STANDARD OPERATING PROCEDURE (SOP)
FOR THE OUTREACH/PEER EDUCATION AND
100% CONDOM USE PROGRAMME TO SEX WORKERS
IN CAMBODIA

June 2006

Prepared by:
Technical Working Group
on Outreach/Peer Education & 100% CUP (TWG/OPC)
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# Abbreviation

<table>
<thead>
<tr>
<th>Abbreviation</th>
<th>Description</th>
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<tbody>
<tr>
<td>CoC</td>
<td>Continuum of Care</td>
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<tr>
<td>CUCC</td>
<td>100% Condom Use Coordination Committee</td>
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<tr>
<td>CUWG</td>
<td>100% Condom Use Working Group</td>
</tr>
<tr>
<td>DTOP</td>
<td>District Team on Outreach &amp; Peer education</td>
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<tr>
<td>MMM</td>
<td>Mundol Mith chuoy Mith</td>
</tr>
<tr>
<td>OPC</td>
<td>Outreach/Peer education and 100% Condom use programme</td>
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<td>PEs</td>
<td>Peer Educators</td>
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<tr>
<td>PFs</td>
<td>Peer Facilitators</td>
</tr>
<tr>
<td>PST/OP</td>
<td>Provincial Support Team on Outreach &amp; Peer education</td>
</tr>
<tr>
<td>PWG/OPC</td>
<td>Provincial Working Group on Outreach &amp; Peer education and 100% Condom use</td>
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<tr>
<td>SOP</td>
<td>Standard Operating Procedures</td>
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<tr>
<td>SWs</td>
<td>Sex Workers</td>
</tr>
<tr>
<td>TWG/OPC</td>
<td>Technical Working Group on Outreach &amp; Peer education and 100% Condom use</td>
</tr>
<tr>
<td>VCCT</td>
<td>Voluntary Confidential Counselling and HIV Testing</td>
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</table>
ACKNOWLEDGEMENT

The Standard Operating Procedure (SOP) for Outreach/Peer Education and 100% Condom Use Programme was prepared and developed by the National technical Working Group in the close collaboration between the National center for HIV/AIDS, Dermatology and STD, General Directorate for Health development of the Ministry of Women’s Affairs, National AIDS Authority, and other NGOs partners through the series of coordination meetings to overview the achievements and gaps during the implementation of the above activities.

This SOP is the evidence of the fully committed efforts and intellectual contribution and valuable time of the staff of BCC unit of the National Center for HIV/AIDS, Dermatology and STD, General Directorate for Health development of the Ministry of Women's Affairs, National AIDS Authority, and other NGOs partners and such national and international organizations as CARE Cambodia, Family Health International, KHANA, PSF, RHAC...

I would also like to thank the Department for International Development (DFID) who provided financial support as well as its technical advisor for national center for HIV/AIDS, Dermatology and STD and particularly to Dr. Seng Sopheap for successfully developing this SOP.

As the director of the National Center for HIV/AIDS, Dermatology and STD, I wish to thank all members of the national technical working group on OPC to have a good health, happiness in families, and success in prevention HIV epidemic in the Kingdom of Cambodia.

Phnom Penh 7 July 2006
Director, NCHADS

[Signature]

Dr. Mean Chhi Vun
Chapter 1: Background and Rationale

The HIV prevalence among adult aged 15-49 years of age in Cambodia has dropped progressively from 3% in 1998 to 1.9% in 2003. The decline of the HIV prevalence is the result of intensive concerted preventive efforts undertaken by both the public sector and the civil society since the early stage of the epidemic. The key success is the behavioral change communication through outreach and peer education programmes, targeted STI case management for direct sex workers and the implementation of nationwide 100% condom programme.

Outreach to sex workers has been part of the Cambodia HIV/AIDS and STD Programme since the beginning. In 1999 the outreach strategy was assessed through an external evaluation conducted under the World Bank funding, and re-designed. At the same time the 100% Condom use Policy was officially approved and launched throughout the country. As a recommendation, these two interventions are needed to support each others in order to receive high achievement.

While these programmes have significantly contributed to the decline in HIV prevalence in the country, they have faces major challenges that need to be addressed to make sure that the interventions are cost-efficient and sustainable in the longer term.

In late 2005 the Strategies and Guidelines for the Outreach/Peer Education Programme and the 100% CUP to sexual entertainment services were extensively reviewed. A workshop was held with participants from NCHADS, PAO managers, and other involved partners. In addition, in early 2006, a Technical Working Group, Chaired by the Ministry of Women’s Affairs was established. As a result of these reviews, the following Strategy and Guidelines have been developed, [and endorsed by the NAA].
Chapter 2: Concept and Objective

1. Concept

The concept is to combine the several parts of the sexual entertainment services prevention interventions under a single oversight mechanism at central level (the TWG), a single management and coordination mechanism at provincial level (the PWG/OPC) in order to achieve better and more cost-effective coordination, and then strengthen actual implementation at OD level. It is also intended to make better use of available human resources, by using NGOs as far as possible to actually conduct outreach – which they do well, and using government staff to plan, coordinate and report - which they are best placed to do.

2. Objectives

- to improve coordination and to strengthen partnerships between the public sector and the civil society delivering outreach and peer education and 100% CUP activities;
- to standardize and improve the quality of OR/PE and 100% CUP;
- To strengthen the link between OR/PE, STI services and 100% CUP and CoC for PLWHA;
- to ensure efficient use of resource to ensure long-term sustainability.
Chapter 3: Structure of Outreach and Peer Education Programme and 100% CUP

1. The Technical Working Group on OPC (TWG/OPC) identifies the policy/strategy, coordination monitoring and supervision.

2. The Condom Use Coordination Committee (CUCC), chaired by provincial governor, provides political support and monitor condom use at the provincial level.

3. Provincial Working Group on OPC (PWG/OPC) chaired by PAO manager who monitor, supervise and report the OPC activities. This group is combined by two sub groups:
   - The Provincial Support Team on outreach/peer education (PST/OP) provide direct monitoring and supervision to DTOP, and
   - The 100% Condom Use Working Group (CUWG) who responsible for the 100% CUP.

4. OD HIV/AIDS Coordinator is also the member of PWG-OPC play the role to coordinate activities between PWG/OPC and DTOP.

5. District Team on Outreach & Peer education (DTOP) implement the outreach and peer education programme to SWs at the priority ODs. The membership of this group is the staff of NGOs who is operating OR/PE in the province and at the OD (For the OD does not have NGOs we need to identify experienced NGOs for making a contract) and PF in each OD.

6. Peer Facilitators (PFs) is part of DTOP play the role as the implementers the OR/PE assisted by DTOP (NGOs).

7. Peer Educators (PEs) provides informal education to SWs whose are their friends working in the same establishment.

Term of references, membership, meeting etc. will be described in details in chapter 4.

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1 Previously the CUMECE
Standard Operating Procedures for the Outreach/Peer Education & 100% CUP to Sex Workers in Cambodia

- Advocator
- Planner
- Coordinator
- Supervisor

Supporter

Implementer

Target Groups

Sex Establishment Owners

SWs

PE PE PE PE PE PE PE PE
Chapter 4: Implementation

1. Technical Working Group on Outreach/Peer education and 100% CUP (TWG-OPC)

1.1. Tasks

a. Coordination of the Implementation of the Programme Nationwide

- Ensure better collaboration with all relevant of each province to avoid activity and resource duplication;
- Identify problems and propose appropriate solutions related to OR and PE programmes;
- Share information and experiences with involved stakeholders
- Identify other priority high risk group that may later be included in the OR/PE programme
- Coordination meeting conduct every 3 month. However, adhoc meetings can be convened to address urgent issues

b. Technical Assistance

- Develop and review the policy and strategies on OPC
- Develop a standard curriculum for the OR & PE programmes.
- Provide technical assistance related to OPC
- Coordinate in development of IEC and training materials.

c. Management of Resources for Effective Implementation

- Coordinate effectively the existing resource.
- Standardize rate to be used for OPC
- Mobilize resource to fill gaps in the implementation of OPC.

d. Monitoring & Evaluation of Nationwide PE and OR Programmes

- Set checklist for monitoring and supervision
- Set indicators for monitoring OPC programme on a regular basis;
- Develop data base and reporting format. This will integrate in coordinate reporting system;
- Regular supervision (at least 2 supervision trips/year for each province). Ad-hoc supervision in case problem emerges.
- Conduct regular quarterly meeting. Ad-hoc meeting in case necessary.
1.2. Membership:

This is needed the involvement of ministries, NGOs and representative of sex workers:

1. General Director in charge of health of MoWA: Chairman
2. Deputy Director, NCHADS in charge of BCC Vice Chairman
3. Chief of BCC unit, NCHADS Secretary
4. Ministry of Interior (General Directorate of Police) Member
5. Representative of NAA Member
6. HIV/AIDS programme officer of MoWA Member
7. Officer from STD unit, NCHADS Member
8. Representative from FHI Member
9. Representative from KHANA Member
10. Representative from Care Cambodia Member
11. Representative from CWPD Member
12. Representative from CWDA Member
13. Representative from PSF Member
14. Representative from RHAC Member
15. Representative from PSI Member
16. Women Health’s Networks Member
17. NCHADS’s Consultants Advisor
18. Representative from UNAIS/WHO Advisor

2. CUCC

2.1. Term of Reference

- Oversee the implementation of CUP in the provinces in accordance to the National Policy and strategy.
- Coordinate and provide appropriate resolution while the problems occurred during the implementation programme
- Ensure availability condoms at all sexual entertainment services.
- Organize regular quarterly meeting, ad-hoc meeting will be conducted if necessary.

2.2. Membership

1. Provincial governor or vice governor (who is the chairman of PAC): Chairman
2. Director or vice director of PHD Vice chairman
3. Manager of PAO Secretary
4. Commander or vice commander of provincial PM Member
5. Commander or vice commander of provincial police  Member  
6. Chief of CUWG  Member  
7. Representative of local Human Right Organization  Member  
8. Representative from PSI  Secretary  
9. Representative of Women Health Network  Member  

3. PWG/OPC, PST/OP & CUWG

3.1. PWG/OPC

a. Task

- Coordinate activities with involved NGOs, institutions to avoid overlap activities followed by provincial workplan  
- Assessment and mapping of sexual entertainments to ensure the real data of sexual entertainment in each province,  
- Collaborate with STD clinic to ensure all SWs receive regular STD check up,  
- Conduct quarterly meeting among the group to find out gaps/problems and possible solution  
- Conduct quarterly meeting with sexual establishment owners in order to coordinate collaborate for OPC activities  
- Make a quarterly activity report and send to NTWG-OPC though the approval from PHD  

b. Membership

1. PAO staff in charge of BCC  Chief  
2. Representative from provincial department of Women’s Affairs  Vice Chief  
3. PAO staff in charge of BCC  Secretary  
4. District Governor or vice governor  Vice Chief  
5. Chief or vice chief of police district  Member  
6. STD clinic staff  Member  
7. OD HIV/AIDS coordinators  Member  
8. Officials from other provincial departments (social affair/information)  Member  
9. Representatives from local NGOs  Member  
10. Representatives from women health’s network  Member
3.2. PST/OP

a. Tasks

- Coordinate in preparing planning related to the OP
- Determine and solve problems accrued
- select peer educators as per the criteria recommended by the NTWG-OPC;
- Conduct training and strengthen capacity PF and PE by using curricula approved by NTWG-OPC,
- Prepare coordination meeting for PE/PF every 2 month
- Supervise OP activities and provide technical assistance to PE/PF
- Prepare monthly report on OP and send to PWG/OPC
- Conduct regular meeting (2 meetings/quarter) and also join quarterly meeting with PWG/OPC
- Supervise DTOP activities at least once/month/OP operating district

b. Membership

1. PAO officer in charge of BCC
2. Representative from department of Women’s Affairs
3. OD HIV/AIDS coordinator
4. Representatives from involved priority department (social/information)
5. Representatives from involved NGOs
6. Representatives from women health’s network

3.3. CUWG

a. Terms of Reference

- Coordination with involve services such as STD clinics, PST/OP, sexual entertainment service owners to ensure SWs have regular STD check up,
- Monitoring condom usage at the sexual entertainment services
- Providing solutions while any problems or argument occurred at the sexual entertainment services
- Determine and collect regularly data at the sexual entertainment services
- Prepare activity report on 100% CUP
- Meeting: 2 times/quarter
- Monitor 100% CUP at sexual entertainment place every 2 week.
b. Membership

1. Chief or vice chief of district  
2. Chief or vice chief of district police  
3. Police post (based on the availability of sexual entertainment service)  
4. STD Clinic staff

Membership:

- Chief or vice chief of district: Chief
- Chief or vice chief of district police: Member
- Police post: Member
- STD Clinic staff: Member

NB: 1 or 2 CUWG are allowed for OD outside town which consist of less than 30 sexual entertainment places.

4. DTOP

4.1. Task

- Regular outreach visit to SWs and other groups who are vulnerable to HIV/AIDS
- Assist in identifying and selecting PFs and PEs
- Cooperate in referral of SWs for regular STD check up, VCCT and other health services
- Assist in mapping sexual entertainment services (direct and indirect sex workers)
- Supervise and collect report from PFs and combine all report then send to PST though the overseeing from OD Coordinator.
- DTOP provide regular outreach education to SWs at least 2 times per month
- Regular monthly meeting

4.2. Membership:

- The particular member of this group focus on the NGOs and PFs whose are operating OP in OD or provinces (provinces where there are no NGOs, we will find out from outside and making contract with NCHADS for operating OP)
- Number of staff in each DTOP is based on the actual number of SWs in each OD. One NGO staff and one peer facilitator will responsible for 200-250 Sws. In the OD where the number of SWs more than 250, one additional NGO staff and PF can be added.

5. HIV/AIDS OD Coordinators

ODHC play the important role to link between PWG/OP and DTOP in order to ensure OPC activity undertake smoothly. There are 3 tasks:

- Ensure smoothly link between PST/OP, CUWG and DTOP
- Send activity report of DTOP to PST/OP
- Assist DTOP related to OP activity
6. PFs

6.1. Selection Criteria

Number of PFs should be clearly defined. It is varied according to the number of SWs in each province. The selection of PFs should be based on the number of PEs (from direct and indirect SWs). In general, in the gathering area; one PF covers 15-25 PEs (100-200 SWs). For the isolated areas where SWs less than 50; PF are not allowed to select. With this regard, we use the existing DTO (NGOs) to provide outreach education directly to PEs/SWs.

The criteria for PF selection are as follows:

- Volunteers and committed to work as outreach educators on HIV/AIDS and reproductive health.
- Good relationship with their friends
- Skillful on speaking and listening
- Basic knowledge on Khmer reading and writing
- Have enough time and energy to get education/training and provide outreach education
- Ability of making contracts at least 3-6 months in each area.

NB: PF selection criteria is not required for all above criteria, however, it will need to have good personal characteristics as much as possible decided by PST/OP. New PF or replacement PF can be selected based on actual needs in each area.

6.2. Tasks

- Cooperate with PEs to provide regular education to SWs in the identified areas
- Encourage SWs to regularly visit STD clinic
- Peer education to be provided twice per month for each place
- Prepare individual weekly and monthly plan with DTO
- Join in monthly meeting with DTO to prepare plan, report activities, and get updated information/knowledge.
- Prepare weekly/monthly report

7. Peer Educators (PE)

7.1. Selection Criteria

- One peer educator should be selected in each entertainment place (1 PE for every 5-10 SWs)
- In case the number of SWs is less than 5, they can join another group or be educated by PFs.
- They should be good relationship with friends, be able in Khmer reading (if possible), volunteers to provide outreach education on HIV/AIDS and RH to their friends

7.2. Tasks

- Receive training on HIV/AIDS, STIs, RH from PST/OP as scheduled
• Educate their friends in the place where they stay together
• Cooperate with PFs to regular provide outreach education to their friends
• Encourage SWs to regularly visit STD clinic, RH, VCCT, CoC and other health services
• Participate in peer meeting (2 times/quarter) conducted by PST/OP and DTOP
Chapter 5: Link with other services

Link between the Outreach/Peer education and:

- **100% CUP**: PST/OP needs to collaborate with CUWG so that they can support each other. Just as the 100% CUP encourage owners and SWs to strictly and consistently condom use. PST/OP provides knowledge/information to prevent themselves from HIV/AIDS transmission and life skills.

- **Targeted STI services**: A large part of 100% CUP is getting owners to allow SWs to have regular STI check up, outreach activities need to help SW to understand why treatment are important and how to follow treatment.

- **Reproductive health and other health services (e.g VCCT)**: SWs also need other health services. The outreach programme can be able to provide related information or to refer and to help them to access those health services for their needs.

- **AIDS Care and Treatment Services**: A very high proportion of SWs is already infected by HIV. Over the next few year, they will start becoming ill. Therefore outreach programme provide information about HIC/AIDS care service and help refer them to those services.

- **Other relevant services**: SWs may also be at risk of sex violence or gender issues. In this case, PST/OP or DTOP can indicate or give an idea to SWs to reach other relevant services such as human rights organization.
Chapter 6: Monitoring, Supervision, Reporting and Training

1. Monitoring & Supervision:
   - TWG/OPC needs to divide in small groups to supervise OPC activities at provincial/district level in all provinces/cities (at least two supervisions per year for each province/city). In case emerge. Ad-hoc supervision can be taken. TWG/OPC has to develop the indicators, supervision schedule, and supervision check list; and also develop BCC data based.
   - PWG/OPC and PST/OP have to develop supervision check list and supervision schedule in order to monitor and supervision to DTOP, PFs and PEs (at least one supervision trip /month/OPC operating district)

2. Reporting:
   The standard reporting format will be developed by TWG/OPC.
   - TWG/OPC collects all quarterly report from every provinces and update data based on sexual entertainment services nationwide.
   - PWG/OPC collects monthly activity report on OPC, supervision and other coordination meeting and sends to TWG-OPC secretariat (BCC unit, NCHADS) not later than 1st week of coming quarter.
   - DTOP collect weekly activity report from PFs and prepare monthly report to PST/OP through HODC not over than day 2nd of coming month.

3. Training & Capacity Building:
   3.1. Training
   - Based on the training plan, PWG/OPC will receive training of trainers or refresher trainings at least twice per year from TWG/OPC in order to get new knowledge/information and skills.
   - DTOP, PFs and PEs will also receive trainings or refresher trainings from PST/OP at least twice per year.

   3.2. Training
   - In order to improve the capacity and work quality of all OPC implementers, TWG/OPC in collaboration with PWG/OPC will establish 3 or 4 groups of provinces as a Regional Network and alternative organize the regional workshop in each region in every 3 months. So that they can share experiences and learn from each other.
Chapter 7: Motivation & Incentive

The process and rate for OPC activities described in this section, is mainly focused on government officer and utilized the NCHADS’s financial source and based on SOP for Implementation of NCHADS Programme Activities.

1. TWG/OPC

Member of TWG/OPC who comes from governmental sector will be able to get some incentive or allowance or per diem through their routine work such as meetings, supervisions, or organization the training courses for OPC.

2. PWG/OPC-PST/OP-CUWG

Each member of PWG/OPC, PST/OP and CUWG will receive some allowance and per diem through their work as below:

- **PWG/OPC**: Regular quarterly meeting
- **PST/OP**: Supervision trips (once/month/OPC operating district) – meetings (2 times/quarter) – conduction of trainings to DTOP/PFs/PEs.
- **CUWG**: Monitoring of 100% CU (every 2 weeks) – meetings (2 times/quarter)

3. DTOP

- **NGO Staff**: They will get salary or other incentive from their own employer (NGO)
- **Peer Facilitators (PFs)**: Each PF need to make a work contract directly with NGO which responsible in that area or district or OD.

4. PEs

Each member of PFs team will receive some incentives or gifts from their employer (NGO which responsible in that area or district or OD) through the attending of regular peer meetings (2 times/quarter).

**NB**: See the annex: Standard rate of payment for OPC activities supported by NCHADS.

Phnom Penh, 10 July 2006

Seen and Approved
Chair, National AIDS Authority

Phnom Penh, 3 July 2006

Director, NCHADS

Dr. MEAN CHHI VUN

Dr. HONG SUN HUOT
## Annex: Standard Rate of Payment for OPC Activities Supported by NCHADS

<table>
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<tr>
<th>Activities</th>
<th>Rate</th>
<th>Remark</th>
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<tbody>
<tr>
<td><strong>Meeting</strong></td>
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<tr>
<td>1. TWG/OPC meeting</td>
<td>$12.5 per meeting/person</td>
<td>Quarterly meeting (two or three additional meetings/year if necessary)</td>
</tr>
<tr>
<td>2. CUCC meeting</td>
<td>$5 per meeting/person</td>
<td>Quarterly meeting (two or three additional meetings/year if necessary)</td>
</tr>
<tr>
<td>3. PWG/OPC meeting</td>
<td>$5 per meeting/person</td>
<td>Quarterly meeting</td>
</tr>
<tr>
<td>4. PST/OP</td>
<td>$5 per meeting/person</td>
<td>2 meetings/Q.</td>
</tr>
<tr>
<td>5. CUWG</td>
<td>$5 per meeting/person</td>
<td>2 meetings/Q.</td>
</tr>
<tr>
<td>4. DTOP meeting (NGO+PFs)</td>
<td>$5 per meeting/person (for participants)</td>
<td>Two meetings per quarter facilitate by two or three persons from PST/OP &amp; DTOP (Use NGOs’ financial support)</td>
</tr>
<tr>
<td>5. Peer meeting (PFs+PEs)</td>
<td>$12.5 per meeting/person (for facilitators/ coordinators) (except DTOP members)</td>
<td></td>
</tr>
<tr>
<td>6. Owner meeting</td>
<td>$5 per meeting/person (for participants)</td>
<td>Quarterly meeting. Two or three persons from PWG/OPC and DTOP facilitate the meeting</td>
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<tr>
<td><strong>Supervision/Monitoring</strong></td>
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<tr>
<td>7. PST/OP supervision to DTOP (Per-diem)</td>
<td>$5/p/d (in Provincial Town) $15/p/night + travel (Out of provincial town)</td>
<td>Monthly supervision. One supervision trip to be taken by two persons to oversee/assist the ODOT and PF activities</td>
</tr>
<tr>
<td>8. CUWG monitoring</td>
<td>$5/person/week</td>
<td>Monthly supervision to each sexual entertainment</td>
</tr>
<tr>
<td>9. ODOT education to peer educators and sex workers</td>
<td>No per diem</td>
<td></td>
</tr>
<tr>
<td><strong>Salaries/Incentives</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10. ODOT (PF)</td>
<td>$25/person/month (Will be paid by NGO)</td>
<td>PF provide education to PE and SWs twice per month. No additional payment for attending in the meeting.</td>
</tr>
<tr>
<td>11. ODOT (Contracted NGO with NCHADS)</td>
<td>$100/person/month (Will be paid by NGO)</td>
<td>They provide education to PE and SWs twice per month. No additional payment for meetings.</td>
</tr>
<tr>
<td><strong>Transportation</strong></td>
<td></td>
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<tr>
<td>12. Transport for SWs from community brothel based to STD clinic/VCCT/OI or ARV service</td>
<td>Based on the actual cost. As lump sum, $2 per persons per visit (Will be paid by NGO)</td>
<td>Mapping of sexual entertainment to be made to ensure the evidence of the real location of sexual entertainment service.</td>
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