

Aids Epidemic in Thailand: Good News, Bad News, and a Warning

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The AIDS epidemic has taken its toll in Thailand. Between 1985 and 2006, an estimated 1,102,628 people (adults and children) were infected with HIV and 558,578 died of AIDS related complications (data from the Thailand A2 Team cited in AIDS Thailand, 2007). These numbers are large (*one is too many*). They represent a level of human tragedy and misery beyond measure. Nevertheless, Thailand's response to the AIDS epidemic has been one of the most successful in the world. Its no-nonsense, pragmatic approach to combating the disease prevented millions of new infections (Brown, 2003; UNDP, 2004). Because of past actions, reductions are now being seen in the number of people (adults and children) living with HIV, the number of adults (15+) living with HIV, the number of children (0-14) living with HIV, and the number of deaths of adults and children from AIDS (UNAIDS/WHO, 2006).

In addition, the number of new annual HIV infections in the general population continues to drop from its early 90s high (UNDP, 2004: 2; UNAIDS/WHO, 2006: 32). Moreover, rates of HIV infection among pregnant women have declined significantly from their highs in the mid-90s (UNAIDS/WHO, 2006a:6; UNAIDS/WHO, 2004:2). There has been a reduction in mother-to-child transmission of HIV (WHO, 2006). More good news: 75% of all HIV-infected pregnant women now receive AZT to prevent MTCT, virtually all children born to HIV-infected mothers receive drug treatment, and just over half of the 12,000 children needing antiretroviral therapy are currently receiving it (WHO, 2006).

Make no mistake, problems remain. Without

proper vigilance and action the situation could turn for the worse. About 1.4% of adult (15-49) Thais are living with HIV (UNAIDS, 2006). 15,000-20,000 Thais are becoming HIV positive each year (Thailand A2 Team, 2005). After dramatic declines from their highs in the early 90s, HIV sentinel surveillance prevalence rates for sex workers in major urban areas are showing signs of an increase: 2.6 in 2002, 3.6 in 2003, 4.3 in 2004 (UNAIDS/WHO, 2006a: 6). Prevalence rates among IDUs (injecting drug users) in and outside of major urban areas continue to be unacceptably high (UNAIDS/WHO, 2006a: 6). This fact, coupled with a "crackdown" on alleged drug dealers, is setting the stage for a new spread of the virus (cf. UNDP, 2004: 70). Some evidence indicates that the majority of drug injectors that purchase sex in Thailand use a condom (MAP, 2005: 9). But many do not. Consequently, the spread of the HIV virus from IDUs to the general population remains a serious threat.

Indicative of an upsurge in unprotected sex, STI (sexually transmitted infection) patients in major urban areas have increased sharply, from 5.1 in 2002 to 11.6 in 2004 (UNAIDS/WHO, 2006a:6). HIV prevalence among MSMs (males who have sex with males) in major urban areas remains very high (UNAIDS/WHO, 2006a: 7). The number of indirect sex workers is on the rise, making prevention efforts more difficult. The epidemic is shifting to mobile populations (e.g., migrant workers) that are hard to reach with intervention programs (UNDP, 2004: 70). A recent and disturbing trend is that a large percentage of new infections are occurring in people considered to be at low risk of infection. In 2004, 38% of the reported cases were female (CDC online database). In 2005, 43% of new infections occurred among the heterosexual population (Gouws et al., 2006). Heterosexuals, married women, and young people are increasingly becoming at risk of infection.

A persistent problem is that stigma and discrimination continue to undermine efforts to

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stop the epidemic in its tracks (UNDP, 2004: 71). With proper political leadership, attitudes could change. Unfortunately, political leadership on the HIV/AIDS issue has severely waned. Complacency has set in. In 2001, the Thai Working Group on HIV Projections sounded a prescient warning (2001: x): “Unless prevention efforts are sustained at a high level, the epidemic could quickly gain momentum and start to increase rapidly.” Those words remain true.

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