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Reference:	A-AIDS2020-06501
Title:	Institutionalize Key Population Lay Providers in Thailand to Support Ending AIDS: From Pilot to Policy and Practice
Type:	Lessons learned
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Country of research: *	Thailand
Key and vulnerable populations: *	Men who have sex with men, Transgender and non-binary people, People who use drugs
Abstract text:	<p>Background: Key population-led health services (KPLHS) has been identified as a critical strategy for ending AIDS in Thailand. Services provision by key population (KP) lay providers did not have legal sanction without project-based guardianship. We summarized the steps taken to secure legal endorsement of KP lay providers in KPLHS in Thailand.</p> <p>Description:</p> <ul style="list-style-type: none"> • In 2015, KPLHS model designed by men who have sex with men (MSM) and transgender women (TGW) communities was established in 4 HIV-strategic provinces under USAID LINKAGES Thailand Project. • In 2017, “ENGAGE”, the technical support and advocacy platform supported by USAID Community Partnership Project, established capacity building and certification system for KP lay providers to perform HIV/STI testing and dispense pre-/post-exposure prophylaxis (PrEP/PEP). • In 2018, 55% of HIV testing and 55% of PrEP provisions among MSM and TGW in Thailand were conducted by KP lay providers. Large uptake of HIV testing and PrEP among KPs through KPLHS, in comparison to uptake at conventional services, have been vital in ENGAGE’s advocacy for the policy shift to legalize KP lay providers. • Prof. Emeritus Praphan Phanuphak, Director of the Thai Red Cross AIDS Research Centre, was recruited as a “policy influencer” to have both formal and informal dialogues with the Minister of Public Health, the Director General of the Department of Disease Control and other key high level of policy makers to address the concerns of the professional medical councils. • In 2019, A ministerial regulation sanctioning KP lay providers’ roles was signed by the Minister of Public Health on June 6, 2019 and promulgated in the Ministry’s gazette in September 2019. <p>Lessons:</p> <ul style="list-style-type: none"> • National-level impact of the KPLHS, as well as formal capacity building and certification systems, were critical to the legal endorsement of KP lay providers. • The “policy influencer” was instrumental in leading advocacy efforts to success within 1 year. Continuous engagement with key stakeholders and professional medical councils reduced the resistance to policy change. <p>Conclusions: With KPLHS capacity building, certification and legalization formally established in Thailand by ENGAGE, domestic financing directly to KP-led organizations is being piloted. This will lend support to the scale-up and sustainability of KPLHS.</p>
Ethical research declaration: *	Not applicable - the study does not include human subjects
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Working on STIs?:	No
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