

HIV Situation in South-East Asia

HIV unit
Department of Communicable Diseases

Outline

- Magnitude of HIV burden in South-East Asia
- Progress towards MDGs
- Regional success stories
- Issues and concerns
- Summary
- Future priorities

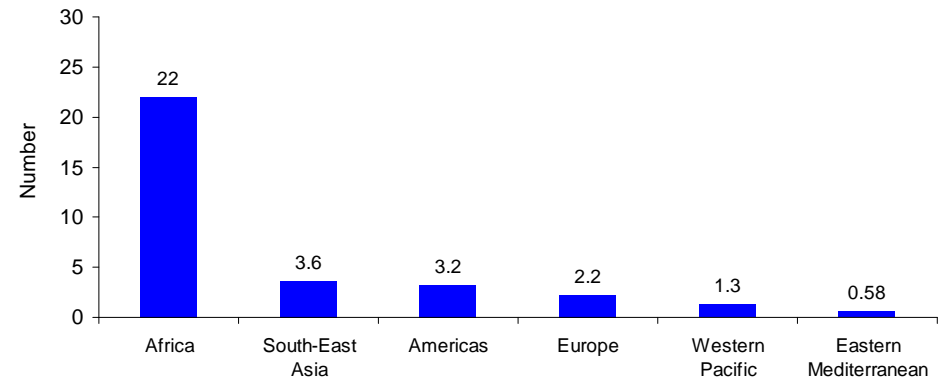
HIV burden in South-East Asia

South-East Asia has a huge burden of HIV

- An estimated 3.6 million people living with HIV (PLHA); 37% are women
- An estimated 260 000 new infections each year
- An estimated 300,000 AIDS deaths each year
- Approximately 1.3 million in need of antiretroviral treatment

**South-East Asia Region
has the second-highest
burden of HIV/AIDS in the world**

Estimated number of people living with HIV/AIDS, by WHO Region, 2007

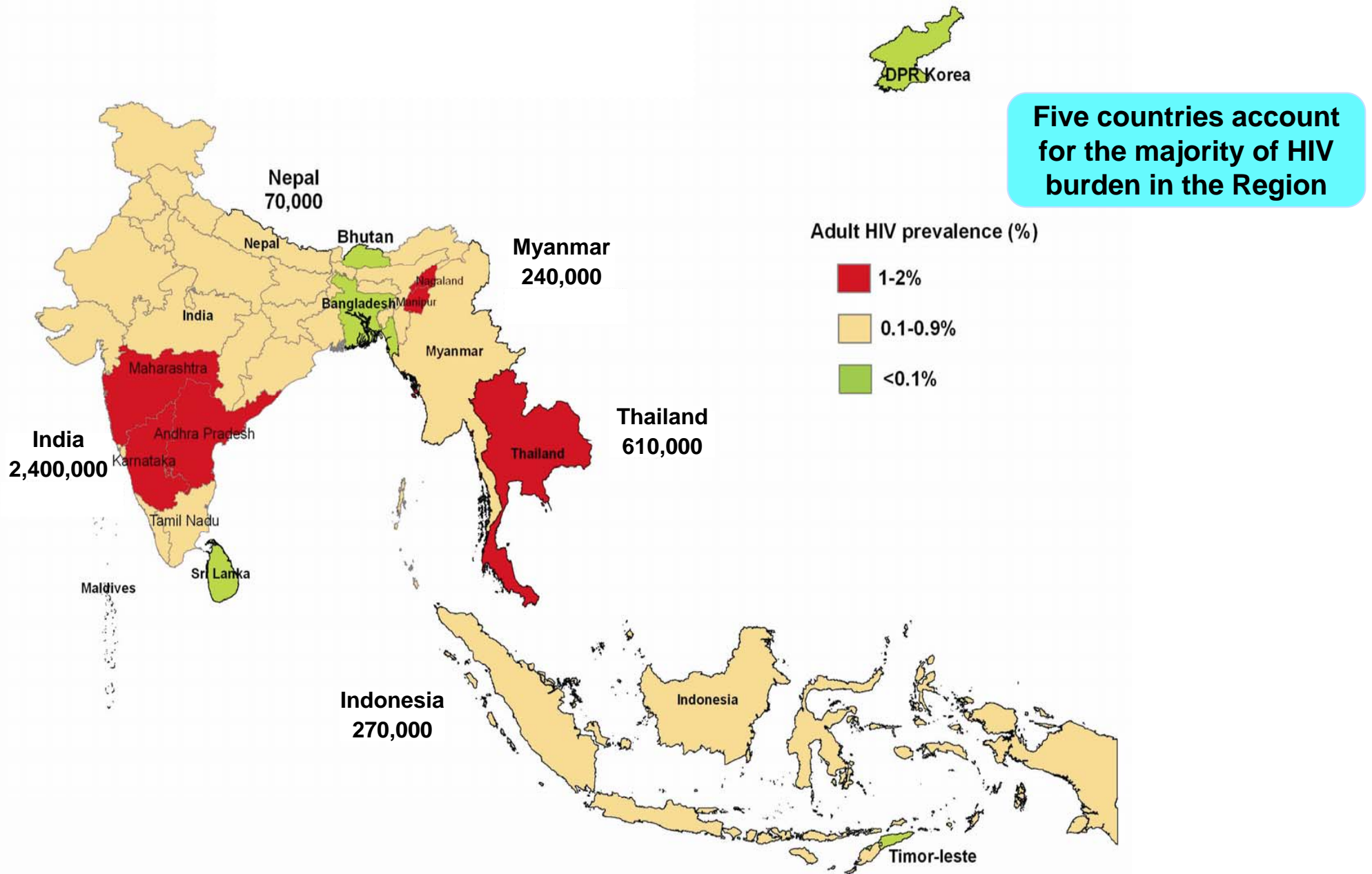


HIV prevalence in South-East Asia Region, 2007

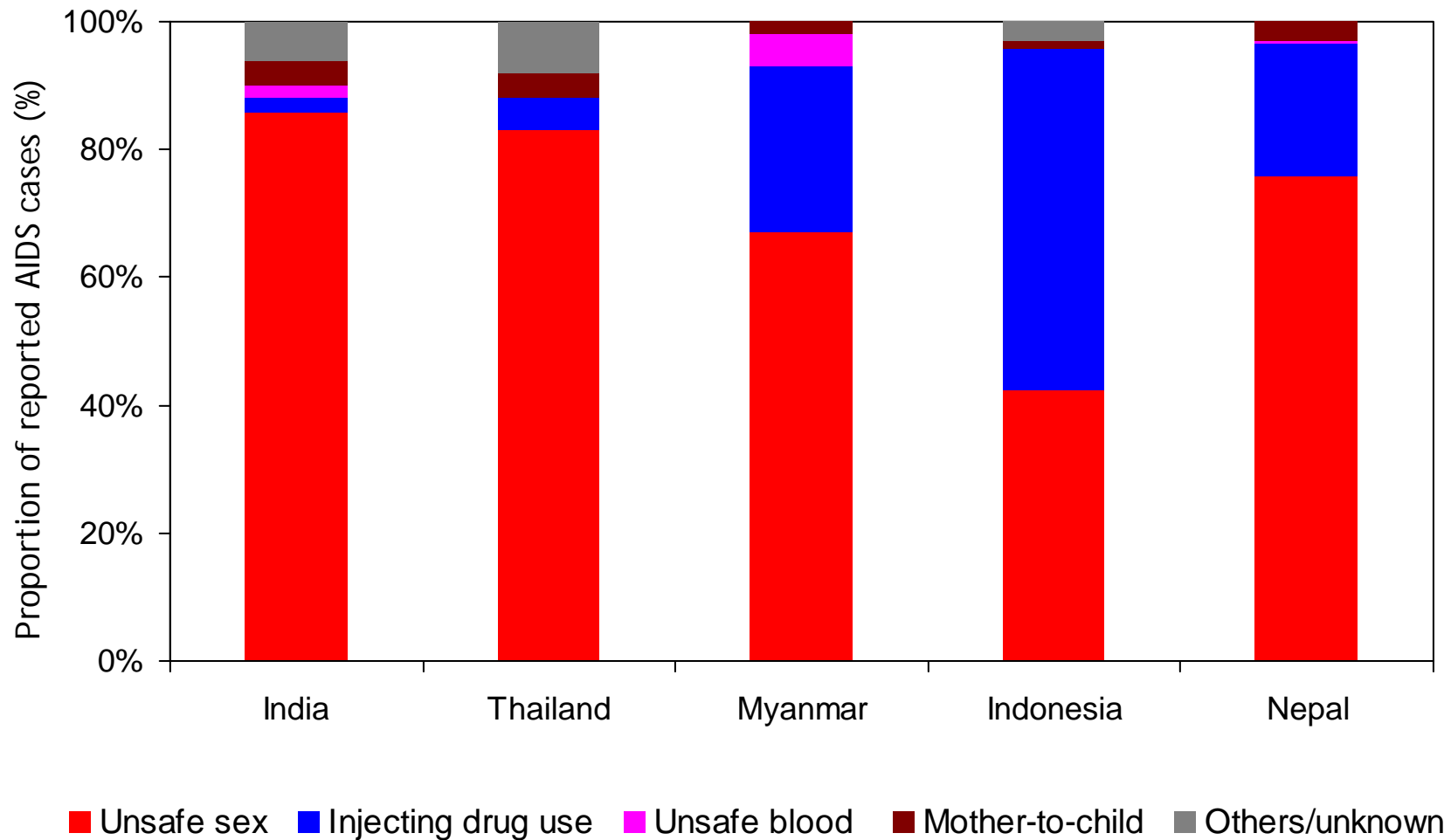
| Country | Estimated number of people living with HIV (PLHA) | % of adult population infected with HIV |
|----------------|--|--|
| Bangladesh | 12,000 | <0.1 |
| Bhutan | <500 | <0.1 |
| DPR Korea | NA | NA |
| India | 2,400,000 | 0.3 |
| Indonesia | 270,000 | 0.2 |
| Maldives | <100 | <0.1 |
| Myanmar | 240,000 | 0.7 |
| Nepal | 70,000 | 0.5 |
| Sri Lanka | 3,800 | <0.1 |
| Thailand | 610,000 | 1.4 |
| Timor-Leste | <100 | <0.1 |

There is a wide variation in the number of people living with HIV from less than 100 in Maldives to 2.4 million in India

HIV prevalence in adult population, South-East Asia Region, 2007



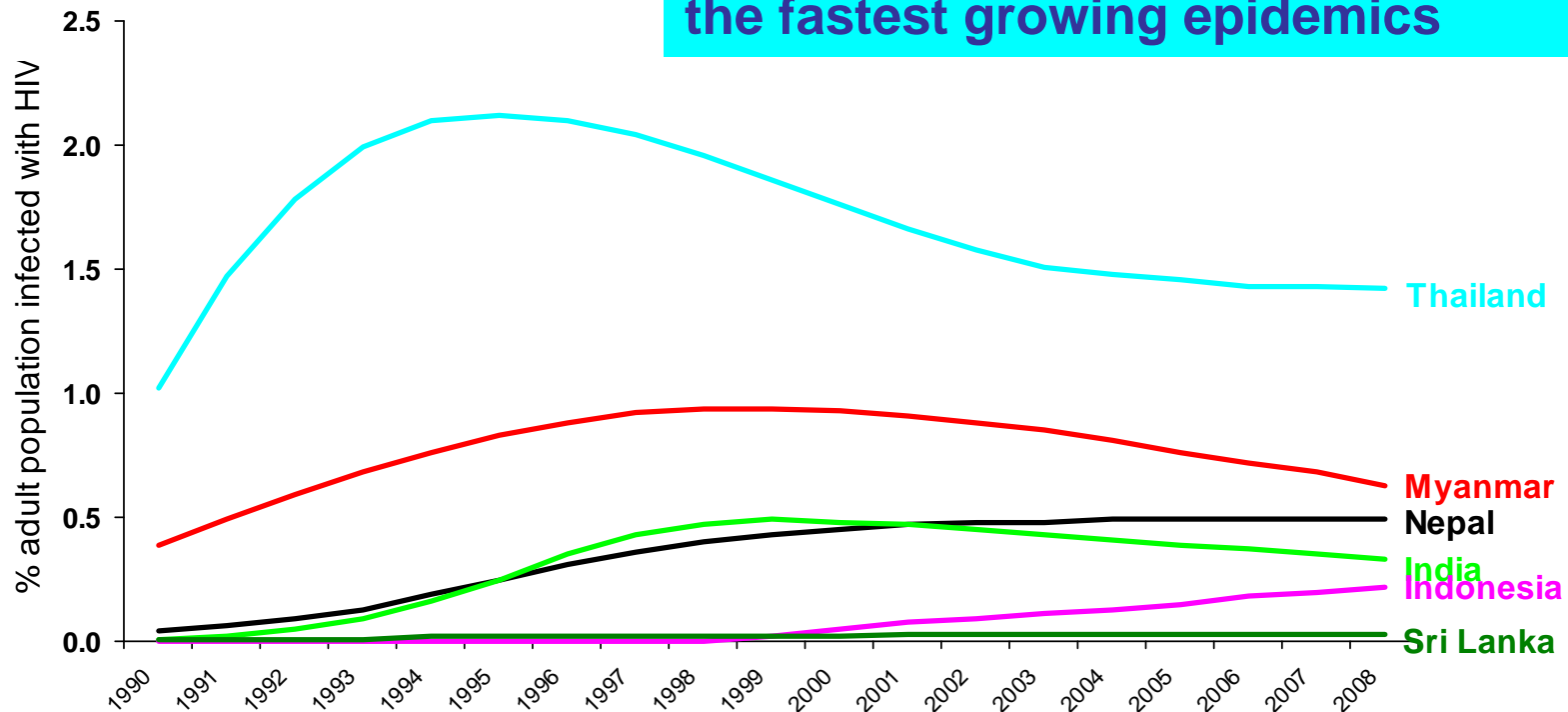
Distribution of reported AIDS cases by mode of transmission, South-East Asia Region, 2007



Unsafe sex and injecting drug use are the main risk behaviors driving the HIV epidemic in South-East Asia

HIV prevalence in adult population, South-East Asia, 1990-2008

HIV epidemics have declined/stabilized in Thailand, India, Myanmar, Nepal and Sri Lanka; however, Indonesia has one of the fastest growing epidemics



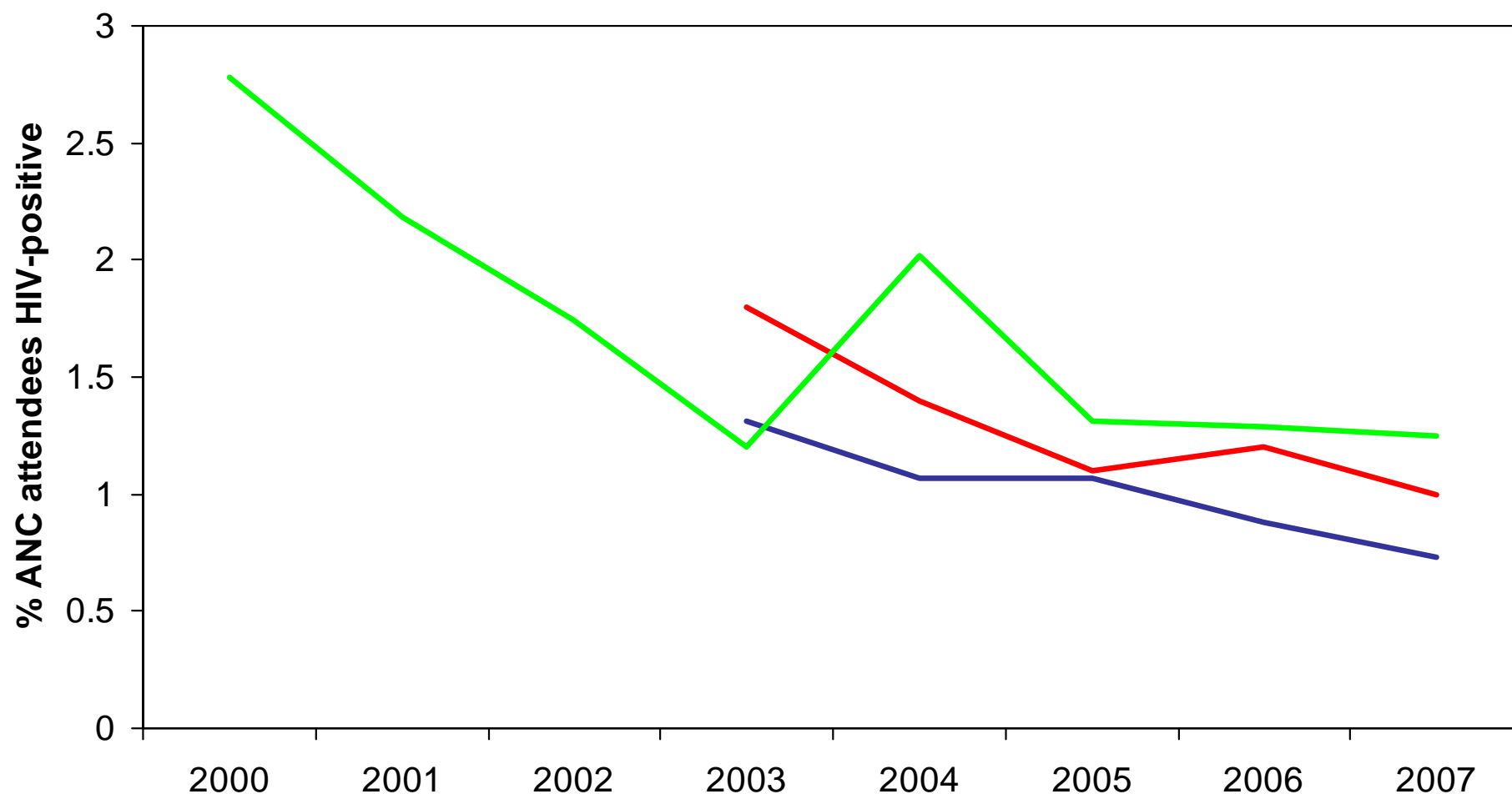
Source: HIV prevalence curves generated by Spectrum using surveillance data reported by Ministries of Health, SEAR countries

Millennium Development Goals (MDG) Targets

- 6A. Have halted by 2015 and begun to reverse the spread of HIV/AIDS
 - Indicators:
 - HIV prevalence among population aged 15-24 years
 - Condom use at last high-risk sex
 - Proportion of population aged 15-24 years with comprehensive correct knowledge of HIV/AIDS
 - Ratio of school attendance of orphans to school attendance of non-orphans aged 10-14 years (not applicable to SEAR countries)
- 6 B. Achieve, by 2010, universal access to treatment for HIV/AIDS for all those who need it
 - Indicator
 - Proportion of population with advanced HIV infection with access to antiretroviral treatment

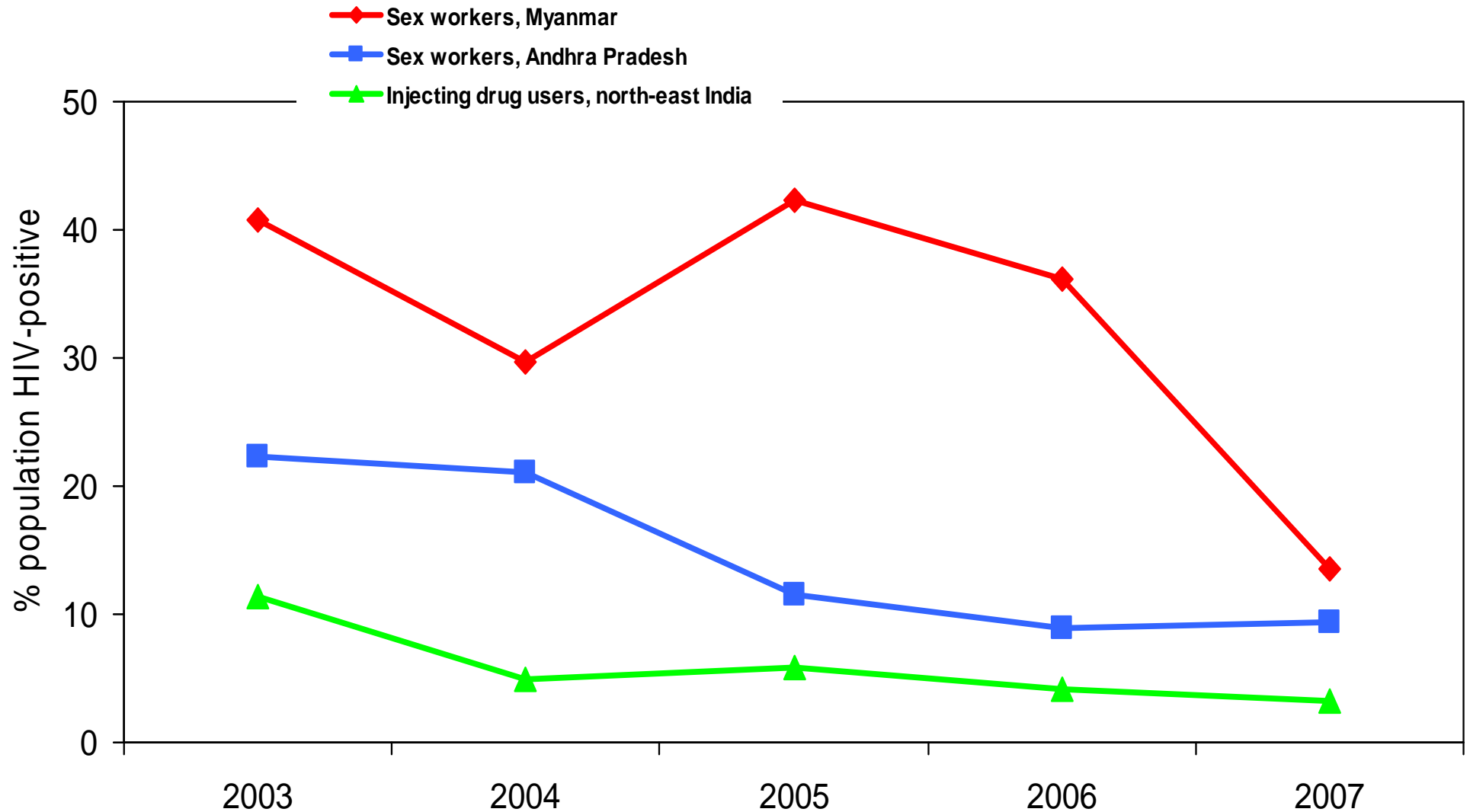
HIV prevalence among young antenatal care (ANC) attendees (aged 15-24 years) in selected south-east Asian countries, 2000-2007

— ANC attendees, south India — ANC attendees, north-east India — ANC attendees, Myanmar



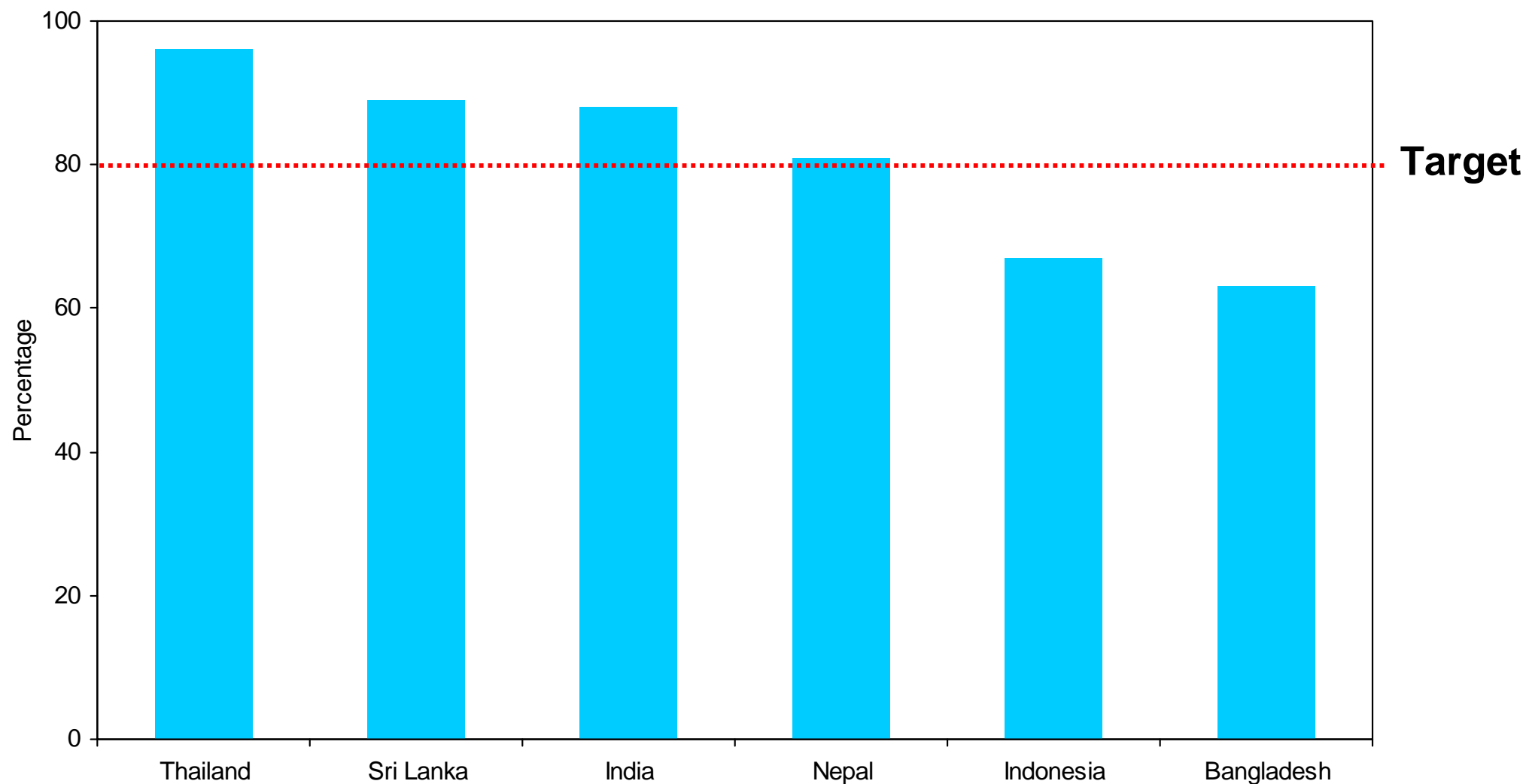
Source: Sentinel surveillance data reported by MOH

HIV prevalence among vulnerable populations (aged 15-24 years) in selected south-east Asian countries, 2003-2007



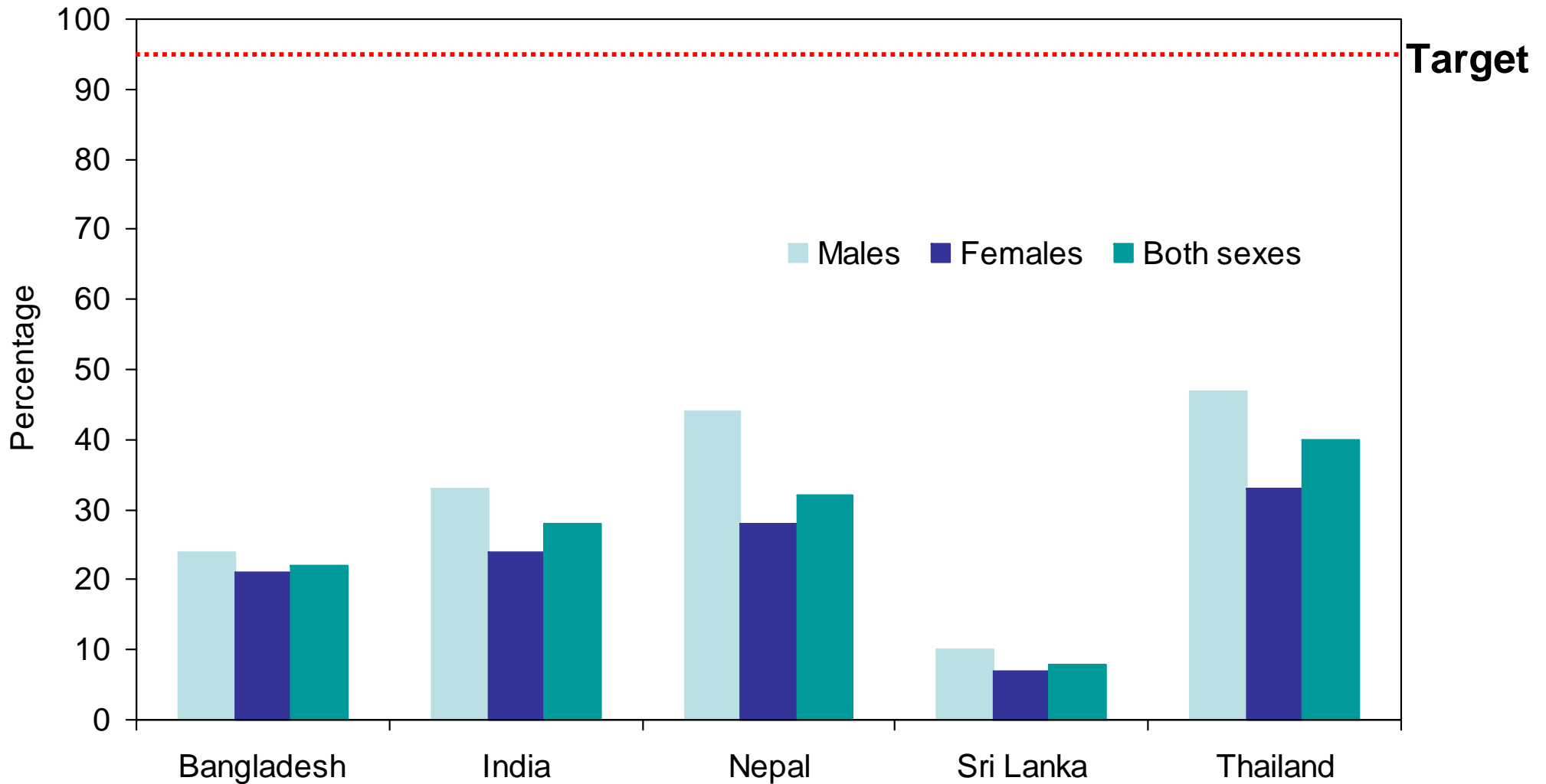
Source: Sentinel surveillance data reported by MOH

Percentage of sex workers reporting condom use with their most recent client in south-east Asia, 2007

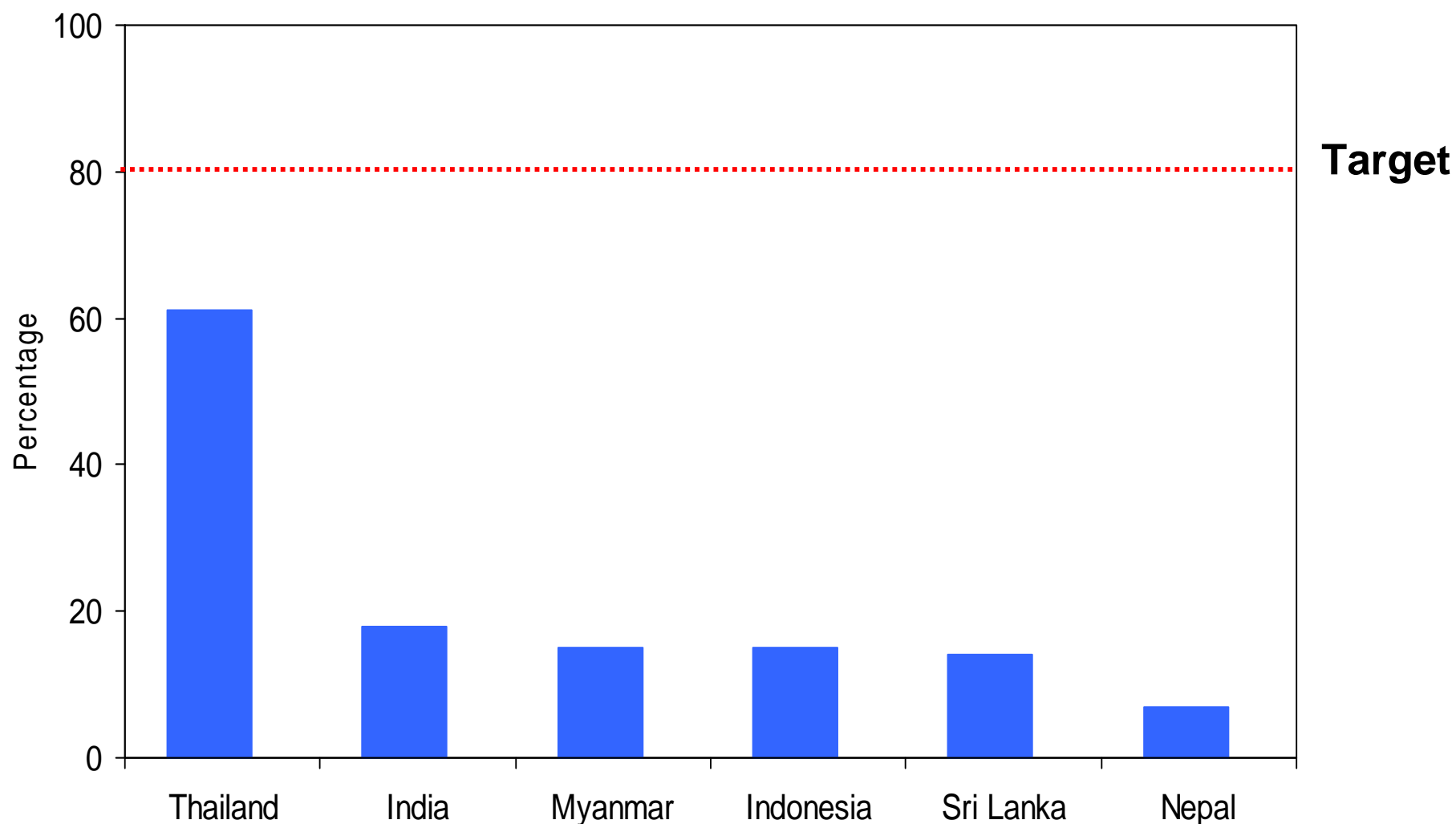


Source: Report on Global AIDS Epidemic, UNAIDS, 2008

Percentage of young women and men aged 15-24 with comprehensive correct knowledge of HIV/AIDS, South-East Asia, 2007



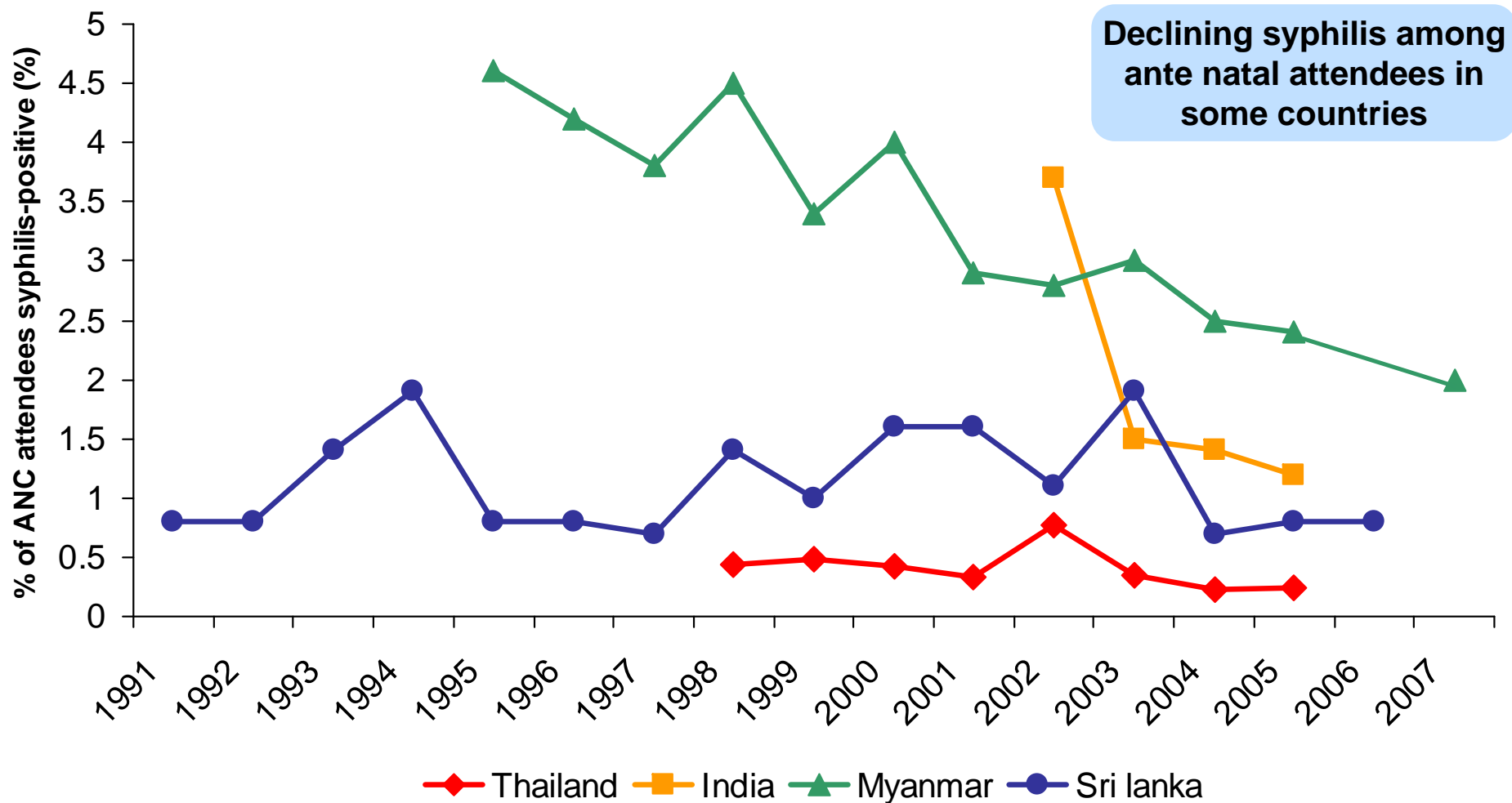
Percentage of people with advanced HIV infection receiving antiretroviral treatment, South-East Asia, 2007



Source: Universal Access Progress Report, WHO, 2008

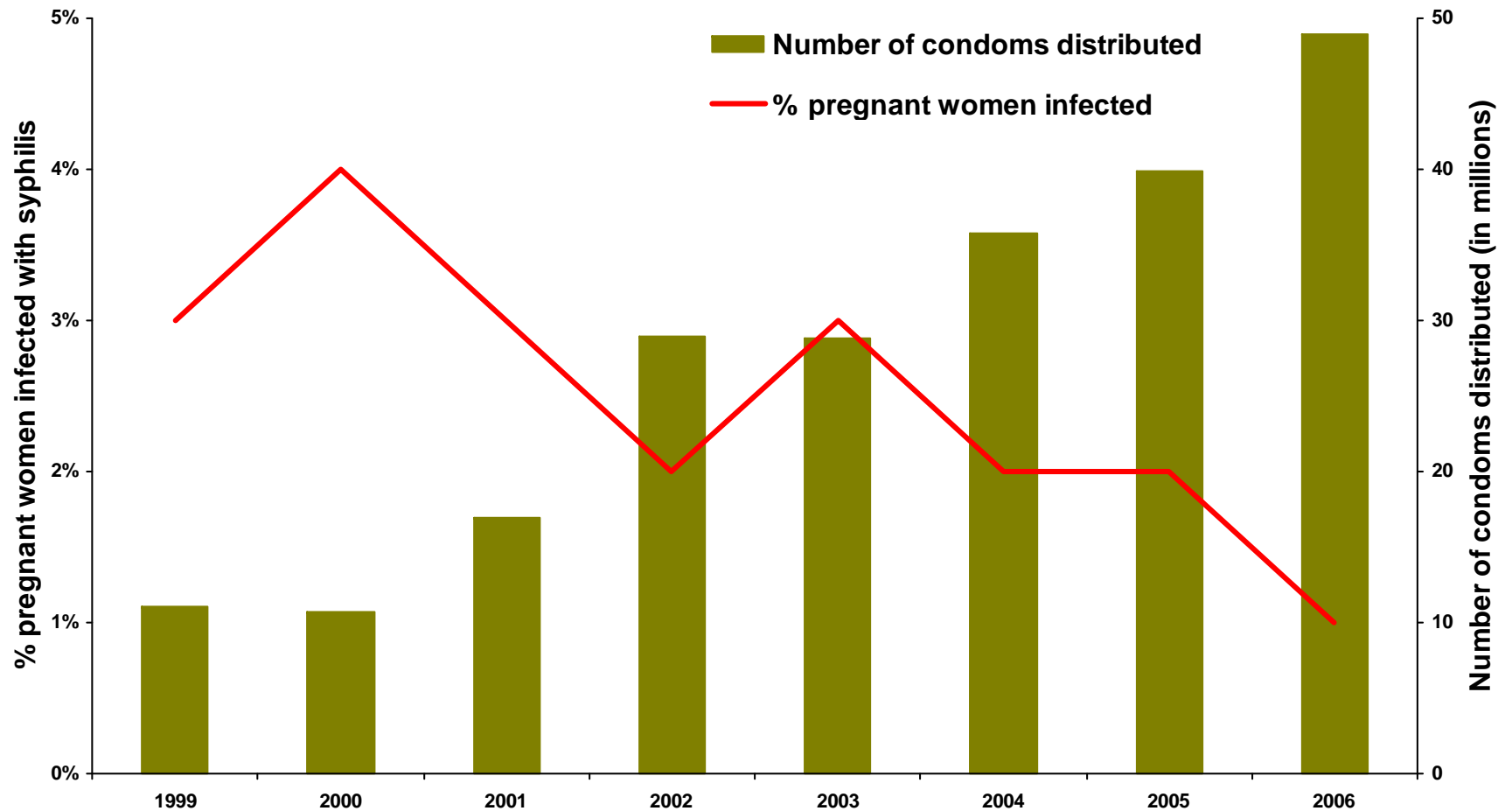
Regional success stories

Syphilis prevalence among antenatal clinic (ANC) attendees, South-East Asia, 1991-2007



Source: Surveillance data reported by MOH

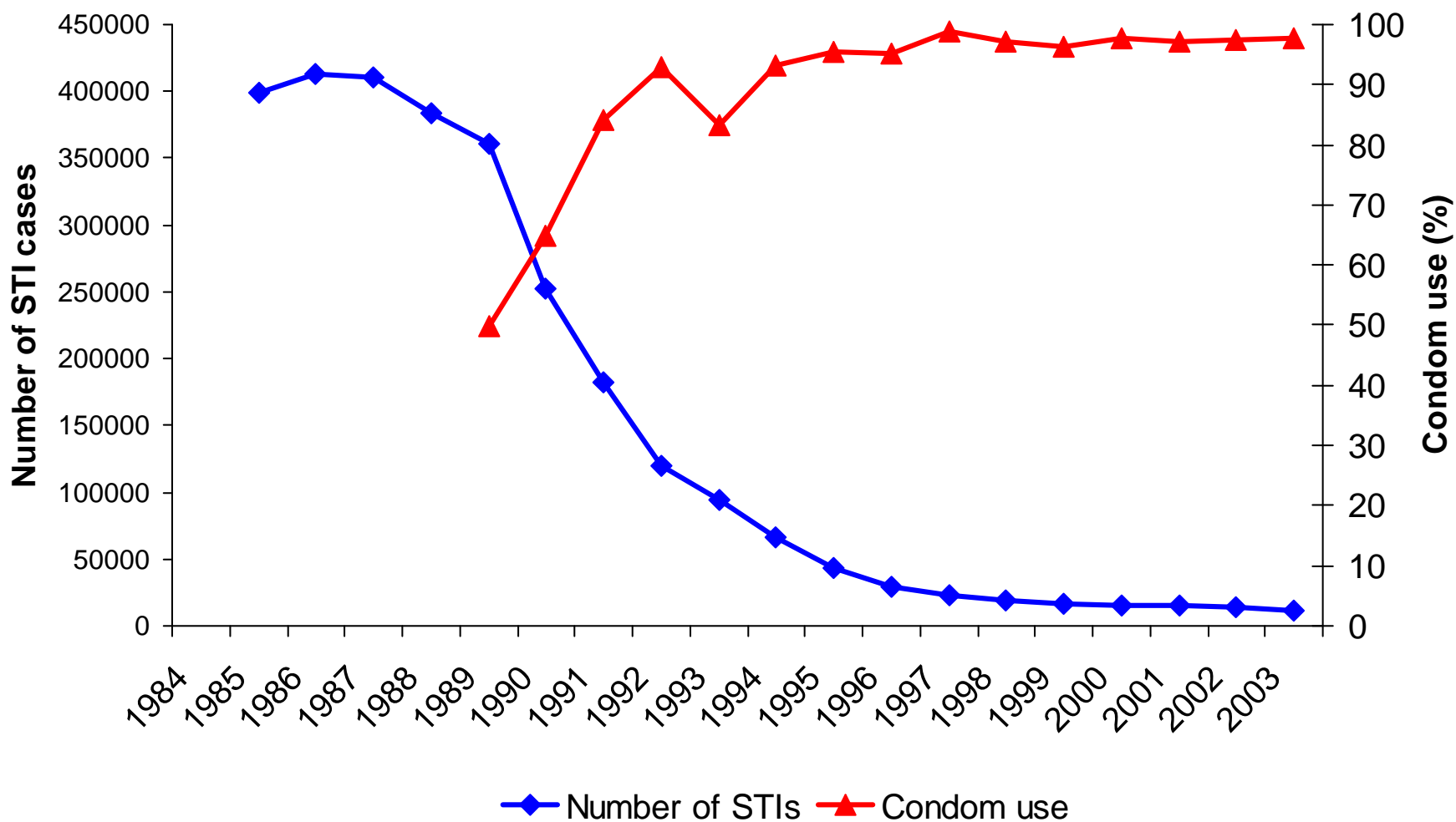
Scale-up of 100% targeted condom promotion program and decreasing syphilis prevalence among pregnant women in Myanmar



Source: NAP Progress Report, Ministry of Health, Myanmar

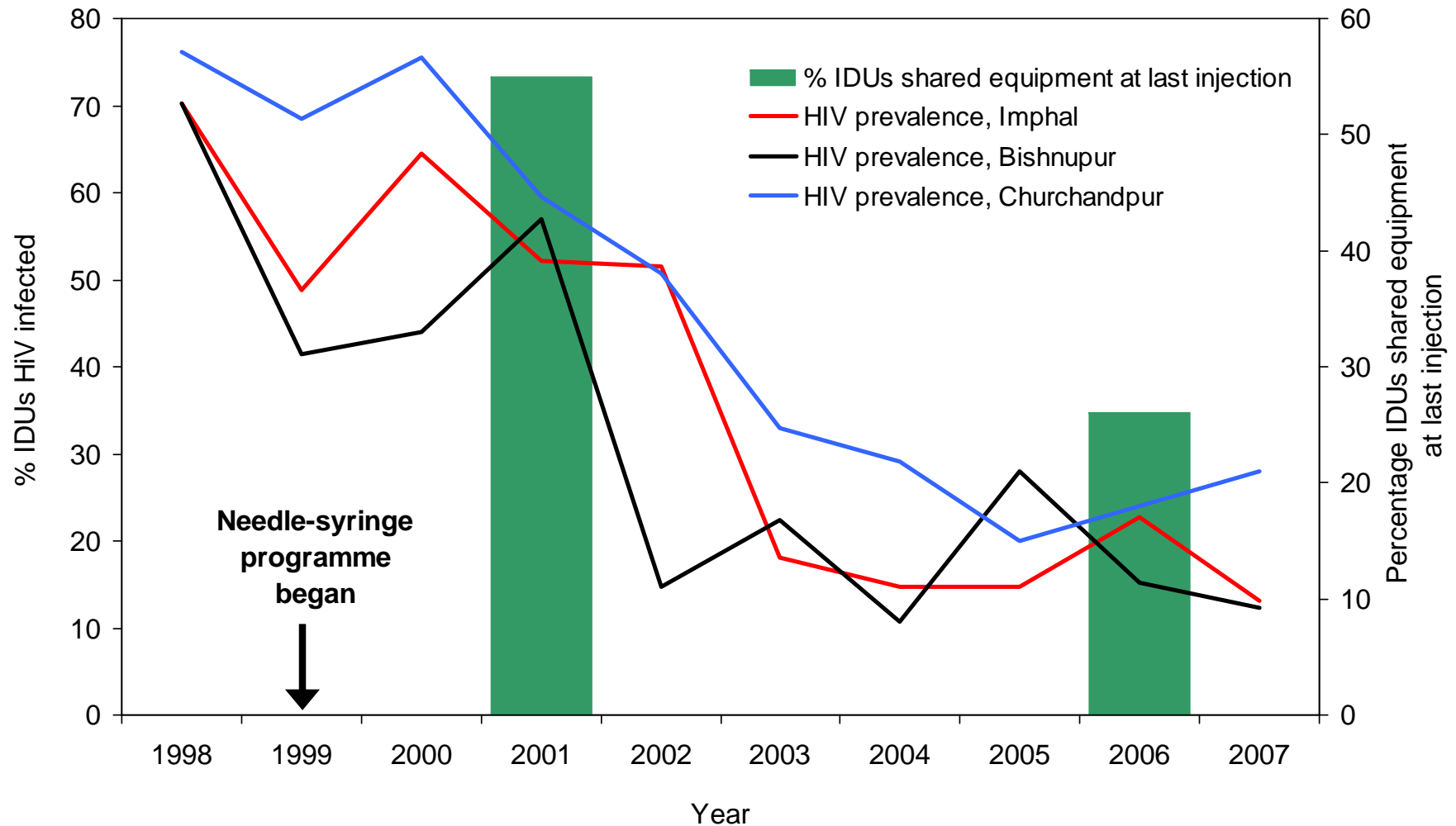
Impact of implementation of 100% condom use programme on the incidence of sexually transmitted infections (STIs) Thailand, 1984-2003

Consistent decrease in sexually transmitted infections and AIDS cases with increasing rate of condom use



Source: Bureau of Epidemiology, MOPH, Thailand

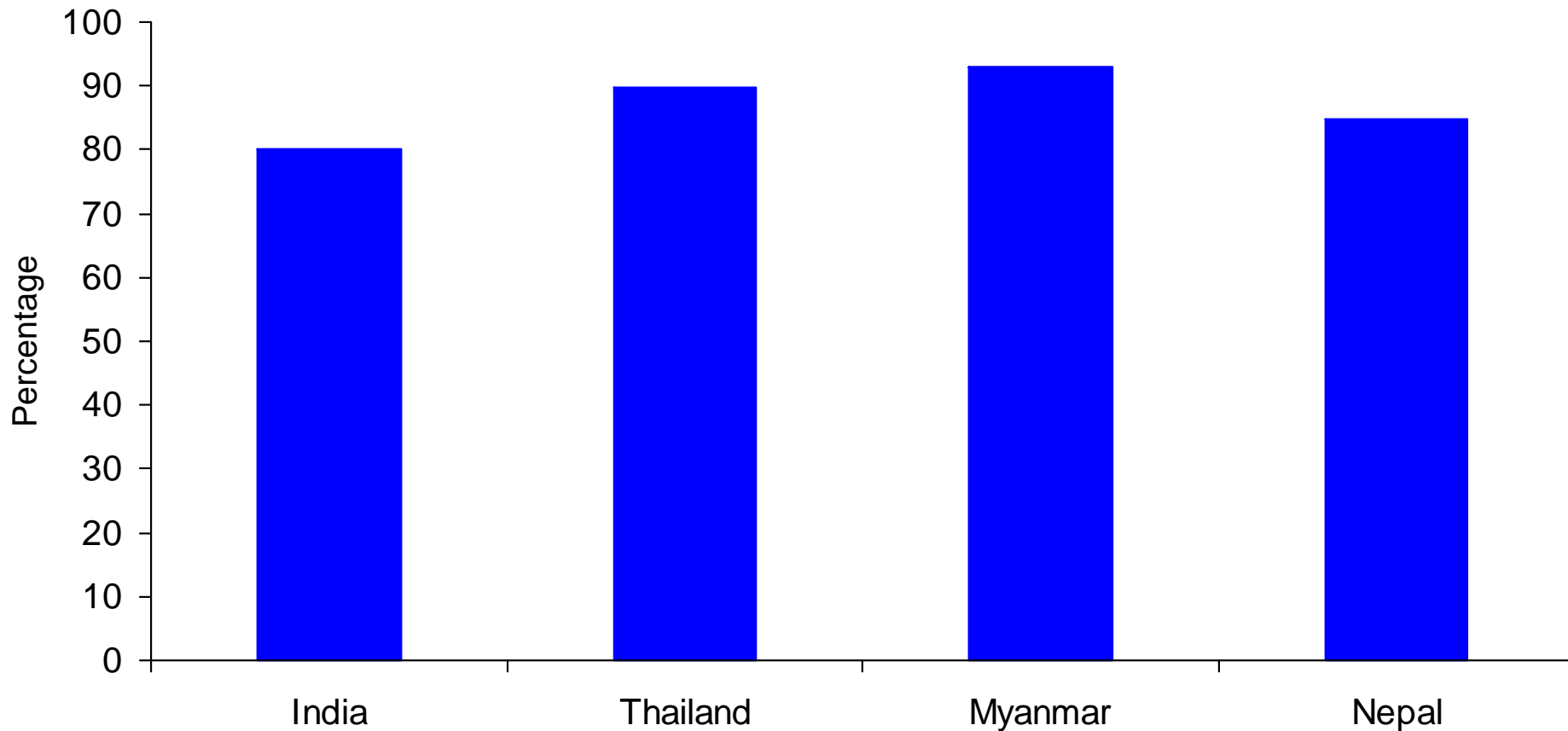
Scale-up of harm reduction and a decreasing HIV prevalence among injecting IDUs in Manipur, India



Source: National AIDS Control Organization, Ministry of Health, India

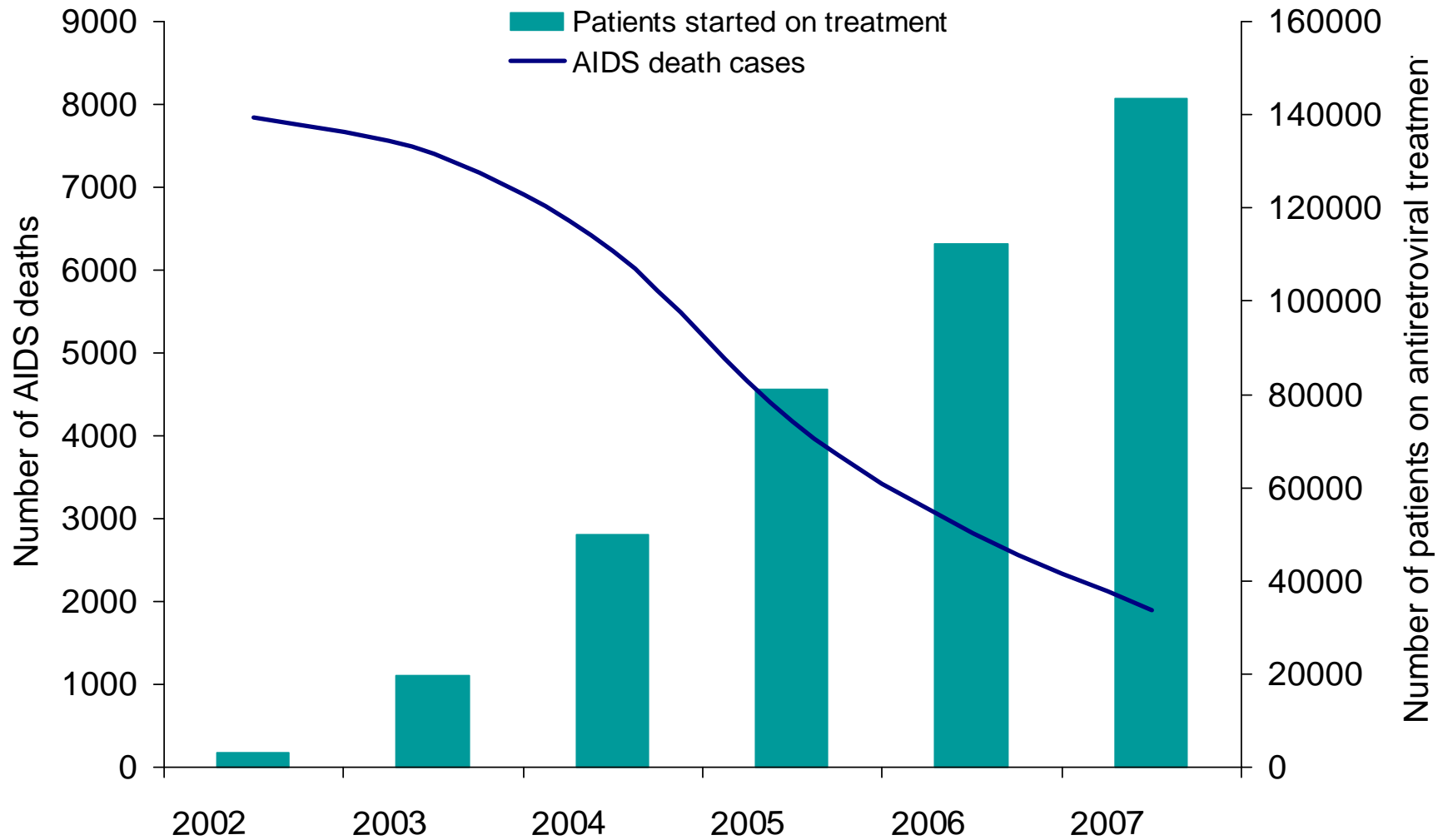


Proportion of adults and children with HIV surviving 12 months after initiation of ART, South-East Asia, 2007



Source: Universal Access Progress Report, WHO, 2008

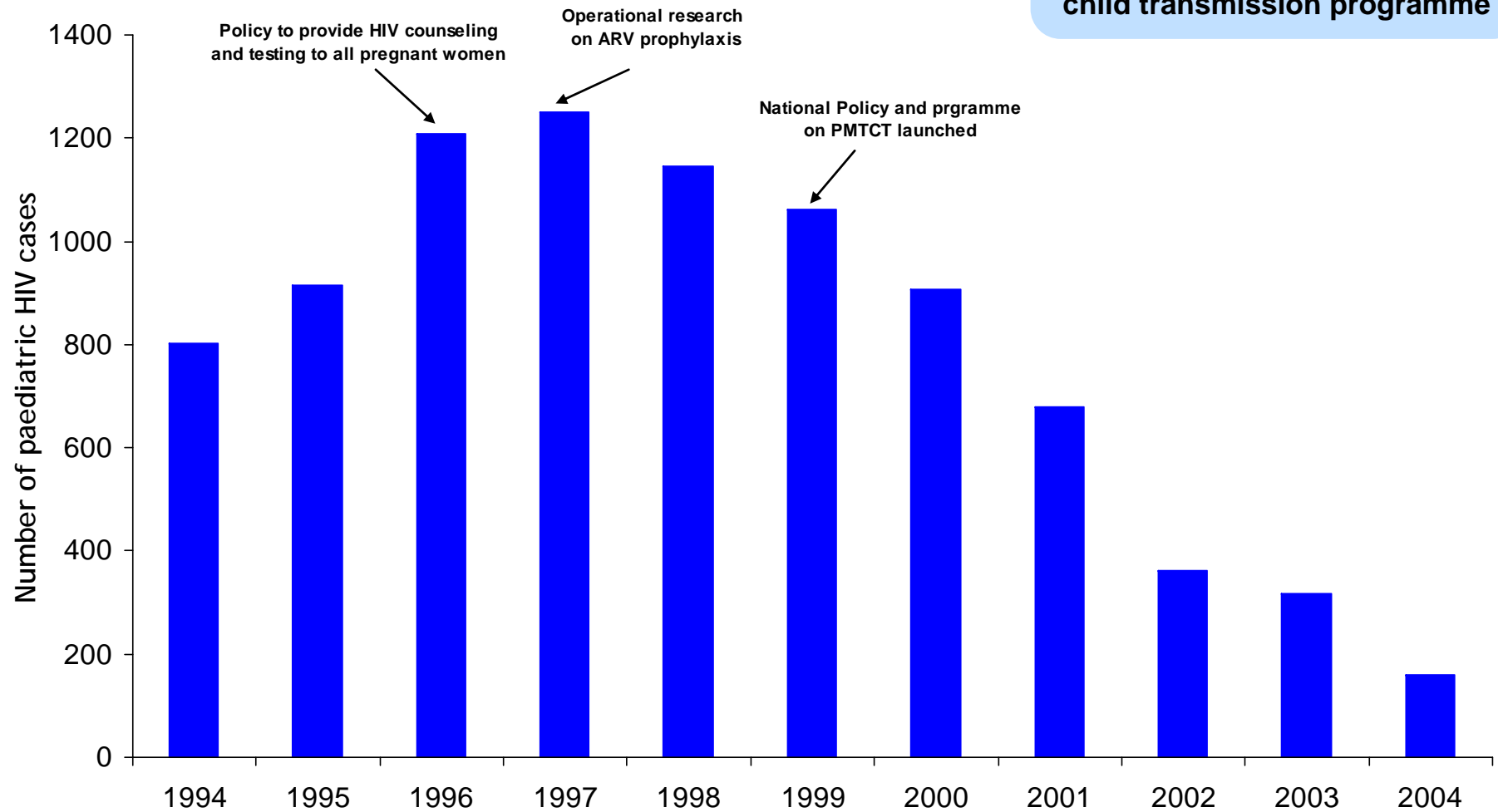
Rapid expansion of antiretroviral treatment services and declining AIDS mortality in Thailand



Source: Bureau of Epidemiology, MOPH, Thailand

Reported AIDS cases among children (aged 0-4 years), Thailand, 1994-2004

Decrease in paediatric HIV infections after implementation of prevention of mother-to-child transmission programme



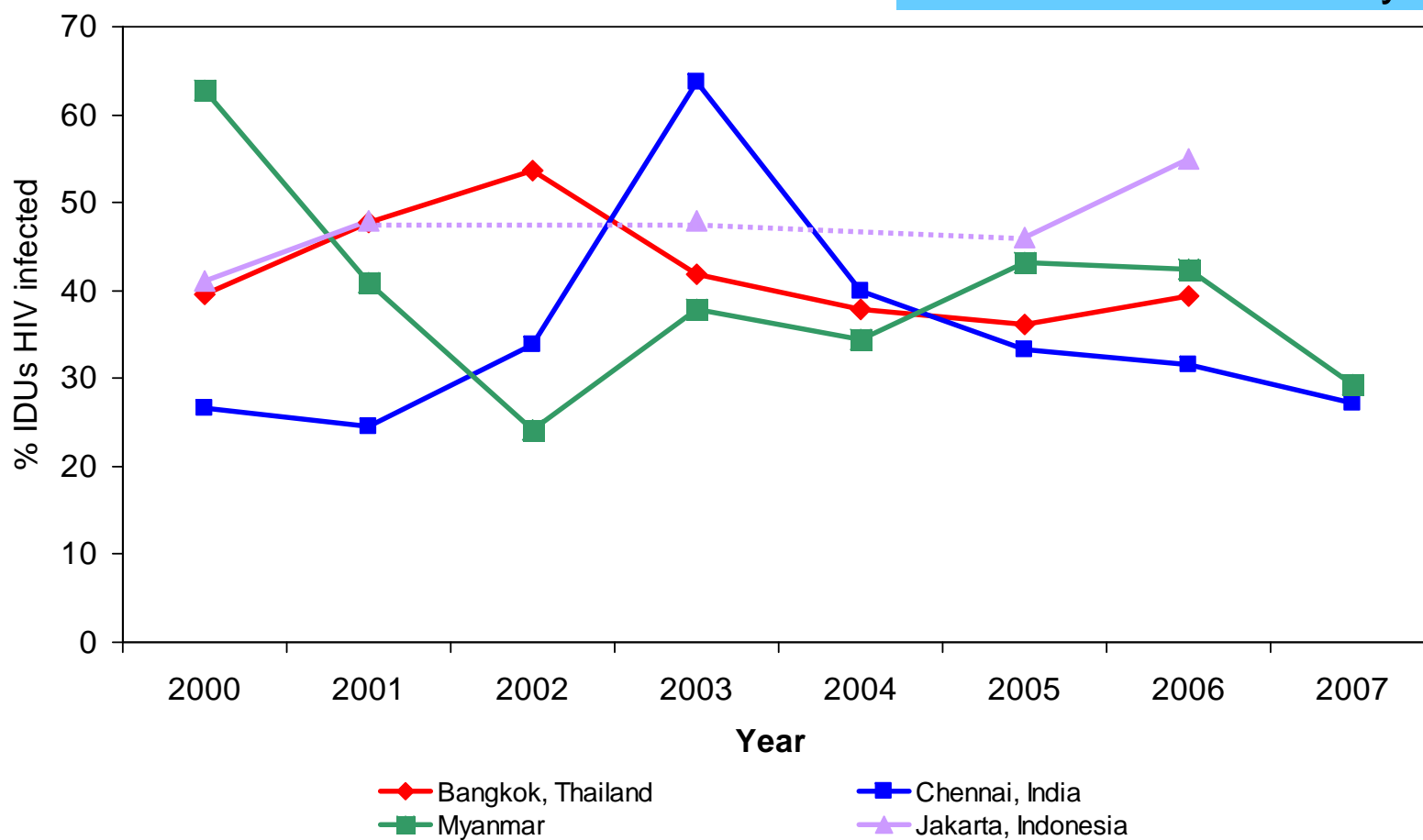
Source: Bureau of Epidemiology, MOPH, Thailand

Key concerns



HIV prevalence among injecting drug users, south-east Asia, 2007

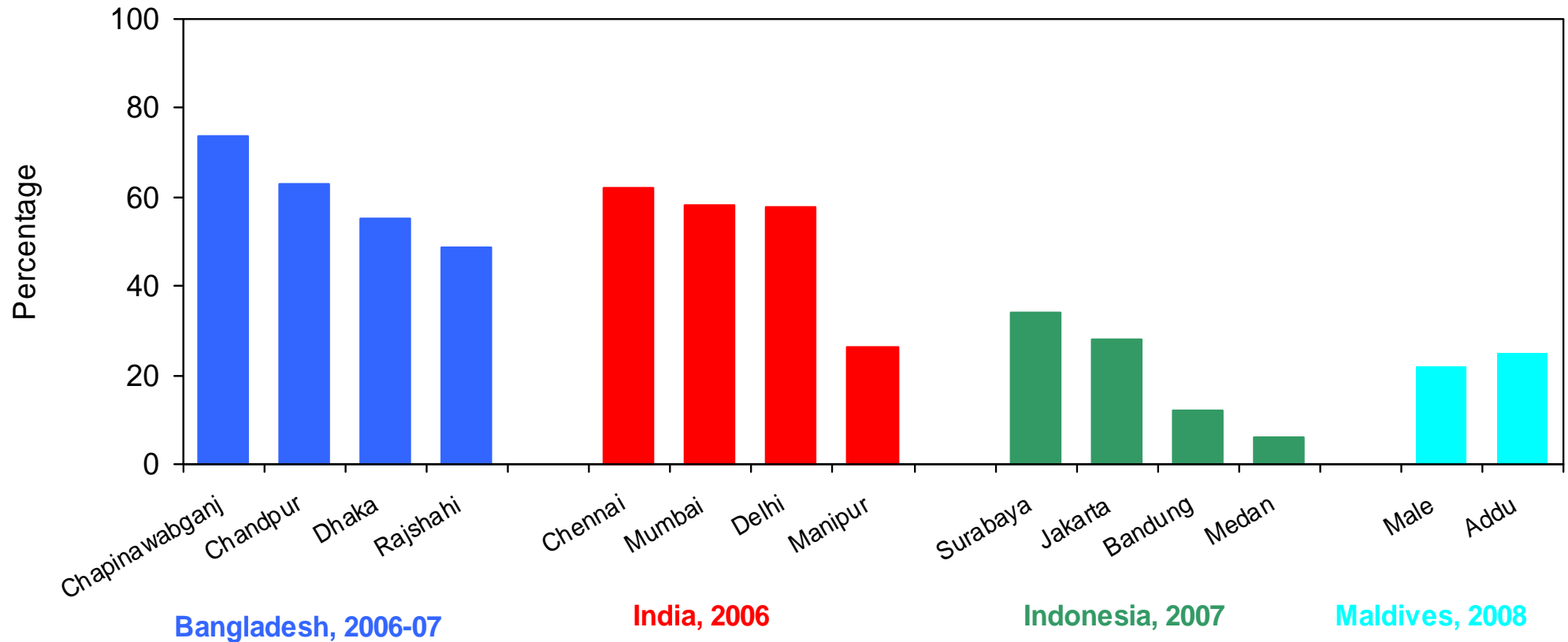
HIV epidemics among injecting drug users remain uncontrolled with nearly a third of them being infected in many sites



Source: Sentinel surveillance data reported by MOH



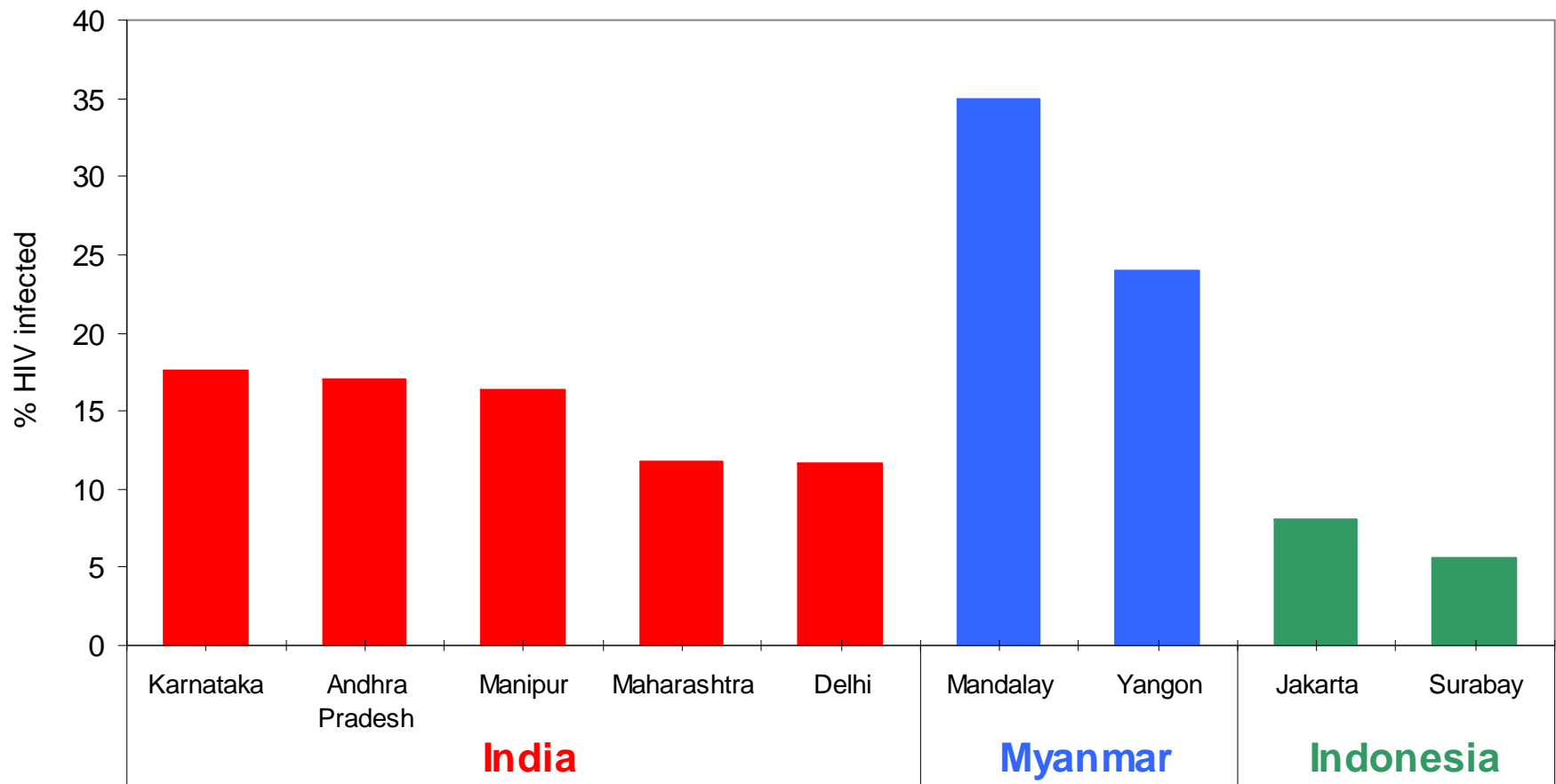
Percentage of injecting drug users sharing injecting equipment at last injection, South-East Asia, 2006-2008



Source: Behavior surveillance data reported by MOH



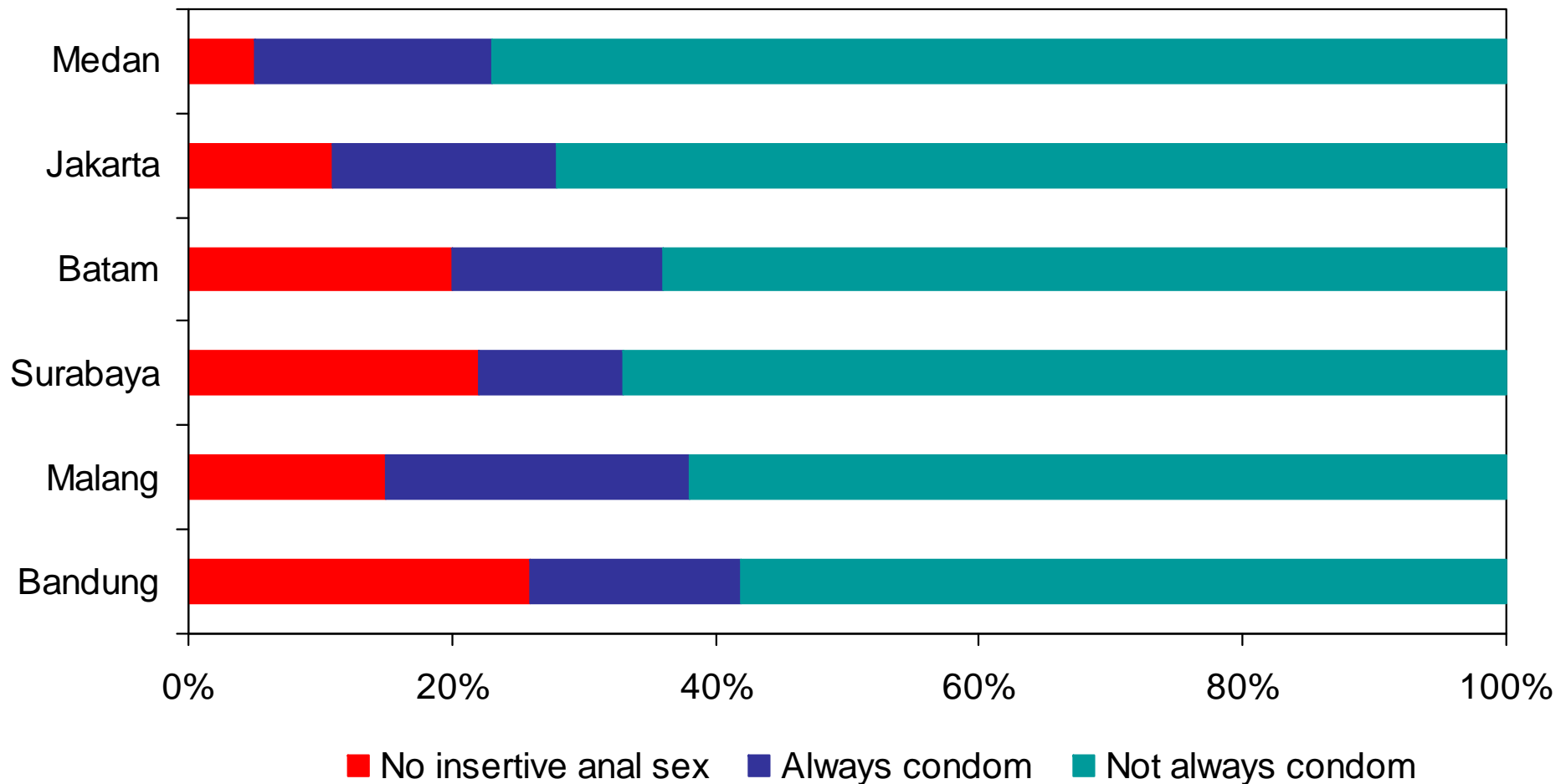
HIV prevalence among men who have sex with men in selected South-East Asian countries, 2007



Source: Sentinel surveillance data reported by MOH

Most men who have sex with men do not consistently use condoms

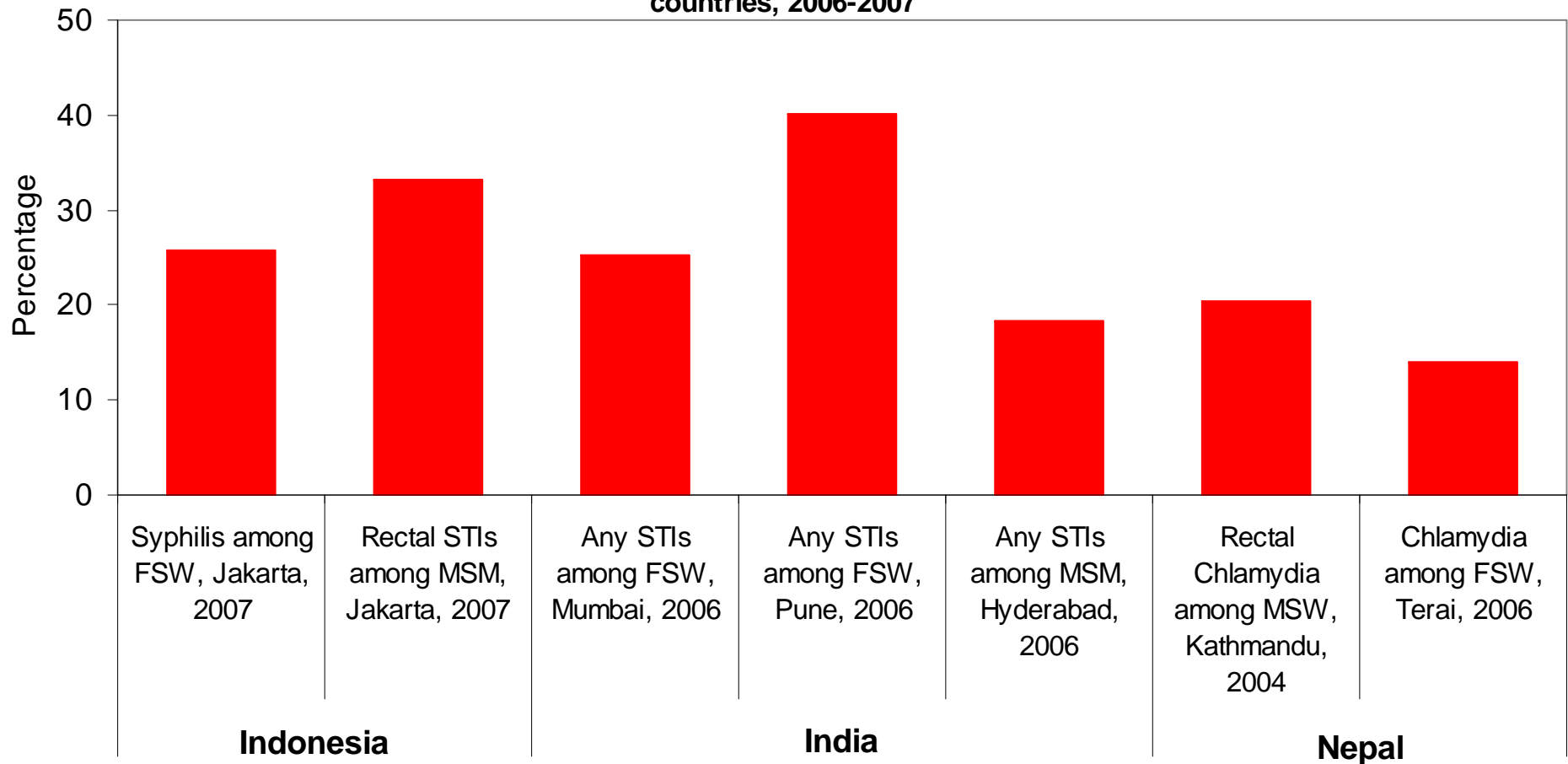
Unprotected sex in insertive anal sex in the past month, Indonesia, 2007



Source: Behavior surveillance data reported by MOH

Prevalence of sexually transmitted infections is very high among most-at-risk populations

Prevalence of sexually transmitted infections among most-at-risk populations in selected SEAR countries, 2006-2007



FSW = female sex workers

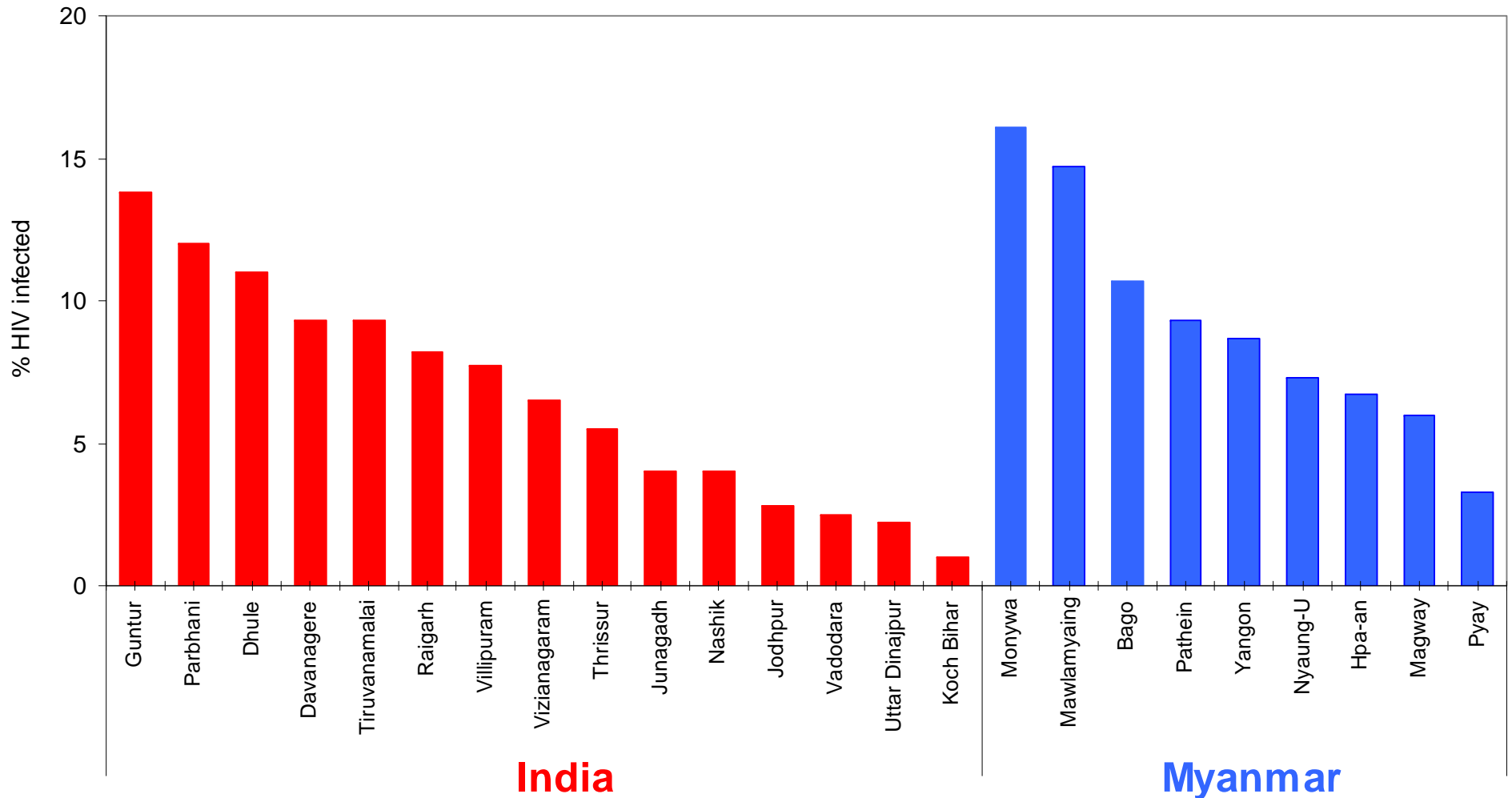
MSW = male sex workers

MSM = men who have sex with men

Source: National Family Health Survey III, 2006

A significant proportion of tuberculosis patients are co-infected with HIV

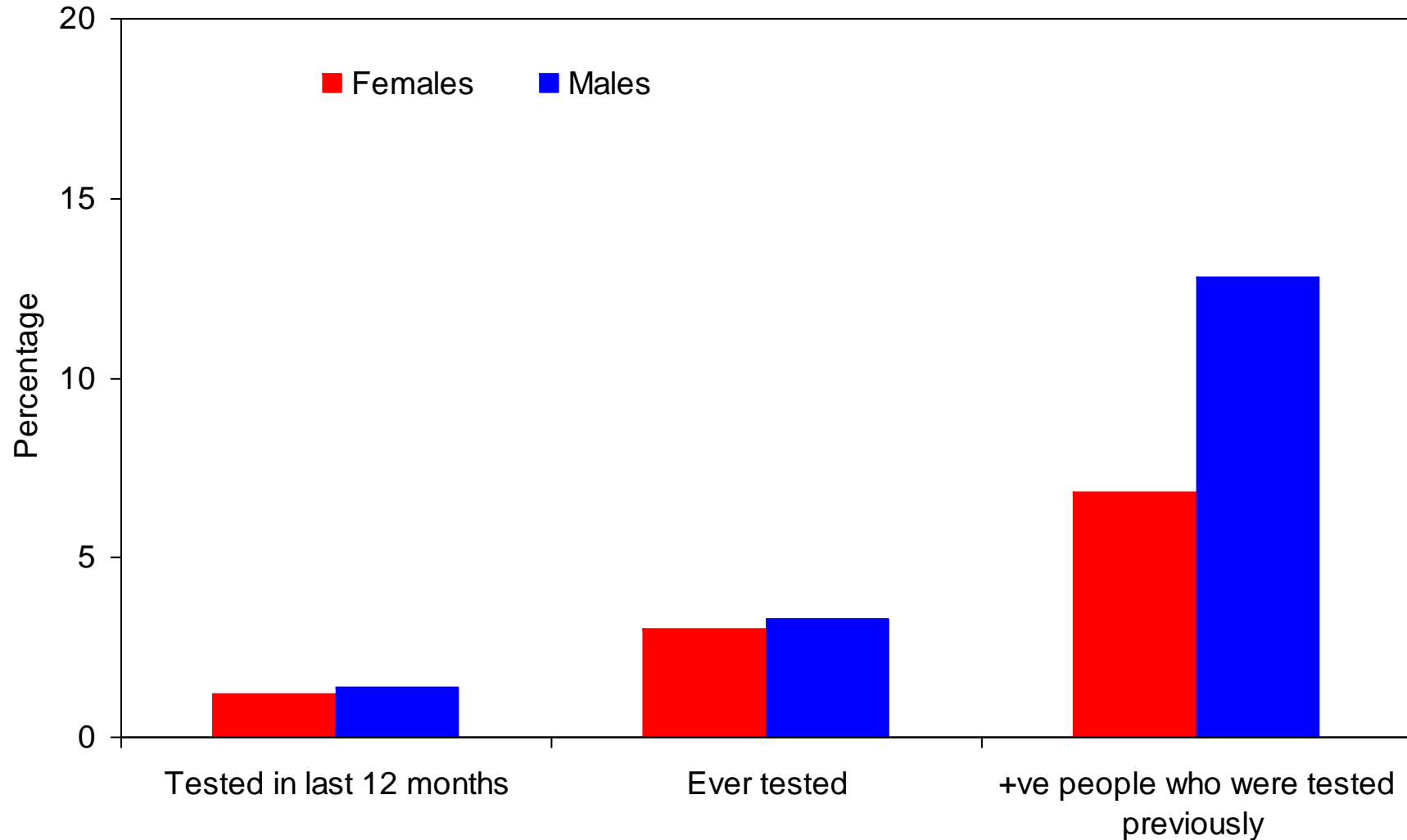
HIV prevalence among tuberculosis patients by township, India and Myanmar, 2007



Source: Sentinel surveillance data reported by MOHc

A large majority of people living with HIV do not know that they are infected

Percentage of adult population (15-49 years) tested and who know their HIV Status, by sex, India, 2006

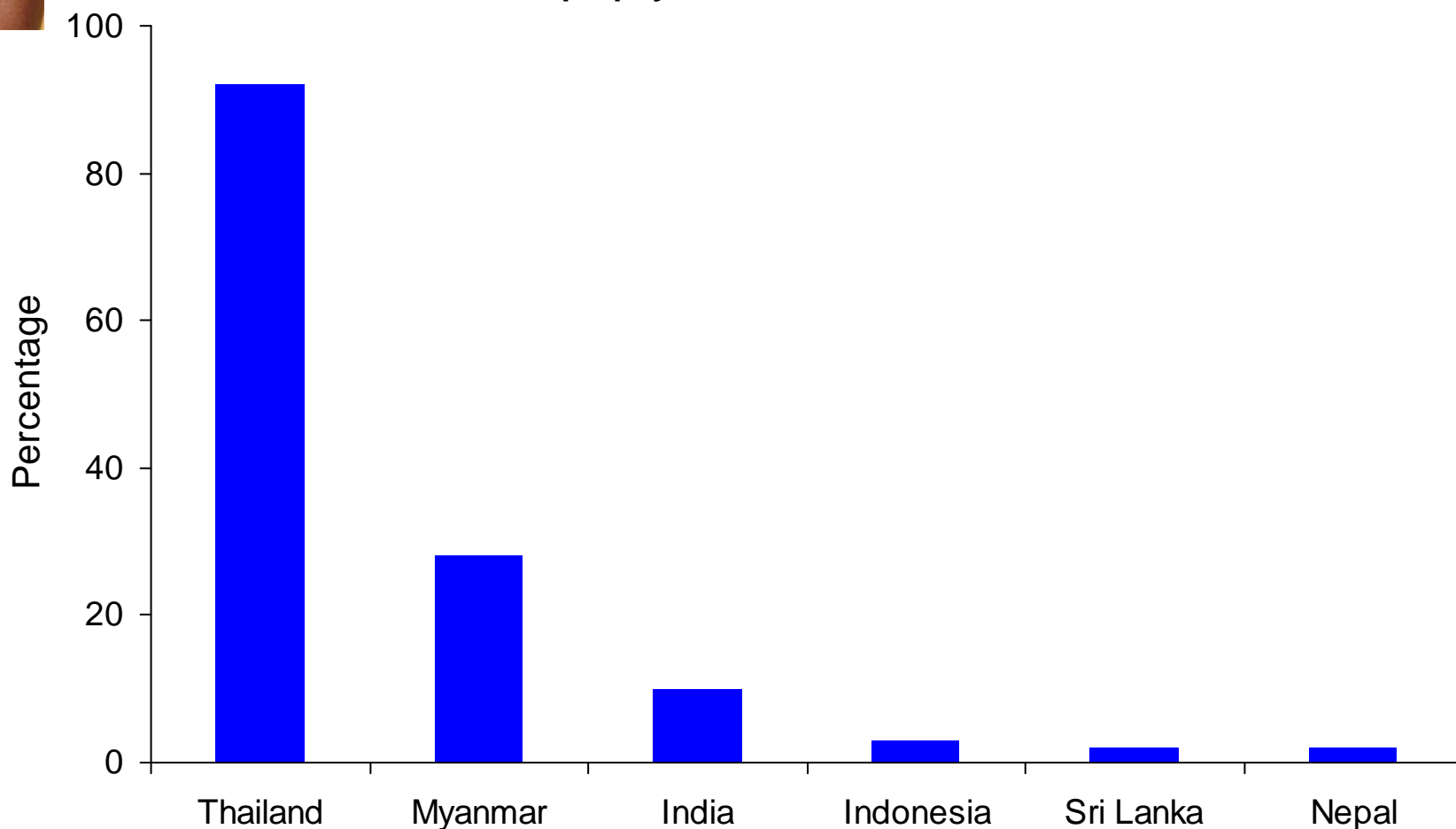


Source: National Family Health Survey III, 2006

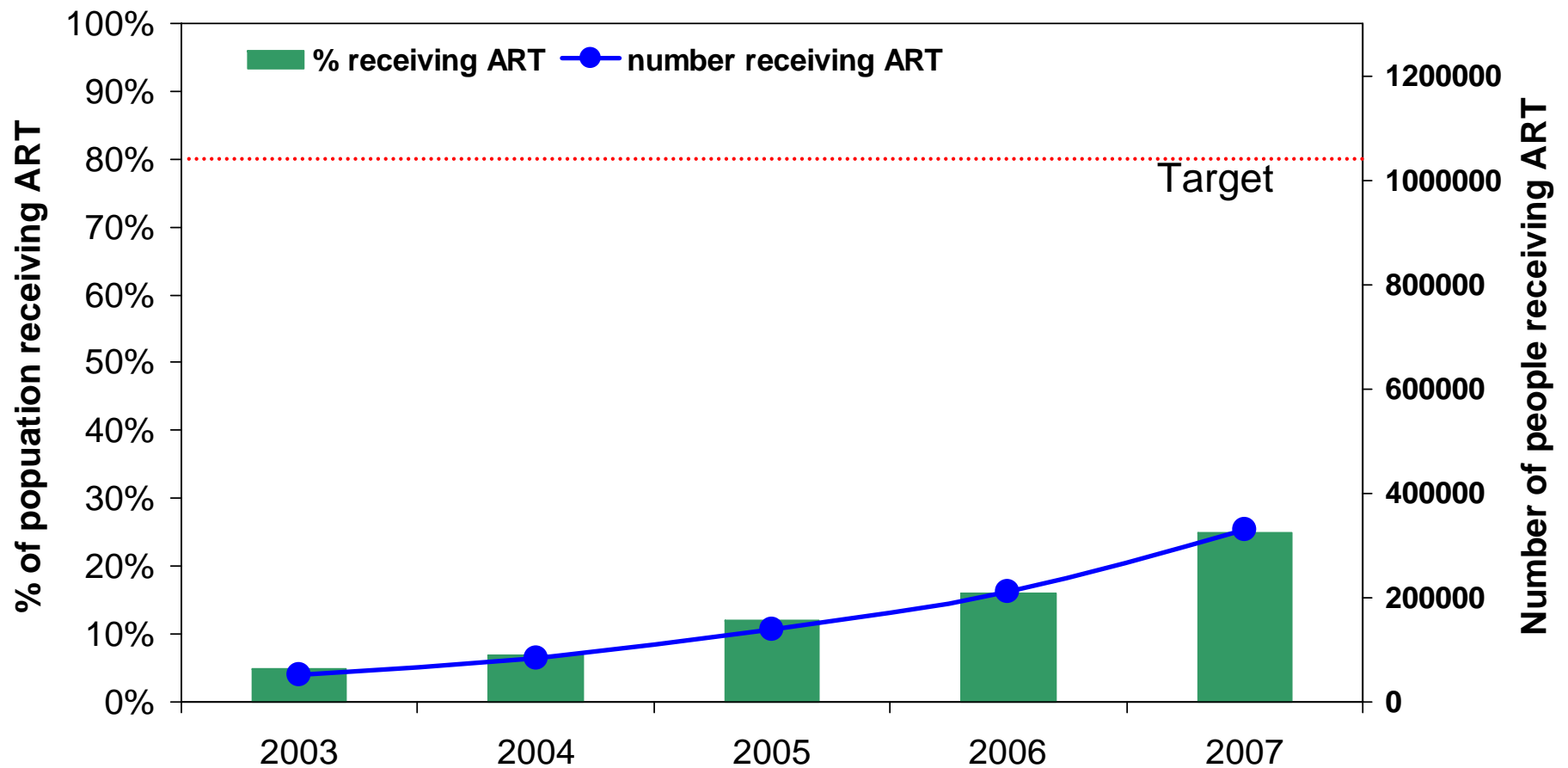


Most HIV-infected pregnant women do not have access to antiretroviral prophylaxis

Percentage of HIV-infected pregnant women receiving antiretroviral prophylaxis, South-East Asia, 2007



Despite a six-fold increase in the number of people receiving antiretroviral treatment (ART), three out of four who need treatment do not have access to it



Source: Universal Access Progress Report, WHO, 2008

A lack of enabling environment makes it hard to reach the vulnerable populations



Unfavorable laws and prevailing stigma and discrimination make it difficult to reach the most vulnerable populations such as men who have sex with men, sex workers, injecting drug users, and migrants

Health systems are limited in their capacity to deliver the required services



Summary: Epidemic situation

- HIV prevalence is decreasing/stabilizing in some countries but increasing in others; new epidemics continue to emerge among sub-populations
- HIV among injecting drug users remains uncontrolled with a third of them being infected in many areas
- A significant proportion of men who have sex with men (MSM) are infected. Unprotected sex is common among MSM.

Summary: National Response

- Many regional success stories exist for preventing HIV both by sexual and injecting modes of transmission
- Huge unmet need for HIV prevention, care and treatment services;
 - Nine out of ten HIV positive persons do not know that they are infected
 - Three out of four in need of treatment do not have access to it
 - Nine out of ten pregnant women do not receive PMTCT services
- MDG targets may not be reached in some countries unless substantial efforts are taken to scale-up the required HIV interventions

Future priorities

- Accelerate efforts to prevent HIV transmission, particularly among the most-at-risk populations
- Urgently scale-up services for HIV counseling and testing, prevention of mother-to-child transmission of HIV and antiretroviral treatment
- Strengthen health systems and human resource capacity to deliver the required health services
- Reduce HIV-associated stigma and create an enabling environment for the vulnerable populations to access health services

Thank You

