

Cambodia: Drug use and sexual HIV risk patterns among non-injecting and injecting drug users in Phnom Penh and Poipet

Objective

The aim of this programme conducted between February and June 2004 was to better understand how to respond to reports of rapidly changing drug using and sexual risk patterns that increase vulnerability to HIV infection among non-injecting and injecting drug users (IDUs) in Phnom Penh and Poipet, Cambodia.



Smoking methamphetamine

Partners involved

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Overview of the situation

The health, social and economic consequences of injecting drug use and HIV infection linked to sharing of injecting equipment have had a major impact in Southeast Asia. High risk sexual practices of non-injecting drug users may also be

contributing to HIV transmission in this region. Drug use, and in particular injecting drug use, has so far played a small role in Cambodia's AIDS epidemic. HIV infection has been primarily attributed to heterosexual transmission. Evidence from a range of small-scale surveys undertaken by the government, United Nations (UN) and nongovernmental organizations (NGO), together with law enforcement and media reports suggests the incidence of drug use, including injecting drug use, is rising.

Assessments by experienced NGOs working with street children in Phnom Penh show that injecting drug use by children/youth living on the street rose dramatically from around 0.6% in 2000 to 9.8% in 2004. Between January and December 2004 in Phnom Penh, 10 of 32 (31.3%) drug injecting street youth who were voluntarily counseled and tested were found to be HIV positive.

The potential for an emerging epidemic of HIV linked to unsafe injecting practices, and possibly risky sexual practices associated with drug use, demands a rapid and timely response to prevent the spread of HIV in a country where the burden of HIV is already high.

Description

The core methods in the assessment conducted in Phnom Penh and Poipet were observation and mapping, key participant interviews and focus groups;

observations included visits to places reported in interviews as venues where risk behavior occurs, where data on risk behaviors were observed and subsequently recorded. Interviews were conducted with key policymakers and service providers. Snowball sampling techniques were used to recruit injecting and non-injecting drug users and to find members of more hidden and obscure populations when there was inadequate access to a specific target group.

Deliverables

- The high levels of needle sharing and reuse among the IDUs who participated in this assessment are alarming, and indicate that they are vulnerable to HIV infection and other blood borne diseases. Methods commonly used to clean needles are not sufficient to prevent transmission of blood borne pathogens.
- Injecting drug users are selling their blood to blood banks for money to purchase drugs. This finding coincides with data from other small-scale surveys and media reports. Selling of blood by IDUs has potential implications for the safety of the blood supply.
- The primary challenges identified by service providers were lack of funds, lack of human resources, lack of cooperation from authorities, erratic or absent law enforcement, low levels of drug awareness, stigma and other difficulties specific to working with their target populations.
- While HIV prevalence among Cambodian IDUs is still low, there is a window of opportunity for preventive action to be taken through a collaborative effort of all concerned governmental and non-

governmental agencies. A program that is effective in reducing the risk of HIV transmission through injection drug use may avert an impending epidemic.

Next steps

A comprehensive, multicomponent strategy is necessary to prevent the further spread of HIV in Cambodia. The core components of a comprehensive approach for drug users include outreach, drug dependence treatment, syringes and disposal programmes and voluntary HIV testing and counseling programmes.

Programmes to prevent the misuse of all drugs are urgently needed; prevention of HIV and AIDS among drug users is a priority as well as risk reduction for non-injection and injection drug users who continue to use drugs is essential. The data from this assessment highlight the need to provide interventions that reduce the adverse consequences of drug use and prevent HIV transmission in vulnerable populations. The following recommendations focus on five main areas:

- Health promotion or information.
- Education and communication for the general population.
- Risk reduction interventions for at risk populations that include expanding capacity of organizations to provide services.
- Blood safety, policy activities that support prevention, treatment and care for drug users.
- New initiatives .

Contacts

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