

THAILAND

Total Population: 67,386,000 (2008)

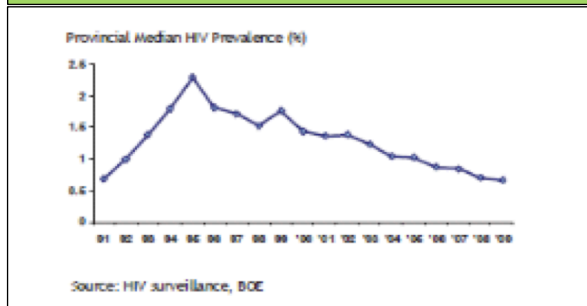
HIV EPIDEMIOLOGY^{1, 2}

- Steady decline in HIV prevalence among general population since 1996
- Estimated 12,000 new infections in 2009
 - Prevalence remains high in Key Affected Populations, including FSW and MSM
 - Recent increase in STIs and HIV infection observed in adolescents
- One-third of all new HIV infections are among low-risk women, as a result of intimate partner transmission

HIV ESTIMATIONS

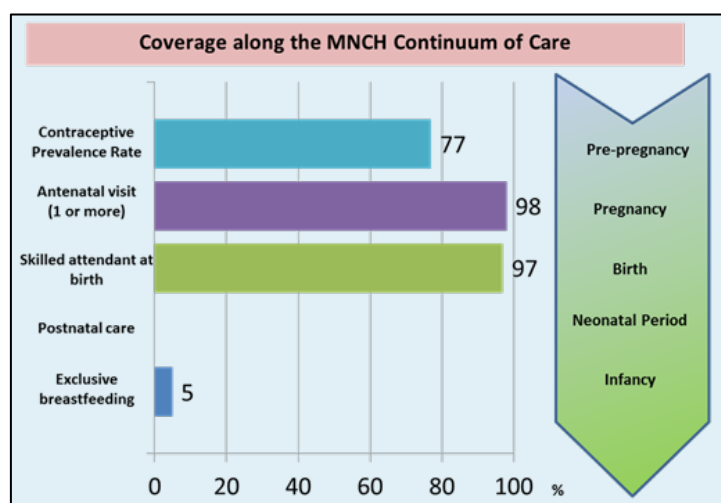
| | | |
|---|---------|--------|
| Estimated Adult HIV Seroprevalence (%) | 1.3 | (2009) |
| Estimated Number of Persons living with HIV | 530,000 | (2009) |
| Estimated Number of Women living with HIV | 210,000 | (2009) |
| Estimated HIV Prevalence among Pregnant Women (%) | 0.58 | (2009) |
| Estimated Number of HIV-positive pregnant women | 4,931 | (2010) |

HIV Prevalence in ANC clients - Thailand, 1991-2009



MATERNAL, NEONATAL, AND CHILD HEALTH: COVERAGE AND OUTCOMES³⁻⁶

- Strong public health infrastructure with high rates of ANC access and utilization



KEY MATERNAL HEALTH INDICATORS

| | | |
|---|---------|--------|
| Estimated Annual Births | 977,000 | (2009) |
| Adjusted Maternal Mortality Ratio (per 100,000 live births) | 48 | (2008) |

KEY REPRODUCTIVE HEALTH INDICATORS

| | | |
|------------------------------------|-----|-------------|
| Contraceptive Prevalence Rate (%) | 77 | (2005-2009) |
| Unmet Need for Family Planning (%) | 3.1 | (2006) |

ANTENATAL CARE AND DELIVERY

| | | |
|---|-----|-------------|
| Antenatal Care Coverage (at least one visit, %) | 98 | (2005-2006) |
| Antenatal Care Coverage (4 or more visits, %) | N/A | (2005-2006) |
| Skilled Attendant at Delivery (%) | 97 | (2005-2006) |
| Institutional Delivery (%) | 97 | (2005-2006) |

KEY NEONATAL AND CHILD HEALTH INDICATORS

| | | |
|---|----|-------------|
| Exclusive Breastfeeding for Infant <6 mos (%) | 5 | (2005-2006) |
| Infant Mortality Rate (per 1000 live births) | 12 | (2009) |
| Under-5 Mortality Rate (per 1000 live births) | 14 | (2009) |

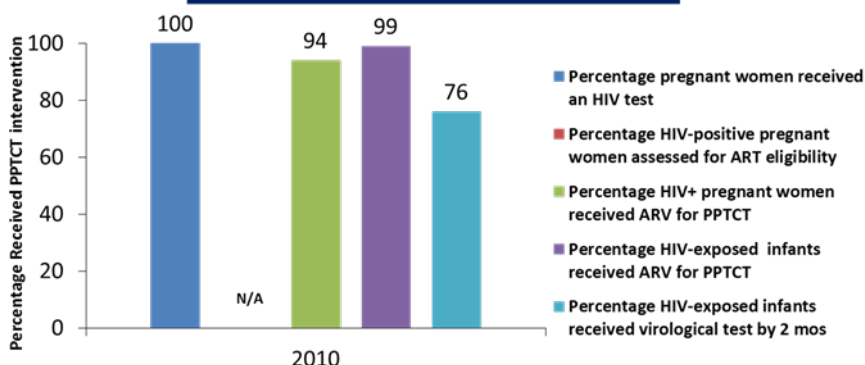
PREVENTION OF PARENT TO CHILD TRANSMISSION OF HIV: ACCESS, COVERAGE, OUTCOMES^{1, 7, 8}

ACCESS TO PPTCT SERVICES

| | | |
|---|--------------|--------|
| Number of facilities providing ANC services | 1,316 | (2010) |
| ANC facilities that provide HIV testing and counselling (%) | 1,316 (100%) | (2010) |
| ANC facilities that provide HIV testing and counselling and ARV for PMTCT on site | 1,316 (100%) | (2010) |
| Health facilities that provide CD4 testing on site or by specimen transport | 940 (71%) | (2010) |
| Number of facilities that provide virological testing for EID (on-site or by DBS) | 912 (64%) | (2010) |
| Number health facilities that offer ART (prescribe and/or clinical follow-up) | 943 | (2010) |
| Number health facilities that provide paediatric ART | 643 | (2010) |

- PMTCT integrated with MCH system since 2000
- Strong monitoring and evaluation
- Current priorities include:
 - Improving primary HIV prevention
 - Promotion of couples counseling
 - Expansion of early CD4 assessment
 - Use of updated (Option B) regimen

COVERAGE OF KEY PPTCT INTERVENTIONS



PPTCT Cascade of Services, 2010

- In 2010, 787,337 pregnant women received HIV testing
 - 4,927 (0.6%) HIV+ pregnant women detected
 - Represents 99.9% of estimated HIV+ pregnant women
- Of 4,927 HIV-positive pregnant women detected
 - 4,644 (94%) received ARV prophylaxis
 - 4,902 (99%) exposed infants received ARV prophylaxis
- Analysis of EID testing results indicates MTCT of 3.3%

PPTCT & Infant Feeding Guidelines Revised

- Option B (Maternal triple ARV, AZT/3TC/LPV/r) selected
- Formula feeding supported for 18 months
- DNA PCR testing of exposed infants at 2 and 4 months, HIV antibody test at 18 months

ELIMINATION OF CONGENITAL SYPHILIS: KEY DATA^{1, 7-9}

- Antenatal syphilis screening is routinely performed in Thailand through integrated PMTCT and MCH programme.
- **Rapid testing methodology is utilized, and confirmatory testing is also performed**
- As a result of prevention efforts, the prevalence of maternal syphilis is reported to have decreased from 2% (?year) to 0.1% in 2010
 - Data from 2010 are reported from 74 provinces:

Syphilis Testing and Treatment for ANC attendees

| | | |
|--|---------|-------------|
| Number pregnant women tested for syphilis | 772,772 | (2009-2010) |
| Percentage ANC attendees who were syphilis sero-positive (%) | 0.1% | (2009-2010) |
| Percentage ANC attendees tested positive for syphilis who received treatment | N/A | |

ELIMINATION OF NEW PAEDIATRIC HIV INFECTIONS AND CONGENITAL SYPHILIS^{1, 7, 8}

- Expansion and implementation of PMTCT services in Thailand has resulted in dramatic reductions in new paediatric HIV infections
- New priorities include:
 - Increasing male partner involvement in antenatal care and reproductive health as a means to
 - Increased focus on primary prevention of HIV, particularly among sero-negative or serodiscordant couples
 - Prevention of unintended pregnancies among women living with HIV
 - Improving the quality of pre and post-test counselling in the ANC setting
 - Increased outreach to provide services to the small percentage of women who do not access ANC (in whom there is a higher estimated HIV prevalence)
 - Expanding prompt CD4 assessment so that women who need ART for their own health are linked with lifelong treatment services
 - Expansion of EID PCR-based testing services for HIV-exposed infants

NATIONAL PPTCT TARGETS:

| | |
|--|---------------|
| Reduction in new HIV infections among couples (2016) | 75% reduction |
| Percentage pregnant women whose male partner received HIV testing (2011) | 50% |
| Percentage infants born to HIV-positive mothers who receive formula feeding (2011) | 100% |
| Rate of mother-to-child-transmission of HIV | <3.3% |

FUNDING & GOVERNANCE

| 1. Expenditure: | Year 2006 | Year 2007 | Year 2008 | Year 2009 | Year 2010 | Year 2011 |
|--|-------------|-------------|-------------|-------------|-------------|-------------|
| a) Total expenditure for all HIV programmes per year US\$ | US\$ | 199,644,531 | 209,123,114 | 213,774,843 | US\$ | US\$ |
| b) Total expenditure on PPTCT activities (Code 1.17 in UNGASS Funding Reporting Matrix) US\$ | US\$ | 3,541,504 | 4,109,961 | 3,893,349 | US\$ | US\$ |
| - Of which domestic funding (%) | % | 15.53% | 96.69% | 98.55% | % | % |
| - Of which international funding per origin (%): GFATM (pls specify round#), PEPFAR, UNITAID, Gates Foundation, Other (pls specify) | % from? | % from? | % from? | % from? | % from? | % from? |
| - Of which via national AIDS programme (%) | % | % | % | % | % | % |
| - Of which via national MNCH programme (%) | % | % | % | % | % | % |
| c) Ratio PPTCT Expenditure/Estimated number of Women Living with HIV (from national HIV Estimates) (per year where data available) US\$/person | US\$/person | US\$/person | US\$/person | US\$/person | US\$/person | US\$/person |

2. Which programme is mainly directing PPTCT? (Please tick) () HIV Programme () MNCH Programme () Joint

| 3. Resource needs / Budget: | Year 2010 | Year 2011 | Year 2012 | Year 2013 | Year 2014 | Year 2015 |
|---|-------------|-------------|-------------|-------------|-------------|-------------|
| a) Total estimated total HIV resource needs in current national strategic plan US\$ | US\$ | US\$ | US\$ | US\$ | US\$ | US\$ |
| b) Total secured budget for PPTCT in the current/next year (2011 and/or 2012): US\$ | US\$ | US\$ | US\$ | US\$ | US\$ | US\$ |
| - Of which domestic funding (%) | % | % | % | % | % | % |
| - Of which international funding per origin (%): GFATM (pls specify round#), PEPFAR, UNITAID, Gates Foundation, Other (pls specify) | % from? | % from? | % from? | % from? | % from? | % from? |
| - Of which via national AIDS programme (%) | % | % | % | % | % | % |
| - Of which via national MNCH programme (%) | % | % | % | % | % | % |
| c) Ratio PPTCT Budget/Estimated number of Women Living with HIV (from last national HIV Estimates): US\$ per person | US\$/person | US\$/person | US\$/person | US\$/person | US\$/person | US\$/person |

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