

Kingdom of Cambodia
Nation - Religion – King



INTHANOU Association,

HIV/AIDS Hotline,

012 999 008/ 012 999 009, 092 914 111

**Report Activity of
HIV/AIDS Hotline project
Period: July September 2009**

Submitto

MOBITEL

UNICEF

Pharmacie Sans Frontier –Comitee International

French Foundation

Sida Info Service

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I. INTRODUCTION

This year is the nine year activity of our HIV/AIDS, STIs hotline INTHANOU. Our service functioning under humanity offer from Cellcard brand name (free incoming calls), and financial support from UNICEF, PSF-CI (Global Fund), French Foundation (Foundation MARC). Due to their support, our hotline can continue our full activity as usual schedule nine hours per day (11am -8 pm) and six days per week (Mon-Sat).

As part of our statistic, data were randomly collected from one third of calls (1/3) and computerize in hotline database during the conversation. The collected data is analyzed through Epi Info program to study about knowledge; attitude and practice of hotline callers' and information of calls. This report presents the progress activities of hotline each month in the period of this third quarter of year 2009.

II. HOTLINE ACTIVITY

A. STATISTIC OF CALL:

During this period, hotline had **76** working days (close **03** days for Traditional Public Holiday). The result was as below:

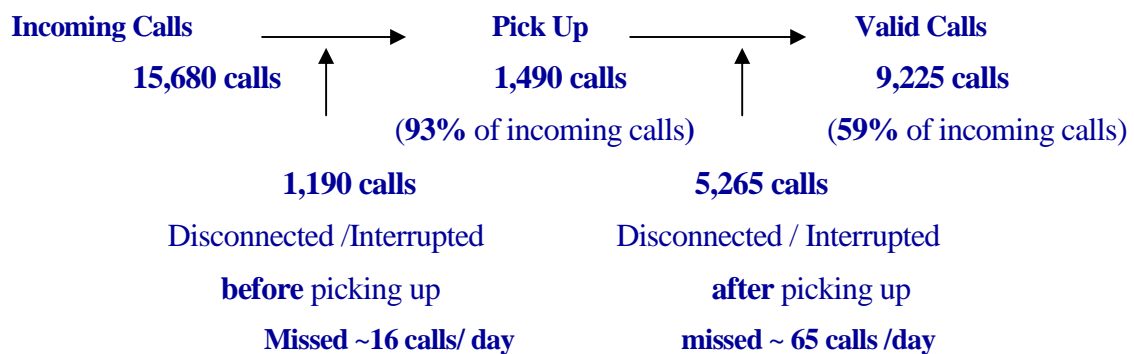
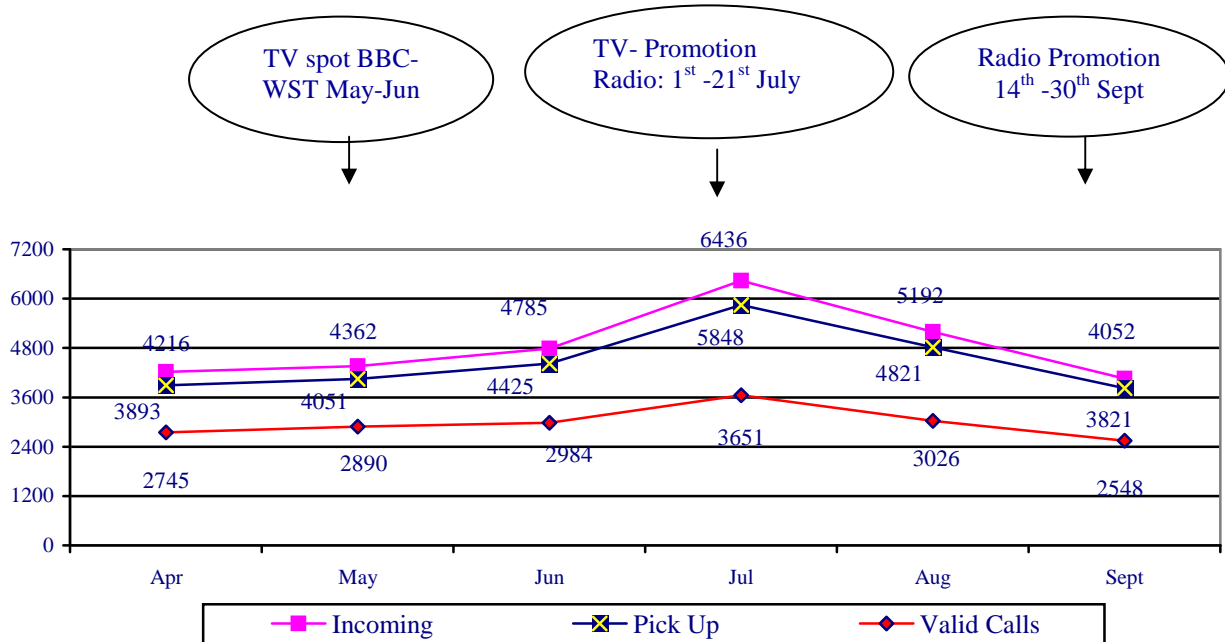


Figure1. Statistic of Calls by month, Apr - Sept 2009



Statistic of Calls by percentage, July-Sept 2009

Period	Nb of working days	Pick up Calls Among incoming calls	Daily Average Valid calls	Valid Calls among incoming Calls	Note
Jul 09	27 days	91%	135	57%	- July was the highest incoming calls , but the Valid Calls was the lowest - September was the highest Valid Calls received than others month in the period - 60 % of incoming Calls were Valid Calls.
Aug 09	26 days	93%	116	58%	
Sept 09	23 days	94%	111	62%	
Total	76 days	93%	121	60%	

Remarkably:

- Missed calls cause by: Interrupted, testing, teasing, non interest calls, calls without conversation, run off batteries, confusing numbers. These calls were excluded in our database
- Daily average Valid Calls in this period was **121** (vary from **68** to **159** calls) , higher than second trimester, **115** calls

B. CALLERS PROFILE:

Data were randomly collected from 1/3 of calls. Avoiding any mistake, call form is designed to be opened automatically when the counters arrive on number **3**. Then our counselors can record the caller's profile and information of calls right away during their conversation. The collected data are transferred to Epi Info Software (Version 3.5.1) to analyze.

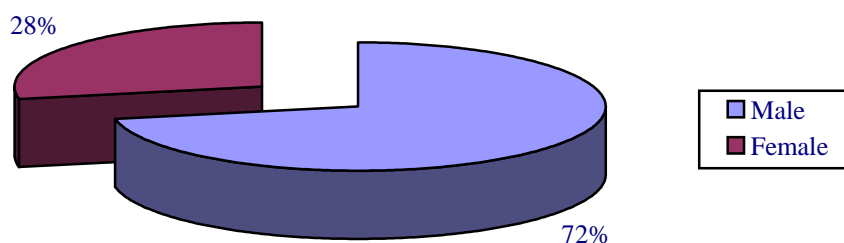
Remarkably:

- *The total Valid Calls in this period were **9, 225** calls*
- *The result show in this report represent **1/3** of total calls, **n=3,046** calls, **33%***

B1. Gender of callers:

In this period, the percentage of female calls hotline is increased compared to the two previous trimesters. The percentage of female calls was different from month to month: July, 29%, Aug, 26% and Sept 28%. Thus of total Valid Calls, there were 72% called from males and 28% called from females, Figure 2

Figure2. Gender break down of callers, July-Sept 2009 (n= 3,046)



Note:

Female callers increased compared to the others 2 previous trimesters:

- Jan-Mar : 26%
- Apr-Jun : 27%
- July- Sept : 28%

There were some special audiences called hotline during this period, such as:

Homosexual⁽¹⁾: Total self identified MSM calls was **110** calls, it represent **1.7%** of total male callers.

- Aged group : 68% were in the aged group of 15-24 year old
- Marital status : 97 % were single and 3 % are married (bi sexual)
- Origin of call :27% called from P. Penh and 73% from provinces
- Type of calls 68% used to call hotline and 33% were new callers
- Source they knew hotline numbers :
 - 38% from Radio
 - 24% from friends, neighbor, relative
 - 19% from TV
 - 13% from Magazine
 - 5% from IEC and NGOs
- **MSM called hotline** increasing compare to the two previous trimesters:
 - Jan-Mar : 1.1% (75 calls)
 - Apr-Jun : 1.2% (73 calls)
 - Jul-Sept:1.7% (110 calls)

Pregnant women⁽²⁾: Total pregnant women called was 102 calls, it represent 6% of total female callers. Most of them are:

- In the aged group of 15-24 : 52%
- HIV status : 4% are HIV (+) and 40% not yet test
- Origin of calls : 14% called from P. Penh and 86% from provinces
- Type of calls : 69% used to call hotline and 30% were new callers
- Occupation : Most of them are :
 - Business women : 40%
 - Housewives : 33%
- Source they knew hotline numbers:
 - 48% from friend/neighbor, relative ...
 - 25% from magazine
 - 15% from Radio
 - 12% from TV

Drug use⁽³⁾

- In this period , there were only **8** calls reported that they used to use drug
- All of them are male callers
- Question related with HIV/AIDS, and drug is too small : 0.1%
- Question related with STIs and drug is no data

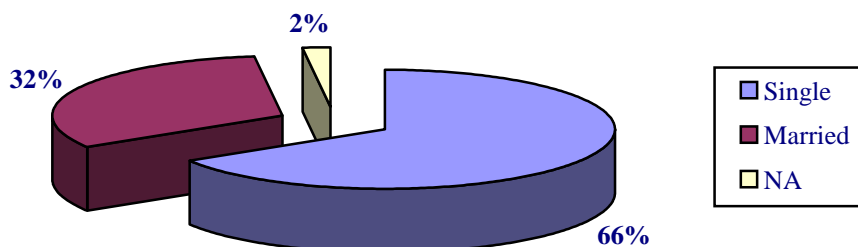
Note:

- (1) Total called received from Homosexual 110, analyzed (n=37) *
- (2) Total called received from pregnant women 102 calls , analyzed (n=37) **
- (3) Data collected base on their self report, not asking from every male /female calls

B2. Family status of callers:

In this period, single female called hotline more than males; most of their concerned were about the transmission risk of HIV and STIs because of their un trustfulness feeling of their partners behavior (boy friends, husband, partners) or their sexual relationship, figure 3.

Figure3. Family status of callers, July-Sept 2009 (n= 3,046)



Note:

- Most of our callers are single, 66%. Single female (71%) called more than male (53%)
- Young people need confidential services information to discuss

B3. Occupation of callers:

Callers were asked to report about their occupations. They can refuse when they felt not comfortable to answer, then data were recorded as no information. The main occupations of callers are different between males (Figure 4) and females (Figure 5).

Figure4. Main occupation of **male callers**, Jul Sept 2009 (n= 2,194)

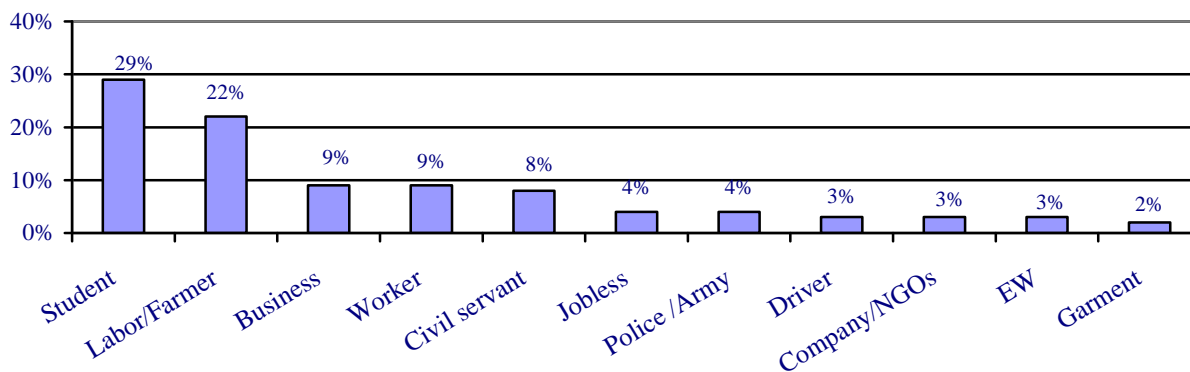
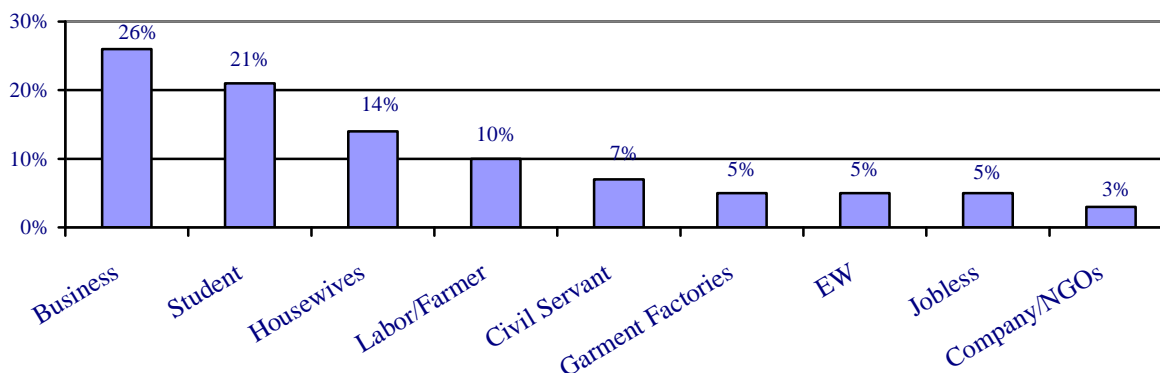


Figure5. Main Occupation of **female callers**, Jul-Sep 2009 (n= 852)



Noticeably:

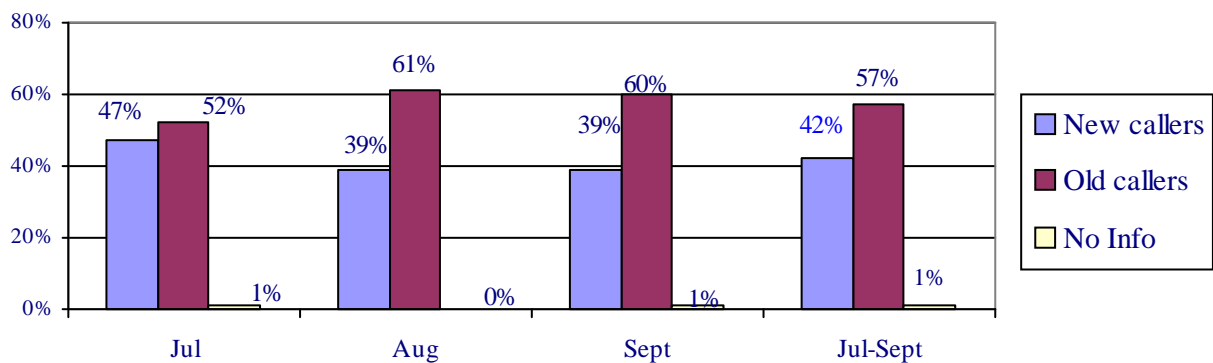
- Our service is favorable for large target of population
- Entertainment Women (EW) increased from :
 - Jan-Mar : 7%, 136 calls
 - Apr-Jun : 6 %,126 calls
 - Jul-Sept: 5%., 173 calls
- EW represent those who work in : karaoke, massage, hotel, restaurant, beer garden, guest house, snooker, casino, ...etc
- Workers represent for those who use their physical work (: construction workers, factories workers, ware house worker, port worker, worker in the field ...etc)
- Percentage of calls from female work in the garment factories was 5%, **figure 5**. It is more than 2nd trimester (Apr-Jun, 3%) but it is less than 1st trimester (Jan-Mar, 9%)

B4. Type of callers:

Callers were asked to report about their history of calling hotline, Figure6. There are two types of callers:

- New calls refer to those who called hotline for their first time
- Old calls refer to those who used to call hotline
- No Answer / counselor mistake will record as No information

Figure6. Types of callers, Jul-Sept 2009 (n= 3,046)



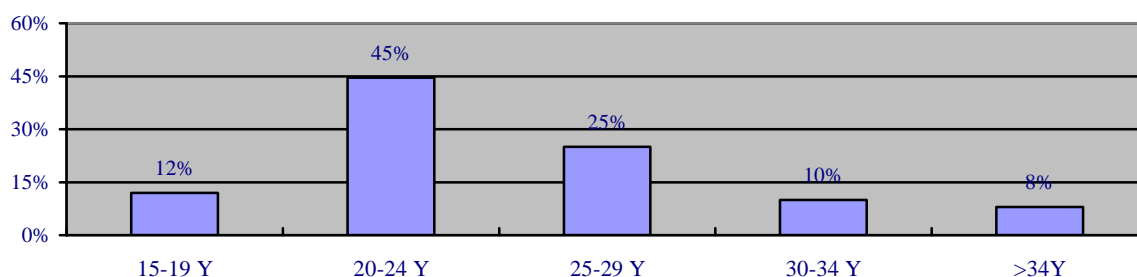
Remarkably:

- New callers increased from trimester to trimester : Jan-Mar :34%, Apr-Jun: 35% , Jul-Sept : 42% because of the intervention from media promotion
- New female callers were less than male callers every trimester

B5. Aged group of callers:

Callers were asked to state about their aged. Their aged was set in different groups, **Figure 7**.

Figure7. Aged group of callers, Jul-Sept 2009 (n= 3,046)



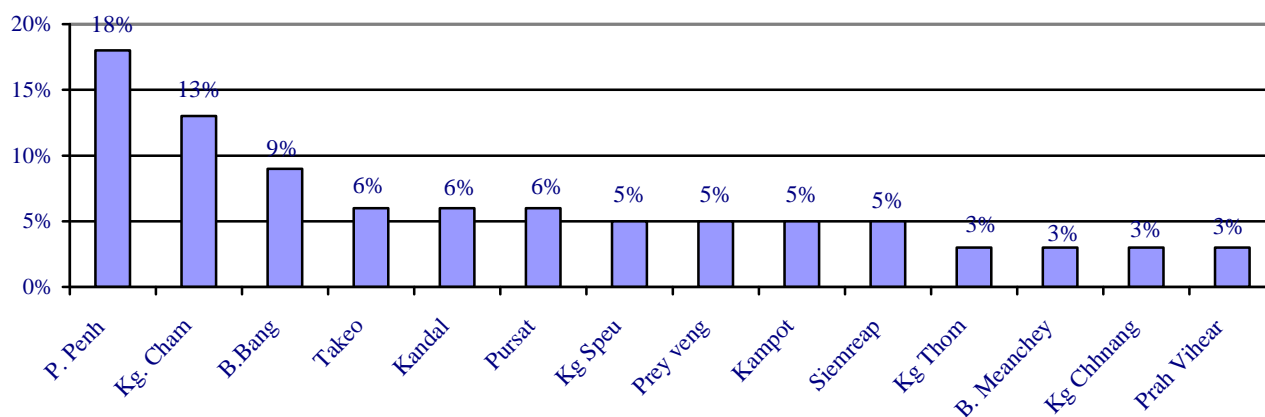
Noticeably :

- Most of calls were from young people in the aged group of 15 -24, **57%**
- Regarding by gender, young people called hotline are nearly the same percentage for both male (15-24: 57 %) and female (15-24: 56%)

B6. Origin of calls:

Calls were from everywhere of the country but it was small in some area, **Figure 8**. According to the result show called from P. Penh is only 18% others 82% from provinces.

Figure8. Origin of calls, Jul-Sept 2009 (n= 3,046)



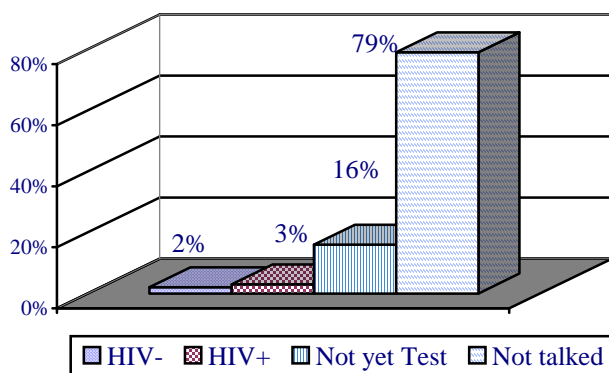
Note :

- Most of calls were from provinces, 82%
- Calls from P. Penh is nearly the same each trimesters in this year
- Radio promotion made people from rural area called than people in the central area
- The provinces which not mention in the chart were less than 1%

B7. HIV status of callers:

When the conversation related on HIV status, callers were asked to report about their HIV testing result, to assist the conversation direct to their real needed **figure 9, a**.

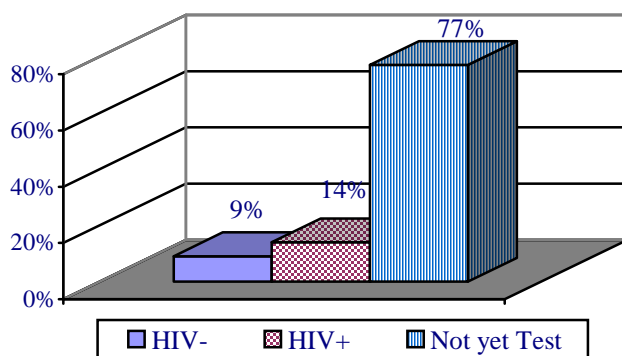
Figure 9,a HIV status among total calls, Jul-Sep 2009 (n=3,046)



Of total calls:

- 79% did not talk about their status
- PLWA called hotline increased each trimester :
 - ⇒ Jan- Mar :1.6 %
 - ⇒ Apr-Jun: 1.4 %
 - ⇒ Jul-Sept: 3.0 %
- People talking about their status was increased , 21% of total calls, included :
 - ⇒ 2 % have HIV (-)
 - ⇒ 3 % have HIV(+), increased
 - ⇒ 16 % not yet test
 - ⇒ 79 % not talked

Figure 9,b HIV status among those who reported , Jul-Sep 2009 (n=647)



Among those who talked about their HIV status

- ⇒ 9% HIV (-)
- ⇒ 14% HIV (+) , increased
- ⇒ 77% not yet test
- 30% females, 70% males
- 51% new calls , 49% old calls
- Among **PLWA** who called hotline :
 - 62% received ART
 - 89% called from provinces,
 - 34% knew hotline from friends/relative/neighbor, 32% from Radio, 11% from Magazine, 7% from TV, others 7% from NGOs & IEC materials , 8% no info

B8. Sexual behavior of callers and their condom practice:

When the conversation related with their sexual behavior, callers were asked to report about their sexual behavior in the past 6 months. This report was based on their willingness. If callers felt not comfortable they can refuse.

There are two types of extra marital partners (non husband or wife):

- Regular partner : sweat heart, girl friend, mistress that they met regularly
- Irregular partner: the occasional partners

Figure10. Condom practice of **male** callers with their extra marital partners, Jul-Sep 2009 (n=573)

Figure10 a, With Irregular Partner

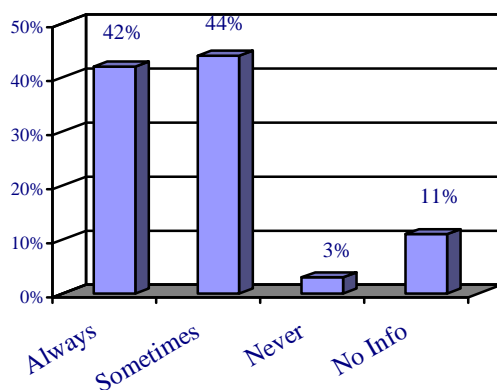
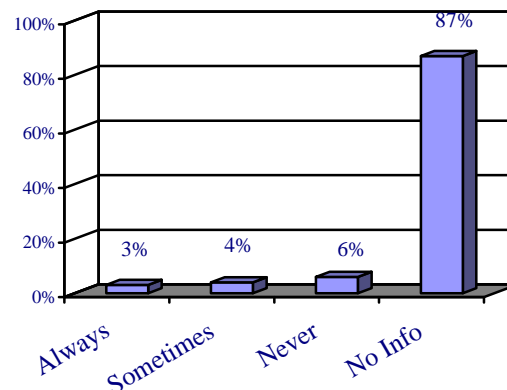


Figure10 b, With Regular Partner



Remarkably :

- Of total calls, only 23% talked about their condom practice (86% males, 14% females)
- Data collected from the high risk group of callers (those who had many partners and had active sexual behavior)
- The data in the chart did not present their regular behavior, it just present their mistake /behavior in the period of 6 months before calling the hotline. Among them , people were calling because of different reason :
 - ⇒ their uncertain behavior / unfaithful partners
 - ⇒ their only one times mistake after drunken
 - ⇒ their unsecured of using condom, of sexual relationship...ect
- We noted that among that high risk group of males :
 - ⇒ 17% are married and 86% are singles (had many girl friends / often change partners)
 - ⇒ 97% said they used condom with their extra marital partners but not regularly
 - ⇒ Only 1% of them used condom with their spouse
 - ⇒ They used condom with regular partners to prevent unwanted pregnancy, not for prevent HIV or STIs. So they used condom not properly (use it when the ejaculation nearly come out, during the female fertility period... etc)

C. INFORMATION OF CALLS

The data present in this report were analyzed from data random 1/3 of total calls, (n= 3,046)

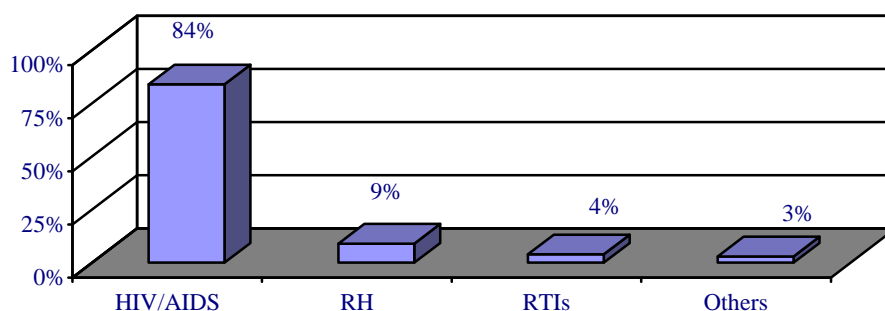
C1. Subject of call:

Callers can ask more than one question or one topic if needed. The main topic was collected as a first domain, then the second topic was recorded as a second and the third topic is not recorded.

The major subjects concerned were different between males and females. Female were concerned on Reproductive Health information than male callers, **Figure 11**

In this trimester, 29% of total calls asked more than one topic. In the second topic people were concerned on Reproductive Health question 14% and RTIs questions 11%, others 4%. Female talked more than one topic than male (33% female, 27% male).

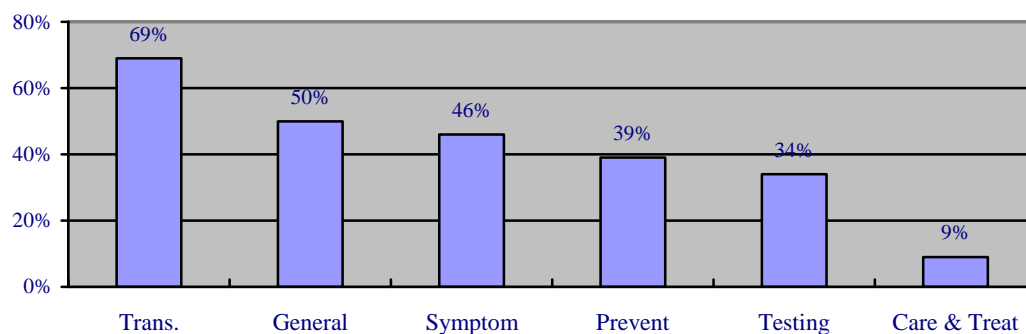
Figure11. Main Subjects asked by callers, Jul-Sep 2009 (n=3,046)



C1.1. for HIV/AIDS question (n=3, 046)

The most frequent questions on HIV/AIDS were on the transmission risk, 69%, **Figure12**

Figure12. Main questions on HIV/AIDS, Jul-Sep 2009 (n=3,046)



*** **For HIV transmission questions** (n=1, 750), people more concerned on:

- Transmission through sex, 78 %
- Transmission through blood, 71%
- Transmission from Mother to child, 56 %
- Transmission via kissing, 11%
- Misunderstanding information: 28% (transmission via food, insect, animal, , toilette, social contact,

*** **For AIDS Symptom questions** (n= 1170) People were aware on which is the main symptom of AIDS made them identified of their positive status by themselves. Some callers were panic with minor health problem such as: skin rash, diarrhea, fever, cough, insomnia, lost weigh ...etc The uncertainty feeling made people feel not at east to live peacefully

***** For HIV Prevention questions (n=997), people asked about:**

- Prevention through using condom: 77% e.g why I had to use condom since my partners also had HIV (+), how do we assure about the capacity of condom on prevention)
- Prevention of transmission risk from Mother to child: 49%
- Universal Prevention: 10%

***** For HIV testing questions (n=868): people were**

- Asked about HIV testing information: 8% (window period, the sensibility of test, type of test, HIV test procedure, test antigen, test anti body, and want to do test after having sexual relationship without protecting, *mistake.....*)
- Talked about HIV test and show their willingness to do test: 92%. After the conversation, callers were informed at least 03 nearest places of Testing Centers in their region which they can choose and go whenever they want. Most of them had their different reasons:
 - ⇒ 88% : Had at risk behavior :
 - ⇒ 7% : before married
 - ⇒ 3% : want to have a baby (plan)

***** For HIV Care & Treatment questions (n=225):** People were curious about how to take care their relative who have HIV positive, what kind of food they should eat, what kind of special hygiene they needed, what type of opportunistic disease they will get, what is the different between PLWA who can live long life and those who die early even both of them received the same ART.....etc. Among them:

- ⇒ 82% talked about ARV
- ⇒ 48% talked about Opportunistic disease
- ⇒ 27% talked about nutrition
- ⇒ 24% talked about co infection
- ⇒ 17% talked about the supplement used of traditional drug

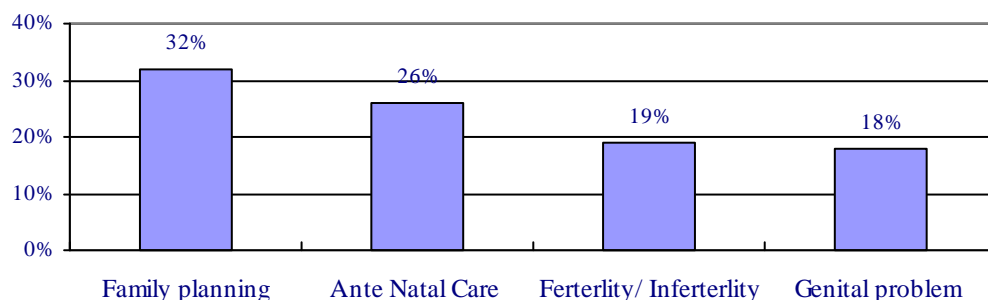
Noticeably:

- ⇒ HIV transmission risk are the most questions concerned by callers
- ⇒ AIDS symptoms is the main purpose of calls as HIV transmission but at this time people called , discuss and then show their willingness to do HIV test increased
- ⇒ Topic of calls were always related with the Media or News , people talk about HIV test is increased
- ⇒ Misunderstand information also contribute to make people feel not comfortable and call hotline to confirm
- ⇒ Question on HIV/AIDS related with drug was too small , no data : only 0.1%

C. 1.2. For Reproductive Health Question:

Beside of HIV/ AIDS question, **9%** of calls asked for Reproductive Health's information as their main purpose, **figure13**. Normally they can talk more than one topic. In fact RH, HIV and STIs always related each others.

Figure13. Main question about Reproductive Health, Jul-Sep 2009 (n= 280)



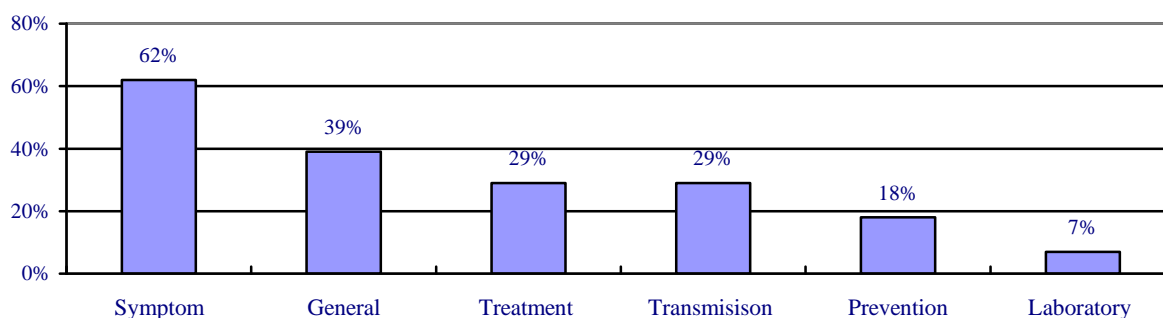
Noticeably :

- Female concerned about RH more than male (female 54%, male 46%), it is quite different from over all caller's gender (female 29%, male 71%)
- Most frequent questions on RH were about the fertility period, because young people are afraid of having unwanted baby. It means they don't want to use condom to prevent sexual transmitted diseases for their sexual relationship
- During this couple of months the early pregnancy check up campaign , contribute to raise people attention on how to do if they missed their period (menstruation), callers said

C.1.3. Sexual Transmitted Infection (STIs):

5% of calls asked for RTIs information as their first concern (increased 2% more than previous trimester, 3%). Remarkably, STIs's symptom and transmission risk were the main questions concerned by callers than others, **Figure 13**

Figure13. Main questions about STIs/ RTIs, Jul-Sep 2009 (n= 128)



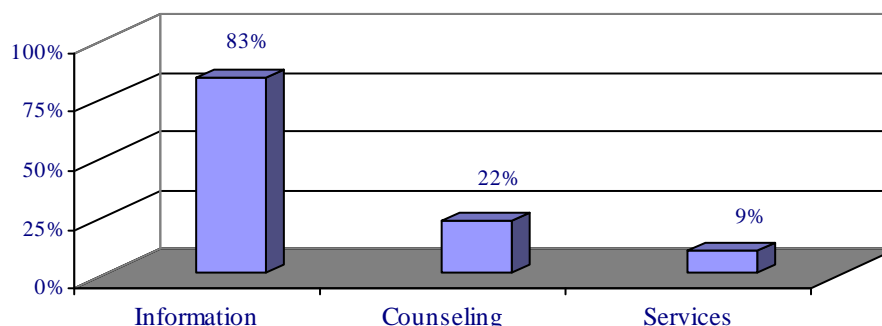
Noticeably :

- Symptom is the main topic of talk as HIV, because people are worries about their status.
- People want to make sure if it can be totally cured or not.
- Some people misunderstand about STI treatment. Caller said why the physician told me to convinced my partners to treat along with me, since they did not have any symptom
- Some callers confused that STIs can be transmitted from public toilettes
- No question asked by callers about STIs related with drug

C2. Type of Question:

Callers called hotline for different purpose including: asking for information, asking for services and some need counseling along with the conversation. **figure14**. It is a multiple answer that counselors can choose more than one topic according to the question concern by callers.

Figure14. Type of question asked by callers, Jul-Sep 2009 (n= 3,046)



Noticeably :

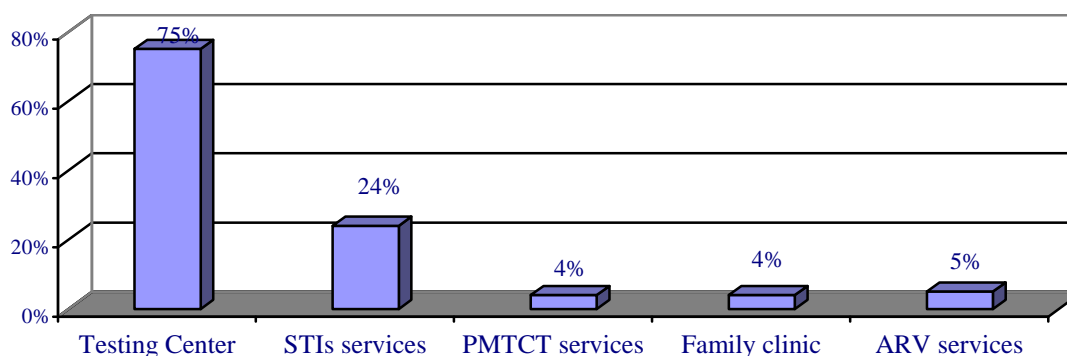
- Most of calls asked for information
- Calls to seek for counseling for those who called were fear and need to discuss for their problem related, their fear , their uncertain feeling and their misunderstanding
- Calls to seek for the services directly is fewer than other purposes, but some needed the services after the conversation

C3. Referral services provided by counselors:

Normally the answers are following with caller's queries. In some necessary cases callers were referred to medical or social health facilities according to their problem... etc.

In this period, **37%** of total calls were referred to different services, **figure15**

Figure15. Services referred by hotline counselors, Jul-Sep 2009 (n= 1114)



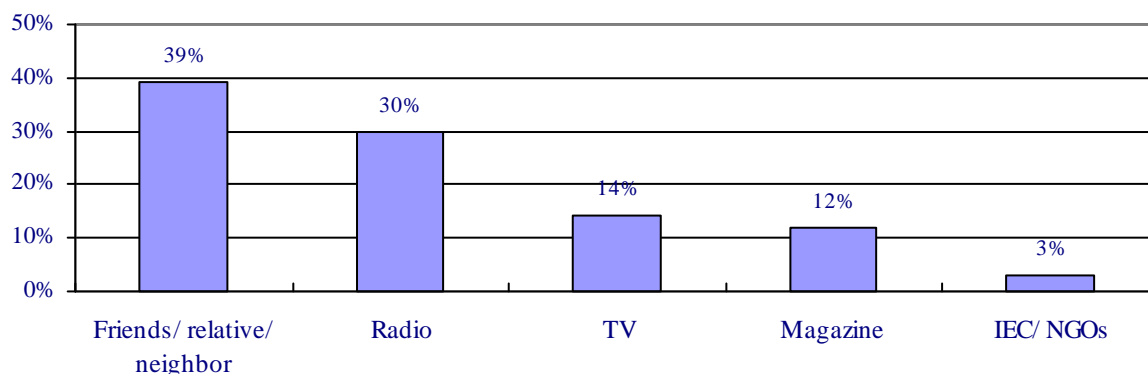
Noticeably :

- Callers wanted to go to do HIV test always high and increased in this period
- Callers needed STI check up increased (Jan-Mar : 18%, Apr-Jun: 20% , Jul-Sept : 24%) according to their past at risk behavior to eliminate their uncertain feeling
- Callers referred to VCCT and STDs increased than previous time (Jan-Mar: 73%, Apr-Jun 70%)
- Media topics were involving with caller's queries and service's referred (BBC spot on air this year focus on HIV testing) , so question about HIV status and calls referred to do test are increasing

C4. Source new callers knew hotline numbers:

Callers were asked to report about the source made them known our hotline numbers. The result were different according to the promotion done during that period, figure 16

Figure16. Source New callers knew hotline, Jul-Sep 2009 (n= 1283)



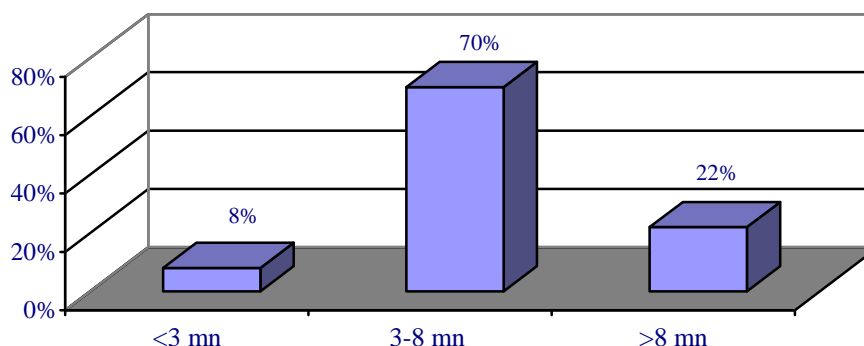
Noticeably : New callers knew hotline from :

- **Friends, relative, neighbors:** always high compared to other sources for both male and female (male 37%, female 43%)
- **Radio** was increased compare to two previous trimester (Jan-Mar,13% Apr-Jun, 17%, Jul-Sept : 30%) because of the extra wave done from 14th Sept to 04th Oct by Unicef
- **TV** increased compared to the 2 previous time (Jan-Mar 3%, Apr-Jun 10%, Jul-Sept 14%)
- **Magazine** can reach to young people in the specific target (MSM, E W, Female).
- **IEC and NGOs** increased since our partners used hotline INTHANOU as a references in their program or included in their materials

C5. Duration of conversation:

The duration of conversation was automatically recorded. The length of conversation varies from question to question. The total duration of conversation in this period was **54,715** minutes. The longest duration of talk was 48 minutes. The duration of conversation were set in different groups, figure 19

Figure19. Duration of conversation, July-Sept 2009 (n= 3,046)



Remarkably:

- The most conversation took < 3 mn were : interrupted calls , calls to confirm (need only *yes-no Answer*) , called out off subject, run off batteries, called during their busy time, the dialogue was not so clear , callers reported in their next calls
- Regarding by gender, women always took long duration of talk than men. Their dialogue always various than males, (Female talked > 8 mn : 29%, male talked > 8 mn : 20%)
- Even the number of calls decreased but the duration of each conversation took long , the total duration of talk were more than previous trimester (Jan-Mar : 49,523 mn, Apr-Jun : 50,964 mn)

III. OTHER ACTIVITIES

1. Website:

INTHANOU website address is www.inthanou.org .Our website contributes to promote hotline INTHANOU in case someone doesn't know our hotline service and want to contact us they can search and learn about our activity via our web page. Because of our website we can make our partnership in oversea to get more funding and reach more donors and partners. Furthermore we upload our trimester report in our web regularly. We pay for the domain name and web hosting every year to keep it accessible.

In Year 2009, the budget support the domain name and web hosting sponsored by Foundation de France (Marc Foundation).

2. Monitoring

2.1. Monthly meeting

Monthly meeting were done regularly once per month during the weekend (Saturday morning) and the schedule were on, 18th July, 15th Aug, 12th Sept. It is the opportunities for the team to sit together to discuss and sharing information, knowledge and some special issue occurred during their working period. Furthermore, it is time that we can share each among the team others news or something we want to create related with our program. It is also the occasion for the association to present the progress and the result of the hotline activities. Monthly meeting is used as work monitoring in our association.

2.2 Hotline monitoring: (internal monitoring)

- **Self monitoring:** Counselor monitors their achievement via our quick report system (hotline database) they can know how many calls they received during the period of work?)
- **Monitoring by manager via supervisor system:** co listening were randomly done in the manager room without telling the counselors. We would need to monitor on :
 - The availability of the phone (incoming, answering , waiting calls, or ringing)
 - The quality of answering : (in this period : **72** cases were co-listening to
- **Monitoring by donor:** donor visit once per month regularly for any technical or financial Assistance

3. Promotion:

During this period hotline numbers were promoted through

- **Magazine:**
 - Popular Magazine one issue per month regularly, funded by PSF-CI
 - Magazine “Together” targeting PLWA produced by SEAD, one issue per quarter paid by UNICEF
- **The media:**
 - Radio spot encourage women on seeking HIV/AIDS, STIs information through hotline was on air under UNICEF fund in the period there were two waves of Radio spots funded by Unicef : 1st -21st July and 14th Sept –4th Oct 2009
 - TV spots of BBC-WST linking with Inthanou Hotline numbers were on air from July till 15th Sept 2009 via TV 5 and CTN channel
- **Promotion materials :**
 - Hotline numbers were printed in IEC of **PSI**, referral card of partners , they circulate these cards for the entertainment workers
 - Hotline numbers were printing in Task , local NGOs as they want to circulate this numbers for their target for further information, education activity
 - Hotline promotion materials were re printed under financial support from **UNICEF** and **UNESCO**. Those materials were T-shirt, Key holders, sticker, and flyers. Those materials were distributed through different targets via women clinic, and partners which have their target as MARP. Further more at this moment we have contact with Angkor Beer Company to circulate our materials in order to encourage them to access HIV/AIDS and STI information via our anonymous hotline service
 - **UNESCO** offered additional support for T-shirt’s printing fee cover the gap budget from UNICEF’s budget and their target are young people and MSM.
 - The reprinting T-shirt add one more logo of “Marc Foundation” who is our new donor who co sharing support hotline Inthanou for 3 year (Jan 2009 - Dec 2011) the new donor is located in France under coordination of Sida Info Service
 - The distribution was completely done end of Sept 2009, requested the suppliers to distribute its
 - Contributed some budget with HACC for their two special events : Water Festival and World AIDS Day as our materials will be used to circulate during these events

The final list of distribution materials is in below:

No	Organization	Qty of distribution				Target
		T-shirt	Key	Sticker	Flyer	
	The total amount of the materials	4964	10600	1000	31500	
1	HACC (HIV/AIDS Coordinating Committee)	1000	200	20	1000	General population through 2 events (Water Festival & World AID Days)
2	PSF-CI (Phamacien Sans Frontier- Committee international)	400	1000	100	3000	EW / Mstyle / Smart girl
3	Angkor beer Company	200	1500	100	2000	EW
4	RHAC (Reproductive Health Association Cambodia)	0	1000	100	10000	Women / young people
5	WDA (Garment Factories Workers)	100	300	20	1000	Factories Workers
6	PHD (People Health Development Association)	300	1000	100	2000	Young people
7	UNESCO (Teacher Trainer)	20	500	100	1000	Young people
8	Khmer Youth Association (KYA)	400	500	100	1000	Young people
9	KDFO (Khmer Development of Freedom Organization)	250	500	50	1000	EW & MSM
10	AUA (ARV users Association)	150	100	10	1000	PLWA
11	Korsang	100	100	10	1000	Drug user
12	Department of Non Formal Education, MoEYS	400	500	10	1000	Young out of school
13	MHC (Men Health Cambodia)	350	500	50	1000	MSM
14	MHSS (Men Health Social Service)	150	100	0	300	MSM
15	CSSD (Cooperation for Social Service & Development)	200	500	10	1000	EW & MSM
16	UNICEF Office Phnom Penh	400	0	0	0	Young people
17	Kanha Organization	90	100	10	100	MSM
18	Khemara Organization	150	200	10	100	EW & MSM
19	CWPD (Cambodia Women People for Development)	200	500	50	2000	Women
20	Mit Samlang, Friends (Local NGOs)	0	500	50	1000	Young people / Drug
21	Mobitel	2	20	10	50	For their information about our promotion
22	Keep in office	104	1000	100	1000	For other additional requested not in plan

4. Limitation

There are some problems which effect to our activity and we are unable to manage:

- **Electricity:** Circuit interrupted is the main problem which made our telephone our system disconnected a couple of time until the generator operated. Normally we cannot set up the generator automatically functioning.
- **Telephone network :** Problem of telephone network made the difficulty to access
- **Telephone equipment :** Telephone stuck were less than previous time and we have the new spared in case of problem
- **Bad Weather forecast:** Our telephone system was accidentally interrupted whiles the flash comes down during heavy raining, it was thunder clap. Thus our team was afraid and requested to standby telephones while it is storming or raining with thunder and lightning.
- When the bad weather occurred during our busy time and happened many times per month the numbers of incoming calls will be automatically dropped down.

5. Others activities:

- Partners meeting/ collaboration :
 - i. Meeting with PSF-CI administrator and finance officer to discussed about financial issue, 09th Jul 09
 - ii. HACC member meeting for election of new steering committee, 28th Jul 09
 - iii. Meeting with SEAD , coordinator to discuss about using Inthanou in their Directories Book, 15th Jul 09
 - iv. Meeting with MobiTel to ask for revising message in the telephone system : asking for putting their logo and their brand name called “**Cellcard** “ (Cellcard prefix: 012, 092, 089, 017 and 077). Request accepted, thus message had been revised in the printing materials and voice message in the Call Center Machine
 - v. Joined PHD (People Health for Development) workshop talking about the information sharing to intergrades RH and HIV in Youth at Universities
 - vi. Hotline IEC materials reprinting had been circulated through our partners who work with MARPS and they requested more for their special event
- Hotline holiday :
 - i. Hotline Closed 3 days for Phchoum Ben, 18th, 19th, 21st Sept 2009
- Delegation / Information sharing
 - i. Unicef New Head of HIV/AIDS Section visited hotline on 10th Jul 2009
 - ii. Japan Committee for Unicef visited hotline Inthanou, 24th Jul 2009
 - iii. Sharing information from hotline to research learning group of BBC-WST, research title “ *good practices in ongoing coordination in joint programming for HIV and Young People* “
- New partners / donors:
 - i. **PSI** : Started new project of Birth Spacing with PSI, use new telephone line with the same brand name of Cellcard (Hotline number : 012 999 124, available from Mon-Fri, 12am-8pm) start hotline activity on 24th Aug 2009
 - ii. **FHI**: Under the coordination from UNICEF, FHI started its partnership with hotline Inthanou as they want to strengthen our hotline’s capacity to reach MSM target. The discussion was in the process, we did not find the final agreement yet.
- Update our directories service :
 - i. Prepared Medical service by categories for updating
 - ii. Prepared ToR of local Consultant to update hotline Directories service use as referral information and the announcement for the recruitment. All the preparation were done under the assistance from PSF-CI

IV. Conclusion

During the 3rd trimester of year 2009, we have seen the number of Valid Calls received increased than the two previous trimester (**9, 648 calls**, during 76 working days) even the percentage of Valid calls was low, 56% compared to the incoming calls. It was the result of communication support from Radio, TV (BBC-WST) and the promotion materials printing. The distribution of hotline's materials also contributed to absorb more specific target even it is not showing spectacularly as media but it is very helpful and have long term result.

Regarding by media's source made **new** calls called hotline, it was because of Radio and TV increased from:

- Source from TV : Jan-Mar : 3% ; Apr-Jun : 10 % ; Jul-Sept: 14%
- Source from Radio : Jan-Mar :13%; Apr-Jun: 17%; Jul-Sept : 30%

Regarding by target, we noted that we received more called from:

- **MSM** (self identify) increased from 62 calls in 2nd trimester to 110 calls in 3rd trimester (from 1.2 % to 1.7% of total calls from male)
- **PLWA** increased from 118 calls in 2nd trimester to 227 calls in 3rd trimester
- **EW** increased from 126 calls 2nd trimester (6%) to 173 calls in 3rd trimester (7%) of total calls from female

Regarding by topic of calls, Transmission and Symptom are the most frequent questions but at this time, people discuss and then want to do test to confirm their status by themselves were increased. It is a good result of media spot and education program of the government institutions, national and international NGOs and others related program.

We wish that our anonymous hotline service is contributed to support others HIV/AIDs, STIs programs of partners and can have a good work circle on referring to the public health facilities and NGOs partners.

Phnom Penh, 18th Nov 2009,
Prepared by:

Dr Monyl LOUN
Director of INTHANOU
HIV/AIDS Hotline