

Source :

United Nations (2007). The Millennium Development Goals Report 2007. New York, United Nations.

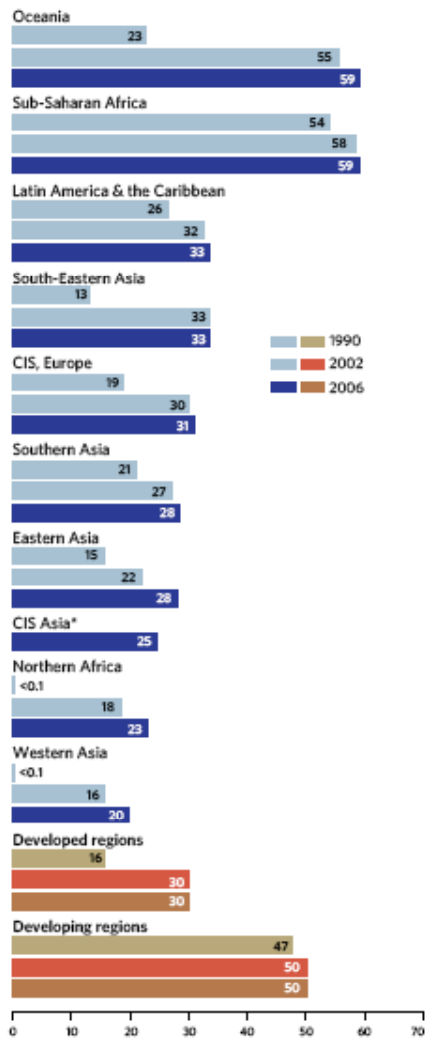
[http://mdgs.un.org/unsd/mdg/Resources/Static/Products/Progress2007/UNSD\\_MDG\\_Report\\_2007e.pdf](http://mdgs.un.org/unsd/mdg/Resources/Static/Products/Progress2007/UNSD_MDG_Report_2007e.pdf)

**In hardest hit areas, more than half of those living with HIV are women**

Power imbalances between men and women continue to drive the “feminization” of the HIV epidemic, though the dynamics are changing. Increasing numbers of married women are becoming infected, along with girls and young women. In 2006, women comprised 48 per cent of people around the world living with HIV.

Youth also places people of both genders at risk. In 2006, 40 per cent of new infections among people aged 15 and older were in the 15 to 24-year age group.

**Share of adults aged 15 years and older living with HIV, who are women, 1990, 2002 and 2006 (Percentage)**



\*Data for 1990 and 2002 are not available because the epidemic in this region is recent.

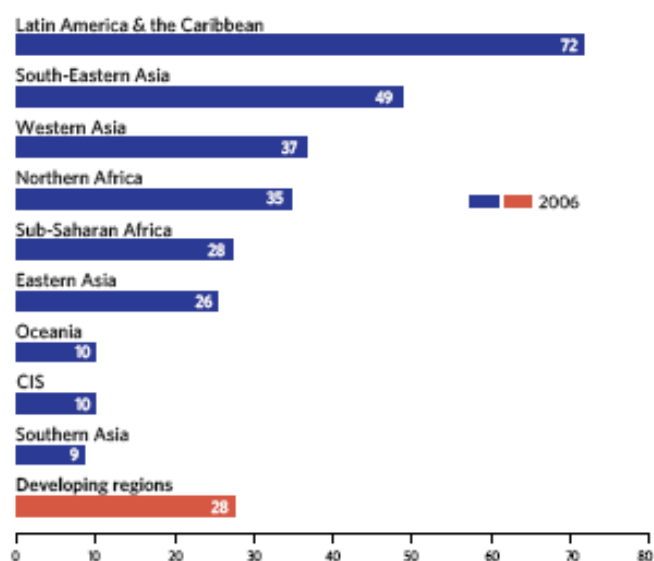
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### Though access to AIDS treatment has expanded, the need continues to grow

Efforts to provide treatment for those living with HIV and AIDS continue to expand. As of December 2006, an estimated 2 million people were receiving antiretroviral therapy in developing regions. This represents 28 per cent of the estimated 7.1 million people in need. Though sub-Saharan Africa is home to the vast majority of people worldwide living with HIV (63 per cent), only about one in four of the estimated 4.8 million people there who could benefit from antiretroviral therapy are receiving it.

The magnitude of the problem is growing: Though 700,000 people received treatment for the first time in 2006, an estimated 4.3 million people were newly infected that year, highlighting the urgent need to intensify prevention efforts. If current trends continue, the number of people with advanced HIV infection in need of therapy will rise faster than treatment services can be scaled up.

### Population living with HIV in need of treatment who are receiving antiretroviral therapy, 2006 (Percentage)



### Prevention measures are failing to keep pace with the spread of HIV

Slight declines in HIV prevalence among young people since 2000/2001 were reported in eight of the 11 African countries where sufficient information was available to assess trends. Improvements were most evident in Kenya, in urban areas of Côte d'Ivoire, Malawi and Zimbabwe, and in rural parts of Botswana.

In general, however, prevention measures are failing to keep pace with the growth of the epidemic. In sub-Saharan Africa, less than a third of young men and just over a fifth of young women demonstrated a comprehensive and correct knowledge of HIV.

In most countries, stigma and discrimination against people living with HIV further discourage many from taking an HIV test and disclosing their status to sexual partners. According to recent surveys in a dozen of the worst affected countries in Africa, the median percentages of men and women who had been tested and received the results were only 12 per cent and 10 per cent, respectively.

In 2005, only 11 per cent of pregnant women in low and middle-income countries who were HIV-positive were receiving services to prevent the transmission of the virus to their newborns.

Care of orphans is an enormous social problem, which will only get worse as more parents die of AIDS

In 2005, an estimated 15.2 million children had lost one or both parents to AIDS, 80 per cent of them in sub-Saharan Africa. By 2010, the figure is likely to rise to more than 20 million. Several countries are making progress in providing a minimum package of services for orphans and vulnerable children, including education, health care, and social welfare and protection. But far more work is needed to provide a humane and comprehensive response to this unprecedented social problem.