

An overview of HIV/AIDS situation of People who inject drugs (PWID) in Hong Kong for Community Stakeholders' Consultation Meeting (CCM) 2021

Background

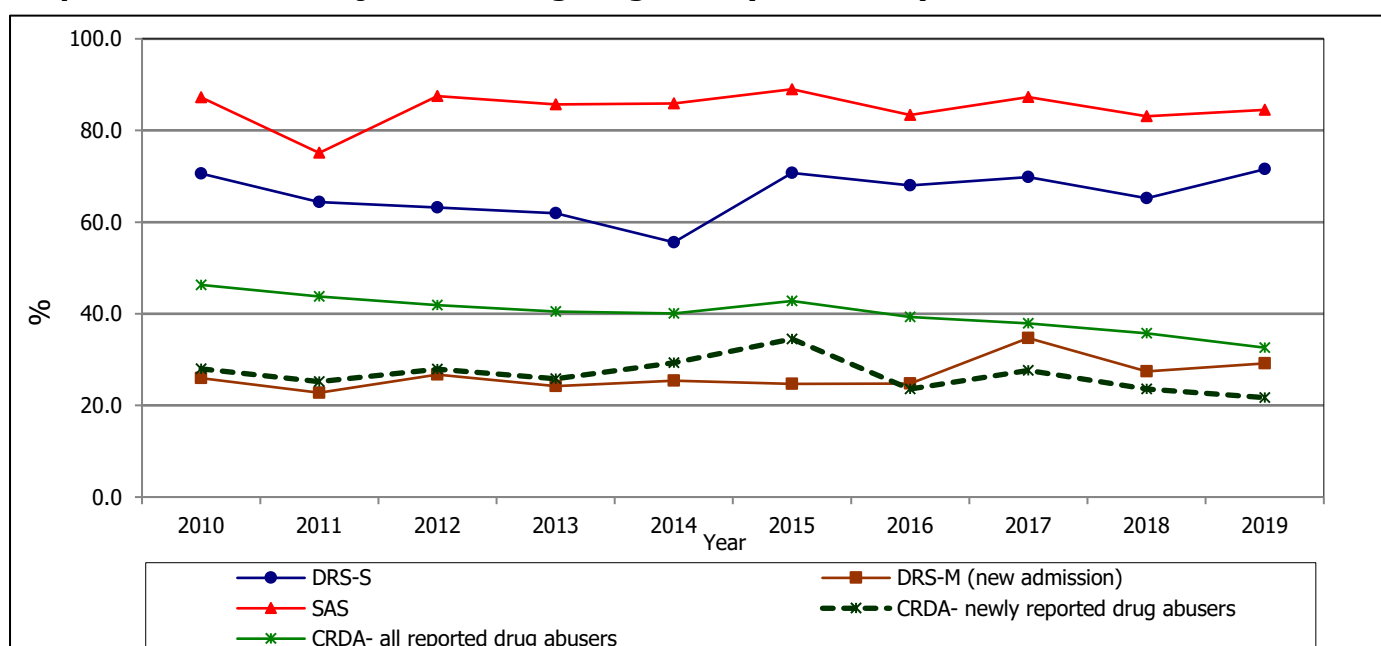
Department of Health (DH) regularly monitors the trend of HIV infection and conducts behavioural surveys of high risk groups including the PWID. The situation of HIV-related risk behaviour of PWID such as condom use and needle sharing has been monitored serially through NGO-based survey - HIV and AIDS Response Indicator Survey ("HARIS"). Though the number of reported new HIV cases remained low in recent years and contributed to less than 5% of all reported cases cumulatively, PWID is still regarded as a vulnerable key population at risk of acquiring HIV infection.

How many PWID (injecting drug users) are there in Hong Kong?

According to figures from Central Registry of Drug Abuse (CRDA), the number of reported heroin abusers and proportion of injectors decreased continuously. The number of PWID in 2019 was 936.

CRDA figures	2015	2016	2017	2018	2019
Number of reported heroin abusers	4421	4058	3722	3626	2872
Percentage of heroin injection	42.8%	39.3%	37.9%	35.7%	32.6%
PWID number	1892	1595	1411	1294	936

Proportion of current injectors among drug users (2010-2019)



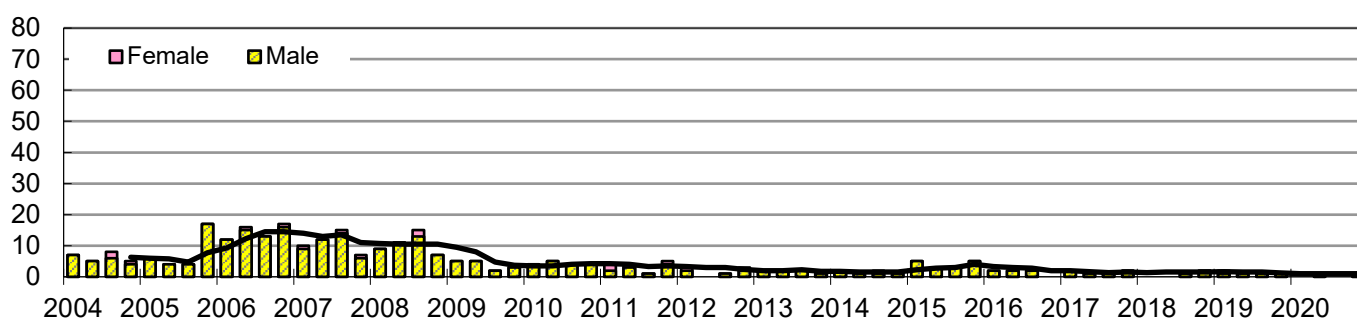
Remarks: DRS-S - Shek Kwu Chau Treatment and Rehabilitation Centre (Newly / Re-admitted case) (drug injection in past 6 months)
 DRS-M - Methadone clinics (Newly admitted case only) (drug injection in at time of programme admission)
 SAS - Street Addict Survey (By Society for the Aid and Rehabilitation of Drug Abusers (SARDA)) (drug injection in past 1 month)
 CRDA - Central Registry of Drug Abuse (drug injection in past 4 weeks)

The above graph showed the percentage of drug users with injecting behaviours varied, subjected to different sampling frame of the surveys. In 2019, it ranged from 29.1% among newly admitted cases in methadone clinics to 84.5% of participants recruited in the Street Addict Survey (SAS) reported to have drug injections.

Trend of new cases

Number of reports remained at a relatively low level with a decreasing trend. PWID only accounted for 1.2% of all new HIV cases from 2011-2020.

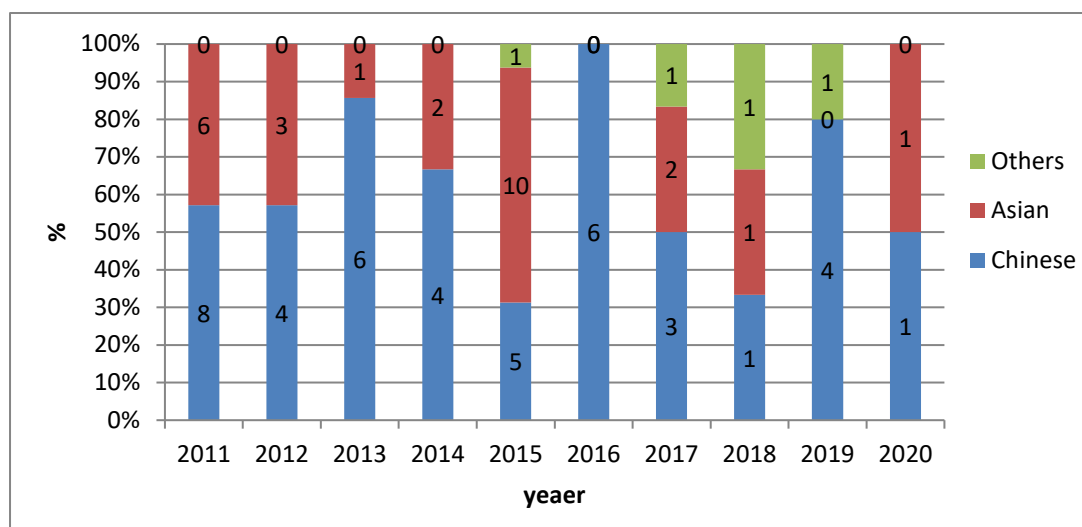
Universal HIV screening in
DH Methadone Clinics
started in 2004



Demographics of reported HIV cases among PWID

In 2011-2020, there were 72 new cases reported to be infected from injecting drugs, with around 90% were males and 75% aged 30-49 years old.

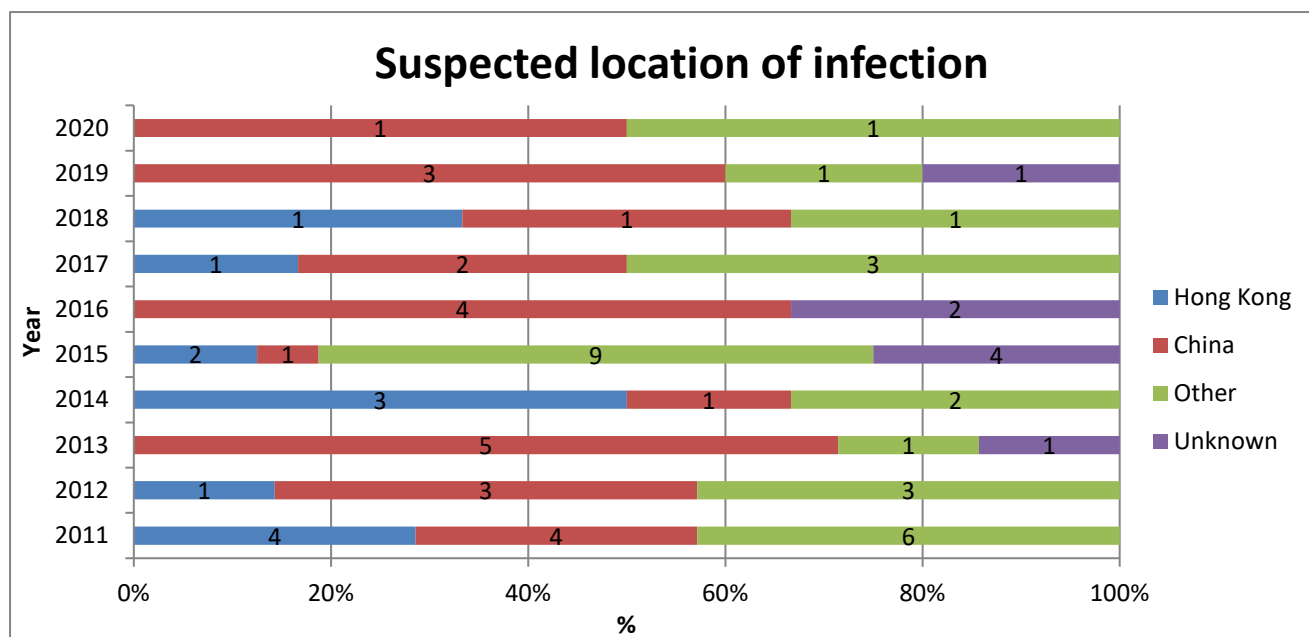
Ethnicity of new cases



In average,
around 60% of
PWID cases
were Chinese
and 36% were
Asian from
2011-2020.

Suspected location of infection

Only 16.7% of cases were suspected locally infected in Hong Kong, while 37.5% in Mainland China and 34.7% in other places (Top 3 countries: Vietnam, Nepal, Indonesia).



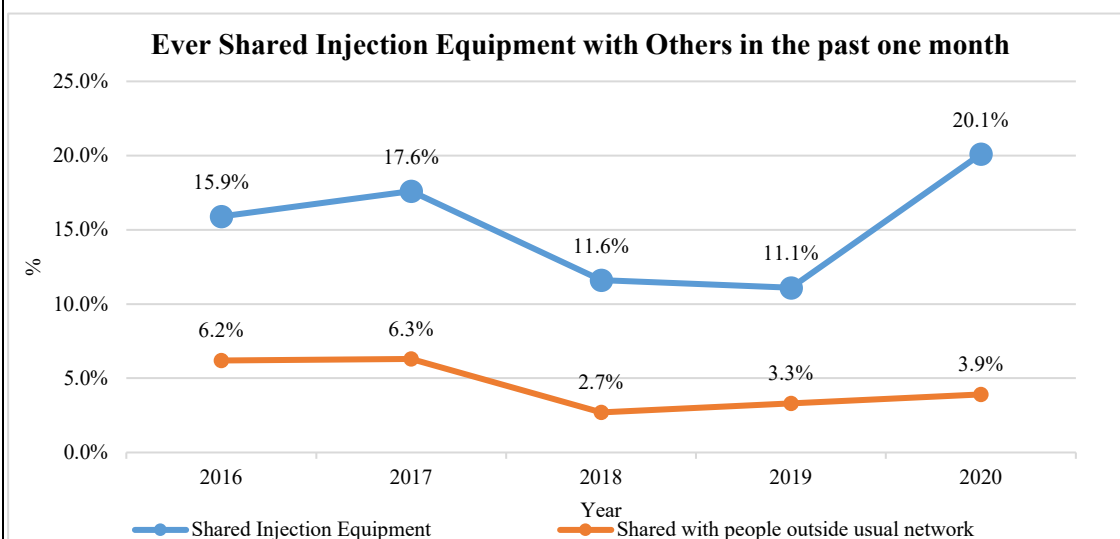
Figures on **HIV prevalence** for PWID were not available. The HIV prevalence among drug users could be used as a proxy for assessing the prevalence among PWID.

HIV prevalence among drug users (including both injectors and non-injectors)

	2015	2016	2017	2018	2019
Methadone clinics attendees	1.01%	1.13%	0.83%	0.91%	1.00%
Shek Kwu Chau rehabilitation centre	0.90%	0.62%	1.70%	0.38%	1.22%
Correctional Services Department (new inmate)	1.24%	0.94%	0.73%	1.03%	0.95%

Generally the HIV prevalence among PWID was at a low level (<1%) over past years.

Share needle behaviours among local PWID (Source: HARiS 2016-2020)



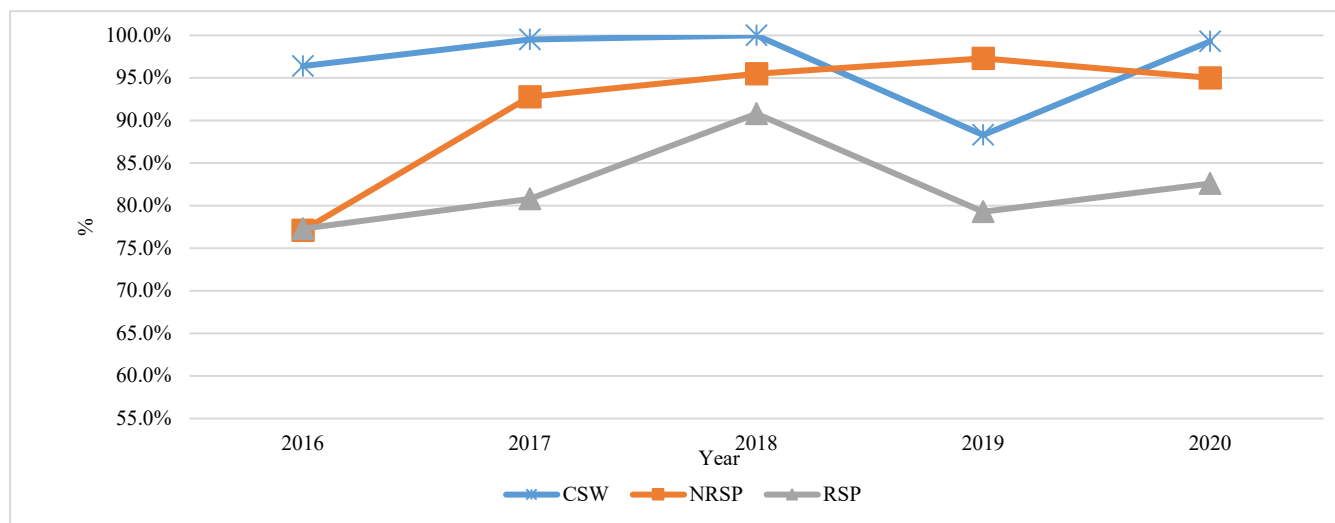
ACA targets in its [Strategies 2017-2021](#)

- <10% of PWID shared needles with other people;
- <5% of PWID shared needles with people outside their usual injection partners; in the past one month.

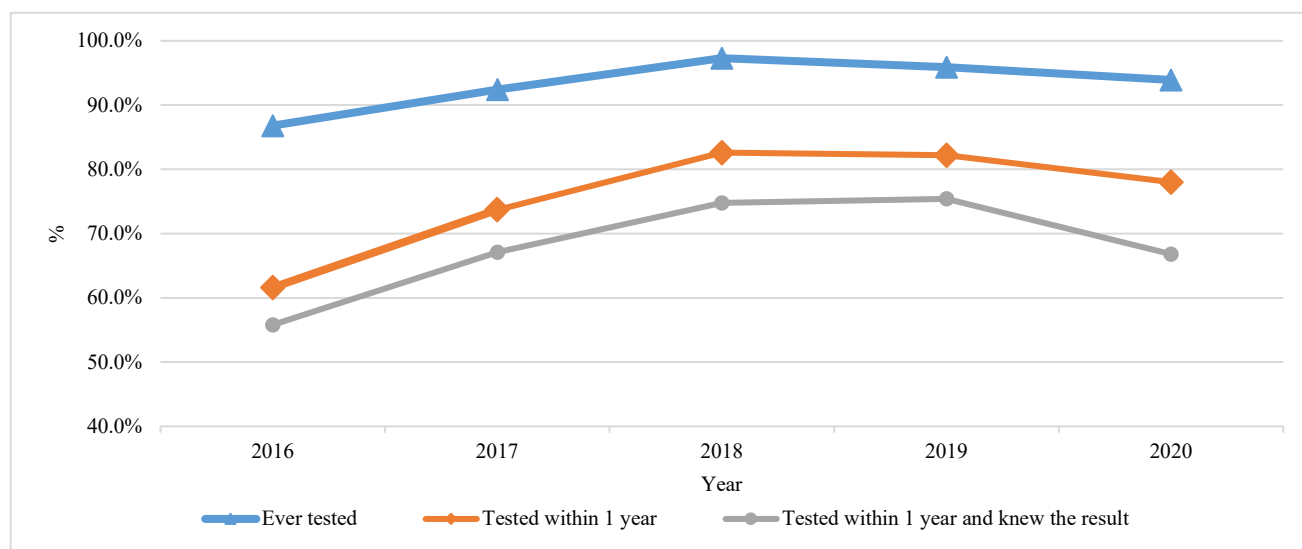
Needle sharing rate has risen sharply from 11.1% in 2019 to **20.1%** in 2020. It was likely related to COVID-19. Possible causes could be:

- the rising drug cost of heroin;
- the PWID found more difficult to buy new needles as some pharmacies shut down.

Condom Use in the last vaginal/anal sex with different sex partners (Source: HARiS 2016-2020)



HIV testing behavior (Source: HARiS 2016-2020)



Coverage of HIV antibody urine testing among DH Methadone Clinic attendees

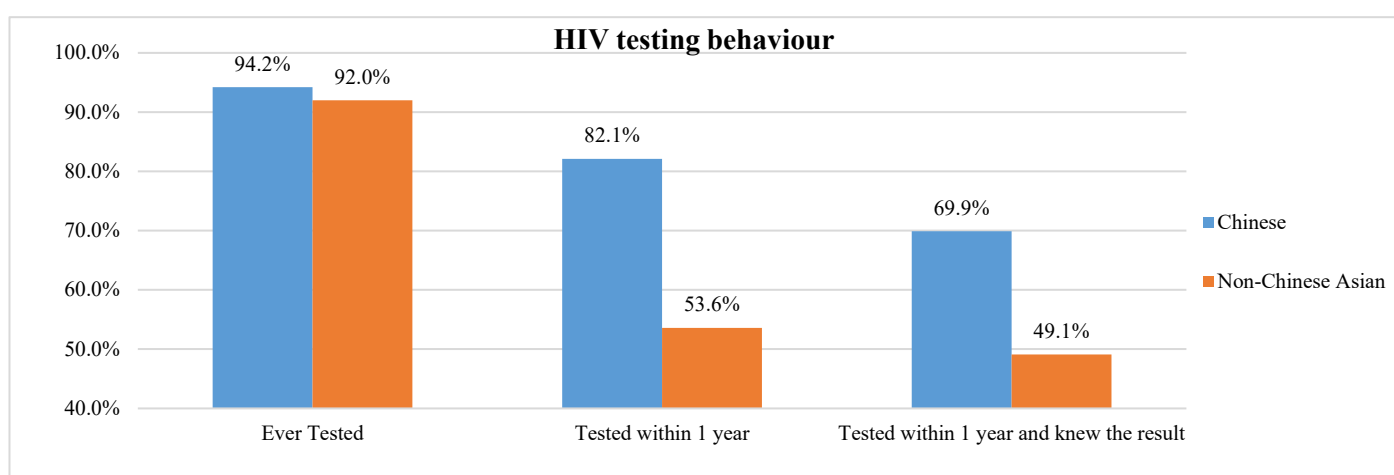
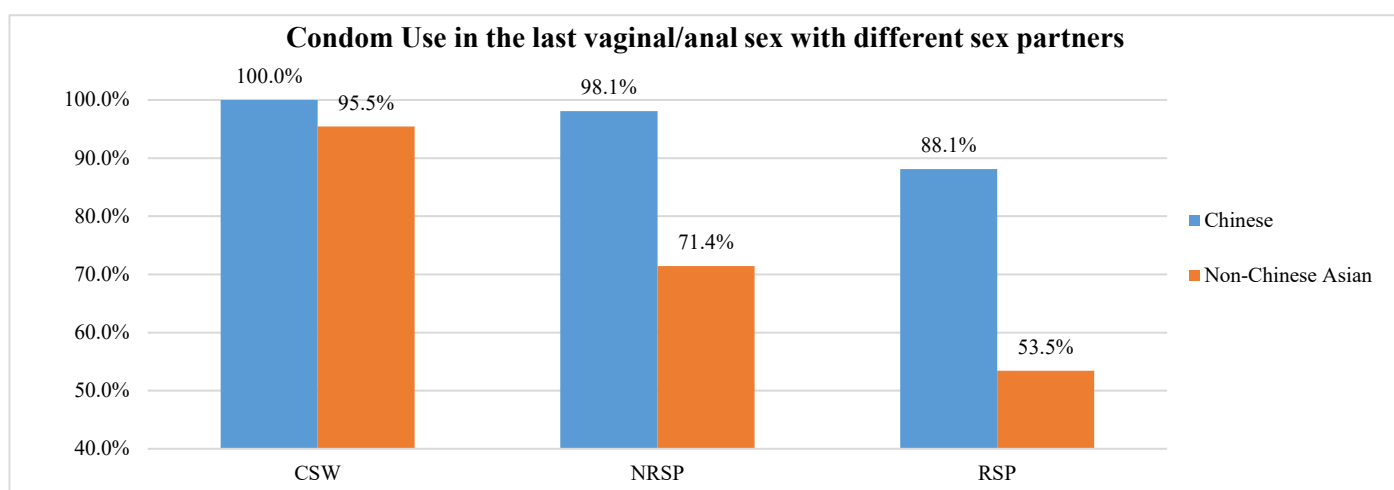
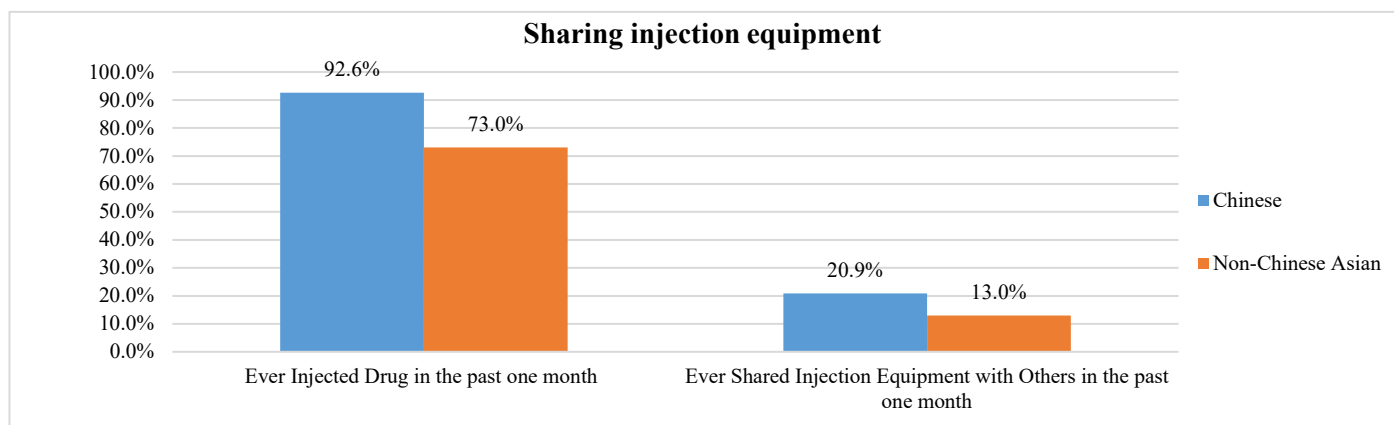
	New case	Readmission case	Old case
2018	97.0%	95.4%	31.7%
2019	98.4%	96.7%	33.4%
2020	98.4%	96.3%	22.9%

“MUT Plus”

Programme started from 2018 and in 2021 the incentive was increased to a face value of \$30 food coupons. It aims at to improve the HIV testing coverage.

Ethnic Minority (EM) PWID

In HARiS 2020, there were 14.1% of non-Chinese Asian participants. Among them, over 70% were Nepalese, followed by around 19% Vietnamese and 9% Indian. The commonest age group for non-Chinese Asian was 20-39, which was younger than that (>40) in Chinese. Their sexual risk behaviours were also different from Chinese:



Current Response in HIV Prevention

The ultimate aims of HIV/AIDS health promotion activities are to prevent HIV transmission and minimize the negative impacts of the disease on personal and societal levels.

Objectives

- Foster supportive environment for the delivery of prevention and care services

- Provide broad based public awareness programme on HIV/AIDS for all community groups
- Mobilize and enhance the participation of the community
- Promote acceptance of people living with HIV/AIDS

Major indicators related to PWID in the ACA Strategies (2017-2021)

Area	Outcome Indicators	Target by end-2020	Findings at HARIS 2020
Prevention Coverage	% of PWID received free condoms in the past 1 year	≥90%	76%
	% of PWID have accessed at least one item of HIV combination prevention services in the last 1 year (such service may include free condoms, HIV testing, free new syringes, HIV prevention messages, or PrEP as appropriate)	≥90%	96%
	% of PWID received HIV test in the last year and know the result	≥80%	67%
Protective or risk behaviours	% of PWID shared needles with other people in past 1 month	<10%	20%
	% of PWID reported syringe sharing outside their usual injection partners in the past 1 month	<5%	4%

Please note that implementation of HIV preventive measures were affected by the COVID-19 pandemic hence may have impact on the findings of HARIS 2020.

Funding are available for application by NGOs providing HIV prevention services, drug rehabilitation services and sexual minority services. **(Annex I)**

The following summarises current local HIV interventions covering PWID in recent years:

1. Free condom and lubricant distribution

- Free government-funded male condom and lubricant are distributed by DH and NGOs. The condom procurement by DH followed the WHO recommendation on male condom. (Please refer to **Annex II** for number of condom distributed)
- Large size or small size condom were provided to NGOs/venues for specific users such as Ethnic minority men.

2. Hotline, counselling service and HIV testing services

(For hotlines, please refer to **Annex II**) e.g. Harm Reduction Hotline 21129977 provides information regarding harm reduction. General Public can access to 24 hours pre-recorded messages on harm reduction in Cantonese, English and Putonghua through an interactive voice response system of the Hotline 21129977. Contents include explanation of harm reduction, information on Methadone Clinics and HIV.

HIV testing service

- All clients attending the Maternal and Child Health Centres of the DH and the Antenatal clinics of Hospital Authority (HA) hospitals will be offered the HIV test as part of routine antenatal blood testing.

- All new/readmitted clients in Methadone clinic of DH required to receive HIV antibody test (urine) upon registration. Urine saving bottles were distributed to all old cases and they were given incentives to get tested once per year.
- All tuberculosis patients in Chest clinics of DH will be offered HIV test.
- Social Hygiene Clinics of DH provides one stop service for sexually transmitted illness (including HIV) testing and STI treatment free of charge for eligible persons.
- Other people can seek voluntary counselling and testing service (VCT), or HIV self test at the DH clinics or NGO's centres. **(Annex II)**
- Guidelines (July 2009) and checklists (September 2013, revised June 2014) were drawn up for quality assurance of the VCT services offered by AIDS NGOs; annual internal audit has been conducted since 2013.

3. Dissemination of HIV prevention messages

- DH and AIDS NGOs utilise websites, apps and social media to promote HIV prevention.
- TV advertisement has spearheaded publicity campaign in the past. Different strategies and means have been adopted at various stages of publicity to keep HIV/AIDS on the public agenda.
 - (2015) Department of Health "Face it! Test it!" to promote safer sex and HIV antibody test. <https://www.rrc.gov.hk/english/z45.html>
 - (2018) Hong Kong AIDS Foundation "No misconceptions. No discrimination. This is what LOVE is" <https://www.youtube.com/watch?v=i4uZvhtwYqw>
 - (2019) Department of Health "Early Treatment for a Healthy Life" to promote effect of HIV treatment can reduce chance of disease transmission. <https://www.rrc.gov.hk/english/z46.html>
- DH and NGOs have been running projects through venue outreach: VCT, health education and condom distribution at public places (e.g. border control points) or at targeted venues (e.g. outside methadone clinics or parks frequented by PWID).
- In the World AIDS Day on Dec 1st every year, DH and NGOs hold different events to increase public awareness on HIV prevention and caring on PLHIV.

4. Support the needs of EM PWID

- In response to the needs of ethnic minorities, education resources in languages including Bangla, French, Hindi, Indonesian, Korean, Japanese, Nepali, Filipino, Thai, Pakistani, Vietnamese, etc. were produced by DH. Resources include video compact discs, information leaflets, promotional cards, etc.
- Health message about HIV and sexual transmitted infection (STI) prevention were disseminated via 6 popular local Indonesian/Filipino web pages during period of June to August 2020. Health knowledge of HIV/STI prevention were enhanced together with related services for health examination.

- EM volunteers and peer counselors were recruited to promote HIV prevention in the vicinity of some Methadone Clinics.

5. Capacity building for NGO workers and healthcare workers

- Provide training workshop to update participants' knowledge on HIV-related prevention, investigation, treatment and care. The aims are (1) to enhance understanding and special consideration for selected populations, including PWID; (2) to make opportunity for AIDS and drug NGOs to have mutual understanding of each works hence to better support PWID in need. **(Annex II)**

6. Medical service for HIV and Sexually transmitted illness treatment

HIV treatment

- Currently, there are three designated HIV clinical services in the public sector: the Integrated Treatment Centre (ITC) of the Department of Health, the AIDS Clinical Service of Queen Elizabeth Hospital (QEH) and the Infectious Disease Special Medical (IDSM) Clinic of Princess Margaret Hospital (PMH). These centres serve the vast majority of HIV infected patients engaged in care. However, there has been leakage of non-Chinese Asian PWID from treatment and care throughout the years.
- NGO provides counselling, support and escort services to facilitate HIV infected drug users' treatment adherence. Health education, proper self-care and risk reduction to prevent further spread of HIV are core components of our counselling service. Close communication with HIV centres to ensure PLHIV's retention in care and to maintain their drug compliance.

Other sexually transmitted infections

- The DH Social Hygiene Service is responsible for the prevention and control of sexually transmitted infections (STI). In the control of STI, the clinics accept walk-in clients and provide medical treatment and counselling service, thus ensuring a high degree of accessibility. Staff of the Anti-Venereal Disease Office carries out contact tracing, health education and outreach activities to control the spread of STI.

7. Drug rehabilitation service

Heroin users

- HIV/AIDS prevention programmes in DH Methadone Clinics:
 - Posting up of posters and distribution of pamphlets on promoting "do not share needles" and "condom use";
 - Provision of free condoms;
 - Conducting HIV/AIDS and drugs risk behaviours assessment in Methadone Clinics;
 - Promoting Universal HIV Antibody Urine Testing by providing coupons as incentives;
 - Street Needle Pickup Programme: Ex-drug users pick up used needles and at the same time convey harm reduction messages and HIV/AIDS information to the drug users. Moreover, they also assist in

carrying out surveillance surveys for street drug users so as to facilitate planning of more effective HIV prevention programmes.

Non-heroin users

Both HA and drug NGOs provide services including timely counselling, substance abuse treatment and rehabilitation.

Followings are services for psychotropic substance abusers:-

- The HA Substance Abuse Clinics provide drug treatment, counselling and in some cases, psychotherapy.
- NGOs can apply funding from "Beat Drug Fund" of Narcotic Division, Security Bureau (**Annex II**), to implement drug prevention or rehabilitation activities to cater for the needs of persons from varying backgrounds.

8. Surveillance projects on PWID

- Apart from collecting routine service statistics and the urine HIV testing for Methadone clinic attendees, the following surveillance projects were conducted:
 - HARiS conducted by DH every year since 2013
 - Unlinked anonymous screening for monitoring HIV prevalence at Shek Kwu Chau Treatment and Rehabilitation Centre every 6 months, and in prisons under the Correctional Services Department for new prisoners annually.

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