

PURPLE BRICKS

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KHANA'S MONTHLY BULLETIN

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NEW UNAIDS POLICY ON HIV AND INTERNATIONAL LABOUR MIGRATION

Recent estimates indicate that 86 million people across the world are international labour migrants. Migrant workers bring huge benefits to their families and countries of origin through remittances - the sending of money home and to their countries of destination by contributing to the workforce, economy and society in which they live. Yet at the same time, migrant workers face particular risks and vulnerabilities to HIV which must be addressed.

UNAIDS, in collaboration with the International Labour Organization (ILO) and International Organization for Migration (IOM) have developed a policy brief focusing on the HIV-related needs and rights of international labour migrants, irrespective of their legal status and whether their stay in the destination country is short or long term.

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Cambodian People Living with HIV and Orphans and Vulnerable Children in Battambang province, northwestern country, wait for food distribution of WFP from KHANA's implanting partner. WFP feeding nearly 89 million people, including 58.8 million children, worldwide also met difficulties and it announced to cut some food supply this year. Related story on food on page 3

UNDERAGE MARRIAGE CAUSES HEALTH RISK AND HIV

"Girls who marry as children are often more susceptible to the health risks associated with early sexual initiation and childbearing, including HIV and obstetric fistula," according to a research of the Washington-based International Center for Research on Women (ICRW). The report posted on the International Alliance website added that "Lacking status and power, these girls are often subjected to domestic violence, sexual abuse and social isolation. And early marriage almost always deprives girls of their education or meaningful work, which contributes to persistent poverty."

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HIV risk

Migrant workers often experience isolation and stress as a result of being separated from their families and communities, or perhaps having to deal with harsh working and living conditions. These factors can lead them to engage in behaviours which increase their risk of HIV, such as unsafe commercial or casual sex. Wives and partners of migrant workers who stay in their home countries may also be put at risk of HIV, for example if their husband returns home HIV positive. Yet businesses which employ migrant workers can and are doing things to alleviate some of these risks.

"We have made good progress towards providing family-friendly accommodation or housing allowances, so that migrant workers can bring their families with them if they wish," notes Brian Brink and Edward Bickham of AngloAmerican, a global mining company with employees in countries hard hit by HIV such as South Africa.

International labour migration and people living with HIV

International labour migrants who acquire HIV in transit or destination countries, or who are already living with HIV, often don't have adequate access to HIV and health services. Migrant workers, irrespective of their HIV status, need to be able to access culturally and linguistically appropriate HIV programmes in origin, transit and destination countries.

Governments, civil society, businesses, employee organizations and international organizations all have a role to play in addressing HIV among migrant workers.

"Working abroad is full of challenges and threats and one of the threats is HIV," notes Nerissa Mercado of the Overseas Workers Welfare Agency in the Philippines. "We must help ensure our overseas Filipino workers come home with success stories and are HIV free; after all, their sacrifices help keep the economy afloat. We must likewise assist them if they do become HIV positive".

Migration and human rights

More than 100 countries place restrictions on people living with HIV in entering or remaining in a country for any purpose, and international labour migrants may be refused entry or face deportation if they are found to be HIV positive. Where HIV testing occurs in the context of migration, internationally agreed standards on informed consent, confidentiality, counselling and referral to



Recent estimates indicate that 86 million people across the world are international labour migrants. Photo: ILO/UNAIDS/H.J. Davis

services are not routinely applied. Furthermore, international labour migrants receiving antiretroviral treatment in the destination country may also have their treatment disrupted by deportation, if they do not have access to HIV and health services in their home countries.

International labour migrants, whether in regular or irregular status, should have the same human right to health as nationals. Respecting and promoting their health is essential for achieving national and international public health goals such as universal access to HIV prevention, treatment, care and support, as well as improving the productivity and economic independence of individuals and families.

(Article posted on UNAIDS website: http://www.unaids.org/en/KnowledgeCentre/Resources/FeatureStories/archive/2008/20080716_New_UNAIDS_policy_HI_V_and_int_labour_migration.asp)



Migrant workers, irrespective of their HIV status, need to be able to access culturally and linguistically appropriate HIV programmes in origin, transit and destination countries. Photo: ILO/UNAIDS/J. Maillard

Continued from p. 1: Underage marriage causes health risk and HIV

The report said child marriage causes gender inequality, sickness and poverty and such consequences ripple through the world's poorest regions devastating the lives of girls, their families and their communities. It says despite nearly universal condemnation, this harmful tradition thrives: 51 million girls are married. If nothing changes, another 100 million girls will be married within the decade.

According to ICRW, younger girls are particularly vulnerable to being married to men who are significantly older or men who have multiple wives. It says wide spousal age gaps are far more customary in countries with high rates of child marriage than in countries with

lower rates and that "Large age differences between husband and wife may intensify a young bride's lower status and lack of power, increasing the likelihood that she will experience violence and health risks, including HIV."

ICRW research suggests that prevention efforts should target young girls before they reach a "tipping point" age and all of these may include "promoting primary education for girls and educating families and communities on the dangers of early marriage for young girls."

A program scan conducted by ICRW found these community-based interventions are working to reduce early marriage with multi-

faceted programs that educate families and community members on the dangers of child marriage, provide girls with education and life skills, and offer legal services, among other activities.

Based on the report, Transform Harmful Cultural Norms, Support and Scale Up Community Programs, Maximize Aid Dollars, increase Access to girls' education, Provide economic Opportunities for Young Women, and Support the Needs of Child Brides, including Evaluate Programs to Determine What Works are the best ways to undermine the practice of child marriage. (More on: http://www.icrw.org/docs/2007child_marriage_policy.pdf)

USAID RESPONDS TO GLOBAL FOOD CRISIS

At present, 37 countries throughout every region of the world are experiencing localized food insecurity, lack of access to food, or shortfalls in food production or supplies. In the past year, global food prices have increased an average of 43 percent, according to the International Monetary Fund. On April 14, the World Bank estimated that the doubling of food prices during the past three years could potentially push 100 million people throughout the world into extreme poverty.

Approximately 1 billion people—or nearly one-sixth of the world's population—subsist on less than \$1 per day. Of this population, 162 million survive on less than \$0.50 per day. At the household level, increasing food prices have the greatest effect on poor and food-insecure populations, who spend 50 to 60 percent or more of their income on food, according to the International Food Policy Research Institute. Overall, increased food prices particularly affect the poorest people within developing countries. Among the populations affected by current food insecurity and price increase are people in Haiti and Tajikistan.

GLOBAL FOOD INSECURITY AND PRICE INCREASE UPDATES

NUMBERS AT A GLANCE*		SOURCE
Worldwide Population Subsisting on Less Than \$0.50/day	162 million	IFPRI - 2007
Worldwide Population Subsisting on Less Than \$1.00/day	Approximately 1 billion	IFPRI - 2007

HUMANITARIAN FUNDING PROVIDED IN FY 2008

USAID FUNDING COMMITTED TO ADDRESS FOOD INSECURITY AND PRICE INCREASE

USAID Food and Related Assistance Worldwide in FY 2007: \$1,620,422,634

USAID Food and Related Assistance World-

wide to Date in FY 2008: \$1,475,127,549

Additional USG Funding Announced on April 14, 2008: \$200,000,000

Additional USG Funding Requested on May 1, 2008: \$770,000,000

CURRENT SITUATION

HIGH LEVEL U.N. CONFERENCE ON WORLD FOOD SECURITY

The U.S. Department of Agriculture Secretary Ed Schafer and USAID Administrator Henrietta H. Fore led the U.S. delegation to the High Level U.N. Conference on World Food Security: the Challenges of Climate Change and Bioenergy, hosted by the U.N. Food and Agriculture Organization in Rome from June 3 to 5. During the conference, the U.S. delegation participated in a number of bilateral and multilateral meetings, reaffirming the U.S. commitment to combat global food insecurity: An immediate and expanded humanitarian response that will target those countries most vulnerable to hunger as a result of rising food costs and measures to increase the future availability of key food

staple commodities in targeted partner countries.

SECURITY IMPACT OF THE GLOBAL FOOD SHORTAGE

On June 9, the Overseas Security Advisory Council (OSAC) released a report underscoring the potential longer-term security ramifications from the current global food shortage. The World Bank has identified 33 countries, many of which are already politically unstable, that are vulnerable to social unrest. The map below is compiled from various public media reports and highlights the broad geographic range of countries that have experienced food-related riots and/or protests since January 2007. According to OSAC, the longer-term impact of the crisis may include an increase in families facing poverty, a spread of "food refugees" as populations move to seek food security, increased criminal activities, and inflationary costs in food importing countries as governments increasingly subsidize food inputs.

(Article posted on USAID website: http://www.usaid.gov/our_work/humanitarian_assistance/foodcrisis/)

KHANA TO CONDUCT THREE REGIONAL MEETINGS IN AUGUST

With support from USAID, the Khmer HIV/AIDS NGO Alliance (KHANA) is conducting three regional meetings for its implementing partners in nationwide. The workshop called "The Regional Partner Meeting" is held from 5-8 August in Kampong Cham, Siem Reap, and Sihanouk Ville.

The meeting aims to strengthen partnership by identifying successes, challenges and lessons learnt in program management and introducing new partnership cycle. The meetings are expected to get the same four key outputs -- Reviewed the Achievement, Challenges, Lessons learnt about partnership; Introduced Grant Management; Introduced New Project Cycle; and Reviewed Food Distribution Management.

KHANA's 66 implementing partners are located in three different regions -- South and Eastern Region (Kampong Cham, Kampong Thom, Kratie, Prey Veng, Svay Rieng, Takeo, and Kampot) with 23 imple-

menting partners; Western and Central Region (Phnom Penh, Kandal, Kampong Speu, Sihanouk Ville) with 21 implementing partners; and North and Western Region (Battambang, Banteay Meanchey, Siem Reap, Pailin, Pursat, and Kampong Chhnang) with 22 implementing partners.



KHANA Senior Management Consultative Committee members discuss in a meeting for the whole day of 30 July about several new issues, including the four-day Regional Partner Meeting on 5-8 August.

A NOTE FROM THE 3RD NATIONAL AIDS CONFERENCE SECRETARIAT

The planning of the 3rd National AIDS Conference is in full motion; we would like to thank those who have become so heavily involved, for your continued efforts and contributions within many different areas.

The conference has set the date for the 10-12 September 2008. At this conference we would like to take the opportunity to stop and reflect on HIV and AIDS in Cambodia, to forecast the future, and to realign our efforts, where necessary, to reflect the national strategies. The conference theme is 'A Greater Multisectoral Response to

HIV and AIDS: Towards Universal Access in Cambodia'. By engaging the nation in this conference we hope to ultimately reaffirm Cambodia's commitment to HIV and AIDS and to further raise the relevance of this as a health concern within all sectors.

The mobilization of finances has been successful, the secretariat would like to thank PSI, UNFPA, UNAIDS, UNSECO, CRC, RACHA, KHANA, World Vision (Cambodia), RHAC, PACT (Cambodia), Save the Children Australia, Marie Stopes (Cambodia), LWF, and Cambrew for helping us to make the vital steps towards trans-

forming this vision into a reality.

Please refer to the conference **website** nac3.haccambodia.org to see the most up-to-date conference information. The call for abstracts and exhibition booths remain open, but will close 31st July 2008, unless otherwise stated on the website.

If you would like to contribute to the conference by volunteering your time, through financial contributions or through some other means, please contact the conference secretariat **Mr. Uy Chanthon** through email uchanthon@khana.org.kh

KHANA'S STAFF CORNER

KHANA welcomes one staff member and four voluntary assistants who joined KHANA family in July 2008.



Lay Huoy

becomes KHANA Programme Management Officer on 2 July, 2008. Obtaining Master of Population Studies in India, Mr. Huoy has had experiences in programme management and implementation. "I am very pleased to be one of KHANA's members. I hope I will apply my knowledge and experiences to assist KHANA in order to make transparency, accountability, responsibility and effectiveness of its partner's implementation".



Chhoeurn Sarin

becomes a Volunteer for Strategic Information Department on 21 July 2008. "It's the greatest opportunity for me to work for Khana and I hope that I can earn more knowledge and more experience to strengthen my capacity with Khana."



Sin Channa

becomes KHANA's voluntary assistant in administration unit on July 21, 2008. "It is the great opportunity for me to work for KHANA. I hope that I can learn more and build my capacity during my time with KHANA."

Peng Sopheap

is a voluntary assistant for Finance and Administrative Department on 21 July, 2008. It's a great opportunity for me to work for KHANA and hope that I can learn more and build my capacity with KHANA.



Phai Phorn

becomes a voluntary for Corporate Finance Department on 21 July, 2008. It's a great opportunity for me to work for KHANA and hope that I can learn more and build my capacity with KHANA.



KHANA wishes all the best to one member who left KHANA in July



Meas Kimsan

left KHANA after his four-year work. He got scholarship to study abroad

Kang Davan

left KHANA after his one year and haft. He got a new job. Best wishes



KHANA also announces that its library was officially opened on 18 July. We welcome both internal and external readers who want to research some documents regarding to HIV and AIDS and other related issues.

KHANA's Purple Brief is a monthly news bulletin covering real life stories of Cambodians living with, and affected by HIV and AIDS. The publication also raises significant awareness of the impacts of HIV and AIDS on the broader national and international communities.

The KHANA Communication Committee (KCC) is responsible for the development and publication of the monthly bulletin and the content does not reflect the views and opinions of the donors.

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Khana is a linking organisation of the global partnership
International HIV/AIDS Alliance
Supporting community action on AIDS in developing countries