



# SAARC Epidemiological Response on HIV/AIDS 2020

SAARC TUBERCULOSIS AND HIV/AIDS CENTRE  
THIMI, BHAKTAPUR



# **SAARC EPIDEMIOLOGICAL RESPONSE ON HIV/AIDS**

**2020**



**SAARC Tuberculosis and HIV/AIDS Centre**

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# SAARC Tuberculosis and HIV/AIDS Centre

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## FOREWORD

SAARC Member States have adopted the SDG target of “End AIDS by 2030”. In this journey the National HIV/AIDS Control programmes of SAARC Member States are the pioneers which are taking the leadership and decisions to guide the national response to HIV and reach their goal within the stipulated time frame.



Early detection and enrollment in ART services contributes significantly to the ability for expanded ART access to make impact on averting AIDS related morbidity and mortality and reducing HIV transmission.

The SAARC Member States have varied epidemiological patterns of HIV infection and AIDS. In reviewing the current epidemiology of HIV and AIDS within the SAARC region, the diversity needs to be fully addressed and defined. In spite of these diversities, Member States are committed to take necessary actions and contain HIV and AIDS epidemic.

In the year 2019, it is estimated that the number of people living with HIV globally was 38 million [31.6 million- 44.5 million] and there were 1.7 million (1.2 million-2.2 million) new HIV infections. In addition, there were 690 000 [500 000 – 970 000] AIDS related deaths.

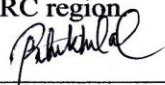
SAARC Region has an estimated 2.6 million People Living with HIV and India alone bears an estimated 2.3 million of that number in 2019. There were 98 110 new HIV infections and around 67 080 AIDS related deaths in the year 2019 in the SAARC Region.

The SAARC TB and HIV/AIDS Centre (STAC) coordinates the efforts of the National AIDS Control Programmes (NACPs). The SAARC Member States have made notable progress across South Asia in line with the SAARC Regional Strategy on HIV/AIDS and TB/HIV co-infection.

This is the 18<sup>th</sup> report on HIV/AIDS epidemiology. This report “SAARC Epidemiological Response on HIV/AIDS – 2020” which incorporates the updated information and brief analysis on HIV/AIDS as of December 2019. It includes statistical information and brief analysis on HIV & AIDS and describes HIV/AIDS situation in global, regional and SAARC member states.

I acknowledge the Programme Managers and experts of SAARC Member countries who have generated and shared the epidemiological data that has been used in this report along with UNAIDS Data 2020.

We appreciate our partner’s continued collaboration in our joint efforts to END AIDS by 2030 in the SAARC region.

  
Dr. Bibek Kumar Lal  
Director

## **ABBREVIATIONS**

AIDS	Acquired Immuno-Deficiency Syndrome
ANPASH	Afghanistan National Programme for Control of AIDS/HIV, STI & Hepatitis
APLHIV	Association of People Living with HIV
ART	Anti-Retroviral Therapy
ARV	Antiretroviral
CBOs	Community Based Organizations
CHBC	Community/Home-Based Care
CLHIV	Children Living with HIV
CSOs	Civil Society Organizations
EID	Early Infant Diagnosis
EIMS	Electronic Information Management System
FGD	Focus Group Discussion
FSW	Female Sex Worker
GDP	Gross Domestic Product
HIV	Human Immunodeficiency Virus
HMIS	Health Information Management System
HTS	HIV Testing Services
IBBS	Integrated Biological Behavioral Surveillance Survey
ICTC	Integrated Counseling and Testing Centres
IGMH	Indira Gandhi Memorial Hospital
IPT	Isoniazid Preventive Therapy
KAPs	Key Affected Populations
KPs	Key Populations
LFU	Loss to Follow Up
M&E Plan	Monitoring and Evaluation Plan
MSM	Men Who Have Sex with Men
MSW	Male Sex Worker
NACO	National AIDS Control Organization

NACP	National AIDS Prevention and Control Program
NGOs	Non-Governmental Organizations
NPTCCD	National Programme for Tuberculosis Control & Chest Diseases
NSACP	National STD/AIDS Control Programme
NSP	National Strategic Plan
OST	Opioid Substitution Therapy
PLHIV	People Living with HIV
PMTCT	Prevention of Mother-To-Child Transmission
PPTCT	Prevention of Parent to Child Transmission (PPTCT)
PWID	People Who Inject Drugs
SAARC	South Asian Association for Regional Cooperation
SDGs	Sustainable Development Goals
STAC	SAARC Tuberculosis and HIV/AIDS Centre
STC	SAARC Tuberculosis Centre
STD	Sexually Transmitted Diseases
STIs	Sexually Transmitted Infections
SW	Sex Worker
TB	Tuberculosis
TCS	Treatment, Care & Support
TG	Transgender
TI	Targeted Intervention
UNAIDS	Joint United Nations Programme on HIV/AIDS
VCT	Voluntary Counseling and Testing
WHO	World Health Organization
XDRTB	Extensively Drug-Resistant TB

# 1. INTRODUCTION

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## 1.1 Introduction of SAARC

SAARC is an organization of eight countries located in the South Asia and it stands for the South Asian Association for Regional Corporation (SAARC). This is an economic and geopolitical organization, established to promote socio-economic development, stability, welfare economics, and collective self-reliance within the Region. The first summit was held in Dhaka, Bangladesh on 7<sup>th</sup>–8<sup>th</sup> December, 1985 and was attended by the Government Representatives and Presidents from Bangladesh, Maldives, Pakistan and Sri Lanka, the Kings of Bhutan and Nepal, and the Prime Minister of India. The dignitaries signed the SAARC Charter on 8 December 1985, thereby establishing the regional association and to carry out different important activities required for the development of the Region. The summit also agreed to establish a SAARC secretariat in Kathmandu, Nepal and adopted an official SAARC emblem. SAARC respects the principles of sovereign equality, territorial integrity, and national independence as it strives to attain sustainable economic growth.

## 1.2 SAARC TB and HIV/AIDS Centre (STAC)

A decision was taken to establish SAARC Tuberculosis Centre (STC) in 1992 and the Centre started functioning from 1994. The Centre has been supporting the National Tuberculosis Control Programmes of the SAARC Member States. The Thirty–first session of Standing Committee of SAARC held in Dhaka on 09<sup>th</sup> – 10<sup>th</sup> November, 2005, appreciating the efforts of the centre on TB/HIV co-infection and other works related to HIV/AIDS discipline, approved the renaming of the Centre as SAARC Tuberculosis and HIV/AIDS Centre (STAC) with additional mandate to support SAARC Member States for control and prevention of HIV/AIDS. Since then, with its efforts and effective networking with the Member States, the Centre is contributing significantly for control of both TB and HIV/AIDS in the region.



## **Vision, Mission, Goal and Objective of STAC**

SAARC TB and HIV/AIDS Centre (STAC) plays the role as an institute to support and guide SAARC member states to make the region free of TB and HIV/AIDS and the mission is to support the efforts of National TB and HIV/AIDS Control Programmes through evidence based policy guidance, coordination and technical support.

The Goal of the Centre is to bring to an end the morbidity and mortality due to TB and HIV/AIDS in the Region and end the transmission of both infections until TB and HIV/AIDS cease to be major public health problems in the SAARC Region. The objective of the Centre is to eliminate TB and end HIV/AIDS epidemic in the region by coordinating the efforts of the National TB Programmes and National HIV/AIDS programmes of the SAARC member states. .

## **Role of STAC**

- ❖ To act as a Regional Co-ordination Centre for NTPs and NACPs in the Region.
- ❖ To promote and coordinate action for the prevention of TB/HIV co-infection in the Region.
- ❖ To collect, collate, analyze and disseminate all relevant information regarding the latest development and findings in the field of TB and HIV/AIDS in the Region and elsewhere.
- ❖ To establish a networking arrangement among the NTPs and NACPs of Member States and to conduct surveys, researches etc.
- ❖ To initiate, undertake and coordinate the Research and Training in Technical, Bio-medical, operational and other aspects related to control and prevention of Tuberculosis and HIV/AIDS in the Region.
- ❖ To monitor epidemiological trends of all forms of TB and HIV/AIDS in the Region.
- ❖ To assist Member States for harmonization of policies and strategies on TB, HIV/AIDS and TB/HIV co-infection, wherever and whenever possible.
- ❖ To assist and support National TB Reference Laboratories in the Region in quality assurance of sputum microscopy, culture and drug sensitivity testing and implementation of bio-safety measures.
- ❖ To carry-out other important works identified by the Programming Committees/Governing Board.



## 2. GLOBAL SITUATIONS OF HIV/AIDS

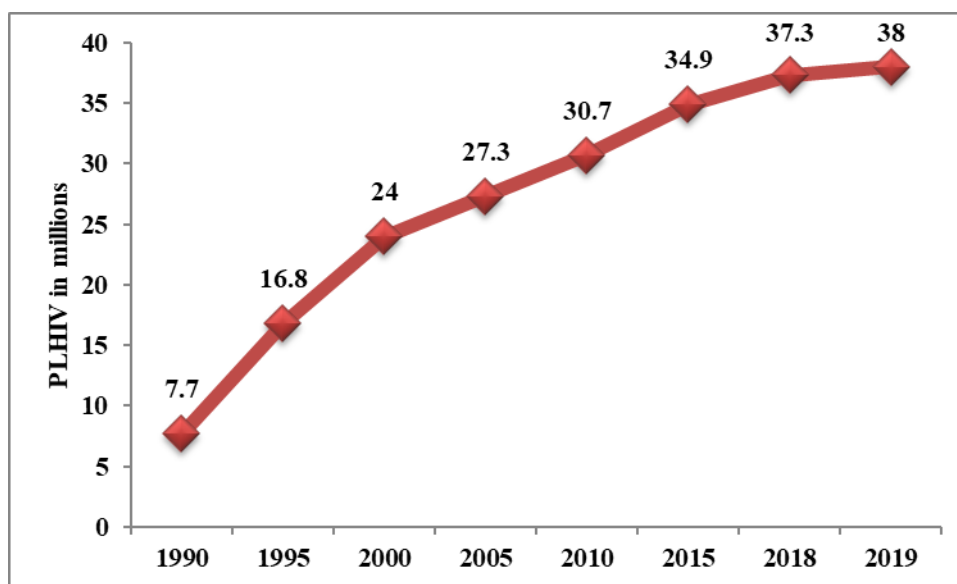
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### 2.1 Global HIV Statistics

#### People living with HIV

- ❖ In 2019, there were 38 million [31.6 million–44.5 million] people living with HIV.
  - 36.2 million [30.2 million–42.5 million] adults aged 15 and over.
  - 19.2 million [ 16.4 million-22.2 million] women aged 15 and over
  - 17.0 million [ 13.8 million-20.4 million] men aged 15 and over
  - 1.8 million [1.3 million–2.2 million] children (<15 years).

**Figure: 01 People Living with HIV (all ages), 1990–2019**



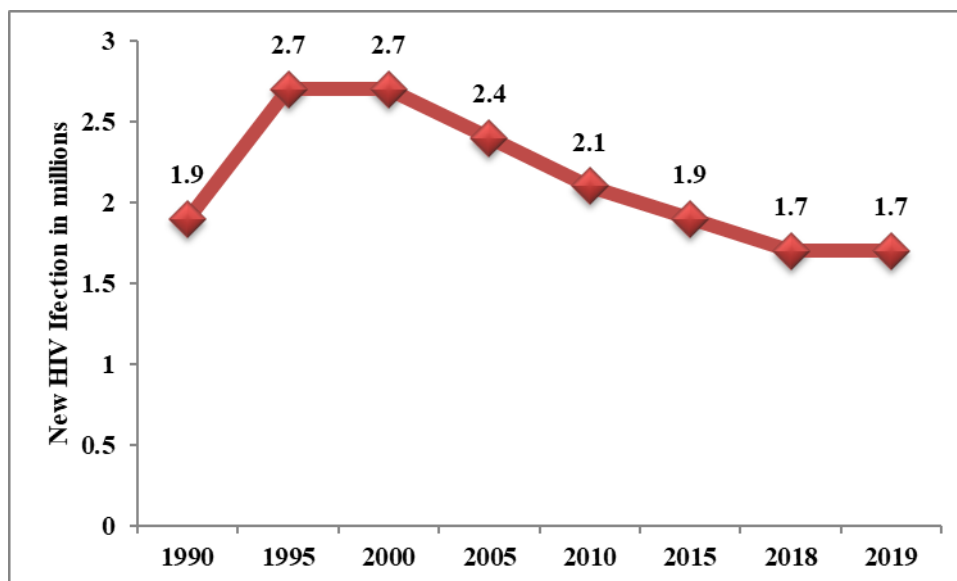
Source: <http://aidsinfo.unaids.org>

#### New HIV infections

- ❖ New HIV infections have been reduced by 40% since the peak in 1998.
  - In 2019, there were 1.7 million [1.2 million–2.2 million] new HIV infections, compared to 2.8 million [2.0 million-3.7 million] in 1998.

- ❖ Since 2010, new HIV infections have declined by 23%, from 2.1 million [1.6 million–2.9 million] to 1.7 million [1.2 million–2.2 million] in 2019.
- Since 2010, new HIV infections among children have declined by 52 %, from 310 000 [200 000–500 000] in 2010 to 150 000 [94 000–240 000] in 2019.

**Figure 02: New HIV Infection (all ages), 1990-2019**

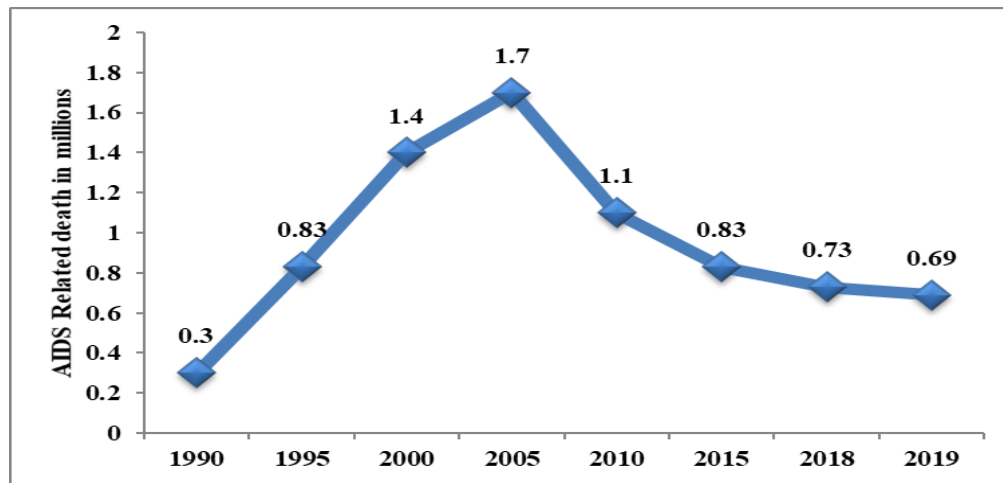


Source: <http://aidsinfo.unaids.org>

### **AIDS-Related Deaths**

AIDS-related deaths have been reduced by more than 60% since the peak in 2004. In 2019, around 690 000 [500 000–970 000] people died from AIDS-related illnesses worldwide, compared to 1.7 million [1.2 million–2.4 million] in 2004 and 1.1 million [830 000–1.6 million] in 2010. AIDS related mortality has declined by 39% since 2010.

**Figure 03: AIDS Related Deaths (all ages), 1990–2019**



Source: <http://aidsinfo.unaids.org>

### **HIV/Tuberculosis\***

- ❖ TB remains the leading cause of death among people living with HIV, accounting for around one in three AIDS-related deaths.
- ❖ In 2019, an estimated 10.0 million [8.9 million–11.0 million] people developed TB disease, approximately 9% of whom were living with HIV.
  - People living with HIV with no TB symptoms need TB preventative therapy, which lessens the risk of developing TB and reduces TB/HIV death rates by around 40%.
- ❖ It is estimated that 44% of people living with HIV and TB are unaware of their co-infection and are therefore not receiving care.

### **People Living with HIV Accessing Antiretroviral Therapy\***

- ❖ In 2019, 25.4 million [24.5 million–25.6 million] people were accessing antiretroviral therapy, up from 6.4 million [5.9 million–6.4 million] in 2009.
- ❖ In 2019, 67% [54–79%] of all people living with HIV were accessing treatment.
  - 68% [54–80%] of adults aged 15 years and older living with HIV had access to treatment, as did 53% [36–64%] of children aged 0–14 years.
  - 73% [60–86%] of female adults aged 15 years and older had access to treatment; however, just 61% [48–74%] of male adults aged 15 years and older had access.

- ❖ 85% [63–100%] of pregnant women living with HIV had access to antiretroviral medicines to prevent transmission of HIV to their child in 2019.

### **90–90–90\***

- ❖ In 2019, 81% [68–95%] of people living with HIV knew their HIV status.
- ❖ Among people who knew their status, 82% [66–97%] were accessing treatment.
- ❖ And among people accessing treatment, 88% [71–100%] were virally suppressed.
- ❖ Of all people living with HIV, 81% [68–95%] knew their status, 67% [54–79%] were accessing treatment and 59% [49–69%] were virally suppressed in 2019.

### **Women\***

- ❖ Every week, around 5500 young women aged 15–24 years become infected with HIV.
  - In sub-Saharan Africa, five in six new infections among adolescents aged 15–19 years are among girls. Young women aged 15–24 years are twice more likely to be living with HIV than men.
- ❖ More than one third (35%) of women around the world have experienced physical and/or sexual violence by an intimate partner or sexual violence by a non-partner at some time in their lives.
  - In some regions, women who have experienced physical or sexual intimate partner violence are 1.5 times more likely to acquire HIV than women who have not experienced such violence.
- ❖ Women and girls accounted for about 48% of all new HIV infections in 2019. In sub-Saharan Africa, women and girls accounted for 59% of all new HIV infections.

### **Key populations\***

- ❖ Key populations and their sexual partners account for:
  - 62% of new HIV infections globally.
  - 99% of new HIV infections in Eastern Europe and central Asia.
  - 97% of new HIV infections in the Middle East and North Africa.
  - 96% of new HIV infections in western and central Europe and North America.
  - 98% of new HIV infections in Asia and the Pacific.

- 77% of new HIV infections in Latin America.
- 69% of new HIV infections in western and central Africa.
- 60% of new HIV infections in the Caribbean.
- 28% of new HIV infections in eastern and southern Africa.

❖ The risk of acquiring HIV is:

- 26 times higher among gay men and other men who have sex with men.
- 29 times higher among people who inject drugs.
- 30 times higher for sex workers.
- 13 times higher for transgender people.

Source: [\\*https://www.unaids.org/en/resources/fact-sheet](https://www.unaids.org/en/resources/fact-sheet)

**Table 01:**

**Global Summary of HIV/AIDS, 2000 – 2019 (in millions)**

<b>Year</b>	<b>People living with HIV</b>	<b>New HIV infections (total)</b>	<b>New HIV infections (age 15+)</b>	<b>New HIV infections ( age 0-14)</b>	<b>AIDS related deaths</b>	<b>People accessing antiretroviral therapy</b>
2019	38.0 (31.6-44.5)	1.7 (1.2-2.2)	1.5 (1.1-2.0)	0.15 (0.09-0.24)	0.6 (0.43-0.84)	25.4 (24.5-25.6)
2018	37.9 (32.7-44.0)	1.7 (1.4-2.3)	1.6 (1.2-2.1)	0.16 (0.11-0.26)	0.77 (0.57-1.1)	23.1
2017	36.9 (31.1-43.9)	1.8 (1.4-2.4)	1.6 (1.3-2.1)	0.18 (0.11-0.26)	0.94 (0.67-1.3)	21.7 (19.1-22.6)
2016	36.3 (30.6-43.1)	1.9 (1.4-2.4)	1.7 (1.3-2.2)	0.18 (0.11-0.27)	0.99 (0.7-1.4)	19.4 (17.1-20.2)
2015	35.6 (30.1-42.4)	1.9 (1.5-2.5)	1.7 (1.3-2.3)	0.19 (0.12-0.28)	1 (0.73-1.54)	17.2 (15.2-17.9)
2014	35 (29.5-41.6)	2 (1.5-2.6)	1.8 (1.4-2.3)	0.2 (0.12-0.29)	1.1 (0.7-1.5)	15.1 (13.3-15.7)
2013	34.3 (29-40.8)	2 (1.6-2.7)	1.8 (1.4-2.4)	0.22 (0.14-0.32)	1.2 (0.8-1.6)	13.2 (11.6-13.8)
2012	33.7 (28.4-40)	2.1 (1.6-2.7)	1.8 (1.4-2.4)	0.23 (0.15-0.34)	1.2 (0.8-1.7)	11.4 (10.1-11.9)
2010	32.4 (27.4-38.5)	2.2 (1.7-2.9)	1.9 (1.5-2.5)	0.27 (0.17-0.4)	1.4 (1-2)	8 (7.1-8.3)
2005	30.1 (25.4-35.8)	2.5 (1.9-3.2)	2.1 (1.6-2.7)	0.38 (0.24-0.56)	1.9 (1.4-2.7)	2.1 (1.8-2.1)
2000	27.4 (23.1-32.6)	2.8 (2.2-3.7)	2.4 (1.9-3.2)	0.42 (0.26-0.62)	1.5 (1.1-2.2)	0.61 (0.53-0.63)

Source: UNAIDS DATA 2020 and SAARC Epidemiological response on HIV/AIDS-2019

## **2.2 HIV Prevention and Sustainable Development Goals**

Efforts to scale up HIV prevention can build synergies with broader efforts to achieve the 2030 Agenda for Sustainable Development. Primary prevention of HIV contributes directly towards achieving six of the Sustainable Development Goals (SDGs), where ongoing HIV transmission currently holds back progress (Figure 04). For example, transformative AIDS responses can provide an important impetus to social protection schemes, using cash transfers to reduce HIV vulnerability and risk in ways that contribute to gender equality and the empowerment of all women and girls, support education and reduce poverty. Similarly, progress on other SDGs contributes to HIV prevention through policies that seek to leave no one behind. For example, improved opportunities for education, including comprehensive sexuality education, will empower young people and promote improved health outcomes. HIV-sensitive universal health coverage policies can play a vital role in ensuring access to key HIV prevention interventions.

Hence, HIV Prevention 2020 contributes to the Sustainable Development Goals. Efforts to achieve these goals will in turn support HIV prevention outcomes.

**Figure 04: HIV Prevention and the Sustainable Development Goals**

<b>3</b> GOOD HEALTH AND WELL-BEING 	<b>4</b> QUALITY EDUCATION 	<b>5</b> GENDER EQUALITY 	<b>10</b> REDUCED INEQUALITIES 	<b>16</b> PEACE, JUSTICE AND STRONG INSTITUTIONS 	<b>17</b> PARTNERSHIPS FOR THE GOALS 
Healthy lives and well-being for all, at all ages	Inclusive and equitable quality education and promotion of lifelong learning opportunities for all	Gender equality and empowerment of all women and girls	Reduced inequality within and among countries	Reduced violence including against key populations and people living with HIV	Global partnership for sustainable development
Universal health coverage, including HIV prevention services	High-quality education, including on comprehensive sexual and reproductive health	Sexual and reproductive health and rights	Protection against discrimination alongside legal services	Promotion of the rule of law	Policy coherence
Universal access to sexual and reproductive health	Empowerment of young people and life skills for responsible and informed sexual and reproductive health decisions	Elimination of violence and harmful gender norms and practices	Rights literacy, access to justice and international protection	Effective, accountable and transparent institutions	International support for implementing effective capacity building
Universal access to drug dependence treatment and harm reduction			Empowerment of people to claim their rights and enhance access to HIV services	Inclusive, participatory and representative decision-making	



### 3. HIV/AIDS SIUATION IN THE SAARC REGION

HIV/AIDS continues to be a major public health problem in the SAARC Region. All eight Member States of the SAARC region are designated as low prevalence countries. On the basis of latest available information this region is home for estimated number of 2.6 million HIV infected people and 0.06 million AIDS deaths in 2019. Table 02 shows the estimated number of People Living with HIV (PLHIV) in eight Member States of the SAARC Region in the year 2019. Three countries namely India, Nepal and Pakistan account for majority of the regional burden. The first HIV infected persons were diagnosed in 1986 in India and Pakistan. By 1993, all SAARC Member States had reported the existence of HIV infection in their countries.

**Table 02: Estimated Number of PLHIV, New HIV Infections, AIDS Deaths, Prevalence Rate and Incident Rate in SAARC Region-2019**

<i>Country</i>	<i>Population('000)<sup>a</sup></i>	<i>Estimated No. of PLHA</i>	<i>HIV Prevalence Rate (%)</i>	<i>Estimated New HIV infection (all ages)</i>	<i>HIV Incidence per 1000 population</i>	<i>AIDS-related Deaths</i>
<b>Afghanistan</b>	38000	11000	<0.1	1500	0.04	<500
<b>Bangladesh*</b>	163000	14000	< 0.01	1600	0.01	580
<b>Bhutan*</b>	760	1300	0.3	<100	0.11	<100
<b>India**</b>	1366000	2348860	0.22	69220	0.05	58960
<b>Maldives*</b>	530	N/A	N/A	N/A	NA	NA
<b>Nepal</b>	29000	30000	0.1	790	0.03	740
<b>Pakistan</b>	217000	190000	0.1	25000	0.12	6800
<b>Sri- Lanka</b>	21000	3600	< 0.1	< 200	<0.01	<200
<b>Regional</b>	<b>1835 million</b>	<b>2.6 million</b>		<b>98110</b>		<b>67080</b>

Source: UNAIDS data 2020, \*SAARC Epidemiological response on HIV/AIDS-2019, \*\* India HIV estimates 2019 report, <sup>a</sup> WHO Global Tuberculosis report-2020

The overall adult HIV prevalence in SAARC region remains below 1%. However, there are important variations existing between countries. Of the estimated number of 2.6 million PLHIV in SAARC region, 2.3 million were living in India in 2019 (Table 02).

**Table 03: Progress towards 90-90-90 Targets in SAARC Region 2019**

<i>Country</i>	<i>Percent of people living with HIV who know their status</i>	<i>Percent of people living with HIV who are on ART</i>	<i>Percent of people living with HIV who have suppressed viral loads</i>
<b>Afghanistan</b>	27	10	N/A
<b>Bangladesh**</b>	53	31	84
<b>Bhutan*</b>	47	37	N/A
<b>India*</b>	79.4	82	68
<b>Maldives*</b>	N/A	NA	N/A
<b>Nepal</b>	78	63	55
<b>Pakistan</b>	21	12	NA
<b>Sri- Lanka***</b>	64	80	86

Source: UNAIDS data 2020, \*SAARC Epidemiological response on HIV/AIDS-2019\*\* Data sent by NASC, Bangladesh-2020, \*\*\*National STD/AIDS Control Programme Annual Report 2019, Sri Lanka

**Table 04: Estimated Size of Key Populations in SAARC Region-2019**

<b>Country</b>	<b>Sex Worker</b>	<b>Men who have sex with men</b>	<b>People who inject drugs</b>	<b>Transgender</b>	<b>Prisoners</b>
<b>Afghanistan</b>	11000	10000	26000	NA	2800
<b>Bangladesh</b>	140000	101700	33100	10200	73400
<b>Bhutan*</b>	1044	72	55	22	240
<b>India</b>	657800	238200	127500	26000	433000
<b>Maldives*</b>	NA	NA	NA	NA	NA
<b>Nepal</b>	67300	60300	30900	21500	22000
<b>Pakistan</b>	228800	832200	113400	52400	80500
<b>Sri- Lanka</b>	30000	73800	2700	2200	122000
<b>Regional</b>	<b>1135944</b>	<b>1316272</b>	<b>333655</b>	<b>112322</b>	<b>733940</b>

Source: <http://aidsinfo.unaids.org/data sheet 2019>, \*SAARC Epidemiological response on HIV/AIDS-2019

Country wise estimated size of key populations has been shown in table 04. In the SAARC region, 1.1 million estimated size of Sex worker (SW), 1.3 million Men who have sex with men (MSM), 333655 people who inject drugs (PWID), 112322 transgender and 733940 prisoners were estimated key populations in year 2019.

**Table 05: Elimination of Mother - to - Child Transmission in SAARC Region-2019**

Country	Pregnant women needing ARV for PMTCT	Pregnant women who received ARV for PMTCT	ARV for PMTCT Coverage (%)
<b>Afghanistan</b>	<500	24	-
<b>Bangladesh**</b>	35	29	82
<b>Bhutan*</b>	6	6	100
<b>India</b>	22617	13878	61
<b>Maldives*</b>	NA	NA	NA
<b>Nepal</b>	<500	123	-
<b>Pakistan</b>	3600	417	12
<b>Sri- Lanka</b>	NA	NA	NA
<b>Regional</b>	<b>26258</b>	<b>14477</b>	<b>55</b>

Source: UNAIDS data 2020, \*SAARC Epidemiological response on HIV/AIDS-2019, \*\* Data sent by NASC Bangladesh-2020

Elimination of Mother to child transmission in the SAARC Region there were 26258 pregnant women needing ARV for PMTCT, 14477 pregnant women who received ARV for PMTCT and 55 Percent ARV for PMTCT Coverage as shown in table 05. About 1.4 million people were receiving ART in year 2019 and 86500 deaths were averted due to ART in 2019 in SAARC Region (Table 06).

**Table 06: Number of People Living With HIV Receiving ART and Deaths Averted Due to ART-2019**

Country	No. of People receiving ART	Deaths averted due to ART*
<b>Afghanistan</b>	1044	<200
<b>Bangladesh**</b>	4009	<500
<b>Bhutan</b>	483	NA
<b>India*</b>	1373323	83000
<b>Maldives*</b>	11	NA
<b>Nepal</b>	18628	1100
<b>Pakistan</b>	22947	2400
<b>Sri- Lanka</b>	1846	<200
<b>Regional</b>	<b>1.4 million</b>	<b>86500</b>

*Source: UNAIDS data 2020, \*SAARC Epidemiological response on HIV/AIDS-2019, \*\* Data sent by NASC, Bangladesh-2020*

## **4. COUNTRY PROFILES**

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**Afghanistan**

**Bangladesh**

**Bhutan**

**India**

**Maldives**

**Nepal**

**Pakistan**

**Sri-Lanka**

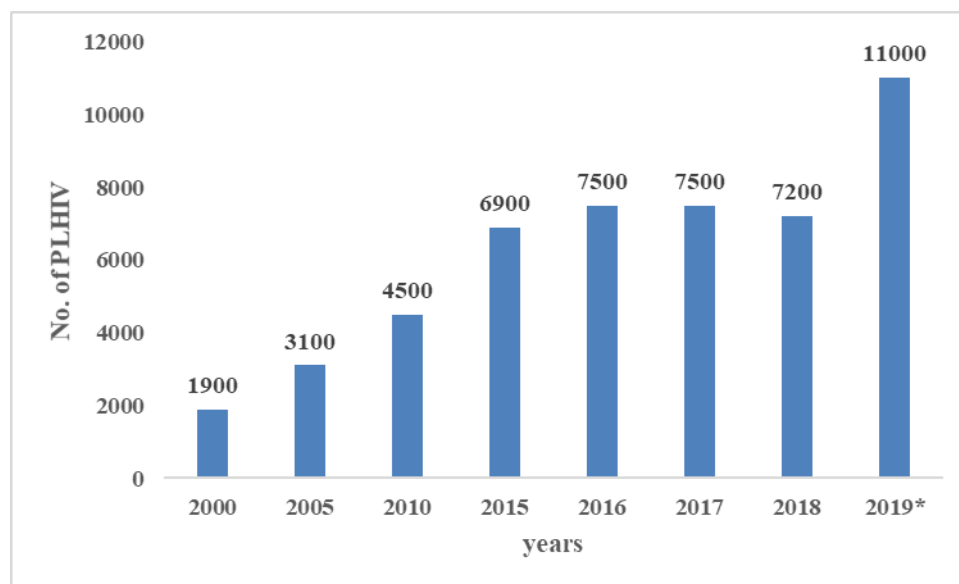
## AFGHANISTAN

Islamic Republic of Afghanistan is one of the eight member countries of SAARC. It is a land-locked country, bordered by Pakistan in the south and east, Iran in the west, Turkmenistan, Uzbekistan and Tajikistan in the north, and China in the far northeast. The land area is 647,500 square kilometers and a population of 38 million (WHO Global Tuberculosis Report-2020).

### Overview of the HIV/AIDS Epidemic

In Afghanistan, there were an estimated 11000 (4300-38000) PLHIV in 2019 (Figure 05), with an adult (15–49 years) HIV prevalence of <0.1% (<0.1-0.2%). This includes around less than 500 Children Living with HIV (CLHIV, 0-14) accounting for 4.5% of the total PLHIV estimates. There were 3000 (1200-10000) women living with HIV (15+ years) constituting around 27% of the total estimated PLHIV. There were 1500 (<500-5500) new HIV infections in 2019. There were <500 (<200-1400) AIDS-related deaths in the year 2019. HIV incidence was estimated at 0.04 per 1,000 populations in 2019.

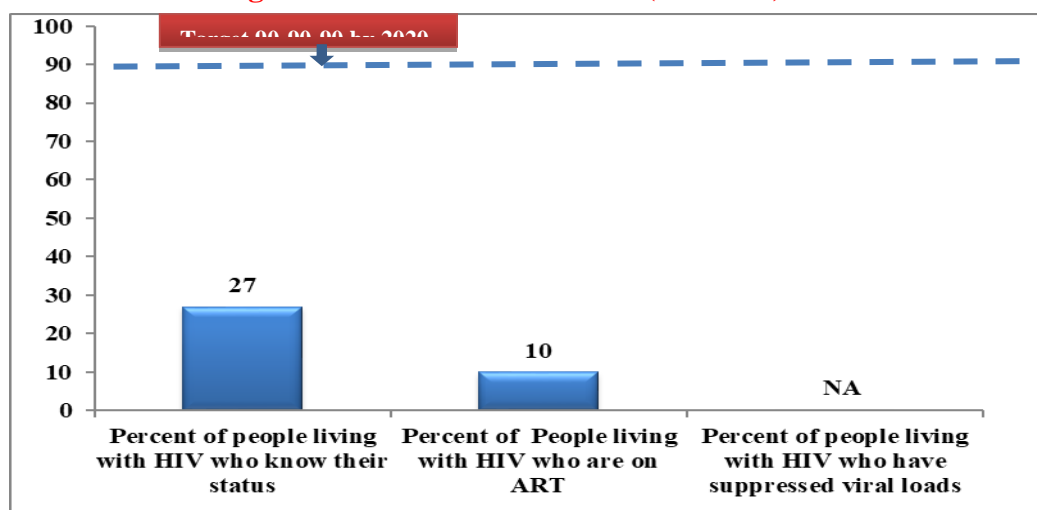
**Figure 05: Trend of Estimated Number of PLHIV, 2000-2019**



Source: \*UNAIDS data 2020, SAARC Epidemiological Response on HIV/AIDS-2019

Figure 06 shows treatment cascade (90-90-90) in Afghanistan. In year 2019 there were 27 Percent of people living with HIV who know their status, 10 Percent of people who know their status who are on ART and data for Percent of people on ART who achieved viral load suppression was not available.

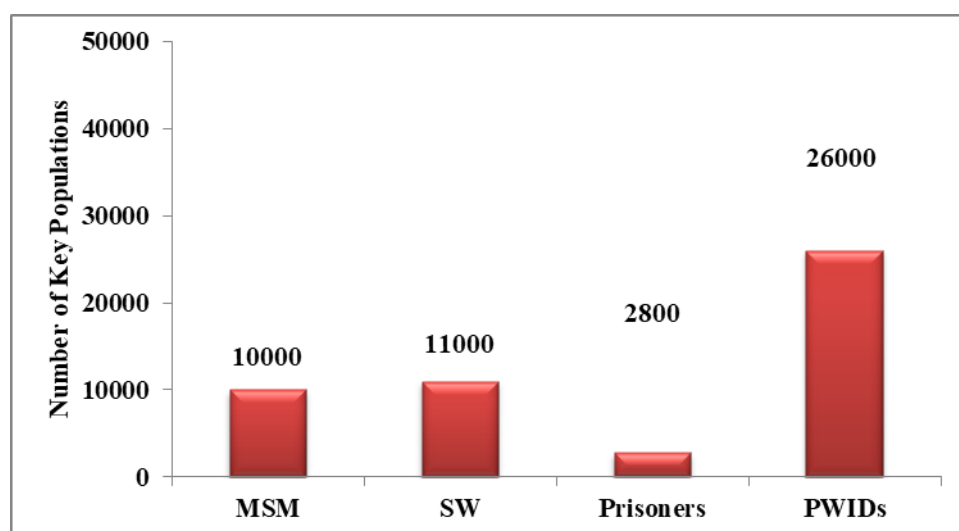
**Figure 06: Treatment Cascade (90-90-90)-2019**



Source: <http://aidsinfo.unaids.org>

Figure 07 shows the estimated size of key populations in Afghanistan. In 2019, there were 11000 Sex Worker (SW), 10000 Men who have sex with men (MSM), 26000 People who inject drugs (PWID) and 2800 prisoners.

**Figure 07: Estimated size of Key Populations, 2019**

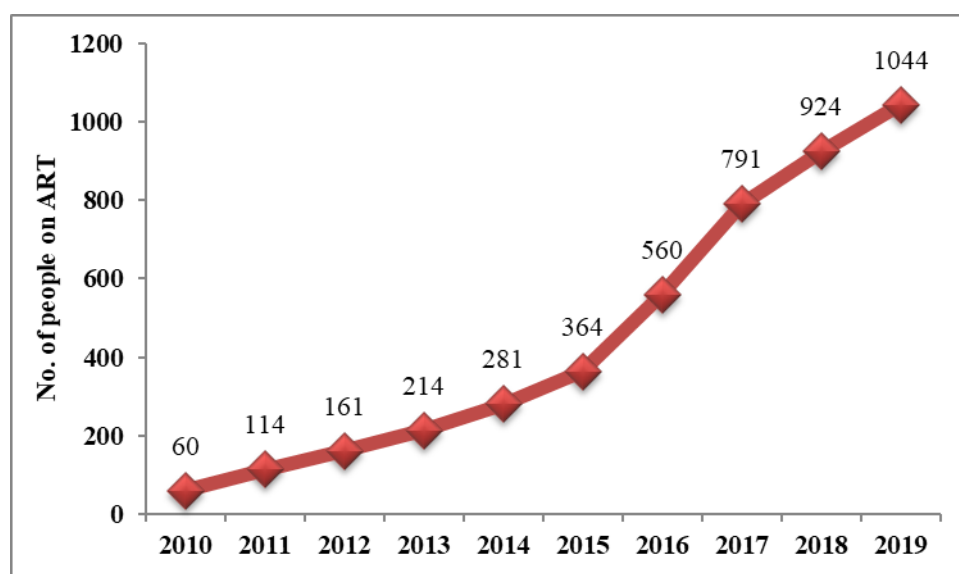


Source: <http://aidsinfo.unaids.org>



Figure 08 shows, ART scale up which has increased from 60 in year 2010 to 1044 in year 2019.

**Figure 08: ART Scale Up, 2010-2019**



Source: <http://aidsinfo.unaids.org> & SAARC Epidemiological response on HIV/AIDS-2019

#### **Achievements\*:**

- ❖ Provided continuous technical support to ANPASH in programme implementation, monitoring and resource mobilization.
- ❖ Availled technical expertise to revise and finalize National HIV Testing Services guideline.
- ❖ Allocated technical support to develop hepatitis C testing and treatment guidelines, and facilitated training of clinicians on hepatitis C management.
- ❖ Put forward technical assistance to develop policy to address stigma and discrimination in healthcare settings.
- ❖ Extended further technical assistance to develop the first National Strategic plan on Hepatitis 2017–2021.

#### **Programme risks and challenges\*:**

- ❖ Limited availability of skilled health staff to support PLHIV.
- ❖ Low awareness of HIV among general and key populations, cultural barriers to disseminating information and scaling up prevention.

- ❖ Stigma towards the disease among the general population and health workers, impeding access to health facilities for testing and treatment.
- ❖ Lack of HIV testing and counseling services and anti-retroviral therapy services in all provinces.

**Way forward\*:**

- ❖ Increase access to HIV and hepatitis testing and treatment.
- ❖ Scale up evidence-based prevention, including Opioid Substitution Therapy (OST).
- ❖ Update guidelines, keeping in line with global guidance.
- ❖ Monitor patients on ART.
- ❖ Strengthen TB/HIV collaborative activities.
- ❖ Facilitate resource mobilization.

*Source: <http://www.emro.who.int/afg/programmes/hiv.html>*

## AFGHANISTAN

Populations(mid-year)	38 Million (WHO Global Tuberculosis Report-2020)		
<b>EPIDEMIC ESTIMATES</b>	<b>2010</b>	<b>2015</b>	<b>2019</b>
<b>New HIV infections</b>			
New HIV infections (all ages)	700 (<500-1800)	1100 (<500-3700)	1500 (<500-5500)
New HIV infections (0-14)	<100 (<100-<200)	<100 (<100-<500)	<200 (<100-<500)
New HIV infections (Women, 15+)	<200 (<100-<500)	<500 (<100-970)	<500 (<200-1400)
New HIV infections (Men, 15+)	<500 (<200-1200)	730 (<500-2600)	1000 (<500-3700)
<b>HIV Incidence per 1000 populations</b>	<b>0.03 (0.01-0.06)</b>	<b>0.03 (0.01-0.11)</b>	<b>0.04 (0.01-0.15)</b>
<b>AIDS related deaths</b>			
AIDS related deaths (All ages)	<500 (<200-590)	<500 (<200-980)	<500 (<200-1400)
AIDS related deaths (0-14)	<100 (<100-<100)	<100 (<100-<200)	<100 (<100-<500)
AIDS related deaths (Women, 15+)	<100 (<100-<200)	<100 (<100-<500)	<200 (<100-<500)
AIDS related deaths (Men, 15+)	<200 (<100-<500)	<500 (<100-590)	<500 (<100-860)
<b>People living with HIV</b>			
People living with HIV (All ages)	4600 (2100-11000)	7600 (3400-21000)	11000 (4300-38000)
People living with HIV (0-14)	<500 (<200-600)	<500 (<200-960)	<500 (<500-1400)
People living with HIV (Women, 15+)	1200 (600-2900)	2100 (950-5800)	3000 (1200-10000)
People living with HIV (Men, 15+)	3100 (1400-7400)	5200 (2300-15000)	7400 (2900-26000)
<b>HIV Prevalence (15-49)</b>	<0.1 (<0.1-<0.1)	<0.1 (<0.1-0.1)	<0.1 (<0.1-0.2)
<b>HIV Testing and treatment cascade (90-90-90)</b>	<b>People living with HIV who know their HIV Status</b>	<b>People living with HIV who are on Treatment</b>	<b>People living with HIV who are virally suppressed</b>
All ages	27% (11-92%)	10% (4-33%) 1044	NA
Children (0-14)	34% (15-100%)	12% (5-36%) 60	NA
Women (15+)	21% (9-73%)	10% (4-33%) 294	NA
Men (15+)	28% (11-100%)	9% (4-33%) 690	NA
<b>Elimination of Mother to child transmission</b>		<b>2010</b>	<b>2019</b>
Percentage of pregnant women living with HIV accessing antiretroviral medicines		2% (1-5%)	9% (4-30%)
Final vertical transmission rate including during breastfeeding		45% (41-49%)	43% (36-48%)
Early infant diagnosis		NA-	4.3% (1.4-11.2%)
<b>HIV COMORBIDITIES</b>			
Estimated number of incident TB cases among people living with HIV (2018)	320 (120-640)		
People living with HIV who started TB Preventive therapy (2018)	NA		
Cervical cancer screening of women living with HIV	NA		
People co infected with HIV and hepatitis B virus receiving combined treatment (2018)	2.17%		

People co infected with HIV and hepatitis C virus starting hepatitis C treatment	NA
<b>HIV PREVENTION</b>	
Adults aged 15+ years with unsuppressed viral load	NA
Knowledge of HIV prevention among young people aged 15-24 years (2015)	
Women	1%
Men	6.30%
Condom use at last sex with a non-marital, non-cohabiting partner	
Women	NA
Men	NA
Women aged 15-49 who have their demand for family planning satisfied with modern methods (2015)	42.2%
Men aged 15-49 who are circumcised (2015)	Not applicable
Voluntary medical male circumcisions performed according to national standards	Not applicable
People who received PrEP at least once during the reporting period	NA
<b>Harm reduction</b>	
- Use of sterile injecting equipment at last injection	NA
-Needles and syringes distributed per person who injects (2019)	112
-Coverage of opioid substitution therapy (2019)	4.8%
-Naloxone available (2019)	Yes
- Safe injection rooms available (2019)	No
<b>Laws and policies</b>	
Laws criminalizing the transmission of, nondisclosure of or exposure to HIV transmission	No
Criminalization of sex work among consenting adults	Any criminalization or punitive regulations of sex work
Criminalization of same-sex sexual acts	Yes, Death penalty
Drug use or possession for personal use is an Offence	possession of drugs for personal use or drug use or consumption are not punished by laws or regulations
Criminalization of transgender people	Neither criminalized nor prosecuted
Laws or policies restricting the entry, stay and residence of people living with HIV	No
Parental consent for adolescents to access HIV testing	No
Spousal consent for married women to access sexual and reproductive health services	NA
Mandatory HIV testing for marriage, work or residence permits or for certain groups	No
<b>KEY POPULATIONS</b>	
<b>SEX WORKERS</b>	
Estimated size of population*	11000
HIV prevalence	NA
Know their HIV status	NA
Antiretroviral therapy coverage	NA
Condom use	NA
Coverage of HIV prevention programmes	NA
Avoidance of services due to stigma and discrimination	NA
<b>PEOPLE WHO INJECT DRUGS</b>	

Estimated size of population*	26000
HIV prevalence	NA
Know their HIV status	NA
Antiretroviral therapy coverage	NA
Condom use	NA
Coverage of HIV prevention programmes	NA
Avoidance of services due to stigma and discrimination	NA
<b>GAY MEN AND OTHER MEN WHO HAVE SEX WITH MEN</b>	
Estimated size of population*	10000
HIV prevalence	NA
Know their HIV status	NA
Antiretroviral therapy coverage	NA
Condom use	NA
Coverage of HIV prevention programmes	NA
Avoidance of services due to stigma and discrimination	NA
<b>TRANSGENDER PEOPLE</b>	
Estimated size of population	NA
HIV prevalence	NA
Know their HIV status	NA
Antiretroviral therapy coverage	NA
Condom use	NA
Coverage of HIV prevention programmes	NA
Avoidance of services due to stigma and discrimination	NA
<b>PRISONERS</b>	
Estimated size of population*	2800
HIV prevalence	NA
Know their HIV status	NA
Antiretroviral therapy coverage	NA
Condom use	NA
Coverage of HIV prevention programmes	NA
Avoidance of services due to stigma and discrimination	NA

NA: Not Available

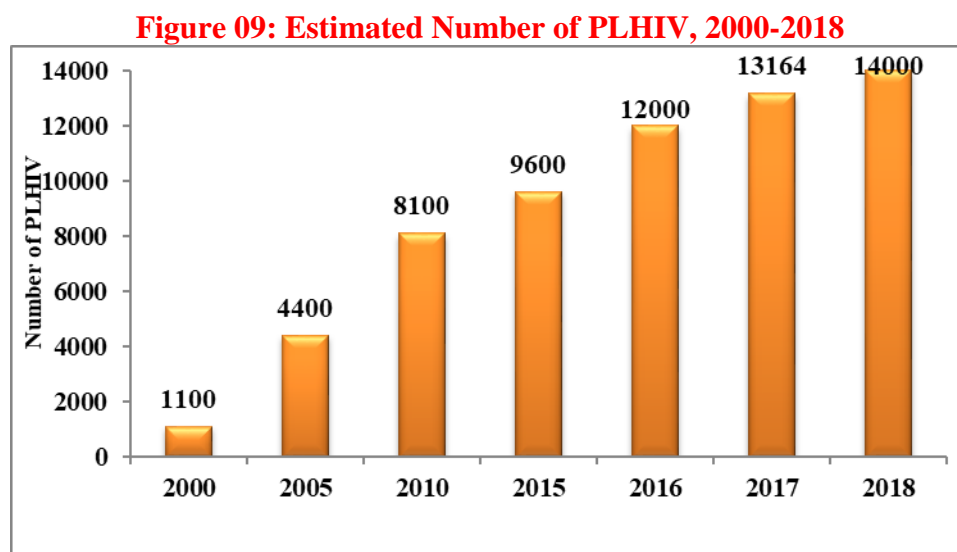
Source: UNAIDS Data 2020, \* <http://aidsinfo.unaids.org>

## BANGLADESH

Bangladesh is a relatively small coastal country in South Asia. It is bordered by India on all sides, Burma (Myanmar) on the southeast and the Bay of Bengal to its south. With a population of around 163 million (WHO Global Tuberculosis Report -2020), it is one of the most densely populated countries in the world, with the highest densities occurring in and around the capital city of Dhaka.

### Overview of the HIV/AIDS Epidemic

In Bangladesh, there were an estimated 14000 (12000-160000) PLHIV in 2018 (Figure 09), with an adult (15–49 years) HIV prevalence of <0.1% (<0.1-<0.1%). This includes around less than 500 Children Living with HIV (CLHIV, 0-14) accounting for 3.5% of the total PLHIV estimates. There were 4800 (7600-9900) women living with HIV (15+ years) constituting around 34% of the total estimated PLHIV. There were 1600 (1400-1800) new HIV infections in 2018. There were 580 (<500-680) AIDS-related deaths in the year 2018. HIV incidence was estimated at 0.01 per 1,000 populations in 2018.

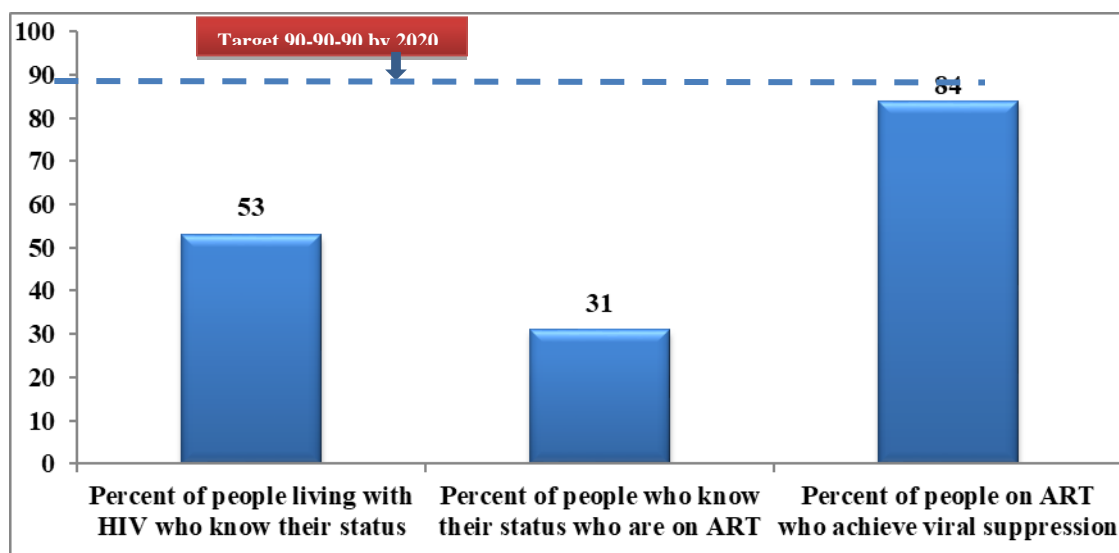


Source: SAARC Epidemiological Response on HIV/AIDS-2019

Figure 10 shows treatment cascade (90-90-90) in Bangladesh. In year 2019 there were 53 Percent of people living with HIV who know their status and 31 Percent of people who know their status

who are on ART. 84 Percent of people were on ART who achieve viral suppression in the year 2019.

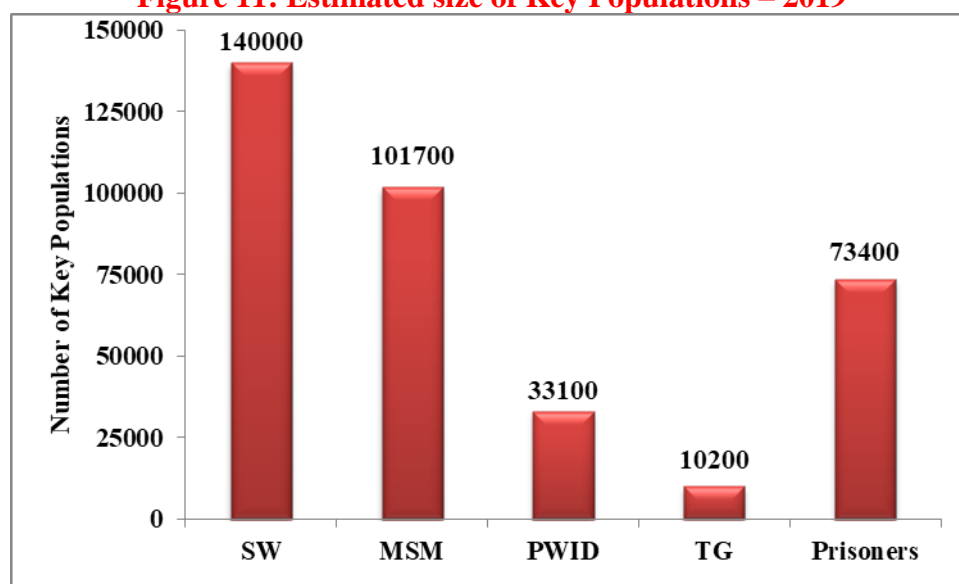
**Figure 10: Treatment Cascade (90-90-90) -2019**



Source: Data Sent by NASP Bangladesh-2020

The estimated size key population in year 2019 were 140000 in SW, 101700 in MSM, 33100 in PWID, 10200 in transgender and 73400 in prisoners (Figure 11).

**Figure 11: Estimated size of Key Populations – 2019**

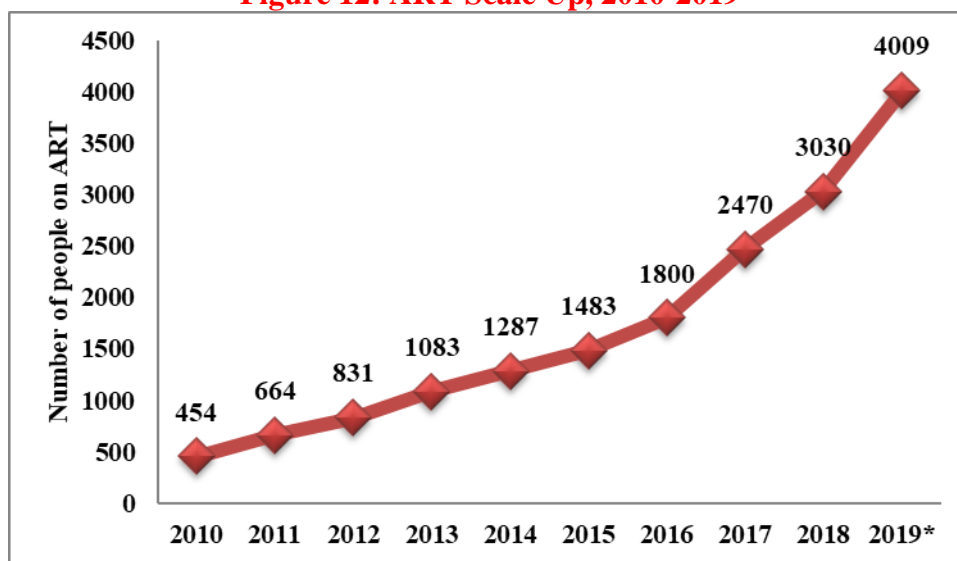


Source: <http://aidsinfo.unaids.org/data sheet 2019>



Figure 12 shows the scaling up of number of people on ART from 454 in 2010 to 4009 in 2019.

**Figure 12: ART Scale Up, 2010-2019**



Source: SAARC Epidemiological response on HIV/AIDS-2019, \* data sent by NASP Bangladesh-2020

### **Challenges\*:**

- ❖ Increasing the coverage of targeted interventions for sex workers, males who have sex with males (MSM), transgender women (*hijra*) and people who inject drugs.
- ❖ Sustaining the targeted interventions irrespective of donor support
- ❖ Increasing HIV testing to reach the first 90 targets
- ❖ Addressing co-infections with hepatitis C
- ❖ Ensuring social safety nets and stronger legal support for PLHIV and key populations
- ❖ Planning interventions in the prison setting
- ❖ Start prevention program with Migrants

### **Major Planned Activities\*:**

#### **Treatment, care & support (TCS) for people living with HIV (PLHIV):**

- ❖ Strengthen and expand ART centers as per the National Strategic Plan for HIV
- ❖ Organize mass campaign at all level to create demand for HIV Testing Services (HTS) & ART and to sensitize the all population
- ❖ Differentiated HIV testing for all population

- ❖ Facilitate linkage, enrolment & retention of people living with HIV in chronic HIV care
- ❖ Provide treatment and nutrition support to people living with HIV, home based care, burial support and home based medicine support by messenger in the COVID-19 situation.
- ❖ Strengthen hospital authorities to ART monitoring
- ❖ Strengthen the capacity of the private health sectors.

### **Comprehensive HIV Prevention Program for Key Populations (KPs)**

- ❖ Provide HIV prevention services for key populations to help reach the 90-90-90 targets by increasing access to and utilization of testing, treatment and viral load monitoring and including the implementation of community led models
- ❖ Strengthen linkage to public and private referral sites to increase access to health services
- ❖ Continue prevention services and peer led approaches through sustainable and innovative approaches (eg. selling of condoms, engaging key populations in entrepreneur ventures, maximizing the benefits under the social safety nets, etc.)
- ❖ Continue and expand the provision of basic services including the management of STIs; addressing gender based violence; conducting behavior change communication (BCC) activities; managing TB cases; ensuring adherence to medications for TB, HIV and STIs; implementing interventions with most at risk adolescents and female partners of key populations; needle-syringe exchange program; oral substitution therapy; etc.

### **Help CBOs of KPs and PLHIV sustain so they may help identify their needs:**

- ❖ Work with KP and PLHIV Networks and Forums to strengthen their governance systems
- ❖ Support innovations for sustainability beyond donor support
- ❖ Engage the Networks and Forums in various discussions and as members of Committees and Working Groups

**Continue and expand services for prevention of mother to child transmission (PMTCT):**

- ❖ Expand PMTCT in geographically prioritized sites and ensure quality and better monitoring
- ❖ Expand early infant diagnostic facilities

**Generate new evidence for better planning:**

- ❖ Conduct regular serological and behavioral surveillances
- ❖ Start STI surveillance at regular intervals
- ❖ Planning TB-HIV surveillance
- ❖ Ensure the Investment Case is updates regularly
- ❖ Based on the evidence regularly update all national level strategic plans, guidelines, modules and manuals

**New initiatives/ Best practices\*:**

- ❖ Viral load testing by using GeneXpert machine for PLHIV in the all ART centers
- ❖ Community based and community led HTS
- ❖ Linkage to ART and ART adherence: Comprehensive-Drop-in-Centers and engaging Case Workers
- ❖ STI and HIV prevention Service Package for Brothel Based Female Sex Workers and their clients
- ❖ STI and HIV prevention Service Package for MSM/MSW/TG and their clients;
- ❖ Harm reduction Service package for male and female PWID through NSP and OST (in geographically prioritized districts)

Source: \* data sent by NASP Bangladesh-2020

## **BANGLADESH**

Populations(mid-year)		163 million (WHO Global Tuberculosis Report -2020)	
EPIDEMIC ESTIMATES	2010	2015	2018
New HIV infections			
New HIV infections (all ages)	1000 (900-1200)	1400 (1200-1500)	1600 (1400-1800)
New HIV infections (0-14)	<100 (<100-<100)	<100 (<100-<100)	<100 (<100-<100)
New HIV infections (Women, 15+)	<500 (<500-<500)	<500 (<500-<500)	<500 (<500-<500)
New HIV infections (Men, 15+)	580 (510-660)	870 (770-970)	1000 (930-1200)
HIV Incidence per 1000 populations	0.01 (<0.01-<0.01)	0.01 (<0.01-<0.01)	0.01 (<0.01-<0.01)
AIDS related deaths			
AIDS related deaths (All ages)	<500 (<500-<500)	<500 (<500-<540)	580 (<500-680)
AIDS related deaths (0-14)	<100 (<100-<100)	<100 (<100-<100)	<100 (<100-<100)
AIDS related deaths (Women, 15+)	<100 (<100-<100)	<200 (<200-<200)	<500 (<200-<500)
AIDS related deaths (Men, 15+)	<200 (<200-<500)	<500 (<500-<500)	<500 (<500-<500)
People living with HIV			
People living with HIV (All ages)	7700 (6600-8800)	11000 (9800-13000)	14000 (12000-160000)
People living with HIV (0-14)	<500 (<200-<500)	<500 (<500-<500)	<500 (<500-<500)
People living with HIV (Women, 15+)	2600 (2300-3000)	4000 (3500-4500)	4800 (4200-5400)
People living with HIV (Men, 15+)	4800 (4200-5600)	7000 (6000-8000)	8700 (7600-9900)
HIV Prevalence (15-49)	<0.1 (<0.1-<0.1)	<0.1 (<0.1-<0.1)	<0.1 (<0.1-<0.1)
HIV Testing and treatment cascade (90-90-90)*	People living with HIV who know their HIV Status	People living with HIV who are on Treatment	People living with HIV who are virally suppressed
All ages	53%	31%	85%
Children (0-14)	71%	NA	NA
Women (15+)	36%	NA	NA
Men (15+)	56%	NA	NA
Elimination of Mother to child transmission*		2010	2019
Percentage of pregnant women living with HIV accessing antiretroviral medicines		18% (15-22%)	82.86%
Early infant diagnosis		2.9% (2.4-3.6%)	0: Positive (total test 27)
Pregnant women needing ARV for PMTCT			35
Pregnant women who received ARV for PMTCT			29
HIV COMORBIDITIES			
Estimated number of incident TB cases among people living with HIV (2017)		540 (270-910)	
People living with HIV who started TB Preventive therapy (2017)		NA	
Cervical cancer screening of women living with HIV		NA	
People co infected with HIV and hepatitis B virus receiving combined treatment (2018)		NA	
People co infected with HIV and hepatitis C virus starting hepatitis C treatment)		NA	
HIV PREVENTION			

Adults aged 15+ years with unsuppressed viral load	NA
Knowledge of HIV prevention among young people aged 15-24 years (2014)	
Women	13%
Men	NA
Condom use at last sex with a non-marital, non-cohabiting partner	
Women	NA
Men	NA
Women aged 15-49 who have their demand for family planning satisfied with modern methods (2015)	73%
Men aged 15-49 who are circumcised(2015)	Not applicable
Male circumcisions performed according to national standards	Not applicable
People who received PrEP at least once during the reporting period	NA
<b>Harm reduction</b>	
- Use of sterile injecting equipment at last injection (2015)	83.90%
-Needles and syringes distributed per person who injects (2018)	126
-Coverage of opioid substitution therapy (2018)	3.1%
-Naloxone available (2019)	No
- Safe injection rooms available (2019)	No
<b>Laws and policies</b>	
<b>2018</b>	
Laws criminalizing the transmission of, nondisclosure of or exposure to HIV transmission	No
Criminalization of sex work among consenting adults	Any criminalization or punitive regulations of sex work
Criminalization of same-sex sexual acts	Yes, imprisonment (14 years life)
Drug use or possession for personal use is an Offence	Possession of drugs for personal use or drug use and/or consumption are specified as criminal offences
Criminalization of transgender people	Neither criminalized nor prosecuted
Laws or policies restricting the entry, stay and residence of people living with HIV	No
Parental consent for adolescents to access HIV testing	Yes, for adolescents younger than 18 years
Spousal consent for married women to access sexual and reproductive health services	No
Mandatory HIV testing for marriage, work or residence permits or for certain groups	No
<b>KEY POPULATIONS</b>	
<b>SEX WORKERS</b>	
Estimated size of population	NA
HIV prevalence	NA
Know their HIV status	NA
Antiretroviral therapy coverage	NA
Condom use	NA
Coverage of HIV prevention programmes	NA
Avoidance of services due to stigma and discrimination	NA
<b>PEOPLE WHO INJECT DRUGS</b>	
Estimated size of population	NA

HIV prevalence	NA
Know their HIV status	NA
Antiretroviral therapy coverage	NA
Condom use	NA
Coverage of HIV prevention programmes	NA
Avoidance of services due to stigma and discrimination	NA
<b>GAY MEN AND OTHER MEN WHO HAVE SEX WITH MEN</b>	
Estimated size of population	
HIV prevalence	NA
Know their HIV status	NA
Antiretroviral therapy coverage	NA
Condom use	NA
Coverage of HIV prevention programmes	NA
Avoidance of services due to stigma and discrimination	NA
<b>TRANSGENDER PEOPLE</b>	
Estimated size of population	NA
HIV prevalence	NA
Know their HIV status	NA
Antiretroviral therapy coverage	NA
Condom use	NA
Coverage of HIV prevention programmes	NA
Avoidance of services due to stigma and discrimination	NA
<b>PRISONERS</b>	
Estimated size of population	NA
HIV prevalence	NA
Know their HIV status	NA
Antiretroviral therapy coverage	NA
Condom use	NA
Coverage of HIV prevention programmes	NA
Avoidance of services due to stigma and discrimination	NA

NA: Not Available

Source: UNAIDS Data 2019, \*Data sent by NASP Bangladesh-2020

## BHUTAN

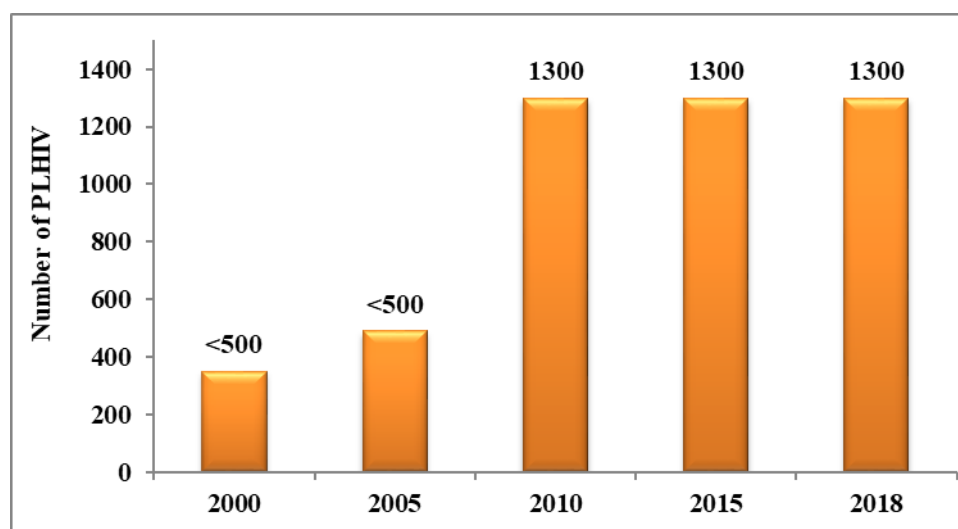
Bhutan is a land locked country situated in the Himalayas, it has border with China and India. Bhutan has an area of 38,394 sq km and the altitude varying from 180 m to 7,550 m above sea level. The total population of Bhutan is 760 000 (WHO Global Report-2020). The country is divided into 20 districts for administrative purposes.

The Himalayan Kingdom of Bhutan, though isolated geographically, is not impervious to HIV/AIDS. Increasing cross-border migration and international travel, combined with behavioral risk factors of the population, Bhutan could face rapid spread of HIV. As the epidemic is at a very early stage, there is still time for vigorous action to stop its spread.

### Overview of the HIV/AIDS Epidemic:

In Bhutan, there were an estimated 1300 (670-2700) PLHIV in 2018 (Figure 13), with an adult (15–49 years) HIV prevalence of <0.3% (0.1-0.5%). There were less than 500. (<500-750) women living with HIV (15+ years) constituting around 38% of the total estimated PLHIV. There were <100 (<100-<500) new HIV infections in 2018. There were <100 (<100-<200) AIDS-related deaths in the year 2018. HIV incidence was estimated at 0.11 per 1,000 populations in 2018.

**Figure 13 Trend of Estimated PLHIV from 2000 to 2018.**

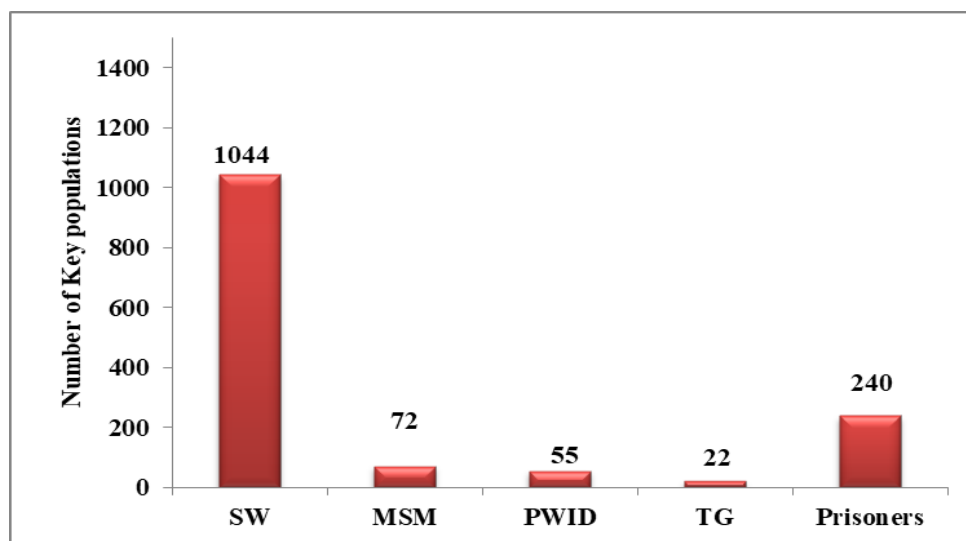


Source: SAARC Epidemiological Response on HIV/AIDS-2019



Figure 14 shows the estimated size of key populations in Bhutan. In 2018, there were 1044 Sex Worker (SW), 72 Men who have sex with men (MSM), 55 People who inject drugs (PWID), 22 Transgender people and 240 prisoners.

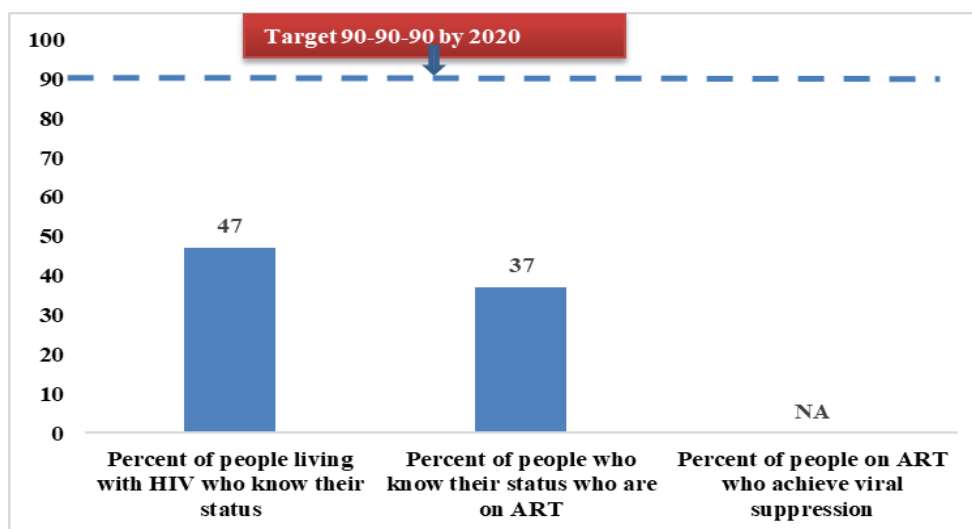
**Figure 14: Estimated size of Key Populations- 2018**



Source: SAARC Epidemiological Response on HIV/AIDS-2019

Figure 15 shows treatment cascade (90-90-90) in Bhutan. In year 2018 there were 47 Percent of people living with HIV who knew their status and 37 Percent of people who know their status are on ART.

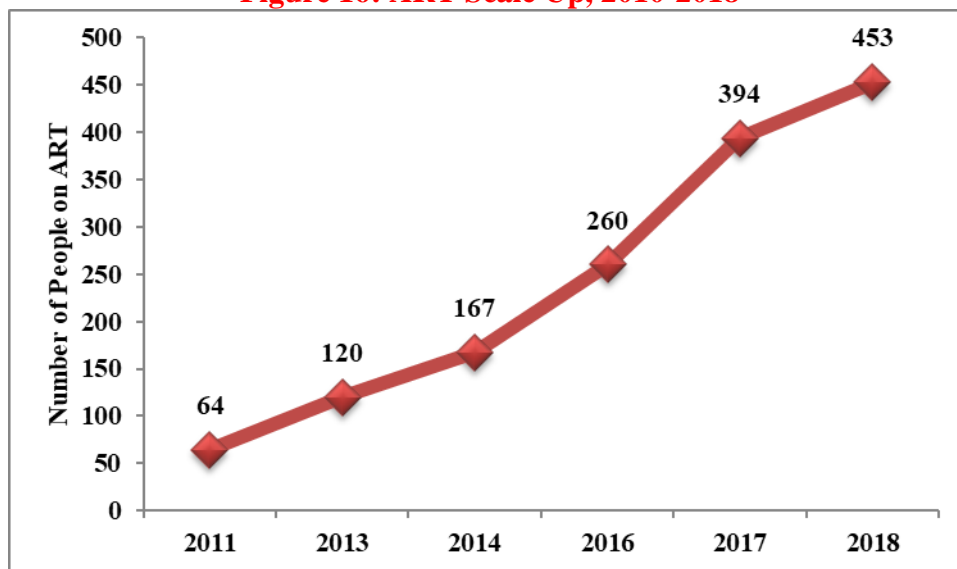
**Figure 15: Treatment Cascade -2018**



Source: SAARC Epidemiological Response on HIV/AIDS-2019

ART scale up has been increased gradually in Bhutan. From figure 16, it has been observed that 453 number of ART in 2018 which is increased from 64 in 2011.

**Figure 16: ART Scale Up, 2010-2018**



*Source: SAARC Epidemiological response on HIV/AIDS-2019*

## **BHUTAN**

Populations(mid-year)	760000 (WHO Global Tuberculosis Report-2020)		
EPIDEMIC ESTIMATES	2010	2015	2018
New HIV infections			
New HIV infections (all ages)	<200 (<100-<500)	<100 (<100-<200)	<100 (<100-<500)
New HIV infections (0-14)	NA	NA	NA
New HIV infections (Women, 15+)	<100 (<100-<100)	<100 (<100-<100)	<100 (<100-<100)
New HIV infections (Men, 15+)	<100 (<100-<200)	<100 (<100-<200)	<100 (<100-<200)
HIV Incidence per 1000 populations	0.17 (0.08-0.38)	0.13 (0.05-0.28)	0.11 (0.04-0.3)
AIDS related deaths			
AIDS related deaths (All ages)	<100 (<100-<500)	<100 (<100-<500)	<100 (<100-<200)
AIDS related deaths (0-14)	NA	NA	NA
AIDS related deaths (Women, 15+)	<100 (<100-<100)	<100 (<100-<100)	<100 (<100-<100)
AIDS related deaths (Men, 15+)	<100 (<100-<200)	<100 (<100-<200)	<100 (<100-<200)
People living with HIV			
People living with HIV (All ages)	1300 (590-2700)	1300 (670-2700)	1300 (700-2700)
People living with HIV (0-14)	NA	NA	NA
People living with HIV (Women, 15+)	<500 (<200-670)	<500 (<200-700)	<500 (<500-750)
People living with HIV (Men, 15+)	950 (<500-2000)	920 (<500-1900)	900 (<500-1900)
HIV Prevalence (15-49)	0.3 (0.1-0.6)	0.3 (0.1-0.6)	0.3 (0.1-0.5)
HIV Testing and Treatment Cascade (90-90-90)	People living with HIV who know their HIV Status	People living with HIV who are on Treatment	People living with HIV who are virally suppressed
All ages	47% (25->95%)	37% (20-78%) 480	NA
Children (0-14)	NA	NA	NA
Women (15+)	73% (41->95%)	57% 32->95%) 220	NA
Men (15+)	35% (18-75%)	26% (13-57%) 230	NA
Elimination of Mother to Child Transmission		2010	2018
Percentage of pregnant women living with HIV accessing antiretroviral medicines		NA	
Early infant diagnosis		NA	
HIV COMORBIDITIES			
Estimated number of incident TB cases among people living with HIV (2017)		6 (4-9)	
People living with HIV who started TB Preventive therapy (2017)		NA	
Cervical cancer screening of women living with HIV		NA	
People co-infected with HIV and hepatitis B virus receiving combined treatment (2018)		NA	
People co-infected with HIV and hepatitis C virus starting hepatitis C treatment)		NA	
HIV PREVENTION			

Adults aged 15+ years with unsuppressed viral load	NA
Knowledge of HIV prevention among young people aged 15-24 years (2014)	
Women	NA
Men	NA
Condom use at last sex with a non-marital, non-cohabiting partner	
Women	NA
Men	NA
Women aged 15-49 who have their demand for family planning satisfied with modern methods	NA
Men aged 15-49 who are circumcised	Not applicable
Male circumcisions performed according to national standards	Not applicable
People who received PrEP at least once during the reporting period	NA
<b>Harm reduction</b>	
- Use of sterile injecting equipment at last injection	NA
-Needles and syringes distributed per person who injects	NA
-Coverage of opioid substitution therapy	NA
-Naloxone available (2019)	NA
- Safe injection rooms available (2019)	NA
<b>Laws and policies</b>	<b>2018</b>
Laws criminalizing the transmission of, nondisclosure of or exposure to HIV transmission	NA
Criminalization of sex work among consenting adults	NA
Criminalization of same-sex sexual acts	Yes, imprisonment (14 years life)
Drug use or possession for personal use is an Offence	NA
Criminalization of transgender people	NA
Laws or policies restricting the entry, stay and residence of people living with HIV	No
Parental consent for adolescents to access HIV testing	NA
Spousal consent for married women to access sexual and reproductive health services	NA
Mandatory HIV testing for marriage, work or residence permits or for certain groups	NA
<b>KEY POPULATIONS</b>	
<b>SEX WORKERS</b>	
Estimated size of population	1044
HIV prevalence	8
Know their HIV status	225
Antiretroviral therapy coverage	10
Condom use	10
Coverage of HIV prevention programmes	946
Avoidance of services due to stigma and discrimination	0
<b>PEOPLE WHO INJECT DRUGS</b>	
Estimated size of population	55
HIV prevalence	0
Know their HIV status	0

Antiretroviral therapy coverage	0
Condom use	1537
Coverage of HIV prevention programmes	94
Avoidance of services due to stigma and discrimination	0
<b>GAY MEN AND OTHER MEN WHO HAVE SEX WITH MEN</b>	
Estimated size of population	72
HIV prevalence	0
Know their HIV status	25
Antiretroviral therapy coverage	0
Condom use	447
Coverage of HIV prevention programmes	248
Avoidance of services due to stigma and discrimination	0
<b>TRANSGENDER PEOPLE</b>	
Estimated size of population	22
HIV prevalence	0
Know their HIV status	1
Antiretroviral therapy coverage	0
Condom use	200
Coverage of HIV prevention programmes	5
Avoidance of services due to stigma and discrimination	0
<b>PRISONERS</b>	
Estimated size of population	240
HIV prevalence	1
Know their HIV status	0%
Antiretroviral therapy coverage	0
Condom use	250
Coverage of HIV prevention programmes	96
Avoidance of services due to stigma and discrimination	0

*Source: SAARC Epidemiological Response on HIV/AIDS-2019*

*NA: Not Available*

*Note: HIV Epidemiological estimates were not available at the time of publication of SAARC Epidemiological Response on HIV/AIDS-2020*

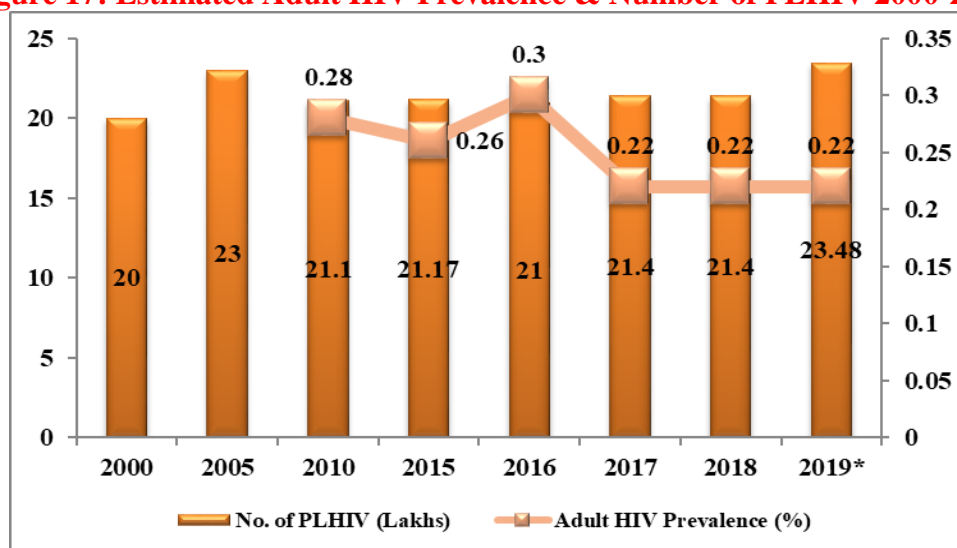
## INDIA

India is the largest country in South Asia. Geographically it is the seventh largest and second most populous country in the world. Its estimated total population was 1366 million (WHO Global Tuberculosis Report-2020). Bounded by the Indian Ocean on the south, the Arabian Sea on the south-west, and the Bay of Bengal on the south-east, it shares land borders with Pakistan to the west; China, Nepal, and Bhutan to the north-east; and Burma and Bangladesh to the east.

### Overview of the HIV/AIDS Epidemic:

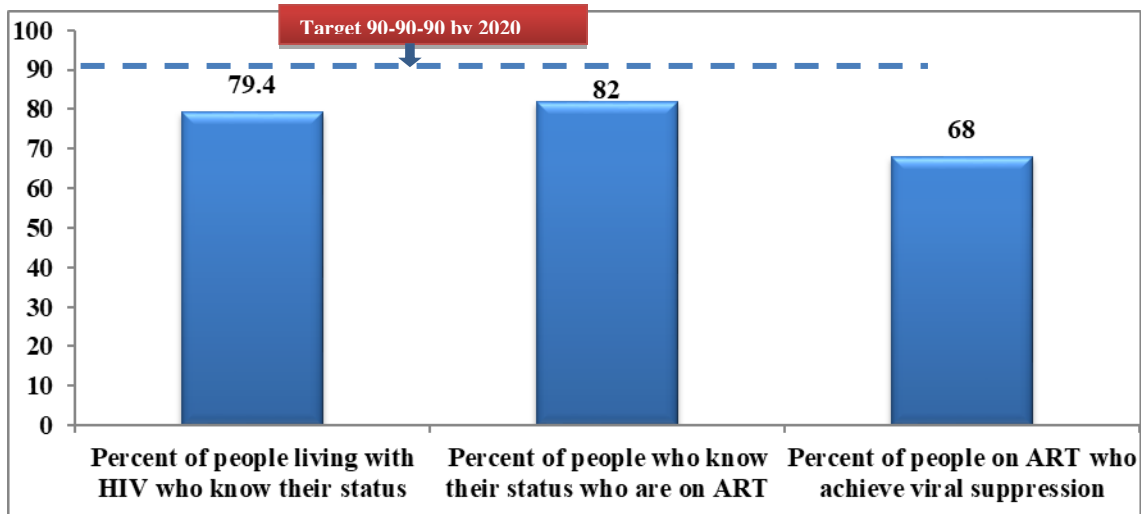
In India, there were estimated 23.49 lakh (17.98 lakh – 30.98 lakh) PLHIV in 2019, with an adult (15–49 years) HIV prevalence of 0.22% (0.17–0.29%) as shown in figure 17. This includes around 79 thousand CLHIV accounting for 3.4% of the total PLHIV estimates. There were 9.94 lakh women living with HIV (15+ years) constituting around 44% of the total estimated 15+ years PLHIV. There were 69.22 thousand (37.03 thousand – 121.50 thousand) new HIV infections in 2019, which has declined by 37% since 2010 and by 86% since attaining the peak in 1997. There were 58.96 thousand (33.61 thousand – 102.16 thousand) AIDS-related deaths in the year 2019, which has declined by 66% since 2010 and by 78% since attaining its peak in 2005. HIV incidence was estimated at 0.05 per 1,000 uninfected populations in 2019. Around 20.52 thousand (14.98 thousand – 28.13 thousand) pregnant women were estimated to be in need of PMTCT

**Figure 17: Estimated Adult HIV Prevalence & Number of PLHIV 2000-2019**



Source: SAARC Epidemiological response on HIV/AIDS-2019, \*India HIV estimates 2019 report

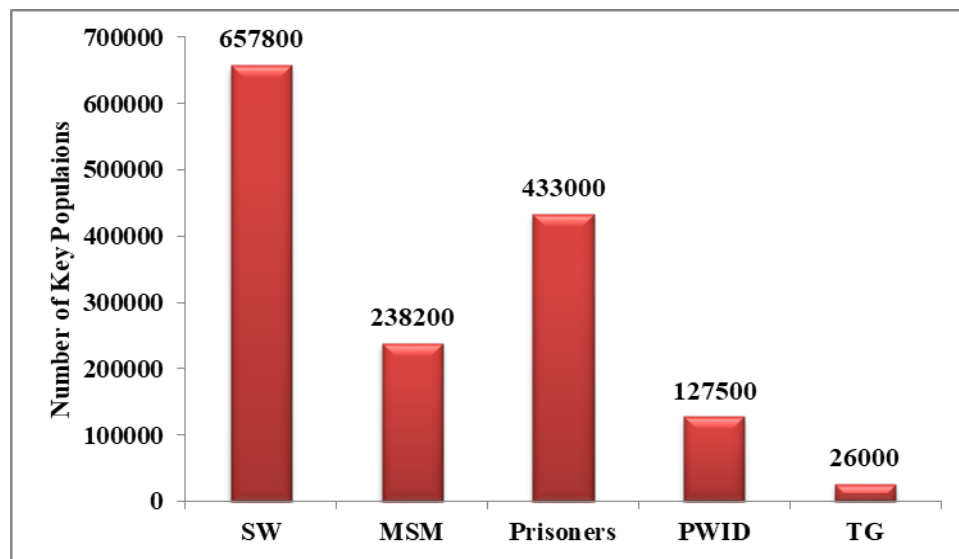
**Figure 18: Treatment Cascade (90-90-90) - 2018**



Source: SAARC Epidemiological Report on HIV/AIDS-2019

Figure 18 shows treatment cascade (90-90-90) in India. In year 2018 there were 79.4 Percent of people living with HIV who know their status, 82 Percent of people who know their status who are on ART and 68 percent of people on ART who achieve viral suppression.

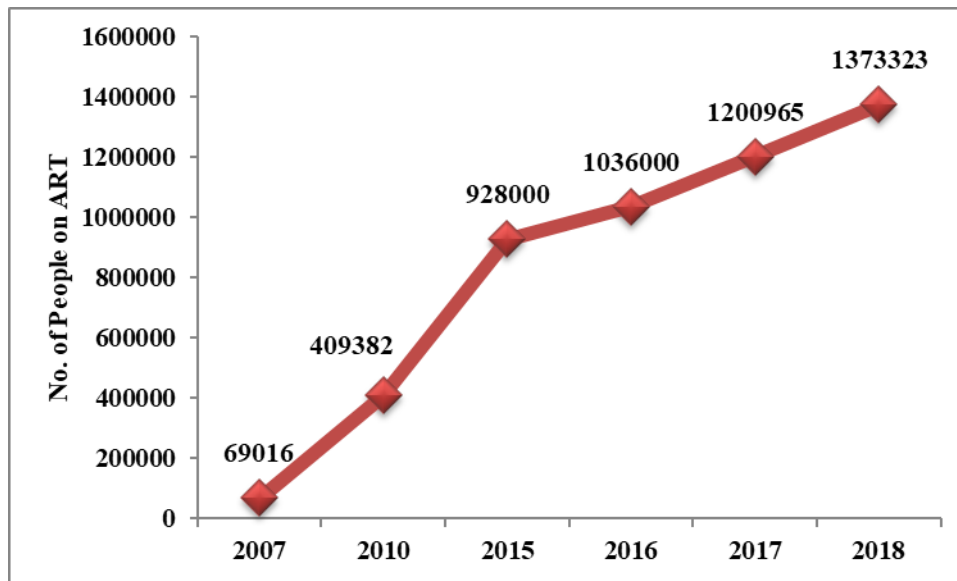
**Figure 19: Estimated size of Key Populations – 2019**



Source: <http://aidsinfo.unaids.org/data sheet-2019>

The estimated size of Key population were 657 800 in SW, 238 200 in MSM, 127 500 in PWID, 433 000 in Prisoners and 26 000 in TG (Figure 19).

**Figure 20: ART Scale Up, 2007-2018**



*Source: SAARC Epidemiological response on HIV/AIDS-2019*

Figure 20 shows, the trend of ART scale up from 2007-2018. Till 2018 there were 1 373 323 people are on ART.



## INDIA

Populations(mid-year)	1366 million (WHO Global Tuberculosis Report-2020)				
THE HIV EPIDEMIC					
New HIV infections	2005		2010		2019*
New HIV infections (all ages)	130 000 (66 000-230 000)		120 000 (60 000- 210 000)		69220 (37030-121500)
New HIV infections (0-14)	13 000 (8100-20 000)		7700 (4800-12 000)		3980 (2490-6110)
New HIV infections (women, 15+)	48 000 (23 000-87 000)		45 000 (22 000-81 000)		27580 (14450-49530)
New HIV infections (men, 15+)	71 000 (35 000-130 000)		67 000 (33 000-120 000)		65240 (34450-115510)
HIV Prevalence Rate (all ages)			0.28		0.22 (0.17-0.29)
HIV Incidence per 1000 populations	0.12 (0.06-0.22)		0.1 (0.05-0.18)		0.05 (0.03-0.09)
AIDS related deaths					
AIDS -related deaths (all ages)	240 000 (110 000-440 000)		160 000 ( 76 000-290 000)		58960 (33610-102160)
AIDS -related deaths (0-14)	11 000 (5900-19 000)		6800 (3700-12 000)		3570 (1940-5740)
AIDS -related deaths (women, 15+)	88 000 (38 000-180 000)		58 000 (25 000-120 000)		16760 (8460-31730)
AIDS -related deaths (men, 15+)	140 000 (68 000-250 000)		91 000 (45 000- 170 000)		55400 (31550-96580)
People living with HIV					
People living with HIV (all ages)	2 800 000 (2 000 000-3 900 000)		2 300 000 (1 700 000- 3 300 000)		2348860 (1 798 000-3 098 000)
People living with HIV (0-14)	1 00 000 (71 000-150 000)		88 000 (61 000-130 000)		79000 (58000-105000)
People living with HIV (women, 15+)	1 100 000 (760 000-15 000)		900 000 (650 000-1 300 000)		994000 (761000-1300000)
People living with HIV (men, 15+)	1 600 000 (11 000 000- 23 000 000)		1 300 000 (940 000- 1 900 000)		2270000 (1737000- 2997000)
KEY POPULATIONS					
	Sex worker	Gay men and other men who have sex with men	People who injects drugs	Transgender People	Prisoners
Estimated size of population	657800	238200	127500	26000	433000
HIV prevalence (%) (2017)	1.6	2.7	6.3	3.1	2.1 (HIV sentinel Surveillance 2019 among inmates in central prisoners)
Know their HIV status (%) (NIBBS 2014-2015)	68.6	64.8	49.6	67.6	NA
Antiretroviral therapy coverage (%)	NA	NA	NA	NA	NA
Condom use (%) Source: National Integrated Bio-Behavioral Surveillance	90.8	83.9	77.4	79.7	NA
Coverage of HIV prevention programmes (%) -2018	759 678	263 001	151 275	43 937	305351

Active syphilis (%) Source: NACP programme data as under Targeted Interventions	0.3	0.4	NA	NA	NA
Condom distributed to key populations enrolled in prevention programmes-2018	158 318 965	45 606 427	5 875 518	9 539 749	NA
<b>HIV testing and treatment cascade</b>	<b>All ages</b>	<b>Children (0- 14)</b>	<b>Women (15+)</b>	<b>Men (15+)</b>	
People living with HIV who know their HIV Status (%)	79.4	NA	NA	NA	NA
People living with HIV who are on Treatment (%)	82	NA	NA	NA	NA
People living with HIV who are virally suppressed (%)	68	NA	NA	NA	NA
<b>HIV COMORBIDITIES</b>					
Estimated Number of Incidence Tuberculosis cases among People Living with HIV (2016)			87 000 (56 000- 125 000)		
Proportion of people living with HIV newly enroled HIV care with active TB (2016)			3.7%		
Cervical cancer screening of women living with HIV			35%		
Proportion of people co-infected with HIV and Hepatitis B virus receiving combined treatment (2017)			NA		
Proportion of people co-infected with HIV and Hepatitis C virus starting Hepatitis C treatment (2017)			NA		
<b>HIV PREVENTION</b>					
Knowledge of HIV prevention among young people (15-24 ) Years (2015-16)			26.17%		
Condom use at last higher-risk sex (with a non-marital, non- cohabiting partner)-GAM 2018			40.30%		
Women			36.10%		
Men			40.80%		
Women aged 15-49 who have their demand for family planning satisfied with modern methods (2015-16)			NA		
Men aged 15-49 who are circumcised			NA		
Male circumcisions performed according to national standards (2017)			NA		
People on PrEP (2017)			NA		
<b>Harm Reduction</b>					
Use sterile injecting equipment act. Last injection (2015)			86.4%		
Needle and syringes distributed per person who injects (2017)			424		
Coverage of opopod substitution therapy (2017)			19.00%		
<b>Elimination of Mother to Child transmission (at the end of 2017)</b>			<b>2010</b>		<b>2018</b>
Percentage of pregnant women living with HIV accessing antiretroviral medicines			0 (0-0)		58.20%
Pregnant women needing ARV for PMTCT (India- HIV estimation -2017)			NA		22 617

Pregnant women who received ARV for PMTCT	NA	13 195
Early infant diagnosis	6 (4-9)	31.90%
ART Scale Up at the end of 2018		
Number of people receiving ART	1 273 323	
Deaths averted due to ART	NA	
Laws and Policies		
Laws Criminalizing the transmission of, nondisclosure of, or exposure to HIV transmission	No	
Criminalization of Sex work	Yes	
Criminalization of same sex sexual acts	No	
Drug use or possession for personal use is an offence	Yes, however the allows possession of a certain amount of drugs	
Criminalization of transgender people	No	
Laws or policy restricting the entry, stay and residence of people living with HIV	No	
Parental consent for adolescents to access HIV testing	Yes	
Spousal consent for married women to access sexual and reproductive health services	No	
Mandatory HIV testing for marriage, work or residence permits or for certain groups	No	
STIGMA AND DISCRIMINATION	2016	
Percentage of women and men aged 15–49 years who report discriminatory attitudes towards people living with HIV (2013)	a. 29.4 b. 35.41	
Would you buy fresh vegetables from a shopkeeper or vendor if you knew that this person had HIV? (GAM 2018)	29.40%	
Do you think children living with HIV should be able to attend school with children who are HIV negative? (GAM 2018)	35.41%	
Percentage of people living with HIV denied health services because of their HIV status in the last 12 months	NA	
Percentage of people living with HIV who reported a health-care professional told others about their HIV status without their consent	NA	

Source: SAARC Epidemiological response on HIV/AIDS-2019, \*India HIV estimates 2019 report

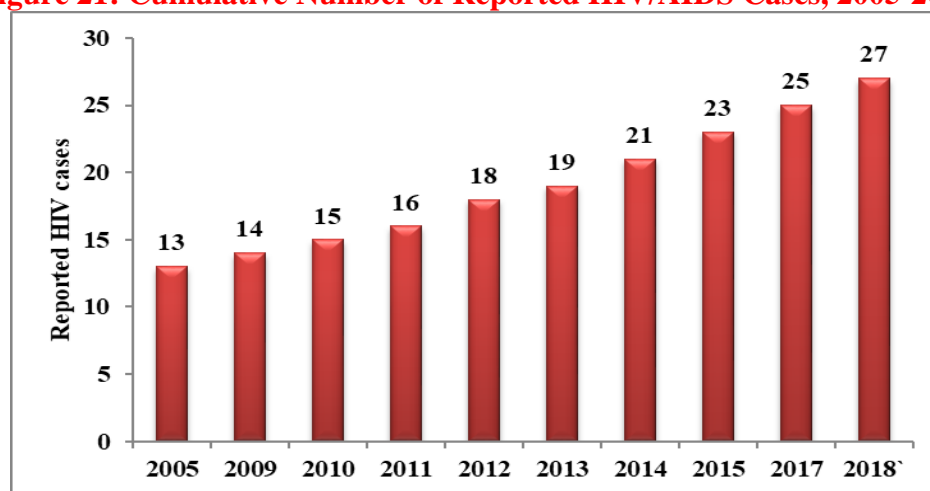
## MALDIVES

Republic of Maldives is a country formed by a number of natural atolls plus a few islands and isolated reefs which form a pattern from North to South. Maldives is situated in the Indian Ocean, close to India and Sri Lanka. It is estimated that Maldives' total population was 530 000 (WHO Global Tuberculosis Report 2020). It is located southwest of the Indian subcontinent stretching 860 km north to south and 80 – 129 km east to west. For administrative purposes, the Country has been organized into seven provinces. It consists of nearly 1,190 islands, of which around 200 are inhabited. In addition, there are around 90 uninhabited islands that have been developed as tourist resorts.

### Overview of the HIV/AIDS Epidemic

The first case of HIV in Maldives was reported in 1991. As end of 2018, cumulative number of HIV cases in the Maldives was 27.

**Figure 21: Cumulative Number of Reported HIV/AIDS Cases, 2005-2018**



Source: SAARC Epidemiological Response on HIV/AIDS-2019

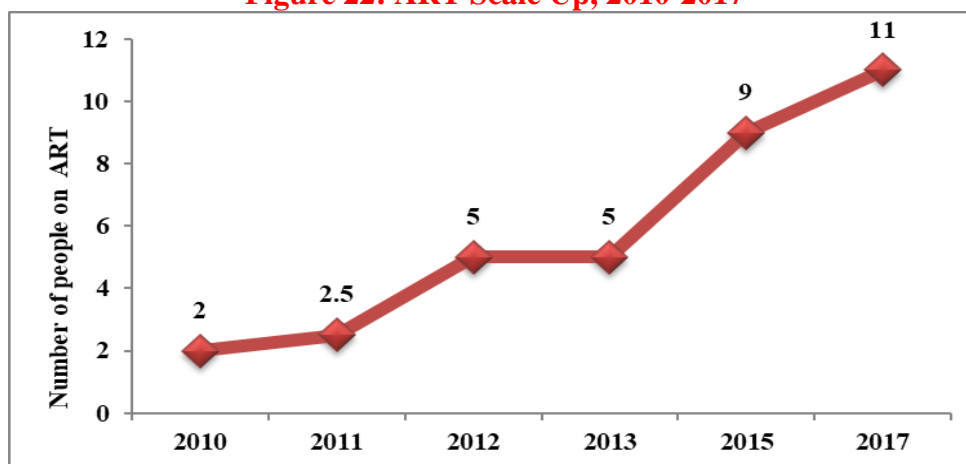
Antiretroviral services are being delivered from one center, Indira Gandhi Memorial Hospital in Male'. People testing positive for HIV are immediately enrolled in the national treatment programme, and a treating physician assigned to every client, who will look after the client, ensuring regular checkups, dispensing the ARV drugs and follow-up. The National Programme facilitates psychosocial support, and if required legal support as well. Patients on treatment, who are living away from the ART center, are asked to identify a family member who will collect the

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SAARC Epidemiological Response on HIV/AIDS-2020

drugs from the ART center and deliver the drugs to the client. This practice has been ongoing and functional ever since the ARV programme was established, and reported in previous reporting cycles. The NSP 2014-2018 notes a commitment to focus on taboo, denial and stigma of risk behaviors and people living with HIV in the next wave of advocacy, information and education activities. Figure 22 shows the ART scale up from 2010-2017.

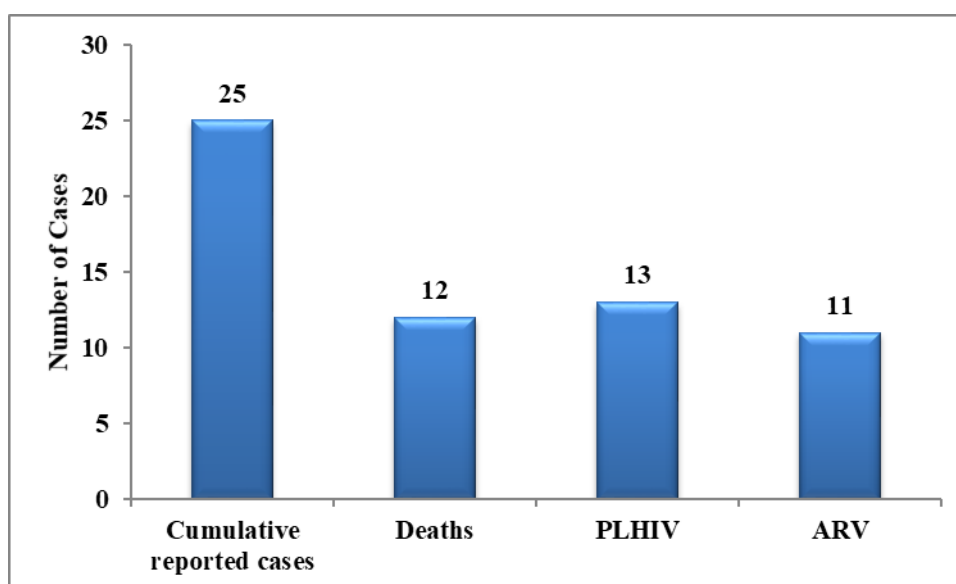
**Figure 22: ART Scale Up, 2010-2017**



Source: SAARC Epidemiological Response on HIV/AIDS-2019

As per data shown in figure 23, there were 25 cumulative PLHIV reported cases. Out of which 12 died and 13 were the cases of people living with HIV. However, 11 cases were on ARV in the year 2017.

**Figure 23: Number of PLHIV, on ARV and Deaths-2017**



Source: SAARC Epidemiological Response on HIV/AIDS-2019

# MALDIVES

Populations(mid-year)	530 000 (WHO Global Tuberculosis Report-2020)		
<b>THE HIV EPIDEMIC</b>	<b>2005</b>	<b>2010</b>	<b>2017</b>
New HIV infections	NA	NA	NA
HIV Incidence per 1000 populations	NA	NA	NA
AIDS related deaths	NA	NA	NA
People living with HIV	NA	NA	NA
<b>90-90-90</b>		<b>2016</b>	
People living with HIV who know their HIV Status		NA	NA
People living with HIV who are on Treatment		<100	>95%
Adults living with HIV who are on treatment		NA	NA
People living with HIV who are virally suppressed		NA	NA
<b>CHILDREN AND PREGNANT WOMEN</b>		<b>2010</b>	<b>2016</b>
New HIV infections—children		NA	NA
Children living with HIV who are on treatment		NA	NA
Coverage of pregnant women living with HIV accessing antiretroviral medicines		NA	NA
<b>HIV COMORBIDITIES</b>			
Estimated number of incident TB cases among people living with HIV (2015)			<100 (<100- <100)
Proportion of people living with HIV with active TB in HIV care			NA
Cervical cancer screening of women living with HIV			NA
<b>HIV PREVENTION</b>			
Knowledge of HIV prevention among young people (15-24)			35.50%
Condom use at last higher-risk sex (with a non-marital, non-cohabiting partner)			NA
Males			NA
Females			NA
Women aged 15-49 who have their demand for family planning satisfied with modern methods			NA
Men aged 15-49 who are circumcised			Not applicable
Male circumcisions performed according to national standards (2016)			Not applicable
People on PrEP (2016)			NA
<b>STIGMA AND DISCRIMINATION</b>			
People who report they would not buy vegetables from a shopkeeper living with HIV			NA
<b>POLICIES AND REGULATIONS</b>			<b>2016</b>
Community delivery of treatment			NA
Laws requiring parental consent for adolescents to access sexual and reproductive health services			NA
TRIPS flexibilities incorporated in national legislation			NA
Laws or policies restricting entry, stay and residence of people living with HIV			NA
Criminalization of transmission of, nondisclosure of, or exposure to HIV			NA
Recommended CD4 level for treatment initiation			Treat all
<b>KEY POPULATIONS</b>			
<b>SEX WORKERS</b>			

Estimated size of population	NA
HIV prevalence	NA
Know HIV status	NA
Antiretroviral therapy coverage	NA
Condom use	NA
Condoms distributed to sex workers enrolled in prevention programmes (2016)	NA
Coverage of HIV prevention programmes	NA
Avoidance of services due to stigma and discrimination	NA
<b>PEOPLE WHO INJECT DRUGS</b>	
Estimated size of population	NA
HIV prevalence	NA
Know HIV status	NA
Antiretroviral therapy coverage	NA
Condom use	NA
Clean needle use at last injection	NA
Needles and syringes distributed per person who injects (2016)	NA
Coverage of HIV prevention programmes	NA
Coverage of opioid substitution therapy (2016)	NA
Naloxone available (2016)	NA
Safe injection rooms available (2016)	NA
Avoidance of services due to stigma and discrimination	NA
<b>GAY MEN AND OTHER MEN WHO HAVE SEX WITH MEN</b>	
Estimated size of population	NA
HIV prevalence	NA
Know HIV status	NA
Antiretroviral therapy coverage	NA
Condom use	NA
Condoms distributed to men who have sex with men in prevention programmes (2016)	NA
Coverage of HIV prevention programmes	NA
Avoidance of services due to stigma and discrimination	NA
<b>TRANSGENDER PEOPLE</b>	
Estimated size of population	NA
HIV prevalence	NA
Know HIV status	NA
Antiretroviral therapy coverage	NA
Condom use	NA
Coverage of HIV prevention programmes	NA
Avoidance of services due to stigma and discrimination	NA
<b>PRISONERS</b>	

Estimated size of population	NA
HIV prevalence	NA
Antiretroviral therapy coverage	NA
HIV prevention programmes in prisons (2016)	NA
Condoms distributed	NA
Clean needles distributed	NA
Prisoners on opioid substitution therapy	NA

Unless indicated otherwise, data are from the most recent survey available between 2011 and 2015.

*NA: Not Available*

*Source: SAARC Epidemiological Response on HIV/AIDS-2019*

*Note: HIV Epidemiological estimates were not available at the time of publication of SAARC Epidemiological Response on HIV/AIDS-2020*



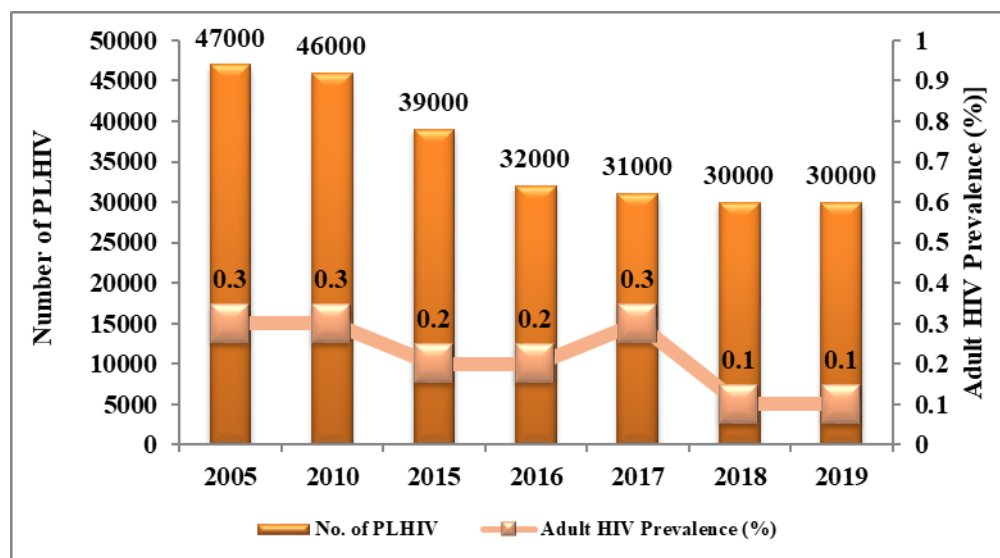
## NEPAL

Nepal is a landlocked country and is located in the Himalayas and bordered to the north by China and to the south, east, and west by India. Nepal is divided into 7 states and 77 districts. It has an area of 147,181 square kilometers and a population of approximately 29 million (WHO Global Tuberculosis Report-2020). The urban population is largely concentrated in the Kathmandu valley.

### Overview of the HIV/AIDS Epidemic:

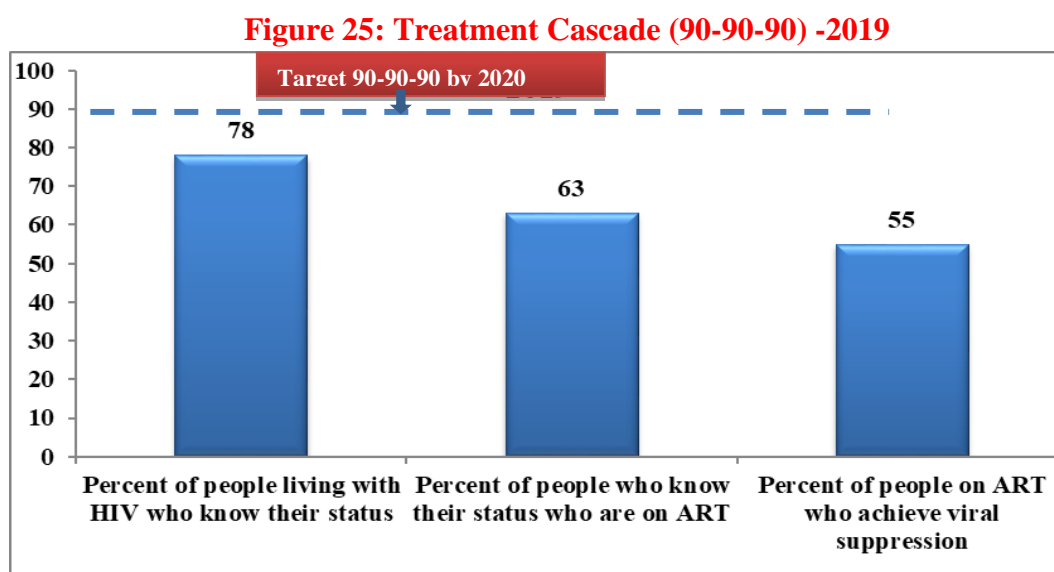
In Nepal, there were estimated 30000 (26000-34000) PLHIV in 2019 (Figure 24), with an adult (15–49 years) HIV prevalence of 0.1% (0.1-0.1%). This includes around less than 1200 Children Living with HIV (CLHIV, 0-14) accounting for 4 % of the total PLHIV estimates. There were 11000 (10000-13000) women living with HIV (15+ years) constituting around 37% of the total estimated PLHIV. There were 790 (700-870) new HIV infections in 2019. There were 740 (570-1000) AIDS-related deaths in the year 2019. HIV incidence was estimated at 0.03 per 1,000 populations in 2019.

**Figure 24: Estimated Adult HIV Prevalence & Number of PLHIV, 2005-2019**



Source: UNAIDS data 2020 & SAARC Epidemiological report on HIV/AIDS-2019

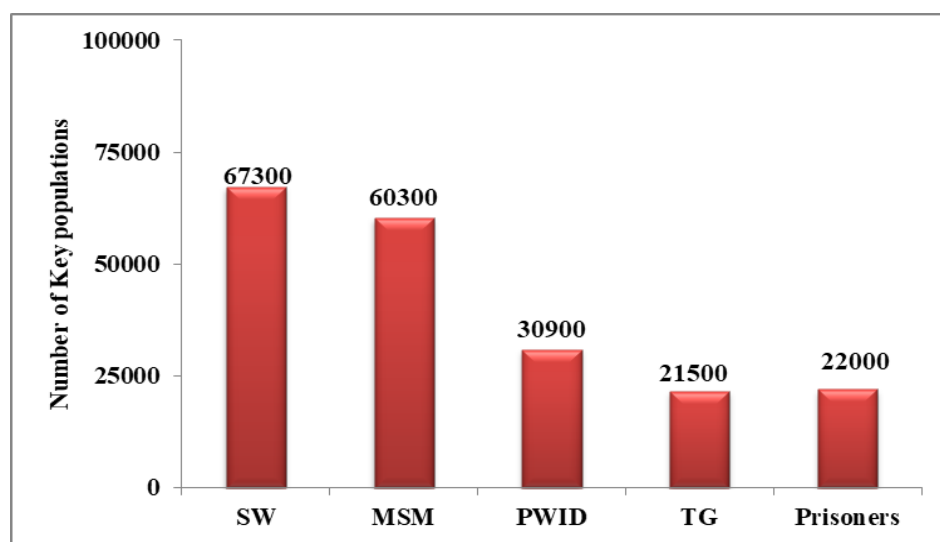
Figure 25 shows treatment cascade (90-90-90) in Nepal. In year 2019 there were 78 Percent of people living with HIV who know their status, 63 Percent of people who know their status who are on ART and 55 percent of people on ART who achieve viral suppression.



Source: UNAIDS Data-2020

The HIV epidemic in Nepal remains concentrated among the key affected population notably; sex workers (SW), men who have sex with men (MSM), people who inject drugs (PWID), transgender people (TG) as well as their spouses. Figure 26 shows the estimated size of key populations (SW, MSM, PWID, TG) in Nepal 2019.

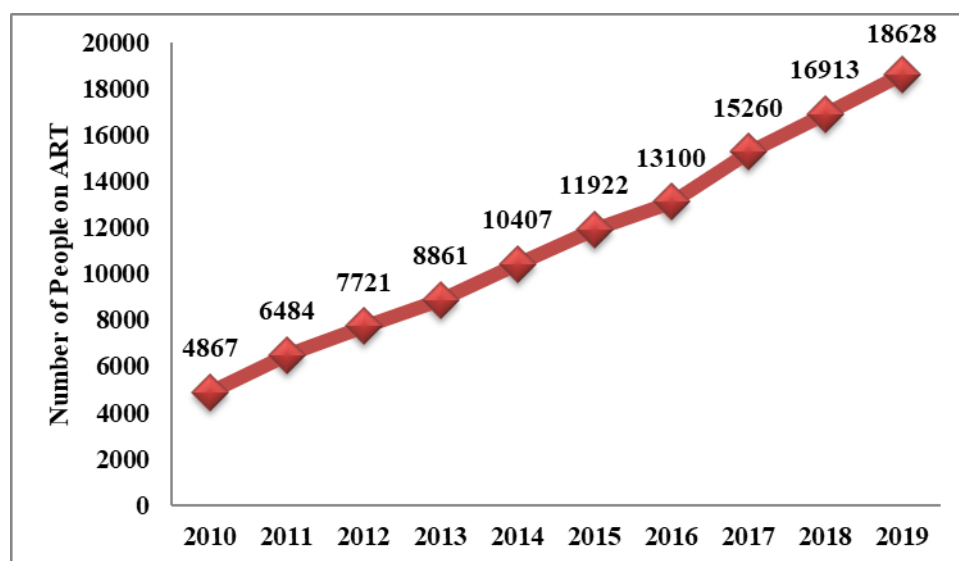
**Figure 26: Estimated size of Key Populations -2019**



Source: <http://aidsinfo.unaids.org/data sheet> 2019

Figure 27 shows the scaling up of number of people on ART from 4867 in 2010 to 18628 in 2019.

**Figure 27: ART Scale Up, 2010-2019**



Source: UNAIDS Data 2020 & SAARC Epidemiological response on HIV/AIDS-2019

#### **Challenges\*:**

- ❖ HIV case identification to minimize the gap of “first 90”
- ❖ Initiation of viral load testing service in scaled up sites to minimize the gap of “third 90”
- ❖ Frequent turnover of trained health workers (Counsellors) at the service sites especially ART sites.
- ❖ Unknown status of lost to follow up clients in HIV care services.
- ❖ The gap in the regular submission of bimonthly logistic consumption report from the service sites which affects the regular and timely supply of logistic (HIV test kits, OI medicines). It leads to frequent emergency logistic supply.
- ❖ Integration of R&R of all HIV program in National Health Information Management System (HMIS).
- ❖ Timely submission of routine reports through HMIS system

#### **Major planned activities\*:**

- ❖ ARV procurement.
- ❖ National level surveillance survey among people who inject drugs.

#### **New initiatives/ Best practices\*:**

- ❖ Budget allocated to procure ARVs via government fund

- ❖ Updated recording and reporting tools of national HIV programme.
- ❖ Strengthening strategic information system through implementation of DHIS-2 tracker system in all ART sites with the integration of biometric system and Health to track client and improve their retention. Same system extended to HIV prevention, Care and Support Services.

**Guidelines/Policy/Strategy on HIV/AIDS\*:**

- ❖ National HIV Strategic Plan 2016-2021
- ❖ National HIV testing and treatment guidelines 2020

*\*Source: Data sent by NCASC, Nepal, 2020*

## NEPAL

Populations(mid-year)	29 millions (WHO Global Tuberculosis Report-2020)		
<b>EPIDEMIC ESTIMATES</b>	<b>2010</b>	<b>2015</b>	<b>2019</b>
<b>New HIV infections</b>			
New HIV infections (all ages)	2100 (1900-2300)	1100 (1000-1200)	790 (700-870)
New HIV infections (0-14)	<500 (<200-<500)	<100 (<100-<200)	<100 (<100-<100)
New HIV infections (Women, 15+)	590 (510-660)	<500 (<500-<500)	<500 (<500-<500)
New HIV infections (Men, 15+)	1300 (1200-1400)	660 (580-720)	<500 (<500-510)
<b>HIV Incidence per 1000 populations</b>	<b>0.08 (0.07-0.09)</b>	<b>0.04 (0.04-0.05)</b>	<b>0.03 (0.03-0.03)</b>
<b>AIDS related deaths</b>			
AIDS related deaths (All ages)	1400 (1100-1600)	920 (730-1200)	740 (570-1000)
AIDS related deaths (0-14)	<200 (<200-<200)	<100 (<100-<100)	<100 (<100-<100)
AIDS related deaths (Women, 15+)	<500 (<500-<500)	<500 (<200-<500)	<200 (<200-<500)
AIDS related deaths (Men, 15+)	900 (740-1100)	640 (510-800)	570 (<500-780)
<b>People living with HIV</b>			
People living with HIV (All ages)	32000 (28000-38000)	29000 (25000-33000)	30000 (26000-34000)
People living with HIV (0-14)	1700 (1500-2000)	1500 (1300-1700)	1200 (1000-1400)
People living with HIV (Women, 15+)	9600 (8400-11000)	11000 (9300-12000)	11000 (10000-13000)
People living with HIV (Men, 15+)	21000 (18000-25000)	17000 (15000-20000)	17000 (15000-20000)
<b>HIV Prevalence (15-49)</b>	0.2 (0.2-0.2)	0.2 (0.1-0.2)	0.1 (0.1-0.1)
<b>HIV Testing and treatment cascade (90-90-90)*</b>	<b>People living with HIV who know their HIV Status</b>	<b>People living with HIV who are on Treatment</b>	<b>People living with HIV who are virally suppressed</b>
All ages	78%	63%	55%
Children (0-14)	NA	100%	80%
Women (15+)	79%	73%	65%
Men (15+)	77%	53%	46%
<b>Elimination of Mother to child transmission</b>		<b>2010</b>	<b>2019</b>
Percentage of pregnant women living with HIV accessing antiretroviral medicines		14% (12-17%)	51% (44-61%)
Early infant diagnosis		3.5% (2.9-4.3%)	93.3% (78.5->95%)
Final vertical transmission rate including during breast feeding		42% (40-44%)	29% (26-32%)
<b>HIV COMORBIDITIES</b>			
Estimated number of incident TB cases among people living with HIV (2017)	870 (480-1400)		
People living with HIV who started TB Preventive therapy (2017)	NA		
Cervical cancer screening of women living with HIV	NA		
People co infected with HIV and hepatitis B virus receiving combined treatment (2018)	NA		
People co infected with HIV and hepatitis C virus starting hepatitis C treatment)	NA		

HIV PREVENTION		
Adults aged 15+ years with unsuppressed viral load		NA
Knowledge of HIV prevention among young people aged 15-24 years (2016)		
Women		20.70%
Men		27.10%
Condom use at last sex with a non-marital, non-cohabiting partner (2016)		
Women		NA
Men		67.60%
Women aged 15-49 who have their demand for family planning satisfied with modern methods (2016)		56%
Men aged 15-49 who are circumcised(2015)		Not applicable
Male circumcisions performed according to national standards		Not applicable
People who received PrEP at least once during the reporting period		NA
Harm reduction		
- Use of sterile injecting equipment at last injection (2017)		97.60%
-Needles and syringes distributed per person who injects (2018)		85
-Coverage of opioid substitution therapy (2018)		2.8%
-Naloxone available (2019)		No
- Safe injection rooms available (2019)		No
Laws and policies		2018
Laws criminalizing the transmission of, nondisclosure of or exposure to HIV transmission		Yes
Criminalization of sex work among consenting adults	Human Trafficking and Transportation (Control) Act, 2064 BS	
Criminalization of same-sex sexual acts	NA	
Drug use or possession for personal use is an Offence	Narcotic Drugs (Control) Act, 2033 B.S	
Criminalization of transgender people	NA	
Laws or policies restricting the entry, stay and residence of people living with HIV		NA
Parental consent for adolescents to access HIV testing		NA
Spousal consent for married women to access sexual and reproductive health services		NA
Mandatory HIV testing for marriage, work or residence permits or for certain groups		NA
KEY POPULATIONS		
SEX WORKERS		
Estimated size of population		67300
HIV prevalence		4.20%
Know their HIV status		95.20%
Antiretroviral therapy coverage		NA
Condom use		88.20%
Coverage of HIV prevention programmes		34.80%
Avoidance of services due to stigma and discrimination		NA
PEOPLE WHO INJECT DRUGS		
Estimated size of population		30900
HIV prevalence		8.80%

Know their HIV status	98.30%
Antiretroviral therapy coverage	NA
Condom use	48.90%
Coverage of HIV prevention programmes	67.80%
Avoidance of services due to stigma and discrimination	NA
<b>GAY MEN AND OTHER MEN WHO HAVE SEX WITH MEN</b>	
Estimated size of population	60300
HIV prevalence	5%
Know their HIV status	89.60%
Antiretroviral therapy coverage	NA
Condom use	94.60%
Coverage of HIV prevention programmes	79.70%
Avoidance of services due to stigma and discrimination	NA
<b>TRANSGENDER PEOPLE</b>	
Estimated size of population	21500
HIV prevalence	8.50%
Know their HIV status	89.40%
Antiretroviral therapy coverage	NA
Condom use	91.50%
Coverage of HIV prevention programmes	29.80%
Avoidance of services due to stigma and discrimination	NA
<b>PRISONERS</b>	
Estimated size of population	22000
HIV prevalence	NA
Know their HIV status	NA
Antiretroviral therapy coverage	NA
Condom use	NA
Coverage of HIV prevention programmes	NA
Avoidance of services due to stigma and discrimination	NA

Source: UNAIDS Data 2020

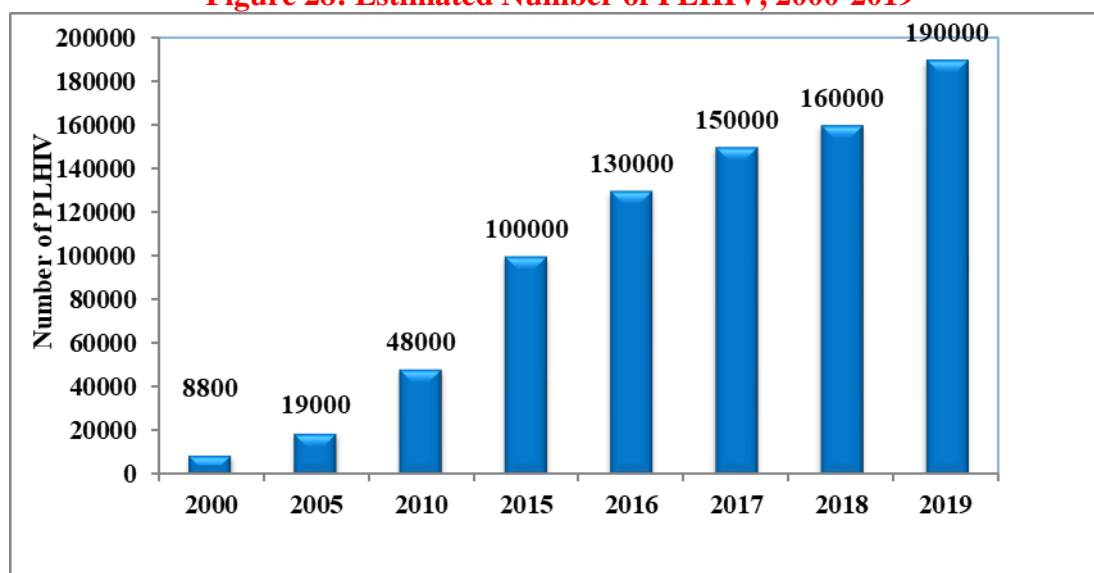
## PAKISTAN

Islamic Republic of Pakistan is the second largest country in the South Asia. It is bordered by India to the east, China in the far northeast, Afghanistan to the west and north, Iran to the southwest and Arabian Sea in the south. The land area of the country is 796,095 square kilometers. Population of Pakistan was approximately 217 million (WHO Global Tuberculosis Report-2020) at the end of 2019.

### Overview of the HIV/AIDS Epidemic

In Pakistan, there were estimated 190000 (160000-210000) PLHIV in 2019 (Figure 28), with an adult (15–49 years) HIV prevalence of 0.1% (0.1-0.2%). This includes around less than 6100 Children Living with HIV (CLHIV, 0-14) accounting for 3.2 % of the total PLHIV estimates. There were 53000 (47000-60000) women living with HIV (15+ years) constituting around 28% of the total estimated PLHIV. There were 25000 (23000-27000) new HIV infections in 2019. There were 6800 (5600-8000) AIDS-related deaths in the year 2019. HIV incidence was estimated at 0.12 per 1,000 populations in 2019.

**Figure 28: Estimated Number of PLHIV, 2000-2019**

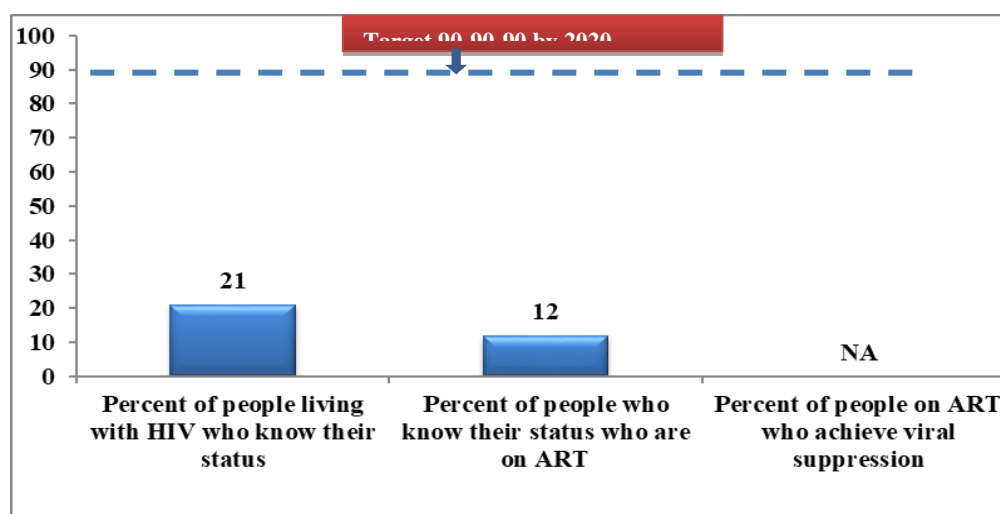


Source: UNAIDS data 2020 & SAARC Epidemiological response on HIV/AIDS-2019



Figure 29 shows treatment cascade (90-90-90) in Pakistan. In year 2019 there were 21 Percent of people living with HIV who know their status and 12 Percent of people who know their status who are on ART.

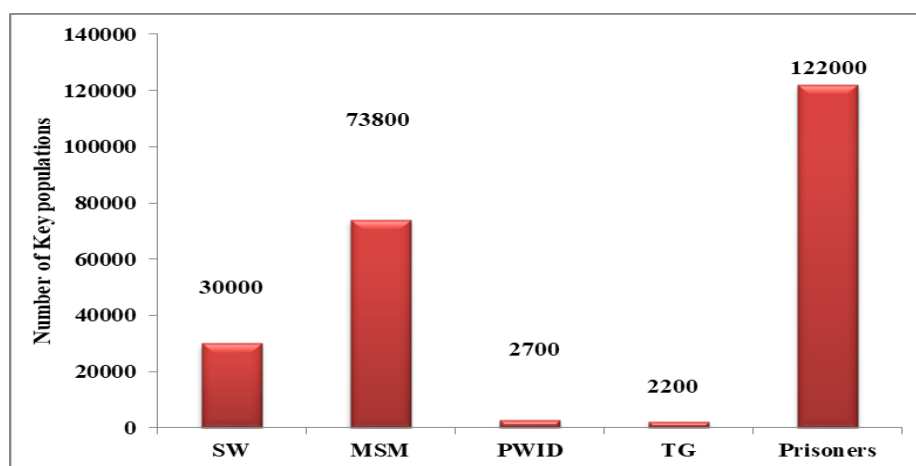
**Figure 29: Treatment Cascade (90-90-90) -2019**



Source: UNAIDS Data-2020

Pakistan is concentrated HIV epidemic among Key Affected Population. The estimated size of MSM was highest (832200) among key affected population in year 2019 (Figure 30). Other than the Key Affected Population, evidence also exists of either HIV-related risk factors or infection among certain vulnerable population, such as the spouses of key affected population, imprisoned population, at-risk adolescents and in certain occupational settings.

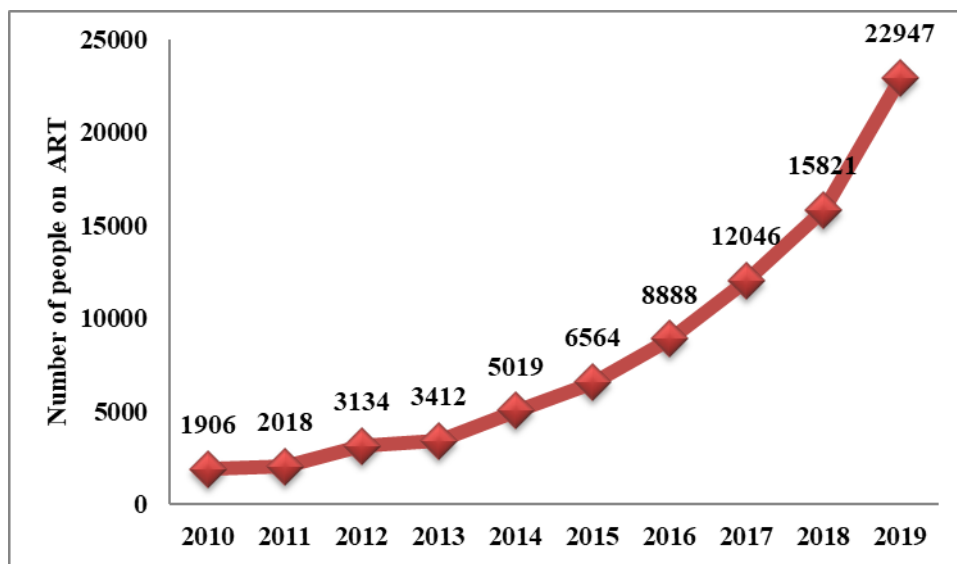
**Figure 30: Estimated size of Key Populations-2019**



Source: <http://aidsinfo.unaids.org/data sheet 2019>

Figure 31 shows the scaling up of number of people on ART from 1906 in 2010 to 22947 in 2019.

**Figure 31: ART Scale Up, 2010-2019**



Source: UNAIDS Data-2020

## PAKISTAN

Populations(mid-year)	217 million (WHO Global Tuberculosis Report-2020)		
<b>EPIDEMIC ESTIMATES</b>	<b>2010</b>	<b>2015</b>	<b>2019</b>
<b>New HIV infections</b>			
New HIV infections (all ages)	14000 (13000-16000)	19000 (17000-21000)	25000 (23000-27000)
New HIV infections (0-14)	780 (650-920)	1200 (1000-1300)	1500 (1300-1700)
New HIV infections (Women, 15+)	3800 (3300-4400)	5100 (4500-5600)	6700 (6100-7500)
New HIV infections (Men, 15+)	9600 (8500-11000)	13000 (12000-14000)	17000 (15000-18000)
<b>HIV Incidence per 1000 populations</b>	<b>0.08 (0.07-0.09)</b>	<b>0.1 (0.09-0.11)</b>	<b>0.12 (0.11-0.13)</b>
<b>AIDS related deaths</b>			
AIDS related deaths (All ages)	1400 (870-1800)	4700 (3700-5700)	6800 (5600-8000)
AIDS related deaths (0-14)	<500 (<500-<500)	670 (570-770)	900 (780-1000)
AIDS related deaths (Women, 15+)	<500 (<200-<500)	1300 (970-1600)	2000 (1600-2400)
AIDS related deaths (Men, 15+)	640 (<500-920)	2700 (2100-3300)	3900 (3100-4600)
<b>People living with HIV</b>			
People living with HIV (All ages)	68000 (59000-77000)	130000 (110000-150000)	190000 (160000-210000)
People living with HIV (0-14)	1800 (1500-2100)	4000 (3400-4600)	6100 (5300-6900)
People living with HIV (Women, 15+)	20000 (17000-22000)	37000 (32000-42000)	53000 (47000-60000)
People living with HIV (Men, 15+)	47000 (40000-54000)	87000 (76000-100000)	130000 (110000-140000)
<b>HIV Prevalence (15-49)</b>	<b>&lt;0.1 (&lt;0.1-&lt;0.1)</b>	<b>0.1 (&lt;0.1-0.1)</b>	<b>0.1 (0.1-0.2)</b>
<b>HIV Testing and treatment cascade (90-90-90)</b>	<b>People living with HIV who know their HIV Status</b>	<b>People living with HIV who are on Treatment</b>	<b>People living with HIV who are virally suppressed</b>
All ages	21% (19-24%)	12% (11-14%) 22947	NA
Children (0-14)	42% (36-48%)	31% (27-35%) 1884	NA
Women (15+)	12% (11-14%)	9% (8-10%) 4824	NA
Men (15+)	24% (21-27%)	13% (11-15%) 16239	NA
<b>Elimination of Mother to child transmission</b>		<b>2010</b>	<b>2019</b>
Percentage of pregnant women living with HIV accessing antiretroviral medicines		1% (1-2%)	12% (10-13%)
Early infant diagnosis		1.2% (<1.0-1.4%)	2.8% (2.5-3.3%)
Final vertical transmission rate including during breast feeding		46 % (43-49%)	41% (39-44%)
<b>HIV COMORBIDITIES</b>			
Estimated number of incident TB cases among people living with HIV (2018)	3800 (2500-5400)		
People living with HIV who started TB Preventive therapy (2018)	NA		
Cervical cancer screening of women living with HIV	NA		

People co infected with HIV and hepatitis B virus receiving combined treatment (2018)	NA
People co infected with HIV and hepatitis C virus starting hepatitis C treatment)	NA
<b>HIV PREVENTION</b>	
Adults aged 15+ years with unsuppressed viral load	NA
Knowledge of HIV prevention among young people aged 15-24 years (2014)	
Women	1.8%
Men	5.90%
Condom use at last sex with a non-marital, non-cohabiting partner	
Women	NA
Men	NA
Women aged 15-49 who have their demand for family planning satisfied with modern methods (2015)	73%
Men aged 15-49 who are circumcised(2015)	Not applicable
Male circumcisions performed according to national standards	Not applicable
People who received PrEP at least once during the reporting period	NA
<b>Harm reduction</b>	
- Use of sterile injecting equipment at last injection (2016)	72.50%
-Needles and syringes distributed per person who injects (2018)	46
-Coverage of opioid substitution therapy (2018)	NA
-Naloxone available (2019)	No
- Safe injection rooms available (2019)	No
<b>Laws and policies</b>	
<b>2018</b>	
Laws criminalizing the transmission of, nondisclosure of or exposure to HIV transmission	No
Criminalization of sex work among consenting adults	Any criminalization or punitive regulations of sex work
Criminalization of same-sex sexual acts	Yes, death Penalty
Drug use or possession for personal use is an Offence	Possession of drugs for personal use or drug use or consumption are not punished by laws and regulations
Criminalization of transgender people	both criminalized and prosecuted
Laws or policies restricting the entry, stay and residence of people living with HIV	No
Parental consent for adolescents to access HIV testing	Yes, for adolescents younger than 18 years
Spousal consent for married women to access sexual and reproductive health services	Yes
Mandatory HIV testing for marriage, work or residence permits or for certain groups	No
<b>KEY POPULATIONS</b>	
<b>SEX WORKERS</b>	
Estimated size of population (2019)	228800
HIV prevalence	3.80%
HIV testing and status awareness	72.8%
Antiretroviral therapy coverage	5%
Condom use	35.10%
Coverage of HIV prevention programmes	0.7

Avoidance of services due to stigma and discrimination	NA
<b>PEOPLE WHO INJECT DRUGS</b>	
Estimated size of population (2019)	113400
HIV prevalence	21%
HIV testing and status awareness	47.10%
Antiretroviral therapy coverage	16.20%
Condom use	15.30%
Coverage of HIV prevention programmes	1.60%
Avoidance of services due to stigma and discrimination	
<b>GAY MEN AND OTHER MEN WHO HAVE SEX WITH MEN</b>	
Estimated size of population (2019)	832200
HIV prevalence	3.7%
HIV testing and status awareness	44.7%
Antiretroviral therapy coverage	0.8%
Condom use	22.4%
Coverage of HIV prevention programmes	1.2%
Avoidance of services due to stigma and discrimination	NA
<b>TRANSGENDER PEOPLE</b>	
Estimated size of population (2019)	52400
HIV prevalence	5.50%
HIV testing and status awareness	69.10%
Antiretroviral therapy coverage	10.2
Condom use	24.40%
Coverage of HIV prevention programmes	1.10%
Avoidance of services due to stigma and discrimination	NA
<b>PRISONERS</b>	
Estimated size of population (2019)	80500
HIV prevalence	2%
HIV testing and status awareness	NA
Antiretroviral therapy coverage	NA
Condom use	NA
Coverage of HIV prevention programmes	NA
Avoidance of services due to stigma and discrimination	NA

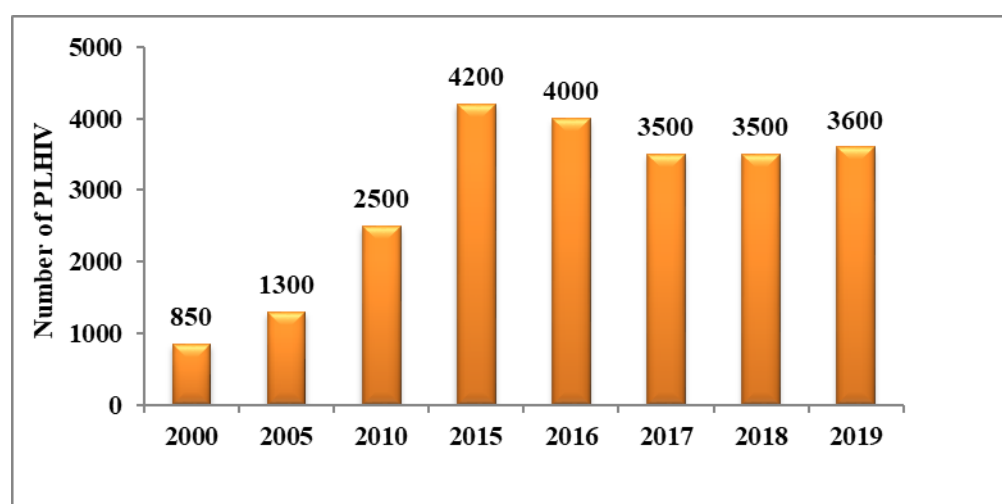
Source: UNAIDS Data 2020

Sri-Lanka is an island country in the Indian Ocean, separated from the south- eastern coast of peninsular India. Its estimated population is 21 million in 2019 (WHO Global Tuberculosis Report-2020).

### Overview of the HIV/AIDS Epidemic

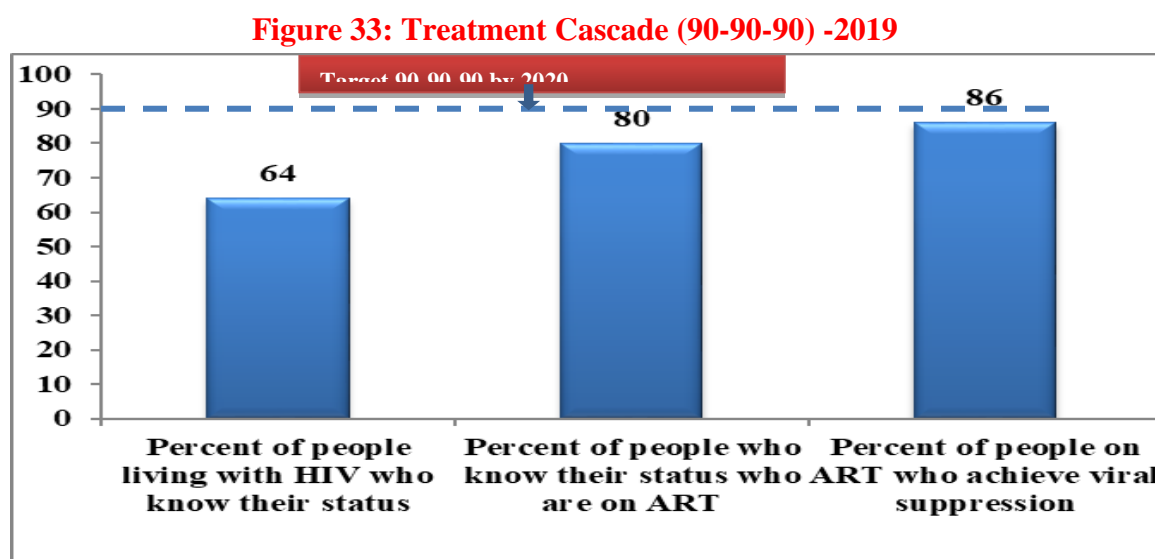
In Sri Lanka, there were estimated 3600 (3200-4200) PLHIV in 2019 (Figure 32), with an adult (15–49 years) HIV prevalence of <0.1% (<0.1-<0.1%). There were 1000 (890-1200) women living with HIV (15+ years) constituting around 28% of the total estimated PLHIV. There were less than 200 new HIV infections in 2019. There were less than 200 AIDS-related deaths in the year 2019. HIV incidence was estimated at <0.1 (<0.1-<0.1) per 1,000 populations in 2019.

**Figure 32: Estimated Number of PLHIV, 2000-2019**



Source: UNAIDS Data 2020 & SAARC Epidemiological Response on HIV/AIDS-2019

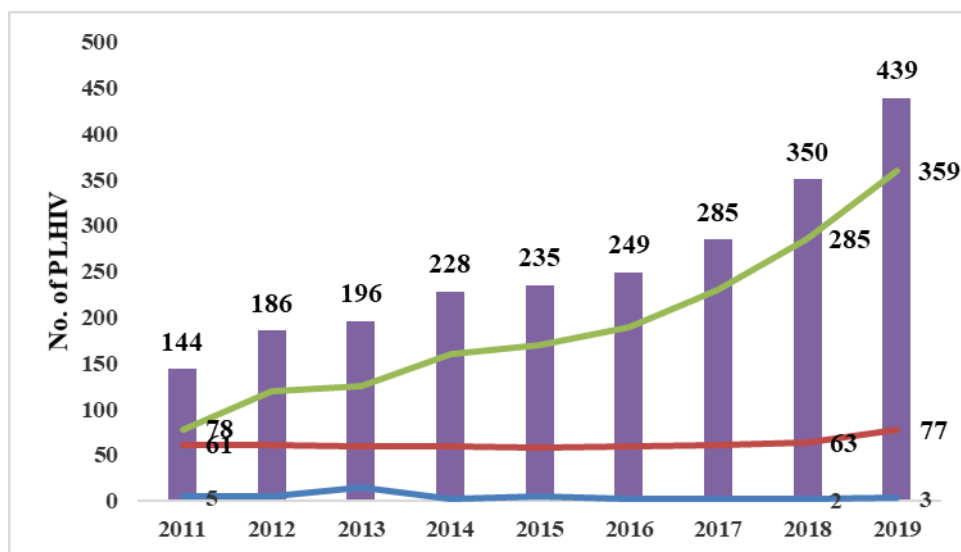
Figure 33 shows treatment cascade (90-90-90) in Sri Lanka. In year 2019 there were 64 Percent of people living with HIV who know their status, 80 Percent of people who know their status are on ART and 86 Percent of people on ART who achieve viral suppression.



*Source: National STD/AIDS Control Programme Annual Report 2019, Sri Lanka*

The Figure 34 shows trends of reported HIV infections by age and sex since 2011. Children below 15 years of age are reducing in number over the years. During 2019, three pediatric HIV infections were detected who got infected 3 to 4 years ago due to mother-to-child transmission. The trend of adult female HIV infections is seen to be stable around 60 cases per year until 2018, followed by a mild increase to 77 cases in 2019. However, during the same period, the trend of adult males has been increasing exponentially from 78 cases to 359 cases, which is a 460% increase. Therefore, the rising reported numbers are almost entirely due to increasing numbers in adult males.

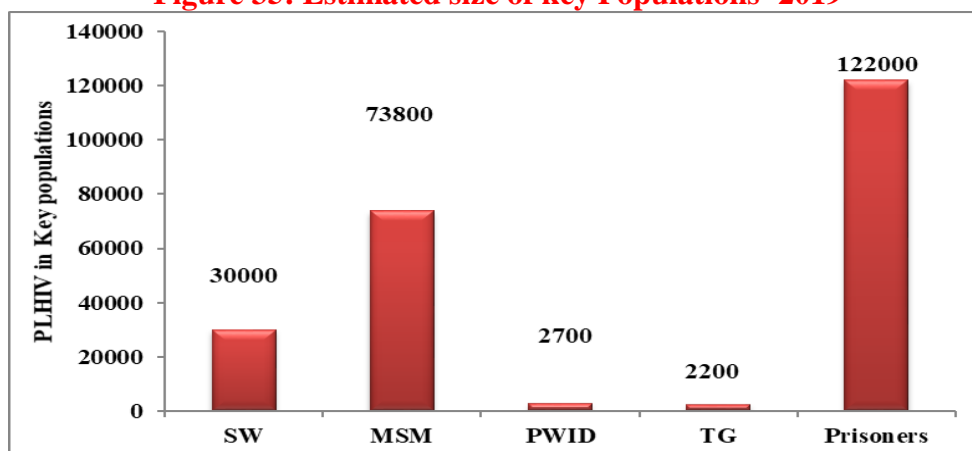
**Figure 34: Number of Reported HIV Infections by Age and Sex, 2011-2019**



Source: National STD/AIDS Control Programme Sri Lanka, Annual report-2019

The HIV epidemic in Sri Lanka remains concentrated among the key affected population notably; sex workers (SW), men who have sex with men (MSM) and people who inject drugs (PWID). Figure 35 shows the estimated size of key populations (SW, MSM, PWID, TG) in Sri Lanka 2019.

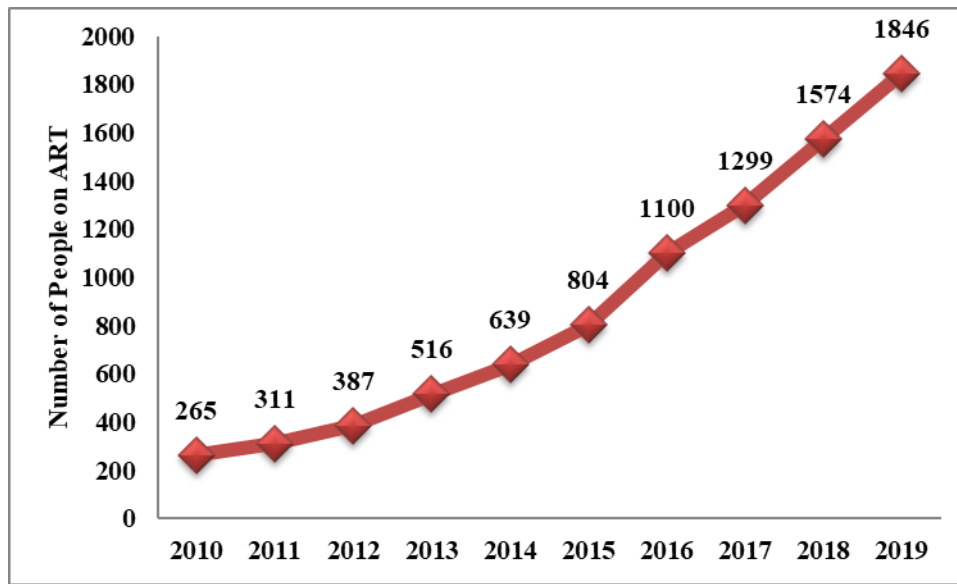
**Figure 35: Estimated size of key Populations- 2019**



Source: <http://aidsinfo.unaids.org/data sheet 2019>



**Figure 36: ART Scale Up, 2010-2019**



Source: <http://aidsinfo.unaids.org>

## SRI LANKA

Populations(mid-year)	21 million (WHO Global Tuberculosis Report-2020)		
<b>EPIDEMIC ESTIMATES</b>	<b>2010</b>	<b>2015</b>	<b>2019</b>
<b>New HIV infections</b>			
New HIV infections (all ages)	<500 (<500-<500)	<500 (<500-<500)	<200 (<200-<200)
New HIV infections (0-14)	NA	NA	NA
New HIV infections (Women, 15+)	<100 (<100-<100)	<100 (<100-<100)	<100 (<100-<100)
New HIV infections (Men, 15+)	<200 (<200-<500)	<200 (<200-<200)	<200 (<100-<200)
<b>HIV Incidence per 1000 populations</b>	<b>0.01 (0.01-0.02)</b>	<b>0.01 (0.01-0.01)</b>	<b>&lt;0.01 (&lt;0.01-&lt;0.01)</b>
<b>AIDS related deaths</b>			
AIDS related deaths (All ages)	<500 (<200-<500)	<500 (<200-<500)	<200 (<200-<200)
AIDS related deaths (0-14)	NA	NA	NA
AIDS related deaths (Women, 15+)	<100 (<100-<100)	<100 (<100-<100)	<100 (<100-<100)
AIDS related deaths (Men, 15+)	<200 (<200-<500)	<200 (<200-<500)	<100 (<100-<200)
<b>People living with HIV</b>			
People living with HIV (All ages)	4000 (3400-4800)	3800 (3200-4500)	3600 (3200-4200)
People living with HIV (0-14)	NA	NA	NA
People living with HIV (Women, 15+)	1100 (930-1300)	1100 (940-1300)	1000 (890-1200)
People living with HIV (Men, 15+)	2800 (2400-3400)	2700 (2300-3200)	2500 (2200-3000)
<b>HIV Prevalence (15-49)</b>	<0.1 (<0.1-<0.1)	<0.1 (<0.1-<0.1)	<0.1 (<0.1-<0.1)
<b>HIV Testing and treatment cascade (90-90-90)</b>	<b>People living with HIV who know their HIV Status</b>	<b>People living with HIV who are on Treatment</b>	<b>People living with HIV who are virally suppressed</b>
All ages	51% (45-60%)	51% (45-60%) 1846	NA
Children (0-14)	NA	NA	NA
Women (15+)	50% (44-58%)	50% (44-58%) 511	NA
Men (15+)	51% (45-60%)	51% (45-60%) 1293	NA
<b>Elimination of Mother to child transmission</b>		<b>2010</b>	<b>2018</b>
Percentage of pregnant women living with HIV accessing antiretroviral medicines		NA	NA
Early infant diagnosis		NA	NA
<b>HIV COMORBIDITIES</b>			
Estimated number of incident TB cases among people living with HIV (2017)	49 (35-64)		
People living with HIV who started TB Preventive therapy (2017)	20.40%		
Cervical cancer screening of women living with HIV	NA		
People co infected with HIV and hepatitis B virus receiving combined treatment (2017)	100%		
People co infected with HIV and hepatitis C virus starting hepatitis C treatment)	NA		

<b>HIV PREVENTION</b>	
Adults aged 15+ years with unsuppressed viral load	<0.1%
Knowledge of HIV prevention among young people aged 15-24 years (2014)	
Women	NA
Men	NA
Condom use at last sex with a non-marital, non-cohabiting partner	
Women	NA
Men	NA
Women aged 15-49 who have their demand for family planning satisfied with modern methods (2015)	74%
Men aged 15-49 who are circumcised(2015)	Not applicable
Male circumcisions performed according to national standards	Not applicable
People who received PrEP at least once during the reporting period	NA
<b>Harm reduction</b>	
- Use of sterile injecting equipment at last injection (2015)	80.50%
-Needles and syringes distributed per person who injects (2018)	NA
-Coverage of opioid substitution therapy (2018)	NA
-Naloxone available (2019)	NA
- Safe injection rooms available (2019)	NA
<b>Laws and policies</b>	
	<b>2018</b>
Laws criminalizing the transmission of, nondisclosure of or exposure to HIV transmission	NA
Criminalization of sex work among consenting adults	NA
Criminalization of same-sex sexual acts	Yes, imprisonment (upto 14 years)
Drug use or possession for personal use is an Offence	NA
Criminalization of transgender people	NA
Laws or policies restricting the entry, stay and residence of people living with HIV	No
Parental consent for adolescents to access HIV testing	NA
Spousal consent for married women to access sexual and reproductive health services	NA
Mandatory HIV testing for marriage, work or residence permits or for certain groups	NA
<b>KEY POPULATIONS</b>	
<b>SEX WORKERS</b>	
Estimated size of population (2019)	30000
HIV prevalence	0.30%
Know their HIV status	29.90%
Antiretroviral therapy coverage	NA
Condom use	83.60%
Coverage of HIV prevention programmes	12.70%
Avoidance of services due to stigma and discrimination	6.80%
<b>PEOPLE WHO INJECT DRUGS</b>	
Estimated size of population (2019)	2700

HIV prevalence	NA
Know their HIV status	7.70%
Antiretroviral therapy coverage	NA
Condom use	25.50%
Coverage of HIV prevention programmes	2.70%
Avoidance of services due to stigma and discrimination	7.70%
<b>GAY MEN AND OTHER MEN WHO HAVE SEX WITH MEN</b>	
Estimated size of population (2019)	73800
HIV prevalence	0.20%
Know their HIV status	40.30%
Antiretroviral therapy coverage	NA
Condom use	82.80%
Coverage of HIV prevention programmes	27%
Avoidance of services due to stigma and discrimination	5.20%
<b>TRANSGENDER PEOPLE</b>	
Estimated size of population (2019)	2200
HIV prevalence	0.50%
Know their HIV status	36.90%
Antiretroviral therapy coverage	NA
Condom use	76.30%
Coverage of HIV prevention programmes	38.50%
Avoidance of services due to stigma and discrimination	5.50%
<b>PRISONERS</b>	
Estimated size of population (2019)	122000
HIV prevalence	NA
Know their HIV status	NA
Antiretroviral therapy coverage	NA
Condom use	NA
Coverage of HIV prevention programmes	NA
Avoidance of services due to stigma and discrimination	NA

Source: UNAIDS Data 2020

## 5. TB/HIV CO-INFECTION

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TB HIV Co-infection poses a critical challenge for the health-sector and for people living with HIV and TB. Starting in the 1980s, the HIV epidemic led to a major upsurge in TB cases and TB mortality in many countries.

A total of 1.4 million people died from TB in 2019 (including 208 000 people with HIV). Worldwide, TB is one of the top 10 causes of death and the leading cause from a single infectious agent (above HIV/AIDS).

TB affects people of both sexes and all age groups, but the highest burden is in adult men, who accounted for 56% of all TB cases in 2019; by comparison, adult women accounted for 32% and children for 12%. Among all TB cases, 8.2% were among people living with HIV.

Globally, the average rate of decline in the TB incidence rate was 1.7% per year in the period 2000–2019, and 2.3% per year in 2018–2019. This is much too slow to reach the End TB Strategy milestone of a 20% reduction between 2015 and 2020. The cumulative reduction between 2015 and 2019 was 9%.

Preventing TB deaths among HIV-positive people requires intensified scale-up of TB prevention, diagnosis and treatment interventions, including earlier initiation of ART among people living with HIV and those with HIV-associated TB. Increased efforts in joint TB and HIV programming could facilitate further scale-up and consolidation of collaborative TB/HIV activities.

Joint activities between national TB and HIV/AIDS programmes are crucial to prevent, diagnose and treat TB among people living with HIV and HIV among people with TB. These include establishing mechanisms for collaboration, such as coordinating bodies, joint planning, surveillance and monitoring and evaluation; decreasing the burden of HIV among people with TB (with HIV testing and counseling for individuals and couples, co-trimoxazole preventive therapy, antiretroviral therapy and HIV prevention, care and support); and decreasing the burden of TB

among people living with HIV (with the three I's for HIV and TB: intensified case-finding; TB prevention with isoniazid preventive therapy and early access to antiretroviral therapy; and infection control for TB). Integrating HIV and TB services, when feasible, may be an important approach to improve access to services for people living with HIV, their families and the community.

**Table 07: Estimates of TB/HIV Care in New and Relapse TB Patients, 2019**

Country	Patients with known HIV status who are HIV positive		Patients on Antiretroviral Therapy (ART)	
	Number	%	Number	%
<b>Afghanistan</b>	11	0.036	7	64
<b>Bangladesh</b>	120	1.2	116	97
<b>Bhutan</b>	3	0.31	3	100
<b>India</b>	46741	2.7	44517	95
<b>Maldives</b>	0	-	0	-
<b>Nepal</b>	159	0.72	155	97
<b>Pakistan</b>	624	0.48	494	79
<b>Sri Lanka</b>	6	0.078	6	100
<b>Regional</b>	<b>47664</b>		<b>45298</b>	<b>95</b>

*Source: WHO Global TB Report, 2020*

A total of 45 298 patients were on ART in the region which is around 95 % of total TB patients with known HIV status who are HIV positive in SAARC region.

## References:

- ❖ *Data sent by NASC Bangladesh-2020*
- ❖ *Data sent by NCASC, Nepal, 2020*
- ❖ *[http://aidsinfo.unaids.org/data sheet 2019](http://aidsinfo.unaids.org/data%20sheet%202019)*
- ❖ *<http://www.emro.who.int/afg/programmes/hiv.html>*
- ❖ *India HIV Estimates 2019 Report*
- ❖ *National STD/AIDS Control Programme Annual Report 2019, Sri Lanka*
- ❖ *SAARC Epidemiological Response on HIV/AIDS-2019*
- ❖ *UNAIDS Data 2020,*
- ❖ *WHO Global Tuberculosis Report-2020*