



**School of Public Health and Primary Care**

2/F., School of Public Health  
Prince of Wales Hospital  
Shatin, N.T., Hong Kong  
<http://www.sphpc.cuhk.edu.hk>

**公共衛生及基層醫療學院**

香港新界沙田威爾斯親王醫院  
公共衛生學院二字樓  
TEL 電話：(852) 2252 8488 / 2252 8800  
FAX 傳真：(852) 2145 7489 / 2606 3500  
EMAIL 電郵：info\_sphpc@cuhk.edu.hk

**Attachment 1**

30 November 2009

**Survey results of prevalence of HIV antibody testing  
among men who have sex with men in Hong Kong**

**Background**

The HIV epidemic among men who have sex with men (MSM) has become a serious health threat in Hong Kong and other parts of Asia. The newly inaugurated School of Public Health and Primary Care, The Chinese University of Hong Kong (CUHK), gives high priority to research and teaching to support local and global initiatives to promote responsible lifestyles which will decrease the risks of infection and promote greater understanding in the community. Its Community Research Program on AIDS hence conducted a survey to investigate the prevalence and associated problems related to HIV antibody testing among MSM in Hong Kong.

The HIV prevalence among MSM in Hong Kong increased from 4.05% in January 2007 to 4.31% in January 2009. Prior to the study, all the HIV positive MSM cases detected in these two studies did not know about their HIV status. These latent cases increase the risk of spreading HIV and the difficulty in HIV prevention and can be attributed to the low prevalence of HIV antibody testing in the local MSM community.

**The survey**

It was funded by the AIDS Trust Fund and was conducted from July to October, 2008, which successfully interviewed 577 Hong Kong Chinese men recruited from gay venues and gay websites, who self-reported having had anal sex with another man in the last 6 months. The response rate was about around 70%. On the World AIDS Day, Professor Joseph Lau, Associate Director of the CUHK School of Public Health and Primary Care, briefed the press about some key findings of this survey.

## **Key findings**

Amongst all the 577 MSM being interviewed, though 326 MSM (56.5% of all respondents) had ever been tested for HIV antibody, only 224 (38.8% of all respondents) had taken up the test in the last 12 months. Although about half of the respondents had engaged in unprotected anal sex, only 70 of them (12.1% of all respondents) were regular HIV antibody testers. Regular testing is recommended for those who are exposed to the risk of HIV infection. The rate of HIV antibody testing in the local MSM community is hence far from ideal.

Furthermore, amongst the 326 MSM who had ever received HIV antibody testing (at least once), only 120 (36.8%) would consider taking up the test again in the future 6 months. Many of those who had been tested for HIV antibody did not hence want to be retested. There may be a false sense of security associated with the negative testing results obtained from the previous tests – ‘I am alright now and I will be alright in the future’. Such misconception is a dangerous one.

The experience of the last HIV antibody testing will affect the willingness to be retested in the future 6 months. Those ever-testers who scored higher in a scale assessing the degree of empathy expressed by the service providers (e.g. showing care and compassion) received in the last episode of HIV antibody testing were twice as likely as those with a lower score to be willing to be retested for HIV antibody in the future 6 months. Moreover, amongst those who had ever been tested for HIV, those who felt satisfied with the performance of the non-governmental organisations (NGO) providing the testing services, with respect to the attitudes of the service providers, convenience of testing and additional services related to sexually transmitted diseases, would also be more likely to be inclined towards retesting in the future 6 months.

The government and the HIV NGOs need to expand the coverage of HIV antibody testing. Amongst the 251 MSM respondents who had never been tested for HIV antibody, only 31 (12.4%) inclined toward being tested in the future 6 months. Amongst those who had never been tested for HIV antibody, those with unprotected anal sex were not more likely than others to be willing to take up HIV testing in the future 6 months.

## Remarks

Professor Lau remarks that promotion of regular HIV antibody testing among those MSM who are at risk of HIV infection should be emphasised in the local setting; the current testing rate is far from being satisfactory. Service providers not only need to provide the testing services, but need to find innovative means to outreach and to persuade more MSM to come forward for testing for the first time and afterwards. The service needs to be more empathetic to individual tester's feelings, being more convenient (e.g. better locations, appointments and outreach delivery of testing services) and should have added values (e.g. services related to sexually transmitted diseases). An explicit practice to invite people to return for testing and to follow up those being tested in order to form a better client-provider relationship may improve the situation.

\*\*\*\*\*

Professor Joseph Lau

Associate Director, School of Public Health and Primary Care

Head, Division of Health Improvement

Faculty of Medicine, The Chinese University of Hong Kong

Mobile: 63777331

Office: 22528727

Email: [jlau@cuhk.edu.hk](mailto:jlau@cuhk.edu.hk)