



U.S. Agency for International Development

Bureau for Global Health

COUNTRY PROFILE

HIV/AIDS

CHINA

The first case of HIV in China was detected in 1985. At the end of 2001, HIV prevalence was less than 1 percent, but with China's population of about 1.3 billion people even this low prevalence rate means that some 850,000 people are infected. Initially those infected were primarily travelers returning from stays abroad; then HIV/AIDS spread among injecting drug users in the

southern areas of Yunnan province bordering Burma. Although HIV/AIDS has been detected in all provinces, its spread is growing particularly rapidly in Yunnan and Guangxi. HIV-transmission rates among injecting drug users in Guangxi, for example, increased from below one percent in 1996 to 17 percent in 2000. Although injecting drug use remains the primary mode of transmission, this may be changing as the epidemic moves further into the provinces through drug trafficking, growing sex work industries, and high levels of population movement. Both of these provinces have large minority populations that have been disproportionately affected, and sentinel surveillance shows rapid increases in HIV infection among sex workers.

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| Estimated Number of Adults and Children Living with HIV/AIDS (end 2001) | 850,000 |
| Total Population (end 2001) | 1,284,972,000 |
| Adult HIV Prevalence (end 2001) | 0.1% |
| HIV-1 Seroprevalence in Urban Areas (end 2000) | |
| Population most at risk (sex workers and their clients, patients seeking care for sexually transmitted infections, or other persons with known risk factors) | - |
| Population least at risk (pregnant women, blood donors, or other persons with low risk factors) | - |

Sources: UNAIDS, U.S. Census Bureau.

NATIONAL RESPONSE

As outlined in its long-term plan for reducing and preventing HIV/AIDS (covering 1998–2010), China's focus is on preventing the further spread of HIV/AIDS into the general population and on reducing transmission among high-risk groups. In 2001, China's Ministry of Health put forward a national action plan for the period 2001–2005 that spells out principles, goals, and specific measures to be taken in the short term. The ministry also established a Center for Disease Control and Prevention and secured increased central government funding for HIV/AIDS awareness, prevention, and treatment programs. It is seeking to expand surveillance and pilot programs to reach high-risk populations.



Despite its stated commitment to HIV/AIDS prevention and care, China is still a long way from implementing an effective program. Lack of awareness of the extent of the problem among many officials, lack of capacity and resources, lack of nongovernmental organizations, and repression of populations at greatest risk and most in need of services, all combine to limit effective action.

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Map of China: PCL Map Collection, University of Texas

Discrimination against persons living with HIV/AIDS is widespread, with laws more focused on detaining high-risk populations than on preventing discrimination, providing treatment, or taking measures to ensure a safe blood supply. Stigma, discrimination, and repression can have the effect of preventing vulnerable populations from seeking treatment. Without greatly increased effort, China confronts the serious possibility that its concentrated epidemics may become generalized to large segments of the population; according to Ministry of Health and other estimates, the number of infections could increase to 10, or even 20, million by 2010.

USAID SUPPORT

In light of the potentially devastating HIV/AIDS situation confronting China, as well as overall changes in the bilateral relationship, the United States Agency for International Development (USAID) now provides support for HIV/AIDS activities in two provinces—Yunnan and Guangxi—amounting to \$1 million in FY 2002 and \$2 million in FY 2003. USAID-supported activities include peer education and outreach for condom social marketing, community mobilization for vulnerable populations, prevention activities promoting behavior change, care and support services, activities to promote stigma reduction, and activities to promote advocacy, capacity building, and the creation of a supportive policy environment.

Because of the emerging threat in the Mekong Region, USAID is launching a new regional HIV/AIDS program that will address prevention and treatment in the wider Mekong region, including Thailand, Cambodia, Burma, Laos, Vietnam, and two key provinces in China (Yunnan and Guangxi). An interim USAID regional HIV/AIDS strategy is in effect for the period 2003–2006, as a full five-year strategy is developed for 2007–2012. The Mekong Regional Program will build on existing activities and include both country-specific and broader regional efforts to prevent the spread of HIV/AIDS.

FOR MORE INFORMATION

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For more information, see http://www.usaid.gov/our_work/global_health/aids or <http://www.SynergyAIDS.com>

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