

Re-strategizing the MSM Response: Data for Action

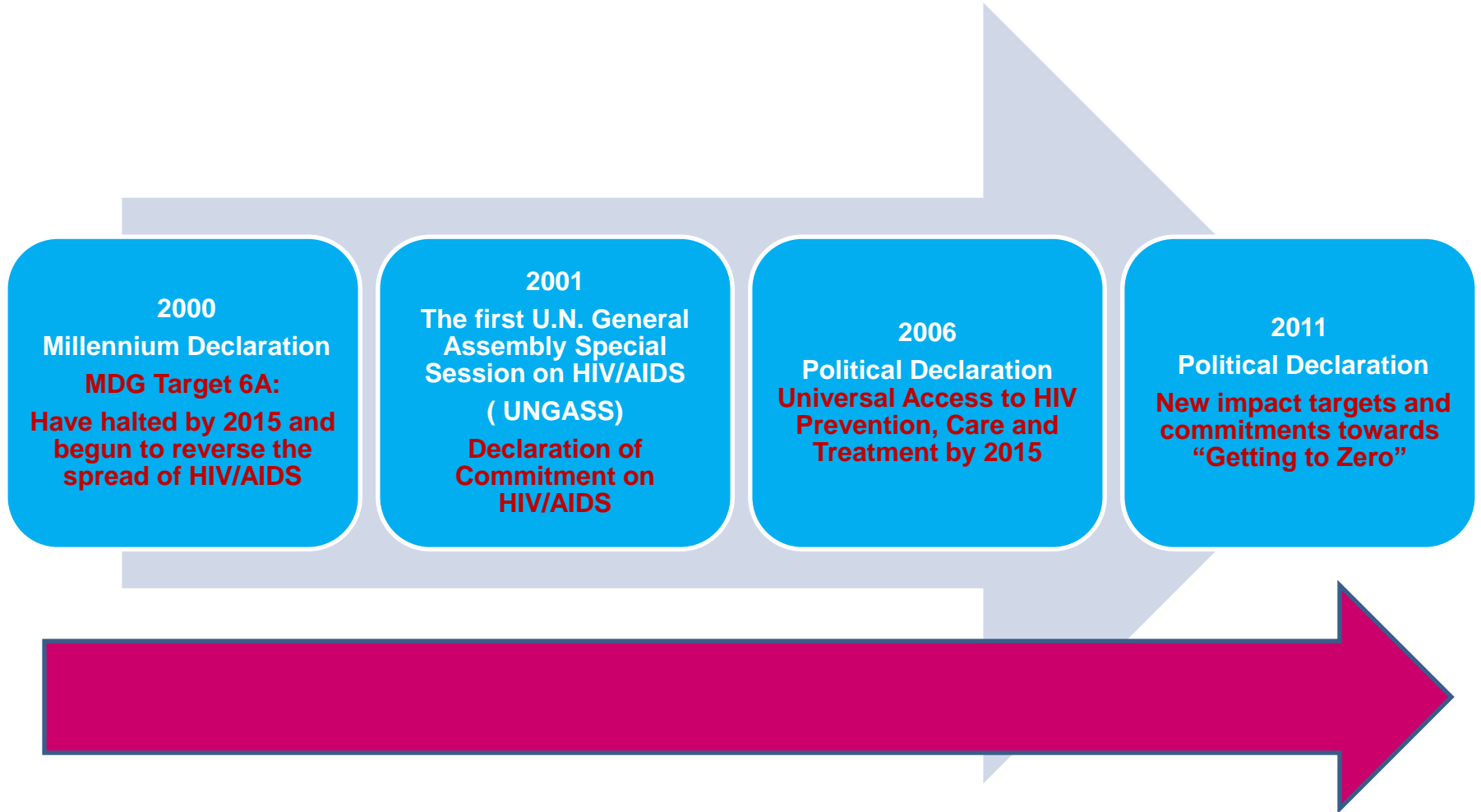
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International Commitments on AIDS: leading to an AIDS-Free Generation



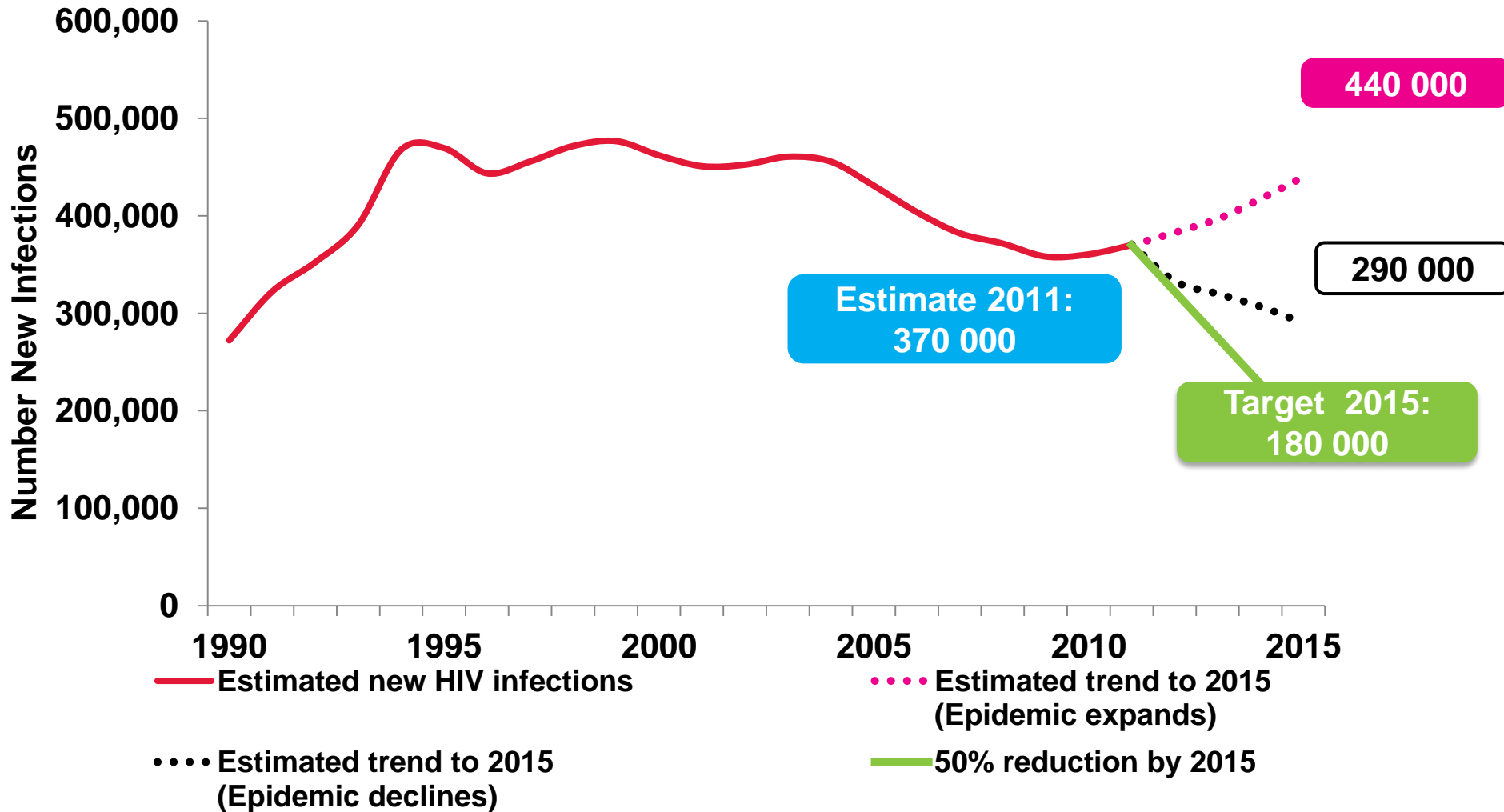
Getting to zero

HIV in Asia and the Pacific 2011

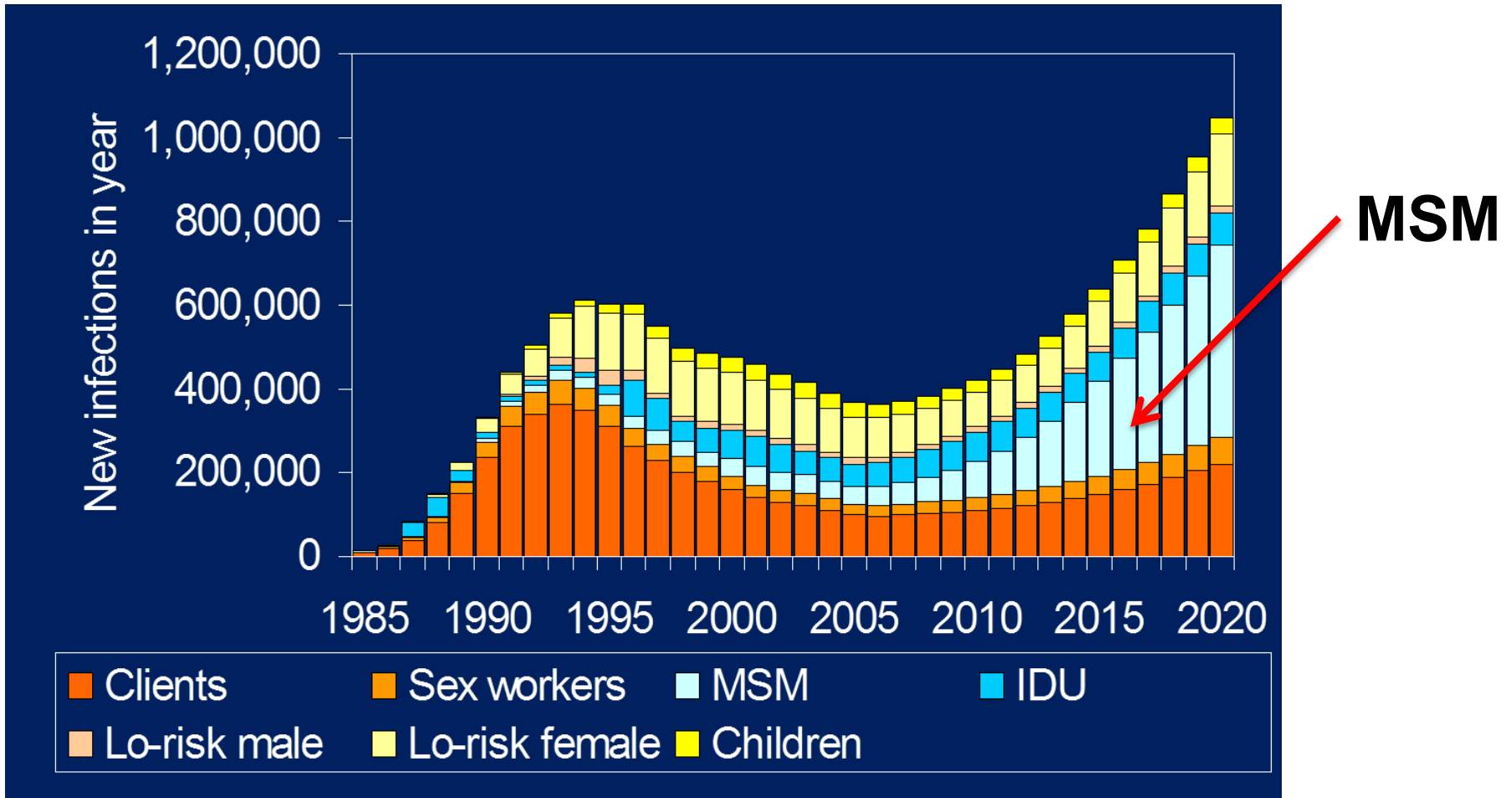
- **4.9 million** people living with HIV
- **1.6 million** women living with HIV
- **370,000** new HIV infections
- **310,000** AIDS-related deaths
- **21,000** children newly infected

ZERO NEW INFECTIONS:

Current business model will NOT get us to 2015 targets for reductions in new infections



Commission on AIDS in Asia regional projection predicted about half of all new infections would be among MSM by 2020 if 'business as usual'



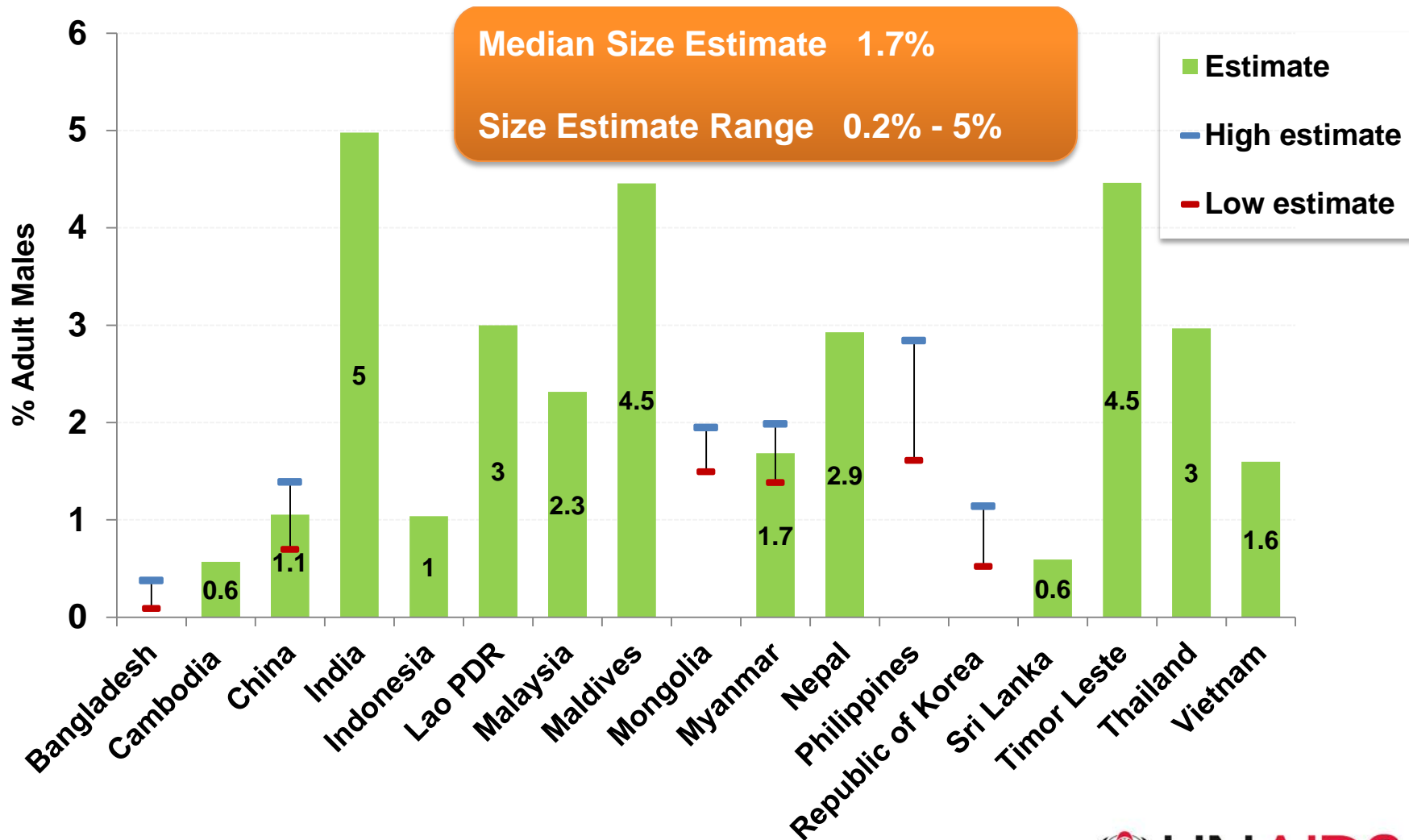
What do we need to know to inform a strong response among key populations?

- Geographic location of risk sub-populations
- Size of at-risk & vulnerable sub-populations
- HIV prevalence of sub-populations
- HIV-related risk in populations
 - Sexual risk: levels and frequency of unprotected commercial sex, and of unprotected anal sex between men who have sex with men
 - Injection risk: sharing of needles

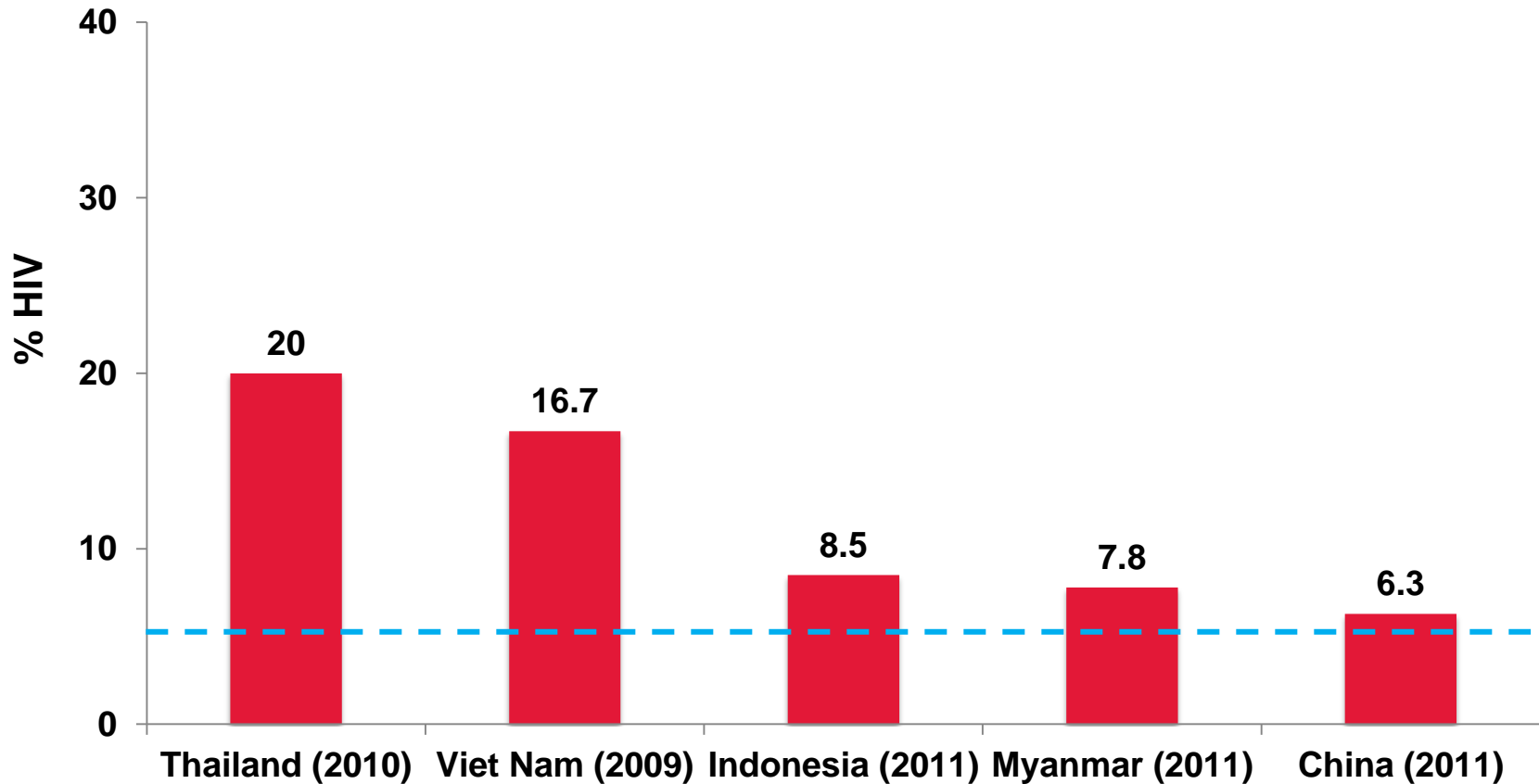
About 25 million men who have sex with men in the region: Not insignificant!

Country	Estimate	Low Estimate	High Estimate
Bangladesh (2010)	-	32,967	143,065
Cambodia (2009)	21,327	-	-
China (2009)	4,100,000	2,700,000	5,400,000
India (2011)	17,700,000		
	3,500,000 (high risk MSM and TG)	-	-
Indonesia (2009)	695,026	423,729	1,358,527
Lao PDR (2011)	49,330		
	17,000 (high risk MSM)	-	-
Malaysia (2009)	173,000	-	-
Maldives (2009)	4,100	-	-
Mongolia (2006)	-	11,500	15,000
Myanmar (2008)	224,000	183,600	264,000
Nepal (2011)	222,660	-	-
	74,220 (high risk MSM)	65,864 (high risk MSM)	82,330 (high risk MSM)
Philippines (2011)	-	390,733	689,529
Republic of Korea	-	70,854	155,897
Sri Lanka	31,000	24,000	37,000
Timor-Leste (2010)	11,197	-	-
Thailand (2010)	550,571	-	-
Vietnam (2011)	393,467	-	-

MSM size estimates expressed as proportion of adult males (15-49 yrs.)



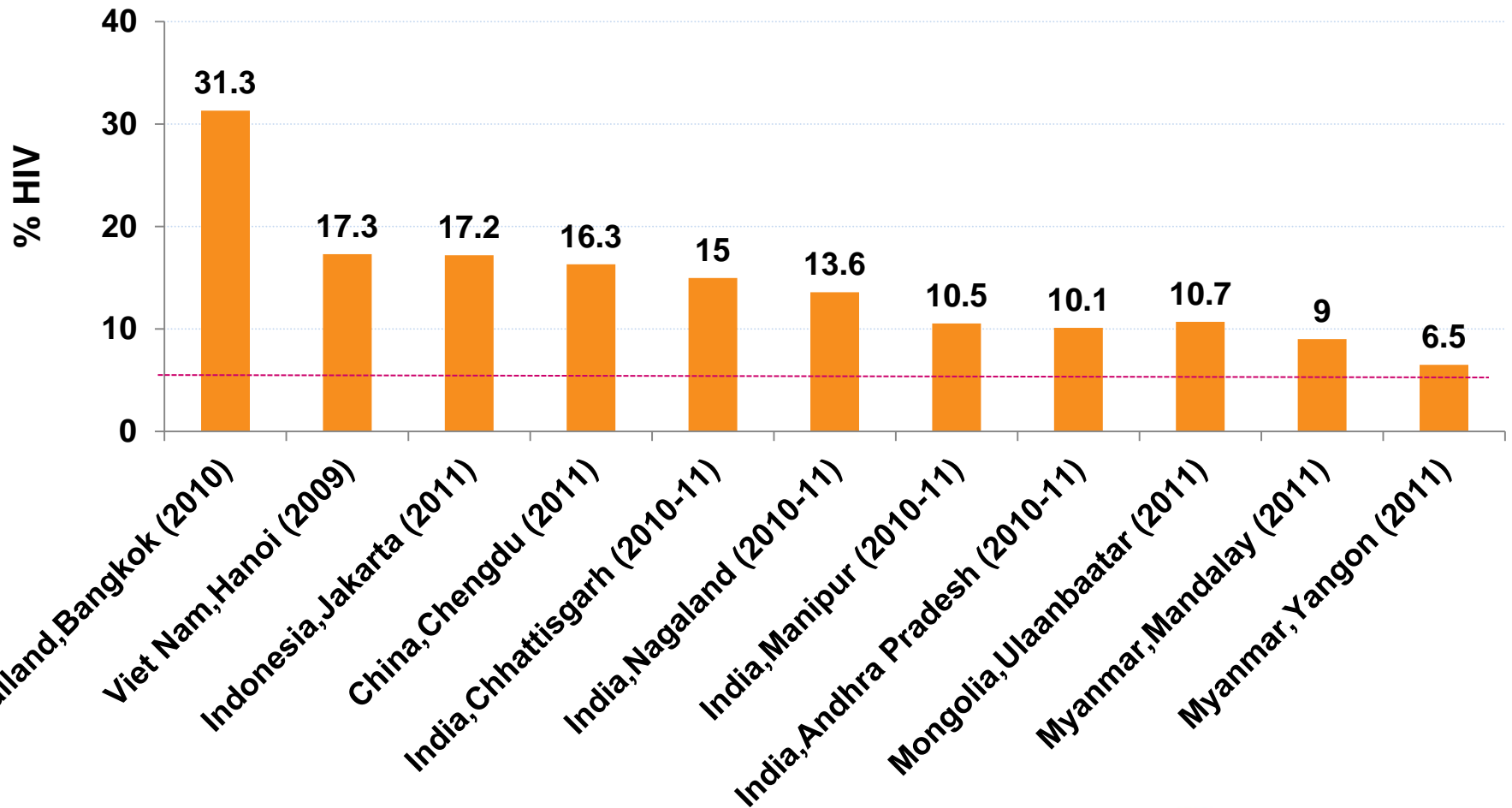
>5% HIV prevalence among MSM in national estimates from surveys in 5 countries



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But some geographical locations have much higher prevalence than national...

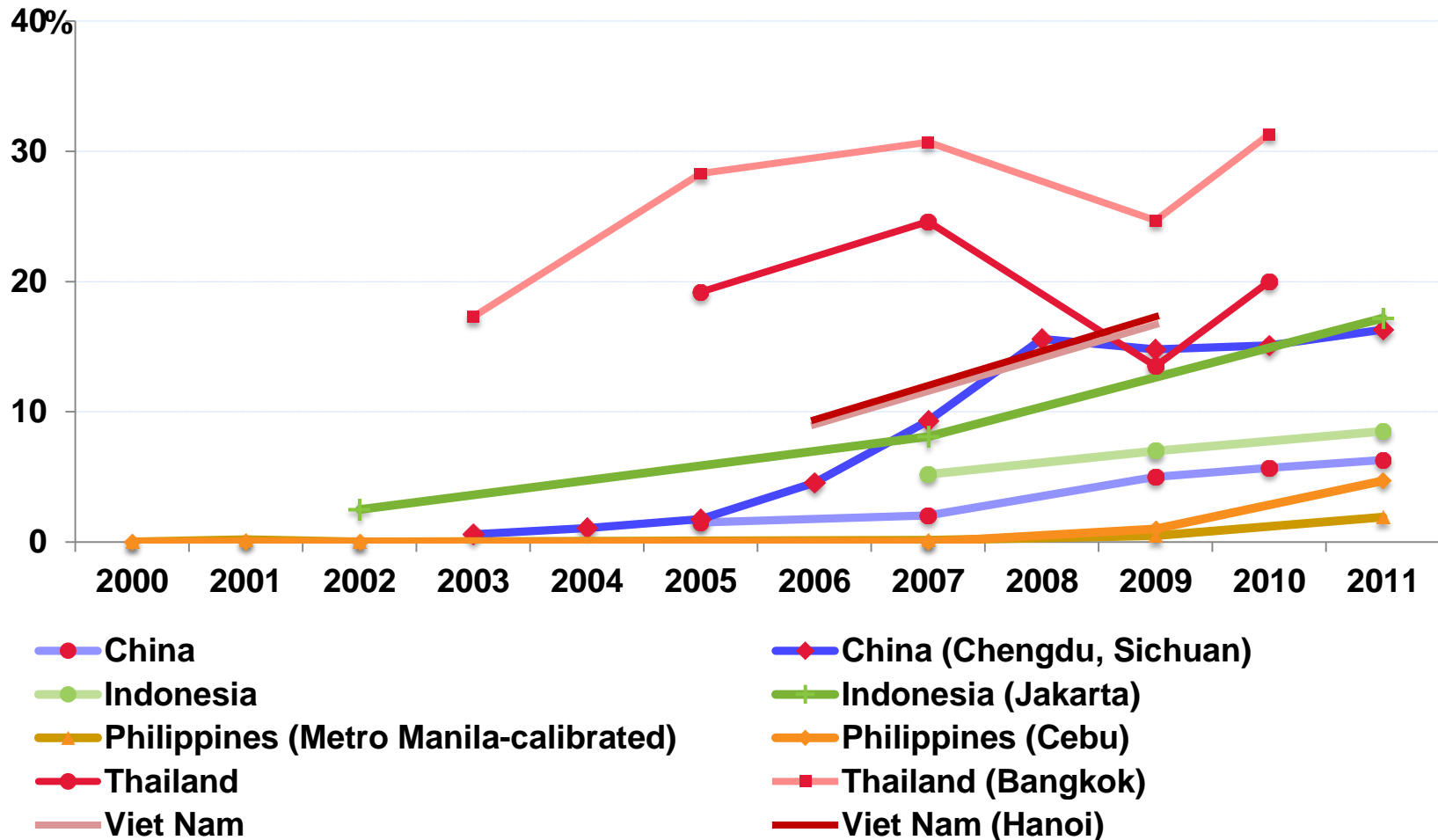


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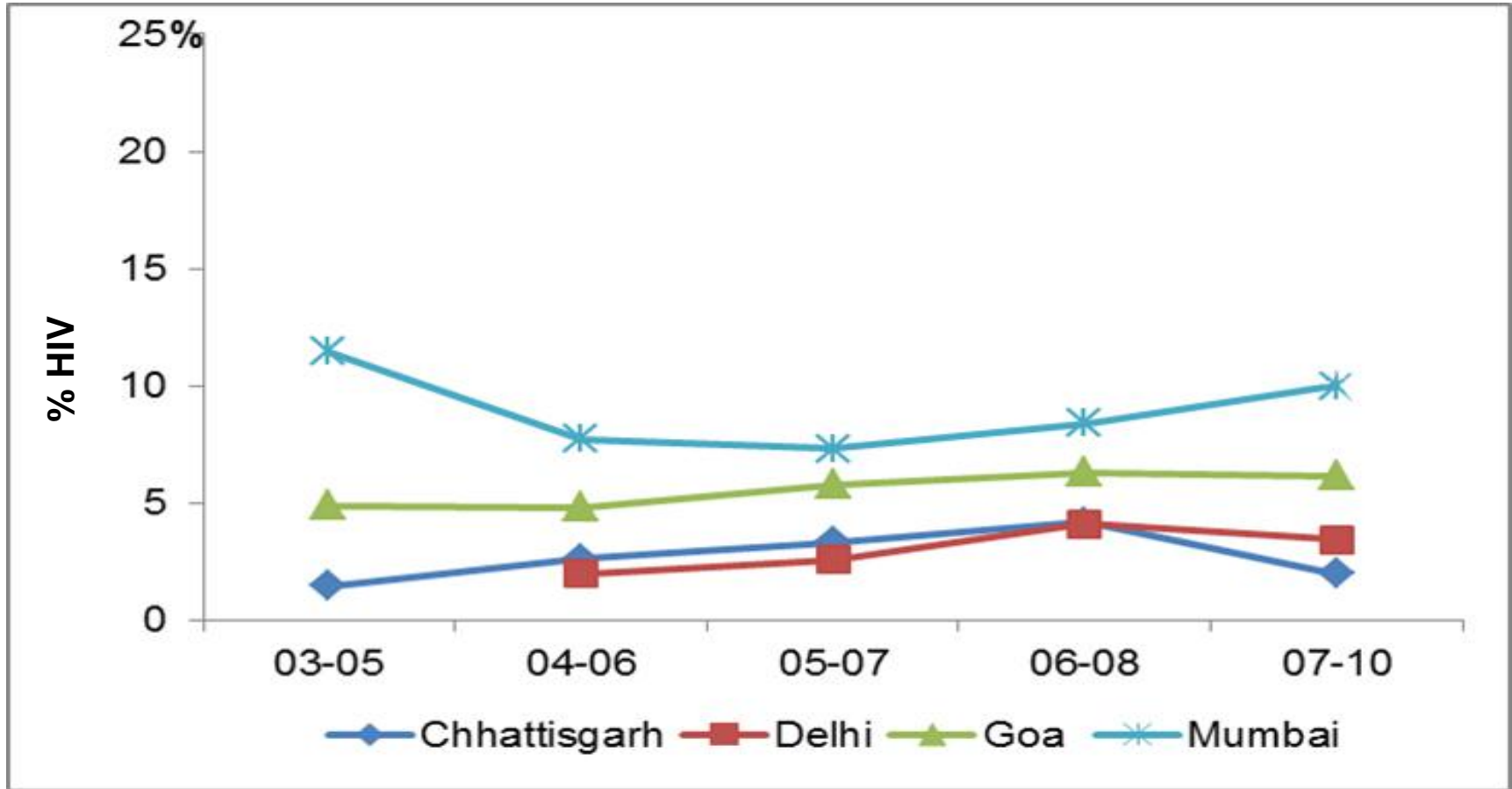


There are rising prevalence trends in regions/cities in 6 countries: China, Indonesia, Philippines, Thailand & Vietnam...

HIV Prevalence Trends



... and several states in India also have rising trends in MSM prevalence

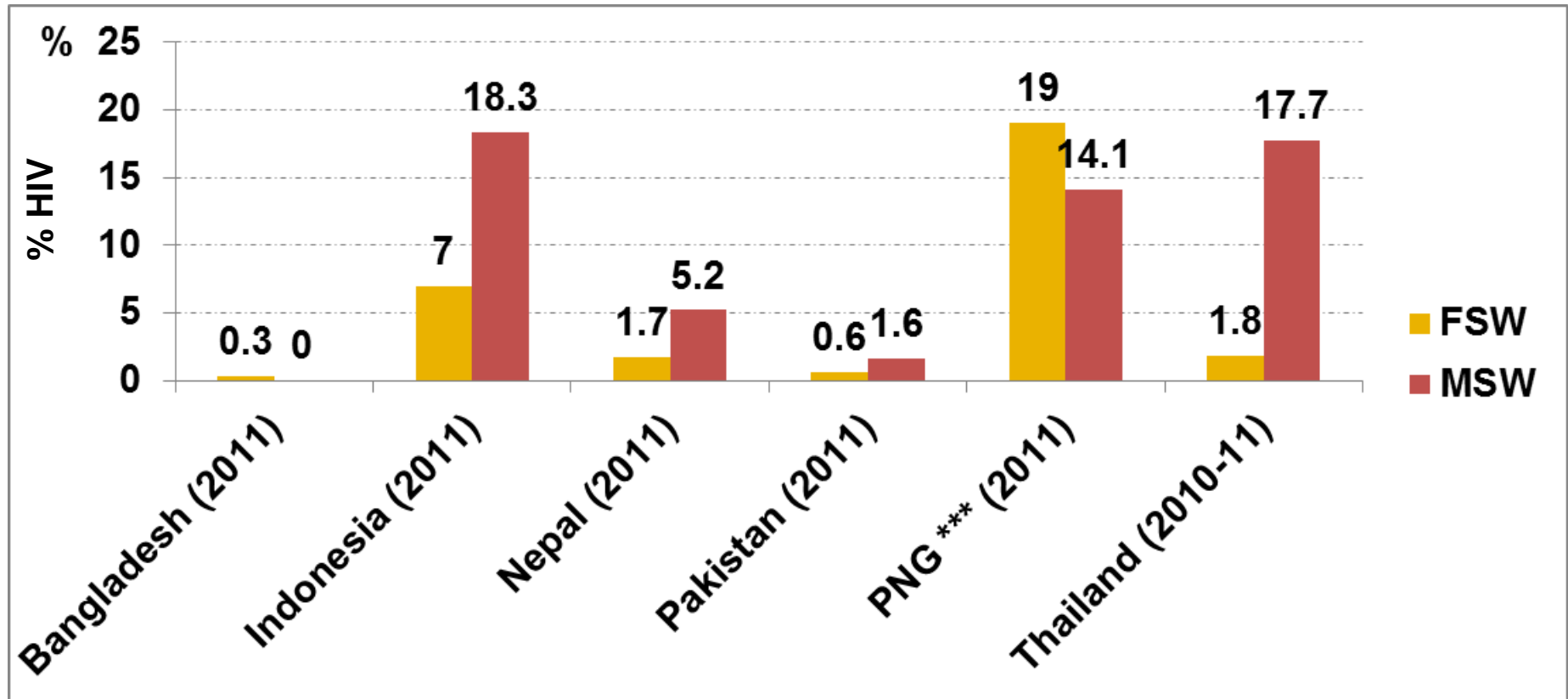


3-yr moving averages based on consistent sites; Chhattisgarh – 1, Delhi – 1, Goa – 1, Mumbai - 1

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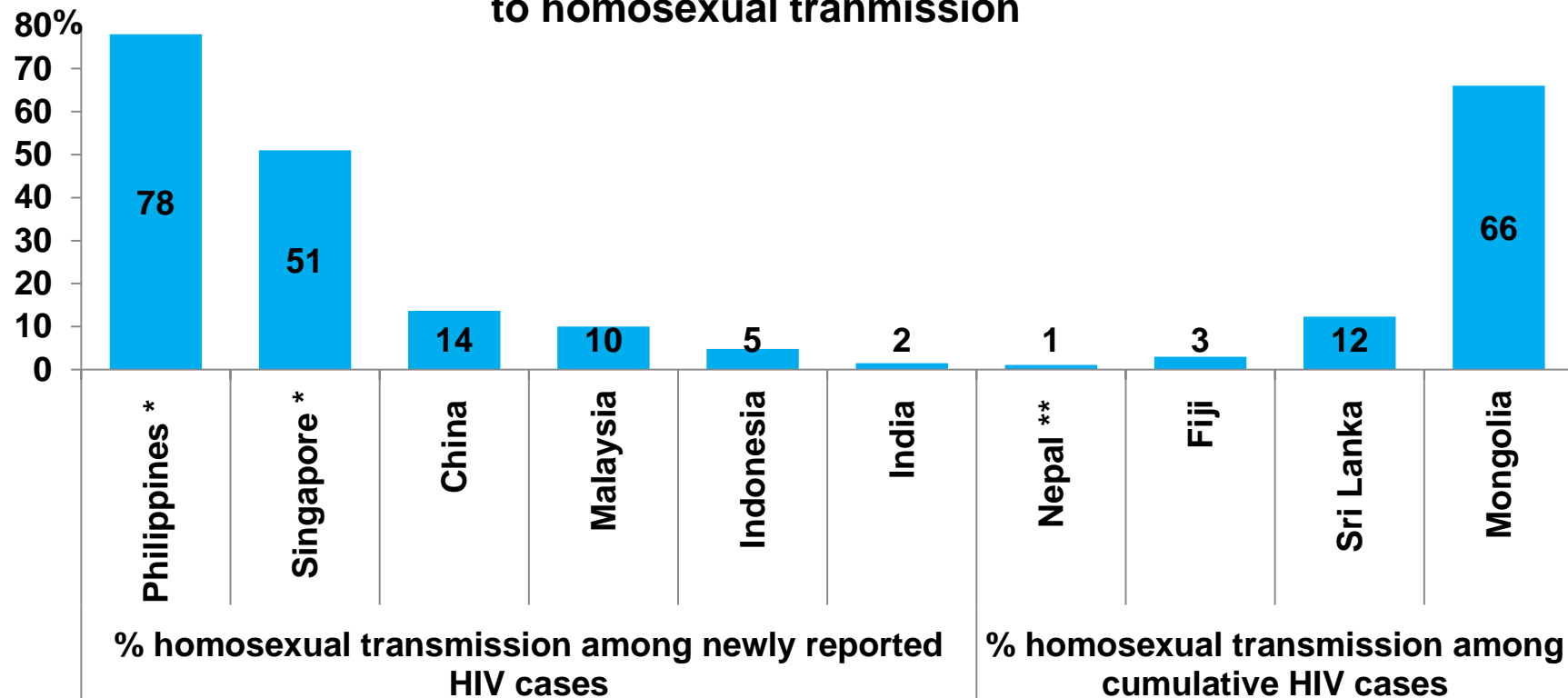


Generally male sex workers have higher HIV levels than FSW



Evidence from case reporting systems: Proportion homosexual transmission

Proportion of newly reported and cumulative HIV cases attributable to homosexual transmission

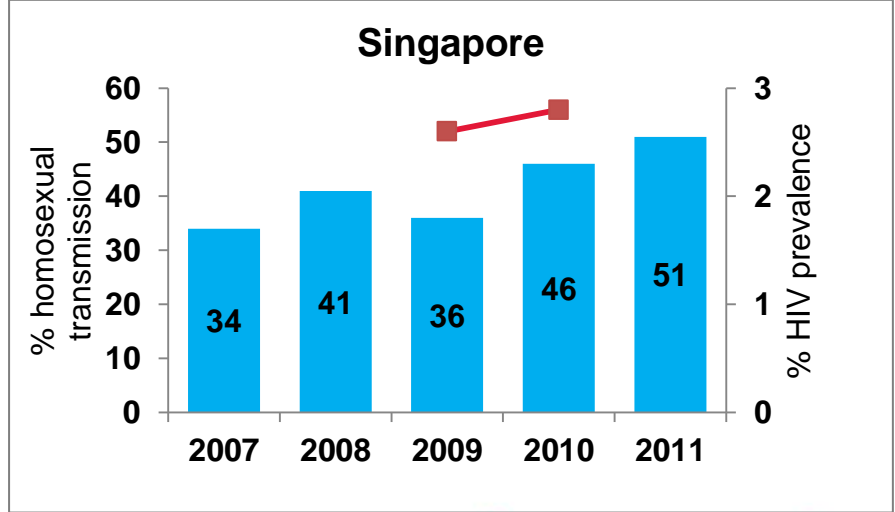
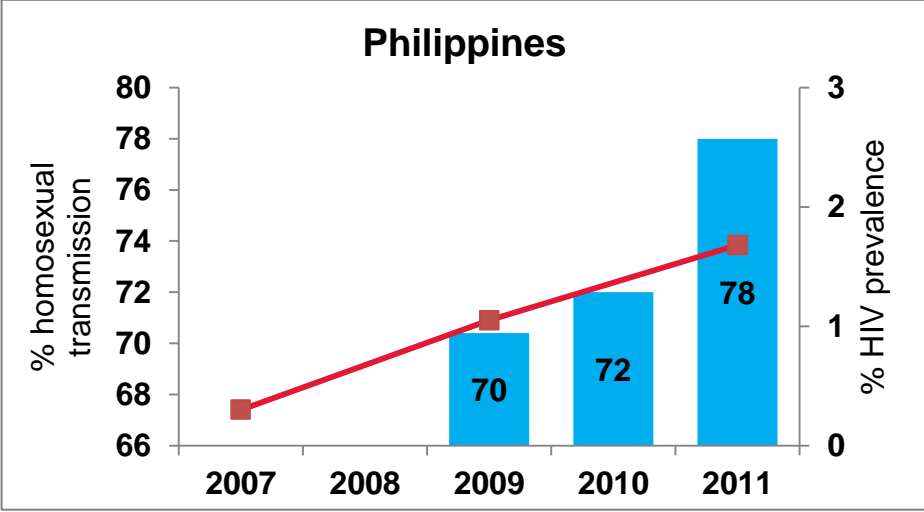
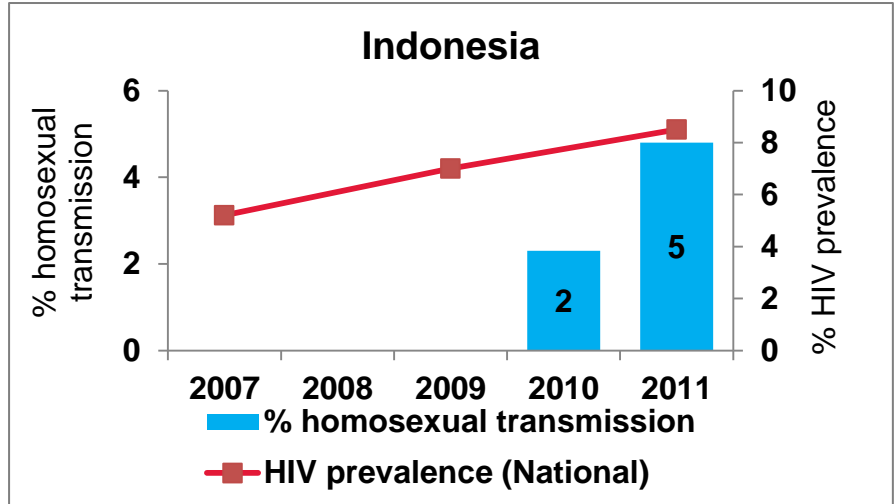
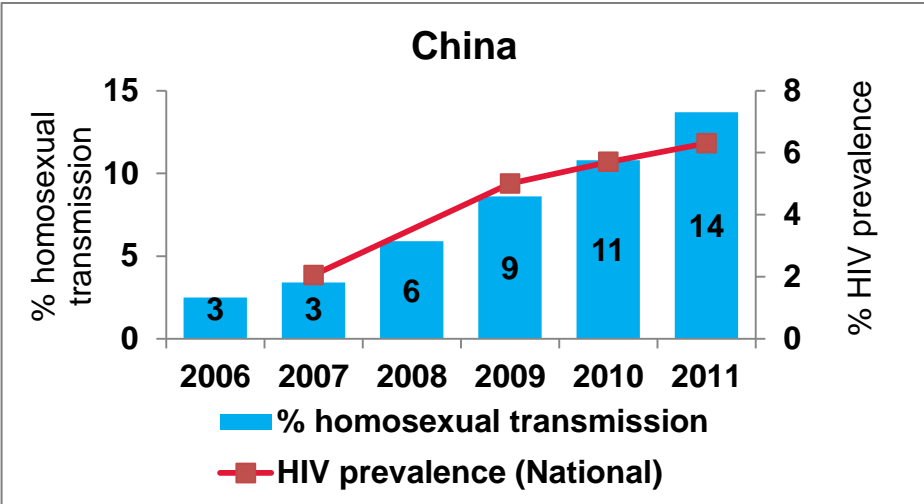


* both homo and bisexual ** cumulative HIV and AIDS cases

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Reported HIV cases and prevalence ...do they correlate well? Yes!



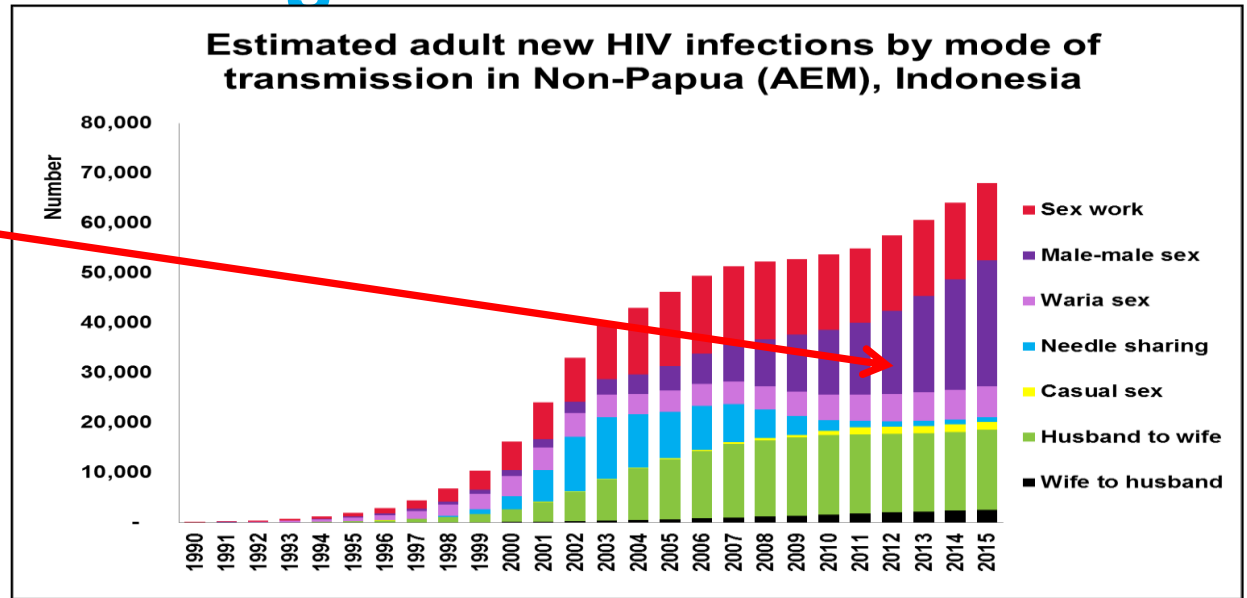
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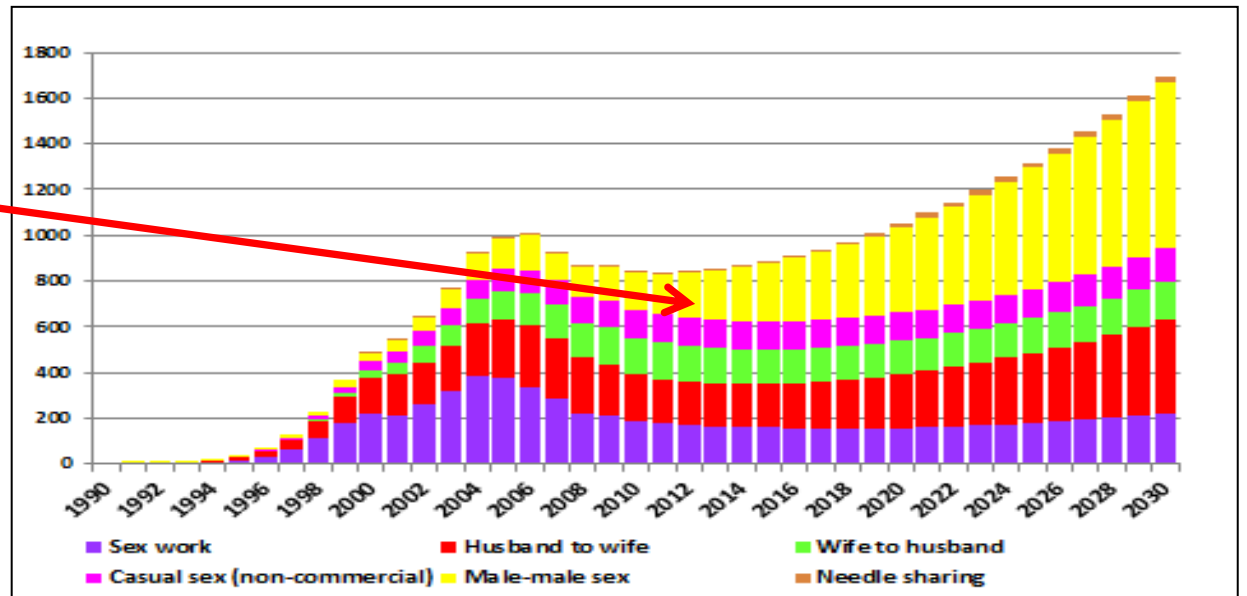
Source: Prepared by www.aidsdatahub.org based on data from Ministry of Health HIV statistics and AIDS registry, HIV Sentinel Surveillance Reports, Country Global AIDS Response Progress Reports 2012

Countries with models that show expanding new infections among MSM :

Indonesia
16,700 in 2012,
increasing to
25,000 by 2015



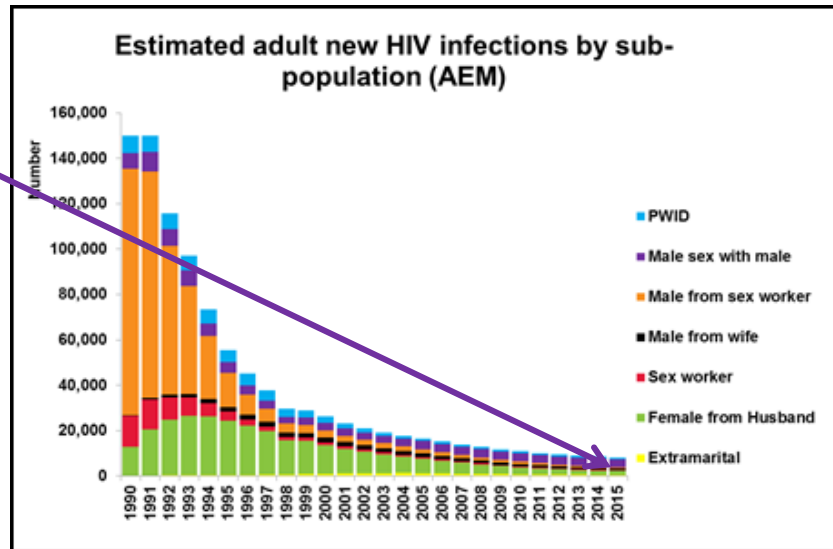
Lao PDR
160 in 2012,
increasing to
200 by 2015



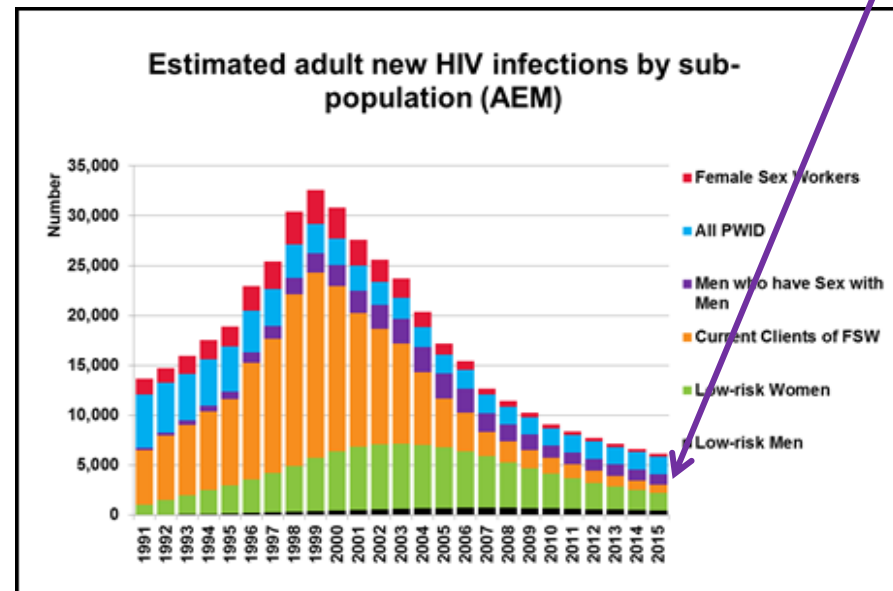
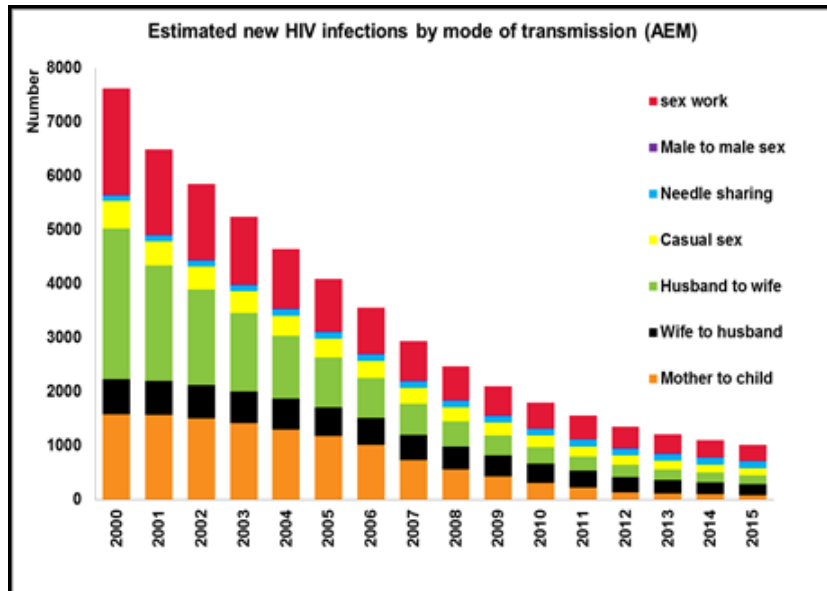
Countries with models that show stable or declining new infections among MSM...

Thailand
Stabilizing at ≈ 3500
in 2010 to 2015

Cambodia
 ≈ 20 from 2000 to 2011

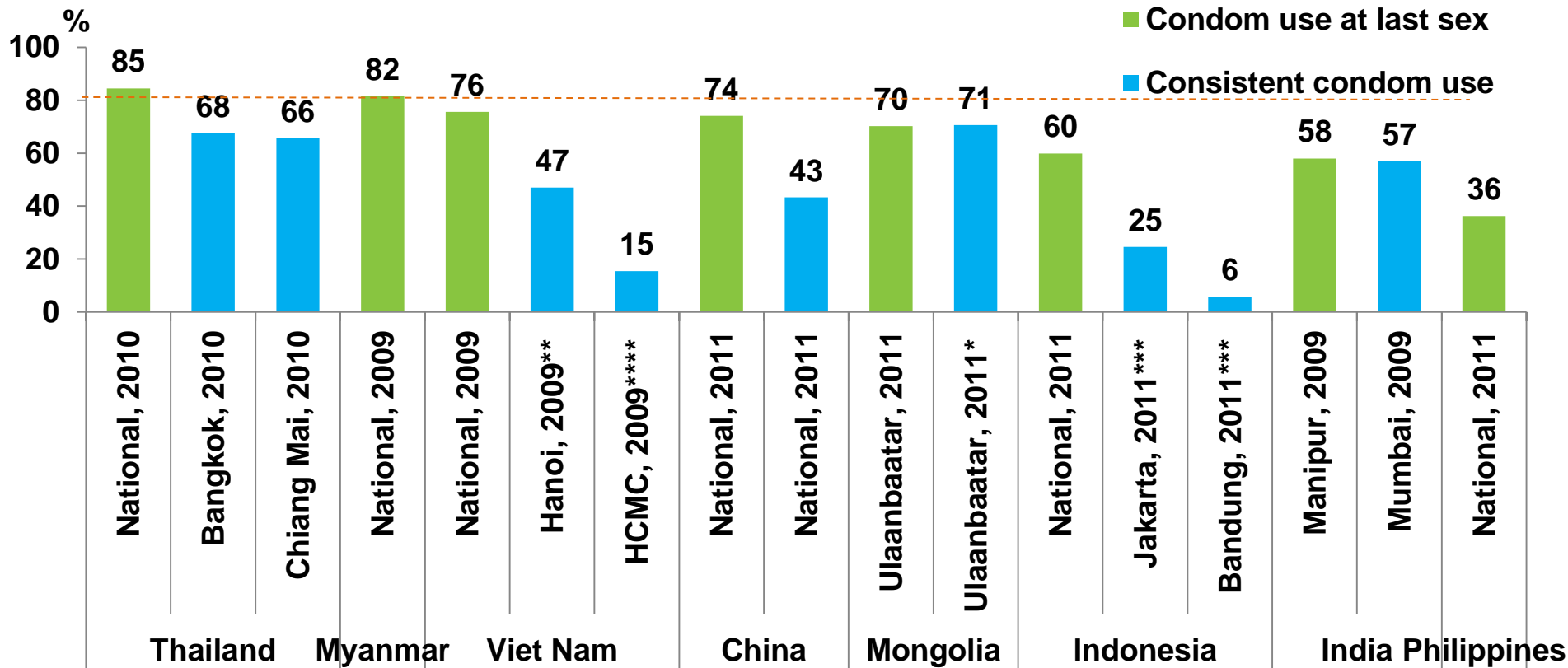


Myanmar
Stabilizing at ≈ 1000
from 2010 to 2015



Consistent condom use is too low in areas where we need to turn down the epidemic

Condom use at last anal sex and consistent use among MSM, 2009-2011



* with non-regular partners; ** with clients;
 *** with commercial partners; **** with MSWs

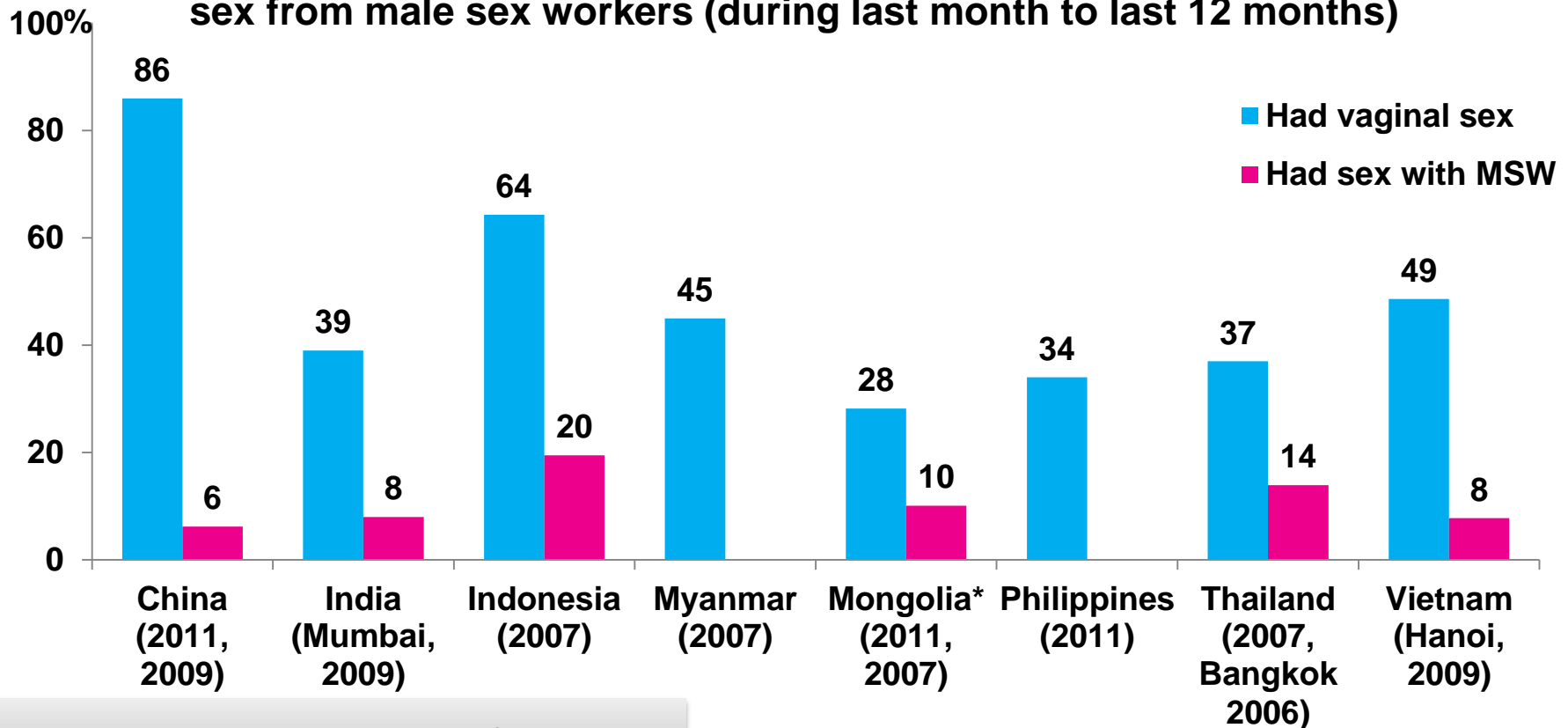
Regional median for condom use at last anal sex is **66%**

Multiple male partners combined with the low consistent condom use increases the risk of HIV infection

- **China:** 85 % had multiple male sex partners in the last 6 months in sentinel surveillance (2011) (Source: Wang Lan, *et al.* 2012)
- **Bangalore, India:** Median 30 commercial male partners in last month (2006) (Source: Behavioral Surveillance Survey 2006)
- **Indonesia:** 65 % of 1,450 MSM surveyed in six cities had multiple male sexual partners (2007) (Source: UNAIDS, UNDP, APCOM, Data Hub, *et al.*, 2012. Indonesia: Country Snapshots - HIV and Men who have Sex with Men.)
- **Myanmar:** 50 % reported having 2 – 6 male sexual partners in the last year (2010) (Source: UNAIDS, UNDP, APCOM, Data Hub, *et al.*, 2012. Myanmar: Country Snapshots - HIV and Men who have Sex with Men.)
- **Mongolia:** 75 % reported having anal sex with multiple partners in the last 12 months (2007) (Source: Second Generation Surveillance 2007)
- **Philippines:** Mean 3 non-paying sexual partners in the last month (2011) (Source: Integrated HIV and Behaviour Serologic Surveillance 2011)
- **Thailand:** 77 % \geq 6 male partners (2006-2011) (Source: Griensven. F *et al.* 2012)
- **Hanoi, Viet Nam:** 63 % $>$ 2 partners in the last month (2009) (Source: Integrated Bio-behavioral Survey 2009)

High proportions of MSM buy sex from male partners and report regular female partners which influences onward HIV transmission

Proportions of MSM who had vaginal sex and who reported buying sex from male sex workers (during last month to last 12 months)



* Either paying or receiving money for sex

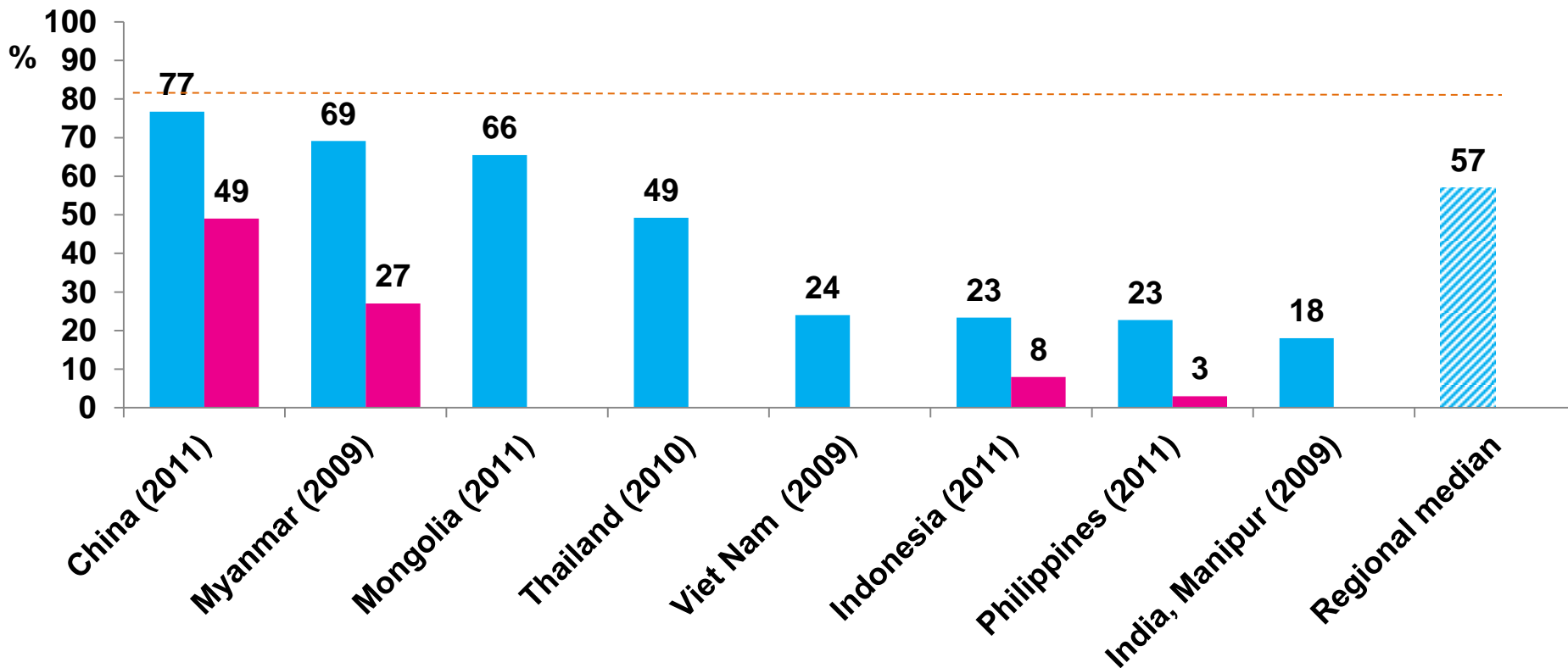
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Source: Prepared by www.aidsdatahub.org based on UNDP, UNAIDS, APCOM, and HIV and AIDS Data Hub (2012). The MSM Country Snapshots; Integrated Bio-Behavioural Surveys; and Behavioural Surveillance Surveys

Programme coverage has been scaled up but has not yet reached the target

Prevention coverage among MSM, 2009-2011



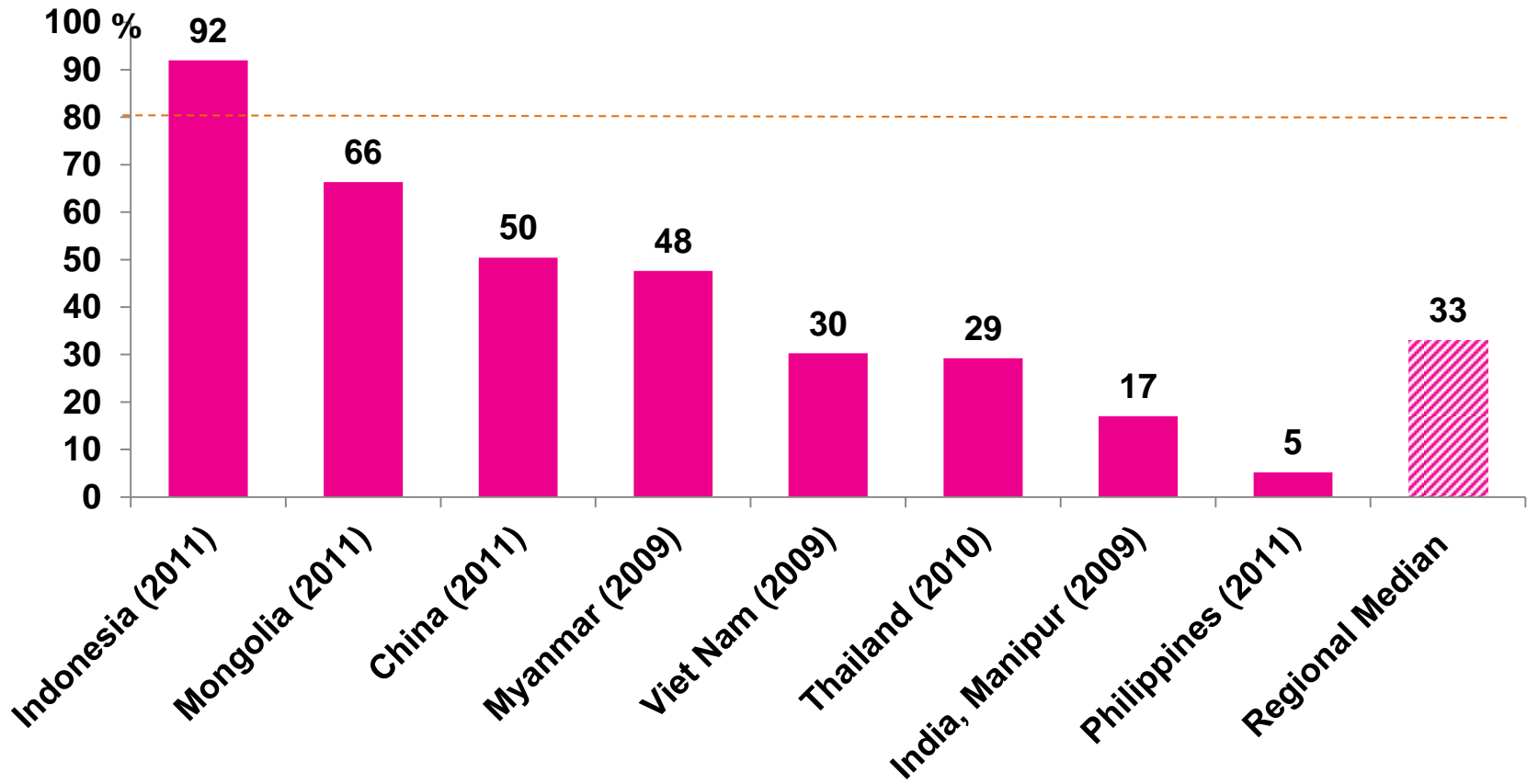
■ % MSM reported receiving condoms in last year & also know where to HIV test
■ % MSM in interventions from programmatic data

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Over 2/3 of the MSM surveyed in the region do not know their HIV status...

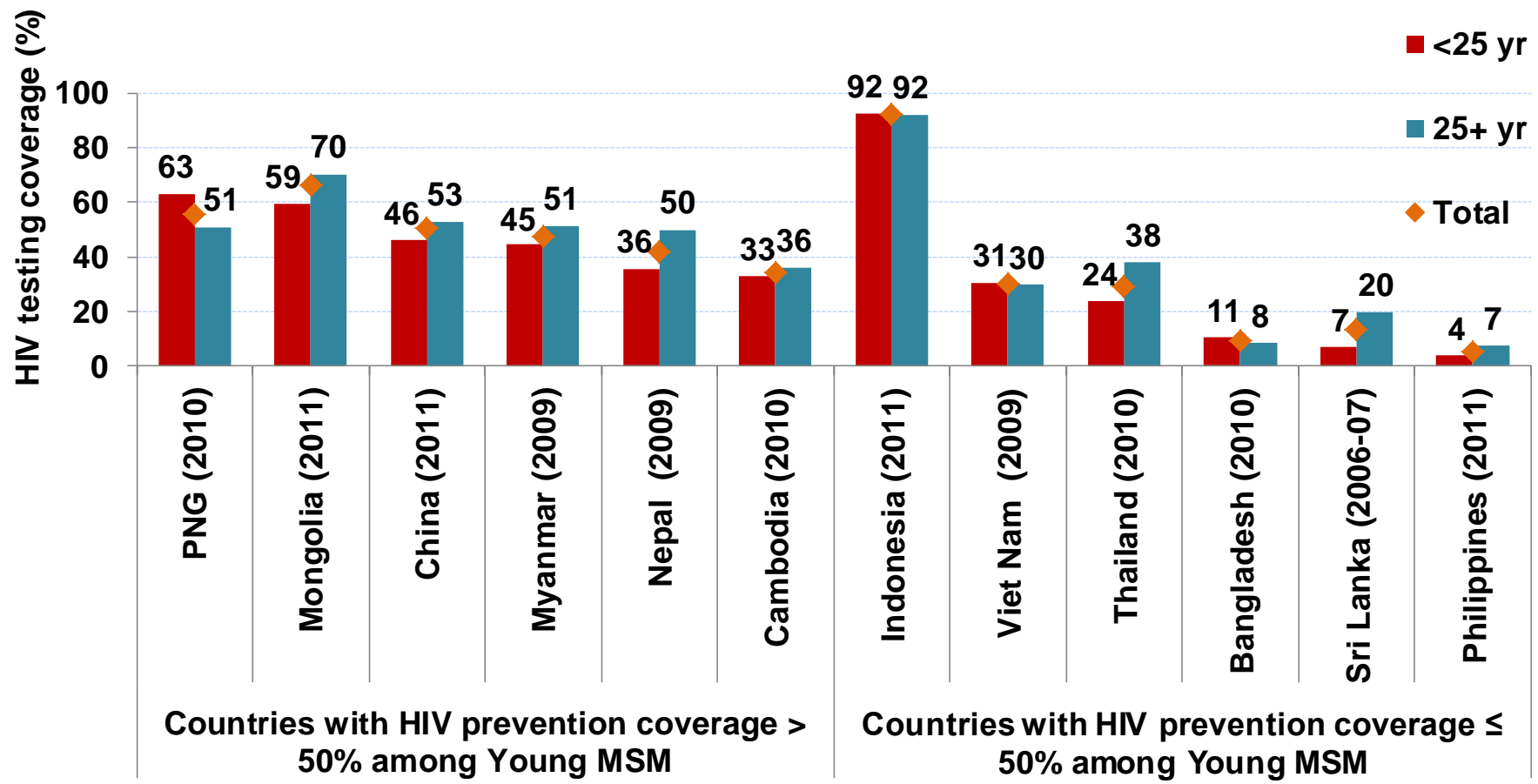
HIV testing coverage among MSM, 2009-2011



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Less young MSM are being reached by prevention programmes to access HIV testing



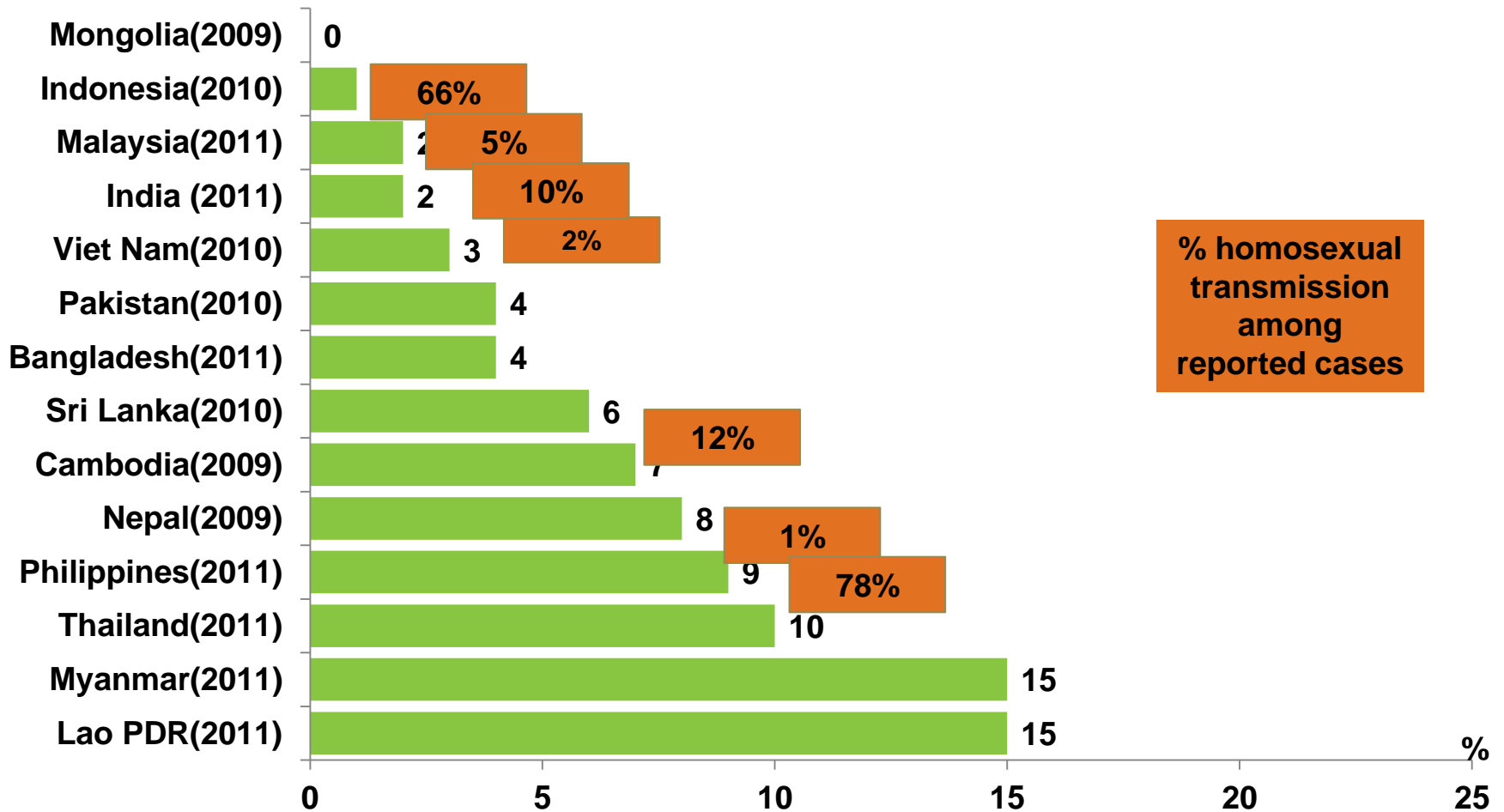
Getting to zero



Source: Prepared by www.aidsdatahub.org based on Global AIDS Response Progress Reports- Country Reports (2012) ; UNGASS Progress Reports (2010).

Pay now...or pay forever!

Prevention spending on MSM as a share of total prevention spending



Spending per MSM reported as covered ranges from \$1- \$89, median \$13

Almost half of the countries in the Asia-Pacific criminalize same-sex activities

- **18** out of **38** member states in the Asia Pacific criminalize same-sex sexual activities
- Decriminalized sex between men: **India (2009) and Fiji (2010)**
- However, reports of other criminal offences that are selectively enforced against MSM and transgender people in a further **8** countries that do not have specific criminal offences for male-to-male sex (*Cambodia, China, India, Indonesia, Mongolia, Philippines, Thailand, Vietnam*).

[Source: Godwin, J. (2010). Legal Environments, Human Rights and HIV Responses among MSM and Transgender in Asia and the Pacific]

We do not need to wait for more evidence to act!

From the information we have, it is clear that we need to respond more effectively to the rising MSM epidemics, and which countries to prioritize.

Gaps in evidence... that affect the ability to respond strategically to MSM sub-epidemics

- Disaggregated data for different sub-populations of MSM (Size estimates, prevalence, behavior, programmatic)
- National and sub-national data on prevention and testing coverage, (barriers to) access to treatment/services, treatment coverage
- Young MSM are getting infected, yet disaggregated epidemiology and response data is lacking in many countries
- Causal analysis in cities with rising HIV trends to inform and plan programmes
- Analysis on effectiveness of prevention programmes
- Effectiveness of “treatment as prevention” for male-male sexual transmission – HPTN 052 study based on heterosexual cohorts
- Specific MSM and HIV strategy is still lacking in many countries
- Policy documents on best practices
- Estimate of investment needs to control MSM epidemic

Thank you!