

SWAZILAND

Swaziland reduced new child HIV infections by 80% between 2009 and 2015. Swaziland has achieved the Global Plan goal of 95% of pregnant women living with HIV receiving antiretroviral medicines. It has also reached the Global Plan milestone of reducing mother-to-child transmission to under 5% among breastfeeding women, with a final transmission rate of 3% at the end of 2015. Swaziland started implementation of Option B+ in 2014. It also provided early infant diagnosis to an estimated 81% of infants exposed to HIV, one of the highest rates among the focus countries. Paediatric treatment, however, requires continued attention, as an estimated 22% of children living with HIV are not receiving 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



80%

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

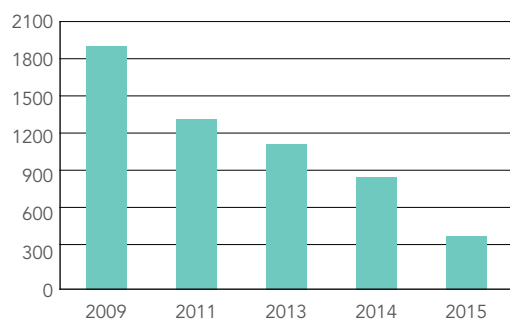


3%

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

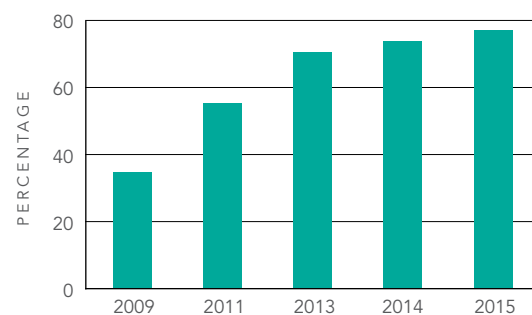
NEW HIV INFECTIONS AMONG CHILDREN

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



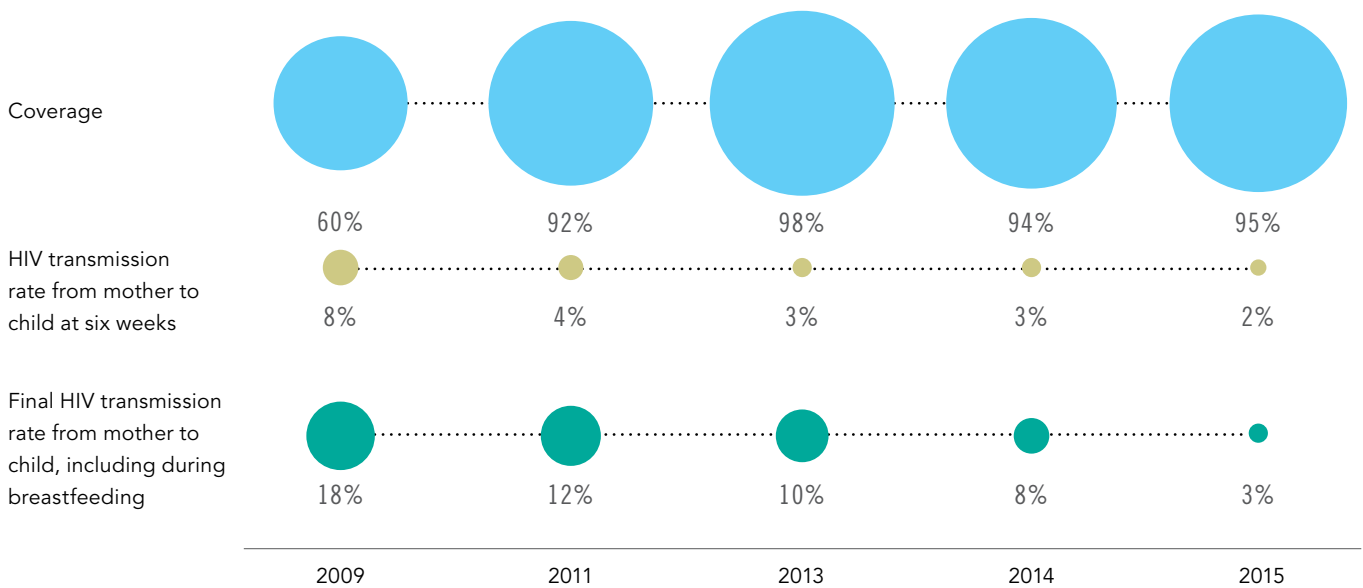
ART COVERAGE AMONG CHILDREN

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



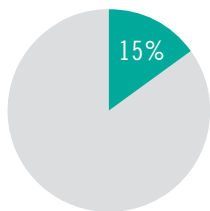
COVERAGE VS. TRANSMISSION

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



FAMILY PLANNING—UNMET NEED

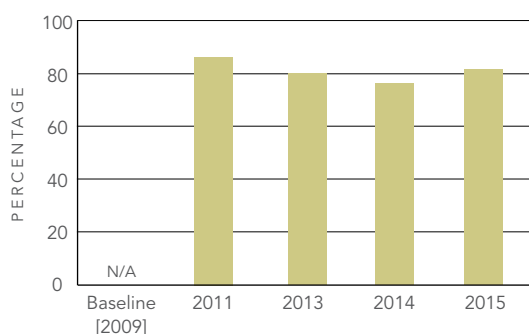
Percentage of unmet need for family planning



Source: Multiple Indicator Cluster Survey, 2014, 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 (15–49 years old) acquiring HIV decreased by 13% 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.