Myanmar

Thematic Update 1 August 2012

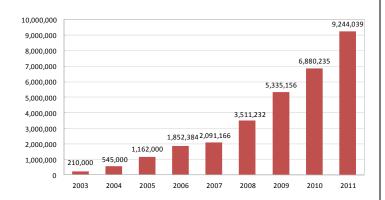
THE SITUATION

The previous NSP (2006-2010) clearly highlighted the need to accelerate the roll out of prevention programmes for injecting drug users. In 2011, the prevalence was measured at 22%. This is the lowest figure during 20 years period, since 1992 up to 2011. However, the prevalence remains unacceptably high and in some sites was still more than 30%. BSS and HSS data showed that the situation of people who inject drugs is substantially different depending on the geographical location. This does render programming more challenging, since established programmes may not just be replicated in new areas. The current size estimate of people who inject drug in Myanmar is 75,000.

THE RESPONSE

Harm reduction services for drug users include needle and syringe exchange, methadone maintenance therapy, condom distribution and peer education and outreach for behaviour change. Over 9 million needles were distributed to IDUs in 2011. 3,614 people were tested for HIV and received results, however, this is still below the target for 2011 of 5,000. Although there is increasing number of drug users reached with increasing number of female drug users accessing services. Limited resources and service delivery sites are available for harm reduction.

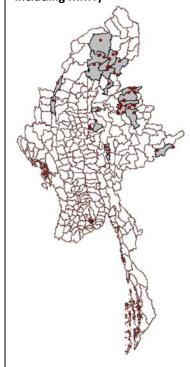
Needles and syringes distributed 2003 - 2010



The number of people on methadone maintenance therapy (MMT) has continued to grow and reached 1,637 clients at the end of 2011. Methadone is being provided in only 12 sites in 11 cities of Yangon, Mandalay, Mytkyina, Mogaung, Bamaw, Waingmaw, Lashio, Muse, Tachileik, Kutkai and Namkham. There is need to increase the number of sites, and adapt the entry procedures and dispensing modalities in order to scale up the MMT provision more substantially. The top three providers of needles and syringes in Myanmar are AHRN, UNODC and MDM.

GEOGRAPHIC COVERAGE

Service Delivery points for harm reduction activities (not including MMT)



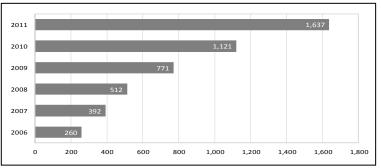
Drop in Center (DIC) activities

- Primary health care
- VCT
- STI treatment
- Counseling and psychosocial support
- Behavior change communication BCC
- Needle & syringe and condom distribution
- Link to treatment services/referrals (TB, ART, MMT ...)

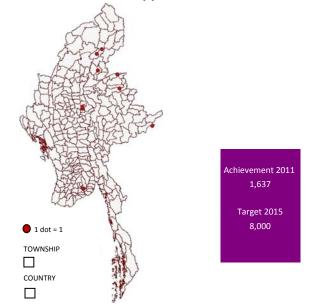
Outreach activities

- Client contacts
- Needle & syringe distribution
- Condom distribution
- Home visits
- Follow up of clients
- Referral services

People on MMT 2006 - 2011



Methadone maintenance therapy





CARE staff raises HIV/AIDS awareness in Kalay

@Care

LEGAL AND POLICY ENVIRONMENT

In 2001, a Directive from the Myanmar Police Force Headquarters was issued stating that possession of hypodermic needles is not grounds for arrest. Narcotic Drugs and Psychotropic Substances act 1993, Section 9 stated that drug users have to register at the place prescribed by the Ministry of Health or at a medical center recognized by the Government to take medical treatment. Registered drug users undergoing treatment must abide by Ministry of Health Directives. Section 15 stated that a drug user failing to register under section 9 or who fails to abide by the Ministry of Health directives is to be imprisoned for a minimum of three years to a maximum of five This law may pose difficulties for drug users to voluntarily get access to methadone treatment and other interventions. Arrests and detentions can result in jail time and service interruptions, especially worrying for those on ART and methadone therapy as it is difficult for people to continue to receive treatment when they are in prison.

RECOMMENDATIONS FOR ACTION

- Scaling up programmes to the extent where substantial impact on the reduction of new infections is achieved
- Address knowledge gaps to better understand the polydrug use, links between sex work and drug, on-set of injecting
- Adapt the methadone programme to attract more patients by suppressing the induction period, increase the number of distribution points to reduce daily travel time
- Legal reform for favourable environment to reduce stigma and discrimination
- Improved knowledge of epidemic, and impact of response so far (this includes population size estimation of IDU and Integrated Bio-Behavioural Surveillance)
- Ensure referrals for people in detention centres and prisons to access ART treatment and/or methadone and other harm reduction interventions

THE NEW NSP (2011-2015)

Coverage targets for 2015

Output/Coverage Targets	Size estimate	Baseline 2009	Target 2015
Number of people who inject drugs/ drug users reached with HIV prevention programmes (DIC)	75,000 IDU 150,000 DU	21,214	38,000
Number of sterile injecting equipment distributed to people who in ject drugs in the last 12 months		5.3 m	20 m
Number of drug users receiving methadone maintenance therapy	75,000	771	8,000
Number of regular sexual partners of people who inject drugs reached with HIV prevention programmes	20,5 50	NA	12,330

RESOURCE NEEDS

The new NSP estimates costs of key services for people who inject drugs and their sexual partners as follow:

Resource Needs for Harm Reduction Key Services up to 2015 (in US\$)

2011	2012	2013	2014	2015
5,115,875	6,301,291	7,400,567	8,770,953	10,219,123

IMPLEMENTING PARTNERS

Government: MoH (NAP, Drug Treatment

Centres), Ministry of Home Affairs (Central Committee for Drug Abuse

Control

INGO: AHRN, AZG, Burnet Institute, Care,

MDM, MSI

Local NGO: MANA, MBCA, SARA

UN: UNODC, WHO