NAMIBIA

Namibia has reduced new HIV infections among children by 79% since 2009. Namibia provides antiretroviral medicines to 95% of pregnant women living with HIV, meeting the Global Plan goal of 90% coverage. Continued attention to the provision of antiretroviral medicines to women throughout the breastfeeding period will address differences in vertical transmission rates, which rise from 2% at six weeks to 4% after breastfeeding ends. Namibia has the highest rate of children receiving paediatric treatment among the priority countries: in 2015 over 95% of children living with HIV received antiretroviral therapy.



370

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



79%

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

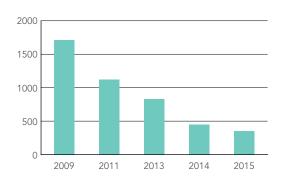


4%

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

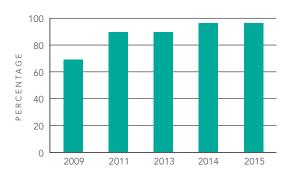
NEW HIV INFECTIONS AMONG CHILDREN

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



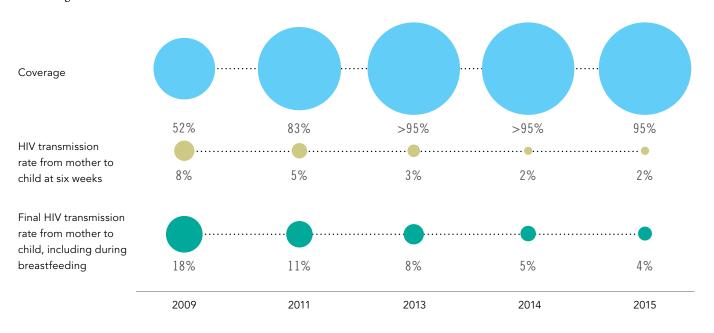
ART COVERAGE AMONG CHILDREN

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

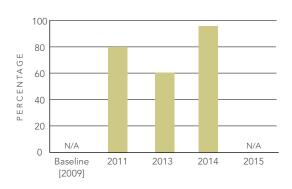
Percentage of unmet need for family planning



Source: Demographic and Health Survey, 2013, all currently married women (aged 15–49 years).

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 14% since 2009



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.