



ព្រះរាជាណាចក្រកម្ពុជា
ជាតិ សាសនា ព្រះមហាក្សត្រ



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សម្តេចព្រះមហាសទ្ធារាជ នៃ ព្រះរាជាណាចក្រកម្ពុជា**

Dear Esteemed Leaders and representatives

First of all I would to express my sincere thank to Cordaid, Ecumenical Advocacy, and UNAIDS that make this great event happened. To today it is my great honour and pleasure to participate with all of you coming from different religions, traditions, and faiths around the world to share value, knowledge, idea, and experiences in order to solve the challenging problems.

For these last few decades there have been many new and strange natural phenomena occurred such as Tsunami, Earthquake, global warming, climate change and diseases like HIV/AIDS, bird flu HINI, and swine flu etc. that add up to the existing issues that need to be solved. Among those, HIV/ AIDS are the most concern for all that need religions from all traditions and faiths to respond strongly, strategically, and structurally.

Traditionally, each religious leader had its own good tradition to have loving kindness and compassion toward all beings especially the people who are suffering. Now, we can look back to see in the teaching of our Master that He helped to cure and look after the sick people during his time. For example during the Lord Buddha time there was a monk whose name Putigattatissathera fell in sick and his body got swollen, purulent, and rotten. And at that time because of bad smell of pus and blood came out of his body, all the monks who lived with him ran away. Yet The Lord Buddha approached him and looked after, bathed, and cured him until he was cured. This good tradition passed down from one generation to another until present day.

Now our fellowmen around the world are very much suffered from HIV/AIDS. We all have duty to responsible for those suffering of those people who are infected and impacted by it. We should not give them up or leave them alone. Before they have been infected by HIV/AIDS, they used to be our brother, sister, friend, and our supporters. Not just when they carry HIV/AIDS, they are no longer our brother, sister, friends and our supporters. Eventhough they are infected by HIV/AIDS and carrying AIDS, they need to live more longer as others, they need to be taken care, they need a new hope, especially they want to live with dignity. So, we should give a new hope and show our compassion much more toward them.

Because of good example from our Master, Lord Buddha, His followers, monks continue to practise this good tradition. In Cambodia, more than 90 per cent of the population is Buddhist. Pagodas are a natural focal point for communities and their needs. It has been serving the society as centres for a multitude of education and health related activities. Buddhist Monks are trusted, respected, and represents influential figures who are traditionally revered. Monks act as teachers and community leaders in providing mental, spiritual, and social support to people who face with various problems. Especially monks have been playing important role in caring, supporting and preventing HIV/ AIDS. Because of this good gesture and effective way to respond to HIV/AIDS, UNICEF has been working with Buddhist monks, with the Ministry of Cults and Religion, and with other NGOs to implement the Buddhist Response to HIV/AIDS in Cambodia. The Ministry of Cults and Religions developed the

National Policy on Religious Response to HIV/AIDS, which provides Buddhist monks with legitimacy to work on this issue.

The monks, clergymen, and nuns at the temples assist people living with HIV/AIDS, their families and children such as:

Provide moral support and counselling based on Buddhist principles, provide lessons and sessions on meditation, Perform blessing ceremonies, funeral, and commemoration celebration, Demonstrate ways family members can care for those who are infected with HIV/AIDS, Provide educational materials and information, Assist with basic needs including food, clothes, shelter, educational/school supplies for their children, and provide adults and children for medical care services, do home visit and health care center to meet with persons who are infected with HIV/AIDS, provide moral knowledge of Buddhism and information relating HIV/AIDS to laypeople, youths, orphans, and vulnerable children.

Moreover, they have been trying to educate the communities to help supporting the person or the families that infected by HIV/AIDS and educate the communities not to discriminate but encourage them to live and act as other.

HIV was first detected in Cambodia in 1991 during serological screening of donated blood. Cambodia appears to be experiencing relative success in the fight against HIV and AIDS. After peaking at approximately 3.3% in 1997-98, HIV prevalence amongst the youths declined to 1.2% in 2003, and further down to 0.9% in 2005¹. According to National Center for HIV & AIDS, Dermatology and Sexually Transmitted Diseases (NCHADS) showed that the declines can be resulted from increasing condom use, high treatment rates, education to people living with HIV and AIDS, and AIDS awareness education to the public. The estimated number of adults and children living with HIV was 75,000 (an estimated 4,400 children living with HIV) in 2007, and decline to 120,000 in 2001. AIDS-related deaths also declined from 14,000 in 2001 to 6,000 in 2007. HIV prevalence amongst young people (15-24 year olds) was higher amongst males (0.8) than females (0.3) although for the first time in the epidemics history in Cambodia men and women are recoding a 1:1 ratio in the infection rates illustrating the feminization of the epidemic.

Recent (2008) data collected by the National Center for HIV & AIDS, Dermatology and Sexually Transmitted Diseases within 22 provinces and municipalities in the country indicated that probably 14% of female sex workers are living with HIV, compared with 43% in 1998; 1.1% of pregnant women are estimated to be HIV-positive in 2008, as compared to 2.1% in 1998. The HIV prevalence in Cambodia has declined ,however; it is still comparatively high in the region.

In order to implement with effectiveness and success, I have some recommendations as follow:

- To set clearly the target group and region like district, commune, village, temple, mosque, church etc in order to easy to control in implementing the project
- The HIV/AIDS carriers must have got counseling from the expert, or any safety counseling service.
- The HIV/AIDS carriers, orphans, and vulnerable children should have been taken care, cured, and supported
- The HIV/AIDS carriers should have been allowed to live in the community as normal as other people with hope and quality of live.
- Any Seminar for HIV/AIDS awareness should be held any place or community that we think that it's needed especially with three groups of people like sex workers, men love men, and drug users who are vulnerable to infect and transmit HIV/ AIDS from one to another.

- All people, especially youths in the community should have been provided knowledge and information about HIV/AIDS
- Each religious tradition should teach the people at their own community to have morality, ethic, loving kindness, compassion toward the victims of HIV/AIDS

At Last, although High Level of Religious Leaders summit will be finished during these two days, I do hope that our missions to respond to HIV/AIDS won't finish here. We will bring all result from this summit with us to implement within our own communities to bring new hope for those who are suffering, and new perspectives for those who are not infected by HIV/AIDS.

May All Beings Be Happy
Thank you for your attention