

CAMBODIAN PRIME MINISTER ENDORSES RECOMMENDATIONS OF COMMISSION ON AIDS IN ASIA REPORT

Cambodian Prime Minister Hun Sen endorsed the recommendations of a new report entitled "Redefining AIDS in Asia - Crafting an effective response" at the Cambodian Handover of the Report on 15 May 2008.

The report was prepared by the independent Commission on AIDS in Asia, consisting of nine experts across Asia, and led by Chairman of the Economic Advisory Council to the Prime Minister of India Dr. Chakravarthi Rangarajan.

Endorsing the recommendations of the Report, Prime Minister Hun Sen highlighted effective leadership at all levels as a hallmark of Cambodia's successful AIDS response, and noted mass media and faith-based organisations continued to play a vital role in building community understanding and awareness about AIDS.

"Stigma and discrimination of people living with HIV is unacceptable in Cambodian society," Prime Minister Hun Sen said. "We need to increase

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ENTERTAINMENT WORKERS AND AIDS ACTIVISTS EXPRESS CONCERNS ON THE COUNTRY'S NEW LAW



A group of entertainment workers/sex workers gather in Phnom Penh on 4 June to urge the government and lawmakers to revise a new law on "Suppression of Human Trafficking and Sexual Exploitation".

As a result of this law sex workers are being arrested, detained, fined and jobless.

n 15 February, 2008, Cambodia launched a new law on its human trafficking and sexual exploitation. The law aims at punishing all crimes against human trafficking and sexual exploitation in order to protect human rights and dignity; to improve the country's proper customs and cultural value; and to implement the UN protocol on the issue. Article 23 of the law states that: "Prostitution" in this law shall mean having sexual intercourse with an unspecified person or other sexual conduct of all kinds in exchange for any value".

However, entertainment workers (EW)/sex workers (SW) and AIDS activists have expressed their concerns on the legislation. "I have never heard of the sexual exploitation law and if it is real I think it is really severe for us. I agree to say that selling sex is affecting the Khmer culture and really bad for the Khmer women's reputation but we have no choice," said a 36-year-old

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RESULT FINDINGS: SEXUAL BEHAVIOR RELATED TO HIV AND STI'S

A iming to provide information on sexual behavior related to HIV and STI's of vulnerable groups, the National Center for HIV/AIDS, Dermatology and STDs (NCHADS) has recently released its results from a survey conducted in 2007. The survey was carried out with 3,070 respondents -- 592 Direct Female Sex Workers (DFSWs); 1,093 Indirect Sex Workers [395 Beer Promoters (BPs), 399 Karaoke Workers (KWs), and 299 Beer Garden Workers (BGWs)]; 729 Men who have Sex with Men (MSM: 388 short hair and 341 long hair); and 656 Moto-Taxi Drivers. The study was carried out in five cities and provinces: Phnom Penh, Sihanouk Ville, Kampong Cham, Siem Reap and Battambang.

According to the results presented on 28 April, 2008 by Dr. Chhea Chhorvann, NCHADS Head of Surveillance Unit, said 18% of DFSWs had unprotected sex with sweethearts in the past six months while 20% among BGWs, 20% for BPs, and 24% for KWs. He said 7% of DFSWs had unprotected sex with their clients, 2% among BGWs, 5% for BPs, and 5% for KWs. Based on the results, he said, 53.4% of DFSWs had symptom of STI in the past year while BGWs had 24.1%, BPs (38.5%), and KWs (35.3%). Dr. Chhorvann said 47.3% of DFSWs had

vaginal discharge while 23.4 among BGWs, 35.4% for BPs, and 34.3% for KWs.

The results indicated that up to 74.2% of DFSWs had HIV test in the past year while 41.1% for BGWs, 67.1% for BPs, and 50.4% for KWs. Further 99% of DFSWs, 88% of beer garden workers, 96% beer promoters, and 95% of karaoke workers reported o have used condoms the last time they engaged commercial sex, the survey found.

Regarding to drug use, the survey found that Yama was the top use among DFSWs -- yama (18.6%), heroin (0.7%), opium (0.7%), and marijuana (2.5%) -- while 2.3% of KWs used yama and 0.5% used heroin.

The survey also found that a high proportion of moto-taxi drivers reported having multiple sexual partners in the past year but their HIV testing was remained low and most of the tests were not performed at VCCT. Among 656 moto-taxi drivers, only 20% of them had HIV test in the past year and 2.6% had reported having symptom of STI in the past year. The results indicated that only 1.8% of them used yama while 0.5% used marijuana and that 4% had unprotected sex with sweetheart and 4% with female sex workers.

Based on the survey, a significant percentage of MSM engage in risky sex behaviors. It says among 729 MSM: 388 short hair, and 341 long hair/transgender, up to 49% of long hair MSM and 38% of short hair MSM had unprotected sex in the past year. The results revealed that 52% of short hair MSM and 44% of long hair MSM had never had an STI check-up, furthermore 17% of short hair MSM and 20% of long hair MSM reported to have an STI symptom.

According to the results, mass media approaches are the most effective means to increase HIV and AIDS, and reportedly it is the main method used to outreach out to both direct and indirect sex workers. Reading materials is the second most effective and programme activities notably came in third.

The results provided several recommendations that more intervention programmes, targeting lubricant use, and STI checkup should be developed for MSM, especially for the short hair MSM, as this group has been identified as a bridging group. It also suggested that there is a need for an increase in innovative approaches to address the sexual risks involved with non-paying partners like sweethearts, in all groups. The results also suggest that STI services should be extended to MSM and IDFSWs. VCCT services should be promoted to outreach effectively, especially to the male clients of female sex workers.

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direct EW in a brothel in Sihanouk Ville, the international seaport and resort. Srey Rath, a widow with four children, who has been a sex worker for about 10 years and spoke about how she and her friends do not want to make their living from selling sex but they are poor and illiterate. Rath was trafficked to Thailand to be a sex worker in late 1990's. She used to use drugs as well. "We are women. We do not want to be sex workers but the poverty and the social situation has driven us to this. The leaders should understand about our situation"

Poverty and the lack of skills seem to be significant factors hindering the social progression for the Cambodian women who contributed to the discussion. Most of them depend financially on their husbands, some of the women expressed that their husbands had died and that this placed a significant strain on their life particularly if they had children, "I really do not want to go out and sleep with men but since my husband died I have no support. I have no skill to find a job," said a 27-year-old widow of three kids working as a waitress in a restaurant in Sihanouk Ville. "Going out with men at night I get about US\$30 and

sometimes up to \$100," she said. "If the sexual law becomes into affect and the enforcement is strict, I think it is really bad for us. We do not know how to survive."

According to the National Center for HIV/AIDS, Dermatology and STDs (NCHADS), it is estimated that there are 3,430 direct EWs and 13,723 indirect EWs in Cambodia. KHANA, through its implementing partners nationwide, reached 1,568 direct EWs and 4,715 indirect EWs, providing them knowledge of HIV and STD preventions last year.

Anter Nita, Director of the Sihanouk-based Community United for Development (CUD), said if the law enforcement is so strong, EW, especially the brothel-based EW will go into hiding. CUD and other organizations working on HIV and AIDS and Sexually Transmitted Diseases (STDs) will then need to reassess the current prevention methods to reach this population, to continue to provide them with health education. "My organization helps regularly educate about 345 sex workers on how to prevent themselves from HIV and AIDS and STDs transmission, how to lobby

their clients who use violence in order to have sex without using condoms, and how to find good services for their health care," Nita said. "Our programme for 100%-condom use and HIV prevention education programmes among sex workers will be affected if sex workers are in hiding."

According to reports from local non-governmental organisations, the local police in a few provinces have instructed owners of karaoke parlors, night clubs, and bars that they will be finned if premises contain condoms. The reports showed that since the inception of the law some brothels have closed and people are now afraid of talking openly about or displaying condoms.

"I would like to appeal to the law makers that they should revise sections whereby sex workers are punished otherwise we have no way to make our living. We of course do not want to be sex workers, but we have no other job to do. On the other hand, the brothel-based sex workers will become freelance sex workers who have no specific place to stay and they can not receive any education on HIV and AIDS," Srey Rath.

WFP FOOD SUPPORT TO HIV PROGRAMME SECURED FOR 2008

Due to the unprecedented global soaring of food and fuel costs earlier in the year, the United Nations World Food Programme (WFP) announced in March to its counterparts that it may not be able to continue providing food assistance to HIV/AIDS and TB programme after June this year.

In April however, WFP confirmed that monthly food rations to PLHIV (People living with HIV/AIDS) and OVC (orphans and vulnerable children) households, in addition to the food support to TB patients, pregnant and lactating women and their infants under the Mother Child Health programme will continue without interruption throughout 2008.

By the end of 2008, WFP expects to distribute over 5,200 metric tons of food to 70,000 PLHIV and OVC beneficiaries alone. The recent Royal Government of Cambodia's historical

contribution of 3,000 metric tons of rice to WFP, together with other donations will be used to target the most in need.

The announcement by WFP to continue its assistance to HIV and other vulnerable food insecure population is much welcomed in these challenging times when the combination of higher food and fuel prices is increasing the incidence and severity of food insecurity and vulnerability among the poor.

Worldwide, the increased cost of food and fuel have substantially reduced the purchasing power of the poor which leads to negative coping strategies such as compromising the frequency and quality of meals. As such, the vulnerable groups most affected by the decreased quality of the diet are those with the highest requirements: young children, pregnant and lactating women, and chronically ill.

Globally, the HIV/AIDS epidemic continues to have a devastating impact on health, nutrition, food insecurity and overall socioeconomic development in the poor households. HIV progressively weakens the immune system and leads to malnutrition. Malnutrition worsens the effects of HIV and contributes to more rapid progression to AIDS. Therefore, food is often identified as the most immediate and critical need by people living with HIV and TB. It plays a critical role in comprehensive care, support and treatment of HIV infected people.

Since 2003, WFP food assistance to PLHIV and OVC households as part of home-based care (HBC) has helped families stabilize food access, improve health and reduce negative coping strategies such as taking children out of school. HBC teams have also reported decreased social stigma to PLHIV households and lower rates of secondary infections among WFP beneficiaries. (Article of WFP)

Continued from p. 1: CAMBODIAN PRIME MINISTER ENDORSES RECOMMENDATIONS OF COMMISSION...



Dr. Chakravarthi Rangarajan, Chairman of the Economic Advisory Council to the Prime Minister of India, gives his welcoming remark on the launching reflecting AIDS in Asia in Phnom Penh on 15 May, 2008.

our efforts to support people living with HIV, including finding solutions for cheaper treatment and focus special attention on addressing the needs of orphans and children made vulnerable by AIDS."

Prime Minister Hun Sen acknowledged the important task of engaging all sectors of society, particularly youth volunteers, in the AIDS response. The Prime Minister concluded by reiterating Cambodia's commitment to the 100% condom policy.

Commission on AIDS in Asia Chair Dr. Rangarajan congratulated Prime Minister Hun Sen on Cambodia's strong national leadership in the successful response to AIDS in Cambodia.

"Cambodia has done well. It has been an example for other developing countries in the

world as it has reversed the epidemic in a very short time. The success of Cambodia is also remarkable as it has been able to achieve high coverage of anti-retroviral treatment in spite of its low income and post conflict destruction of health care systems. We have highlighted in our report the lessons to be learnt from Cambodia. The Cambodian experience really demonstrates the importance of political commitment and

the willingness of the leadership to address difficult issues like decriminalization of sex work and introduction of harm reduction programme like the supply of needles and syringes. We look forward to your continuing leadership and do hope that you will be able to address the other issues such as sustainability of funding and legal measures related to sex work."

Cambodia's success is evidenced by declining adult prevalence rates; down from 2 per cent in 1998 to 0.9 per cent in 2006. The country has exceeded its Millennium Development Goal for AIDS and has set ambitious Universal Access targets for prevention, treatment and impact mitigation by 2010.

Cambodia's successes informed the recommendations of the Report, particularly the national scale up of treatment and effective prevention programs which target high risk behaviours such as the 100% condom use programme, Dr. Rangarajan said.

Dr. Rangarajan said while Cambodia has had enormous success in providing nation-wide access to treatment (over 90% of all in need are on anti-retroviral therapy) scaling up low-cost high-impact programmes for prevention, targeting high risk behaviour for HIV transmission, was now critical. He stressed the need to do more for impact mitigation - under addressed in the region - and acknowledged Cambodia was taking steps to scale up its efforts, particularly regarding orphans and vulnerable children.

Highlighting the need for cost-effectiveness in AIDS spending in Asia, Dr. Rangarajan pointed to a key conclusion of the Commission Report - that a focused response would cost no more than US\$0.50 to US\$1.00 per capita, and prevent 5 million new infections, avert 2 million deaths and provide impact mitigation support to 80 per cent of affected women and children in Asia.

The Commission's Report was presented to the United Nations Secretary-General Ban Ki-moon on 26 March 2008. The Secretary General commended the Commission on this unique achievement, and appealed to Governments and civil societies of Asian countries to adopt the Report and implement its recommendations seriously. (Article of UNAIDS)

SHARING DIFFERENT FORMS OF HIV/AIDS IEC MATERIALS WITHIN THE REGION



Facilitators present a T-shirt with picture and massage on HIV and AIDS co-funded by KHANA as an IEC example to the participants at the workshop in Bangkok.

eople Living with HIV (PLHIV), HIV/AIDS workers and media people have recently met in Bangkok, Thailand, to share experiences, lessons learned, and best practice methods when utilizing Information, Education, and Communication (IEC) materials, in the context of strengthening HIV and AIDS approaches, towards gaining Universal Access in the region. The meeting entitled "Working Together: IEC Workshop" was hosted by AIDS ACCESS Foundation on 21-23 May. Some 30 people from seven countries -- Cambodia, China, Laos, Myanmar, Nepal, Thailand, and Vietnam -attended the workshop. Among the attendees there was one KHANA representative, and two representatives from KHANA's implementing partners, SEADO and CPN+. Workshop facilitator Waranuch Chinvarasopak emphasized that the gathering in Bangkok would allow for an IEC network to be established and a framework provided to encourage each country to establish

a national network. "During the three day workshop, we will be sharing our goals and visions on HIV and AIDS regarding to the prevention of new infections, promoting quality of life of PLHIV by reducing stigma and discrimination, and increasing access to quality care and treatment," Chinvarasopak said. IEC is extremely important for initiating and supporting social and behavioral changes. IEC materials can increase HIV/AIDS awareness, knowledge and education, motivate change, and to sustain behavior changes, she added.

Before displaying the country specific HIV/AIDS IEC materials at the workshop, the participants brainstormed their ideas and reached an understanding of the commonalities shared between each country, when responding to HIV and AIDS, such as; acceptance, understanding, participation, support, living and working together, love, care,

prevention, providing information, decreasing the infection and misinformation, empowerment, freedom, rights, accessing to treatment for all, and harmony.

The participants uncovered areas which require further attention, when designing, developing and delivering IEC materials. It was also discussed which areas should be up-scaled, due to the effectiveness of such materials and what materials/methods should be discontinued. A strong focus was taken on the IEC development process, particularly; "Who is the target audience who do the IEC materials target?", "What is the rational behind it and why are such IEC materials needed?", "What is the key message/s and what is the desirable outcome of the IEC materials (change/action)?", and "What approach or tone will be used to deliver the IEC material?". As well as this, the unexpected impacts or negative results of IEC materials on cultural norms of each country, was also discussed. The importance of media was highlighted, as media can potentially play a key role when outreaching to the public. The meeting urged media outlets and practitioners to report news stories on HIV and AIDS and other related issues without sensationalism to avoid negative consequences.

The workshop also discussed gender and HIV and AIDS and ended with some recommendations and suggestions on how to establish both a national and regional network for IEC network and how to effectively design and develop of IEC materials and BCC programmes. Story and picture by Chhay Sophal

KHANA'S STAFF CORNER

KHANA wishes all the best to two people who left KHANA in May.



Bonnie Keith

left KHANA on 26 May after being KHANA's Technical Support Officer for M&E and Documentation since November 2007. She is heading back to the United Sates.

Buth Rithy

a Corporate Finance Officer, left KHANA on 1 May after one year. Good luck.



Also congratulating to one of KHANA's staff members, Mr. Meas Kimsan, who is getting married on 1 June.



We also Happy Birthday to KHANA's family members



Andrew Vickery

British Technical Support Officer to Finance, celebrated his **birthday** on 30 May. He turns to 40 years.

Miss Emma Gater,

Australian volunteer to Policy, Advocacy and Resource Mobilization, celebrated her birthday on 29 May. She turned 25 years.



KHANA's Purple Brief is a monthly news bulletin covering real life stories of Cambodians living with, and affected by HIV and AIDS. The publication also raises significant awareness of the impacts of HIV and AIDS on the broader national and international communities.

The KHANA Communication Committee (KCC) is responsible for the development and publication of the monthly bulletin and the content does not reflect the views and opinions of the donors.

