

China's HIV/AIDS Crisis

While SARS and avian flu make headlines across the world, another deadly, less apparent disease is creeping across China at rates that could have serious implications for the health of the Chinese people and the country's economic future. The human immunodeficiency virus (HIV) has spread rapidly in source areas of the Chinese population—including sex workers, intravenous drug users, and black market blood donors—and threatens to reach the breakout phase in the general population, meaning 1-2 percent of the population is infected.

One or two percent may seem small, but with 1.3 billion citizens, the Chinese government could face the prospect of 10-20 million HIV cases. Current trends project the country will reach this prevalence rate by 2010. In such a scenario, China would be faced with the first or second-largest number of HIV infections in the world. Fortunately, there is a window of opportunity during which decisive policy action can avoid such an international health disaster.

At a recent CSIS Global Strategy Institute Forum, Dr. Bates Gill, CSIS Freeman Chair in China Studies, and Dr. Sarah Palmer, Staff Scientist, HIV Drug Resistance Program, National Institutes of Health, drew from their considerable knowledge and in-country experience to address the nature of China's future challenges, including an examination of forces that continue to drive HIV infection rates. They offered analysis of current and planned efforts of the Chinese government to combat the disease.

- HIV/AIDS has been recognized by the Chinese government as a growing threat to the country, yet the vast majority of carriers remain undiagnosed. The government officially estimates that 840,000 persons are infected with HIV (others have estimated over 1 million cases in Henan province alone). By the end of 2003, only 62,159 had been tested and officially confirmed HIV-positive. The status of the remaining 780,000 is unknown to health officials or to the infected individuals themselves.
- China has made advances in outlook, policy, and resource commitments. China's new leadership has made a stronger pledge toward improving social welfare and combatting HIV/AIDS. This has included a series of new, proactive responses to HIV/AIDS and

the implementation of harm reduction strategies, including condom promotion and needle exchange.

- Formidable challenges lie ahead. Despite some positive steps, managing HIV/AIDS in China requires a variety of socio-political, economic, and scientific inputs that are still lacking. These challenges are daunting and will require solutions with formidable costs and human resource requirements.

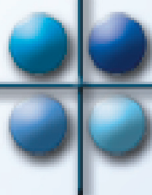


Dr. Bates Gill and Dr. Sarah Palmer address the challenges of HIV/AIDS in China at a Global Strategy Institute Forum.

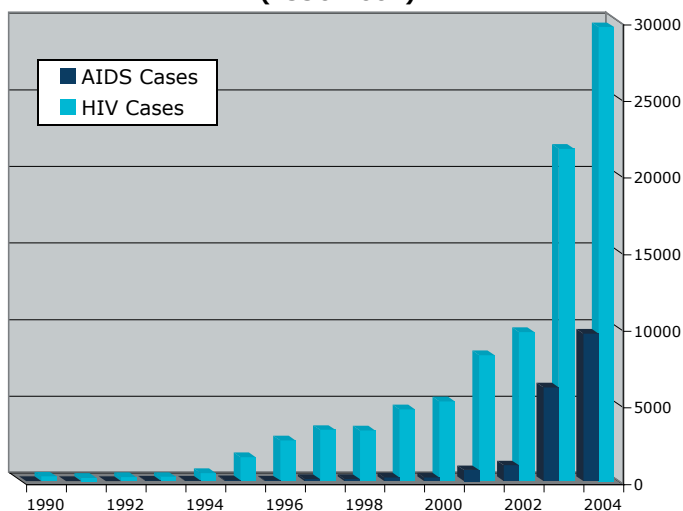
China's one child policy has created generations that are at increasingly greater risk of contracting HIV. Traditional societal preference for male babies over females has caused the natural birth ratio to skew, creating a surplus of men. Trends indicate that by 2020 China will be home to 29-30 million unmarried men. This astounding figure has profound implications for the growth of the sex trade and the subsequent spread of HIV/AIDS from this vector of infection.

Furthermore, one-child families have led to the creation of a "little prince/princess" phenomenon, in which families spoil their only child, often by granting disposable income. This extra cash is increasingly used by youth to purchase drugs. The subsequent potential for intravenous use and the resultant spread of HIV is evident in the southern and far western provinces of China where research has shown drug use to be a more prevalent vector in the spread of HIV than unprotected sex.

Changing societal norms have created additional difficulties in the tracking and treatment of infected individuals. Long-



**HIV and AIDS Cases in China
(1990-2004)**



Source: MOH of China, Chinese CDC Annual HIV/AIDS Case Report, Adapted from the UNAIDS ThemeGroup Report, December 2004.

standing social taboos against premarital and extramarital sex are changing, and studies have shown sharp increases in both practices. The subsequent increase in infection rates among these individuals has been highlighted by a persistent conservatism that has slowed the progress of public HIV/AIDS education. Instead, many Chinese still cling to uninformed concepts of how the disease is transmitted, its effects, and the “type” of person susceptible. This holds true among at-risk groups, such as sex workers and intravenous drug users.

Another potential vector for disease transmission is the estimated 100-120 million who comprise China’s “floating” population. This group is composed predominantly of young males from rural areas. Often without an official residence and consistent job, this migrant population is extremely difficult to target and monitor, providing the potential for a rapid and undetected spread of HIV infections promoted by risky behavior as individuals find themselves in unfamiliar, difficult settings and are exposed to new temptations.

Economic Challenges

China’s health care delivery system is crumbling and has proven to be woefully inadequate to diagnose, treat, and manage the care of infected individuals. Currently, the healthcare system is treating a mere 7,000-10,000 infected individuals with basic treatment procedures, which often include using drugs that are not compatible. Worse still, there are only 127 sites across the country equipped to test for and monitor the spread of

the disease. Additionally, levels of qualified personnel who are able to accurately diagnosis HIV/AIDS remain dangerously low – especially in rural areas. These facts further speed the spread of the disease and hamper the central government’s ability to monitor and treat infected individuals.

There are only 127 sites across China equipped to test for and monitor the spread of HIV/AIDS

Medical/Scientific Challenges

Poor blood donation practices, intravenous drug use (IDU), and sexual risk have proven to be some of the most serious vectors of infection in China. Cultural taboos against blood donation created lucrative opportunities for black market extraction and sale by cartels known as “bloodheads” during the 1980s and 1990s. These groups would buy and sell blood plasma using unsafe methods of collection and processing, often infecting large numbers of donors through unhygienic, medically unsound practices. Over 41 percent of those individuals who donated plasma more than 15 times per month were infected with HIV/AIDS. Overall, unhygienic plasma donations have accounted for 21 percent of today’s documented HIV/AIDS infections.

Meanwhile, IDU is the source of infection for 51.2 percent of documented HIV cases. With only eight methadone clinics in the entire country, China is limited in its ability to offer prevention information and needle exchange programs to drug users. Accordingly, the Health Ministry recently announced plans to establish up to 5,000 new clinics by 2010.

One of the major stereotypes associated with HIV/AIDS is the belief that if an individual looks healthy, he or she does not carry the virus. This belief is hampering efforts to introduce condom use into the sex trade. This lack of condom use directly allows for HIV transmission through sexual contact. Although sexual transmission accounts for a mere 7.5 percent of documented cases, it is the fastest growing transmission vector in China.

The convergence of these three vectors threatens China’s ability to prevent HIV/AIDS from becoming a widespread epidemic. Add to these obstacles an inadequate health care system, the potential for increased drug use, an expanded sex trade, as well as a large migratory population, and it becomes clear that HIV threatens China’s national security.

Special thanks to Brandon Lord, Research Intern, for his help in preparation of this edition of FutureWatch.