The 2006-07 Swaziland Demographic and Health Survey (SDHS) included HIV testing of over 13,000 men, women, and children. According to the survey, 26 percent of Swazis age 15-49 are HIV-infected.

HIV prevalence is higher among women than men in both urban and rural areas. Overall, almost one in three women and one in five men are HIV-positive. HIV prevalence is higher in urban areas than in rural areas for both men and women.

HIV prevalence among women is consistently high across all educational levels. There is no clear relationship between education and prevalence among men.

Five percent of children age 2-4 are HIV-positive. Prevalence is slightly higher in younger children than older children.

HIV prevalence decreases as women and men age. However, more than one in four adults age 50-54 is HIV-positive.

HIV prevalence is consistently high across all 4 regions, ranging from 23 percent in Shiselweni to 29 percent in Hhohho.

HIV prevalence among women is consistently high across all education levels. There is no clear relationship between education and prevalence among men.
For both women and men, HIV infection rates are higher among those who are widowed or divorced/separated than among those who have never married or are currently married. More than half of widowed women and two-thirds of widowed men are HIV-positive.

Among women, HIV prevalence increases with the number of sexual partners. Women who had three or more sexual partners in the year before the survey are twice as likely to be HIV-positive as those with no partners. There is no clear relationship between number of sexual partners in the last 12 months with prevalence among men.

**HIV Prevalence by Marital Status**

<table>
<thead>
<tr>
<th>Marital Status</th>
<th>Women 15-49</th>
<th>Men 15-49</th>
</tr>
</thead>
<tbody>
<tr>
<td>Never married</td>
<td>26</td>
<td>10</td>
</tr>
<tr>
<td>Married/living together</td>
<td>33</td>
<td>36</td>
</tr>
<tr>
<td>Divorced/separated</td>
<td>51</td>
<td>55</td>
</tr>
<tr>
<td>Widowed</td>
<td>56</td>
<td>68</td>
</tr>
</tbody>
</table>

**HIV Prevalence by Number of Sexual Partners in Last 12 months**

<table>
<thead>
<tr>
<th>Number of Sexual Partners</th>
<th>Women 15-49</th>
<th>Men 15-49</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>33</td>
<td>29</td>
</tr>
<tr>
<td>1</td>
<td>42</td>
<td>26</td>
</tr>
<tr>
<td>2</td>
<td>48</td>
<td>27</td>
</tr>
<tr>
<td>3+</td>
<td>65</td>
<td>36</td>
</tr>
</tbody>
</table>

For more information on the results of the 2006-07 Swaziland Demographic and Health Survey, please contact:

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The 2006-07 SDHS was conducted by the Central Statistical Office (CSO) at the request of the Ministry of Health and Social Welfare. Macro International Inc. provided technical assistance in the design, implementation, and analysis of the survey as part of the Demographic and Health Surveys project (MEASURE DHS). The Human Sciences Research Council (HSRC) of South Africa assisted in the design of the survey and the Global Clinical and Viral Laboratory (GCVL) of South Africa assisted with the training and laboratory processing for the HIV testing. Funding for the survey was provided by the Government of the Kingdom of Swaziland, the United States Agency for International Development (USAID), the CDC-Global AIDS Programme under the United States President’s Emergency Plan for AIDS Relief (PEPFAR), the National Emergency Response Council on HIV/AIDS (NERCHA), HIV/AIDS Prevention and Care (HAPAC), UNAIDS, UNFPA, UNICEF, WHO, Italian Cooperation, and Population Services International (PSI).

**HIV Prevalence rates and methodology:**
HIV prevalence data were obtained from fingerstick dried blood spots voluntarily provided by women and men age 18 and over who were interviewed in the 2006-07 SDHS and children age 2-14 whose parents gave consent and were members of the households interviewed in the survey. Children age 15-17 were also asked to provide consent, in addition to obtaining parental consent. Of the 15,144 eligible subjects, 85% provided blood spots. Response rates were higher in rural areas than urban areas (88% vs. 76%).