BACKGROUND
The unrivalled pace of development in Southeast Asia has been accompanied by accelerated transmission of HIV/AIDS across borders in urbanized areas, and among marginalized populations such as men who have sex with men, intravenous drug users and sex workers.

The United Nations estimates that the number of annual new HIV infections in the Asia-Pacific region has declined by 20 percent from 450,000 in 2001 to 360,000 in 2009 and that the number of people accessing life-saving antiretroviral treatment has tripled from 2006 to 2009 to over 740,000. Despite these accomplishments, less than one-third of all individuals across the region who need HIV treatment are receiving it.

Innovation and partnerships are essential to increase the impact and reduce the costs of national responses to the HIV epidemic. As countries begin to invest more directly in their own HIV programs, the integration of HIV and other health services will provide welcome opportunities to improve implementation quality and efficiency. But even with enhanced political commitments to eliminating new HIV infections, reducing HIV-related deaths and eliminating HIV-related stigma and discrimination, there will be an ongoing need for civil society to provide leadership in identifying, advocating for, and effectively addressing the needs of most-at-risk populations.

APPROACH
Since 2003, USAID has supported HIV programming that addresses the diverse needs of the most-at-risk populations and people living with HIV/AIDS in Burma, China (the southern two provinces of Yunnan and Guangxi), Laos and Thailand. Through the U.S. President’s Emergency Plan for HIV/AIDS Relief (PEPFAR), USAID partners with the Centers for Disease Control and Prevention (CDC), to help countries throughout the Mekong region identify, evaluate, adopt, implement and lead more effective and cost-efficient approaches to address HIV/AIDS.
This entails work with men who have sex with men, people who inject drugs, sex workers and their clients. Prevention efforts focus on “hotspots” that are often also migration transit points in the region. Care and support for persons living with HIV strive to bring high-quality services by contacting beneficiaries wherever they may travel, connecting them with local services, and enabling them to lead full and productive lives. To achieve its goals, the program focuses on the four major components below.

- Increasing availability of strategic information through improved data collection and analysis.
- Improving access to comprehensive, evidence-based prevention interventions for most-at-risk populations and people living with HIV/AIDS.
- Raising access to care and treatment for people living with HIV/AIDS and their families.
- Strengthening the enabling environment which is comprised of information, counseling and services, to encourage participation of civil society and promote supportive policies and regulations.

**IMPACTS**

USAID regional HIV/AIDS program achievements in Burma, China, Laos and Thailand at the end of 2011 are outlined below.

- More than 228,622 people benefited from community outreach activities to prevent the transmission HIV.
- More than 12,919 individuals have benefitted from innovative HIV testing and counseling services such as mobile drop in testing centers providing on-the-spot testing, results and counseling.
- Some 11,419 HIV-infected or affected individuals received basic clinical care, HIV care, as well as home-and community-based care. A total of 4,412 individuals also received life-saving drug therapy.
- Because confidentiality and safety are essential to providing HIV-related services, more than 320 local organizations received technical assistance for establishing information activities, HIV-related policy development, and HIV-related institutional capacity building development.

**PARTNERS**

**Implementing Partners:** Population Services International, Family Health International 360, Pact

**Cooperating Partners:** ASEAN, APN+, the A-Squared consortium, CDC, the Global Fund for AIDS, TB and Malaria, the Asian Development Bank, the World Bank, UNAIDS and AusAID