



THE SEEDLING

of hope HIV/AIDS Project



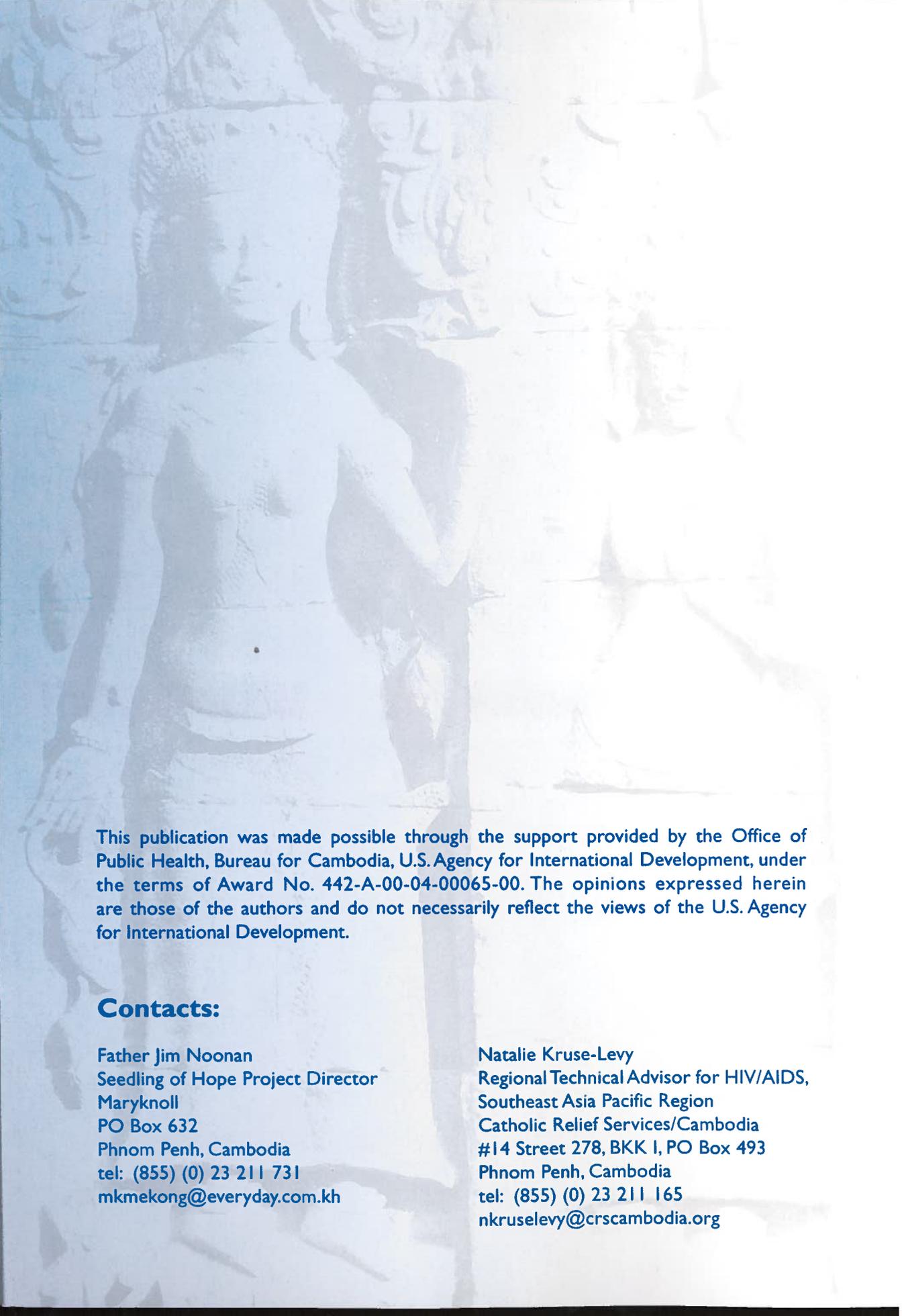
Documenting experiences, lessons learned and promising practices from an urban continuum of care model for people living with HIV/AIDS in Phnom Penh, Cambodia



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FOREWORD

All of us at *Seedling of Hope* are happy to share with you this document explaining our efforts to respond to the many needs that people living with HIV/AIDS confront on a daily basis. The document is the story of our brave and resourceful clients who either came directly to us or who were referred by others.

We have many well worked out services to offer to our clients. In nearly all cases our dear clients are very appreciative. For our part, we have great pleasure in knowing and walking with our clients. They have such a strong desire to live their lives to the fullest, and especially to nurture and raise their children.

Over the nine years that *Seedling of Hope* has been providing service, we have had the privilege to meet and work with many inspiring NGO personnel, Government staff, and friends, too numerous to name in this short foreword. Their direct and indirect involvement with us will never be forgotten. A very special mention of gratitude must be made to our outstanding local Khmer staff, volunteers and our international staff.

The funding support for this large response is considerable. We are very fortunate to have partners who trust our efforts and who always are encouraging when we see the need to expand service - thanks to our donors.

We hope this document will be helpful, especially in encouraging others to create their own response to this great need in Cambodia.

James P. Noonan
Project Director

LIST OF ACRONYMS AND ABBREVIATIONS

AIDS	Acquired Immune Deficiency Syndrome
ART	Anti-retroviral therapy
CAFOD	Catholic Agency for Overseas Development
CRS	Catholic Relief Services
NCHADS	National Center for HIV/AIDS, Dermatology and STDs
NGO	Non-governmental organization
HIV	Human Immuno-Deficiency Virus
PLHA	Person/people living with HIV/AIDS
SOH	Seedling of Hope
STD	Sexually Transmitted Disease
TB	Tuberculosis
USAID	United States Agency for International Development

TABLE OF CONTENTS



Introduction.....	2
Project Highlights.....	2
Country Context.....	3
Purpose of the Project.....	4
Steps in Implementation.....	5
Project Strategy	6
Positive Outcomes and Impacts.....	9
Lessons Learned	11
Next Steps	16
Promising Practices	18

INTRODUCTION

The overall goal of the Maryknoll *Seedling of Hope* (SoH) project is to provide prevention and care services for the poorest people living with HIV/AIDS, and in doing so, strengthen the Cambodian capacity to address the HIV/AIDS crisis. A number of features of the SoH project set it apart from others in the country. *Seedling of Hope* targets not only the poorest of the poor, but also populations that have historically been marginalized in Cambodia such as ethnic Vietnamese and migrant garment factory workers. *Seedling of Hope* focuses on the family and uses a holistic approach in identifying and helping people to meet their needs. *Seedling of Hope* provides a comprehensive range of integrated prevention, care and support services including social support which other institutions

are unable to provide. *Seedling of Hope* accompanies individuals and families through the ups and downs of disease progression and death or recovery and new beginnings on anti-retroviral therapy (ART). Assistance is tailored to the unique situation of each client; as a result SoH is able to make a positive and tangible impact on many lives. By using simple techniques and systems that are replicable, and working closely with Government and other NGOs, SoH serves as a model for learning in the country. Catholic Relief Services (CRS) has supported the SoH project since it began in 1996. Currently SoH has funding from CRS (from private funds, CAFOD and USAID), Maryknoll and Missio Aachen.

PROJECT HIGHLIGHTS



Country:	Cambodia
Sectors of Intervention:	HIV/AIDS prevention, care, support
Number of Beneficiaries:	13,000
Beneficiary Type:	PLHA, Vietnamese minorities, vulnerable urban poor
Source of Funding:	CRS (private and USAID), CAFOD, Maryknoll, Missio Aachen
Duration of Project:	Current project phase ends September 2005

COUNTRY CONTEXT

Though a steady decline has been reported, at 1.9% Cambodia still has the highest HIV/AIDS prevalence rate in the Southeast Asia region. The decline in prevalence has been attributed to increased condom use among sex workers and their clients, as well as a decrease in the frequency of commercial sex, as a result of successful education and behavior change campaigns. From an epidemic that was fueled mainly by unprotected commercial sex, presently most new infections are occurring between husbands and their wives. Prevention of HIV transmission within stable unions and between mothers and their infants, and care for children infected

with HIV/AIDS are newly emerging priority areas. As the epidemic matures there are increasing needs for treatment, care and support services. Cambodia has received funding from the Global Fund to scale-up the provision of ART, and while access is slowly improving, services are still not available for the vast majority in need. Due to stigma, lack of information and poor access to services, many PLHA wait until they are in the advanced stages of the disease and exhaust of all of their savings and assets seeking unregulated and often ineffective treatment in the private sector before accessing reputable public or NGO-supported HIV/AIDS care and support services.



Cambodia, one of the poorest countries in the world, still struggles from the effects of three decades of turmoil and conflict. During the Khmer Rouge regime, families were systematically separated, social networks were destroyed, and the educated were targeted for extermination. Since the general election in 1998 and a subsequent period of relative peace and political stability, there have been some signs of economic recovery. However the lack of social services, poor

access to education and health care and lack of income and employment options continue to make life difficult for many Cambodians. The numbers of urban poor are increasing with large numbers of rural people migrating to the city in search of economic opportunities. Health-related expenses are the main cause of impoverishment of families who use their scant savings, sell possessions and borrow money to pay for poor quality health care.

PURPOSE OF THE PROJECT



The project's objectives are to promote HIV/AIDS education and awareness in target populations in order to change behaviors and decrease stigma and discrimination against PLHA, improve the quality of life of PLHA through the provision of a continuum of care services, and give children affected by AIDS an opportunity to develop their capacities and become economically independent adults capable of contributing to the development of Cambodia.

Seedling of Hope focuses on three distinct target groups: poor and vulnerable families living in Chakangre Leu, Chakangre Krom and Takmao communes which are home to many young garment factory workers who have migrated to Phnom Penh in search of employment; destitute and frequently marginalized Vietnamese in 16 fishing villages along the Bassac and Mekong Rivers; and 3,500 families in the Anlong Kngan resettlement area which was created after fires destroyed a slum area in 2001.



STEPS IN IMPLEMENTATION



In 1995 CRS and a small group of Catholic NGOs sponsored an assessment to determine the HIV/AIDS situation, needs and potential responses in Cambodia. Following the assessment recommendations, the Maryknoll SoH project began in 1996 with education and awareness to high risk populations, pre and post-test counseling, referrals, free medical consultation and regular visits to PLHA at home and in hospital. The project evaluation at the end of 1999 showed that SoH had exceeded its own goals and objectives, at times drastically surpassing indicators of service. At the same time, staff were struggling with ways to address the basic food and shelter needs of increasing numbers of poor and abandoned clients. After reflection on successes, challenges and emerging opportunities, SoH decided to hand over operations to two local

NGOs and move to a new location, Chakangre Krom, which had no services and high concentrations of poor and migrant workers. The new location also afforded an opportunity to work with poor from both Khmer (the ethnic majority in Cambodia) and Vietnamese ethnic groups, thus creating the potential to build bridges between the two sometimes conflicting groups. From 2000-2004, SoH gradually expanded its services to include hospice, group home support, income generation activities and socioeconomic reintegration services for clients on ART. During the same period and in response to the needs of clients and families, new projects dealing with preventing mother-to-child transmission, children infected and affected by HIV/AIDS, and HIV prevention for young people were started to complement *Seedling of Hope*.



PROJECT STRATEGY



The SoH began as an integrated project, including elements of HIV prevention, care and support. New components were added based on the needs of the target population and the project has evolved into a comprehensive response. It is the holistic nature of the project—being able to address health, social, economic, emotional and family concerns—that allows SoH to truly help its clients. Presently, the SoH project includes the following components:

❖ Education and Awareness

Seedling of Hope seeks to contribute to both the containment of the pandemic and the impact by reducing risk behaviors and stigma and discrimination. AIDS awareness activities are carried out by SoH fieldworkers in the homecare areas, marginalized Vietnamese villages along the Mekong, to garment factory workers and by special request to clients of other NGOs or institutions.

❖ Hospice Services

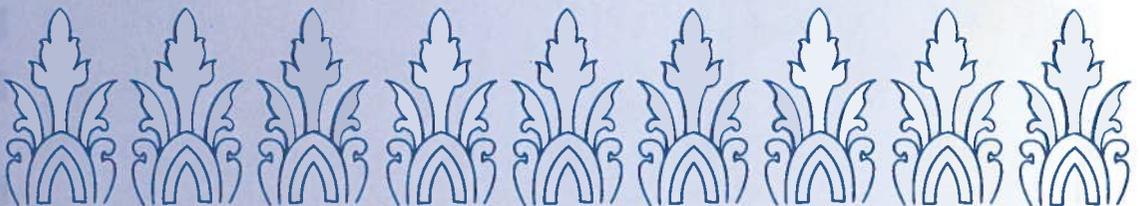
Seedling of Hope provides end-of-life, temporary acute nursing care and social and spiritual support to the poorest individuals who are homeless and suffering from late stage AIDS disease in a 24-hour care hospice.

❖ Group Home Services

The project provides a group home living situation for single PLHA who no longer have a home or family members to care for them in seven separate homes. Minimal assistance is provided to promote both independence and cooperation but the homes are visited regularly by SoH doctors or field workers.

❖ Pre and Post Test Counseling

All new clients who are unsure of their HIV status receive pre and post-test counseling for HIV. SoH facilitates access to testing at NGO or Government-supported health facilities and accompanies the very weak or frightened through the process.



❖ **Prevention, Treatment and Referral Services for Opportunistic Infections**

Seedling of Hope has three physicians who diagnose and treat many types of opportunistic infections. The doctors participate in homecare, hospice rounds, outreach, and visits to the group homes. They also refer clients and facilitate their access to medical services made available by other institutions, such as in-patient TB treatment, laboratory tests and ART.

❖ **Homecare**

Homecare, including psychosocial and spiritual support, is provided to clients in their homes and in the group homes two or three times a week.

❖ **Support Services**

*Seedling of Hope** provides psychosocial and spiritual counseling, if requested, to clients as well as rent and food subsidies as needed. *Seedling of Hope* also supports clients that are admitted into the public TB hospitals with food and the cost of complementary medical care (only TB drugs are provided for free in these hospitals) when needed.

❖ **Economic Opportunity**

The project has found that women often need income-generating activities more than men since they are usually responsible for children, have less education and fewer skills. *Patches of Hope*, which is made up mostly (though not all) of women, provides much needed skills and income for PLHA who no longer can find employment but are capable

of working on a flexible schedule. In addition to providing income to the participants, *Patches* activities allow for a supportive environment for sharing experiences, dreams and fears together. The quilts are sold in Cambodia and the USA through Maryknoll and local churches. In addition to *Patches*, SoH encourages clients to help with the project by providing care to clients in hospital, packing medicines, and helping with awareness activities in return for wages.

While SoH does not provide ART to its clients, SoH works hard to facilitate access to free programs for the clients who need it. Many clients who are on ART are now ready to think about starting new lives, whereas before they had been preparing for death. As a result the *Bridges of Hope* component has started this year to provide counseling, vocational training, psychosocial support, health education (prevention for positives) and other services needed for the transition.

❖ **Related Components**

In addition to the activities described there are two closely linked components with separate funding streams: *Little Sprouts*, which provides prevention of mother-to-child transmission services and treatment and social services to orphans infected with HIV, and *Little Folks*, a project that provides educational and social support to uninfected children whose parents have HIV/AIDS. These components were developed in response to the needs of SoH clients and are essential pieces of the overall response provided by SoH.





— Em Chhoen & Chea

After her husband died, Em Chhoen left her home in Prey Veng province to seek medical help in Phnom Penh. For several months Em Chhoeun battled drug resistant TB in the Seedling of Hope hospice. She was very weak and did not expect to live, but eventually she recovered enough to start taking anti-retroviral drugs.

After being on the treatment for six months she was able to move into one of the project-supported group homes with her son Chea pictured here. Chea is also HIV+ and is in the Little Sprouts ART program.

After being apart for nearly a year, mother and son are now together and their future looks much brighter.

POSITIVE



OUTCOMES AND IMPACTS

Over the years, the SoH project has had many achievements. The project is larger than ever and yet there are still many people that SoH simply doesn't have the capacity to help. Some of the major achievements from 2004 are listed below:

- ❖ Through informal and formal education awareness activities, 11,643 people were reached with HIV-related education, including 3137 clients/members of local NGOs and institutions.
- ❖ At the end of the year, SoH had 1045 adult PLHA clients (507 newly enrolled in 2004). Seventy-nine percent of clients received food support and 40% received some type of housing support.
- ❖ SoH physicians delivered 3940 consultations, primarily for the treatment of opportunistic infections, and facilitated the access of 157 clients to ART.
- ❖ By the end of December 80 of the clients who started ART were participating in *Bridges of Hope* and 21 had been bridged out to a wide variety of activities including providing care to children with AIDS, pig raising, gardening, carpentry, selling food and operating motor taxis.
- ❖ On average 30 patients were cared for per month with up to 15 patients in the hospice at any one time. An average of 60 individuals were living in six different group homes each month in 2004; a seventh group home was opened in early 2005. Though at times there are challenges with personality conflicts, SoH has found the group home approach to be an important way to support homeless individuals and families. Acceptance of the residential facilities on the part of host communities has been very good.
- ❖ Many NGOs came to observe one or more components of the project for learning. On average there were three visitors each week to SoH.
- ❖ With the exception of subsidies to cover international shipping, the *Patches of Hope* quilting project is generating enough income to pay for the salaries of the sewers and all of the supplies. In addition to gaining sewing skills, women demonstrated more self-respect and a better outlook towards life. As a result of the income earned in *Patches*, mothers were able to bring their children back from relatives or foster care to live with them. Eleven sewers were on ART and the rest of the group, save one, was registered on NGO ART waiting lists at the end of 2004.



——Mao Srey Touch, Sok Thim, and Lina

Srey Touch is the very definition of resilience. Born the year before Phnom Penh fell, her father died when she was 7 years old and her mother was quite sick. As a result she went to work washing clothes as soon as she was able. By 15 she was married to an 18 year old young man. They both worked as day laborers, migrating back and forth from Kompong Thom Province to Phnom Penh looking for work. Her sister has raised her oldest child (not shown) almost from birth. Another child died in utero as the result of a motorcycle accident. Srey Touch and her husband have now separated because he isn't faithful. He was very sick when she last saw him, probably with AIDS. Srey Touch is HIV positive but not yet started on ART.

Seedling of Hope has helped Srey Touch with different kinds of care and support services. For a long time, she lived in Seedling of Hope's Group Home Number 5 with her two girls. They now live in a separate rented dwelling. Srey Touch enrolled in the Little Sprouts prevention of mother-to-child transmission project and as a result, Baby Lina is HIV-negative. When the time comes, Seedling of Hope will help Srey Touch to access anti-retroviral drugs and care for opportunistic infections. This way she can stay strong and live to raise these beautiful girls.

LESSONS LEARNED



As is the case with all projects, SoH has experienced its share of challenges and developed mechanisms for dealing with them. Some of the key lessons learned during eight years of project implementation are discussed below.

❖ Reducing stigma and discrimination in the community

In Cambodia a key cause of HIV-related stigma is fear of transmission. *Seedling of Hope* observed a major shift in attitudes as a result of their homecare activities. By visiting the client, sitting with them outdoors and having close contact with them neighbors realize that HIV isn't transmitted through ordinary social contact. Fieldworkers set a positive example for neighbors to follow. Fieldworkers also provide education and awareness materials directly to neighbors. *Seedling of Hope* noted that the more they are clear about how and how not HIV is transmitted, the more relaxed they are with their PLHA neighbors.

❖ Conducting education and awareness activities

When conducting outreach education activities, SoH has found that it's important to keep the setting informal

and flexible. By relying on questions and dialogue, rather than making a set presentation, the fieldworker can address the particular learning needs of the individual. Engaging people where they gather like outside garment factories, in markets and taxi stations is important for reaching people that otherwise would be difficult to reach. Educational materials distributed by fieldworkers have proven very popular in communities because they can be shared with family members at home.

❖ Providing end-of-life care

Seedling of Hope believes that helping people die with a sense of peace is one of their most important services. Allowing people to express their fears, helping them to feel safe, accepted and cared for are all essential parts of the process. *Seedling of Hope* believes it is important that clients not feel like they are a burden or indebted for the services they receive. Instead, SoH makes it clear that they cannot do everything but they are happy to do whatever it is they can for the client. Clients are most appreciative of support to their children and feel more at peace knowing there will be someone to look after their children when they die.



❖ Providing social support

Not having enough food to eat or money to rent lodging are the most critical issues faced by the majority of the SoH clients. Many of the SoH clients would be living on the street in the absence of food or rent support. Most ART programs require patients to show proof of residence, means of food support and drug adherence. But ART alone will not save the lives of people who don't have enough food or a place to live. *Seedling of Hope* believes that providing subsidies for food and rent is imperative for ensuring that clients and their children improve their health and stay well. Being able to provide this kind of support is one of the reasons this project is different from others.

❖ Managing social support

Seedling of Hope provides rent and food subsidies on a case-by-case basis. *Seedling of Hope* has found that not standardizing amounts of support minimizes the perception that benefits are automatic regardless of need. Instead decisions about the type and amount of support are made by the team based on fieldworkers' home visits and assessments. *Seedling of Hope* has found it helpful to phase in social support; financial assistance is only given after a series of consultations, counseling sessions and home visits. The homeless are immediately referred to group homes. In SoH's experience, the best safeguard against fraud is being clear with clients about the exact amount of money they should expect each week. Since clients need the money so badly, they would report any misappropriation immediately

to the office. It is also important to give financial support directly to the intended individual, rather than to a family member or neighbor.

❖ Reconciling needs with capacity

Even though SoH does not advertise or publicize its services, word of mouth travels and many individuals come from outside the coverage areas and distant provinces to seek assistance. The number of referrals from other NGOs, especially for PLHA in need of food or shelter, is also increasing. The project simply doesn't have enough resources to help everyone in need. *Seedling of Hope* has found that it's important to know exactly what services are available in the provinces so that referrals can be made for medical migrants when possible. Another strategy the project put in place is a screening system at the entrance to the SoH center. Before admitted to see a counselor or physician, clients are interviewed to ascertain where they come from, their reason for coming and their expectations. In this way SoH is able to triage those who are in need of immediate assistance and refer those that should seek services elsewhere.

Currently *Patches of Hope* is constrained by space and funds to enroll the number of sewers who are interested. As a temporary measure the project allows some women to sew smaller items like pillow covers and placemats which can be laid out at home. But the *Patches* market is for quilted bedcovers and it requires large spaces, not found in Cambodian homes, to make them properly.



❖ **Creating social and economic opportunities**

Patches of Hope and *Bridges of Hope* are two components of the project that have proved to be vital mechanisms for providing both psychosocial support and economic opportunity for PLHA. The *Patches of Hope* quilting project is set up to be flexible and suited to the needs of the sick. Sewers can work at the center, or at home if they need to, at hours that can be adjusted based on the individual's needs. Sewers support each other and the quilting group operates much like a family. Group cohesion tends to sprout up naturally; it's also helped by periodic social activities, like a lunch outing, which are supported by the project. Feeling part of a larger group and benefiting from this kind of support was especially important before ART was available

and deaths in the group were more common. Participation in *Patches of Hope* affords women an income and skills that they can use in the future to support themselves. Staff have also noted that the pride associated in making something beautiful raises the sewers' self-esteem and improves their outlook on life.

Bridges of Hope has proved to be an excellent exit strategy for assistance to PLHA on ART and since it began last year, several clients have successfully been bridged off assistance and into employment. *Seedling of Hope* has found that many clients have difficulties adjusting to life on ART. Most clients started ART when they were very ill and had no security for their next meal. Even though clients on ART are regaining their health, they often cannot go back to their previous type of employment

(i.e. heavy labor) and they have few skills and little education. Figuring out where to go and what to do is challenging for many clients. In the *Bridges of Hope* project, staff have found that it's important to spend a lot of time with each client in individual counseling sessions, letting them express their fears and helping them make plans.

❖ Working with marginalized groups

Seedling of Hope has had success working with and making services accessible to the Vietnamese minority and there are now a significant number participating in various components of the project. Significant factors include helping Khmer staff to be welcoming, having bilingual staff and having materials in Vietnamese.

❖ Staying motivated

Visiting the sick and dealing with frequent deaths is depressing and challenging for many staff. Maintaining motivation and spirit in work, rather than just going through the motions, is an issue that must be continuously reviewed. Frequent staff meetings, during which time the spirit behind the work is reinforced and relationships between management, staff and patients are discussed are essential. It's especially important for fieldworkers, who normally carry out homecare on their own, to have a chance to discuss together. Frequent meetings help fieldworkers to solve problems, generate new ideas, and to feel part of a support network and less isolated.

❖ Keeping standards high

A challenge with having so many activities has been finding the time to analyze the depth and quality of each. *Seedling of Hope* has found that routine formative evaluations of the medical services are central in keeping standards of care high. Each month certain aspects of the medical program are examined to see how things were first done, what has slipped and what improvements can be made. *Seedling of Hope* also relies on the expertise of volunteer nurses and doctors who periodically advise on standards and procedures. Summative evaluations of each SoH project are performed every three years.

❖ Capitalizing on the Maryknoll and Church networks

A considerable amount of support is made available to the SoH project through Maryknoll and Church networks. For example, the *Patches of Hope* project has managed well by utilizing Maryknoll and other Catholic networks for marketing quilts in the USA and the project recognizes that having a network abroad to facilitate the connection with sellers is critical for making an income-generating activity like *Patches* work. *Seedling of Hope* encourages and benefits from the technical assistance of volunteer physicians, nurses and Lay Missioners. These individuals have contributed immensely to the development of the project.



——Rat Taa

Rat Taa is a quilter in Patches of Hope. Her husband died of AIDS in 2001. After getting married, Rat Taa left her home province of Kompong Thom to live with her husband in Takeo Province. They then migrated to Kompong Som where they found work in a beer factory loading trucks. When Rat Taa was pregnant with her oldest son, her husband began to display symptoms of HIV/AIDS. Eventually he was unable to work and they returned to Takeo. Later they came to Phnom Penh and her husband was admitted to Preah Bat Sihanouk “Russian” Hospital. He died in 2001. Luckily, neither of their sons is HIV positive.

Rat Taa came to know one of the Seedling fieldworkers who visited Russian Hospital. She has been quilting now for about three years. She has remained in contact with both her own family and her husband’s and both encourage her and are proud of her work. Her older son, Rattana, lives with her mother-in-law in Takeo. Her youngest, Na Kim, lives with her in Phnom Penh. Both boys are in school. Rat Taa has not yet started antiretroviral therapy but she is registered for ART and is hopeful that she will be able to provide for her children. She loves working with different colors and patterns to make special quilts.

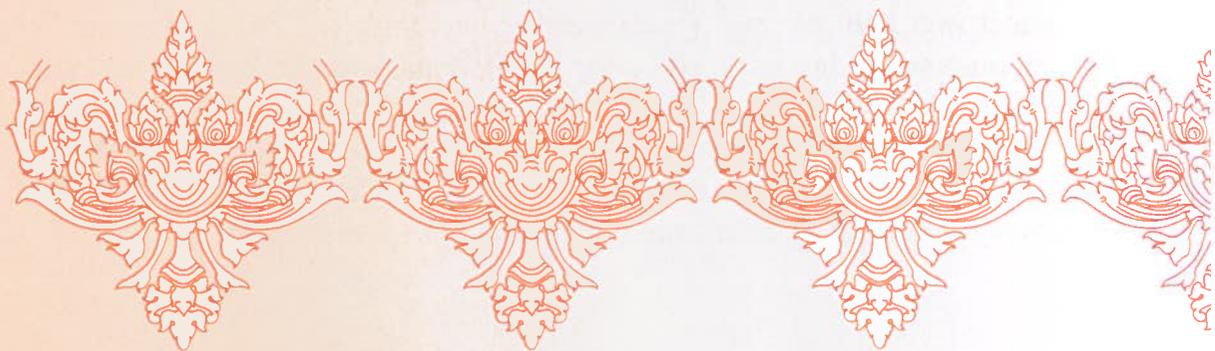
NEXT



STEPS

In the short to medium-term SoH will continue to focus on providing services that other institutions cannot provide. This includes social support services to the homeless and indigent hospitalized patients. *Seedling of Hope* is considering setting up a temporary referral shelter to assist those medical migrants that they cannot fully serve. *Seedling of Hope* does not anticipate starting to deliver ART itself, but SoH will continue to facilitate the access of clients to free treatment programs. With more patients starting ART, *Bridges of Hope* activities will become even more important. As more join the *Bridges* project, the services will be expanded and scaled-up based on client needs. *Seedling of Hope* is currently discussing with the National Center for HIV/AIDS, Dermatology and

STDs (NCHADS) and other partners mechanisms for providing technical support to assist the Takmao and Koh Tom referral hospitals to establish and provide a full range of continuum of care services, including ART. *Seedling of Hope* is also working on accessing garment factories to start formal HIV/AIDS education activities, as well as improving the supervision and feedback systems for HIV/AIDS awareness activities in general. *Patches of Hope* aims to become financially sustainable in 2005, with the longer-term goals of renting a larger sewing center, hiring more sewers and eventually localizing the project. New products that could be made by hospice or group home residents are also being considered as part of *Patches*.



Donh Yan

Donh Yan is a divorced mother with one child. She was a victim of domestic violence and when her husband drank, he became violent. One time, in a drunken rage, he burned down their house. With no education or skills, Yan was very dependent on her husband. After they separated and before she fell ill she was able to get some work as a laborer.

When Yan knew she was sick, she left the province and came to Phnom Penh in search of help. Seedling of Hope has provided food and rent support for Yan and her child for several years. Seedling of Hope also ensured that she was registered with an ART program. Both Donh Yan and her little girl both now receive ART from Médecins Sans Frontières.

Donh Yan joined the Bridges of Hope program in July 2004. Her dream was to build a house next to her aunt and uncle in her home province and sell goods in the local market. She is blessed with very supportive relatives who have endorsed her plan. Seedling of Hope provided the money for her to build a small addition to her aunt's home, shown in the picture. Working with Yan and her extended family members, SoH will also provide a small grant and loan for starting a small business. Mother and child moved to their new home in June 2005.



PROMISING PRACTICES



It is the comprehensive, yet flexible, nature of services provided by the *Seedling of Hope* project that makes it effective. Some of the strategies that have proven particularly valuable include:

- ❖ *Focusing and tailoring services to meet the needs of the marginalized.* *Seedling of Hope* works in underserved, poor, densely populated areas of Phnom Penh, employs staff who speak Vietnamese and Khmer and produces materials in both languages.
- ❖ *Focusing on the family and using a holistic approach in identifying and helping people to meet their needs.* *Seedling of Hope* provides assistance both to the PLHA client and the family, making sure children have enough to eat and can go to school. While the direct support that SoH provides to children is limited, specialized child-focused projects such as *Little Sprouts* and *Little Folks* were initiated alongside SoH to meet the needs of SoH clients.
- ❖ *Providing a comprehensive range of integrated prevention, care and support services including social support which other institutions are unable to provide.* *Seedling of Hope* refers patients to partner institutions, frequently in person, to access services that they do not directly implement. Food and lodging are the most pressing problems faced by clients and SoH makes sure that these basic needs are met.
- ❖ *Accompanying individuals and families through the ups and downs of disease progression and death or recovery and new beginnings on anti-retroviral therapy (ART).* For those that are alone and near death, the project operates a hospice. At the other end of the spectrum is *Bridges of Hope*, a unique socioeconomic project to transition clients who are starting new lives on ART.
- ❖ *Tailoring assistance to the unique situation of each client.* Recognizing that capacities and needs are different for everyone, participation in activities and levels of assistance is determined on a case-by-case basis.
- ❖ Using simple techniques and systems that are replicable, and working closely with Government and other NGOs to serve as a model for learning.



—A Seedling of Hope Caregiver

Nop Chan Dara has been a caregiver for more than a year now and is in the Bridges program. He, like our other caregivers, is a strong and resilient PLHA. He started ART when his CD4 count was under 10.

He has been very lucky and has not had major infections like TB or meningitis, so has gone from weakness to strength.

Dara was orphaned during the Pol Pot regime. He has one sister who also lives in Phnom Penh. Dara is engaged to marry one of the Patches sewers and hopes one day to have his own family. The couple plan to be small farmers and raise pigs.

In the meantime, Dara helps our other clients when they are hospitalized at Preah Bat Sihanouk “Russian” Hospital.

The client that Dara is pictured with is Sop Sar. Sar has started ART but is experiencing a strong negative reaction.



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