

HIV & MIGRATION

COUNTRY PROFILE 2009: CHINA

Between 1950 and 1980, all internal and international migration was forbidden by the Chinese government.¹ Market reform in the 1980s loosened this government control on internal migration and, in recent years, labor migration to other countries has become part of China's overall economic strategy.¹

In 2007, the number of Chinese living overseas was 35 million, making it the largest migrant group in the world.² They are in 151 countries, with the largest population in Asia (28 million), followed by the Americas (3.5 million), and Europe (1.6 million).² In 2005, 274,000 migrant workers left China, among whom only 0.5% were skilled workers.³ Overseas Chinese are usually employed in construction, farming and deforestation, or run their own businesses in retail, real estate and importing.²

China's internal migrant workforce of 150 million represents the largest movement of people in modern history, with a rural-urban pattern.⁴ A 2006 national survey showed that two-thirds of all migrants were males, and half were between the ages of 16 and 30.⁵ Only 10% have education higher than middle school; they make up as much as 68% of the manufacturing industry workforce and 80% of the construction industry workforce.⁵ Very few are registered in their areas of work, making this 'floating population' one of the hardest to reach, and consequently one of the most vulnerable.⁶

Summary

Estimated no. of Chinese migrants	35 million ²
Estimated no. of undocumented migrants	2004 estimate of 400,000 ⁷
Net migration rate, per 1,000 population	-0.3 migrants/1,000 population ⁸
Primary destination regions	Asia, North America, Europe, Australia ²
Sending countries	-
Percentage of women among migrants	<ul style="list-style-type: none"> • 1/3 of internal migrants.⁵ • Not available for international migrants.
Involvement in human trafficking	Yes; source, transit and destination country ⁹
Estimated number of displaced people	0 ¹⁰
HIV prevalence among migrants	Not available

CHINA



HIV situation overview

HIV/AIDS was first identified in China on the border regions in 1985, and attributed to the drug trade with Southeast Asia.¹¹ In the 1990s, HIV cases started appearing in the central plains area due to unsafe blood collection practices.¹¹ By 2007, there were 700,000 HIV cases, according to UN estimates, up from 470,000 in 2001.¹² Around 200,000 of those infected are women.¹¹

Around 45% of cases are transmitted through heterosexual transmission, 12% through homosexual transmission, 42% through injecting drug use and 1% from mother-to-child.¹²

The overall HIV prevalence remains low at 0.05%, yet there are pockets of high infection among sub-groups of the population and in certain geographic areas.¹³



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HIV and STIs among migrants

The first cases of HIV were among China's migrant population. Shortly thereafter, it became evident that a large percentage of migrants were HIV positive, although exact figures are not available.⁶ Currently most of the 150 million migrants in China are of a sexually active age.²⁰ More than 80% of those that are HIV positive are between the ages of 20 and 39.⁷ Analysis of HIV prevalence rates in the various geographic districts of China shows a higher prevalence of homosexual and heterosexual transmission of HIV in provinces with larger numbers of migrant workers.¹³ A workplace survey of 1,845 unmarried migrant workers in east China found substantial gaps in HIV knowledge and infrequent condom use.²²

A study of 968 clients of sex workers in three areas of the Sichuan Province of China in 2005 revealed that the majority^a of clients in Suining and Luzhou were migrant workers, retired men, farmers; and the majority of clients in Panzhihua were coal miners.²³ Another study of 506 migrants found that nearly half reported having had multiple sex partners, 89% inconsistently used condoms, 12% reported selling blood since leaving their last residence, and 9% admitted illicit drug use.²²

Governance and policies

- *National Epidemics Law*: categorizes HIV/AIDS as a class B infectious disease, grouping it with viral hepatitis, amoebic dysentery, and syphilis, among others. Persons diagnosed with a class B disease are to be isolated for treatment for a period determined by medical experts, and the police can be used to enforce isolation if patients refuse to cooperate or attempt to flee before the isolation period is finished.¹⁴
- No national law that prohibits discrimination against people living with HIV/AIDS. There are recommendations, but these are not enforceable.¹⁴
- *The China Workplace Education Program, 2007*: Established by the Department of Labor (DOL), in conjunction with the International Labour Organization (ILO). The Project will provide information to workers on HIV, as well as help companies and trade unions develop appropriate policies and practices to protect employment rights of HIV positive people.¹⁵ Activities will largely focus on rural migrant workers. The program aims to reach 90% of migrant workers by 2009.¹⁶
- *Labor Contract Law of China, January 1, 2008*: designed to protect worker's rights, including signed, written contracts for all employees.¹⁷ Challenges remain for implementation.¹⁸

Healthcare and HIV-related services

International migrants are subject to the testing requirements of the destination country, which are administered by employers or recruiting agencies. However, the Chinese government has no official, enforceable health policies or programs regarding international contracted labor or recruiting agencies.¹⁷

The majority of the migrant workforce in China is made up of internal migrants and these individuals have even less access to health programs and facilities than international migrants. Most of them remain unregistered, and are part of a 'floating population' that is very hard to target with health and other programs.⁶

While there is no one program targeting migrant workers, there have been some efforts made by the relevant ministries to educate migrant workers about HIV since 2006.¹³ The Central Department of

Publicity, Ministry of Construction, Ministry of Health (MOH) and the Beijing AIDS Working Committee jointly organized performances of 'Hand-in-Hand against AIDS' for migrant workers at construction sites in Beijing.¹³ The Ministry of Labour & Social Security (MOLSS) distributed IEC materials, such as pamphlets and posters, at training centres and vocational referrals with concentrated migrant workers.¹³ The Ministry of Construction initiated HIV knowledge training and education for some 1,000 management personnel and conducted training for 30,000 migrants. The Ministry of Agriculture also conducted an awareness campaign.¹³ In rural villages, organizations such as the China Youth Development Foundation carry out HIV/AIDS prevention efforts to educate potential internal migrant workers.¹⁹

While there are targeted HIV/AIDS awareness campaigns among migrant workers (mostly internal migrants), workplace HIV/AIDS prevention and care programs are still in preliminary stages.²⁰ There is no mandatory testing, nor any policies for referral and treatment for HIV positive migrant workers.²⁰ Migrants must access the same services as everyone else, like the China CARES program established in 2003 by the MOH.²⁰ This program includes the initiation of treatment with domestically-produced anti-retroviral drugs, health care and education, prevention of mother-to-child transmission (PMTCT) and voluntary counseling and testing.²⁰ However, many migrants can only be given treatment in their own area of residence.²¹

Vulnerabilities:

- **Lack of official health policies and surveillance:** There are no official health policies to guide either international or internal migrant programs. While the DOL, together with the ILO, has created an HIV awareness campaign, there is no concerted effort to provide treatment, care and counselling for migrants. Moreover, there is also no national, enforceable law that prohibits discrimination against people living with HIV.

There has been very little investigation done to understand the size, status and potential risk of HIV infection among migrants, especially those who work 'illegal' jobs such as loggers and miners.⁷ The needs and preferences of different sub-populations of migrants are not clear and services that can meet their needs are not yet available.⁷

- **Institutional discrimination (Hukou system):** Under the hukou system, Chinese citizens were assigned an urban or rural household, and it was the local government's responsibility to provide daily needs and services such as education, health care and housing.²⁴ When people leave their place of registration, they leave behind all of rights and benefits.²⁴ Given that the majority of the migrant workforce is internal, individuals are considered outsiders and excluded from registration and access to services upon reaching their destination.⁷
- **Undocumented/irregular migrants:** Many migrants enter destination countries without visas, or overstay their visas.²⁵ Those that pay large sums of money to be smuggled into destination countries face a future of indentured labor.²⁵ Even those who overstay visas and do not have debts still find that they can only gain employment in arduous or hazardous jobs in manufacturing or construction.²⁵ Some undocumented workers were employed in illegal industries such as illegal logging and jade mines. Without documents, they are very unlikely to seek health care.¹⁹ Each of these factors makes these migrants an especially vulnerable population.²⁵
- **Human trafficking:** China is a source, transit, and destination country for men, women, and children trafficked for the purposes of forced labor and sexual exploitation.²⁶ Although the majority of trafficking in China occurs within the country's borders, there is also considerable trafficking of Chinese citizens to Africa, other parts of Asia, Europe, Latin America, the Middle East, and North

America. Women are lured through false promises of legitimate employment and forced into commercial sexual exploitation – largely in Taiwan, Thailand, Malaysia, and Japan.²⁶ Chinese women and men who are willingly smuggled throughout the world at great personal financial cost risk being forced into commercial sexual exploitation or exploitative labor to repay debts to traffickers.²⁶ In addition, women and children are trafficked to China from such countries as Mongolia, Burma, North Korea, Russia, Vietnam, and Romania for purposes of forced labor, marriage, and sexual slavery.²⁶ China has been active in working with other countries in the Greater Mekong Subregion^b to prevent trafficking. A joint anti-trafficking campaign with Vietnam was launched in 2004.¹⁹

- **Mistreatment and abuse:** Employers prefer to hire migrant workers without a contract, leaving them without any legal protection in case of labor disputes, including: withholding or embezzlement of employees' wages and social insurance payments by the employers, payment of wages that are lower than the legally-fixed minimum, failure to provide compensation for overtime work, lack of work safety and denial of any responsibility in case of an occupational accident.¹⁷ Against opposition from companies employing Chinese migrant workers both in and out of China, the government of China introduced the *Labor Contract Law* in 2008 to better protect worker's rights.¹⁷ This law has yet to be implemented actively and thus has yet to take effect.¹⁷ There are fears that with the global economic downturn, labor rights may be overlooked in order to attract business.²⁴

Additionally, migrant workers tend to get the most poorly paid and most arduous jobs.⁵ Some are required to work very long hours, with no overtime even for national holidays.⁵ A survey by the National Bureau of Statistics found that at least 10% were owed seven months or more in unpaid wages.⁵ Many migrants also work the most hazardous jobs, and more than 700,000 are seriously injured at work each year – with a death toll of 130,000.⁵ Coal mining, construction and manufacturing are among the most dangerous jobs often undertaken by migrants.⁵ Housing is also poor and migrant workers generally tend to live in 'urban villages' characterised by high density, poor quality housing, limited infrastructure, and poor safety and hygiene.⁵

There are also a number of Chinese migrants working in Japan through Japan's trainee programme. The trainee system has long been exposed as an unfair and discriminatory system, labelling migrant workers as "trainees" to justify lower pay and harsh conditions.¹⁹

- **Separation from spouse and family:** Living conditions of migrant workers are usually very harsh and sparse. Most of them live alone, without spouses and families.²⁵ They have left their original place of residence, customs and norms and face enormous changes and pressures in morality, lifestyle, scope of personal contact and sexual behavior – all of which may present them with greater chances to engage in unsafe sex.²⁰ Due to their fear of discrimination and the high cost of medical care, most are unwilling to seek treatment for sexually transmitted infections (STIs) in hospitals or clinics, thus increasing chances of STI and HIV transmission.²⁰
- **Male bridging populations:** China has about 100–150 million individuals categorized as *liudong renkou*, or 'floating migrant population', who are largely young, poor, single men, typically from the countryside.²² The disproportionate sex ratio in China's population has given rise to a group known as 'surplus' men, who are mostly young, poor and unmarried. The relative scarcity of available brides creates challenges for poor rural Chinese males to get married. As a result of their limited economic resources, these surplus men often migrate to other areas for jobs and/or brides. Given established migration patterns, surplus men in China tend to move eastward and southward, from rural to urban areas, and from towns to cities. Current demographic estimates place the number of surplus men between the ages of 20 and 23 years at approximately 640,000 individuals.²² These men may act as 'bridging populations', engaging in high risk sexual behaviors that place them at risk for HIV infection.

China has a diverse female sex worker (FSW) population, which includes low income sex workers

(*zhanjie nu*, or street standing girl) who are also likely to provide sexual services to poorer male clients.²² These women often service low-income surplus men in rural and urban areas. The immediate costs of paying a FSW are less than the long-term investments necessary to find a bride.²²

The potential role of surplus men as a bridging population occurs in linking HIV transmission from the high to low heterosexual risk groups. As the men earn money and become more stable, there would likely be a transition from high-risk partners (FSW) to low-risk partners (similarly poor women in urban or rural areas). Furthermore, the high prevalence of injecting drug use within some surplus men could have substantial consequences for linking an injecting transmission to heterosexual transmission of HIV.²²

Notes

- Map from www.worldatlas.com
- ^a Actual figure not available.
- ^b The Greater Mekong Subregion (GMS) includes Cambodia, the Lao People's Democratic Republic, Myanmar, Thailand, Vietnam and the Yunnan Province of China – all sharing the Mekong River.

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