

Asia

Latest epidemiological trends

- In Asia, an estimated 5 million [4.1 million–6.2 million] people were living with HIV in 2007.
- The number of new infections and people who died from AIDS-related illnesses were, comparatively speaking, equal in 2007—380 000 [200 000–650 000] and 380 000 [270 000–490 000], respectively.
- National HIV infection levels are highest in South-East Asia. New HIV infections are also increasing steadily, although at a much slower pace, in populous countries such as **Bangladesh** and **China**.

Main modes of HIV transmission

- The several modes of HIV transmission present in the region make Asia's epidemic one of the most diverse in the world.
- Injecting drug use is a major risk factor in several Asian countries. It is estimated that in **China** in 2006, slightly fewer than half the people living with HIV are believed to have been infected through use of contaminated injecting equipment. Similar scenarios are estimated to be occurring in parts of **India**, **Pakistan** and **Viet Nam**.
- Of a growing concern in the region is the overlapping risk of drug injecting and unprotected sex—which is increasingly present in several epidemics in Asia, in particular **India**, **Indonesia** and **Pakistan**.
- An especially troubling situation has emerged in **Afghanistan**—home to one of Asia's most recent HIV outbreaks. Here, narcotics are now being injected and in Kabul alone, 3% of people who inject drugs recently surveyed were HIV-positive, with many indicating they had shared needles or syringes.
- As in other parts of the world, unprotected sex between men is a potentially significant but under-researched aspect of the HIV epidemics in Asia. Recent study data from several major cities in the region, from Bangkok to Ho Chi Minh City, show increasing HIV prevalence among men who have sex men.

Additional country data¹

- 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

¹ From *Asia: AIDS epidemic update 2007, regional summary*

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; in the city of Liuzhou (Guangxi province) condom use among sex workers rose from 48% to 80% within two years.
- 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.
- **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. 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.
- 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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