

Remarks before the Congressional Human Rights Caucus (CHRC)

“The Global Challenge of HIV/AIDS”
forum organized by the International Film Exchange
Rayburn House Office Building, Gold Room

“HIV/AIDS in China: The Question of Stability and Security”

April 1, 2004

A Statement by

Drew Thompson
Research Associate, Freeman Chair in China Studies

Thank you... And let me extend my thanks to Congressman Leach for attending this morning, and to Congressmen Lantos and McDermott for their opening remarks and to the Human Rights Caucus, the International HIV/AIDS Caucus, and Dr. Mueller from the International Film Exchange for this opportunity and for organizing this important forum.

The very process of modernization brings great benefits to many people in China, but also presents massive challenges as well. We see that China is changing at a rapid pace, the economy is growing, but problems exist across the socio-economic agenda, including the environment, crime, rural (and urban) poverty, sex imbalance, and of course the issue of poor public health, and emerging infectious diseases such as SARS and HIV/AIDS.

Social reforms have accompanied economic reforms, bringing prosperity and new freedoms along with economic growth, which presents challenges to preventing the spread of HIV. It is these very freedoms that increase vulnerabilities to HIV/AIDS.

People are no longer tied to their work units or farms. Mobility permits the poorest and the wealthy to travel freely. HIV/AIDS affects the migrant worker as well as the businessman who has economic means. In their own way, they both are risk takers and prone to engage in risky behavior.

Migrant workers are particularly vulnerable. The “*liudong renkou*” or floating population is made up of 120 to 140 million rural workers who travel to urban areas in search of employment. Most migrants are young, in the sexually active period in their lives, and freed from the social constraints of their homes and villages, which enables them to engage in high-risk behaviors that they otherwise might not consider. Because they frequently are not documented and not allowed to work in urban areas, they do not have access to social services, and are very hard to reach with awareness and prevention messages. We saw during the SARS outbreak that the migrant population is hard to control when one million fled Beijing over the course of a week despite government edicts that they stay at their work sites.

As in many parts of the world, liberalization and modernization bring about changes in lifestyle. While Chinese society remains very conservative on the surface, there has been an upsurge in premarital and extra-marital sex, increasing rates of sexually transmitted disease (which should be noted is a key indicator of potential HIV prevalence and high-risk behavior, and also a facilitator of the spread of HIV). Commercial sex is evident across China, in both high-end urban brothels, and truck-stop-restaurants on inter-province highways.

While much the focus of the HIV/AIDS epidemic in China to date has been the former plasma donors in central China and intravenous drug users in southwest China, it is the looming hetero-sexual epidemic that causes the greatest concern because it is the hardest to control once it begins to spread. An epidemic in the general population likewise directly threatens the economically dynamic eastern provinces.

The good news is that there is little evidence that HIV has spread to the general population, yet. Granted, the epidemiological surveillance data is weak, and indications exist that HIV could potentially spread to the general population. HIV already affects certain “bridge populations,” such as commercial sex workers. STD prevalence is increasing and awareness remains low. HIV/AIDS is still considered a disease of the marginalized, “those people” in Henan or Yunnan who do drugs or who were so poor they had to sell their blood.

Economic reforms and the move to free market systems have lead to increased decentralization and deterioration of the government run medical system. The medical system lacks capacity and is underfunded, leading to practices that can contribute to the spread of HIV and other diseases. Medical practitioners are undertrained, preventative medicine is ignored, needles are commonly reused in village clinics, and used equipment is not properly disposed of. The medical system is taking a leading role in

the fight against HIV/AIDS in China, but it will require significantly more government commitment if it is to have a measure of success.

Stability and Security

I was asked to speak about the impact of HIV/AIDS on China's stability and security. It is important to note that the HIV/AIDS crisis in China is still in its earliest phase. National prevalence is still low, below a half a percent. However, if national efforts to stem the spread are not successful, China faces significant threats to continued economic growth, security and stability. Over the long term, HIV/AIDS can potentially introduce significant direct and indirect destabilizing conditions in China, presenting a long-term security threat.

Direct threats to security can include manpower shortages for critical industries, police forces or the military, civil unrest and threats to political authority. Due to China's large population, HIV/AIDS is unlikely to cause shortages of trained professionals or recruits on a scale similar to heavily affected countries in Africa. China has, however, faced localized incidents of civil unrest in areas where HIV prevalence is high due to plasma donation, most notably in several "AIDS villages" in Henan province. As AIDS symptoms increasingly emerge in more villages in areas where plasma donation was prevalent in the 1990s, localized unrest could become more common, particularly if China's national antiretroviral drug treatment program, China CARES, is unsuccessful.

A growing population of AIDS orphans who lack social security present both long and short term challenges to security, both in terms of the burden of their care placed on communities, as well as the long term threat of poorly socialized, stigmatized young adults forced to turn to crime or prostitution to make a living. Additionally, orphans can be susceptible to recruitment into criminal gangs or extremist organizations that offer shelter and socialization, posing a potentially long-term direct threat to security. In areas such as Xinjiang province, where separatist sentiments exist, HIV/AIDS could challenge a fragile peace.

The indirect threats to security and stability posed by HIV/AIDS are more numerous and complex. Certainly, at the family and community level, the economic impact from HIV/AIDS is significant due to the loss of young, productive people and the burden of care placed on families. At the national level, resources could increasingly be redirected from essential programs such as education and infrastructure development to health care programs such as China CARES. A recent study by the RAND Corporation estimates that as much as 2% of China's GDP growth could be lost due to HIV/AIDS, more than environmental degradation or corruption. In heavily affected local areas, local government administrators are forced to focus their limited time and resources on

HIV/AIDS at the expense of addressing other important issues that contribute to the wellbeing of society.

While the trend of HIV prevalence remains low in China, the security threat posed by HIV/AIDS remains a distant concern, although security and threats to stability are increasingly part of the calculus of China's national response. Because of this, China could potentially avoid the fate that currently threatens several southeast and central Asian nations and has already befallen many African nations. The countries that are now facing the gravest HIV/AIDS epidemics mounted inadequate responses to the spread of HIV at the earliest stages of the epidemic, because there was no visible, tangible evidence until people began to become sick. HIV perniciously spreads undetected to the point where it can be too late to do anything meaningful about it. If China can maintain attention and commitment to HIV/AIDS at the highest levels of political leadership, they are one step closer to heading off the epidemic that threatens to undo the positive developments of the past 25 years.

Government Response

There are signals that China is making progress in their battle against HIV/AIDS. There has been a marked increase in government commitment in the past year, certainly since the aftermath of SARS. Last December, Premier Wen Jiabao and Vice Premier Wu Yi visited Ditan Hospital's AIDS clinic and met publicly with AIDS patients. Wu Yi visited an AIDS village in Henan, and met privately with China's most famous AIDS activist, Dr. Gao Yaojie. In February, the State Council, China's Cabinet formed a new committee to coordinate the government's response to HIV/AIDS prevention and care.

Last September, Executive Vice Minister of Health Gao Qiang made a speech to the United Nations General Assembly and made five commitments on behalf of the government. First, he pledged accountability at all levels of government, stating that there would be no cover-ups. Second, free ARV treatment will be provided to poor sufferers. Third, the government will intensify awareness campaigns and undertake efforts to reduce drug use and prostitution. Fourth, the government will oppose discrimination and integrate social support for HIV sufferers including education and care for orphans. Fifth, China will increase international cooperation.

Elements of these five commitments have already been implemented in limited pilot projects in several regions. However, if these commitments are to be effectively implemented in a comprehensive, national framework, it will require sustained high-level political commitment of the type we have seen since December 2003. However, despite a new environment of political commitment to HIV/AIDS, challenges remain.

Political structures have not evolved as dramatically as social and economic developments. The media is still tightly controlled, civil society has a very limited role, and the most vulnerable and affected populations lack representation within the bureaucracy. Provinces are increasingly responsible for providing social services and receive less financial support from Beijing, enabling them to maintain a high degree of autonomy to carry out policy queues from Beijing.

While we are seeing increasingly positive signs in China, including delivery of free domestically produced ARV drugs to former plasma donors in central China, posters of HIV/AIDS spokespersons all over Beijing and in many cities, television programs on World AIDS Day, there is still a great deal that needs to be done if China is going to effectively prevent the spread of HIV into the general population. Stigma remains a major problem. The legal system needs to reform infectious disease laws and protect the rights of HIV positive persons. The national health system needs significant investment in resources and human capital. Pilot projects, particularly those dealing with marginalized segments of society need to be scaled up and funded for national implementation. Civil society and people living with HIV/AIDS need a greater role in society. When we see changes such as these, we can afford to be more optimistic.

Thank you.

Drew Thompson
Freeman Chair in China Studies
Center for Strategic and International Studies
April 1, 2004