# STRATEGIC FOCUS

The Government of Cambodia has established itself as a global leader in the fight against HIV, cutting adult infection rates in the general population by more than half in the past 15 years and providing HIV treatment to over 80% of eligible individuals. The goal of CDC's PEPFAR-funded work is to assist Cambodia in their goal of achieving virtual and sustained elimination of new HIV infections by 2025 through the provision of direct technical collaboration in these four strategic areas:

- 1) Finding undiagnosed cases of HIV: Snowballing, risk elicitation, and contact tracing
- Assuring quality across the cascade: "Test and Start", service efficiency, and laboratory strengthening
- Strengthening surveillance and routine monitoring systems: Find, describe and follow HIV+ patients throughout the cascade
- 4) Boosted integrated active case management (intersects the three areas above)

### **KEY ACTIVITIES AND ACCOMPLISHMENTS**

- In 2015 and 2016, CDC supported the Cambodian Ministry of Health's National Center for HIV, Dermatology and STIs (NCHADS) to implement a pilot of external quality assurance (EQA) for point of care rapid HIV diagnostic testing in four provinces at a total of 28 health centers and community based-sites. CDC's contributions included leading the revision of the national HIV counseling and testing (HTC) training package and partnering to provide on-the-job coaching and training for front-line staff and mentors. The final assessment of the pilot and dissemination of results is planned for February 2017. Nationwide expansion of the program by NCHADS is a key effort in reaching the goal of 90% of all people living with HIV in Cambodia knowing their HIV status.
- Following significant, ongoing advocacy efforts by CDC and PEPFAR Cambodia, NCHADS adopted
  a national "Test and Start" policy in August 2016, a key step towards virtual elimination of HIV
  by ensuring that at least 90% of those diagnosed with HIV are initiated on anti-retroviral
  treatment.
- Since 2014, CDC has partnered with NCHADS to implement an intensive Continuous Quality
  Improvement (CQI) program in four provinces, which involves quarterly meetings of relevant
  staff at the national, provincial, operating district and site-levels for an interactive data review
  focused on improving quality of care. This program directly contributes to the goal of 90% of
  patients on ARV achieving viral suppression through a focus on patient retention.

### **Key Country Leadership**

Prime Minister: Hun Sen

Minister of Health: Mam Bun Heng

U.S. Ambassador: William Heidt

PEPFAR Coordinator: Carrie Whitlock

CDC/DGHT Director: Robert Newman

## **Country Quick Facts**

Per Capita GNI: \$1,070 (2015)

Population: 15.578 Million (2015)

Under 5 Mortality: 29/1,000 live births (2015)

Life Expectancy: 68 years (2014)

#### **Global HIV/AIDS Epidemic**

Estimated HIV Prevalence (Ages 15-49): 0.6% (2015)

Estimated AIDS Deaths (Age ≥15): 2,000 (2015)

Estimated Orphans Due to AIDS: Data Not Available

Reported Number Receiving Antiretroviral Therapy (ART) (Age ≥15): 51,088 (2015)

## Global Tuberculosis (TB) Epidemic

TB Treatment Success Rate: 93% (2014)

Estimated TB Incidence: 380/100,000 (2015)

Estimated Who are HIV Positive: 3% (2015)

# **Country Staff: 28**

Locally Employed Staff: 22 Direct Hires: 5 Fellows & Contactors: 1