



# CSIS HIV/AIDS Task Force

## Freeman Chair in China Studies

### 費和中國研究講座

## Ministry of Health Delegation lead by Vice Minister Wang Longde Roundtable Discussion at CSIS June 6, 2005

Dr. Wang Longde, Vice Minister of Health, headed a delegation of Ministry of Health officials to Washington, DC to participate in meetings convened by the CSIS HIV/AIDS Task Force on June 6 and 7, 2005. On June 6, individuals from the public and private sector participated in a roundtable discussion with the Vice Minister, which featured presentations by Vice Minister Wang and Dr. Wu Zunyou from the Chinese Centers for Disease Control.

Dr. Wang's presentation provided an overview of the HIV/AIDS situation in China and the government's prevention and control strategies. The HIV/AIDS epidemic in China currently has extremely high prevalence rates in certain areas and among certain population groups, and is marked by the steady increase of female cases. The government of China has demonstrated strong political commitment to HIV/AIDS prevention, control and treatment, as indicated by President Hu Jintao's visit to an AIDS ward in Beijing on December 1 last year and Premier Wen Jiabao's visit to an "AIDS village" in Henan province over Chinese New Year this spring.

The government of China is leading the effort to control and prevent the spread of HIV/AIDS. A government-led multi-sector cooperation mechanism, the "State Council AIDS Working Committee" chaired by Vice Premier Wu Yi has been established. Multi-agency committees to address HIV/AIDS have been formed in all 31 provinces, autonomous regions and municipalities, and 77% of prefectures and cities. The government has mobilized enormous resources to ensure the implementation of the "Four Free and One Care" policy. In June 2003, the free ARV treatment program was launched, with the numbers of persons being treated doubling in the first year. By the end of March, 2005, a cumulative count of over 16,000 patients have commenced ART in 292 counties in 88 prefectures and cities of 18 provinces.

The government has made significant efforts in the prevention of HIV/AIDS, particularly the prevention of mother to child transmission and greatly expanded HIV surveillance testing. The number of national sentinel surveillance sites increased from 194 in 2003 to 247 at the end of 2004, and currently stands at 295. Over 400 surveillance sites have been established at the provincial level, focusing on specific groups such as intravenous drug abusers in compulsory detoxification centers, commercial sex workers and long distance truck drivers. The government has made increased efforts to expand health education and public awareness. The Ministry of Health is working with the All China Women's Confederation and All China Youth League to increase public knowledge about the epidemic. Central and local governments have allocated increased funds for HIV/AIDS, invested in scientific research, strengthened international cooperation and enacted legislation for AIDS control.

China's national budget for HIV/AIDS has doubled from 390 million yuan in 2003 to 810 million in 2004. During the same period, provincial AIDS budgets increased from 179 million yuan to 195 million while the amount of international support jumped from 256 million yuan in 2003 to 421 million in 2004.

Dr. Wang highlighted the positive contributions made by several U.S. governmental and non-governmental organizations, the overall success of China-U.S. cooperation on HIV/AIDS, and called for more international collaboration to fight against the epidemic.

Dr. Wu Zunyou from the Chinese Centers for Disease Control presented China's ambitious plans to scale-up the national methadone maintenance therapy program from its current pilot stage. Dr. Wu pointed out that there were 1,140,000 registered drug abusers as of 2004, with as many as 85% abusing heroin. The methadone program currently consists of approximately 2,000 drug users enrolled in 9 clinics, each paying RMB 10 per day or less for a daily dose of methadone. Citing one study, researchers have found positive behavior changes among the enrollees, including elimination of injecting behavior and a marked decrease in reported criminal activity. With an expanded budget and a clear mandate from the State Council, the methadone maintenance program is planning to expand to 34 clinics by the end of June with a goal of establishing 100 clinics by the end of 2005. Longer term goals include establishing up to 1,500 clinics over the next three years, servicing a projected 200 to 300,000 clients, representing about one-third of the registered heroin abusers. Dr. Wu pointed out that their plans face significant challenges, most notably a lack of capacity at all levels of government.

During the discussion period, several important topics were raised, including the role of the private sector, businesses, media and other non-government organizations, conflicts between public health and drug control policies, and the government's approach to marginalized groups most at risk from HIV infection.

Businesses in China have recently taken an increasingly visible role on the HIV/AIDS issue. The March meeting in Beijing convened by the Ministry of Health and the Global Business Coalition on HIV/AIDS helped the government see more clearly how corporations can play an important role by educating their workforce and preventing HIV/AIDS in their own workplaces. Legal obstacles that discourage business involvement remain, and will hopefully be addressed by the new national HIV/AIDS Prevention and Control Regulations that have been drafted and submitted to the National People's Congress and are expected to be promulgated in the second half of the year. The new law includes a specific clause on anti-discrimination against HIV/AIDS patients which will be applicable in workplaces.

NGOs can potentially play a significant role in HIV/AIDS prevention and control, particularly at the grassroots level. Creative approaches are already being implemented, including peer education and mobile clinics. While the government and CDC have been doing the bulk of intervention work for high-risk populations, NGOs can do much more work besides technical support. The central government is providing a portion of the most recent grant from the Global Fund to Fight AIDS, Tuberculosis and Malaria to fund NGOs to work on sexual transmission prevention, including prevention education for commercial sex workers. NGOs are also well suited to provide HIV/AIDS patients and families with appropriate care.

The role and scope of NGOs providing services to injecting drug abusers has been somewhat limited up to this point, but the Ministry of Health is actively encouraging the private sector to engage this

critical high-risk population. China, like most other countries, lacks a clear consensus throughout the government about how to address the public health challenge of HIV/AIDS among the drug-using community. Contrasting viewpoints between the public health and public security authorities pose a challenge to NGOs in some areas. However, while acknowledging that drug abuse is a very complicated issue, the Ministry of Health has reached a consensus with public security organs to work together on the methadone maintenance therapy program. The Ministry has not been able to come to terms with the public security bureau regarding needle exchange programs and has opted instead to employ methadone maintenance therapy as much as possible. The Ministry of Health has adopted a needle exchange policy that accepts the public security ministry's lack of endorsement, deciding that "each ministry must have its own function."

The Ministry of Health has also identified men who have sex with men (MSM) as a group with increased risk of HIV/AIDS infection. In the past, there has been a misperception that homosexuality and men who have sex with men were not present in China, and therefore not an issue. However, there has been increased realization that MSM are a high-risk group and have been significantly impacted by HIV/AIDS. However, the issue of MSM in China is somewhat unique because most MSM have families, which indicates an increased risk of HIV transmission to women and children. The Ministry of Health has determined that it needs to expedite investigations of this population and provide tailored interventions that address the specific needs of this high-risk group.

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*The Freeman Chair in China Studies was established at the Center for Strategic and International Studies in 1994 to advance the study of China and to promote understanding between the United States and the countries of the Asia Pacific region.*

*The HIV/AIDS Task Force at CSIS seeks to build bipartisan consensus on critical U.S. HIV/AIDS policy initiatives and to emphasize to senior U.S. policymakers, opinion leaders, and the corporate sector the centrality of U.S. leadership in strengthening country-level capacities to enhance prevention, care, and treatment of HIV/AIDS. With the generous support of the Bill and Melinda Gates Foundation, since 2003, this work at CSIS has expanded its regional scope, with an emphasis on building U.S. bilateral engagement in the large, populous, and geostrategically important states facing a looming HIV/AIDS threat, such as China, India, and Russia, which are part of the "Second Wave" of the global HIV/AIDS epidemic.*

*The Freeman Chair's publications on HIV/AIDS and China are available at:*  
[http://www.csis.org/china/HIV\\_crisis.cfm](http://www.csis.org/china/HIV_crisis.cfm)