

Media Update

25 November 2018

UNAIDS

Media Advisory



Interactive Round-Table Discussion with Parliamentarians

When: *Monday, November 26, 2018 at 11:00* (Lunch to follow)

Where: Shamadan Hall- III Serena Hotel, Islamabad

What: This round-table discussion is a platform for the NACP, UNAIDS and partners to enhance and intensify cooperation with Parliamentarians to work collectively towards supporting prevention, testing and treatment of at-risk communities and people living with HIV. It is also an opportunity to advocate for greater governmental support and commitment to addressing policy and structural barriers to treatment, as well as the needs and rights of key populations.

Who:

- Dr. Baseer Achakzai, National Programme Manager, National AIDS Control Manager (NACP)
- Dr. Marlyn Borromeo, UNAIDS Country Director for Pakistan & Afghanistan
- Dr. Nima Abid, WHO Representation, Pakistan
Dr. Quaid, Grant Manager for AIDS, TB and Malaria, GFATM
- Mr. Asghar Satti, National Coordinator, APLHIV

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Background:



World AIDS Day originated at the 1988 World Summit of Ministers of Health on Programmes for AIDS Prevention. Since then, every year United Nations agencies, governments and civil society join together to campaign around specific themes related to AIDS. The Joint United Nations Programme on HIV/AIDS (UNAIDS) leads and inspires the world to achieve its shared vision of zero new HIV infections, zero discrimination and zero AIDS-related deaths. UNAIDS unites the efforts of 11 UN organizations—UNHCR, UNICEF, WFP, UNDP, UNFPA, UNODC, UN Women, ILO, UNESCO, WHO and the World Bank—and works closely with global and national partners towards ending the AIDS epidemic by 2030 as part of the Sustainable Development Goals. Join us this World AIDS Day in raising awareness about the importance of knowing one's status and calling for the removal of all barriers to accessing HIV testing!

Fact Sheet

The HIV response in Pakistan is led by the National AIDS Control Programme alongside UNAIDS and partners. In December 2013, the international UNAIDS Programme Coordinating Board called on UNAIDS to support country and region-led efforts to establish new targets for HIV treatment scale-up beyond 2015. At this time, a new and ambitious set of targets was established:

- By 2020, 90% of all people living with HIV will know their HIV status.
- By 2020, 90% of all people with diagnosed HIV infection will receive sustained antiretroviral therapy.
- By 2020, 90% of all people receiving antiretroviral therapy will have viral suppression.

Around the world today, three out of four people living with HIV (PLHIV) know their status – this is an incredible achievement and the first step towards supporting them in getting the life-saving treatment that they need. With the understanding that significant time-sensitive investments are needed in Pakistan if the country is to meet its commitments under the 2030 Fast Track Targets and Sustainable Development Goals, the NACP, UNAIDS and partners revised the Pakistan AIDS Strategy III in 2017 and prioritized testing accessibility through:

- Precision targeting;
- Strategic approaches to testing and treatment;
- Effective investments; and
- Innovation.

Pakistan – Epidemiological Data for HIV

Over the years, Pakistan has followed the HIV epidemic pattern that is typical of other areas in Asia. That is, it has shifted from low to high HIV prevalence among certain groups. Since 2010, Pakistan has seen an increase of 45% in new HIV infections. With approximately 20,000 new infections in 2017 alone, it is clear that the epidemic is expanding across the country and it remains largely concentrated among key populations including people who inject drugs, the

transgender community, sex workers and their clients and men who have sex with men. These are marginalized groups that face widespread stigma and discrimination, and the fear of maltreatment impacts their willingness to pursue testing.

As a result, it is estimated that among the approximately 150,000 people living with HIV in Pakistan, only 22,000 know their status and around 15,000 receive Antiretroviral Treatment. HIV transmission via needle sharing among injecting drug users remains the most common means of transmission, however the data predicts that sexual transmission among non-sex working men who have sex with men will account for the bulk of new infections if intervention efforts remain at the current level. Please see the attached Fact Sheet for more details.

World AIDS Day 2018

The 30th Anniversary of World AIDS Day on December 1 will provide the National AIDS Control Programme in collaboration with UNAIDS, WHO, APLHIV and the Joint UN Team on HIV/AIDS with the opportunity to remind all that the HIV epidemic is rising in Pakistan and that there is a need to work collectively to address it. Recognizing that many barriers to HIV testing remain, the theme of this year's event is *Know Your Status* and the movement will prioritize reaching PLHIV whose status is unknown - encouraging testing and linking them to quality care and treatment services. This year, the NACP in collaboration with UNAIDS and partners, has prioritized engaging youth, media, Parliamentarians and concerned stakeholders in the lead up to World AIDS Day to:

- Destigmatize HIV testing;
- Advocate for confidential, non-discriminatory, community-based care models;
- Raise awareness about disease transmission, prevention and treatment;
- Address structural and policy barriers to testing and quality care; and
- Ensure that investments are made for the right people in the right places.

Key Messages

- In Pakistan, only 16% of the estimated number of people living with HIV had been tested. Of which, around 84% does not know their HIV status and is likely to transmit the virus to their partner(s) and even to their unborn babies.
- Most of those infected with HIV, will come to the clinic when they are already ill and symptomatic, and medical services could be more expensive. Unlike before, there is now treatment, and Pakistan recommends policy on "treat all". Meaning, once you are tested HIV positive, treatment could immediately be started regardless of CD4 count);
- This year, we celebrate the 30th anniversary of World AIDS Day, to advocate for more concerted action to prevent HIV and provide those who are living with HIV the lifesaving treatment they need in a manner that respects both human rights and their dignity.;
- HIV testing is essential for expanding treatment and ensuring that all people living with HIV can lead healthy and productive lives. It is also crucial to achieving the 90–90–90 targets and empowering people to make choices about HIV prevention so they can protect themselves and their loved ones.
- Renewed commitment to, sustained funding for and scaled-up implementation of HIV prevention programmes is mandatory to end the HIV epidemic as a public health threat by

2030. Systematic and well-managed coordination is critical to rapid progress. Communities, policy-makers, providers and partners must work together to achieve reductions in new infections in affected populations.

- Stigma, discrimination and lack of awareness deter and prevent HIV testing which is essential for expanding treatment. The 90-90-90 targets cannot be achieved without ensuring that testing is available to all at-risk populations. Partners must work together to create an enabling environment for successful HIV responses and affirm the dignity of people living with or vulnerable to HIV.
- Pakistan's epidemic is concentrated among key populations that face discrimination and social exclusion. Saturation of HIV prevention programming in specific locations for key populations in the form of dedicated services, community-supported treatment and community mobilization is needed to prevent new infections.
- New HIV infections cannot be stopped using one method alone. A prevention revolution that includes all available options to stop the transmission of HIV is required including condom provision, immediate initiation of antiretroviral therapy and pre-exposure prophylaxis. Specific populations and locations require additional tools such as harm reduction (needle-syringe and opioid substitution therapy programmes) for people who inject drugs.
- Continued innovation in prevention, testing and treatment is essential. This includes better technology (improved condoms, new long-acting antiretroviral medicines) and better programme delivery (including expanded community-based services, demand generation, adherence support, better integration with other health services and use of new media).
