

## Data Sheet

<b>USAID Mission:</b>	Cambodia
<b>Program Title:</b>	HIV/AIDS & Family Health
<b>Pillar:</b>	Global Health
<b>Strategic Objective:</b>	442-009
<b>Status:</b>	Continuing
<b>Planned FY 2005 Obligation:</b>	\$28,700,000 CSH
<b>Prior Year Unobligated:</b>	\$0
<b>Proposed FY 2006 Obligation:</b>	\$27,400,000 CSH
<b>Year of Initial Obligation:</b>	2002
<b>Estimated Year of Final Obligation:</b>	2006

**Summary:** USAID's integrated HIV/AIDS and Family Health program in Cambodia supports primary health care information and service delivery as well as expanded community outreach/coverage and strengthened health system performance. USAID assistance will ensure that access to information and essential services continues to reach the most vulnerable populations. Essential services include comprehensive HIV/AIDS prevention and care, reproductive health and family planning, maternal and child health, and prevention and treatment of sexually-transmitted infections and selected infectious diseases.

### Inputs, Outputs, Activities:

**FY 2005 Program:** Reduce Transmission and Impact of HIV/AIDS (\$14,300,000 CSH). USAID will continue its comprehensive HIV/AIDS prevention and care program with emphasis on services for people with AIDS. To ensure sustainability, faith-based organizations and village leaders will continue to be engaged to help build local capacity. Training in prevention measures will be conducted with the Ministry of National Defense to reach 100% of military personnel. In geographic areas with high rates of HIV/AIDS, USAID will continue to improve capacity and increase the number of HIV testing/counseling sites. At least 13,000 Cambodians will be counseled and tested. Home care, hospice care, and institutional training will be strengthened, and implementation will be scaled up to reach more people in need. Interventions for orphans and vulnerable children now provide social and health services to over 20,000 children. Prevention of mother-to-child transmission of HIV and efforts to strengthen the capacity of the network of HIV positive people, including addressing human rights issues, will continue.

USAID will continue its multi-pronged strategy of using targeted media campaigns for prevention and advocacy; providing training to improve clinical care; educating vulnerable populations; and continuing the "abstinence, be faithful, and condoms" approach to HIV prevention. To monitor program results, USAID will continue to improve the quality of Cambodia's premier behavioral and HIV prevalence surveillance system. USAID will improve systems and build the capacity of both the public and private sectors to deliver health care. USAID is working closely with the U.S. Centers for Disease Control and Prevention to ensure the U.S. Government's overall HIV/AIDS and Tuberculosis (TB) programs in Cambodia are well coordinated. A Memorandum of Understanding was signed with Japan International Cooperation Agency to jointly work on issues related to TB/HIV co-infection. USAID's work with the Global Fund has already positioned Cambodia to receive millions of dollars. The principal grantees are Family Health International, Khmer HIV/AIDS and NGO Alliance, CARE, Population Services International (PSI), the POLICY Project, and local partners.

Reduce Unintended Pregnancy and Improve Healthy Reproductive Behavior (\$3,500,000 CSH). This program will focus on providing technical assistance to providers, increasing client use of services, and promoting behavioral change at community and household levels. The USAID-promoted training for midwives, "Life Saving Skills," has now been accepted as part of the Ministry of Health's (MoH) midwifery curriculum. Emergency obstetrical services with an emphasis on strengthening referrals from health posts remain a priority. USAID-funded social marketing will expand its product mix to include oral rehydration salts and broaden its reach to more rural areas. The principal grantees are Family Health International (FHI), Khmer HIV/AIDS and NGO Alliance, CARE, PSI, the POLICY Project, and local partners.

Improve Child Survival, Health and Nutrition (\$4,500,000 CSH). Child survival continues to receive high

priority from the MoH and other donors, and USAID will continue to collaborate with stakeholders to support the implementation of core child survival interventions such as immunization, oral rehydration therapy, Vitamin A distribution, appropriate treatment of acute respiratory infection and diarrhea, exclusive breast feeding, and appropriate infant feeding. Principal grantees are CARE, Hellen Keller International, Partners for Development (PFD), PSI, and local partners.

Prevent and Control Infectious Diseases of Major Importance (\$6,400,000 CSH). Rural Cambodians often do not have access to trained health professionals. USAID will expand the community outreach program beyond its current role in pregnancy and child nutrition to include training villagers to identify the danger signs of acute respiratory infection, dengue fever, malaria, and tuberculosis. The malaria prevention program will continue the distribution of insecticide-treated bed nets and the promotion of health messages. TB/HIV integration will be expanded beyond the four pilot provinces. USAID will support the national TB program to expand community programs and pilot a public-private partnership strategy. The principal grantees are PFD, CARE, FHI, University Research Corporation, and local partners.

**FY 2006 Program:** Reduce Transmission and Impact of HIV/AIDS (\$14,700,000 CSH). As the AIDS epidemic matures, USAID anticipates expanding care and support services such as voluntary counseling and testing and home-based care and medical treatment to families and communities affected by HIV/AIDS. New areas to explore include HIV prevention among injecting drug users. Implementers: To be determined (TBD)

Reduce Unintended Pregnancy and Improve Healthy Reproductive Behavior (\$3,200,000 CSH). USAID plans to use additional resources to scale up evidence-based child and reproductive health interventions, expand training of health service providers, and improve service access to rural Cambodians. Implementers: TBD

Prevent and Control Infectious Diseases of Major Importance (\$4,800,000 CSH). Expansion of effective infectious disease interventions will continue to be a priority. Integration of TB/HIV services will remain a key feature of the program. Malaria and Dengue control and prevention will continue to be emphasized. Implementers: TBD

Improved Child Survival, Health, and Nutrition (\$4,700,000 CSH). Core interventions in child survival will be the focus of the program. The provision of technical assistance remains important in building capacity in both the community and the Ministry of Health.

**Performance and Results:** USAID continues to produce noteworthy results under the health portfolio in Cambodia. HIV prevalence among sentinel populations continues to decline, and the overall adult prevalence is now estimated at 1.9%, a notable decrease from 2.8% in 2000. As a result of USAID-funded activities, increases in HIV infections, especially among females and perinatals, have been averted. Due to a more strategic intervention approach for reaching youth, healthier lifestyles and behaviors continued to increase.

Concurrently, it has been a remarkable year for the child health program in Cambodia. Significant impacts reported in USAID-supported areas include a marked increase (from 67% to 100%) in the number of children aged six to 59 months who received their recommended dose of Vitamin A. Between 71% and 81% of children aged 12 to 23 months were fully immunized. The number of midwives trained in "Life Saving Skills" was 508, up from 322 in 2002. Midwives who received training came from 19 of 24 provinces, and clinics reported fewer child fatalities due to USAID's activities.

In FY 2006 and FY 2007, key impacts will include increases in the contraceptive prevalence rate, coverage of core child survival interventions, and the percentage of births assisted by a trained provider. Providing access to treatment for people with AIDS will lead to a decrease in AIDS-related mortality.

## US Financing in Thousands of Dollars

Cambodia

	CSH	ESF
442-009 HIV/AIDS & Family Health		
<b>Through September 30, 2003</b>		
Obligations	36,300	6,589
Expenditures	12,376	3,272
Unliquidated	23,924	3,317
<b>Fiscal Year 2004</b>		
Obligations	28,360	1,000
Expenditures	19,865	3,317
<b>Through September 30, 2004</b>		
Obligations	64,660	7,589
Expenditures	32,241	6,589
Unliquidated	32,419	1,000
<b>Prior Year Unobligated Funds</b>		
Obligations	0	0
<b>Planned Fiscal Year 2005 NOA</b>		
Obligations	28,700	0
<b>Total Planned Fiscal Year 2005</b>		
Obligations	28,700	0
<b>Proposed Fiscal Year 2006 NOA</b>		
Obligations	27,400	0
Future Obligations	0	0
Est. Total Cost	120,760	7,589