Contents



Chapter 1

OVIERVIEW OF THIE GLOBAL AIDS
INPIDIEM IC

Chapter 2

China's HIW/AIDS

Tipidem ic



Chapter 3

Progress in HIV/AIDS Prevention,
Treatm entand Care in China



Chapter 4

Chinese NGOs in action against HIV (AIDS





Chapter 1: OVERVIEW OF THE

GLOBAL ADS EPDEM IC

An estinated 38.6 m ilion [33.4 m ilion $| ^a46.0$ m ilion] people worldwide were living with HW in 2005. An estimated 4.1 m ilion [3.4 m ilion-6.2 m ilion] became newly infected with HW and an estimated 2.3 m ilion [2.4 m ilion $| ^a3.3$ m ilion] bettheir lives to ADS.

O verall globally, the H IV incidence rate (the annual number of new H IV infections as a proportion of previously uninfected persons) is believed to have peaked in the late 1990s and to have stabilized subsequently, notwithstanding increasing incidence in a number of countries. In several countries, favorable trends in incidence are related to changes in behavior and preven-

tion program mes. Changes in incidence along with rising AIDS mortality have caused global HIV prevalence (the proportion of people living with HIV) to leveloff. However, the number of people living with HIV have continued to rise, due to population grow the and, more recently, the life prolonging effects of antiretroviral therapy. In sub-Saharan Africa, the region with the largest



| Cred ribbon composed of candles in front of a church in Helsinki

burden of the AIDS epidem is, data also indicate that the HIV incidence rate has peaked in most countries. However, the epidem is in this region are highly diverse and especially severe in southern Africa, where some of the epidem is are still expanding.

New survey data underscore the disproportionate in pactof the ADS epiden is on women, especially in sub-Saharan Africa where, on average, three women are HV-infected for every two men. Among young people (15 j 224 years), that ratio widens considerably, to three young women for every young man.

Am ong the notable new trends are the recent declines in national IV prevalence in two sub-Saharan African countries (Kenya and Zinbabwe), urban areas of Burkina Faso and sin iarly in Haii, alongside indications of significant behavioural change; and delayed sexual debut. In the rest of sub-Saharan Africa, the

m a judy of epidem is appear to be leveling off | but at exceptionally high levels in most of southern Africa.

HW prevalence has also been declining in four states in India, including Tam ilNadu, where prevention efforts were scaled up in the late 1990s. In Cam bodia and Thailand, steady ongoing declines in HW prevalence are continuing. However, HW prevalence is increasing in some countries, notably China, Indonesia, Papua New Guinea, and Vietnam, and there are signs of HW outbreaks in Bangladesh and Pakistan.

The majority of people living with H IV in eastern and central Asia are in two countries: Ukraine, where the annual number of new H IV diagnoses keeps rising, and the Russian Federation, which has the biggest ADS epidem is in all of Turope.

Meanwhile, evidence offresurgentepiden ics continues to en erge in the United States of America and in son e countries in Hurope among nen who have sex with nen, and there exist largely hidden epiden ics among their counterparts in Latin America and Asia.

More than 1.3 m illion people were receiving antiretrovial therapy in low— and m iddle—income countries by December 2005, up from approximately 400 000 people two years earlier. In sub—Saharan Africa, the number of people receiving treatment increased more than eight—fold (from 100 000 to \$10 000) between 2003 and 2005, and more than doubled in 2005 alone. Most of that trend is due to increased treatment access in a few countries (notably Botswana, Kenya, South Africa, Uganda and Zambia). The number of people receiving antiretrovial therapy in Asia increased almost threefold, to 180 000 in 2005.



i@Chinese peasants read handbooks on HW/ADS prevention

Chapter 2: China SHWADS Epidem ic

1. National HIV/AIDS Estimates

In 2003, the Chinese M inistry of Health, with support from UNAIDS and WHO, assessed the extentof the HIVAIDS epidem ic in China. Since them, the Chinese governm enthas made significanteffortioto strengthening H IV AIDS prevention, treatment, care and support, including efforts such as scaling up H W testing to identify people living with HIV, and actively providing clinical treatment and care to AIDS patients. Nationwide screening of form er com m ercialblood and plasm a donors and certain key populations, such as IDUs, has been done, and the mum ber of H W sentinel surveillance sites has been expanded along with voluntary counseling and testing (VCT) services. Through

these efforts, an in proved understanding of Chinas IIV (ADS epidem is has emerged.

Key findings

The latestestin atom results indicate that as of late 2005, people currently living with HW/AIDS in China are 650,000 (range: 540,000 to 760,000), of which 75,000 have developed AIDS (range: 65,000 to 85,000). Nationally, HW prevalence averages 0.05% (range: 0.04 to 0.06%). In 2005, there were an estinated 70,000 new HW infections (range: 60,000 to 80,000), and 25,000 AIDS deaths (range: 20,000 to 30,000).

1.1 Distribution of people living with H IV and A ID S

There are approxinately 288,000 drug users living with HIV/AIDS, accounting for 44.3% of the

total number of estinated HW cases. Seven provinces — Yunnan, Xinjiang, Guangxi, Guangdong, Guizhou, Sichuan, and Hunan — each have nore than 10,000 drug users infected with HW, and these 7 provinces account for 89.

5% of the HW/ADS cases among drug users.

Approxinately 69,000 former connectable of and plans a denors and recipients of blood or blood products through transfusions, are living with HW/AIDS, accounting for 10.7% of the total number of estimated HW cases. Five provinces—Henan, Hubei, Anhui, Hebei, and Shanxi—accountior 80.4% of infections in this population.

Approxinately 127,000 sex workers and their clients are living with HIV/AIDS, accounting for 19.6% of the total number of estimated HIV cases.

There are approxin ately 109,000 partners of HW-positive individuals and members of the general population who are living with HWADS, accounting for 16.7% of the total number of estimated HW cases.

An estinated 47,000 m en who have sex with men (MSM) are living with HV/ADS, accounting for 7.3% of the total number of estinated HW cases.

Approxinately 9,000 cases of nother-to-child transmission have occurred over the past year, accounting for 1.4% of the total number of estimated H W cases.

12Numberofpeople living with AIDS

An ong the estinated 75,000 people living with AIDS, approximately 22,000 were infected through commercial blood and plasma donation and blood transfusion, and approximately 53,000 were infected through injection drug use, sex, and

m office to-child transm ission.

13 A IDS deaths in 2005

An ong the estinated 25,000 ADS deaths in 2005, approximately 10,000 have occurred an ong former commercial blood and plasma domors.

14 New HIV infections in 2005

The estinated 70,000 new HV infections have prince arily occurred among high-risk groups, including drug users, sex workers, clients of sex workers, MSM, and partners of people living with HW/ADS. A relatively small proportion of new cases are associated with mother-to-child transmission of HW.

2. Characteristics of China s HIV/ AIDS Epidemic

21 HWAIDS is still on the rise

Sentinel surveillance data indicate that H IV prevalence among drug users has risen from 1.95% in 1996 to 6.48% in 2004. H IV prevalence among sex workers has risen from 0.02% in 1996 to 0.93% in 2004. In areas of high transmission, H IV prevalence among pregnant women has risen from 0 in 1997 to 0.26% in 2004. These data indicate that H IV infections continue to increase.

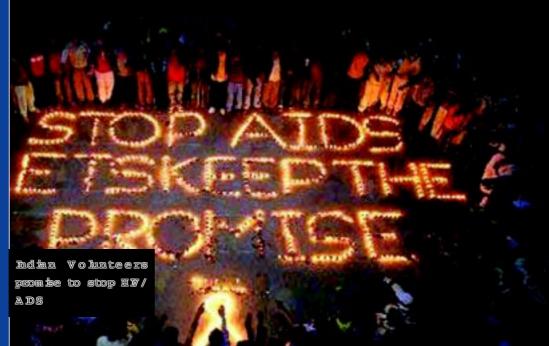
2.2 H IV has spread widely Joutthere is significant geographic wardation in the epidem ic

By the end of November 2005, Henan and Yuman have each reported over 30,000 cum u-lative H IV cases. Guangxi, Xinjang and Guangdong have each reported over 10,000 cum ulative H IV cases. Ningxia, Qinghai, and Tibet have each reported fewerthan 100 cases.

There are significant geographic variations in









TOA class on HV/ADS prevention in a middle school

HW prevalence among drug users and sex workers. In some areas of Xinjeng, Yunnan and Sichuan, HW prevalence among injection drug users exceeds 50%, while in Jiangsu, Zhejang, InnerMongolia, Liaoning, HW prevalence among injection drug users remains under 5%. In some parts of Yunnan, Chongqing, Hunan, Guangdong, Guangxi, Sichuan, HW prevalence among sex workers is over 1%.

2.3 New cases are prin arily being transmitted through injection drug use and sex, but other modes of transmission are also found

Cumently, injection divig use and sexual contactane the dominant odes of N transmission.

Although form er commercial blood and plasma domors account for a significant proportion of people living with HW and AIDS, transmission in this group occurred principle force 1996.

Estination results indicate that among people currently living with HIVADS, 44.3% were infected through injection drug use, 43.6% were infected through sexual transmission, 10.7% were infected through blood/blood products, and 1.4% were infected through through mother-to-child transmission.

Am ong the estinated new H IV cases in 2005, 49.8% were associated with sexual transmission,





Mouth Red Ribbon Campaigns in China

48.6% were associated with injection drug use, and 1.6% were associated with mother-to-child transmission of HIV.

$2.4\,\mathrm{M}$ or epeople are progressing to clinical A IDS, and A IDS—related deaths are on the rise

The main clinicalmanifestations of ADS among ADS patients include pulmonary infections, infectious diamhea, shingles (herpes zoster), and oralitungal infections. Approximately one—third of ADS patients have late—stage illness, and mostseek treatmentonly when opportunistic infections become serious. These factors influence treatment effectiveness.

During the last2 years, the num berofreported ADS cases and deaths have risen dram atically, indicating that many people living with HIV are developing ADS. The num berofADS cases reported in 2004-2005 accounted for 60.7% of the cum ulative num berofreported ADS cases, and the num berofADS deaths reported in 2004-2005 accounted for 63.4% of the cum ulative num -

berofreported ADS deaths.

2.5 The epidem ic is spreading from high-wisk groups to the general population

Surveillance data indicate that II V is spreading from drug users, sex workers and their clients and other high-risk populations to the general population. In some areas of Yunnan, Henan,
Xinjang and other provinces, HIV prevalence already exceeds 1% among pregnantwomen and
those receiving premarkal and clinical HIV testing,
meeting UNAIDS criteria for generalized
epidemic.

2.6 There is a potential risk that the epidem ic will spread further

INADS awareness remains unacceptably low, and many people still do not know enough about how to protect them selves against HW. National surveillance data indicate that 45.5% of injection drug users are sharing needles and syringes, and 11% of drug users are engaging in high risk sexual activities, thereby increasing their risk of becoming injected with HW and accelerating the spread of HW among drug users, sex workers and their clients. Mobility of people living with HW is another factor affecting the spread of HW around China. Other in portant factors fueling the spread of HW include increases in risky sexual behavior, and rising sexually transmitted infection rates in many cities.







isChinese President Hu Jintao and Vice Premier Wu Yi, vist ADS patients in hospital

Chapter 3: Progress in HIV AID S

Prevention, Treatm entand Care in China

In 2005, the Chinese government has taken steps to further strengthen is leader-ship in the response to HW ADS. The State Council convened an executive meeting and a national videoconference was held on muldsectoral work in HW ADS prevention, treatment and care to clarify roles and responsibilities, to strengthen HW ADS prevention, treatment and care legislation, and to include HW ADS in the 11th National Five—Year Plan. In addition, comprehensive

prevention, control, treatment, care and support measures have been in plemented.

O verall, significant progress has been made in the following areas:

1. Advancing a government-led prevention, treatment and care response with multisectoral cooperation and strong societal participation

To ensure an effective HIVAIDS response,

leadership and coordination have been strengthened by increasing representation on the State Council H W /A IDS W orking Com m itee Office (SCAW CO), and by further clarifying the roles of each governm entagency and by setting up 5year H W (AIDS prevention goals and stategies. Presidentifu Jintao, Prem jerw en Jibbao, Vice Prem ferW u Yland othernational leaders have wisited people living with HIV/AIDS in hospitals and in theirhom es, and expressed sympathy for then and for healthcare and volunteerworkers. M inistry of Health, M inistry of Finance, M inistry of Public Security, M inistry of Justice, M inistry of Raiways, AlChina W om en; s Federation, Al-China Youth Federation and otherM inistries and NGOs have established H IV AIDS coordination m echanism s, with each agency form ulating stategic plans for HIV/AIDS prevention, treatment and care. Around the country, governments of

autonom ous regions, and 88% ofprefecture governments have established prevention, treatment and care leadership coordination m echanism s. Leaders at each levelof governm ent have also paid visits to and expressed sympathy for AIDS patients and healthcare and volunteer workers,

all 31 provinces and

participated in H IV AID S education activities, and assessed localH W/AIDS prevention, treatment and care responses. The foundation has been laid for a governm ent-led prevention and care response with multisectoral cooperation and strong societal participation.

2. Strengthening policy measures to standardize HIV/AIDS prevention and care work in accordance with the law

In June 2005, Prem terw en Jabao chated an executive meeting of the State Council that outlined 9 key areas for Chinais HIV/AIDS prevention, treatment and care response. Each levelofgovemm entwas requested to prepare action plans, placing HWAIDS prevention, treat-











popremer wen Jabao vists pepole lyng with ADS

mentand care among the key public health areas of the 11th NationalFive-YearPlan, and to formulate and in plan entithese action plans, including providing funding for prevention, treatmentand care work in the public budgets of financial administration at all levels. Health education has been strengthened, and information about HVAIDS prevention and care has been strengthened, and a more complete HIV/AIDS surveillance has been strengthened, and a more complete HIV/AIDS surveillance network has been established. Strong, targeted intervention measures for key populations have been in plan ented. Managementofiblood donation and collection has been further consolidated in order to eradicate flegal

blood collection activities. Significant work has been done to provide treatment in plan ent care and supportmeasures for people living with HWADS. Prevention, treatment and care work in nural areas and among migrant populations has been strengthened. Key scientific research in HWADS prevention, treatment and care are being taken up. HWADS prevention and care has have been drafted, including the HWADS Prevention and Care Regulations; that has been issued early in 2006. These regulations detail the responsibilities of each level of government as well as the rights and responsibilities of people living with HWADS. Henam, Zhe jang and other provinces have also formulated local HWADS

prevention and care regulations.

3. Targeting key areas and implementing prevention, treatmentand care measures

3.1 Strengthening of HIV surveillance and testing and ensuring timely detection of HIV and AIDS cases

Surveillance has been strengthened, and a web-based disease reporting system has been established. Additional national and provincial sentine lauve ilance sites have been established. By the end of 2005, there were 329 national H IV sentinel surveillance sites and 400 provincial sentinelsurveillance sites, covering the materity ofprefectures and key populations. In addition, there are now 57 confirm atomy laboratories and 3,756 screening laboratories, and screening has been conducted an ong key populations. There are now 2,850 free VCT clinics providing free counseling and testing services. By the end of November 2005, a total of 141,241 cum ulative confirmed H IV cases have been reported, am ong which 32,263 were AIDS cases in the 31 provinces and autonom ous regions.

3.2 Initiation of mass media education to fights ocial stigm a

The M inistry of Health, the Publicity Departm entoffice CentalCom m itee office Com m unist Party of China, the Ministry of Iducation, AlChina Federation of Trade Unions, All China Youth Federation, AlChina Women & Federation, and otherm inistries along with some NGOs have initated mass media education activities, such as W orkers Red Ribbon Campaigns, Youth Red Ribbon Campaigns. H IV/AIDS prevention publicity posters have been distributed to 740,000 villages across China, 50,000 neighborhood communides, 2,100 universides and 90,000 m iddle schools. The CentralComm unist Party Schoolhas already begun to include HWADS prevention and care materalinto is curzculum. The M histry of Justice has organized H W ADS awareness com petitions in Reeducation through LaborC enters am ong 50,000 police and 240,000 Reeducation through Labor Center residents. SCAW CO, the Publicity Departm entof the Cen-



 $_{\parallel}$ © pening ceremony of the Exhibition on EV/ADS prevention and control hell in 1998

tralCommittee of the Communist Party of China, the M inistry of Labor and Social Security, and otherm inistries and commissions under the State Councilhave bintly launched national mass media education campaigns on H IV prevention form trantworkers. Hach localarea has organized mobile



| Program Launched by China Family Planning Association

van perform ances to dissen hate prevention and care inform atton using diverse styles of educational activities rich in content. According to incomplete statistics, over 120 m illion IIC m aterials have been distributed, and 34.9 m illion people have received HIV/AIDS inform atton and faceto-face education.

3.3 Scaling up of behavioral interventions and comprehensive prevention in easures

Six m inistries, including the M inistry of Health and the National Population and Fam by Planning Commission, have formulated methods for in plementing condom promotion for H IV prevention. Hubei, Human, Sichuan, Yumnan, Hainan and otherprovinces have already begun to in plement 100% condon use programs on a large scale. Nationally, 2,686 | Crargeted Prevention Team s; have been formed to initiate targeted interventions among high-risk groups, focusing particularly on prevention offsexual transm ission off IV. The M inistry offeelth, the M inistry of Public Security, the State Food and Drug Adm inistration and other agencies have established 128 m ethadone clinics and 91 needle and syzinge exchange pilotsites. The management ofblood collection has been strengthened, effectively containing the transmission of HW through blood collection/donation. In clinical settings, the proportion ofblood coming from volumentary blood domors has risen from 22% in 1998 to 94.5% in 2005. Piotprograms for the prevention of other-to-child transmission are now underway in 271 counties within 28 provinces and autonom ous regions.

3.4 A ctively treating A ID S patients and providing care and supports avices

The dom estic production of antiretrovial drugs has been expanded, and a reliable supply system has been established. Capacity building and training for care and treatment have been strengthened, and 9 clinical care training centers have been established. Currently, 20,453 AIDS patients are receiving antietrovial therapy in 605 counities w ithin 28 provinces and autonomous regions. According to Henan statistics, where treatm ent is available , AIDS m ortality has fallen from 15.4% in 2001 to 7.7% in 2005. In Henan and Hubeiand otherprovinces, a pilotpediatric care projectwas bunched that has provided antietrovial therapy to 104 children. Free schooling and a living allowance are being provided to children in ade orphans by AIDS in accordance with national policy. To date, 4,385 children of schoolage (or 92.71% of alleligible children) are receiving free education. Self-supportgroups have been established for people Iwing with H W/AIDS in Henan, Xin tang, Shaanxi, Shanxd, and otherplaces.

4. Strengthening supervision, increasing investment, deepening scientific research, expanding international cooperation

China National People & Congress, China Na-

tionalPolicalConsulative Committee, and the State CouncilH WADS Working Committee Office memberoganizations completed a joint supervision mission to assess HWADS prevention and care policy measures in plemented by each provincial government. The Ministry of Health brought together different sectors, international organizations, and NGOs to begin monitoring and evaluation of China CARES project and international cooperation projects. A national experience—sharing meeting was convened

on comprehensive HWADS prevention, treatmentand care through the China CARES project to share and promote effective prevention and care work experiences and methods.

The central governm enthas continued to increase is investment in H W AIDS prevention and care. The national budget for H W AIDS prevention and care has risen from 390 m Illion RMB (US \$48.75 m Illion) in 2003 to 800 m Illion RMB (US \$100 m Illion) in 2005. Local investmenthas risen from less than 100 m Illion RMB (US \$12.5 m Illion) in 2003 to 280 m Illion RMB (US \$34.7 m Illion) in 2005.

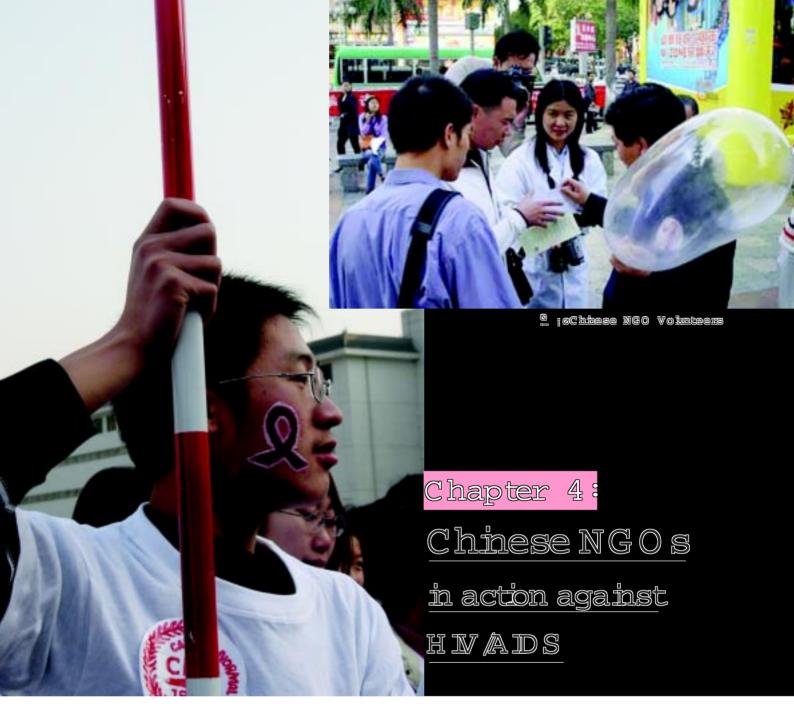




10Books issued by Chinese government on HV/ADS prevention

China has setup a large HWADS prevention, treatm entand care scientific research project, establishing a platform for HWAIDS prevention, treatm ent and care research in Henan and Yunnan provinces. Protocols have been launched in the areas of clinical care, treatment drugs, vaccines, diagnostic testing, and epidem jology. Significant progress has been made in strengthening clinical research into traditional Chinese medicine (TCM) for AIDS treatment. The Chinese government has strangthened cooperation and exchange with UNAIDS, WHO and other UN agencies as well as with the United Kingdom, the United States, Australia and other countries. Currently, international cooperation projects are underway in all 31 provinces and autonom ous regions. The international com m unity has already com m itted approximately 2.2 billion RMB (US \$275 m illion) in donations to support China; is response to AIDS. In 2003 and 2004, approximately 700 m 1-Hon RMB (US\$87.5 m illion) was allocated.

2 1000,000 people take part in the Exhibition on EV/ADS prevention and controlled in Being in 1998



Lis now very clear that the virus poses Laotonly a medical problem, but also a challenging and multipacted social problem. Because of this fact, it is in perative that NOGs not related to the medical arena become involved in prevention and control efforts. The Chinese government is supportive of the development of such organizations on the mainland, and has recognized the key role that they can play against the deadly virus.

Vice PremierWu Yistated that we should nobilize all the partners in society to participate in the fight against HWADS. We need to in prove our policies and strategies to build a better environment for all forces in society to participate in the response, and to try our best to facilitate the involvement of all sectors.

"It was found early on in the epidenic in China that NGOs could dealwith many sensitive health education interventions that the gov-

emm enticitual contro handle diectly. As a result, NGO s on the mainland that are focused on HW issues are growing in both num berand in pact.

There are currently over fifty large NGOs involved in AIDS control. These large organizations can be divided into two groups. The first group is composed of mass organizations such as Alchina W om en 5 Federation, Al China Youth Federation, the Red Cross, All China Federation of Trade Unions, and the Chinese Working Committee of Caring for the YoungerG eneration. Each of these organizations has branches at different levels throughout China, and most of their work is done by dedicated socialworkers. The second group is composed of professional civil groups such as the Chinese Association of Medicine, the Chinese Association of Preventive Medicine, China Family Planning Association, the Chinese Foundation for the Prevention of STD & ADS (CFPSA), and the Chinese Association of STD (AIDS Preven-

tion and Control (CASAPC), am ong others. The organizations in this group typically have branches at the provincial level, and most of their work is conducted by medical and public health personnel.

The number of smallNGOs is even greater, and includes such organizations as the "Home for Loving Care" in Beijing, the "Mangrove Support Group", the "Love Care Family" in Wenxi county of

Shanxi Province, the "Health Club" in Jilin City of Jilin Province, and the "Chengdu Gay Community Care Organization" in Sichuan Province. Mostof their work is conducted by volunteers and persons living with HW/ADS.

W hatevertheir levels, mostChinese ADS NGOs gettheir financial support from the government and international organizations; however, many also get support from social donations.

1. SPECIFIC AREAS OF ACTIVITY AND IMPACT

Since the first case of AIDS was discovered on the mainland in 1985, Chinese NGOs have played a key role in prevention and control efforts. Associated activities fall into the following categories.

1 1 Health education

W ihouta vaccine or cure for HV/ADS, educational interventions are especially in portant in



gyoung Volunteers



JOA program onthy hunched by international NGOs

the prevention and control of the disease. Chinese NGOs have assisted governmentativarious levels to develop policy and material for health education. Successes have been achieved in the broad dissemination of AIDS prevention knowledge, as well as antidiscrimination education. Specific activities include:

- 1) Various AIDS education booklets, pamphlets, and videos have been produced. For example, the educational video 'AIDS Track" was dissentinated nationwide. This video was awarded a Special Prize by the Chinese Ministry of Public Health. The video Warning of the Century was aired on CCTV in 1999. During 2001, the CFPSA cooperated with the Beijing Television Station in airing a quiz show in which high school students competed in answering questions about HV/AIDS.
 - 2) During 1994, five national new spapers ran

an STD AIDS knowledge competition in which more than one million people participated.

- 3) In cooperation with local governments, the NGOs held large—scale AIDS exhibitions in Guangzhou and Nanning during December, 1997, and May, 1998. With the support of the Ministry of Health, the CFPSA and the CASAPC collaborated in holding a large AIDS exhibition in Beijing during December, 1998. More than 200,000 people attended these exhibitions. Thereafter, this exhibition form atwas expanded to many other provinces and cities. More than 500,000 people were exposed to prevention and control knowledge.
- 4) AIDS information campaigns for railway workers was developed by the CASAPC and in plen ented along the Beijing-Hong Kong, Beijing-Ulambaatar, and Kunn ing-Pingxing railway lines.
 - 5) Peereducation for young people was de-



 $_{\mid}\,$ glove and care to the people living with ${\tt HW}\,/\,{\tt ADS}$

welbped in Yunnam Province and expanded to other provinces.

- 6) The NGOs cooperated with the governments and health departments in the Weiting region of Shandong Province, especially the cities
 of Shouguang and Zhucheng, to develop a
 large-scale and multipacted HWADS campaign
 formulareas. This was accomplished using the
 following approach:
- a.A leadership group that included the governm entalhead of the county and heads of departments concerned with STD/HIV/AIDS prevention and controlwas established in every county in the region;
- b. Health professionals and social workers who were to be involved in survey and education efforts were trained;
- c. Know ledge, attitude, and practice surveys were conducted prior to the design of the educational interventions;
- d. In lightofsurvey findings, in ultilaceted educational interventions were developed and in plan ented at the county and township levels;
- e. Thereafter, intervention assessments were conducted. Prelin inary results showed a coverage rate of the target population of 90 percent (about 100,000 persons), and the HIV/AIDS awareness rate rose from 35 percent to 60



10C ards with knowlege on ADS prevention



jovolmteers on the train

percent. This inspired the Weifing regional government leadership to continue to build the region into a modelarea for HW/AIDS prevention and control?

- 7) China's NGOs along with members of the State CouncilAIDS Working Committee, have actively joined in the response against HIV/AIDS. AIChia Wom en STederation and AIChia Youth Federation, in cooperation with the M inistry of Health, conducted a "Face to Face" publicity cam paign that targeted won en and yong people in China Cares program sites. In 2003, the Youth Red Ribbon" program supported 250 training workshops, know ledge contests, and plays. It also printed and distributed 1,100,000 copies of twenty-six different types of educational m aterials. All China Federation of Trade Unions added AIDS education into the training of its m em bers. For exam ple, education on general saniation and health care were supplemented with AIDS Education. By the end of 2003, more than 8,000 lecture courses had been conducted foroverone m ilion participants.
- 8) Since the early 1990s, the Chinese Fam by Planning Association (CFPA) has paid special attention to AIDS prevention, and has taken an active partin the work of prevention and control. The CFPA has made great strides in IIC work,



rored Cross in Action

and has conducted a series of educational activities in diverse groups, ranging from the Fam ily Planning Association m em bers, young people, and farmers to those in the migrant population, active m flary personnel, and service providers in entertainm entestablishm ents. Through these interventions, the CFPA has gained greatexperience in dissen inating HWADS prevention know ledge.

12 Professional training and communication

Chinese NGOs organized various training courses and symposia on both sexually transmitted diseases and HIV/AIDS, and published townals to increase the professionalknow ledge officealth system personnel. These activities include:

- 1) China International Symposium on AIDS in Betting was hosted by China Academ y of TraditionalChinese Medicine and the CFPSA during December 1995;
- 2) The CASAPC produced educationalm aterals for a ten-province-cam patm, developed a training course on AIDS prevention and control for counselors on the mainland, and developed a training course on AIDS program management for Hong Kong i

- 3) During 1996, a television film entitled The Same World, the Same Hope was produced to educate the public about HIV AIDS, and organized a national level workshop on AIDS diagnosts and treatments
- 4) in 1997, the CASAPC to inted Hong Kongm ainland sem inarron AIDS, and created an anti-AIDS can paign along the Beijing-Hong Kong raiway line;
- 5) In 2001, the CASAPC assisted the Ministry offealth in organizing China's first large-scale AIDS conference, which attracted more than 1000 participants.







OT mining activities

6) From 2003 to 2005, fourworkshops on HW/AIDS surveillance and diagnosis were organized for health professionals and workers in the system s of the M inistry of Health. M inistry of Justice and M inistry of Public Security in Jilin City, Baoding, Dalian, and Chengdu by the CFPSA and local Centers for Disease Controlland Prevention. These workshops were supported by the University of Illinois at Chicago, Fogarity AIRP, the University of Nebraska, and the US-China AIDS Aliance Foundation;

7) An International Medical Forum on Infectious Disease was held in Betting i

8) The Working Committee of the Caring for the Younger Generation organization held several sem hars and training classes at various governm entallevels that included HWADS prevention and controllenow ledge. The trainees included public servents and local leaders from various governm ental units at the county, town, and village levels.

9) The CASAPC held a national symposium during 2004 on the China-UNICEF Cooperation Protecton AIDS Prevention and Controli

10) The Chinese Journal for STD and AIDS

Prevention and Controlwas started in 1995. The



 $_{\parallel}$ øYao M hg , basketball star and Love Ambassador for people living w th HW/ADS h Chha

Journalon International Information on STD and AIDS went into publication in 1996. AIDS prevention and treatment information and advice on STDs and AIDS was posted on the internet, and the website "AIDS On Line" was established in November, 2001.

1.3 Socialm obilization

Chinese NGOs have worked actively to involve all sectors of society in prevention and controllefforts. These activities include:

1) W ih the supportofover thirty Chinese m inistries and national departments, forty-seven national civil associations, forty-one media organizations, and representatives from international organizations such as UNAIDS and the World Health Organization, the Chinese NGOs bunched the 421 JointAction Plan"on March 28, 2003. The goal of the plan is to foster governm entaland nongovernm ental cooperation so that socializesources can be utilized in an efficientand effective manner in fighting H IV AIDS. The Joint Action Plan received broad social acceptance and media acciain. National level scientists and academ icians from the Chinese Academ y of Sciences, the Chinese Academ y of Engineering, and leaders from industry and business sectors participated in activities that a ised public awareness ofboth AIDS and the need forbroad soctal involvem entin batting the epidem to.On Decem ber 1, 2003, a celebration was held in the Great Hallofthe People in Beijing that recognized the achieven ents of, the Joint Action Plan. Both Zhou Tienong, the Vice Chaim an of the CCPCC, and Wu Jiping, the Vice Chaim an of the Standing Committee of the 9th NPC were in attendance. Individuals and organizations that had made donations to the plan were awarded certificates of m erdt. In January, 2004, the plan was recognized

as being am ong the Top 10 Public Relations Events in China During 2003."

2) From 2000 to 2005, the CFPSA engaged celebrities in literature and art as goodwill am bassadors. Am ong these individuals were baskeballstaryao M ing , film stars Jiang W enli and Liu Xin, and singers Kris Phillips, Zheng <u>Xulan</u>, <u>Zhang Huam in</u>, and CaiGuoging. These celebrites played a majorrole in publicizing AIDS know ledge, offering care and solace to orphans and persons living with H W/AIDS, sending a message of nondiscrin hatton to the broaderpublic, and conducting other AIDS-related activities.



Over the years, Chinese NGOs have em ployed various mechanisms to carry out interventions am ong high risk populations; indeed, most needle exchange programs, interventions targeting drug users and men who have sex with men (MSM), and the prom otion and distribution of condoms have been conducted by, or involved, Chinese MGOs.



| @Lecturing drug users



islecturing sex workers

- 1) The Chinese Preventive Medicine Association (CPM A) has been involved in HIV (AIDS pirevention and controlsince 1995. The CPM A in plemented a condom promotion protect, sponsored by the World Health Organization, among high risk populations. This was the first condon distrabution protectin China.
- 2) The promotion and distribution of condoms atSTD clinics in Shanghai and Henan Province was started in 1996.
- 3) Behavioral investigations of con mercial sex workers and long-distance truck dirivers in



ontsing 0 people living with hw/ads to plant trees h Bellho

Yunnan Province and InnerMongolia were conducted in 1995 and 1997.

- 4) An intervention targeting the drug user population in Liangshan Prefecture in Sidhuan Province was conducted in 1998.
- 5) The CASAPC conducted interventions among intervenous injection drug users, com mercials workers, MSM, and migrants.

15 The AIDS network

Four jointm eetings for NGOs on HWADS prevention and controlwere held in Beijing (1995), Zhuhai (2000), Harbin (2003), and Congoing (2005). At these meetings, NGO representatives from across China shared prevention and treatment information. At the first neeting, a Code of Action was passed by thirty—six organizations, including the CASAPC, the CFPSA, the Chinese Association of Medicine, the Chinese Association of

Preventative M edicine, China Fam ily Planning Association, and All China W om en 's Federation. The code was reviewed and revised atsubsequentin eetings.

1.6 Care for people living with A IDS and A IDS or or hans

Chinese NGOs have given greatatiention to the problems of social discrimination against people living with HW/AIDS and AIDS ombans.

1) The CFPSA and the ShanxiProvincialHealth Departm entideveloped an educational intervention in Xia County during August-December, 2001. A prelin hary assessment indicated a targetpopulation coverage rate of 90 percent, and a rise in the HVADS awareness rate from 5.7% to 34.6%. The awareness rate on HVADS transmission modes was raised from 41.2% to 81.1%.



icMs.Jing Weni,movie star and Love Ambassador on HV/ADS in China

S T O P

AIDS

Madam Zhang Ying in Anhui province launched the firstNGO in China to help the orphans caused by H W/AIDS





 $S \,\, T \,\, O \,\, P$

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icmr.Krs Philips, Singer and Love Ambassador for HW/ADS, visits ADS patients

The awareness rate on HW/ADS non-transm ission modes was raised from 12.32% to 45.07%. Thereafter, localNGOs in Xia County established a "Love Care Home" for people living with HW/ADS.

2) The Working Committee of the 'Caring for the Younger Generation" organization investigated the mentalhealh status, general quality of life, and educational status of ADS orphans in Henan, Shanzi, and Yunnan provinces. On the 16th World ADS Day, the Working Committee and UNICEF held a joint seminar on 'Caring for O uphans Affected by HW/ADS." Chinese state leaders, officials from UNICEF, and principals from relevant Chinese ministries attended the seminar and appealed to the public to be attentive to the living conditions of affected orphans.

- 3) The CASAPC developed care and support program s forcides and countles in twelve provinces and the cities of Beijing and Shanghai.
 - 4) The Home of Lowing Care has long been

recognized for its care and treatment of people with HIVADS, as well as its prevention and control efforts. Through the Home of Loving Care, those with ADS have received medical care, disease consultation, guidance, and psychological support. It is a true bridge between people with HIVADS and the broader society.

5) More and more people living with HWAIDS are willing to publicize their status and participate in prevention and controlactivities. These individuals develop self-help groups and assist in antictovial treatment education.

6) International NGOs also play an inportant role in antiretroviral and opportunistic infection treatment in China.

7) The Positive ArtWorkshop (PAW) was established by persons living with HW/AIDS in December, 2002. PAW activities include art events, interactive exhibitions in China and abroad, charity fundraisers, and AIDS awareness events. Of particular in portance is their effective artworks.

fortto docum enton fin and still photography in - ages that capture the hopes, fears, fustrations, and deas for the future held by persons living with H IV $\mathbb{A}\mathbb{D}S$.

3) Xia Shuqing, a won an from ruralJiin Province in northeast China, was infected with H W in 2001. Initially despondent about her conditions, she received help from a localNGO. Thereafter, she actively participated in ADS related activities, and organized a health club for others infected with H W in herrarea. This club serves as a place for study, com munication, mutual support, and self-help activities. In 2004, under the sponsorship of the CFPSA, M rs. Xia attended the Chinese NGO satellite forum at the 15th International ADS Conference in Bangkok and made a presentation to those in attendance. United Nations Secretary General Koffannan called her a hero in the fight against ADS.

1.7 International exchange

Chinese NGOs have carried outmany collaborative programs on AIDS prevention and control with their international counterparts.

1) Chinese NGO s actively participate in vari-



10M is .X to the a med indoor for Mir. Koff Annan



100.8.ex-President BilCihton visits Chinese ADS patient

ous international AIDS conferences.

- 2) Chinese NGOs participated in the AIDS meeting for Northeast Asian Countries in November, 2000. Those in attendance shared experiences in fighting the virus and strengthened their spirit of cooperation and common purpose.
- ance in Bangkok, Chinese NGOs successfully organized various programs, including an NGO forum with the theme "Exchange, Cooperation, Friendship, and Facing the Challenge Together." More than 300 participants attended the forum, and heard key note speeches by Dr. Wang Longde, the Vice-Minister of the Ministry of Health of the PRC, and Dr. Peter Piot, Executive Director of UNADS. The press reported that this was the first time that Chinese NGOs had made such a strong statem entabout HVADS.
- 4) The 7th International Congress on AIDS in Asta and the Pacific was held in Kobe, Japan, on 1-5 July, 2005. During the Congress, a Chinese NGO symposium on HIV/AIDS prevention and control was held in the International Conference Centeron the evening of 2 July 2005. This sym posium was organized by the CFPSA, the CASAPC, and the Hong Kong AIDS Foundation. Financial support was obtained from numerous



| ODr.Peter Pot, Executive Director of UNADS white China

internal and external organizations and individual donators. Drs. W ang and Piotalso attended this session and gave keynote addresses to more than 100 delegates from around the world. Mem = bers of vulnerable populations from the mainland, Hong Kong, and Taiwan also made presentations. A Chinese NGO exhibition was also held in the NGO exhibition area of the Congress. The news media once again noted the active role that Chinese NGO s are taking in the battle against HVAIDS.

5) At the UN Special Assembly on AIDS on 2 June 2005, Vice—M histerW ang Longde praised the contributions made by Chinese NGOs and others who are working hard against AIDS on the mainland. He encouraged the all sectors to participate in the battle. He stated that China is at a critical functure in the battle against AIDS, and Chinese NGOs are key players in the effort. Indeed, he concluded that Chinese NGOs are becoming an indispensable force in AIDS prevention and control."

2. CHALLIANGES FOR THE FUTTURE

In spite of the success of Chinese NGOs in prevention and control efforts, several changes in approach need to be addressed:





© Chinese forum during the 15th intermetional ADS Conference

- 1) Chinese NGOs need a greater focus on capacity building.
- 2) Chinese NGOs need increased financial support.
- 3) There is a need form one NGOs to participate in ADS programs.
- 4) There is a need form one cooperation an ong Chinese NGOs.
- 5) There is a need forgreater cooperation between government sectors and Chinese NGOs to avoid duplication of effort orgaps in coverage.

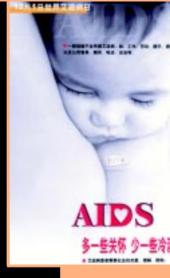
These changes willhelp to insure that the invaluable role that Chinese NGOs have played in the battle against ADS will not only be maintained, but will actually grow in in postance and in pact.





AIDS

66 聖潔性愛





DRUGS 品 AIDS ARE LINKED

Various posters on ADS prevention at public locations in China

R eference

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A cknow legem ent

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- UNAIDS China Office
- China HWADS Information Network
- Chinese Population Communication Center
- Chinese Association of STD and AIDS Prevention and Control



STOP AIDS



Member Organizations of China NGO Network for International

Exchanges

Alchia Environm entitederation

AIChina Women's Federation

Alchina Youth Federation

China Am s Controland D isam am entAssociation

China Association for NGO Cooperation

China Association for Preservation and Developm entof Tibetan Culture

China Association for Science and Technology

China Association of the ploye entire otion

China Association of wom en Entrepreneurs

China Care and Compassion Society

China Disabled Person's Federation

China Econom ic and Social Council

China Education Association for International Exchange

China Invironm ental Protection Foundation

China Fam ily Planning Association

China Green Foundation

China Law Society

China Society for Hum an Rights Studies

China Society for Promotion of the Guangcai Program

China W idlife conservation Association

The Chinese Association for International Understanding

The Chinese Medical Association

The Chinese People's Association for Peace and Disam ament

The Chinese People is Association for Friendship with Foreign Countries

The Chinese Society for Sustainable Developm ent

The Red Cross Society of China

The Mattonal Association of Vocational Education of China

United Nations Association of China

