

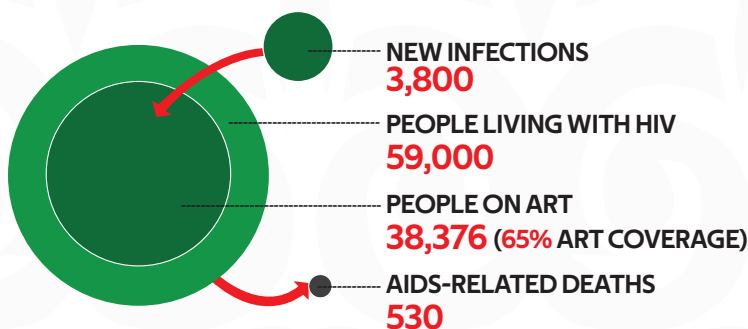
HIV SNAPSHOT 2021

The HIV epidemic in Papua New Guinea has been changing since 2018. The impact of COVID-19 has taught us many lessons which have put a spotlight on many faulty lines within the country's health system. Considering the country's complex geographical settings, challenges in logistics & supply of essential drugs, and increased socio-economical issues such as the election related incidents, tribal warfare, sorcery related killings and poverty to name a few has placed a huge strain on provinces to deliver much needed basic health services.

Although there is enough evidence of the up-scaling of HIV services and deliberate program interventions through increased financial resources and technical support from the government, development partners, donor agencies, private enterprise and stakeholders at targeted population, the impact is not visibly seen.

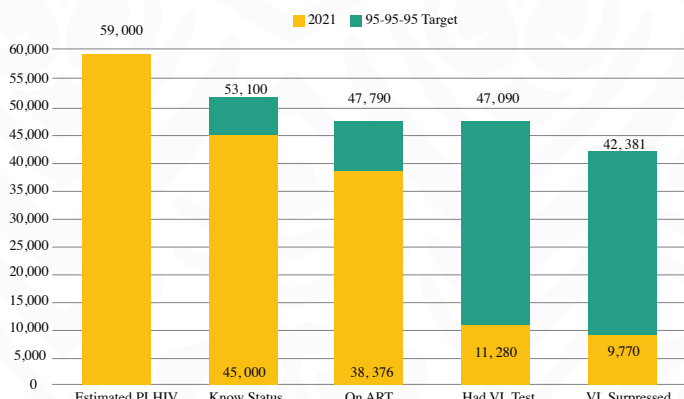
As a result of the COVID-19 pandemic, HIV testing services have declined in the last three (3) years which has significantly contributed to the steady increase in the number of new HIV infections to 3,800 in 2021 compared to 3,400 in 2020. Approximately 10 people are infected everyday and 2 people die of HIV per day.

While the scale-up of ART has improved with AIDS-related deaths slowly increasing, HIV prevention on the other hand is not doing well. Many people including other marginalized and key populations faced challenges every day to access basic HIV services. Stigma & Discrimination is seen as a key barrier that has deprived the rights for People Living with HIV (PLHIV) and key populations in also accessing key services.



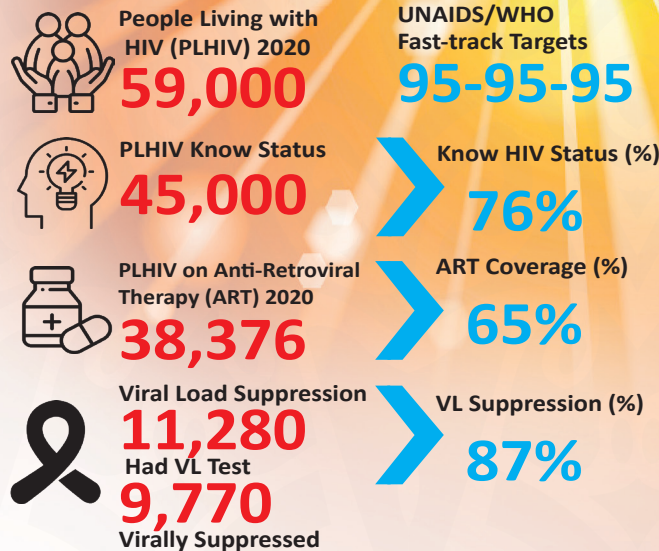
Source: Global AIDS Monitoring 2022 and UNAIDS 2022 HIV Estimates

HIV Care & Treatment Cascade 2021

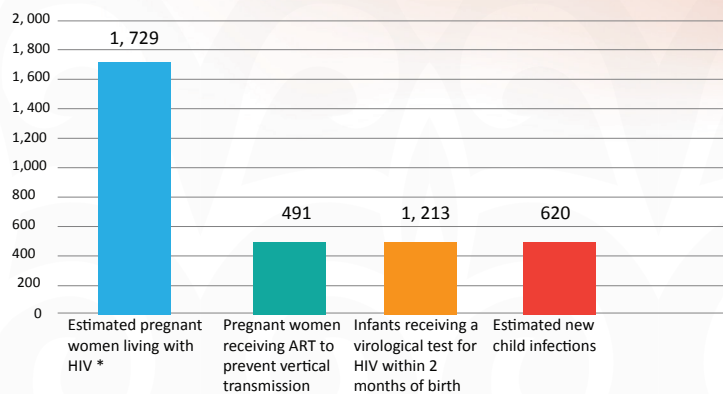


Sources: 2022 Spectrum Estimates; HPDB; VLMS

PNG FAST TRACK TARGETS



Prevention-Mother-To-Child-Transmission (PMTCT)



* Estimated number of women living with HIV who delivered within the past 12 months

Source: Global AIDS Monitoring 2022 and UNAIDS 2022 HIV Estimates

Vertical transmission among pregnant women living with HIV still remains at less than 1 percent. Whilst substantive efforts have been made to improve care and accessibility for antenatal care mothers, data shows very low attendance of adolescent girls and women including pregnant mothers at ANC clinics.

HIV/AIDS Spendings by Financing Entities

Source: PNG NASA Report 2016-2019

Financing Entities	2016		2019	
	PGK	%	PGK	%
FE.01 Domestic public entities	11,160,222	18%	24,914,098	32%
FE.02 Domestic private entities			242,600	<1%
FE.03 International entities	52,166,228	82%	53,376,928	68%
FE.03.01.01 Government of Australia	21,484,539	41%	11,472,478	21%
FE.03.01.30 Government of United States	13,930,922	27%	10,847,082	20%
FE.03.02.06 Regional Development Banks (Africa, Asia, Latin America and th	890,000	2%	-	-
FE.03.02.07 The Global Fund to Fight AIDS, Tuberculosis and Malaria	14,024,819	27%	27,847,818	52%
FE.03.02.08 UNAIDS Secretariat	488,731	1%	1,445,007	3%
FE.03.02.09 United Nations Children's Fund (UNICEF)	939,914	2%	545,785	1%
FE.03.02.13 United Nations High Commissioner for Refugees (UNHCR)	31,057	<1%	52,749	<1%
FE.03.02.17 United Nations Population Fund (UNFPA)	270,000	1%	-	-
FE.03.02.20 World Health Organization (WHO)	32,872	<1%	113,550	<1%
FE.03.03.99 Other International not-for-profit organizations and foundations	73,373	<1%	889,413	2%
FE.03.04 International for profit organizations	-	-	163,046	<1%
Grand Total	63,326,450	100%	78,533,625	100%

Working towards ending the global threat of HIV and AIDS is a shared responsibility for governments, civil society, communities, donors, multilateral institutions such as the United Nations, regional bodies, and other stakeholders.

The National AIDS Spending Assessment 2016-2019 revealed, that the Global Fund is the single biggest source of funding for HIV programme in

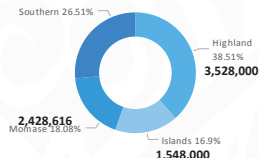
Papua New Guinea since 2017. Its resources have increased from PGK 14M in 2016, representing 27% of total international expenditure to a little less than 28M in 2019 (36%).

However, over the years, these fundings meant for supporting in-country programmes are managed through various external third party organizations. NASA also revealed that much of the public financing entities are channeled through the National AIDS Council Secretariat and National Department of Health. Data from Provinces were unavailable during the time of the survey.

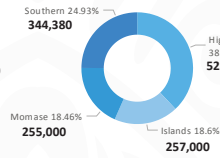
CONDOM DISTRIBUTION | 2022

Condom Distribution by Region.

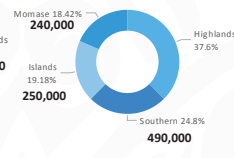
Sum of # of Pieces MC by Region



Sum of # of Pieces FC by Region



Sum of # of Pieces Lub by Region



Service Provider Type	Sum of # of Pieces MC	Sum of # of Pieces FC	Sum of # of Pieces Lub
NGO	64,800	5,000	1,000
Private	27,900	1,000	0
Public	9,067,916	1,375,380	1,302,250
Total	9,160,616	1,381,380	1,303,250

Region	Sum of # of Pieces MC	Sum of # of Pieces FC	Sum of # of Pieces Lub
Highlands	3,528,000	525,000	490,000
Eastern Highlands Province	504,000	75,000	70,000
Enga Province	504,000	75,000	70,000
Hela Province	504,000	75,000	70,000
Jiwaka Province	504,000	75,000	70,000
Simbu Province	504,000	75,000	70,000
Southern Highlands Province	504,000	75,000	70,000
Western Highlands Province	504,000	75,000	70,000
Islands	1,548,000	257,000	250,000
ARoB	288,000	50,000	50,000
East New Britain	288,000	50,000	50,000
Manus	288,000	50,000	50,000
New Ireland Province	324,000	52,000	50,000
West New Britain Province	360,000	55,000	50,000
Momase	1,656,000	255,000	240,000
East Sepik Province	288,000	50,000	50,000
Madang Province	504,000	75,000	70,000
Morobe Province	504,000	75,000	70,000
West Sepik Province	360,000	55,000	50,000
Southern	2,428,616	344,380	323,250
Central Province	367,200	55,000	50,000
Gulf Province	302,400	51,000	50,000
Milne Bay Province	288,000	50,000	50,000
National Capital District	859,916	88,380	73,250
Oro Province	288,000	50,000	50,000
Western Province	323,100	50,000	50,000
Total	9,160,616	1,381,380	1,303,250

Condom Distribution has increased significantly from 1.2 million in 2021 to nearly 10.5 million in 2022. Highlands had the highest sum of # of pieces of Male Condoms at 3,528,000 (38.51%) followed by Southern, Momase, and Islands. This major increase was a result of increased prevention efforts during the 2022 National General Election.

Other Provincial reports indicated that many provinces had condoms in stock but face challenges in logistics and distribution due to lack of financial resources and partner support. Geographical location and road accessibility are also key external factors affecting supply and availability of condoms. Although condoms and lubricants are being consumed, it is difficult to track consumers from general population because of stigma due to the country's complex human, social and cultural norms.

IN COLLABORATION WITH:



Facts @ Glance

- The burden of HIV in PNG continues to grow with both HIV prevalence and incidence continuously rising. PNG is far from reaching its 90-90-90 global targets.
- The number of new HIV infections has increased to 3,800 in 2021. Approximately 10 people are infected everyday. AIDS-related deaths have reduced indicating that PLHIV's are responding treatment.
- People Living with HIV (PLHIV) 2021**
 - All PLHIV - Adults & Children **59,000**
 - Females (15+ years) **33,000**
 - Males (15+ years) **22,000**
 - Children (0-14 years) **3,500**
- PLHIV on Treatment (ART)**
 - All on treatment **38,376**
 - Adults (15+ years) **36,372**
 - Females (15+ years) **22,551**
 - Males (15+ years) **13,821**
 - Children (0-14 years) **2,004**
- The high transmission is largely due to;
 - Weak HIV prevention efforts particularly on raising awareness among the most at risk communities
 - High levels of intimate partner violence plus stigma and discrimination in communities
 - Inadequate support for comprehensive condom programming
 - Poor access to ANC services and PPTCT for pregnant women
 - Inequitable access to HIV prevention, care and treatment by key populations.
- HIV prevalence remain high at 0.9 per cent where HIV services are not reaching enough key populations. This means that 1 in 100 people are HIV positive
- Stigma and discrimination including Gender Based Violence (GBV) have been established as key barriers to HIV prevention and has negatively impacted all stages of the care and treatment cascade for people living with HIV (PLHIV).
- Access to Viral Load testing is very low
- TB-HIV Co-Management**
 - TB is the commonest opportunistic infection and cause of death among PLHIV .
 - Around one in five PLHIV enrolled on ART has active TB .
 - Not all PLHIV accessing ART get routinely screened for active TB and only 11% .accessed TB preventive therapy in 2020.
 - PLHIV on ART fail to access integrated one-stop-shop TB/HIV services and particularly TB preventive therapy (TPT)
- Due to low literacy levels among the sexually active and young adolescents, many lack basic knowledge on HIV prevention measures and their exercising their rights and privileges to access basic health services.

Progress is still too slow, and if the country continues at the current trajectory, it will fail to meet the 2030 targets.

We have reached beyond 2020. What is next?

- It is clear that efforts to address the HIV pandemic don't just need to be sustained, but need to increase. Stronger collaborations between the many stakeholders is needed.
- Governments need to invest in health care and in HIV prevention.
- Political will is needed with regards to the commitment to end AIDS as a public health threat by 2030.
- Most of all, accountability of all stakeholders is needed to strengthen the HIV response.

For more information visit:

National AIDS Council Secretariat Facebook Page or LinkedIn Page
Email: whaija@nacs.org.pg | Website: www.nacs.org.pg