFANTS BORN TO WOMEN LIVING WITH HIV RECEIVING A VIROLOGICAL TEST BY TWO MONTHS OF AGE	
Reported number	**Estimated coverage**	**Reported number**	**Estimated coverage**	**Reported number**	**Estimated coverage**
…		…		…	
…		…		…	
…		…		…	
2 435	15%	2 435	15%	…	
2 280[d]	>95%	2 160[d]	>95%	…	
9	75%	2	17%	0	0%
14[d]	11%	13[d]	10%	15[d]	12%
12	12%	16	16%	…	
195	>95%	148	>95%	192	>95%
51	26%	…		53	27%
1 473	39%	1 473	39%	…	
13[d]	>95%	7[d]	58%	…	
28[g]	10%	27[d]	10%	23[d]	8%
0	…	0	…	0	…
14 073[j]	>95%	8 232[j]	65%	…	
7 511[d]	>95%	…		2 306[d]	32%
…		…		…	
2 140	33%	1 815	28%	199	3%
1 332	9%	1 332	9%	…	
730	45%	203[g]	12%	…	
8 378	25%	8 378	25%	8 940	26%
67	…	67	…	67	…
1 380	22%	887	14%	40	1%
676	4%	676	4%	…	
…		…		…	
1 701	28%	…		…	
248	12%	…		83	4%
1	17%	1	17%	0	0%
615	16%	548	15%	444	12%
…		…		…	
38	33%	44	38%	44	38%
6 696	33%	…		…	
…		…		…	
0	0%	1[g]	1%	50	67%
…		…		…	
2 232	6%	396	1%	…	
36[d]	6%	22	4%	…	
1	…	1	…	1	…
1 133	59%	…		391[d]	20%
315	56%	…		5	1%
2[g]	1%	…		5[g]	3%
216	42%	176	34%	…	
164	11%	…		…	
424[d]	31%	225[d]	17%	…	
5 025	15%	1 076	3%	1 375	4%
1[d]	10%	2[d]	20%	1[d]	10%
312	16%	219[d]	12%	…	
230	20%	99	8%	…	
19[d]	58%	19[d]	58%	19[d]	58%
1 730[m]	13%	…		…	

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MATERNAL AND INFANT HIV TESTING AND INFANT PROPHYLAXIS IN LOW- AND MIDDLE-INCOME COUNTRIES[a]

PREGNANT WOMEN TESTED FOR HIV

	Reported number	Estimated coverage
Grenada	1 229	60%
Guatemala	102 957	23%
Guinea	39 893	10%
Guinea-Bissau	13 864[o]	21%
Guyana	14 283[e]	>95%
Haiti	154 835	57%
Honduras	103 562	51%
Hungary	8 357[d]	8%
India	5 717 819	21%
Indonesia	10 026	<1%
Iran (Islamic Republic of)	158[q]	<1%
Iraq	1 550[d]	<1%
Jamaica	28 659[d]	55%
Jordan	0	0%
Kazakhstan	434 548[e]	>95%
Kenya	961 990	63%
Kiribati	1 159	…
Kyrgyzstan	171 480[e]	>95%
Lao People's Democratic Republic	3 094	2%
Latvia	20 608	88%
Lebanon	…	
Lesotho	29 626	50%
Liberia	32 659	22%
Libyan Arab Jamahiriya	…	
Lithuania	30 057	95%
Madagascar	140 261	20%
Malawi	316 000	52%
Malaysia	403 287[s]	73%
Maldives	3 911	67%
Mali	86 814	16%
Marshall Islands	…	
Mauritania	6 371[d]	6%
Mauritius	15 026	83%
Mexico	757 863[d]	37%
Micronesia (Federated States of)	…	
Mongolia	…	
Montenegro	…	
Morocco	2 723[d]	<1%
Mozambique	672 020	77%
Myanmar	182 760	18%
Namibia	51 970	88%
Nauru	…	
Nepal	65 791	9%
Nicaragua	81 686	58%
Niger	158 695	19%
Nigeria	820 865	13%
Niue	…	
Oman	30 875	50%
Pakistan	10 277	<1%
Palau	…	
Panama	59 334	85%

INFANTS BORN TO WOMEN LIVING WITH HIV RECEIVING ANTIRETROVIRALS FOR PREVENTING MOTHER-TO-CHILD TRANSMISSION		INFANTS BORN TO WOMEN LIVING WITH HIV RECEIVING CO-TRIMOXAZOLE PROPHYLAXIS WITHIN TWO MONTHS OF BIRTH		INFANTS BORN TO WOMEN LIVING WITH HIV RECEIVING A VIROLOGICAL TEST BY TWO MONTHS OF AGE	
Reported number	**Estimated coverage**	**Reported number**	**Estimated coverage**	**Reported number**	**Estimated coverage**
2	…	2	…	0	…
159[d]	9%	222[d]	13%	…	
231[n]	5%	801[n]	17%	…	
143[d]	9%	…		0	0%
206	>95%	97[p]	>95%	…	
…		448[d]	9%	…	
255	35%	…		309	42%
5	26%	5	26%	…	
11 593	27%	…		…	
165[d]	6%	25[g]	1%	…	
24[d]	3%	20[d]	3%	7[d]	1%
0[d]	…	0[d]	…	…	
605[d]	>95%	…		…	
0	…	0	…	0	…
198	68%	204	70%	188	64%
39 482	49%	4 043	5%	…	
0	…	0	…	0	…
60	51%	70	59%	0	0%
18[d]	7%	17[d]	7%	…	
…		52	84%	…	
0	0%	…		…	
4 240	31%	1 542[d]	11%	4 621	33%
194	8%	45[r]	2%	109[r]	5%
...		…		…	
12	>95%	…		10	>95%
8	1%	…		…	
23 773	41%	28 079	49%	…	
163	54%	163	54%	163	54%
0	0%	0	0%	0	0%
810	19%	722	17%	531	13%
...		…		…	
15[d]	4%	18[g]	5%	…	
53	73%	48	66%	…	
58[d]	2%	…		…	
...		…		…	
1	17%	1	17%	1	17%
1[g]	…	…		…	
20[d]	5%	19[d]	5%	4[d]	1%
41 266	43%	…		…	
1 697	46%	858	23%	…	
7 120	93%	…		…	
...		…		…	
89	7%	75	6%	10	1%
81	63%	81	63%	81	63%
708	15%	309	6%	…	
15 905	8%	3 927[t]	2%	6 101[r]	3%
...		…		…	
4	21%	4	21%	4	21%
16	1%	0	0%	15	1%
...		…		…	
154[d,u]	56%	62[d,u]	23%	…	

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MATERNAL AND INFANT HIV TESTING AND INFANT PROPHYLAXIS IN LOW- AND MIDDLE-INCOME COUNTRIES[a]

PREGNANT WOMEN TESTED FOR HIV

	Reported number	Estimated coverage
Papua New Guinea	43 942	21%
Paraguay	73 123	47%
Peru	599 012[e]	>95%
Philippines	…[v]	
Poland	…	
Republic of Moldova	45 557[e]	>95%
Romania	100 589	47%
Russian Federation	1 468 091[d,w]	95%
Rwanda	294 457	71%
Saint Kitts and Nevis	…	
Saint Lucia	…	
Saint Vincent and the Grenadines	2 635[e]	>95%
Samoa	…	
Sao Tome and Principe	6 475[e]	>95%
Senegal	166 830	35%
Serbia	5 665[d]	5%
Seychelles	1 650	…
Sierra Leone	99 256	44%
Slovakia	…	
Solomon Islands	41[d]	<1%
Somalia	1 131	<1%
South Africa	1 099 712[e]	>95%
Sri Lanka	13 475	4%
Sudan	33 127[x]	3%
Suriname	8 885[d]	91%
Swaziland	25 769	73%
Syrian Arab Republic	4[g]	<1%
Tajikistan	76 297	39%
Thailand	797 047	82%
The former Yugoslav Republic of Macedonia	…	
Timor-Leste	71[d]	<1%
Togo	42 101	20%
Tonga	…	
Tunisia	…	
Turkey	…	
Turkmenistan	…	
Tuvalu	…	
Uganda	968 157[*]	64%
Ukraine	555 535[e]	>95%
United Republic of Tanzania	1 194 172	66%
Uruguay	47 428[d]	95%
Uzbekistan	414 346[***]	74%
Vanuatu	1 499[d,†]	21%
Venezuela (Bolivarian Republic of)	…	
Viet Nam	480 814[‡]	32%
Yemen	4 211	<1%
Zambia	532 484[e]	>95%
Zimbabwe	175 223	46%

INFANTS BORN TO WOMEN LIVING WITH HIV RECEIVING ANTIRETROVIRALS FOR PREVENTING MOTHER-TO-CHILD TRANSMISSION		INFANTS BORN TO WOMEN LIVING WITH HIV RECEIVING CO-TRIMOXAZOLE PROPHYLAXIS WITHIN TWO MONTHS OF BIRTH		INFANTS BORN TO WOMEN LIVING WITH HIV RECEIVING A VIROLOGICAL TEST BY TWO MONTHS OF AGE	
Reported number	**Estimated coverage**	**Reported number**	**Estimated coverage**	**Reported number**	**Estimated coverage**
251	13%	19	1%	…	
148	62%	85	36%	…	
426	43%	…		…	
2	1%	3	2%	2	1%
69	41%	69	41%	69	41%
118	>95%	33	37%	112	>95%
192	>95%	7	6%	192	>95%
8 744[d]	>95%	…		…	
6 684	62%	7 222	67%	5 646	52%
…		…		…	
…		…		…	
15	…	14	…	14	…
…		…		…	
17	…	17	…	…	
433	11%	…		339	9%
1	2%	0	0%	1	2%
7	…	7	…	0	…
518[d]	16%	363[d]	11%	0[d]	0%
…		…		…	
1[d]	…	0[d]		…	
6	0%	0	0%	…	
119 395[d]	56%	43 394	20%	…	
4	15%	4	15%	0	0%
56[y]	<1%	34[z]	<1%	…	
91[d]	>95%	…		9	16%
7 655	82%	9 189	>95%	…	
…		…		…	
19	12%	23	15%	1[g]	1%
5 722	88%	2 074	32%	…	
…		…		…	
1[d]	…	…		…	
1 508	27%	945	17%	614	11%
…		…		…	
1	4%	0	0%	0	0%
…		…		…	
…		…		…	
…		…		…	
24 554	28%	…		5 607	6%
3 840	>95%	3 021	>95%	2 033	69%
43 119	51%	8 348[**]	10%	11 345	13%
…		…		…	
399	…	…		2	…
0[d]	…	…		…	
274	…	…		…	
1 511	48%	944	30%	…	
10	…	8	…	0	…
26 743	39%	25 139	37%	35 824	53%
17 331	35%	13 852	28%	…	

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MATERNAL AND INFANT HIV TESTING AND INFANT PROPHYLAXIS IN LOW- AND MIDDLE-INCOME COUNTRIES[a]

[a] Countries classified by World Bank income status.

[b] No reference b.

[c] No reference c.

[d] The latest reported data are to December 2008.

[e] The reported number of pregnant women tested for HIV was higher than the estimated number of pregnant women, implying a coverage of >100%. Last year, coverage was already >95% in these countries, thus in the regional and global analysis, data are adjusted.

[f] Data are from 323 out of 364 maternity hospitals with PMTCT services.

[g] The latest reported data are to December 2007.

[h] Number of tests were reported, as tests for women who tested more than once at ANC, labour/delivery and postpartum cannot be deduplicated.

[i] The data may include double-counting.

[j] The data cannot specify whether data reported were for infants within two months of birth, but the policy is for all infants to start co-trimoxazole at 6 weeks of age. Data suggest that around two-thirds of infants who started cotrimoxazole, started within two months of birth.

[k] Data are collected from 453 priority counties out of a total of 2860.

[l] No reference l.

[m] Data reported in 2009 is lower than reported value of 2 450 in 2008. This is due to the transition from the old regimen of single-dose nevirapine to the new regimen of single-dose nevirapine at birth and Zidovudine and Lamivudine for 1 or 6 weeks as relevant, which were both still used in 2008. Now only the new regimen is used and is still being scaled up.

[n] Only partial data were collected.

[o] Data are based on the number of pregnant women having access to antenatal clinics/maternity hospitals who know their HIV status.

[p] Data are collected on a monthly data reporting form at 6 weeks, not at 2 months. Therefore, some infants may be lost to follow up.

[q] The latest data reported are to August 2007.

[r] Data may be under-reported.

[s] Only public data were reported, which represent about 70% of total ANC cases.

[t] Four out of ten Implementing partners reported for this indicator.

[u] The data are from three of four paediatric care clinics.

[v] A data value of 26 was reported. The data value was from one site only and for the period September-November 2009.

[w] Russian Federation reported 4 827 215 pregnant women being tested for HIV. As the number of pregnant women tested likely reflects double or triple counting, 95% of the estimated number of births in Russia (1 545 359) was used as a proxy and most likely represents the total number of tests conducted among pregnant women.

[x] Two separate reports were received from Sudan: Northern Sudan reported 19 986 for the period between January-December 2009; southern Sudan reported 13 141 to November 2009, giving a total of 33 127.

[y] Two separate reports were received from Sudan: Northern Sudan reported 34 for the period between January-December 2009; southern Sudan reported 22 to November 2009, giving a total of 56.

[z] Two separate reports were received from Sudan: Northern Sudan reported 34 for the period between January-December 2009; southern Sudan reported "no data" stating that services have just been initiated and co-trimoxazole was initially not part of the supplies for PMTCT. Data for southern Sudan are expected to be ready in next reporting period.

[*] The data are reported for the period July 2008-July 2009.

[**] Data are under-reported.

[***] In 2009, there was a substantial increase in the number of pregnant women tested for HIV, up from the last reported value of 58 063 in 2007. Previously, only those pregnant women with risky behaviour or those who had sexual partners with risky behaviour were recommended for VCT. Now all pregnant women are now recommended for VCT; however, only 77% of pregnant women were reached through VCT by the end of 2009.

[†] Data were collected from Northern District Hospital, Vila Central Hospital, Leneakel Hospital, Lolowai Hospital and Norsup Hospital.

[‡] Data are based on total number tested and received results.

PERCENTAGE OF ESTIMATED HIV-POSITIVE INCIDENT TB CASES THAT RECEIVED TREATMENT FOR TB AND HIV

TREATMENT FOR TB AND HIV

	2007		2009	
	Adults treated	% of patients treated	Adults treated	% of patients treated
Afghanistan	2	<1	4	1
Albania			4	
Algeria	82	87 [1]	111	99
Angola			359	20
Argentina	415	55	250	83
Armenia	15	59 [1]	6	
Austria			12	100
Azerbaijan	3	4	62	53
Bahamas	26	81	15	100
Barbados	2	100		
Belarus	136	72	138	73
Belize	9	69		
Benin	157	31	629	16
Bolivia	60	41	94	51
Bosnia and Herzegovina			25	25
Brazil			3333	26 [5]
Brunei Darussalam			1	50
Bulgaria	32	[2]	23	
Burkina Faso	199	1	503	4
Burundi			594	3
Cote d'Ivoire	994	10	1633	31
Cambodia			526	5
Cameroon			117	3
Cape Verde	3	3	61	61
Central African Republic	3671	15	414	36
Chad			7560	70
China	901	13		
Colombia			343	45
Comoros			0	0
Costa Rica	13	100	36	100
Croatia	3	100		
Cuba	46	90	31	97
Czech Republic			3	60
Democratic Republic of the Congo	162	<1	724	5
Djibouti			170	23
Dominica	1	100	2	67
Dominican Republic	322	115 [1]	260	42
Ecuador	150	40		
Egypt			3	2
El Salvador	63	100	37	50
Equatorial Guinea			205	11 [5]
Ethiopia	2658	13	4515	41
Fiji	2	40	0	
Finland	0			90
Gabon	521	13	366	33
Georgia	34	71	76	67
Ghana			531	
Grenada	0	[2]	1	100
Guatemala	109	33	342	11
Guinea	245	61	335	6
Guinea-Bissau			171	10

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UNGASS Indicator 6

PERCENTAGE OF ESTIMATED HIV-POSITIVE INCIDENT TB CASES THAT RECEIVED TREATMENT FOR TB AND HIV

TREATMENT FOR TB AND HIV

	2007		2009	
	Adults treated	% of patients treated	Adults treated	% of patients treated
Guyana			75	94
Haiti	61	5	2409	24
Honduras	383	71	203	33
Hungary	7	<1 [3]	1	100
India	19 400	23	2693	4
Indonesia			2976	3
Iran, Islamic Republic of	52	20	120	32
Jamaica	18	72		
Japan	10	83	16	94
Jordan	0		0	
Kazakhstan	76	33	103	43
Kenya			14116	23
Kuwait			0	0
Kyrgyzstan			177	52
Lao People's Democratic Republic			85	
Latvia	27	57	8	13
Lebanon	3	148 [1]		
Lesotho			2235	27
Liberia			926	
Lithuania	5	38	5	38
Malawi	18 910	70	4929	16
Malaysia	72	33	390	30
Malta			6	100
Marshall Islands			2	100
Mauritania	95	86 [1, 4]	55	6
Mauritius	3	16	7	100
Mexico	806	78	216	77
Moldova	23	10	63	39
Morocco	88	73	103	22
Mozambique	1008	4 [1]	5622	10
Myanmar			959	11 [5]
Nepal	321	46 [1]		
New Zealand			8	100
Nicaragua	13	14	40	77
Niger	197	1	271	3
Nigeria	28 625	56	18 788	69
Oman			3	100
Panama	270	5	171	35
Papua New Guinea	320	35	127	20
Paraguay	20	14	72	
Peru	93	11	529	71
Philippines	99	49		80
Poland	70	176 [1]		
Portugal			309	100
Qatar			0	
Russian Federation	463	39 [1, 4]	6679	40
Rwanda			1148	9
Saint Kitts and Nevis	2	100		
Saint Lucia	2	50	1	100
Saint Vincent and the Grenadines	4	100	3	27
Sao Tome and Principe	0	[2]	10	77

PERCENTAGE OF ESTIMATED HIV-POSITIVE INCIDENT TB CASES THAT RECEIVED TREATMENT FOR TB AND HIV

TREATMENT FOR TB AND HIV

	2007		2009	
	Adults treated	% of patients treated	Adults treated	% of patients treated
Senegal	319	15	259	6
Seychelles	11	100	2	100
Slovakia			0	0
Slovenia	0	[2]		
Somalia	14	2	59	3
South Africa	159 382	50 [3]	42 576	42
Sri Lanka			3	10
Sudan			823	8
Suriname			15	60
Sweden			57	100
Syrian Arab Republic			0	
Tajikistan	6	8	52	14
Thailand	2260	23 [1]	4151	26
The former Yugoslav Republic of Macedonia	2	[2]		
Togo	44	2 [1]	94	4
Trinidad and Tobago			6	6
Tunisia			11	55
Turkey	47	[2]		
Uganda			18 062	60
Ukraine	411	15	740	21
United Kingdom of Great Britain and Northern Ireland			310	100
United Republic of Tanzania	188	12	5918	30
Uruguay	20	25	18	18
Venezuela			81	22
Viet Nam	390	15	1818	28
Yemen			25	
Zambia	21103	35	6951	41

[1] Estimate of denominator provided by WHO (Global Tuberculosis Control Report 2008).

[2] No denominator is available.

[3] Denominator is the total number of TB cases reported in 2007.

[4] For Mauritania, data available for 2 year period only, thus indicator for 2007 assumes cases evenly spread over each year. For Russian Federation, data reported from 4 geographical regions only – Ulyanovskaya oblast, Saratovskaya oblast, Tverskaya oblast, and Altayskiy kray

[5] Data collection started before 2008.

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TREATMENT AND HIV TESTING OF TB PATIENTS

	Survey Year	TB patients (new and re-treatment) with an HIV test result recorded in the TB register	TB patients (new and re-treatment) recorded as HIV-positive	HIV-positive TB patients started or continued on co-trimoxazole preventive therapy (CPT)	HIV-positive TB patients started or continued on antiretroviral therapy (ART)	People registered as HIV-positive screened for TB at least once during year	People registered as HIV-positive given isoniazid prophylaxis (treatment of latent TB infection)
Afghanistan	2009	1175	5		5	93	
Albania	2009	211	6	4	6	51	3
American Samoa	2009	4	0	0	0	0	0
Andorra	2009	0	0	0	0	0	0
Angola	2009	2023	306	42	29		
Antigua and Barbuda	2009	4	0	0	0	1	0
Argentina	2009	131	115				
Armenia	2009	521	17	8	6	167	0
Australia	2009	297	15				
Bahamas	2009	46	15	6	9		
Bahrain	2009	256	9	0	1		
Bangladesh	2009	662	36	35	36	57	
Barbados	2009	2	0	0	0		0
Belarus	2009		190				
Belize	2009	89	17	17	17		
Benin	2009	3845	629				
Bolivia (Plurinational State of)	2009	1105	38	8	29		
Bosnia and Herzegovina	2009						
Botswana	2009	6128	4036	1467	1467	15 9112	11732
Brazil	2009	39 744	8668		7935	8668	
Burkina Faso	2009	4817	981	959	503		
Burundi	2009	2857	1305	617	423	768	617
Cambodia	2009	28 246	3597	1081	526		66
Cameroon	2009	18 677	7494	0	0	18 677	0
Cape Verde	2009	282	57				0
Central African Republic	2009	3749	1230	808	427		0
Chad	2009	0	0	0	0	0	0
China	2009	63 227	2511	2176	1072		
China, Hong Kong SAR	2009	3993	40	9	11	606	78
China, Macao SAR	2009	336	1	0	0	17	1
Colombia	2009	5031	1018		237		
Comoros	2009	117	0	0	0	1	0
Congo	2009	205	99	99	99		
Cook Islands	2009	0	0	0	0	0	0
Costa Rica	2009	476	41			41	
Côte d'Ivoire	2009	17 253	5207	3674	1633	88	0
Cuba	2009	687	3	0	3	1249	1561
Democratic People's Republic of Korea	2009	0	0	0	0	0	0
Democratic Republic of the Congo	2009	20 630	4173	1435	656	5161	0
Djibouti	2009	1819	197	0	152		
Dominica	2009	4	1	0	1	12	2
Ecuador	2009	2262	443		443		
Egypt	2009	3204	11	11	11	89	1
El Salvador	2009	1650	204	58	71	67	97
Equatorial Guinea	2009	720	121	0	0		
Estonia	2009	380	39	0	21		0

Supplemental data obtained by the World Health Organization through annual reporting of national tuberculosis programmes

TREATMENT AND HIV TESTING OF TB PATIENTS

	Survey Year	TB patients (new and re-treatment) with an HIV test result recorded in the TB register	TB patients (new and re-treatment) recorded as HIV-positive	HIV-positive TB patients started or continued on co-trimoxazole preventive therapy (CPT)	HIV-positive TB patients started or continued on antiretroviral therapy (ART)	People registered as HIV-positive screened for TB at least once during year	People registered as HIV-positive given isoniazid prophylaxis (treatment of latent TB infection)
Ethiopia	2009	56 040	11098	7516	4515	24112	2403
Fiji	2009	144	0	0	0	30	0
French Polynesia	2009	12	0	0	0		0
Gabon	2009	1130	667	348	348		
Gambia	2009	2045	326		35	1238	
Ghana	2009	9870	2218	1601	531	10730	0
Grenada	2009	5	1	1	1	1	0
Guam	2009	63	0	0	0	7	0
Guatemala	2009	1920	342	342	342	525	250
Guinea	2009	5444	1288	520	84		
Guyana	2009	562	156	116	87	893	162
Honduras	2009	1619	192	192	170	764	96
India	2009	258 037	31058			280903	
Indonesia	2009	2782	479		201	2812	0
Iran (Islamic Republic of)	2009	700	223	28	47	11400	418
Iraq	2009	6121	1	1	0	7	0
Israel	2009	20	20		8	20	
Jamaica	2009	96	29				
Jordan	2009	387	0	0	0	15	2
Kenya	2009	96 676	42294	38989	14250	14116	
Kiribati	2009	152	0	0	0		
Kuwait	2009	933	4	4	4	11	0
Kyrgyzstan	2009	6615	88		12		58
Lao People's Democratic Republic	2009	686	179	159			
Latvia	2009	830	73		44		0
Lebanon	2009	298	25	25	25	97	19
Lesotho	2009	10 563	8084	7636	2235		
Liberia	2009	5964	72	30	35	0	0
Libyan Arab Jamahiriya	2009	950	144			148	
Lithuania	2009		14				
Malawi	2009	19 289	13329	12748	6185	0	0
Malaysia	2009	15 192	1644	164	164	2156	0
Mali	2009	3760	585	263	61		0
Malta	2009	30	4				
Marshall Islands	2009	98	2	0	2	4	0
Mauritania	2009	199	23				
Mauritius	2009	110	7	7	5	210	0
Mexico	2009	4196	945	945	216	2368	676
Micronesia (Federated States of)	2009	49	0	0	0	0	0
Monaco	2009						
Mongolia	2009	3993	0	0	0	53	0
Montenegro	2009	91	0	0	0	1	0
Montserrat	2009						
Morocco	2009	77	0	0	0	4972	0
Mozambique	2009	38 087	25 056	22183	5622	24330	2429
Myanmar	2009	4174	1015	981	681	489	333
Namibia	2009	9849	5676	5192	1995	87529	17737
Nauru	2009					0	0

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TREATMENT AND HIV TESTING OF TB PATIENTS

	Survey Year	TB patients (new and re-treatment) with an HIV test result recorded in the TB register	TB patients (new and re-treatment) recorded as HIV-positive	HIV-positive TB patients started or continued on co-trimoxazole preventive therapy (CPT)	HIV-positive TB patients started or continued on antiretroviral therapy (ART)	People registered as HIV-positive screened for TB at least once during year	People registered as HIV-positive given isoniazid prophylaxis (treatment of latent TB infection)
New Zealand	2009	137	4				
Nicaragua	2009	1081	30	30	30	60	60
Niger	2009	2424	300				
Nigeria	2009	64 246	16 813	7730	5486	195 112	1853
Niue	2009	0	0	0	0	0	0
Northern Mariana Islands	2009	32	0	0	0	1	0
Oman	2009	334	3	3	3	116	0
Pakistan	2009	4714	7	7	7	2917	0
Palau	2009	19	0	0	0		0
Panama	2009	1494	107		107		196
Papua New Guinea	2009	1305	196				
Paraguay	2009	239	133	0	72	273	0
Peru	2009	11 893	697		121		1361
Philippines	2009	1136	1	0	0		1
Puerto Rico	2009	59	8	3	3	4	0
Qatar	2009	619	0	0	0	5	0
Romania	2009	5755	209		169		188
Russian Federation	2009	204 624	7442		1448	235 753	10451
Rwanda	2009	7448	2529	2329	1239	12 152	0
Saint Kitts and Nevis	2009	4	0	0	0		
Saint Lucia	2009	11	4		4		
Saint Vincent and the Grenadines	2009	13	7		1		1
Samoa	2009	0	0	0	0		
San Marino	2009						
Sao Tome and Principe	2009	79	10	10	3	10	2
Saudi Arabia	2009	1929	49				
Senegal	2009	6906	455	386	123		0
Seychelles	2009	15	3	3	2	52	0
Sierra Leone	2009	8625	987				
Singapore	2009	1121	52				
Solomon Islands	2009	0	0	0	0	8	0
Somalia	2009	698	96	89	7		0
South Africa	2009	197 448	114 523	80 954	48 314	433 662	23583
Sudan	2009	16 168	692	296	375	1482	
Suriname	2009	154	49	6	25		
Swaziland	2009	8272	6895				
Tajikistan	2009	3714	49	0	22	435	0
Thailand	2009	49 955	8202	5930	4151	25 172	127
The Former Yugoslav Republic of Macedonia	2009	43	0	0	0	12	0
Timor-Leste	2009	108	0	0	0	12	2
Togo	2009	1429	357		94		0
Tonga	2009	8	0	0	0	1	0
Trinidad and Tobago	2009	306	95	22	17	335	4
Tunisia	2009	130	2	0	2	35	24
Tuvalu	2009	0	0	0	0	0	0
Uganda	2009	31 695	17 131	14 731	3766	57 679	
Ukraine	2009		3380		915		

TREATMENT AND HIV TESTING OF TB PATIENTS

	Survey Year	TB patients (new and re-treatment) with an HIV test result recorded in the TB register	TB patients (new and re-treatment) recorded as HIV-positive	HIV-positive TB patients started or continued on co-trimoxazole preventive therapy (CPT)	HIV-positive TB patients started or continued on antiretroviral therapy (ART)	People registered as HIV-positive screened for TB at least once during year	People registered as HIV-positive given isoniazid prophylaxis (treatment of latent TB infection)
United Republic of Tanzania	2009	56 162	21 031	19 007	6639	5526	153
United States of America	2009	7032	703				
Uruguay	2009	666	109	0	18		
Uzbekistan	2009	21 453	357	89	37	3022	1056
Vanuatu	2009	11	0	0	0	3	0
Venezuela (Bolivarian Republic of)	2009	4856	487	0	102	30 158	102
Viet Nam	2009	34 907	5934	5265	354	7092	1500
Wallis and Futuna Islands	2009	9	0	0	0	0	0
West Bank and Gaza Strip	2009	35	0	0	0	0	0
Yemen	2009						
Zambia	2009	34 992	23 584	15 041	10 009		
Zimbabwe	2009	28 006	21 967				

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PERCENTAGE OF ORPHANED AND VULNERABLE CHILDREN AGED 0-17 WHOSE HOUSEHOLDS RECEIVED FREE BASIC EXTERNAL SUPPORT IN CARING FOR THE CHILD

	2005		2007	
	Survey year	Coverage	Survey year	Coverage
Angola				
Barbados				
Benin			2006	69 [1]
Botswana	2004	34		
Burkina Faso			2007	5 [1]
Burundi			2006	50 [1]
Côte d'Ivoire			2006	9 [1]
Cameroon			2006	9
Central African Republic			2006	20 [2]
Chad				
Congo, Republic of the				
Costa Rica			2006	100 [1]
Croatia			2007	100 [1]
Cuba				
Democratic Republic of the Congo				
Djibouti				
Dominican Republic			2007	4 [1]
Eritrea			2007	
Ethiopia	2004	4	2004	4
Finland				99
Gabon			2007	10
Ghana			2006	2 [1]
Guinea			2007	17 [1]
Guinea-Bissau			2006	8
Haiti			2006	5
Honduras				
Indonesia				
Kenya		10		
Lesotho	2004	25		
Madagascar	2003	7		
Malawi			2006	53 [2]
Mali	2005	39	2007	45 [1]
Mozambique				
Namibia			2007	17
Nigeria			2007	10 [1]
Rwanda			2005	13
Saint Lucia			2007	69 [1]
Saint Vincent and the Grenadines				
Senegal			2007	44 [1]
Seychelles			2006	100 [1]
Sierra Leone			2005	1
South Africa			2007	67 [1]
Swaziland			2007	41
Togo		10	2006	60 [2]
Turkey			2006	100 [1]
Uganda			2006	11
United Republic of Tanzania			2006	51 [1]
Zambia	2005	13	2007	16
Zimbabwe			2006	31

UNGASS Indicator 10
MDG 6a indicator

2009		MOST RECENT DHS (OR MICS)[3]	
Survey year	Coverage	Survey year	Coverage
2009	17		
2009	100		
2009	7		
2008	31		
2008	5		
2009	7		
2009	27	2005	9
2009	16		
2006	7	2006	7
2009	35		
2009			
2009	100		
2007	9	2007	9
2009	14		
2008	37		
2004	3		
2009	100		
2010	20		
2008	7		
2009	17		
2005	5	2005	5
2009	0		
2007	13		
2007	21		
2010			
2006	19		
2009	17		
2008	22		
2006	17	2006	17
2008	6	2008	6
2005	13	2005	13
2009	83		
2008			
2007	43		
2005	1		
2009	75		
2006	41	2007	41
2007	60		
2010		2006	11
2008	16		
2006	16	2007	16
2009	21	2005-06	28

[1] Methodology not harmonized with UNGASS 2008 guidelines.

[2] Differs from value provided by UNICEF.

[3] Demographic Health Survey (or Multiple Indicator Cluster Survey).

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RATIO OF ORPHANS TO NON-ORPHANS AGED 10-14 ATTENDING SCHOOL

ORPHANS SCHOOL ATTENDENCE

	2003	2005		2007		2009	
	Ratio	Survey year	Ratio	Survey year	Ratio	Survey year	Ratio
Angola	0.90			2001	0.90	2009	0.87
Argentina				2005	1.03		
Bahamas						2009	1.00
Belize						2006	0.66
Benin				2006	0.85	2009	0.00
Bolivia				2003	0.74[1]		
Botswana	0.99						
Burkina Faso				2007	0.87	2007	1.15
Burundi	0.70			2005	0.85		
Côte d'Ivoire	0.83			2005	1.21[3]	2009	0.69
Cambodia				2006	0.83	2005	0.83
Cameroon	0.94			2006	0.89	2006	0.91
Central African Republic	0.91			2006	0.96	2006	0.97
Chad	0.96			2004	1.03	2004	1.17
Colombia				2005	0.85[1]		
Comoros	0.59						
Congo, Republic of the				2005	1.12	2009	0.88
Croatia				2007	1.00		
Cuba				2005	1.00	2009	1.00
Democratic Republic of the Congo	0.72			2007	0.77[1]	2007	0.77
Dominican Republic						2006	0.71
Equatorial Guinea	0.95						
Eritrea				2002	0.83[1]		
Ethiopia	0.60			2004		2004	0.90
Finland					>0.99		
Gabon	0.98			2007	1.14	2010	0.84
Gambia	0.85			2006	0.87		
Ghana	0.93			2006	1.04[4]	2008	0.76
Guinea	1.13			2005	0.73[1]		
Guinea-Bissau	1.03			2006	0.97		
Guyana				2005	0.95[1]		
Haiti				2000	0.87[1]	2005	0.86
Honduras						2005	1.08
India				2006	0.72[1]		
Indonesia				2002	0.84[1]	2007	0.94
Iran, Islamic Republic of						2008	0.81
Japan						2008	1.00
Kenya	0.74	2005	0.97	2003	0.95[1]	2007	1.05
Lesotho	0.87			2007	0.95		
Madagascar	0.65	2003	0.80	2004	0.83	2009	1.00
Malawi	0.93	2004	0.97			2006	0.97
Mali	0.72					2006	0.87
Mauritania						2007	0.72
Moldova						2010	0.52
Mozambique	0.47			2004	0.80	2008	0.91
Namibia	0.92	2005	0.97	2007	1.00	2006	1.01
Nicaragua				2007	0.88		
Niger	1.07			2006	0.67	2006	0.66
Nigeria	0.87			2007	0.86	2008	1.17

UNGASS Indicator 12
MDG 6a indicator

RATIO OF ORPHANS TO NON-ORPHANS AGED 10-14 ATTENDING SCHOOL

ORPHANS SCHOOL ATTENDENCE

	2003	2005		2007		2009	
	Ratio	Survey year	Ratio	Survey year	Ratio	Survey year	Ratio
Papua New Guinea				2007	0.86	2006	0.86
Rwanda	0.80			2005	0.82	2005	0.82
Saint Lucia				2007	1.76 [2]	2009	1.38
Saint Vincent and the Grenadines						2008	1.00
Senegal	0.74			2007	1.25 [2]		
Sierra Leone	0.71			2005	0.83	2008	0.62
Somalia	0.65			2006	0.78		
South Africa	0.95			2007	0.81[2]	2008	0.99
Spain						2007	0.00
Sudan	0.96					2006	0.80
Swaziland	0.91			2007	0.97	2006	0.97
Thailand				2006	0.93	2005	0.99
Togo	0.96			2007	0.94	2007	0.96
Turkey				2007	0.70 [2]		
Uganda	0.95			2000	0.95	2010	0.00
United Republic of Tanzania	0.74			2007	0.64	2008	
Zambia	0.87	2005	0.17	2005	1.02 [2]	2006	0.92
Zimbabwe	0.85			2006	0.95		

[1] Demographic and Health Survey value provided by MEASURE DHS (www.measuredhs.com).
[2] Data collection method differs from the UNGASS recommended methodology.
[3] Differs from value provided by UNICEF.
[4] Multiple Indicator Cluster Survey based on small denominators, typically 25-49 unweighted cases.

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PERCENTAGE OF SCHOOLS THAT PROVIDED LIFE SKILLS-BASED HIV EDUCATION IN THE LAST ACADEMIC YEAR

	2007	2009
Afghanistan		1
Angola	1	
Antigua and Barbuda	13	100
Argentina		3
Azerbaijan	19	100
Bahamas	72	78
Bangladesh		0
Barbados	41	85
Belarus	79	13
Belize		38
Bosnia and Herzegovina	24	
Botswana	100	100
Brazil		63 [1]
Bulgaria	6	17
Burkina Faso	1	10
Burundi	64	66
Côte d'Ivoire	1	2
Cambodia	26	34
Cameroon		6 [1]
Cape Verde	100	100
Central African Republic	15	27
Chad	4	75
Comoros	15	27
Congo, Republic of the	82	63
Costa Rica	100	100
Croatia	5	5
Cuba	71	94
Czech Republic		59
Democratic Republic of the Congo	0	68
Djibouti		38
Dominica	100	100
Dominican Republic	1	8
Ecuador		63
El Salvador	4	100
Eritrea	26	31
Ethiopia	70	38
Finland	95	100
Gabon	35	35 [1]
Gambia	33	
Germany	50	[1]
Ghana	58	79
Grenada	0	94
Guatemala		2
Guinea		82
Guyana		62
Haiti		13

UNGASS Indicator 11

	2007	2009
Honduras	39	11
India		31
Indonesia	10	
Iran, Islamic Republic of	0	
Jamaica	24	44
Japan	72	100
Kazakhstan		81
Kenya		100
Kyrgyzstan		84
Lao People's Democratic Republic	32	74
Lesotho		88
Liberia		2
Luxembourg		100
Malaysia		0 [1]
Mali		49
Mexico	27	
Moldova	93	0
Montenegro		27
Namibia	79	
Nepal	6	8
Nicaragua	8	88
Niger	8	82
Nigeria	34	23
Oman		100
Pakistan	6	
Papua New Guinea	25	100
Portugal		100 [1]
Romania	64	67
Russian Federation	82	92
Saint Kitts and Nevis		45
Saint Lucia	91	59
Saint Vincent and the Grenadines	87	100
Sao Tome and Principe	100	
Serbia	1	
Seychelles	100	100
Singapore		100
South Africa	96	100
Sudan		13
Suriname		0
Swaziland	51	85
Sweden		100
Tajikistan		5
Timor-Leste		0
Togo	0	0
Turkey	100	
Tuvalu		100

	2007	2009
Ukraine	57	59
Uruguay		90
Uzbekistan		100
Vanuatu		8
Venezuela		100
Viet Nam		34
Yemen		4
Zambia	60	
Zimbabwe	100	100

[1] Data collection started before 2008.

A2

YOUNG WOMEN AND MEN AGED 15-24 WHO CORRECTLY IDENTIFY WAYS OF PREVENTING THE SEXUAL TRANSMISSION OF HIV AND WHO REJECT MAJOR MISCONCEPTIONS

	2003	2005		
	Females 15-24	Survey year	Males 15-24	Females 15-24
Albania	<1			
Algeria				
Angola			43	35
Antigua and Barbuda				
Argentina				
Armenia				
Azerbaijan	2			
Bangladesh				
Barbados				
Belarus				
Belize				
Benin			11	8
Bolivia	22			
Bosnia and Herzegovina				
Botswana	28			
Brazil				
Bulgaria				
Burkina Faso				
Burundi	24	2004	4	4
Côte d'Ivoire	16			
Cambodia	37			
Cameroon	16	2004	34	27
Cape Verde				
Central African Republic	5			
Chad	5			
Chile				
China				
Colombia				
Comoros	10			
Congo, Republic of the				
Costa Rica				
Croatia				
Cuba	52			
Cyprus				
Democratic Republic of the Congo				
Djibouti				
Dominican Republic	33			
Ecuador				
Egypt				
El Salvador				
Equatorial Guinea	4			
Eritrea				
Estonia				
Ethiopia				
Gabon				
Gambia	15			
Georgia				
Germany				
Ghana		2003	40	36
Greece				

UNGASS Indicator 13
MDG 6a indicator

2007				2009				MOST RECENT DHS (OR MICS)[1]		
Survey year	Males 15-24	Females 15-24	Both sexes 15-24	Survey year	Males 15-24	Females 15-24	Both sexes 15-24	Survey year	Males	Females
				2008	22	36				
2006		16	16	2006		16				
2006	25	21	23	2009	32	25	28			
2005			48							
2005	83	89	86	2008			93			
2007	42	34	36					2005	15%	23%
				2006	5	5	5	2006	5%	5%
2005	24	21	22	2008	22	13	18			
				2009	52	49	50			
2007	70	65	68	2009	68	72	70			
2006	26	26	26	2009	47	53	50			
2006	35	16	20	2008	34	34	34	2006	35%	16%
				2008	28	30	24	2008	28%	25%
2006		44								
				2008	39	45	42			
				2008	53	50	52			
2006	18	21	19	2009	21	25	23			
2007	45	46	45	2008	29	21	25	2003	23%	15%
2005		31		2007	45	39	35			
2005	28	18	22	2009	17	13	15	2005	28%	18%
2006	45	49	47	2005	45	50	48	2005	45%	50%
2006		32	32	2004	35	27	30	2004	35%	27%
2005	37	38	38	2009	65	68	67	2005	36%	36%
2006	31	22	24	2006	26	17	20	2006	27%	17%
2004	20	8	11	2004	20	8	11	2004	20%	8%
2007				2009	78	85	82			
2007	50	55	42	2008			85			
								2005		
2005	22	10	13	2009	22	8	14	2009	22%	8%
2006	43	42	42							
2006	16	25	20							
2006	55	61	58	2008						
2007	10	11	10							
2006	29	22	26	2007	21	15	17	2007	21%	15%
				2008	23	18	21			
2007	34	41	37	2007	34	41	37	2007	34%	41%
2006	31	27	29							
				2007	18	5	11			
				2008		27				
				2006			2			
				2008	77	78	77	2002		37%
2007	28	37	32	2007	28	37	32			
2005	33	21	24	2005	33	21		2005	33%	21%
2007	58	60	59	2010	58	53	55			
2005	34	25	29							
2005		4								
2007				2009						
				2008	34	28		2008	34%	28%
2007	27	23	25	2009	27	50	38			

A2

YOUNG WOMEN AND MEN AGED 15-24 WHO CORRECTLY IDENTIFY WAYS OF PREVENTING THE SEXUAL TRANSMISSION OF HIV AND WHO REJECT MAJOR MISCONCEPTIONS

	2003	2005		
	Females 15-24	Survey year	Males 15-24	Females 15-24
Grenada				
Guatemala				
Guinea				
Guinea-Bissau	8			
Guyana	36			
Haiti	14			
Honduras				
India				
Indonesia	7			
Iran, Islamic Republic of				
Jamaica				
Japan				
Kazakhstan				
Kenya	26	2005	80	58
Kyrgyzstan				
Latvia				
Lesotho	18			
Liberia				
Lithuania				
Madagascar		2003	16	19
Malawi	34	2005	36	24
Malaysia				
Mali				
Marshall Islands				
Mauritania				
Mauritius				
Mexico				
Micronesia				
Moldova	19			
Mongolia	32	2005	3	5
Montenegro				
Morocco				
Mozambique				
Myanmar				
Namibia				
Nepal				
Nicaragua				
Niger	5			
Nigeria				
Norway				
Oman				
Palau				
Panama				
Papua New Guinea				
Peru				
Philippines				
Russian Federation				
Rwanda	23			
Saint Kitts and Nevis				
Saint Lucia				
Saint Vincent and the Grenadines				
Samoa				

2007				2009				MOST RECENT DHS (OR MICS)[1]		
Survey year	Males 15-24	Females 15-24	Both sexes 15-24	Survey year	Males 15-24	Females 15-24	Both sexes 15-24	Survey year	Males	Females
2006	43	40	41							
2002	10	9	9	2008	24	22	23			
2007	20	12	16	2009	23	20	22	2005	23%	17%
2006		18		2008	13	13	13			
2005	34	44	39	2008			46	2005	47%	53%
2006	40	32	35	2005	40	34	35	2005	40%	34%
2005	39	89	77	2005		30		2005-06		30%
2006	33	24	28	2009	44	35	40	2005-06	36%	20%
				2007	14	15	14			
				2008	15	17	16			
2004	23	47	35	2008	38	43	40			
2004				2008						
2007	18	20	19	2008	29	32	30			
				2008	55	48		2003	47%	34%
2006	30	33	32	2009	33	37	35			
2007	3	3	3							
				2009				2004	19%	27%
				2006	67	57	62	2007	27%	21%
				2009	50	34	41			
2006	46	45	45	2008	57	54		2003-04	16%	19%
				2006	42	42	42	2004	36%	24%
				2008			23			
2006	22	18	20	2006	59	54	55	2006	22%	18%
2006	8	4	6	2007	39	27	32	2007	39%	27%
				2007	14	5	7			
2004			22							
2002	18	18								
	0			2006-07						
2006	26	27	26	2008	39	42	41	2005	na	na
2005	17	15	16	2009	19	16	18			
2006				2007						
2007				2007				2003	na	12%
2004	39	25	28					2009	34%	36%
				2007	47	48	48			
2007	62	65	63	2006	62	65		2006	62%	65%
2006	44	28	32	2006	44	28	32	2006	44%	28%
2007		81	81					2001		22%
2006	16	13	14	2006	16	13	14	2006	16%	13%
2005	25	20	23	2007	27	21	24	2008	33%	22%
				2008	66	67	65			
				2007	4	4	4			
2006		27		2008	0	27	27			
				2009	12	15	14			
				2007	26	17	22			
2006			55	2008	28	20	23	2007		19%
								2008		21%
2007	33	35	34	2009	35	39	37			
2005	54	51	52	2005	54	51	52	2005	54%	51%
2006			52	2005			52			
2006	61	57	59	2005	61	57	60			
2006	59	40	49	2008	59	40	49			
				2008						

A2

YOUNG WOMEN AND MEN AGED 15-24 WHO CORRECTLY IDENTIFY WAYS OF PREVENTING THE SEXUAL TRANSMISSION OF HIV AND WHO REJECT MAJOR MISCONCEPTIONS

	2003	2005		
	Females 15-24	Survey year	Males 15-24	Females 15-24
Sao Tome and Principe	11			
Senegal				
Serbia				
Seychelles				
Sierra Leone	16			
Singapore				
Solomon Islands				
Somalia		2004	13	8
South Africa	20			
Spain				
Sri Lanka				
Sudan				
Suriname	27			
Swaziland	27			
Sweden				
Tajikistan				
Thailand				
The former Yugoslav Republic of Macedonia				
Timor-Leste				
Togo	20			
Tonga				
Trinidad and Tobago	33			
Tunisia				
Turkey				
Turkmenistan				
Tuvalu				
Uganda	28			
Ukraine				
United Kingdom of Great Britain and Northern Ireland				
United Republic of Tanzania	26			
Uruguay				
Uzbekistan	3			
Vanuatu				
Viet Nam	25			
Zambia	26	2005	46	41
Zimbabwe		2003	56	54

[1] Demographic Health Survey (or Multiple Indicator Cluster Survey).

2007				2009				MOST RECENT DHS (OR MICS)[1]		
Survey year	Males 15-24	Females 15-24	Both sexes 15-24	Survey year	Males 15-24	Females 15-24	Both sexes 15-24	Survey year	Males	Females
2006				2008				2008-09	43%	43%
2005	24	19	22	2005	24	19	23	2005	24%	19%
2006	20	21	20	2006	20	21	20			
2003	59	67	63							
2007				2008	28	17		2008	28%	17%
2007	15	20	17							
				2008						
2006		4	4	2006		4				
				2008	30	27	29			
				2008						
2007	10	7	8	2006		17				
				2006		7	7			
2006		41	41	2006		41				
2007	52	52	52	2006	52	52	52	2007	52%	52%
				2009	59	61	60			
2007	11	11	11	2008	11	9	10			
2006	47	33	40	2006	44	30	37			
2007	19	26	22	2007	18	25	22			
				2008	21	36				
2007	59	44	51	2007	59	44	51			
				2008						
2007			56							
	26	29	27	2009	5	11	8			
2007	35	39	37							
								2000		3%
2005				2007	61	39	48			
2006	38	32	33	2010				2006	38%	32%
2007	39	42	40	2009	40	41	40	2007	43%	45%
				2007			65			
				2008	42	39	40	2007-08	42%	39%
2007	52	48	50	2008	23	44	34			
				2009	14	11	13			
				2008						
2005	50	42	46	2009	44	41	42	2005	50%	42%
2007	37	34	35	2007	37	34	35	2007	37%	34%
2006	46	44	45	2009		53		2005-06	46%	44%

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PERCENTAGE OF YOUNG WOMEN AND MEN AGED 15-24 WHO HAVE HAD SEXUAL INTERCOURSE BEFORE THE AGE OF 15

	2005[1]		
	Survey year	Males	Females
		15-24	15-24
Albania			
Angola		47	24
Antigua and Barbuda			
Argentina			
Armenia			
Azerbaijan			
Bahamas			
Bangladesh			
Barbados		36	26
Belarus			
Belize			
Benin		16	9
Bolivia			
Bosnia and Herzegovina			
Botswana			
Brazil			
Bulgaria			
Burkina Faso			
Burundi		14	6
Côte d'Ivoire	2004	13	15
Cambodia		<1	<1
Cameroon	2004	23	35
Cape Verde			
Central African Republic	2004	10	10
Chad			
Chile			
Colombia			
Comoros			
Congo, Republic of the	2003	10	10
Costa Rica			
Cuba			
Cyprus			
Czech Republic			
Democratic Republic of the Congo			
Djibouti			
Dominican Republic			
Ecuador			
El Salvador			
Eritrea			
Estonia			
Ethiopia		40	42
Fiji			
Finland			
Gabon			
Gambia			
Georgia			
Germany			
Ghana			
Greece			
Grenada			
Guatemala			

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2007[1]				2009[1]				MOST RECENT DHS (OR MICS)[2]		
Survey year	Males 15-24	Females 15-24	Both sexes 15-24	Survey year	Males 15-24	Females 15-24	Both sexes 15-24	Survey year	Males	Females
				2008	1	1				
2006	36	28	32	2009	37	23	30			
2006			25							
2005	27	19	23	2008			19			
2007	11	<1	3					2005	3	0
				2006	1	1		2006	1	1
				2009	70	41	58			
2005	4	1	2	2008	12	31	24	2007	1	
				2009	22	16	20			
2007	8	4	5	2009	7	2	4			
2006	11	6	9	2009	11	5	8			
2006	13	12	12		22	13	17	2006	13	12
				2008	13	7	8	2008	13	7
2006		1		2009	17		18			
				2008	5	3	4			
				2008	41	29	35			
2006	13	7	10	2009	11	5	8			
2007	3	7	6	2008	9	7	8	2003	4	7
2005		3		2007	5	3	4			
2005	15	19	18	2009			21	2005	15	19
2006	<1	1	1	2005	0	1	1	2005	0	1
2006		14		2004	23	35	31	2004	11	20
2005	41	24	30	2009	26	13	26	2005	41	24
2006	20	33	30	2006	36	52	48	2006	13	25
2004	19	39	35	2004	10	26		2004	10	26
2006	12	6	9	2009	13	8	11			
2007			37					2005		13
				1996	16	8	10			
2005	27	24	24		25	20	22	2009	25	20
2006	15	7	11							
2006	33	15	24	2008	32	15	24			
2007	15	1	8							
				2008	3	4	3			
2006	31	23	28	2007	18	18	18	2007	18	18
				2008	11	2	7			
2007	24	33	29	2007	24	15	19	2007	24	15
2004		10								
2003	54	21	27	2008		11				
								2002		13
2007	10	11	10	2007	11	11	11			
2005	2	16	12	2005	2	16		2005	2	16
2007			50							
				2009	27	30	28			
2007	38	14	25	2010	28	8	15	2000	42	24
2006		5								
2005		2	2							
2006	10	12	11	2005	12	14	13			
				2008	4	8		2008	4	8
2007	35	7	24	2009	22	10	16			
2006	32	20	25							
2002	20	9	11	2008	16	8	11	1999		10

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PERCENTAGE OF YOUNG WOMEN AND MEN AGED 15-24 WHO HAVE HAD SEXUAL INTERCOURSE BEFORE THE AGE OF 15

	2005[1]		
	Survey year	Males	Females
		15-24	15-24
Guinea	2005	16	18
Guinea-Bissau			
Guyana			
Haiti			
Honduras			
India			
Indonesia			
Iran, Islamic Republic of			
Jamaica			
Japan			
Kazakhstan			
Kenya	2005	20	17
Kyrgyzstan			
Latvia			
Lebanon			
Lesotho	2004	27	14
Liberia			
Lithuania			
Luxembourg			
Madagascar	2003	22	31
Malawi			
Malaysia			
Mali			
Malta			
Marshall Islands			
Mauritania			
Mauritius			
Mexico			
Micronesia, Federated States of			
Moldova	2005	34	24
Mongolia	2005	3	<1
Montenegro			
Morocco			
Mozambique			
Myanmar			
Namibia			
Nepal			
Nicaragua			
Niger			
Nigeria	2005	5	15
Norway			
Pakistan			
Palau			
Panama			
Papua New Guinea			
Paraguay			
Peru			
Philippines			
Portugal			
Romania			
Russian Federation	2004	17	8
Rwanda			
Saint Kitts and Nevis			

2007[1]				2009[1]				MOST RECENT DHS (OR MICS)[2]		
Survey year	Males 15-24	Females 15-24	Both sexes 15-24	Survey year	Males 15-24	Females 15-24	Both sexes 15-24	Survey year	Males	Females
2007	20	31	25	2009	25	29	26	2005	17	22
2006		22		2008	26	16	21			
2005	30	12	21	2009	19	10	14	2009		
2006	43	15	23	2005	43	15	23	2005	43	15
2005	19	11	13	2006	19	11	13	2005-06		11
2006	2	4	3	2009	2	10	0	2005-06	2	10
				2007	0	0	0	2007		
2005				2007	7	1	4			
2004				2008	57	16	36			
2004	8	9	9							
2007	20	3	9	2008	7	0	4			
2003	29	14	21	2008	22	11		2003	29	14
2007	9	<1	5	2009	6	0	3			
2007	16	9	12							
2004			4	2004			4			
2005	12	6	8					2004	13	6
				2006	8	17	13	2007	9	17
2006	22	10	16	2008	18	7	13			
				2006	18	15	16			
2006	33	39	36	2009	9	18		2003-04	9	15
2006				2004	14	15	15	2004	14	15
				2001			5			
2006	5	25	6	2006	5	25	21	2006	5	25
				2009	7	6	7			
2006	17	10	14	2007	27	14	19	2007	27	14
2007		14	14	2007		14	14			
2004	3	1	2	2008	10	5	7			
2005	4	4	4	2005	4	4	4			
				2006			22			
2006	8	1	4	2008	13	1	7	2005	9	1
2005	3	<1	1	2009	2	0	1			
2007	4	2	3	2007						
2007	8	1	5	2007	8	1	5	1992		0
2004	26	28	28	2009	25	25	25	2009	25	25
				2007	1	1	1			
2007	18	7	12	2006	18	7		2006	18	7
								2006	4	8
2007		14	14					2001		12
2006	8	39	25	2006	5	30		2006	5	30
2005	5	15	10	2007	7	17	12	2008	6	16
				2009	8	10	9			
2006	1	<1								
2006		5		2008	17	15	10			
				2009	30	21	24			
2007	4	4	4	2007	8	7	8			
				2008		64				
2007		6		2008	12	7	8	2007		6
								2008		2
				2008	11	6	8			
2006	17	3	10							
2007	12	3	7	2009	10	3	6			
2005	13	4	7	2005	13	4	7	2005	13	4
2006	36	10	22	2005	36	10	22			

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PERCENTAGE OF YOUNG WOMEN AND MEN AGED 15-24 WHO HAVE HAD SEXUAL INTERCOURSE BEFORE THE AGE OF 15

	2005[1]		
	Survey year	Males	Females
		15-24	15-24
Saint Lucia			
Saint Vincent and the Grenadines	2005	63	37
Samoa			
Sao Tome and Principe			
Senegal			
Serbia			
Sierra Leone			
Singapore			
Solomon Islands			
South Africa			
Spain			
Sri Lanka			
Sudan			
Suriname			
Swaziland			
Sweden			
Switzerland			
Tajikistan			
Thailand		11	7
The former Yugoslav Republic of Macedonia			
Togo			
Trinidad and Tobago			
Tunisia			
Turkmenistan			
Tuvalu			
Uganda			
Ukraine			
United Kingdom of Great Britain and Northern Ireland			
United Republic of Tanzania			
Uruguay			
Uzbekistan			
Viet Nam			
Zambia			
Zimbabwe		9	8

[1] Methodology may vary for individual countries.

[2] Demographic Health Survey (or Multiple Indicator Cluster Survey).

2007[1]				2009[1]				MOST RECENT DHS (OR MICS)[2]		
Survey year	Males 15-24	Females 15-24	Both sexes 15-24	Survey year	Males 15-24	Females 15-24	Both sexes 15-24	Survey year	Males	Females
2006	32	20	26	2005	32	20	26			
2006	31	14	22	2008	31	14	22			
				2008	11	5	9			
2006								2008-09	12	9
2005	12	9	10	2005	12	9	10	2005	12	9
				2006	4	1	2			
2005	25		25	2008	11	25		2008	11	25
2007	3	2	2							
				2008	44	22	29			
2005	5	12	8	2008	11	6	9			
2003	18	11	15	2008	30	18				
2007			3	2006		1				
				2009			41			
2006			8	2006		9				
2007	5	7	6	2006	5	7	6	2007	5	7
2007	15	21	19	2009	19	24	22			
2007	10	7	8	2007	9	7	8			
2006	1	<1	1	2008	1	0	0			
2006	21	5	13	2006	8	1	5			
2007	8	1	5	2007	9	1	5			
2007	13	10	11	2007	13	10	11	1998	0	19
2007			12							
	7	<1	4	2009	52	14	36			
								2000		0
				2007	15	2	7			
2006	12	16	15	2010				2006	12	16
2007	7	3	5	2009	4	0	2	2007	2	1
2001	14	12	13	2001	14	12	13			
2005	10	13	11	2008	10	11	10	2007-08	10	11
2007	25	10	18	2008	44	30	37			
				2009	1	0	1	1996		1
2005	1	<1	<1	2009	0	0	0	2005	0	1
2007	16	14	15	2006	16	13	14	2007	16	14
2006	5	5	5	2007	4	5	5	2005-06	5	5

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PERCENTAGE OF WOMEN AND MEN AGED 15-49 WHO HAVE HAD SEXUAL INTERCOURSE WITH MORE THAN ONE PARTNER IN THE LAST 12 MONTHS

	2003[1]				
	Survey Year	Males	Females	Both sexes	
		15-49	15-49	15-24	25-49
Albania					
Angola					
Antigua and Barbuda					
Armenia	2000	9	<1	4	4
Azerbaijan					
Bangladesh					
Belarus					
Belize					
Benin	1996		2		
Bolivia					
Bosnia and Herzegovina					
Botswana					
Brazil					
Bulgaria					
Burkina Faso	1999	13	1	9	6
Burundi					
Côte d'Ivoire	1998	33	5	19	19
Cambodia	2000		<1		
Cameroon	1998	41	10	25	25
Canada					
Cape Verde					
Central African Republic					
Chad	1997	19	1	11	8
Chile					
Colombia	2000		3		
Comoros					
Congo, Republic of the					
Costa Rica					
Cuba					
Cyprus					
Czech Republic					
Democratic Republic of the Congo					
Djibouti					
Dominican Republic	1996	16	2	4	6
Eritrea					
Estonia					
Ethiopia	2000	7	1	3	5
Gabon	2000	24	14	20	18
Gambia					
Germany					
Ghana					
Greece					
Grenada					
Guatemala					
Guinea	1999	26	4	15	15
Guinea-Bissau					
Guyana					
Haiti	2000	24	1	11	13
Honduras					
Hungary					
India					
Indonesia					

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2005[1]					2007[4]						
Survey Year	Males	Females	Both sexes		Survey Year	Males	Females	Both sexes			
	15-49	15-49	15-24	25-49		15-49	15-49	15-49	15-19	20-24	25-49
					2006	51	25	38	54	46	26
					2006			55			
2005	9	<1	6	3							
					2005	18		18	25	25	14
					2007	33	14	21	27	32	15
					2006	13 [2]	4 [2]	8 [2]			
2001	22	1	7	8	2006	12	35	17	62	30	8
2003	15	1	10	7							
					2006		8		4	11	
2003	15	1	5	9	2007	14	1	7	2	6	9
2005	24	4	12	15	2005	31	4	16	15	18	16
2005	6	<1	2	4	2006	6	<1	3	1	4	3
2004	31	6	15	22	2004	40	8	18	17	20	17
					2006			13			
2005	36	3	19	19	2005	69	43	52	86	71	36
					2006	24 [2]	6 [2]	11 [2]	6	14	
2004	17	1	6	10	2004	17	1	8	4	9	10
					2006	12	2	7	6	14	6
2005		3			2007		4 [3]			35 [3]	
					2003	24	4	11			9
2005	24	7	15	16	2005	28	8	14	19	16	13
					2006	37	35	39			
					2006	35	10	23	22	29	22
					2007	25	6	15			
					2007	22	4	9	10	11	9
2002	23	2	13	13	2007	30	4	17	22	25	16
					2007	23	19	21	17	26	
2005	2	<1	1	2	2005	3	<1	2	1	2	2
					2007	51	38	43	53	36	43
					2006		1 [2]				
					2007	35	22	29			
2003	10	1	4	7	2006	22 [2]	40 [2]	26 [2]			
					2007	33	8	20	22	48	18
					2006	30	13	21	19	30	16
					2002	13		13	34	19	8
2005	25	2	11	14	2005	25	2	8	6	10	8
					2006				5	7	
2005	7	1	6	3	2005	9	1	5			
2005	23	1	11	13	2006	23	1	12	7	16	13
2006		1			2005	16	1	4			
2006	1	<1	1	1	2006	8	2	5	6	9	4

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PERCENTAGE OF WOMEN AND MEN AGED 15-49 WHO HAVE HAD SEXUAL INTERCOURSE WITH MORE THAN ONE PARTNER IN THE LAST 12 MONTHS

	2003[1]				
	Survey Year	Males	Females	Both sexes	
		15-49	15-49	15-24	25-49
Iran, Islamic Republic of					
Jamaica					
Japan					
Kazakhstan					
Kenya	1998	24	3	16	11
Kyrgyzstan					
Lebanon					
Lesotho					
Liberia					
Lithuania					
Madagascar					
Malawi	2000	15	1	6	9
Mali	1996	13			
Malta					
Marshall Islands					
Mauritius					
Mexico					
Micronesia, Federated States of					
Moldova					
Mongolia					
Morocco					
Mozambique					
Myanmar					
Namibia	2000	16	2	9	10
Nepal	2001	3			
Nicaragua	2001		1		
Niger	1998	10	1	7	5
Nigeria					
Palau					
Panama					
Papua New Guinea					
Paraguay					
Peru	1996	23	<1	4	9
Philippines					
Poland					
Portugal					
Russian Federation					
Rwanda	2000	2	<1	1	2
Saint Kitts and Nevis					
Saint Lucia					
Saint Vincent and the Grenadines					
Sao Tome and Principe					
Senegal					
Serbia					
Seychelles					
Sierra Leone					
Singapore					
Solomon Islands					
South Africa					
Spain					
Sri Lanka					
Sudan					

2005[1]					2007[4]						
Survey Year	Males	Females	Both sexes		Survey Year	Males	Females	Both sexes			
	15-49	15-49	15-24	25-49		15-49	15-49	15-49	15-19	20-24	25-49
					2004	48	11	29			
					2007	25	5	15	9	23	15
2003	12	2	7	7	2003	12	2	5	3	6	5
					2007	28	2	15	10	21	
					2004	24	4	17			
2004	21	8	11	16	2005	30	11	16			
					2007	43	26	41	<1	<1	41
2004	17	3	11	9	2004	20	3	7			
2004	9	1	4	6	2005	1	1	1	2	1	1
2001	17	1	5	11	2006	23	2	5	5	4	1
					2006	23	18	21	19	30	
					2004	9	1	5	4	5	6
					2003	8				6	9
2005	11	1	9	4	2007	16	2	8	11	19	5
					2005	54		54			
					2007	37	2	19	14	27	
2003	30	5	18	17	2004	52	24	29	60	34	19
					2007	16	3	9	10	15	7
					2007		2	2	1	2	2
					2006	9	1	2	5	4	2
2003	15	2	5	10	2005	19	2	10	3	10	14
					2006		9		36	13	5
					2007	13	2	8	6	11	7
2000		<1			2006	33	12				
2003	6										
					2005	8	5	7			
					2006	20	9	15	16	26	13
2005	3	<1	1	2	2005	3	<1	2	<1	1	2
					2006	53	19	36			
					2007	42	25	35			
					2006	25	10	17	13	32	9
2005	13	1	4	10	2005	25	4	8	7	11	7
					2006	42	11	26	32	24	<1
					2003	23	11	17			
					2005	9	36	21			
					2007	7	2	4	2	10	4
					2005	3	18	10	18	15	8
					2003	27	13	20			
					2007	3	<1	2	1	1	3

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PERCENTAGE OF WOMEN AND MEN AGED 15-49 WHO HAVE HAD SEXUAL INTERCOURSE WITH MORE THAN ONE PARTNER IN THE LAST 12 MONTHS

	2003[1]				
	Survey Year	Males	Females	Both sexes	
		15-49	15-49	15-24	25-49
Suriname					
Swaziland					
Sweden					
Switzerland					
Tajikistan					
Thailand					
Timor-Leste					
Togo	1998	21	3	13	13
Tonga					
Trinidad and Tobago					
Tunisia					
Turkey					
Turkmenistan	2000		<1		
Tuvalu					
Uganda	1995	8	1	5	4
Ukraine					
United Arab Emirates					
United Kingdom of Great Britain and Northern Ireland					
United Republic of Tanzania	1999	29	9	17	20
United States of America					
Uruguay					
Vanuatu					
Viet Nam					
Zambia	1996	27	4	18	12
Zimbabwe	1999	13	2	6	8

[1] Data provided by MEASURE DHS.
[2] 15-24 years.
[3] 25-64 years only.
[4] Methodology may vary for individual countries.
[5] Demographic Health Survey (or Multiple Indicator Cluster Survey).

2005[1]					2007[4]						
Survey Year	Males	Females	Both sexes		Survey Year	Males	Females	Both sexes			
	15-49	15-49	15-24	25-49		15-49	15-49	15-49	15-19	20-24	25-49
					2006			3			
					2007	14	2	13	15	17	15
					2007	23	23	23	33	34	11
					2007	18	10	14	25	26	10
					2006			6	3	9	
					2006	18	1	9	24	18	7
					2007	26	6	16	10	22	17
					2007	94	79	85			
					2007		15	15	19	20	11
	2001	18	2	6	12	2006	21	2	12	3	9	16
					2007	21	7	14	18	23	11
					2001	25	15	20	30	35	16
	2004	23	3	10	15	2006	20	5	13	46	
					2007	23	11	17	28	35	11
	2005	14	2	6	9	2005	1	<1	<1	<1	1	<1
	2002	21	2	10	13	2007	14	1	7	3	7	9
	2006	9	1	4	6	2006	14	1	7	7	9	6

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PERCENTAGE OF WOMEN AND MEN AGED 15-49 WHO HAVE HAD SEXUAL INTERCOURSE WITH MORE THAN ONE PARTNER IN THE LAST 12 MONTHS

	2009[4]					
	Survey Year	Males	Females	Males		
		15-49	15-49	15-19	20-24	25-49
Albania	2008	5	0	2	15	
Angola	2009	25	3	10	31	27
Antigua and Barbuda						
Armenia						
Azerbaijan	2006	6		3	16	5
Bangladesh	2005	12		39	28	9
Belarus	2009	22	10	28	17	18
Belize	2009	15	5	11	27	14
Benin	2006	21	1	5	18	27
Bolivia	2008	12		10	21	11
Bosnia and Herzegovina	2009	64				
Botswana	2008	16	7	5	26	16
Brazil	2008	76	57	66	74	78
Bulgaria	2009	29	12	27	43	
Burkina Faso	2008	27	2	24	26	27
Burundi	2007					
Côte d'Ivoire	2005	31	5	32	33	30
Cambodia	2005	6	0	2	9	7
Cameroon	2004	40	9	35	45	40
Canada						
Cape Verde	2009	54	42	93	80	36
Central African Republic	2006	21	6	12	29	
Chad	2004	17	1	7	20	21
Chile	2009	21	7	16	29	21
Colombia	2005		3			
Comoros	2003	24	4			
Congo, Republic of the	2009	29	7	9	34	33
Costa Rica						
Cuba	2008	34	12			
Cyprus						
Czech Republic	2008	29	21	47	36	26
Democratic People's Republic of Korea						
Democratic Republic of the Congo	2007	17	3	10	19	18
Djibouti	2008			70	90	
Dominican Republic	2007	30	4	33	43	27
Equatorial Guinea	2006					
Eritrea						
Estonia	2007	23	21	14	31	
Ethiopia	2005	3	0	0	2	4
Gabon	2010	57	33	54	63	55
Gambia						
Germany	2009	13	7	23	30	10
Ghana	2008	11	1	3	10	15
Greece	2009	32	22	50	35	28
Grenada						
Guatemala	2008	12	1	13	18	10
Guinea	2008					
Guinea-Bissau	2008	37	10	31	41	41
Guyana	2009	10	1	8	18	9
Haiti	2005	23	1	13	29	26

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2009[4]			MOST RECENT DHS (OR MICS)[5]		
Females			Survey year	Males	Females
15-19	20-24	25-49		15-49	15-49
0	0				
4	4	2			
			2005	9	0
			2006	6	0
			2007		
9	26	5			
4	6	5			
1	1	0	2006	21	1
			2008	12	
4	13	7			
56	63	55			
10	14				
6	3	2	2003	15	1
7	6	3	2005	24	4
0	0	0	2005	6	0
20	11	6	2004	31	6
71	62	27	2005	36	3
5	7		2006		
1	1	1	2004	17	1
5	10	6			
4	6	2	2005		3
9	10	5	2009	29	7
43	28	18			
3	4	3	2007	17	3
56	85				
10	7	2	2007	24	3
			1995	6	
19	22				
0	0	0	2005	2	0
34	44	28	2000	46	14
14	17	5			
1	2	1	2008	11	1
28	27	17			
1	1	1			
			2005	25	2
9	13	9			
1	2	1	2009		1
1	2	1	2005	23	1

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PERCENTAGE OF WOMEN AND MEN AGED 15-49 WHO HAVE HAD SEXUAL INTERCOURSE WITH MORE THAN ONE PARTNER IN THE LAST 12 MONTHS

	2009[4]					
	Survey Year	Males	Females	Males		
		15-49	15-49	15-19	20-24	25-49
Honduras	2006	19	1	32	29	14
Hungary	2009	85	25			
India	2009	9	3	1	5	1
Indonesia	2007	0		0	0	0
Iran, Islamic Republic of	2008	12	1	11	14	
Jamaica	2008	62	17	50	81	61
Japan	1999	22	7			
Kazakhstan	2008	22	4	16	31	21
Kenya	2008	9	1	4	12	11
Kyrgyzstan	2009	22	1	16	32	
Lebanon	2004					
Lesotho						
Liberia	2006	22	7	16	27	21
Lithuania	2008	26	8			
Madagascar	2009			14	24	15
Malawi	2004	9	1	5	9	11
Mali	2006	25	6	93	64	20
Malta	2009	7	3	11	23	8
Marshall Islands	2007	32	15	59	47	16
Mauritius	2008	23	3	41	26	
Mexico						
Micronesia, Federated States of	2006	45	18			
Moldova	2009	18	2	17	29	15
Mongolia						
Morocco	2007	37	2			
Mozambique	2009	20	3	10	24	22
Myanmar	2006	13	0	1	11	17
Namibia	2006	11	2	6	17	
Nepal						
Nicaragua	2007		2			
Niger	2006	9	1	76	27	5
Nigeria	2007	19	4	6	18	26
Palau	2008		9			
Panama	2009	45	41	31	54	48
Papua New Guinea	2007	37	1	62	38	34
Paraguay	2008		6			
Peru	2008	14	1	18	25	9
Philippines						
Poland						
Portugal	2007	27	9	45	43	23
Russian Federation	2008	21	9	32	36	16
Rwanda	2005	3	0	0	1	4
Saint Kitts and Nevis	2005					
Saint Lucia	2007	42	25			
Saint Vincent and the Grenadines	2008	24	10	16	52	13
Sao Tome and Principe	2008	22	1	21	23	
Senegal	2005	13	1	4	9	19
Serbia	2006	11	1	11	25	8
Seychelles						
Sierra Leone	2008	21	5	12	23	34
Singapore						

2009[4]			MOST RECENT DHS (OR MICS)[5]		
Females			Survey year	Males	Females
15-19	20-24	25-49		15-49	15-49
1	1	0	2005-06		1
0	0	0	2005-06	1	0
1	1				
17	23	14			
2	8	4			
1	2	1	2003	12	
0	2				
			2004	21	8
12	8	6	2007	18	6
3	2	2	2003-04	17	3
1	1	1	2004	9	1
21	9	2	2006	15	1
3	4	2			
31	22	7	2007	7	3
2	3				
3	5	1	2005	11	1
4	4	2	2009		3
0	0	0			
1	4		2006	11	2
			2006	2	0
1	2		2001		1
1	1	1	2006	12	1
3	5	4	2008	10	1
36	13	5			
23	41	46			
0	0	1			
7	8	4			
1	3	1	2004-08		1
			2003	6	
26	22	7			
14	13	8			
0	0	0	2000	2	0
10	15	5			
3	2			18	2
1	1	2	2005	13	1
1	4	1			
7	6	12	2008	16	4

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PERCENTAGE OF WOMEN AND MEN AGED 15-49 WHO HAVE HAD SEXUAL INTERCOURSE WITH MORE THAN ONE PARTNER IN THE LAST 12 MONTHS

	2009[4]					
	Survey Year	Males	Females	Males		
		15-49	15-49	15-19	20-24	25-49
Solomon Islands	2008	91	24	71	82	
South Africa	2008	19	4			
Spain	2008					
South Africa	2008	19	4			
Sri Lanka						
Suriname	2006		1			
Swaziland	2006	14	1	26	30	20
Sweden	2009	42	51	37	47	
Switzerland	2007	18	10			
Tajikistan	2008	15	5	8	20	16
Thailand	2006	18	1			
Timor-Leste	2008	92				
Togo	2007	26	6	15	31	27
Tonga	2008			19		
Trinidad and Tobago						
Tunisia	2009	37	14			
Turkey						
Turkmenistan						
Tuvalu	2007	5	1	13	18	1
Uganda	2010	29	4			
Ukraine	2009	23	7	18	41	20
United Arab Emirates						
United Kingdom of Great Britain and Northern Ireland	2008	15	8		25	13
United Republic of Tanzania	2008	18	3	4	18	24
United States of America						
Uruguay	2007	23	11	40	52	14
Vanuatu	2008	53	27			
Viet Nam	2009	2	0	1	5	
Zambia	2007	14	1	5	14	18
Zimbabwe	2007	28	9	18	34	29

[1] Data provided by MEASURE DHS.
[2] 15-24 years.
[3] 25-64 years only.
[4] Methodology may vary for individual countries.
[5] Demographic Health Survey (or Multiple Indicator Cluster Survey).

2009[4]			MOST RECENT DHS (OR MICS)[5]		
Females			Survey year	Males	Females
15-19	20-24	25-49		15-49	15-49
45	32	6			
4	4	2	2007	14	2
49	53				
1	3	7			
24	18	7			
7	11	4	1998	21	3
10					
			2000		0
0	1	1			
			2006	21	2
3	10	7	2007	13	2
	24	5			
2	3	3	2007-08	18	3
16	16	9			
0	0		2005	1	0
2	1	1	2007	14	1
8	12	8	2005-06	9	1

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PERCENTAGE OF WOMEN AND MEN AGED 15-49 WHO HAD MORE THAN ONE SEXUAL PARTNER IN THE PAST 12 MONTHS REPORTING THE USE OF A CONDOM DURING THEIR LAST SEXUAL INTERCOURSE

	2003[1]				
	Survey Year	Males	Females	Both sexes	
		15-49	15-49	15-24	25-49
Albania					
Angola					
Antigua and Barbuda					
Argentina					
Armenia	2000	32			
Azerbaijan					
Bangladesh					
Belarus					
Belize					
Benin					
Bolivia					
Bosnia and Herzegovina					
Botswana					
Brazil					
Bulgaria					
Burkina Faso	1999	55	36	56	
Burundi					
Côte d'Ivoire	1998	45	23	53	34
Cambodia					
Cameroon	1998	23	13	27	17
Canada					
Cape Verde					
Central African Republic					
Chad	1997	20	10	22	17
Chile					
Colombia	2000		22		
Congo, Republic of the					
Costa Rica					
Cuba					
Cyprus					
Democratic Republic of the Congo	1996	9	19	7	10
Djibouti					
Dominican Republic					
El Salvador					
Equatorial Guinea					
Eritrea					
Estonia					
Ethiopia	2000	20	11	43	10
Gabon	2000	40	26	41	29
Germany					
Ghana					
Greece					
Grenada					
Guatemala					
Guinea	1999	24	9	31	17
Guinea-Bissau					
Guyana					
Haiti	2000	21	30	30	16
Honduras					
Hungary					
India					
Indonesia					
Iran, Islamic Republic of					

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2005[1]					2007[6]						
Survey Year	Males	Females	Both sexes		Survey Year	Males	Females	Both sexes			
	15-49	15-49	15-24	25-49		15-49	15-49	15-49	15-19	20-24	25-49
					2005						
					2006	46	18	32	26	40	31
					2006			87			
					2005	48	44	46	48	44	
2005	58										
					2006						
					2005	35		35	42	31	36
					2007	62	60	61	76	68	49
					2006		72		73	71	
2003	43	44	68	33	2007	36	51	38	69	61	30
					2004	55	45	49			
2005	38	41	59	26	2005	52	34	44	47	45	42
2005	41				2006	40	12	39	83	73	23
2004	38	35	53	28	2006	55	41	48	61	62	43
						23	16	19			
2005	69	57	78	59	2005	72	46	58	70	61	47
					2006						
2004	20	7			2004	20	7				
					2006	30	18	28	32	34	25
2005		31									
2005	30	23			2005	43	21	30	24	29	35
					2006	15	11	13			12
					2006	41	33	39	72	53	30
					2007	63	53	61			
2002	35	33	45	27	2007	42	33	37	54	44	34
					2007	64	55	61	61	64	
2005	9				2005	52	24	43	38	47	34
					2007	72 [2]	70 [2]	71 [2]	65 [2]	73 [2]	71 [2]
					2007			58			
2003	22	33	39		2006	33	54				
					2007	71	55	67	61	58	75
					2006	68	52		61	63	
					2002				47	58	50
2005	24	20	38	17	2005	32	26	31	35	43	27
2005	53	56			2005	53	56	53			
2005	34	21	49	23	2006	34	21	33	41	53	23
2006		27			2006	38	32	37			
2006	23	12			2006	67	62	66	61	68	66

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PERCENTAGE OF WOMEN AND MEN AGED 15-49 WHO HAD MORE THAN ONE SEXUAL PARTNER IN THE PAST 12 MONTHS REPORTING THE USE OF A CONDOM DURING THEIR LAST SEXUAL INTERCOURSE

	2003[1]				
	Survey Year	Males	Females	Both sexes	
		15-49	15-49	15-24	25-49
Jamaica					
Japan					
Kazakhstan					
Kenya	1998	36	18	38	30
Kyrgyzstan					
Lebanon					
Lesotho					
Liberia					
Lithuania					
Madagascar					
Malawi	2000	14	15	26	7
Mali	1996	34			
Malta					
Marshall Islands					
Mauritania					
Mauritius					
Mexico					
Micronesia, Federated States of					
Moldova					
Mongolia					
Morocco					
Mozambique					
Myanmar					
Namibia	2000	65	45	72	56
Nepal					
Nicaragua	2001		19		
Niger	1998	26	28		
Nigeria					
Palau					
Panama					
Papua New Guinea					
Paraguay					
Peru	2000		15		
Philippines					
Portugal					
Russian Federation					
Rwanda	2000	28	30		
Saint Kitts and Nevis					
Saint Lucia					
Saint Vincent and the Grenadines					
Samoa					
Sao Tome and Principe					
Senegal					
Serbia					
Sierra Leone					
Singapore					
South Africa					
Spain					
Suriname					
Swaziland					
Sweden					
Switzerland					

2005[1]					2007[6]						
Survey Year	Males	Females	Both sexes		Survey Year	Males	Females	Both sexes			
	15-49	15-49	15-24	25-49		15-49	15-49	15-49	15-19	20-24	25-49
					2004	67	53	64			
					2007	82	82	82	88	93	77
2003	33	12	47	17	2003	33	12	30	48	47	17
					2007	81	75	80	85	78	
					2004	72	67	72			
2004	41	19	47	26	2004	41	19	34	49	40	26
					2007	46	20	44			44
2004	9	2	12	6	2004	13	5	8	8	8	8
2004	20	16	32	13	2004	47	30	38	35	47	33
2001	16	14	27	13	2006	38	17	20	19	29	34
					2006	19	15	18	17	19	
					2007	10		10			
					2004	44	46	44	50	43	43
					2003	20				78	14
2005	45	22	56	28	2007	48	60	49	45	50	52
					2005	34		34			
					2007	61	75	62	63	61	
2003	19	14	38	10	2003	19	14	18	28	28	10
					2007	74	66	68	79	76	60
					2006	54					
					2001		19				
					2006	7	8				
2003	22	13	34	17	2005	62	44	56	44	56	62
					2006		23				60
					2007	45	26	43	50	49	38
					2006			48	59	43	
2003	22				2003	22					
2005	8	14			2005	8	14	8			
					2006			67			
					2007	48	39	45			
					2006	62	52	59	59	59	
					2006		57 [3]		60	59	
2005	31	21	61	22	2005	62	37	52	39	51	59
					2006				73	78	
					2007	11	26	37			
					2007	51	0	42	50	14	51
					2005	67	47	64	80	72	56
					2003	50	42	46			
					2006			49			
					2007	56	57	56		62	51
					2007	62	52	58	83	61	48

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PERCENTAGE OF WOMEN AND MEN AGED 15-49 WHO HAD MORE THAN ONE SEXUAL PARTNER IN THE PAST 12 MONTHS REPORTING THE USE OF A CONDOM DURING THEIR LAST SEXUAL INTERCOURSE

	2003[1]				
	Survey Year	Males	Females	Both sexes	
		15-49	15-49	15-24	25-49
Tajikistan					
Thailand					
Timor-Leste					
Togo	1998	33	21	42	25
Tonga					
Tunisia					
Turkey					
Tuvalu					
Uganda	1995	18	8	24	9
Ukraine					
United Kingdom of Great Britain and Northern Ireland					
United Republic of Tanzania	1999	22	16	25	17
Uruguay					
Viet Nam					
Zambia	1996	31	18	36	23
Zimbabwe	1999	40	46	56	30

[1] Data provided by MEASURE DHS.
[2] data from two cities only.
[3] female is 15-24 years only.
[4] No reference 4.
[5] No reference 5.
[6] Methodology may vary for individual countries.
[7] Demographic Health Survey (or Multiple Indicator Cluster Survey).

2005[1]					2007[6]						
Survey Year	Males	Females	Both sexes		Survey Year	Males	Females	Both sexes			
	15-49	15-49	15-24	25-49		15-49	15-49	15-49	15-19	20-24	25-49
					2006			65	53	69	
					2006	53	14	51	63	49	50
					2007	73	69	73	72	76	71
					2007		58	53	52	71	45
2001	24	25			2006	42	41	42		30	41
					2007	75	61	72	77	64	72
					2001	10	5	7	15	15	5
2004	29	21	37	23	2005	50	38	44	38	41	
					2007	69	65	68	76	81	56
2005	58					1	0	0	0	1	0
2001	27	21	40	20	2007	50	37	46	39	49	48
2006	36	41	57	24	2006	71	47	64	50	67	68

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PERCENTAGE OF WOMEN AND MEN AGED 15-49 WHO HAD MORE THAN ONE SEXUAL PARTNER IN THE PAST 12 MONTHS REPORTING THE USE OF A CONDOM DURING THEIR LAST SEXUAL INTERCOURSE

	2009[6]					
	Survey Year	Males	Females	Males		
		15-49	15-49	15-19	20-24	25-49
Albania	2008	40			50	
Angola	2009	42	45	48	56	35
Antigua and Barbuda						
Argentina	2008					
Armenia						
Azerbaijan	2006	26			26	24
Bangladesh	2005	33				
Belarus	2009	70	68	80	71	54
Belize	2009	66	56	81	70	61
Benin	2006	17	21	49	43	11
Bolivia	2008	35		44	39	31
Bosnia and Herzegovina	2009					
Botswana	2008	82	80	83	88	79
Brazil	2008	43	34	76	58	33
Bulgaria	2009	71	64	71	70	
Burkina Faso	2008	69	78	93	94	60
Burundi	2007					
Côte d'Ivoire	2005	38	41	64	61	25
Cambodia	2005	41	9	86	72	24
Cameroon	2004	38	35	57	56	28
Canada						
Cape Verde	2009	75	59	83	75	66
Central African Republic	2006	60	41			
Chad	2004	16	7	30	18	14
Chile	2009	55	38	57	55	48
Colombia	2005		31			
Congo, Republic of the	2009	28	29	49	37	24
Costa Rica						
Cuba	2008	48	38			
Cyprus						
Democratic People's Republic of Korea						
Democratic Republic of the Congo	2007	16	7	28	19	12
Djibouti	2008			33	70	
Dominican Republic	2007	45	35	72	57	35
El Salvador	2008		81			
Equatorial Guinea	2006					
Eritrea						
Estonia	2007	61	42	66	59	
Ethiopia	2005	9			24	5
Gabon	2010	35	22	30	40	34
Germany	2009	64	49	74	65	61
Ghana	2008	26		24	49	22
Greece	2009	23	17	33	25	20
Grenada						
Guatemala	2008	62	24	79	68	47
Guinea	2008					
Guinea-Bissau	2009	64	55	65	62	65
Guyana	2009	65	48	86	70	58
Haiti	2005	34	21	42	56	23
Honduras	2006		27			
Hungary	2009	100		5	18	77

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2009[6]			MOST RECENT DHS (OR MICS)[7]		
Females			Survey year	Males	Females
15-19	20-24	25-49		15-49	15-49
47	51	42			
			2005	58	
			2006	26	0
69	77	46			
58	77	50			
20	35	10	2006	17	21
			2008	35	
85	83	78			
52	37	30			
60	65				
76	86	75	2003	43	44
45	45	35	2005	38	41
0	100	2	2005	41	8
47	37	27	2004	38	35
78	60	41	2005	69	57
			2006		
			2004	16	7
49	34	31			
35	36	27	2005		31
24	26	33	2009	28	29
7	10	7	2007	16	8
47	90				
37	31	36	2007	45	35
83	79	81			
			1995	54	
56	33				
			2005	9	
24	30	18	2000	40	26
58	51	45			
			2008	26	18
23	24	11			
13	43	23			
			2005	24	20
57	46	66			
		48	2009	65	48
31	18	19	2005	34	21
34	17	26	2005-06		27

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PERCENTAGE OF WOMEN AND MEN AGED 15-49 WHO HAD MORE THAN ONE SEXUAL PARTNER IN THE PAST 12 MONTHS REPORTING THE USE OF A CONDOM DURING THEIR LAST SEXUAL INTERCOURSE

	2009[6]					
	Survey Year	Males	Females	Males		
		15-49	15-49	15-19	20-24	25-49
India	2009	79		100	70	100
Indonesia	2007	60			100	58
Iran, Islamic Republic of	2008	55	63	52	59	
Jamaica	2008	65	52	90	65	52
Japan	2008			77		
Kazakhstan	2008	72	64	83	84	65
Kenya	2008	37	32	69	67	20
Kyrgyzstan	2009	81	62	87	77	
Lebanon	2004					
Lesotho	2009			60	60	
Liberia	2006	23	12	29	28	21
Lithuania	2008	65	60			
Madagascar	2008			3	5	3
Malawi	2004	20	16	31	36	14
Mali	2006	39	17	31	40	43
Malta	2009	80	72	85	85	76
Marshall Islands	2007	20	10	21	25	14
Mauritania						
Mauritius	2008	37	15	47	26	
Mexico						
Micronesia, Federated States of	2006					
Moldova	2009	52	38	81	59	40
Mongolia						
Morocco	2007	61	75			
Mozambique	2009	22	23	41	35	15
Myanmar	2006	45	0	67	71	40
Namibia	2006	74	66	84	81	
Nepal						
Nicaragua	2007		19			
Niger	2006	7	8			4
Nigeria	2007	66	39	94	81	49
Palau	2008	0	23	0	0	0
Panama	2009	25	9	47	32	18
Papua New Guinea	2008	40	0	38	43	39
Paraguay	2008		5			
Peru	2008	72	25	73	80	65
Philippines						
Portugal	2007	55	46	74	71	47
Russian Federation	2008	52	45	62	64	43
Rwanda	2005	25	19			25
Saint Kitts and Nevis	2005					
Saint Lucia	2007	48	39			
Saint Vincent and the Grenadines	2008			62	62	
Samoa	2008					
Sao Tome and Principe	2008	60	48	65	63	
Senegal	2005	62	37			
Serbia	2006	71	61	83	77	64
Sierra Leone	2008	15	7	14	34	
Singapore						
South Africa	2008	77	68			
Spain	2008					

2009[6]			MOST RECENT DHS (OR MICS)[7]		
Females			Survey year	Males	Females
15-19	20-24	25-49		15-49	15-49
			2005-06	23	12
60	67				
45	64	48			
76					
71	70	59			
	36		2003	33	12
100	56				
39	48		2004	41	19
11	22	9	2007	22	14
4	2	8	2003-04	9	2
16	23	9	2004	20	16
14	21	17	2006	12	8
80	50	75			
9	7	14			
17	14				
60	14	50	2005	45	22
31	32	15	2009	22	24
	0	0			
77	46		2006	74	66
			2006	30	
12	30	16	2001		19
		8	2006	7	8
69	37	28	2008	33	23
0	0	60			
17	14	7			
		0			
5	8	4			
82	32	8	2007		31
			2008		
65	55	39			
56	50	41			
			2005	8	14
55	50				
		59			
53	54		2008-09	33	28
			2005	32	21
67	71	53			
11	14	4	2008	15	7

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PERCENTAGE OF WOMEN AND MEN AGED 15-49 WHO HAD MORE THAN ONE SEXUAL PARTNER IN THE PAST 12 MONTHS REPORTING THE USE OF A CONDOM DURING THEIR LAST SEXUAL INTERCOURSE

	2009[6]					
	Survey Year	Males	Females	Males		
		15-49	15-49	15-19	20-24	25-49
Suriname	2006		80			
Swaziland	2006	56	55	74	64	50
Sweden	2009	36	27	33	38	
Switzerland	2007	99	87			
Tajikistan	2008	60	19	74	61	55
Thailand	2006	53	14			
Timor-Leste	2008	25				
Togo	2007	73	69	73	77	72
Tonga	2008			22		
Tunisia	2009					
Turkey						
Tuvalu	2007	45				
Uganda	2010	16	9			
Ukraine	2009	60	61	84	73	51
United Kingdom of Great Britain and Northern Ireland	2008	82	75			
United Republic of Tanzania	2008	16	7	10	27	15
Uruguay	2007	69	65	78	80	56
Viet Nam						
Zambia	2006	27	33	50	40	23
Zimbabwe	2005	36	41	71	56	22

[1] Data provided by MEASURE DHS.
[2] data from two cities only.
[3] female is 15-24 years only.
[4] No reference 4.
[5] No reference 5.
[6] Methodology may vary for individual countries.
[7] Demographic Health Survey (or Multiple Indicator Cluster Survey).

2009[6]			MOST RECENT DHS (OR MICS)[7]		
Females			Survey year	Males	Females
15-19	20-24	25-49		15-49	15-49
52	56	55	2007	56	55
26	29				
20	42	15			
63	49	50			
69	72	64	1998	33	21
19					
			2006	20	24
100	75	54	2007	46	48
10	8	6	2007-08	22	21
71	86	56			
			2005	58	
			2007	28	33
		43	2005-06	36	41

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PERCENTAGE OF YOUNG PEOPLE AGED 15-24 YEARS WHO SAY THEY USED A CONDOM THE LAST TIME THEY HAD SEX WITH A NON-MARITAL, NON-COHABITING PARTNER, OF THOSE WHO HAVE HAD SEX WITH SUCH A PARTNER IN THE LAST 12 MONTHS.

	Time Period	Males	Females
		15-24	15-24
Albania	2008-2009	55	25
Armenia	2005	86	
Armenia	2000	44	
Azerbaijan	2006	31	
Belize	2006		50
Benin	2006	45	28
Benin	2001	35	19
Benin	1996		9
Bolivia	2008	49	
Bolivia	2003	37	20
Bosnia and Herzegovina	2006	–	71
Botswana	2001	88	75
Botswana	1996	85	
Brazil	2004		
Brazil	1996	59	32
Bulgaria	2005	70	57
Burkina Faso	1998–1999	56	41
Burkina Faso	2006		64
Burkina Faso	2003	67	54
Burundi	2005		25
Cambodia	2005	84	
Cameroon	2006		62
Cameroon	2004	57	47
Cameroon	1998	31	16
Cape Verde	2005	79	56
Central African Republic	2006	60	41
Chad	2004	25	17
Colombia	2005		36
Colombia	2000		30
Congo	2005	38	20
Congo, Democratic Republic of the	2007	27	17
Côte d'Ivoire	1998–1999	56	25
Côte d'Ivoire	2005	53	39
Djibouti	2005	51	26
Dominican Republic	2007	70	44
Dominican Republic	2002	52	29
Dominican Republic	1996	48	12
Eritrea	1995	81	
Ethiopia	2005	50	28
Ethiopia	2000	31	17
Gabon	2000	48	33
Gambia	2006		54
Gambia	2000		
Ghana	2008	46	28
Ghana	2006	56	42
Ghana	2003	52	33
Guinea	2005	37	26
Guinea	1999	32	17
Guinea-Bissau	2006		39
Guyana	2005	68	62
Haiti	2005–2006	43	29
Haiti	2000	30	19
Honduras	2005-2006		24

Supplemental data obtained by UNICEF through the Multiple Indicator Cluster Survey and Demographics Health Survey programmes.
MDG 6a indicator

	Time Period	Males	Females
		15-24	15-24
India	2005–2006	37	22
India	2001	59	51
Kazakhstan	1999	65	32
Kenya	2008-2009	64	40
Kenya	2003	47	25
Kenya	1998	43	14
Kyrgyzstan	2006		56
Lesotho	2004	48	50
Liberia	2007	22	14
Madagascar	2003-2004	12	5
Malawi	2006	58	40
Malawi	2004	47	35
Malawi	2000	38	32
Mali	1995–1996	31	
Mali	2006	36	17
Mali	2001	30	14
Marshall Islands	2007	22	9
Moldova	2008	76	60
Moldova	2005	63	44
Montenegro	2006		66
Mozambique	2008		44
Mozambique	2003	33	29
Namibia	2006-2007	81	64
Namibia	2000	69	48
Nauru	–	17	10
Nepal	2006	78	
Nepal	2001	52	
Nicaragua	2001		17
Niger	2006	37	18
Niger	1998	30	7
Nigeria	2008	49	36
Nigeria	2007		39
Nigeria	2003	46	24
Peru	2004-2006		34
Peru	2004–2005		32
Peru	2000		19
Philippines	2008		13
Philippines	2003	25	11
Rwanda	2005	40	26
Rwanda	2000	55	23
Sao Tome and Principe	2008-2009	63	54
Sao Tome and Principe	2006		56
Senegal	2005	52	36
Serbia	2006		74
Sierra Leone	2008	22	10
Sierra Leone	2005		20
Solomon Islands	2007	26	17
South Africa	2003	72	52
South Africa	1998		20
Suriname	2006		49
Swaziland	2006–2007	70	54
Tanzania, United Republic of	2007-2008	49	46
Tanzania, United Republic of	2004–2005	46	34
Tanzania, United Republic of	2003–2004	47	42
Tanzania, United Republic of	1999	31	21
Tanzania, United Republic of	1996	31	18
The former Yugoslav Republic of Macedonia	2005		70
Togo	2006		50
Togo	1998	41	22
Trinidad and Tobago	2006		51
Tuvalu	2007	44	–
Uganda	2004–2005	55	53
Uganda	2006	55	38
Uganda	2001	62	44
Uganda	1995	42	25
Ukraine	2007	71	68
Uzbekistan	2006		61
Uzbekistan	2002	50	
Viet Nam	2005	68	
Zambia	2001–2002	42	33
Zambia	2007	48	38
Zambia	2005	38	26
Zambia	2003	40	35
Zambia	2000	41	38
Zambia	1996	39	20
Zimbabwe	2005–2006	68	42
Zimbabwe	1999	69	42
Zimbabwe	1994	61	42

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PERCENTAGE OF WOMEN AND MEN AGED 15-49 WHO RECEIVED AN HIV TEST IN THE LAST 12 MONTHS AND WHO KNOW THEIR RESULTS

2007

	Survey Year	Males	Females	Both sexes			
		15-49	15-49	15-19	20-24	25-49	15-49
Afghanistan	2007						27
Albania							
Algeria	2006	0	1	0	1 [1]	1	1
Angola	2006	7	4				5
Antigua and Barbuda	2006						25
Argentina	2005		8	4	12		
Armenia							
Austria							
Azerbaijan							
Bahamas							
Barbados	2006	97 [1]	99 [1]				99 [1]
Belarus	2007	26	33	26	35	31	31
Belgium		8	9		5	10	9
Belize	2006	10	20				15
Benin	2006	12	15	7	17	15	14
Bhutan							
Bolivia	2007	87 [1]	87 [1]	86 [1]	88 [1]	87 [1]	87 [1]
Bosnia and Herzegovina	2006		0	0	0	0	
Botswana							
Brazil							
Bulgaria							
Burkina Faso	2007	18	23	15	28	27	21
Burundi	2007	91 [1]	93 [1]	91 [1]	92 [1]	93 [1]	92 [1]
Côte d'Ivoire	2005	3	4	2	3	4	3
Cambodia	2006	5	3	2	6	4	4
Cameroon	2004	7	5	3	6	6	5
Canada	2006						32
Cape Verde	2005	10	10	3	13	13	10
Central African Republic	2006	15	17	10	19	17	16
Chad	2004	2	1	0	1	1	1
Chile	2007	22	35	8	33	48	28
China	2006	2	2				2
Colombia	2007	11 [2]	27 [2]				19 [2]
Congo, Republic of the	2005	3	3	1	4	4	3
Costa Rica	2007	8 [1]	7 [1]			80 [1]	12 [1]
Cuba	2006	28	32	17	32	32	30
Cyprus							
Democratic Republic of the Congo	2007	4	4	2	5	5	4
Djibouti							
Dominican Republic	2007	19	21	8	22	23	20
Ecuador	2007		11	7	13	12	
El Salvador							
Equatorial Guinea							
Eritrea	2007						6
Estonia							
Ethiopia	2005	2	2				2
Gabon	2007	50 [1]	64 [1]	33 [1]	54 [1]	62 [1]	59 [1]
Gambia	2005	8	12				10
Germany	2007	14	11				13
Ghana	2006						

UNGASS Indicator 7

2009										MOST RECENT DHS (OR MICS)		
Survey Year	Males 15-49	Females 15-49	Both sexes 15-49	Males 15-19	Males 20-24	Males 25-49	Females 15-19	Females 20-24	Females 25-49	Survey Year	Males 15-49	Females 15-49
2008	1	0		0	1		0	0				
2009												
2009	6	12	9	2	5	10	7	15	13			
2009	35	65	80									
2008			23									
										2005		
2009			100									
										2006		
2009	1	4	2	1			4					
2009	16	17	16	10	15	22	11	19	23			
2009	30	42	37	12	32	35	15	52	46			
2009	92	98	95	85	90	94	90	86	100	2006	5%	7%
2008	2	2	2	1	3	2	1	3	2	2008	2%	
2009	91	62	93									
2008	38	62	41	29	36	39	71	65	61			
2008	10	16	13									
2009	8	7	8									
2007	23	18	21							2003	2%	
2008	16	16	16									
2005	3	4	3	2	2	4	2	3	5	2005	3%	4%
2005	5	3	4	1	8	6	2	5	3	2005	5%	3%
2004	14	10	11	3	11	20	5	10	12	2004	7%	5%
2009	19	32	26	3	23	25	13	50	38	2005	10%	10%
2006	15	17	16							2006	6%	
2004	2	0	1	1	2	2	1	1	0	2004	2%	1%
2009	19	40	30	7	26	39	17	53	66			
2007	22	36	30							2005		
2009	7	8	8	2	6	9	5	11	9	2009	9%	9%
2008	26	32	29									
2009												
2007	4	4	4	1	4	5	2	4	4	2007	4%	4%
2008				14	55		14	48				
2007	19	21	20	5	17	24	12	12	22	2007	19%	21%
2008		10					8	14	10			
2006			33									
2008	10	15	13	7	11	11	6	29	14			
2005		2		2	2	4	2	4	1	2005	2%	2%
2010	44	66	57	12	26	64	36	51	79			
2009	14	12	13	7	17	14	6	16	12			
2009	4	7		2	6	5	3	8	7	2008	4%	7%

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PERCENTAGE OF WOMEN AND MEN AGED 15-49 WHO RECEIVED AN HIV TEST IN THE LAST 12 MONTHS AND WHO KNOW THEIR RESULTS

	2007						
	Survey Year	Males	Females	Both sexes			
		15-49	15-49	15-19	20-24	25-49	15-49
Greece	2007	13	11	5	9	16	12
Grenada	2006	6	13	3	19	10	10
Guatemala							
Guinea	2005	3	1	1	2	2	2
Guinea-Bissau	2006		5				
Guyana	2005	10	11	7	17	11	11
Haiti	2006	5	8	3	8	8	7
Honduras	2006	21 [1]	23 [1]				23 [1]
Hungary	2007	0	0				0
India	2006	1	1	0	2	2	1
Israel				16	14	14	15
Jamaica	2004	12	19			17	16
Japan	2006						98 [1]
Kazakhstan	2007	4	5	2	4	5	7
Kenya	2003	8	7	4	9	7	14
Lesotho	2005	5	6	2	7	8	6
Liberia							
Lithuania	2007	24 [1]	20 [1]			24 [1]	24 [1]
Madagascar	2004	1 [3]	0 [3]				
Malawi	2007						11 [1]
Malaysia	2007						75 [1]
Mali	2006	3	7	2	4	3	5
Marshall Islands	2006	56 [1]	67 [1]	67 [1]	50 [1]		60 [1]
Mauritania	2007	10	3				5
Mauritius	2004				3 [1]	2 [1]	2 [1]
Mexico	2006						1 [1]
Moldova	2007	6	11	3	10	10	8
Mongolia							
Montenegro	2006		3	1	4	3	
Morocco	2007	6 [1]	4 [1]	3 [1]	6 [1]		5 [1]
Mozambique	2004	2	2	3	3	2	2
Myanmar							
Namibia	2007	18	29	9	26	27	23
Nauru							
Nicaragua	2007		5	2	4	7	5
Niger	2006	4	2	2	2	3	2
Nigeria	2005	9	8	3	8	11	9
Oman							
Palau	2006		16 [1]	27 [1]	20 [1]	14 [1]	
Panama							
Papua New Guinea							
Peru							
Philippines	2003	2					
Poland	2007						1 [1]
Portugal							
Russian Federation	2007	30 [1]	38 [1]	20 [1]	35 [1]	37 [1]	34 [1]
Rwanda	2005	11	12	4	16	13	11
Saint Kitts and Nevis	2006					10 [1]	10 [1]
Saint Lucia	2007	34 [1]	39 [1]				36 [1]
Saint Vincent and the Grenadines	2006	8	12	6	12	12	10
Sao Tome and Principe							
Senegal	2005	2	1	1	1	1	1

2009										MOST RECENT DHS (OR MICS)		
Survey Year	Males	Females	Both sexes	Males			Females			Survey Year	Males	Females
	15-49	15-49	15-49	15-19	20-24	25-49	15-19	20-24	25-49		15-49	15-49
2009	22	11	18	8	23	23	5	14	12			
2009	96	87	88	98	27	96	85	100	88			
2008	3	4	4	2	3	4	3	6	4			
2008			4							2005	3%	1%
2008	12	11	11	9	14	14	7	14	12			
2009	22	27	25							2005	10%	11%
2005	5	8	7	2	6	10	4	10	8	2005	5%	8%
2006	21	23	23	4	19	27	10	27	27			
2009	3	3	3	2	3	4	1	3	5	2005-06	1%	1%
2008	20	35	28	8	22	27	26	49	35			
2008	20	24	22	12	21	22	15	29	25			
2008	23	29		13	25	26	18	39	30	2003	8%	7%
2009										2004	5%	6%
2006	2	2	2	0	3	3	2	2	1	2007	2%	2%
2009	16	20	18									
2008				16	22		18	29		2004	1%	0%
2004	8	7		4	10		5	10		2004	8%	7%
2009			98									
2006	3	3	3	1	3	3	3	4	3	2006	3%	3%
2007	22	22	22	17	23	24	18	27	21			
2007	10	3	5									
2008	6	6	6	4	8		3	9				
2009	10	16	13	5	9	11	8	19	18	2005	10%	12%
2008		32	32				9	42	33			
2009			1									
2007	6	4	5									
2009	9	14	12	6	12	9	13	19	13	2009	9%	15%
2006	12	11	11	5	11	13	7	12	12			
2006	18	29		6	16		13	36		2006	18%	29%
2009	100	100	100	100	100	100	100	100	100			
2007		5										
2006	4	2	2	1	2	5	2	2	2	2006	2%	1%
2007	12	11	12	5	9	16	5	13	14	2008	7%	7%
2009			100									
2008		18	18				8	47	45			
2009	10	12	12	3	11	12	9	17	12			
2008	6	4	5	0	8	7	0	8	3			
2008	5	30	22	1	6	7	10	26	36	2007		
2008		1					0	1		2008		1%
2009												
2009	18	17	18	8	21	18	8	30	15			
2009	32	34	33	32	43	30	23	31	36			
2005	11	12	11	4	14	13	5	17	13	2005	11%	12%
2005			10			17			15			
2007	34	39	36									
2008	8	12	12	4	12	9	8	12	16			
2009	100	100	100	100	100	100	100	100	100	2008-09	23%	31%
2005	2	1	1	1	1	2	1	1	1	2005	2%	1%

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PERCENTAGE OF WOMEN AND MEN AGED 15-49 WHO RECEIVED AN HIV TEST IN THE LAST 12 MONTHS AND WHO KNOW THEIR RESULTS

2007

	Survey Year	Males	Females	Both sexes			
		15-49	15-49	15-19	20-24	25-49	15-49
Seychelles	2006	100 [1]	100 [1]	100 [1]	100 [1]	100 [1]	100 [1]
Sierra Leone	2007	8 [1]	9 [1]				9 [1]
Singapore	2007	9	7	0	13	8	8
Slovakia							
Solomon Islands							
Somalia	2004	5 [1]	3 [1]				4 [1]
South Africa	2006	90 [1]	90 [1]	90 [1]	90 [1]	90 [1]	90 [1]
Spain	2003						25
Sri Lanka	2007	0 [1]	0 [1]	0 [1]	0 [1]	0 [1]	0 [1]
Sudan							
Suriname	2006		30				
Swaziland	2007	9	22	6	18	21	16
Sweden							
Switzerland	2007	7	7	5	7	7	7
Tajikistan	2007	4 [1]	2 [1]	2 [1]	5 [1]		3 [1]
Thailand	2006	16	22	16	22	19	19
The former Yugoslav Republic of Macedonia	2006		3	2	3	3	
Togo	2007	16	15	10	17	17	16
Tonga							
Trinidad and Tobago	2006						8 [1]
Tunisia							
Turkey	2006	100 [1]	100 [1]	100 [1]	100 [1]	100 [1]	100 [1]
Tuvalu							
Uganda	2006	10	12				12
Ukraine	2007	11 [1]	20 [1]	12 [1]	19 [1]	16 [1]	16 [1]
United Kingdom of Great Britain and Northern Ireland	2006	1 [1]	3 [1]				2 [1]
United Republic of Tanzania	2007						36
Uruguay	2007	20	19	15	20	20	20
Vanuatu							
Viet Nam	2005	3	2	1	3	3	2
Zambia	2007	12	19	10	19	17	15
Zimbabwe	2006	7	7	4	9	7	7

[1] Methodology not harmonized with UNGASS 2008 guidelines.
[2] 14-26 years.
[3] 15-24 years.

2009										MOST RECENT DHS (OR MICS)		
Survey Year	Males 15-49	Females 15-49	Both sexes 15-49	Males 15-19	Males 20-24	Males 25-49	Females 15-19	Females 20-24	Females 25-49	Survey Year	Males 15-49	Females 15-49
2008	3	4		0	2	5	3	6	4	2008	3%	4%
2009			2									
2008	3	7	5	2	5		4	5	33			
2003	5	3	4									
2008			25									
2008												
2009			29									
2006		30										
2006	9	22	16	2	7	15	10	28	25	2007	9%	22%
2007	12	22	18	4	20	20	9	25	31			
2009												
2008	9	5	7	2	9	11	0	6	7			
2006	16	22	19				16	22	19			
2005		3					2	3	3			
2007	16	15	16	13	16	18	9	19	17			
2008				73			2					
2009	3	1	2									
2009			14									
2007	13	3	6	3	15	16	3	4	3			
2010			20							2006	10%	12%
2009	12	15	13	9	12	12	9	18	15	2007	7%	12%
2008	3	6	4	2	5	2	5	11	6			
2008	19	19	19	11	21	22	15	23	20	2007-08	19%	19%
2007	19	17	18	4	27	22	9	20	18			
2008	12	11	11									
2005	3	2	2							2005	3%	2%
2006	12	19	15	7	14	13	13	22	20	2007	12%	19%
										2005-06	7%	7%

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PERCENTAGE OF SEX WORKERS, INJECTING DRUG USERS AND MEN WHO HAVE SEX WITH MEN WHO BOTH CORRECTLY IDENTIFY WAYS OF PREVENTING THE SEXUAL TRANSMISSION OF HIV AND WHO REJECT MAJOR MISCONCEPTIONS ABOUT HIV TRANSMISSION

SEX WORKERS

	2005	2007[1]			2009		
	All	All	Male	Female	All	Male	Female
Afghanistan					2		2
Albania							
Angola					69		69
Argentina	69		67 [6]		96		
Armenia	49	54 [4]		54			
Azerbaijan					43		43
Bahamas							
Bangladesh	23	31	30	31	31 [7]	30	31
Barbados		37 [3, 4]		37 [3]			
Belarus	24	50 [4]		50	67		67
Belize							
Benin					60		60
Bolivia					48		48
Bosnia and Herzegovina							
Brazil							42
Bulgaria		35 [4]		35	37	38	37
Burundi	4	44 [2, 4]		44 [2]	52 [7]		52
Côte d'Ivoire		32 [4]		32	32 [7]		32
Cameroon		40 [2, 4]		40 [2]	81 [7]		81
Chad					5		5
Chile							
China	24 [4]	41			54		54
Colombia							24
Congo, Republic of the	67						
Costa Rica							
Croatia					40		
Cuba		52	49	61	60	62	56
Czech Republic							
Democratic Republic of the Congo		30 [2, 4]		30 [2]	31		31
Dominican Republic					73		73
Ecuador				47 [3]			
El Salvador		6					
Eritrea					60		60
Estonia		83 [3, 4]		83 [3]	[7]		
Ethiopia		36 [4]		36	36 [7]		36
Gabon		24	13	25	27	39	26
Georgia	1	4 [4]		4	8		8
Greece					3		3
Guatemala		3 [4]		3	3 [7]		3
Guinea		4 [4]		4			
Guinea-Bissau					31		31
Guyana		63		,	35		35
Haiti		6 [4]		6	6 [7]		6
Honduras		21 [4]		21	30 [7]		30
Hungary							
India				38	24		24
Indonesia	24	28	37	26	27 [7]	37	25
Iran, Islamic Republic of		8 [4]		8	8		8
Jamaica	26	26 [4]		26			
Kazakhstan		63 [4]		63	69		69
Kenya							59

UNGASS Indicator 14

INJECTING DRUG USERS							MEN WHO HAVE SEX WITH MEN		
2005	2007[1]			2009			2005	2007	2009
All	All	Male	Female	All	Male	Female	All	All	All
				29	29				
									18
							56		96 [7]
60	68	69	56				54	74	
				33 [7]	33	38			36
								45	36
14	20 [5]	20		19 [7]	19		14	27	28 [7]
61	58	51	68	58	59	53	63	56	72
				20	20	0	42		
									55
	22 [5]	22		36	31				
				32					62
	29	28	34	37	37	39		32	38
									65
36	49	48	52	57	56	63	37	55	51
							3		
							49	85	88
								54	59
									71
									73
								59 [3]	
								25	52
	75 [3]	75 [3]	74 [3]	[7]				60 [3]	60 [7]
36	41 [5]	41		38	38			0 [2]	25 [7]
								74	10
								33	33 [7]
								67	47
								36	37 [7]
								21	8 [7]
									100
				27	24	30			30
7	58	58	68	59 [7]	58	69	43	42	44 [7]
	24	24	15	24	24	15			7
	63	63	63	77	76	80		66	68

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PERCENTAGE OF SEX WORKERS, INJECTING DRUG USERS AND MEN WHO HAVE SEX WITH MEN WHO BOTH CORRECTLY IDENTIFY WAYS OF PREVENTING THE SEXUAL TRANSMISSION OF HIV AND WHO REJECT MAJOR MISCONCEPTIONS ABOUT HIV TRANSMISSION

SEX WORKERS

	2005	2007[1]			2009		
	All	All	Male	Female	All	Male	Female
Kyrgyzstan	1	36 [4]		36	89		89
Lao People's Democratic Republic	21				45		45
Latvia							
Lithuania		24 [4]		24	41		41
Madagascar		30					
Malawi							38
Malaysia		78 [2]			38		
Mali	90						
Mauritania					22 [7]		22
Mauritius		2 [2, 4]					
Mexico		49	54	47			
Moldova	35	58 [4]		58	29		29
Mongolia		29 [4]		29	47		47
Montenegro							
Morocco	72						
Myanmar					71		71
Nepal	17	32	41	30		81	36
Niger					11		11
Nigeria		33 [4]		33	33 [7]		33
Pakistan		10 [3]	21 [3]	<1 [3]	13	23	1
Panama		91	91	92	91 [7]	91	92
Papua New Guinea		35 [4]		35	35 [7]		35
Paraguay					20	28	17
Peru							5
Philippines		2		2	30		30
Romania	14	14 [4]		14	11		11
Russian Federation		36 [4]		36	45		45
Rwanda		36 [4]		36	36 [7]		36
Saint Lucia							
Sao Tome and Principe				72			
Senegal		41 [4]		41	41 [7]		41
Serbia					14	17	13
Somalia							6
South Africa							
Sri Lanka		10 [4]		10			
Sudan					25		25
Suriname		78	75	79	21		
Swaziland		46 [4]		46 [4]	32		32
Sweden		46	100	45	71	60	100
Tajikistan		41 [4]		41	31		31
Thailand		28	23	29	38	29	41
The former Yugoslav Republic of Macedonia	10	47	67	43	47 [7]	67	43
Timor-Leste							24
Togo		45	46	42	52	50	52
Tunisia					13		13
Turkey	22						
Ukraine	8	48 [4]		48	51		51
Uzbekistan					36		36
Viet Nam	24	35 [4]		35	51		51
Zambia		41	41	42			

[1] Report date 2007, but data collection can vary from 2005-2007.

[2] Data collection started before 2005.

[3] Methodology not harmonized with UNGASS 2008 guidelines.

[4] Females only.

[5] Males only.

[6] Transgender.

[7] Data collection started before 2008.

INJECTING DRUG USERS							MEN WHO HAVE SEX WITH MEN		
2005	2007[1]			2009			2005	2007	2009
All	All	Male	Female	All	Male	Female	All	All	All
	64	62	69	51	49	61	7	89	
								31 [3]	
	45	44	50						48
								39	39
	98 [2]			50					
	62 [2]			14				48 [2]	
								66	
37	64	64	66	65	65	67	38	47	
								23	54
7									
				76	76				68
50	66 [5]	66		68	68		27	45	64
	34	34	36	34 [7]	34	35		44	44 [7]
		20		23	26				
								78	78 [7]
								71	71 [7]
				30					49
							73	40	22
	26	27	23	45	44	57		10	34
18	30	24	63	10	10	8		45	
	46	47	43	40	40	42		26	66
	13 [3]	10 [3]	33 [3]	15	15	19			
				64	61	75			65
									24
								20	
				65	63	78			
	46	45	51	55	55	59			
	49							25	26
27	34	32	47	34 [7]	32	47	34	41	41 [7]
									27
									54
				24	24	20			23
21	47	47	45	55	55	53	49	47	71
				46	46	50			47
34	38 [3, 5]	38 [3]		49	49			55 [3]	60

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PERCENTAGE OF SEX WORKERS, INJECTING DRUG USERS, AND MEN WHO HAVE SEX WITH MEN REACHED WITH HIV PREVENTION PROGRAMMES[1]

SEX WORKERS

	2007[1]			2009		
	All	Male	Female	All	Male	Female
Afghanistan	11[3]	9[3]	11[3]	1		1
Angola	17			23		23
Argentina			82	90		
Armenia	41[4]		41			
Azerbaijan				6		6
Bahamas						
Bangladesh	54	47	57	10[7]	18	7
Belarus	86[4]		86	86		86
Benin	60[4]		60	56		56
Bolivia						
Bosnia and Herzegovina						
Brazil						47
Bulgaria	77[4]		77	59	72	57
Burkina Faso	37	15	59	37[7]	15	59
Burundi	72[2,4]		72[2]	77[7]		77
Côte d'Ivoire				[7]		
Cameroon	70[2,4]		70[2]			
Chad				17		17
Chile				[7]		43
China	46[4]		46	74		74
Colombia						21
Comoros	59[4]		59	74[7]	0	74
Costa Rica						
Cuba	60	59	65	97	96	98
Czech Republic						
Democratic Republic of the Congo				26[7]		26
Djibouti				89		89
Dominican Republic				44		
Ecuador			76			
El Salvador	73					77
Eritrea	88[3,4]		88[3]			
Estonia						
Gabon	29	27	29	35	48	34
Georgia				67		67
Ghana				48		
Greece				14		14
Guatemala	93[4]		93	93[7]		93
Guinea	92[4]		92	89		89
Guyana	28[4]		28			
Honduras	23[4]		23	33		33
Hungary						
India				31		31
Indonesia	40	60	34	29[7]	55	24
Jamaica	60					
Kazakhstan	71[3]			88		88
Kyrgyzstan	89[3,4]		89[3]	61		61
Lao People's Democratic Republic				70		70
Latvia						
Lebanon	<1[3]	11[3]	22[3]			
Lithuania	43[4]		43	74		74
Malawi	69		69			
Malaysia	86[4]			12		

UNGASS Indicator 9

INJECTING DRUG USERS						MEN WHO HAVE SEX WITH MEN	
2007			2009			2007	2009
All	Male	Female	All	Male	Female	All	All
			17	17			
						98	
54	55	44				10	
			2	2	0		22
						48	71
82	82	90	2 [7]	2		13	8 [7]
56	54	61	64	64	64	90	85
			0	0	0		
							51
			32	39			
			40				37
47	45	60	52	52	52	30	38
						100 [3]	100 [7]
							57
25	25	25	39	38	45	38	75
						26	64
						56	92
							65
						49	
						62	58
						56	56 [7]
17 [5]	17		11	11			66 [7]
						19	74
						75	75 [7]
						17	[7]
						24	31 [7]
							55
			15	9	22		18
45	44	55	43 [7]	43	52	40	44 [7]
44 [3]			60	60	61	48 [3]	68
78 [3]	78 [3]	78 [3]	38	36	48	77 [3]	
47	45	53	[7]				
						15 [3]	
						40	43
			7			100 [3]	

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PERCENTAGE OF SEX WORKERS, INJECTING DRUG USERS, AND MEN WHO HAVE SEX WITH MEN REACHED WITH HIV PREVENTION PROGRAMMES[1]

SEX WORKERS

	2007[1]			2009		
	All	Male	Female	All	Male	Female
Mexico	36	55	28	60	61	59
Moldova	96		96	15		15
Mongolia	64			74		74
Montenegro				44	43	45
Morocco	49 [4]		49	49 [7]		49
Myanmar				76		76
Nepal	42	56	39		93	41
Nigeria				49 [7]		49
Norway						
Pakistan	3 [3]	3 [3]	2 [3]	10	13	6
Panama	76	73	78	76 [7]	73	78
Papua New Guinea	31 [4]		31	31 [7]		31
Paraguay	18					
Peru			80			
Philippines	14 [4]		14	55		55
Romania				33		33
Russian Federation	39			22		22
Saint Lucia						
Sao Tome and Principe	80 [3, 4]		80 [3]			
Senegal						
Serbia				30	19	38
Sierra Leone	73 [4]		73			
Singapore			100 [3]			
Slovenia						
Sudan				2		2
Swaziland	77 [3, 4]		77 [3]	100		100
Sweden	50 [3]	100 [3]	55 [3]	43	41	50
Tajikistan	60 [4]		60	51		51
Togo	76	75	81	82	63	84
Tunisia				38		38
Turkey	42 [4]		42			
Ukraine	69 [4]		69	58		
United Republic of Tanzania						68
Uzbekistan				71		71
Viet Nam	65 [3, 4]		65 [3]	47		47
Zambia	63 [2, 4]		63 [2,3]			

[1] Report date 2007, but data collection can vary from 2005-2007.
[2] Data collection started before 2005.
[3] Methodology not harmonized with UNGASS 2008 guidelines.
[4] Females only.
[5] Males only.
[7] Data collection started before 2008.

INJECTING DRUG USERS						MEN WHO HAVE SEX WITH MEN	
2007			2009			2007	2009
All	Male	Female	All	Male	Female	All	All
5	5	4	20	22	13	18	38
89	89	89	7	7	8	86	
						67	77
			53	53			69
78 [5]	78		57	57		47	77
			59 [7]	60	54		60 [7]
							56 [7]
	16 [3]		51	51			
						89	89 [7]
						10	10
						44	
14	13	28	11	11	17	19	29
						59	
24	33	21	14	11	21	17	
							100
							85 [7]
			21	19	25		14
							85
27	26	30	8	8	12		54
25	21	41	64	63	69		
							46
							53
	22	30				19	
46	45	50	32	31	33	50	63
			34	32	49		42
43 [3]	43 [3]		15	15		26	24

A2

PERCENTAGE OF FEMALE AND MALE SEX WORKERS REPORTING THE USE OF A CONDOM WITH THEIR MOST RECENT CLIENT

	2005[7]			2007[7]		
	All	Males	Females	All	Males	Females
Afghanistan				50 [3, 5]		50 [3]
Angola				78 [5]		78
Argentina						
Armenia	89	100	89	91 [5]		91
Azerbaijan						
Bangladesh	40	44	32	63	44	67
Barbados				80 [5]		80
Belarus	77	100	77	76 [5]		76
Benin				83 [5]		83
Bolivia				88 [4]	57 [4]	88 [4]
Bosnia and Herzegovina						
Brazil						
Bulgaria				95 [5]		95
Burkina Faso	96			99	98	99
Burundi	74		74	74 [2, 5]		74 [2]
Côte d'Ivoire				96 [5]		96
Cambodia	96		96	99 [5]		99
Cameroon				74 [2,4, 5]		74 [2, 4]
Canada					61 [4]	80 [4]
Cape Verde				74 [5]		74
Chad						
Chile						
China			69	82 [5]		82
Colombia				89	82	97
Comoros				59 [5]		59
Costa Rica				92 [5]		92
Croatia				86 [2]		
Cuba				61	63	56
Democratic Republic of the Congo				61 [2, 5]		61 [2]
Djibouti						
Dominican Republic				96 [2]		
Ecuador						95
Egypt						
El Salvador				96	89	97
Eritrea				76 [5]		
Estonia				94 [5]		94
Ethiopia				87 [5]		84
Gabon				67	53	67
Georgia			95	94 [5]		94
Germany						
Ghana				98		
Greece						
Guatemala				96	91	97
Guinea				100 [5]		100
Guinea-Bissau						60
Guyana				89 [5]		89
Haiti				90 [5]		90
Honduras				68	71	66
India						88
Indonesia	55	48	56	69	72	68
Iran, Islamic Republic of				55 [5]		55
Jamaica	84			84		
Japan						
Jordan						
Kazakhstan				97 [5]		97
Kenya						

UNGASS Indicator 18

2009[7]		
All	Males	Females
58		58
81 [5]		81
99 [1, 5]		99
75 [1, 5]		75
63 [1]	44	67
70		70
25 [5]		25
87 [5]		87
76 [5]		76
		90
93	90	94
99 [1]	98	99
82 [1, 5]		82
97	97	97
99 [1, 5]		99
73 [5]		73
38 [5]		38 [1]
		73 [1]
85 [5]		85
		96
59 [1, 5]		59
89		
98		
56	53	63
62 [1, 5]		62
94		94
81		81
		97
21 [1]	9	31
		90
45 [5]		45
94 [1, 5]		94
98 [1, 5]		98
76	57	77
99 [5]		99
64	62	64
5 [5]		5
96 [1]	91	97
65 [5]		65
93 [5]		93
61 [5]		61
90		
80	87	79
83 [5]		83
68 [1]	79	66
55 [1, 5]		55
97 [5]		97
65 [1, 5]		65
51 [5]		51
96 [5]		96
		88

A2

PERCENTAGE OF FEMALE AND MALE SEX WORKERS REPORTING THE USE OF A CONDOM WITH THEIR MOST RECENT CLIENT

	2005[7]			2007[7]		
	All	Males	Females	All	Males	Females
Kyrgyzstan	81			84 [5]		84
Lao People's Democratic Republic	83	59	89			
Lebanon				34 [4]	47 [4]	34 [4]
Lithuania				77 [5]		77
Madagascar				79		
Malawi				69 [5]		69
Malaysia				35 [2]		
Mali				99 [5]		99
Mauritania						
Mauritius				100 [2, 5]		100 [2]
Mexico				96	96	96
Moldova	98			93 [5]		93
Mongolia	94	50	96	92 [5]		92
Montenegro						
Morocco	38		38	54 [5]		54
Myanmar						
Nepal	67			81	93	77
Nicaragua						
Niger				96 [5]		96
Nigeria				98 [5]		98
Pakistan	23	7	37	34	21	45
Panama	92	91	92	76	64	84
Papua New Guinea				94 [5]		94
Paraguay				76	71	78
Peru					42	96
Philippines				65	50	65
Poland						46 [2]
Romania			85	85 [5]		85
Russian Federation	77			92 [5]		92
Rwanda				87 [5]		87
Sao Tome and Principe						60
Senegal	86		87	99 [5]		99
Serbia						
Sierra Leone				68 [5]		68
Singapore						99
Somalia						
Sri Lanka			65	89 [5]		89
Sudan						
Suriname				70	79	68
Swaziland				98 [5]		98
Sweden				22	100	20
Switzerland					72	
Tajikistan				75 [5]		75
Thailand				96 [4, 5]		
The former Yugoslav Republic of Macedonia	86	88	84	78	93	75
Timor-Leste						
Togo				78	76	84
Tunisia						
Turkey				33 [5]		33
Ukraine	80		80	86 [5]		86
Uruguay						
Uzbekistan				65 [5]		65
Vanuatu						
Viet Nam	90		90	97 [4, 5]		97 [4]
Zambia				81	72	82
Zimbabwe				4 [4, 6]	4 [4]	

[1] Data collection started before 2008.
[2] Data collection started before 2005.
[3] Data collection period not defined.
[4] Methodology not harmonized with UNGASS 2008 guidelines.
[5] Females only.
[6] Males only.
[7] Methodology may vary for individual countries.

2009[7]		
All	Males	Females
94 [5]		94
94 [5]		94
92 [5]		92
		92
61		
99 [1, 5]		99
88 [1, 5]		88
62	45	66
91 [5]		91
90 [5]		90
72 [1]	64	73
54 [1, 5]		54
96 [5]		96
	38	75
74		
85 [5]		85
98 [1, 5]		98
38	33	43
76 [1]	64	84
50	42	53
65 [5]		65
98 [5]		98
71 [5]		71
87 [1, 5]		87
97 [1, 5]		97
91	93	89
		68 [1]
99		
		25
89 [1, 5]		89
45 [5]		45
87		
87 [5]		87
19	20	14
	72 [1, 6]	
84 [5]		84
92 [5]		92
78 [1]	93	75
		65
88	67	89
52 [5]		52
		42
88 [5]		88
76 [6]	76	
81 [5]		81
67 [1, 5]		67
78 [5]		78

A2

PERCENTAGE OF MEN REPORTING THE USE OF A CONDOM THE LAST TIME THEY HAD ANAL SEX WITH A MALE PARTNER

	2005[5]	2007[5]	2009[5]
Argentina		91	
Armenia	30	84	
Australia		58 [3, 4]	47
Azerbaijan			57
Bahamas		69	69
Bangladesh	49	24	31 [1]
Barbados			
Belarus	62	67	61
Bolivia			69
Bosnia and Herzegovina			56
Brazil			48
Bulgaria		46	70
Burkina Faso			52
Côte d'Ivoire		47	42
Cambodia		86	86
Cameroon			43
Canada			62 [1]
Chile		29	56
China	41	64	73
Costa Rica		71	65
Cuba		55	52
Czech Republic			30
Denmark			73
Dominican Republic		79 [2]	66
Egypt			13 [1]
El Salvador		83	55
Estonia		47	47
Fiji	20		
Georgia	54		62
Germany		58	59
Ghana		48	
Greece		89	11
Guatemala		78	78
Guyana		81	84
Haiti		73	73 [1]
Honduras		47	47 [1]
Hungary			25
India			58
Indonesia	48	39	57
Iran, Islamic Republic of			38 [1]
Jamaica			73
Japan		55	65
Kazakhstan		66	76
Kenya		75	
Kyrgyzstan	68	81	
Lao People's Democratic Republic		24 [4]	
Latvia			50
Lebanon		39 [4]	
Lithuania		58	47
Malaysia			21
Mali		54	54
Mauritius		52 [2]	
Mexico		79	64
Moldova	63	48	

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	2005[5]	2007[5]	2009[5]
Mongolia	13	67	78
Myanmar			82
Nepal		74	75
Nicaragua			36
Nigeria		53	53
Norway			53
Pakistan	8	24	
Panama	84	86	86
Papua New Guinea		88 [4]	51
Paraguay			63
Peru	46	47	
Philippines		32	32
Poland		32 [2, 4]	
Portugal			43
Romania		73	43
Russian Federation	39	60	56
Rwanda			50
Saint Lucia		74	63
Senegal	45	55 [2]	76
Serbia			67
Singapore			17
Slovenia		75 [4]	43
South Africa			35
Spain			66
Sri Lanka		61	61
Suriname		89	89 [1]
Sweden		42 [4]	51
Switzerland		80 [4]	80
Thailand		88	
The former Yugoslav Republic of Macedonia	29	56	56
Timor-Leste			38
Togo		60	72
Trinidad and Tobago		47 [2]	
Tunisia			40
Turkey		37	
Tuvalu		63	
Ukraine	72	39	64
United Kingdom of Great Britain and Northern Ireland			63 [1]
Uruguay			47
Uzbekistan		61	87
Vanuatu			63
Viet Nam		61	66

[1] Data collection started before 2008.
[2] Data collection started before 2005.
[3] Data collection period not defined.
[4] Methodology not harmonized with UNGASS 2008 guidelines.
[5] Methodology may vary for individual countries.

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PERCENTAGE OF INJECTING DRUG USERS REPORTING THE USE A CONDOM THE LAST TIME THEY HAD SEXUAL INTERCOURSE

	2007[1,6]			2009[6]		
	All	Males	Females	All	Males	Females
Afghanistan				35	35	
Argentina	64	63	65	[5]		
Armenia	56	56	55			
Australia	20 [3]	20 [3]	20 [3]	27	27	25
Azerbaijan	18 [2]			15	16	8
Bangladesh	44	44	55	43 [5]	43	
Belarus	59	57	65	59	56	68
Benin				30	29	33
Bosnia and Herzegovina	23 [4]	23		30		
Brazil				70		
Bulgaria	19	18	28	38	37	43
Canada	43			39 [5]	42	35
China	34 [3]	32 [3]	43 [3]	36	35	42
Croatia				50		
Egypt					5 [5]	
Estonia	68	66	74	66	66	113
Georgia	48 [4]	48		78	78	
Greece	48					
India				16	16	
Indonesia	34	34	30	36	36	35
Iran, Islamic Republic of	33	33	30	33	33	30
Japan	65 [4]	65				
Jordan						
Kazakhstan	37	37	36	46	46	47
Kyrgyzstan	11	11	9	53	55	48
Latvia	38	40	34			
Lebanon	15 [3]	15 [3]		43		
Luxembourg				49		
Malaysia	5 [2]			28		
Mauritius	13 [2]	15 [2]	0 [2]	31		
Mexico	29	27	38	28	29	25
Moldova	68	73	52	36	41	12
Montenegro						
Morocco	13	12	21	13	12	21
Myanmar				78	78	
Nepal	38 [4]	38		51	51	
Nigeria	66	66	68	66	66	68
Pakistan		21		31	31	
Paraguay	33	33	36	22		
Philippines				22	23	0
Portugal				38	39	31
Romania				17	18	12
Russian Federation	37	39	31	45	46	40
Serbia				29	29	29
Spain				55		
Sweden	25	28	19	7	8	0
Switzerland	50 [3]	53 [3]	42 [3]	50 [5]	53	42
Tajikistan	36	33	47	28	26	40
Thailand	35			42	45	29
The former Yugoslav Republic of Macedonia	51	51	51	51	51	51
Tunisia				35		
Turkey	10	9	13			
Ukraine	55	55	56	48	50	45
United Kingdom of Great Britain and Northern Ireland				44	43	46
Uzbekistan	39	37	50	26	25	32
Viet Nam	36 [3, 4]	36 [3]		52	52	

UNGASS Indicator 20

[1] Report date 2007, but data collection can vary from 2005 to 2007.

[2] Data Collection period started before 2005.

[3] Methodology not harmonized with UNGASS 2008 guidelines.

[4] Males only.

[5] Data collection period started before 2008.

[6] Methodology may vary for individual countries.

PERCENTAGE OF INJECTING DRUG USERS REPORTING THE USE OF STERILE INJECTING EQUIPMENT THE LAST TIME THEY INJECTED

	2007[6]			2009[6]		
	All	Males	Females	All	Males	Females
Afghanistan	46			94	94	
Albania				82		
Argentina	65	64	67	91		
Armenia	95	95	93			
Australia	71 [4]			80		
Azerbaijan	77			62	62	65
Bangladesh	34	34	74	32 [1]	32	
Belarus	71	71	70	87	87	88
Belgium				53		
Benin				31	31	33
Bosnia and Herzegovina	25 [5]	25		87	90	
Brazil				54		
Bulgaria	25	26	23	86	87	84
Canada	68 [3, 4]					
China	41	42	32	72	72	68
Egypt					40[1]	
Georgia	93 [5]	93		48	48	
Greece	67					
Hungary				74		
India				87	83	90
Indonesia	82 [2]	82 [2]	89 [2]	88 [1]	88	94
Iran, Islamic Republic of	75	75	62	74	75	62
Japan	47 [5]	47				
Kazakhstan	59	59	58	63	65	55
Kyrgyzstan	77	76	81			
Latvia	90	87	96	82	85	80
Lebanon	60 [4]	63 [4]	0 [4]			
Lithuania				98	98	97
Luxembourg				71		
Malaysia	28 [2]			83		
Maldives				72	74	29
Mauritius	32 [2]	32 [2]	33 [2]	72		
Mexico	14	15	9	40	39	43
Moldova	96	96	95	99	99	100
Montenegro				24		
Morocco	7	7	12	7 [1]	7	12
Myanmar				81	81	
Nepal	96 [5]	96		99	99	
Nigeria	89	89	86	89	89	86
Pakistan		28		77	77	
Paraguay	80	80	79	71		
Philippines	48	47	63	85	84	94
Portugal				69	71	59
Romania	28 [2]	30 [2]	17 [2]	85	86	83
Russian Federation	82	83	81	83	85	76
Serbia				80	81	73
Spain				81		
Sweden	38	38	35	58	58	58
Switzerland	94 [4]	95 [4]	92 [4]	94 [1]	95	92
Tajikistan	32	35	21	63	61	84
Thailand				63	63	64
The former Yugoslav Republic of Macedonia	73	73	69	73	73	69
Timor-Leste					3	11
Tunisia				78		
Turkey	10	9	13			
Ukraine	84	85	81	87	89	84
United Kingdom of Great Britain and Northern Ireland				81	82	77
Uzbekistan	23	23	25	82	81	81
Viet Nam	89 [5]	89		95	95	

UNGASS Indicator 21

[1] Data collection period started before 2008.
[2] Data Collection period started before 2005.
[3] Data collection period undefined.
[4] Methodology not harmonized with UNGASS guidelines.
[5] Males only.
[6] Methodology may vary for individual countries.

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PERCENTAGE OF SEX WORKERS, INJECTING DRUG USERS, AND MEN WHO HAVE SEX WITH MEN THAT HAVE RECEIVED AN HIV TEST IN THE LAST 12 MONTHS AND WHO KNOW THEIR RESULTS

SEX WORKERS

	2005	2007[1]			2009		
	All	All	Male	Female	All	Male	Female
Afghanistan		11 [5]		11	4		4
Albania							
Algeria							
Angola		42 [5]		42	35		35
Argentina	36		38	65	62		
Armenia	33	18 [5]		18			
Australia		63 [5]		63	82		44
Azerbaijan					6 [7]		6
Bahamas							
Bangladesh	2 [5]	6	8	5	4 [7]	4	4
Barbados		73 [4, 5]		73 [4]	73 [7]		73
Belarus	49	63 [5]		63	85		85
Belgium							
Benin		30 [5]		30	87		87
Bolivia		78 [4]	85 [4]	78 [4]	45		45
Bosnia and Herzegovina		96 [2, 4]			14		14
Brazil							18
Bulgaria		53 [5]		53	58	60	58
Burkina Faso		94 [4, 5]		94 [4]	100		100
Burundi	38	38 [2, 5]		38 [2]	65 [7]		65
Côte d'Ivoire		51 [5]		51	51 [7]		51
Cambodia		68 [5]		68	68 [7]		68
Cameroon		32 [2, 5]		32 [2]			
Canada							
Chad					38		38
Chile					[7]		85
China		29 [5]		29	37		37
Colombia		82	71	85			42
Comoros					100 [7]	0	100
Congo, Republic of the	3						
Costa Rica					49		
Cuba		36	38	32	35	35	35
Czech Republic							
Democratic Republic of the Congo		37 [2, 5]		37 [2]	36 [7]		36
Denmark							
Djibouti					85		85
Dominican Republic		64 [2, 5]		64 [2]	67		67
Ecuador				87 [4]			
El Salvador		96 [5]		96			89
Eritrea		78			93		93
Estonia		52 [5]		56	52 [7]		52
Ethiopia		97 [5]		97	97 [7]		
Finland							
Gabon		54	33	55	64	52	65
Georgia	24	33 [5]		33	28		28
Germany							
Ghana		39					
Greece					66		66
Guatemala		93 [5]		93	93 [7]		93
Guinea		58 [5]		58			
Guinea-Bissau					43		43

UNGASS Indicator 8

INJECTING DRUG USERS							MEN WHO HAVE SEX WITH MEN		
2005	2007[1]			2009			2005	2007[1]	2009
All	All	Male	Female	All	Male	Female	All	All	All
	6			22	22				
				17					45
15									
	47	43	62				96	98	85 [7]
21	23	23	13				42	5	
	57 [4]							50	61
				5	5	15			13 [7]
								61	50
3	3 [6]	3		4 [7]	4			6	3 [7]
39	49	49	49	57	56	58	55	53	80
				36 [7]	35	40		62 [3]	86
				25	25	33			
								100 [4]	35
	53 [6]	53		31	28			10 [2, 4]	26
				13					19
	38	36	52	48	47	49		29	42
									100
								57 [4]	57 [7]
				35 [7]				58	58 [7]
	59			47 [7]	44	52		43 [4]	34
								37	25
	41	40	45	37	36	46		33	45
								61	
							8		
								43	61
								33	32
				34 [7]					43
									55
									33
								50 [4]	
								55	85
	62	63	60	47 [7]	45	62		27 [4]	27 [7]
				63					
6	9 [6]	9		6	6		27	30 [2]	24 [7]
								18	23 [7]
								25	
								39	78
								64	64 [7]

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PERCENTAGE OF SEX WORKERS, INJECTING DRUG USERS, AND MEN WHO HAVE SEX WITH MEN THAT HAVE RECEIVED AN HIV TEST IN THE LAST 12 MONTHS AND WHO KNOW THEIR RESULTS

SEX WORKERS

	2005	2007[1]			2009		
	All	All	Male	Female	All	Male	Female
Guyana		64		64	88		88
Haiti		71			71 [7]		
Honduras		71 [5]		71	76		76
Hungary							
India				34	32		32
Indonesia	15	31	52	25	33 [7]	57	28
Iran, Islamic Republic of		20 [5]		20	20 [7]		20
Jamaica	43	43 [5]		43	73		73
Japan							
Kazakhstan		70 [5]		70	81		81
Kenya		12 [2]					92
Kyrgyzstan		53 [5]		53	42		42
Lao People's Democratic Republic	9				14		14
Latvia							
Lebanon		24 [4]	11 [4]	25 [4]	[7]		69
Lithuania		50 [5]		50	53		53
Luxembourg							
Madagascar		49 [5]		49			
Malawi		69 [5]		69			
Malaysia		100 [3, 4]			20		
Maldives					14		14
Mali		7			91 [7]		91
Mauritania		100 [4, 5]		100 [4]	69 [7]		69
Mauritius		30 [2]					
Mexico		72	63	76			
Moldova		31 [5]		31	23		23
Mongolia	67	53 [5]		53	52		52
Montenegro		73 [4, 5]		73 [4]	83 [7]		
Morocco		51 [5]		51	51 [7]		51
Myanmar					71		71
Nepal		40	52	37		65	32
Nicaragua					91		
Niger		38 [5]		38	45		45
Nigeria		38 [5]		38	38 [7]		38
Norway							
Pakistan		4	4	5	14	13	15
Panama	77	55	59	52	55 [7]	59	52
Papua New Guinea		47 [5]		47	56	47	60
Paraguay		100 [5]	100	100	100		100
Peru				54 [4]	20	6	55
Philippines		12 [5]		12	19		19
Poland							
Portugal							
Romania	36	35 [5]		35	29		29
Russian Federation		61 [5]		61	39		39
Rwanda		65 [5]		65	[7]		65
Saint Lucia							
Sao Tome and Principe		72 [4, 5]		72 [4]	31 [7]		31
Senegal		70 [5]		70	70		70
Serbia					45	35	52
Sierra Leone		79	75		48 [7]		48
Singapore				100	100		100

INJECTING DRUG USERS							MEN WHO HAVE SEX WITH MEN		
2005	2007[1]			2009			2005	2007[1]	2009
All	All	Male	Female	All	Male	Female	All	All	All
								44	87
								48	71 [7]
								40	29 [7]
	8			100	100	100			100
				21	9	36			17
18	36	36	42	44 [7]	43	61	15	32	34 [7]
9	23	23	16	23 [7]	23	16			11 [7]
									53 [7]
								38	32
	42	41	49	56	56	56		38	60
								40	
	34	32	43	40	39	45		70	
								5	14
	61	62	60	63 [7]	60	70			26
	4 [4]	2 [4]	50 [4]					14 [4]	30
	64	60	81	73 [7]	73	72		28	41
				65 [7]					
	100 [4]			33				100	
				17	15	67			10
								15 [4]	
	20 [2]	24 [2]	0 [2]	75				16 [2]	
	31 [2]	28 [2]	48 [2]	32	29	49		54	50
	34	33	38	48	49	41		38	
							23	60	78
								81 [4]	
13	13	13	11	13 [7]	13	10			
				27	27				48
	21 [6]	21		22	22			30	42
	23	23	33	23 [7]	23	32		30	30 [7]
									56 [7]
		4 [4]		12	12				
							45	76	76 [7]
								42	67
	100	100	100					100	100
								21	6
	4	4	15	1	2	0		16	7
	<1							<1	
				36 [7]	35	41			27 [7]
36	16 [4]	17 [4]	10 [4]	19	18	20		47	75
	46	44	50	26	23	33		32	61
									47
	100 [4]	100 [4]	100 [4]	17	16	23			100
							11		34 [7]
				32	30	39	53		31
								47	43

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PERCENTAGE OF SEX WORKERS, INJECTING DRUG USERS, AND MEN WHO HAVE SEX WITH MEN THAT HAVE RECEIVED AN HIV TEST IN THE LAST 12 MONTHS AND WHO KNOW THEIR RESULTS

SEX WORKERS

	2005	2007[1]			2009		
	All	All	Male	Female	All	Male	Female
Slovenia							
Somalia							5
South Africa							
Spain		67 [2, 4, 5]			67 [7]		
Sri Lanka		43 [5]		43	43 [7]		43
Sudan					7		7
Suriname		62	75	59	64		
Swaziland		94 [4, 5]		94 [4]			
Sweden		34 [4]	100 [4]	33 [4]	78	70	100
Switzerland			38		[7]	38	
Tajikistan		29 [5]		29	42		42
Thailand		53	54	52	36	35	36
The former Yugoslav Republic of Macedonia	67	47	87	39	47 [7]	87	39
Timor-Leste							53
Togo		40	22	89	58	43	59
Tonga							
Tunisia				100 [4]	14		14
Turkey	26	97	100	97			
Ukraine	32	46 [5]		46	59		
United Kingdom of Great Britain and Northern Ireland							
Uruguay					26	26	
Uzbekistan		19 [5]		19	35		35
Vanuatu					12 [7]		12
Viet Nam		15 [5]		15	35		35
Zambia		17	14	23			

[1] Report date 2007, but data collection can vary from 2005-2007.
[2] Data collection started before 2005.
[3] Data collection period not defined.
[4] Methodology not harmonized with UNGASS 2008 guidelines.
[5] Females only.
[6] Males only.
[7] Data collection started before 2008.

INJECTING DRUG USERS							MEN WHO HAVE SEX WITH MEN		
2005	2007[1]			2009			2005	2007[1]	2009
All	All	Male	Female	All	Male	Female	All	All	All
									33
									27
	68 [2, 4]	67 [2, 4]	72 [2, 4]	76 [7]				49 [3]	87 [7]
								14	14 [7]
									59
	84 [4]	83 [4]	86 [4]	82	82	81		41	39
	60	59	61	60 [7]	59	61		31	31 [7]
	24	23	30	36	37	30			
				62	61	71		35	21
32	44	42	53	44 [7]	42	53	7	56	56 [7]
									26
									53
				21	22	13		35 [3]	18
	8	11	0					31	
27	29	29	30	26	25	29	25	27	43
				70				17 [2]	31 [7]
									26
	18	18	18	34	33	37		25	44
	11 [6]	11		18	18			16	19

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