

Give children in Thailand living with HIV and AIDS a brighter future

Action on HIV and AIDS > Funding target £150,000

YEAR 2 OF A 3 YEAR PROJECT

In Thailand, many ethnic minority and migrant communities are unable to access HIV and AIDS information and support. This includes life-saving services such as early testing and treatment for children, and the prevention of HIV transmission from mother to child. Meanwhile, increasing numbers of children living with HIV in Thailand are reaching adolescence and facing extremely challenging issues. With your support, Oxfam can help these communities to protect their children, and help teenagers to cope with the challenges of living with HIV and AIDS.

The Project

Oxfam has been working on HIV and AIDS prevention and treatment in Thailand since 2003. Through our local partner Program for HIV Prevention and Treatment (PHPT), we have introduced low-cost testing for infants. Meanwhile, a successful campaign by Oxfam and our other local partner AIDS Access Foundation (AAF), has

led the government to provide free testing and treatment for all Thai citizens.

This project is providing testing and treatment for children who are not entitled to government health services. Uptake in the first year was low, but the proportion of children testing positive was high. The project will assess the barriers to ethnic minority communities accessing HIV information and services, and seek to address these barriers. The project will also help to ensure that health services meet the needs of adolescents living with HIV and AIDS.

Project aims

This project will:

- > Improve awareness and uptake of HIV testing and treatment, including Prevention of Mother To Child Transmission (PMTCT) by ethnic minority communities.
- > Provide testing and treatment for children from ethnic minority and migrant communities.
- > Identify the needs of adolescents living with HIV to create effective support activities and national policies.



Mi Ning*, aged 18 months, is one of the children without Thai citizenship who is receiving antiretroviral treatment through this project. Photo credit: Phawat Wichainarong.

*Names changed to protect identities.

The Background

In Thailand, more than 14,000 children are living with HIV and AIDS. Infants who are infected with the virus are likely to die early, unless they can quickly begin treatment. One quarter of HIV positive pregnant women will pass the virus on to their children, unless they follow PMTCT precautions¹.

This project is working in 14 locations in Thailand where there is a high prevalence of HIV and AIDS. These include the northern highland provinces, and border towns where a high proportion of ethnic minorities and migrant workers live. Children from minority and migrant communities are less likely to be tested for HIV, or to receive treatment. This may be due to their legal status, or through a lack of awareness from their parents as a result of language and cultural barriers.

The provision of HIV testing and treatment on a national level has increased survival rates. An increasing number of children living with HIV and AIDS are now reaching adolescence. They face complicated social challenges including: fear of stigma; adherence to treatment; and sexual health.



Chalernsak Kittittrakul, the Oxfam Project Manager, helping to run a youth camp for HIV infected children at a rural temple in Chiangrai Province. Credit: Phawat Wichainarong.

¹ WHO, Report of the WHO Technical Reference Group Paediatric HIV/ART care guidelines group meeting 2008.

The Plan

Activities:

Raise awareness and promote PMTCT to minority communities:

- › Research the barriers preventing access to HIV services in six ethnic minority/migrant communities.
- › Produce awareness raising communications in relevant languages.
- › Support six outreach activities promoting PMTCT.
- › Update 30 health workers on PMTCT.

Provide HIV diagnosis and treatment for children:

- › Test 100 children born to HIV positive mothers, and provide treatment if required.
- › Train 40 health-care workers in PMTCT, testing, treatment of children.
- › Support six outreach activities focusing on testing; post HIV diagnosis and treatment of children.
- › Provide home visits for 20 HIV positive people, including pregnant women, children, and adolescents.
- › Produce a training DVD and manual on testing of children.

Support for HIV positive adolescents:

- › Research the social needs of adolescents living with HIV.
- › Train 50 healthcare workers in issues affecting adolescents.
- › Support six outreach activities for adolescents and their carers.
- › Develop a training manual for health professionals caring for adolescents.
- › Encourage HIV positive youth to engage in peer support.
- › Train 80 volunteers in counselling.
- › Work with 10 hospitals to improve services for HIV positive adolescents.
- › Train 40 youth leaders to promote sexual health.
- › Support an HIV positive youth network.

Provide home visits for 20 HIV positive pregnant women, children, and adolescents in remote areas £909

The Impact

As a result of this project:

- › Testing and early treatment will lead to higher survival rates for children living with HIV and AIDS.
- › The transmission rate of HIV from mother to child will reduce from approximately 35 per cent to as low as two per cent.
- › HIV and AIDS services for adolescents will be improved by extensively researching their needs.
- › Eighty volunteers, who are living with HIV and AIDS, will provide counselling to adolescents and help to improve youth services and teenage sexual health.

Who will benefit?

- › Between 5,000 and 10,000 people from ethnic minority /migrant communities will have greater awareness about HIV and AIDS prevention and treatment. This will lead to an increased uptake in testing and treatment services.

Train 50 health-care workers to support HIV positive adolescents with issues such as long term adherence to treatment, and reproductive health £1,818

- › Directly, 100 children will benefit from early HIV testing and treatment.
- › Indirectly, all HIV affected children, adolescents and caregivers nationwide will benefit from the project through improvements to services for HIV positive young people.

Monitoring

Oxfam and our partner, PHPT will monitor the testing and treatment of children, which will help them to assess HIV awareness levels among ethnic minority communities. The research into both the minority communities and the needs of adolescents will provide a baseline for measuring change. Oxfam will regularly visit the partners and participate in key activities to monitor the progress.

Sustainability

Oxfam and PHPT will collect data to demonstrate to the government that the testing and treatment of all children in Thailand is affordable and effective. Ethnic minority communities will have a greater understanding of HIV and AIDS which will reduce their vulnerability in the long term. Permanent improvements will be made to services for children and adolescents. Young people will campaign to improve services and the sexual health for all people in Thailand.

The People



1. Rak Kummoonla, farmer and public health volunteer in Chiangdao.

“HIV and AIDS is a health problem in my community. There are several ethnic minority groups in the area. Different cultures and languages are barrier’s preventing them from understanding about HIV and AIDS and preventing transmission from mother to child.”

2. Max*, aged 17, lost his parents and is now living with grandmother at Rongwao village, Chiangmai.

“At youth camps I attended they asked us to do group work and present our thoughts about safe sex, sexually transmitted diseases, and HIV and AIDS to the others. It opened up my world; knowing more friends and people.”

3. K*, youth volunteer living with HIV.

“Sometimes it’s a tough situation for teenagers like us, who live with HIV. We have to hang out with friends. It’s hard to explain to them why we have to take medicines everyday and what the medicines are for.”

4. Prapatsorn Kansarn, health worker, San Pa Tong Hospital, Chiangmai Province.

“AIDS is not a problem of a particular person, it’s a problem of the entire society. It can seem overwhelming, but if everyone joins hands, we’ll be able to deal with it more effectively. If a child is diagnosed with HIV infection sooner, we’ll be able to start treatment in time. If the child doesn’t get infected, his or her parents will feel much relief.”

*Names changed to protect identities.

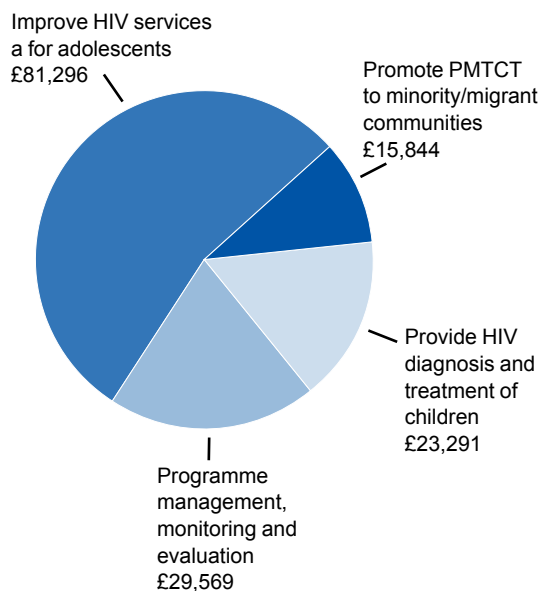
Photo credits: All photos Phawat Wichainarong.

Projects Direct > Make a direct difference

Projects Direct offer you the chance to change lives. To join forces with people and partner organisations worldwide. To know exactly where your money's going. And, through project reports, to see change as it happens. Transforming schools, protecting communities against disaster, helping families to make a living – whatever the project, it's your chance to make a direct difference.

The Budget

Total £150,000



Thailand: country profile



Population: 67 million
Development: 87th (of 182) on the HDI²
GDP per capita: \$8,135 (UK GDP per capita \$35,130)
Percentage of HIV positive people with access to anti-retroviral treatment: 61%³. Government health expenditure per capita: \$170 (UK expenditure \$2,434)³. Health expenditure as a percentage of total government expenditure: 11.3 (UK expenditure 16.5%)³.

Source: All statistics are from the UNDP Human Development Report 2009/10, unless otherwise stated. ²The UNDP Human Development Index (HDI) is a composite measure of three dimensions of human development: life expectancy, education and standard of living. ³World Health Organisation World Health Survey, 2009.

Countries needing your support:

Bangladesh, Bolivia, Gaza, Haiti, India, Kenya, Liberia, Mali, Nepal, Niger, South Africa, Sri Lanka, southern Sudan, Tanzania, Thailand, Vietnam, Yemen, Zambia, Zimbabwe.

Contact:

Oxfam House
John Smith Drive, Cowley,
Oxford OX4 2JY
Telephone: 0300 200 1300

Oxfam in Scotland
207 Bath Street,
Glasgow G2 4HZ
Telephone: 0141 285 8873

Registered Charity No. England & Wales 202918, Scotland SC039042.