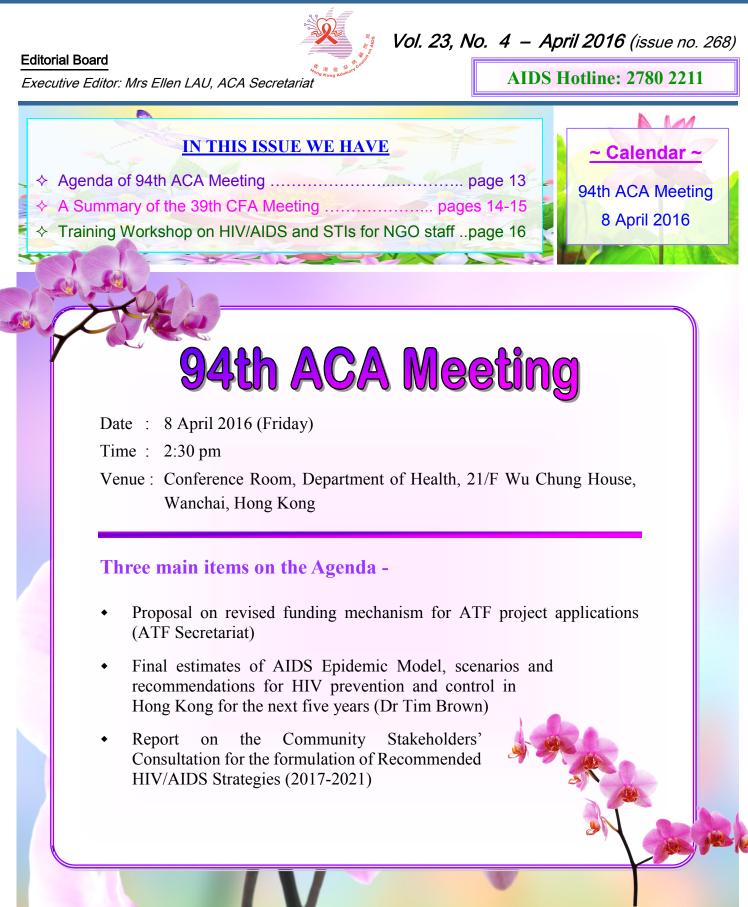
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# A Summary of the 39th CFA Meeting held on 8 March 2016

#### Highlights of Dr Tim Brown's consultancy visit

Department of Health (DH) highlighted Dr Tim Brown's view on the future HIV epidemics and his suggestions related to NGO services during his visit in January 2016. He anticipated that MSM would still dominate the local HIV epidemic. Regarding the rise of reported cases among MSM in recent years, he opined that it was partially attributed to the expansion of HIV testing, but largely accounted by a true increase in incidence.

Regarding linkage to care, he observed the discrepancy of follow up rate for cases diagnosed by different NGOs and urged NGOs to fix it. He also suggested to extend HIV prevention and testing services in drug treatment and rehabilitation clinics / centres, and to establish referral systems between HIV clinics, NGOs and drug services.

At the meeting, members suggested to conduct more researches to find out the association of social, emotional and personal factors with HIV infection. Moreover, researches targeting patients, especially the defaulters, those who kept on practising unsafe sex, and those who did not turn up until reaching advanced stage should be strengthened to find out the barriers of receiving treatment. These could be conducted by collaborating with social science departments of universities.

Members also suggested AIDS Trust Fund to support projects that used "soft ways" (indirect ways) to promote HIV prevention. They considered funding should be available to support those projects managing the underlying risk factors, and not just those distributing condoms or doing HIV testing.

### HIV/AIDS infection among ethnic minorities (EM)

The HIV situation in year 2015 was presented. It was found that infection and follow up among Vietnamese IDU and non-Chinese female needed more attention. Members found that accessing ethnic minorities was difficult. Some members suggested to approach Immigration Department (ID) to distribute HIV prevention materials when asylum seekers and domestic helpers applied for the Recognizance at ID.

#### HIV/AIDS Response Indicator Survey 2016-2018

DH informed members that a new round of survey, HARiS 2016 would be conducted from March to August 2016. It will mainly cover MSM, injecting drug users and male-to -female transgender in 2016. The sample size and adjustment of the questionnaires were also discussed.

The drop in needle sharing rate among IDU was found in the Street Addict Survey in 2015. It was agreed to keep monitoring the situation to see whether the drop could be related to the "health kits" with new syringe distribution project conducted by one NGO. Needle disposal issue was also discussed during the meeting.

### Summary of NGO visits for VCT technical support and review of VCT Checklist

DH conducted several visits to most NGOs that provided VCT services in 2015. It was found that their testing environment, documentation and equipment were all in good condition. However, availability of external control still remained a problem. NGOs shared their experience of obtaining the control kits during the meeting, and DH expressed that it was ready to help.

NGOs were encouraged to continue to keep up the efforts to uphold the quality of service. Members were also reminded to submit the third round of internal audit results in April 2016 by using the new quality assurance checklist.

#### Last round of ATF application

Two NGOs reported that their organizations' projects were rejected in the last round of application (applied in August 2015). Some expressed they would strive to continue providing service for patients and would seek financing from other sources as necessary. The Convener remarked that under the current system, ATF funding mechanism could potentially be independent of the local HIV epidemiology, the strategies recommended by ACA and the NGOs' needs to carry out effective preventive work. He opined to find ways to ensure close collaboration between parties, such as incorporating ATF members in ACA, combining the ACA and ATF secretariats, or by ensuring collaboration through a memorandum of understanding and regular meetings of the two secretariats.



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