

The Global HIV/AIDS Epidemic

July 2004

The HIV/AIDS epidemic has already claimed over 20 million lives and another 38 million people are currently estimated to be living with HIV/AIDS worldwide. HIV/AIDS cases have been reported in all regions of the world, but most people living with HIV/AIDS (96%) reside in low-and middle-income countries, where most new HIV infections and AIDS-related deaths occur.¹ The nations of sub-Saharan Africa have been particularly hard-hit; there is also increasing concern about the next wave of the epidemic, emerging in parts of Eastern Europe and Asia.^{1,2} HIV is the leading cause of death worldwide, among those ages 15–59.³ The epidemic is considered a threat to the economic well-being and social and political stability of many nations.

Current Global HIV/AIDS Statistics

- There are an estimated 37.8 million people living with HIV/AIDS worldwide, a greater number than ever before.^{1,4}
- During 2003, an estimated 4.8 million people became newly infected with HIV, including approximately 630,000 children (<15 years old).¹
- 2.9 million people died of AIDS in 2003. Of these, about half a million were children.¹
- Worldwide, most people living with HIV are unaware that they are infected.³

Impact by Region

The major route of HIV transmission worldwide is heterosexual sex, but risk factors for HIV vary around the world. In many regions of the world, men who have sex with men, injection drug users, and sex industry workers account for significant proportions of infections.¹

Several regions and countries have been particularly hard-hit by the HIV/AIDS pandemic (See Figure 1). Even in areas such as the U.S. where HIV incidence has leveled, there are increasing numbers of people living with HIV/AIDS, not everyone has access to care, and there are signs that HIV infection may be on the rise within some communities.^{1,5,6,7} Around the world, the regions most affected by HIV/AIDS are:

- **Sub-Saharan Africa.** Sub-Saharan Africa is home to 66% (25 million) of people living with HIV/AIDS but only 10-11% of the world's population.¹ Almost every nation in this region has a generalized HIV/AIDS epidemic – that is, the national HIV prevalence rate is 1% or more. In six sub-Saharan African nations, over 20% of adults are estimated to be HIV-positive.¹ South Africa, with an estimated adult prevalence rate of 21.5%, has the greatest number of people living with HIV/AIDS in the world (5.3 million). Swaziland has the highest prevalence rate in the world (38.8%), followed by Botswana (37.3%).¹
- **Latin America & The Caribbean.** An estimated 2 million people are living with HIV/AIDS in Latin America and the Caribbean combined, 252,000 of whom were newly infected with HIV in 2003. Eleven countries in this region have generalized epidemics, with Haiti's adult prevalence rate being the highest (5.6%). The HIV/AIDS adult prevalence rate in the Caribbean (2.3%) is second only to sub-Saharan Africa.¹

Figure 1: HIV Prevalence & Incidence by Region^{1,8}

Region	Total No. (%) Living with HIV/AIDS end of 2003	Newly Infected in 2003	Adult ⁹ Prevalence Rate
Global Total	37.8 million (100%)	4.8 million	1.1%
Sub-Saharan Africa	25.0 million (66%)	3.0 million	7.5%
South/South-East Asia	6.5 million (17%)	850,000	0.6%
Latin America	1.6 million (4%)	200,000	0.6%
North America	1.0 million (3%)	44,000	0.6%
Eastern Europe/Central Asia	1.3 million (3%)	360,000	0.6%
East Asia	900,000 (2%)	200,000	0.1%
Western Europe	580,000 (2%)	20,000	0.3%
North Africa/Middle East	480,000 (1%)	75,000	0.2%
Caribbean	430,000 (1%)	52,000	2.3%
Oceania	32,000 (<1%)	5,000	0.2%

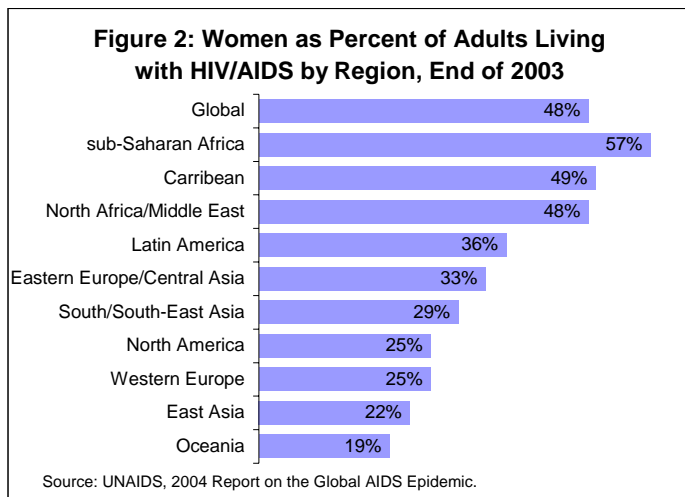
- **Eastern Europe & Central Asia.** An estimated 1.3 million people are living with HIV/AIDS in this region. The epidemic is one of the fastest growing in the world and is concentrated among young people.^{1,2} Driven largely by injection drug use, HIV prevalence rates have risen sharply over the last several years.¹ The Russian Federation has the largest number of people living with HIV/AIDS in the region (an estimated 860,000)¹ and is considered part of the epidemic's "next wave".
- **Asia.** An estimated 7.4 million people are living with HIV/AIDS across the different parts of Asia. There are increasing concerns about the spread of the epidemic in this region, particularly in China and India, the two most populous nations in the world. Like Russia, they are considered part of the epidemic's "next wave" and despite having relatively low prevalence rates today, the epidemic could expand significantly over the next decade without increased intervention. India already has the second highest number of people estimated to be living with HIV/AIDS in the world (5.1 million).¹⁰ Within the region over all, at least three countries – Cambodia, Thailand and Myanmar – have generalized epidemics, with adult HIV prevalence rates of over 1%.¹

Impact on Women & Young People

- Women comprise an increasing proportion of adults (ages 15-49) living with HIV/AIDS, rising from 41% in 1997 to almost half (48%) as of the end of 2003.¹ This trend is occurring in most regions of the world, and is particularly pronounced in sub-Saharan Africa, where women represent more than half (57%) of all adults living with HIV/AIDS (See Figure 2).¹ Gender inequalities in social and economic status and in access to prevention and care services increase women's vulnerability to HIV. Sexual violence may also increase women's risk and women, especially young women, are biologically more susceptible to HIV infection than men.¹ The epidemic has multiple effects on women including: added responsibilities of caring for sick family

members; loss of property if they become widowed and/or infected; and even, violence when their HIV status is discovered.¹

- Teens and young adults, particularly girls and young women, continue to be at the center of the epidemic.¹ Young people, ages 15-24 account for approximately half of new adult HIV infections and 28% of the global total of adults living with HIV/AIDS.¹ Most young people living with HIV/AIDS are girls (62%), including 76% of HIV-positive young people in sub-Saharan Africa; in some countries, infection rates are five times higher among young women than young men.¹
- An estimated 15 million children living today have been orphaned due to AIDS, having lost one or both parents to the epidemic. Most (12 million) live in sub-Saharan Africa.¹



The Multi-Sectoral Impact of AIDS

The global HIV pandemic has had a profound, multi-sectoral impact on the structure of many nations, affecting their development and economic growth, communities, households, and individuals:

- AIDS is increasingly recognized as a serious challenge to development.^{1,11} High prevalence countries are estimated to be losing 1-2% of their annual economic growth,¹ and the long-term economic effects may be much higher.^{3,12} Because HIV/AIDS often hits working age populations hardest, the workforce of many nations has been affected, as skilled workers are lost to the epidemic.¹ By 2020, the labor force in some sub-Saharan African countries could be as much as 35% smaller because of workers lost to AIDS.¹ The loss of skilled workers in turn affects nations' ability to respond to the epidemic.
- The education sector is also threatened, as AIDS claims the lives of teachers and contributes to serious teacher shortages in several African countries. AIDS also weakens the education sector through its impact on school attendance and enrollment among children affected by HIV/AIDS.¹
- Increasing demand for health care services is overwhelming the public health infrastructure in many developing countries. At the same time, many countries are losing large numbers of health care workers to AIDS. In some African countries, it is estimated that AIDS causes up to one half of all deaths among employees in the public health sector.¹
- Many of the nations hardest hit by HIV/AIDS also suffer from malnutrition, food insecurity, and famine. These challenges are interrelated with HIV/AIDS, each intensifying and complicating the effects of the other.¹
- The demographic effects of the epidemic are significant, as it alters the population structures of hard hit countries, affecting their growth and mortality rates and, ultimately, their age and sex distributions. Individuals die at prematurely young ages, during their most productive and reproductive years.^{3,13} One

consequence of this is that there are fewer working age people to support children and the elderly. And, in some parts of world, there are disproportionately fewer women compared to men, due to HIV mortality.

- One of the most striking demographic impacts of HIV/AIDS is on life expectancy, reversing steady gains made in many countries during the last century. By 2010, life expectancies in some highly-affected countries could drop to below 40 years, well below what they would have been without HIV/AIDS and even below levels they had reached in the pre-AIDS era.^{3,13}

The Global Response

The past few years have brought greater attention by the international community to HIV/AIDS, leading to several important initiatives including: The United Nations General Assembly Special Session on HIV/AIDS; The Global Fund to Fight AIDS, Tuberculosis, and Malaria; The World Health Organization's "3x5 Initiative"; and the U.S. "President's Emergency Plan for AIDS Relief" (PEPFAR). Global funding for HIV/AIDS has also increased over time. Still, resources fall short of projected need and most people at risk for and living with HIV/AIDS do not have access to prevention, care, and treatment:

- In 2003, global funding for HIV/AIDS was estimated at just over \$4 billion, but need was much higher.^{1,14,15} Financing needs are expected to grow, with UNAIDS projecting that \$12 billion will be needed by 2005, and \$20 billion by 2007, to effectively respond to the HIV/AIDS epidemic in low- and middle-income countries.¹
- The lack of resources has limited many nations' ability to bring prevention and treatment programs to scale, and stem the tide of the epidemic. It is estimated that prevention programs reach fewer than one in five of those who need them¹ and that only 7% of people with HIV in need of antiretroviral therapy have such access.^{1,16}
- Most funding for HIV/AIDS is expected to come from international donors, although affected country governments also have an important role to play. The U.S. is a key part of the global response, contributing the highest dollar amount to HIV/AIDS. In its fiscal year 2004, U.S. federal funding for global HIV/AIDS is expected to total \$2.3 billion (12% of the U.S. HIV/AIDS budget). This includes the first year of funding for PEPFAR, and \$547 million for the Global Fund.¹⁷

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