PAKISTAN – State of HIV Prevention and HIV Prevention Commitments for ICPD25

GPC Ministerial Meeting, 11 November 2019, Nairobi

Dr. Zafar Mirza
Minister of State,
National Health Services, Regulation and Coordination,
Government of Pakistan
MAIN MESSAGE: New HIV infections increased by 57% since 2010. Scale up of community based HIV prevention model through high impact interventions are critical, to rapidly reduce new infections and achieve the 2020 target.
**PAKISTAN’S HIV PREVENTION POSTER**

### Key Populations

<table>
<thead>
<tr>
<th>SEX WORKERS</th>
<th>GAY MEN &amp; OTHER MEN WHO HAVE SEX WITH MEN</th>
<th>PEOPLE WHO INJECT DRUGS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Condom use at last paid sex (%)</td>
<td>Condom use at last anal sex (%)</td>
<td>With safe injections On OST</td>
</tr>
<tr>
<td>51</td>
<td>26</td>
<td>58</td>
</tr>
<tr>
<td>(Target, 80%)</td>
<td>(Target, 50%)</td>
<td>(Target, 80%)</td>
</tr>
</tbody>
</table>

- **Two workers vs. clients**
- **MMW vs. MSM**

- Received two interventions in past 3 months (%)
- Scale up combination HIV prevention services to reduce new infection among men having sex with men and male sex workers
- Scale up combination HIV prevention services to reduce new infection among people who inject drugs

### ARV-Based Prevention

#### Results of ART and pre-exposure prophylaxis (PrEP)

- **People on PrEP / 100 new infections**
- **PrEP adherence**
- **PrEP uptake**

- **Composite PrEP score (0-10)**

#### Scores (0-10)

- **Very good**
- **Good**
- **Medium**
- **Low**
- **Very low**
- **Insufficient data**

### Current HIV prevention financing and gaps

#### Enablers & systems

- **Scores (0-10)**
- **Avoided health care due to stigma & discrimination (%)**
- **Married women’s decision making about their own health care (%)**

#### Status of 10 Roadmap actions

- **To be updated based on Sep 2019 survey**
- **1 - Needs assessment**
- **2 - Prevention targets**
- **3 - Prevention strategy**
- **4 - Policy reform**
- **5a - KP size estimates**
- **5b - Defined KP package**
- **5c - AGYW size estimates**
- **6 - Capacity & TA plan**
- **7 - Social contracting**
- **8 - Financial gap analysis**
- **9 - Strengthen monitoring**
- **10 - Performance review**

### NEXT STEPS:

1. Scaling up and strengthening capacities of community based HIV prevention model through high impact interventions for key populations
2. Strengthening HIV surveillance system linking prevention and treatment services for evidence based programming
3. Initiating a Financing Dialogue with relevant line ministries in high prevalence provinces (e.g., Sindh and Punjab) where HIV burden accounts to 93% to mobilize domestic resources for prevention programme
4. Creating an enabling environment for HIV prevention, access to stigma free treatment, care & support through multi-sectoral approach and by integrating into health sector programmes/services

### Data sources:

- UNAIDS 2019 HIV estimates
- Global AIDS Monitoring 2019
- Global Prevention Coalition Progress Survey 2019
- ICF - The DHS Program STATcompiler
- SRH/HIV Linkages Index

Note: 2019 HIV estimates presented year are for the year 2018. Other data points may refer to various years when surveys were conducted.

Global HIV Prevention Coalition
Key Challenges

• Prevention and Education Program
  – Limited coverage of HIV prevention programme for key population due to limited resources and capacities;
  – No national and provincial communication program to widely disseminate correct information about HIV and related issues;
  – Lack of HIV literacy resulting in stigma, limited uptake of HIV testing services new infections, retention and adherence to treatment services
  – Limited effort to promote condom use as an effective HIV (and other sexually transmitted infections) prevention services
  – Financial constraints resulting in delayed initiation of PrEP
  – Current M & E system is fragmented
  – Absence of OST implementation for people who inject drugs
Recommitting to HIV prevention by 2020 at ICPD25

1. Scale up community-based HIV prevention model through high impact interventions related to Sexual and Reproductive Health, Sexually Transmitted Infections, initiation of Pre-Exposure Prophylaxis (PrEP) as well as safe and healthy practices for key populations.

2. Strengthen HIV surveillance system linking prevention and treatment services for evidence-based programming and policy decisions.

3. Mobilizing domestic resources for prevention programme through initiating a Financing Dialogue with relevant line ministries in high prevalence provinces (i.e., Sindh and Punjab where HIV burden accounts to 93%).

4. Address stigma and discrimination through effective implementation of legislations i.e., Sindh HIV and AIDS Control Treatment and Protection Act 2013, strengthen Sindh AIDS Commission, introduce HIV legislations in other provinces, support effective implementation of Transgender Person (Protection of Rights) Act 2018.

5. Integrate HIV services into the health system (Universal Health Coverage, sexual and reproductive health, tuberculosis, etc.) to take AIDS out of isolation and adopt multi-sectoral approach for prevention and halt further spread among 64% of young population of the country.