

If you know that a food seller has the AIDS virus, would you buy food from them?

Do you think AIDS is still a problem in Thailand?

Do you think you are at risk of getting HIV infection?

Opinion Poll on HIV/AIDS Thailand

Research Institute of Bangkok University
United Nations Development Programme

Do you think enough is being done to inform young people about the risks of HIV/AIDS in Thailand?

If a teacher has the AIDS virus, but is still without any clear symptoms, should he or she be allowed to continue teaching in school?

Do you think your family will accept you if you are HIV-infected?

If you knew a shopkeeper has the AIDS virus, would you buy any product from him/her?

At what level of schooling should AIDS education begin?

Do you think condom vending machines should be available in universities and colleges?

Do you think that the Thai government is doing enough to deal with HIV/AIDS?

In which of the following ways, if any, do you think someone can become infected with HIV/AIDS?



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United Nations Development Programme

Rajdamnern Nok Avenue

Bangkok 10200 Thailand

Tel: (66-2) 288 2130

Fax: (66-2) 280 0556

E-mail: registry.th@undp.org

Web site: www.undp.or.th

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Part I: Executive Summary

Though the majority of Thais are knowledgeable about Acquired Immunodeficiency Syndrome (AIDS), fear and denial about the epidemic still prevail. While most people are aware of how the Human Immunodeficiency Virus (HIV) is transmitted, Thai youth do not think they themselves are at risk of catching it, and consequently do little to protect themselves. Well over half of Thai people surveyed believe that the Government is not doing enough to deal with AIDS. They want AIDS education in primary schools and condom vending machines in universities. These and other surprisingly candid viewpoints were revealed in a nationwide Opinion Poll on HIV/AIDS, conducted by the United Nations Development Programme (UNDP) and the Research Institute of Bangkok University in Thailand.

The poll was carried out among 7,500 Thais – male and female of all ages – in both rural and urban areas across the country. A stunning 95 percent of those polled say that AIDS remains a problem in Thailand. The opinion poll reveals that most Thais have a liberal, even progressive attitude towards AIDS education and condom promotion targeted at young people. More than 68 percent feel that primary school students should be educated about AIDS. They want children at an early age to understand the dangers of HIV and to know how to protect themselves before they become sexually active.

Over 53 percent of those surveyed agree that condom vending machines should be available in universities or colleges, as opposed to 34 percent who do not want condom vending machines, and 13 percent who do not know. Education officials and politicians – who often balk at the idea of promoting condoms in schools – seem to be out of touch with public opinion.

The poll reveals that people are dissatisfied with government performance in responding to the epidemic. Some 61 percent think that the Government is not doing enough to deal with HIV/AIDS. Fifty-eight percent feel that current efforts to provide AIDS education to teenagers are inadequate.

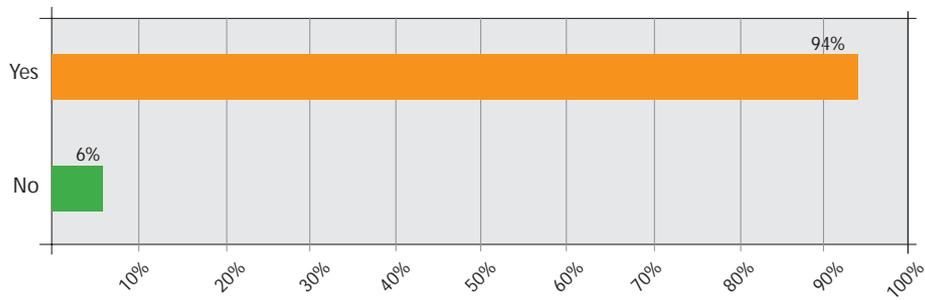
Many Thais fear people living with HIV/AIDS. While a great majority seem to be knowledgeable about how HIV is transmitted and how it is not, only 19 percent of respondents say they would buy food from an HIV-positive food seller. One in three of the respondents think that a teacher should stop teaching if HIV-positive. Forty percent of Thai men feel their families would reject them if they became infected with HIV. Thirty-six percent of Thai women feel the same.

Three quarters of those surveyed in the Opinion Poll feel confident that they are not at risk of AIDS infection. Curiously, more married people than singles feel at risk of HIV infection. Married women who were surveyed say they feel at risk because of their husbands' sexual behaviour.

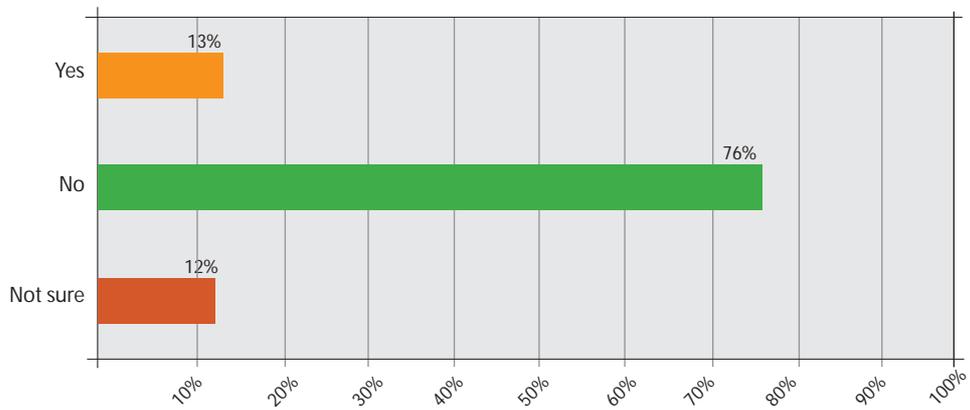
Thai youth are in denial about the risk of HIV infection. Nearly 80 percent of young people 15-24 years old believe they are not at risk of infection. No wonder only about 20 percent of sexually active young people are using condoms consistently.

Results of the Opinion Poll

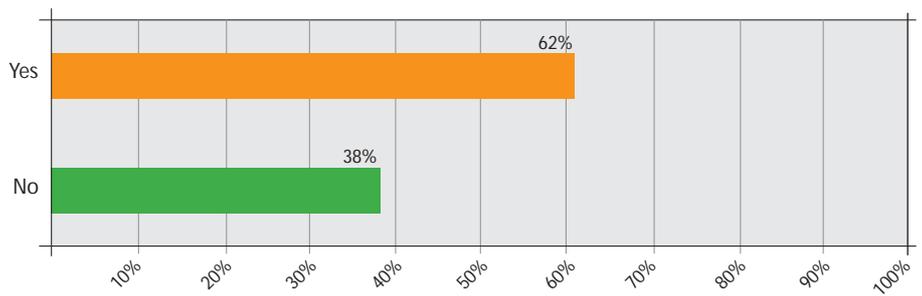
Do you think AIDS is still a problem in Thailand?



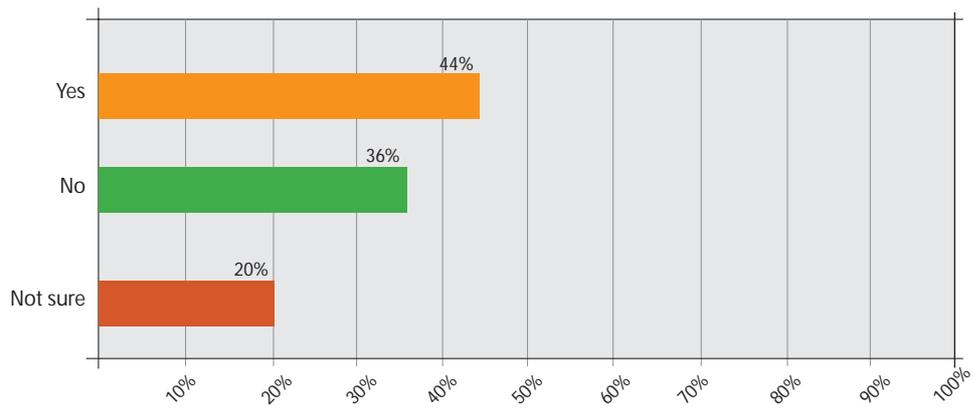
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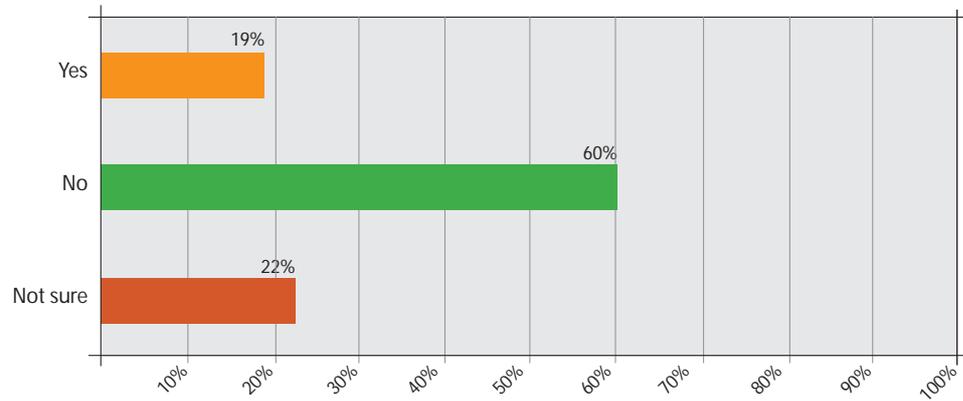
Do you think your family would accept you if you are HIV-infected?



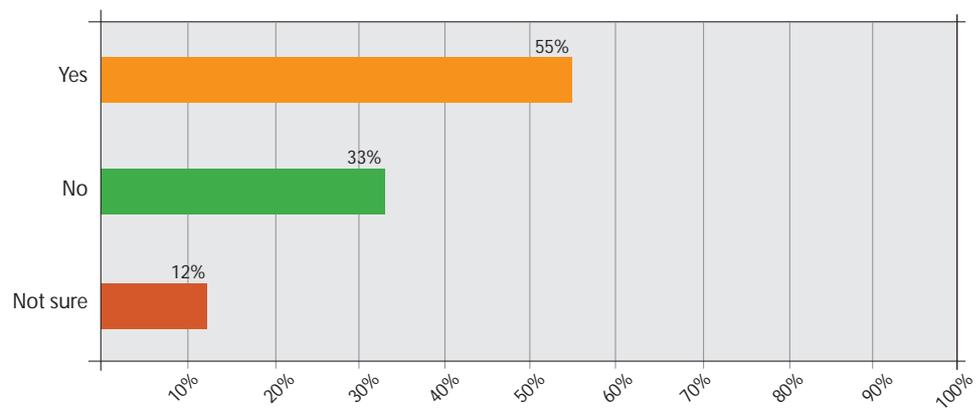
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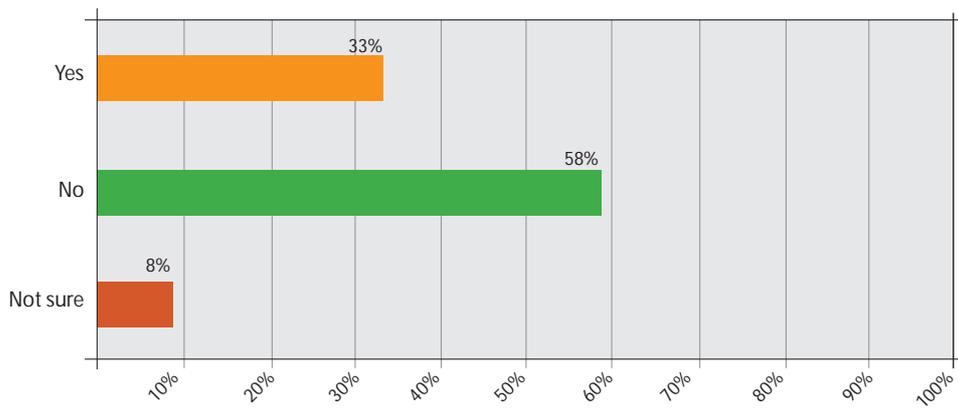
If you know that a *food seller* has the AIDS virus, would you buy food from them?



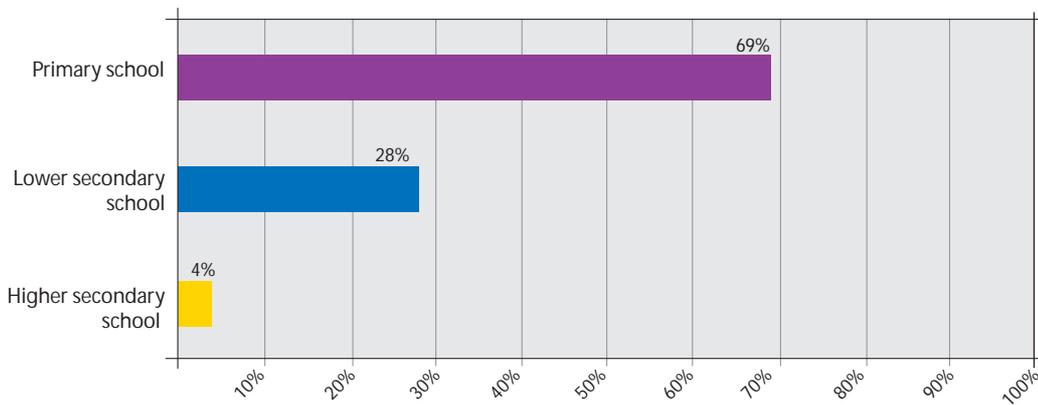
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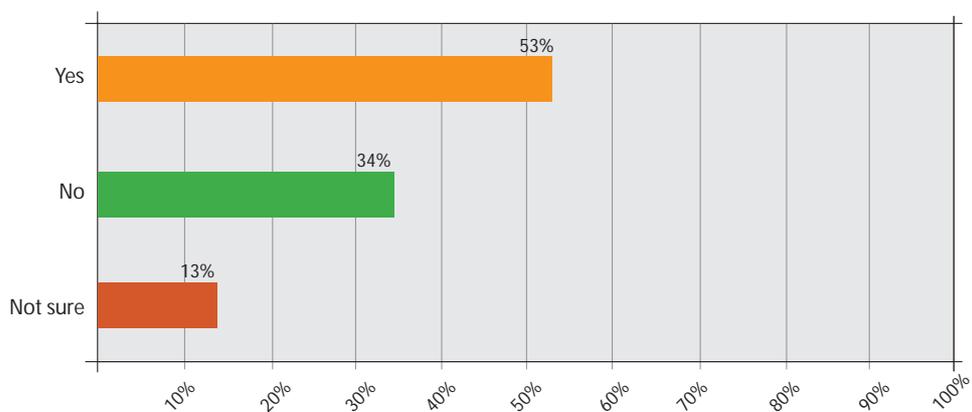
Do you think enough is being done to inform young people about the risks of HIV/AIDS in Thailand?



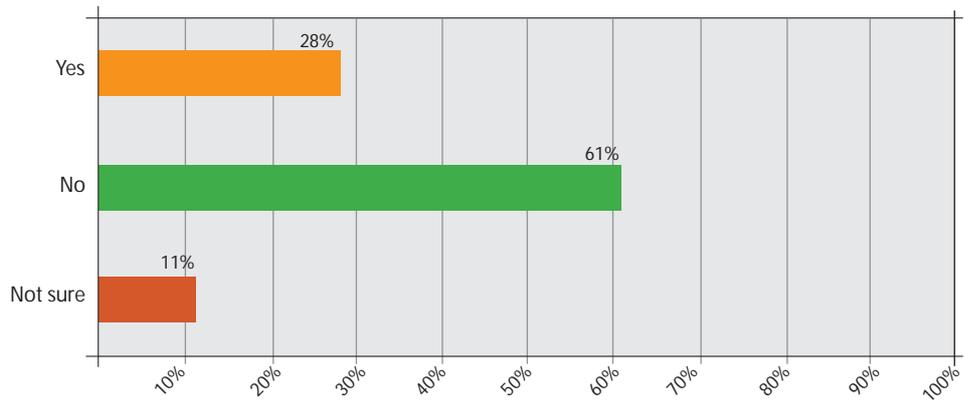
At what level of schooling should AIDS education begin?



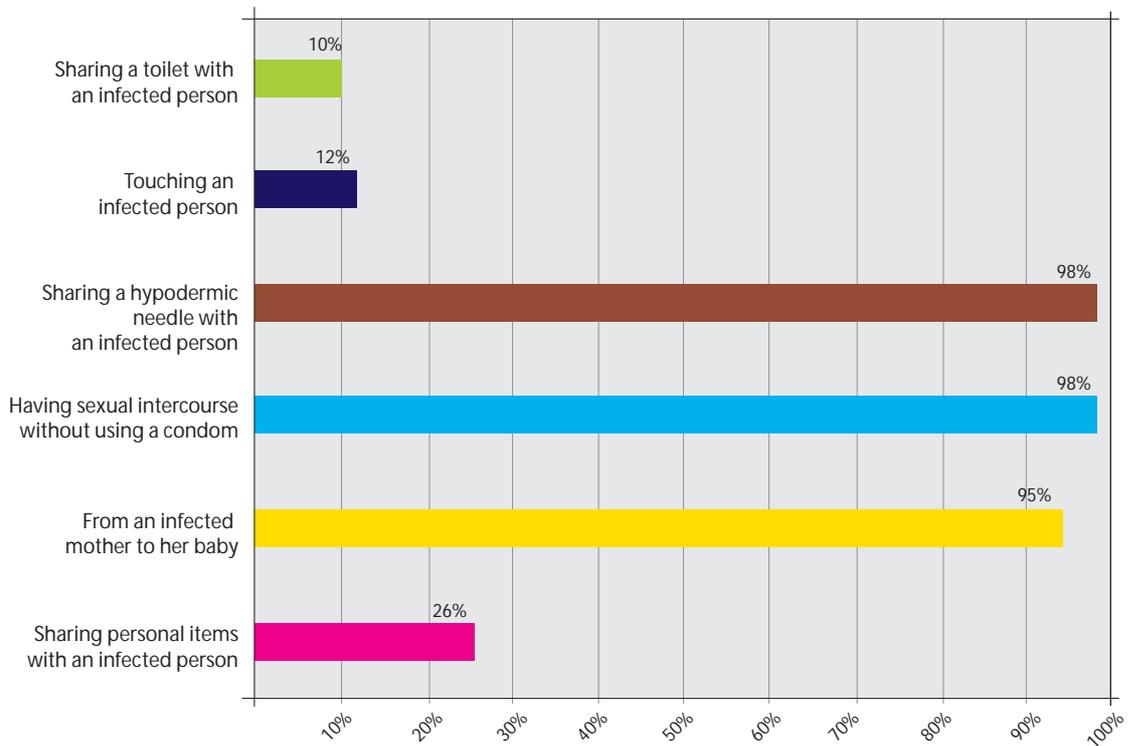
Do you think condom vending machines should be available in universities and colleges?



Do you think that the Thai Government is doing enough to deal with HIV/AIDS?

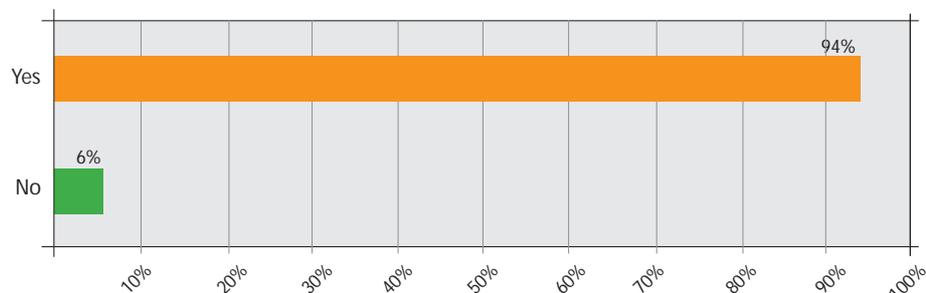


In which of the following ways, if any, do you think someone can become infected with HIV/AIDS?



Part II: Detailed Analysis

Do you think AIDS is still a problem in Thailand?



The vast majority of respondents – 94.2 percent – think HIV/AIDS is still a problem in Thailand. Only 5.8 percent believe HIV/AIDS is no longer a problem in Thailand.

Sex affects the perception of AIDS in Thailand. A larger proportion of female respondents than male respondents believe AIDS is still a problem in Thailand.

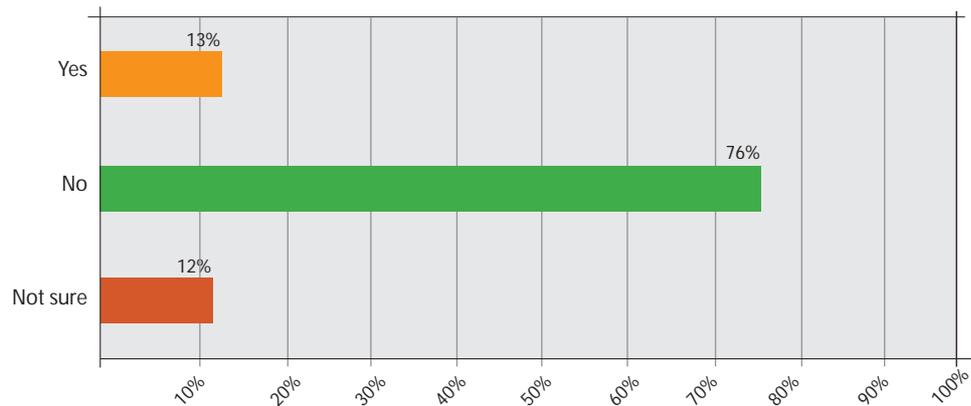
Age does not affect the perception of AIDS as a problem in Thailand.

Education affects the perception of AIDS as a problem in Thailand. More respondents with higher education think that HIV/AIDS is still a problem in Thailand than those respondents with less education.

Marital status does not affect the perception of AIDS as a problem in Thailand.

	AIDS remains a problem in Thailand		Chi-Sq. (Sig.)
	Yes	No	
Sex			
Male	3,176 -93.1	234 -6.9	13.628 0
Female	3,891 -95.1	199 -4.9	
Age range			
10-40 years old	4,825 -94.1	304 -5.9	0.705 -0.216
Over 40 years old	2,242 -94.6	129 -5.4	
Education			
Uneducated	299 -89.3	36 -10.7	27.058 0
Primary school	1,990 -93.2	146 -6.8	
Secondary school	2,274 -95.1	118 -4.9	
Vocational school/diploma	1,144 -94.3	69 -5.7	
Bachelor's degree or higher	1,360 -95.5	64 -4.5	
Marital status			
Single	3,590 -94.2	222 -5.8	0.036 -0.444
Married/Widowed/Divorced	3,477 -94.3	211 -5.7	

Do you think you are at risk of getting HIV infection?



Over 75 percent of the respondents are confident that they are not at risk of contracting HIV. Only 13 percent think they are at risk of HIV infection, while 11.6 percent are not sure.

Sex affects attitude towards HIV risk. Male respondents think they are at greater risk of getting HIV infection than their female counterparts do.

Age affects attitude towards HIV risk. Older respondents (41 years old and up) believe they are at less risk than other age groups do.

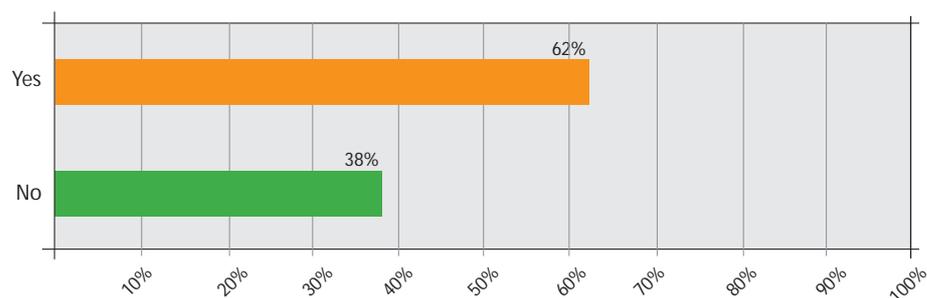
Education affects attitude towards HIV risk. Respondents with higher education feel they have less risk of HIV infection than respondents with lower levels of education.

Marital Status affects attitude towards HIV risk. Married respondents perceive that they are more at risk of getting HIV infection than single respondents.

The in-depth interviews indicate that most of the respondents believe they are not at risk of contracting HIV because they do not partake in risky behaviours such as promiscuous relationships and intravenous drug use. Most respondents are confident in the hygiene of hospitals and clinics. Females who feel at risk of HIV infection say it is because of their husbands' sexual behaviour.

	Perceived risk of HIV infection			Chi-Sq. (Sig.)
	No risk	Possible risk	Not sure	
Sex				
	2,464	497	449	37.906
Male	-72.3	-14.6	-13.2	0
	3,206	460	424	
Female	-78.4	-11.2	-10.4	
Age range (2 levels)				
	3,793	642	694	56.415
10-40 years old	-74.0	-12.5	-13.5	0
	1,877	315	179	
Over 40 years old	-79.2	-13.3	-7.5	
Age range (5 levels)				
	491	72	106	87.574
10-14 years old	-73.4	-10.8	-15.8	0
	1,920	275	311	
15-24 years old	76.6	-11	-12.4	
	882	211	182	
25-34 years old	-69.2	-16.5	-14.3	
	779	125	127	
35-44 years old	-75.6	-12.1	-12.3	
	1,598	274	147	
Over 44 years old	-79.1	-13.6	-7.3	
Education				
	265	38	32	40.388
Uneducated	-79.1	-11.3	-9.6	0
	1,638	298	200	
Primary school	-76.7	-14	-9.4	
	1,826	277	289	
Secondary school	-76.3	-11.6	-12.1	
	851	180	182	
Vocational school/diploma	-70.2	-14.8	-15.0	
	1,090	164	170	
Bachelor's degree or higher	-76.5	-11.5	-11.9	
Marital status				
	2,877	452	483	12.04
Single	-75.5	-11.9	-12.7	-0.002
	2,793	505	390	
Married/Widowed/Divorced	-75.5	-13.7	-10.6	
Marital status (Only woman)				
	1,611	197	209	12.413
Single	-79.9	-9.8	-10.4	-0.015
	1,379	237	191	
Married	-76.3	-13.1	-10.6	
	216	26	24	
Divorced/Separated	-81.2	-9.8	-9	

Do you think your family will accept you if you are HIV-infected?



Most of the respondents – 61.9 percent – believe that they would be accepted by their family if they have HIV. Conversely, 38.1 percent think they would not be accepted.

Sex affects attitude towards family acceptance. Female respondents think that their families would accept them more than their male counterparts do.

Age affects attitude towards family acceptance. Older respondents believe that they would not be accepted, while more younger respondents think they would be accepted.

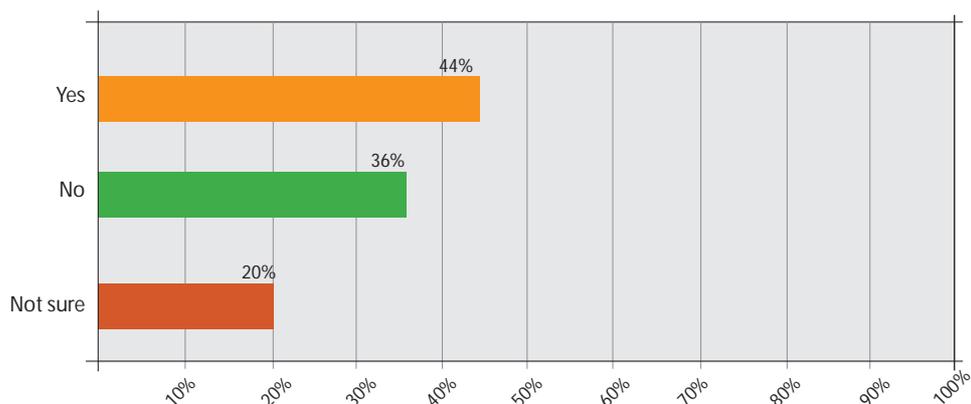
Education affects attitude towards family acceptance. The respondents with limited education think that they would not get acceptance, while those with higher education believe they would.

Marital status affects attitude towards family acceptance. Single respondents are more confident that they would be accepted by their families than the married respondents.

From in-depth interviews, respondents indicated that their families would be able to accept them if they become HIV-infected since all family members have knowledge about AIDS, and would be ready to support them. Nevertheless, some interviewees noted that whether their families would accept them or not depends on the cause of infection. If they get infected because of their promiscuous behaviour, their families would not accept them.

	Family's acceptance of an HIV-infected person		Chi-Sq. (Sig.)	
	Yes	No		
Sex				
Male	2,047 -60.0	1,363 -40.0	9.212 -0.001	
Female	2,595 -63.4	1,495 -36.6		
Age range				
10-40 years old	3,288 -64.1	1,841 -35.9	33.68 -0.001	
Over 40 years old	1,354 -57.1	1,017 -42.9		
Education				
Uneducated	183 -54.6	152 -45.4	39.152 0	
Primary school	1,251 -58.6	885 -41.4		
Secondary school	1,463 -61.2	929 -38.8		
Vocational school/diploma	793 -65.4	420 -34.6		
Bachelor's degree or higher	952 -66.9	472 -33.1		
Marital status				
Single	2,479 -65.0	1,333 -35.0		32.369 0
Married/Widowed/Divorced	2,163 -58.6	1,525 -41.4		

If you know a *shopkeeper* has the AIDS virus, would you buy any product from them?



Forty-four percent of the respondents would buy products from infected shopkeepers as long as there is no visible symptom, while 35.6 percent would not. The rest of the respondents, 20.4 percent, said they are not sure.

Sex does not affect attitude towards buying products from infected shopkeepers.

Age affects attitude towards buying products from infected shopkeepers. Respondents over 40 years old would buy products from infected shopkeepers more than younger respondents aged 10-40 would.

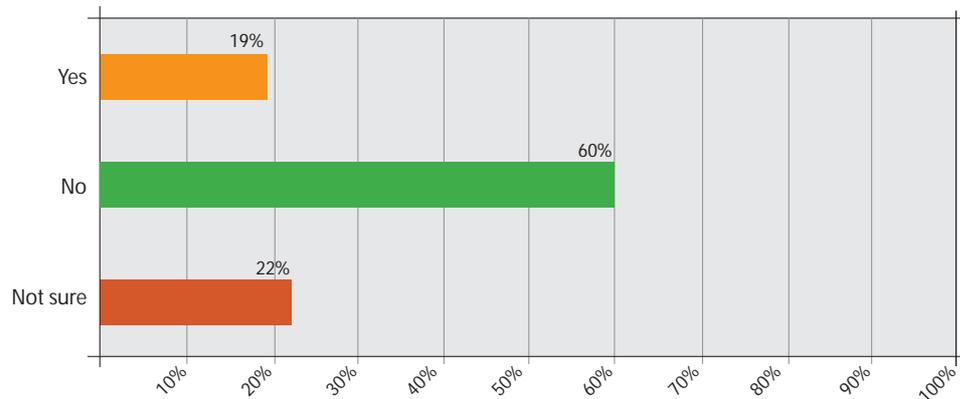
Education affects attitude towards buying products from younger infected shopkeepers. Respondents with higher education would buy products from infected shopkeepers more than would those with less education.

Marital status affects attitude towards buying products from infected shopkeepers. Married respondents would buy products from infected shopkeepers more than their single counterparts would.

In-depth interviews indicated that the main reason for people buying products from shopkeepers with AIDS infection is that they would like to help those people to maintain their livelihoods. In addition, they think that HIV cannot be transmitted through casual contact.

	Buying products from an HIV-infected shopkeeper		Chi-Sq. (Sig.)
	No	Yes	
Sex			
Male	1,895 -55.6	1,515 -44.4	0.382 -
Female	2,302 -56.3	1,788 -43.7	
Age range			
10-40 years old	2,986 -58.2	2,143 -41.8	33.564 0
Over 40 years old	1,211 -51.1	1,160 -48.9	
Education			
Uneducated	236 -70.4	99 -29.6	71.075 0
Primary school	1,187 -55.6	949 -44.4	
Secondary school	1,400 -58.5	992 -41.5	
Vocational school/diploma	689 -56.8	524 -43.2	
Bachelor's degree or higher	685 -48.1	739 -51.9	
Marital status			
Single	2,283 -59.9	1,529 -40.1	48.578 0
Married/Widowed/Divorced	1,914 -51.9	1,774 -48.1	

If you know that a *food seller* has the AIDS virus, would you buy food from them?



Most of the respondents – 59.7 percent – would not buy food from infected shopkeepers. Only 18.8 percent of the respondents would buy food from HIV-infected shopkeepers without hesitation, whereas 21.5 percent are not sure.

Sex affects the behaviour of buying food from infected shopkeepers. Male respondents would buy food from infected shopkeepers more than their female counterparts would.

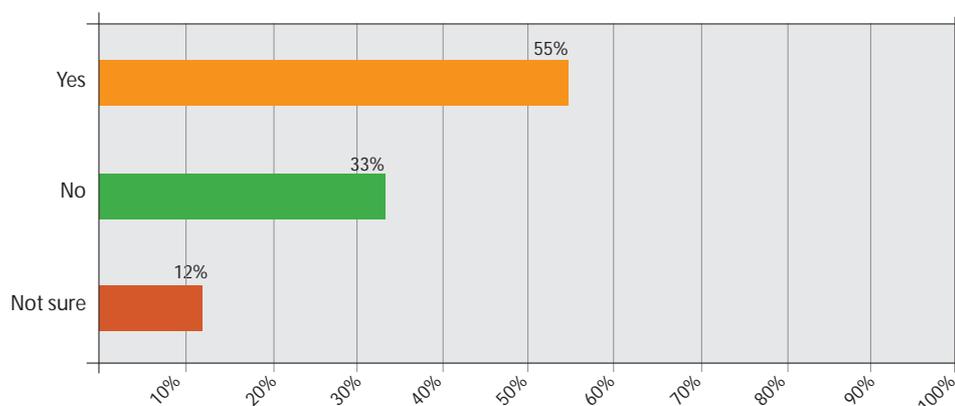
Age affects the behaviour of buying food from infected shopkeepers. More respondents aged over 40 years old would buy food from infected shopkeepers than the younger group (10-40 years old) would.

Education affects the behaviour of buying food from infected shopkeepers. Respondents with higher education would buy food from infected shopkeepers more than less-educated respondents would.

Marital status affects the behaviour of buying food from infected shopkeepers. Married respondents would buy food from infected shopkeepers more than single ones would.

	Buying food from an HIV-infected shopkeeper		Chi-Sq. (Sig.)
	No	Yes	
Sex			
Male	2,685 -78.7	725 -21.3	25.092 0
Female	3,406 -83.3	684 -16.7	
Age range			
10-40 years old	4,234 -82.6	895 -17.4	19.005 0
Over 40 years old	1,857 -78.3	514 -21.7	
Education			
Uneducated	286 -85.4	49 -14.6	20.637 0
Primary school	1,703 -79.7	433 -20.3	
Secondary school	1,992 -83.3	400 -16.7	
Vocational school/diploma	992 -81.8	221 -18.2	
Bachelor's degree or higher	1,118 -78.5	306 -21.5	
Marital status			
Single	3,217 -84.4	595 -15.6	51.318 0
Married/Widowed/Divorced	2,874 -77.9	814 -22.1	

If a teacher has the AIDS virus, but is still without any clear symptoms, should he or she be allowed to continue teaching in school?



Most of the respondents – 54.8 percent – think that HIV-infected teachers can continue teaching as long as there is no visible symptom. However, 33.2 percent object to the continuation of teaching, and 12 percent are not sure.

Sex affects the acceptance of infected teachers. Female respondents are able to accept infected teachers more than the male group is.

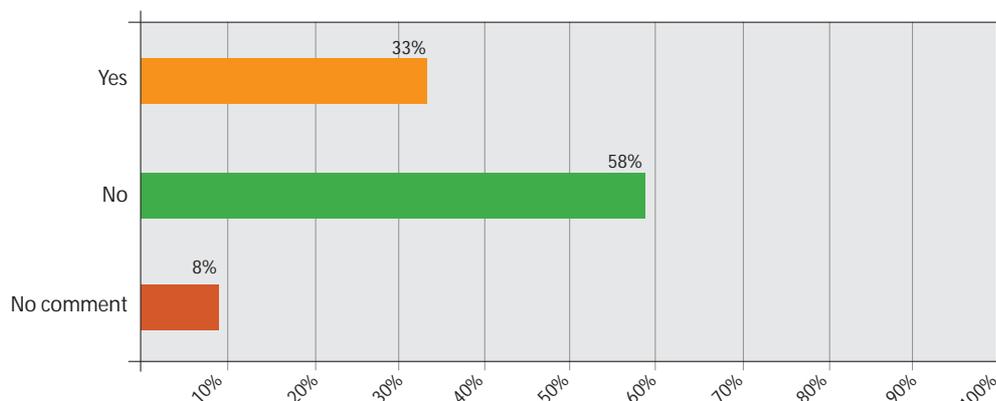
Age affects the acceptance of infected teachers. Respondents aged 10-40 years old accept infected teachers more than older respondents do.

Education affects the acceptance of infected teachers. Higher-educated respondents would accept infected teachers more than lower-educated respondents would.

Marital status affects the acceptance of infected teachers. Single respondents accept infected teachers more than the married group does.

	Continuation of teaching by an HIV-infected teacher			Chi-Sq. (Sig.)
	Disagree	Agree	Not sure	
Sex				
Male	1,711 -34.3	1,800 -52.8	439 -12.9	10.638 -0.005
Female	1,321 -32.3	2,307 -56.4	462 -11.3	
Age range				
10-40 years old	1,595 -31.1	2,865 -55.9	669 -13	40.041 0
Over 40 years old	897 -37.8	1,242 -52.4	232 -9.8	
Education				
Uneducated	175 -52.2	108 -32.2	52 -15.5	222.583 0
Primary school	856 -40.1	1,048 -49.1	232 -10.9	
Secondary school	772 -32.3	1,032 -54.4	318 -13.3	
Vocational school/diploma	327 -27	705 -58.1	181 -14.9	
Bachelor's degree or higher	362 -25.4	944 -66.3	118 -8.3	
Marital status				
Single	1,183 -31.0	2,099 -55.1	530 -13.9	34.405 0
Married/Widowed/Divorced	1,309 -35.5	2,008 -54.4	371 -10.1	

Do you think enough is being done to inform young people about the risks of HIV/AIDS in Thailand?



Most of the respondents – 58.4 percent – think that there is inadequate information provided for teenagers, while 33.3 percent think otherwise. The remaining 8.3 percent have no comment.

Sex does not affect attitude towards AIDS information for teenagers.

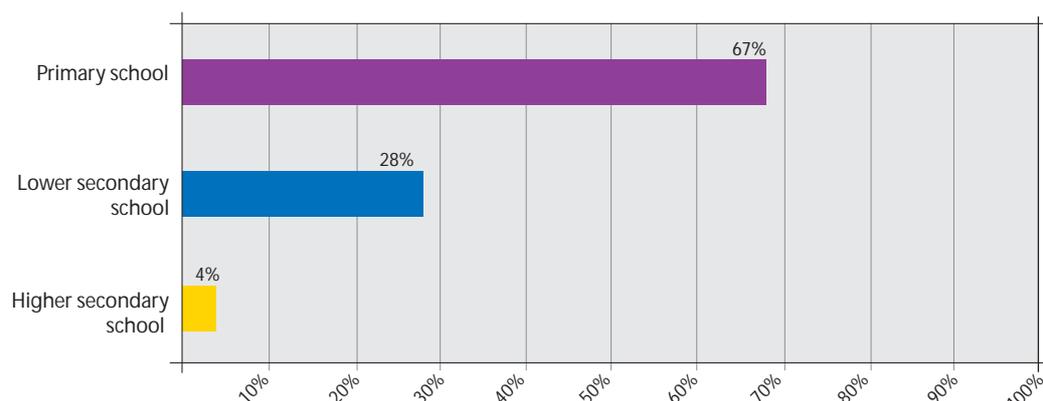
Age does not affect attitude towards AIDS information for teenagers.

Education affects attitude towards AIDS information for teenagers. More well-educated respondents think that AIDS information for teenagers is insufficient than their less-educated counterparts.

Marital status does not affect attitude towards AIDS information for teenagers.

	Sufficiency of HIV/AIDS information for young people			Chi-Sq. (Sig.)
	Sufficient	Insufficient	No comment	
Sex				
Male	1,150 -33.7	1,988 -58.3	272 -8	1.095 -0.578
Female	1,348 -33	2,392 -58.5	350 -8.6	
Age range				
10-40 years old	1,759 -34.3	2,936 -57.2	434 -8.5	9.033 -0.011
Over 40 years old	739 -31.2	1,444 -60.9	188 -7.9	
Education				
Uneducated	107 -31.9	174 -51.9	54 -16.1	85.195 0
Primary school	689 -32.3	1,236 -57.9	211 -9.9	
Secondary school	741 -31	1,448 -60.5	203 -8.5	
Vocational school/diploma	479 -39.5	648 -53.4	86 -7.1	
Bachelor's degree or higher	482 -33.8	874 -61.4	68 -4.8	
Marital status				
Single	1,294 -33.9	2,192 -57.5	326 -8.6	2.644 -0.267
Married/Widowed/Divorced	1,204 -16.1	2,188 -59.3	296 -8.0	

At what level of schooling should AIDS education begin?



Most of the respondents (68.6 percent) think that AIDS education should start at the primary school level, while 27.8 percent say it should start at the secondary school level. Only 3.7 percent think it should start at high school level.

Sex does not affect the attitude to AIDS education in schools.

Age affects the attitude to AIDS education in schools. There are more respondents at age 10-40 years old who think that AIDS education should start at primary school level than those above 40 years of age.

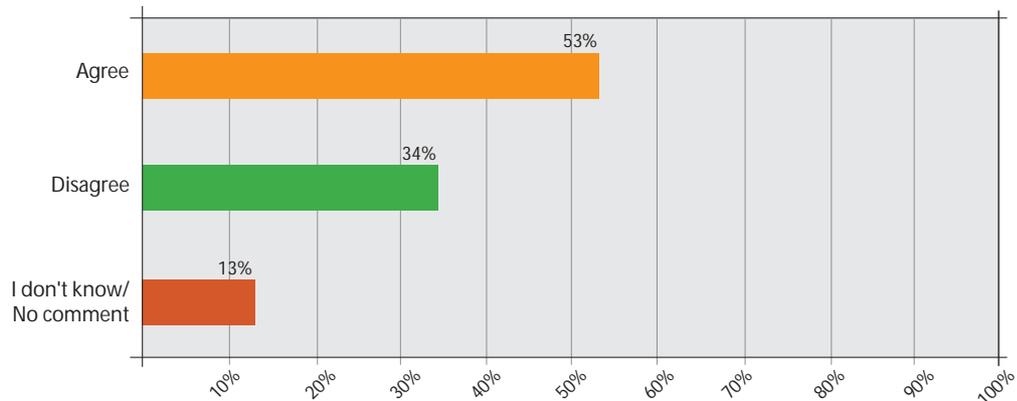
Education affects the attitude to AIDS education in schools. More respondents with higher levels of education think that AIDS education should start at the primary school level than those with less education.

Marital status does not affect attitude towards AIDS education in schools.

In-depth interviews indicate that AIDS education should be provided at the primary school level because it can help instil knowledge about AIDS prevention in children and raise awareness about the danger of AIDS. At present, children are exposed to various kinds of media, and their society has become more dangerous. Children should be equipped with knowledge about protecting themselves. Thus, AIDS education ought to be a consistent part of school curriculum from primary through secondary level, where student risk behaviours tend to increase.

	When AIDS education should begin			Chi-Sq. (Sig.)
	Primary school	Lower secondary school	Higher secondary school	
Sex				
Male	2,343 -68.7	933 -27.4	134 -3.9	1.707 -0.426
Female	2,800 -68.5	1,150 -28.1	140 -3.4	
Age range				
10-40 years old	3,584 -69.9	1,371 -26.7	174 -3.4	13.399 -0.001
Over 40 years old	1,559 -65.8	712 -30.0	100 -4.2	
Education				
Uneducated	229 -68.4	85 -25.4	21 -6.3	50.587 0
Primary school	1,411 -66.1	615 -28.8	110 -5.1	
Secondary school	1,630 -68.1	685 -28.6	77 -3.2	
Vocational school	823 -67.8	349 -28.8	41 -3.4	
Bachelor's degree or higher	1,050 -73.7	349 -24.5	25 -1.8	
Marital status				
Single	2,592 -68.0	1,070 -28.1	150 -3.9	2.304 -0.316
Married/Divorced	2,551 -69.2	1,013 -27.5	124 -3.4	

Do you think condom vending machines should be available in universities and colleges?



A little more than half – 52.7 percent – of respondents support condom vending machine installation in universities and colleges. Another 34.1 percent disagree with the idea, and 13.2 percent have no comment.

Sex does not affect attitude towards installing condom vending machines in educational institutes.

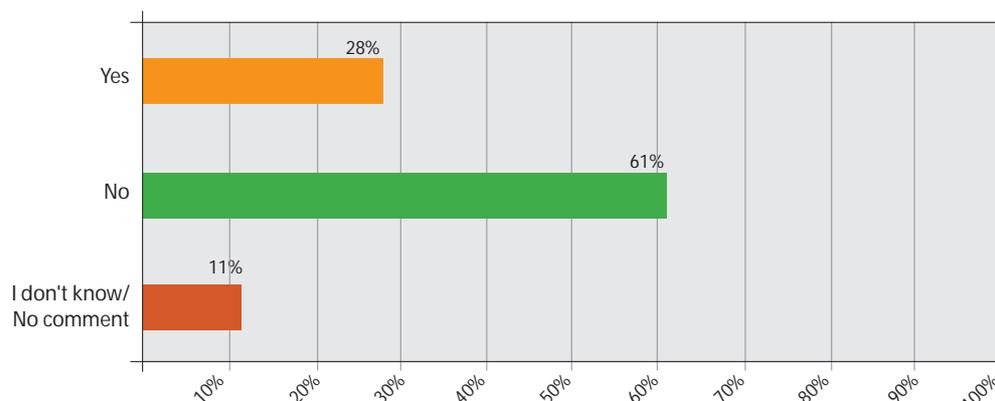
Age affects attitude towards installing condom vending machines in educational institutes. Older respondents (41 years old and older) disagree with the idea, while younger groups support it.

Education affects attitude towards installing condom vending machines in educational institutes. Respondents with higher education think there should be condom vending machines installed in educational institutes, while respondents with less education disagree.

Marital status affects attitude towards installing condom vending machines in educational facilities. More single respondents than married respondents agree with installing vending machines.

	Availability of condom machines in colleges			Chi-Sq. (Sig.)
	Agree	Disagree	No comment	
Sex				
Male	1,838 -53.9	1,142 -33.5	430 -12.6	4.124 -0.122
Female	2,114 -51.7	1,413 -34.5	563 -13.8	
Age range				
10-40 years old	2,838 -55.3	1,599 -31.2	692 -13.5	62.026 0
Over 40 years old	1,114 -47.0	956 -40.3	301 -12.7	
Education				
Uneducated	121 -36.1	142 -42.4	72 -21.5	89.971 0
Primary school	1,075 -50.3	773 -36.2	288 -13.5	
Secondary school	1,272 -53.2	777 -32.5	343 -14.3	
Vocational school/diploma	702 -57.8	349 -28.8	163 -13.4	
Bachelor's degree or higher	783 -55.0	514 -36.1	127 -8.9	
Marital status				
Single	2,080 -54.6	1,163 -30.5	569 -14.9	50.6 0
Married/Widowed/Divorced	1,872 -50.8	1,392 -37.7	424 -11.5	

Do you think that the Thai Government is doing enough to deal with HIV/AIDS?



More than 61 percent of respondents think that the Government's performance in tackling the AIDS problem is not adequate, while 27.6 percent think it is. Another 11.3 percent have no comment.

Sex does not affect attitude towards the Government's performance.

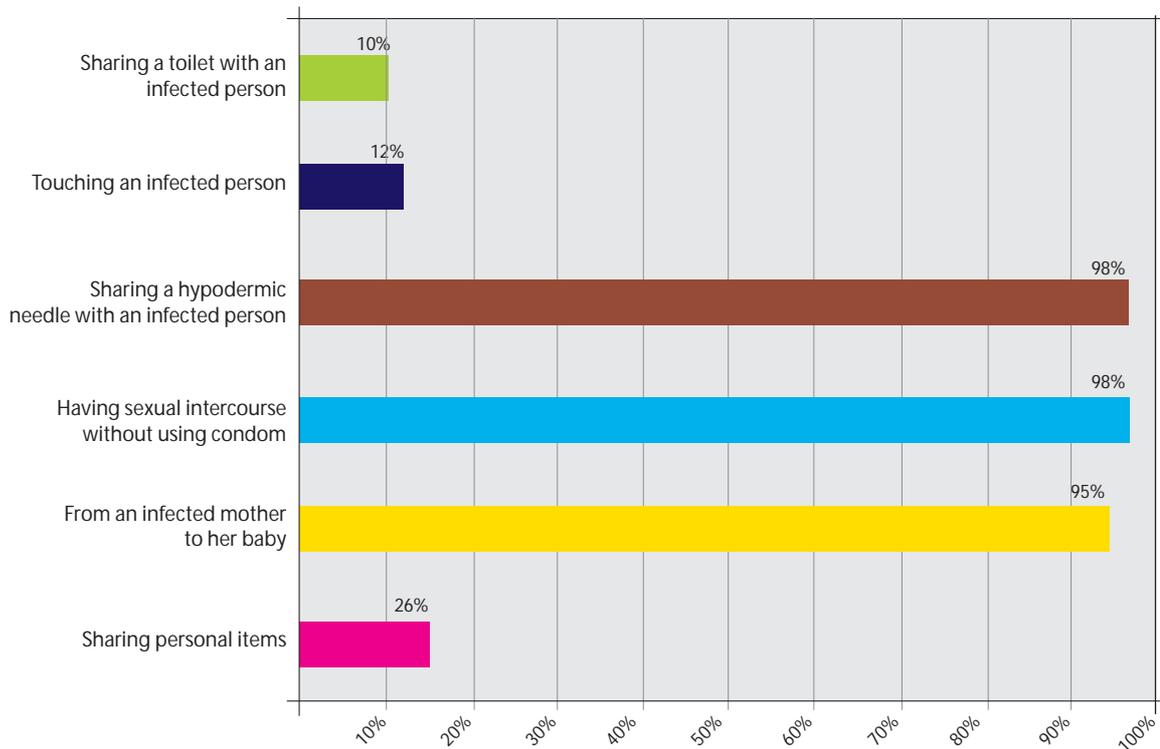
Age affects attitude towards government AIDS-related schemes. There is a larger proportion of younger respondents (10-40 years old) who believe that government anti-AIDS schemes are not adequately.

Education affects attitude towards government AIDS-related schemes. More respondents with higher education than with lower education think that government procedure in tackling the AIDS problem is not efficient.

Marital status affects the attitude to government AIDS-related schemes. More single respondents than married think that the Government is inefficient in taking actions against AIDS.

	Thai government's efficiency in dealing with AIDS			Chi-Sq. (Sig.)
	Efficient	Inefficient	No comment	
Sex				
Male	934 -27.4	2,092 -61.3	384 -11.3	0.137 -934
Female	1,135 -27.8	2,493 -61	462 -11.3	
Age range				
10-40 years old	1,333 -26.0	3,194 -62.3	602 -11.7	21.458 0
Over 40 years old	736 -31.0	1,391 -58.7	244 -10.3	
Education				
Uneducated	89 -26.6	178 -53.1	68 -20.3	106.495 0
Primary school	686 -32.1	1,204 -56.4	246 -11.5	
Secondary school	608 -25.4	1,503 -62.8	281 -11.7	
Vocational school/diploma	340 -28.0	718 -59.2	155 -12.8	
Bachelor's degree or higher	346 -24.3	982 -69.0	96 -6.7	
Marital status				
Single	950 -24.9	2,413 -63.3	449 -11.8	27.926 0
Married/Widowed/Divorced	1,119 -30.3	2,172 -58.9	397 -10.8	

In which of the following ways, if any, do you think someone can become infected with HIV/AIDS?



The majority of respondents have the correct knowledge about as indicated in the following percentages:

- 89.9 percent know that HIV is not transmitted by sharing a toilet with an infected person
- 87.8 percent know that HIV is not transmitted by touching an infected person
- 98.3 percent know that HIV can be transmitted by sharing contaminated syringes and hypodermic needles
- 98.4 percent know that HIV can be transmitted by having sexual intercourse with an infected person without using a condom
- 94.8 percent know that HIV can be transmitted from a mother to her baby
- 74.5 percent know that HIV is not transmitted by sharing personal items with an infected person, e.g. drinking from the same glass, using the same towels and cloths

It is notable that most of the respondents over 70 years old do not have adequate knowledge about AIDS and condom use.

Part III: Scope of Study and Methodology

This opinion poll was developed to study the perceptions and attitudes of Thai people towards HIV/AIDS. The survey targeted urban and rural residents of five provinces: Bangkok, Chiang Mai, Khonkaen, Chanthaburi, and Songkhla. In each province there were 750 urban and 750 rural samples, totalling 1,500 samples per province. The total number of samples for all provinces combined was 7,500. Researchers collected samples based on questionnaires and face-to-face interviews, distributed by province and district as follows:

Table 1: Sample groups by province and district

Province	Urban		Rural	
	District	Number of Sample	District	Number of Sample
Bangkok	Pathumwan	150	Taling Chan	150
	Pomprap Sattruphai	150	Thawi-Wattana	150
	Bang Rak	150	Klongsamwa	150
	Huai Khwang	150	Nong Chok	150
	Sathon	150	Nong Khaem	150
	Total	750		750
Chiang Mai	City	750	San Sai	430
			Mae Rim	320
Total		750		750
Khonkaen	City	750	Phra Yuen	450
			Baan Fang	300
Total		750		750
Chanthaburi	City	750	Tha Mai	490
			Makham	260
Total		750		750
Songkhla	City	235	Ranode	325
	Hatyai	515	Sadao	425
Total		750		750
Grand Total		3,750		3,750

Total number of samples, urban and rural: 7,500

Note: The number of samples are selected by multi-stage sampling proportionate to size (PPS) except for Bangkok.

Research Instruments

Working in close collaboration, UNDP and the Research Institute of Bangkok University developed a questionnaire and set of interview questions that provided the basis for survey data collection. Prior to the actual surveying, a pre-test interview was administered to 50 people in Bangkok in order to ascertain any weaknesses in the questionnaires, and modifications were made accordingly.

Data Collection

Data collection was classified into areas of study as follows:

1. Bangkok province

Two-stage cluster sampling was used to collect data in Bangkok.

Stage 1: Sampling the population in the urban area – five districts in the inner and middle urban areas combined, and five districts in the outer urban areas.

Stage 2: Sampling the population in the above ten districts (two sub-districts per district).

2. Other provinces

Two-stage cluster sampling was implemented to gather data in Chiang Mai, Khonkaen, Chanthaburi and Songkhla as follows.

Stage 1: Sampling the population in each provincial city that represents the urban area. Sampling the population in another two districts of each province (except Songkhla).

Stage 2: Sampling the population in the above districts (in two sub-districts per district).

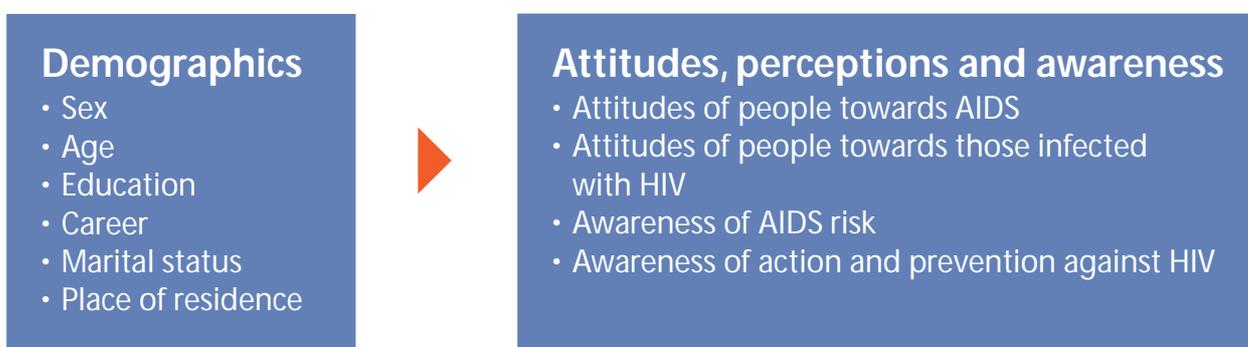
Data Analysis

The descriptive statistical analysis of the data includes percentage, means and standard deviation. The analysis of the correlation between demographics and attitudes, perceptions and awareness was scrutinized by the use of cross-tabulation analysis.

Conceptual Framework

The survey was conducted within the conceptual framework shown below.

Fig. 1: Conceptual framework of the study



Survey respondents were 45.5 percent male and 54.5 female, with an average age of 33.8 years old. The respondents were 50.8 percent single, 44.0 percent married, and 5.2 percent widowed, divorced or separated. In terms of education, the largest proportion of respondents, 31.9 percent, had a secondary school (but not college) education. Working respondents represented 68.2 percent, and those studying represented 31.8 percent.

Figure 1: Respondents classified by sex

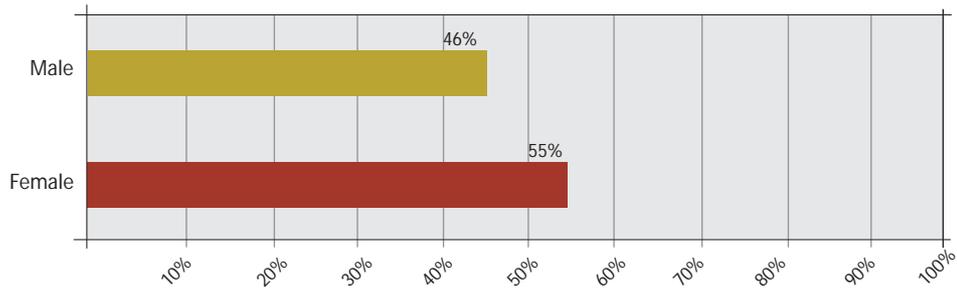


Figure 2: Respondents classified by education

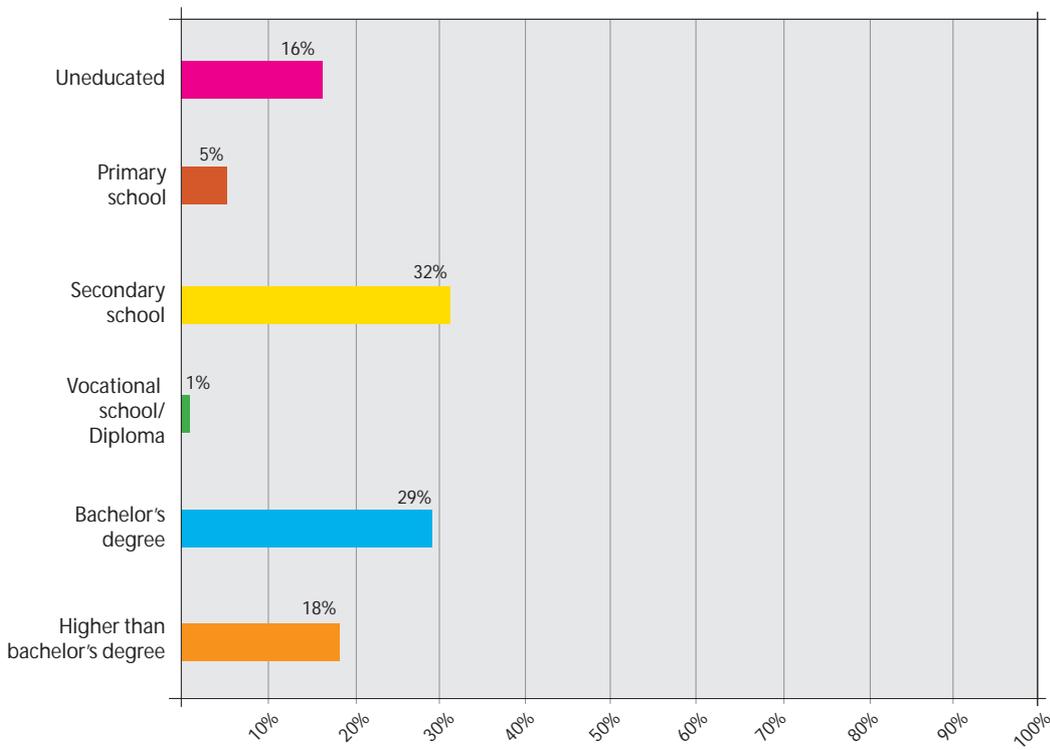


Figure 3: Respondents classified by occupation

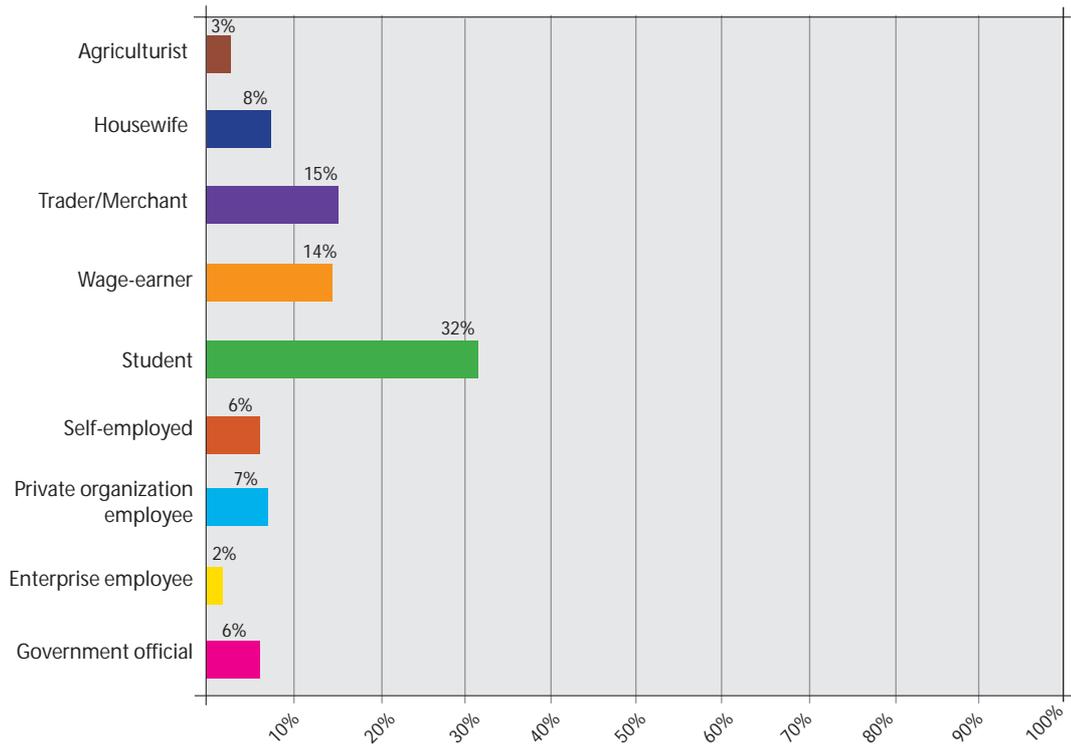
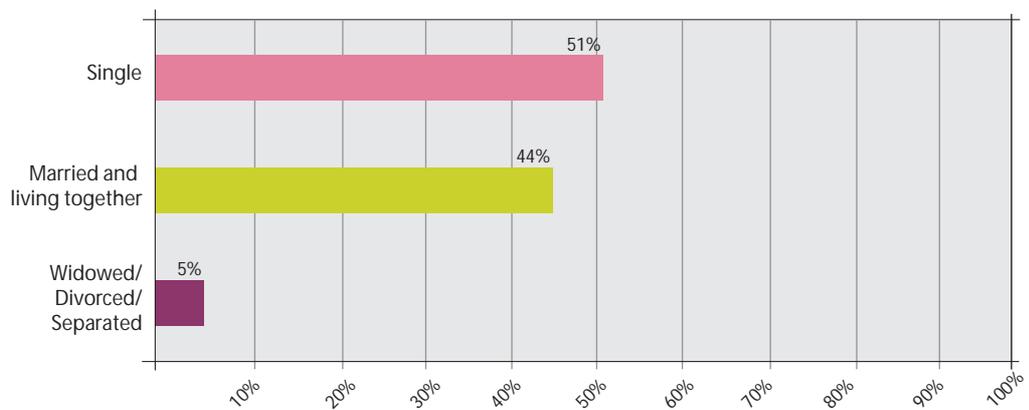


Figure 4: Respondents classified by marital status



Part IV: Appendices

Questionnaire Opinion Poll on Attitudes of Thai People toward AIDS

Province _____ District _____

1. How old are you? _____ years old

2. Sex

1. Male
2. Female

3. Education

1. Uneducated
2. Primary school
3. Secondary school
4. Vocational school/Diploma
5. Bachelor's degree
6. Higher than bachelor's degree

4. Occupation

1. Government official
2. Enterprise employee
3. Private organization employee
4. Self-employed
5. Student/University Student
6. Wage-earner
7. Trader/Merchant
8. Housewife
9. Agriculturist
10. Other (specify).....

5. Marital status

1. Single
2. Married
3. Widowed/Divorced
4. Other (specify).....

6. In which of the following ways, if any, do you think someone can become infected with HIV/AIDS?

Aspect	Infected	Not infected
1. By sharing a toilet with a person infected with HIV/AIDS		
2. By touching an infected person		
3. By sharing a hypodermic needle with a person infected with HIV/AIDS		
4. By having sexual intercourse with an infected person without using a condom		
5. From an infected mother to her baby		
6. By sharing personal items with an infected person, for example a drinking cup, towel or clothing		

7. Do you think you are at risk of getting HIV infection?

1. No
2. Yes
3. Not sure

8. Do you think AIDS is still a problem in Thailand?

1. Yes
2. No

9. Do you think enough is being done to inform young people about the risks of HIV/AIDS in Thailand?

1. Yes
2. No
3. No comment

10. Do you think your family would accept you if you are HIV-infected?

1. Yes, they will accept me.
2. No, they won't.
3. Not sure

11. If you know that a food seller has the AIDS virus, would you buy food from them?

1. No, I'd rather not.
2. Yes, I would buy it from that shop.
3. Not sure

12. If you know a *shopkeeper* has the AIDS virus, would you buy any product from them?

1. No, I'd rather not.
2. Yes, I would buy it from that store.
3. Not sure

13. If a teacher has the AIDS virus but still without any clear symptoms, should he or she be allowed to continue teaching in school?

1. No, he or she should not continue teaching.
2. Yes, it is okay to continue teaching.
3. Not sure

14. At what level of schooling should AIDS education begin?

1. Primary school
2. Lower secondary school
3. Upper secondary school

15. Do you think condom vending machines should be available in universities and colleges?

1. Yes
2. No
3. I don't know / No comment

16. Do you think that Thai Government is doing enough to deal with HIV/AIDS?

1. Yes
2. No.
3. I don't know / No comment

– Thank you for your cooperation. —

In-depth Interview

Opinion Poll on Attitudes of Thai People toward AIDS

Province _____ District _____

1. How old are you? _____ years old

2. Sex

1) Male 2) Female

3. Education _____

4. Occupation _____

5. Marital Status _____

6. Do you think you are at risk of HIV infection?

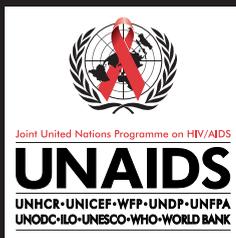
7. Do you think your family would accept you if you are HIV-infected?

8. At what level of school should AIDS education begin?

9. Would you buy a product from a shopkeeper if you know that he/she has AIDS?

– Thank you for your cooperation. –

UNDP is the UN's global development network, advocating for change and connecting countries to knowledge, experience and resources to help people build a better life. We are on the ground in 166 countries, working with them on their own solutions to global and national development challenges. As they develop local capacity, they draw on the people of UNDP and our wide range of partners.



UNDP is a co-sponsor of UNAIDS, an innovative joint venture that brings together the efforts, expertise and resources of ten UN organizations for worldwide action against HIV/AIDS.

United Nations Development Programme

Rajdamnern Nok Avenue

Bangkok 10200 Thailand

Tel: (66-2) 288 2130

Fax: (66-2) 280 0556

E-mail: registry.th@undp.org

Web site: www.undp.or.th