

# ZIMBABWE

Zimbabwe achieved a 65% reduction in new HIV infections among children between 2009 and 2015. An estimated 84% of pregnant women living with HIV received antiretroviral medicines to prevent mother-to-child transmission in 2015. Zimbabwe has adopted Option B+, and this is reflected in increasing progress in reducing mother-to-child transmission. However, there still remains a challenge with retaining women on antiretroviral medicines throughout the breastfeeding period, as the mother-to-child transmission rate of 4% at six weeks rises to 7% at the end of breastfeeding. Paediatric diagnosis and treatment require continued attention: in 2015 only 54% of infants exposed to HIV received an early infant diagnosis test, although 80% of children living with HIV accessed antiretroviral therapy.



4900

NEW INFECTIONS AMONG CHILDREN IN 2015



8 OUT OF 10

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



65%

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

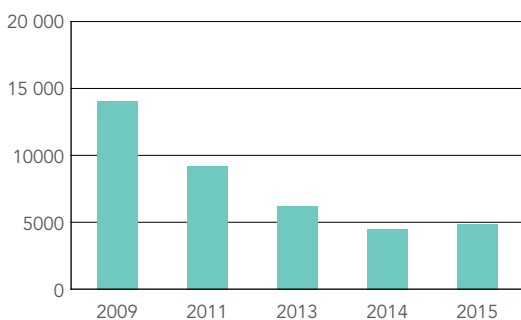


7%

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

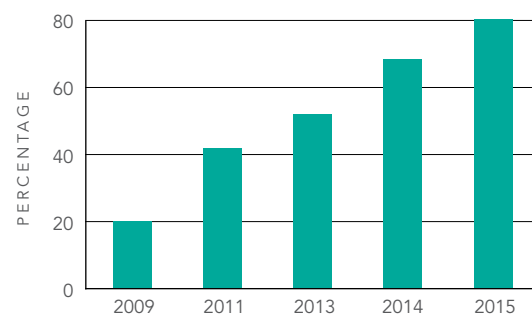
## NEW HIV INFECTIONS AMONG CHILDREN

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



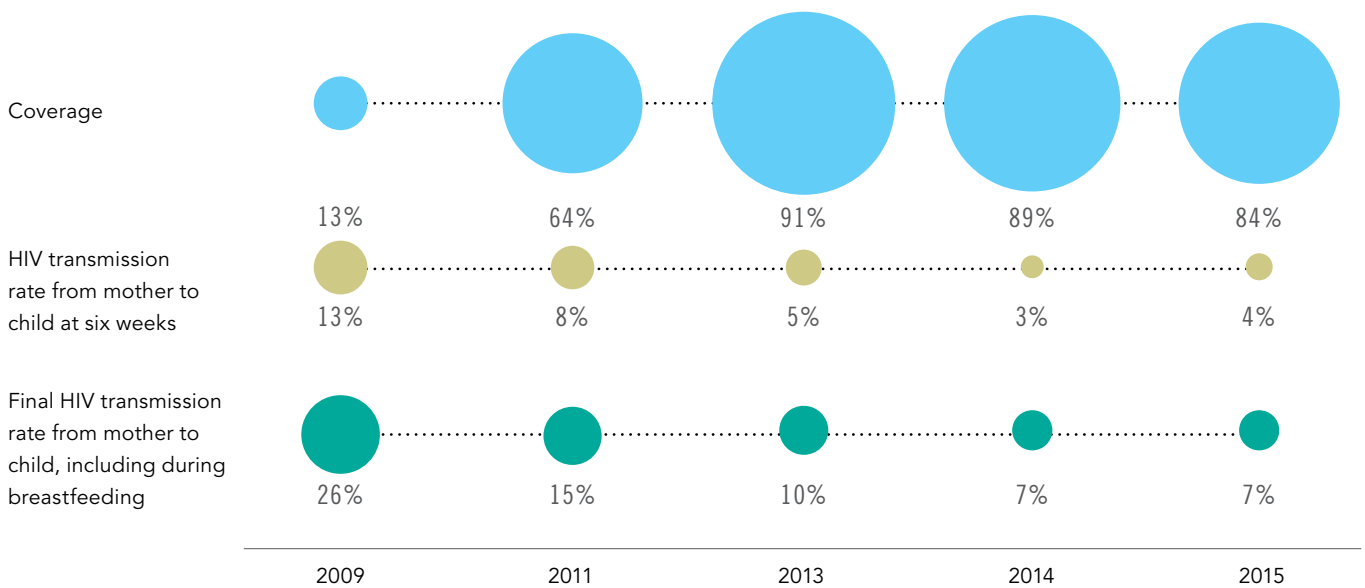
## ART COVERAGE AMONG CHILDREN

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



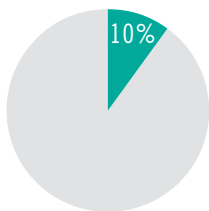
## COVERAGE VS. TRANSMISSION

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, 2015, all currently married women (aged 15–49 years).

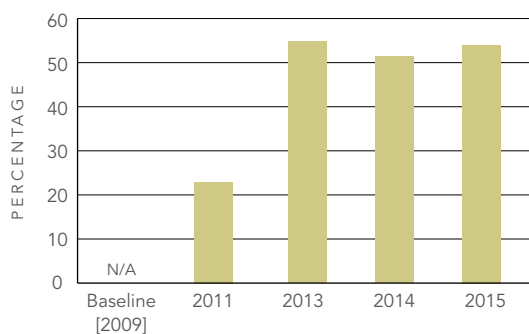
## WOMEN ACQUIRING HIV INFECTION

The number of women (15–49 years old) acquiring HIV decreased by 17% since 2009



## EARLY INFANT DIAGNOSIS

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



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.