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Editorial Board

Executive Editor: Mrs Ellen LAU, ACA Secretariat

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IN THIS ISSUE WE HAVE

- → HIV/AIDS Statistics..... pages 33 & 36
- ♦ A Summary of the 91st ACA Meeting pages 34 -35

~ Calendar ~

37th CFA Meeting 23 September 2015 92nd ACA Meeting 9 October 2015

HIV/AIDS Statistics in Hong Kong - updated 30 June 2015

		Q2 2015		Cumulative	
		<u>HIV</u>	<u>AIDS</u>	<u>HIV</u>	<u>AIDS</u>
Sex	Male	155	22	5,892	1,341
	Female	24	9	1,453	266
Ethnicity	Chinese	132	24	4,974	1,232
	Non-Chinese	36	7	2,245	375
	Unknown	11	0	126	0
Route of Transmission	Sexual Contacts	132	28	5,604	1,393
	- Heterosexual	32	14	2,724	902
	- Homosexual	86	12	2,573	420
	- Bisexual	14	2	307	71
	Injecting drug use	3	1	338	62
	Blood/blood products recipients	0	0	84	24
	Perinatal	1	1	28	9
	Undetermined	43	1	1,291	119
Total		179	31	7,345	1,607

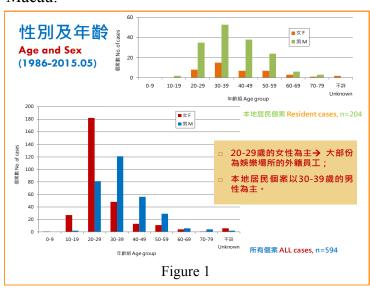
Hong Kong Advisory Council on AIDS Secretariat 3/F, Wang Tau Hom Jockey Club Clinic, 200 Junction Road East, Kowloon, Hong Kong Tel: (852) 3143 7281; Fax: (852) 2337 0897; E-mail: aca@dh.gov.hk Website: http://www.aca.gov.hk

A Summary of the 91st ACA Meeting held on 10 July 2015



Current HIV situation and AIDS programme in Macau

Dr. LEONG Iek-hou, Commissioner of the AIDS Prevention and Control Commission, Government of Macao S.A.R. presented the most updated situation of HIV infection in Macau.



From 1986 to the end of May 2015, Macau authority recorded a total of 594 cases of HIV infection. Among them, 301 were males and 293 were females. 56% were infected through heterosexual contact, 13% through injecting drug use and 12% through homosexual or bisexual contact. 61% are non-local residents. Among those aged 10-29, more than 200 were female while males accounted for around 80 cases only (Figure 1). The overall estimated prevalence rate of those aged 15-49 was 0.045% - 0.078%

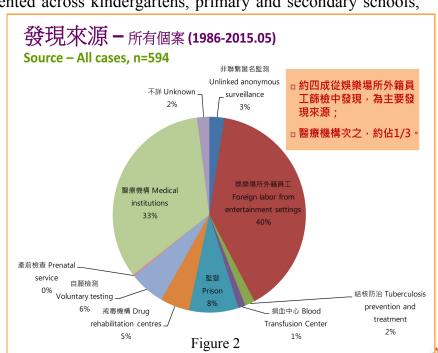
The HIV prevention and care measures were mostly conducted by the six working teams under the AIDS Prevention and Control Commission. Under the current system, NGOs worked with the Macao CDC on HIV preventive programmes and CDC would partially fund the programmes and conduct regular monitoring.

Led by the Education and Youth Affairs Bureau, sex education was included in the formal school curriculum and implemented across kindergartens, primary and secondary schools,

covering social, psychological, developmental and biological aspects.

The dramatic drop of cases among injecting drug users in recent years might be a result of the Methadone Replacement Therapy and Needle Exchange Programme which was launched in 2007.

Among the 594 HIV cases, about 40% were foreign labourers who worked in the entertainment sector. Among the 204 infected local residents, over 90% of them were currently under medical care (**Figure 2**).





A brief overview of the implementation and quality assurance of HIV counselling and testing services by non-governmental organizations

As the number of NGOs providing voluntary counselling and testing services (VCT) grew, the Quality Assurance Guidelines on HIV VCT Services in Community Settings were developed by CFA in 2009. A corresponding internal checklist was also developed in September 2013 for NGOs to self-evaluate the quality of their VCT services.

Two rounds of internal audit were conducted so far in March 2014 and March 2015 with 7 and 10 NGOs participating respectively. Improvements in various areas were seen, including: (1) NGOs had purchased or obtained funding to purchase the necessary equipment; (2) most NGOs had satisfactory coverage of staff training; and (3) more NGOs were now able to conduct quality control for test kits, with control kits either given by manufacturers for free or purchased with funding from ATF.

At the meeting, it was agreed that staff training was important to ensure the NGO staff was competent to perform VCT. DH explained that there was currently no licensing requirements on that. The role of DH was technical in providing training and advice but not regulatory. Nevertheless, DH encouraged NGO workers to undergo the training provided by DH, and DH would explore the feasibility to issue training certificate. DH was planning to visit NGOs to provide on-site technical support in the near future.



It was agreed that encouraging community participation and engaging NGO workers to outreach and provide VCT and support services to at-risk populations had all along been key strategies for the local AIDS response. Staff training was important, in particular on the area of infection control. The quality assurance mechanism should be continued in view of the improvement in both the participation of NGOs and the level of their quality assurance of VCT services in the last two years.



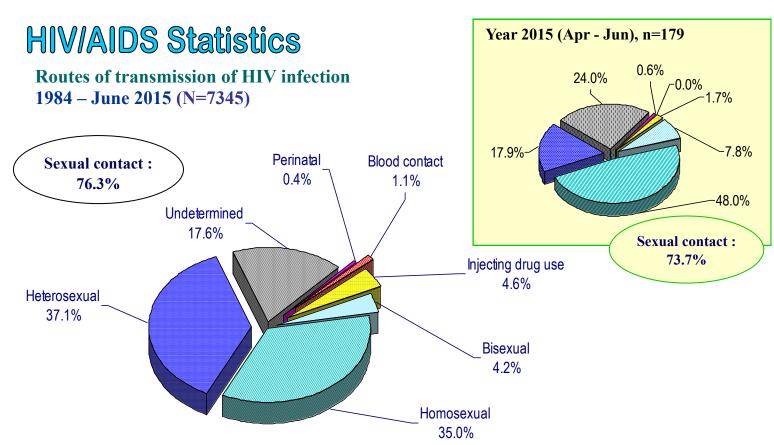
Report of the Community Forum on AIDS

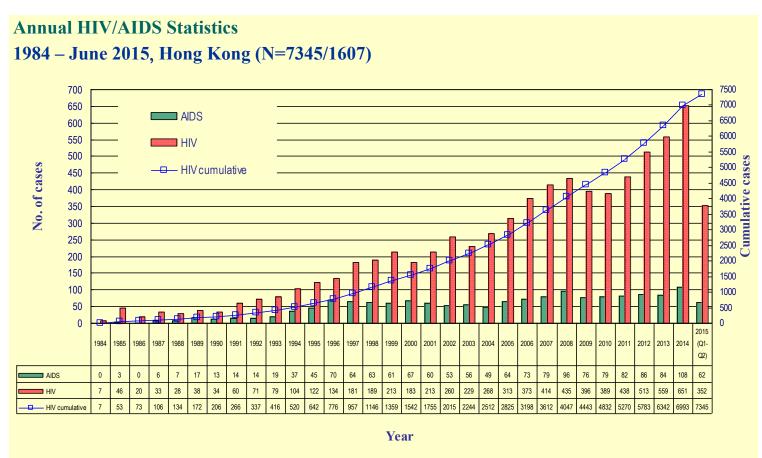
Members noted the summary report and discussions of the 36th CFA Meeting held on 10 June 2015 (a summary of this CFA Meeting was contained in the ACA Newsfile issued in July 2015).



A Summary of the 33rd SCAS Meeting

Members noted the summary report and discussions of the 33rd Meeting of SCAS held on 7 July 2015.





Hong Kong Advisory Council on AIDS Secretariat 3/F, Wang Tau Hom Jockey Club Clinic, 200 Junction Road East, Kowloon, Hong Kong Tel: (852) 3143 7281; Fax: (852) 2337 0897; E-mail: aca@dh.gov.hk Website: http://www.aca.gov.hk