



REPORT

HIGH-LEVEL MEETING ON HIV AND DRUG USE IN THAILAND

18 November 2013

Aetas Lumpini Hotel, Bangkok, Thailand

The High-level Meeting on HIV and Drug use in Thailand was co-organised by the Thailand Ministry of Public Health, the International Drug Policy Consortium, PSI Thailand Foundation, and the International AIDS Society. It was held as a half-day meeting during the week of the International Congress on AIDS in Asia and the Pacific on 18-22 November 2013. The objectives of the meeting were to:

- a. raise awareness amongst Thailand's policymakers about international standards and best practice on implementation of harm reduction services and enabling policies, and
- b. cultivate a national debate on enabling policies and practises that would facilitate an increase in the coverage of harm reduction services in Thailand.

It was closed to media and the public, with no record of comments and statements attributed to specific individuals, to facilitate frank discussion on issues relating to harm reduction services and policy barriers in Thailand, including:

- HIV risks relating to drug use
- State of coverage of harm reduction services
- Barriers to the increase in coverage of harm reduction services, and
- Recommendations for removing barriers.

This report summarises the presentations delivered, and key discussion points and outcomes at the meeting, which was divided into two sessions.

Session 1 – HIV prevention measures for people who use drugs in Thailand: The role of needle and syringe programmes

Presentations

Thailand has been praised for its work in providing HIV/AIDS treatment and prevention measures, and achieving reductions in the number of new HIV infections and HIV-related deaths. Its plan for ending AIDS by 2030 has been endorsed by the National AIDS Committee (NAC), and incorporated into the National Strategic Plan of HIV 2014-16. There are approximately 40,000 people who inject

drugs in Thailand, representing the population with the highest HIV risk and prevalence. The estimation of new HIV infections in this group is around 6,000 cases by 2030.

Thailand plans to reduce new cases of HIV infection by two-thirds by 2016, with the focus on key affected populations including people who inject drugs, men who have sex with men (MSM), transgender people, sex workers and sex worker clients. To help achieve this, the NAC had agreed to implement harm reduction policies with 10 comprehensive harm reduction services since 2010. However, these harm reduction policies have not been announced and fully implemented due to the ruling by the Council of State that needle and syringe programmes (NSP) conflict with other laws.

There are several challenges in implementing harm reduction services in Thailand, for example the public's attitude against harm reduction and the interpretation of the Council of State. The implementation of NSPs is particularly challenging. The Champion – IDU project, funded by the Global Fund, calculates that a person who injects drugs injects three times per day on average, and would therefore need an average of 90 clean needles and syringes per month. However due to fears about potential interaction with police and being arrested, people who inject drugs in Thailand often do not feel comfortable in acquiring adequate supplies of clean needles and syringes. In addition, Thailand's drug control policies have had a great impact in reducing the distribution and accessibility of needles and syringes in the country. Since July 2009, fewer than 1,500,000 needles and syringes have been distributed against a target of approximately 5 million. National data indicates that less than 1 per cent of people who inject drugs access NSPs, with less than one sterile needle/syringe available to each person who injects drugs in a year. Comparatively, CHAMPION-IDU clients have received an average of 133 needles and syringes per year.¹

Discussion outcomes

- A harm reduction policy which includes NSPs seriously needs to be implemented in Thailand.
- The Government needs to consider short- and long-term plans to expand the coverage of NSPs to reduce new HIV infections. Other necessary measures include stronger coordination of the activities of the police, law enforcement officers, civil society organisations, and relevant government agencies, and ensuring harmonisation of laws and regulations.
- As a key agency working on drug-related issues, the National Command Centre for Drugs (NCCD) coordinated by the Office of the Narcotics Control Board (ONCB) should also promote harm reduction services.
- It is important to communicate with relevant government agencies such as the Council of State to ensure common understanding on the purposes of harm reduction, especially the reasons for distributing needles and syringes, that is, not to encourage people to use drugs but to reduce the risks from using drugs.
- There also needs to be common understanding about the concept of harm reduction – it should only be about access to services such as NSP or reforming laws, but ultimately about

¹ Nacapew, S. and Macdonald, V. *Drug control and harm reduction in Thailand*, 2013, International Drug Policy Consortium, available at: <http://idpc.net/publications/2013/11/idpc-briefing-paper-drug-control-and-harm-reduction-in-thailand>

improving the quality of life and livelihood of people who use drugs. The barriers to harm reduction services will never be truly resolved unless public and governmental perceptions and attitudes about harm reduction improve.

Session 2 – Legal and policy environment to support HIV prevention measures for people who use drugs in Thailand

Presentations

According to the *Narcotic Addict Rehabilitation Act 2002*, voluntary drug treatment is an option for people who use drugs to avoid criminal penalties. This provision for diversion away from the criminal justice system is one of the solutions to overcrowded prisons in Thailand, and complements the support for the implementation of harm reduction services provided by agencies such as the ONCB. In 2010, the ONCB agreed to pilot harm reduction services in 10 provinces with a high prevalence of injecting drug use and HIV, but it was not fully implemented, particularly the NSP component.

We only manage to see the tip of the iceberg when it comes to issues around drug use and people who use drugs in Thailand. The harms relating to injecting drug use and prevalence of HIV amongst people who inject drugs, especially in prison, are not very visible. The attitudes of Thai people toward drugs are also stigmatising – with the belief that drugs are bad, harmful and unwelcome in their society. Drug control policies are based on ‘illusion’ and not evidence, for example, there are no studies showing that the government’s voluntary and compulsory drug treatment centres are effective. Drug policies are written to favour the majority of society with no consideration for the rights of marginalised populations such as people who inject drugs, sex workers and MSM.

The problem with implementing harm reduction is that the public and responsible government agencies do not understand the concept or the purpose of interventions such as distributing clean needles and syringes. In addition, there is no distinction made between drug use and drug dependence in Thailand’s policies, which contributes to a harsh, repressive environment for people who use drugs. As a result, we will not be able to achieve the goal of ‘getting to zero for HIV/AIDS’.

People who use drugs have suffered persecution, stigmatization, and discrimination for a long time. However there are several countries around the world have adopted policies to address those problems. For example, Portugal decriminalised drug use and scaled up health services (instead of imposing criminal sanctions and punishment) for people who use drugs. As a result, Portugal has seen a reduction in crime and fewer people in prison for drug offences. There are 6 recommended measures that Thailand can adopt to better address its drug problems:

1. Systematically reform Thai laws so that people are no longer subject to criminal justice procedures and sanctions for drug use
2. Improving the accessibility of health and social services for people who use drugs
3. Fully support the harm reduction policy by monitoring and identifying mechanisms for strengthening its implementation
4. Eliminate compulsory treatment and fully support evidenced-based voluntary drug treatment options

5. Support scientific understanding about drug dependence, and raise awareness amongst the public, including through engaging the media
6. Establish an effective system for assessing drug dependence.

Discussion outcomes

- The Thai government has adopted many goals to demonstrate its commitment to addressing HIV, and one of them is to reduce by two-thirds the number of new infections among people who inject drugs by 2016. However, the commitments and evidence-based strategies have not been communicated down to provincial level agencies. Field staff consequently lack understanding and clear instructions on implementing this goal.
- To improve the implementation of harm reduction services, communication between central and provincial level agencies is needed. A relevant point is that the NAC policies and guidelines on harm reduction are written at an academic level; thus, a clear and practical instruction is needed for the field staff as they have to understand the concept of the works and to perform an effective implementation.
- In terms of policymaking on drug control and HIV prevention, there are currently a few agencies that conduct studies in this area, for example, the National Institute of Development Administration (NIDA). In many countries, harm reduction policy is led by their ministries of public health and NGOs and it is not usual for a law enforcement agency to implement harm reduction services. Credit must be given to the Thai ONCB when it initiated their harm reduction project several years ago. However it might have to be the Thai Ministry of Public Health that leads in this area to ensure the adoption of a harm reduction policy.
- There are two key points on addressing the negative ruling from the Council of State on NSPs, and in ensuring policies from different sectors that are supportive of harm reduction:
 1. There needs to be clear policy objectives and instructions on implementation for all levels of government, and
 2. There needs to be strategies and budget to enable the implementation of the policies.
- In addition, there are several major obstacles that should be overcome in order for harm reduction services to be implemented: gaps in knowledge and understanding about drug issues amongst policymakers and politicians, and lack of support and continued funding for evidence-based measures.
- There seems to be many challenges for the Ministry of Public Health to overcome in order to lift the negative ruling from the State Council and implement policies on harm reduction. The Ministry of Public Health as a leading government agency must be proactive and set a strategy for moving forward on this goal.
- In terms of the reforms required to implement harm reduction services, more than legal reform is required. While the Law Reform Commission of Thailand is the responsible agency for law reform, the ONCB also needs to help analyse and assess the practical needs of the operational environment. Other related government agencies also need to support the Ministry of Public Health in taking the lead on this issue.

CLOSE OF MEETING