

Executive Summary

Monitoring and Evaluation Research on Model Development and Redefine Mechanisms for AIDS Prevention and Alleviation in Youth and Other Most At Risk Population (Sex Worker)

Sexual risk behavior is an important factor attributed for transmission of sexually transmitted diseases and AIDS and was reported in 72,090 cases or 84 percent of people who died from AIDS. Also, service employee¹ is an occupation related to spreading of sexually transmitted infections (STIs). Report in 2008 showed that about 1.8 percent of service employees were diagnosed with sexually transmitted diseases and about 18% of individuals who suffered from STIs were service employees. In addition, 14.5 percent of male patients with STIs noted that they contacted with service employee. One reason that had impact on the control of STIs might be affected from the reform in the year 2002 and this impact was also on service employees because STI service was changed from a special private service to a routinely open medical service.

Service employees belong to a close group in the community (i.e. a pocket of population at risk) and are not accepted socially or legally. Lack of research, tool development and strategies makes it difficult to access and provide information as well as health care services to this segment. Behavior modification for this group is also difficult. Sex-related business has changed its format from an old-fashioned direct service to an entertainment business that was distributed both in urban and rural areas. Result of all reasons made it was likely that the use of condoms among service employees reduced to about 89 percent in Bangkok in the year 2004. Male service employees belong to a particular group that could provide services to both men and women. Male service employees who had anal sex were in a group with risk behavior and HIV prevalence was as high as 28 %. One major problem of male service employee was the need for high lubricant in condoms.

Health Systems Research Institute (HSRI) had funded the Research Centre for Health Economics and Evaluation (ReCHEE) at Faculty of Public Health, Mahidol University to conduct a project on the monitoring and evaluation of projects under the second strategy on HIV/AIDS prevention among youths using an action research approach. Service employee was one of seven target groups that were financially

¹ “service employee” was formerly called “sex worker”.

supported from HSRI to conduct a one-year project named “Party Cooperation Project for AIDS Service (project code 51-061)”.that was ended in May 2009. This project covered 15 areas in eight provinces (Bangkok: Empower - Swing - libertarian folk/ Samutsakhon. libertarian folk/ Pattaya: Sister Swing/ ChiangMai: Empower - M-Plus Violet House/ ChiangRai: Empower/ Tak: Empower/ Phuket: Empower - Andaman Power blue sea, under the rainbow and UbonRatchathani: Empower).

The objectives of the monitoring and evaluation project among service employees conducted by ReCHEE were 1). to conduct a monitoring and evaluation on mechanisms of campaign to prevent HIV/AIDS among service employees based on the achievement followed the objective of project using qualitative indicators, the consolidation and strengths of the network and the appropriate patterns for AIDS prevention among service employees in process and product or output, 2) to build understanding and capabilities in the monitoring and evaluation and create the sense of participation and ownership among partners in public sector, communities, academics and businesses and 3) to present results and recommendations for policy development on patterns and mechanisms for HIV/AIDS prevention campaigns among service employees.

Methodology : Qualitative data were collected from the interview of the main fund recipient which was the Empower Foundation and from focus group discussion of main leaders who had been trained under the project and still worked in the project area and from service employees who were working in the same area of the main leaders. The collection of quantitative data were also performed among the target groups including the main leaders and service employees in the project area. Information was gathered from document review, report on project evaluation and from related individuals using questionnaires and focus group process. The consideration was based on the content of the evaluation followed the main indicators of the project. Project Evaluation process was performed according to project management process classified as “Input, Process, Output, Outcome and Impact Evaluation”. There were 57 main leaders and 160 target service employees (altogether 217 persons combined) from Bangkok, Chiang Mai, Ubonratchathani and Phuket.

Target service employees: There were 37 males and 123 females with average age of 27.9 years, About 40 percent of them had highest education in primary school and 27 percent were employees. Average household income was 7,998 baht and one third of them reported having not enough income and having debt. About 84 percent of target service employees received information on health via television (45.6 percent) and from health personnel (41.3 percent). Average age of the first sexual activity was 17.4 years and 20 percent of them had sexual relationship with colleagues (service employees). Nearly all of them had sexual activities during the previous 6 months; 60 percent used condoms every time when having sex but about 12 percent reported never used it.

Knowledge on AIDS among target service employees: Almost all (96.9 percent) could answer that using condom could prevent AIDS. About 74 and 67 percent could respectively answer that having one sexual partner without HIV could prevent AIDS and mosquito bite could not transmit HIV. About 80 percent correctly answered that having meal or sharing bathroom with an HIV-infected person would not be infected with HIV. About 82 percent could answer that people who looked strong or healthy may be a person infected with HIV. About 72 percent knew that there was medicine that could inhibit HIV. About 90 percent had correct answer that HIV-infected individuals could participate in community activities and also know that result from blood test was the confirmation of having HIV infection. Surprisingly, only about 65 percent could correctly answer that HIV could not be congenitally transmitted.

Awareness on AIDS among target service employees: About 78 percent of them knew that there was AIDS epidemic in Thailand, 65 percent knew that AIDS is a fatal non-curable disease, 88 percent realized that having sex without properly protection was the risk of HIV infection, 90 percent realized that they should use condoms every time of having sexual activities to ensure the prevention of HIV, 87.5 percent realized that anyone had a chance of contacting HIV when lack of knowledge on AIDS and behave improperly to prevent HIV.

Awareness on AIDS among target service employees (from common instrument): About 77 percent of target service employees ever had blood test for HIV. About 72 percent of target service employees believed that there was no curative medication for AIDS, 82.8 percent thought that HIV-infected individuals could work and live normally in community, 94.2 percent were aware that using a condom every time of having sex to prevent HIV, 69.2 percent thought that using a condom every time of having sex was a way to express love to one another, 66.2 percent believed that using a condom every

time of having sex was a way to express trust to one another, about half thought that having sex with HIV-infected person and using a condom was not a risk of HIV infection. 40.4 percent believed that people who lived in remote area had risk of HIV infection, 43.6 percent thought that in the community there were persons who were living with HIV/AIDS and 85.9 percent believed that having sex without using condoms were at risk of acquiring AIDS.

Assessment of risk of HIV infection among target service employees: About two-thirds had been asked about risk behaviors on HIV infection. About 45 percent reported that they could know whether the persons who they were having sex with having sex with someone else before. About 45 percent of target service employees were confident that they could refuse unsafe sex at any time and about 55 percent ever had discussion with their partners seriously on HIV/AIDS prevention. About 84 percent reported that condoms were always available for them to use in any situation, 73 percent answered that having sex with people considered to have good health could be infected with AIDS. More than 80 percent thought that having sex with multiple partners increased risk for AIDS and having blood test for HIV before marriage could reduce the risk of HIV.

Skills on practice to control and prevent HIV/AIDS among target service employees: In the previous six and three months prior interview, most of them used condoms when having sex. In the last sexual activity, about half having sex without condom and asked their partners to have ejaculation outside. Most people could refuse clients who did not want to use condoms. Most knew health facilities where there were consultations on AIDS and STIs.

Group of main leaders: There were 13 males and 42 females with average age of 31.4 years. About one-third finished junior high school and about 28 percent were employees. Average household income was 12,400 Baht and most of them reported having enough money for expense but having no saving. Most of them received information on health via television (68.4 percent) and from health personnel (54.4 percent). Average age of the first sexual activity was 18 years and 23 percent had sexual relationship with colleagues (service employee). Nearly all of them had sexual activities during the previous 6 months, 84 percent used condoms every time when having sex but about 7 percent reported never used it.

Knowledge on AIDS among main leaders: Almost all (98 percent) could answer that using condom could prevent AIDS. About 90 and 86 percent could respectively answer that having one sexual partner without HIV could prevent AIDS and mosquito bite could not transmit HIV. About 95 correctly answered that having meal and 90 percent answer that sharing bathroom with an HIV-infected person would not be infected with HIV. About 83 percent could answer that people who looked strong or healthy may be a person infected with HIV. About 86 percent knew that there was medicine that could inhibit HIV. About 97 percent had correct answer that HIV-infected individuals could participate in community activities and also know that result from blood test was the confirmation of having HIV infection. Surprisingly, only about 63 percent could correctly answer that HIV could not be congenitally transmitted.

Awareness on AIDS among main leaders: About 97 percent of them knew that there was AIDS epidemic in Thailand, 53 percent knew that AIDS is a fatal non-curable disease, 93 percent realized that having sex without properly protection was the risk of HIV infection, 93 percent realized that they should use condoms every time of having sexual activities to ensure the prevention of HIV, 95 percent realized that anyone had a chance of contacting HIV when lack of knowledge on AIDS and behave improperly to prevent HIV.

Awareness on AIDS among main leaders (from common instrument): About 75 percent of target service employees ever had blood test for HIV. About 74 percent of target service employees believed that there was no curative medication for AIDS, 66.7 percent believed that using a condom every time of having sex was a way to express trust to one another and 93 percent believed that having sex without using condoms were at risk of acquiring AIDS.

Assessment of risk of HIV infection among main leaders Most of them had been asked about risk behaviors on HIV infection. About 55 percent of target service employees were confident that they could refuse unsafe sex at any time. About 73 percent reported that condoms were always available for them to use in any situation. More than 96 percent thought that having sex with multiple partners increased risk for AIDS and having blood test for HIV before marriage could reduce the risk of HIV.

Skills on practice to control and prevent HIV/AIDS among main leaders: In the previous six and three months prior interview, most of them used condoms when having sex. Most people could refuse clients who did not want to use condoms. Most knew health facilities where there were consultations on AIDS and STIs.

Innovation on HIV/AIDS prevention: Innovation was the media that was different from previous one and combined with cultural art in the form of outreach kit which was aimed to create attraction. Another innovation was the network itself which initialize the knowledge sharing among areas. . Process of operating the network of service employees consisted of 3 phases: 1) network builder from collection of people working and having similar concept to work together on HIV/AIDS prevention, 2) the development of strengthened network consisted of capable people, 3) The expansion of idea about networking. The last innovation was development of volunteers from service employees and the opportunity to share knowledge and learning from other areas.

Strengths of the network: The development of network and project was started from the planning phase for jointed operative plan that could be applied and adjusted for different areas.

Sustainability of the network: Sustainability was depended on success of the combination of treatment and prevention on HIV/AIDS combined with the continuous capacity building of main leaders together with the participation of local service employees from the community who could afford themselves to create understanding and attitudes of agencies in the area. Career development, the recognition building for inclusion in social security service, work protection and development of occupational health laws in the workplace were important planned activities to be performed in the future.

Problems and obstacles: The unclear condition of how to work with the community, lack of media or campaigns that had benefit or were easy to reach and understand was substantial obstacles that could be solved by having good medias, good cooperative persona and the encouragement of people in the community to participate.

Summary of policy recommendations: 1) The Ministry of Public Health should support projects on AIDS prevention and control among service employees by focusing on giving knowledge on occupational safety and protection from the occupation. 2) Police, Ministry of Justice, Ministry of Health and Ministry of Social Development and Human Security should together review and understand the laws, rules and regulations that limit problems between service employee, owned establishments and government officials. 3) Government and the Ministry of Public Health should have a policy on having comprehensive and friendly STI clinics operated of at least one clinic per province and the participation of service from service employees was suggested.

Summary of academic recommendations: 1) The distribution of knowledge and correct attitudes on HIV/AIDS must be available to service employee and main leaders. 2) The development of negotiation skills is an important activity that should be performed continuously. 3) Knowledge sharing on HIV/AIDS should be operated using appropriate media and channels. 4) Stress on the development of innovations on the prevention of AIDS such as new and different media, the supporting mechanism for the creation of service employee networks and encourage the knowledge sharing with other areas.

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