



Reaching out to key populations in digital age: challenges and way forward

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 AIDS is not yet over in Asia and the Pacific

 Global phenomenon of digitalization and implications
for reaching key populations

 People centered approach and innovations

 Challenges and way forward

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Journey of AIDS by the numbers

Since the beginning of the epidemic -

Globally...

77 million people have become infected with HIV
population size of Turkey

35 million people have died from AIDS-related illnesses
population size of Canada

In Asia and the Pacific...

12 million people have become infected with HIV
Almost twice the population size of Lao PDR

6 million people have died from AIDS-related illnesses
population size of Singapore

Getting to zero



Asia and the Pacific Fast-Track Targets

By 2020

Fewer than

90 000

new infections

More than

4.2 million

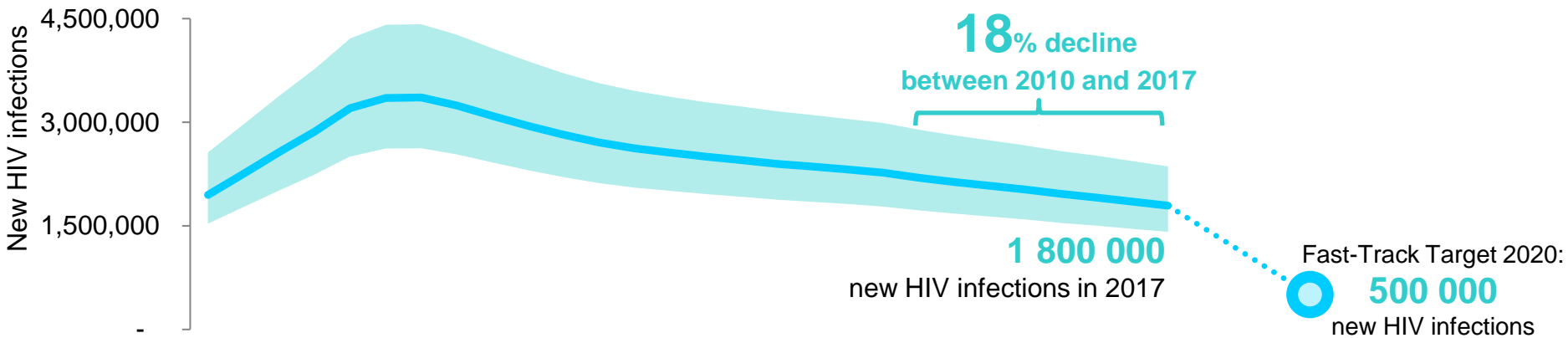
on treatment

ZERO

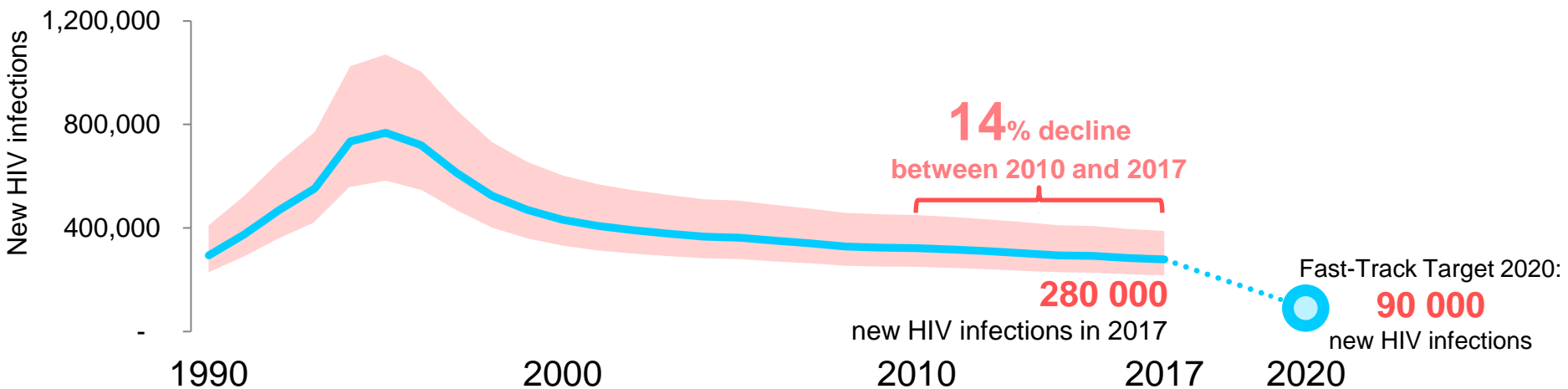
discrimination

HIV response has achieved notable success in declining new infections globally and regionally, but during the past 7 years the decline in new HIV infections has stalled

Global



Asia and the Pacific



— New HIV infections ● 2020 Fast-Track target*

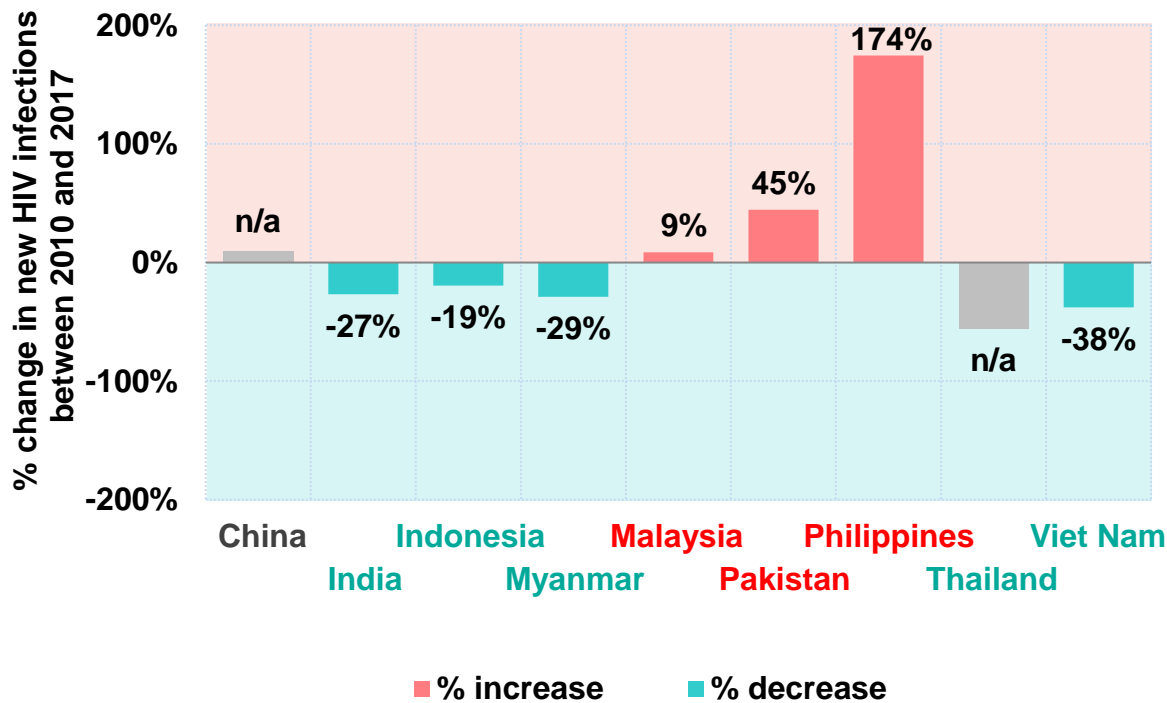
*The 2020 target is equivalent to a 75% reduction since 2010.



Source: Prepared by www.aidsdatahub.org based on UNAIDS 2018 HIV Estimates

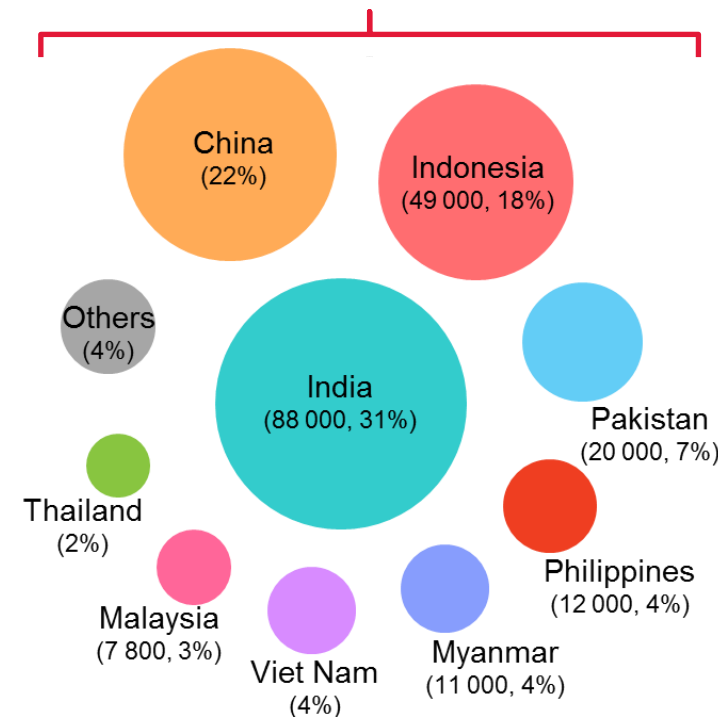
A significant variation in new HIV infections trends in Asia and the Pacific countries

Percent change in new HIV infections between 2010 and 2017



Distribution of new HIV infections by country, 2017

280 000 new HIV infections in Asia and the Pacific in 2017

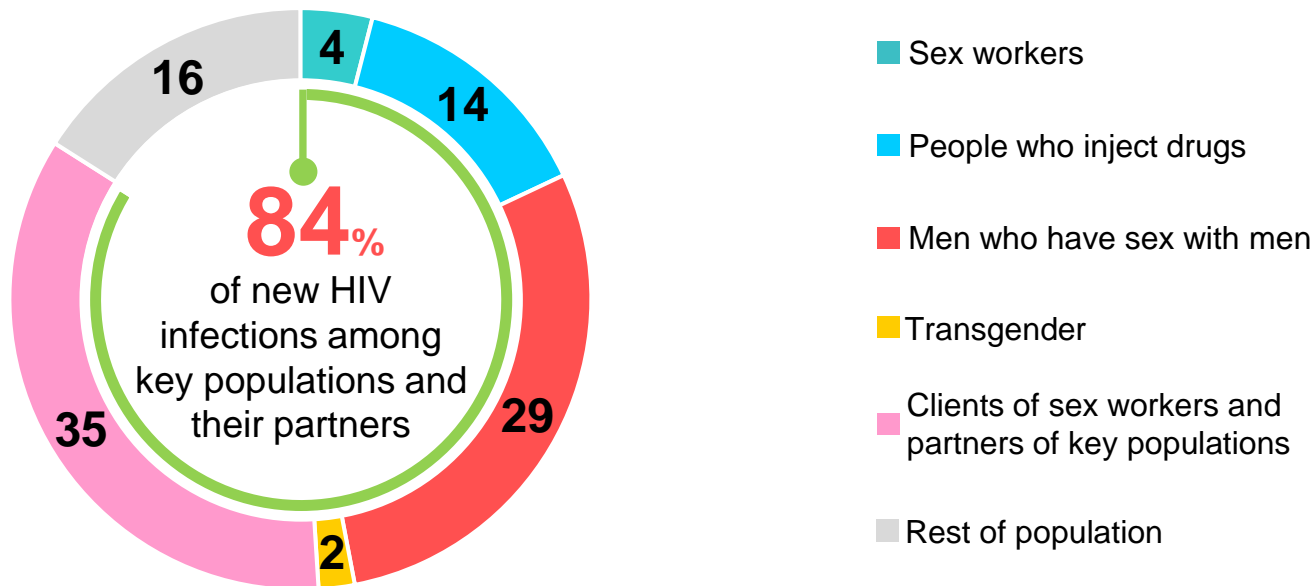


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84% of new HIV infections in Asia and the Pacific are concentrated among key populations and their sexual partners

Distribution of new HIV infections by population, 2017



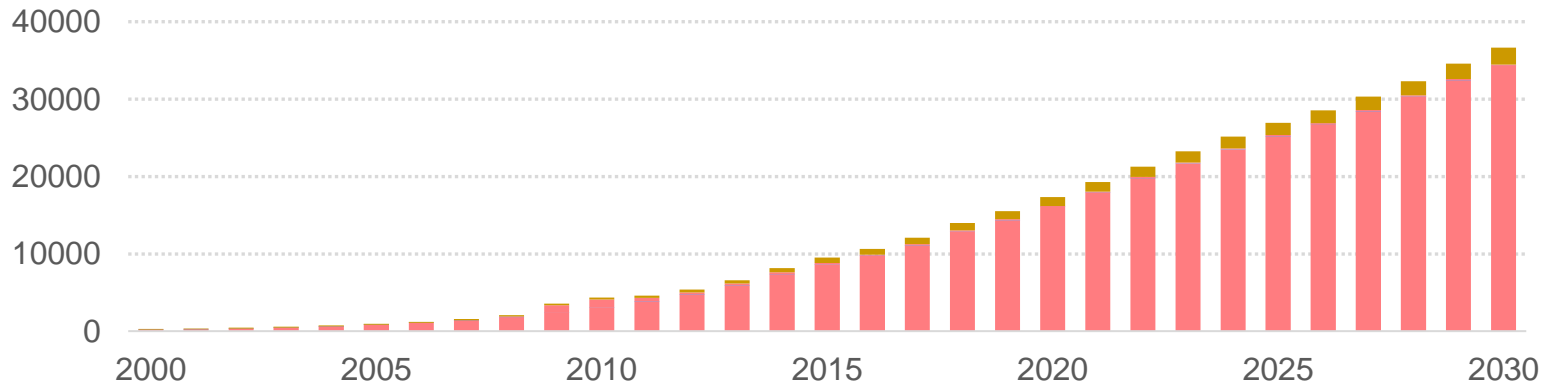
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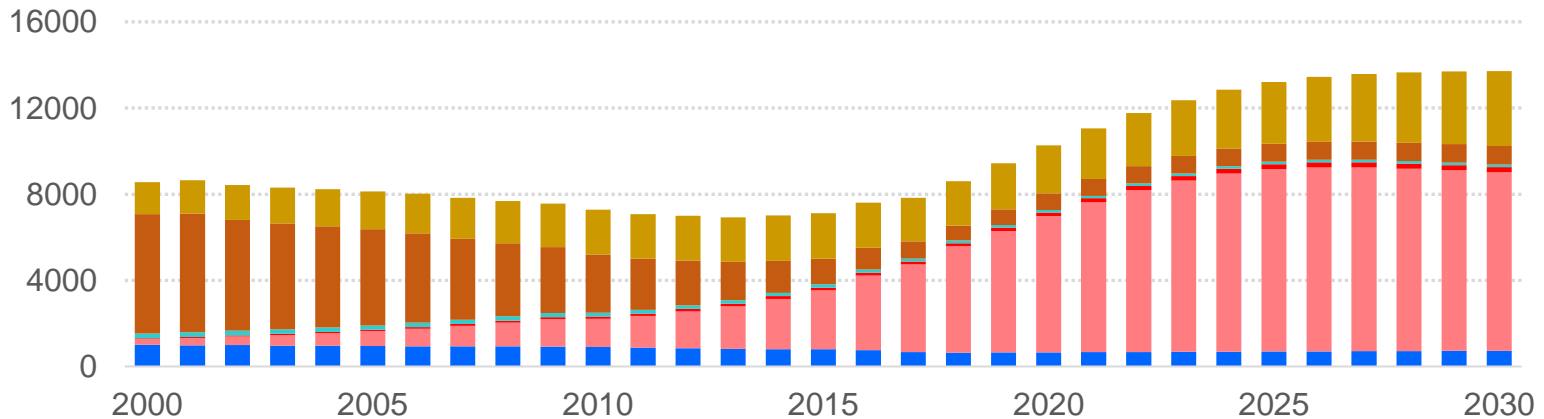
New HIV infections will escalate if we continue “business as usual”

Philippines

New HIV infections by population group, 2000-2030



Malaysia



- Clients of sex workers
- Men who have sex with men
- Transgender people
- Female sex workers
- People who inject drugs
- Rest of population

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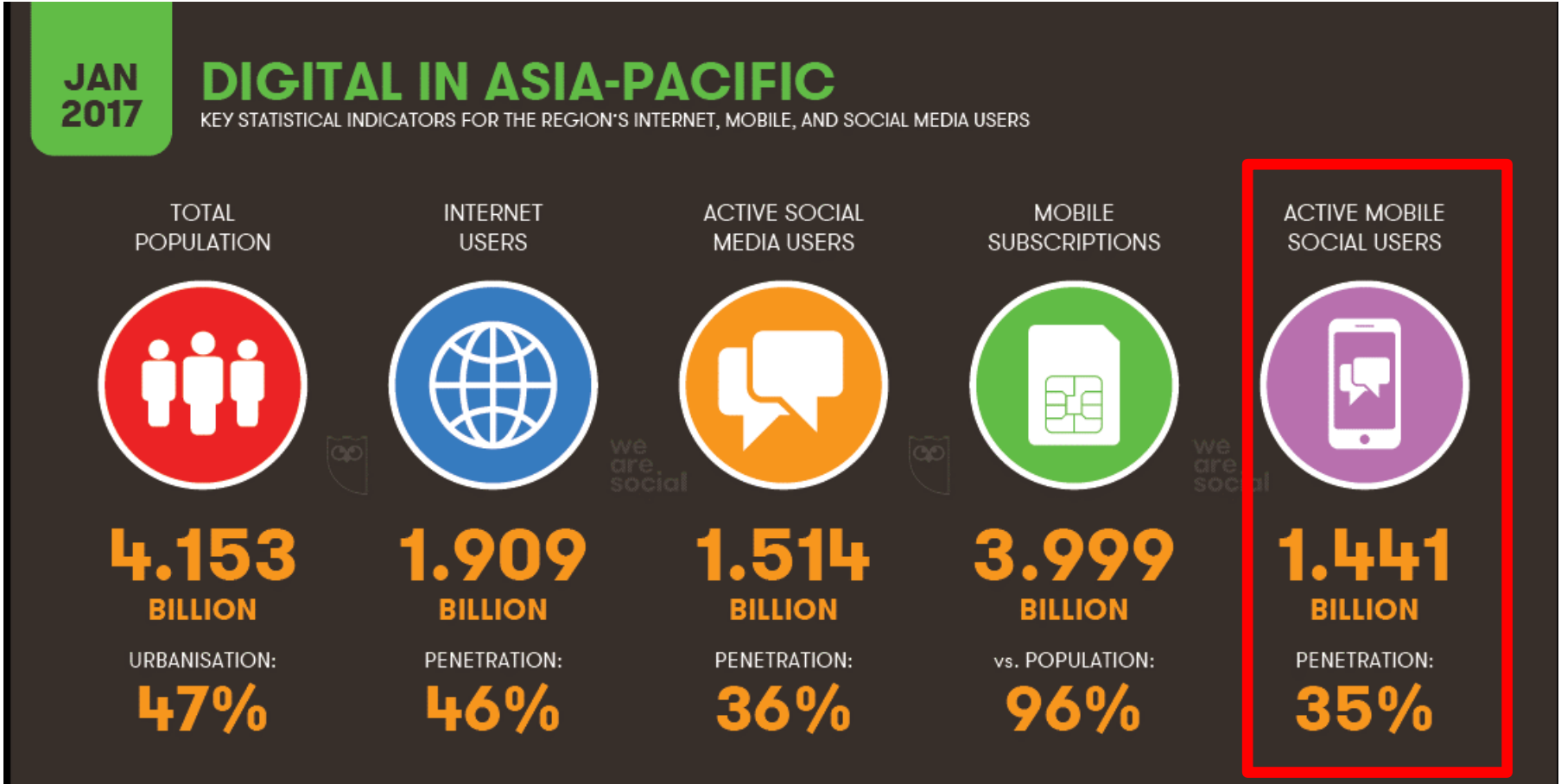
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1 in 3 people in Asia and the Pacific are active social media users on mobile devices

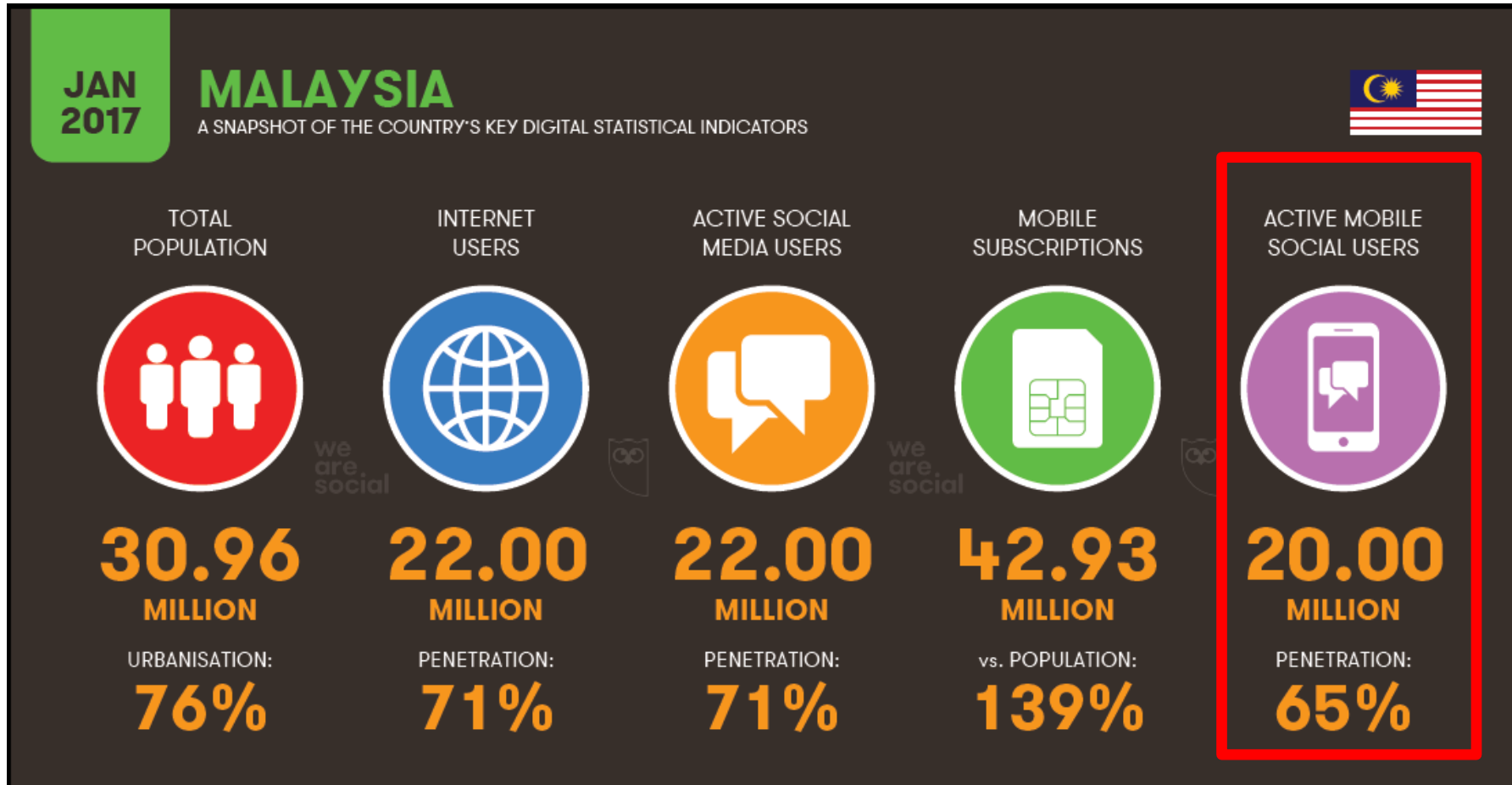


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Source: We are social. (2017). Digital in 2017 based on Population: United Nations; U.S. Census Bureau; Internet: Internetworldstats; Itu; Internetlivestats; Cia World Factbook; Facebook; National Regulatory Authorities; Social Media And Mobile Social Media: Facebook; Tencent; Vkontakte; Liveinternet.Ru; Kakao; Naver; NikiAghaei; Cafebazaar.Ir; Similarweb; Ding; Extrapolation of TNS Data; Mobile: GSMA Intelligence; Extrapolation of E-marketer and Ericsson Data.

2 in 3 people in Malaysia are active social media users on mobile devices

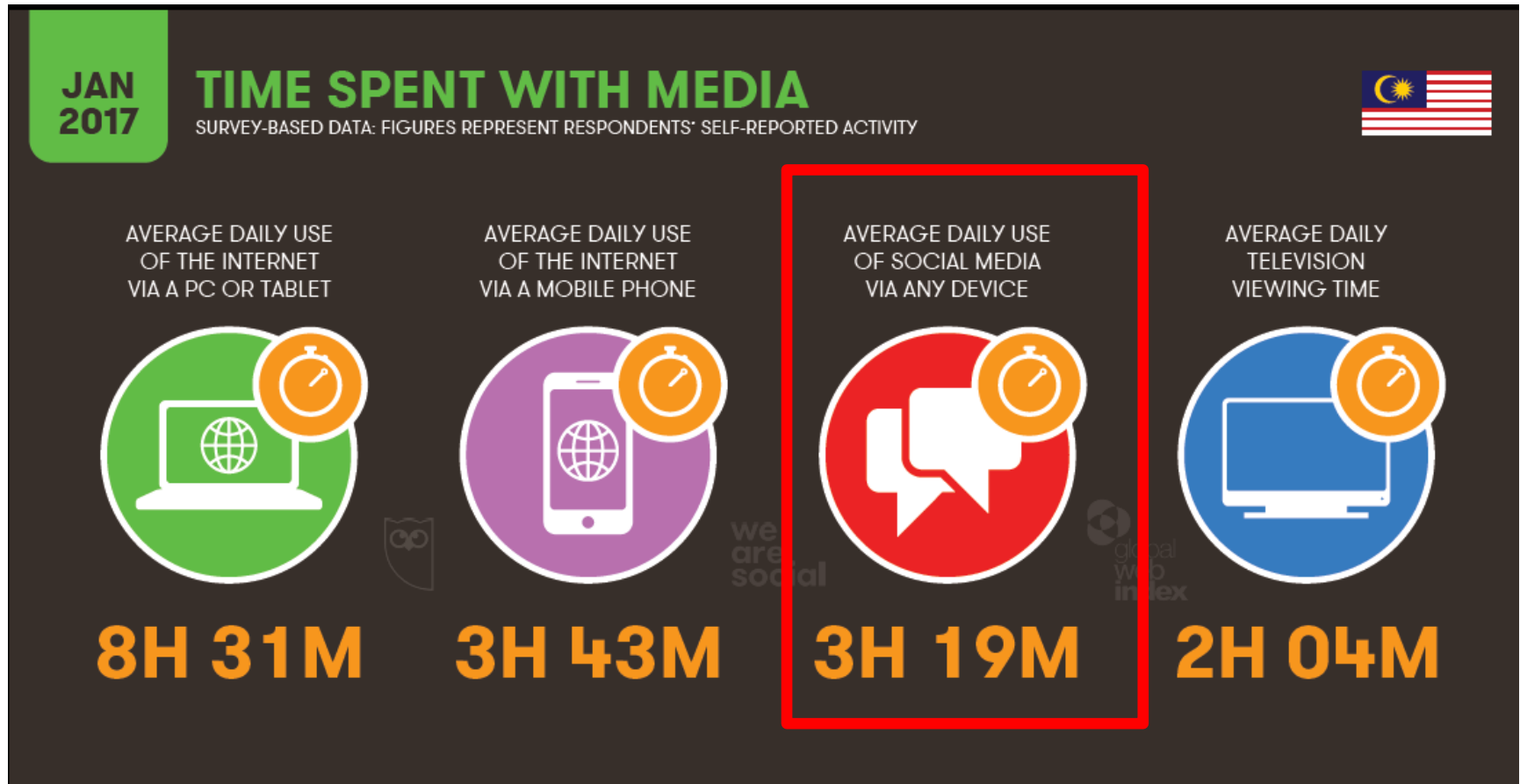


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Source: We are social. (2017). Digital in 2017 based on Population: United Nations; U.S. Census Bureau; Internet: Internetworldstats; Itu; Internetlivestats; Cia World Factbook; Facebook; National Regulatory Authorities; Social Media And Mobile Social Media: Facebook; Tencent; Vkontakte; Liveinternet.Ru; Kakao; Naver; NikiAghaei; Cafebazaar.Ir; Similarweb; Ding; Extrapolation of TNS Data; Mobile: GSMA Intelligence; Extrapolation of E-marketer and Ericsson Data.

Everyday, about 20% of waking moment of people aged 16-64 is spent on social media in Malaysia



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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)**

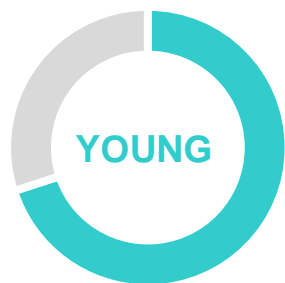


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Risk profiles of MSM who are reachable through social platforms

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

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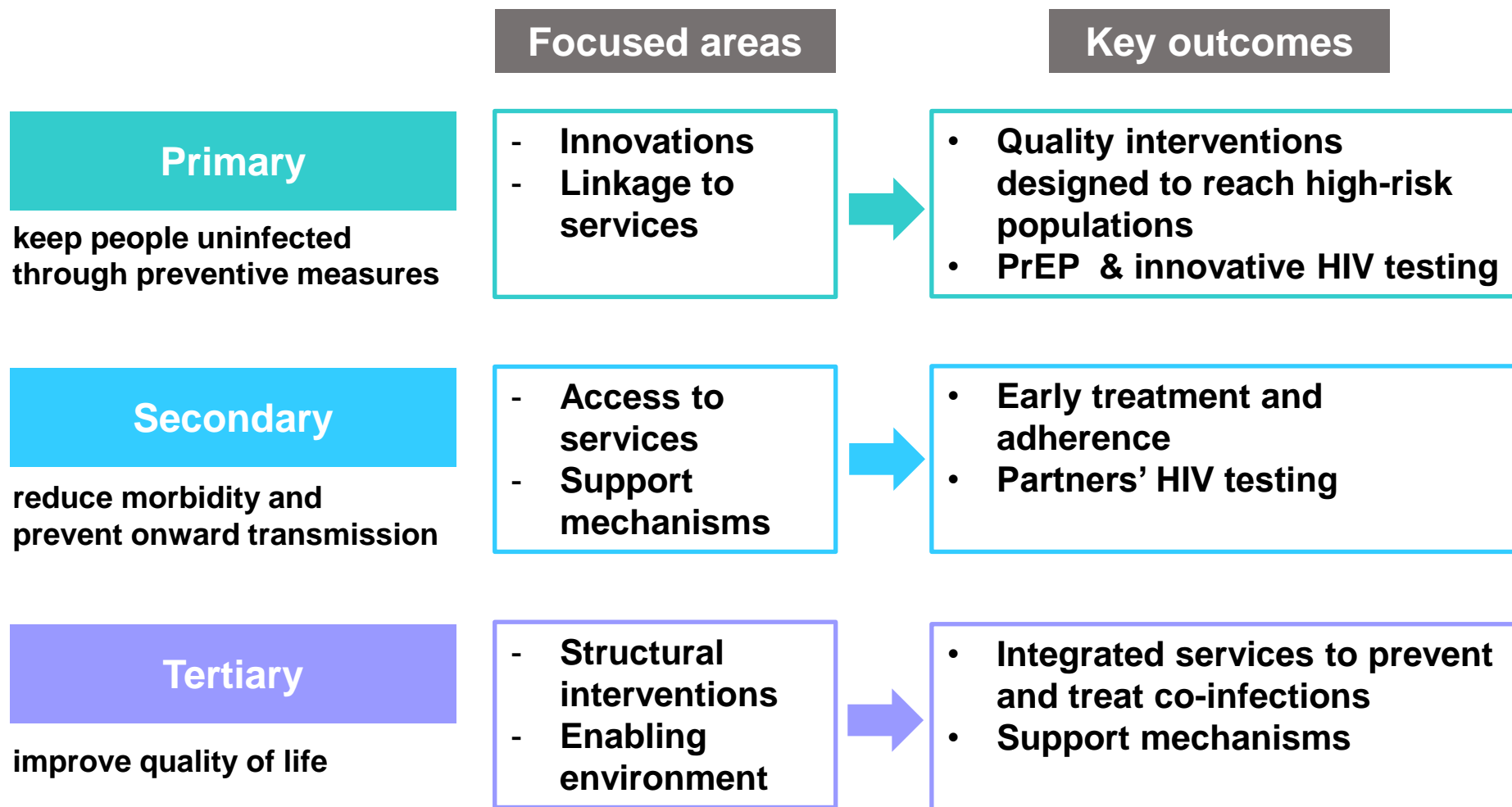
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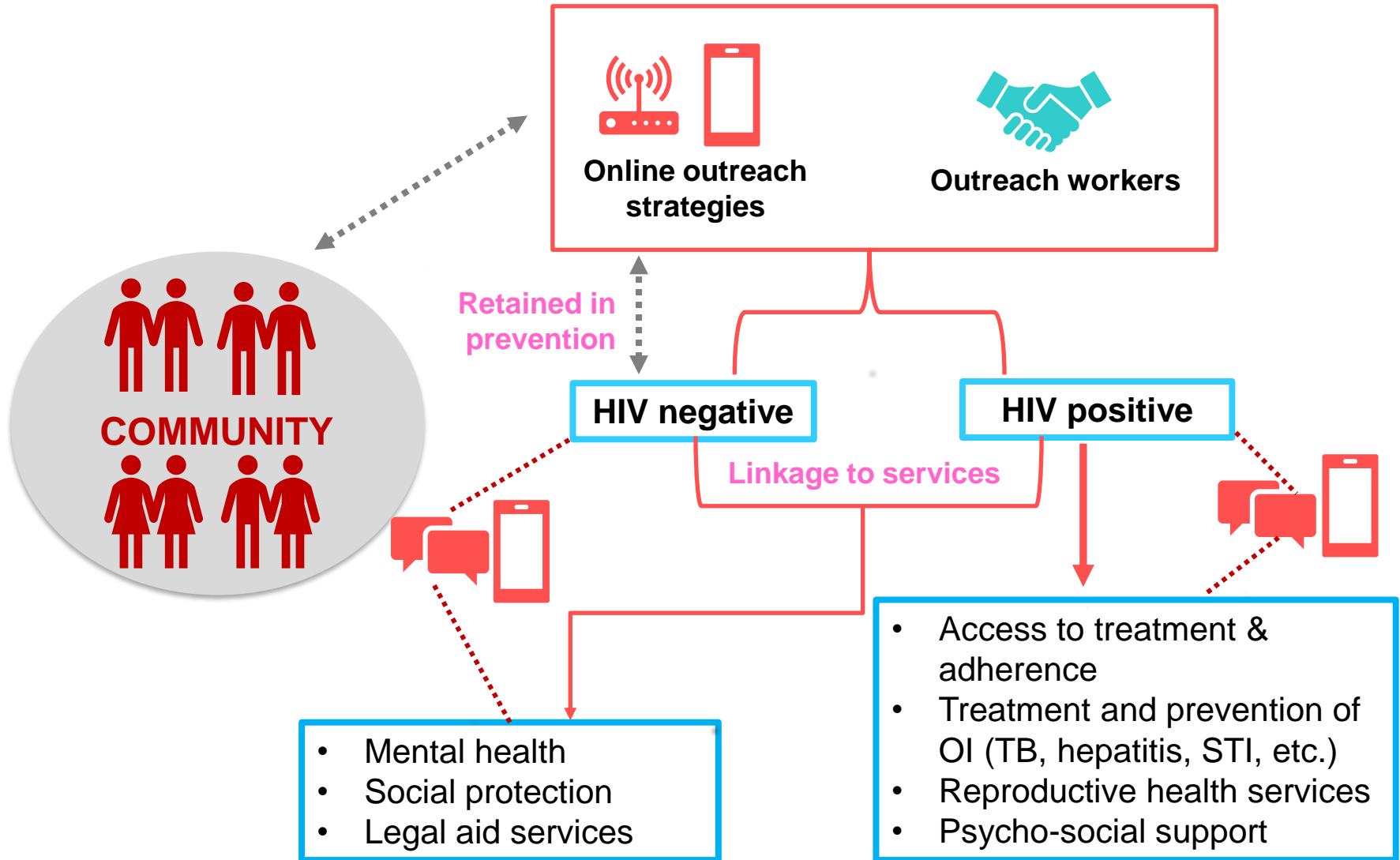
 **People centered approach and innovations**

 Challenges and way forward

Holistic prevention approaches in the AIDS response



Use of digital technology in public health model



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Evolution of outreach through a Facebook page in Viet Nam

Rainbow Hamlet Facebook Page for HIV prevention
(www.facebook.com/xomcauvong/)



- ✓ **213,000** followers as of 2017
- ✓ Mostly youth/young male adults from urban areas
 - ✓ **88% aged 13-24**
- ✓ **50%** visit the site at least once a week
- ✓ **75%** never in contact with a CSO/peer educator
- ✓ **38%** self-assessed at substantial risk of HIV

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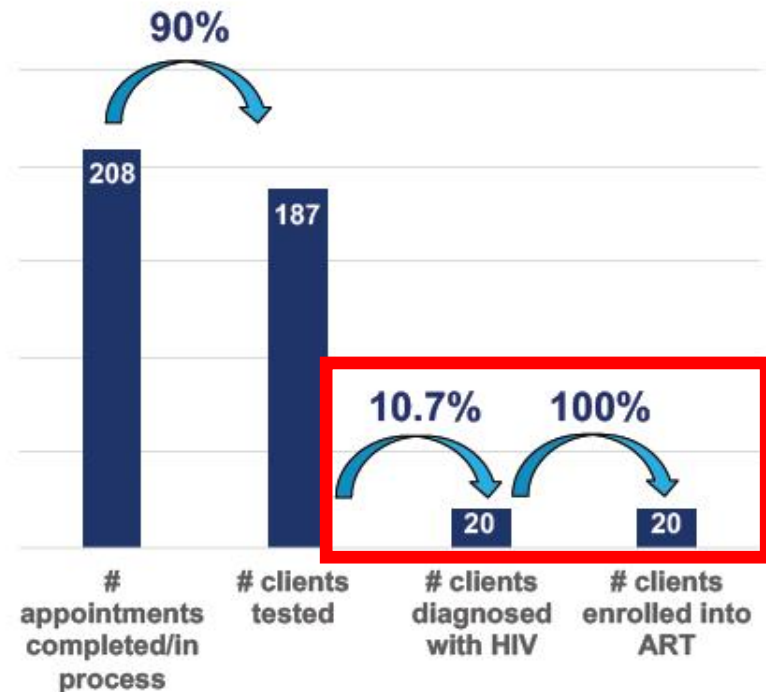


“I Reserve” application in Viet Nam: High yield and 100% enrollment to treatment

“I Reserve” Application: Convenient/confidential booking



- On-line app to link MSM to HIV testing, PrEP++ launched late March 2017
- 8 CSOs in HCMC and 2 CSOs in Hanoi received clients from “I Reserve”
- 208 clients used I Reserve to make appointments; 20 New HIV cases detected
- 98% of those HIV testing are new contacts

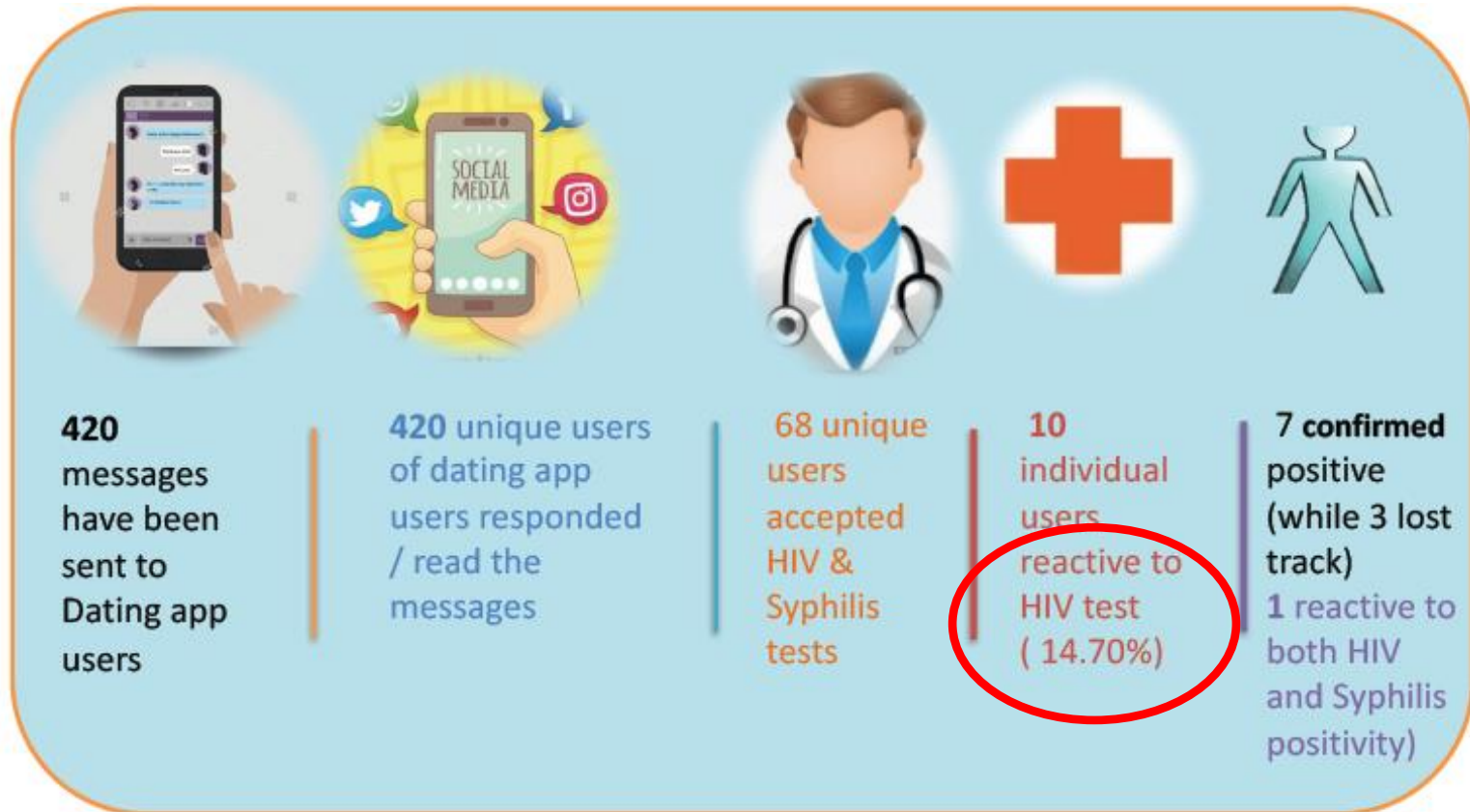


HEALTHY MARKETS



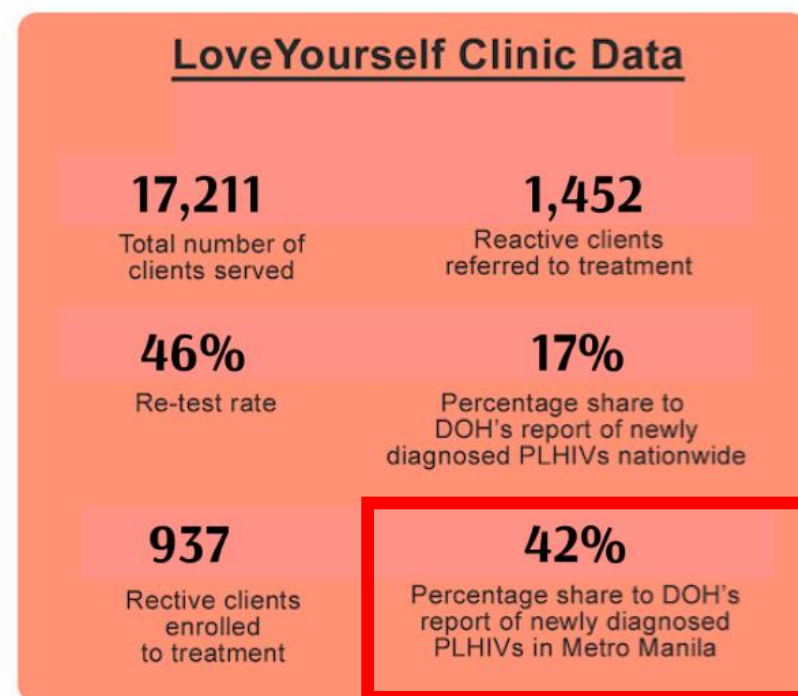
Dating app by LINKAGES Cambodia reached high risk MSM - positivity rate 5 times higher than survey data

Result of dating app pilot in Phnom Penh (Oct-Dec 2016)



Almost half of newly diagnosed HIV cases in Metro Manila were identified through “LoveYourself” programme

3,500,000	website pageviews all time history
47,200	clients served from 2011 to 2016
35,000	online community of supporters and friends
4,250	Reactive clients referred to treatment
792	LoveYourself volunteers
380	LoveYourself change agents/counselors
600	LoveYourself peer educators
3	LoveYourself community centers



PrEP from trials to policy and practice: trendsetting achievements in Australia

PrEP, the game changer

IMPACT

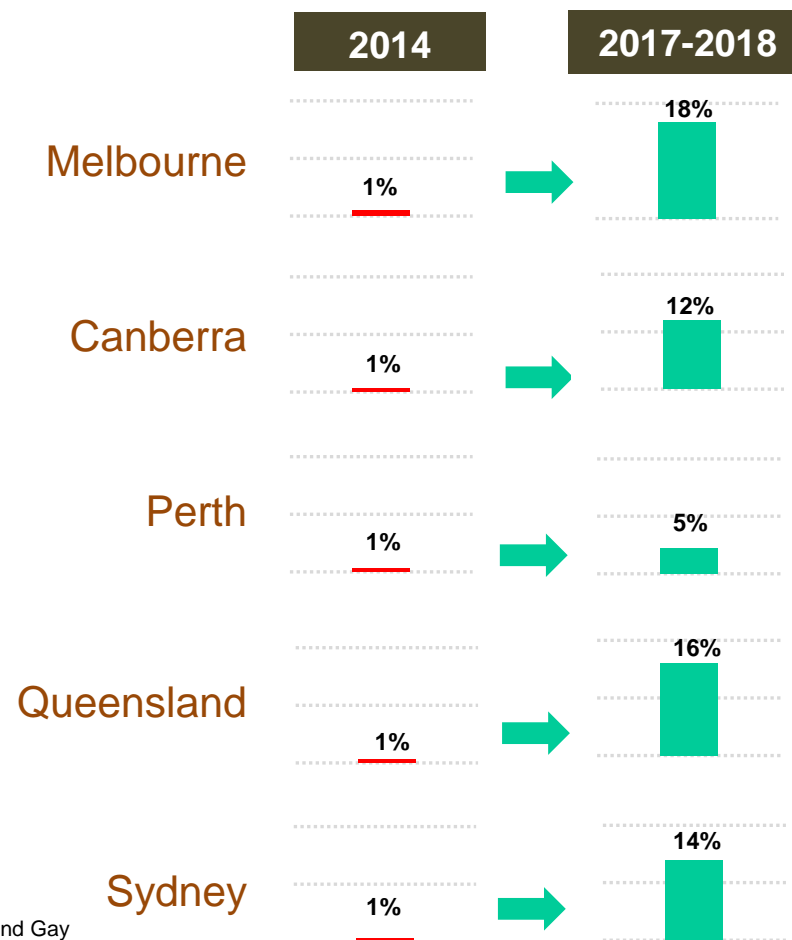
Targeted & rapid roll-out of PrEP in **New South Wales** led to a **35% decline** in state-wide HIV diagnoses in MSM, and a **44% decline in early HIV infections** in MSM

POLICY

PrEP is **subsidised by the Government** through the Pharmaceutical Benefits Scheme (PBS) from 1 April 2018.

Over 10 times increase in PrEP users between 2014 and 2018

Percentage of HIV-negative MSM who use PrEP



Why conventional outreach model alone is not suffice to reach high risk key populations

Conventional outreach model

- Mostly one way communication (messages and commodities)
- Dichotomy approach between prevention and treatment
- Anonymity and confidentially
- Limited to defined geo locations and visible groups
- Reachability is affected by crackdowns

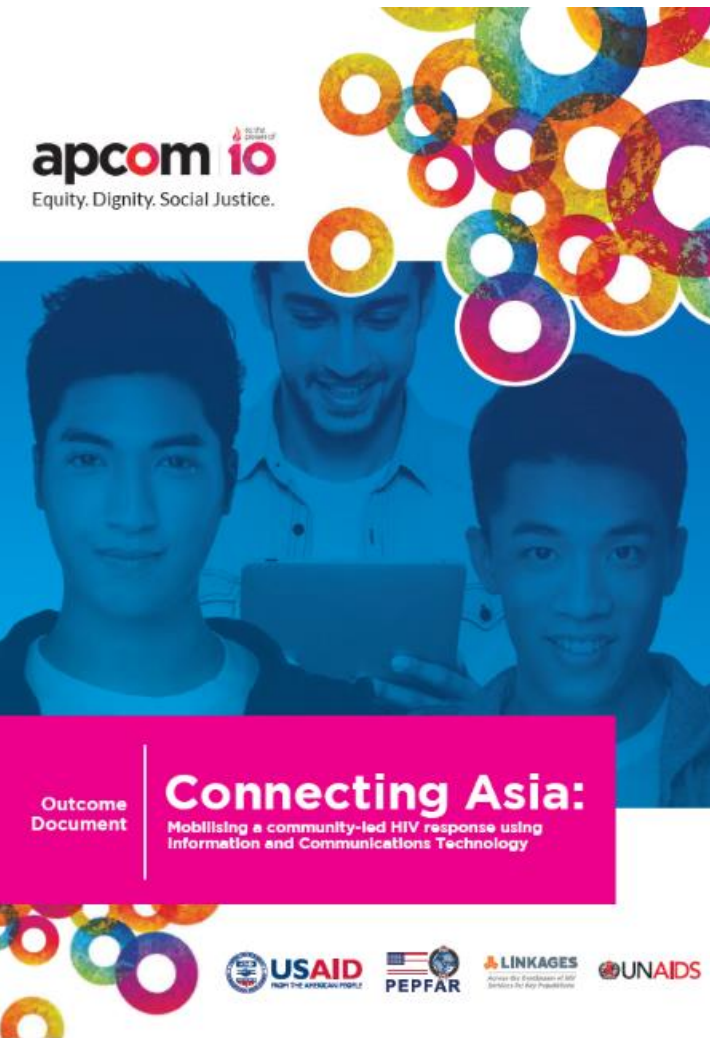
Innovative outreach model

- Interactive and dynamic, provide opportunities for repeated exposure
- Prevention and care continuum
- Anonymity and confidentially +++
- Broader coverage and can reach hidden population
- Reachability is not affected by crackdowns

Evidence-based outcomes- use of digital technology in HIV prevention and treatment

Study	Country	Study Population	Technology mode	Results/Authors' conclusions
Cheng et al. 2016	China	MSM	Internet, Social media	The project accounted for 80% of total HIV tests (22,282/26,884) and new HIV diagnoses (999/1218) among MSM in Guangzhou. Of the 999 HIV-positive diagnoses, 948 (<u>95%</u>) <u>linked to care services, while 891 (94%) of those linked were successfully retained in care.</u>
Ko et al. 2013	Taiwan	MSM	Social Media	MSM who visited intervention website were <u>more likely to have HIV tests</u> within 6 months; <u>consistently use condoms</u> during anal sex with online sex partners; receive HIV-related information; discuss HIV issues with others
Tran et al. 2013	Viet Nam	PLHIV	Mobile phone reminders	In multivariate analysis, the use of reminder strategies, such as mobile phone alarms was associated with <u>≥95% optimal adherence</u>
Perera et al. 2014	New Zealand	PLHIV	Smartphone app	Participants in the intervention group showed a <u>significantly higher level of self reported adherence to ART at 3 months and decreased viral load</u>

Examples of useful documents and studies



apcom 10
Equity. Dignity. Social Justice.

Connecting Asia:
Mobilising a community-led HIV response using
Information and Communications Technology

USAID
PEPFAR
LINKAGES
UNAIDS

RESEARCH ARTICLE

Open Access

Using eHealth to engage and retain priority populations in the HIV treatment and care cascade in the Asia-Pacific region: a systematic review of literature



Julianita Purnomo^{1*}, Katherine Coote^{1†}, Limin Mao², Ling Fan¹, Julian Gold^{1,3}, Raghieb Ahmad¹ and Lei Zhang^{4,5,6,7*}

JOURNAL OF MEDICAL INTERNET RESEARCH

Cao et al

[Original Paper](#)

Social Media Interventions to Promote HIV Testing, Linkage, Adherence, and Retention: Systematic Review and Meta-Analysis

Bolin Cao^{1,2,3}, PhD; Somya Gupta⁴, MA; Jiangtao Wang⁵, BA; Lisa B Hightow-Weidman⁶, MD; Kathryn E Muessig⁷, PhD; Weiming Tang^{2,3,6}, PhD; Stephen Pan^{2,3}, PhD; Razia Pendse⁴, MD; Joseph D Tucker^{2,3,6}, MD, PhD

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 **Challenges and way forward**

Solutions to overcome hurdles in reaching key populations and retaining in services

- There is no “one size fits all” solution and differentiated approach is needed.
- All forms of outreach (**physical** and **virtual**) need to be effectively linked with services such as -
 - HIV testing and treatment services;
 - PrEP;
 - Psychosocial support services such as services for mental health;
 - Mechanisms/platforms to address violence;
 - Reproductive health services, STI and other co-infections such as hepatitis, TB
- Multiple layers of integration needed – between ministries and departments, ministries and the community, public and private sectors, and within community
- Address structural barriers and policies that deter access to services/linkages mechanisms
- Creating enabling environment for all key populations
- To address challenges related to digital policy and data security

Way forward- innovations, improved policies and integrated services

PEOPLE



- ✓ Community participation and empowerment
- ✓ Community capacity building

PARTNERSHIPS



- ✓ Public and private sector
- ✓ National and local governments
- ✓ Academics and researchers
- ✓ CSO

POLICIES AND PLANS



- ✓ Policies that allow cross-collaboration/coordination to address structural barriers
- ✓ Supportive policies for virtual outreach platforms
- ✓ Digital security and privacy to ensure protection and confidentiality of key populations

INNOVATIONS



- ✓ Contextualized to local and population context
- ✓ Learn, adapt, invent, and make use of digital growth
- ✓ Differentiated approach and risk stratification
- ✓ Using “digital age” as entry point for prevention and treatment services

THANK YOU

www.aidsdatahub.org