7th IAS Conference on HIV Pathogenesis, Treatment and Prevention

Tracking the HIV/AIDS epidemic in Asia and the Pacific

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United Nations Secretary-General’s Special Envoy for AIDS in Asia and the Pacific

3 July 2013
Kuala Lumpur, Malaysia
1. Epidemic and response
2. Financing AIDS response
3. Legal environment
4. HIV/AIDS and post 2015 development agenda
Epidemic and response
## State of the epidemic: Global and Asia and the Pacific

<table>
<thead>
<tr>
<th>Category</th>
<th>Global</th>
<th>Asia and the Pacific</th>
</tr>
</thead>
<tbody>
<tr>
<td>People living with HIV</td>
<td>34,000,000 [31,400,000 – 35,900,000]</td>
<td>4,900,000 [3,900,000 – 6,100,000]</td>
</tr>
<tr>
<td>Women living with HIV</td>
<td>15,000,000 [13,900,000 – 15,700,000]</td>
<td>1,600,000 [1,200,000 – 2,100,000]</td>
</tr>
<tr>
<td>Children living with HIV</td>
<td>3,300,000 [3,100,000 – 3,800,000]</td>
<td>170,000 [150,000 – 200,000]</td>
</tr>
<tr>
<td>New HIV infections</td>
<td>2,500,000 [2,200,000 – 2,800,000]</td>
<td>370,000 [250,000 – 550,000]</td>
</tr>
<tr>
<td>Adult HIV prevalence</td>
<td>0.8 % [0.7% – 0.8%]</td>
<td>0.2 % [0.2% – 0.2%]</td>
</tr>
<tr>
<td>AIDS-related deaths</td>
<td>1,700,000 [1,500,000 – 1,900,000]</td>
<td>310,000 [240,000 – 400,000]</td>
</tr>
</tbody>
</table>

### Epidemic and response: Asia and the Pacific and Sub-Saharan Africa

<table>
<thead>
<tr>
<th>Type of epidemic</th>
<th>Sub-Saharan Africa</th>
<th>Asia and the Pacific</th>
</tr>
</thead>
<tbody>
<tr>
<td>Generalized</td>
<td>Concentrated among key populations</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Populations affected by AIDS</th>
<th>Sub-Saharan Africa</th>
<th>Asia and the Pacific</th>
</tr>
</thead>
<tbody>
<tr>
<td>General population: men, women, and young people</td>
<td>Sex workers and their clients, Men who have sex with men, Transgender, People who inject drugs, and all of their intimate partners</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Burden of epidemic</th>
<th>Sub-Saharan Africa</th>
<th>Asia and the Pacific</th>
</tr>
</thead>
<tbody>
<tr>
<td>23.5 million People living with HIV</td>
<td>4.9 million People living with HIV</td>
<td></td>
</tr>
<tr>
<td>1.8 million New infections</td>
<td>370,000 New infections</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Prevention interventions</th>
<th>Sub-Saharan Africa</th>
<th>Asia and the Pacific</th>
</tr>
</thead>
<tbody>
<tr>
<td>Larger population sizes but relatively easier to reach</td>
<td>Relatively smaller populations but more difficult to reach due to stigma and legal barriers</td>
<td></td>
</tr>
</tbody>
</table>
Disease burden: Asia and Sub-Saharan Africa

- South-East Asia, East Asia, and Oceania: 3.2%
- South Asia: 5.6%
- Sub-Saharan Africa: 16%

Source: http://www.healthmetricsandevaluation.org
New HIV infections in Asia and the Pacific region

Significant decline in new HIV infections in the last decade, but slow-down between 2008 and 2011

Example of countries with declining new HIV infections

<table>
<thead>
<tr>
<th>Country</th>
<th>2001</th>
<th>2008</th>
<th>2011</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cambodia</td>
<td>69% decline</td>
<td>42% decline</td>
<td>27% decline</td>
</tr>
<tr>
<td>Myanmar</td>
<td>57% decline</td>
<td>27% decline</td>
<td>19% decline</td>
</tr>
<tr>
<td>Nepal</td>
<td>73% decline</td>
<td>48% decline</td>
<td>28% decline</td>
</tr>
<tr>
<td>PNG</td>
<td></td>
<td>19% decline</td>
<td></td>
</tr>
</tbody>
</table>

Same is true for countries where the epidemic is slowing down

Half of all new infections among MSM by 2020 if ‘business as usual’- Commission on AIDS in Asia

HIV prevalence among MSM vs. adults

Key populations are central to the epidemic but not enough are reached by prevention services.

**Key populations reached by prevention services, regional median, 2011**

- **Female sex workers**: 51%
- **Male sex workers**: 37%
- **Men who have sex with men**: 57%
- **People who inject drugs**: 118

**Number of needles and syringes distributed per PWID per year**

**Prevention programme coverage (%)**

Proportion of consistent condom use and HIV prevalence among MSM

Stagnating consistent condom use among MSM - impact on HIV prevalence

Consistent condom use among female sex workers with their clients

Correlation between safe injecting and HIV prevalence among PWID

Nepal, Kathmandu (2002-2011)

Pakistan, Lahore (2005-2011)

Consistent use of sterile injecting equipment *  
HIV prevalence

Pakistan (Lahore, 2011)  
Indonesia (2011)  
Bangladesh (Dhaka, 2011)**  
India (Maharastra, 2009-10)  
Myanmar (Yangon, 2012)***  
Nepal (Kathmandu, 2011)

* Duration of consistent use of sterile injecting equipment varies from last week to last 6 months;
** Behavioral data for 2006-07, Never used used-needles and syringes;
*** Behavioral data for 2008

Source: Prepared by www.aidsdatahub.org based on National HIV Sentinel Surveillance reports, Integrated Biological and Behavioral Surveillance reports and other reports
Prevention of mother-to-child transmission coverage, by region, 2010 and 2011

Only one in five pregnant women living with HIV received effective ART regimens for PMTCT in South and South-East Asia

Source: 2012 country progress reports (www.unaids.org/cpr) and UNAIDS estimates.
Percentage reduction in new HIV infections among children, 2009 to 2011

Progress *NOT* apparent in eliminating new HIV infections among children

Though HIV is concentrated among key populations, less than half of them know their HIV status.

1.1 million people are receiving antiretroviral therapy – lagging behind global trend

Correlation between high level of treatment coverage and decline in new infections

**Botswana**
- 44% of people currently on ART have been on treatment since 2006.
- 36% decline in new HIV infections.

**Kenya**
- 23% of people currently on ART have been on treatment since 2006.
- 17% decline in new HIV infections.

Prepared by [www.aidsdatahub.org](http://www.aidsdatahub.org) based on [www.aidsinfoonline.org](http://www.aidsinfoonline.org)
HIV-1 drug resistance in ARV-naïve populations

As ART coverage continues to grow, there is evidence of drug resistance emerging

Source: Stanford University HIV Drug Resistance Database at http://hivdb.stanford.edu/surveillance/map/
Financing AIDS response
Trends in domestic public and international AIDS spending, global and the Asia and the Pacific

**Global**
- 2008: 43%
- 2009: 57%
- 2010: 50%
- 2011: 51%

**Asia and the Pacific**
- 2008: 49%
- 2009: 43%
- 2010: 50%
- 2011: 51%

**Source:**

*Decreasing dependence on external aid*
HIV expenditure from domestic sources, Asia and the Pacific

Investing in AIDS: Shared responsibility in Asia and the Pacific

Resources needed for HIV in low- and middle-income countries in 2015

Source: UNAIDS 2012 Global Report

- Need in 2015: US$ 24 billion
  - Current HIV investments: US$ 16.8 billion
  - Key populations at higher risk: US$ 1.7 billion, US$ 228 million
  - Male circumcision: US$ 134.5 million, US$ 26.5 million
  - Investments for basic HIV prevention and treatment programmes: US$ 10.7 billion, US$ 5.7 billion
  - Condom promotion: US$ 300 million, US$ 110 million
  - Behavioural Change: US$ 625 million, US$ 70 million
  - Prevention of mother-to-child transmission: US$ 1.1 billion, US$ 201 million

- Investment needs in 2015
- Current investments
Total AIDS spending and amount spent on key populations prevention programmes

AIDS spending in Asia and the Pacific – low on High Impact Prevention

Source: Prepared by www.aidsdatahub.org based on www.aidsinfoonline.org
Legal environment
Adverse legal environment - Why the law matters?

WHY THE LAW MATTERS

Annual number of new HIV infections among adults aged 15–49

- historical trend
- current trend
- structural change*

* change to legal and policy environment

Source: Results for Development Institute, Costs & Choices: Financing the Long-Term Fight Against AIDS, An aids2031 Project, 2010.
MITIGATING THE HARM

Comprehensive, consistently implemented harm reduction without punitive approaches

UK
Switzerland
Germany
Australia

% HIV prevalence among people who inject drugs

Consistent resistance to harm reduction and punitive approaches

Thailand
Russia

% HIV prevalence among people who inject drugs

MEN WHO HAVE SEX WITH MEN, LAW & HIV

Sample of African & Caribbean countries that criminalise same-sex sexual activity

- Senegal***
- Zambia*
- Jamaica
- Guyana
- Trinidad and Tobago

% HIV prevalence among men who have sex with men

Sample of African & Caribbean countries that do not criminalise same-sex sexual activity

- Burkina Faso***
- South Africa***
- Dominican Republic
- Bahamas
- Suriname
- Cuba

% HIV prevalence among men who have sex with men

Note: Estimated prevalence for Jamaica ranges from 25–30%.
Sources:
*** Data based on the UNAIDS Reports.
HIV/AIDS in post 2015 development agenda
### Millennium Development Goal 6: Global progress by region, 2012

#### Goal 6: Combat HIV/AIDS, malaria and other diseases

<table>
<thead>
<tr>
<th>Goals and Targets</th>
<th>Africa</th>
<th>Asia</th>
<th>Oceania</th>
<th>Latin America &amp; Caribbean</th>
<th>Caucasus &amp; Central Asia</th>
</tr>
</thead>
<tbody>
<tr>
<td>Halt and begin to reverse the spread of HIV/AIDS</td>
<td>Northern</td>
<td>Sub-Saharan</td>
<td>Eastern</td>
<td>South-Eastern</td>
<td>Southern</td>
</tr>
<tr>
<td>Halt and reverse the spread of TB</td>
<td>Low mortality</td>
<td>High mortality</td>
<td>Low mortality</td>
<td>Moderate mortality</td>
<td>Low mortality</td>
</tr>
</tbody>
</table>

The progress chart operates on two levels. The word in each box indicate the present degree of compliance with the target. The colours show progress towards the target according to the legend below:

- **Green**: Target already met or expected to be met by 2015.
- **Yellow**: Progress insufficient to reach the target if prevailing trends persist.
- **Orange**: No progress or deterioration.

### Status of progress towards MDG targets in Asia and the Pacific, 2010-11

<table>
<thead>
<tr>
<th>Country</th>
<th>HIV prevalence</th>
<th>TB incidence</th>
<th>TB prevalence</th>
</tr>
</thead>
<tbody>
<tr>
<td>Asia and the Pacific</td>
<td>●●●</td>
<td>●●</td>
<td>●●●</td>
</tr>
<tr>
<td>Cambodia</td>
<td>●●●●</td>
<td>●●●●</td>
<td>●●●</td>
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<tr>
<td>China</td>
<td>●●●●</td>
<td>●●●●</td>
<td>●●●</td>
</tr>
<tr>
<td>India</td>
<td>●●●●</td>
<td>●●●</td>
<td>●●●</td>
</tr>
<tr>
<td>Indonesia</td>
<td>●●●●</td>
<td>●●●</td>
<td>●●●</td>
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<tr>
<td>Lao PDR</td>
<td>●●●●</td>
<td>●●●●</td>
<td>●●●</td>
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<tr>
<td>Malaysia</td>
<td>●●●●</td>
<td>●●●●</td>
<td>●●●</td>
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<tr>
<td>Myanmar</td>
<td>●●●●</td>
<td>●●●</td>
<td>●●●</td>
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<tr>
<td>Nepal</td>
<td>●●●●</td>
<td>●●●</td>
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<tr>
<td>Pakistan</td>
<td>●●●●</td>
<td>●●●</td>
<td>●●●</td>
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<tr>
<td>Philippines</td>
<td>●●●●</td>
<td>●●●●</td>
<td>●●●</td>
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<tr>
<td>Thailand</td>
<td>●●●●</td>
<td>●●●</td>
<td>●●●</td>
</tr>
<tr>
<td>Viet Nam</td>
<td>●●●●</td>
<td>●●●</td>
<td>●●●</td>
</tr>
</tbody>
</table>

**Legend:**
- ● Early achiever
- ▲ On track
- ○ Slow
- ▼ Regressing/No progress

Post 2015 development agenda

• UNSG’s High Level Panel of Eminent Persons
• Rio + 20 Conference on Sustainable Development
• Task Team for Global Thematic Consultation on Health

Is HIV/AIDS a priority?
HLP report - Proposed new health MDGs: Post 2015

• 4a. End preventable infant and under-5 deaths,
• 4b. Increase by x% the proportion of children, adolescents, at-risk adults and older people that are fully vaccinated
• 4c. Decrease the maternal mortality ratio to no more than x per 100,000
• 4d. Ensure universal sexual and reproductive health and rights
• 4e. Reduce the burden of disease from HIV/AIDS, tuberculosis, malaria, neglected tropical diseases and priority non-communicable diseases
## MDG on AIDS 2015 and 2030

<table>
<thead>
<tr>
<th>Millennium Development Goal of 2015</th>
<th>Post 2015</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Goal 6: Combat HIV/AIDS, malaria and other diseases</strong></td>
<td>4e. Reduce the burden of disease from HIV/AIDS, tuberculosis, malaria, neglected tropical diseases and priority non-communicable diseases</td>
</tr>
<tr>
<td>Target 6.A: Have halted by 2015 and begun to reverse the spread of HIV/AIDS</td>
<td></td>
</tr>
<tr>
<td>Target 6.B: Achieve, by 2010, universal access to treatment for HIV/AIDS for all those who need it</td>
<td></td>
</tr>
<tr>
<td>Target 6.C: Have halted by 2015 and begun to reverse the incidence of malaria and other major diseases</td>
<td></td>
</tr>
</tbody>
</table>
• Country support in UN General Assembly for a specific MDG for ending AIDS by 2030.

• Donors and UN agencies need to support the call to end AIDS by 2030.

• Civil society pressure crucial
Global response to HIV/AIDS is delicately balanced.

We need to firmly tilt it towards the goal of elimination.
Thank you