

Inclusive Self Help Group for enhancing well-being of PLHIV and other marginalized people



Presented by:

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About ARV Users Association (AUA):

- AUA is a membership-based association of people living with HIV (PLHIV)
- Founded in 2002
- AUA is unique among HIV/AIDS organizations in Cambodia in that our staff works directly alongside healthcare providers.
- Our work:
 - 2 national hospitals, 7 Referral Hospitals, 4 prisons
 - ✓ COUNSELLING & SOCIAL WORK
 - ✓ CLINICAL SUPPORT
 - ✓ DIRECT PATIENT ASSISTANCE
 - ✓ ANTI-DISCRIMINATION, HUMAN RIGHTS & QUALITY CARE ADVOCACY
 - ✓ CAPACITY BUILDING, EMPOWERMENT & LEADERSHIP

Before ILDC,

AUA focused on inclusive SHG organizing only. Hospital based, not inclusive, only care-treatment , health focus.

Problems:

Discrimination against PLWHA by community people, local GO, health service providers, in employment opportunity, less accountability, motivation of local GO to HIV/AIDS related issues

Case study sharing: Inclusive Self Help Group



Learning from ILDC

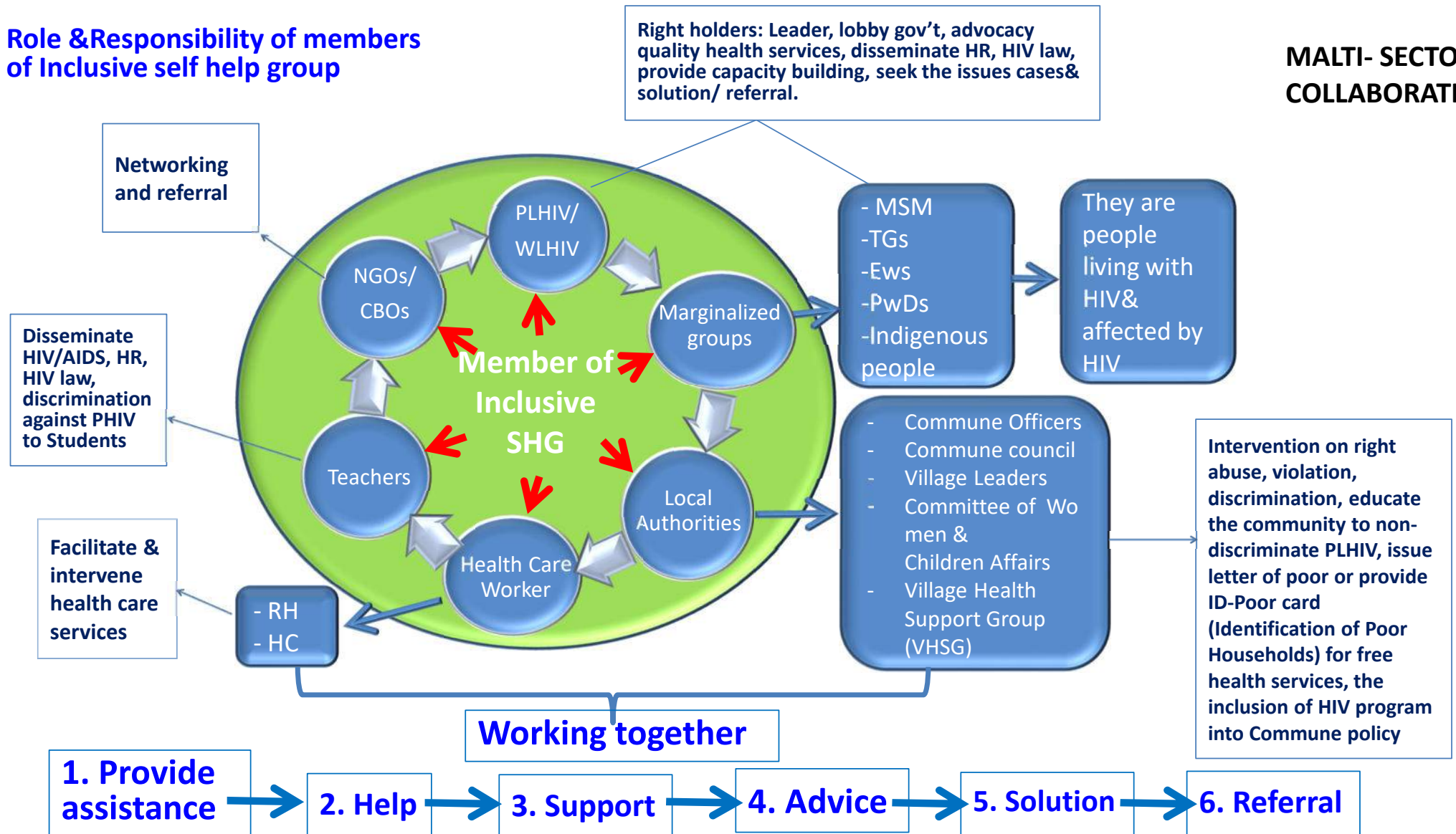
Knowledge and experiences gained in ILDC that applied in the proposed project Inclusive SHG:

- Multi-sectorial collaboration “Inclusiveness”
 - Analysis responsiveness of GO
 - NGO and PO's roles
 - Rights-Based Approach
 - Accessibility, Acceptability, Equitability of quality health care
- Group forming process
- Empowerment and Sustainability
- Participatory Learning



Role & Responsibility of members of Inclusive self help group

MULTI- SECTORAL COLLABORATION



Case study sharing: Inclusive volunteer-led support group

Purpose/ goal:

- Mobilize people, NGOs partners, community, local government to participate in responding to HIV/AIDS activities
- PLHIV& other marginalized groups in target areas will have access in their areas to other PLHIV/WLHIV and community members who have the tools and knowledge to advocate for their human rights, particularly in respect to health care and other relevant services.
- PLHIV& other marginalized groups in target areas will no longer face stigma and discrimination against PLHIV in healthcare settings.
- PLHIV& other marginalized groups in target areas will disclose their HIV status to be helped
- WLHIV in target areas will no longer face stigma and discrimination against WLHIV in accessing reproductive health care settings.
- The community has increased knowledge about HIV/AIDS related matters.
- Stigma and discrimination in the community is reduced.



Activities:Steps for group formation

Conduct training on Human Rights, HIV/AIDS, HIV Law, Gender equity & disseminate social protection policy to community



- Forming inclusive volunteer-led PLHIV self-help groups



- Inclusive SHG sharing their knowledge gained from training to their communities



Activities: (Con't)

- Member of inclusive SHG collects the information issues, intervention and produce case study in their areas



- Member of inclusive SHG organizes quarterly meeting with its member



- Organize campaigns and public forums on rights, stigma, and discrimination through World AIDS Day, International Human Rights Day, and International Women Rights Day



Activities: Con't)

- Inclusive SHGs work as networks with partner organizations, local government, and relevant institutions



Inclusive SHG member meeting with local authority on behalf of beneficiaries



Inclusive SHG members work with Health care workers & local authorities to educate and provide protective material of COVID-19 to community people



Inclusive SHG members disseminate HIV law and social protection scheme to target community

Results/Achievements

7 Inclusive Self Help Groups were formed in 7 districts of Banteay Menachey, Rattanakiri and Stung Treng province of Cambodia

2 district of Banteay Meanchey province



3 districts of Stung Treng province



2 districts of Rattanakiri province



Results/Achievements

Cases intervention

Inclusive Self-help group members (SHG) have been collecting information on issues and challenges in their community and have intervened the target areas:

- The cases relate to domestic violence experienced as a result of HIV status
- PLHIV did not go to access health services because of poverty
- Lost job, no transportation cost to go to hospital
- Assists poor PLHIV to get health equity fund card to access free health services
- Facilitate to get the ID-poor card (Identification of Poor Households) from local authorities
- Supported emergency relief such as food and household materials for PLHIV who are poor, etc.

Results/Achievements

Number of direct and indirect beneficiaries of the program	Total	F	M	Remark
PLHIV	232	149	83	include 71 issues cases have been intervened by inclusive SHGs
MSM, TGs, Ews	15	8	7	PLHIV & affected by HIV
Disabilities	5	1	4	PLHIV
Indigenous people	10	7	3	PLHIV
Local authorities, health care workers and other stakeholders	115	64	51	involved in this project
TOTAL	377	229	148	

Visit cases intervention: https://drive.google.com/file/d/1oMV1knxb0_ShkaBrN_Hd0DyfKdHoi957/view?usp=sharing

Video clip Beneficiary Le Thoeun-AUA-ACT

<https://drive.google.com/file/d/1InjS4MwMPMWqsQVPxPaiq9p7so9udU7y/view?usp=sharing>

Video clip It's my rights-AUA-Voice:

https://drive.google.com/file/d/1UpSm_s2XBOBcAwSsL6iT4SzOTLyTsSP7/view?usp=sharing

Discussion:

Some of local authorities in inclusive SHGs: less collaboration/
less motivation in responding to HIV/AIDS issues.

- How can we strengthen collaboration with local level authorities in inclusive SHG to make HIV/AIDS issue?

Thanks for your attention