A Cambodian NGO with a Vision

Our Vision is to improve the lives of individuals in Cambodia by making reproductive, newborn and child health, infectious diseases, HIV/AIDS and related services safe, available, and sustainable. We provide technical assistance, training and information. Our focus is on practical solutions that improve and make services accessible.
We believe that individuals have the right to make informed choices about their health needs. We work in partnership with the government, private institutions, and health care providers to make this right a reality.
Reproductive and Child Health Alliance (RACHA) started as an alliance of three United States Agency for International Development (USAID) Projects in 1996.
For seven years RACHA, as an international organization under the EngenderHealth Project, has been a consistent partner of the Ministry of Health (MoH) of the Kingdom of Cambodia. On its eighth year of operation, RACHA registered itself as a local NGO with the Ministry of Interior (Registration No. 123). RACHA was granted 501 (C) (3) as a non-profit organization in the State of Nevada USA. RACHA’s main strength is its exceptional team of highly competent and committed Cambodian staff.

RACHA operates in thirteen Operational Districts in eight provinces. Our work is made possible through the generous support of the following donors:

- USAID
- The Packard Foundation via EngenderHealth
- UNFPA
- Pfizer
- Catalyst Pathfinders

Legend

Boundary
- Province Border
- Operational District Border

Shade
- RACHA Focus Area
  (All RACHA activities apply in this area)
- Non RACHA Focus Area

Activities
- Province Level Activities
  - Logistic Drug Management System
  - Life Saving Skills (LSS)
  - Neonatal Resuscitation Program
  - Voluntary Surgical Contraception (VSC)
  - Client-Oriented and Provider-Efficient (COPE)
Focus: Safe Motherhood

In Cambodia, the maternal mortality ratio is approximately 437 per 100,000 births. An estimated one third of these deaths are caused by unsafe abortions. There are an estimated 37 neonatal deaths per 1,000 births. To address the issue of safer motherhood, the MoH and RACHA use the Whole Health approach. This approach focuses on improving maternity services at health centers and referral hospitals, upgrading the skills of midwives and doctors, and utilizing community resources, such as traditional birth attendants.

RACHA works to ensure safe and healthy mothers and babies by:

- **Life Saving Skills** – provision of competent birth attendants through training of midwives in referral hospitals and health centers.

- **Traditional Birth Attendants** – provision of training and promotion of home birth kits and distribution as an interim strategy to ensure clean home delivery while facility-based deliveries are being improved.

- **Emergency Obstetric Care Program** – skills upgrading training for doctors and midwives in referral hospitals. This includes an emergency transportation system.

- **Neonatal Resuscitation Program** – provision of training with follow up and equip health service providers nationwide to increase child survival rate.

- **Post Abortion Care** – a curriculum and monitoring tool developed for doctors, medical assistants, and midwives including management of complications, counseling on birth spacing, and linkages to referral networking.

- **Syphilis Screening During Pregnancy** – entails syphilis testing of pregnant women and their partners and treatment of positive cases.
Focus: Birth Spacing

The unmet demand for birth spacing methods is estimated to be 32.6% while the contraceptive prevalence rate is 19.9% (CDHS 2000). Barriers in accessing birth spacing services include low informed choices, gender inequity, poverty, and quality of available services. RACHA aims to assist the MoH in improving access to different methods of birth spacing services to women and men of Cambodia.
RACHA's approach is to promote informed choices for couples by:

- **Birth Spacing and Counseling Training** – intended to improve knowledge and skills of health staff on birth spacing methods and counseling.

- **Voluntary Surgical Contraception (VSC) Program** – with the establishment of MoH Guidelines on sterilization procedures, RACHA facilitated training on VSC for surgeons and counselors at referral hospitals and access to surgical contraception for the populace.

- **Centers for Intrauterine Device Service Provision** – provides IUD services by trained midwives in accredited health centers to consenting clients.

- **Optimized Birth Spacing Interval Project** – aims to raise community awareness on the need to adequately space births (from 3 - 5 years) to lessen the risks of maternal morbidity and mortality. A significant component of the project is the inclusion of male partners for mutual responsibility and accountability.

- **Community-Based Services** – distribution of birth spacing commodities by village health support groups (VHSGs) and increasing access of women and men to contraceptive methods.
Focus: Child Health

The Child Health Program has started since RACHA’s inception in late 1996. With 95 infant deaths per 1,000 live births and 125 child deaths per 1,000 live births, child health and child survival remains an important focus area of RACHA. Hence, most of its direct interventions to mothers and communities are geared towards child survival.

RACHA works towards ensuring child survival by:

• Integrated Management of Childhood Illnesses (IMCI) – working closely with IMCI trainers to introduce IMCI concepts and to build capacity of health staff in managing sick children.

• Vitamin A distribution – provides training to trainers on Vitamin A with MoH and other partners.

Most child health activities such as promotion of oral dehydration treatment, breastfeeding, complementary food and vaccination are incorporated in the following focus areas: Safe Motherhood, Birth Spacing and Limiting, and Community Based Activities.
Focus: STI/HIV/AIDS

Cambodia has one of the most serious HIV epidemics in Asia with a national prevalence rate of 2.1% among pregnant women and 1.9% (HSS 2003) among 15-49 age groups. RACHA initiated a comprehensive prevention program targeting primarily high-risk groups consisting of young adults, migrants, sex workers and clients in both rural and urban areas.

RACHA’s aim is to create awareness, strengthen skills, and improve access to quality services by:

- **Urban STI/HIV/AIDS Program** – supports the syndromic approach for sexually transmitted infection services at the health center level through training support. Prevention of Mother to Child Transmission and Voluntary Counseling and Testing programs are also available.

- **Rural STI/HIV/AIDS Program** – targets migrant couples where the partner/husband is away from home periodically and it targets karaoke/mobile dancing girls to increase their self awareness and assessment of the risk of transmission of STI and HIV/AIDS.

- **Integration of STI/HIV/AIDS to reproductive health activities** – incorporates STI/HIV/AIDS education among ongoing reproductive health activities.
Focus: Infectious Diseases (Community DOTS)

Cambodia is one of the 23 countries with a high TB burden. It is estimated that at least 107 per 100,000 Cambodians die of tuberculosis annually. The MoH response incorporated the Directly Observed Treatment Short course (DOTS) to combat TB which was met with enthusiasm by health organizations. In 2003, RACHA adopted the Community TB DOTS approach.

RACHA works to strengthen capacity of communities to combat TB and malaria by:

- **Community Based Direct Observation Therapy Short course for Tuberculosis (CB TB DOTS)** - disseminates information and provides anti TB regimen at the village level through VHSGs, including minority groups.

- **Malaria Control Program** - disseminates information and initiates provision of anti-malaria regimen at the village level through VHSGs and village shopkeepers.
Focus: Capacity Building

Building capacity in order to improve quality and accessibility to health service in an extremely resource-poor environment has been one of the main challenges of RACHA. The Capacity Building and Community Services Unit works to strengthen capacity of government health staff and NGOs at different levels, at the same time strengthening the capacity of community-based resources.
RACHA works to improve quality and increase access to services by:

- **Logistic Drug Management** – established control system and provides technical support for all personnel involved with the supply system, analysis of stocks at operational district pharmacies, and provincial pharmacies up to the national level. Mentoring and coaching are important components of the program.

- **Client-Oriented Provider-Efficient (COPE)** – problem-solving tool developed by EngenderHealth to improve health facility management and quality services delivery.

- **Self Improvement System** – a problem-solving tool used by health centers to improve their use of technical MoH protocols for service delivery.

- **Health Information System** – at operational district and health center levels.

- **Operations planning, monitoring and evaluation** – at operational district and health center levels.

- **Revolving fund and support outreach services** – complementing the Health Center Performance Based Contract Project, this provides start-up funds for the health centers’ outreach activities.

- **Health Center Performance Based Contract** – aims to increase access to and utilization of health center and outreach services in catchment areas.

- **Credit for Quality Improvement** – motivates staff to improve their performance and operates a group guarantee repayment scheme.
Focus: Strengthening Social Networks for Healthy Communities

Over the years, RACHA has developed a strong commitment to Whole Health. The Whole Health approach stresses the importance of working at all levels of the health system, linking the levels, and maximizing the use of existing resources. Cambodia’s valuable resources lie at the community level. RACHA draws on community resources in order to strengthen the capacity of local change agents, community leaders, and religious institutions.

Strengthen Social Networks

RACHA works hand-in-hand with the MoH. Its provincial offices are located within the maternal, newborn and child health offices. At the same time, RACHA works extensively with voluntary and commercial elements of the communities, including:

- **Community Micro-Credit Scheme** — to improve disposable income for health care and nutrition as well as support health promotion activities in the village.

- **Community Human Resource Development** — continuously involve Village Health Support Groups (VHSGs), nun and wat grannies, village shopkeepers and traditional healers.
• Community-Based Services on Birth Spacing – engage community volunteers as contraceptive distributors.

• Community/Village Performance Contracts – to increase the knowledge and utilization of health services among community members. Incentives come in the form of provision of water wells.

• Village Shopkeepers’ Program – involving shopkeepers in improving access to ORS, pills, condoms, iodized salt, iron-fortified fish sauce, etc. and discourage use of inappropriate drugs for sick children.

• Community Health Education/Promotion and Contest – innovative follow-up activity with incentives coming from the community micro-credit scheme.

• Iron Fortification of Fish Sauce Project – aims to reduce very high iron deficiency prevalence among children through fortification of most commonly used food additive in Cambodian household: fish sauce.

• Comedy for Health Program – using local comedians to impart health information on topics such as HIV/AIDS, TB, malaria, maternal, newborn and child health, including health promotion of breastfeeding and birth spacing through traditional Khmer cultural practices during wedding ceremonies, special occasions, and rituals.
Partnership For Change

RACHA's goal is to strengthen the health system. We are achieving this by complementing and integrating MoH policies and USAID strategies throughout our program. This entails working at multiple levels and with multiple elements of the formal and informal system, linking individuals and organizations from the community to the government level wherever possible. RACHA's strong and productive partnership with the MoH and other national and international counterparts allows RACHA to be a bridge between the practical experiences at the community level and the conceptual processes at a bureaucratic level. Thus, our contribution is a Whole Health approach towards improving health services for maternal, newborn and child health in Cambodia.
Looking To The Future

RACHA's existing programs will be maintained and incorporated within the MoH policy and USAID strategic framework. RACHA will scale up in identified areas focusing on:

- Building leadership and capacity;
- Maintaining effective collaboration and partnerships with public and private sectors to expand quality reproductive, newborn and child health, infectious diseases, HIV/AIDS, and other health services;
- Promoting and strengthening the participation of communities to effectively protect and improve their own health;
- Assisting in developing policies supporting private and public reproductive, newborn and child health, infectious diseases HIV/AIDS, and other health services;
- Improving logistics systems for the management of drugs (procurement, inventory control, and distribution);
- Supporting training and performance improvement efforts for health staff;
- Integration of family planning, HIV/AIDS into existing reproductive health services;
- Increase the demand for quality health services through behavior change communication and social marketing strategies.
Office House # 160, Street 71, Tonle Bassac
P.O.Box 2471
Phnom Penh, Cambodia
Phone: (855) 23 213 724
Fax (855) 23 213 725
E-mail: office@racha.org.kh
Resource Center- http://rc.racha.org.kh

2005

RACHA is primarily funded by USAID