

HIV prevention programming

As the global HIV epidemic has grown it has become more apparent that a combination of prevention initiatives is needed to halt its spread.

This means more than just single programmes like condom provisioning. Instead, a more holistic approach to HIV prevention programming is needed that targets multiple causes of HIV transmission.

Here, we discuss some the main HIV prevention initiatives including voluntary medical male circumcision, harm reduction, prevention of mother-to-child transmission and treatment as prevention.



HIV prevention programmes overview

A combination of HIV prevention initiatives that target key affected populations are required to stop the HIV epidemic.

Prevention of mother-to-child transmission (PMTCT) of HIV

Giving treatment to HIV-positive pregnant women and testing their baby at birth prevents the mother-to-child transmission of HIV.

Harm reduction for HIV prevention

Harm reduction initiatives such as opioid substitution therapy reduce the risk of HIV among people who inject drugs.



Needle and syringe programmes (NSPs) for HIV prevention

Voluntary medical male circumcision for HIV prevention

Treatment as prevention (TasP) for HIV

Needle and syringe programmes are delivered in a number of ways including fixed sites, vending machines and at pharmacies.

Male circumcision reduces female-to-male HIV transmission by 60% and is a key prevention programme in sub-Saharan Africa.

Ensuring all people living with HIV are on treatment also has a public health benefit as it reduces the risk of onwards transmission by 96%.



Pre-exposure prophylaxis (PrEP) for HIV prevention

Taken correctly, PrEP can reduce the risk of getting HIV to near-zero and is now regarded by UNAIDS as a key component of a Fast-Tracked response.

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