## HIV EPIDEMIC AND RESPONSE IN ASIA AND THE PACIFIC

Regional and Country Posters prepared by UNAIDS Asia-Pacific and Data Hub for the 9th UNAIDS Asia-Pacific Regional Management Meeting, Bangkok, 29-31 October 2012





### **Regional Posters**

Zero new infections:  $\bullet$ Zero AIDS-related deaths:  $\bullet$ • Shared responsibility: • Asia-Pacific investing in AIDS ......page 10 Zero discrimination: Punitive laws hindering the HIV response in Asia-Pacific......page 11

### **Country Posters**

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## DATA SOURCES:

Regional and country posters were prepared by UNAIDS Regional Support Team Asia-Pacific, UNAIDS Country Offices, and HIV and AIDS Data Hub for Asia-Pacific based on the following published sources of data:

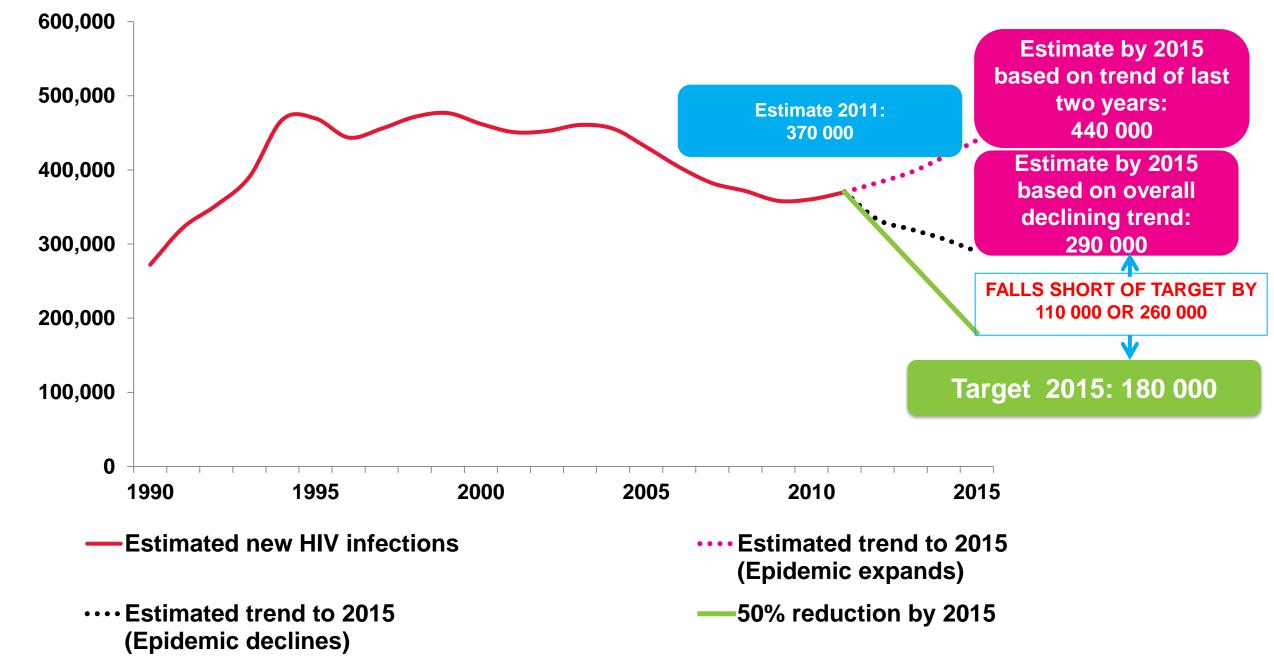
- 1) HIV Sentinel Surveillance Surveys
- 2) Behavioural Surveillance Surveys
- 3) Integrated Bio-behavioural Surveys
- United Nations General Assembly Special Session on HIV and AIDS (UNGASS) Country Progress Reports 2008 and 2010
- 5) Global AIDS Response Progress Reports 2012

## **REGIONAL POSTERS FOR ASIA AND THE PACIFIC**



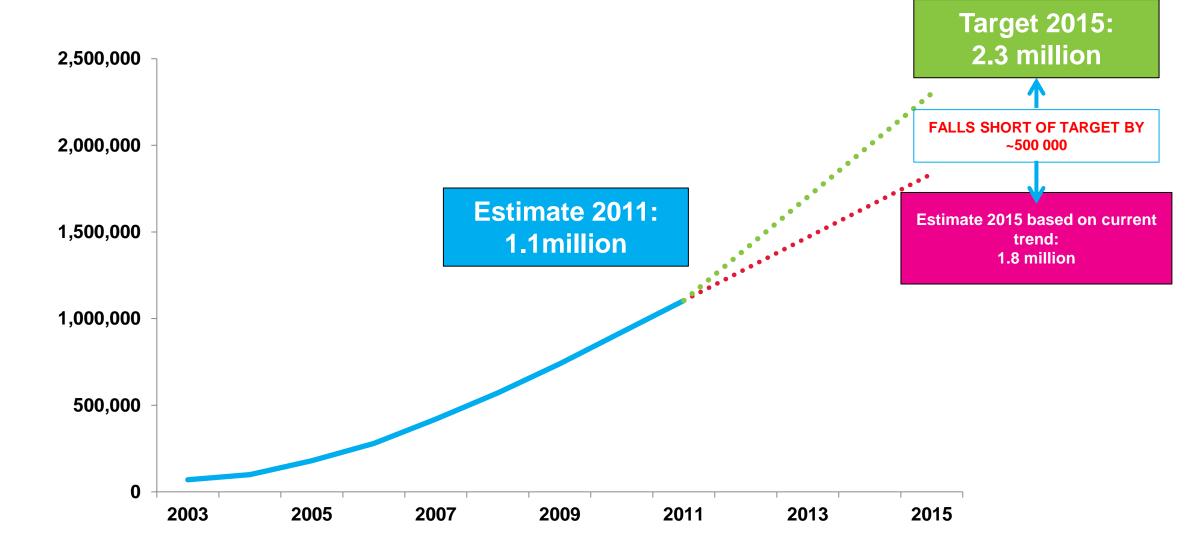
### **ZERO NEW INFECTIONS**

# Is there a resurgence of the epidemic in Asia?



### **ZERO AIDS-RELATED DEATHS**

# Current business model will not get us to 2015 treatment targets



-Number of people receiving ART by 2011 •••• Number of people receiving ART 2015 (with the current trend) ••••2015 target

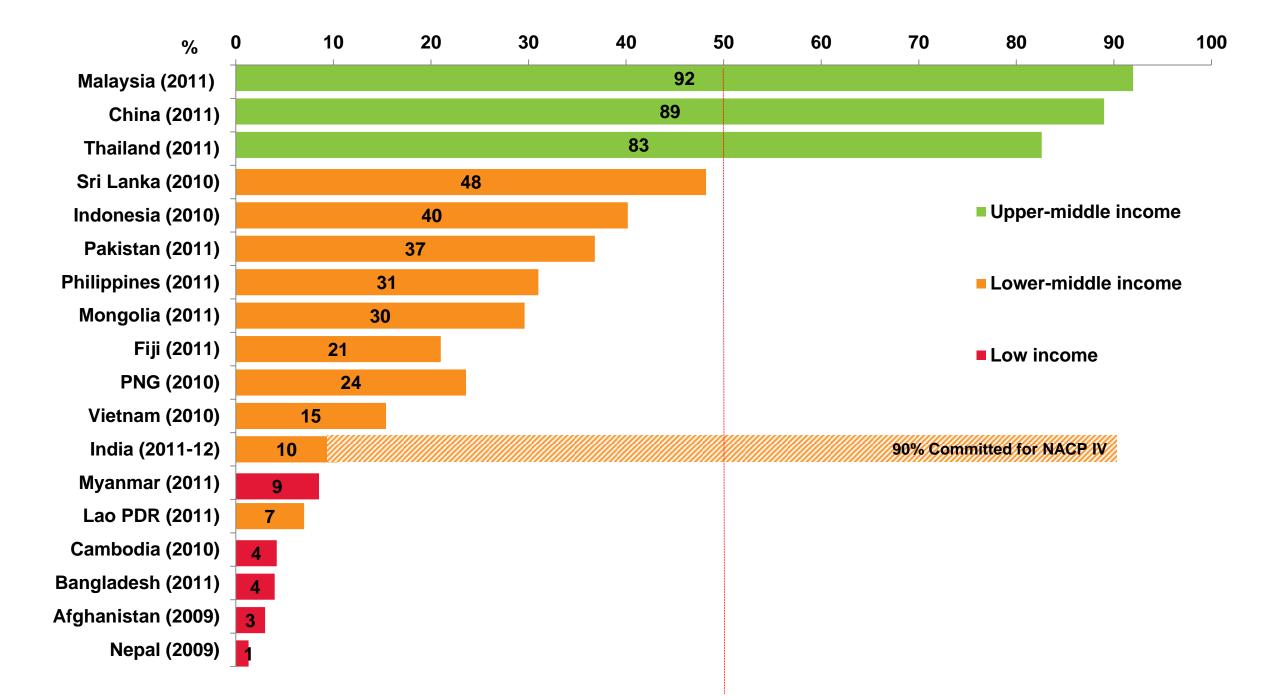
### **Urgent action needed to control expanding epidemics** and keep up prevention in declining epidemics

Adults and children newly Infected	Adults and children living with HIV	Adults and children AIDS Deaths	Countries
			India, Thailand, Myanmar, Nepal, Cambodia
	or	varies	China, Viet Nam Malaysia, PNG
			Indonesia, Pakistan, Philippines
or		<500	Bangladesh, Lao PDR, Afghanistan, Sri Lanka,
<500	<1,000	low	Bhutan, Fiji, Maldives, Mongolia Timor Leste, PICT
	children newly Infected	children newly   Infected     Image: Children living with HIV     Image:	children newly children living children AIDS   Image: Stress of the

Source: UNAIDS Regional Support Team Asia and the Pacific- HIV and AIDS Data Hub, Country epidemic patterns from DRAFT HIV estimates and projections data for the UNAIDS Report on the Global Epidemic 2012 9

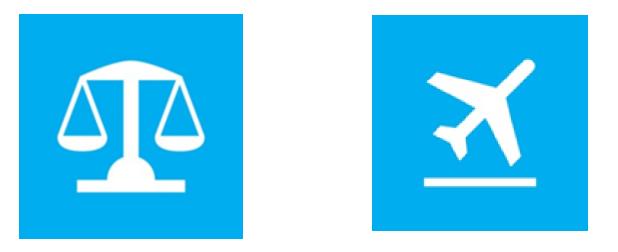
## Shared Responsibility: Asia-Pacific investing in AIDS

HIV expenditure from domestic sources, Asia-Pacific (Preliminary data 2011)



## **Punitive laws hindering the HIV response in Asia and the Pacific**





### **Examples of recent progress**

## Viet Nam: Ending compulsory detention of sex workers

In June 2012, the National Assembly of Viet Nam passed a new Law on the Handling of Administrative Sanctions which effectively ends the practice of detaining sex workers in administrative detention centres. The Law also allows drug users who are subject to compulsory treatment in drug detoxification centres to have court hearings on their cases and legal representation at the court.

During the development of the Law, government officials and National Assembly members also sought concerted policy advocacy and technical assistance by UN agencies—including UN-AIDS, UNDP, UNICEF, UNODC, WHO and UNFPA under the framework of the One UN Initiative in Viet Nam.

Korea (DPR)	NO	YES	YES	YES	NO	YES	NO INFO	YES	NO INFO
Korea (ROK)	NO	YES	YES	YES	YES	NO	NO INFO	YES	NO INFO
Lao PDR	NO	YES	YES	YES	NO	NO	YES	YES	NO INFO
Malaysia	YES	NOT	YES	YES	NO	YES	YES	YES	NO
Maldives	YES	YES	YES	YES	YES	NO	NO INFO	NO INFO	NO INFO
Marshall Islands	NO	YES	YES	YES	NO	YES	NO INFO	NO INFO	YES
Micronesia	NO	YES	YES	YES	NO	NO	NO INFO	NO INFO	YES
Mongolia	NO	YES	YES	YES	NO	YES	NO INFO	NO INFO	NO INFO
Myanmar	YES	YES	YES	YES	YES	NO	YES	YES	NO
Nauru	YES	NO	NO INFO	YES	NO	NO INFO	NO INFO	NO INFO	NO
Nepal	NO	NO	NOT	YES	NO	NO	NO INFO	NO INFO	NO INFO
New Zealand	NO	NO	NO	NO	NO	YES	NO INFO	NO INFO	NO
Pakistan	YES	YES	YES	YES	NO	NO	NO INFO	YES	NO INFO
Palau	YES	YES	YES	YES	NO	NO INFO	NO INFO	NO INFO	NO
Papua New Guinea	YES	YES	NOT	YES	NO	YES	NO INFO	NO INFO	YES
Philippines	NO	YES	YES	YES	NO	NO	NO INFO	NO INFO	NO
Samoa	YES	NO	YES	YES	NO	YES	NO INFO	NO INFO	NO
Singapore	YES	NO	YES	YES	NO	YES	YES	YES	YES

Vice Minister of Justice Nguyen The Lien, Vice Chairperson of the Law's drafting committee acknowledged the UN's concerted support to the Government. "The UN has strong comparative advantage in providing legal support to Viet Nam because the UN always respects the country's ownership and leadership in legislation development," he said.

Following the Law's passage, UNAIDS and other UN agencies are providing support to the development of enabling regulations and the alignment of existing policies that are required for the Administrative Sanctions Law to be put into practice.

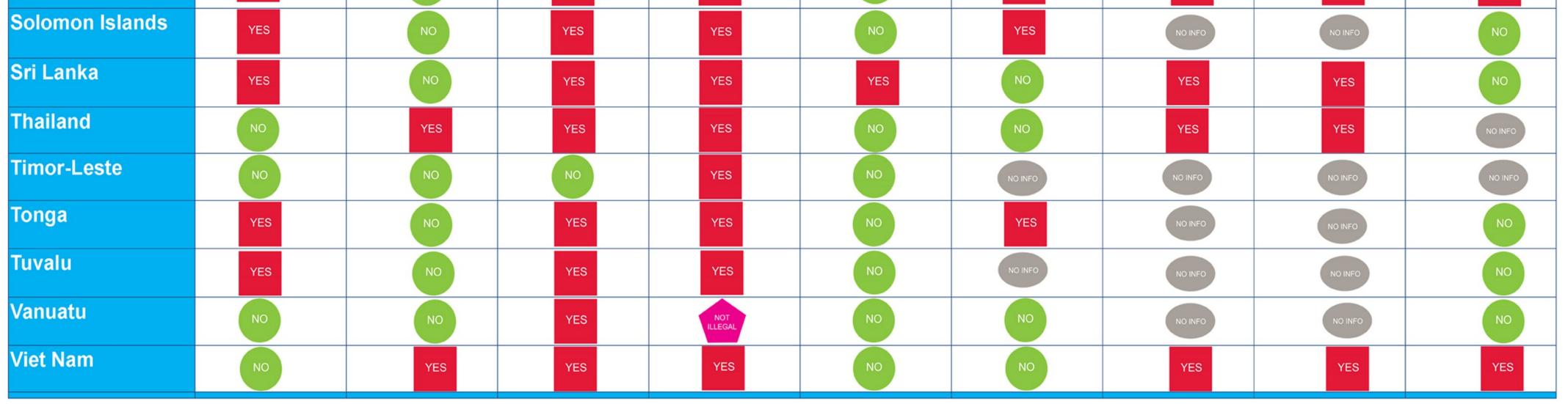
Following the Law's passage, UNAIDS and other UN agencies are providing support to the development of enabling regulations and the alignment of existing policies that are required for the Administrative Sanctions Law to be put into practice.

## Republic of Korea: Lifting HIV-related travel restrictions

At the International AIDS Conference in Washington in July 2012, the Republic of Korea (ROK) announced that all HIV-related restrictions on entry, stay and residence had been lifted. The UN Secretary General, UNAIDS, and the Special Advisory to the Executive Director on ROK provided strategic and technical support to the Government on making the announcement and in the implementation and enforcement of the policy.

#### Pakistan: Third Gender Recognised

In 2009, Pakistan's Supreme Court issued and Order recognising the civil rights of transgender persons by including them in population registration under the status of a third gender. Transgender persons can now have national identity cards shown "transgender" a their identity and the changes give hope for enhanced protection of fundamental rights and citizen entitlements including improvement in access to voting rights, employment, health care, education, inheritance and social welfare nets available to other populations. Nevertheless, there are significant challenges to the implementation of this measure that need to be addressed if concrete benefits are to be generated, particularly due to the fact that same sex sexual relations are still prohibited in Pakistan.



## Philippines: National Human Rights Institution engaged to achieve zero discrimination

In 2012, the Philippine Commission on Human Rights (CHR) committed to align its developmental goal with the National HIV Objectives of Zero Transmission, Zero Deaths and Zero Discrimination. With support from a number of development partners at regional and country level, and under the leadership of Chair Rosales, the CHR's HIV Working Group developed a plan of action focusing on 3 priority areas:

- Developing an HIV and AIDS policy to address internal knowledge, skills and attitudinal gaps within CHR
- Advocating/monitoring for State accountability by developing national human rights standards relative to HIV, AIDS and the

#### Fiji: Decriminalising sex between men

Fiji became the first Pacific Island nation with colonial-era sodomy laws to formally decriminalise sex between men when it passed the Fiji National Crimes Decree in February 2010.

### Eliminating HIV-related restrictions on entry, stay and residence and specific criminalisation of HIV transmission

In August 2011 the Government of Fiji removed all restrictions on entry, stay or residence based on HIV status. With this reform Fiji joined a growing list of countries that are aligning national HIV legislation with international public health standards. Fiji also removed HIV-specific criminal offences for HIV transmission or exposure on the basis of the decision that, as prosecutions could occur under general criminal laws, there was no need to provide an HIV-specific offence. The reforms were achieved through an amendment to the HIV/AIDS Decree of earlier the same year, which was developed following a review of the Decree and consultations between government and the United Nations Joint Programme on HIV/AIDS.

## India: Annulment of Section 377 of the Penal Code of India

On 2 July 2009, the Delhi High Court annulled a 150-year old law criminalising "carnal intercourse against the order of nature", commonly known as Section 377 of the Indian Penal Code. In the affidavit it put before the judges, India's National AIDS Control Organisation (NACO) contended that Section 377 hampered HIV prevention efforts. The NACO noted that only 6% of men who have sex with men had access to HIV prevention, treatment, care and support services. Many were reluctant to reveal their same sex behaviour due to fear of police extortion, harassment and violence.

In 2011 India's Supreme Court began deliberations to evaluate the High Court's decision to see if and how the annulment could be replicated in other states and across the country. The decision has not been handed down yet.

- situation of vulnerable populations
- Strengthening redress mechanisms for HIV and AIDS related discrimination, hate crimes, etc.

The CHR has embedded the work within its mandate and expanded the scope and coverage of its work in this area through ensuring CHR staff have access to strategic information on HIV-related issues such as the epidemic amongst key populations, genderrelated issues, and reports of HIV-related human rights violations and developing partnerships between he CHR and key affected populations, including support groups of people living with HIV.

## Thailand, Malaysia and Indonesia: Compulsory licenses to increase access to affordable ARVs

Since 2004, and most recently in October 2012, several countries have issued compulsory licenses for the production of antiretroviral drugs, thereby increasing the availability of affordable treatment for their citizens and others in the region.

Limitations and disclaimer:

The information and data in this table refers to countries in Asia, the Pacific and Oceania and is not limited to countries included.

The information and data herein are based on research by the Global Network of People Living with HIV, the International Harm Reduction, UNDP, UNFPA and UNAIDS. They are maintained based on information received by the UNAIDS Asia Pacific RST and the AIDS Data Hub, and were last dated on 16 October 2012 AP RST. For further information regarding the source of any of the information, contact Brianna Harrison, Human Rights Programme Officer AP RST: harrisonb@unaids.org

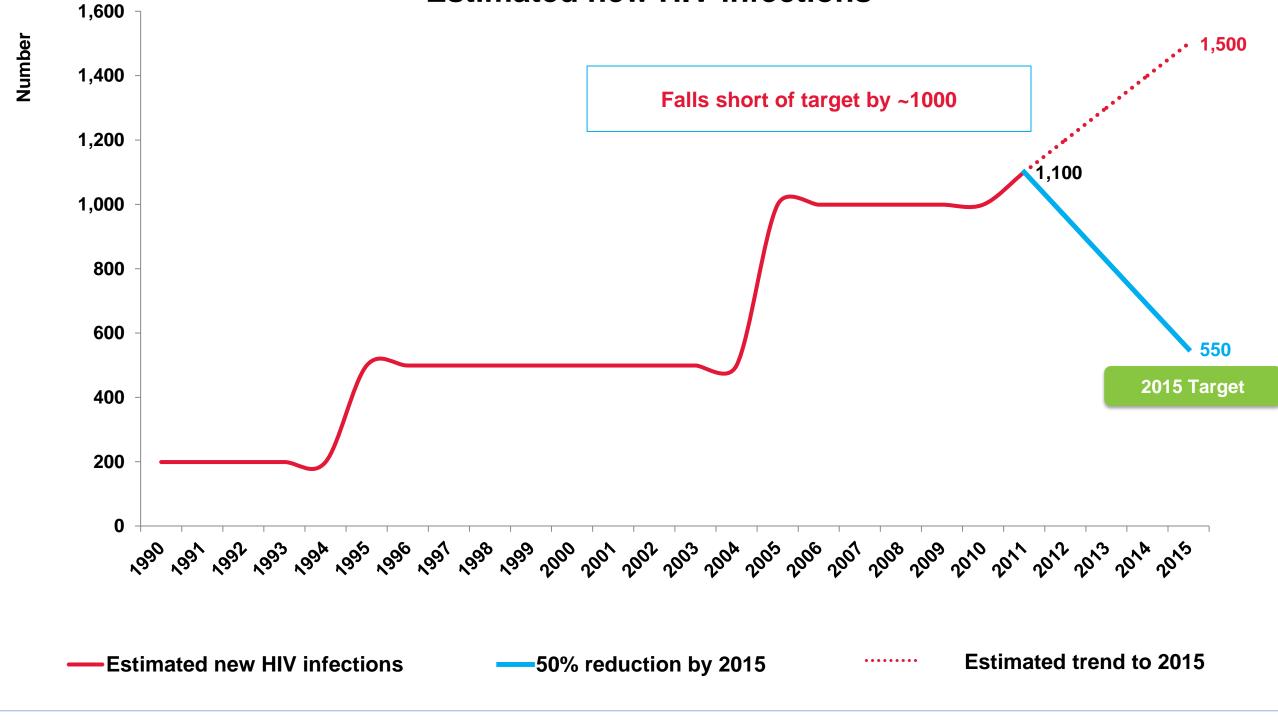
The designations used and the presentation of the material in this document do not imply the expression of any opinion whatsoever on the part of the UNAIDS Secretariat, or any of the United Nations, UN ESCAP, the UNAIDS Secretariat, or any of the

## **COUNTRY POSTERS**



# AFGHANISTAN





#### % 7.1 2006.01 Safe injection -HIV prevalence Condom use at last sex

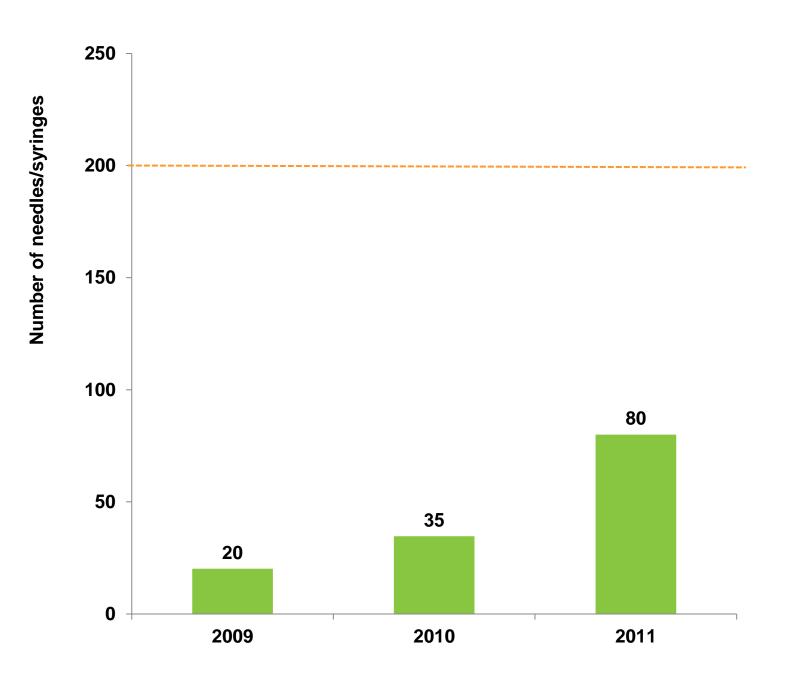
#### People Who Inject Drugs: HIV prevalence and behaviors

(male PWID)

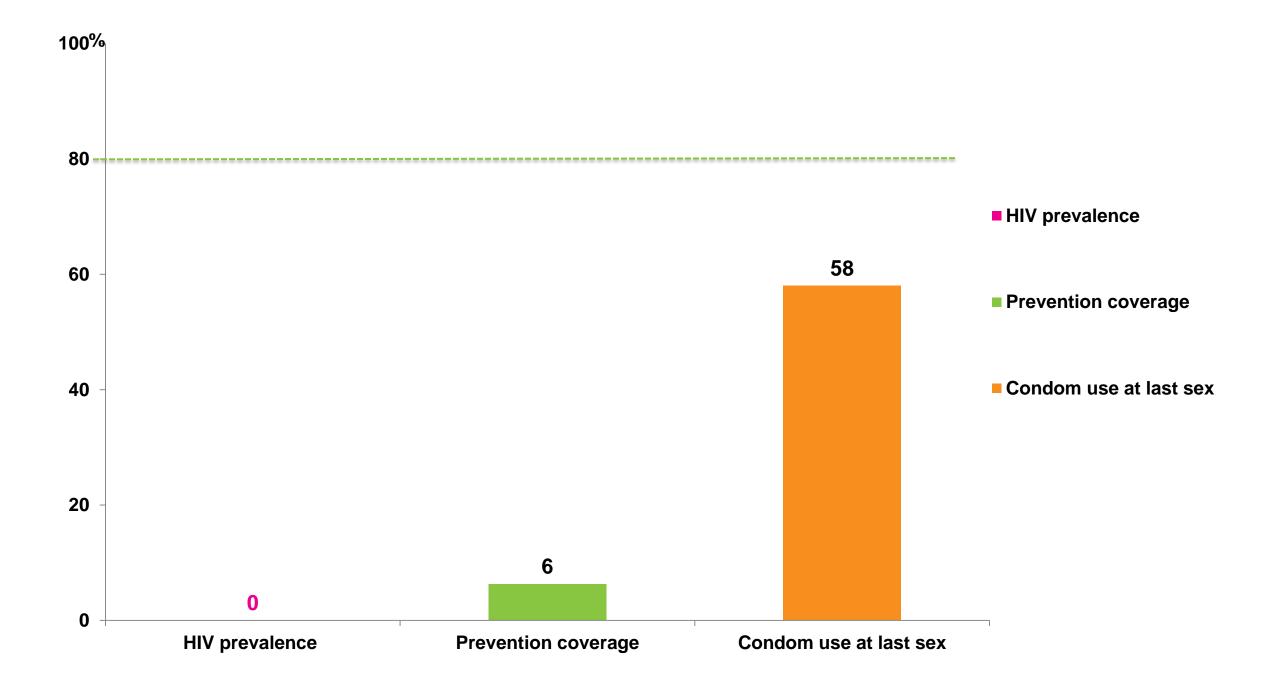
(male PWID)

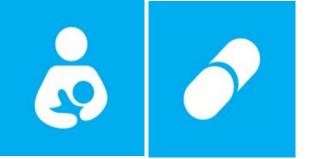
HIV prevalence %

### Number of needle/syringes distributed per person who inject drugs per year



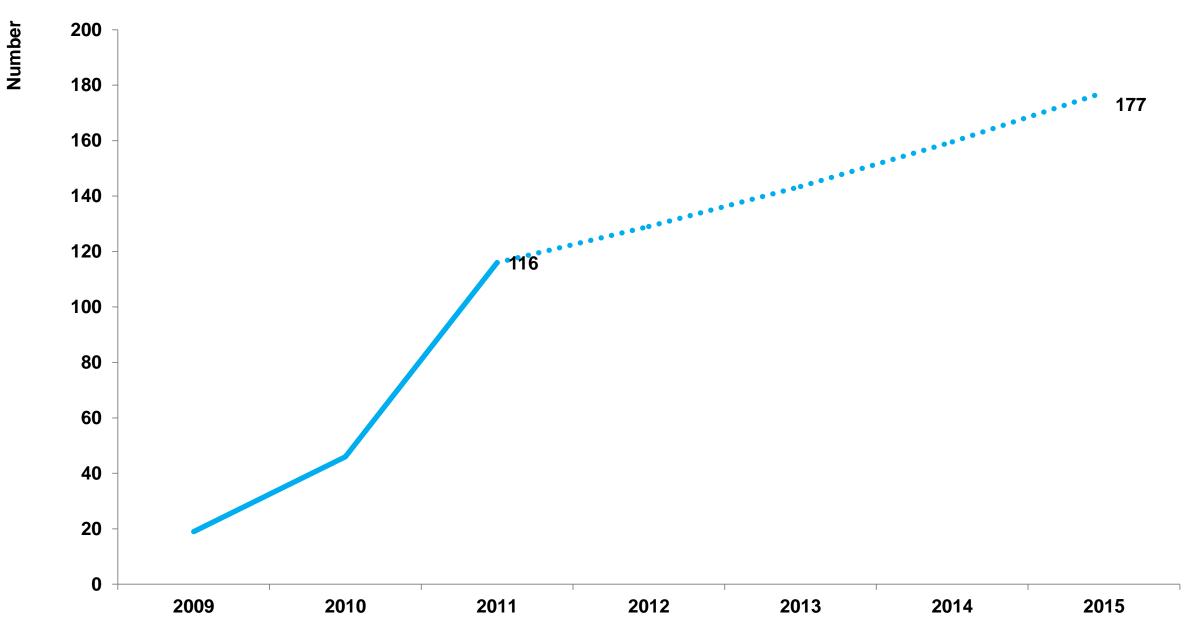
### Female Sex Workers: HIV prevalence, behaviour and prevention coverage, 2009



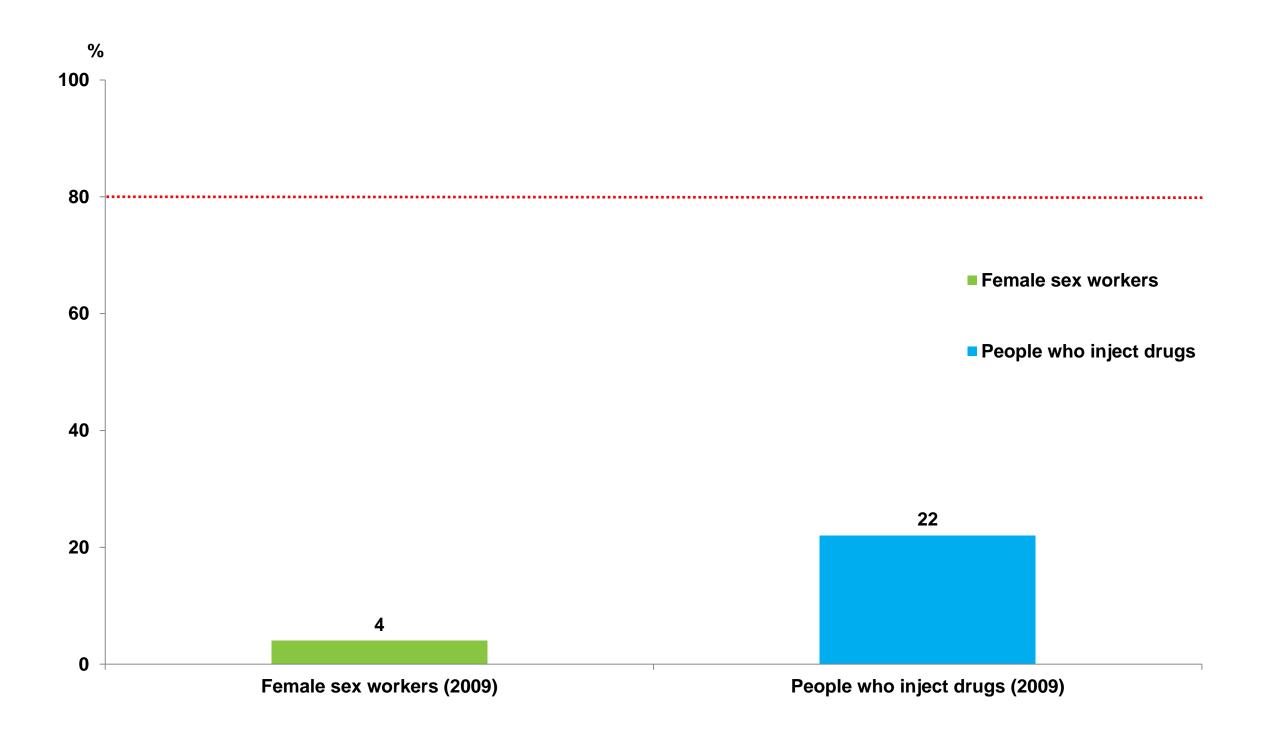


#### **1,600 Adults Eligible for Antiretroviral Therapy in 2011**

Number of people receiving antiretroviral therapy

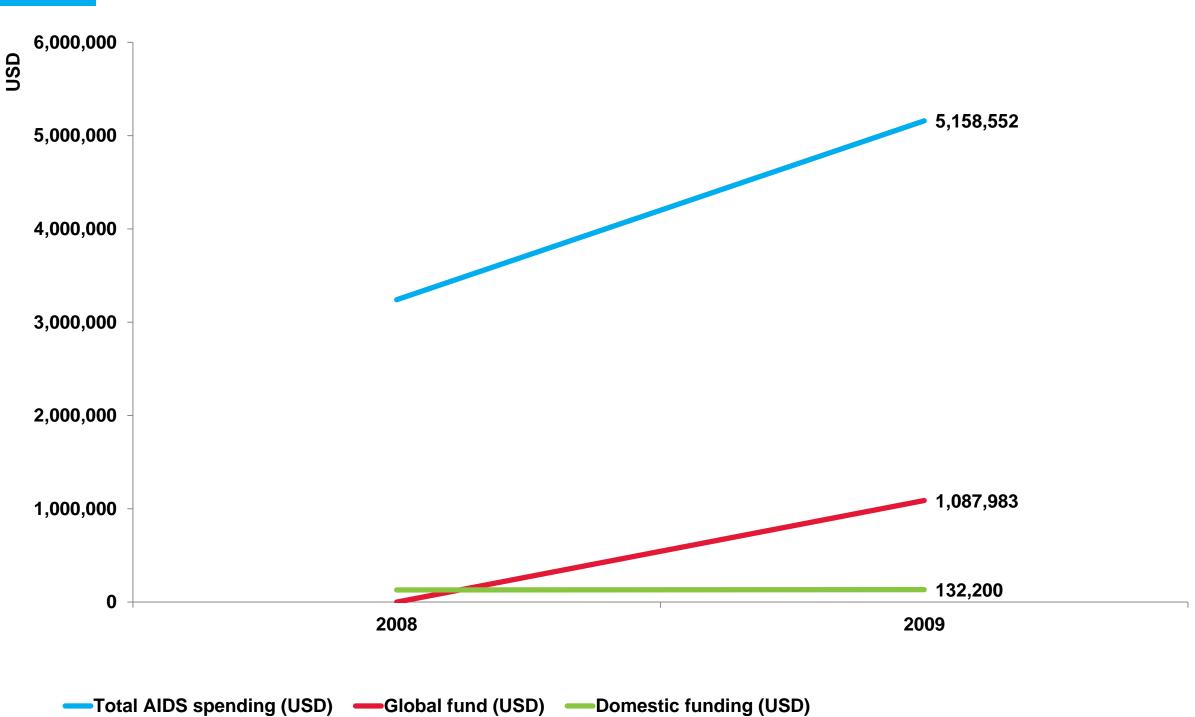


HIV testing coverage among key populations at higher risk, 2009

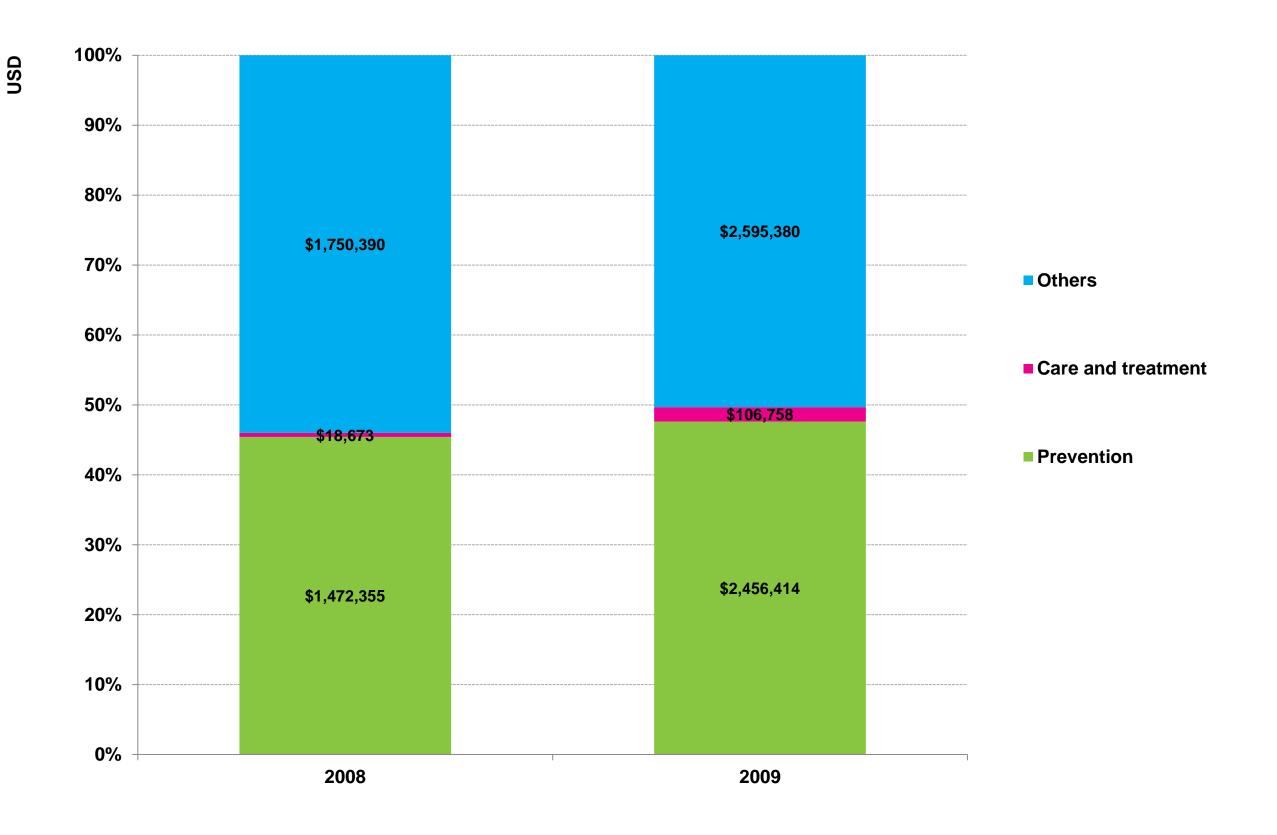




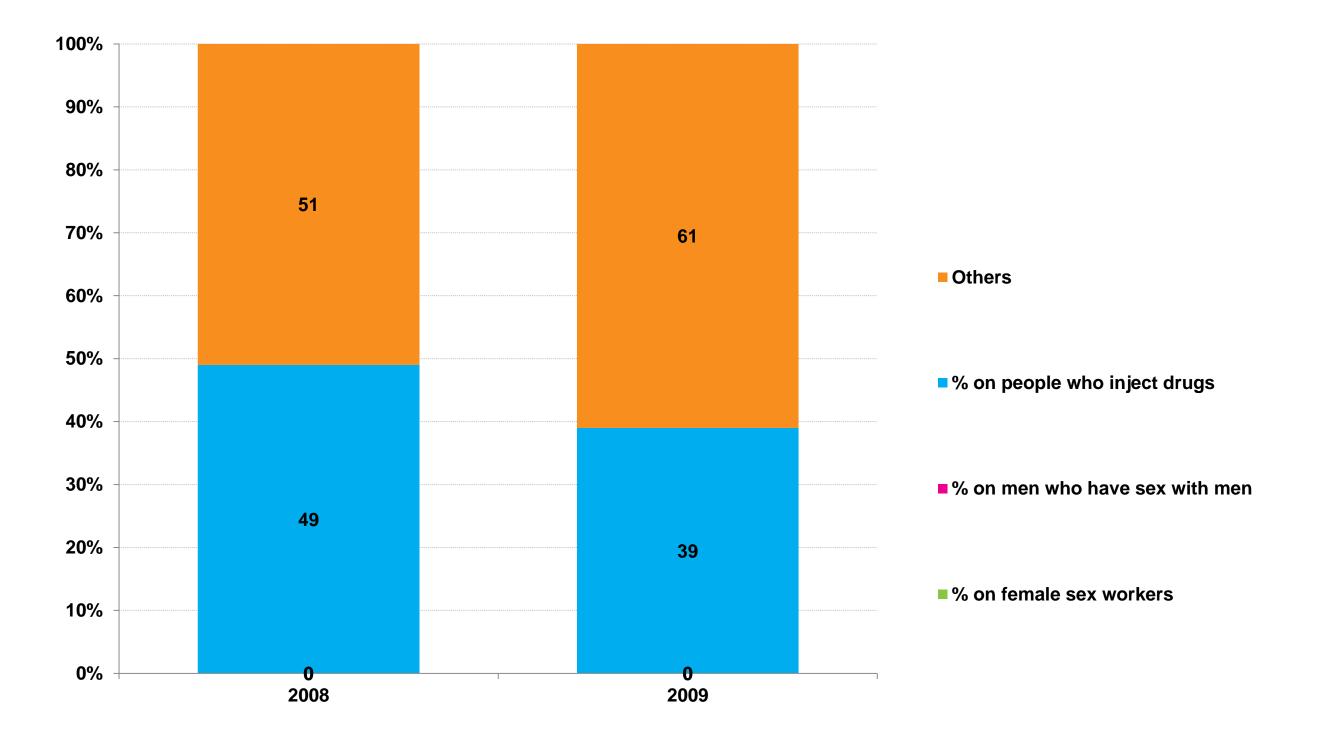
#### **AIDS Spending by Financing Source**



#### AIDS spending by category



### Proportion of total prevention programme spending on key populations at higher risk





## Stigma & discrimination

### Analysis of GARP / NCPI 2012

#### Legal obstacles to HIV response

- Criminalize men who have sex with men and transgender
- Criminalize people who use drugs
- Criminalize sex work

#### **Selected indicators of response**

Access to justice:

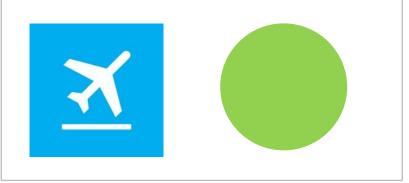
- Legal services (legal aid or other)
- NHRI or other mechanisms

#### Protective laws:

Civil society rating of efforts to implement human rights-related laws and policies: **2009: 5/10** 

### 2011: 3/10

## Travel restrictions



### STIGMA INDEX

Percent of PLHIV respondents denied health services because of HIV status in past 12 months: N/A

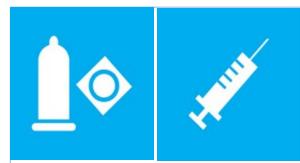
## CHALLENGES

- Fragile country characterized by ongoing conflict, socio-cultural conservatism and a drug economy impacting on HIV dynamics.
- Dearth of strategic evidence on HIV epidemic trends across the country to enable a focused response to achieve HLM targets.
- Dependency on continual external assistance, absence of human resources and institutional base to respond to an emerging HIV epidemic.

## **GAME CHANGERS**

- Transform current external support on AIDS towards generating evidence, institutional capacities and adapted implementation to achieve HLM targets.
- Breakthrough in social taboos around sexuality and HIV through community empowerment.
- Commitment to ongoing UNAIDS support critical to ensure transformation in HIV response

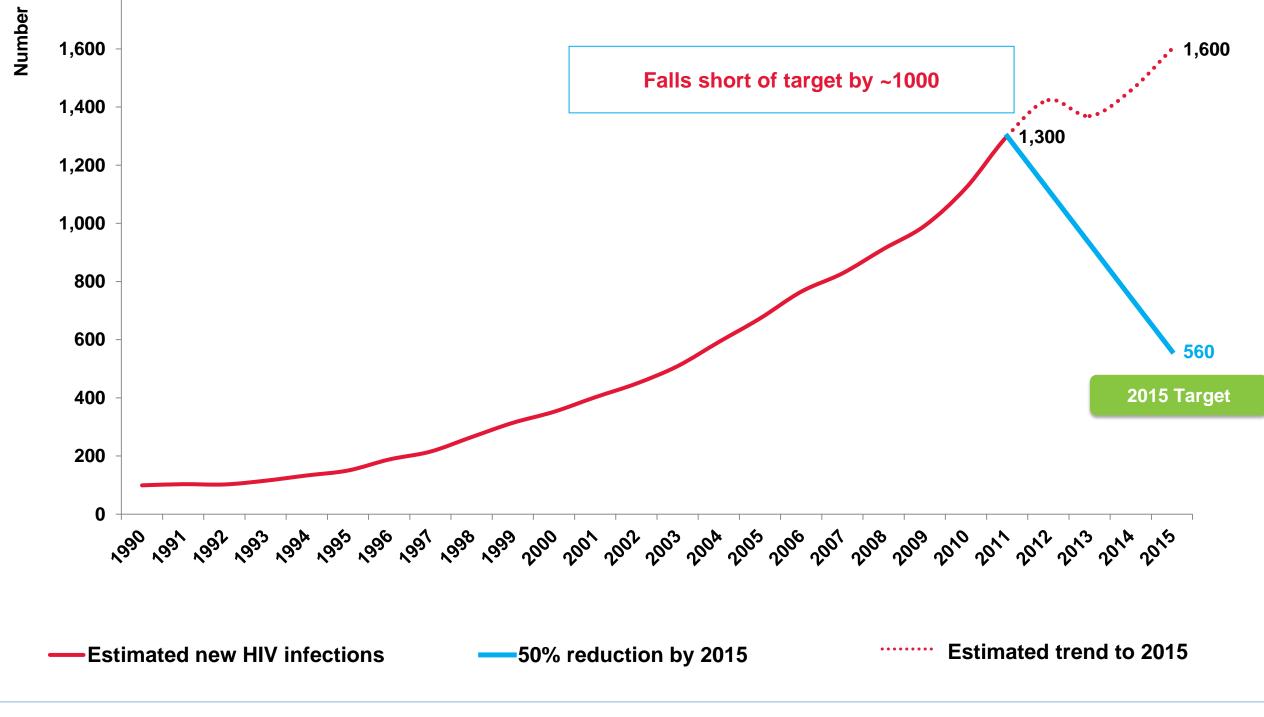
# BANGLADESH



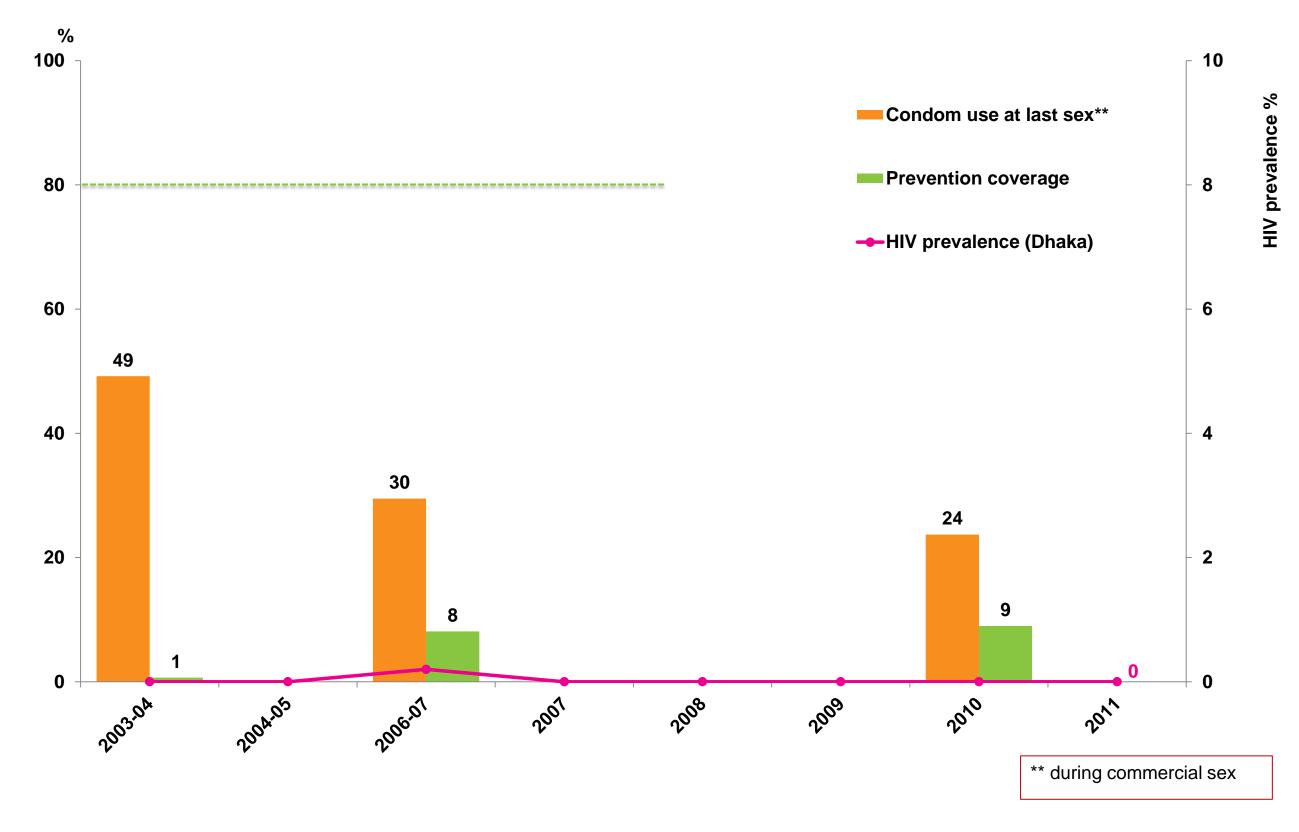
1,800

#### 7,700 People Living With HIV in 2011

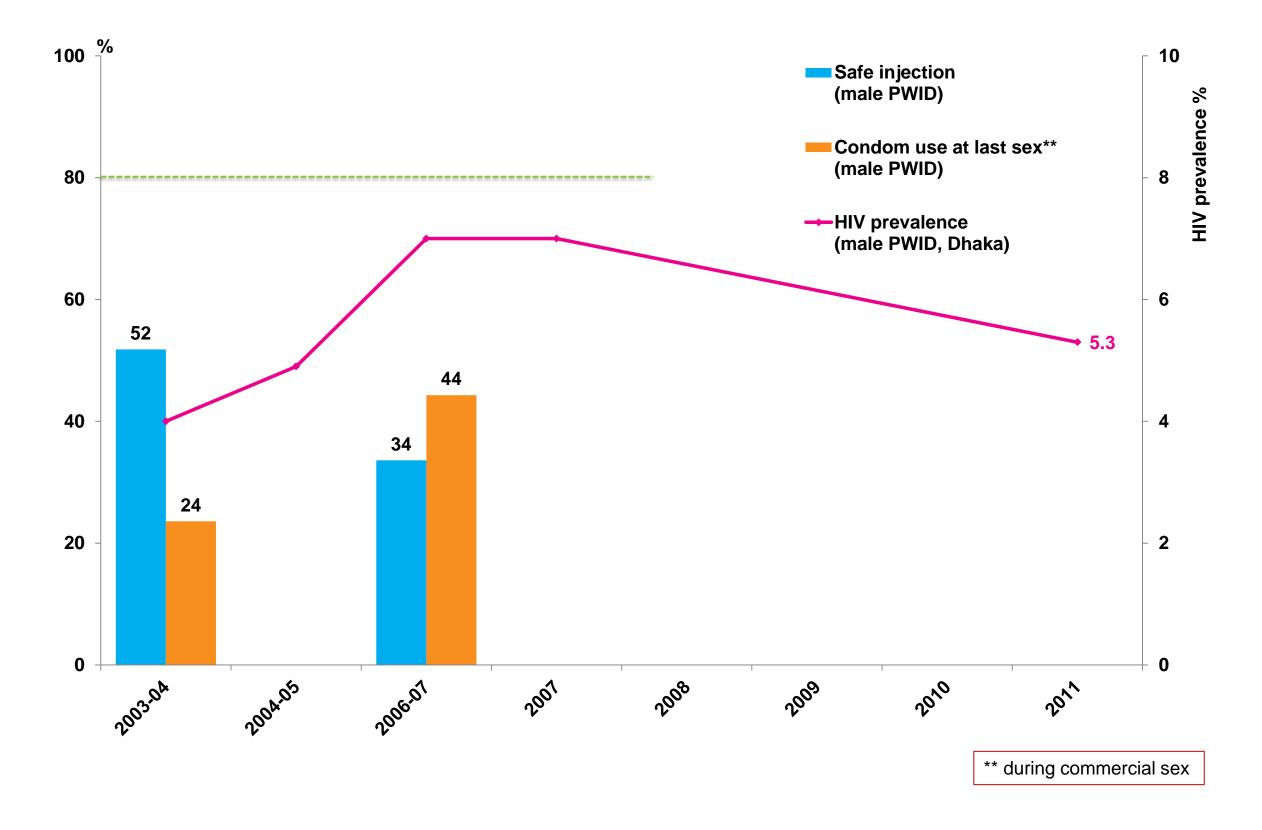
#### **Estimated new HIV infections**



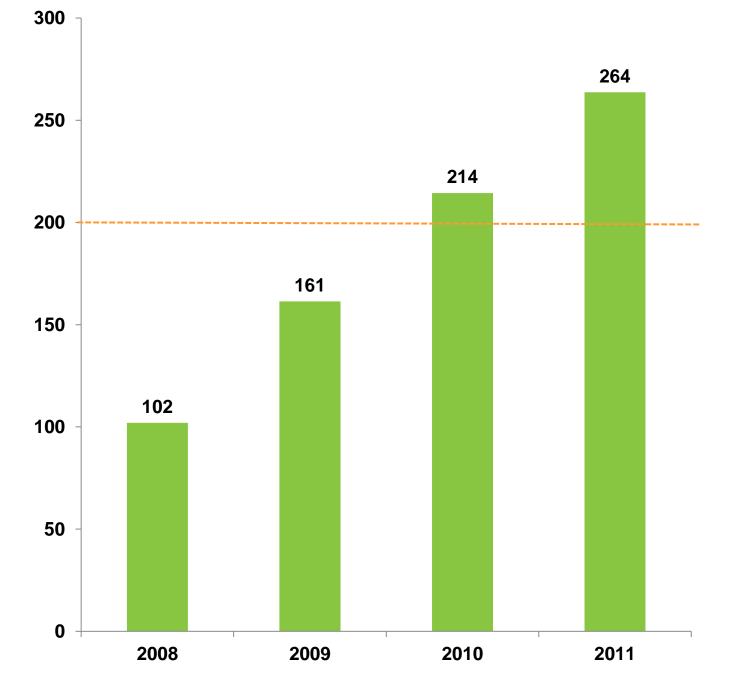
### Men Who Have Sex With Men: HIV prevalence, behaviour and prevention coverage



#### People Who Inject Drugs: HIV prevalence and behaviors

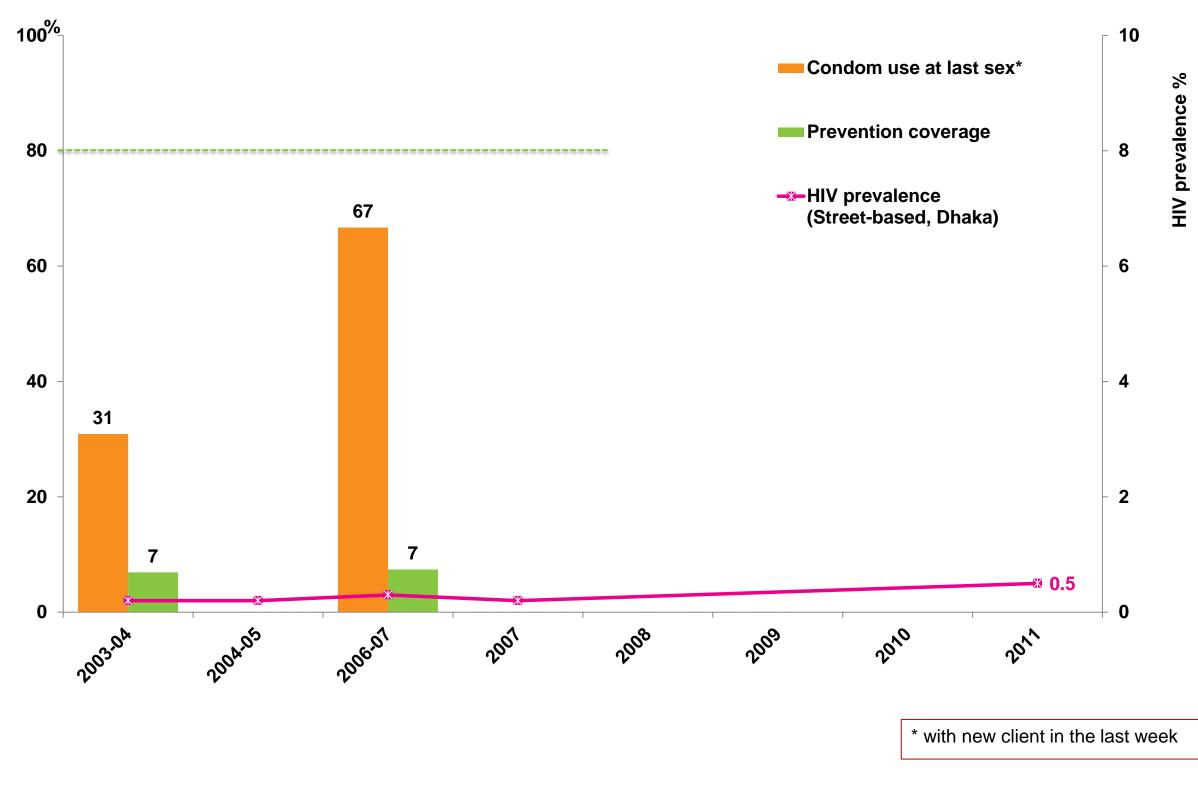


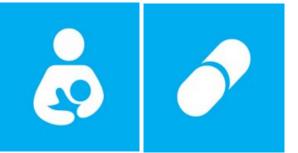
Number of needle/syringes distributed per person who inject drugs per year



Number of needles/syringes

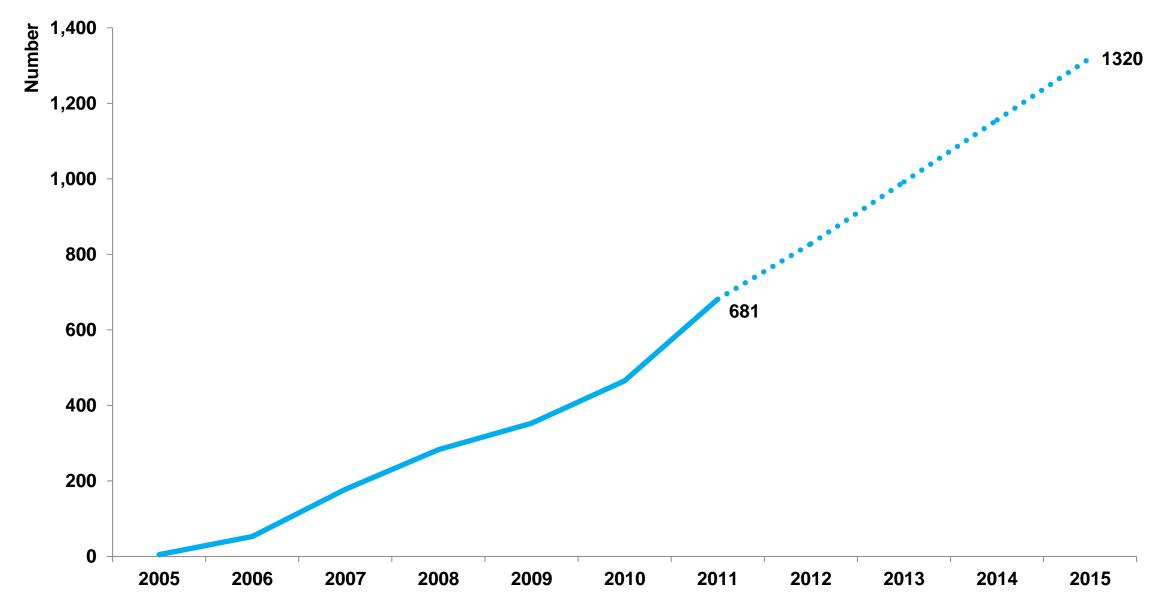
#### Female Sex Workers: HIV prevalence, behaviour and prevention coverage



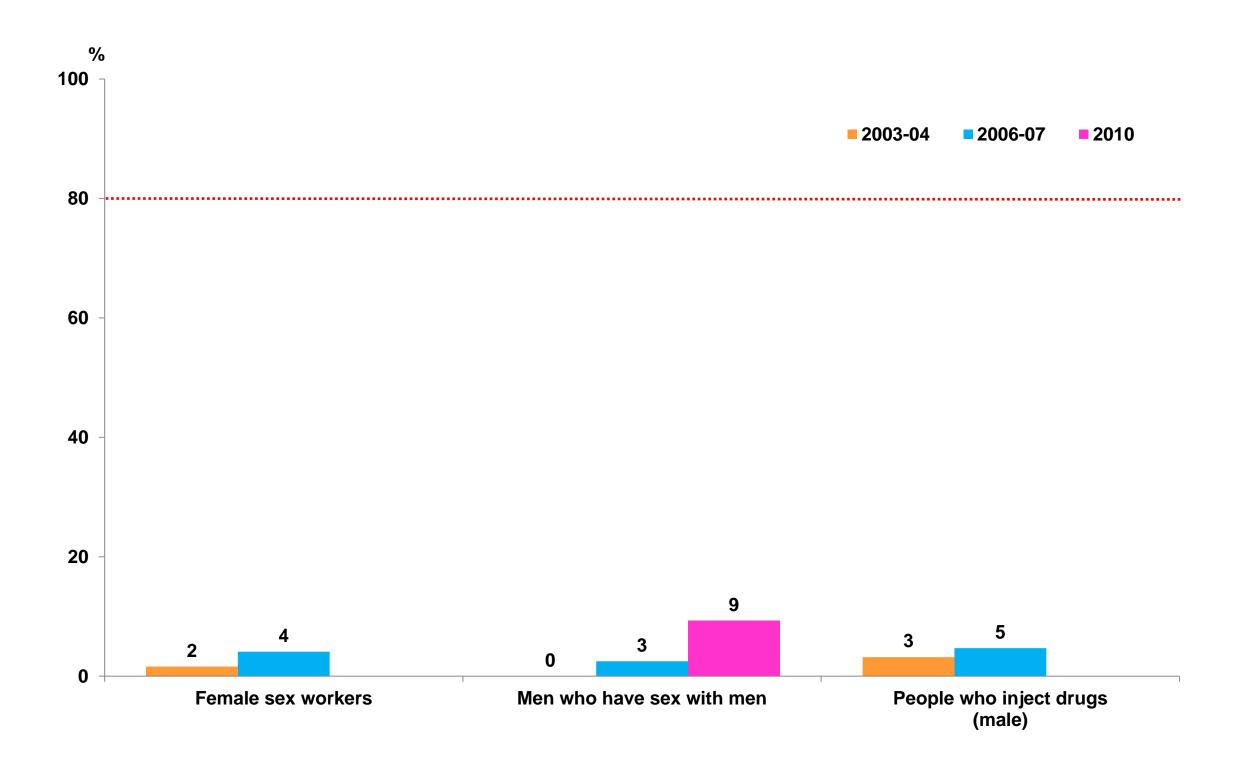


#### 2,200 Adults Eligible for Antiretroviral Therapy in 2011

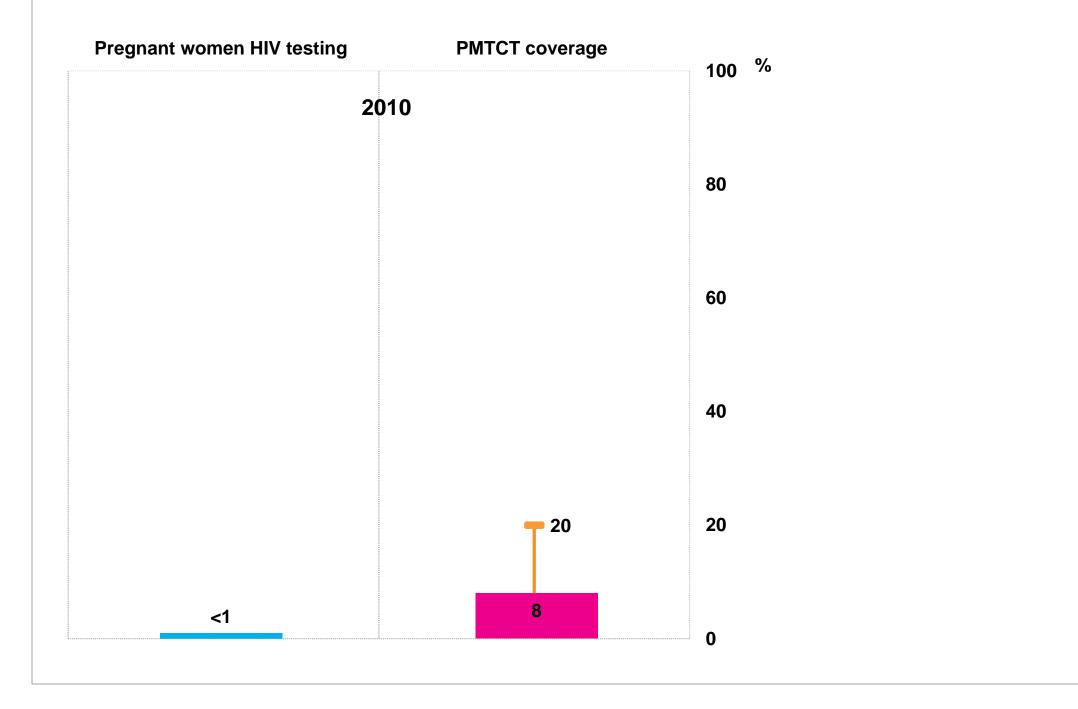
#### Number of people receiving antiretroviral therapy



HIV testing coverage among key populations at higher risk

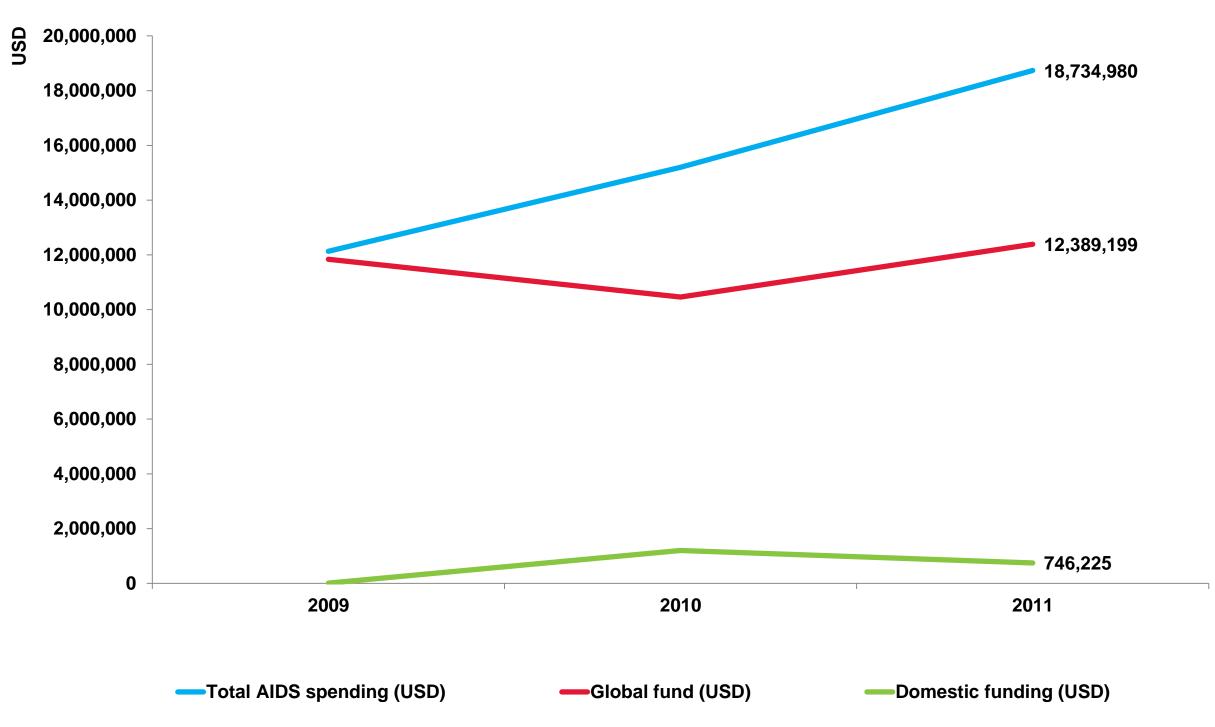


#### <100 Pregnant Women Eligible for Antiretroviral Therapy in 2011

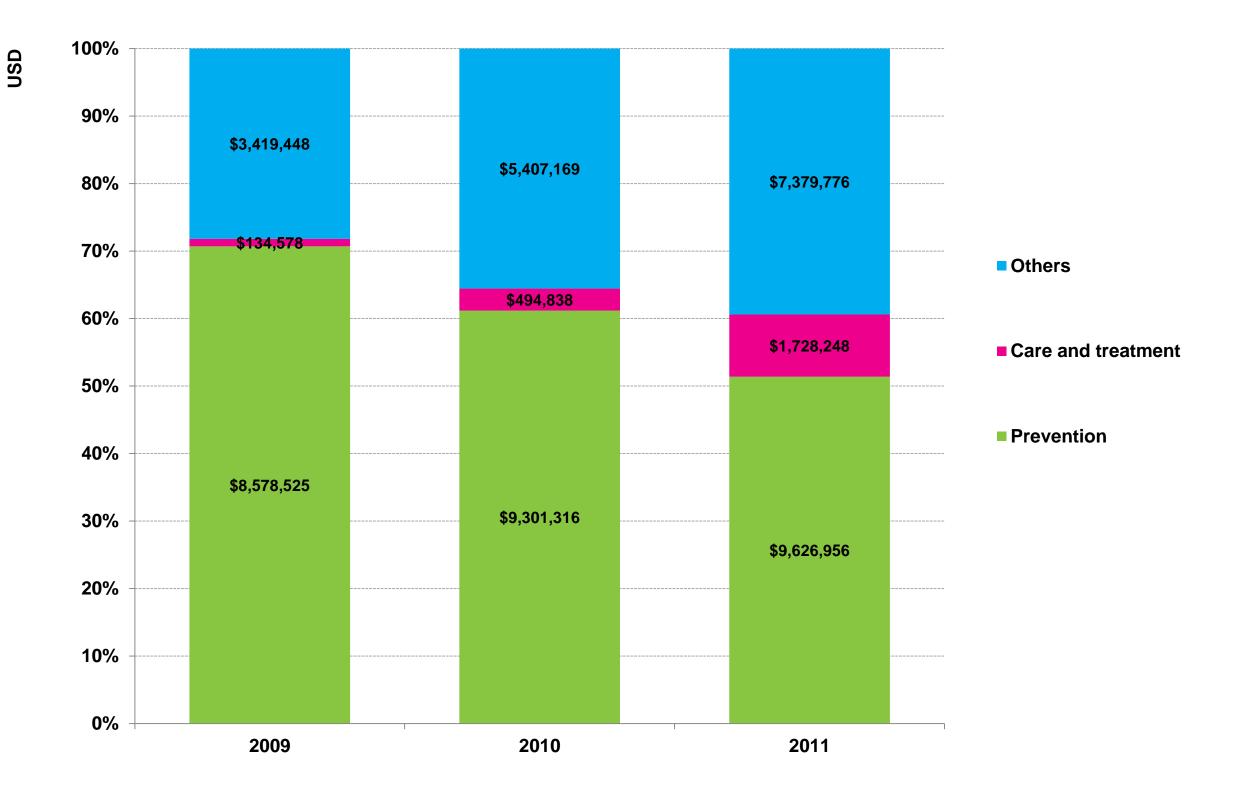




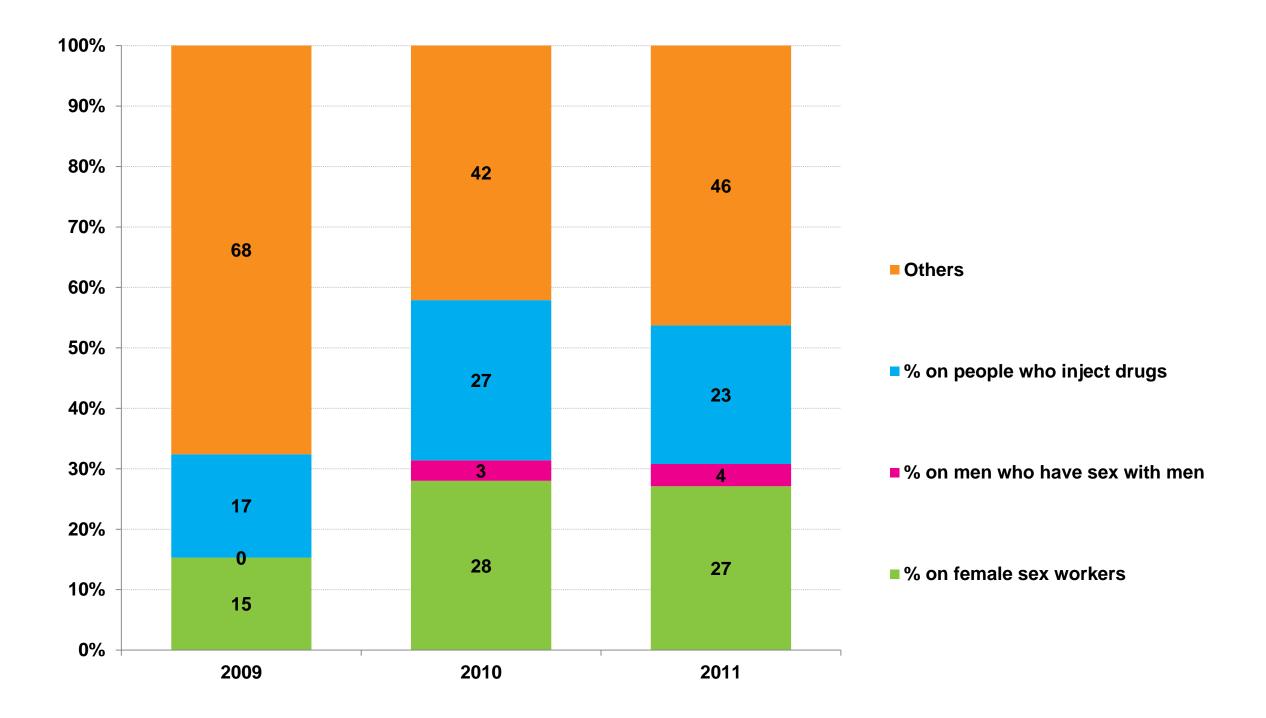
#### **AIDS Spending by Financing Source**



#### AIDS spending by category



### Proportion of total prevention programme spending on key populations at higher risk





# Stigma & discrimination

## Analysis of GARP / NCPI 2012

#### Legal obstacles to HIV response

- Criminalize men who have sex with men and transgender
- Criminalize people who use drugs
- Criminalize sex work
- Public order offences, against sex workers

#### Selected indicators of response

Access to justice:

- Legal services (legal aid or other)
- NHRI or other mechanisms

#### Protective laws:

Civil society rating of efforts to implement human rights-related laws and policies: 2009: 3/10



# Travel restrictions



# STIGMA INDEX

Percent of PLHIV respondents denied health services because of HIV status in past 12 months: 4%

2011: 3/10



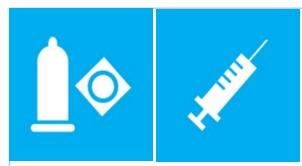
# CHALLENGES

- Half of the funds for HIV response (\$80m) stuck for 3 years in government: government capacity needs to be strengthened; new resources needed for emerging key populations
- Lack of new evidence, especially behavioral information
- Conflicting and punitive laws on key affected populations impeding response

# **GAME CHANGERS**

- Highest government and UN leadership through new UNJSP on AIDS to release HIV funds immediately; growing political commitment to build sustainable government capacity; new resources being mobilized
- New systematic M&E and strategic information being put in place
- Key human rights and legal institutions, parliamentarians, Civil Society recently mobilized and momentum gained to address punitive laws

# CAMBODIA

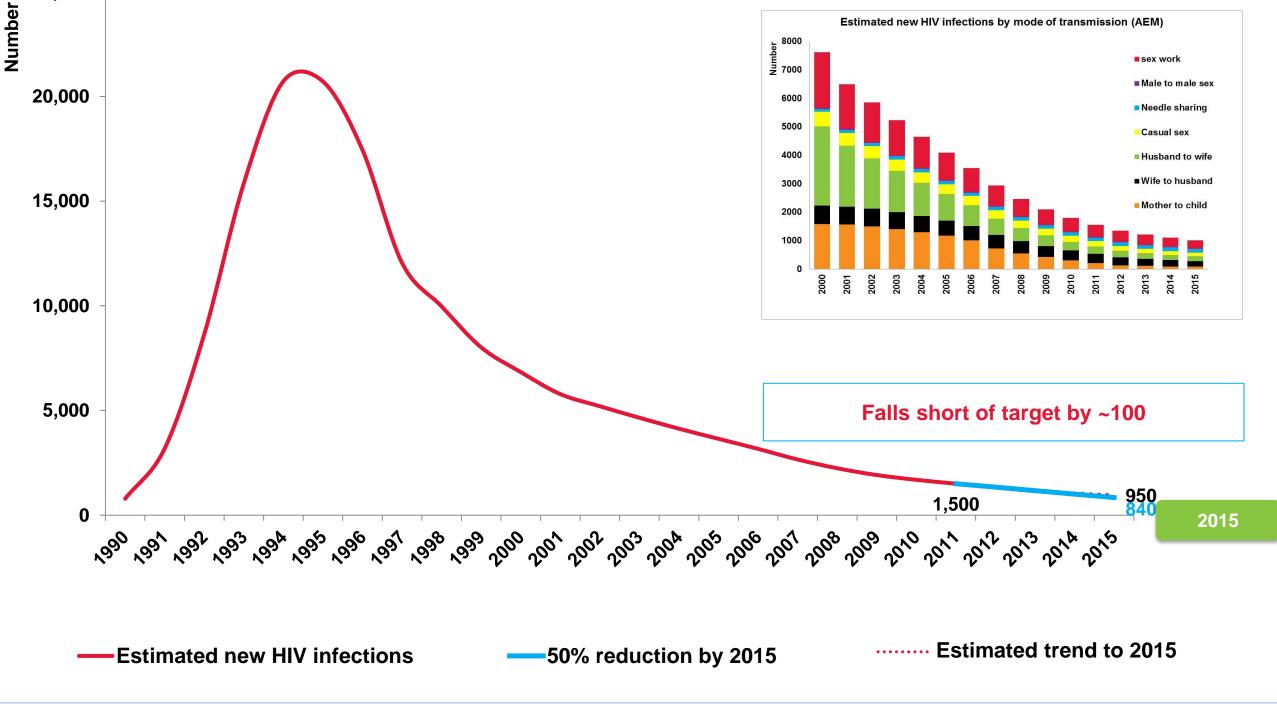


25,000

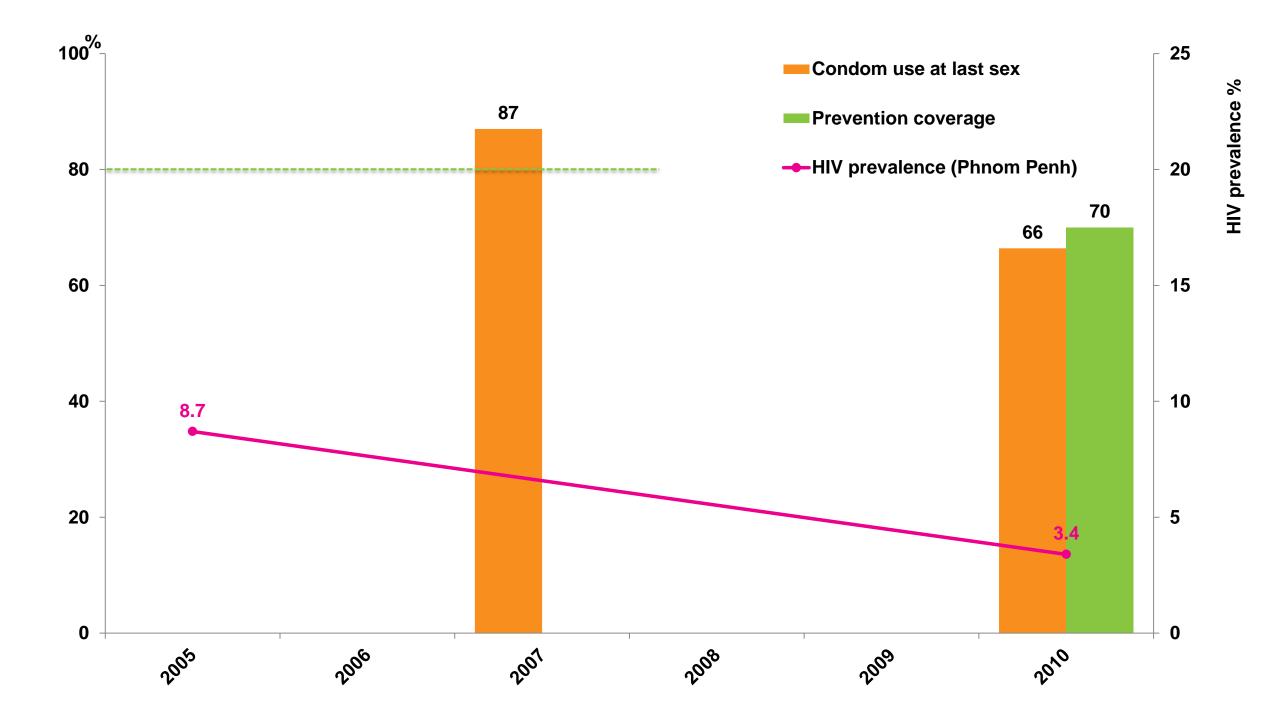
#### 83,000 People Living With HIV in 2011

#### Estimated new HIV infections by mode of transmission (AEM) Number 7000 Number 6000 5000 4000 3000

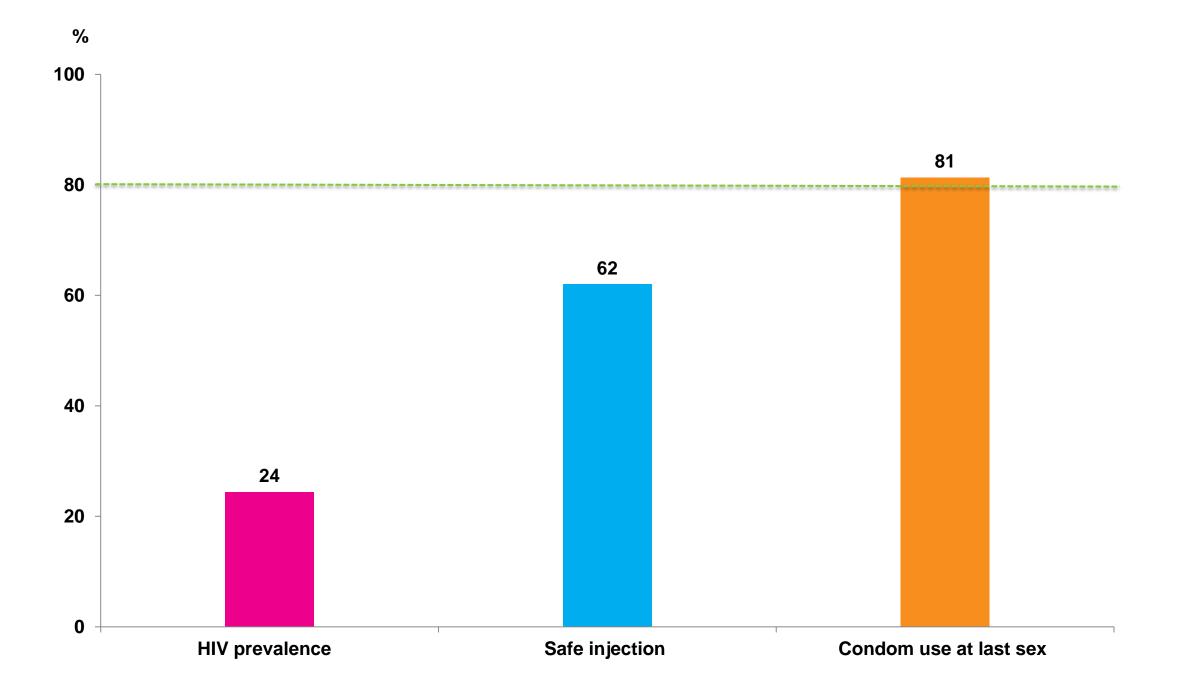
#### **Estimated new HIV infections**



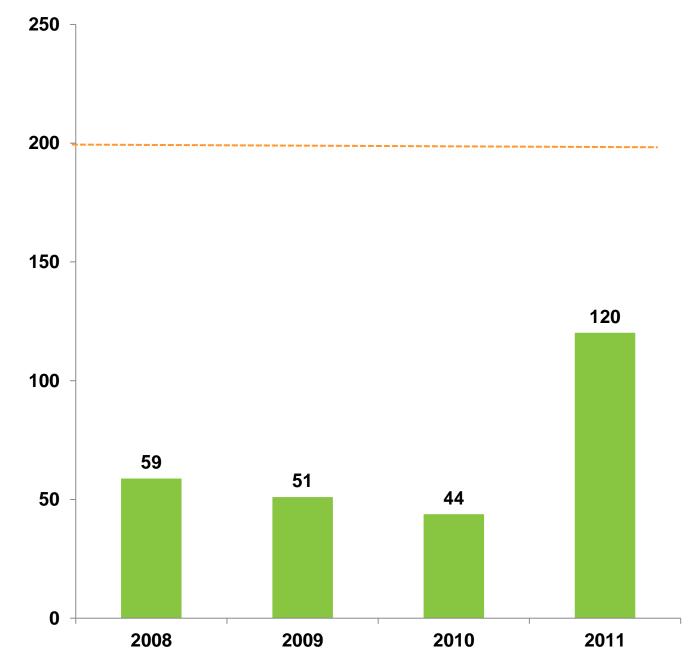
# Men Who Have Sex With Men: HIV prevalence, behaviour and prevention coverage



#### People Who Inject Drugs: HIV prevalence and behaviors, 2007



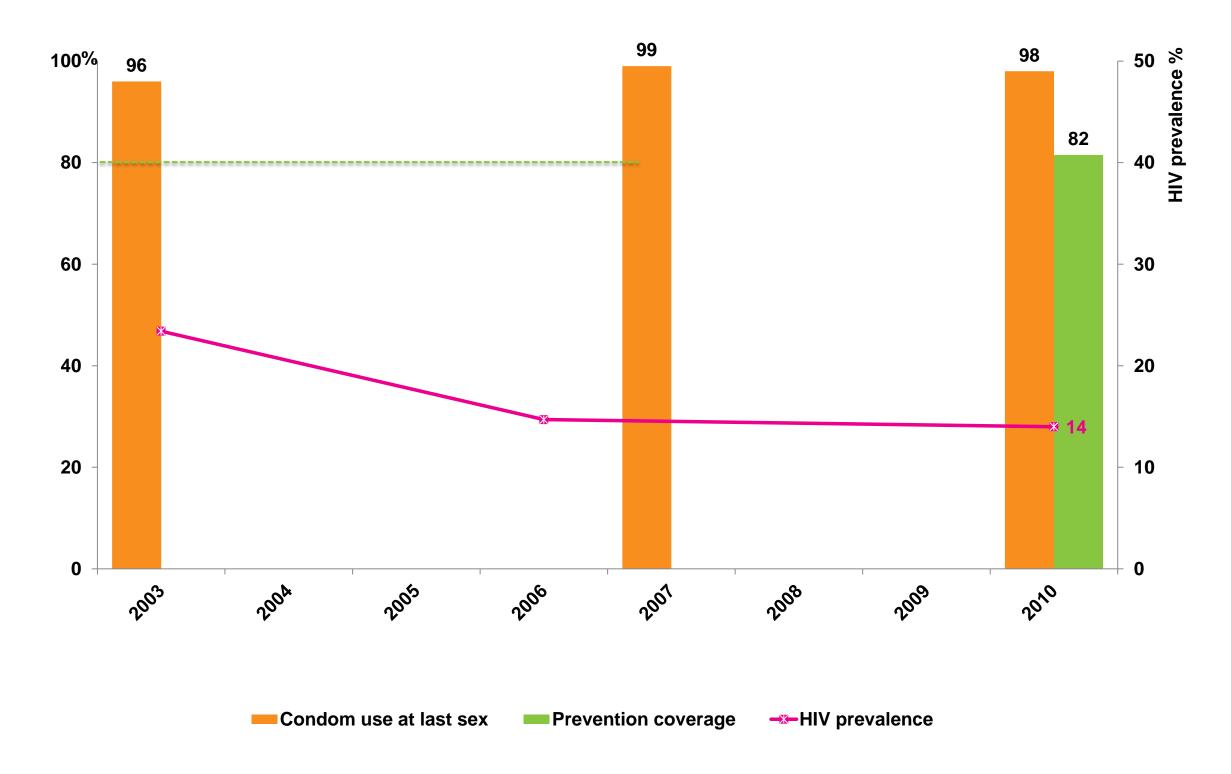
Number of needle/syringes distributed per person who inject drugs per year

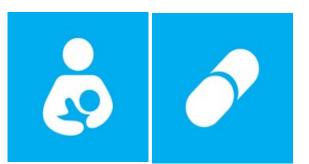


Number of needles/syringes

Cambodia

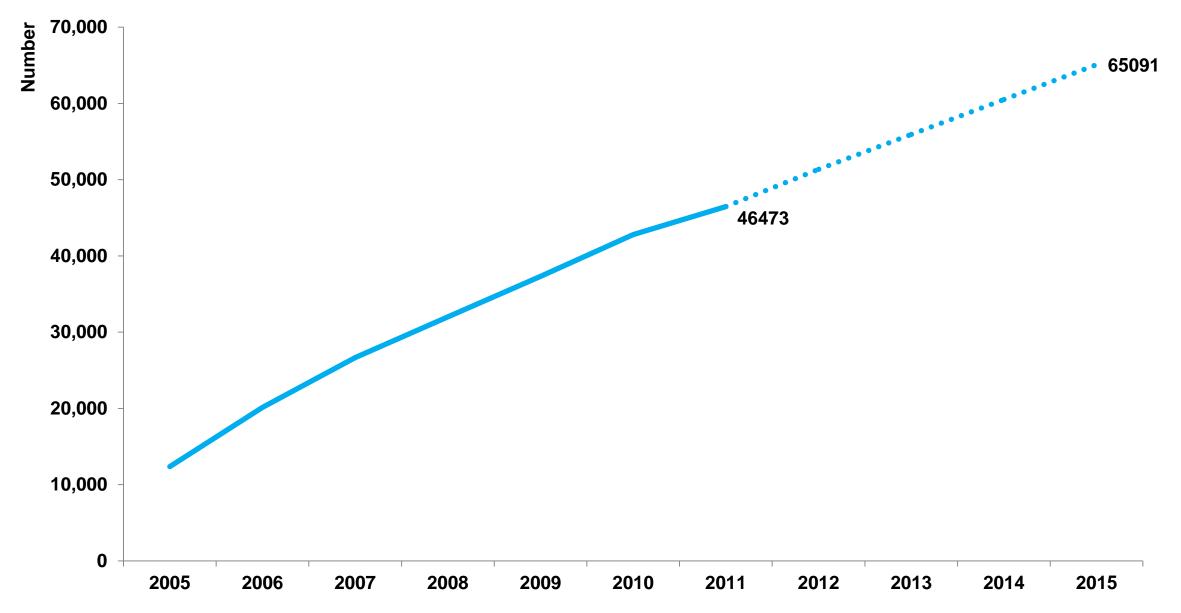
# Female Sex Workers: HIV prevalence, behaviour and prevention coverage



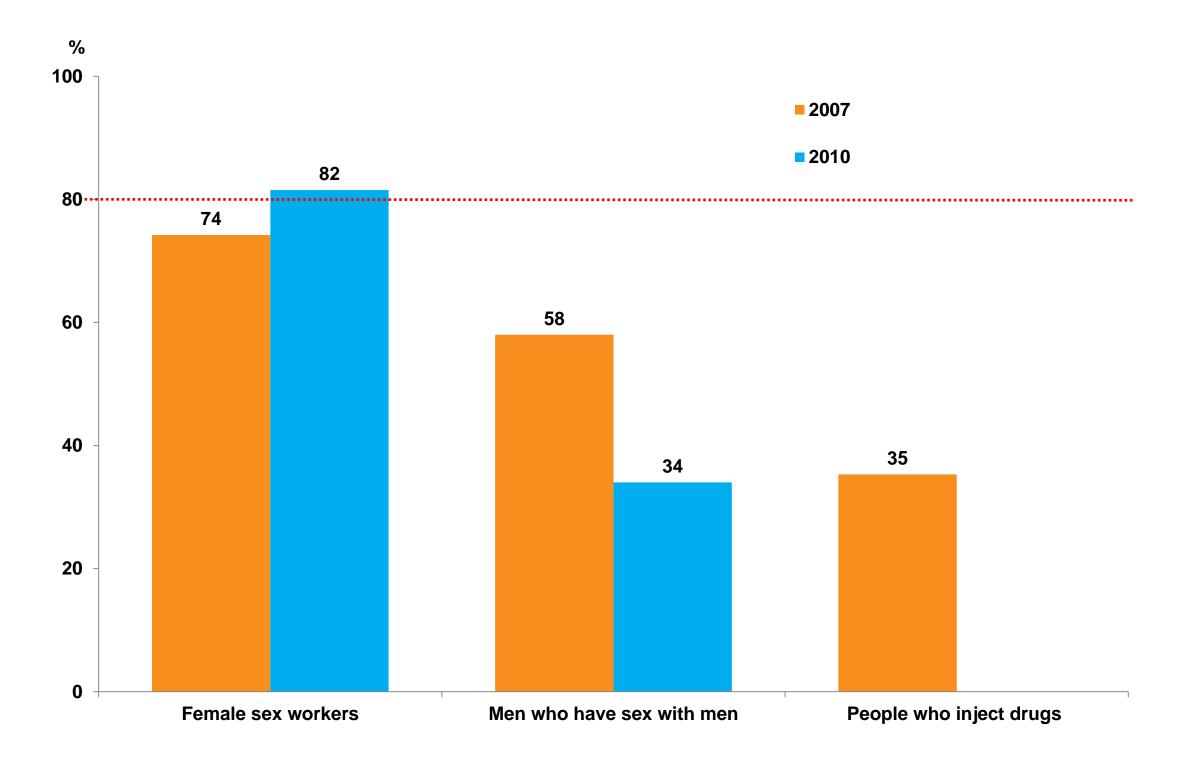


#### 53,000 Adults Eligible for Antiretroviral Therapy in 2011

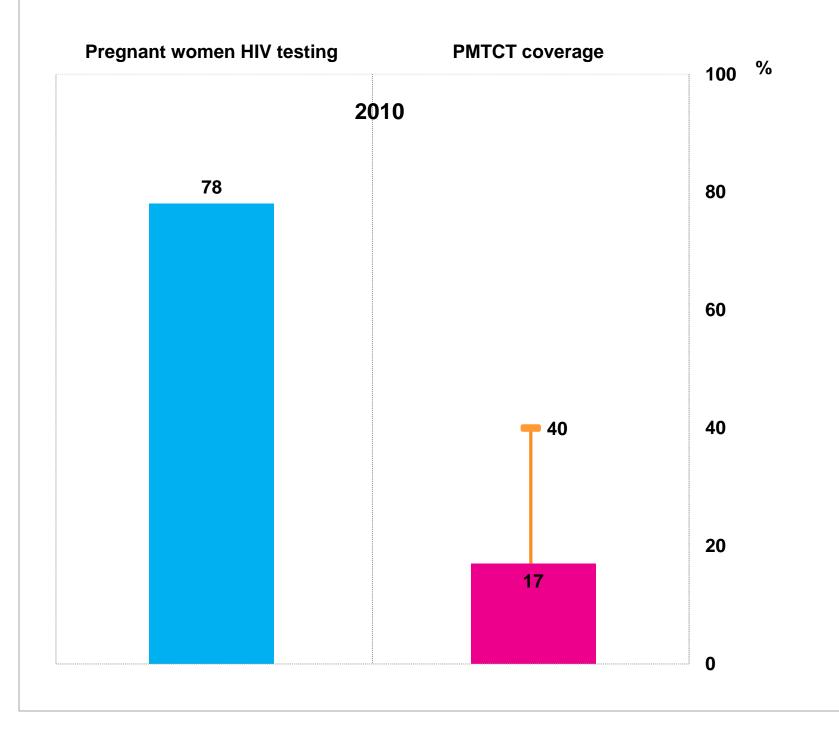
#### Number of people receiving antiretroviral therapy



#### HIV testing coverage among key populations at higher risk

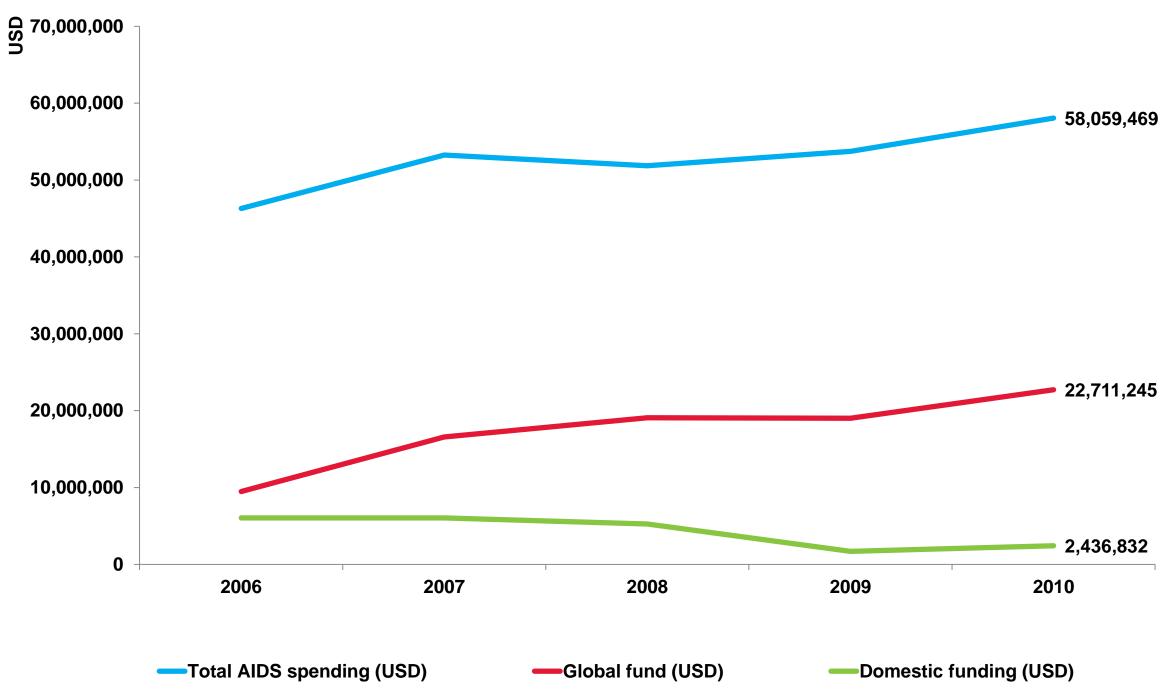


#### 690 Pregnant Women Eligible for Antiretroviral Therapy in 2011

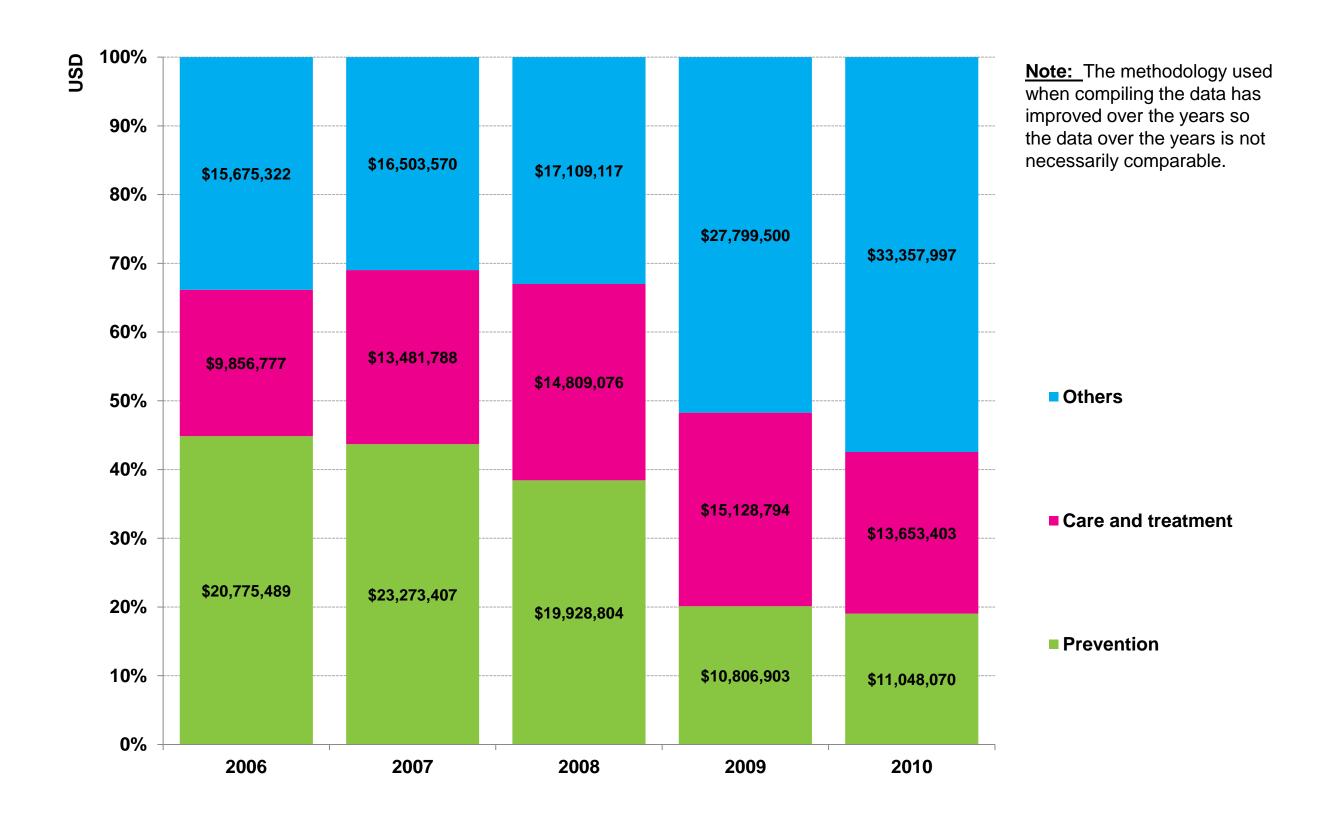




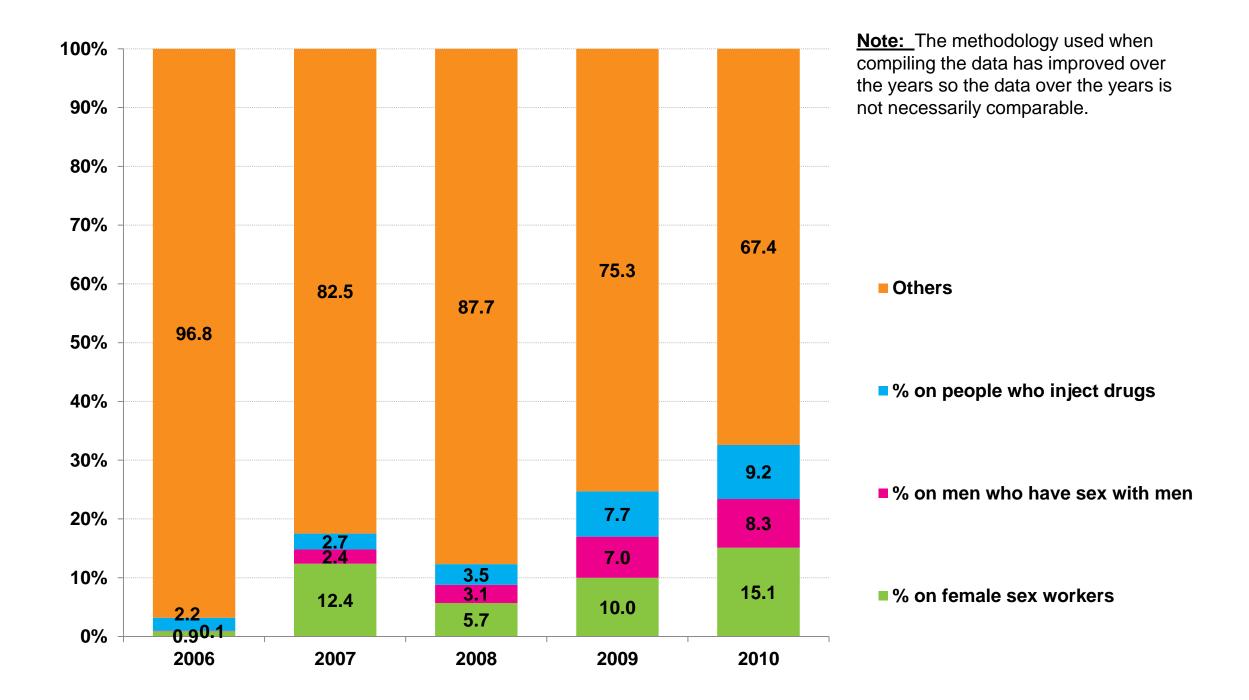
#### **AIDS Spending by Financing Source**



#### AIDS spending by category



# Proportion of total prevention programme spending on key populations at higher risk





# Stigma & discrimination

## Analysis of GARP / NCPI 2012

#### Legal obstacles to HIV response

- Criminalize people who use drugs
- Criminalize sex work (and anti-trafficking law)
- Compulsory detention of people who use drugs and sex workers

#### **Selected indicators of response**

Access to justice:

- Legal services (legal aid or other)
  - NHRI or other mechanisms

#### Protective laws:

Civil society rating of efforts to implement human rights-related laws and policies: **2009: 5/10** 



# Travel restrictions

# STIGMA INDEX

Percent of PLHIV respondents denied health services because of HIV status in past 12 months: 4%

2011: 8/10

Cambodia

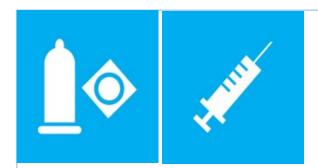
- Lower, mostly external and non sustainable financial resources
- HIV response governance costly and not adapted to concentrated epidemic
- Slow progress in leadership & institutional capacity of community networks

# **GAME CHANGERS**

- Cambodia 3.0 strategy to eliminate new HIV infections by 2020
- Police Community Partnership Initiative to improve enabling environment for key pop

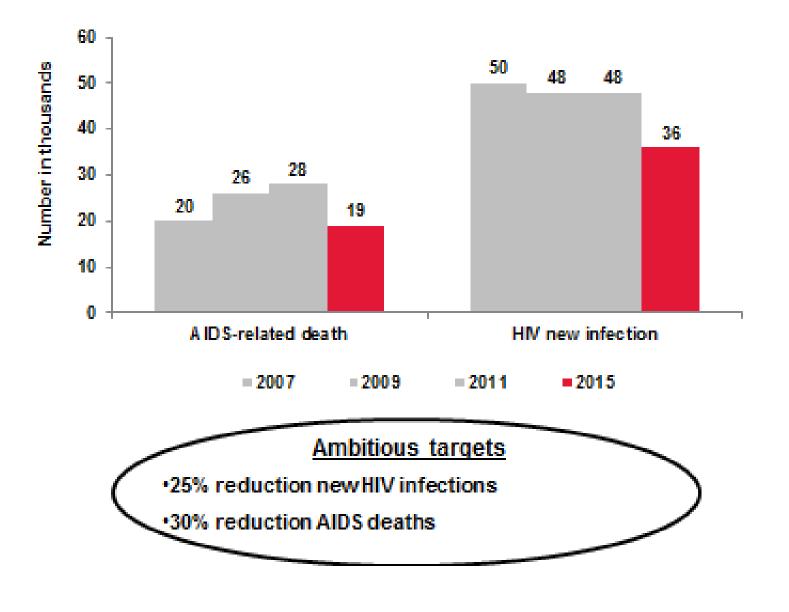
# Prioritized investment efforts

# CHINA

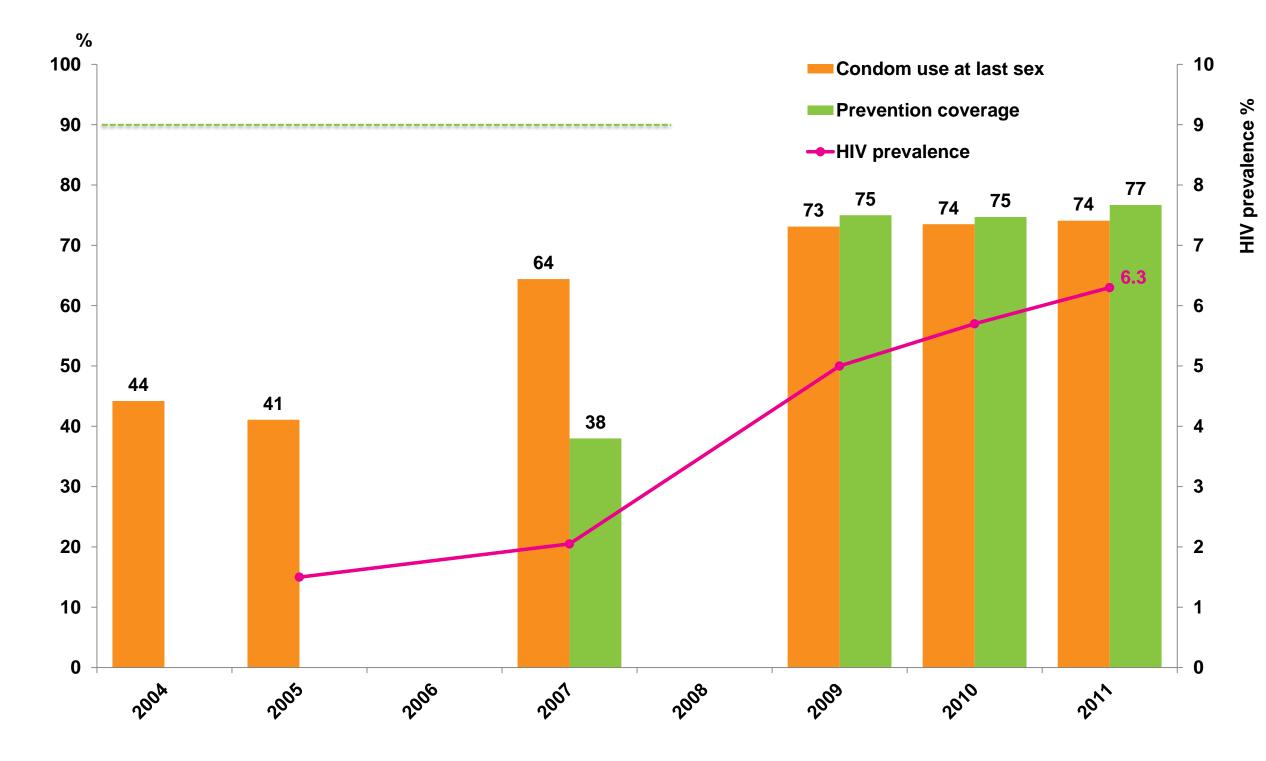


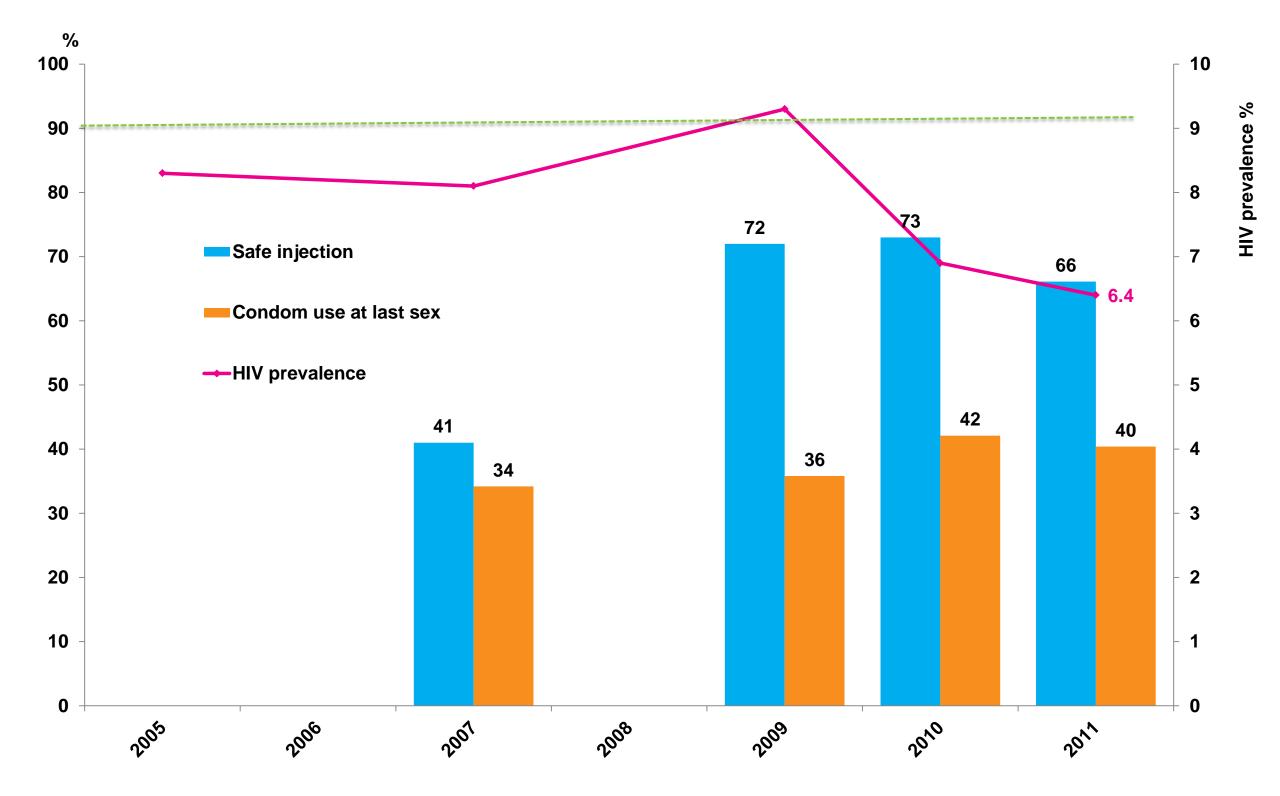
#### 780,000 People Living With HIV in 2011

# AIDS-related deaths and new HIV infections in China (2007-2011), and 2015 targets



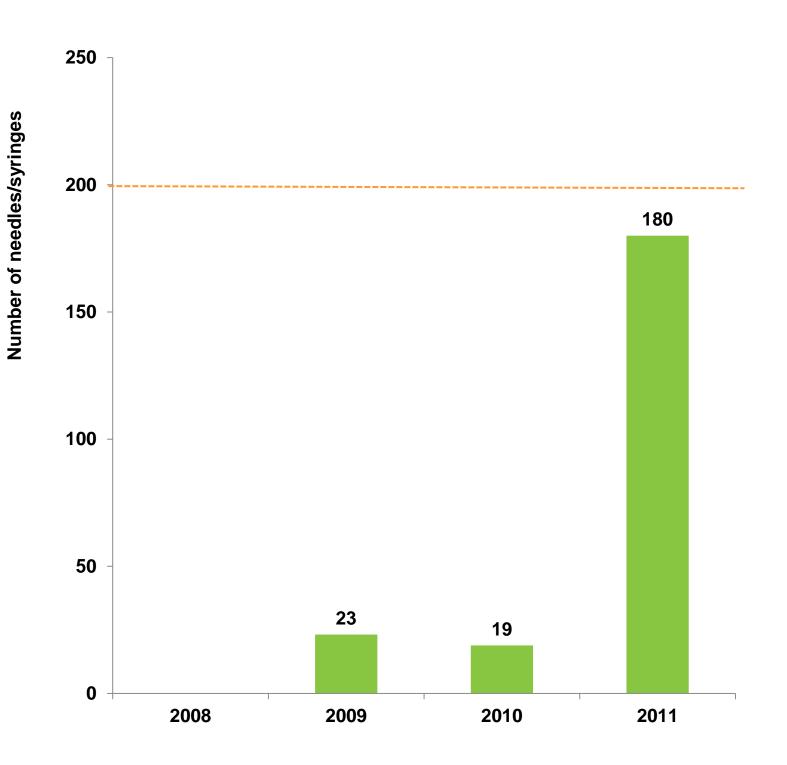
# Men Who Have Sex With Men: HIV prevalence, behaviour and prevention coverage



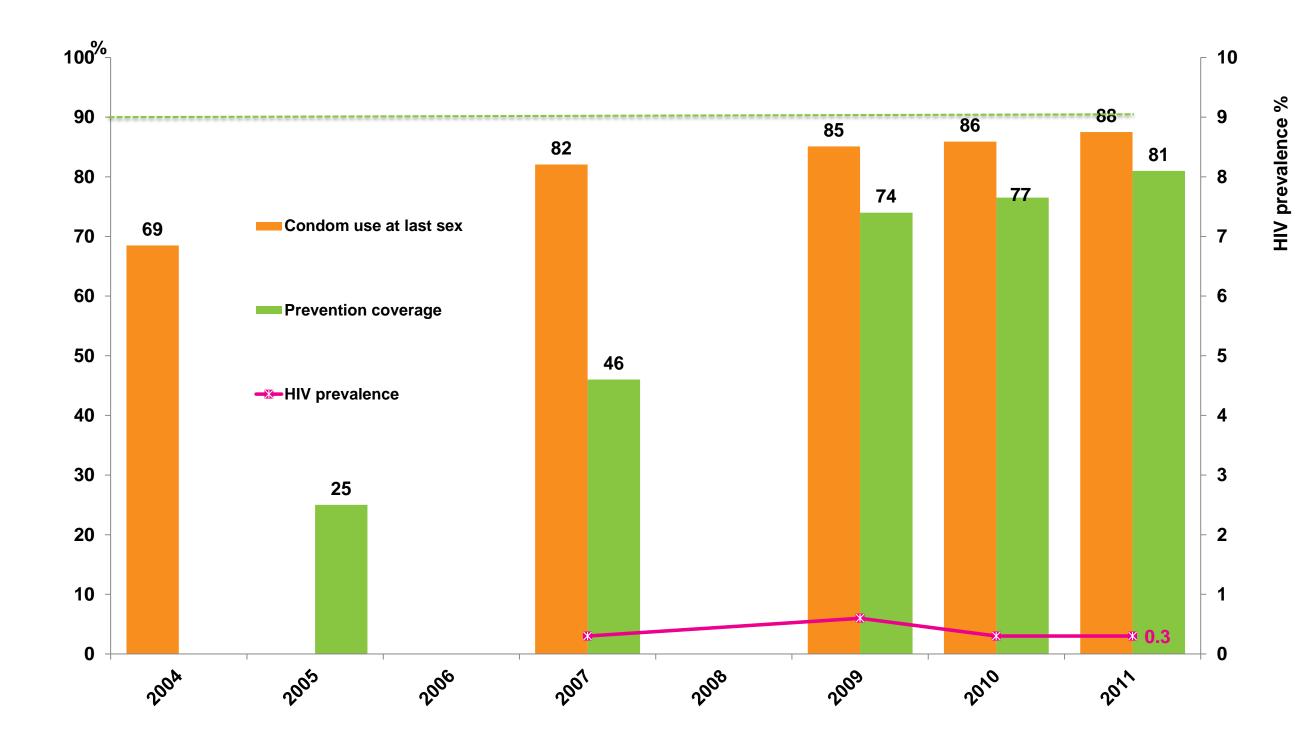


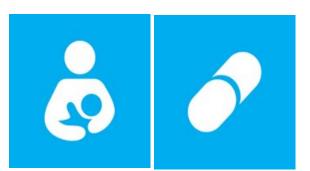
#### **People Who Inject Drugs: HIV prevalence and behaviors**

Number of needle/syringes distributed per person who inject drugs per year



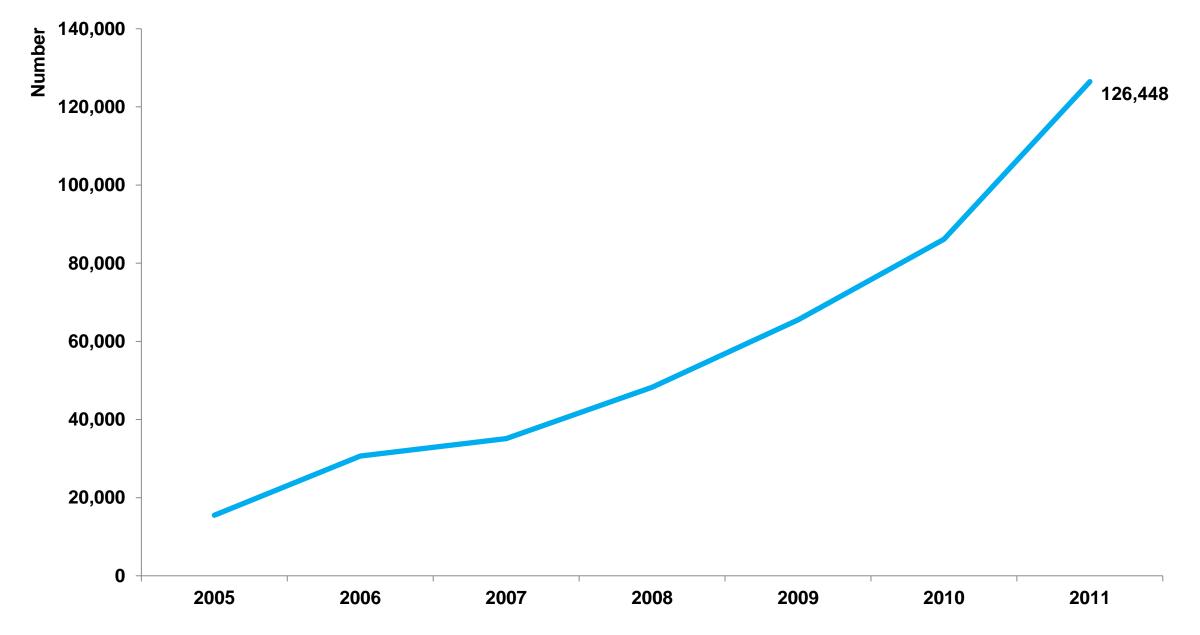
# Female Sex Workers: HIV prevalence, behaviour and prevention coverage



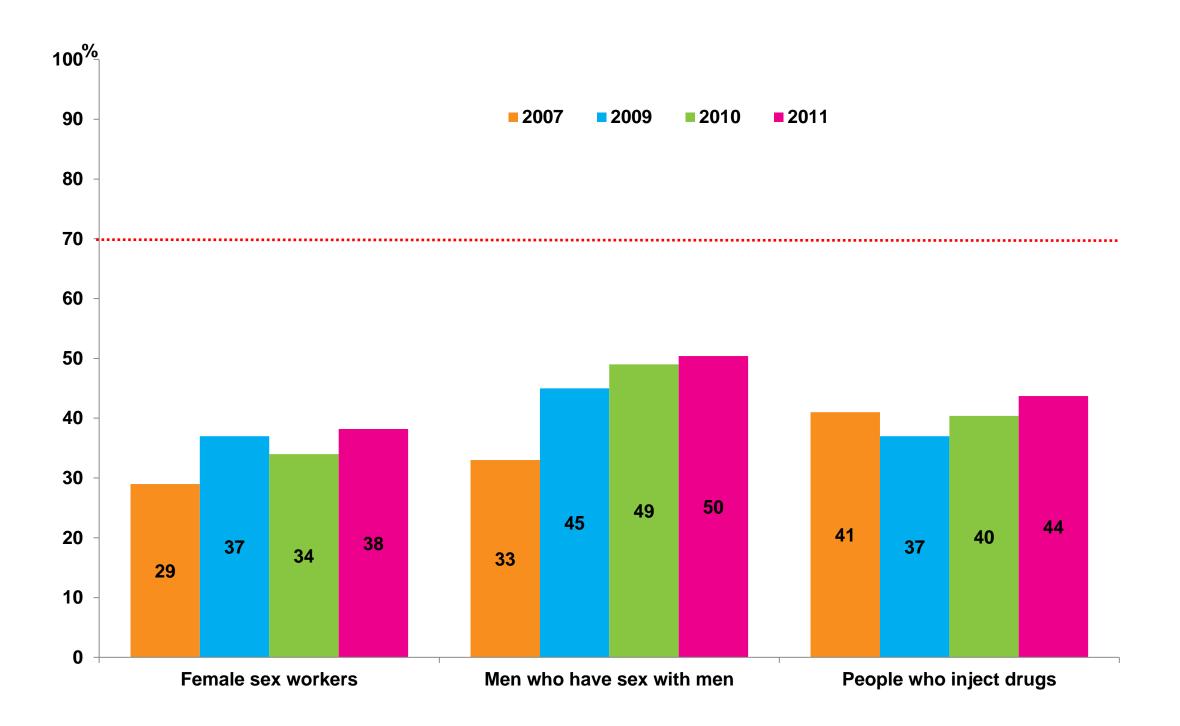


#### 298,000 Adults Eligible for Antiretroviral Therapy in 2011

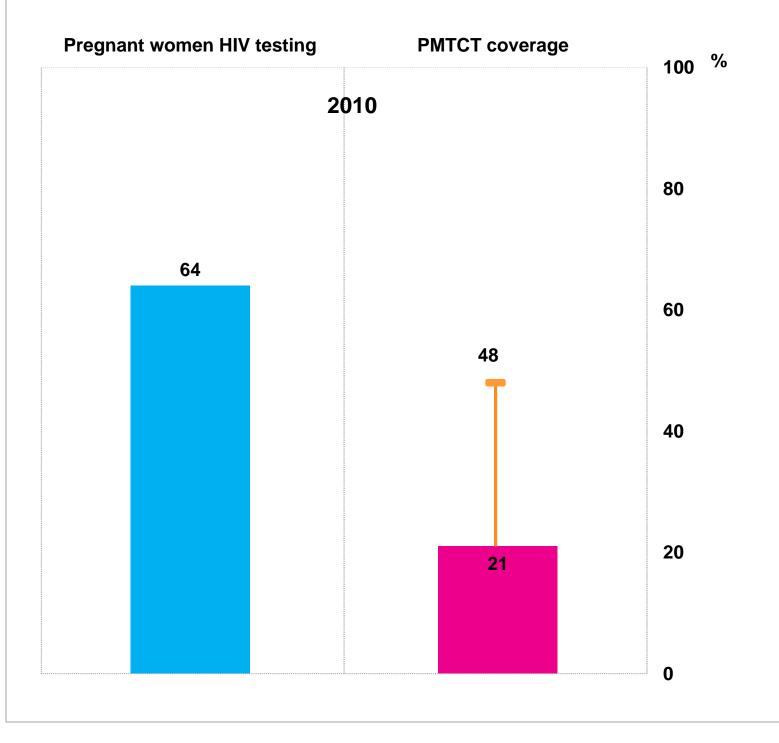
#### Number of people receiving antiretroviral therapy



#### HIV testing coverage among key populations at higher risk

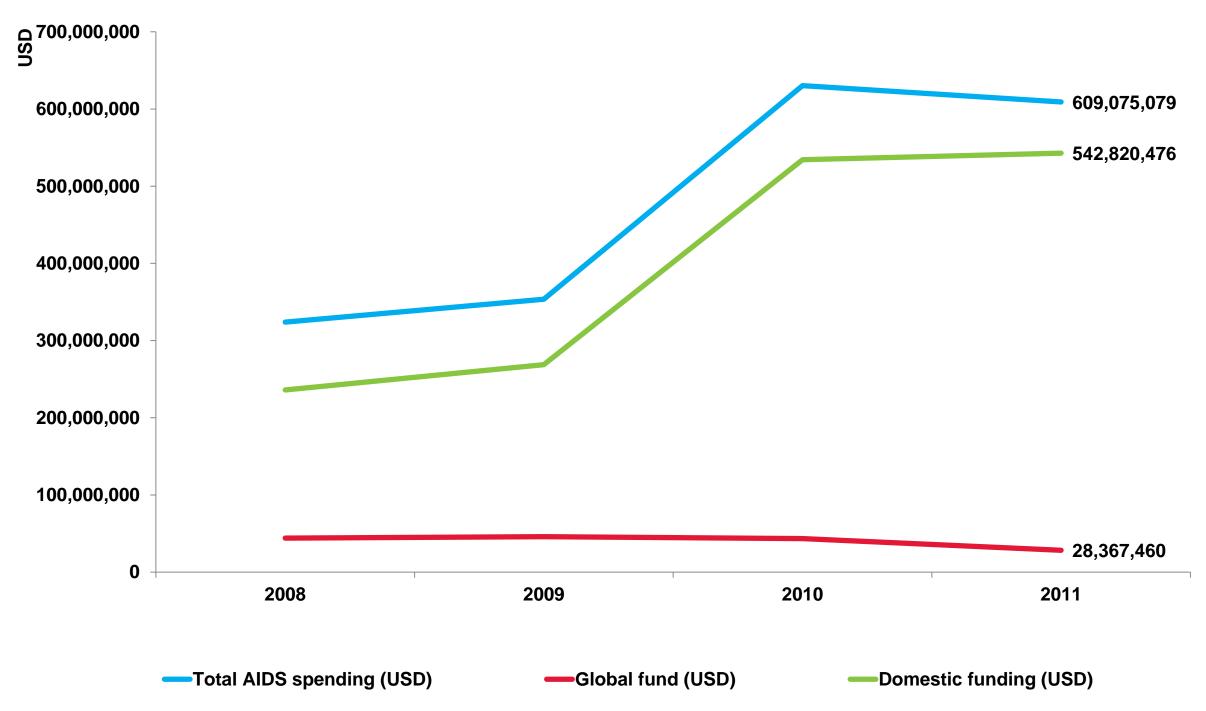


# 7,000 Pregnant Women Eligible For PMTCT in 2011





#### **AIDS Spending by Financing Source**





# Stigma & discrimination

## Analysis of GARP / NCPI 2012

#### Legal obstacles to HIV response

- Criminalize people who use drugs
- Criminalize sex work
- Compulsory detention of sex workers
- Discriminate against migrants

#### **Selected indicators of response**

Access to justice:



- Legal services (legal aid or other)
- NHRI or other mechanisms

#### Protective laws:

Civil society rating of efforts to implement human rights-related laws and policies: **2009: 5/10** 

# Travel restrictions

# STIGMA INDEX

Percent of PLHIV respondents denied health services because of HIV status in past 12 months: 12%



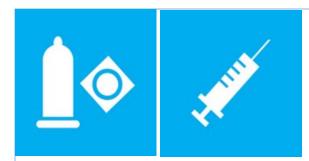
# CHALLENGES

- Rapidly expanding HIV epidemic among MSM.
- High HIV infection rates among low-paid FSW.
- Low level of HIV-TB co-infection treatment.
- Persistent stigma & discrimination against PLHIV and KAPs

# **GAME CHANGERS**

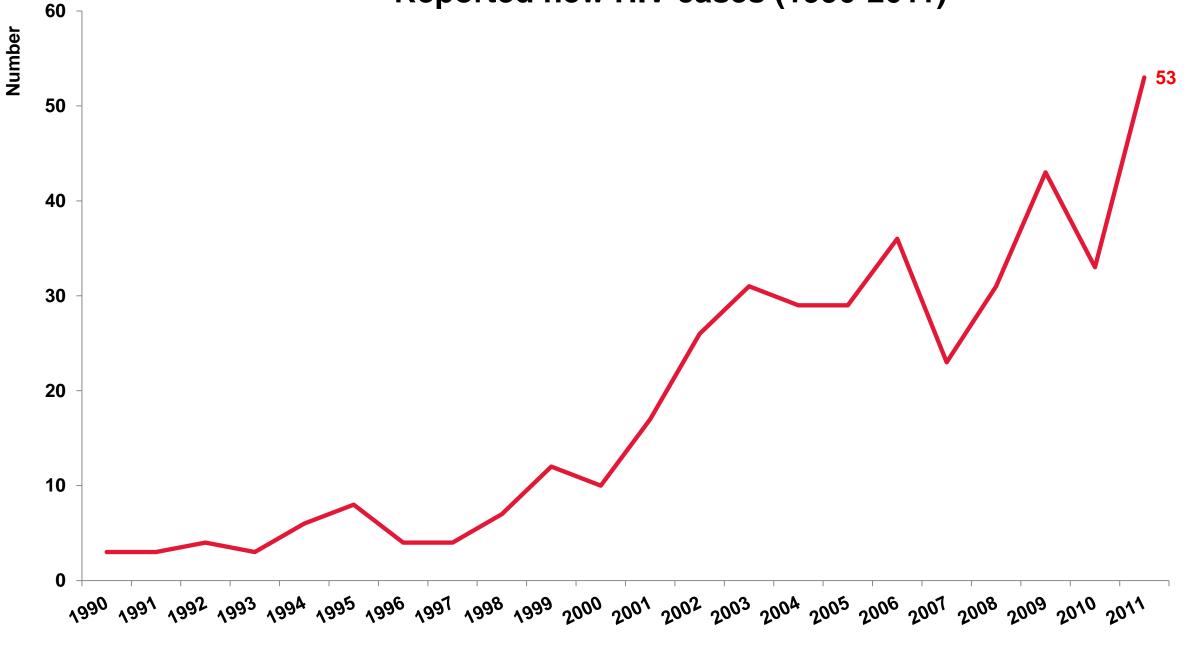
- Apply strategic action planning to MSM response in mega cities.
- Intensive CBO support to reach SW and MSM.
- Scale up TasP innovation to expand HIV testing and treatment referral among KAPS.
- Amend public service recruitment medical standards to remove HIV as exclusion criteria.



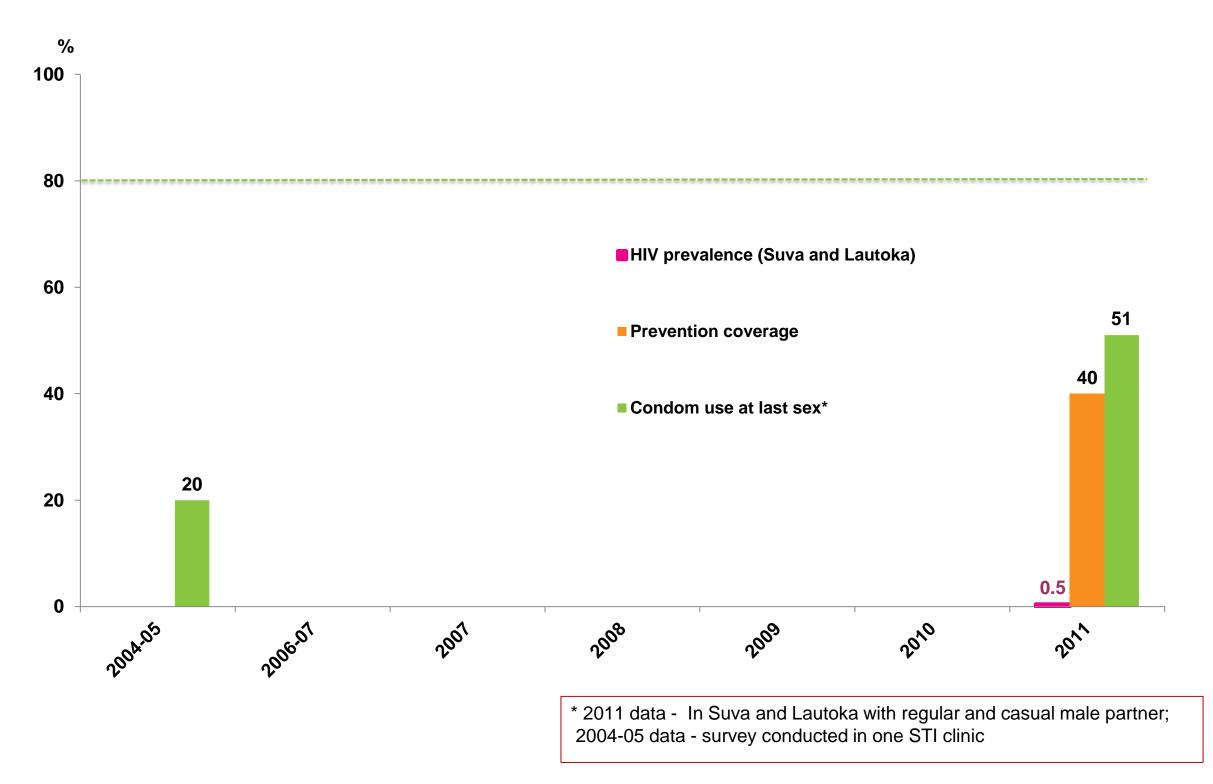


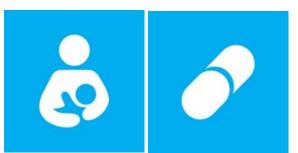
# <500 People Living With HIV and <100 estimated new HIV infections in 2011

#### Reported new HIV cases (1990-2011)



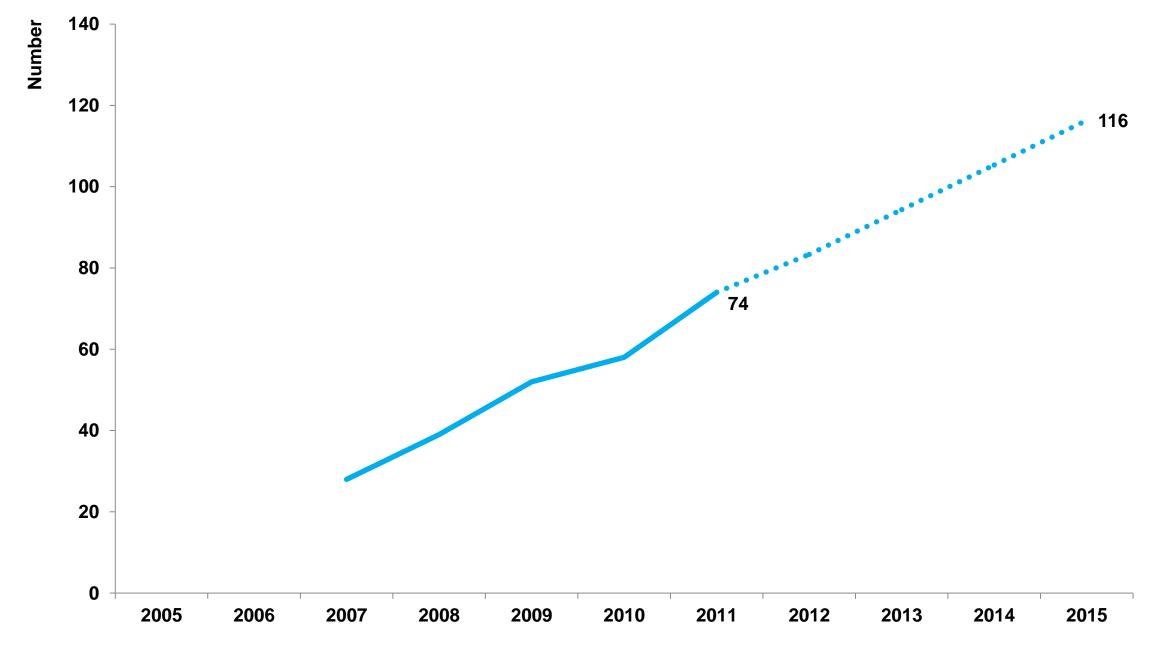
## Men Who Have Sex With Men: HIV prevalence, behaviour and prevention coverage



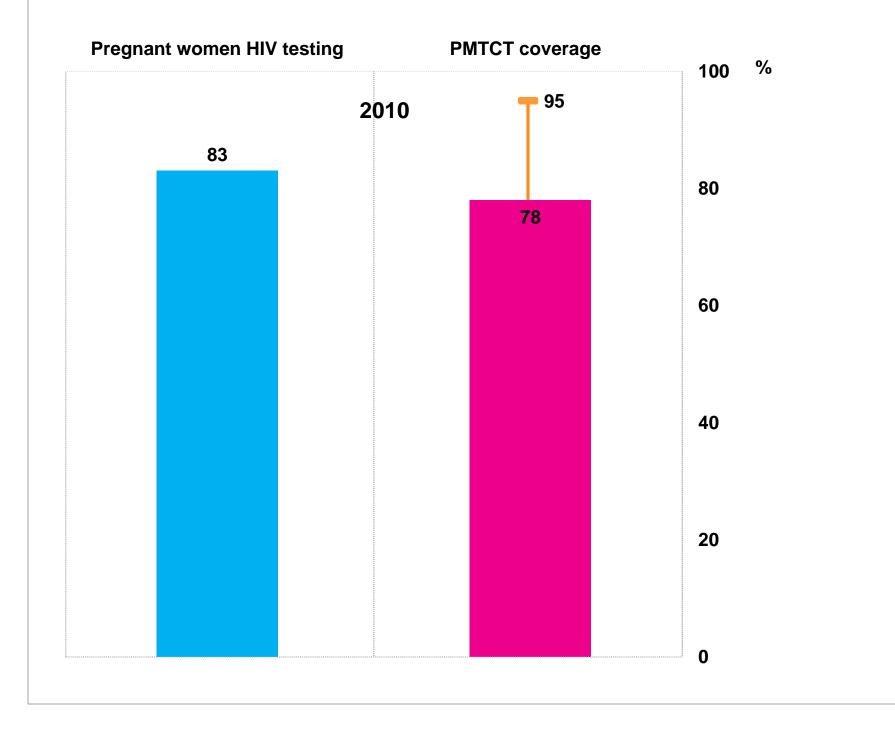


#### <100 Adults Eligible for Antiretroviral Therapy in 2011

#### Number of people receiving antiretroviral therapy



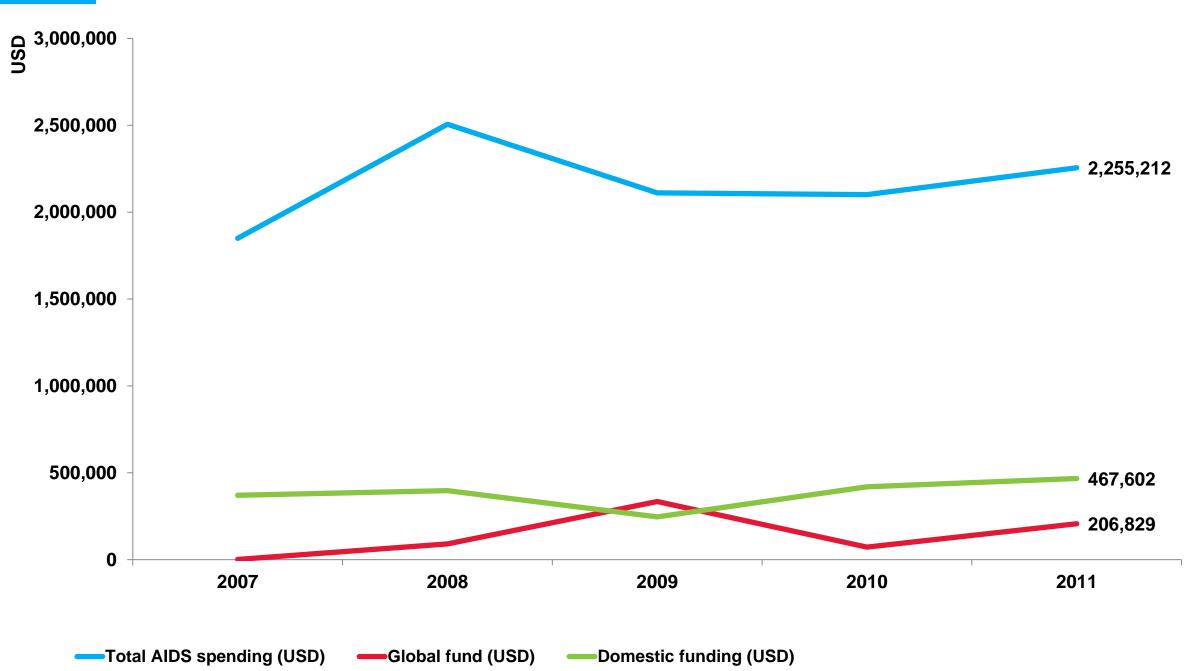
#### <100 Pregnant Women Eligible for Antiretroviral Therapy in 2011



Fiji



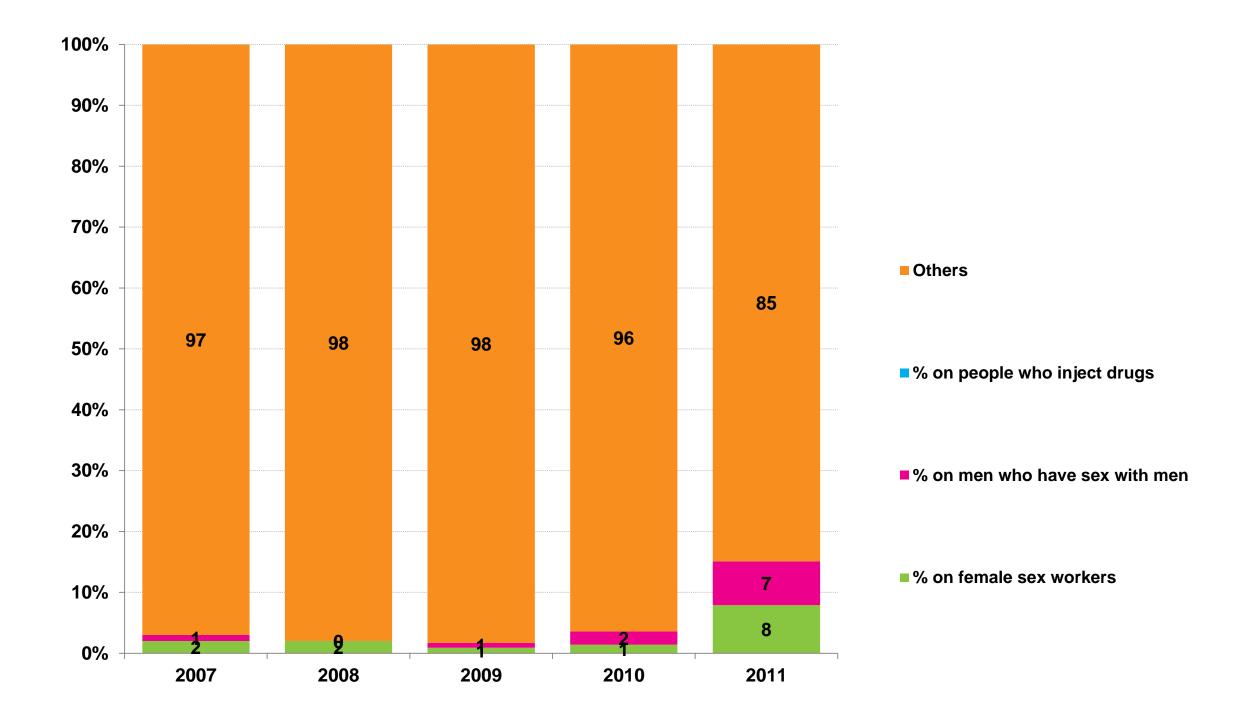
#### **AIDS Spending by Financing Source**



#### AIDS spending by category



# Proportion of total prevention programme spending on key populations at higher risk





# Stigma & discrimination

## Analysis of GARP / NCPI 2012

## Legal obstacles to HIV response

Criminalize sex work

## Selected indicators of response

Access to justice:

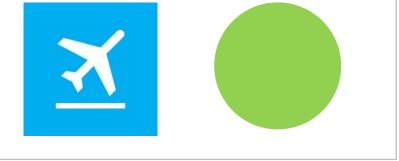
- Legal services (legal aid or other)
  - NHRI or other mechanisms

Protective laws:

Civil society rating of efforts to implement human rights-related laws and policies: 2009: 6/10

2011: 6/10

# Travel restrictions



# STIGMA INDEX

Percent of PLHIV respondents denied health services because of HIV status in past 12 months: 13%

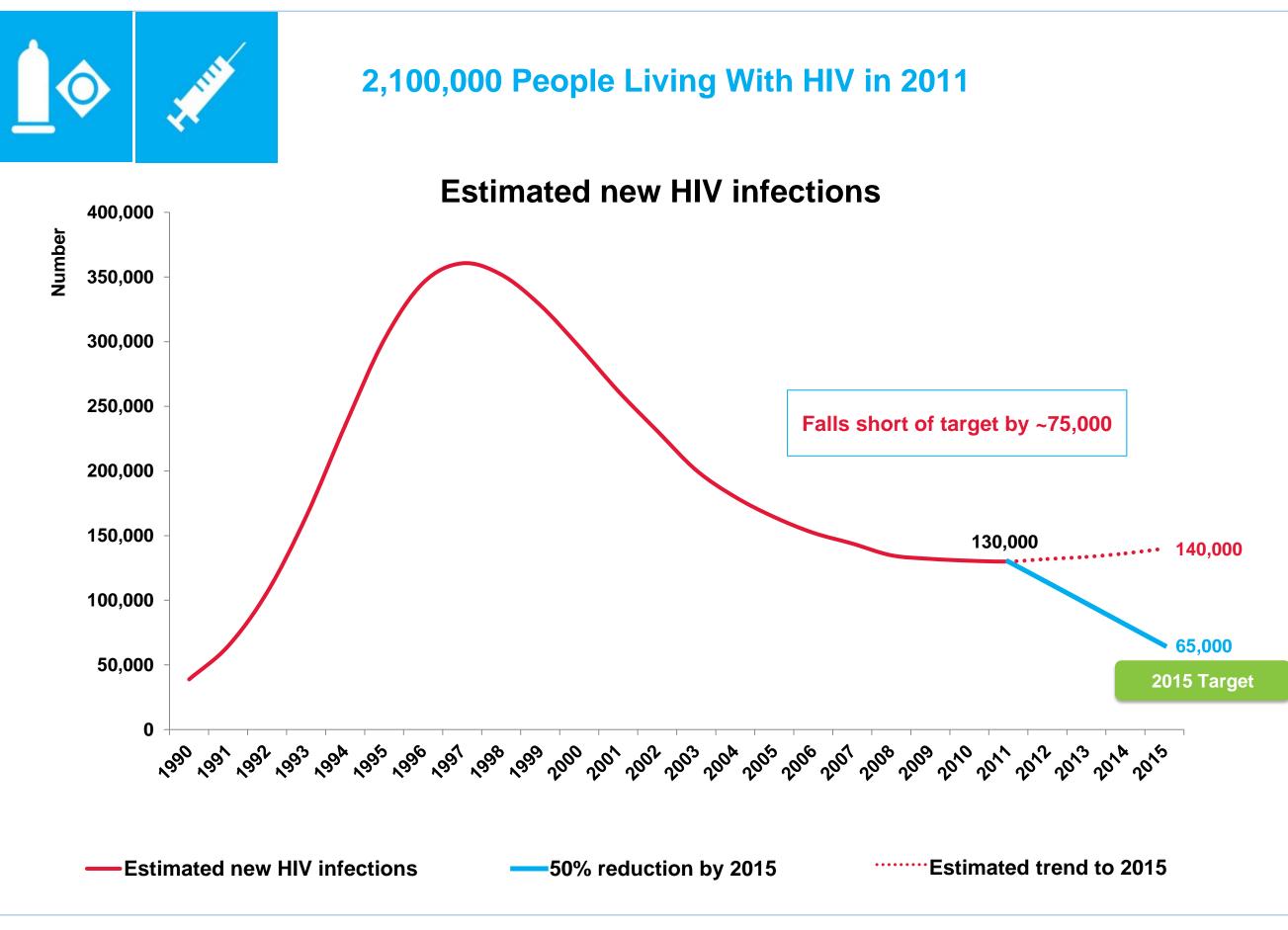
# CHALLENGES

- Low condom use and HIV testing
- Limited data on key populations
- Criminalization of Sex
   Work
- Reduced funding opportunities beyond 2013

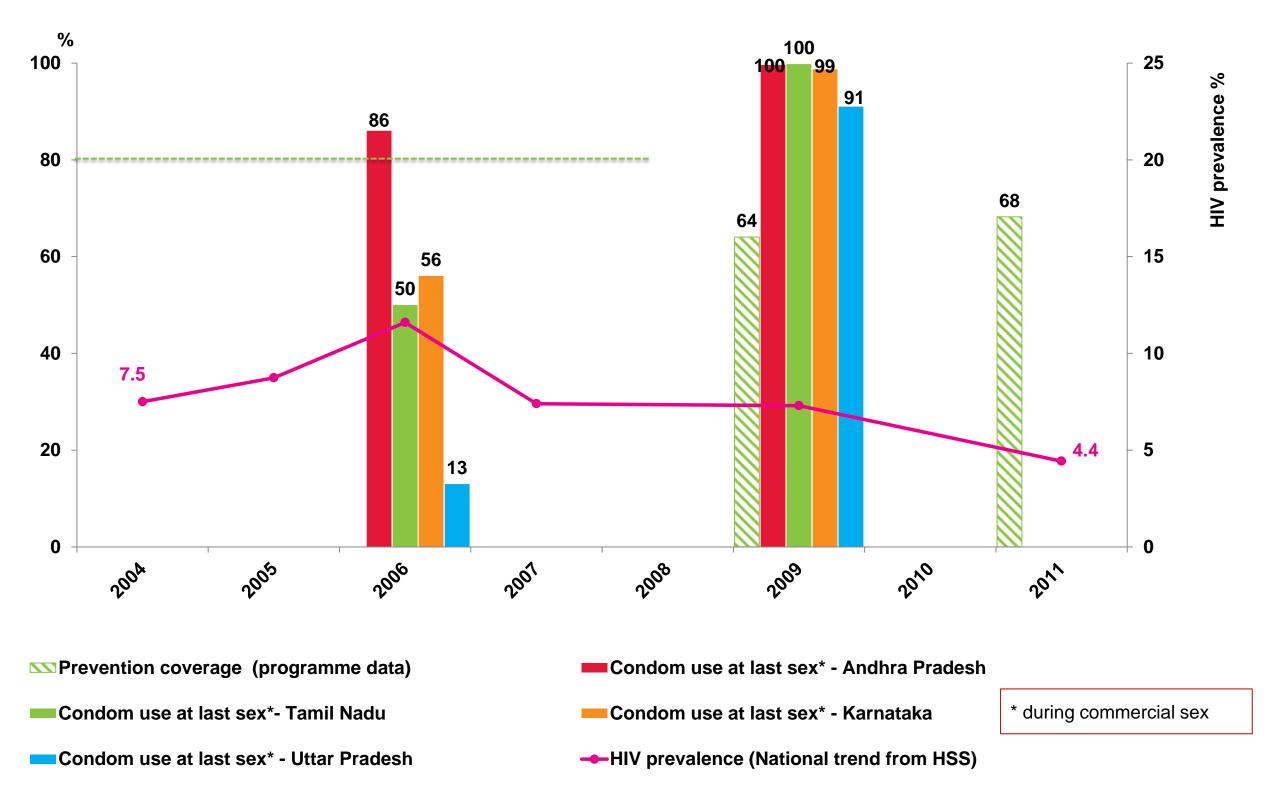
# **GAME CHANGERS**

- Increased prevention interventions focusing on key populations.
- Removing legal penalties for Sex work.
- Increased country ownership of the HIV and STI response.

# INDIA



## Men Who Have Sex With Men: HIV prevalence, behaviour and prevention coverage



#### % 11.2 7.2 **Safe injection - Manipur WWW** Safe Injection - Karnataka

#### **People Who Inject Drugs: HIV prevalence and behaviors**

condom use at last sex\*- Tamil Nadu

se Safe Injection - Tamil Nadu

Condom use at last sex\* - Karnataka

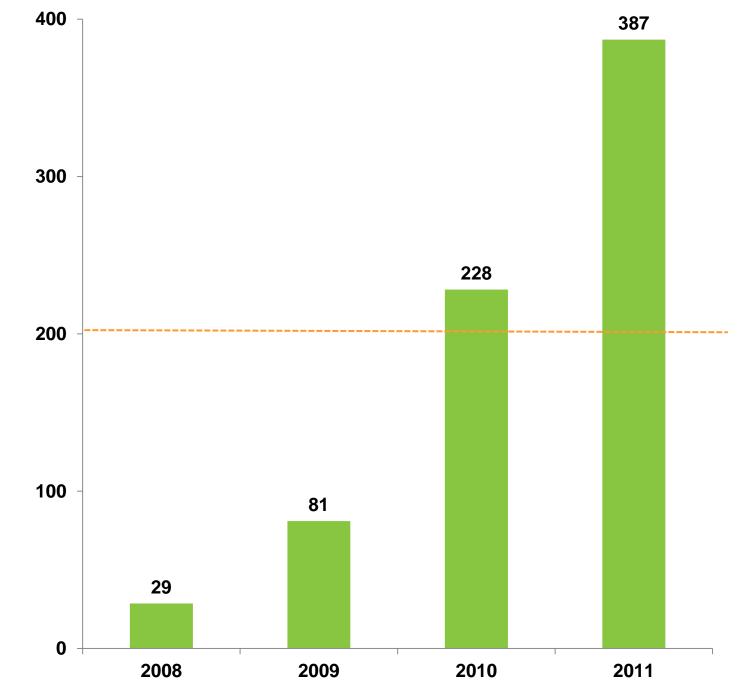
→ HIV prevalence (National trend from HSS)

\* during commercial sex

India

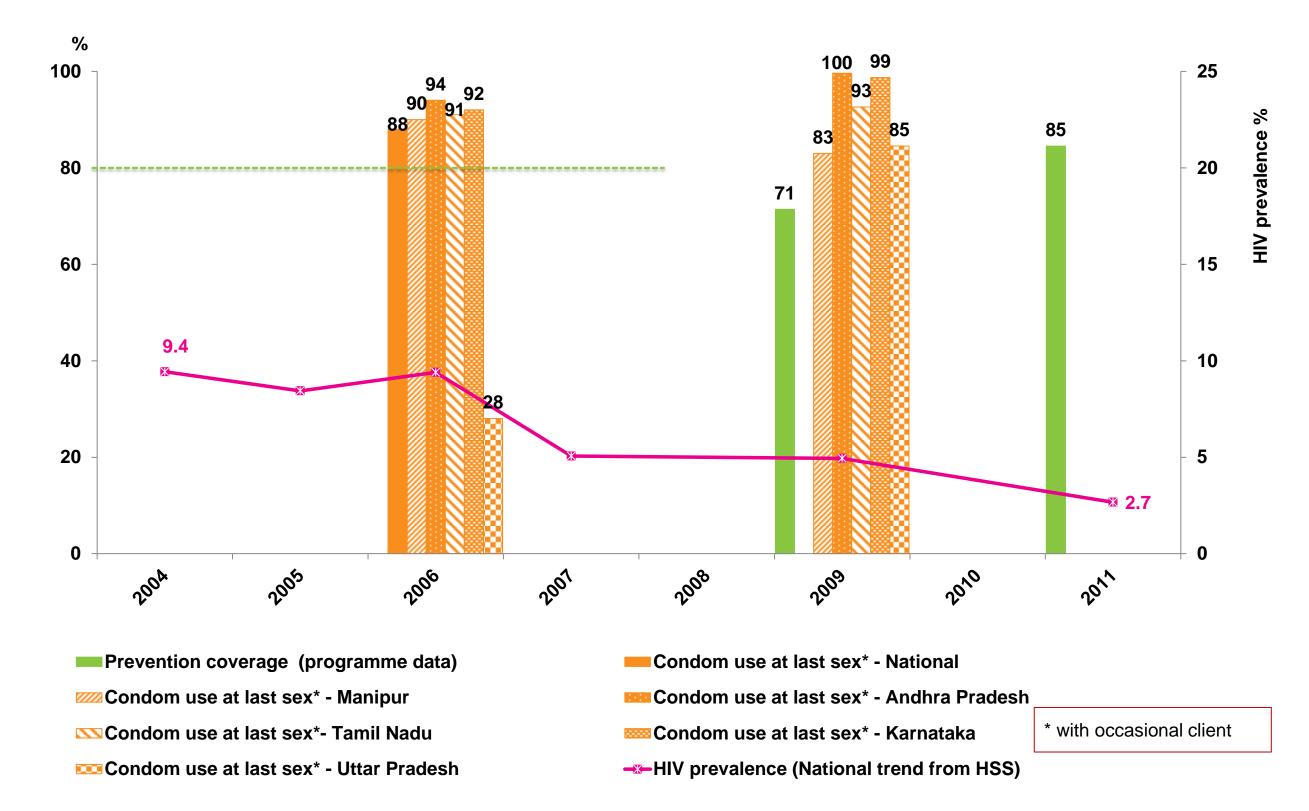
HIV prevalence %

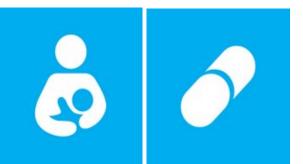
Number of needle/syringes distributed per person who inject drugs per year



Number of needles/syringes

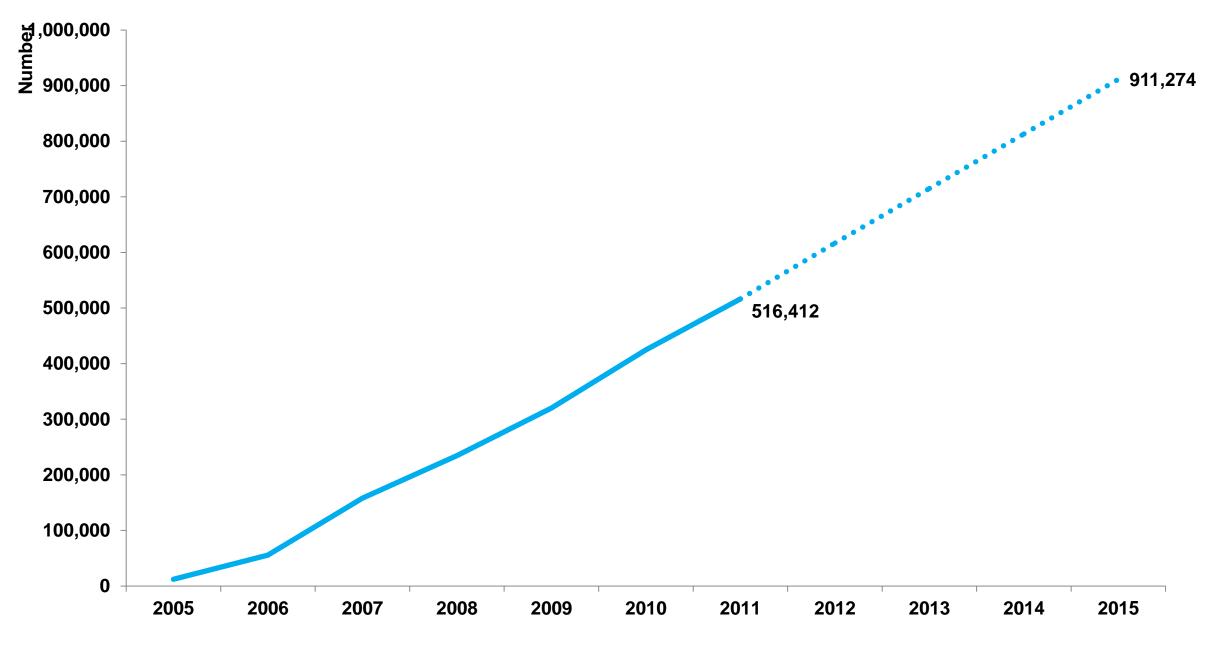
#### Female Sex Workers: HIV prevalence, behaviour and prevention coverage

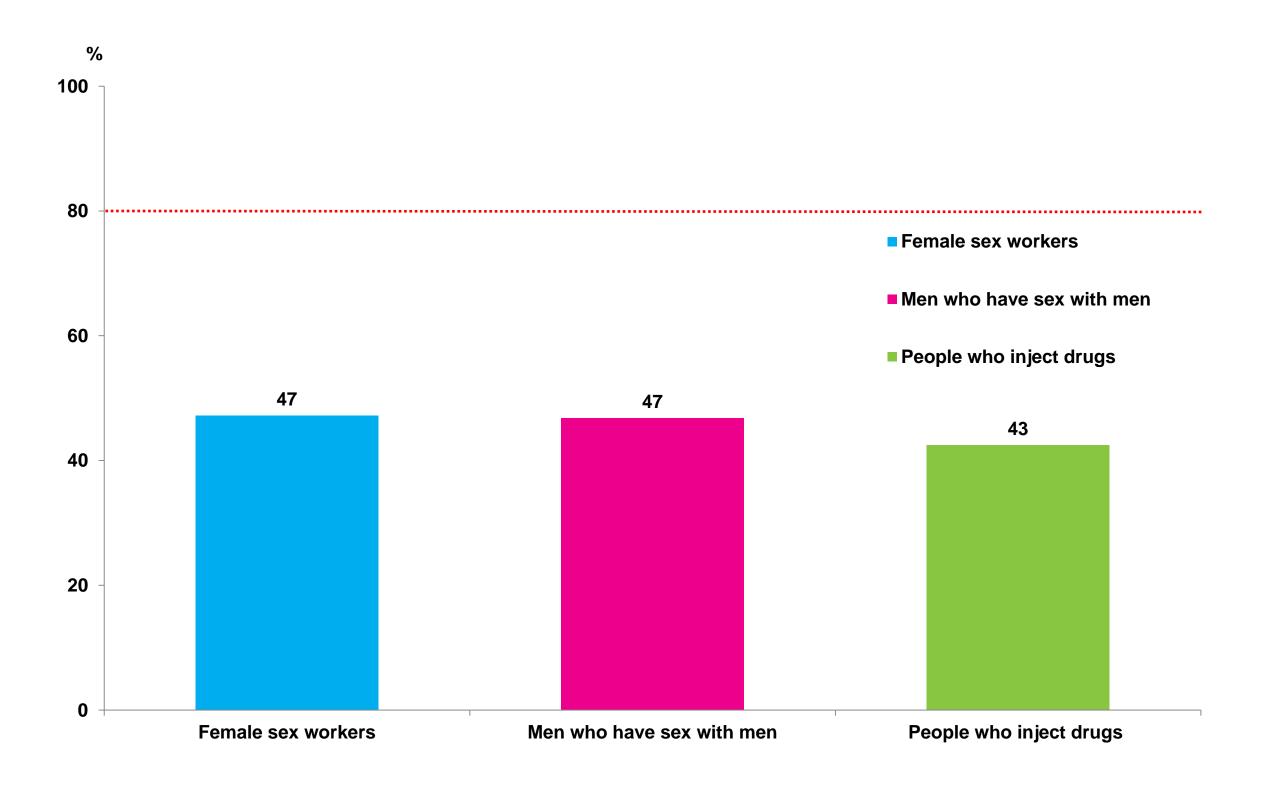




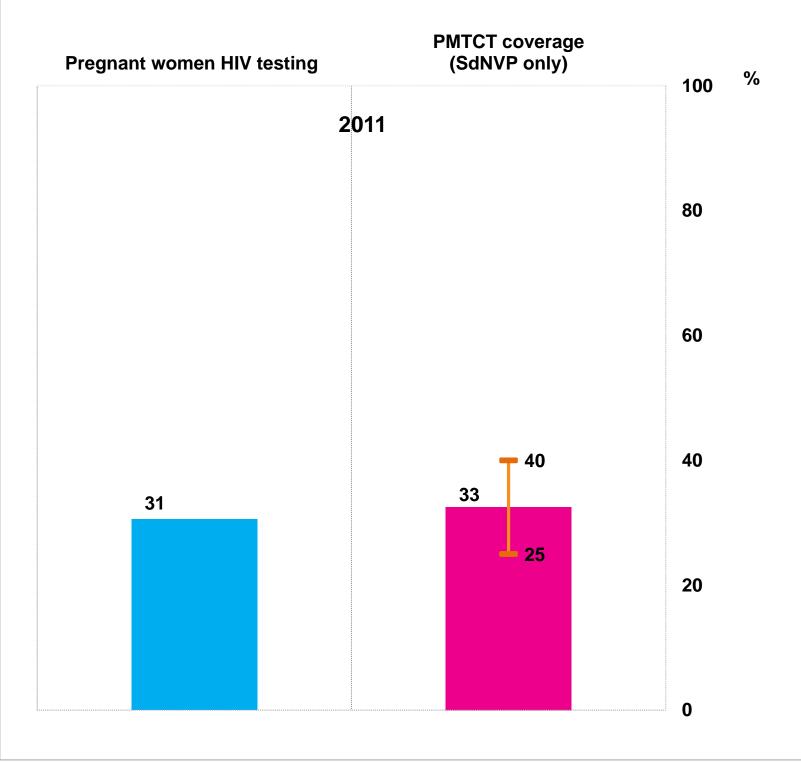
### 860,000 Adults Eligible for Antiretroviral Therapy in 2011

#### Number of people receiving antiretroviral therapy



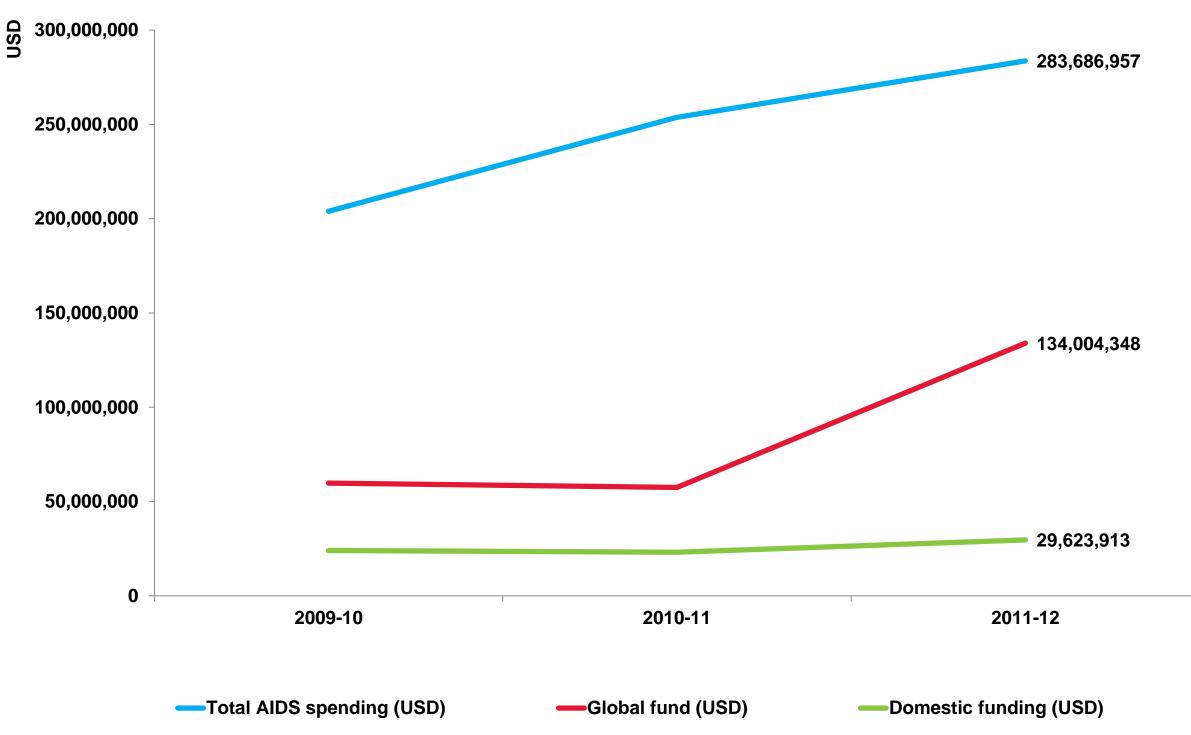


### 38,000 Pregnant Women needing PMTCT in 2011

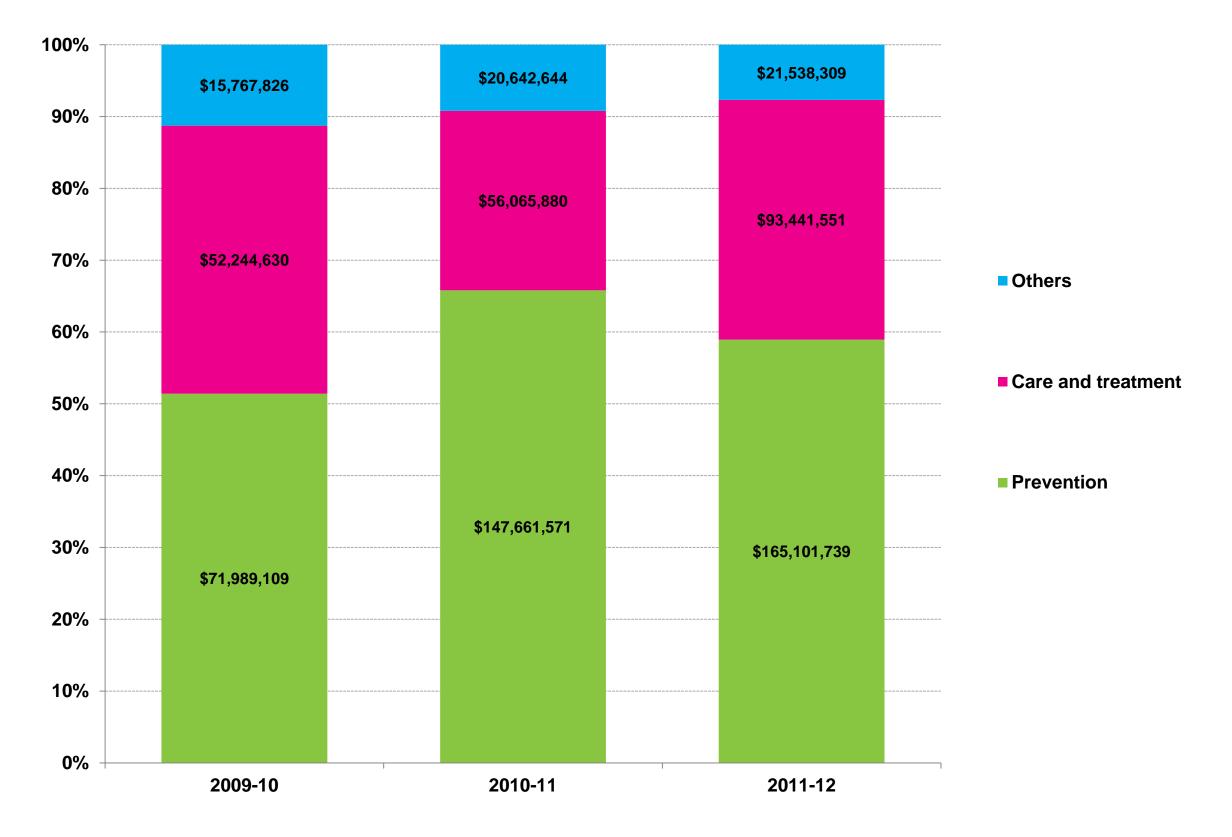




#### **AIDS Spending by Financing Source**

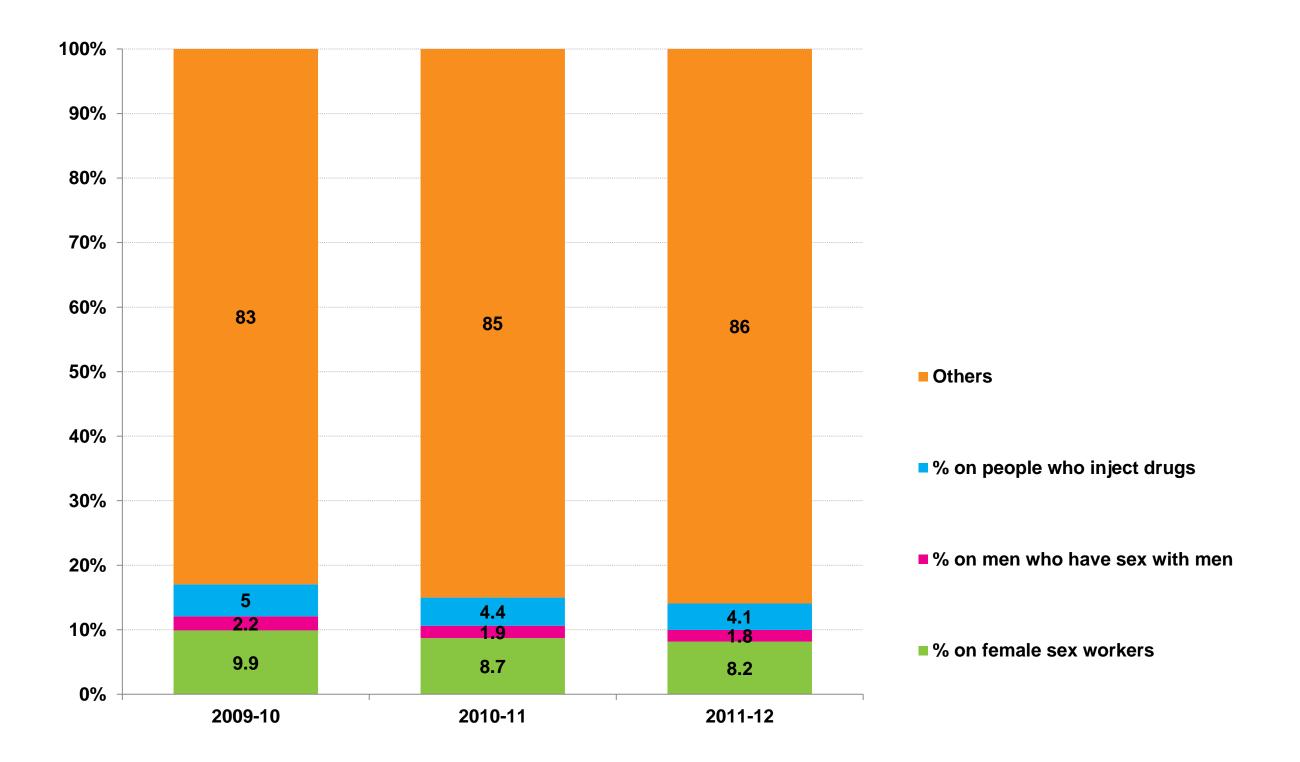


#### AIDS spending by category



OSD

# Proportion of total prevention programme spending on key populations at higher risk





# Stigma & discrimination

## Analysis of GARP / NCPI 2012

## Legal obstacles to HIV response

- Criminalize people who use drugs
- Criminalize some aspects of sex work (including as trafficking)
- Compulsory detention of sex workers (for rescue/rehab in relation to human trafficking)
- Public order offences, against sex workers, men who have sex with men and transgender

## Selected indicators of response

Access to justice:

- Legal services (legal aid or other)
- NHRI or other mechanisms

## Protective laws:

Civil society rating of efforts to implement human rights-related laws and policies: **2009:** 4/10

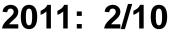


India

## **Travel restrictions**



Percent of PLHIV respondents denied health services because of HIV status in past 12 months: 6% (Tamil Nadu only; studies in 4 other states ongoing)



# CHALLENGES

- Political complacency: impression that the epidemic is under control
- Civil Society: focus more on service delivery and less on advocacy; infighting; demotivation
- Overcentralised response

# **GAME CHANGERS**

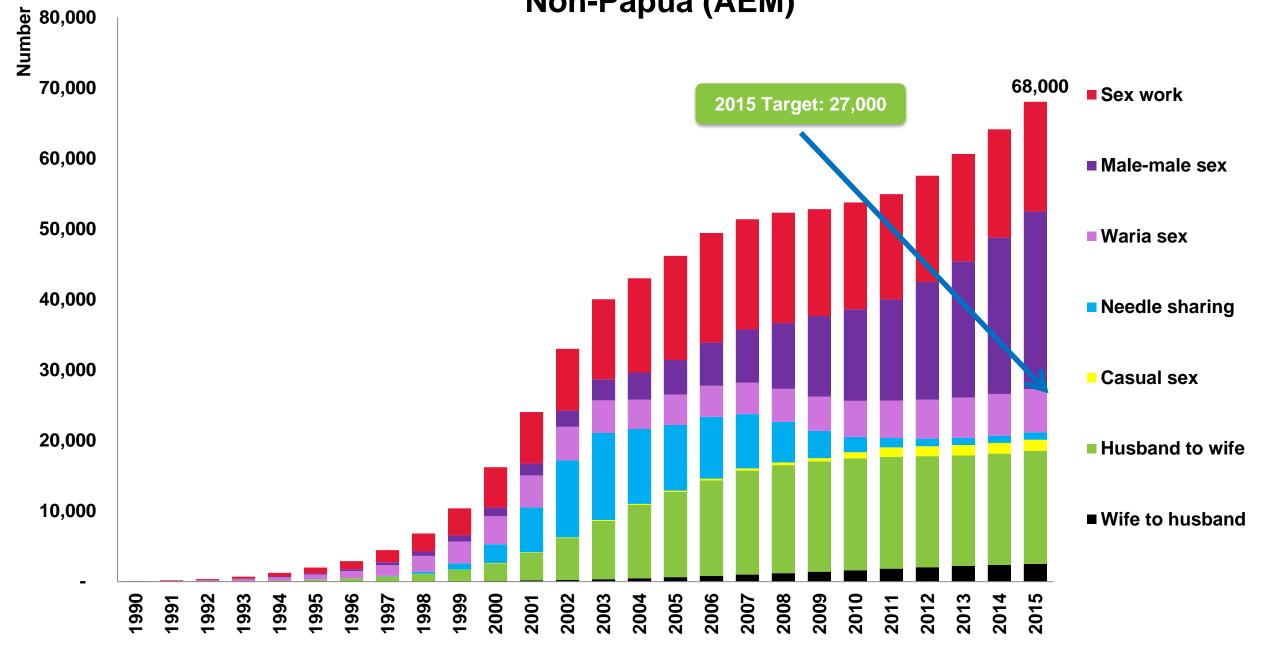
- Total funding from domestic sources:
   Convergence with general health services
- Threats to generic ARV manufacturing protected by IPRs
- Treatment as prevention

# INDONESIA



### 559,000 People Living With HIV in 2011

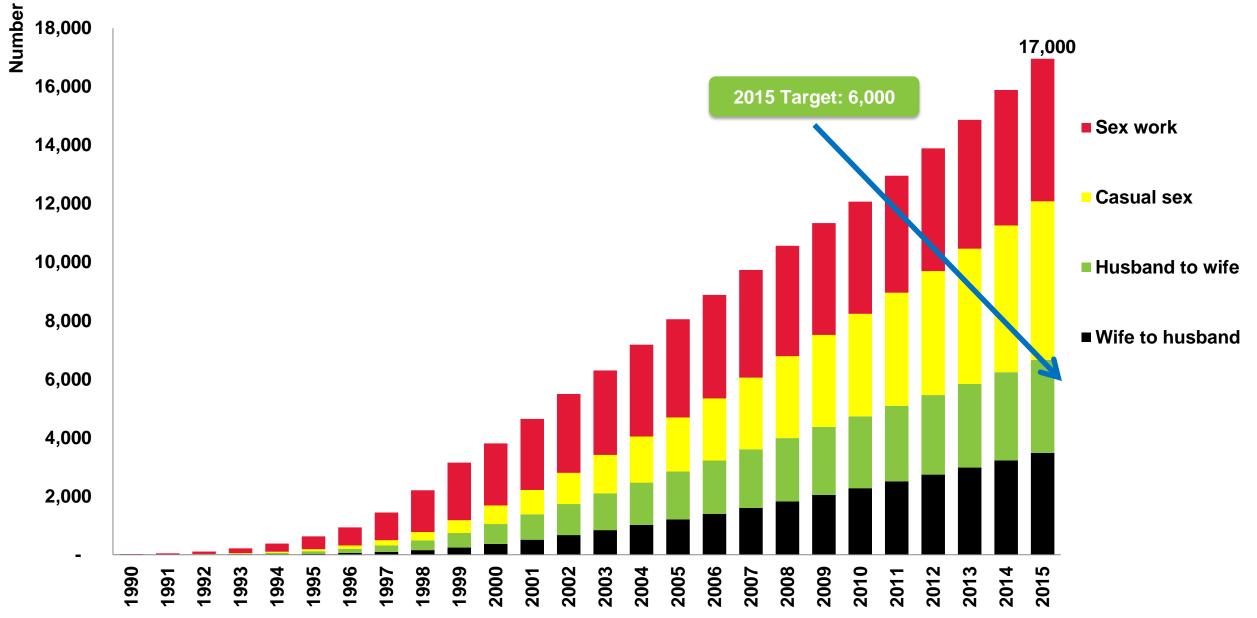
# Estimated adult new HIV infections by mode of transmission in Non-Papua (AEM)



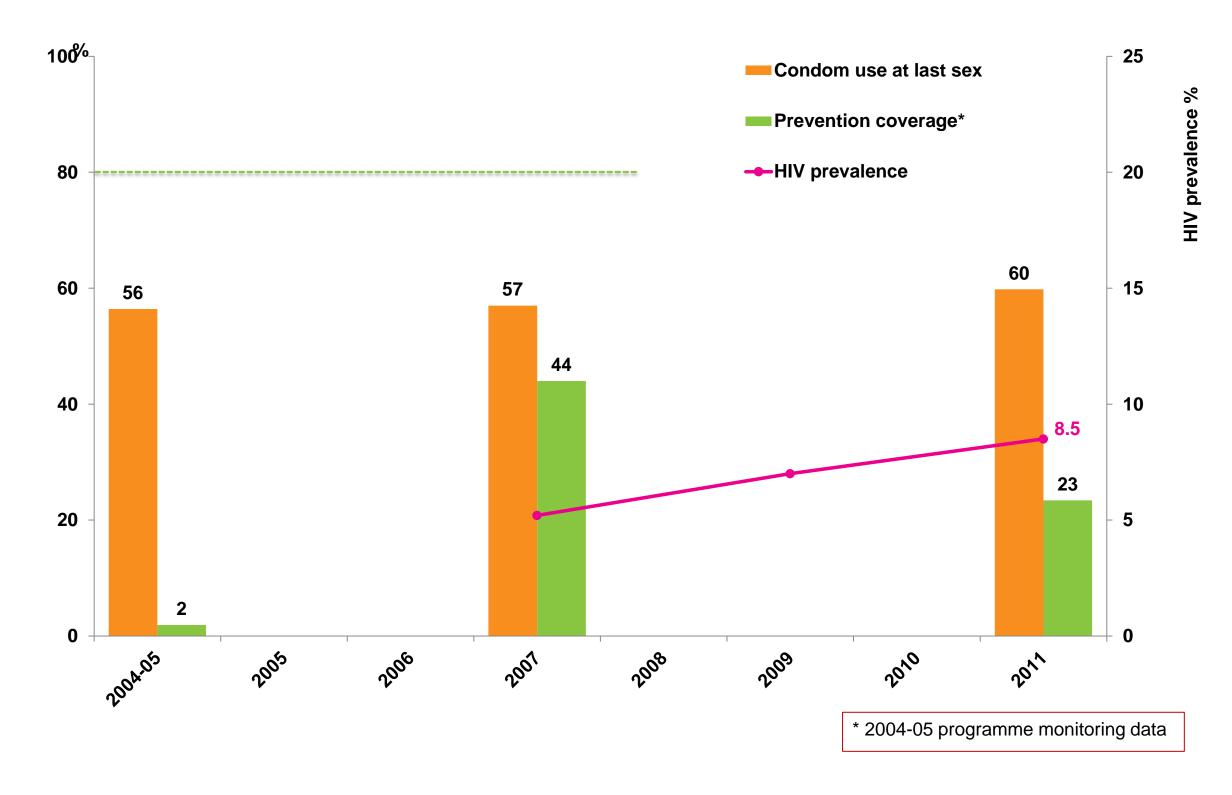


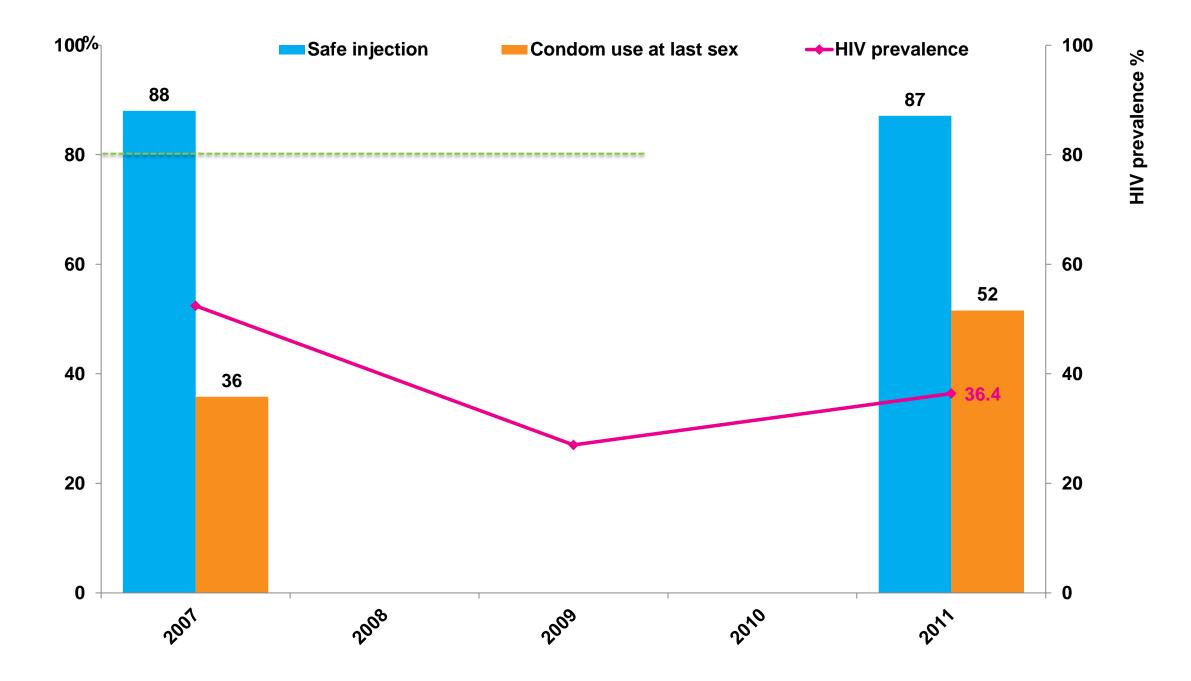
### 559,000 People Living With HIV in 2011

# Estimated adult new HIV infections by mode of transmission in Papua (AEM)

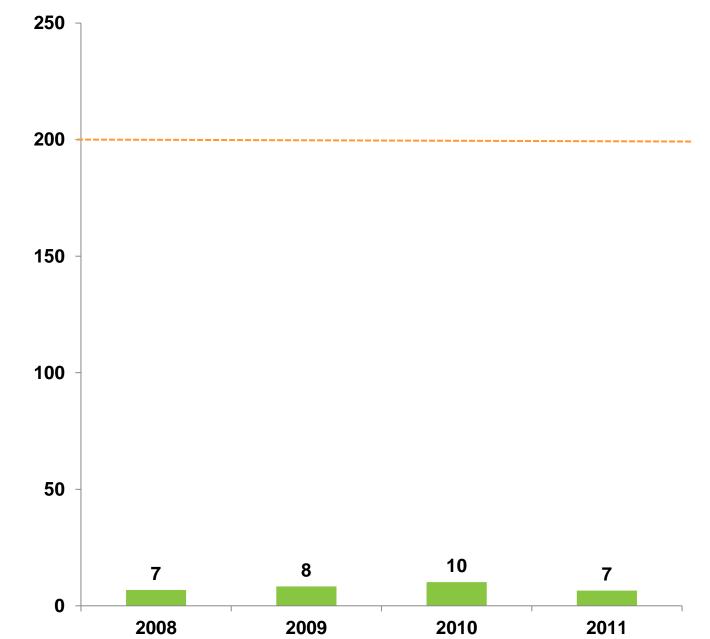


# Men Who Have Sex With Men: HIV prevalence, behaviour and prevention coverage



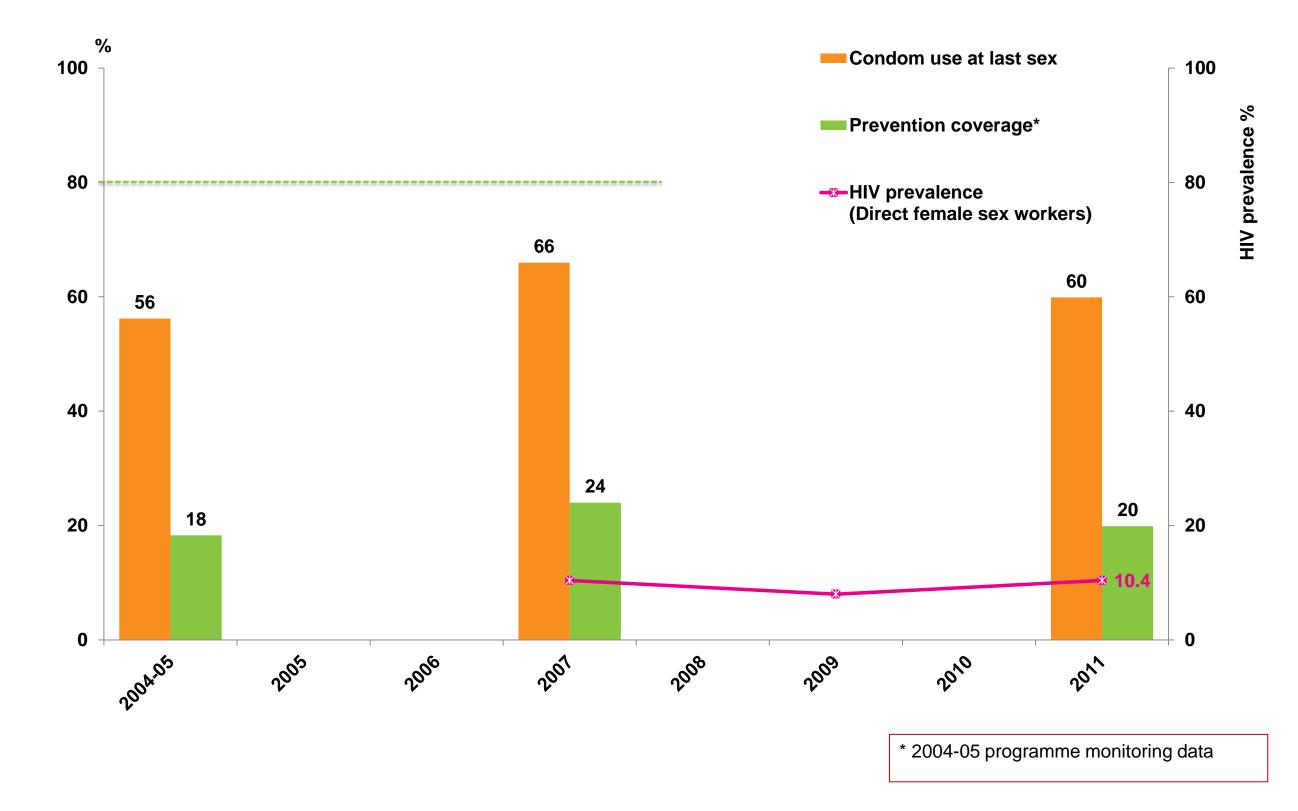


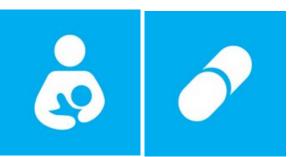
## Number of needle/syringes distributed per person who inject drugs per year



Number of needles/syringes

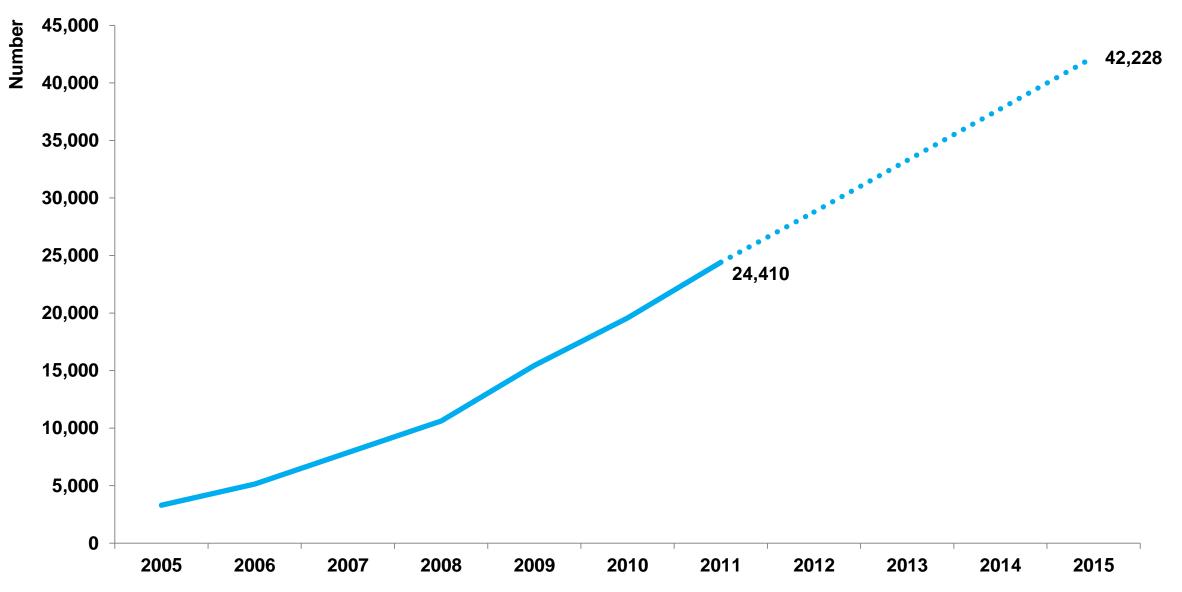
#### Female Sex Workers: HIV prevalence, behaviour and prevention coverage



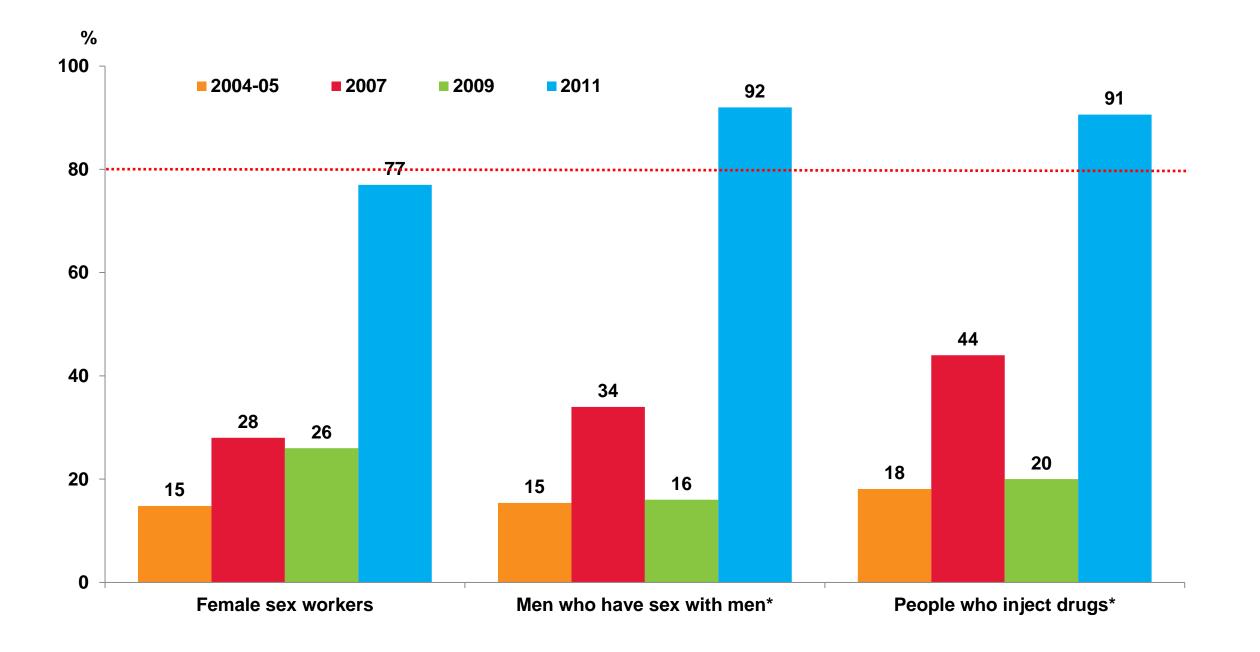


### 146,000 Adults Eligible for Antiretroviral Therapy in 2011

### Number of people receiving antiretroviral therapy



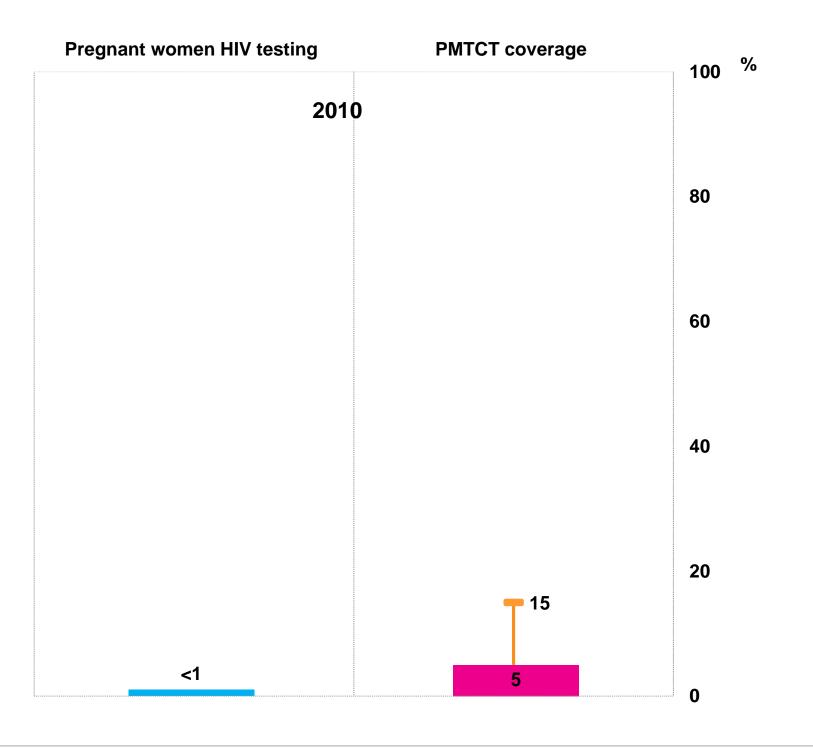
#### HIV testing coverage among key populations at higher risk



\* For 2011, the denominator is only those responded to testing related questions but not the total surveyed population, which was used as the denominator in previous reporting rounds

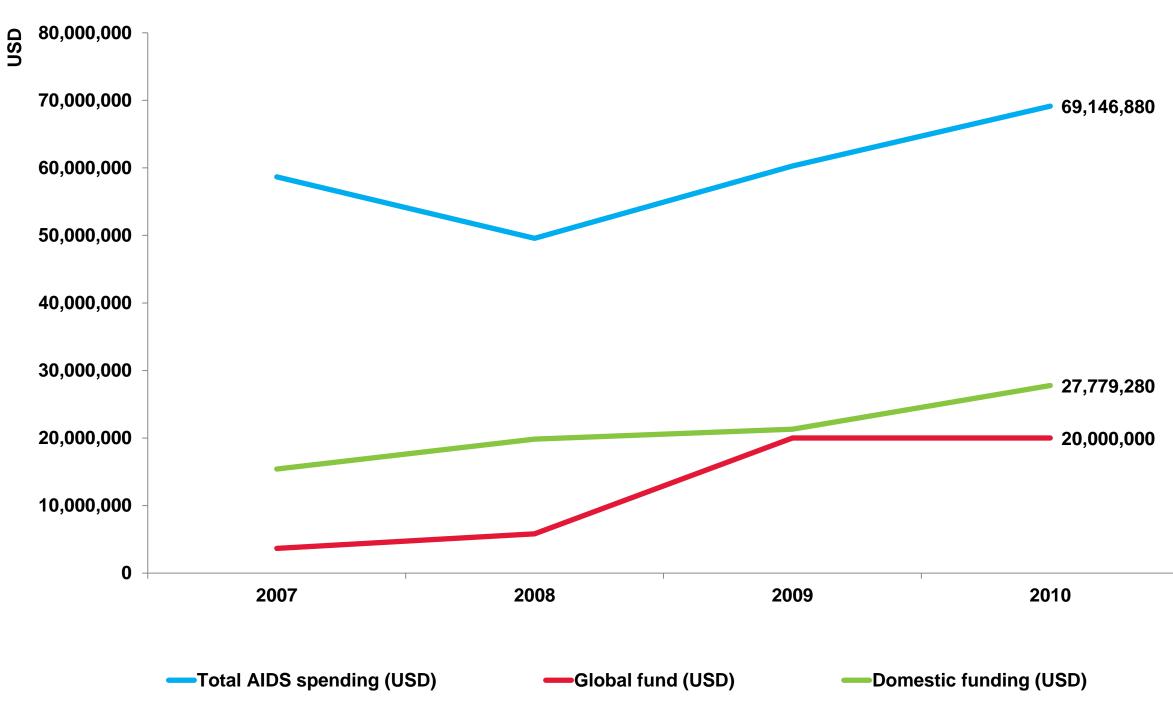
#### Indonesia

### 3,807 Pregnant Women Eligible for Antiretroviral Therapy in 2011

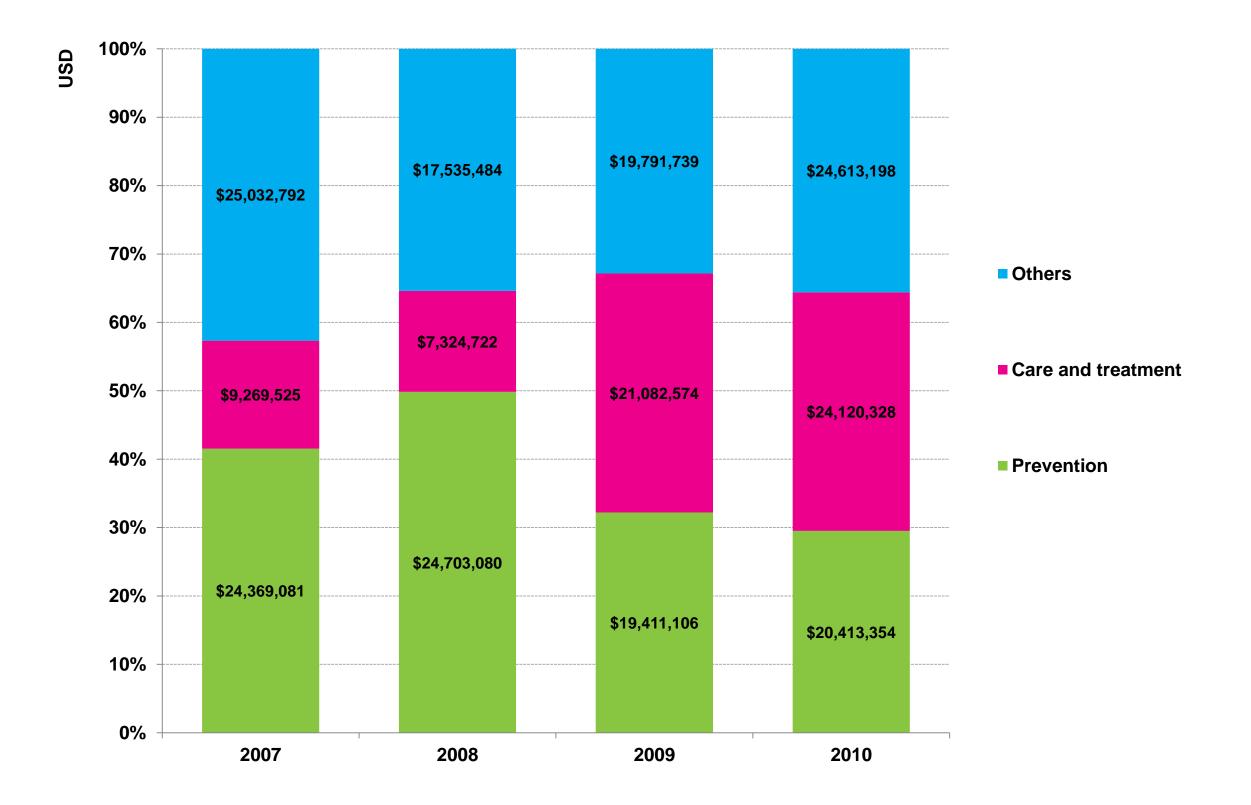




#### **AIDS Spending by Financing Source**

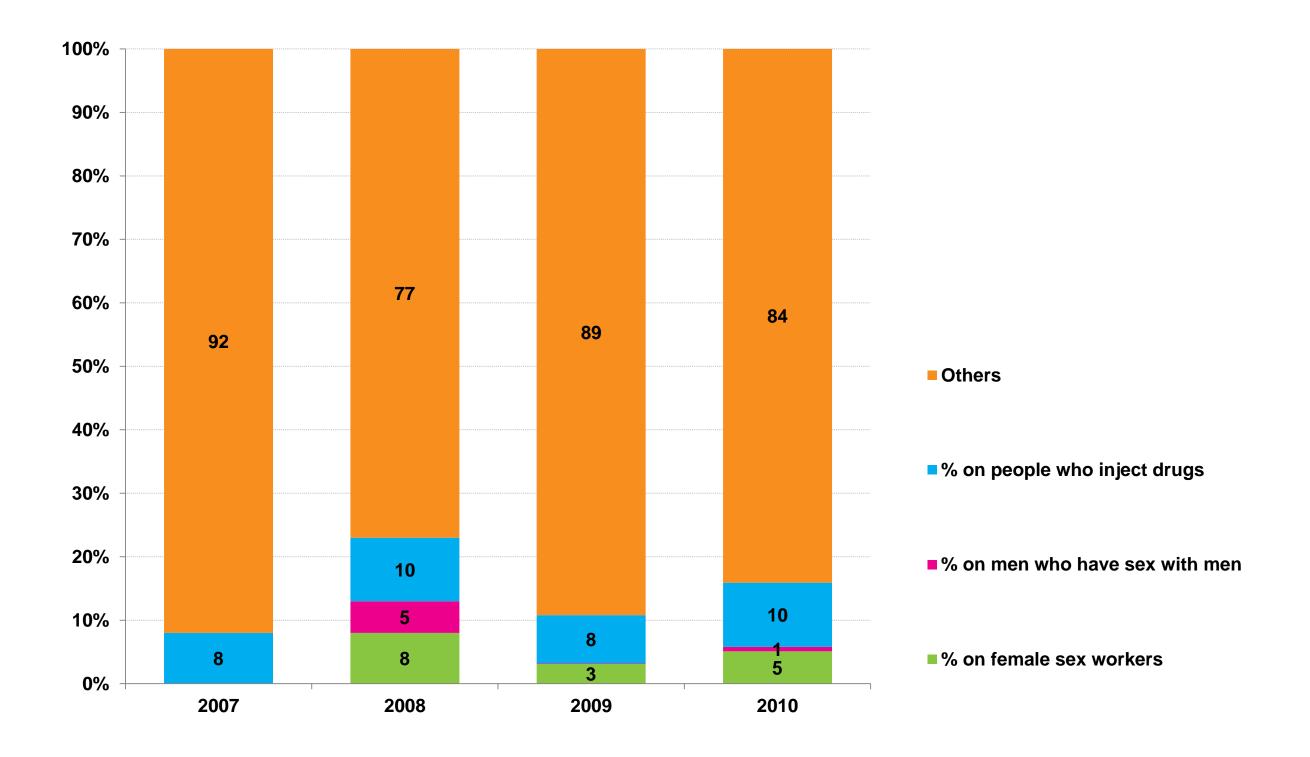


#### AIDS spending by category



Indonesia

# Proportion of total prevention programme spending on key populations at higher risk





# Stigma & discrimination

## Analysis of GARP / NCPI 2012

## Legal obstacles to HIV response

- Criminalize sex work (some provinces or districts)
- Criminalize people who use drugs
- Compulsory drug treatment

## **Selected indicators of response**

Access to justice:



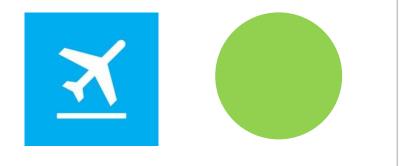
- Legal services (legal aid or other)
- NHRI or other mechanisms

### Protective laws:

Civil society rating of efforts to implement human rights-related laws and policies: **2009: 3/10** 

## 2011: 2/10

# Travel restrictions



# STIGMA INDEX

Percent of PLHIV respondents denied health services because of HIV status in past 12 months: N/A

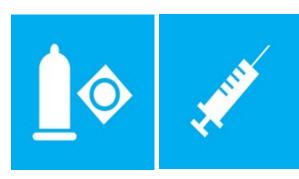
# CHALLENGES

- New infections of 76,000 a year; with a majority of them occurring among MSM, sex workers, transgender and their clients
- 17% ART coverage (including 16% PMTCT coverage)
- Punitive laws and regulations, including those which bar access of unmarried young people

# **GAME CHANGERS**

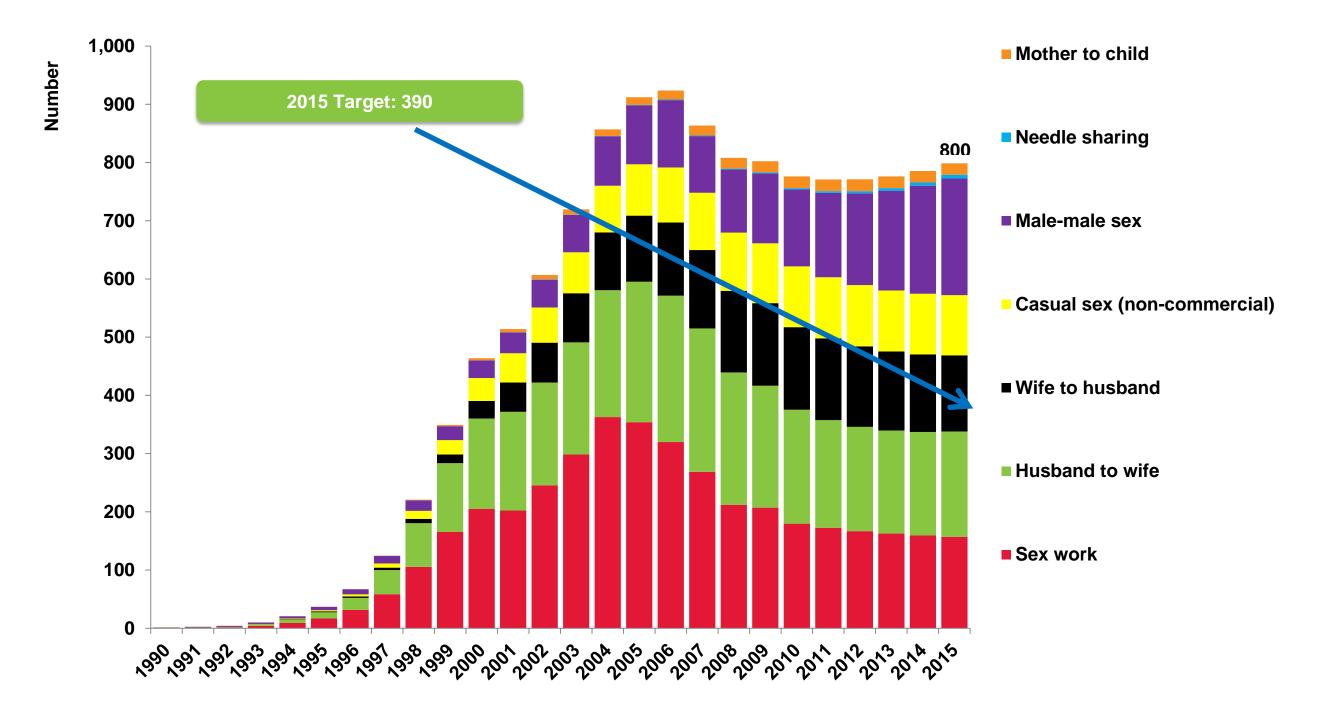
- Service delivery model adapted for use in Indonesia to expand ART access/adherence, including the strategic use of ART for key populations at risk (initiate rapid routine test, with opt out, and early treatment).
- Consistent condom use in sex work establishments and by MSM.
- Ensure that HIV treatment and prevention are included in the universal health care scheme (to be established in 2014).

# LAO PDR

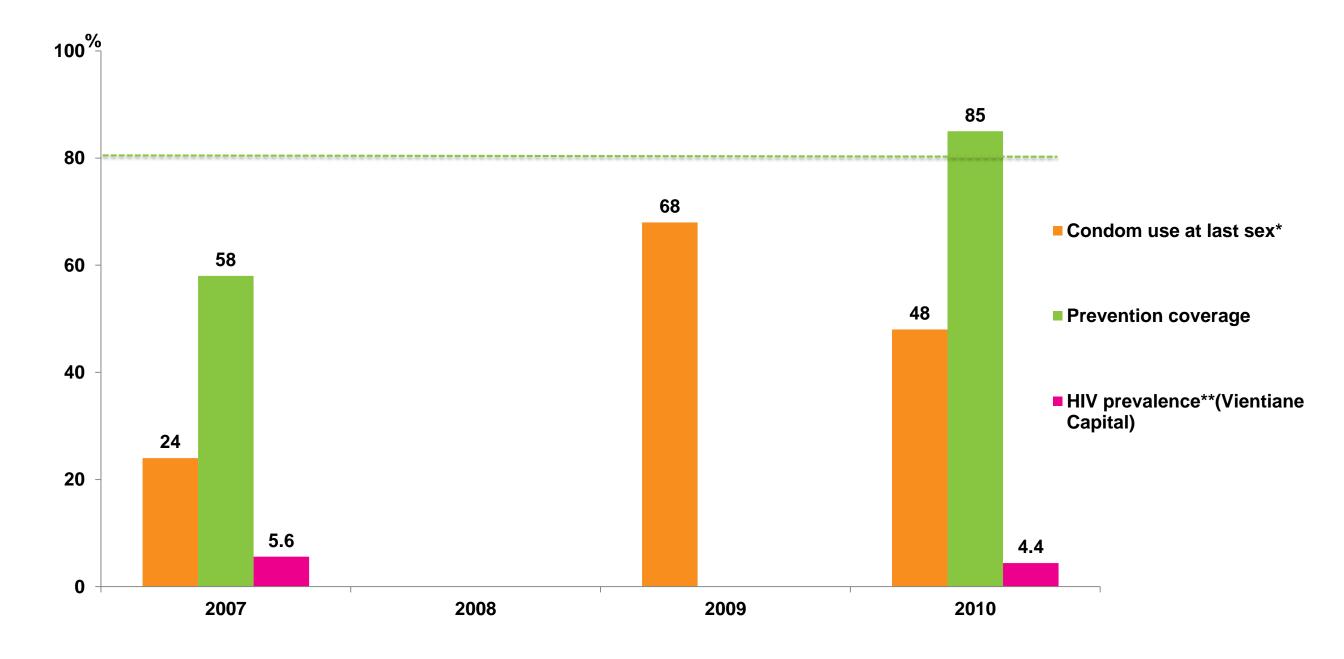


### **10,000 People Living With HIV in 2011**

### Estimated new HIV infections by mode of transmission (Spectrum)



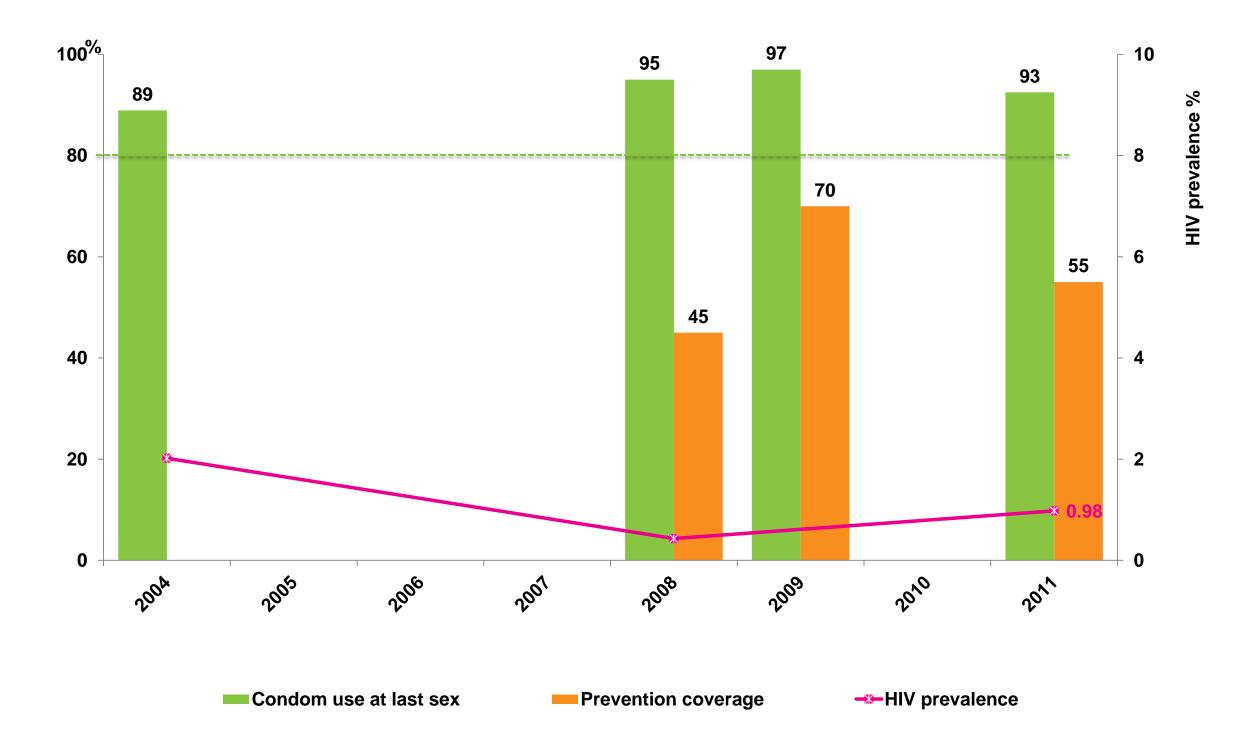
# Men Who Have Sex With Men: HIV prevalence, behaviour and prevention coverage

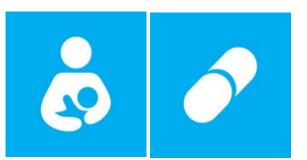


\* with casual male partner; 2007 Vientiane Capital, 2009 Luang Prabang, and 2010 Vientiane Capital and Savannakhet

\*\*2010 data for men who have sex with men and transgender people

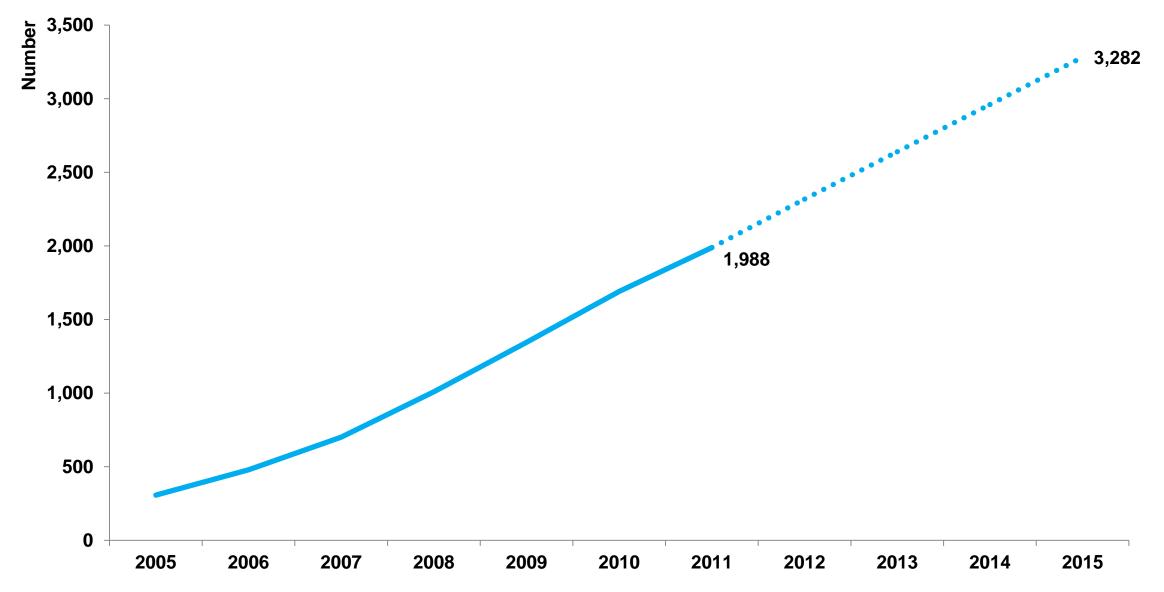
# Female Sex Workers: HIV prevalence, behaviour and prevention coverage



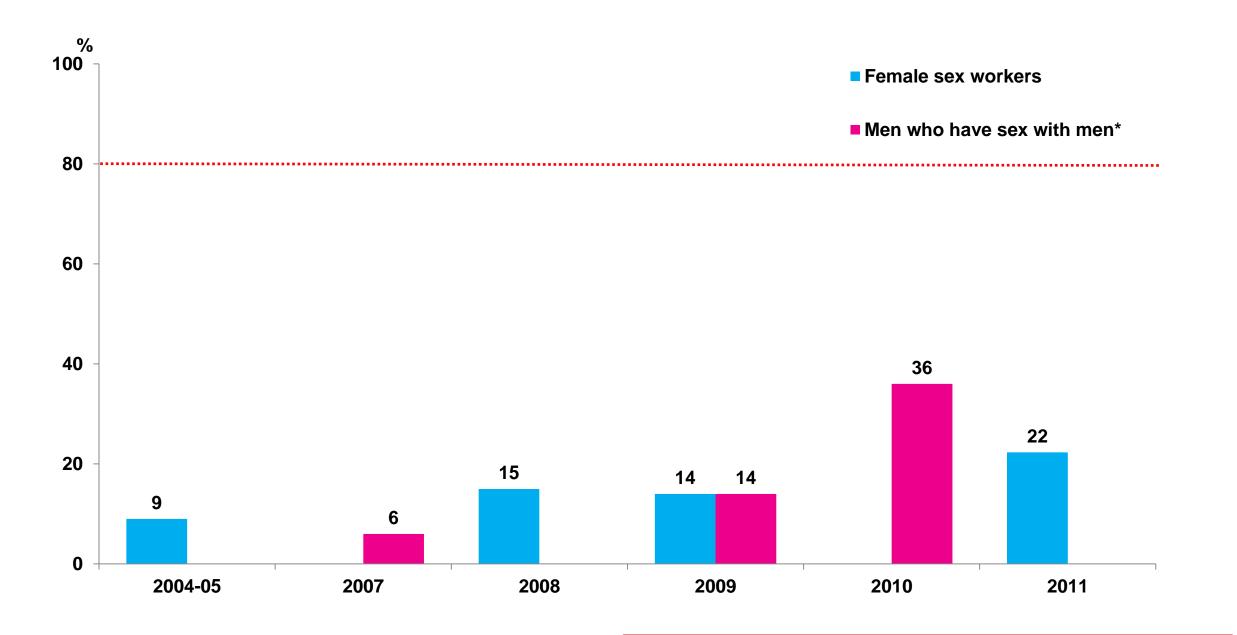


### **3,300 Adults Eligible for Antiretroviral Therapy in 2011**

### Number of people receiving antiretroviral therapy

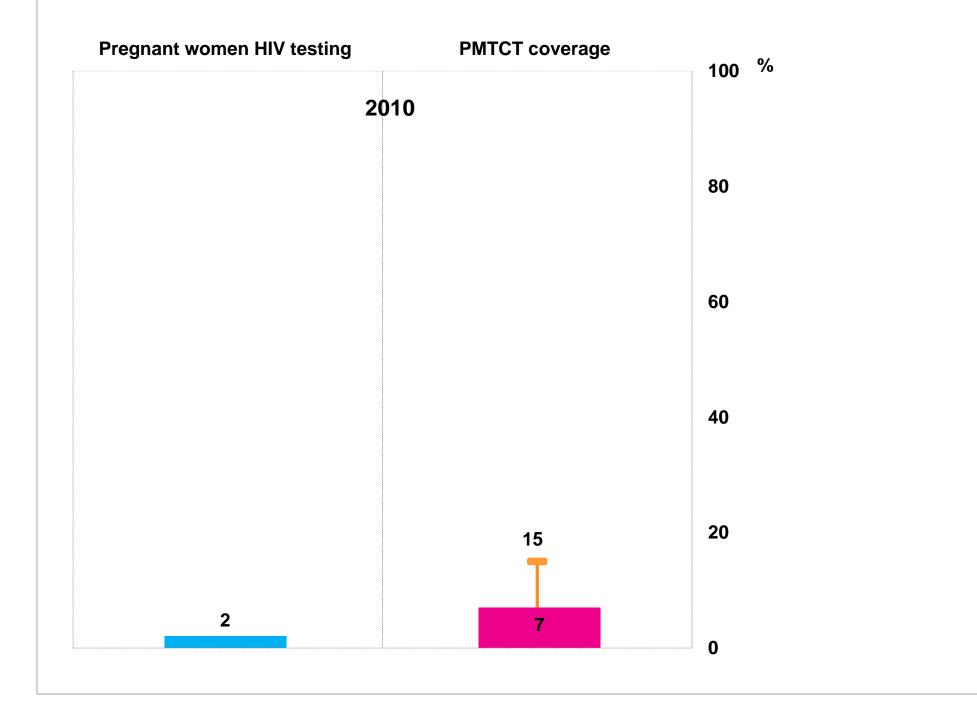


HIV testing coverage among key populations at higher risk



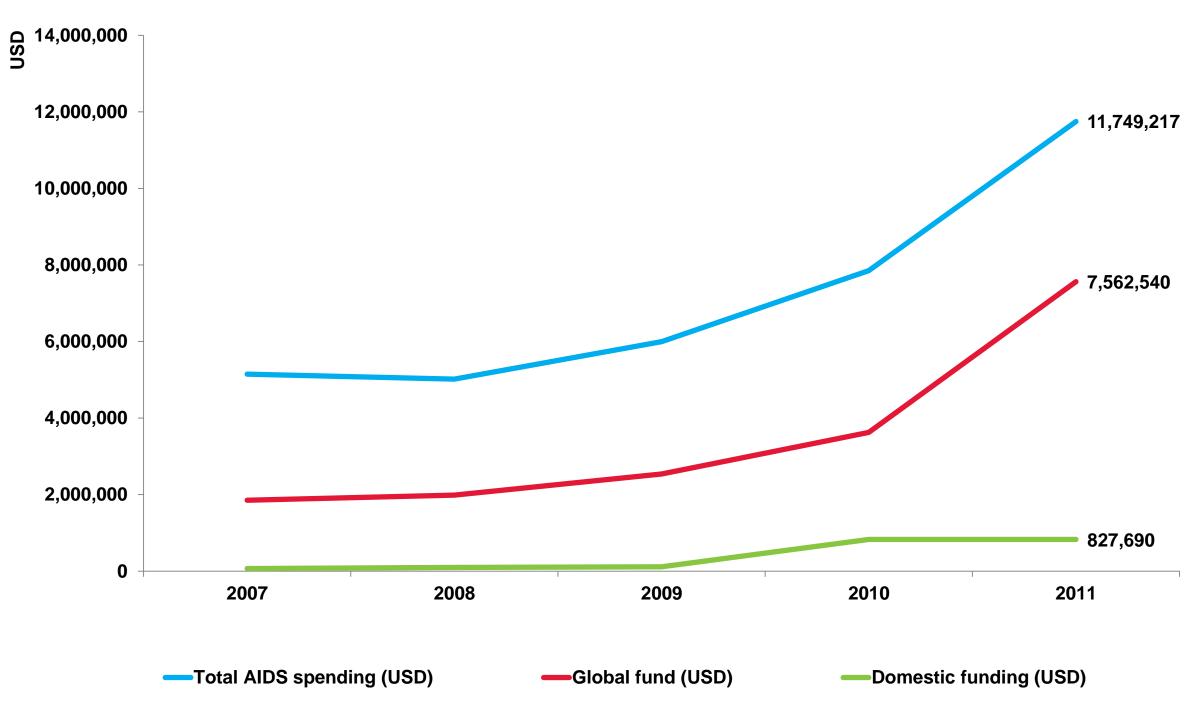
\*2007 Vientiane Capital, 2009 Luang Prabang, and 2010 Vientiane Capital and Savannakhet

### <200 Pregnant Women Eligible for Antiretroviral Therapy in 2011

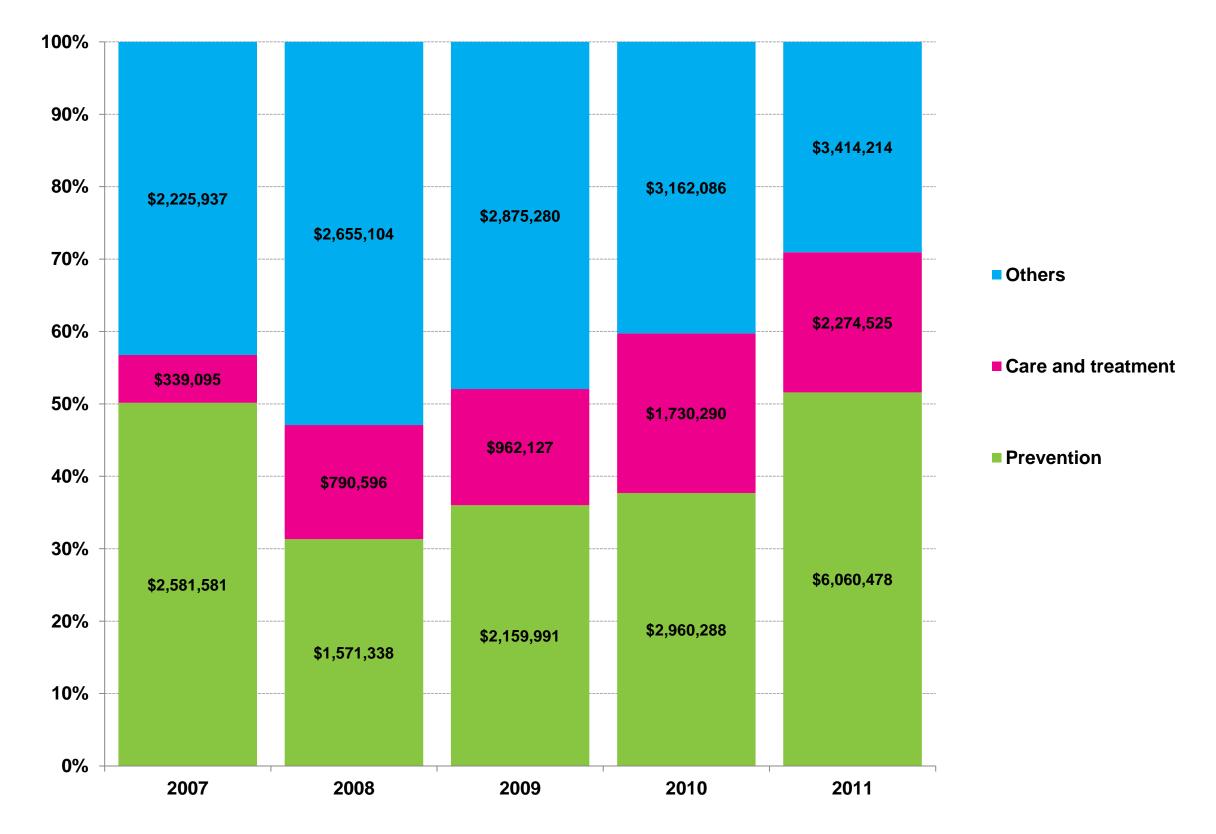




### **AIDS Spending by Financing Source**

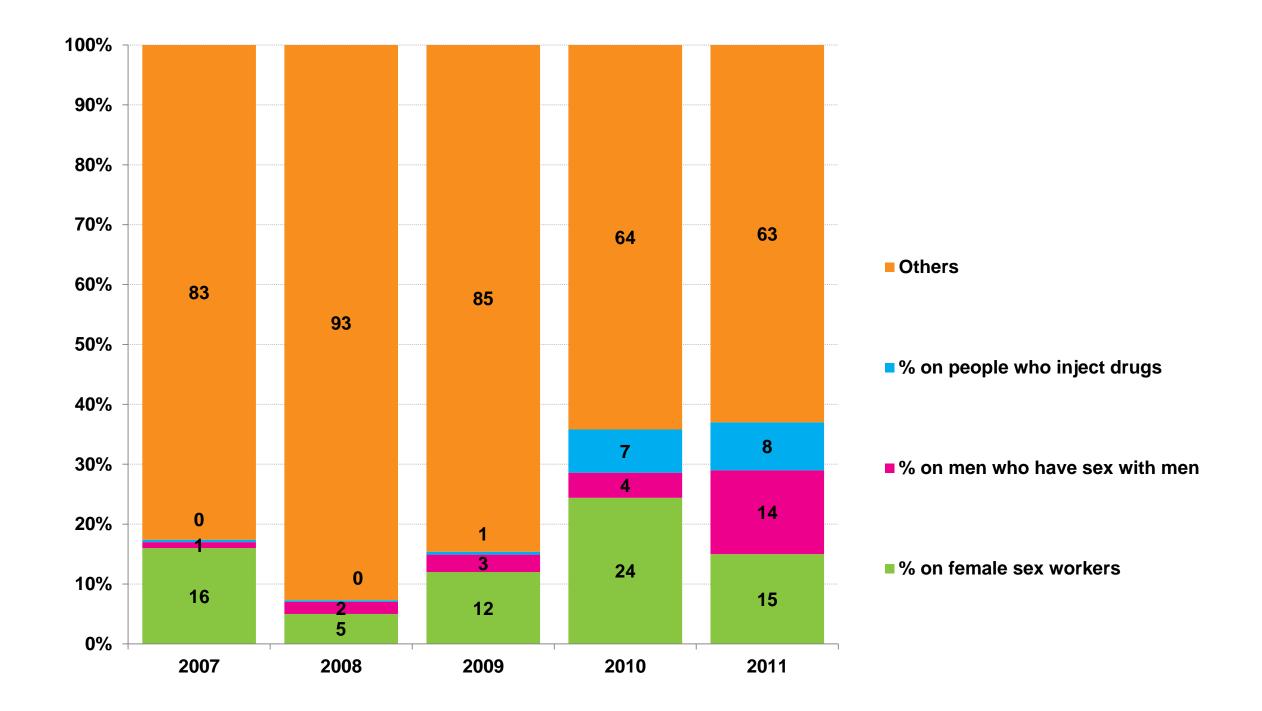


### AIDS spending by category



OSD

## Proportion of total prevention programme spending on key populations at higher risk





# Stigma & discrimination

## Analysis of GARP / NCPI 2012

### Legal obstacles to HIV response

Criminalize people who use drugs

Criminalize sex work

### **Selected indicators of response**

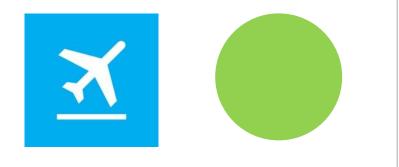
Access to justice:

- Legal services (legal aid or other)
  - NHRI or other mechanisms

Protective laws: Civil society rating of efforts to implement human rights-related laws and policies: **2009: 7/10** 



## Travel restrictions



## STIGMA INDEX

Percent of PLHIV respondents denied health services because of HIV status in past 12 months: Not reported

Lao PDR

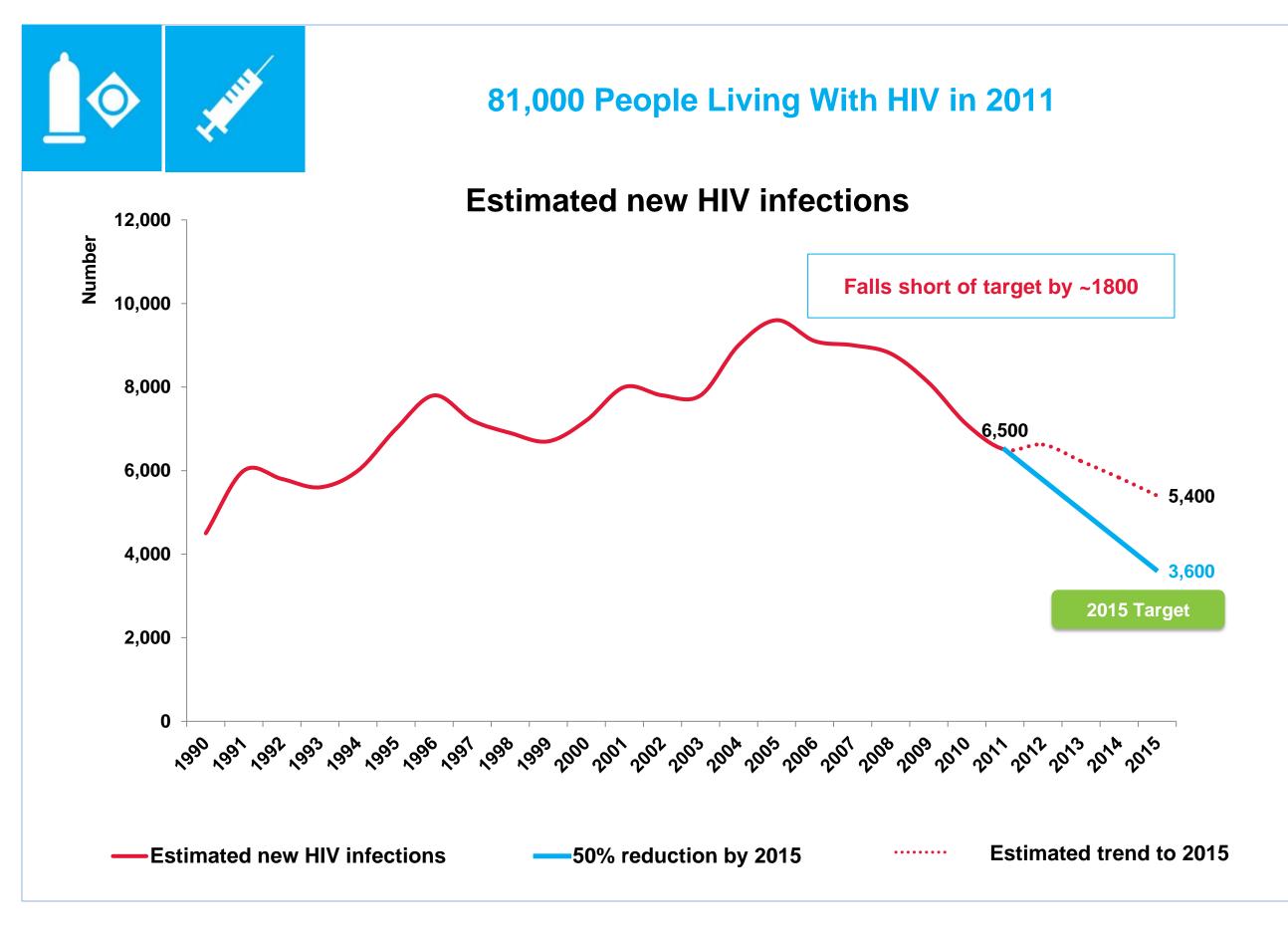
# CHALLENGES

- Marginalized sex workers, men who have sex with men and People who inject drugs have limited access to HIV prevention services.
- There is limited evidence and understanding of the specific needs of women and girls in the context of HIV.
- Stigma and discrimination are reported to be daily realities for people living with HIV.

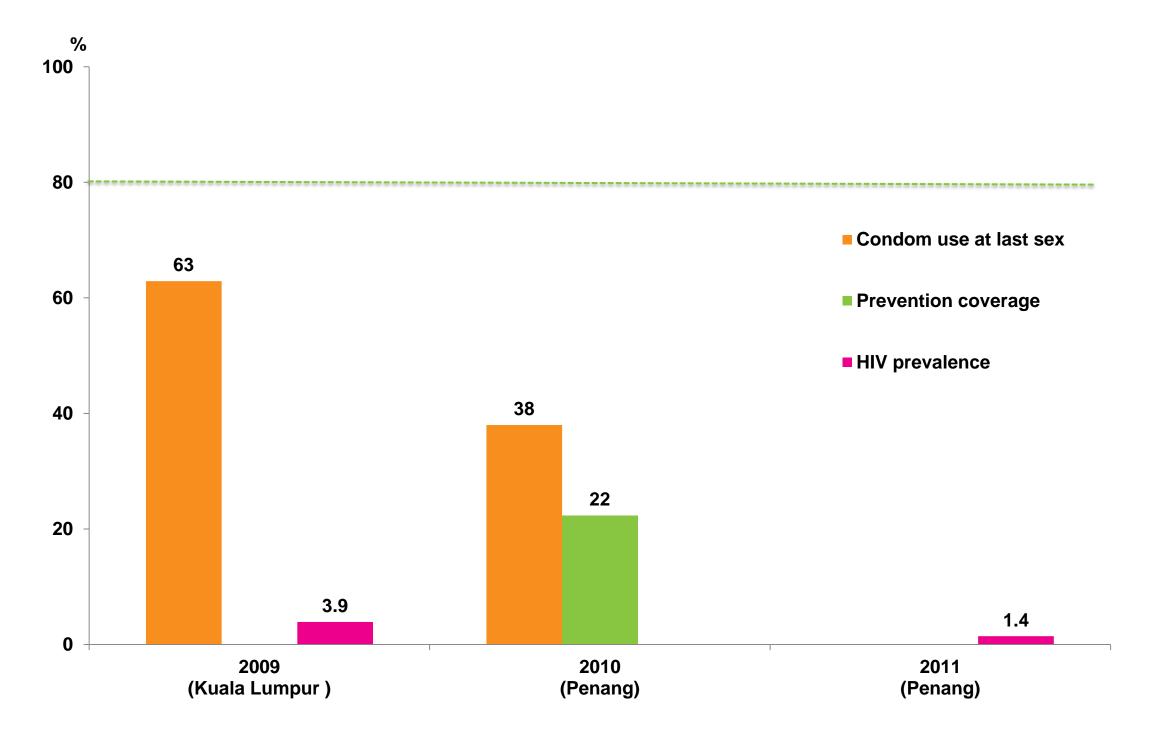
## **GAME CHANGERS**

- The 2012 external review of the HIV programme recommends to re-design existing HIV prevention and treatment policies and models aligned with the IF.
- The 2012 legislation review toward anti – GBV legislation provides evidence for a "Agenda for Accelerated Country Action" road map to meet the needs of women in the context of HIV.
- The 2012 stigma index survey provides evidence to further build understanding of and commitment to stigma and discrimination reduction.

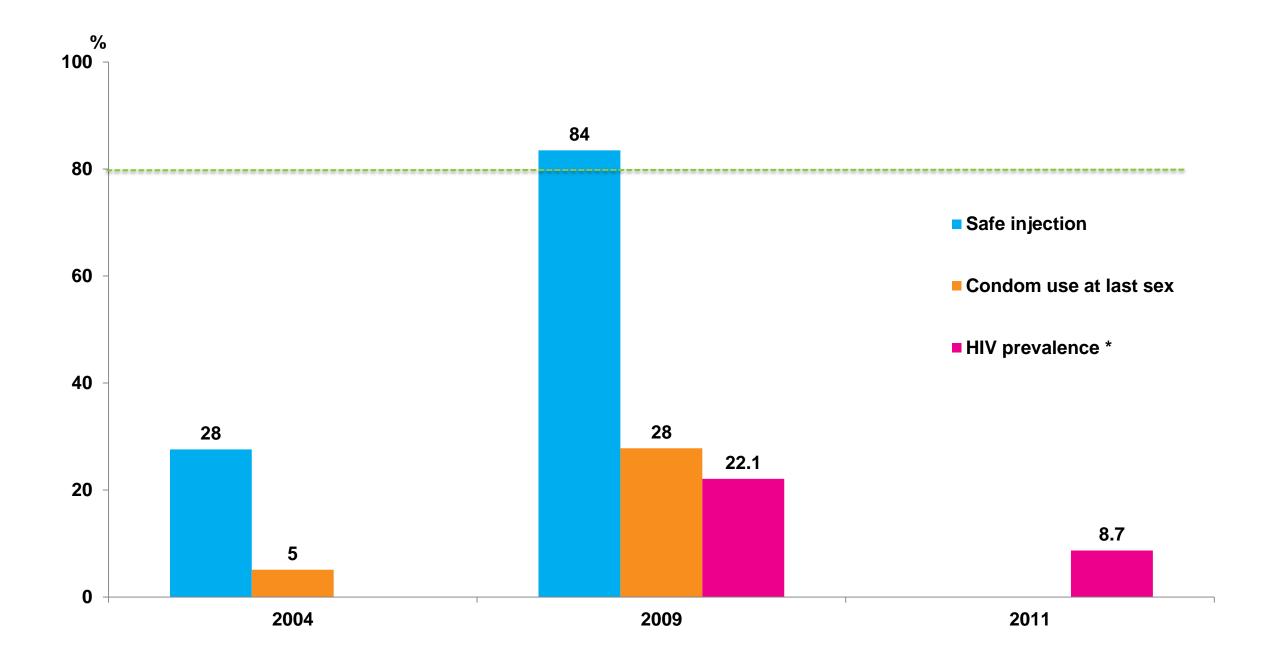
# MALAYSIA



## Men Who Have Sex With Men: HIV prevalence, behaviour and prevention coverage

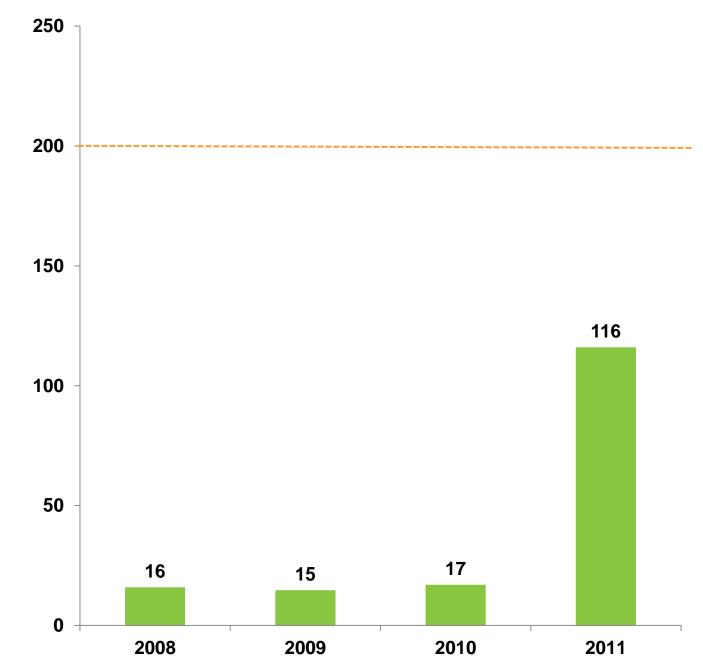


### **People Who Inject Drugs: HIV prevalence and behaviors**



\* 2011 data from screening programme in drug rehabilitation centres and harm reduction services

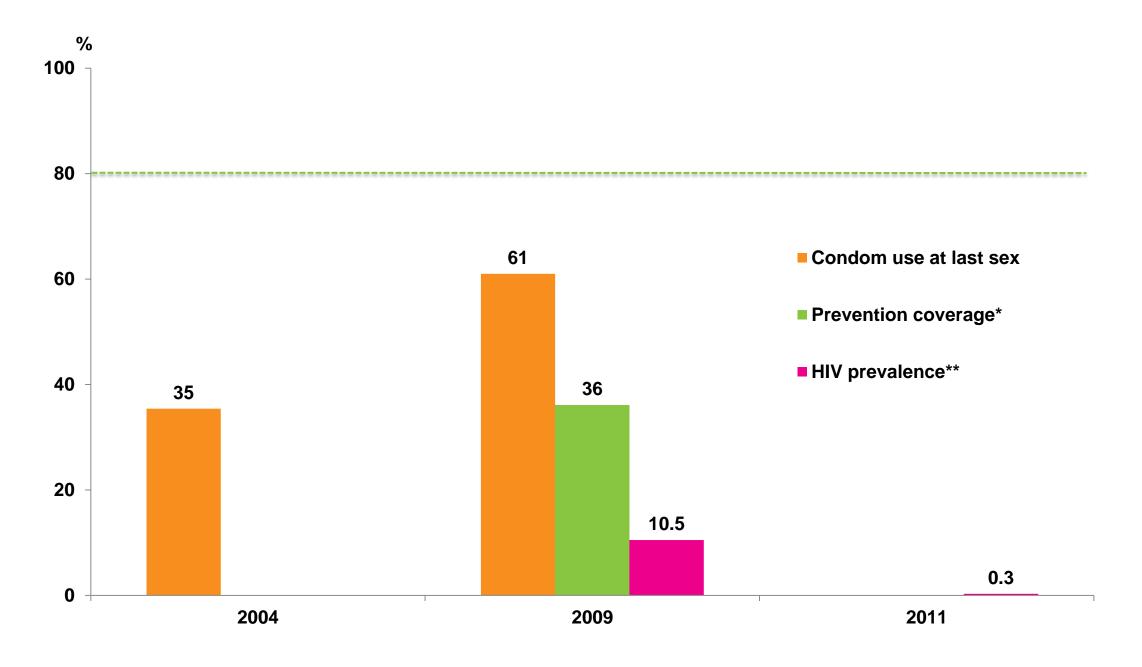




Number of needles/syringes

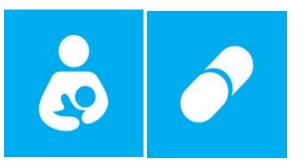
Malaysia

#### Female Sex Workers: HIV prevalence, behaviour and prevention coverage



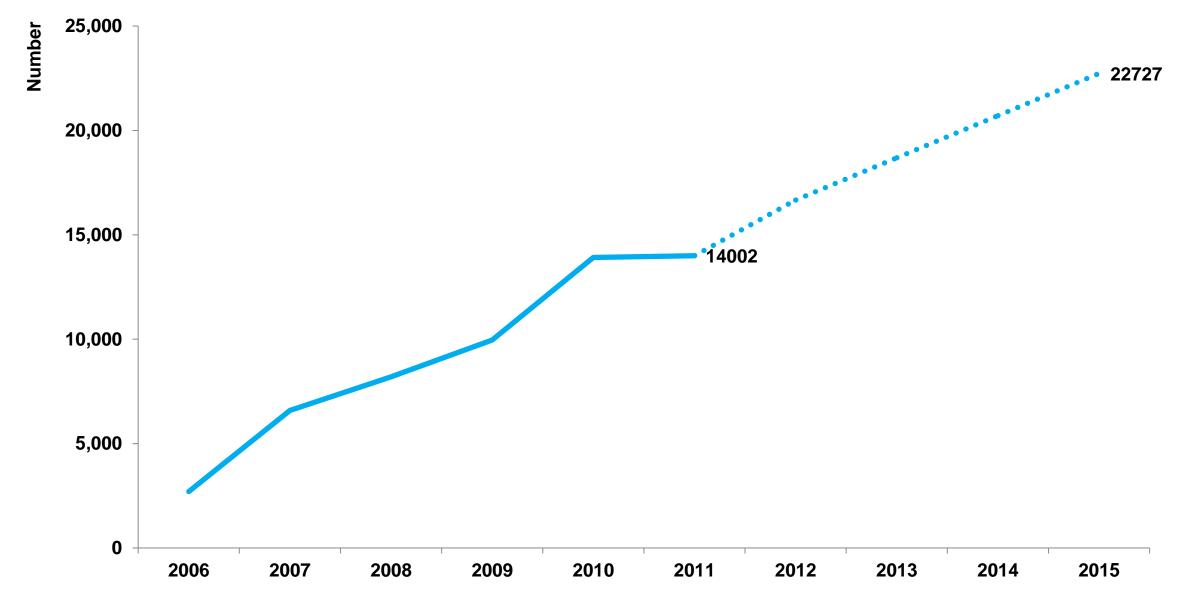
\* reached with outreach interventions

\*\* 2011 data from government and private health facilities, and NGO clinics

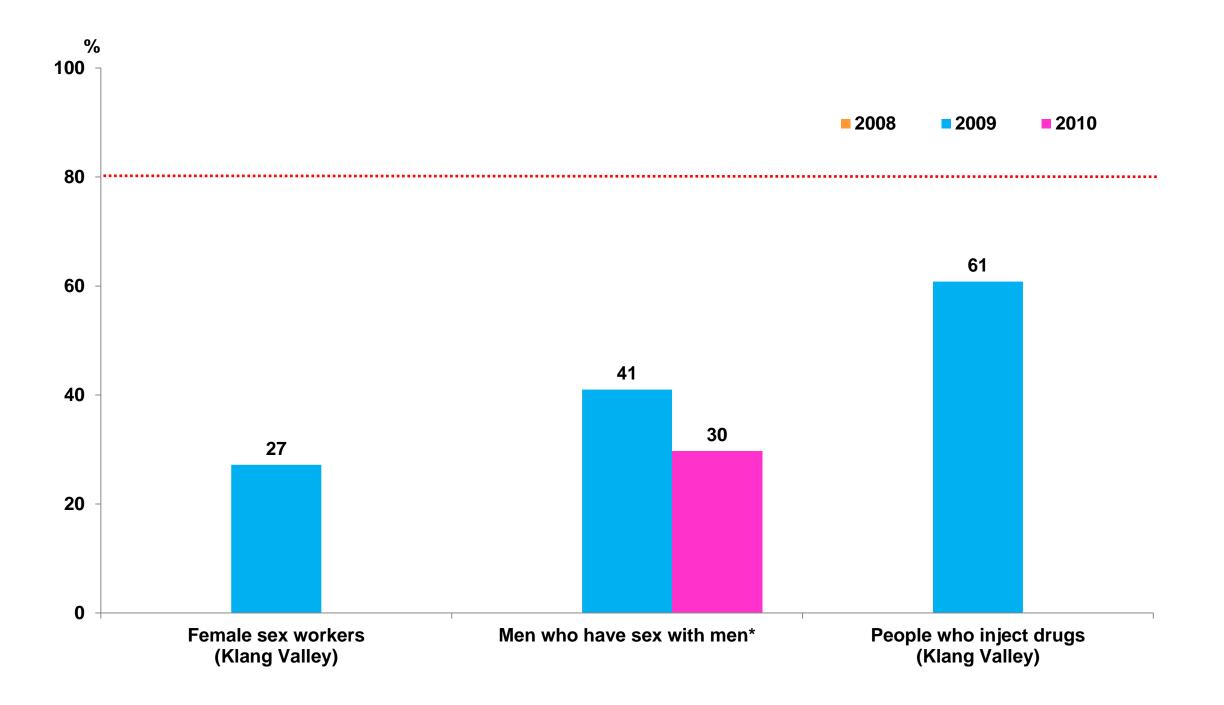


# 37,000 Adults Eligible for Antiretroviral Therapy in 2011

### Number of people receiving antiretroviral therapy

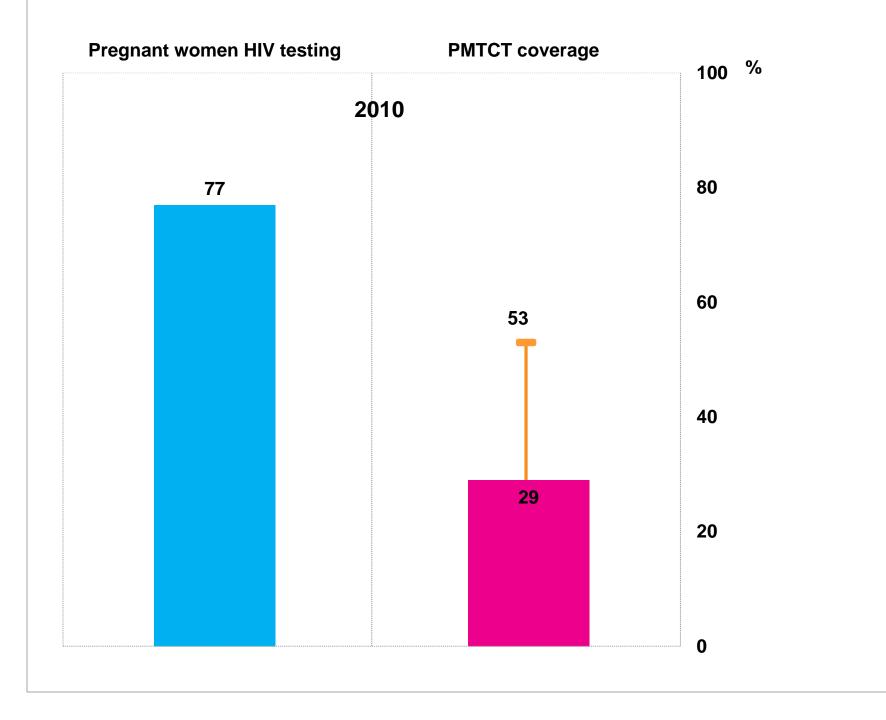


HIV testing coverage among key populations at higher risk



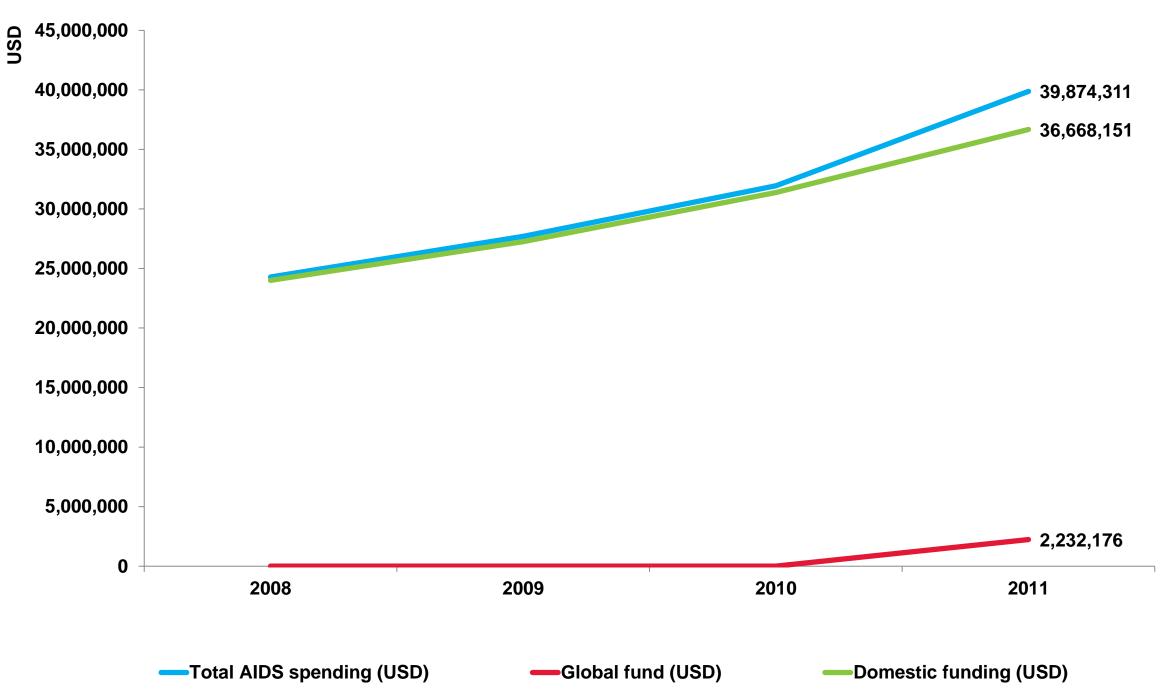
\* 2009 data from Kuala Lumpur and 2010 from Penang

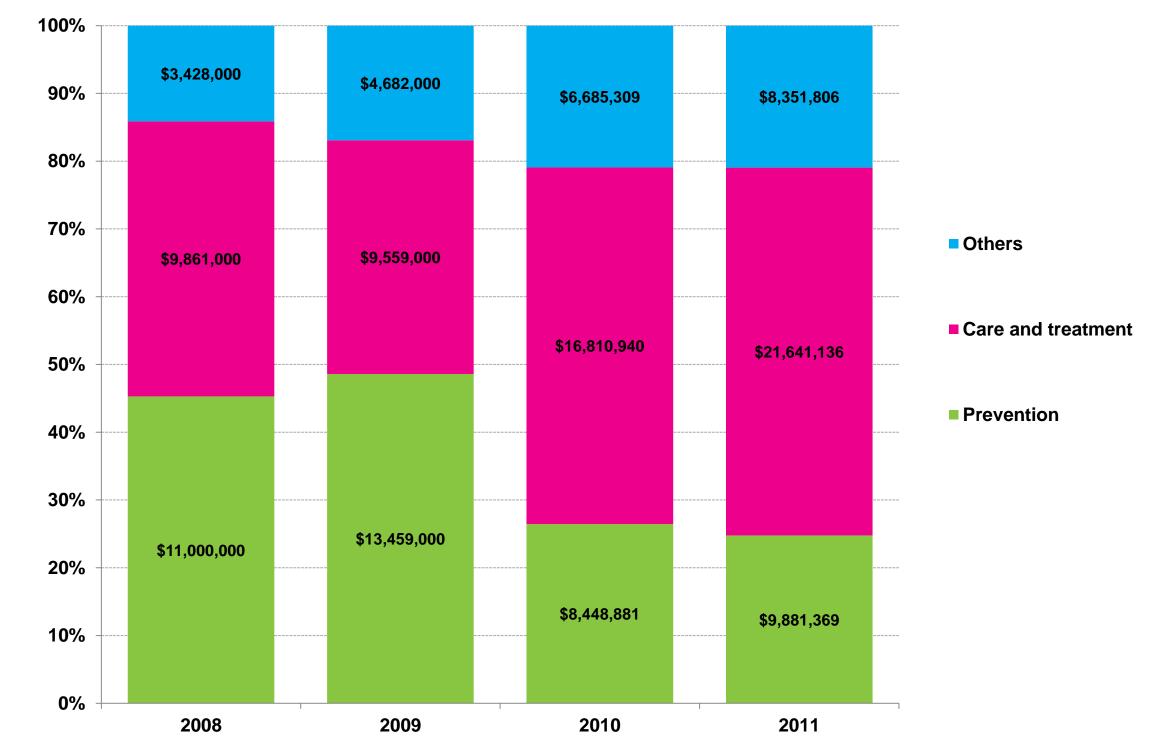
### <200 Pregnant Women Eligible for Antiretroviral Therapy in 2011





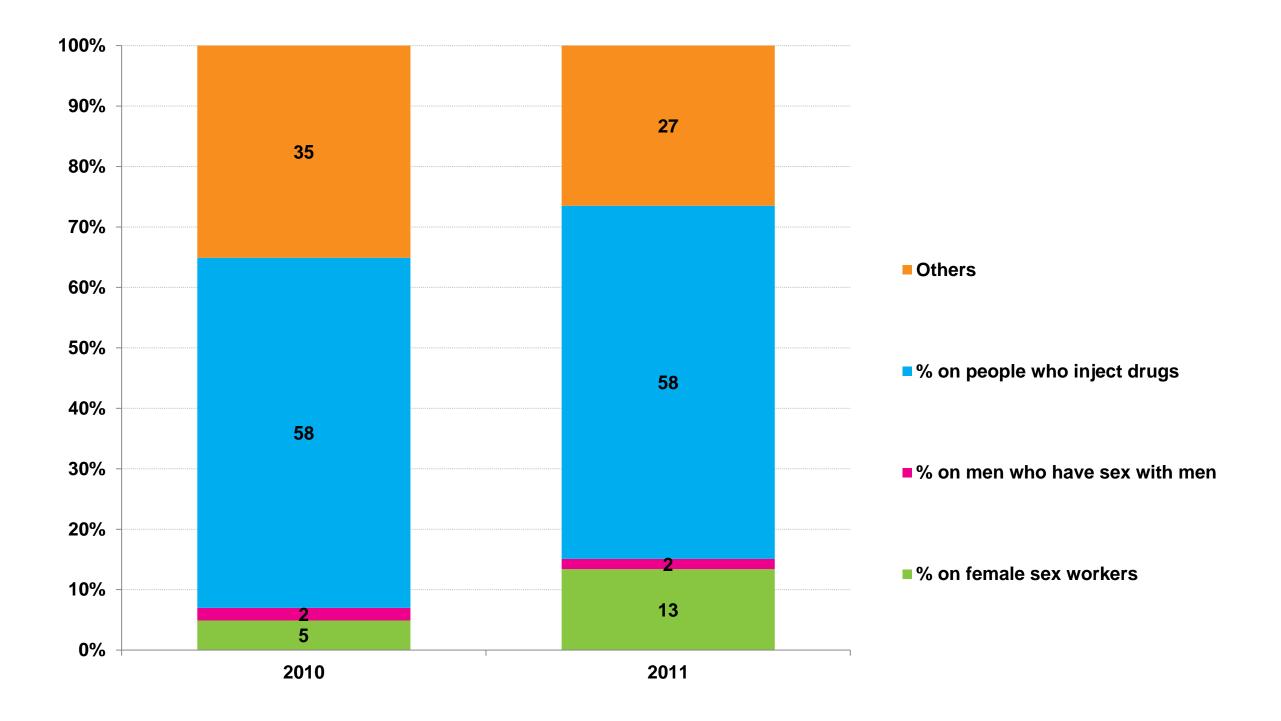
### **AIDS Spending by Financing Source**





USD

## Proportion of total prevention programme spending on key populations at higher risk





# Stigma & discrimination

## Analysis of GARP / NCPI 2012

### Legal obstacles to HIV response

- Criminalize men who have sex with men
- Criminalize people who use drugs
- Compulsory detention of people who use drugs Restrictions on some IEC as pornography
- Criminalize cross-dressing (as "indecent")

### **Selected indicators of response**

Access to justice:

- Legal services (legal aid or other)
  - NHRI or other mechanisms

Protective laws:

Civil society rating of efforts to implement human rights-related laws and policies: **2009: 7/10** 

# Travel restrictions



Percent of PLHIV respondents denied health services because of HIV status in past 12 months: N/A



# CHALLENGES

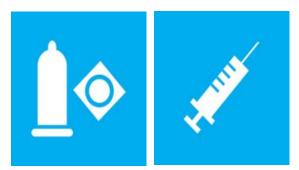
- Assessed as being amongst the countries in the region with the most punitive laws hindering the HIV response
- Lack of a dedicated UNAIDS HIV Coordinator for a year, affecting the focus on HIV-related activities
- Capacity of the Civil Society Organizations implementing the response requires strengthening in project design, management, M&E, and resource mobilization

# **GAME CHANGERS**

- Legal review resulting in remedial actions to prevent punitive laws from being obstacles to scaling up the HIV response.
- Evaluation of the impact of harm reduction measures to prove the return on government investment in the HIV response and advocate for sustained resources
  - Measures to address stigma and social discrimination towards men who have sex with men, people who inject drugs and sex workers

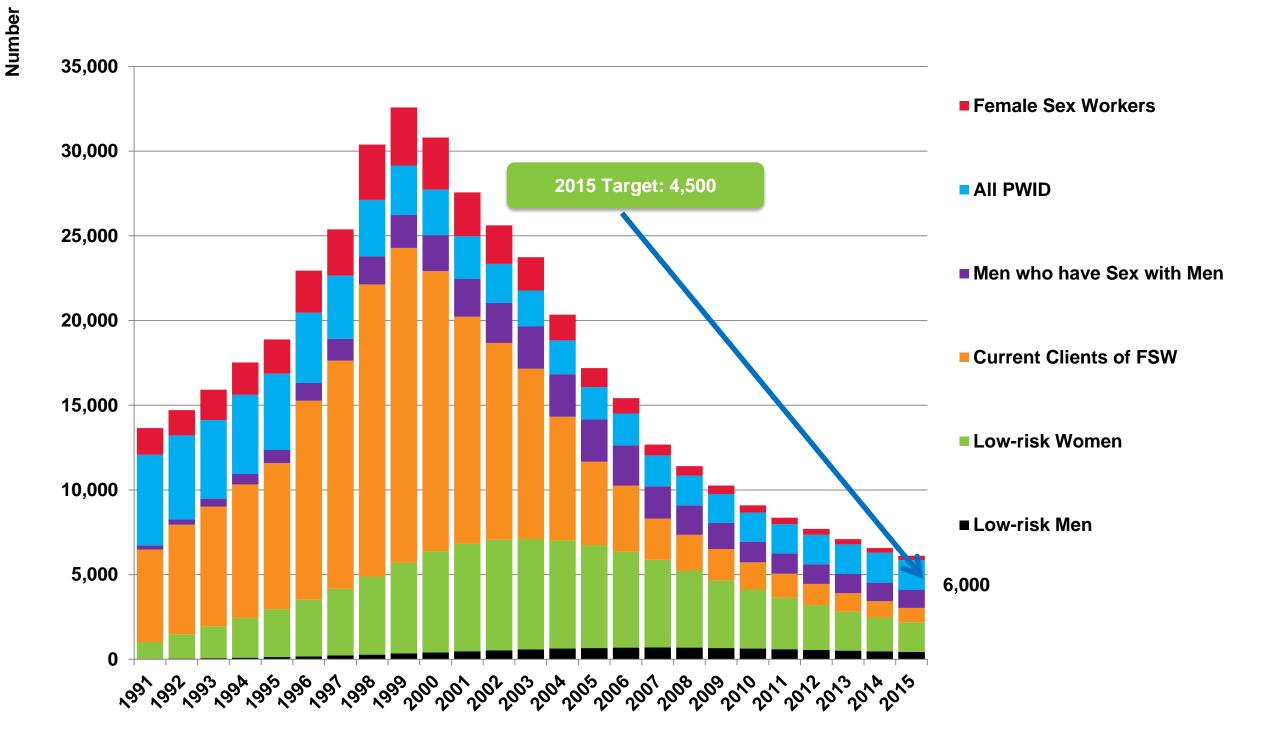
 ${\bullet}$ 

# MYANMAR

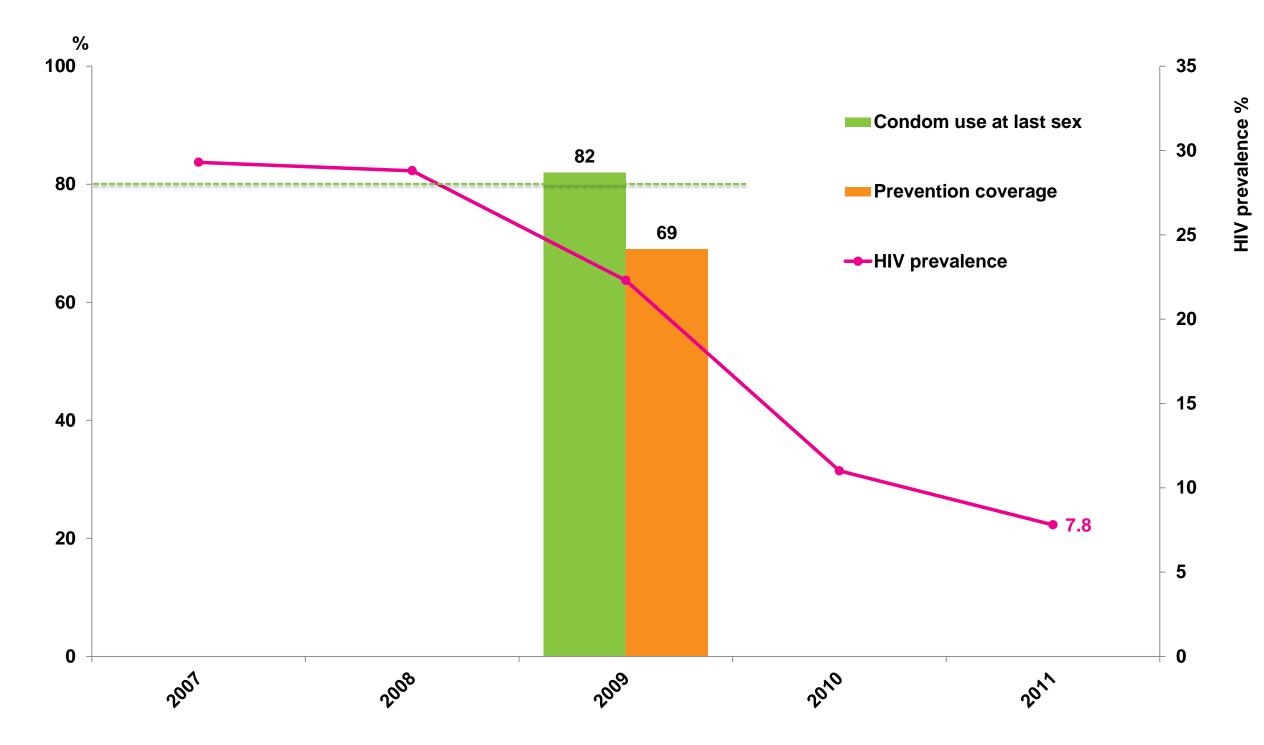


### 220,000 People Living With HIV in 2011

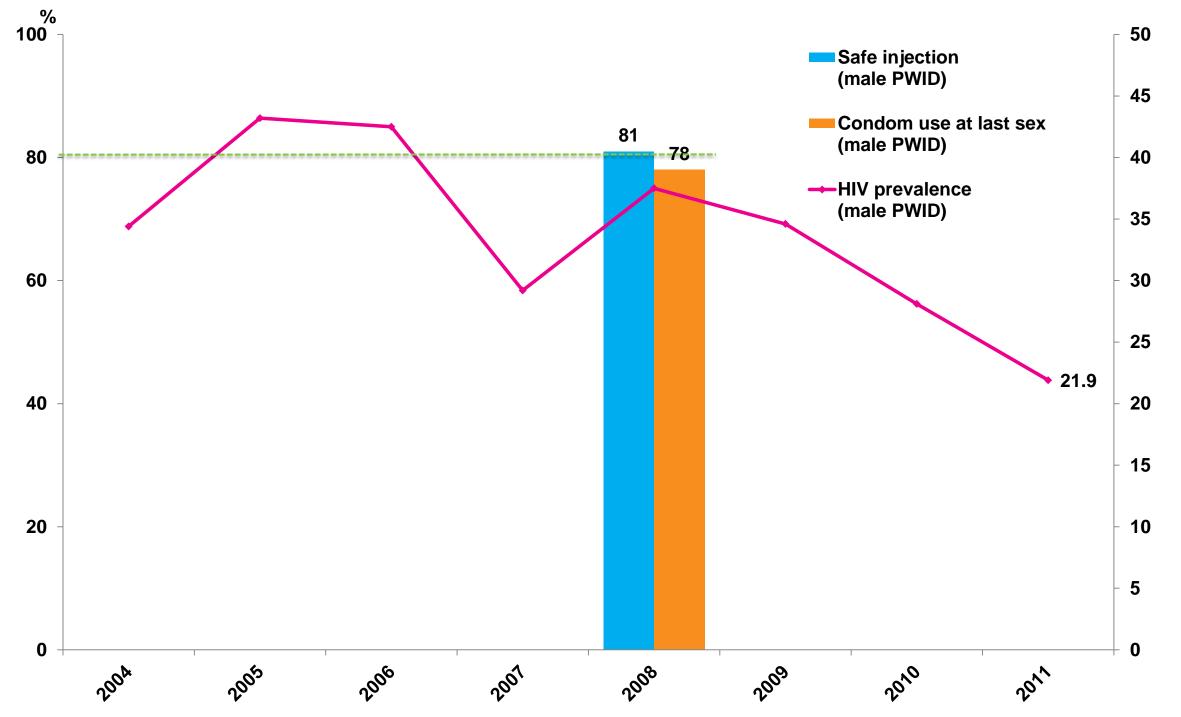
Estimated adult new HIV infections by sub-population (AEM)



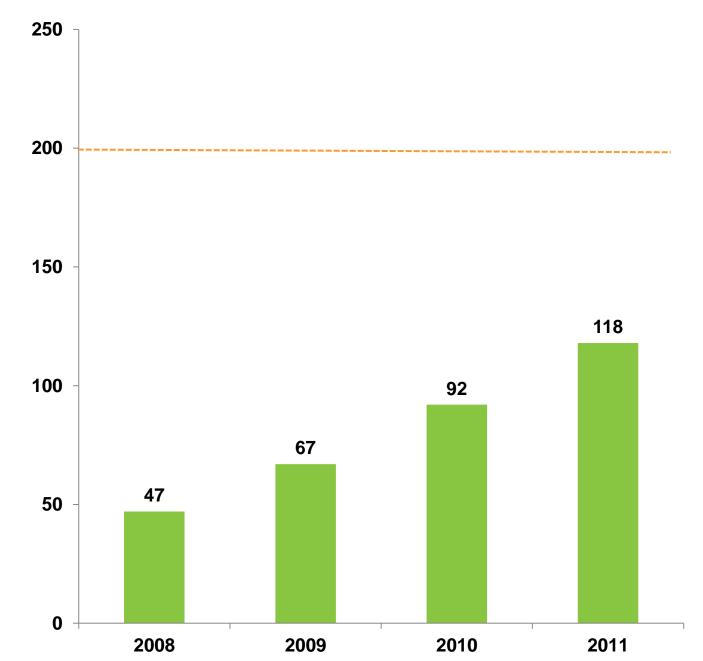
## Men Who Have Sex With Men: HIV prevalence, behaviour and prevention coverage



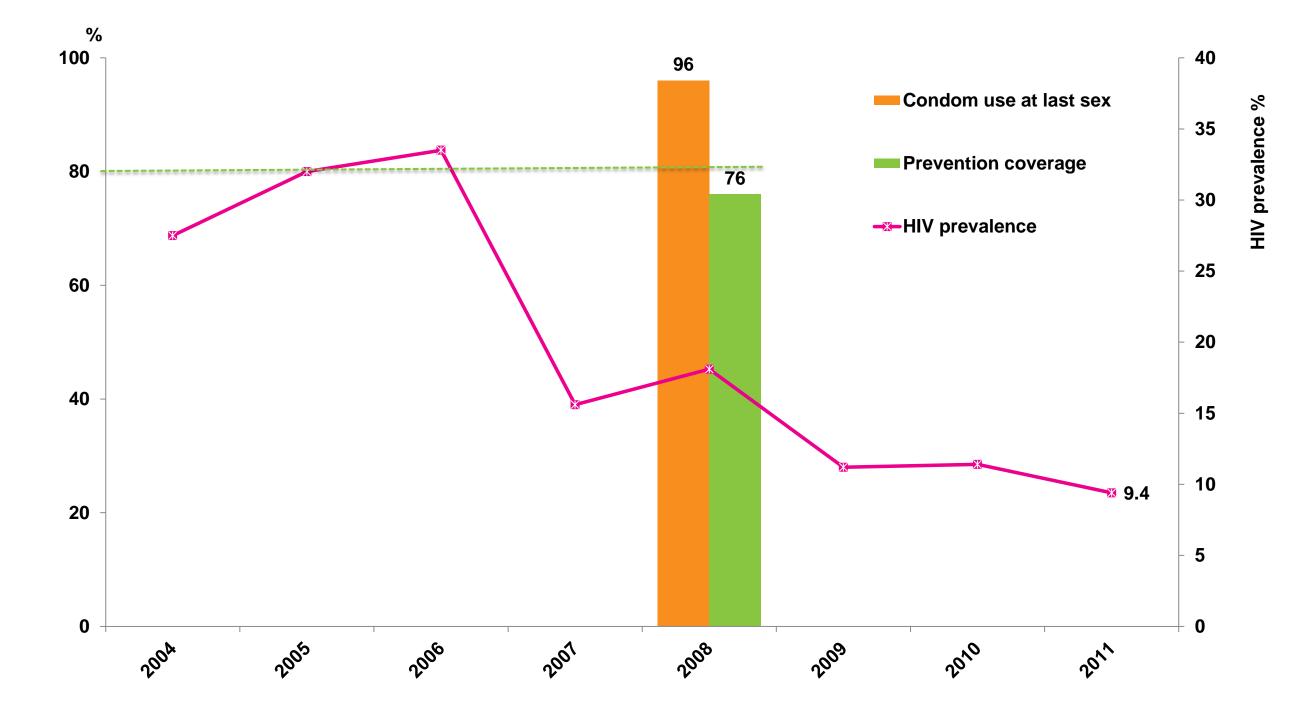
### People Who Inject Drugs: HIV prevalence and behaviors

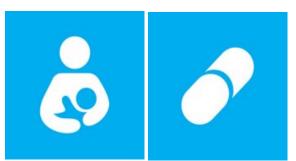


## Number of needle/syringes distributed per person who inject drugs per year



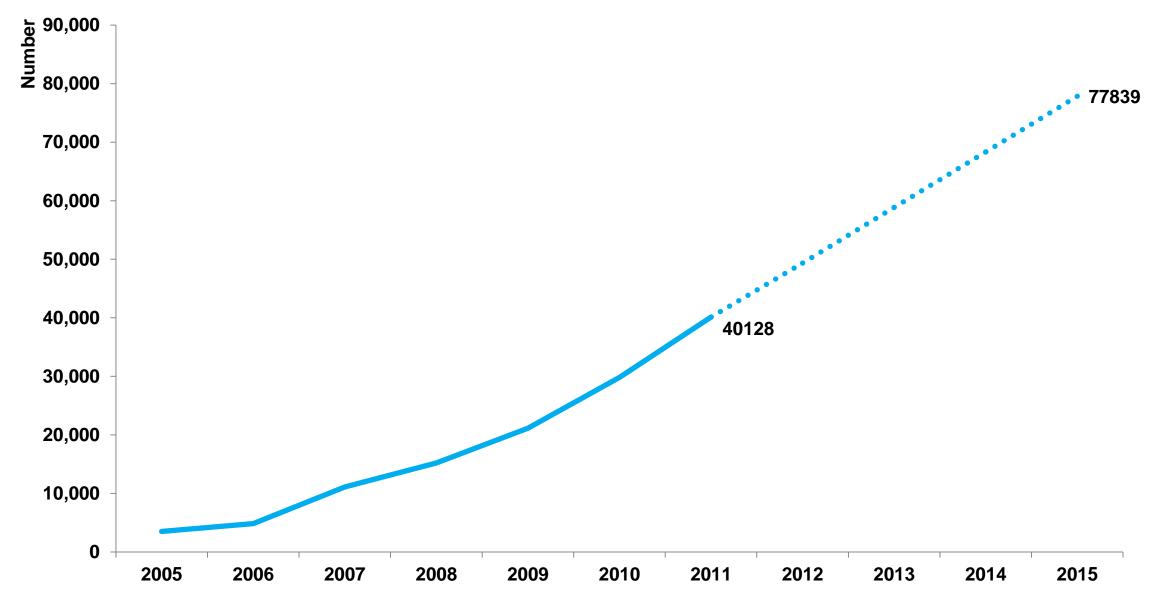
## Female Sex Workers: HIV prevalence, behaviour and prevention coverage





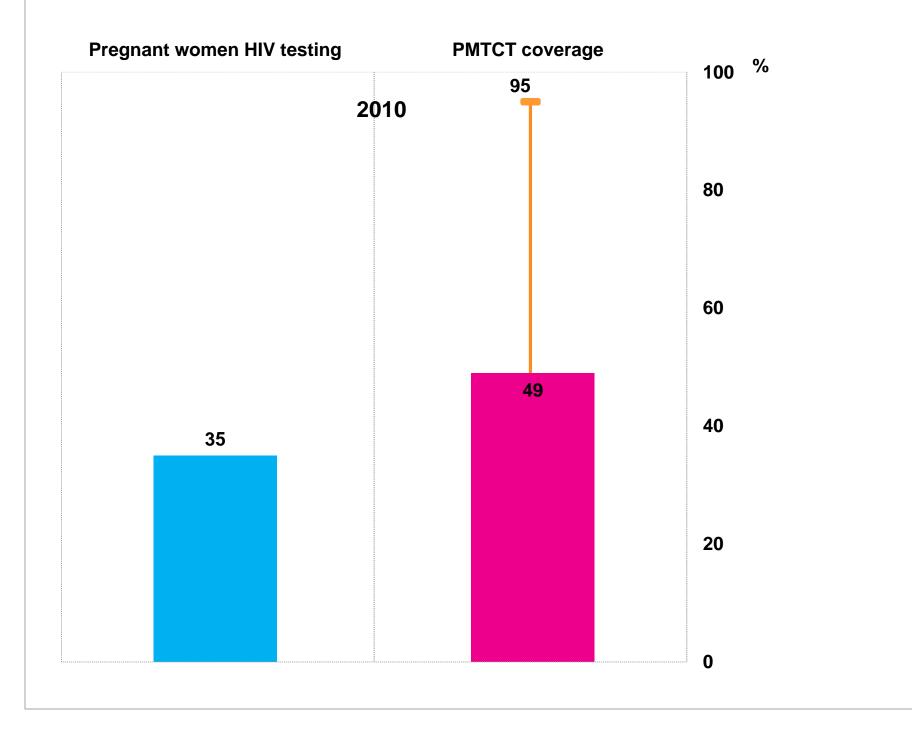
### 120,000 Adults Eligible for Antiretroviral Therapy in 2011

### Number of people receiving antiretroviral therapy



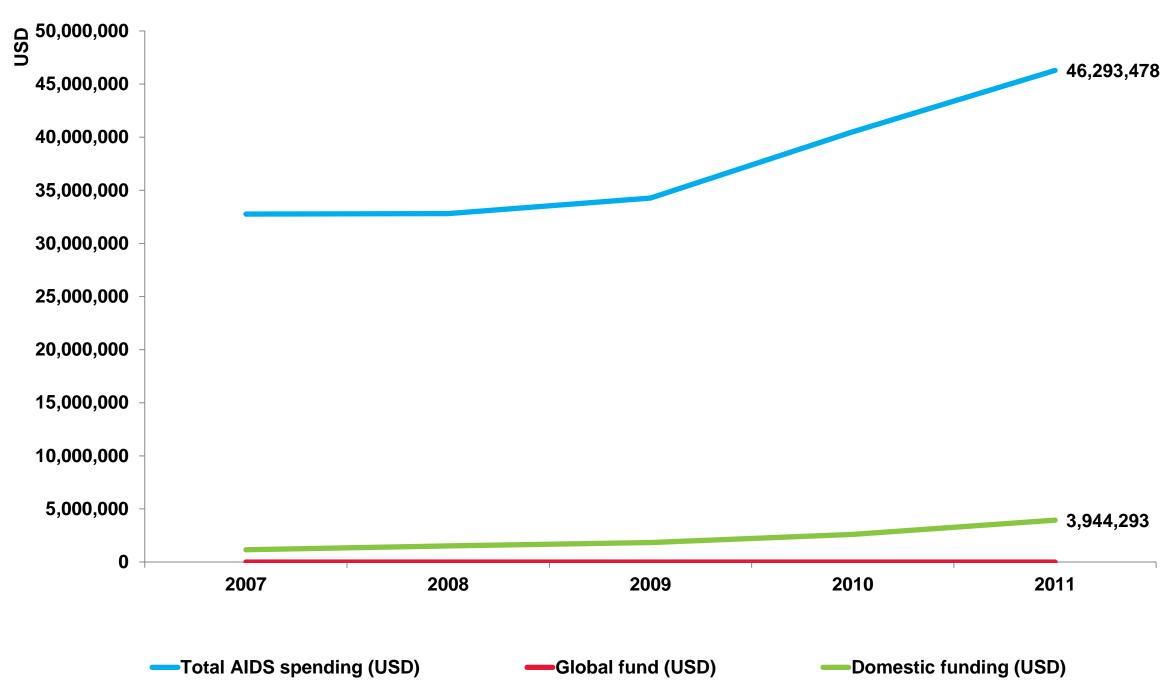


### 3,132 Pregnant Women Eligible for Antiretroviral Therapy in 2011





### **AIDS Spending by Financing Source**



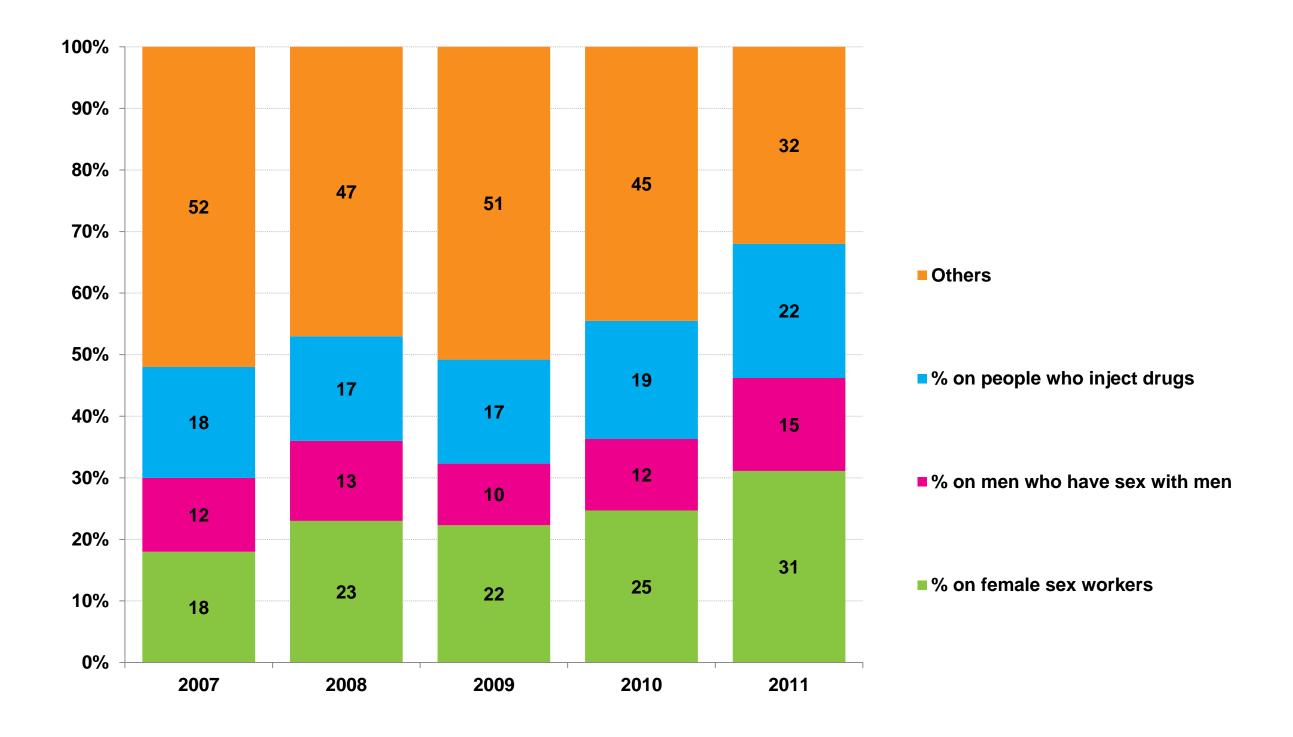
#### AIDS spending by category



NSD

Myanmar

## Proportion of total prevention programme spending on key populations at higher risk





# Stigma & discrimination

### Analysis of GARP / NCPI 2012

### Legal obstacles to HIV response

- Criminalize men who have sex with men
  - Criminalize people who use drugs
  - Criminalize sex work

### **Selected indicators of response**

Access to justice:

- Legal services (legal aid or other)
- NHRI or other mechanisms

### Protective laws:

Civil society rating of efforts to implement human rights-related laws and policies: **2009: 2/10** 

## 2011: 4/10

#### Myanmar

## Travel restrictions



## STIGMA INDEX

Percent of PLHIV respondents denied health services because of HIV status in past 12 months: 9%

# CHALLENGES

- Access to resources
- Capacity of health sector partners
- Availability and quality of data

# **GAME CHANGERS**

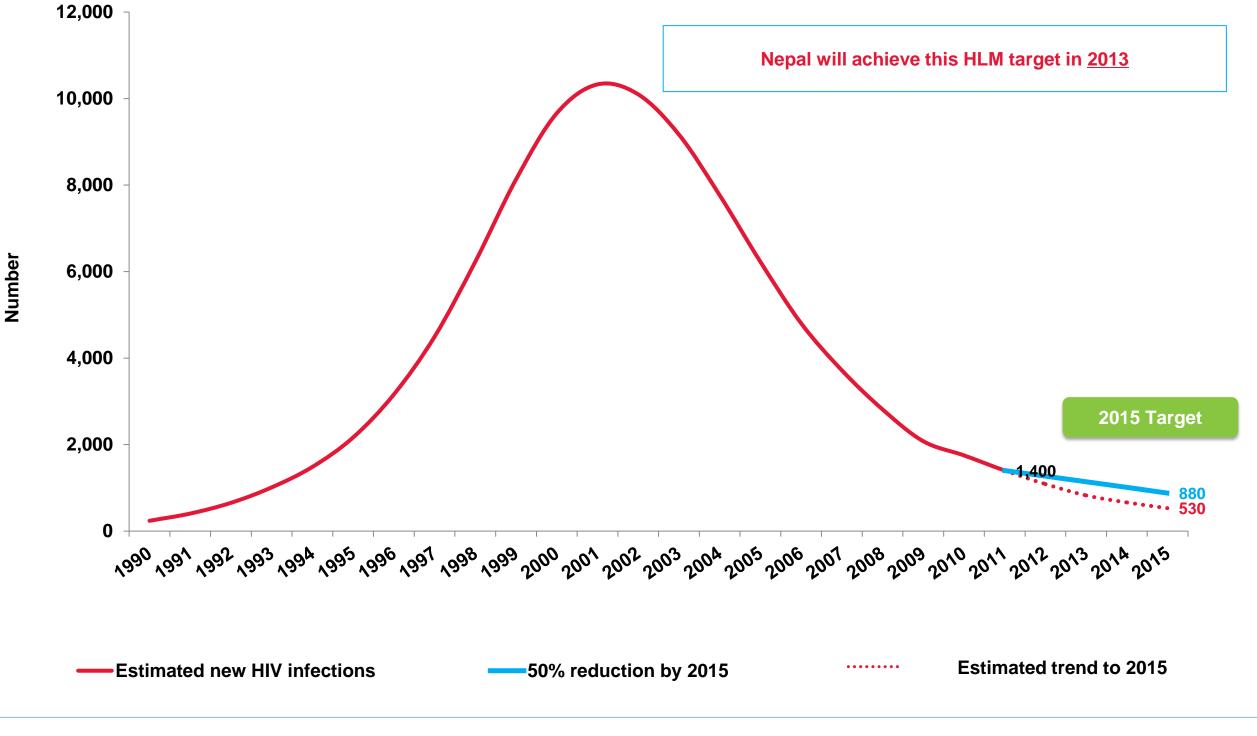
- Unique GF support for testing and treatment
- Focusing new partners on capacity building
- Supporting broadened coordination role of M-CCM

# NEPAL

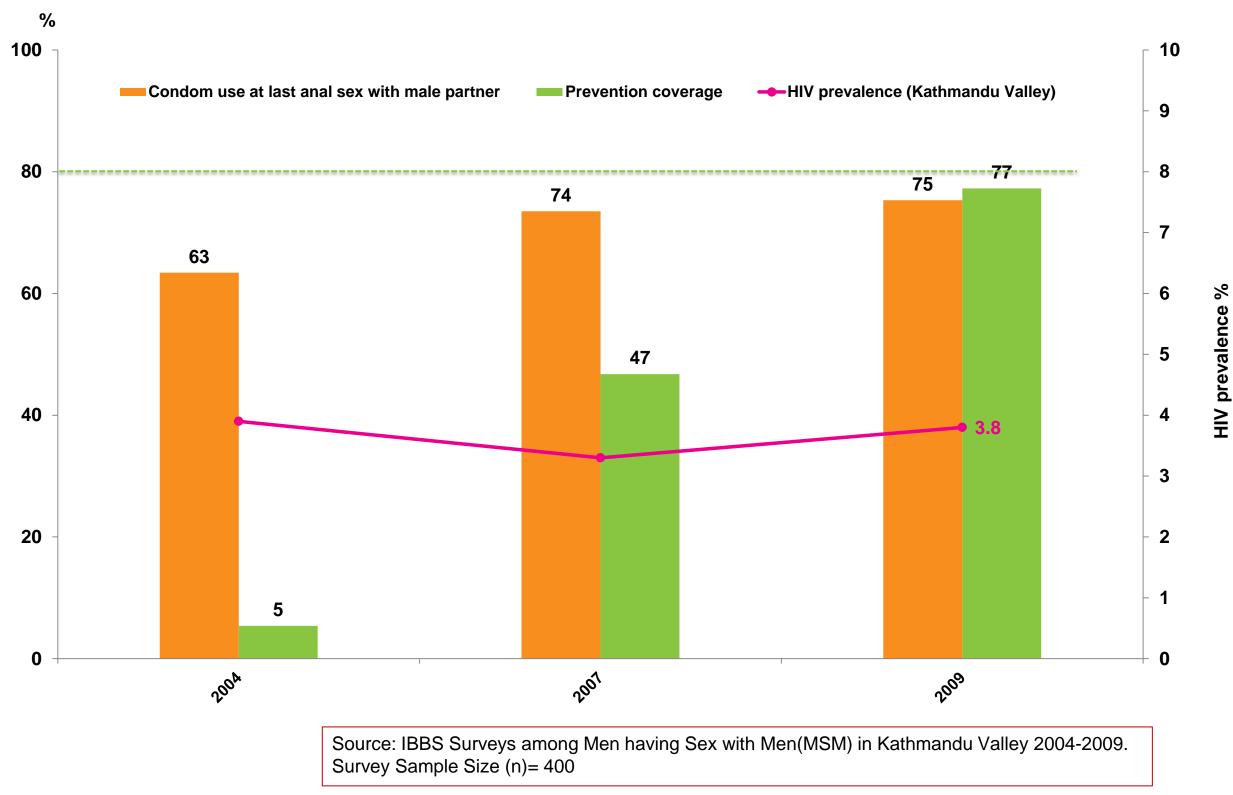


#### 50,000 People Living With HIV in 2011, in Nepal

#### **Estimated new HIV infections**

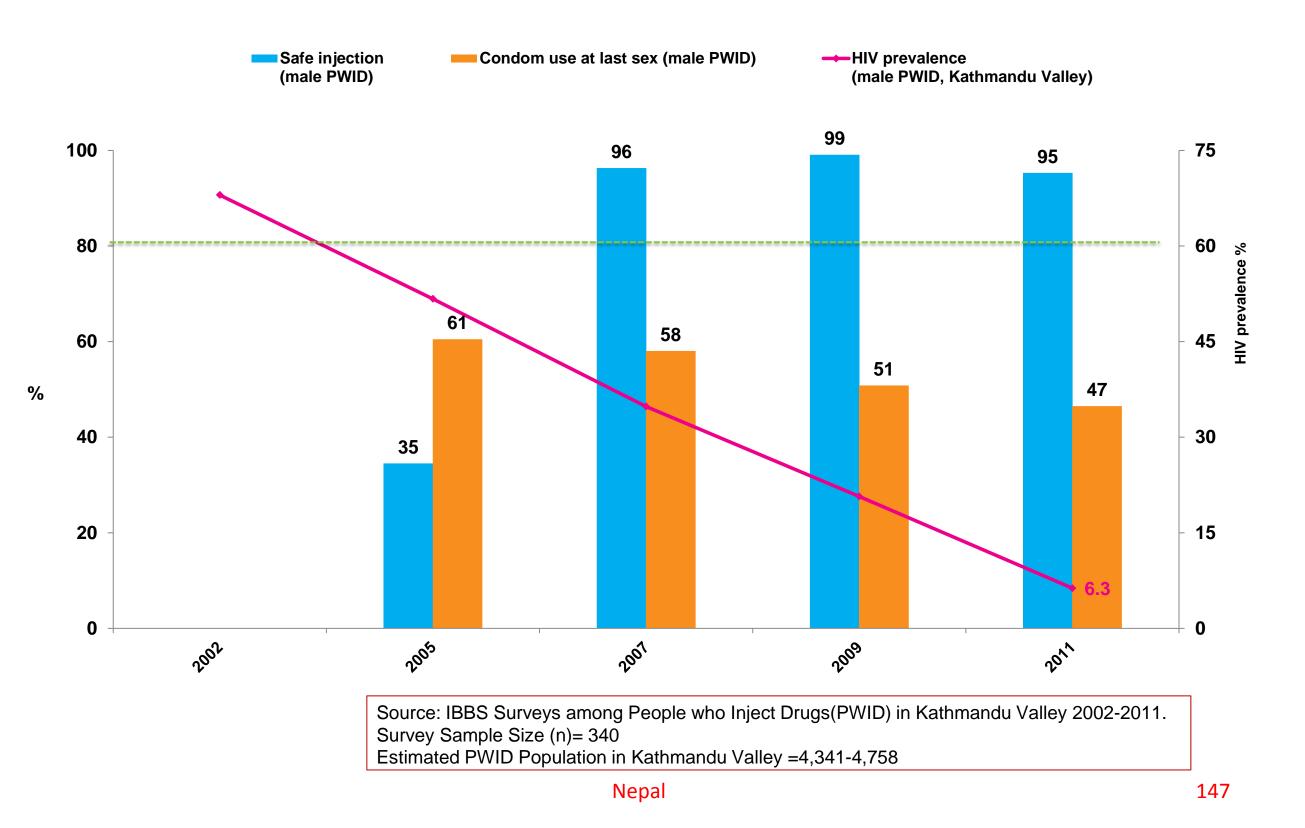


#### Men Who Have Sex With Men: HIV prevalence, behaviour and prevention coverage, Kathmandu Valley

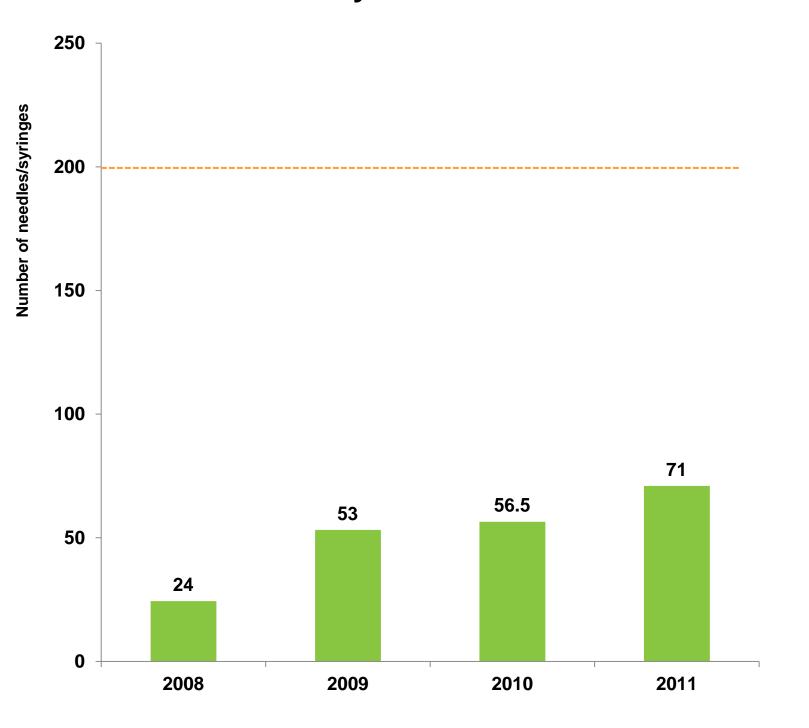


#### Nepal

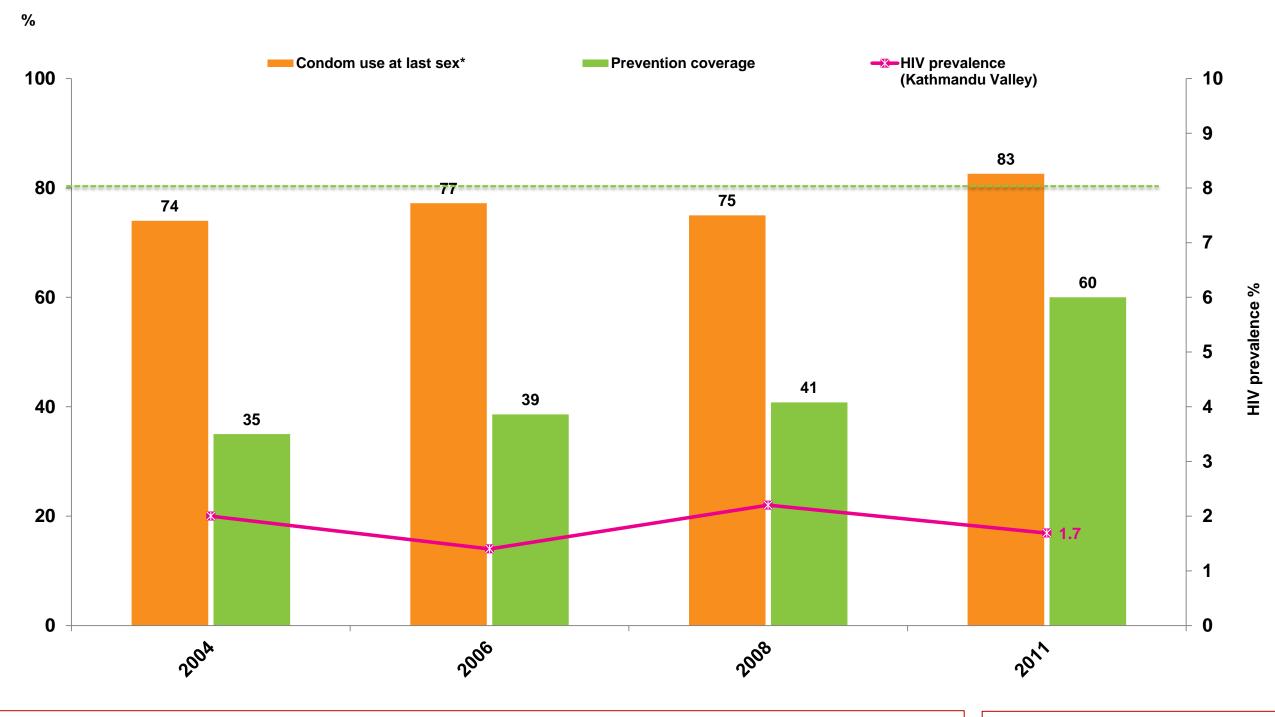
#### People Who Inject Drugs: HIV prevalence and behaviors, Kathmandu Valley



#### Number of needle/syringes distributed per person who inject drugs per year, Nepal countrywide

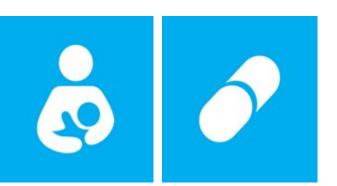


## Female Sex Workers: HIV prevalence, behaviour and prevention coverage, Kathmandu Valley

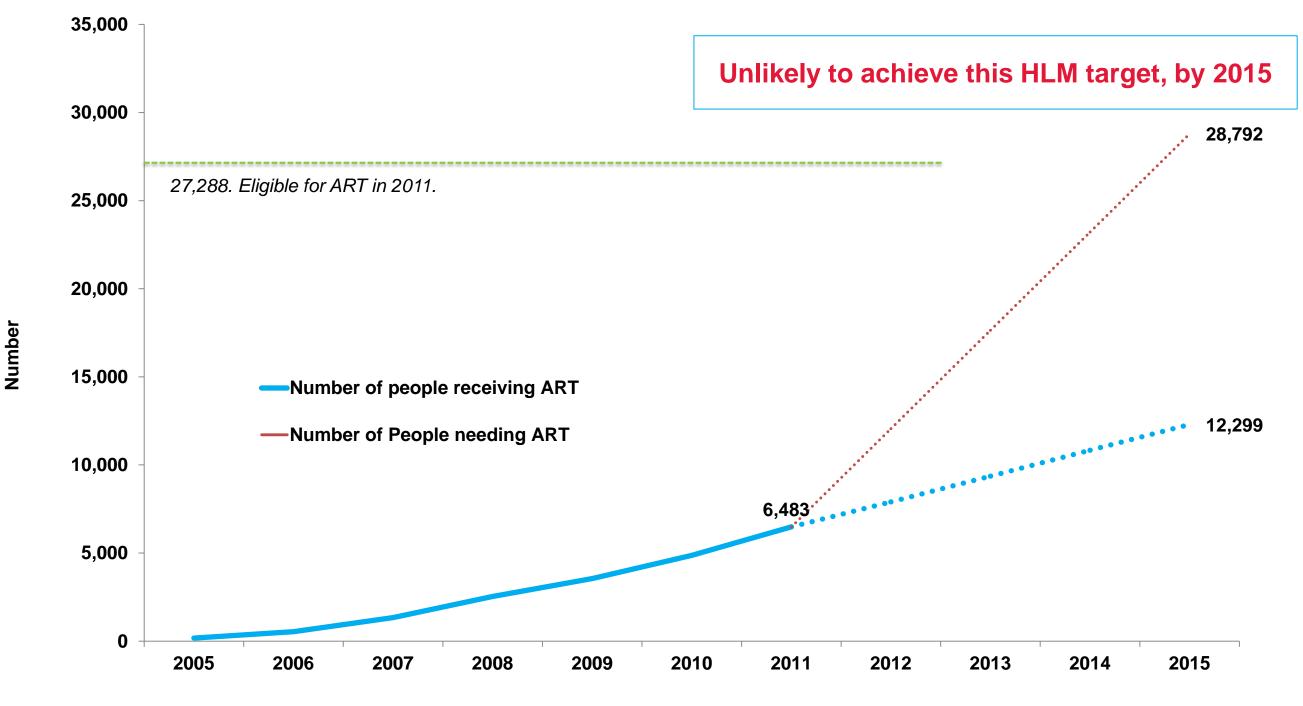


Source: IBBS Surveys among Female Sex Worker(FSW) in Kathmandu Valley 2002-2011. Survey Sample Size (n)= 593 Estimated FSW Population in Kathmandu Valley = 10,457-11,653 \* with new client in the last week

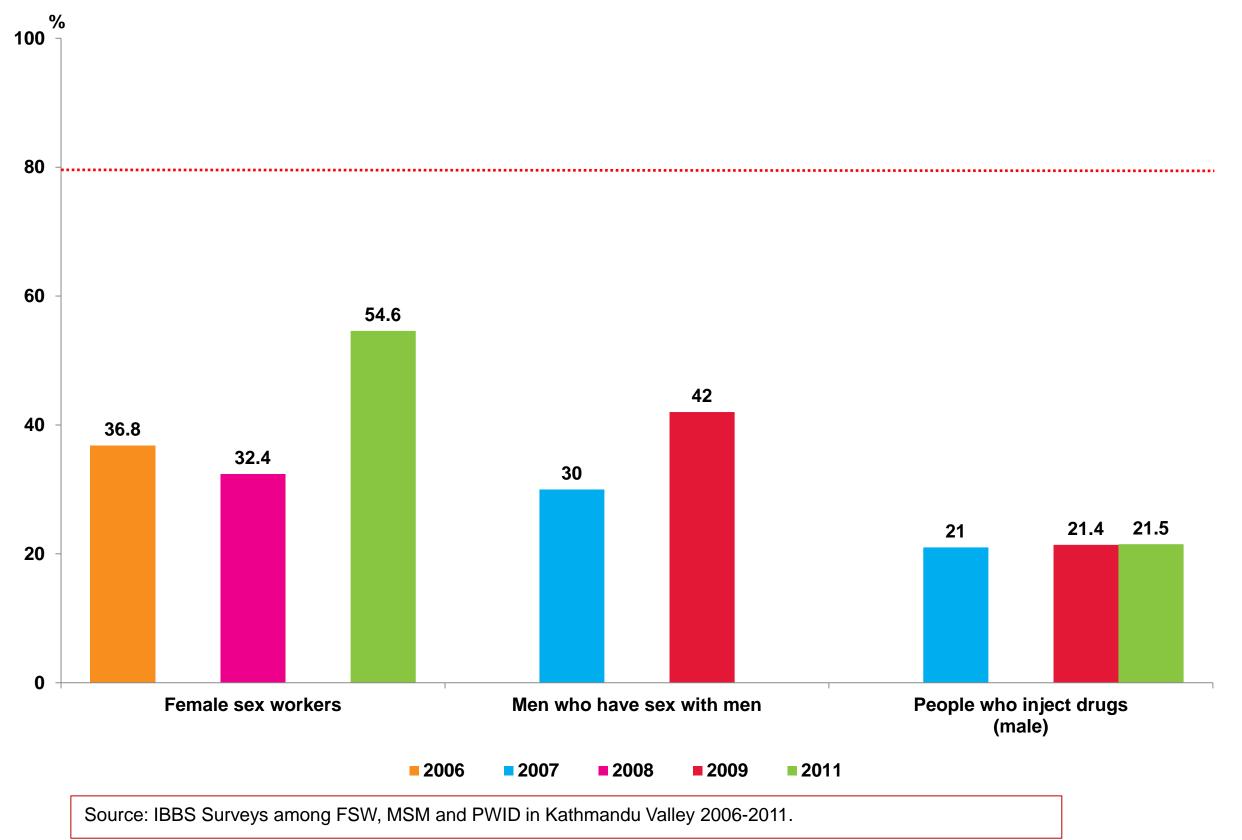
Nepal



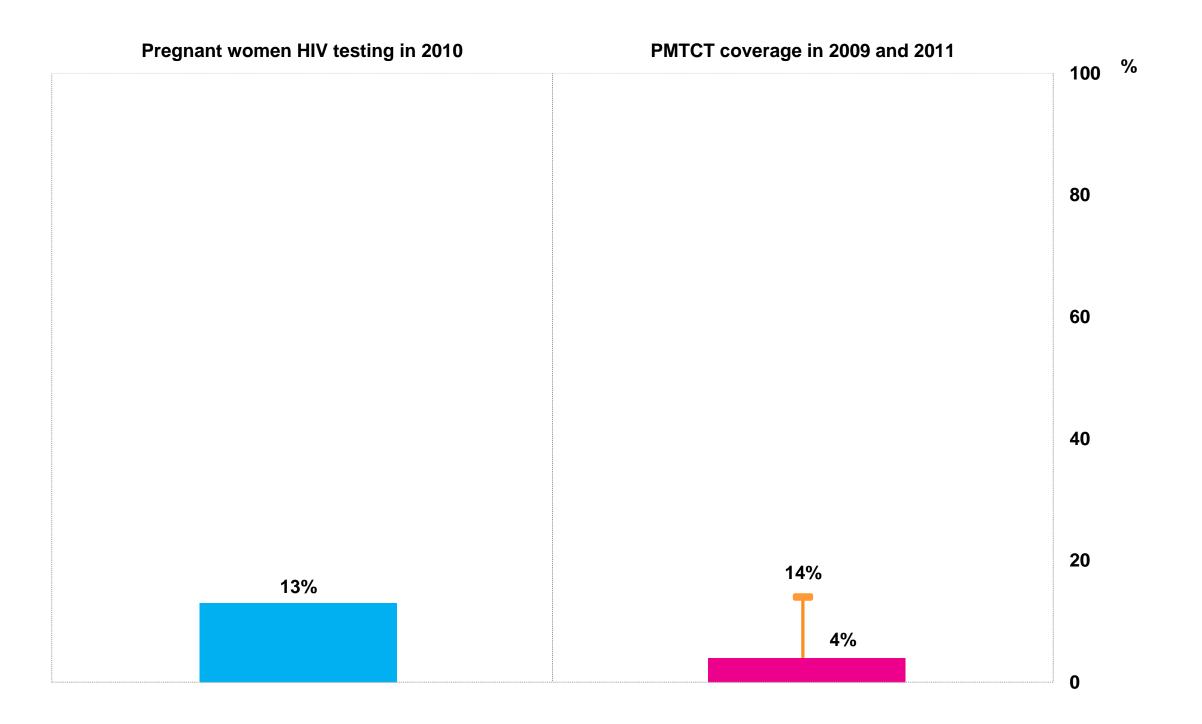
#### 28,792 PLHIV Eligible for Antiretroviral Therapy in 2015, in Nepal



#### HIV testing coverage among key populations at higher risk, Kathmandu Valley



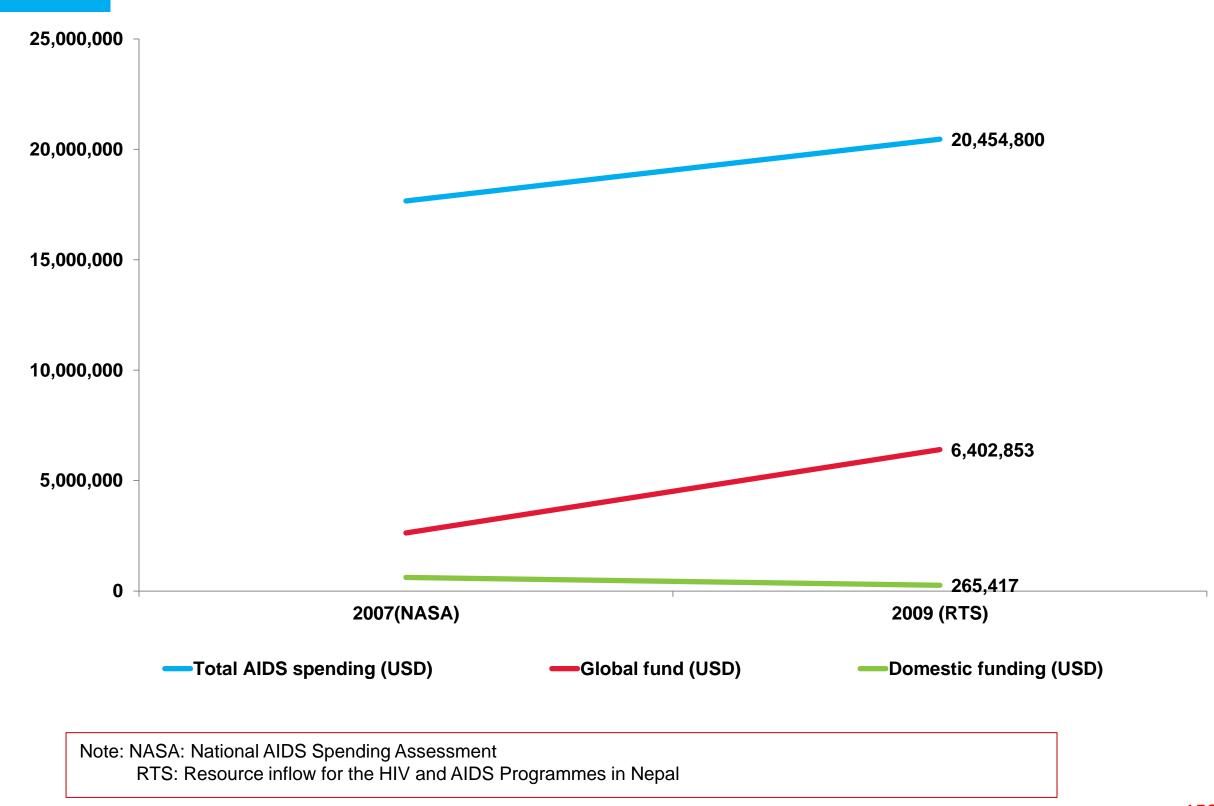
## Estimated 933 Pregnant Women Eligible for Antiretroviral Therapy in 2011, in Nepal



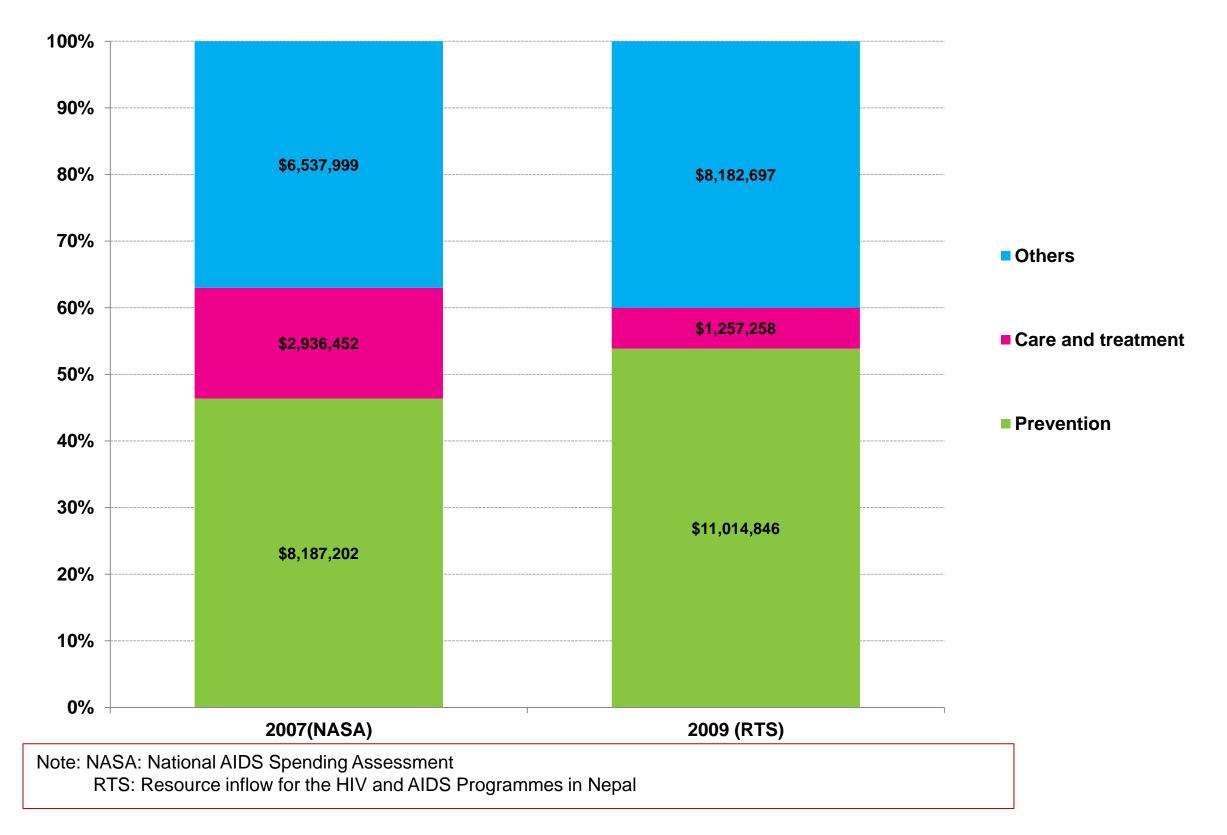


OSD

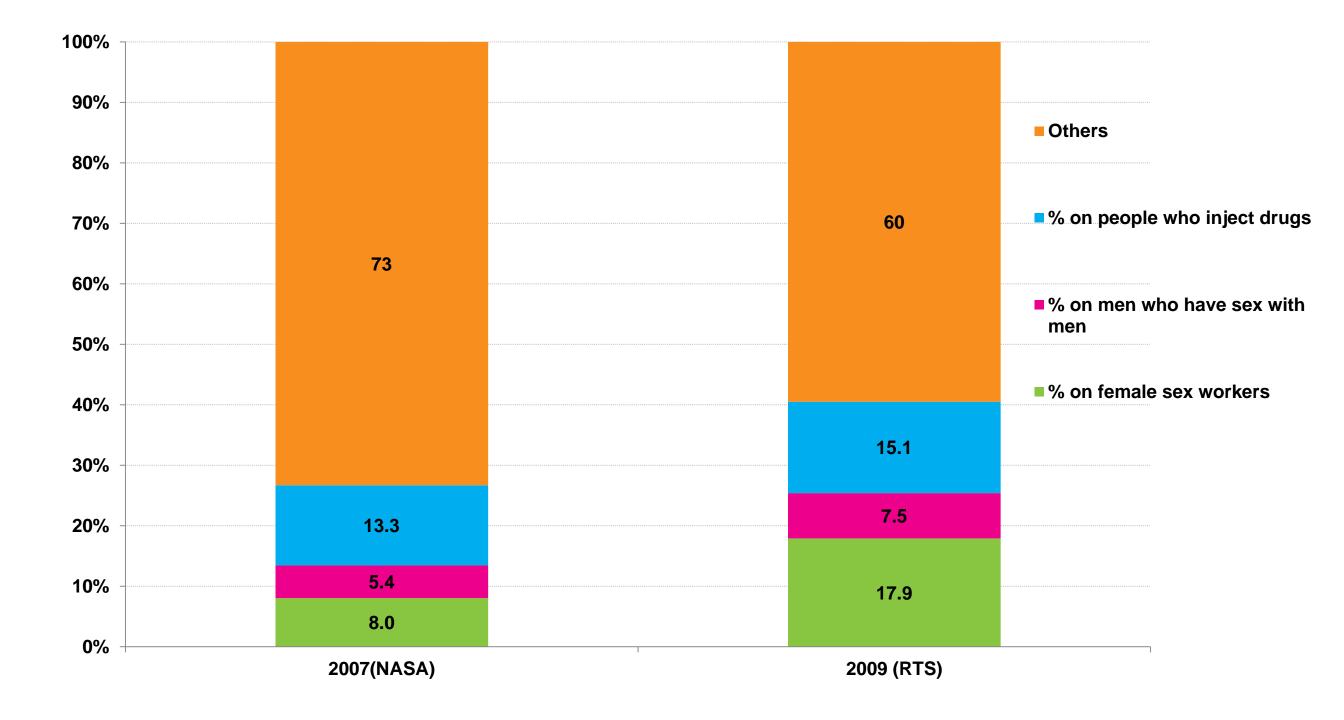
#### HIV Spending by Financing Source, Nepal



HIV spending by category, in Nepal



## Proportion of total prevention programme spending on key populations at higher risk, Nepal





## Stigma & discrimination

### Analysis of GARP / NCPI 2012

#### Legal obstacles to HIV response

- Criminalize people who use drugs
- Public order offences, against sex workers

### Travel restrictions



### STIGMA INDEX

Percent of PLHIV respondents denied health services because of HIV status in past 12 months: 7%

#### Selected indicators of response

Access to justice:

- Legal services (legal aid or other)
  - NHRI or other mechanisms

Protective laws:

Civil society rating of efforts to implement human rights-related laws and policies: 2009: 4/10



2011: 4/10

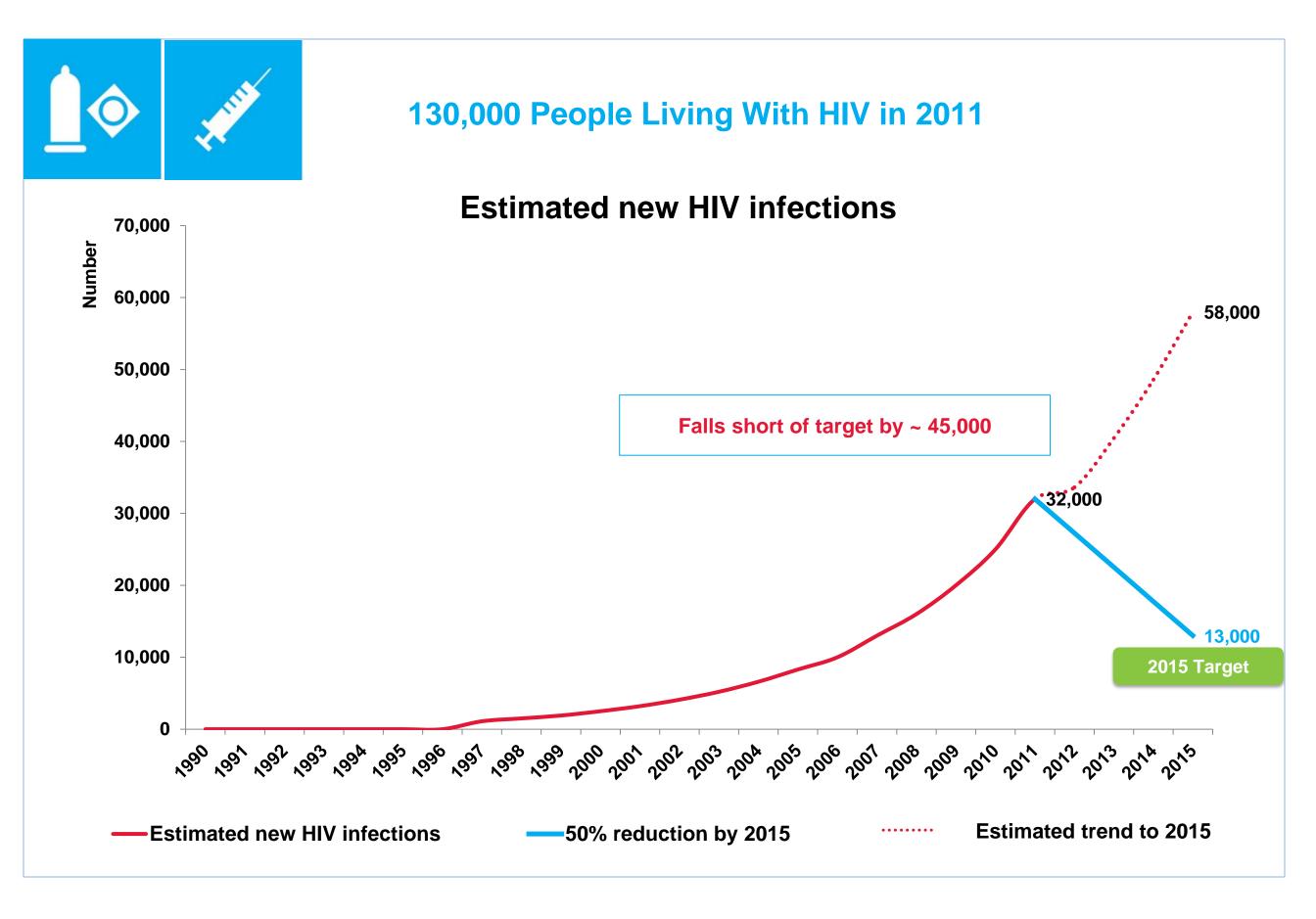
## CHALLENGES

- Improving HIV testing and coverage of PMTCT in all regions of Nepal
- Preventing new HIV infections among the large numbers of male labour migrants to and from India
- Achieving and maintaining high ART coverage in all regions of Nepal

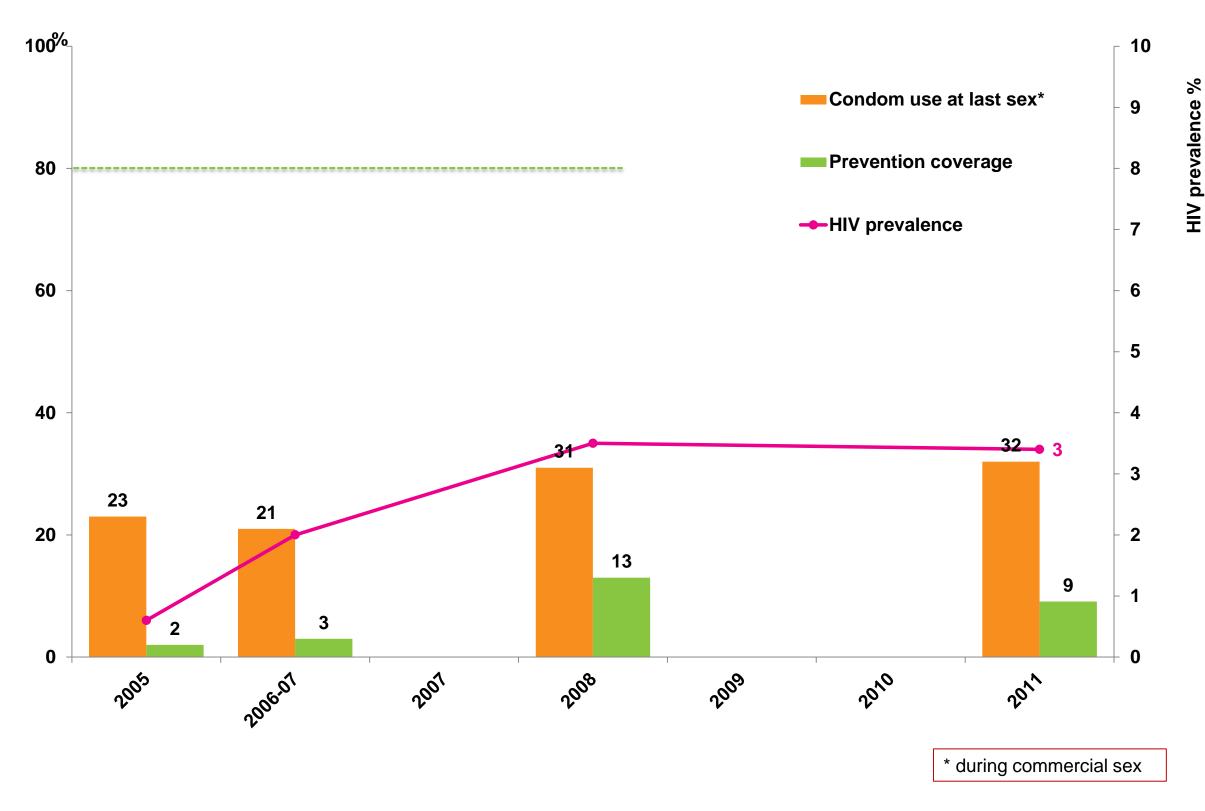
### **GAME CHANGERS**

- Bringing coherence to national HIV coordination and governance in Nepal
- Institutionalising Nepal/India cross-border initiatives to address safer sex work for HIV prevention
- Improving transparency, clarification of responsibilities, and holding the players in the Global Fund workings in Nepal to shared responsibility.

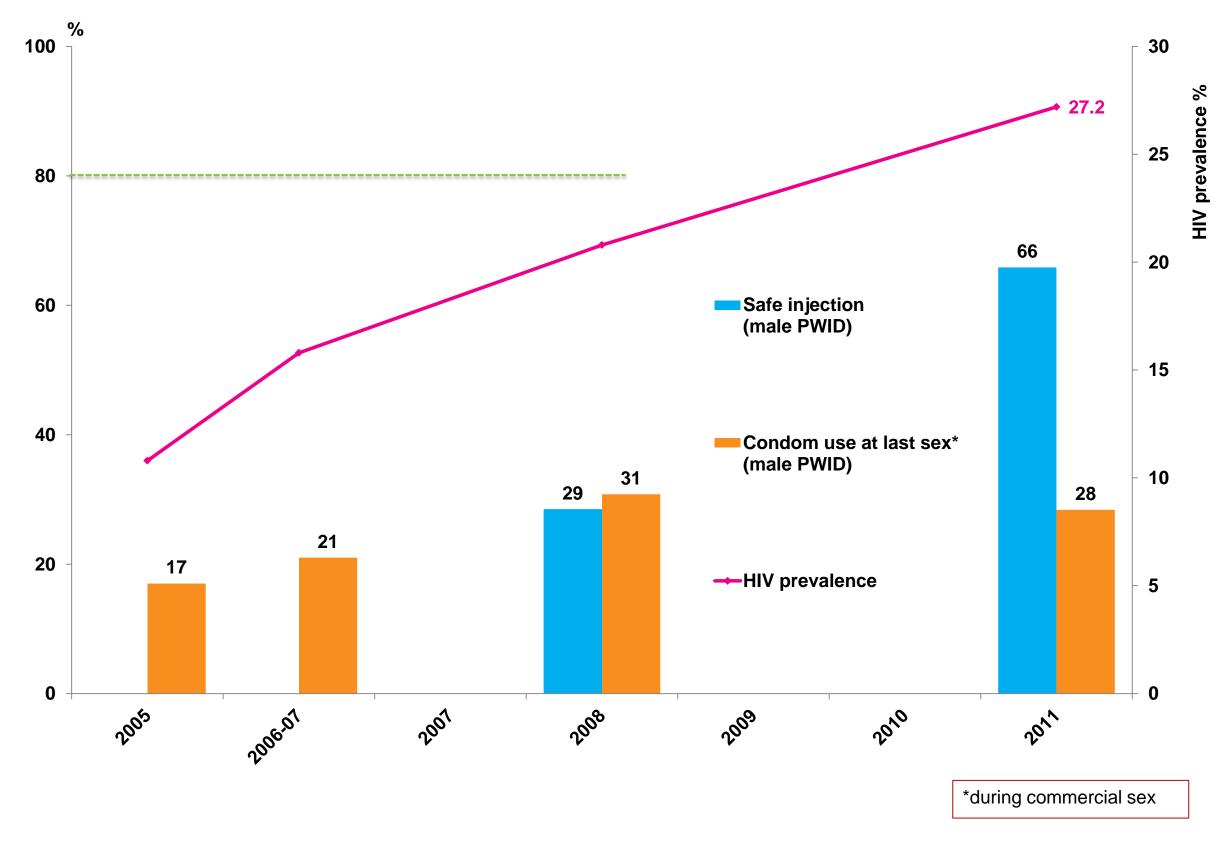
# PAKISTAN



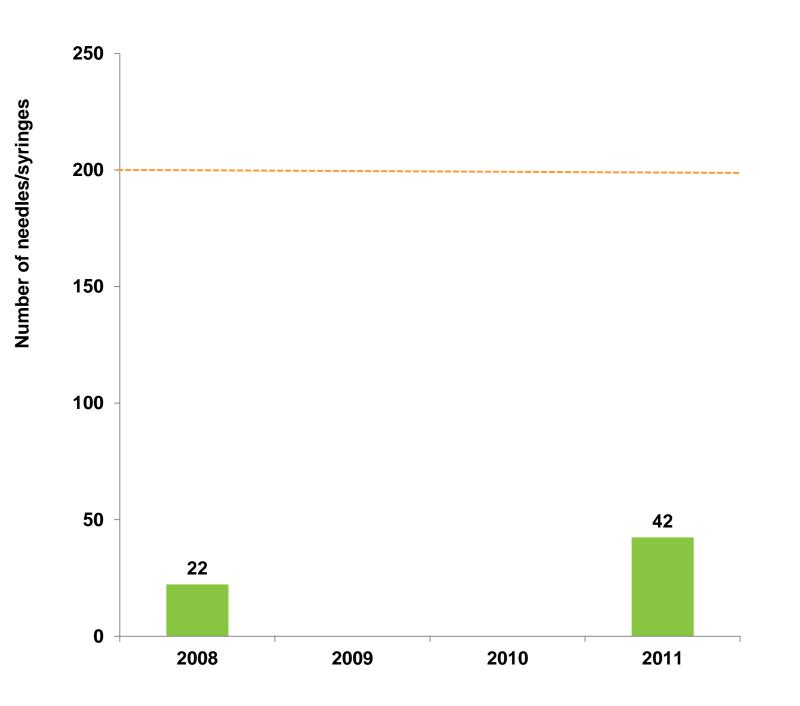
### Male and Hijra Sex Workers: HIV prevalence, behaviour and prevention coverage



#### People Who Inject Drugs: HIV prevalence and behaviors

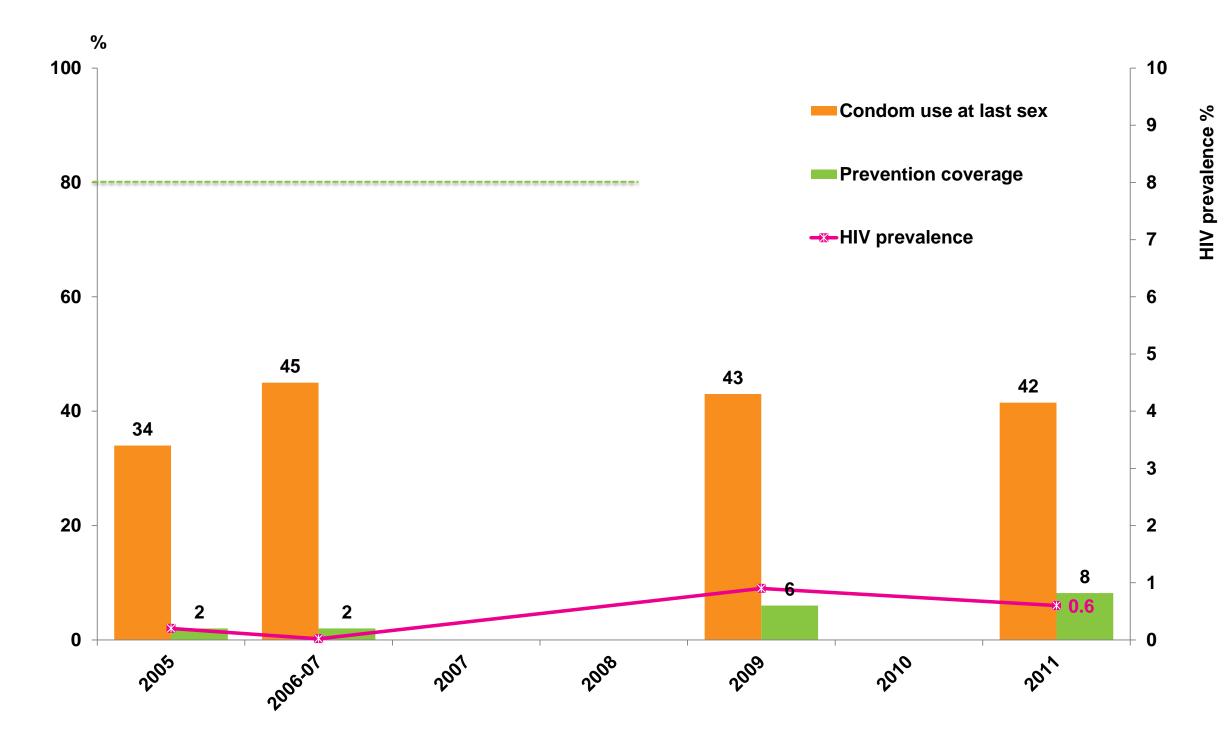


Number of needle/syringes distributed per person who inject drugs per year

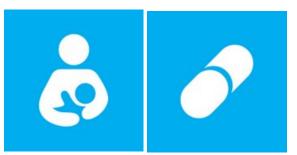


Pakistan

#### Female Sex Workers: HIV prevalence, behaviour and prevention coverage

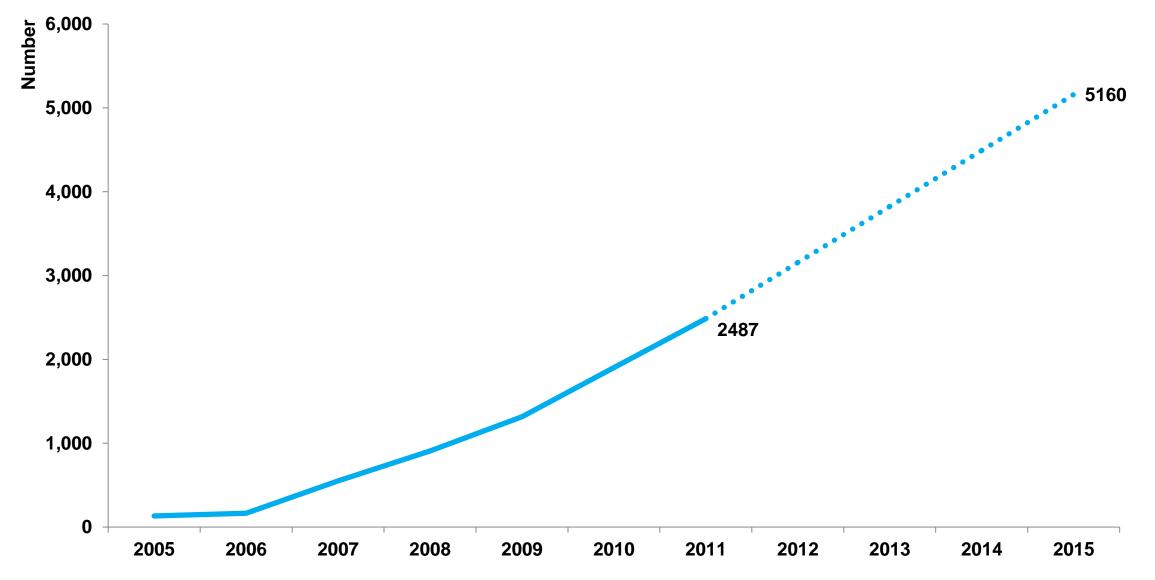


163

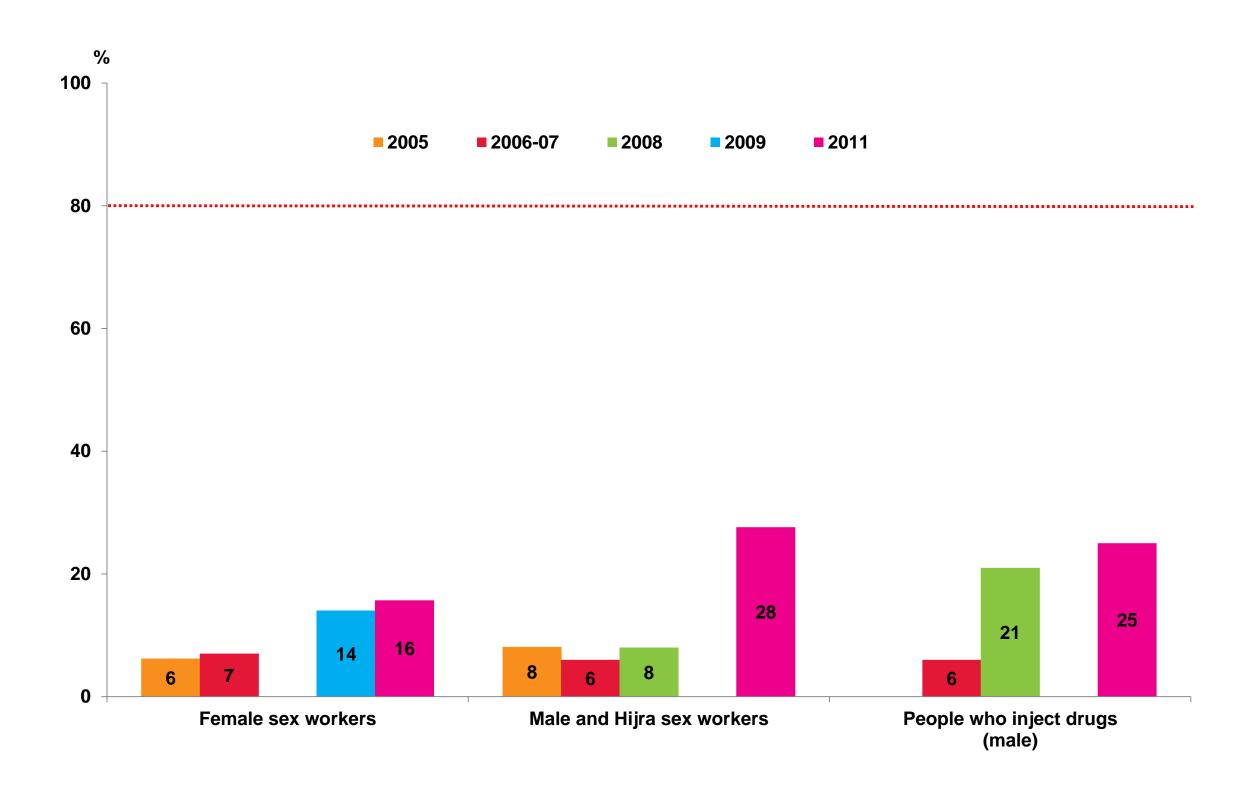


#### 24,000 Adults Eligible for Antiretroviral Therapy in 2011

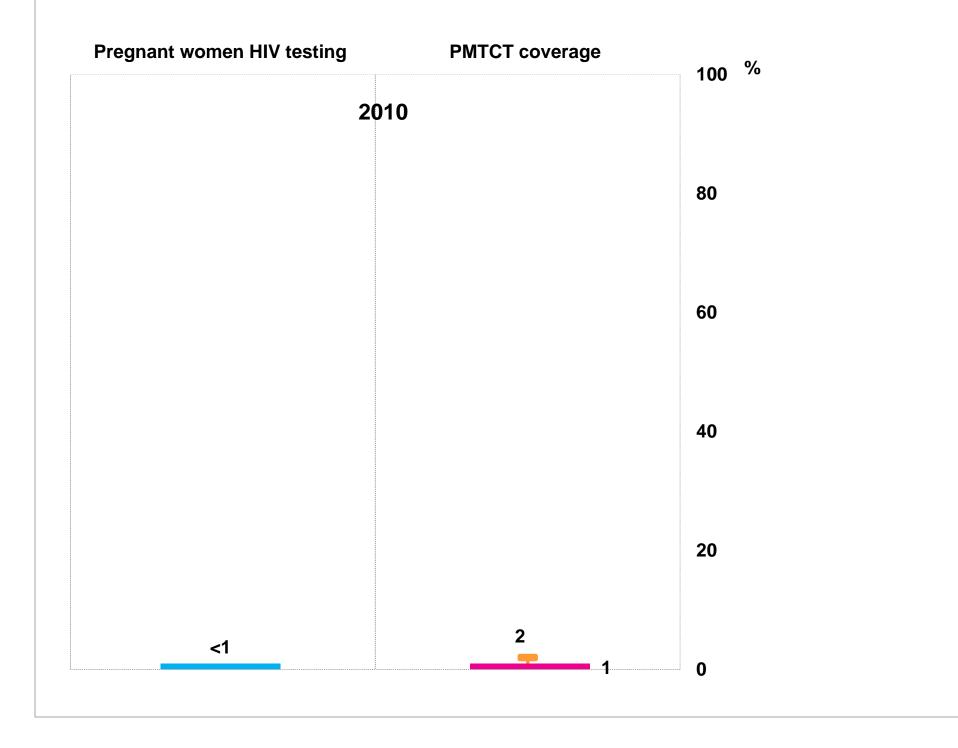
#### Number of people receiving antiretroviral therapy



#### HIV testing coverage among key populations at higher risk



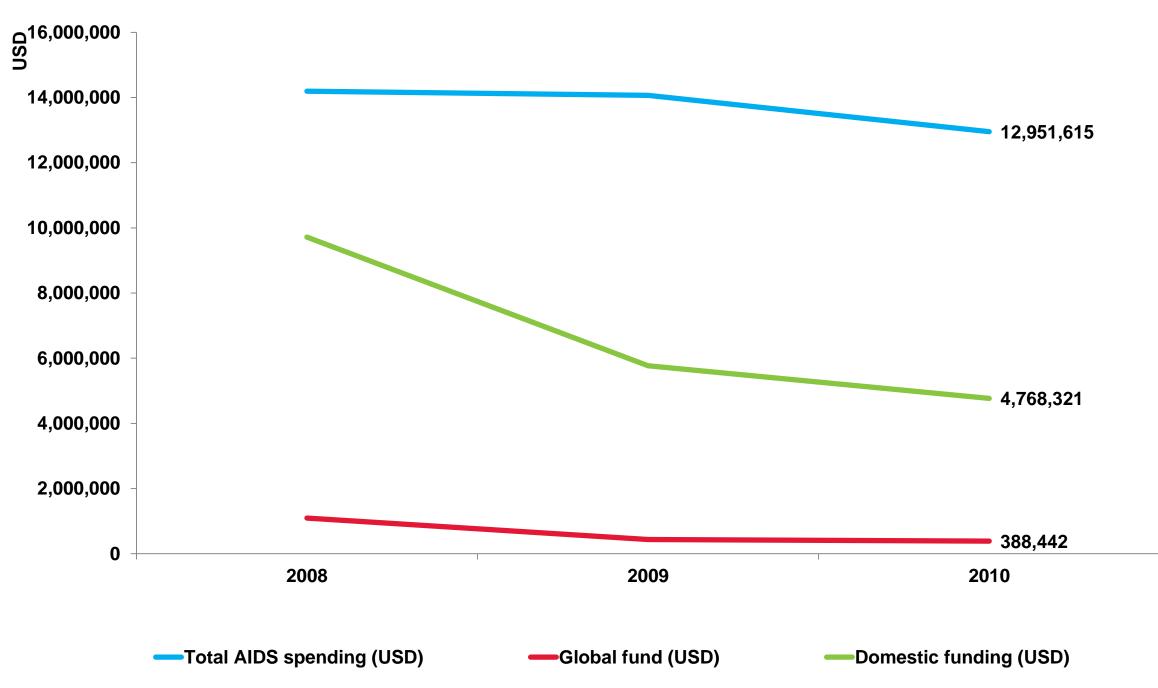
#### <500 Pregnant Women Eligible for Antiretroviral Therapy in 2011



Pakistan

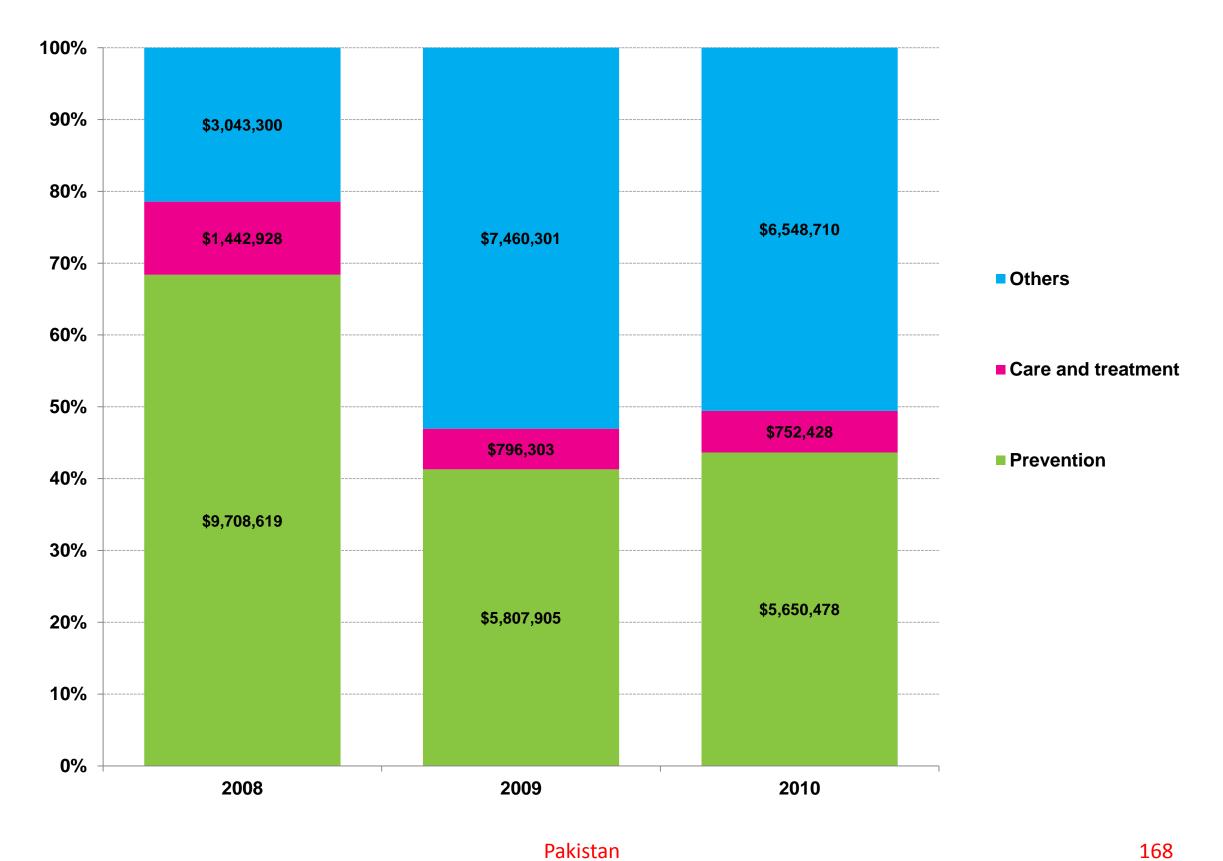


#### **AIDS Spending by Financing Source**

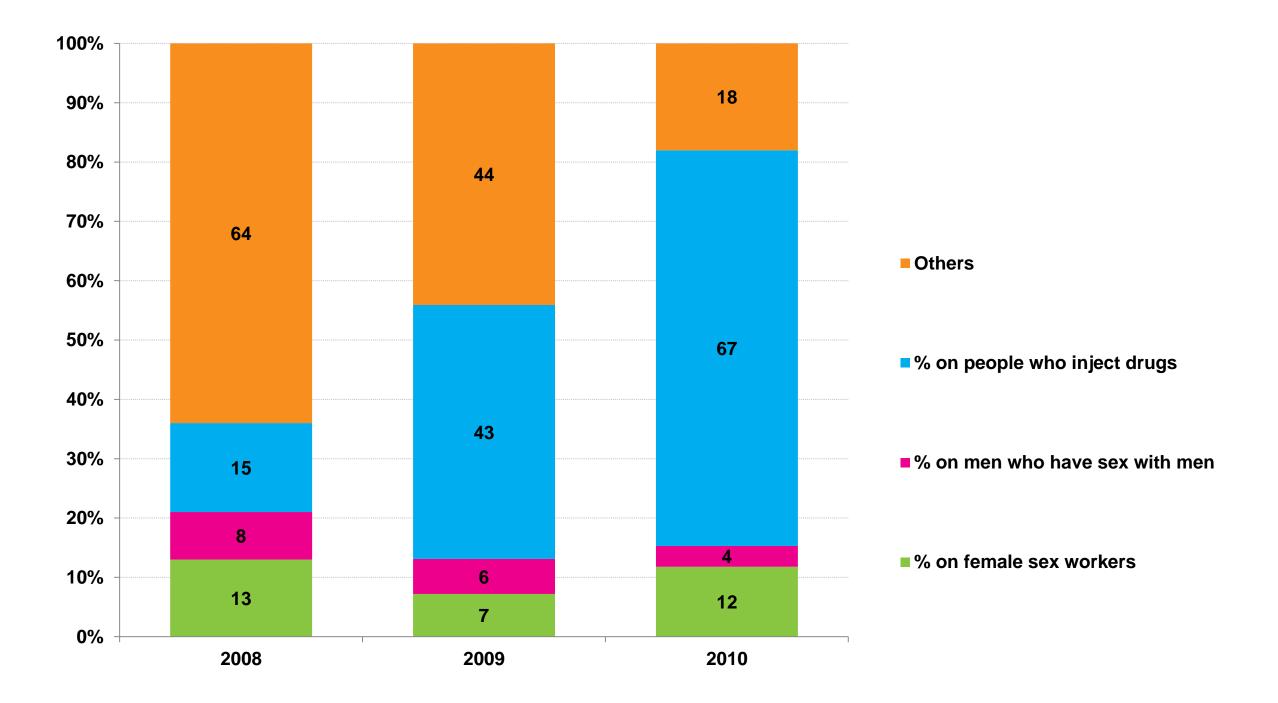


#### AIDS spending by category

**USD** 



### Proportion of total prevention programme spending on key populations at higher risk





## Stigma & discrimination

### Analysis of GARP / NCPI 2012

#### Legal obstacles to HIV response

- Criminalize men who have sex with men
- Punitive laws relating to drugs (mandatory treatment, possession)
- Criminalize sex work

#### **Selected indicators of response**

Access to justice:

- Legal services (legal aid or other)
  - NHRI or other mechanisms

#### Protective laws:

Civil society rating of efforts to implement human rights-related laws and policies: **2009: 2/10** 

### 2011: 3/10

## Travel restrictions



### STIGMA INDEX

Percent of PLHIV respondents denied health services because of HIV status in past 12 months: 33%

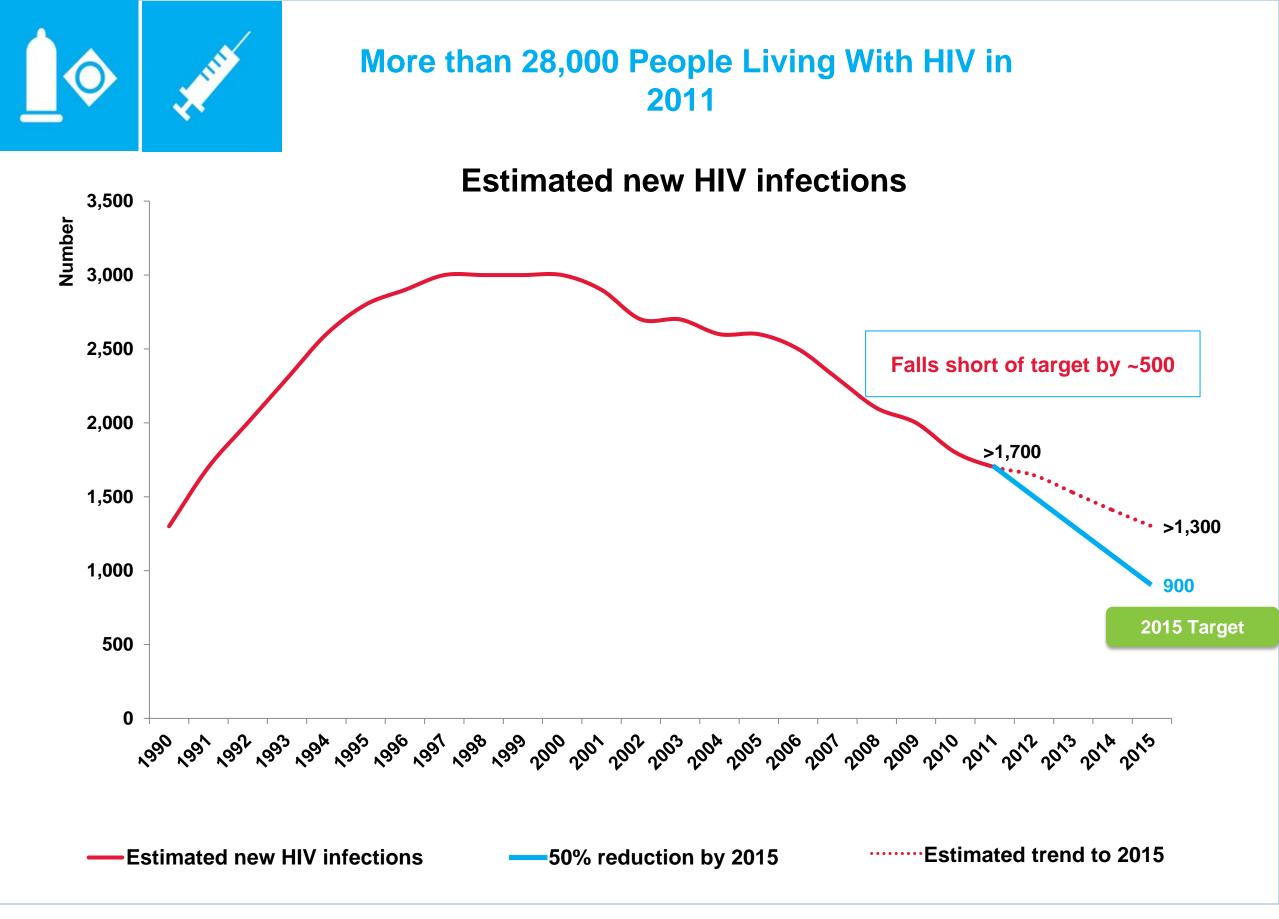
## CHALLENGES

- Political motivation HIV epidemic among people who inject drugs outpacing current commitment, domestic and external investment and human resource capacity to mount a scaled-up response and meet 2015 targets.
- Transformation Funding, systemic and governance barriers to be overcome for the massive increase in coverage, continuity and effectiveness of HIV service provision to be undertaken in 2013-14
  - Social change Institutionalizing partnership between emerging community groups, civil society and public sector necessary to effectively deliver appropriate services such as Harm Reduction, VCT, PMTCT, ART, and Continuum of Care.

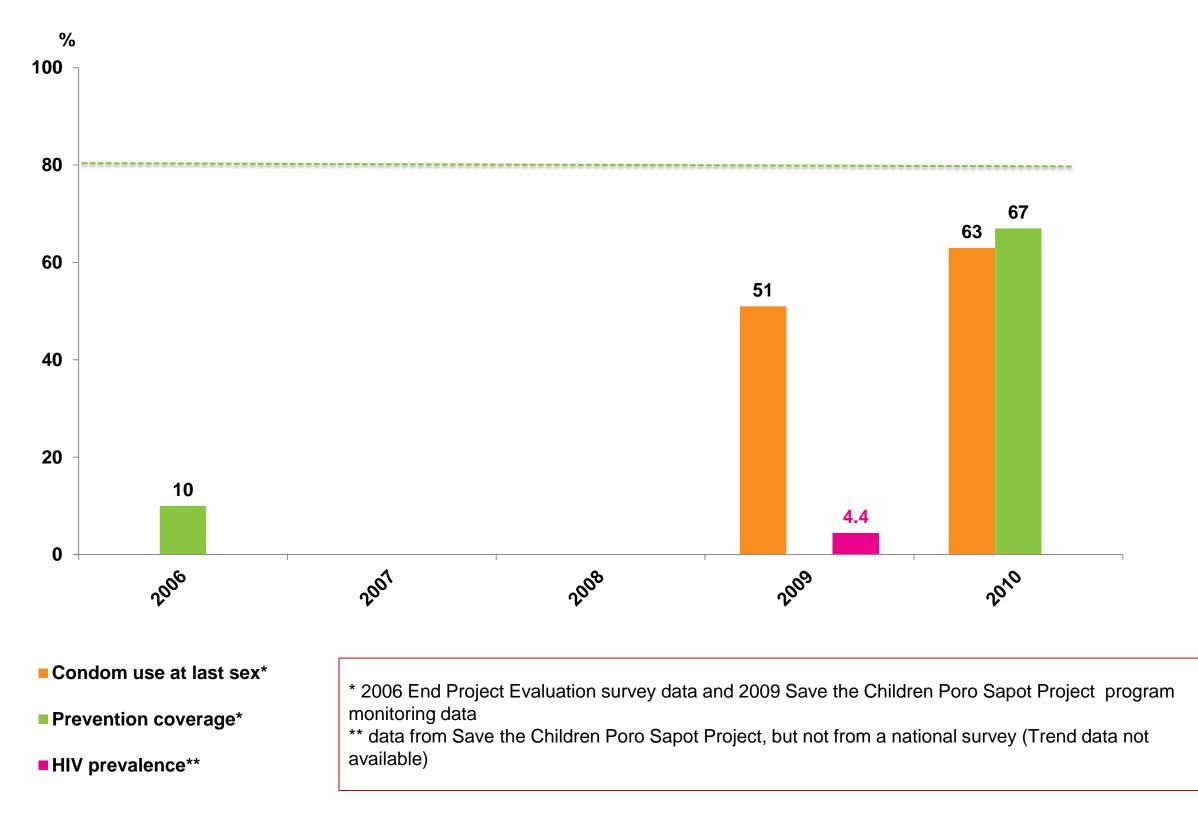
### **GAME CHANGERS**

- Maintain current commitment of The Global Fund and UNAIDS to Pakistan whilst it is undergoing substantial development and governance challenges, with primary focus on 'Impact' rather than bureaucratic processes and 'Business as usual' in the AIDS sector.
- Community and civil society organizations to take leadership focusing on results based on commitment to persons who inject drugs, transgender, men who have sex with men, and socially excluded groups.
- New mechanisms for oversight of the HIV response established and functional, involving a combination of competent professionals, people living or affected by HIV and provincial governments in a new 'Social compact'.

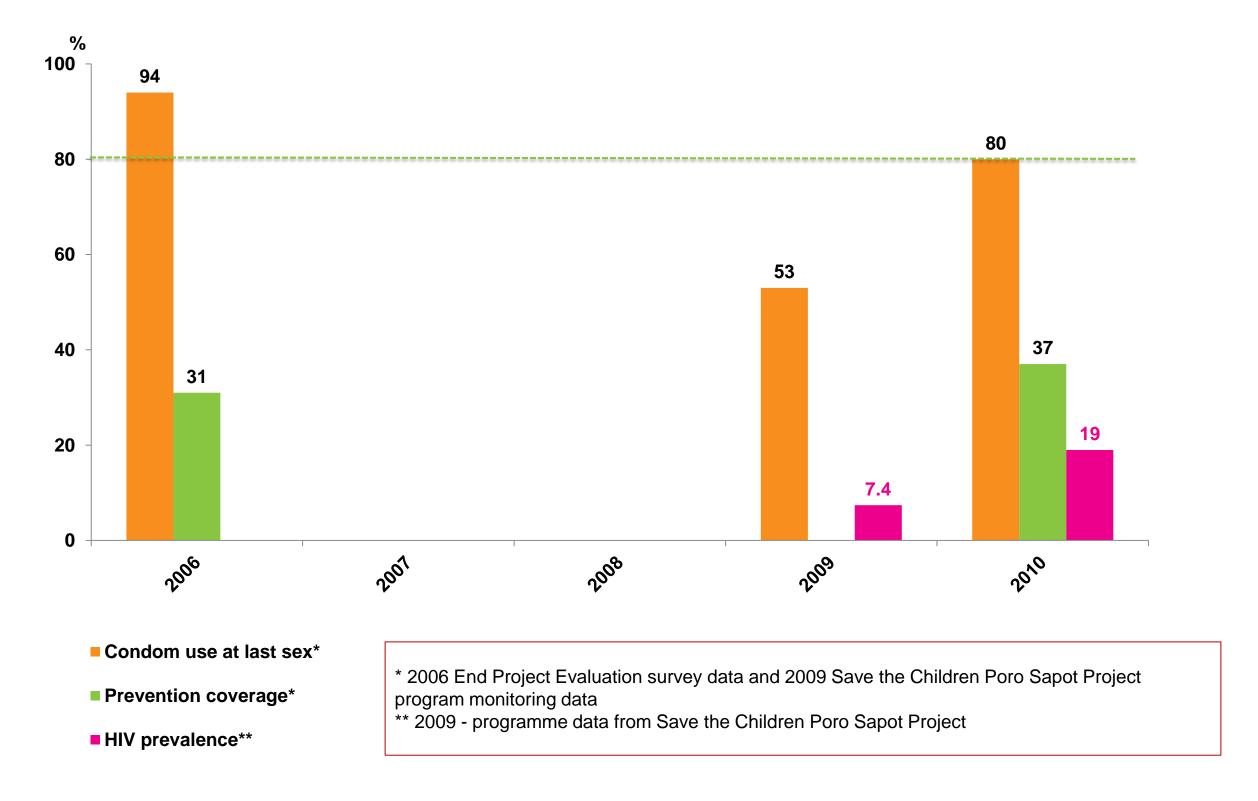
# PAPUA NEW GUINEA



### Men Who Have Sex With Men (Port Moresby): HIV prevalence, behaviour and prevention coverage

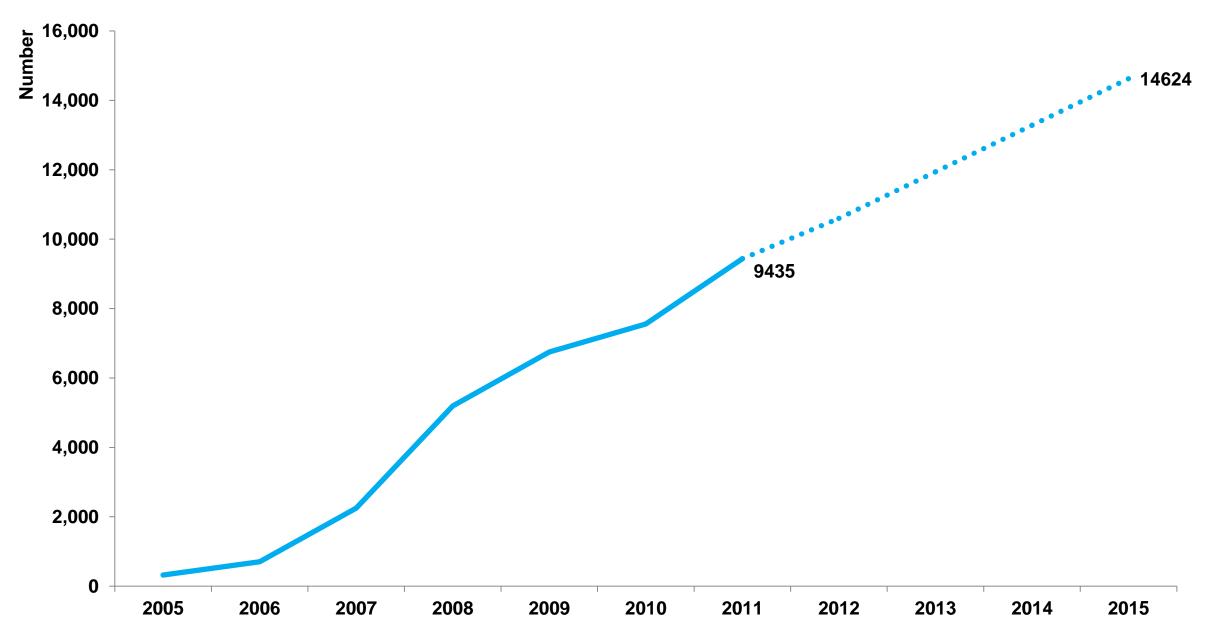


#### Female Sex Workers (Port Moresby): HIV prevalence, behaviour and prevention coverage

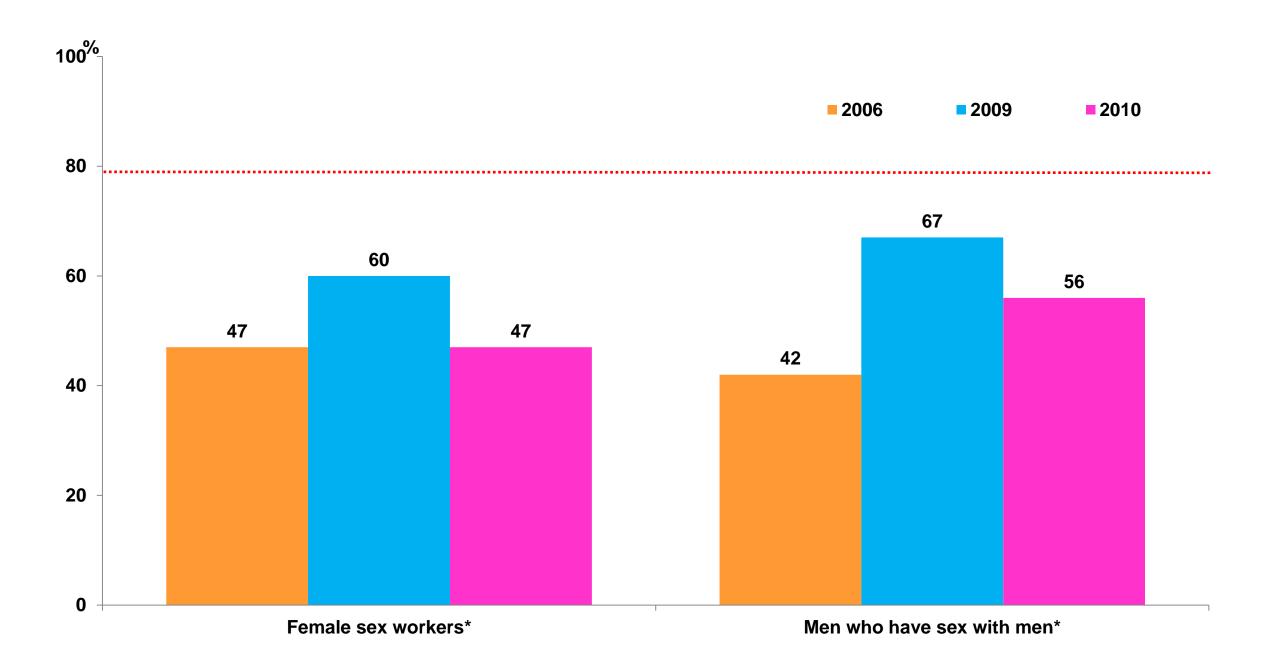




Number of people receiving antiretroviral therapy

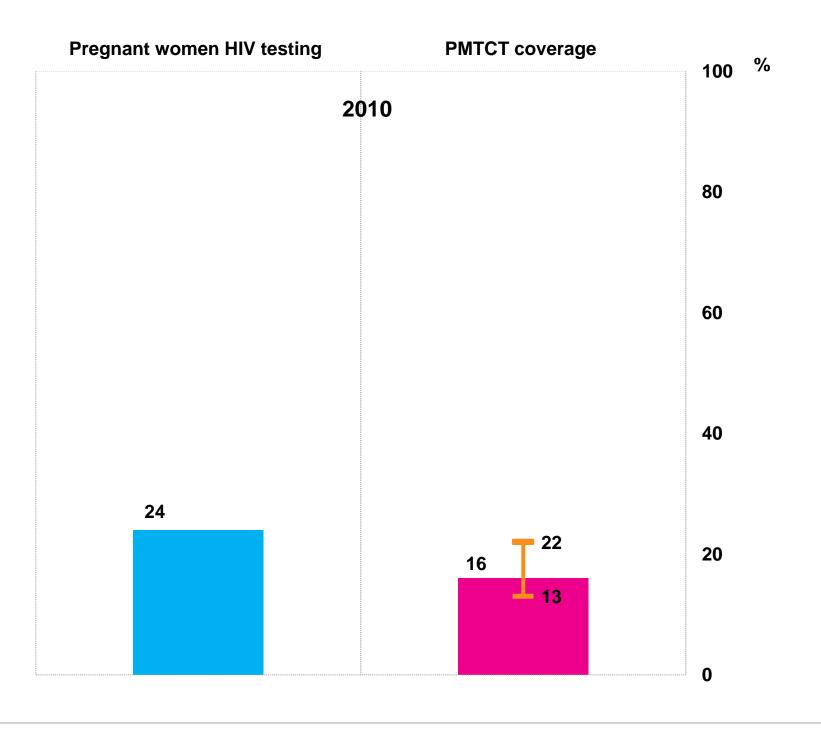


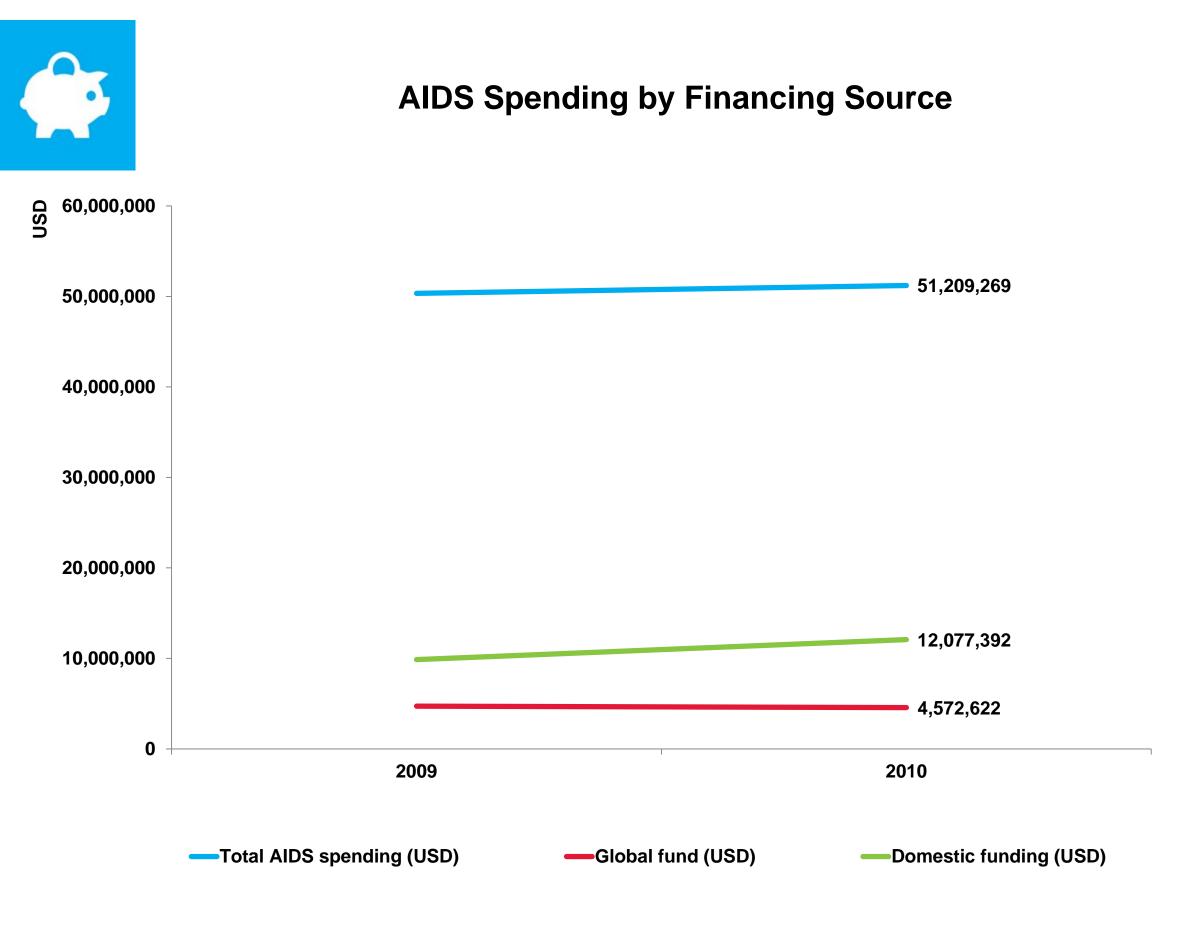
HIV testing coverage among key populations at higher risk, (Port Moresby)



\* 2006 End Project Evaluation survey data and 2009 Save the Children Poro Sapot Project program monitoring data

#### More than 1000 Pregnant Women Eligible for Antiretroviral Therapy in 2011





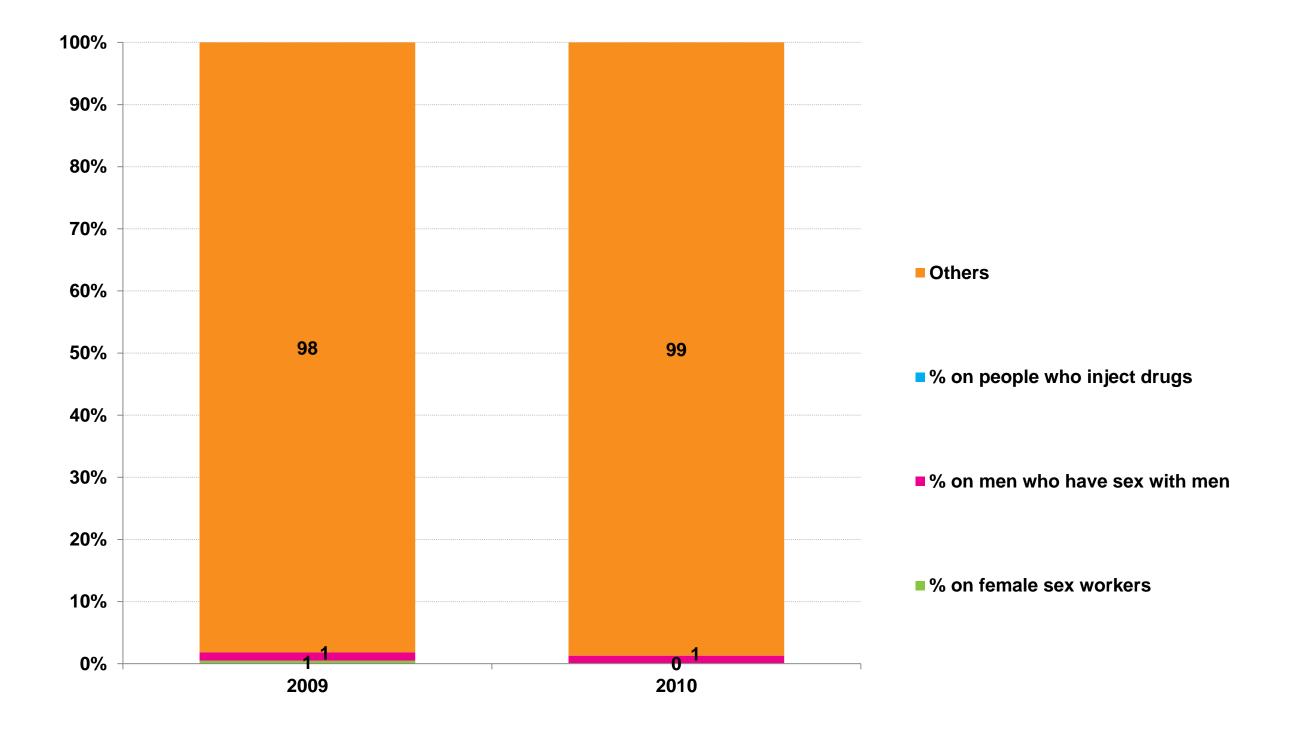
Papua New Guinea

#### AIDS spending by category



Papua New Guinea

### Proportion of total prevention programme spending on key populations at higher risk



Papua New Guinea



## Stigma & discrimination

### Analysis of GARP / NCPI 2012

### Legal obstacles to HIV response

- Criminalize men who have sex with men and transgender
- Criminalize people who use drugs
- Criminalize sex work
- Customary and statutory laws obstacles

### **Selected indicators of response**

Access to justice:

- Legal services (legal aid or other)
  - NHRI or other mechanisms

### Protective laws:

Civil society rating of efforts to implement human rights-related laws and policies: **2009: 4/10** 



### Travel restrictions



### STIGMA INDEX

Percent of PLHIV respondents denied health services because of HIV status in past 12 months: N/A

## CHALLENGES

- Significant shift in donor focus away from HIV to 'Gender' and 'Climate Change' resulting in massive reduction in resources to UN and other partners supporting the national response
- Lack of robust leadership for the HIV response in Papua New Guinea at all levels and in all spheres

ullet

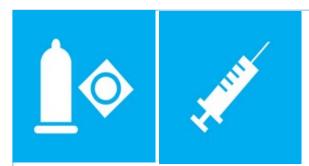
- Lapsed National AIDS Council has not been reconstituted for 18 months resulting in lack of oversight and support for the implementing NAC Secretariat

Return of the national HIV response to the auspices of the National Department of Health, which lacks capacity to resume oversight and management of the response.

## **GAME CHANGERS**

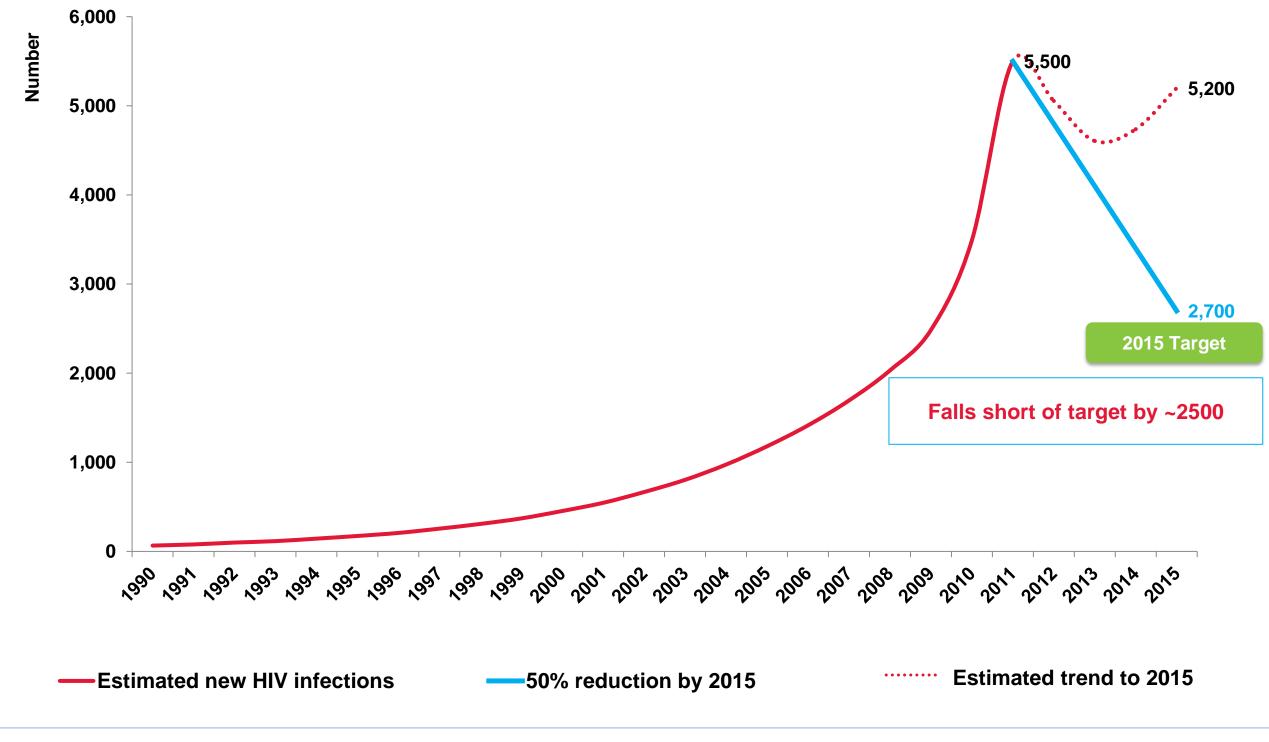
- The reintegration of HIV into the general health program
- The return of donor focus and resources to HIV

# PHILIPPINES

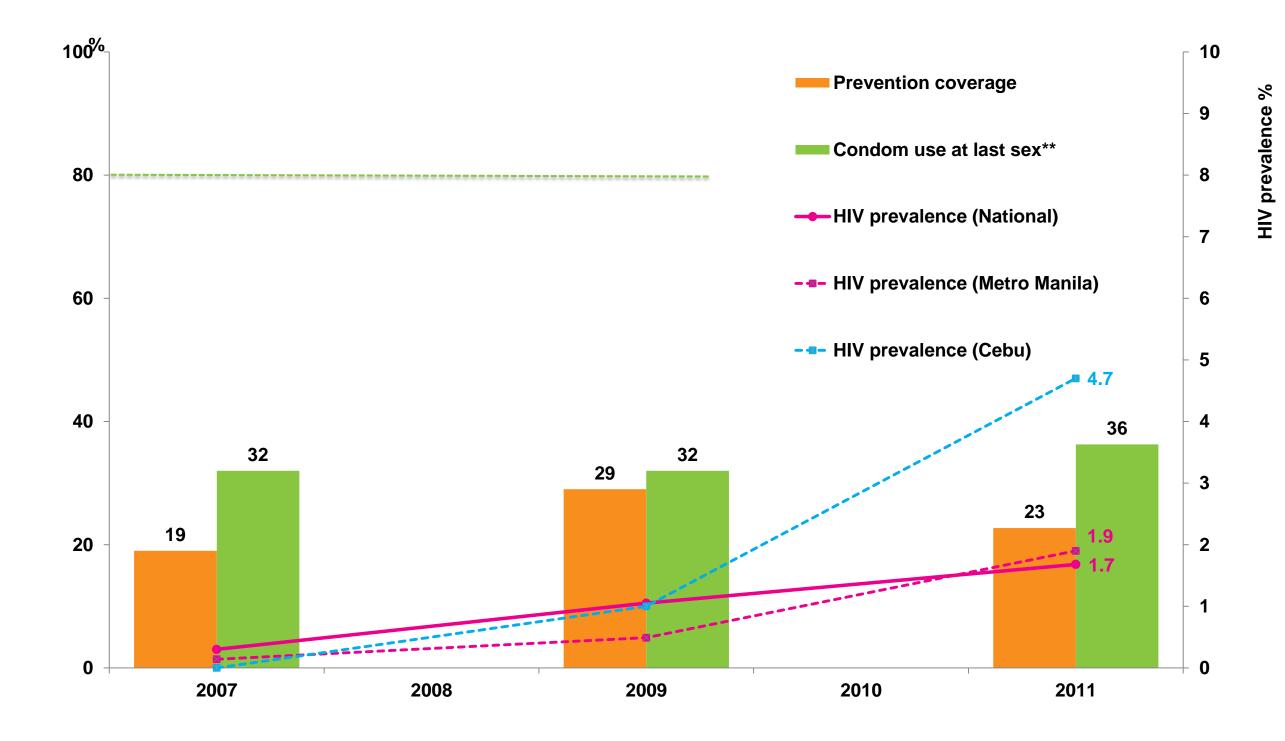


### 24,000 People Living With HIV in 2012

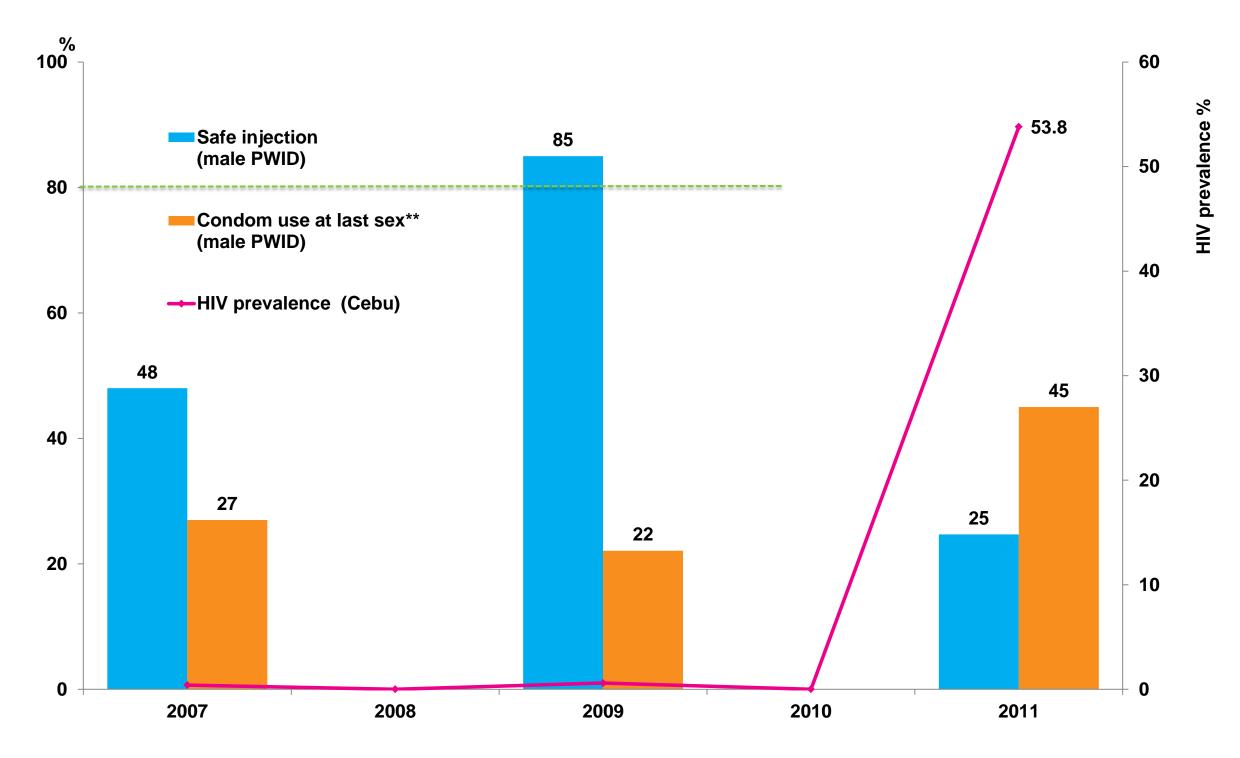
### Estimated new HIV infections per year



### Men Who Have Sex With Men: HIV prevalence, behaviour and prevention coverage



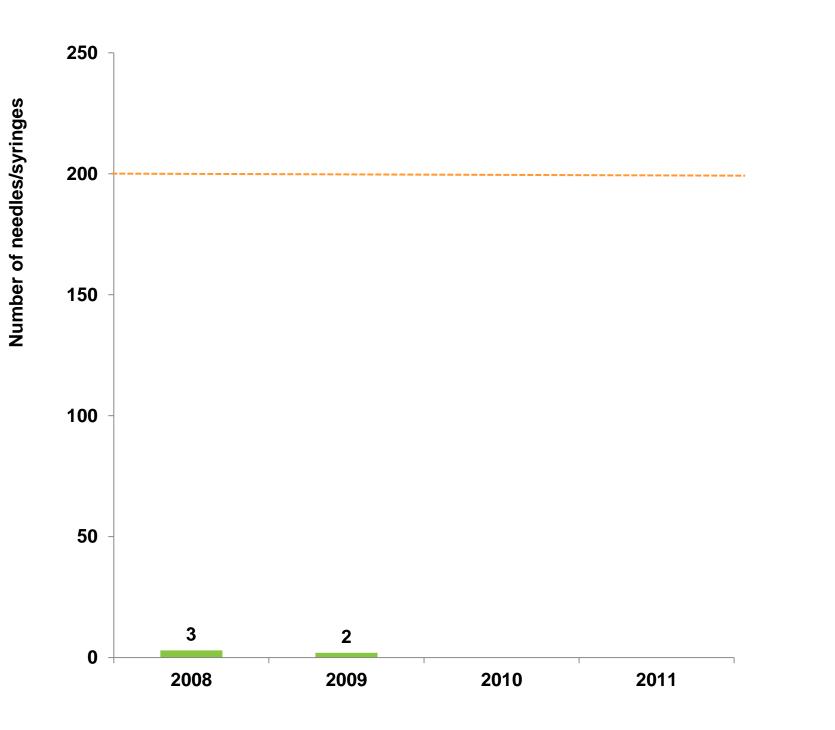
\*\* during commercial sex



#### **People Who Inject Drugs: HIV prevalence and behaviors**

\*\* during commercial sex

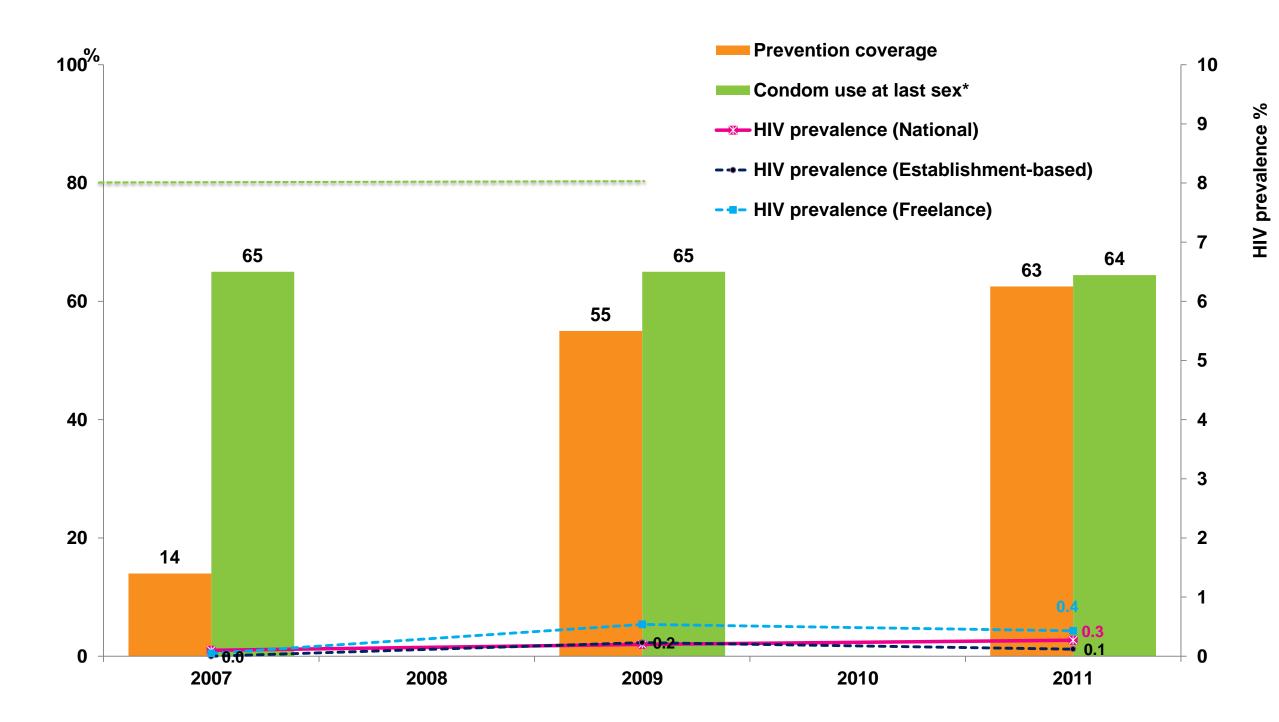
Number of needle/syringes distributed per person who inject drugs per year



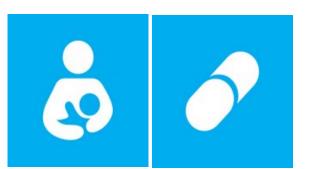
Philippines

188

#### Female Sex Workers: HIV prevalence, behaviour and prevention coverage

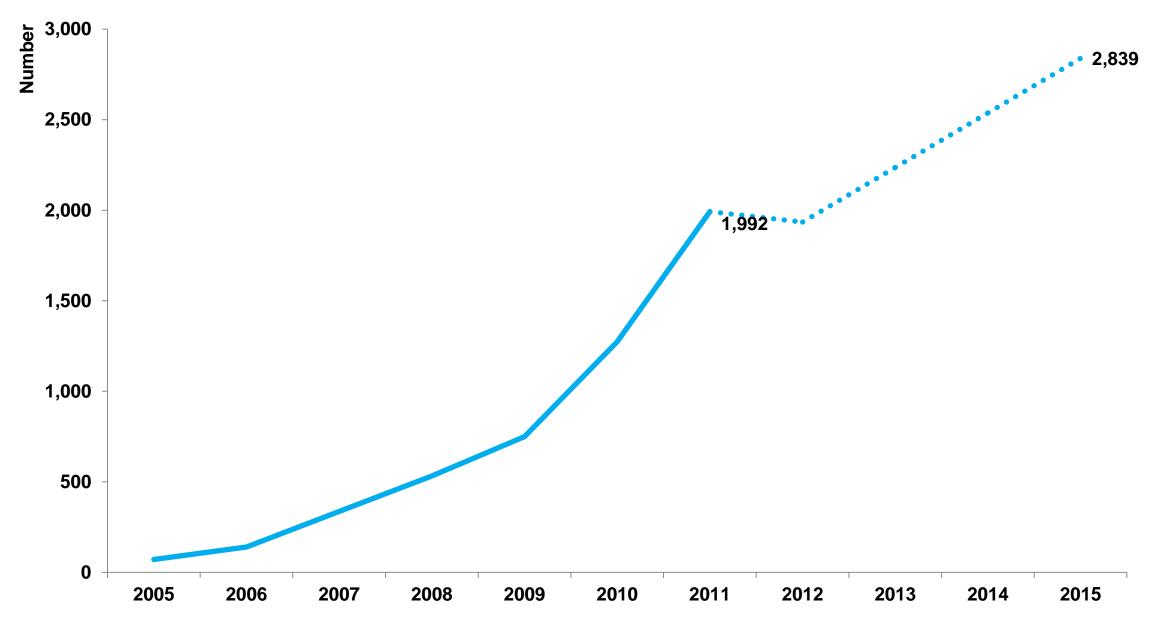


\* with new client in the last week

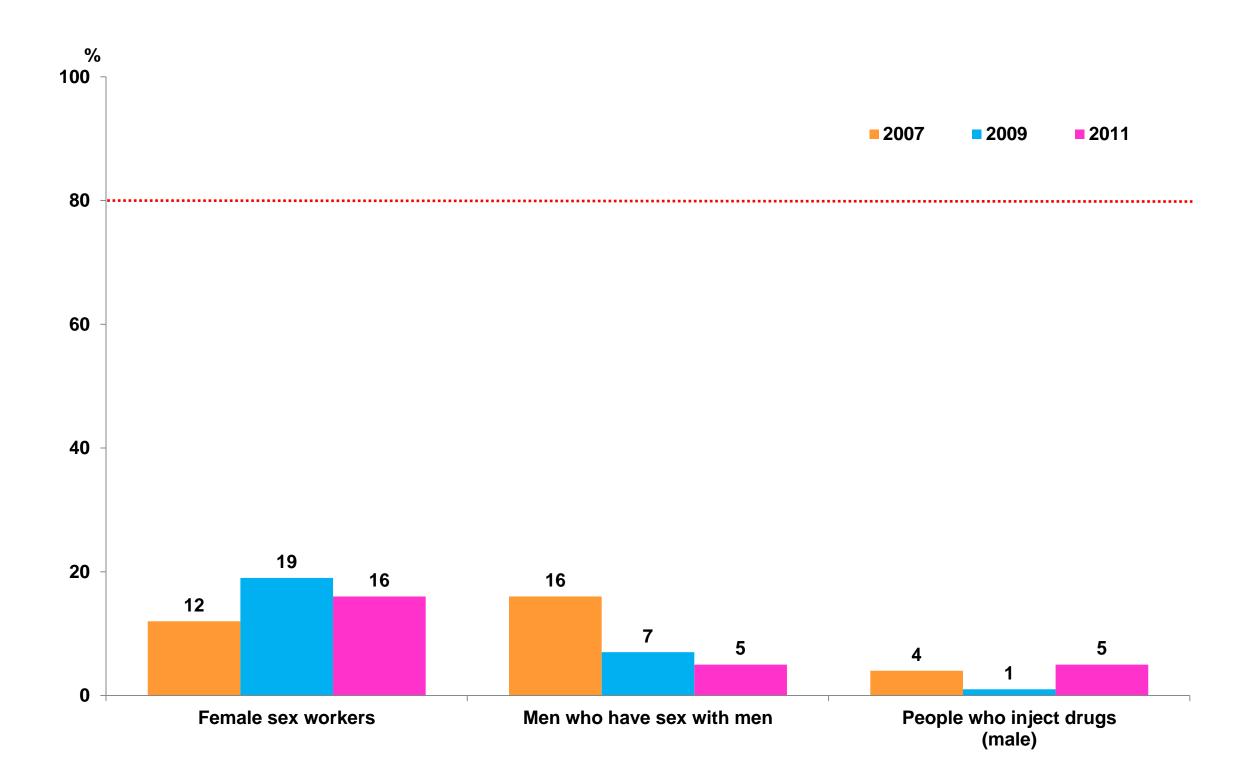


### **3,800 Adults Eligible for Antiretroviral Therapy in 2011**

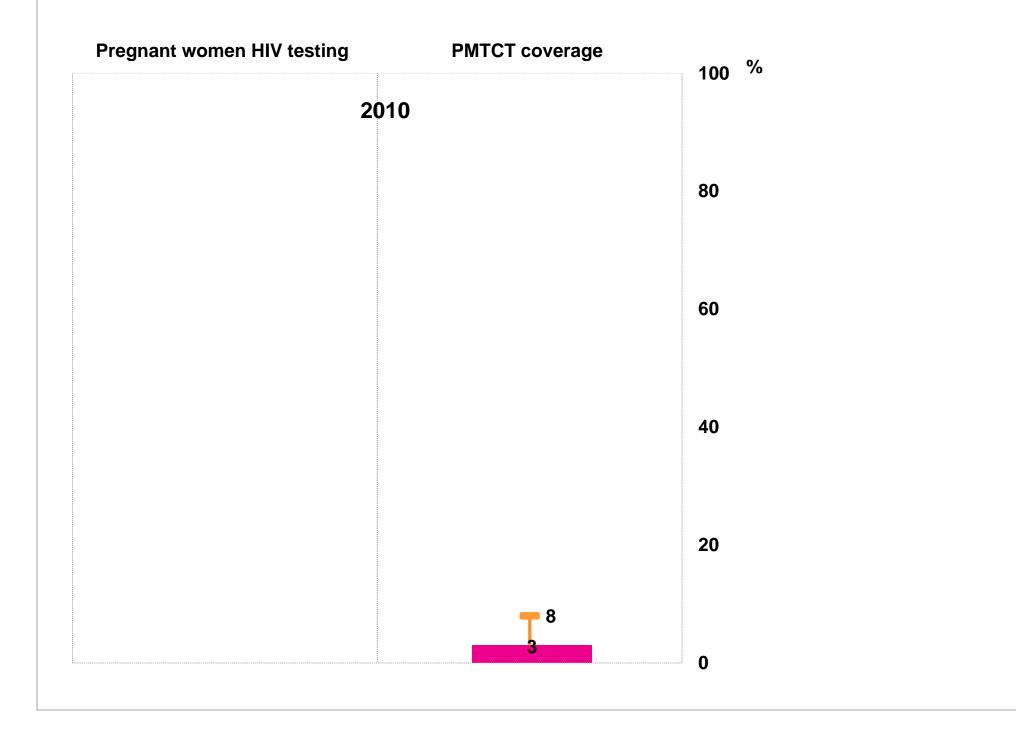
#### Number of people receiving antiretroviral therapy



HIV testing coverage among key populations at higher risk

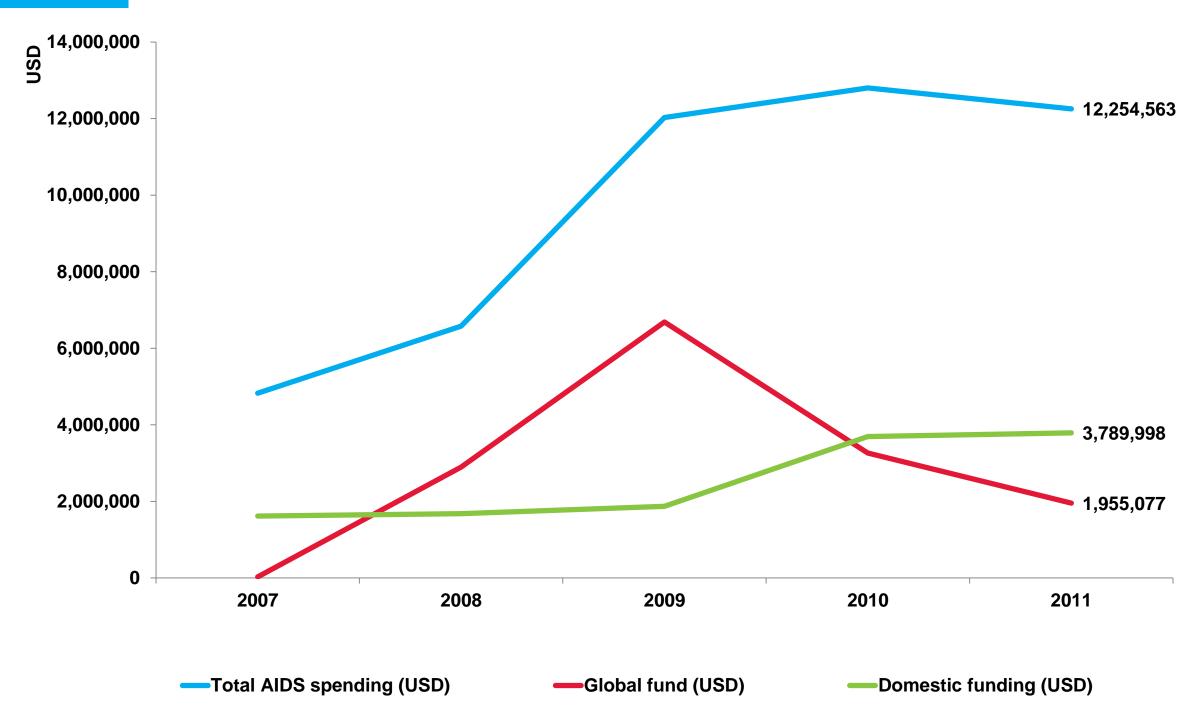


### ~250 Pregnant Women Eligible for Antiretroviral Therapy in 2011

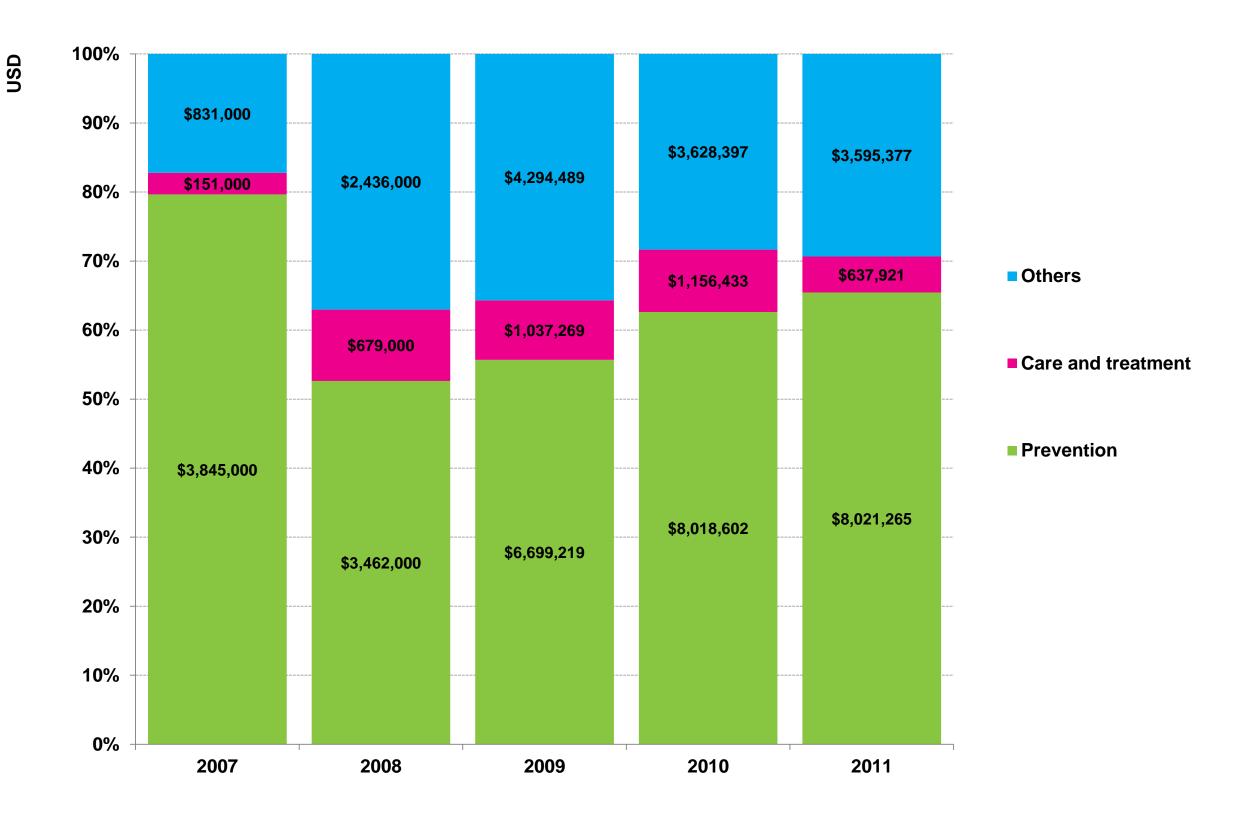




#### **AIDS Spending by Financing Source**

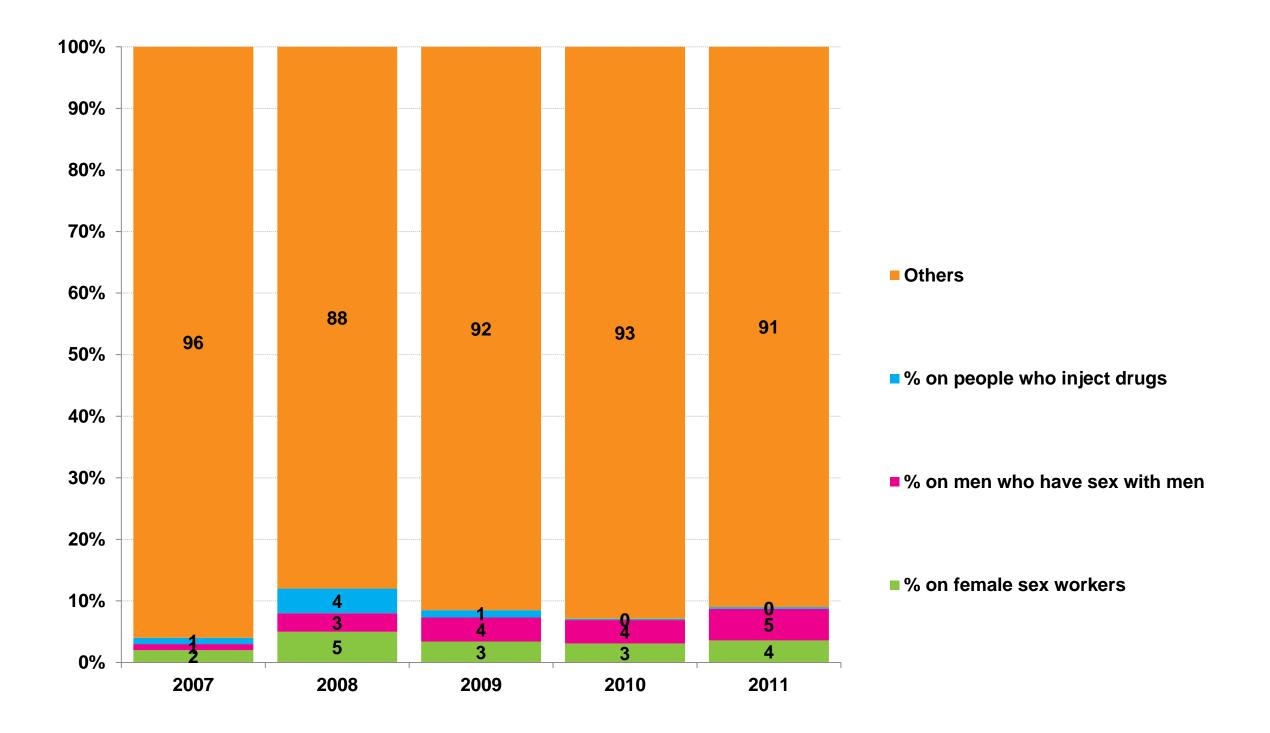


#### AIDS spending by category



Philippines

### Proportion of total prevention programme spending on key populations at higher risk





## Stigma & discrimination

### Analysis of GARP / NCPI 2012

### Legal obstacles to HIV response

- Punitive laws relating to drugs (possession of drug paraphernalia)
  - Criminalize sex work (and anti-trafficking law)
- Age of consent for HIV testing (18 years)

### **Selected indicators of response**

Access to justice:

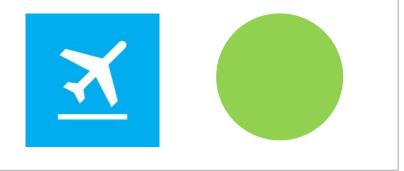
- Legal services (legal aid or other)
  - NHRI or other mechanisms

### Protective laws:

Civil society rating of efforts to implement human rights-related laws and policies: **2009: 4/10** 



### **Travel restrictions**



### STIGMA INDEX

Percent of PLHIV respondents denied health services because of HIV status in past 12 months: 8%

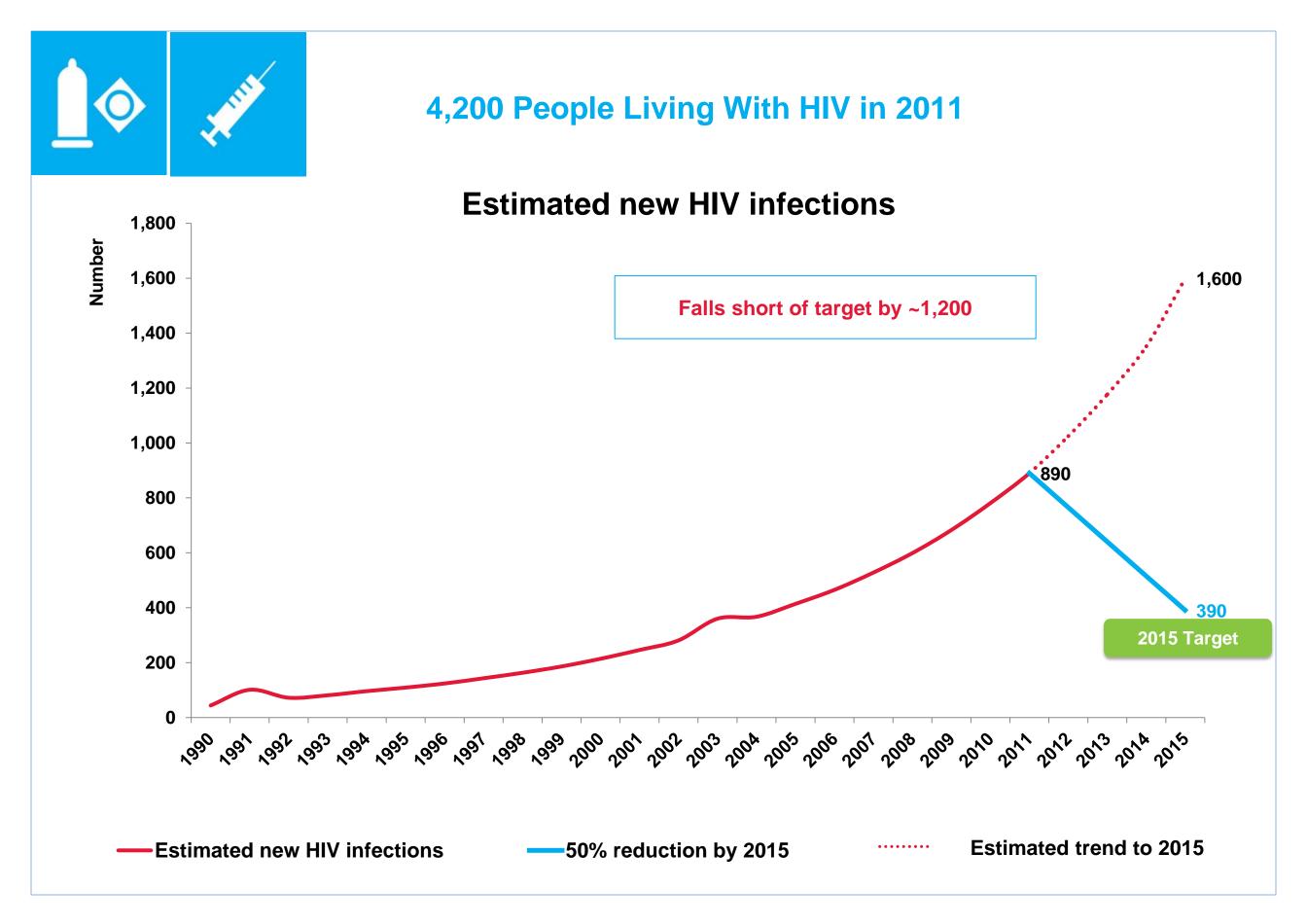
## CHALLENGES

- *"The numbers are still too low (in a population of 94 M)."*
- Maximizing resources in a climate of funding gap
- Legal, policy and social barriers

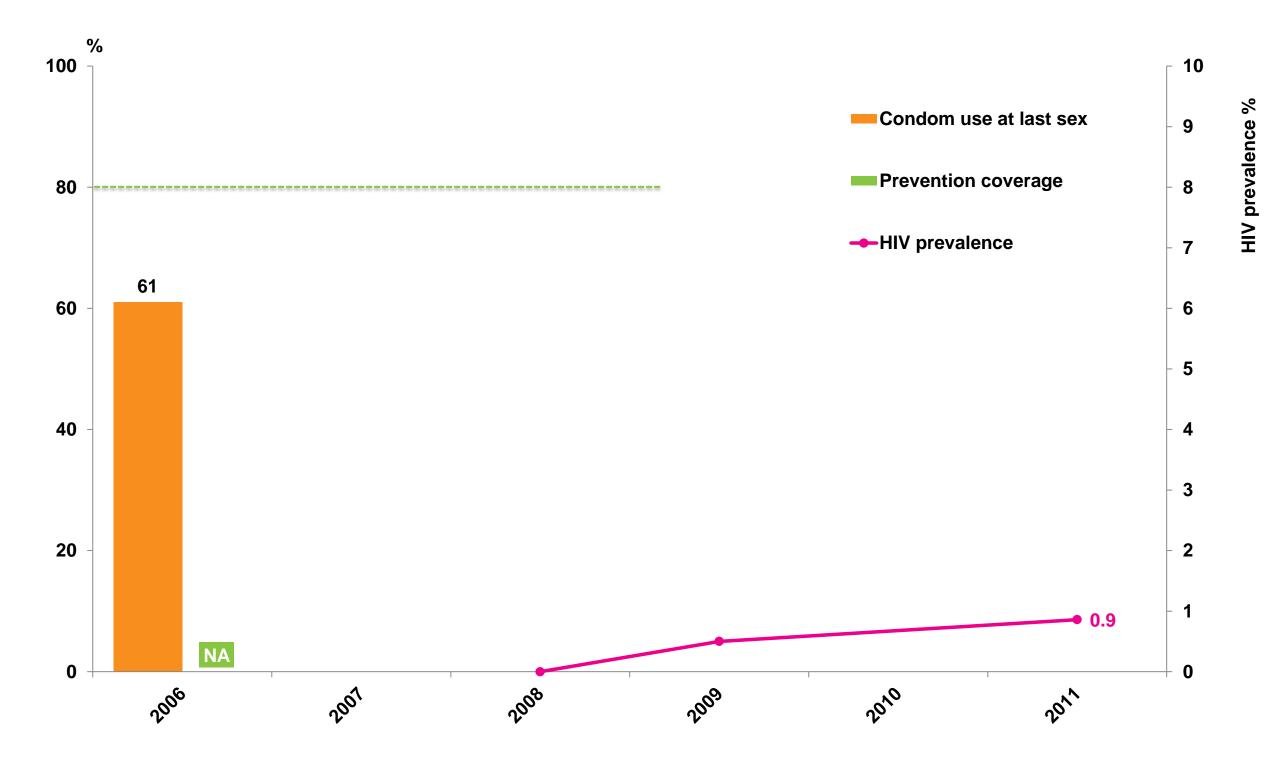
## **GAME CHANGERS**

- Sustained high level advocacy
- Investment planning at national (legislative and executive branches) and local (local government units) levels, including private sector
- Approval of the operations research on harm reduction
- Building and brokering partnerships with the CHR, SOGI and PLHIV groups

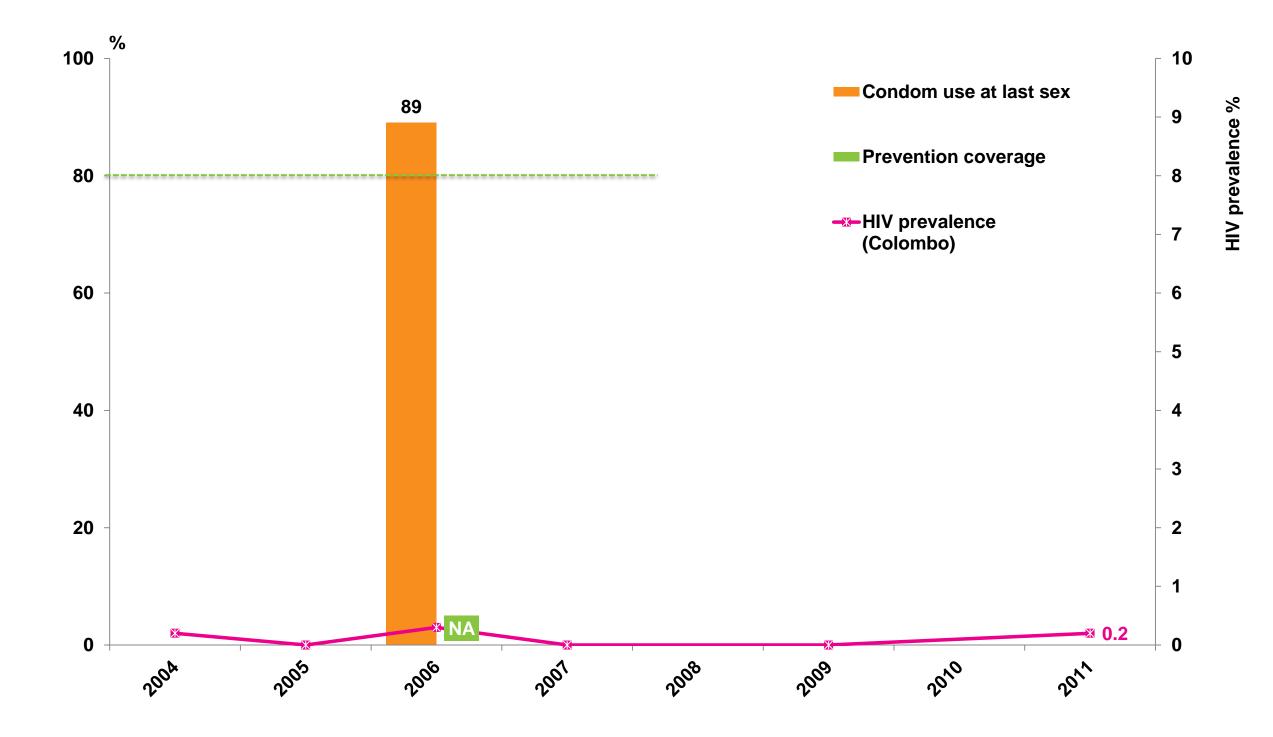
# **SRI LANKA**

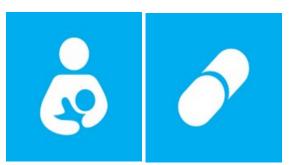


### Men Who Have Sex With Men: HIV prevalence, behaviour and prevention coverage



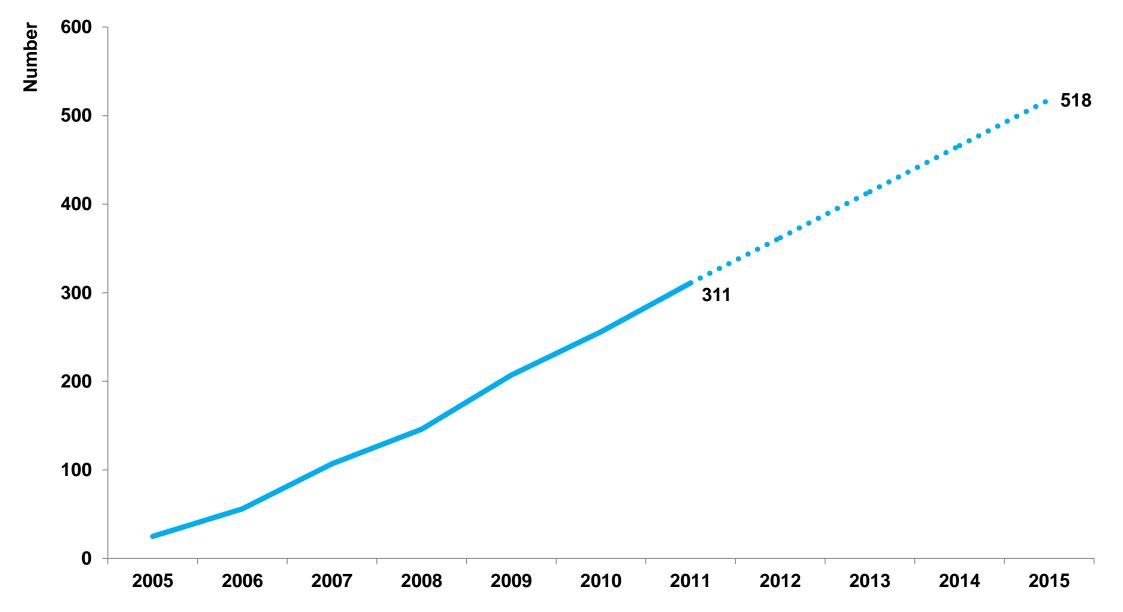
### Female Sex Workers: HIV prevalence, behaviour and prevention coverage



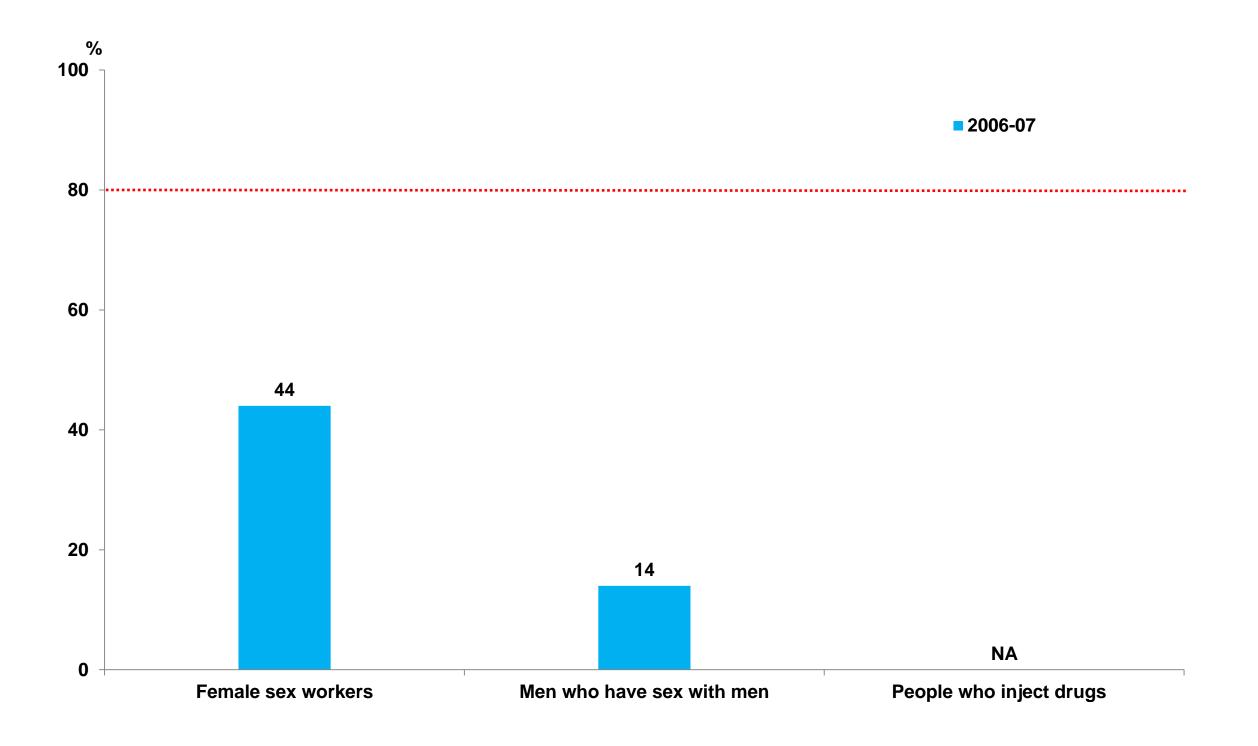


### 1,400 Adults Eligible for Antiretroviral Therapy in 2011

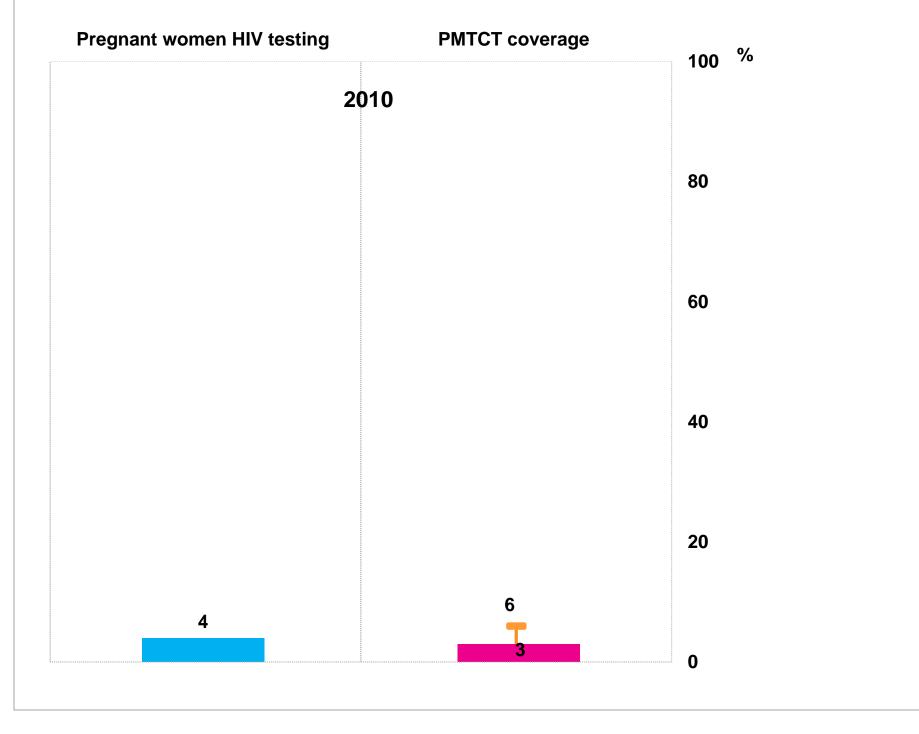
#### Number of people receiving antiretroviral therapy



HIV testing coverage among key populations at higher risk

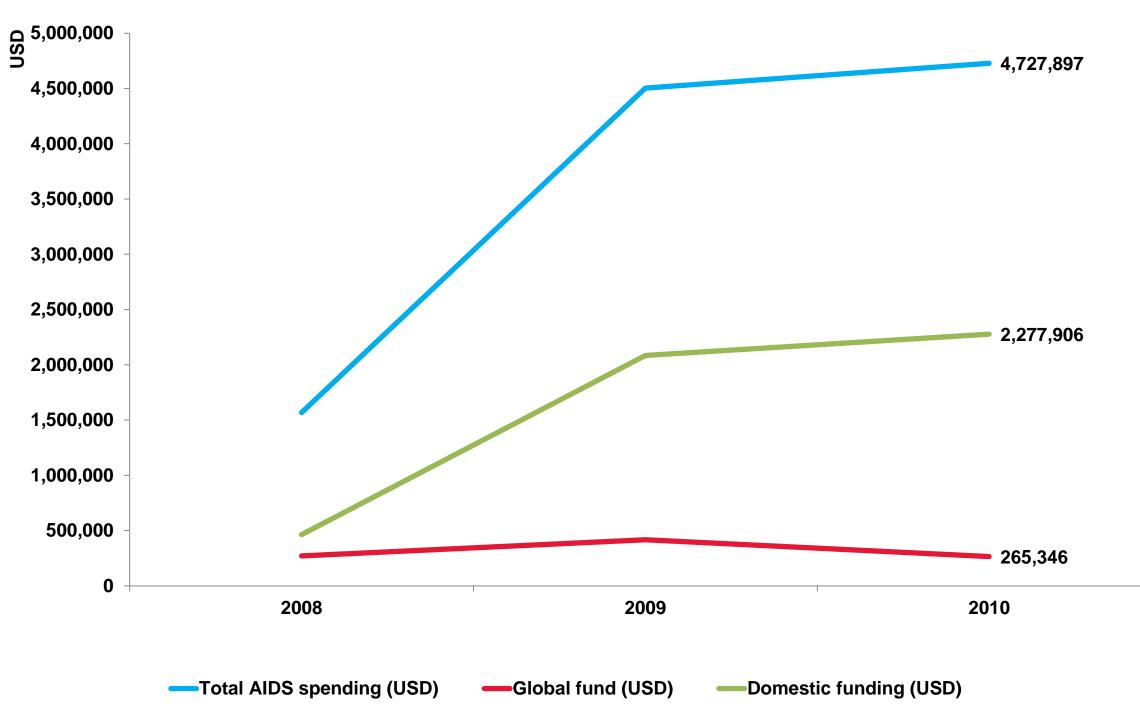


### <100 Pregnant Women Eligible for Antiretroviral Therapy in 2011





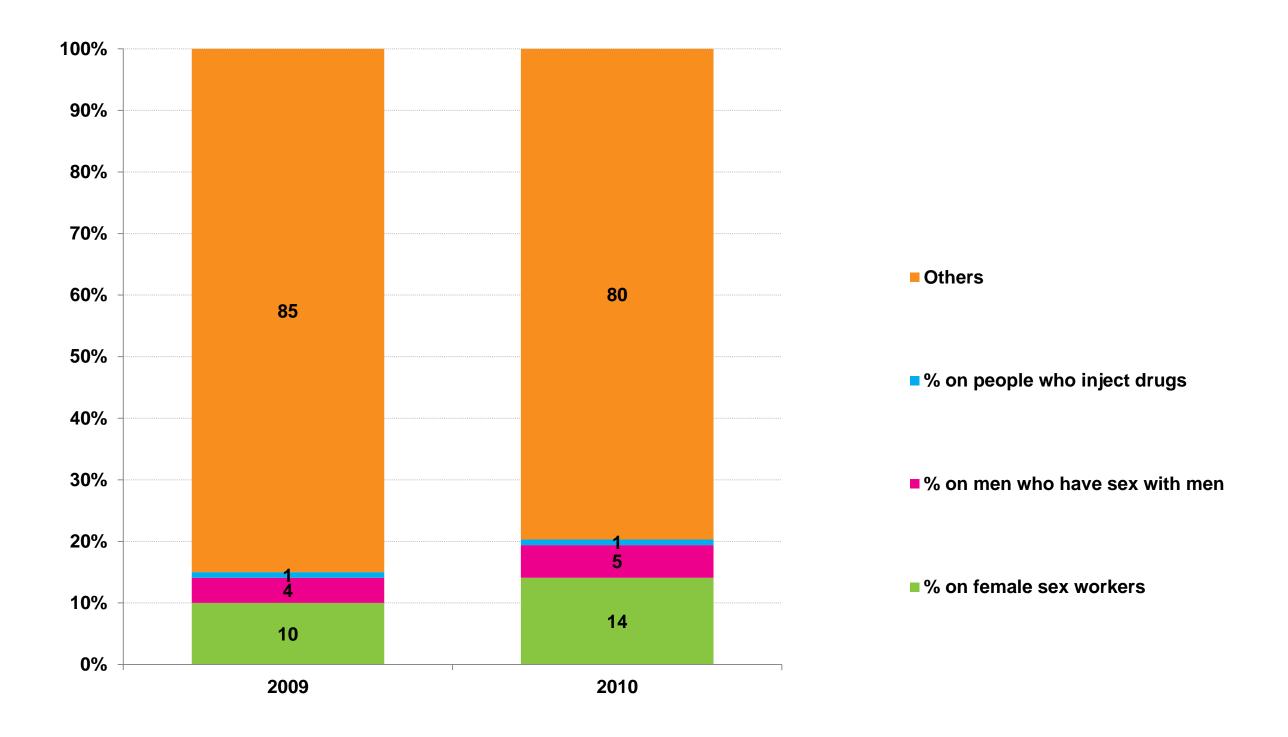
#### **AIDS Spending by Financing Source**



#### AIDS spending by category



### Proportion of total prevention programme spending on key populations at higher risk





## Stigma & discrimination

### Analysis of GARP / NCPI 2012

### Legal obstacles to HIV response

- Criminalize men who have sex with men
- Punitive laws relating to drugs (compulsory treatment)
- Criminalize sex work
- Public order offences, against sex workers

### **Selected indicators of response**

Access to justice:

- Legal services (legal aid or other)
  - NHRI or other mechanisms

### Protective laws:

Civil society rating of efforts to implement human rights-related laws and policies: **2009: 3/10** 

### 2011: 1/10

### **Travel restrictions**



### STIGMA INDEX

Percent of PLHIV respondents denied health services because of HIV status in past 12 months: N/A

## CHALLENGES

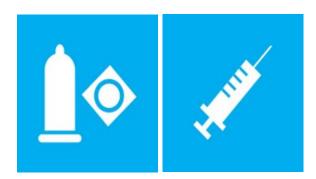
- Punitive laws fuel stigma and discrimination for key populations at risk creating barriers to HIV services.
- Low of domestic financial commitments for HIV prevention with key populations at risk.
- Civil society capacity for HIV prevention with populations at risk to HIV still weak.

## **GAME CHANGERS**

- Drive momentum for protective anti-discrimination laws that will neutralize criminalization.
- Cost effectiveness research generated in partnership with civil society.

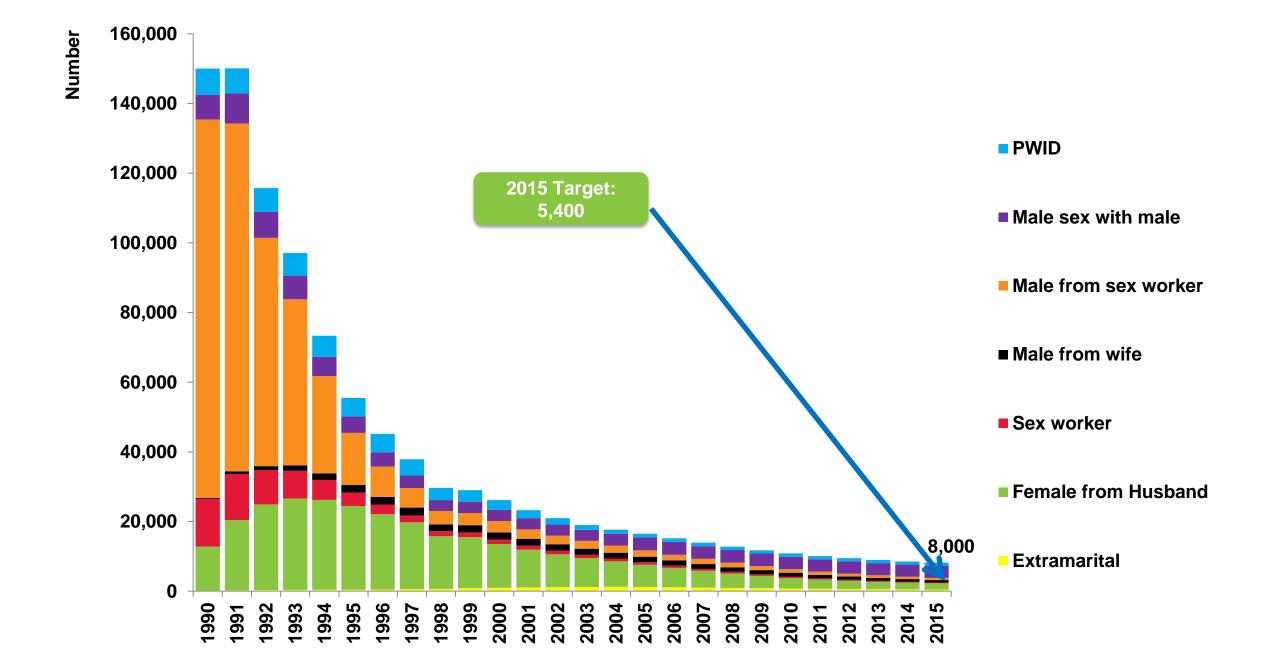
• Twinning with Centre's of HIV Prevention excellence in the region.

# THAILAND

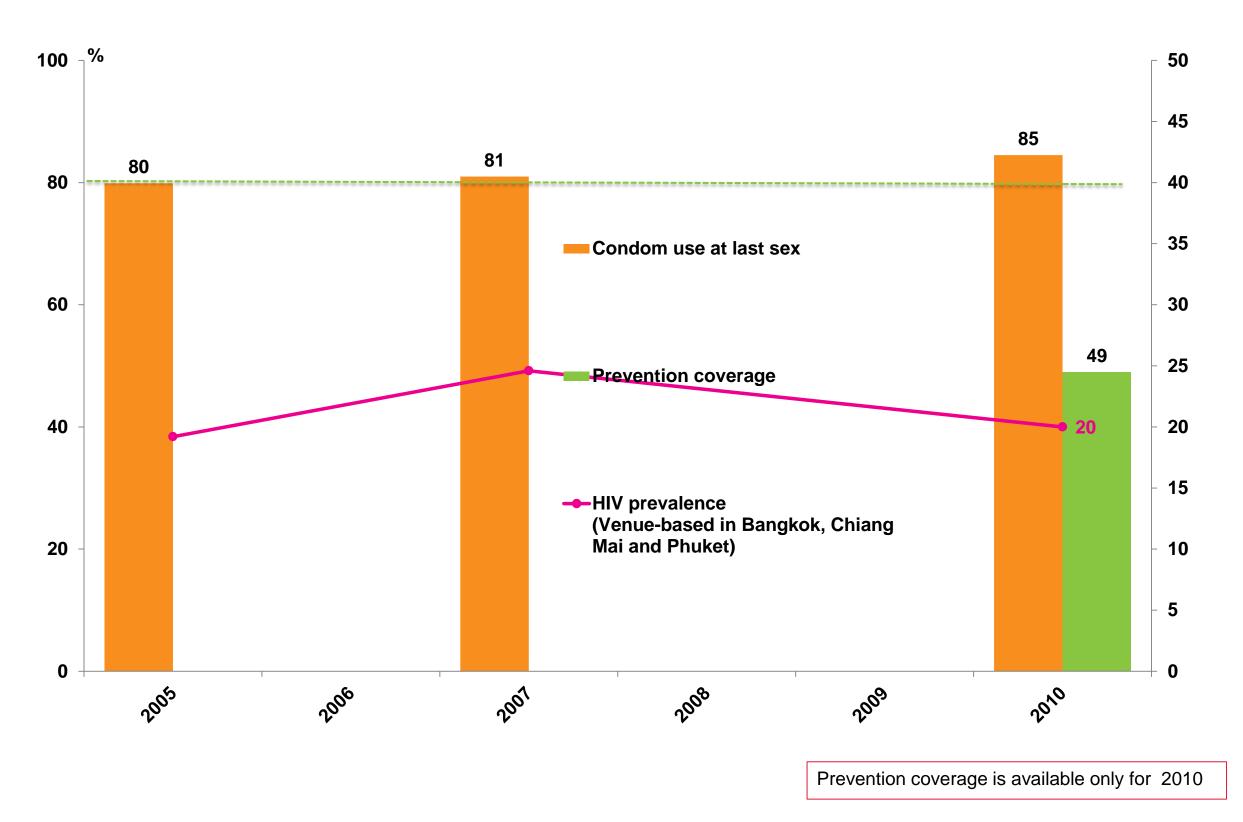


### 490,000 People Living With HIV in 2011

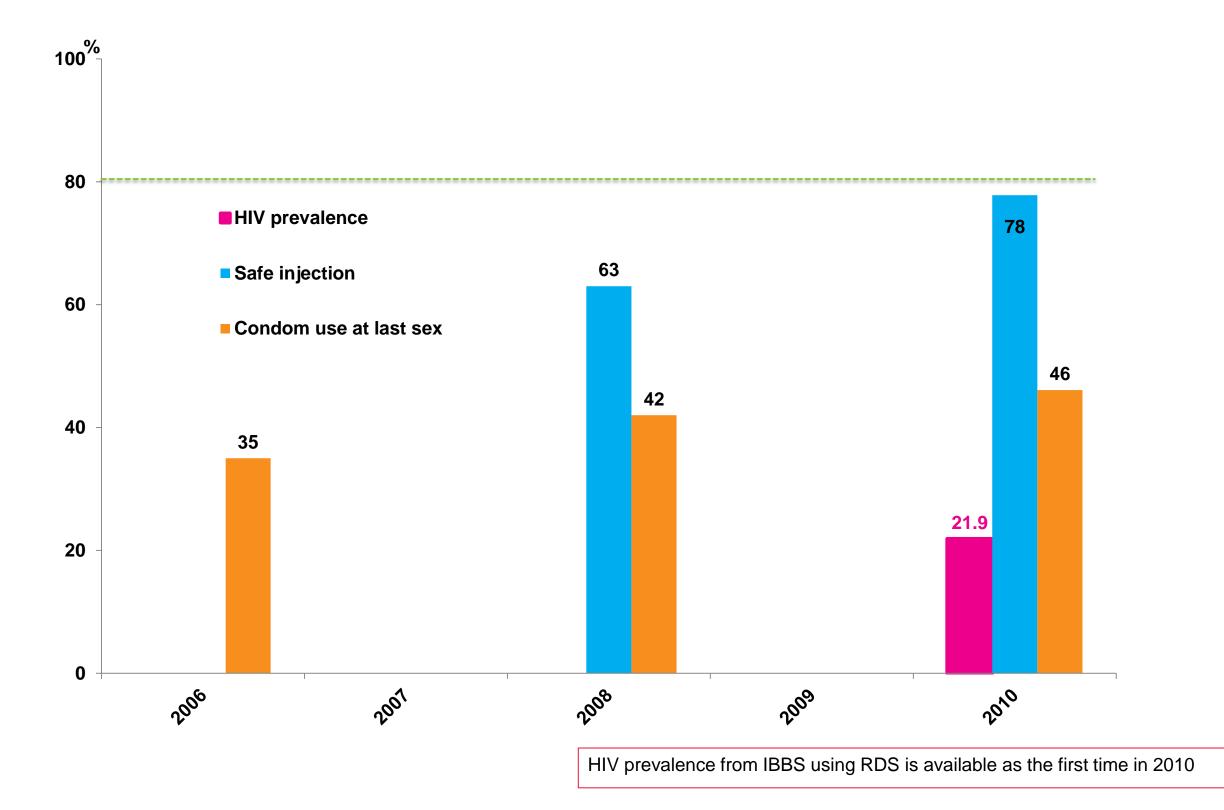
### Estimated adult new HIV infections by sub-population (AEM)



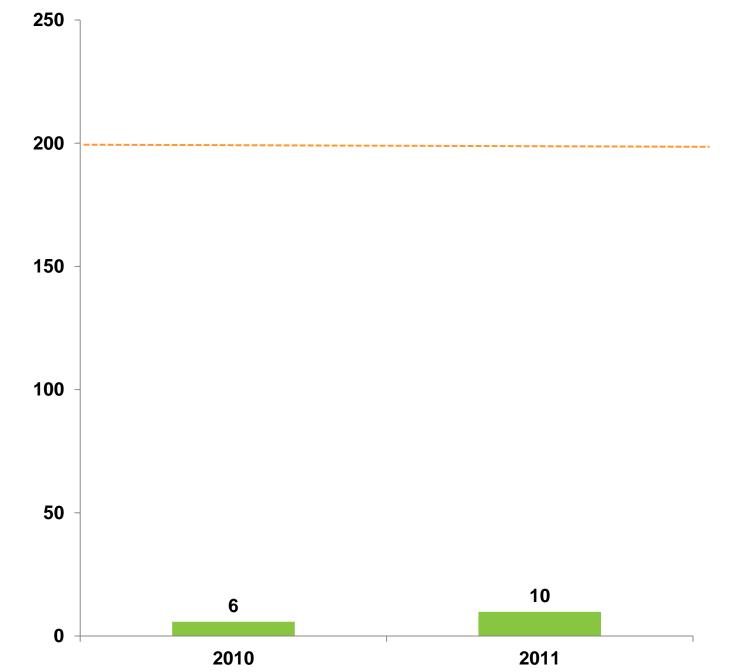
### Men Who Have Sex With Men: HIV prevalence, behaviour and prevention coverage



#### People Who Inject Drugs: HIV prevalence and behaviors



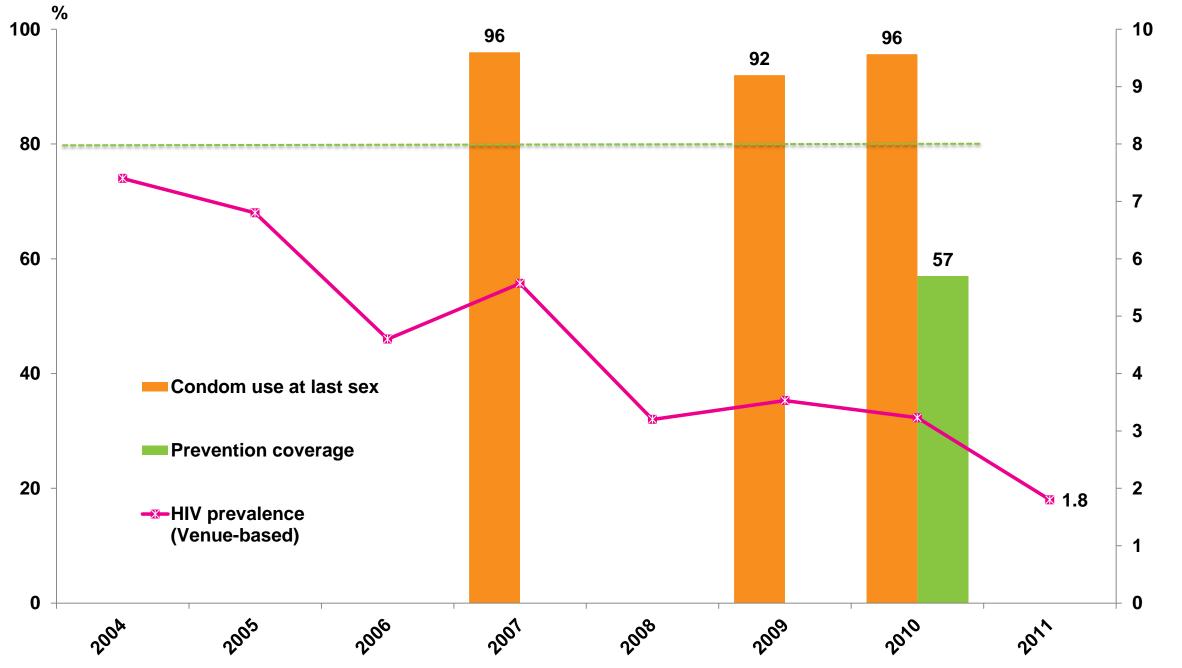
Number of needle/syringes distributed per person who inject drugs per year

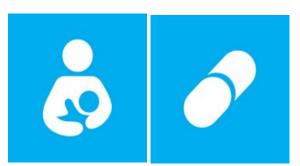


Number of needles/syringes

#### Thailand

#### Venue Based Female Sex Workers: HIV prevalence, behaviour and prevention coverage



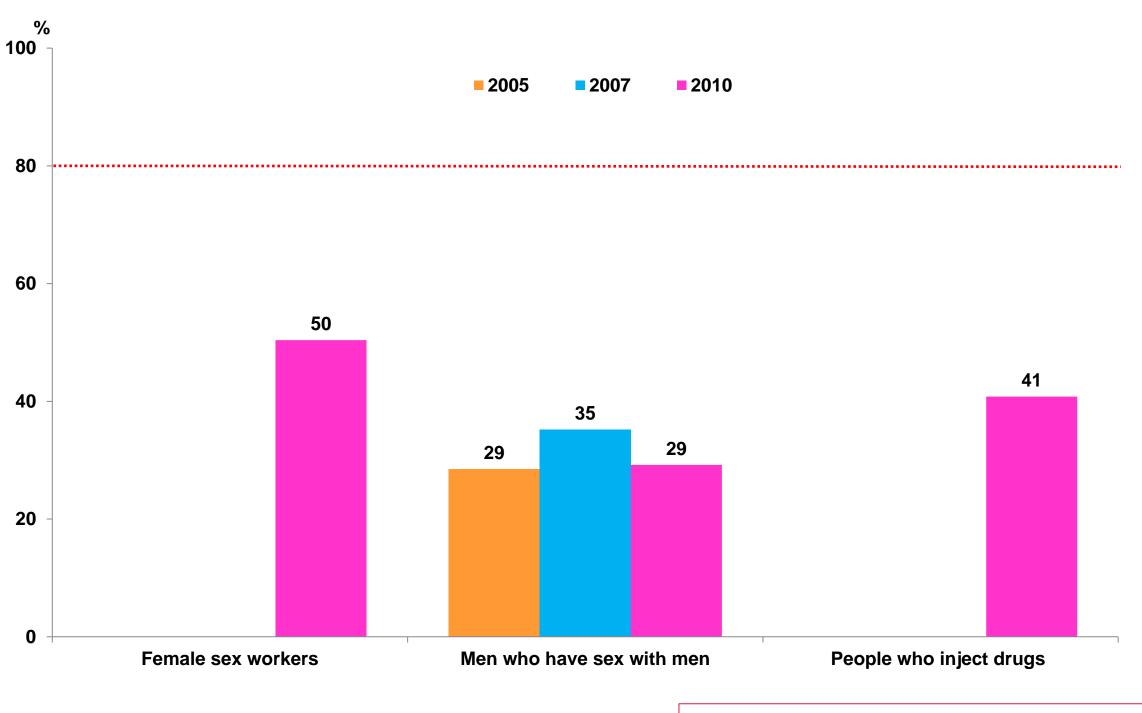


### **310,000 Adults Eligible for Antiretroviral Therapy in 2011**

#### Number Number 250,000 239,538 . . . . . . . . . . 225,272 200,000 150,000 100,000 50,000 0 2012 2005 2006 2007 2008 2009 2010 2011 2013 2014 2015

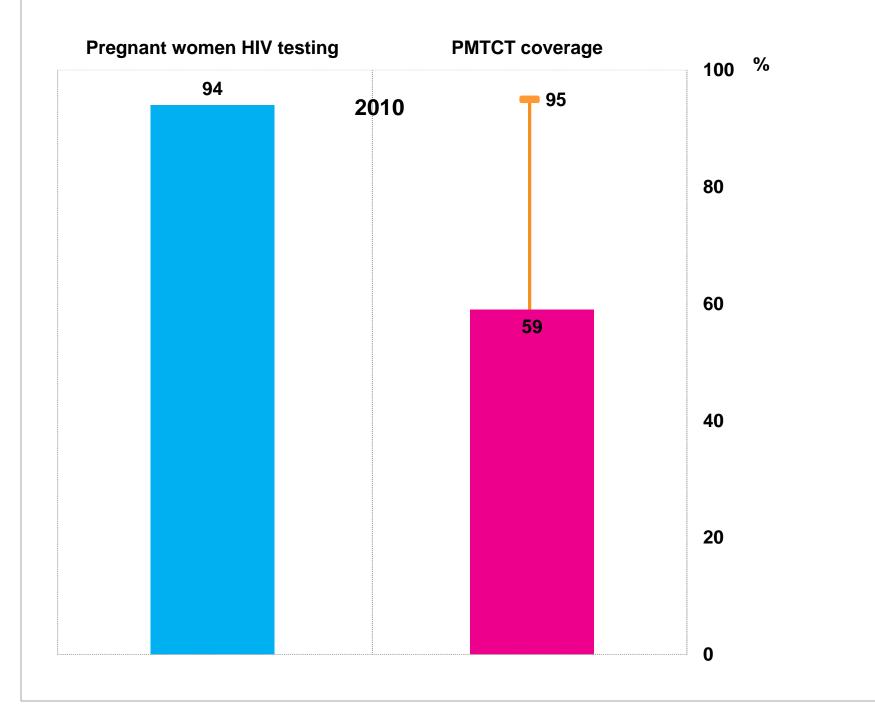
#### Number of people receiving antiretroviral therapy

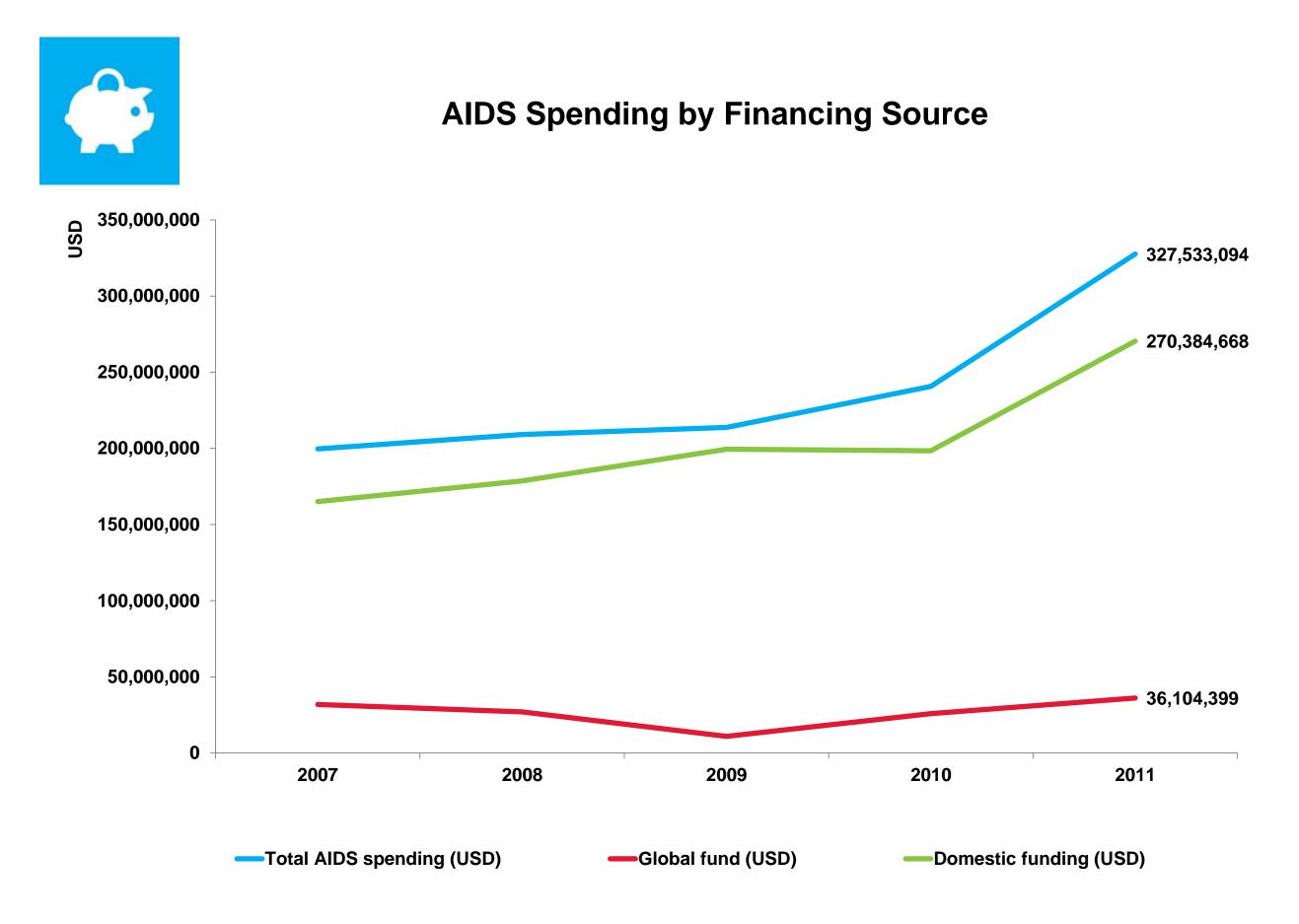
#### HIV testing coverage among key populations at higher risk



Trend data before 2010 for FSW and PWID is not available

#### 3,600 Pregnant Women Eligible for Antiretroviral Therapy in 2011

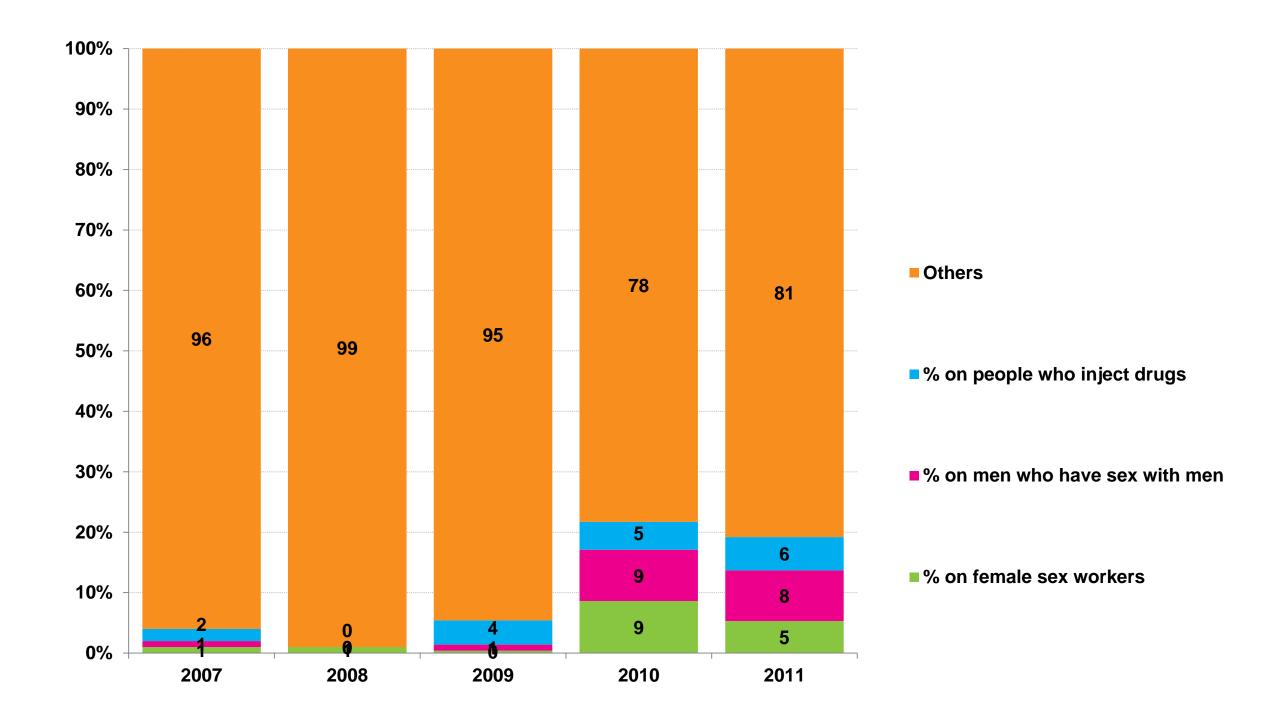




#### AIDS spending by category



### Proportion of total prevention programme spending on key populations at higher risk





# Stigma & discrimination

### Analysis of GARP / NCPI 2012

#### Legal obstacles to HIV response

- Criminalize people who use drugs
- Criminalize sex work
- Discriminate against migrants
- Age of consent for HIV testing (18 years)

#### **Selected indicators of response**

Access to justice:

- Legal services (legal aid or other)
  - NHRI or other mechanisms

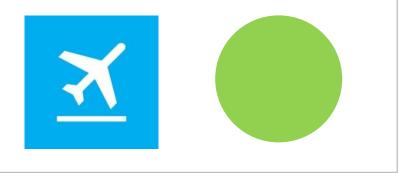
#### Protective laws:

Civil society rating of efforts to implement human rights-related laws and policies: **2009: 4/10** 

### 2011: 2/10

#### Thailand

### Travel restrictions



### STIGMA INDEX

Percent of PLHIV respondents denied health services because of HIV status in past 12 months: 20%

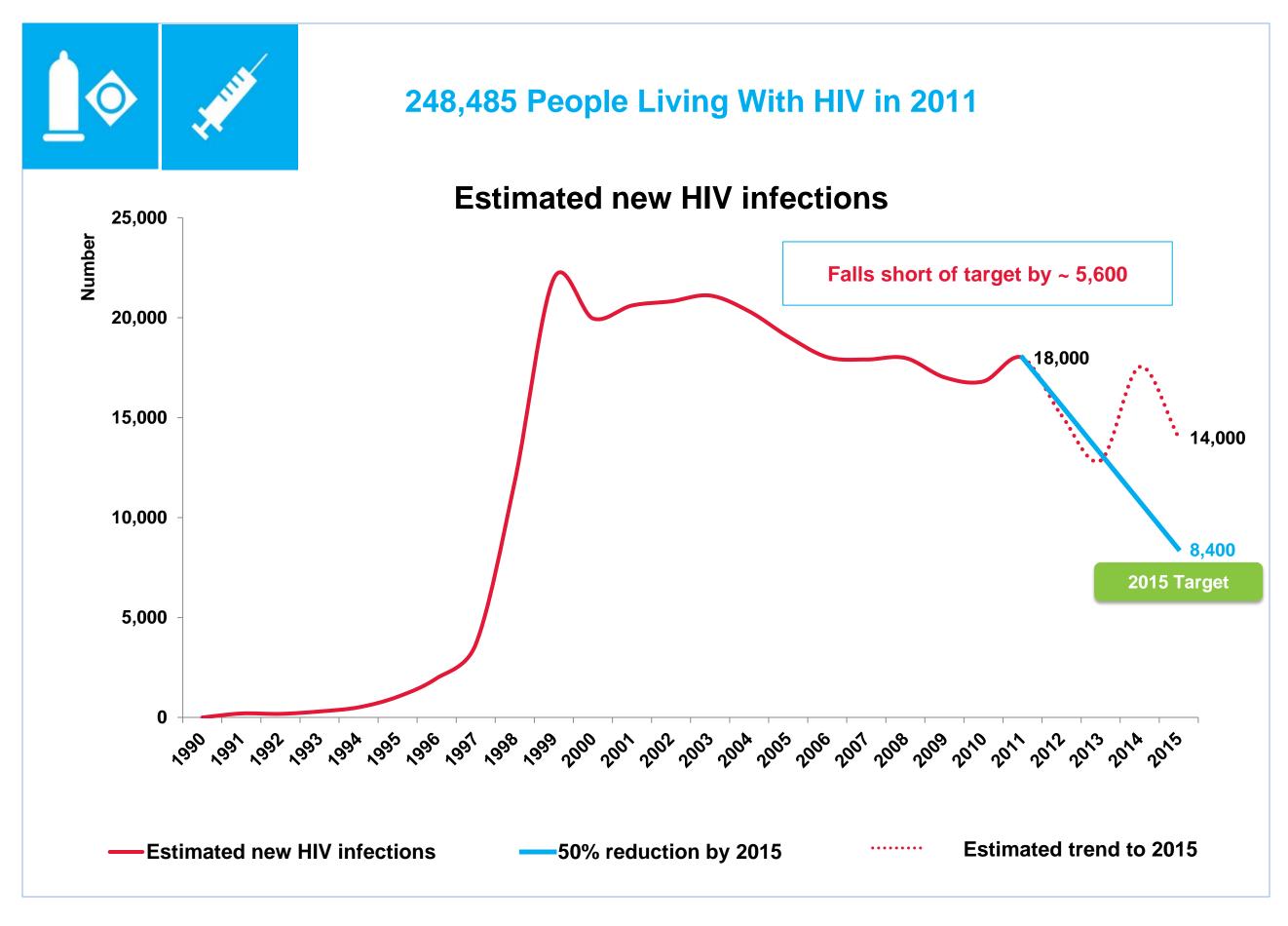
# CHALLENGES

- Response shaped by decade old concepts and approaches
- Low HCT uptake especially among key populations
- Quantity and quality of classical BCI for key populations

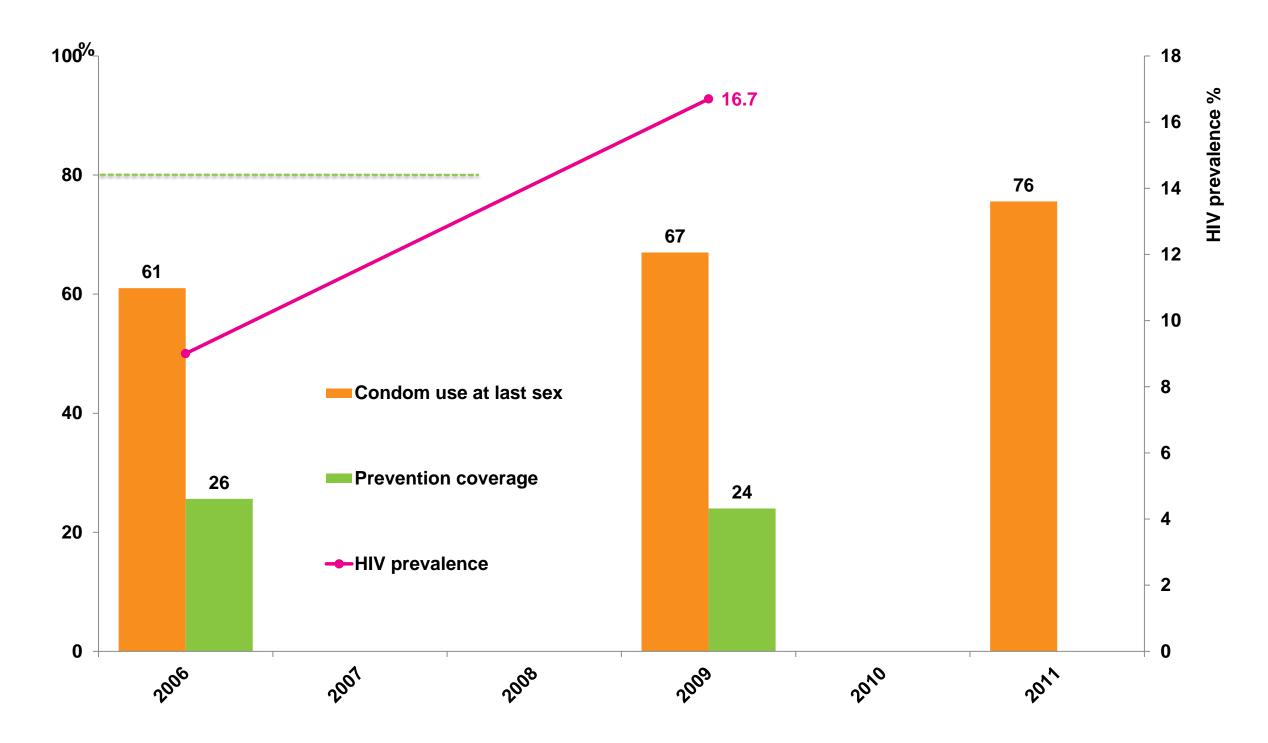
# **GAME CHANGERS**

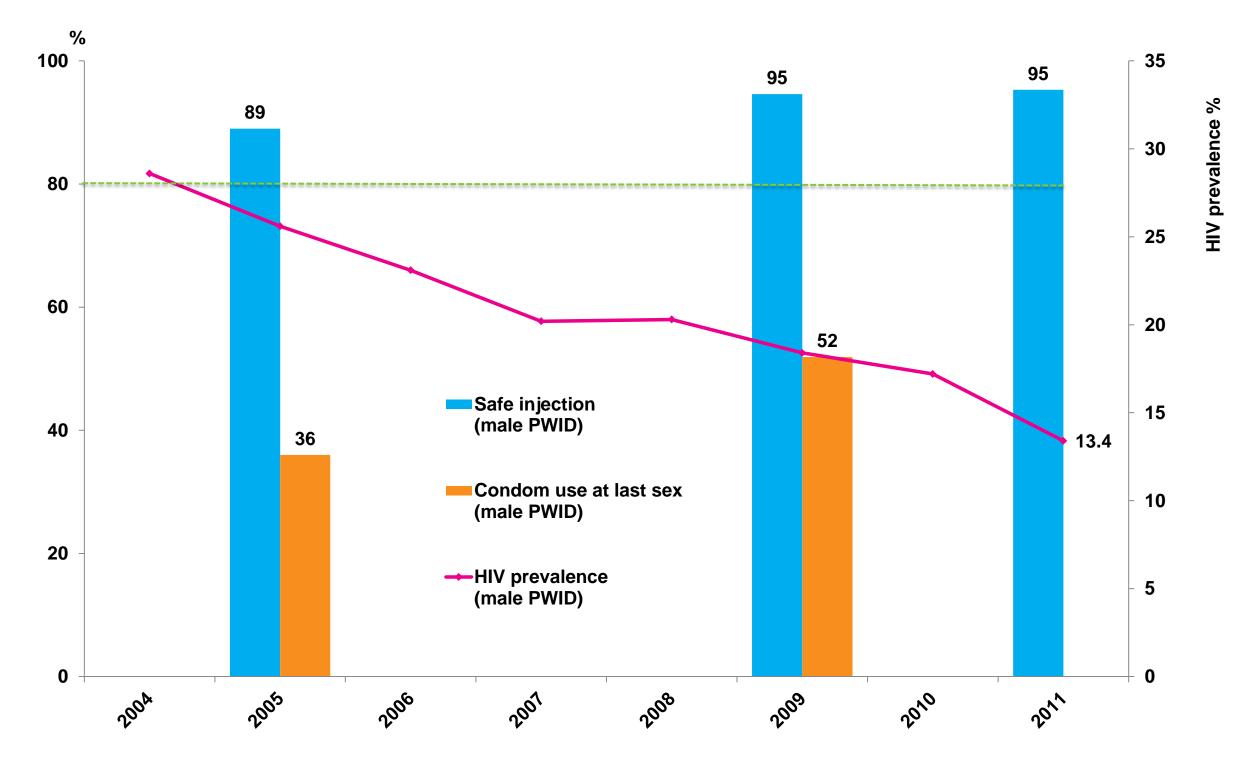
- Repositioning of AIDS
- More HCT options incl. home testing, community counseling & testing, PICT
- Strategic use of ARV

# VIET NAM

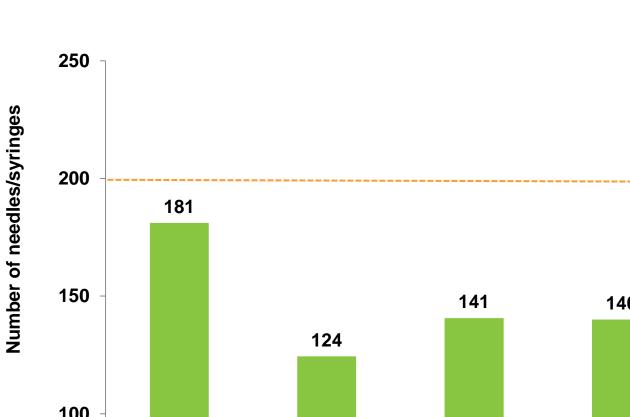


### Men Who Have Sex With Men: HIV prevalence, behaviour and prevention coverage

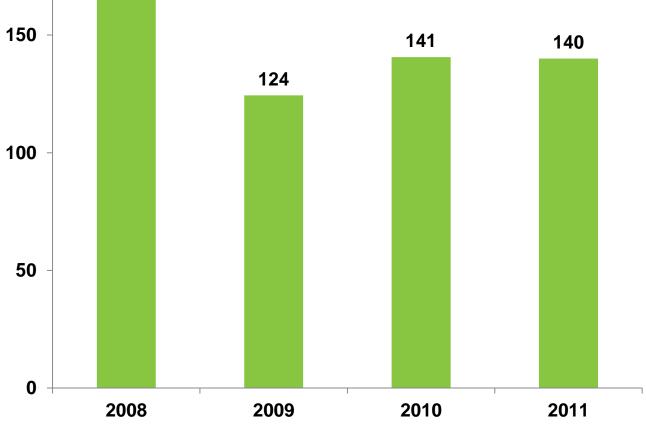




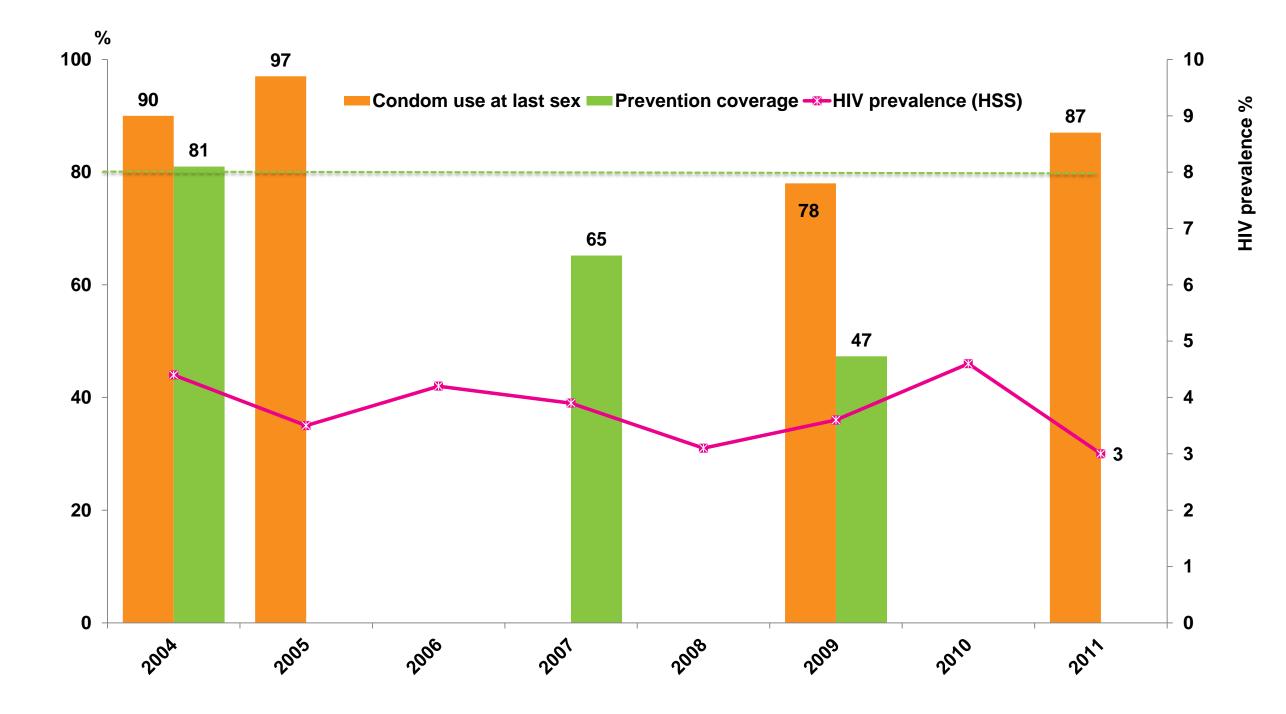
#### People Who Inject Drugs: HIV prevalence and behaviors



Number of needle/syringes distributed per person who inject drugs per year



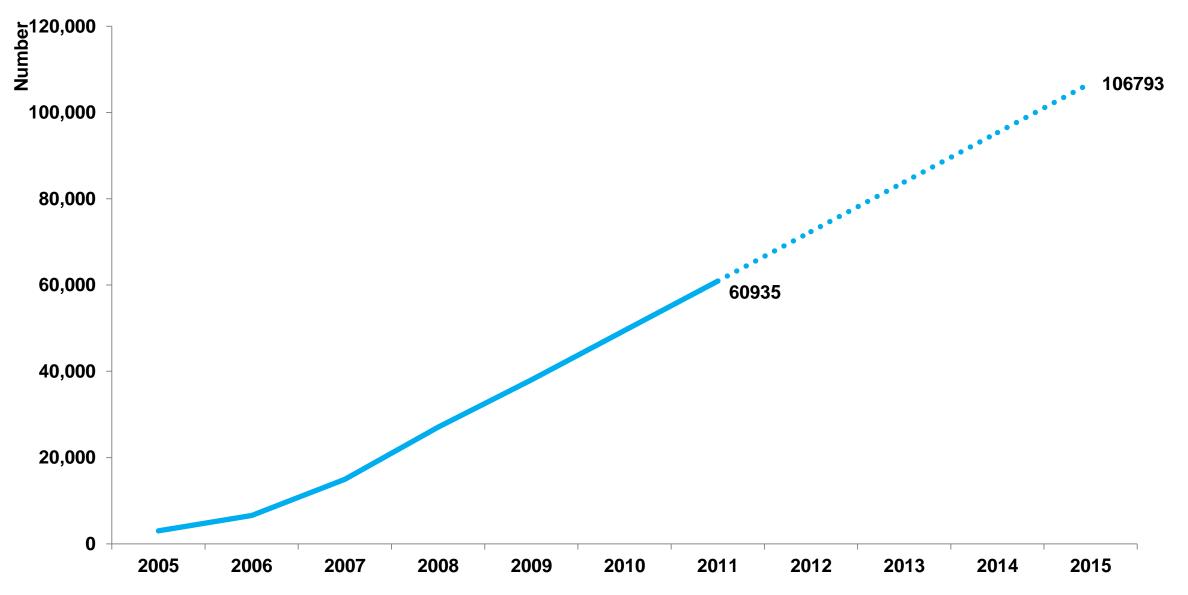
#### Female Sex Workers: HIV prevalence, behaviour and prevention coverage



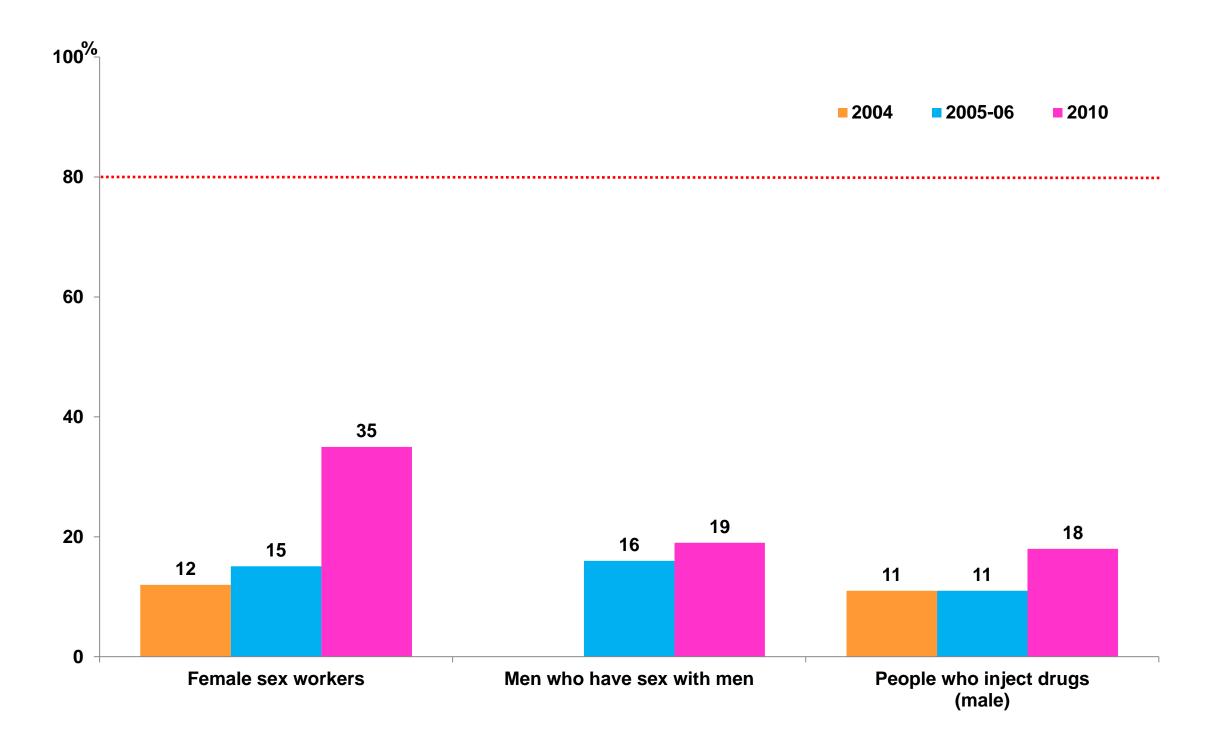


#### **100,000 Adults Eligible for Antiretroviral Therapy in 2011**

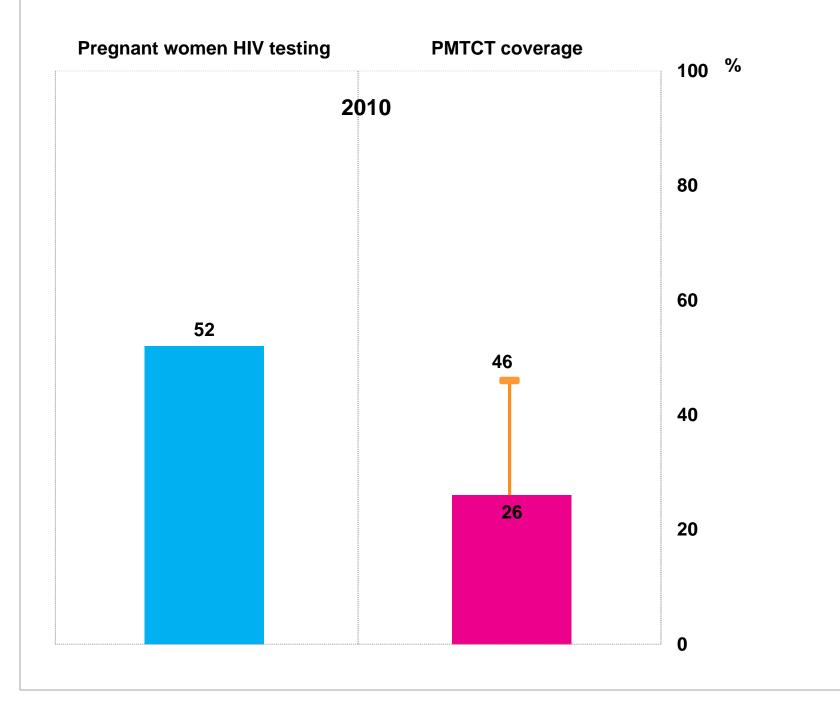
#### Number of people receiving antiretroviral therapy



#### HIV testing coverage among key populations at higher risk

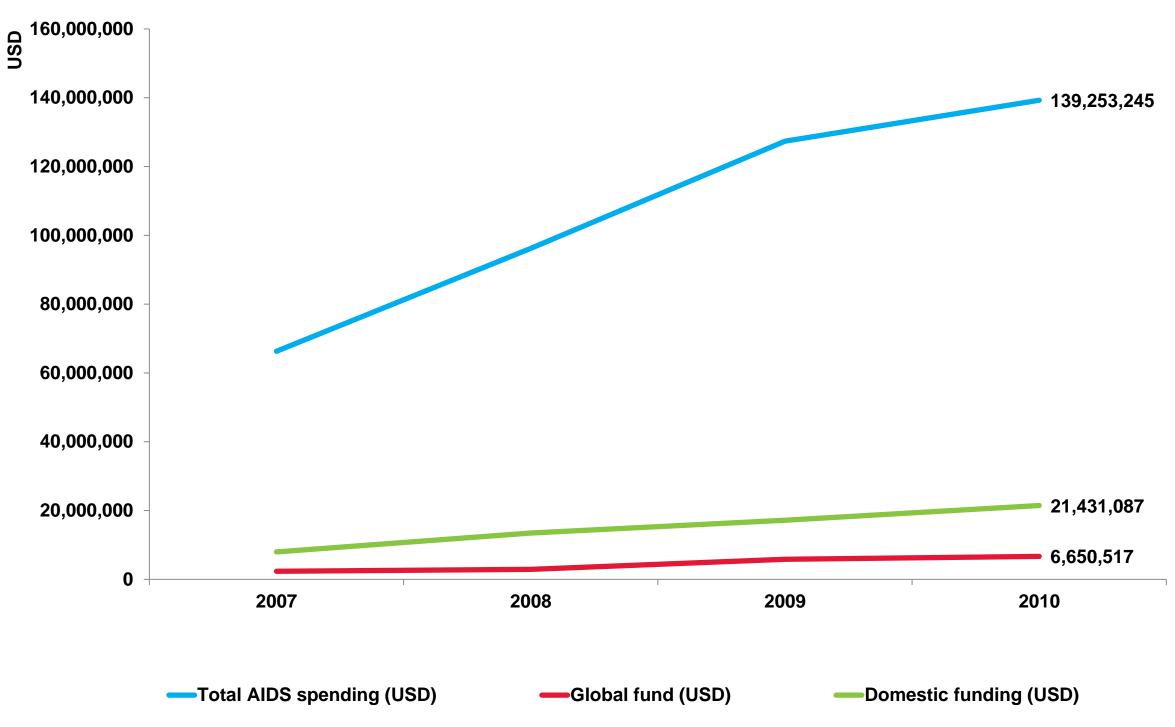


#### 1,000 Pregnant Women Eligible for Antiretroviral Therapy in 2011

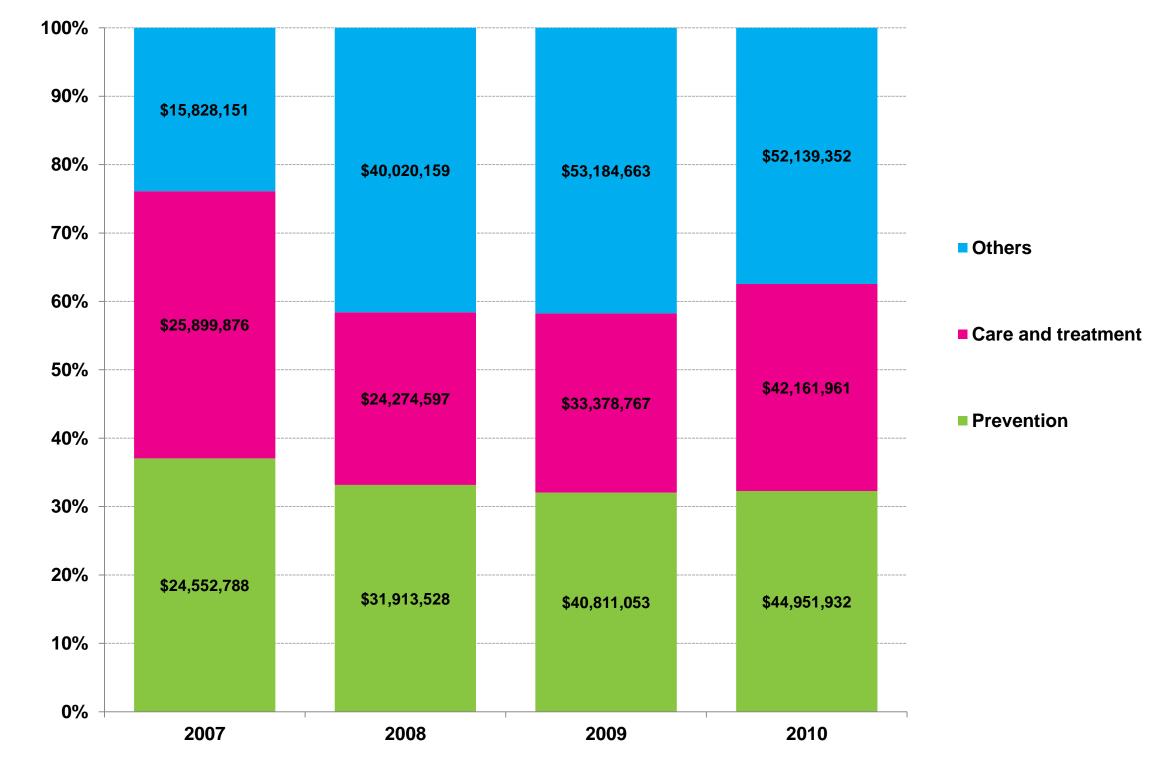




#### **AIDS Spending by Financing Source**



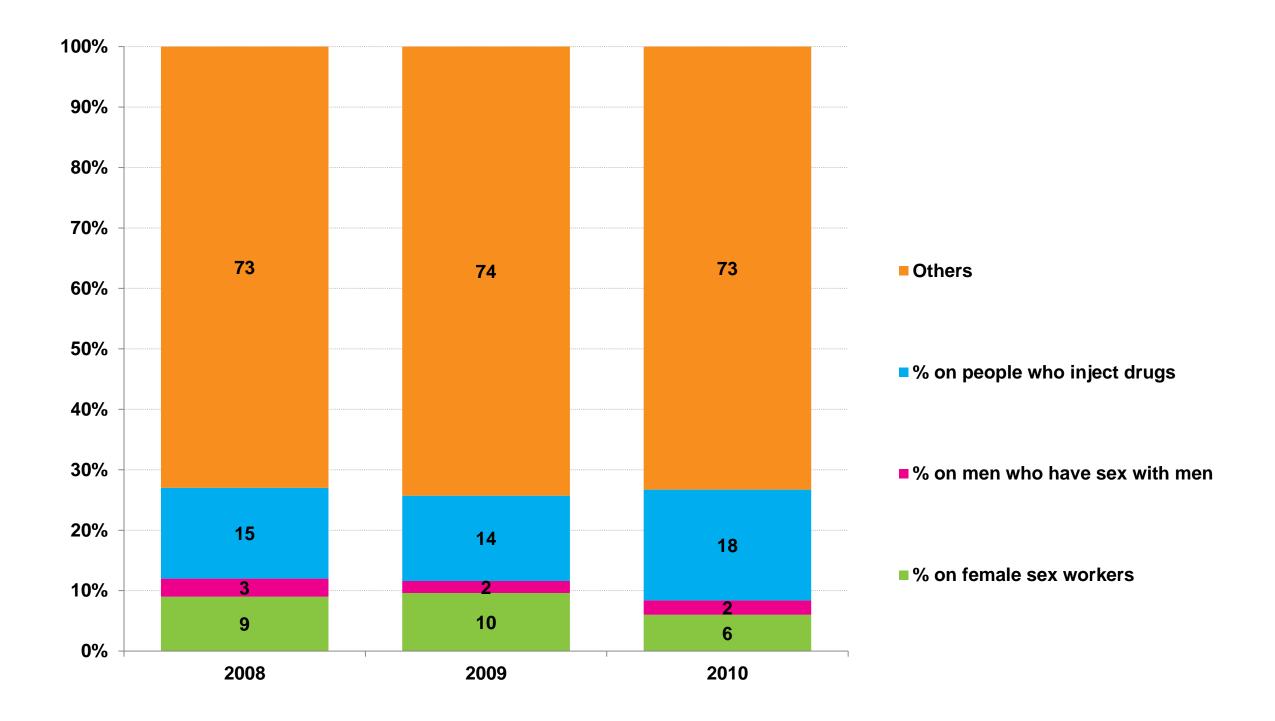
#### AIDS spending by category



USD

Viet Nam

### Proportion of total prevention programme spending on key populations at higher risk





# Stigma & discrimination

### Analysis of GARP / NCPI 2012

#### Legal obstacles to HIV response

- Criminalize sex work
- Compulsory detention of people who use drugs and (recently abolished) sex workers

#### **Selected indicators of response**

Access to justice:

- Legal services (legal aid or other)
  - NHRI or other mechanisms

Protective laws:

Civil society rating of efforts to implement human rights-related laws and policies: **2009: 5/10** 



Travel restrictions



Percent of PLHIV respondents denied health services because of HIV status in past 12 months: N/A

# CHALLENGES

 Compulsory detention and stigma & discrimination are formidable barriers to HIV service uptake

• An expected rapid decline in donor support threatens the sustainability of HIV services

 Vertical and suboptimal efficiency delivery of HIV testing, treatment and care services

## **GAME CHANGERS**

 Persistent policy advocacy to end compulsory detention and adopt rights-based and evidence-informed approaches

• Government's development of a resource mobilization strategy to increase domestic funding

• Piloting and expansion of point-ofcare services with increased community involvement through the Treatment 2.0 pilot