SiRCHESI's NEWSLETTER: JAN., 2008

Siem Reap, Cambodia, adjacent to the Angkor Wat temples, attracted over 1,700,000 visitors in 2006; tourism is this provincial capital’s leading industry. SiRCHESI (Siem Reap Citizens for Health, Educational, and Social Issues) is a non-profit, non-religious, non-political and non-governmental organization (NGO) formed in Cambodia in 2000. It finances its activities independently through grants (e.g., Elton John AIDS Foundation, M.A.C. AIDS Fund) and private and corporate fundraising and donations.

Cambodia is one of the 20 poorest countries in the world, devastated by warfare and a population loss estimated at 25% during the genocide of 1975-9. Siem Reap, amidst a growing tourist boom, still cannot provide the basics for its citizens. Literacy rates for women are estimated at less than 30% in the province; our interview data suggests the average woman has less than 2 years of schooling, and this later impacts job possibilities. Many resources for the health system must be provided by NGOs such as SiRCHESI, Doctors without Borders (MSF), ESTHER, CARITAS, foundation-supported Angkor Children’s Hospital and Khanta Bhopa III Hospital. In 2006, the Global Fund for HIV/AIDS, Tuberculosis and Malaria began taking a vanguard role in providing needed anti-retroviral therapy. NGOs continue to deal with education, human rights, gender and micro-economic development issues. As does SiRCHESI, many coordinate their activities with government ministries (Women’s Affairs, Tourism, Health), National AIDs Authority (NAA) and NCHADS (National Centre for HIV/AIDS, Dermatology and STIs).

SiRCHESI IMPACT ON LOCAL HEALTH PROJECTS

Beginning in 2000, SiRCHESI brought together concerned citizens, business persons, and community health and medical workers, while forging links to local and international research and practice expertise and resources. Our multi-sectorial approach to community health-promotion targets HIV/AIDS and alcohol abuse. In 2002, SiRCHESI began creating effective, innovative, and proactive workshops and outreach programs.

In 2006, SiRCHESI opened a small school to help create new careers in the healthier workplaces of large hotels. Our programs also focus on gender equity, literacy and education, improving workplace health and safety, improving economic security and welfare, and prevention of the sexual exploitation and trafficking of young women and men, boys and girls. A Participatory Action Research (PAR) approach guides SiRCHESI’s creation and monitoring of new health promotion projects. SiRCHESI helps strengthen local infrastructure, through its “hybrid model of capacity building”. Our NGO staff wear two hats, retaining their public service positions, with flex-time scheduling.

Dr. Sarath Kros is SiRCHESI’s part-time NGO Program Director and supervises 6 part-time staff, a school staff of 4 and a network of 17 peer-educator outreach workers, as well as student interns, visiting researchers and volunteers. He also heads the Siem Reap Provincial AIDS Office (PAO), is Secretary of the Provincial AIDS Committee (PAC), and Deputy Director of the Provincial Health Department. He thus ensures effective co-ordination and co-operation among government and NGO programs. (See the website: www.angkorwatngo.com). SiRCHESI staff creating new workshops on the weekend can utilize and disseminate these programs further, while performing their week-day jobs in the public service.

WHY IS THE HEALTH CRISIS STILL SO DEADLY?

Siem Reap welcomes throngs of cultural tourists, but also arriving are traffickers of women and children, sexual tourists, paedophiles, and men who come to be “cured of HIV/AIDS by sleeping with young virgins”. These groups all increase HIV/AIDS and STI rates in the community. When impoverished or under-paid local women exchange sex for money, infections are “bridged” to local men earning income from tourism, then to wives, partners and newborns. Siem Reap’s HIV/AIDS prevalence rates have been (1995-2003) the highest in Cambodia, which, in turn, has had the highest rates in South-East Asia, particularly for young persons (15-19 years). In Siem Reap, an estimated 7-
10,000 persons are living with HIV/AIDS (PLWHAs); in 2004, only about 100 adults and 9 children were receiving daily the life-saving anti-retroviral therapy (ARVT) medications from NGOs MSF (Doctors without Borders), ESTHER, and 2 private hospitals, Angkor Children’s Hospital and Khanta Bhopha Ill. By 2006, about 1000 persons were being treated with ARVT. SiRCHESI has prodded global/international corporations profitably doing business in Cambodia to provide fair wages, health education, safe work places and ARVT for their HIV+ employees (e.g., the beer promotion women for international beer brands have had an HIV+ prevalence rate varying about 20.5% (1995-2003). In August, 2006, one beer company, Heineken, suggested that providing free ARVT/HAART to its African (male) employees was a good business practice which should be emulated by other corporations, and the editors of the Lancet medical journal supported this health-business partnership model. In Sept., 2006, SiRCHESI authors challenged Heineken and other corporations to do even more with free ARVT, e.g., for women workers world-wide and especially for its Cambodian beersellers (van Merode, T., Kros, S., Dy, B.C. & Lubek, I., 2006. Antiretrovirals for employees of large companies in Cambodia. the Lancet, 368, Sept. 23, p. 1065.) SiRCHESI continues to prod brewers to provide a “fair” or “living” wage to their sellers ($110 US monthly) to eliminate risk-taking. In 2006, the Hotel Apprenticeship program began “rescuing” women from the entertainment industry and placed some in safer workplaces in hotels, with a $110 living wage.

**RECENT SiRCHESI ACTIVITIES (2006-7):**

Since 2001, SiRCHESI has built an active outreach program for groups at risk for HIV/AIDS, surveying bi-annually 4 HIV+ risk groups (N=560). By 2003, we developed workshops for married women and men, beer promoters, and for other NGOs, adding alcohol over-use in 2005. Our peer educator outreach program continues to increase health promotion activities, reaching 880 persons in 2002, 1848 in 2003, 2678 in 2004, 3460 in 2005, 4164 in 2006, and 6000 targeted in 2007. In 2004, SiRCHESI began monthly workshops for young souvenir vendors at Angkor Wat at risk from sexual predators; we provide health, street-proofing and micro-economic empowerment skills. HIV+ rates reported by Siem Reap hospitals (2004) for infants, children and adolescents varied between 1.6% and 23%.

Are we having any effect? In 2005 and 2006, unofficial (VCCT) statistics indicated reduced HIV prevalence for married pregnant women, sex workers and beer-sellers. Despite these optimistic indicators, we continue our prevention activities in this constantly expanding community, alongside other government agencies’ and NGOs’ activities (ARVT, home-based care, stigma reduction, counseling, etc.).

These programs were launched initially and developed with the help of the Elton John AIDS Foundation and M.A.C. AIDS Fund, the latter currently supporting us into 2009. Other SiRCHESI funding sources have included Rotary International and M.A.C. AIDS matching funds; talks to Universities, international conferences, and community service groups; a benefit concert (2004) by Toronto Khmer band “White Tiger”; a 2006 fundraising evening at Hugh’s Room (Toronto) with folk singers Marie-Lynn Hammond, Connie Kaldor, Gwen Swick, Caitlin Hanford, the Khmer Folk Group of Toronto, an excerpt from “Virgin Harvest” (Charles Kisyelyak’s film of sex-trafficking in Cambodia), and guest speaker Mu Sochua, Minister of Women’s Affairs (1997-2004). Presentations have also been made to Khmer communities in Australia and New Zealand. We also re-sell “fair-trade” souvenirs from the Angkor Wat young vendors, as part of fundraising efforts.

Canadian fundraising, 2006, with Mu Sochua, former Minister of Women’s Affairs (1997-2004), Cambodian and Canadian musicians.
Cambodian Beer Sellers and the Double Threats of Alcohol and HIV/AIDS

We first began educating “beer promotion women” in 2002 about HIV/AIDS prevention. (See details at SiRCHESI websites: www.fairtradebeer.com, www.beergirls.org, and www.ethicalbeer.com). On Aug. 5, 2005, we launched our first alcohol awareness workshop for 27 beer sellers, with help from CARE, an international NGO. These women sell international brands of beer and alcohol but are chronically underpaid by 50% according to our surveys (2002-2007). To meet their family economic obligations, some accept propositions to exchange sex for money after work, from clients with whom they are often forced to drink. Their HIV prevalence rates averaged 20.5% (1995-2003) and they consume unsafe quantities of alcohol on the job, over 1.2 litres of beer nightly (almost 5 standard drinks). This reduces condom use and thus increases the risks for HIV/AIDS, STIs, and other health problems (liver damage, cancers) in addition to numerous workplace safety issues (violence, road accidents, harassment, absenteeism, etc.). In 2005, a workshop on “AIDS and Alcohol” engaged local beer-garden and restaurant owners, beer distributors and beer promoters in discussions, following presentations by CARE and SiRCHESI. Jillian Schuster studied (2005) workplace hazards to beer-servers in Cambodia (compared to Canadian counterparts), and in 2006, Trisha Pagnutti (aided by Brett Dickson and our staff) took breathalyzer samples in Siem Reap restaurants. Men averaged BAC=.074 (.05 is considered impaired) while the women serving them the beer averaged .05! 68.5% of the men indicated they would drive a motorized vehicle home! (About 16% of Siem Reap Province hospital beds are filled with accident victims). We then ran alcohol education and AIDS workshops for women servers and men drinkers.

How can we make workplaces safer for beer sellers?

We continue to hold alcohol education workshops (2005-2007) for local stakeholders but also made presentations (Sept., 2005; Oct., 2006) at the international headquarters of three major brewers selling in Cambodia: Heineken (Amsterdam), Carlsberg (Copenhagen) and InBEV/Interbrew (Louvain). Executives were asked to take an even more vanguard role in the improvement of the lives of the women selling beer in Cambodia, beyond the “Selling Beer Safely” Heineken program, and some European press covered this. Later, in Oct., 2006, 6 brewers formed “Beer Selling Industry Cambodia” (BSIC), and issued a Code of Conduct. This listed as goals the reduction of violence and cessation of drinking on the job, but made no mention of providing ARVT or fair wages. A Dutch ethical shareholders group (VDPO) then raised these issues at Heineken’s annual meeting in April, 2007 and were promised, by the CEO, a response at the next annual meeting. Following a visit by Sharan Burrows (ACTU president) to Cambodia in May, 2006, discussions between union groups are currently going on with beer-sellers.

SiRCHESI estimated that $150,000 was needed for each major international beer producer to eliminate workplace health/safety risks for 200 beer promoters annually. Each sells an estimated $13,000-$46,000 annually, but receives re-muneration of $660; offering the women a salary of $110 monthly, equivalent to 7.5% of the sale price of the beer, would produce a “fair trade” deal with a “living wage” – with income sufficient to feed their families and eliminate the need for any second job creating risks. The $150,000 would also cover the costs of ARVT/HAART medications, instead of leaving this up to the Global Fund and NGOs to cover.
SIRCHESI’s NEWEST PROGRAM:
RE-TRAINING BEER SELLERS FOR SAFER CAREERS IN THE HOTEL INDUSTRY: 2006-2009

In Nov., 2006, SIRCHESI launched its HOTEL APPRENTICESHIP TRAINING program to develop safer, secure career opportunities for women in the hotel industry. With the sponsorship of M.A.C. AIDS FUND and three partner hotels in the first cohort (Lin Ratanak Angkor, Sokha, and Angkor Howard), women at risk in entertainment industry jobs were offered daily morning literacy and English language classes (with health and social/life skills added) at the SIRCHESI school. They then received on-the-job mentored apprenticeship training shifts (9 hours) for 8 months, followed by a 16 month permanent contract. Fair wages of $110 are maintained throughout the 24-month period by this NGO-industry-foundation partnership eliminating turnover while trainees develop skills and move up the hotels’ internal promotion and salary ladders. The 12 women in Cohort 1 graduated from the SIRCHESI school in July, 2007; Cohort 2 began in August, 2007, with 17 students in 6 hotels. Job and academic performance ratings are made regularly and fed back to students.


Funding is now being sought for a third cohort of 20 students, who will be selected by SIRCHESI and Hotel management staff in September, 2008, for a 24-month career-change commitment, away from the risks of beer-selling. SIRCHESI has sought with its funders to create a model program, which, when evaluated for performance and cost-effectiveness, could be eventually handed over to the hotel industry, to run themselves. SIRCHESI, its primary funder, M.A.C. AIDS FOUNDATION, and 6 partner hotels have committed to complete training and follow-up of the first two cohorts during 2006-2009. During this time, SIRCHESI operates the school, supplies the program manager, counsellor, financial officer, and teachers for English, Khmer literacy, health, life and social skills education. The cohort partnerships are for 24 months. Participating hotels provide on-the-job mentors and supply SIRCHESI a training fee for each apprentice selected, equivalent to their regular probationary salaries (for 8 months); they then contract the women at their regular salary schedules during the following 16 month period. SIRCHESI and its funders offer continuous “top-up” scholarships for up to 2 years, or until salary, tips/service charges and raises combine to reach $110 monthly. This ensures that each participant earns a fair/living wage and can meet family obligations without taking a second job, or leaving for another hotel’s higher salary offer.

Generally, SIRCHESI’s programs are designed to become self-sustaining models which can be adopted by public health agencies or private industry groups. We develop the basic program materials, curricula, train local staff with new skills, and demonstrate cost-effectiveness. Following Cohort 3, we expect the now partially partnered program should become fully locally adopted by the hotel industry.


Tax deductible charitable contributions can be made to support our work at any of the 4 websites. Tax receipts are issued for Canada and the US. We thank you in advance for your interest and support of our work.

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Cohort 1: Above, Brett Dickson from Australia Volunteers International gives English lessons; SIRCHESI staff work with students at SIRCHESI school. Thida learns kitchen skills; apprentices learn housekeeping in public areas.
Students visit main tourist site, Angkor Wat, to learn about its history and its importance for the tourists who stay at their hotels. Literacy and language training at school in the morning for Cohort 1 students.

Above: Cohort 1 graduates in July, 2007; Neela Griffiths, English teacher, takes lunch with Cohort 2 students, August, 2007.

Ian Lubek, Phaal Sophea– a SiRCHESI peer educator, seen with Stephen Lewis, July, 2007
SUPPORTING Sirchesi

You can become an international supporter for the Cambodian NGO Sirchesi (Siem Reap Citizens for Health, Educational and Social Issues).

1) TO DONATE BY CHEQUE: Please send a cheque, for any amount, made out to: "University of Guelph" with the notation “HIV/AIDS Charitable Donation /Cambodia" added in the bottom left corner of the cheque.

Mail to: Ms. Juanita Arnold, Manager, Financial Services, Alumni Affairs & Development, University of Guelph, Guelph, ON, N1G2W1, Canada. Add a full return mailing address to receive your receipt for a charitable donation in February (REVENUE CANADA or US Internal Revenue Service).

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First, indicate the amount you would like to donate—>>>>

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