立法會 Legislative Council

LC Paper No. CB(2)69/18-19 (These minutes have been seen by the Administration)

Ref: CB2/PL/HS

Panel on Health Services

Minutes of special meeting held on Monday, 5 February 2018, at 3:00 pm in Conference Room 2 of the Legislative Council Complex

Members : Prof Hon Joseph LEE Kok-long, SBS, JP (Chairman)

present Dr Hon Pierre CHAN (Deputy Chairman)

Hon Tommy CHEUNG Yu-yan, GBS, JP

Hon WONG Ting-kwong, GBS, JP Hon Starry LEE Wai-king, SBS, JP

Hon CHAN Kin-por, GBS, JP

Hon Mrs Regina IP LAU Suk-yee, GBS, JP

Hon Paul TSE Wai-chun, JP Hon YIU Si-wing, BBS Hon Charles Peter MOK, JP

Hon CHAN Chi-chuen Hon CHAN Han-pan, JP

Hon Alice MAK Mei-kuen, BBS, JP

Dr Hon KWOK Ka-ki

Dr Hon Fernando CHEUNG Chiu-hung

Dr Hon Helena WONG Pik-wan Dr Hon Elizabeth QUAT, BBS, JP Hon POON Siu-ping, BBS, MH Dr Hon CHIANG Lai-wan, JP

Hon CHU Hoi-dick Hon SHIU Ka-fai Hon SHIU Ka-chun Hon KWONG Chun-yu

Member : Dr Hon Junius HO Kwan-yiu, JP

absent

Public Officers: Dr CHUI Tak-yi, JP

attending Under Secretary for Food and Health

Miss Grace KWOK Wing-see

Principal Assistant Secretary for Food and Health

(Health) 1

Food and Health Bureau

Dr WONG Ka-hing, JP Controller, Centre for Health Protection

Department of Health

Dr Silvia LAM Siu-hung

Scientific Officer (Medical) (Programme Management),

Centre for Health Protection

Department of Health

Dr Billy HO Chi-hin

Senior Medical and Health Officer (Special Preventive Programme) 3, Centre for Health Protection

Department of Health

Dr Winnie LAU Tin-wai

Senior Medical and Health Officer (Programme

Management) 1, Centre for Health Protection

Department of Health

Mr Joe NG Ka-shing

Principal Education Officer (Curriculum Development) 1

Education Bureau

Ms PANG Kit-ling

Assistant Director of Social Welfare (Elderly)

Social Welfare Department

Mr Paul HO Wing-kwong

Senior Assistant Director of Public Prosecutions (Office

of the Director of Public Prosecutions)

Department of Justice

Dr Patrick LI Chung-ki, BBS, JP

Chairperson

Hong Kong Advisory Council on AIDS

Dr Thomas LAI Sik-to

Chairman

Council for the AIDS Trust Fund

Attendance by invitation

:

The Civic Party

Mr Warren TAM Ka-chun

District Developer of the New Territories West

Miss Bernadette WONG

Rainbow of Hong Kong

Tommy CHEN
Executive Officer

Rainbow Action

Jimmy SHAM Spokesperson

Sexualities Research Programme, The Chinese University of Hong Kong

Prof SUEN Yiu-tung

Assistant Professor, Gender Studies Programme; and Founding Director, Sexualities Research Programme, The Chinese University of Hong Kong

PrideLab

CHAN Wai-in Convener

AIDS Concern

Miss CHEUNG Hiu-wah Programme Director

Midnight Blue

Mr NGAI Tak-kin Project Coordinator

CHEM FUN 關注小組

Mr CHEUNG Man-wah Community Service Officer

Mr LEUNG Kwok-hung

The Society for Truth and Light

Mr Thomas LI Project Officer

The Hong Kong Coalition of AIDS Service Organizations

Mr Andrew Chidgey Chairperson

Mr Nathan Madson

The Society of Rehabilitation and Crime Prevention, Hong Kong

Mr Anthony WONG Lai-yin Supervisor

Action for REACH OUT

Ms YIM Kit-sum Executive Director

Hong Kong AIDS Foundation

Mr CHUNG Chung-shan Senior Programme Manager

同志公民

Mr LEE Tak-hung Spokesperson

民主黨性別平權委員會

Mr Patrick Mabberley CHOW 委員

The Society for AIDS Care

Miss HUI See-yau Program Manager

A-Backup

Mr Beethoven PUI Wing-tai

President

William LEUNG

BigLove Alliance

Mr LEUNG Siu-fai Chief Operating Officer

Queer Theology Academy

Mr Eric SIN Man-hon

Chairman

Community Business

Ms Florence CHAN

Senior Manager, Programmes & Development

Clerk in : Ms Maisie LAM

attendance Chief Council Secretary (2) 5

Staff in : Miss Kay CHU

attendance Senior Council Secretary (2) 5

Ms Priscilla LAU

Council Secretary (2) 5

Miss Maggie CHIU

Legislative Assistant (2) 5

I. HIV and AIDS response measures formulated in relation to the Recommended HIV/AIDS Strategies for Hong Kong (2017-2021) [LC Paper Nos. CB(2)584/17-18(01), CB(2)768/17-18(01) to (02) and CB(2)800/17-18(01)]

<u>Dr Pierre CHAN</u>, Deputy Chairman of the Panel, took up the chairmanship of the meeting in the absence of the Chairman who was held up by other commitment.

Presentation of views by deputations

- 2. <u>Members</u> noted the following papers on the subject under discussion:
 - (a) the paper provided by the Administration for the special meeting on 4 January 2018 (LC Paper No. CB(2)584/17-18(01));
 - (b) the supplementary paper provided by the Administration for the meeting (LC Paper No. CB(2)768/17-18(01));
 - (c) the updated background brief entitled "Prevention and control of Human Immunodeficiency Virus/Acquired Immunodeficiency Syndrome" prepared by the Legislative Council Secretariat (LC Paper No. CB(2)768/17-18(02)); and
 - (d) the Administration's response to information requested by members at the special meeting on 4 January 2018 (LC Paper No. CB(2)800/17-18(01)).
- 3. The Deputy Chairman reminded the organizations and individuals attending the meeting that they were not covered by the protection and immunity provided under the Legislative Council (Powers and Privileges) Ordinance (Cap. 382) when addressing the Panel. At the invitation of the Deputy Chairman, a total of 24 organizations and individuals presented their views on the Human Immunodeficiency Virus ("HIV") and Acquired Immunodeficiency Syndrome ("AIDS") response measures formulated in relation to the Recommended HIV/AIDS Strategies for Hong Kong (2017-2021) ("the 2017-2021 Strategies") developed by the Hong Kong Advisory Council on AIDS ("ACA"). A summary of their views is in the **Appendix**. Members also noted the six written submissions from organizations and an individual not attending the meeting.

Discussion

The Administration's response to the views expressed by deputations

- 4. Responding to the views expressed by the deputations, <u>Principal Education Officer (Curriculum Development) 1</u> ("PEO(CD)1"), <u>Assistant Director of Social Welfare (Elderly)</u> ("ADSW(E)") and <u>Senior Assistant Director of Public Prosecutions</u> (Office of the <u>Director of Public Prosecutions</u>) gave a succinct briefing on the HIV and sex education in schools, the residential care services for HIV infected persons, and the relevant considerations of the prosecution and the law enforcement agencies in handling cases involving condoms seized in enforcement actions, details of which were set out in the Administration's supplementary paper (LC Paper No. CB(2)768/17-18(01)), and <u>Under Secretary for Food and Health</u> ("USFH"), <u>Controller, Centre for Health Protection, Department of Health</u> ("Controller, CHP") and <u>Chairperson, ACA</u> made the following points:
 - (a) members appointed to sit on ACA were drawn from different sectors of the society including, among others, individuals with expertise in HIV/AIDS work and community leaders. ACA had adopted a public health oriented approach in formulating the recommended HIV/AIDS strategies for Hong Kong ("the Strategies"), with due regard to the global and local HIV situation; current local HIV responses; scientific evidence; recommendations of the World Health Organization ("WHO"). Programme on HIV/AIDS the **Joint** United **Nations** ("UNAIDS") and other international health agencies; as well as views of community stakeholders and the general public. A Community Forum on AIDS was set up under ACA to serve as a platform for exchange and collection of views from organizations and individuals involved in HIV/AIDS advocacy, education and services to support strategy formulation at the ACA level. Issues recently discussed by ACA included, among others, HIV self-testing, recreational drug use before and during sex, and the application of oral pre-exposure prophylaxis ("PrEP");
 - (b) the recommendation of WHO and UNAIDS was that prevention services should be targeted at community at substantial risk of HIV infection. In the past few years, men who had sex with men ("MSM") had accounted for the greatest proportion of the newly reported cases of HIV infection in Hong Kong. While oral anti-retrovirals had proven to be one of the most effective

ways of HIV prevention, the findings of a local survey revealed that the HIV antibody testing rate among MSM in the past 12 months was only about 60%, which lagged behind the target as set out in the 2017-2021 Strategies of having 90% of people living with HIV knew their HIV status for the attainment of the Treatment as Prevention strategy. The Department of Health ("DH") and its Red Ribbon Centre as well as different parties of the community would step up efforts to advocate annual HIV antibody testing. In addition, DH would strive for further lowering the annual attrition rate of patients of its designated HIV clinic, which currently stood at about 3% on average;

- (c) while PrEP was effective in preventing the acquisition of HIV infection by uninfected persons, some overseas study revealed that its use might bring about risk compensation (i.e. reduction of safer sex behavior) and hence, a higher possibility of infection of other sexually transmitted diseases. While the pilot programme on PrEP in Australia was a success, the response to a programme in Taiwan promoting PrEP use among high risk groups was unsatisfactory. To consider the way forward for the application of PrEP in public health in Hong Kong, AIDS Trust Fund had approved the first PrEP study which was conducted by a local university to assess the high-risk MSM's acceptability, adherence and risk behavior on the use of PrEP; and
- (d) public education against HIV-related discrimination would be sustained with a view to cultivating a supportive and enabling environment. Efforts had been and would continuously be made by the Community Forum on AIDS to advocate measures to promote acceptance of people living with HIV or AIDS. The call from some deputations for legislating against discrimination on the ground of sexual orientation would be relayed to the Constitutional and Mainland Affairs Bureau ("CMAB") for consideration.

Prevention and control of HIV/AIDS

5. Noting an upsurge of the cumulative total reported HIV infection cases from 4 832 to 8 952 during the period of 2010 to 2017 (as at September 2017), Mr KWONG Chun-yu asked whether the manpower of the three designated HIV clinics under DH and the Hospital Authority ("HA") was adequate to address the growing demand for treatment. He was particularly concerned about the average waiting time for the first appointment at these clinics. <u>USFH</u> advised that the Administration and

HA would keep in view the service demand and manpower requirements of these clinics. At present, about 60% of HIV infection cases were being taken care of by the designated HIV clinic under DH and the remaining cases were served by the two designated HIV clinics under HA. <u>Controller</u>, <u>CHP</u> advised that DH's designated HIV clinic was able to keep the waiting time for the first appointment of the majority of new cases to within two weeks as pledged.

6. Mr KWONG Chun-yu expressed support to the suggestion raised by Tommy CHEN of Rainbow of Hong Kong that the service hours of the three designated HIV clinics should be extended to cover Saturdays and Sundays so as to provide greater flexibility for those HIV infected patients who had to work on weekdays in scheduling their consultations. <u>USFH</u> said that he would relay the suggestion to HA for consideration. <u>Controller, CHP</u> advised that any proposal to extend the service hours of the clinics would require careful manpower planning. <u>Dr Helena WONG</u> remarked that the suggestion could be achieved through flexibly deploying the healthcare manpower of the clinics. She requested the Administration to provide a written response to the suggestion.

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7. In response to Mr KWONG Chun-yu's question about whether consideration would be given to providing heavily subsidized PrEP under the public healthcare system, Controller, CHP reiterated that the first PrEP study under the funding support from AIDS Trust Fund was underway. Dr Fernando CHEUNG invited deputations to give further views on the subject. Expressing concern about the small scale of the trial study which targeted to cover only 100 participants, with only 25 participants had been recruited so far, Mr LEUNG Siu-fai of BigLove Alliance urged the Administration to step up education to enhance understanding of PrEP amongst people at high risk of HIV infection and increase the number of targeted participants of the trial. Tommy CHEN of Rainbow of Hong Kong surmised that the high cost of PrEP to be borne by the participants was a reason why the participation rate of the trial was low. Mr Andrew Chidgey of the Hong Kong Coalition of AIDS Service Organization echoed that the cost of PrEP, which was set at \$5,000 per participant, had deterred many members of the target population from participating in the trial. He was concerned about whether the capacity of the public healthcare system would be a major consideration of the Administration on introducing PrEP in the system. William LEUNG said that while the use of PrEP might bring about risk compensation, the Administration should give due consideration of the highly effectiveness of PrEP in preventing HIV infection in high risk populations when deciding the way forward on the provision of PrEP as an additional HIV prevention option.

8. Dr Helena WONG questioned about the effectiveness of the antenatal testing for pregnant women to eliminate mother-to-child HIV transmission during pregnancy. Controller, CHP advised that under the Universal Antenatal HIV Antibody Testing Programme which was introduced in 2001 and had a high coverage rate of about 98%, pregnant women could receive HIV antibody testing on a voluntary basis during routine antenatal testing. However, there had been a few cases whereby the mothers were screened negative by the Programme during the early antenatal period and suspected to have been infected in later pregnancy or soon after delivery that their infants were found to be infected with HIV. An area for further examination as identified in the 2017-2021 Strategies was to have an indepth discussion with stakeholders regarding the need, feasibility and logistics of re-testing pregnant women during the latter part of pregnancy to eliminate mother-to-child HIV transmission.

Long-term care needs of HIV infected elderly persons

- 9. <u>Dr Fernando CHEUNG</u> expressed concern that according to a survey conducted by the Hong Kong AIDS Foundation, over 60% of the private residential care homes for the elderly ("RCHEs") that responded to the survey would not offer places to applicants with HIV/AIDS. He asked about the avenues for complaint by aggrieved service applicants. Holding the view that there would be a growing demand for residential care services from HIV infected elderly patients in the face of an ageing population, he called on the Administration to put in place measures to ensure that no applications for RCHE places would be turned down due to the HIV infection status of the applicants.
- 10. <u>ADSW(E)</u> advised that there were 12 HIV infected elderly patients on the Central Waiting List who applied for subsidized residential care services for the elderly from 2013 to 2017. At present, seven applicants were still waiting for service allocations. The remaining five applicants were admitted to subsidized RCHEs or passed away. Any complaints against RCHEs could be lodged with the Licensing Office of Residential Care Homes for the Elderly under the Social Welfare Department.
- 11. In response to Dr Fernando CHEUNG's question over the respective numbers of HIV infected persons aged above 50 years and those in need of residential care services, Controller, CHP advised that the data collected by the HIV Reporting System implemented under DH for surveillance purpose covered, among others, demographic profile of the reported HIV infection cases. Separately, he could explore whether the three designated HIV clinics under DH and HA would have information relating to their patients' residential care needs. He undertook to provide the requisite information, if available, in writing.

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Discrimination against HIV/AIDS

Holding the view that discrimination against HIV/AIDS would 12. hinder the effective implementation of measures on education, prevention and treatment of HIV/AIDS, Mr CHAN Chi-chuen called on CMAB to legislate against discrimination on the ground of sexual orientation and appealed to the Food and Health Bureau ("FHB"), DH and ACA to pledge their support in this regard. Mr KWONG Chun-yu opined that more should be done by the Administration to tackle stigma and discrimination against HIV/AIDS. Tommy CHEN of Rainbow of Hong Kong opined that enactment of legislation against discrimination on the ground of sexual orientation should form part of the strategies recommended by ACA in the area of HIV education. USFH assured members that the Administration would carefully consider the views of the community as well as overseas practices on enactment of legislation to prohibit discrimination against sexual orientation.

HIV and sex education in schools

- Noting that primary and secondary schools could take into account their school mission and context when making reference to the curriculum guides promulgated by the Education Bureau ("EDB") in the planning of their school-based sex education and the organization of related learning activities, Dr Helena WONG expressed concern that there might be cases whereby schools would omit certain sexuality topics, such as safer sex behaviour, for various reasons. According to a local survey, some students of tertiary education institutions had little knowledge about condom use. She urged EDB to monitor and evaluate the effectiveness of the implementation of sex education in the school setting. She asked if EDB would review the implementation of sex education at schools. In response to the Deputy Chairman's invitation of views from deputations, William LEUNG questioned the appropriateness to embed elements of sex education in the curriculum of Ethics & Religious Studies at secondary school level to cover issues such as premarital and extramarital sex and homosexual relationship.
- 14. <u>PEO(CD)1</u> advised that schools should teach the learning elements related to sex education according to the curriculum guides for schools, such as General Studies at the primary level, and Life and Society curriculum and Biology at the secondary level. EDB could understand the implementation of various elements of the school curriculum (including values education which covered sex education) through different channels such as curriculum development visits and External School Review, and

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provide advice to schools to enhance their school-based curriculum development and teaching effectiveness as and when appropriate. Dr Helena WONG requested EDB to provide the details of the mechanism it had put in place to monitor and evaluate the effectiveness of the implementation of sex education in the school setting, and the evaluation outcomes when available.

Communication with stakeholders

- 15. Mr SHIU Ka-chun called on ACA to enhance communication with various stakeholders through different channels. In particular, ACA should consider the recommended HIV/AIDS prevention strategies for the MSM community set out in the submission from the Rainbow of Hong Kong (LC Paper No. CB(2)768/17-18(03)). The Deputy Chairman opined that ACA could take the lead to conduct education and promotion activities and publish educational materials in relation to the prevention and control of HIV infection. Chairperson, ACA advised that the major function of ACA was to provide advice on policy relating to the prevention, care and control of HIV infection in Hong Kong through, among others, the promulgation of the Strategies, for implementation by the Administration where appropriate. That said, ACA could explore whether it could take up a more active role in HIV-related education and health promotion in the future.
- 16. Mr CHAN Chi-chuen suggested that the Administration should appoint people who had publicly disclosed their status of living with HIV, advocates on issues relating to sexual minorities and sex workers, as well as other relevant stakeholders to ACA. The Deputy Chairman asked whether ACA would suggest for the consideration of the Administration expanding the membership of ACA to cover representatives from CMAB, the Security Bureau and the enforcement agencies. Chairperson, ACA advised that consideration would be given to inviting relevant government bureaux and departments as well as stakeholders to join the discussions of individual issues. Controller, CHP supplemented that the appointment on ACA was on personal capacity. The existing membership of ACA comprised people living with HIV, at-risk populations and relevant service providers.

AIDS Trust Fund

17. Mr SHIU Ka-chun pointed out that provision of access to sterile needle and syringe for injecting drug users was recommended by WHO and UNAIDS and implemented in others places as a component of HIV/AIDS prevention programmes. Locally, an non-governmental organization ("NGO") had once implemented a project funded by the AIDS Trust Fund

to, among others, distribute free new syringes to targeted drug users with a view to avoiding needle sharing among the population concerned so as to prevent the transmission of HIV. However, the Council for the AIDS Trust Fund later did not provide funding support for the project for the reason that the carriage of syringes by the social workers concerned might contravene the Dangerous Drugs Ordinance (Cap. 134) for the possession of equipment fitted and intended for the injection of a dangerous drug. He was concerned about whether there were any other interventions in place to avoid needle sharing among people who injected drugs.

- 18. <u>Chairman, Council for the AIDS Trust Fund</u> explained that the AIDS Trust Fund had to take into account the advice of the Department of Justice when carrying out its work. <u>Chairperson, ACA</u> said that continued vigilance of the HIV situation and prevention needs among people who injected drugs was necessary. ACA would continue to exchange views with the enforcement agencies in this regard. It should be noted that the methadone treatment provided by methadone clinics of DH could help drug users reduce intravenous drug use and hence reducing the sharing of needles and thereby preventing the spread of diseases including AIDS. An area to be strengthened as recommended in the 2017-2021 Strategies was to enhance recruitment of drug users to methadone maintenance and promote avoidance of needle sharing.
- 19. Mr CHAN Chi-chuen asked whether the AIDS Trust Fund was facing financial pressure or there was a change in the policy in the provision of financial support in the area of publicity and public education. He invited deputations to share their experience in applying for funding from the AIDS Trust Fund. Mr NGAI Tak-kin of Midnight Blue said that applications from Midnight Blue on HIV antibody testing and other HIV prevention services targeted at at-risk cross-border travelers, such as male sex workers, clients of sex workers and MSM, had been rejected. Mr Andrew Chidgey of the Hong Kong Coalition of AIDS Service Organization said that there was limited funding allocated by the AIDS Trust Fund to NGOs for the carrying out of HIV/AIDS prevention work targeting at heterosexuals in the past two years. Ms Florence CHAN of Community Business asked about the reasons for AIDS Trust Fund to cease the funding support and shorten the funding period from three years to one year for some projects.
- 20. <u>USFH</u> advised that a commitment of \$350 million had been injected into the AIDS Trust Fund in 2013-2014 to sustain its operation for an additional seven to 12 years from 2014-2015. <u>Senior Medical and Health Officer (Programme Management) 1, Centre for Health Protection</u> ("SMHO(PM)1, CHP") added that with the additional one-off injection of

\$350 million, it was planned that the annual expenditure of the AIDS Trust Fund should be in the range of \$30 million to \$50 million. The total funding amount approved under the three areas of financial support under the AIDS Trust Fund (i.e. additional ex-gratia payment; medical and support services; and publicity and public education) in each of the past financial years was within the above range.

21. As regards the targeted population of the funded programmes or projects, SMHO(PM)1, CHP advised that in the three financial years from 2014-2015 to 2016-2017, a total of \$5.4 million had been granted for programmes targeted at those heterosexuals who were male clients of female sex workers and a total of \$9.5 million had been granted for projects covering population outside the five high risk groups (i.e. MSM; male clients of female sex workers; injecting drug users; sex workers; and people living with HIV), such as cross-border travellers, prisoners and ethnic minorities. Controller, CHP explained that each funding application in the area of publicity and public education would be assessed by the Council for the AIDS Trust Fund on a case-by-case basis by taking into account, among others, the merits of the proposal and where applicable, the track records of the previously funded programmes or projects as the case might Mr CHAN Chi-chuen requested the Administration to advise in be. writing, in the form of a table, the number of approved grant applications for the AIDS Trust Fund in the past five years, with a breakdown by the target groups of and the amount of grant approved for each target group.

Admin

II. Any other business

- 22. <u>The Deputy Chairman</u> reminded members that the next regular meeting of the Panel would be held on 12 February 2018 at 2:30 pm.
- 23. There being no other business, the meeting ended at 6:02 pm.

Council Business Division 2
<u>Legislative Council Secretariat</u>
15 October 2018

Panel on Health Services

Special meeting on Monday, 5 February 2018, at 3:00 pm in Conference Room 2 of the Legislative Council Complex

Summary of views and concerns expressed by organizations/individuals on HIV and AIDS response measures formulated in relation to the Recommended HIV/AIDS Strategies for Hong Kong (2017-2021)

No.	Name of deputation/individual	Submission / Major views and concerns
1.	The Civic Party	• LC Paper No. CB(2)826/17-18(01)
2.	Ms Bernadette WONG	The Administration should step up public education on HIV/AIDS in order to reduce stigma and discrimination against HIV infected persons.
3.	Rainbow of Hong Kong	• LC Paper No. CB(2)768/17-18(03)
4.	Rainbow Action	• LC Paper No. CB(2)768/17-18(04)
5.	Sexualities Research Programme, The Chinese University of Hong Kong	• The Administration should step up public education on HIV/AIDS, provide subsidized places for residential care homes for the elderly ("RCHEs") for those elderly HIV infected patients in need of the services, provide relevant training for RCHE staff and remind RCHE operators to observe the Disability Discrimination Ordinance (Cap. 487), so as to ensure that elderly HIV infected patients could receive appropriate care and live their twilight years in dignity.
6.	PrideLab	• LC Paper No. CB(2)826/17-18(02)
7.	AIDS Concern	• LC Paper No. CB(2)768/17-18(05)
8.	Midnight Blue	 Expressed disappointment about the non-attendance of public officers from the Security Bureau and the Constitutional and Mainland Affairs Bureau. The Administration should provide cross-border travellers with free condoms and HIV tests; the Hospital Authority should provide non-local residents in need with post-exposure prophylaxis as part of its subsidized services; and the Hong Kong Advisory Council on AIDS ("ACA") should discuss with the Police on the negative impact arising from seizing condoms during law enforcement and using condoms as evidence of
9.	CHEM ELIN 隐野汁 小知	prosecution for sex work-related offences on the work to encourage sex workers to store or use condoms. • LC Paper No. CB(2)822/17-18(01)
	CHEM FUN 關注小組	* * * * * * * * * * * * * * * * * * * *
10.	Mr LEUNG Kwok-hung	• The Administration should appoint representatives from the six key populations as identified in the Recommended HIV/AIDS Strategies for Hong Kong (2017-2021) ("the 2017-2021 Strategies"), namely men who had sex with men, people living

No.	Name of deputation/individual	Submission / Major views and concerns
		with HIV, people who injected drugs, ethnic minorities, male- to-female transgender, and female sex workers and their male clients, to sit on ACA so as to facilitate the policy formulation work in relation to the prevention and control of HIV infection and AIDS.
11.	The Society for Truth and Light	• LC Paper No. CB(2)868/17-18(01)
12.	The Hong Kong Coalition of AIDS Service Organizations	• LC Paper No. CB(2)768/17-18(06)
13.	Mr Nathan Madson	• LC Paper No. CB(2)768/17-18(07)
14.	The Society of Rehabilitation and Crime Prevention, Hong Kong	• LC Paper No. CB(2)768/17-18(06)
15.	Action for REACH OUT	• LC Paper No. CB(2)803/17-18(01)
16.	Hong Kong AIDS Foundation	• LC Paper No. CB(2)803/17-18(02)
17.	民主黨性別平權委員會	• LC Paper No. CB(2)826/17-18(03)
18.	The Society for AIDS Care	• LC Paper No. CB(2)768/17-18(08)
19.	A-Backup	• LC Paper No. CB(2)768/17-18(09)
20.	William LEUNG	• LC Paper No. CB(2)927/17-18(01)
21.	BigLove Alliance	• To prevent and control the spread of HIV effectively, the Administration should continue to step up the promotion of use of condoms on one hand, and on the other hand provide key populations with free oral pre-exposure prophylaxis with reference to a pilot programme implemented in New South Wales of Australia in this regard.
22.	Queer Theology Academy	• The priority areas for action set out in the 2017-2021 Strategies should cover, among others, the review of legislation and policies relating to drug users, sex workers, and sexual minorities e.g. homosexuals and transgenders, with an aim to enhance the protection and healthcare intervention for the said populations, and reduce stigma and discrimination against HIV/AIDS.
23.	Community Business	• LC Paper No. CB(2)826/17-18(04)
24.	同志公民	• The Education Bureau should review its curriculum guides to ensure that school-based sex education curriculum and related learning activities could better disseminate knowledge on sexuality issues, e.g. proper use of condoms, to students and facilitate the discussion of topics related to sexual orientations.

Council Business Division 2 <u>Legislative Council Secretariat</u> 15 October 2018