



ពុទ្ធសាសនា ដើម្បី អភិវឌ្ឍន៍

BUDDHISM FOR DEVELOPMENT

CENTRAL OFFICE

** ព្រះធម៌ **

Report

HCBC activities achievement.

-Improved coverage, quality & sustainability of comprehensive and integrated services for PLHIV and OVC, which have successfully linked communities with public health and non-health services.

1. 1. Intermediate Result: Full coverage achieved and maintained in project sites of high quality comprehensive care, treatment and support services for PLHIV (including MARPs who are HIV positive) and OVC.

Achievements of coverage and maintained of project.

❖ From the first quarter to June 31, 2015 is the period that has the surprise event happened in Roka commune, in Sangker district of Battambang province. The new people living with HIV/AIDS more than **264** including children were found through the finger print at HC Roka and then were confirmed in VCCT at RH Battambang.

In this quarter we implemented the project activities depend on activities work plan as following:

- Provide orientation on new CBPCS model to **16** staff and **41** CSVs.
- Identify the **zero-discordant couples** and refer the negative partners to HTC every six month for **93** female and **76** male, total is **172** SD.
- The number of people reached through HIV Prevention activities/BCC outreach activities in this quarter is totally **554**.
- The number of PLHIV reached through positive prevention activities totally is **390**.
- The numbers of PLHIV families who have received care and supported, are **149** old and **163** are new. The total is **660** families.
- The numbers of PLHIV family's members, who have received care and support (Include PLHIV), is up to **2570**.
- The number of PLHIV (Adult ≥ 18) who have received care and supported from CBPCS, is **791** old, and 13 are new finding, so total is **804**. (Including **9** died).
- The number of new HIV infected individuals (adult and children) identified through HTC/PMTCT during this reporting period is **20**.
- The number of PLHIV received ART through support of CBPCS old is **670** old, and **2** are new. Total is **672**, (=83.58%).
- The number of PLHIV as households received additional food/ social support from other department/kindness people is **188**, and IGA is **183** HH (*Received from Unlimited Dental Care of Taiwan for PLHIV in Roka commune*).
- The number of PLHIV self-help groups established and function was **41** SHG with **41** group leaders to active to care and counseling to PLHIV. The number of PLHIV members in self-help group was **794**.

- The number of TB suspected PLHIV (adult and Children) referred for TB screening is **13** persons. However, there is only **1** got TB treatment.
- The number of HIV positive pregnant women who received ART/Option B+ is **7**.
- The number of infants born to HIV+ women who received an HIV test within 18 months of birth during the reporting period is **3** persons and the number of Infants born to HIV- infected women receiving ARV prophylaxis is HIV-positive is **3** persons.
- The numbers of OVC House Hold that received care and supported is **46** old and only **1** is new finding with **144** OVC.
- The number of Children Infected by HIV (CIA) received ARV through CBPCS is **92** old, and **4** is new, total is **96** (=66.67% of CIA received ART).
- The OVC self-help groups were re-established into **7** groups, but the real function is CIA 1 to 5 enrolled into PLHV SHG and leading by CSV.
- The number of OVC self-help group members is **143**.
*The number of individuals referred to health services is **610** cases.
- The number of PLHIV (≥18yrs) referred to health services **381**.
- The number of OVC referred to health services is **69**.
- The number of suspected individuals referred to health services (STI patient, zero-discordant couples) is **17** cases.
- The number of referrals to get SRH/ANC services was **51** cases.
- The number of referrals of PLHIV (≥18yrs) to get the ART services is **834** cases.

The number of referrals of suspecting individuals (Among GP) to get the health services was **620** cases.

The achievement in this period are the following:

Strengthening Capacity Building

-7-9.04.2015 and 22-24.05.2015, 14 CSVs in Roka commune, 10 of them is female, and 4 staff (1 of them is female), 1 from Sangkae, 1 from Maung attended a workshop. The workshop is **cooperated with BFD and Angkor Hospital for Children, and supported by KHANA**. It were held on the HIV prevention and spreading, ARV using, food alimentation for CIA, General Local awareness, and method of counseling for PL/CIA.

-27.04.2015-01.05.2015 There were two HBC staffs attended the training at Siem Reap with Angkor Hospital for Children on how to counseling with PL and follow up.

-03.06.2015 the 14 CSVs in Roka commune, 10 of them is female, and 4 staff (1 of them is female), 1 from Sangkae, 1 from Maung attended workshop with Angkor Hospital for Children on Good food tool kid, at Battambang province.

-11.05. 2016 14 CSVs in Roka commune, 10 of them is female, and 4 staff (1 of them is female), 1 from Sangkae, 1 from Maung attended training on HIV/AIDs Law **with CPN+** at Roko commune.

-11-13.06.2015 14 CSV and Donchis 2, 1 HC staff, 1 BFD staff, (Total 18 persons attended the training with **Lakhoun Development Cambodia** on the Rights of HIV/AIDs' participate and sharing Ideas in Society.

-3 staffs (1female, 2 female CSV in Roka, 1 staff and 1 CSV from Maung, and 1 staff from Sangker attended Training on How to counseling to HIV/AIDs with SSC supported by KHANA at Roka commune.

-09.04.2015 1 staff attended Training on how to prevent HIV virus and medicine **with Angkor Hospital for Children.**

-22.05.2015 one staff attended Training on how to facilitate the HIV/AIDs (CIA) **at HC and Community with Angkor Hospital for Children.**

-03.06.2015 one staff attended Training on how to provide food nutrition to the HIV/AIDs (CIA) at HC and Community. **The training was collaborated by Angkor Hospital for Children.**

15-17/06/2015 BFD provided training on how to make counseling with HIV/AIDs and follow up them in community.

AIDs prevention informal Education

Educated through the SHG meeting on HIV prevention for 4 session for 41 SHG.

- ✍ Participated with the meeting coordinated by PAO in order to strengthen the health service provider for 1 session.
- ✍ Educated on HIV prevention and through ABC strategy for 25 sessions especially on medicine injection that cause HIV infection as the PLHIV in Roka commune.

Shelf Help Group Meeting

1. Provided informal training to 4 sessions to the PLHIV groups (2 sessions done at Maung Russei and 2 others at Sangkae districts) with 632 PLHIV attended it. The following topics provided are:

- SRH/FP
- STI
- How of the spreading and prevention of HIV.
- ARV using and keeping properly.

Activities for Children Infected by HIV/AIDS.

BFD educated to general people including children infected by HIV/AIDS in community to understand clearly on:

- HIV/AIDS
- The affective of HIV during medicine injection or serum transfusion.
- TB.

BFD re arranged the SHG of PLHIV including SHG of CIA in 41 groups and each group is from 16 to 35 PLHIV depending on the area that has PLHIV and CIA living nearest to each other.

The collaboration for Roka HIV Interventio

1. BFD always cooperate with all related partners such asPHD, ODs, PAOs, HCs and local authorities, and other relevent NGOs or OIs in the implementing areas and closely work with them.

In this period, there were 15 sessions of NGOs, OIs, Catholic church, Generous people inside and outside country both ordinary people and Monks, Government Officers, included: Her Excellency Mèn Sam Orn; His Excellency SarKheng, His Excellency KemSokha, Women Affair Phnom Penh, Monks from Watt Botumvattei Phnom Penh, Taiwan Dental Care Unlimited, HACC, Battambang

Catholic Church, Singers MeasSokSorphear and DJ Kdeb, Cambodia National Assembly, Buddhism For Health, Generous people from Australia provided the emergency support to the victims from HIV/AIDS and PLHIV&CIA in Roka commune Sangkae district Battambang province, such as: *Cake, milk, water Juice, Medicine, fish can, Instant noodles, Pure Balm, sugar, Mat, Sarong(skirt), Mosquito net, educational kids, cloths, tooth wax, Rice, soap, fish sauce, soybean sauce, towel, hygiene cotton fiber, T- shirt, water erosion box, and cash (both Riel and US Dollars),etc. per victim.*

Donors and Kindness support budget for project implementing.

<i>No.</i>	<i>Donor</i>	<i>Amount</i>
1	<i>BFD's fund</i>	<i>\$ 2,000.00</i>
2	<i>គណៈសង្ឃនៃព្រះរាជាណាចក្រកម្ពុជា</i>	<i>\$ 5,000.00</i>
3	<i>TAS</i>	<i>\$ 2,700.00</i>
4	<i>Community of Blooming in USA</i>	<i>\$ 1,225.00</i>
5	<i>Australia</i>	<i>\$ 3,022.50</i>
6	<i>Dental Care non-limited (Taiwan)</i>	<i>\$ 23,560.00</i>
7	<i>UN WOMAN</i>	<i>\$ 2,500.00</i>
8	<i>Mr. Path Taibot ម្ចាស់ bamboo Resort</i>	<i>\$ 200.00</i>
9	<i>Graham Banford Khmer Delight Restaurant in Battambang</i>	<i>\$ 100.00</i>
10	<i>Community AIDS Action Group, Bloomington in USA</i>	<i>\$ 500.00</i>
11	<i>Mr. Koveth in Massachusetts state (USA)</i>	<i>\$ 100.00</i>
12	<i>Mr. Vincent</i>	<i>\$ 200.00</i>

13	គណៈកម្មធិការទី៨ រដ្ឋសភានៃព្រះរាជាណាចក្រកម្ពុជា	\$245.22
	Total Amount	\$41452.72

***Institution and Kindness people supported budget/other
Social material direct to PLHIV.***

<i>No.</i>	<i>Donor</i>	<i>Type of supporting</i>		
1	<i>Cambodian Red Cross</i>	<i>Rice/Food</i>	<i>Budget</i>	<i>Material</i>
2	<i>គណៈសង្ឃគណៈមហានិកាយនៃ ព្រះរាជាណាចក្រកម្ពុជា</i>	<i>Rice/Food</i>	<i>Budget</i>	<i>Material</i>
3	<i>Regional Catholic Association</i>	<i>Rice/Food</i>	<i>Budget</i>	<i>Material</i>
4	<i>Member of Cambodian National Assembly</i>	<i>Rice/Food</i>	<i>Budget</i>	<i>Material</i>
5	<i>Ministry of health ឯកឧត្តម ម៉ម ប៊ុនហេង</i>	<i>Rice/Food</i>	<i>Budget</i>	<i>Bike for CIA</i>
6	<i>សមាគមន៍ទ្រទ្រង់ពញ្ជ័រៈសង្ឃ</i>	<i>Rice/Food</i>	<i>Budget</i>	<i>Material</i>
7	<i>Vietnam Christian</i>	<i>Rice/Food</i>		
8	<i>មន្ទីរកិច្ចការនារីខេត្ត ប.ប</i>	<i>Rice/Food</i>	<i>Budget</i>	<i>Material</i>
9	<i>អង្គការក្តីសង្ឃីមអាស៊ីអន្តរជាតិ</i>		<i>Budget</i>	

10	លោកជំទាវ ម៉ែន សំអន	Food	Budget	Material
11	ព្រះសង្ឃពីវត្តបុរាណ		Budget	
12	សប្បុរសជនពី Taiwan		Budget	Material

2. Participated the meeting with Women and Children Committee Affair (ភីភីនីភី) 3 times, 2 times at Maung Russei and 1 time at Kos Krolor districts most talked about Human Rights (Women and Child Rights), immigration, students gave up education, Health, Security in local communities, etc.
- Attended 3 times Pro-TWGH meetings at PHD talked about the activities related the people daily health, especially the youth, that Developed partnership done.

Roka commune is 1 in among of 7 in Sangke district, cover by HC Roka, OD Sangker, covered by HBC of BFD from 2001 to present.

- Before HIV outbreak, Roka commune content of **26** PLHIV (Adult **19**, Children **7**).
- During of outbreak (December 2014-August 2015) **264** PLHIV, (Died **9** PLHIV).

This is data of PLHVI at Roka (including old 26) found from December 4, 2014 to July 10, 2015.																	
No	Village	HH of Adult	HH of child	PLHIV >18ys				PLHIV <18ys				Total finding	Remained	Follow in next 3 months	Sero-Discordance		# of ART
				New Positive found		Died		New Positive found		Died					Total	F	
				Total	F	Total	F	Total	F	Total	F						
1	Roka	137	17	163	109	7	4	51	27	1	1	213	205	242	70	26	161
2	Tahen 1	5	2	5	3			2	1			7	7	8	2	1	4
3	Tahen 2	1	0	3	2			0	0			3	3				1
4	Ambeng Thnge	38	2	42	25	1	1	16	5			58	57	37	14	6	35

5	Po Battambang	3	1	1	1			2	2			3	3	7	1	1	1
6	Choung Tadork	2	0	4	3			0	0			4	4	5	1	0	2
7	Dambok Bon	1	0	1	0			0	0			1	1	3	1	1	1
Total		187	22	219	143	8	5	71	35	1	1	290	281	301	89	35	205

1.2. Intermediate Results: improved integration of HIV-related services for health, social welfare and impact mitigation with existing home & community-based care services.

Achievements: of Supporting to PLHIV/CIA

❖ This period, (January 01 – June 31, 2015), out of the education on basic knowledge of HIV/AIDS, ARV adherence, and stigmatization/discrimination BFD's staff also identified unmet need PLHIV for referral to get health service as following:

- Provided money for PLHIV/CIA/GP with pregnancy to receive OI/ART, VCCT, SRH/FP, TB, PMTCT/ANC. All referral were done by CSV, and CSO.

- BFD's staff also facilitated and coordinate to the activities as below:

1. BFD Provided emergency food to 46 families of PL/CIA (37 families at Maung Russei and other 9

at Sangkai Districts) one family got 20 kilogram of rice, 2 bottles of fish source and 2 bottles of soybean source.

2. On June 9, 2015 His Excellency Tea Phalla visited the PL have lacked food 4 cases at Koskrolor district and referral 1 PL to OD Maung.

-Through BFD, UN woman provide water distribution to gener people family including PLHIV's HH for during of the drying season (from June 2015)

1. 3. Intermediate Results: Increased capacity and sustainability of PLHIV self help groups.

Achievements of The sustainable of PLHIV self help groups.

❖ BFD provided 14 new and 27 previous CSV the knowledge of SHG leading through monthly meeting and other training and then they provided the education to their SHG's members while they conducted the quarterly SHG meeting.

-Also BFD aganged PLHIV by each SHG and set list of SHG's members to each CSV to cover in order they can control and manage thier group member easily.

🔗 Challenges/emerging needs to 1.1:

- **This quarter, with the HIV/AIDS out breack in the Roka commune are stable, and budget was enough for for referral PLHIV and OVC to health service especially refering for VCCT and ART.**
- ◆ **No properly computer to use for Program Office that make every working so late for this quarter.**

Problems:

1. The prolong draught season have made the PL families, the same as poor families have lacked food, water, no work in community, immigrant to Khmer-Thai border or Thailand) to look for income to support their living condition, which cause their getting OI and ART was missed or irregular.
2. PL&CIA always forget the date of appointment with HC to get the OI and ART
3. There was a new PLHIV Ms. Heng Touch (Female) 43 years old, has lived at Odambang village Odambang 2 commune Sangkea district Battambang province, refused torest at the hospital, even though, many times, CSO advised her. She said that there is no one to take care, her mother is very old and her 2 children go to school. She made her blood test on 27.03.2015 and arranged into group on 30.03.2015. She just onetime get OI on 5.5.2015 and the next 15.08.2015 because her CD4 578 while she tested on 30.03.2015; but now she was died on June 26, 2015.

អនុសាសន៍ / ដំណោះស្រាយ Recommendations / action points:

- Program Officer borrowed a personal computer from other staff in other project to use for complete its work for this quarter, so we would like KHANA to provide new one for implementing project.

 1. Frequently facilitate the PL and CIA to Hospital or CH

2. Report to Branch Manager and Program Coordinator
3. CSO followed up, explained, and directly took to the hospital for PL who was impossible.

In case of PL or CIA will not go to get the OI and ART HC staff always informs BFD field staff to follow.

Challenges/emerging needs to 1.2.

- This quarter, CSV were 5 months recruited so they have some experience in implement their work yet so it can be incomplete information from community by CSV, for example the information on ARV follow up, SD couple, can confuse about new positive finding. Even off they will need some skill for working.

Recommendations / action points:

◆ BFD's staff itself try to train CSV and communicate them to work and request to KHANA and relevant department (PHD, OD) to provide technical support on counselling and other working.

◆ BFD collaborate to other technical department to do the counselling until all PLHIV/CIA confident on BFD's staff and CSV working now.

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Solving

1. Frequently facilitate the PL and CIA to Hospital or CH
2. Report to Branch Manager and Program Coordinator
3. CSO followed up, and explained and directly took to the hospital for PL who was impossible.

Challenges/emerging needs to 1.3:

- Facilitate to CSV to lead the SHG meeting for every month or meeting by CSO/PC.

Recommendations / action points:

- BFD will provide more explaining to all CSV in order they will have clearly understanding in SHG leading.

Report writing by
Prak Chear
On June 30, 2015