

Fact sheet

Source: 2007 AIDS epidemic update—regional summary

Asia

Regional overview

- In 2007, new HIV infections had risen by almost 20% since 2001 in East Asia.
- HIV prevalence is highest in South-East Asia, with wide variation in epidemic trends. **Myanmar, Thailand** and **Cambodia** show declines in prevalence, but the epidemic is growing at a particularly high rate in **Indonesia** and in **Viet Nam**.
- Although the proportion of people living with HIV in **India** is lower than previously estimated, the epidemic continues to affect large numbers of people.

Country data and trends

- In **China**, an estimated 700 000 people were living with HIV in 2006. Less than half are believed to have been infected while injecting drugs, with a similar proportion acquiring the virus during unprotected sex.
- An overlap of injecting drug use and sex work is an important aspect of **China's** HIV epidemic, with an increasing number of women injecting drugs and, in some places, as many as half of those who do also sell sex. Meanwhile, low levels of HIV awareness and education, low condom usage, and the illegal status of sex work compound the relationship further, placing female sex workers at high risk of exposure to HIV.
- The spread of HIV among men who have sex with men has received relatively little attention in **China**. Some estimates indicate as many as 7% of HIV infections could be attributable to unsafe sex between men. Several studies indicate patterns of behaviour that could lead to wider exposure to HIV in and beyond networks of sex between men.
- Harm reduction efforts in **China**, although still partial and scattered, are beginning to show positive changes in risk behaviour. Condom promotion projects for sex workers and their clients are yielding results, with some participating cities reporting major shifts in condom use, e.g. in the city of Liuzhou (Guangxi province) condom use among sex workers rose from 48% to 80% within two years.
- Overall, **China** has stepped up its response to the HIV epidemic in recent years. Free HIV testing is available at more than 3000 sites across all 31 provinces, and an estimated 30 000 patients were receiving antiretroviral treatment at the end of 2006.
- The revised HIV estimates for **India** are the outcome of several key improvements that include expanded and improved HIV surveillance system, and the adaptation of estimation methodology to incorporate the new data. A major improvement has been the national household survey conducted in 2005 and 2006 that sampled some 100 000 households and which, for the first time, included a component on HIV.
- In a few of **India's** states, data show high HIV prevalence among sex workers, and possibly rising HIV prevalence among people who inject drugs and men who have sex

with men. Although HIV has spread into the wider population and, in some states, is affecting increasing numbers of women considered to be at low risk of infection, the country's epidemic is largely a result of HIV transmission within, between and immediately beyond those most-at-risk populations. Furthermore, sex between men is a significant, yet under-researched aspect of India's HIV epidemic.

- In neighbouring **Pakistan**, poor knowledge about HIV and widespread risk behaviours among most-at-risk groups provide the epidemic with potential for further growth. In Karachi, one study found HIV prevalence among people who inject drugs rose from under 1% in early 2004 to 26% in March 2005. There are also concerns about the potential role of migrant labour, stemming mainly from unmarried male migrant workers who engage in unprotected paid sex. If HIV infection levels in sex workers rise, these workers could provide a potential bridge for HIV transmission into the wider population. In 2006, it was estimated that only 5% of female sex workers were being reached by HIV prevention activities.
- While **Nepal** and **Bangladesh** have relatively small HIV epidemics, risk taking behaviour among people who inject drugs and sex workers may contribute to wider transmission of HIV.
- **Viet Nam** is seeing returns on investments in HIV prevention efforts. Condom promotion projects at the community-level in five provinces have resulted in safer behaviour among street-based sex workers and their clients, with condom use tripling from about 20% in 2001 to 60% in 2004, while condom use with husbands and boyfriends more than doubled from 16% to 38% over the same period.
- The HIV epidemic in **Indonesia** is among the fastest-growing in Asia. An HIV epidemic that initially centred largely among people who inject drugs in Bali, Jakarta and West Java now encompasses many of their non-injecting sex partners, as well as prisoners, sex workers and their clients, and has spread to 32 provinces; in 2000, only half as many provinces reported an HIV or AIDS case.
- A 2007 study in **Cambodia** provides evidence that well-focused and sustained prevention efforts can help reverse the spread of HIV. Nationally, HIV prevalence has fallen to an estimated 0.9% among adults in 2006, down from the revised estimates of 1.2% in 2003 and the peak of 2% in 1998. One important factor over the past decade has been the significant increase of condom use during paid sex in brothels—as well as reports of fewer men actually buying sex.
- Although the number of HIV infections in **Thailand** continue to decline, a substantial proportion of new infections are occurring in risk populations: sex workers, people who inject drugs and men who have sex with men. One estimate puts as many as one in five (21%) new HIV infections in 2005 in the latter group.
- **Myanmar's** epidemic is showing signs of a decline, with HIV prevalence among pregnant women at antenatal clinics having dropped from 2.2% in 2000 to 1.5% in 2006. Despite the overall decline in prevalence, the high infection levels found among young people (2.2% in 2005) are a concern, as is the persistently elevated prevalence of HIV among key populations at higher risk.
- The HIV epidemic in **Malaysia** is concentrated mainly around unsafe injecting drug use practices, and it is estimated that more than two thirds of HIV infections to date have been in people who inject drugs.

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