The Lao Red Cross HIV/AIDS programme has long worked through Red Cross branches on a range of HIV and AIDS interventions. The National Society is committed to building the capacity of HIV-positive people, Red Cross volunteers and staff, and communities to respond effectively to the epidemic. However, people living at district and village level have a limited knowledge of health issues. This is the main challenge regarding infectious diseases, particularly when it comes to the impact of HIV and AIDS on vulnerable people and the stigma associated with HIV and AIDS.

**Background**

Lao People’s Democratic Republic (Lao PDR) is a landlocked country in the Mekong region, bordering China, Myanmar, Thailand, Cambodia and Viet Nam. In the last two years, Lao PDR has been going through a period of dynamic change, with economic growth at around 8 per cent (2010).1

Lao PDR has recently become land-linked, with better road access within the country, as well as with neighbouring countries, especially in the development context of regional economic corridors. There has also been an increase in the flow of people moving within the country and within the region.

HIV prevalence in Lao PDR is estimated at 0.2–0.3 per cent of people aged 15-49-olds.2 The country’s HIV epidemic has also witnessed new trends in the last five years. The National Strategy and Action Plan for HIV/AIDS/STI Control and Prevention (NSAP) has described the epidemic scenario as a “concentrated epidemic.” The key affected populations are sex workers, clients of sex workers, men who have sex with men, and injecting drug users.

In Lao PDR, there are between 12,000 and 13,000 people living with HIV (PLHIV).3 HIV-related stigma and discrimination threaten the prevention, treatment and control of HIV and AIDS. A stigma index survey in Lao PDR found that 23 per cent of all people living with HIV are victims of gossip, 8 per cent lost their jobs due to their HIV status and 4 per cent are discriminated against by co-workers. PLHIV and their families are often denied the right to, for example, healthcare, work, education, privacy, family planning and freedom of movement.

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1 Lao National Statistics Centre
2 UNAIDS factsheet
3 www.unaids.org/en/regionscountries/countries/laopeoplesdemocraticrepublic
The intervention

The main aim of the programme is to improve the quality of life of people living with HIV and their families. The programme was implemented in six provinces: Luangnamtha, Oudomxay, Xayaboury, Bolikhamxay, Khammoun and Salavan. A number of objectives were established at the start of the project. These were to:

- Improve the health and well-being of PLHIV and their families in targeted villages where the programme operates
- Create an enabling environment for PLHIV by promoting a rights-based approach, thereby reducing the stigma and marginalization faced by PLHIV
- Strengthen the capacity of the Association of PLHIV in Lao (APL+) and Laos Red Cross

Case study Working in partnership with people living with HIV

“My health has improved because of regular medical check-ups and anti-retroviral treatment.”

Improving lives: one individual at a time

Mrs. Kek is a 35-year-old housewife living in Navang village, Nongbok district in Khammoun province. Her health began to improve after she received support from the Lao Red Cross programme. She now feels more comfortable about working, and about taking part in many activities with people in her local community. Her family and friends understood what she was going through and have accepted the situation. She is now engaged in helping other PLHIV and sharing her experiences with them. She provides counselling for PLHIV and also encourages them to participate in the group and to access care and treatment.
Mr. Sompeth is a 33-year-old farmer from Don Ngeun village, Xayaboury district, Xayaboury province. After coming into contact with the Lao Red Cross HIV/AIDS programme, he feels his health has improved because of regular medical check-ups, anti-retroviral treatment and nutrition support. He says that if PLHIV feel happy, and are physically and mentally able to work, then they are more likely to find some way of increasing their income to sustain themselves for the rest of their lives.

Mr. Sompeth will now devote his time encouraging people living with HIV to access care and treatment. He will help bridge an important gap, providing critical health knowledge to his community and also ensuring equitable access to health services for all.

“I have attended workshops on opportunistic infection and the importance of anti-retroviral treatment, as well as on gender. I now feel I have increased knowledge and skills.”

**Challenges**

The PLHIV support and care programme is confronting a number of challenges that are common to other programmes working in the field of HIV and AIDS impact mitigation and the mitigation of stigma associated with HIV and AIDS:

- Many people living with HIV are poor. They frequently have to travel from one place to another to earn their living, which makes it harder to ensure adherence to anti-retroviral treatment.
- Funding for the HIV programme is scarce, and it is a challenge to provide comprehensive care for PLHIV.
- Even though anti-retroviral drugs are free, it may take some PLHIV in remote areas two or three days just to reach the distribution centre.
- The stigma and discrimination associated with HIV and AIDS prevents many people from declaring their HIV status. They are then, in effect, deprived of much-needed medical attention.

**Lessons learnt**

- The successful implementation of the HIV programme requires support at all levels, including from government, key stakeholders (including PLHIV networks) and local authorities.
- Regular follow-up and logistical support is essential to ensure adherence to anti-retroviral therapy, as some PLHIV live far from the distribution centre and cannot afford to travel without financial assistance.
- A voucher system provides a useful way of preventing cash from being misused, and also ensures that PLHIV use this support to get the most out of the service provided.
- Stigma and discrimination affect women, particularly single women, more than it affects men.
- PLHIV involvement in prevention and care programmes contributes to reducing stigma and discrimination, and results in greater acceptance of PLHIV.
- Awareness messages, together with the sharing of experiences and success stories, encourage other high-risk people to get tested and to declare their HIV status.
Conclusion

The Lao Red Cross efforts to promote care and reduce stigma have already had a positive impact on target communities. The programme’s success is due to the commitment and efforts of Red Cross volunteers, who work directly with PLHIV and their families at grass-roots level. Their exemplary work largely exceeds the incentives they receive from the programme. However, the programme encountered some difficulties when working with other stakeholders due to limited coordination and collaboration, as well as financial limitations.

Ways forward

› Advocate with national authorities to develop a systematic approach in order to create an enabling environment for PLHIV.
› Strengthen visibility and positioning of the Red Cross and other community-based organisations, in order to maximize the benefit of existing services for PLHIV and reach more at-risk populations.
› A more intensive gender-sensitive and gender-responsive strategy needs to be developed.
› Scaling up HIV-related services will require a paradigm shift towards integrating comprehensive HIV support and care into the public health system.
› The Lao Red Cross HIV/AIDS programme should enhance the capacity of staff and Red Cross volunteers in psychosocial support to ensure the psychosocial well-being of PLHIV.
› Partnerships with private businesses need to be enhanced to support vulnerable people as part of corporate social responsibility.
› A harmonized and aligned collaboration with key stakeholders needs to be enhanced at all levels.