

Region and country	HIV/AIDS estimates					Life expectancy at birth (years)		Total population (thousands)		Government measures implemented in response to the HIV/AIDS epidemic								Health expenditure
	Total population (thousands)	People living with HIV (thousands)	Adult HIV prevalence (per-cent)		AIDS deaths (thousands)	AIDS orphans (thousands)	With AIDS <sup>1</sup> 2007	Without AIDS 2015	With AIDS 2015	Without AIDS 2015	Blood screening	Information education campaigns	Provision of anti-retroviral treatment	Non-discriminatory policies	Distribution of condoms	Condom use <sup>2</sup> (per-cent)	ART coverage (per-cent)	per capita (US\$)
			2005	2005														
	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)	(13)	(14)	(15)	(16)	(17)	(18)
World <sup>3</sup>	6 671 226	33 200	0.8	2 100	15 200	67	..	7 295 135	..	..	..	..	..	..	..	..	..	657
More developed regions	1 223 004	3 430	0.6	55	..	76	..	1 245 021	..	..	..	..	..	..	..	..	..	3 016
Less developed regions <sup>4</sup>	5 448 223	31 970	1.1	2 540	..	65	..	6 050 114	..	..	..	..	..	..	..	..	..	91
Least developed countries	804 450	11 420	2.9	1 044	..	54	..	966 718	..	..	..	..	..	..	..	..	..	15
Africa	964 973	24 902	5.2	2 036	12 000	53	..	1 149 117	..	..	..	..	..	..	..	..	..	51
Eastern Africa	307 860	10 500	7.1	1 005	6 958	51	..	374 956	..	..	..	..	..	..	..	..	..	15
Burundi	8 508	150	3.3	13	120	49	52	11 223	11 705	X	X	X	X	0.2	14 / 26	3	..	..
Comoros <sup>5</sup>	839	<0.5	<0.1	<0.1	..	65	..	1 007	..	X	X	X	X	0.7	.. / ..	13	..	..
Djibouti	833	15	3.1	1	6	55	67	951	973	X	X	X	X	0.2	16 / 20	53	..	..
Eritrea	4 851	59	2.4	6	36	58	61	6 165	6 316	X	X	X	X	0.6	5 / 8	10	..	..
Ethiopia <sup>6</sup>	83 099	..	..	..	..	53	55	100 967	103 405	X	X	X	X	0.2	7 / ..	6	..	..
Kenya	37 538	1 300	6.1	140	1 100	53	61	46 167	49 419	X	X	X	X	1.2	24 / 44	20	..	..
Madagascar	19 683	49	0.5	3	3	53	60	24 107	24 276	X	X	X	X	1.0	0 / 1	7	..	..
Malawi	13 925	940	1.1	78	550	48	64	17 020	19 546	X	X	X	X	1.6	20 / 43	19	..	..
Mauritius <sup>7</sup>	1 262	4	0.6	<0.1	..	73	..	1 335	..	X	X	X	X	9.1	.. / ..	222	..	..
Mozambique	21 397	180	16.1	140	510	42	55	24 698	27 749	X	X	X	X	1.1	9 / 14	12	..	..
Réunion	807	..	..	..	..	76	..	883	..	..	..	..	..	3.2	.. / ..	..	..	..
Rwanda	9 725	190	3.1	21	210	46	49	12 147	13 133	X	X	X	X	0.9	39 / 72	16	..	..
Seychelles	87	..	..	..	..	72	..	89	..	X	X	X	X	..	.. / ..	534	..	..
Somalia	8 699	44	0.9	4	23	48	..	10 881	..	X	X	X	X	..	1 / <1	..	..	..
Uganda	30 884	1 000	6.7	91	1 000	51	58	39 966	43 491	X	X	X	X	1.7	51 / 41	19	..	..
United Republic of Tanzania	40 454	1 400	6.5	140	1 100	52	60	48 999	52 768	X	X	X	X	2.0	7 / 18	12	..	..
Zambia	11 922	1 100	17.0	98	710	42	56	13 842	16 519	X	X	X	X	3.8	27 / 35	30	..	..
Zimbabwe	13 349	1 700	20.1	180	1 100	43	66	14 508	18 326	X	X	X	X	1.4	8 / 15	27	..	..

Region and country	HIV/AIDS estimates					Life expectancy at birth (years)		Total population (thousands)		Government measures implemented in response to the HIV/AIDS epidemic								Health expenditure

Region and country	Total population (thousands)	HIV/AIDS estimates				Life expectancy at birth (years)		Total population (thousands)		Government measures implemented in response to the HIV/AIDS epidemic							Health expenditure per capita (US\$)
		People living with HIV (thousands)	Adult HIV prevalence (percentage)	AIDS deaths (thousands)	AIDS orphans (thousands)	With AIDS <sup>1</sup>	Without AIDS	With AIDS <sup>1</sup>	Without AIDS	Blood screening	Information and education campaigns	Provision of antiretroviral treatment	Non-discriminatory policies	Distribution of condoms	Condom use <sup>2</sup> (percentage)	ART coverage (percentage)	
2007	2005	2005	2005	2005	2007	2007	2015	2015	2015	2015	2015	2015	2015	2015	2005	2006	2004
<b>Southern Europe</b>																	
Albania	3 190	..	..	..	..	76	..	3 346	-	X	X	-	X	X	2.1	.. / ..	157
Andorra	75	..	..	..	..	81	..	75	..	..	X	X	-	..	..	..	2 453
Bosnia and Herzegovina	3 935	<0.5	<0.1	..	..	75	..	3 899	-	X	X	-	..	..	3.1	.. / ..	198
Croatia	4 555	<0.5	..	..	..	76	..	4 455	-	X	X	X	X	X	..	.. / ..	609
Gibraltar	29	..	..	..	..	79	..	29	..	..	..	..	..	..	..	..	1 438
Greece	11 147	9	0.2	<0.1	..	79	..	11 273	-	X	X	X	X	X	22.0	.. / ..	1 879
Holy See <sup>16</sup>	1	..	..	..	..	72	..	1	-	..	X	X	X	-	..	.. / ..	..
Italy	58 877	150	0.5	3	..	81	..	59 001	-	X	X	X	X	X	13.7	.. / ..	2 580
Malta	407	<0.5	0.1	<0.1	..	78	..	420	-	X	X	..	X	..	..	.. / ..	2 339
Montenegro <sup>37</sup>	598	..	..	..	..	74	..	604	-	..	X	X	..	X	..	.. / ..	..
Portugal	10 623	32	0.4	<1	..	78	..	10 805	-	X	X	X	X	X	..	.. / ..	1 665
San Marino	31	..	..	..	..	81	..	32	-	X	X	X	-	X	..	.. / ..	3 356
Serbia <sup>17</sup>	9 858	..	..	..	..	74	..	9 970	-	..	X	X	..	X	8.4	.. / ..	219
Slovenia	2 002	<0.5	<0.1	<0.1	..	78	..	1 992	-	X	X	X	X	X	..	.. / ..	1 621
Spain	44 279	140	0.6	2	..	81	..	46 000	-	..	X	X	X	X	27.0	.. / ..	1 971
TFYR Macedonia <sup>18</sup>	2 038	<0.5	<0.1	<0.1	..	74	..	2 037	-	X	X	-	-	-	..	.. / ..	212
<b>Western Europe</b>																	
Austria	8 361	12	0.3	<0.1	..	80	..	8 514	-	X	X	X	X	X	7.2	.. / ..	3 683
Belgium	10 457	14	0.3	<0.1	..	79	..	10 613	-	X	X	X	X	X	..	.. / ..	3 363
France	61 647	130	0.4	2	..	81	..	63 745	-	..	X	X	X	X	..	.. / ..	3 464
Germany	82 599	49	0.1	<1	..	79	..	81 825	-	X	X	X	X	X	..	.. / ..	3 461
Ireland	35	..	..	..	..	79	..	38	-	..	..	..	..	X	..	.. / ..	..
Luxembourg	467	<1	0.2	<0.1	..	79	..	510	-	..	X	X	X	X	..	.. / ..	5 904
Monaco	33	..	..	..	..	82	..	34	-	..	X	X	-	X	..	.. / ..	5 330
Netherlands	16 419	18	0.2	<0.1	<0.1	82	..	16 605	-	..	X	X	X	X	..	.. / ..	3 442
Switzerland	7 484	17	0.4	<0.1	..	82	..	7 699	-	X	X	X	X	X	14.2	.. / ..	5 572
<b>Latin America and the Caribbean</b>																	
Argentina	572 206	1 930	0.6	86	..	73	..	627 958	..	..	..	..	..	..	..	..	273
<b>Caribbean</b>																	
Anguilla	41 246	330	1.6	27	..	71	..	44 025	..	..	..	..	..	..	..	..	1 731
Antigua and Barbuda	13	..	..	..	..	73	..	14	-	..	..	..	..	..	..	.. / ..	..
Aruba	104	..	..	..	..	72	..	93	-	X	X	X	..	X	..	.. / ..	485
Bahamas	331	7	3.3	<0.5	..	73	76	363	374	X	X	X	X	X	..	.. / ..	1 211
Barbados	294	3	1.5	<0.5	..	77	78	300	302	X	X	X	X	X	..	95 / 87	745
British Virgin Islands	23	..	..	..	..	78	..	24	-	..	..	..	..	..	..	.. / ..	..
Cayman Islands	47	..	..	..	..	78	..	51	-	..	..	..	..	..	..	.. / ..	..
Cuba	11 268	5	0.1	<0.5	..	78	..	11 250	-	X	X	X	X	X	5.0	100 / 95	230
Dominica	67	..	..	..	..	77	..	67	-	..	..	..	..	..	..	.. / ..	..
Dominican Republic	9 760	66	1.1	7	..	72	74	10 023	11 023	X	X	X	X	X	2.0	17 / 37	148
Grenada	106	..	..	..	..	69	..	106	-	..	..	..	..	X	..	.. / ..	293
Guadeloupe	445	..	..	..	..	79	..	465	-	..	..	..	..	..	..	.. / ..	..
Haiti	9 598	190	3.8	16	..	61	65	10 830	11 460	X	X	X	-	X	5.0	20 / 39	33
Jamaica	2 714	25	1.5	1	..	72	74	2 819	2 844	X	X	X	X	X	24.0	56 / 56	176
Martinique	399	..	..	..	..	79	..	404	-	..	..	..	..	..	..	.. / ..	..
Montserrat	6	..	..	..	..	79	..	6	-	..	..	..	..	..	..	.. / ..	..
Netherlands Antilles	192	..	..	..	..	75	..	205	-	..	..	..	..	..	..	.. / ..	..
Puerto Rico	3 991	..	..	..	..	79	..	4 160	-	..	..	..	..	..	..	.. / ..	..
Saint Kitts and Nevis	50	..	..	..	..	72	..	56	-	X	X	X	-	X	..	.. / ..	500
Saint Lucia	165	..	..	..	..	74	..	180	-	..	X	X	X	..	..	.. / ..	232
Saint Vincent and the Grenadines	120	..	..	..	..	71	..	124	-	..	X	X	-	X	..	.. / ..	210
Trinidad and Tobago	1 383	27	2.6	2	70	72	134	1 400	X	X	X	X	X	X	11.7	38 / 45	329
Turks and Caicos Islands	26	..	..	..	..	72	..	28	-	..	..	..	..	..	..	.. / ..	..
United States Virgin Islands	111	..	..	..	..	79	..	110	-	..	..	..	..	..	..	.. / ..	..
<b>Central America</b>																	
Belize	447 554	380	0.5	16	..	75	..	463 233	..	..	..	..	..	..	..	..	350
Costa Rica	288	4	2.5	<0.5	..	76	78	335	338	X	X	X	-	X	6.6	31 / 59	201
El Salvador	4 468	7	0.3	<0.1	..	79	..	4 983	-	X	X	X	X	X	10.9	80 / >95	290
Guatemala	6 857	36	0.9	3	..	72	..	7 602	-	X	X	X	X	X	2.9	59 / 39	184
Honduras	13 354	61	0.9	3	..	76	..	16 227	-	X	X	X	X	X	2.3	43 / 52	127
Nicaragua	7 106	63	1.5	7	..	72	72	8 308	8 393	X	X	X	X	X	2.9	35 / 40	71
Mexico	106 535	180	0.3	6	..	76	..	115 756	-	X	X	X	X	X	3.7	71 / 76	424
Nicaragua	5 603	7	0.2	<0.5	..	73	..	6 277	-	X	X	X	X	X	3.3	16 / 35	67
Panama	3 343	17	0.9	<1	..	75	..	3 774	-	X	X	X	X	X	..	97 / 70	343
<b>South America</b>																	
Argentina	383 406	1 220	0.6	43	..	73	..	420 700	..	..	..	..	..	..	..	..	252
Bolivia	39 531	130	0.6	4	..	75	..	42 676	-	X	X	X	X	X	22.3	81 / 79	383
Brazil	9 525	7	0.1	<0.5	..	65	..	10 854	-	..	X	X	-	X	3.9	37 / 24	66
Chile	191 791	620	0.5	14	..	72	73	210 408	210 988	X	X	X	X	X	4.4	83 / 85	290
Colombia	16 635	28	0.3	<0.5	..	79	..	19 526	-	X	X	X	X	X	2.5	75 / 83	359
Ecuador	46 156	160	0.6	8	..	73	..	50 323	-	X	X	X	X	X	8.7	52 / 50	104
Falkland Islands (Malvinas)	13 341	23	0.3	2	..	75	..	14 957	-	..	X	X	X	X	4.3	42 / 34	127
French Guiana	3	..	..	..	..	79	..	3	-	..	..	..	..	..	..	.. / ..	..
Guyana	202	..	..	..	..	76	..	242	-	..	..	..	..	..	..	.. / ..	..
Paraguay	738	12	2.4	1	..	66	69	715	741	X	X	X	X	X	6.1	50 / 72	56
Peru	6 127	13	0.4	<0.5	..	72	..	7 008	-	X	X	X	X	X	11.9	29 / 64	88
Suriname	27 903	93	0.4	..	..	71	..	30 388	-	X	X	X	X	X	8.7	52 / 50	104
Uruguay	5 458	5	1.9	<0.5	..	70	71	475	479	X	X	X	X	X	2.5	55 / 93	194
Venezuela	3 340	10	0.5	<0.5	..	76	..	3 431	-	X	X	X	X	X	..	69 / 51	315
Venezuela (Bolivarian Rep. of)	27 657	110	0.7	6	..	74	..	31 294	-	X	X	X	X	X	3.4	84 / 71	196
<b>Northern America</b>																	
Bermuda	338 831	1300	0.8	18	..	78	..	364 334	..	..	..	..	..	..	..	..	5 796
Canada <sup>19</sup>	65	..	..	..	..	77	..	65	-	..	..	..	..	..	..	.. / ..	..
Greenland	32 876	60	0.3	<1	..	81	..	35 191	-	X	X	X	X	X	9.4	.. / ..	3 038
Saint Pierre and Miquelon	58	..	..	..	..	67	..	61	-	..	..	..	..	..	..	.. / ..	..
United States of America	6	..	..	..	..	79	..	6	-	..	..	..	..	..	..	.. / ..	..
Oceania	305 826	1 200	0.6	16	..	78	79	329 010	330 473	X	X	X	X	X	12.0	.. / ..	6 096
Australia/New Zealand	34 267	78	0.3	3	..	75	..	37 499	..	..	..	..	..	..	..	..	2 239
Australia <sup>20</sup>	24 922	17	0.1	<0.5	..	81	..	26 854	..	..	..	..	..	..	..	..	2 941
New Zealand	20 743	16	0.1	<0.5	..	81	..	22 397	-	X	X	X	X	X	11.7	.. / ..	3 123
Melanesia	4 179	1	0.1	..	..	80	..	4 457	-	X	X	X	X	X	11.3	.. / ..	2 040
Fiji	8 133	60	1.5	3	..	59	..	9 323	..	..	..	..	..	..	..	..	45
New Caledonia	839	<1	0.1	<0.1	..	69	..	874	-	X	X	X	X	X	..	.. / ..	148
Papua New Guinea	242	..	..	..	..	76	..	270	-	..	..	..	..	..	..	.. / ..	..
Solomon Islands	6 331	60	1.8	3	..	57	59	7 319	7 398	X	X	X	X	X	0.5	15 / 8	30
Vanuatu	496	..	..	..	..	63	..	589	-	X	X	..	..	X	..	.. / ..	35
Vanuatu	226	..	..	..	..	70	..	270	-	..	X	..	..	X	..	.. / ..	58
<b>Micronesia</b>																	
Guam	553	..	..	..	..	72	..	611	..	..	..	..	..	..	..	..	227
Kiribati	173	..	..	..	..	75	..	191	-	..	..	..	..	..	..	.. / ..	..
Marshall Islands	95	..	..														

**Total population in 2007:** The total mid-year of data population. Source: United Nations, Department of Economic and Social Affairs, Population Division (2007). *World Population Prospects: The 2006 Revision, vol. I, Comprehensive Tables* (United Nations publication, Sales No. E/XXIII.2).

**People living with HIV:** The number of people living with HIV at the end of 2005. Source: UNAIDS, 2006 *Report on the Global AIDS Epidemic* (Geneva). Data available online at [http://www.unaids.org/en/HIV\\_data/2006GlobalReport/default.asp](http://www.unaids.org/en/HIV_data/2006GlobalReport/default.asp).

**Adult HIV prevalence:** The percentage of adults (aged 15-49 years) infected with HIV at the end of 2005. Source: UNAIDS, 2006 *Report on the Global AIDS Epidemic* (Geneva). Data available online at [http://www.unaids.org/en/HIV\\_data/2006GlobalReport/default.asp](http://www.unaids.org/en/HIV_data/2006GlobalReport/default.asp). Aggregate data for the public use, named as *UNAIDS estimates of the number of adults living with HIV/AIDS at the end of 2005; denominators are from World Population Prospects: The 2006 Revision, vol. I, Comprehensive Tables* (United Nations publication, Sales No. E/XXIII.2).

**Life expectancy at birth with AIDS:** The average number of years a person would be expected to live if subject all his or her life to 2006 mortality pattern. Source: United Nations, Department of Economic and Social Affairs, Population Division (2007). *World Population Prospects: The 2006 Revision, vol. I, Comprehensive Tables* (United Nations publication, Sales No. E/XXIII.2).

**Life expectancy at birth without AIDS:** The average number of years a person would be expected to live if subject all his or her life to 2006 mortality pattern estimated in the absence of AIDS-related mortality. Source: United Nations, Department of Economic and Social Affairs, Population Division (2007). *World Population Prospects: The 2006 Revision, vol. I, Comprehensive Tables* (United Nations publication, Sales No. E/XXIII.2).

**Total population in 2015 with AIDS:** The mid-year population in 2015 according to the medium variant of the population projection. The projection reflects the impact of AIDS-related mortality. Source: United Nations, Department of Economic and Social Affairs, Population Division (2007). *World Population Prospects: The 2006 Revision, vol. I, Comprehensive Tables* (United Nations publication, Sales No. E/XXIII.2).

**Total population in 2015 without AIDS:** The mid-year population in 2015 according to the medium variant of the population projection. The projection reflects the impact of AIDS-related mortality. Source: United Nations, Department of Economic and Social Affairs, Population Division (2007). *World Population Prospects: The 2006 Revision, vol. I, Comprehensive Tables* (United Nations publication, Sales No. E/XXIII.2).

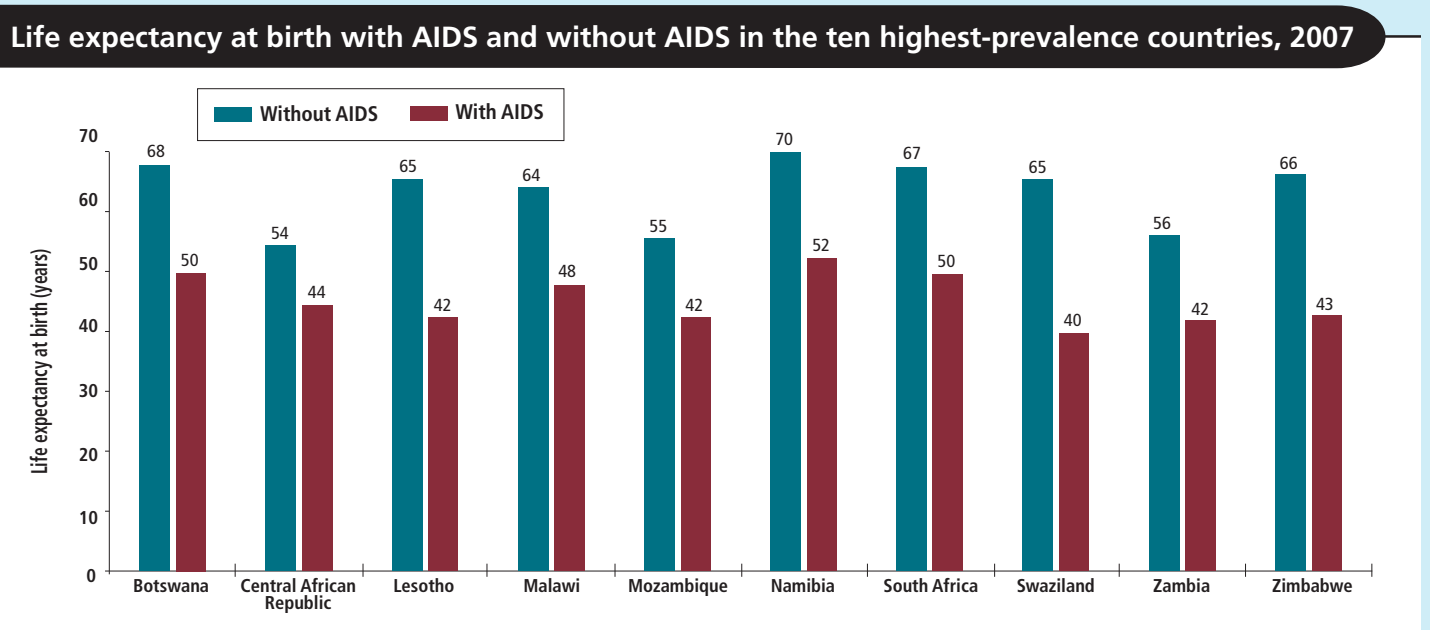
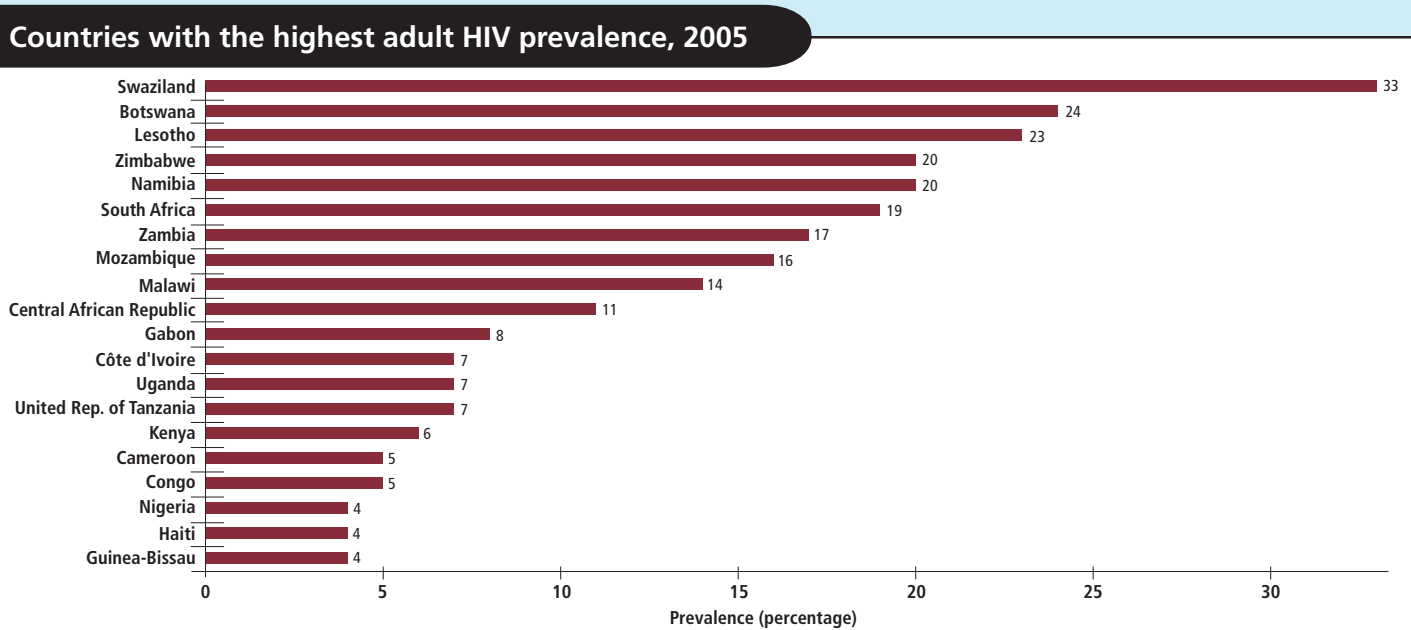
**Government measures implemented in response to the HIV/AIDS epidemic:** The actions that Government has taken to respond to the HIV/AIDS epidemic. Source: United Nations, Department of Economic and Social Affairs, Population Division (2007). *World Population Prospects: The 2006 Revision, vol. I, Comprehensive Tables* (United Nations publication, Sales No. E/XXIII.2).

**World Population Policies 2007** (United Nations publication, Sales No. E/XXIII.8).

**Condom use:** The percentage of women aged 15 to 49 who are married or in union and who use condoms for contraceptive purposes. Data are for the most recent year available between 1995 and 2006. Source: *World Contraceptive Use 2006*, data maintained by the Population Division of the Department of Economic and Social Affairs of the United Nations Secretariat.

**ART coverage:** The percentage of persons receiving antiretroviral therapy among people in need of treatment. Estimates for December 2005 are from WHO, UNAIDS and UNICEF (2006). Source: WHO, UNAIDS and UNICEF (2007). *Towards Universal Access: Scaling-up Priority HIV/AIDS Interventions in the Health Sector* (Geneva).

**Private expenditure per capita:** The sum of public and private expenditure per capita for the provision of health services (preventive and curative), family planning activities, nutrition activities and emergency aid. Source: World Bank (2007). *World Development Indicators* (Washington, D.C.). Data available online at <http://devdata.worldbank.org/dataonline/>.



The designations employed and the presentation of the material in this publication do not imply the expression of any opinion whatsoever on the part of the Secretariat of the United Nations concerning the legal status of any country, territory, city or area or of its authorities, or concerning the delimitation of its frontiers or boundaries. The designations "more developed regions" and "less developed regions" are intended for statistical purposes only and do not necessarily reflect a judgement about the state reached by a particular country or area in the development process. The term "country" as used in the text of this publication also refers, as appropriate, to territories or parts thereof.

Two dots (..) indicate that data are either not available, insignificant or zero.

An em dash (—) indicates that the item is not applicable.

X indicates that the Government has not reported the measure.

A hyphen (-) indicates that the Government has not implemented the measure.

Figures may not add to totals because of rounding.

The data regarding HIV/AIDS reflect the latest estimates available at the end of 2007. Data for the world total are from the 2007 edition of the UNAIDS *Report on the Global AIDS Epidemic*, which indicates that updates HIV/AIDS estimates on the global and regional levels, but does not include country-level estimates. The estimates from the 2006 UNAIDS *Report on the Global AIDS Epidemic* indicate that, globally, 33 million people were living with HIV. This figure is 1.4 per cent lower than the previously estimated from the 2006 UNAIDS *Report on the Global AIDS Epidemic* (36.6 million). The new estimate does imply that the number of people living with HIV worldwide is declining; rather, the number of infected persons continues to increase but from a lower level than previously estimated. The reduction in the results largely stems from refinements in estimation methodology and

from new data that have become available for a number of countries. Country-level estimates that are consistent with the 2007 global estimate have not yet been published. Therefore, the HIV/AIDS estimates given in the world and regional regions are rest or calculated from the 2006 *Report on the Global AIDS Epidemic* (with the exception of India<sup>1</sup>) and refer to the year 2005.

The more developed regions comprise the regions of Europe and Northern America, Australia, New Zealand and Japan. Countries in the more developed regions are designated "developed countries". The less developed regions comprise all regions of Africa, Asia (excluding Japan) and Latin America and the Caribbean and the regions of Melanesia, Micronesia and Polynesia. Countries in the less developed regions are designated "developing countries". The least developed countries, as defined by the United Nations General Assembly in December 2003, include 50 countries: Afghanistan, Angola, Benin, Burkina Faso, Burundi, Cambodia, Faso, Burundi, Cambodia, Cote d'Ivoire, Central

African Republic, Chad, Comoros, Democratic Republic of the Congo, Djibouti, Equatorial Guinea, Eritrea, Ethiopia, Gambia, Guinea, Guinea-Bissau, Haiti, Kiribati, Lao People's Democratic Republic, Lesotho, Liberia, Madagascar, Malawi, Mali, Mauritania, Mozambique, Myanmar, Nepal, Niger, Rwanda, Samoa, Sao Tome and Principe, Sudan, Sierra Leone, Solomon Islands, Somalia, South Africa, Sri Lanka, Swaziland, Tanzania, Togo, Tuvalu, Uganda, the United Kingdom, United States of America, Zambia. The least developed countries are a subset of all developing countries.

<sup>1</sup> For the 62 countries most affected by HIV/AIDS, the life expectancy at birth and population in 2015 are estimated or projected taking into account the impact of AIDS on the living of the rest of the countries, where HIV prevalence is very low or negligible, estimates and projections of life expectancy or population do not take explicit account of the impact of AIDS. For developing countries, the impact of AIDS is used for estimating or projecting life expectancy

analysis or population "with AIDS" and "without AIDS"; see *World Population Prospects: The 2006 Revision*, Highlights (Working Paper No. ESA/P/WP/2006), available online at <http://www.un.org/popin/publications/wpp2006/wpp2006.htm>.

Data on condom use for the most recent year available between 1995 and 2006, for 73 per cent of the countries with data on condom use, the data refer to a year ranging from 2000 to 2006.

The global number of people living with HIV, adult HIV prevalence, and AIDS deaths reflect UNAIDS revised estimates for 2007.

The estimates of people living with HIV and of adult HIV prevalence reflect the revised estimates of HIV in 2006. In July 2007, the National AIDS Control Organization (NACO) of India released the most recent HIV/AIDS estimates for India, reflecting the re-estimation of UNAIDS and WHO. These are the most recent figures

the substantially below previous estimates and indicate that at the end of 2006, 2.5 million people aged 15 or over were living with HIV in India, equivalent to an adult HIV prevalence of 0.36 per cent, compared to the frequency of Chinese estimates reporting an increase of the number of AIDS deaths in India were not available at the time this chart was prepared. The number of AIDS deaths reported here is the lower bound of the 2006 estimate published by UNAIDS. In addition, the life expectancy at birth with and without AIDS and population in 2015 were estimated or projected using the previous, higher estimate of adult HIV prevalence in India.

<sup>5</sup> Including Mayotte.

<sup>6</sup> In early 2006, new data from a national community-based survey and from rural surveillance sites in Ethiopia were released. At the time of preparation of this chart, UNAIDS had yet to publish point estimates for Ethiopia incorporating these new data.

<sup>7</sup> Including Agalega, Rodrigues and Saint Brandon.

<sup>8</sup> Including Ascension and Tristan da Cunha.

<sup>9</sup> For statistical purposes, the data for China do not include Hong Kong and Macao, Special Administrative Regions of China.

<sup>10</sup> As of 1 July 1997, Hong Kong became a Special Administrative Region (SAR) of China.

<sup>11</sup> As of 20 December 1999, Macao became a Special Administrative Region (SAR) of China.

<sup>12</sup> Refers to Guernsey and Jersey.

<sup>13</sup> Including Åland Islands.

<sup>14</sup> Including Svalbard and Jan Mayen Islands.

<sup>15</sup> These ad hoc preliminary estimates for 2005 are based on the official estimates for the United Kingdom for 2004.

<sup>16</sup> Refers to the Vatican City State.

<sup>17</sup> UNAIDS estimates that, at the end of 2005, 10,000 adults and children were living with HIV in the combined populations of Serbia and Montenegro, adult HIV prevalence was 0.2 per cent, and there were fewer than 100 deaths caused by AIDS. No estimates were provided for the number of AIDS orphans.

<sup>18</sup> The Former Yugoslav Republic of Macedonia.

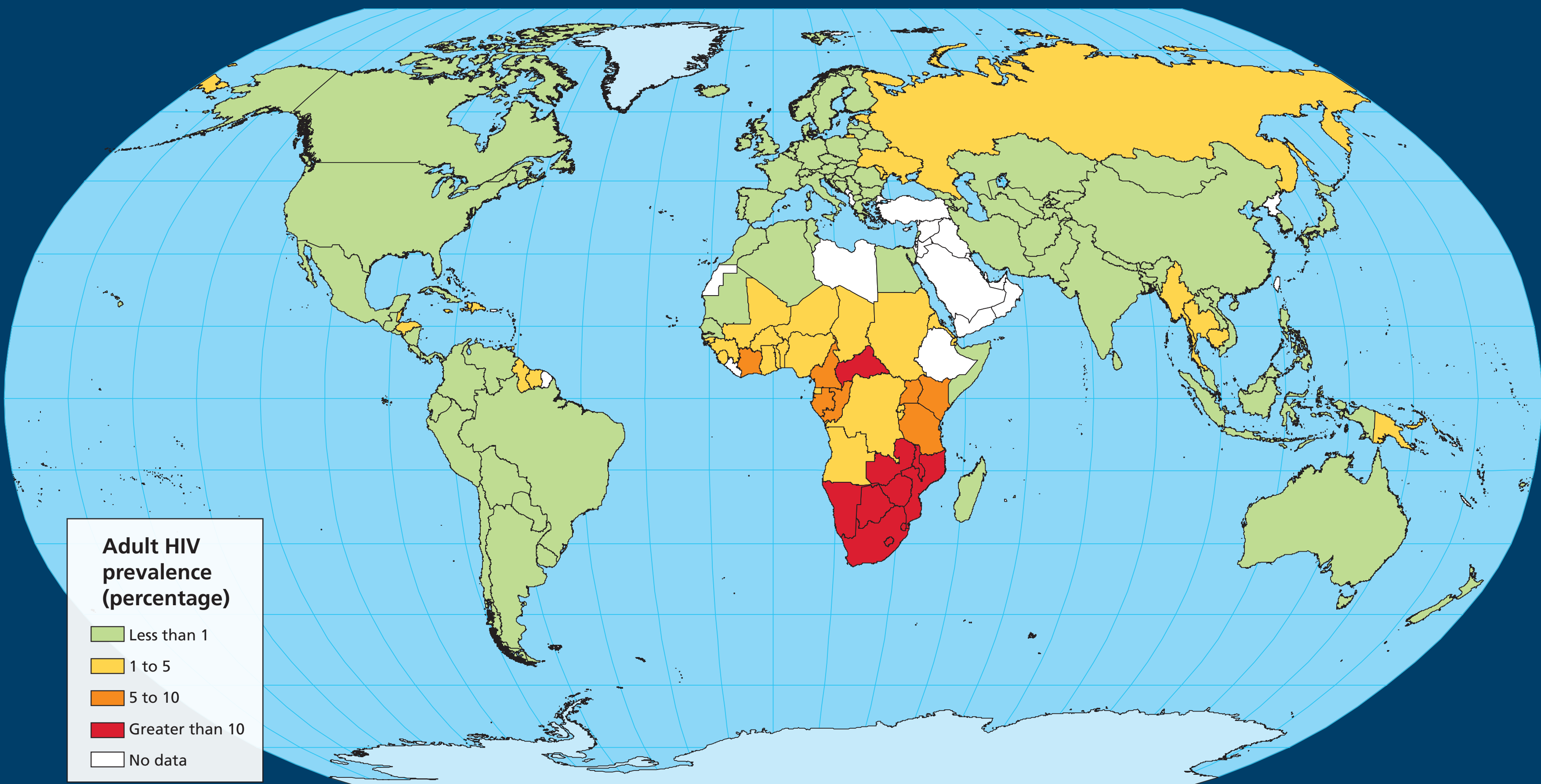
<sup>19</sup> HIV/AIDS estimates for Canada are preliminary.

<sup>20</sup> Including Christmas Island, Cocos (Keeling) Islands and Norfolk Island.

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# Adult HIV prevalence



Note: The boundaries shown on this map do not imply official endorsement or acceptance by the United Nations.

## Population and HIV/AIDS 2007

**Introduction.** The AIDS epidemic remains one of the greatest challenges confronting the international community. In countries with a large number of people living with HIV, all population and development indicators are affected by the epidemic. Governments often cite HIV/AIDS as their most significant demographic concern. For more than two decades, the rapidly expanding HIV/AIDS epidemic has triggered a wide array of responses at the national, regional and global levels. The goals established by the United Nations General Assembly in the 2000 Millennium Declaration and through the adoption of the 2001 Declaration of Commitment on HIV/AIDS reflect widely-held concerns about the impact of the epidemic on development and human well-being. More recently, at the 2006 High Level Meeting on AIDS, Member States adopted a Political Declaration focusing on how to attain universal access to comprehensive HIV/AIDS prevention programmes, treatment, care and support by 2010.

**People living with HIV.** Despite the recent downward revision of the HIV prevalence estimates in a number of countries, including India, the number of people living with HIV continues to increase in all regions of the world. In 2007, over 33 million people were living with HIV, including nearly 31 million people aged 15 years or over and more than two million children under age 15. Women made up just over half of all adults living with HIV in 2007, and 61 per cent of adults living with HIV in sub-Saharan Africa. Almost two-thirds of all HIV positive adults and children lived in Africa, although this region was

home to just 14 per cent of the world population. The epidemic has also affected several countries in Asia, which was home to 5.1 million people living with HIV in 2005, Eastern Europe, where the population living with HIV amounted to 1.4 million in 2005, and Latin America and the Caribbean, where HIV positive people numbered nearly 2 million.

**Adult HIV prevalence.** Adult HIV prevalence, measured as the percentage of HIV-positive persons among those aged 15 to 49, varies considerably among countries and regions. At the end of 2005, adult HIV prevalence was one per cent or higher in 57 countries, all having generalized epidemics. In Southern Africa, the worst-affected region in the world, adult HIV prevalence stands at 22 per cent. Outside of Africa, the Caribbean has the highest adult HIV prevalence, at 1.6 per cent. HIV prevalence has been on the rise in several countries in Asia and Eastern Europe, which are still experiencing low-level epidemics. In the more developed regions as a whole, adult HIV prevalence is 0.6 per cent.

**AIDS deaths.** The annual number of deaths caused by AIDS increased steadily throughout the 1990s and until 2005. Since the disease was first diagnosed in 1981, over 25 million people have died from AIDS. Among the 2.1 million deaths caused by AIDS in 2007, more than three-quarters occurred in Africa. Globally, children under age 15 account for one in every seven deaths caused by AIDS, hence the importance of strengthening programmes that specifically address paediatric AIDS.

**AIDS orphans.** At the world level, an estimated 15.2 million children under age 18 have been orphaned by AIDS. Africa is home to the majority of AIDS orphans. At the end of 2005, an estimated 12 million children under age 18 in Africa had lost one or both parents to AIDS. Orphans face increased risk of death, violence, exploitation or abuse, and many are growing up in poverty. Caring for increasing numbers of orphans poses a major social problem, which is expected to worsen as more parents die of AIDS. By 2010, the number of AIDS orphans worldwide may exceed 18 million.

**Life expectancy at birth.** Life expectancy has plummeted in several of the countries most affected by the HIV/AIDS epidemic. While the average life expectancy at birth for the world's population in 2007 was 67 years, life expectancy for Africa was a low 53 years. In several of the most affected countries, AIDS has produced life expectancies that are more than 20 years lower than what would have been expected in the absence of AIDS.

**Total population in 2015.** The size of the projected population for the 62 countries considered as significantly affected by the HIV/AIDS epidemic will depend in part on the success of efforts to reduce high-risk behaviours and to increase the percentage of AIDS patients who receive life-prolonging antiretroviral treatment (ART). **2015 population with AIDS:** In projecting the impact of the epidemic, it is assumed that by 2015, 31 of the most affected countries will succeed in providing ART to at least 70 per cent of the persons in need of treatment. In the remaining 31 affected countries, ART coverage is expected to be lower, reaching between 40 per cent

and 50 per cent in 2015. The projected population also rests on the assumption that persons receiving ART survive, on average, 17.5 years following initial infection with HIV, instead of the 10 years of average survival expected in the absence of treatment. **2015 population without AIDS:** The epidemic affects population growth directly in terms of increased mortality related to AIDS and indirectly through the reduction in the number of births caused by the sickness or premature death of potential parents. Among the 62 countries significantly affected by the epidemic, the population in 2015 is 2 per cent smaller when projected taking account of the impact of HIV/AIDS than it is when projected in the absence of the disease. In Southern Africa, the most affected region, the reduction in the population projected to 2015 caused by the epidemic is 14 per cent.

**Government measures implemented in response to the HIV/AIDS epidemic.** The search for effective strategies to halt the spread of the HIV/AIDS epidemic remains at the top of the international agenda. Most countries have introduced policies that include comprehensive prevention strategies, care, support or treatment among their major components. **Blood screening:** Transmission of HIV and other infectious diseases via blood transfusions poses a serious public health challenge for many countries. Efforts to ensure blood safety have improved considerably, with many countries expanding screening to cover a larger share of the blood supply. Nevertheless, national policies ensuring the safety of blood products vary in coverage and comprehensiveness. **Information and education campaigns:** Achieving a better understanding of HIV and AIDS among the population and familiarity with prevention methods

is a necessary step in combating the spread of HIV. Poorly-educated persons know less about HIV/AIDS than their better educated peers; they are less likely to use condoms consistently and are therefore more vulnerable to infection. Governments are raising public awareness of the risks of infection using information, education and communication (IEC) programmes through primary and secondary education, print media, theatre, radio, television, direct mailings and other public service means of communication. The participation and support of non-governmental organizations, people living with HIV/AIDS, religious institutions, and international and bilateral donors are important to ensure the effectiveness of IEC activities. **Provision of antiretroviral treatment (ART):** Although ART can significantly prolong life and reduce the suffering of AIDS patients, access to it remains low. Three-quarters of countries have instituted programmes to provide ART to persons with AIDS, including 95 per cent of countries with adult HIV prevalence above one per cent. However, these programmes are currently reaching less than a third of the population in need of ART. **Non-discriminatory policies:** By 2007, 63 per cent of countries had adopted legal measures to prohibit AIDS-related discrimination, up from 59 per cent in 2005. Discrimination and stigma significantly hamper the effectiveness of efforts to control the epidemic and hinder the achievement of universal access to therapy. **Distribution of condoms:** Programmes to promote condom use are widespread. While free distribution of condoms exists in most countries, many Governments acknowledge difficulties in reaching the target population. Furthermore, despite major improvements in condom provision, supply shortages and poor quality persist.

**Condom use.** Although programmes that distribute condoms to protect against HIV infection are common, condom use remains rare in most regions of the world. Data on use of condoms for contraceptive purposes indicate that, in 50 countries, at least 5 per cent of women who are married or in union use condoms. Among these countries, condom use exceeds 10 per cent in only 24. When used consistently and properly, condoms significantly reduce the risk of infection.

**ART coverage.** As of December 2006, an estimated 2 million people were receiving antiretroviral treatment in developing countries, representing 28 per cent of the estimated 7.1 million people in need of treatment. While this figure is 700,000 higher than that estimated for December 2005, the increasing need for ART continues to outpace the expansion of treatment programmes. It is reckoned that, for every person that begins ART, six others become newly infected with HIV. Coverage for children requiring antiretroviral treatment is especially low. In low and middle-income countries, only 8 per cent of the HIV positive children requiring treatment have access to ART.

**Health expenditure per capita.** Low levels of health expenditure per capita are a major cause of the inadequate coverage of basic health services in developing countries. In 2004, health expenditure per capita was US \$91 in all developing countries and US \$15 in the least developed countries. In many developing countries, the capability of mounting an effective response to HIV and AIDS has been hindered by insufficient resources and the inability to absorb additional resources efficiently.

### The national response

*"We, Heads of State and Government and representatives of States and Governments ... commit ourselves to pursuing all necessary efforts to scale up nationally driven, sustainable and comprehensive responses to achieve broad multisectoral coverage for prevention, treatment, care and support, with full and active participation of people living with HIV, vulnerable groups, most affected communities, civil society and the private sector, towards the goal of universal access to comprehensive prevention programmes, treatment, care and support by 2010"*

— Political Declaration on HIV/AIDS<sup>1</sup>

Important groundwork has been laid for a long-term effort towards universal access to comprehensive HIV/AIDS prevention programmes, treatment, care and support. By the end of 2006, 90 lower-income and middle-income countries had set national targets toward universal access, and 25 countries had incorporated those targets into an updated, costed and prioritized national plan.

Of the 90 countries that had set targets by the end of 2006, 81 had established treatment-related targets, 51 had set targets on care for orphans and vulnerable children, and 84 had established at least one prevention-related target, though less consistency is apparent across the broad range of prevention interventions. Two-thirds of countries with prevention-related targets had set goals for condom distribution and

for prevention of mother-to-child transmission, while only about half had targets for HIV testing, behavioural change and appropriate knowledge among young people.

As of December 2006, an estimated 2 million people were receiving antiretroviral treatment in low-income and middle-income countries, an increase of 700,000 over the number estimated to be on antiretroviral treatment a year earlier. In spite of this progress, only 28 per cent of the estimated 7.1 million people in need of treatment had access to antiretrovirals at the end of 2006 and access to treatment will need to be expanded markedly in order to achieve the goal of universal access by 2010.

<sup>1</sup> General Assembly resolution 60/262, annex, 2 June 2006

### The international response

The need to halt the spread of the HIV/AIDS epidemic has prompted an impressive array of responses at the local, national, regional and global levels. At the High-Level Meeting on AIDS, convened by the United Nations General Assembly on 2 June 2006, a new global objective was proclaimed: achieving universal access to HIV prevention programmes, treatment, care and support by 2010. The commitment to universal access established a major milestone on the road towards the realization of the Millennium Development Goals (MDGs) in 2015 and especially of goal 6 (to have halted and begun to reverse the spread of HIV/AIDS). Lack of universal access to prevention programmes and treatment for those infected is hindering the achievement of the MDGs on poverty reduction, expansion of education, the promotion of gender equality, and the improvement of child and maternal health. This most recent commitment strengthens those made by Governments in the Declaration of Commitment on HIV/AIDS adopted by the United Nations General Assembly at its twenty-sixth special session in 2001.

Bilateral and multilateral efforts to support the efforts to combat the spread of HIV and to address its consequences in low-income and middle-income countries have often given priority to strategies that emphasize immediate results over those whose impact is felt over the longer-term. More than two decades into the

epidemic, the need to focus on longer-term strategies that establish a solid foundation for continued and sustainable progress is paramount. An important condition for long-term sustainability is to integrate HIV programmes with other relevant services to combat the spread of HIV and to address the consequences of the epidemic.

In 2004, guiding principles to improve coordination of national responses to the HIV/AIDS epidemic, known as the "Three Ones", were developed. They call on international and national partners to align their efforts around one agreed AIDS action framework, coordinated by one national AIDS coordination authority with a broad-based multisectoral mandate and monitored through one agreed national monitoring and evaluation system. In the 2005 World Summit Outcome, Heads of State and Government committed themselves to work actively to implement the "Three Ones" and the General Assembly endorsed them again in the 2006 Political Declaration on HIV/AIDS.

The Population Division of the Department of Economic and Social Affairs is responsible for providing the international community with up-to-date, accurate and scientifically objective information on population and development. The Population Division monitors and analyses population policies and population trends for all countries and areas of the world, including trends and policies related to HIV/AIDS. This wall chart provides a current picture of the HIV/AIDS epidemic and the major responses to it.

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