

ANGOLA

Angola has shown slow progress with a decline of 24% in the number of new HIV infections among children since 2009. There has been improvement in programme coverage of women receiving antiretroviral medicines to prevent mother-to-child transmission, with coverage rising from 17% in 2009 to 40% in 2015. The final mother-to-child transmission rate remains high at 21%, and the number of women newly infected with HIV has remained relatively unchanged, decreasing by 5% since 2009. Paediatric treatment is an area for continued focus, as only 24% of children living with HIV were provided with antiretroviral therapy.



4300

NEW INFECTIONS AMONG CHILDREN IN 2015



4 OUT OF 10

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



24%

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

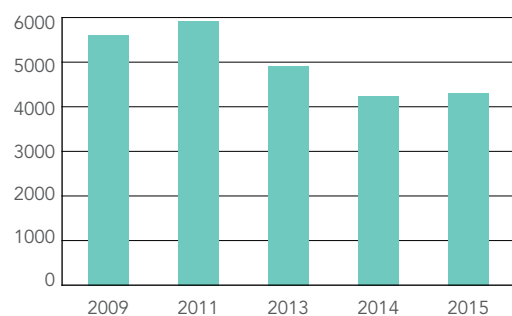


21%

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

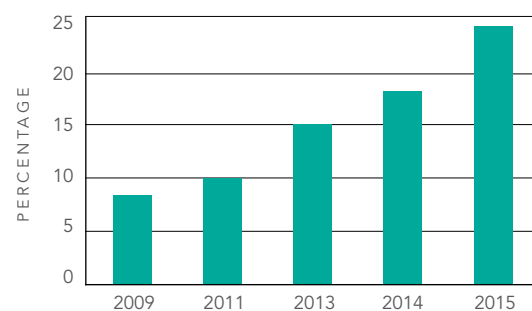
NEW HIV INFECTIONS AMONG CHILDREN

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



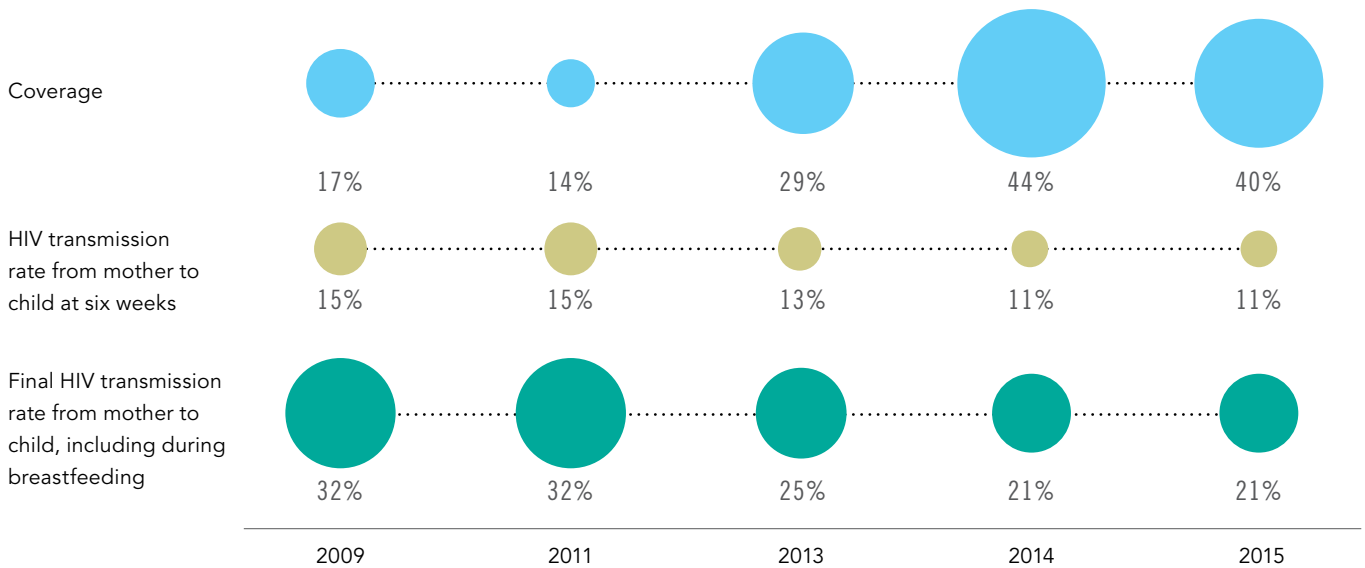
ART COVERAGE AMONG CHILDREN

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



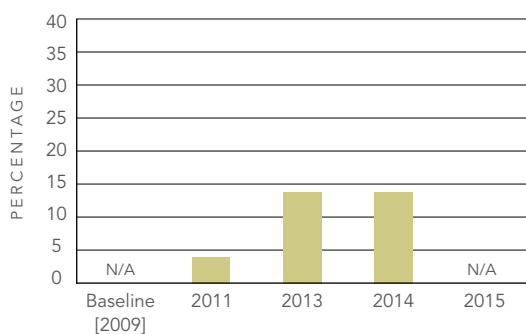
FAMILY PLANNING—UNMET NEED

Percentage of unmet need for family planning



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 5% 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.