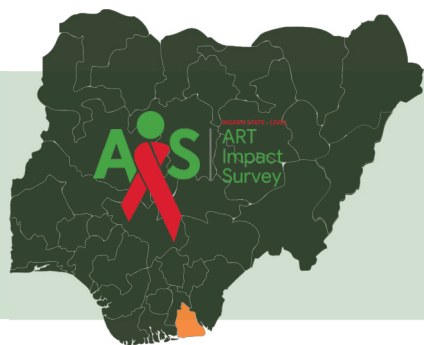




NIGERIA STATE-LEVEL ART IMPACT SURVEY (AIS): A POPULATION-BASED HIV IMPACT ASSESSMENT IN AKWA IBOM STATE SUMMARY SHEET

JULY 2026

The Nigeria State-Level Antiretroviral Therapy (ART) Impact Survey in Akwa Ibom State (AISAKS 2024) was a household-based survey conducted from August to October 2024 to assess the impact of the Akwa Ibom State HIV response. It sampled adults aged 15–64 years, provided HIV counseling and testing with results returned, and collected information on the uptake of HIV prevention, care, and treatment services.

The AISAKS 2024 had a design similar to the Nigeria HIV/AIDS Indicator and Impact Survey in 2018. The primary objective of AISAKS 2024 was to estimate ART coverage among people living with HIV in Akwa Ibom State. It also estimated state-level HIV prevalence among adults, as well as the prevalence of viral load suppression (VLS), defined as HIV RNA less than 1,000 copies per mL among adults living with HIV. The survey further provided critical information on progress towards HIV epidemic control in Akwa Ibom State, including progress towards the global 95-95-95 targets.

The survey was led by the Federal Ministry of Health and Social Welfare, through the National AIDS, Viral Hepatitis and STIs Control Programme, in collaboration with the National Agency for the Control of AIDS, Nigeria Centre for Disease Control and Prevention, and the Akwa Ibom State Ministry of Health.

The AISAKS 2024 was conducted with funding from the U.S President's Emergency Plan for AIDS Relief through the U.S Centers for Disease Control and Prevention, with Public Health Information Surveillance Solutions and Systems providing technical assistance to the government.

KEY FINDINGS

HIV Indicator	Women		Men		Total	
	%	95% CI	%	95% CI	%	95% CI
HIV Prevalence						
15-49 years	6.2	4.7-7.8	1.8	1.2-2.5	4.0	3.2-4.9
15-64 years	6.3	5.0-7.7	2.2	1.7-2.9	4.3	3.6-5.1
Viral Load Suppression*						
15-49 years	44.6	36.7-52.7	(15.3)	(4.7-33.4)	37.9	31.6-44.6
15-64 years	46.7	39.9-53.6	21.4	10.8-35.7	40.1	34.2-46.3

*Viral Load Suppression is defined as HIV RNA <1,000 copies per milliliter among adults living with HIV.

() Estimates based on a denominator between 25 and 49 are indicated by parentheses and should be interpreted with caution.

- The prevalence of HIV among adults aged 15-64 years was 4.3%: 6.3% among women and 2.2% among men.
- Prevalence of VLS among adults living with HIV aged 15-64 years was 40.1%: 46.7% among women and 21.4% among men.



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PROGRESS TOWARD 95-95-95 TARGETS AMONG PLHIV TO END THE HIV EPIDEMIC

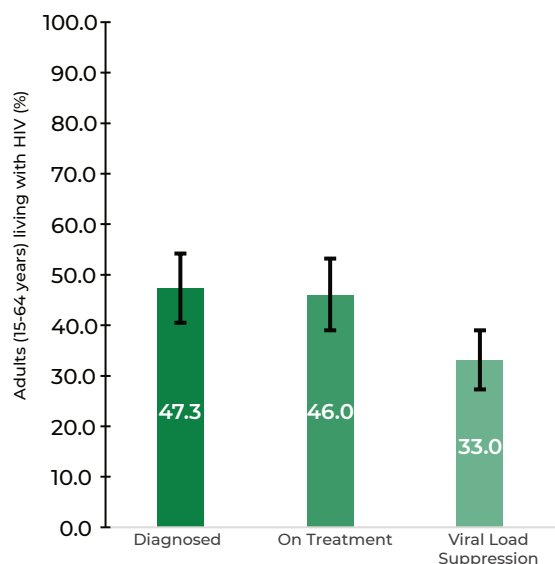
Unconditional 95-95-95 Cascade:

Global 95-95-95 targets mean that 95% of all people living with HIV know their HIV status; 95% of all people living with HIV are on treatment; and 95% of all people living with HIV have a suppressed viral load.

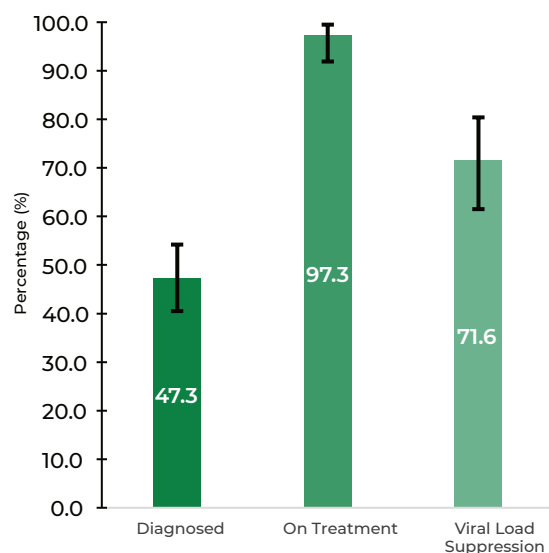
Conditional 95-95-95 Cascade:

Global 95-95-95 targets mean that 95% of all people living with HIV will know their HIV status; 95% of all people living with HIV who know their HIV status are on treatment; and 95% of all people living with HIV on treatment have a suppressed viral load.

UNCONDITIONAL 95-95-95 CASCADE



CONDITIONAL 95-95-95 CASCADE



Awareness: Individuals were classified as aware if they reported their HIV-positive status or had a detectable antiretroviral (ARV) medication in their blood.

Treatment: Individuals were classified as being on ART if they reported current ART use or had a detectable ARV in their blood.

The 95-95-95 cascades were derived using self-reported data adjusted for presence of ARV medications.

RESPONSE RATE AND HIV TESTING METHODS

- Of the 2,910 eligible households, 97.0% completed a household interview. Among 5,705 eligible adults (3,205 women and 2,500 men), a total of 5,094 (2,902 women and 2,192 men) consented to participate and were interviewed and tested for HIV. The overall response rate was 86.6% (87.8% for women and 85.1% for men).
- HIV testing was conducted in each household using a serological rapid diagnostic testing algorithm based on Nigeria's national guidelines, with laboratory confirmation of seropositive samples using a supplemental assay. For confirmed HIV-positive samples, laboratory-based testing was conducted for quantitative evaluation of viral load and detection of antiretroviral medications (dolutegravir, atazanavir) and metabolite (tenofovir diphosphate). Survey weights were utilized for all estimates.

CONCLUSIONS

- The AISAKS 2024 showed approximately three times higher HIV prevalence among women and lower viral load suppression among men, suggesting elevated risks for HIV transmission.
- More than half of adults living with HIV in Akwa Ibom State did not know their status, indicating that 50% of people infected with HIV do not know their status. Therefore, case finding strategies to close this gap among populations less likely to know their HIV status are urgently needed in Akwa Ibom State to reach the first 95 target.
- More than 95% of adults living with HIV in Akwa Ibom State who were aware of their HIV positive status were on treatment, demonstrating high uptake of HIV treatment among those identified HIV positive.
- Less than 75% of those on treatment were virally suppressed. HIV case-based surveillance strengthening could help to identify and address barriers to adherence and viral load suppression among those on treatment.