

Programme Title:

“Translating recommendations and findings into effective actions – maintaining Hong Kong’s low HIV prevalence” (Programme Code: PPE 612PM)

Executive Summary:

Project 1: “Rapid or classic- Upon your choice” – Running a user-friendly voluntary HIV counselling and testing service (VCT) for the general public

Aim and objectives

- 1) To offer immediate emotional support, preventive education and risk assessment to callers of the AIDS helpline and enquirers of the online AIDS mailbox; and
- 2) To provide free, anonymous and confidential HIV testing with pre- and post-test counselling for the general public; expanding HIV testing for the community; helping locate infected individuals; and getting them into HIV care.

Project components

1) AIDS helpline

The AIDS helpline provided counselling service for users of traditional phones and new formats such as communicational Apps and other internet-based channels, on a free, anonymous and confidential basis. To make the service convenient for and accessible to the public, afternoon sessions from Monday to Friday, and evening sessions from Tuesday to Thursday were provided by both staff members and trained volunteers of the Foundation.

2) Online AIDS mailbox

The Foundation’s online AIDS mailbox, inclusive of online risk assessment function, has become an effective platform for online intervention. While aiming at educating users of the importance of practising safer sex and encouraging their use of Foundation’s VCT service, the online AIDS mailbox was often found to have enquiries from those with high anxiety.

3) Free, anonymous and confidential VCT service (both centre-based and outreach)

To ensure the quality of our free and anonymous blood test with pre- and post-test counselling, the service was to be provided by our staff together with well trained volunteers such as doctors, nurses and other medical professionals. Among other things, service users were encouraged to practise safer sex. To make our service

user-friendly, the public were free to choose rapid or classic HIV antibody test either in the evening or in the afternoon at testing spots in different districts such as Jordan and Central. To expand and increase accessibility of the service, outreach VCT was also provided for clients of NGOs with the need.

Target population

This project aimed to reach the hidden population i.e. those with high risk behaviours but who did not consider themselves as members of the vulnerable groups.

Main achievements

Services of different kinds were given to users in line with their needs. People with high risk behaviours and/or with great anxiety tended to call our helpline for HIV information, testing service, emotional ventilation and related assistance. For emotionally stable clients, they preferred to use the online mailbox. The most frequently asked questions were related to risk assessment; booking of HIV testing; preventive measures; information on medical treatment; and support service for people living with or affected by HIV/AIDS.

The Foundation has been providing one-stop service, ranging from preventive education, HIV testing, to case management and psychosocial service for PLHIV, conducive to avoiding leakage from the HIV service cascade model. Workers followed up closely the cases from the stages of positive screening by rapid test and confirmation, to referral to AIDS clinics.

Concluding remarks

The Foundation had succeeded in educating the high risk populations and those with high risk behaviours through the various component activities of this project such as the AIDS Helpline, the online AIDS Mailbox and the VCT service. Raising service users' awareness of and equipping them with the preventive measures could help prevent the spread of HIV infection. For clients of sex workers hiding in the general population without a very distinctive group identity, promotion and preventive measures of this project could reach out to the hidden through some mass media and convenient channels.

All along, the service has been well implemented and received by the users, with nearly 100% of them rating the service as useful and many positive comments received from service users.

Project 2: “Empowerment and safer sex education for people living with HIV (PLHIV)” – A three-year project to empower PLHIV and help them maintain good sexual health, conducive to effective HIV prevention

Aim and objectives

- 1) To educate PLHIV in the meaning of empowerment and help them experience and actualise empowerment;
- 2) To promote sexual health among PLHIV and help them maintain safer sex practice in order to achieve secondary prevention;
- 3) To facilitate PLHIV peer educators to provide support service for PLHIV including their family members/partners and education on HIV prevention; and
- 4) To involve PLHIV in voluntary services related to HIV prevention.

Project components

1) Counselling service

Counselling service was provided for PLHIV and/or their partners by our professionally trained counsellors and social workers. The key areas of service included: counselling to help PLHIV cope with their HIV status, understand the safer sex issues, manage treatment adherence, and health related and other relevant matters.

2) Peer support group

Peer support group aimed to provide mutual support for PLHIV and participants whose situation was no different from each other were arranged to share among themselves their problems and concerns. Issues touched upon included emotional ventilation; self-acceptance; coping strategy; and breaking isolation etc.

3) Support groups on sexual health and safer sex

They were small group intervention based on “healthy living” and aimed to increase PLHIV’s self-efficacy on condom use, practising safer sex and disclosing their HIV status to sexual partners.

4) Voluntary service

Empowerment service served to provide an excellent opportunity for PLHIV to realise that they had the strength and capability to help others. Trained PLHIV peer volunteers were involved in support service for other PLHIV, HIV education

programme for the general public and organising self-help activities or events for strengthening the cohesion and support network among PLHIV.

Target population

People living with HIV/AIDS

Main achievements

Counselling service offered by trained social workers and counsellors was found to be effective in giving PLHIV emotional support especially at the newly diagnosed stage; making medical referral to AIDS clinics and working with hospital staff to provide psychosocial service; tackling their problems arising from different stages of HIV infection such as health deterioration at old age; maintaining drug adherence; practising safer sex; and improving their physical and psychological health.

A number of support groups, aiming at enhancing mutual support among PLHIV and enriching their coping strategies with the status, had been organised with good response. For the support groups on sexual health and safer sex, participants were taught specific skills related to safer sex negotiation, risk of STI/HIV re-infection and overcoming the barriers to the practice of safer sex. Regarding disclosure of HIV status, participants found the disclosure guidelines and skills useful.

PLHIV volunteers took part in various service provision, including HIV education; peer counselling for individuals and support groups and escort service; and participation in education programmes, self-help group and World AIDS Campaign. Peer volunteers also shared their experiences with tertiary students and the general public with positive response from audience who had gained a better understanding of the lives of PLHIV and giving the peer volunteer very substantial support.

Concluding remarks

Through the different services and groups, PLHIV had shown substantial improvement in not only their self-acceptance of the illness; knowledge of the infection and health management ability but also the awareness of the need to practise safer sex. Moreover, some participants of the sexual health support group had successfully disclosed their HIV status to their partners and were able to sustain their relationship healthily afterwards.

The benefits of this project could have been wide ranging. At the individual level, it had helped PLHIV raise self-esteem and boost morale, decrease isolation and

depression, and improve health through access to better and more information about care and prevention. At the community and societal level, it had helped reduce fear and prejudice and achieve secondary prevention.

Project 3: “Diversity & solidarity” – HIV prevention and sexual health programme for Men who have Sex with Men (MSM) and Transgender (TG) populations

Aim and objectives

- 1) To equip MSM and TG people with the knowledge and skills required for protecting themselves from HIV infection;
- 2) To promote and sustain safer sex practice among members of the MSM and TG populations;
- 3) To promote early and regular HIV and STI testing with counselling among MSM and TG populations; and
- 4) To mobilise the MSM and TG populations (including MSM and TG organisations, MSM businesses and gay and TG websites) to take part in the HIV/AIDS prevention programmes.

Project components

- 1) Training of peer educators

Volunteers were recruited and trained on basic knowledge of HIV/AIDS and STIs; attitude towards PLHIV; sexual and psychological health information on MSM and TG; and skills in peer counselling and outreach service.

- 2) HIV/STI testing service

Our team of social workers, counsellors and health/mental health professionals provided HIV testing with pre- and post- counselling. If clients were found positive, immediate counselling and psychological support would be offered and the case would be followed up by Foundation's patient service worker.

- 3) Hotline service

Hotline service provided a safe and comfortable avenue for service users to make enquiries, with most of them relating to sexual health including HIV/STI; risk assessment of their behaviours; HIV testing; sexual orientation and relationship.

- 4) Capacity building workshops

Workshops on various topics related to social and relationship issues, physical, mental

and sexual health of MSM and TG were held.

5) Support groups

The groups, with the use of social learning, behavioural and problem solving intervention together with tailor-made activities, had enabled participants to learn and practise skill in safer sex negotiation, thus enhancing their self-efficacy and positive attitude towards safer sex.

6) Internet intervention

It aimed to reach out to MSM and TG, particularly young MSM, through internet and social apps and provide a platform for them to discuss sexual health issues and related worries and concerns; and request for related service including HIV testing.

7) Outreach service

Outreach team conducted educational interventions at different gay hangouts and peer educators actively talked to the customers about condom use and sexual health, with the distribution of educational materials and condoms.

Target population

Men who have sex with Men (MSM) and Transgender (TG)

Main achievements

The project had a good and smooth progress with positive and encouraging feedbacks were received from the participants; peer educators; and gay and LGBT organisations. Moreover, participants' awareness of their sexual health including the prevention of HIV was raised; together with an increase in clients' knowledge level, willingness to practice safer sex and taking regular testing.

Concluding remarks

It was found effective to adopt a comprehensive sexual health approach using ecological model and working through multi-levels such as individual; interpersonal; organisational; and community level to facilitate and sustain participants' attitudinal and behavioural change. The various components mentioned aforesaid had the emphasis on not only the knowledge but also the psycho-social issues, facilitating attitude change towards safer sex and training on skill related to safer sex negotiation so as to reduce high risk sexual behaviours.

Project 4: “Set out happy, go home healthy” – HIV prevention for cross-border travellers (CBT)

Aim and objectives

- 1) To educate cross-border travellers (Men who have sex with Men [MSM] and clients of female sex workers [CFSW]) in knowledge of HIV and the preventive measures with a view to protecting them from HIV infection;
- 2) To promote and reinforce safer sex practice among cross-border travellers;
- 3) To promote and encourage early HIV testing among the groups; and
- 4) To develop and consolidate co-operation with neighbouring cities frequently visited by CBT on HIV prevention programmes.

Project components

- 1) Programme/activities targeted at MSM in Shenzhen and Zhuhai

- a) Training of peer educators

It aimed to strengthen peer educators' knowledge of HIV prevention, sexual health and safer sex, and outreach engagement skills.

- b) Outreach service at MSM venues

Outreach by project staffs and peer educators of local partnering organisations was conducted at different gay hangouts including bars and saunas which were considered to be hotspots for Hong Kong cross-border MSM. Education materials were given out during outreach and also placed at hot spots for distribution.

- 2) Programme/activities targeted at clients of female sex workers in Macau, Shenzhen and Zhuhai

- a) Training of volunteers

The training was aimed to equip and prepare the newly recruited volunteers for work on HIV prevention and intervention, with topics on knowledge of HIV, safer sex and early testing. Moreover, volunteers were further equipped with outreach and communication skills.

- b) Exhibition booth on HIV education and prevention

Popular spots frequented by Hong Kong travellers were located with the help of local

counterparts and education activities were conducted. Peer educators shared with the targets on topics related to HIV prevention, safe sex and information on testing and service provided in Hong Kong. Education material with the hotline numbers of the Foundation and our local counterparts was distributed.

Target population

Cross border travellers (MSM and clients of female sex workers)

Main achievements

Through cooperation with local health authorities and NGOs and the involvement of volunteers and peer educators, over 90% of the targets reached were educated in basic knowledge of AIDS, risk reduction measures and the importance of regular testing. Moreover, pilot projects were started in the third year with CDCs of Nanshan (南山), Baoan (寶安) and Longgang (龍崗) so as to extend our service to CBT from Hong Kong with high risk behaviours in these districts. Counterparts of these pilot projects had agreed to continue the collaboration and 2 more CDCs namely: Lowu (羅湖) and Futian (福田) had joined and worked hand in hand with the Foundation to implement HIV prevention education.

Concluding remarks

The march of AIDS identifies no boundaries and the spread of HIV/AIDS across the border has been far from a mild one. Recommended HIV/AIDS strategies for Hong Kong 2012 ó 2016ö have projected that the heterosexual men primarily contracting HIV from sex workers outside Hong Kong would be the second largest group of new infections. Together with the information researched from a number of studies, the chance of Hong Kong CBT engaging in high risk sex on the mainland is still a high one. It is therefore necessary for Hong Kong to continue working together with neighbouring cities on HIV prevention so as to reduce the vulnerability of our CBT to HIV infection.