



AIDS is still a global public health threat...

Rationale

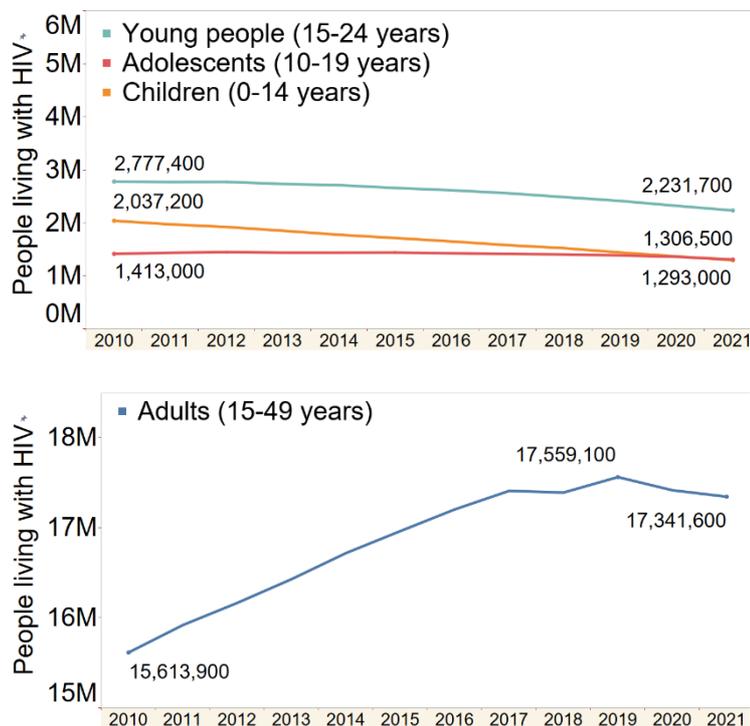
HIV remains a major public health issue that affects millions of people in the WHO African Region. Over the last few years progress towards HIV goals has stalled, resources have shrunk, and millions of lives are at risk as a result. WHO is calling on global leaders and citizens to boldly recognize and address the inequalities which are holding back progress in ending AIDS; and equalize access to essential HIV services particularly for children and key populations. This Fact Sheet highlights the recent AIDS situation in the WHO African Region on epidemics and investment.

Key messages

- An estimated 25.6 million [23.4–28.6 million] people were living with HIV in 2021 in the African Region.
- An estimated 20.1 million people living with HIV were on antiretroviral therapy in 2021.
- An estimated 860 000 [660 000–1.2 million] people became newly infected with HIV in 2021 in the African Region; and new infections among all ages decreased to 0.78 [0.60–1.07] out of 1000 uninfected population in 2021 from 0.86 [0.66–1.18] in 2020.
- 420 000 [340 000–530 000] deaths were attributed to HIV-related causes in 2021 in the African Region, a decrease of around 7.1% from 2020.
- Among people living with HIV, 88% knew their HIV status; 78% were on ART and 72% were virally suppressed in 2021, in the African Region.
- At the end of 2021, US\$ 21.4 billion (in constant 2019 United States dollars) was available for the AIDS response in low- and middle-income countries—around 60% was from domestic sources.

1. People living with HIV

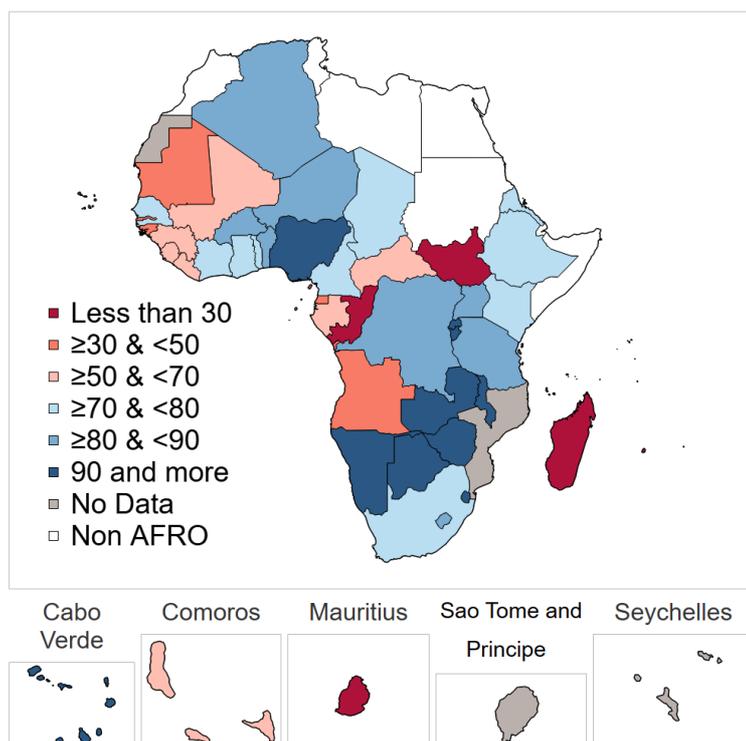
Figure 1. Trend in people living with HIV by age group, in the African Region, 2010-2021 (source: UNAIDS)



- An estimated 25.6 million people were living with HIV in 2021 in the African Region, an increase of about 300 000 people compared to 2020.
- Around more than 1.2 million of children (0-14 years) living with HIV in the Region, a decrease of about 36 % compared to 2010 (Figure 1).
- The number of young people (15-24 years) living with HIV was estimated to be 2.2 million in 2021 in the African Region, a 20% reduction from 2010 (Figure 1).
- The number of adults (15-49 years) living with HIV has been rising sharply since 2010, reaching a peak of about 17.5 million in 2019 in the African Region. This number was estimated to reach 17.3 million by 2021.

2. People living with HIV accessing antiretroviral therapy

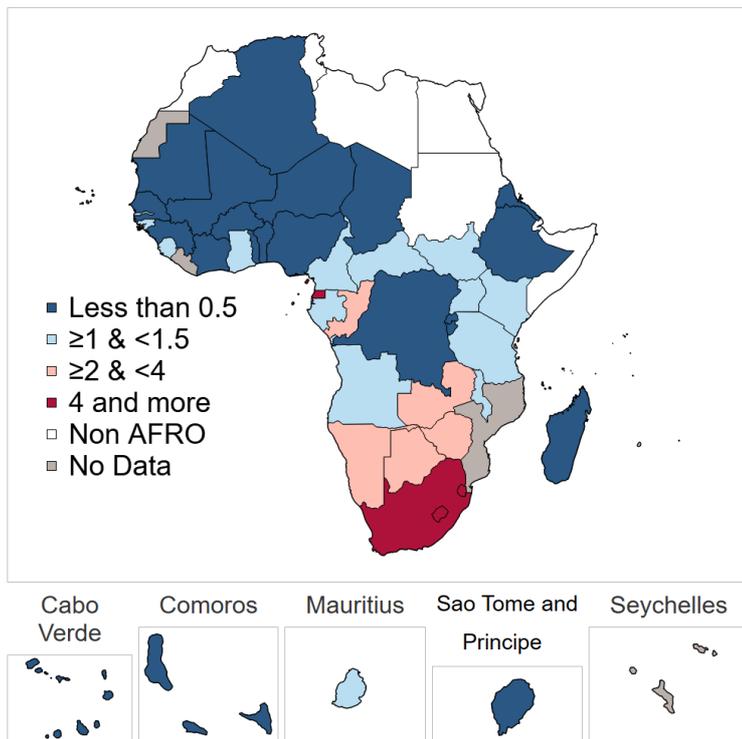
Figure 2. Percentage of people living with HIV receiving antiretroviral therapy (ART), in the African Region, 2021 (source: UNAIDS)



- 20.1 million of people received antiretroviral therapy in 2021 in the African Region, an increase of about 1.1 million compared to 2020.
- About 78 % of people living with HIV were on treatment (antiretroviral therapy) in the Region in 2021. This rate was 75% in 2020.
- In 2021, in the African Region, the lowest ART coverage (%) were recorded in Madagascar (15), followed by Congo (23), Mauritius (26) and South Sudan (27) (Figure 2).
- 970 000 (83 %) pregnant women living with HIV received ART to preventing mother-to-child transmission in 2021 in the Region. This number was 990 000 (83%) in 2020.

3. New HIV infections

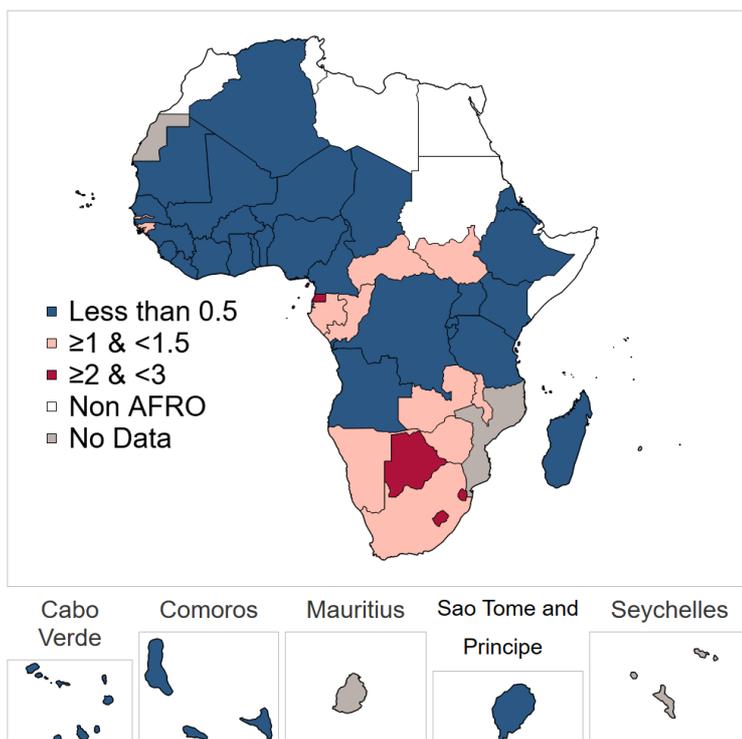
Figure 3. New HIV infections (per 1000 uninfected population), in the African Region, 2021 (source: WHO)



- An estimated 860 000 people became newly infected with HIV in 2021 in the African Region; and new infections among all ages decreased to 0.78 out of 1,000 uninfected population in 2021 from 0.86 in 2020.
- In the Region, the HIV incidence rate was higher among women (0.98 per 1,000 uninfected women) than among men (0.58 per 1,000 uninfected men) in 2021.
- In 2021, in the African Region, HIV was the most incident in Eswatini (around 7.65 new infections per 1000 uninfected population), followed by Lesotho (4.76 as incidence rate) and South Africa (around 4.19 as incidence rate).
- HIV transmission is estimated to be lower in West Africa than in the rest of the Region in 2021 (Figure 3).
- 210,000 (25% of total) new HIV infections among adolescent girls and young women who only make up 10-15% of the population.

4. AIDS-related deaths

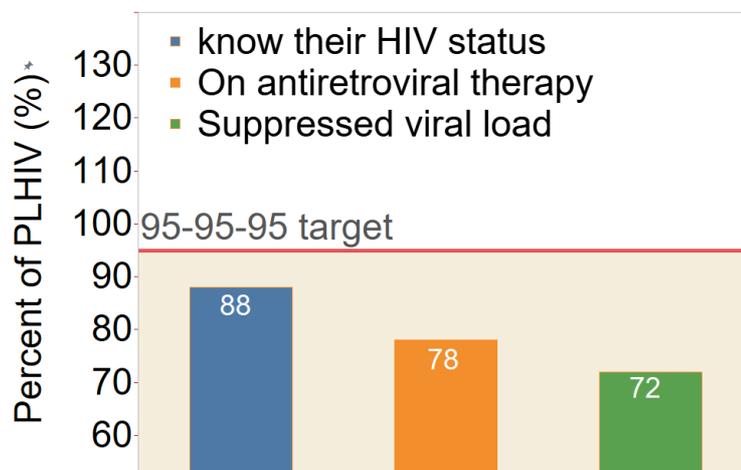
Figure 4. Number of HIV deaths (per 1000 population), in the African Region, 2021 (source: WHO)



- An estimated 420 000 deaths were attributed to HIV-related causes in 2021 in the African Region, a decrease of around 7.1% from 2020. (A 55% decrease since 2010)
- In 2021, in the African Region, the highest HIV mortality rate was recorded in Lesotho (2.43 deaths per 1,000 population), followed by Eswatini (2.28 deaths per 1,000 population), Botswana (1.87 deaths per 1,000 population) and Equatorial Guinea (1.59 deaths per 1,000 population).
- Most countries in the region had HIV mortality rates of less than 0.5 deaths per 1,000 population in 2021 (Figure 4).

5. Treatment cascade: 95-95-95

Figure 5. WHO African Region 95-95-95 cascade, 2021 (source: WHO)



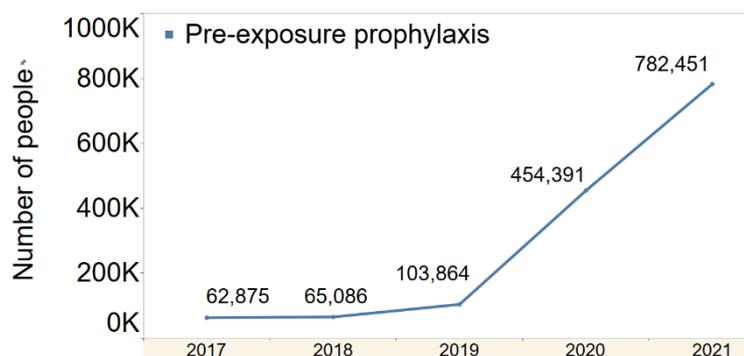
Testing and diagnostics are critical components of the United Nations' 95-95-95 targets to end the HIV epidemic. HIV testing services and infant diagnosis support the first target of 95% of people living with HIV to know their HIV status. Antiretroviral therapy supports the second target of 95% of HIV treatment among those who know their HIV status. HIV treatment monitoring supports the third target of 95% of people living with HIV on antiretroviral therapy to be virally suppressed.

However, gaps in meeting these targets remain across countries, and populations. Improving, scaling up, and introducing new innovations in HIV testing and diagnostics will increase access and improve care for people living with HIV to meet global treatment and prevention targets.

- In 2021, in the African Region, 88% of people living with HIV (PLHIV) knew their HIV status.
- Among people who knew their status, 89% were accessing treatment.
- And among people accessing treatment, 92% were virally suppressed.
- Among people living with HIV, 88% knew their HIV status; 78% were on ART and 72% were virally suppressed in 2021, in the African Region (Figure 5).
- The percentage of viral load suppression was the lowest in Mauritius (16%), followed by South Sudan (17%) and Ghana (31%).
- The percentage of viral load suppression was the highest in Eswatini (86%), followed by Botswana (84%) and Rwanda (80%).

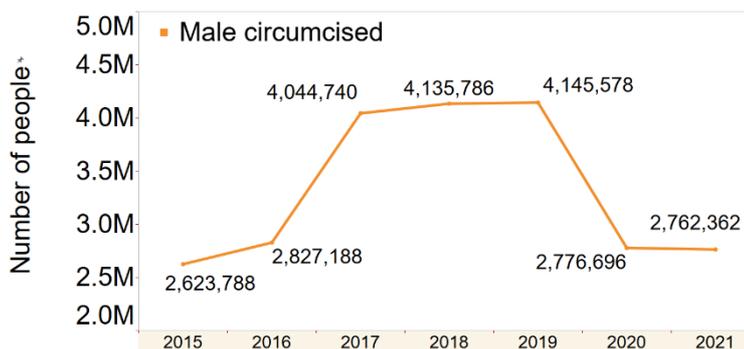
6. Combination HIV Prevention for all

Figure 6. Trend in the number of people receiving pre-exposure prophylaxis in the African Region (source: WHO)



- In 2021, about 782 451 people received pre-exposure prophylaxis in the African Region, which is an increase of 72% compared to 2020 (Figure 6).
- About 1.62 billion condoms were distributed in the Region in 2020. This number was about 1.69 billion in 2019.
- The percent of condom use at last high-risk sex ranged between 8.8% and 79% in the African Region countries (most recent data as of 2021). The lowest percentages of condom use at last high-risk sex were recorded in Madagascar (8.8%), followed by Sierra Leone (11.9 %) and Ghana (25.8%).

Figure 8. Trend in the number of males circumcised in the African Region (source: UNAIDS)



Compelling evidence indicates that male circumcision reduces the risk of men heterosexually acquiring HIV infection by approximately 60%. Three randomized controlled trials have shown that male circumcision provided by well-trained health professionals in properly equipped settings is safe and can reduce the risk of acquiring HIV. Other benefits of medical male circumcision include the reduced risk of some other STIs, including human papillomavirus, the cause of cervical cancer. The World Health Organization (WHO) and UNAIDS recommendations emphasize that voluntary medical male circumcision should continue to be provided as an additional efficacious HIV prevention option within combination prevention for adolescents 15 years and older and adult men in settings with generalized epidemics to reduce the risk of heterosexually acquired HIV infection.

- In the Region, the highest percentages of condom use at last high-risk sex were recorded in Zimbabwe (79%), followed by Lesotho (76.3%) and Namibia (70.3%).
- More than 2.7 million of males were circumcised in the African Region in 2021, a 33% reduction compared to 2019.
- The prevalence of male circumcision ranged between 14.3% and 99.4% in the African Region countries (most recent data as of 2021). The lowest prevalence of male circumcision was recorded in Zimbabwe (14.3%), followed by Namibia (25.5%) and Malawi (27.8%).
- In the Region, the highest prevalence of male circumcision was recorded in Sierra Leone (99.4%), followed by Niger (99.4%) and Comoros (99.3%).
- More than 91 million HIV tests were conducted (testing volume) in the Region in 2019 (including over 18 million tests in South Africa).
- The HIV positivity rate in the African Region ranged between 0.0016% and 8.3% in 2019. The highest HIV positivity rates were notified in Gabon (8.3%), followed by Eswatini (6.4%) and Central African Republic (6.4%).
- More than 2.8 million people have self-tested for HIV in the Region in 2019 (including over 400 000 self-tests in ...)

7. Investments

Globally, investing fully will result in reducing annual new HIV infections from 1.7 million in 2019 to 370 000 in 2025, and annual AIDS-related deaths, including tuberculosis deaths, falling from 690 000 in 2019 to 250 000 in 2025.

Investments in eastern and southern Africa have seen new HIV infections decline by 38% and AIDS-related deaths by 49% since 2010. In countries such as Botswana, Eswatini and Namibia, where significant investments have been made—both domestic and international—there has been significant progress towards meeting the Fast-Track Targets. In western and central Africa, however, where investments have been lower, since 2010 new HIV infections have decreased by only 25% and AIDS-related deaths by only 37%. In too many countries and communities, resources are inadequate.

- UNAIDS estimates that US\$ 29 billion (in constant 2019 United States dollars) will be required for the AIDS response in low- and middle-income countries, including countries formerly considered to be upper-income countries, in 2025 to get on track to end AIDS as a global public health threat.
- At the end of 2021, US\$ 21.4 billion (in constant 2019 United States dollars) was available for the AIDS response in low- and middle-income countries—around 60% was from domestic sources.
- In general, about 40% of the HIV response is funded from domestic resources.

8. WHO “data for impact” strategy to end the HIV epidemic

HIV data and statistics

In partnership with UNAIDS, WHO provides global reports; collects and validates data with partners through the Global AIDS Monitoring mechanism; and develops guidelines for strategic information, case surveillance, patient monitoring, digital health and data use. The strategic information team works with regions and countries to strengthen monitoring and evaluation systems, which are a key building block in country health systems.

Person centered HIV patient monitoring

HIV patient monitoring is essential to ensure the quality and continuity of HIV care, as well as treatment for adults, pregnant and breastfeeding women, and infants and children. It generates data that enable programmes to monitor the treatment and health status of patients over time, and to measure programme performance across health facilities and geographical settings.

Monitoring and evaluation

WHO leads the monitoring and evaluation of the health sector response to HIV. It also provides technical support to countries to set national targets for key interventions and to monitor progress against relevant indicators.

HIV surveillance

Understanding trends in HIV data is a cornerstone of the public health response to HIV. HIV surveillance brings together information from a range of sources to:

- new HIV infections
- estimate how many people are living with HIV
- understand who is being infected and why; and
- assess the impact of HIV prevention, testing, and treatment services across different population groups.

This ongoing collection, analysis and dissemination of HIV data provides evidence for decision-making. It also tracks national and global progress towards the United Nations target to end the AIDS epidemic by 2030.

WHO provides support to Member States by characterizing the current epidemiology of HIV, reviewing surveillance approaches and methods, and producing strategic information guidelines.

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Sources

- Data are from WHO [Global HIV programme](#), [UNAIDS](#) and [integrated African Health Observatory](#).
- **Photography:** [@John Rae photography](#)

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