Results from the Stigma Index 2.0

Experiences of young people living with HIV

THAILAND 2022-2023

Thai Women Living with HIV Foundation
Thai PLHIV Stigma Index Task Force Committee

What is the People Living with HIV Stigma Index 2.0?

The People Living with HIV Stigma Index is a standardized tool to gather evidence on how stigma and discrimination impact the lives of people living with HIV. It was developed to provide much-needed data and evidence that could be used to advocate for the rights of people living with and affected by HIV.¹

In Thailand, the People Living with HIV Stigma Index 2.0 was conducted from August 2022 to January 2023. Previously, a version of the People Living with HIV Stigma Index was implemented in 2009-2010.

A total of 201 young people under the age of 25 and living

with HIV participated in the study. Almost half of these young people also identified as being part of one or more key population groups (26%, 93 people). Most of the young people interviewed in the study were from Bangkok and Northern Thailand.

See https://www.stigmaindex.org for further details.

"You need to have positive thinking. Management of HIV has come a long way ... people living with HIV can have children and proper families ... [With] ARV drugs, we can live with this disease and behave just like other people in every way ... HIV is not as scary or as deadly as it used to be.

(007-50, female, 24 years)

"My advice for people living with HIV is to build confidence in themselves. Having the virus doesn't diminish our potential. We can still do things normally like others. One should set clear goals, create aspirations, and have hope ... I'm someone who doesn't want things to end before achieving a goal. I have goals, like wanting a good job, and I try to take care of myself."

(020-50, male, 23 years)

Youth leadership in documenting experiences of stigma and discrimination in **Thailand**

Communities led this research and will use the evidence to advocate for improved policies and practices to reduce stigma. One young person was involved in the national steering group and community consultations for the Stigma Index 2.0 in

Thailand. The Thai Stigma Index Task Force Committee led the research process. It includes community leaders from people living with HIV networks, sex workers, young people aged 18-24 years, transgender people, men who have sex with men,

people who use drugs, and migrant workers. In all 24 young people were involved in the process as peer interviewers (13 males, and 11 females, as per sex at birth).

The Thai Stigma Index Task Force is community-led and collaborates with the Thai Women Living With HIV Foundation, the Department of Disease Control, UNAIDS and GNP+, who all share ownership of the project.

How was the research analysed?

A technical working group guided the research analysis. The analysis was led by a team at the Faculty of Medicine and Research Institute for Health Sciences at Chiang Mai University and involved the Institute for Population and Social Research at Mahidol

University, UNAIDS and Watipa Australia. A community workshop with over 70 participants was convened in September 2023 to review the data and discuss emerging themes from the research. One young person was involved in the national steering group, and several youth representatives from Thai network of youth living with HIV, Independent youth activists and youth staff of NGOs participated in community consultations for the Stigma Index 2.0 in Thailand.

Who did we talk to?

Study participants were people who self-reported that they were living with HIV and had been aware of their HIV status for <u>at</u> <u>least</u> 12 months, were over the age of 18 years, were mentally sound and capable of providing consent to participate, and spoke Thai, Laos, Burmese or Cambodian.

A total of 201 young people living with HIV participated in the study, which was 8% of the total sample. Almost half of these young people also identified with one of the key population groups (26%, 93 people). This included young men who have sex with men (42, 21%), sex workers (24, 12%), people who use drugs

(16, 8%) and transgender young people (11, 5%). A total of 119 young males and 82 young females participated in the study (recorded as sex at birth).

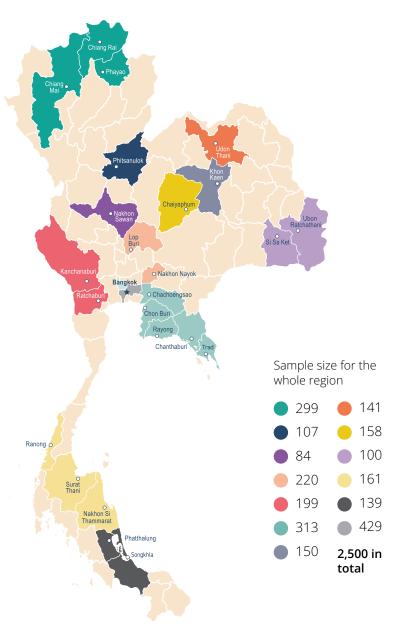
A total of 25 provinces from all 13 health regions were selected and participated. In all, 2,500 participants were recruited through community venues and social networks.

Where was the research done?

Most of the young people interviewed in the study were from Bangkok and Northern Thailand; Table 1 shows a more specific breakdown across health regions.

Table 1.
Breakdown by health region of young people living with HIV who participated in the Stigma Index 2.0 in Thailand

Health region	Frequency	%
1	32	15.9
2	6	3.0
4	18	9.0
5	25	12.4
6	12	6.0
7	11	5.5
8	9	4.5
10	3	1.5
11	11	5.5
12	14	7.0
13	60	29.9
Total	201	100.0



Main findings in relation to young people living with HIV

The main findings of the People Living with HIV Stigma Index 2.0 in Thailand in relation to young people living with HIV were that:

- Approximately one-quarter of all participants had experienced stigma in their community in their lifetime. Nearly 5% reported experiencing it in the previous 12 months. A total of 9% of young people reported experiences of stigma and discrimination in the community in the previous 12 months.
- Of the 188 participants who reported experiencing stigma in the community in the previous 12 months, 22% had interrupted or discontinued
- antiretroviral therapy (ART). In comparison, 9% who had not experienced stigma in the community in the previous 12 months had interrupted or discontinued ART. About 10% of all participants reported having ever interrupted or stopped ART. Treatment interruptions were highest among young people in the 20-24 age group (25%).
- About 16% of all participants reported experiencing stigma within healthcare settings in the previous 12 months. This was higher when analysing only the responses from young people (25%). More than half of the young people aged 18-19 interviewed in Central

Thailand reported experiencing stigma in the previous 12 months (seven from the 13 people). Among 20-24 years olds, approximately two-thirds of young people who responded in Northern and Northeastern Thailand reported having experienced stigma in the previous 12 months (11 from 34 people, and seven from 21 people, respectively). It is important to note that participants often described experiencing stigma in parts of the health system not directly related to HIV care, such as reproductive health or emergency departments.

"It wasn't a nurse in the HIV clinic. I met a nurse downstairs [in another clinic] ... who checked my card and told me that 'It's impossible to have a child, how could it be possible with this [HIV-positive] condition?' I mean, you're a nurse, and you're saying this to me?"

(007-50, female, 24 years)

"Once, I [had] an accident and went to an emergency room. The healthcare providers knew that I was HIV positive. Some of them looked at me and said the equipment that had been used with me couldn't be reused, so I had to bear the cost for that. I didn't know if it was right, but I had to pay extra."

(MSM003, man who has sex with men, age 23 years)

- Nearly 40% of all participants reported experiencing internalized stigma. Approximately 39% of all participants answered that they felt ashamed of being HIV positive, and 75% found it difficult to tell others that they were living with HIV. Internalized stigma was felt even more strongly among young people, with nearly half indicating they felt ashamed of being HIV positive (99 young people, 49%) and 80% answering that it was difficult to tell people that they were living with HIV (160 young people). Over 80% of young men who have sex with men indicated that it was difficult to tell people about their HIV-
- positive status. Half or more of young people who sell sex, use drugs and young men who have sex with men indicated that they felt ashamed of having HIV.
- · Many participants noted that fears of how others would respond if they tested positive made them hesitate to get an HIV test. However, 53% of all participants and 69% of young people interviewed responded that the time between when they thought they should first get an HIV test and the time they took one was less than six months. Indeed, 46% of young people indicated that they started ART immediately on the same day they were
- diagnosed with HIV, with a further 20% commencing within one month and 3% within six months.
- A higher proportion of young people under 25 years reported that their ability to cope with stress had been negatively affected by their HIV-positive status (61 from 201 people, 30%) than people living with HIV 25 years and older (397 from 2,307 people, 17%). Similarly, more young people indicated that their ability to achieve personal and/ or professional goals had been negatively affected by their HIV status (26%, compared with 17% of people 25 years and older).

"I have no definite dreams. I didn't feel that much about HIV when I was a kid, but when I grew up, I felt that my life was empty. It's like living in a continuous cycle. Honestly, I don't feel excited or surprised by anything anymore."

(016-50, male, 24 years)

 About 31% of participants reported effecting change and/or challenging stigma and showing resilience within the previous 12 months. Similar proportions of young people were challenging stigma, educating others, and participating in educational campaigns as people living with HIV 25 years and older.

"I think we need to have some boundaries. For instance, if someone has a negative impact on me, I won't engage with the person causing me problems ... If someone comes along and makes me feel worthless, I won't go near that person again ... If something is too toxic for my mental health, I shouldn't let it in."

(004-50, female, 21 years)

Implications and considerations

The results from the Stigma Index 2.0 in Thailand show the importance of disaggregating the evidence to best understand the experiences of young people living with HIV distinctly. It is important to identify the nuances, similarities, and variations across those experiences according to geographical context and other aspects, such as gender, sexual orientation, and association with one or more key population groups. Further research could go even further to identify the extent to which age, gender and/or association with one or more key population groups influence experiences of HIV-related stigma and discrimination.

The findings from the Stigma Index 2.0 for young people living with HIV suggest that:







Local culture and contextual differences may be important for understanding experiences of stigma, as well as opportunities to confront and reduce stigma for young people.

Healthcare workers need additional capacity and resources to provide inclusive and quality services from stigma for young people living with HIV. Attention and resources to inform and support young people in knowing their rights, developing communication skills, and making choices about disclosing their HIV positive status may help reduce internalized stigma and enhance adherence to ART.

Young people living with HIV are like all young people in Thailand. They have dreams and rights to love, desire, experience sex, have and care for families, learn and be educated, and develop careers and livelihoods as they choose. Supporting young people living with HIV to identify and achieving hopes for the future and continuing to effect positive change will strengthen the national HIV response in Thailand, as well as enable a bright future for young people in their whole selves as humans, where HIV is part of life but not the whole story.



For further information contact the Thai Women Living with HIV Foundation (TWLHF) or UNAIDS Thailand.

Mrs. Nipakorn Nanta

Thai Women Living with HIV Foundation (TWLHF)

314 Soi Somdej Phra Pinklao2, angyikhan, Bangplad, Bangkok 10700

Email: nantanipakorn@gmail.com

Patchara Benjarattanaporn, PhD **UNAIDS Country Director, Thailand**

10th Floor, Block A, United Nations Building, Rajadamnern Nok Avenue, Bangkok 10200, Thailand

Email: Benjarattanapornp@UNAIDS.org

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