

Global facts and figures

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[Source: *Report on the global AIDS epidemic 2008*, August 2008]

The AIDS epidemic today

- An estimated 33 million people [30.3 – 36.1 million] were living with HIV in 2007. There were 2.7 million [2.2 – 3.2 million] new HIV infections and 2 million [1.8 – 2.3 million] AIDS-related deaths last year.
- The rate of new HIV infections has fallen in several countries, but globally these favourable trends are at least partially offset by increases in new infections in other countries.
- Globally, women account for half of all HIV infections—this percentage has remained stable for the past several years.
- The global percentage of adults living with HIV has levelled off since 2000. In virtually all regions outside sub-Saharan Africa, HIV disproportionately affects people who inject drugs, men who have sex with men and sex workers.

Regional Statistics

	People living with HIV	New infections 2007	AIDS deaths 2007	Adult prevalence %
Sub-Saharan Africa	22 million [20.5 – 23.6 million]	1.9 million [1.6– 2.1 million]	1.5 million [1.3 – 1.7 million]	5% [4.6% – 5.4%]
South and South-East Asia	4.2 million [3.5 – 5.3 million]	330 000 [150 000 – 590 000]	340 000 [230 000 – 450 000]	0.3% [0.2% – 0.4%]
East Asia	740 000 [480 000 – 1.1 million]	52 000 [29 000 – 84 000]	40 000 [24 000 – 63 000]	0.1% [<0.1% – 0.2%]
Latin America	1.7 million [1.5 – 2.1 million]	140 000 [88 000 – 190 000]	63 000 [49 000 – 98 000]	0.5% [0.4% – 0.6%]
North America	1.2 million [760 000 – 2 million]	54 000 [9600 – 130 000]	23 000 [9100 – 55 000]	0.6% [0.4% – 1.0%]
Western and Central Europe	730 000 [580 000 – 1 million]	27 000 [14 000 – 49 000]	8000 [4800 – 17 000]	0.3% [0.2% – 0.4%]
Eastern Europe, Central Asia	1.5 million [1.1 – 1.9 million]	110 000 [67 000 – 180 000]	58 000 [41 000 – 88 000]	0.8% [0.6% – 1.1%]
Caribbean	230 000 [210 000 – 270 000]	20 000 [16 000 – 25 000]	14 000 [11 000 – 16 000]	1.1% [1.0% – 1.2%]
Middle East and North Africa	380 000 [280 000 – 510 000]	40 000 [20 000 – 66 000]	27 000 [20 000 – 35 000]	0.3% [0.2% – 0.4%]
Oceania	74 000 [66 000 – 93 000]	13 000 [12 000 – 15 000]	1000 [<1000 – 1400]	0.4% [0.3% – 0.5%]
Total	33 million [30.3 – 36.1 million]	2.7 million [2.2 – 3.2 million]	2 million [1.8 – 2.3 million]	0.8% [0.7% – 0.9%]

Note: Some numbers do not add up due to rounding.

Prevention

- In the last two years, good progress has been made in the prevention of mother-to-child transmission of HIV.
 - The percentage of pregnant women living with HIV who received antiretroviral treatment to prevent mother-to-child transmission increased from 9% in 2004 to 33% in 2007.
 - Countries such as Botswana, Namibia, Swaziland and South Africa have experienced increases in coverage of prevention of mother-to-child transmission services.
- The scaling up of HIV prevention programmes globally is paramount.
 - The latest data collected from 64 countries indicate that fewer than 40% of young people have basic information about HIV.
 - There are positive signs of improvement in all 18 of the most heavily affected countries where there is data on changes in key behaviours – sex before 15, multiple partnerships and condom use – but in only 2 countries (Cameroon and Zambia) have improving trends in all three behaviours been found.
- For people most at risk, since 2005 we have seen a tripling of HIV prevention efforts focused on sex workers, men who have sex with men and people who inject drugs.
 - Discrimination remains a barrier to prevention access for most at risk populations; while conversely, countries which protect these populations from discrimination tend to reach more of them with HIV prevention programmes.
- The number of new HIV infections continues to outstrip the advances made in treatment numbers—for every two people put on antiretroviral drugs, another five become newly infected.

Treatment

- Nearly 3 million people were receiving antiretroviral treatment in low- and middle-income countries at the end of 2007. This represents 31% of estimated global need and a 45% improvement over 2006.
- Globally, treatment coverage is higher for women than men.
- But children are not benefiting equally as adults. In sub-Saharan Africa, children living with HIV are about one third as likely to receive antiretroviral therapy as adults.
- Increases in treatment have been extraordinary in many countries.
 - Namibia scaled up treatment from 1% in 2003 to 88% in 2007, and similarly for Rwanda, from 3% to 71% in the same period.
 - Botswana has achieved one of the world's highest coverage rates of HIV treatment, delivering drugs in 2007 to more than 90% of those who need them.
- After decades of increasing mortality, the annual number of AIDS deaths globally has declined in the past two years, in part as a result of greater access to treatment.
- The cost of providing HIV treatment will continue to increase – as some of those on treatment currently need to access second and third line treatment regimens, and as delayed access makes disease management more complex for the estimated 30 million HIV-positive people worldwide who have never been on treatment.
 - In Brazil, the cost of providing drugs in 2008 is estimated at US\$ 525 million—more than double the amount in 2004.
- Most countries have policies providing free antiretroviral drugs—however many patients have to pay 'out-of-pocket' costs such as diagnostic tests, treatments for opportunistic infections and transportation, items which can be quite considerable depending on local contexts.
 - Realizing these costs, the Government of Cameroon began making HIV treatment free in 2007, while in 2008 Indian Railways – India's national rail service – introduced discounted fares for HIV-positive people travelling to receive treatment.

Antiretroviral (ARV) treatment coverage

Geographical region	Estimated no. of people receiving ARV therapy, December 2007	Estimated no. of people needing ARV therapy, December 2007	ARV therapy coverage, December 2007
Sub-Saharan Africa	2.1 million	7 million	30%
Latin America and Caribbean	390 000	630 000	62%
East, South and South-East Asia	420 000	1.7 million	25%
Europe, Central Asia	54 000	320 000	17%
Middle East, North Africa	7000	100 000	7%
Total	2.9 million	9.7 million	31%

Note: Some numbers do not add up due to rounding.

Source: *Towards universal access: scaling up priority HIV/AIDS interventions in the health sector: progress report 2008*, WHO/UNAIDS/UNICEF, June 2008.

Tuberculosis and HIV

- Tuberculosis remains a leading cause of death for people living with HIV in low- and middle-income countries.
- While tuberculosis incidence has declined globally in recent years, the number of cases continues to increase in areas heavily affected by HIV or drug-resistant TB.
 - An estimated 22% of tuberculosis cases in Africa occur in people living with HIV—in some countries on the continent, this figure is as high as 70%.
 - TB patients with HIV have been shown to be twice as likely to have multidrug resistant tuberculosis (MDR-TB) as people who are not HIV-positive.
- Despite the availability of affordable treatments for tuberculosis, only 32% of TB cases in people living with HIV received both antiretroviral and anti-tuberculosis drugs—the greatest need for dual treatment is in sub-Saharan Africa.
- Efforts to prevent, diagnose and treat tuberculosis must be scaled up in HIV care settings.

Resource availability and needs

- In 2007, US\$ 10 billion were available for HIV.
 - UNAIDS estimates there was a funding gap of US\$ 8.1 billion last year between resources available from all sources and resources needed.¹
- To achieve universal access by 2010, much greater support will be required from donors, domestic and private sources.
 - Simply to maintain the current pace of universal access scale-up – which would miss universal access by 2010 – funding levels will need to increase by over 50% by 2010.

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¹ From http://data.unaids.org/pub/Presentation/2008/080704_unaids_kff_g8_slide_set_en.ppt