In 2021, WHO released Consolidated Guidelines on HIV prevention, testing, treatment, service delivery and monitoring. These guidelines brought together more than 200 recommendations across age groups and populations.

WHO has worked with countries and partners to ensure uptake and implementation of these recommendations in support of achieving the goals that are outlined in the global health sector strategies on HIV, viral hepatitis and sexually transmitted infections. The strategies aim to end AIDS and the epidemics of hepatitis B and syphilis by 2030. The goals are aligned with the goals of the 2030 Agenda for Sustainable Development and WHO’s General Programme of Work.

To better provide country support, WHO regularly tracks the dissemination, policy change and implementation of these recommendations through the Global AIDS Monitoring (GAM) Reporting Tool (WHO/UNAIDS/UNICEF), as well as routine communication with WHO country and regional offices.

This fact sheet provides a summary of the adoption of these recommendations by July 2022:

- WHO recommends use of dual HIV/syphilis RDT for pregnant women in antenatal care and for key populations, with 70 countries adopting dual HIV/syphilis rapid diagnostic tests (RDT) in national policies. Almost half of the countries reporting dual HIV/syphilis RDT policies (49%, 34/70) adopted them for both pregnant women and key populations; with the remainder for pregnant women only (41%, 29/70) or for key populations only (10%, 7/70).

- The number of countries adopting dolutegravir (DTG) as part of the preferred first-line antiretroviral therapy has steadily increased over the years, with 108 countries (88% of 123 reporting countries) adopting DTG as part of the preferred first-line antiretroviral therapy for adults and adolescents as of July 2022, an 80% increase from 60 countries in 2020 when this indicator was first introduced. However, it is important to close the remaining gap, as 5% of reporting countries (6/123) have adopted DTG only as an alternative first-line therapy, and a further 7% (9/123) have yet to adopt DTG.

- DTG has been adopted as the preferred treatment initiation option for infants and children in 55% (60/110) of reporting countries; of these, 45% have adopted this only for children weighing more than 20kg (27/60) while the rest recommend DTG as the preferred treatment initiation for all children older than 4 weeks and weighing more than 3kg (33/60). This represents a 71% increase from 2020, when adoption of DTG as the preferred treatment initiation option was reported by 35 countries.

- Routine viral load monitoring for adults and adolescents has been implemented countrywide in 74% (91/123) of reporting low- and middle-income countries; of the remainder almost half (47%, 15/32) reported implementation in many (50–95%) treatment sites.

- The uptake of WHO’s recommendations on service delivery into national guidelines have also shown significant increase. WHO’s recommendation to offer starting ART on the same day of an HIV diagnosis has been adopted by 97 countries (83% out of 127 reporting countries), an increase of 43% from 68 countries in 2020. Countrywide implementation has been reported in two-thirds of the countries that adopted this policy (61/97).

- WHO’s recommended package of care for advanced HIV disease has been adopted by most of the reporting countries, that have either reported full adoption (73%, 86/118) or partial adoption (17%, 20/118). Full adoption of the recommendation has increased by 37% from 2020, when it was reported by 63 countries. Countrywide implementation has been reported by 61% of the countries that adopted this policy (72/118).

- WHO’s recommendation to reduce the frequency of ART pick-up for people who are established on treatment has been adopted by three quarters of the reporting countries (76%, 111/146); with a three monthly interval being the most frequent (63%, 92/146). However, 11% of the reporting countries (16/146) still have no national policy on the frequency of ART pick-up.

- WHO provides guidance to achieve elimination of vertical transmission of HIV, hepatitis B, and syphilis, tracks country status and provides technical support. Of all reporting countries, 71% have national plans for elimination of vertical transmission of both HIV and syphilis (84/119), the majority of which are integrated, while a further 20% have a plan for the elimination of vertical transmission of either HIV (12 countries) or syphilis (12 countries).
National policy on HIV self-testing and implementation status, July 2022

Adoption of national policy on dual HIV/syphilis rapid diagnostic tests, July 2022
Adoption of TDF+3TC (or FTC) as the preferred first-line antiretroviral combination for treatment initiation in national guidelines for adults and adolescents, July 2022

Adoption of DTG regimens as the preferred treatment option in national guidelines for all infants and children living with HIV, July 2022
National policy on routine viral load testing for monitoring ART and implementation status among adults and adolescents living with HIV in low- and middle-income countries, July 2022

Adoption of national policy to offer starting antiretroviral therapy on the same day as an HIV diagnosis, July 2022
Adoption of WHO 2017 recommendation to offer a package of interventions to all patients presenting with advanced HIV disease, July 2022

National policy on the frequency of ART pick-up for adults who are established on ART, July 2022
National plan for the elimination of vertical transmission of HIV and syphilis, July 2022

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