# The State of HIV Prevention in Zimbabwe

Adults. >15 years

Young women, 15-24 years

Children, 0-14 years

**HIV prevalence** 

Young women.

15-24 vears

Young men

15-24 years

Sex workers

sex with men

People who inject drugs

Very good

Gay men and other men who have

Change in new HIV infections

2010 2023

2023

2023

0

2010

2023

2010

2023

ΔII

All 📕

All

<25 years

<25 years

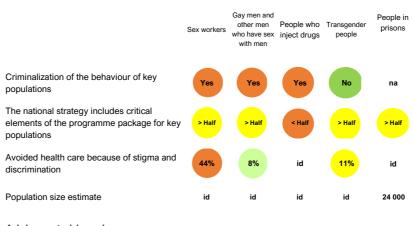
<25 years

Good

10



#### Key populations



## Adolescent girls and young women

15-19 years 15-49 years 19% Proportion of women who experienced intimate partner violence Girls who completed lower secondary education Policies on life skills-based HIV and sexuality education (secondary schools)

Laws requiring parental consent for adolescents to access HIV testing services, age of consent

HIV programme coverage and outcomes

20 000

15 000

14 000

2025

2020 target

2025 target

20 000

2020

Number of new HIV infections (all ages)

90 000

80 000

70 000

60 000

50 000

40 000

30 000

20 000

10 000

0

2010

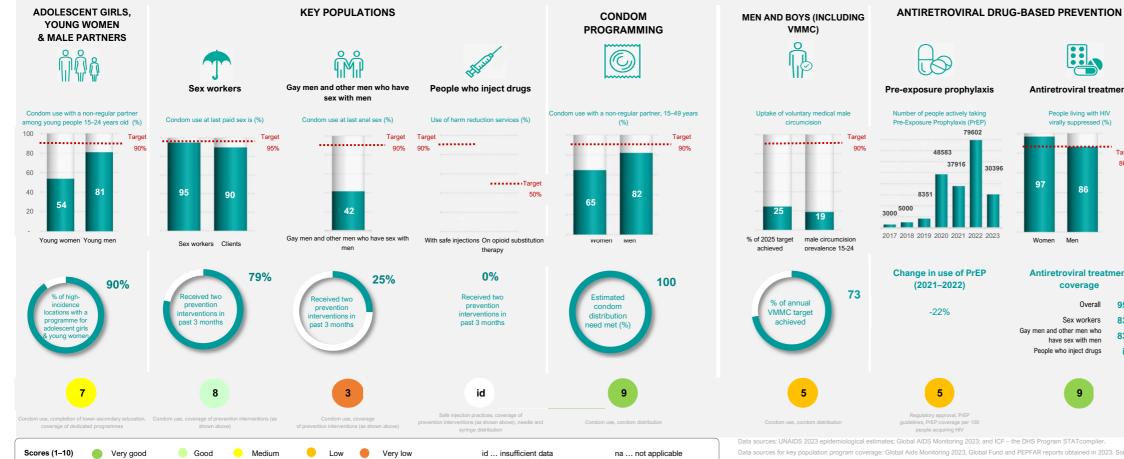
2020 and 2025 targets represent the country's r 82.5% reduction by 2025 against 2010 as a base

2015

2010 baseline

2020, 2022

79 000



TARGET 2010-2025

0 10 000 20 000 30 000 40 000 50 000 60 000 70 000

Perce

Low

30

40

50

Very low

20

-82.5%

-819

-82%

-72%

Data sources for key population program coverage: Global Aids Monitoring 2023, Global Fund and PEPFAR reports obtained in 2023. Some of the data are triangulated and thus not nati Note: The 2023 UNAIDS epidemiological estimates represent the year 2022. Other data points may refer to various years when the surveys were conducted.

31%

Antiretroviral treatment

People living with HIV

Antiretroviral treatment

Sex workers

have sex with mer People who inject drugs

Gav men and other men who

Overall

coverage

ed (%)

Targe 86%

95%

83%

83%

id

53%

Yes

Yes, <16

## Baseline status of 10 HIV Prevention 2025 **Road Map Actions**

Road Map Action	2023	2024
1. Data-driven needs assessment		
2. Precision prevention approach		
3. Define investment needs		
4. HIV prevention leadership agencies		
5. Expand community-led services		
6. Remove social and legal barriers		
7. Integration with related services		
8. Introduction of new technologies		
9. Real-time programme monitoring		
10. Accountability for HIV progress		

Note: 'Yes' refers to the adaptation having been introduced (not necessarily it being universally available).

#### Linkages between HIV and sexual and reproductive health services

HIV testing services integrated within sexual and reproductive health Provider-initiated condom promotion

integrated into sexual and reproductive health services

Yes	
Yes	

PREVENTION OF VERTICAL TRANSMISSION OF HIV				
The second secon	7%			
% of HIV-positive pregnant women receiving ART	88%			
Number of Estimated births to women living with HIV	49 000			
Number of new child infections due to vertical transmission	3 600			
Distribution of new child infections				
% of child infections because mother acquired HIV during pregnancy or breastfeeding	14%			
% of child infections because mother did not receive antiretroviral therapy duirng pregnancy or breastfeeding	47%			
% of child infections because mother did not continue antiretroviral treatment during pregnancy or breastfeading	22%			
% of child infections because mother was on antiretroviral treatment duirng pregnancy or breastfeeding, but was not virologically suppressed	17%			
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