

Global HIV Epidemic and Response

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Outline

- 1. Global and Regional HIV Epidemic Situation**
2. Progress in the AIDS Response
3. Challenges and Realities
4. Solutions and the Way Forward

Journey of AIDS by the numbers

Since the beginning of the epidemic -

Globally...

75 million people have become infected with HIV (Population size of Turkey)

32 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)



Global Situation of HIV Epidemic in 2018 (I)

Global summary of the AIDS epidemic | 2018

Number of people living with HIV	Total	37.9 million	[32.7 million–44.0 million]
	Adults	36.2 million	[31.3 million–42.0 million]
	Women (15+ years)	18.8 million	[16.4 million–21.7 million]
	Children (<15 years)	1.7 million	[1.3 million–2.2 million]

People newly infected with HIV in 2018	Total	1.7 million	[1.4 million–2.3 million]
	Adults	1.6 million	[1.2 million–2.1 million]
	Children (<15 years)	160 000	[110 000–260 000]

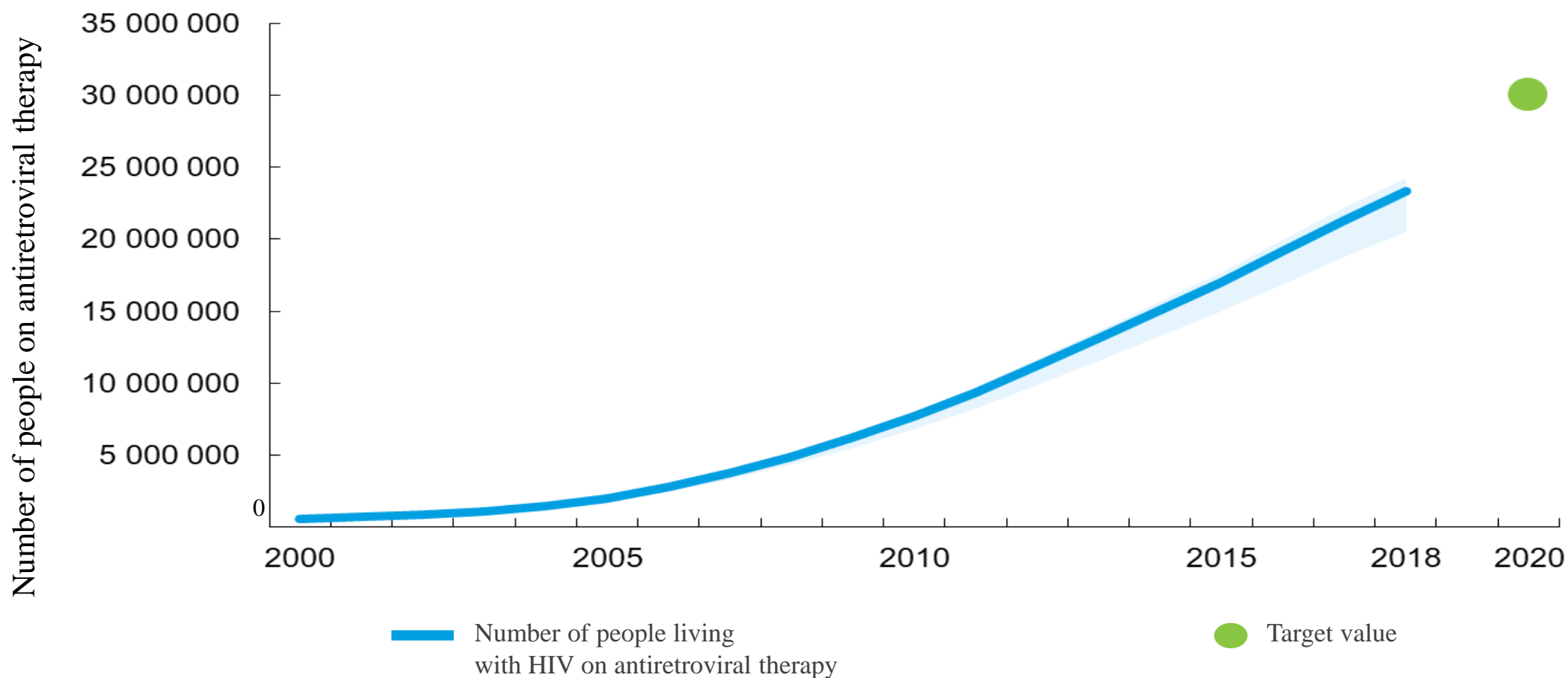
AIDS-related deaths in 2018	Total	770 000	[570 000–1.1 million]
	Adults	670 000	[500 000–920 000]
	Children (<15 years)	100 000	[64 000–160 000]

Global Situation of HIV Epidemic in 2018 (II)

About **5000** new HIV infections (adults and children) a day | 2018

- About **21%** are in Asia and the Pacific
- About **500** are among children under 15 years of age
- About **4400** are among adults aged 15 years and older, of whom:
 - almost 47% are among women
 - about 32% are among young people (15–24)
 - about 20% are among young women (15–24)

Global data: Number of people living with HIV accessing antiretroviral therapy, 2000–2018 and 2020 target

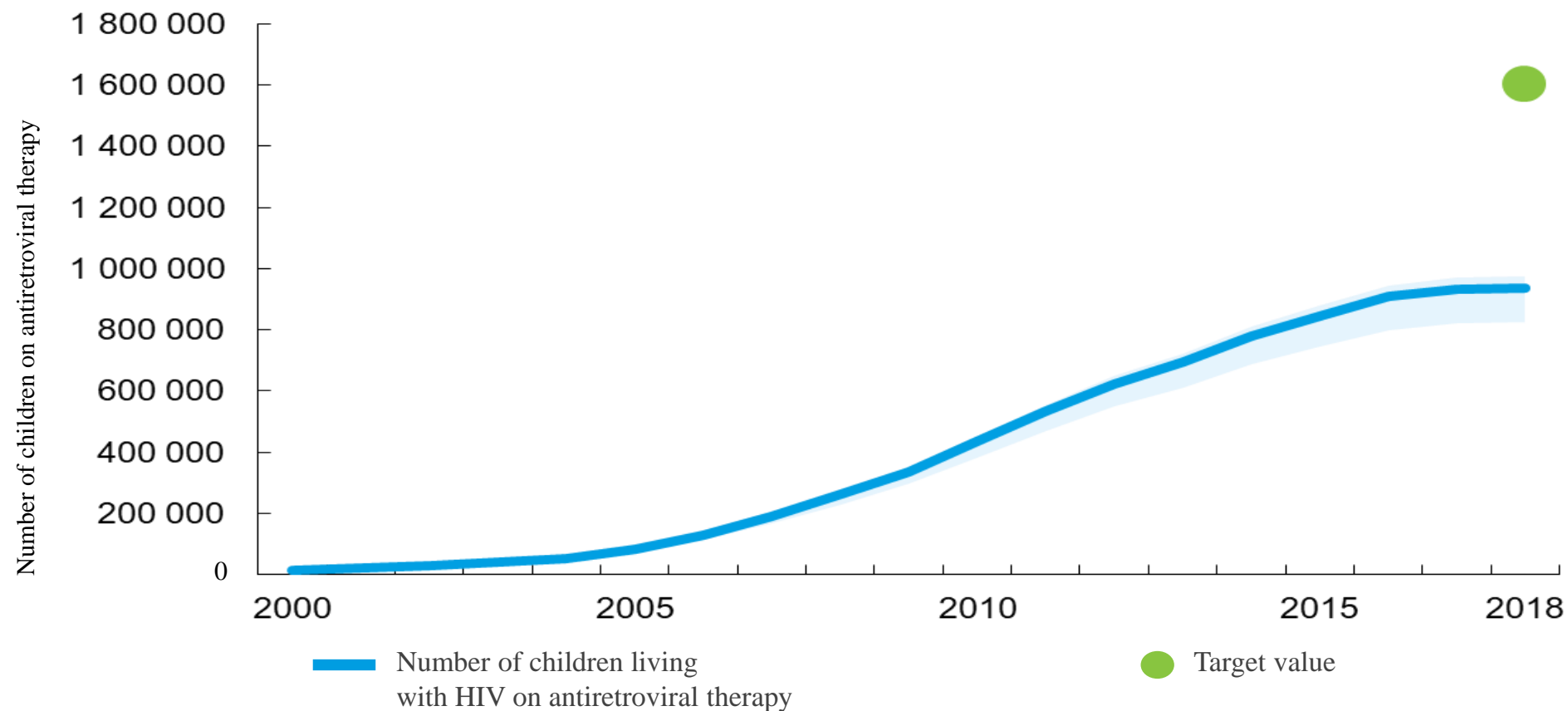


Getting to zero

Source: UNAIDS 2019 estimates; 2019 Global AIDS Monitoring.



Global data: Number of children living with HIV (aged 0–14 years) accessing antiretroviral therapy, 2000–2018 and 2018 target



Source: UNAIDS 2019 estimates; 2019 Global AIDS Monitoring.

Getting to zero



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Global Fast-Track Targets

By 2020

Fewer than

500 000

new infections

By 2030

Fewer than

200 000

new infections

Fewer than

500 000

AIDS-related deaths

Fewer than

200 000

AIDS-related deaths

ZERO

discrimination

ZERO

discrimination



Asia and the Pacific Fast-Track Targets

By 2020

Fewer than

90 000

new infections

More than

4.2 million

on treatment

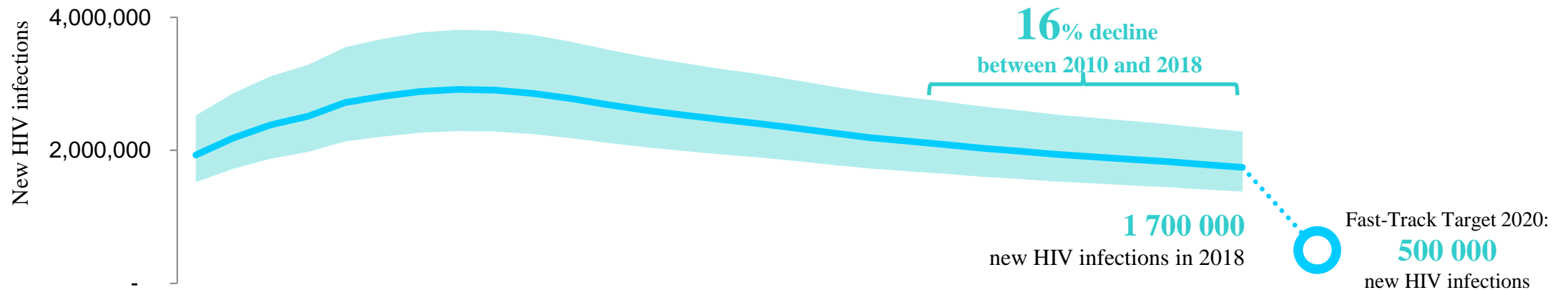
ZERO

discrimination

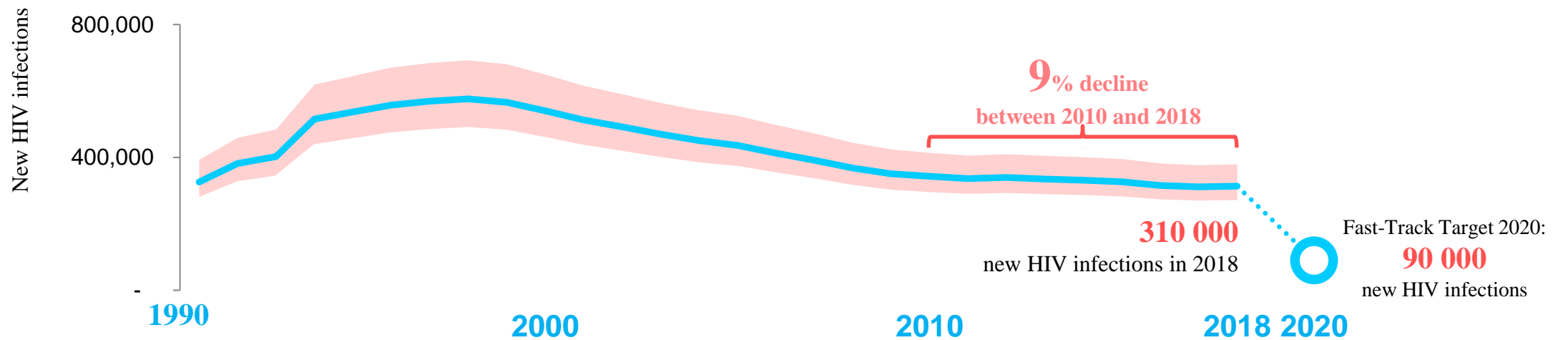


HIV response has achieved notable success in declining new infections globally and regionally, but during the past 8 years the decline in new HIV infections has stalled

Global



Asia and the Pacific



Getting to zero

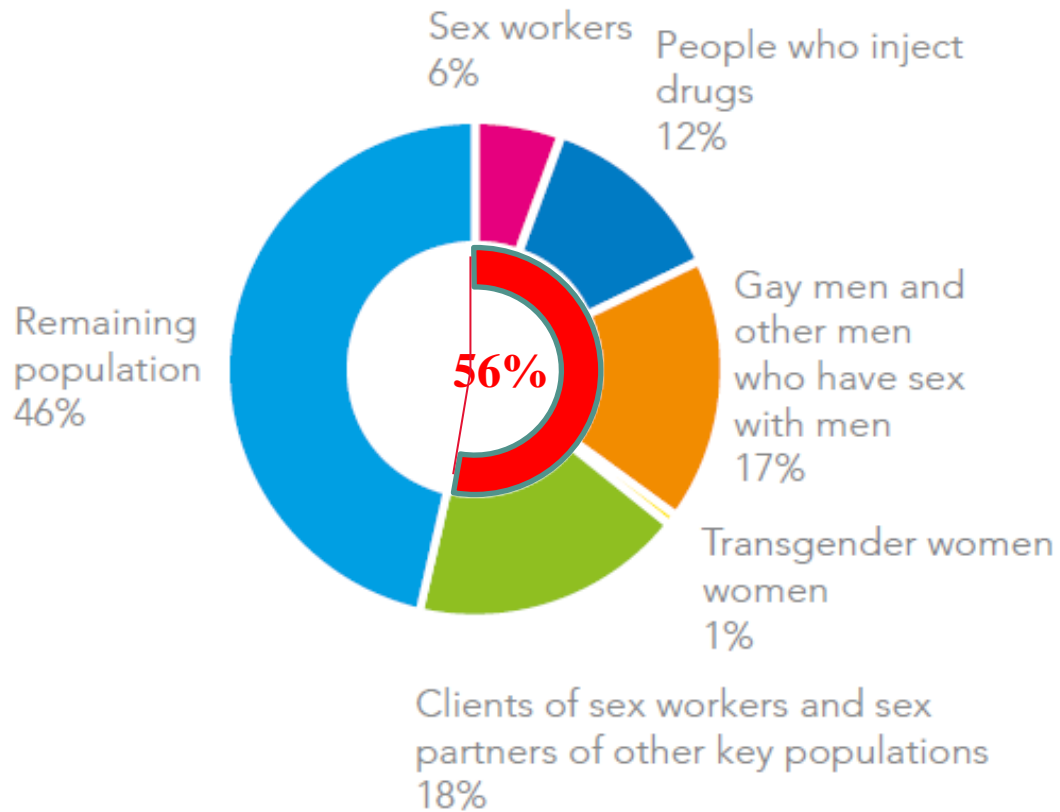
— New HIV infections

● 2020 Fast-Track target*

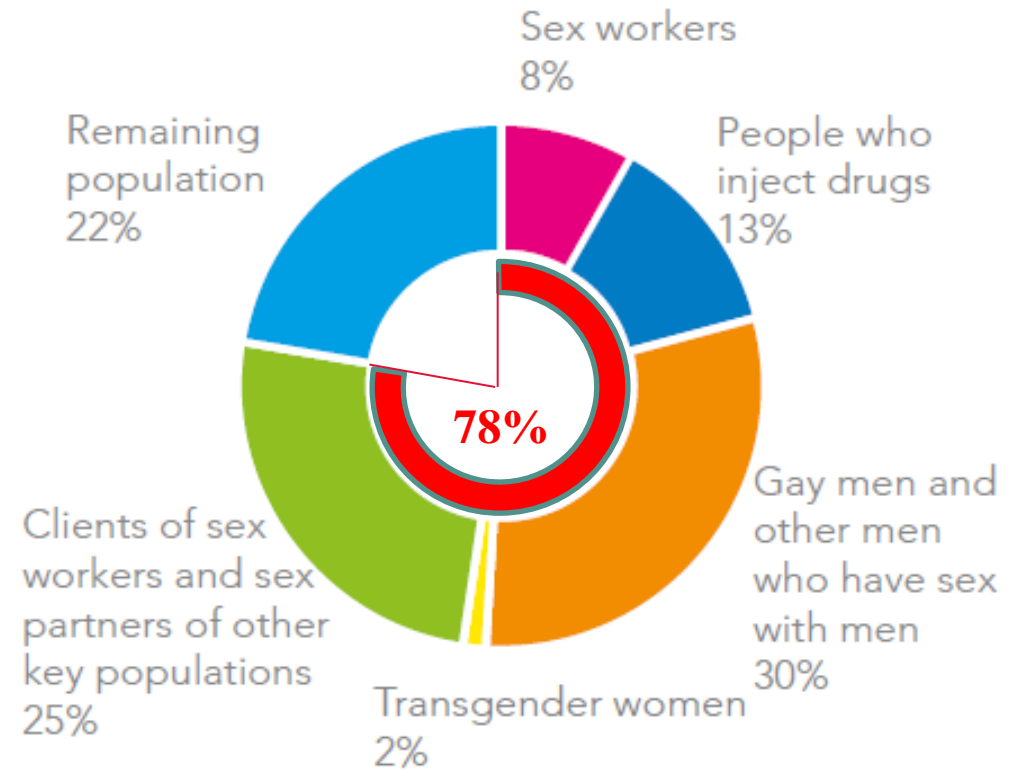


Distribution of new HIV infections (aged 15-49 years), by population group, 2018

Global

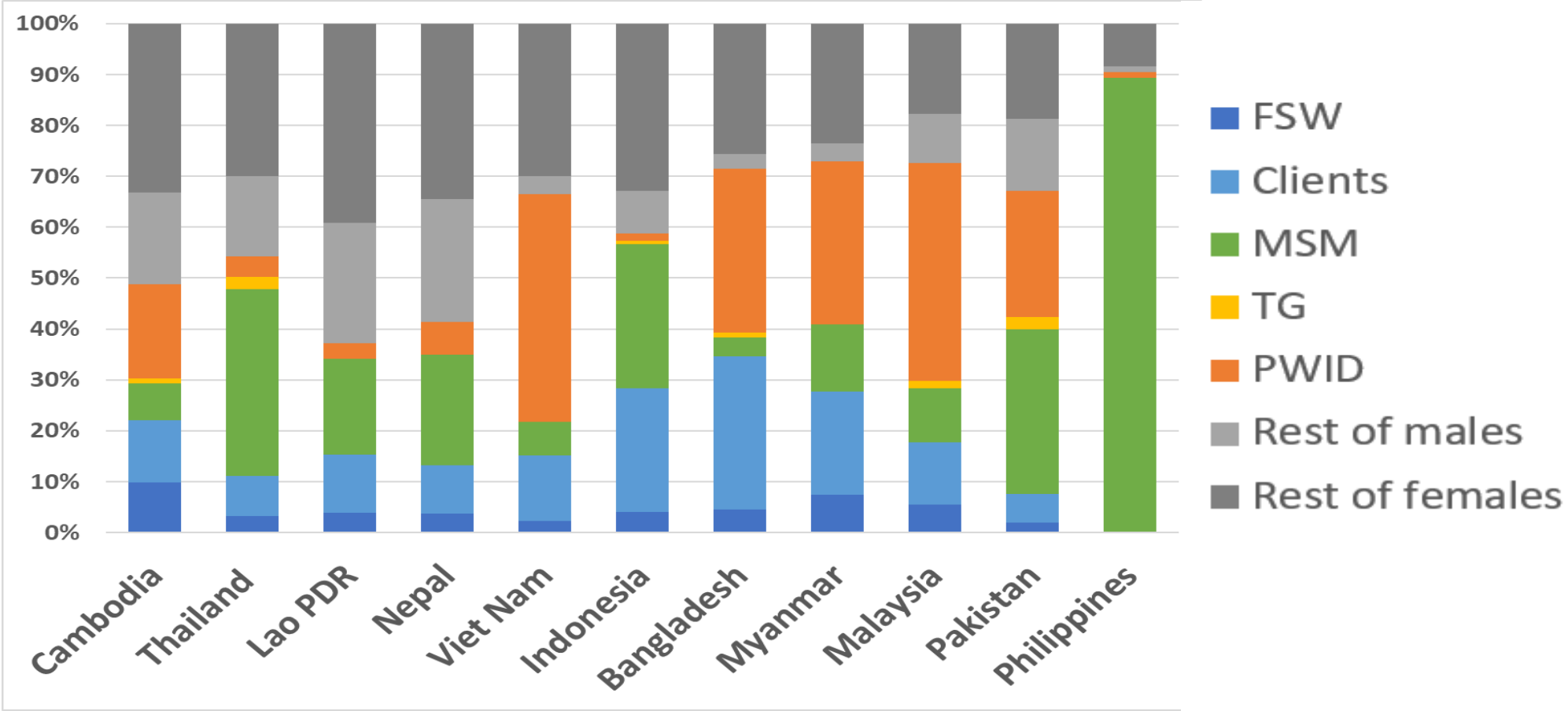


Asia and the Pacific



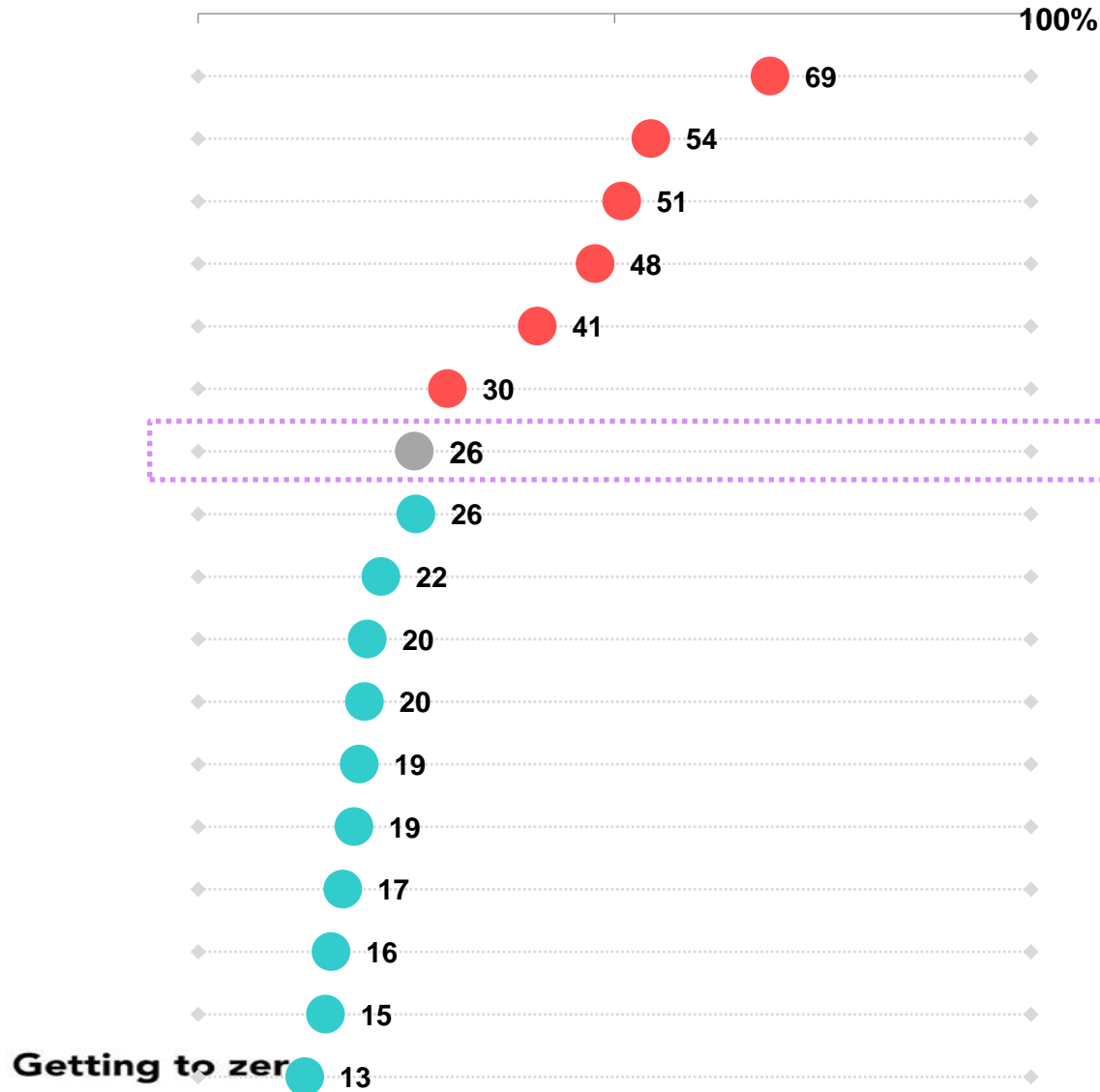
Diverse epidemic dynamics in in countries but KPs and their partner are the most vulnerable in the region

Proportion of new HIV infections by risk groups – AEM countries

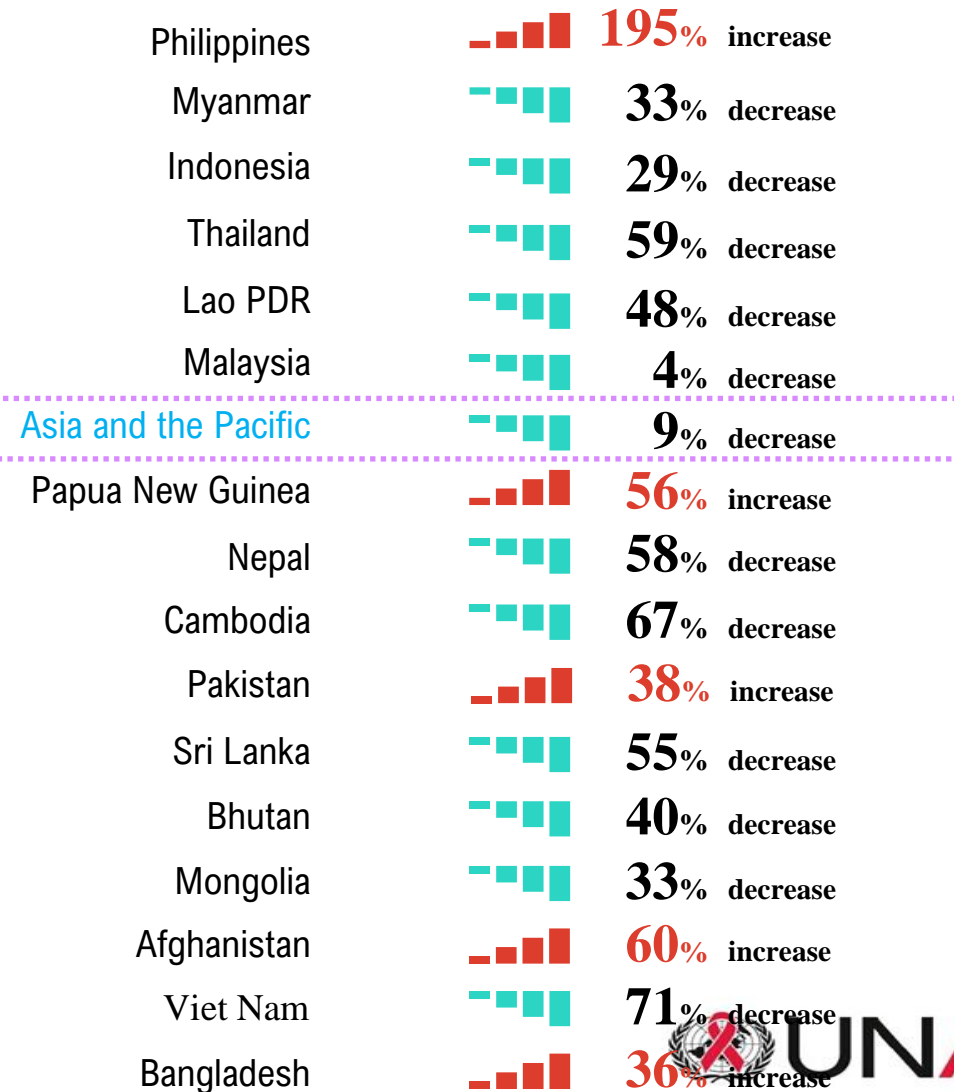


Young people (15-24) represent a substantial share of new infections

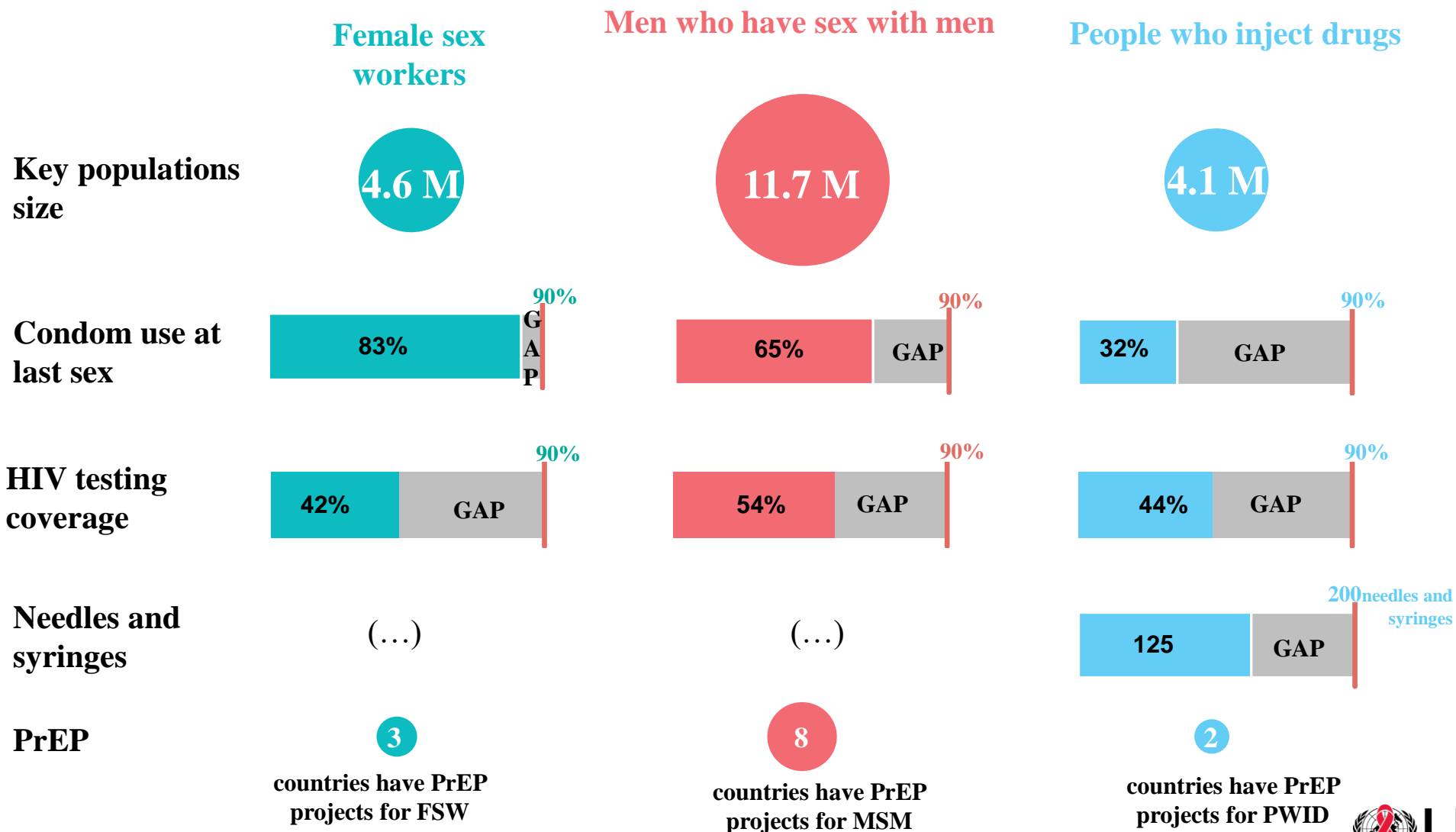
Proportion of young people (15-24) in total new HIV infections, 2018



Percent change in new HIV infections among young people, 2010 and 2018



Key populations Testing and Prevention Gap in AP Region



Young key populations are less accessible to HIV testing services

In Pakistan...



1 in 10

Young sex workers

know their HIV status that is **3 times lower** than their older counterparts

In Lao PDR...

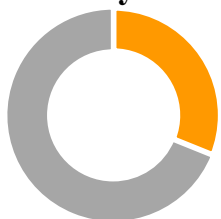


Less than **1 in 10**

Young MSM

know their HIV status that is **2 times lower** than their older counterparts

In Malaysia...



Less than **1 in 3**

Young TG

know their HIV status that is **two-third** of the testing coverage of their older counterparts

In Pakistan...



1 in 6

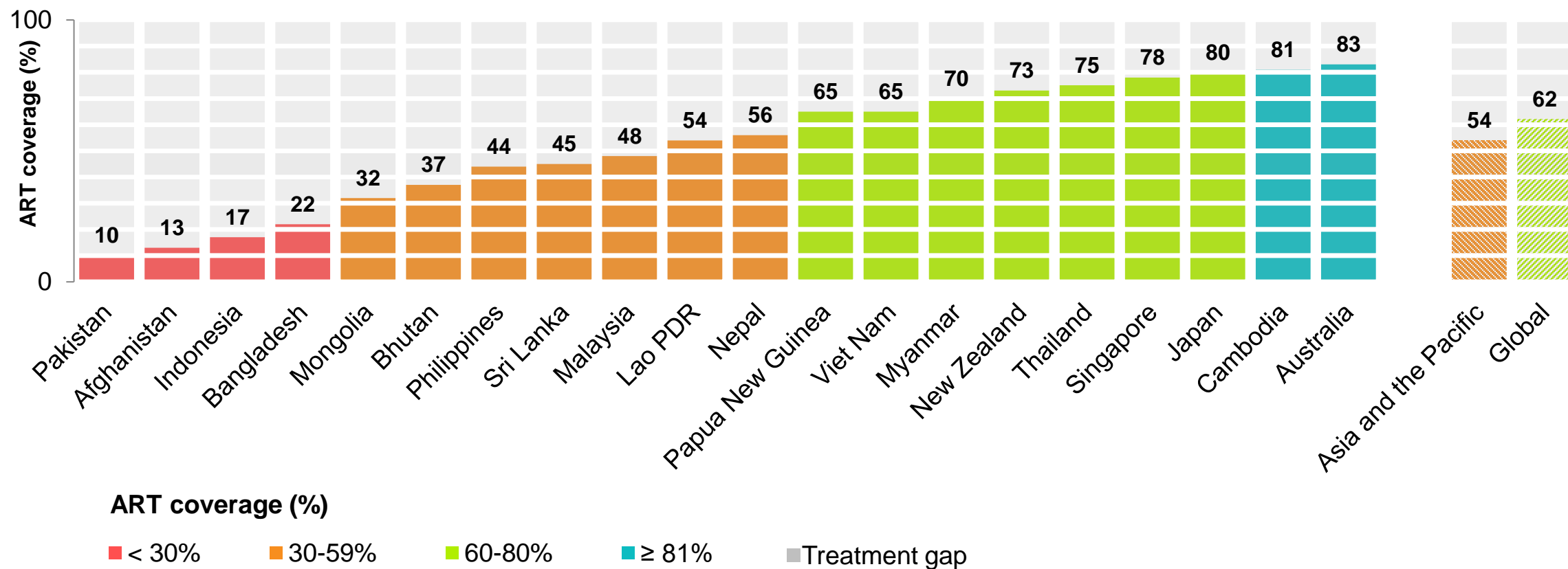
Young PWID

know their HIV status that is **3 times lower** than their older counterparts

Getting to zero



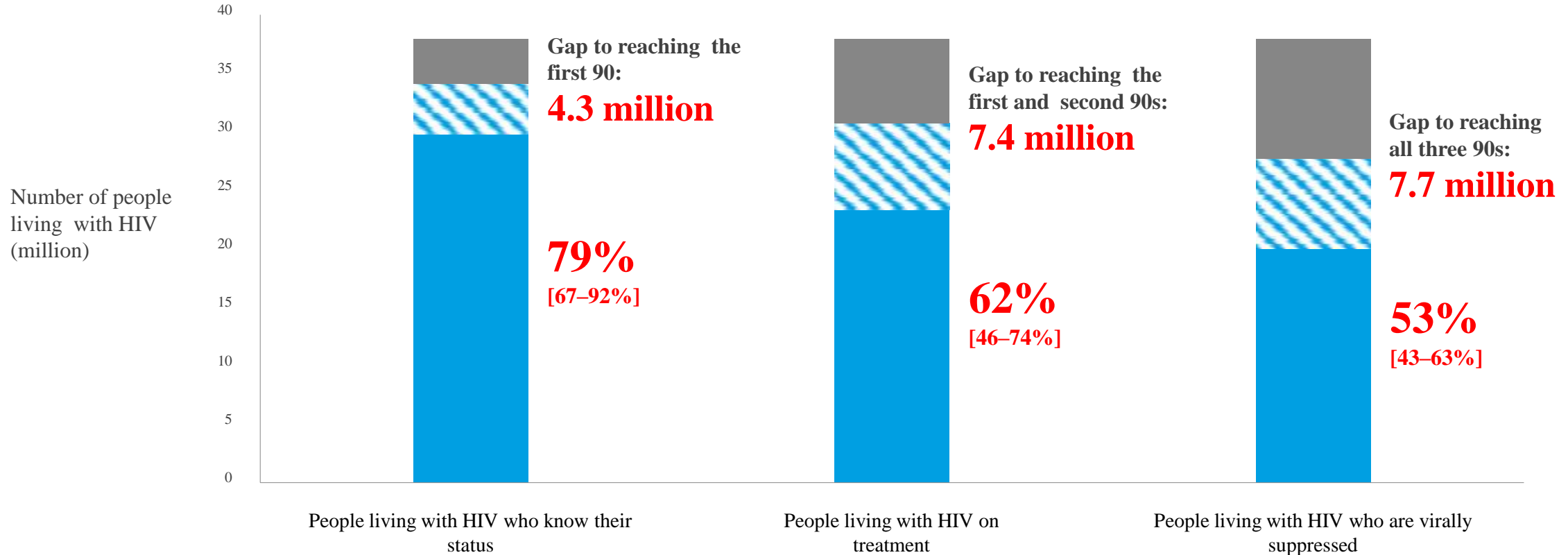
ART coverage and treatment gap, Asia and the Pacific, 2018



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HIV testing and treatment cascade, global, 2018

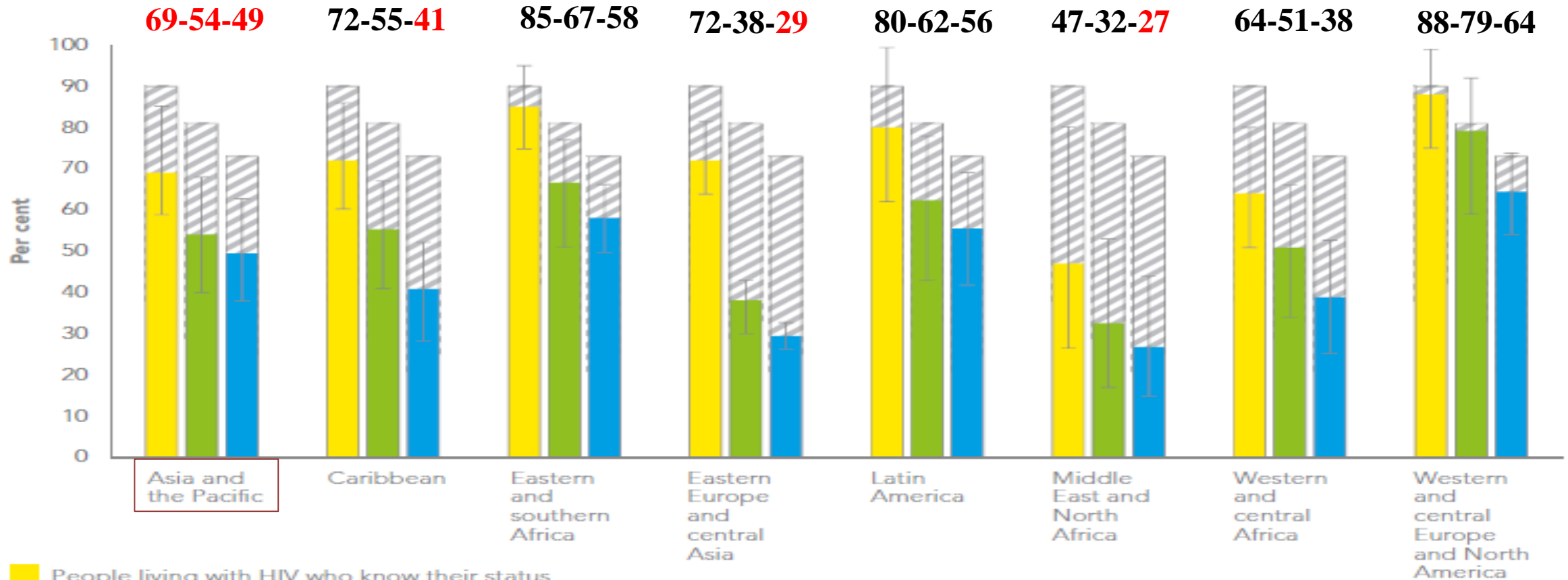


Source: UNAIDS special analysis, 2019;

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HIV testing and treatment cascade, by region, 2018



- People living with HIV who know their status
- People living with HIV who know their status and are on treatment
- People living with HIV who are virally suppressed
- Gap to reaching the 90-90-90 targets

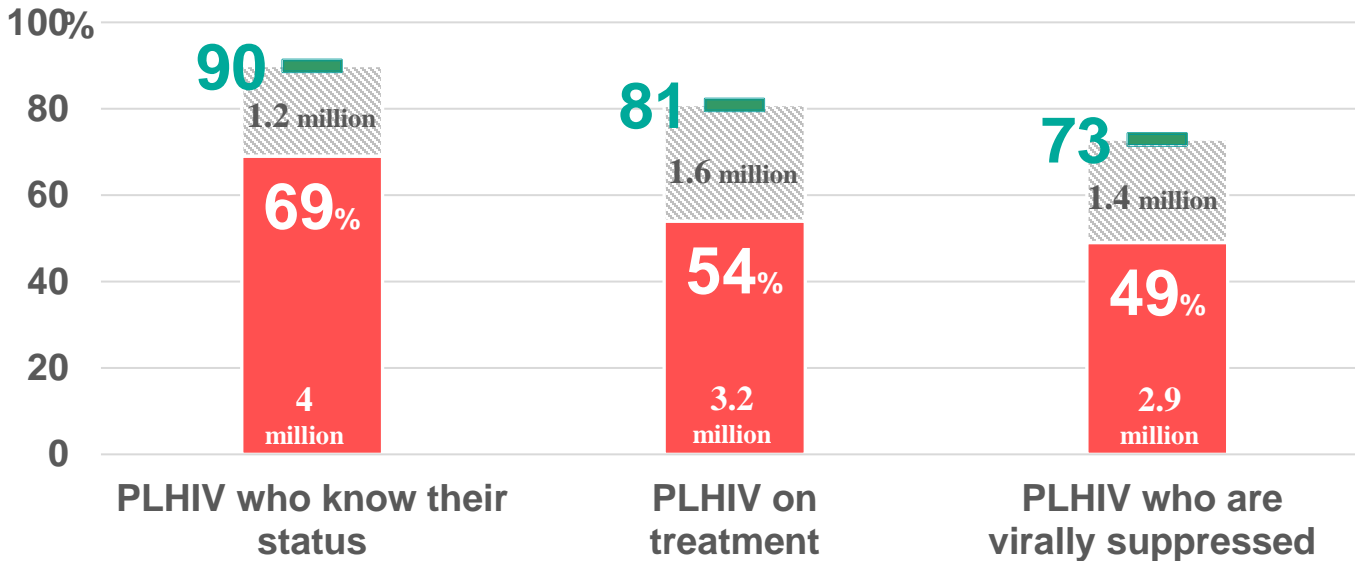
Source: UNAIDS special analysis, 2019; see annex on methods for more details.



Regional overview: Treatment target and gaps

HIV testing and treatment cascade, Asia and the Pacific, 2018

■ Progress (%) ■ Gap — Target



ACHIEVED

Australia; Thailand

NOT ON-TRACK (<50%)

Afghanistan; Bhutan; Bangladesh; Mongolia; Pakistan

ACHIEVED

Australia; Cambodia

NOT ON-TRACK (<30%)

Afghanistan; Bangladesh; Indonesia; Pakistan

ACHIEVED

Australia; Cambodia; Japan; Singapore; Thailand

NOT ON-TRACK (<30%)

Bangladesh; Indonesia; Mongolia

90-81-73 target



83 : 78 : 64



74 : 61 : 56



66 : 49 : 45

Note: India and China data not available

Getting to zero



Countries which have received WHO Validation eMTCT

2019

Maldives

- Maldives eliminates mother-to-child transmission of HIV and syphilis [↗](#)

2018

Malaysia

- Malaysia eliminates mother-to-child transmission of HIV and syphilis

2017

Anguilla, Antigua & Barbuda,
Bermuda, Cayman Islands,
Montserrat, St. Christopher & Nevis

2016

Armenia (HIV only), Belarus, Moldova (Syphilis only), Thailand

- WHO validates elimination of mother-to-child transmission of HIV and syphilis in Armenia, Belarus and the Republic of Moldova [↗](#)

2015

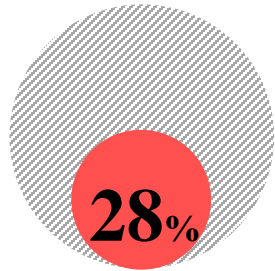
Cuba

- WHO validates elimination of mother to child transmission of HIV and syphilis in Cuba

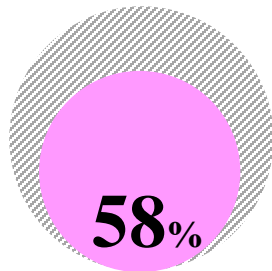
Mind the Gap: Use innovations to maximize prevention

Prevention gap, select countries and populations

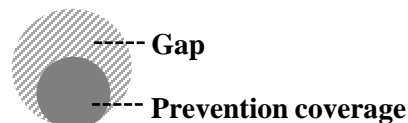
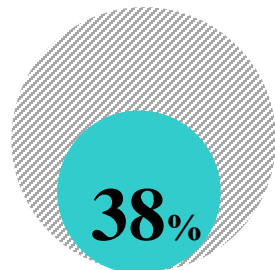
Philippines, Men who have sex with men



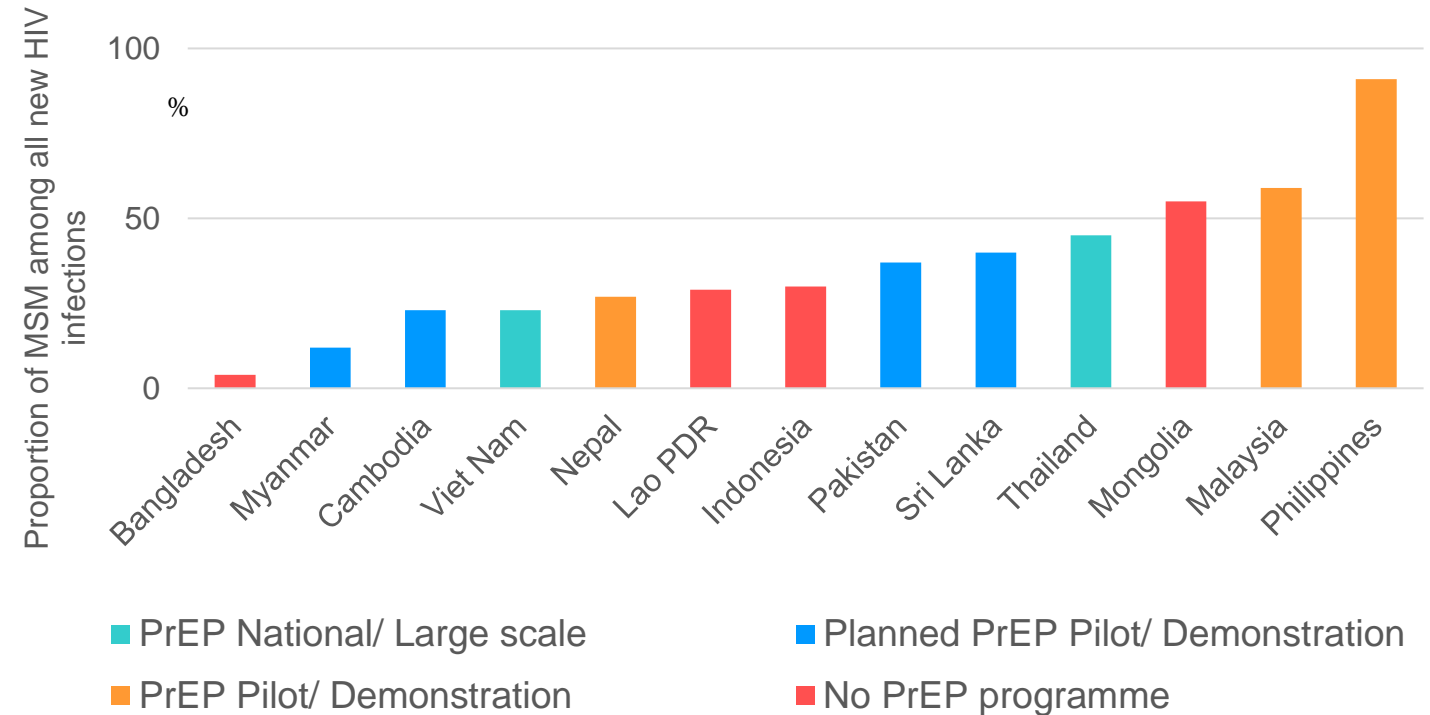
Malaysia, Transgender women



PNG, Port Moresby, Female sex workers



Proportion of MSM among estimated adult new HIV infections and availability of PrEP in select countries, as of June 2019



Note: Data do not include drug registration and private sector availability. ARV drugs registered for use as PrEP are available in the private sector in several countries including Malaysia, the Philippines, Thailand and Vietnam; India and China are not included in the above graph since disaggregated new HIV infections data for MSM are not available. India has completed a PrEP demonstration project. China has a current demonstration project.



Learning by doing on Pre-Exposure Prophylaxis (PrEP)

Global

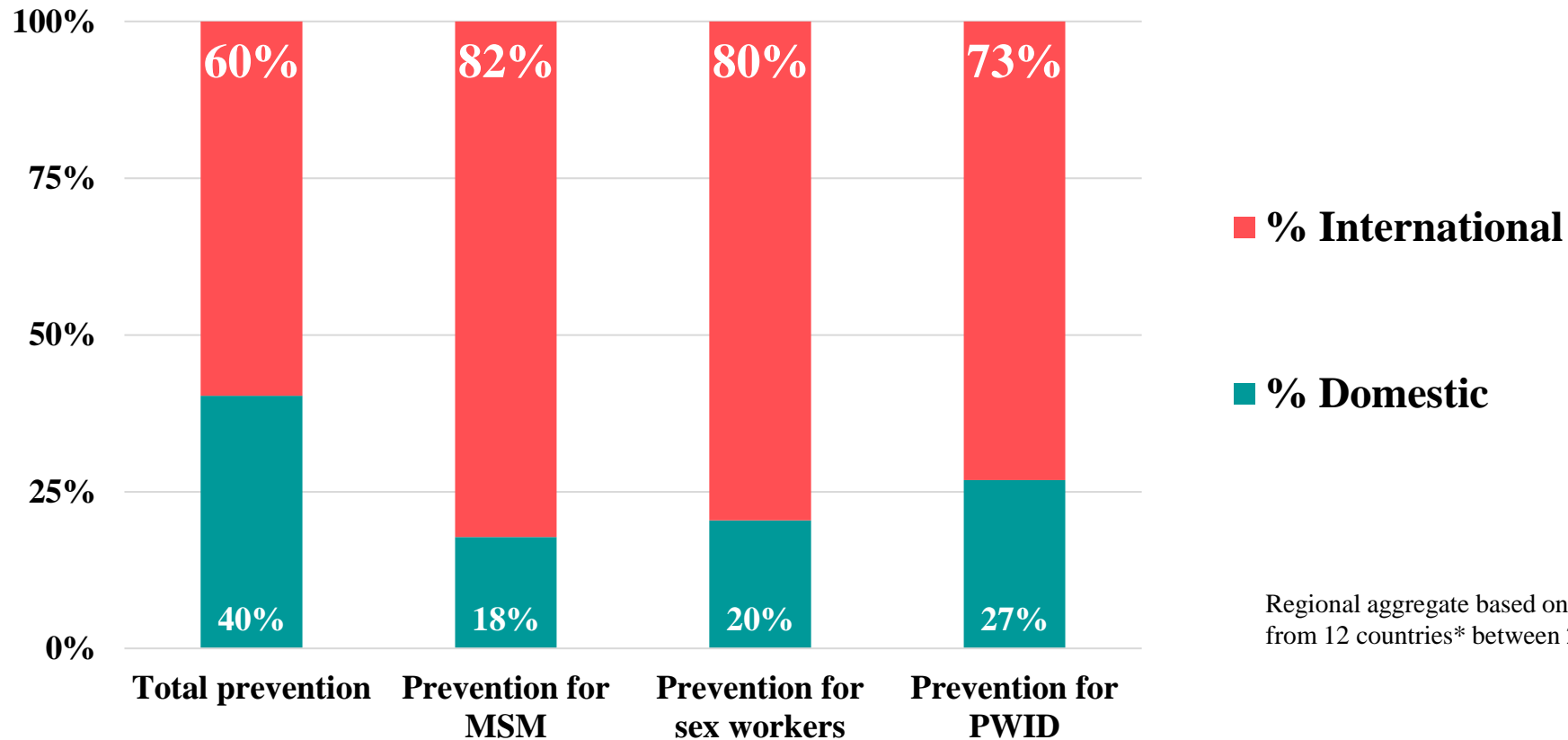
- More than **300 000** people globally took PrEP at least once in 2018
- More than **25** low- and middle-income countries were operating PrEP projects in 2018.
- PrEP programmes were being implemented at the national level in fewer than **15** low- and middle-income countries

Asia and the Pacific

- The large-scale, rapid rollout of PrEP : **Australia, New Zealand**, and on a growing scale in **Thailand** and **Viet Nam**.
- Smaller pilot or demonstration projects in **China, India, Nepal, the Philippines and Malaysia**.

Key populations prevention: heavy reliance on external financing sources

Prevention spending by financing source, 2012 - 2017



Regional aggregate based on available data from 12 countries* between 2012 and 2017

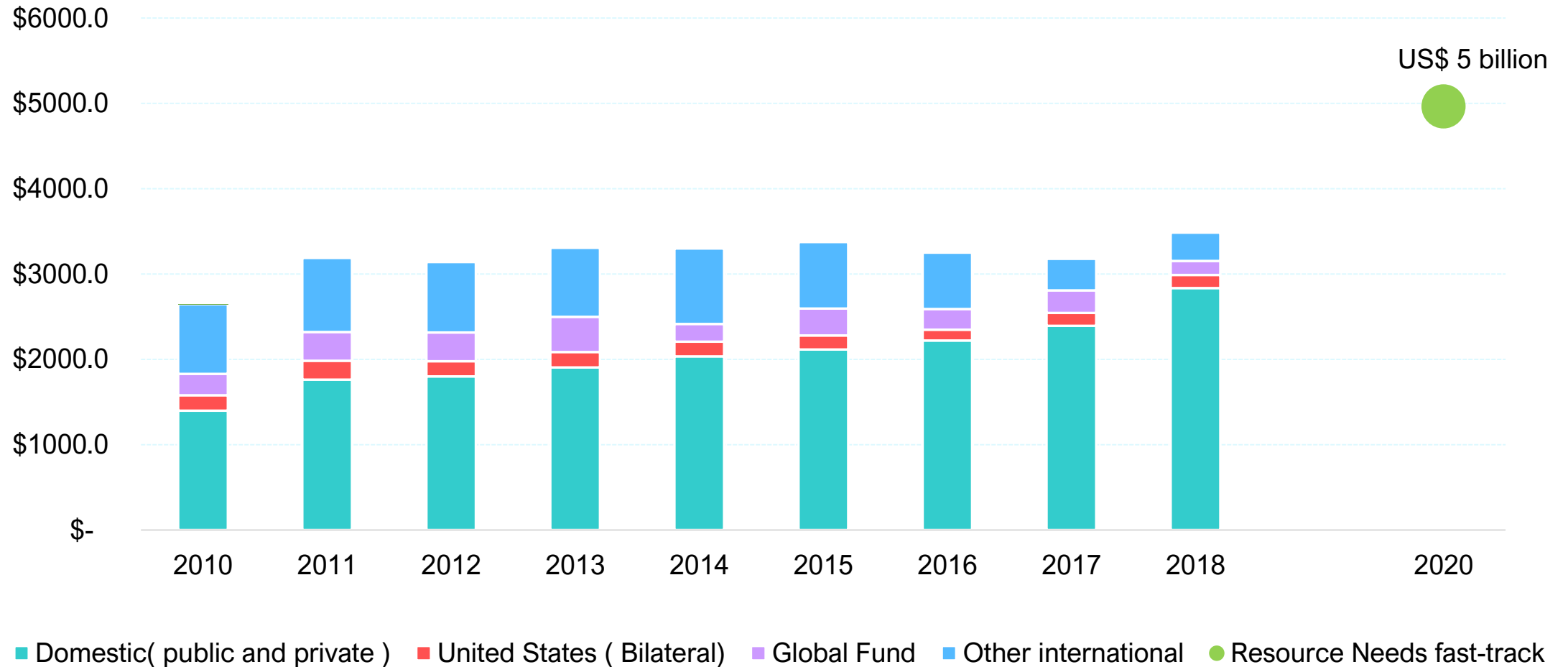
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12 countries*- Afghanistan, Bangladesh, Cambodia, Indonesia, Lao PDR, Malaysia, Myanmar, Nepal, Pakistan, Philippines, Thailand, Viet Nam



Resource availability by source and Fast-Track resource needs in Asia and the Pacific

Resource availability 2010-2018 vs needs by 2020

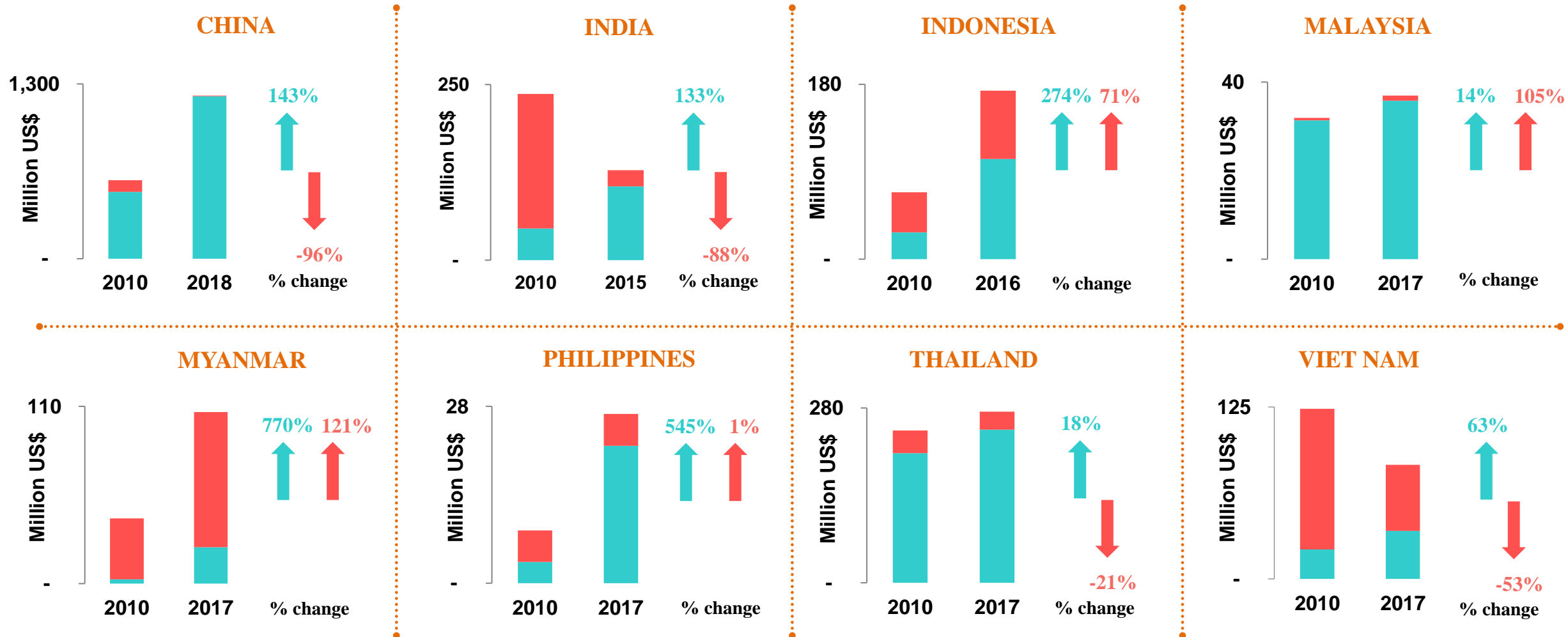


Getting to zero



Increased government investments in AIDS

Mostly goes for treatment !



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■ Domestic expenditure
 ■ International expenditure

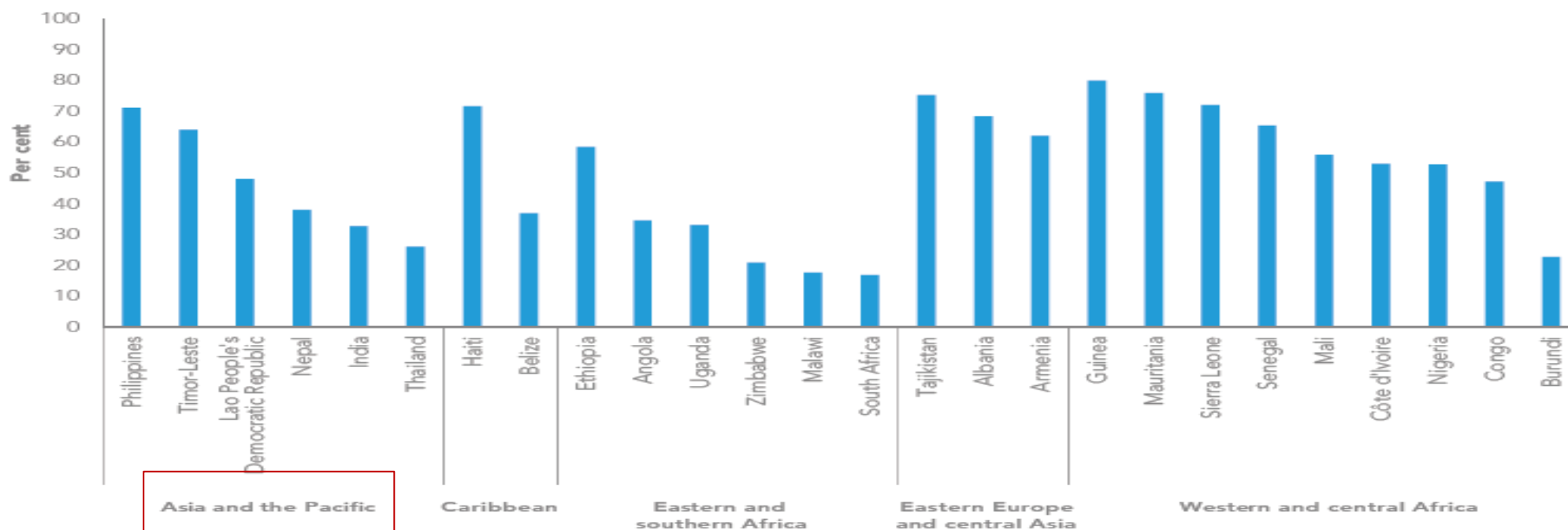


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Discriminatory attitudes towards people living with HIV

Global data from **26** countries during 2014-2018 shows that **more than half** of respondents expressed discriminatory attitudes to people living with HIV



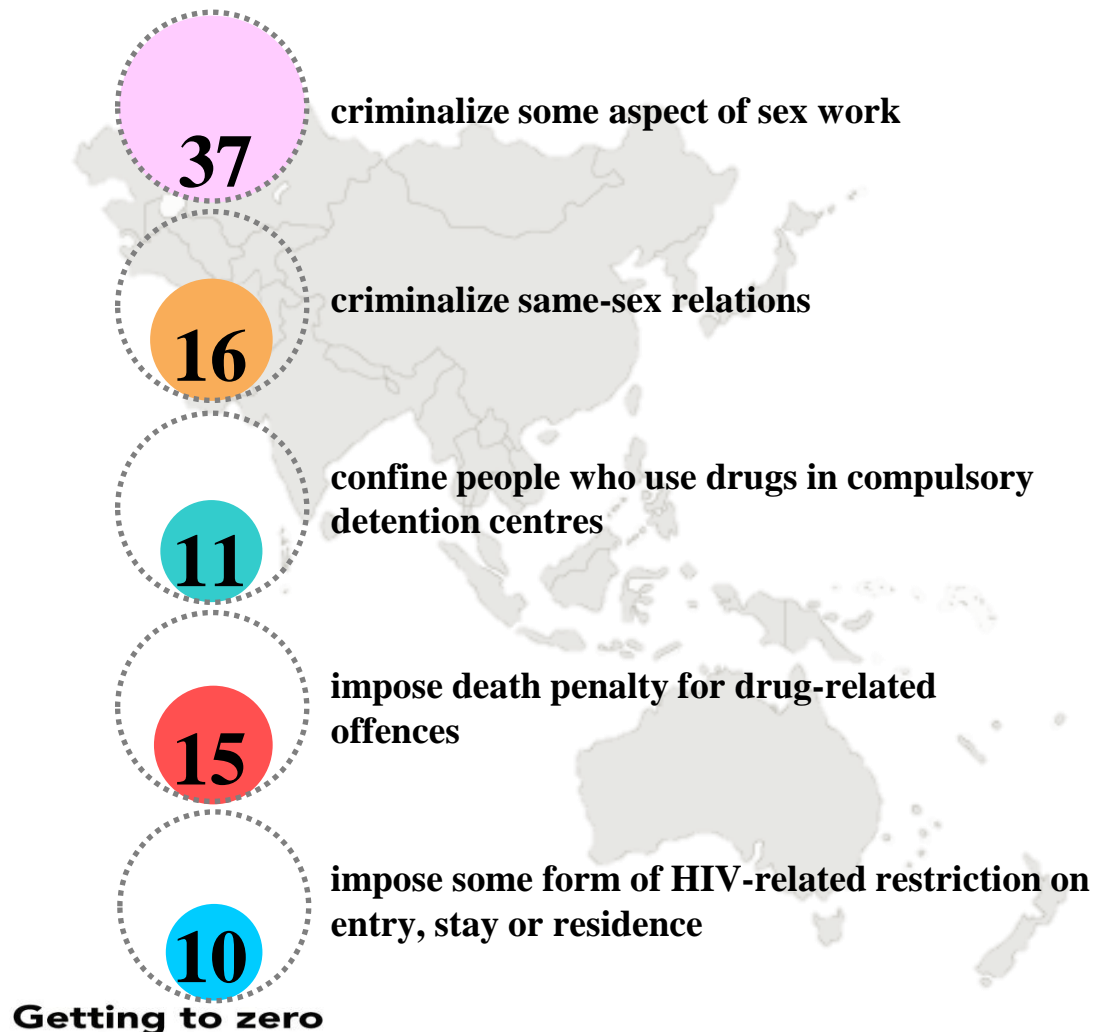
Note: Discriminatory attitudes are measured through "No" responses to either of two questions: (1) Would you buy fresh vegetables from a shopkeeper or vendor if you knew this person had HIV?; and (2) Do you think that children living with HIV should be able to attend school with children who are HIV-negative?

Sources: Population-based surveys, 2014–2018, countries with available data.

Support countries to put in place guarantees against discrimination in law, policies, and regulations

Legal barriers to HIV response remain in 38 UN Member States in Asia Pacific

Recent ground-breaking decision by India's Supreme Court strikes down law criminalizing LGBTI people



REPORTABLE

IN THE SUPREME COURT OF INDIA
CRIMINAL ORIGINAL JURISDICTION
WRIT PETITION (CRIMINAL) NO. 76 OF 2016

NAVTEJ SINGH JOHAR & ORS. ...Petitioner(s)

VERSUS

UNION OF INDIA
THR. SECRETARY
MINISTRY OF LAW AND JUSTICE ...Respondent(s)

WITH

WRIT PETITION (CIVIL) NO. 572 OF 2016
WRIT PETITION (CRIMINAL) NO. 88 OF 2018
WRIT PETITION (CRIMINAL) NO. 100 OF 2018
WRIT PETITION (CRIMINAL) NO. 101 OF 2018
WRIT PETITION (CRIMINAL) NO. 121 OF 2018

J U D G M E N T

Dipak Misra, CJI (for himself and A.M. Khanwilkar, J.)



Recognizing the challenges and realities



Rising epidemics



**Limited use of
innovative service
delivery models**



**Shrinking space
for civil society**



**Dependent on
external funding
and delays in
availability
resources**



**Criminalization
and punitive laws**

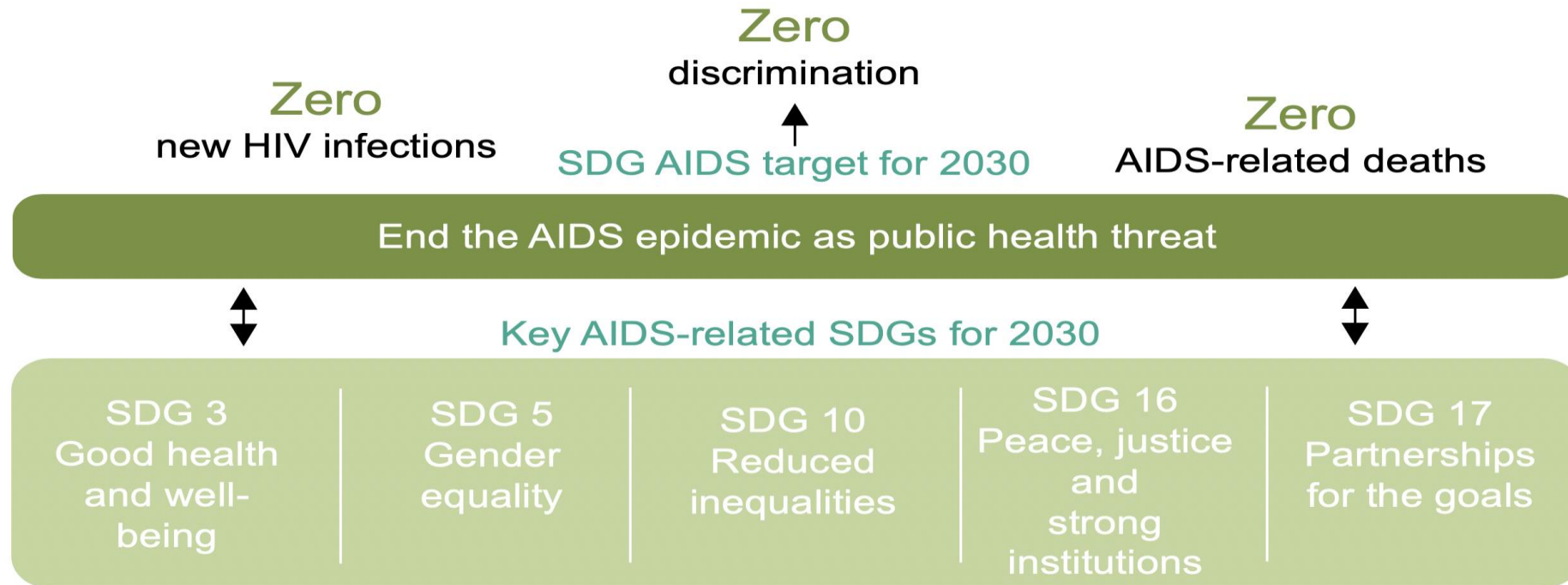
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Solutions to leverage AIDS response in Asia and the Pacific

- Cover the spectrum from prevention to treatment and support mechanisms
- Multisectoral and integrated multi-disease approaches
- Use innovative approaches for reaching those left behind
- Meaningful engagement of civil society at all levels
- Governance & accountability
- Use UHC as a tool to allow the poorest, the most marginalized and the most vulnerable people enjoy health and well-being
- People and equity at the center of the response

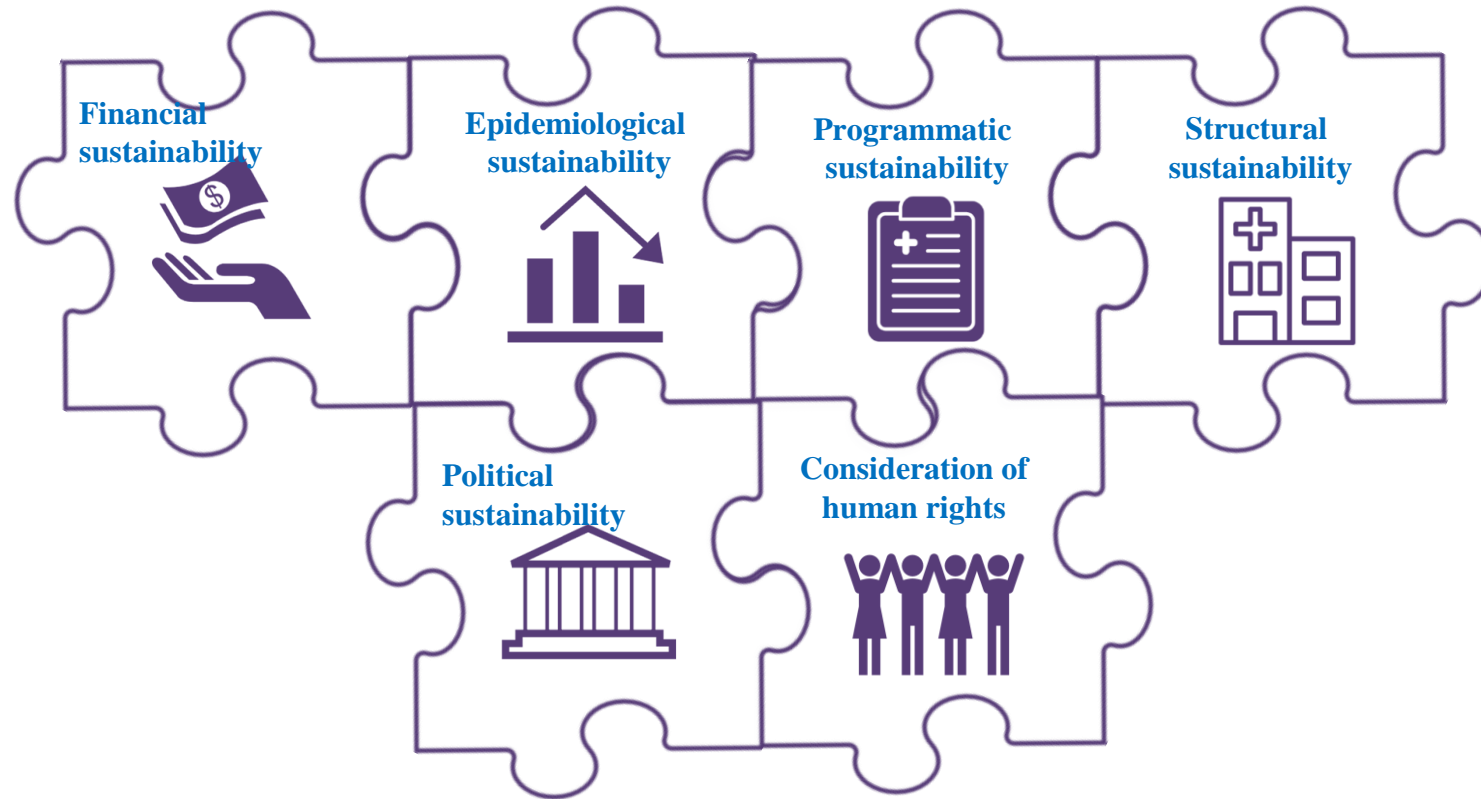
Towards greater sustainability of results



How will the approach to sustainability take into account the epidemiological, programmatic and financing transitions to ensure that no one is left behind?

What do we mean by sustainability and transition?

People-Centered Approach



Universal Health Coverage (UHC)

IS

1. **“systems for health”** not “health systems”, including **multisectoral responses**.
2. **Covering the spectrum not only treatment**
3. **equity, development priorities and social inclusion**.
4. **focused at the community level**.

IS NOT

1. **Just about health financing**. It encompasses all components of the health system.
2. **Only about a minimum package of services**, but is anchored in the right to health for everyone.
3. **about individual health (treatment) services**, but puts the focus on people, not diseases.

Towards the SDGs: Opportunities in AIDS response

The 4 Rs

1. **Re-prioritize health**
2. **Re-politicize health**
3. **Re-commit to “leaving no-one behind” and apply it to all communities**
4. **Re-think how communicable disease programs are delivered**

Way forward: Game changing efforts to make the end of AIDS a reality



- **Harness the advancement of technology and embrace innovative service delivery models and new tools :**

- PrEP, Community-based HIV testing, self-testing, index testing
- Innovative service delivery models – physical and virtual outreach; online to offline model; differentiated service delivery model



- **Mind the gap:**

- keeping up with changing epidemics and behavioral trends and reinvigorate prevention efforts for all key populations
- Scale up HIV testing and treatment; Same day ART initiation; link and maintain in care to maximize the prevention effect of treatment and to control the epidemic



- **People centered, right-based and integrated multi-disease approach**

- Maximize partnerships and synergistic efforts for health and well being of key populations and PLHIV (TB-HIV,STI, RH, mental health, etc.)
- Community-led services – community capacity building and empowerment; meaningful engagement of civil society at all levels



- **Breakdown stigma and legal barriers**



**AIDS is not over,
but it can be,
with your support**

