

**Report on MARPs and Media panel discussion
06th December 2013 at Intercontinental**



Introduction:

KHANA is the one of 6 countries that received funding support for Asia Action Community Advocacy on Harm Reduction. KHANA Asia Action project collaborated with NAA and UNESCO to enable media environment to support reduction of discrimination among the most-at-risk populations through a “Media Partnership Workshop for Reducing Stigma and Discrimination among MARPs on Higher Risk of HIV Exposure” from 17 to 18 November 2013.

To follow up the progress with media trainee group, KHANA was organize a MARPs and Media Panel discussion on 06th December 2013 at Intercontinental hotel. The meeting aim to provide opportunity to the media group and representatives of MARPs, and NGOs to open dialogue on the concerning issues and find out the improvement of media information into support to MARPs. There were around 46 people attend this meeting they were from TV, radio, news paper, from NAA, NGOs and representative of PWID/PWUD, MSM, EW.

Result of the meeting:

Item 1: Welcome remarks by Dr. Oum Sopheap

- **Reiteration of the 3 Zeros: Zero new HIV infections, zero discrimination, and zero AIDS-related deaths**
- Today's Panel discussion we focus: Zero discrimination
- Our dream is to see an AIDS-free Cambodia and the world – a dream of the 3 zeros
 - We're proud of our achievements in driving down the HIV/AIDS infection rates for Cambodia
- Media plays a major role in educating and informing the public regarding our fights against HIV/AIDS-related stigma and discrimination
- 2015-2020:
 - No new HIV infections, particularly for MARPs
 - Need for increased understanding and awareness among the public and MARPs in particular
- Problem: People not knowing their HIV status but continuing risky behaviors, placing partners and others at risks as well
- Task: Find and encourage people to take HIV tests
 - 55,000 receiving ART treatment
 - 5,000-7,000 pre-ART treatment
 - 10,000 not taking HIV tests → not aware of their HIV status
 - + There's a need to address this population group
 - + There's a need to create a conducive, fear-free environment for them to take the test
 - + Where are they mainly?
 - EW (38,000 and 2/3 in Phnom Penh) at 4% - 14%
 - MSM (21,000): Short-haired, Long-haired
 - PWID (unofficial number 1,300 – over 99% in Phnom Penh – and infection rate at 25%) and PWUD (unofficial number 13,000)

We still have challenges such as Hard-to-reach, they were hidden, smallest number but highest infection rate. There's no clear guideline and best practice for PWUD, no clear evidence to show direct linkage between PWUD and HIV infections → Suggested to leave PWUD out of the MARPs category. Surprisingly, PWUD's HIV infection rate is at 4%! There's a need to study them more and come up with proper mechanisms to address this issue.

Aggressive measure in place: As soon as detected HIV-positive, people will be transferred to counseling and treatment immediately and encouraged to bring in their partners for testing and counseling as well

Item 2: Outcome of last meeting with NAA by H.E. Dr. Teng Kunthy

- KHANA as a strategic and critical partner in our battle against HIV/AIDS
- Today's focus is on discrimination
- Recent ICAPP in Bangkok: Agreed that HIV/AIDS is still here and needs our attention

- Discrimination is a major roadblock to us achieving our goals of no new HIV infections and AIDS-related deaths → We need to get rid of this roadblock; otherwise, our strategic plan for the 3 zeros won't work.
- Most critical mechanism to reduce discrimination: awareness and mutual understanding
 - If there were enough information and awareness among at-risk people, they wouldn't be in such a dangerous situation.
 - Modern technology can be useful for spread of awareness as well.
 - People are more technologically aware and becoming active practitioners of digital communications (social media and networking)
- 12 HIV/AIDS-related articles published by TV, 6 by radio, and 15 by print media
- \$58m spending on HIV/AIDS per year in Cambodia
- Besides treating news as mere reports, media personnel should also integrate educational and inspiring messages into their news pieces to spread better understanding and encouragement among the public, especially MARPs.

Item 3: Short film and story sharing by MARPs

- Drug user representative – Ms. Phorn Sina, 33
 - Started using drug in 1997 till 2008
 - Started using drug 'cause of peer pressure and wanting to be a gang member
 - Beginning of the story: Why are they so cool? I need to be like them (to have money to spend like them, to have bodyguards, to have fun)
 - At the beginning, no food for over a week and there was the constant need to stay happy and feel good
 - It was free at the beginning (provided by the ring leaders), but then the dose increased, and she had to be involved in sex work to get the money to cover for drugs.
 - Spending between \$100-\$300 to as much as \$1,000 (as a group) a night.
 - When not taking drug, aggressiveness, anxiety took over.
 - She had to seek rehabilitation center to start cutting down on drug use.
 - Why decided to seek help?
 - Deteriorating physical and mental health
 - Nose bleeding, partial loss of sight, high blood pressure, constant headache
 - Family discrimination
 - How to cut down?
 - Physical exercise
 - Work distraction
 - Stay in rehab center
 - Volunteer to work at KHANA
 - Suggestions
 - Establishment of rehab centers for women
 - Public awareness

- She's stayed clean since 2010.
- EW and SMARTGirl representative – Ms. Gnan Sreyleak, 22
 - She used to be a dancer.
 - Started work as EW at 15.
 - Due to family hardships, she took a job as a cleaner but had to quit due to the father's degrading health.
 - After the death of the father, she has to take care of her mother all by herself (the other siblings are married and just worry about their own families).
 - Discrimination from neighbors: they treat her as if she's involved in sex work when she in fact just works at a restaurant (beer garden) as a waitress.
 - Guests are very impolite and keep going with the degrading sexual harassment.
 - Stopped working as EW a couple months ago and become outreach worker (OW) with CWPD.
 - SMARTGirl+ to target EW who use drugs.
 - Plead: The public should be aware that just because women work as entertainment workers, that doesn't mean they involve in sex work and that they enjoy it.
- MSM representative by Mr. Hoeung Piseth, aka Cindy
 - Family pressure could lead to LGBT kids leaving home
 - Neighbor pressure → family pressure
 - Involved with the wrong group of people
 - Some were forced to be involved in drug use and sex work due to lack of financial resources, family pressure, and living in rural areas
 - Plead: please don't overgeneralize and use discriminatory and derogatory terms towards MSM.
 - From the media: what terms do we use to properly address MSM?
 - "Sot" – still an evolving term
 - "Kteuy" – currently socially treated as a rather negative connotation
 - "Third gender" – as in official use for now
 - There should be an official identity to properly represent MSM
 - From the media: there's also a need to deal with derogatory words within the MSM community
 - Challenges to find work because of their sexual orientation
 - It's hard to reach the drug-use MSM cliques since they don't trust people outside of their cliques.
 - "We need to fight for equal rights and treatments like other people in our society."

Note : HE Dr. Teng Kunthy mention that the word Kteuy is the Khmer language (please back to check in the Khmer dictionary) to identify the third sex : for men who act as women and for women who act like a men. He have the idea we need to have

one meeting to discuss and agreed about the words should be use with MARPs especially the MSM group.

Item 4: Experience with information and media coverage on MARPs by Mr. Chhay Sophal, Editor-in-Chief, Board Member of the Club of Cambodian Journalists (CCJ)

- (Contact for his slide presentation)
- There's a gap between the media and MARPs.
- Media roles: information sharing, education, entertainment → change negative attitudes
- MARPs-wise, media focus mainly on policymakers and civil society working with HIV/AIDS.
 - Articles also cover harm reduction and IDUs.
 - Direct interviews with MARPs as well as activists and counselors, etc.
 - Not much coverage on lesbians but more on MSM and TG
 - Translation work on MSM, discrimination
 - Direct interviews with EW (at brothels, for example) and advocacy work for EW
 - Why? What caused them to do such work?
 - What's the work-related harm they've experienced?
- Why the gaps?
 - So many issues that all demand the media attention and coverage
 - Health
 - Gender
 - Social justice and human rights
 - Environment
 - Youth
 - Politics and development
 - Entertainment
 - Other reasons:
 - Lack of cooperation between state and non-state institutions and the media regarding HIV/AIDS information
 - Some state and non-state institutions are not pro-active with media coverage (waiting till the media approach them instead of the opposite)
 - Media's bottom-line is profit-making since media is a business.
- **Recommendations:**
 - State and non-state institutions need to increase their communications with the media.
 - They need to know the different scopes of info/media (local, regional, national, or international).
 - They need to strengthen their relationships with the media through various events – press conferences, talk shows, etc.
 - Cut down the bureaucracy and increase approachability

- Know the media's deadlines and standard of procedures
- Be understanding of and prepared for the Media's tough questions
- Have media package at the ready (articles, photos, etc.) to facilitate news collection.