

## Editorial

# Health promotion and prevention in sexually transmitted infection in Hong Kong: building up from what we have achieved

The Department of Health of Hong Kong (DH), private sector and non-government organisation (NGO) are the main stakeholders of effective health promotion and prevention of sexually transmitted infection (STI) and HIV infection in Hong Kong. For many years, DH has proved this leading role in the government, non-government sector and community. The latter is evident through its active participation of the Community Planning Process (CPP) in Hong Kong; a movement endorsed by Center for Disease Control in USA. The CPP employed a bottom up approach in mobilising members of the community including the private sector and NGOs in disease prevention. Its role as health advocator in safer sex is expanding. Before we look at the future dimensions let's examined what we have achieved in the past.

The Social Hygiene Service (SHS) under DH provided comprehensive, high coverage, indiscriminate and high quality clinical care to its clients free of charge. The social hygiene clinics carried out effective public health intervention strategy to STI clients like voluntary counselling and testing, free condoms provision, contact tracing, partner notification, epidemiological treatment and out reaching service to vulnerable populations like female sex workers. The STI clients in these clinics are managed by trained experienced specialists in Venereology; supported by a standardised centralised public health laboratory. On the one hand, DH offered a quality clinical service to the public and an effective public health STI control program on the other. The STI services and programs delivered by DH have well

trimmed the trees but also controlled the fire in the forest. It not only rescued a few victims downstream in the hidden STI epidemic but also many upstream through its health promotion efforts.

Are we there? What are the future dimensions? I think DH together with the private sector has still plenty to offer in STI prevention. All effective prevention programs started with an accurate assessment of the situation. A case based STI surveillance program assisted by a hand held electronic device can effectively recorded all the necessary STI demographic, behavioural and epidemiological information in every single case of STI. The development of an integrated surveillance system in Hong Kong is also a feasible option. STI information from the government, hospitals and private sector can all be linked up in a single database. To achieve this, we need collaboration between DH, Hospital Authority and private sector.

The message of safer sex can be effectively delivered to the public through internet. This is especially true to adolescent who has shown to spend a great deal of time with the computer. Websites with the theme of promoting safer sex is an area worth investing. Social marketing involving mass media campaign has also been shown repeatedly to be effective. The promotion of sexual health in schools should be re-inforced. The above can well serve the general population. For the high risk vulnerable groups like the female sex workers, men who have sex with men and STD clinic attendees, oral and vaginal condoms

provision is still the most evidence-supported strategy in reducing the harm of STI including HIV. Outreaching, educating the peers and diffusing the STI prevention message through innovators of the vulnerable groups may also work well. Last but not the least, training and capacity building of staffs should be encouraged and occupied a central role in STI prevention. Not only should we build up the capability of our professional team which include nurses and doctors in health promotion; we can also empower our STI clients like sex workers in STI prevention through training.

One can easily see that health promotion and STI/disease prevention nowadays are well

armed with theories, models and technologies. It is a powerful tool in modifying human behaviour and saving lives. By integrating them into the existing STI prevention framework, more can be achieved in the future. But let us don't forget; resources are always scarce; we must set our priorities and allocate our resources accordingly in planning STI prevention programs. Successful STI prevention program must be cost-effective.

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