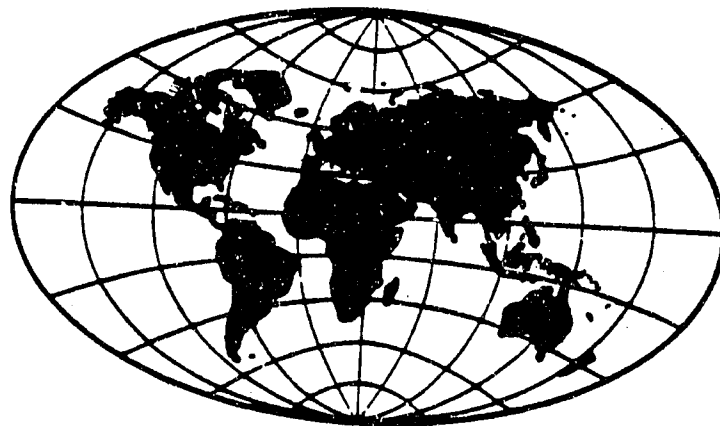


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**RECENT HIV SEROPREVALENCE LEVELS  
BY COUNTRY: DECEMBER 1994**



**Health Studies Branch  
International Programs Center  
Population Division  
U.S. Bureau of the Census**

**Research Note  
No. 15  
December 1994**

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## **Preface**

The International Programs Center of the Population Division conducts specialized studies of population, economics, labor force, health and aging issues. However, the use of data not generated by the Bureau of the Census precludes performing the same statistical reviews normally conducted on its own data.

This research note is the fifteenth of a series of short research documents resulting from analysis conducted in the Health Studies Branch. Distribution in the research note format is intended to allow for rapid dissemination of results to a specialized audience, highlighting recent developments or emerging trends. Reports containing a more thorough presentation and discussion of research findings will continue to be issued in the International Programs Center Staff Paper series.

The preparation of this report was supported by funding from the U.S. Agency for International Development.

This note was prepared by the staff of the Health Studies Branch--Jinkie Corbin, Anne Ryan, Peggy Seybolt and David Rudolph. Overview of HIV/AIDS in Asia was prepared by Jinkie Corbin and Anne Ryan. Comments and questions regarding this study should be addressed to Karen Stanecki De Lay or Peter Way, International Programs Center, Population Division, Bureau of the Census, Washington, D.C. 20233-8860; telephone (301) 457-1406.

# RECENT HIV SEROPREVALENCE LEVELS BY COUNTRY: June 1994

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# Recent HIV Seroprevalence Levels by Country: December 1994

## Introduction

Since 1987, the International Programs Center, Population Division, Bureau of the Census, has been compiling HIV seroprevalence information for its *HIV/AIDS Surveillance Data Base*. This work has been supported by funding from the Agency for International Development.

The present semiannual update to the data base incorporates all available epidemiological information for developing countries presented at the Tenth International Conference on AIDS - International Conference on STD, Yokohama, Japan, August 1994. We also are regularly reviewing the scientific literature for relevant information. Currently, the *HIV/AIDS Surveillance Data Base* contains about 23,000 individual data records drawn from 3,037 publications and presentations. It is our goal to incorporate all available data from seroprevalence studies conducted in developing countries.

Several items drawn from the data base are included in this report. These include summary tables showing available seroprevalence estimates for high- and low-risk population groups in major cities and rural areas for all developing countries. Tables are provided for HIV-1 and HIV-2, where available. Urban data for Africa have been plotted on maps as well, showing the distribution by country. A section reviewing the spread of HIV in Asia is also included. A brief review of data quality issues and discussion of selection criteria follows. We recognize the somewhat arbitrary nature of this selection and welcome comments.

## Data Quality and Qualifications

With rare exception, surveys of HIV seroprevalence are not based on national samples. Therefore, every seroprevalence estimate has a bias if generalized beyond its sample population. The amount of bias is determined by how different the sampled population group or geographic area is from the generalized description placed on the estimate. For instance, an estimate of the HIV seroprevalence of pregnant women in Kinshasa, Zaire, may be generalized to "urban, low-risk group." Yet, Kinshasa is not representative of all urban areas in Zaire, and pregnant women are not representative of all low-risk adults (since by definition they may be more sexually active than many low-risk groups, such as the aged).

Several factors contribute to biases or confusion surrounding HIV seroprevalence estimates:

- Sample-Size Bias: The sample sizes of seroprevalence studies are generally very small. Small samples of non-random populations may tend to overestimate the seroprevalence.
- Nonrepresentative Samples: Many surveys are taken of populations convenient for the medical team drawing blood for testing. Therefore, many are "samples of convenience," taken in clinics or hospitals where the available sample of people may be sicker than those who do not attend the clinic.
- Geographic Bias: As in the case of samples of convenience, samples may also be taken in more-accessible rather than less-accessible geographic areas. Given what is known regarding the spread of HIV infection, we would expect that this would tend to bias upward the estimate of HIV seroprevalence, if the available sources are taken to represent the country as a whole. Note, however, that this particular factor may not bias estimates of seroprevalence in the geographic areas that were, in fact, surveyed.
- Testing Bias: In the first several years of the AIDS epidemic, the ELISA test was the predominant test used to determine seropositivity. The ELISA test, however, gives a number of false positives and, therefore, the test results must be confirmed by a second test; in general, the Western Blot. Not all studies report confirmatory testing, although they increasingly do so.
- HIV-1 and HIV-2 Overlap: In countries where both HIV-1 and HIV-2 are present tests are done for both viruses and often find people who test positive for both. To report the people who are only infected with HIV-1 will understate the total infected population because it does not take into account the joint infections. Thus, care must be used in discussions of data from these areas to avoid either double counting or omitting various categories of infected population.

In order to minimize the biases and confusion in using current seroprevalence estimates, we have developed several criteria to select the most representative sample estimate:

- larger samples are generally favored over smaller samples;
- more recent estimates are selected over older estimates; and
- better-documented data are usually selected over poorly-documented data; data without documentation are not used.

These criteria only attempt to minimize the biases in the data, not eliminate them. Therefore, all seroprevalence data must be used with caution.

### **Data Organization**

The data presented in the following seroprevalence tables are taken from the *HIV/AIDS Surveillance Data Base*. The specific rates presented are taken from the most recent studies with a sufficiently large sample size. Where recent data are not available and where sample sizes are small, footnotes qualify the data. In some cases, results from large samples were not included due to insufficient documentation about the sample design, tests or place. The data are imperfect and caution should be used in drawing conclusions. Although they are listed by country name, they are not national level estimates. We can only draw conclusions for the area where these studies were conducted.

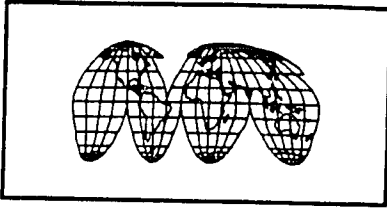
The tables that follow are based on data selected as the best available data on HIV-1 and HIV-2 seroprevalence among high- and low-risk populations in developing countries (see Tables 1 and 2). The terms "high risk" and "low risk" are used in these tables and charts to differentiate population subgroups with known risk factors for HIV infection from those without such known risks. As a result of the various transmission modes and the prevalence of the virus in Africa, no group can be considered to have no risk of infection. Sampled populations treated as high risk in this report include prostitutes, bar girls, etc.; clients of prostitutes; and sexually-transmitted disease clinic patients. Sampled populations considered to be low risk include the general population with no known risk, pregnant women, and blood donors.

Data were selected using criteria of sample size, recency of data, presence of two diagnostic tests, and minimal evident bias in sample selection, given the target population. Since each figure is based on a single study, it is not an average or composite figure. As yet, there are insufficient comparable studies to make estimates of an "average" seroprevalence meaningful. Detailed sample information for these studies is contained in Table 3. Sources for the data shown in the tables are contained in a unified reference listing.

The tables are also divided by Capital/Major City and Outside Major City. In many studies it is difficult to determine whether or not the universe is a strictly rural area. The geographical boundaries may include some urbanized centers. Is a sample drawn from three villages necessarily a study of the rural population? When the study area is described as a province in the country it is listed in the table as outside the capital/major city. It is usually fairly clear when a study is conducted in the capital or a major city.

We will periodically update these materials with the latest and best available data, at times including a brief discussion of a topic of particular interest.

We welcome comments and suggestions from users of the data base. We also welcome copies of articles or references to information which may have been overlooked.



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## International Programs Center Population Division

United States Bureau  
of the Census

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### Overview of HIV/AIDS in Asia

#### Introduction

This report provides an overview of the epidemiological patterns and trends of the Human Immunodeficiency Virus (HIV) and Acquired Immune Deficiency Syndrome (AIDS) in Asia. Due to lack of data, it is difficult to accurately show the extent of HIV infection for all Asian countries. Therefore, the focus of this paper is limited to countries in Southeast Asia, South Asia, and East Asia. The countries within each region are as follows:

Southeast Asia: Brunei, Burma, Cambodia, Indonesia, Laos, Malaysia, Philippines, Singapore, Thailand, and Vietnam

South Asia: Bangladesh, Bhutan, India, Maldives, Nepal, and Sri Lanka

East Asia: China (Mainland and Taiwan), Hong Kong, Macau, Mongolia, South Korea

This paper presents data based on the December 1994 release of the HIV/AIDS Surveillance Database maintained by the International Programs Center, Population Division, U.S. Bureau of the Census. The database contains about 23,000 data items drawn from 3,037 publications and presentations.

Based on a review of available data, we will examine the current status of the HIV epidemic by presenting selected and illustrative HIV prevalence data among various population groups within each Asian region. Furthermore, we will look at trends and patterns and geographic variation of the HIV virus.

In this paper we use the terms "high risk" and "low risk" to describe various sampled populations. The high-risk category refers to studies of intravenous drug users (IVDU), commercial sex workers (CSWs) and sexually transmitted disease (STD) patients. The low-risk category refers to studies of pregnant women, blood donors and general populations.

Additional and more detailed information may be available at the country level.

#### Background

As the AIDS epidemic starts to unfold in Asia, the home of half the world's population, HIV infection rates in certain population groups have already become among the highest in the world. The recent explosion of the AIDS epidemic in South and Southeast Asia shows that no society can consider itself immune to AIDS.



Current reports from the World Health Organization Global Programme on AIDS estimate 2.5 million people to be suffering from AIDS in Asia. As the epidemic takes hold in South and Southeast Asia, there has been an 8-fold increase in the number of AIDS cases in the past year from 30,000 to about 250,000. The percent of AIDS cases estimated in Asia has risen from 1 percent in mid-1993 to 6 percent in mid-1994 of the global total<sup>1,2,3</sup> primarily due to the rapid growth of AIDS in South/Southeast Asia.

By the turn of the century, experts estimate that the majority of new HIV infections in the world will occur in Asia<sup>4</sup> and that the epidemic in Asia will eventually surpass the one that has been ravaging Sub-Saharan Africa<sup>5</sup>. Furthermore, India will probably have the largest number of infected persons of any single country in Asia. With the population of India reaching 1 billion within 5 years, the HIV epidemic has the potential to have a dramatic impact on this country.

In addition to India, major HIV epidemics already exist in Thailand and Burma (Myanmar). HIV infection in these countries has already progressed beyond the groups whose behavior puts them at highest risk and has spread to the general population. Also, the epidemic has begun to emerge in Indonesia, China, Taiwan, Singapore and the Philippines. However, within each country the extent of the epidemic varies.

As the epidemic emerges in Asia in the 1990's, the experience and lessons learned in Africa should be utilized to develop strategies for control and prevention of AIDS.

## Epidemiological Aspects

Epidemiological studies throughout the world have been conducted to assay the prevalence of HIV. Although the extensive spread of HIV in Asia has been predominantly in South and Southeast Asia, this spread began only in the mid 1980's or even later and the progression has been rapid.

The pattern of HIV spread in Asia appears to be different from those seen in the U.S., Europe, and Africa. HIV was introduced much later in Asia than the rest of the world and began among IVDU. From IVDU, the epidemic spread to CSWs. As has been described by researchers in Thailand, the next wave is among the clients of CSWs and seen among men attending STD clinics. The HIV epidemic then spreads to their girlfriends and wives.

The following discussion will describe HIV seroprevalence levels among these various groups.

### 1. IV Drug Users

The largest increases in HIV infection have been among IVDU in at least four countries, Thailand, Malaysia, Burma and India. In addition, China's Yunnan Province, which is a part of the "Golden Triangle," has reported high prevalence rates among IVDU.

In Thailand, HIV prevalence among IVDU has rapidly increased within a few years. Figure 1 displays seroprevalence rates reported for Bangkok from 1988 to 1991. The HIV seroprevalence level increased dramatically during 1988, jumping from a level of 1.2 percent in January to 31.2 percent in September. From there, the rate

HIV Seroprevalence for IVDU Bangkok, Thailand: 1988-1991

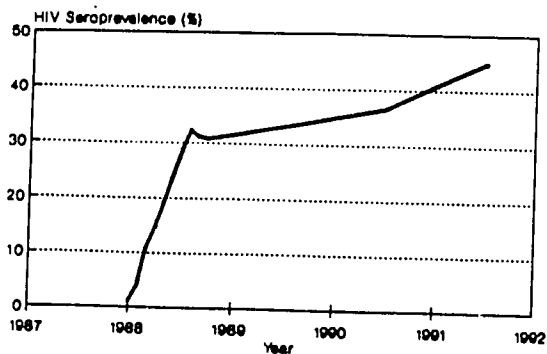


Figure 1

steadily increased to 45.0 percent in June 1991. Sentinel surveillance data for June 1994 from the Thailand Ministry of Health reported over 30 percent of the IVDU in all four regions of Thailand were infected with HIV.

HIV Seroprevalence for IVDU Malaysia and Burma 1988-1991

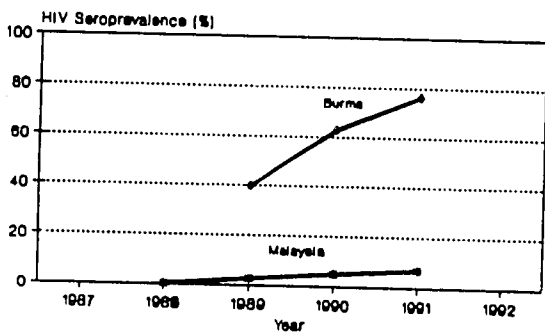


Figure 2

Recent data from the neighboring countries of Malaysia and Burma also show increases in HIV levels (Figure 2). In Burma, studies reported HIV prevalence rates increasing

from 39.9 percent to 76.5 percent. In Malaysia, HIV prevalence levels among IVDU are not as high as in Thailand and Burma but show a steady increase from 0.1 percent in 1988 to 6.9 percent in 1991. However, a study conducted in Kota Bharu, capital of Kelantan state, a northeastern Malaysian state bordering Thailand, reported HIV levels to be nearly 30 percent among IVDU.

In India, studies of HIV infection among IVDU in various areas reported levels up to 80 percent. (Figure 3). Data from the northeastern state of Manipur indicate an HIV infection level of 55 percent for the first quarter of 1994. In addition, a 1991 National survey of 3,521 IVDU reported a seroprevalence level of 38.4 percent.

HIV Seroprevalence for IV Drug Users Selected Areas in India: 1985-1994

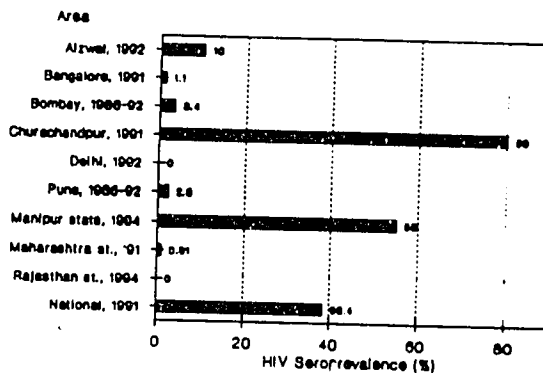


Figure 3

Most of the HIV seroprevalence in China has been detected in Yunnan Province, a southwestern province on the Burma and Laos border and near Thailand. In this province, a study conducted in Ruili county and two neighboring counties, Luxi and Longchuan, revealed prevalence levels of 81.8 percent, 5.1 percent and 44.6 percent, respectively (Figure 4). These three

counties are located just across the border from Burma. Another study in Yingjiang county found an HIV prevalence level of 17.4 percent among IVDU.

**HIV Seroprevalence for IVDU in Four Counties, Yunnan Province  
China, Mainland: 1992**

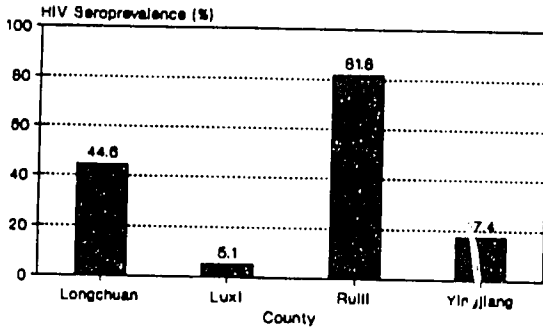


Figure 4

**HIV Seroprevalence for IV Drug Users  
Asia: Circa 1993**

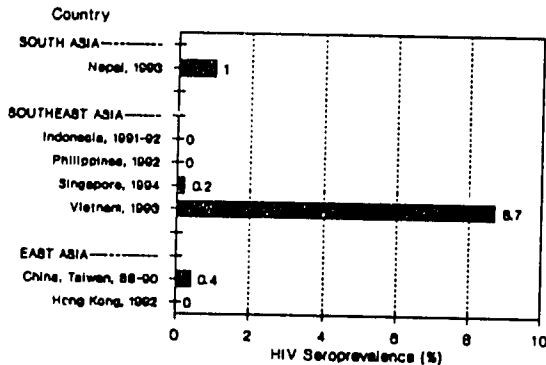


Figure 5

Since 1988, HIV seroprevalence studies among IVDU have been conducted in a few other Asian countries (Figure 5). In South Asia, a 1992 study in Nepal reported a 1.6 percent prevalence rate. In East Asia, a

study reported a prevalence level of 0.4 percent in Taiwan for 1988-1990. In Southeast Asia, Vietnam reported a prevalence level of 8.7 percent for 1993. There was no evidence of HIV among IVDU reported from studies conducted in Indonesia, Philippines and Singapore.

## 2. Commercial Sex Workers

HIV infection has been reported among commercial sex workers in Southeast Asia and South Asia, especially in Thailand and India. A few studies from selected East Asian countries report no HIV infection found as yet among commercial sex workers.

**HIV Seroprevalence for  
Commercial Sex Workers  
Thailand: 1990-1994**

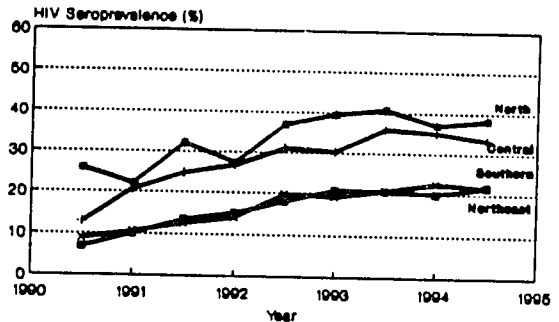


Figure 6

In Southeast Asia, all four regions of Thailand reported levels of HIV infection over 20 percent among commercial sex workers. The North region of Thailand has consistently had the highest level of infection among the regions (Figure 6). In Burma, HIV infection levels have gone from no evidence of the virus in 1989 to 11 percent in early 1991. In April/May 1992



levels are highest in Bombay at 45 percent in 1993. Studies in Calcutta indicate a steady seroprevalence level around 1 percent. In Figure 11, data from sentinel surveillance in Yunnan Province, China, show seroprevalence levels among CSWs still under 1 percent.

**HIV Seroprevalence for Commercial Sex Workers in Yunnan Province China: 1989-1993**

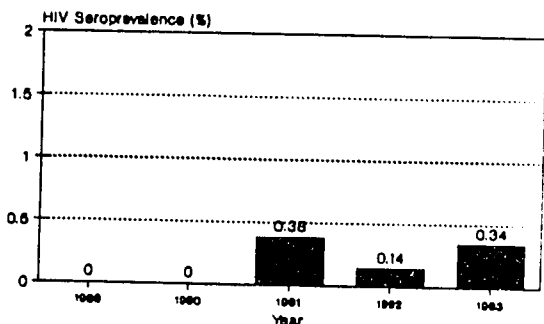


Figure 11

### 3. STD Patients

Various studies clearly document the spread of HIV among sexually transmitted disease (STD) patients. All of the areas for which data are available show that HIV is present among this population group. Once again, the highest levels are found in South and Southeast Asia, mainly India and Thailand.

From Thailand's sentinel surveillance system, HIV prevalence among male STD patients steadily increased from June 1990 to June 1994 (Figure 12). The North region has consistently reported the highest prevalence level. HIV seroprevalence among STD patients continues to grow in the other regions of Thailand.

**HIV Seroprevalence for Male STD Clinic Patients Thailand: 1990-1994**

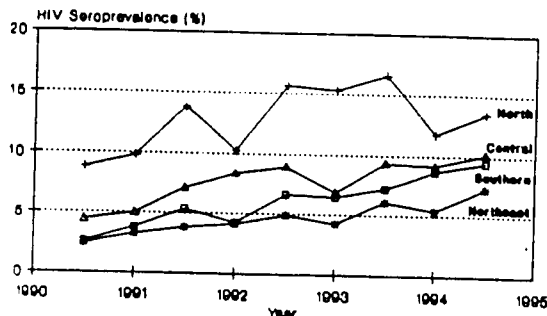


Figure 12

**HIV Seroprevalence for STD Clinic Patients in Burma: 1989-1992**

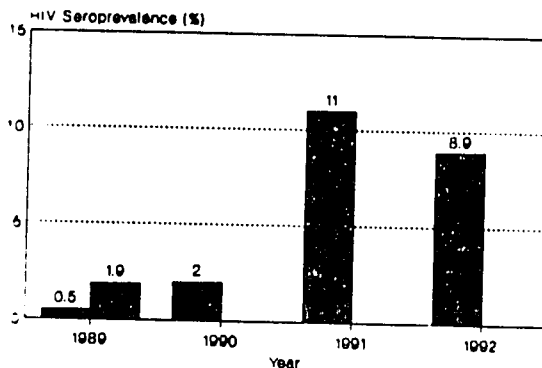


Figure 13

HIV seroprevalence levels within Burma have also increased among STD clinic patients since 1989 (Figure 13). By early 1991, HIV seroprevalence had reached 11 percent. The 1992 sentinel data show HIV seroprevalence at 8.9 percent.

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**HIV Seroprevalence for STD Clinic Patients in Three Cities in India: 1985-1994**

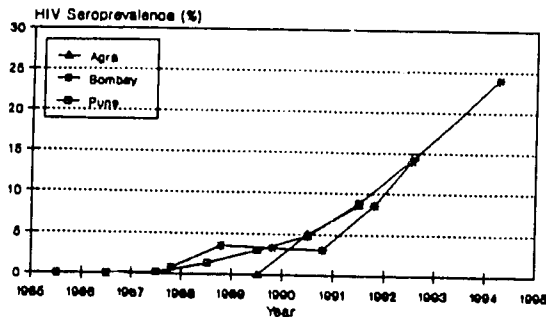


Figure 14

**HIV Seroprevalence for STD Patients India: 1991-1994**

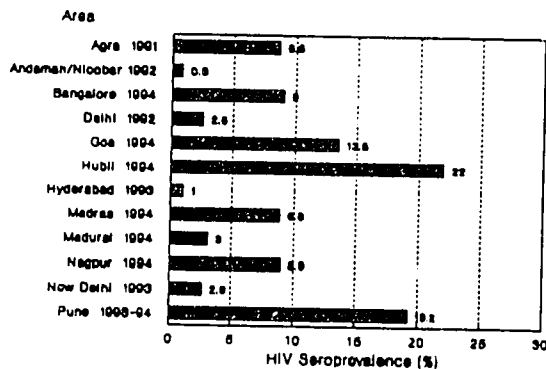


Figure 15

Studies conducted in Agra, Bombay and Pune show HIV infection levels among Indian STD patients increased rapidly over the past few years (Figure 14). Studies in other cities in India (Figure 15) report HIV prevalence levels from 1 to 22 percent from 1991 to 1994.

Meanwhile, various studies among STD clinic patients in other parts of Asia found

HIV prevalence levels ranging from no evidence of the virus in the Philippines and Mongolia to 4.2 percent among STD clinic patients in Cambodia (Figure 16).

**HIV Seroprevalence for STD Clinic Patients in Asia: 1986-1994**

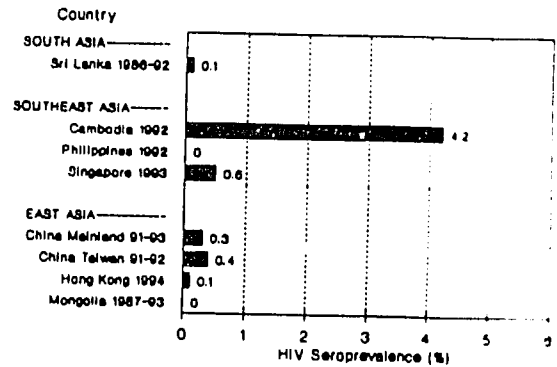


Figure 16

#### 4. Pregnant Women

Seroprevalence studies among pregnant women have shown low levels of HIV infection, but these data may indicate the beginning of a substantial epidemic in the general population.

In Thailand, sentinel surveillance among pregnant women in urban areas provides firm evidence that HIV is spreading to the general population. HIV seroprevalence increased in all four regions from June 1989 to June 1994 among pregnant women (Figure 17). HIV levels in the Northern region have risen to about 4 percent of urban pregnant women.

HIV infection was detected in Burma among pregnant women in early 1991 at 0.1 percent (Figure 18). By 1992, HIV levels had increased to 2.2 percent.



**HIV Seroprevalence for Pregnant Women, by Region, Urban Areas, Thailand: 1990-1994**

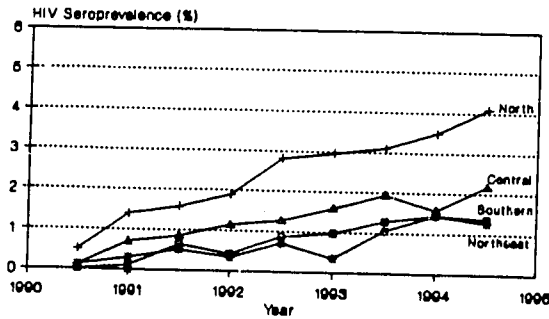


Figure 17

**HIV Seroprevalence for Pregnant Women India: 1990-1994**

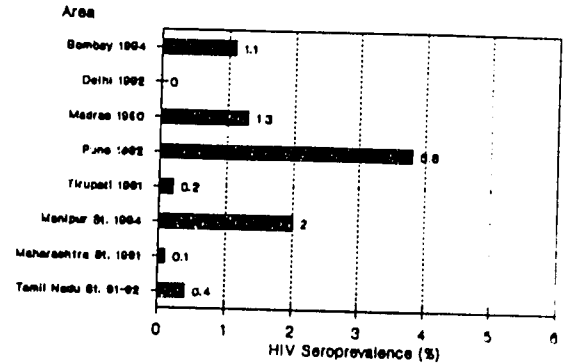


Figure 19

**HIV Seroprevalence for Pregnant Women Burma: 1989-1992**

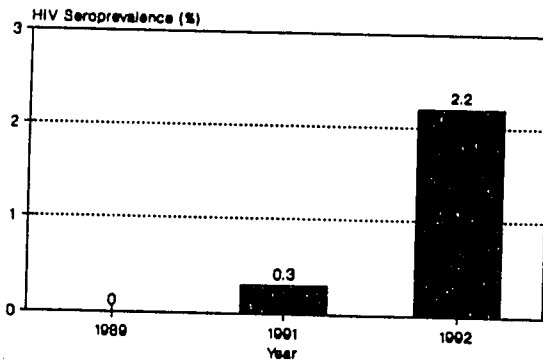


Figure 18

HIV infection has also been found among pregnant women in India. Studies from different areas in India indicate HIV levels of infection among pregnant women varying from 0 percent to 3.8 percent (Figure 19).

Other studies in Asia from Nepal, Indonesia, Cambodia, Mongolia, China, and Macau have shown no evidence of the HIV virus among pregnant women as yet.

**5. Blood donors**

Various studies clearly document the spread of HIV among blood donors in Southeast and South Asia. However, countries in East Asia where data are available indicate very little evidence of the HIV virus among blood donors.

**HIV Seroprevalence for Blood Donors Southeast Asia: 1989-1994**

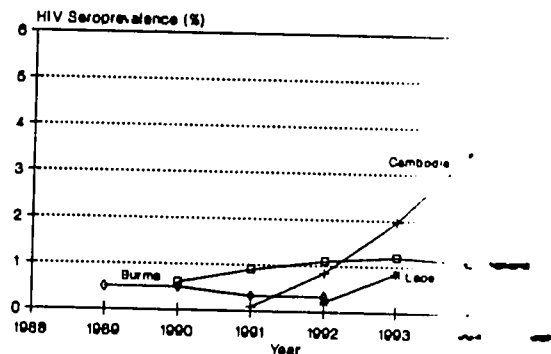


Figure 20

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In Southeast Asia, HIV infection has been detected among blood donors (Figure 20). HIV seroprevalence data from the Cambodia National Center for Blood Transfusion show a dramatic increase from 0.08 percent in 1991 to 3.49 percent in 1993 among blood donors. Data from the Thailand Ministry of Health National Sentinel Surveillance indicate a relatively low but steady infection level. HIV seroprevalence levels in Burma have remained the same, below 1 percent. From 1992 to 1993, studies in Laos reported a fourfold increase among blood donors, though the infection level still had not exceeded 1 percent. These variations may reflect differences in blood screening programs.

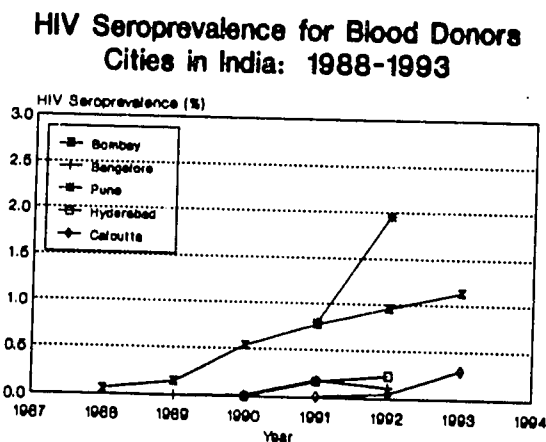


Figure 21

Figure 21 shows HIV seroprevalence data for voluntary blood donors in India. These five cities show a variation of different patterns over a period of time. The HIV prevalence level among blood donors in Pune more than doubled in just one year. Bombay displays a steady increase in HIV seroprevalence levels from 1988 to 1993. Calcutta, Hyderabad and Bangalore all report positive HIV seroprevalence levels.

## Geographic Description

Data are not currently available to provide a detailed geographic picture of HIV for all countries in Asia. However, for Thailand, India and China sufficient data are available to look at the geographic variation in current levels of HIV infection.

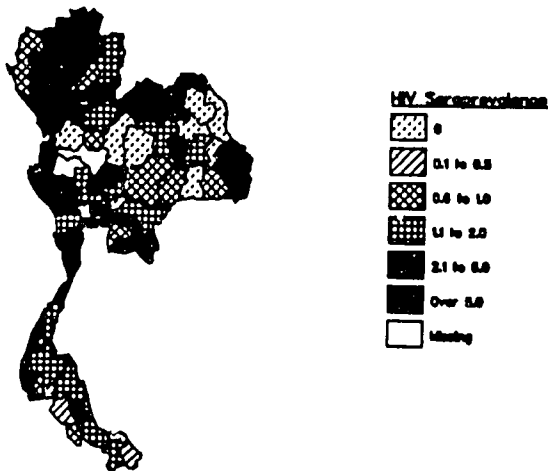
The Thailand Ministry of Health National Sentinel Surveillance data for June 1994 indicate HIV infection among pregnant women is highest in the north region where several provinces have prevalence levels over 5 percent. Phayao Province, located in the north region, reported a prevalence rate of 10.6 percent among pregnant women, the highest prevalence rate among all of the provinces for which data were available.

Among pregnant women, the HIV virus is present throughout Thailand (Map 1). This provides evidence that the HIV virus has penetrated to the general population of Thailand. Most striking is that only four years ago there were no provinces with HIV levels over 5 percent and only 13 provinces reporting any HIV infection at all.

"Direct" commercial sex workers are those working in brothels; they represent high-risk populations. Map 2 shows most of the provinces reported HIV levels over 15 percent among this group. All but one of the provinces located in the north region had HIV prevalence levels of 15 percent and above. Lamphun Province, located in the north region, reported the highest percent infected, 62.7 percent. In every region at least one province reported a prevalence rate over 25 percent among direct commercial sex workers.

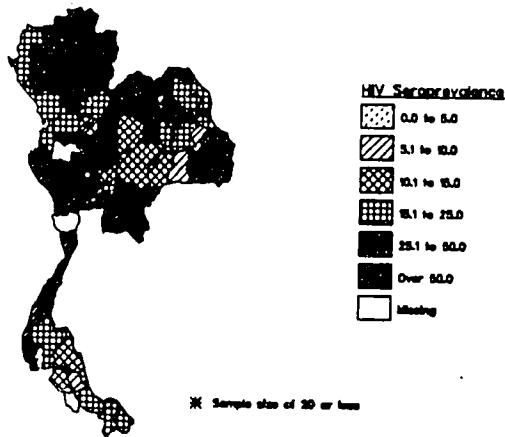


HIV Seroprevalence among Pregnant Women, Thailand: June 1994



Map 1

HIV Seroprevalence among Direct Commercial Sex Workers, Thailand: June 1994



Map 2

High levels of HIV seroprevalence among CSWs are found in Maharashtra state, Rajasthan state and Tamil Nadu state, India (Map 3). HIV infection among CSWs in India is concentrated in the western and

southern states. There were no data available for most of the eastern states. Those areas where data for CSWs are not available as yet face the imminent threat of HIV spreading due to population mobility and migration of infected populations into these areas.

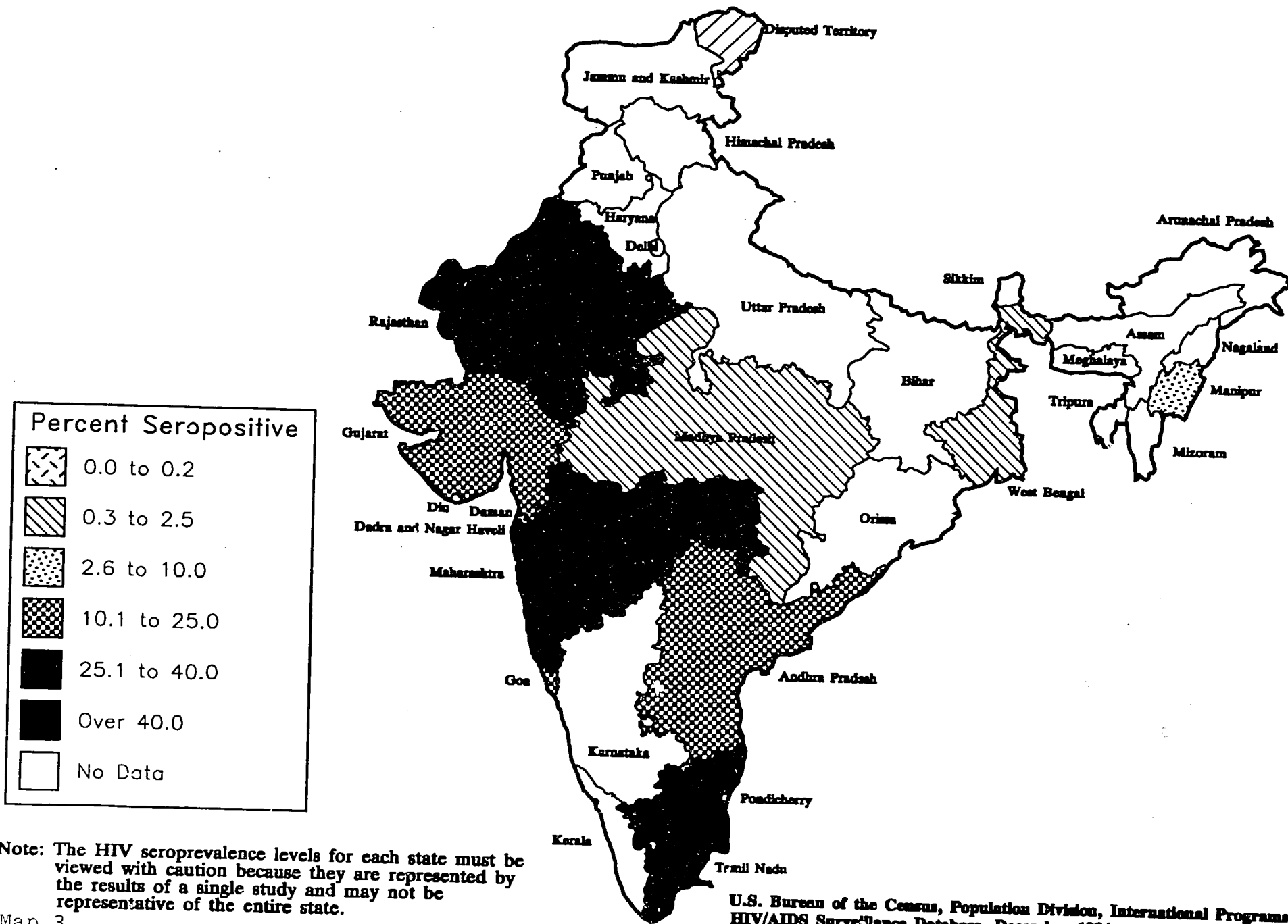
Map 4 depicts HIV seroprevalence levels among commercial sex workers in Yunnan Province, China. The highest levels are located in the prefectures bordering Burma. Sentinel surveillance of CSWs conducted in Simao prefecture revealed a seroprevalence level of 3.3 percent. The second highest level, 0.6 percent, was reported in Dehong prefecture. The remaining six prefectures for which data are available found no evidence of HIV infection. HIV has reached the CSW population; however, the data available imply that the epidemic is just beginning in these areas.

## Conclusion

HIV prevalence studies show wide differences in infection rates between population groups. However, in most Asian countries, except for Thailand, India, Burma and Malaysia, it is difficult to show the extent of HIV infection and to determine trends because of the limited reported data.

Although HIV was introduced into Asia at a later date than much of the rest of the world, the virus has already been detected in the general populations of a number of countries in the region. The situation and trends are still unfolding and HIV continues to spread, revealing itself in one location after another. Governments in the region, as elsewhere in the world, have been slow to react to this threat to their population.

# HIV Seroprevalence for Commercial Sex Workers in India



Note: The HIV seroprevalence levels for each state must be viewed with caution because they are represented by the results of a single study and may not be representative of the entire state.

U.S. Bureau of the Census, Population Division, International Programs Center, HIV/AIDS Surveillance Database, December 1994.

### HIV Seroprevalence for Commercial Sex Workers in Yunnan Province, China



U.S. Bureau of the Census, Population Division, International Programs Center, HIV/AIDS Surveillance Database, December 1994.

Map 4

Notes

1. World Health Organization, 1994, "The Current Global Situation of the HIV/AIDS Pandemic", July.
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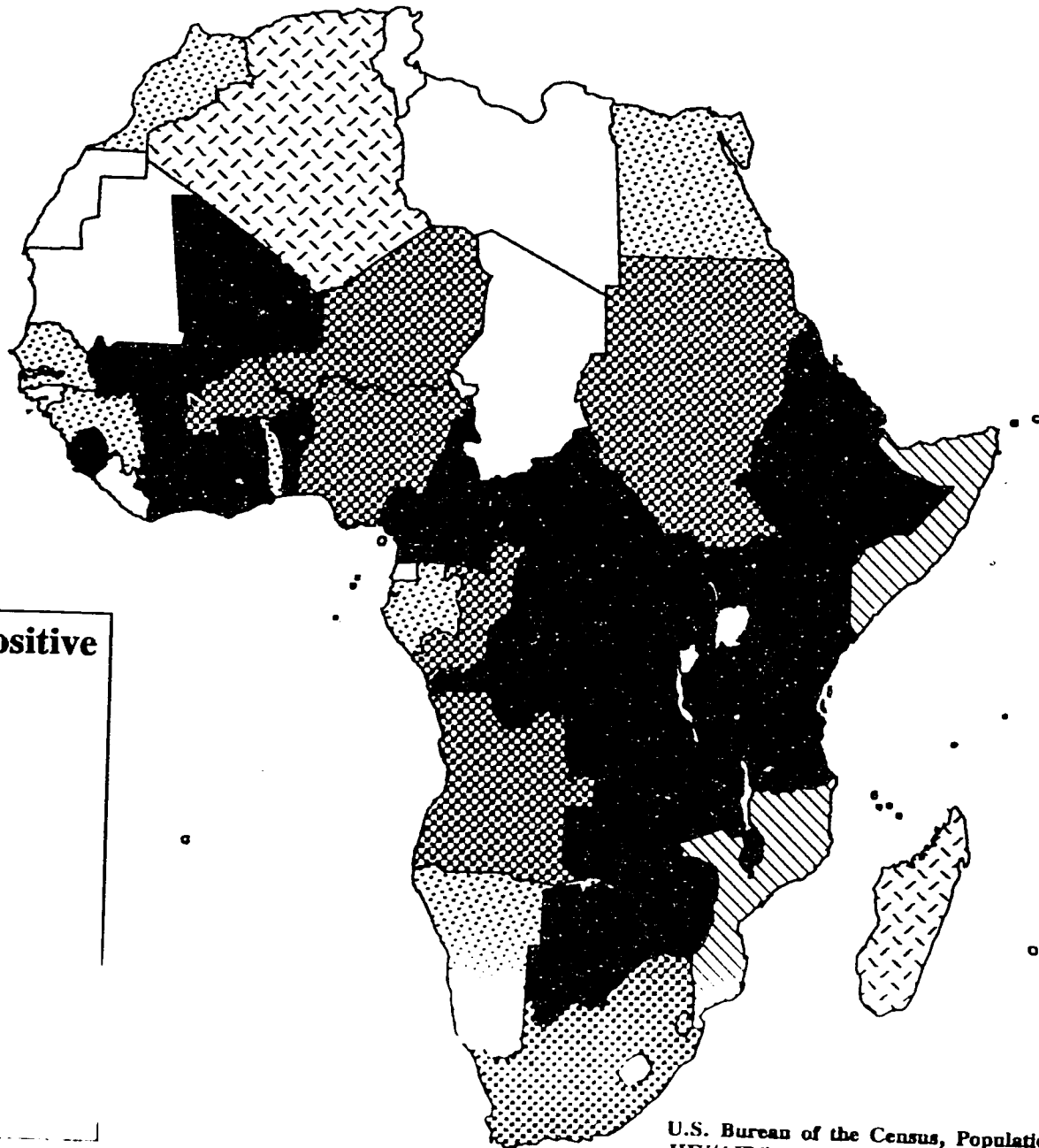
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# Map 1 African HIV-1 Seroprevalence for High-Risk Urban Populations



## Percent Seropositive

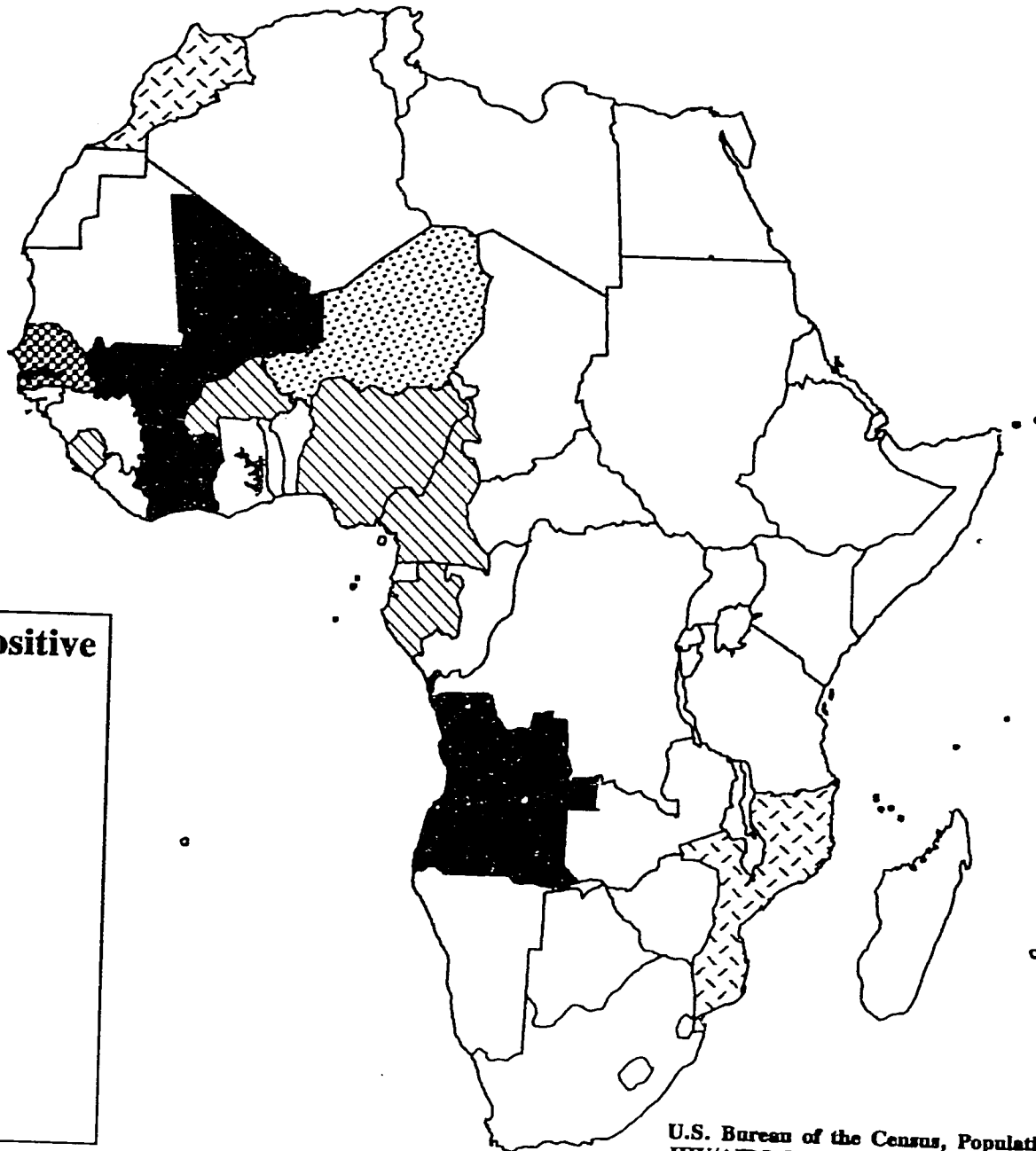
- 0.0 to 0.2
- 0.3 to 2.5
- 2.6 to 10.0
- 10.1 to 25.0
- 25.1 to 40.0
- Over 40.0

No Data








U.S. Bureau of the Census, Population Division, International Programs Center,  
HIV/AIDS Surveillance Database, December 1994.

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# Map 2 African HIV-2 Seroprevalence for High-Risk Urban Populations

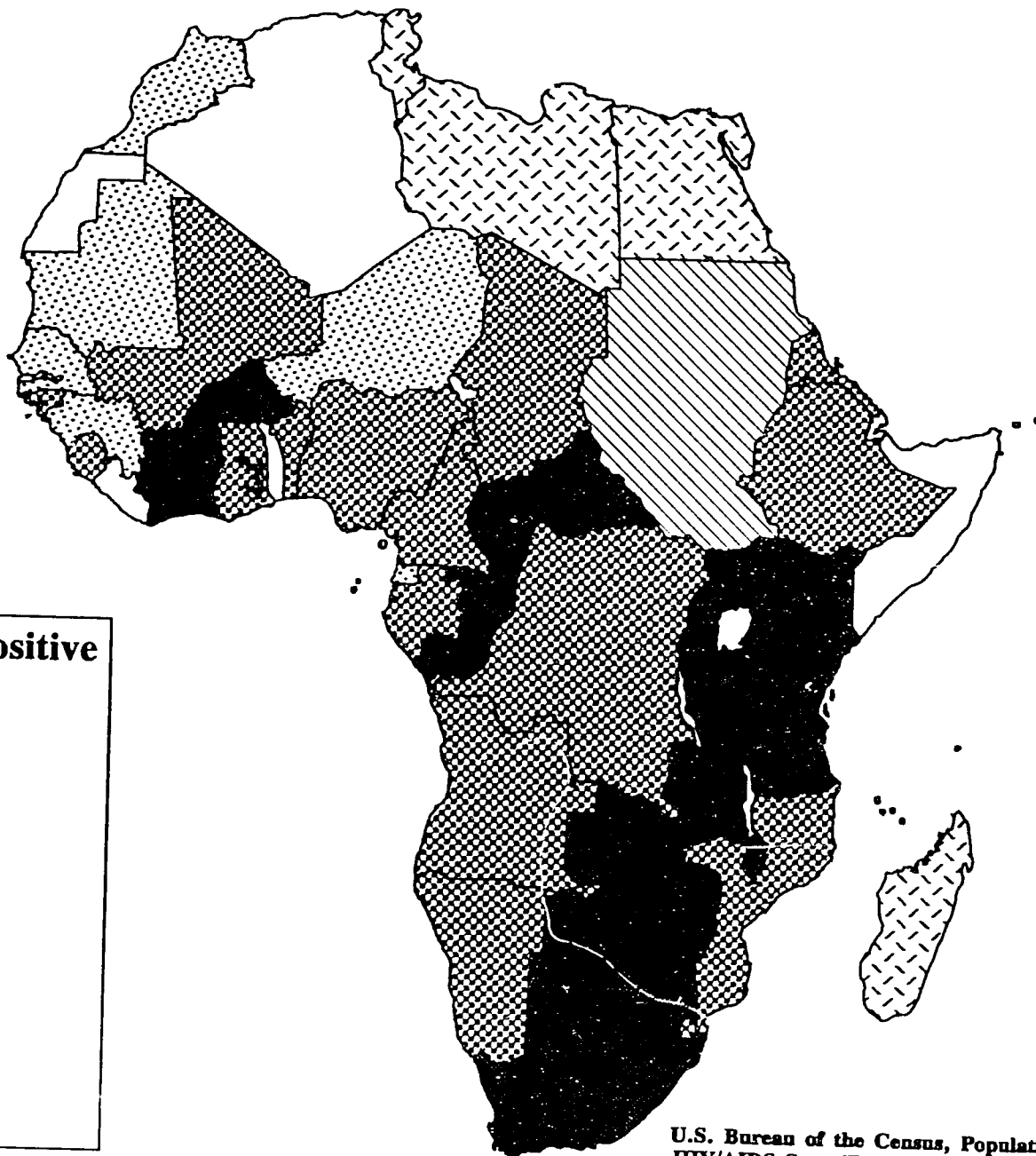


## Percent Seropositive

-  0.0 to 0.5
-  0.6 to 5.0
-  5.1 to 7.5
-  7.6 to 10.0
-  10.1 to 12.5
-  Over 12.5
-  No Data



# Map 3 African HIV-1 Seroprevalence for Low-Risk Urban Populations



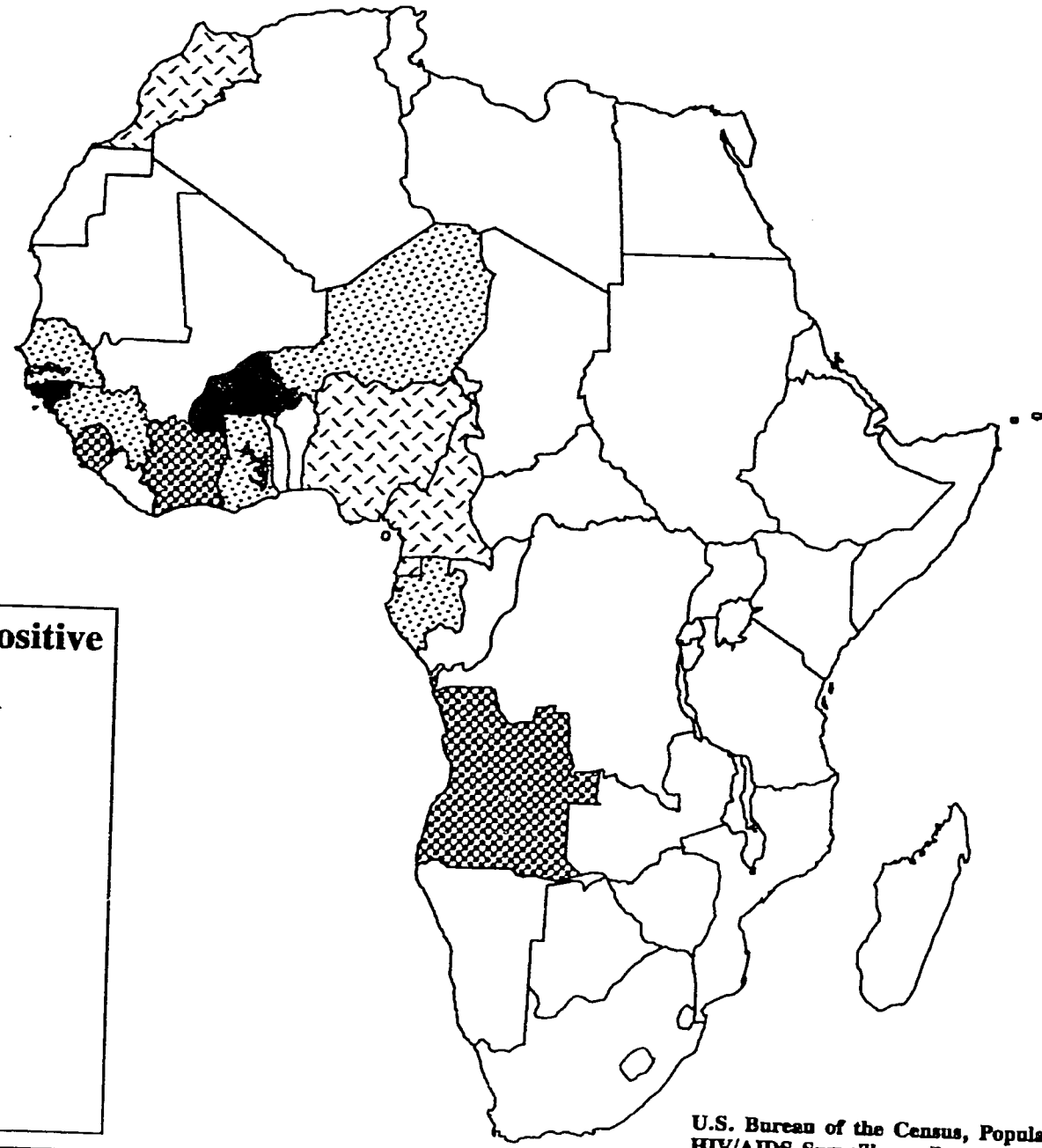
**Percent Seropositive**

	Less than 0.1
	0.1
	0.2 to 1.0
	1.1 to 5.0
	5.1 to 10.0
	Over 10.0
	No Data








U.S. Bureau of the Census, Population Division, International Programs Center, HIV/AIDS Surveillance Database, December 1994.

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# Map 4 African HIV-2 Seroprevalence for Low-Risk Urban Populations



## Percent Seropositive

-  Less than 0.1
-  0.1
-  0.2 to 1.0
-  1.1 to 5.0
-  5.1 to 10.0
-  Over 10.0
-  No Data

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Table 1: Estimates of HIV-1 Seroprevalence, by Residence and Risk Factor, for Developing Countries: Circa 1993

REGION AND COUNTRY	CAPITAL/MAJOR CITY		OUTSIDE MAJOR CITY		URBAN CITY SOURCES		OUTSIDE CITY SOURCES	
	LOW RISK	HIGH RISK	LOW RISK	HIGH RISK	LOW RISK	HIGH RISK	LOW RISK	HIGH RISK
<b>AFRICA</b>								
Algeria	-	.0b	-	-		A0132		
*Angola	1.7	14.2ad	-	-	P0103	S0043		
*Benin	1.4	38.1c	4.9a	-	D0145	D0145	G0146	
Botswana	22.5c	31.9c	7.5	-	N0097	N0097	N0087	
*Burkina Faso	8.8a	17.2a	4.1ad	44.7abd	S0145	L0086	O0029	B0092
Burundi	20.0	-	1.8	-	B0231		B0231	
*Cameroon	1.6c	45.3	2.9	-	G0112	M0272	S0195	
*Cape Verde	.0	-	.0	-	A0046		A0046	
Central African Rep.	16.0	31.0	6.5	-	U0027	U0027	U0027	
Chad	4.1	-	-	-	M0266			
Comoros	-	.1d	-	-		P0059		
Congo	9.0	17.6c	2.6	-	B0127	M0333	B0162	
*Cote d'Ivoire	14.8a	83.7a	3.3ad	-	D0112	E0042	B0108	
*Djibouti	.3d	43.0	-	-	B0037	C0141		
Egypt	.0	5.3	-	-	H0086	H0116		
*Equatorial Guinea	.3d	-	-	-	J0009			
Eritrea	1.6	31.5d	-	-	Z0041	M0327		
Ethiopia	4.0	54.2	1.8	65.6	Z0041	M0083	H0112	M0083
*Gabon	1.6a	3.6ad	-	3.7d	M0326	M0146		S0152
*Gambia, The	.1	13.6a	-	-	W0027	H0117		
*Ghana	2.2	37.5b	-	-	M0143	D0096		
*Guinea	.7a	2.7	.3	-	M0334	D0141	J0028	
*Guinea-Bissau	1.9a	-	.5a	-	A0125		W0082	
Kenya	15.0b	85.5	6.3b	-	G0105	M0243	M0251	
Lesotho	5.5	5.8	1.8	5.2	L0112	L0112	L0112	L0112
Liberia	-	-	-	-				
Libya	.0d	-	-	-	G0091			
Madagascar	.0	.1	-	-	H0109	H0109		
Malawi	33.0b	57.2	12.3t	-	U0026	L0163	U0026	
*Mali	3.7	41.8a	3.4c	52.8c	M0331	D0132	M0331	M0331
Mauritania	.4b	-	-	-	B0219			
Mauritius	-	.8	-	-		P0074		
Mayotte	-	-	-	-				
*Morocco	.2	7.1b	-	-	R0099	R0046		
*Mozambique	1.2b	2.0b	-	3.7a	B0246	B0246		F0050
Namibia	4.7b	7.2b	-	-	S0268	S0268		
*Niger	.7a	12.6a	1.4	-	O0044	S0258	H0106	
*Nigeria	2.4b	12.3	-	-	H0113	D0120		
Reunion	-	-	-	-				
Rwanda	33.4	73.2	9.8	-	M0126	B0243	C0132	
St. Helena	-	-	-	-				
*Sao Tome & Principe	.0	-	-	-	L0022			
*Senegal	.3	3.9a	.1	1.9	S0269	D0105	M0322	M0322
Seychelles	-	-	-	-				
*Sierra Leone	3.5ad	27.5b	-	-	K0060	M0237		
Somalia	-	2.4	-	-		C0122		
South Africa	5.8b	17.2	2.8	-	U0025	R0100	R0101	

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Table 1: Estimates of HIV-1 Seroprevalence, by Residence and Risk Factor, for Developing Countries: Circa 1993

REGION AND COUNTRY	CAPITAL/MAJOR CITY		OUTSIDE MAJOR CITY		URBAN CITY SOURCES		OUTSIDE CITY SOURCES	
	LOW RISK	HIGH RISK	LOW RISK	HIGH RISK	LOW RISK	HIGH RISK	LOW RISK	HIGH RISK
<b>AFRICA cont'd</b>								
Sudan	.1d	16.0bd	-	-	A0071	M0134		
Swaziland	3.9	11.1	-	-	D0117	D0117		
Tanzania	16.1	49.5	14.1c	34.3b	M0307	T0102	T0102	R0090
*Togo	-	3.1	3.0	7.3b		B0224	M0375	M0375
Tunisia	.0	-	-	-	B0169			
Uganda	29.5	45.0	6.5b	86.0bd	A0086	G0095	W0094	N0003
Western Sahara	-	-	-	-				
Zaire	5.0c	38.0d	2.9	25.4	M0265	M0265	M0265	G0092
Zambia	24.5b	58.3	16.0b	36.0b	T0040	S0294	K0096	K0096
Zimbabwe	18.0	28.6b	12.8	34.4	M0241	H0061	W0061	W0061
<b>ASIA AND OCEANIA</b>								
Bahrain	-	.0	-	-		F0038		
Bangladesh	.0	-	-	-	W0076			
Bhutan	.0	-	-	-	W0076			
Brunei	.0	-	-	-	T0121			
Burma	2.2	11.4	.1	15.5	F0055	F0055	F0055	F0055
Cambodia	3.5b	9.2	-	-	T0115	L0165		
China, Mainland	0.1	20.4	-	-	C0178	C0178		
*China, Taiwan	.0	.4	-	-	W0097	H0092		
Fiji	.0	-	-	-	G0155			
Gaza Strip	.0	-	-	-	M0314			
Hong Kong	.0	0.1	-	-	L0156	LJ156		
*India	1.1	45.0b	-	-	G0153	S0288		
Indonesia	.0	.0	-	-	W0076	I0026		
Israel	.0	1.1	-	-	M0314	M0186		
Korea, North	.0	-	-	-	W0076			
Korea, South	.0	0.0	-	-	S0301	S0301		
Kuwait	.0d	.0d	-	-	B0078	M0101		
Laos	.8	1.2	-	-	M0309	P0122		
Malaysia	.0	29.5	-	-	W0081	S0215		
Maldives	.0	-	-	-	W0076			
Mongolia	.0	.0	-	-	M0340	M0340		
Nepal	.0	.8b	-	-	G0154	U0018		
Pakistan	.0d	-	-	-	M0228			
Papua New Guinea	.0	.3	.0	.0c	O0053	O0053	I0028	I0028
Philippines	-	.1	-	.1d		W0081		H0025
Saudi Arabia	.0	-	-	-	B0137			
Singapore	.0	.5	-	-	W0081	C0160		
Sri Lanka	.0	.1b	-	-	W0076	A0105		
Syria	.0	-	-	-	M0139			
Thailand	2.2	33.3	-	-	T0119	T0119		
Turkey	.0	1.6d	-	-	Y0022	B0088		
Vietnam	.0	8.7	-	-	V0044	W0081		
West Bank	.0	-	-	-	M0314			
<b>LATIN AMERICA/CARIBBEAN</b>								
Antigua & Barbuda	-	1.7	-	-		G0123		
Argentina	.1	6.3	.2	2.0	T0116	Z0030	F0037	F0037
Bahamas, The	3.6	18.4	-	-	B0179	B0179		

December, 1994

## U.S. BUREAU OF THE CENSUS -- HIV/AIDS SURVEILLANCE DATA BASE

Table 1: Estimates of HIV-1 Seroprevalence, by Residence and Risk Factor, for Developing Countries: Circa 1993

REGION AND COUNTRY	CAPITAL/MAJOR CITY		OUTSIDE MAJOR CITY		URBAN CITY SOURCES		OUTSIDE CITY SOURCES	
	LOW RISK	HIGH RISK	LOW RISK	HIGH RISK	LOW RISK	HIGH RISK	LOW RISK	HIGH RISK
LATIN AMERICA cont'd								
Barbados	1.2c	4.7d	-	-	B0186 B0187 B0188 B0189	G0123		
Bolivia	.0d	.0d	-	-	M0078	M0078		
*Brazil	0.5	24.0a	.3	.0b	R0110	F0047	C0152	T0046
British Virgin Islands	2.8b	-	-	-	B0206			
Cayman Islands	.0	-	-	-	G0123			
Chile	.0	1.0	-	-	L0123	L0123		
Colombia	.0	1.1	-	-	B0244	N0133		
Costa Rica	1.1c	4.3c	-	-	L0125	L0128		
*Cuba	.0	.0	-	-	M0287	M0297		
Dominican Rep.	1.2b	11.1b	-	-	G0145	G0145		
Ecuador	.0b	3.6	-	-	R0093	R0104		
El Salvador	.7b	2.2	-	-	S0300	E0036		
Grenada	.0	2.4b	-	-	G0140	G0139		
Guatemala	.0	8.5	-	-	M0205	M0371		
Guyana	6.9	25.0	-	-	G0137	F0065		
Haiti	15.7	41.9d	4.0	-	I0138	G0048	A0097	
Honduras	.2	19.8	-	-	M0242	Z0035		
Jamaica	.4b	4.3b	-	-	F0072	F0072		
Mexico	.6b	5.0b	-	-	G0151	G0151		
Monsterrat	.0c	-	-	-	M0278 M0279 M0280			
Nicaragua	.0	1.6b	-	-	N0110	N0110		
Paraguay	.0	.1	-	-	V0058	C0112		
Peru	.1d	.3d	-	-	A0014	A0014		
St. Kitts & Nevis	2.0c	-	-	-	S0227 S0241 S0242			
St. Lucia	.0c	1.2c	-	-	S0218 S0220 S0221	S0217 S0218 S0220 S0221		
St. Vincent & Grenadines	.2	1.4c	-	-	S0235	S0234 S0235 S0236		
Suriname	.8c	2.6	-	-	S0244 S0245	S0246		
Trinidad & Tobago	.3	14.7	-	-	F0065	C0143		
Uruguay	.1	5.6	-	-	A0118	S0209		
Venezuela	.1	6.1b	-	-	E0024	E0024		

- No data found

\* See table 2 for HIV-2 data

a Rate represents infection with HIV1 only and dual infection (HIV1 &amp; HIV2), therefore addition of rates from table 1 and 2 is not advised.

b Data are best available but are not necessarily reliable due to small sample size (&lt;100).

c Data combined.

d Data more than 4 years old, may not reflect current situation.

## NOTES:

Definition: High risk--prostitutes and clients, STD patients, or other persons with known risk factors  
Low risk--pregnant women, blood donors, or other persons with no known risk factors.

SOURCE: U.S. Bureau of the Census, HIV/AIDS Surveillance Data Base, 12/94 Update

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Table 2: Estimates of HIV-2 Seroprevalence, by Residence and Risk Factor, for Developing Countries: Circa 1993

REGION AND COUNTRY	CAPITAL/MAJOR CITY		OUTSIDE MAJOR CITY		URBAN CITY SOURCES		OUTSIDE CITY SOURCES	
	LOW RISK	HIGH RISK	LOW RISK	HIGH RISK	LOW RISK	HIGH RISK	LOW RISK	HIGH RISK
<b>AFRICA</b>								
*Angola	1.3 <sup>ad</sup>	13.7 <sup>ad</sup>	-	-	S0110	S0043		
*Benin	-	-	3.8 <sup>a</sup>	-			G0146	
*Burkina Faso	5.6 <sup>a</sup>	3.6 <sup>a</sup>	1.9 <sup>ad</sup>	23.7 <sup>abd</sup>	S0145	L0086	O0029	B0092
*Cameroon	.0 <sup>d</sup>	.7	.0	-	K0070	K0073	S0195	
*Cape Verde	1.4	-	.4	-	A0046		A0046	
*Cote d'Ivoire	2.6 <sup>a</sup>	36.6 <sup>a</sup>	2.1 <sup>ad</sup>	-	D0112	E0042	B0108	
*Djibouti	-	.0	-	-		R0051		
*Equatorial Guinea	.0 <sup>d</sup>	-	-	-	J0009			
*Gabon	.8 <sup>a</sup>	.9 <sup>ad</sup>	-	-	M0326	M0146		
*Gambia, The	1.7	26.7 <sup>a</sup>	-	-	W0027	H0117		
*Ghana	.6	-	-	-	M0143			
*Guinea	.4 <sup>a</sup>	-	.1	-	M0334		J0028	
*Guinea-Bissau	12.1 <sup>a</sup>	-	8.3 <sup>a</sup>	-	A0125		W0082	
*Mali	-	13.9 <sup>a</sup>	-	-		D0132		
*Morocco	.0	.0 <sup>b</sup>	-	-	Z0022	R0046		
*Mozambique	-	.3 <sup>a</sup>	-	1.9 <sup>a</sup>		V0053		F0050
*Niger	.4 <sup>a</sup>	6.3 <sup>a</sup>	-	-	O0044	S0258		
*Nigeria	.0	2.2 <sup>a,c</sup>	-	-	N0119	D0120		
*Sao Tome & Principe	.0	-	-	-	L0022			
*Senegal	.5	9.1 <sup>a</sup>	1.5	20.0	S0269	D0105	M0322	M0322
*Sierra Leone	4.9 <sup>ad</sup>	1.8 <sup>ad</sup>	-	-	K0060	A0032		
*Togo	-	-	.0	-			M0375	
<b>ASIA/OCEANIA</b>								
*China, Taiwan	-	.0	-	-		H0092		
*India	.1 <sup>a</sup>	9.3	-	-	J0022	B0144		
<b>LATIN AMERICA and CARIBBEAN</b>								
*Brazil	.0	9.7 <sup>a</sup>	.0	-	L0076	F0047	C0152	
*Cuba	.0 <sup>d</sup>	-	-	-	M0131			

- No data found

\* See table 1 for HIV-1 data

a Rate represents infection with HIV1 only and dual infection (HIV1 & HIV2), therefore addition of rates from table 1 and 2 is not advised.

b Data are best available but are not necessarily reliable due to small sample size (<100).

c Data combined.

d Data more than 4 years old, may not reflect current situation.

**NOTES:**

Definition: High risk--prostitutes and clients, STD patients, or other persons with known risk factors  
Low risk--pregnant women, blood donors, or other persons with no known risk factors.

SOURCE: U.S. Bureau of the Census, HIV/AIDS Surveillance Data Base, 12/94 Update

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## U.S. BUREAU OF THE CENSUS -- HIV/AIDS SURVEILLANCE DATA BASE

Table 3: Detailed Listing of Estimates of HIV-1 &amp; 2 Seroprevalence, by Residence and Risk Factor, for Developing Countries Circa 1993

REGION/ COUNTRY	RISK GEOGRAPHIC AREA AREA	YEAR	SUB-POPULATION	SEX AGE PREV. RATE	SIZE	TYPE	TEST	SOURCE ID
AFRICA								
ALGERIA	UH NOT SPECIFIED	1991	PROSTITUTES	F ALL .0b	N/A	HIV1	UNK	A0132
ANGOLA	UL NINE PROVINCES	1992	BLOOD DONORS	B ALL 1.7	11333	HIV	RAPID,ELISA,WB	P0103
	UL2 LUANDA CITY	1987-88	HEALTHY PERSONS	B ALL 1.3ad	316	HIV2	ELISA,IFA,RIPA,WB	S0110
	UH DUNDO CITY	1988	STD PTS.	B ALL 14.2ad	219	HIV1	ELISA,WB	S0043
	UH2 DUNDO CITY	1988	STD PTS.	B ALL 13.7ad	219	HIV2	ELISA,WB	S0043
BENIN	UL PORTO NOVO	1993	PREGNANT WOMEN	F ALL 1.4	499	HIV1,2	ELISA*2,WB	D0145
	UH SIX PROVINCES	1993	PROSTITUTES	F ALL 38.1c	735	HIV1,2	ELISA*2,WB	D0145
	OL ZOU & MONO/RURAL	1993(?)	GENERAL POPULATION	B ALL 4.9a	820	HIV1	ELISA,WB	G0146
	OL2 ZOU & MONO/RURAL	1993(?)	GENERAL POPULATION	B ALL 3.8a	820	HIV2	ELISA,WB	G0146
BOTSWANA	UL SEVEN AREAS	1993	PREGNANT WOMEN	F ALL 22.5c	2712	HIV	UNK	N0097
	UH FIVE AREAS	1993	STD PTS.	M ALL 31.9c	926	HIV	UNK	N0097
	OL BOTETI	1992	PREGNANT WOMEN	F ALL 7.5	240	HIV	UNK	N0087
BURKINA FASO	UL BOBO DIOULASSO	1990-91	PREGNANT WOMEN	F ALL 8.8a	125	HIV1	RIPA,WB	S0145
	UL2 BOBO DIOULASSO	1990-91	PREGNANT WOMEN	F ALL 5.6a	125	HIV2	RIPA,WB	S0145
	UH BOBO DIOULASSO	1990-91	STD PTS.	M ALL 17.2a	192	HIV1	ELISA,WB	L0086
	UH2 BOBO DIOULASSO	1990-91	STD PTS.	M ALL 3.6a	192	HIV2	ELISA,WB	L0086
	OL GOROM-GOROM TOWN	1989	HEALTH PROFESSIONALS	B ALL 4.1ad	267	HIV1	ELISA,WB	O0029
	OL2 GOROM-GOROM TOWN	1989	HEALTH PROFESSIONALS	B ALL 1.9ad	267	HIV2	ELISA,WB	O0029
	OH RURAL AREA	1989(?)	PROSTITUTES	F ALL 44.7abd	38	HIV1	ELISA,WB	B0092
	OH2 RURAL AREA	1989(?)	PROSTITUTES	F ALL 23.7abd	38	HIV2	ELISA,WB	B0092
BURUNDI	UL BUJUMBURA	1992	PREGNANT WOMEN	F ALL 20.0	1287	HIV	ELISA	B0231
	OL RURAL AREAS	1992	PREGNANT WOMEN	F ALL 1.8	1231	HIV	ELISA	B0231
CAMEROON	UL YAOUNDE	1992	PREGNANT WOMEN	F ALL 1.6c	800	HIV1	ELISA,WB	G0112
	UL2 YAOUNDE	1989	PREGNANT WOMEN	F ALL .0d	900	HIV2	ELISA	K0070
	UH DOUALA	1992(?)	PROSTITUTES	F ALL 45.3	234	HIV1	RAPID,WB	M0272
	UH2 YAOUNDE	1989-90	PROSTITUTES	F ALL .7	303	HIV2	ELISA,WB	K0073
	OL SOUTH WEST PROV.	1991-92	PREGNANT WOMEN	F ALL 2.9	382	HIV1	ELISA,WB	S0195
	OL2 SOUTH WEST PROV.	1991-92	PREGNANT WOMEN	F ALL .0	382	HIV2	ELISA,WB	S0195
CAPE VERDE	UL PRAIA	1988	URBAN POPULATION	B ALL .0	900	HIV1	ELISA,WB	A0046
	UL2 PRAIA	1988	URBAN POPULATION	B ALL 1.4	900	HIV2	ELISA,WB	A0046
	OL FOGO	1988	RURAL POPULATION	B ALL .0	900	HIV1	ELISA,WB	A0046
	OL2 FOGO	1988	RURAL POPULATION	B ALL .4	900	HIV2	ELISA,WB	A0046
C. AFRICAN REPUBLIC	+UL BANGUI	1993	PREGNANT WOMEN	F ALL 16.0	218	HIV	UNK	U0027
	+UH BANGUI	1993	STD CLINIC PTS.	B ALL 31.0	283	HIV	UNK	U0027
	+OL BATANGAFO	1993	PREGNANT WOMEN	F ALL 6.5	200	HIV	UNK	U0027
CHAD	UL SARH	1992	PREGNANT WOMEN	F ALL 4.1	435	HIV1,2	RAPID,WB	M0266
COMOROS	UH MORONI	1987-88	STD OUT-PTS.	B ALL .1d	719	HIV1	ELISA,WB	P0059

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Table 3: Detailed Listing of Estimates of HIV-1 &amp; 2 Seroprevalence, by Residence and Risk Factor, for Developing Countries Circa 1993

REGION/ COUNTRY	RISK GEOGRAPHIC AREA AREA	YEAR	SUB-POPULATION	SEX AGE PREV. RATE	SIZE	TYPE	TEST	SOURCE ID
AFRICA cont'd								
CONGO	UL BRAZZAVILLE	1991	PREGNANT WOMEN	F ALL 9.0	300	HIV	ELISA	B0127
	UH BRAZZAVILLE	1990	STD PTS.	B ALL 17.6c	400	HIV	ELISA	M0333
	OL OWANDO	1992	PREGNANT WOMEN	F ALL 2.6	300	HIV	UNK	B0162
COTE D'IVOIRE	UL ABIDJAN	1992	PREGNANT WOMEN	F ALL 14.8a	547	HIV1	ELISA,LIA	D0112
	UL2 ABIDJAN	1992	PREGNANT WOMEN	F ALL 2.6a	547	HIV2	ELISA,LIA	D0112
	UH ABIDJAN	1992-93	PROSTITUTES	F ALL 83.7a	745	HIV1	ELISA,WB	E0042
	UH2 ABIDJAN	1992-93	PROSTITUTES	F ALL 36.6a	745	HIV2	ELISA,WB	E0042
	OL RURAL AREA	1989	ADULTS	B ALL 3.3ad	3199	HIV1	ELISA,WB	B0108
	OL2 RURAL AREA	1989	ADULTS	B ALL 2.1ad	3199	HIV2	ELISA,WB	B0108
DJIBOUTI	UL DJIBOUTI	1987-88	GENERAL POPULATION	B ALL .3d	1760	HIV1	ELISA,WB	B0037
	UH DJIBOUTI	1991	STREET PROSTITUTES	F ALL 43.0	300	HIV	ELISA,WB	C0141
	UH2 DJIBOUTI	1990	STREET PROSTITUTES	F ALL .0	115	HIV2	ELISA,WB	R0051
EGYPT	UL CAIRO	1990-91	FAM. PLAN. CLINIC PTS.	F ALL .0	2412	HIV	UNK	H0086
	+UH CAIRO	1994(?)	HIGH RISK INDIVIDUALS	B ALL 5.3	150	HIV	ELISA	H0116
EQUATORIAL GUINEA	UL BATA	1988	URBAN POPULATION	B ALL .3d	389	HIV1	ELISA,WB	J0009
	UL2 BATA	1988	URBAN POPULATION	B ALL .0d	389	HIV2	ELISA,WB	J0009
ERITREA	+UL ASMARA	1991	BLOOD DONORS	B ALL 1.6	516	HIV1	ELISA*2,WB	Z0041
	+UH ASSAB	1988	PROSTITUTES - REG.	F ALL 31.5d	352	HIV	ELISA*2,WB	M0327
ETHIOPIA	+UL ADDIS ABABA	1991	BLOOD DONORS	F ALL 4.0	1959	HIV1	ELISA,WB	Z0041
	UH ADDIS ABABA	1990	PROSTITUTES	F ALL 54.2	1225	HIV	WB	M0083
	+OL SIX RURAL AREAS	1993	ADULTS	B ALL 1.8	2415	HIV	ELISA	H0112
	OH HAZARETH	1991	PROSTITUTES	F ALL 65.6	215	HIV	ELISA,WB	M0083
GABON	UL FRANCEVILLE	1993(?)	ADULTS	B ALL 1.6a	674	HIV1	ELISA,WB	M0326
	UL2 FRANCEVILLE	1993(?)	ADULTS	B ALL .8a	674	HIV2	ELISA,WB	M0326
	UH LIBREVILLE	1988	STD PTS.	B ALL 3.6ad	222	HIV1	ELISA,WB	M0146
	UH2 LIBREVILLE	1988	STD PTS.	B ALL .9ad	222	HIV2	ELISA,WB	M0146
	OH SOUTHEASTERN	1988(?)	STD PTS.	F ALL 3.7d	734	HIV	ELISA,WB	S0152
THE GAMBIA	UL FOUR AREAS	1991(?)	ADULTS	B ALL .1	4228	HIV1	ELISA,WB	W0027
	UL2 FOUR AREAS	1991(?)	ADULTS	B ALL 1.7	4228	HIV2	ELISA,WB	W0027
	+UH THREE TOWNS	1993	PROSTITUTES	F ALL 13.6a	213	HIV1	UNK	H0117
	+UH2 THREE TOWNS	1993	PROSTITUTES	F ALL 26.7a	213	HIV2	UNK	H0117
GHANA	UL NOT SPECIFIED	1990(?)	BLOOD DONORS	B ALL 2.2	14362	HIV1	ELISA,WB	M0143
	UL2 NOT SPECIFIED	1990(?)	BLOOD DONORS	B ALL .6	14362	HIV2	ELISA,WB	M0143
	UH NOT SPECIFIED	1991	PROSTITUTES	F ALL 37.5b	56	HIV	RAPID,WB	D0096
GUINEA	UL CONAKRY	1991	BLOOD DONORS - VOL.	B ALL .7a	2003	HIV1	ELISA,WB	M0334
	UL2 CONAKRY	1991	BLOOD DONORS - VOL.	B ALL .4a	2003	HIV2	ELISA,WB	M0334
	UH CONAKRY	1993	STD PTS. W/ GUD	F ALL 2.7	450	HIV	ELISA,WB	D0141
	OL SAMOE	1992(?)	RURAL POPULATION	B ALL .3	928	HIV1	ELISA,RAPID,WB	J0028
	OL2 SAMOE	1992(?)	RURAL POPULATION	B ALL .1	928	HIV2	ELISA,RAPID,WB	J0028

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Table 3: Detailed Listing of Estimates of HIV-1 &amp; 2 Seroprevalence, by Residence and Risk Factor, for Developing Countries Circa 1993

REGION/ COUNTRY	RISK GEOGRAPHIC AREA AREA	YEAR	SUB-POPULATION	SEX AGE PREV. RATE	SIZE	TYPE	TEST	SOURCE ID
AFRICA cont'd								
GUINEA- BISSAU	UL BISSAU	1993(?)	FAM.PLAN.CLI./OUT PTS.	B ALL 1.9a	1060	HIV1	ELISA*2,WB	A0125
	UL2 BISSAU	1993(?)	FAM.PLAN.CLI./OUT PTS.	B ALL 12.1a	1060	HIV2	ELISA*2,WB	A0125
	OL RURAL AREA	1991	ADULTS	B ALL .5a	2770	HIV1	ELISA,LIA,WB	W0082
	OL2 RURAL AREA	1991	ADULTS	B ALL 8.3a	2770	HIV2	ELISA,LIA,WB	W0082
KENYA	UL NAIROBI	1992	PREGNANT WOMEN	F ALL 15.0b	N/A	HIV1	UNK	G0105
	UH NAIROBI	1992	PROSTITUTES	F ALL 85.5	330	HIV	ELISA*2	M0243
	OL BURNT FOREST	1992(?)	PREGNANT WOMEN	F ALL 6.3b	79	HIV	RAPID	M0251
LESOTHO	UL MASERU	1992	PREGNANT WOMEN	F ALL 5.5	399	HIV	UNK	L0112
	UH MASERU	1991-92	STD PTS.	B ALL 5.8	412	HIV	UNK	L0112
	OL MALUTI DISTRICT	1992	PREGNANT WOMEN	F ALL 1.8	396	HIV	UNK	L0112
	OH MALUTI DISTRICT	1991-92	STD PTS.	B ALL 5.2	252	HIV	UNK	L0112
LIBYA	UL BENGHAZI CITY	1987-89	BLOOD DONORS	B ALL .0d	6211	HIV	UNK	G0091
MADAGASCAR	UL 15 SITES AREAS	1990	PREGNANT WOMEN	F ALL .0	2095	HIV	ELISA,WB	H0109
	UH 15 SITES AREAS	1990	STD PTS.	B ALL .1	5664	HIV	ELISA,WB	H0109
MALAWI	+UL BLANTYRE	1994	PREGNANT WOMEN	F ALL 33.0b	N/A	HIV	UNK	U0026
	+UH BLANTYRE	1994(?)	STD PTS. W/ GU	M ALL 57.2	778	HIV	ELISA	L0163
	+OL RURAL AREA	1993	PREGNANT WOMEN	F ALL 12.3b	N/A	HIV	UNK	U0026
MALI	UL BAMAKO REGION	1992	GENERAL POPULATION	F ALL 3.7	510	HIV1,2	LIA,WB	M0331
	UH BAMAKO	1993	STD PTS.	F ALL 41.8a	122	HIV1	RAPID,WB	D0132
	UH2 BAMAKO	1993	STD PTS.	F ALL 13.9a	122	HIV2	RAPID,WB	D0132
	OL SEVEN REGIONS	1992	GENERAL POPULATION	F ALL 3.4c	2990	HIV1,2	LIA,WB	M0331
	OH FIVE REGIONS	1992	PROSTITUTES	F ALL 52.8c	178	HIV1,2	LIA,WB	M0331
MAURITANIA	UL NOUAKCHOTT	1990-92	BLOOD DONORS	B ALL .4b	N/A	HIV	ELISA,WB	B0219
MAURITIUS	UH NOT SPECIFIED	1988-91	STD CLINIC PTS.	B ALL .8	1470	HIV	ELISA,WB	P0074
MOROCCO	UL RABAT	1993(?)	PREGNANT WOMEN	F ALL .2	671	HIV1	ELISA,WB	R0059
	UL2 CASABLANCA	1991(?)	PREGNANT WOMEN	F ALL .0	300	HIV2	ELISA,WB	Z0022
	UH CASABLANCA	1990(?)	PROSTITUTES	F ALL 7.1b	28	HIV1	UNK	R0046
	UH2 CASABLANCA	1990(?)	PROSTITUTES	F ALL .0b	28	HIV2	UNK	R0046
MOZAMBIQUE	+UL NATIONAL	1994(?)	PREGNANT WOMEN	F ALL 1.2b	N/A	HIV	UNK	B0246
	+UH NATIONAL	1994(?)	STD PTS.	B ALL 2.0b	N/A	HIV	UNK	B0246
	UH2 MAPUTO CITY	1990-91	STD CLINIC PTS.	B ALL .3a	1465	HIV2	ELISA,WB	V0053
	OH INHACA ISLAND	1990	WAR DISPL. POPULATION	B ALL 3.7a	216	HIV1	ELISA*2,WB	F0050
	OH2 INHACA ISLAND	1990	WAR DISPL. POPULATION	B ALL 1.9a	216	HIV2	ELISA*2,WB	F0050
NAMIBIA	UL NATIONAL	1992	PREGNANT WOMEN	F ALL 4.7b	N/A	HIV	ELISA*3	S0268
	UH NATIONAL	1992	STD PTS.	B ALL 7.2b	N/A	HIV	ELISA*3	S0268

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Table 3: Detailed Listing of Estimates of HIV-1 &amp; 2 Seroprevalence, by Residence and Risk Factor, for Developing Countries: Circa 1993

REGION/ COUNTRY	RISK GEOGRAPHIC AREA AREA	YEAR	SUB-POPULATION	SEX	AGE	PREV. RATE	SIZE	TYPE	TEST	SOURCE ID
AFRICA cont'd										
NIGER	UL NIAMEY	1990	BLOOD DONORS	B	ALL	.7a	2051	HIV1	ELISA, WB	00044
	UL2 NIAMEY	1990	BLOOD DONORS	B	ALL	.4a	2051	HIV2	ELISA, WB	00044
	UH NIAMEY	1993	PROSTITUTES	F	ALL	12.6a	253	HIV1	ELISA, LIA	S0258
	UH2 NIAMEY	1993	PROSTITUTES	F	ALL	6.3a	253	HIV2	ELISA, LIA	S0258
	OL TAHOUA REG/RURAL	1992	PREGNANT WOMEN	F	ALL	1.4	650	HIV	ELISA, WB	H0106
NIGERIA	+UL MAIDUGURI	1993	PREGNANT WOMEN	F	ALL	2.4b	N/A	HIV	ELISA, WB	H0113
	UL2 LAGOS	1991	PREGNANT WOMEN	F	ALL	.0	250	HIV2	ELISA, WB	N0119
	+UH LAGOS STATE	1990/91	PROSTITUTES	F	ALL	12.3	885	HIV1	RAPID, ELISA, WB	D0120
	+UH2 LAGOS STATE	1990/91	PROSTITUTES	F	ALL	2.2	885	HIV2	RAPID, ELISA, WB	D0120
RWANDA	UL KIGALI	1993	PREGNANT WOMEN	F	ALL	33.4	1121	HIV	ELISA, WB	N0126
	+UH KIGALI	1990-92	STD PTS. W/ GU	B	ALL	73.2	395	HIV	ELISA, LIA	B0243
	OL BUTARE REG/RURAL	1989-91	PREGNANT WOMEN	F	ALL	9.8	5288	HIV	ELISA, WB	C0132
SAO TOME & PRINCEPE	UL SAO TOME	1988	URBAN POPULATION	B	ALL	.0	100	HIV1	ELISA, WB	L0022
	UL2 SAO TOME	1988	URBAN POPULATION	B	ALL	.0	100	HIV2	ELISA, WB	L0022
SENEGAL	UL DAKAR	1991-93	PREGNANT WOMEN	F	ALL	.3	12498	HIV1	ELISA, WB	S0269
	UL2 DAKAR	1991-93	PREGNANT WOMEN	F	ALL	.5	12498	HIV2	ELISA, WB	S0269
	UH DAKAR	1992(?)	PROSTITUTES - REG.	F	ALL	3.9a	463	HIV1	UNK	D0105
	UH2 DAKAR	1992(?)	PROSTITUTES - REG.	F	ALL	9.1a	463	HIV2	UNK	D0105
	OL ZIGUINCHOR REG.	1992	PREGNANT WOMEN	F	ALL	.1	792	HIV1	ELISA, WB	M0322
	OL2 ZIGUINCHOR REG.	1992	PREGNANT WOMEN	F	ALL	1.5	792	HIV2	ELISA, WB	M0322
	OH ZIGUINCHOR REG.	1992	PROSTITUTES	F	ALL	1.9	105	HIV1	ELISA, WB	M0322
	OH2 ZIGUINCHOR REG.	1992	PROSTITUTES	F	ALL	20.0	105	HIV2	ELISA, WB	M0322
SIERRA LEONE	UL FREETOWN	1987-89	BLOOD DONORS	B	ALL	3.5ad	285	HIV1	ELISA, WB	K0060
	UL2 FREETOWN	1987-89	BLOOD DONORS	B	ALL	4.9ad	285	HIV2	ELISA, WB	K0060
	UH FREETOWN	1991	PROSTITUTES	F	ALL	27.5b	35	HIV	UNK	M0237
	UH2 FREETOWN	1988	STD CLINIC PTS.	B	ALL	1.8ad	332	HIV2	ELISA, WB	A0032
SOMALIA	UH MOGADISHU	1990	PROSTITUTES	F	ALL	2.4	246	HIV1	ELISA, WB	C0122
	+UL JOHANNESBURG/URB	1994(?)	PREGNANT WOMEN	F	ALL	5.8b	N/A	HIV	UNK	U0025
	UH JOHANNESBURG	1993	STD CLINIC PTS.	B	ALL	17.2	4449	HIV	UNK	R0100
	+OL NATIONAL	1993	PREGNANT WOMEN	F	ALL	2.8	16186	HIV	ELISA*2, IFA/WB	R0101
SUDAN	UL NOT SPECIFIED	1989	BLOOD DONORS	B	ALL	.1d	47060	HIV	UNK	A0071
	UH JUBA	1989	PROSTITUTES	F	ALL	16.0bd	50	HIV1	ELISA, WB	M0134
SWAZILAND	UL NATIONAL	1992	PREGNANT WOMEN	F	ALL	3.9	716	HIV	UNK	D0117
	UH NATIONAL	1992	STD CLINIC PTS.	B	ALL	11.1	1489	HIV	UNK	D0117
TANZANIA	UL DAR ES SALAAM	1993	PREGNANT WOMEN	F	ALL	16.1	255	HIV1	UNK	M0307
	UH DAR ES SALAAM	1993(?)	HIGH RISK INDIVIDUALS	F	ALL	49.5	925	HIV	ELISA	O0051
	OL MBEYA REG./RURAL	1992	PREGNANT WOMEN	F	ALL	14.1c	263	HIV	UNK	T0102
	OH MBEYA REGION	1992	STD PTS.	B	ALL	34.3b	N/A	HIV	ELISA*2, WB	R0090

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Table 3: Detailed Listing of Estimates of HIV-1 &amp; 2 Seroprevalence, by Residence and Risk Factor, for Developing Countries, Circa 1993

REGION/ COUNTRY	RISK GEOGRAPHIC AREA AREA	YEAR	SUB-POPULATION	SEX	AGE	PREV. RATE	SIZE	TYPE	TEST	SOURCE ID
AFRICA cont'd										
TOGO	UH FIVE REGIONS	1993(?)	MILITARY RECRUITS	M	ALL	3.1	1357	HIV	ELISA,WB	B0224
	+OL DAPAONG/RURAL	1993	PREGNANT WOMEN	F	ALL	3.0	497	HIV1	ELISA,WB	M0375
	+OL2 DAPAONG/RURAL	1993	PREGNANT WOMEN	F	ALL	.0	497	HIV2	ELISA,WB	M0375
	+OH DAPAONG/RURAL	1993	STD PTS.	B	ALL	7.3b	N/A	HIV1,2	ELISA,WB	M0375
TUNISIA	UL TUNIS	1991	PREGNANT WOMEN	F	ALL	.0	1030	HIV1	ELISA,WB	B0169
UGANDA	UL KAMPALA	1992	PREGNANT WOMEN	F	ALL	29.5	285	HIV	UNK	A0086
	UH KAMPALA	1989-91	STD CLINIC PTS.	B	ALL	45.0	4627	HIV	ELISA,WB	G0095
	+OL KABAROLE DST/RUR	1994	PREGNANT WOMEN	F	ALL	6.5b	N/A	HIV	UNK	W0094
	OH RAKAI DISTRICT	1987(?)	PROSTITUTES	F	ALL	86.0bd	N/A	HIV	UNK	M0003
ZAIRE	UL KINSHASA/3 SITES	1992	PREGNANT WOMEN	F	ALL	5.0c	1298	HIV1	RAPID	M0265
	UH KINSHASA	1989	PROSTITUTES	F	ALL	38.0d	500	HIV1	ELISA,IFA	M0265
	OL MUSOSHI	1991	PREGNANT WOMEN	F	ALL	2.9	1143	HIV1	ELISA,WB	M0265
	OH HAUT-ZAIRE REG.	1991(?)	PROSTITUTES	F	ALL	25.4	126	HIV1	ELISA,IFA/WB	G0092
ZAMBIA	UL LUSAKA	1990(?)	PREGNANT WOMEN	F	ALL	24.5b	N/A	HIV	ELISA	T0040
	+UH LUSAKA	1994(?)	STD CLINIC PTS.	F	ALL	58.3	321	HIV	ELISA	S0294
	OL MUKINGE	1990(?)	PREGNANT WOMEN	F	ALL	16.0b	N/A	HIV1	ELISA	K0096
	OH MUKINGE	1990(?)	STD CLINIC PTS.	B	ALL	36.0b	N/A	HIV1	ELISA	K0096
ZIMBABWE	UL HARARE	1990	PREGNANT WOMEN	F	ALL	18.0	1008	HIV	ELISA*2,WB	M0241
	UH HARARE	1990	STD-UNSKILLED WORKERS	B	ALL	28.6b	N/A	HIV	UNK	H0061
	OL THREE PROVINCES	1990(?)	PREGNANT WOMEN	F	ALL	12.8	888	HIV	ELISA,WB	W0061
	OH THREE PROVINCES	1990(?)	STD PTS.	B	ALL	34.4	535	HIV	ELISA,WB	W0061
ASIA & OCEANIA										
BAHRAIN	UH NOT SPECIFIED	1990(?)	STD CLINIC PTS.	B	ALL	.0	1026	HIV	UNK	F0038
BANGLADESH	UL NOT SPECIFIED	1991	VARIOUS GROUPS	B	ALL	.0	46239	HIV	UNK	W0076
BHUTAN	UL NOT SPECIFIED	1991	VARIOUS GROUPS	B	ALL	.0	6832	HIV	UNK	W0076
BRUNEI	+UL NOT SPECIFIED	1986-90	VARIOUS GROUPS	B	ALL	.0	24319	HIV	ELISA,WB	T0121
BURMA	UL NOT SPECIFIED	1992	PREGNANT WOMEN	F	ALL	2.2	499	HIV	UNK	F0055
	UH NOT SPECIFIED	1992	STD CLINIC PTS.	M	ALL	11.4	809	HIV	UNK	F0055
	OL SEVERAL TOWNS	1992	LOW RISK GROUPS	B	ALL	.1	1039	HIV	ELISA*3	F0055
	OH SEVERAL TOWNS	1992	HIGH RISK GROUPS	B	ALL	15.5	479	HIV	ELISA*3	F0055
CAMBODIA	+UL PHNOM PENH	1994	BLOOD DONORS	B	ALL	3.5	2729	HIV	UNK	T0115
	+UH PHNOM PENH & PR	1992	PROSTITUTES	F	ALL	9.2	207	HIV	WB	L0165
CHINA, MAINLAND	+UL DEHONG	1986-93	PREGNANT WOMEN	F	ALL	0.1	4113	HIV	UNK	C0178
	+UH DEHONG	1986-93	IVDU	B	ALL	20.4	2788	HIV	UNK	C0178

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Table 3: Detailed Listing of Estimates of HIV-1 &amp; 2 Seroprevalence, by Residence and Risk Factor, for Developing Countries: Circa 1993

REGION/ COUNTRY	RISK GEOGRAPHIC AREA AREA	YEAR	SUB-POPULATION	SEX AGE	PREV. RATE	SIZE	TYPE	TEST	SOURCE ID	
ASIA cont'd										
CHINA, TAIWAN	+UL NOT SPECIFIED	1994	VARIOUS GROUPS	B	ALL	.0	8828391	HIV1	ELISA*2, WB	W0097
	UH TAIPEI	1991-92	STD CLINIC PTS.	B	ALL	.4	19811	HIV?	ELISA, WB	H0092
	UH2 TAIPEI	1991-92	STD CLINIC PTS.	B	ALL	.0	19811	HIV2	ELISA, WB	H0092
FIJI	+UL NOT SPECIFIED	1986-90	VARIOUS GROUPS	B	ALL	.0	26042	HIV	UNK	G0155
GAZA STRIP	UL NOT SPECIFIED	1987-92	BLOOD DONORS	B	ALL	.0	23406	HIV	WB	M0314
HONG KONG	+UL NATIONAL	1994	BLOOD DONORS	B	ALL	.0	82842	HIV	UNK	L0156
	+UH NOT SPECIFIED	1994	STD CLINIC PTS.	B	ALL	0.1	14496	HIV	UNK	L0156
INDIA	+UL BOMBAY	1994	PREGNANT WOMEN	F	ALL	1.1	6535	HIV	ELISA*2	G0153
	UL2 BOMBAY	1992(?)	PREGNANT WOMEN	F	ALL	.1a	724	HIV2	ELISA, WB	J0022
	+UH BOMBAY	1993	PROSTITUTES	F	ALL	45.0b	N/A	HIV	UNK	S0288
	UH2 BOMBAY	1992(?)	PROSTITUTES	F	ALL	9.3	451	HIV2	ELISA	B0144
INDONESIA	UL NOT SPECIFIED	1991	VARIOUS GROUPS	B	ALL	.0	178737	HIV	UNK	W0076
	UH 13 PROVINCES	1991-92	PROSTITUTES - REG.	F	ALL	.0	12418	HIV	ELISA, WB	I0026
ISRAEL	UL EAST JERUSALEM	1989-92	BLOOD DONORS	B	ALL	.0	21222	HIV	WB	M0314
	UH TEL AVIV	1991(?)	PROSTITUTES	F	ALL	1.1	180	HIV	ELISA, WB	M0186
KOREA, NORTH	UL NOT SPECIFIED	1990	VARIOUS GROUPS	B	ALL	.0	61200	HIV	UNK	W0076
KOREA, SOUTH	+UL NOT SPECIFIED	1985-94	BLOOD DONORS	B	ALL	.0	7636020	HIV	ELISA, WB	S0301
	+UH NOT SPECIFIED	1985-94	PROSTITUTES	F	ALL	.0	140263	HIV	ELISA, WB	S0301
KUWAIT	UL NATIONAL	1988	BLOOD DONORS	B	ALL	.0d	150000	HIV	ELISA, WB	B0078
	UH NATIONAL	1988(?)	STD PTS.	M	ALL	.0d	305	HIV	UNK	M0101
LAOS	UL VIENTIANE	1993	BLOOD DONORS	B	ALL	.8	238	HIV	UNK	M0309
	+UH VIENTIANE	1990-93	PROSTITUTES	F	ALL	1.2	257	HIV	ELISA, WB	P0122
MALAYSIA	UL NOT SPECIFIED	1990	BLOOD DONORS	B	ALL	.0	193059	HIV	UNK	W0081
	UH KOTA BHARU	1992	IVDU	B	ALL	29.5	210	HIV	ELISA, WB	S0215
MALDIVES	UL NOT SPECIFIED	1991	VARIOUS GROUPS	B	ALL	.0	8311	HIV	UNK	W0076
MONGOLIA	+UL ULAANBAATAR	1987-93	PREGNANT WOMEN	F	ALL	.0	26863	HIV	UNK	M0340
	+UH ULAANBAATAR	1987-93	PROSTITUTES	F	ALL	.0	439	HIV	UNK	M0340
NEPAL	+UL NOT SPECIFIED	1988-90	PREGNANT WOMEN	F	ALL	.0	2681	HIV	UNK	G0154
	UH EIGHT SITES	1993	PROSTITUTES & STD PTS.	B	ALL	.8b	N/A	HIV	UNK	U0018
PAKISTAN	UL KARACHI	1987-89	BLOOD DONORS - PD.	B	ALL	.0d	1399	HIV	ELISA*2, WB	M0228

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Table 3: Detailed Listing of Estimates of HIV-1 &amp; 2 Seroprevalence, by Residence and Risk Factor, for Developing Countries: Circa 1993

REGION/ COUNTRY	RISK AREA	GEOGRAPHIC AREA	YEAR	SUB-POPULATION	SEX	AGE	PREV. RATE	SIZE	TYPE	TEST	SOURCE ID
ASIA cont'd											
PAPUA NEW GUINEA	UL	PORT MORESBY	1989-90	PREGNANT WOMEN	F	ALL	.0	748 HIV		ELISA,WB	00053
	UH	PORT MORESBY	1992	STD CLINIC PTS.	B	ALL	.3	2000 HIV		ELISA,WB	00053
	OL	GOROKA	1992	PREGNANT WOMEN	F	ALL	.0	761 HIV		ELISA,RAPID,WB	10028
	OH	WEWAK & GOROKA	1992	STD PTS.	B	ALL	.0c	700 HIV		ELISA,RAPID,WB	10028
PHILIPPINES	UH	NOT SPECIFIED	1992	PROSTITUTES	F	ALL	.1	12590 HIV		UNK	W0081
	OH	SEVERAL TOWNS	1988	HOSPITALITY GIRLS	F	ALL	.1d	14309 HIV		UNK	H0025
SAUDI ARABIA	UL	NATIONAL	1991(?)	BLOOD UNITS	B	ALL	.0	64294 HIV1		ELISA,WB	B0137
SINGAPORE	UL	NOT SPECIFIED	1992	BLOOD DONORS	B	ALL	.0	26579 HIV		UNK	W0081
	UH	NOT SPECIFIED	1993	STD CLINIC PTS.	B	ALL	.5	1754 HIV		ELISA,WB	C0160
SRI LANKA	UL	NOT SPECIFIED	1991	VARIOUS GROUPS	B	ALL	.0	195148 HIV		UNK	W0076
	UH	COLOMBO	1986-92	STD CLINIC PTS.	B	ALL	.1b	N/A HIV		UNK	A0105
SYRIA	UL	NATIONAL	1990	BLOOD DONORS	B	ALL	.0	52519 HIV		UNK	M0139
THAILAND	+UL	CENTRAL REGION	1994	PREGNANT WOMEN	F	ALL	2.2	13393 HIV		UNK	T0119
	+UH	CENTRAL REGION	1994	PROSTITUTES-DIRECT	F	ALL	33.3	3436 HIV		UNK	T0119
TURKEY	+UL	ISTANBUL	1993-94	BLOOD DONORS	B	ALL	.0	14157 HIV1		ELISA*2,WB	Y0022
	UH	NOT SPECIFIED	1989(?)	RISK GROUPS	B	ALL	1.6d	364 HIV1		ELISA,IFA,WB	B0088
VIETNAM	UL	HO CHI MINH CITY	1987-90	URBAN POPULATION	B	ALL	.0	20276 HIV		ELISA,WB	V0044
	UH	NOT SPECIFIED	1993	IVDU	B	ALL	8.7	1061 HIV		UNK	W0081
WEST BANK	UL	NOT SPECIFIED	1992	BLOOD DONORS	B	ALL	.0	8997 HIV		WB	M0314
LATIN AMERICA & CARIBBEAN											
ANTIGUA AND BARBUDA	UH	NOT SPECIFIED	1986-90	PROSTITUTES	F	ALL	1.7	1170 HIV		UNK	G0123
ARGENTINA	+UL	ROSARIO	1993	BLOOD DONORS - VOL.	B	ALL	0.1	28947 HIV		ELISA,WB	T0116
	UH	BUENOS AIRES	1991	PROSTITUTES	F	ALL	6.3	237 HIV1		ELISA,IFA	Z0030
	OL	NOT SPECIFIED	1991	BLOOD BANKS	B	ALL	.2	159008 HIV		ELISA,WB	F0037
	OH	NOT SPECIFIED	1991	PROSTITUTES	F	ALL	2.0	1833 HIV		ELISA,WB	F0037
THE BAHAMAS	UL	NOT SPECIFIED	1993	PREGNANT WOMEN	F	ALL	3.6	1019 HIV		ELISA	B0179
	UH	NOT SPECIFIED	1993	STD PTS.	B	ALL	18.4	228 HIV		ELISA	B0179
BARBADOS	UL	NOT SPECIFIED	1992	PREGNANT WOMEN	F	ALL	1.2c	777 HIV		ELISA	B0186
											B0187
											B0188
											B0189
	UH	NOT SPECIFIED	1988	STD PTS.	B	ALL	4.7d	184 HIV		UNK	G0123

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Table 3: Detailed Listing of Estimates of HIV-1 &amp; 2 Seroprevalence, by Residence and Risk Factor, for Developing Countries Circa 1993

REGION/ COUNTRY	RISK GEOGRAPHIC AREA AREA	YEAR	SUB-POPULATION	SEX	AGE	PREV. RATE	SIZE	TYPE	TEST	SOURCE ID
LATIN AMERICA cont'd										
BOLIVIA	UL NOT SPECIFIED	1988	PREGNANT WOMEN	F	ALL	.0d	372	HIV	IFA,WB	M0078
	UH NOT SPECIFIED	1988	PROSTITUTES	F	ALL	.0d	1094	HIV	IFA,WB	M0078
BRAZIL	+UL SAO PAULO CITY	1992	PREGNANT WOMEN	F	ALL	0.5	737	HIV	UNK	R0110
	UL2 SAO PAULO CITY	1990	PREGNANT WOMEN	F	ALL	.0	500	HIV2	ELISA	L0076
	UH 3 URBAN AREAS	1990-91	PROSTITUTES-LOW INCOME	F	ALL	24.0a	300	HIV1	ELISA,WB	F0047
	UH2 3 URBAN AREAS	1990-91	PROSTITUTES-LOW INCOME	F	ALL	9.7a	300	HIV2	ELISA,WB	F0047
	OL MINAS GERAIS ST.	1992	BLOOD DONORS - CONSEC.	B	ALL	.3	1877	HIV1	ELISA*2,WB	C0152
	OL2 MINAS GERAIS ST.	1992	BLOOD DONORS - CONSEC.	B	ALL	.0	1877	HIV2	ELISA*2,WB	C0152
	OH MINAS GERAIS ST.	1990	PROSTITUTES	F	ALL	.0b	64	HIV1	ELISA,WB	T0046
BRITISH VIRGIN ISLANDS	UL NOT SPECIFIED	1992	PREGNANT WOMEN	F	ALL	2.8b	36	HIV	UNK	B0206
CAYMAN ISLANDS	UL NOT SPECIFIED	1992	PREGNANT WOMEN	F	ALL	.0	462	HIV	UNK	G0123
CHILE	UL SANTIAGO	1991	BLOOD DONORS	B	ALL	.0	82186	HIV	UNK	L0123
	UH SANTIAGO	1991	STD CLINIC PTS.	B	ALL	1.0	9893	HIV	UNK	L0123
COLOMBIA	+UL CALI	1992	PREGNANT WOMEN	F	ALL	0.0	183	HIV	ELISA,WB	B0244
	+UH CARTAGENA	1992	PROSTITUTES	F	ALL	1.1	180	HIV1,2	ELISA,WB	M0133
COSTA RICA	UL SAN JOSE	1991	GENERAL POPULATION	B	ALL	1.1c	6628	HIV1	ELISA	L0125
	UH SAN JOSE	1990	STD PTS.	B	ALL	4.3c	325	HIV1	ELISA,WB	L0128
CUBA	UL NATIONAL	1991	PREGNANT WOMEN	F	ALL	.0	190446	HIV1	ELISA,WB	M0287
	UL2 NATIONAL	1988(?)	GENERAL POPULATION	B	ALL	.0d	7215	HIV2	ELISA,WB	M0131
	UH NATIONAL	1991	STD PTS.	B	ALL	.0	81889	HIV1	ELISA,WB	M0297
DOMINICAN REPUBLIC	+UL SANTO DOMINGO	1993	PREGNANT WOMEN	F	ALL	1.2b	N/A	HIV	UNK	G0145
	+UH SANTO DOMINGO	1993	PROSTITUTES	F	ALL	11.1b	N/A	HIV	UNK	G0145
ECUADOR	UL QUITO	1992	BLOOD DONORS	B	ALL	.0b	N/A	HIV1	ELISA,WB	R0093
	+UH GUAYAQUIL	1993	STD PTS.	B	ALL	3.6	1395	HIV1	ELISA,WB	R0104
EL SALVADOR	+UL NOT SPECIFIED	1993	GENERAL POPULATION	B	ALL	0.7b	N/A	HIV1	ELISA,WB	S0300
	UH SAN SALVADOR	1991	PROSTITUTES	F	ALL	2.2	452	HIV1	ELISA	E0036
GRENADA	UL NOT SPECIFIED	1991	PREGNANT WOMEN	F	ALL	.0	112	HIV	ELISA	G0140
	UH NOT SPECIFIED	1991	STD PTS.	B	ALL	2.4b	41	HIV	ELISA	G0139
GUATEMALA	UL GUATEMALA CITY	1990-91	PREGNANT WOMEN	F	ALL	.0	500	HIV	ELISA,WB	M0205
	+UH GUATEMALA CITY	1990-93	STD CLINIC PTS. W/ GU	B	ALL	8.5	130	HIV	ELISA,WB	M0371
GUYANA	UL NOT SPECIFIED	1992	PREGNANT WOMEN	F	ALL	6.9	145	HIV	ELISA	G0137
	UH NOT SPECIFIED	1993	PROSTITUTES	F	ALL	25.0	108	HIV	UNK	F0065

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REGION/ COUNTRY	RISK GEOGRAPHIC AREA AREA	YEAR	SUB-POPULATION	SEX	AGE	PREV. RATE	SIZE	TYPE	TEST	SOURCE ID
LATIN AMERICA cont'd										
HAITI	UL CITE SOLEIL	1992(?)	HEALTHY ADULTS	B	ALL	15.7	4133	HIV	ELISA/RAPID, WB	B0138
	UH PORT-AU-PRINCE	1989(?)	PROSTITUTES	F	ALL	41.9d	129	HIV1	ELISA	G0048
	OL NORTH RURAL AREA	1990	PREGNANT WOMEN	F	ALL	4.0	500	HIV	WB	A0097
HONDURAS	UL TEGUCIGALPA	1991	PREGNANT WOMEN	F	ALL	.2	1292	HIV	ELISA, WB	M0242
	UH SAN PEDRO SULA	1989	PROSTITUTES	F	ALL	19.8	247	HIV	UNK	Z0035
JAMAICA	+UL NOT SPECIFIED	1992	PREGNANT WOMEN	F	ALL	0.4b	N/A	HIV	UNK	F0072
	+UH KINGSTON	1993	STD CLINIC PTS.	B	ALL	4.3b	N/A	HIV	UNK	F0072
MEXICO	+UL NATIONAL	1994(?)	PREGNANT WOMEN	F	ALL	0.6b	N/A	HIV	UNK	G0151
	+UH NATIONAL	1994(?)	PROSTITUTES	F	ALL	5.0b	N/A	HIV	UNK	G0151
MONTSERRAT	UL NOT SPECIFIED	1992	BLOOD DONORS	B	ALL	.0c	275	HIV	ELISA	M0278 M0279 M0280
NICARAGUA	UL MANAGUA	1990-91	BLOOD DONORS	B	ALL	.0	15761	HIV1	UNK	N0110
	UH MANAGUA	1990-91	PROSTITUTES	F	ALL	1.6b	61	HIV1	UNK	N0110
PARAGUAY	UL ASUNCION	1992	PREGNANT WOMEN	F	ALL	.0	1500	HIV	ELISA, WB	V0058
	UH ASUNCION	1987-90	PROSTITUTES	F	ALL	.1	2760	HIV	ELISA, WB	C0112
PERU	UL NOT SPECIFIED	1987-88	BLOOD DONORS - VOL.	B	ALL	.1d	32616	HIV	ELISA, WB	A0014
	UH NOT SPECIFIED	1987-88	PROSTITUTES	F	ALL	.3d	2335	HIV	ELISA, WB	A0014
ST. KITTS/ NEVIS	UL NOT SPECIFIED	1992	PREGNANT WOMEN	F	ALL	2.0c	152	HIV	ELISA	S0227 S0241 S0242
ST. LUCIA	UL NOT SPECIFIED	1992	BLOOD DONORS	B	ALL	.0c	1025	HIV	ELISA	S0218 S0220 S0221
	UH NOT SPECIFIED	1992	STD PTS.	B	ALL	1.2c	2219	HIV	ELISA	S0217 S0218 S0220 S0221
ST. VINCENT & THE GRENADINES	UL NOT SPECIFIED	1992	PREGNANT WOMEN	F	ALL	.2	429	HIV	ELISA	S0235
	UH NOT SPECIFIED	1992	STD PTS.	B	ALL	1.4c	1443	HIV	ELISA	S0234 S0235 S0236
SURINAME	UL NOT SPECIFIED	1991	PREGNANT WOMEN	F	ALL	.8c	2391	HIV	ELISA	S0244 S0245
	UH NOT SPECIFIED	1990	PROSTITUTES	F	ALL	2.6	157	HIV	ELISA	S0246
TRINIDAD & TOBAGO	UL NOT SPECIFIED	1990	PREGNANT WOMEN	F	ALL	.3	1000	HIV	UNK	F0065
	UH PORT OF SPAIN	1991-92	STD CLINIC PTS.	B	ALL	14.7	1664	HIV1	UNK	C0143

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REGION/ COUNTRY	RISK GEOGRAPHIC AREA AREA	YEAR	SUB-POPULATION	SEX	AGE	PREV. RATE	SIZE	TYPE	TEST	SOURCE ID
LATIN AMERICA cont'd										
URUGUAY	UL MONTEVIDEO	1991-92	BLOOD DONORS	B	ALL	.1	10100	HIV1,2	ELISA,WB	A0118 S0209
	UH NOT SPECIFIED	1992	PROSTITUTES	F	ALL	5.6	2500	HIV	UNK	
VENEZUELA	UL NOT SPECIFIED	1992(?)	BLOOD DONORS	B	ALL	.1	1589	HIV1	ELISA,WB	E0024 E0024
	UH NOT SPECIFIED	1992(?)	PROSTITUTES	F	ALL	6.1b	99	HIV1	ELISA,WB	

a Figure shown includes co-infection of HIV1 & HIV2 and should not therefore be combined with other figures.

b Data are best available but are not necessarily reliable due to small sample size (<100).

c Data combined.

d Data more than 4 years old, may not reflect current situation.

+ Data changed and/or added.

**Risk Area Codes:**

UL -- Urban low risk

UH -- Urban high risk

OL -- Outside city low risk

OH -- Outside city high risk

2 -- Data for HIV2

SOURCE: U.S. Bureau of the Census, HIV/AIDS Surveillance Data Base, 12/94 Update.



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