

Preface

This annual report is prepared to present the operation of Camillian Social Center Rayong (CSC Rayong) on management of HIV/AIDS situation in Rayong in 2015 (January 1 - December 31, 2015). It describes performances of project activities to achieve expected results and finally to realize the set objectives. CSC Rayong has organized its operation into 7 major projects, namely 1) Home for orphans living with and affected by HIV/AIDS, 2) Independent Living Center for Youth, 3) Palliative Care Unit, 4) Garden of Eden, 5) Education for HIV/AIDS Prevention, 6) Empowerment of Eastern Network of people living with HIV/AIDS, 7) Scholarship for children affected by HIV/AIDS. CSC Rayong has also the other two minor projects, which are 1) Sponsorship for Orphans living with HIV and affected by AIDS, 2) Public Relations and Resource Development. Moreover, this report also presents its financial report.

The above projects were implemented to improve quality of life of those who got training, people living with HIV and those affected by AIDS.

It is with high hope that this annual report would be useful for different concerned organization interested people in general.

I would like to thank all who have given hands to make this operation successful and achieve the expected results.

Fr. Chaisak THAISONTI

Director of Camillian Social Center Rayong

Location

1. Camillian Social Center Rayong (CSC)

Address: 1/1 Soi Kiri, Huaypong, Muang, Rayong 21150

Tel: +66 3868 5480, +66 3869 1480

Fax: +66 3868 7480, +66 3869 1548

Website: www.camillianrayong.org, www.camillianaidsprevention.org,
www.hiv-aids-kids.org

Facebook: camillian social center rayong and camillianaidsprevention

2. Independent Living Center

Address: 10/9 Sukhumvit Road, Tessaban Mabtaphut, Muang, Rayong 21150.

Tel: +66 3860 8218 Fax: +66 3860 8236

3. The Garden of Eden

Address: 165/1 Moo 3, Nongbua, Baan Khai, Rayong 21120.

Tel: +66 3896 1568 Fax: +66 3896 1568

4. The Eastern Network of People living with HIV/AIDS

Address: 73/2 Soi Tessabarn Rayong, Noenpra, Muang, Rayong 21000.

Tel: +66 3862 4009-10 Fax: +66 3862 4011

Key Statistics 2015

Region	2014	2015
Population of Thailand on December 31, 2015.	65,124,716	65,729,098
Accumulated number of AIDS patients in Thailand (National Health Security data) reports from year 1984 - September 30, 2015	338,621	481,241
Number of people living with HIV and AIDS patients who have registered and got the ARV medicine. (Data on September 30, 2015)	310,000	355,123
Expected number of new infection per year.	8,030	6,759
Number of AIDS patients in Rayong.	-	8,577

Statistics on People Living with HIV and AIDS Patients at Camillian Social Center Rayong as at December 31, 2015

Categories	Number of the members of CSC Rayong at year 2015					
	Balance from 2014	New	Death	Reintegrated into society	transfer	Total remain
Orphaned Children living with HIV and affected by AIDS at the age of 4 months - 20.						
Infected children	27	3	0	2	1	27
Affected children	19	3	0	2	0	20
Teenagers at the age of 14 - 24						
Infected teenagers	15	1	0	5	0	11
Affected teenagers	0	0	0	0	0	0
Adults living with HIV and AIDS patients	88	53	20	26	0	95
Total	149	60	20	35	1	153

* Getting back from the Independent Living Center

Summary of the Financial Report

1) Total Income of Year 2015

Income	Amount/Baht	Percentage
1. Financial support to projects from private sector both local and foreign sources.	14,355,438.23	50.95%
2. General donation from local source.	5,430,950.50	19.27%
3. General donation from foreign source.	7,120,506.16	25.27%
4. Financial support to projects from local and national state agencies.	662,227.00	2.35%
5. Other income, such as bank interest, religious donations.	609,892.82	2.16%
Total Income	28,179,014.71	100%

2) Expenditures of Year 2015

Expenditures	Amount/Baht	Percentage
1. Quality development of different projects.	11,513,219.90	36.56%
2. Operation cost.	2,772,286.44	8.80%
3. Salaries.	8,129,327.00	25.81%
4. Investment, Construction and Maintenance.	8,028,256.63	25.49%
5. Other expenditures such as Public Relation, Fundraising events.	1,050,897.42	3.34%
Total expenditures	31,493,987.31	100%

The 7 major projects of CSC Rayong at year 2015

- 1) Home of orphans living with or affected by HIV/AIDS.
- 2) Independent Living Center for youth .
- 3) Palliative Care Unit.
- 4) Garden of Eden.
- 5) Education for HIV/AIDS Prevention.
- 6) Empowerment of Eastern Network of people living with HIV/AIDS.
- 7) Scholarship for affected children.

The 2 minor projects of CSC Rayong at year 2015

- 1) Sponsorship for Orphans living with and affected by HIV/AIDS.
- 2) Public Relations and Resource Development.

The number of staff and volunteers

- | | |
|-------------------------------------|-----------|
| 1) Numbers of staffs of the project | 28 people |
| 2) Numbers of general staffs | 22 people |
| 3) Numbers of volunteers | 6 people |

The implementation according to objectives of the Organization

Objective No. 1 To give assistance to orphans living with HIV to have access to antiretroviral medicines and education, and care of children affected by AIDS.

Home for orphaned children living with HIV and affected by AIDS

Target group Orphaned children living with HIV and affected by AIDS in the Eastern Area

The project had started since 1999 unto 2014, We had supported 157 children living with HIV and affected by AIDS and 19 died. There were 56 children referred to the Independent Living Center and there were 41 children reintegrated into normal society.

Year 2015 There were 6 children new admitted to the center and resulting of total 52 children and the age group from four month to twenty years. The total of 5 children had reintegrated into normal society. At the end of the year 2015, the center had a total of 47 children (21 males and 26 females). It was classified for HIV infected 27 cases and affected by AIDS 20 cases.

The Operation for the year 2015

Health Care and Health Promotion

1. For the first admission to the center, children living with HIV had to meet medical doctor to evaluate the health status for proper planning and curing. The important for caring need consistency i.e. every child living with HIV should have taken the antiretroviral regularly. Every Saturday, children should prepare their own antiretroviral. They were all trained to tell the name and quantity of their own antiretroviral to their caregivers overtime before taking their antiretroviral. It was for the purpose for each child should know the details of the antiretroviral.
2. All children had seen the dentist at the hospital twice a year.
3. There were 5 children from the center participated the camping activities of caring for health, which was organized by Rayong Hospital and Kor Kaew Club (Group of people living with HIV) from September 19 - 20, 2015 at Maerampueng beach, Rayong Province.

Education

1. There were 2 healthy status children out of 5 new comers from the center went to study at the normal school of Ministry of Education for the school year of 2015. There were 43 out of 47 children had entered to the normal education. The 4 children could not enter due to 2 under the age of school and 2 with poor health.
2. There were 8 schools from government and private which had accepted our children to study in their school. It was divided to 6 children of Kindergarten, 19 elementary school, 15 high school, 2 at the Vocational College, and 1 University level.

Promotion of Life Skill

1. Life Skill Camping.

- Life skill camping for children of age group between 10 - 14 years took place from 24-26 April. Life skill activity for the age group of 15 years and above had jointly organized with the Independent Living Center from 3 - 5 May. Both campings took place at Baan Suan Lung Kom, Klung district, Chanthaburi province. The objective of these activities was for children learning and living together with peace and happiness.
- Activity for young children of age group below 10 years took place from 24 - 26 April at Suan Son Resort, Rayong Province to learn to live together for the development of both physical and mental by various stimulus activities of which the caregivers had prepared for them to express each own capability.
- Joint activities of life skill with Orphanage Center of Lorenzo house, Chonburi province had taken place twice. The Center had sent 5 children to join the life skill activities from 20 - 22 April for the first group as well the second group, which took place from 19-22 October. In addition there was a “Leadership Camp” from 28 April to 5 May and the center had sent 3 persons to join this event.

2. Training for Self-awareness

- Training for living outside the center when children became teenager there was a need to have freedom. Therefore the Centre had arranged for children age over 15 to rent a room outside Centre for a trial period to see how they can manage their own lives with self earning and self living and the caregivers would visit once a while to monitor. Those children should take care of their own regular antiretroviral. The result showed that some of them could not manage their own responsibility.
- Training for searching for self dignity, after children had experienced living outside centre, the centre supported for volunteer activity by sharing own belonging to others and it was also known as field study at the same time. Children had the opportunity to join the youth project at the Center for children living with disability at Chiangrai from 2 - 7 October by their own expenses from their saving during the Summer Holidays. The result was they had learned the value of their input.

Promotion of virtue and ethics for children

1. There was a catechism camping from 23 - 24 August within the Center, the lecturers and activities organizers from Men and Women religious from Samphran, Nakornprathom and Chanthaburi provinces.
2. Providing opportunities for children sharing their own belonging to the vulnerable poor people in the society by taking them to share to the children at Eastern Child Welfare Protection Home in Rayong.
3. The Center had provided the opportunity for children at the Center to serve the HIV/AIDS patients as volunteer once a week including allow them to assist the staff in various sections of the centre with the intention for them to spend their free time for valuable for others.

Capability building for Project staff

1. There was a joint meeting for all staff of Project of Child Care and Project of Youth at least once a month.
2. There were training programs provided to every staff of the center to be trained from Government or private sectors at least 20 hours per year on the following subjects:
 - Caring for the opportunistic infection diseases and treatment of antiretroviral for HIV in AIDS patients.
 - Working together.
 - Case study on the behavior of child and teenager.
 - Psychology for caring children from new born to 5 years.
 - Psychology for caring teenager.
3. All caregivers in the Center should be trained in spiritual dimension by Priest/Religious/administrator once a year.
4. All staff of both projects (Child Care & Youth) participated to spiritual retreat organized by Camillian together with other projects staff outside center for 3 days 2 nights mainly for laughing therapy. The result was staff had better unity and happy for recreation.

Result from the implementation

1. Children living with HIV had stronger health status, good mood and cheerful and there was no death from AIDS and TB. Children had access to education and able to read and capability development etc. As an holistic approach: physical, spiritual, mood and adaptability to social and were able to study together with other normal children in the normal school.
2. Children was able to perform duty as their responsibilities both for themselves and for others, i.e. taking of antiretroviral and cleaning their own clothes and own belonging, cleaning their residence after school and participated to activities of the Center.
3. Caregivers were able to help and support for the development of their capabilities etc., especially for helping children to take care of their own health continually.

Problems and Obstacles

1. The new comer to the center normally had poor health and malnutrition.
2. Insufficient of caregivers due to several resignation of caregivers at the same time, resulting the caring for children not enough for assigned activities.

Solution

1. Caring and providing supplementary food for the malnutrition children.
2. Recruiting new caregivers and organizing spiritual activities for caregivers to have moral support in caring children.

Next Plan

1. Organizing activities for giving information and data regarding to the Reproductive Health.
2. Supporting and building the virtual and discipline for children.

Independent Living Center for Youth

Target group Orphaned youths living with HIV and affected by AIDS in the Eastern Areas

The Project had started since 2006 up to 2014, there was a total of 49 cases and 30 cases had reintegrated to the society/family.

Year 2015 There were 16 cases (age between 14 - 24 years) in the Center and 5 cases had already reintegrated to society. As of 31 December, there were 11 cases consisted of 4 males and 7 females.

Operation during year 2015

Health Care and Health Promotion

1. Promoting the physical health check up including oral health. All youths had to go to see medical doctor according to the appointment and to see dentist for every 6 months.
2. Promoting for Youths to exercise through various activities on special occasions i.e. Songkran Day, National Father Day.

Education

All 11 youths had enrolled to the 4 normal education institutions in Rayong Province. There were 4 persons studied at high school level, one person at senior high school, 5 persons at the Vocational College, and one at the University level. At the end of school year of 2015 (March 2016), there were 4 persons graduated high school and 3 of them preparing to enroll to Vocational College and one would continue to senior high school. There were 2 persons graduated with certificate of Vocational and continued to study for Diploma of Vocational College.

Promotion of Life Skill

1. During the year, the Project for Youths (Independent), there was some modification of the land and view around the residence building for using as organic agriculture and raising animals i.e. grow unseasonal lemons, grow various fruits, fish, etc. It was the activity for youth to learn skill and agriculture career.
2. Establishing "Child and Youth Council of Camillian Social Centre Rayong" for gathering them to work for volunteers.
3. During school holidays, youths had been placed as a trainee at the different places, i.e. hospital, restaurants, resorts, telephone selling booths, slaughter house, gas station, etc., to learn the life skill within the society. It was for the period of 2 months and the result was those youths had learned the life skill and adjusting themselves better in the society.

Promotion of virtue and ethics

Youths had participated to the liturgy of Catholics i.e. joining the eucharistic celebration at Our Lady of Perpetual Help Parish in Rayong province and Our Lady of Good Health at Camillian Social Center Rayong. It was for moral support and for their growing up as good quality person including aware of own dignity and value of others.

Promotion of Social

1. Child and Youth Council of Camillian Social Center Rayong had prepared the space by cleaning for a “fundraising event” which would build the multi-pavilion at the Garden of Eden, Baan Kai district, Rayong Province.
2. During the National Day for the Youth, the Center had arranged for our Youths to repair the roofs of vulnerable people in local community.

Problems and Obstacles

1. Youths normally lack of self-control and had limited concentration for any activities. They also had limited for analysis and future planning for their own life.
2. Youths had more time for personal activities, therefore time for joint activities had less.

Solution

1. Organizing continuing activities concerning the future plan for the Youths in order to stimulate the youths to think about their future plan.
 2. Organizing group activities i.e. field study outside, recreation together, etc. It was to build the unity of the youths and to stimulate the youth eager to participate the group activity.
 3. Promoting the work to built up experiences for youth continuing for the benefit of the youth in gaining the life skill in the society. Caregivers would provide suggestion and consultation when there is any problem occurred.
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Scholarship of children affected by HIV/AIDS

The target group Children affected by HIV/AIDS who live with their family in the Eastern Area.

The project started in 1999, and until 2014, the number of the children who received the scholarship were 232. The current graduation of children was 59.

Year 2015 We had 123 scholarship children with 6 new recipients. There were 18 children at the end of the scholarship during that year. As of 31 December, there are 111 children remaining.

Operation during year 2015

1. Monthly scholarship to children via the post or they can receive it by themselves. The scholarship is separated by the education level, 38 for primary, 73 for high school and 18 for a bachelor's degree.
2. Correspondence with children via letter or talking on the phone, calling the guardian or leader of positive people/a hospital officer who takes care of children as well as managing home visit to monitor regularly.

Result from the implementation

In 2015, there were 6 children as new receivers, and 18 children who graduated and requested to stop receiving. Children of 5 are from vocational education, 2 are from the university. The children have not graduated, but stopped receiving the scholarship because they don't want further study.

Sponsorship

Operation during year 2015

We found a sponsor to support the tuition fee for each child, which is supported by the abroad networking organization. In the past 2-3 years, the project has had the problem of a decrease in sponsors. In 2015, we had 40 sponsors drop off because of economic problems. We solved this problem by coordinating with the network organization to spread the news on sponsor registration regularly. Also, we encourage children to contact their sponsors by letter at least once a month as well as sending them blessing cards on special occasions to express our gratitude.

As of 31 December, we have 640 sponsors, and 41 are new members.

Objective No.2 Provide care and support to vulnerable people, especially people living with HIV and AIDS patients.

Palliative care unit

The target group People living with HIV/AIDS under circumstances in the east of Thailand aged between 18 – 72 years old.

The project started in 1996; the number of dead patients in 2014 was 854 out of a total of 1,905. 680 went back to live in society.

Year 2015 Total numbers of patients were 141 cases, divided into 88 from year 2014 and new patients 53 cases. There were 20 who died during the year and 26 were reintegrated into society. As of 31 December, there are 95 patients: 51 males and 44 females.

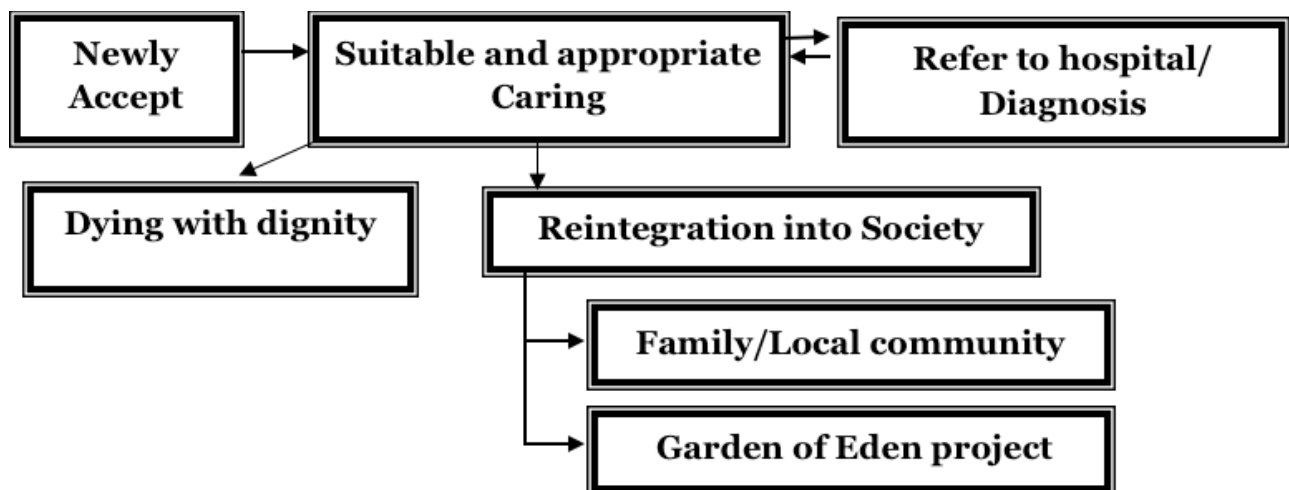
Operation during year 2015

Health care

The situation on health care of patients is divided into 4 stages.

- The AIDS patients who were sick from TB, which were diagnosed by the doctor from the hospital and were being treated. They were referred to stay with us.
- There were 33 patients who stayed in the Center. They all were depressed and stressed. Some of them were disabled. Most of them had health problems due to side effects from long term anti-virus use.

Caring process of Camillian Social Center Rayong.



1. Basic care

- The staff will ask for health history and do initial assessment for new patients. We also check on the medications for opportunistic infections and antiretroviral medicine which are provided by the hospital, and doctor appointments as well as the rights to access the treatment of the patients.
- To arrange the accommodation to the patient which can divide into 3 sections. First section: 9 patients who really need close support and care. Second section: 36 patients who are able to take care of themselves. Third section: 18 patients who have complicated disabilities (the resident for the patients is in the Garden of Eden project located in Ban Khai district, Rayong). The caretakers will support the patients' daily routine such as having a shower, cloth changing, eating and taking the medications on time.
- The caretakers will talk to the patients in need to see if they want support with anything.
- From Monday to Friday starting from 7.30 – 8.00. The caretakers will accompany the improved health patients and disabled patients to the exercise place in order to encourage them doing a sport they are able to join. This activity teaches them to support each other.
- Organize two training on HIV/AIDS medications for the care takers and the patients.
- Organize two days for art therapy activity. There are 40 patients to attend this event. The facilitators are from Putdhika network. The feedback of this activity is good. The patients are happy because they can share things what they want to others.

2. Transfer to the hospital/diagnosis

- Coordinate with the governmental hospital nearby to transfer the patients to be admitted at the hospital in case of serious problem .
- Accompany the patients to see the doctor. To start the HIV/AIDS medications and to follow up the treatment in the laboratory.

3. Ensure the death of the patients is full of dignity

- Organize having the will for the patients once. The objective is to prepare for the death without any concerns.
- Before the death, the caretakers will be aside until the last day of the patients. Praying for the patients and take the body to manage according to their believes in case of the agreement we have with the patients' relatives or the patients. If we can't contact the relatives, we will give the body to Sawang Rojanasathan Foundation at Sattahip for burying the body until the relatives contact us.

4. Return to the society

- Organize the outing activity with 35 patients by taking them to the beach for three times to empower their self-confident and self-esteem when they return to the society.
- We talk to the patients who are getting better to make plan with them about return to the society.

Community work

1. The project staff provide the counseling on the medications use to the patients by phone and home visit. We provide for both the in-house patients and people who live in the community.
2. There is a staff who is the leader of Rayong hospital to help the patients who come to see the doctor. Also we organize the activity every Friday at antiretroviral clinic. The number of the patients is 40/day, all total about 700. In 2015, the leader has provided the counseling to new 10 patients.

The result of work

1. HIV/AIDS patients for 141 have a better physical and mental health. They access to the medications and treatment they also accept their situation which is the most important to help. 26 patients requested to go back and live with the families and the society.
2. Another 20 patients were dead in peace. They had care takers with them until the last day. There were 9 of 20 patients who died from TB.

Problems and obstacles

1. Some activities don't match with the target group's need. The patients feel they are forced to do, so they are against the activities.
2. Short of fund to organize the activities continually.

Solution

Talk with the patients to find the most interesting activity they want to do. Work more on fundraising to continue the activity.

Future plan

Prepare staff for monitoring on the medications when the adult and youth patients return to the society. To reduce the risk of the worse case and to access the target group in the community for the immediate treatment.

Garden of Eden

The target group **People who are affected by HIV/AIDS under circumstances in the Eastern of Thailand.**

Year 2015 The project has started in 2003. There was 411 patients until 2014. The number of the patients returned to the society was 329.
We have 53 patients, return to the society 20 person.
As of 31 December is 22 patients with 9 males and 13 females.

Operation during year 2015

Vocation support

1. **Agriculture** There are growing annual crops such as vegetables, sunflowers, various kinds of banana. As well as perennial such as fruit trees, including lime grew off season in the cement pot. This year they grow acacia and mulberry to use their leaves to make tea.
2. **Cattle** We make more chicken cages and put them together instead of putting on chicken in one cage as before. We face the cost problem so we separate the chickens which produce less for selling. There are more animals like cows, pigs, geese, catfishes, frogs, fishes and cricket etc.
3. **Crafts work** The members of garden of Eden who have a talent on crafts producing continually and their work still meet the market need such as bloom made from coconut leaf, bio-liquid, key chain made from lotus's web and flowers for the funeral.
4. **Processed agricultural products** Bananas can be processed into banana chips in order to increase the value of goods, however this does not success related to the lack of experience of the maker. On the other hand, mulberry tea is very popular because we can find market.
5. **Marketing** This year, the members have good opportunity from the Director of Rayong Red Cross to have our products joining to sell in any Red Cross Activities. Moreover, we are grateful for Nong Bua sub-district Administrative Organization and Ban Khai Hospital to provide the selling space for us. The project also joins in any activities arranged by the foundation and invited by the sponsors. Therefore, our products are very popular such as leaf bloom.
6. **Vocational training** The staff and member for 15 person attended the training and workshop about lemon graft, mulberry tea growing, bio-compost, Solar power, and water for agriculture at Research and agricultural development, Rayong.

Health and mental care

1. The Garden of Eden has supported the people affected by HIV/AIDS to take care their health continuously. We focus on the doctor appointment and take the medications timely. The staff will support the elder patients or the disabled patients to see the doctor by arranging the car for them. All of the patients come to take the medications in front of the staff at 8.00 and 20.00. This helps the patients to have the medicines timely and correctly. Their immune increases and prevent them from opportunistic infections.

2. Mental spiritual support by having spiritual recovery session both in Buddhism and Christianity.
3. We supported 12 patients to join the art therapy activity together with the members from the palliative care unit for 2 days. The feedback from the activity was good. They are happy and relaxing. They talk more.

The capacity building for staff

1. The staff of the Garden of Eden attended the lesson learned for 20 years anniversary of Camillian Social Center. The finding we found is to support the vocational training, the project needs to build participation from all the members to choose their own work. Also, the agreement on living together by helping each other.
2. The mental recovery activity called “Laughing therapy” aims to support the staff to be happy and relax from work and help them build a good relationship with the staff from different project.

The result of work

1. The patients infected with HIV have occupation that they can earn 500 – 2000 Baht per month to pay for their necessary cost.
2. The patients can improve their agricultural skills to increase the income such as the lemon tree graft for selling together with lemon selling.
3. The patients are healthier. They can work with others and return to the society with confidence. They rely on themselves.

Impact

1. Take the products of the project to sell in many places to make people know us. The community understands more about the patients and more accept them. The patients have their own income to take care of the basic needs.
2. This the project helps the sponsor would like to help by donating the food and things for the patients with disabilities and abandoned kids affected by HIV/AIDS who live in the project area. As well as the sponsors help to sell the products for the patients.

Problems and obstacles

1. The weakness of the agriculture is the high cost for some products such as the food for chicken etc. The patients who work in agriculture could not have enough money to live. They still rely on the help from the project.
2. The blooms made from coconut leaves and flowers are under the standard because the members are different in skills to make. Also, we don't have enough members to produce. We don't have enough the products for the customer's need.
3. The vegetables for the kitchen produce less and our products don't have a good look because of inappropriate care. As well as the package doesn't look attractive to buy.
4. To grow the lemon out of the season doesn't meet the expectation because we don't have skills in water control.

5. Cattle such as chicken and goose eggs couldn't have many products. The cost is high from the instant food to feed them. We lack of the skills to look after pig with baby, so the pig kills the baby by accident.

Solution

1. The members who make the blooms need to cross-check the standard of the products before selling. To advertise a new member and provide the facilitator for the new one.
2. Take the members to visit agricultural work in other places regularly to share the experience and techniques from the professional gardeners.
3. Having carefully plan on the time and controlling to grow the lemon out of the season.
4. Improve chickens raise by changing the method and focus on the appropriate food for the chickens. Use the drugs for the chickens to expand the products.
5. Separate the pregnant pigs from the group to protect the babies from the accident to death. To have more visit and research on pig raise.
6. Support mixed agriculture and improve the method that will help to reduce the cost. The projects need to fund more supporting in producing factors.

Objective 3 Facilitate education and learning process for the public on HIV/AIDS and build capacity of people in AIDS communication and care of AIDS patients.

Education on HIV/AIDS Prevention

The target group

- 1 Students for 1,735 from 11 schools; Ban Nong Fab, Wat Ta Kuan, Wat Chag Look Ya, Mabtaphut municipality, Wat Huay Pong, Nikomwittaya, Mabkha, Wiboolwittaya, Rayong Vocational College, Mabtaphut Vocational College and Rayong Administrative Business Technology College.
- 2 The employers for 391 from 6 companies; Indorama Polyester Industry Company, SRF Industry Company, Tokai Eastern Rubber (Thailand) Company, Raycol Asphalt Company, Unity Company, Dacon Inspection Services Company.
- 3 Community leaders, community volunteers from the Sub-district Municipality (SAO) 949 persons from 5 locations; Mabkha SAO, Mabkha Pattana SAO, Takhan SAO.
- 4 26 Visiting groups with 1,017 persons.

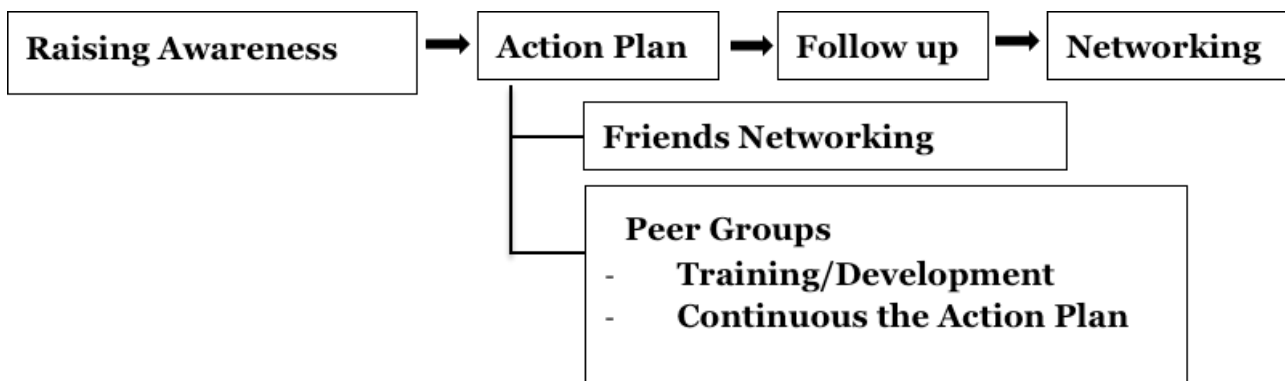
The target locations are the districts of Rayong; Muang, Ban Chang, Ban Khai, Nikom Pattana.

Operation during year 2015

The situation on gender of the youths in Rayong is still the important to their life, for example, it found that the girls with aged lower 14 years gave birth in the hospital. Some of them had second pregnancy. Having sex in students aged between 11 – 12 years old. The junior high school students live together with their parents' acknowledgement, and later separate with either part does not get further education. This problem impacts to the families and play the important factor to spread HIV/AIDS among the youths.

The education project works on the gender together with HIV/AIDS project. The target area is the same but also educate more area to get participation from the society. The staff develop small projects into 4 are 1) Facing the gender with understanding 2) Parents talk to their children about sex 3) Develop the network of the parents to communicate about sex with their children 4) Community school to empower people stop the stigma and submit to the government and community for the funding.

Prevention process



Sensibilisation

To organize 17 activities in 15 organizations. The project officer had met the Directors of 8 schools, 2 plants and 5 SAO to discuss on the gender of youths in Rayong. We want to see the policies and principles to prevent this problem. The result from the discussion is all the Directors are agree to have action plans for each organization. The finding is the Directors join the sexual education; they will have attitude on support the children to learn the gender with understanding.

Action Plan

After the directors of each organization created the policies and gave the task for person in charge already. The staff worked together with the leaders in charge to write the action plans which included the objective, the target group, process, activity, budget, duration, person in charge and authorized person. The plans submitted to the directors and sign in together. This year we have the following plans.

- 8 Schools, action plans on gender with students
- 2 schools, action plans on HIV/AIDS
- 2 SAO, action plans on gender and HIV/AIDS

After the plans we had the following activities as follow.

- 1 **Build capacity for the leaders** To be a speaker to parents and children on gender and to be a person helping to prevent this problem in the area. We had 23 leaders to join from 3 communities/1 SAO and 1 hospital.
- 2 **Visit the community** to train about gender and HIV/AIDS for building the leaders in 7 schools, 4 plants, 9 SAOs all total 29 times. There were 1,251 people with 13 leaders.
- 3 **Support tools and materials.** We provided 3,400 condoms for 2 schools, 4 plants and 2 SAOs and 2 organizations. Advocate on special occasions such as school orientation, Valentine's Day, World AIDS day, safety day of the work place etc.

Follow up

To monitor the target group by visiting the community and call to the leaders or Peer group for 62 person.

The topics of monitoring are:

- Make action plan and the result of work after having the plan. In case we don't have the action plan yet. What is the problem? Providing the counseling, advice, solution including the information that are useful for the development to help the leaders make the plan.
- The role of the leaders to participate. The points need to add more for the leaders' capacity building.

In 2015, the monitoring was done for 47 times. The staff went to visit 8 schools, 5 factories, 5 SAOs. The results were as following:

1. In the school, teachers who are in charge and student leaders didn't have any action plan after the leadership training. The reasons were the school had the examination, some schools the teachers were assigned another task so they couldn't work on HIV/AIDS issue. Some schools organized the sexual education activity by inviting another organization. One school distributed the condoms to the students in the nursing room. One vocational college organized the activity about HIV/AIDS which had good feedback from the students.
2. Only 4 factories organized the activities following the action plans. Also, they allowed the employees to join World AIDS Day at the Camillian Social Center Rayong. One factory couldn't follow the plans because they were in the rush time of work but they still keep the plans for year 2016.
3. The leaders of SAO distributed the condoms in the areas around 5 communities. We got know that there were many teenagers starting from 15 years old came to get the condoms. They had the gender activities with the parents which were useful for the parents to talk with children about sex. The SAO would like to continue this great activity to increase more group of parents who are educated about gender. Moreover, some SAO staffs did not put the action plans on the calendar so there was no activity in that community.

Network

1. To create more network for people who work on HIV/AIDS prevention. The project support the training facilitators and materials to 11 organizations plus the expected target groups. There are 2 schools, 3 plants, 5 CBOs and 4 other organizations. The beneficiaries are 958 person
2. To organize World AIDS Day in 1 December 2015 at the Camillian Social Center. We have partners to work on this activity. Our partners come from the school, plant, community, the networks of HIV/AIDS person for all total 11 organization. The attendees in that day were students, plant employees and community people for all total 981 persons from 44 organizations.
3. To promote the information on HIV/AIDS prevention via Facebook and newsletter every 4 months. In 2015, we had all 4,000 newsletters and we

distributed to the leaders in many work places such as hospital, school, factory etc.

4. HIV/AIDS learning Center had many organizations coming to visit on taking care of people affected by HIV/AIDS and abandoned kids as well as to be trained on HIV/AIDS knowledge at the Camillian Social Center Rayong for 26 groups from 12 organizations. There were 1,017 person coming to visit us. 385 persons made the HIV/AIDS test for understanding. The result has shown that before they did the test, they didn't have correct understanding (81.56 percent) especially how to transmission on HIV/AIDS. They concern to live together with positive person. They didn't have knowledge on care taking as well as the reduction on transmission from mother to child. After making the test, people for 97.40 percent gained more knowledge up to good standard. The visitors were very happy because it helped them understand and they could pass forward this information to others.

The result of work.

From the sensibilisation for the schools, factories, SAOs and other organizations, there are many activities on HIV/AIDS and gender to support the students, employees and people in Rayong and nearby for 3,226 person having knowledge and understanding on gender and HIV/AIDS very well. Whereas the leaders and person in charge improve their skills in organize the activity and make the action plan with effectively. Funding more budget to continue other action plans. Coordination between HIV/AIDS network to make it strong and support each other. The help for the target group to prevent HIV/AIDS and gender, as well as to access the health service.

Problems and obstacles

1. Policy of the government doesn't match the operation so the directors of some schools couldn't push the policy to support the learning activity for children.
2. Coordination to meet with the directors is not easy because the directors are not available, and they don't assign the task to the relevant staff to follow this project.
3. The SAO leaders don't have the motivation in organize the activity as planned.

Solution

1. The back up plan to meet the directors. If we can't see them, we have to contact with authorized person for basic coordination such as to meet with person who is responsible for children and youths.
2. Follow up the SAO leaders regularly. Forward the information and present the interesting method of work and other topics to them, as well as inviting them to join the activity with other organizations.

Future plan

Support SAO and school to work together as leaders developing the format of work about gender with families in the community. For the factory, we will support on HIV/AIDS prevention by respect the rights such as VVCT of the employees.

Objective 4 Give direct counseling and through media, Eastern Network of people Living with HIV/AIDS, and collaborate with state agencies and NGOs in mutual management of HIV/AIDS situation at all levels throughout the country.

Empowerment of Eastern Network of people living with HIV/AIDS

The target group **Members from all 63 HIV-infected patients clubs with total number of 16,543 people (lack of information from Samutprakan Province).**

Operation during year 2015

This year, the Eastern Network of people living with HIV/AIDS had a problem on the budget which was not enough to manage the activities because we didn't receive the fund continuously. This situation happened to another network across Thailand. As a result, the number of officer should be reduced and the work should be distributed to the local area (each province network of people living with HIV/AIDS), and they shall respond for the development of the capacities of the leader of HIV infected persons of each area on their own. However, the Eastern Network of people living with HIV/AIDS had developed the project to get the sponsorship continuously which Camillian Social Center Rayong took part in such project in the part of administrative dimension, it did the follow up and encouraged the development of the project. The Network was working on develop the proposal to get fund continuously.

Currently, the Network has been working in 8 provinces in the eastern area as following: Rayong, Chonburi, Chanthaburi, Trad, Srakaew, Prachinburi, Chacheungsao, and Samutprakarn.

The strengthen of the members and the network

1. The network has organized committee meetings every four months and working groups meeting on various issues as the case may be in order to plan and follow up the work
2. To support the province network with new information such as ANY CD4 (to prepare themselves before starting antiretroviral therapy for all CD4 level), HEP B & C (hepatitis B and C) and urgent issues that must be jointly drive.

Advocacy for the treatment access: moving and monitoring the government policy and the participation of HIV/AIDS club

1. Develop the holistic center (HIV/AIDS clubs and the hospital staffs working together on health service for the patients). We would like to develop in prevention and HIV treatment in 2014. Access to ANY CD4, the registration and treatment on Hepatitis B & C. Adding the information and survey the attitude of the positive patients about changing the anti-virus formula to work better. Planning together with the hospital staffs about the alternative treatment, reducing the stigma in the clinic, advocate in Voluntary Confidential Counseling and Testing - VCCT etc.
2. Participation in the work of National Health Security System. Support the leaders of people living with HIV/AIDS to become the board and the committee in the National Health Security in the provincial level, so they can raise the

topics and develop the system. We have 3 leaders becoming the committees for Rayong province and 1 person becoming the chair of the quality control and service standard.

3. Policy movement, in 2015 the Eastern Network of people living with HIV/AIDS and other networks have tried to put the anti-virus called "RAL" into the drugs inventory and they also monitor and suggest on the impact of "Trans-Pacific Partnership" with the relevant organizations.

Acceptance the positive person in the community and manage the situation of HIV/AIDS

1. VCCT, community has pilot for 7 clubs. To visit the community to help the target groups evaluate the risk by themselves leading them to the process VCCT. The objective of VCCT is to reduce new infections, reduce the death related to AIDS and reduce the discrimination or stigma to the HIV people which is according to the 'getting to zero' campaign of UNAIDS.
2. Advocate world AIDS day on 1 December and also the VCCT day on 1 July.

The result of work

The Eastern Network of people living with HIV/AIDS which is running by the HIV person can be the core leader to organize health activities in the eastern area of Thailand, especially in the field of HIV/AIDS. This makes the community moving on HIV/AIDS as well as developing the core on HIV/AIDS person in Thailand continuously. As the result, HIV/AIDS person receives the prevention and treatment effectively.

Problems and obstacles

Due to the inspection of the Committee to track and monitor the spending of government budgets. follow up and monitor to National Health Security Office (NHSO) regarding to the budget for the holistic center in which the regulations states that the budget shall be transferred to the local hospitals. There is a discussion about the possibility that the budget can be transferred to local hospitals and retransferred to infected persons clubs. The members of the clubs concern about a delay in the transfer that lead to the delay and difficulty in the management. Thus, the plan has been postponed until September 2015. Some clubs still operate the project continuously by using other source of fund and other stop the work. The Eastern Network of people living with HIV/AIDS does not receive such fund.

Solution

Coordinate with the leaders of people living with HIV/AIDS in the community to understand the concept for working in the holistic center making the participation of people for the management. As well as developing the proposal for a new fund continuously. To change the activity depends on the situation and less work for the provincial network.

Public relations

The objective of the fundraising

The income from the fundraise by this office is enough or balance with the expenditures of the Center.

Objectives

1. Public relations for disseminating the information and activities of the Center to the general public.
2. Support and promote the activities of the Center.
3. Promote the positive image of the Center to the general public.
4. Fundraising for paying all the cost of the Center.

The target groups: Government agencies, private sector and general public.

The operational area: All provinces in Thailand especially the provinces nearby the Camillian Social Center.

Public Relations operation can be divided by its nature as follows:

1. Information.
2. Fundraising Event.

Information

1. Promote by using the local newspaper, local radio, local press and the magazines in Rayong.
2. Promote by using vinyl put up on the street in Rayong.
3. Promote on the website at www.camillianrayong.org.
4. Having the information booths in many areas.
5. Distribute birthday cards to the sponsors in each month.

Fundraising (Donation)

1. The bridge of hope for the scholarship project is 100 Baht per person.
2. One bed, one life, one sponsor project is 4,000 Baht per bed for AIDS patients.
3. The Garden of Eden project.
4. Lunch project for 5,000 Baht per meal.
5. Making a merit on birthday.
6. Join the project money transfer via Krungsri Ayuthaya Bank, collect the points with Standard Chartered Bank, and collect the points with Tesco Lotus credit card.
7. Put the donation boxes in the organizations and provinces nearby Rayong.
8. Sending the letter to get funding from the sponsors.
9. Join the charity activities such as golf charity/football charity.
10. Donation activities such as "Charity Dinner in 2015" in January and "Fundraising Fair" to build a multi-purpose pavilion in the Garden of Eden in July.

Result of work

From operation in 2015, the public relations department has raised a total of 8,956,720.32 Baht.