

# Global AIDS Progress Reporting 2014 in Brunei Darussalam

*Reporting period: January 2013–December 2013*

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## I. Overview of the AIDS epidemic

Brunei Darussalam recorded its first local case of HIV in August 1986 and has had cumulatively 93 cases in citizens and permanent residents up till the end of 2013<sup>1</sup>. Out of these 93 cases, 32 new cases were reported in 2011-2013, with 2013 alone representing the highest annual increase with 12 new cases. There were a total of 9 new local cases of HIV reported in 2012. As of the end of 2013, there are 63 persons known to be living with HIV in Brunei with 4 AIDS-related deaths recorded in 2013<sup>1</sup>.

Since 1995, Brunei Darussalam has only recorded one case of mother-to-child transmission (MTCT) which was recorded in 2011 (MTCT was attributed to pregnant mother only presenting for antenatal care during labour). A total of 9 other children have been born to 5 other HIV-positive mothers in the past 7 years<sup>1</sup>.

All of the 12 cases reported in 2013 were transmitted through sexual contact. Only 1 of these cases was female. 7 cases were reported in men who have sex with men (MSM). There is no known transmission through intravenous drug use<sup>1</sup> (Numbers of IVDU is unknown in Brunei but believed to be low).

## II. National response to the AIDS epidemic

Brunei Darussalam is fully committed towards achieving the targets of the Millennium Development Goals which includes ensuring universal and equitable access for better and comprehensive health care services. His Majesty's Government provides free and comprehensive health care to all citizens and permanent residents of Brunei Darussalam. This includes all aspects of prevention, care, treatment and support for HIV although there is no separate budget allocated for HIV/AIDS specifically. First-line antiretrovirals are readily provided to citizens and permanent residents. Provision of second and third-line antiretrovirals is subject to internal regulations.

### Surveillance

HIV is a notifiable disease under the Infectious Disease Act (2010) and it is compulsory for all clinicians to report any positive cases to the Department of Health Services. Additionally, the national laboratories also report all positive HIV blood tests to the Department.

Although there have been no studies to quantify the prevalence of HIV within the general population, HIV serosurveillance has been ongoing for the past two decades with the following groups screened routinely for HIV:

- i) At antenatal check ups
  - all mothers are screened for HIV at antenatal assessment for each pregnancy
- ii) Blood donors
  - All blood donors are screened for HIV (amongst other diseases) for every donation.
- iii) Frequent recipients of blood and blood products
- iv) All tuberculosis patients
- v) Contacts of HIV cases

- vi) Workers during routine pre-employment medical check-ups.
- vii) Foreign workers applying for a permit to work in Brunei Darussalam (HIV tests are required every 2 years)
- viii) Patients presenting with sexually transmitted infections (STI)
- ix) Detainees e.g. prisoners, drug rehabilitation

Over 16,000 HIV tests have been requested annually and tested by the Ministry of Health's clinical laboratories in 2013<sup>2</sup> in addition to screening tests for blood donors. Foreign worker screening is done separately by the Ministry's public health laboratories. HIV testing is provided free of charge and available at most government health centres and clinics. However, pre-test counselling and post-test counselling for negative tests is not always done, although post-test counselling if test is positive is always given.

A global school-based student health survey is currently being done which incorporates questions on sexual health.

### III. Civil society involvement

The Brunei Darussalam AIDS Council (BDAC), the sole non-governmental organization looking at HIV issues in the country, in collaboration with the government, has made considerable efforts in increasing awareness on HIV particularly in youth and teenagers through its peer education programmes. Standard Chartered Bank (SCB) locally is also active in creating awareness on HIV particularly in the corporate sector.

#### IV. Challenges

Although prevalence of HIV nationally is considered to be very low and is expected to remain low in the near future, several issues and challenges will continue to be cause for concern:

1. Sexually transmitted infections (in particular chlamydia and gonorrhoea) have increased over the past decade. The increase suggests that risky sexual behaviour practices exist within the community in Brunei Darussalam and therefore potential risk of HIV transmission. However, there has been a decrease seen in the number of reported STIs in 2013 compared to previous years although this may be largely due to under reporting.
2. A policy on sex education has yet to be included in the curriculum, although the Ministry of Education are considering the introduction of life-skills based education
3. These past two years have seen a shift in the total number of infections from heterosexual transmission to MSMs and TGs. MSMs and TGs continue to be a difficult group to target for surveillance as well as prevention. Homosexual acts and cross-dressing are illegal and there are no formalized groupings or associations that deal specifically with MSM and TG issues. The implementation of Syariah law in April 2014 may make these groups appear less visible.

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<sup>1</sup> Disease Control Division, Department of Health Services surveillance data

<sup>2</sup> Department of Laboratory Services statistics