



KINGDOM OF CAMBODIA
Nation Religion King

NATIONAL AIDS AUTHORITY

H.E. Mr. Ieng Mouly, Senior Minister and Chair of the National AIDS Authority , meets

Dr Pieter Van Maaren, WHO Representative

January 10, 2014

Note taken by Dr. Tia Phalla

1. On January 10, 2014, at NAA Headquarters, H.E. Mr. Ieng Mouly, Senior Minister and Chair of the National AIDS Authority welcomes Dr. Pieter Van Maaren, WHO Representative for this courtesy visit after his official appointment in October 2013.
2. H.E. Chair of NAA pinpoints out the 7 point policy Directives of the Royal Government of Cambodia that has been issued on December 17, 2013 as per order of Samdech Techo Prime Minister. One of those points stated that the National AIDS Authority has leading roles on aid effectiveness and bears the responsibility for a nationwide HIV and AIDS response. He also reminds WHO Representative that for improving the collaboration between key stakeholders, the Prime Minister agreed to restructure the leadership of NAA whereby HE Mam Bun Heng , Minister of Health has been appointed as the 1st Vice Chair of NAA.
3. As the CCM/GFATM is in the process of renewing its membership and chairmanship in 2 014-2015 term, Dr Pieter Van Maaren, WHO Representative informs H.E. NAA Chair about the leading role of the government in this mechanism to oversee the grant implementation for HIV and AIDS response in Cambodia. In this regard, representatives from Council of Development in Cambodia, Ministry of Economy and Finances, Ministry of Health, National AIDS Authority and others ministries could submit their candidature for the CCM election that is scheduled on January 16, 2014.
4. H.E. Chair of NAA stresses out the lesson learned from ICAAP 11 that innovations should be applied in the leadership and the management of HIV and AIDS response in Cambodia. “Not Business as usual” should be the motto for enhancing mutual accountable for the results, the effectiveness and the efficiency of the response. Efforts should be mounted to avoid the painful experience where at one point there are excessive funds for some areas at the time that some

needy parts of the program are not well covered. As for sustainability, we need to find alternative to secure a long term solution where HIV and AIDS can be integrated in overall health system and other key social sectors. Provision of livelihood to needy PLHIV and OVC as part of social protection is not only seen as rights based obligation but a good example for retaining ART users in health system.

5. For strengthening the country system, HE Chair emphasizes on good and open collaboration with stakeholders and that NAA is looking for technical assistance from development partners to upgrade technical and institutional capacity of government officials. On this particular issue, Dr Pieter Van Maaren from WHO added that expatriate resource persons need to learn the country system as well to effectively perform the common task. It is actually “a giving and taking” process.