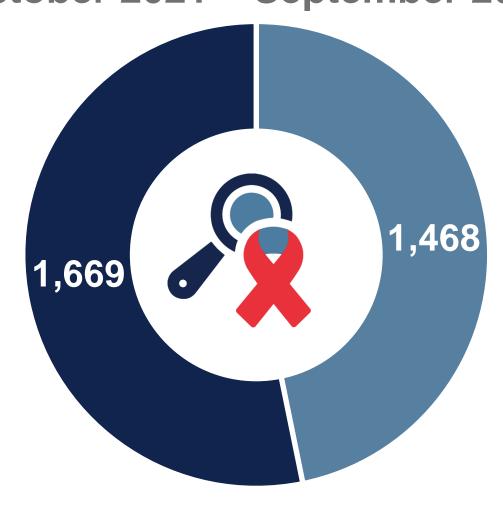
S. Sittikarn<sup>1</sup>, S. Janyam<sup>2</sup>, P. Patpeerapong<sup>3</sup>, T. Chaisalee<sup>4</sup>, R. Vannakit<sup>5</sup>, P. Rattakittvijun Na Nakorn<sup>6</sup>, S. Mills5, A. Arunmanakul<sup>5</sup>

ID# IAS-2023-04015

#### BACKGROUND

Key Population-Led Health Services (KPLHS) organizations have substantially contributed to Thailand's HIV response. Data from October 2021 - September 2022 show that 47% of case finding among key populations (KP) under the national HIV prevention fund was through KPLHS organizations under the PEPFAR/USAID-supported EpiC project (Meeting Targets and Maintaining HIV Epidemic Control). Additionally, 4 out of 5 PrEP clients nationwide are receiving services from these organizations. As donor funding decreases, these services need to be sustained by financing from the national health system or social enterprises by the organizations themselves that generate income.

Figure 1. HIV positive cases identified by Key Population-Led Health Services (KPLHS) organizations in Thailand during October 2021 – September 2022



- KPLHS Sites under USAID/EpiC Thailand project
- Other National Health Security Office (NHSO) recipients

**DESCRIPTION** 

EpiC KPLHS partners developed a pathway to sustainability in 4 steps: i) consensus building among national stakeholders to increase domestic financing and agreed steps for implementation; ii) demonstration of a social contracting mechanism for financing certified and accredited KPLHS organizations through reimbursement from the National Health Security Office (NHSO); iii) increasing available domestic financing to scale up and sustain KPLHS organizations based on rigorous costing data to ensure adequate reimbursement to cover operational costs for these organizations; and iv) diversifying sources of financing to cover declining donor funding of KPLHS operations. These options included future strategic and business planning on resource mobilization, social enterprise incubation, and expanding KPLHS sites to polyclinic status, which allows them to access a broader menu of government reimbursements.

Figure 2. Sustainable Pathways of the PEPFAR/USAID EpiC Thailand project



building among national stakeholders

certified and accredited KPLHS organizations

available fund to sustain KPLHS organization

funding to cover declining support from international donors

# **LESSONS LEARNED**

Since 2016, public sector expenditures for KP-led HIV services have increased significantly in the past five years. By 2023, between 40-60% of several KPLHS organizational budgets were supported by the Thai National Health Security Office (NHSO). However, this funding is fragile and has met with some resistance among government stakeholders who question the role of KP-led organizations in providing some HIV clinical services. Simultaneously, several KPLHS organizations have initiated social enterprises and polyclinics that show early promise in diversifying funding sources by generating income that can be channeled back into HIV services.

Key notes: 47% of HIV

positive cases were from

KPLHS clinics under 11 EpiC

Thailand, namely Caremat

Chiang Mai, Mplus Chiang

Mplus Phitsanulok, Rainbow

Sky Association of Thailand

Ubonratchatni, and Service

Mai, Mplus Chiang Rai,

in Bangkok, Chonburi,

Foundation (SWING) in

Saphankwai districts) and

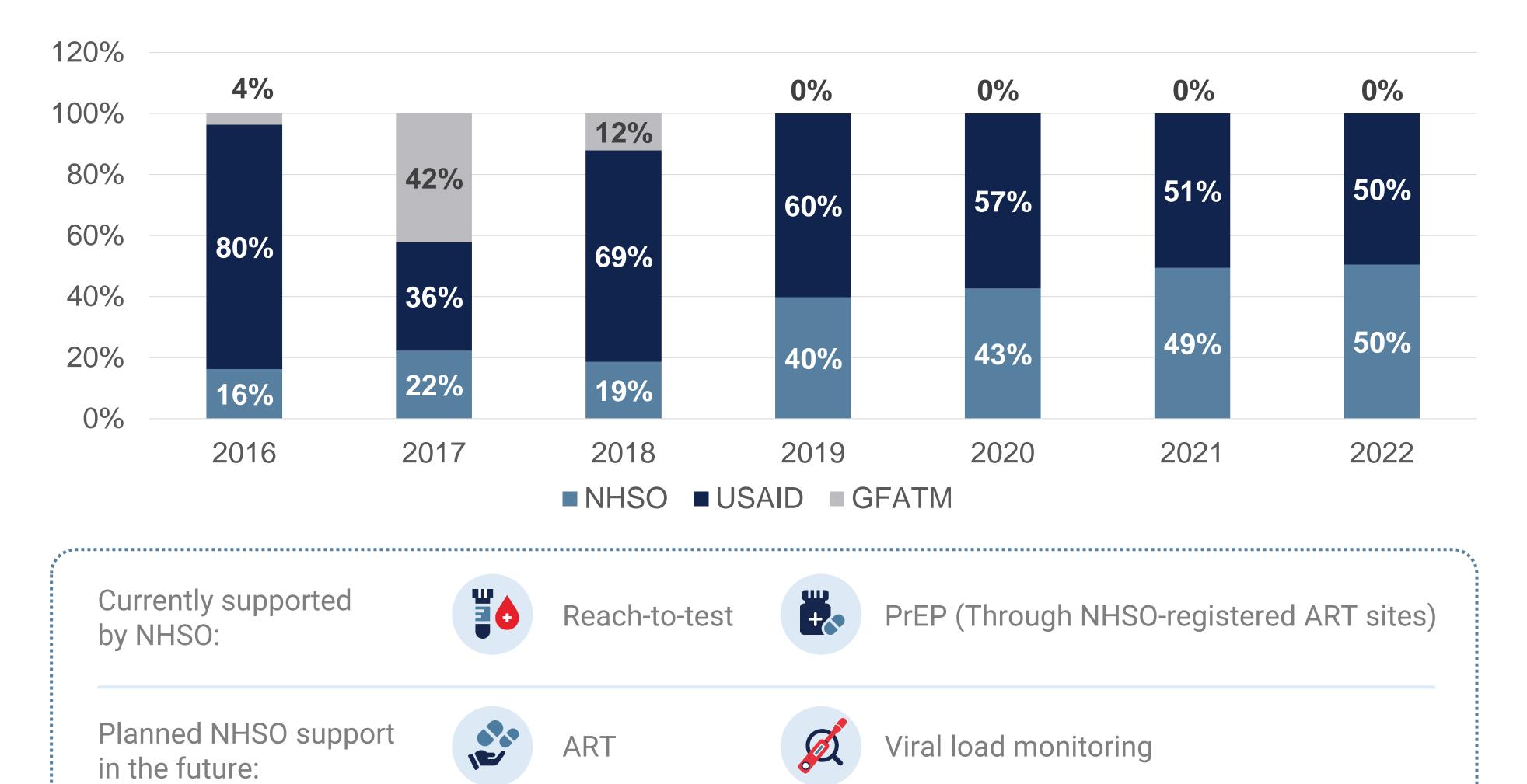
Bangkok (Silom and

Songkhla, and

Pattaya City.

Workers in Group

Figure 3. Percentage of operating costs supported by international donors (USAID, GFATM) and domestic financing (NHSO) to USAID-supported KP-led organizations in Thailand, 2016-2022



## **CONCLUSIONS/NEXT STEPS**

The sustainability and domestic financing of HIV services requires long term planning, advocacy, implementation science, cost analyses, and business acumen. While domestic government investments in KPLHS can be successful, it remains necessary to continue to provide data and advocacy on the value of KPLHS investments so that skeptical stakeholders can be convinced.

### REFERENCES

- <sup>1</sup> Prevention Program of National Health Security Office during October 2021 September 2022.
- <sup>2</sup> PEPFAR/USAID/EpiC Thailand project data during October 2021 September 2022.

### **AUTHOR AFFILIATIONS**

- <sup>1</sup> Caremat Foundation, Chiang Mai, Thailand.
- <sup>2</sup> Service Workers in Group Foundation, Bangkok, Thailand.
- <sup>3</sup> Mplus Foundation, Chiang Mai, Thailand.
- <sup>4</sup> Rainbow Sky Association of Thailand, Bangkok, Thailand.
- <sup>5</sup> PEPFAR/USAID EpiC Thailand project, FHI 360, Asia Pacific Regional Office, Bangkok, Thailand.
- <sup>6</sup> United States Agency for International Development, Regional Development Mission for Asia, Bangkok, Thailand.

### **CONTACT INFORMATION FOR LEAD AUTHOR:**

Satayu Sittikarn (He/Him), Director of Caremat Foundation Email: satayu.lapter@gmail.com

Presented at IAS 2023, the 12th IAS Conference on HIV Science, Brisbane, Australia | 23-26 JULY 2023

www. fhi360.org/projects/meeting-targets-and-maintaining-epidemic-control-epic









