2024 Global HIV Estimates on children, adolescents and pregnant women

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12 September 2024





Outline

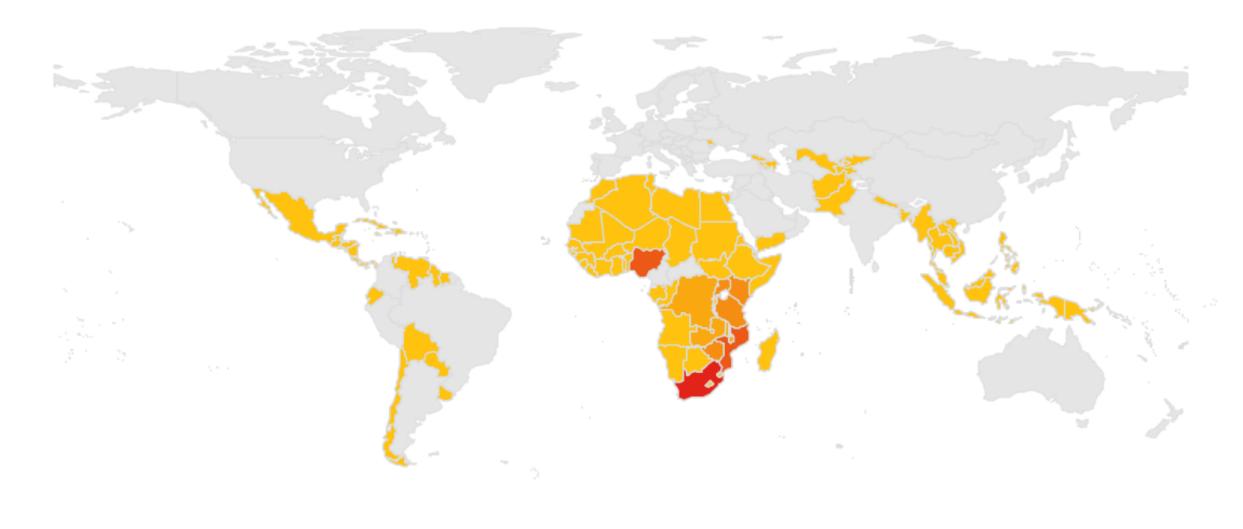


- 01. Global HIV burden
- **02.** Vertical transmission of HIV
- **03.** Pediatric treatment
- 04. Adolescent treatment
- 05. Adolescent prevention
- 06. Takeaways and next steps

Although strides have been made in the HIV response, children and adolescents are still affected by the epidemic

Number of children and adolescents ages 0-19 living with HIV

Sub-Saharan Africa is home to over 80% of children living with HIV aged 0-19 years

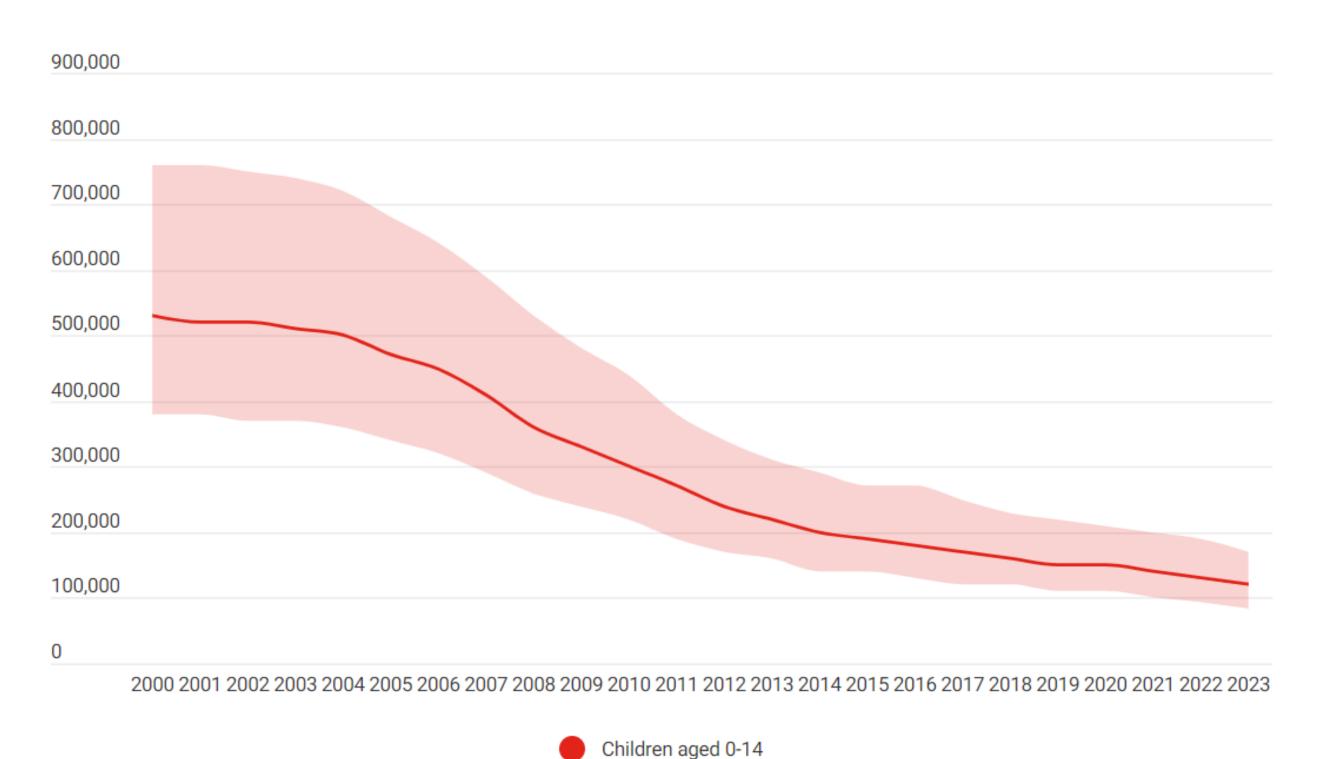




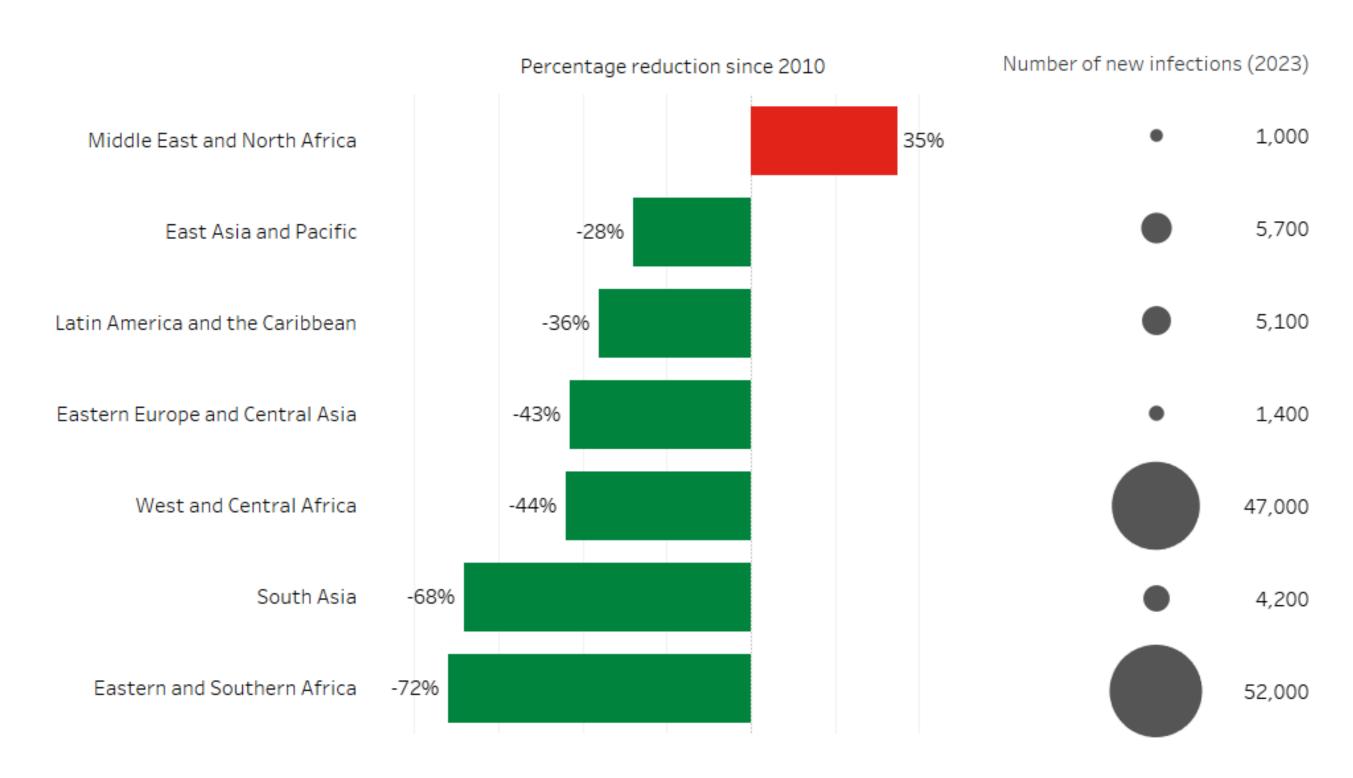
This map does not reflect a position by UNICEF on the legal status of any country or territory or the delimitation of any frontiers.

Since 2010, new infections have dropped by 62 per cent among children aged 0-14 years

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

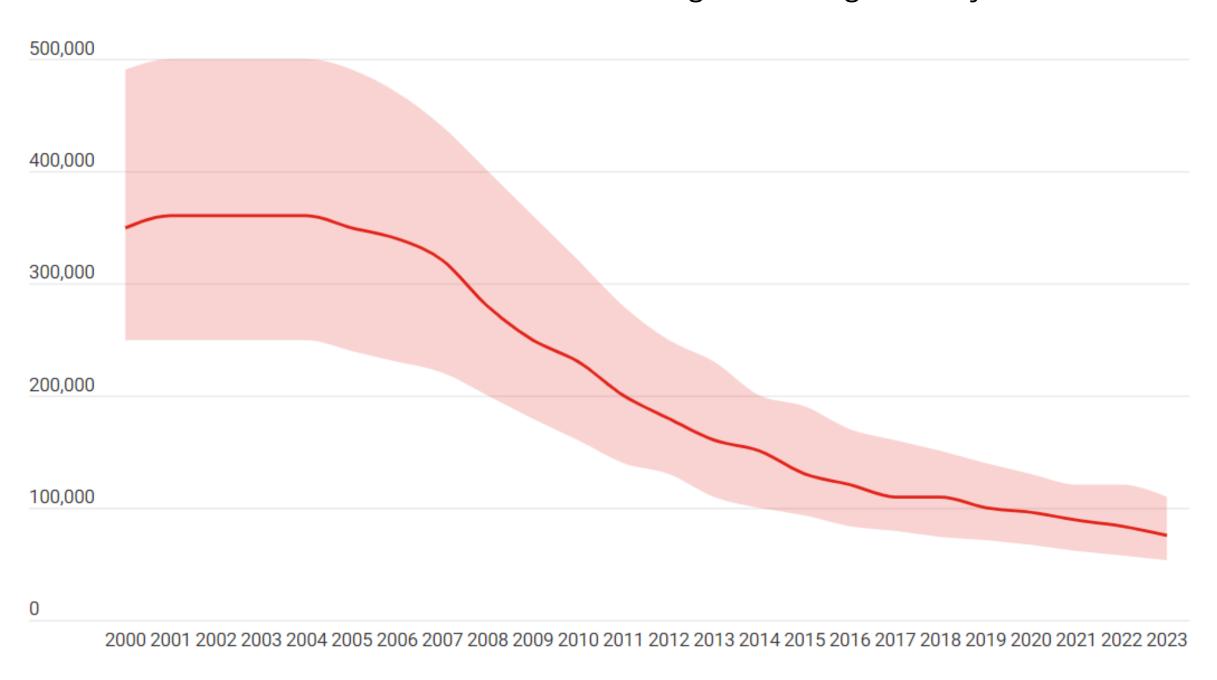


Regional variation in the percentage reduction since 2010 in new HIV infections among *children aged 0-14 years*, taking note of overall number of new infections



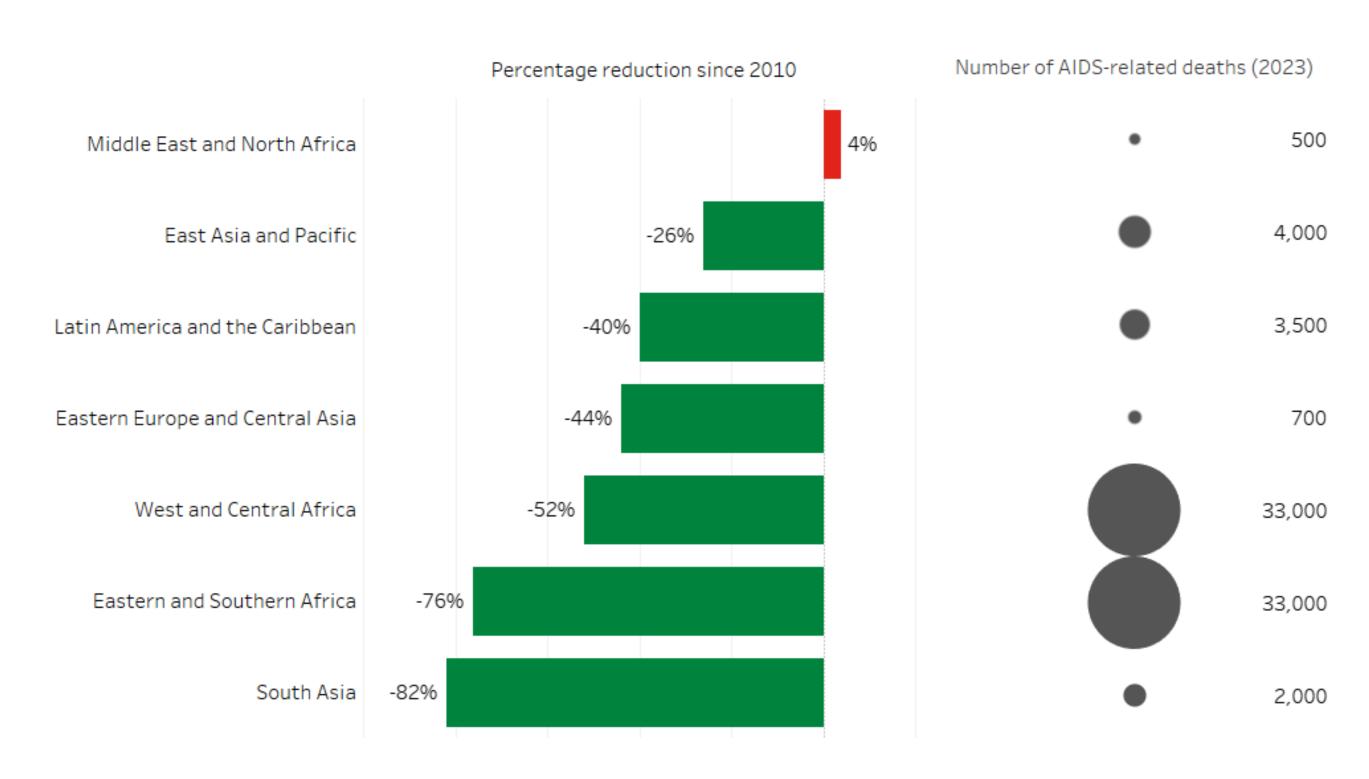
While tremendous strides have been made in early childhood survival for children living with HIV, alarmingly, last year, 250 children aged 0-14 died from AIDS-related causes every day

Number of AIDS-related deaths among children aged 0-14 years



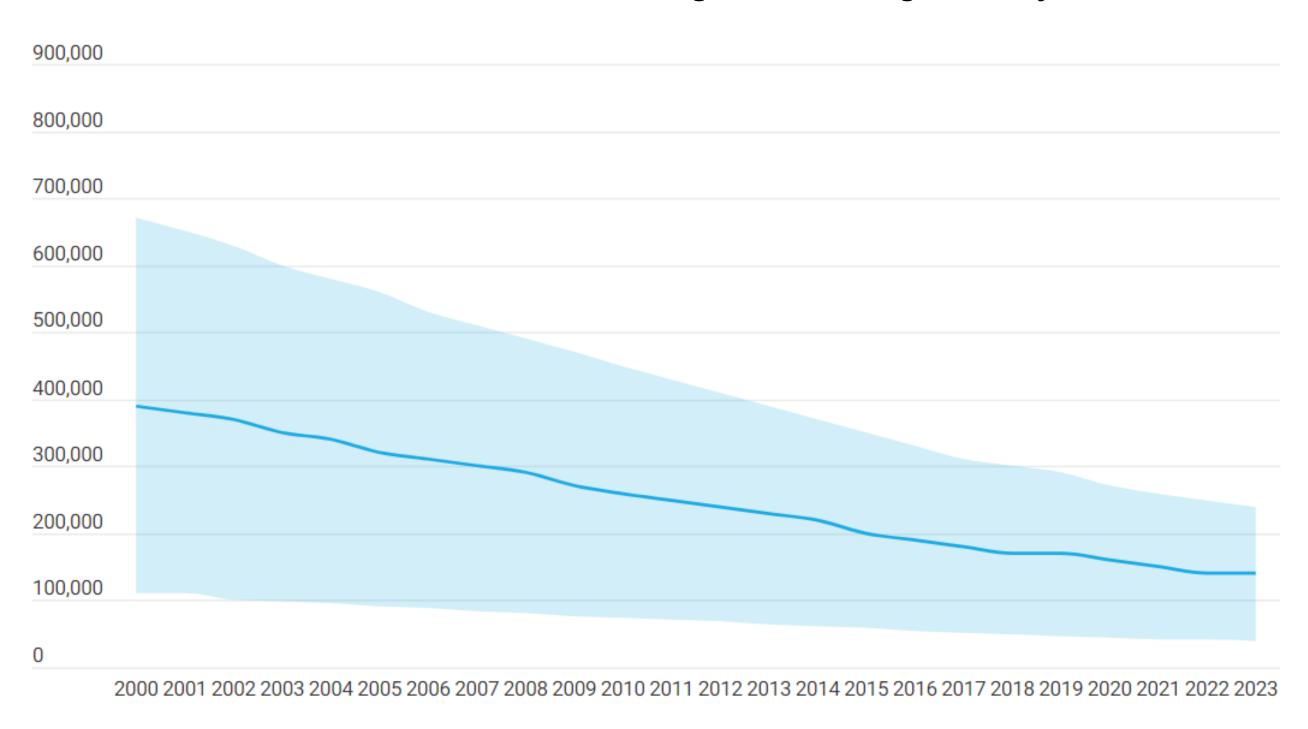
Children aged 0-14

Regional variation in the percentage reduction since 2010 in AIDS-related deaths among children 0-14 years, taking note of overall number of annual AIDS-related deaths



Since 2010, new infections have dropped by 48 per cent among adolescents aged 15-19 years

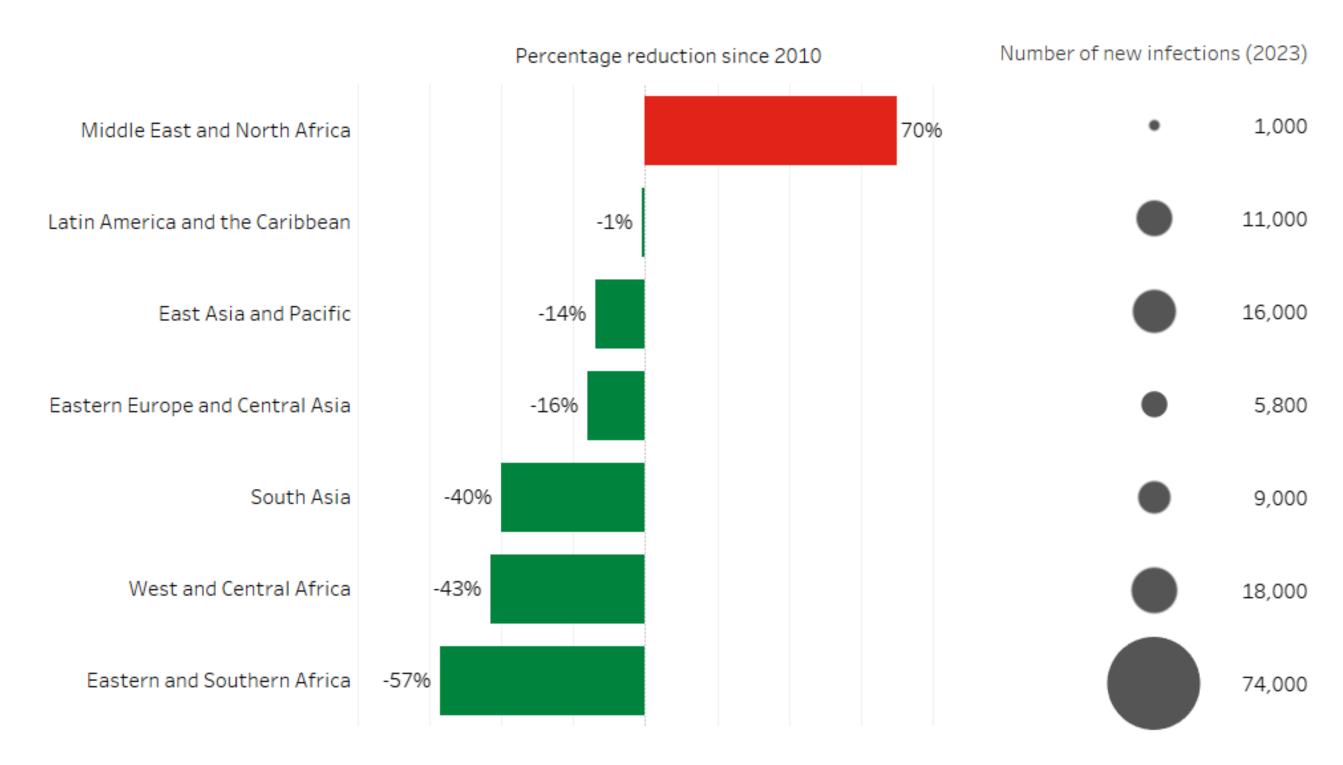
Number of new HIV infections among adolescents aged 15-19 years



We are NOT on pace to reach the agreed targets

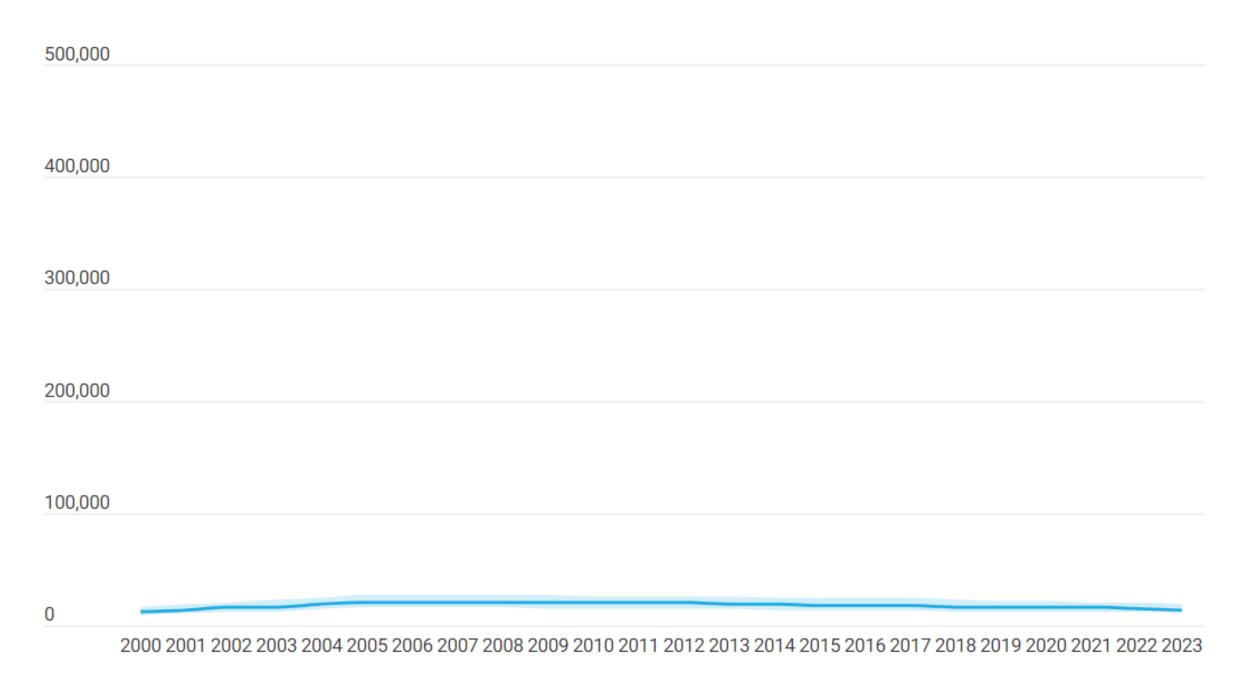
Adolescents aged 15-19

Regional variation in the percentage reduction since 2010 in new HIV infections among adolescents aged 15-19 years, taking note of overall number of new infections



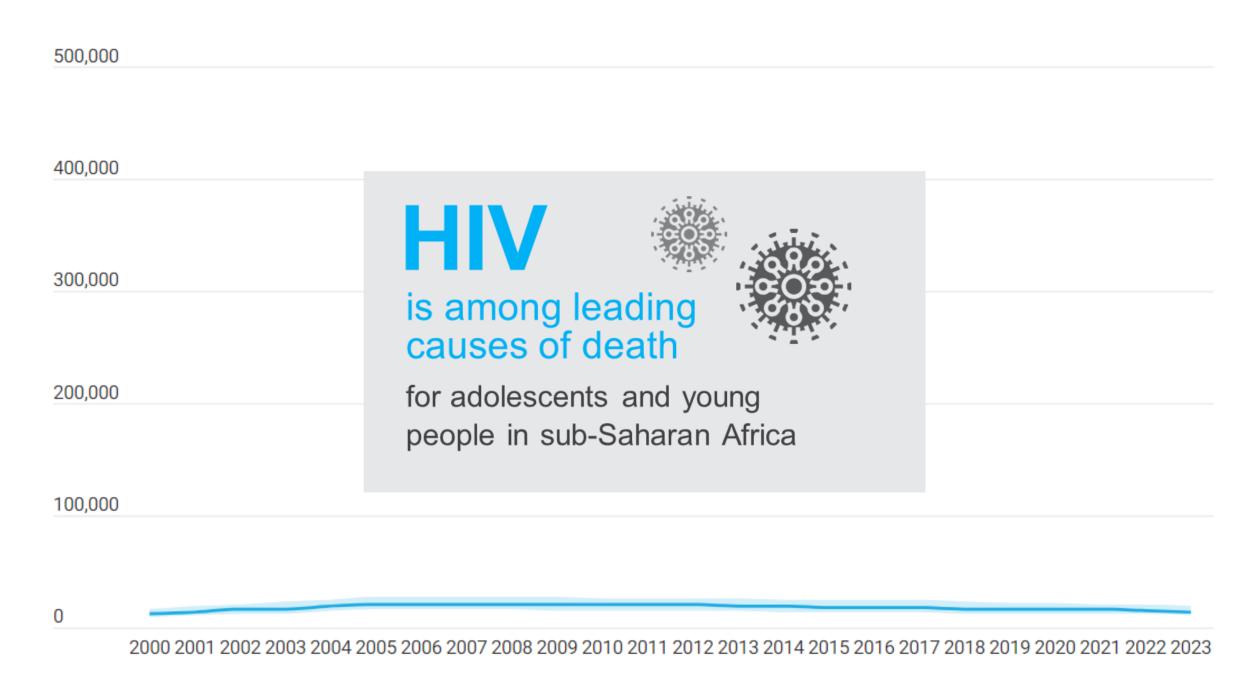
AIDS-related deaths reductions have been far more significant in children than adolescents, with only a 27% reduction since 2010

Number of AIDS-related deaths among adolescents aged 15-19 years



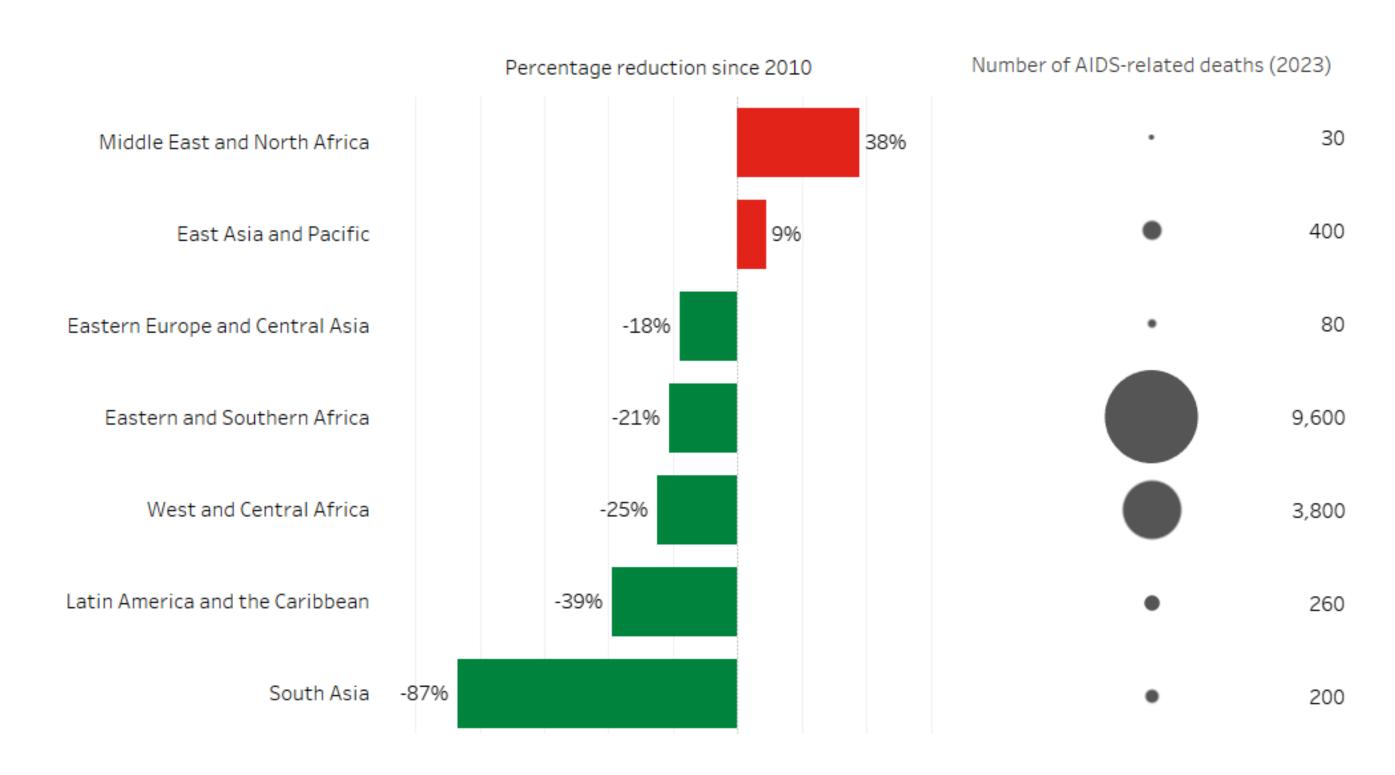
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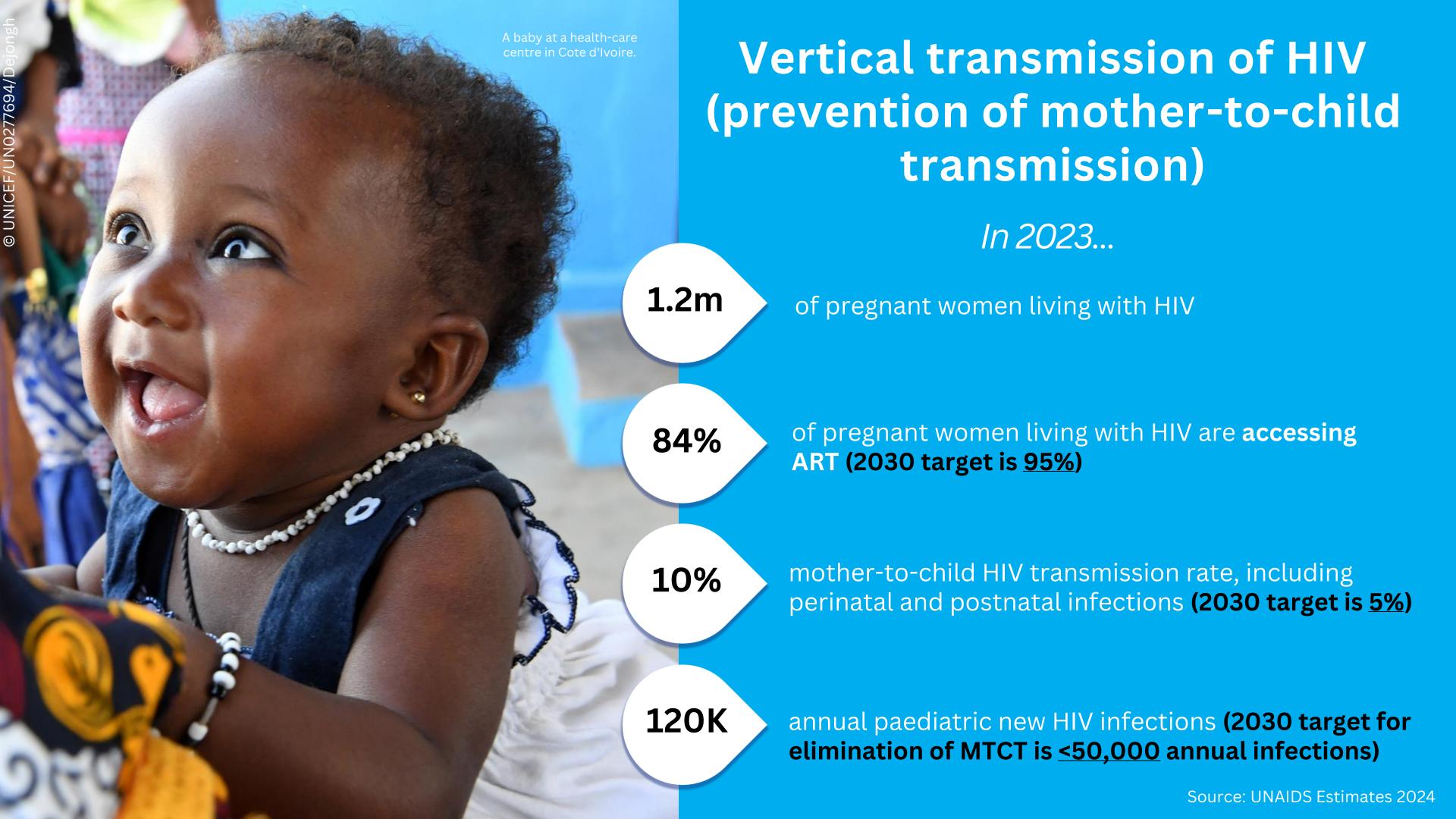
Number of AIDS-related deaths among adolescents aged 15-19 years



Adolescents aged 15-19

Regional variation in the percentage reduction since 2010 in AIDS-related deaths among adolescents 15-19 years, taking note of overall number of annual AIDS-related deaths





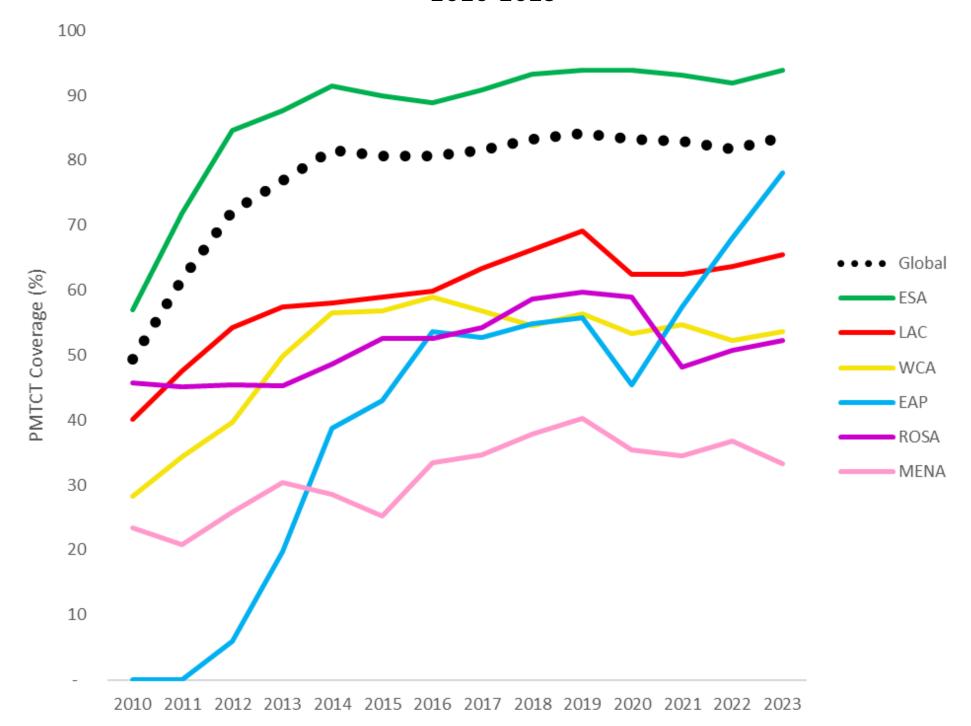
Eastern and Southern Africa is the only region to have shown sustained progress in preventing mother-to-child transmission of HIV - other regions lag behind

In 2023, **84** [72->95] per cent of **pregnant women living with HIV globally** were receiving effective antiretroviral medicines for prevention of mother-to-child transmission (PMTCT), **up from 49** [43-61] per cent in **2010**.

ESA has the highest coverage of about **95%,** with the lowest coverage in **MENA** at **33**%, followed by **South Asia** at **52%**

70% of all pregnant women living with HIV are in **ESA**, with an additional **20%** in **WCA**.

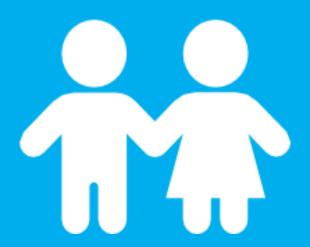
Percentage of pregnant women living with HIV receiving ART, by region, 2010-2023



Due to the impact of antiretroviral and cotrimoxazole treatment, including prevention of mother-to-child transmission...

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new infections due to vertical transmission have been averted



2.1 m

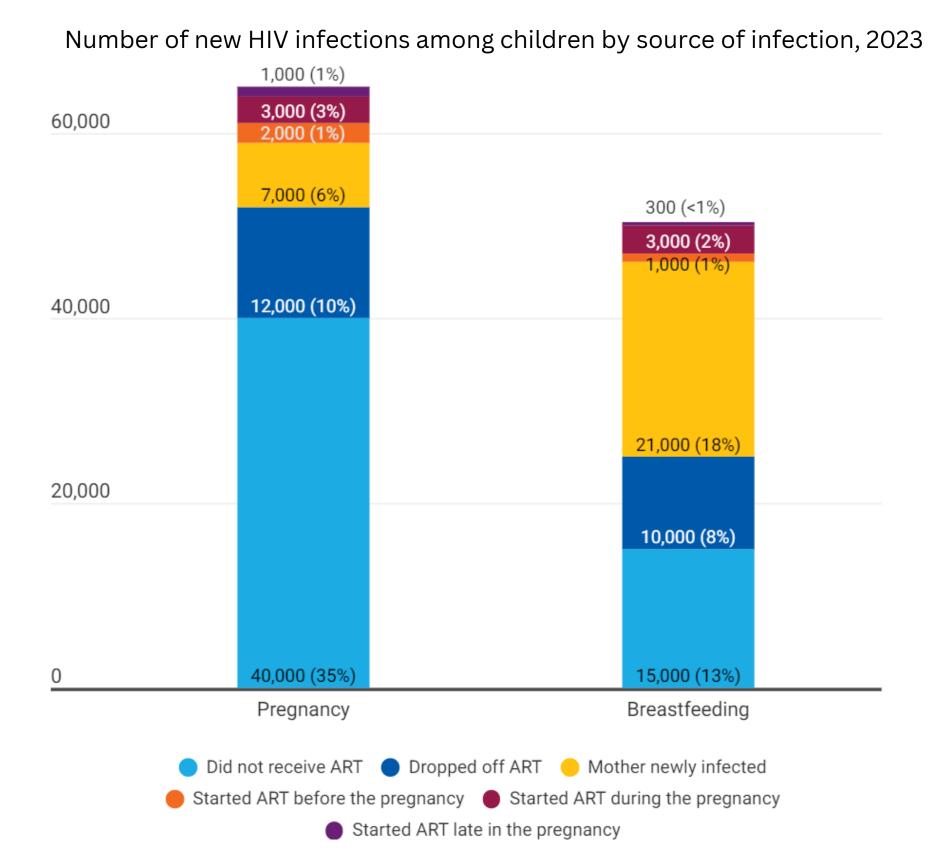
deaths have been averted due to rollout of ART and cotrimoxazole

However, there is still much work to be done... the majority of paediatric HIV infections are due to new mothers not receiving ART, dropping off ART, or becoming infected during breastfeeding

Over half (55%) of paediatric HIV infections (120K) occur during pregnancy from mothers not on treatment.

Out of the **50,000** HIV infections that occur during **breastfeeding**, almost one-fifth (**18%**) are due to maternal incident infections.

About a quarter (24%) of all pregnant women living with HIV are aged 15-24 years.

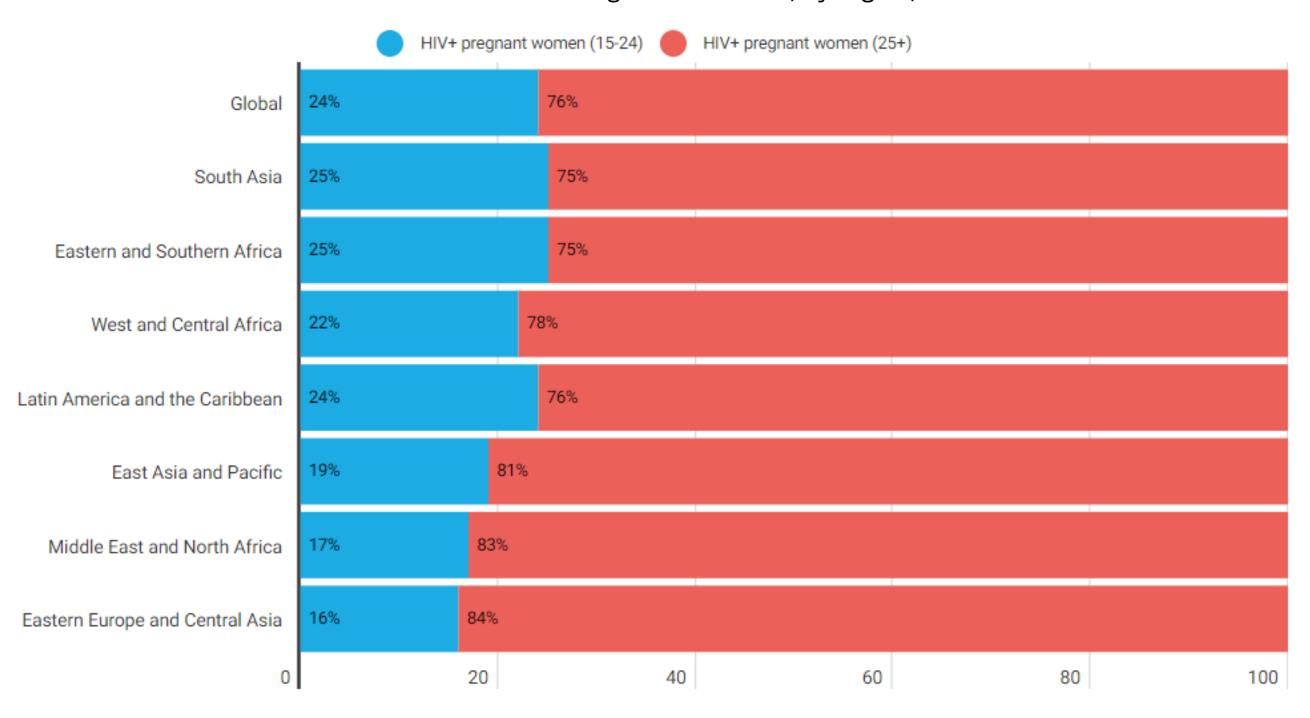


About a quarter of all pregnant women or mothers living with HIV and needing ART are aged 15-24 years

Proportion of HIV+ pregnant women aged 15-24 years compared to those women aged 25 and over, by region, 2023

About a **quarter** of all pregnant women or mothers needing ART are **aged 15-24 years**, with some regional variation.

SA and **ESA** had the largest proportion of mothers needing ART aged 15-24 (**25%**) compared to EECA, which has the smallest proportion (**16%**).





Antiretroviral treatment among children aged 0-14 years

In 2023...

children aged 0-14 years were living with HIV

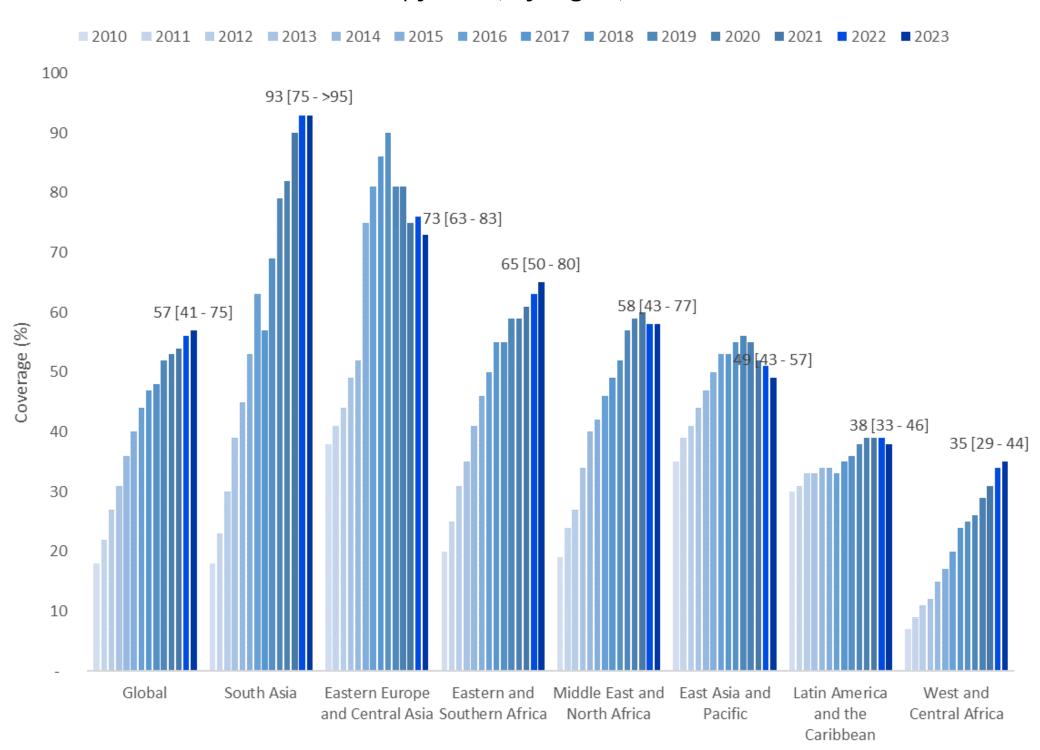
of children aged 0-14 years living with HIV are accessing ART (2030 target is 95%)

Considerable progress has been made since 2010, but there is a long way to go for paediatric treatment of HIV

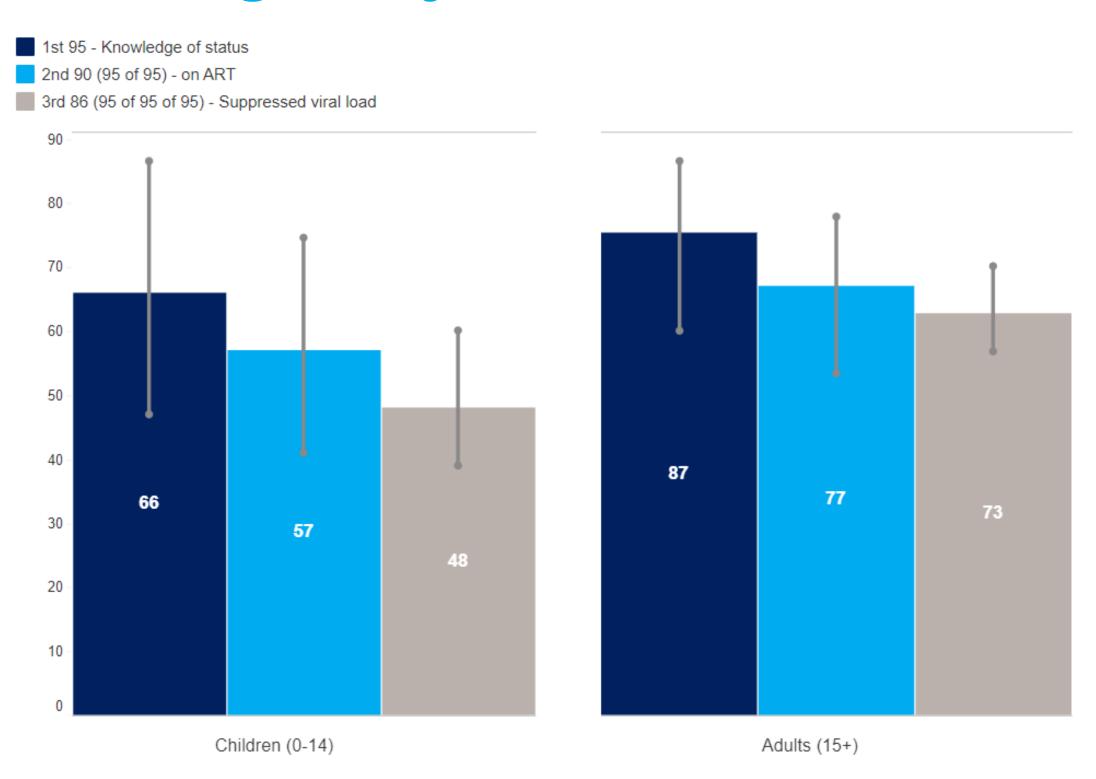
Percentage of children (0-14 years) living with HIV receiving antiretroviral therapy (ART), by region, 2010-2023

In 2023, **57** [41 - 75] per cent of children living with HIV globally were receiving antiretroviral treatment, which is an increase of almost 40 percentage points since 2010 (**18**% [13 - 29]).

South Asia has the highest coverage of about 93% with the lowest coverage in **WCA** region at 35%.



The 95-95 cascade shows stark differences globally between adults and children

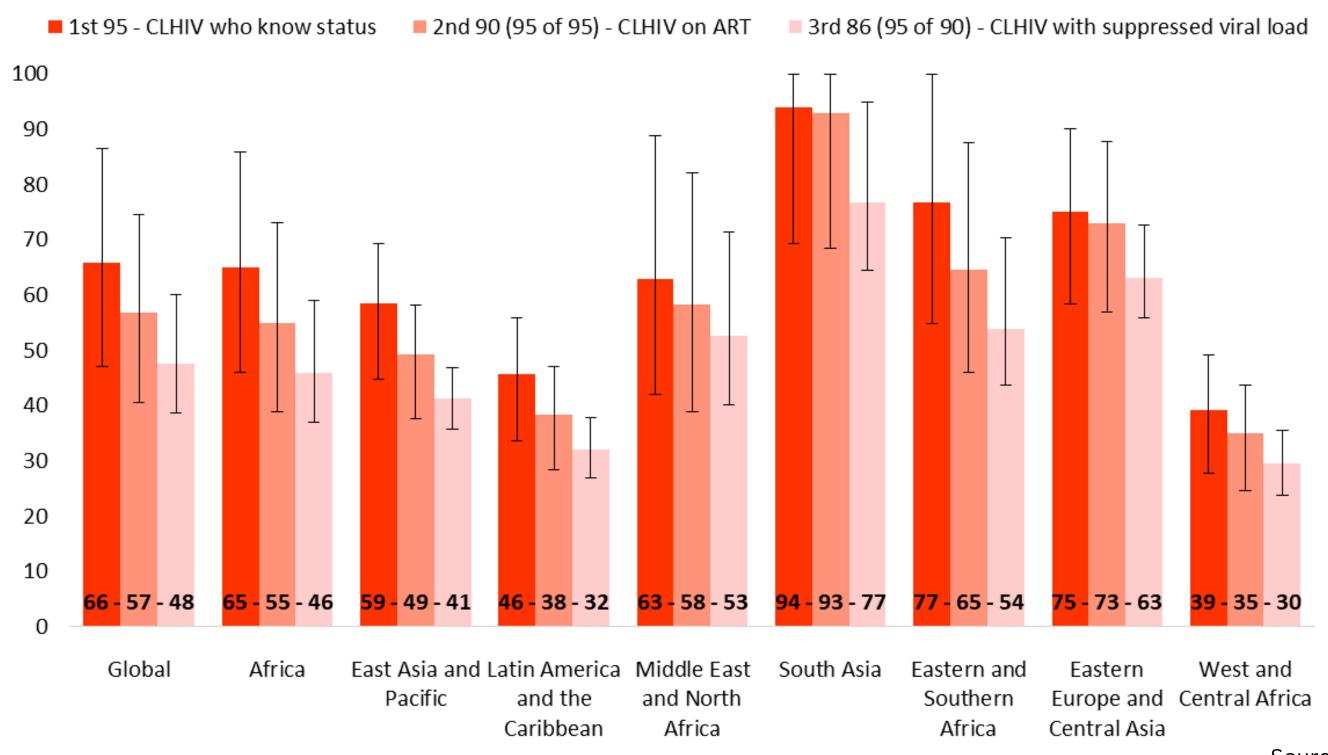


Children aged 0-14
years are left behind in
the treatment cascade
when compared with
adults aged 15+ years

Note: In the 95-95-95 cascade, the denominator (number of children or adults living with HIV) remains the same for each 95. Achieving the 95–95–95 targets translates to 95–90–86 when expressed as a cascade. Rather than showing programme performance like in the traditional 95-95-95 target presentation, the cascade data presentation provides comparable measures of population-level (or community-level) treatment coverage and viral suppression, which are key measures of epidemic control, and clearly indicates the percentage of people living with HIV who are not on ART, do not have a suppressed viral load, and are at risk of opportunistic infections and of transmitting HIV.

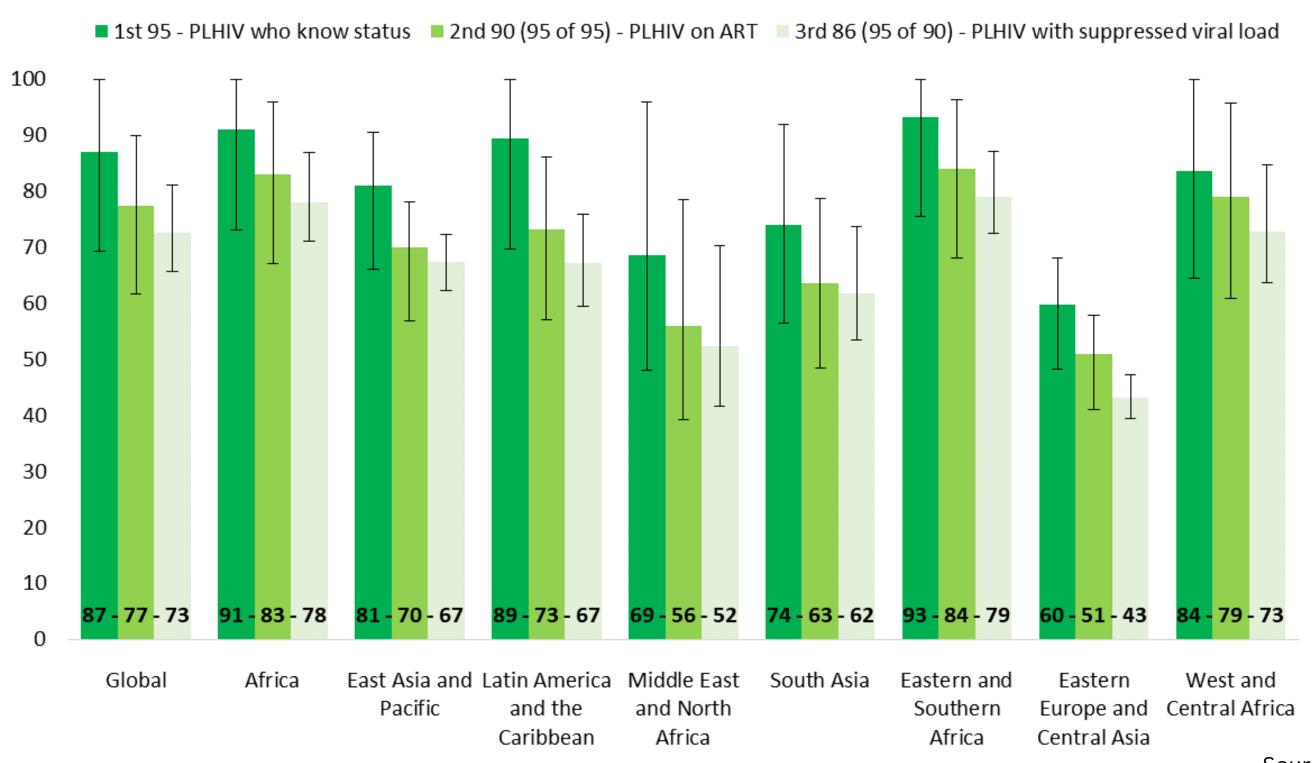
There is considerable regional variation in the 95-95-95 cascade, with *children* being left behind across most regions when compared to adults

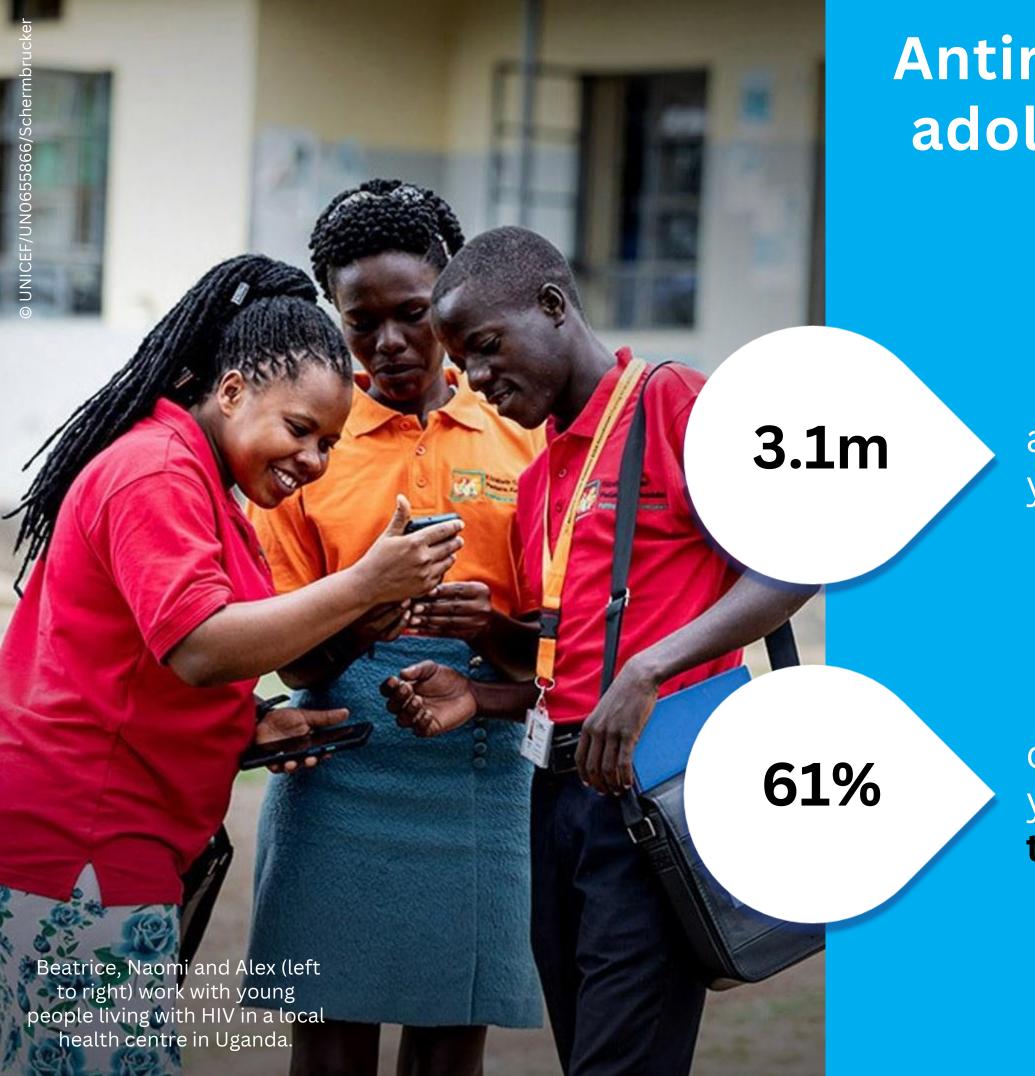
95-95-95 cascade among all children (0-14) living with HIV, by region, 2023



There is considerable regional variation in the 95-95-95 cascade, with children being left behind across most regions when compared to <u>adults</u>

95-95-95 cascade among all adults (15+) living with HIV, by region, 2023





Antiretroviral treatment among adolescents and young people aged 15-24 years

In 2023...

adolescents and young people aged 15-24 years were living with HIV

of adolescents and young people aged 15-24 years living with HIV are accessing ART (2030 target is 95%)

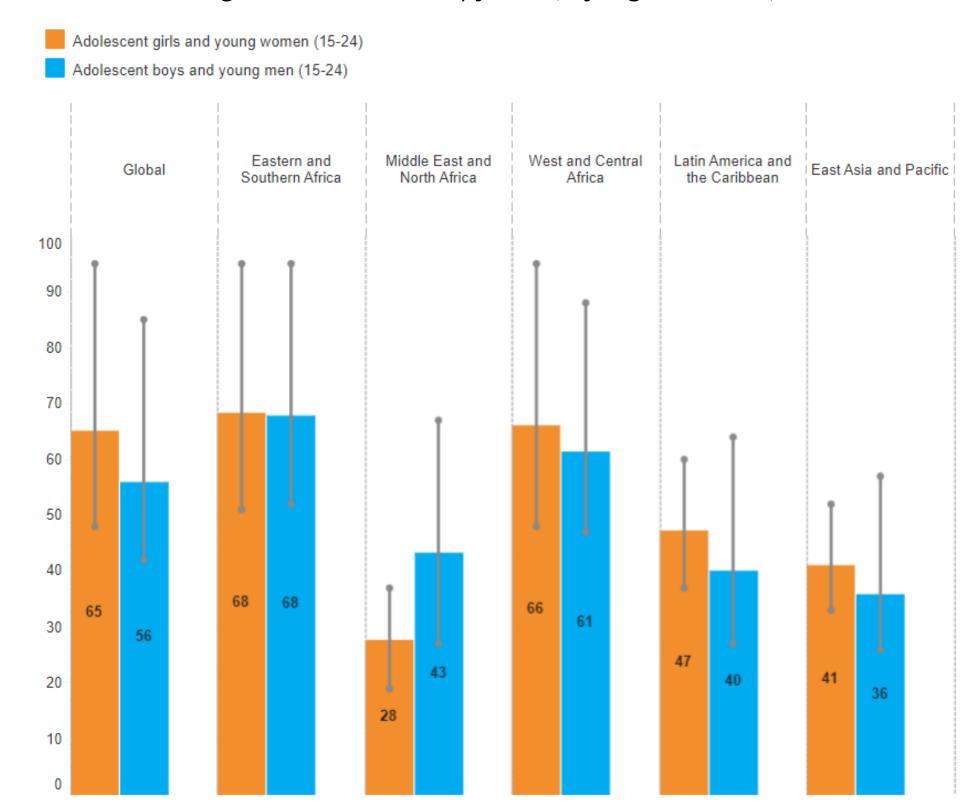
Efforts need to be ramped up to link adolescents living with HIV to life-saving treatment regardless of sex

Among adolescents and young people aged 15-24 years, ART coverage varies across regions, with the lowest coverage in MENA (36%) and the highest in ESA and WCA (68% and 65%, respectively).

Globally there is **some variation by sex**, with adolescent girls and young women having **higher ART coverage** compared to adolescent boys and young men by **9 percentage points**.

Such variation is also seen across all regions except for ESA where coverage is comparable.

Percentage of adolescents and young people (15-24 years) living with HIV receiving antiretroviral therapy (ART), by region and sex, 2023



Gender disparities related to HIV emerge in adolescence

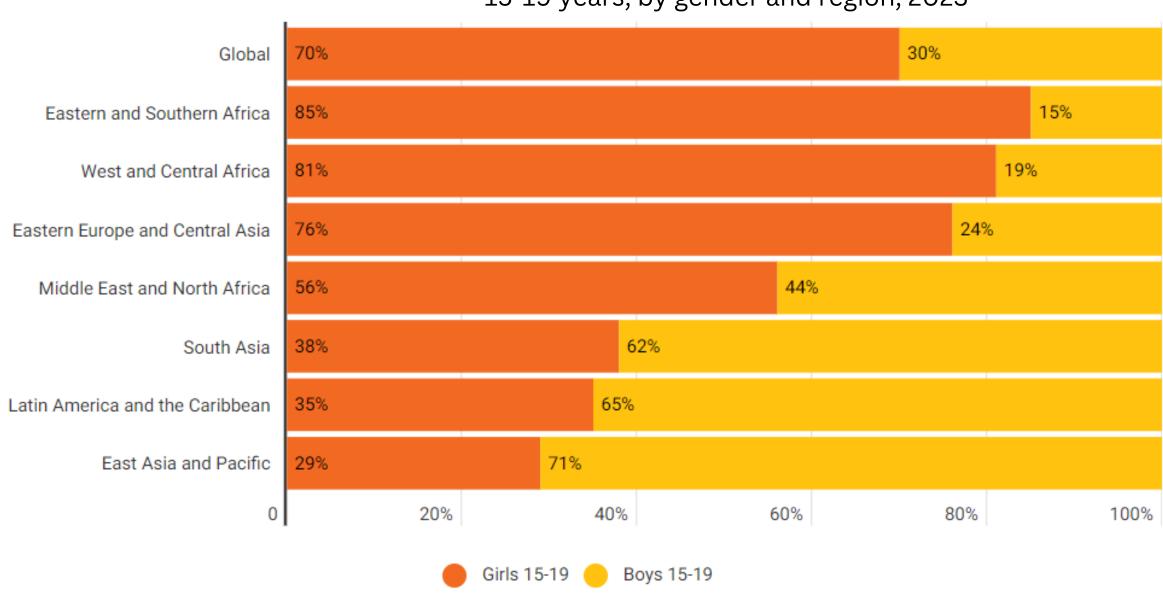
Globally, adolescent girls accounted for more than **two-thirds** of all new HIV infections among adolescents.

In **sub-Saharan Africa**, almost **6 times** as many adolescent girls were newly infected with HIV than adolescent boys.

In **EAP, SA and LAC** more boys are newly infected with HIV each year than girls.

While SSA has the greatest burden of HIV, **34%** of adolescents newly infected with HIV lived outside of the region.

Estimated distribution of new HIV infections among adolescents 15-19 years, by gender and region, 2023



Takeaways



01.

Sub-Saharan Africa bears the largest share of the HIV epidemic in Children

02.

In 2023, sub-Saharan Africa accounted for approximately 65 per cent of people of all ages living with HIV and 84 per cent of children and adolescents living with HIV worldwide.

03.

Eastern and Southern Africa has made significant progress and is on the path to meeting the 2030 targets in reducing new HIV infections in children, maternal ART coverage but not in paediatric or adolescent treatment.

04.

Although significant reduction in new HIV infections has been greater in children under 15 years (62%), it has not been the same achievement in older adolescents aged 15-19 years (48%) and young people 15-24 years.

Takeaways



05.

An estimated 90,000 children and adolescents died from AIDS-related causes in 2023, of which 73 per cent of these preventable deaths occurred among children under 10 years old.

06.

Annual AIDS-related deaths among children aged 0-14 years has declined by about 80 per cent since its peak in 2002 in sub-Saharan Africa; however, the same progress has not been seen among adolescents aged 15-19 years, and HIV remains one of the leading causes of death in sub-Saharan Africa.

07.

More new HIV infections occur among older female adolescents aged 15-19 years.

08.

About a quarter of all mothers needing PMTCT are adolescent girls and young women aged 15-24.





Dashboard Demonstration

Further considerations



- □ Over 80% of pregnant women living with HIV are receiving ART. This is incredible progress, but we have stalled globally at this level. What are the strategies especially in low-burden settings) to test and treat and support pregnant women living with HIV? What is needed to reach the last mile?
- □ Children and adolescents living with HIV are still not benefitting from testing, treatment and support (the 3 95s compared to adults). How do we champion case finding? What are the innovative strategies to reach ALHIV?
- ☐ We are partnering with adolescents and young people, especially girls, to reduce new HIV infections. What are the best ways to share approaches and learnings so we can reduce new infections at scale?
- ☐ What are the data gaps and challenges to reach young key pops at risk of HIV globally?