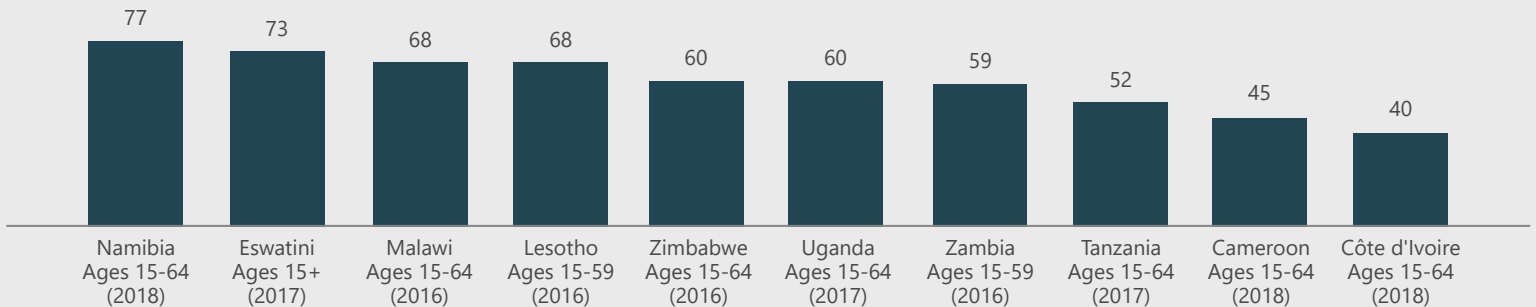




Latest Results: Population-Based HIV Impact Assessments

July 2018

Figure 1 – Percentage of HIV-Positive Adults Virally Suppressed

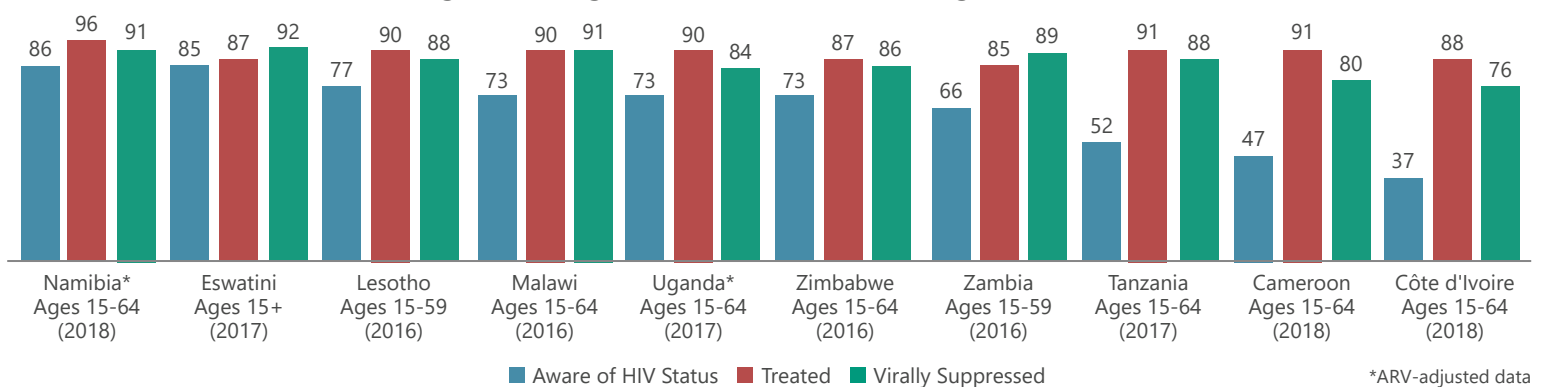


New data from the Namibia Population-based HIV Impact Assessment (NAMPHIA) shows that 77 percent of all HIV-positive adults have achieved viral load suppression, a widely used measure of effective HIV treatment in a population, surpassing the Joint United Nations Programme on HIV/AIDS (UNAIDS) target of 73 percent by 2020 (Figure 1). Compared with the UNAIDS 2012 estimates, Namibia has reduced its adult HIV incidence rate by 50 percent in the past five years.

Namibia has reached or exceeded the UNAIDS 90-90-90 targets among women and, nationally, by attaining 86-96-91 among adults (Figure 2). Namibia accomplished this through the strategic expansion of HIV prevention and treatment services, with a focus on viral load suppression at the individual and community level, and the swift implementation of forward-leading HIV policies.

NAMPHIA results also suggest that women ages 15-24 still have a far higher HIV incidence rate (0.99 percent) than same-aged young men (0.03 percent). This highlights the continued need for expanded primary HIV prevention in young women, including through the PEPFAR-led DREAMS Partnership, and ensuring all men 25-35 are virally suppressed through the new MenStar Coalition.

Figure 2 – Progress to UNAIDS 90-90-90 Targets in Adults



The PHIA evidence that several countries supported under the **PEPFAR Strategy** are on track to reach HIV epidemic control by 2020. Namibia has achieved the highest level of viral load suppression among all HIV-positive adults and the epidemic is coming under control in the country. Other PHIA show varying levels of progress toward reaching the viral suppression target of 73 percent, highlighting key areas for improvement, particularly the need to increase the coverage of HIV testing among adult men, adolescent girls, and young women.

New PHIA in Cameroon and Cote d'Ivoire highlight substantial gaps in western Africa toward reaching epidemic control despite significant investments, pointing to the depth and breadth of key policy barriers to HIV service uptake that need to be addressed. Overall, the PHIA also reveal key gaps in HIV prevention and treatment programming for women ages 15-24 and men ages 25-34 that require urgent action. In all countries surveyed, lower percentages of these groups reported knowing their HIV status, current use of HIV treatment, and had viral suppression than older adults.

The PHIA are funded by the U.S. government, through PEPFAR, and conducted by the U.S. Centers for Disease Control and Prevention (CDC), ICAP at Columbia University (ICAP), and local governmental and non-governmental partners.

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