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Editorial Board

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Agenda of 111th ACA Meeting

Date : 10 July 2020 (Friday)

Time : 2:30 pm

Venue: Conference Room, Department of Health, 17/F, Wu Chung House,

Wanchai, Hong Kong

Three main items on the Agenda -

- Preliminary results of the feasibility study of using web-based ordering and result upload to support HIV self-testing among men who have sex with men (MSM) in Hong Kong
- Updates on the development of pre-exposure prophylaxis for HIV prevention
- 30th Anniversary of Hong Kong Advisory Council on AIDS (1990-2020)

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Results of the HIV/AIDS Response Indicator Survey (HARIS) 2019

Background

The HARiS survey has been conducted every year since 2013. The aim is to establish a mechanism for a regular community-based survey where AIDS non-governmental organisations (NGOs) would help collect information on HIV-related behaviours for the at-risk populations by using the same indicators.

Five major at-risk populations comprising Men who have Sex with Men (MSM), Male-to-Female Transgender (TG), female sex workers (FSW), male clients of female sex workers (MCFSW) and people who inject drugs (PWID) are covered by HARiS. Participants are interviewed by AIDS NGOs with a structured, self- or interviewer-administered questionnaire. Each questionnaire contains a standard set of core indicators as recommended by Dr. Tim Brown, Senior Fellow of the East-West Centre of the University of Hawaii. Each set of core indicators was designed specifically

HARiS - HIV and AIDS Response Indicator Survey 2019 for Injecting Drug User HARiS - HIV and AIDS Response Indicator Survey 2019 for Male Clients of Female Sex Workers and the related risky behaviours among this population, the first Community Based Risk Behavioural and Seropreval Survey for Fernale Sex Worker in Hong Kong (CRSP) was launched in 2006 and repeated in 2009. Both surveys sho low HTV prevalence with the results of 0.19% and 0.05% respectively. situation of HIV Infection among FSW. A similar integrated biobehavioural survey for FSW was therefore developed in 2013 by incorporating into the newly launched HIV/AIDS Response Indicator Survey (HARS) programme. The HARS for FSW was repeated in 2014, 2015 and 2017. This year, its fifth round was conducted via commissioning to the Department of Sociology, The University of Hong Kong. The results were summarised as below. luring the outreach sessions (4 NGOs) from June to August 2019. Any female who had ever had sex with someone for money, drugs or other goods in the past 1 year was eligible and be invited to complete an interviewer-administ structured questionnaire. The respondents were also asked to provide urine specimen to the Department of Health for HIV antibody test on a surveillance purpose. (A) Characteristics of participants A total of 579 respondents were recruited (centre-based : 343; outreach : 233). About one-third (31.6%) of respondents had ever worked in a one-woman brothel; 19.7% in karaoke/night clubs, 25.9% had worked in street, 8.1% espondents had ever worked in a one-woman brothel; 19.7% in karaoke/night clubs, 25.9% had worked in street, 8.1% n bars/pubs, and 4.3% in massage parlors/sauna. A vast majority was Chinese (91.4%) and majority were 30-49 years old (66.7%). More than half (81.2%) had stayed in Hong Kong for more than 3 months in the preceding 6 months ise rate remained high, as in 2017 (95.6% and 99.1% respectively). ents, 488 (84.3%) had ever received HIV test and 458 (79.1%) knew their last test results r, only 370 (63.9%) had their last test in the preceding 1 year and 349 (60.3%) knew their last HIV test results

are in use, behaviours of the at-risk populations and the effectiveness of HIV programmes could be compared over time and across the NGOs.

for a population to monitor their HIV-related behaviours. As the same indicators

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Methodology

The HARiS 2019 survey was conducted from June to August 2019 for FSW, MCFSW and PWID. Ten NGOs joined the survey. Participants were recruited in various settings and through different channels, including NGOs' service centres, one-woman brothels, bars, karaoke/night clubs, massage parlors, saunas, construction sites, the vicinity of Methadone Clinics (through venue outreach), and social media and discussion forums (through online outreach).

Results

Please refer to <u>Table</u> for the summary of results from 2015 to 2019.

Conclusion

Condom use rates were generally similar to 2017 among FSW but decreased in MCFSW. For PWID, the condom use rate generally decreased when compared to 2018, especially when having sex with regular sex partners and commercial sex workers. Health promotion on safer sex about consistent condom use with all partner types should be strengthened.

HIV testing rates among FSW and MCFSW had decreased when compared to 2017. For PWID, the rate was maintained at a similar level. HIV testing rate was the highest among IDU (>80% tested in previous 1 year) and lowest in MCFSW (34% tested in previous 1 year), and there was a significant decrease in MCFSW (43.4% in 2017 vs. 34.4% in 2019). HIV testing has not yet been the norm among these target groups and promotion of regular HIV testing should be strengthened.

The needle sharing rate in IDU was 11.1% which was similar to 2018 (11.7%) and was close to the ACA target (<10%). Despite the relatively low number of newly reported HIV infections among IDU in recent years, the potential risk exists of a local outbreak and sudden upsurge of HIV infection among injecting drug users. Effort to promote HIV prevention and education on the risk of needle sharing among the population is crucial and should be sustained.

Summary of the survey results are available as factsheets on the "Virtual AIDS Office of Hong Kong" website

English

https://www.aids.gov.hk/english/surveillance/off surreport.html

Chinese

https://www.aids.gov.hk/chinese/surveillance/off surreport.html

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Table. Comparison of response indicators of HARiS 2015 - 2019

	HARIS 2015	HARIS 2016	HARIS 2017	HARIS 2018	HARIS 2019
Female Sex Worker (FSW)	N=494	NA	N=495	NA	N=579
Condom use in last vaginal sex in past 6 months					
Regular client	97.4%	NA	95.6%	NA	94.9%
Casual client	99.1%	NA	99.1%	NA	98.3%
HIV test within past 12 months	73.1%	NA	71.5%	NA	63.9%
Knew the result	65.2%	NA	68.9%	NA	60.3%
Having accessed at least one item of HIV combination prevention services* in the past one year	92.9%	NA	91.7%	NA	86.9%
Received free condoms in the past 1 year	86%	NA	84.4%	NA	75.1%
Male Clients of Female Sex Workers (MCFSW)	N=405	NA	N=327	NA	N=398
Condom use in last vaginal sex in past 12 months	•	•	•	•	
Regular sex partner (RSP)	54.7%	NA	61.0%	NA	62.1%
Non-regular sex partner (NRSP)	70.6%	NA	76.4%	NA	75.0%
Commercial sex partner (CSP)	81.5%	NA	84.1%	NA	79.4%
HIV test within past 12 months	36.5%	NA	43.4%	NA	34.4%
Knew the result	32.6%	NA	27.8%	NA	29.4%
People who inject drugs (PWID)	N=781	N=713	N=791	N=741	N=808
Condom use in last sex in past 6 months					
Regular sex partner (RSP)	69.9%	77.3%	80.8%	90.8%	79.3%
Non-regular sex partner (NRSP)	96.4%	77.1%	92.8%	95.5%	97.3%
Commercial sex worker (CSW)	99.5%	96.4%	99.5%	100%	88.3%
Drug use before/during sex	50.6%	41.3%	45.7%	43.9%	50.2%
HIV test within past 12 months	72.2%	61.6%	73.7%	82.6%	82.2%
Knew the result	63.0%	55.8%	67.1%	74.8%	75.4%
Drug injection in past 1 month	89.1%	91.0%	90.5%	89.2%	78.2%
Sharing injection equipment in past 1 month	13.9%	15.9%	17.6%	11.6%	11.1%
Sharing injection equipment with people outside usual network in the past 1 month	4.1%	6.2%	6.3%	2.7%	3.3%

^{*} Such services may include free condoms, HIV testing, free new syringes, HIV prevention messages, or PrEP Remarks: HARiS 2016/2018 did not cover FSW and MCFSW