

CHAPTER V

DISCUSSION AND RECOMMENDATION

The prevalence among general population of Lao PDR is low (0.02%). However there is evidence that the HIV epidemic among migrants are rising. In 1999, 974 Lao migrants who returned from working in Thailand illegally were tested for HIV infection, and 5 percent of them were found to be HIV positive (5). In this study, 1.3 percent of migrants returned from working in Thailand were tested positive for HIV. These returnees were among the legal migrants. This indicated that the HIV epidemic among migrants are alarmingly high particularly among illegal migrants. Lao migrants working in nearby countries will be one of a major bridge for HIV transmission into the Lao general population. In this study, we have found that sexual risk behavior for HIV infection among the migrants were high, particularly among male. Moreover HIV prevalence in five neighboring countries are high. Thailand, the country that share common border with 8 provinces of Laos (Vientiane Municipality, Bolikhamxay, Khammouane, Savannakhet, Saravan, Champassak, Sayaboury, and Bokeo), has over 2 percent HIV prevalence among general population (1), and 17 percent among direct CSW (2). Vietnam share common border with 10 provinces of Laos (Phongsali, Luang Prabang, Houaphan, Xieng Khouang, Bolikhamxay, Khammouane, Savannakhet, Saravan, Sekong, and Attapeu) has 0.24 percent HIV prevalence among adults population in 1999 (1), 20 percent among CSW in HoChi Minh city in 2000, and 77 percent among STDs in 1999 (3). Cambodia share common border with 2 provinces of Laos (Champassak, and Attapeu), has over

4 percent HIV prevalence among general population and 42.6 percent among CSW in 1998 (1). China share common border with 3 provinces of Laos (Luang Namtha, Oudomxay, and Phongsali), has HIV prevalence among adult population less than 0.1% in 1999. However, only about 5 percent of estimated HIV/AIDS are reported (1), over 70% among injecting drug users in seven Chinese provinces, 4.6 percent and 10.7 percent among CSW in Yunnan and Guangxi in 2000 (3). Myanmar share common border with 2 provinces of Laos (Bokeo, and Luang Namtha), has HIV prevalence among adult population 1.99 percent in 1999 and 18 percent among CSW (1), 50 percent among injecting drug users in 1999 (3). Lao migrants who migrate to work in these countries have a high chance to get infected with HIV. Due to they spend long periods of time away from their family and have high opportunity to practice risk behaviors include having multiple sexual partners, and visiting commercial sex workers. Effective HIV prevention interventions targeted Laotian who migrated to work in others countries are urgent needed to prevent the spread of the HIV into the general population.

Sexual risk behavior among the study population sample were found to associate with; gender (male were 21.6 times had higher risk than female), age (who aged greater than 19 were 1.5 times had higher risk than who aged less or equal 19), marital status (single status were 32.8 times had higher risk than who get married), education (who have education were 2.4 times had higher risk than who have not education), Type of job in Thailand (who worked as a factory worker were 2.1 times had higher risk than other jobs), duration of working in Thailand (who stayed longer than 1 year were 1.8 times had higher risk than who stayed less or equal 1 year), alcohol consumption (who drank alcohol were 18 times had higher risk than who

never drink alcohol), drug abuse (who ever used illicit drug were 12.5 times had higher risk than who never use illicit drug). These factors must be more focus on HIV prevention among migrants who across the borders to work in other countries. Consistent condom use with sexual partner must be emphasized. As the data from this study demonstrate that condom use among these Lao migrants were low, only 20.6 percent of them ever had used condom. The KAP survey data which conducted in Luang Prabang and Oudomxay provinces, Lao PDR (25) support this finding. The survey found 22 percent and 26 percent of the population sample had ever used condom in their life time. Study of attitude and barriers toward condom use among laotian are essential for HIV prevention in the country. Condom use promotion in commercial sex setting in Laos are urgent. Thailand has proved that promotion of 100 percent condom use in commercial sex setting is effective in reducing the spread of HIV transmission. For the time being, only one brand of condom is available in the country. Education of condom use should be introduce to the country population, especially in remote areas.

Knowledge on HIV/AIDS among the study population sample were high but their practice were low. For example they know that the diseases can be transmitted from persons to persons. They know how people get the diseases and how to prevent themselves from the diseases. Regarding the condom use, 96.5 percent of the study population sample said that people can get HIV infection by having sex without using condom and 97.5 percent know condom can prevent HIV and STDs infection, but only 20.6 percent of them used condom when having sex in their life time. A similar finding was found in several study. For instance the knowledge, attitude, practice of STDs/AIDS in survey which conducted in 2 northern

provinces of Lao PDR where the people know about the condom can be used for prevention of HIV/STDs 93.6 percent and they have ever seen condom (77.7%), but only 26 percent of them have ever used one (25). The national behavioral surveillance survey (BSS) (28) also found that over 90 percent of the male population were able to use a condom consistently and correctly with all sex partners as a way to reduce the risk of acquiring HIV, but only about 24 percent of them used condom when having sex with CSW and non regular sex partners during the past year. These reflect the real situation in the community, where more people have knowledge does not mean their knowledge has been translated into practice because there are many factors including cultural and socioeconomic can influence the behavior change of the people. This issue will be a challenge for HIV prevention and control in this area. These people require not only information about HIV/AIDS, on self-assessment of risk behavior and promotion of consistent use of condom among these people with all commercial, casual and informal regular partner.

This study is a cross-sectional study on prevalence HIV infection and risk factors among Lao migrants in 13 villages in Champorn district, Savannakhet province, Lao PDR aged 15-35 years who working periodically in Thailand since 1995 to June 2000 has limitations. Firstly, the data were obtained by interviewing, therefore the data are subject to reporting bias. The participants may under or over reported their risk behaviors. However, interviewers were trained to conduct the interview. The bias reports are assumed to be in random fashion. Therefore, this would balance in the data and the results should be justified. The study was conducted among legal migrants who returned home from Thailand during the time of study. They may not represent all the migrants who periodically working in Thailand,

particularly among illegal migrants. Therefore, results of this study may not generalize to Lao PDR migrants who migrate to work in neighboring countries in general. However, the data were provided useful insight and ideas for HIV prevention among the population.

In conclusion, further research both quantitative and qualitative are urgent by needed to better understand the structure of social economic and behavioral characteristics among the periodically migrants and other populations in order to develop effective HIV prevention. HIV prevention in Laos should encourage risk behavior change, promote safe sex behavior and increase condom use.