

## Mid-term review of the implementation of the Recommended HIV/AIDS Strategies for Hong Kong 2012-2016

### First priority area: Scale up HIV prevention in priority communities

ACA Recommendations (R) and the ongoing initiatives	New initiatives ( 2013 and 2014)
<b>R1. Keep convenient access to quality condoms and lubricants</b>	
<p><i>Distribute free condoms and lubricants at:</i></p> <ul style="list-style-type: none"> <li>- Gay venues, gay events, sex parties, sex work premises;</li> <li>- Government clinics : HIV clinics, social hygiene clinics, methadone clinics, TB &amp; Chest Clinics, Elderly Health Clinics;</li> <li>- University : automatic vending machine;</li> <li>- NGO centres;</li> <li>- Working venues : construction sites, taxi station in airport;</li> <li>- Border: Lok Ma Chau Control Point.</li> </ul>	<p><i>Expand the coverage of condom distribution:</i></p> <ul style="list-style-type: none"> <li>- Family Clinics in primary care setting;</li> <li>- Private sex premises through the person-in-charge; and</li> <li>- Posting condoms to clients.</li> </ul>
<b>R2. Expand voluntary counseling and testing service (VCT) for HIV and STI in community and clinical settings</b>	
<p><i>Enhance service capacity</i></p> <ul style="list-style-type: none"> <li>- Increase evening sessions in Social Hygiene Clinics (DH).</li> </ul>	<p><i>Expand the coverage of HIV testing services:</i></p> <ul style="list-style-type: none"> <li>- Mobile app booking;</li> <li>- Mobile testing services in New Territories;</li> <li>- On-site VCT at youth centres and increased venues to different districts;</li> <li>- Restart VCT at Shek Ku Chau 石鼓州 drug rehabilitation centre.</li> </ul>

ACA Recommendations (R) and the ongoing initiatives	New initiatives ( 2013 and 2014)
<b>R3. Promote HIV testing and condom use as a norm</b>	
<p><i>Through mass media channels :</i></p> <ul style="list-style-type: none"> <li>- API, outdoor media, radio, printed media, the internet;</li> <li>- Through peers and opinion leaders in the community.</li> </ul> <p><i>Through internet and free mobile application</i></p> <ul style="list-style-type: none"> <li>- Include VCT venues of HK;</li> </ul> <p>Include Shenzhen and Macau into location-based navigation application of mobile devices.</p>	<p><i>Through mass media and publicity event:</i></p> <ul style="list-style-type: none"> <li>- A short film “愛 • 不難” was produced in 2014 to promote safer sex and HIV testing in MSM. It is also available on YouTube;</li> <li>- “Be Negative HIV/HCV awareness campaign 2014”.</li> </ul> <p><i>Through digital appliances :</i></p> <p>Private messages sent through the internet, SMS and mobile apps to FSW to remind them of HIV testing and regular condom use.</p>
<b>R4. Sustain provider-initiated universal HIV testing</b>	
<ul style="list-style-type: none"> <li>- Maintain high coverage in social hygiene clinics, TB &amp; Chest clinics, methadone clinics and antenatal clinics;</li> <li>- Revamp universal HIV antibody testing in methadone clinics in 2013;</li> <li>- Update clinical guidelines on prevention of perinatal HIV transmission.</li> </ul>	<p><i>Enhance the coverage:</i></p> <ul style="list-style-type: none"> <li>- Launched a pilot project for urine collection at home for HIV testing at 3 methadone clinics.</li> </ul>
<b>R5. Positive prevention targeting PLHIV</b>	
<ul style="list-style-type: none"> <li>- Increase early uptake of HAART;</li> <li>- Counselling on risk reduction, drug adherence;</li> <li>- Partner counselling and referral;</li> <li>- Screening of STI,</li> <li>- Prevention of vertical transmission.</li> </ul>	<p><i>Enhance screening of STI:</i></p> <ul style="list-style-type: none"> <li>- Conducting a pilot project to enhance detection of gonorrhea and chlamydia among PLHIV by rectal and pharyngeal swab.</li> </ul>

ACA Recommendations (R) and the ongoing initiatives	New initiatives ( 2013 and 2014)
<b>R6. Outreach to more hidden subgroups</b>	
<ul style="list-style-type: none"> <li>- <i>Develop mobile applications (MSM, TG);</i></li> <li>- <i>Provide MSM-oriented services in youth centres (MSM);</i></li> <li>- <i>Increase outreach to FSW working in massage parlours (FSW);</i></li> <li>- <i>Distribute condom and develop HIV prevention programmes to refugees, asylum seekers, new immigrants from high HIV prevalence places, transgender people, persons who have hearing or physical disability.</i></li> </ul>	<p><b><i>Expand coverage to sex workers and ethnic minorities:</i></b></p> <ul style="list-style-type: none"> <li>- Male sex workers (both MSM and heterosexual) : through venue, internet and mobile apps outreach;</li> <li>- Female sex workers : through outreach in spa, hair salon, beauty salon and 馬檻;</li> <li>- Domestic helpers : through providing on-site VCT at other NGO's centres and Central.</li> </ul>
<b>R7. No restriction on purchase of syringes</b>	
<ul style="list-style-type: none"> <li>- <i>Explore feasibility of selling syringes in convenient stores (24 hours).</i></li> </ul>	<p><b><i>Provide free new syringes</i></b></p> <ul style="list-style-type: none"> <li>- Planning to distribute “Health Care Kits” containing new syringes to injecting drug users.</li> </ul>

## **Second priority area: Maintain holistic and quality HIV treatment, care and support**

ACA Recommendations (R) and the ongoing initiatives	New initiatives (2013 and 2014)
<b>R8. Shared updated HIV-related knowledge in healthcare providers and NGO workers</b>	
<p><b>A. <u>Training and education</u></b></p> <ul style="list-style-type: none"> <li>- <i>Training to health care workers;</i></li> <li>- <i>Training to social workers and NGOs;</i></li> <li>- <i>Attachment programmes for medical and nursing students at DH;</i></li> </ul>	<p><b><i>Enhance training to front-line health care workers :</i></b></p> <ul style="list-style-type: none"> <li>- Private doctors - Seminars were held with HK Medical Association and the HK Doctors Union in 2013 and 2014. Relevant visual and audial recordings are freely available online;</li> <li>- Staff of residential care homes for the elderly - A multi-sectoral training session on HIV/AIDS was first held in 2014;</li> <li>- Experienced NGO staff - Launched an advanced HIV workshop covering topics of HIV treatment, HIV/HCV co-infection, and drug abuse;</li> </ul> <p><b><i>Extend training to students from different faculties</i></b></p> <ul style="list-style-type: none"> <li>- Extend attachment / training programme to students who were studying nursing, sociology, social work, behavioural health and education.</li> </ul>
<p><b>B. <u>Publication</u></b></p> <ul style="list-style-type: none"> <li>- <i>Produce regular publications, submit articles to peer-review publications, published new HIV manual; and promulgate local guidelines on HIV epidemiology, prevention, testing and care;</i></li> </ul>	<p><b><i>Strengthen communication with public on the most update epidemiology</i></b></p> <ul style="list-style-type: none"> <li>- Issued an article on DH's bi-weekly bulletin "CD Watch" to raise the awareness of the general public and doctors about sexually transmitted Hepatitis C (HCV) among MSM.</li> </ul>
<p><b>C. <u>Present in academic meetings / conferences</u></b></p>	<p>Attended <b><i>International AIDS Conference 2014</i></b> with exhibition of posters.</p>

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<b>R9. Maintain high level of effectiveness in clinical management</b>	
<ul style="list-style-type: none"> <li>- <i>Maintain continuous access to a wide range of HAART and subsidy provided to eligible PLHIV</i></li> <li>- <i>Review level of provision required for the increasing number of PLHIV</i></li> <li>- <i>Provide information to increase health literacy of attending patients</i></li> <li>- <i>Revamp clinical management and information system in ITC of DH</i></li> <li>- <i>Bid new resources for enhancing existing / setting up of new HIV clinic and fund injection to ATF</i></li> <li>- <i>Implement clinical governance against established standards</i></li> </ul>	<p><b>Medical services in clinical settings:</b></p> <ul style="list-style-type: none"> <li>- One-stop medical care with fibro-scan for monitoring liver fibrosis; and intra-uterine contraceptive device and injecting contraception for female clients;</li> </ul> <p><b>Care services in community:</b></p> <ul style="list-style-type: none"> <li>- “Checklist for Quality Assurance on HIV Voluntary Counseling and Testing Services in Community Settings” would be included as one of the assessment tool for evaluating ATF applicant in 2015</li> </ul>
<b>R10. Facilitate rehabilitation of PLHIV</b>	
<ul style="list-style-type: none"> <li>- <i>Empower and mobilize PLHIV in advocacy, provision of service and education of service providers on their needs</i></li> <li>- <i>Develop new websites of HIV</i></li> </ul>	<p><b>Enhance follow up services in community settings:</b></p> <ul style="list-style-type: none"> <li>- Started follow up services for the newly diagnosed patients and their partners;</li> <li>- Refer PLHIV with drug problem to HA and private clinics;</li> <li>- Training Indonesian HIV patients to provide peer counseling service to the newly infected Indonesian (domestic workers);</li> <li>- Receive referral of PLHIV from HA for counseling services;</li> <li>- Study on change of networking pre and post-HAART among MSM.</li> </ul>

### **Third priority area : Foster an environment which supports safer sex, harm reduction and anti-discrimination**

ACA Recommendations (R) and the ongoing initiatives	New initiatives (2013 and 2014)
<b>R11. Educate public about Disability Discrimination Ordinance</b>	
<ul style="list-style-type: none"> <li>- <b>Education</b> :Provide talks, training and consultancy services to organizations and employers;</li> <li>- <b>Projects</b> :Community Participation Funding Programme; Special Partnership Projects; and publications;</li> <li>- <b>Campaign</b> :Conduct Equal Workplace Campaign funded by EOC to promote equal workplace for PLHIV based among corporate</li> </ul>	<p><b>University students</b></p> <ul style="list-style-type: none"> <li>- NGOs work with EOC to provide talks to university students of related faculties (eg. psychology, social work and nursing) on topics about acceptance of PLHIV and people with different sexual orientation in different settings.</li> </ul>
<b>R12. Promote acceptance to PLHIV and priority populations</b>	
<ul style="list-style-type: none"> <li>- <b>General public</b>: Through World AIDS Campaign, MicroFilm, theme songs, API and dramas;</li> <li>- <b>Specific groups</b> : Training to teachers, social workers, disciplined forces, NGO, public and private health care workers</li> <li>- <b>Workplace</b> :Organize community-based or media programme through Equal Opportunities (Sexual Orientation) Funding Scheme, and increase its budget;</li> <li>- Pilot a study on PLHIV to measure stigma perceived by PLHIV</li> </ul>	<p><b>Education targeting front line staff:</b></p> <ul style="list-style-type: none"> <li>- Staff of Social Hygiene Service : provide training to them and invited MSM and TG speakers to share on how to provide gay- and TG-friendly services;</li> <li>- Corporate units (eg. hotel groups) : basic HIV knowledge</li> </ul> <p><b>Mass media</b></p> <ul style="list-style-type: none"> <li>- Advertisement at MTR, microfilm for the youth, Puppet drama, API and WAD 2014 campaign</li> </ul>
<b>R13. Examine impact of relevant laws and policies on access to HIV-related services</b>	
<ul style="list-style-type: none"> <li>- Review sexual and related offences of homosexual behaviours</li> <li>- Explore removal of condom as evidence of illegal sex work</li> </ul>	<p><b>Evidence of illegal prostitution activities</b></p> <ul style="list-style-type: none"> <li>- ACA wrote to the Police to explore the possibility of not seizing condoms during their enforcement action against organized prostitution activities.</li> </ul>

ACA Recommendations (R) and the ongoing initiatives	New initiatives (2013 and 2014)
<b>R14. Expand life skills-based education (LSB) on HIV among youth</b>	
<ul style="list-style-type: none"> <li>- Teach the use of condom in educational settings, outreach, internet and other media;</li> <li>- Sustain life skills-based education (LSBE) on HIV in schools</li> <li>- Formed a Task Force to advise on the development of LSBE on HIV in secondary schools</li> </ul>	<p><b>Survey on Life skill-based HIV /sex education</b></p> <ul style="list-style-type: none"> <li>- Baseline survey about LSBE on HIV in junior secondary schools in 2013;</li> <li>- Results announced in Jan 2014,</li> <li>- and a multi-sectoral seminar for school principles and teachers were held.</li> </ul> <p><b>Promote LSB education on HIV</b></p> <ul style="list-style-type: none"> <li>- DH's "RR in Action" HIV educational programme</li> <li>- In-school LSBE on HIV by DH and NGOs in 2014-2015;</li> <li>- Involve youth in the World AIDS Day 2014 and microfilm production;</li> <li>- Open forum to discuss about promotion of sex education among youth.</li> </ul>
<b>R15. Tackling the underlying vulnerability of priority populations</b>	
<ul style="list-style-type: none"> <li>- <b>Personal support</b> : Programmes which address self-acceptance, self-efficacy of using condoms, partner communication, illicit drug use, health consciousness, and mental health of MSM, relationship issues for MSM who have regular sex partner ;</li> <li>- <b>Socio-economical support</b> : Provide assistance on employment, relationship issues, legal matters and social support for sex workers and drug users</li> </ul>	<p><b>Substance abuse</b></p> <ul style="list-style-type: none"> <li>- Residential treatment and rehabilitation programme for psychotropic substance abusers at Shek Kwu Chau for young people;</li> </ul> <p><b>Career training</b></p> <ul style="list-style-type: none"> <li>- For young FSW including pets grooming class, manicure class, English class and mutual support groups.</li> </ul>

## **Fourth priority areas: Drive strategically informed and accountable interventions**

ACA Recommendations (R) and the ongoing initiatives	New initiatives (2013 and 2014)
<b>R16. Improve monitoring and evaluation of individual HIV programmes</b>	
<ul style="list-style-type: none"> <li>- Set out concrete, quality and budgeted M&amp;E plan;</li> <li>- Develop internal audit of VCT service in community settings</li> </ul>	<ul style="list-style-type: none"> <li>- <b>First round of internal audit</b> of VCT services completed in Mar 2014</li> </ul>
<b>R17. Improve monitoring and evaluation of territory-wide response</b>	
<ul style="list-style-type: none"> <li>- Enhance reporting of HIV/AIDS, STI, surveys on HIV prevalence, risk behaviours, universal HIV testing programmes, HIV subtypes and drug resistance patterns, and follow up on the management outcomes of PLHIV under care;</li> <li>- Develop a common set of indicators for monitoring the effectiveness of HIV programmes for priority populations accessed by NGOs;</li> <li>- Study the feasibility of monitoring population viral load</li> </ul>	<p><b>Increase channels of HIV reporting</b></p> <ul style="list-style-type: none"> <li>- Addition of fax line for HIV reporting;</li> </ul> <p><b>Territory-wide response evaluation</b></p> <ul style="list-style-type: none"> <li>- 1st and 2nd round of HIV/AIDS response indicators survey (HARiS) completed in 2013 and 2014; results available online.</li> </ul>
<b>R18. Characterize HIV risk among male sex workers, transgender population, people involved in compensated dating and non-injecting drug users</b>	
<ul style="list-style-type: none"> <li>- Study patterns of unprotected anal sex among MSM travelling to SZ</li> <li>- Compare risk of virtual vs physical channel sex networking in MSM</li> <li>- Analyze sexual risk and substance use among African refugees and asylum seekers in HK</li> <li>- Include test for chlamydia &amp; gonorrhoea for FSW in HARiS 2013</li> </ul>	<p><b>Survey for risk of HIV infection of vulnerable groups</b></p> <ul style="list-style-type: none"> <li>- Include “male to female transgender population” in HARiS 2014;</li> <li>- Study the prevalence of Herpes and HPV by blood test among MSM in 2013.</li> </ul>
<b>R19. Conduct formative research of pilot programmes</b>	
<ul style="list-style-type: none"> <li>- Conduct RCT to evaluate efficacy of network-based HIV peer-education intervention targeting MSM;</li> <li>- Evaluate acceptability of female condom among monogamous women with STI;</li> <li>- Study the feasibility of self-HIV test in MSM.</li> </ul>	<ul style="list-style-type: none"> <li>- <b>Assessing change of sexual and health seeking behaviours</b> among MSM HIV self-test users.</li> </ul>

**Fifth priority areas: Enhance partnership and capacity for an effective response within HK and the nearby region**

ACA Recommendations (R) and ongoing initiatives	New initiatives (2013 and 2014)
<b>R20. Foster communication among service providers, policy makers and funding bodies</b>	
<p><b>CFA :</b></p> <ul style="list-style-type: none"> <li>- A platform for communication among ACA, service providers and stakeholders;</li> <li>- Broadened membership, invited stakeholders for opinion exchange and allow observers in CFA meetings since 2012;</li> </ul> <p><b>HKCASO:</b> Regular meetings every 3 months;</p> <p><b>ATF:</b></p> <ul style="list-style-type: none"> <li>- Convene meetings between ACA and ATF, and revise application guidelines of ATF to align with recommendations of ACA;</li> <li>- Increase transparency of ATF by providing updates on funding situation, statistics of applications and FAQ and its website regularly;</li> <li>- Organize briefing session and experience sharing seminar for ATF applicants</li> </ul>	<p><b>Among NGOs</b></p> <ul style="list-style-type: none"> <li>- Sharing sessions among NGOs on topics related to PLHIV;</li> </ul> <p><b>Between policy makers and service providers:</b></p> <ul style="list-style-type: none"> <li>- Familiarization visits to different NGOs for the new term of ACA</li> </ul>
<b>R21. Mobilize vulnerable communities and PLHIV to take part in the AIDS response</b>	
<ul style="list-style-type: none"> <li>- Train up peer workers in spreading the messages in their communities</li> </ul>	<ul style="list-style-type: none"> <li>- To train up ethnic minorities (eg. Indonesian PLHIV) to provide counseling service to their own communities.</li> </ul>

ACA Recommendations (R) and ongoing initiatives	New initiatives (2013 and 2014)
<b>R22. Exchange and collaboration between Hong Kong and other cities especially those in the Mainland</b>	
<ul style="list-style-type: none"> <li>- Continue existing fellowship programmes for personnel from the Mainland;</li> <li>- Maintain the online platform “Cyberdelta” to share HIV surveillance information in Pearl River Delta;</li> <li>- Synergistic publicity in HK, Shenzhen and Macau around World AIDS Day;</li> <li>- Co-host a training workshop for strategic development of community-based organizations in the Mainland;</li> <li>- Provide training and attachment in the Mainland;</li> <li>- Take part in regional consultation on HIV, STI and other health needs of transgender people in Asia and the Pacific, and support a pilot project for transgender persons in Kunming;</li> <li>- Study cross-border MSM risk behaviours and HIV epidemiology</li> </ul>	<p><b>Training and education of HIV workers</b></p> <ul style="list-style-type: none"> <li>- Doctor of DH attended HIV training course at Chinese CDC;</li> <li>- 第三屆京港澳台四地愛滋病論壇 (2014) organized by ACA, HK NGOs, HKU and Ditan Hospital from Mainland for HIV experts;</li> <li>- “Alumni Association – Mainland Training Project” for frontline workers;</li> <li>- Extend HIV prevention education project to multiple districts in Shenzhen for cross-border travelers including MSM and clients of female sex workers from HK through collaboration with Shenzhen, Zhuhai and Macao’s NGOs and CDC.</li> </ul>