

COUNTRY REPORT:

LAO PDR

Lao PDR Country Background Report



1. An overview of the situation of children and HIV/AIDS in Lao PDR.

HIV/AIDS Situation

Lao PDR is classified as a low prevalence country. However, the HIV infection rate is increasing. HIV prevalence among sex workers has doubled over the period 2001-2004 from 0.9% to 2% (National Sentinel Surveillance, Rounds 1&2). In addition the second round of sentinel surveillance in 2004 found HIV prevalence in two provinces of 3.3 percent and 3.9 percent respectively. As globally, the risk of a generalized epidemic increases when HIV rises above 5% in high risk populations, this is a cause for concern.

Many countries in the region have experienced the spread of HIV from sex workers to male clients then from clients to their wives and children. The total fertility rate in Lao continues high at 4.8 children born per woman (UNDP HDR 2005) so that for each adult infected there would be a number of children affected. This is more likely to be the case given that recent figures suggesting that men with risk behaviour are more likely to be 'mobile men with money'- men with surplus income whose jobs involve travel. Fifty percent of clients of sex workers were found to be married. In 2005, the majority of new STI infections were found in married men and women (CHAS 2006). The STI infection rate, in particular for Chlamydia and gonorrhoea, is high. These are only some of the factors which could lead to a rapid escalation of the HIV infection in Laos. As well, economic and social change has led to increased mobility and migration, both within Lao and to neighbouring countries, several of which already have generalised epidemics and others in which HIV prevalence is rapidly increasing.

Currently the HIV prevalence is still relatively low with the cumulative number of *reported* cases of HIV infection from 1990 to December 2005 at 1,827, of which 1,069 were AIDS cases and 637 have already died. The HIV infection rate in men is 60% of the total reported cases and in women 40%. The infection rate of women has increased in comparison to figures in previous years (the percentage of reported HIV infection cases in women was 38% in 2003; 39% in 2004 and 40% in 2005). The main mode of HIV transmission is through heterosexual intercourse, and temporary labour migrants who have worked in surrounding countries constitute the majority of those infected. Most HIV reported cases are between 20 to 39 years of age, however, in the 20-24 year age bracket more young women are now reported infected than young men.

ARVs are available through one provincial hospital in Savannkhet and are supplied and supported by *Medecins Sans Frontieres* (MSF Suisse) who have guaranteed to supply the drugs to all who need them until 2008. Patients from many other parts of the country travel to Savannkhet to receive the drugs.

Children and HIV/AIDS

Sixty-six HIV positive children under 10 years of age (3.6 percent of cases) and 124 HIV positive children and youth under 19 years of age (6.7 percent of cases) have been identified in the cumulative case reporting to December 2005. Over twenty children have already died from AIDS. As of February 2006, 15 provinces and the Capital Vientiane, reported a total of 41 HIV positive children, and 219 children orphaned by AIDS in the under 10 age group (CHAS, Feb 2006).

Of these children 10 are receiving ARV treatment via MSF in Savannakhet, the one provincial hospital in which drugs are available, an eight-hour bus trip from the capital. Some information on HIV affected and infected children has been included in reports on people with HIV and on orphans and vulnerable children, although such research has been on a very small scale and qualitative. They have shown that a number of HIV positive children experience discrimination in schooling, others are disadvantaged and make slow progress because of illness, and some have reduced access to medical services owing to poverty, or to the limited capacity of elderly care givers to supervise treatment regimes.

As well a number of orphaned and affected children in Savannakhet have been assessed as needy and received external support in the form of annual school supplies (N=80) and family income generation grants (N=50) supported by UNICEF. In 2006 some skills building activities such as Lifeskills and Youth Leadership camps, have been conducted for HIV infected and affected children (those who have lost parents or close family to AIDS) by Provincial Committees for the Control of AIDS (PCCAs) in cooperation with UNICEF, UNDP, Save the Children and the Metta Dharma Project (a Project of the Lao Buddhist Fellowship).

Problems of an HIV Positive child – Illness, interrupted schooling, and social isolation

Interviewers talked to an HIV positive 12-year old boy who had to stop schooling a year ago because of his medical condition. Next September, he will resume, and his grand-mother does not know how he will react. In 2004, when his father died, his mother took him and his sibling to be tested in Vientiane. His younger brother is not infected. His mother spent 10,000 Baht (over 300 US dollars) on traditional medicine. After he failed to recover, they consulted a doctor at the 103 Hospital who advised them to send him to Savannakhet. Since he was diagnosed as infected he has been rejected and stigmatised by his friends, and only recently have two friends come to see him and shown the normal friendly attitude of children. He wants to play with other children, and says *“I don’t want to be infected with HIV”*. Sometimes he complains to his uncle, saying that *“why didn’t you tell my father not to go with women and bring HIV to me.”*

Qualitative Study to Determine the Impact of HIV/AIDS on Adults and Children and of UNICEF Care and Support Interventions in Lao PDR. Draft Report to UNICEF August 2005

HIV positive child in school - Savannakhet

In 2003, the headmaster of one HIV positive child’s school was informed of her condition and agreed to accept her at school. However, the parents of other pupils did not want their children to study with an infected child and asked for the infected girl to leave the school. The headmaster explained the risks to the parents and children and eventually only a few parents refused to have their child share a class with the little HIV-positive girl.

Qualitative Study to Determine the Impact of HIV/AIDS on Adults and Children and of UNICEF Care and Support Interventions in Lao PDR. Draft Report to UNICEF August 2005

2. Progress towards achieving the goals set at the United Nations General Assembly Special Sessions on HIV/AIDS 2001 and Children 2002

National Country Programme on HIV/AIDS

Since 2003 Lao PDR has made considerable progress in terms of meeting UNGASS indicators for a national response. Of 63 National Country Programme indicators over 50 have been met. The National Strategic Action Plan for 2002-2005 was implemented and met many of its objectives. The second round of sentinel surveillance was conducted in 2004. The 2006-2010 National Economic and Social Development plan includes HIV/AIDS. Lao PDR is also one of the few countries to have a fully costed National Strategic Action Plan for 2006-2010. This plan covers comprehensively the country’s needs in prevention and care and support on the basis of a multisectoral response.

Many activities are in place for vulnerable groups and for the general population, such as STI prevention and treatment, behavioural change communication interventions, peer education, schools lifeskills education, community based interventions. The 100% condom use programme has also been implemented in 3 provinces. Awareness and open discussion of HIV/AIDS has increased among politicians and the general public. UNGASS indicators for correct knowledge and access to prevention programs among occupational groups surveyed in the sentinel surveillance show good results have been achieved in this area. In addition there has been a reduction in STIs among sex workers in many provinces.

However, many challenges remain. Interventions have not been fully effective in changing behaviour. The number of sex workers and their clients is increasing and the number of service women reporting consistent condom use has decreased from 72.7% to 54.4% (NSS

2004). The number of sex workers and their clients reached with a comprehensive package of interventions (condoms, STI treatment, HIV prevention information, and VCT) is still low. The fact that ARV treatment is still only available from one provincial hospital means much travel and difficulty for those coming from other provinces, and is particularly hard for sick children.

Access to information, education and services for young men and women

In relation to this goal Lao PDR has achieved a great deal with interventions for both in school and out of school youth. As mentioned above the NSS included questions on HIV knowledge, access to prevention and services for target groups consisting of Sex workers, military, police, truck drivers, electricity workers, and water pipe workers. The table below shows responses for three age groups, in four occupational groups.

Table 1: Reached of HIV prevention programmes by age (NSS 2004)

Questions in NSS	Electricity workers			Police			Military			Truck drivers		
	<20	20-24	25>	<20	20-24	25>	<20	20-24	25>	<20	20-24	25>
Aged under 24	0	78.8	89.3	10	89.7	83.9	65.2	74.5	83.1	45	53.3	93.9
Percentage reached with HIV prevention programmes												

Table 2: Workers of all ages with correct information/access to services (NSS 2004)

Questions in NSS	Electricity workers	Police	Military	Truck drivers
All ages				
Percentage who correctly identify ways of preventing sexual transmission of HIV and reject major misconceptions	93.26	93.62	86.62	92.59
Percentage who received HIV testing and know the results	4.48	1.46	3.22	3.51

As well 25% of all primary school children and 56% of secondary students nationwide received Lifeskills education on HIV/STIs/Reproductive Health and Drug Use in 2005 integrated into the curriculum in these subjects: "The World around Us", Population Studies and Biology. In addition Lao Buddhist monks are developing a curriculum on Buddhist Lifeskills which is being piloted in 28 schools in Vientiane as an extra curricula activity. Youth participation is encouraged through the mass organization, the Lao Youth Union (LYU), which has representatives in all villages and is active in HIV prevention and care, as well as through youth volunteers working in the *Metta Dharma* Project and the Lao non profit organisation, Lao Youth AIDS Prevention.

Care, treatment and support

Overall Lao PDR has made some progress in improving access of HIV infected children and adults to care and treatment, and to supporting individuals, households, families and communities affected by HIV/AIDS. In 2005 the Prime Minister met with children and adults with HIV and has spoken out on the Government's commitment to HIV/AIDS a number of times. Also in 2005, was the formation of the Lao Network of Positive People (LNP+). There are now six functioning self-help groups for HIV positive people. Civil society has been involved in HIV/AIDS care and support in the form of Buddhist monks from the Metta Dharma project who have run a range of interventions to reduce stigma and discrimination from sermons to exhibitions at Buddhist festivals. As well Ministry of Health staff and Lao Youth Union have been involved in 'troubleshooting' in cases of discrimination including number involving children in schools. While adults and children with HIV/AIDS can access ARV from MSF in Savannakhet province, many of those seeking treatment are at later stages of the illness and less responsive to ARV.

Gender

Gender issues are also being addressed. All statistics collected are disaggregated in terms of gender, and the Government of Lao PDR has long had a commitment to gender equality. Sex worker STI treatment interventions have been a major part of Lao PDR's National Programme to date. The Maternal Child Hospital in Vientiane is running a PMCT action research programme in conjunction with a Swiss NGO which is providing testing and counseling to pregnant women, and following up with ARV prophylaxis for HIV positive pregnant women. The Lao Trade Union has been implementing HIV prevention lifeskills education in factories with hundreds of female workers, which include a module addressing gender issues.

3. Good practices, lessons learned and country experience: prevention, treatment, care, protection and support services to children at risk, infected and affected by HIV/AIDS

Prevention:

The Ministry of Education has instituted a curriculum which includes HIV/AIDS/STI and reproductive health education using a Lifeskills approach integrated into regular subjects of "World Around Us" in primary schools grade 4&5, and in biology and "Population Studies" in lower and upper secondary school. This was instituted in 25% of primary schools and 56% of high schools nationwide and was funded by UNFPA and UNICEF.

Awareness raising has been conducted for rural unemployed and mobile youth (young people moving to the city to work in factories) by the mass organizations, the Lao Youth Union and Lao Trade Union in workplaces and Communities over the past five years. As well the Lao Red Cross and INGOs have been active in prevention education to youth. The combination of these prevention services is considered to have increased basic awareness of HIV/AIDS and correct knowledge on HIV transmission. However, as yet not all districts or even all provinces have received these interventions.

Treatment, care, protection and support services to children at risk, infected and affected by HIV/AIDS

Family Support

In Lao PDR interventions have focused more on support to keep parents alive than specific interventions for children. Parents and families of PLWHA have been supported in various ways. In Lao PDR the number of children who have lost a parent to AIDS is still small (around 100) and AIDS care needs to address financial and social issues as well as treatment. Income generation schemes to mitigate impact of HIV on family finances and stigma reduction have also been an important part of 'community care'. The Provincial Committees for the Control of AIDS (PCCAs) and the Lao Youth Union (LYU), together with hospitals have helped PLWHA establish self-help groups and run income generation schemes to improve family income with funding support from UNICEF. PLWHA groups in Vientiane and Savannakhet have learnt to sew cloth bags in various styles for sale, following skills training.

Most important has been MSF's support for ARV and OI drug provision and technical guidance on clinical care for people with AIDS. There continues to be a gap in knowledge on ARVs, outside of Savannakhet (especially treatment for pediatric HIV) which needs to be addressed in the future if new ARV centres are established in future as planned in the NSAP 2006-2010.

Discrimination and Stigma

The LYU and PCCA have also accompanied PLWHA and *Metta Dhamma* monks visiting communities to raise awareness on HIV/AIDS. This has been a major element in reducing discrimination and assisting PLWHA access care. These visits are often requested by PLWHA experiencing discrimination in their communities. Buddhist monks also campaign for reduction in stigma through their sermons, teaching in schools and by example in providing spiritual care for people with HIV/AIDS.

Taunted, sat separately... 'Kop', 8 years old, Had Saiphong, Vientiane

Setthathilat hospital where Kop was a patient was contacted by Kop's Grandfather who said his HIV positive nephew was refusing to go to school owing to his classmates taunting him as the 'AIDS kid'. On the basis of parental complaints, his teacher had also required him to sit apart from the others on a bench on his own. The HIV Counsellor from the hospital met informally with District Education staff and organized an HIV awareness event in "Kop's village". LYAP the youth volunteer organization staged a play about Discrimination and HIV and the hospital nurse and counsellor made sure everyone saw them playing with and holding hands with 'Kop' as with other children in the audience. After these interventions Kop was able to go to school, and mix normally with other children in the classroom and playground.

Psycho-social interventions for Children Affected by AIDS.

In 2006 PCCAs and hospitals in 3 provinces initiated camps for children affected by HIV/AIDS. In Champassak camps and Vientiane were run with help of the *Metta Dhamma* project and funded by UNICEF. These camps combined basic HIV education with team building, leadership skills, art and drama exercises on dealing with discrimination and some 'therapeutic adjustment' exercises in dealing with grief and loss, run by a consultant psychologist. The camps were run very simply, children and youth leaders were accommodated in tents in temple grounds with access to temple bathing facilities and food cooked by the participants on the grounds, to ensure sustainability in future. The aim was to further develop flexible models for the camps able to be used with other vulnerable children as well as HIV affected and infected children.

In 2005 two Vientiane Hospitals with support from UNICEF also organised cultural and team building activities for affected children taking part in the UNICEF Global Campaign on Children and AIDS.

4. Integration of children into existing national legislation, policies and HIV/AIDS strategic plans:

"Law to Protect the Rights and Interests of the Child"

A new Lao law is about to be passed on children. The draft legislation of the "Law to Protect the Rights and Interests of the Child" of January 2006 includes some passages aimed to protect children who suffer discrimination on the basis of their own or their parents' HIV status and also has provision for orphans.

Article 2 states that children in need of protection are those persons under 18 years of age, who are orphans, abandoned and neglected children, children who are victims of physical or sexual abuse, child victims of sexual exploitation or trafficked children, children whose work is dangerous to their health, life or whose labour is exploited, refugee children, drug addicted children, *children with HIV or AIDS* and children who are victims of crime. 'Children with HIV and AIDS' is defined as 'Children with HIV or those orphaned by AIDS or living with a family member who has HIV or AIDS'.

Article 30: The Education of Children with HIV or AIDS

The government must provide conditions to ensure that children with HIV or AIDS receive an education free from discrimination. Schools are forbidden to demand that children have an HIV test or to disclose the HIV test results of those concerned.

In relation to orphans and vulnerable children the draft legislation includes provisions that in cases where a child is in need of care, an institution will be considered as the last resort and all decisions as to where the child should go will be in the best interests of the child (Article 40).

In general in Lao PDR there are a small number of orphanages, the most common form of orphan care is in the extended family or occasionally, in temples. In the event of a child in need of care the new legislation makes provision for the village headman to appoint a guardian from among the child's relatives (article 22) based on the principles that the child where possible should be raised in a family environment and that the best interests of the child should be considered in choosing a guardian or the place where the child will be cared for.

5. Plans and initiatives related to children and HIV/AIDS in 2006 and beyond,

The National Strategic Action Plan 2006-2010

In and out of school youth

The National Strategic Action Plan 2006-2010 aims to reach 30% of primary and secondary schools nationwide with RH/HIV/AIDS/STI education and drug awareness activities; 40% of out-of school youth in prioritized provinces with awareness raising campaigns; and the most vulnerable youth with a package of peer education, IEC material and access to condoms, referral, counselling, STI and VCT services. The NSAP 2006-2010 contains provision for integration of PMCT into MCH services and increased access to ARV for HIV positive pregnant women.

Children infected and affected by HIV/AIDS

The National Strategic Action Plan 2006-2010 aims to ensure that all 'adults and children living with HIV/AIDS have access to adequate medical services and treatment' and plans to increase availability of ARV to three provinces with 700 treatment slots for adults and children. In addition the plan ensures all adults and children infected and affected by HIV/AIDS are fully accepted and integrated into normal social, educational and work activities.

Gaps in resources available to implement the National Strategy were recently identified in a consultation convened by CHAS as HIV prevention for young people (both in and out of school), for uniformed services, for sex workers and their clients and men who have sex with men, for expanded and youth friendly VCT services, for care and support including PMCT, ARV/ OI provision and community based care for children and adults with or affected by HIV and AIDS.

National Policy on HIV/AIDS/STIs 2001 (to be updated in 2006)

There are no clear laws prohibiting discrimination on the basis of HIV as yet. However, this is a principle clearly stated in the National Policy on HIV/AIDS/STIs in 2001 and 2006. The latter policy states that:

“Children orphaned by... AIDS and those who are HIV positive will be provided with the chance to live positively with their family and society. HIV positive children and orphans of AIDS will be promoted to have education, enjoy their life without discrimination”.

The policy also outlines a framework for mainstreaming PMCT into the Safe Motherhood Programme and ANC service delivery and the need to provide PLWHA and their families with access to “comprehensive services, including: counselling, testing, care and support and ART.” The need for social support and legal assistance to protect them from discrimination is also acknowledged.

Challenges include the fact that pediatric AIDS expertise is lacking, and children are identified in the NSAP as a group on which specific data is not available. One area in which the NSAP is possibly lacking is indications of a response to children orphaned by AIDS. As stated above, there is as yet no actual legislation on discrimination at this stage.

Global Campaign on Children and AIDS 2005-2010



The United Nations' UNITE FOR CHILDREN UNITE AGAINST AIDS campaign was launched by the Prime Minister of the Lao PDR, Bounnhang Vorachit, in Vientiane at Wat That Phoune, the city's largest Buddhist temple in November 2005. The Prime Minister launched the five-year campaign in a historic meeting with HIV positive children and adults. Advocacy from senior-most government leaders in the region has already had a powerful impact in raising the issue of HIV/AIDS and reducing discrimination towards HIV positive people. The Government of Lao PDR has demonstrated strong leadership and will continue to advocate on this issue. During the campaign launch Prime Minister Vorachit called upon Lao people not to avoid or reject people with HIV:

"We must take special care to ensure that children who are infected with HIV receive care, attention and warmth from their family and relatives, as well as support from society."