

# *No One Left Behind*

*Overview of the HIV Epidemic and  
Response in Asia and the Pacific*

*APBCA, Melbourne, July 2014*

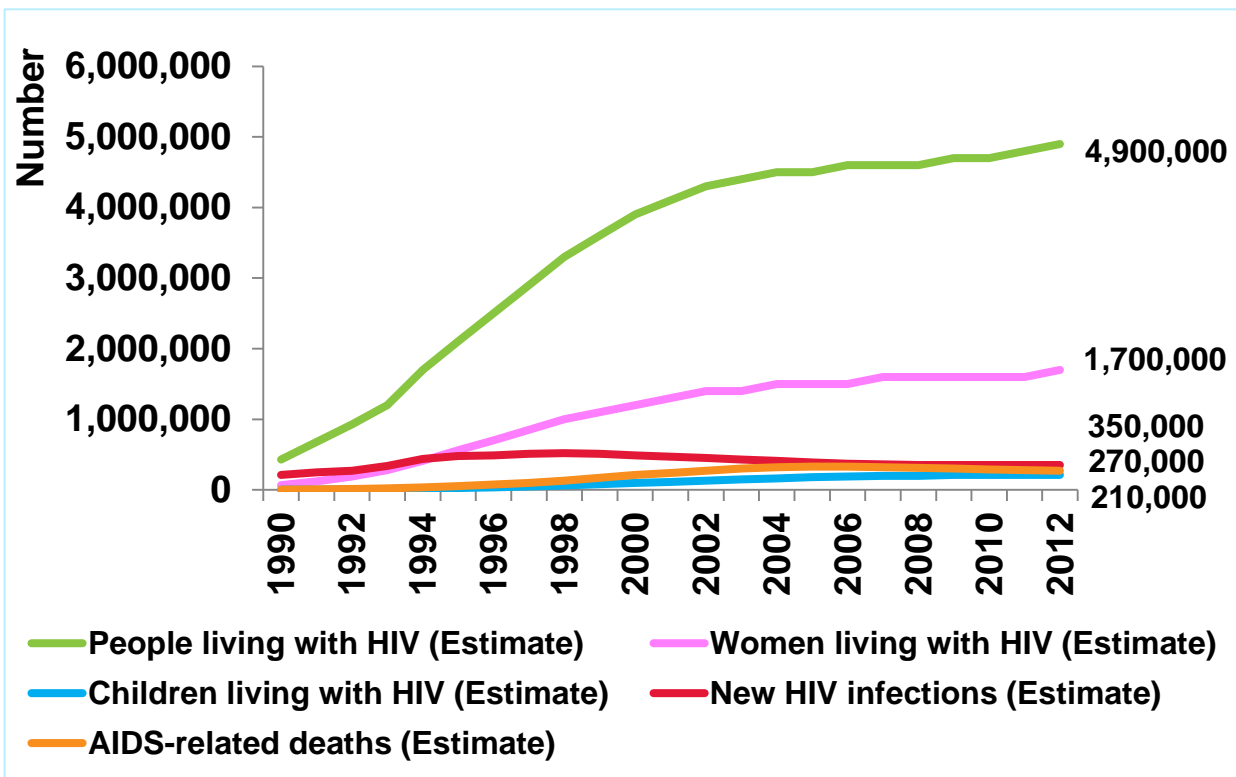
*Manuel da Quinta*

*Regional Community Mobilization and Networking Adviser*

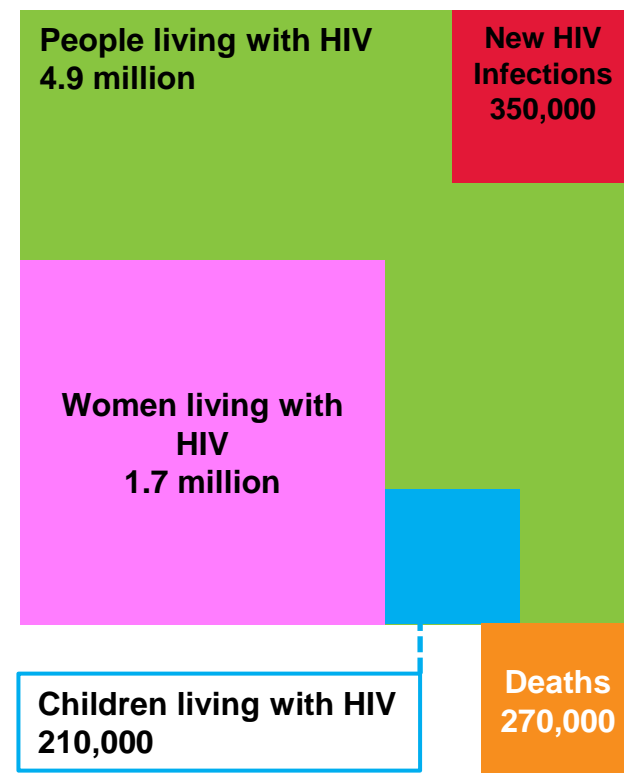
*UNAIDS Regional Support Team, Asia and the Pacific , Bangkok*

# A regional overview of trends in HIV infections and AIDS deaths

## HIV and AIDS in Asia and the Pacific 1990-2012



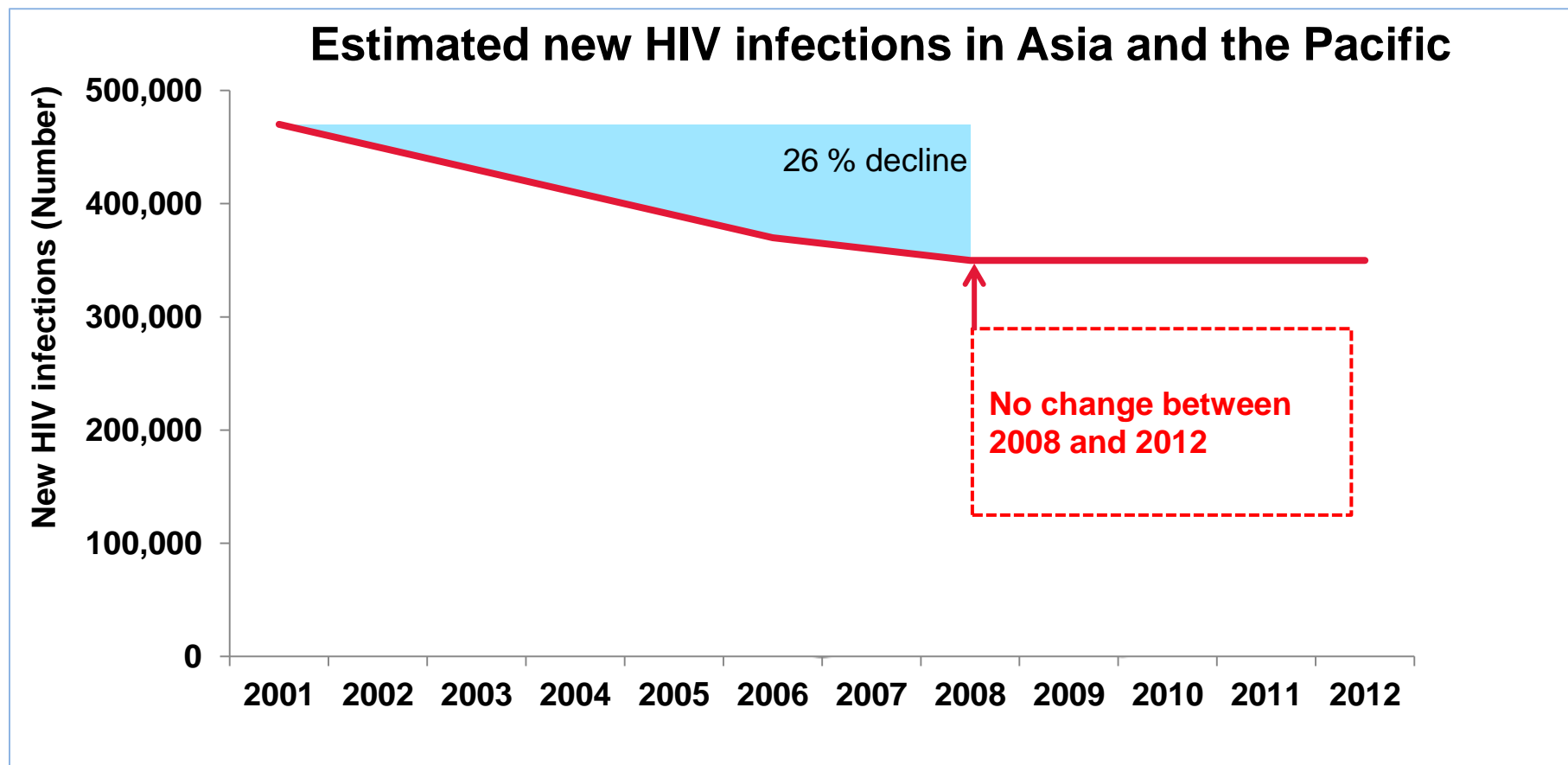
### 2012 “zoom-in”



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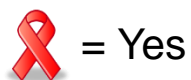
# The number of estimated new HIV infections in the region have stayed the same since 2008



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# Countries that account for >90% PLHIV and new infections and high national HIV prevalence in key populations



= Yes

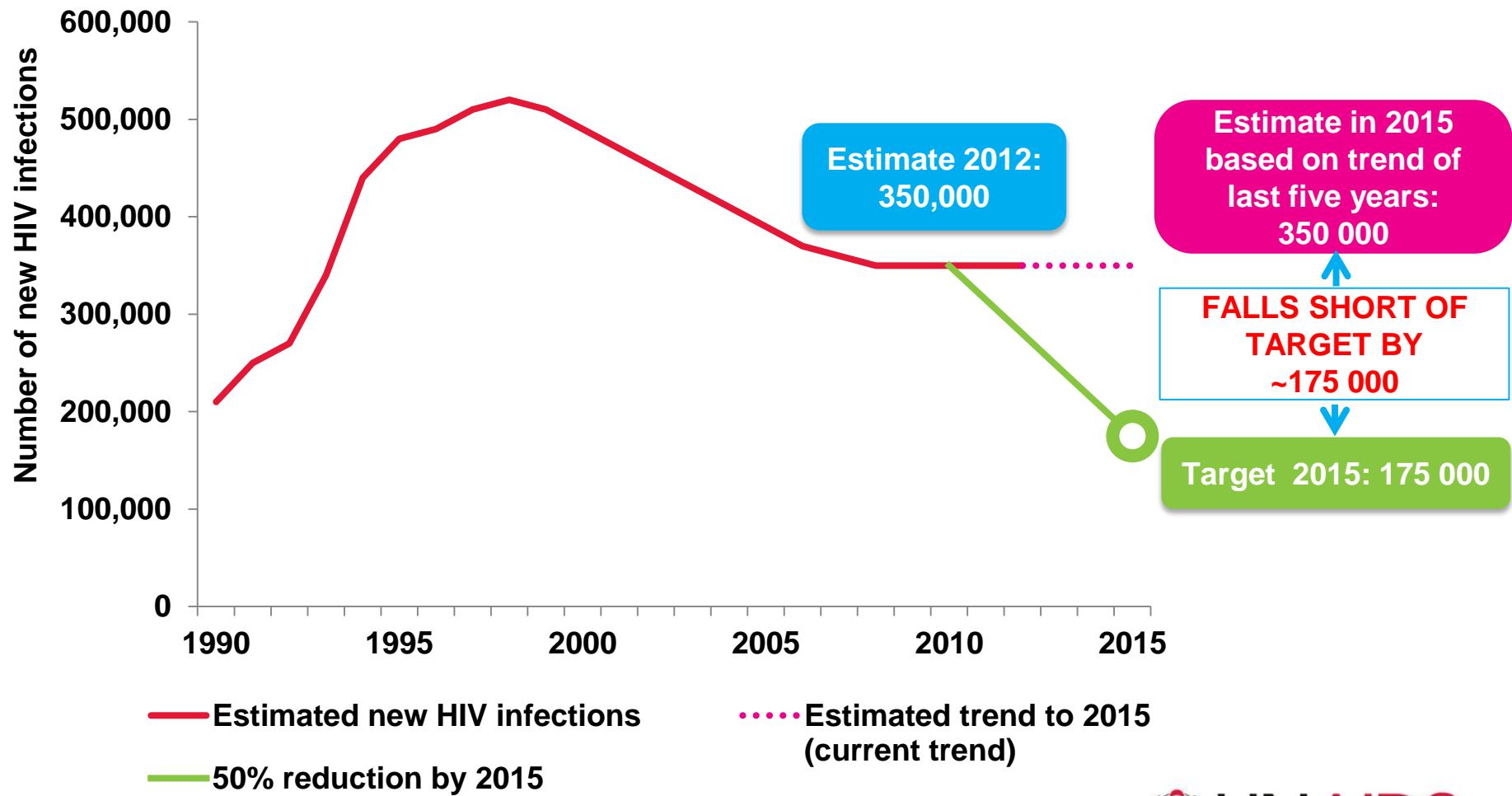
	People living with HIV (2012)	New HIV infections (2012)	National HIV prevalence > 5 % among MSM	National HIV prevalence > 5% among PWID	National HIV prevalence > 5% among FSW
India*	2,100,000	130,000			
Indonesia	610,000	76,000			
China*	780,000	48,000			
Pakistan	87,000	19,000			
Viet Nam	260,000	13,000			
Thailand	440,000	9,000			
Malaysia	82,000	7,400			
Myanmar	200,000	7,100			
Philippines	15,000	1,800			
Cambodia	76,000	1,400			
Nepal	49,000	1,200			
Papua New Guinea	25,000	<1000			

\* 2011 estimates

Prepared by [www.aidsdatahub.org](http://www.aidsdatahub.org) based on UNAIDS Estimates 2012; National HIV Sentinel Surveillance Surveys; and Integrated Biological and Behavioural Surveys

# ZERO NEW INFECTIONS:

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

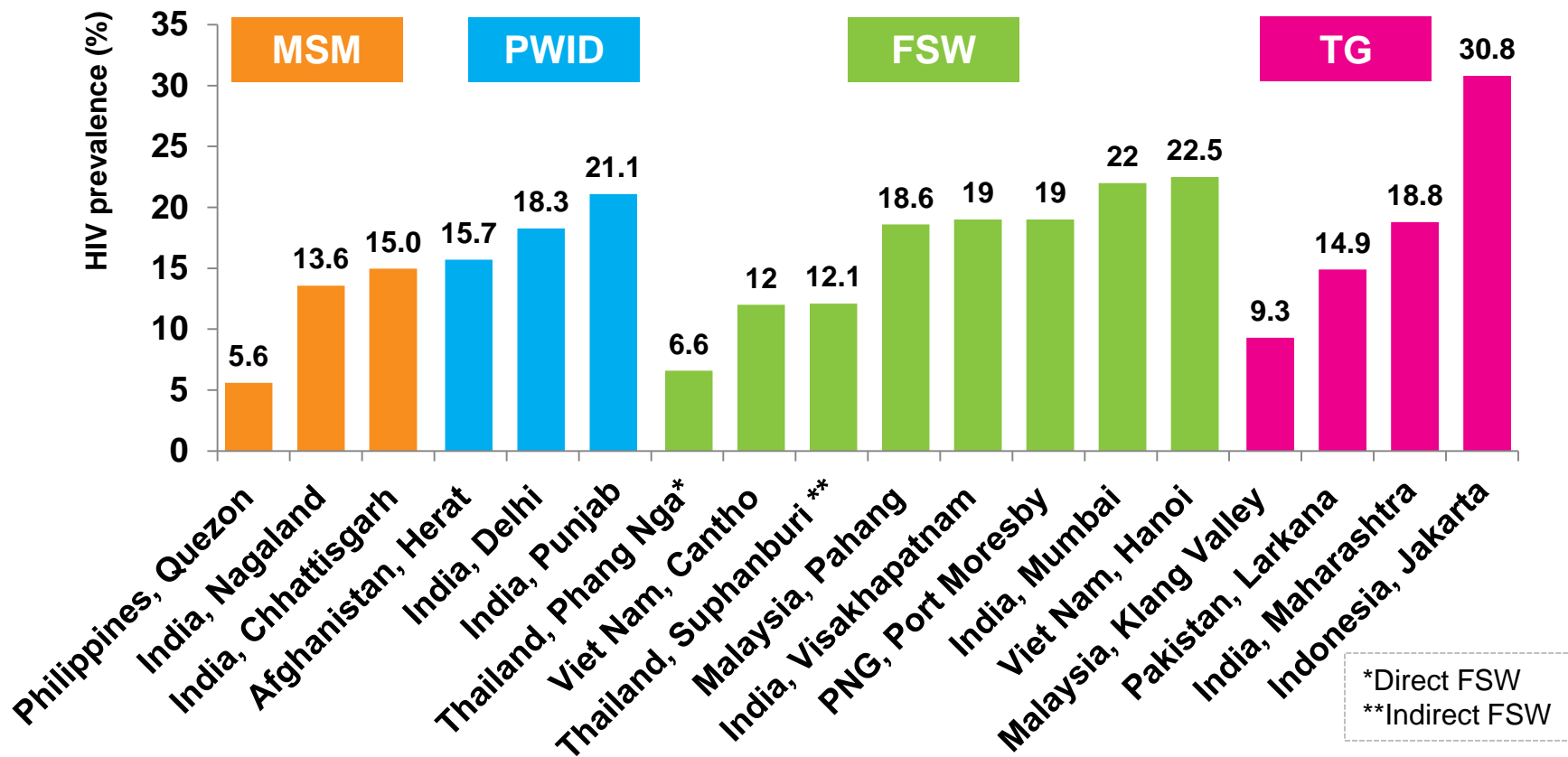


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Source: Prepared by [www.aidsdatahub.org](http://www.aidsdatahub.org) based on UNAIDS HIV Estimates 2012 for UNAIDS.(2013). Global Report: UNAIDS Report on the Global AIDS Epidemic 2013.

# National prevalence masks certain high prevalence geographical areas

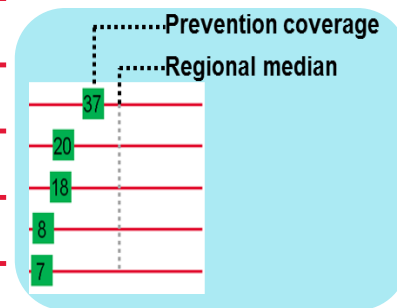
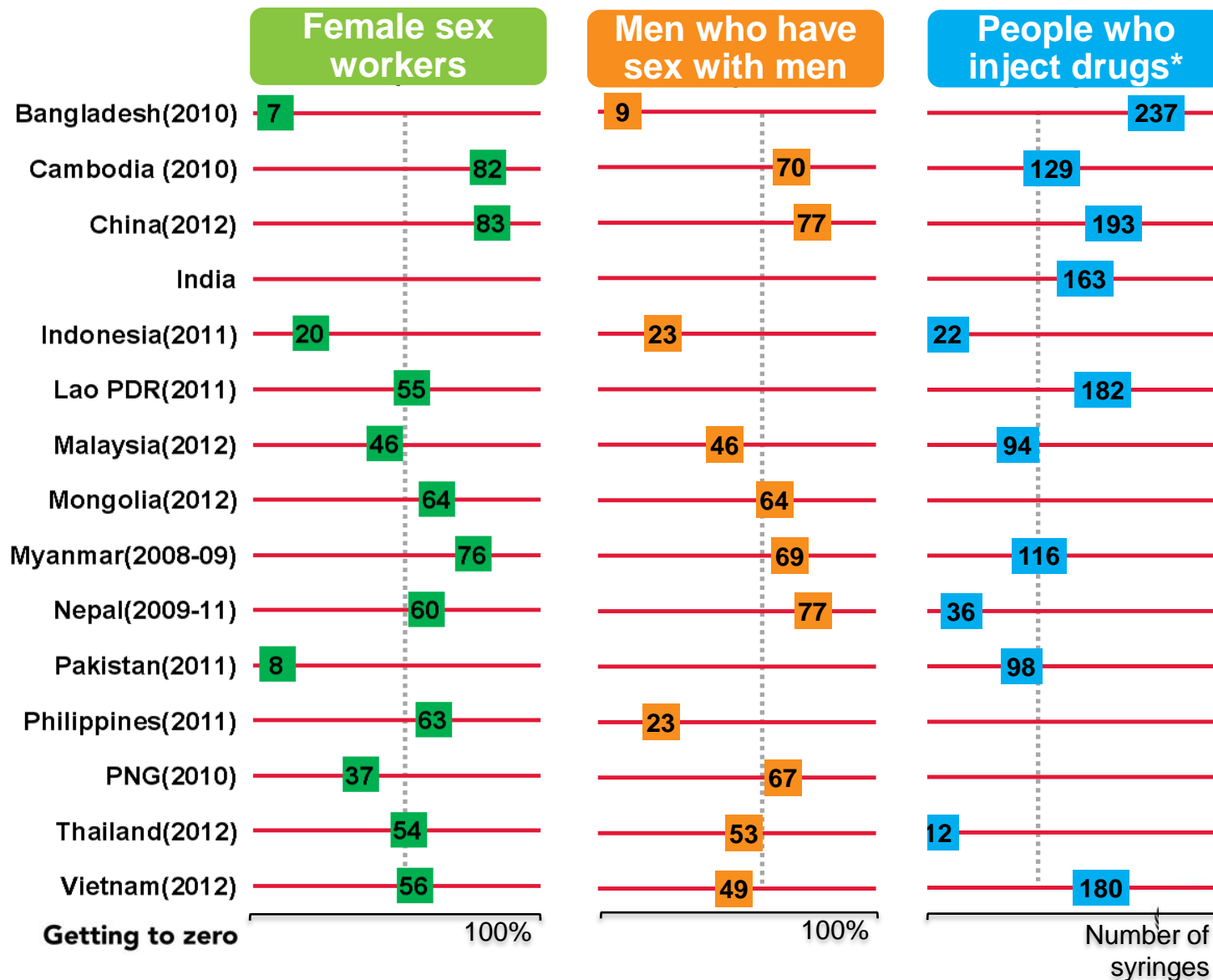


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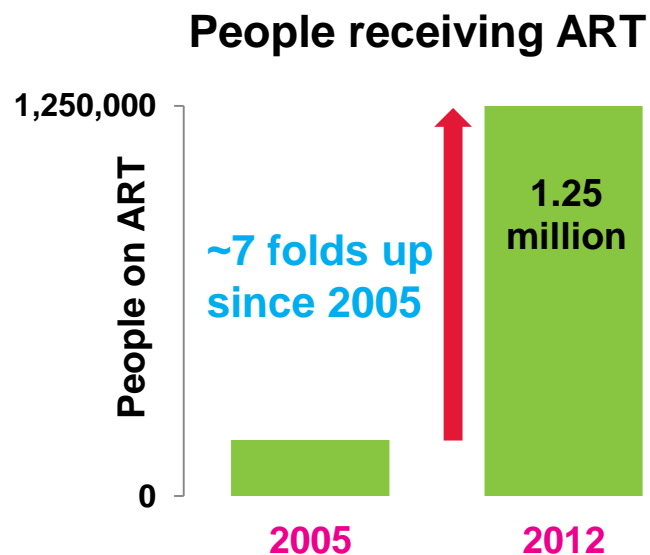
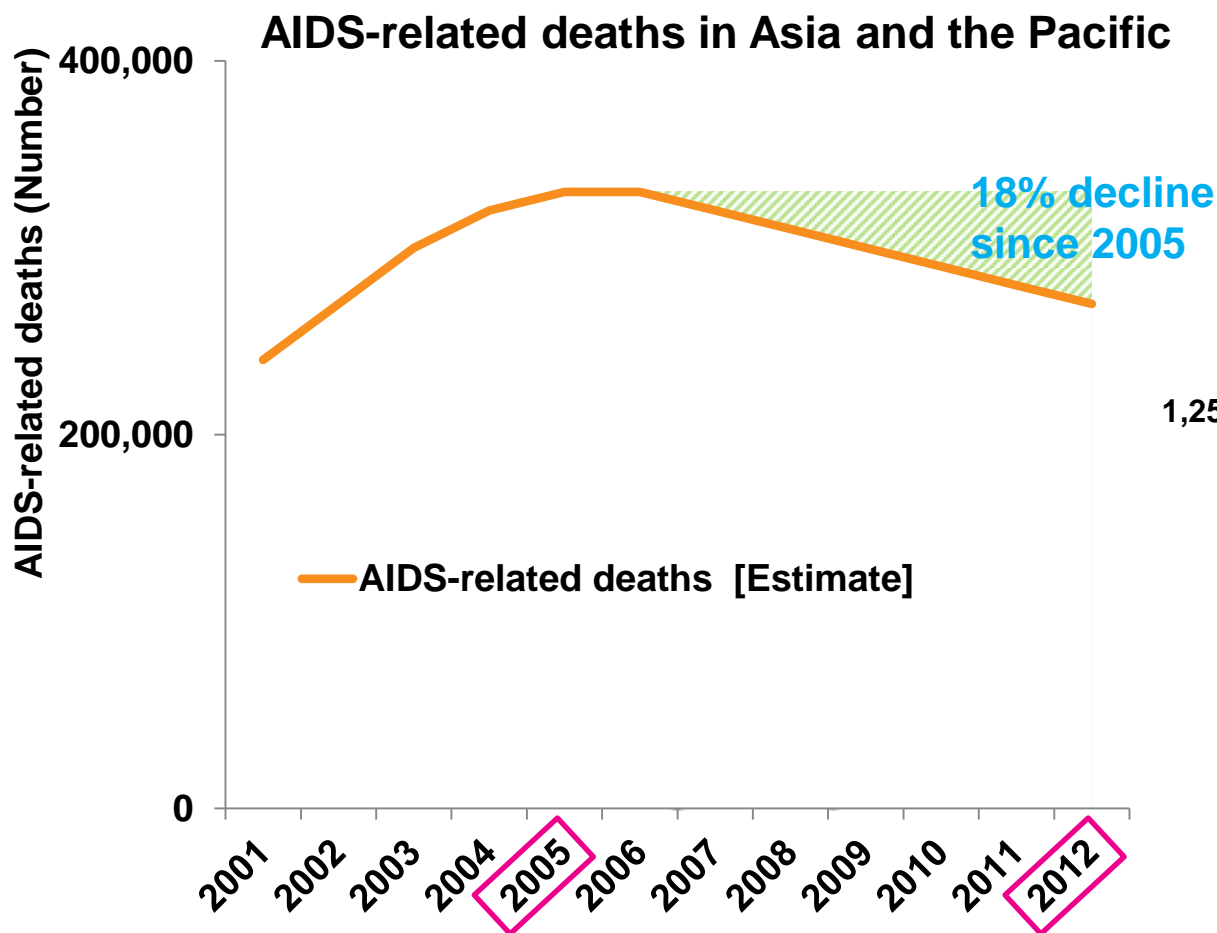
# Coverage information is poor - in order to scale up, we need stronger programme monitoring and evaluation of responses

Do you know where to get HIV testing and did you receive a condom in the last 12 months?



\*Number of syringes distributed per PWID per year; 2012

# AIDS-related deaths are declining in Asia and the Pacific: Treatment saves lives...

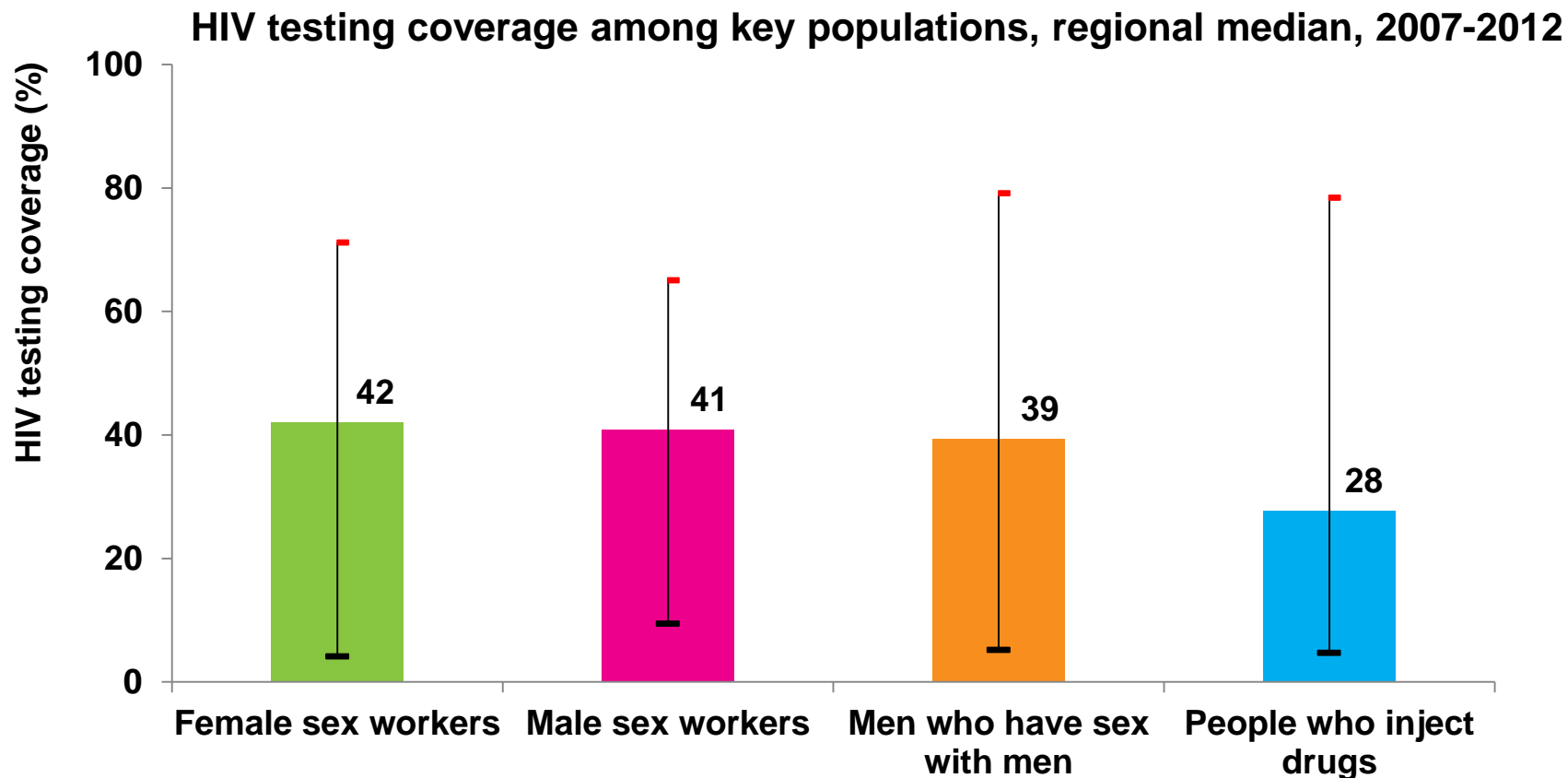


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# Early initiation of treatment is important, but less than half of key populations know their HIV status

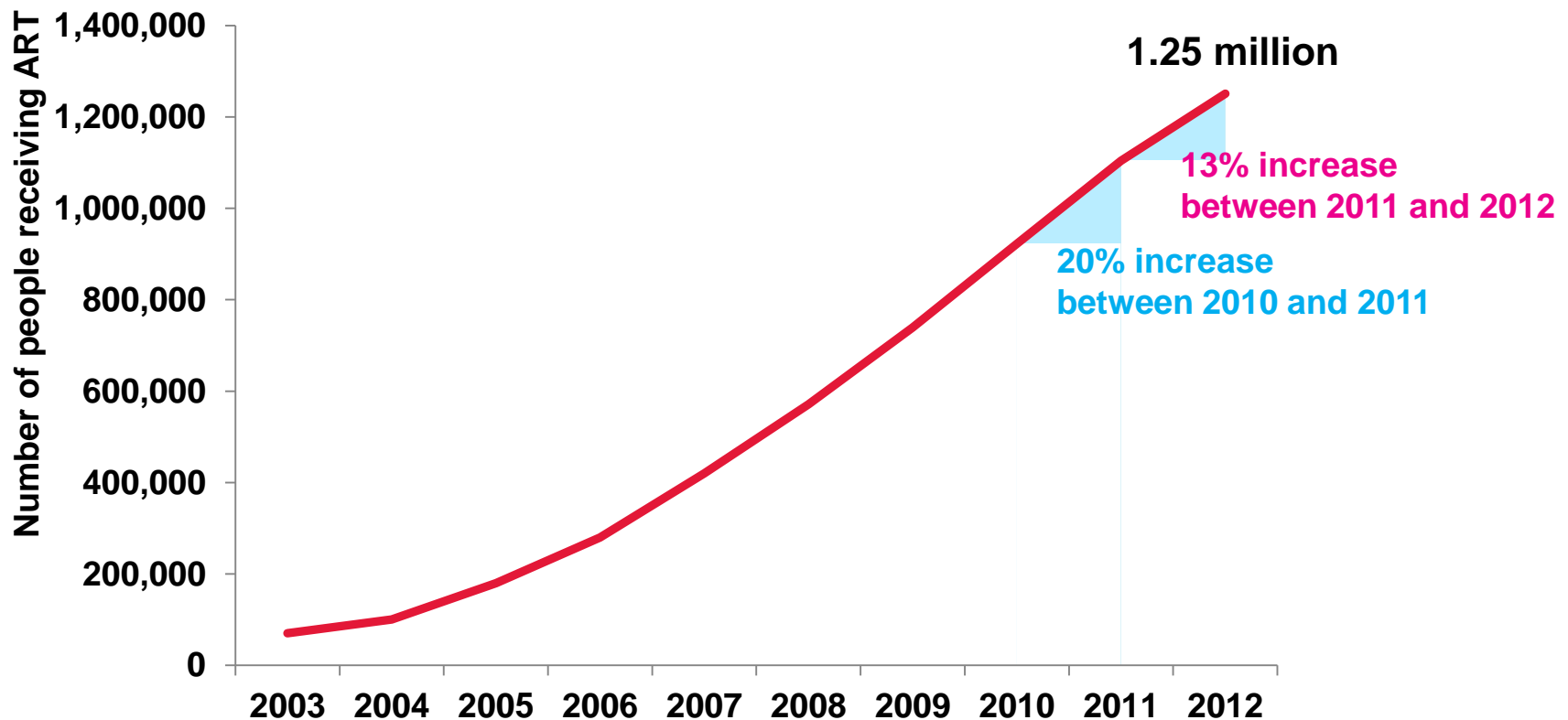


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# Treatment has expanded with 1.25 million people now receiving antiretroviral therapy – but the pace of scale-up is slowing down

Number of people receiving ART in Asia and the Pacific, 2003-2012

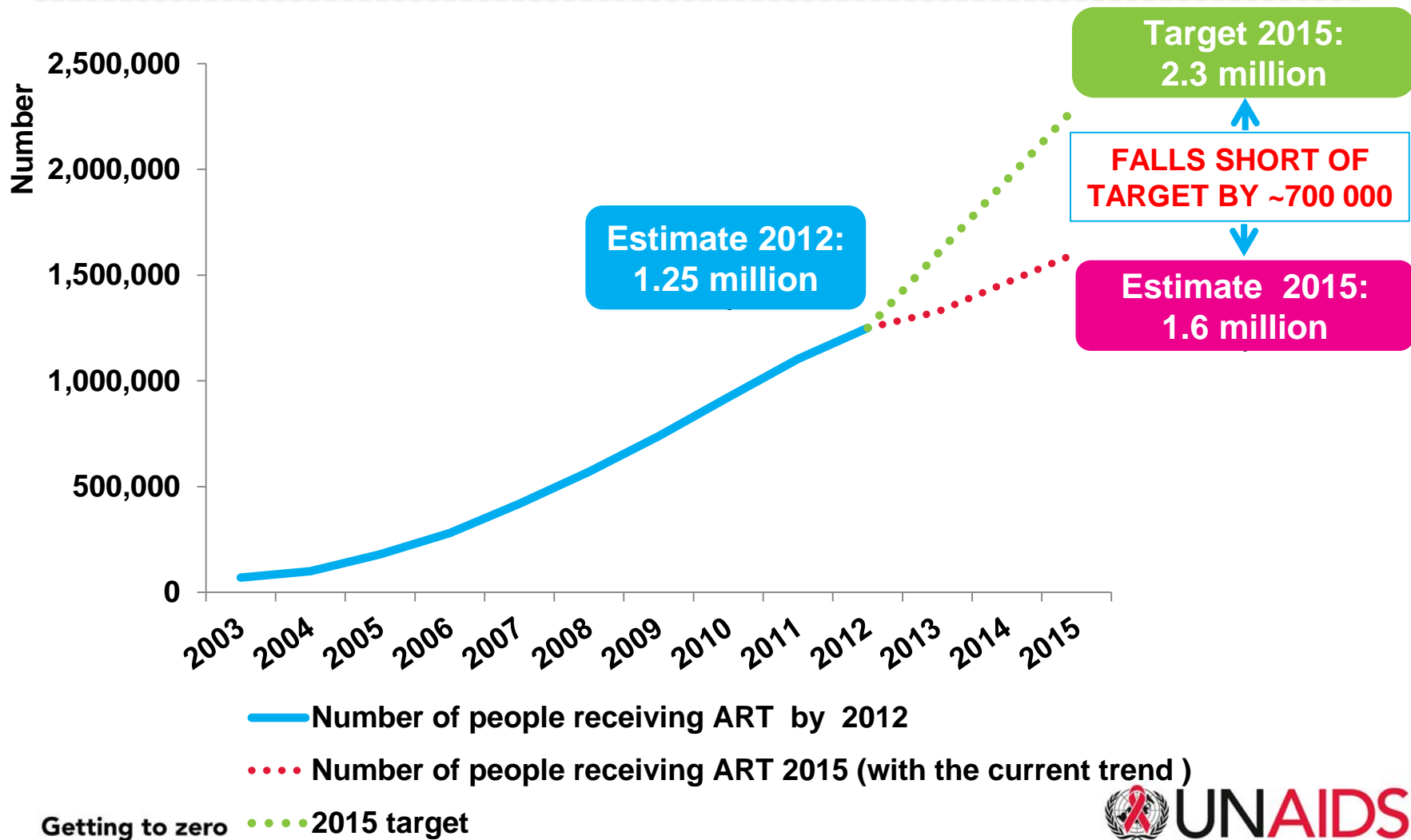


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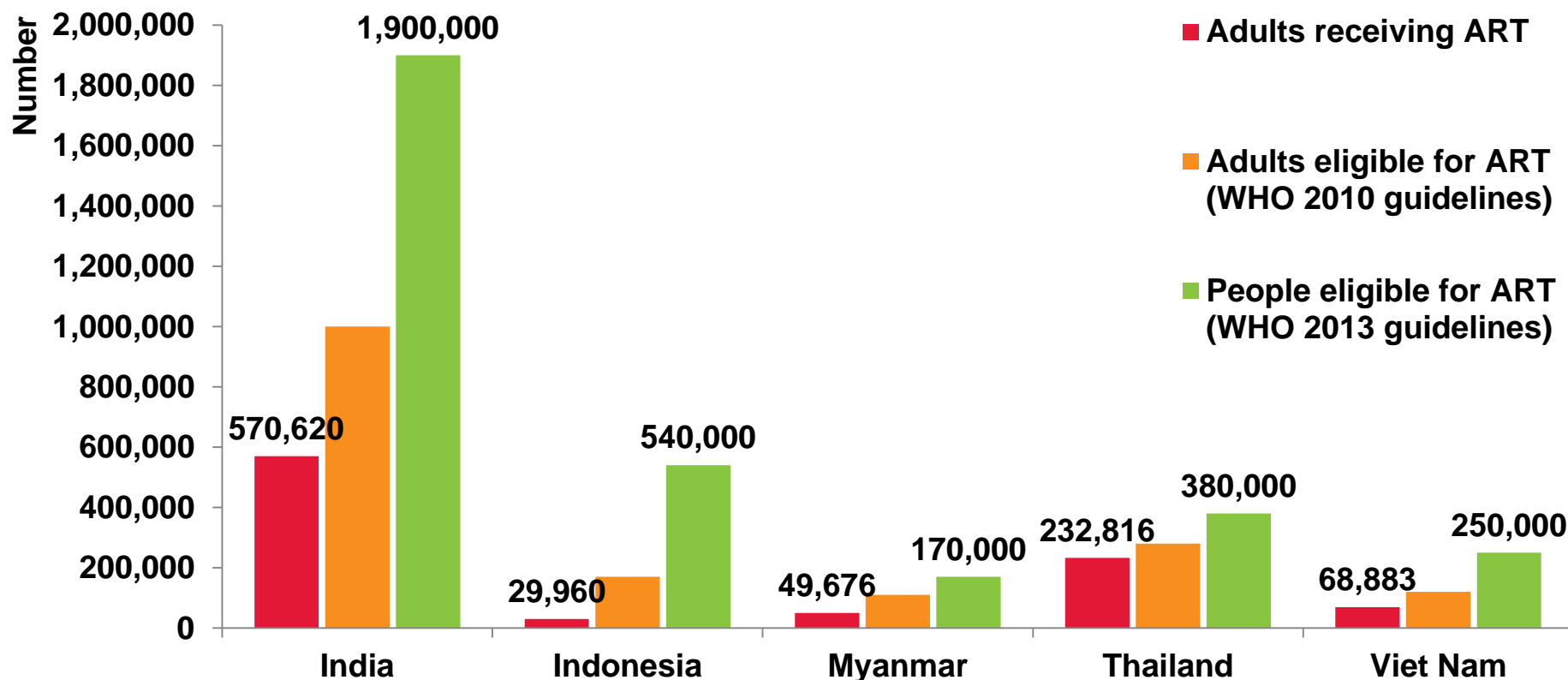


# ZERO AIDS-RELATED DEATHS:

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



# Reported number of people on ART, number eligible for ART according to 2010 and 2013 guidelines



Note: Numbers eligible for ART are only available as total (adults and children) for WHO 2013 guidelines in Global Report 2013. Number eligible for ART based on WHO 2010 and 2013 guidelines are not available for China.

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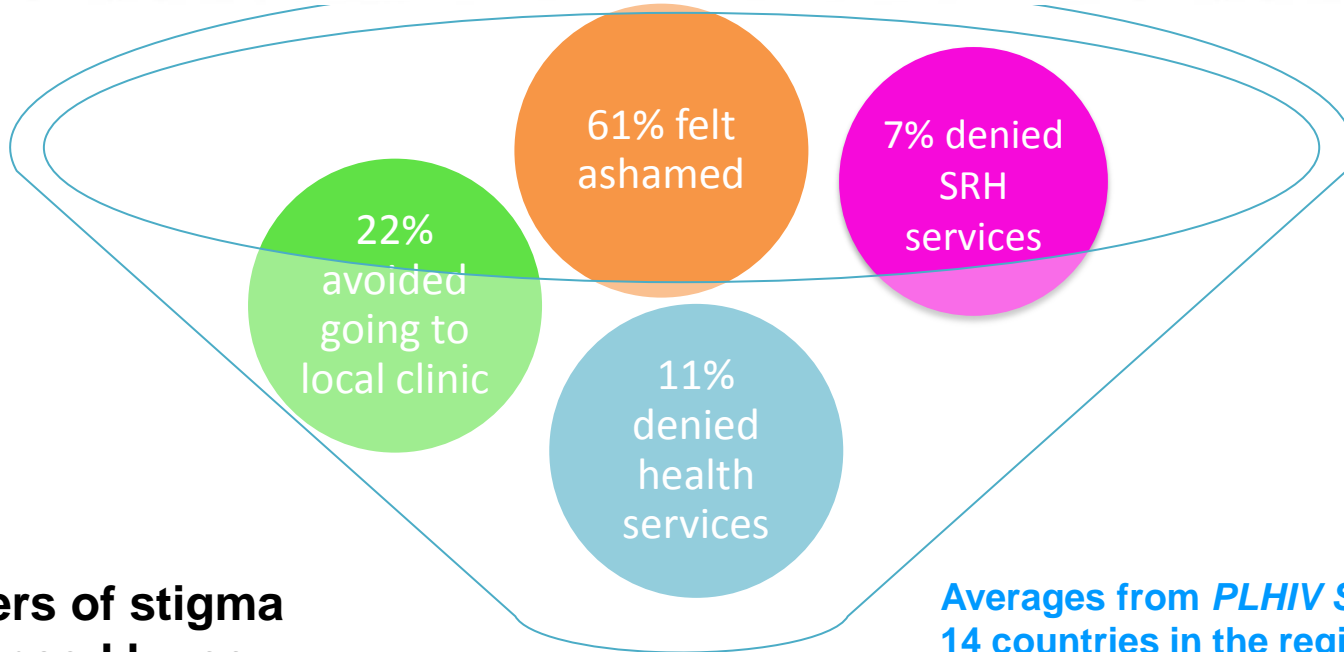
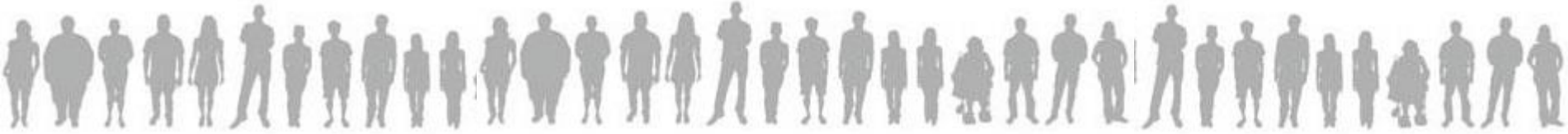


# Legal and political challenges continue to impede the HIV response in the 38 UN Member States in Asia and the Pacific

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- 10** impose some form of restriction on the entry, stay and residence of people living with HIV based on their HIV status
- 37** criminalize some aspect of sex work
- 11** compulsory detention centres for people who use drugs
- 15** provide for the death penalty for drug-related offences
- 19** criminalize same-sex relations

# Stigma: a barrier to HIV services



Averages from *PLHIV Stigma Index* in 14 countries in the region (2008-2012)

Multiple layers of stigma also experienced by sex workers, MSM, TG, people who use drugs, migrants.

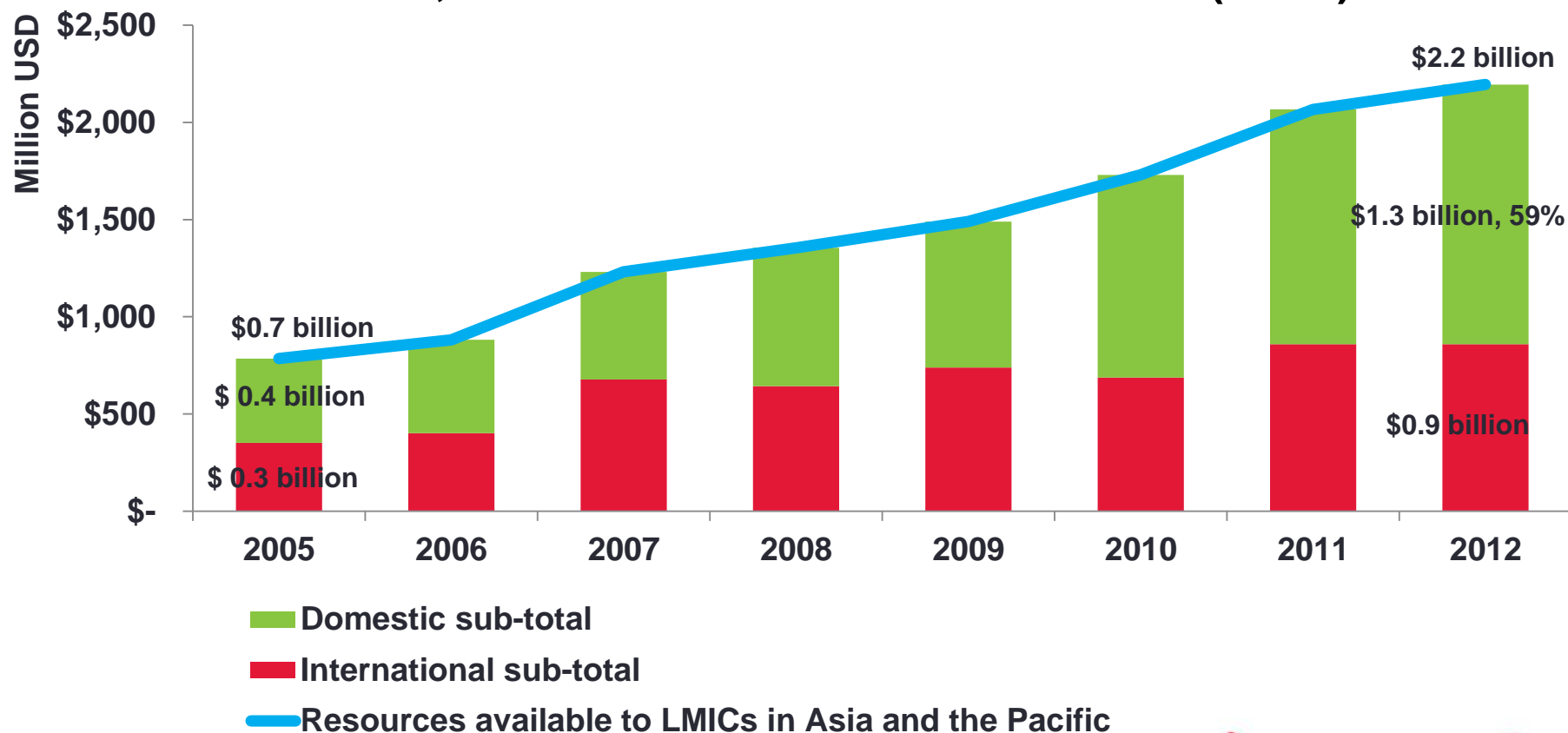


## Access to health services



# Domestic funding has increased to make up for leveling off of international financing

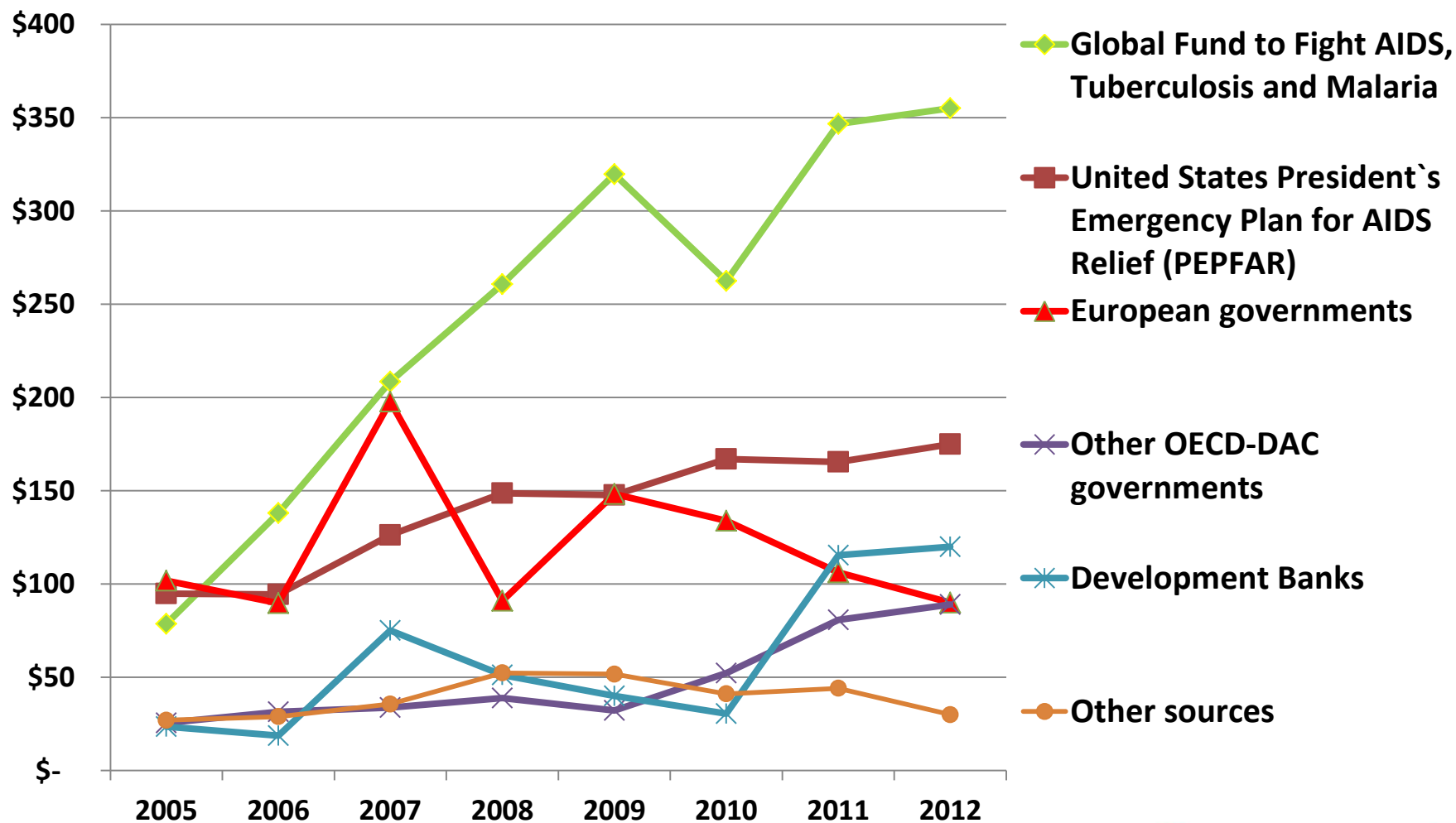
## Resources available for AIDS response in Asia and the Pacific, low-and middle-income countries (LMIC)



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# International financing of the AIDS response is levelling off in recent years in Asia and the Pacific



Source: Countries progress reports; Creditor Reporting System, Organization for Economic Co-operation and Development (OECD CRS); UNAIDS estimates.

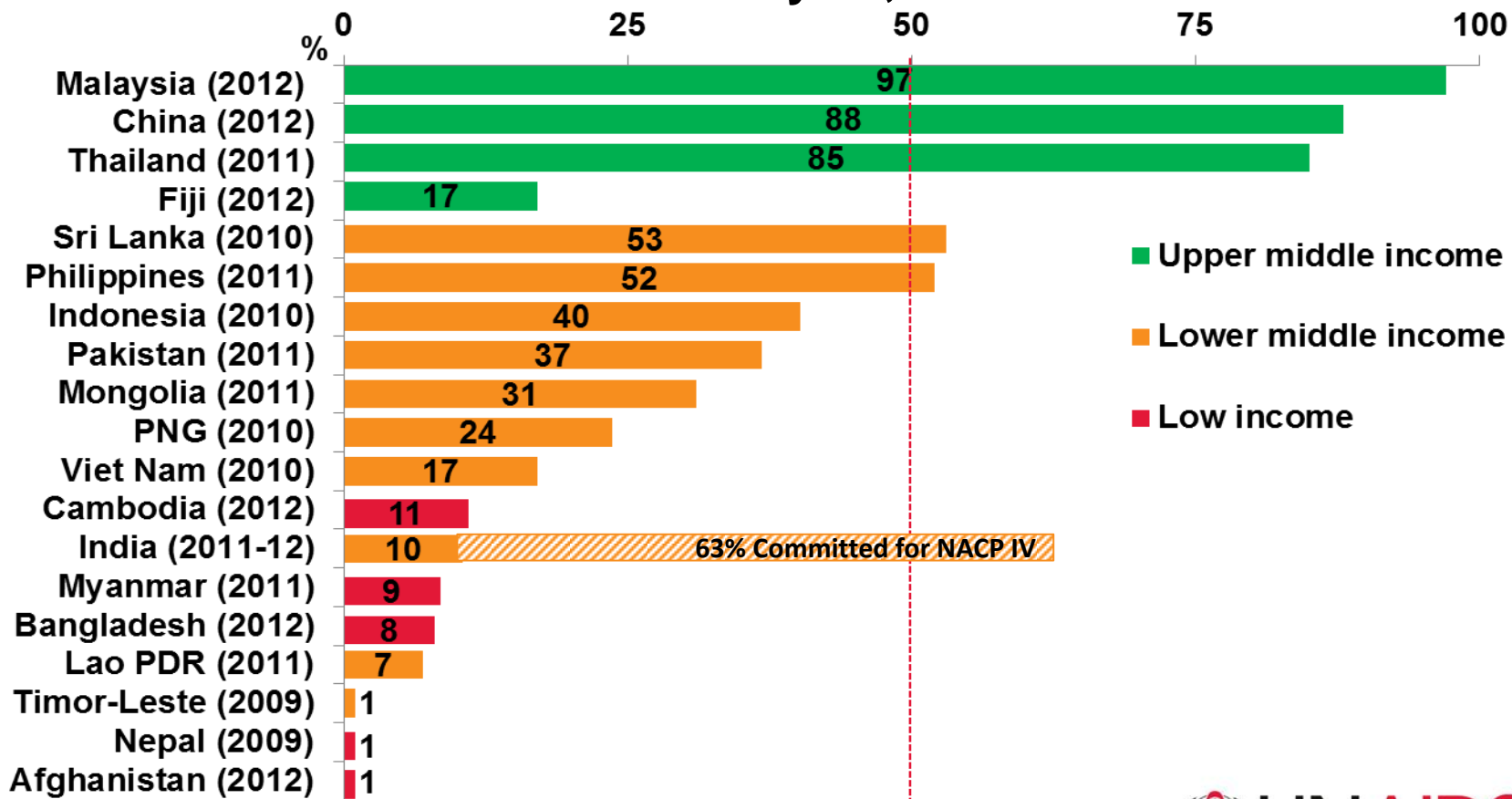
Note: 2012 data are estimated and could be slightly updated by the end of the year 2014.





# Countries in Asia and the Pacific contribute 59% of the funds for the regional response

## HIV expenditure from domestic sources, Asia and the Pacific, latest available year, 2009-2012

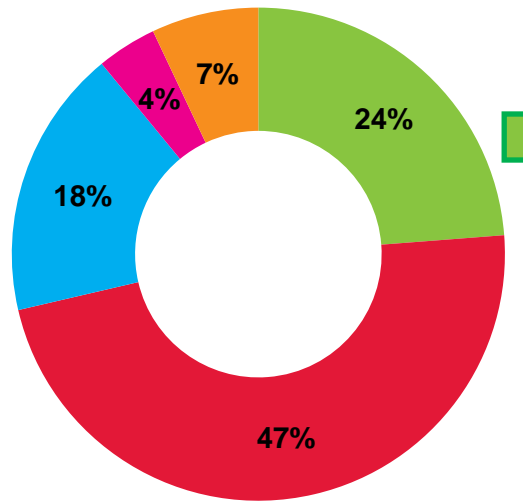


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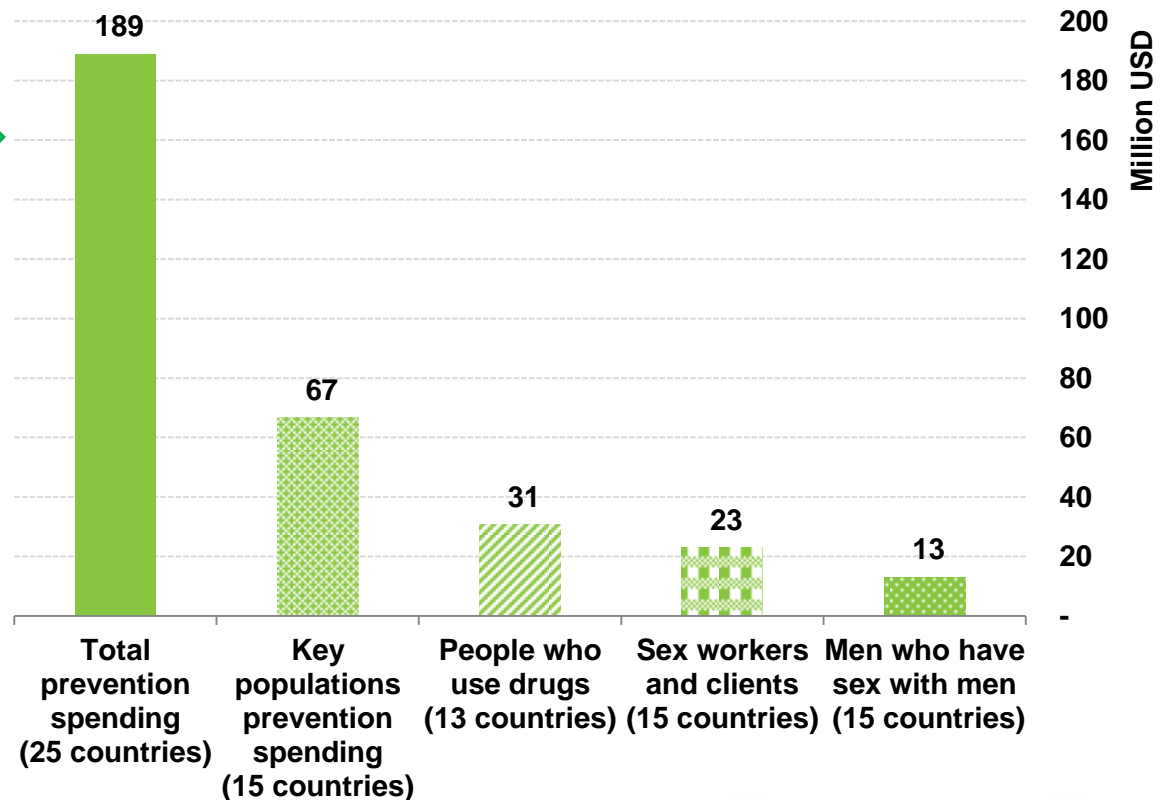


# Not enough is spent on key populations prevention programmes

AIDS spending in the Asia and the Pacific by major spending categories and prevention spending on key populations, latest available year, 2009 - 2012



- Prevention spending
- Care and treatment spending
- Programme management and admin
- Incentives for human resources
- Others

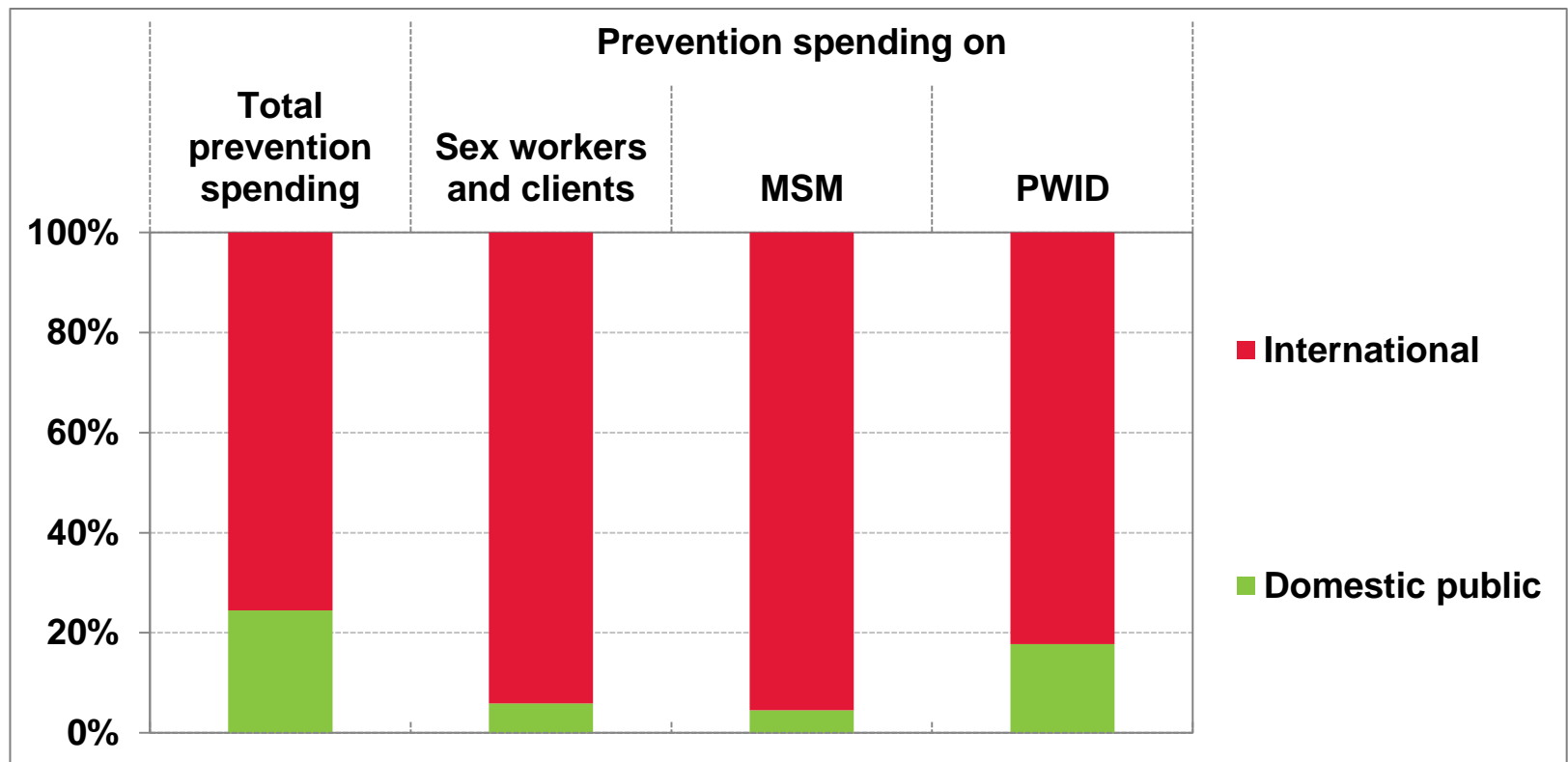


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# Prevention spending on key populations is heavily dependent on international financing sources

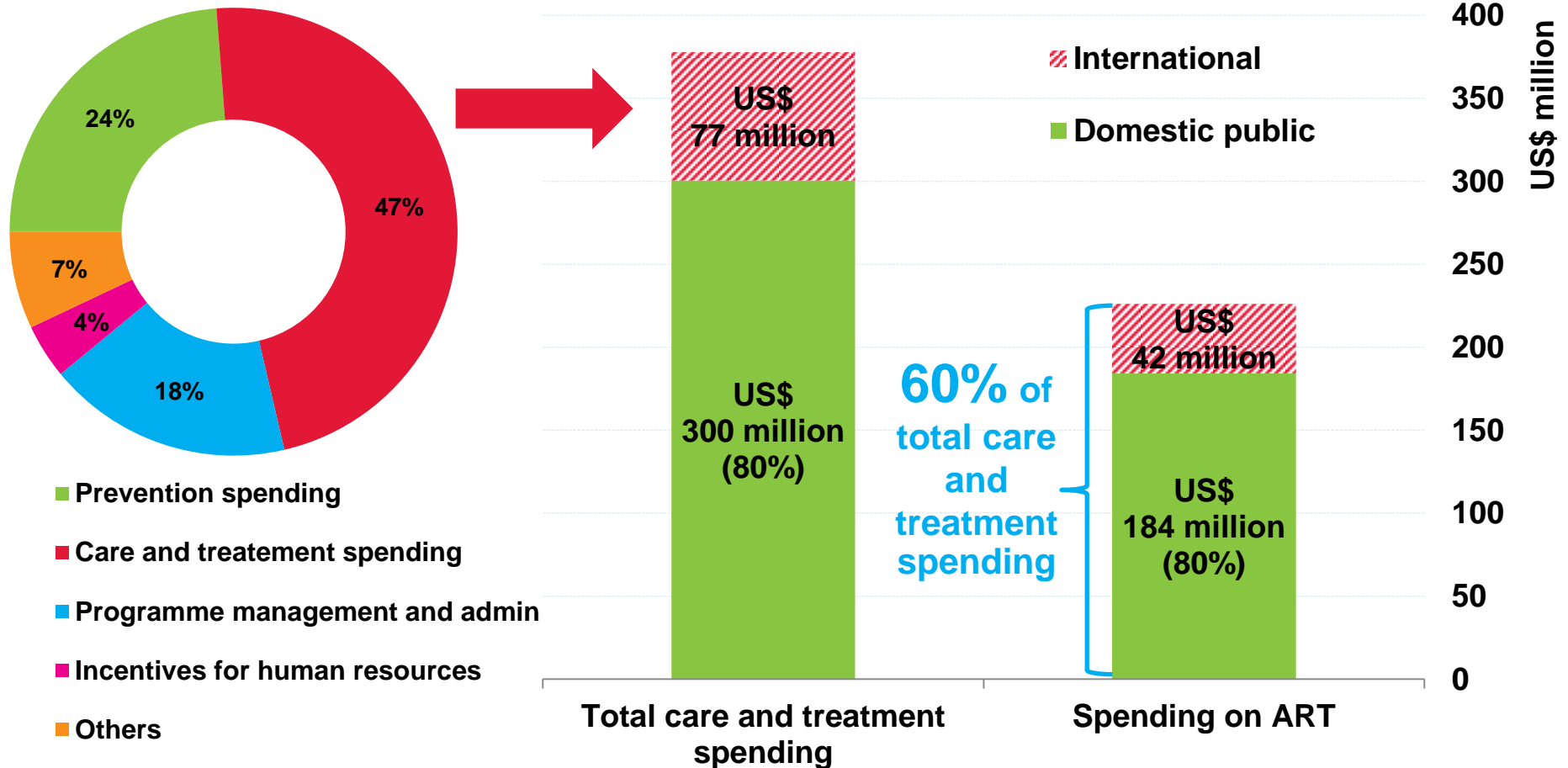
Distribution of prevention spending by financing source in Asia and the Pacific, latest available year, 2009-2012



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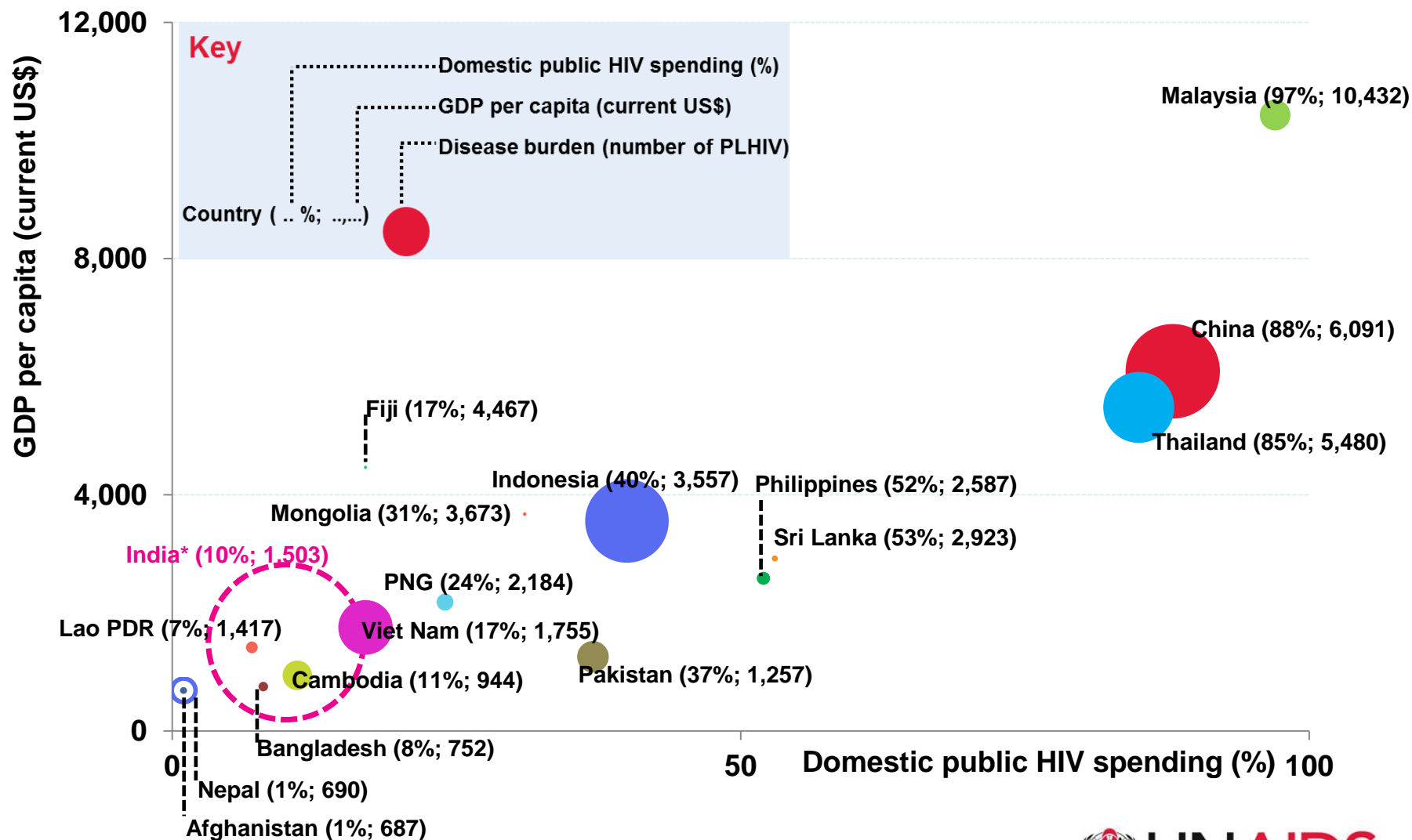
# About half of AIDS spending is on care and treatment – mostly funded from domestic sources



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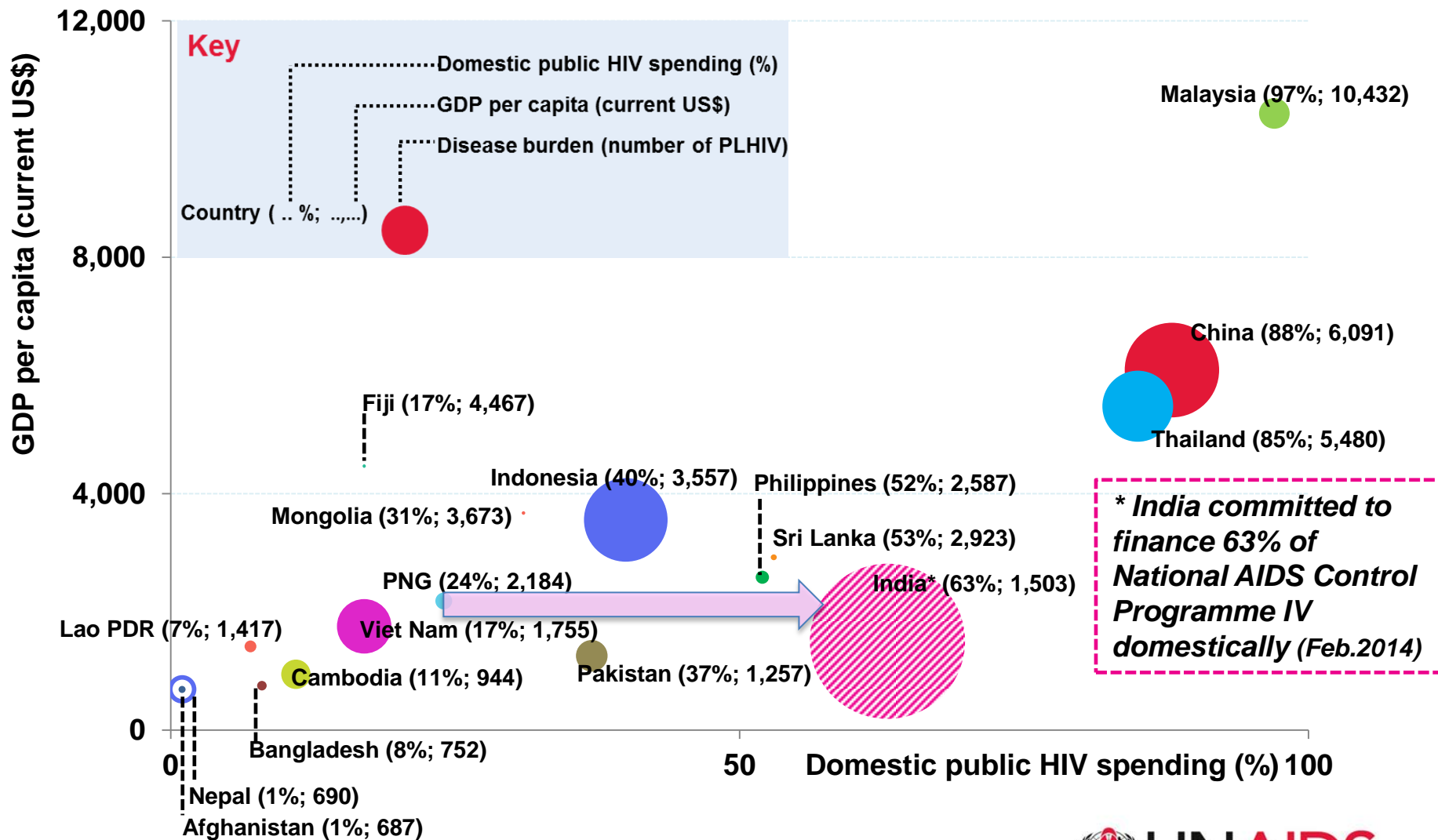
# Countries in Asia and the Pacific are sharing responsibility as GDP per capita rises...



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# ... and sharing responsibility proportional to epidemic burden as well



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# Getting to zero new infections will take:

- Strengthened political leadership and national ownership
- Focus on key populations, key geographical areas, and effective coverage scale-up ([cities focus critical](#))
- Diversify HIV testing service delivery modalities – Community based and peer-led testing
- Maximized treatment benefits
- Community involvement and leadership
- Smarter investments for maximum impact for people

# Looking Forward

- APBCA and its country Business Coalition partners can play a critical convening role in engaging private sector actors with government both innovating domestic financing strategies/approaches and which engages private sector contributions through its commitments to corporate social responsibility



# Looking Forward (Cntd)

- APBCA and its country Business Coalition partners are important advocates for encouraging initiation and or/expansion and scale up public-private partnerships for health and related HIV service delivery with key populations where branded public-private services have greater reach, relevance and affordability

# Looking Forward (Cntd)

- APBCA and its country Business Coalition partners (working with ILO) can be strategic actors in building the engagement of entertainment establishment owners and managers in the expansion of “rights-based health and safety in the workplace” programmes that focus key populations (sex workers/entertainment workers, MSM, MSW, TG)

**THANK YOU**