

High Rates of Vertical HIV Transmission Among Mothers and Adolescent Girls in Papua New Guinea, 2026

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Background:

Despite sustained national efforts, mother-to-child transmission of HIV remains a significant public health challenge in Papua New Guinea. Adolescent girls and young mothers are disproportionately affected, facing structural and service-level barriers to timely antenatal care, HIV testing, and treatment initiation.

Methods:

We analysed routine service data from 21 antenatal clinics across the National Capital District and Eastern Highlands Province in 2026. Key indicators included HIV prevalence among pregnant women, antiretroviral therapy (ART) initiation, and vertical transmission rates. Disaggregated analysis compared outcomes between adolescent mothers (<20 years) and older women.

Results:

Among 3,500 pregnant women attending antenatal care, 1,020 (29%) were HIV-positive. Of these, 780 (77%) initiated ART. Overall vertical transmission remained high, with significantly higher rates among adolescent mothers (21%) compared to older women (13%). Contributing factors included late presentation to antenatal care, inconsistent viral load monitoring, and periodic HIV commodity stockouts. Facilities offering youth-friendly services demonstrated improved outcomes, with lower transmission rates (12% vs 18%), suggesting the effectiveness of differentiated service delivery models.

Conclusion:

Vertical HIV transmission in Papua New Guinea remains unacceptably high, particularly among adolescent mothers. Targeted interventions are urgently required, including earlier engagement in antenatal care, scale-up of youth-friendly services, strengthened supply chains, and improved viral load monitoring. Addressing the specific needs of adolescent girls is critical to reducing transmission and improving maternal and child health outcomes.

Disclosure of Interest Statement

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