Regional Posters

- Zero new infections:
  Is there a resurgence of the epidemic in Asia? ........................................page 7

- Zero AIDS-related deaths:
  Current business model will not get us to 2015 treatment targets........page 8

- HIV epidemic profiles in Asia-Pacific ..........................................................page 9

- Shared responsibility:
  Asia-Pacific investing in AIDS ......................................................................page 10

- Zero discrimination:
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Country Posters

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- Bangladesh ................................................................. page 25
- Cambodia ................................................................. page 39
- China ................................................................. page 53
- Fiji ................................................................. page 65
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- Indonesia ................................................................. page 89
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Regional and country posters were prepared by UNAIDS Regional Support Team Asia-Pacific, UNAIDS Country Offices, and HIV and AIDS Data Hub for Asia-Pacific based on the following published sources of data:

1) HIV Sentinel Surveillance Surveys
2) Behavioural Surveillance Surveys
3) Integrated Bio-behavioural Surveys
4) United Nations General Assembly Special Session on HIV and AIDS (UNGASS) Country Progress Reports 2008 and 2010
5) Global AIDS Response Progress Reports 2012
REGIONAL POSTERS FOR ASIA AND THE PACIFIC
ZERO NEW INFECTIONS

Is there a resurgence of the epidemic in Asia?

- **Estimate 2011:** 370,000
- **Estimate by 2015 based on overall declining trend:** 290,000
- **Estimate by 2015 based on trend of last two years:** 440,000

**Target 2015:** 180,000

FALLS SHORT OF TARGET BY 110,000 OR 260,000

- **Estimated new HIV infections**
- **Estimated trend to 2015 (Epidemic expands)**
- **Estimated trend to 2015 (Epidemic declines)**
- **50% reduction by 2015**
ZERO AIDS-RELATED DEATHS

Current business model will not get us to 2015 treatment targets

- Estimate 2011: 1.1 million
- Target 2015: 2.3 million
- Estimate 2015 based on current trend: 1.8 million

Falls short of target by ~500 000

Number of people receiving ART  by  2011
Number of people receiving ART 2015 (with the current trend )
2015 target
Urgent action needed to control expanding epidemics and keep up prevention in declining epidemics

<table>
<thead>
<tr>
<th>Epidemic Pattern</th>
<th>Adults and children newly Infected</th>
<th>Adults and children living with HIV</th>
<th>Adults and children AIDS Deaths</th>
<th>Countries</th>
</tr>
</thead>
<tbody>
<tr>
<td>Declining Epidemic: New infections and PLHIV declining, deaths stable.</td>
<td><img src="image1" alt="Declining Trend" /></td>
<td><img src="image2" alt="Declining Trend" /></td>
<td><img src="image3" alt="Stabilizing Trend" /></td>
<td>India, Thailand, Myanmar, Nepal, Cambodia</td>
</tr>
<tr>
<td>Maturing Epidemic: New infections declining, PLHIV still increasing or stabilizing, death trends vary.</td>
<td><img src="image4" alt="Declining Trend" /></td>
<td><img src="image5" alt="Expanding Trend" /> or <img src="image3" alt="Stabilizing Trend" /></td>
<td>varies</td>
<td>China, Viet Nam Malaysia, PNG</td>
</tr>
<tr>
<td>Expanding Epidemic: New infections, PLHIV and deaths increasing.</td>
<td><img src="image6" alt="Expanding Trend" /></td>
<td><img src="image6" alt="Expanding Trend" /></td>
<td><img src="image6" alt="Expanding Trend" /></td>
<td>Indonesia, Pakistan, Philippines</td>
</tr>
<tr>
<td>Latent Epidemic: New infections increasing or stable at around 1,000 per year, PLHIV increasing but &lt; 10,000, and deaths &lt; 500.</td>
<td><img src="image6" alt="Expanding Trend" /> or <img src="image3" alt="Stabilizing Trend" /></td>
<td><img src="image6" alt="Expanding Trend" /></td>
<td>&lt;500</td>
<td>Bangladesh, Lao PDR, Afghanistan, Sri Lanka,</td>
</tr>
<tr>
<td>Low Prevalence: Low levels of HIV infections detected but risk factors exist.</td>
<td>&lt;500</td>
<td>&lt;1,000</td>
<td>low</td>
<td>Bhutan, Fiji, Maldives, Mongolia Timor Leste, PICT</td>
</tr>
</tbody>
</table>

**Key:**
- ![Expanding Trend](image6) Expanding Trend
- ![Declining Trend](image4) Declining Trend
- ![Stabilizing Trend](image3) Stabilizing Trend

**Source:** UNAIDS Regional Support Team Asia and the Pacific- HIV and AIDS Data Hub, Country epidemic patterns from DRAFT HIV estimates and projections data for the UNAIDS Report on the Global Epidemic 2012
Shared Responsibility: Asia-Pacific investing in AIDS

HIV expenditure from domestic sources, Asia-Pacific (Preliminary data 2011)

<table>
<thead>
<tr>
<th>Country</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Malaysia (2011)</td>
<td>92</td>
</tr>
<tr>
<td>China (2011)</td>
<td>89</td>
</tr>
<tr>
<td>Thailand (2011)</td>
<td>83</td>
</tr>
<tr>
<td>Sri Lanka (2010)</td>
<td>48</td>
</tr>
<tr>
<td>Indonesia (2010)</td>
<td>40</td>
</tr>
<tr>
<td>Pakistan (2011)</td>
<td>37</td>
</tr>
<tr>
<td>Philippines (2011)</td>
<td>31</td>
</tr>
<tr>
<td>Mongolia (2011)</td>
<td>30</td>
</tr>
<tr>
<td>Fiji (2011)</td>
<td>21</td>
</tr>
<tr>
<td>PNG (2010)</td>
<td>24</td>
</tr>
<tr>
<td>Vietnam (2010)</td>
<td>15</td>
</tr>
<tr>
<td>India (2011-12)</td>
<td>10</td>
</tr>
<tr>
<td>Myanmar (2011)</td>
<td>9</td>
</tr>
<tr>
<td>Lao PDR (2011)</td>
<td>7</td>
</tr>
<tr>
<td>Cambodia (2010)</td>
<td>4</td>
</tr>
<tr>
<td>Bangladesh (2011)</td>
<td>4</td>
</tr>
<tr>
<td>Afghanistan (2009)</td>
<td>3</td>
</tr>
<tr>
<td>Nepal (2009)</td>
<td>1</td>
</tr>
</tbody>
</table>

Upper-middle income
Lower-middle income
Low income

90% Committed for NACP IV
Punitive laws hindering the HIV response in Asia and the Pacific

Examples of recent progress

Viet Nam: Ending compulsory detention of sex workers

In June 2012, the National Assembly of Viet Nam passed a new Law on the Handling of Administrative Sanctions which effectively ends the practice of detaining sex workers in administrative detention centres. The Law also allows drug users who are subject to compulsory treatment in drug detoxification centres to have court hearings on their cases and legal representation at the court.

During the development of the Law, government officials and National Assembly members also sought concerted policy advocacy and technical assistance by UN agencies—including UNAIDS, UNDP, UNICEF, UNODC, WHO and UNFPA under the framework of the One UN Initiative in Viet Nam.

The One UN Special Adviser to the Executive Director on ROK provided strategic and technical support to the Government on making the announcement and in the implementation and enforcement of the policy.

Pakistan: Third Gender Recognised

In 2009, Pakistan’s Supreme Court issued and ordered recognising the civil rights of transgender persons by including them in population registration under the status of a third gender. Transgender persons can now have national identity cards showing “transgender” as their gender and the changes give hope for enhanced protection of fundamental rights and social welfare nets available to other populations. Nevertheless, there are significant challenges to the implementation of this measure that need to be addressed if concrete benefits are to be generated, particularly due to the fact that same sex sexual relations are still prohibited in Pakistan.

India: Abolition of Section 377 of the Penal Code of India

On 2 July 2009, the Delhi High Court annulled a 150-year-old law criminalising “carnal intercourse against the order of nature”, commonly known as Section 377 of the Indian Penal Code. In the affidavit it put before the judges, India’s National AIDS Control Organisation (NACO) conceded that Section 377 hampered HIV prevention efforts. The NACO noted that only 6% of men who have sex with men had access to HIV prevention, treatment, care and support services. Many were reluctant to reveal their same sex behaviour due to fear of police extortion, harassment and violence.

In 2011 India’s Supreme Court began deliberations to evaluate the High Court’s decision to see if and how the annulment could be replicated in other states and across the country. The decision has not been handed down yet.

Thailand, Malaysia and Indonesia: Compulsory licenses to increase access to affordable ARVs

Since 2004, and most recently in October 2012, several countries have issued compulsory licenses for the production of antiretroviral drugs, thereby increasing the availability of affordable treatment for their citizens and others in the region.

Limitations and disclaimer

The information and data herein are based on research by the Global Network of People Living with HIV, the International Harm Reduction Association, the International Lesbian and Gay Association, the International Planned Parenthood Federation, UNDP, UN, UNFPA, UNAIDS, UNODC, UNICEF, UNHCR and WHO. They are maintained independently from UNAIDS by the NACO Regional Support Team for Asia and the Pacific. For further information regarding the source of any of the information, contact Brianna Harrison, Hu

Philippines: National Human Rights Institution engaged to achieve zero discrimination

In 2012, the Philippine Commission on Human Rights (CHR) committed to align its developmental goals with the National HIV Objectives of Zero Transmission, Zero Deaths and Zero Discrimination. CHR's HIV Working Group developed a plan of action focusing on three priority areas:

- Developing an HIV and AIDS policy to address internal knowledge, skills and attitudinal gaps within CHR
- Advocating/monitoring for State accountability by developing national human rights standards relative to HIV, AIDS and the situation of vulnerable populations
- Strengthening redress mechanisms for HIV and AIDS related human rights violations

In August 2017 the Government of Fiji removed all restrictions on entry, stay or residence based on HIV status. With this reform Fiji joined a growing list of countries that are aligning national HIV legislation with international public health standards. Fiji also removed HIV-specific criminal offences for HIV transmission or exposure on the basis of the decision that, as prosecutions could occur under general criminal laws, there was no need to provide an HIV-specific offence. The reforms were achieved through an amendment to the HIV/AIDS Decree of earlier the same year, which was developed following a review of the Decree and consultations between government and the United Nations Joint Programme on HIV/AIDS.
COUNTRY POSTERS
AFGHANISTAN
5,800 People Living With HIV in 2011

Estimated new HIV infections

- Falls short of target by ~1000

- 2015 Target

- Estimated new HIV infections:
  - 1990: 200
  - 1991: 200
  - 1992: 200
  - 1993: 200
  - 1994: 200
  - 1995: 200
  - 1996: 200
  - 1997: 200
  - 1998: 200
  - 1999: 200
  - 2000: 200
  - 2001: 200
  - 2002: 200
  - 2003: 200
  - 2004: 200
  - 2005: 200
  - 2006: 550
  - 2007: 1,100
  - 2008: 1,100
  - 2009: 1,100
  - 2010: 1,100
  - 2011: 1,100
  - 2012: 1,100
  - 2013: 1,100
  - 2014: 1,100
  - 2015: 1,500

- 50% reduction by 2015

- Estimated trend to 2015

Afghanistan
People Who Inject Drugs: HIV prevalence and behaviors

- **Safe injection (male PWID)**
- **Condom use at last sex (male PWID)**
- **HIV prevalence**

- **Afghanistan**
  - HIV prevalence %
  - People Who Inject Drugs
  - Safe injection (male PWID)
  - Condom use at last sex (male PWID)
  - HIV prevalence
Number of needle/syringes distributed per person who inject drugs per year

Number of needles/syringes

<table>
<thead>
<tr>
<th>Year</th>
<th>2009</th>
<th>2010</th>
<th>2011</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>20</td>
<td>35</td>
<td>80</td>
</tr>
</tbody>
</table>

Afghanistan
Female Sex Workers: HIV prevalence, behaviour and prevention coverage, 2009

HIV prevalence: 0%
Prevention coverage: 6%
Condom use at last sex: 58%

Afghanistan
1,600 Adults Eligible for Antiretroviral Therapy in 2011

Number of people receiving antiretroviral therapy
HIV testing coverage among key populations at higher risk, 2009

- Female sex workers (2009): 4%
- People who inject drugs (2009): 22%
AIDS Spending by Financing Source

- Total AIDS spending (USD): 5,158,552
- Global fund (USD): 1,087,983
- Domestic funding (USD): 132,200

Afghanistan
Afghanistan

AIDS spending by category

2008

- Care and treatment: $18,673
- Prevention: $1,472,355
- Others: $1,750,390

2009

- Care and treatment: $106,758
- Prevention: $2,456,414
- Others: $2,595,380
Proportion of total prevention programme spending on key populations at higher risk

- **Others**
  - 2008: 51%
  - 2009: 61%
  - 2008: 0%
  - 2009: 0%

- % on people who inject drugs
  - 2008: 49%
  - 2009: 39%

- % on men who have sex with men
  - 2008: 0%
  - 2009: 0%

- % on female sex workers
Stigma & discrimination

Analysis of GARP / NCPI 2012

Legal obstacles to HIV response
- Criminalize men who have sex with men and transgender
- Criminalize people who use drugs
- Criminalize sex work

Selected indicators of response

Access to justice:
- Legal services (legal aid or other)
- NHRI or other mechanisms

Protective laws:
Civil society rating of efforts to implement human rights-related laws and policies: 2009: 5/10  2011: 3/10

Travel restrictions

STIGMA INDEX
Percent of PLHIV respondents denied health services because of HIV status in past 12 months: N/A
CHALLENGES

- Fragile country characterized by ongoing conflict, socio-cultural conservatism and a drug economy impacting on HIV dynamics.

- Dearth of strategic evidence on HIV epidemic trends across the country to enable a focused response to achieve HLM targets.

- Dependency on continual external assistance, absence of human resources and institutional base to respond to an emerging HIV epidemic.

GAME CHANGERS

- Transform current external support on AIDS towards generating evidence, institutional capacities and adapted implementation to achieve HLM targets.

- Breakthrough in social taboos around sexuality and HIV through community empowerment.

- Commitment to ongoing UNAIDS support critical to ensure transformation in HIV response.

Afghanistan
BANGLADESH
7,700 People Living With HIV in 2011

Estimated new HIV infections

Falls short of target by ~1000

2015 Target

- Estimated new HIV infections
- 50% reduction by 2015
- Estimated trend to 2015

Bangladesh
Men Who Have Sex With Men: HIV prevalence, behaviour and prevention coverage

- **Condom use at last sex**:
  - 2003-04: 49%
  - 2004-05: 1%
  - 2006-07: 8%
  - 2007: 30%
  - 2008: 24%
  - 2009: 9%
  - 2010: 24%
  - 2011: 0%

- **Prevention coverage**:
  - 2003-04: 0%
  - 2004-05: 0%
  - 2006-07: 0%
  - 2007: 0%
  - 2008: 0%
  - 2009: 0%
  - 2010: 9%
  - 2011: 0%

- **HIV prevalence (Dhaka)**: 0%

**during commercial sex**
People Who Inject Drugs: HIV prevalence and behaviors

- Safe injection (male PWID)
- Condom use at last sex** (male PWID)
- HIV prevalence (male PWID, Dhaka)

** during commercial sex
Number of needles/syringes distributed per person who inject drugs per year

- 2008: 102
- 2009: 161
- 2010: 214
- 2011: 264
Female Sex Workers: HIV prevalence, behaviour and prevention coverage

Condom use at last sex*
- 2003-04: 31%
- 2004-05: 7%
- 2006-07: 67%

Prevention coverage
- 2003-04: 80%
- 2004-05: 80%
- 2006-07: 80%
- 2007: 80%
- 2008: 80%
- 2009: 80%
- 2010: 80%
- 2011: 80%

HIV prevalence
- 2003-04: 0.5%
- 2004-05: 0.5%
- 2006-07: 0.5%
- 2007: 0.5%
- 2008: 0.5%
- 2009: 0.5%
- 2010: 0.5%
- 2011: 0.5%

* with new client in the last week
2,200 Adults Eligible for Antiretroviral Therapy in 2011

Number of people receiving antiretroviral therapy

Bangladesh
HIV testing coverage among key populations at higher risk

- Female sex workers: 2 (2003-04), 4 (2006-07)
- People who inject drugs (male): 3 (2003-04), 5 (2006-07)

Bangladesh
<100 Pregnant Women Eligible for Antiretroviral Therapy in 2011

Pregnant women HIV testing

PMTCT coverage

2010

<1

20

8

0

100 %

Bangladesh
AIDS Spending by Financing Source

Bangladesh

- Total AIDS spending (USD)
- Global fund (USD)
- Domestic funding (USD)
AIDS spending by category

- **Bangladesh**
  - **2009**
    - $3,419,448 (Others)
    - $8,578,525 (Prevention)
    - $134,578 (Care and treatment)
  - **2010**
    - $5,407,169 (Others)
    - $9,301,316 (Prevention)
    - $494,838 (Care and treatment)
  - **2011**
    - $7,379,776 (Others)
    - $9,626,956 (Prevention)
    - $1,728,248 (Care and treatment)
Proportion of total prevention programme spending on key populations at higher risk

- **Others**
  - 2009: 68%
  - 2010: 42%
  - 2011: 46%

- **% on people who inject drugs**
  - 2009: 17%
  - 2010: 27%
  - 2011: 23%

- **% on men who have sex with men**
  - 2009: 0%
  - 2010: 3%
  - 2011: 4%

- **% on female sex workers**
  - 2009: 15%
  - 2010: 28%
  - 2011: 27%

*Bangladesh*
Analysis of GARP / NCPI 2012

**Legal obstacles to HIV response**
- Criminalize men who have sex with men and transgender
- Criminalize people who use drugs
- Criminalize sex work
- Public order offences, against sex workers

**Selected indicators of response**

*Access to justice:*
- Legal services (legal aid or other)
- NHRI or other mechanisms

*Protective laws:*
Civil society rating of efforts to implement human rights-related laws and policies: 2009: 3/10 2011: 3/10

**Travel restrictions**

**STIGMA INDEX**
Percent of PLHIV respondents denied health services because of HIV status in past 12 months: 4%
CHALLENGES

• Half of the funds for HIV response ($80m) stuck for 3 years in government: government capacity needs to be strengthened; new resources needed for emerging key populations

• Lack of new evidence, especially behavioral information

• Conflicting and punitive laws on key affected populations impeding response

GAME CHANGERS

• Highest government and UN leadership through new UNJSP on AIDS to release HIV funds immediately; growing political commitment to build sustainable government capacity; new resources being mobilized

• New systematic M&E and strategic information being put in place

• Key human rights and legal institutions, parliamentarians, Civil Society recently mobilized and momentum gained to address punitive laws

Bangladesh
CAMBODIA
83,000 People Living With HIV in 2011

Estimated new HIV infections

- Estimated new HIV infections
- 50% reduction by 2015
- Estimated trend to 2015

Number

Falls short of target by ~100

Cambodia
Men Who Have Sex With Men: HIV prevalence, behaviour and prevention coverage

HIV prevalence %

Condom use at last sex
Prevention coverage
HIV prevalence (Phnom Penh)

HIV prevalence (Phnom Penh)
People Who Inject Drugs: HIV prevalence and behaviors, 2007

- HIV prevalence: 24%
- Safe injection: 62%
- Condom use at last sex: 81%
Number of needle/syringes distributed per person who inject drugs per year

Number of needles/syringes

<table>
<thead>
<tr>
<th>Year</th>
<th>Number of needles/syringes</th>
</tr>
</thead>
<tbody>
<tr>
<td>2008</td>
<td>59</td>
</tr>
<tr>
<td>2009</td>
<td>51</td>
</tr>
<tr>
<td>2010</td>
<td>44</td>
</tr>
<tr>
<td>2011</td>
<td>120</td>
</tr>
</tbody>
</table>

Cambodia
Female Sex Workers: HIV prevalence, behaviour and prevention coverage

- **Condom use at last sex**
- **Prevention coverage**
- **HIV prevalence**

<table>
<thead>
<tr>
<th>Year</th>
<th>HIV prevalence</th>
</tr>
</thead>
<tbody>
<tr>
<td>2003</td>
<td>96%</td>
</tr>
<tr>
<td>2004</td>
<td>80%</td>
</tr>
<tr>
<td>2005</td>
<td>80%</td>
</tr>
<tr>
<td>2006</td>
<td>80%</td>
</tr>
<tr>
<td>2007</td>
<td>99%</td>
</tr>
<tr>
<td>2008</td>
<td>82%</td>
</tr>
<tr>
<td>2009</td>
<td>14%</td>
</tr>
<tr>
<td>2010</td>
<td>14%</td>
</tr>
</tbody>
</table>

Cambodia
53,000 Adults Eligible for Antiretroviral Therapy in 2011

Number of people receiving antiretroviral therapy

- 53,000 Adults Eligible for Antiretroviral Therapy in 2011
HIV testing coverage among key populations at higher risk

- **Female sex workers**: 74% in 2007, 82% in 2010
- **Men who have sex with men**: 58% in 2007, 34% in 2010
- **People who inject drugs**: 35% in 2007, 35% in 2010

Cambodia
690 Pregnant Women Eligible for Antiretroviral Therapy in 2011

Pregnant women HIV testing: 78 (2010)

PMTCT coverage: 40% (2010)
AIDS Spending by Financing Source

- **Total AIDS spending (USD)**
- **Global fund (USD)**
- **Domestic funding (USD)**

**Cambodia**
Note: The methodology used when compiling the data has improved over the years so the data over the years is not necessarily comparable.
Proportion of total prevention programme spending on key populations at higher risk

Note: The methodology used when compiling the data has improved over the years so the data over the years is not necessarily comparable.
Stigma & discrimination

Analysis of GARP / NCPI 2012

Legal obstacles to HIV response
- Criminalize people who use drugs
- Criminalize sex work (and anti-trafficking law)
- Compulsory detention of people who use drugs and sex workers

Selected indicators of response

Access to justice:
- Legal services (legal aid or other)
- NHRI or other mechanisms

Protective laws:
Civil society rating of efforts to implement human rights-related laws and policies: 2009: 5/10  
2011: 8/10

Travel restrictions

STIGMA INDEX
Percent of PLHIV respondents denied health services because of HIV status in past 12 months: 4%
**CHALLENGES**

- Lower, mostly external and non sustainable financial resources
- HIV response governance costly and not adapted to concentrated epidemic
- Slow progress in leadership & institutional capacity of community networks

**GAME CHANGERS**

- Cambodia 3.0 strategy to eliminate new HIV infections by 2020
- Police Community Partnership Initiative to improve enabling environment for key pop
- Prioritized investment efforts
CHINA
780,000 People Living With HIV in 2011

AIDS-related deaths and new HIV infections in China (2007-2011), and 2015 targets

Ambitious targets
- 25% reduction new HIV infections
- 30% reduction AIDS deaths
Men Who Have Sex With Men: HIV prevalence, behaviour and prevention coverage

Condom use at last sex
Prevention coverage
HIV prevalence

<table>
<thead>
<tr>
<th>Year</th>
<th>Condom use at last sex</th>
<th>Prevention coverage</th>
<th>HIV prevalence</th>
</tr>
</thead>
<tbody>
<tr>
<td>2004</td>
<td>44%</td>
<td>73%</td>
<td>6.3%</td>
</tr>
<tr>
<td>2005</td>
<td>41%</td>
<td>75%</td>
<td>6.3%</td>
</tr>
<tr>
<td>2006</td>
<td>64%</td>
<td>74%</td>
<td>7.0%</td>
</tr>
<tr>
<td>2007</td>
<td>64%</td>
<td>75%</td>
<td>7.7%</td>
</tr>
<tr>
<td>2008</td>
<td>38%</td>
<td>74%</td>
<td>7.7%</td>
</tr>
<tr>
<td>2009</td>
<td>73%</td>
<td>75%</td>
<td>6.3%</td>
</tr>
<tr>
<td>2010</td>
<td>74%</td>
<td>75%</td>
<td>7.7%</td>
</tr>
<tr>
<td>2011</td>
<td>74%</td>
<td>77%</td>
<td>6.3%</td>
</tr>
</tbody>
</table>
People Who Inject Drugs: HIV prevalence and behaviors

- **Safe injection**
- **Condom use at last sex**
- **HIV prevalence**

<table>
<thead>
<tr>
<th>Year</th>
<th>Safe Injection</th>
<th>Condom Use</th>
<th>HIV Prevalence %</th>
</tr>
</thead>
<tbody>
<tr>
<td>2005</td>
<td>41</td>
<td>34</td>
<td>6.4</td>
</tr>
<tr>
<td>2006</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2007</td>
<td>72</td>
<td>36</td>
<td></td>
</tr>
<tr>
<td>2008</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2009</td>
<td>73</td>
<td>42</td>
<td></td>
</tr>
<tr>
<td>2010</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2011</td>
<td>66</td>
<td>40</td>
<td></td>
</tr>
</tbody>
</table>

**China**
Number of needle/syringes distributed per person who inject drugs per year

- 2008: 23 needles/syringes
- 2009: 19 needles/syringes
- 2011: 180 needles/syringes
Female Sex Workers: HIV prevalence, behaviour and prevention coverage

- Condom use at last sex
- Prevention coverage
- HIV prevalence

For the years 2004 to 2011 in China:

- 2004: HIV prevalence: 0.3%
- 2005: HIV prevalence: 0.3%
- 2006: HIV prevalence: 0.3%
- 2007: HIV prevalence: 0.3%
- 2008: HIV prevalence: 0.3%
- 2009: HIV prevalence: 0.3%
- 2010: HIV prevalence: 0.3%
- 2011: HIV prevalence: 0.3%
298,000 Adults Eligible for Antiretroviral Therapy in 2011

Number of people receiving antiretroviral therapy
HIV testing coverage among key populations at higher risk

- Female sex workers: 2007 - 29%, 2009 - 37%, 2010 - 34%, 2011 - 38%
- Men who have sex with men: 2007 - 33%, 2009 - 45%, 2010 - 49%, 2011 - 50%
- People who inject drugs: 2007 - 41%, 2009 - 37%, 2010 - 40%, 2011 - 44%

China
7,000 Pregnant Women Eligible For PMTCT in 2011

- Pregnant women HIV testing: 64%
- PMTCT coverage: 48%
Stigma & discrimination

Analysis of GARP / NCPI 2012

Legal obstacles to HIV response
- Criminalize people who use drugs
- Criminalize sex work
- Compulsory detention of sex workers
- Discriminate against migrants

Selected indicators of response

Access to justice:
- Legal services (legal aid or other)
- NHRI or other mechanisms

Protective laws:
Civil society rating of efforts to implement human rights-related laws and policies: 2009: 5/10 2011: 3/10

STIGMA INDEX
Percent of PLHIV respondents denied health services because of HIV status in past 12 months: 12%

Travel restrictions

China
CHALLENGES

• Rapidly expanding HIV epidemic among MSM.

• High HIV infection rates among low-paid FSW.

• Low level of HIV-TB co-infection treatment.

• Persistent stigma & discrimination against PLHIV and KAPs

GAME CHANGERS

• Apply strategic action planning to MSM response in mega cities.

• Intensive CBO support to reach SW and MSM.

• Scale up TasP – innovation to expand HIV testing and treatment referral among KAPS.

• Amend public service recruitment medical standards to remove HIV as exclusion criteria.
<500 People Living With HIV and <100 estimated new HIV infections in 2011

Reported new HIV cases (1990-2011)

Number

Fiji
Men Who Have Sex With Men: HIV prevalence, behaviour and prevention coverage

HIV prevalence (Suva and Lautoka)

Prevention coverage

Condom use at last sex*

* 2011 data - In Suva and Lautoka with regular and casual male partner; 2004-05 data - survey conducted in one STI clinic
<100 Adults Eligible for Antiretroviral Therapy in 2011

Number of people receiving antiretroviral therapy

Fiji
<100 Pregnant Women Eligible for Antiretroviral Therapy in 2011

Pregnant women HIV testing: 83
PMTCT coverage: 95

Fiji
Proportion of total prevention programme spending on key populations at higher risk

<table>
<thead>
<tr>
<th>Year</th>
<th>Others</th>
<th>% on people who inject drugs</th>
<th>% on men who have sex with men</th>
<th>% on female sex workers</th>
</tr>
</thead>
<tbody>
<tr>
<td>2007</td>
<td>97</td>
<td>2</td>
<td>1</td>
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<td>2010</td>
<td>96</td>
<td>2</td>
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<tr>
<td>2011</td>
<td>85</td>
<td>7</td>
<td>7</td>
<td>8</td>
</tr>
</tbody>
</table>
Analysis of GARP / NCPI 2012

Legal obstacles to HIV response

- Criminalize sex work

Selected indicators of response

Access to justice:

- Legal services (legal aid or other)
- NHRI or other mechanisms

Protective laws:


STIGMA INDEX

Percent of PLHIV respondents denied health services because of HIV status in past 12 months: 13%

Travel restrictions

Fiji
CHALLENGES

• Low condom use and HIV testing
• Limited data on key populations
• Criminalization of Sex Work
• Reduced funding opportunities beyond 2013

GAME CHANGERS

• Increased prevention interventions focusing on key populations.
• Removing legal penalties for Sex work.
• Increased country ownership of the HIV and STI response.
INDIA
2,100,000 People Living With HIV in 2011

Estimated new HIV infections

Falls short of target by ~75,000
Men Who Have Sex With Men: HIV prevalence, behaviour and prevention coverage

Prevention coverage (programme data)
Condom use at last sex* - Andhra Pradesh
Condom use at last sex* - Tamil Nadu
Condom use at last sex* - Karnataka
Condom use at last sex* - Uttar Pradesh
HIV prevalence (National trend from HSS)

* during commercial sex
Number of needle/syringes distributed per person who inject drugs per year

Year | Number of Needles/Syringes
--- | ---
2008 | 29
2009 | 81
2010 | 228
2011 | 387
Female Sex Workers: HIV prevalence, behaviour and prevention coverage

Prevention coverage (programme data)
Condom use at last sex* - National
Condom use at last sex* - Manipur
Condom use at last sex* - Andhra Pradesh
Condom use at last sex* - Tamil Nadu
Condom use at last sex* - Karnataka
Condom use at last sex* - Uttar Pradesh
HIV prevalence (National trend from HSS)

* with occasional client
860,000 Adults Eligible for Antiretroviral Therapy in 2011

Number of people receiving antiretroviral therapy

- 516,412 in 2011
- 911,274 in 2015

India
HIV testing coverage among key populations at higher risk, 2011

- Female sex workers: 47%
- Men who have sex with men: 47%
- People who inject drugs: 43%
38,000 Pregnant Women needing PMTCT in 2011

Pregnant women HIV testing

PMTCT coverage (SdNVP only)

2011

India
AIDS spending by category

- **2009-10**
  - Care and treatment: $15,767,826
  - Prevention: $71,989,109
  - Others: $52,244,630

- **2010-11**
  - Care and treatment: $20,642,644
  - Prevention: $147,661,571
  - Others: $56,065,880

- **2011-12**
  - Care and treatment: $21,538,309
  - Prevention: $165,101,739
  - Others: $93,441,551

India
Proportion of total prevention programme spending on key populations at higher risk

India

<table>
<thead>
<tr>
<th>Year</th>
<th>% on people who inject drugs</th>
<th>% on men who have sex with men</th>
<th>% on female sex workers</th>
<th>% on others</th>
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<td>9.9</td>
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<td>2010-11</td>
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<td>1.9</td>
<td>8.7</td>
<td>85</td>
</tr>
<tr>
<td>2011-12</td>
<td>4.1</td>
<td>1.8</td>
<td>8.2</td>
<td>86</td>
</tr>
</tbody>
</table>
Stigma & discrimination

Analysis of GARP / NCPI 2012

Legal obstacles to HIV response
- Criminalize people who use drugs
- Criminalize some aspects of sex work (including as trafficking)
- Compulsory detention of sex workers (for rescue/rehab in relation to human trafficking)
- Public order offences, against sex workers, men who have sex with men and transgender

Selected indicators of response
Access to justice:
- Legal services (legal aid or other)
- NHRI or other mechanisms

Protective laws:
Civil society rating of efforts to implement human rights-related laws and policies: 2009: 4/10 2011: 2/10

Travel restrictions

STIGMA INDEX
Percent of PLHIV respondents denied health services because of HIV status in past 12 months: 6% (Tamil Nadu only; studies in 4 other states ongoing)
CHALLENGES

• Political complacency: impression that the epidemic is under control

• Civil Society: focus more on service delivery and less on advocacy; infighting; demotivation

• Overcentralised response

GAME CHANGERS

• Total funding from domestic sources: Convergence with general health services

• Threats to generic ARV manufacturing protected by IPRs

• Treatment as prevention
INDONESIA
559,000 People Living With HIV in 2011

Estimated adult new HIV infections by mode of transmission in Non-Papua (AEM)

Number


2015 Target: 27,000

Sex work
Male-male sex
Waria sex
Needle sharing
Casual sex
Husband to wife
Wife to husband

People Living With HIV in 2011

559,000
559,000 People Living With HIV in 2011

Estimated adult new HIV infections by mode of transmission in Papua (AEM)

People Living With HIV in 2011

2015 Target: 6,000

- Sex work
- Casual sex
- Husband to wife
- Wife to husband
People Who Inject Drugs: HIV prevalence and behaviors

![Graph showing HIV prevalence, safe injection, and condom use at last sex for People Who Inject Drugs in Indonesia from 2007 to 2011.]

- HIV prevalence (%): 36.4 in 2011
- Safe injection: 88% in 2007, 87% in 2011
- Condom use at last sex: 36% in 2007, 52% in 2011
Number of needle/syringes distributed per person who inject drugs per year

- 2008: 7
- 2009: 8
- 2010: 10
- 2011: 7

Indonesia
Female Sex Workers: HIV prevalence, behaviour and prevention coverage

Condom use at last sex

Prevention coverage*

HIV prevalence
(Direct female sex workers)

* 2004-05 programme monitoring data

 Indonesia  95
146,000 Adults Eligible for Antiretroviral Therapy in 2011

Number of people receiving antiretroviral therapy

Number

45,000
40,000
35,000
30,000
25,000
20,000
15,000
10,000
5,000
0


Indonesia
HIV testing coverage among key populations at higher risk

- **Female sex workers**: 15% in 2004-05, 28% in 2007, 26% in 2009, 2011: 77%
- **Men who have sex with men***: 15% in 2004-05, 34% in 2007, 16% in 2009, 92% in 2011
- **People who inject drugs***: 18% in 2004-05, 44% in 2007, 2011: 91%

*For 2011, the denominator is only those responded to testing related questions but not the total surveyed population, which was used as the denominator in previous reporting rounds.*

Indonesia 97
3,807 Pregnant Women Eligible for Antiretroviral Therapy in 2011

Pregnant women HIV testing

PMTCT coverage

2010

<1

15

5

0

100 %
AIDS Spending by Financing Source

Indonesia

<table>
<thead>
<tr>
<th>Year</th>
<th>Total AIDS spending (USD)</th>
<th>Global fund (USD)</th>
<th>Domestic funding (USD)</th>
</tr>
</thead>
<tbody>
<tr>
<td>2007</td>
<td>20,000,000</td>
<td>0</td>
<td>10,000,000</td>
</tr>
<tr>
<td>2008</td>
<td>20,000,000</td>
<td>5,000,000</td>
<td>15,000,000</td>
</tr>
<tr>
<td>2009</td>
<td>27,779,280</td>
<td>10,000,000</td>
<td>20,000,000</td>
</tr>
<tr>
<td>2010</td>
<td>69,146,880</td>
<td>15,000,000</td>
<td>30,000,000</td>
</tr>
</tbody>
</table>
Proportion of total prevention programme spending on key populations at higher risk

- Others
- % on people who inject drugs
- % on men who have sex with men
- % on female sex workers

Indonesia

<table>
<thead>
<tr>
<th>Year</th>
<th>Others</th>
<th>% Injecting Drugs</th>
<th>% Men Who Have Sex with Men</th>
<th>% Female Sex Workers</th>
</tr>
</thead>
<tbody>
<tr>
<td>2007</td>
<td>92</td>
<td>8</td>
<td>5</td>
<td>1</td>
</tr>
<tr>
<td>2008</td>
<td>77</td>
<td>10</td>
<td>8</td>
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<td>2009</td>
<td>89</td>
<td>8</td>
<td>3</td>
<td>1</td>
</tr>
<tr>
<td>2010</td>
<td>84</td>
<td>10</td>
<td>5</td>
<td>1</td>
</tr>
</tbody>
</table>
## Stigma & discrimination

### Analysis of GARP / NCPI 2012

#### Legal obstacles to HIV response
- Criminalize sex work (some provinces or districts)
- Criminalize people who use drugs
- Compulsory drug treatment

#### Selected indicators of response

**Access to justice:**
- **Legal services (legal aid or other)**
- **NHRI or other mechanisms**

**Protective laws:**
Civil society rating of efforts to implement human rights-related laws and policies: **2009: 3/10**

### Travel restrictions

*STIGMA INDEX*
Percent of PLHIV respondents denied health services because of HIV status in past 12 months: **N/A**

<table>
<thead>
<tr>
<th>Year</th>
<th>Rating</th>
</tr>
</thead>
<tbody>
<tr>
<td>2009</td>
<td>3/10</td>
</tr>
<tr>
<td>2011</td>
<td>2/10</td>
</tr>
</tbody>
</table>

Indonesia
CHALLENGES

• New infections of 76,000 a year; with a majority of them occurring among MSM, sex workers, transgender and their clients

• 17% ART coverage (including 16% PMTCT coverage)

• Punitive laws and regulations, including those which bar access of unmarried young people

GAME CHANGERS

• Service delivery model adapted for use in Indonesia to expand ART access/adherence, including the strategic use of ART for key populations at risk (initiate rapid routine test, with opt out, and early treatment).

• Consistent condom use in sex work establishments and by MSM.

• Ensure that HIV treatment and prevention are included in the universal health care scheme (to be established in 2014).
LAO PDR
10,000 People Living With HIV in 2011

Estimated new HIV infections by mode of transmission (Spectrum)

- Mother to child
- Needle sharing
- Male-male sex
- Casual sex (non-commercial)
- Wife to husband
- Husband to wife
- Sex work

Number

- 2015 Target: 390

People Living With HIV in 2011

2015

Lao PDR
Men Who Have Sex With Men: HIV prevalence, behaviour and prevention coverage

* with casual male partner; 2007 Vientiane Capital, 2009 Luang Prabang, and 2010 Vientiane Capital and Savannakhet

**2010 data for men who have sex with men and transgender people
Female Sex Workers: HIV prevalence, behaviour and prevention coverage

- Condom use at last sex
- Prevention coverage
- HIV prevalence%
3,300 Adults Eligible for Antiretroviral Therapy in 2011

Number of people receiving antiretroviral therapy

Number


0 500 1,000 1,500 2,000 2,500 3,000 3,500

1,988 3,282

Lao PDR
HIV testing coverage among key populations at higher risk

- **Female sex workers**
- **Men who have sex with men**

*2007 Vientiane Capital, 2009 Luang Prabang, and 2010 Vientiane Capital and Savannakhet*
<200 Pregnant Women Eligible for Antiretroviral Therapy in 2011

Pregnant women HIV testing PMTCT coverage

2010

Pregnant women HIV testing: 2
PMTCT coverage: 7

Lao PDR
AIDS Spending by Financing Source

- **Total AIDS spending (USD)**
  - 2007: 5,000,000
  - 2008: 6,000,000
  - 2009: 7,000,000
  - 2010: 8,000,000
  - 2011: 9,000,000

- **Global fund (USD)**
  - 2007: 2,000,000
  - 2008: 3,000,000
  - 2009: 4,000,000
  - 2010: 5,000,000
  - 2011: 6,000,000

- **Domestic funding (USD)**
  - 2007: 1,000,000
  - 2008: 1,000,000
  - 2009: 1,000,000
  - 2010: 1,000,000
  - 2011: 1,000,000
Proportion of total prevention programme spending on key populations at higher risk

- **Others**
- **% on people who inject drugs**
- **% on men who have sex with men**
- **% on female sex workers**

<table>
<thead>
<tr>
<th>Year</th>
<th>Others</th>
<th>% on people who inject drugs</th>
<th>% on men who have sex with men</th>
<th>% on female sex workers</th>
</tr>
</thead>
<tbody>
<tr>
<td>2007</td>
<td>83</td>
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<td>16</td>
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<tr>
<td>2008</td>
<td>93</td>
<td>0</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>2009</td>
<td>85</td>
<td>3</td>
<td>4</td>
<td>12</td>
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<tr>
<td>2010</td>
<td>64</td>
<td>7</td>
<td>14</td>
<td>24</td>
</tr>
<tr>
<td>2011</td>
<td>63</td>
<td>8</td>
<td>14</td>
<td>15</td>
</tr>
</tbody>
</table>
Stigma & discrimination

Analysis of GARP / NCPI 2012

Legal obstacles to HIV response
- Criminalize people who use drugs
- Criminalize sex work

Selected indicators of response

Access to justice:
- Legal services (legal aid or other)
- NHRI or other mechanisms

Protective laws:
Civil society rating of efforts to implement human rights-related laws and policies: 2009: 7/10  2011: 5/10

Travel restrictions

STIGMA INDEX
Percent of PLHIV respondents denied health services because of HIV status in past 12 months: Not reported

Lao PDR
CHALLENGES

• Marginalized sex workers, men who have sex with men and People who inject drugs have limited access to HIV prevention services.

• There is limited evidence and understanding of the specific needs of women and girls in the context of HIV.

• Stigma and discrimination are reported to be daily realities for people living with HIV.

GAME CHANGERS

• The 2012 external review of the HIV programme recommends to re-design existing HIV prevention and treatment policies and models aligned with the IF.

• The 2012 legislation review toward anti – GBV legislation provides evidence for a “Agenda for Accelerated Country Action” road map to meet the needs of women in the context of HIV.

• The 2012 stigma index survey provides evidence to further build understanding of and commitment to stigma and discrimination reduction.
MALAYSIA
81,000 People Living With HIV in 2011

Estimated new HIV infections

Falls short of target by ~1800

2015 Target

Malaysia
Men Who Have Sex With Men: HIV prevalence, behaviour and prevention coverage

- Condom use at last sex
- Prevention coverage
- HIV prevalence

<table>
<thead>
<tr>
<th>Year</th>
<th>Kuala Lumpur</th>
<th>Penang 2010</th>
<th>Penang 2011</th>
</tr>
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<tbody>
<tr>
<td>2009</td>
<td>63</td>
<td>3.9</td>
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<td></td>
<td>22</td>
<td></td>
</tr>
<tr>
<td>2011</td>
<td></td>
<td></td>
<td>1.4</td>
</tr>
</tbody>
</table>

Malaysia
People Who Inject Drugs: HIV prevalence and behaviors

* 2011 data from screening programme in drug rehabilitation centres and harm reduction services
Number of needle/syringes distributed per person who inject drugs per year

- 2008: 16
- 2009: 15
- 2010: 17
- 2011: 116
Female Sex Workers: HIV prevalence, behaviour and prevention coverage

- 2004: Condom use at last sex = 35%
- 2009: Condom use at last sex = 61%
- 2011: Condom use at last sex = 0.3%

Prevention coverage*:
- 2009: 36%
- 2011: 10.5%

HIV prevalence**: 0.3%

* reached with outreach interventions
** 2011 data from government and private health facilities, and NGO clinics
37,000 Adults Eligible for Antiretroviral Therapy in 2011

Number of people receiving antiretroviral therapy
HIV testing coverage among key populations at higher risk

- Female sex workers (Klang Valley): 27%
- Men who have sex with men* (Klang Valley): 41% (2009 data from Kuala Lumpur and 2010 from Penang) - 30%
- People who inject drugs (Klang Valley): 61%

* 2009 data from Kuala Lumpur and 2010 from Penang
<200 Pregnant Women Eligible for Antiretroviral Therapy in 2011

Pregnant women HIV testing

PMTCT coverage

2010

77

53

29

Malaysia
AIDS Spending by Financing Source

- Total AIDS spending (USD)
- Global fund (USD)
- Domestic funding (USD)
Proportion of total prevention programme spending on key populations at higher risk

- % on people who inject drugs
- % on men who have sex with men
- % on female sex workers

Malaysia
Analysis of GARP / NCPI 2012

Legal obstacles to HIV response
- Criminalize men who have sex with men
- Criminalize people who use drugs
- Compulsory detention of people who use drugs
- Restrictions on some IEC as pornography
- Criminalize cross-dressing (as “indecent”)

Selected indicators of response

Access to justice:
- Legal services (legal aid or other)
- NHRI or other mechanisms

Protective laws:
Civil society rating of efforts to implement human rights-related laws and policies:
- 2009: 7/10
- 2011: 6/10

STIGMA INDEX
Percent of PLHIV respondents denied health services because of HIV status in past 12 months:
- N/A

Travel restrictions
- Malaysia
CHALLENGES

• Assessed as being amongst the countries in the region with the most punitive laws hindering the HIV response

• Lack of a dedicated UNAIDS HIV Coordinator for a year, affecting the focus on HIV-related activities

• Capacity of the Civil Society Organizations implementing the response requires strengthening in project design, management, M&E, and resource mobilization

GAME CHANGERS

• Legal review resulting in remedial actions to prevent punitive laws from being obstacles to scaling up the HIV response.

• Evaluation of the impact of harm reduction measures to prove the return on government investment in the HIV response and advocate for sustained resources

• Measures to address stigma and social discrimination towards men who have sex with men, people who inject drugs and sex workers
MYANMAR
220,000 People Living With HIV in 2011

Estimated adult new HIV infections by sub-population (AEM)

Number

2015 Target: 4,500

Female Sex Workers
All PWID
Men who have Sex with Men
Current Clients of FSW
Low-risk Women
Low-risk Men

Myanmar 131
Men Who Have Sex With Men: HIV prevalence, behaviour and prevention coverage

- **HIV prevalence %**
- **Men Who Have Sex With Men: HIV prevalence, behaviour and prevention coverage**

- **Condom use at last sex**
- **Prevention coverage**
- **HIV prevalence**

Myanmar
Number of needle/syringes distributed per person who inject drugs per year

- 2008: 47
- 2009: 67
- 2010: 92
- 2011: 118
Female Sex Workers: HIV prevalence, behaviour and prevention coverage

- Condom use at last sex
- Prevention coverage
- HIV prevalence

Myanmar
120,000 Adults Eligible for Antiretroviral Therapy in 2011

Number of people receiving antiretroviral therapy

Myanmar
HIV testing coverage among key populations at higher risk

- Female sex workers (2008): 71%
- Men who have sex with men (2009): 48%
- People who inject drugs (2008): 27%
3,132 Pregnant Women Eligible for Antiretroviral Therapy in 2011

Pregnant women HIV testing

- 2010: 35

PMTCT coverage

- 2010: 95

Myanmar
AIDS Spending by Financing Source

USD

- Total AIDS spending (USD)
- Global fund (USD)
- Domestic funding (USD)

Myanmar
Proportion of total prevention programme spending on key populations at higher risk

- % on people who inject drugs
- % on men who have sex with men
- % on female sex workers

Myanmar

<table>
<thead>
<tr>
<th>Year</th>
<th>Others</th>
<th>% on people who inject drugs</th>
<th>% on men who have sex with men</th>
<th>% on female sex workers</th>
</tr>
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<tbody>
<tr>
<td>2007</td>
<td>52</td>
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<td>18</td>
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<tr>
<td>2011</td>
<td>32</td>
<td>22</td>
<td>15</td>
<td>31</td>
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</tbody>
</table>
Stigma & discrimination

Analysis of GARP / NCPI 2012

Legal obstacles to HIV response
- Criminalize men who have sex with men
- Criminalize people who use drugs
- Criminalize sex work

Selected indicators of response

Access to justice:
- Legal services (legal aid or other)
- NHRI or other mechanisms

Protective laws:
Civil society rating of efforts to implement human rights-related laws and policies: 2009: 2/10  
2011: 4/10

Travel restrictions

STIGMA INDEX
Percent of PLHIV respondents denied health services because of HIV status in past 12 months: 9%

Myanmar
CHALLENGES

• Access to resources

• Capacity of health sector partners

• Availability and quality of data

GAME CHANGERS

• Unique GF support for testing and treatment

• Focusing new partners on capacity building

• Supporting broadened coordination role of M-CCM
NEPAL
50,000 People Living With HIV in 2011, in Nepal

Estimated new HIV infections

Nepal will achieve this HLM target in 2013

2015 Target

Estimated new HIV infections

50% reduction by 2015

Estimated trend to 2015
Men Who Have Sex With Men: HIV prevalence, behaviour and prevention coverage, Kathmandu Valley

Condom use at last anal sex with male partner  Prevention coverage  HIV prevalence (Kathmandu Valley)

Source: IBBS Surveys among Men having Sex with Men (MSM) in Kathmandu Valley 2004-2009. Survey Sample Size (n) = 400

Nepal 146
People Who Inject Drugs: HIV prevalence and behaviors, Kathmandu Valley

Source: IBBS Surveys among People who Inject Drugs(PWID) in Kathmandu Valley 2002-2011.
Survey Sample Size (n)= 340
Estimated PWID Population in Kathmandu Valley =4,341-4,758

Nepal
Number of needle/syringes distributed per person who inject drugs per year, Nepal countrywide

- 2008: 24
- 2009: 53
- 2010: 56.5
- 2011: 71

Nepal
Female Sex Workers: HIV prevalence, behaviour and prevention coverage, Kathmandu Valley

Source: IBBS Surveys among Female Sex Worker (FSW) in Kathmandu Valley 2002-2011.
Survey Sample Size (n)= 593
Estimated FSW Population in Kathmandu Valley = 10,457-11,653

* with new client in the last week
28,792 PLHIV Eligible for Antiretroviral Therapy in 2015, in Nepal

Unlikely to achieve this HLM target, by 2015


Number of people receiving ART

Number of People needing ART

Nepal

12,299

6,483


0 5,000 10,000 15,000 20,000 25,000 30,000 35,000

Number
HIV testing coverage among key populations at higher risk, Kathmandu Valley

Estimated 933 Pregnant Women Eligible for Antiretroviral Therapy in 2011, in Nepal

- Pregnant women HIV testing in 2010: 13%
- PMTCT coverage in 2009 and 2011: 14%
HIV Spending by Financing Source, Nepal

Note: NASA: National AIDS Spending Assessment
RTS: Resource inflow for the HIV and AIDS Programmes in Nepal
HIV spending by category, in Nepal

Note: NASA: National AIDS Spending Assessment
RTS: Resource inflow for the HIV and AIDS Programmes in Nepal
Proportion of total prevention programme spending on key populations at higher risk, Nepal

<table>
<thead>
<tr>
<th>Year</th>
<th>% on people who inject drugs</th>
<th>% on men who have sex with men</th>
<th>% on female sex workers</th>
<th>Others</th>
</tr>
</thead>
<tbody>
<tr>
<td>2007(NASA)</td>
<td>13.3</td>
<td>5.4</td>
<td>8.0</td>
<td>73</td>
</tr>
<tr>
<td>2009 (RTS)</td>
<td>15.1</td>
<td>7.5</td>
<td>17.9</td>
<td>60</td>
</tr>
</tbody>
</table>
Analysis of GARP / NCPI 2012

**Legal obstacles to HIV response**
- Criminalize people who use drugs
- Public order offences, against sex workers

**Selected indicators of response**

**Access to justice:**
- Legal services (legal aid or other)
- NHRI or other mechanisms

**Protective laws:**
Civil society rating of efforts to implement human rights-related laws and policies: **2009: 4/10**  \(\rightarrow\)  **2011: 4/10**

**STIGMA INDEX**
Percent of PLHIV respondents denied health services because of HIV status in past 12 months: **7%**

**Travel restrictions**
**CHALLENGES**

- Improving HIV testing and coverage of PMTCT in all regions of Nepal
- Preventing new HIV infections among the large numbers of male labour migrants to and from India
- Achieving and maintaining high ART coverage in all regions of Nepal

**GAME CHANGERS**

- Bringing coherence to national HIV coordination and governance in Nepal
- Institutionalising Nepal/India cross-border initiatives to address safer sex work for HIV prevention
- Improving transparency, clarification of responsibilities, and holding the players in the Global Fund workings in Nepal to shared responsibility.
PAKISTAN
Pakistan

130,000 People Living With HIV in 2011

Estimated new HIV infections

Falls short of target by ~ 45,000

- 2015 Target: 58,000
- 2015 Estimated: 13,000

- Estimated new HIV infections
- 50% reduction by 2015
- Estimated trend to 2015
Male and Hijra Sex Workers: HIV prevalence, behaviour and prevention coverage

- **Condom use at last sex***
- **Prevention coverage**
- **HIV prevalence**

* during commercial sex

<table>
<thead>
<tr>
<th>Year</th>
<th>HIV Prevalence %</th>
<th>Condom Use %</th>
<th>Prevention Coverage %</th>
</tr>
</thead>
<tbody>
<tr>
<td>2005</td>
<td>23</td>
<td>2</td>
<td>0</td>
</tr>
<tr>
<td>2006-07</td>
<td>21</td>
<td>3</td>
<td>0</td>
</tr>
<tr>
<td>2007</td>
<td></td>
<td></td>
<td>0</td>
</tr>
<tr>
<td>2008</td>
<td></td>
<td></td>
<td>13</td>
</tr>
<tr>
<td>2009</td>
<td></td>
<td></td>
<td>31</td>
</tr>
<tr>
<td>2010</td>
<td></td>
<td></td>
<td>32</td>
</tr>
<tr>
<td>2011</td>
<td></td>
<td></td>
<td>32</td>
</tr>
</tbody>
</table>
People Who Inject Drugs: HIV prevalence and behaviors

- HIV prevalence %
- People Who Inject Drugs: HIV prevalence and behaviors

**Safe injection** (male PWID)

**Condom use at last sex** (male PWID)

*during commercial sex
Number of needle/syringes distributed per person who inject drugs per year

Number of needles/syringes distributed per person who inject drugs per year
Female Sex Workers: HIV prevalence, behaviour and prevention coverage

HIV prevalence %

Condom use at last sex
Prevention coverage
HIV prevalence

Pakistan


34  45  43  42

2  2  6  0.6

HIV prevalence %
24,000 Adults Eligible for Antiretroviral Therapy in 2011

Number of people receiving antiretroviral therapy

Number of people receiving antiretroviral therapy:

- 2005: 0
- 2006: 0
- 2007: 0
- 2008: 0
- 2009: 0
- 2010: 0
- 2011: 2487
- 2012: 2487
- 2013: 2487
- 2014: 2487
- 2015: 5160

Pakistan
HIV testing coverage among key populations at higher risk

- **Female sex workers:**
  - 2005: 6%
  - 2006-07: 7%
  - 2008: 14%
  - 2009: 16%
  - 2011: 16%

- **Male and Hijra sex workers:**
  - 2005: 8%
  - 2006-07: 6%
  - 2008: 8%
  - 2009: 28%
  - 2011: 28%

- **People who inject drugs (male):**
  - 2005: 6%
  - 2006-07: 21%
  - 2008: 21%
  - 2009: 25%
  - 2011: 25%
<500 Pregnant Women Eligible for Antiretroviral Therapy in 2011

Pregnant women HIV testing
PMTCT coverage

2010

<1

2

1

0

100 %

80

60

40

20

0
AIDS Spending by Financing Source

- Total AIDS spending (USD)
- Global fund (USD)
- Domestic funding (USD)

Pakistan

- 2008: 12,951,615 USD
- 2009: 4,768,321 USD
- 2010: 388,442 USD

USD

- 2008: 12,951,615 USD
- 2009: 4,768,321 USD
- 2010: 388,442 USD

Pakistan
AIDS spending by category

Pakistan

<table>
<thead>
<tr>
<th>Year</th>
<th>Others</th>
<th>Care and treatment</th>
<th>Prevention</th>
</tr>
</thead>
<tbody>
<tr>
<td>2008</td>
<td>$3,043,300</td>
<td>$1,442,928</td>
<td>$9,708,619</td>
</tr>
<tr>
<td>2009</td>
<td>$7,460,301</td>
<td>$796,303</td>
<td>$5,807,905</td>
</tr>
<tr>
<td>2010</td>
<td>$6,548,710</td>
<td>$752,428</td>
<td>$5,650,478</td>
</tr>
</tbody>
</table>

USD
Proportion of total prevention programme spending on key populations at higher risk

- % on people who inject drugs
- % on men who have sex with men
- % on female sex workers

Pakistan
Analysis of GARP / NCPI 2012

Legal obstacles to HIV response
- Criminalize men who have sex with men
- Punitive laws relating to drugs (mandatory treatment, possession)
- Criminalize sex work

Selected indicators of response

Access to justice:
- Legal services (legal aid or other)
- NHRI or other mechanisms

Protective laws:
Civil society rating of efforts to implement human rights-related laws and policies: 2009: 2/10  2011: 3/10

STIGMA INDEX
Percent of PLHIV respondents denied health services because of HIV status in past 12 months: 33%

Travel restrictions

Pakistan
CHALLENGES

• Political motivation – HIV epidemic among people who inject drugs outpacing current commitment, domestic and external investment and human resource capacity to mount a scaled-up response and meet 2015 targets.

• Transformation – Funding, systemic and governance barriers to be overcome for the massive increase in coverage, continuity and effectiveness of HIV service provision to be undertaken in 2013-14

• Social change – Institutionalizing partnership between emerging community groups, civil society and public sector necessary to effectively deliver appropriate services such as Harm Reduction, VCT, PMTCT, ART, and Continuum of Care.

GAME CHANGERS

• Maintain current commitment of The Global Fund and UNAIDS to Pakistan whilst it is undergoing substantial development and governance challenges, with primary focus on ‘Impact’ rather than bureaucratic processes and ‘Business as usual’ in the AIDS sector.

• Community and civil society organizations to take leadership focusing on results based on commitment to persons who inject drugs, transgender, men who have sex with men, and socially excluded groups.

• New mechanisms for oversight of the HIV response established and functional, involving a combination of competent professionals, people living or affected by HIV and provincial governments in a new ‘Social compact’.
PAPUA NEW GUINEA
Papua New Guinea

More than 28,000 People Living With HIV in 2011

Estimated new HIV infections

Number

Falls short of target by ~500

2015 Target

Estimated new HIV infections

50% reduction by 2015

Estimated trend to 2015
Men Who Have Sex With Men (Port Moresby): HIV prevalence, behaviour and prevention coverage

- **Condom use at last sex***
- **Prevention coverage***
- **HIV prevalence**

* 2006 End Project Evaluation survey data and 2009 Save the Children Poro Sapot Project program monitoring data
** data from Save the Children Poro Sapot Project, but not from a national survey (Trend data not available)
Female Sex Workers (Port Moresby): HIV prevalence, behaviour and prevention coverage

- Condom use at last sex*
- Prevention coverage*
- HIV prevalence**

* 2006 End Project Evaluation survey data and 2009 Save the Children Poro Sapot Project program monitoring data
** 2009 - programme data from Save the Children Poro Sapot Project
More than 12,000 Adults Eligible for Antiretroviral Therapy in 2011

Papua New Guinea

Number of people receiving antiretroviral therapy
HIV testing coverage among key populations at higher risk, (Port Moresby)

* 2006 End Project Evaluation survey data and 2009 Save the Children Poro Sapot Project program monitoring data
More than 1000 Pregnant Women Eligible for Antiretroviral Therapy in 2011

Pregnant women HIV testing

PMTCT coverage

2010

Pregnant women HIV testing

Pregnant women HIV testing

Pregnant women HIV testing

Pregnant women HIV testing

Pregnant women HIV testing

Pregnant women HIV testing
AIDS spending by category

Papua New Guinea

2009

$33,542,343

$3,753,986

$13,036,691

2010

$34,405,116

$5,706,317

$11,097,836

USD

0%

10%

20%

30%

40%

50%

60%

70%

80%

90%

100%

2009

2010

Others

Care and treatment

Prevention

Papua New Guinea
Proportion of total prevention programme spending on key populations at higher risk

- 98% on people who inject drugs in 2009
- 99% on people who inject drugs in 2010
- 1% on men who have sex with men in 2009
- 1% on men who have sex with men in 2010
- 0% on female sex workers in 2009
- 0% on female sex workers in 2010
Stigma & discrimination

Analysis of GARP / NCPI 2012

Legal obstacles to HIV response
- Criminalize men who have sex with men and transgender
- Criminalize people who use drugs
- Criminalize sex work
- Customary and statutory laws obstacles

Selected indicators of response

Access to justice:
- Legal services (legal aid or other)
- NHRI or other mechanisms

Protective laws:

Travel restrictions

STIGMA INDEX
Percent of PLHIV respondents denied health services because of HIV status in past 12 months: N/A

Papua New Guinea
CHALLENGES

• Significant shift in donor focus away from HIV to ‘Gender’ and ‘Climate Change’ resulting in massive reduction in resources to UN and other partners supporting the national response

• Lack of robust leadership for the HIV response in Papua New Guinea at all levels and in all spheres
  - Lapsed National AIDS Council has not been reconstituted for 18 months resulting in lack of oversight and support for the implementing NAC Secretariat

• Return of the national HIV response to the auspices of the National Department of Health, which lacks capacity to resume oversight and management of the response.

GAME CHANGERS

• The reintegration of HIV into the general health program

• The return of donor focus and resources to HIV
PHILIPPINES
24,000 People Living With HIV in 2012

Estimated new HIV infections per year

Falls short of target by ~2500

Number

- Estimated new HIV infections
- 50% reduction by 2015
- Estimated trend to 2015

Philippines
Men Who Have Sex With Men: HIV prevalence, behaviour and prevention coverage

- Prevention coverage
- Condom use at last sex**
- HIV prevalence (National)
- HIV prevalence (Metro Manila)
- HIV prevalence (Cebu)

** during commercial sex
People Who Inject Drugs: HIV prevalence and behaviors

- **Safe injection** (male PWID)
- **Condom use at last sex** (male PWID)
- **HIV prevalence (Cebu)**

**During commercial sex**

- Philippines

**HIV prevalence %**
Number of needle/syringes distributed per person who inject drugs per year

Number of needles/syringes distributed per person who inject drugs per year

Number of needles/syringes

2008  2009  2010  2011

200  200  200  200

Philippines
Female Sex Workers: HIV prevalence, behaviour and prevention coverage

- Prevention coverage
- Condom use at last sex*
- HIV prevalence (National)
- HIV prevalence (Establishment-based)
- HIV prevalence (Freelance)

* with new client in the last week

Philippines
3,800 Adults Eligible for Antiretroviral Therapy in 2011

Number of people receiving antiretroviral therapy

Number

- 3,800 Adults Eligible for Antiretroviral Therapy in 2011

Year

- Philippines
HIV testing coverage among key populations at higher risk

- Female sex workers:
  - 2007: 12%
  - 2009: 19%
  - 2011: 16%

- Men who have sex with men:
  - 2007: 16%
  - 2009: 7%
  - 2011: 5%

- People who inject drugs (male):
  - 2007: 4%
  - 2009: 1%
  - 2011: 5%

Philippines
~250 Pregnant Women Eligible for Antiretroviral Therapy in 2011

Pregnant women HIV testing

PMTCT coverage

2010

0 20 40 60 80 100 %

8
3

Philippines
AIDS Spending by Financing Source

- Total AIDS spending (USD)
- Global fund (USD)
- Domestic funding (USD)

Philippines

193
Proportion of total prevention programme spending on key populations at higher risk

- Philippines

Year | % on people who inject drugs | % on men who have sex with men | % on female sex workers
---|---|---|---
2007 | 1 | 3 | 5
2008 | 4 | 1 | 3
2009 | 4 | 3 | 3
2010 | 0 | 0 | 0
2011 | 0 | 0 | 4

Others

- 96% in 2007
- 88% in 2008
- 92% in 2009
- 93% in 2010
- 91% in 2011
**Stigma & discrimination**

Analysis of GARP / NCPI 2012

**Legal obstacles to HIV response**
- Punitive laws relating to drugs (possession of drug paraphernalia)
- Criminalize sex work (and anti-trafficking law)
- Age of consent for HIV testing (18 years)

**Selected indicators of response**

*Access to justice:*
- Legal services (legal aid or other)
- NHRI or other mechanisms

*Protective laws:*
Civil society rating of efforts to implement human rights-related laws and policies: 2009: 4/10

**Travel restrictions**

**STIGMA INDEX**
Percent of PLHIV respondents denied health services because of HIV status in past 12 months: 8%

Philippines
CHALLENGES

• “The numbers are still too low (in a population of 94 M).”

• Maximizing resources in a climate of funding gap

• Legal, policy and social barriers

GAME CHANGERS

• Sustained high level advocacy

• Investment planning at national (legislative and executive branches) and local (local government units) levels, including private sector

• Approval of the operations research on harm reduction

• Building and brokering partnerships with the CHR, SOGI and PLHIV groups
SRI LANKA
4,200 People Living With HIV in 2011

Estimated new HIV infections

Falls short of target by ~1,200

Sri Lanka
Men Who Have Sex With Men: HIV prevalence, behaviour and prevention coverage

HIV prevalence %

Condom use at last sex
Prevention coverage
HIV prevalence

Sri Lanka
Female Sex Workers: HIV prevalence, behaviour and prevention coverage

- Condom use at last sex
- Prevention coverage
- HIV prevalence (Colombo)

Sri Lanka
1,400 Adults Eligible for Antiretroviral Therapy in 2011

Number of people receiving antiretroviral therapy

Sri Lanka
HIV testing coverage among key populations at higher risk

- Female sex workers: 44%
- Men who have sex with men: 14%
- People who inject drugs: NA

Sri Lanka
<100 Pregnant Women Eligible for Antiretroviral Therapy in 2011

Pregnant women HIV testing

PMTCT coverage

2010

Sri Lanka
AIDS Spending by Financing Source

- **Total AIDS spending (USD)**
- **Global fund (USD)**
- **Domestic funding (USD)**

### Sri Lanka

- **2008**:
  - Total AIDS spending: $265,346
- **2009**:
  - Total AIDS spending: $2,277,906
- **2010**:
  - Total AIDS spending: $4,727,897

---

**USD**

- 0
- 500,000
- 1,000,000
- 1,500,000
- 2,000,000
- 2,500,000
- 3,000,000
- 3,500,000
- 4,000,000
- 4,500,000
- 5,000,000
Proportion of total prevention programme spending on key populations at higher risk

- % on people who inject drugs
- % on men who have sex with men
- % on female sex workers

Sri Lanka
Stigma & discrimination

Analysis of GARP / NCPI 2012

Legal obstacles to HIV response
- Criminalize men who have sex with men
- Punitive laws relating to drugs (compulsory treatment)
- Criminalize sex work
- Public order offences, against sex workers

Selected indicators of response

Access to justice:
- Legal services (legal aid or other)
- NHRI or other mechanisms

Protective laws:
Civil society rating of efforts to implement human rights-related laws and policies: 2009: 3/10  2011: 1/10

STIGMA INDEX
Percent of PLHIV respondents denied health services because of HIV status in past 12 months: N/A
CHALLENGES

• Punitive laws fuel stigma and discrimination for key populations at risk creating barriers to HIV services.

• Low of domestic financial commitments for HIV prevention with key populations at risk.

• Civil society capacity for HIV prevention with populations at risk to HIV still weak.

GAME CHANGERS

• Drive momentum for protective anti-discrimination laws that will neutralize criminalization.

• Cost effectiveness research generated in partnership with civil society.

• Twinning with Centre's of HIV Prevention excellence in the region.
THAILAND
490,000 People Living With HIV in 2011

Estimated adult new HIV infections by sub-population (AEM)

Number

0 20,000 40,000 60,000 80,000 100,000 120,000 140,000 160,000


PWID
Male sex with male
Male from sex worker
Male from wife
Sex worker
Female from Husband
Extramarital

2015 Target: 5,400

People Living With HIV in 2011

2015 Target: 5,400

490,000 People Living With HIV in 2011

Estimated adult new HIV infections by sub-population (AEM)
Men Who Have Sex With Men: HIV prevalence, behaviour and prevention coverage

Condom use at last sex

Prevention coverage

HIV prevalence (Venue-based in Bangkok, Chiang Mai and Phuket)

Prevention coverage is available only for 2010

Thailand
People Who Inject Drugs: HIV prevalence and behaviors

HIV prevalence from IBBS using RDS is available as the first time in 2010

HIV prevalence
Safe injection
Condom use at last sex

Thailand
Number of needle/syringes distributed per person who inject drugs per year

![Graph showing number of needle/syringes distributed in Thailand]

- **2010**: 6
- **2011**: 10

Thailand
310,000 Adults Eligible for Antiretroviral Therapy in 2011

Number of people receiving antiretroviral therapy

Number


Thailand
HIV testing coverage among key populations at higher risk

- Female sex workers: 50%
- Men who have sex with men: 29%, 35%, 29%
- People who inject drugs: 41%

Trend data before 2010 for FSW and PWID is not available.
3,600 Pregnant Women Eligible for Antiretroviral Therapy in 2011

Pregnant women HIV testing: 94%

PMTCT coverage: 95%

Pregnant Women Eligible for Antiretroviral Therapy in 2011
Proportion of total prevention programme spending on key populations at higher risk

Thailand
Stigma & discrimination

Analysis of GARP / NCPI 2012

Legal obstacles to HIV response
- Criminalize people who use drugs
- Criminalize sex work
- Discriminate against migrants
- Age of consent for HIV testing (18 years)

Selected indicators of response

Access to justice:
- Legal services (legal aid or other)
- NHRI or other mechanisms

Protective laws:
Civil society rating of efforts to implement human rights-related laws and policies: 2009: 4/10  2011: 2/10

STIGMA INDEX
Percent of PLHIV respondents denied health services because of HIV status in past 12 months: 20%
CHALLENGES

• Response shaped by decade old concepts and approaches

• Low HCT uptake especially among key populations

• Quantity and quality of classical BCI for key populations

GAME CHANGERS

• Repositioning of AIDS

• More HCT options incl. home testing, community counseling & testing, PICT

• Strategic use of ARV
VIET NAM
248,485 People Living With HIV in 2011

Estimated new HIV infections

Falls short of target by ~ 5,600

2015 Target

Estimated new HIV infections

50% reduction by 2015

Estimated trend to 2015

Viet Nam
Men Who Have Sex With Men: HIV prevalence, behaviour and prevention coverage

- Condom use at last sex
- Prevention coverage
- HIV prevalence

Viet Nam
People Who Inject Drugs: HIV prevalence and behaviors

*Safe injection (male PWID)*
- 2005: 89
- 2011: 95

*Condom use at last sex (male PWID)*
- 2005: 36
- 2011: 13.4

*HIV prevalence (male PWID)*
- 2005: 89
- 2011: 95

Viet Nam
Number of needle/syringes distributed per person who inject drugs per year

- 2008: 181
- 2009: 124
- 2010: 141
- 2011: 140

Viet Nam
Female Sex Workers: HIV prevalence, behaviour and prevention coverage

HIV prevalence %

- Condom use at last sex
- Prevention coverage
- HIV prevalence (HSS)

Viet Nam
100,000 Adults Eligible for Antiretroviral Therapy in 2011

Number of people receiving antiretroviral therapy

- 2005: 0
- 2006: 0
- 2007: 0
- 2008: 0
- 2009: 0
- 2010: 0
- 2011: 60,935
- 2012: 90,726
- 2013: 106,793

Viet Nam
HIV testing coverage among key populations at higher risk

- Female sex workers: 12% (2004), 15% (2005-06), 35% (2010)
- Men who have sex with men: 16% (2004), 19% (2010)
- People who inject drugs (male): 11% (2004), 11% (2005-06), 18% (2010)
1,000 Pregnant Women Eligible for Antiretroviral Therapy in 2011

Pregnant women HIV testing  PMTCT coverage

2010

52

46

26

0  20  40  60  80  100 %
AIDS Spending by Financing Source

Viet Nam

Total AIDS spending (USD)  Global fund (USD)  Domestic funding (USD)

2007: 139,253,245
2008: 6,650,517
2009: 21,431,087
Proportion of total prevention programme spending on key populations at higher risk

- **Others**
  - 2008: 73%
  - 2009: 74%
  - 2010: 73%

- **% on people who inject drugs**
  - 2008: 15%
  - 2009: 14%
  - 2010: 18%

- **% on men who have sex with men**
  - 2008: 3%
  - 2009: 2%
  - 2010: 2%

- **% on female sex workers**
  - 2008: 9%
  - 2009: 10%
  - 2010: 6%

Viet Nam
Stigma & discrimination

Analysis of GARP / NCPI 2012

Legal obstacles to HIV response
- Criminalize sex work
- Compulsory detention of people who use drugs and (recently abolished) sex workers

Selected indicators of response

Access to justice:
- Legal services (legal aid or other)
- NHRI or other mechanisms

Protective laws:
Civil society rating of efforts to implement human rights-related laws and policies: 2009: 5/10  2011: 5/10

STIGMA INDEX
Percent of PLHIV respondents denied health services because of HIV status in past 12 months: N/A
**CHALLENGES**

- Compulsory detention and stigma & discrimination are formidable barriers to HIV service uptake
- An expected rapid decline in donor support threatens the sustainability of HIV services
- Vertical and suboptimal efficiency delivery of HIV testing, treatment and care services

**GAME CHANGERS**

- Persistent policy advocacy to end compulsory detention and adopt rights-based and evidence-informed approaches
- Government’s development of a resource mobilization strategy to increase domestic funding
- Piloting and expansion of point-of-care services with increased community involvement through the Treatment 2.0 pilot