**ASIA AND THE PACIFIC**

**Mixed progress in reducing new HIV infections and AIDS-related deaths**

- Nearly 5 million people were living with HIV in South, South-East and East Asia combined in 2011.
  - In **South and South-East Asia**, an estimated 4 million [3.1 million–4.6 million] people were living with HIV in 2011, compared to 3.7 million [3.2 million–5.1 million] in 2001.
  - In **East Asia**, an estimated 830 000 [590 000–1.2 million] people were living with HIV in 2011, compared to 390 000 [280 000–530 000] in 2001.
- In **Oceania**, an estimated 53 000 [47 000–60 000] people were living with HIV in 2011, compared to 38 000 [32 000–46 000] in 2001.

- Oceania and South and South-East Asia have made progress in reducing new HIV infections and AIDS-related deaths. In East Asia, new HIV infections and AIDS-related deaths are increasing.
  - In **South and South-East Asia**, new HIV infections declined from 370 000 [250 000–450 000] in 2001 to 280 000 [170 000–370 000] in 2011. In 2011, about 250 000 [190 000–330 000] people died of AIDS-related causes in this sub-region compared to 290 000 [270 000–310 000] in 2005.
  - In **East Asia**, an estimated 89 000 [44 000–170 000] people were newly infected with HIV in 2011, compared to 75 000 [55 000–100 000] in 2001. About 59 000 [41 000–82 000] people died of AIDS-related causes in 2011, up from 39 000 [27 000–56 000] in 2005.

- Country-level progress in reducing new HIV infections varies throughout the Asia Pacific region. For example:
  - In Cambodia, India, Malaysia, Myanmar, Nepal, Papua New Guinea and Thailand, the rate of new HIV infections fell by more than 25% between 2001 and 2011.
  - In Bangladesh, Indonesia, the Philippines and Sri Lanka, the rate of new HIV infections increased by more than 25% between 2001 and 2011.

**Progress in reducing new HIV infections among children**

- In 2011, coverage of effective antiretroviral regimens for preventing mother-to-child transmission was 18% [13–23%] in South and South-East Asia and 43% [26–62%] in **East Asia** and **Oceania**. This compares to a global average of 57% [51–64%].
• In Oceania, the number of children newly infected with HIV fell by 36% between 2009 and 2011. In Asia, there was a 12% decline in new HIV infections among children over that same period.

**Mixed progress in access to HIV treatment**

• In Oceania, an estimated 69% [60 – 80%] of people eligible for antiretroviral therapy were accessing it in 2011, compared to a global average of 54% [50 – 56%]. That same year, coverage of antiretroviral therapy was 47% [36 – 49%] in South and South-East Asia and 18% [13 – 24] in East Asia.

• In 2011, only one country in the Asia Pacific region (Cambodia) reached more than 80% coverage of antiretroviral therapy.
  - In Thailand and Papua New Guinea, more than 60% of people eligible for antiretroviral therapy were receiving it. Pakistan reported less than 20% coverage of HIV treatment.

**Key populations are central to the region's HIV epidemics**

• HIV epidemics in Asia and the Pacific remain largely concentrated among injecting drug users, men who have sex with men and sex workers.

• Across the region, wide variations in HIV prevalence among key populations have been documented, as well as significant variations in coverage of HIV prevention services. Some examples:

  **Injecting drug use**

• According to 2012 country progress reports, national HIV prevalence among people who inject drugs in Pakistan and Indonesia is more than 25% and 35%, respectively; the reported HIV prevalence in Bangladesh among people who inject drugs was far lower, at less than 2%.

• Malaysia and Indonesia reported more than 75% coverage of HIV testing among people who inject drugs while Pakistan, Nepal and Bangladesh reported less than 25% coverage.

• Bangladesh reported a high coverage of needle and syringe programmes for people who inject drugs; other countries in the region, such as Thailand and Pakistan, reported low coverage of such programmes.¹

  **Men who have sex with men**

• According to 2012 country progress reports, HIV prevalence among men who have sex with men (MSM) was more than 15% in Viet Nam; 8% in Indonesia; and less than 5% in Bangladesh, Philippines and Malaysia.

• Though MSM play a substantial role in the national HIV epidemics of South and South-East Asia, less than 1 in 3 had been tested for HIV in the past 12 months.

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¹ High coverage defined as the annual provision of more than 200 needles per person who injects drugs. Low coverage defined as the annual provision of less than 100 needles per person who injects drugs. Data source: 2012 country progress reports.
Bangladesh, Indonesia, the Philippines and Viet Nam reported low coverage of HIV prevention programmes for MSM (less than 25%) while China and Nepal reported more than 75% coverage of such programmes.

Several countries in the region—Myanmar, Nepal, Thailand and Viet Nam—reported high coverage of condom use (more than 75%) among their surveyed MSM populations.

**Sex workers**

The reported HIV prevalence in Papua New Guinea among sex workers is nearly 20% compared to a national HIV adult prevalence of about 1%. In Myanmar, nearly 10% of sex workers are living with HIV compared to a national prevalence of approximately 0.5%.

China and Myanmar reported more than 75% coverage of HIV prevention programmes for sex workers while, in Bangladesh, Indonesia and Pakistan, coverage of such programmes is less than 25%.

**In many countries, stigma and discrimination impeded effective HIV responses**

In Myanmar, for example, about 18% of people living with HIV were verbally insulted and 10% were physically assaulted as result of their HIV status, according to surveys collected through the People Living with HIV Stigma Index.

In Nepal, about 12% of people living with HIV reported losing a job or income on the basis of their HIV status.

**Improved laws and policies to protect people living with HIV**

Since 2010, China, Fiji and the Republic of Korea have all repealed travel restrictions for people living with HIV, bringing national laws in line with recommended international norms.

India, Indonesia, Papua New Guinea and Thailand have put in place programmes to ensure that law enforcement does not act as an obstacle to HIV treatment and prevention.

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