

Summarizing a decade of progress: substantial gains, but targets missed

Since 2001, the global HIV response has resulted in major gains, including notable reductions in rates of new HIV infections and AIDS-related deaths, as well as unprecedented advances in expanding access to essential services for HIV prevention, treatment, care and support. These important achievements, however, are unevenly distributed, exceedingly fragile, and short of agreed targets.

Between 2001 and 2009, global HIV incidence steadily declined, with the annual rate of new infections falling by nearly 25%. A more complex and varied picture emerges, however, at the regional level. Above-average declines in HIV incidence have occurred in sub-Saharan Africa and in South and South-East Asia, while Latin America and the Caribbean and Oceania regions experienced more modest reductions of less than 25%. Rates of new infections have remained relatively stable in East Asia, Western and Central Europe, and North America. HIV incidence has steadily increased in the Middle East and North Africa, while in Eastern Europe and Central Asia, a decline in new infections was reversed mid-decade, with incidence rising slightly from 2005 to 2009.

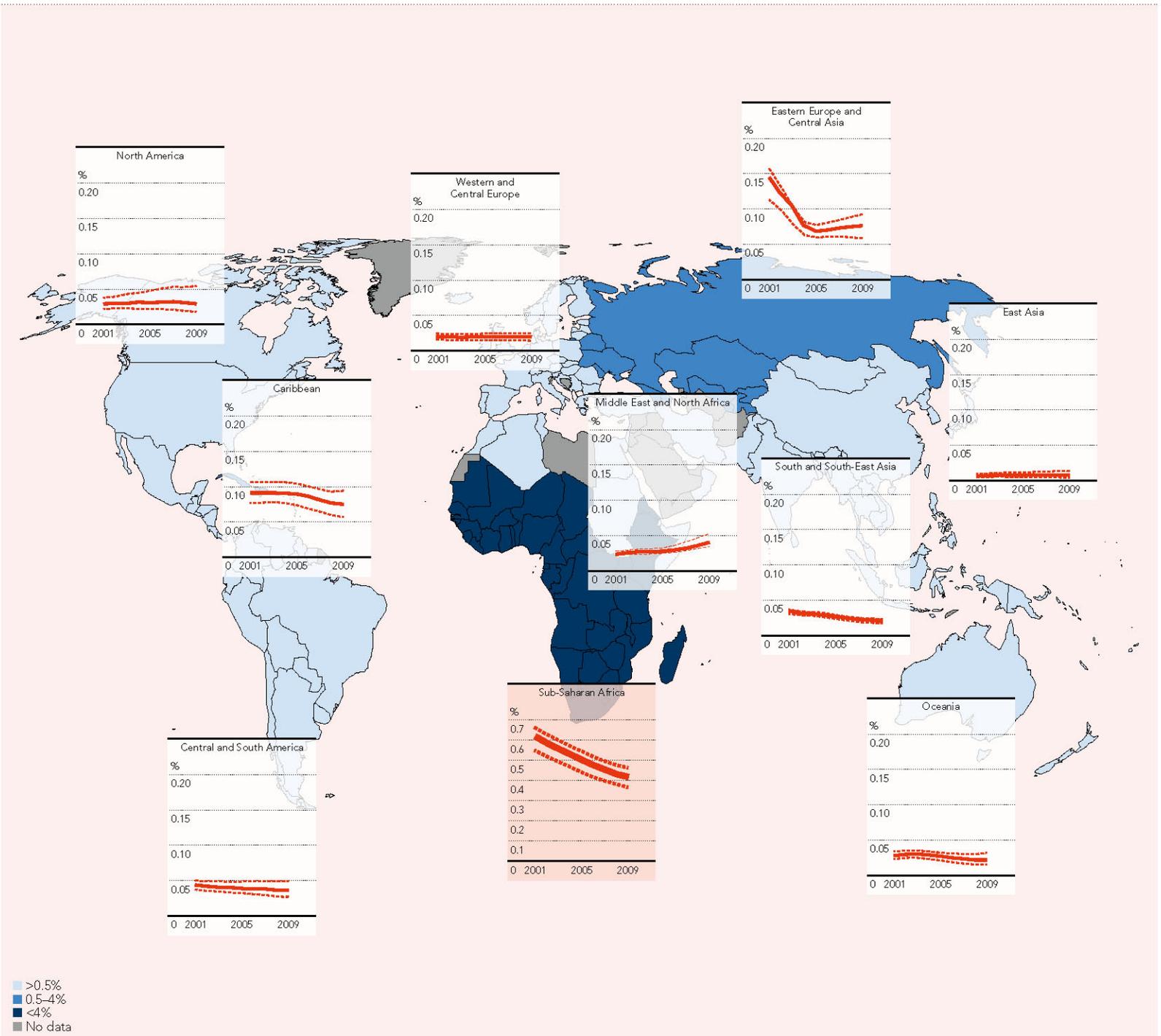
Summary of performance in low- and middle-income countries against programmatic targets, 2001–2010

Component	Agreed targets	Achieved
Young people's comprehensive knowledge of HIV	2010: 95%	34% (2009) ¹
Coverage of antiretroviral drugs for prevention of vertical transmission	2010: 80%	53% (2009)
Reduction in vertical transmission rate	2010: 50%	21% (2009)
Antiretroviral therapy	2005: 3 million 2010: universal access	1.3 million (2005) 6.6 million (2010)
Reduction in HIV prevalence among young people (as a proxy for incidence)*	2010: 25%	24% (2009) in all countries

* Global performance
1) Males 34%, Females 24%

”There is often considerable variation in HIV prevalence and epidemiological patterns within countries. Hotspots of high HIV transmission may extend beyond national borders.”

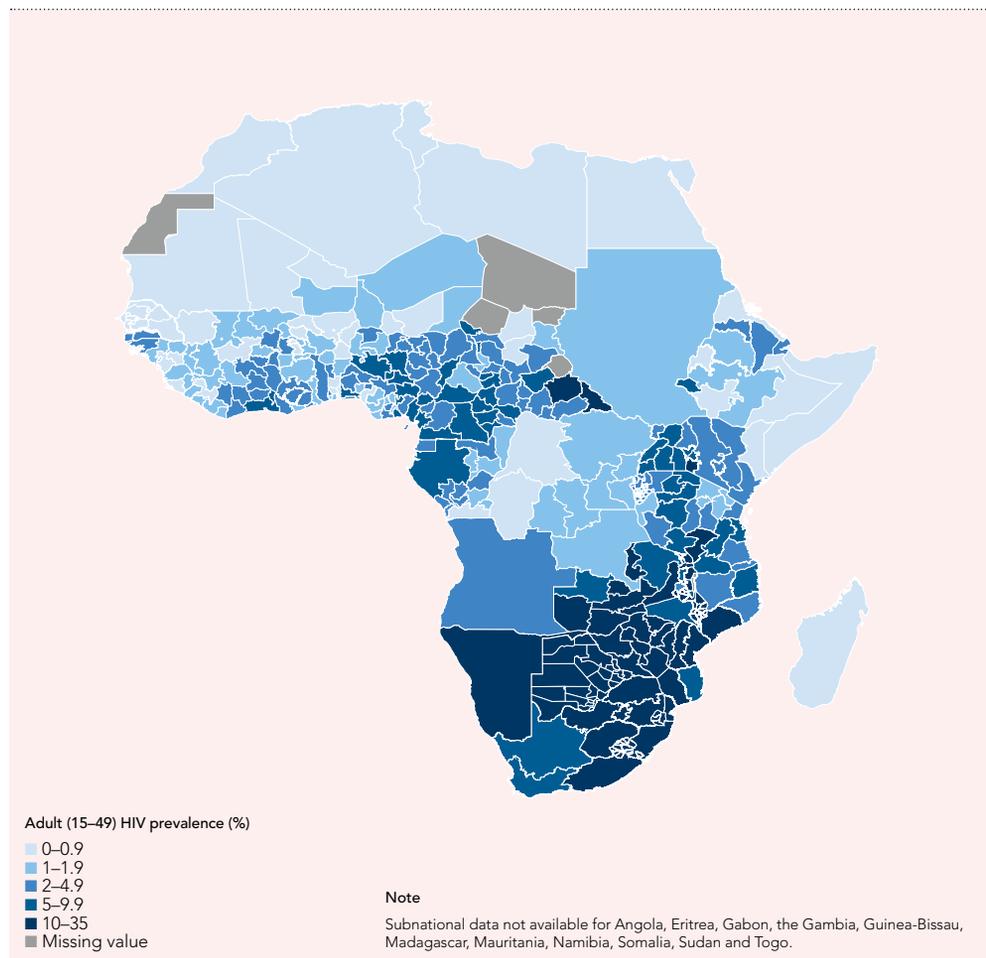
Regional adult HIV prevalence in 2009 and trends in HIV incidence, 2001–2009



» Improved surveillance and other data collection have taken place during 2001–2009. Although it is common to speak of “national” epidemics, there is often considerable variation in HIV prevalence and epidemiological patterns within countries, and epidemic ‘hotspots’ are apparent. While national HIV prevalence in the Central African Republic, Kenya and the United Republic of Tanzania is below 10%, each of these countries also has hyperendemic regions where more than 10% of adults are living with HIV. Hotspots of high HIV transmission may extend beyond national borders, such as in the western part of the Central African Republic and south-east Cameroon, or in areas bordering Lake Victoria in Kenya, the United Republic of Tanzania and Uganda. These patterns highlight the importance of local strategic focus for national responses and regional cooperation in forging effective strategies to address cross-border patterns.

After low-level responses in the epidemic’s first two decades, the most recent decade brought historic achievements. These gains, while unprecedented, are partial at best. The establishment of global and national targets helped drive these successes in the response. In most cases, though, the world failed to achieve these targets, underscoring the need now to build on the previous decade’s achievements to ensure long-term success in the response. «

Know your epidemic: subnational estimates of HIV prevalence in sub-Saharan Africa, 2001–2010



34
million

The number of people living with HIV
was around 34 million worldwide in 2010