

National Policy and Priority Strategies for STD Prevention and Control in the Kingdom of Cambodia

1999

INTRODUCTION:

The Government of the Kingdom of Cambodia has previously established that HIV/AIDS/STDs are health problems of priority national concern. It recognized in associated documents and statements that the prevention and control of HIV/AIDS is intimately connected to those for other sexually transmitted diseases (STDs) because:

- the predominant mode of transmission of both HIV and STDs in Cambodia is sexual;
- persons infected with STDs are at higher risk of becoming infected with HIV;
- persons dually infected with both HIV and STDs are at higher risk of transmitting HIV to another person as well as progressing more rapidly to AIDS;
- many of the same intervention measures are used for preventing HIV and STD transmission;
- STD clinical services provide an important point of access to persons at high risk of acquiring HIV infections; and
- trends in STD incidence and prevalence are a useful indicator of high risk sexual behavior associated with HIV transmission.

The appearance of HIV/AIDS with its fatal complications and recognition of the critical relationship between HIV/AIDS and STDs has led to need for a careful evaluation of national policies and strategies guiding STD prevention and control. Such policies and strategies must also confront those aspects of the STD's which especially prevail in Cambodia. These include:

- The incidence and prevalence of HIV/AIDS and STDs represents a major disease burden on the national population, especially among the young. While there is debate among scientists about the precise toll of STDs in the population generally, and among different segments of the population, it is generally recognized that Cambodia has one of the most rapidly growing HIV/AIDS epidemics in the Asian Region. It is also generally recognized, that STD infection rates will almost assuredly parallel, if not exceed, those which is recognized for HIV/AIDS.
- A multisectoral approach to STDs has been weak. It is the view of too many persons that STDs are primarily a medical issue for the Ministry of Health (MOH). Collaboration with private sector institutions has been underdeveloped and coordination with important partners in the international community and NGOs can still be improved.
- Health care workers within Cambodia have not been well-trained to recognize and address many of the practical and public health realities of STDs prevailing in the

country. Most training to date has been directed at diagnosing and a treating STDs with a lack of emphasis on patient counseling and prevention, alternative treatment protocols where diagnostic capabilities may be deficient, the multisectoral aspects of the prevention and control of STDS and in areas of patient confidentiality and stigmatization.

- Although it has long been recognized that female commercial sex workers (FCSWs) are at high risk for acquiring and transmitting STDs, regular condom use in commercial sex has remained very low and there have been relatively few efforts to address STDs through interventions with high risk men.
- Pharmaceutical products essential in the treatment of STDs have been in short supply in many public service units, especially at the primary health care level.
- Health information systems and routine reporting on STDs has not yet met the needs of health planners and program administrators; the national capacity for conducting special studies on STDs (e.g. as may be required for surveillance and monitoring trends) has been especially weak.

This document has been designed to clarify a number of policies and, equally important, principal strategies which are necessary to address the national problem with STDs. It is also designed to assure that the national approach to STDs serve as an effective and complementary component of national programs against HIV/AIDS.

His Excellency
Senior Minister
Minister of Health

Dr. Hong Sun Huot

NATIONAL STD PREVENTION AND CONTROL POLICIES

The Ministry of Health of the Royal Government of Cambodia hereby declares that:

- 1. STD Response Structure:** *The Ministry of Health recognizes that STDS are a major health problem affecting the general population and a multisectoral response for their prevention and control will be supported by its policies and infrastructure.*

- 2. STD Resources:** *The Ministry of Health assumes a primary responsibility for supporting National STD prevention and control activities and it will encourage the support and collaboration from a broad spectrum of Cambodian society and from the international community.*

- 3. Health Education and Human Resource Development:** *The Ministry of Health, in collaboration with other national and international institutions, shall work to promote a good understanding of the STDs among the general public and among high risk groups as well as to assure that there is adequate technical and professional training for personnel involved in STD prevention and control activities.*

- 4. STD Prevention and Care Services:** *The Ministry of Health shall seek to assure that timely, effective, efficient, affordable, culturally relevant and ethically sound STD prevention and control services are accessible to all citizens.*

- 5. STD Monitoring and Research:** *The Ministry of Health shall take such measures as necessary as to assure that it is well informed on the status of or trends in STDs in the Kingdom as well as the effectiveness of prevention and control activities.*

NATIONAL STD PREVENTION AND CONTROL STRATEGIES, 1999 - 2003

To realize National STD Prevention and Control Policies, The Ministry of Health of Royal Government of Cambodia has identified, shall pursue and will promote the following principal strategies through the year 2003

Policy 1

STD Response Structure:

The Ministry of Health recognizes that STDS are a major health problem affecting the general population and a multisectoral response for their prevention and control will be supported by its policies and infrastructure.

Principal Strategies

- A) STDs will share priority with HIV/AIDS as a health problem that will receive strong political and institutional support.
- B) The prevention and control of STD must be multisectoral, involving the cooperation and collaboration of government institutions, international organizations, non-governmental organizations, bilateral agencies, religious institutions, the private sector and people in communities.
- C) Competent technical and medical personnel within the Ministry of Health will support STD prevention and control policies and strategies. The National Center of HIV/AIDS, Dermatology and STDs (NCHADS) has the principal role of providing technical, medical and scientific guidance to STD prevention and control activities.

Policy 2

STD Resources

The Ministry of Health assumes a primary responsibility for supporting National STD prevention and control activities and it will encourage the support and collaboration from a broad spectrum of Cambodian society and from the international community.

Principal Strategies

- A) The Royal Government will provide financial support for STD prevention and control programs at a level reflecting its priority for this health problem.
- B) Other sectors of the Cambodia society, especially those from the private sector and from provincial and municipal levels, will be encouraged to contribute to or collaborate with the realization of National STD policies and strategies.
- C) Funding and support for STD prevention and control activities will be sought from international organizations, bilateral agencies, NGOs and other public and private sector institutions.

Policy 3
Health Education and Human Resource Development

The Ministry of Health, in collaboration with other national and international institutions, shall shall work to promote a good understanding of the STDs among the general public and among high risk groups well as to assure that there is adequate technical and professional training for personnel involved in STD prevention and control activities.

Principal Strategies

- A) There shall be developed and disseminated, especially through public and private mass media outlets, culturally relevant educational materials which: 1) promote a sound understanding of safer sex behaviors and which discourage risky behavior; 2) encourage appropriate health care seeking behavior; and 3) advance a proper understanding on the relationship between HIV/AIDS and STDs. Special approaches directed at youth and high-risk persons will be a priority.
- B) Educational materials for school curricula will be developed which advance understandings of sexual health including STDs.
- C) Training and continuing education programs of the Faculty of Medicine and the Nursing Schools will be strengthened so as to assure that physicians, nurses and midwives are competent with the preventive and public health dimensions of STDs and with practical treatment norms used in primary health care institutions.
- D) Professional, managerial and technical staff in the prevention and care of STDs will receive training sufficient for them to properly discharge their duties.
- E) Educational materials and programs will be developed for instructing distributors of pharmaceutical products on appropriate drugs to use for the care of STDs, based on the syndromic approach.

Policy 4
STD Prevention and Care Services

The Ministry of Health shall seek to assure that timely, effective, efficient, accessible, culturally relevant and ethically sound STD prevention and control services are accessible to all citizens.

Principal Strategies

- A) All care for STDs in the Kingdom of Cambodia will be non-coercive and non-stigmatizing and it will be undertaken in a manner that protects the privacy and confidentiality of all persons.
- B) Programs for STD care shall use, to the extent possible, the comprehensive case management approach which includes
- rapid diagnosis and appropriate treatment
 - patient education and counseling on treatment compliance, prevention and behavioral changes
 - condom supply
 - information and follow-up on partner notification and treatment
- C) STD prevention and control services shall address the needs of both males and females; innovative new programs that reach out to and address the special needs of STDs among hard to reach groups will be especially encouraged.
- D) Efforts to promote condom use, such as Condom Social Marketing and 100% Condom Use, will be expanded and closely monitored.
- E) Procedures based on the Ministry of Health Supply System will be strengthened to assure that all drugs essential for the treatment of STDs are available to service units that are capable of using them effectively and efficiently.

- F) The Ministry of Health shall develop and distribute such medical and technical guidelines as may be necessary to assure effective high-quality STD prevention and care services in the Kingdom.
- G) An appropriate balance of three complementary STD prevention and care strategies shall be developed and implemented within the Kingdom:
- i) the integration of comprehensive STD care as part of the Minimum Package of Activities (MPA) at the Primary Health Care (PHC) level, including reproductive health and maternal and child health/ family planning (MCH/FP) services, through use of the syndromic approach to STD case management where laboratory support is not available
 - ii) special approaches for the early detection and treatment of persons at high risk of acquiring and/or spreading STDs including especially the routine or periodic voluntary testing and screening of high-risk asymptomatic persons; and,
 - iii) patient care with laboratory support for diagnostic evaluations, as part of the Complementary Package of Activities (CPA), at designated referral hospitals.

Policy 5

STD Monitoring and Research:

The Ministry of Health shall take such measures as necessary as to assure that it is well informed on the status of or trends in STDs in the Kingdom as well as the effectiveness of prevention and control activities.

Principal Strategies

- A) Health Information Systems, including the routine reporting of STDs, shall be strengthened.
- B) Government institutions, NGOs, International Organizations, bilateral agencies, and private sector and community groups will be encouraged to collaborate in such a manner as to assure that there is adequate information disseminated on the status of and trends in STDs in their areas of work as well as the effectiveness of their STD prevention and control activities.
- C) The national capacity will be strengthened to undertake epidemiological, medical or operational research including especially periodic special surveillance studies to assess trends in STD prevalence and to monitor antibiotic sensitivities.