

# HARiS - HIV and AIDS Response Indicator Survey 2013 for Injecting Drug User

## Background

In Hong Kong, the number of HIV cases transmitted through injecting drug use (IDU) has remained low up till now and contributed to 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 was included as one of the four at-risk populations in the HIV/AIDS Response Indicator Survey (HARiS) implemented since 2013. The first HARiS was conducted in 2013, 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 HARiS survey were 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 by one non-governmental organisation (NGO) from May to August 2013, either through its drop-in centres frequented by drug users or during its outreach activities. Any client who had ever injected illicit drugs and accessed by the NGO within this period was eligible to participate in the survey. A structured interview-administered questionnaire was used.

## Results

### A. Characteristics of participants

A total of 69 participants was recruited. Forty seven (68.1%) were Chinese, and 22 (31.9%) were Nepalese. Overall, 92.7% were male (Nepalese:100%, Chinese: 89.4%). 50.7% of participants aged 50 or above.

### B. Utilization of methadone services

78.3% had used methadone service in the preceding 1 year. Yau Ma Tei methadone clinic was the most often frequented (37.0%), followed by Sham Shui Po (31.5%), Tze Wan Shan (16.7%), San Po Kong (14.8%) and Wan Chai (13.0%).

### C. HIV testing behaviours

82.6% had ever been tested for HIV and 63.8% were tested in the past one year (Chinese : 66.0%, Nepalese : 59.1%). 23.4% of Chinese participants had never been tested, which was higher than that of 4.5% of the Nepalese. The most common venues for HIV testing were NGOs (43.9%), methadone clinics (31.6%) and public hospital/clinics (17.5%).

#### **D. Sexual behaviours**

40.6%, 24.6% and 29.0% had sex with a regular sex partner, casual partner and commercial sex worker in the past 6 months respectively. The overall condom use rate in the last sex with regular sex partners was much lower (39.3%) than with casual (82.4%) and commercial partners (95.0%).

#### **E. Drug injection behaviours**

46.4% had injected drug in the preceding one month and among those, 9.4% had shared needles within usual social network (with family members or partners).

#### **Discussions**

1. The HIV testing rate among IDU in the past one year was 63.8%, which was lower than expected. As the methadone clinics in Hong Kong has been implementing universal HIV urine testing programme (MUT) to all drug user attendees yearly since 2004, the HIV testing rate was expected to reach 78.3%, which was the percentage of methadone service users shown in our survey. The discrepancy between these two figures showed that further enhancement of publicity and promotion of the testing programme is needed to increase the testing rate among drug users.

2. The survey found that nearly 80% of the respondents had used the methadone clinic service in the preceding 1 year. Given the high usage rate of the clinics, methadone clinics can serve as an effective channel to approach the IDU population for HIV prevention programmes.

3. Although the survey found that needle sharing rate was low (9.4%) and all the needle sharing activities were within the participants' usual network, the genuine risk of outbreak of HIV infection among IDU cannot be ignored. HIV prevention efforts and education on the risk of needle sharing among the population is crucial and should be maintained.

4. The last condom use rate with regular sex partners was much lower than that of casual and commercial sex partners, reflecting that the risk perception of getting HIV infection from regular partners or vice versa is low; continuous health promotion on safer sex with consistent condom use with all partner types needs to be strengthened.

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#### **FACTSHEET on HARiS for IDU 2013**

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Centre for Health Protection, Department of Health

Telephone: 3143 7225 Fax: 2780 9580

Website: <http://www.aids.gov.hk> Email: [aids@dh.gov.hk](mailto:aids@dh.gov.hk)

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