

Stigma, HIV, and IDU in Thailand - Part I
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"THAILAND IS RENOWNED FOR ITS SUCCESSFUL CONDOM PROMOTION INTERVENTIONS;
INJECTING DRUG USERS HAVE BEEN LEFT IN THE DUST"

Is it illicit drugs, or the laws and policies created to regulate illicit drugs, which cause more harm to individuals and society? The extraordinarily high HIV (and other blood-borne virus) infection and prevalence rates among injecting drug users (IDU) globally point to the latter, given the deafening silence from governments in response to this epidemic-within-an-epidemic. Where programs to address AIDS among injecting drug users do exist, they more often than not promote total drug abstinence and often require abstinence as a criteria for receiving other services. HIV-positive users are often denied access to antiretroviral therapy (ARV) where it is available. In extreme cases, the lack of a public health response to HIV among IDU is obscured by more blatant human rights violations, such as campaigns of state-sanctioned violence against individuals involved with drugs.

For example, in Thailand, between February 1 - April 31, 2003, over 2,200 adults and children were murdered in a repressive campaign against individuals allegedly involved with drugs (the "Fight to Overcome Narcotics") initiated by Prime Minister Thaksin Shinawatra. This campaign's ultimate goal was to rid Thailand of drugs by December 2003, in honor of the King's birthday on December 5. According to drug user and human rights groups who documented the experiences of individuals caught in the campaign's fire, both literally and figuratively, the campaign was characterized by human rights violations including extra-judicial executions, arbitrary detention and arrest, blacklisting and forced drug treatment. Almost none of the murderers have been identified or prosecuted; most killings remain uninvestigated.

Also in Thailand, where HIV among injecting drug users (IDU) has been documented for more than a decade, the percentage of IDU who are HIV infected (approximately 50%) has not decreased in years for lack of effective prevention and care programs. In fact, injectors are the fastest growing group of new infections, expected to rise from 25% last year to 40% next year if the absence of appropriate interventions continues. Studies reveal high levels of hepatitis C (96%) and TB (50%) among Thai injectors, and co-infection is common.

How has the stigma arising from the criminalization of drug users and the lack of healthy drug policies contributed to the explosive and uncontrolled AIDS epidemic among IDU globally, and prevented HIV-positive IDU from accessing the care and support to which they have a right?

The Thai Drug Users' Network (TDN), a health and human rights advocacy group made up of present and former drug users from every region of the country, has brought attention to a number of the problems caused by harmful government policies and the attendant stigma faced by drug users in that country. TDN identifies the lack of accurate and unbiased information about illicit drugs for Thai society as a whole as one factor perpetuating the stigmatization of drug users. TDN has also pointed to a deadly lack of information for drug users about the health risks of injecting and how to inject safely. Technology, namely clean needles and syringes, as well as long term substitution therapy, such as methadone, both of which support the health and safety of drug users, is not available from the government. TDN protests the exclusion of clean needles and methadone from coverage under the universal health care plan as discriminatory. There has been no public outcry of this clear disparity in information and technology access, between those who become HIV-infected through needle sharing and those who are infected through sexual transmission. Thailand is renowned for its successful condom promotion interventions; injecting drug users have been left in the dust.

Continued in Part II (additional reading list at end of Part II)

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STIGMA - AIDS

To send a message to the forum: stigma-aids@healthdev.net
To join send a message to: join-stigma-aids@healthdev.net
To leave send a blank email to leave-stigma-aids@healthdev.net
To view previous postings go to:
<http://archives.healthdev.net/stigma-aids>

STIGMA-AIDS is a time-limited global forum on HIV/AIDS-related stigma, managed and moderated by Health & Development Networks Moderation Team (HDN, www.hdnet.org) with the support of the International Federation of the Red Cross and Red Crescent (IFRC) with technical support from Health Systems Trust (HST).

Stigma, HIV, and IDU in Thailand - Part II
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"MANY DRUG USERS UNDER PRESSURE FROM THE GOVERNMENT'S ANTI-DRUGS CAMPAIGN WENT INTO HIDING AND SHARED SYRINGES NEEDED FOR INJECTING DRUGS LIKE HEROIN BECAUSE DRUG USERS' PARAPHENALIA HAD BECOME MORE DIFFICULT TO OBTAIN."

For HIV-positive drug users in particular (in Thailand), social stigma including in the health care setting, supported by government policy, has led to numerous human rights violations of drug users, many of which were documented by members of TDN. For example, drug users (and other designated "high-risk behavior" populations) are excluded from antiretroviral therapy (ARV) access according to the guidelines for the implementation of ARV therapy in Thailand. For HIV-positive active drug users who are rejected by their families and communities, there is virtually no housing support at all, unlike for non-drug using HIV-positive individuals. The handful of private shelters for self-identified drug users who present voluntarily are forbidden from using drugs if they want to remain at the shelter. In prisons and detention centers, despite the well-documented high risk of HIV infection through lack of access to clean injection and tattooing equipment, official denial about drug use and AIDS in these places has prevented lifesaving prevention and appropriate HIV care interventions from being introduced.

Access to supportive AIDS and harm reduction services offered by non-government organizations has also been severely compromised by social stigma made worse by the government's violent anti-drug campaign. Not only are drug users fleeing their provinces to avoid blacklisting (even if they quit drugs already), they are avoiding treatment centers and other services where they might be identified by the police and arrested. NGO workers themselves have admitted paralyzing fear and an inability to outreach to drug users during the 3-month violent campaign and even afterwards. Until very recently, there were no statistics about the effect of the campaign on increased HIV and other risks, including police harassment, arbitrary arrest and mistreatment of drug users (and also non-drug users) during this period. However, a recent study presented at the Thai National AIDS Seminar (7 July 2003), conducted by Chiang Mai University's Research Institute for Health Science, the Public Health Ministry and John Hopkins University, showed that 37% of drug users who used to visit rehabilitation clinics in Chiang Mai had moved out from their houses due to government suppression. Many drug users under pressure from the government's anti-drugs campaign went into hiding and shared syringes needed for injecting drugs like heroin because drug users' paraphernalia had become more difficult to obtain.

Related data that was collected during the government crackdown show that non-drug users were also arbitrarily detained and forced into treatment.

Drug users have historically been subjected to mandatory HIV testing in treatment centers. Often this testing is not accompanied by counseling and the client is not informed that she or he is being tested for HIV. The result may not be told to the client.

In Thailand, billboards across the country proclaim the threat of drugs

and drug users to family stability and the security of the nation. Drug users who have gone off drugs still bear the "scarlet letter" of a drug user and are systematically arrested by police in their communities when quotas need to be met, or simply because they are already stigmatized and vulnerable. Religious communities also sanction the exclusion of drug users in Thailand; perceived drug users have been kept out of their mosque, and 70% of Buddhist monks surveyed supported the tactics used by the current government to control drug use during its recent 3 month cleansing campaign.

The silencing of drug users and their exclusion from participating in the development of the very programs and policies that target them is perhaps the most detrimental effect of social stigma and discrimination of drug users. Drug users in Thailand, as in many places, are being denied the right to life, to information, and to many other rights which in turn puts their life in peril, yet the government does not take responsibility. Why is there no public outcry? Perhaps the public's rights are also being violated: the public has a right to receive accurate information about drugs, and how to support drug users who need it.

The Thai Drug Users' Network, against all odds, is publicly advocating for the right of the public to have accurate information about drugs, from the government and in the media; and for the right of drug users to stay alive, to participate equally in society, to remain out of prison, to access the information and support crucial to their physical and mental health, and most fundamental of all, to ensure the treatment of drug users with the same respect, dignity and equality that other people in Thailand are accorded.

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Additional reading

World Bank Social Monitor - Thailand -
<http://www.worldbank.or.th/social/index.html> -

Risk of prevalent HIV infection associated with incarceration among injecting drug users in Bangkok, Thailand: casecontrol study - Aumphornpun Buavirat, Kimberly PageShafer, G J P van Griensven, J S Mandel, J Evans, J Chuaratanaphong, S Chiamwongpat, R Sacks, A Moss-
<http://www.ahrn.net/pdf/idubkk.pdf>