ASIA

In 2005, some 8.3 million people were living with HIV in Asia, including 1.1 million people who became newly infected in the past year. AIDS claimed some 520,000 lives in 2005.

- National HIV infection levels in Asia are low compared with some other continents, notably Africa. But the populations of many Asian nations are so large that even low national HIV prevalence means large numbers of people are living with HIV. Injecting drug use is the strongest initial driver of HIV infection in Asia.

- In China, HIV cases have been detected in all 31 provinces. The most serious HIV epidemics in China to date have been clustered among specific population groups (injecting drug users, sex workers, former plasma donors, and their partners) and in certain geographical areas, especially in the south and west of the country.

- HIV prevalence of 18-56% was found in drug injectors in six cities in the southern provinces of Guangdong and Guangxi in 2002, while in Yunnan province just over 20% of injectors tested positive for HIV the following year. Paid sex probably accounts for a large part of the estimated 20% of HIV infections in China that are due to unprotected heterosexual contact. The potential overlap between paid sex and injecting drug use is likely to become the main driver of China’s epidemic.

- China has made slow progress in realizing the 2003 pledge to provide free antiretroviral treatment to all who need it; by June 2005, about 20,000 people were receiving the drugs in the 28 provinces and autonomous regions where antiretroviral treatment had been introduced.

- Diverse epidemics are underway in India, where an estimated 5.1 million Indians were living with HIV in 2003. Although levels of HIV infection prevalence appear to have stabilized in some states (such as Tamil Nadu, Andhra Pradesh, Karnataka and Maharashtra), it is still increasing in at-risk population groups in several other states. As a result, overall HIV prevalence has continued to rise.

- Transmitted mainly through unprotected sex in the south and injecting drug use in the north-east of India, HIV is spreading beyond urban areas. A significant proportion of new infections are occurring in women who are married and who have been infected by husbands who visited sex workers.

- Surveys carried out in various parts of India in 2001 found that 30% of street-based sex workers did not know that condoms prevent HIV infection, and in some states fewer than half of all sex workers knew that condoms prevent HIV. Large proportions of sex workers (42% nationally) also thought they could tell whether a client had HIV on the basis of his physical appearance.

- Indonesia is on the brink of a rapidly worsening AIDS epidemic mainly due to widespread injecting drug use. Over 70% of people who requested testing in Pontianak (on the island of Borneo) discovered that they were infected with HIV; three quarters of them were injecting drug users. Meanwhile, HIV prevalence as high as 48% has been found in drug injectors at rehabilitation centres in Jakarta.
In Viet Nam, where HIV already has spread to all 64 provinces and all cities, the number of people living with HIV has doubled since 2000 reaching an estimated 263,000 in 2005. HIV infection levels of 40% among drug injectors are not unusual.

The combination of high levels of risk behaviour and limited knowledge about AIDS among drug injectors and sex workers in Pakistan favours the rapid spread of HIV, and new data suggest that the country could be on the verge of serious HIV epidemics. Already an explosive epidemic has been detected among injecting drug users in Karachi, 23% of whom were found to be HIV-infected in 2004.

Knowledge of HIV among injectors (and sex workers) is extremely low. In Karachi, more than one quarter had never heard of AIDS and as many did not know that sharing injecting equipment could leave them infected with HIV. One in five sex workers cannot recognize a condom, three-quarters do not know that condoms prevent HIV and one-third have never heard of AIDS.

In Malaysia, approximately 52,000 people were living with HIV in 2004, the vast majority of them young men (aged 20-29 years), and three-quarters of them injecting drug users.

Thailand has been widely hailed as one of the success stories in the response to AIDS. By 2003, estimated national adult HIV prevalence had dropped to its lowest level ever, approximately 1.5%. However, a study in four cities (including Bangkok and Chiang Mai) found that sex workers reported using condoms only 51% of the time, and mostly with foreigners—a large difference compared to the remarkable 96% rate reported in a 2000 study in Bangkok. Only about one in four Thai clients was likely to use a condom.

High HIV prevalence has been found among men who have sex with men in Thailand. In one recent study in Bangkok, 17% of men who have sex with men were HIV-positive and almost one quarter of them had also had sex with women in the previous six months.

In Myanmar limited prevention efforts led HIV to spread freely—at first within the most at-risk groups and later beyond them. Consequently, Myanmar has one of the most serious AIDS epidemics in the region, with HIV prevalence among pregnant women estimated at 1.8% in 2004.

In Bangladesh national adult HIV prevalence is below 1%. Bangladesh began initiating HIV prevention programmes early in its epidemic and, partly due to focused prevention efforts, HIV prevalence in female sex workers has stayed low (0.2%-1.5% in different sentinel sites). However, the quality and coverage of those initiatives requires strengthening if more rapid HIV transmission is to be prevented.

In the Philippines, national adult HIV prevalence has stayed low, even among at-risk populations. However, there are warning signs that this might change. Condom use during paid sex is infrequent, prevalence of sexually transmitted infections has been rising, and high rates of needle-sharing among drug injectors has been found in some parts. According to a major 2003 survey, more than 90% of respondents still believed that HIV could be transmitted by sharing a meal with an HIV-positive person.

In Japan, the number of reported annual HIV cases has more than doubled since 1994-1995, and reached 780 in 2004—the highest number to date. Much of this trend is due to increasing infections among men who have sex men. Unprotected sex between men accounted for 60% of new HIV cases in 2004.

For more information, please contact Dominique De Santis, UNAIDS, Geneva, tel. +41 22 791 4509 or mobile +41 79 254 6803, or Annemarie Hou, UNAIDS, Geneva, tel. +41 22 791 4577. For more information about UNAIDS, visit www.unaids.org.