

UNAIDS 2020

Asia and the Pacific

Regional report 2018-2019

Contents

Progress towards the Fast-Track priorities and targets	2
Joint Programme contributions and results	3
Contribution to the integrated SDG agenda	5
Challenges and bottlenecks	5
Key future actions	5

Progress towards the Fast-Track priorities and targets

Regional priorities/ targets, by end-2019 ¹	Status	Results, end-2019
At least 85% of people with an HIV diagnosis receive ART.	<ul style="list-style-type: none"> • WITHIN REACH 	78% of people living with HIV knew their status were on treatment by end-2018. 5 countries achieved the target (Cambodia, Fiji, Mongolia, Myanmar and China).
70% coverage of PMTCT services.	<ul style="list-style-type: none"> • SLOW PROGRESS 	4 countries received validation of EMTCT, 3 more are in preparation phase. Overall, there was 56% PMTCT coverage in the AP region in 2018 and gaps are mostly in a few countries, including India, Indonesia and Pakistan.
Increased regional median of HIV testing among key populations to 60% among people who inject drugs, 70% among female sex workers and 70% among MSM.	<ul style="list-style-type: none"> • WITHIN REACH 	Median values of HIV testing among key populations in 2018 reached 45% among people who inject drugs, 54% among MSM, and 45% among female sex workers. Innovative approaches for HIV testing, including self-testing are scaled up in countries.
Increased access of young key populations to HIV prevention and testing services.	<ul style="list-style-type: none"> • WITHIN REACH 	Six countries have implemented young key population-specific programmes. Several others are removing barriers to access to services for young populations, including specific provisions in Global Fund grants and national strategic plans.
At least 15 000 MSM on PrEP in 8 countries.	<ul style="list-style-type: none"> ✓ ACHIEVED 	4 countries have national roll out of PrEP and 7 others have PrEP pilots / demonstration projects. Over 33 000 MSM received PrEP in 4 countries (Australia, Cambodia, Thailand and Viet Nam).
70% HIV testing rate among TB patients.	<ul style="list-style-type: none"> • SLOW PROGRESS 	In 2018, 54% of diagnosed TB patients were aware of their HIV status, compared with 49% in 2017

¹ These are derived from the regional priorities/targets set in 2017 when setting plans for 2018–19 and appear in the regional plans

Joint Programme contributions and results

Treatment—*upstream advocacy, technical support, fostering partnerships (WHO, UNAIDS Secretariat)*

All countries in the region have included dolutegravir (DTG) in their national HIV treatment guidelines. DTG was being used in first-line regimens in Cambodia, Lao PDR, Myanmar and Papua New Guinea, in second-line regimens in Malaysia, and in second- and third-line regimens in India. Most countries have initiated procurement efforts for DTG in first-line regimens.

Testing rates of tuberculosis (TB) patients for HIV are generally high (over 80%) in countries with low TB burdens, but testing rates are still low in most high-burden countries, with major gaps observed in Bangladesh, Indonesia, Pakistan, Papua New Guinea and the Philippines. Among countries reporting data on antiretroviral therapy (ART) coverage for TB/HIV coinfecting patients, ART treatment rates are generally high (above 80%).

Elimination of mother-to-child transmission (EMTCT)—*policy dialogue, coordination and technical support, partnerships (UNICEF, WHO, UNAIDS Secretariat)*

Treatment coverage among pregnant women living with HIV in Asia and the Pacific increased from 53% in 2016 to 56% in 2018. In October 2018, Malaysia became the second country in the region to receive WHO validation of EMTCT of HIV and syphilis (after Thailand). The Maldives and Sri Lanka received validation in 2019.

The Regional Framework for Triple Elimination of Mother-To-Child Transmission of HIV, Hepatitis B and Syphilis 2018–2030 was rolled out in countries, and national strategic plans, roadmaps and guidelines for triple elimination have been developed in Cambodia, Mongolia, the Philippines and Viet Nam.

Combination prevention, scale-up of pre-exposure prophylaxis—*policy advice, technical support (UNFPA, UNODC, WHO, UNAIDS Secretariat)*

Access to pre-exposure prophylaxis (PrEP) has increased, condom promotion revitalized, and access to differentiated HIV testing, including community-based testing, self-testing and assisted partner notification, has been expanded in the region.

- Thailand approved the inclusion of PrEP under universal health coverage in a phased approach, and the Philippines updated its clinical guidance and expanded private and community sector access to PrEP, particularly for key populations.

- In 2018, HIV self-testing was made available in 4 countries, and community-based testing has been scaled up in 20 countries. More countries have included provisions for self-testing in their national plans or testing strategies.
- The National HIV Programme Managers Meetings organized in March and November 2019 resulted in a renewed commitment to strengthen HIV responses with particular focus on prevention, HIV/TB integration, and the use of innovative strategies for effectiveness and sustainability; and to mobilize political leadership to renew the political commitment to reach the Ending AIDS goal.

Service access for adolescents and young key populations—*Advocacy, policy advice, technical support (UNICEF, UNDP, UNFPA, UNODC, UN Women, UNESCO, UNAIDS Secretariat)*

Six countries have dedicated services for adolescents and young key populations with specific provisions and models of service delivery, and more countries are formally including provisions for young key population specific services in national HIV policies, strategic plans and Global Fund funding requests.

Gender inequality and gender-based violence—*policy advice, technical support, community engagement (UNFPA, UN Women, WHO)*

In partnership with the Regional Network of Women Living with HIV (International Community of Women Living with HIV in Asia and the Pacific), 26 women living with HIV from 8 countries (China, India, Indonesia, Malaysia, Nepal, Pakistan, Thailand and Viet Nam) were trained in advocacy to promote women's leadership.

Building awareness on HIV and the rights of women living with HIV and LGBT people in humanitarian settings has been a key part of work in the region. In 2018, information on reproductive health and HIV was provided to over 34 000 Rohingya refugee women and girls in the biennium.

Stigma, discrimination, and human rights—*policy advice, technical support (UNDP, UNODC, UNAIDS Secretariat)*

Progress included the adoption of comprehensive HIV legislation in India and the Philippines, decriminalization of same-sex relations by the Supreme Court of India, enactment of the Transgender Persons Act in Pakistan, and initiation of a parliamentary review processes for HIV legislation in the Cook Islands.

The issue of compulsory centres for drug users was put back on the agenda through an analysis of data regarding these centres. This followed a report on the status of compulsory

facilities for people who use drugs and the progress made in the transition to voluntary community-based treatment and care for drug use and dependence.

Contribution to the integrated SDG agenda *(UNDP, UNFPA, UN Women, UNAIDS Secretariat)*

Nine countries in the region implemented the Gender Scorecard exercise in 2019, including United Nations Sustainable Development Cooperation Framework (UNSDCF) rollout countries, which led to stronger consideration of gender-related issues in development frameworks.

Challenges and bottlenecks

Punitive approaches by some governments and shrinking civil society space are hindering progress on the rights of key populations. This is limiting the capacity of key populations and community organizations to mobilize funding for rights and evidence-based responses to HIV, as well as hampering their meaningful engagement in policy and programme processes.

Resurgence of harsh laws and policies for drug control is observed in some Asian countries, including Bangladesh, Indonesia and the Philippines. In many cases, corporal punishment is used as a penalty for drug use, and the death penalty is in place for drug offences in at least 14 countries in Asia.

The transition from external funding to domestic investment in HIV responses remains slow and continues to threaten the sustainability of responses following the exit of international donors from countries. Other emerging challenges include out-of-pocket payments and shortages of key health commodities.

Continued use of traditional venue-based models for outreach and service delivery, in light of the emergence of virtual modes of networking by key populations, particularly gay men and other men who have sex with men (MSM), is creating an increasing challenge to reach key populations with HIV prevention and testing services, and for surveillance and data collection.

Key future actions

Working with regional stakeholders and intergovernmental regional and subregional platforms such as the Economic and Social Commission for Asia and the Pacific, and the Association of Southeast Asian Nations, and the South Asian Association of Regional Cooperation, the

focus will be on mobilizing renewed political commitment for achieving the 2025 and 2030 targets.

Enhanced support will be provided to ensure a smooth transition from external to domestic funding mechanisms and to secure key essential HIV, STI and hepatitis services within wider health systems.

Accelerated scale-up of effective interventions will be facilitated to address the remaining gaps in the HIV care cascade to achieve the Fast-Track targets. Key activities for continued support include roll-out of PrEP for HIV as part of comprehensive prevention packages and efficient models of service delivery that meet the specificities and needs of the population.

Improvements will be supported in linkage to care and retention on treatment for people living with HIV, for example through decentralization of services and scale-up of differentiated care models for stable patients.

Support will be provided to countries to harmonize and strengthen surveillance and data systems to enable case-based reporting of people living with HIV across the continuum of care and to maximize use of data for action at subnational and facility levels.

UNAIDS

20 Avenue Appia
CH-1211 Geneva 27
Switzerland

+41 22 791 3666

unaids.org