



KHANA ANNUAL REPORT 2024

**STAY CONNECTED
AND RELEVANT
WITH HIGH ACCOUNTABILITY**



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ACRONYMS AND ABBREVIATIONS

ACF	Active Case Finding
ART	Antiretroviral Therapy
CC	Commune Council
CENAT	National Center for Tuberculosis and Leprosy Control
CFCS	Challenge Facility for Civil Society
CI	Contact Investigation
CBO	Community-based Organization
CSO	Civil Society Organization
DNPET	District Network of People Living with or with Experience of TB
DMHSA	Department of Mental Health and Substance Abuse
DR-TB	Drug-Resistant TB
DS-TB	Drug-Susceptible TB
FEW	Female Entertainment Worker
FO	Field Officer
HCMC	Health Center Management Committee
HF	Health Facilities
HIV	Human Immunodeficiency Virus
HL	Hospital Linkage
ICC	Inter-Sectoral Coordination Committee
IPD	Inpatient Department
LC	Lay Counselor
LTBI	Latent Tuberculosis Infection
KP	Key Population
MDR-TB	Multidrug-resistant TB
MSM	Men who have Sex with Men
NECHR	National Ethical Committee for Human Research
NTP	National TB Program
NUS	National University of Singapore
PLHIV	People Living with HIV
PMD	Programmatic Management of Drug-Resistant Tuberculosis
PNPET	Provincial Network of People Living with or with Experience of TB
PrEP	Pre-Exposure Prophylaxis
Pro TWG-H	Provincial Technical Working Group on Health
PSG	Peer Support Group
RR-TB	Rifampicin-Resistant TB
SOP	Standard Operating Procedure
STP	Stop TB Partnership
TB-CRG	TB Community, Rights and Gender
TB DIAH	TB Data Impact Assessment & Communications Hub
TB-DM	Tuberculosis-Diabetes Mellitus
TB-MIS	Tuberculosis Management Information System
TG	Transgender
TPT	Tuberculosis Preventive Treatment

MESSAGE FROM THE CHAIR OF BOARD OF DIRECTOR



With the efforts of all staff and effective leadership, KHANA remains a leading national organization in contributing to the improvement of health for vulnerable people and those in need of support in accessing health services in Cambodia. On behalf of the Board of Directors of the Khmer HIV/AIDS NGO Alliance (KHANA), I would like to appreciate the efforts and flexibility of the organization's management team once again, which has achieved many new achievements in 2024, the first year of the organization's 2024-2030 strategic plan (KSP30). In particular, the achievement of increased coverage and geographical expansion of project implementation with new programs and continued provision of HIV prevention and TB case-finding services in communities in the project area, compared to the same period in 2023.

The continued funding from donors for the second phase of the COMMIT project for the next five years and the acquisition of new projects that respond to its KSP30 have demonstrated the recognition and confidence of donors and collaborative partners. Although many uncertainties may arise in 2025 with new global priorities, combined with the organization's experience in participating in the management of the COVID-19 pandemic, provides KHANA and partners with new experiences and learnings that confirm the role of communities in leading and contributing to the collection of data and understanding the situation of the target population groups in a timely manner, which will help to respond and support interventions and, in particular, prevent, protect and respond to disasters effectively, both in the outbreak of infectious and non-communicable diseases, organized by the organization's teams.

The Board of Directors would like to congratulate the recent achievements of KHANA in 2024 and highly appreciate the efforts of the leadership and staff at all levels. At the same time, we would like to take this opportunity to express our gratitude for the support and cooperation that KHANA has received from the Royal Government of Cambodia, relevant authorities, strategic and collaborative partners, and donor agencies, especially from national programs with which KHANA and its projects are involved. In 2024, the Board of Directors also recognized the organization's flexibility in ensuring the effectiveness and efficiency of its projects in response to changing trends, as well as its established goals and achievements related to key indicators outlined in the KSP30, which was prepared and revised with the guidance, approval, and consent of the Board of Directors. With the flexibility and contribution of relevant partners, and especially the support and cooperation of the National Program and the National Center, local authorities, and health authorities at all levels, I strongly hope that KHANA will continue to contribute to improving the well-being and health of Cambodian citizens as the project's target groups, in line with the Pentagon Strategy, Phase 1, and the goals of the Royal Government of Cambodia in its 7th mandate, under the wise leadership of **Prime Minister Samdech Moha Borvor Thipadei Hun Manet**.

Finally, on behalf of the Board of Directors, I wish that KHANA's plans, directions, and priorities for 2025, the second year of the KSP30, will be successful and that it will remain a leading organization in contributing to the health sector in Cambodia.

MESSAGE FROM EXECUTIVE DIRECTOR OF KHANA



KHANA has played a significant role and focused on providing preventive education, treatment, and care services, and support and services to reduce the impact of HIV and tuberculosis, as well as infectious and non-communicable diseases, maternal and neonatal care services in a supportive and safe environment. The KHANA's strategic plans, policies and programs are aligned with national programs and national strategic plans through the implementation of direct projects in communities by KHANA's team and with the provision of both technical and financial support to partner organizations at the grassroots level in Cambodia.

KHANA is recognized as a local non-governmental organization with a proven track record of providing capacity building to civil society organizations for good practice in program implementation, grant and financial management, research, and institutional development, and good governance. KHANA is committed to ensuring that all staff and partners of the organization have the ability to organize and implement projects in a transparent manner and accountability, achieving efficiency and effectiveness and through this history of working with transparency, accountability, and no corruption, KHANA has been recognized as one of the leading organizations in the field of good governance in Cambodia.

In 2024, KHANA implemented work through its various projects. In Phnom Penh and eighteen provinces including Kandal, Kampong Speu, Kampong Chhnang, Pursat, Battambang, Banteay Meanchey, Siem Reap, Kampong Thom, Kampong Cham, Prey Veng, Svay Rieng, Tboung Khmum, Preah Sihanouk, Koh Kong, Takeo, Kampot, Kep and Ratanakiri, through project implementation teams directly in the community and through local partner organizations, focus on community-based HIV prevention education and case-finding programs on high-risk groups including female entertainment worker (FEW), men who have sex with men (MSM), transgender women (TG) and their partners.

In addition, KHANA provided prevention education, identified those presumptive of having tuberculosis, screened for TB, referred sputum examination to health centers and referral hospitals. The target population included the elderly, people living in close contact with people with pulmonary tuberculosis, people living with HIV, people with diabetes and other chronic diseases, and people affected by tuberculosis. In addition, KHANA also works directly with operational health district, health centers and community networks at local levels in providing education and help encourage guardians to bring their children to receive all doses of vaccinations prescribed by the Ministry of Health, and to be aware of the risks of epidemics and be prepared to prevent, contain, and respond effectively.

KHANA and its partners have made significant contributions to the national HIV/AIDS and tuberculosis responses to move towards ending the spread of HIV/AIDS in 2025 and ending tuberculosis by 2030.

The Community Movement Initiative to End Tuberculosis (COMMIT), a five-year project, officially ended in late September and was extended until December 31, 2024. With its successful implementation, the COMMIT 2 Project was awarded by the USAID from October 1, 2024, to September 30, 2029.

2024 is the first year of the KSP30, following the approval of the Board of Directors. The results achieved in 2024, with significant increases in all key indicators of the KSP30 compared to the

same period in 2023, as detailed in the following pages, are the result of the efforts of all staff and volunteers, both at the head office and at the field level. The advice and guidance of the Board of Directors of the organization has also been an important part of helping all leaders and staff ensure the implementation of the plan and guide the organization towards achieving an institution that plays a leading role in the field of public health, with transparency and good governance, especially receiving recognition and support from stakeholders, partners and all funders.

On this occasion, on behalf of the management, staff, and volunteers, I would like to express my deepest gratitude to the Royal Government of Cambodia, especially the National AIDS Authority, the Ministry of Health, the two national programs: the National Center for AIDS, Dermatology, and STDs and the National Center for Tuberculosis and Leprosy Control, key departments of the Ministry of Health, local authorities, health authorities at all levels, as well as partner organizations and other relevant programs who have cooperated and supported the activities of KHANA's projects to be successfully implemented. I would also like to thank all technical and financial partners who have given their trust and support to help all projects be implemented and responded to the needs of the target groups in the project areas in Cambodia.

We hope that 2025 will continue to bring prosperity, reduce challenges, and bring new opportunities to help KHANA continue its important mission of contributing to improving public health for vulnerable groups and those affected by HIV/AIDS, tuberculosis, and other infectious and non-communicable diseases, in line with the direction of the seventh mandate of the Royal Government of Cambodia, under the energetic and wise leadership of **Prime Minister Samdech Moha Borvor Thipadei Hun Manet**, to achieve universal health coverage by leaving no one behind.

EXECUTIVE SUMMARY

As a non-governmental organization (NGO) established in 1996, KHANA strives to be a leader in HIV and TB responses while addressing wider health and development needs in Cambodia. Khmer HIV/AIDS NGOs Alliance (KHANA) largely supports community ownership and empowerment for all to have equal access to HIV and TB prevention and care, as well as other health services including family planning, viral hepatitis treatment and non-communicable disease management. KHANA Annual Report 2024 is a comprehensive overview of the increasing utilization of health services, improved access to healthcare, and efforts to address pandemic prevention, preparedness, and response with a focus on eliminating HIV and TB. The report highlights KHANA's ongoing outreach programs and impact.

In 2024, a total of 80,457 key populations (KP) were reached as part of the HIV response, and 65,907 KPs received HIV testing and. These testing efforts found 1,355 HIV positive cases, contributing to 62% of detected cases in the national program. All new cases were then enrolled in Antiretroviral Therapy (ART). KHANA also supported HIV prevention by encouraging and promoting Pre-Exposure Prophylaxis (PrEP) to key populations such as female entertainment workers (FEW), transgender women (TG), and men who have sex with men (MSM). While undergoing HIV testing, KPs were educated on HIV prevention and protected intercourse, leading to the distribution of 4,014,117 condoms and 1,929,194 lubricants in 2024. Additional methods to improve HIV detection included the mHealth approach, Peer-Driven Intervention Plus (PDI+), the nighttime outreach program, and HIV self-testing and PrEP interventions for KPs. Of the 8,684 KPs that registered for HIV self-testing, 47 were HIV positive and then enrolled into the ART services.

KHANA's fight against TB implemented the Community Mobilization Initiatives to End Tuberculosis (COMMIT) project, funded by United States Agency for International Development (USAID) through TB Local Organization Network (TB-LON). Through the COMMIT project, 349,213 people were screened for TB; seven percent of those screened (6,978) were TB positive, and 6,969 people were started on TB treatment. COMMIT has also been working to technically support TB-MIS, an electronic information system, for use in health care facilities to improve TB diagnosis and monitoring. Since 2020, TB-MIS has been used in 529 health facilities (HF) across 44 Operational Health Districts (ODs).

The future of KHANA is to expand into broader health sectors by providing universal health coverage, addressing climate change, utilizing one health approaches, and pandemic prevention preparedness response (PPPR).

2023 HIV and AIDS and TB statistics

2023 HIV/AIDS and TB Statistics

Global HIV/AIDS Statistics 2023

- People living with HIV (PLHIV): 39.9 million [36.1 million–44.6 million]¹
- Total number of new infections: 1.3 million [1.0 million–1.7 million]¹
- AIDS-related death: 630,000 [500,000–820,000]¹
- PLHIV on antiretroviral therapy (ART): 30.7 million [27–31.9 million] in 2023¹

Global TB Statistics 2023

- TB incidence: 10.8 million (10.1 million – 11.7 million)²
- TB related deaths (HIV-negative): 1.1 million (977,000 – 1.2 million)²
- TB related deaths (PLHIV): 161,000 (132,000 - 193,000)²

Cambodia HIV Statistics 2023

- HIV prevalence (Adult aged 15 to 49)³
 - Total: 0.5 (0.4 – 0.6)
 - Men: 0.5 (0.4 – 0.6)
 - Women: 0.5 (0.4 – 0.5)
 - Young men: 0.3 [0.2 - 0.3]
 - Young women: 0.2 [0.2 - 0.2]
- **Estimated PLHIV³ :**
 - Total: 76,000 [65,000,87 000]
 - Men: 38,000 [32,000 - 45,000]
 - Women: 36,000 [30,000 - 42,000]
 - Children aged 0 – 14: 1,700 [1,400 – 2,000]
- **PLHIV who knows their status: 68,000**
- **Total number of new infections³**
 - Total: 1,200 [1,100 – 1,300]
 - Men: <1,000 (<1,000 – 1,000)
 - Women: <500 (<200 – <500)
 - Children aged 0 – 14: <100 (<100 – <100)
- **AIDS-related deaths³**
 - Total: 1,100 [<1,000 – 1,400]
 - Men: <500 [<500 - <1,000]
 - Women: <1,000 [<500 - <1,000]
 - Children aged 0 – 14: <100 [<100 - <100]
- **PLHIV receiving ART³: 68,000**

¹ UNAIDS. Global HIV & AIDS statistics — Fact sheet 2023

² World Health Organization: Global Tuberculosis Report 2024

³ UNAIDS. Country factsheets: Cambodia. 2023

- **HIV prevalence among KPs:**
 - FEW⁴: 4.9%
 - Freelancers⁴: 6.9%
 - MSM⁵: 5.5%
 - TG⁵: 13.5%
 - PWUD⁶: 5.9%
 - PWID⁶: 10.6%

Cambodia TB Statistics 2023

- **TB incidence rate: 335 per 100,000** population
- **Total TB incidence:** 58,000 all forms of TB
- **Case detections:** 32,270 new or relapse case of TB (55% TB treatment coverage)

In 2024, KHANA contributed around 62% to the national programs on HIV, 21% on TB case detection, and 60% on TB preventive treatment (TPT).

Table 1: KHANA and its contribution to the national HIV response in 2024

Key populations	Estimated size of KP (national)	Key populations reached	Key populations who received HIV testing and counselling	Key populations who received HIV testing and counselling and were tested positive	Key populations enrolled ART treatment
Total	117,224	80,457	65,907	1,355	1,355
FEW	49,404	26,178	23,835	75	75
MSM	52,406	40,792	31,706	897	897
TG	15,414	13,487	10,366	383	383

Table 2: KHANA and its contribution to the national TB response in 2024

Key populations	People screened for TB symptoms	Presumptive TB cases identified	Presumptive TB cases tested	People detected with all forms of TB	All forms of TB started on treatment
Total	349,213	94,821	91,131	6,978	6,969
Female	207,446	56,755	54,588	3,225	3,222
Male	141,767	38,066	36,543	3,753	3,747

⁴ National Center for HIV/AIDS, Dermatology and STD (NCHADS) 2022: FEW IBBS 2022

⁵ National Center for HIV/AIDS, Dermatology and STD (NCHADS) 2019: MSM & TG IBBS 2023

⁶ National Center for HIV/AIDS, Dermatology and STD (NCHADS) 2017: PWID and PWUD IBBS 2024

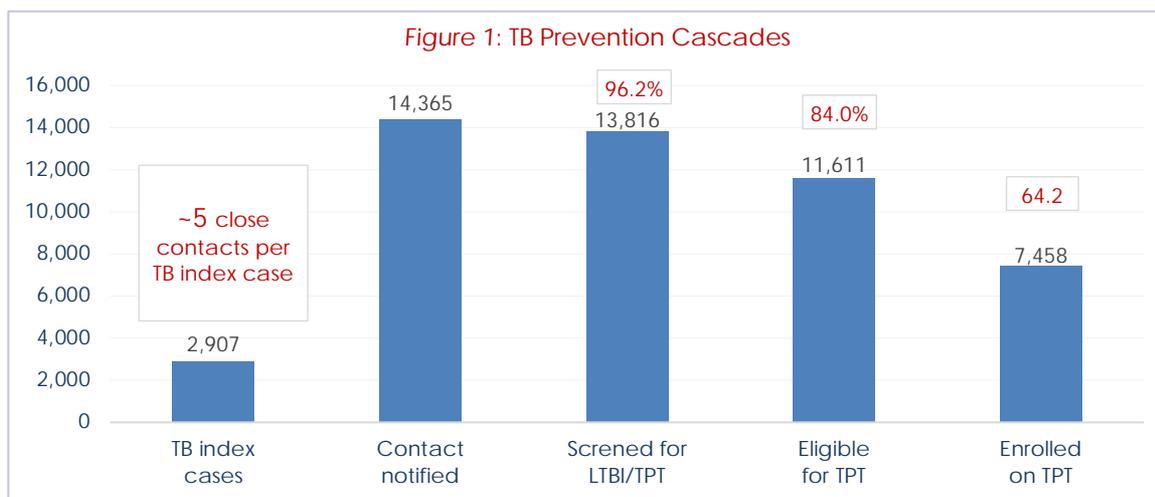
Goal 1: Contribute to eliminating new HIV and TB, strengthening health systems that address NCD, viral hepatitis and achieving universal health coverage (UHC)

In 2024, KHANA and its partners continued to make significant contributions to the prevention and transmission of HIV/AIDS. A total of 80,457 key populations were reached through the efforts of KHANA's HIV and STI program. The program tested 65,907 HIV cases and detected 1,355 new HIV cases, contributing approximately 62% (1,355 out of 2,183) to the national program. All confirmed HIV positive cases were enrolled in ART services. In addition, the program detected 1,781 cases of syphilis and 3,919 cases of STIs; all were referred for counseling and treatment. KHANA has supported implementing partners (IP) in implementing HIV prevention programs, including the promotion of PrEP to KPs, such as FEW, MSM, and TG who wish to use PrEP to prevent HIV transmission. In 2024, 5,740 KPs, including 309 FEWs, 4,585 MSM, and 846 TGs, were referred to community PrEP services in Phnom Penh, Kampong Speu, Kandal, Preah Sihanouk, Prey Veng and Kampong Cham province.

1.1. Prevent new HIV and TB infections and transmission

TB Prevention

COMMIT strengthened and expanded the implementation of contact investigation (CI) by engaging with health providers and local authorities to increase CI activities among the close contacts of bacteriologically pulmonary TB and to improve TPT uptake and completion, across 27 ODs. As a result, the project conducted the contact investigation activity among 2,907 index cases and was able to initiate a total of 7,458 people on TB Preventive Treatment (TPT), of whom 60% female and 5.59% children under 5. Remarkably, 95.5% of the 2023 cohort completed the full course of TPT treatment (3,004 out of 3,114 enrolled cases).



1.2. Improve HIV and TB case detection, treatment, and adherence

Outreach activities

KHANA provided HIV prevention service packages to KPs by maintaining the implementation of the Boosted Continuum of Prevention to Care and Treatment for Key Populations (B-CoPCT) Standard Operating Procedure to enhance early case detection and diagnosis among KPs

especially those who are hard-to-reach. KHANA's HIV prevention activities cover the southern zone of Cambodia, which includes 10 provinces and the Phnom Penh municipality. The program purposes to meet and educate 75,091 KPs which include 32,191 FEWs, 31,275 MSM and 11,625 TGs. In 2024, the program surpassed expectations with a total of 80,457 reached through the prevention program - including 26,178 FEWs, 40,792 MSM and 13,487 TGs. A total of 65,907 KPs were tested for HIV, resulting in the identification of 1,355 HIV-positive cases. All individuals diagnosed with HIV were successfully enrolled in ART services. In addition to HIV services, the program detected 1,862 cases of syphilis and 3,919 cases of other sexually transmitted infections (STIs). All cases of syphilis and STIs were referred to medical consultation and received treatment.

Distribution of condoms and lubricants to target groups

Condom and lubricant supply, distribution, and promotion are crucial for HIV prevention interventions. Condoms have been introduced as an HIV prevention method since the mid-1980s and remain the most effective tool for preventing HIV transmission. KHANA has continued to support the provision of condoms and lubricants to KPs through IPs to prevent HIV/AIDS and STIs. In total, 4,014,117 condoms and 1,929,194 lubricants were distributed to KPs during the 2024 outreach education. FEWs received 1,612,116 condoms, MSM received 1,827,558 condoms and 1,437,087 lubricants, and TGs received 574,443 condoms and 492,107 lubricants were distributed.

Improving the detection of HIV cases and adherence to treatment

KHANA and its partners have utilised a variety of approaches through online forums and social media such as Facebook pages of SMARTgirl for FEW, Mstyle for MSM, and Srey Sros for TG, and dating apps including Grindr, Blued, and Hornet to reach-out hard-to-reach KPs of HIV/AIDS. KHANA's IPs closely collaborate with ART clinics to support the adherence of those who are on treatment.

mHealth methods

KHANA and IPs have maintained the implementation of the mHealth approach that employs technology, Facebook pages, dating apps, GIS mapping services, HIV information, personal risk assessment tools, and online counselling, to strengthen the HIV responses. In 2024, SMARTgirl received 199,101 likes on its Facebook page. Mstyle received 219,698 likes on its Facebook page. Srey Sros received 137,060 likes on its Facebook page. A total of 14,599 referrals were made from Facebook and dating sites for HIV and STI testing, including 919 from SMARTgirl, 10,550 from Mstyle, and 3,130 from Srey Sros. Among 14,599 referrers, 237 were HIV-positive (22 in SMARTgirl, 168 in Mstyle, 47 in Srey Sros) and 268 in positive syphilis (47 in SMARTgirl, 185 in Mstyle and 36 in Srey Sros). These cases are properly referred for enrolment in ART services.

Peer-Driven Intervention Plus (PDI+)

KHANA regularly conducts field monitoring visits to provide on-site technical support and coaching to project staff on PDI+ implementation, risk assessment, virtual outreach, and quality control for testing services, and development of strategic behaviour change communication tools (SBC). In 2024, through PDI+ implementation, the intervention tested 147 FEWs, 960 MSM, and 362 TGs for HIV. A total of 70 tests were positive in those groups (1 FEW, 51 MSM and 18 TG), and 70 were referred for enrolment in ART services and 58 KPs were tested positive for syphilis and were referred to health facilities for treatment.

Success story 1st: Finding Strength Through KHANA HIV Prevention Program: A Journey from PrEP Interest to HIV Care Enrolment



To protect confidentiality, the name “Pov” is used in this success story. Pov is a 27-year-old man from Takeo province, has two siblings and currently resides in Phnom Penh. Pov is pursuing studies while working part-time at a private company. Pov discloses as MSM and uses apps as Grindr and Blued to find partners for sexual encounters. Occasionally, Pov finds a partner at steam and saunas in Phnom Penh that only serve men who have sex with men. Pov's sexual behaviour is similar to that of many of his partners, who may be less concerned about HIV prevention or other infectious diseases. In addition, he uses drugs, such as “Poppers”, to have sex more enjoyable and increase arousal. One day, Pov came across

information about PrEP services on the MHC Facebook page. Interested in accessing PrEP services, he promptly reached out to the Outreach Worker (OW) for more details on how to use it. In addition to learning about PrEP use, Pov also gained knowledge about HIV and other STIs. At the same time, OW arranged for Pov to undergo HIV testing before being referred for PrEP services. Pov was anxious about the results, OW provided reassurance and support. When the test came back reactive for HIV, sadness and tears immediately flowed after the results were read. However, through OW's counseling, Pov was referred for a confirmatory test at the National Center for HIV/AIDS, Dermatology and STD (NCHADS) and received additional guidance from a service provider. Following this, Pov decided to register in ART clinic at the NCHADS.

Risk screening and HIV testing

KHANA and its IPs employed risk screening tool to further classify the risk status of HIV infection based on behaviours. Risk classification aimed to improve the provision of HIV services by prioritizing HIV testing and sending tailored messaging to KPs. Tablet-based questionnaires were used to collect data. In total, 26,178 FEWs, 40,789 MSM, and 13,481 TGs were screened. Among those screened, 8,850 FEWs, 25,857 MSM, and 10,803 TGs were classified as being at high-risk for HIV transmission. Based on the results of the risk screenings, the appropriate services, which include key messages for education, HIV testing, condom distribution, and lubricants were designed to the key populations.

Night-time Outreach education activities and HIV/Syphilis testing

KHANA continued to conduct education session and HIV testing through night-time outreach in Phnom Penh targeting FEW, MSM, and TG who are at high-risk of HIV transmission and are unable to reach during daytime's outreach activities through mobile vans. In 2024, the approach reached to 2,635 FEWs, 1,004 MSM, and 234 TGs. Among those KPs reached and educated, 2,296 FEWs, 870 MSM, and 200 TGs were tested for HIV. 3 FEWs, 18 MSM, and 14 TGs were HIV reactive and referred for confirmatory testing next day. All those reactive KPs confirmed HIV positive and enrolled in ART services.



HIV self-testing activities



KHANA continues to support IPs in conducting HIV self-testing among FEW, MSM, and TG in Phnom Penh and 10 other provinces. This approach aims to further reduce barriers to HIV testing for high-risk key populations. In 2024, 8,684 KPs were registered for HIV self-testing. Among those tested, 47 tested positive for HIV and all were referred to be enrolled in ART services.

Success story 2nd: An FEW's Journey to Find Strength, Survival, and Renewed Hope through KHANA HIV Prevention Program



To protect confidentiality, the name “Ny” is used in this success story. Ny, 43 years old from Kandal Province. She has engaged in female entertainment industry to earn a substantial income to support herself and her family. With her earnings, she helps her parents repay their bank debts, provides for her children's education, and supports her husband in establishing a motorcycle repair business in their hometown. Looking ahead, she is hopeful to save enough to start a business of her own. In 2017, the Smart Girl team provided education on HIV, syphilis, and other STIs, including modes of transmission and prevention.

After receiving this information, she felt frightened, as she had occasionally engaged in unprotected sex with guests. However, after following the team's guidance and undergoing a blood test, she felt relieved and reassured until the end of 2017.

A member of the Smart Girl team in CWPD broke news that the organization had cancelled its HIV service projects in Tboung Khmum province. Upon hearing the news, Ny and her colleagues felt saddened and worried about their health, as they had confided in the Smart Girl staff for support and guidance. In 2024, Ny has been able to receive a referral to STI and PrEP services as recommended by the team due to her known risk factors.

Implementation of Pre-Exposure Prophylaxis (PrEP)

KHANA is supporting IPs in implementing HIV prevention programs, including the promotion of PrEP service to KPs, including female entertainment worker, men who have sex with men, and transgender people who intend to use the Pre-Exposure Prophylaxis (PrEP) services to prevent of HIV transmission.

As a result, 2,352 MSM, 607 TGs, and 781 FEWs were referred access to the PrEP service at provincial referral hospitals, health centers in coverage areas and at Chhouk Sor Clinic in Phnom Penh in 2024.

Implementation on Community-based Organization's (CBO) PrEP

In 2024, NCHADS has supported KHANA's IP to establish two new CBO's PrEP in Kampong Speu and Prey Veng provinces. By the end of 2024, there are nine CBO's PrEP implemented by KHANA' IP (four in Phnom Penh, one each in Kampong Cham, Kandal, Preah Sihanouk, Kampong Speu and Prey Veng Provinces). The purpose of this innovative program was to support KPs for HIV transmission, including MSM, TG, and FEW who have been tested for HIV with negative results and referred to the CBO's PrEP for HIV prevention services. As result, there were 4,636 MSM,

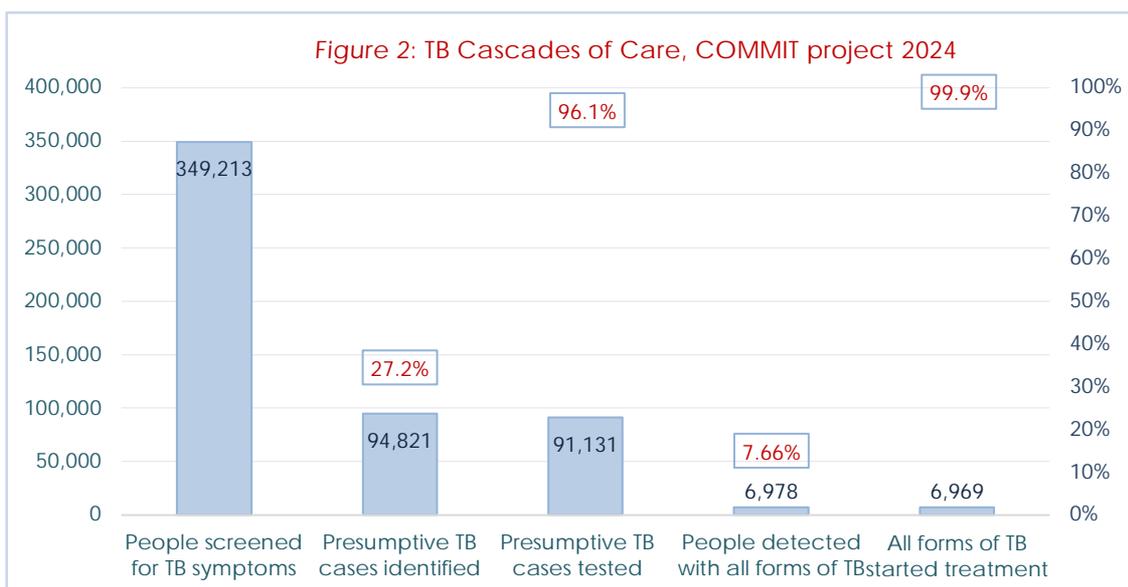
853 TGs, and 309 FEWs received Community PrEP services in Phnom Penh, Kampong Cham, Kandal, Preah Sihanouk, Kampong Speu, and Prey Veng Provinces.

Strengthen good cooperation and collaboration with relevant stakeholders

KHANA and IPs worked closely with the relevant provincial health departments (PHDs) to implement and monitor project progress. KHANA regularly participated in provincial and municipal technical working groups for health meetings and updated through its quarterly and annual reports. These meetings made it easier for KHANA to address issues encountered during the implementation of project activities at communities, to ensure smoother project implementation. In the long term, the regular participation at the national and sub-national levels also facilitates capacity building, promotes partnerships, and facilitates the development of effective systems for future enhancement and sustainability.

TB Case detection

In 2024, KHANA and its implementing NGO partners continued to contribute to the fight against tuberculosis (TB) by executing various projects and strategies. These initiatives included the implementation of the Community Mobilization Initiatives to End Tuberculosis (COMMIT) program, funded by the United States Agency for International Development (USAID) through the TB Local Organization Network (TB-LON). Through collaborative efforts under the COMMIT project, KHANA and its NGO partners successfully carried out planned activities, achieving key milestones and targets across twenty-seven operational health districts (ODs) in Phnom Penh



and eight provinces of Kandal, Kampong Cham, Tboung Khmum, Koh Kong, Ratanakiri, Kampong Thom, Kampong Chhnang and Battambang, covering a total population of 4.2 million people.

In 2024, a total of 349,213 people (59.4% females) were screened for TB symptoms utilizing various approaches, including the mobile TB Active Case Finding, Snowball using seeds and recruits, the Community TB Screening using village health support groups (VHSG), and Hospital Linkages. Of the total 349,213 people screened, 94,821 people (27.2%) were identified as presumptive TB; and 91,131 (96.1%) of those presumptive TB cases were tested further. As a result, 6,978 people (7.7%) were detected with some form TB, and of those, 3,323 (47.6%) people were bacteriologically confirmed pulmonary cases. Of the 6,978 people detected of all forms of TB, 6,969 (99.9%) were enrolled in treatment. COMMIT project has strengthened

sputum collection and the referral process, improved laboratory network, and supported both human resources and diagnostic tools. This increased bacteriologically confirmed positive results from 32.8% in 2022 to 35.8% in 2023 up to 47.6% in 2024, as compared to all forms of TB.

As part of the TB and Diabetes Mellitus (DM) bi-directional screening efforts, 162 cases (3.7%) were diagnosed with TB among 4,401 people with diabetes. Furthermore, COMMIT facilitated maintaining the MDR-TB activities at all treatment sites across the country, notifying a total of 270 DR-TB cases (54.8% MDR/RR-TB; 38.1% female) in 2024.

Success Story 3rd: TB-MIS institutionalization at health center level improved TB diagnosis and monitoring systems

Through the COMMIT project, KHANA has supported CENAT in integrating TB-MIS into health facilities, facilitating data entry at the point of care. This support includes assistance with tablet usage and funding for internet credit. Following the successful integration of TB-MIS in 10 initial COMMIT-supported ODs across four provinces beginning in mid-January 2022—where health facilities began directly entering data into the system—COMMIT expanded the initiative in 2023 to 25 additional ODs across six provinces: Phnom Penh, Kandal, Kampong Cham, Tboung Khmum, Ratanakiri, and Koh Kong.

The data entry process aims to record all presumptive TB cases from the suspected TB registration (Lab 03 form), document available paraclinical information, evaluate registered presumptive TB cases, ensure those diagnosed are placed on TB treatment, track close contacts of TB index cases through contact investigations, and register individuals for tuberculosis preventive therapy (TPT).

Of all the HCs within the project coverage, Praek Anchanh HC in Mukkampung OD was noted to be one of the first few HCs perform exceptionally at both data entry into the system and hard copy recording-keeping of all TB registrations. Mrs. Kom Samaiy, a 45-year-old HC Vice Chief and head of TB initiatives at Praek Anchanh HC, is the reason behind this outstanding work. Her responsibilities include keeping stock of medication since participating in the TB Program in 2011. She explained that she records presumptive TB patients in her presumptive TB registration book (Lab 03) every 15 days. Data entry into TB-MIS is typically performed every two weeks for Truenat testing while DTC Xpert testing is input in real-time at Bunnani Hun Sen Rokakong RH. In Lab 03, she uses a red ink pen to note all automatically generated TB-MIS codes to ensure that each patient has been properly recorded in the system.



Before the drill-down, she would manually count TB cases and submit this data to the OD TB supervisor upon request. “While it did not take long to count TB cases from the books, it was not convenient when I was not at the HC,” she noted that it was not only time-consuming to travel back and forth to the HC but carrying the books around posed the risk of losing them. “As long as I have this [tablet], I can access TB-MIS anywhere, even if I am at a meeting. I can always generate reports anytime and a lot faster too.” She added that in order to generate and utilize the reports correctly, HC staff must ensure that all

Kom Samaiy shares how she manages data through tablet-based records as compared to paper registrations – Photo credit @Saren MENH

of their cases are being entered into the system completely and correctly. “For me,

I must regularly check TB-MIS every month for any red case tag alerts and resolve them,” she states. In addition to her work in the TB program, TB-MIS has also introduced her to new electronic devices and, more importantly, enhanced her understanding of digital health systems.

1.3. Increase health service utilization

KHANA continued to support the implementation of community-led monitoring (CLM) utilizing OneImpact Cambodia, an application that empowers individuals affected by TB and communities with access to information on TB, human rights, key messages from TB survivors, and additional updates on TB care and support services. OneImpact Cambodia also enables those affected by TB to engage with their peers, TB support groups, chat forums, and learn more about regional and global TB community networks. By the end of 2024 more than 9,000 users, mainly affected by TB or undergoing TB treatment, had registered and actively used the OneImpact Cambodia application.

In 2024, KHANA expanded CLM - OneImpact initiative to seven provinces and 17 operational health districts, further enhancing support available for people affected by tuberculosis (TB). The initiative reached 6,872 registered users and 207 reported cases, with 142 resolved.

1.4. Improve equitable access to healthcare

Key populations of HIV/AIDS including FEW, MSM, and TG who obtained the Equity Card which issued by Ministry of Planning through the coordination from KHANA and IPs are still unitizing the benefits of the card such as free health care services at public health facility and social protection benefit includes cash support and food. By the end of 2024, 350 FEWs, 120 MSM, and 30 TGs from nine provinces under KHANA’s coverage holding Equity Card.

Success story 4th: Advocating for Access – Leng Nhor’s Role in Empowering People Affected by TB

Mrs. Leng Nhor, aged 62-year-old, currently volunteering herself as the Chair of the District Network of People Affected by TB at Sensok OD, brings both personal strength and professional commitment to her work with TBpeople Cambodia. Formerly a member of the community council, her life took a significant turn when she was diagnosed with tuberculosis. Like many others, she experienced firsthand the stigma, discrimination, and emotional challenges that often accompany the disease—including a loss of motivation to continue treatment.

This personal journey became the foundation for her passion and advocacy. Mrs. Leng Nhor observed that many TB patients in her community faced low awareness, carried misconceptions, endured stigma, and often had no symptoms—factors that delayed diagnosis and treatment. These insights motivated her to join TBpeople Cambodia and turn her experience into action.



Mrs. Leng Nhor is sharing her experiences during the Annual TBpeople Cambodia Meeting in March 2025 in Siem Reap Province

Once she joined TBpeople Cambodia, Leng Nhor took on a leadership role and began engaging with local authorities, health providers, and relevant departments. She advocated for the inclusion of TB patients in the ID Poor program and supported their applications for the Health Equity Fund and cash transfer programs for vulnerable family's enrolment, helping them to access free treatment and health services.

Her work involved organizing community meetings, coordinating with village chiefs and commune councils, and presenting the realities faced by TB patients to government partners. Thanks to her persistence, several TB patients in her district have now been enrolled in social protection schemes, significantly improving their ability to complete treatment and maintain their livelihoods.

Mrs. Leng Nhor's efforts have not only improved access to TB care but have also significantly contributed to reducing poverty, enhancing the quality of life, and saving lives in her community. She acknowledges the critical role of KHANA and its partners for their technical and financial support and calls for continued investment in training to further strengthen the capacity of TB volunteers and advocates like herself. Her story stands as a testament to how lived experience, when empowered and supported, can transform communities and inspire hope for a TB-free Cambodia.

Goal 2: Address climate change issues, one health issues, and pandemic prevention, preparedness, and response through building human resilience and developing sustainable community and organizational systems

2.1. Enable affected communities in climate change adaptation and disaster risk reduction, including One Health Issues, and Pandemic Prevention, Preparedness and Response (PPPR) [seeking for photo and caption to support narrative]

In 2024, the Pandemic Preparedness, Prevention, and Response (PPPR) initiative has been actively implemented with financial support from APCASO, strengthening Cambodia's community-led health response, particularly in HIV, TB, and Malaria programs. This initiative, facilitated by KHANA in collaboration with the Ministry of Health and key Civil Society Organizations (CSOs), aims to enhance pandemic preparedness, promote community engagement, and build resilience within public health systems.

A key event, which was one of the major components of PPPR implementation, was The PPPR Platform Coordination Meeting, held on August 30, 2024, in Phnom Penh. It brought together **32** participants from community networks, civil society organizations (CSOs), and stakeholders to discuss pandemic preparedness and response (PPPR). The meeting aimed to establish terms of reference for the PPPR platform, outline engagement strategies, and integrate PPPR into existing health programs for HIV, TB, and malaria.

Another key event was the Sensitization Workshop on Joint External Evaluation (JEE) and State Party Self-Assessment Annual Report (SPAR) held in December 2024. The workshop brought together government officials, CSO representatives, and community networks to deepen their understanding of international health regulations and the significance of JEE and SPAR in strengthening health security. Additionally, a Capacity Building Training on PPPR was conducted to equip 32 (9 females) community representatives and CSOs with the necessary skills and knowledge to implement pandemic preparedness and response strategies effectively. The training covered key areas such as risk mitigation, advocacy for human rights in public health, and enhancing coordination between grassroots organizations and policymakers.

2.2. Increase access to income and other financial resources

KHANA, through COMMIT project, made tremendous efforts to have TB included in local meeting agendas and engaged with commune council (CC) and HCMC meetings in the project supported sites. Most importantly, the project team worked with selected communes through various platforms to implement TB-free initiatives; as a result, a total of 30 communes in the province of Kandal, Tboung Khmum, and Kampong Cham utilized their commune budgets for TB response, covering awareness raising, community screening activities, and treatment support.

2.3. Increase employment opportunities for beneficiary community members

KHANA, in collaboration with strategic partners, continued to support the organizational and institutional development for TBpeople Cambodia, the national network of people affected and infected by TB, which was officially registered as a legal association with the Ministry of Interior in 2023. At the community level, KHANA and its partners continued to strengthen and expand the establishment of Peer Support Groups (PSG) reaching 209 groups with a total of 4,060 members (55% females), District Networks of People Living with or with Experience of TB

(DNPET) to 12 districts, and Provincial Networks of People Living with or with Experience of TB (PNPET) in three provinces.

2.4. Improve access to quality and affordable services through functioning community health facilities supported by KHANA

To improve access to the quality services, KHANA believed the roles of community engagement as the demand sides. Strengthen capacity of them are encouraged, 19 training sessions were conducted, equipping 219 people from peer support groups and outreach workers. The most critical factor in supporting individuals affected by TB is access to social protection schemes. Community health workers, including peer support groups and district networks of people living with or having experienced TB, have played a vital role as first responders, advocating for equity cards, ID Poor status, and access to the Health Equity Fund for those facing financial hardships. KHANA also organized capacity-building training sessions for TB community networks, improving their understanding of social protection services and enhancing equitable access to financial support mechanisms. KHANA continues to generate CLM data on a monthly and quarterly basis, sharing insights with the National Tuberculosis Program (NTP), Provincial Health Departments (PHDs), and Operational Districts (ODs). KHANA provided technical assistance to TBpeople Cambodia, enabling them to leverage CLM data effectively as an advocacy tool at national and sub-national levels.

Goal 3: Strengthen the organizational and technical capacity of civil society, including KHANA itself

3.1 Strengthen the capacity of communities, partners, and other stakeholders

Training on health care for survivors of Gender-based Violence (GBV)

KHANA, under USAID/EQHA II project, with technical support from National Maternal and Child Health Center (NMCHC) supported Kampong Chhnang PHD conduct cascade training to 24 healthcare providers from referral hospitals, selected health center, and provincial women's affairs on health care for survivors of GBV in their province, which was held on 20–23 August 2024.

Electronic TB management information system

KHANA continued to provide technical assistance to CENAT on the system customization and building capacity to institutionalize TB-MIS down to the health center level. In 2024, a total of 156 points of care, including 145 HCs, 8 RHs and 3 PRHs, under 9 remaining ODs (1 OD in Ratanakiri, 3 ODs in Kampong Thom province, 2 ODs in Kampong Chhnang, and 3 ODs in Battambang province), were institutionalized within the provision of Tablets, training and internet credits. The trainings enabled HFs' staff to directly enter data of presumptive TB into TB-MIS and shift the responsibility of OD TB supervisors from entering data to better monitoring the entry uptake and data quality check. The drill-down training session includes recording and reporting presumptive TB cases, evaluating tested presumptive positive TB cases, immediately starting treatment for confirmed TB, and tracking treatment outcomes.



PHD TB-Supervisor in Kampong Thom province delivering a tablet, supported by USAID, to health center staff for entry of TB data – March 18, 2024

With technical assistance from the USAID-funded COMMIT project since 2020, KHANA has expanded the utilization of TB-MIS to a total of 529 health facilities across 44 ODs, including 17 ODs under the GF-supported sites. In addition, a new laboratory module allowing lab staff to enter test results directly into TB-MIS has been piloted and implemented in 4 COMMIT-supported ODs (Koh Soutin, and Prey Chhor of Kampong Cham province, and Baray-Santuk, and Staung of Kampong Thom province) since October 2024.

To ensure smooth utilization and data entry into the system, TB-MIS maintained a helpdesk team for day-to-day operations providing technical support remotely through various means including direct communication via phone call, and/or submitting their feedback in both the ten telegram groups by each OD, the Telegram Group ‘Cambodia TB MIS’ and 8 more Telegram Group from 8 session training. All user feedback and issues were collected and considered for the system’s improvement. Common feedback from users included (1) transfer-in; (2) re-open case; (3) case duplicate; (4) treatment overdue without outcome, and (5) a common issue of forgetting a password. The TB-MIS team regularly updated metadata by adding/removing health facilities information, regimen lists, and other field values in the system. In addition, the team continued to customize the TB-MIS platform according to user feedback, which was collected from supervision visits, trainings, meetings, or telegram groups.

USAID TB MIND Asia Project Milestone and Achievements

This three-year (2023-2026) pilot project funded by USAID Washington through Yayasan Project Hope to investigate the potential of integrating Mental Health Services into the National TB Program across three Asian countries such as Cambodia, Indonesia and The Philippines. High prevalence of Mental Health conditions among People with Tuberculosis which are key factors affecting the quality of lives, treatment adherence, and global and national targets.

In Cambodia, KHANA collaborated with both national programs such as the National Center for Tuberculosis and Leprosy Control (CENAT) and the Department of Mental Health and Substance Abuse (DMHSA) of Ministry of Health Cambodia implemented this project across six health facilities in two different provinces. These health facilities include Saang Referral Hospital, Saang Phnom and Talun Health Centers located at Saang OD in Kandal Province; Dambae Referral Hospital, Sedasenchey and Chong Cheach Health Centers located at Dambae OD in Thboung Khmum Province.



USAID TB MIND Asia team from Cambodia Indonesia and The Philippines attended Workshop on Y3-Y4 Annual Workplan and Budget Development from 24 to 27 September 2024 in Bogor City, Indonesia.

During conducting the project kick-off at each OD in June 2024, KHANA and both national programs established the Supervision and Technical Support Mechanism including local, sub-national and national levels at each implementing district to foster a more effective and sustainable approach among the community.

In 30 August 2024, after ten months of implementation, KHANA and two national programs (DMHSA and CENAT) organized the USAID TB MIND Asia Multistakeholder Coordination Meeting “Annual Review, Reflection and Replanning” by inviting key stakeholders from national, sub-national and community levels included 57 participants (16 females) to showcase project baseline result, review the project’s achievements, challenges, and lessons learned, finalize training modules and models for healthcare providers (HCPs) and community health workers (CHWs), discuss and plan for next fiscal year, and revise draft of Standard Operation Procedure for TB and MH integration.

After all training modules, models and curriculum for HCPs and CHWs were endorsed by the national programs in August 2024, KHANA and partners organized the training sessions for HCPs and CHWs prior the pilot implementation. The participants included health program managers, TB supervisors, Mental Health focal persons, physicians, nurses, members of DNPET, seeds, VHSGs, field program officers and lay counsellors attended by 66 total participants (24 females).

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Q4 2023

PREPARATION STAGE

1. Conducted Landscape Assessment; 2. Disseminated the result; 3. Launched project at six selected health facilities.



2024

IMPLEMENTATION STAGE I

4. Baseline Data; 5. Conducted consultation meetings with all stakeholders on TB-MH integration plan.

2024

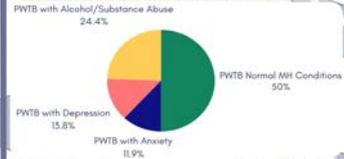
IMPLEMENTATION STAGE I

6. Established Supportive Supervision/Technical Support Mechanism at District and National Level; 7. Developed SOP/Technical guidance; 8. Trained Healthcare workers & Community Health Workers on TB-MH integration; 9. Screened MH conditions among People With TB.



Until February 2025

153 cases of All Forms TB were screened for mental health conditions. Each case with MH conditions received psychological counseling and psychoeducation.



10. Both national programs conducted Quarter Monitoring Meeting & Supervision/Technical Support for HCWs; 11. Conducted Community Support/Home Visit for PWTB with Mental Health Conditions.



Poster on USAID TB MIND Asia Project Milestone and Achievement until February 2025
Poster Credit @Chandara LIM

Under the leadership of DMHSA and CENAT, KHANA completed the Standard Operation Procedure/Technical Guideline on the Integration of Mental Health Service and Drug Abuse into the Tuberculosis Program at the end of 2024. This achievement was the result of a participatory process, involving extensive consultations, discussions, and collaboration across various sectors. This SOP/guideline will serve as a critical resource for all healthcare providers, policymakers, and community organizations working to address the intersection of TB, mental health, and substance abuse. Their successful implementation will require continued collaboration, dedication, and support at all levels of the health system.

The pilot began screening from October 2024 until February 2025. Among 153 All Forms TB cases, the results were 50% of PWTB had no mental health conditions, 11.9% of PWTB had anxiety, 13.8% of PWTB had depression, and 24.4% of PWTB had harmful risks with alcohol and substance consumptions.

Success story 5th: A Retired Teacher's Commitment to TB Support – Mrs. Ban Sokhorn's Story



Mrs. Ban Sokhorn is sharing her experiences with TB to Healthcare Providers during the Quarterly Monitoring Meeting in December 2024 -Photo Credit @Chandara LIM

Mrs. Ban Sokhorn, aged 78-year-old, is a retired primary school teacher who now volunteers herself as a member of Saang District Network of People Affected by TB. With her lifelong experience in caring for others, she has taken on a meaningful new chapter in her life—supporting individuals experiencing tuberculosis (TB), both physical and mental well-beings. After retiring from her teaching career, Mrs. Ban Sokhorn felt a strong desire to stay connected to her community and contribute to meaningful causes. Witnessing the struggles of TB patients in her area—many of whom faced stigma, emotional isolation, and challenges in adherence on treatment—she realized that she could play a role in filling this gap.

Since becoming a member of the Network of People Affected by TB, Mrs. Ban Sokhorn has dedicated her time and energy to supporting TB patients in her district. Her work includes providing psychosocial support to TB patients and their families to reduce anxiety, fear, and the emotional toll of living with TB, conducting home visits to follow up with patients, checking on their well-being, and making sure they continue taking their TB medication as prescribed, encouraging treatment adherence by building trust and educating patients about the importance of completing their medication regimen, connecting patients with needed services, such as transportation to health facilities or referrals for further support, and mobilize financial support from the “Community Charity Box” to provide additional funding for transportation cost, and nutritional support.

Her presence during home visits is often comforting to patients. With her calm demeanor and natural ability to communicate, she offers encouragement and reassurance, especially to those feeling isolated or hopeless.

Thanks to her efforts, many TB patients in her area have reported feeling more supported and less alone during their treatment journey. Adherence rates have improved, and several patients have even returned to normal life activities with renewed hope. She urged the government and other stakeholders to sensitize TB into community, and mobilize more resources to support all the volunteers, TB patients, and vulnerable population.

Mrs. Ban Sokhorn remains an inspiring figure in her community. From teacher to caregiver, she continues to make a lasting difference—proving that even after retirement, one’s dedication to helping others can have powerful, life-changing effects.



Mrs. Ban Sokhorn, KHANA, OD TB Supervisor, OD MH Focal Person, DMHSA and CENAT are conducting Home Visit to Patients Living with TB at Saang OD, Kandal Province on 24 January 2025 – Photo Credit @Chandara LIM

3.2 Enhance the utilization of technical innovations for emerging needs

KHANA organized a workshop titled “Roundtable Discussion on the Critical Roles of Journalists in the TB Response” on September 16, 2024, in Phnom Penh. The event aimed to further enhance the understanding of tuberculosis (TB) among journalists and celebrities while encouraging their active participation in TB awareness, advocacy, and resource mobilization. It addressed essential topics, including basic TB knowledge, best practices, TB related stigma, and other critical issues. Additionally, the workshop sought to disseminate the political declaration for the post-2023 UNHLM-TB among journalists and encourage their active participation in TB-related initiatives.

The discussion brought together 72 participants from 53 media outlets, civil society organizations (CSOs), and the National TB Program. During the meeting, KHANA presented the Stop TB Cambodia's Strategic Plan for 2024-2027. In partnership with the National TB Program and the Club of Cambodian Journalists, KHANA organized the roundtable discussion to enhance awareness and encourage journalists’ to actively participate in the national TB response.

Promote a country’s multi-sectoral response to TB and UN high level meeting engagement:

To support the National TB Program (NTP) in implementing Multi-Accountability Frameworks for TB, KHANA, as the host of Stop TB Cambodia and WHO Cambodia, participated in a consultative workshop. This workshop brought together stakeholders including government ministries, healthcare providers, civil society organizations (CSOs), and individuals affected by TB. The purpose of the workshop was to review and finalize the draft Multi Accountability Framework (MAF) for TB prevention and care, with the aim of achieving the country’s goal of

ending TB by 2030. The consultative workshop brought together 98 participants from various sectors and stakeholders to review the WHO's MAF-TB baseline assessment results and discuss the terms of reference of the MAF-TB's structures, including leadership compositions, and the MAF-TB framework which cover the strategic areas, scope of collaboration, and measurable outcomes and milestones.

The MAF-TB framework was developed as a guiding tool to support the national TB program in collaborating, mobilizing and partnering with other sectors or ministries. This guiding tool covers 23 government agencies by illustrating their scopes of work, roles and responsibilities, M&E mechanisms, and adequate resource allocation to support their suggested activities in response to TB in their respective institutions.

3.3 Increase the scale and scope of the KHANA Research Center's technical excellence

Presentations to regional and international conferences

KHANA submitted several high-quality abstracts based on project implementations and research components to regional and international conferences, while achieving an impressive acceptance rate. KHANA delegates presented two oral and three poster presentations, based on the COMMIT cohort study and operational research on TB prevention. These presentations were showcased at the 9th Asia Pacific Region Conference of the International Union Against Tuberculosis and Lung Disease (APRC 2024), held from April 26 to April 29, 2024, at the Taipei International Convention Center in Taipei, Taiwan. Additionally, delegates from KHANA presented two poster and three e-poster presentations at the World Conference on Lung Health 2024. They shared findings and lessons learned from the project's operational research and program implementation. The conference occurred in Bali, Indonesia, from November 12 to 16, 2024. During their visit to Bali, KHANA delegates and two representatives from TB-people Cambodia engaged with Community Connect, and relevant networking forums while participating in several essential sessions. This engagement allowed them to gather valuable feedback, lessons learned and identification of best practices. The insights gained were utilized to inform policy, enhance program design and implementation.

In 2024, KHANA reinforced its commitment to a rights-based, community-centered TB response in Cambodia through the Community, Rights, and Gender (CRG) Assessment, the TB Legal and Human Rights Scorecard, and the TB KVP Size Estimation. The CRG Assessment, conducted with the National Center for Tuberculosis and Leprosy Control (CENAT), aimed to address barriers faced by Key Vulnerable Populations (KVPs) in accessing TB services, identifying gaps in care, particularly among marginalized groups like migrants, factory workers, prisoners, and people living with HIV (PLHIV). The TB KVP Inception Meeting refined the priority list of affected groups, reinforcing a data-driven, equity-focused approach. Key recommendations included expanding TB education, decentralizing service delivery, strengthening legal protections, and integrating TB-related costs into social protection schemes. The TB Legal and Human Rights Scorecard, also led by KHANA with CENAT, assessed legal barriers and revealed a low legal support score of 30.11%, highlighting the need for reform. The dissemination of findings underscored the need for legal reforms, improved social protection, and greater legal literacy. These initiatives have empowered affected communities, advanced civil society involvement, and promoted evidence-based policy changes, supporting Cambodia's goal of ending TB by 2030.

3.4 Increase the knowledge and expertise of KHANA’s staff in broader areas of health and development.



KHANA delegates attended and presented the research findings at the Asia-Pacific Chemsex Symposium 2024, held at Bangkok. The symposium aimed to strengthen and increase the impact and effectiveness of chemsex-related interventions, programmes, health services, and policy changes

Goal 4: Promote an enabling environment for KPs, LGBTI, TB patients, and other vulnerable groups

4.1 Promote an enabling environment for KPs, LGBTI, TB patients, and other vulnerable groups

World TB Day Commemorate 2024



Celebrating World TB Day 2024, organized at Kuhak Norkor pagoda, Taing Kok district in Kampong Thom province – March 22, 2024

students, TB affected communities, and community members – with a total of 600 participants. KHANA and its partnering NGOs collaborated with key stakeholders at the sub-national level to commemorate this event at health facilities across 27 operational districts. This initiative aimed to raise awareness, foster partnerships, and promote social movements to fully and collectively support TB efforts, reflecting the theme “**Yes! We Can End TB!**”.

To mobilize the support of policymakers for TB response at the national level and sub-national level, KHANA supported CENAT to organize the World TB Day event 2024 at Kuhak Norkor Pagoda, Taing Kok District in Kampong Thom Province, under the theme “Yes! We Can End TB!”. This monumental event was presided over by **H.E. Professor Chheang Ra, Minister of Health**, and attended by government institution officials, local and health authorities, celebrities, journalists, USAID, WHO, NGO partners and stakeholders, religious groups,

World AIDS Day 2024



treatment at health facilities.

KHANA and IP staff have joined the World AIDS Day event in Phnom Penh on 1st December 2024 organized by The National AIDS Authority.

The purpose of joining the event was to share messages and provide HIV education & testing to key populations & general people who joined the event. The install booth displayed posters on HIV & AIDS education, HIVST, & PrEP products. We provided education to 978 people, tested HIV & syphilis on 53 people, and found 1 case of HIV & 1 case of syphilis. Those were referred for

4.2 Increase public awareness of sexual orientation and gender identity (SOGI) and gender-based violence (GBV)

With Challenge Facility for Civil Society (CFCS) Round 12 and TBpeople Cambodia, funded by the Stop TB Partnership, KHANA significantly expanded its network in 2024, reaching 4,121 members, 207 PSGs, 11 DNPETs, and 3 PNPETs. This growth strengthened community engagement and TB response efforts, enabling better integration of TB initiatives into local health systems.

On September 2, 2024, KHANA conducted a capacity-building session on Protection from Sexual Exploitation, Abuse, and Harassment (PSEAH) for the TB community network in Kampong Cham province. The session brought together 26 participants, including representatives from the District and Provincial Networks of People Affected by TB (DNPET & PNPET), TBpeople Cambodia, and the CCC Secretariat. The training aimed to (1) build understanding and awareness of protection from sexual exploitation, abuse, and harassment (PSEAH) among the TB community networks (2) introduce community-based PSEAH tools, such as frameworks and promotional materials (3) and to develop an action plan to disseminate the PSEAH among their respective TB community members. As a result, participants gained a solid understanding of PSEAH. They committed to incorporating this knowledge into their community outreach efforts by using the provided posters and materials. This initiative raised awareness among more than 3,000 individuals and distributed 8,000 informational leaflets to further amplify the key messages.

4.3 Improve and promote sexual and reproductive health and rights (SRHR) for KPs, LGBTI, and other vulnerable groups

To address needs of the KP and LGBTI and other vulnerable group, KHANA led the GESI assessment at the community level to understand barriers to and gaps in availability, accessibility, acceptability, and quality of healthcare services for key and vulnerable populations in Cambodia, as well as barriers and facilitators to providing care. This study aimed to inform recommendations for policy, advocacy, and programming, alongside the development of a communication tool intended to promote accessibility to healthcare services among GESI-related populations.

Key results revealed the positive perceptions of the community regarding the health services, though some gaps remain, especially around the way people are treated verbally. This was from service providers that are overworked or say unkind statements about the group. A set of recommendations for the Ministry of Health and other Health Service Providers are provided to promote GESI in the health response:

- Provide tools and resources (and support implementation) to conduct evaluation of health care staff on friendly and inclusive care to guide areas for improvements.
- Provide training for health care professionals on GESI practices, specifically on ways to be welcoming to different groups of people, and on using positive attitudes.
- Disseminate information to the public in a variety of ways to be sure that people are reached with special attention to survivors of gender-based violence, indigenous people, ethnic minorities, and people with disabilities. Promote awareness of the benefits and available services in the health system.

- Ensure health care information is available in various languages that are spoken in the community.

4.4 Promote engagement of women, KPs, LGBTI, TB patients, and other vulnerable groups in program development, policy dialogue, and leadership within KHANA, with IP, and at the national level

Success Story 6th: Finding undetected TB among indigenous people through a potential Seed of the Snowball model in Ratanakiri province

In October 2022, four more under-served ODs were added: Bar Kaev in Ratanakiri, Koh Soutin in Kampong Cham, Prek Pnov in Phnom Penh, and Srae Ambel in Koh Kong. COMMIT project was further expanded in January 2024 by 13 additional ODs: Banlung in Ratanakiri; Thboung Khmum and Dambae in Thboung Khmum; Cheung Prey and Prey Chhor in Kampong Cham; Kampong Thom, Staung, and Baray-Santuk in Kampong Thom; Kampong Chhnang and Boribo in Kampong Chhnang; and Sangkae, Thmar Kol, and Sampov Loun in Battambang.



Han is sitting at his home, next to a man who is the village chief on the left and two other children on the right with standing Lay Counsellor, all of whom are TB affected indigenous people – Photo credit @Saren MENH

In 2023, the COMMIT project in Bar Kaev OD, a location with under-served districts and limited resources (human, material, and financial) aimed to strengthen TB case notification, prevention, care, support, and treatment. As a result of this initiative, the health facility detected 275 cases of TB, with the majority being bacteriologically confirmed pulmonary TB. This area is mainly populated by the indigenous highland Khmer Loeu people, including the Tampuan, Jarai, Kreung, Brou, Kachok, and Kavet groups, with each speaking different languages. This achievement demonstrates the project’s significant contribution to identifying missing TB cases, especially among

indigenous populations, by supporting all health facilities within the OD’s coverage to provide TB treatment services.

Nhang Health Center (HC) is one of twelve health centers in Bar Kaev OD that offers TB treatment through the support of the COMMIT project and detected a total of 28 TB cases in 2023. Of those newly detected TB cases, some were influential local authority figures and health volunteers, including the village chief, vice-chief, and a traditional birth attendant (TBA) - see the project Snapshot “FINDING MISSING TB CASES AMONG INDIGENOUS PEOPLE LIVING IN UNDER-SERVED AND REMOTE AREAS IN CAMBODIA”, annexed in the COMMIT Year 4 Annual Report. The village chief has now become a TB Peer Support Group leader following his success in TB treatment. His role contributes to the success of TB treatment among his peers – 86% (24 out of 28) of the notified TB cases have adhered to TB treatment until completion.

Siev Han's TB was also detected through the support of COMMIT in Nhang HC in 2023. Due to mistrust of public services and insufficient TB services, he had spent around two thousand US dollars on private health care and sacrificed three buffalo to his ancestors for support with his illness. After COMMIT started to support the area, Han was delighted to finally get the correct diagnosis and treatment. Further, he developed increased trust in public services following his successful TB treatment. Han has now become a potential Seed, who volunteers to educate the community on TB, screen presumptive TB patients, and refer them to public health facilities for further diagnosis. Within the first 6 months of the year, 12 individuals were identified with presumptive TB in Han's village. COMMIT enabled him to support and notify two people diagnosed with TB, ensuring they received necessary care. Han said, "I would like to thank USAID, through KHANA, for their support with TB services for my community, services that have enabled me to get diagnosed and treated in time."

Annexes

KHANA's Priority for 2025

The 2025 will be year two of KHANA Strategic Plan 2024-30 (KSP30), ongoing relevance of the goal and strategies will be maintained.

Organizational key priorities

- Continue year two of HIV/AIDS Prevention Project, GFATM 2024-2026
- Continue year one of COMMIT 2 Project under USAID-funded project, 2024-2028
- Implement year one of SHIFT-TB project, Expertise France/L'Initiative (2025-2028)
- Implement year one of SAPPHIRE project, DFAT (2025-2027)
- Implement year one of Post-TB Care project, NIHR (2025-2028)
- Continue year two of EQHA II project, USAID (2024-2028)
- Continue year three of TB MIND Asia project, USAID/DC through YPH (2023-2025)
- Work with multiple institutions to roll out KHANA's technical innovations and research
- Promote technical assistance, capacity building development and resource mobilization
- Strengthen partnership with international agencies, national, provincial, local partners, and stakeholders
- Maintain the connection as a strategic partner of Frontlines AIDS

Key priority by goals

KHANA maintained the key activities across strategic goal

- Goal 1
 - Implement HIV/AIDS Prevention Project
 - Implement COMMIT 2 Project
 - Implement SHIFT-TB project
 - Implement SAPPHIRE project
 - Implement Post-TB Care project
 - Implement EQHA II project
 - Implement TB MIND Asia project
- Goal 2
 - Strengthen the roles of TB and HIV affected communities through training, capacity building, mentoring, and coaching
 - Implement non-communicable disease, injury poverty network (NCDI) and AMR
 - Develop, refine, adapt, and implement the new innovative strategies, guidelines, and tools
- Goal 3
 - Implement REAL-MOXY project in Cambodia
 - Publish of the program impact of the COMMIT
 - Publish CAD program impact and cost effectiveness study
 - Implement Pot-TB Care cohort
 - Implement IGRA study
 - Implement FEW studies regarding to media portrayal and alcohol reduction at workplace
- Goal 4

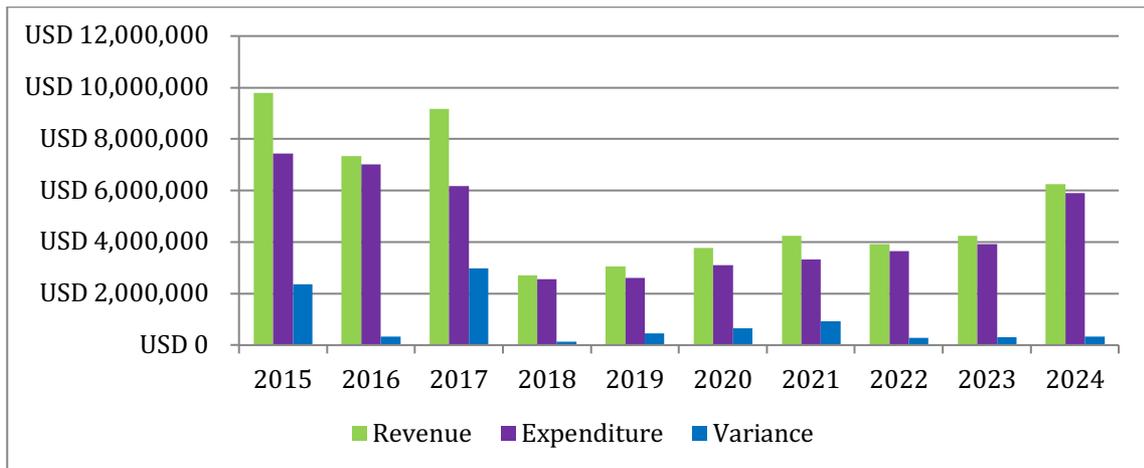
- Continue to focus on empowering communities of HIV, TB, and other health-affected communities to ensure that their rights are respected and that communities are meaningfully engaged in service delivery, evaluation, policy development, and implementation.
- Continue to work closely with a government agency, international partners, networks, and key stakeholders to support an enabling environment for PLHIV, PLWTB, and KP for health, treatment, and social services.

Financial information 2024

Summary 2024 financial information

Description	2024
Revenue	USD 6,246,673
Expenditure	USD 5,913,802
Variance	USD 332,871
Burning Rate	95%

KHANA financial records from 2015-2024



Leadership and Staffing

KHANA board 2024

1.	Oum Sopheap	Chair
2.	Phon Sampha	Treasurer
3.	Bou Molika	Member
4.	Ek Toeur	Member
5.	Lim Sereyroth	Member

KHANA STAFF CONTACT LIST

No	NAME	SEX	POSITION TITLE
1	Choub Sok Chamreun	M	Executive Director
KHANA CENTER for POPULATION HEALTH RESEARCH (KHANA-CPHR)			
2	Yi Siyan	M	Research Director
3	Tuot Sovannary	M	Research Manager
4	Chhoun Pheak	M	GESI and Research Specialist
5	Pall Chamroen	M	Research Fellow
6	Chhit Thy	M	Mental Health and Social Support Specialist
7	Taing Hangleang	M	TB Specialist
8	Lim Chandara	M	TB Specialist
9	Tep Sovanvorleak	F	Research Officer
10	Phoung Sodany	F	Research Assistant
GFATM PROJECT (GF-FR)			
11	Seng Por Sroun	M	Project Manager
12	Oeur Sadat	M	Technical Officer for HIV Online & Social Media Coordination
13	Saman Dimara	M	M&E Officer
14	Eang Songheang	M	Communication Officer
15	Tham Saorun	F	Program Officer
USAID EQHA II			
16	Heng Kiry	M	MEL Coordinator
17	Phal Sophat	M	GESI Officer
18	Leap Sreyluch	F	GESI Officer
COMMIT Project			
19	Menh Saren	M	PMEL Manager
20	Ly Chansophal	M	Senior Technical Officer (Active Case Finding)
21	Ea Rithy	M	Senior Program Officer
22	Prum Dalish	F	Senior Policy and Advocacy Officer
23	Ly Tepy	F	Grant Management Officer

No	NAME	SEX	POSITION TITLE
24	Choun Sokhaley	F	Grant Management Officer
25	Ong Seyha	M	M&E Officer
26	Vorn Rany	F	M&E Officer
27	Penh Vannat	F	Field Officer - OD Sa Ang
28	Chhung Mengheang	M	Field Assistant - OD Sa Ang
29	Man Seyla	F	Field Officer - OD Leuk Dek
30	Yan Phanna	M	Field Assistant - OD Leuk Dek
31	Mok Dara	M	Field Officer - OD Ou Raing Euv
32	Soun Ratana	M	Field Assistant - OD Ou Raing Euv
33	Keo Sereyodam	M	Field Officer - OD Por Sen chey
34	Khem Sokhoeun	F	Field Assistant - OD Por Sen chey
35	Lay Sinoth	F	Field Officer - OD Sen Sok
36	Seng Sreyppy	F	Field Assistant - OD Sen Sok
37	Neng Ratha	M	Field Officer - OD Srae Ambel
38	Keo Bunma	M	Field Officer - OD Bar Kaev
39	Chea Seth	F	Field Officer - OD Koh Soutin
40	Teng Sivmey	F	Field Officer - OD Praek Pnov
41	Lap Seanglean	M	Field Officer - OD Sangkae
42	Yim Bun Sorn	M	Field Officer - OD Thma Koul
43	Uk Sokchea	M	Field Officer - OD Stoung
44	It Titya	M	Field Officer - OD Baray Santuk
45	Meng Sophara	M	Field Officer - OD Banlung
46	Sun Linh	M	Field Officer - OD Kompong Thom
47	Houn Sokunthea	F	Field Officer - OD Kompong Chhnang
48	Sar Sophonnarith	M	Field Officer - OD Boribo
	TB- MIS Unit		
49	Prak Chalna	M	Manager for TB-MIS
50	Khun Kimsonitey	F	TB-MIS Officer
51	Moeu Phearom	M	Database Management Officer
CFCS and Stop TB Partnership			
52	Phorng Chanthorn	M	Manager - Partnership, Advocacy and Resource Mobilization
53	Chhun Roern	M	Program Officer
54	Chhoeurn Chhunna	M	Programme Coordinator
55	Meas Pisey	F	Program Officer: COOPER
56	Chim Putheara	F	Community Engagement Officer
57	Leng Molina	F	Technical Officer: Partnership and Coordination
58	Va Sinuon	M	Technical Officer
59	Pum Cheatponnya	F	Communication and Campaign Assistant
60	Yann Leakhena	F	Project Assistant

No	NAME	SEX	POSITION TITLE
KHANA SUPPORT SERVICE CENTER			
61	Leng Kalyan	F	Senior Manager: KHANA Support Service Center
	<u>Information & Technology Unit</u>		
62	Kong Veasna	M	IT Specialist
	<u>Finance Unit</u>		
63	Kuch Maryna	F	Corporate Finance Coordinator
64	Ouk Chan Makara	F	Finance Officer
65	Yos Bunlida	F	Finance Assistant
	<u>HR, Administration and Procurement Unit</u>		
66	Pen Sambath	M	Senior Admin, Procurement and HR Officer
67	Sam Manet	F	Admin and HR Assistant
68	Keo Samring	M	General Admin Assistant
69	Tem Sodane	F	Admin and Procurement Assistant

List of Implementing Partners 2024

Abbreviation	Full name	Address
CATA	Cambodia Anti-Tuberculo-sis Association	c/o CENAT, st. 278/95, Sangkat Beoung Keng Kang II, Phnom Penh, Cambodia
CHC	Cambodian Health Committee	#297, St 28 Krusa (72P), Rongchak Village, Sangkat Koh Khleang, Khan Sen Sok, Phnom Penh, Cambodia
CWPD	Cambodian Women for Peace and Development	# 128D9-D10, Str. Samdech Sothearos, Sangkat Tonle Bassac, Khan Chamcar Morn, Phnom Penh, Cambodia
HSD	Health and Social Development	VTRUST Building # 10 (4th, floor), Street 109, Mittapheap Sangkat, Prampir Meakkakra Khan, Phnom Penh Capital, Cambodia
MHC	Men Health Cambodia	House # 12, Street 490, Sangkat Phsar Doem Thkov, Khan Chamkar Morn, Phnom Penh

KHANA's publications in 2024

No.	Authors	Title	Journal	Year	Weblink
1	Mohsen Naghavi, Kanyin Liane Ong, Amirali Aali, Hazim S Ababneh, Yohannes Habtegiorgis Abate, Cristiana Abbafati, Rouzbeh Abbasgholizadeh, Mohammadreza Abbasian, Siyan Yi, et al.	Global burden and strength of evidence for 88 risk factors in 204 countries and 811 subnational locations, 1990–2021: a systematic analysis for the Global Burden of Disease Study 2021	The Lancet	2024	https://www.thelancet.com/journals/lanct/article/PIIS0140-6736(24)00367-2/fulltext
2	Jorge R Ledesma, Jianing Ma, Meixin Zhang, Ann V L Basting, Huong Thi Chu, Avina Vongpradith, Siyan Yi, et al.	Global, regional, and national age-specific progress towards the 2020 milestones of the WHO End TB Strategy: a systematic analysis for the Global Burden of Disease Study 2021	The Lancet	2024	https://www.thelancet.com/journals/laninf/article/PIIS1473-3099(24)00007-0/fulltext
3	Jaimie D Steinmetz, Katrin Maria Seeher, Noline Schiess, Emma Nichols, Bochen Cao, Chiara Servili, Vanessa Cavallera, Ewerton Cousin, Hailey Hagins, Madeline E Moberg, Siyan Yi, et al.	Global, regional, and national burden of disorders affecting the nervous system, 1990–2021: a systematic analysis for the Global Burden of Disease Study 2021	The Lancet	2024	https://www.thelancet.com/journals/laneur/article/PIIS1474-4422(24)00038-3/fulltext
4	David Alland, Marcel A Behr, Busisiwe B Beko, Erlina Burhan, Gavin Churchyard, Frank Cobelens, Justin T Denholm, Ryan Dinkele, Jerrold J Ellner, Razia Fatima, Kate A Haigh, Siyan Yi, et al.	Classification of early tuberculosis states to guide research for improved care and prevention: an international Delphi consensus exercise	The Lancet	2024	https://www.thelancet.com/journals/lanres/article/PIIS2213-2600(24)00028-6/abstract
5	Haley Comfort, Theresa A McHugh, Austin E Schumacher, Ashley Harris, Erin A May, Katherine R Paulson, William M	Global, regional, and national stillbirths at 20 weeks' gestation or longer in 204 countries and territories, 1990–2021: findings from the	The Lancet	2024	https://www.thelancet.com/journals/lanct/article/PIIS0140-

	Gardner, John E Fuller, Meghan E Frisch, Heather Jean Taylor, Siyan Yi, et al.	Global Burden of Disease Study 2021			6736(24)019 25-1/fulltext
6	Austin Carter, Meixin Zhang, Khai Hoan Tram, Magdalene K Walters, Deepa Jahagirdar, Edmond D Brewer, Amanda Novotney, Dylan Lasher, Emmanuel A Mpolya, Avina Vongpradith, Siyan Yi, et al.	Global, regional, and national burden of HIV/AIDS, 1990-2021, and forecasts to 2050, for 204 countries and territories: the Global Burden of Disease Study 2021	The Lancet	2024	https://www .thelancet.co m/journals/l anhiv/article /PIIS2352- 3018(24)002 12-1/fulltext
7	Michael Brauer, Gregory A Roth, Aleksandr Y Aravkin, Peng Zheng, Kalkidan Hassen Abate, Yohannes Habtegiorgis Abate, Cristiana Abbafati, Rouzbeh Abbasgholizadeh, Siyan Yi, et al.	Global burden and strength of evidence for 88 risk factors in 204 countries and 811 subnational locations, 1990-2021: a systematic analysis for the Global Burden of Disease Study 2021	The Lancet	2024	https://www .thelancet.co m/journals/l ancet/article /PIIS0140- 6736(24)009 33-4/fulltext
8	Valery L Feigin, Melsew Dagne Abate, Yohannes Habtegiorgis Abate, Samar Abd ElHafeez, Foad Abd-Allah, Ahmed Abdelalim, Atef Abdelkader, Michael Abdelmasseh, Siyan Yi, et al.	Global, regional, and national burden of stroke and its risk factors, 1990-2021: a systematic analysis for the Global Burden of Disease Study 2021	The Lancet	2024	https://www .thelancet.co m/journals/l aneur/article /PIIS1474- 4422(24)003 69-7/fulltext
9	Marianne Ravn Knop, Michiko Nagashima- Hayashi, Ruixi Lin, Chan Hang Saing, Mengieng Ung, Sreymom Oy, Esabelle Lo Yan Yam, Marina Zahari, Siyan Yi	Impact of mHealth interventions on maternal, newborn, and child health from conception to 24 months postpartum in low- and middle- income countries: a systematic review	BMC Medicine	2024	https://bmc medicine.bio medcentral.c om/articles/ 10.1186/s12 916-024- 03417-9
10	Siyan Yi, Xin Guo, Wenjing Lou, Shaoming Mao,	Structure, Regulation, and Significance of Cyanobacterial and Chloroplast Adenosine	MDPI	2024	https://www .mdpi.com/2 076-

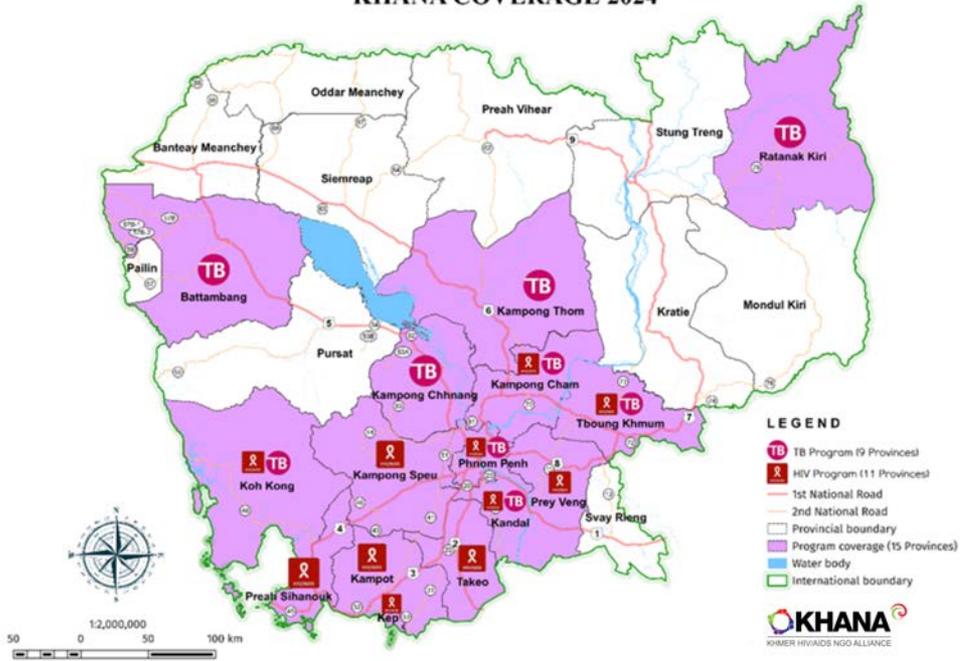
	Guodong Luan, Xuefeng Lu	Triphosphate Synthase in the Adaptability of Oxygenic Photosynthetic Organisms			2607/12/5/940
11	Sreymom Oy, Chan Hang Saing, Sokunthea Yem, Pheak Chhoun, Sovannary Tuot, Siyan Yi	Post-Gender-Based Violence Services Utilization Among Female Entertainment Workers in Cambodia: A Cross-Sectional Study	Sage Journals	2024	https://journals.sagepub.com/doi/10.1177/10778012221147911?url_ver=Z39.88-2003&rfr_id=ori:rid:crossref.org&rfr_dat=cr_pub%20pubmed
12	Sok King Ong, Rei Haruyama, Cheng Har Yip, Tran Thu Ngan, Jingmei Li, Daphne Lai, Yawei Zhang, Siyan Yi, et al.	Feasibility of monitoring Global Breast Cancer Initiative Framework key performance indicators in 21 Asian National Cancer Centers Alliance member countries	The Lancet	2024	https://www.thelancet.com/journals/clinm/article/PIIS2589-5370(23)00542-4/fulltext
13	Siyan Yi, Esabelle Lo Yan Yam, Kochukoshy Cheruvettolil, Eleni Linos, Anshika Gupta, Latha Palaniappan, Nitya Rajeshuni, Kiran Gopal Vaska, Kevin Schulman, Karen N Eggleston	Perspectives of Digital Health Innovations in Low- and Middle-Income Health Care Systems From South and Southeast Asia	JMIR	2024	https://www.jmir.org/2024/1/e57612
14	Lo Yan Esabelle Yam, Pheak Chhoun, Di Liang, Jiayan Huang, Siyan Yi	Synergies and dis-synergies between universal health coverage and global health security: A case study of Cambodia	JOGH	2024	https://jogh.org/2024/jogh-14-04218
15	Calida S Chua, John P Anseh, Sovanvorleak Tep, Sreymom Oy, Mengieng Ung, Siyan Yi	Assessing the impact of the COVID-19 pandemic on the mental health of female entertainment workers in Cambodia: a group model building approach	Frontiers	2024	https://www.frontiersin.org/journals/public-health/articles/10.3389/fpubh.2024.1336785/full

16	Anton L V Avanceña, Carinne Brody, Pheak Chhoun, Sovannary Tuot, Siyan Yi	Connecting Female Entertainment Workers in Cambodia to Health Care Services Using mHealth: Economic Evaluation of Mobile Link	JMIR	2024	https://formative.jmir.org/2024/1/e52734
17	Samnang Um, Sovandara Heng, Somany Mok, Pall Chamroen, Heng Sopheab	Determinants of alcohol consumption among men and women aged 15-49 years in Cambodia: Evidence from the Cambodia demographic and health survey 2021-2022	WILEY Online Library	2024	https://onlinelibrary.wiley.com/doi/10.1111/dar.13994

KHANA Coverage 2024



KHANA COVERAGE 2024





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