PRESS STATEMENT

RELEASE OF PRELIMINARY RESULTS OF THE 2020 UGANDA POPULATION-BASED HIV IMPACT ASSESSMENT

Preliminary Results of the 2020 Uganda Population HIV Impact Assessment Show Progress in Controlling the Epidemic

The results of the 2020 Uganda Population-based HIV Impact Assessment (UPHIA) indicate that the current prevalence of HIV among adults aged 15 to 49 years in Uganda is 5.5 percent. UPHIA 2020 is a nationwide survey that was conducted to provide estimates of HIV incidence, HIV prevalence, viral load suppression, and other important HIV/AIDS programme indicators. Data were collected in all regions of the country from a sample of households that are representative of the Ugandan population. The survey was conducted between February 2020-March 2020, paused due to restrictions arising out of the COVID-19 mitigation measures, and resumed in October 2020 and completed in February 2021.

The survey collected information about the uptake of HIV prevention, care, and treatment services and offered home-based HIV counseling and testing, with referral to ART clinics for those who tested HIV positive. HIV testing was conducted in each household using a serological rapid diagnostic testing algorithm based on Uganda’s national HIV testing guidelines. Despite the COVID-19 pandemic, UPHIA 2020 achieved high participation rates. Out of 11,130 eligible households, 96 percent participated. Of 15,801 eligible women and 11,834 eligible men aged 15 years and older, 96 percent of women and 92 percent of men were interviewed. Of those interviewed, 98 percent of women and 98 percent of men were tested for HIV. Unlike UPHIA 2016-17, this survey did not include children under 15 years of age.

The prevalence of HIV among adults of reproductive age 15 to 49 years was 5.5 percent (7.1 percent among women and 3.8 percent among men) reflecting a slight decrease from 6.0 percent in UPHIA 2016-17 (7.5 percent among women and 4.3 percent among men). In the entire UPHIA 2020 survey sample of adults aged 15 years and older, HIV prevalence was 5.8 percent (7.2 percent among women and 4.3 percent among men) corresponding to approximately 1.3 million adults living with HIV in Uganda. The prevalence of HIV in adults 15 years and above was higher in urban areas (7.1 percent) than in rural areas (5.2 percent).

The magnitude of HIV prevalence varied considerably across the 11 geographic regions in the survey, from a low of 2.1 percent in North East (Karamoja) region to 2.8 percent in West-Nile region; 4.2 percent in Mid-Eastern region; 4.2 percent in North East (Teso) region; 4.5 percent East Central (or Busoga region); 5.5 percent in Mid-Western region; 6.0 percent in Kampala; 6.2 percent in Central 2 (Greater Mubende, Luwero and Mukono) region; 6.3 percent in South
Western region; 7.6 percent in Mid North region; and 8.1 percent in Central 1 region (greater Masaka). HIV prevalence in all regions was lower in UPHIA 2020 compared to UPHIA 2016/17 except in mid-north and Central 1.

Among both men and women, HIV prevalence was lowest in the 15 to 19 year age group. Among men, HIV prevalence was highest in the 45 to 49 year age group at 11.1 percent, and among women, HIV prevalence was highest in the 50 to 54 year age group at 13.6 percent.

The survey reported continued higher HIV prevalence in young women than in young men. The HIV prevalence among young people aged 15 to 24 years was 1.8 percent. In this age group, the prevalence was three times higher among women at 2.9 percent compared to men at 0.8 percent.

HIV prevalence appears to have fallen among all age groups in UPHIA 2020 compared to UPHIA2016/17, except among older individuals aged 50 – 54 and 60 - 64. This finding is consistent with other epidemiological data on the shifting of HIV burden to older age groups. Looking more in depth at the HIV prevalence among young adults, the survey found that HIV prevalence estimates were higher among the 20 to 24 year age group than in the 15 to 19 year age group. HIV prevalence was 0.2 percent in men aged 15 to 19 years and 1.6 percent in men aged 20 to 24 years. Similarly, HIV prevalence was 1.7 percent in women aged 15 to 19 years and 4.2 percent in women aged 20 to 24 years.

The UPHIA 2020 survey also measured the rate of viral load suppression (VLS). VLS is a marker of effective treatment. People living with HIV (PLHIV) with suppressed viral loads live longer, have fewer complications due to HIV, and are less likely to transmit the virus to others. UPHIA 2020 showed that 75.4 percent adults age 15 years and older were virally suppressed. These finding highlights that with support from development partners such as PEPFAR, the Global Fund and other programmes, the Government of Uganda’s HIV programme has exceeded the UNAIDS and national goal of having population level VLS of at least 73 percent and improved the health and well being of Ugandans living with HIV.

Viral load suppression was highest among older adults: 93.5 percent among HIV-infected women aged 45 to 54 years and 91.0 percent among HIV-infected men aged 55 to 64 years. In contrast, the prevalence of VLS was distinctly lower among younger adults: 57.8 percent among HIV-infected women and 43.5 percent among HIV-infected men aged 15 to 24 years.

Among HIV-infected adults aged 15 years and older, prevalence of VLS varied geographically across the country, ranging from 60.3 percent in mid-Eastern region to 82.8 percent in the South-Western region. VLS increased among all regions between UPHIA 2016-17 and UPHIA 2020.

The updated Joint United Nations Programme on HIV/AIDS (UNAIDS) targets for 2025 aim for 95 percent of those living with HIV to know their status, 95 percent of those who know their status to be on treatment and 95 percent of those on treatment to be virally suppressed. The preliminary results of the survey show encouraging progress toward the achievement of the UNAIDS 95-95-95 targets, particularly among women. Specifically, the survey showed that in adults 15 years and above: 80.9 percent of those living with HIV were aware of their status,
96.1 percent of those aware of their HIV status were on ART, and 92.2 percent of those on ART were virally suppressed. These measures demonstrate improvement in all three targets compared to the first UPHIA survey, conducted in 2016-17, which also measured national population-level HIV incidence, prevalence, and viral load suppression. Together, the results from both surveys provide information on national and regional progress toward HIV epidemic control.

Male circumcision is one of the strategies for HIV prevention in Uganda. The proportion of men aged 15 to 49 years that reported being circumcised increased from 42.5 percent in 2016 to 57.5 percent in 2020. UPHIA 2020 found that the prevalence of male circumcision was highest among young people aged 15 to 24 years at 63 percent. The coverage of male circumcision continues to vary considerably among geographical regions, from a low of 20.6 percent in the Karamoja subregion to a high of 73.3 percent in Kampala. The coverage of male circumcision among adult men increased in all regions between 2016-17 and 2020.

The preliminary results of UPHIA 2020 demonstrate that Uganda is well positioned to achieve the UNAIDS goal to end the HIV epidemic by 2030. Over three-quarters of people living with HIV had suppressed viral load, meaning that treatment programs are successfully reaching the majority of the population living with HIV. Of those enrolled on treatment, over 90 percent were virally suppressed. However, roughly 20 percent of persons living with HIV were unaware of their status, identifying a critical gap in case finding strategies.

The data from UPHIA 2020 also highlighted a much higher HIV prevalence among young people aged 20 to 24 years compared to those aged 15 to 19 years. This observation coupled with reported low levels of viral load suppression among HIV-infected persons aged 15 to 24 years suggest that prevention and testing interventions need to begin earlier among at-risk adolescents, particularly girls and young women.

UPHIA was led by the Government of Uganda and conducted by the Ministry of Health in collaboration with ICAP at Columbia University. Funding for the survey was provided by the U.S. President’s Emergency Plan for AIDS Relief (PEPFAR), and technical assistance provided by the U.S. Centers for Disease Control and Prevention (CDC). Other collaborating partners included Uganda Virus Research Institute, Uganda Bureau of Statistics and Westat.

More UPHIA 2020 results, including those of HIV incidence tests (rates of new HIV infections) and other programme coverage and behavioural indicators will be released in due course. A subsequent summary sheet of UPHIA 2020 findings will be released in the coming months.

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