It is my great honour to share Thailand’s best practices with all of you today. I would like to start by saying that a successful HIV program must now be designed through the HIV Status-Neutral Approach lens, meaning that equal importance will need to be given to individuals coming in for HIV testing regardless of their HIV status. Those tested HIV-positive must be offered same-day ART initiation to achieve zero risk of sexual transmission of HIV through U=U as soon as possible. Those tested HIV-negative must be offered same-day PrEP as part of HIV prevention combination package to quickly bring them to the goal of having negligible risk of HIV acquisition.

Same-day ART has been recommended in our National Guidelines since 2020, although successful implementation has seen mainly only in facilities where U=U message has been used correctly and routinely – which points to more work needed around educating and implementing U=U in Thailand.

Thailand has successfully implemented same-day PrEP mainly through the Key Population-Led Health Services (KPLHS) which started in 2015. HIV and sexual health service packages under KPLHS were designed by key populations themselves to ensure that services are client-centered. Services are co-delivered by lay providers who are often members of key populations and therefore understand well the social and sexual contexts of their clients. KPLHS has contributed to more than half of HIV testing and around two-thirds of PrEP service among MSM and transgender women in Thailand. Data were used to support the inclusion of PrEP as part of our UHC since 2019.

These successes have led Thailand to legalize KPLHS in 2019 to allow trained lay providers to collect samples, conduct point-of-care HIV and STI testing, and give out PrEP and PEP as prescribed by doctors. National curriculum and standards to guide the training and assessment of lay providers were already made ready. The only final step we have been waiting, for more than a year now, is for these trained lay providers to be officially certified by the Ministry of Public Health. This step is required in order for these lay providers to get direct reimbursement of service costs from the government to support KPLHS sustainability, truly as part of Thailand’s national healthcare system.

To end the HIV epidemic, we need to simplify, de-medicalize and differentiate HIV testing, ART and PrEP services. Thailand has been fortunate to have committed civil society organizations, strong research and capacity building organization, supportive international funding agencies, advocates and champions from local public health facilities, and from time-to-time understanding policy makers. It has been very encouraging to see KPLHS being replicated in our neighbouring countries such as Vietnam and the Philippines. We are very optimistic that with KPLHS scale-up and sustainability, Thailand and countries in the Asia-Pacific will be able to control and end the HIV epidemic soon.