

HIV/AIDS in Cambodia and USAID Involvement

Cambodia has the highest HIV prevalence of any country in Asia. HIV was first detected in 1991 in a male blood donor, but the first cases of AIDS were not diagnosed until late 1993. Surveillance data indicate high HIV prevalence and low knowledge of serostatus among most HIV-positive Cambodians. The HIV epidemic has now spread into every province and every population group in the country, although it appears to be concentrated in urban areas. The highest rates of infection have been found in the southeast and central provinces and along the Thai border. Factors contributing to the rapid spread of HIV/AIDS in Cambodia include extensive and frequent solicitation of sex workers by Cambodian men, coupled with high levels of sexually transmitted infections (STIs).

- According to the Joint United Nations Programme on HIV/AIDS (UNAIDS), an estimated 220,000 Cambodians were living with HIV/AIDS at the end of 1999, with an adult prevalence of about 4 percent.
- According to the Cambodian National Consensus Workshop on STIs, HIV and AIDS, an estimated 170,000 Cambodians were living with HIV/AIDS in 1999, accounting for 3.3 percent of the adult population.
- By the end of 1999, 14,000 deaths had occurred in adults and children.
- The estimated number of new HIV infections for 2000 was 49,000.
- The male-to-female ratio of HIV prevalence is 1.5 to 1. Men who are infected through contact with HIV-positive sex workers pass HIV on to their wives, thus increasing the number of transmission between spouses. Less than 1 percent of married women, aged 15-49, report that they use condoms.
- From 1998 to 1999, reported AIDS cases increased 51 percent, and HIV infections increased 25 percent.
- Of about 24,000 reported cases of HIV seropositivity as of June 1999, 6.8 percent occurred due to mother-to-child transmission.
- More than 71,000 adult women (ages 15-49 years) were estimated to be living with HIV at the end of 1999. The HIV epidemic in Cambodia is centrally linked to gender roles and the low social and economic status of women.



NATIONAL RESPONSE

A National Policy and Priority Strategies for HIV/AIDS Prevention and Control (1999-2004) aims to reduce HIV transmission and morbidity and mortality associated with HIV infection. Priorities include:

- Prevent HIV infections by creating a social environment conducive to prevention and control of HIV/AIDS and support activities aimed at curbing the epidemic.
- Strengthen the capacity of the individual, family, and community, as well as the country's economic system, to manage and reduce the scope of the epidemic.

The National Center of HIV/AIDS, Dermatology and Sexually Transmitted Diseases (NCHADS) was established by the Ministry of Health in 1998 to oversee the national response to HIV/AIDS, as well as to provide technical support to other government agencies and national partners. In January 1999, the National AIDS Authority was established to strengthen the multisectoral response to the epidemic and ensure that all ministries and provinces integrate HIV/AIDS initiatives into their policies.

Strengthening the HIV/AIDS response at the provincial level is a priority of both the government and the United Nations. Provincial AIDS committees, provincial AIDS secretariats and provincial AIDS offices are seen as critical to implementing the National Strategic Plan on the provincial and local levels.

The government response also includes research activities, condom social marketing, blood safety programs, care and support for persons living with HIV/AIDS, and HIV/AIDS education and information. A key goal of NCHADS is to improve STI prevention and control through STI management, using the syndromic approach, and to increase availability of quality STI services. A "Draft National Policy on 100% Condom Use in the Kingdom of Cambodia" (aimed at the sex industry) was developed in July-August 1999, based on lessons learned from a World Health Organization/Ministry of Health-supported pilot project in Sihanoukville.

USAID SUPPORT

Cambodia is one of four "rapid scale-up" countries identified in the U.S. Agency for International Development's (USAID) HIV/AIDS Expanded Response strategy. USAID/Cambodia will receive a significant increase in resources to achieve measurable impact within 1-2 years and will work toward significant increases in coverage of programs aimed at target populations, as well as the general population.

USAID's funding for HIV/AIDS activities for fiscal year 2001 is US\$9.5 million, compared with US\$2 million in FY2000. The Mission will develop a new strategy in 2001 to scale up its HIV program and to further integrate HIV initiatives with other health sector activities. USAID began supporting programs for orphans and other vulnerable children in Cambodia in FY 1999.

Key Population, Health, and Socioeconomic Indicators		
Population	11.4 million	1998 Census
Rate of Natural Increase	2.5 %	1998 Census
Life Expectancy	Males: 50.3 Females: 58.6	National Institute of Statistics 1998
Total Fertility Rate	4.1	National Health Survey 1998
Infant Mortality Rate	89 per 1,000 live births	National Health Survey 1998
Maternal Mortality Rate	473 per 100,000 live births	National Health Survey 1998
Per capita income (US\$)	249	Asian Development Bank
Govt. health expenditure	1%	
Adult Literacy	Males: 79% Females: 57%	1998 Census

USAID-supported country programs include:

- **Family Health International (FHI)/Impact** works with the Institute for Tropical Medicine, Management Sciences for Health, Population Services International, the Program for Appropriate Technology in Health, the University of North Carolina, and a network of local nongovernmental organizations (NGOs) to reach out to members of the uninfected services, sex workers and their clients, street children, and women and children affected by AIDS.
- The **International HIV/AIDS Alliance** works to link NGOs to enhance their skills in behavior change communication and share best practices and knowledge. In Cambodia, the Alliance supported the establishment of KHANA, a linking organization for Cambodian NGOs that facilitates the sharing of financial and technical resources to expand and strengthen HIV/AIDS activities.
- **Population Council/Horizons Project** is implementing a number of research projects in Cambodia, including an evaluation of the 100% condom policy in brothels, a study of cross-border HIV prevention between Cambodia and Vietnam, and operations research in home-based care and social marketing of pre-packaged therapies for STIs.
- **Population Services International/AIDSMark** has played an important role in implementing a nationwide condom distribution program since 1993. Through AIDSMark's social marketing program, more than 60 million condoms have been sold, with monthly sales in excess of 1 million.

STI services, particularly among adolescents, single women, and women in antenatal clinics;

- Educating health workers to care for and support persons living with HIV/AIDS;
- Increasing the involvement of religious and political leaders and provincial governors in the fight against AIDS;
- Ensuring an expanded multisectoral response;
- Developing sufficient human resource and infrastructure capacity to carry out the National Strategic Plan on HIV/AIDS;
- Expanding extremely limited HIV counseling services and improving training and recruitment of knowledgeable staff and volunteers;
- Expanding behavior change interventions to reach indirect sex workers (i.e., bar girls); and
- Providing appropriate regulation and training to carry out HIV testing in private pharmacies and ensuring related quality control, counseling and/or reporting of test results.

CHALLENGES

Cambodia must confront a number of issues specific to its HIV/AIDS epidemic:

- Improving STI surveillance, minimizing the increase in resistance to STI drugs, and increasing the availability and use of quality

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For more information, see www.usaid.gov/pop_health/aids/ or www.synergyaids.com.*

Please direct comments on this profile to info@synergyaids.com.

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