



## CAMEROON

POPULATION-BASED HIV IMPACT ASSESSMENT  
CAMPHIA 2024-2025

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"Your Action Matters! Ending HIV Together"

The Cameroon Population-based HIV Impact Assessment (CAMPHIA 2024-2025) was a household-based national survey among adults (defined as those aged 15 years and older) to measure the impact of the national HIV response. Conducted from September 2024 through January 2025, CAMPHIA 2024-2025 offered HIV counseling and testing with return of results and collected information about uptake of HIV care and treatment services. Like CAMPHIA 2017-2018, CAMPHIA 2024-2025 estimated national HIV incidence and national and regional HIV prevalence among adults, as well as national and regional prevalence of viral load suppression (VLS), defined as HIV RNA <1,000 copies per milliliter (mL) among adults living with HIV. The results of these surveys also provide information on national and regional progress toward HIV epidemic control in Cameroon, including progress towards achieving the global and national 95-95-95 targets.

CAMPHIA 2024-2025 was led by the Government of the Republic of Cameroon, primarily through the Ministry of Public Health and the National Institute of Statistics (NIS). The survey was conducted

with funding from the United States (US) President's Emergency Plan for AIDS Relief (PEPFAR) and through technical assistance and partnership with the US Centers for Disease Control and Prevention (CDC). CAMPHIA 2024-2025 was implemented by the Cameroon Baptist Convention Health Board, NIS, and ICAP at Columbia University in collaboration with Government of Cameroon entities, including the Division of Health Operational Research, the National AIDS Control Committee, the National Public Health Laboratory, the Department of Disease, Epidemics and Pandemics Control, the Department of Pharmacy, Medicines and Laboratory, the Research Center on Emerging & Re-emerging Diseases, the Chantal Biya International Reference Centre for Research on HIV/AIDS Prevention and Management, as well as district, regional, and referral hospitals, and local government authorities. The Government of Cameroon, local civil society organizations, and international development partners participated in steering committee meetings and technical working groups during survey implementation.

## KEY FINDINGS

HIV Indicator	Women	95% CI	Men	95% CI	Total	95% CI
<b>Annual incidence (%)</b>						
15-49 years	0.24	0.04-0.43	0.06	0.00-0.15	0.15	0.04-0.27
15 years and older	0.20	0.03-0.37	0.06	0.00-0.14	0.13	0.03-0.23
<b>Prevalence (%)</b>						
15-49 years	3.6	3.1-4.1	1.6	1.3-2.0	2.6	2.3-3.0
15 years and older	4.0	3.5-4.5	2.0	1.7-2.3	3.0	2.7-3.4
<b>Viral load suppression (%)</b>						
15-49 years	67.6	62.3-72.9	62.7	53.6-71.8	66.1	61.2-71.1
15 years and older	72.0	67.9-76.0	72.0	64.9-79.1	72.0	68.0-75.9

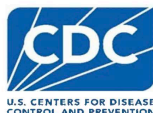
Viral load suppression is defined as HIV RNA <1,000 copies per milliliter among all adults living with HIV.

Annual incidence of HIV among adults aged 15-49 years was 0.15%: 0.24% among women and 0.06% among men. Annual incidence of HIV among adults aged 15 years and older in Cameroon was 0.13%, which corresponds to approximately 21,000 (95% CI: 5,000-37,000) new cases of HIV per year among adults.

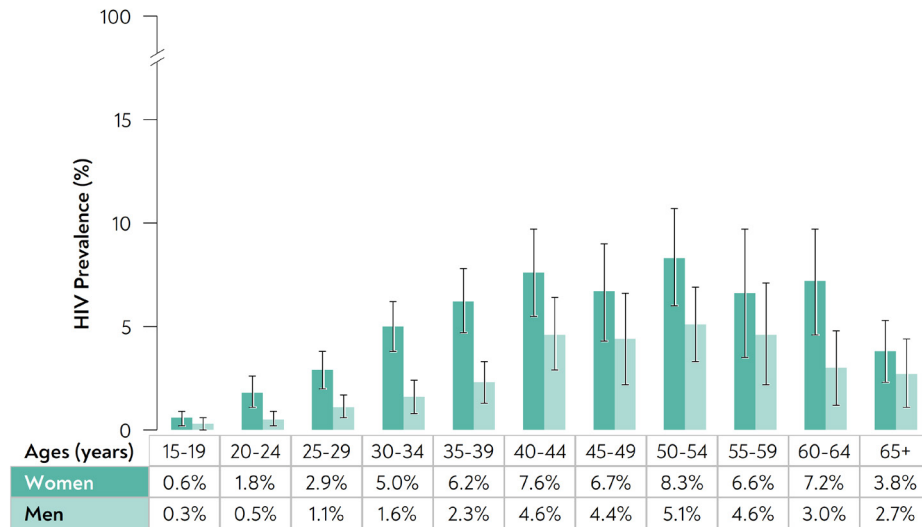
Prevalence of HIV among adults aged 15-49 years in Cameroon was 2.6% and was higher among women, at 3.6%, than men, at 1.6%. HIV prevalence among adults aged 15 years and older in Cameroon was 3.0%, which corresponds to approximately 501,000 (95% CI: 444,000-558,000) adults living with HIV.

The prevalence of VLS among adults aged 15 years and older living with HIV in Cameroon was 72.0%: 72.0% among women and 72.0% among men. Note: These estimates of VLS are among all adults living with HIV regardless of their knowledge of HIV status or use of antiretroviral therapy (ART).

See [phia.icap.columbia.edu](https://phia.icap.columbia.edu) for more details.



## HIV PREVALENCE



Error bars represent 95% CIs.

### HIV PREVALENCE, by AGE and SEX

Among adults aged 15 years and older, HIV prevalence ranged from 0.6% among adolescent girls aged 15-19 years to 8.3% among women aged 50-54 years, and from 0.3% among adolescent boys aged 15-19 years to 5.1% among men aged 50-54 years.

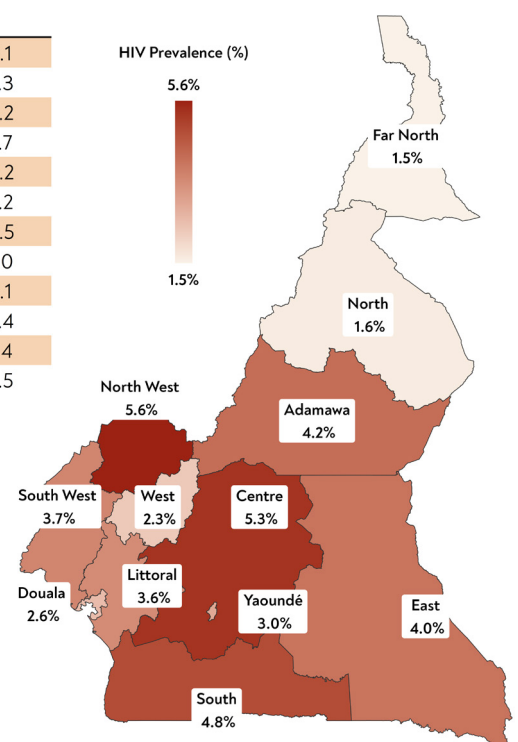
HIV prevalence was markedly higher among women than men in each 5-year age group from 20-24 years through 35-39 years.

### HIV PREVALENCE, by REGION

Among adults aged 15-49 years, HIV prevalence ranged from 1.4% in Far North to 4.6% in Centre (excluding Yaoundé). Seven of the 12 survey regions—Adamawa, Centre (excluding Yaoundé), East, Littoral (excluding Douala), North West, South, and South West—had HIV prevalence point estimates above the national point estimate of 2.6% among adults aged 15-49 years.

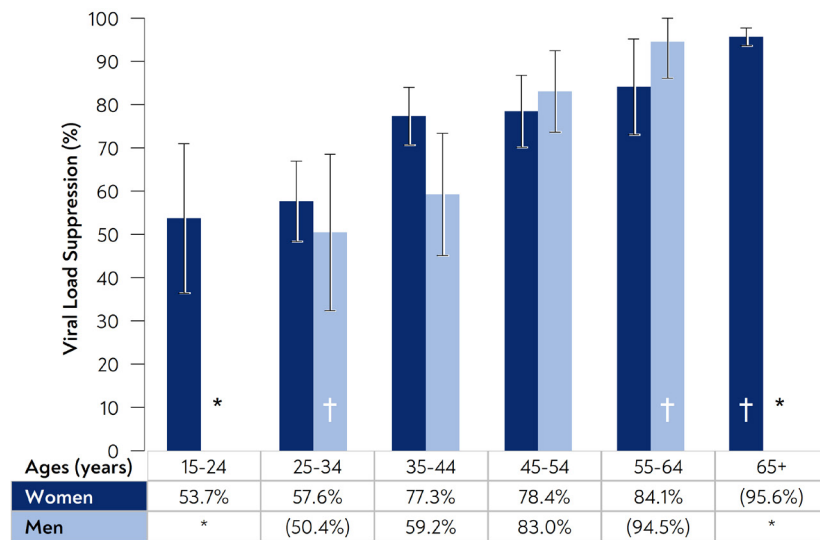
HIV prevalence among adults aged 15 years and older ranged from 1.5% in Far North to 5.6% in North West. Seven of the 12 survey regions—Adamawa, Centre (excluding Yaoundé), East, Littoral (excluding Douala), North West, South, and South West—had HIV prevalence point estimates above the national point estimate of 3.0% among adults aged 15 years and older.

National	HIV Prevalence (%)		HIV Prevalence (%)	
	15-49 years	95% CI	15 years and older	95% CI
Cameroon	2.6	2.3-3.0	3.0	2.7-3.4
<b>Survey Region</b>				
Adamawa	3.9	2.9-4.8	4.2	3.3-5.1
Centre (Excluding Yaoundé)	4.6	3.5-5.8	5.3	4.2-6.3
Douala	2.2	1.6-2.8	2.6	2.0-3.2
East	3.8	2.0-5.7	4.0	2.4-5.7
Far North	1.4	0.8-2.1	1.5	0.8-2.2
Littoral (Excluding Douala)	3.3	2.2-4.5	3.6	2.9-4.2
North	1.5	0.5-2.4	1.6	0.8-2.5
North West	4.1	1.5-6.7	5.6	3.1-8.0
South	4.4	3.1-5.8	4.8	3.5-6.1
South West	3.0	2.2-3.7	3.7	2.9-4.4
West	1.8	0.8-2.9	2.3	1.3-3.4
Yaoundé	2.4	1.8-2.9	3.0	2.4-3.5



Note: This map reports HIV prevalence among adults aged 15 years and older.

## VIRAL LOAD SUPPRESSION AMONG ADULTS LIVING WITH HIV



Error bars represent 95% CIs.

Estimates based on a denominator between 25 and 49 survey participants are included in parentheses and indicated by a dagger in the graph and should be interpreted with caution, while estimates based on a denominator less than 25 survey participants have been suppressed and are indicated with an asterisk.

## VIRAL LOAD SUPPRESSION AMONG ADULTS LIVING WITH HIV, by AGE and SEX

Among adults aged 15 years and older living with HIV in Cameroon, VLS prevalence ranged from 53.7% among adolescent girls and young women aged 15-24 years to 95.6%<sup>†</sup> among women aged 65 years and older, and from 50.4%<sup>†</sup> among men aged 25-34 years to 94.5%<sup>†</sup> among men aged 55-64 years.

There were marked differences by age but not sex. Women aged 25-34 years had a lower VLS prevalence than women in older age groups, while men in the age groups of 25-34<sup>†</sup> and 35-44 years had a lower VLS prevalence than older age groups.

<sup>†</sup> Note: This estimate was based on a denominator between 25 and 49 survey participants and should be interpreted with caution

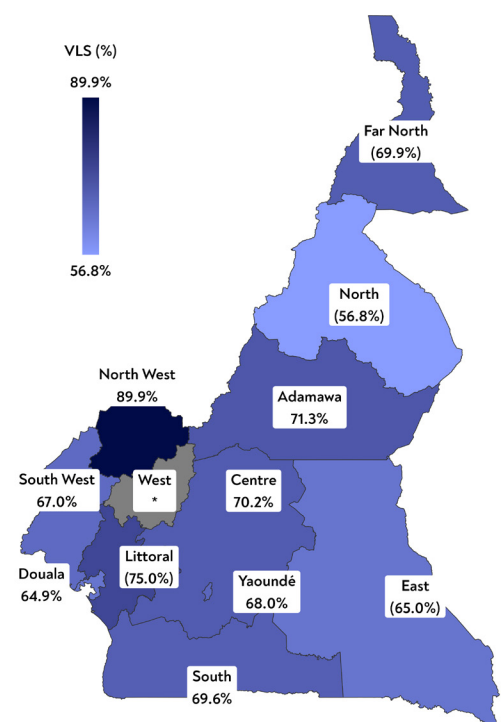
## VIRAL LOAD SUPPRESSION AMONG ADULTS LIVING WITH HIV, by REGION

Among adults aged 15 years and older living with HIV, VLS prevalence ranged from 56.8%<sup>†</sup> in North to 89.9% in North West. Nine of the 11 survey regions for which VLS prevalence estimates could be reported had point estimates below the national VLS prevalence point estimate of 72.0%. The estimate for West was suppressed because the denominator included fewer than 25 survey participants.

<sup>†</sup> Note: This estimate was based on a denominator between 25 and 49 survey participants and should be interpreted with caution.

National	Viral Load Suppression (%)	95% CI
Cameroon	72.0	68.0-75.9
Survey Region		
Adamaoua	71.3	54.1-88.5
Centre (excluding Yaoundé)	70.2	61.9-78.6
Douala	64.9	54.5-75.4
East	(65.0)	(47.3-82.7)
Far North	(69.9)	(54.0-85.8)
Littoral (excluding Douala)	(75.0)	(57.3-92.7)
North	(56.8)	(39.3-74.3)
North West	89.9	81.4-98.4
South West	69.6	56.3-82.8
South West	67.0	57.2-76.9
West	*	*
Yaoundé	68.0	59.6-76.3

In both the table and the map, estimates based on a denominator between 25 and 49 survey participants are included in parentheses and should be interpreted with caution, while estimates based on a denominator less than 25 survey participants have been suppressed and are indicated with an asterisk.



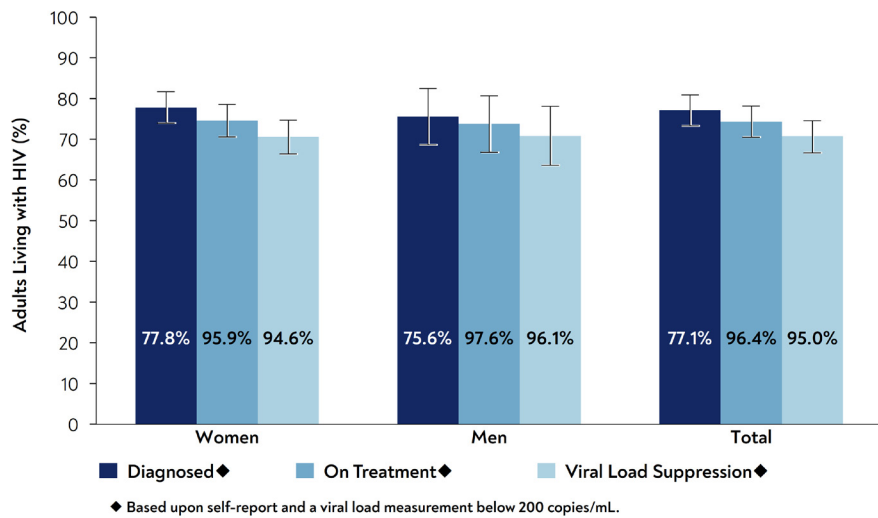
VLS=viral load suppression.

## ACHIEVEMENT OF THE 95-95-95 TARGETS AMONG ADULTS LIVING WITH HIV (SEE NOTE BELOW\*)

**95-95-95: Treatment targets to help end the HIV epidemic**

The global and national targets for 2025 aim for 95% of all people living with HIV to know their HIV status; 95% of all people diagnosed with HIV to receive sustained ART; and 95% of all people receiving ART to achieve VLS.

## ACHIEVEMENT OF THE 95-95-95 TARGETS, by SEX



Percentages shown in the graph refer to the conditional 95-95-95 targets described in the text above and to the right. For the conditional 95-95-95, the denominator for the second and third 95 is the value of the preceding 95 estimate. The heights of the bars represent the unconditional (overall) percentages for each indicator among all adults living with HIV. For the overall 95-95-95, the denominator for all three 95s is the overall population of adults living with HIV in Cameroon. Error bars represent 95% CIs.

**Diagnosed:** In Cameroon, 77.1% of adults (ages 15 years and older) living with HIV were aware of their HIV-positive status: 77.8% of women and 75.6% of men. Individuals were classified as aware if they reported their HIV-positive status or had a viral load below 200 copies/mL.

**On Treatment:** Among adults living with HIV who were aware of their status, 96.4% were on ART: 95.9% of women and 97.6% of men. Individuals were classified as being on ART if they reported currently being on treatment or had a viral load below 200 copies/mL.

**Viral Load Suppression:** Among adults living with HIV who were on treatment, 95.0% had suppressed viral loads: 94.6% of women and 96.1% of men.

## CONCLUSIONS

- National HIV incidence among adults aged 15-49 years was 0.15%. There were approximately 21,000 (95% CI: 5,000-37,000) new HIV infections annually among adults aged 15 years and older. Nearly three out of every four new infections occurred among women, highlighting the continued need to reduce new HIV infections among women and adolescent girls.
- National HIV prevalence among adults aged 15-49 years was 2.6%. There were an estimated 501,000 (95% CI: 444,000-558,000) adults aged 15 years and older living with HIV.
- Cameroon achieved the second of the global and national 95-95-95 targets—treatment coverage among those diagnosed—and the third target, VLS among those on treatment. (In contrast to other PHIA, CAMPHIA 2024-2025 used viral load adjustment to calculate the 95-95-95 estimates.\*) However, awareness of HIV-positive status remained below the first 95 target, limiting overall progress toward HIV epidemic control. This, in turn, calls for more intensified efforts on HIV case finding within communities in Cameroon.
- Prevalence of VLS among all adults living with HIV varied widely across regions, indicating differences in population-level viral suppression and potential variation in HIV transmission risk.
- HIV remains a substantial public health challenge in Cameroon. Overall, these findings highlight the importance of early HIV diagnosis among both men and women to reduce transmission and support treatment outcomes among adults living with HIV in Cameroon. These efforts would help the Cameroon government in fast-tracking progress toward HIV epidemic control and elimination.

## RESPONSE RATES, HIV TESTING METHODS, AND VIRAL LOAD ADJUSTMENT OF THE 95-95-95 ESTIMATES

Of 13,555 eligible households, 88.2% completed the household interview. Among 29,029 eligible adults (15,462 women and 13,567 men), 25,083 (13,498 women and 11,585 men)—or 86.4% of those eligible—were interviewed and tested for HIV. The overall response rate was 76.2%: 77.0% for women and 75.3% for men.

Testing for HIV prevalence was conducted in each household using a serological rapid diagnostic testing algorithm based on Cameroon'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 qualitative detection of antiretrovirals (ARV). A laboratory-based incidence testing algorithm (HIV-1 limiting antigen-avidity assay with correction for viral load and detectable ARVs) was used to distinguish recent from long-term HIV infection. Incidence estimates were obtained using the formula recommended by the WHO Incidence Working Group and Consortium for Evaluation and Performance of Incidence Assays. Survey weights were utilized for all estimates.

\*Note: For the 95-95-95 estimates in the Summary Sheet, PHIA surveys typically report awareness of HIV status and treatment coverage based on self-report combined with ARV detection in blood. CAMPHIA 2024-2025 used self-report combined with a viral load measurement <200 copies/mL to determine awareness of HIV status and treatment coverage for the 95-95-95 estimates—an approach that a prior study (Young et al., 2020; [doi: 10.1097/QAD.0000000000002453](https://doi.org/10.1097/QAD.0000000000002453)) suggests may serve as an alternative method. Interpretation of the 95-95-95 estimates should therefore take this methodological consideration into account.