



We know element of effective SW interventions

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Effective SW HIV prevention programs have six tightly interconnected components:

- Behavior change communication usually through peer education
- Condom promotion and provision
- HIV testing and counseling
- Solidarity and group empowerment
- A supportive local and national legal environment

Injecting Drug Use

- Throughout Asia and Eastern Europe, IDU drives HIV, directly and by injecting HIV into commercial sex networks
- Injecting drug use the spark plug that ignites sexual transmission, sex work the engine that maintains it
- European and Asian data shows how injecting drug use fuels HIV in sex work, fundamentally amplifying epidemic potential
- Eastern Europe, Central Asia, Iran, Afghanistan, Pakistan, Indonesia, Philippines lands of opportunity-effective IDU programs can radically curtail sexual epidemics

Thailand is mainly SW initiated

HIV prevalence among IDU in Asia: high prevalence in Burma Thailand
Indonesia Nepal Vietnam and Cambodia

Access to opioid substitution therapy in Eastern Europe and China: high Access in
Hungary Czech Rep. China Lithuania Estonia and Moldova

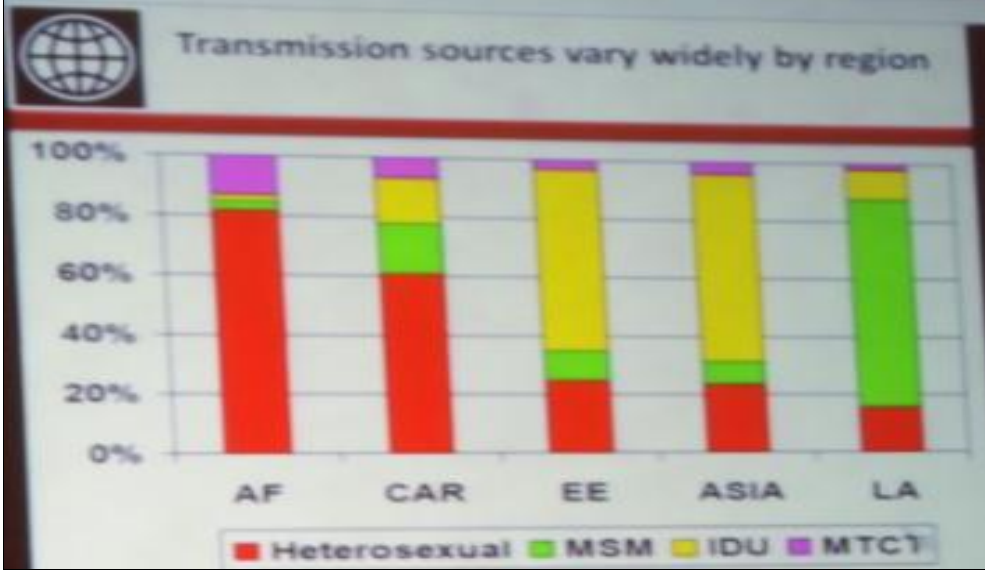
MSM epidemics may incubate slowly then surge

HIV prevalence among MSM in Asia

HIV prevalence among MSM in China : 2009 higher than 2007 in <25 group and
25+ years old

HIV prevalence among MSM in Sichuan China: higher from 0.5 – 10.0+ in 2003-
2007

Transmission source vary widely by region



HIV prevalence by number of clients per sex worker

