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59th ACA meeting



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Schedule

- 60th ACA Meeting on 5 October 2007
- 8th CFA Meeting on 11 September 2007



July 2007. There were three major Authority, which would consider items on the agenda. A summary of the taking forward the rapid HIV testing discussion at the meeting is shown in labour wards in all public below.

On "Implementing Rapid HIV Testing Regarding "HIV Prevalence and in the Labour Ward to Supplement the Risk Behavioural Survey of MSM in Antenatal HIV Universal Programme", Members noted statistics of the universal antenatal planned by the Department of Health, HIV testing programme (UAT) in AIDS Concern and the Chinese Hong Kong for the period from University of Hong Kong to be the September 2001 to December 2006. first Overall, 97.6% of eligible women (218,380 out of 223,825) received HIV antibody test during the said period. 41 pregnant women were tested HIV positive and 7 of them were diagnosed after the delivery. Two babies born to the 7 HIV infected mothers were HIV positive. They were also given to know the results of the pilot trial of the rapid Jan 2007. During the period, 859 HIV testing in the Queen Mary Hospital. Nine out of 662 pregnant collected, 400 from bars and 459 women were eligible for rapid testing. One dropped out because communication barrier. All eight tested were HIV negative. The opinions and views collected from the focus group attended by front line staff were overall adjusted seroprevalence was affirmative. The Task Force on the 4.05%. As many HIV-infected MSM Introduction of Rapid HIV Testing to did not know their status, Members the UAT Programme submitted the agreed that HIV testing in the gay implementing community recommendation on rapid HIV testing in labour wards in promoted and the survey should be local public hospitals to supplement conducted universal antenatal HIV testing to the monitor the situation. Medical Service Development

The 59th ACA meeting was held on 6 Committee (MSDC) of the Hospital hospitals.

> Testing Hong Kong (PRISM)", Members the learned that PRISM was an initiative systematic seroprevalence survey of MSM in Hong Kong. It took reference from similar surveys in Bangkok and integrated some important behavioural questions in seroprevalence survey. Twenty-one venues including major gay bars and saunas in Hong Kong were visited from 19 Dec 2006 to 31 eligible samples with questionnaires from saunas. The response rate was of 45%. Of 859 eligible samples, 37 samples were tested positive. With adjustment to the sampling proportion in different venue, the should be heavily regularly closely

> > <<< to be continued>>>>

Ŕ For "Community-based Risk Behavioural and Sero-prevalence Survey of Female Sex Workers in Hong Kong (CRISP)", Members were aware that CRISP 2006 was an initiative jointly organised by Special Preventive Programme, Department of Health and five non-governmental organisations working with commercial sex industry, namely Action for Reachout (AFRO), **AIDS** Concern, Community Organisation for Intervention, Care and Empowerment (CHOICE), Hong Kong AIDS Foundation and Project Mercury of The Society Rehabilitation and Crime Prevention (SRACP). The survey was conducted between 6 November 2006 and 31 January 2007 with a sample size of 996. One third of samples were collected from one woman brothels and karaoke nightclubs respectively. Others were collected from bars (18%) and street sex workers (15%). Of 996 eligible samples, five samples were tested positive. With adjustment to the sampling proportion in different venues, the overall adjusted seroprevalence was 0.19%. All positive

samples were from non-Chinese and most did not speak Cantonese. Members also noted that no single organisation had a perfect coverage to all types of sex workers in all districts. A joint effort made the picture to be more comprehensive and created some synergy in understanding the complex situation of the sex industry. The prevalence of CRISP, similar to the seroprevalence in Social Hygiene attendees and other previous local studies revealed a low prevalence (<1%) in commercial sex industry. Members were concerned that "Harder-to-reach" sex workers including illegal immigrants controlled by pimps were not covered in the survey making the seroprevalence of CRISP deviate from the real situation of sex industry in Hong Kong and respondents had a higher tendency to give a favourable and politically correct answer to outreach workers making the behavioural figures slightly overestimated.

**The next ACA meeting will be held on 5
October 2007.**

The Seventh CFA Meeting

The two main items discussed at the Seventh CFA meeting on 26 June 2007 was CUHK's Report on the Assessment of Recently Acquired HIV Infection in MSM in Hong Kong and HIV Prevalence and Risk Behavioural Survey of MSM in Hong Kong (PRISM).

On CUHK's report, Members noted that internet became a focal point for MSM to find sex partners and acknowledged the need to target HIV interventions via internet. They also felt the need to better understand the soft drug and party scene which contributed to increased HIV risks among MSM. Members also raised their concerns on capacity building and training for AIDS workers on the issue of HIV risks and soft

drug use among MSM and agreed to explore the possibility for a neutral party to provide capacity building and training for school teachers and social workers to improve the delivery of sensitive topics such as sex education and sexual orientation in school settings.

Regarding the PRISM surveillance, Members noted the latest HIV prevalence of 4% in settings of saunas and bars and discussed the appropriate coverage target for HIV testing in MSM. It was proposed that all service providers could track the proportion of MSM having an HIV test within a specific period to gain an overall impression on the coverage of HIV testing service in MSM.

HKCASO MSM Sharing Session

Prof. CHEN Char-nie, ACA Chairman gave a PowerPoint presentation on ACA's latest strategies for HIV prevention and care targeting MSM at the MSM Sharing Session organized by the Hong Kong Coalition of AIDS Services Organizations on 13 July 2007 at the Red Ribbon Centre.



Over 30 participants attended the sharing session. Representatives from the Secretariat of the Council for the AIDS Trust Fund introduced the Special Project Fund (SPF) for HIV prevention projects targeting MSM. Two successful applicants for SPF in the first round application also shared with the audience their experiences in making application for SPF.

Short Film Competition on HIV/AIDS and MSM

Prof. CHEN Char-nie, ACA Chairman, presented the awards to the winners of the Short Film Competition on HIV/AIDS and MSM The Prize Presentation Ceremony cum premiere of the Short Film Competition on HIV/AIDS and MSM was held on 10 July 2007 (Tuesday) at 7:30pm at AMC Theatre House 2 at Pacific Place Admiralty, followed by premiere of winning films.



The Competition was organized by the Red Ribbon Centre of the Department of Health, in collaboration with the Hong Kong Lesbian and Gay Film Festival Society, to promote awareness on HIV and safer sex among MSM. Submitted videos with the themes on MSM and HIV were short-listed for selection by the Panel of Judges. Six short videos were selected to win the Grand Prize, 2nd Prize, 3rd Prize and 3 Awards of Merit. Dr Thomas Tsang, the Controller of Centre for Health Protection officiated at the prize presentation ceremony.

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HIV/AIDS Situation in Hong Kong in 2006

Under the voluntary and anonymous HIV/AIDS reporting system, the Department of Health received a total of 3,198 reports of HIV infection at the end of 2006. The number of HIV reports received in 2006 was 373. People with HIV infection will develop into AIDS when suffering from immunodeficiency due to HIV infection. The yearly number of AIDS reports received has remained stable since 1996, most likely contributed by the introduction of effective highly active anti-retroviral treatment (HAART) at around the same time. There were about 60 new AIDS reports each year. According to World Health Organization's definition, the HIV prevalence in Hong Kong is low from available data. The overall prevalence in adult population was estimated to be less than 0.1%, as determined in surveys of different populations.

A majority of the HIV reports belonged to men and Chinese. In 2006, eight out of ten reports were men. Non-Chinese, who make up 5% of the Hong Kong population, accounted for 35% of the reported cases. People aged between 20 and 49 accounted for 85% of reports in 2006.

In 2006, heterosexual transmission accounted for 33% of all HIV reports and about one fourth of cases in men. HIV infection among MSM is a particular cause for concern in recent years. Local studies have shown that about 2% of men

aged 18-60 are sexually active MSM, but infections among them contributed to 31% of all HIV cases and 39% of that in men in 2006. A definitive rise in the number of reports was observed after 2003. The number of HIV reports from MSM was persistently higher than that from heterosexual men since last year. A seroprevalence survey conducted in 2006 revealed that 4% of MSM in gay saunas and bars were HIV positive. The cluster of HIV-1 Subtype B infections with similar sequencing which was identified in 2005 expanded from 20 to 34 cases, as of Sep 2006. Another cluster which involved 12 cases was identified in 2006. Homosexual or bisexual contacts were commonest route (about 80%) of infections in these cases. These indicated a rapid and local HIV transmission was occurring in the MSM population in Hong Kong.

Over the last 2 decades, infection among injecting drug users (IDU) only accounted for less than 5% of all HIV reports. Infections among IDU contributed to 15% of all reports in 2006 and most were non-Chinese. However, the prevalence of HIV among methadone clinic attendees remained at a similarly low level of 0.2-0.3% from 2004 to 2006.

There were two reports of HIV infections through perinatal transmission in 2006.

