

# Meeting the HIV prevention needs of young people in Asia: The need for (cost-) effective policies and programs

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E-mail contact: [j.wijngaarden@unescoykk.org](mailto:j.wijngaarden@unescoykk.org) ABSTRACT No

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## Lessons learned:

- Current policies on HIV and adolescents and young people (AYP) tend to assume all AYP are at equal risk and vulnerability for HIV. This is not in line with recent epidemiological evidence, which suggests that 95% of adolescents infected with HIV in the Asia Pacific region were infected via one of three key risk behaviors: unprotected sex in the context of sex work, unsafe use of needles and syringes during injecting drug use and unsafe male to male sex.
- There is a need to diversify strategies for AYP, and prioritize those most at risk of HIV
- Existing programs for people engaging in risk behaviors need to be made AYP friendly

## Recommendations:

Asian HIV strategies and programs for AYP need to prioritize age-and gender-appropriate comprehensive HIV prevention for most at risk AYP, where the needs are highest. The use of 'youth' as a target group should be discouraged in favor of a classification in line with differing levels and likelihood of exposure to HIV.

## Background:

HIV prevalence among men who have sex with men is rising in Asia. Continuing high HIV prevalence in injecting drug users and those involved in sex work is reported. According to the Asia AIDS Commission report, 75% of HIV transmission occurs within the context of these three behaviors in Asia, and a significant proportion of people with risk behaviors are AYP.

Nevertheless, most national programmes have not prioritized comprehensive HIV prevention for AYP at high risk, but focus on those who are at lower risk of infection.

## Methods:

- A review of country-level policies in Asian countries was conducted in 2007, focusing on AYP and HIV.

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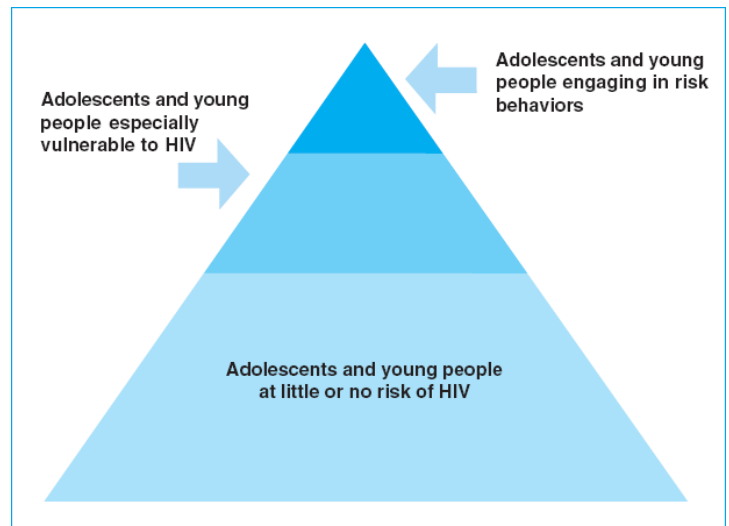


Figure 1. Pyramid of risk and vulnerability Source: Responding to the HIV prevention needs of adolescents and young people in Asia: Towards (cost-) effective policies and programmes

## Results:

All policies consider 'youth' – often comprising up to half of the population – as a 'target group' except Pakistan – which has an explicit country strategy distinguishing between differing needs of high risk- and other AYP.

Asian policy frameworks are mostly not in line with epidemiological evidence in the region, which suggests that adolescents or young people (AYP) should be divided into three categories:

- First, those engaging in high risk behaviors,
- Second, those likely to start engaging in risky behaviors (eg. AYP on the streets, working AYP or migrants)
- Third, those who are in situations of very low vulnerability or risk of HIV infection (a majority of AYP).

Programs focusing on AYP with low-risk should only be considered after programs focusing on high-risk AYP have been sufficiently scaled up. For low-risk AYP, comprehensive prevention could be integrated into broader health and development efforts.