

COST EFFECTIVENESS OF HARM REDUCTION : HIV



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2. Letter of Offer (Research Grant)

Surat Kami : 600-RM/ERGS 5/3 (30/2011)
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KELULUSAN SKIM GERAN PENYELIDIKAN EKSPERIMENTAL (ERGS) FASA 01/2011

Tajuk Projek **Cost Effectiveness of Harm Reduction : HIV**
Kod Projek 800-RM/ERGS 5/3 (30/2011)
Bidang Sains Sosial
Tempoh 01 Julai 2011-30 Jun 2013 (24 bulan)
Peruntukan Diliuskan (KPT) RM 50,000.00
Peruntukan Pengurusan RM 2,500.00 (5%)
Peruntukan Pengoperasian RM 47,500.00 (95%)
Kerua Projek Pn Sharifah Fadzlon Abdul Hamid

Dengan hormatnya perkara di atas adalah dirujuk.

Sukacita dimaklumkan pihak Kementerian Pengajian Tinggi meilalui surat JPT.S(BPKI)2000/09/01/018 (59) yang bertarikh 22 Jun 2011 telah meluluskan kertas cadangan penyelidikan Y Brs Profesor/tuan/puan untuk di biayai di bawah Skim Geran Penyelidikan Eksperimental (ERGS) Fasa01/2011.

3. Bahil pihak Universiti kami mengucapkan tahniah kepada Y Brs. Profesor/tuan/puan kerana kejayaan dan seierusnya diharapkan berjaya menyiapkan projek ini dengan cemerlang.

4 Peruntukan kewangan akan disalurkan melalui tiga (3) peringkat berdasarkan kepada laporan kemajuan serta kewangan yang mencapai Derbelanjaan lebih kurang 50% dari peruntukan yang diterima.

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5 Untuk tujuan mengemaskini pihak Y. Brs. Profesor/tuan/puan adalah diminta untuk nanar.datangani perjanjian ERGS, melengkapkan semula kertas cadangan penyelidikan, mengisi borang selaju terima projek penyelidikan dan menyusun perancangan semula bajet yang baru seperti yang diluluskan Sila lihat lampiran bagi tatacara tambahan untuk pengurusan projek..

Setuan harap maklum

"SELAMAT MGYJJALANKAN PENYELIDIKAN DENGAN JAYANYA"

rang benar

PROFESOR Dr A K/BAKAR ABDUL MAJEED
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5.1 Report

1.1 Executive Summary

Recent years have seen increasing cases of intravenous drug users (IDUs) not only in Malaysia but also worldwide and its consequential negative impact upon society, one of which is the rising cases of HIVs. Recognising that it is impossible to eradicate HIVs, many countries embark on harm reduction programmes. The programmes include the syringe exchange programmes (NSEP) and the methadone maintenance therapy (MMT).

Drug trafficking being a lucrative business has led to the increase in the supply of illicit drugs and thus increase the number of drug addicts globally and Malaysia is no exception. Every year many countries spent a large sum of money to tackle the problem associated with illicit drug. In Malaysia many of the drug users are below the age of 40 years and they are mainly IDUs. Transmission of HIV is found largely among IDUs.

The International Harm Reduction Association (*ihra*) defined harm reduction as practices that aim primarily to reduce the adverse health, social and economic consequences of the use of legal and illegal psychoactive drugs without necessarily reducing drug consumption.

5.1.1 Harm reduction and HIV

Malaysian Ministry of Health reported that injection drug use (IDU) accounts for a largest proportion of HIV transmission in Malaysia. 75% of all HIV infections have resulted from needle-sharing in IDU. The real figure may be higher. The first harm reduction programme was first introduced in Malaysia in 2005. It was met with a lot criticism by the public. However, these complaints slowly die - off after Malaysian have seen the impact that the programme had on the spreading of HIV virus.

5.1.2 Harm reduction at SAHABAT

SAHABAT is a non-governmental organization that introduced the NSEP working for and with drug use community in Kelantan. The mission of SAHABAT is to help the IDUs that are HIV positive/AIDs to live a life without stigma and discrimination. The vision is to ensure Malaysia is free from stigmatization and discrimination towards the HIV/AIDs and promote harm reduction.

SAHABAT activities also include the dissemination of information about harm reduction, NSEP, MMT and medical references. Every year SAHABAT will receive mandate from the Ministry of Health with regards to the number of new clients that the workers need to established contacts. Since 2008, the Ministry targeted SAHABAT to get 700 new clients yearly. This is one of the challenges that the outreach workers have to face. However, from information gathered from the existing clients, the villagers, the police etc, the outreach

- i. Creating awareness among the drug users and their family members regarding the importance of not sharing needles and using clean needles
- ii. Reducing stigmatization and discrimination by the public towards the drug addicts. These have encouraged the drug addicts to be more willing to go for health screening
- iii. Improving the quality of life among the drug users and family members. Through these programs the drug users were able to secure jobs to support their family
- iv. Reducing the number of new HIV/AIDS cases

The harm reduction conducted at SAHABAT is cost effective. By applying the Total Quality Management (TQM) concept, the cost of prevention was found to be higher than the consequences costs. This indicates that the programme is successful.

As an extension to the current research, it was found that when compared to the MMT conducted also at SAHABAT, NSEP is less costly.

5.2 INTRODUCTION

BACKGROUND

Transmission of HIV is found largely due to sharing of syringes among drug users and practicing unsafe sex. Malaysia has now embarked on its mission to reduce the cases of HIV transmission through syringe exchange programme. Since 2005, Ministry of Health of Malaysia together with UNICEF had done research on the effect of harm reduction through methadone maintenance programme. Later, with the recommendation of WHO the Ministry of Health set up a pilot Needle and Syringe Exchange Programme. There is a reduction in HIV infection after the programme but the costing aspect was not highlighted.

This study aimed to estimate the financial costs, economic costs and productivity costs of harm reduction exercises. It tries to measure the costs effectiveness of harm reduction by applying the concept of Total Quality Management (TQM).

5.2.1 Harm reduction

Generally harm reduction is a way of dealing with behavior that damages the health of the persons involved and their community. Many individuals acquire these damaging behaviours despite being aware of the adverse effects on their health. These would include smoking, drinking too much alcohol, practicing un-safe sex and drug abuse.

Tobacco smoking can adversely affect both the heart and lungs. Most common disease would be heart attacks, strokes, chronic pulmonary disease, lung cancer, pancreatic cancer and cancer of larynx and mouth.

Alcohol abuse can damage almost every organ and system in the body. Many chronic diseases such as high cholesterol, diabetic, kidney failure, strokes, etc. Unsafe sex is an