

UNAIDS 2025

World Health Organization (WHO)

2024 Results Report

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WHO leads global efforts to promote, provide and protect health and well-being for all.

HIV in WHO's mandate

Through its [Global Health Strategy for 2025–2028](#), WHO aims to address the major health challenges and crises of our time, setting an ambitious agenda to get the world back on track to achieve the health-related SDGs and save 40 million lives over the next four years. This is pursued through a threefold mission: promoting health by addressing the root causes of disease; providing health by strengthening health systems; and protecting health by preventing, preparing and responding to health emergencies.

As a founding Cosponsor of the Joint Programme, WHO leads on HIV testing, treatment and care, HIV drug resistance and HIV/TB coinfection. WHO jointly coordinates its work with UNICEF (on eliminating vertical transmission of HIV and paediatric HIV), UNFPA (for SRH); with the World Bank and UNICEF (for achieving universal health coverage); and in partnership with UNODC (on harm reduction and programmes to reach people who use drugs and people in prison).

Top results in 2024

Progress and gaps documented. The [Implementing the global health sector strategies on HIV, viral hepatitis and sexually transmitted infections, 2022–2030: report on progress and gaps 2024](#) report highlighted significant progress in several areas while also describing persistent gaps in the HIV response.

Major HIV prevention recommendations implemented in 2024. As of December 2024, 94% of reporting countries (162) had incorporated WHO recommendations on pre-exposure prophylaxis (PrEP) into their national guidelines, including 73 countries that are recommending both daily oral PrEP and event-driven (on-demand) PrEP.

New guidelines and recommendations on HIV prevention published. WHO published [guidelines](#) for HIV post-exposure prophylaxis (PEP), prioritizing community-based delivery and task sharing to mitigate barriers such as stigma, and a [toolkit](#) to update the implementation tool for PrEP. WHO continued to support countries on incorporating recommendations on long-acting injectable cabotegravir for HIV prevention. It also issued [recommendations](#) for including the dapivirine vaginal ring, which can protect women who are at substantial risk of HIV infection, in national guidelines and for achieving regulatory approval for its use.

HIV prevention interventions for key populations and groups at high risk of HIV promoted. WHO released and disseminated seven [policy briefs](#) on interventions for individual key populations as well as complementary briefs on behavioural interventions and hepatitis C virus testing and treatment.

Efforts promoted to reduce HIV-related stigma and discrimination. WHO released a [technical brief](#) to guide health facility managers through the process of ensuring quality, HIV-related stigma-free services.

Major HIV testing and diagnostics recommendations implemented in 2024. HIV self-testing policies have expanded significantly, with 107 countries reporting national policies that support self-testing and 71 countries routinely implementing those policies. This marks an almost three-fold increase in national policies and a five-fold increase in

routine use since 2017. Additionally, 78 countries have adopted dual HIV and syphilis rapid diagnostic tests, mainly for pregnant women and key populations.

New recommendations on HIV testing and simplified service delivery released.

New [Consolidated guidelines](#) on differentiated HIV testing services provided recommendations on expanding self-testing and network-based testing services to support PrEP delivery. An [implementation guide](#) on prevention of HIV misdiagnosis was launched, as well as a self-testing implementation [toolkit](#) for HIV, hepatitis C and syphilis.

Major HIV treatment and care recommendations implemented. As of July 2024, 99% of countries have adopted the “treat all” approach, with over 120 countries having adopted WHO’s preferred first- and second-line ART regimens (with recommended regimens used by more than 90% of adults and 75% of children on HIV treatment). Rapid ART initiation on the same day as HIV diagnosis has been adopted by 82% of 123 reporting countries, a 49% increase since 2020. Additionally, 78% of 146 countries have reduced the frequency of ARV collections, with three-month prescriptions the most-implemented approach. Most have also adopted WHO’s care package for advanced HIV disease, either fully (72% of 123) or partially (18%), and are incorporating other health care services (e.g. for TB, maternal and child health, SRH and noncommunicable diseases) into HIV services. Policies for community-based ART delivery have more than doubled since 2020. Routine viral load monitoring for adults and adolescents has been implemented in 73% of 124 reporting low- and middle-income countries. WHO published a [mapping of policy uptakes](#) and implementation status in countries.

New guidelines on HIV treatment and care issued. WHO published a [policy brief](#) on supporting re-engagement in HIV treatment services; a [technical framework](#) to improve HIV service access and outcomes for men and HIV; and [technical guidance](#) on implementing WHO evidence-based interventions for adolescents and young adults living with and affected by HIV.

ARV drugs optimized in adults, children and pregnant women. WHO published a [technical report](#) on optimization of second- and third-line ART for people living with HIV, including for children and pregnant women.

HIV drug resistance addressed. The WHO HIV drug resistance [report](#) summarized recent data on HIV drug resistance in the context of integrase strand transfer inhibitors used for HIV prevention and treatment. WHO also released a [technical report](#) on key clinical trials, observational studies and programmatic data on newer ARVs to inform future updates to global HIV treatment policies and future research priorities.

Research on ARVs in pregnancy advanced. The antiretrovirals in pregnancy [research toolkit](#) provided guidance and resources to accelerate the inclusion of pregnant and breastfeeding populations in research on treatment and prevention of HIV and to ensure the efficacy and safety of optimized HIV treatment outcomes.

Progress towards triple elimination of HIV, syphilis and hepatitis B virus advanced. As of December 2024, 19 countries or areas had been certified by WHO for eliminating vertical HIV transmission. In addition, 93 of 124 reporting countries have national plans to eliminate vertical transmission of both HIV and syphilis, most of which are integrated, while nine countries have a plan for eliminating the vertical transmission of HIV and 10 countries have a similar plan for syphilis. A [policy brief](#) introduced a framework for the triple elimination of vertical transmission of HIV, syphilis and hepatitis B virus.

Evidence-based interventions for paediatrics and adolescents supported. WHO provided technical support under the umbrella of the Global Alliance to end AIDS in children; supported the scale-up of preferred first line-based ART regimens for children and planning for introduction newly available optimized formulations; and finalized a technical brief on paediatric HIV case finding in collaboration with UNICEF.

Needs of key populations protected in the context of health emergencies. In response to the 2024 mpox upsurge in Africa, declared a public health emergency of international concern on 14 August, WHO guided the community protection response, focusing on effective community engagement and ensuring the links between mpox, HIV and STIs were appropriately leveraged for the response. Community engagement efforts included convening a reference group and deploying a consultant to support key populations in Goma, Democratic Republic of the Congo in identifying potential outbreaks ahead of official declarations.

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