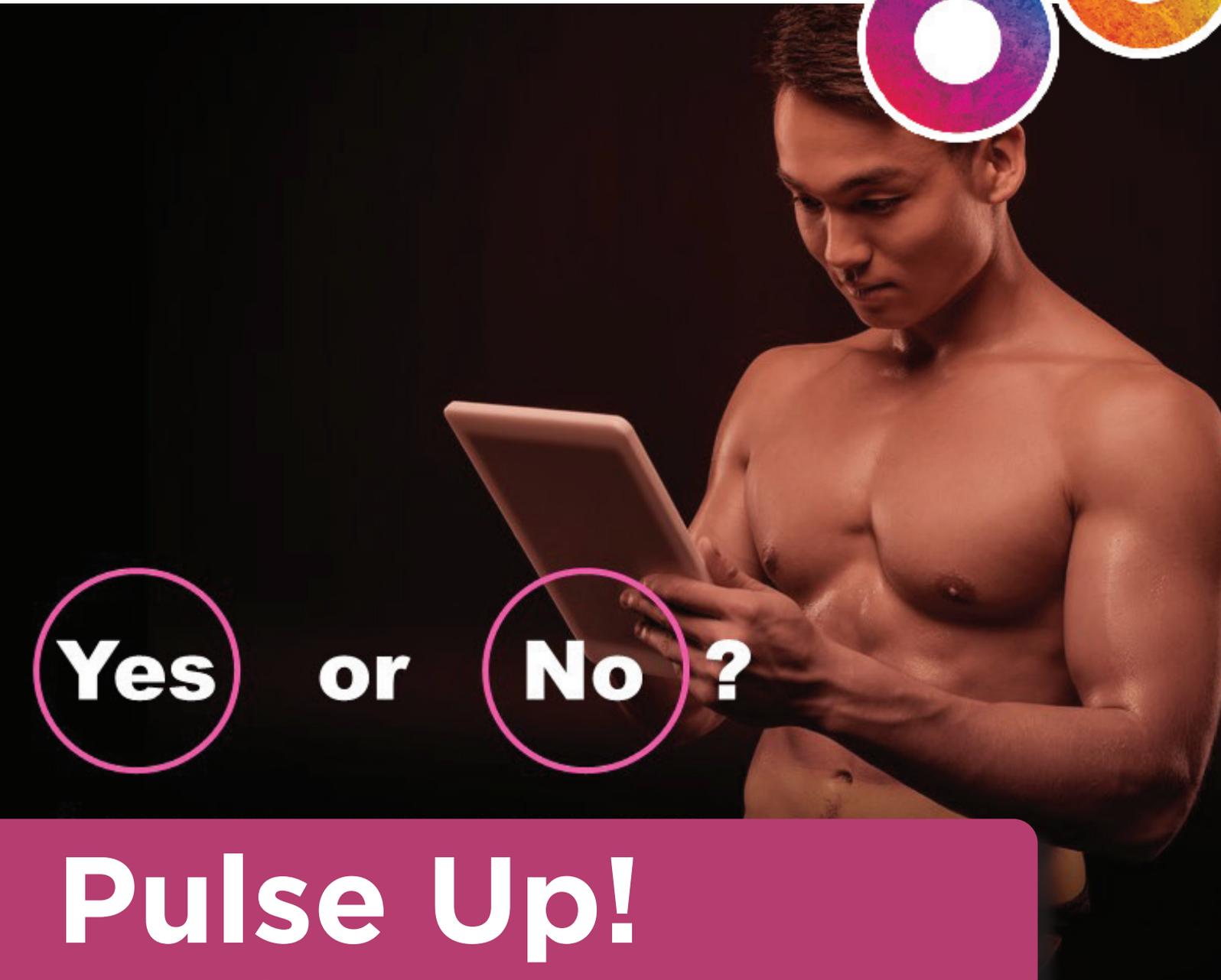


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Yes

or

No ?

Pulse Up!

Greater Mekong Young MSM Internet Sex Survey
Report of Cambodia, Lao PDR, and Thailand



Pulse Up!

Greater Mekong Young MSM Internet Sex Survey Report of Cambodia, Lao PDR, and Thailand



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Design and layout: Vaness Silpakhon Kongsakul

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Abbreviations

AIDS	Acquired Immunodeficiency Syndrome
AIMSS	Asian Internet MSM Sex Survey
CAG	Community Advisory Group
HIV	Human Immunodeficiency Virus
MSM	Men who have Sex with Men
PEP	Post-Exposure Prophylaxis
PLWHA	People living with Aids
PrEP	Pre-Exposure Prophylaxis
STI	Sexually Transmitted Infection
YMSM	young men who have sex with men





1. Rationale and Background

There is a scarcity of updated epidemiological and behavioural data on young men who have sex with men (MSM) in Asia and the Pacific to support evidence-based programs specifically designed for them. Insufficiency, if not absence of, data on young MSM (15-24) population in the region prove to be a major setback in the HIV response. The lack of recent and age disaggregated data on young MSM population particularly between 15 to 25 years or less than 25 years epitomizes the level of impact of HIV services in the region, which are not always suited to their characteristics and specific needs.

Young MSM debuts sexual activities during adolescence before reaching the age of 18. Most of these young MSM seek romantic and sexual partners as well as develop their sexual identities through the Internet. Because of perceived anonymity and less stigmatizing of homosexuality in online spaces, the internet has emerged as a platform facilitating sexual networking among MSM in Asia. However, there is no enough data collected on sexual behaviours of young MSM aged 15-24 where their sexual explorations are more diverse. The lack of information in this regard bars the advocates, as well as programmers, to design activities that are suited to the specific behavioral characteristics of young MSM.

These countries in Greater Mekong Sub-Region in particular Cambodia, Lao PDR, Thailand, are experiencing a revolution in mobile technologies. Internet penetration is now very high and smart phones are commonly used to access the Internet. The Internet therefore provides a remarkable opportunity to assess epidemiological behavioural data among young MSM aged 15-24 who use the internet in Asia. Having reliable epidemiological and behavioural data that can be compared across the region will be most useful in designing and strategizing multi-national and regional initiatives among young MSM.

This platform has been utilised by the Asian Internet MSM Sex Survey (AIMSS) conducted in 2010 by www.fridae.com and APCOM to collect detailed behavioural data among MSM at the regional level in Asia, which was funded by APCOM and USAID. However, this survey did not assess syndemic variables, which have been shown to facilitate HIV vulnerability among MSM and did not include some countries in the Greater Mekong region.

The high prevalence of HIV among young MSM in the countries of Greater Mekong as presented herein underpins the rationale of a multi-country survey using the Internet. As a regional project involving community organisations, this will facilitate peer-led cross learning process around effective evidence-based programs addressed to young MSM aged 15-24 in Greater Mekong Sub-Region. The data generated from these sequential surveys will be most useful to inform preventive intervention activities as well as build capacity for national MSM networks in reducing HIV prevalence and incidence.

With the support from VIIV Health Care Grant funding, APCOM participated in this project called “**Pulse Up!**”. This project builds the capacity of community organizations to facilitate survey roll-out, and conduct evidence-based advocacy with stakeholders to address young MSM needs. The data collected from this project will contribute to strengthening the HIV intervention programme and to end the epidemic among YMSM in the country.

This project covers 3 countries of Greater Mekong Region: Cambodia, Lao PDR, Thailand. Through this project, APCOM was implementing Pulse Up! at the country level with the support of the following country partner organizations;

- [KHANA](#) (Cambodia),
- [CHlas](#) (Lao PDR),
- [Rainbow sky association of Thailand](#) (Thailand)

APCOM, through the Pulse Up! programme, has rolled out an online sex internet survey in Cambodia, Lao PDR, and Thailand. Through this survey, APCOM had gathered epidemiological and behavioral data of young MSM in the respective countries.

1.1. General Objective of this project

The overarching goal of Pulse Up! programme is to have region-wide means of providing new epidemiological and behavioural data on young MSM aged 15-24 years old through web-based survey and moving away from the traditional outreach activities and methods.

This project generally aims to inform programs in structuring innovative interventions, guidelines, national strategic plans, as well as to the Country Coordinating Mechanisms and Global Fund in its future programs and engagements directed towards young MSM aged 15-24 to contribute in reducing HIV risk behaviours and prevent the escalating HIV epidemic among the young MSM population in the sub-region





2. Study design and Methods

Research objective:	To assess the prevalence and trends in HIV risk behaviour and related contexts among young MSM aged 15-24 who use the internet in Cambodia, Lao PDR, and Thailand.
Main outcome:	<p>HIV risk behaviours including but not limited to inconsistent condom use; number of casual, steady and sex work male partners; substance use; chem-sex</p> <p>+/- secondary outcome</p> <ol style="list-style-type: none"> 1. Characterize the treatment cascade over time (including HIV testing, risk reduction strategies, linkage to and retention to care, and adherence to treatment) and the predictors of various stages of treatment cascade; 2. Examine the specific syndemic conditions of HIV risk behaviours (such as homophobia, bullying/violence, family and peer pressure/support, resilience, and gay-related developmental issues)
Study Design:	The operational research is comprised of 3 phases: Phase 1 will involve forming an AIMSS community advisory board (CAB) that will oversee and advise the study, conducting formative research to inform cultural relevance and validation of the survey instruments, piloting the survey, engagement with key stakeholders and gatekeepers of online spaces (e.g., website owners in various countries). This operational research will be comprised of 3 phases:
Phase 1	will involve forming an AIMSS community advisory board (CAB) that will oversee and advise the study, conducting formative research to inform cultural relevance and validation of the survey instruments, piloting the survey, engagement with key stakeholders and gatekeepers of online spaces (e.g., website owners in various countries). Based on these activities.
Phase 2	will be the implementation of the sequential cross-sectional survey that will quantitatively assess HIV risk behaviours among MSM, describe their correlates and predictors over three time points and across diverse groups, allowing for the availability of regional-level, time-variant data to inform policy and intervention programs.
Phase 3	informed by the previous phases, will be to disseminate the findings and the lessons learned. The study design will consist of both community-engaged qualitative (Phase 1) and quantitative (Phase 2) methods. The qualitative component will involve focus group discussions and in-depth interviews and the quantitative component will involve self-administered online

2.1. Localization:

Greater Mekong region (Cambodia, Lao PDR, Thailand)

2.2. Data/population sources:

The survey is conducted online with the help of community-based organizations in Cambodia, Lao PDR, and Thailand.

2.3. Sampling methods:

Community- based purposive sampling with the help of community-based organizations.

2.4. Anticipation biases methods:

Only generalizable to Internet-using MSM. However, from our previous qualitative and quantitative studies and the larger MSM literature, the Internet is where YMSM hang out, develop and explore their social and sexual identities, and meet other YMSM. Measure of health status (previous and current): Self-reported HIV status, self-reported risk behaviours

2.5. Measure of exposure (previous and current):

Self -reports risk behaviours)

2.6. Statistical analysis:

Prevalence univariate and multivariate analysis: Multivariable logistic regression. The survey will be sequential cross-sectional; however, we plan to conduct a subset of the survey so we can follow-up a subset of YMSM over the period. The feasibility and acceptability of this will have to be assess in phase 1 during the community engagement process, planning and qualitative assessments. Sample size will therefore be dependent on this.

2.7. Conflicts of Interest:

None

2.8. Human resources working on the study:

The Community Advisory Group (CAG) composing of APCOM, Technical partners of APCOM, and the Consortium Members, is responsible for the development of the survey, its launch and data gathering.



3. Target population

young MSM who are nationals and currently reside in one Mekong countries (Cambodia, Lao PDR, and Thailand)

4. Recruitment and Sampling

young MSM is recruited from various online venues/spaces (for example: websites, MSM-specific apps like Jack'd, Grindr, Blued, Hornet; social media apps like Facebook, Twitter, tumblr and Instagram) where they congregate to socialize with other MSM. These venues are mapped by APCOM and community-based organizations in Cambodia, Lao PDR, and Thailand.

Below are the eligibility criteria for study participation in Aims 1-3.

4.1. Eligibility criteria

Inclusion Criteria

1. Age 15-24 years at time of assessment (for YMSM in the cohort, only required to be 15-24 years at baseline)
2. A national/citizen of one of the 5 Mekong countries
3. Currently residing in one of the Mekong countries
4. Able to comprehend English or one of the Mekong country languages (Burmese, Khmer, Lao, Thai or Vietnamese)
5. Male sex at birth
6. Had anal sex with a man in the past 12 months
7. Do not identify as transgender or female
8. Give consent to participate in the study

Exclusion criteria.

1. Identify as transgender or female Results for participants residing outside Lao PDR will not be presented in Lao PDR-specific analysis
2. Participants using a device with an IP that has previously been used to complete the survey
3. No internet access

5. Ethical approval and safety

As this study involves epidemiological and behavioural data of young MSM – Ethics approval was obtained from the ethics committee /Institutional review board in Thailand, Cambodia, and Lao PDR.

Participation in the study is voluntary. Their responses are kept strictly confidential, and digital data are stored in the secure computer files in APCOM office. Any report of this study that is made available to the public will not include respondents name or any other individual information which they could be identified.

6. Launching cross-sectional online quantitative Pulse Up! Survey in Cambodia, Lao PDR, and Thailand

During the March 2018 – May 2018, the survey questionnaire was programmed into Qualtrics platform. This survey included a one-page landing page that described about the survey in simple language followed by request for informed consent, as the first screen of the survey. Due to the online nature of the survey, and consistent with standard practice for online surveys, the consent form was not required to get a physical signature or witness. The participant must provide their consent by clicking the 'I consent' button on the screen. Participants who did not consent were not progress to the survey.

The survey was arranged to minimize the risk of fraudulent survey completion and multiple entries from the same IP address. However, there was no control to limit multiple entries by the same participant. The investigators manually check those participants who were using the same IP and deleted out the responses of both participants.

6.1. Survey tool and its modules

Technical partner in consultation with APCOM and country partners developed the survey tool. It was initially developed in English languages, and then translated into local languages (Khmer, Lao, and Thai). The survey tool contains 13 modules of “core questions” and 1 module for country-specific questions. The modules are:

1. Demographics
2. Sexual Behaviour
3. HIV testing and HIV status
4. Sexually transmissible infections
5. PEP and PrEP
6. Stigma, discrimination and acceptance
7. Venues
8. Mental health
9. Intimate partner violence and bullying
10. Drugs and alcohol
11. Social support and disclosure
12. Suicidality
13. Travel
14. Country-specific questions

6.2. Number of participants attempted the online survey

The number of participants who attempted until the last questions of the online survey in the country;



Country / # participants



769



619



1,477

TOTAL
2,865



7. About this report

This report presents survey epidemiological and behavioral data of young MSM in 3 countries in Cambodia, Lao PDR, and Thailand. It presents or summarizes the key findings from the online survey, launched in Cambodia, Lao PDR, and Thailand. The report highlights the health care needs of young MSM, and it presents other key information that could contribute to developing strategies to strengthen the HIV intervention programme.

The country specific findings from Cambodia, Lao PDR, and Thailand reports (see below) provides compelling evidence of suboptimal access to and uptake of HIV prevention and treatment services by young MSM. Besides, this study highlights that young MSM needs to be also provided with relevant information in relation to HIV and health services. They should also have swift access to various prevention tools such as PrEP, PEP, and condoms to protect themselves from HIV.

The comprehensive data or the key findings from the report will be utilized by the networks in their resource mobilizations to further support the activities or interventions necessary to address the issues found by the survey, the methodologies used in this project can stand as a good practice model replicable to the other areas of Asia and the Pacific. Moreover, the strengthened capacity of the networks in lobbying and advocacy may be carried over through their next sets of activities. Finally, the data from this project may, in whole or in part, reflected in the National Strategic Plans of the countries.

It is envisioned that the results of the survey may be used to create a regional or country strategy in innovatively and effectively addressing the access of young MSM aged 15-24 to HIV services such as prevention, testing, treatment, care and support in Asia and the Pacific. This will further strengthen the HIV advocacy among the key population such as the MSM and transgender people. Last but not the least, this study suggests a need to continue engaging with stakeholders and policymakers to best address community needs and contribute to end the HIV epidemic and fulfill 90-90-90 global target.





8. COUNTRY SPECIFIC findings from survey data



8.1. Cambodia

The total of 945 respondents attempted until the last questions of the online survey. Therefore, the responses from those 945 were used for analysis on the below modules.

Demographics

Just over half of the respondents (54.60%) were born between 1994 and 1996, a fifth (20.53%) were born between 1996 and 1999, and a quarter (24.87%) were born between 2000 and 2003. All respondents were assigned male at birth and currently 17.25% and 82.43% identify as male and a local gender identity, respectively. The majority (84.76%) identify as gay, 14.29% identify as bisexual, and 0.95% identify as straight. Nearly all (94.74%) are unmarried.

Approximately a quarter of respondents (26.35%) live in the capital city of their state/territory, 20.00% live in another city in their state/territory, 52.38% live in a regional center/town, and 1.27% live in a rural or remote area. Half of the respondents (50.00%) are employed full-time, 24.77% are employed part-time, and 25.23% are unemployed. Nearly three-quarters (71.61%) are not students, 22.90% are full-time students, and 5.49% are part-time students.

Demographics		Cambodia (n=945)
Year in which you were born		
1994-1996		516 (54.60)
1997-1999		194 (20.53)
2000-2003		235 (24.87)
Gender assigned at birth		
Male		945 (100.00)
Female		0 (0.00)
Gender identity		
Male		163 (17.25)
Local gender identity		779 (82.43)
Other		3 (0.32)
What is your sexual orientation?		
Gay		801 (84.76)
Bisexual		135 (14.29)
Heterosexual/straight		9 (0.95)
What is your marital status?		
Not married		811 (94.74)
Married		27 (3.15)
Divorced/separated/widowed		18 (2.10)
Which of the following best describes the area where you live?		
Capital city of my state/territory		249 (26.35)
Other city in my state/territory		189 (20.00)
Regional center/town		495 (52.38)
Rural or remote area		12 (1.27)
Are you currently employed?		
Employed full-time		428 (50.00)
Employed part-time		212 (24.77)
Not working/unemployed		216 (25.23)
Are you currently a student?		
Yes, full time		196 (22.90)
Yes, part-time		47 (5.49)
No		613 (71.61)



“

Pulse Up! is a first ever operational research project that promotes experience sharing through online platforms among young MSM and transgender persons in target countries and the region.

The data generated clearly show the real issues and needs of young MSM and the transgender community in relation to health services access and this can be used for advocacy purposes and programme improvement

”

Phornng Chanthorn,
Coordinator – policy, partnership,
and advocacy
KHANA, Cambodia.

Sexual Behaviors

Approximately half (52.88%) currently have sex with regular male partner(s), just over half (57.91%) currently have sex with casual male partner(s), and the majority (84.10%) had condomless anal sex with a regular male partner in the past 6 months. Nearly one-fifth (17.32%) had received things or opportunities in exchange for sex, 2.87% had given things or opportunities for sex, and 9.78% had both given and received things or opportunities for sex. Almost two-thirds (62.19%) had group sex involving two or more men at the same time at least once in the last 6 months.

Sexual Behaviors		Cambodia (n=945)
Do you currently have sex with a regular male partner(s)?		
Yes		422 (52.88)
No		376 (47.12)
Do you currently have sex with casual male partner(s)?		
Yes		461 (57.91)
No		335 (42.09)
Had condomless anal sex with a regular male partner in the last 6 months		
Yes		349 (84.10)
No		66 (15.90)
In the last 6 months, how often did you have group sex involving at least two other men at the same time?		
Every week		126 (15.83)
Monthly		138 (17.34)
Once/a few times		231 (29.02)
Never		301 (37.81)
Have you ever given or received things or opportunities in exchange for sex?		
Yes, I was the one receiving		163 (17.32)
Yes, I was the one giving		27 (2.87)
Yes, I have both given and received		92 (9.78)
No		659 (70.03)



Access to HIV services

Respondents were asked when they received their last HIV test, to which 16.86% indicated that it was “within the past 6 months”, 11.78% responded “6-12 months ago”, 22.92% responded “more than one year ago”, and 48.43% responded “never tested”. The three most common reasons why respondents tested for HIV were “voluntary testing” (31.09%), “blood/organ donation” (2.39%), and “job application” (8.15%). The three most common reasons for not testing were “I am at very low risk for HIV” (14.06%), “I trust my boyfriend to be HIV negative” (34.24%), and “I don’t know where to get tested” (11.79%). The minority of respondents (7.51%) had ever self-tested for HIV. When asked what their current HIV status was, 46.24% responded “negative”, 1.90% responded “positive”, and 51.85% responded “never tested/don’t know”.

Access to HIV services		Cambodia (n=945)
Last HIV Test		
Within the past 6 months		156 (16.86)
6-12 months ago		109 (11.78)
More than one year ago		212 (22.92)
Never tested		448 (48.43)
Three most common reasons for testing		
Voluntary testing		286 (31.09)
Blood/organ donation		22 (2.39)
Job application		75 (8.15)
Other reason		89 (9.67)
Never tested		448 (48.70)
Three most common reasons for not testing		
I am at very low risk for HIV		62 (14.06)
I trust my boyfriend to be HIV negative		151 (34.24)
I don’t know where to get tested		52 (11.79)
Other reason		176 (39.91)
Ever self-tested for HIV		
Yes		71 (7.51)
No		397 (42.01)
Missing/unknown		477 (50.48)
HIV Status		
Negative		437 (46.24)
Positive		18 (1.90)
Never tested/don’t know		490 (51.85)





PrEP and PEP Uptake

PrEP: Respondents were asked about how much they have heard about pre-exposure prophylaxis (PrEP), to which 1.79% responded “a lot”, 15.01% responded “a little”, and 83.20% responded “I’d never heard about it before this survey”. The minority of respondents (13.33%) have veer taken PrEP to reduce the chance of HIV infection.

PEP: Very few respondents had ever taken PEP; 14 (2.05%) reported receiving PEP once and 4 (0.58%) reported receiving PEP more than once. Over half of those who have taken PEP (55.56%) reported having very good experiences taking PEP, 16.67% reported having a satisfactory experience, 22.22% reported having a neutral experience, and 5.56% reported having a very bad experience.

PrEP and PEP Uptake		Cambodia (n=945)
Number of times you received PEP		
Once		14 (2.05)
More than once		4 (0.58)
Never taken PEP		666 (97.37)
Experience taking PEP		
Very good		10 (55.56)
Satisfactory		3 (16.67)
Neutral		4 (22.22)
Unsatisfactory		0 (0.00)
Very bad		1 (5.56)
How much have you heard about pre-exposure prophylaxis (PrEP)?		
A lot		16 (1.79)
A little		134 (15.01)
I’d never heard about it before this survey		743 (83.20)
Ever taken PrEP to reduce the chance of HIV infection		
Yes		20 (13.33)
No		130 (86.67)
How often PrEP is taken		
Everyday		6 (30.00)
Every other day		1 (5.00)
Before and after sex		2 (10.00)
Only before sex		6 (30.00)
I’ve stopped taking it permanently		4 (20.00)
I’ve stopped taking it temporarily		1 (5.00)
Other		0 (0.00)

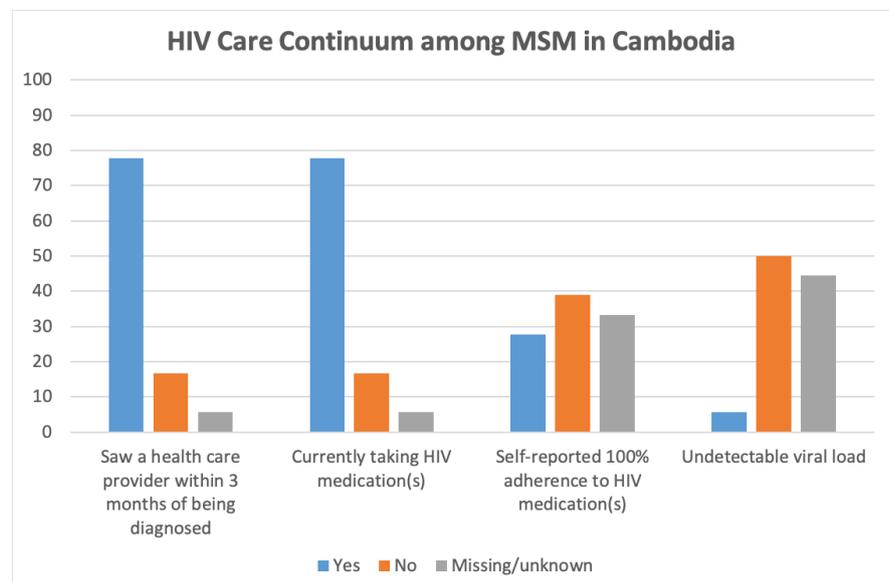




HIV Care Continuum

Among the self-reported HIV-positive respondents, 77.78% saw a health care provider within 3 months of being diagnosed, 77.78% are currently taking HIV medication(s), 27.78% self-reported being 100% adherent to their HIV medication(s), and 5.56% self-reported that their last viral load test result was undetectable.

HIV Care Continuum (among known HIV+)		Cambodia (n=945)
Saw a health care provider within 3 months of being diagnosed		
Yes		14 (77.78)
No		3 (16.67)
Missing/unknown		1 (5.56)
Currently taking HIV medication(s)		
Yes		14 (77.78)
No		3 (16.67)
Missing/unknown		1 (5.56)
Self-reported 100% adherence to HIV medication(s)		
Yes		5 (27.78)
No		7 (38.89)
Missing/unknown		6 (33.33)
Last viral load test result		
Undetectable		1 (5.56)
Detectable		9 (50.00)
Missing/unknown		8 (44.44)



There were no statistically significant associations between demographic characteristics and the steps of the HIV care continuum.



Bivariate associations between steps of the HIV care continuum and demographic characteristics – Cambodia

	Saw a health care provider within 3 months of being diagnosed				Currently taking HIV medication(s)			
	Yes	No	Missing	P-value	Yes	No	Missing	P-value
Year in which you were born				0.0988				0.7838
1994-1996	7 (77.8)	1 (11.1)	1 (11.1)		7 (77.8)	1 (11.1)	1 (11.1)	
1997-1999	6 (100.0)	0 (0.0)	0 (0.0)		5 (83.3)	1 (16.7)	0 (0.0)	
2000-2003	1 (33.3)	2 (66.7)	0 (0.0)		2 (66.7)	1 (33.3)	0 (0.0)	
Gender assigned at birth								
Male	14 (77.78)	3 (16.7)	1 (5.6)		14 (77.8)	3 (16.7)	1 (5.6)	
Gender identity				0.5979				0.5979
Male	3 (100.0)	0 (0.0)	0 (0.0)		3 (100.0)	0 (0.0)	0 (0.0)	
Local gender identity	11 (73.3)	3 (20.0)	1 (6.7)		11 (73.3)	3 (20.0)	1 (6.7)	
What is your sexual orientation?				0.7768				0.4797
Gay	11 (78.6)	2 (14.3)	1 (7.1)		10 (71.4)	3 (21.4)	1 (7.1)	
Bisexual	3 (75.0)	1 (25.0)	0 (0.0)		4 (100.0)	0 (0.0)	0 (0.0)	
What is your marital status?				0.2876				0.7275
Not married	10 (90.9)	1 (9.1)	0 (0.0)		9 (81.8)	2 (18.2)	0 (0.0)	
Married	1 (100.0)	0 (0.0)	0 (0.0)		1 (100.0)	0 (0.0)	0 (0.0)	
Divorced/separated/widowed	1 (50.0)	1 (50.0)	0 (0.0)		2 (100.0)	0 (0.0)	0 (0.0)	
Which of the following best describes the area where you live?				0.7633				0.7633
Capital city of my state/territory	6 (85.7)	1 (14.3)	0 (0.0)		6 (85.7)	1 (14.3)	0 (0.0)	
Other city in my state/territory	2 (100.0)	0 (0.0)	0 (0.0)		2 (100.0)	0 (0.0)	0 (0.0)	
Regional center/town	6 (66.7)	2 (22.2)	1 (11.1)		6 (66.7)	2 (22.2)	1 (11.1)	
Are you currently employed?								
Employed full-time	12 (85.7)	2 (14.3)	0 (0.0)		12 (85.7)	2 (14.3)	0 (0.0)	
Are you currently a student?				0.8233				0.8233
Yes, full time	1 (100.0)	0 (0.0)	0 (0.0)		1 (100.0)	0 (0.0)	0 (0.0)	
Yes, part-time	1 (100.0)	0 (0.0)	0 (0.0)		1 (100.0)	0 (0.0)	0 (0.0)	
No	10 (83.3)	2 (16.7)	0 (0.0)		10 (83.3)	2 (16.7)	0 (0.0)	
	Self-reported 100% adherence to HIV medication(s)				Undetectable viral load			
	Yes	No	Missing	P-value	Undetectable	Undetectable	Missing	P-value
Year in which you were born				0.5943				0.6053
1994-1996	3 (33.3)	3 (33.3)	3 (33.3)		0 (0.0)	5 (55.6)	4 (44.4)	
1997-1999	2 (33.3)	3 (50.0)	1 (16.7)		1 (16.7)	3 (50.0)	2 (33.3)	
2000-2003	0 (0.0)	1 (33.3)	2 (66.7)		0 (0.0)	1 (33.3)	2 (66.7)	
Gender assigned at birth								
Male	5 (27.8)	7 (38.9)	6 (33.3)		1 (5.6)	9 (50.0)	8 (44.4)	
Gender identity				0.9663				0.1054
Male	1 (33.3)	1 (33.3)	1 (33.3)		0 (0.0)	0 (0.0)	3 (100.0)	
Local gender identity	4 (26.7)	6 (40.0)	5 (33.3)		1 (6.7)	9 (60.0)	5 (33.3)	
What is your sexual orientation?				0.2476				0.3662
Gay	3 (21.4)	5 (35.7)	6 (42.9)		1 (7.1)	8 (57.1)	5 (35.7)	
Bisexual	2 (50.0)	2 (50.0)	0 (0.0)		0 (0.0)	1 (25.0)	3 (75.0)	
What is your marital status?				0.4312				0.7135
Not married	5 (45.5)	4 (36.4)	2 (18.2)		1 (9.1)	6 (54.6)	4 (36.4)	
Married	0 (0.0)	1 (100.0)	0 (0.0)		0 (0.0)	1 (100.0)	0 (0.0)	
Divorced/separated/widowed	0 (0.0)	2 (100.0)	0 (0.0)		0 (0.0)	2 (100.0)	0 (0.0)	
Which of the following best describes the area where you live?				0.5245				0.7878
Capital city of my state/territory	3 (42.9)	2 (28.6)	2 (28.6)		1 (14.3)	3 (42.9)	3 (42.9)	
Other city in my state/territory	1 (50.0)	1 (50.0)	0 (0.0)		0 (0.0)	1 (50.0)	1 (50.0)	
Regional center/town	1 (11.1)	4 (44.4)	4 (44.4)		0 (0.0)	5 (55.6)	4 (44.4)	
Are you currently employed?								
Employed full-time	5 (35.7)	7 (50.0)	2 (14.3)		1 (7.1)	9 (64.3)	4 (28.6)	
Are you currently a student?				0.5804				0.2119
Yes, full time	0 (0.0)	1 (100.0)	0 (0.0)		0 (0.0)	0 (0.0)	1 (100)	
Yes, part-time	1 (100.0)	0 (0.0)	0 (0.0)		0 (0.0)	0 (0.0)	1 (100.0)	
No	4 (33.3)	6 (50.0)	2 (16.7)		1 (8.3)	9 (75.0)	2 (16.7)	



Stigma, Discrimination, and Acceptance

The majority of respondents do not know any HIV-positive persons (51.13%), are willing to befriend someone who is HIV-positive (71.67%), are willing to work with someone who is HIV-positive (73.93%), are willing to share food with someone who is HIV-positive (76.41%), and are willing to provide care for someone who is HIV-positive (70.32%).

Most of the respondents are not willing to have sex with someone who they knew was HIV-positive (73.14%), and are not willing to have sex with a casual partner who said they were HIV-positive before having sex (74.94%).

Stigma, Discrimination, and Acceptance

	Cambodia (n=945)
How many HIV-positive persons do you know?	
0	453 (51.13)
1-5	398 (44.92)
6-10	29 (3.27)
10+	6 (0.68)
Will you befriend someone who is HIV-positive?	
Yes	635 (71.67)
No	251 (28.33)
Will you work with someone who is HIV-positive?	
Yes	655 (73.93)
No	231 (26.07)
Will you share food with someone who is HIV-positive?	
Yes	677 (76.41)
No	209 (23.59)
Will you provide care (friend or family) for someone who is HIV-positive?	
Yes	623 (70.32)
No	263 (29.68)
Have you ever had sex with someone who you knew was HIV-positive?	
Yes	238 (26.86)
No	648 (73.14)
If a potential casual partner told you he was HIV-positive before having sex for the first time, would you still have sex with him?	
Yes	222 (25.06)
No	664 (74.94)
How much do you agree with the following statements?	
HIV-positive people should be outcast by their spouse and family members	
Strongly agree	22 (2.49)
Agree	35 (3.96)
Disagree	561 (63.46)
Strongly disagree	266 (30.09)
HIV-positive people would lose friends if their friends knew their HIV status	
Strongly agree	17 (1.92)
Agree	65 (7.35)
Disagree	552 (62.44)
Strongly disagree	250 (28.28)
HIV-positive people should be forced to leave their villages	
Strongly agree	9 (1.02)
Agree	43 (4.86)
Disagree	541 (61.20)
Strongly disagree	291 (32.92)
Their family would not care for HIV positive people	
Strongly agree	9 (1.02)
Agree	50 (5.66)
Disagree	555 (62.78)
Strongly disagree	270 (30.54)
No one would be willing to take care of their children when HIV positive people die from AIDS	
Strongly agree	15 (1.70)
Agree	64 (7.24)
Disagree	561 (63.46)
Strongly disagree	244 (27.60)
Children of HIV-positive parents should not go to school	
Strongly agree	11 (1.24)
Agree	41 (4.64)
Disagree	550 (62.22)
Strongly disagree	282 (31.90)
HIV-positive people should not have the same rights to education and employment as others	
Strongly agree	16 (1.81)
Agree	61 (6.90)
Disagree	542 (61.31)
Strongly disagree	265 (29.98)



Suicidality

Respondents were asked “Have you ever thought about or attempted to kill yourself?” to which 90.94% said “Never”, 6.04% said “It was just a brief passing thought”, 1.51% said “I have had a plan at least once to kill myself and really wanted to die”, and 1.51% said “I have attempted to kill myself and really hoped to die”. They were also asked “How often have you thought about killing yourself in the last year?” to which the majority (93.84%) responded “never”, 3.95% responded “rarely (1 time)”, 1.86% responded “sometimes (2 times)”, 0.12% responded “often (3-4 times)”, and 0.23% responded “very often (5 or more times)”. Respondents were also asked “Have you ever told someone that you were going to commit suicide or that you might do it?” to which 95.59% said “no”, 3.25% said “yes, at one time, and really wanted to die”, and 1.16% said “yes, at more than once, and really wanted to do it”. When asked “how likely will you attempt suicide someday?” 90.48% responded “never”.

Suicidality	
	Cambodia (n=945)
Have you ever thought about or attempted to kill yourself?	
Never	783 (90.94)
It was just a brief passing thought	52 (6.04)
I have had a plan at least once to kill myself and really wanted to die	13 (1.51)
I have attempted to kill myself, and really hoped to die	13 (1.51)
How often have you thought about killing yourself in the last year?	
Never	80 (93.84)
Rarely (1 time)	34 (3.95)
Sometimes (2 times)	16 (1.86)
Often (3-4 times)	1 (0.12)
Very often (5 or more times)	2 (0.23)
Have you ever told someone that you were going to commit suicide or that you might do it?	
No	823 (95.59)
Yes, at one time, and really wanted to die	28 (3.25)
Yes, at more than once, and really wanted to do it	10 (1.16)
How likely that you will attempt suicide someday?	
Never	779 (90.48)
No chance at all	17 (1.97)
Rather unlikely	16 (1.86)
Unlikely	27 (3.14)
Likely	4 (0.46)
Rather likely	14 (1.63)
Very likely	4 (0.46)



Drug and Alcohol Use

Participants were asked how often they would have six or more drinks on one occasion. Approximately half (51.20%) responded “less than monthly”, 27.91% responded “monthly”, 16.78% responded “weekly”, and 4.11% responded “daily or almost daily”.

The three most commonly used drugs by respondents in the past 6 months were poppers (12.28%), erectile dysfunction drugs (7.92%), and crystal meth (5.86%).

Demographics		Cambodia (n=945)
How often do you have six or more drinks on one occasion?		
Less than monthly		299 (51.20)
Monthly		163 (27.91)
Weekly		98 (16.78)
Daily or almost daily		24 (4.11)
Have you used these drugs in the past 6 months?		
Amphetamine		
Yes		56 (6.44)
No		814 (93.56)
Crystal meth/ice (inhaling/smoking)		
Yes		74 (8.51)
No		796 (91.49)
Crystal meth/ice (injecting)		
Yes		7 (0.80)
No		863 (99.20)
Ecstasy/MDMA		
Yes		6 (0.69)
No		864 (99.31)
Ketamine		
Yes		8 (0.92)
No		862 (99.08)
GHB		
Yes		4 (0.46)
No		866 (99.54)
Xanax/Alprazolam		
Yes		3 (0.34)
No		867 (99.66)
Heroin		
Yes		5 (0.57)
No		865 (99.43)
Opium		
Yes		7 (0.80)
No		863 (99.20)
Marijuana		
Yes		7 (0.80)
No		863 (99.20)
Poppers		
Yes		86 (9.89)
No		784 (90.11)
Erectile dysfunction drugs (Viagra/Cialis)		
Yes		79 (9.08)
No		791 (90.92)
Pro/B5/4x100		
Yes		109 (12.53)
No		761 (87.47)
Hormones (steroids, progesterone, estrogen)		
Yes		13 (1.49)
No		857 (98.51)



Violence and Bullying

The majority of respondents (91.39%) had not been bullied in the past 12 months because of their sexual orientation or because they did not act like a boy/man.

Violence and Bullying		Cambodia (n=945)
Bullied because of your sexual orientation or because you did not act like a boy/man in the past 12 months		
Yes		75 (8.61)
No		796 (91.39)

Key findings

- A higher proportion of participants (85%) from Cambodia identified as Gay.
- Condom less anal sex was also higher in Cambodia with 85% of them reporting condom less sex with regular partners. Interestingly around 70% of them reported not having exchanged thing or opportunities in exchange for sex.
- Only around 2% of the participants reported their status know about their being positive. A little less than half (48%) of the participants continue to be never tested or those who don't know about their HIV test results. Around 8% of them reported having use HIV self-testing kits to know their status. Interestingly as compared to other Thailand and Lao PDR, the participants in Cambodia reported 'trust' in boyfriends to be one of the reasons to not undergo HIV testing. Intervention messages need to focus on the importance of condom use with regular partners and also promote couple testing strategies in Cambodia.
- Of those who reported being HIV positive, around 78% of them reported visiting a health care provider and all those visiting the health care provider being on medication. Only a little more than one-fourth (28%) of them reported self-adherence, with only one of the participants reported being undetectable for HIV viral load in the study.
- A higher proportion of around 83% of the participants have never heard about PrEP and PEP in Cambodia, indicating the need for awareness about additional prevention tools to be created among the young MSM in Cambodia.
- While a little less than 50% of the participants were aware of HIV positive individuals, around three-fourth of the participants were not willing to have sex with someone who was HIV positive. It is important to create positive attitudes towards PLHIV community among the participants.
- The suicidal tendency rates among young MSM in Cambodia were similar to the Lao PDR. Though the suicidal ideations were lowers, around 39% of the participants exhibited symptoms indicating clinical depression.



8. COUNTRY SPECIFIC findings from survey data



8.2. Lao PDR

The total of 704 respondents attempted attempted until the last questions of the online survey. Therefore, the responses from those 945 were used for analysis on the below modules.

Demographics

Approximately a third of respondents (35.94%) were born between 1994 and 1996, 38.64% were born between 1997 and 1999, and 25.43% were born between 2000 and 2003. All respondents were assigned male at birth and currently 47.87% and 51.28% identify as male and a local gender identity, respectively. Two-thirds (68.04%) identify as gay, 27.70% identify as bisexual, and 4.26% identify as straight. Nearly all (99.37%) are unmarried.

Over half of respondents (53.84%) live in the capital city of their state/territory, 21.73% live in another city in their state/territory, 14.20% live in a regional center/town, and 10.34% live in a rural or remote area. Less than a fifth of respondents (18.15%) are employed full-time, 5.95% are employed part-time, and over three-quarters (75.90%) are unemployed. Nearly two-thirds (65.10%) are full-time students, 5.79% are part-time students, and 29.11% are not students.

Demographics	
	Lao PDR (n=704)
Year in which you were born	
1994-1996	253 (35.94)
1997-1999	272 (38.64)
2000-2003	179 (25.43)
Gender assigned at birth	
Male	704 (100.00)
Female	0 (0.00)
Gender identity	
Male	337 (47.87)
Local gender identity	361 (51.28)
Other	6 (0.85)
What is your sexual orientation?	
Gay	479 (68.04)
Bisexual	195 (27.70)
Heterosexual/straight	30 (4.26)
What is your marital status?	
Not married	635 (99.37)
Married	2 (0.31)
Divorced/separated/widowed	2 (0.31)
Which of the following best describes the area where you live?	
Capital city of my state/territory	379 (53.84)
Other city in my state/territory	153 (21.73)
Regional center/town	100 (14.20)
Rural or remote area	72 (10.34)
Are you currently employed?	
Employed full-time	116 (18.15)
Employed part-time	38 (5.95)
Not working/unemployed	485 (75.90)
Are you currently a student?	
Yes, full time	416 (65.10)
Yes, part-time	37 (5.79)
No	186 (29.11)



“
 Young MSM and transgender key population data in Lao PDR on health, education, economy, and employment still remain limited. Strong data availability will help decision-makers to conduct evidence-based advocacy to create a friendly environment for young MSM and the transgender key population
 ”

Olam Rasaphonh,
 Program Coordinator
 CHIAS, Lao PDR.

Sexual Behaviors

Just over half (54.43%) currently have sex with regular male partner(s), nearly three-quarters (72.77%) currently have sex with casual male partner(s), and nearly three-quarters (74.58%) had condomless anal sex with a regular male partner in the past 6 months. Over one-third (39.97%) had received things or opportunities in exchange for sex, 7.31% had given things or opportunities for sex, and 9.46% had both given and received things or opportunities for sex. Nearly half (46.84%) had group sex involving two or more men at the same time at least once in the last 6 months.

Sexual Behaviors		Lao PDR (n=704)
Do you currently have sex with a regular male partner(s)?		
Yes		338 (54.43)
No		283 (45.57)
Do you currently have sex with casual male partner(s)?		
Yes		449 (72.77)
No		168 (27.23)
Had condomless anal sex with a regular male partner in the last 6 months		
Yes		308 (74.58)
No		105 (25.42)
In the last 6 months, how often did you have group sex involving at least two other men at the same time?		
Every week		82 (13.29)
Monthly		85 (13.78)
Once/a few times		122 (19.77)
Never		328 (53.16)
Have you ever given or received things or opportunities in exchange for sex?		
Yes, I was the one receiving		279 (39.97)
Yes, I was the one giving		51 (7.31)
Yes, I have both given and received		66 (9.46)
No		302 (43.27)



Access to HIV services

Respondents were asked when they received their last HIV test, to which 28.05% indicated that it was “within the past 6 months”, 10.57% responded “6-12 months ago”, 8.52% responded “more than one year ago”, and 52.86% responded “never tested”. The three most common reasons why respondents tested for HIV were “voluntary testing” (32.25%), “blood/organ donation” (6.48%), and “job application” (2.12%). The three most common reasons for not testing were “I am at very low risk for HIV” (26.11%), “I trust my boyfriend to be HIV negative” (18.06%), and “I don’t know where to get tested” (13.89%). The minority of respondents (4.55%) had ever self-tested for HIV. When asked what their current HIV status was, 40.20% responded “negative”, 3.55% responded “positive”, and 56.25% responded “never tested/don’t know”.

Access to HIV services		Lao PDR (n=704)
Last HIV Test		
Within the past 6 months		191 (28.05)
6-12 months ago		72 (10.57)
More than one year ago		58 (8.52)
Never tested		360 (52.86)
Three most common reasons for testing		
Voluntary testing		219 (32.25)
Blood/organ donation		44 (6.48)
Job application		15 (2.12)
Other reason		41 (6.04)
Never tested		360 (53.02)
Three most common reasons for not testing		
I am at very low risk for HIV		94 (26.11)
I trust my boyfriend to be HIV negative		65 (18.06)
I don’t know where to get tested		50 (13.89)
Other reason		151 (41.94)
Ever self-tested for HIV		
Yes		32 (4.55)
No		285 (40.48)
Missing/unknown		387 (54.97)
HIV Status		
Negative		283 (40.20)
Positive		25 (3.55)
Never tested/don’t know		396 (56.25)





PrEP and PEP Uptake

PrEP: Respondents were asked about how much they have heard about pre-exposure prophylaxis (PrEP), to which 1.79% responded “a lot”, 15.01% responded “a little”, and 83.20% responded “I’d never heard about it before this survey”. The minority of respondents (13.33%) have veer taken PrEP to reduce the chance of HIV infection.

PEP: Very few respondents had ever taken PEP; 14 (2.05%) reported receiving PEP once and 4 (0.58%) reported receiving PEP more than once. Over half of those who have taken PEP (55.56%) reported having very good experiences taking PEP, 16.67% reported having a satisfactory experience, 22.22% reported having a neutral experience, and 5.56% reported having a very bad experience.

PrEP and PEP Uptake		Lao PDR (n=704)
Number of times you received PEP		
Once		7 (1.61)
More than once		9 (2.07)
Never taken PEP		418 (96.31)
Experience taking PEP		
Very good		8 (50.00)
Satisfactory		0 (0.00)
Neutral		8 (50.00)
Unsatisfactory		0 (0.00)
Very bad		0 (0.00)
How much have you heard about pre-exposure prophylaxis (PrEP)?		
A lot		71 (10.77)
A little		176 (26.71)
I’d never heard about it before this survey		412 (62.52)
Ever taken PrEP to reduce the chance of HIV infection		
Yes		18 (7.29)
No		229 (92.71)
How often PrEP is taken		
Everyday		7 (38.89)
Every other day		0 (0.00)
Before and after sex		1 (5.56)
Only before sex		4 (22.22)
I’ve stopped taking it permanently		5 (27.78)
I’ve stopped taking it temporarily		0 (0.00)
Other		1 (0.70)

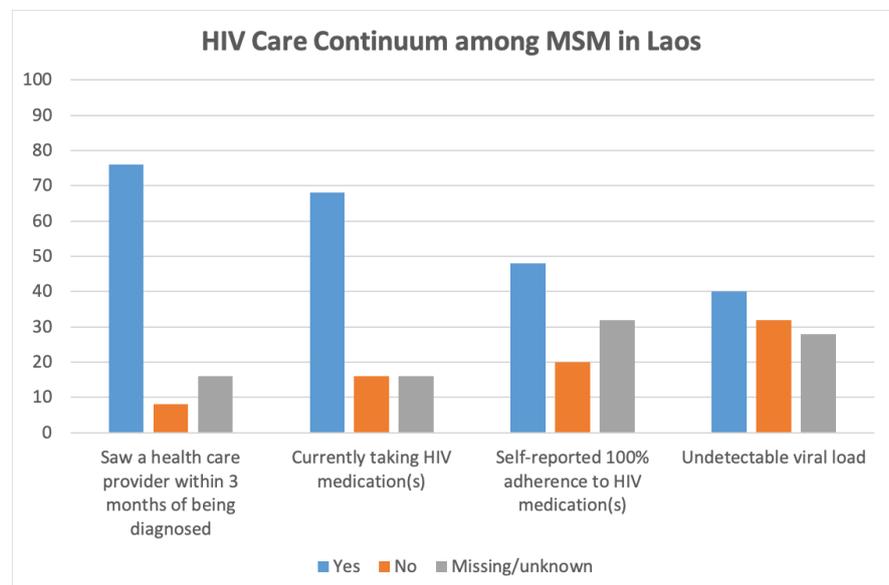




HIV Care Continuum

Among the self-reported HIV-positive respondents, 76.00% saw a health care provider within 3 months of being diagnosed, 68.00% are currently taking HIV medication(s), 48.00% self-reported being 100% adherent to their HIV medication(s), and 40.00% self-reported that their last viral load test result was undetectable.

HIV Care Continuum (among known HIV+)		Lao PDR (n=25)
Saw a health care provider within 3 months of being diagnosed		
Yes		19 (76.00)
No		2 (8.00)
Missing/unknown		4 (16.00)
Currently taking HIV medication(s)		
Yes		17 (68.00)
No		4 (16.00)
Missing/unknown		4 (16.00)
Self-reported 100% adherence to HIV medication(s)		
Yes		12 (48.00)
No		5 (20.00)
Missing/unknown		8 (32.00)
Last viral load test result		
Undetectable		10 (40.00)
Detectable		8 (32.00)
Missing/unknown		7 (28.00)



When examining bivariate associations between demographic characteristics and the steps of the HIV care continuum, gender identity was associated with having seen a health care provider within 3 months of being diagnosed, currently taking HIV medication(s), and self-reporting 100% adherence to HIV medication(s). Compared to MSM who identified as male, MSM who identified as a local gender identity were more likely to achieve each of these three steps of the HIV care continuum. Additionally, MSM who identify as gay were more likely to be currently taking HIV medication(s) compared to bisexual and heterosexual/straight MSM.



Bivariate associations between steps of the HIV care continuum and demographic characteristics – Lao PDR

	Saw a health care provider within 3 months of being diagnosed				Currently taking HIV medication(s)			
	Yes	No	Missing	P-value	Yes	No	Missing	P-value
Year in which you were born				0.4544				0.3729
1994-1996	13 (86.7)	1 (6.7)	1 (6.7)		12 (80.0)	2 (13.3)	1 (6.7)	
1997-1999	5 (62.5)	1 (12.5)	2 (25.0)		4 (50.0)	2 (25.0)	2 (25.0)	
2000-2003	1 (50.0)	0 (0.0)	1 (50.0)		1 (50.0)	0 (0.0)	1 (50.0)	
Gender assigned at birth								
Male	19 (76.0)	2 (8.0)	4 (16.0)		17 (68.0)	4 (16.0)	4 (16.0)	
Gender identity				0.0383				0.0497
Male	5 (50.0)	2 (20.0)	3 (30.0)		4 (40.0)	3 (30.0)	3 (30.0)	
Local gender identity	14 (93.0)	0 (0.0)	1 (6.7)		13 (86.7)	1 (6.7)	1 (6.7)	
What is your sexual orientation?				0.1200				0.0135
Gay	14 (87.5)	0 (0.0)	2 (12.5)		14 (87.5)	0 (0.0)	2 (12.5)	
Bisexual	2 (40.0)	1 (20.0)	2 (40.0)		1 (20.0)	2 (40.0)	2 (40.0)	
Heterosexual/straight	3 (75.0)	1 (25.0)	0 (0.0)		2 (50.0)	2 (50.0)	0 (0.0)	
What is your marital status?								
Not married	19 (90.5)	2 (9.5)	0 (0.0)		17 (81.0)	4 (19.1)	0 (0.0)	
Which of the following best describes the area where you live?				0.5934				0.2188
Capital city of my state/territory	7 (63.6)	2 (18.2)	2 (18.2)		5 (45.5)	4 (36.4)	2 (18.2)	
Other city in my state/territory	6 (100.0)	0 (0.0)	0 (0.0)		6 (100.0)	0 (0.0)	0 (0.0)	
Regional center/town	3 (75.0)	0 (0.0)	1 (25.0)		3 (75.0)	0 (0.0)	1 (25.0)	
Rural or remote area	3 (75.0)	0 (0.0)	1 (25.0)		3 (75.0)	0 (0.0)	1 (25.0)	
Are you currently employed?				0.5065				0.7886
Employed full-time	7 (100.0)	0 (0.0)	0 (0.0)		6 (85.7)	1 (14.3)	0 (0.0)	
Employed part-time	1 (100.0)	0 (0.0)	0 (0.0)		1 (100.0)	0 (0.0)	0 (0.0)	
Not working/unemployed	11 (84.6)	2 (15.4)	0 (0.0)		10 (76.9)	3 (23.1)	0 (0.0)	
Are you currently a student?				0.8185				0.4261
Yes, full time	9 (90.0)	1 (10.0)	0 (0.0)		7 (70.0)	3 (30.0)	0 (0.0)	
Yes, part-time	3 (100.0)	0 (0.0)	0 (0.0)		3 (100.0)	0 (0.0)	0 (0.0)	
No	7 (87.5)	1 (12.5)	0 (0.0)		7 (87.5)	1 (12.5)	0 (0.0)	
	Self-reported 100% adherence to HIV medication(s)				Undetectable viral load			
	Yes	No	Missing	P-value	Undetectable	Undetectable	Missing	P-value
Year in which you were born				0.5713				0.2566
1994-1996	8 (53.3)	4 (26.7)	3 (20.0)		7 (46.7)	6 (40.0)	2 (13.3)	
1997-1999	3 (37.5)	1 (12.5)	4 (50.0)		3 (37.5)	1 (12.5)	4 (50.0)	
2000-2003	1 (50.0)	0 (0.0)	1 (50.0)		0 (0.0)	1 (50.0)	1 (50.0)	
Gender assigned at birth								
Male	12 (48.0)	5 (20.0)	8 (32.0)		10 (40.0)	8 (32.0)	7 (28.0)	
Gender identity				0.0333				0.5514
Male	2 (20.0)	2 (20.0)	6 (60.0)		5 (50.0)	2 (20.0)	3 (30.0)	
Local gender identity	10 (66.7)	3 (20.0)	2 (13.3)		5 (33.3)	6 (40.0)	4 (26.7)	
What is your sexual orientation?				0.0583				0.1703
Gay	10 (62.5)	4 (25.0)	2 (12.5)		4 (25.0)	7 (43.8)	5 (31.3)	
Bisexual	1 (20.0)	0 (0.0)	4 (80.0)		3 (60.0)	0 (0.0)	2 (40.0)	
Heterosexual/straight	1 (25.0)	1 (25.0)	2 (50.0)		3 (75.0)	1 (25.0)	0 (0.0)	
What is your marital status?								
Not married	12 (57.1)	5 (23.8)	4 (19.1)		10 (47.6)	8 (38.1)	3 (14.3)	
Which of the following best describes the area where you live?				0.4425				0.2182
Capital city of my state/territory	4 (36.4)	1 (9.1)	6 (54.6)		6 (54.6)	1 (9.1)	4 (36.4)	
Other city in my state/territory	4 (66.7)	2 (33.3)	0 (0.0)		2 (33.3)	4 (66.7)	0 (0.0)	
Regional center/town	2 (50.0)	1 (25.0)	1 (25.0)		1 (25.0)	1 (25.0)	2 (50.0)	
Rural or remote area	2 (50.0)	1 (25.0)	1 (25.0)		1 (25.0)	2 (50.0)	1 (25.0)	
Are you currently employed?				0.9039				0.4492
Employed full-time	4 (57.1)	2 (28.6)	1 (14.3)		3 (42.9)	4 (57.1)	0 (0.0)	
Employed part-time	1 (100.0)	0 (0.0)	0 (0.0)		1 (100.0)	0 (0.0)	0 (0.0)	
Not working/unemployed	7 (53.9)	3 (23.1)	3 (23.1)		6 (46.2)	4 (30.8)	3 (23.1)	
Are you currently a student?				0.5479				0.2994
Yes, full time	6 (60.0)	1 (10.0)	3 (30.0)		6 (60.0)	2 (20.0)	2 (20.0)	
Yes, part-time	2 (66.7)	1 (33.3)	0 (0.0)		1 (33.3)	1 (33.3)	1 (33.3)	
No	4 (50.0)	3 (37.5)	1 (12.5)		3 (37.5)	5 (62.5)	0 (0.0)	



Stigma, Discrimination, and Acceptance

The majority of respondents do not know any HIV-positive persons (74.43%), are willing to befriend someone who is HIV-positive (80.97%), are willing to work with someone who is HIV-positive (84.02%), are willing to share food with someone who is HIV-positive (77.17%), and are willing to provide care for someone who is HIV-positive (86.76%).

Most of the respondents are not willing to have sex with someone who they knew was HIV-positive (88.89%), and are not willing to have sex with a casual partner who said they were HIV-positive before having sex (87.67%).

Stigma, Discrimination, and Acceptance

	Lao PDR (n=704)
How many HIV-positive persons do you know?	
0	489 (74.43)
1-5	148 (22.53)
6-10	15 (2.28)
10+	5 (0.76)
Will you befriend someone who is HIV-positive?	
Yes	532 (80.97)
No	125 (19.03)
Will you work with someone who is HIV-positive?	
Yes	552 (84.02)
No	105 (15.98)
Will you share food with someone who is HIV-positive?	
Yes	507 (77.17)
No	150 (22.83)
Will you provide care (friend or family) for someone who is HIV-positive?	
Yes	570 (86.76)
No	87 (13.24)
Have you ever had sex with someone who you knew was HIV-positive?	
Yes	73 (11.11)
No	584 (88.89)
If a potential casual partner told you he was HIV-positive before having sex for the first time, would you still have sex with him?	
Yes	81 (12.33)
No	576 (87.67)
How much do you agree with the following statements?	
HIV-positive people should be outcast by their spouse and family members	
Strongly agree	50 (7.63)
Agree	109 (16.64)
Disagree	392 (59.85)
Strongly disagree	104 (15.88)
HIV-positive people would lose friends if their friends knew their HIV status	
Strongly agree	58 (8.85)
Agree	100 (15.27)
Disagree	406 (61.98)
Strongly disagree	91 (13.89)
HIV-positive people should be forced to leave their villages	
Strongly agree	46 (7.02)
Agree	82 (12.52)
Disagree	417 (63.66)
Strongly disagree	110 (16.79)
Their family would not care for HIV positive people	
Strongly agree	53 (8.09)
Agree	110 (16.79)
Disagree	380 (58.02)
Strongly disagree	112 (17.10)
No one would be willing to take care of their children when HIV positive people die from AIDS	
Strongly agree	50 (7.63)
Agree	91 (13.89)
Disagree	409 (62.44)
Strongly disagree	105 (16.03)
Children of HIV-positive parents should not go to school	
Strongly agree	40 (6.11)
Agree	98 (14.96)
Disagree	396 (60.46)
Strongly disagree	121 (18.47)
HIV-positive people should not have the same rights to education and employment as others	
Strongly agree	51 (7.79)
Agree	118 (18.02)
Disagree	370 (56.49)
Strongly disagree	116 (17.17)



Suicidality

Respondents were asked “Have you ever thought about or attempted to kill yourself?” to which 89.91% said “Never”, 6.67% said “It was just a brief passing thought”, 2.33% said “I have had a plan at least once to kill myself and really wanted to die”, and 1.09% said “I have attempted to kill myself and really hoped to die”. They were also asked “How often have you thought about killing yourself in the last year?” to which the majority (89.91%) responded “never”, 6.06% responded “rarely (1 time)”, 2.17% responded “sometimes (2 times)”, 0.62% responded “often (3-4 times)”, and 1.24% responded “very often (5 or more times)”. Respondents were also asked “Have you ever told someone that you were going to commit suicide or that you might do it?” to which 95.05% said “no”, 3.42% said “yes, at one time, and really wanted to die”, and 1.09% said “yes, at more than once, and really wanted to do it”. When asked “how likely will you attempt suicide someday?” 89.75% responded “never”.

Suicidality	
	Lao PDR (n=704)
Have you ever thought about or attempted to kill yourself?	
Never	579 (89.91)
It was just a brief passing thought	43 (6.67)
I have had a plan at least once to kill myself and really wanted to die	15 (2.33)
I have attempted to kill myself, and really hoped to die	7 (1.09)
How often have you thought about killing yourself in the last year?	
Never	579 (89.91)
Rarely (1 time)	39 (6.06)
Sometimes (2 times)	14 (2.17)
Often (3-4 times)	4 (0.62)
Very often (5 or more times)	8 (1.24)
Have you ever told someone that you were going to commit suicide or that you might do it?	
No	615 (95.05)
Yes, at one time, and really wanted to die	22 (3.42)
Yes, at more than once, and really wanted to do it	7 (1.09)
How likely that you will attempt suicide someday?	
Never	578 (89.75)
No chance at all	20 (3.11)
Rather unlikely	11 (1.71)
Unlikely	4 (0.62)
Likely	18 (2.80)
Rather likely	10 (1.55)
Very likely	3 (0.47)



Drug and Alcohol Use

Participants were asked how often they would have six or more drinks on one occasion. Approximately one-fifth (20.66%) responded “less than monthly”, 17.37% responded “monthly”, 32.63% responded “weekly”, and 29.45% responded “daily or almost daily”.

The three most commonly used drugs by respondents in the past 6 months were Pro/B5/4x100 (12.53%), poppers (9.89%), and erectile dysfunction drugs (9.08%).

Demographics	
	Lao PDR (n=704)
How often do you have six or more drinks on one occasion?	
Less than monthly	88 (20.66)
Monthly	74 (17.37)
Weekly	139 (32.63)
Daily or almost daily	125 (29.45)
<i>Have you used these drugs in the past 6 months?</i>	
Amphetamine	
Yes	47 (7.24)
No	602 (92.76)
Crystal meth/ice (inhaling/smoking)	
Yes	29 (4.47)
No	620 (95.53)
Crystal meth/ice (injecting)	
Yes	14 (2.16)
No	635 (97.84)
Ecstasy/MDMA	
Yes	17 (2.62)
No	632 (97.38)
Ketamine	
Yes	12 (1.85)
No	637 (98.15)
GHB	
Yes	12 (1.85)
No	637 (98.15)
Xanax/Alprazolam	
Yes	13 (2.00)
No	636 (98.00)
Heroin	
Yes	19 (2.93)
No	630 (97.07)
Opium	
Yes	7 (1.08)
No	642 (98.92)
Marijuana	
Yes	96 (14.79)
No	553 (85.21)
Poppers	
Yes	30 (4.62)
No	619 (95.38)
Erectile dysfunction drugs (Viagra/Cialis)	
Yes	22 (3.39)
No	627 (96.61)
Pro/B5/4x100	
Yes	11 (1.69)
No	638 (98.31)
Hormones (steroids, progesterone, estrogen)	
Yes	11 (1.69)
No	638 (98.31)



Violence and Bullying

The majority of respondents (88.31%) had not been bullied in the past 12 months because of their sexual orientation or because they did not act like a boy/man.

Violence and Bullying		Lao PDR (n=704)
Bullied because of your sexual orientation or because you did not act like a boy/man in the past 12 months		
Yes		76 (11.69)
No		574 (88.31)

Key findings

- Comparatively, fewer participants from Lao PDR identified themselves as gay (68%).
- Condom less anal sex with a regular male partner was very high (75%) in Lao PDR. Similarly, over half (57%) reported having sex for favour, the highest of all. Perhaps, it is necessary to identify what kind of favours are exchanged for sex.
- The HIV positive prevalence rate as was low in Lao PDR as compared to Thailand (3.5%). There were very less cases of HIV positive to further understand their health seeking behavior or association between HIV positive status with other variables.
- Nearly two-thirds (63%) had never heard about PrEP or PEP in Lao PDR and therefore, PrEP awareness needs to be provided.
- More than half of the participants never tested for HIV in Laos Thailand with 3 percent reported tested positive for HIV. One of the primary reasons for not testing HIV is due to perception of low risk for HIV. Of those who reported HIV positive, about three-fourths of them saw a health care provider (76%) while almost all were under medication (68%) but only less than half of them (48%) reported self adherence with 40% of them reporting undetectable for HIV viral load.
- While 11 percent reported having had sex with HIV positive persons, about 12 percent would continue to have sex with a person despite knowing the of HIV status of the person. Perception of the study participants towards people living with HIV was relatively unfavorable compared to Thailand.
- On the other hand, 10 percent had suicidal tendency and almost 5 percent said about it to others indicating better mental health status among gay men in Lao PDR. Further, violence and bullying in Lao PDR on account of sexual orientation was far less (12%) than



8. COUNTRY SPECIFIC findings from survey data



8.3. Thailand

A total of 2292 respondents attempted until the last questions of the online survey. Therefore, the responses from those 2292 were used for analysis.

Demographics

Over a third of respondents (39.97%) were born between 1994 and 1996, 36.78% were born between 1997 and 1999, and 23.25% were born between 2000 and 2003. All respondents were assigned male at birth and currently 12.39% and 87.22% identify as male and a local gender identity, respectively. The majority (82.72%) identify as gay, 14.30% identify as bisexual, and 2.97% identify as straight. Nearly all (99.17%) are unmarried.

Over a third of respondents (39.09%) live in the capital city of their state/territory, 36.21% live in another city in their state/territory, 18.81% live in a regional center/town, and 5.98% live in a rural or remote area. Approximately a quarter of respondents (26.38%) are employed full-time, 18.81% are employed part-time, and 54.81% are unemployed. More than half (55.20%) are full-time students, 18.36% are part-time students, and 26.44% are not students.

Demographics	
	Thailand (n=2292)
Year in which you were born	
1994-1996	916 (39.97)
1997-1999	843 (36.78)
2000-2003	533 (23.25)
Gender assigned at birth	
Male	2292 (100.00)
Female	0 (0.00)
Gender identity	
Male	284 (12.39)
Local gender identity	1999 (87.22)
Other	18 (0.46)
What is your sexual orientation?	
Gay	1896 (82.72)
Bisexual	328 (14.31)
Heterosexual/straight	68 (2.97)
What is your marital status?	
Not married	1545 (99.17)
Married	4 (0.26)
Divorced/separated/widowed	9 (0.58)
Which of the following best describes the area where you live?	
Capital city of my state/territory	896 (39.09)
Other city in my state/territory	830 (36.21)
Regional center/town	429 (18.72)
Rural or remote area	137 (5.98)
Are you currently employed?	
Employed full-time	411 (26.38)
Employed part-time	293 (18.81)
Not working/unemployed	854 (54.81)
Are you currently a student?	
Yes, full time	860 (55.20)
Yes, part-time	286 (18.36)
No	412 (26.44)



“
The virtual world offers a ‘safe zone’ for key population communities in Thailand to express themselves.

This particularly applies to the young MSM and the transgender community.

Reaching out online in Thailand facilitates the inclusion of HIV services to previously inaccessible populations, improves efficiency and provides several options for the young key population to receive HIV services and information in ways that meet their preferences,

”

Danai Linjongrut (Meow),
Director
RSAT, Thailand

Sexual Behaviors

Just under half (48.84%) currently have sex with regular male partner(s), 48.74% currently have sex with casual male partner(s), and 63.15% had condomless anal sex with a regular male partner in the past 6 months. Approximately one-eighth (12.58%) had received things or opportunities in exchange for sex, 2.86% had given things or opportunities for sex, and 2.86% had both given and received things or opportunities for sex. Over one-quarter (25.32%) had group sex involving two or more men at the same time at least once in the last 6 months.

Sexual Behaviors		Thailand (n=2292)
Do you currently have sex with a regular male partner(s)?		
Yes		799 (48.84)
No		837 (51.16)
Do you currently have sex with casual male partner(s)?		
Yes		791 (48.74)
No		832 (51.26)
Had condomless anal sex with a regular male partner in the last 6 months		
Yes		682 (63.15)
No		398 (36.85)
In the last 6 months, how often did you have group sex involving at least two other men at the same time?		
Every week		33 (2.03)
Monthly		52 (3.20)
Once/a few times		326 (20.09)
Never		1212 (74.68)
Have you ever given or received things or opportunities in exchange for sex?		
Yes, I was the one receiving		286 (12.58)
Yes, I was the one giving		65 (2.86)
Yes, I have both given and received		65 (2.86)
No		1857 (81.70)



Access to HIV services

Respondents were asked when they received their last HIV test, to which 27.36% indicated that it was “within the past 6 months”, 8.10% responded “6-12 months ago”, 14.01% responded “more than one year ago”, and 50.52% responded “never tested”. The three most common reasons why respondents tested for HIV were “voluntary testing” (24.71%), “blood/organ donation” (6.62%), and “job application” (4.03%). The three most common reasons for not testing were “I am at very low risk for HIV” (39.16%), “I trust my boyfriend to be HIV negative” (3.81%), and “I don’t know where to get tested” (11.62%). The minority of respondents (6.33%) had ever self-tested for HIV. When asked what their current HIV status was, 34.69% responded “negative”, 6.94% responded “positive”, and 58.38% responded “never tested/don’t know”.

Access to HIV services		Thailand (n=2292)
Last HIV Test		
Within the past 6 months		574 (27.36)
6-12 months ago		170 (8.10)
More than one year ago		294 (14.01)
Never tested		1060 (50.52)
Three most common reasons for testing		
Voluntary testing		515 (24.71)
Blood/organ donation		138 (6.62)
Job application		84 (4.03)
Other reason		287 (13.77)
Never tested		1060 (50.86)
Three most common reasons for not testing		
I am at very low risk for HIV		401 (39.16)
I trust my boyfriend to be HIV negative		39 (3.81)
I don’t know where to get tested		119 (11.62)
Other reason		465 (45.41)
Ever self-tested for HIV		
Yes		145 (6.33)
No		841 (36.69)
Missing/unknown		1306 (56.98)
HIV Status		
Negative		795 (34.69)
Positive		159 (6.94)
Never tested/don’t know		1338 (58.38)





PrEP and PEP Uptake

PrEP: Respondents were asked about how much they have heard about pre-exposure prophylaxis (PrEP), to which 21.31% responded “a lot”, 42.25% responded “a little”, and 36.44% responded “I’d never heard about it before this survey”. The minority of respondents (8.98%) have ever taken PrEP to reduce the chance of HIV infection.

PEP: Very few respondents had ever taken PEP; 87 (5.02%) reported receiving PEP once and 23 (1.33%) reported receiving PEP more than once. Less than half of those who have taken PEP (43.63%) reported having very good experiences taking PEP, 32.73% reported having a satisfactory experience, 20.91% reported having a neutral experience, 0.91% reported having an unsatisfactory experience, and 1.82% reported having a very bad experience.

PrEP and PEP Uptake		Thailand (n=2292)
Number of times you received PEP		
Once		87 (5.02)
More than once		23 (1.33)
Never taken PEP		1624 (93.66)
Experience taking PEP		
Very good		48 (43.64)
Satisfactory		36 (32.73)
Neutral		23 (20.91)
Unsatisfactory		1 (0.91)
Very bad		2 (1.82)
How much have you heard about pre-exposure prophylaxis (PrEP)?		
A lot		396 (21.31)
A little		785 (42.25)
I’d never heard about it before this survey		677 (36.44)
Ever taken PrEP to reduce the chance of HIV infection		
Yes		106 (8.98)
No		1075 (91.02)
How often PrEP is taken		
Everyday		41 (39.42)
Every other day		5 (4.81)
Before and after sex		15 (14.42)
Only before sex		3 (2.88)
I’ve stopped taking it permanently		25 (24.04)
I’ve stopped taking it temporarily		11 (10.58)
Other		4 (2.82)

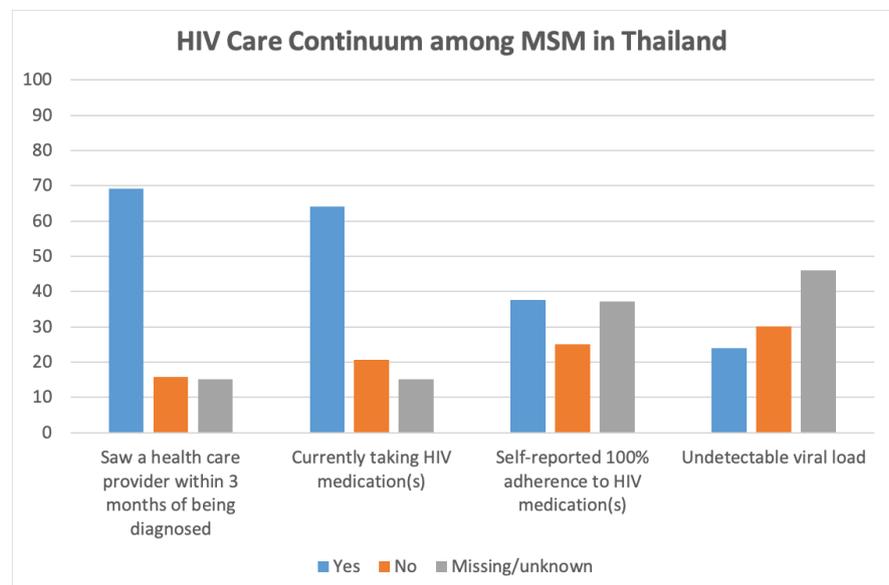




HIV Care Continuum

Among the self-reported HIV-positive respondents, 69.18% saw a health care provider within 3 months of being diagnosed, 64.15% are currently taking HIV medication(s), 37.74% self-reported being 100% adherent to their HIV medication(s), and 23.90% self-reported that their last viral load test result was undetectable.

HIV Care Continuum (among known HIV+)		Thailand (n=159)
Saw a health care provider within 3 months of being diagnosed		
Yes		110 (69.18)
No		25 (15.72)
Missing/unknown		24 (15.09)
Currently taking HIV medication(s)		
Yes		102 (64.15)
No		33 (20.75)
Missing/unknown		24 (15.09)
Self-reported 100% adherence to HIV medication(s)		
Yes		60 (37.74)
No		40 (25.16)
Missing/unknown		59 (37.11)
Last viral load test result		
Undetectable		38 (23.90)
Detectable		48 (30.19)
Missing/unknown		73 (45.91)





Bivariate associations between steps of the HIV care continuum and demographic characteristics – Thailand

	Saw a health care provider within 3 months of being diagnosed				Currently taking HIV medication(s)			
	Yes	No	Missing	P-value	Yes	No	Missing	P-value
Year in which you were born				0.0645				0.0094
1994-1996	66 (75.0)	14 (15.9)	8 (9.1)		64 (72.7)	16 (18.2)	8 (9.1)	
1997-1999	36 (66.7)	8 (14.8)	10 (18.5)		33 (61.1)	11 (20.4)	10 (18.5)	
2000-2003	8 (47.1)	3 (17.7)	6 (35.3)		5 (29.4)	6 (35.3)	6 (35.3)	
Gender assigned at birth								
Male	110 (69.2)	25 (15.7)	24 (15.1)		102 (64.2)	33 (20.8)	24 (15.1)	
Gender identity				0.2202				0.1085
Male	4 (50.0)	3 (37.5)	1 (12.5)		3 (37.5)	4 (50.0)	1 (12.5)	
Local gender identity	106 (70.2)	22 (14.6)	23 (15.2)		99 (65.6)	29 (19.2)	23 (15.2)	
What is your sexual orientation?				0.0834				0.0362
Gay	101 (69.2)	22 (15.1)	23 (15.8)		95 (65.1)	28 (18.2)	23 (15.8)	
Bisexual	9 (75.0)	3 (25.0)	0 (0.0)		7 (58.3)	5 (41.7)	0 (0.0)	
Heterosexual/straight	0 (0.0)	0 (0.0)	1 (100.0)		0 (0.0)	0 (0.0)	1 (100.0)	
What is your marital status?				0.3932				0.5232
Not married	90 (84.1)	17 (15.9)	0 (0.0)		85 (79.4)	22 (20.6)	0 (0.0)	
Married	1 (50.0)	1 (50.0)	0 (0.0)		1 (50.0)	1 (50.0)	0 (0.0)	
Divorced/separated/widowed	1 (100.0)	0 (0.0)	0 (0.0)		1 (100.0)	0 (0.0)	0 (0.0)	
Which of the following best describes the area where you live?				0.0485				0.0507
Capital city of my state/territory	60 (73.2)	12 (14.6)	10 (12.2)		60 (73.2)	12 (14.6)	10 (12.2)	
Other city in my state/territory	34 (70.8)	5 (10.4)	9 (18.8)		26 (54.2)	13 (27.1)	9 (18.8)	
Regional center/town	15 (65.2)	6 (26.1)	2 (8.7)		14 (60.9)	7 (30.4)	2 (8.7)	
Rural or remote area	1 (16.7)	2 (33.3)	3 (50.0)		2 (33.3)	1 (16.7)	3 (50.0)	
Are you currently employed?				0.3201				0.5433
Employed full-time	36 (78.3)	10 (21.7)	0 (0.0)		37 (80.4)	9 (19.6)	0 (0.0)	
Employed part-time	15 (93.8)	1 (6.3)	0 (0.0)		11 (68.8)	5 (31.3)	0 (0.0)	
Not working/unemployed	41 (85.4)	7 (38.9)	0 (0.0)		39 (81.3)	9 (18.8)	0 (0.0)	
Are you currently a student?				0.5804				0.7952
Yes, full time	35 (87.5)	5 (12.5)	0 (0.0)		33 (82.5)	7 (17.5)	0 (0.0)	
Yes, part-time	18 (85.7)	3 (14.3)	0 (0.0)		16 (76.2)	5 (23.8)	0 (0.0)	
No	39 (79.6)	10 (20.4)	0 (0.0)		38 (77.6)	11 (22.5)	0 (0.0)	

The year in which participants were born was associated with currently taking HIV medication(s) and self-reporting 100% adherence to HIV medication(s). Younger MSM were less likely to be achieve each of these two outcomes when compared to older MSM. Additionally, a greater proportion of gay and bisexual MSM were currently taking HIV medication(s) compared to MSM who identify as heterosexual/straight. Lastly, MSM living in rural or remote areas were less likely to have seen a health care provider within 3 months of being diagnosed compared to those living in major cities or regional centers.

	Self-reported 100% adherence to HIV medication(s)				Undetectable viral load			
	Yes	No	Missing	P-value	Undetectable	Undetectable	Missing	P-value
Year in which you were born				0.0128				0.1712
1994-1996	35 (39.8)	28 (31.8)	25 (28.4)		27 (30.7)	24 (27.3)	37 (42.1)	
1997-1999	21 (38.9)	11 (20.4)	22 (40.7)		7 (13.0)	20 (37.0)	27 (50.0)	
2000-2003	4 (23.5)	1 (5.9)	12 (70.6)		4 (23.5)	4 (23.5)	9 (52.9)	
Gender assigned at birth								
Male	60 (37.7)	40 (25.2)	59 (37.1)		38 (23.9)	48 (30.2)	73 (45.9)	
Gender identity				0.3069				0.9465
Male	2 (25.0)	1 (12.5)	5 (62.5)		2 (25.0)	2 (25.0)	4 (50.0)	
Local gender identity	58 (38.4)	39 (25.8)	54 (35.8)		36 (23.8)	46 (30.5)	69 (45.7)	
What is your sexual orientation?				0.7603				0.8663
Gay	50 (46.7)	37 (25.3)	53 (36.3)		35 (24.0)	44 (30.1)	67 (45.9)	
Bisexual	1 (50.0)	3 (25.0)	5 (41.7)		3 (25.0)	4 (33.3)	5 (41.7)	
Heterosexual/straight	0 (0.0)	0 (0.0)	1 (100.0)		0 (0.0)	0 (0.0)	1 (100.0)	
What is your marital status?				0.4726				0.6766
Not married	50 (46.7)	35 (32.7)	22 (20.6)		29 (27.1)	41 (38.3)	37 (34.6)	
Married	1 (50.0)	0 (0.0)	1 (50.0)		0 (0.0)	1 (50.0)	1 (50.0)	
Divorced/separated/widowed	0 (0.0)	1 (100.0)	0 (0.0)		0 (0.0)	1 (100.0)	0 (0.0)	
Which of the following best describes the area where you live?				0.1420				0.8259
Capital city of my state/territory	37 (45.1)	22 (26.8)	23 (28.1)		19 (23.2)	25 (30.5)	38 (46.3)	
Other city in my state/territory	14 (29.2)	11 (22.9)	23 (47.9)		9 (18.8)	16 (33.3)	23 (47.9)	
Regional center/town	9 (39.1)	5 (21.7)	9 (39.1)		8 (34.8)	6 (26.1)	9 (39.1)	
Rural or remote area	0 (0.0)	2 (33.3)	4 (66.7)		2 (33.3)	1 (16.7)	3 (50.0)	
Are you currently employed?				0.6641				0.2656
Employed full-time	22 (47.8)	15 (32.6)	9 (19.6)		16 (34.8)	19 (41.3)	11 (23.9)	
Employed part-time	8 (50.0)	3 (18.8)	5 (31.3)		4 (25.0)	5 (31.3)	7 (43.8)	
Not working/unemployed	21 (43.8)	18 (37.5)	9 (18.8)		9 (18.8)	19 (39.6)	20 (41.7)	
Are you currently a student?				0.9655				0.3441
Yes, full time	19 (47.5)	14 (35.0)	7 (17.5)		10 (25.0)	17 (42.5)	13 (32.5)	
Yes, part-time	10 (47.6)	6 (28.6)	5 (23.8)		7 (33.3)	4 (19.1)	10 (47.6)	
No	22 (44.9)	16 (32.7)	11 (22.5)		12 (24.49)	22 (44.9)	15 (30.6)	



Stigma, Discrimination, and Acceptance

The majority of respondents do not know any HIV-positive persons (82.49%), are willing to befriend someone who is HIV-positive (76.91%), are willing to work with someone who is HIV-positive (84.93%), are willing to share food with someone who is HIV-positive (64.44%), and are willing to provide care for someone who is HIV-positive (95.07%).

Most of the respondents are not willing to have sex with someone who they knew was HIV-positive (92.52%), and are not willing to have sex with a casual partner who said they were HIV-positive before having sex (87.26%).

Stigma, Discrimination, and Acceptance

	Thailand (n=2292)
How many HIV-positive persons do you know?	
0	1522 (82.49)
1-5	306 (16.59)
6-10	11 (0.60)
10+	6 (0.33)
Will you befriend someone who is HIV-positive?	
Yes	1419 (76.91)
No	426 (23.09)
Will you work with someone who is HIV-positive?	
Yes	1567 (84.93)
No	278 (15.07)
Will you share food with someone who is HIV-positive?	
Yes	1189 (64.44)
No	656 (35.56)
Will you provide care (friend or family) for someone who is HIV-positive?	
Yes	1754 (95.07)
No	91 (4.93)
Have you ever had sex with someone who you knew was HIV-positive?	
Yes	138 (7.48)
No	1707 (92.52)
If a potential casual partner told you he was HIV-positive before having sex for the first time, would you still have sex with him?	
Yes	235 (12.74)
No	1610 (87.26)
How much do you agree with the following statements?	
HIV-positive people should be outcast by their spouse and family members	
Strongly agree	37 (2.03)
Agree	47 (2.58)
Disagree	651 (35.71)
Strongly disagree	1088 (59.68)
HIV-positive people would lose friends if their friends knew their HIV status	
Strongly agree	128 (7.02)
Agree	513 (28.14)
Disagree	644 (35.33)
Strongly disagree	538 (29.51)
HIV-positive people should be forced to leave their villages	
Strongly agree	30 (1.65)
Agree	23 (1.26)
Disagree	511 (28.03)
Strongly disagree	1259 (69.06)
Their family would not care for HIV positive people	
Strongly agree	72 (3.95)
Agree	331 (18.16)
Disagree	698 (38.29)
Strongly disagree	722 (39.61)
No one would be willing to take care of their children when HIV positive people die from AIDS	
Strongly agree	71 (3.89)
Agree	243 (13.33)
Disagree	714 (39.17)
Strongly disagree	795 (43.61)
Children of HIV-positive parents should not go to school	
Strongly agree	50 (2.74)
Agree	76 (4.17)
Disagree	556 (30.50)
Strongly disagree	1141 (62.59)
HIV-positive people should not have the same rights to education and employment as others	
Strongly agree	128 (7.02)
Agree	79 (4.33)
Disagree	450 (24.68)
Strongly disagree	1166 (63.96)



Suicidality

Respondents were asked “Have you ever thought about or attempted to kill yourself?” to which 53.45% said “Never”, 36.76% said “It was just a brief passing thought”, 6.03% said “I have had a plan at least once to kill myself and really wanted to die”, and 3.76% said “I have attempted to kill myself and really hoped to die”. They were also asked “How often have you thought about killing yourself in the last year?” to which the two-thirds (65.95%) responded “never”, 18.97% responded “rarely (1 time)”, 9.24% responded “sometimes (2 times)”, 3.20% responded “often (3-4 times)”, and 2.65% responded “very often (5 or more times)”. Respondents were also asked “Have you ever told someone that you were going to commit suicide or that you might do it?” to which 89.04% said “no”, 9.67% said “yes, at one time, and really wanted to die”, and 1.29% said “yes, at more than once, and really wanted to do it”. When asked “how likely will you attempt suicide someday?” 73.65% responded “never”.

Suicidality	
	Thailand (n=2292)
Have you ever thought about or attempted to kill yourself?	
Never	86 (53.45)
It was just a brief passing thought	597 (36.76)
I have had a plan at least once to kill myself and really wanted to die	98 (6.03)
I have attempted to kill myself, and really hoped to die	61 (3.76)
How often have you thought about killing yourself in the last year?	
Never	1071 (65.95)
Rarely (1 time)	308 (18.97)
Sometimes (2 times)	150 (9.24)
Often (3-4 times)	52 (3.20)
Very often (5 or more times)	43 (2.65)
Have you ever told someone that you were going to commit suicide or that you might do it?	
No	1446 (89.04)
Yes, at one time, and really wanted to die	157 (9.67)
Yes, at more than once, and really wanted to do it	21 (1.29)
How likely that you will attempt suicide someday?	
Never	1196 (73.65)
No chance at all	131 (8.07)
Rather unlikely	77 (4.74)
Unlikely	60 (3.69)
Likely	134 (8.25)
Rather likely	20 (1.23)
Very likely	6 (0.37)



Drug and Alcohol Use

Participants were asked how often they would have six or more drinks on one occasion. More than half (55.14%) responded “less than monthly”, 32.62% responded “monthly”, 9.50% responded “weekly”, and 2.74% responded “daily or almost daily”.

The three most commonly used drugs by respondents in the past 6 months were poppers (16.45%), erectile dysfunction drugs (9.05%), and Xanax/Alprazolam (7.34%).

Demographics		Thailand (n=2292)
How often do you have six or more drinks on one occasion?		
Less than monthly		563 (55.14)
Monthly		333 (32.62)
Weekly		97 (9.50)
Daily or almost daily		28 (2.74)
Have you used these drugs in the past 6 months?		
Amphetamine		
Yes		41 (2.43)
No		1549 (97.57)
Crystal meth/ice (inhaling/smoking)		
Yes		85 (5.03)
No		1605 (94.97)
Crystal meth/ice (injecting)		
Yes		44 (2.60)
No		1646 (97.40)
Ecstasy/MDMA		
Yes		28 (1.66)
No		1662 (98.34)
Ketamine		
Yes		43 (2.54)
No		1647 (97.46)
GHB		
Yes		28 (1.66)
No		1662 (98.34)
Xanax/Alprazolam		
Yes		124 (7.34)
No		1566 (92.66)
Heroin		
Yes		21 (1.24)
No		1669 (98.76)
Opium		
Yes		15 (0.89)
No		1675 (99.11)
Marijuana		
Yes		69 (4.08)
No		1621 (95.92)
Poppers		
Yes		278 (16.45)
No		1412 (83.55)
Erectile dysfunction drugs (Viagra/Cialis)		
Yes		153 (9.05)
No		1537 (90.95)
Pro/B5/4x100		
Yes		32 (1.89)
No		1658 (98.11)
Hormones (steroids, progesterone, estrogen)		
Yes		49 (2.90)
No		1641 (97.10)



Violence and Bullying

The majority of respondents (29.72%) had not been bullied in the past 12 months because of their sexual orientation or because they did not act like a boy/man.

Violence and Bullying		Thailand (n=2292)
Bullied because of your sexual orientation or because you did not act like a boy/man in the past 12 months		
Yes		505 (29.72)
No		1194 (70.28)

Key findings

- 83% of the total participants had identified themselves as Gay.
- A little less than two-thirds of participants did not use condom during sex with a regular partner. On the other hand, about one in five participants had sex for favour.
- Half (50.52%) of the total participants never tested for HIV in Thailand while 7 percent were tested positive for HIV. One of the primary reasons for not testing HIV is due to perception of low risk for HIV. Of those who reported HIV positive, about two-thirds of them saw a health care provider (69%) while almost all were under medication (64%) but only 38 percent adhered. Seeing a health care was significantly higher in cities and urban areas while under medication was higher among older young men and gay men than others.
- The use of PrEP or PEP in Thailand was less common (6%) but the awareness about it was fairly high (63% reported having heard of it). The experiences of those who used PrEP or PEP was somewhat alright. However, 37 percent never heard about PrEP or PEP before the survey indicating scope tremendous scope for creating awareness among the high risk groups.
- Seven percent had sex with HIV positive and despite knowing HIV positive status of a partner 13 percent would still have sex with the partner. Similarly, although the vast majority (85%) reported having no issues to work with persons living with HIV but for other parameters considered in the survey to check attitude with regards to interaction with PLWHIV gradually reduced. Over a third of the participants (35%) thought that people with HIV would lose friendship if their status would be known indicating a huge stigma attached to it.
- Almost half (47%) percent had a thought about committing suicide and about 11 percent said about it to someone. Further, 10 percent are likely to attempt suicide in the future. In fact, suicidal tendency in Thailand is very high as compared to other countries. Similarly, about 30 percent reported being bullied for their sexual orientation in last year and over half (56%) had symptoms of depression. Considering a very high level of depression, suicidal tendency in Thailand, there is a greater need to work on the mental health issues of the young men who identify themselves as gay.
- About three percent reported drinking alcohol on a daily basis which is seen as lower than other countries in the study. However, 9 percent of the study participants used erectile dysfunction drugs i.e. highest as compared to other two countries.

9. Overall recommendations

1. HIV prevention messages needs to emphasize the use of condoms with regular partners during anal sex
2. Evidence shows that about half of the participants never tested for HIV. It is important to make options for testing available, and promote testing, including the use of innovative HIV self-testing.
3. It is important to create awareness regarding PrEP and PEP as important HIV prevention tools.
4. Strategies needs to be developed to ensure that people who know their status need to immediatly linked with the health care provider for HIV treatment. It is also important to have awareness messages around importance of adherence to HIV treatment. Access to HIV viral load testing needs to facilitated for YMSM PLWHA
5. There seems to be a positive attitude regarding PLWHA, it important to continue the existing messages. However, there is a need to reach out to the sections that have negative attitudes towards PLWHA.
6. Mental health seems to be an area of concern for young MSM, it is important to reach out to this group with mental health promotion messages and also create a referral linkage with mental health care providers to promote access to mental health care services. The community also needs to be sensitized/informed about positive coping strategies.
7. Further research is required to better understand the impact of developmental processes and changes on risk.
8. Programs need to address the experiences of violence, substance use and mental health.
9. Interventions must focus on HIV testing and access to PrEP and PEP.



Equity. Dignity. Social Justice.



We are united in advocating for issues around HIV and those that advance the rights, health and well being of people of diverse sexual orientation, gender identity, gender expression and sex characteristics.

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