

Chapter 7

HIV/AIDS and Vulnerable Populations



The HIV epidemic in Pakistan is concentrated in a few key populations. Recognizing that the risky behaviors of these populations, among them injectable drugs users, has the potential to spread the epidemic faster if not contained, Parliament passed the HIV and AIDS Prevention and Treatment Act, in 2007.

After the completion of the five year National HIV/AIDS Strategic Framework II (Dec. 2011), each province is developing an AIDS strategy that will be consolidated into a Pakistan AIDS Strategy for the period 2012-2016 (PAS III). Gender is recognized as an important determinant of vulnerability and access to HIV services, and “gender sensitivity” is noted as one of the key guiding principles for PAS III.

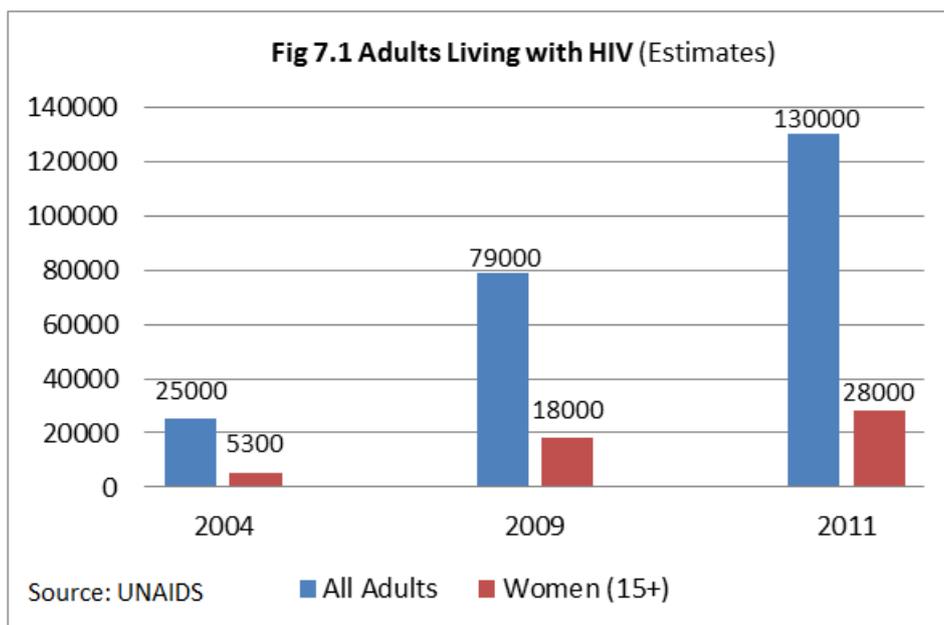
The main implementing agency is the National Aids Control Program (NACP) and the Provincial Aids Control Programs (PACPs). The focus of the government and NGO strategy has been on prevention, raising awareness of HIV/AIDS particularly amongst vulnerable populations.

NACP has detailed policy guidelines on blood transfusion, referral lab, treatment and care and procurement.¹⁰⁴ It also runs seven sites for the prevention of mother / parent-to-child transmission of HIV.

Most of the data now used for reporting on HIV/AIDS progress against international commitments is generated through the HIV/AIDS Surveillance Project or HASP, which is a collaborative effort of Canada and Pakistan for second-generation surveillance of HIV in Pakistan. HASP conducted four surveillance rounds among key populations at risk of HIV in Pakistan beginning with an in-depth mapping to estimate the sizes and locations of the key populations. The key at risk populations are injectable drug users (IDUs), female sex workers (FSWs), male sex workers (MSWs) and *hijras* or transgender sex workers (HSWs).

The figures reported in the following pages could be underestimated, as social stigma and lack of awareness prevents HIV positive individuals from recognizing the symptoms or registering with relevant health services.

104 NACP website <http://www.nacp.gov.pk>



HIV prevalence is at 0.01% of the population, estimated at 130000 persons, an increase from 79000 persons at the end of 2009.

2% of the HIV positive population is 0-14 years old and 3% are less than twenty years old.

Other than female sex workers, the percentage of women in the identified HIV positive population is low. Given the social stigma attached to HIV/AIDS and lack of awareness about testing and prevention, these numbers may well be larger- particular for women whose husbands may be positive.

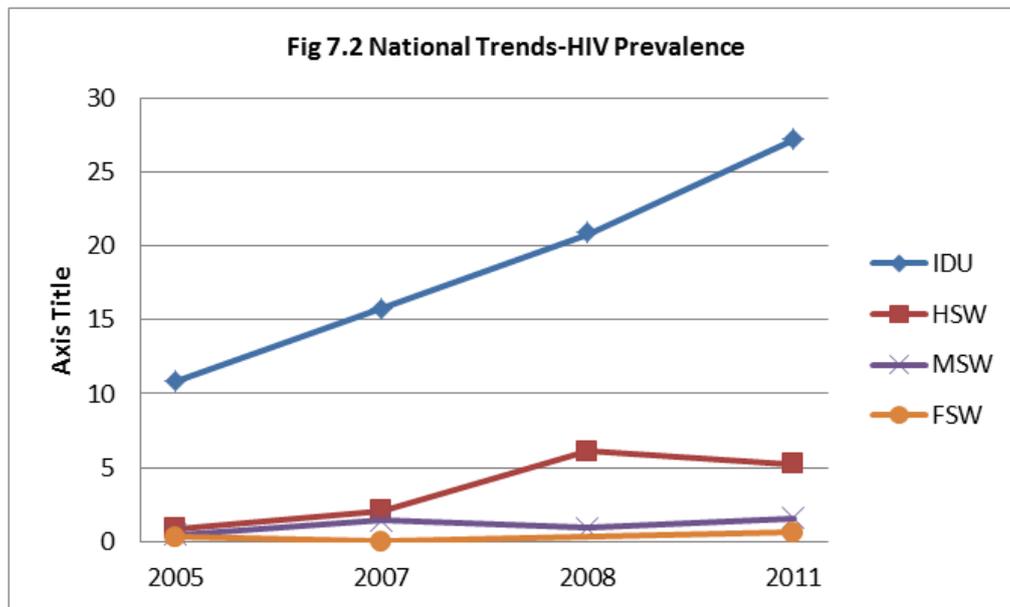
Specific awareness and knowledge of AIDS is a low 3.4% among females aged 15-24 years¹⁰⁵, but is slightly higher for married women in the same age group, in which 28% knew about sexual mode of transmission and 17% knew about condom protection against HIV.¹⁰⁶

These low figures point to the persistence of social taboos and stigma associated with AIDS, which prevents individuals, particularly women from accessing medical care. There is also a lack of awareness as HIV positive individuals, particularly women, may be unaware of their condition.

105 UN Statistics Division 2007

106 DHS 2007 cited in NACP Progress Report 2012

Trends in HIV Prevalence - Pakistan



Classified as a 'low prevalence high risk' country until recently Pakistan has now transitioned to a 'concentrated phase' with HIV prevalence rising mainly among the injection drug users (IDUs) from approximately 11% in 2005 to nearly 27% in 2011.

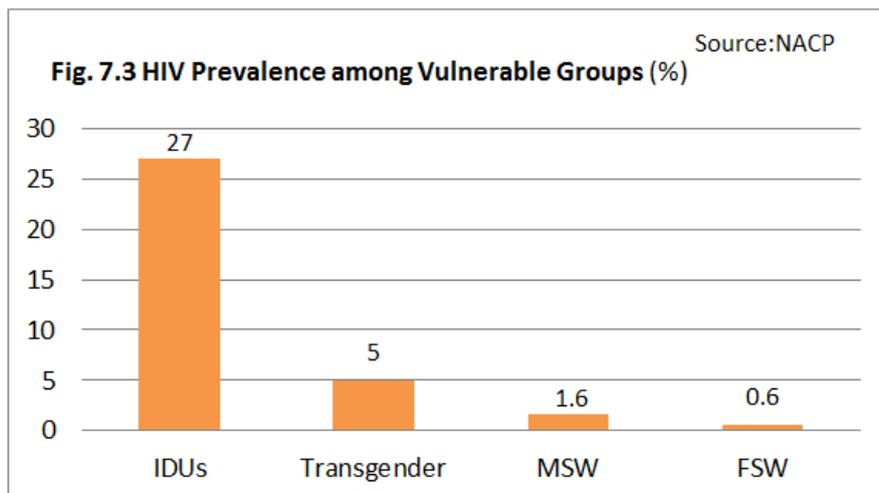
The numbers are concentrated in a few high-risk groups, in the age group 20-45 years (Fig 7.2) mainly injection drug users, and¹⁰⁷ about 11% of the FSWs are 15-19 years old. Of the estimated MSWs and HSWs 23% are 15-19 years old.¹⁰⁸

Fifty percent of the IDUs are married. Cases of children born to HIV positive mothers have been reported.

Awareness programs by national and international organizations, specifically focused at high-risk populations, has raised condom use to 45% amongst sex workers, 31% amongst IDUs and 24% amongst MSMs

107 NACP Pakistan Progress Report 2012 pg 15

108 NACP 2004, HASP Round 1 Surveillance

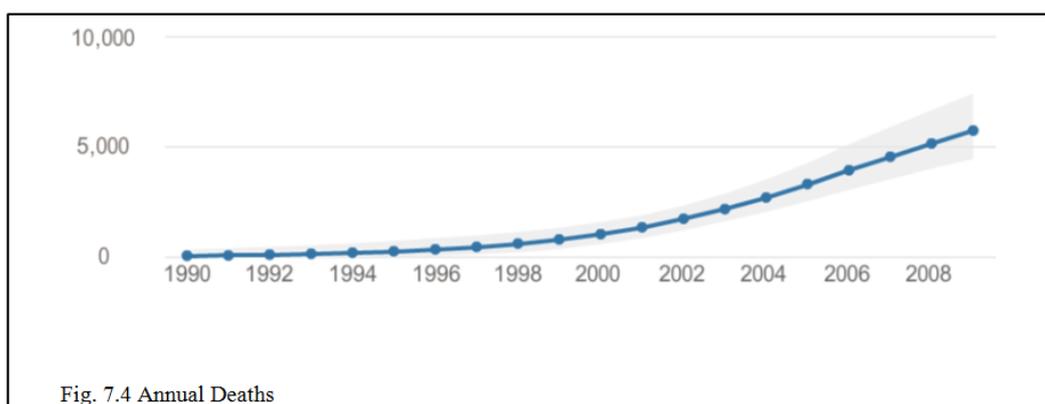


Over 40% of seroprevalence is reported among IDUs in some cities (2011 surveillance data), and it is the risky behavior of these individuals that has the potential to spread to other key populations including men who have sex with men (MSM) and male, female and transgender *hijra* sex workers (HSWs).

5,256 people HIV positive persons are registered in 17 antiretroviral therapy (ART) centers ¹⁰⁹

2491 registered HIV positive individuals received antiretroviral therapy -105 children, 646 adult females and 1740 adult males. ¹¹⁰

Majority of care receivers are IDUs, approximately half of these are on ART i.e. only 9% of the population with advanced HIV infection had access to antiretroviral drugs. ¹¹¹ The annual number of AIDS related deaths is steadily rising (Fig 7.4) ¹¹²



109 Figures are for the end of 2011: 189 children, 1018 women, and 4049 men

110 Pakistan Country Progress Report 2012, NACP, Islamabad

111 MDG Report 2012 UN

112 Source: UNAIDS Epidemiological Factsheet, Pakistan (<http://aidsinfo.unaids.org>)

