Background

In Hong Kong, the number of HIV cases transmitted through injecting drug use (IDU) has remained low up till now and contributed to less than 5% of all reported cases cumulatively. However, the potential risk of cluster outbreak and rapid upsurge of infection among the IDU population is always a concern. To monitor HIV-related risk behaviours and access to HIV testing services among IDU, this population has been included as one of the four at-risk populations in the HIV/AIDS Response Indicator Survey (HARiS) implemented since 2013. The fifth round of survey was conducted in 2017 via commissioning to the Stanley Ho Centre for Emerging Infectious Disease, School of Public Health and Primary Care of the Chinese University of Hong Kong.

The aims of the HARiS survey was to establish a community-based behavioural survey with collection of standardized strategic information; to provide data of a pre-defined set of core indicators among the major at-risk subpopulations for surveillance of HIV-related risk behaviours and HIV testing patterns; and to enable the indicators to be tracked and compared over time for evaluation of the coverage and effectiveness of health-promotion and surveillance programmes in Hong Kong.

Method

Participants were recruited from NGO drop-in centre (one NGO) and outreach service (one NGO) from June to August 2017. The inclusion criteria was “any person who had ever injected drugs (IDU)”. Any person who fulfilled the inclusion criteria was invited to complete an interviewer-administered questionnaire. However, due to some technical difficulties for only recruiting only IDU in the above two settings, “any person who had ever used opiate or recreational drugs” was also recruited, but only those who ever had history of injecting drug use would be included in the analysis.

Results

A. Characteristics of participants

A total of 791 participants (31 centre-based, and 760 from street-outreach) were recruited. The majority were male (93.8%). Chinese ethnicity accounted for 87.6%, followed by Nepalese (5.9%) and Vietnamese (4.2%). Age group over 50 years (55.5%) was the commonest age group, followed by 40-49 (27.7%), 30-39 (12.9%) and 20-29 (3.9%).

B. Drug injection behaviours

Among all, 90.5% had injected drug in the past 1 month, of which 17.6% had shared injection equipment with other people and 6.3% has shared outside usual network.

C. Sexual behaviours

In the past 6 months, 35.5%, 26.2% and 24.0% of the participants had had sex with a regular sex partner (RSP), non-regular sex partner (NRSP) and commercial sex worker (CSW) respectively. The condom use rates in the last sex were 80.8%, 92.8% and 99.5% respectively.
D. HIV testing behaviours

Overall, 92.4% of the participants had ever been tested for HIV, 73.7% had their last test within 12 months, and 67.1% had their last test within 12 months and knew the results. The most commonly reported places of having the last HIV test were Methadone Clinics (95.1%) and public clinics/hospitals (1.5%).

Discussions

1. The proportion of respondents who had HIV test in the past 12 months increased from 61.6% in 2016 to 73.7% this year. The methadone clinics in Hong Kong had implemented universal HIV urine testing programme (MUT) to all attendees since 2004, enhancement of publicity and promotion of the testing programme is needed in order to further increase the testing rate among drug users.

2. The share needle rate in the past one month slightly increased from 15.9% in 2016 to 17.6% in 2017. The figure in 2014 was 24.3%. While there is still a potential risk of local cluster outbreak among injecting drug users, HIV prevention efforts and education on the risk of needle sharing among the population is crucial and should be maintained.

3. The last condom use rate with commercial sex partners (99.5%) were similar to last year’s finding (96.4%) and last condom use rate with regular sex partners (80.8%) was increased as compared to last year (77.3%). The last condom use rate with casual sex partners increased significantly from 77.1% in 2016 to 92.8% in 2017. Health promotion on safer sex about consistent condom use with all partner types should still be sustained and further strengthened.