A comprehensive strategy linking prevention, treatment, care and support for people living with HIV/AIDS could save the lives of millions of people.

THE GLOBAL PICTURE

- HIV/AIDS is the leading cause of death among adults aged 15–59 years worldwide. It has killed more than 20 million people; an estimated 34–46 million others are living with the disease.
- In 2003, 3 million people died of AIDS and 5 million others became infected with HIV.
- Globally, unprotected sexual intercourse between men and women is the predominant mode of HIV transmission.
- The average time lag between infection with HIV and the onset of full disease is 9–11 years in the absence of treatment.

IMPACT ON AFRICA

- Today, about one in 12 African adults has HIV/AIDS.
- In 2003, Africa was home to two-thirds of the world's people living with HIV/AIDS.
- As many as 9 out of 10 HIV-positive people in sub-Saharan Africa do not know that they are infected.
- HIV/AIDS has reversed the gains in life expectancy made in sub-Saharan Africa, which peaked at 49 years during the late 1980s and is projected to fall to just under 46 years by 2005.
- In many sub-Saharan countries, high death rates among young adults mean that there are fewer working-age adults on whom children and elderly relatives depend.

IMPACT ON OTHER REGIONS

- In 2003, it was estimated that 840 000 people in China and 3.8–4.6 million in India were infected with HIV/AIDS.
- Countries in eastern Europe and central Asia are experiencing growing epidemics, driven mainly by injecting drug use and to a lesser extent by unsafe sex among young people.
- In western Europe, the estimated number of new infections greatly exceeds the number of deaths, largely as a result of the success of antiretroviral therapy in lowering death rates.
- In the WHO Eastern Mediterranean Region it is estimated that there are 750 000 people living with HIV/AIDS.
In the Americas, the Caribbean has the second-highest prevalence in the world after sub-Saharan Africa: overall adult prevalence rates are 2–3%.

In Latin America, an estimated 1.6 million people are infected.

In the United States of America, 30 000–40 000 new infections occur every year, with African-Americans and Hispanics the most affected populations.

**IMPACT ON WOMEN AND CHILDREN**

- About 58% of Africans living with HIV/AIDS are women. They are infected at younger ages than men by, on average, 6–8 years.
- Every year an estimated 2.2 million HIV-positive women give birth.
- Four million children have been infected with HIV in the last two decades, including 700 000 in 2003. In almost all such cases, the virus is transmitted from mother to child during pregnancy, at delivery or through breastfeeding.
- There are about 14 million HIV/AIDS orphans in the world, most of them in Africa. The number is expected to reach 25 million by 2010. By then up to 25% of the children in some sub-Saharan countries will be orphans.
- Prophylactic treatment with antiretrovirals in combination with other interventions has almost entirely eliminated HIV infection in infants in industrialized countries.
- The risk of HIV transmission to infants in developing countries where breastfeeding is the norm can be reduced by more than 50% in mothers receiving short courses of antiretroviral therapy.

**IMPACT OF ANTIRETROVIRAL THERAPY**

- At present, almost 6 million people in developing countries need antiretroviral therapy, but only about 400 000 of them received it in 2003.
- Over 90% of the people needing antiretroviral therapy are found in just 34 high-burden countries. As of 3 March 2004, 48 countries had requested assistance under the “3 by 5” initiative (with the target of treating 3 million by 2005), of which 27 are high-burden countries.
- Half of the global treatment needs are located in just seven countries: South Africa (15.8%), India (10.4%), Kenya (6.4%), Zimbabwe (6.2%), Nigeria (6.1%) and Ethiopia (5.0%) and the United Republic of Tanzania (4.1%).
- Death rates for HIV/AIDS in Europe and North America have fallen by 80% in the four years since the introduction of antiretroviral therapy.
- The availability of treatment can increase voluntary counselling and testing – for example, it rose by 300% at a clinic in Haiti after antiretroviral therapy was introduced.
- Under Brazil’s programme to provide universal access to antiretroviral therapy, the average survival time of people with AIDS seeking care at government facilities has risen from less than 6 months to at least 5 years.