BOTSWANA

Since 2009 Botswana has reduced new HIV infections among children by 63%, with an estimated 330 new infections among children and a mother-to-child HIV transmission rate down to 3% in 2015. During 2015 more than 90% of pregnant women living with HIV accessed antiretroviral medicines for the prevention of mother-to-child transmission; of that group, 68% received lifelong antiretroviral therapy. Botswana has one of the best paediatric treatment coverage rates, with over 95% of children living with HIV accessing antiretroviral therapy, although only 45% of infants exposed to HIV receive timely infant diagnosis of HIV. Botswana has been a leader in innovating national HIV service delivery models, including provider-initiated testing and nurse-initiated antiretroviral therapy programmes.



330 NEW INFECTIONS AMONG CHILDREN IN 2015



9 OUT OF 10

PREGNANT WOMEN LIVING WITH HIV ACCESSING ANTIRETROVIRAL MEDICINES TO PREVENT MOTHER-TO-CHILD-TRANSMISSION OF HIV



63%

DECREASE IN THE NUMBER OF NEW HIV INFECTIONS AMONG CHILDREN, 2009-2015

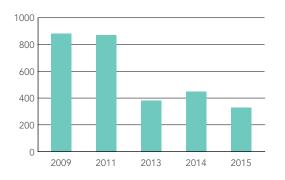


3%

RATE OF MOTHER-TO-CHILD HIV TRANSMISSION, INCLUDING DURING BREASTFEEDING

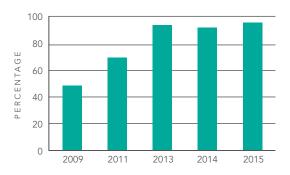
NEW HIV INFECTIONS AMONG CHILDREN

Number of new HIV infections among children (aged 0-14 years)



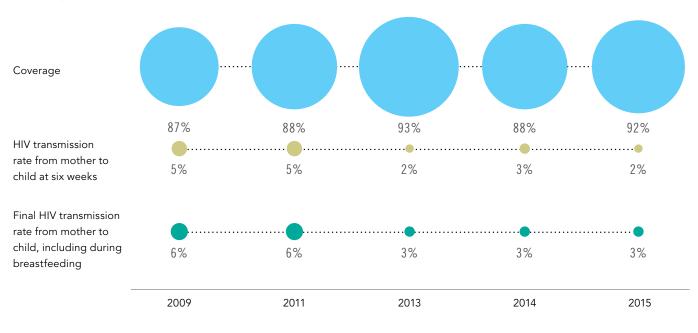
ART COVERAGE AMONG CHILDREN

Percentage of children (aged 0–14 years) living with HIV who have access to antiretroviral therapy



COVERAGE VS. TRANSMISSION

Increasing coverage of antiretroviral medicines has translated into decreasing rates of HIV transmission from mother to child



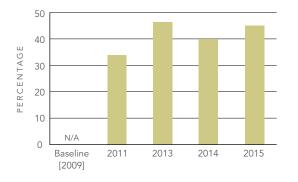
FAMILY PLANNING-UNMET NEED

Percentage of unmet need for family planning

NO DATA

EARLY INFANT DIAGNOSIS

Percentage of infants born to women living with HIV receiving a virological test by two months of age



WOMEN ACQUIRING HIV INFECTION

The number of women (aged 15–49 years) acquiring HIV decreased by 21% since 2009

2009	*****	6000
2011	*** ***	5900
2013	*** ***	5400
2014	** ***	5000
2015	** ***	4700
a = 1000		

Source: UNAIDS 2016 estimates, unless otherwise noted. Every year, countries update their HIV estimates, including the historical trends of those estimates. The 2016 results reflect updated surveillance and programme data and improved models. The 2016 estimates are likely to differ to estimates produced in earlier years and are believed to be more accurate. Paediatric antiretroviral therapy coverage is based on all children living with HIV, while in previous years it was restricted to children eligible for antiretroviral therapy.