The objectives of this study are to determine the following: the attitude of those involved in each community (stakeholders such as villagers, community leaders, health volunteers, etc.) before and after the PRA technique is applied; and to study the efficiency of the care system in each community.

Two villages were selected for this project: Bann Nong-Wa and Bann Kao-Lom in Toung Yao sub-district, Palean district, Trang Province. Forty subjects (20 subjects per village) were selected as representatives of stakeholders for focus group discussions. The study duration time was from February 2004 to November 2004. Data was collected by interview and focus group discussion. The two villages were analyzed using the SWOT technique. Three hundred and eighty-four villagers were interviewed to evaluate their attitude to AIDS/HIV. All 40-stakeholder representatives attended the focus group discussion for the requested 4 times. The results were as follows: the attitude of villagers before the PRA technique was applied was negative especially for those living with AIDS/HIV patients. After PRA was applied, the villagers’ attitude was significantly more positive. The villagers were more accepting of the established care system for AIDS/HIV patients in their village, and also tried to set up a charity for the patients. After PRA intervention, the stakeholders, who represented each village, were much better able to analyze the risk factors of AIDS/HIV problems in their community, such as Karaoke, coffee vendors, etc. They were much more open to the idea that AIDS/HIV had become a more serious problem than it had been 2 years before. They also agreed that everyone in the community should be concerned about the problem and cooperate together. AIDS/HIV patients in the villages should be accepted as equal members of the community and assisted by villagers for their everyday needs. The stakeholders planned both short term and long term policies and these were accepted as legitimate village policies, which subsequently became a public policy in the Palean District. The hope is that if they do as planned, it will make their communities stronger; and by accepting the problem, bind the community together. This will result in the acceptance of the AIDS/HIV patients in each village where they will be able to live with dignity. Consequently, they will become more productive members of their community and have better access to antiviral drugs. In conclusion, the PRA technique is a necessary first step when doing PAR (Participation Action Research). The PRA process can stimulate and encourage subjects to discuss their ideas and attempt to find solutions. The important step after applying the PRA technique is to set relevant health policies in the villages, and develop intervention projects and action-based research. As a next step, researchers will have to find the means to stimulate the action plan in each respective village.