

KHANA STRATEGIC PLAN 2016-2020



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Stop TB Partnership
CHALLENGE FACILITY
FOR CIVIL SOCIETY

Contents

Abbreviations	3
Message from the Chair of the Board of Directors	4
Message from the Executive Director	5
About KHANA	6
The KSP20: Moving Forward	8
Vision, Mission, and Core Values	9
Vision	9
Mission	9
Core Values	9
Goals	10
Goal 1: Objectives, Strategies, and Indicators	10
Goal 2: Objectives, Strategies, and Indicators	12
Goal 3: Objectives, Strategies, and Indicators	14
Goal 4: Objectives, Strategies, and Indicators	16
KHANA's Ongoing Commitment	18
Documents Reviewed	19

Abbreviations

ACM	Active Case Management	MSM	Men Who Have Sex with Men
ART	Antiretroviral Treatment	MTCT	Mother to Child Transmission
B-IACM	Boosted Integrated Active Case Management	NAA	National AIDS Authority
CBPCS	Community-Based Prevention, Care and Support	NCHADS	National Centre for HIV/AIDS, Dermatology and STD
CDRR	Community Disaster Risk Reduction	OD	Operational District
CMC	Case Manager Coordinator	PLHIV	People Living With HIV
CoE	Centre of Excellence	PMTCT	Prevention of Mother-to-Child Transmission
CoPCT	Continuum of Prevention to Care and Treatment	PWID	People Who Inject Drugs
CSO	Community Support Officer	PWUD	People Who Use Drugs
CSV	Community Support Volunteer	SAHACOM	Sustainable Action against HIV and AIDS in Communities
EW	Entertainment Worker	SDG	Sustainable Development Goals
FP	Family Planning	SHG	Self-Help Group
GBV	Gender Based Violence	SOGI	Sexual Orientation and Gender Identity
HEF	Health Equity Fund	SOP	Standard Operating Procedures
HTC	HIV Testing and Counseling	SRH	Sexual and Reproductive Health
IACM	Integrated Active Case Management	SRHR	Sexual and Reproductive Health and Rights
ICT	Information and Communications Technologies	STI	Sexually Transmitted Infection
IP	Implementing Partner	TA	Technical Assistance
KLLC	KHANA Livelihood Learning Center	TasP	Treatment as Prevention
KP	Key Populations	TB	Tuberculosis
KSP15	KHANA Strategic Plan 2011-2015	TG	Transgender Person/People
KSP15 Boosted	KHANA Strategic Plan 2013-2015	TS Hub	Technical Support Hub
KTH	KHANA Technical Hub	USAID	United States Agency for International Development
LGBTI	Lesbian, Gay, Bisexual, Transgender & Intersex	UHC	Universal Health Coverage
MCH	Maternal and Child Health	VSL	Village Savings and Loans
MoH	Ministry of Health	VCCT	Voluntary Confidential Counseling and Testing
M&E	Monitoring and Evaluation		

Message From The Chair Of The Board Of Directors



After 20 years of achievements, KHANA Strategic Plan 2016-2020, which I am most pleased to introduce, shapes its continued amazing journey of bringing better health, wellbeing, opportunities and a better future for Cambodia's communities.

Beyond still expanding access to HIV and wider health services, building communities' resilience for new challenges related to climate change, promoting their full access to equal socio-economic opportunities and reducing inequalities are at the center of this Strategic Plan. It further builds and paves new avenues to put KHANA experience and expertise into action with innovative people-centered approaches. In a rapidly evolving national context, KHANA's 'lead, contribute and adapt' philosophy allows it to remain a frontrunner organization, providing well organized critical quality services

to save lives, widening space with creative partnerships and developing new opportunities for communities.

As the HIV epidemic declines, thanks to sustained investments and gains and efforts now accelerating toward the elimination of new HIV infection and reducing mortality to leave no one behind, it is indeed timely to expand support to broader vulnerable communities and needs in terms of other health issues, access to economic empowerment, gender equality, rights-based approaches and resilience to cope with climate change. The HIV community foundation, organization and resolve which KHANA has been the center of since 1996 delivered significant results and can serve as a basis for driving progress in those areas.

KHANA sound programs including technical innovations combined with the increasingly promising and

already high quality operational research technical expertise, technical support services and effective partnership model across the country, makes it a unique and highly valuable national NGO for the present and the future. This Strategic Plan also foresees key action and investments for progressively securing KHANA's own sustainability as an effective organization for years to come.

The Board of Directors fully stands behind KHANA's extremely committed and wonderful team and all its implementing partners working in close and effective collaboration with the Government and other civil society organizations. We also sincerely appreciate donors' continued trust in KHANA's demonstrated technical and management excellence to turn resources into improving the lives for poor or vulnerable communities as well as public health, human rights and contribution to Cambodia's development.

Inspired by past results and the many innovative approaches and partnerships, KHANA spearheaded for the HIV response to also pave the way to drive progress in other areas, the potential is enormous but requires focused strategies and intensive efforts. This is what this new Strategic Plan is about - let's turn this bold vision into reality for empowered Cambodian communities with equitable access to quality HIV, health services and development opportunities.



As the funding environment and HIV epidemic continue to evolve, so must the direction and strategies of KHANA to meet the needs of the communities that it serves. A changing landscape poses significant challenges, but also excellent opportunities for enhancing the scope and quality of our programs, building partnerships with non-traditional actors and strengthening the role of communities, with the aim of improving health outcomes and quality of life for community members.

The achievements and lessons learned under KHANA Strategic Plan 2011-2015 must be sustained and absorbed, respectively, as KHANA embarks on its next phase. To achieve its Vision, KHANA needs to address the full spectrum of the social determinants of health beyond HIV and address emerging disease burdens.

KHANA's Strategic Plan: 2016-2020 (KSP20) builds on the accomplishments and challenges under the Boosted KSP15; and the strategies, programmatic priorities and funding environment. The KSP20 is well consulted and aligned to overarching national and global strategic frameworks including the Sustainable Development Goals, the National Strategic Development Plan 2014-2018, the National Strategic Plan for HIV/AIDS IV, Cambodia 3.0 and the International HIV/AIDS Alliance Strategic Plan 2013-2020.

Our new strategy honors the work that has been done and demonstrates KHANA's ongoing commitment to preventing new HIV infections and exploring more innovative and effective approaches to detection, treatment and adherence. This strategy is also unique in that it is



Message from the Executive Director

a transitional document, taking our work into greater consideration of sustainability, and broader social and economic concerns of the communities we serve.

As a guide, this new strategy will support the development of additional documents to sustain our daily work, keep us focused and on track, and above all, enhance our accountability to communities, partners, donors, and other stakeholders. As part of this plan, and as a result of a changing funding environment, we will continue to explore traditional and non-traditional funding opportunities, develop new business models, forge new partnerships, and streamline the work we do in order to be more effective in our response. We will support the KHANA Research Center to continue its growth as a well-recognized, and trusted space for evidence-based research, and the KHANA Technical Hub (KTH) to enhance the provision of technical assistance by utilizing the knowledge and skills of KHANA staff. We will also partner with and support established health facilities to improve access to quality and affordable services.

During the process of planning this strategic plan, we consulted

with our Board; KHANA staff, government officials, implementing partners, donors, and other active stakeholders. The conversations that resulted were engaging and motivating, demonstrating a strong interest from all; and insightful, often introducing fresh thinking to further enhance programming over the next 5 years. These consultations have required critical reflection on our part as we look to integrate new thought and expand opportunities, while remaining focused on the work KHANA has become best known for. We are both proud of and humbled by the commitment of those who have supported KHANA throughout the past 20 years.

We are grateful to have the continued support from the Royal Government of Cambodia, our donors, implementing partners, NGO partners, and community stakeholders. The KHANA team is committed to bringing this strategy to life and staying true to our vision, mission, and values. We are motivated, yet realistic about what lies ahead; confident in the ability of our partners, yet aware of the need to maintain high quality work. We feel privileged to be part of a plan for healthier, stronger, and more sustainable communities throughout Cambodia.

About KHANA

In the 1990s, Cambodia was a post-conflict country in which infrastructure and people were still recovering from genocide, mass emigration and political instability. It was into this environment that the UK-based International HIV/AIDS Alliance (the Alliance) came to Cambodia with the intention of developing a comprehensive community-based response to HIV.

A pilot project, Khmer HIV/AIDS NGO Alliance (KHANA) was set up in 1996, to operate out of the office of Pact Cambodia, with technical assistance from the Alliance. At first, the project had four local staff with management and financial support from Pact. The pilot project was able to start very quickly and train and support eight local NGOs to carry out community HIV prevention and care projects.

From the beginning, KHANA's mandate was to work in a supporting role through a strong network of community-based implementing partners (IP) connected to the communities they served. KHANA also began working more closely with the government through the home-based care program. KHANA continued to work alongside government bodies, creating a bridge with civil society, advocating on rights-based issues, adding input on strategy



development, linking to national plans and priorities, and supporting ongoing policy dialogue. The organization found success through its ability to adapt, innovate, commit, and build strong partnerships. This was further enhanced by continuous structural and program development, support of IP and community networks, and through built trust and professionalism. As such, it became the largest national NGO working in the HIV sector in Cambodia.

As the HIV epidemic changed, so too did KHANA's response: prevention and care, network development, treatment, focused prevention, support of key populations (KP), integrated programming, harm reduction, livelihoods, research, and a move towards wider health and development needs. KHANA's Strategic Plans (KSP15-2011-2015, Boosted KSP15 2013-2015) reflected this change within four Goal areas:

- ① **Improving integrated HIV programming;**
- ② **Improving community health outcomes in relation to sexual and reproductive health, maternal and child health, and tuberculosis;**
- ③ **Supporting secure livelihoods;**
- ④ **Strengthening management capacity and technical excellence in community HIV, health and development responses.**

Within Goals 1 and 2, there was an increase in the number of KP being supported under KHANA's coverage, the implementation of a number of technical innovations under USAID-Flagship and Global Fund, and a more refined harm reduction policy strategy. Significant achievements were also made for enhancing community prevention, care and support including through Community Support Officers (CSO) and Community Support Volunteers (CSV) working to identify, record, and closely accompany positive pregnant women and sero-discordant couples with positive prevention. KHANA strengthened the referral network linkages with sexual and reproductive health (SRH)/ family planning (FP), sexually transmitted infections (STI), voluntary confidential counseling and testing (VCCT), prevention of mother-to-child transmission (PMTCT), and tuberculosis (TB). KHANA supported the delivery of the Boosted Continuum of Prevention to Care and Treatment (CoPCT) through various technological innovations.

Within Goals 3, Livelihood projects established self-help groups (SHGs) and support groups to empower communities affected by HIV in a more sustainable way. As a way to increase independence within communities, village savings and loans (VSL) groups were established with a large number of women joining as members. KHANA added a scaled up second location for the KHANA Livelihood Learning Center (KLLC) in Kampong Speu province in addition to the first location in Kampong Chhnang. These Centers acted as ongoing Centers of Excellence (CoE) for the provision of practical livelihoods, resource management training, and demonstration gardens for beneficiaries to gain practical skills.

Within Goal 4, training curriculum was developed for HIV testing and counseling (HTC), which included an innovative approach to HTC, that is the community-based rapid testing with finger prick for HIV and syphilis administered by lay counselors, one of the first such models in the Asia Pacific region being increasingly shared and documented. KHANA supported the integrated active case management approach (IACM) which included Operational District (OD) case manager coordinators (CMC) and assistants, along with

active case management (ACM) providers in all Flagship-supported ODs; focusing on newly identified cases particularly among pregnant women, HIV-exposed infants, sero-discordant couples, lost-to-follow-up and poor adherent patients, and TB/ HIV co-infected patients. The Regional Technical Support Hub (TS Hub) and the Research Team put serious efforts into streamlining KHANA's evidence-based programming and to strengthen health information systems and in 2015, The KHANA Research Center was established.

While KHANA accomplished a great deal within the KSP15 by continuing to deliver significant coverage of prevention, care and support services for PLHIV and KP, leading both the development of various innovations and more effective approaches for HIV prevention and community-led initiatives in such areas as HIV testing and livelihoods, the decline of external funding for the national HIV response from 2014 meant that key services had to be prioritized and management costs reduced significantly. As a result, much consideration has been done on how best to move forward, and how to most effectively strategize as KHANA moves into the next 5 years.

The KSP20: Moving Forward

As progress has been made with less new HIV infections and high treatment coverage, KHANA's emphasis will be on ensuring no one is left behind and the gaps in access to services are further reduced. Prevention, detection, treatment and adherence initiatives will become more focused and streamlined, while lessons from HIV and especially community engagement models will be used to inform other areas of health and development.

Information and Communications Technologies (ICT), and social media will play a role in the HIV response, in livelihoods, and in rights based work. As KHANA builds capacity of civil society, it will also need to strengthen the knowledge of staff members in order to be more effective in advocacy, education, and policy dialogue and development.

Programs will extend support beyond people living with HIV (PLHIV) through inclusive processes that explore opportunities for other vulnerable groups. KHANA will also focus on sustainable initiatives that will support independence and empower individuals, communities, and organizations.

Within all of this, KHANA acknowledges that it has been able to thrive to this point thanks to generous external donor support, and its own capacity to apply to and manage large projects for impact. As KHANA moves forward, the organization needs to consider the evolving context of Cambodia's socio-economic



development and progressive move towards a low middle income country, in which official development assistance (ODA) decline will mean less external available funding at least in some areas, including HIV.

While KHANA is well placed and will continue to mobilize resources of external donors, increasingly efforts will be made to build KHANA's sustainability through other income-generating business models, through innovation, and by maintaining a holistic view of the needs and programmatic and other opportunities. KHANA's consideration of broader social and economic determinants, policy and operational research will continue to inform how the organization most effectively responds to needs and contribute to improve the health and well-being of individuals and communities. In following this approach, KHANA will also be in a position to adapt to changing contexts, support and influence national level plans, focus on regional and international priorities, and advance progress towards the Sustainable Development Goals (SDGs).

Vision, Mission, and Core Values

While keeping the organization's core beliefs in mind, KHANA has updated its vision, mission, and values to reflect the organization's contributions over the past 20 years, to acknowledge the current realities taking place within the Cambodian context, and to continue transitioning itself into broader areas of health and development.

Vision

KHANA aspires to a Cambodia that supports community ownership and empowerment, where all people have equitable access to quality HIV and health services, and sustainable development opportunities.

Mission

To continue to be a leader in the HIV response while addressing wider health and development needs.

Core Values

- **Efficiency and Effectiveness:** KHANA strives at all times to offer value for money within a process and results-oriented framework built on professionalism, social responsibility, and sustainability.
- **Learning and Sharing:** KHANA produces and uses evidence-based research, innovates and pilots new ideas, and incorporates knowledge and best practices into all of our work. KHANA's findings and research are utilized and disseminated to build the knowledge of all stakeholders.
- **Good Governance:** KHANA exists for the benefit of the communities it serves, and as such, communicates and operates transparently and with accountability. KHANA helps build the capacity of communities and other organizations to develop these practices as well.
- **Collaboration and Partnership:** KHANA believes that complex issues benefit from the input of multiple stakeholders who hold a range of perspectives. KHANA has benefitted as a result of the relationships formed with communities, organizations, and government bodies.
- **Gender Equity:** KHANA promotes equitable access to services, inclusive input, and leadership at all levels. The KHANA team works to decrease gender disparities in society, and to end violence and power inequalities within relationships.
- **Diversity:** KHANA supports the rights of KP, Lesbian, Gay, Bisexual, Transgender & Intersex (LGBTI), and other vulnerable groups in order to build stronger awareness and respect for diversity. KHANA also influences policies that promote and build inclusivity for all.

Goals

1

Contribute to eliminating new HIV infections, strengthening health systems, and achieving universal health coverage (UHC).

2

Build human resilience through the development of sustainable community and organizational systems.

3

Strengthen organizational and technical capacity of civil society, including KHANA itself.

4

Promote diversity, rights, and gender equity.

Goal 1: Objectives, Strategies, and Indicators

Contribute to eliminating new HIV infections, strengthening health systems, and achieving universal health coverage (UHC).

Objectives and Strategies:

1. Prevent new HIV infections and transmission.

- Intensify the implementation of Treatment as Prevention (TasP) among PLHIV, especially sero-discordant couples and HIV-positive pregnant women.
- Ensure effective mechanisms to virtually eliminate mother to child transmission (MTCT) to reach an AIDS-free generation (such as Option B+).
- Maximize the use of ICT, including the use of social media, for emerging KP at higher risk of HIV.

2. Improve HIV case detection, treatment, and adherence.

- Identify KPs at higher risk of HIV and reach them using innovative approaches.
- Support the expansion of Boosted Integrated Active Case Management (B-IACM).
- Support point-of-care service quality.

3. Increase health service utilization.

- Ensure functioning feedback platforms for users and service providers.
- Create service demand at the community level (through quality assurance and quality improvement).
- Strengthen evidence-based health information to contribute toward more harmonized and aligned systems.

4. Improve equitable access to healthcare.

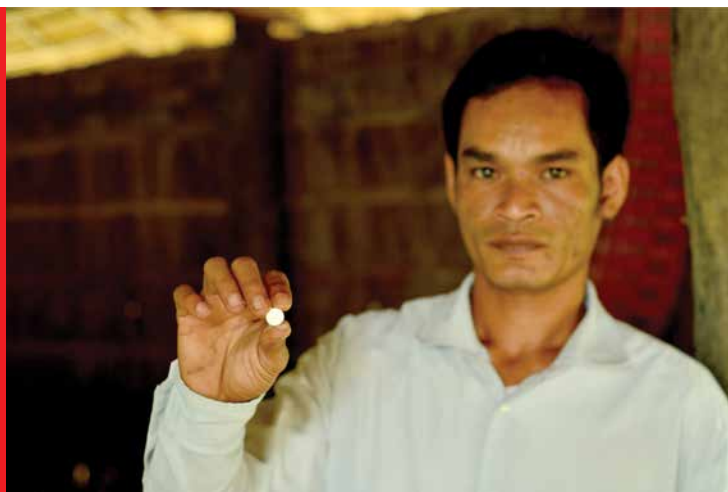
- Promote the understanding of clients' and providers' rights and responsibilities in healthcare and with social protection mechanisms (such as ID Poor and Health Equity Fund (HEF) under the Community-Based Prevention, Care and Support (CBPCS) model).
- Optimize the use of existing community health and non-health structures to increase access to healthcare for all.
- Mobilize and work with key partners and stakeholders in order to scale up affordable healthcare initiatives and social health protection mechanisms.

Areas of Contribution

KHANA will extend previous work and achievements, and as a priority response, will support Cambodia 3.0; the elimination of new HIV infections as well as reduction of HIV related morbidity and mortality in Cambodia by 2025. The team will offer a package of services in alignment with national policies including in particular the B-IACM. Technological Innovations will be utilized¹, along with other innovative approaches, including risk tracing, risk screening, case profiling, snowballing, and others initiated by the USAID-funded HIV Project. These will be further utilized and enhanced to find new cases of HIV, expand outreach for prevention and testing, intensify treatment and care, and retain individuals in order to get to viral suppression. The proven models will be put at scale through the Global Fund.

To contribute to the strengthening of health systems, KHANA will continue to play a supporting role through technical assistance, and will further develop initiatives that enhance quality in an effort to increase both client numbers and levels of satisfaction for those utilizing health services. To complement this work, KHANA will develop programs to promote the understanding of rights and responsibilities for both clients and providers within the healthcare setting, and will map PLHIV with greatest need, stabilized PLHIV, and ID Poor, and further support the identification of poor households eligible to receive financial and social support to better access government health services. With continued funding reductions to HIV programs, KHANA will explore ways to integrate the Health Equity Fund (not currently funded at a level that can provide for the chronic care needs of PLHIV), with the parallel HIV system, into the streamlined CBPCS² model.

1. Present technical innovations include: SMARTgirl, MStyle, and Srey Sros branded programs-interactive tablet-based risk screening tools, mHealth (including My Community, a set of interactive websites and Facebook pages that offers electronically-mapped services locations and downloadable referrals, HIV and related news and information, and individual risk screening), and Voice4U (an interactive voice response system that provides callers with on line counseling, on-demand HIV and health related information and medication and appointment reminders).
2. From 2018, the management and delivery of CBPCS services is expected to be integrated into existing local primary healthcare structures: Health Centers, Health Center Management Committees and Village Health Support Groups. As part of this integration process, KHANA will initiate discussions with the Ministry of Health on the potential and process of integrating CBPCS into local primary healthcare structures.



Selected Indicators:

- % of entertainment workers (EW) reported maintaining correct and consistent condom use with clients in the past 3 months
- % of men who have sex with men (MSM) and transgender (TG) reported maintaining correct and consistent condom use with male partners in the past 3 months
- % of adult PLHIV retained in care and treatment after 12 months on ART
- % of PLHIV on ART with viral load <1000 copies /ml in the last 12 months
- % of eligible beneficiaries in KHANA programs that have received ID poor card

Goal 2: Objectives, Strategies, and Indicators

Build human resilience through the development of sustainable community and organizational systems.

Objectives and Strategies:

1. Increase access to income and other financial resources.
 - a. Provide skills building on home gardening, livestock raising and financial literacy to communities.
 - b. Promote saving behaviors through VSL models.
 - c. Support linkages to credible financial institutions and other alternatives.
 - d. Leverage KHANA's expertise, along with any innovations and program models to support the acquisition of financial resources.
2. Increase employment opportunities for community members.
 - a. Support access to vocational trainings to increase employability.
 - b. Promote job placement linkages with potential employers and agencies.
 - c. Provide career counseling and job search skills.
3. Enhance the ability of affected communities in climate change adaptation and disaster risk reduction.
 - a. Raise awareness on 'climate change impacts and adaptation' and mainstream through KHANA's programs.
 - b. Provide skill building on climate change adaptation, to ensure food security and nutrition.
 - c. Implement Community Disaster Risk Reduction (CDRR)³ program in KHANA's coverage areas at risk of disasters.
 - d. Promote KHANA's linkages and partnerships with existing key partners and stakeholders in disaster risk reduction.

4. Improve access to quality and affordable services through functioning community health facilities supported by KHANA.
 - a. Model, promote, and facilitate quality within community health initiatives (professionalism, ethical conduct, service).
 - b. Support responsible linkages and referrals to other health services.

Areas of Contribution

During the period covered by the KSP15, through funding support from The European Commission, Global Fund, USAID-Flagship, and USAID's Sustainable Action against HIV and AIDS in Communities (SAHACOM) program, KHANA strengthened the communities affected by HIV to take a stronger leadership role in HIV, health, livelihoods and advocacy.

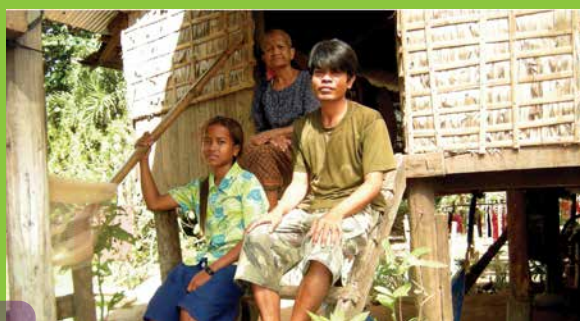
Although by mid- 2015, the final program was coming to a close, KHANA was able to draw-on the successes and lessons learned, look forward into the next five years to build-on livelihood efforts, explore more sustainable approaches, and go beyond PLHIV by including other community members with an identified need for empowerment for better health and livelihood support. The KHANA team remains very committed to developing new participatory approaches that will lead to more financially independent, educated, trained, and empowered individuals and groups. KHANA will add further initiatives that help increase knowledge and capacity of community members in financial literacy, and savings behaviors, while identifying links to trusted financial institutions that can support VSL groups.

KHANA will explore new opportunities by linking individuals to vocational training institutes, and partnering with organizations that offer job placements. The KHANA team remains highly motivated to increase community members' potential to find quality workplaces that both utilize and augment skill sets. To further enhance livelihoods, KHANA will explore avenues that raise community awareness on how best to adapt to a changing climate and environment, and facilitate CDRR sessions, through already established trainings, to help communities develop plans according to their own unique contexts.

3. The CDRR program supports community resilience in the face of natural disasters by undertaking demonstration projects that help determine which prevention or mitigation measures are most effective. The project also addresses the knowledge gap in the region about effective measures by putting together a mechanism for better tracking disaster risk management lessons learned, and measuring results. (<http://www.acdi-cida.gc.ca/cidaweb/cpo.nsf/vWebCCEn/36ECFB2CE06D7B8585257C8C003D0F63>)

As the current funding cycles of USAID-Flagship and Global Fund come to an end by late 2017 with risk for the sustainability of some critical community health initiatives and services, KHANA will explore how best to ensure an ongoing model of community-led services and selected facilities (e.g., Chhouk Sar and M.E.C. clinics); through leadership in the areas of

organizational and business development, fundraising, resource management and governance. KHANA will also leverage its own expertise, and its ability to pilot, design, implement, and replicate innovations in order to explore other funding resources beyond traditional donor streams; thus supporting and modeling sustainable community-led services, thinking and behaviors.



Selected Indicators:

- % of selected communities that perceive more economic self-reliance.
- % of selected communities that perceive an increase in their ability to adapt to changing environmental conditions, including disasters.
- % of selected communities with increased quality of healthcare services.

Goal 3: Objectives, Strategies, and Indicators

Strengthen organizational and technical capacity of civil society, including KHANA itself.

Objectives and Strategies:

1. Strengthen the capacity of communities, partners, and other stakeholders⁴.
 - a. Provide technical trainings and support.
 - b. Promote learning and sharing with communities, partners and stakeholders.
 - c. Functionalize the KHANA Technical Hub's (KTH) systems, structures, and services.
 - d. Leverage KHANA's technical expertise and empower staff to engage in KTH's service provision.
2. Enhance the utilization of technical innovations for emerging needs.
 - a. Optimize the use of technical innovations to inform policy development and program design.
 - b. Strengthen collaboration with policy and decision makers to implement and integrate technical innovations into national programs.
3. Increase the scale and scope of the KHANA Research Center's technical excellence
 - a. Expand scientific research areas for promoting health and quality of life of the population.
 - b. Work in partnership nationally, regionally and internationally with the private sector, government, and academia in population health and development research.
 - c. Disseminate and share best practices, technical excellence, and new research findings of population health research to those people in positions that effect change.
4. Increase the knowledge and expertise of KHANA's staff in broader areas of health and development.
 - a. Enhance and develop the technical capacities of KHANA's staff through technical sessions, learning, and sharing.
 - b. Develop capacity building opportunities through attendance at local and regional meetings, workshops, symposia, trainings, conferences, and through dialogue.

- c. Leverage technical support from Alliance, linking organizations, academia, and other organizations.

Areas of Contribution

KHANA's ability to strengthen organizational and technical capacities has been one its success stories. With major funding grants obtained through USAID-Flagship, and Global Fund and well managed for results, KHANA has been able to effectively contribute to the national HIV response and related broader health outcomes. Although, from 2014, a decline in external funding for the national HIV response forced key services to be prioritized and management costs reduced, KHANA took this as an opportunity for 'doing more, and better, with less'.

As KHANA moves forward, the KHANA team will continue to update standard operating procedures (SOP) and training curricula for HTC on the utilization of innovative approaches to HTC, such as the community-based rapid testing with finger prick for HIV and syphilis. KHANA will continue to support national and sub-national level plans to roll-out B-IACM. This support, whether financial and/or technical, will be dependent on the evolving funding context and on a joint effort for the pre-elimination of new HIV infections. In collaboration with the National Centre for HIV/AIDS, Dermatology and STD (NCHADS), KHANA plans to develop a task shifting program for stable PLHIV, to support access to treatment for SHG members facing distance and/or mobility issues. KHANA is committed to effectively design, pilot, implement, and replicate technical innovations, such as those funded under Flagship, Global Fund, and the Research Center that can then inform development of guidelines, frameworks, and policies at the national level as well as share those good practices with other countries and organizations in the region and globally.

The KTH (originally the TS Hub), became independent from the HIV/AIDS Alliance, and a functioning unit within KHANA in 2015. The KTH will utilize its experience, expertise, and reputation to help support its work into the future. The KTH will contribute technical assistance by targeting needed services, identifying clients, and utilizing internal KHANA staff in areas of HIV, monitoring and evaluation (M&E), grant, program, and financial management, and organizational and institutional development. The KTH will also document all USAID-Flagship funded programmatic innovations to inform creative approaches in other areas, facilitate

4. The term other stakeholders have been used deliberately in order for the KTH to broaden its potential client base, and to build-on and promote KHANA's human capital, so as to not be restricted by established forms of service provision.

contracts for external consultants and clients, and will provide quality service guarantees to clients for services provided. The KTH will add one more part in KHANA's efforts to be a sustainable organization.

The KHANA Research Centre was fully established as of 2015. The Research Center is designated as one of the centers of KHANA organization, but operates with a large degree of autonomy. The KHANA Research Center will conduct scientific research for promoting health and quality of life of the population by providing evidence based information for the development of effective health policies for improving access to health care system; expand national, regional and international partnerships with private, government, and academia in population health research;

disseminate new findings of population health research to people in the position to effect changes including policy officials, health care leaders, health professionals, and researchers; and help prepare the next generation of scholars, researcher and practitioners for better understanding in research related to population health.

KHANA will also strengthen the capacity of staff, to offer professional development opportunities, and to link to other organizations that can leverage support. This will make KHANA better positioned to meet challenges effectively, to stay current, to show the value the organization has for its staff, and to demonstrate to stakeholders the organization's commitment to ongoing learning opportunities.



Selected Indicators:

- % of KHANA partners that perceive a strengthened capacity to implement their work.
- % of KHANA staff that perceive an increase in the effectiveness of their work.
- Evaluations show that KHANA has made progress in improving the effectiveness, efficiency, and good practice in its programs.
- # of national programs/policies that have been influenced by KHANA led innovations and research.
- # of partnerships created for the purposes of advancing health and development research.

Goal 4: Objectives, Strategies, and Indicators

Promote diversity, rights, and gender equity.

Objectives and Strategies:

1. Promote an enabling environment for KPs, LGBTI and other vulnerable groups⁵.
 - a. Document, monitor and respond to rights violations and violence.
 - b. Build broad and strategic partnerships with legal aid, health and non-health providers, including lawyers and human rights organizations to ensure a supportive and enabling environment.
2. Increase public awareness on sexual orientation and gender identity (SOGI) and gender-based violence (GBV).
 - a. Build the capacity of KHANA and its partners to better understand SOGI and GBV, along with practical ways to address issues.
 - b. Integrate SOGI and GBV into programming.
 - c. Collaborate with the media to raise awareness on SOGI and GBV for families and communities.
3. Improve and promote sexual and reproductive health and rights (SRHR) for KPs, LGBTI and other vulnerable groups.
 - a. Adapt/refine/develop service packages for communities.
 - b. Support for complete referrals to SRHR services.
 - c. Raise awareness on SRHR, and service availability.
4. Promote engagement of women, KPs, LGBTI and other vulnerable groups in program development, policy dialogue, and leadership within KHANA, with IP, and at the national level.
 - a. Support and monitor meaningful participation at every level of implementation including program design, policy dialogue and forums.

- b. Document the impact of meaningful participation.
- c. Build leadership and advocacy skills.
- d. Integrate gender equity into program development and policies.

Areas of Contribution

KHANA has a solid history of integrating rights and equity as cross-cutting themes into programming, advocating successfully for individuals and communities, and influencing policies which affect PLHIV and KP. KHANA plans to leverage this work by extending support and advocacy beyond PLHIV and KP to include other vulnerable or marginalized groups.

KHANA will support more effective documentation and monitoring when responding to rights violations and violence, which will be further developed through formalized strategic partnerships within the health, legal, education, and rights sectors. Staff capacity and competencies will be strengthened on SOGI and GBV, through training and education, to be better positioned when raising awareness within communities. KHANA will also support sustainable initiatives whereby empowered individual members will carry forward work being done on SOGI and GBV. KHANA will also continue to support harm reduction strategies for PWID and PWUD through advocacy, policy influence, and research.

Service packages for SRHR will be updated and enhanced as a way to address different needs and gaps, and to complement public health services. KHANA will also raise awareness on diversity found within the various groups being served, which will allow for more meaningful, and respectful delivery and referral options.

KHANA will continue to play a key role in influencing the direction of national policy and programs making certain that national dialogues are informed by those who are affected most and facilitating consensus for rights-based and evidence-informed approaches and solutions. KHANA along with the Research Center will

5. Vulnerable Groups is defined as those groups that experience a higher risk of poverty, and social exclusion than the general population. Ethnic minorities, migrant workers, disabled people, garment workers, the homeless, PWUD and PWID, isolated elderly people and children are a few examples of vulnerable groups within the Cambodian context. Vulnerable individuals may meet further exclusion, due to low levels of education, unemployment, underemployment, and health status.

share lessons learned widely, ensure the utilization of program data and research to shape more supportive policies and promote an enabling environment.

KHANA's team will support the empowerment of women, vulnerable groups, communities, networks,

and organizations in order to represent themselves, to voice their concerns, to take more active roles in program design, policy dialogue, and forums, to improve their access to services, and to break down stigma and discrimination at all levels.



Selected Indicators:

- % of women reporting increased opportunity in program/project design, implementation, and M&E.
- % of women reporting increased opportunity in policy dialogue.
- % of national programs that have integrated gender equity into programming and policies.
- Increased accessibility to SRHR services.
- Increased awareness of SOGI and GBV.

KHANA's Ongoing Commitment

The KSP20 guides KHANA's strategic directions as a continued leading organization for community ownership and empowerment in the HIV response, while addressing and contributing to addressing wider health and development needs aiming for all people to have equitable access to quality HIV and health services, and sustainable development opportunities. It is an ambitious but manageable plan guided by the expectations and needs of the communities that KHANA's team serve. It is idealistic, in that it strives to create a positive vision for Cambodia. Built out of collaboration with both internal and external stakeholders, it embodies the human voice, along with the integration of multiple perspectives on what has been done and what needs to be done. These reflections are seen as a show of commitment by stakeholders to continued support for the work being done by KHANA, and are in turn translated into this plan as a show of commitment by KHANA to its stakeholders.

The KSP20 is also realistic, with actionable items that KHANA will need to adhere to. As part of this, KHANA will need to review elements that leverage successful implementation, while critically reflecting on challenges to achieving goals. As part of a sustainability plan, and in order to remain vigilant to changing circumstances and evolving contexts, and to show commitment and accountability to its donors, KHANA will develop regular work and business plans, update yearly operational and costing plans, ensure strong

monitoring and reporting systems, including specific indicators relating to the four goal areas, ensure that Standard Package of Activities (SPA) are effective in guiding high quality responses to community health outcomes, and hold a midterm review at the end of year three.

The organization will also consult with, and invite input from all stakeholders, make strategic choices on how best to mobilize resources from traditional and non-traditional funding streams in order to meet goals, and look at ways to develop income generating activities. KHANA staff will also need to review roles and responsibilities to ensure the most effective response; adjusting processes, structures, and human resources accordingly. As in the past, management excellence and strong accountability to optimize all available resources will remain a priority.

KHANA's commitment extends to an alignment with the frameworks of national and international strategies in order to guarantee more collaborative, unified and consistent work within Cambodian and regional contexts. At the national level, KHANA has aligned itself to those plans set out by NCHADS, the National Strategic Development Plan, the National AIDS Authority (NAA), and the Ministry of Health (MoH). At the global level, KHANA has aligned with the HIV/AIDS Alliance and the United Nations Sustainable Development Goals (SDGs) to form a larger picture in terms of helping KHANA more effectively contribute to health and development needs.

As KHANA looks ahead, it will continue to live by a "Lead, Contribute, Adapt" philosophy and will greatly benefit from it by:

- maintaining leadership in areas of expertise;
- staying connected, relationship-oriented, well-known, and trusted;
- building enviable structures and professionalism;
- optimizing value for money, prioritizing and focusing;
- meaningfully contributing to the national programs through technical excellence;
- constantly innovating and adapting to change; and
- remaining committed to all aspects of its work along with communities being served.

Documents Reviewed

CDRI (2015). Social Accountability in Service Delivery in Cambodia (Working Paper Series No. 102).

Deutsche Gesellschaft für Internationale Zusammenarbeit (GIZ) (2014). Toward Universal Health Coverage: the Cambodian Experience Formulating a Health Financing Policy (Working Paper).

International HIV/AIDS Alliance (the Alliance). HIV, Health and Rights: Sustaining Community Action Updated, 2016-2020.

KHANA (2015). Appreciating the Past and Looking Forward to the Future: KHANA's Contribution to 15 Years of HIV Response in Cambodia.

KHANA (2011). KHANA Strategic Plan 2011-2015 (KSP15).

KHANA (2013). Revised KHANA Strategic Plan 2013 -2015 (Boosted KSP15).

KHANA Board. Discussion Paper: Developing the KHANA Strategic Plan 2016 – 2020. KHANA's 60th Board Meeting, May 2014.

Law on Associations and Non-Governmental Organizations. Unofficial Translation, 19 August, 2015.

National Centre for HIV/AIDS, Dermatology and STD (NCHADS). Strategic Plan for HIV/AIDS and STI Prevention and Control in the Health Sector in Cambodia 2015-2020. (Final Draft - 09 January 2015).

Royal Government of Cambodia (2011). National Social Protection Strategy for the Poor and Vulnerable (2011-2015).

Royal Government of Cambodia (2014). National Strategic Development Plan 2014-2018: For Growth, Employment, Equity and Efficiency to Reach The Status of an Upper-Middle Income Country.

Stakeholder Forum (2015). Universal Sustainable Development Goals: Understanding the Transformational Challenge for Developed Countries. Report of a Study by Stakeholder Forum.

Strickler, C. (2015). Performance Review of KHANA Alliance SEAP Technical Support Hub. KHANA.

Thin, K. et. al. (2014). KHANA Livelihoods Programs for Improving Health and Quality of Life of People Infected and Affected by HIV: A Qualitative Program Review.

UNDAF (2014). Cambodia Common Country Assessment-CCA (2016-2018).

UNDP, USAID (2014). Being LGBT in Asia: Cambodia Country Report. Bangkok.



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