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HIV ADVOCACY IN CHINA: STORIES FROM THE FIELD

Strengthening Methadone Maintenance Therapy (MMT)

ADVOCACY SERIES, NUMBER 1

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As China continues to implement its Reform and Opening-Up* policy, the number of grassroots community-based organizations (CBOs) eager for involvement and change multiplies. To support China's burgeoning HIV community sector to mobilize, strengthen its leadership, and succeed in bringing about local-level change, USAID | Health Policy Initiative in the Greater Mekong Region and China (HPI/GMR-C) is building CBO capacity in advocacy and community mobilization. HPI/GMR-C provides training in advocacy, project management, and implementation. The training is followed by small grants to enable CBOs to implement their newly acquired advocacy skills. This series highlights the critical contribution community efforts make to HIV prevention, care, and treatment by exploring the outcome of some of these grants, the lessons learned, and the evolving meaning of advocacy in China. Since this series would be impossible without the enormous contribution and leadership of people living with HIV, the communities most-at-risk for HIV, and their partners and families, we thank them for telling their stories.

* Deng Xiaoping, a prominent Chinese reformer; was the architect of Chinese socialism and economic reform. Beginning in 1978, his reforms opened China to the global market and helped to affect changes in the Chinese justice and political systems.

The Issue

“Before [we undertook this advocacy], it took me over three months to get a replacement detoxification discharge paper in order to apply for MMT as I had lost mine. I had to go to many government offices and always feared arrest by the police in the process. It’s much easier now.”

—Member of Mengzi Kangxin Home Support Group on MMT

In 2008, injecting drug users in China accounted for 44 percent of HIV infections, up from 38 percent in 2007. Injecting drug users in the small Yunnan county of Mengzi (population 330,000), like elsewhere in China, are at great risk of contracting HIV. Access to MMT is a proven method of reducing both drug use and HIV infection among injecting drug users. Since 2004 the Chinese government has opened more than 67 MMT clinics in Yunnan alone. These clinics offer a daily dose of methadone (an alternative opiate drug to heroin), which is taken orally, thereby eliminating the need to inject. Yet uptake of MMT has been much less than anticipated. In Mengzi, of an estimated 1,200 injecting drug users, records indicate only 241 (20 percent) had ever registered for MMT up to September 2009, and of these, only about half (or approximately 120) continue to access treatment currently. This does not include drug users who are not registered. In Mengzi, this means that the vast majority of drug users are not accessing preventative HIV and injecting drug use services.

The key reasons for low uptake of MMT are

- Unnecessarily stringent application criteria requiring injecting drug users to produce discharge papers from a compulsory detoxification center and proof of local residency
- Prohibitively high fees for pre-entry medical screening
- The potential for arrest and readmittance to a compulsory detoxification center (where they can be incarcerated for up to six years) when injecting drug users apply for replacement discharge and residency papers

Mengzi MMT clinic staff estimate that as many as 16 percent of past applicants had “lost” their detoxification discharge papers and needed replacements. Indeed, interviews with 120 injecting drug users not accessing MMT in Mengzi indicated that while 75 percent were interested in receiving MMT, half of them said they could not, either because they did not have the necessary documentation or could not afford the service fees.

The Advocacy Solution

The Mengzi Kangxin Home Support Group is a dedicated group of former injecting drug users who are no longer using drugs or are on MMT. The group was formed in November 2007 to provide mutual psychological and practical support to its members. The group currently has three full-time staff, 11 core workers, and 52 members and volunteers. While the group is still not yet registered as a nongovernmental organization, it is committed to disseminating information about HIV prevention and treatment, drug eradication, and health care to injecting drug users, MMT users, and people living with HIV. Despite limited funding, its members are highly active and led by a dedicated former drug user who has turned two rooms of his own home into a drop-in center. This grant, issued in December 2008 and valued at US\$1,472, was the group's first advocacy grant.

In December 2008, the Mengzi Kangxin Home Support Group was awarded an HPI/GMR-C grant to advocate with their local government authorities to repeal the requirement that MMT applicants produce proof of having undergone compulsory detoxification and reduce the fees for the pre-entry health check.



An MMT client receives his daily dose of methadone at an MMT clinic.

The Results: Synergistic Benefits

“The value of this project has been much more than the value of the money given. We have learned better what advocacy really means, that it doesn't have to mean confrontation with the government, and how to do it. With HPI/GMR-C backing, we have enhanced our reputation and also gained recognition of past work [in promoting MMT], which previously went unnoticed.”

—Feng Yu, Director, Mengzi Kangxin Home Support Group

Kangxin Home Support Group has achieved the goals of increasing access to MMT and strengthening the implementation of the MMT policy. They have ensured that the access to MMT is less expensive, more user friendly, less administratively complex, and supported by local police and health authorities.

Six months into the grant, local police agreed to stop arresting formerly “hidden” injecting drug users, or those applying for replacement detoxification discharge and residency papers.

Since Kangxin Home Support Group publicized this procedural change in July 2009, 15 injecting drug users who had lost their detoxification discharge papers have been referred to the service and have been able to start MMT. In addition, six injecting drug users from other cities have been able to access methadone after applying for a provisional residential permit.

The cost of the initial pre-enrollment health check has been reduced from RMB100 to RMB50 per person (from nearly US\$15 to just over US\$7).

Other benefits have accrued as well. Kangxin Home Support Group's relationship with the local AIDS Office Director, who was highly supportive of the

group's advocacy, is stronger and a whole host of new issues and other areas of cooperation are being addressed. Client feedback systems have been developed for the MMT clinic, leading to improved attitudes of clinic staff. Kangxin Home Support Group's success in increasing access to MMT and the quality of the services it provides has enhanced its reputation and increased government appreciation of the group's role in reaching injecting drug users in the community. The AIDS Office has also given Kangxin Home Support Group funding (RMB3,000) that is being used to help pay for medical checkup and daily dosage fees for its poorer members.

Lessons Learned

“When we eased the application criteria [for MMT], Kangxin Home Support Group was very useful in advertising this to the injecting drug users in the community—something which we cannot easily do.”

—Mengzi MMT clinic staff

Kangxin Home Support Group has been emboldened and encouraged by these results and the support it received from the AIDS Office. Group Director, Feng Yu, says he now better understands the meaning of advocacy, realizing that this does not necessarily mean confronting the government, but rather trying to view an issue from their perspective and design a solution that is a win-win for all parties.

HPI/GMR-C provided training for the group to collect primary data from beneficiaries and translate this into evidence for policy makers and service providers. However, while the training taught basic knowledge, it is the grant itself that has enabled Kangxin Home Support Group to turn knowledge into practical skills.

A good reputation is also very important for credibility and successful advocacy in China. Financial and technical support from HPI/GMR-C provided a platform for the Kangxin Home Support Group to build from this success. Feng Yu notes that “if outsiders

are interested in an issue, this tends to galvanize the local government.” The group is now more able to network and collaborate with other nongovernment and government agencies.

Significant challenges still remain for groups like Kangxin Home Support Group. The role of local CBOs in advocacy is a new one in China. CBO leadership and involvement in HIV-related policy is still evolving and there is some way to go before CBOs gain an accepted role. Nevertheless, the success of this first project has provided significant benefits to a local government eager to promote MMT, as well as to Kangxin Home Support Group and its members.

Encouraged by its early success, Kangxin Home Support Group has applied for a second grant from HPI/GMR-C. The aim of this new grant is to amend MMT regulations to allow patients who are too sick to visit the MMT clinic to receive their daily dosage at an alternative venue, for example in government-run hospitals or even in their homes. The group also plans to advocate for a change to clinic opening times so that they are more convenient for injecting drug users who are working.

The advocacy ball has started rolling in Mengzi and seems likely to continue to gain momentum.

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