HIV/TB Interventions among Migrants in Thailand: A Community-Based Approach

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Migrants working in a Fishing Pier, Ranong
Why migrants & HIV/ TB Control in Thailand?

- 1:3 registered:unregistered migrants in Thailand
- High TB/HIV co-infections – 13-30% of TB patients (esp. north of Thailand) & similar figures among migrant populations
- TB prevalence among migrants is estimated to be Higher than among Thai populations
- HIV High-risk behaviour – SW (HIV infection rate 6-28% in 2005), Fishermen (infection rate 6-9% in 2006)
- Migrants have poor/no access to health care/TB drugs
- Death rate among migrant TB/HIV patients is ~100%
Harsh living condition of migrant community in Maesot, Tak
Health Volunteers/Workers

Community Leaders

HIV/TB Patients

Support

BCC VCT HBC

DOT

Refer for treatment & lab

Refer & assist

World Vision

Advocate & coordinate

Self-referral

Government & Hospital

Public-Private Mix

Coordinate & Refer for DOTS

Advocate & coordinate

Train ID

Support

Mobilisation

Community Mobilisation
Improving HIV/TB access to migrants

Improving **community** health-seeking behavior & capacity

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Culturally-sensitive Messages on HIV & TB: Prevention, symptoms recognition, services availability & treatment incl. Volunteer training

Lower community stigma & discrimination

Early case Detection (HIV & TB) by community Members or volunteers

Community-based Referral to GO facilities

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VCT (Pre-test Counseling) By migrant counselors

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High Treatment Adherence (ARV & TB Treatment) & low MDR-TB

Monthly Meeting Among PLHIV or TB networks

Home visit Volunteers or DOT partner Identified for Daily (TB) or Weekly visits

Rigorous VCT &/or Pre-TB treatment Counseling by Migrant counselors

Treatment Prescription (PLHIV with TB Rx & TB patients With ARV)

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HIV Testing &/or TB Diagnosis

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NGO

GO

Patient

Community

Patient
Key messages

- **Donors** to encourage cultural and language sensitive Integrated health care and development approach

- **Community-based approach & Dual HIV/TB messages to reduce stigma** among communities & service providers and improve health-seeking behaviour

- **Compulsory cross-referral between HIV & TB** – increase case findings among PLHIV and TB treatment success

- **Provision of TB DOT** to all marginalised populations (PLHIV, registered and unregistered migrants, stateless Thais, etc) to help reducing TB prevalence in Thailand

- **Provision of ARV** to all TB patients to improve treatment success