

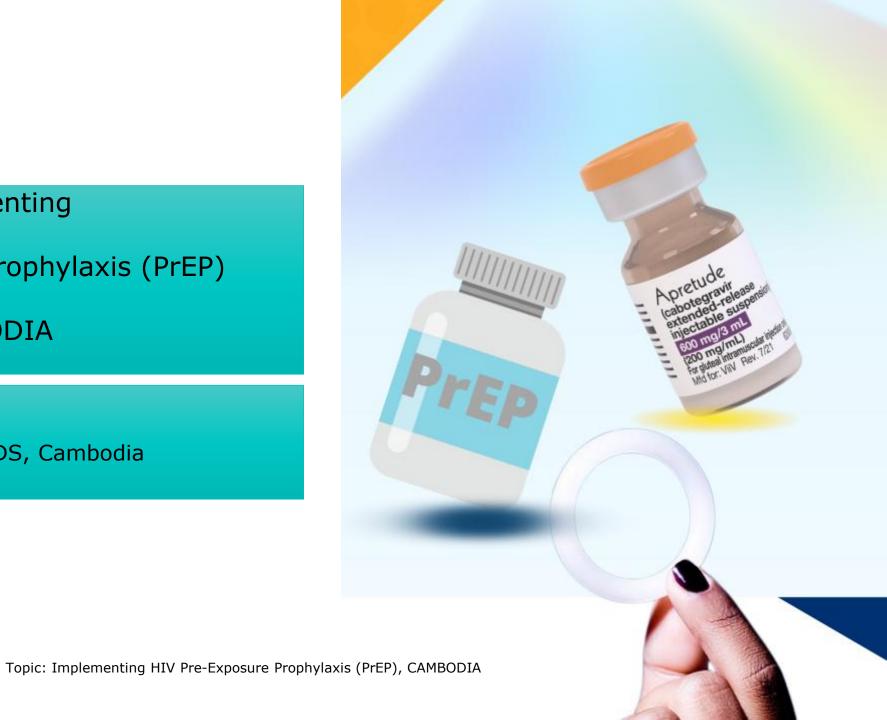
Implementing

HIV Pre-Exposure Prophylaxis (PrEP)

CAMBODIA

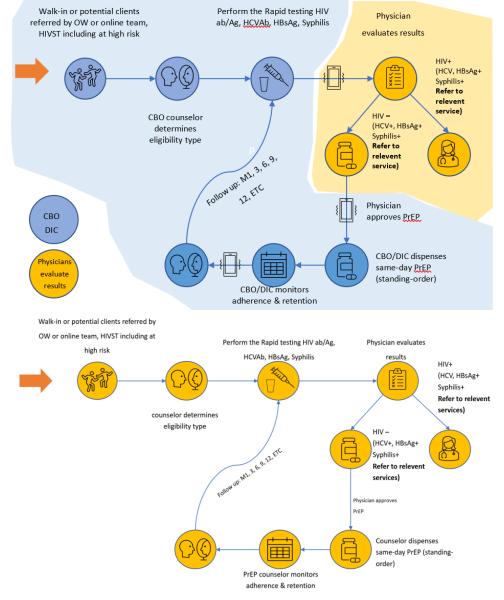
Dr. BORA NGAUV

Deputy Director of NCHADS, Cambodia





PrEP Introduction and Scaling Up





June 2025



Oral PrEP: Health facility-based implementation started in July 2019. Community-based Drop-in-Center PrEP access began in 2022. Oral PrEP services continue to scale up.

Injectable PrEP (CAB-PrEP): Implementation began in June 2025 in four sites in Phnom Penh additional sites in Phnom Penh this year and five new provinces in early 2026.

DVR PrEP:

Implementation launch in October 2025, and in four sites in Phnom Penh with plans to scale up in additional sites in Phnom Penh.

Dr. BORA NGAUV, Deputy Director of NCHADS

Topic: Implementing HIV Pre-Exposure Prophylaxis (PrEP)

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Evolution of PrEP implementation



2019

Oral PrEP concept note approved by MoH in **May**

PrEP **started** at **Start** Chhouk Sar Clinic, **ORAL** Phnom Penh city and **PrEP** RHAC, Siem Reap, July 2019



2021

Established additional three health facility sites post-COVIC

CBO PrEP at drop-incenters SOP approved

Developed PrEP realtime data tracker

Start

CBO

PrEP



2023

10 health facility and nine **CBO PrEP DIC sites**

Conducted a qualitative PrEP Drop out survey

Conducted a qualitative CAB-LA acceptability and feasibility assessment among key populations



2025

Conducted the CAB-PrEP ToT

Oral-PrEP available 49 sites, 34 facilities & 15 CBOs. Establish additional 8 facilities & 7 CBOs.

CAB-PrEP SOP **approved in** May and launched in June at 4 PrEP sites, Phnom Penh. And establish additional 6 facilities in Phnom Penh.

DVR-PrEP SOP approved in August and launched in October at 4 PrEP sites. And establish additional 6 facilities & 2 CBOs.

2027

Establish additional 34 facility sites

Continue for CAB-PrEP and DVR-PrEP implementations

Launch the LFN implementation

Established additional five health facility sites in Phnom Penh, Battambang, Banteay Mean Chey, Siem Reap provinces

2020

Established additional seven health facility sites

Established the first three CBO PrEP DICs

2022

2024

Established additional four **CBO PrEP DIC sites**

Start

CAB

DVR

Conducted the qualitative DVR feasibility and acceptability among women at risk

Developed the SOP on CAB-PrEP and DVR-PrEP

CBOs CAB-PrEP establish additional 8 facilities in 8 provinces

Oral-PrEP establish additional 34 facilities & 6

DVR-PrEP establish additional 8 facilities & 8 CBOs in 8 provinces

Introduce the TelePrEP and MobilePrEP in Phnom Penh and provinces

Prepare for LEN-SOP, drug supply, demand creation, curriculum and tool

2026



Path to launching CAB-PrEP

01

Preparation

- WHO recommended
- Conducted the CAB acceptability study
- Developed the CAB-PrEP SOP
- Developed the training curriculum
- Procured CAB with GF support
- MOH endorsed

02

Phased Implementati on Strategy

- •Phase 1: Four sites in PNP
- Phase 2: expand to 5 additional sites in PNP
- •Phase 3: expand to other highburden provinc es-BTB,BMC, SRP, SHV and KDL

03

Prioritized Target Population

- MSM
- TGW
- FEW
- PWID
- PWUD targets chemex participants

04

Service delivery

- Integration with existing facility-base oral PrEP service
- Client Centered Design
- Friendly service provision

05

Community Engagement and demand creation

- Integration with existing oral PrEP service
- Community involvement at each step
- Outreach are key promoters
- Emphasis on PrEP choice

06

Monitoring and Coordination

- Use DHIS2 for real-time data tracking.
- Indicators include uptake and retention by PrEP modality
- Quarterly TWG meeting includes CBOs
- National Telegram group

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Where we are now

Effective Communication

Telegram chat groups at all 49 PrEP sites enable service providers and OW to communicate with each other and share additional information regarding the services and answer questions.

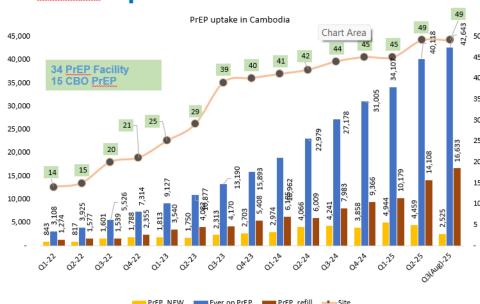
Adaptability in Challenges

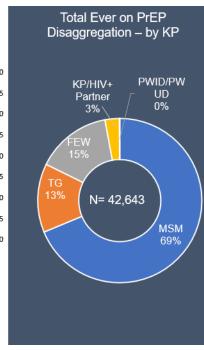
With active participation and advocacy from communities, we have added CBO drop-in-center PrEP, CAB-PrEP, and DVR and will soon implement TelePrEP and MobilePrEP.

Continuous Feedback and Improvement

Routine quarterly meetings with providers, CBOs and community led monitoring forums provide feedback and guidance for service improvements.

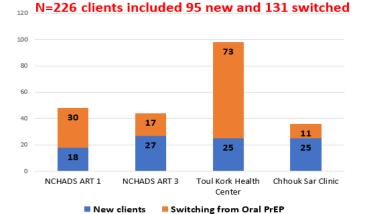
PrEP Uptake - all sites 2022-2025

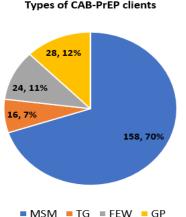




CAB-PrEP enrollment as of August 31, 2025

Number of CAB-PrEP clients enrolled at 4 PrEP clinics





Dr. BORA NGAUV, Deputy Director of NCHADS Topic: Implementing HIV Pre-Exposure

Prophylaxis (PrEP), CAMBODIA



Empowering Community-Led PrEP Demand

'Nothing for Them Without Them'

Community-led PrEP ensures those most affected are at the forefront of decision-making, fostering ownership and inclusivity.

Active Participation Builds Trust

Engagement beyond observation allows for genuine leadership, which increases program relevance and participant trust.

PrEP NEW and PrEP Refill - Health Facility vs CBO



Addressing Unique Needs

Community-driven strategies, as highlighted by WHO, effectively tackle specific challenges and improve health outcomes.

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»Remaining Challenges«

Retention

- » HIVST and TeleRefills to reduce clinic and DIC visits.
- » CAB-PrEP and, hopefully, Lenacapavir to further reduce pill taking and clinic visits

» Community Mobilization

Establish PrEP as a community standard driven by peers through social media, dating sites and promotion at community gathering sites

» Cost Barriers

» Make PrEP free of all costs, including clinic registration and access fees, and lab costs, until it is established as a community standard with demonstrable results.

» Resource Limitations

» Limited resources restrict development, making ure innovative and sustainable solutions essential for overcoming these challenges.



» Acknowledgments

















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