HIV and people who inject drugs



2023 UNAIDS GLOBAL AIDS UPDATE FACTSHEET

People who inject drugs are disproportionally affected by HIV. In 2022, HIV prevalence among people who inject drugs was seven times higher than among adults in the general population (aged 15–49 years). People who inject drugs who are living with or vulnerable to HIV include men, women, transgender people and gender-diverse people, and they may also be members of other key populations.

Use of opioid agonist maintenance therapy among people who inject drugs does not reach the 50% target in any region. Among reporting countries, it was far below the target in Asia and the Pacific (9.6%, 11 reporting countries), Latin America (9.3%, one reporting country), western and central Africa (6.5%, two reporting countries) and eastern Europe and central Asia (4.7%, 11 reporting countries).

Criminalization of possession of small amounts of drugs, violence, and stigma and discrimination remain significant barriers to achieving social justice and equality for people who inject drugs, and to ensuring health for all through access and uptake of HIV services.

Women who inject drugs are more likely to be exposed to higher risk for sexual transmission of infections, through sex work and their increased vulnerability to abuse from law enforcement officers and intimate partners, and to be the victim of physical assault or rape². Drug use (including injecting drug use) is often seen as contrary to the socially normative roles of women as mothers, partners and caretakers, leaving women who use drugs facing greater stigma and experiencing a range of specific harms³. This often means they are unable to realise their rights to sexual and reproductive health services, ante-and post-natal care, antiretroviral therapy and prevention of vertical HIV transmission.⁴

In numbers

The global median prevalence of HIV among people who inject drugs is 5%, ranging from 0% to 51.4% (50 reporting countries), which is much higher than among the global adult population (aged 15–49 years) (0.7%).

Among the 16 countries that also report sex disaggregation, the global median HIV prevalence is 8.5% among men who inject drugs and 15.0% among women who inject drugs.

Antiretroviral coverage is low among people who inject drugs, with a global median of 69%, ranging from 25% to 90.6% (22 reporting countries).

There is a lack of data in relation to population sizes in countries, rendering people who inject drugs invisible and making it difficult to provide adequate service coverage. A total of 94 countries have ever reported population size estimates for people who inject drugs. Among these, only 20 refer to national estimates derived by probabilistic methods within the past five years.

¹ Unless otherwise specified, the source for all quantitative data is Global AIDS Monitoring, 2023 (https://aidsinfo.unaids.org/) or UNAIDS epidemiological estimates, 2023 (https://aidsinfo.unaids.org/)

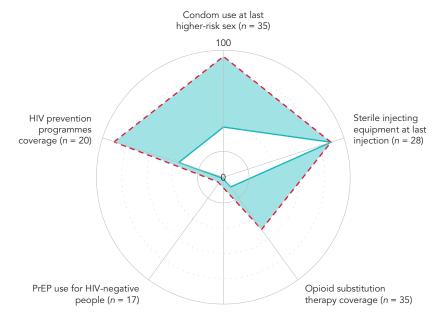
 $^{^{2}}$ UNODC, World Drug Report 2023 (United Nations publication, 2023

³ women-harm-reduction-2018.pdf (hri.global)

⁴ Frontline AIDs, 2020. Advancing the sexual and reproductive health and rights of women who use drugs

HIV services	Since 2018, among the 44 countries that reported the number of needles and syringes distributed per person who injects drugs per year by needle–syringe programmes, only five reported achieving the recommended more than 200 needles and syringes distributed per person who injects drugs. In the same period, only 12 of the 28 reporting countries achieved the 90% target on coverage of safe injecting practices.
	The median value of safe injecting practices at last injection was 91.5% among men who inject drugs and 91.6% among women who inject drugs (eight reporting countries).
	People who inject drugs may also be members of other key populations, such as sex workers, and programmes should factor in their intersecting needs (3).
Laws and policies	As of June 2023, 145 countries had punitive laws that criminalized possession of small amounts of drugs (4).5
	Punitive drug laws and policies, including around parental rights of people who use drugs, impede access to HIV and sexual and reproductive health and rights services (5).
	A positive development was in Ghana, which committed to ensuring drug laws and policies are consistent with international human rights obligations.
Sexual and reproductive health services	Women who use drugs (including women who inject drugs) face a number of barriers to their access to sexual and reproductive health services including limited access to contraception, appropriate antenatal and postnatal care, and poor access to antiretroviral therapy and prevention of vertical HIV transmission services (2).
Stigma and discrimination	A median of 29.9% of people who inject drugs have experienced stigma and discrimination in the past six months (five reporting countries). A median of 12.4% people who inject drugs have avoided accessing health-care services due to stigma and discrimination in the past 12 months (14 reporting countries).
	Women who use drugs (including women who inject drugs) face high levels of stigma and discrimination from service providers regarding their ability or suitability to have and raise children, which can deter them from accessing services (2).
Violence	A median of 28.1% people who inject drugs have experienced violence in the past 12 months (eight reporting countries).

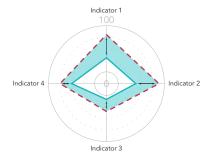
Figure 1 Gap to achieve the combination prevention targets among people who inject drugs, by intervention, global, 2018–2022



2025 target:

95% of people at risk of HIV infection, within all epidemiologically relevant groups, age groups and geographic settings, have access to and use appropriate, prioritized, person-centered and effective combination prevention options.

How to read



- --- Gap to achieve the target for indicators
- 2018–2022 status
- -- 2025 target

Source: UNAIDS Global AIDS Monitoring, 2023 (https://aidsinfo.unaids.org/); UNAIDS special analysis, 2023.

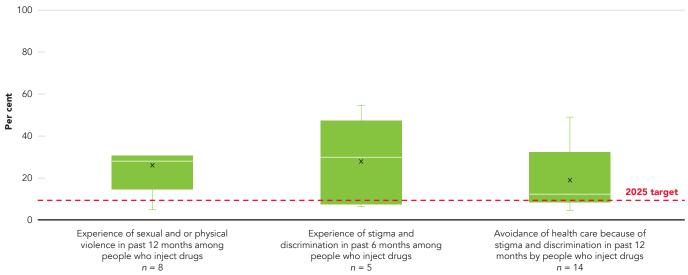
Note: *n* = number of countries reporting. HIV prevention programmes coverage refers to people from key populations who reported receiving at least two prevention services in the past three months. Possible prevention services received include condoms and lubricants, counselling on condom use and safer sex, and sterile injecting equipment. Condom use at last higher-risk sex does not take into account people taking PrEP and therefore may be underestimated.

The use of a clean needle the last time a person has injected tends to come from surveys, which are typically conducted in areas that have services available and thus may not be nationally representative.

PrEP targets were calculated based on the number of people who would most benefit from PrEP use, those with greatest vulnerability to HIV exposure within each key population. Reported numbers of PrEP users include all users regardless of vulnerability.

⁵ See also references in Laws and Policies Scorecard figures in regional factsheets.

Figure 2 Experience of sexual and or physical violence, stigma and discrimination, and avoidance of health care among people who inject drugs, reporting countries, 2018-2022



Source: UNAIDS Global AIDS Monitoring, 2023 (https://aidsinfo.unaids.org/). Note: n = number of countries reporting.

References

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For additional information and data on HIV and people who inject drugs see:

2023 global AIDS update report 2023 global AIDS update regional factsheets **UNAIDS** Key Populations Atlas

