

# MYANMAR (BURMA)

## STRATEGIC FOCUS

The U.S. Centers for Disease Control and Prevention (CDC) office was formally established at the U.S. Embassy in Yangon, Myanmar, in January 2015. CDC supports Myanmar's goal of reaching the Joint United Nations Programme on HIV/AIDS (UNAIDS) 95-95-95 targets by 2030, whereby 95 percent of all people living with HIV (PLHIV) will know their HIV status, 95 percent of all people with diagnosed HIV will receive sustained antiretroviral therapy (ART), and 95 percent of all people receiving ART will have viral suppression. Through the U.S. President's Emergency Plan for AIDS Relief (PEPFAR), CDC has been instrumental in building a sustainable HIV response with other technical and donor partners by developing strategies and operational guidelines for HIV/AIDS prevention and treatment and strengthening surveillance and laboratory systems.

In addition to strengthening Myanmar's national HIV response, CDC has supported efforts to address the tuberculosis epidemic and mitigate the COVID-19 pandemic, including the national rollout of COVID-19 vaccines.

## KEY ACTIVITIES AND ACCOMPLISHMENTS

### HIV

- CDC/PEPFAR support focuses on improving the clinical cascades for HIV prevention, testing, and treatment of key populations (KP) affected by high HIV prevalence and ongoing high-risk behaviors.
- CDC has provided technical support to develop the HIV Testing Guidelines, incorporating the modalities of index testing, self-testing, and peer-led community-based screening in previously unreached KP communities. CDC also helped to update the HIV Treatment Guidelines in Myanmar, including the full implementation of Test and Start—the initiation of ART upon diagnosis—for all PLHIV since 2017 and incorporating key aspects of differentiated services to suit the needs of KP.
- CDC is working with key partners (WHO, UNAIDS, and the Global Fund) to strengthen HIV diagnostics, viral load testing quality management systems, and build capacity for national scale-up of routine HIV viral load testing.
- CDC has provided technical assistance to support KP surveillance, as well as collection and use of data to inform program monitoring, and quality improvement at national and sub-national levels, including through treatment and prevention program reviews.
- CDC Provided technical assistance to conduct Bio Behavioral Surveys (BBS) with KP size estimates for people who inject drugs (2017), female sex workers (2019), and men who have sex with men (2019), and HIV Sentinel Surveillance (HSS) among sentinel groups (2020 & 2023).
- CDC, in partnership with UNAIDS, developed the 2022 and 2023 round of National HIV estimates at the national and sub-national levels using AIDS Epidemic Model followed by Spectrum Modelling. The updated estimates are used in advocacy, planning meetings for national HIV responses and funding proposals for the Global Fund (2024-2026) and PEPFAR (ROP22 and ROP23).
- CDC helped develop and deliver messages for HIV 'Undetectable=Untransmittable' (U=U) program and implemented U=U social media campaign through partners to raise awareness on HIV, particularly on the importance of routine viral load testing, retention on treatment, and reduction of stigma in the community. U=U theme songs reached over 4.4 million views within two weeks via Facebook. As of July 2023, U=U Facebook page has over 62,000 followers.
- With technical support from CDC, Pre-exposure Prophylaxis (PrEP) National Standard Operating Procedures, training curriculum, job aids and National PrEP DHIS-2 tracker were developed in 2020 and updated in 2023 to support PrEP implementation and expansion for all key populations in high HIV burden areas.

### Tuberculosis (non-PEPFAR)

- CDC is working with USAID and partners to provide technical assistance and help build capacity for sustaining tuberculosis (TB) diagnostic and treatment services following the major disruptions from the COVID-19 pandemic and the military coup in February 2021.
- CDC has provided technical support for assuring the quality of laboratory diagnostic services, and the design and implementation of the national tuberculosis prevalence survey and planning for a national drug-resistant TB survey.

### Key Country Leadership

U.S. Charge d'Affaires:  
Susan N. Stevenson

CDC/DGHT Director:  
Fazle Khan

**Country Quick Facts**  
([worldbank.org/en/where-we-work](http://worldbank.org/en/where-we-work))

Per Capita GNI:  
\$1,210 (2022)

Population (millions):  
54.17 (2022)

Under 5 Mortality:  
41.8/1,000 live births (2021)

Life Expectancy:  
65.7 years (2021)

**Global HIV/AIDS Epidemic**  
([aidsinfo.unaids.org](http://aidsinfo.unaids.org))

Estimated HIV Prevalence  
(Ages 15-49): 0.9% (2022)

Estimated AIDS Deaths  
(Age ≥15): 5,900 (2022)

Estimated Orphans Due to  
AIDS: 110,000 (2022)

Reported Number Receiving  
Antiretroviral Therapy (ART)  
(Age ≥15): 202,343 (2022)

**Global Tuberculosis  
(TB) Epidemic**  
([who.int/tb/country/data/profiles/en](http://who.int/tb/country/data/profiles/en))

Estimated TB Incidence:  
360/100,000 population (2021)

TB Patients with Known HIV  
Status Who Are HIV-positive:  
7.1% (2021)

TB Treatment Success Rate:  
87% (2020)

**DGHT Country Staff: 4**  
Locally Employed Staff: 3  
Direct Hires: 1  
Fellows & Contractors: 0

**Our success is built on the backbone of science and strong partnerships.**

September 2023 | The CDC Division of Global HIV & TB activities are implemented as part of the U.S. President's Emergency Plan for AIDS Relief (PEPFAR); non-HIV related TB activities are supported by non-PEPFAR funding.

