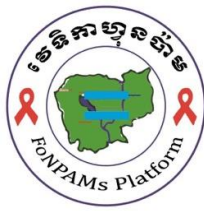


**KINGDOM OF CAMBODIA
NATION RELIGION KING**

***HIV-RELATED STIGMA AND
DISCRIMINATION REPORTING
AND RESPONDING
MECHANISM
IMPLEMENTATION
GUIDELINES***



PREFACE

Cambodia has made significant strides in its fight against HIV/AIDS since the late 1990s. The country has successfully curbed the epidemic, expanded access to treatment for people living with HIV (PLHIV), and achieved significant reductions in new infections. However, achieving the goal of ending AIDS by 2025 requires addressing remaining challenges, with stigma and discrimination being one of the most critical.

Cambodia's National Policy for Ending AIDS and the Sustainability of HIV Program for 2023-2028 recognizes this challenge. The policy focuses on addressing the root causes of stigma and discrimination by 1) Supporting and encouraging representatives of PLHIV, Key Populations (KPs), and vulnerable communities to participate in AIDS Committees at all levels; 2) Providing social protection support for PLHIV and KPs, empowering them to advocate for ending stigma and discrimination.

The 2024-2028 National Strategic Plan for a Comprehensive, Multi-Sectoral Response to HIV/AIDS envisions a Cambodia where everyone lives healthy and productive lives, free from HIV/AIDS and stigma.

This Stigma and Discrimination Action Plan has been developed and serves as a roadmap to achieve this vision. It acknowledges past achievements and emphasizes the need to address remaining human rights barriers. The plan aligns with Cambodia's commitment to the Sustainable Development Goals, the 2021 Political Declaration on HIV/AIDS, and leverages the expertise and support of the Global Partnership for Action to Eliminate All Forms of HIV-related Stigma and Discrimination.

The action plan prioritizes the well-being of PLHIV and KPs. To be successful, it requires a collaborative effort between the National AIDS Authority, civil society organizations, development partners, and communities.

To implement this action plan, I call on local authority, service providers, and communities to work together at national and sub-national levels to promote inclusion, equality, and tolerance across the country. We must recognize the profound impact of discrimination, which creates barriers to education, healthcare, and employment, ultimately leading to poverty and inequality. Therefore, strong political will, a robust civil society, and meaningful involvement of KPs and PLHIV are crucial for successful implementation of this plan. We are all accountable for efficient public services, coordinated local support, and active participation by all Cambodians to end stigma and discrimination on PLHIV and Key Populations.

By addressing stigma and discrimination across healthcare settings, communities, education, and other crucial areas, we can create an environment where individuals feel empowered to access the services they need. Together we build Cambodia without AIDS.

Senior Minister
Chairman of the National AIDS Authority



Ieng Mouly
IENG MOULY

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ACRONYMS

AIDS	Acquired Immunodeficiency Syndrome
CLM	Community Led Monitoring
CBO	Community Based organization
CPN+	Cambodian PLHIV Network
CSO	Civil Society Organization
DFoNPAM	(Operational) District Joint Forum of Networks of PLHIV and Most-at-risk population
FHI 360	Family Health International
FoNPAM	Joint Forum of Networks of PLHIV and Most-at-risk population
HACC	Health Action Coordinating Committee
HIV	Human Immunodeficiency Virus
HIVSD	HIV-Related Stigma and Discrimination
KP	Key Population
LGBT	Lesbian, Gay, Bisexual and Transgender People
MoEYS	Ministry of Education, Youth and Sports
Mol	Ministry of Interior
NAA	National AIDS Authority
NCHADS	National Center for HIV/AIDS, Dermatology and STD
OW	Outreach Worker
PLHIV	People Living with HIV

INTRODUCTION

Inequalities in access to HIV testing and treatment services due to HIV-related stigma and discrimination (HIVSD) remains a key challenge that prevents people living with HIV (PLHIV) from knowing their HIV status and accessing services they need. Findings from the Stigma Index 2.0 conducted in 2019 by Cambodian PLHIV Network (CPN+) show that stigma and discrimination in healthcare existed, and key populations (KPs) have faced similar stigma and discrimination in different settings such as being bullied at school and domestic and sexual violence towards LGBT people. These incidents not only prevent individuals from engaging and accessing services they need to stay healthy and safe, but they also perpetuate self-stigma and institutionalized barriers that hinder Cambodia's effort to end AIDS.

Cambodia is committed to ending AIDS as a public health threat by 2025 as one of the Sustainable Development Goals. The 2021 Political Declaration on HIV/AIDS reiterates country's commitment to a rights-based AIDS response and captures their new commitment to ending the inequalities driving the HIV epidemic. Through the Declaration's inclusion of the new Global AIDS Strategy's 10-10-10 societal enabler targets, Cambodia has recognized that addressing human rights, gender and particularly stigma and discrimination barriers is key to ending inequalities and AIDS by 2030 and have pledged to eliminate them. The commitments have shown in the concept of a people-centered approach that has been put at the core of the National Strategic Plan for Comprehensive and Multi-sectoral response to HIV and AIDS 2023-2028 (NSPVI) mission. This means ensuring a well-coordinated, multi-sectoral HIV response that is inclusive, locally owned and community-led, people-centered, resilient, and sustainable. Furthermore, the NSPVI requires engagement from all three parties (policy makers, service providers, and Key Populations in the 3P triangle) in all coordination platforms to address the disparities that are the root causes of the HIV epidemic, including stigma and discrimination. Furthermore, recently adopted National Policy on Ending AIDS and Sustainability of HIV Program 2023-2028 has provided a specific policy and measures to address HIV related stigma and discrimination through multi-sectoral collaborations.

Complaints of stigma and discrimination and appropriate/timely action to respond to these complaints are some of the key strategies to ensuring an enabling environment for individuals to access services and to build community confidence/trust. Reporting without actions taken is likely to be perceived as pointless exercise and discourage individuals from reporting in the first place. The existing Community Led Monitoring (CLM) focuses on documenting experiences and the newly developed HIVSD reporting and responding mechanism provides an added option for authorities to further seek details on complaints lodged and to investigate complaints and take action – making it a comprehensive mechanism that will likely build confidence among PLHIV

and KPs and encourage reporting of HIVSD incidents to remove HIVSD related barriers beyond HIV services and at other settings. By ensuring that HIV services are stigma and discrimination free will likely contribute to reaching the 95-95-95 goal by 2025.

WHAT IS CAMBODIA'S HIV-RELATED STIGMA & DISCRIMINATION REPORTING & RESPONDING MECHANISM?

The HIVSD reporting & responding mechanism builds on the existing CLM currently being implemented by FoNPAM/DFoNPAM with support from HACC, UNAIDS and EpiC/FHI360 that is used to monitor and collect data on HIV response in the seven provinces in Cambodia - Banteay Meanchey, Battambang, Kampot, Phnom Penh, Preah Sihanouk, Siem Reap and Svay Rieng. By adding additional questions (“Have you reported this incident previously? where?”, and “your contact number”) in CLM survey 7 focusing on stigma and discrimination, and a complaint notification function, the HIVSD response teams at each province are tasked to seek further information and take action against HIVSD complaints lodged by PLHIV and KP individuals. A “tick box” with a statement “Please tick this box if you consent to be contacted for further information about this complaint (if an investigation is needed)” is added to CLM survey to indicate that a consent is given by complainant and a contact number is provided for call back.

Once this tick box is selected, a notification is sent to the corresponding provincial HIVSD response team via Telegram and subsequent investigation and actions shall be conducted and taken by appropriate response team members. Case files, including an “Incident Background Information Form” (complete by response team secretariates, see Annex 1) and an “Incident Investigation Report” (complete by investigating response team members, see Annex 2) shall be sent to HACC for record keeping upon concluding of investigation. The first line investigation shall always be conducted by Provincial HIVSD response teams and any complaints that cannot be resolved at provincial level or require higher level authority intervention shall be levelled to the National HIVSD response team for investigation and action. CLM and HIVSD response data shall be used by key stakeholders to advocate for service improvement to eliminate HIVSD and to promote greater HIV service uptake. It is worth noting that purpose of the HIVSD reporting and responding mechanism shall not be solely to seek justice and punish the perpetrating establishments or person(s), instead, it shall be a tool to address HIVSD and to improve service uptake by removing barriers.

WHO IS THIS GUIDANCE FOR?

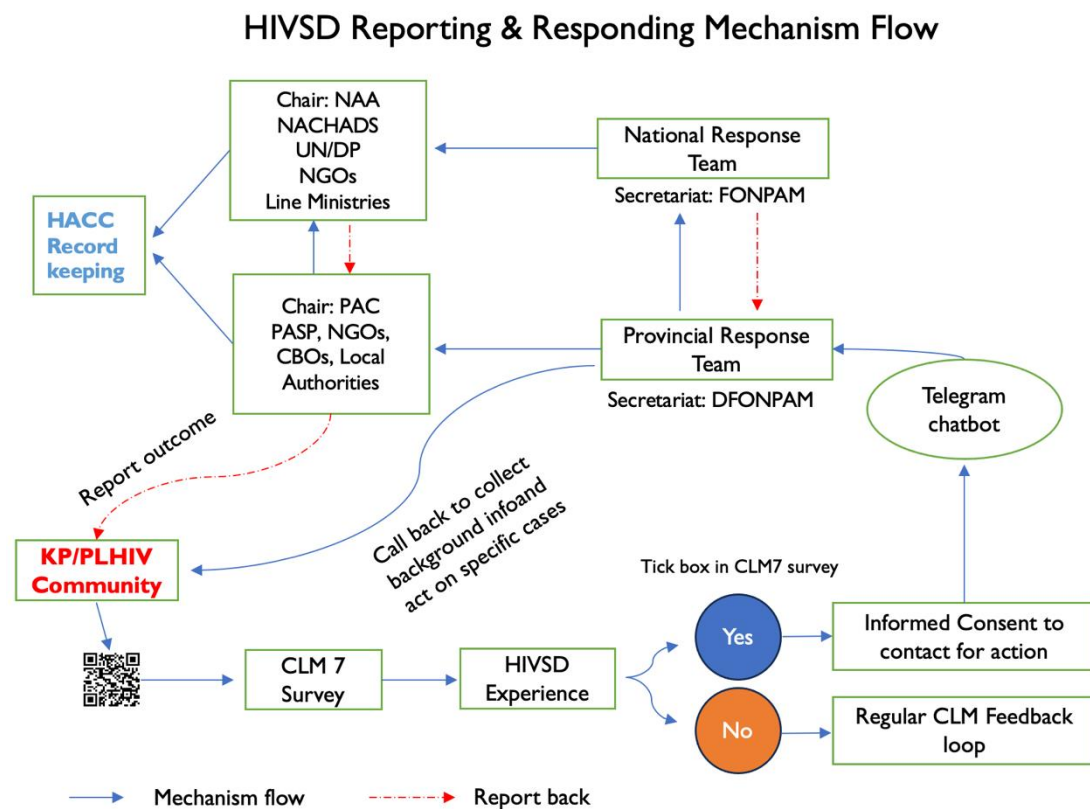
This guidance is written to prepare HIVSD response teams for responding to any HIVSD complaints lodged by community members via online platform. These guidelines are also for groups and networks of PLHIV and KP individuals that are part of Joint Forum of Networks of PLHIV and Most-at-risk population (FoNPAM) and

Operational District Joint Forum of Networks of PLHIV and Most-at-risk population (DFoNPAM) as secretariates of FoNPAM and DFoNPAM will act as secretariates of provincial and national HIVSD response teams.

WHO CAN LODGE A HIV-RELATED STIGMA & DISCRIMINATION COMPLAINT?

The HIVSD reporting and responding mechanism is set up for PLHIV and KP individuals to lodge HIVSD complaints building on existing CLM platform which is currently being implemented in the seven CLM operating provinces with plans for further expansion. PLHIV and KP individuals can scan CLM survey 7 QR code using their mobile devices to lodge a complaint for investigation and give consent to receive follow-up on investigation outcome and actions taken.

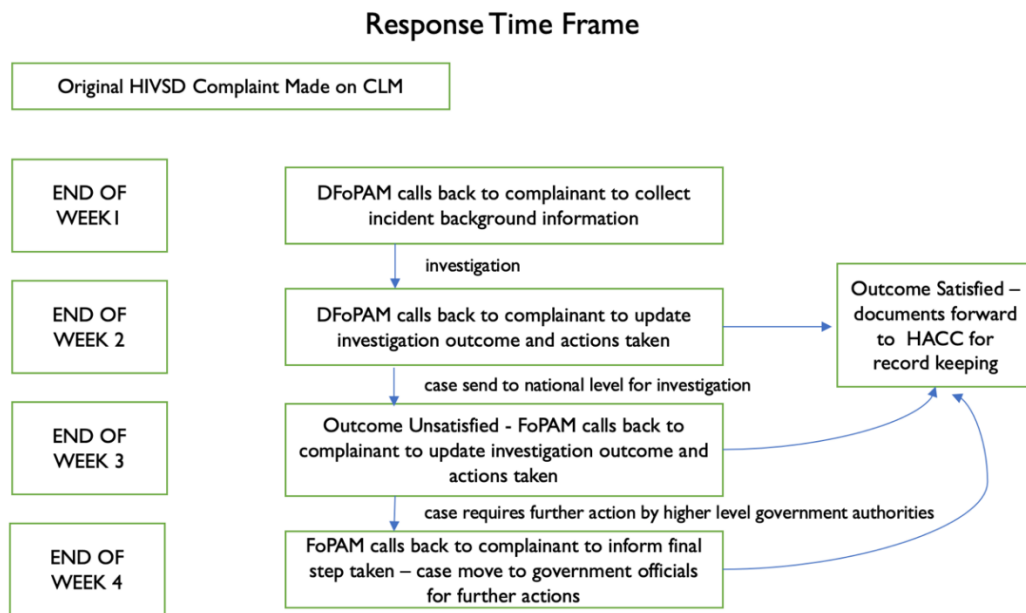
HIV-RELATED STIGMA & DISCRIMINATION REPORTING & RESPONDING MECHANISM FLOW



1. PLHIV and KP individuals scan CLM survey 7 QR code to lodge a HIVSD complaint.
2. When the tick box is selected in CLM survey 7, a text message is automatically sent to the corresponding Provincial HIVSD response team secretariate at CLM operating provinces via Telegram Chatbot.
3. Provincial HIVSD response team secretariate contacts complainant to collect incident background information either over phone or in-person.

4. Provincial HIVSD response team secretariate coordinates and appoints appropriate response team members for them to investigate the complaint. "Incident Background Information" form is handed over to the investigating response team members.
5. Provincial HIVSD response team members contact the alleged establishment and/or perpetrator(s) to investigate the complaint and take actions.
6. Provincial HIVSD response team members complete Incident Investigation Report with outcome and actions taken and return case file to the secretariate.
7. Provincial HIVSD response team secretariate contacts the initial complainant to provide them with investigation outcome and actions taken. If outcome and actions taken are satisfactory, the secretariate will close the case and forward case file (Incident Background Information Form and Incident Investigation Report) to HACC for record keeping.
8. All other complaints that cannot be resolved at the provincial level are levelled to National HIVSD response team (i.e., complaints made in the justice setting) where Provincial HIVSD response team secretariate will hand over case file to National HIVSD response team secretariate.
9. National HIVSD response team secretariate, upon receiving complaint from Provincial HIVSD response team secretariate coordinates and appoints appropriate National HIVSD response team members to carry out investigation and take actions.
10. Appointed National HIVSD response team members contact the establishment and alleged perpetrator(s) to conduct investigation and to take action. Investigating HIVSD response team members complete Incident Investigation Report and pass it to National HIVSD response team secretariate.
11. National HIVSD response team Secretariate receives Incident Investigation Report from the investigating HIVSD response team members and contacts the initial complainant for follow-up on outcome and actions taken. If outcome and actions taken are satisfactory, secretariate will close case and forward case file (Incident Background Information Form and Incident Investigation Report) to HACC for record keeping.
12. Any complaints cannot be resolved by the National HIVSD response team shall be handed over to NAA to coordinate appropriate action with relevant government ministries and/or entities. This shall be documented by the National HIVSD response team secretariate in the Incident Investigation Report and send to HACC for record keeping.

RESPONSE TIME FRAME



- Provincial HIVSD response team secretariate shall contact complainant to collect detailed HIVSD incident background information within **ONE WEEK** of the initial complaint.
- Provincial HIVSD response team secretariate shall contact complainant to update them on the initial investigation outcome and actions taken within **TWO WEEKS** of the initial complaint.
- If the case is levelled to national level, the National HIVSD response team secretariate shall contact complainant with investigation outcome and actions taken within **THREE WEEKS** of the initial complaint.
- If the case cannot be resolved by National HIVSD response team and require further action by higher level government authority, National HIVSD response team secretariate shall inform complainant of this outcome within **ONE MONTH** of initial complaint.

RESPONSE TEAM COMPOSITION AND RESPONSIBILITIES

Current secretariates of FoNPAM and DFOpAM shall act as secretariates of HIVSD response team. Each HIVSD response team shall consist of two representatives from each PLHIV/KP network and government entity to ensure efficient function and timely responses. Provincial HIVSD response team shall always be the first contact to receive all HIVSD complaints and to conduct investigation and take action. National HIVSD response team shall be called into action for complaints that cannot be resolved at provincial level and/or require actions by national authorities (i.e., complaints made in the justice setting). National HIVSD response team shall consist of two representatives from relevant government entities and networks. Please note that response team

composition listed in this section is used as a guide and shall remain flexible based on provincial needs.

Each Provincial HIVSD response team includes two representatives from each entity: DFoNPAM (Secretariat) + Provincial AIDS Committee (Chair) + Provincial AIDS and STD Program/Provincial Health Department + Provincial Department of Education, Youth and Sports + Provincial Hall and Police. Each member's responsibilities:

- 1) Provincial HIVSD response team chair (PAC):
 - Provincial governors at each CLM implementing province shall chair the response teams.
 - Conduct monthly provincial HIVSD response team meeting to monitor implementation progress and to debrief cases.
- 2) Provincial HIVSD response team secretariate (DFoNPAM):
 - Focal point to receive HIVSD complaints from CLM app.
 - Call back to complainant to collect further background information to instigate investigation.
 - Once information collected, the secretariate will appoint appropriate Provincial HIVSD response team members to conduct investigation and take action.
 - The secretariate is also responsible for contacting the complainant with investigation outcome and actions taken. If outcome of the investigation is satisfactory, the Provincial HIVSD response team secretariate shall close the case and forward HIVSD response case file to HACC for record keeping.
 - If outcome is unsatisfactory, Provincial HIVSD response team secretariate shall level the complaint to National HIVSD response team by forwarding the case to National HIVSD response team secretariat.
- 3) In the case of HIVSD complaints made in the education setting, Provincial Department of Education, Youth and Sports representatives shall lead the investigation.
- 4) In the case of HIVSD complaints made in the healthcare setting, Provincial AIDS and STDs Program at Provincial Health Departments representatives shall lead the investigation.
- 5) In the case of HIVSD complaints made in the community and workplace setting, the Provincial Hall and Police representatives shall take the lead in investigation.
- 6) Police representatives shall be appointed to support any investigations that require law enforcement intervention.

The National HIVSD response team includes two representatives from each entity: FoNPAM (Secretariat) + National AIDS Authority + National Center for HIV/AIDS, Dermatology and STDs + Ministry of Education, Youth and Sports + Ministry of Interior and CPN+ and relevant partners Each member's responsibilities:

- 1) National HIVSD response team chair:
 - NAA shall chair the national response team.
 - Any complaints cannot be resolved by National HIVSD response team shall be handed over to the chair to coordinate appropriate action with relevant government ministries and/or entities. This will be documented by National HIVSD response team secretariate and send to HACC for recording keeping.
 - Conduct quarterly learning sessions with all provincial HIVSD response teams virtually to monitor implementation progress and to debrief cases.
- 2) National HIVSD response team secretariat (FoNPAM):
 - Receive referrals from Provincial HIVSD response team secretariates to investigate complaints that cannot be resolved at the provincial level and/or require national authority intervention.
 - Once a referral is received, National HIVSD response team secretariate is responsible for appointing appropriate National HIVSD response team members to contact alleged establishment and perpetrator(s) for investigation and to take action.
 - National HIVSD response team secretariate shall be responsible for contacting complainant with investigation outcome and action taken. If outcome of the investigation is satisfactory, the National HIVSD response team secretariate shall close the case and forward HIVSD response case file to HACC for record keeping.
- 3) In the case of HIVSD complaints made in the education setting, MoEYS representatives shall lead the investigation.
- 4) In the case of HIVSD complaints made in the healthcare setting, NAA and NCHADS representatives shall lead the investigation.
- 5) In the case of HIVSD complaints made in the community and workplace setting, NGO/networks, Mol representatives shall take the lead in investigation.

LOGGING A HIV-RELATED STIGMA & DISCRIMINATION COMPLAINT USING CLM

Any PLHIV and KP individuals can and are encouraged to lodge HIVSD complaints themselves or with support from OWs if need be, **WITHIN SIX MONTHS** from the date the complainant became aware of the alleged stigma and discrimination act. They can do so by scanning the CLM survey 7 QR code to access the survey. Individuals (or with the assistance of an OW) shall fill out survey on their devices and have the option to either lodge a complaint or to lodge a complaint with request for an investigation and update on actions taken.

RECEIVING A HIV-RELATED STIGMA & DISCRIMINATION COMPLAINT AND COLLECTING INCIDENT BACKGROUND INFORMATION

Provincial HIVSD response team secretariates at CLM operating provinces shall be the focal points to receive HIVSD responding notifications via Telegram. Once a notification is received, the secretariate shall contact complainant and collect detailed background information using the “Incident Background Information” form either in-person or over the phone, and the information shall be passed down to the appointed HIVSD response team members for investigation and action.

When making the initial call back to complainant to collect incident background information, Provincial HIVSD response team secretariates shall –

1. Introduce themselves, their positions and what HIVSD response team is and can do.
2. State to complainant that HIVSD is against Cambodia’s Constitution and Laws on the Prevention and Control of HIV/AIDS.
3. Address fear of retribution preemptively by reiterating and ensuring confidentiality, anonymity and privacy.
4. Walk complainant through response flow, including response timeline of key steps.
5. Confirm a complaint was lodged by complainant, that same complaint has not been lodged via CLM previously and that complainant would like to proceed with an investigation.
6. Collect from complainant detailed information using “Incident Background Information” form in Annex I.
7. HIVSD response team secretariate shall reassure complainant on confidentiality throughout the interview process.
8. Inform complainant on possible actions (see Response Team Actions” section below).
9. Offer complainant peer and/or legal support.
10. Invite complainant to attend next/future Positive Protection workshop and/or PLHIV/KP forum by forwarding complainant’s contact number to CPN+ with consent.
11. Thank complainant for their time and inform them of next step – the HIVSD response team secretariate will call back to provide investigation outcome and action taken within two weeks of initial complaint.
12. Solicit questions from complainant and conclude call/meeting.

RESPONSE TEAM ACTIONS

HIVSD response teams, if satisfied that a HIVSD incident has taken place as alleged in the complaint, shall –

1. Firstly, direct the establishment and/or perpetrator(s) to take measures to rectify the situation that instigated the HIVSD complaint.

2. Secondly, counsel the perpetrator(s) and require such person(s) to undergo training in relation to HIV/AIDS, Law on the prevention and control of HIV/AIDS, rules and guidelines, particularly in relation to HIVSD.
3. Upon subsequent violation of the law on the prevention and control of HIV/AIDS by the same person(s)/establishment, the HIVSD response team may recommend that the person(s) or the establishment receive disciplinary action in accordance with the law.
4. Secretariates of each Provincial HIVSD response team (and the National HIVSD response team secretariate for national level investigation and action) shall inform complainant of actions taken in relation to the complaint and of the complainant's right to levelled the case to the national level (National HIVSD response team) or to any other appropriate legal recourse in case the complainant is dissatisfied with actions taken.
5. On deciding a complaint, HIVSD response teams shall provide brief reasons in writing for the decision to the person(s) and/or establishment and the concerned parties to the complaint within a period of ten days from the date of decision.

FOLLOWING UP WITH THE COMPLAINANT

In most cases when a complaint is resolved, HIVSD response team secretariate shall contact complainant with outcome of investigation and actions taken within specified response time frame (see "Response Time Frame"). When making follow-up call back to complainant, HIVSD response team secretariates shall –

1. Confirm that the complaint was made by complainant.
2. Provide complainant with outcome of investigation and actions taken.
3. Inform complainant on their options for next step – close case if satisfactory with outcome or levelling complaint to national level and/or any other appropriate legal recourse.
4. Invite complainant to attend next/future Positive Protection workshop and/or PLHIV/KP forum by forwarding complainant's contact number to CPN+ with complainant's consent.
5. Offer peer support and link up with an HIV OW.
6. Thank complainant and conclude call/meeting.

CONFIDENTIALITY AND FEAR OF RETRIBUTION

Fear of retribution – worry about negative consequence of lodging a complaint against an establishment or a person(s), is one of the key barriers to a successful reporting and responding mechanism and must be addressed by highlighting and reinforcing confidentiality. Additionally, confidentiality is crucial in building community confidence and trust in the HIVSD reporting and responding mechanism and Cambodia's HIV response. All personal information collected shall be kept confidentially and accessed by authorized personnel only. Outreach workers assisting PLHIV and KP individuals to fill out CLM survey shall also protect clients' privacy and confidentiality. To

encourage uptake of HIVSD reporting and seeking responses, a disclaimer in CLM survey 7 is added to highlight protection of individual privacy and confidentiality

PROMOTING HIV-RELATED STIGMA & DISCRIMINATION REPORTING & RESPONDING MECHANISM

HIVSD reporting and responding mechanism shall be promoted together with the existing CLM. PLHIV/KP CSOs, CBOs and networks shall actively promote CLM and HIVSD reporting & responding mechanism quarterly through their networks. This can be done by developing promotional artworks to promote CLM and the reporting & responding mechanism on social media such as Facebook and TikTok with boosted ads targeting audiences in the CLM operating provinces. Alternatively, HIVSD reporting & responding mechanism can be promoted by disseminating IEC materials at events and institutions/establishments. Promotional artwork design shall contain –

- CLM survey 7 QR Code
- Short description of CLM and HIVSD reporting & responding mechanism
- Highlight confidentiality and timely response
- An action statement – to scan the survey QR code

DOCUMENTATION AND RECORD KEEPING

Upon receiving a HIVSD complaint, Provincial HIVSD response team secretariate shall create a case file for each complaint and use the “Incident Background Information Form” (see Annex 1) to call back to collect detailed background information for investigation within one week of receiving the incident notification. Case file shall also contain a “Incident Investigation Report” documenting progress and outcome of the investigation and actions taken, and shall be completed by the investigating HIVSD response team members. Upon closing a case, Provincial or National HIVSD response team secretariates shall forward case file to HACC for record keeping as HACC is currently the secretariate of DFoNPAM and FoNPAM that holds all CLM records.

ORIENTATION AND CAPACITATING HIVSD RESPONSE TEAMS

A HIVSD reporting and responding mechanism orientation and capacitating training shall be provided to all response teams and members of DFoNPAM and FoNPAM prior to implementation. Training shall include orientation of CLM and the responding mechanism and cover information in this guidelines. Subsequent HIVSD reporting and responding mechanism refreshers shall be conducted half yearly and the refresher shall be combined with CLM data to action refresher and making it a full day training package.

MONITORING HIV-RELATED STIGMA & DISCRIMINATION RESPONSE TEAMS AND DATA USE

As the HIVSD responding mechanism is embedded in the existing CLM, it shall be monitored through the same monitoring system for CLM. The Provincial HIVSD response team in each of the CLM operating provinces shall conduct monthly meetings

to monitor implementation progress and debrief cases. National HIVSD response team shall conduct quarterly sessions virtually with all HIVSD response team members to monitor progress, exchange ideas, showcase best practices/successes, discuss challenging cases and to provide supervision to HIVSD response team members.

HIVSD reports shall feed into CLM feedback loops server through standard CLM mechanism and information is gathered by HACC and enter into digital KP community scorecard tool to be accessed by various key stakeholders, principally DFoNPAM and FoNPAM, to share with other key stakeholders/services providers/duty bearers to take action on the findings in the KP community scorecard tool. Case files submitted by HIVSD response team secretariates shall be kept at HACC and information used to enrich data collected through CLM.

ANNEX I – INCIDENT BACKGROUND INFORMATION FORM

Individuals who experience or witness a HIVSD incident can use this form to lodge a complaint using the HIVSD responding mechanism. Networks can also use it if their members come to them and ask them to help them to lodge a HIVSD complaint that happened to them. You should document any HIVSD incidents as soon as possible after it occurs or within the response time frame stipulated in the HIVSD Reporting & Responding Mechanism Implementation Guidance. Please make a separate report for each complaint.

Date of report (day, month, year):

Contact Phone Number: to link with Incident Investigation Report for the same complaint

Person giving the report:

Are you the person whose rights were violated?

Yes____ No____

Are you a witness to a violation of rights?

Yes____ No____

Consent: If you are filling out this form for someone else, ask them if they agree that you record the HIVSD incident that they experienced. If they agree, indicate the time and date the consent is given (if over the phone) or, ask them to sign or put their thumbprint here (if in-person):

Complainant Written/Verbal Consent Given on - Time: Date:

Do you wish you remain anonymous during investigation?

Signature or thumbprint:

Date: When did the incident happen? (Day, month and year)

Time: What time did it happen? (If not sure of time, was it morning, afternoon, evening, night or over a long period?)

Name of the Establishment: Where did it happen?

Location: Where is the establishment? (City, village, district, region)

Type of Establishment: What is the establishment? (clinic, school, university, workplace, business, restaurant, entertainment outlets, etc.)

Type of service: Why were you at the establishment?

Perpetrator: Who committed HIVSD act?

Name:

Position: If name is not known, describe the person (age, height, weight, hair colour, marks, physical features, etc.)

Description: What happened before the HIVSD incident occurred?

What happened when the HIVSD incident occurred? Describe **in detail:** What did the person do? What did they say? How did you respond?

Motive: Why do you think that this happened? You can choose several answers. Check the boxes.

Because I am:	<input type="checkbox"/>
Living with HIV	<input type="checkbox"/>
A man who has sex with men	<input type="checkbox"/>
Transgender	<input type="checkbox"/>
Not acting or dressing like a typical man or woman	<input type="checkbox"/>
A person who uses drugs	<input type="checkbox"/>
An entertainment worker	<input type="checkbox"/>
Living with a disability	<input type="checkbox"/>
Other, explain:	

Why do you think it happened for those reasons? For example, did the person use specific words or language? Did the person just find out or know or think something about you that might cause them to act that way (i.e. that you are living with HIV, a sex worker, a man who has sex with men or transgender)?

Consequences and Follow-Up Actions

Physical injuries: Did the incident result in physical injuries, harm or pain? If yes, what?

Medical care: Was more medical care needed because of what happened? If yes, what care was needed?

Was more medical care sought? If yes, explain where, what care and who gave the treatment.

Psychological harm: Did the incident cause psychological or mental pain or harm? If yes, please describe it.

Psychological care and support: Was psychological care and support needed after the incident? If yes, what care was needed?

Reporting: Was the incident reported to anyone? If yes, describe – who, when, how.

Financial impact: Was there any financial impact on you? If yes, describe.

Family impact: Was there any impact on your family? If yes, describe.

Social impact: Was there any impact on your personal life or social life? If yes, describe.

Job impact: Was there any impact on your job or work? If yes, describe.

Other impact: Was there any other kind of impact? If yes, describe.

Evidence: Are there documents, photos, audiotapes, or videotapes (such as security camera tapes) that show what happened or prove any part of what happened? If yes, list them here. Keep these together in a safe place. If possible, make copies and keep them with this report.

Documents can include medical records, medical bills, evidence that you were seen by a specific health care provider, and prescriptions. Get written statements from witnesses, if possible. If you have been physically injured, take photos of your injuries. If the physical and emotional harm continue over some time, keep a record or diary of your physical and emotional condition.

ANNEX 2 – HIVSD INVESTIGATION REPORT

Date investigation was opened:

Contact Phone Number: to link with Incident Background Information Form for the same complaint

Investigator(s) name(s):

Investigator(s) position: HIVSD response team from which level? (Provincial or National) and which province?

Name(s), title and establishment of accused:

Interview timeline: include dates and times of interview, location of interview, names of everyone present. Attach interview notes.

Summary of investigation and outcome:

Applicable legal source: (i.e., Law on the prevention and control of HIV and AIDS, Cambodian Constitution)

Actions taken against the accused and/or establishment:

Date complainant was notified of actions taken:

Date accused was notified of actions that will be taken:

Other post-investigation follow-up conversation(s): including dates, names and topics of discussion. Attach relevant meeting notes.

Date investigation was closed:

ANNEX 3 – CONTACT INFORMATION FOR LEGAL AID ORGANIZATIONS

Legal Aid of Cambodia (LAC)

#57-59 St. 516, Toul Sangke, Russey Keo, Phnom Penh

Phone: (+855) 023 864 201/202, 012 385 155, 092 982 028, 012 385 155

Fax: (+855) 023 864 203

E-mail: reception@lac.org.kh;

lacadmin@online.com.kh

Website: www.lac.org.kh

LAC Branches:

- **Battambang Province:** #463, Group 12, Kamkor Village, Svaypor Commune, Battambang Town, Battambang Province
Phone: (+855) 012 284 047
- **Siem Reap Province:** #0702, Group 11, Phoum Banteay Chas, Sangkat Slor Kram, Siem Reap Town, Siem Reap Province
Phone: (+855) 012 469 694
- **Kampong Thom Province:** Phum Kdey, Sangkat Prey Tahou, Steung Sen Town, Kampong Thom Province
Phone: (+855) 081 597 308

Cambodia Human Rights Action Committee (CHRAC)

#9Eo, Street 330, Sangkat Boeung Kengkang III, Khan Chamkarmorn, Phnom Penh

Phone: (+855) 023 301415, 023 305 609

Fax: (+855) 023 218 759

Email: chrac@forum.org.kh,

chracsecretariat@yahoo.com

Website: <http://www.chrac.org/kh/index.php>

Cambodia League for the Promotion and Defence of Human Rights (LICADHO)

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