UNAIDS perspective on regional HIV priorities

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Despite earlier achievements, the decline in new HIV infections has stalled during the past 7 years.

Global

- New HIV infections in 2017: 1,800,000
- Fast-Track Target 2020: 500,000

Asia and the Pacific

- New HIV infections in 2017: 280,000
- Fast-Track Target 2020: 90,000

*The 2020 target is equivalent to a 75% reduction since 2010.
HIV is not over yet!
Miles to go and gaps to address

Percent change in new HIV infections between 2010 and 2017

<table>
<thead>
<tr>
<th>Country</th>
<th>% Increase</th>
<th>% Decrease</th>
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</thead>
<tbody>
<tr>
<td>India</td>
<td>-27%</td>
<td>-29%</td>
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<tr>
<td>Indonesia</td>
<td>-19%</td>
<td>-29%</td>
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<td>Malaysia</td>
<td>9%</td>
<td>-56%</td>
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<td>Philippines</td>
<td>45%</td>
<td>-38%</td>
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<tr>
<td>Viet Nam</td>
<td>174%</td>
<td>-100%</td>
</tr>
</tbody>
</table>

HIV testing and treatment cascade, 2017

- India: 3.8 million PLHIV who know their status, 2.7 million PLHIV on treatment, 2.3 million PLHIV who are virally suppressed
- Malaysia: 0.8 million PLHIV who know their status, 1.5 million PLHIV on treatment, 1.4 million PLHIV who are virally suppressed

Source: Prepared by www.aidsdatahub.org based on UNAIDS 2018 HIV Estimates
Urgent need for focused response: location-population approach!

Distribution of new HIV infections by country in Asia and the Pacific

- China (22%)
- Indonesia (49,000, 18%)
- India (88,000, 31%)
- Pakistan (20,000, 7%)
- Philippines (12,000, 4%)
- Vietnam (11,000, 4%)
- Thailand (7,800, 3%)
- Malaysia (7,800, 3%)
- Others (4%)

9 countries account for 96% of total 280,000 new HIV infections in Asia Pacific

Share of new HIV infections by population in Asia and the Pacific

- Sex workers
- People who inject drugs
- Men who have sex with men
- Clients of sex workers and partners of key populations
- Transgender
- Rest of population

84% of new HIV infections among key populations and their partners

96% of total 280,000 new HIV infections in Asia Pacific

1 in 2 people in Asia and the Pacific are active social media users on mobile devices

Source: We are social and Hootsuite (2019). Digital 2019: Essential insights into how people around the world use the internet, mobile devices, social media, and e-commerce
Digitalization and its consequences: changing pattern of meeting and finding sex partners

% of MSM who used internet to find sex partners
(among those who are physically recruited through Integrated Biological and Behavioural surveys)

- 23% in Papua New Guinea
- 33% in Sri Lanka
- 38% in Philippines
- 50% in Timor-Leste (Bacau)

Source: Prepared by www.aidsdatahub.org based on Integrated Biological and Behavioural Surveys
Risk profiles of MSM who use social platforms to find sexual partners

Findings from internet-based survey of Vietnamese MSM

- **70%** were in the age bracket of 18-25
- **66%** had multiple sex partners
- **66%** were hidden MSM (Bong Kin)
- **77%** never tested for HIV

Mind the gap: use innovations to maximize prevention effect

Prevention gap, select countries and populations

Lao PDR, Men who have sex with men

8%

Philippines, Transgender women

27%

Malaysia, Female sex workers

40%

Bangladesh, People who inject drugs

28%

* any 2 out of 3 services - condom and lubricants, counselling, and STI screening/needles and syringes for PWID

PrEP availability through pilot/demonstration sites by key populations, March 2018

Note: Although PrEP demonstration and pilot projects are available for key populations in the region, only Australia, New Zealand, and Thailand provide/have planned to provide PrEP at national scale.

Source: Prepared by www.aidsdatahub.org based on Global AIDS Monitoring (GAM) Reporting 2017 and 2018
About half of key populations do not know their HIV status – missing data from most countries in the room

HIV testing coverage among key populations, 2014 - 2017

- Female sex workers: 42%
- Men who have sex with men: 54%
- Transgender people: 55%
- People who inject drugs: 44%

Regional median

Source: Prepared by www.aidsdatahub.org based on Global AIDS Monitoring (GAM) Reporting 2017 and 2018
Availability of community-based, lay provider, and self HIV testing approaches in Asia and the Pacific, 2018

Source: www.aidsdatahub.org, based on National Commitments and Policies Instrument of Global AIDS Monitoring (GAM) 2017 and 2018
Current treatment scale-up has made significant achievement but several countries are lagging behind.

<table>
<thead>
<tr>
<th>Country</th>
<th>ART coverage (%)</th>
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<tbody>
<tr>
<td>Pakistan</td>
<td>&lt; 30%</td>
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<tr>
<td>Indonesia</td>
<td>30-59%</td>
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<tr>
<td>Bangladesh</td>
<td>30-59%</td>
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<td>Mongolia</td>
<td>30-59%</td>
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<td>Philippines</td>
<td>60-80%</td>
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<td>Sri Lanka</td>
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<td>Malaysia</td>
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<td>Lao PDR</td>
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<td>Nepal</td>
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<td>Viet Nam</td>
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<td>India</td>
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<td>Myanmar</td>
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<td>Thailand</td>
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<td>Australia</td>
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<td>Japan</td>
<td>≥ 81%</td>
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<tr>
<td>Cambodia</td>
<td>≥ 81%</td>
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</tbody>
</table>

Evolution of information systems is not fast enough to mirror emerging and changing data needs

- *Programme focused* M&E systems to *people centered strategic information systems*

- *Programme performance* to *individual tracking* for sustained prevention, care and treatment

- People centered approach also demands for monitoring of *integrated health needs* (e.g. TB, hepatitis, reproductive health) rather than single disease approach

- Advancement in bio-medical prevention coupled with changing dynamics in behavior pattern of key populations bring the *paradigm shift of prevention intervention and services* (and so should the M&E system!)
## Surveillance choices and periodicity of surveys for key populations in select countries

<table>
<thead>
<tr>
<th>Country</th>
<th>FSW</th>
<th>MSM</th>
<th>TG</th>
<th>PWID</th>
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<tbody>
<tr>
<td>Periodicity</td>
<td>Undefined</td>
<td>Undefined</td>
<td>Every 4-5 years</td>
<td>Undefined</td>
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</tbody>
</table>

###Serological survey
- **IBBS**: Institute of Blood Bank Services
- **SGS**: Suspected Genetic Services

###Behavioural survey
- **IBBS**: Institute of Blood Bank Services

###Periodicity
- Undefined
- Every 4-5 years
- Every 3-4 years
- Annual since 2015
- Every 2-3 years
- Every 3-4 years

###Notes
- **FSW**: For FSW, survey was conducted in 3 cities - Port Moresby, Lae and Mt. Hagen.
- **MSM**: For MSM, survey was conducted only in the capital city.
- **TG**: For MSM, survey was conducted only in the capital city.
- **PWID**: For FSW, survey was conducted in 3 cities - Port Moresby, Lae and Mt. Hagen.
- **Mixed sample of MSM and TG**: Mixed sample of MSM and TG.

###Prepared by
[www.aidsdatahub.org](http://www.aidsdatahub.org) based on survey reports and Global AIDS Monitoring Reporting
### Availability of data on key indicators through GAM and/or survey reports in the last 4 years (2015 to 2018)

<table>
<thead>
<tr>
<th>Indicator</th>
<th>Population</th>
<th>Afghanistan</th>
<th>Bhutan</th>
<th>Iran</th>
<th>Lao PDR</th>
<th>Mongolia</th>
<th>Nepal</th>
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<th>Sri Lanka</th>
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* Mixed sample of MSM and TG

Prepared by [www.aidsdatahub.org](http://www.aidsdatahub.org) based on survey reports and Global AIDS Monitoring Reporting
Breakdown the silos: from segmented strategic information systems to synchronized strategic information systems

Global M&E framework and system

National M&E framework and system

Donor agencies M&E framework and system

Data from the community

Prepared by www.aidsdatahub.org
Priorities and gaps: Data, system, and coordination

- Coordination challenges
- Data harmonization
- Data accessibility and transparency
- Ownership and reporting challenges
- Capacity to keep up with changing M&E needs and subsequent need to modify the system at both national and sub-national levels
- Exorbitant cost
Solutions to leverage AIDS response in Asia and the Pacific

- Pre-exposure prophylaxis (PrEP)
- Innovative testing methods
- Self-reliance on AIDS financing
- People centered and integrated multi-disease approaches
- Universal health coverage
Key programmatic issues from regional perspective

- Sub-optimal commitments, strategies and efforts for sustained prevention and care continuum
- Conservative service delivery models and packages coupling with slow progress to adopt innovative tools and approaches such as PrEP, self-testing and partner/index testing
- Weak integrated efforts and missed opportunities
- Prevention effect of treatment is not yet maximized particularly among key populations and their partners
- Urgent need to scale up viral load testing to maximize the benefits of U = U in the region
- Heavy international reliance on prevention funding particularly for key populations
- Stigma, structural and policy barriers in accessing health, HIV prevention and treatment services

Source: www.aidsdatahub.org
THANK YOU

www.aidsdatahub.org