

FOIA MARKER

**This is not a textual record. This is used as an
administrative marker by the William J. Clinton
Presidential Library Staff.**

Collection/Record Group: Clinton Presidential Records

Subgroup/Office of Origin: National AIDS Policy Office

Series/Staff Member: Todd Summers

Subseries:

OA/ID Number: 21088

FolderID:

Folder Title:
Issues - Gender

Stack:

S

Row:

66

Section:

6

Shelf:

2

Position:

2

**HOW SERIOUS ARE GENDER ISSUES IN AIDS STRATEGIES AND
PROGRAMMES? ----- THE HONG KONG EXPERIENCE**

**Miss Elijah Fung
Manager
St. John's Cathedral HIV Information & Drop-In Centre
Hong Kong**

A paper presented at the Satellite Symposium "Rethinking AIDS Strategies and Programmes in Chinese Communities: Ideas and Experiences", held in conjunction with the 12th World AIDS Conference, Geneva, on 29 June 1998.

HOW SERIOUS ARE GENDER ISSUES IN AIDS STRATEGIES AND PROGRAMMES? --- THE HONG KONG EXPERIENCE

Miss Elijah Fung
Manager

St. John's Cathedral HIV Information & Drop-In Centre

HIV/AIDS SITUATION IN HONG KONG

To begin with, I would like to briefly outline the HIV/AIDS situation in Hong Kong. In Hong Kong, the first AIDS case was diagnosed in 1985. As at 31 March 1998, the total cumulative HIV/AIDS figures stood at 1005 and 322 respectively. In Hong Kong, the main route of HIV transmission is through sexual contact, mainly heterosexual sex. As the majority of the HIV infection cases are via heterosexual sex, the HIV infection rate amongst women has been rapidly increasing over the last few years. To date, a total number of 139 women have been infected. Over 90% of these infected women have been infected by their spouse or regular sexual partner(s). As predicated by the Department of Health, heterosexual sex will certainly be the main route of HIV transmission in the years to come in Hong Kong and elsewhere in the world.

CULTURE AND GENDER ISSUE

Due to historical reasons, Hong Kong is a mixture of the East and the West, shaped by both Chinese and Western culture. However, the former has a deep-rooted influence on Hong Kong people's thinking, and moral and value systems. Generally speaking, most Hong Kong people have a conservative attitude towards sex, sexuality and sex-related matters. Sex is still seen as a taboo subject and is still not discussed openly in public, or even amongst family members and friends.

With regards to gender equality, we see there is still inequality between men and women in many aspects of Hong Kong life. Although Hong Kong women enjoy a higher social status in comparison with other women in the rest of Asia, they are, however, still placed in a less advantageous position compared with men in Hong Kong. For instance, according to a survey finding conducted by The Family Planning Association of Hong Kong in 1992, 25.6% of the respondents still believed that women should be responsible for family planning.

Inequality between the sexes and cultural barriers further make women less able to discuss and negotiate sexual matters with their partners. Besides, the biological make up of women makes them twice as likely as men to be infected with HIV. Both the lack of adequate HIV information, and weaker bargaining power for safe sex practice, make women more vulnerable to HIV infection. As heterosexual sex is the main route of HIV transmission in Hong Kong, there is a potential risk that more Hong Kong women will be infected with HIV and more babies will be born to HIV positive mothers in the years to come.

EXISTING AIDS STRATEGIES AND PROGRAMMES

To prevent more people from being infected by HIV, AIDS must be viewed not only as a health problem, but also as a social, economic and gender issue. For AIDS strategies and programs to be effective, they also need to tackle these issues.

Referring to the situation in Hong Kong, the majority of the AIDS publicity campaigns and prevention programs of the government have a similar message to all the target population – that is, be faithful to your partner, have a monogamous relationship, reduce the number of your sexual partners, use condoms, etc. The rationale behind these messages assumes the same strategies can work for all the specific groups in society, single men, single women, families, commercial sex workers, etc. To take one example, such ‘blanket’ strategies do not properly address the situation of commercial sex workers, whose source of income depends on a steady turnover of sexual partners.

Furthermore, the above strategies are also ineffective when addressing the problems of women in general. For most, their sexual partners will probably be restricted to their own husbands or, if unmarried, to one regular sexual partner. Due to cultural barriers, and social and economic issues, even when they suspect that their husbands/partners are not faithful in the relationship, they may not feel comfortable about bringing up the topic of safe sex practice. Promotion of condom use in such cases is likely to fail.

Non-governmental AIDS organisations have, since 1990, played an important role in combating the AIDS epidemic in Hong Kong. To respond to the specific needs of groups such as the gay community, drugs users, commercial sex workers and youth, many AIDS-related programmes have been designed for these groups. Thanks to the hard work of the NGOs, good results have been seen in recent years.

However, as the main route of HIV transmission in Hong Kong is now via heterosexual sex, the current AIDS strategies and programmes may not be able to address the needs of this change in ‘at risk’ groups. In recent years, Hong Kong cross-border travellers have become a new and growing ‘at risk’ group.

According to a survey carried out by the City University of Hong Kong in 1996 (see References, no. 8), one in four Hong Kong cross-border truck drivers had slept with a sex worker over the last three months while in mainland China. Besides, some of the truck drivers also engaged in extra-marital sex with mainland girlfriends or had second wives on the mainland.

Almost 90% of these respondents believed that they were unlikely to become infected with HIV. But, the majority of these men were aged between 31 and 40, and almost 80% were married with children. Therefore, not only does HIV/AIDS directly affect these cross-border truck drivers, but it also indirectly affects their wives and families.

To meet the new trend of the HIV epidemic in Hong Kong, programs and strategies should be culturally sensitive and gender specific. Economic status, educational background, ability and special needs of the target population should be considered as crucial elements in designing AIDS prevention programs. Seeking advice from target population and the inclusion of them in program development will lead to a better and more influential program and success.

RECOMMENDATIONS

1. Good and effective AIDS education and prevention programs aim at addressing such issues as sexuality, the role of gender in HIV transmission and the importance of the empowerment of women. Through training programs, women can be empowered and become more assertive in initiating safe sex practice to protect themselves. As for men, they should be taught to be more responsible and to modify their sexual behavior. The only way to effectively raise equality between men and women is to emphasize mutual respect between the sexes, and to enhance mutual understanding of each party's needs and expectations.
2. A non-discriminatory and friendly environment is essential to raise the equality of the sexes. For instance, the setting up of the Equal Opportunities Commission is one step forward in bringing about equality between men and women in Hong Kong. However, the government should also strengthen and amend existing ordinances and strengthen civic education in order to reduce existing inequalities in treatment of the sexes.
3. We must acknowledge that the Hong Kong government has put much effort into tackling the AIDS issue. However, most of Hong Kong's existing AIDS programmes have to date been supported only on a short-term basis by the government. With only short-term financial assistance, it is difficult to maintain the programmes on a continuing basis, so as to have a greater impact on the target population. In order to have more effective AIDS strategies and programmes, the government should consider making a long-term financial commitment to running costs for the programmes already in place, in addition to sponsoring the setting up of new projects based on new target-group orientation.
4. In the absence of an AIDS vaccine or treatment, collaboration, exchange of information and networking with mainland China are now essential. For example, cross-border issues can be addressed by learning from and sharing experience with one other, and collaborating in developing programmes to combat HIV/AIDS.

CONCLUSION

This Satellite Symposium is only a beginning. It serves to help us gain a better understanding of the role of culture and gender differences in AIDS prevention and strategies for the Chinese community. Experience to date leads us to believe that good AIDS strategies and programmes must address these economic, social, cultural and gender issues. Above all, good strategies and programmes must also be supported by government.

References

1. Bourassa, Ginny. "Report Back from Group Discussions: Group 1: Women and Gender Issues". In *Global Response To HIV/AIDS from Chinese communities, an official satellite symposium of the XI International Conference on AIDS, Vancouver*. Vancouver: The Conference, 1996, pp.25-26.

2. Choi, Man Yan Teresa. "HIV infection & AIDS-the basics". In *HIV infection in women & babies - a seminar and counselling workshop for nurses, The proceedings*. Hong Kong: AIDS Unit, Department of Health, 1995, pp.2-3.
3. Chow, Jennie. "HIV/AIDS counselling". In *HIV infection in women & babies - a seminar and counselling workshop for nurses, The proceedings*. Hong Kong: AIDS Unit, Department of Health, 1995, pp.14-15.
4. Gray, Ann. "HIV/AIDS education and commercial sex workers". In *Building new hope together: Proceedings, Hong Kong AIDS Conference 1996*. Hong Kong: Hong Kong Advisory Council on AIDS, pp.224-228.
5. *Internal assessment report of a review on the HIV/AIDS situation and the programmes on its prevention, care and control in Hong Kong*. Draft report for submission to Hong Kong Advisory Council on AIDS, by Review Steering Committee. Hong Kong: Review Steering Committee, April 1998.
6. Orhant, Melanie. "Hong Kong". In *Women and Human Rights and the challenge of HIV/AIDS*. Proceedings of the Conference organized by: Asian Women's Human Rights Council, World Council of Churches, Human Rights Task Force Cambodia and Cambodian Women Development Association, 21-27 November 1994, Phnom Penh, Cambodia. Quezon City: Asian Women's Human Rights Council, 1995.
7. Reid, Elizabeth. *Gender, knowledge and responsibility*. (HIV and Development Programme Issues Paper 10.) New York: UNDP, 1995.
8. *Research report on AIDS awareness and sexual behaviour of truck drivers in Hong Kong*. Report by Division of Social Studies, City University of Hong Kong & AIDS Concern. Researchers: Billy Ho Chi On & Ray Choy Yuen Ling. Hong Kong: January 1997.
9. *Strategies for AIDS prevention, care & control in Hong Kong*. Hong Kong: Advisory Council on AIDS, 1994.
10. Tse, Hei Yee. "AIDS in women". In *HIV infection in women & babies - a seminar and counselling workshop for nurses, The proceedings*. Hong Kong: AIDS Unit, Department of Health, 1995, pp.4-5.
11. *Women & AIDS seminar, Proceedings*. Hong Kong: The Hong Kong AIDS Foundation & The Hong Kong Association of Business and Professional Women, 1993.
12. Wong, Day. "Gender, sex and violence". *Gender Studies News and Views*, no.12, April 1997, p.1.
13. 呂炳強、張燦輝、何榮宗。中國道德文化與預防愛滋病的關係：有關男人「濫色」和男女平等的理念兩難。文章於中港預防艾滋病交流研討會內發報，1997年5月25日，北京。
14. 香港家庭計劃指導會。一九九二年香港家庭計劃、知識、態度及實行調查報告。香港家庭計劃指導會，頁32。