



## Key messages from IAS 2023

translating science into implementation in the Asia-Pacific

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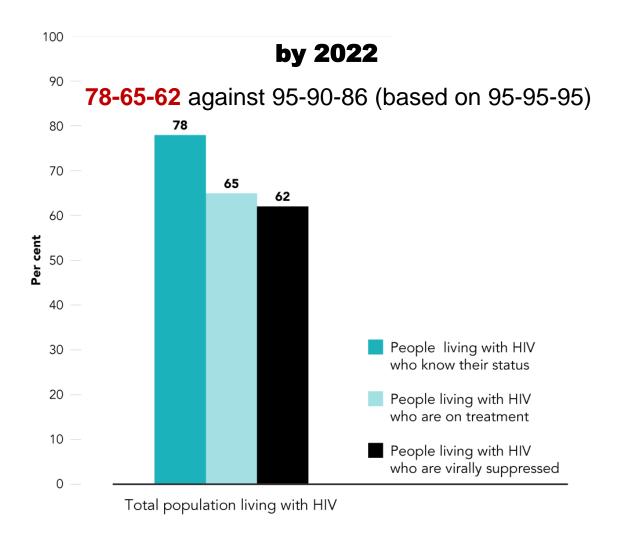




## Are we on track to end AIDS in the Asia-Pacific by 2030?

"NO"

by 2020 by 2025
90-90-90 95-95-95
Treatment TARGETS UPDATE

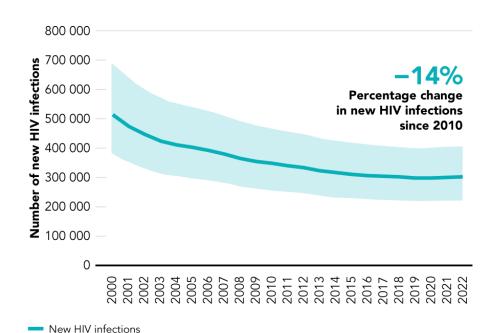






## HIV epidemic in Asia and the Pacific

- Marked inequalities and diverse epidemic trends affect progress in the HIV response in Asia and the Pacific
- Young people (aged 15–24 years): around a quarter of new HIV infections in the region; nearly half in Cambodia, Indonesia, Laos, Myanmar, the Philippines and Thailand



- New HIV infections among gay men and other men who have sex with men increased by
  - 6 times in the Philippines
  - 3 times in Cambodia
  - Almost 2 times in Laos
- Increasing use of **stimulants and synthetic opioids** exacerbates the risks of HIV transmission among people who use drugs

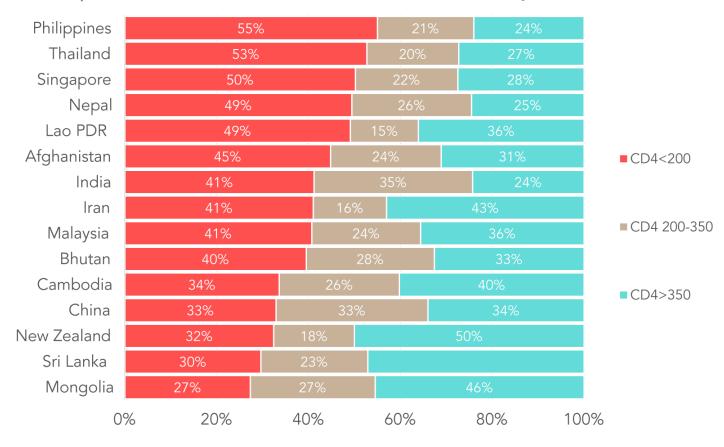




# Late diagnosis & low ART coverage are serious concerns

ART coverage is below 50% in a third of countries with published data. ART coverage >80% achieved only in Cambodia, New Zealand and Thailand.

#### Proportion of PLHIV who have had initial CD4 count in 2020 by CD4 level



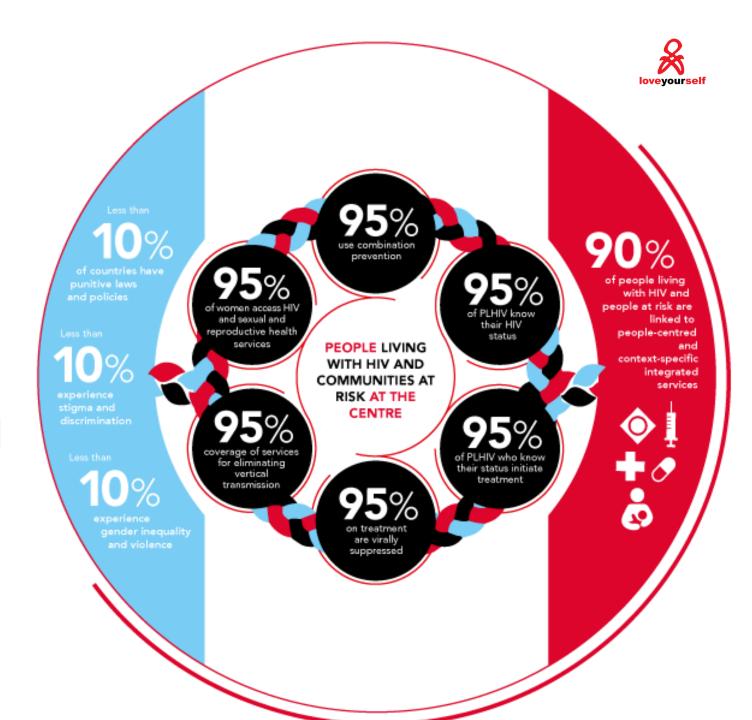


## We must move to

- THE 10s
- **THE 95s**
- THE INTEGRATION

## now!

– see *people* in the percentages



## Slow PrEP access and uptake in the Asia-Pacific







# Laws and policies that impede HIV responses

Although there is evidence of progress, all 39 countries still have laws that impede HIV response.

- 38 criminalize some aspect of sex work
- 17 criminalize same-sex relations
- 24 law does not allow for possession of a certain limited amount of drugs for personal use
- 19 criminalizing the transmission of, non-disclosure of or exposure to HIV transmission
- 15 restricting the entry, stay and residence of people living with HIV





## Laws and policies that impede HIV responses

Criminalization/ Restriction	Same-sex relations	Transgender people	Sex work	Possession of drugs for personal use**	of, non- disclosure of, exposure to HIV	Restricting entry, stay, residence of PLHIV	Parental consent for adolescent HIV testing
Cambodia	No	No	Yes	Yes	Yes	No	Yes
Indonesia	Yes/NS	Yes	Yes	Yes	Yes	Yes	Yes
Lao PDR	No	No	Yes	Yes	Yes	No	Yes
Malaysia	Yes/NS	Yes	Yes	Yes	Yes	Yes	NA
Myanmar	Yes/NS	No	Yes	Yes	No	No	No
Philippines	No	No	Yes	Yes	No	No	Yes
Singapore	No*	No	Yes	Yes	Yes	Yes	No
Thailand	No	No	Yes	Yes	No	No	No
Vietnam	No	No	Yes	NA	Yes	No	Yes

Transmission

NS = No penalty specified; NA = Data not available

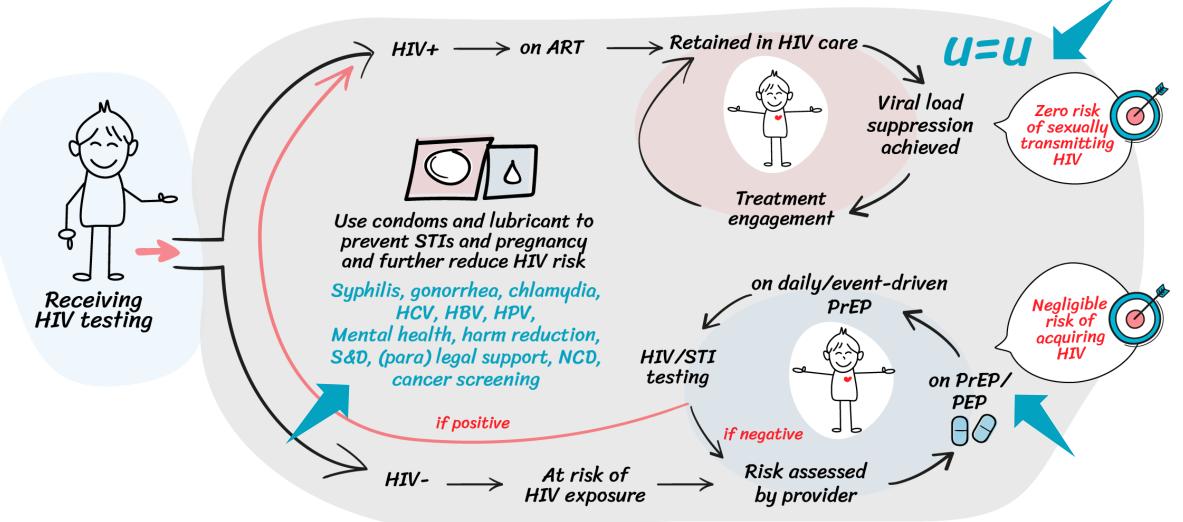
<sup>\*</sup>Singapore removed colonial laws prohibiting consensual sex between men in April 2023.

<sup>\*\*</sup>Death penalty for drug offences in 14 countries





## Person-centered, HIV status-neutral approach





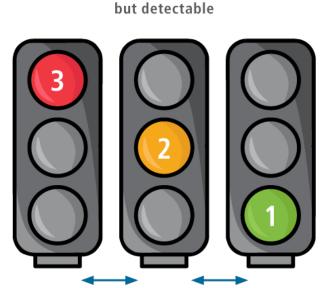


## WHO Policy Brief on

## The role of HIV viral suppression in improving individual health and reducing transmission, July 2023

Unsuppressed





Suppressed

- Undetectable (not detected\*):
  no measurable virus. Zero risk of transmission
  to sexual partner(s); minimal risk of mother to
  child transmission.
  - 2 Suppressed (detected but ≤1000 copies/mL): some virus replicating and present: could be due to missing doses, recent treatment initiation or drug resistance. Almost zero or negligible risk of transmission to sexual partner(s).
  - 3 Unsuppressed (>1000 copies/mL): significant virus replicating and present: could be due to missing doses, recent treatment initiation or drug resistance. Increased risk of falling ill and/or passing virus on to sexual partner(s) or children.



## **XIAS**



## U=U - it is not just to take your pill

## Early testing and

Point-of-care HIV testing

immediate treatment

- Lay provider testing
- HIV self-testing
- Same-hour HIV test result
- Same-day ART initiation



## Suppressed VL Undetectable VL

- Happy with the regimen
- Enjoy being in care
- Adequate and sustainable ARV supply



## The goal of living a full life

- Quality of all life aspects
- Best sexual health with sexual pleasure, physically and emotionally
- Being sinful/immoral, infectious, worthless

#### The medical ethics

Condom =
Responsibility

Respect an informed decision to choose prevention tool-of-choice [AUTOMONY]

<del>Saying</del> <del>negligible risk</del>

#SayZero to enhance physical, mental & sexual health

[BENEFICENCE]

<del>Selective</del> communication

Discuss U=U with all PLHIV

[JUSTICE]





## People-centered service delivery principles

Different steps offered by lay providers, or through HCW task-shifting

Facility-based



Community-based



Community-led



Self-care



Finding less complex ways to deliver care, to promote increased access and lower cost, while retaining efficacy and quality

Nice-to-have 

→ Must-have

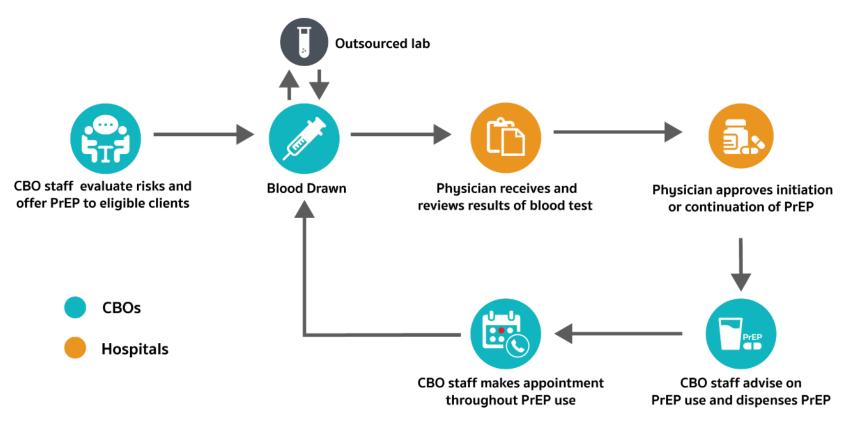
DIFFERENTIATE





0 0

## KP-led, Same-Day PrEP: close collaboration between CBOs and hospitals



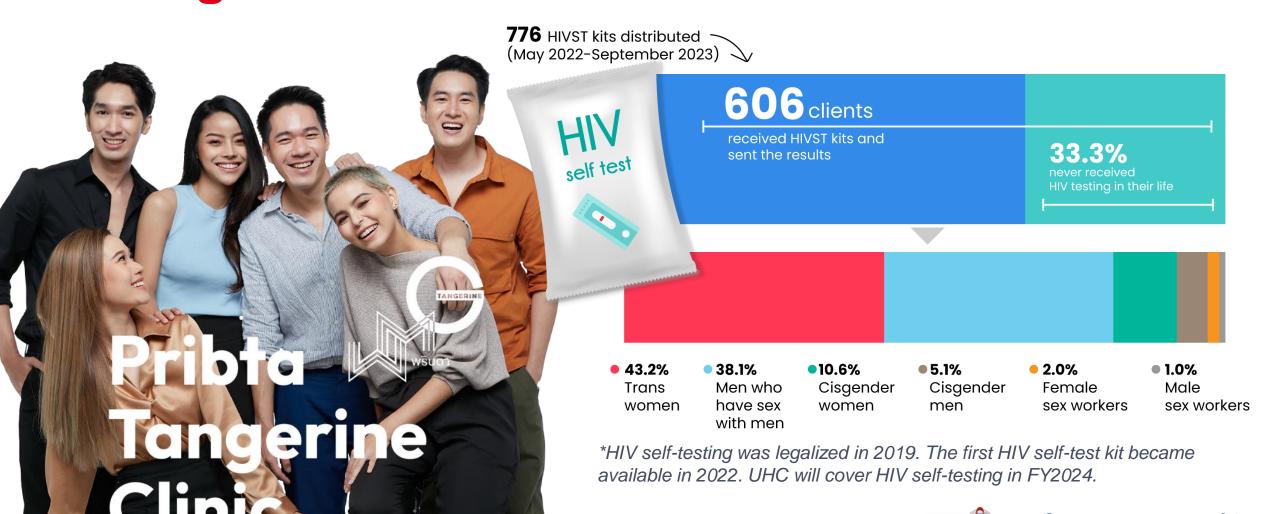
อย่าลืมส่งไปรักษาชีฟิลิสด้วยนะคะ ได้ครับ ขอบคุณครรับ + 💿 🖂 🗛

5 DSD, PrEP...ing+MP (27)

2020 Thailand National Guidelines on HIV/AIDS Treatment and Prevention Ramautarsing RA, et al. J Int AIDS Soc 2020; 23 Suppl 3: e25540. Phanuphak N, et al. Sex Health 2018; 15(6): 542-55. Wongsa, A, et al. IAS 2023, abstract #ECPO437.



## Moving towards self-care



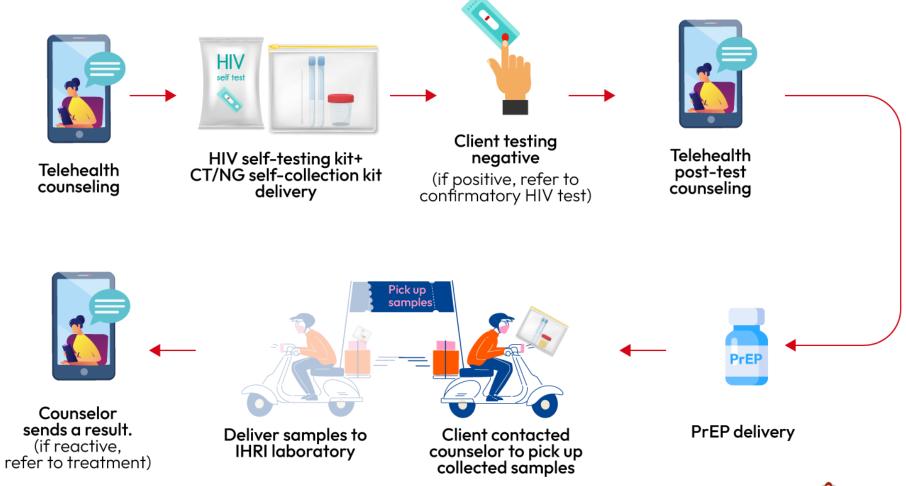
Termvanich, K, et al. IAS 2023 abstract #TUPEC16.

PEPFÄR





## HIV self-testing to initiate and continue PrEP





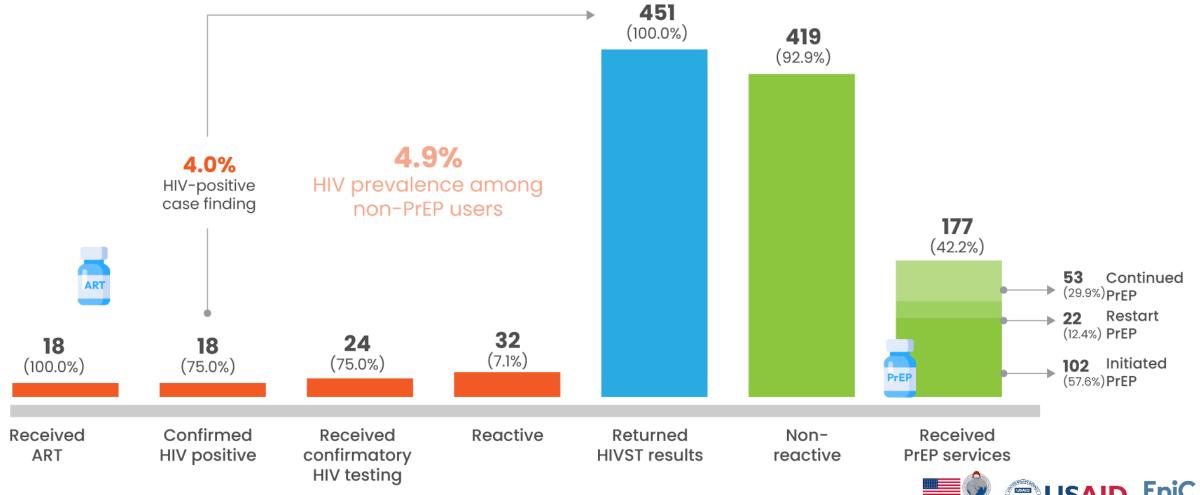








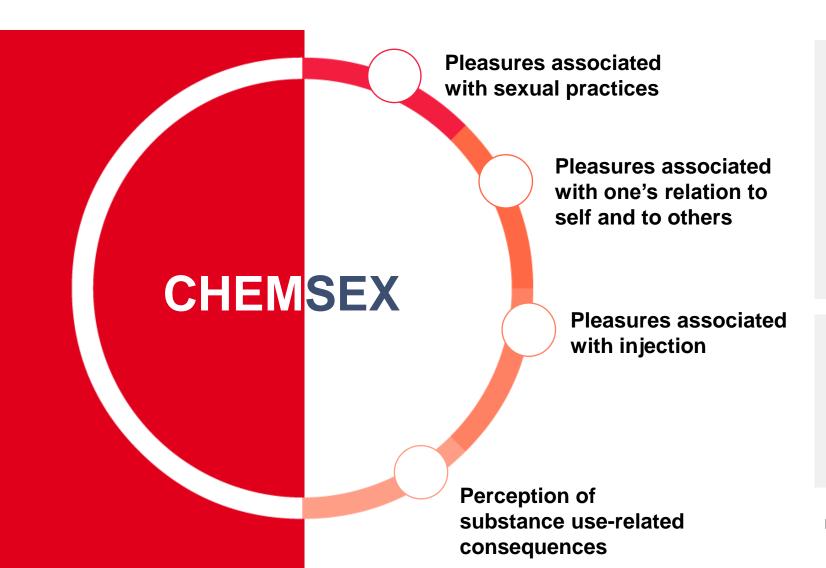
## HIV self-testing linkage to prevention/treatment







## Pleasure-integrated chemsex care



- Lack of languages to describe pleasures
- Internalized stigma towards
   homosexuality and substance use within a
   mainstream culture
- Pleasure-integrated approach to chemsex that is free of associated, negative judgments to make access to care appealing and/or accessible

#### Needs evidence-based interventions

- Ways to rediscover the pleasure and sexual fulfillment (sober sex)
- Ways to reconstruct one's social network

Flores-Aranda J, et al. Drugs and Alcohol Today 2019; 19 (3): 189-196. Milhet M, et al. Drugs and Alcohol Today 2019;19(1): 11-12.

## **RIAS**



## **Conclusions**

- We must move from 95-95-95 to THE 10s, THE 95s, and THE INTEGRATION.
- U=U can be an important tool to address intersectional stigma and discrimination in all settings, including internalized stigma.
- Demedicalization, simplification, and differentiation are key principles of people-centered care. Care must be integrated.
- Innovative science/products are important but innovative mindset to translate existing science/products into actual implementation is more crucial.