

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 (Men who have sex with men)

The study on the development project of pattern & mechanism for AIDS prevention: The research project on control and evaluation of the development of pattern & mechanism for preventing AIDS problems in men who have sex with men (MSM) being the target group was a quasi-experimental study aimed to 1) Explore achievement of the project conducted among MSM while being awarded with the research funding supported by Sub-committee on AIDS prevention and control operation via Public Health Systems Research Institute (HSRI) based on the project's indicators related to knowledge, skills, and practice of the target group regarding AIDS prevention, operation of networks/ core persons in the project/ pattern of network mechanism development, coordination & transferring system for helping HIV-infected individuals and creation of network sustainability, management process of the project implementation, participation of network/ non-government organization/community alliance leading to mechanism development of AIDS prevention campaign in the community; and 2) To synthesize the results of knowledge captured from the operation to acquire academic and/or policy recommendations, as well as indications about practice guidelines or strategies for reducing HIV infection in the target group effectively and efficiently.

The assessed project mainly consisted of 2 projects: Project 1) The AIDS prevention campaign project for reducing new infection and the promotion for people living with HIV including MSM, male sex workers, lady boys, and lady boy sex workers (Project No. 51-071) conducted by the Rainbow Sky Association of Thailand (the main research funding recipient) in association with 17 network organizations nationwide in 7 provinces: Bangkok, Chonburi, Khon Kaen, Ratchaburi, Ubonratchathani, Chiang Mai, and Udon Thani including 3 northeastern network organizations namely NET Foundation, SHARE, and community development project; Project 2) The AIDS prevention project among MSM in border area (Project No. 51-067) conducted by NET Foundation (the main research funding recipient) in association with SHARE and community development project in 6 districts of Ubonratchathani namely Detudom, Khemarat, Najaluay, Boondarik, and Nam Khun.

There were 3 groups of samples: Group 1) Research funding recipients included project manager, project officers, project coordinators, and accounting & finance officers; Group 2) Core persons/ outreach workers and project volunteers (n=464 persons); and Group 3) MSM, male sex workers, ladyboys, ladyboy sex workers being the target group selected by stratified sampling from 7 targeted provinces (n=416

persons). Field data collection of the samples in both projects had been conducted under qualitative methods (e.g. in-depth interview and focus group discussion) and quantitative methods (e.g. questionnaire). Quantitative data were analyzed using frequency, percentage, mean, and standard deviation whereas qualitative data were analyzed using content analysis.

Results

Results on quantitative data acquired using questionnaire with Group 2 (Core persons/ outreach workers and project volunteers) and Group 3 (MSM, male sex workers, ladyboys, ladyboy sex workers).

Group 2 Core persons/ outreach workers and project volunteers – There were a total of 464 persons (448 core persons and 16 outreach workers). About 60% of them aged between 20-29 years with mean(sd) age of 25.5(7.5) years (ranged 13 to 60 years). About 30% acquired Bachelor's Degree. About 90 percent were single while 7 percent reported of married status, about 90 of whom were male reported being living together with their partners (reported openly living more than secretly living with partners their). Among those who reported living with their partners, about 36% reported had been living together for 1-2 years and 32% living together for 5 years or more (average 3 years). Overall, about 37% were employees and 33% were students. Their reported income ranged from 5,000 to 10,000 baht a month and 43% of them reported having sufficient income with no saving. About one-quarter had to take care of their dependents (average 2 persons).

Concerning their acknowledgement of service and transfer information, most (88.7%) of them had received health information. The information was mostly provided by public health officers accounting for 54.7%, followed by TV accounting for 49.0%, and publishing media (leaflet/newspaper) accounting for 38.7%.

Operation Results by Indicators

2.1 Core persons training – The training held for targeted core persons could be achieved by 100.0% under the AIDS prevention project in MSM in border area whereas the AIDS prevention campaign project for reducing new infection and the promotion for people living with HIV in MSM, male sex workers, ladyboys, and ladyboy sex workers could be achieved by 88.73%.

2.2 Process/mechanism/innovation of the operation

2.2.1 Process/mechanism of the operation

- ❖ Project code 51-067 of AIDS prevention in MSM in border area
- ❖ The operation process started from searching and meeting with group leaders who were core persons in the area and key persons of the operation. The general knowledge training for building area core persons was provided for MSM who voluntarily attended the activities following the persuasion of leaders. Then, potential persons who had volunteer mind and could provide knowledge were selected and trained to be consultants or core persons for knowledge transfer. Knowledge

Management (KM) forum for core persons was performed starting from one-by-one meeting with friends, friends met at drop in center or in the community.

❖ Project code 51-071 was implemented to build core persons who would enter the operational area proactively in team work as the following process 1) Finding capable MSMs for training to be core persons, 2) Selection of MSMs with leadership to be trained for fieldwork core persons, 3) Teamwork Operation conducted by 1 project leader and 1 outreach worker in responsible area, 4) Meeting arrangement for learning and problem solving at work as well as providing role play for new core persons and assigning jobs to fieldwork core persons, 5) Arrangement of occasional activities in association with local organizations, non-government organizations, and concerned persons, 6) Service system development in association with personnel at the service center, and send clinic volunteers from 5 organizations namely M-plus, Sister, the Thai Red Cross AIDS Research Centre, Ratchaburi Rainbow Group, Violet Home, and Rainbow Sky Association for facilitating services for the target group, as well as giving advices in order to promote satisfaction and friendly environment for clients, 7) Condom distribution and its supporting system was developed and supported by founding condom fund that was supported by 4 organizations namely M-plus, Sister, Ratchaburi Rainbow Group, and Rainbow Sky Association, as well as supplying adequate equipment.

2.2.2 Innovation

❖ Project code 51-067 of AIDS prevention in MSM in border area – Innovation for the operation included the development aiming to build core persons in the community and provide them with knowledge for 4 times or more and utilize knowledge in accordance with community daily life, to provide services and complete activities at the drop in center and find budget for acquiring condoms for distribution from donation.

❖ Project code 51-071 of the AIDS prevention campaign project for reducing new infection and the promotion for people living with HIV in MSM, male sex workers, ladyboys, and ladyboy sex workers -Innovation for the operation included the development of common manual for training outreach workers, officers of the organizations, core persons in the community, volunteers, and MSM in the community. Core persons were employed to take care of the target group with the following patterns: The zoning system and clear classification of organization separating risk groups from patients enabled services for the target group to be not overlapped & more accessible, and contributed to organizational structuring at the national level including clearly connecting with the area level at the end of the project. To encourage recognition of people in the community, the actions were to arrange occasional activities in accordance with the community ways of life, to allow the target group to have meetings and join some activities at the drop in center, to utilize coaching system for outreach workers and reporting system leading to systematic report and manual at the end of the project, and to establish condom fund in the community. Clinical treatment service was provided friendly, being coordinated by core persons.

2.3 Implementation for sustainable operation

❖ Project code 51-067 of AIDS prevention in MSM in border area had some following operations:

- 1) Provide the training for core persons, and constantly giving advices for group leaders. As a result, they were knowledgeable, had awareness, could evaluate risk, possessed denying skills, were skillful in working with people in the community, had good skills of presentation and extension, were confident at work, as well as having the manual applied to all areas.
- 2) Provide the training for volunteers and outreach workers living in the community in order to enhance continuous working, as well as creating working awareness for the community with volunteer mind.
- 3) Establish the drop in center to be the meeting and learning place that provided services constantly.
- 4) Do fund raising and establish condom & lubricant fund including local / external networks for running AIDS project in the community continuously.
- 5) Provide accessible services and treatment, and develop transfer system by core persons in the hospital for VCT and STI in the district service center.

❖ Project code 51-071 of the AIDS prevention campaign project for reducing new infection and the promotion for people living with HIV in MSM, male sex workers, ladyboys, and ladyboy sex workers:

- 1) To provide the training for core persons, strengthening their power by providing knowledge and having consultant team to give advices would enable continuous work. Besides, working with volunteer mind would encourage work motivation.
- 2) To set up organizations concretely, develop network operating & coordinating system among organizations clearly, and connection between the drop in center, clinical services, health service centers in Bangkok area, Bangrak Hospital, Silom Community Clinic of Bangkok Christian Hospital, Public Health Center 2, 3, 8, 9, and non-profit Anonymous Clinic of the Thai Red Cross Society would enhance work efficiency.
- 3) Good follow-up system would enhance smooth operation without confusion. Work area arrangement and goal setting would promote simple practice. Besides, officers living in the area would be able to work after gained recognition from the community.
- 4) Networking contributed to mutual assistance.
- 5) Develop the course and manual for enhancing knowledge of core persons and volunteers that could be applied to all areas.
- 6) Establish condom & lubricant fund for running AIDS prevention project in the community continuously.
- 7) Provide accessible services and treatment, and develop transfer system by core persons in the hospital for VCT and STI in the district service center.

2.4 Implementation and system for better covering the target group

❖ Project code 51-067 of AIDS prevention in MSM in border area
Implementation and system for better covering the target group included:

- Create network by increasing MSM and outreach workers networks in order to disseminate knowledge and skills leading to safe sex behaviors and health and self-care awareness.

- Provide knowledge about AIDS prevention for the targeted MSM in the participative training with a total of 50 persons per time for 3 times and 1 day per time in order to be extroverted, build understanding, and find some interested persons to be selected as volunteers and core persons in the community.
- Hold training for the team of trainers who would transfer knowledge to officers.
- Establish the drop in center in the community.

❖ Project code 51-071 of the AIDS prevention campaign project for reducing new infection and the promotion for people living with HIV in MSM, male sex workers, ladyboys, and ladyboy sex workers:

Implementation and system for better covering the target group included:

- 1) Create core persons who would search, transfer knowledge, and provide services in the area.
- 2) Determine the operational area and the target group in each operational zone separating risk groups from patients, as well as having precise reporting and follow-up system leading to continuous and efficient operation.
- 3) Set up service system network, and service connection between private organizations and hospitals, as well as creating core persons who would be the service coordinator in the clinic helping reduce the target group's uncomfortable feelings.

The implementation could be summarized as below:

1. Training held for increasing knowledge of outreach workers contributed to work efficiency and sustainability.
2. Training encouraged officers to develop their knowledge and networks to provide mutual assistance.
3. The drop in center could fulfill the group's demand, and could be applied to local organizations by utilizing activities of the center for connecting enjoyment with ways of life together with providing AIDS knowledge resulting in friendly services and comfortable feelings of MSM clients.
4. Create teaching materials appropriate for other projects nationwide.
5. Establish condom fund.

2.5 Sustainability

Project code 51-067 of AIDS prevention in MSM in border area:

- 1) To have core persons who lived in the community to involve in the community structure e.g. village health volunteers, vice chairman of the community, temple committee, networking committee on AIDS operation in the district, and integrate AIDS mission into the community ways of life contributed to continuous operation.
- 2) Do fundraising and establish condom & lubricant fund including local / external networks for running AIDS project in the community continuously.
- 3) Core persons were more recognized by local people leading to their pride. In addition, training, group leaders, and advices from coordination among health organizations encouraged them to be knowledgeable, have awareness, be able to evaluate risk, possess denying skills, be skillful in working with people in the community, have good skills of presentation and extension, and be confident at work.

- 4) The target group was knowledgeable and accessed to information about condom and lubricant, as well as being aware of use of condom when having sex, showing good management system.
- 5) Provide accessible services and treatment, and develop transfer system by core persons in the hospital for VCT and STI in the district service center.

❖ Project code 51-071 of the AIDS prevention campaign project for reducing new infection and the promotion for people living with HIV in MSM, male sex workers, ladyboys, and ladyboy sex workers:

- 1) To strengthen power of officers by providing knowledge and having consultant team to give advices would enable continuous work. Besides, working with volunteer mind would encourage work motivation. To set up organizations concretely, develop network operating & coordinating system among organizations clearly, and connection between the drop in center, clinical services, health service centers in Bangkok area, Bangrak Hospital, Silom Community Clinic of Bangkok Christian Hospital, Public Health Center 2, 3, 8, 9, and non-profit. Anonymous Clinic of the Thai Red Cross Society would enhance work efficiency.
- 2) Good follow-up system would enhance smooth operation without confusion. Work area arrangement and goal setting would promote simple practice. Besides, officers living in the area would be able to work after gained recognition from the community.
- 3) Core persons had the opportunity to develop themselves to be quality outreach worker.
- 4) Training encouraged organizations to develop their body of knowledge, and networks to provide mutual assistance. Training for fieldwork core persons resulted in continuous work of existing workers.

Conclusion

Innovation outcomes

- 1) Networking management system and operational network in the central part and the region.
- 2) Employing mechanism of accessibility to the target group, core persons worked in a proactive way, emphasizing teamwork, coaching, empowerment, and having leaders to stimulate behavioral changes, as well as using marketing strategies as follows:
 - Product: condom, lubricant, and core persons accessing to the target group.
 - Place: Entertainment place, education institute, residential place, sauna, beauty salon. These were the meeting places of the target group. The group could meet at the drop in center, being provided with transfer system to clinical services.
- 3) Promotion: Individual condom distribution on some occasions along with working for the organizations in the community to introduce and implement the activities.
- 4) Price: Free of charge services e.g. distribution of condom, lubricant, and other equipment of the project.

Strengthened network could be achieved for the following reasons:

- 1) Availability of concrete organizations and networks with systematic structure, management, and connection.
- 2) Availability of policy deployment through networking system.
- 3) Community was strengthened by local people who settled down in the locality and worked with volunteer mind.
- 4) Workers had awareness, pride, and realize their work values leading to sustainable operation.

Sustainability could be achieved for the following reasons:

- 1) Volunteer mind of workers.
- 2) Continuous activities.
- 3) Networking system in the central part and the region.
- 4) Establishment of funding involving the community participation.
- 5) Service system based on the community ways of life on some occasions as well as transfer system by volunteers and continuous visit from core persons leading to easy accessible services for the target group.

2.6 Project administration

2.6.1 Finance & accounting – It was found that financial/ accounting/ budgeting report was neatly operated, and also found reimbursement form and operating result report submitted during the follow-up period.

2.6.2 Quality of the activity process – It was found that participants mostly considered that the activities were satisfactory e.g. public relations activity, occasional activity, operation in the drop in center; the training was helpful and helped provide knowledge; volunteers' operation could achieve the target but sometimes they were uncertain about their knowledge and needed advices and discussion with core persons, and some media also increased their confidence at work.

The findings revealed that the arranged activities were more recognized by the community especially occasional activities under some community events. This caused the community to recognize and realize values of core persons for example core persons in some areas were invited to cooperate with local organizations concretely.

2.6.3 Monitoring & reinforcing system for the operation in the area

Aim of this was to monitor and supervise the operation with the pattern of an internal organization in the project namely the Thai Red Cross Society, and an external organization namely Faculty of Public Health, Mahidol University.

The reinforcement was performed to develop the common course for the operation (still in progress during the operation). This course would contain the teaching guideline for training and knowledge transfer, media production and lubricant support, establishment of condom fund and condom distribution, KM forum, meeting for knowledge capture, and evaluation monthly meeting and discussion among core persons and volunteers.

2.6.4 Management competency

Regarding the operation of the organizations, each organization had learned how to develop their operation. Workers explained that they managed their operation from their real practices, coped with problems in case of any mistake, initiated better

procedures e.g. job allocation among organizations, coordination among organizations, working in the community leading to achieved goals and confidence at work accounting for nearly 70% evaluated by the questionnaire.

2.6.5 Academic & prevention knowledge of core persons

As for academic knowledge of core persons, about 44% of them could correctly answer all 5 questions of UNGASS, and 60% used a condom for disease prevention regularly when having sex. Knowledge of core persons gained from discussion in the meeting, seeking from media, and advices from their public health co-workers that would be transferred to volunteers in the community further.

2.6.6 Participants' satisfaction – Group discussion revealed that the project participants were satisfied with involving in the activities as they were proud of their beneficial jobs. Accordingly, the interview found that over 80% of core persons and outreach workers were proud of their working in the community.

2.6.7 The target group's satisfaction – It was found that 84% of the target group was satisfied with the operation. Likewise, the group discussion revealed that the target group was quite satisfied with provided services.

Suggestions for campaign's pattern and mechanism

1. Operation pattern

- 1) Use strategy for enlarging core persons by knowledge & skill training for local people working proactively with volunteer mind in team work and accessing to the target group, determining the operational area and working team in each zone consisting of zone leaders, group leaders, and team members. Working team would deploy the policy, set up clear working system, reinforce knowledge periodically, and utilize marketing strategy: Accessible (precise goal & place), understandable (coaching by familiar persons), and free of charge condom (occasional distribution).
- 2) Encourage participation of people in the community, local organizations, and private sector by networking system.
- 3) Strengthen power of workers.
- 4) Establish the drop in center for providing services.
- 5) Develop and extend supporting system by establishing condom fund.

2. Policy recommendations

- 1) Public organizations namely Ministry of Public Health, Ministry of Education, Ministry of Social Development and Human Security, Ministry of Interior, and Royal Thai Police in the central part and in the region should cooperatively set strategies and supported AIDS prevention and solution in MSM.
- 2) Several public organizations especially local administration organizations should support and cooperate with private sector and non-government organizations in preventing and solving AIDS problems in MSM employing a network approach e.g. medical treatment for sexually transmitted diseases, voluntary counseling and testing, etc.
- 3) Academic organizations in public sector such as universities, and colleges should provide academic support and capacity building for local service providers both in public and private sector in arranging quality prevention of

new HIV infection in MSM e.g. increasing knowledge and skills of adjusting or reducing HIV risk behaviors, testing and treatment for sexually transmitted diseases, skills of assessing and reducing risk, and increasing attitude toward use of condom.

- 4) Push relevant organizations such as Ministry of Social Development and Human Security, and Ministry of Interior to help children affected by sexual abuse from their family and society.

3. Academic recommendations

- 1) Build positive attitude of health service providers toward MSM for enhancing fairly medical treatment.
- 2) It was necessary to provide reproductive health education program for gender diversity.
- 3) Enhance life skills for getting to know how to select safe response to sexual desire.