

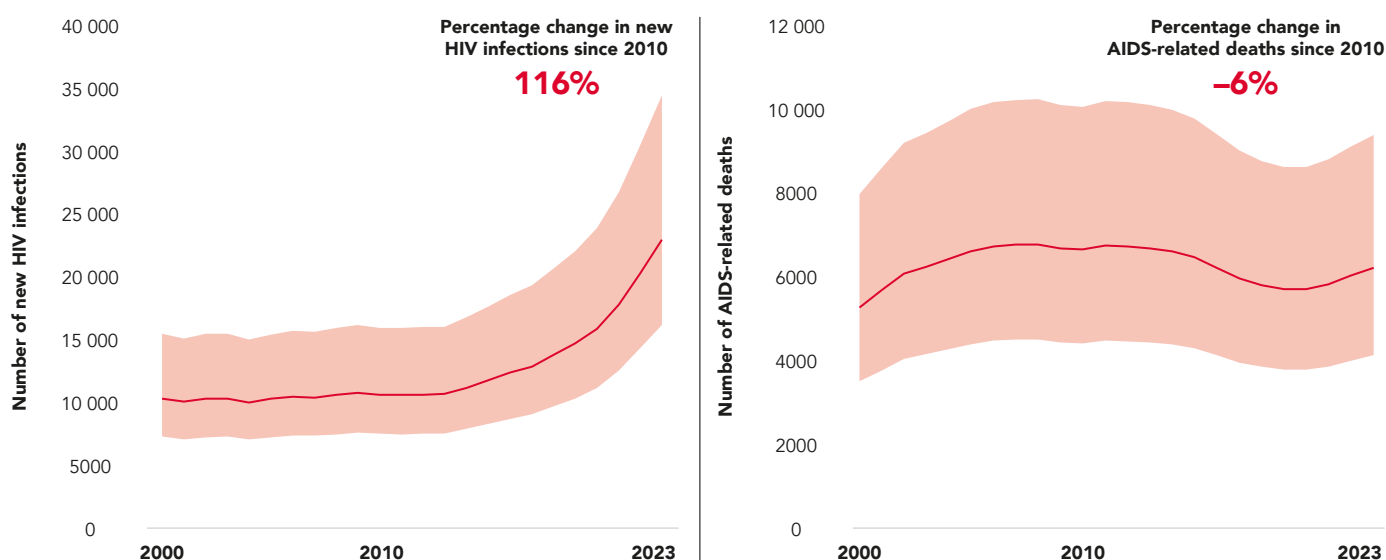
MIDDLE EAST AND NORTH AFRICA

Numbers of new HIV infections in the Middle East and North Africa increased by 116% between 2010 and 2023 (Figure 15.1). The HIV response remains a long way from achieving coverage targets for HIV by 2025. Yet, with HIV prevalence still very low, the region can rapidly reduce the number of new infections if countries take appropriate and effective actions that meet the needs of the populations most at risk of HIV.

Ostracized and criminalized populations are disproportionately affected by the HIV epidemic. People from key populations and their sex partners accounted for an estimated 84% of new HIV infections in 2022 (Figure 15.2), with gay men and other men who have sex with men experiencing especially steep rises in numbers of new HIV infections (1). Almost 20% of new HIV infections in the region were in young people aged 15–24 years,

Numbers of new HIV infections are rising in the Middle East and North Africa

Figure 15.1 Numbers of new HIV infections and AIDS-related deaths, Middle East and North Africa, 2000–2023



Source: UNAIDS epidemiological estimates, 2024 (<https://aidsinfo.unaids.org/>).



2023 DATA

- **116%** increase in new HIV infections since 2010
- **6%** decrease in AIDS-related deaths since 2010
- People living with HIV:
210 000 [170 000–280 000]
- New HIV infections:
23 000 [16 000–35 000]
- AIDS-related deaths:
6200 [4100–9400]

Testing and treatment cascade (all ages):

- % of people living with HIV who know their status:
64 [45–88]
- % of people living with HIV who are on treatment:
49 [34–68]
- % of people living with HIV who have a suppressed viral load: **45 [36–60]**

Financing of the HIV response

- Resource availability for HIV:
US\$ 164 million [85% gap to meet the 2025 target]

the majority of them male (55%). These epidemic patterns underscore the need for scaled-up HIV interventions for people from key populations and especially young people, and for reducing the societal and structural barriers that limit their access to needed services.

Numbers of AIDS-related deaths are declining at a slow rate (by only about 6% between 2010 and 2023). At 49% [34–68%], HIV treatment coverage in the region is the lowest in the world. Treatment coverage is especially low among children (35% [23–49%]) and women (44% [31–62%]). The region is a long way from reaching the 95–95–95 targets.

HIV services are either missing many of the people who are most at risk or are entirely absent. Intense stigma and discrimination marginalize people from key populations and deter them from seeking HIV-related health services. Strong social taboos, punitive laws and affordability barriers also restrict access. Out-of-pocket health spending in the region is among the highest in the world (2).

The region's HIV response is affected by extensive sociopolitical, economic and humanitarian crises, including in the occupied Palestinian territory, Somalia, Sudan, the Syrian Arab Republic and Yemen. In Sudan, almost 15 million people need health assistance, but 70% of health facilities are not operating in hard-to-reach areas (3). Financial support from the Global Fund to Fight AIDS, Tuberculosis and Malaria has enabled the replenishment of stocks of antiretroviral medicines and re-enrolment in treatment of approximately 4000 people living with HIV who dropped out of care because of the ongoing civil war in Sudan (5).

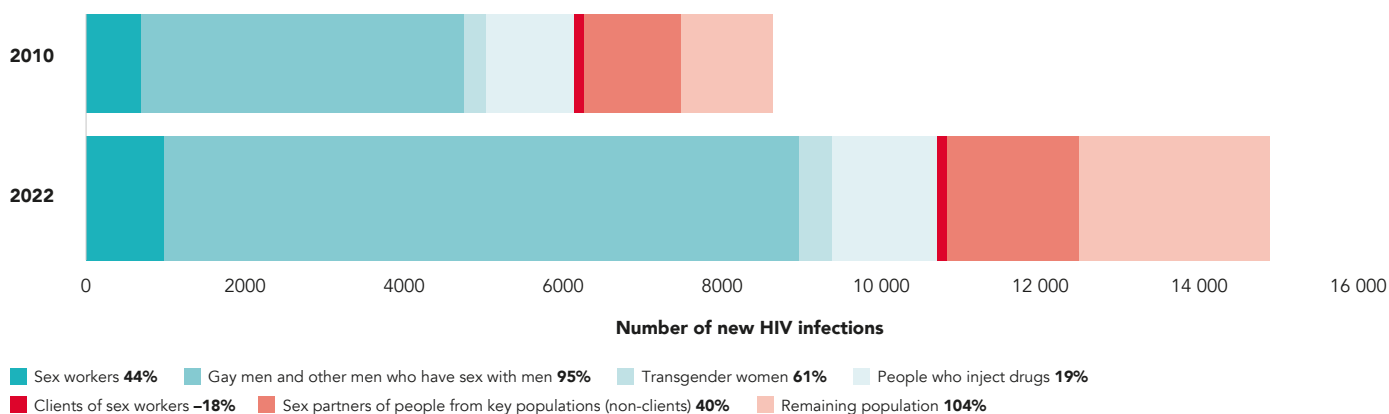
Yet, with an overall HIV burden that is still comparatively low, countries can end AIDS as a public health threat. This will require stronger political and increased funding, including support for community-led and other civil society organizations that serve the needs of people living with, at risk of, or affected by HIV (4).

Even where the removal of punitive laws may be politically unrealistic at the moment, there is scope for relaxing their enforcement in favour of public health objectives so that more people can access HIV services. Total resources available for HIV in the region were US\$ 164 million, which amounts to an 85% gap to meet the 2025 target (Figure 15.3).

The collection of improved and disaggregated HIV-related data, with ensured confidentiality, would contribute to boosting the region's HIV responses. This includes data for key population size estimates; HIV-related risk behaviours and determinants; experiences of stigma, discrimination and violence; and HIV programme coverage, access and quality (6).

The majority of new HIV infections are among people from key populations

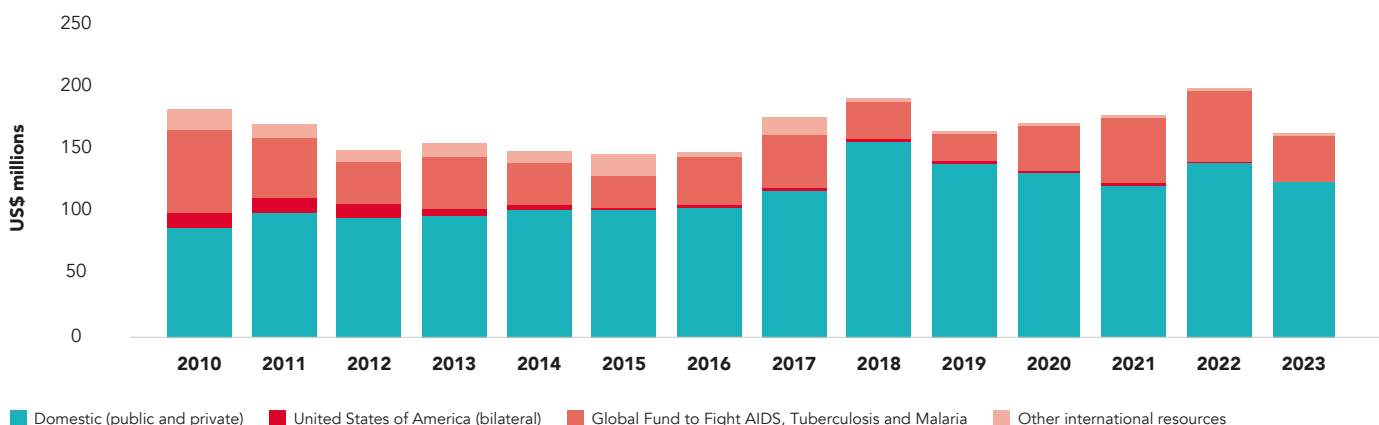
Figure 15.2 Distribution of new HIV infections and percentage change among adults, Middle East and North Africa, 2010 and 2022



Source: Korenromp EL, Sabin K, Stover J, Brown T, Johnson LF, Martin-Hughes R, et al. New HIV infections among key populations and their partners in 2010 and 2022, by world region: a multisources estimation. *J Acquir Immune Defic Syndr.* 2024;95(15):e34–e45.

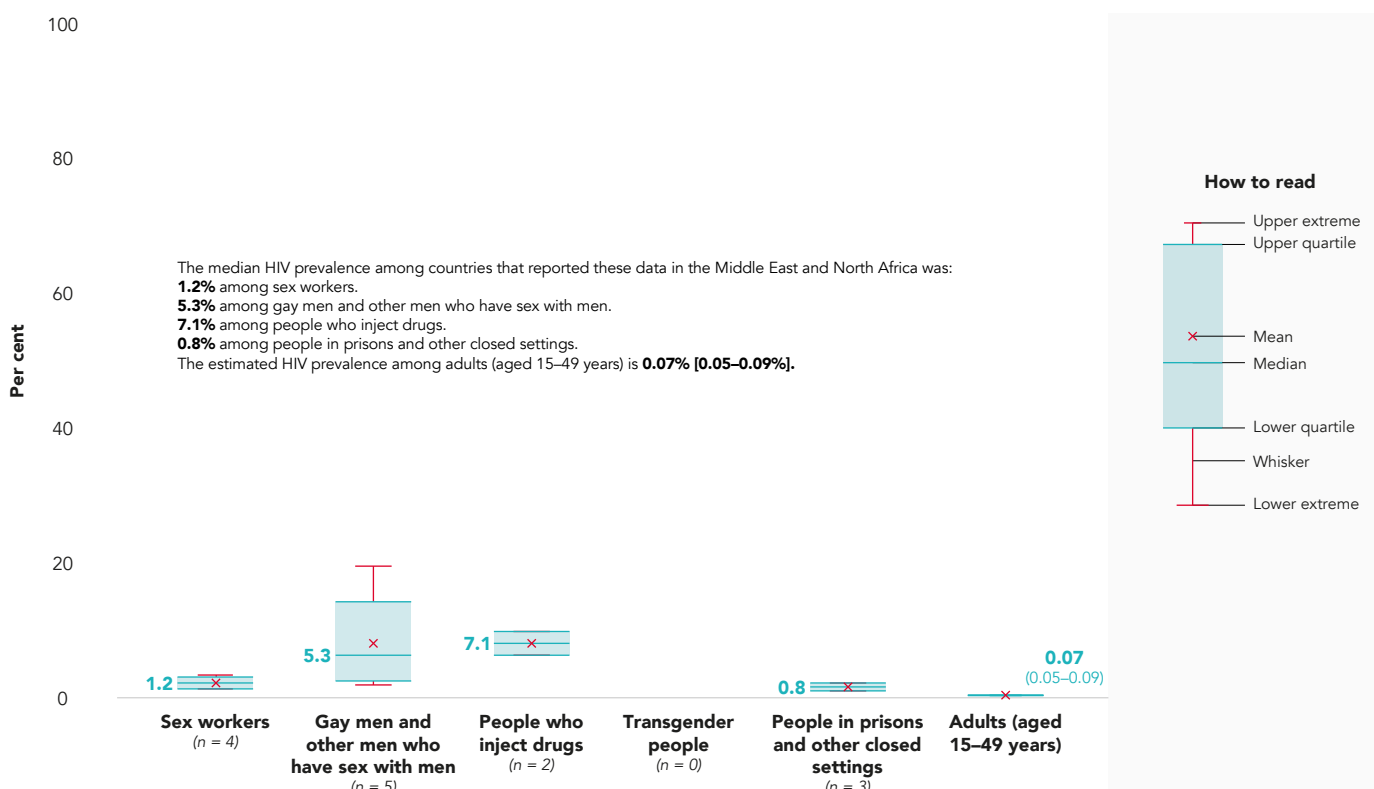
Resources for HIV in the Middle East and North Africa are in flux

Figure 15.3 Resource availability for HIV, Middle East and North Africa, 2010–2023



Source: UNAIDS financial estimates, July, 2024 (<http://hivfinancial.unaids.org/hivfinancialdashboards.html>).

Figure 15.4 HIV prevalence among people from key populations compared with adults (aged 15–49 years), reporting countries in the Middle East and North Africa, 2019–2023



Source: Global AIDS Monitoring, 2020–2024; UNAIDS epidemiological estimates, 2024 (<https://aidsinfo.unaids.org/>).

Note: n = number of countries. Total number of reporting countries = 19.

The adult prevalence uncertainty bounds define the range within which the true value lies (if it can be measured). Narrow bounds indicate that an estimate is precise, while wide bounds indicate greater uncertainty regarding the estimate.

Table 15.1 Reported estimated size of key populations, Middle East and North Africa, 2019–2023

Country	National adult population (aged 15–49 years) for 2023 or relevant year	Sex workers	Sex workers as percentage of adult population (aged 15–49 years)	Gay men and other men who have sex with men	Gay men and other men who have sex with men as percentage of adult population (aged 15–49 years)	People who inject drugs	People who inject drugs as percentage of adult population (aged 15–49 years)	Transgender people	Transgender people as percentage of adult population (aged 15–49 years)	People in prisons and other closed settings	People in prisons and other closed settings as percentage of adult population (aged 15–49 years)
Djibouti	625 000										
Morocco	19 503 000									102 700	0.53%
Oman	2 872 000									3500	
Estimated regional median proportion as percentage of adult population (aged 15–49 years):^a			0.38%		0.50%		0.10%		0.13%		-

■ National population size estimate
 ■ Local population size estimate
 ■ Insufficient data
 ■ No data

Source: Global AIDS Monitoring, 2020–2024 (<https://aidsinfo.unaids.org/>). Spectrum DemProj module, 2024.

^a Guide for updating Spectrum HIV estimates, UNAIDS 2024 (<https://hivtools.unaids.org/hiv-estimates-training-material-en/>).

Notes: Estimates shown are government-provided estimates reported for 2019–2023. Additional and alternative estimates may be available from different sources, including the Key Populations Atlas (<https://kpatlas.unaids.org/>), academic publications and institutional documents.

The regions covered by the local population size estimates are as follows:

Oman: Central Prison

Note on methodology

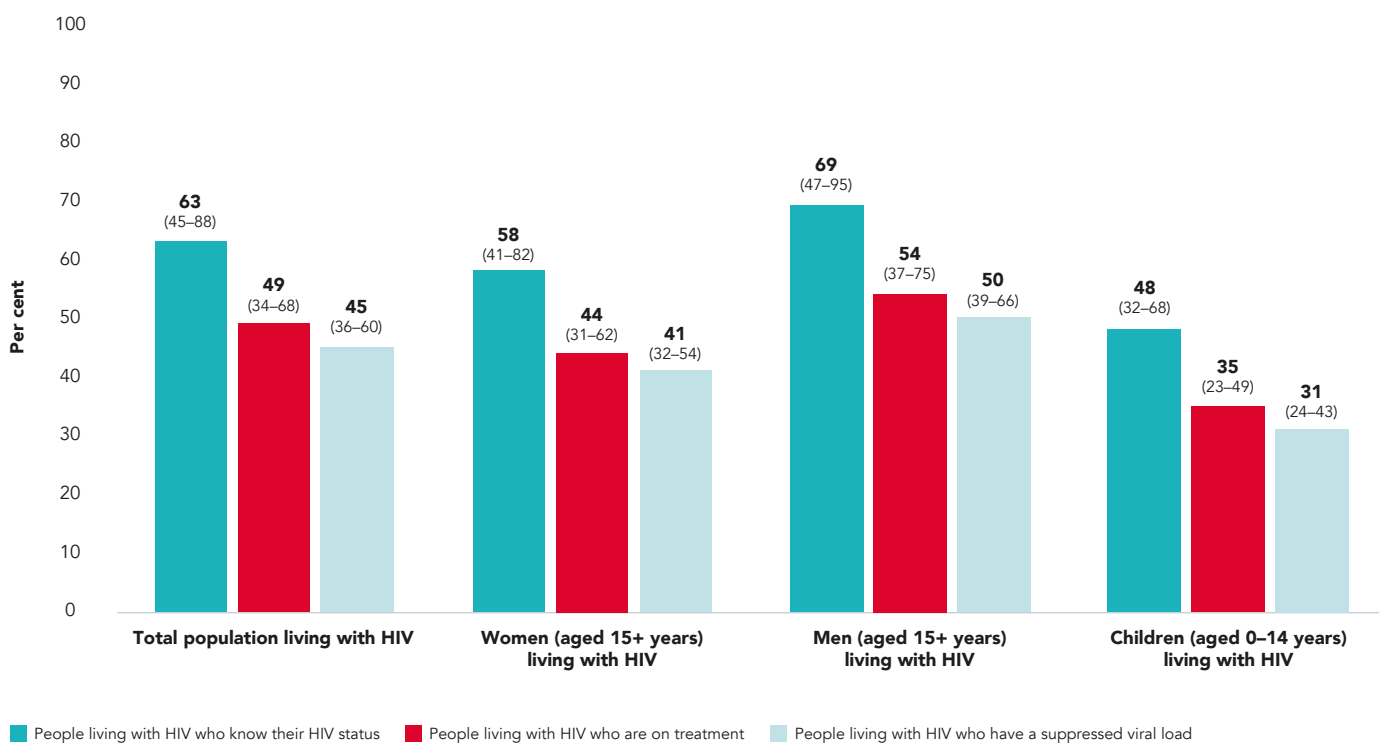
“The estimated size of key populations refers to reported values through Global AIDS Monitoring since 2019 only. A comprehensive review of the data was conducted during these reporting rounds and therefore estimates should not be compared with data presented in previous UNAIDS reports. As a result of this process, the estimates reported can be categorized as follows:

“National population size estimate” refers to estimates that are empirically derived using one of the following methods: multiplier, capture-recapture, mapping/enumeration, network scale-up method (NSUM) or population-based survey, or respondent-driven sampling-successive sampling (RDS-SS). Estimates had to be national or a combination of multiple sites with a clear approach to extrapolating to a national estimate.

“Local population size estimate” refers to estimates that are empirically derived using one of the before mentioned methods but only for a subnational group of sites that are insufficient for national extrapolation.

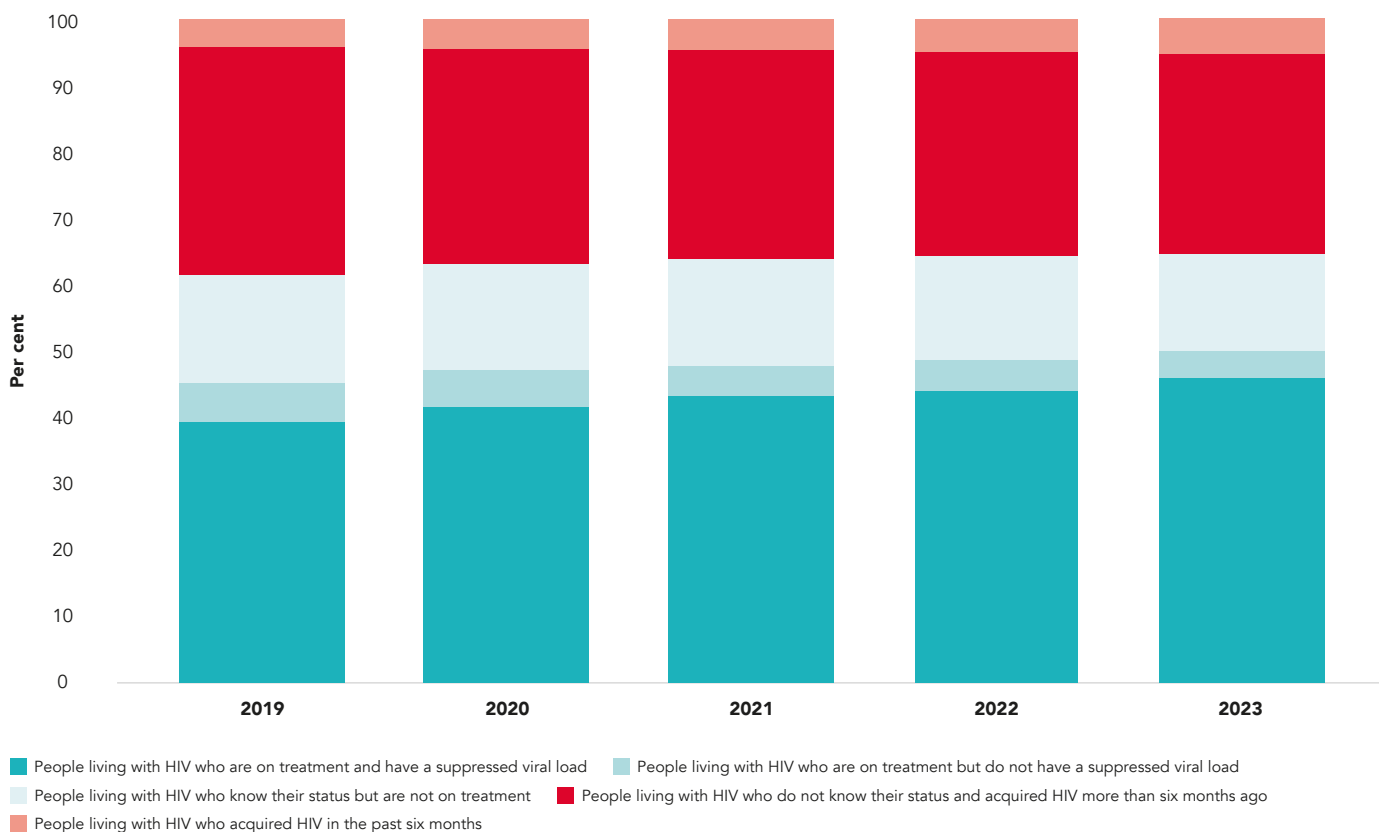
“Insufficient data” refers to estimates derived from expert opinions, Delphi, wisdom of the crowds, programmatic results or registry, regional benchmarks or unknown methods. Estimates may or may not be national.”

Figure 15.5 HIV testing and treatment cascade, by age and sex, Middle East and North Africa, 2023



Source: Further analysis of UNAIDS epidemiological estimates, 2024.

Figure 15.6 Distribution of people living with HIV by recent infection, knowledge of status, treatment and viral load suppression, adults (aged 15+ years), Middle East and North Africa, 2019-2023



Source: Further analysis of UNAIDS epidemiological estimates, 2024.

Table 15.2 Laws and policies scorecard, Middle East and North Africa, 2024

Country	Criminalization of transgender people ^a	Criminalization of sex work ^b	Criminalization of same-sex sexual acts in private	Criminalization of possession of small amounts of drugs ^c	Laws criminalizing HIV nondisclosure, exposure or transmission ^d	Laws or policies restricting the entry, stay and residence of people living with HIV	Parental or guardian consent for adolescents to access HIV testing
Algeria	8	11	19	21	29	7	5
Bahrain			19	22	30	7	
Djibouti		12	19	23	31	7	34
Egypt	1	1	19	2	1	7	1
Iraq		13	19	24	30	7	
Jordan	9	14	19	25	30	7	3
Kuwait	36	14	19	6	6	7	5
Lebanon	10	15	19	26	32	7	
Libya	2	3	2	3	2	7	3
Morocco	1	1	1	27	1	7	1
Oman	1	1	1	1	1	7	1
Qatar		4	19	4	30	7	
Saudi Arabia	4	4	19	4	6	7	4
Somalia		16	19		33	7	3
Sudan	2	2	2	2	2	7	35
Syrian Arab Republic	6	6	19	6	30	7	6
Tunisia	8	4	20	4	30	7	4
United Arab Emirates	8	17	19	28	6	7	
Yemen		18	19		30	7	

Criminalization of transgender people

- Yes
- No
- Data not available

Criminalization of sex work

- Any criminalization or punitive regulation of sex work
- Sex work is not subject to punitive regulations or is not criminalized
- Data not available

Criminalization of same-sex sexual acts in private

- Death penalty
- Imprisonment (14 years–life, up to 14 years) or no penalty specified
- No

Criminalization of possession of small amounts of drugs

- Yes
- No
- Data not available

Laws criminalizing HIV nondisclosure, exposure or transmission

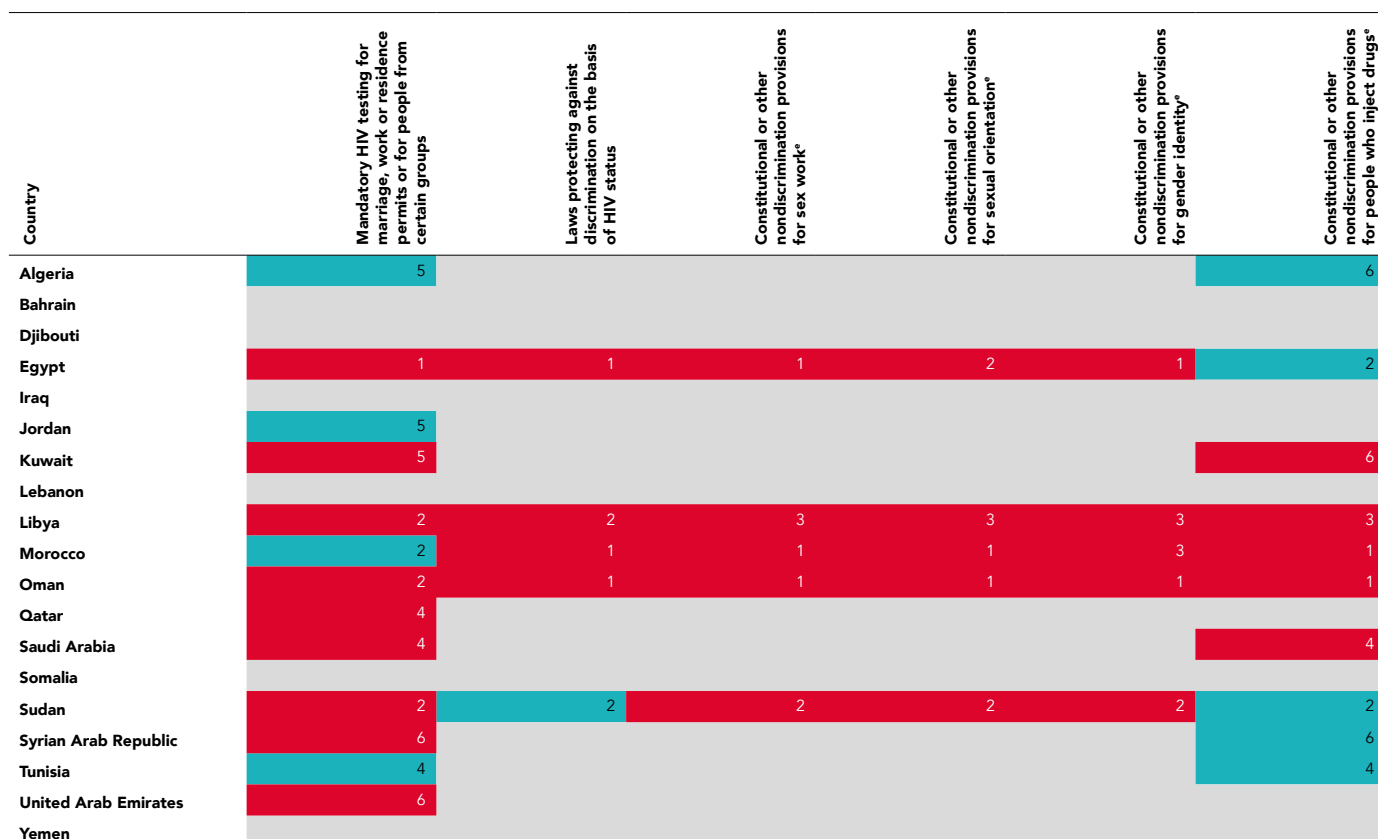
- Yes, HIV is explicitly criminalized
- Yes, HIV is criminalized within a broader disease law or prosecutions exist based on general criminal laws
- No
- Data not available

Laws or policies restricting the entry, stay and residence of people living with HIV

- Deport, prohibit short and/or long stay, and require HIV testing or disclosure for some permits
- Prohibit short and/or long stay and require HIV testing or disclosure for some permits
- Require HIV testing or disclosure for some permits
- No restrictions

Parental or guardian consent for adolescents to access HIV testing

- Yes, for adolescents aged 17–18 years
- Yes, for adolescents aged 15–16 years
- Yes, for adolescents aged 13–14 years
- Yes, for adolescents aged 12 years or younger
- Not addressed in laws or policy
- Data not available



Mandatory HIV testing for marriage, work or residence permits or for people from certain groups

■ Yes
 ■ No
 ■ Data not available

Laws protecting against discrimination on the basis of HIV status

■ No
 ■ Yes
 ■ Data not available

Constitutional or other nondiscrimination provisions for sex work

■ No
 ■ Yes
 ■ Data not available

Constitutional or other nondiscrimination provisions for sexual orientation

■ No
 ■ Yes
 ■ Data not available

Constitutional or other nondiscrimination provisions for gender identity

■ No
 ■ Yes
 ■ Data not available

Constitutional or other nondiscrimination provisions for people who inject drugs

■ No
 ■ Yes
 ■ Data not available

a Criminalization of transgender people refers to laws that criminalize people based on their gender identity or expression, such as laws against cross-dressing or impersonating the opposite sex.

b Criminalization of sex work refers to criminalization of any aspect of sex work, including buying sexual services, selling sexual services, ancillary activities associated with buying or selling sexual services, and profiting from organizing or managing sex work.

c Criminalization of possession of small amounts of drugs refers to the criminalization of possession of any quantity of drugs, including possession of a quantity of drugs sufficient only for personal use. A country is considered to criminalize possession of small amounts of drugs even if marijuana has been decriminalized.

d HIV nondisclosure, exposure or transmission may be explicitly criminalized in an HIV-specific law or within a law that covers a broader range of communicable diseases and mentions HIV. They may also be criminalized under a law that covers a broader range of communicable diseases but does not specifically mention HIV. Laws may limit criminalization to cases of actual and intentional transmission. This refers to cases where a person knows their HIV-positive status, acts with the intention to transmit HIV and does in fact transmit it, in line with the UNDP 2021 Guidance for Prosecutors on HIV-related Criminal Cases. Some countries do not have a law specifically criminalizing HIV nondisclosure, exposure or transmission but the general law has been used to prosecute cases in the past 10 years.

e Constitutional or legislative protections against discrimination refer to whether gender identity or sexual orientation is specified as a protected attribute or whether courts or government have legally recognized that gender identity/sexual orientation/involvement in sex work/involvement in drug use or possession are protected under another attribute.

This figure does not capture where key populations may be de facto criminalized through the misuse of other laws, such as vagrancy or public morality laws, or the use of the above laws for different populations, e.g. transgender people may be targeted using laws criminalizing same-sex sexual activity, or gay men and other men who have sex with men may be targeted using HIV criminalization laws.

Source:

- 1 National Commitments and Policy Instrument, 2024 (<http://lawsandpolicies.unaids.org/>).
- 2 National Commitments and Policy Instrument, 2022 (<http://lawsandpolicies.unaids.org/>).
- 3 National Commitments and Policy Instrument, 2021 (<http://lawsandpolicies.unaids.org/>).
- 4 National Commitments and Policy Instrument, 2019 (<http://lawsandpolicies.unaids.org/>).
- 5 National Commitments and Policy Instrument, 2018 (<http://lawsandpolicies.unaids.org/>).
- 6 National Commitments and Policy Instrument, 2017 (<http://lawsandpolicies.unaids.org/>).
- 7 Still not welcome: HIV-related travel restrictions. Geneva: UNAIDS and United Nations Development Programme; 2019 (https://www.unaids.org/sites/default/files/media_asset/hiv-related-travel-restrictions-explainer_en.pdf).
- 8 Chiam Z, Duffy S, González Gil M, Goodwin L, Mpemba Patel NT. Trans legal mapping report 2019: recognition before the law. Geneva: ILGA World; 2020.
- 9 Jordan. Penal Code, Article 307 (https://ahnc.org.jo/sites/default/files/penal_code.pdf).
- 10 Lebanon. Penal Code, Article 521 (https://sherloc.unodc.org/cld/uploads/res/document/lebanon-penal-code_html/Lebanon_Penal_Code_1943.pdf).
- 11 Algeria. Penal Code, Article 343 (<https://www.wipo.int/edocs/lexdocs/laws/fr/dz/dz020fr.pdf>).
- 12 Djibouti. Penal Code, 1995 (<https://www.ilo.org/dyn/natlex/docs/MONOGRAPH/111743/139414/F1148501931/DJI-111743.pdf>).
- 13 Iraq: gender justice and the law. New York: United Nations Development Programme; 2018 (https://arabstates.unfpa.org/sites/default/files/pub-pdf/Iraq%20Country%20Assessment%20-%20English_0.pdf).
- 14 Overview of trafficking and prostitution laws in the Middle East and Africa. London: Thomson Reuters Foundation; 2012 (<https://www.trust.org/publications/i/?id=1035fde5-b945-49ed-8cd4-166bc1ec156b>).
- 15 Lebanon. Penal Code, Article 523 (https://sherloc.unodc.org/cld/legislation/lbn/lebanon_penal_code/_/article_523-524/article_523-524.html?lng=en).
- 16 Somalia. Penal Code, Articles 405, 407 (<https://www.refworld.org/docid/4bc5906e2.html>).
- 17 United Arab Emirates. Penal Code, Articles 360, 363, 365, 366, 368 (<https://cdn.expatwoman.com/s3fs-public/UAE%20Penal%20Code.pdf>).
- 18 Yemen. Republican Decree for Law No. 12 for the Year 1994 Concerning Crimes and Penalties (<https://www.ilo.org/dyn/natlex/docs/ELECTRONIC/83557/92354/F1549605860/YEM83557.pdf>).
- 19 Mendos LR, Botha K, Carrano Lelis R, Lopez de la Peña E, Savelev I, Tan D. State-sponsored homophobia 2020: global legislation overview update. Geneva: ILGA; 2020. https://ilga.org/downloads/ILGA_World_State_Sponsored_Homophobia_report_global_legislation_overview_update_December_2020.pdf
- 20 Tunisia. Penal Code, Article 230 (<https://learningpartnership.org/sites/default/files/resources/pdfs/Tunisia-Penal-Code-2010-French.pdf>).
- 21 Algeria. Loi No. 04-18 du 13 Dhou El Kaada 1425 Correspondant au 25 Decembre 2004 Relative la Prevention et la Repression de l'Usage et du Trafic Illicites de Stupfiants et de Substances Psychotropes, Article 12 (https://sherloc.unodc.org/cld/uploads/res/document/dza/loi-04-18_html/algeria-loi04-18.pdf).
- 22 Bahrain. Law No. 15 of 2007 with Respect to Narcotic Drugs and Psychotropic Substances, Article 2 ([http://www.nhra.bh/files/files/NHRA%20Laws/PPR/Law%20No_%20\(15\)%20of%202007%20With%20Respect%20to%20Narcotic%20Drugs%20and%20Psychotropic%20Substances.pdf](http://www.nhra.bh/files/files/NHRA%20Laws/PPR/Law%20No_%20(15)%20of%202007%20With%20Respect%20to%20Narcotic%20Drugs%20and%20Psychotropic%20Substances.pdf)).
- 23 Djibouti. Penal Code, Articles 355–359 (<https://www.ilo.org/dyn/natlex/docs/MONOGRAPH/111743/139414/F1148501931/DJI-111743.pdf>).
- 24 Iraq. Law No. 11 of 1988, Law on Narcotic Drugs and Psychotropic Substances.
- 25 Penalties for drug law offences in Europe at a glance. Lisbon: European Union Drugs Agency (https://www.euda.europa.eu/publications/topic-overviews/content/drug-law-penalties-at-a-glance_en).
- 26 Lebanon. Lebanese Law on Drug Violations (<https://www.aub.edu.lb/faid/Documents/LEBANESE%20SANCTIONS%20ON%20DRUG%20LAW%20VIOLATION.pdf>).
- 27 Kingdom of Morocco country overview of the drug situation, 2016. Lisbon: European Union Drugs Agency (https://www.emcdda.europa.eu/publications/country-overviews/morocco/2016/html_en#:~:text=Drug%20use%20remains%20a%20criminal,up%20to%20EUR%2060%20000).
- 28 United Arab Emirates. Federal Law 14, 1995 (https://sherloc.unodc.org/cld/uploads/res/document/are/federal-law-no-14-of-1995_html/UAE-fedlaw_14-95.pdf).
- 29 Algeria. Penal Code, Article 275 (https://www.equalrightstrust.org/sites/default/files/ertdocs/code_penal.pdf).
- 30 HIV Justice Network. Amsterdam: HIV Justice Foundation; 2022 (<https://www.hivjustice.net>).
- 31 Djibouti. Loi No. 174/AN/07/5eme L portant mesures protectrices adaptees a la situation des personnes vivant avec le VIH/SIDA et des groupes vulnérables, Article 18 (https://natlex.ilo.org/dyn/natlex2/r/natlex/fe/details?p3_isn=76117).
- 32 Lebanon. Penal Code, Articles 604, 606 (<https://learningpartnership.org/sites/default/files/resources/pdfs/Lebanon%20Penal%20Code%201943%20Arabic.pdf>).
- 33 Somalia. Penal Code, Article 440 (<https://www.refworld.org/legal/legislation/natlegbod/1964/en/7233>).
- 34 Djibouti. Decree No. 2008-0182/PR/MS portant Institution des Normes et Directives en Matire de Conseil Dpistage Volontaire du VIH/SIDA en Rpublique de Djibouti, Article 19 (http://www.ilo.org/wcmsp5/groups/public/---ed_protect/---protrav/---ilo_aids/documents/legaldocument/wcms_126992.pdf).
- 35 National consolidated HIV testing services guidelines. Khartoum: Sudan Ministry of Health; 2016.
- 36 Kuwait. Penal Code, Article 198 (<https://perma.cc/CX2W-2KN7>).

REFERENCES

- 1 Korenromp EL, Sabin K, Stover J, Brown T, Johnson LF, Martin-Hughes R, et al. New HIV infections among key populations and their partners in 2010 and 2022, by world region: a multisources estimation. *J Acquir Immune Defic Syndr*. 2024;95(1S):e34–e45.
- 2 Arab human development report 2022: expanding opportunities for an inclusive and resilient recovery in the post-Covid era. New York: United Nations Development Programme Regional Bureau for Arab States; 2022 (<https://www.undp.org/arab-states/publications/arab-human-development-report-2022-expanding-opportunities-inclusive-and-resilient-recovery-post-covid-era>).
- 2 WHO Director-General's remarks at the International humanitarian conference for Sudan and its neighbours. Presented at the International Humanitarian Conference for Sudan and Neighbouring Countries, 15 April 2024, Paris, France (<https://www.who.int/news-room/speeches/item/who-director-general-s-remarks-at-the-international-humanitarian-conference-for-sudan-and-its-neighbours>).
- 3 Sudan's unsung heroes: protecting people living with and affected by HIV amidst conflict and famine. Geneva: Joint United Nations Programme on HIV/AIDS; 2024 (https://www.unaids.org/en/resources/presscentre/featurestories/2024/april/20240415_sudan).
- 4 Mumtaz GR, Chemaitelly H, AlMukdad S, Osman A, Fahme S, Rizk NA, et al. Status of the HIV epidemic in key populations in the Middle East and north Africa: knowns and unknowns. *Lancet HIV*. 2022;9(7):e506–e516.
- 5 Karbasi A, Fordjuoh J, Abbas M, Iløegbu C, Patena J, Adenikinju D, et al. An evolving HIV epidemic in the Middle East and North Africa (MENA) region: a scoping review. *Int J Environ Res Public Health*. 2023;20(5):3844.