



Can We End AIDS in Asia Pacific by 2030?

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Overview of the HIV epidemic in Asia-Pacific 2019





250 203 200 150 Per cent 00 56 57 49 50 26 0 -12 -8 -28 -28 -27 -31 -50 -43 -66 -64 -62 -59 -57 -52 -100 Cambodia Inailand Negal Lanka epublic Republic Androad Japan Bhutan Indonesia Nongolia Lealand Nalaysia Australia Cuinea Androadesh Pakistan Indonesia Nongolia Nalaysia Australia Cuinea Androadesh Pakistan Philippinea singapore Viet Nam ople's Demot Global AIDS Update 2019



The Future of the HIV Response 2019

FIGURE 12.6 Percentage change in new HIV infections, by country, Asia and the Pacific, 2010–2018

During the past 8 years the decline in new HIV infections in AP has stalled





*The 2020 target is equivalent to a 75% reduction since 2010.

Source: Prepared by www.aidsdatahub.org based on UNAIDS 2019 HIV Estimates

Prevention of mother-to-child transmission



• At 56% [47-71%]

• Coverage is well below the global average of 82% [62->95%]

COMMUNITIES AT THE CENTRE

DEFENDING RIGHTS BREAKING BARRIERS REACHING PEOPLE WITH HIV SERVICES the closure of harm reduction programmes prevent people from accessing essential health services and impede progress toward reducing new HIV infections. In contrast, Cambodia and India have achieved high coverage of needle–syringe services (>200 needles and syringes per person who injects drugs per year) and moderate coverage of opioid substitution therapy services (coverage of 20, 40%) (Figure 12.15). Depite this, needle–syringe programme coverage is extremely limited in Indonesia and Thailand, and opidid substitution therapy was either unavailable or rare in a number of countries, including Bangladesh, Pakistar,

Philippines and Thailand.

ACCESS TO HARM REDUCTION SERVICES REMAINS VERY UNEVEN IN A REGION MARKED BY HOSTILE AND HIGHLY PUNITIVE APPROACHES TO DRUG USE.

GLOBAL AIDS UPDATE 2019

Commentary

PrEP implementation in the Asia-Pacific region: opportunities, implementation and barriers

Iryna Zablotska^{§,1}, Andrew E Grulich¹, Nittaya Phanuphak², Tarandeep Anand², Surang Janyam³, Midnight Poonkasetwattana⁴, Rachel Baggaley⁵, Frits van Griensven⁶ and Ying-Ru Lo⁷

- Only several clinical trials and demonstration projects
- Awareness about PrEP in the Asia-Pacific is still low
- Weak HIV prevention programmes for MSM & other key populations
- Limited access, high cost
- Stigma and discrimination
- Restrictive laws in some countries





HIV testing and treatment cascade, Asia and the Pacific, 2018





Getting to zero

78% of new HIV infections are among key populations and their partners







About half of people who inject drugs, sex workers, gay men and other MSM and transgender people are unaware of their HIV status

Global estimates of HIV incidence in men who have sex with men by country 1995–2015

The next decade of AIDS in SE Asia looks like the first with MSM most at risk



Beyrer C, et al. Lancet 2016; 388: 198- 206

HIV Incidence in re-testers

CHCC Clinic, PT Foundation

	Newly tested	HIV infected	HIV prevalence	PY of follow- up re-testers	Newly HIV- infected	HIV incidence density
Year	N	n	% (95% CI)	N	n	(n/N) (95% CI)
2014	1126	107	9.5 (7.9-11.4)	37.18	4	10.1 (4.0-28.7)
2015	1253	124	9.9 (8.4-11.7)	136.77	8	5.8 (2.9-11.7)
2016	824	84	10.2 (8.3-12.5)	202.98	9	4.4 (2.3-8.5)
2017	776	102	13.1 (10.9-15.7)	277.57	12	4.3 (2.5-7.6)
Total	3979	417	10.5 (9.6-11.5)	654.49	33	5.0 (3.6-7.1)
PY, person years; CI, confidence interval						

[HIV prevalence and incidence among men who have sex with men attending a community health center, Kuala Lumpur 2014-2017] RESEARCH ARTICLE

Young, Online and in the Dark: Scaling Up HIV Testing among MSM in ASEAN

Thomas E. Guadamuz^{1,2}*, Doug H. Cheung^{2,3}, Chongyi Wei⁴, Stuart Koe⁵, Sin How Lim⁶

Methods

- Asian Internet MSM Sex Survey (AIMSS)
- 4,310 MSM from the ten member countries (ASEAN).
- 29.9% never been tested, 50.7% last test 6 months 2 years,
- 8.4% tested in the past 6 months
- Multivariable logistic regression,
 - Younger MSM 15–22 years old, lower education, identify as bisexual or heterosexual, had never used a condom with male partners –
 - Higher odds of never been HIV tested
- Main reason for not being tested low risk perception of HIV exposure

The finding of casual sex partners on the internet, methamphetamine use for sexual pleasure, and incidence of HIV infection among men who have sex with men in Bangkok, Thailand: an observational cohort study

Phunlerd Piyaraj, Frits van Griensven, Timothy H Holtz, Philip A Mock, Anchalee Varangrat, Wipas Wimonsate, Warunee Thienkrua, Jaray Tongtoyai, Atitaya McNamara, Wannee Chonwattana, Kenrad E Nelson

Lancet HIV 2018; 5: e379–89

- N= 1744
- Per 100 person-years of follow-up
- Incidence of methamphetamine use
 - -3.8 (128 events in 3371 person-years)
- Incidence of HIV infection
 - -6.0 (212 events in 3554 person-years).
 - Dual risk factors for incident methamphetamine use and HIV infection
 - younger age , finding casual sex partners on the internet

Substance use among men who have sex with men in Malaysia: Findings from the Asian Internet MSM Sex Survey.

Lim SH, Cheung DH, Guadamuz TE, Wei C, Koe S, Altice FL.

• N=1235

RESULTS:

84% - negligible or non-drug users, 9% - amyl nitrates & ecstasy,
7% - stimulant users, mostly ATS
Men in the 'ATS use' category were:

- Significantly less likely to not know their HIV status,
- More likely to have

– > 6 male sex partners, group sex, inconsistent condom use, HIV, any STI

Compared to men in the 'negligible substance use' category.

Drug Alcohol Depend. 2015 Jun

The Cascade of HIV Care - Indonesia



P Januraga et al. Lancet HIV 2018

Challenges on Treatment & Care in PNG

- Inconsistent supply & stock outs of ART
- Very high lost to follow up (LTFU) = lower retentions on ART
- Verified high rates of HIV Drug Résistance in PNG
- Impact of deaths on other PLHIV while on ART
- Need for quality counselling and linkage to care and treatment
- Disclosure strategies for adolescents & parents
- "Softly isolated and silently killed" too much "tok baksait'
- Co ordination and support of the many PLHIV networks
- Peer counsellors and peer educators in clinical settings is a major achievement and response to these challenges.



The Future HIV Healthcare Providers: Stigma & Healthcare Students in Malaysia



Jin et al, AIDS Care 2014

Doctors' intention to discriminate against trans people

- Online survey of <u>436</u> physicians at UMMC and UiTM
- Measures included
 - Socio-demographic characteristics (age, race, medical training)
 - Stigma-related constructs measured:
 - **Prejudice** toward trans people
 - Internalized shame trans people
 - Fear of trans people
 - Belief that trans people **deserve good quality medical care** ٠
 - Belief / endorsement of **stereotypes** of trans people
 - Dependent variable: intention to discriminate against transgender patients
- Analytic strategy:
 - Identify factors associated with intention to discriminate against trans people
- Results showed **stigma-related constructs** were the main drivers of discrimination intent.

LGBT Health Volume 5, Number 1, 2018 C Mary Ann Liebert, Inc. DOI: 10.1089/lgbt.2017.0092

Factors Associated with Medical Doctors' Intentions to Discriminate Against Transgender Patients in Kuala Lumpur, Malaysia

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Abstract

Purpose: Transgender people are frequent targets of discrimination. Discrimination against transgender people in the context of healthcare can lead to poor health outcomes and facilitate the growth of health disparities. This study explores factors associated with medical doctors' intentions to discriminate against transgender people in Malaysia. Methods: A total of 436 physicians at two major university medical centers in Kuala Lumpur, Malaysia, completed an online survey. Sociodemographic characteristics, stigma-related constructs, and intentions to discriminate against transgender people were measured. Bivariate and multivariate linear regression were used to evaluate independent covariates of discrimination intent.

Results: Medical doctors who felt more fearful of transgender people and more personal shame associated with transgender people expressed greater intention to discriminate against transgender people, whereas doctors who endorsed the belief that transgender people deserve good care reported lower discrimination intent. Stigma-related constructs accounted for 42% of the variance and 8% was accounted for by sociodemographic characteristics. Conclusions: Constructs associated with transgender stigma play an important role in medical doctors' intentions to discriminate against transgender patients. Development of interventions to improve medical doctors' knowledge about and attitudes toward transgender people are necessary to reduce discriminatory intent in healthcare settings.

Keywords: delivery of healthcare, discrimination, Malaysia, stigma, transgender persons

Introduction

WORLDWIDE, TRANSGENDER PEOPLE face systematic op-pression and devaluation as a result of stigma, ^{1,2} which is a social process involving social devaluation and discrediting of individuals whose assigned sex at birth (i.e., male or female) differs from their current gender identity or expression.3 The total worldwide population of transgender people is unclear; however, estimates suggest that worldwide 0.5%-1.3% of birth-assigned males and 0.4%-1.2% of birth-assigned females identify as transgender.4 The World a public restroom labeled differently compared with sex

Health Organization has identified transgender people as a key population with high vulnerability and specific health needs that should be addressed.5 Ensuring that transgender people receive equal access to high-quality healthcare is critical to improving health outcomes for this community. Yet, stigma represents a significant barrier to this goal.

Stigma manifested at the structural level includes laws, policies, and cultural standards that criminalize aspects of transgender experience. Laws that criminalize or fail to protect certain aspects of being transgender (e.g., cross-dressing and using

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All **38** countries still have laws that impede HIV response **37** criminalize some aspects of sex work **11** have compulsory detention centres for people who use drugs **15** have the death penalty for drugrelated offences **16** criminalize same-sex relations **10** impose some form of restriction on the entry, stay and residence of PLHIV based on their HIV status



• "CAMBODIA IS ON TRACK TO ACHIEVE THE 90-90-90 TARGETS. CAMBODIA'S RESPONSE TO AIDS BEGAN IN THE EARLY 1990S, WHEN THE COUNTRY FACED A GENERALIZED, FAST-GROWING EPIDEMIC. TODAY, WE ARE FOCUSING ON PRIORITY POPULATIONS AND AIM TO ELIMINATE NEW HIV INFECTIONS BY 2025."

• MAM BUN HENG MINISTER OF HEALTH, CAMBODIA



Getting to zero



Thailand KP-led health services to fill service gaps for KPs



ACCESSIBILITY

- Located in hot spots
- Flexible service hours suitable for KP's lifestyle
- One-stop service





AVAILABILITY

 Needs-based and client-centered services, such as hormone monitoring, STI, legal consultation, harm reduction





ACCEPTABILITY

- Staff are members of KP communities who truly understand KP's lifestyle
- Services are genderoriented, and free from stigma and discrimination





QUALITY

- Staff are trained and qualified in accordance with national standards
- Strong linkages with and high acceptance from public health sectors



KP-led health services: contributed to more than half of HIV testing and PrEP services among KPs in Thailand

- Finger-prick / oral fluid HIV testing
- STI sampling and POC testing
- PrEP and PEP



55% of MSM & TGW tested for HIV nationwide in 2018

36%

of newly diagnosed HIV-positive cases among MSM & TGW nationwide in 2018

55%

of Thai PrEP users in 2018

received services at 10 community health centers in 6 provinces

Optimizing index testing with the use of HIV self-testing in Vietnam



Index Clients Reached Index Clients Agreed To Provide Partner List Partners Listed Partners Tested Reactive Positive Enrolled on ART





PEPFAI



Same-Day ART using ART Initiation Hub Model at the TRC Anonymous Clinic



Stand-alone VCT with 200 -250 HIV tests a day, 8% positive





DRIVE (DRug Use and Infections in ViEtnam) Project : Ending the HIV Epidemic Among PWID in Hai Phong, Viet Nam

High coverage implementation of combined prevention and care - NSP, MAT, ART, using an innovative approach will end the HIV epidemic among PWID in Haiphong, Viet Nam.

- Reduce HIV incidence to 0.5/100 person years at risk or less: 0.1/100 personyears
- Reduce percentage of HIV seropositive PWID not at viral suppression to 7.5% or less of PWID in Hai Phong: 90-90-90
- Reduce percentage of HIV seropositive PWID not at viral suppression and engaging in distributive sharing of needles/syringes to 2% or less: < 1%

Des Jarlais et al. for DRIVE team, 2019



Malaysia eliminates motherto-child transmission of HIV and syphilis

MINEWS

WABC



SET LOCATION for local news & weather

Malaysia's Government looks to decriminalise drug use in bid to stem disadvantage

By South-East Asia correspondent David Lipson Updated Sun at 4:12am



PHOTO: Malaysia currently has some of the harshest drug penalties in the world. (ABC News: Phil Hemingway)

Comparison between different resource settings in Asia Pacific region

Australia 22.5 million Total population

> 31,000 HIV+

All HIV+ Treatment eligibility (CD4s)

> 19,000 On antiretrovirals

\$421 million Annual HIV/AIDS spending

27.4% Intercourse before 15 years old

2.5% Buddhist 1.3% Hindu 10.5% Other 22.3% No religion Papua New Guinea 6.5 million Total population

> 31,945 HIV+

350 Treatment eligibility (CD4s)

> 13,905 On antiretrovirals

\$44.8 million Annual HIV/AIDS spending

11.1% Intercourse before 15 years old Indonesia 253 million Total population

> 610,000 HIV+

350 Treatment eligibility (CD4s)

> 39,418 On antiretrovirals

\$87 million Annual HIV/AIDS spending

0.28% Intercourse before 15 years old



Malaysia 30.1 million Total population

86,324

<350 Treatment eligibility (CD4s)

> 17,369 On antiretrovirals

\$56.5 million Annual HIV/AIDS spending

1% Intercourse before 15 years old



Source: UNAIDS, HIV in Asia and the Pacific (2013)/UNAIDS, Global AIDS Response Progress Reporting (2012 and 2014)/Indonesia Ministry of Health, National AIDS Spending Assessment/Papua New Guinea, CIA World Factbook

SCIENCE sciencemag.org

How Australia Could Almost Eradicate H.I.V. Transmissions



- Universal Health Coverage
- Leadership
 - Civil Society
 - Patient Groups
 - Academia, Clinical
 - Political
- Science & Research
- Financial Investment

"Dealing effectively with HIV will require our communities and societies to break down longstanding prejudice, hatred, and ignorance," "Only when scientific advances are matched by social and cultural progress can this epidemic truly be contained."

Justice Edwin Cameron





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