





OVERCOMING CHALLENGES IN HIV WITH SCIENCE, INNOVATION AND COLLABORATIONS IN SOUTHEAST ASIA

IAS 2019 POST-CONFERENCE WORKSHOP

Malaysia, 04-05 October 2019



Overview of the HIV epidemic in Southeast Asia

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UNAIDS Asia and the Pacific

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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)

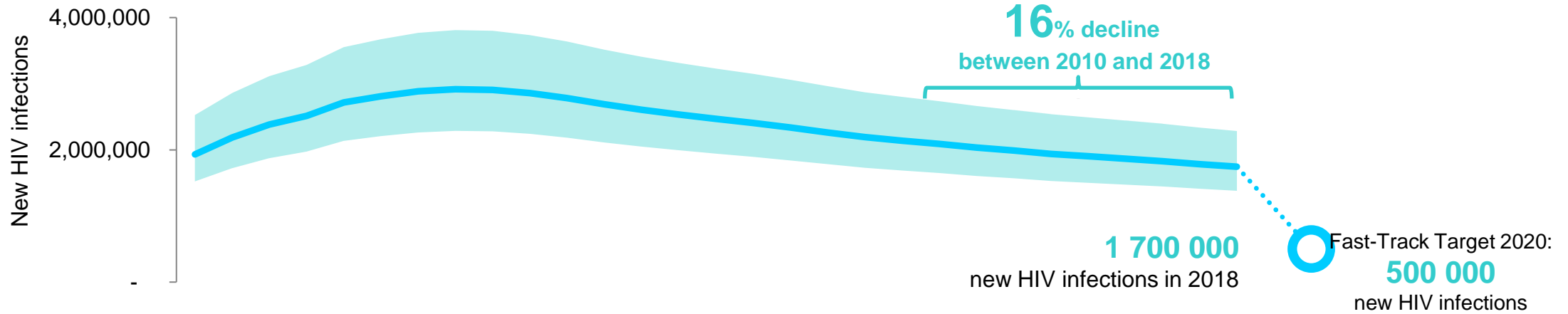
6 million people have died from AIDS-related illnesses (Population size of Singapore)



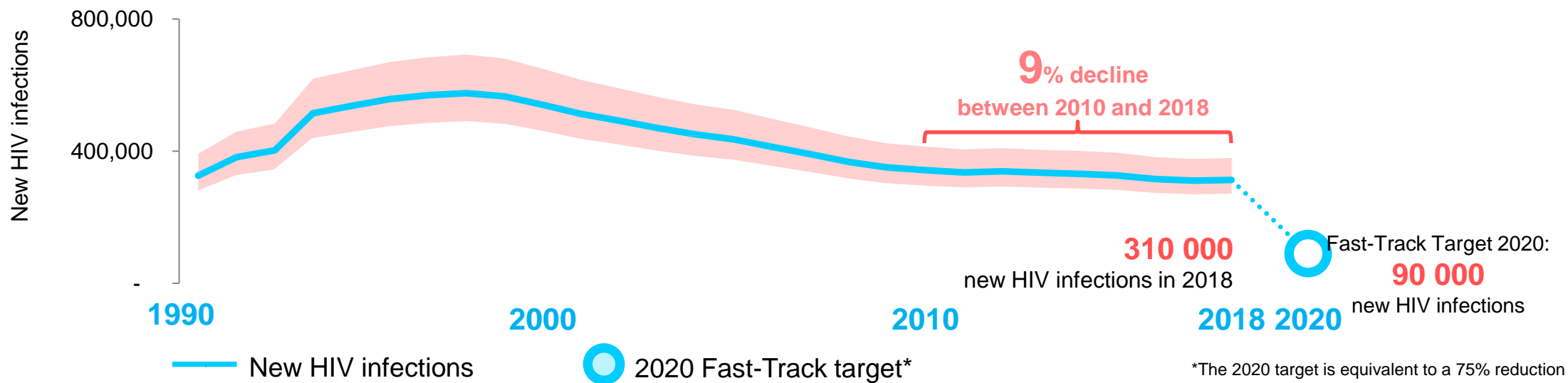
HIV response has achieved notable success in declining new infections globally and regionally, but during the past 8 years the decline in new HIV infections has stalled



Global



Asia and the Pacific



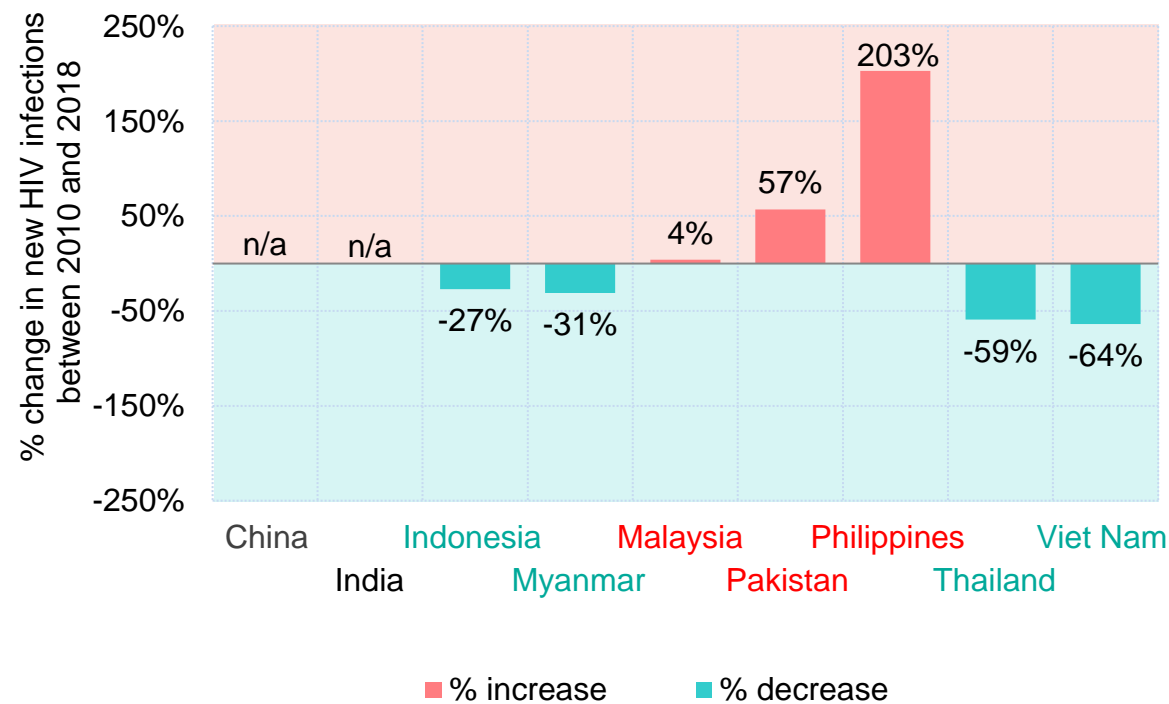
*The 2020 target is equivalent to a 75% reduction since 2010.



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



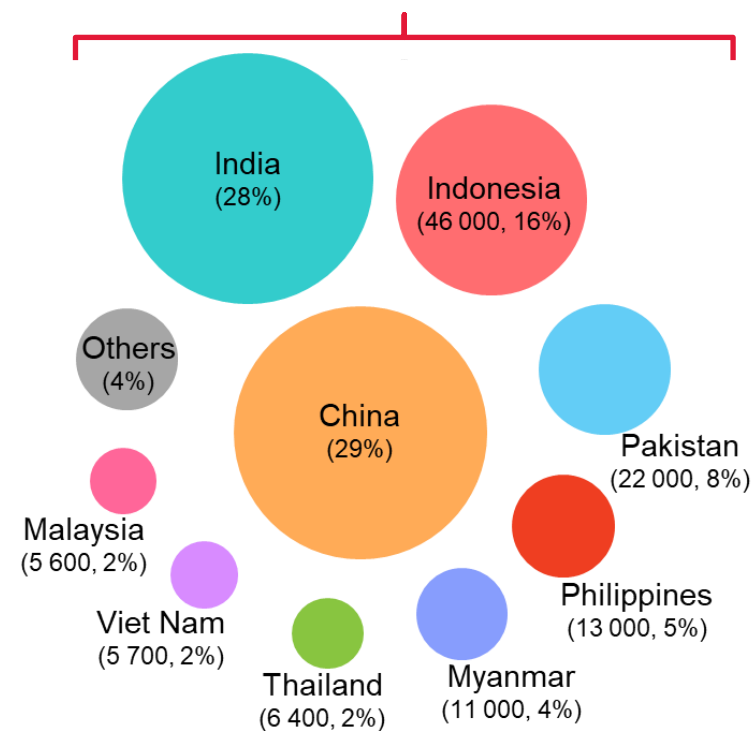
Percent change in new HIV infections between 2010 and 2018



Note: **Afghanistan, Bangladesh, and PNG** are also seeing increasing new HIV infection trends between 2010 and 2018

Distribution of new HIV infections by country, 2018

310 000 new HIV infections in Asia and the Pacific in 2018

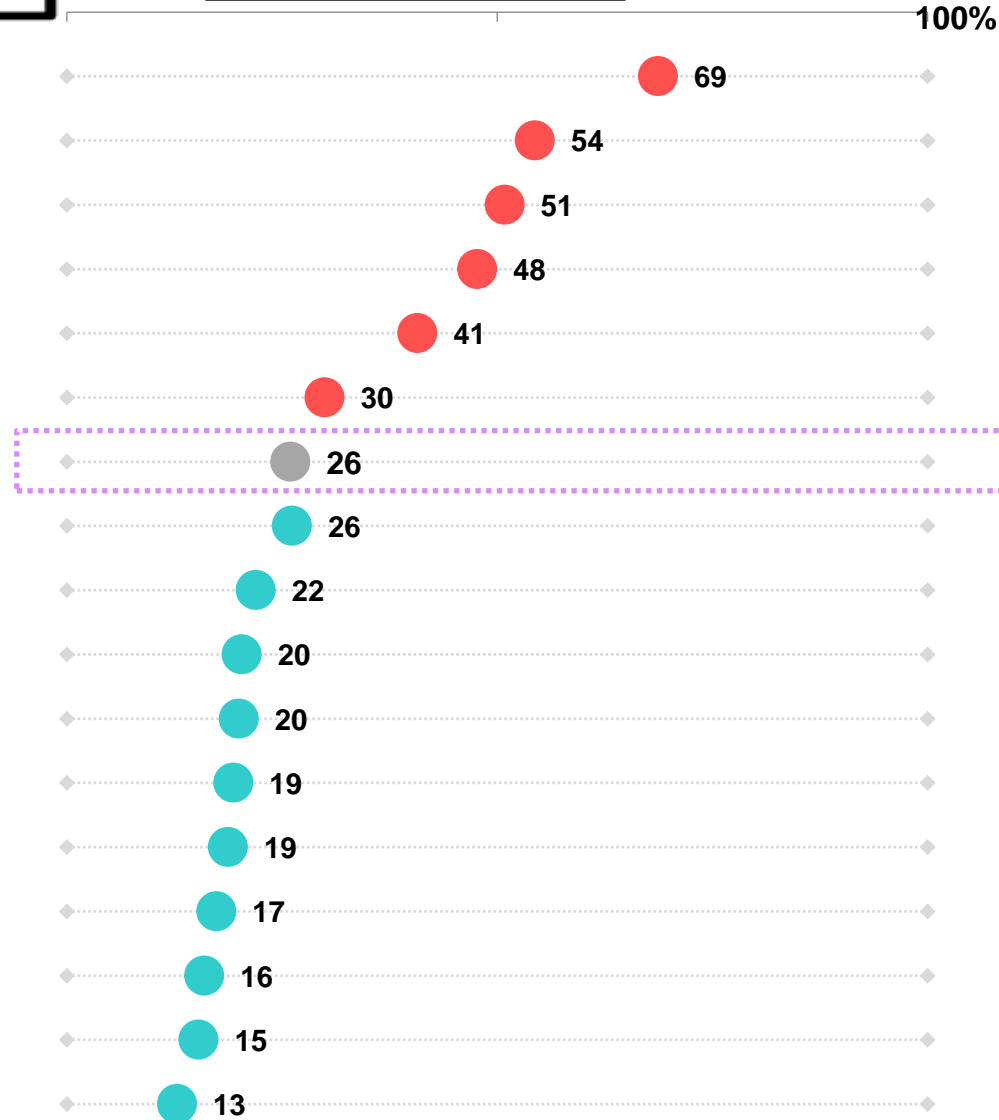




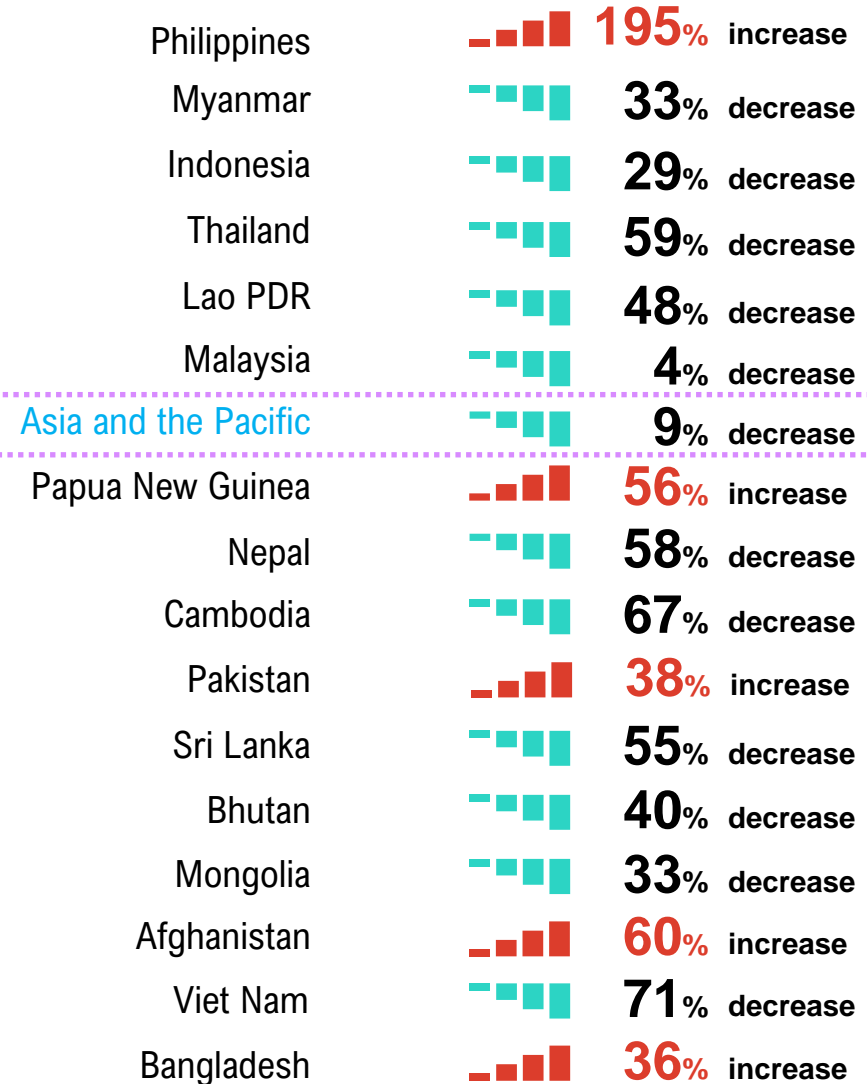
Overview of new HIV infections among young people (15-24) in Asia and the Pacific



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



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

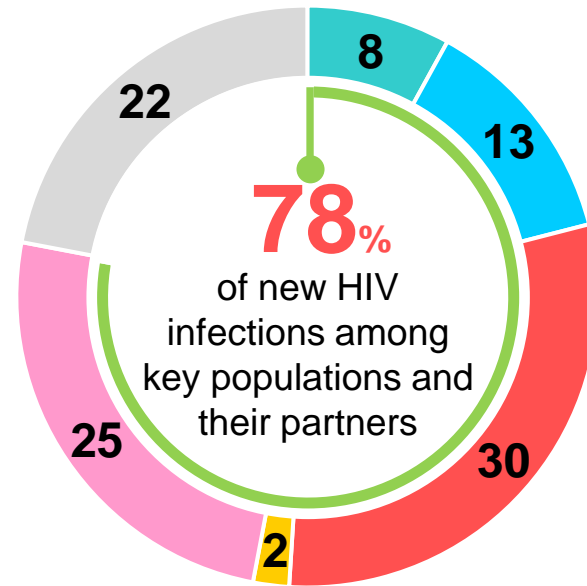




Urgent need for focused response: Epidemic mostly affecting KPs and their partners



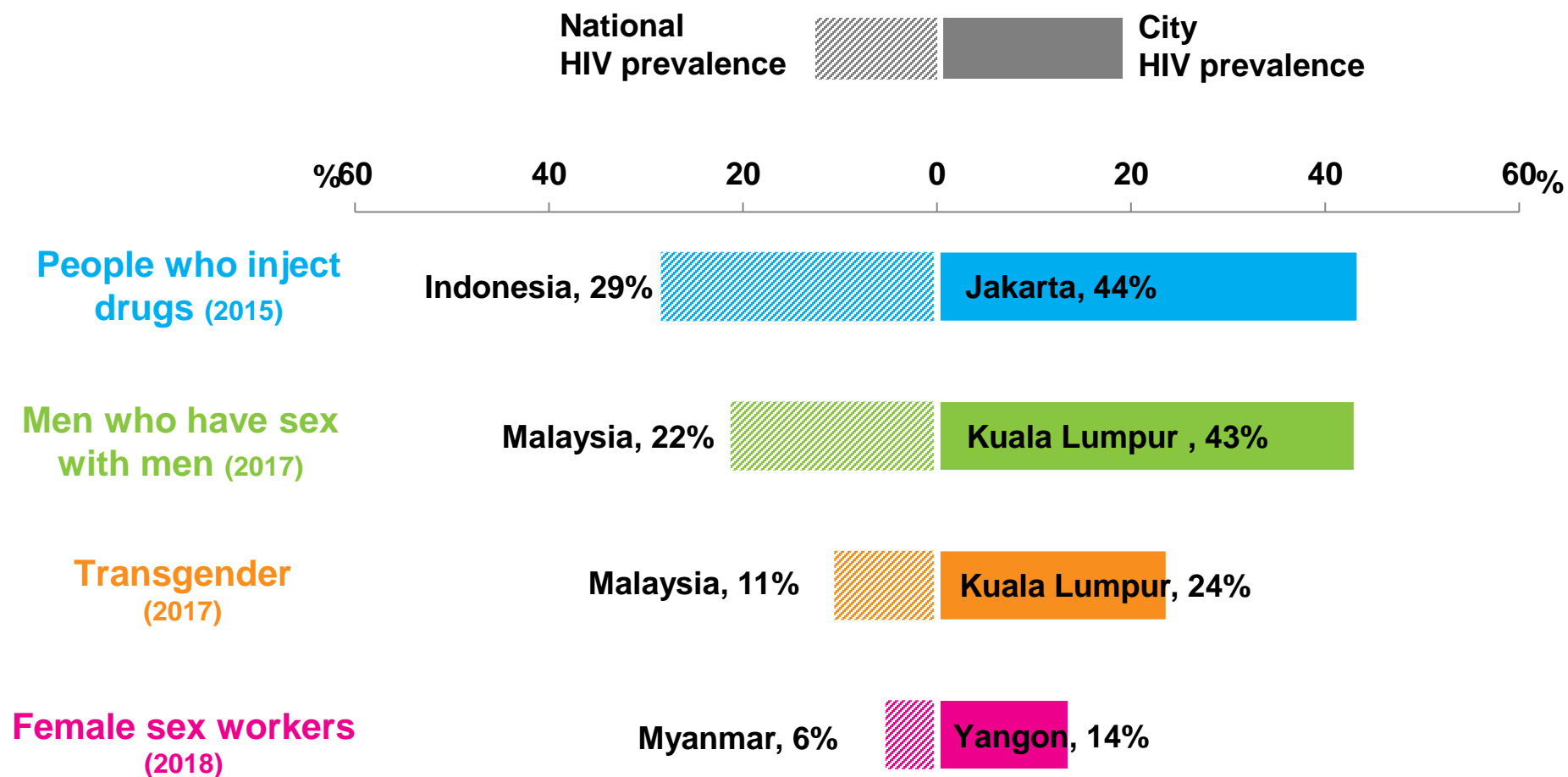
Share of new HIV infections by population in Asia and the Pacific



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



HIV in Asia and the Pacific is concentrated among key populations, especially in cities



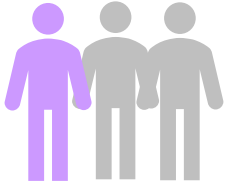


Urbanization, digital growth and rising HIV epidemics among young MSM



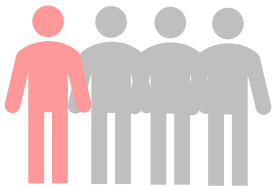
Urban growth and escalation of HIV epidemic among young MSM

1 in 3 young MSM in



Kuala Lumpur, Malaysia are living with HIV

1 in 4 young MSM in



Can Tho, Viet Nam are living with HIV

1 in 5 young MSM in



Yangon, Myanmar are living with HIV

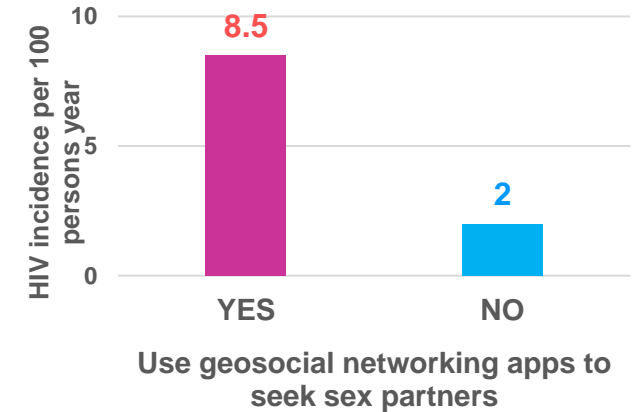
Digitalization and MSM epidemic

HIV incidence is

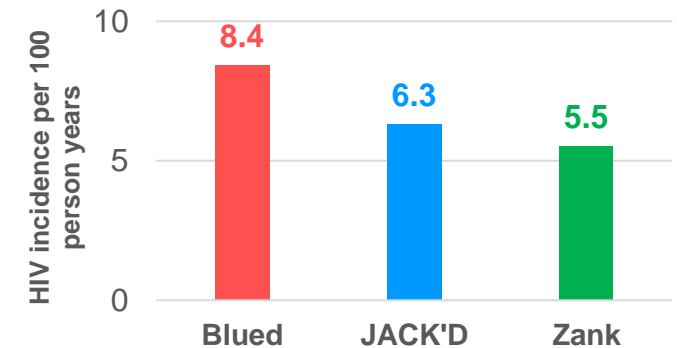
2x higher

among those who use geosocial networking apps

HIV incidence rate based on an 18-month cohort study in Shenyang, China



Higher incidence among geosocial networking apps users in Shenyang, China





Digital growth

YOUNG PEOPLE



Barriers

PrEP

SRHR services

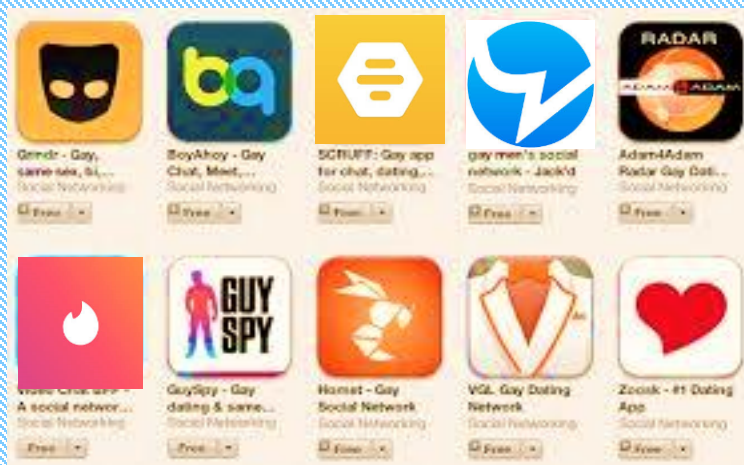
Unreachable

Traditional prevention outreach

VIRTUAL SPACE



Mobile phone & social media



Dating apps



Cities

Party drugs and chem sex

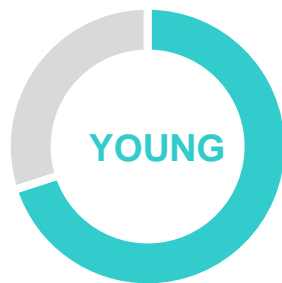




Risk profiles of MSM who use social platforms to find sexual partners



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



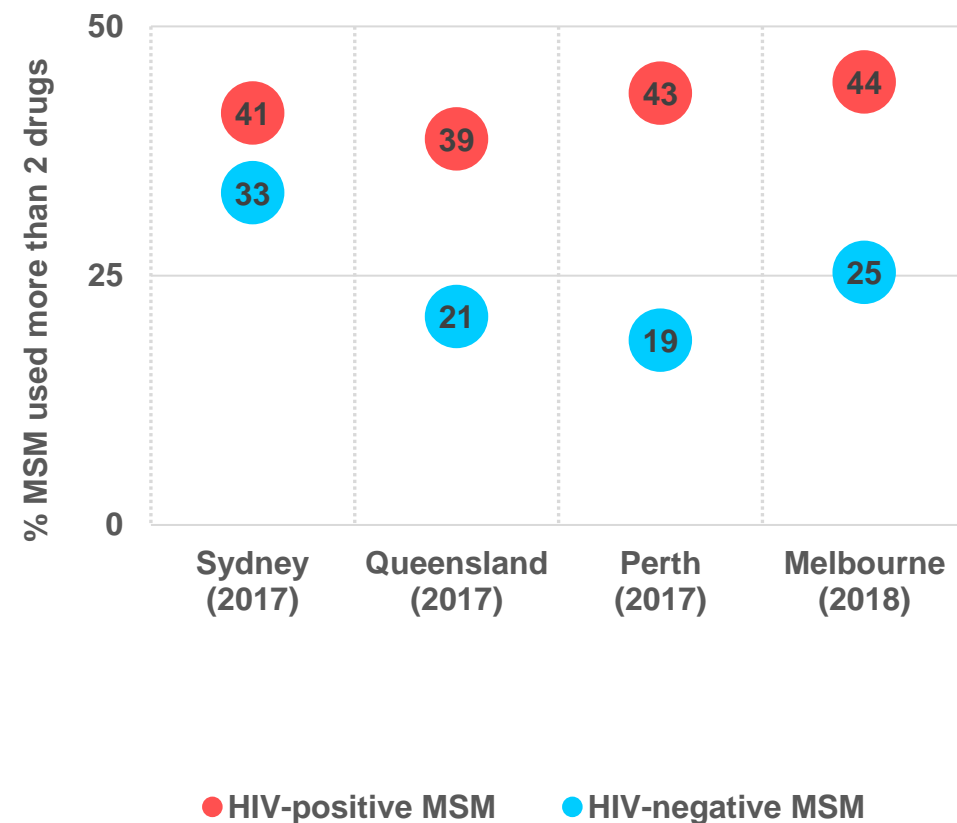
Dual/multiple Risks: cause for concern and urgent need for differentiated service delivery model



- ❖ FSW, their clients and drug use
- ❖ MSM, drug use and chemsex
- ❖ TG, sex work and drug use
- ❖ PWID who sell and buy sex



% of MSM who used more than 2 drugs in the last 6 months by HIV status, Australia



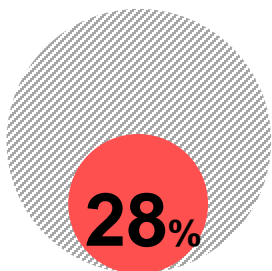


Mind the gap: use innovations to maximize prevention

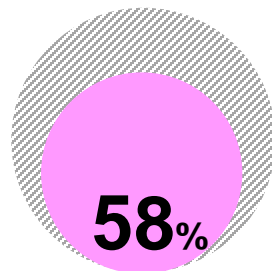


Prevention gap, select countries and populations

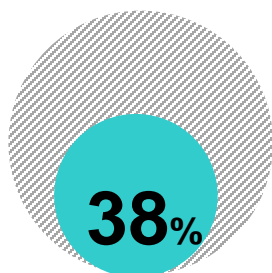
Philippines, Men who have sex with men



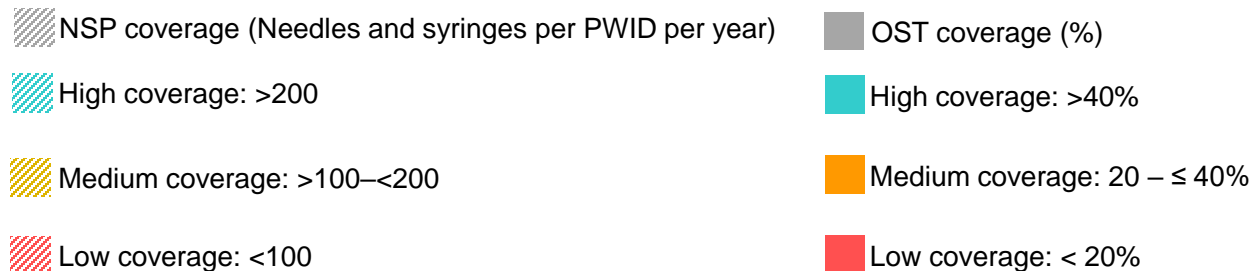
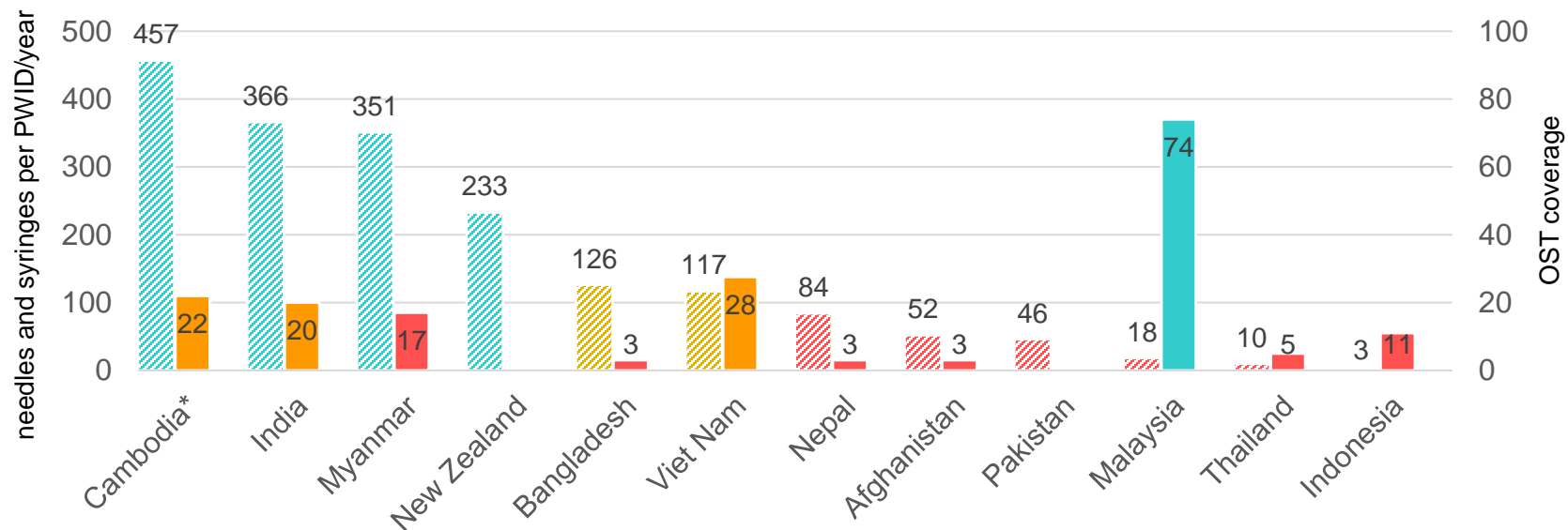
Malaysia, Transgender women



PNG, Port Moresby, Female sex workers

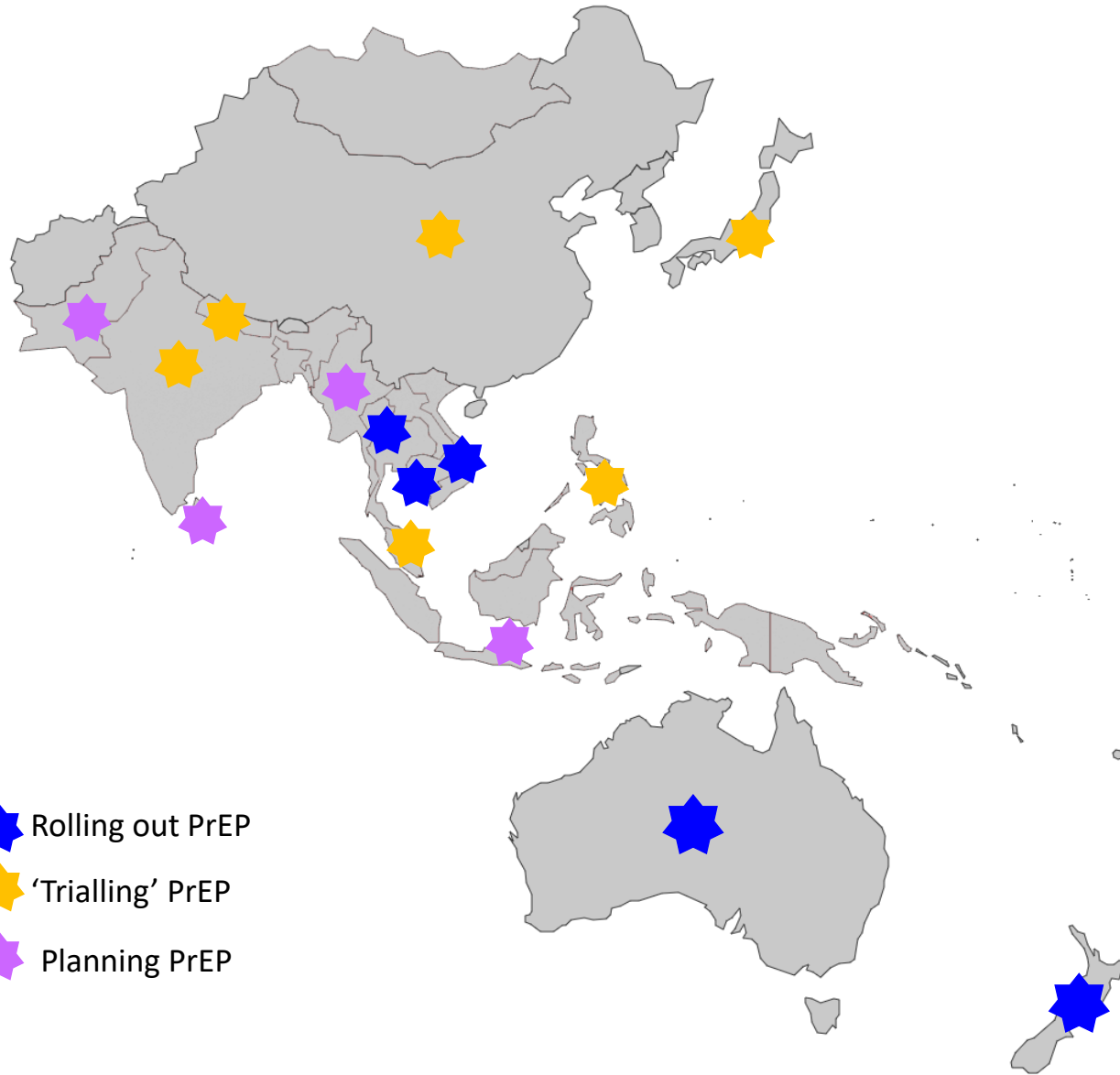


Needle and syringe programme (NSP) and Opioid substitution therapy (OST) coverage among people who inject drugs, select countries with available data, 2018

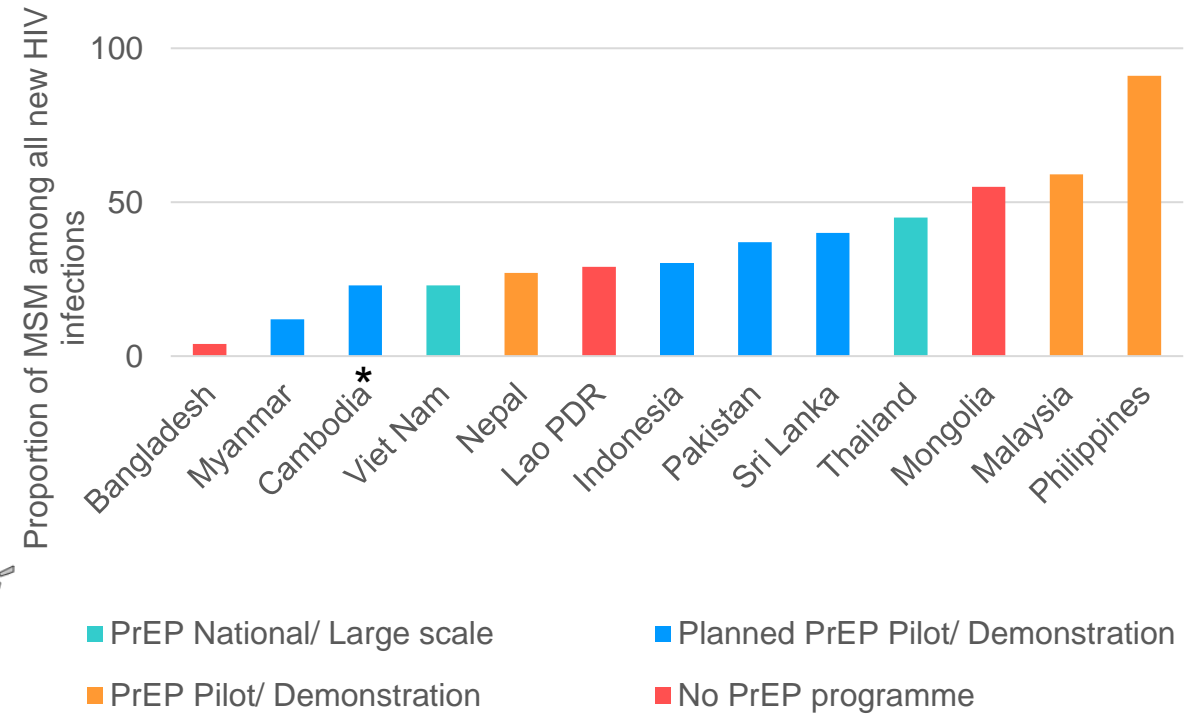


* 2016 data for OST coverage

Status of PrEP in Asia and the Pacific, 2019



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



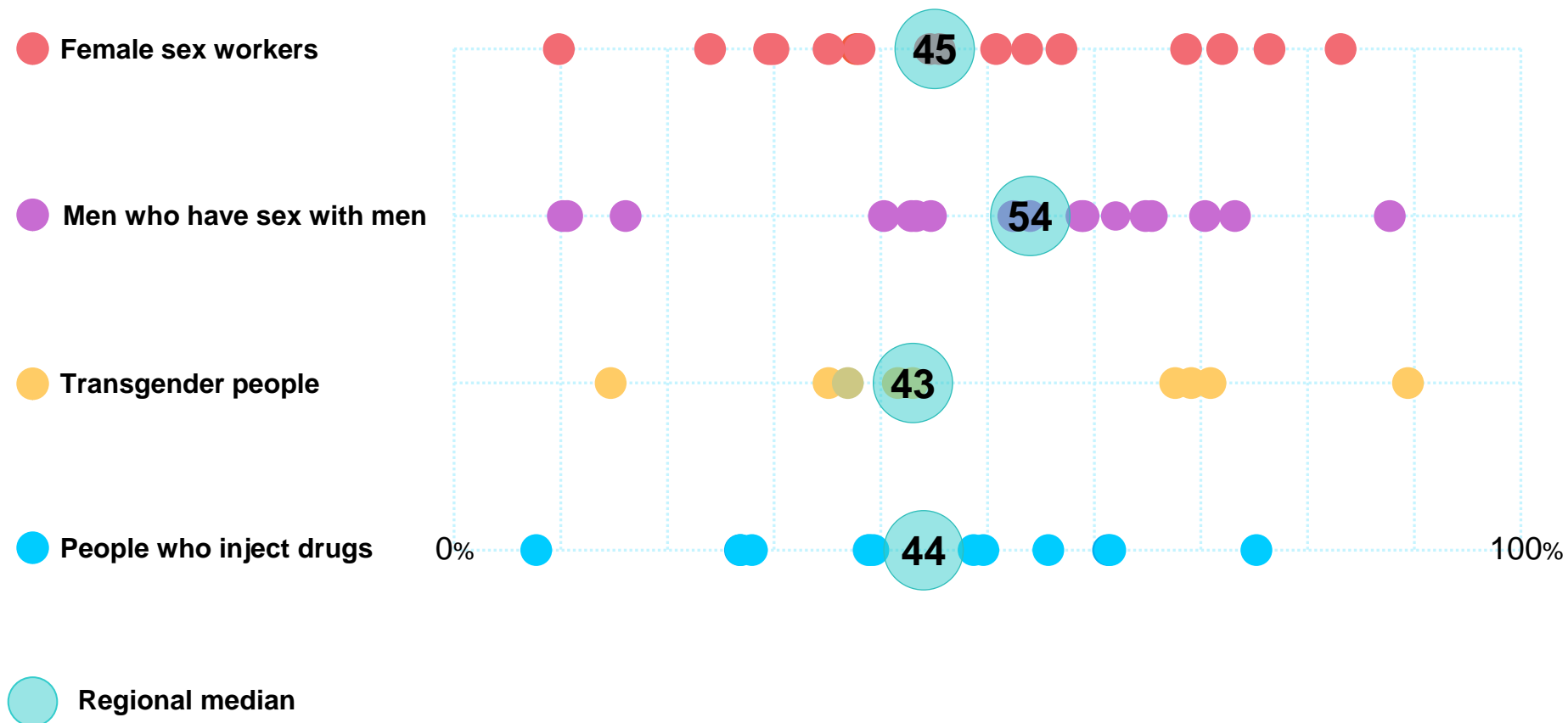
Note: Data do not include drug registration and private sector availability. ARV drugs registered for use as PrEP are available in the private sector in several countries including Malaysia, the Philippines, Thailand and Vietnam; India and China are not included in the above graph since disaggregated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



HIV testing is the entry point for prevention and treatment but about half of key populations do not know their HIV status



HIV testing coverage among key populations, 2014 - 2018

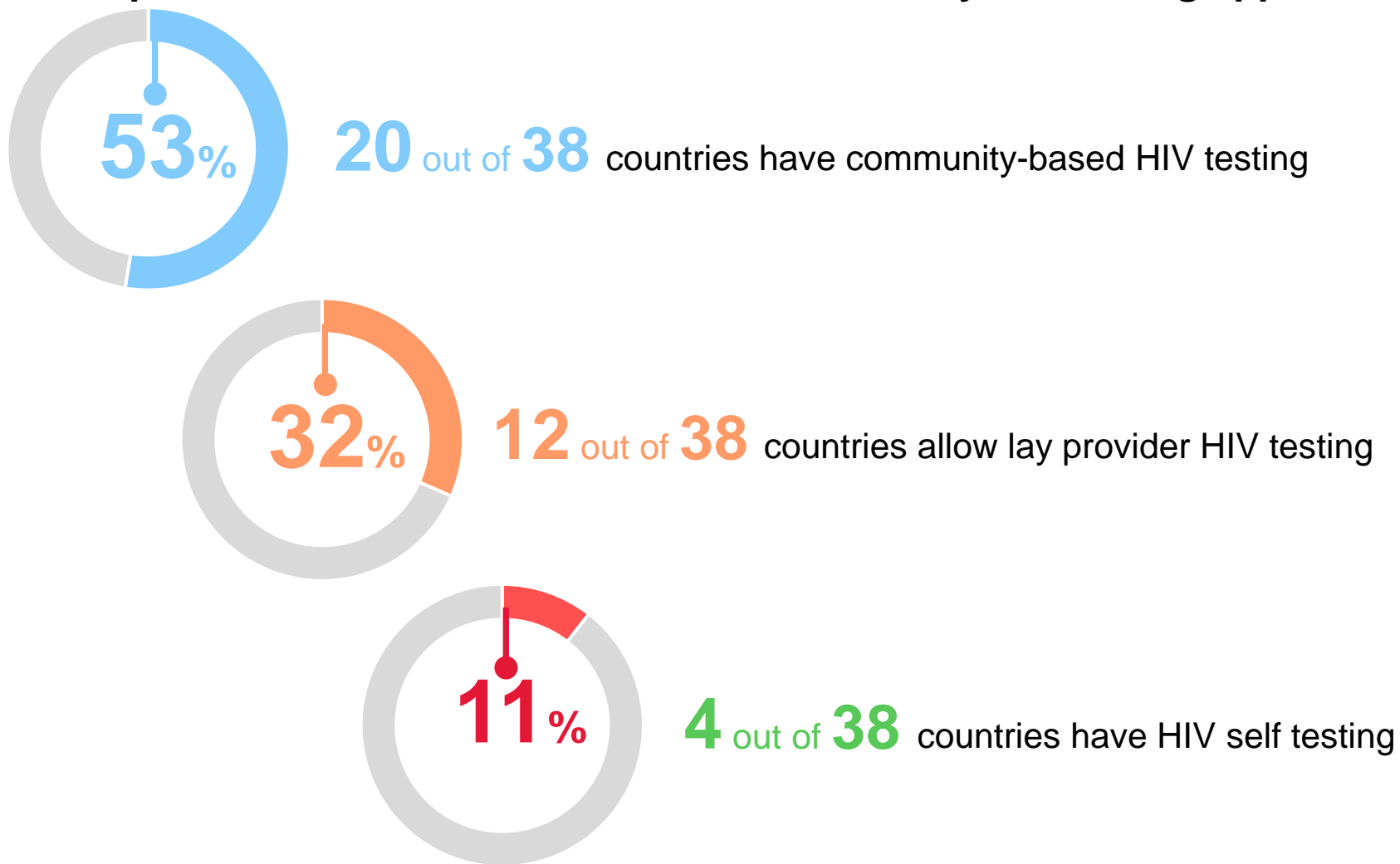




Innovative HIV testing strategies to reach prevention and treatment Fast-Track targets in Asia and the Pacific



Proportion of countries in Asia and the Pacific by HIV testing approach

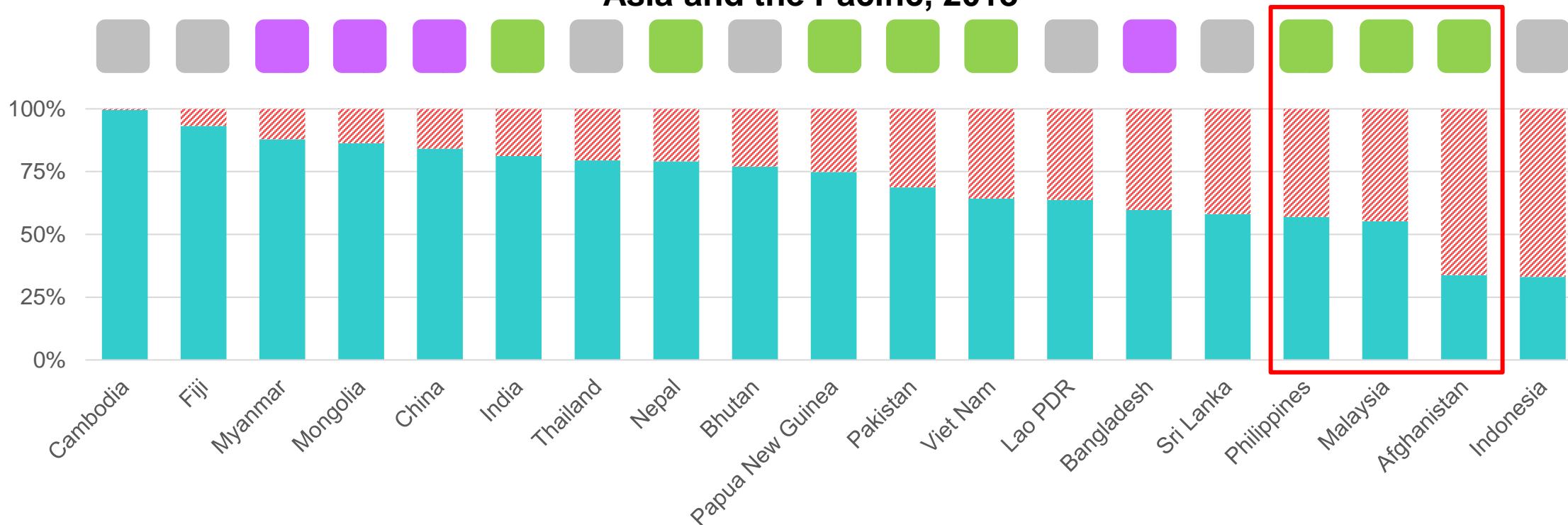




Same day ART initiation: a call to prevent onward transmission and AIDS-related deaths



Proportion of PLHIV who know their HIV status by treatment and by policy on same day initiation of ART, Asia and the Pacific, 2018



PLHIV aware of status but NOT on treatment PLHIV aware of status and on treatment

Possible to start ART on the same day as HIV diagnosis NOT possible to start ART on the same day as HIV diagnosis No info

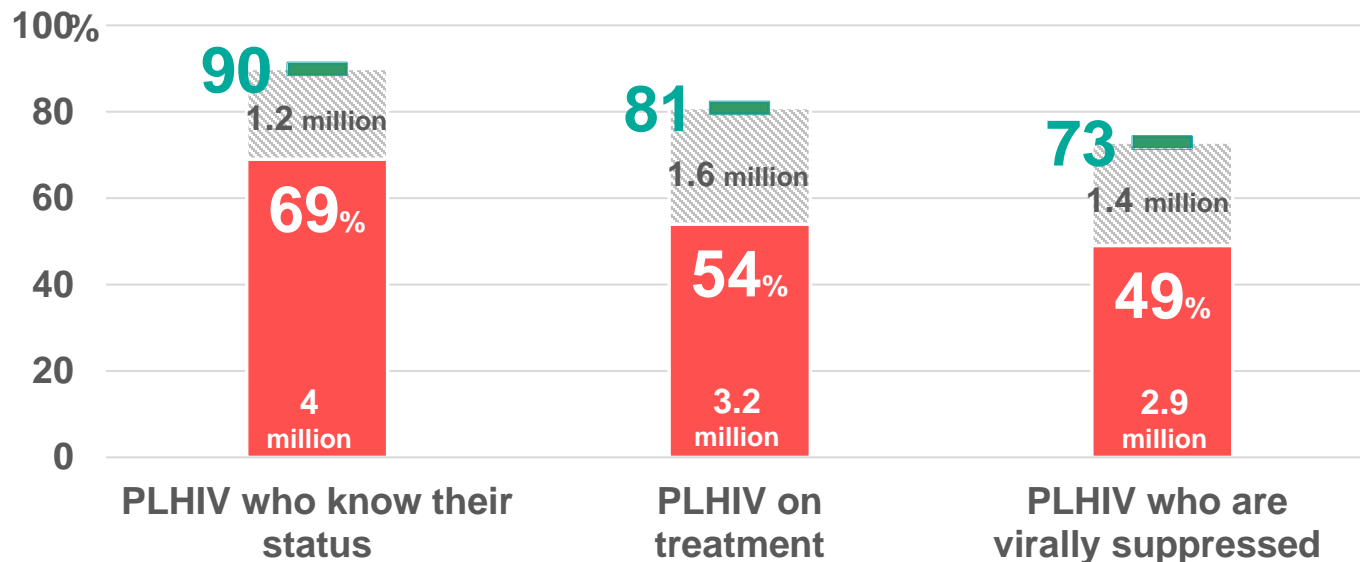


Regional overview: Treatment target and gaps



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

Note: India and China data not available

90-81-73 target



83 : 78 : 64



74 : 61 : 56



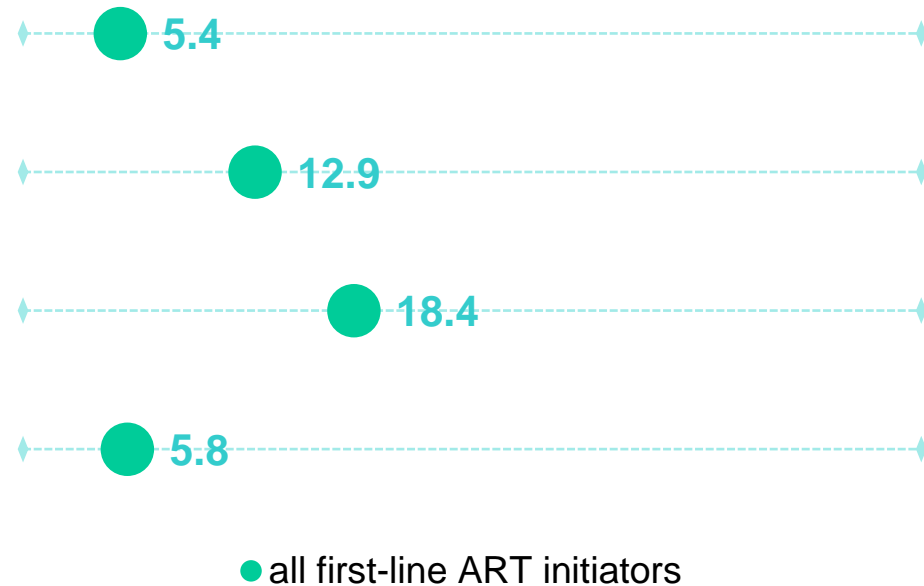
66 : 49 : 45



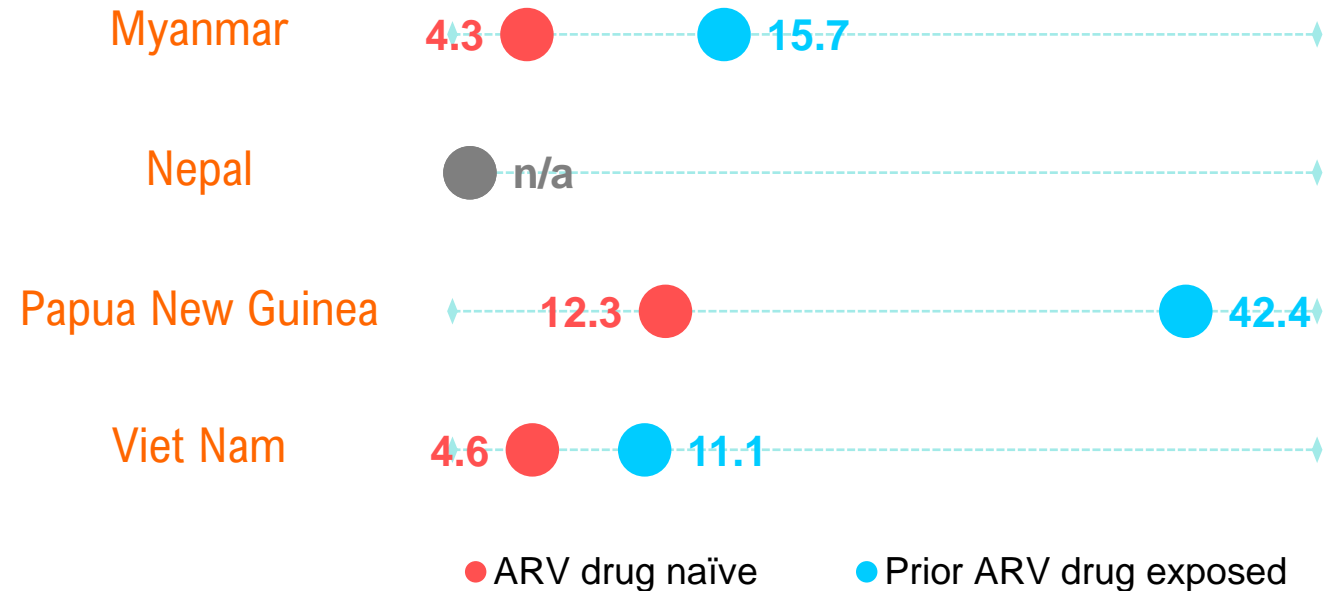
HIV drug resistance: an urgent need to address the leakages in treatment continuum, and improve quality of treatment services



Pre-treatment HIV drug resistance* among first-line ART initiators, 2016-2017



Pre-treatment HIV drug resistance* among first-line ART initiators - treatment naïve vs previously exposed



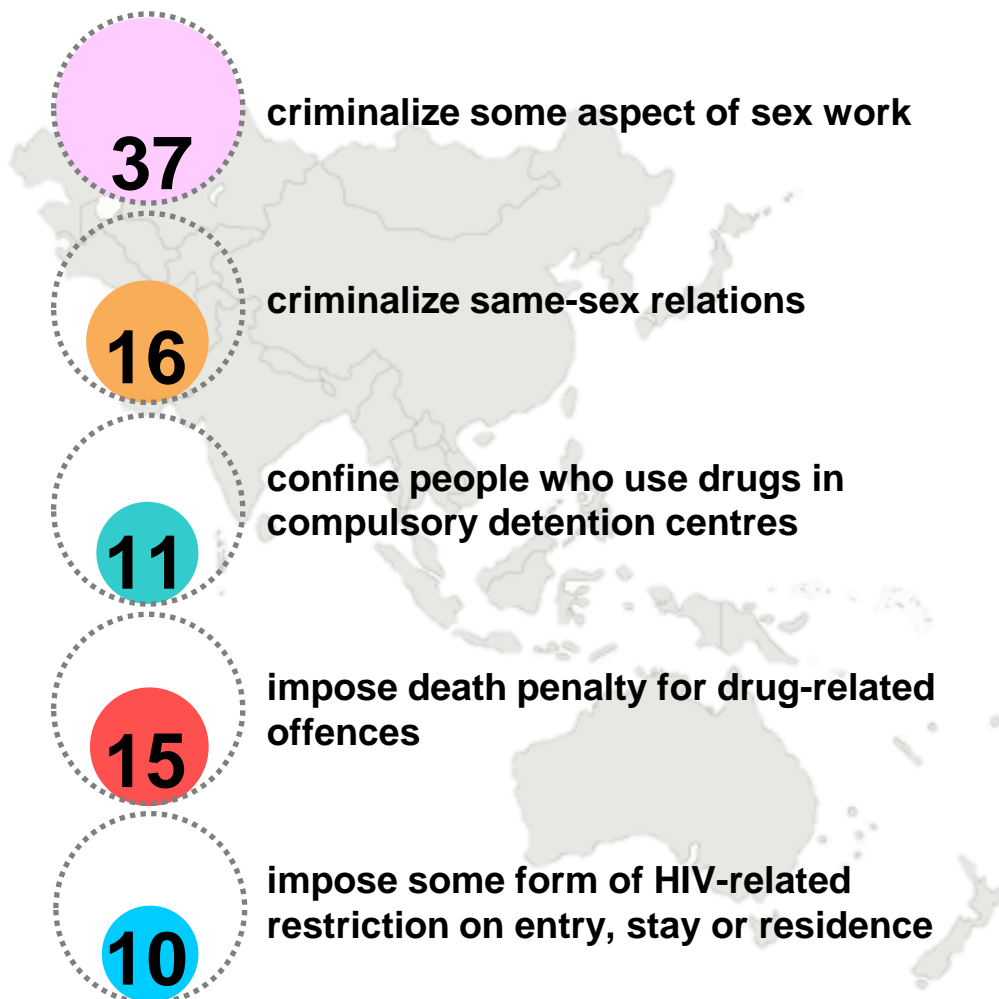
*Estimated HIV drug resistance to any type of ARV drugs



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.)



TB snapshot



Globally...

10 million new TB infections of which

0.6 million are MDR/RR-TB infections

1.6 million TB deaths

In Asia and the Pacific...

6.84 million new TB infections (+2/3)

0.34 million are MDR/RR-TB infections (1/2)

0.83 million TB deaths (1/2)



11 out of 12 high TB burden countries in Asia and the Pacific also have high MDR-TB burden, 2017



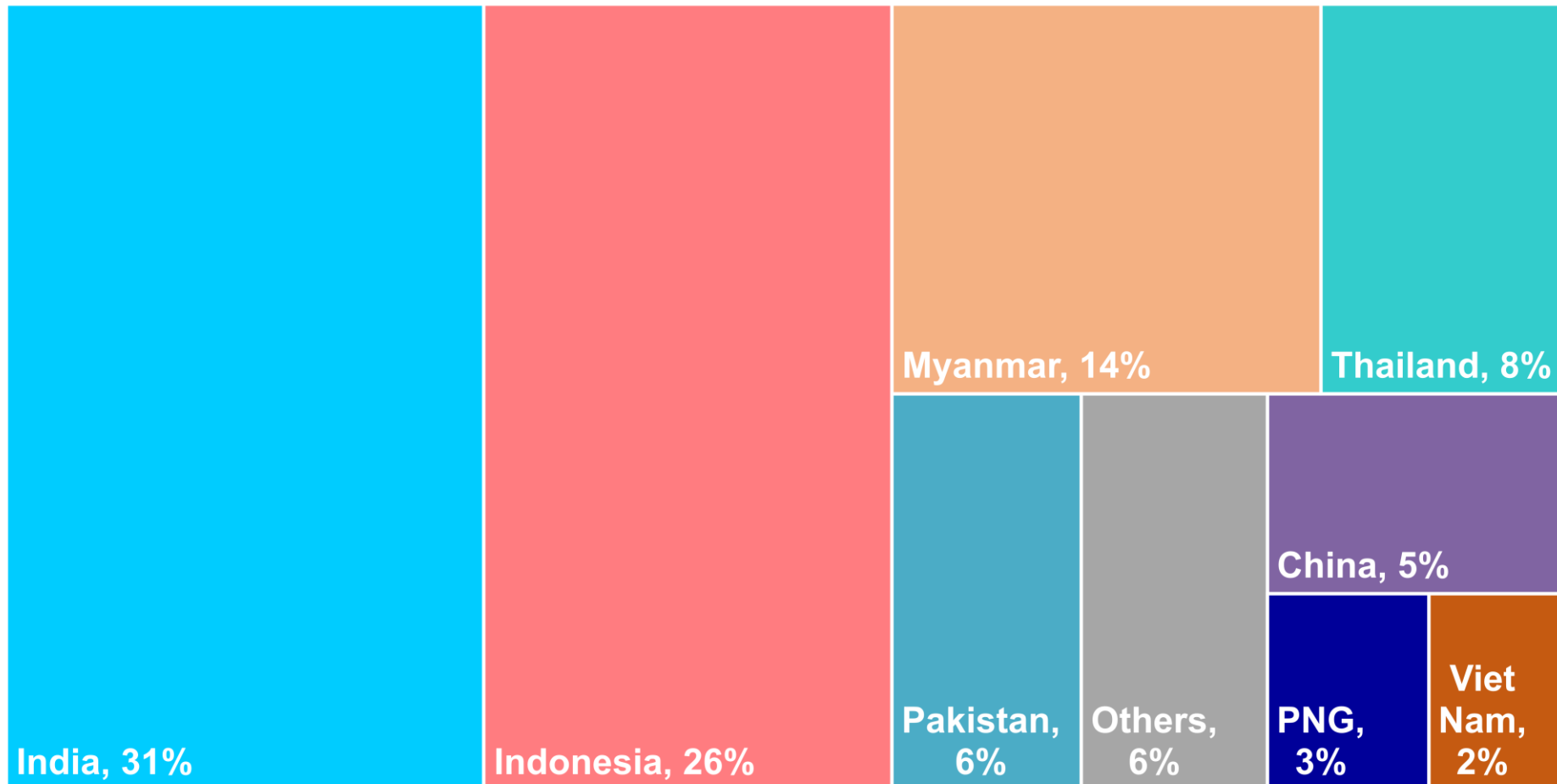
	High TB burden	High MDR-TB burden
Bangladesh	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Cambodia	<input checked="" type="checkbox"/>	<input type="checkbox"/>
China	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
DPR Korea	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
India	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Indonesia	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Myanmar	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Pakistan	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Papua New Guinea	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Philippines	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Thailand	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Viet Nam	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>



8 countries account for 94% of all TB-related deaths among PLHIV in Asia and the Pacific

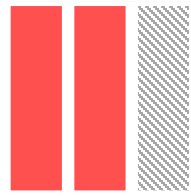


Proportion of TB deaths among PLHIV by country, 2017



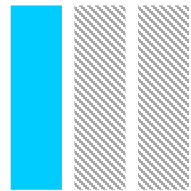


Lost opportunities in integrating TB and HIV services to save lives by putting more people on TB and HIV treatment, Asia and the Pacific



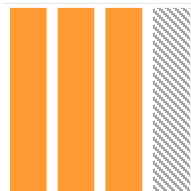
2 in 3

People co-infected with TB-HIV DO NOT know their HIV status



1 in 3

ART service providers DO NOT provide TB treatment in ART settings



3 in 4

TB service providers DO NOT provide antiretroviral therapy in TB clinics

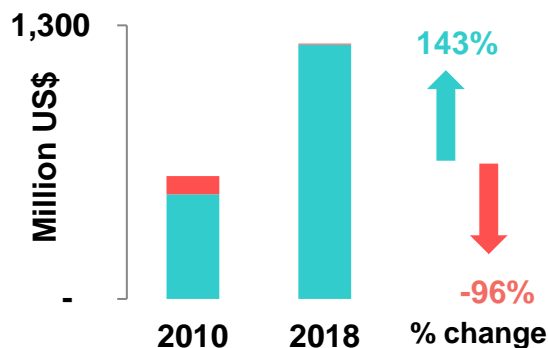


Increased government investments in AIDS

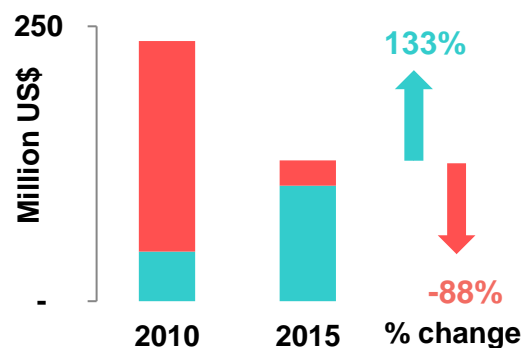
Mostly goes for treatment !



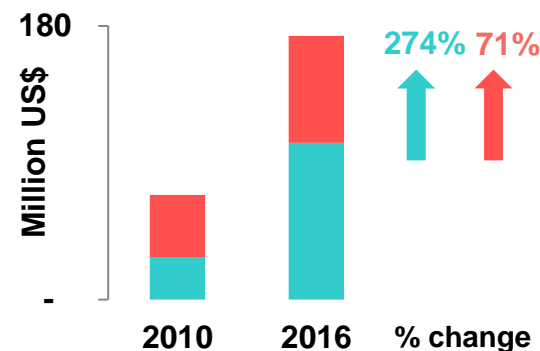
CHINA



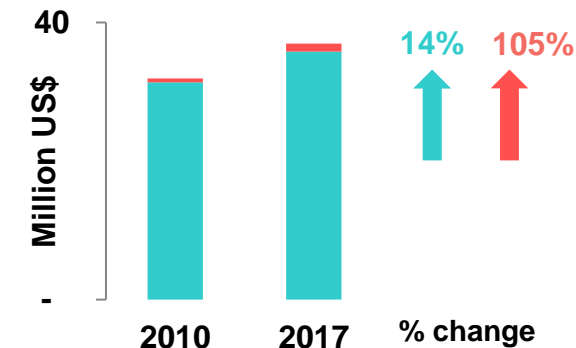
INDIA



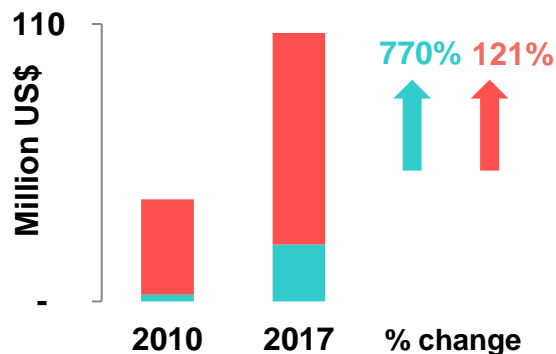
INDONESIA



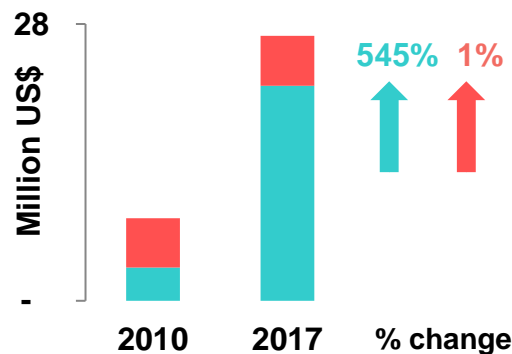
MALAYSIA



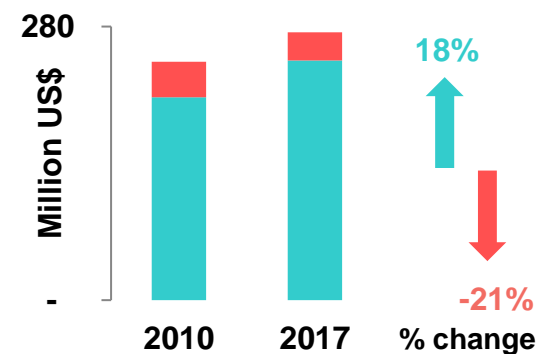
MYANMAR



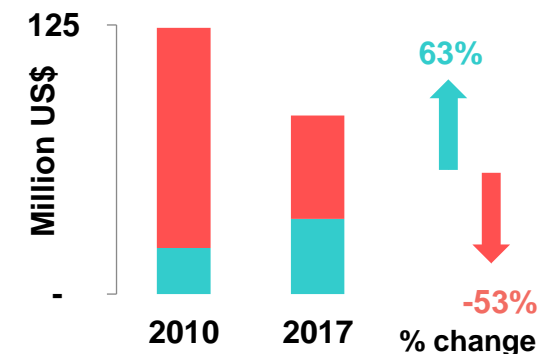
PHILIPPINES



THAILAND



VIET NAM



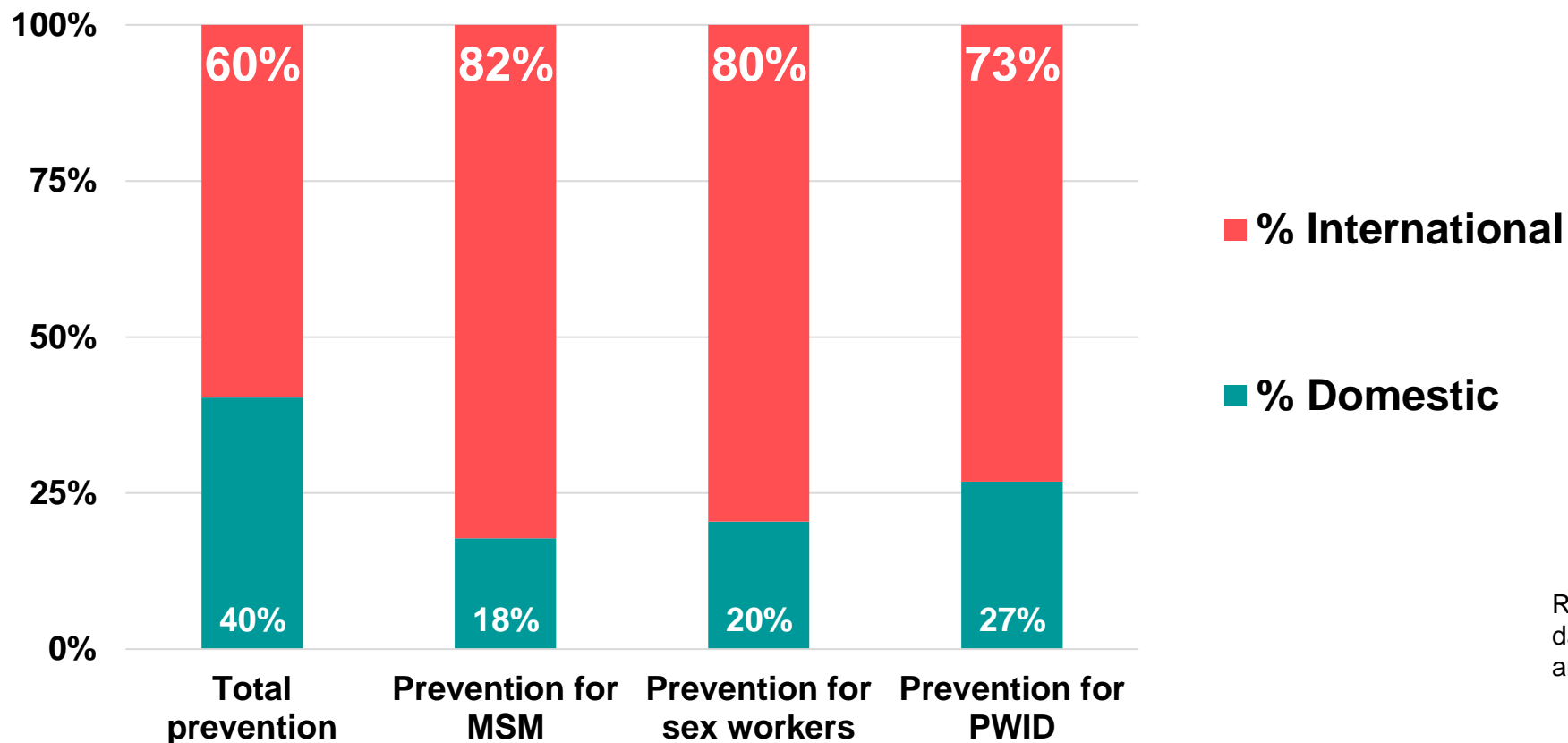
■ Domestic expenditure ■ International expenditure



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

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

Recognizing the challenges and realities

- ❑ Rising epidemics in populations (particularly among young MSM) and locations continue to be cause for concern
- ❑ Emergence of new challenges in a number of countries (Bangladesh, Malaysia, PNG,...) with signs of resurgence of epidemics
- ❑ Hurdles to sustain the fragile gains in countries that have made inroads to control the epidemic (Cambodia, Thailand)
- ❑ Changing patterns and dynamics of health risk behaviors (including HIV) that evolves with advancing technology and digitalization
- ❑ Growing trend of dual/multiple risks – chemsex, drug use, selling and buying sex among MSM, TG, PWID and sex workers and limited use of differentiated service delivery approach
- ❑ Shrinking space for civil society and weakening of its capacity and activism, erosion of human rights and growing conservatism in a number of countries.
- ❑ Urgent need to scale-up HIV testing and treatment to close the gaps along continuum of care cascade and to maximize the impact of U=U
- ❑ Donor dependency and sustainability issues, particularly for key populations HIV prevention programmes
- ❑ Stigma and discrimination against PLHIV and key populations standing in the way of effective HIV response





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 (UHC, 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**



THANK YOU

www.aidsdatahub.org