## Health Research Symposium 2007: Building bridges between research, practice & policy

#### **Abstract Submission Form**

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#### **Abstract Title**

(If the project is funded by the Health, Welfare and Food Bureau (i.e. HCPF, HSRF, HHSRF, RFCID), please state the project reference number and title)

HIV knowledge, drug use behaviour and infection status of ethnic minorities drug users attending methadone clinics in Hong Kong

### Author(s)

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# Abstract (not more than 1 page with font Time New Roman size 12) Objective

To assess the HIV knowledge of ethnic minorities drug users and map out their risky behaviour pattern and HIV prevalence.

#### Methodology

All non-Chinese attending 20 methadone clinics in Hong Kong were recruited in late 2006. They were interviewed by doctors using a standardized questionnaire on HIV knowledge, risky behaviour, such as injecting drug use, needle sharing, sexual history and condom use. They were asked to leave a urine sample for HIV testing. The urine was tested by Government Virus Unit, Public Health Laboratory Service, Department of Health employing the IgG Antibody Capture Particle Agglutination Test, and then confirmed by Western Blot..

#### **Results**

210 subjects were successfully interviewed. Nepalese (59%) and Vietnamese (18%) were the major ethnic groups and clustered at several clinics. Over 80% could not correctly answer all 6 questions on HIV knowledge. The knowledge of Nepalese was poorer than Vietnamese (p<0.05). 20% of Nepalese did not know needle sharing can transmit HIV. The proportion of ever injector was 45%. They usually started injection in Hong Kong. 20% of injectors have shared needle or equipment locally, mainly with non-Chinese. 49 respondents took other drugs with heroin at the same time. The HIV prevalence of ethnic minority drug users was 1.5% (95% confidence interval: 0.431% - 4.048%), which was about five times higher than the overall prevalence of all methadone clinic attendees. (p<0.05, OR: 4.97)

#### Conclusion

The knowledge of ethnic minority drug users was poor. Needle sharing among these populations was not uncommon but mainly limited in their populations. The significantly high HIV prevalence in ethnic minority drug users demonstrated the urgent need of culturally specific HIV prevention programme in these populations. Ethnic minorities should be the priority of HIV prevention in drug users.