Unified Budget, Results and Accountability Framework 2016-2021

Action and results: Regional perspective -Asia and the Pacific



### **Epidemic and response realities in Asia-Pacific**



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

Source: Prepared by www.aidsdatahub.org based on Integrated Biological and Behavioural Surveys, UNAIDS 2019 HIV Estimates, and National Commitments and Policies Instrument of Global AIDS Monitoring (GAM) 2017,2018, and 2019



Rising HIV prevalence among young MSM (<25 years)

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### **Combination Prevention and HIV testing**

### Coverage by combination prevention and HIV testing remain low

#### People who inject drugs Female sex workers 100% 99.7 100% Malavsia Transgender Men who have sex with men 100% 100% 80 58 Malavsia Thailand Cambodia Sri Lanka vioral survey data M Programme data

#### Prevention Coverage by KP

#### Testing coverage by KP



# Effective interventions and models of service delivery being scaled up

- 5 countries started national roll out of PrEP and 6 are in pilot phase. 33000 MSM on PrEP reported in 4 countries [2018]
- Scale up of Community based testing in 20 countries. 12 countries have national policies on HIV self testing and 4 have started implementation.
- 6 countries are implementing dedicated services for adolescents and young key populations with specific programmatic design and funding, and 2 others have introduced specific provisions in NSP
- 4 countries validated for triple elimination of HIV, Hepatitis B and Syphilis

### **Treatment Cascade**

# Major Gaps and leakages throughout the treatment cascade



#### Policy change and solutions for rapid start and retention of PLHIV on Treatment

- All countries in AP included DTG in treatment guidelines and most have started its introduction as first line regimens
- All countries on MMD policies and JP supporting implementation.
- 78% of PLHIV who know status are on treatment.
- With effective solutions for access to Viral Load testing being implemented in countries, VL testing coverage has doubled between 2017 and 2018 from 15% to 33%

## **Enabling Environment**

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



criminalize some aspect of sex work

criminalize same-sex relations

confine people who use drugs in compulsory detention centres

impose death penalty for drugrelated offences

impose some form of HIV-related restriction on entry, stay or residence

38 countries in Asia and the Pacific region Countries with punitive laws



Changing legal framework and mobilizing political commitment

- Recent Ground-breaking Decision by India's Supreme Court strikes down law criminalizing same sex behaviors
- Adoption of comprehensive HIV legislations in India and the Philippines
- Enaction of Transgender persons Act in Pakistan
- CCDUs: Renewed focus on transition to voluntary community-based treatment and care for drug use and dependence.
- Renewed political commitment to strengthen HIV response with focus on Prevention, Integration, Innovation and Sustainability

Source: Prepared by <u>www.aidsdatahub.org</u> based on UNAIDS, Punitive Laws Hindering the HIV Response in Asia and the Pacific (as of June 2016); and <u>https://timesofindia.indiatimes.com/realtime/sc\_decriminalises\_section\_377\_read\_full\_judgement.pdf</u>

### **Sustainability**

HIV response is heavily dependent on external funding in most countries, particularly for KP prevention services



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



% Domestic

### Supporting solutions for Financial, Programmatic and Epidemiological sustainability

- Share of domestic spending in the regional response has increased from 75% in 2017 to 81% in 2018 with over 18% increase in total amount.
- Mobilize member state leadership to influence the UHC agenda with lessons learnt from the HIV response to leave noone behind.
- Thailand and Viet Nam included PrEP in national health insurance schemes.
- Sustainability road map developed in Cambodia. In process in Philippines and Sri Lanka.
- Greater focus on mobilizing local level (Cities) resources for HIV response through development of city level / subnational Investment cases.

### **Future Priorities for the Joint Programme**

#### **Prevention, Testing and Treatment**

- Scale-up of effective and innovative interventions for Key Populations including PrEP and Self Testing.
- Roll-out new efficient models of service delivery using the virtual spaces and social networks-based technologies to meet the evolving specificities and needs of key populations.
- Strengthen linkage to care and retention on treatment through decentralization of services and differentiated care models.

#### Focus on sustainability: UHC and integration

- Support integration of HIV, STI, TB and hepatitis services for sustainability within wider systems for health.
- Continue Influencing the UHC agenda in the region towards strengthening the systems for health [Community] and ensuring the right to health for all.

#### **Renewing political commitment**

- Sustain the momentum on political commitment for development and implementation a regional roadmap to galvanize action and accelerate efforts in the response in the region;
- Leverage regional political leadership to engage meaningful multisectoral partnerships to leave no one behind, with focus on young people,
- Support Strategies to address systemic factors that perpetuate S&D, including policies, laws that affect the rights of KPs and PLHIV.

## Thank you



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