Eastern Europe and Central Asia is one of only two regions where overall HIV prevalence has not declined in recent years. The 19,000 new HIV infections among people aged 15–24 in 2017 was only about 9 per cent smaller than the 2010 figure, as opposed to other regions where reductions up to 25 per cent have been observed. Adolescents’ vulnerability is also signalled by a region-wide ART coverage rate of just 37 per cent among all people living with HIV over the age of 14, a rate far below the global one of 59 per cent. The full extent and consequences of the lack of effective, quality HIV prevention and treatment services for adolescents are unknown because many countries do not publish HIV estimates.

In 2017, there were about 76,000 adolescents and young people aged 15–24 living with HIV in Eastern Europe and Central Asia.

Since 2010, new HIV infections have decreased by only 9 per cent among the region’s adolescents and young people, signalling an unchecked HIV epidemic with indications of reversals in HIV gains, especially in areas affected by conflict.

In a region where the HIV epidemic affects key populations, more bio-behavioural studies and stronger support for the rights and dignity of key populations are needed.

Data source: UNAIDS 2018 estimates.

Note: This map does not claim any official position by the United Nations. Countries are classified according to the Eastern Europe and Central Asia geographical region. Data for adolescents and young people aged 15–24 are not available for Albania, Armenia, Belarus, Bosnia and Herzegovina, Bulgaria, Croatia, Montenegro, Romania, Russian Federation, Serbia, The former Yugoslav Republic of Macedonia, Turkey, Turkmenistan and Uzbekistan. Countries with no data and countries outside of the geographical region are shown in grey.
KEY FACTS:
Children, HIV and AIDS in Eastern Europe and Central Asia, 2017

Analysis

Although most HIV epidemics in the region are becoming more general in nature, key populations remain the most affected. The risks and vulnerabilities associated with adolescents overall are even greater among those who belong to one or more key population groups, because they face multiple barriers to essential prevention and treatment services due to punitive laws, discrimination and stigma around behaviours such as illicit drug use and certain kinds of sexual activity.

Late HIV testing is a key challenge throughout the region. Although infections tend to occur as a result of behaviours initiated during adolescence, the HIV diagnosis tends to be established at a later stage. Many countries fail to recognize that raising awareness among young people and offering them better access to early HIV testing are critical.

The impact can be seen, for example, in estimates of HIV prevalence exceeding 5 per cent among two groups of people younger than 25: in Ukraine, young men who have sex with men, and in Kazakhstan, people who inject drugs, including young pregnant women. Halting overall HIV epidemics throughout the region requires targeted prevention and treatment interventions that aim to expand safe and consistent access to essential HIV services among such highly vulnerable populations.