



# **KHANA STRATEGIC PLAN 2024-2030**

**“Moving toward Universal  
Health Coverage that no  
one is left behind”**

# CONTENT

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ABBREVIATIONS	3
MESSAGE FROM THE CHAIR OF THE BOARD OF DIRECTORS	4
MESSAGES FROM THE EXECUTIVE DIRECTOR, KHANA	5
ABOUT KHANA	6
MOVING FORWARD TO KHANA STRATEGIC PLAN: 2024-2030 (KSP30)	9
<b>Vision, Mission, and Core Values</b>	<b>10</b>
<b>Vision</b>	<b>10</b>
Mission	10
Core Values	10
<b>Goal</b>	<b>11</b>
<b>Goal 1: Objectives, Strategies, and Indicators</b>	<b>11</b>
Goal 2: Objectives, Strategies, and Indicators	13
Goal 3: Objectives, Strategies, and Indicators	14
Goal 4: Objectives, Strategies, and Indicators	16
KHANA'S ON GOING COMMITMENT & FUNDING IN PIPELINES	17
DOCUMENTS REVIEWED	19

# ABBREVIATION

<b>ACT!AP</b>	Advocate Coalition for TB in the Asia Pacific	<b>MoPTC</b>	Ministry of Post and Tele-Communication
<b>AMR</b>	Antimicrobial Resistance	<b>MoSAVY</b>	Ministry of Social Affairs, Veterans and Youth Rehabilitation
<b>ART</b>	Antiretroviral Treatment	<b>MSM</b>	Men Who Have Sex with Men
<b>ARV</b>	Antiretrovirals	<b>MTCT</b>	Mother to Child Transmission
<b>B-IACM</b>	Boosted Integrated Active Case Management	<b>NAA</b>	National AIDS Authority
<b>CAD</b>	Community ARV Delivery	<b>NACD</b>	National Authority for Combating Drugs
<b>CATA</b>	Cambodia Anti-Tuberculosis Association	<b>NCD</b>	Non-Communicable Disease
<b>CAW</b>	Community Action Worker	<b>NCHADS</b>	National Center for HIV/AIDS, Dermatology and STD
<b>CBPCS</b>	Community-based Prevention, Care and Support	<b>NIHA</b>	NUS Initiative to Improve Health in Asia
<b>CDRR</b>	Community Disaster Risk Reduction	<b>NIPH</b>	National Institute of Public Health
<b>CFCS</b>	Challenge Facility for Civil Society	<b>NUS</b>	National University of Singapore
<b>CHC</b>	Cambodian Health Committee	<b>NTP</b>	National Tuberculosis Program
<b>CLM</b>	Community-led Monitoring	<b>NSP</b>	National Strategic Plan
<b>COMMIT</b>	Community Mobilization Initiatives to End Tuberculosis	<b>OW</b>	Outreach worker
<b>CWPD</b>	Cambodian Women for Peace and Development	<b>PLHIV</b>	People Living with HIV
<b>DHIS-2</b>	District Health Information System-2	<b>SAHACA</b>	Sustaining Anti-tuberculosis and Health Action in Cambodia
<b>FEW</b>	Female Entertainment Worker	<b>SDG</b>	Sustainable Development Goals
<b>GBV</b>	Gender-Based Violence	<b>SOGI</b>	Sexual Orientation and Gender Identity
<b>GFATM</b>	Global Fund to Fight AIDS, Tuberculosis and Malaria	<b>SRHR</b>	Sexual and Reproductive Health and Rights
<b>HEF</b>	Health Equity Fund	<b>STI</b>	Sexual Transmitted Infection
<b>HR Asia</b>	Harm Reduction Advocacy in Asia	<b>TasP</b>	Treatment as Prevention
<b>HSD</b>	The Center for Health and Social Development	<b>TB</b>	Tuberculosis
<b>ICT</b>	Information and Communications Technologies	<b>TB-LON</b>	Tuberculosis Local Organization Network
<b>IP</b>	Implementing Partner	<b>TB-MIS</b>	Tuberculosis Management Information System
<b>KP</b>	Key Populations	<b>TG</b>	Transgender Person/People
<b>KSP20</b>	KHANA Strategic Plan: 2016-2020	<b>TPT</b>	TB Preventive Therapy
<b>KSP25</b>	KHANA Strategic Plan: 2021-2025	<b>UHC</b>	Universal Health Coverage
<b>KSSC</b>	KHANA's Support Service Center	<b>UHS</b>	University of Health Science
<b>LC</b>	Lay Counselor	<b>UNAIDS</b>	Joint United Nations Programme on HIV/AIDS
<b>LGBTI</b>	Lesbian, Gay, Bisexual, Transgender & Intersex	<b>UNOPS</b>	United Nations Office for Project Services
<b>LTBI</b>	Latent Tuberculosis Infection	<b>USAID</b>	United States Agency for International Development
<b>MDR-/RR-TB</b>	Management of Multidrug-and Resistant Tuberculosis	<b>WHO</b>	World Health Organization
<b>MHC</b>	Men's Health Cambodia		
<b>MoH</b>	Ministry of Health		



# MESSAGE FROM THE CHAIR OF THE BOARD OF DIRECTORS

**DR. OUM SOPHEAP**

Chair of KHANA's Board of Directors

KHANA has reached the midway point of its current five-year Strategic Plan (2021-2025): KSP25 and, as such, it was time for this strategic plan to be reviewed, evaluated, and redefined to ensure KHANA is heading in the right direction in terms of contributing to the improved health of the most marginalized populations that it serves in Cambodia.

KHANA's Board of Directors discussed the strategic plan review during the 84th Board of Directors meeting in response to the request from the KHANA Management Team for the current KSP25 to extend to KSP30, covering the period from January 1st, 2024, to December 31st, 2030. The time period of the revised strategic plan also fits with the renewal of MoH between KHANA and MoH, which will run from 2024 to 2026. The revision and extension of its strategic plan was necessary to address emerging health issues such as COVID-19 and any other unforeseen future pandemics. However, of the four strategic directions that KHANA has designed and implemented over the past three years, Strategic Directions #1, #3, and #4 are all still relevant and aligned to the country health strategic directions and to Cambodia's Sustainable Development Goals for 2030. Therefore, the only revision of the Strategic Goals needed within the KSP30 was for Goal #2, which was changed slightly to address the above description and rationales. The

objectives, the strategies, and the indicators of success for this strategic goal will also be revised accordingly.

KHANA's Board of Directors were pleased with the revisions and have thus approved the revised strategic plan. We are committed to supporting KHANA and its Management Team to ensure they maintain high professionalism and use science to inform their direction and interventions so that they respond to the needs of the populations they serve. KHANA's relevance, its unique strengths in healthy governance systems, and committed staff are the key assets that will enable it to fulfill its Strategic Plan 2030: KSP30.

KHANA, with its strong focus on and partnership with community-led organizations and community-led services, has long been recognized as the backbone of HIV, TB, and other health responses. The organization has helped to address concerns about rights violations and service failings, proposed improvements, and held health systems accountable. Even in hostile conditions, KHANA excels at providing people-centred services to underserved populations. As such, its work should be invested in more; not undermined.

I look forward to seeing KHANA's continued growth, strength, and financial sustainability and particularly its success in the implementation of its Strategic Plan 2030.

# MESSAGE FROM KHANA'S EXECUTIVE DIRECTOR

**CHOUB SOK CHAMREUN, M.A**

Executive Director, KHANA



Although the COVID-19 pandemic caused a large interruption to and negative impact on KHANA's work, it also taught us how to respond and adapt to ensure our existing program of work continues according to plan and meets its targets. Over the past few years the KHANA Management Team, with strong support from our Board of Directors, has strived to achieve our 2021-2025 strategic plan: KSP25 through funding support from our donors and in strong partnership and collaboration with our stakeholders and implementing, collaborating, and strategic partners. The directions that were set five years ago within KSP25 are still relevant for KHANA to follow to achieve its vision and mission. However, Goal #2 needed to be revised and updated due to the recent pandemic and to plan for both unforeseen future pandemics as well as the frequent climate changes that negatively affect people's health and well-being. KHANA understands the need to address One Health issues and to be strongly involved in pandemic prevention, preparedness, and response (PPPR) to ensure and achieve universal health coverage (UHC) for everyone everywhere, but particularly those who are living with and affected by HIV, tuberculosis, and other HIV-related health issues.

Since 2000 when Cambodia was hard-hit by the COVID-19 pandemic, KHANA, with the support of USAID through EQHA/FHI360 and other unrestricted funds, has been involved in risk communication and community engagement activities and has provided emergency food support to the most at-risk populations within the HIV and AIDS and tuberculosis communities. In addition to this, KHANA has also received financial support from a one-off grant to conduct operational research linked to antimicrobial resistance in collaboration with different departments of the Ministry of Health (MoH). Indeed, antimicrobial resistance (AMR) is a serious threat to global public health. It increases morbidity and mortality and is associated with high economic costs due to its health care burden. Infections with multidrug-resistant (MDR) bacteria also

have substantial implications on clinical and economic outcomes. Moreover, increased indiscriminate use of antibiotics during the COVID-19 pandemic will have increased bacterial resistance and ultimately lead to more deaths. The scale and consequences of AMR support the need for an antimicrobial stewardship program (ASP) to fight resistance and protect global health. KHANA has been involved in this ASP by providing support to MoH departments to build a strong, sustainable, and resilient health system as community-health system strengthening is a critical objective for KHANA. Antimicrobial stewardship (AMS), which is an organizational or system-wide health-care strategy, is designed to promote, improve, monitor, and evaluate the rational use of antimicrobials to preserve their future effectiveness, along with the promotion and protection of public health. ASP has been highly successful in promoting antimicrobials' appropriate use by implementing evidence-based interventions. The "One Health" approach, which is holistic and multisectoral, is also needed to address the rising threat of AMR. AMS practices, principles, and interventions are critical steps towards containing and mitigating AMR. Evidence-based policies must guide the "One Health" approach, vaccination protocols, health professionals' education, and the public's awareness about AMR.

I would like to take this opportunity, on behalf of KHANA's Management Team, to thank our Board of Directors for their approval of the revised KSP30, covering 2024 to 2030, and the amendment to Goal #2 to include PPPR and One Health: "Goal 2: Address climate changes, one health issues, and pandemic prevention, preparedness, and response through building human resilience, development of sustainable community and organizational systems

I look forward to seeing KHANA achieving the KSP30 as set out in its plan.

# ABOUT KHANA



Khmer HIV/AIDS NGO Alliance or KHANA (est.1996) is a partner of Frontline AIDS (formerly known as the International HIV/AIDS Alliance). It is also one of the local non-governmental organizations providing HIV and TB prevention, care, and support services at the community level in Cambodia. KHANA also specializes in the field of integrated sexual and reproductive health, family planning, maternal-child health, viral hepatitis, NCD response, and livelihoods programming.

KHANA was officially registered with and recognized by the Ministry of Interior on April 11th, 2000, as a not for profit, non-governmental organization. Our Vision aspires to a Cambodia that supports community ownership and empowerment, where all people have equitable access to quality HIV, tuberculosis (TB), and other health services, including NCD and HCV, and sustainable development opportunities. Our mission is to continue to be a leader in HIV and tuberculosis (TB) responses, while also addressing wider health and development needs. KHANA has continued to be Cambodia's leading organization in the fight against HIV/AIDS as well as other communicable and non-communicable diseases over the past decade.

In 2022, KHANA and its partners contributed significantly to the prevention of HIV infections and transmission. A total of 55,747 Key Populations (KP) were reached by KHANA's HIV and sexually transmitted infection (STI) prevention efforts. The program conducted 47,196 HIV tests and detected 1,330 new HIV cases, contributing to 61% of the national program. All the confirmed HIV positive cases were enrolled in the antiretroviral therapy (ART) service. In addition, the program detected 1,522 Syphilis cases and 3,825 other STI cases, all of which were referred for counselling and treatment. KHANA has supported IPs in implementing HIV prevention programs, including promoting PrEP services to KPs such as FEWs, MSM and TGs who wish to use PrEP to prevent HIV transmission. In 2022, a total of 209 KPs (157 MSM, 42 TGs, and 10 FEWs) were referred to community PrEP services in Phnom Penh and Preah Sihanouk province. KHANA is also known for Community-based Antiretroviral Delivery (CAD), which was launched in the past year. Under the leadership of NCHADS, KHANA and its partners have collaborated with 10 ART clinics to establish and facilitate 82 ART groups, consisting of 2,049 PLHIV. These groups are



responsible for assisting their members to receive care services, support, and ART drugs. Ultimately, the goal of establishing these groups is both to support their communities and members and to ease the burdens of healthcare providers.

KHANA and its sub-partners have continued to contribute to TB response in Cambodia through implementation of the project titled “Community Mobilization Initiatives to End Tuberculosis (COMMIT)”, which is a five-year project running from 2019 to 2024 and funded by the United States Agency for International Development (USAID) through the TB-LON project. COMMIT aims to improve access to high-quality, person-centered TB, drug resistant-TB, and TB/HIV services. The objective is to strengthen TB service delivery platforms, reduce TB transmission and disease progression, and accelerate TB research and innovations with improved impact on program implementation. Overall, KHANA and its partners have contributed approximately 9% to the National TB Program (NTP), detecting 2,844 TB cases, 33% of which have been bacteriologically confirmed. With the Snowball model using seeds and recruits, KHANA has generated a strong community network to identify presumptive TB cases, which ensures early TB case detection, diagnosis, and treatment. Furthermore, KHANA has worked with its partners to conduct contact tracing and investigation activities, a key intervention within the ending TB strategy. As a result, 2,549 close contacts of pulmonary TB patients were enrolled in TB Preventive Treatment (TPT), of whom 7% were children under 5 years old. Additionally, KHANA and its partners have facilitated the detection of 130 TB cases among diabetic patients, 129 MDR/RR-TB cases, and maintained activities at all sites across the country.

KHANA has meaningfully engaged various key stakeholders such as CENAT, development partners, NGO partners, relevant line ministries, journalists, celebrities, and health and local authorities through various channels to increase support and resource mobilization. In marking World TB Day, KHANA engaged over 500 participants to commemorate the event, including members of the senate, the provincial governor, representatives from the national TB program, policymakers, journalists, and CSOs working on TB. For meaningful engagement of people living with and experiencing TB, and engagement at community, sub-national and national levels, a total of 103 peer support groups (PSG) and 4 TB networks at the district level have been established across Siem Reap, Kandal, and Tboung Khmum provinces. Both platforms serve a critical role in representing their constituencies in various TB forums.

KHANA, in collaboration with strategic partners, has facilitated the establishment and launch of a national network of people affected and infected by TB, known as “TBPeople Cambodia.” In addition, KHANA has supported the implementation of community-led monitoring (CLM) – OnelImpact Cambodia, a tool that empowers people with TB and communities to access information on TB, human rights, key messages from TB survivors, and TB care/support services. It also allows people affected by TB to engage with their peers in chat forums, access TB support groups, and learn more about regional and global TB community networks. As of 2022, the OnelImpact app has recruited over 600 users across six ODs. Furthermore, the KHANA team has also shared its achievements and best practice through the virtual 2022 World Conference on Lung Health, presenting three abstracts.

KHANA is currently representing civil society organizations in different fora and settings to maximize their strengths, but also to connect with others to promote civic space, technical input, advocacy, and resource mobilization. The following is a list of KHANA's memberships:

1. Elected Chair of the Steering Committee of the Health Action Coordinating Committee (HACC), the membership organization for health NGOs in Cambodia;
2. Elected Vice-Chair of the Global Fund Country Coordination Committee (GF-CCC) for Cambodia.
3. The local health partner of the World Health Organization (WHO) in Cambodia.
4. The Co-Chair of the Activists Coalition on TB for Asia and Pacific, known as ACT! AP, hosted by APCASO in Bangkok, and funded by the Stop TB Partnership;
5. The Developing Country NGO Representative on the Stop TB Partnership Board;
6. A member of the WHO Civil Society Taskforce for TB for a two-year term: 2021-2022 and extended to 2023;
7. A partner of Frontline AIDS – leading on Actions #1, 5 and 9 of their Global Plan of Action and serving as a member of the newly established Partnership Council;
8. The Co-Chair and Secretariat of the Cambodia NCDI Poverty Commission; and
9. The Country Partner and Member of the Council of Representatives of APCASO.



# MOVING FORWARD TO KHANA

## STRATEGIC PLAN: 2024-2030 (KSP30)



KHANA's Strategic Plan is to be implemented from 2024 to 2030, referred to as KSP30, and falls under the organizational theme "Moving toward Universal Health Coverage that no one is left behind." This strategic plan was developed in consultation with all staff and KHANA's Board of Directors, building on the open discussion during the 84th Board Meeting in 2023. The Board reached a consensus that confirmed the current KHANA directions, particularly the KSP25, are still relevant and shall be continued; however, KHANA is required to be engaged more on climate change, one health and pandemic, prevention, preparedness and response (PPPR). The strategic plan was also well discussed with KHANA's management and staff during the All-Staff Team Building meetings in 2023. The outcome of these meetings resulted in all staff members and the management team agreeing with the Board's statement that the current directions of KHANA are well-matched with funding availability and donors' focus.

KHANA shall maintain its vision, mission, and values as updated in 2021, but aims to specify more on climate change, one health issue, pandemic and AMR.

The purpose of this is to reflect the organization's contributions over the past three years to continue transitioning itself into broader areas of health, pandemic and development. The Management Team proposed this to KHANA's Board of Directors during the 85th Board of Directors Meeting, 2023; it was finally endorsed and approved by the Board of Directors.

This strategic plan was structured into Vision, Mission, and Core Values and followed the four strategic goals. Each goal is structured into Objectives, Strategies, and Indicators used as a tool to measure the program's successes overtime during the next seven years.

Within 2024-2030, for KHANA's Strategic Plan to achieve its vision and missions while maintaining its core values under the four strategic goals, there will be a total of more than fourteen million US dollars to be budgeted and mobilized from donors and relevant stakeholders. Within these current pipelines, over ninety percent of the required budget is reliant on donors' approval to support this ambitious strategic plan.

The details of this strategic plan are shown below.



## Mission

To continue to be a leader in the HIV and tuberculosis (TB) responses, while addressing wider health and development needs.



## Vision

KHANA aspires to a Cambodia that supports community ownership and empowerment, where all people have equitable access to quality HIV, tuberculosis (TB); and other health services, including NCD and HCV, and sustainable development opportunities.



## Core Values

- ▶ **Efficiency and Effectiveness:** KHANA always strives 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 our work. KHANA's research and findings are utilized and disseminated to build an understanding 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 Key Populations, Lesbian, Gay, Bisexual, Transgender & Intersex (LGBTI), tuberculosis patients, and other vulnerable groups to build more vital awareness and respect for diversity. KHANA also influences policies that promote and build inclusivity for all.

# GOALS

## Goal 1

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

### Objectives and Strategies:

#### 1.1. Prevent new HIV and TB infections and transmission.

- a. Intensify the implementation of Treatment as Prevention (TasP) and differentiated care model among PLHIV, especially serodiscordant couples, HIV-positive pregnant women and stable PLHIV
- b. Ensure effective mechanisms to virtually eliminate mother to child transmission (MTCT) to reach an AIDS-free generation (such as Option B+).
- c. Maximize the use of ICT, including social media and mHealth for emerging KP at a higher risk of HIV and TB.
- d. Adopt and implement policies and guidelines to manage LTBI, including introducing and scale-up of the new TPT regimens.
- e. Strengthen implementation of TB preventive therapy for close contacts of Smear Positive TB cases and eligible children under the age of 5 years screened, and PLHIV will be prioritized for preventive treatment

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

- a. Identify KPs at a higher risk of HIV and reach them using innovative approaches.
- b. Support the expansion of HIV Boosted Integrated Active Case Management (B-IACM).
- c. Support HIV point-of-care service quality, including the support of community-based ART delivery
- d. Increase TB case detection through community active case findings and hospital linkage
- e. Improve the TB diagnostic connectivity services, including scaling up diagnostic services
- f. Build the health center staff's capacity to plan and coordinate outreach services and ensure effective monitoring to detect better, treat, and prevent TB.

#### 1.3. Increase health service utilization.

- a. Ensure functioning feedback platforms for users and service providers.
- b. Create service demand at the community level (through quality assurance and quality improvement).
- c. Strengthen health information system, including TB MIS to contribute toward more harmonized and aligned systems.

## 1.4. Improve equitable access to healthcare.

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

## Indicator of success:

- % of female entertainment worker reported consistent condom use with client in the past three months
- % of men who have sex with men and transgender women reported consistent condom use with male partners in the past three months
- % of stable PLHIV adhered to ART and sustained viral load suppression
- % of diagnosed TB (all form and BK+) reported successfully complete treatment
- % of PLHIV and diagnosed TB in KHANA programs received social protection scheme



# GOALS

## Goal 2

Address climate changes, one health issues, and pandemic prevention, preparedness, and response through building human resilience, development of sustainable community and organizational systems

### Objectives and Strategies:

#### 2.1. Enhance the ability of affected communities in climate change adaptation and disaster risk reduction; including One Health Issues, and Pandemic Prevention, Preparedness and Response (PPPR)

- a. Raise awareness on 'climate change impacts and adaptation' one health issue, and PPPR and mainstream through KHANA's programs
- b. Provide skill-building on climate change adaptation one health issue and PPPR to ensure food security and nutrition as well as for better copes and health and well-being safety and security
- c. Implement the integrated Community Disaster Risk Reduction (CDRR), One Health issue, and PPPR program into KHANA's coverage areas at risk of disasters and pandemics
- d. Promote KHANA's linkages and partnerships with existing key partners and stakeholders in disaster risk reduction, One Health issue, and PPPR

#### 2.2. Increase access to income and other financial resources.

- a. Provide skills building on home gardening, livestock raising, and financial literacy to beneficiary communities.
- b. Promote saving behaviors through best practice models amongst beneficiary communities.

- c. Support linkages to credible financial institutions and other alternatives for beneficiary communities.
- d. Leverage KHANA's expertise, along with any innovations and program models to support the acquisition of financial resources.

#### 2.3. Increase employment opportunities for beneficiary community members.

- a. Support access to vocational training to increase employability.
- b. Promote job placement linkages with potential employers and agencies.
- c. Provide career counseling and job search skills.

#### 2.4. 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.

### Indicator of success:

- Of selected communities/health facilities with increased quality of services to address the impact of climate changes, One Health issue and PPPR
- of selected peer support group/ART group/key and vulnerable populations groups increased their ability to adapt the climate change impact, One Health issue and PPPR
- of selected peer support group/ART group/key and vulnerable populations groups increased their employment opportunity

# GOALS

## Goal 3

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

### Objectives and Strategies:

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

- a. Provide technical training and support.
- b. Strengthen systems and capacity to monitor and analyze real-time data at facility and OD levels by building healthcare providers' capacity to optimize the utilization of TB-MIS, collect and analyze data, and utilize for decision-making and resource allocation.
- c. Promote learning and sharing with communities, partners, and stakeholders.
- d. Functionalize the KHANA Technical Hub through KHANA Research Center.
- e. Leverage KHANA's technical expertise and empower staff to engage in KHANA Technical Hub's service provision.

#### 3.2. 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.

- c. Develop and implement an evidence-based advocacy and communications strategy to regularly share lessons learned and acceptable practices with the national and sub-national stakeholders to inform decision-making, future program directions, and policies.

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

- a. Expand scientific research areas for promoting the health and quality of life of the populations.
- 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 in positions that effect change.

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

- a. Enhance and develop KHANA's staff's technical capacities through technical sessions, learning, and sharing.
- b. Develop ability- building opportunities through attendance at local and regional meetings, workshops, symposia, training, conferences, and dialogue.
- c. Leverage technical support from Frontline AIDS academia, and other organizations.

## Indicator of success:

- o % of KHANA's partners improved program, M&E and financial capacity to implement their work
- o of technical innovative model developed and used
- o of evidence-based research published and improved program design and implementation
- o of capacity building opportunities (learning, sharing, workshop, symposium, training, and conference) enhanced



# GOALS

## Goal 4

Promote diversity, rights, and gender equity.

### Objectives and Strategies:

- 4.1. Promote an enabling environment for KPs, LGBTI, TB patients, and other vulnerable groups.
  - 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.
- 4.2. Increase public awareness of 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.
- 4.3. 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 of SRHR and service availability.

### 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.

- a. Support and monitor meaningful participation at every implementation level, 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.

### Indicator of success:

- of LC/OW/CAW/KP/PLHIV/Women increased opportunity in policy and advocacy works
- of LC/OW/CAW/KP/PLHIV/Women increased awareness of GBV and SOGI among program
- of LC/OW/CAW/KP/PLHIV/Women increased accessibility to SRHR and GBV services
- of LC/OW/CAW/KP/PLHIV/Women increased opportunity in program development and implementation

# KHANA'S ON GOING COMMITMENT & FUNDING IN PIPELINES:



The KSP30 guides KHANA strategic directions as a continued leading organization for community ownership and empowerment over the next seven years in the HIV response but aims to specify other tuberculosis, viral hepatitis, other health services including NCD, and sustainable development opportunities. The purpose of this is to reflect the organization's contributions over the past five years to continue transitioning itself into broader areas of health and development. It is an ambitious but manageable plan guided by the expectations and needs of the communities KHANA team serves.

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 and 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. They are in turn translated into this plan as a show of commitment by the KHANA to its stakeholders.

The KSP30 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 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 robust monitoring and reporting system including on specific indicators relating to the four-goal areas, ensure that the proposed key interventions 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, invite input from all stakeholders, make strategic choices on how best to mobilize resources from traditional and non-traditional funding streams 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 be prioritized.

KHANA's commitments extend beyond the community level. It also works within national and international strategies 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, and CENAT of the Ministry of Health, the National Strategic Development Plan, the National Authority for Combating Drugs, and the National AIDS Authority (NAA).

At the global level, KHANA has aligned with the Frontline AIDS and the United Nations Sustainable Development Goals (SDGs) to form a broader picture of helping KHANA more effectively contribute to health and development needs.

As KHANA looks ahead for the next seven years, it will continue to live by a "Lead, Contribute, Adapt" philosophy that currently in use and to be continued and will significantly 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.
- ▶ Continually innovating and adapting to change; and
- ▶ Remaining committed to all aspects of its work, along with communities being served.

## Funding in Pipelines:

Donor	Project name	Timeframes: January 2024-December 2030						
		2024 (USD)	2025 (USD)	2026 (USD)	2027 (USD)	2028 (USD)	2029 (USD)	2030 (USD)
The USAID	COMMIT	1,700,000.00	-	-	-	-	-	-
The GFATM	HIV prevention	1,560,407.00	1,692,973.00	1,538,007.00	-	-	-	-
TB LON Mental Health Asia	TB and Mental Health	103,378.00	92,112.00	-	-	-	-	-
Stop TB Partnership	CFCS	115,500.00	37,500.00	-	-	-	-	-
Additional fund to be raised to support KHANA 7 years strategic plan		-	-	-	1,800,000.00	1,800,000.00	1,800,000.00	1,800,000.00
<b>TOTAL</b>		<b>3,479,285.00</b>	<b>1,822,585.00</b>	<b>1,538,007.00</b>	<b>1,800,000.00</b>	<b>1,800,000.00</b>	<b>1,800,000.00</b>	<b>1,800,000.00</b>

## DOCUMENTS REVIEWED:

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- ▶ KHANA, KHANA Strategic Plan 2016-2020 (KSP20)
- ▶ KHANA, KHANA Strategic Plan 2021-2025 (KSP25)
- ▶ NCHADS, Strategic Plan for HIV/AIDS and STI Prevention and Control in the Health Sector, 2016-2020
- ▶ NCHADS, Strategic Plan for HIV/AIDS and STI Prevention and Control in the Health Sector, 2021-2025
- ▶ RGC, National Social Protection Policy Framework 2016-2025
- ▶ CENAT, Standard Operating Procedure for the Programmatic Management of Multidrug- and Resistant Tuberculosis (MDR-/RR-TB), Cambodia, 2019
- ▶ NCHADS, Boosted Continuum of Prevention to Care and Treatment for Key Population in Cambodia, 2021
- ▶ MoH, Standard Operating Procedure of Antimicrobial Resistance in Health Facilities and health care setting in Cambodia, 2019
- ▶ MoH, National Strategic Plan for the Prevention and Control of Non-Communicable Diseases, 2022-2030
- ▶ UNAIDS, Seizing the Moment, tackling entrenched inequalities to end epidemics, Global AIDS Update, 2020
- ▶ MoH, Health Strategic Plan 2016-2020
- ▶ MoH, Health Strategic Plan 2021-2030
- ▶ NAA, The Fifth National Strategic Plan for a Comprehensive, Multi-Sectoral Response to HIV/AIDS, 2019-2023
- ▶ National Strategic Plan for Control of Tuberculosis, 2014-2020
- ▶ National Strategic Plan for Control of Tuberculosis, 2021-2030



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