

**HIV/AIDS Prevention & Care Services
Mae Tao Clinic
Mae Sot, TAK**

December 20, 2006

Overview

- Burma: Political and Health Situation
- Introduction to Mae Tao clinic
- Current Services
 - Prevention of Mother to Child Transmission
 - Voluntary Counseling and Testing
 - Safe Blood
 - Care and Support for People Living with HIV/AIDS
- Partnerships

Burma: Political and Health Situation

- Burma has suffered over 50 years under oppressive military rule
- Approximately 35% of population does not have access to public sector primary health care services
- One of three Asian countries most heavily affected by the HIV epidemic; HIV infection rates rising rapidly
- UNICEF reports indicate that 38% of children between 5 and 9 years old do not enroll in school and almost 75% of students fail to complete secondary school

Displacement and Flight from Burma

- Thousands of civilians flee to neighboring countries due to civil war, economic depression, and human rights abuses
- 13 official refugee camps along the eastern border host approximately 140,000 refugees
- Over one million migrant workers living in Thailand and some 600,000 to one million people displaced internally
- Every month, an estimated 2,000 to 3,000 Burmese continue to cross the border into Thailand
- These forcibly-displaced people lose the integrity of their communities and face disruption of family and social norms, which has an enormous impact on health

Main Entry Points in Thailand for Unrecognised Refugees and Migrant Workers



- Migrants leave Burma and enter Thailand primarily through three entry points:
- Tachilake/Mae Sai
- Myawaddy/Mae Sot
- Kaw Thauung/Ra Nong

Tak province

- Shares a 570 kilometer border with Burma
- Population
 - Thai 500,000
 - Refugees (Camp) 80,000
 - Migrant Worker total 120,000
 - With work permits 50,000
 - Dependents and people without work permits 70,000
 - Hilltribe people living in Thailand without Thai ID 100,000

Barrier to accessing health services

- Cost
- Legal status
- Poor transportation
- Language
- Traditional health seeking behaviour
- Lack of information
- Negative attitude towards migrant workers
- Time constraint

Introduction to Mae Tao Clinic

- Established in 1989
- Located in Mae Sot District of Tak Province
- MTC provides care to the displaced populations living outside the refugee camps.
- Catchment area of approximately 100,000 migrant workers in Thailand and 50,000 from border area in Burma.
- Most of our services are offered free of charge, with a 30 baht registration fee.

Health Services at Mae Tao Clinic, 2005

- Medical Service (OPD/IPD)
- Surgical (OPD/IPD)
- Reproductive health OPD/IPD including basic EmOC services
- Child health services (OPD/IPD)
- Laboratory / Blood Bank
- Primary eye care and eye surgery
- Prosthetics and rehabilitation
- HIV/AIDS prevention (safe blood, VCT, PMTCT and home based care)
- Malaria management
- Referral service for emergency medical, surgical, obstetrical problem and special laboratory and radiological investigation

Types of HIV/AIDS Services, Mae Tao Clinic (2005-2006)

- Clinical based services
- Community based prevention services
- Care and Support Services
- 2007: Comprehensive HIV/AIDS program for community peer educators

Clinic-based Services

- PMTCT (since year-2001)
- VCT (since year-2003)
- Safe Blood (since year-2000)
- HIV/AIDS Patient care (since year-2000)
- HIV/TB Patient care (since year-2004)
- Universal precautions

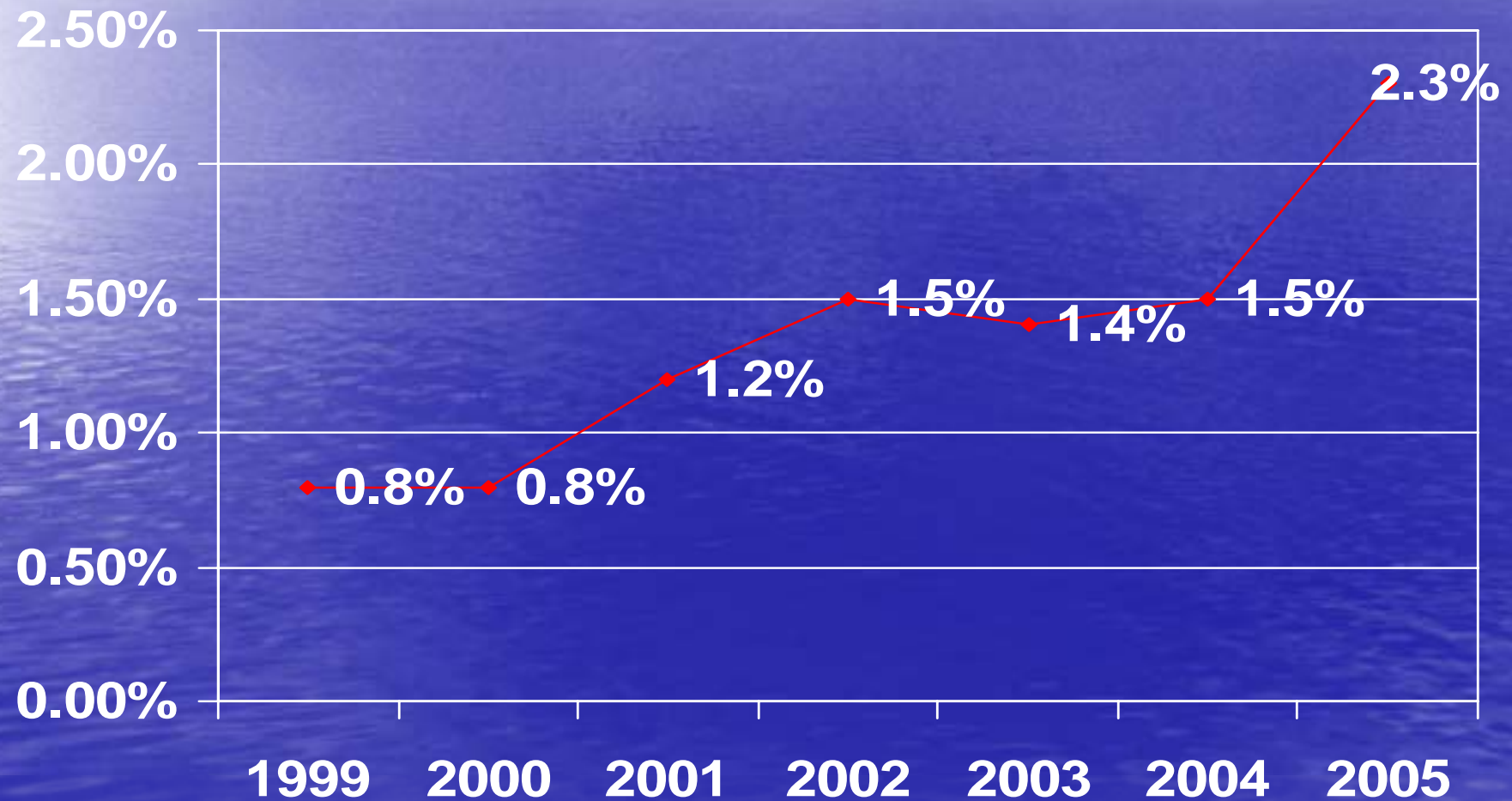
Preventing Maternal to Child Transmission (PMTCT)

- Collaboration with PHPT and Mae sod hospital
- Universal testing of all pregnant women
 - ANC
 - Emergency test at time of delivery if no ANC
- HIV+ pregnant women given anti-retroviral therapy in conjunction with Mae Sot Hospital
- Delivery at Mae Sot Hospital when possible

Preventing Maternal to Child Transmission (PMTCT) (cont.)

- Infant treated with anti-retrovirals for first six weeks
- Milk powder provided to mother in place of breast milk
- Home support and counseling provided as long as needed

Trend of HIV prevalence in ANC pregnant women at MTC from 1999 to 2005



Prevention of Mother to Child Transmission, MTC - 2005

Activities	Achievement	
	2004	2005
HIV screening for ANC client	2736 (82%)	1838 (63%)
ANC Client Testing Positive	42 (1.54%)	43 (2.34 %)
AZT for the pregnant woman during later half of pregnancy	30 (71.4%)	25 (44.2%)

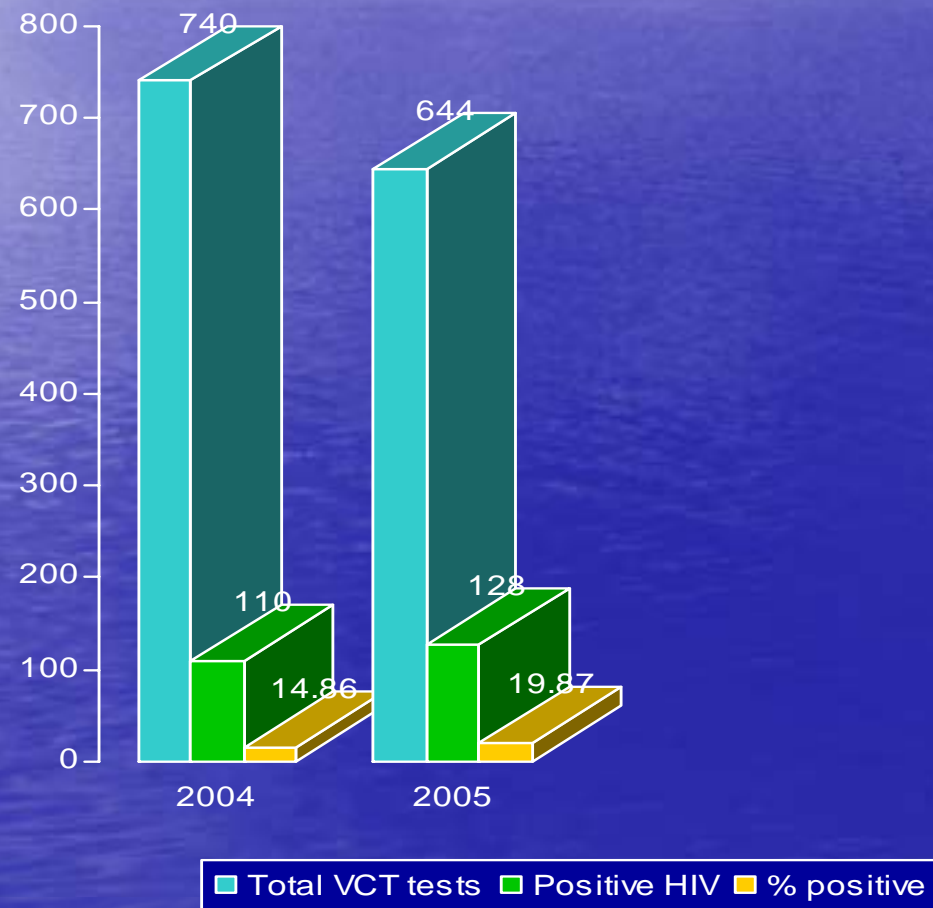
Prevention of Mother to Child Transmission – 2005, (continued)

Activities	Achievement	
	2004	2005
AZT for the infant in the first six weeks	28	27
TL after delivery	28	26
HIV testing for the infant at 12 & 18 months of age	12 (all negative)	22 (1 positive)

Voluntary Counseling and Testing

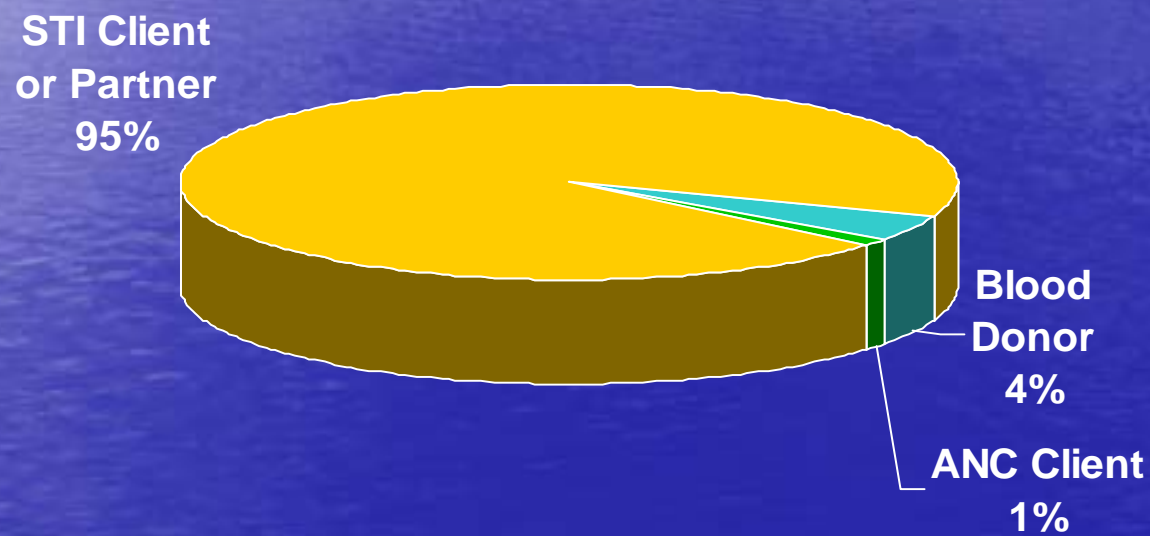
- Collaboration and Supported by FHI
- Confidential and Anonymous Site
 - Separate entrance
- Pre-test and Post-test counseling
- On-site testing using HIV Rapid Test Serial 3 Protocol
 - results available in 30 minutes, no need to return for results
- HIV Follow-up program

VCT Results for 2004-2005, Mae Tao Clinic



Referral Sources for VCT Clients, 2005

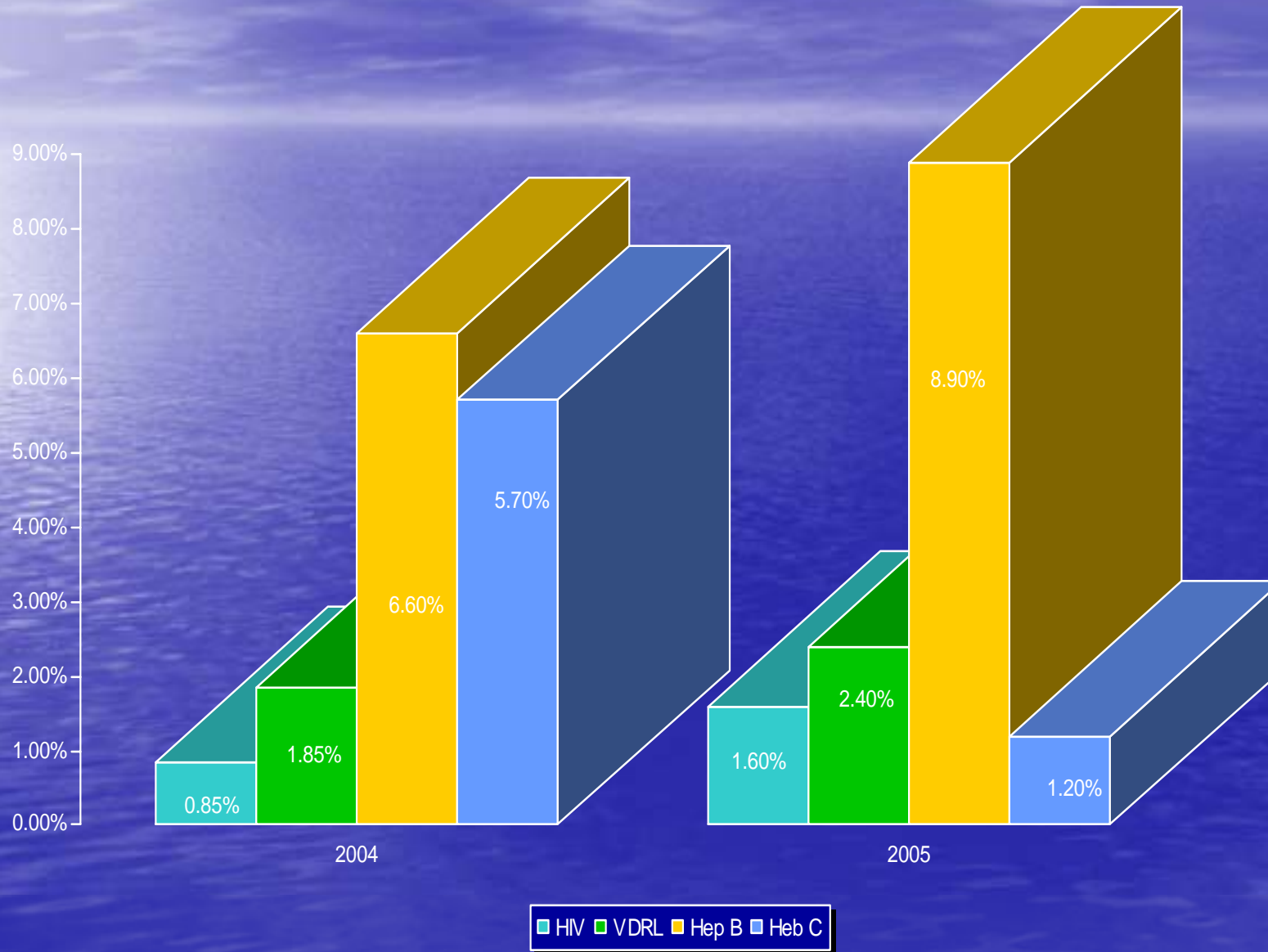
Total Clients: 644



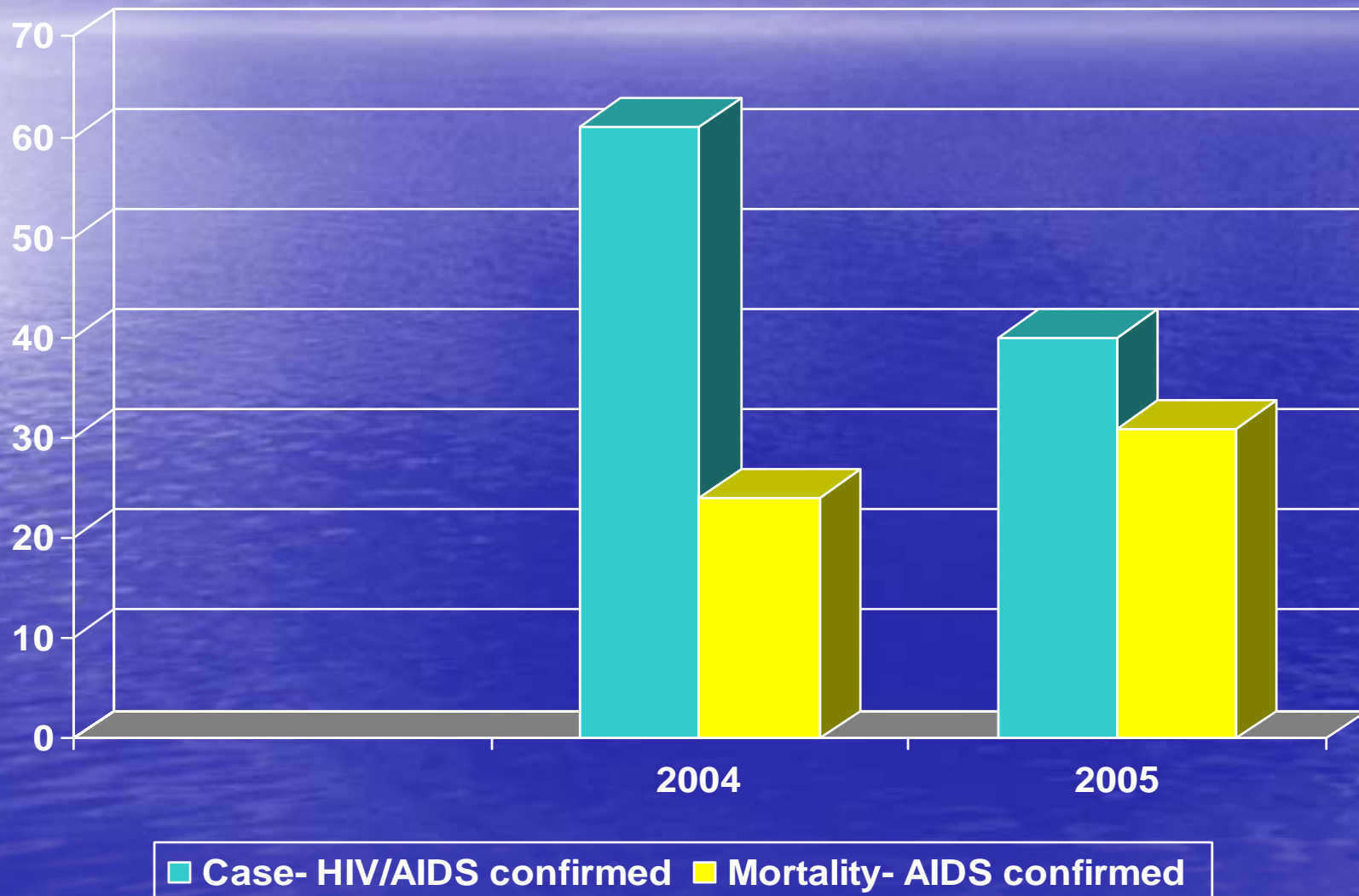
Assuring Safe Blood

- Established in 2000, the voluntary blood donor program includes risk assessment, collection, screening, storage, transfusion and training
- Blood is tested for Malaria, Hepatitis B and C, Syphilis, and HIV
- Donors are given health education and risk reduction information
- Donors testing positive for any disease are referred to OPD for treatment

Results of Blood Donor Testing



Demographics of confirmed HIV/AIDS cases and fatalities for IPD patients



Community-based Prevention Services

Activities

- Adolescent Sexual & Reproductive Health Education
- Community Outreach and Stigma Reduction Activities
- Condom Distribution
 - Home Based Care Services
 - Family Planning Services

Care & Support Services

- HIV Follow-up program for Home visitation
- Inpatient admission for seriously or terminally ill patients
- Orphan care
- Prophylaxis of pneumocystis infection
- Treatment of opportunistic infections
 - (fungal, bacterial, parasitic)
- Provision of medicine and non-medical supplies (e.g., ORS, soap, condoms) during home visitation

Partnerships

- Mae Sot Hospital (Thai Public Health)
- Family Health International
- Medecin Sans Frontieres
- World Vision
- Social Action for Women
- MAP foundation
- Metro
- Daughter of Charity

Constraint

- No ARV treatment available for migrants (Cost, Risk of displacement)
- Security risk for home visitors and peer counselors
- Lack of community support system (stigmatization, mobilizations)
- Funding for testing, care and support services

Conclusion

- More coordination and collaboration in regards to program planning and implementation
- Strengthen monitoring system to ensure quality services and effective outcome
- Promote and provide skills to migrant health workers/volunteers
- Develop strategy for long-term and sustainable HIV/AIDS prevention and control program for migrant workers.

Thank you
All