



HIV/AIDS COORDINATING COMMITTEE (HACC)

# MOVING FORWARD



Annual Report 2006

January-December



### *Vision*

All Cambodians live in an HIV/AIDS resilient society where there is a strong network to support the continuum of HIV/AIDS prevention, care/support, treatment and impact alleviation.




### *Mission Statement*

HIV/AIDS Coordinating Committee (HACC) is a strong HIV/AIDS network of NGO's with the capacity to build strategic partnerships with key players for an efficient, effective and sustainable response to the HIV/AIDS epidemic and its impact in Cambodia.





### *Goal*

HACC has competent members working in all regions of the country to respond effectively to the HIV/AIDS epidemic in Cambodia..

### *Key Strategy 2004 - 2006*

-  Strengthen and expand HACC programs related to advocacy for HIV/AIDS prevention, care and support.
-  Strengthen existing networks and links in the country, regions and around the world.
-  Strengthen and build organizational structure of HACC.










### *Objectives*

-  To increase the information exchange and coordination between NGOs, GOs, other stakeholders and UN agencies in their efforts to respond to HIV/AIDS prevention and care needs in Cambodia.
-  Strengthen existing networks between national and provincial service providers and establish links to regional and global networks.
-  Advocate HIV/AIDS prevention, care and support at all levels through media relations and jointly organized campaigns.
-  Strengthen the capacity of HACC secretariat members

### *HACC Guiding Principles*

1. Respect the rights of people living with HIV/AIDS.
2. Be neutral and not involved in politics.
3. Respect the national laws and guidelines.
4. Do the right things and be justice.
5. Be transparent in all decisions and actions.
6. No discrimination on the basis of races and religious affiliation.
7. No effort of making profits.
8. Respect on majority 2/3
9. Member pay fee
10. Responsibilities and accountabilities

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## Acronyms

AB	Advisory Board
AIDS	Acquired Immune Deficiency Syndrome
ART	Anti-retroviral Therapy
CAFOD	Catholics For Overseas Development
CCODP	Canadian Catholic Organization for Development and Peace
CHEC	Cambodian HIV/AIDS Education and Care
CHEMS	Cambodian Health Education through Media System
CPN+	Cambodia People Living with HIV/AIDS Network
CTN	Cambodian Television Network
FP	Focal Point
GFATM	Global Fund for AIDS, TB and Malaria
GIPA	Great Involvement of People Living with HIV/AIDS
GO	Governmental Organization
HACC	HIV/AIDS Coordinating Committee
HIV	Human Immunodeficiency Virus
IEC	Information Education Communication
KHANA	Khmer HIV/AIDS NGOs Alliance
M&E	Monitoring & Evaluation
NAA	National AIDS Authority
NCHADS	National Center for HIV/AIDS, Dermatology and STD
NGO	Non-Governmental Organization
PAO	Provincial AIDS Office
PAS	Provincial AIDS Secretariat
PHD	Provincial Health Department
PLWHA	People Living with HIV/AIDS
PMTCT	Prevention of Mother-to Child Transmission
SC	Steering Committee
SCC	Salvation Center of Cambodia
STD	Sexually Transmitted Disease
TOR	Term of Reference
UN	United Nations
UNAIDS	Joint United Nations Programme on HIV/AIDS
UNDP	United Nations Development Programme
UNGASS	United Nations General Assembly Special Session on HIV/AIDS
UNICEF	United Nations Children's Fund
USAID	United States Agency for International Development
VCCT	Voluntary and Confidential Counseling and Testing
WE/C	World Education Cambodia
WG	Working Group
WVC	World Vision Cambodia

## *Foreword*

It gives me great pleasure to present the HACC Annual Report for 2006, which provides members with an overview of activity highlights.

The HACC was active in coordinating the three national HIV/AIDS awareness campaigns. Greater numbers of NGOs are volunteering their time and resources to these events, and increasing numbers of people suffering from HIV/AIDS, volunteer for these campaigns in order to communicate their experiences and to learn from others. In addition, the HACC provided opportunities for networking among members and networks on behalf of members with other networks, Government, international donors and the UN, cooperated with members to coordinate the NGO response to HIV and AIDS at national and provincial level, promoted communication and the sharing of information among members and between all those involved in the HIV and AIDS response in Cambodia and internationally, represented NGOs responding to HIV and AIDS at national and international forums where HACC had received a mandate from its members to do and advocated for the full involvement of civil society in determining policy, setting national targets, developing plans and monitoring progress in relation to HIV and AIDS.

Many activities were undertaken in relation to organizational development in 2006. The HACC Steering Committee, members, donors and staff were involved in numerous national and international level capacity building activities.

Of course we owe much of our success to the solid and consistent of our donor partners, whom we thank for their visits, advice, training, personnel, material and financial support. Together we have made a difference. Taking this opportunity, I would like to thank USAID, KHANA, CAFOD & CCOOP who have contributes funds to our program. Without this kind cooperation and dedication, HACC could not have become the strong HIV/AIDS NGOs Networking it is today.

I would like to thank the National AIDS Authority (NAA), National Centre for HIV/AIDS, Dermatology and STDs (NCHADS), National & International NGOs membership, UN agencies and our stakeholders who have used HACC services. In doing so, they provided some useful feedback and constructive suggestion in the development of HACC services for future improvement.

I would like to extend my deepest special thank to the HACC Steering Committee, members, donors and staff for their continued effort, support and commitment. Also, I acknowledge all those who have paved the ways of HACC to reach the Vision, Mission and Goals. I look forward to increased cooperation and collaboration in the future.

**Seng Sopheap**  
**Coordinator, HACC**

## *HIV/AIDS Situation and Response in Cambodia that impact the role of HACC*



Cambodia has been praised worldwide as an HIV/AIDS “success story.” HIV was first detected in the blood supply in 1991 and the first AIDS cases were diagnosed in 1993. Incidence peaked in 1994 and 1995 (earliest for men) prevalence peaked in 1997 at 3% in 15 – 49 year olds. Sentinel surveillance reports show a steady decrease in HIV prevalence, from a high of 3.0 percent in 1997 to the current level of 1.9 percent among adults aged 15-49 years (HSS 2003). This represents about 123,000 adults (57,000 women) living with HIV and AIDS and a further 12,000 children are thought to be living with HIV. The prevalence among ante-natal care

attendees is stable at around 2.1 percent. Cambodia is one of the few countries that has been able to reach the WHO 3 by 5 target of having at least 50% of people who need treatment receiving ART by the end of 2005. As of 31 December 2005 a total of 11,284 adults (men 5,861/women 5,423) and 1,071 children (boys 567 / girls 504) were receiving ARV treatment. It is estimated that Cambodia has 670 000 orphaned or vulnerable children (this is 9 % of all children) and this includes 95 000 double orphans. Although it is difficult to accurately state how any children have been orphaned or made vulnerable, it is estimated that in 2005 there were approximately 51 000 AIDS orphans.

The health response to HIV has scaled up rapidly in Cambodia since 2003. Prior to this the focus was on HIV prevention aimed at those most at risk with some awareness raising among the general population. Access to testing services and treatment was very restricted. Treatment was mostly limited to the management of opportunistic infections and ART was only available in 5 NGO supported clinics. Most people were unaware of their HIV status, as there were less than 20 VCCT and home-based care was available only in Phnom Penh and a few provinces. The response was characterized by the steady growth in the number of ad hoc, unlinked services, with the only coordination coming through the efforts of HACC and several technical working groups supported by NCHADS and the NAA.

There has been significant behavior change and increases in access to treatment and care as a result of these changes. Cambodia is one of the few countries that has been able to reach the 3 by 5 target of having at least 50% of people who need ARV treatment receiving ART treatment. As of 31 December 2005 a total of 11,284 adults (men 5,861/women 5,423) and 1,071 children received ARV treatment. By this time there were 30 health facilities offering treatment for opportunistic infections and antiretroviral therapy including nine pediatric AIDS care sites. The number of home-based care teams providing services for those living with HIV/AIDS has been scaled up from 52 teams in 2001 to 261 teams at the end of 2005 in 56 operational health districts located in 17 provinces. Similarly the number of support groups for PLWH has increased from 24 in 2002 to 466 in December 2005.

The main route of transmission of HIV in Cambodia is through heterosexual sex and behavioral trends indicate that consistent condom use is increasing and risk-taking behavior among most at-risk populations is declining. Forms of sexual networking however are changing. Men increasingly turn from direct sex workers to indirect sex workers and sweethearts for sex, with whom they are less likely to use condoms. However, condom use among married couples is very low indeed and the highest number of new infections now occurs in housewives, from husband to their wife, and from pregnant women to babies.

## *HACC Background*

The HIV/AIDS Coordinating Committee (HACC) was started in 1993 for the purpose of sharing information and experiences from the field among NGO workers responding to HIV/AIDS, and to coordinate their activities. The organization has grown from a small, informal network to become a formal membership based organization employing staff and attracting financial and technical support. Over 90 NGO members now look to HACC to facilitate coordination of HIV and AIDS related activities to optimize effectiveness and coverage, disseminate information to increase the effectiveness of the NGO response, to advocate for a policy environment conducive to reducing the impact of the HIV and AIDS using human rights based approaches in the best interests of public health and to represent NGOs in national and international forums. The organization has contributed significantly towards the national response through advocacy, coordination, capacity building and networking.

The HACC has grown from very humble beginning. The first meeting was held in 1993 and a Steering Committee was formed in June 1995. Election of the first chair and secretary was initiated in October 1995. Formal membership, as demonstrated by the introduction of membership fees, was introduced in May 1997. In 2001, the membership had grown to 55 with involvement of national NGOs operating in the provinces. The HACC Secretariat was funded by WVC, KHANA, UNAIDS, and FHI/Impact. From 2000, HACC started receiving technical and financial support from KHANA, Pact Cambodia and UNAIDS. HACC became recognized by the GFATM as a representative of civil society.

By 2006, HACC has expanded program activities of Focal Point in five provinces for HACC representative in coordination on information exchange and experience on HIV/AIDS related works between government, civil societies, privates and other stakeholders. HACC is governed by a voluntary, elected Steering Committee (SC) composed of representatives from five member-organisations. The SC oversees the general operation of HACC, provides strategic direction, and draws up policies for the HACC Secretariat and Working Groups. The Committee members also help to fundraise, and recently some members of the SC have assisted HACC to secure funding from CAFOD and CCODP.

To facilitate more effective exchange of information and coordination of activities, the HACC members are organized into three working groups: 1) Training and Education; 2) Counseling, care and support; and 3) Mass media/Advocacy. A fourth working group, called the Task Force on Special Events, is set up every year prior to annual major events. The working groups are supported and assisted by the HACC Secretariat which is composed of the HACC coordinator and program officers. Day-to-day management of HACC activities is undertaken by the coordinator.

Currently, HACC has been implementing activities to strengthen the existing network consisting of 91 local and international NGOs across Cambodia and will expand activities even more so at provincial and sub-provincial levels in the future. HACC has set up five Focal Points in five provinces.

## *Our Achievements*

### *Strengthening NGO coordination and information exchange*

#### **ⓧ HACC coordination activities intensified**

- 4 meetings were conducted with the HACC Steering Committee, HACC coordinator and representatives of HACC staff for updating on staff & Technical Advisor movements, funding agency, preparations for the 7th National Candlelight Day 2006, Water Festival campaign, World AIDS Day, work plans for each quarter and also review of the by-law, staff policies, financial policies and especially, Strategic Plan 2006-2010.
- 12 meetings were held on a bi-monthly basis for the Counseling, Care and Support working group, the Training and Education working group and Mass Media working group. Besides these regular meetings, members also participated in extra planning meetings for organizing HIV/AIDS awareness campaigns.
- 11 HACC Membership meetings were held on a monthly basis, with an additional meeting with the National Committee on campaign planning held to discuss preparations and coordination of the HIV/AIDS awareness campaign.

#### **ⓧ Developed NGO service mapping**

- HACC had consultation meeting with NAA, NCHADS, UN agencies and experts to develop NGOs mapping

#### **ⓧ Dissemination and sharing of IEC materials**

- HACC has produced 1000 copies of its 2005-2006 membership directory, 1100 newsletters (4 issues), 5000 copies of an HIV/AIDS services directory and 1000 HACC organizational brochures for distribution to HACC members, government and stakeholders.
- HACC received 234,466 units of IEC materials, including leaflets, booklets, posters, fliers, reading books, T-shirts and caps from its member NGOs, government agencies and UN agencies. All IEC materials were distributed to other members, other institutions, and especially using in HIV/AIDS awareness campaign.

#### **ⓧ Evaluation undertaken**

- Advisory Board committee was established, composed of 5 members selected from HACC members, from CARAM, ESTHER, Pact Cambodia, RHAC, and World Vision Cambodia to provide consultation, recommendations and approval of drafts of policies, guidelines, procedures, and other assessment tools relating to information management and also in order to evaluate the process of meetings for information exchange.
- HACC engaged a local freelance consultant to evaluate the five Provincial Focal Point in order to review on the roles and responsibilities, implementation process, Focal Point partners' contribution and feedbacks from all partners, relevant NGOs and PAO/PAS. This report was also utilized for the development of the HACC Strategic Plan 2007-2010.

## ⌘ Develop Strategic Plan 2007-2010

- HACC staff and members developed a Strategic Plan 2007-2010 with assistance from an International Freelance Consultant.

### *Strategic Plan 2007-2010*

- **Strategy 1:** Strengthening the capacity of NGOs (collectively and individually) to have input into the development of HIV and AIDS related policies and plans
- **Strategy 2:** Enabling effective NGO sector implementation of the response to HIV/AIDS at national and local levels
- **Strategy 3:** Identifying, mobilizing and effectively using resources for the NGO response and implementation of the HACC Strategic Plan.
- **Strategy 4:** Increase HACC's organizational capacity

## ⌘ HACC organization strengthened

- HACC staff, with technical assistance from a consultant, have developed an operational plan, action plan and a proposal for implementing activities for the year. HACC has increased capacity of HACC and NGO networks to coordinate advocacy and response actions on HIV/AIDS
- HACC has recruited several staff to complete the existing structure, including an international volunteer from Australia as a Program Management Adviser and two Cambodian staff as Program Officers. In order to clarify roles and responsibilities of each Program Officer, the HACC team decided to develop terms of reference for each of the staff.
- HACC has revised the management structure in order response to the current need of the expanding organization. In order to improve the program implementation, HACC has decided to restructure and change the roles and responsibilities of the Program Officers to strengthen M&E system. HACC has developed a monitoring and evaluation plan and coordinating internal and external monitoring and evaluation. HACC M&E officer conducted a program activity evaluation for information sharing among working groups and membership meetings following the process of evaluation. The objective of evaluation was to assess the process and effectiveness of the meetings for sharing information and experiences among working groups and members, as organized by HACC and to find ways for improving these meeting in the future.
- HACC conducted regular monitoring of Focal Point activities and provided necessary technical and logistic support for their appropriate functioning. The technical support provided includes how to organize NGO meetings, how to collect information, how to coordinate and communicate with government institutions and NGOs in the province and developing report formats etc.
- HACC has strengthened the program and financial report system in order to improve the services quality. Moreover, HACC have developed and compiled all undertaken activities in the quarterly newsletter publication and website.

## *Networking with other stakeholders*

### **⌘ Representative of Civil Society and advocate with Government**

HACC played important role to represent Civil society working on HIV/AIDS for advocating with NAA/NCHADS and multi sectoral in building relationships, expanding networks and strengthening partnerships. During 2006, HACC achieved the major results as a significant achievement as reflected by strongly collaboration and communication with NAA/NCHADS. Regarding the HIV/AIDS epidemic reduction, HACC has made significant contributions towards a national response towards preventing the epidemic of HIV/AIDS, providing care and support for the people already affected AIDS, and minimizing the impact of the diseases through sharing information, distributing IEC materials to NGO partners and other target groups the nationwide.

### **⌘ Better cooperation with relevant agencies**

HACC and members have important role to build commitment of civil society actors to engage in the promotion of UA and monitoring of related indicator, generate up-to-date information on NGO/CBO interventions that helps identifying major obstacles to UA and ways to address these, develop capacity of NGOs/CBOs to monitor and report on key UA indicators and strengthen information exchange networks in the non-governmental sectors and cooperation between this organization and Government.

## *Facilitating Coordinated Advocacy and Response Actions*

### **⌘ Improve capacity of HACC staff**

- HACC has sent its staff members to attend the various training course and other conference in and outside country such as two staff attended the 16th HIV/AIDS International Conference which was held at Toronto, Canada. One staff attended the 4th East Asia and the Pacific regional meeting at Beijing, China organized by Global Fund. One staff attended the Leadership course organized by NAA and supported by UNDP and other workshops and meetings which organized by Government Institutions, UN agencies and other NGOs.
- Five staff members included one coordinator; one admin and finance officer and three program officers have attended the NGO Capacity Assessment organized by KHANA Evaluation Team. The main objective of assessment is to analyze data; finding and establish a baseline of HACC staff capabilities and to develop an integrated capacity building plan.

### **⌘ Capacity building of HACC working groups and members**

- HACC conducted a study tour for three day with 10 participants who were selected from ten NGOs in different provinces including Kompong Cham, Battambang, Banteay Meanchey and Phnom Penh. The purpose of the study tour focused on two main objectives; one was to exchange programs among NGOs working in the field of prevention, care, support and impact mitigation; and two was to build a coalition among members. The study tour team visited a few institutions including both government and NGOs working on HIV/AIDS in Kratie province.
- HACC conducted Annual General Meeting for the significant achievements and challenges of HACC and discussion on key strategies for Strategic Plan 2007-2010.
- HACC has set up Library/resource center and data based system for providing free services to HACC members, other stakeholders working in HIV/AIDS and the general public. There are more than 3,000 books currently registered. From July-December 2006, there were 265

customers visited the library and borrowed books. HACC has hosted its own website [www.haccambodia.org](http://www.haccambodia.org) to facilitate easy access to information for HACC members and others users.

### **✘ HACC Provincial Focal Points strengthening and provincial networks activated**

Five provinces were selected as HACC Focal Point (contact person) including Banteay Meanchey, Battambang, Pursat, Takeo, and Siem Reap. The Focal Point (FP) is aimed to do network and coordinate among provincial NGOs and report to HACC secretariat. The focal point has been recognized and strongly supported from PHD/PAO/PAS after HACC introduced FP project. PAO/PAS suggested HACC to continue FP activities in their province. FP had regularly conducted quarterly meetings and well coordination/ cooperation with PAO/PAS and provincial NGOs. They always joint together to organize special campaign such as World AIDS Day, Candle Light Memorial Day, and so on. Many provincial NGOs benefited from FP such as experiences/information sharing, providing NGO profile for documentation in national and international wide -through HACC website, directory and presentation-, strengthening solidarity, well-organize of work. Moreover, a study tour was organized by FP partner, CVD in Battambang province. Two advocacy campaigns were conducted in Takeo and Battambang by FP partners, NGOs and strongly technical supports from Provincial Health Department, PAO/PAS. FP partners and NGOs involved in NGOs mapping conducting by NAA and HACC. FP partners generally sent report and attended in quarterly meeting in Phnom Penh. FP had played a vital role, as HACC representative to share information and experience among their NGOs. FP had distributed IEC materials from HACC to NGOs to benefit community members.

## Public Education Campaign

### ⌘ World AIDS Day “Stop AIDS, Keep the Promise”

*This year in Cambodia, the National HIV/AIDS Awareness Campaign Committee -NAA, NCHADS, CPN+ and HACC- and its members jointly coordinated to celebrate this Special National and International Campaign. Individual institution, they had their own tasks to implement during this campaign. The theme “**Stop AIDS, Keep the Promise**”, builds on last year’s campaign, repeatedly alerting the international community of the need for continued action, genuine commitment and continued action to fulfill the promises made. The numbers remain dire. Worldwide in 2006, HIV was responsible for: 25 million deaths; 15 million orphans; and 4.3 million new infections.*

*For this campaign, there were several major activities to implement. Those activities included organize stage ceremony construction and hospital visit to HIV/AIDS patients in major hospitals responsible by NAA. The HACC is collaborated with CPN+ responsible for organizing a line of parade from Meru to the stage at Samdech Hun Sen park where is involved by volunteers from members NGOs and People Living with HIV/AIDS, organize outreach activities at several major markets in Phnom Penh.*

- **Outreach:** Five major markets in Phnom Penh were selected for conducting the outreach activity in Thmey, Chas, Olympic, Orussey, and Sorya supper market. In each market an information post was set up which composed of one table, one big umbrella, two chairs, one banner and IEC materials such as booklet, leaflets, posters, flyers, stickers and condom, which managed by volunteers. The activity was used IEC materials included 1,100 booklets, 225 T-shirt and 225 caps, 5,250 posters, 36,000 condoms for this outreach activity.
- **Parade:** Approximately 660 volunteers from NGOs and others gathered, those included NGOs staffs, students, and people living with HIV/AIDS. The objective of parade is to disseminate to the public about the awareness of HIV/AIDS and also it is a part of advocacy activities to the government to focus on HIV/AIDS and provide care and support to PLWHA.
- **On-Stage program:** The entire stage program were included by impression of H.E May Sam Oeun, 1st Vice Chairman of NAA, H.E. Teng Kunthy, Secretary General of NAA, NGOs representative by Mr. Seng Sopheap, Coordinator of HACC, UN Theme Group Chairperson by Ms. Bettina Maas, opening speech by H.E Keo Puth Reaksmeay, speech of Lok Chumteav Bun Rany Hun Sen with provision of award to youth by and release the balloon before closing the ceremony.

## Water Festival Campaign

*HACC Task Force Group and all NGO members organized the HIV/AIDS awareness campaign during Water Festival in close collaboration with government institution, UN agencies, Multi bilateral, private sectors, municipality of Phnom Penh, local authorities and key player. Each Task Force Group member is responsible for the working group on stage - program, outreach program, IEC collection, fundraising, Coordination, training and education and volunteers.*

- **Outreach activities:** During the campaign, more than 1000 volunteers came from NGO members to do **outreach activities** intended to alert and get attraction from the public to aware of the important event through educating and distributing of IEC materials to general populations and boat raisers.
- **Press conference** was organized by HACC under the theme “**Away from your families, together we prevent HIV/AIDS**”. The press conducted in order to disseminate information to stakeholders, NGOs members, particularly newsagent included TV, radio, newspaper and newsmagazine by telling them to disseminate this importance event through their media to people in Cambodia about the organizing the 11th National HIV/AIDS Awareness Campaign for Water Festival Day 2006. The campaign was disseminated through local radio channel included FM103, FM102, FM93.5, FM99, FM105 and AM918, TV channel included TV3, TV5, TV9, TV Bayon and CTN and with other local newspaper such as Kosh Santepheap, Angkor Thom, Khmer Apsara and Kampuchea Thmey.
- **Radio live show** was organized with the support and facilitation from CHEMS at the 103 FM station. The program aims to disseminate to the public about several activities planned for implementing HIV/AIDS awareness campaign during water festival day ceremony; that would be organized by the national HIV/AIDS Awareness Campaign
- Two HIV/AIDS **Information booths** were installed -in front of Wat Botum and Samdech Hun Sen Park- for providing information and distributing IEC materials such as leaflet, poster, booklet, flyer and condom to the audients.
- **On-Stage-Program** had been conducted for three days in order to attract people to pay attention, listen and get education on the HIV/AIDS. There were many programs included song, disco dancing, role play, short drama, quiz show and contest.

## 7th National Candlelight Memorial Day

*HACC and NGO members, NAA, NCHADS and CPN+ organized the 23rd International 7th National Candlelight Memorial with the theme of "Lighting the Path to a Brighter Future". The events was aim to honor the memory of those lost to AIDS, to show support to those living with HIV/AIDS, to raise community awareness and decrease stigma and discrimination related to HIV/AIDS, and to mobilize community involvement in the fight against HIV/AIDS.*

- A big **Parade** was organized with huge numbers of participation, approximately 2,000 people, including 500 PLWHA, 200 monks, 300 NGO staff and 1000 students from Sisowath High School. The parade was moving forward to ceremony stage located at Botum pagoda, which was presided over by Cambodian Buddhist leader Tep Vong and H.E Dr. Hong Sun Huot - senior minister and chair of NAA. There were various activities at the ceremony including speeches of representatives of the Government, NGOs, People Living with HIV/AIDS; Monks praying to people lost to AIDS, lighting of the candles, provision of food for monk offerings and gifts to PLHA.
- **Press conference** was organized by HACC and members with 5 guest speakers as representatives from NAA, HACC, UNAIDS, CPN+, and Buddhist monk who comes from the Salvation Center of Cambodia (SCC). The objective of the press conference was to disseminate information to all stakeholders, especially newsagents, asking them to continue broadcasting information to the public via their media outlets such as TV, radio, newspaper as well as magazine.
- **TV live talk show** was organized at CTN station for 30 minutes. There were three guest speakers on air representing the NAA, HACC, and CPN+. The program showed how strongly involved the Government Institutions, Civil Society and PLWHA.
- **Radio live talk show** was conducted at Radio FM 103 station in cooperation with the support of the Cambodian Health Education through Media System (CHEMS). There were two guest speakers; one representative from HACC and another representative from PLHA support group CPN+; and one program interviewer from CHEMS.
- **Information booths** were established at 2 places -in front of Botum Pagoda and at Samdech Hun Sen Park- for providing information to the public about STI/AIDS transmission and prevention including distributing IEC materials such as leaflets, booklets, condoms, and T-shirts to participants involved in the quiz show, writing their ideas on whiteboards as a way of showing support to PLHA. This activity was smoothly implemented with full contribution from Freshie boys and girls acting as program facilitators at each booth.

## *Overall Achievements from Steering Committee*

The Steering Committee Members (SC) represents the voices of all member organizations of HACC. The SC serves the interests of HACC and not their respective organization or individual. Members of the Steering Committee are integrity, honesty, good reputation, competent, insightful, dedicated, and effective individuals. The Steering Committee reflect gender balance and represent a broad range of skills and experience appropriate to govern the organization. The basic qualities of a good Steering Committee member can be summarized as:

- Stewardship
- Ability to see the big picture and the courage to set direction to achieve the organization's mission
- Dedicated and committed to fulfilling the organization's goals.
- Experience in community-based development projects or organizations
- Established competence in organizational management and development
- Experience in financial management
- Experience in grant-making and grants management to local NGOs
- Knowledge of issues related to technical assistance
- Experience in resource mobilization/fundraising

### **Furthermore, there are many achievements which have been accomplished by SC such:**

- Setting HACC's vision, mission and directions through its regular strategic planning 2007 - 2010;
- Overseeing the HACC's policies, procedures and guidelines;
- Supporting and Advising HACC Coordinator and assessing his performance;
- Supporting the overall operations activities of the HACC;
- Assisting HACC in mobilizing, generating, and raising funds, in the form of grants, donations and membership fees;
- Overseeing the proper management of HACC's accounts, including ensuring that they are properly audited by a reputable auditor;
- Approving the agenda of HACC annual review and actively involving in the process; and
- Advising the HACC Coordinator to review and update HACC bylaws, policies, office procedures, admin manual and financial guidelines, including fixing HACC annual membership fees and the SC approves for the use of HACC

## *Lesson Learnt, Challenges and Recommendations*

### **⌘ Need for improved advocacy and coordination response at provincial level**

Provincial NGO networks have not been functioning well, including coordinating advocacy. Advocacy activities of provincial networks have largely been confined to awareness raising campaigns during special events such as World AIDS Day organized by the HACC. During consultations organized by the HACC on advocacy at the provincial/local level, NGOs (particularly local NGOs and groups of PLWHA) mentioned that their voice is not being heard and that their concerns have not been acted on adequately.

To help improve coordination at provincial level, the HACC initiated in mid-2005 the selection of a HACC member to act as the HACC provincial focal point. The focal point is expected to facilitate meetings and information exchange among NGOs in the province and to be the bridge between the provincial NGO network and HACC. The focal points, however, are still not able to fulfill well its tasks due to a number of constraints, such as difficulty in balancing the work of the NGO with the tasks of being a focal point; weak understanding of the focal point concept including the tasks and responsibilities of the focal point; and directors of NGOs selected as focal points are not yet fully committed to being the HACC provincial focal point.

In lieu of these challenges, in late 2006 HACC carried out an evaluation of its provincial Focal Point. A number of recommendations were provided from stakeholders on these activities with two key recommendations being:

“Establish and select HACC provincial office and staff: An office is center for NGO members and other agencies to communicate with HACC representative. Based on roles and responsibilities in the agreement, current FP partners barely achieve this with fruitful results because of time constraints and commitment problems. Therefore, provincial FP should have their own office and staff to coordinate and implement activities. When there is a secretariat office, NGO’s will feel more confident to contact and support all activities because they may think HACC is an independent organization. Furthermore, HACC provincial staff will have more time and a higher sense of priority to monitor and directly communicate/ coordinate with NGOs based over large distances between provinces”.

“Empower FP and NGOs: HACC should empower the individual members NGOs to respond directly to the consequence of HIV/AIDS in their communities and to organize advocacy activities or promote a positive social, cultural and economic environment that is conducive to the mitigation HIV/AIDS. HACC should play a support role to local NGO’s in this regard through providing budget support and some technical arrangements.”

### **⌘ Need for 2-way information exchange among NGO/ CBO’s and between NGO/CBO’s and Government/ national stakeholders**

The members vary in their understanding of the role played by HACC and in their ability to appreciate the efforts of the organisation in national and international forums. They also vary in their understanding of the national coordination mechanisms, GFATM workings and the priorities and funding strategies employed by major donors.

Communication with members is on an ad-hoc basis through the mailing list with no systemized structure for the frequency and type of information provided, nor for formal reporting (recommendations/ lessons learnt/ case studies etc) on all major HACC advocacy/ coordination activities. Linkages are weak between HACC work group/ member meetings and plans/ input for the newsletter and website that could have helped ensure their relevance and usefulness. HACC also spends significant amounts of funds on outsourcing documentation/reporting actions and

designing of newsletters/ IEC materials to external contactors, whereby resources could be more effectively mobilized if the organization was able to undertake these actions in-house.

In 2006 HACC have taken some steps to improve information dissemination through the establishment of a resource center/ library on HIV/AIDS, program management and other health issues. This service needs to be further developed to improve the reach of the service to potential users, and through innovative methods to disseminate resources to provincial services/ stakeholders who are not able to regularly physically the Library. In addition, HACC is in the process of establishing an expanded website which will allow users to search it's library database, download resources and access interactive national HIV/AIDS services information compiled through HACC 2006 Mapping activities. The ability of HACC to regularly collect and disseminate national and regional information and regularly update database information on it's website, which it was not been able to do due to understaffing, will be critical to increasing the organizations profile nationally and throughout Asia.

**ⓧ Need for increased capacity of NGO/CBO's to improve overall effective HIV/AIDS Continuum of Care responses**

HACC member organizations vary widely in their size, annual budgets and areas of experience and expertise. This is both a strength and a challenge for HACC. The differences in operational budgets, scope of work, coverage and access to technical expertise are profound. The member organizations work at a variety of levels and have a range of access to information and resources.

In addition, provincial NGO/CBO's whom are not attached to larger agencies also have limited capacity and skill sharing opportunities at provincial level. These organization also have limited exposure to experts in the field, good practice services examples and a detailed awareness of other services available along the HIV/AIDS continuum of care upon which to solid strategic panning and organizational development decisions.

**ⓧ Need for increased capacity of HACC to effectively implement activities**

The Coordinator, in whom all day to day management responsibility is vested, must approve all decisions. Given the current size and level of activity, the Coordinator cannot work effectively both as the spokesperson of the organization and as the manager on all internal issues. While this system worked when the organization was smaller, it is no longer effective. As HACC becomes accepted in more forums as the voice of NGOs responding to HIV and AIDS, the Coordinator is invited to participate in an increasing number of advocacy and policy forums as well as high level multi and bi lateral donor negotiations.

The Capacity Analysis recommended that the organization utilize funds to create a Program Manager position which could focus more on the internal management of the organization, and ensure that programs are well managed, internal communication improves and work is not delayed while Program Officers wait for the Coordinator to return and authorize them to proceed.

As with any rapidly growing organization there is a need for some changes. There is a finance officer, who has a broad range of demands on her time, and a treasurer on the Steering Committee, however the KHANA capacity analysis felt the day to day administration of finances does not allow for adequate checks and balances. The capacity analysis also found that the standard operating procedures are incomplete and guidelines set by the donor organizations are often substituted, which may result in methodological inconsistency as there are several donors and they change over time.

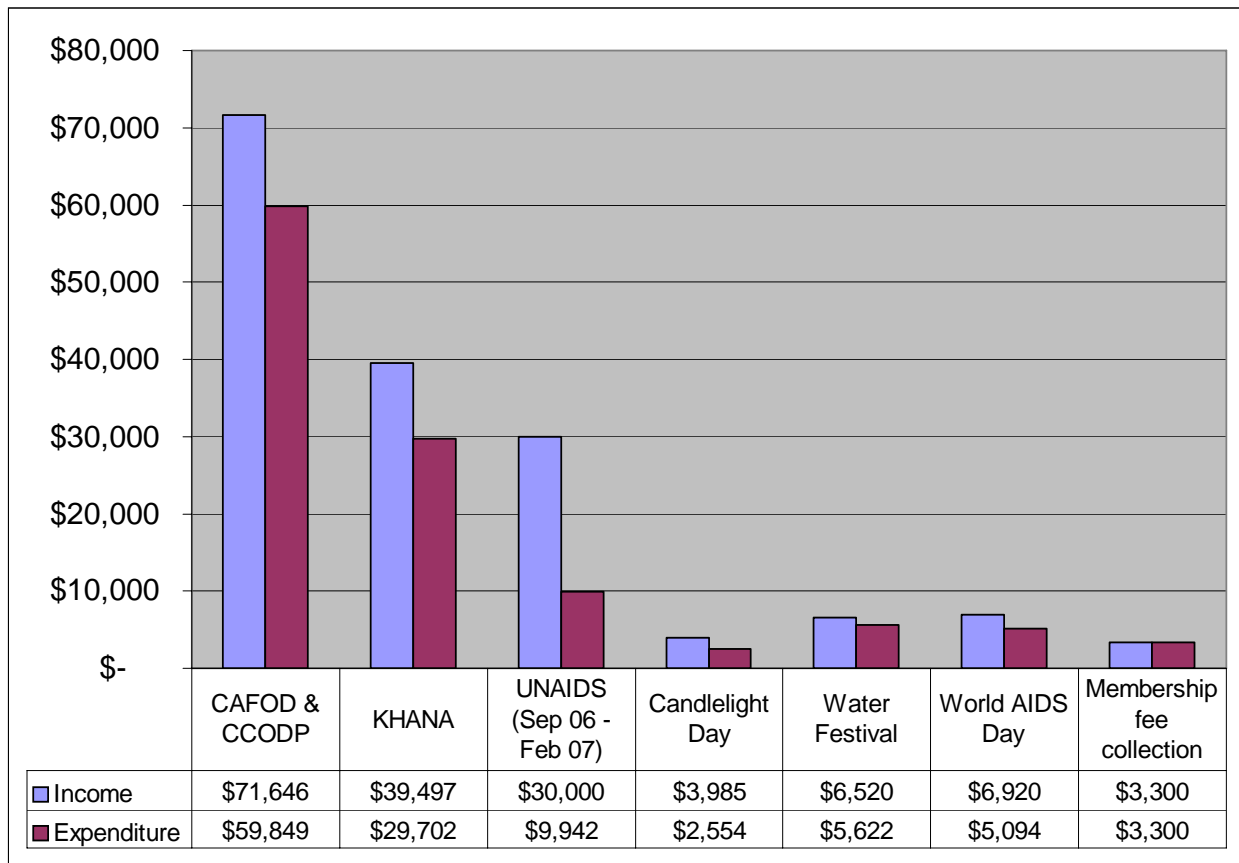
## Staff Development

HACC staff attending major international and national workshops and training in 2006:

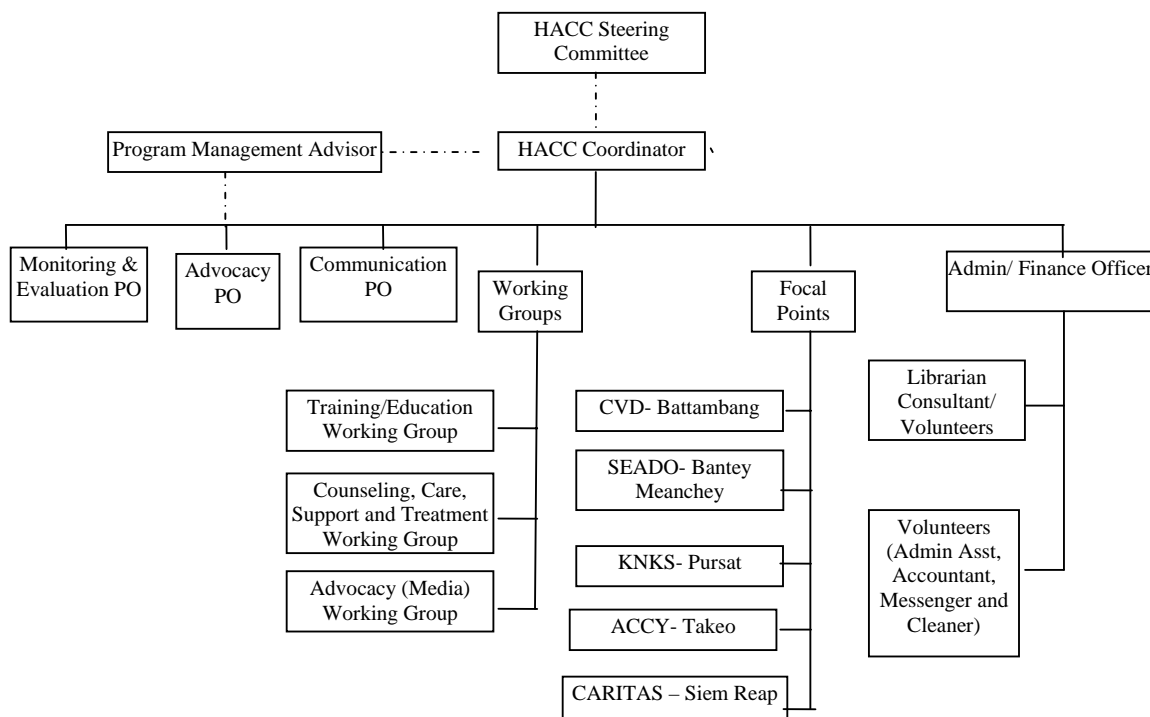
No	Name of Staff	Topic	Duration	Organizers and Location
1.	Mr. Tim Vora	TOT Advocacy Training Workshop	9-13 Jan. 2006	The Policy Project
2.	Mr. Tim Vora	Regional Consultation "Universal Access"	14 - 16 Feb. 2006	UNAIDS, at Pattaya, Thailand
3.	Miss. Orn Sidana	Computer maintenance course		ICS
4.	Mr. Saman Dimara	Advocacy and Capacity Building	6- 7 March 2006	Principle Recipient (PR), at Sihanouk Ville.
5.	Mr. Seng Sopheap	Greater Involvement of People Living with and Affected by HIV/AIDS in Cambodia	25 April 2006	GIPA, at Cambodiana Hotel
6.	Mr. Saman Dimara	Greater Involvement of People Living with and Affected by HIV/AIDS in Cambodia	25 April 2006	GIPA, at Cambodiana Hotel.
7.	Mr. Saman Dimara	Annual Operational Comprehensive Planning for HIV/AIDS Prevention and Care Program 2007	8-11 May 2006	NCHADS, at NIPH
8.	Mr. Saman Dimara	Multi-sectoral and Decentralized Response to HIV/AIDS in Cambodia	29 May 2006	NAA, at World Vision Cambodia
9.	Mr. Tim Vora	Leadership Capacity building to response HIV/AIDS and poverty	7-9 June 2006	NAA & UNDP, at Siem Reap Province
10.	Mr. Seng Sopheap	General Assembly Review of HIV/AIDS	30 May- 06 June 2006	UNGASS, at New York City, USA
11.	Miss. Orn Sidana	Internal Financial Management Course	26 –30 June 2006	SILIKA
12.	5 staff	NGO capacity Assessment	July 2006	KHANA
13.	Seng Sopheap and Miss. Orn SiDana	16th International AIDS Conference	13-18 Aug. 2006	Toronto, Canada
14.	Seng Sopheap	Leadership	6-8 Sept. 2006	NAA & UNDP
15.	Seng Sopheap	4th East Asia and Pacific	11-13 Sept. 2006	Beigin, China, GFATM
16.	Mr. Saman Dimara	M & E course	Aug.- Dec. 2006	University of Cambodia
17.	Mr. Tim Vora	Leadership WS	13-15 Dec. 2006	NAA&UNDP at Sihanuk ville
18.	Mr. Saman Dimara	BBA course of Public Health	2004-2007	University of Cambodia
19.	Mr. Seng Sopheap	Master course of Business Administration	2005-2007	Preston University Cambodia
20.	Mr. Tim Vora	Master course of Public Health	2006-2008	International University of Cambodia

## Financial Summary

No	Donor	Income	Expenditure
1	CAFOD & CCODP	\$ 71,646	\$ 59,849
2	KHANA	\$ 39,497	\$ 29,702
3	UNAIDS (Sep 06 - Feb 07)	\$ 30,000	\$ 9,942
4	Candlelight Day	\$ 3,985	\$ 2,554
5	Water Festival	\$ 6,520	\$ 5,622
6	World AIDS Day	\$ 6,920	\$ 5,094
7	Membership fee collection	\$ 3,300	\$ 3,300
	<b>Total</b>	<b>\$ 158,568</b>	<b>\$ 116,063</b>



## HACC Organizational Structure



### HACC Steering Committee

- 1) **Dr. Kasem Kolnary**  
*Executive Director of CHEC*  
Chair of HACC Steering Committee
- 2) **Dr. Jaime Carrillo**  
*Public Health Specialist of SHCH*  
Vice Chair of HACC Steering Committee
- 3) **Mr. Chum Thou**  
*HIV/AIDS Program Manager of WE/C*  
Treasurer of HACC Steering Committee
- 4) **Dr. Srey Mony**  
*HIV/AIDS Senior Program Manager, WVC*  
Member of HACC Steering Committee
- 5) **Dr. Sok Pun**  
*HIV/AIDS Program Manager of CARE*  
Member of HACC Steering Committee

### HACC Working Group

- 1) **Dr. Ly Cheng Huy**  
*Country Coordinator of ESTHER in Cambodia*  
Care, Counseling and Support W.G Coordinator
- 2) **Dr. Kang Sophal**  
*Team Leader of PSF*  
Media and Advocacy W.G Coordinator
- 3) **Mr. Kim Ton**  
*Senior Trainer of CHEC*  
Education and Training W.G Coordinator

### HACC Provincial Focal point/contact person

- 1) **Mr. Yen Sokha, CARITAS**  
Contact person/Focal point, **Siem Reap**
- 2) **Mr. Iv Kosal/ Mogn Sarat, CVD**  
Contact person/ Focal point, **Battambang**
- 3) **Ms. Sok Sothavy, KNKS**  
Contact person/Focal point, **Pursat**
- 4) **Mr. Kong Samnag/Ms. Koy Vanlyn, SEADO**  
Contact person/Focal point, **Banteay Meanchey**
- 5) **Mr. Ean Kim Chhay, ACCY**  
Contact person/Focal Point, **Takeo**

### **HACC Staff**

- 1- Mr. Seng Sopheap**  
HACC Coordinator
- 2- Miss. Orn Sidana**  
Administration/Finance Officer
- 3- Mr. Tim Vora**  
Communication Program Officer
- 4- Mr. Saman Dimara**  
M&E Program Officer
- 5- Mr. Tieng Saman**  
Advocacy Officer
- 6- Ms. Ros Sothea**  
Advocacy Officer
- 7- Mr. Keo Dara**  
Program Officer

### **Expatriate and local Consultant/Volunteers**

- 1- Mr. Andrew Rankin**  
Program Management Advisor
- 2- Ms. Jasmine Fischer**  
Program Development Advisor \*
- 3- Ms. Touch Socheata**, Librarian Consultant
- 4- Ms. Ith Phallis**, Admin \*
- 5- Mr. Tek Seng Tha**, Admin \*
- 6- Ms. Chuon Leakena**, Admin \*
- 7- Ms. Duch Socheapengja**, Admin \*
- 8- Mr. Vong Savin**, Messenger \*
- 9- Mr. Oeurng Sotheavuth**, Messenger
- 10- Ms. Lun Sopheap**, Admin \*
- 11- Ms. Touch Soton**, Librarian
- 12- Miss. Ban Naren**, Admin
- 13- Miss. Hang Sophany**, Cleaner
- 14- Ms. Nhean Vannary**, Admin
- 15- Ms. Sam Pagna**, Admin
- 16- Ms. Sorn Ramana**, Coordinator Assistant

\* Volunteer finished their contract in 2006.

### ***Strengths of HACC***

- *The goals and mission statement are relevant*
- *Publications well done*
- *The vision and the goal are well supported and relevant*
- *Good governance – SC, sound financial systems, clear hierarchy of responsibility*
- *Good Visibility through the meetings and directories*
- *A solid foundation of activities, membership and participation in relevant forums*
- *Have the confidence of the funding bodies*
- *Resource mobilization is proactive and well conceptualized*
- *Good relationships with government (NCHADS and NAA)*
- *HIV/AIDS is on the health agenda and creeping on to other agendas*
- *Have access to high level decision-makers*
- *Members can name forums where HACC represents them*
- *Good library and information dissemination systems*
- *Can mobilize the sector for big campaigns*
- *Events are well organized*
- *Overall good systems in place to do advocacy, networking, information sharing and coordination*

## HACC Members coverage area

<p><b>Banteay Meanchey</b> CARE, CRC, CSDA, CWPD, FHI, HAI, KBA, RACHA,</p>	<p><b>Siem Reap</b> APHEDA, BFD, CRC, CHEMS, CARITAS, CONCERN, CWPD, ESTHER, FAD, FHI, FRI, FRC, MSF-B, RACHA, RHAC, PSI, SCA, SCC</p>	<p><b>Oddor Meanchey</b> APHEDA, CARE, FHI, CDRCP, CSCS, WE/C</p>	<p><b>Kratie</b> AFH, CSCS, FHI, KWWA, SCA</p>	<p><b>Ratanakiri</b> AFH, CSCS, FHI, RUFADA</p>		
<p><b>Pailin</b> CDRCP, CSCS, CWPD, FHI</p>		<p><b>Preh Vihear</b> APHEDA, CSCS, FHI, WE/C</p>	<p><b>Stung Treng</b> CSCS, FHI</p>	<p><b>Mondulkiri</b> CSCS, FHI</p>		
<p><b>Battambang</b> AFH, APHEDA, BFD, BWAP, CDA, CHEMS, CRC, CRS, CVD, NPC, CWPD, FHI, HAI, PSI, KRDA, LWF, RHAC, RACHA, SCC, WVC,</p>				<p><b>Kg. Thom</b> AFH, BFD, CWPD, FHI, MODE, WRC</p>		
<p><b>Pursat</b> CARE, COHD, CSCN, FHI, KNKS, PC,</p>				<p><b>Kg. Cham</b> AFH, APHEDA, CHEC, FHI, CONCERN, CRC, CWPD, KT, MSF-F, NAS, PSAD, RHAC, SCA, WE/C, WRC</p>		
<p><b>Koh Kong</b> CARE, CRC, MSC, CSCS, FHI, WE/C</p>				<p><b>Kandal</b> CARE, CCD, CCWD, CHEC, CHEMS, CWPD, FHI, ICC, IDA, KWCD, KHANA, MSC, NAPA, SIT, WDA, Maryknoll, WRC, WVC,</p>		
<p><b>Kg. Chhnang</b> CHEC, CHEMS, FHI, CONCERN, CPR, CWPD, LWF, WE/C, Samaritan, WVC</p>						
<p><b>Sihanouk Ville</b> FHI, KWCD, KHANA, PSI, RHAC, WE/C</p>				<p><b>Kg. Speu</b> CARE, CHEMS, FHI, CWPD, LWF, NAPA, WE/C, WOSO, WVC</p>	<p><b>Svay Rieng</b> CARE, CRC, FHI, RACHA</p>	<p><b>Phnom Penh</b> APHEDA, CARAM, CARE, CCASVA, CDRCP, CECL, CHEMS, CSCS, CWDA, CYD, CWPD, DO, ESTHER, FHI, FRC, HAGAR, HIF, HOF, ICC, HOPE, HPHAO, INTHANOU, KDFO, KHANA, KHEMARA, KOSHER, KWCD, Maryknoll, IDA, MS, MSC, MSF-F, NAPA, NEYMO, PSF, PSI, RACHA, Pact Cambodia, RHAC, SCA, SCC, SFODA, SHCH, TASK, UPWD, USG, VC, WDA, WE/C, WOMEN, WRC, WVC, YCC.</p>
<p><b>Kampot</b> APHEDA, CDRCP, FHI, CHEC, CHEMS, CRC, KWCD, RACHA, WE/C</p>				<p><b>Takeo</b> AFD, AFH, FHI, CHEMS, KWCD, MSF-B, PC, SCA, RACHANA, RACHA, ACCY, RHAC, WVC</p>	<p><b>Prey Veng</b> AFH, CARE, CCASVA, CHEC, CHEMS, CRC, CWPD, FHI, PNKS SCA, WOMEN</p>	
<p><b>Kep</b> FHI</p>						