

Rapid Assessment of Sexual Health Needs of Males Who Have Sex With Males in Laos and Thailand

Conducted for Pact by Naz Foundation International

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Background

Sex between males occurs in all societies, often within complex dynamics and frameworks along a spectrum of masculinities.

Key factors that impede sexual health promotion among males who have sex with males:

- **Criminalisation, human rights abuse, social exclusion, and stigma**
- **Denial**
- **Population estimations poorly understood**

- **Lack of knowledge and understanding of the diversity of frameworks of male-to-male sex**
- **Cultural values of shame, dishonour, compulsory marriage and dominant masculinity**
- **Inappropriate terminology**
- **Concepts of gender that invisibilise gender variance**
- **Frameworks of dominant masculinity**

Methodology

- Literature review
- Identify key informants in-country
- Identify key agencies and individuals
- Discussions with donors and current implementing agencies
- Site visits and observational analysis

'Hotspots' visited

Lao PDR

- Luang Prabang
- Savanakhet
- Vientiane

Thailand

- Bangkok
- Chiang Mai
- Pattaya



Male-to-male sex in Lao PDR and Thailand

- Sexual diversity and gender variance
- Multiple frameworks of male-to-male sex
- High risk sexual activities
- Bridging behaviours
- Significant levels of female sexual partners

HIV risk and vulnerability

- **Poverty**
- **Gendered frameworks**
- **High levels of multiple partners**
- **Low condom use**
- **Anal sex as a predominant sexual activity**
- **Both male and female partners**

- **Low access to STI treatment**
- **Stigma, discrimination and social exclusion**
- **Low levels of self-esteem**
- **Disempowerment of vulnerable populations**

Common Findings

- **Very little knowledge about male-to-male sexual behaviours, risk practices, and health seeking behaviours.**
- **Very little understanding of the contexts, dynamics and social constructions of male-to-male sex.**
- **No epidemiological data regarding HIV infection amongst MSM in Lao PDR, with very little data in Thailand.**

- **A lack of HIV/AIDS interventions focusing on the sexual health needs of males who have sex with males.**
- **A lack of technical skills and capacity for appropriate interventions.**
- **A lack of investment impeding increasing coverage and scaling up interventions.**
- **Very little advocacy work to address stigma and discrimination.**

Lao PDR

Total Population (end 2001): 5,403,160
US Census Bureau

Country HIV and AIDS estimates, end 2003

Adult (15-49) HIV prevalence rate	0.1% (range: <0.2%)
Adults (15-49) living with HIV	1700 (range: 550-3300)
Adults and children (0-49) living with HIV	1700 (range: 600-3600)
Women (15-49) living with HIV	<1000
AIDS deaths (adults and children) in 2003	<200 (range: <400)



Key findings

- **Currently, Lao can be considered a low HIV prevalence country (less than 0.1%).**
- **However a range of factors exist which can increase increase the prevalence rate amongst high-risk and vulnerable populations, particularly males who have sex with males.**
- **Multiple frameworks of male-to-male sex - most visible is the gendered framework of kathoeyes.**
- **Data from recent studies indicate two highly vulnerable MSM populations: kathoeyes and male sex workers.**

- **Relatively low condom use, low lubricant use, multiple male partners, low access to STI treatment, anal sex predominate sexual practice.**
- **Alcohol driven activities**
- **Male sex workers along with partners of male sex workers and kathoeyes, also have sex with female sex workers and other women.**
- **STI self-treatment.**
- **No information on HIV prevalence and MSM.**

MSM interventions in Laos

Only two small scale interventions in Vientianne, both focused on kathoeys, and both relying on peer education.

These are implemented by PSI Lao and Lao Youth AIDS Prevention Project under Lao Buddhist Association.

Gaps

- **Current interventions are small scale, focused only on peer education, and only based in Vientiane.**
- **Quality STI treatment services appropriate to the sexual practices of MSM, particularly in regard to anal issues.**
- **Access to ARVs.**
- **Access to support and care services.**
- **Appropriate skills, knowledge, and capacity.**
- **Technical assistance and support.**

Issues

- **Social tolerance but not acceptance: stigma and discrimination of feminised males.**
- **Government policies preclude NGO/CBO development.**
- **Male-to-male sex against the law.**



- **Very little knowledge on male-to-male sexual dynamics and frameworks**
- **Little understanding of the constructions of male-to-male sex**
- **Rule of law problematic and human rights**
- **Government denial and thus lack of will**
- **Interventions only focused on kathoey**
- **Lack of epidemiological data**
- **Lack of appropriate technical support**
- **Migration and poverty**

Thailand

Total Population (end 2001): 63,584,000

US Census Bureau

Country HIV and AIDS estimates, end 2003

Adult (15-49) HIV prevalence rate	< 1.5% (range: 0.8% - 2.8%)
Adults (15-49) living with HIV	560,000 (range: 310,000-1,000,000)
Adults and children (0-49) living with HIV	570,000 (range: 310,000-1,000,000)
Women (15-49) living with HIV	200,000 (range: 110,000-370,000)
AIDS deaths (adults and children) in 2003	<58,000 (range: 34,000-97,000)
'MSM' and HIV	17.3% among 'MSM' in central Bangkok



Key findings

- **While general HIV prevalence is stated to be about 1.5%, amongst MSM in Bangkok this has been found to be 17.3% (2003).**
- **However, in 1996, HIV prevalence amongst male sex workers in Chiang Mai was found to be 16.5%.**
- **A range of studies show a very wide variation in percentages of young men reporting same-sex experiences - from under 2% to over 30%.**

- **This variation arises partly from the gendered framework of male-to-male sex, where masculine males who have sex with kathoeyes do not see themselves as having sex with other males.**
- **Multiple frameworks of same-sex behaviours, where the most visible tend to be kathoey-based.**
- **Significant levels of male commercial sex work in tourist areas: Bangkok, Pattaya, Chiang Mai.**
- **Relatively low condom use, low lubricant use, multiple male and female partners, low access to STI treatment, anal sex predominant sexual practice.**

MSM interventions in Thailand

Very few, and implement by community-based organisations.

Bangkok

SWING

Working with male, transgendered and kathoey sex workers with clinical referrals along with pre and post-test counselling

Rainbow Sky

An LGBT community support organisation, conducts outreach and has links with clinical services

Chiang Mai

M-Plus

CBO working with a range of MSM networks including male sex workers - has a drop-in centre and conducts outreach. Also drop-in clinic with referral services and pre and post test counselling.

New Friends

CBO working with HIV+ve MSM

Healthy Gay

a web-based intervention

Gaps

- **No services in Pattaya,**
- **Limited services in Bangkok and Chiang Mai with low coverage**
- **Few STI services specific to the needs of MSM.**
- **No support and care services, except for a small project in Chiang Mai.**
- **Access to ARV treatment programmes very limited.**
- **Appropriate skills, knowledge and capacity**
- **Limited technical assistance and support**

Issues

- **While these implementing CBOs have nascent capacity, there has been very limited investment in skills and capacity building along with technical support.**
- **Confused government policies between Ministry of Public Health and Ministry of Interior.**
- **Little knowledge understanding of the constructions, frameworks of male-to-male sex, and behavioural practices.**

- **Low investment.**
- **Lack of technical support.**
- **Stigma and discrimination**
- **Migration and poverty**

Recommendations for Lao PDR

- **PSI Lao scale up their activities in Vientiane in collaboration with Lao Youth AIDS Prevention Society to include drop-in centres, and outreach activities.**
- **The methodology should include community-building and mobilising strategies as well as access the range of sub-populations of MSM.**
- **PSI Lao to develop similar programmes in Luang Prabang and Savannakhet.**

- **PSI Lao or FHI Lao should implement male sexual health clinics in all three key cities accessible by kathoey, male sex workers, and other MSM.**
- **Burnet Institute should be supported to conduct a range of behavioural, epidemiological and sociological studies among different sub-populations of MSM in the three key cities (and elsewhere).**
- **Increased advocacy by all agencies is necessary.**
- **An appropriate training agency needs to be recruited to provide on-going training, skills and capacity building.**

Recommendations for Thailand

- Invest in capacity building, training, technical assistance and support for existent agencies to enhance their current activities and provide a skills base towards increasing coverage.

Increasing efficacy and coverage in Bangkok

- SWING to be supported to expand their activities to include:
 - massage parlours in Silom/Surawong, Sukhumvit and Din-Daeng
 - outreach in Pak Kalong Market and surrounding canal and river areas

- **Rainbow Sky in Bangkok should be supported in skills building in outreach activities towards enhancing its capacity to expand its current coverage, along with adding new sites.**
- **Funding should be provided to this agency to conduct a needs assessment among its beneficiaries.**
- **The agency should expand its current education work in local colleges, incorporating male-to-male sexual health messages into its generic HIV/AIDS prevention work.**
- **treatment support and care services for positive MSM needs to be developed in the city.**

Increasing efficacy and coverage in Chiang Mai

- **Training in outreach skills to maximise coverage in areas already worked in by M-Plus.**
- **M-Plus should be supported to develop work relating to IDU, MSM and sex work near the University.**
- **Develop an HIV/AIDS response to MSM in Lamphoon.**
- **Increased support to New Life Friends Club to enhance its capacity and extend its services regarding support and care for positive MSM.**

Developing an MSM HIV/AIDS intervention in Pattaya

While currently there is no such intervention in Pattaya, PSI Thailand is planning an HIV/AIDS prevention programme for kathoey.

- **SWING supported to develop an intervention among male sex workers in conjunction with the PSI initiative.**
- **SWING should also address the needs of clients of male sex workers**

Services framework

