

ASIA-PACIFIC: HOPE
AND SOLUTIONS FROM
LIVING AT THE EDGE
OF THE CLIMATE CRISIS

DIGNITY AND
SELFDETERMINATION
FOR PEOPLE
LIVING WITH
HIV IN TIMES
OF THE
CLIMATE CRISIS







BACKGROUND

Climate change poses a fundamental threat to human health, affecting both the physical environment and aspects of natural and human systems. The Asia-Pacific region is vast and geographically diverse, spanning from the Himalayas to the tiny island states in the Pacific. Due to this diversity, the region encompasses all climate zones, resulting in a wide range of weather patterns from the monsoons in South and Southeast Asia, tropical cyclones in the Pacific, and the extreme snowy winter in Siberia.

The Asia-Pacific region faces a daunting spectrum of natural disasters and stands at the forefront of the climate crisis. Its coastal regions are particularly threatened by rising sea levels and cyclones, while its lowlands and the central dry zone are vulnerable to the impacts of floods and droughts. A person living in Asia-Pacific is six times more likely to be affected by disaster events than someone living outside the region.

Against this backdrop, it is pertinent to note that as the climate crisis intensifies, the Asia-Pacific region stands at the centre of both its worsening impacts and its most transformative potential solutions. This story series aims to capture the disproportionate impact of the climate emergency on vulnerable communities in the region and the human stories that drive communities in building and maintaining resilience in the face of the climate crisis.

COUNTRY SNAPSHOT

OVERVIEW

- Population: 17.4 million as of 2023
- **Economy:** GDP in 2024 USD 47.15 B (est.)
- Income Classification: Lower Middle-Income Country
 - Approximately 18% of the population lives below the poverty line as of 2024; a significantly higher proportion of this number (22.8%) resides in rural areas.
 - Growth is forecasted at 5.8% for 2024, and 6% for 2025.
 - <u>Unemployment in 2023 marginally declined</u> to 0.24%, from 0.25% the previous year. This indicates a favorable trend post-COVID, during which unemployment peaked at 0.4% in 2021.
- Daily Life & Culture: Cambodia's economy depends largely on agriculture, with roughly 74.43% of its population living and working in rural areas. Recent rapid improvement in socio-economic systems and policies has resulted in the United Nations reclassifying the country out of the Least Developed Country category by 2029. Environmental conditions that impact daily life and work are heavily impacted by proximity to the Mekong River, which runs down the length of the country's eastern regions.

HEALTH INDICATORS

- Tuberculosis: 32,772 new and relapsed cases in 2022.
- TB Incidence Rate: 320 cases per 100,000 population as of 2022
- HIV: 76,000 estimated cases (adults and children) as of 2023.
- Accomplishment of 95-95-95 by 2025 UNAIDS Global Targets
 - 92% know their HIV status
 - 100% PLHIV on ART
 - >98% PLHIV on ART, virally suppressed

 $\underline{\text{According to UNAIDS}}, \text{HIV}$ prevalence has dropped from 0.7% in 2015 to 0.5% in 2022.

CLIMATE RISK INDICATORS:

- World Risk Index Ranking: Cambodia is considered a highrisk country according to the World Risk Report, ranking 65th highest disaster risk from extreme weather events out of 193 countries.
- Climate Change Impact: Cambodia's average temperature has increased by an average of 0.18°C per decade since the 1960s, with a projected increase of 3.1°C by the 2090s. Projected trends see an increase in floods, droughts, and saline intrusion, contributing to an estimated 900,000 displacements since 2008. Flooding caused by Typhoons Nesat and Nalgae in 2011 affected over 1.5 million people.



It's a balmy February afternoon in Phnom Penh, and Seum Sophal sits in front of his laptop, dressed in a cheery orange tropical button-down. It's a busy day for him, as always—the long-time advocate is currently an officer for the Forum of Networks of People Living with HIV and MARPs (FoNPAM) program of Cambodia's Health Action Coordinating Committee (HACC), a network of local and international NGOs providing general health services and coordinating health programs in the region.

According to 2024 data from UNAIDS, there are an estimated 76,000 persons living with HIV (PLHIV) in the country; programs like FoNPAM

play a crucial role in helping these individuals enjoy a decent quality of life. For PLHIVs in Cambodia, this is particularly important work.

"In Cambodia, the poorest population is the people living with HIV," Seum says. When a person is diagnosed with HIV, the stigma surrounding the virus often leads to them losing their jobs, forcing them to move to rural areas where the cost of living may be lower.

It's a situation all too familiar to Seum, who experienced it firsthand when he was diagnosed over 10 years ago.

"[I felt] stressed and hopeless. Six years or ten years ago, most [PLHIVs] were hopeless. When they first tested HIV-positive, during that time, the doctors said that if your antibodies are quite strong, you can survive six years to ten years. So imagine, when this message comes into our brain, it's like we are hopeless," he shares.

Seum lived in his village for nearly five years before seeking work elsewhere. Others, however, stay in the countryside for lack of opportunity, motivation, or capability. In recent years, climate change has put this already vulnerable population at greater risk.

Cambodia has made incredible strides in HIV care and prevention over the past three decades. According to Khmer HIV/AIDS NGO Alliance (KHANA) Executive Director Choub Sok Chamreun, the situation has shifted from being classified as a Generalized Epidemic, wherein infections are spread among the general population, to a Concentrated Epidemic, where infections are mostly found within specific subpopulations.

The country is also well ahead of its timeline for reaching UNAIDS's 95-95-95 target, wherein United Nations member states aim to have 95% of their PLHIVs know their status, 95% of those who know their status are on treatment, and 95% of those on treatment have a suppressed viral load by 2030.

Chamreun says that Cambodia has, as of 2024, already hit its targets for both the second and third 95s: "[The] estimate in Cambodia is around 76,000 estimated people living with HIV. And among them, almost 70,000 are really under treatment. So that's why our second 95 and the third 95, the country already achieved. But the first 95 percent is still at 92%, based on the report of the national program," he adds.

FUNDING GAPS PUT GAINS AT RISK

Chamreun attributes this to a significant funding gap between treatment and; support programs and prevention programs, particularly among key populations such as men who have sex with men (MSMs) and transgender people, who account for more than 80% of new HIV infections in the country.

In Cambodia's 2023 funding request to The Global Fund to Fight AIDS, Tuberculosis, and Malaria, the estimated total funding gap for HIV-prevention programs from 2024 to 2026 is roughly USD28.9 million, with zero anticipated funding from non-Global Fund entities. The amount that can be allocated to prevention efforts through The Global Fund's USD60.39 million commitment to Cambodia for this period, according to Chamreun, isn't enough to bridge this gap.

"With the limited funding, we are only able to cover 60% of the MSMs and transgender [people] in the country, so we need additional resources to make sure that we can reach [the] other 40%," he says.

Data from UNAIDS and The Global Fund suggests an even bigger gap in terms of the reach of these targeted prevention programs. According to UNAIDS, there were an estimated 94,000 MSMs and 15,700 transgender people living in Cambodia in 2023; only 39,408 MSMs (42%) and 7,511 transgender people (48%) were reached by



HIV prevention programs in that same year, based on results provided by The Global Fund.

Further complicating matters is the US government's recent decision to freeze its spending on foreign aid. In its request to The Global Fund, Cambodia was anticipating a total of USD7.7 million in HIV-related aid from the US.

The prevention programs that need this funding play a significant role in Cambodia achieving its target for the first 95, as they necessarily involve early detection efforts. Targeting key vulnerable populations like MSM and transgender people, in turn, improves the efficiency of these efforts. While the funding gap for prevention programs is a major issue, climate change has emerged as an exacerbating factor, both in achieving the 95-95-95 goals and in negatively impacting PLHIVs' quality of life.

Despite producing less than 1% of global greenhouse gas emissions, Cambodia is one of the more vulnerable countries in the climate crisis, according to a 2021 report by the World Bank. The country is projected to see its baseline temperature increase by 3.1°C by the 2090s; currently, the average high during the summers is already at a blistering 35°C. During the 2024 Southeast Asia heat wave—attributed in part to human-induced climate change—areas in Preah Vihear and Siem Reap saw peak temperatures of 42.8°C, the hottest recorded in 170 years.

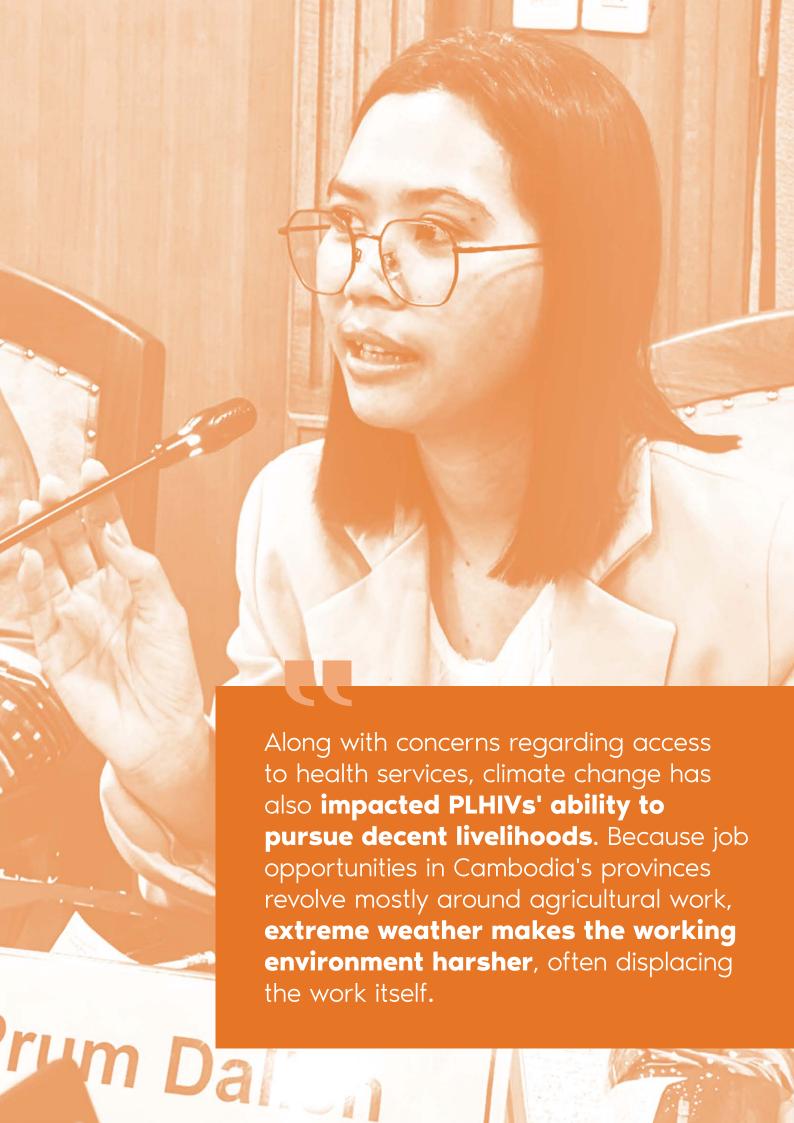
Erratic weather also increases the risk of drought and flooding, particularly in provinces located next to the Mekong River. Its heavy dependence on agriculture leads to concerns about livelihood and food security, while its relatively high poverty rate and poor infrastructure negatively impact the adaptability of its people and system.

These conditions can increase health risks among Cambodia's PLHIVs in multiple ways, one of which is through displacement.

"Because of climate change, people have to move from one place to another place to get jobs," Chamreun explains. "If the area where they can have a good livelihood no longer can be [survivable], they have to move from one place to another place to find jobs."

"And sometimes, you know, because of so much this hunger, so they don't care about their medication. because you can't take medication until you have enough food," he continues. "The way that they focus is very much on their stomach, very much on their survival. So they don't care about that."

Dalish Prum, Program Manager at the Cambodian People Living with HIV Network (CPN+), echoes Chamreun's sentiments on mobility. After learning she was HIV-positive at an early age, Dalish has spent the better part of her life advocating for PLHIVs, often working on the grassroots level with vulnerable communities.



She shares that, along with concerns regarding access to health services, climate change has also impacted PLHIVs' ability to pursue decent livelihoods.

Because job opportunities in Cambodia's provinces revolve mostly around agricultural work, extreme weather makes the working environment harsher, often displacing the work itself.

Floods can force workers to relocate where it's safer, while droughts can negatively impact farm yields. This, coupled with persistent stigma against HIV, leaves PLHIVs with significantly fewer options for income generation.

"They need to borrow money from banks [to] get income, the farmers. It's very, very difficult for them, most people living with HIV," Dalish explains. "Mostly they are jobless, [they] just stay home, depending on their husbands or their wives for their income."

According to Seum, outside of livelihood issues impacting PLHIVs physical and mental health, intense weather conditions also make it much more difficult to access healthcare services.

"In Cambodia, we don't have buses. We don't have public transportation from one commune to one commune. We use motorbikes," he says. "So you [can] just imagine, you drive [taking] a motorcycle to the clinic [in those conditions]."

This is especially concerning for PLHIVs living in more rural areas, some of which can be a few hours' drive away from the nearest health center.

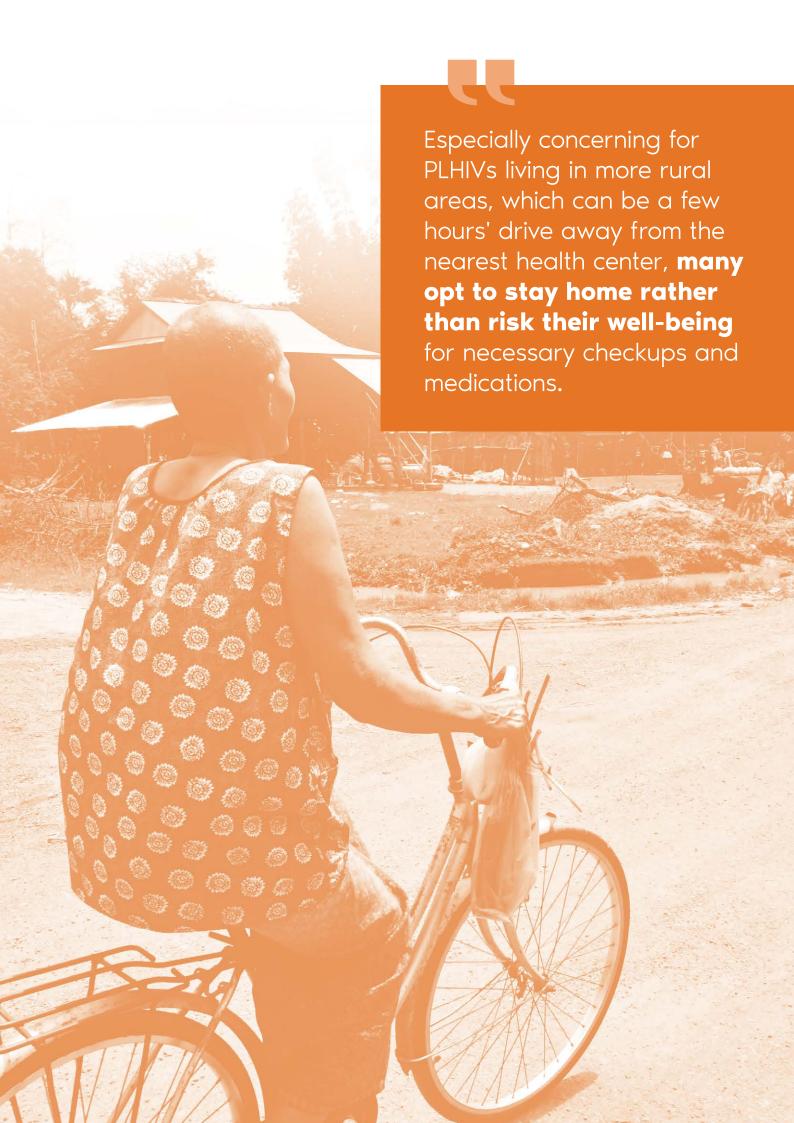
Rather than risk their well-being for necessary checkups and medications, many opt to stay home, where they can better protect themselves from the elements.

Worsening road conditions due to extreme heat or flooding can also lead to delays in the shipment of medication, although Seum explains that healthcare providers have adapted to this problem by maintaining surplus stock through multi-month dispensing (MMD).

For those who are unable to relocate from disaster-struck areas, however, these delays can be secondary to a significantly increased risk of illness.

"There may be some seasonal disease outbreaks like dengue fever or malaria that can happen," says Sokkung Sou, Head of Programmes at WaterAid Cambodia, an NGO working to improve access to clean water among vulnerable communities. "Also water borne-related diseases like diarrhea happen because of flooding. [Sometimes] there's no safe water to drink, and that is an impact of climate change and extreme weather."

These issues threaten the tremendous progress Cambodia has made towards ending its AIDS epidemic.



Chamreun points out that the country has seen incredible improvement in its HIV response—"We are one of the not-many countries in the world that can control HIV." Through a variety of government-led social protection initiatives including nutrition assistance, cash transfers, and scholarships, Cambodia's PLHIVs receive benefits that empower them to take better care of their health. Coupled with a fervor for both tested and novel detection and treatment options—including recent innovations like oral swab self-testing kits and a long-term injectable PrEP—the country is one of the more advanced in the region when it comes to HIV-related efforts.

This progressive, proactive approach towards the epidemic has resulted in their HIV prevalence seeing a significant turnaround, decreasing from 1.2% in 1998 to 0.5% in 2023.

For Seum, this improvement is best seen in how the outlook has changed around HIV, and how it contrasts with his own experience decades ago: "[It] only takes 15 days to three months to reduce viral load. The suppression—it becomes undetectable already and they can marry. They can have children right now. But before, like me, they informed me, 'If you are lucky, you can survive ten years.'"

STIGMA AND DISCRIMINATION

However, the stigma that caused him to lose everything still persists. It continues to leave people jobless, forcing them into situations that make them even more vulnerable. It isolates them from their families and devalues them in the public eye.

"HIV kills us slower than stigma and discrimination," Seum says.

Climate change is an exacerbating factor. It makes complicated situations even more difficult for Cambodia's PLHIVs to navigate, costing the least fortunate among them no small measure of dignity. It's one thing to be seen, in Seum's experience, as the "bad guy" for being HIV-positive; struggling in impoverished conditions with barely an opportunity to work only makes matters worse.

Ten years on in this advocacy, Seum—like many of his peers—has been a tremendous help in improving the lot of PLHIVs in Cambodia. Yet it is only recently that organizations like HACC, WaterAid, CPN+, and KHANA have examined the impact of climate change on their efforts to this degree.

There is still so much to learn about the matter, even for celebrated veterans like Seum. One thing, however, is for certain: for as long as the climate crisis goes unabated, PLHIVs in Cambodia's most vulnerable sectors will have their ability to live a dignified, self-determined life significantly compromised.

REFERENCES:

- https://data.who.int/countries/116.
- https://www.statista.com/statistics/438180/gross-domestic-product-gdp-in-cambodia/.
- https://www.worldbank.org/en/country/cambodia/overview.
- 4. https://bti-project.org/en/reports/country-report/KHM#:~:text= Approximately%2018%25%20of%20the%20population,equipment%2C%20 tools%20and%20communication%20services.
- 5. https://www.adb.org/news/adb-maintains-cambodia-growth-forecast-2024-2025.
- https://www.statista.com/statistics/808277/unemployment-rate-incambodia/.
- 7. https://tradingeconomics.com/cambodia/rural-population-percent-of-total-population-wb-data.html#:~:text=Rural%20population%20(%25%20 of%20total,compiled%20from%20officially%20recognized%20sources.
- 8. https://www.un.org/development/desa/dpad/2024/graduation-of-cambodia-and-senegal-from-the-ldc-category/#:~:text=Cambodia%20 and%20Senegal%20scheduled%20to%20graduate%20from%20the%20 LDC%20category%20in%202029,-19%20December%202024&text=On%20 19%20December%202024%2C%20the,transition%20out%20of%20the%20 category.
- https://www.aidsdatahub.org/sites/default/files/resource/cambodia-tb-profile.pdf.
- 10. https://www.aidsdatahub.org/sites/default/files/resource/cambodia-tb-profile.pdf.
- 11. https://www.unaids.org/en/regionscountries/countries/cambodia
- 12. https://open.unaids.org/countries/cambodia
- 13. https://dsd.unaids.org/.
- 14. https://weltrisikobericht.de/wp-content/uploads/2024/01/WorldRiskReport _2023_english_online.pdf.
- https://climateknowledgeportal.worldbank.org/sites/default/files/2021-08/15849-WB_Cambodia Country Profile-WEB.pdf.
- https://roasiapacific.iom.int/sites/g/files/tmzbdl671/files/documents/ 2024-06/cambodia-snapshot-final_updated.pdf.

These stories are a part of a series titled ASIA-PACIFIC: HOPE AND SOLUTIONS FROM LIVING AT THE EDGE OF THE CLIMATE CRISIS.

The Cambodia story is a collaboration between APCASO, the Activist Coalition on TB, Asia-Pacific (ACT!AP), and the Khmer HIV/AIDS NGO Alliance (KHANA).



APCASO is an Asia-Pacific regional civil society network organisation that serves as a catalytic platform for advocacy and community systems strengthening for health, social justice, and human rights for key, vulnerable, and marginalised communities in Asia and the Pacific.

66/5, Tower 33, Sukhumvit 33 Road, Klongton Nuea, Wattana Bangkok, 10110 Thailand www.apcaso.org

