The private demand for an AIDS vaccine in Thailand

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Abstract

A contingent valuation survey of Thai adults revealed that private demand for a hypothetical AIDS vaccine that is safe, has no side effects, and lasts 10 years, rises with income, the lifetime risk of HIV infection and vaccine efficacy, and declines with vaccine price and respondent’s age. Demand for both high (95%) and low (50%) efficacy AIDS vaccines is substantial. Nearly 80% of adults would agree to be vaccinated with a free vaccine. Government will have an important role to ensure that those at highest risk of HIV infection with low incomes have access to the vaccine and to reinforce other safe preventive behavior to prevent reductions in condom use.

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1. Introduction

As of the end of 2003, about 40 million people worldwide were estimated to be living with AIDS, almost all of them prime-aged adults and 95% of them living in developing countries [1]. Roughly 3 million people died from AIDS in 2003. Prevention programs have been launched in virtually every country—to provide information, raise condom use, reduce numbers of sexual partners, promote safe sex and injecting practices, and to reduce mother-to-child transmission. Nevertheless, more than 15,000 people become newly infected with HIV every day. Despite the best efforts of scientists, there is still no cure for AIDS. The advent of highly active antiretroviral therapy (HAART) has reduced the mortality rate among patients in high-income countries, although it remains costly, suffers from significant implementation problems (side effects, difficult compliance, and viral resistance) and cannot eradicate the virus from the body. A safe, effective and affordable AIDS vaccine would be a valuable addition to the existing arsenal of prevention strategies.

Thailand has one of the most severe AIDS epidemics in Asia and would benefit significantly from a preventive AIDS vaccine. The engine of the Thai epidemic has been heterosexual spread, primarily through commercial sex workers (CSW), their clients, and subsequently the clients’ partners and children. In the