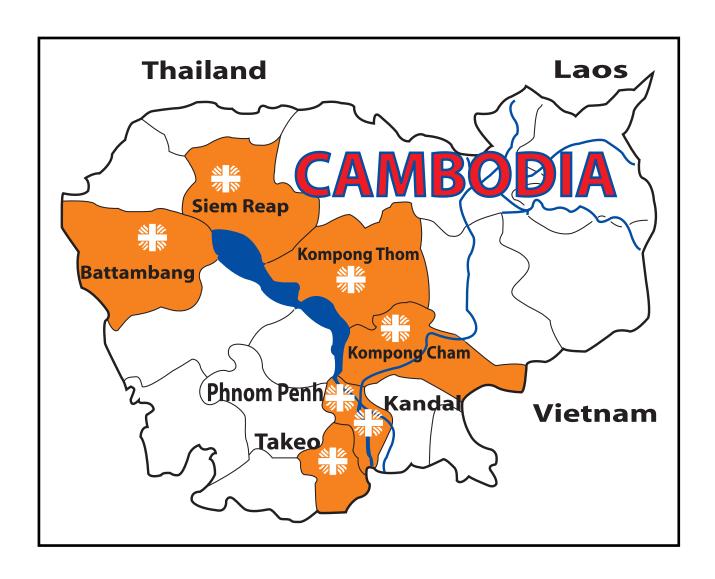
Caritas Program Coverage Area



CARITAS CAMBODIA

#47, St. 198, Sangkat Boeung Pralit,

Khan 7Makara

Phnom Penh - CAMBODIA

Tel: (855-23) 210 757 Fax: (855-23) 216 258

P.O. Box 123 - Phnom Penh

E-mail: caritas@forum.org.kh

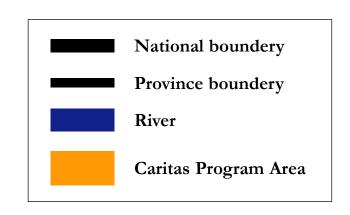
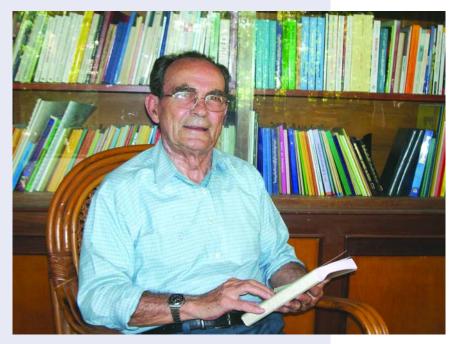


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Message from the Chairman

Caritas Cambodia has been actively engaged in rehabilitation and reconstruction of Cambodian communities throughout the last 15 years. The benefits of the program are clearly visible in the concrete social changes achieved and the improved living conditions of people in the target communities.



Caritas is at the forefront of Cambodian development, addressing the issues affecting small-scale farmers and poor and marginalized communities. Substantial progress has been made in the various project sectors, including Health Care, Socio-economic Development, and Youth Development.

Major successes were achieved in 2005 through the cooperative efforts of Caritas staff and the people in target communities.

The development activities enabled poor and marginalized communities to substantially improve their livelihoods and living conditions.

The 2005 annual report explains in detail the activities and experiences of Caritas Cambodia during the year. We find tremendous fulfillment in assisting poor and marginalized people, and feel strong solidarity in these activities. Let us work together for harmony and peace.

Bishop Emile Destombes

Message from the

Executive Director

It is the time to reflect on the year and look back at our achievements in helping the poor and marginalized people of Cambodia. Through various initiatives and activities, this period has seen significant improvement in the lives of people in the target communities.

Program activities have been conducted in a variety of areas, including sustainable agriculture, food security, micro-credit, income generation, small infrastructure development, primary health care, home based care for PLHA, child mental health care, rehabilitation for blind people, and vocational training for youth. Caritas Cambodia has responded to the needs of the people, improving the livelihoods and living conditions of those most in need.



We wish to extend our appreciation to the Royal Government of Cambodia and our partner organizations for their invaluable support and cooperation. We thank our funding partners for their generous financial support which enables us to carry out program activities. We also express our deep appreciation to the Village Development Association Management Committees, Unit Representatives, Village Health Volunteers, Volunteers for Child Development, and the Caritas staff for their unwavering contribution and commitment to improving the lives of the poor and marginalized people of Cambodia.

Mr. Nuth Sam Ol Executive Director

CCAMH

Center for Child and Adolescent Mental Health

Community Based Child and Adolescent Mental Health Program

The highlights of the Community Based Child and Adolescent Mental Health program during 2005 were: following up awareness building exercise with action programs in the community, setting-up registers for data-management at the community level, distribution of seeds for home gardens during the monsoon, sharing achievements and challenges with the rest of the Caritas team, and taking the issue of prevention of needless disability to the national level.

Despite the late onset of the monsoon season and delay in promoting the home gardening program, the Caritas-CCAMH team achieved immense results with people's participation. The women's groups enthusiastically promoted the home garden program after a series of social communication campaigns by the Caritas-CCAMH team. Our team successfully highlighted the issue of the prevention of needless disability during International Day for the Disabled on the Third of December, 2005.

1. Evidence Based Intervention and People's Right to Information

 ↑ he Caritas-CCAMH team implemented 'evidence based intervention' in collaboration with village leaders and the Volunteers for Child Development (VCD). The team respected the community's right to access the information collected and actively involved community members in data collection and management, recording the various activities, and kept the records at village level to promote community participation and ultimately program sustainability. Workshops were held during the months of July and August to build the capacity of village leaders to offer assistance and the VCDs capacities to conduct surveys, record activities in the village, and maintain records. The outreach team facilitated the process by offering their guidance and supervision during field visits. By actively involving



Community based-Ms. Rozet sharing the outcome with students

themselves in data management, the VCDs and village leaders observed and appreciated a reduction in the prevalence of various disabilities in their communities, including epilepsy.

2. Awareness Raising onMicronutrient Deficiency and Prevention of Disabilities

The CCAMH team effectively implemented the prevention of micronutrient deficiency by encouraging villagers to growing green leafy vegetables (GLV) in



(Mr. Vantha communicating on micro-nutrient disorders)

their own backyards. The social communication and awareness-raising program was intensified with a focus on micronutrient deficiency just prior to the monsoon season. The community and team members enthusiastically launched this program to prevent needless disability among children arising from

micronutrient deficiency.

The community outreach team produced communication materials on micronutrient deficiency disorders at the CCAMH Center and made extensive use of them during field visits to intensify the social communication programs at the community level. In larger villages the VCDs repeated the sessions in other parts of the village in order to reach a larger number of families.

3. Home Garden Promotion

Due to intense social communication activities the families realized the importance of micronutrients such as iodine and iron in the daily diet and their role in the prevention of intellectual disability and promotion of a child's learning capacity at school.

The participants made a list of houses with sufficient space around them for home gardening, and the types of vegetables and the quantity of seeds needed. Once completed the CCAMH team distributed seeds to the families through the VCDs.



Home garden at Tek Nim village

Emphasis was placed on production of green-leafy vegetables (GLV) and other quick growing varieties of vegetables with a high iron and vitamin A content to be consumed at the home level. As a result, this program was greatly welcomed by the participants.

4. Capacity Building Program

The Volunteers for Child Development were trained with a variety of IEC materials. To address the issue of domestic violence in the community, materials produced by UNICEF were used. Whenever there were few educational materials available (such as was the case with iron and iodine deficiency disorders), the team produced its own materials in participation with

the VCDs in the field. The community-based volunteers felt increased confidence with the health communication materials they helped to prepare and tended to use those materials more often.

Communication workshops were conducted for the VCDs at the center in the months of September and October, during which the health communication materials were field-tested. The book 'Where There Is No Doctor' in the local language was consulted for relevant literature and used for the translation of some technical terms and phrases. The VCDs prepared the health communication charts in collaboration with the CCAMH team and practiced the use of role-play exercises during the training sessions at our center.



Community based-VCDs preparing communication material

5. School based program and student's perception of 'Child Helpline'

During the first half of the year the team worked intensively with teachers and children at Anukwat secondary school in Takhmau. The team ascertained the need for a 'child-helpline' and received an overwhelming positive response from the students. The students not only welcomed the idea, but also identified problems for which they would seek help through the service.



Community based-consulting the student

6. Lobbying at the National level for Prevention of Needless Disabilities

On the Third of December the team joined with partners working in the disability sector at the national level in observance of the International Day



Procession on 3rd December 2005

for the Disabled. The CCAMH team marched as a procession to highlight the rights of the disabled, particularly the intellectually disabled, with banners and placards. The Minister for Social Welfare and the dignitaries attending the occasion—visited the CCAMH booth in the exhibition grounds where the team had a display explaining its activities. This year the team emphasized the program for the prevention of disabilities implemented in Kandal province.

7. Story of Ratha

Ratha was a four-year-old girl kept in a bundle of old cloths by her mother whose husband had abandoned her for another woman. Both her parents were alcoholic and her father was often abusive towards her when he was present. She was suffering from Marasmus, Kwasiorkar and an advanced level of Keratomalaicea. We were at a loss at how to counsel her mother, as Ratha was her only child and companion. We gave her mother some money to take Ratha to Kantha Bopa Hospital, but later learned that the girl died at the hospital. It became evident that the complex issues of poverty, gender based violence, and alcoholism make children such as Ratha vulnerable to disability, injury, and death. The question of whether

we could have prevented the death of Ratha will remain in our minds for a long time to come.

8. Future Plan

Targeting pregnant and lactating mothers

During the coming year, we plan to selectively target pregnant mothers for distribution of iodized salt. In addition, we will teach the entire community about iodine deficiency disorder and its prevention through daily use of iodized salt in the diet.

Extending work to other villages

Caritas Cambodia is working in three districts in Kandal province and the Caritas-CCAMH team recognizes the importance development in these communities. The beneficial effects are exponential, allowing these communities to help a significant number of local families.

Working with teacher trainees

The plan to intensify our work in inclusive education has not progressed as well as hoped, due to limited staff numbers. The program is considering working with a teacher training school instead, so as to reach the maximum number of potential teachers who can spread their knowledge to as many districts as possible in Kandal, Kompong Spue and Kompong Thom provinces.

Strengthening Parent's Groups

The parents of children with intellectual disabilities met once every four months at CCAMH to discuss their children's problems, needs, and challenges, and what they can do to improve quality of life for their children. The team plans to organize similar groups for the parents of children with microcephaly, cerebral palsy, pervasive developmental disorder (PDD), and Down syndrome.

Center Based Child and Adolescent Mental Health Program

The year 2005 was unique in terms of institutional growth and capacity building for the Caritas-CCMH team. Ms. Sok Dearozet, the psychologist working at the center, went to India and Singapore for seven months to enrich her knowledge and experience. Mr. Kim Rattana, Ms. Sok Phaneth, and Dr. J. Bhoomikumar visited the SETI-center at Caritas-Egypt to understand Caritas-Egypt's involvement in the developmental disability sector.

Some highlights, other than the regular clinical service program at the center, included: building a play facility exclusively for children with intellectual disabilities, establishing the early-stimulation unit, networking and coordination with agencies both inside and outside Cambodia, celebrating the breastfeeding promotion day, sharing the achievements and challenges with the rest of the Caritas team, and the visit of the Patch Adams team, the "clown doctors", to the center.

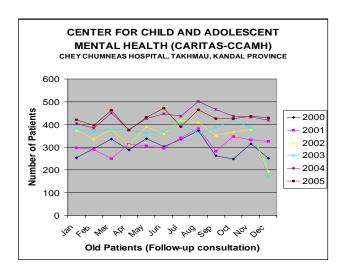
While referrals have increased from partners in the disability sector, such as the National Center for Disabled Persons (NCDP), Cambodia Trust (CT) and Veterans International (VI), the number of clients who seek help in Battambang has reached a new high.

1. Clinical Service and Referral Program

The number of children referred for neuro-psychiatric disabilities has significantly increased during the past year. Community based field workers from organizations such as Rehabilitation of Blind Cambodians (Caritas-RBC), Cambodia Trust and Veteran's International are actively identifying children with disabilities and referring them to our center. As the client load has significantly increased we are booking follow-up appointments at slightly longer intervals: two to three weeks becomes a four to eight week delay, par-

CENTER FOR CHILD AND ADOLESCENT **MENTAL HEALTH (CARITAS-CCAMH)** CHEY CHUMNEAS HOSPITAL, TAKHMAU, KANDAL PROVINCE 50 45 40 Number of Patients 35 **←** 2000 30 2001 2002 25 2003 20 2004 2005 15 10 5 O Jan Feb Mar Apr May Jun Jul Aug Sep Oct Nov Dec New Patients (First consultation)

ticularly for those children who are seizure free and able to attend to school.



2. Early Stimulation Unit

As a result of the intense social communication program in the epidemiological catchment area in Kandal province, more and more parents are seeking help for their children at an early age (below three years). This year, the program started an early intervention unit within the campus. The team follows the model of development promotion using carry-home activity-cards that facilitate the active participation of parents as co-therapists.



Mother offering 'Tactile Stimulation' at the Early Stimulation Uni

This approach is novel, as the parents are not familiar with the idea of coming to the center for the purpose of play, positioning, and stimulation exercise. They continue to harbor the hope that there will be some injection or tablet that will magically cure their children of his or her developmental disabilities. Early identification and intervention will alleviate distress among parents and reduce the economic drain of seeking ineffective cures for their children. The hope is that the program will grow in popularity since it empowers parents, particularly the mother, with techniques that promote development and thereby prevent contracture and life-long disabilities.

3. Establishing A Play Facility for Children with **Disabilities**



Center based-inauguration of the play facility

It was a long-term dream to establish a play facility exclusively for children with multiple disabilities. The facility, located at the front of the center, is so popular that many children in the neighborhood come there to play.

A total of fifty youth volunteers from Ngee Ann Polytechnic, supported by the Singapore International Foundation, spent one month working to complete the playground between the family cottage and the daycare center. The team greatly enjoyed working with the youths from Singapore.

4. Integrating child and adolescent mental health with the development sector

The team developed a special plan centered on the epidemiological catchment area, viz. the Health Operational District (HOD) of Takhmau, an area where other NGOs, including Caritas-RBC, are working to promote agriculture, women's development, income generation and knowledge of human rights issues. The plan includes working in close cooperation with the Caritas rural development and prevention of blindness program of in Kandal province. To accomplish this the team meets regularly to discuss methods for promoting greater collaboration and cooperation amongst field level staff of both organizations.

5. Celebrating 'World Breastfeeding Week'

Collaboration with Helen Keller International (HKI) was intensified this year. Our team was happy when HKI chose our center to cheerlead the World Breast Feeding Promotion Week. Breastfeeding as soon as the child is born establishes maternal bonding, enhances trust, and promotes normative development of temperament and balanced personality later in life.

Our team focused and drew attention to the mental health aspects of breastfeeding rather than emphasizing breast milk's other roles, such as preventing diarrhea and respiratory infection through maternal antibodies, and the promotion of overall nutrition. The program will continue to observe breastfeeding promotion week in future years.



Center based - CCAMH team celebrating the world breathe feeding promotion week

6. Healing through laughter

Doctor Patch Adams was in Cambodia accompanied by his team of clown-doctors from Italy, France, the USA and Canada. His speech and the film-clippings about the work of the Gesundheit Group in



Clown doctors at the Center for Child and Adolescent Mental Health

Afghanistan among the war-affected children were very impressive. The group came to our facility to liven up the ambience of the center. Our staff were very happy to participate, recognizing that laughter is a potent antidote to burn-out syndrome, a malady very common among professionals who work in the disability sector.

7. Future Plan

Human Resource Development and Capacity Building for the Staff of Other Organizations

Many organizations working with trafficked children

and in orphanages request assistance in training their staff, seeking to improve the skills and knowledge of caregivers on issues of child development, counseling, trauma healing and institutional care. COSECOM, Caritas-RBC, KnK and Handicap International from Battambang have each expressed interest and requested that our team provide training for their staff. As a result Caritas-CCMH has formed a core-group within the Caritas-CCMH team to specifically offer training to the staff of other organizations.

Networking with Caritas-Egypt

The visiting team from Caritas-Cambodia was very impressed with the programs established by Caritas-Egypt for children with developmental disabilities. As a result, we plan to intensify our collaboration with the SETI center and build the capacity of our team. We plan to launch an educational campaign to raise awareness of developmental and multiple disabilities among parents, university students and the general public.

Suicide Research

Suicide is a major problem in developing countries, particularly in a post-conflict society such as Cambodia. It is a subject that is often not discussed in public. The Caritas-CCMH team is on the verge of launching a research-cum-intervention program in the area of suicide among adolescents in Cambodia in collaboration with the Department of Psychiatry and Clinical Medicine of the University of Umea in Sweden.

Children with HIV/AIDS

The Chey Chumneas Hospital, where our center is located, has started a HIV/AIDS voluntary disclosure, counseling and treatment program. The hospital administration requested that our team offer support in counseling HIV positive children and adolescents, children with HIV positive parents, and children orphaned by HIV/AIDS. This will become one of the cornerstones of our center's development in coming years.



Takeo Eye Care and Training Programme

Background information

Caritas Cambodia rehabilitation for blind persons was started its program activities in November 1996 by collaboration with Ministry of Health. The major focus of this program was indicated in the following manner:

- 1. The operation of Takeo Eye Hospital.
- 2. The training of doctors and nurses in order to provide eye care services in different govern ment hospitals.
- 3. Assist the Ministry of Health in developing provincial eye units.

Major Activities carried out during the year

Capacity Trainings

1-Professional Training a-Diploma in Ophthalmology

The Diploma in Ophthalmology is a postgrad uate course for doctors. Its aim is to capacitate doctors to provide proper eye-care services in the provinces. The course constitutes a twoyearprogram with curriculum approved by the Ministry of Health. Three doctors began their training for this diploma in February 2004 and finished the course in January 2006. These doc tors were subsequently assigned to support the eye unit activity in Kampong Thom Provincial Hospital, Chea Chumneas Hospital, Kandal and Takeo Eye Hospital.



The presence of these three doctors has made it possible for the hospital to conduct 20,750 consultations and 3,571 surgeries. The hospital has organized outreach activities in neighboring villages, additional training of other health center personnel, and school screening activities.

b-Diploma in Ophthalmic Nursing

The curriculum for the Diploma in Ophthalmic Nursing was recently upgraded and approved by the Ministry of Health with the aim of training nurses to deliver eye-care services and to train ophthalmic nursing at the Regional Training Center. The Diploma in Ophthalmic Nursing is now being implemented through close col laboration between Takeo Eye Hospital and the Kampot Regional Training Center. Presently, five nurses have attended the course from July 2005 to June 2006. Three of the five nurses have since been assigned to work at the Kampong Cham Regional Training Center, Kampot Regional Training Center, and the Technical School for Medical Care, Phnom Penh. The two additional nurses were assigned to the Takeo Eye Hospital.

The nurse-trainees offer support and vital daily nursing care at the hospital. They also provide health educa tion when the need is identified through community service work in the villages.

c-Upgrading Seminar for Nurses

The 13 nurses of the TEH had an upgrading seminar on Nursing Management. The training facilitated the identification of activities directly involving the nurses and their supervision that relate to the nursing proce dures, treatment and medication, pre- and post-operative-care to patients, and home-care instructions.

2-Managerial Trainings

Various trainings and workshops on Instrument Repair and Maintenance, Nurse Refractionist, Small Incision Cataract Surgery (SICS), International Workshop on Resource Mobilization, Workshop for Managing the Integration of Culture into the Development Programs were organized and participated nationally and inter nationally. As result of trainings they all able to play very crit ical roles to enhance the health services to the poor and marginalized.

Service Delivery at the hospital

Hospital provided essential eye-care, and made services available to the country by providing 20,750 consultations and 3,571 surgeries. The hospital also conducted outreach activities in 5 health centers, 1 ple and a school screening in Buddhist tem the biggest primary school of the province.

Development of Provincial Eye Units

This is the third year that our program assisting the Ministry of Health in development of five provincial eye units. As result eye units were able to deliver 11,575 consultations and 1,438 surgeries with 4,078 consultations in the health centers.

Our target and its achievement for the year 2005

	Target	Achieved	Target	Achieved
Place	Consultation		Operation	
The Takeo Eye	18,000	20,750	4,000	3,571
Hospital				
Eye Units	12,000	11,575	2,500	1,438



Efforts towards developing sustainability

The hospital income shows a 14% increase as compared to last year. 26% of the patients contribution the full rate, 54% received subsidized services, and 21% received free services.

The Social Service Committee continue to interview patients to determine proper discounts for those who seek assistance, while CBR referrals continue to pay the cost of treatment as agreed with fieldworkers.

The service-fee scale was reviewed once more, with some adjustments made, including fees for other examinations. The finance section is closely monitoring the services that require added fees.

Our gratitude:

We are grateful to CBM Germany, CBM Australia, and CBM CEARO for their visits to our program which demonstrate their support and encouragement; for their recommendations that help us set our goals and direction with clarity; and for their friendly relations that warm our heart.

CASE STUDY

Bringing Back the Smile

Mrs. Thon Keu is a 59-year-old widow from Prey Veng Province. Her 18-year-old daughter stays with her, and her three other children already have their own families. She earns her living by farming.

Her vision started to deteriorate approximately 5 years ago. She attributed this condition to part of the normal aging process. She did not consult any eye doctor and eventually her eye condition worsened in both eyes. She had difficulty recognizing people's faces, performing usual household chores, and doing farmrelated activities. Because of her visual impairment, she was forced to stay at home, with her daughter doing most of the household chores and earning a living for the household.

In the last week of August, Mrs. Keu's relatives informed her about the Takeo Eye Hospital, a place where she could seek consultation on her eye condition. Carrying what little money she had, she traveled 179 kilometers to Takeo with her sister-in-law.

At the Takeo Eye Hospital she was evaluated and assessed to have mature cataracts on both eyes. Her cataract operation was immediately scheduled for the same afternoon that she had arrived.

One day after her successful operation she could walk by herself and recognize people's faces. She was discharged from the hospital and advised to return after two weeks to remove the cataract on her other eye.

On her return, she told us that she was now able to move around the house freely and perform some household chores that before she was unable to do. The cataract on her other eye was removed as scheduled. When she went home the day after the operation, Mrs. Keu was the picture of a happy woman. She never imagined that she would regain her vision. She was very grateful. Her experience at the Takeo Eye Hospital brought the smile back in her life.



Picture shows the mature cataract on her two eyes on the day before her operation.



Picture shows a very happy lady on the day after her second operation.

Community Based Rehabilitation Program

1. **Description of Activities**

The CBR Program has working within its existing areas of Phnom Penh, Kandal, Takeo, three districts in Kompot province, and three districts in Kompong Speu province. The program provides rehabilitation services, medical referral services, loan/grant provisions, Cow Banks, emergency relief to poorest client, education support to blind children, disabilities awareness raising, and client meetings.

1. Activities during the Year

- Rehabilitation Services provided appropriate training such as Orientation and Mobility Training, Daily Living Skills, MDS, Social Skills, Vocational Skills, and leadership training.
- Medical intervention towards avoidable blindness and other disabilities prevention.
- Provide loans or grants after training to promote income generation activities, thus giving opportunities for disabled people to contribute to family income and improve capacity of the families to support themselves.
- Emergency relief to extremely poor clients in the form of food, shelter, health care, education for children, and more.
- Support for children to study at the Krousar Thmey School for the blind.
- Networking and collaboration with other agencies to coordinate referrals for medical cases.

3. Results of Training Courses

All field workers gained the knowledge, skills and values necessary to support poorer disabled people in forming Self-Help Groups. The training made them more aware of the correlations between disability, poverty, and development. They understand the mainstreaming of disability issues into development programs, and are currently join

ing the development projects of Caritas CBR for integration and participation.

- b. The CBR program is ready to form a Self-Help Group for disabled people (cross-disabilities) with in existing areas of the CBR in 2006.
- c. Gained new evolution concept of the CBR and its comprehensive services. Gained new knowledge and experiences from other participants from dif ferent countries. Sharing these to all of the CBR staff and target communities. Strengthen relation ships with others for better collaboration and cooperation.



d. Improve the service condition of parents or care givers who are assisting disabled children and dis abled adults.

2. Performance Statistics 2005

	CBR PP	CBR TAKEO	TOTAL
Eye checked	2511	1395	3906
Eye operations	853	834	1687
Eye glasses distributed	324	54	378
Artificial eyes	20	0	20
New blind clients identified*	40	498	1138
New blind clients in	86	43	129
rehabilitation			
Loan given out	53	71	124
Harelip/Cleft-palate operations	14	18	32
Ear client referrals	125	86	211
Other operations	10	0	10
Emergency relief to poor clients	30	25	55
Support Children to Krousar	18	5	23
Thmey Blind School			
Cow Bank	5	8	13

4. Comparison of planned project output with actual project output

• We planned to offer 120 new loans to rehab clients

We gave out 124 loans.

- We planned to offer emergency relief to 30 clients. We gave out 55 grants
- We planned to build or repair 12 houses. We built or repaired 19 houses.
- We planned to offer harelip/cleft-palate and other operations to 50 clients. We gave operations to 42 clients.
- We planned to identify 4,000 clients. We identified 4,296 clients.

5. Developing Sustainability of the Program

a. Cow Bank

We provide a cow to our rehabilitation clients who request to raise cows. The client will pay back 10% of the cost of the cow to the CBR. Upon the birth of a calf, the mother cow will be passed on to the next client, while the newborn calf belongs to the client.

b. Revolving fund repayment

Total amount of revolving fund is \$28,989.00 USD. This amount is available to rehab clients with annual repayment of approximately \$10,000.00 USD. With this repayment, plus the additional revolving fund budget for 2006, CBR will be able to reduce the budget request for the revolving fund year by year.

Translation of article from Rasmei Kampuchea Daily

Mr. Pen Soy is a 54-year-old, living in Sophy village, Dong Kpos commune, Borie Julsar District, Takeo Province. Pen Soy has gradually been losing his vision since 1979 due to problems with his optic nerve. He is married with three children, and two of the children are also suffering vision problems. There are six people in his family, including his aging grandfather. His family supports itself through farming, and their living conditions are very low. The family has no cow for plowing and lives in a small house. The children are small and the grandfather very old.

In 1999, Pen Soy's family met with a field worker of the Caritas Cambodia's Community Rehabilitation Program in Takeo Province. Counseling and training was arranged for Pen Soy and his family to help overcome the barriers of his disability. These rehabilitation activities helped him develop the skills necessary to move around on his own and conduct other daily activities.

After participating in the rehabilitation program for one year, Pen Soy and his family were firmly committed to overcoming the problems caused by the family's poverty and Pen Soy's disability. In 2000, Pen Soy received an interest free loan from a Caritas revolving fund to purchase and rear a cow. It was the first time

the family owned a cow. To pay the loan, Pen Soy's family worked as hired laborers in the neighborhood, raised and sold chickens, and harvested and sold palm sugar.

In 2003 the eldest son, Pen Heng, who also has a vision problem, requested a second loan to rear another cow to help farming activities. Now the family has five cows, two of which are young, and the other two are pregnant.

Pen Soy and his family are very proud of their success over the last five years. Everybody in the village admires Pen Soy's family, which has become a good example for disabled people in the community. Pen Soy says the success was the result of his family's participation with the Caritas field worker and the Community Based Rehabilitation Program. Pen Soy says he will breed more cows and sell them to finance the construction of a new house.

Pen Soy wishes to send a message to all disabled people and their families: "Work to overcome your disability, and don't lose hope. Being disabled does not mean that you have no abilities and must live in poverty. Society should provide opportunities and support for all disabled people."

Siem Reap

Community Health Program

Background:

At the request of the Ministry of Health, Caritas Cambodia has developed a Community Health Program in Siem Reap since 1995. The program supports 6 Health Centers, 3 clinics for Tuberculosis patients and a large Outreach Program. It works closely with Health Center Committees, Village Health Volunteers, School Teachers, PLHA, and Traditional Birth Attendants.

In 2005, the focus has been on implementing various community health activities directly with the communities in order to sustain programs and promote behavioral changes.

Program Goal:

To improve the health status of disadvantaged communities of Angkor Thom, Angkor Chum, Banteay Srey, Prasath Bakong, Siem Reap and Pouk Districts, through Community Based Health activities with a special emphasis on Women and Children through a Community Network working in partnership with health center staff in the area.

Specific objectives:

- To maintain service quality at the 6 supported Health Centers.
- To prevent and reduce malnutrition among expectant and nursing mothers and children under five years of age through a "Mother and Child Nutrition Program" implemented in 50 villages in cooperation with Caritas staff, Health Center staff, and 197 VHVs.
- To reduce malnutrition and severe iron-defi ciency in school children from food insecure communes through a "School Health Program" in 8 schools.

To improve the quality of life of chronically ill patients, including people living with HIV/AIDS, tuberculosis, and their families, through a network of VHVs and PLHAs who are committed to providing support and referrals for appropriate care in Siem Reap.

Beneficiaries: 87,619 people in 98 villages of Siem Reap Operational District with approximately 12,481 children under 5 years of age, 4,180 pregnant women or lactating mothers, 2,279 school students from 8 schools, people suffering from tuberculosis and PLHA in remote areas covered by the 6 Health Centers.

Activities with achievements: Health Center Activities:

Activities in 2005 in total for 6 Health Centers:	Achievements:
Total consultations	42,959 consultations
prenatal consultations	1,938 prenatal visits
Under 5 year old children immunized	2,347 children fully immunized
TB patients treated	244 new patients treated
HIV/AIDS cases diagnosed by the	162 people have been diagnosed
community and under treatment	and 56 are receiving ARV

Community Health Organization and **Community Based Activities:**

Community Health Organization:

- 197 Village Health Representatives have been retrained by Caritas staff on their roles and respon sibilities.
- 39 school teachers from 8 schools have been trained on school health programs, 'Child-to Child' approaches, and school feeding activities.
- 2 Village Health Committees (over 100 members)

and 197 VHVs have been trained on TB and HIV/AIDS issues and community response to TB and HIV/AIDS.

Community Health Organization results:

- Each Health Center has a effectively functioning Management Committee and Village Support Group Committee.
- 6 Health Center Committees organize monthly vaccinations for children.
- 2 Health Center Committees selected 197 Village Health Volunteers to implement the nutritional program for under-five children and pregnant and lactating mothers in 50 villages.
- 2 Health Committees with 197 VHV and HC staff (2 for each health center) carried out monthly child growth monitoring and food distribution to the beneficiaries of the MCH program in 50 villages.
- 197 Village Health Volunteers monitored child growth of 12,481 under-five children monthly and provided advice for mothers reagrding health problems.
- 197 VHV provided health education in 50 villages.

Health activity results with indicators and "impact":

More than 85% of registered under 1-year-old children have been vaccinated and more than 50% of pregnant women identified attended prenatal care and were immunized against Tetanus.

414 mosquito-nets were distributed to 185 families and appropriate education was provided.

4,948 children were weighted monthly and given access to nutritional programs.

Mother and Child Nutrition Program, in partnership with WFP Program started in 2002.



At the end of 2005, moderate malnutrition has been reduced from 55.5% to 28% and severe malnutrition was reduced from 16% to 2.05%.

Underweight children received a monthly ration of Soy/Corn Blend for a drinking solution or cake cooking. Pregnant and lactating mothers received the ration and a rice supplement.

This program encourages home gardening of Green Leaf Vegetables by each of the families with underweight children.

Achieving behavioral changes has been a lengthy process that has now been achieved. Mothers know the importance of regular child growth and what to do when their child does not gain weight.

Food taboos have been reduced and daily food consumption has become appropriate with most meals constituting at least three of the primary food groups.

School Health Program

This program has been established in 8 schools and benefits 2279 students.

After a complete medical check-up with hemoglobin dosage, de-worming medicines and Vitamin-A distribution, the children of 8 schools received a very nutritious "bobor" (a traditional Khmer soup) daily. The soup is specially enriched with nutritious food and iron pills. This is provided weekly through the schoolteachers.



School Health Program

39 schoolteachers have been involved in the program and educated children monthly on health issues and nutrition.

At the end of the school year, children's anemia had been reduced from 59% to 15% among children from 5 to 11 years of age and from 86.8% to 37% among children from 12-14 years of age.

HIV/AIDS Awareness Program

This program has been developed and extended to 50 villages and the entire Siem Reap City to decrease the spread of HIV/AIDS through increased knowledge, healthier behavior (especially faithfulness among partners), and through safe-sex practices.

As a result of this awareness program, 162 people with HIV/AIDS went for testing and subsequently received treatment.

Successes:

- People understand the role of preventive health activities and the use health services when needed.
- The number of underweight children has been greatly reduced and the nutrition of children under-five has improved. Mothers also have health ier feeding practices.
- Schoolchildren gain health knowledge and have healthier behavior.

Problems Encountered:

Extreme poverty keeps children from attending

- school, as they have to help their parents with car ing for siblings, farming, and tending livestock. These children miss-out on education and school nutrition programs.
- Slow changes in behavior regarding HIV/AIDS (for example, prostitution being culturally accept able).

TB Awareness Program

This program has been developed and more than 244 people with Tuberculosis have been identified by the community and referred to health centers for treatment.



TB Patient

Challenges and Recommendations:

Expansion of MCH and school programs should be promoted in the coming years.

Youth clubs and puppet-shows should be encouraged, as youth respond well and are encouraged to change habits and practice safe behavior.

Gender awareness and social values promotion will have a positive impact with the youth and new generation. Children and youth are the future of Cambodia.

CASE STUDY

Vichet is a baby boy born from a very poor family in Angkor Chum district. His parents suffer from extreme poverty, like most people in Angkor Chum district.

In Angkor Chum district, people are farmers and live off production from their rice fields. However, the soil lacks adequate nutrients, and the harvest is insufficient to feed the family.

Vichet was born on the Sixteenth of December, 2004. He was the first baby of the family. His mother worked hard in the rice fields during her pregnancy, and after birth she did not have sufficient breast milk to feed her baby.

Vichet was a beneficiary of the Nutritional Program supported by WFP and implemented by Caritas Cambodia.

Through the benefit provided by the WFP food ration, which was so important for the family, Vichet's



mother attended the child growth monitoring session carried out in her village of Kok Kroul in April, 2005.

At that point, Vichet was four months old and weighed only 2.8 kg.

Caritas staff and village volunteers taught the mother to eat nutritious food, to practice good hygiene, and to feed her child regularly because she did not have much breast milk.

Vichet before joining the WFP program, and during the program.

With the assistance of the WFP supplement, her health improved, as did her milk production. Every month, the baby's weight was measured, and every month the child gained weight.

Now 13 months of old, Vichet is very healthy and weighs in at 7.5 kg. Vichet continues to benefit from the food supplement and comes regularly to the growth monitoring session while his mother attends the education program. His parents were very thankful towards the WFP and to Caritas for their child's survival. They will never forget the support provided to them by both WFP and Caritas!

HOME BASED CARE PROGRAM AND HIV NETWORK FOR PEOPLE LIVING WITH HIV/AIDS

CARITAS CAMBODIA started its Home Care Program for PLWHA in Siem Reap in January 2001 at the request by the MOH to assist them in the struggle against the new threat to the health of Cambodian people.

In November 2002, the arrival of ARV (Anti-Retro-Viral therapy) at the provincial level completely changed the scope of the program and allowed people access to treatment and for a majority of them a chance to go back to work.

"Community Based Home Care" for people with HIV/AIDS has been the first strategy chosen by Caritas to address these issues and bring significant impact on the Siem Reap AIDS situation.

The second strategy has been the establishment of a PLHA Network through the formation of "support groups" and the linkage of these groups to form a Provincial PLHA Network in partnership with other PLHA support groups.

Our Response and its Achievements in the year 2005:

1. Home Based Care: the home care team performed 12,173 visits to 560 families in the year 2005.

- 372 new cases have been admitted to the HBC program of which 337 were adults confirmed HIV positive and 35 were other chronic patients.
- 63 people died of AIDS, although the death rate is steadily declining since the
- 195 new people are receiving ARV treatment, and 476 people were already on ARV.
- There has been an average of 25 to 30 new cases per month and a caseload average of 560 families.
- 775 children remained highly suspect of being HIV positive, of which 410 have not yet been tested.
- 62 children are presently HIV positive and 23 are on ARV.

From the new HIV/AIDS cases in 2005, 55% are housewives contaminated by their husbands! After housewives, newborn babies have becomes the second highest-risk group to contract HIV.

- 30% of the HIV/AIDS patients have developed tuberculosis and have been treated at the provincial hospital with Caritas support for food and psycho-social services.
- Socio-economic problems of the people and their families are being addressed through:
 - Loans to start small businesses: 63 new families received loans, while a total of 177 families are receiving on-going loans.
 - Welfare in kind, such as food and nutritional supplement, is given to destitute more than 250 destitute families per month in partnership with WFP.
- 75 children of families affected by HIV/AIDS received special support to enable them to continue to go to school. The support was provided in the form of food for the family and loans for income generation activities.
- 35 chronic patients received home based care services.

2. "Support groups" and HIV Network:

- 10 support groups for PLHA are organized and chaired by 3 "Peer Educators" who are themselves HIV positive.

At these meetings, people learn more about their disease as well as counseling skills to enable them to help peers in their village, community, and society.

Topics such as Rights of PLHA, Stigma and Discrimination issues are also discussed and special speakers are invited on request.

- PLHA Volunteers are also joining our program and helping with HIV/AIDS education sessions in their own villages. Home visits our PLHA are done to speak to women about their rights to negotiate safe sex with their husbands.
- A Provincial Network for PLHA people is emerging and is built of the various support groups" formed by the PLHA themselves with NGO support.

3. A small "Handicraft Program" has been developed for "marginalized women" so that they have equal opportunities to make a living

A workshop on hand made artificial flowers was developed by Caritas to provide craft skills to poor women. An average of 8 to 10 women join together and make handicrafts for sale to tourists or wholesalers from various Siem Reap markets.

They are able to make a profit of \$1 per person per day, which is the minimum for daily survival. As they come, cook, eat, and work together, these activities also support good mental health and personal well-being. This group is also functioning as a "self-help group" where problems are discussed, and life skills and safe behavior are learned.

Success and Impact of the program:

With the arrival of ARV, we noticed that the "comprehensive home care program" was essential, especially in the socio-economic component, as many poor people do not have access to these drugs if there is no one to assist them in the first stage. After one-year of support, most of the people are autonomous and receive treatment on their own.

Because of the frequent visits of our HBC team, we have noticed less discrimination and fear amongst people affected by the disease, their families, and their communities.

Health education and informal discussion with relatives and neighbors have raised awareness and understanding of the disease.

Gradually, we can talk more openly about the disease without taboo.

The development of 'support groups' has been very successful and their impact signicant as people help themselves to be 'adherent' to treatment and help their 'peers' in the community.

Difficulties and challenges:

- It seems that some people still do not realize the severity of the disease and tend to go for testing too late, while they are already in late stages and the mortality rate is high.
- Others are still not protecting themselves or others by using condoms every time they have sex.
- While family response to HIV/AIDS is very good, community response is still insufficient with people volunteering themselves to educate the community and take part in the large prevention campaigns.

Conclusions:

- The new ARV program is very challenging as it is a long-term program. It requires strict compliance on the part of the participants and sufficient income to enable people to go on time to refill their drugs and return to their work, thus ensuring continued schooling for their children.
- More expertise in micro-finance, micro-enterprise

development, and vocational training is required to help people with long-term rehabilitation.

- The HIV Network is another priority for the sustainability of the program, autonomy of the people living with HIV/AIDS, and building a new society free from AIDS and the 'stigma' associated with the disease, a society where people's rights are respected and solidarity promoted. Strengthening this HIV Network is a very important goal over the coming years.

MOM and **Keo Deth**

Mom, 24-years-old, was discovered by the Home Care Team in a very poor rented room she was sharing with another friend named Keodeth.



Mom before and Keo Deth

Both were sex workers in the border town of Poipet, a town well known for its casinos, bars and karaoke. Mom's parents died when she was a child. And Mom was subsequently sold by her grandmother, and forced to turn to prostitution for survival.

After Mom and her friend contracted HIV, they traveled to Siem Reap to seek assistance, and ended up in the small rented room. A friend of Mom's mother, also living with them, aged and handicapped in her left arm, was begging at the market to help pay for the room and to feed the three of them. Inevitably, the money ran out.

Informed of their desperate situation by concerned neighbors, Caritas staff accepted them into the Home Care Program.



Mom after

Caritas to pay the rent for the small room, and referred them to the chronic disease clinic for HIV/AIDS. Mom was weighed in March 2005, and measured 28 kg. She was very depressed, and in need of intensive feeding.

As Caritas developed a crafts workshop (mainly as occupational therapy), and Mom and her friend were invited to come to learn to make handicrafts to help improve their standard of living.



Keo Deth after

Community Development Program

Background information:

During the reporting period, Caritas Cambodia worked in 13 villages in 5 communes of Angkor Thom, Angkor Chum and Puok districts. The total number of target families was 1,465 with a total population of 7,093 of which 3,908 were female. There were 13 Village Development Associations have been formed with 987 members. 57 units were established in this target community.

Major Activities Undertaken

1. Capacity Building at the grass roots level

- Training on Village Needs Assessment
- Training on Role and Responsibility
- Training on Monitoring and Evaluation
- Training on Financial Management
- Training on Leadership Skills
- Training on Animation
- Training on Micro-Enterprise Development
- Monthly Meetings of VDA and Unit Members
- Exposure Visits



2. Training Farmers on Agricultural Technique

Training on Wet-Season Rice Cultivation

- Training on Home Gardening
- Training on Animal Husbandry
- Training on Modern Rice Varieties
- Training on Compost Making
- Training on Effective Micro-organism (EM)

3. Support to Farmers

- 14 key farmers were provided support for vegetable growing
- 10 key farmers were provided support for chicken raising



- 2 key farmers were provided support for rice farming demonstration
- 154 farmers were provided support to carry out home gardening activities
- 99 farmers were provided support for wet-season rice cultivation
- 30 families were provided support for fish ponds
- 2 families were provided support for fruit tree nurseries
- 2 water pumps
- 1 family was provided support to start Micro-Enterprise Development activities
- 14 families were provided support to start income generation activities

4. Non-Formal Education

5. Advocacy

Result of activities:

473 persons participated in the capacity building trainings of which 194 were women.

They acquired skills and knowledge in assessing the needs, organizing and managing monthly meeting, learned to maintain documents and report, increase their ability in solving community problems, planning, monitoring and evaluation of their activities and expressed their willingness to take up more and more



responsibilities in community development works. 708 farmers participated in sustainable agricultural training, of which 297 were women. They increased their skills in agriculture, animal husbandry, home gardening, integrated farming system and organic rice farming. The farmers understood the negative impact of GMO and chemical fertilizers.

10 adults of which 8 were female are able to read, write and calculate. The quality of life of the target community has been improved in all aspects of their lives.

Problems Encountered

- Some VDA management committee members were not plays their role actively.
- The process for developing Village Development Associations was delayed due to some VDA members migrating from village in searching of work.
- The market for farm produce was limited.



Challenges

- Strategy for phase out from target community
- Collaboration with government and various NGOs in the target community to establish water sources.
- Interest farmers to engage home gardening activities, integrated farming systems, organic rice farming.
- Encourage women to participate in decision making process
- Strengthening the capacity of the Village Development Association Management Committee to take over the responsibilities of their own communities.
- Encourage farmers to play the role of middleman for buying and selling of farmers' produce.

Kandal

Community Development Program

Background Information

Caritas was working in 15 villages in 5 communes of Boeung Tumpun within the Phnom Penh Municipality, Sarikakeo and Arei Ksath in Lovea Em district, and Roluos and Spean Thmor in Kandal Steung district in Kandal province. The total number of target families was 955, with a total population of 4,913 (of which 2,554 were female).

Activities Undertaken

1. Formation of People's Organization Structures Units and Village Development association were formed within all target communities. Unit representatives were elected on the concept of gender sensitivity, one male and one female.

2. Capacity Building of VDAs

Project members and VDA management committee were capacitated on various subjects:

- Training on Financial Management
- Training on Needs Assessment
- Training Project planning
- Training on Roles and Functions
- Training / Exposure Program:
- Monthly Meetings of VDA MC Members

3. Training on Agriculture Technique:

- Training on EM liquids, EM catalytic solution, and botanical insecticide production.
- Training on wood vinegar production
- Home Gardening:



4. Non-Formal Education

5. Income Generation Program:

- Small Business
- Handicraft
- Micro-Enterprise Development:
- **Duck Rearing**
- Chicken Rearing
- Pig Rearing

6. Savings Mobilization

7. Advocacy

8. Rehabilitation and Construction of Infrastructure

- Tube Well Installation:
- Water Pump Station Installation:
- Water Pump Machines

Result of activities:

204 members from 15 village development associations participated in the capacity building trainings and increase their capacity in understanding community participation in development, needs assessment, role and function of village development association. They all understood the importance of collective decision making, problem solving by the community it self. They also realized the importance of documents and records for other purposes. The acquired skills and knowledge trough various trainings enabling them to increase their ability to solve community problems by planning, monitoring and evaluation of their activities.

The small and marginalized farmers that participated in agriculture development trainings are able to understand the negative impact of GMO and pesticides. Therefore, farmers are now engaging home gardening activities, vegetable growing, integrated farming systems and organic rice farming for enabling them to use their land and additional income for their family.

20 women are able to read, write and calculate. 39 families started small business activities to generate their daily income. 3 families are engaging to handicraft activities. One VDA of Preah Thiet village has been conducted micro enterprise. 16 families are rearing duck, 10 families rearing chicken and 12 families are rearing pigs.



955 families in 15 villages of 5 communes of Mean Chey, Lovea Em and Kandal Steung districts were able to mobilize their savings in the amount of 31,221,000 Riels (USD 7,614)

13 tube wells have been installed in 6 villages to support agriculture production activities. One water pump station was installed in Porthom village. Six villages in three communes of the Arei Ksath, Sarikakeo and Peam Okgna Ong in Lovea Em district are benefiting from this station.

12 water pump machines were provided to the VDAs of 7 villages. 152.93ha of paddy field were brought under cultivation.



Impact of the program:

- The target communities have become aware of issues effecting their development and what keep them in poverty.
- The target communities have realized the value of collective action.
- The have secure their food supply for 10 months.
- Farmers are aware of the dangerous of chemical fertilizers and pesticides application.
- Environmental issue and ecology were protected.

YOUTH DEVELOPMENT PROGRAM

Background Information

Caritas Cambodia has trained 1,344 young boys and girls on various vocational skills over the past 15 years.

During the year 2005, a total number of 103 youths were trained on the following trades:

The youth development program was started in 1992. The program aims to provide value-based technical skills training to rural school-dropout youth that migrate to urban and rural areas in search of employment. In the beginning, the program started with only 98 youths. As of the date of this report, 1,344 youths

No. of Youths Trained in Various Trades over the Past 13 Years:

Year	# Trainees	Girls	Boys
1992	98	41	57
1993	132	23	109
1994	34	5	29
1995	79	28	51
1996	50	6	44
1997	62	10	52
1998	40	10	30
1999	108	11	97
2000	129	17	112
2001	145	18	127
2002	158	20	138
2003	101	30	71

105

103

1,344

have been provided with skills training in various trades.

Caritas Cambodia has been providing support to the school dropout youths by providing opportunities for obtaining technical skills in various trades, which has helped these young boys and girls find self-employment and employment with companies, the government, and NGOs. The skills training and values education has been provided through the formation of a youth club. This group serves as a forum to meet, discuss, find employment opportunities for the youths, conduct planning for take-up activities, as well as organize training on social issues.

Types of skills provided over the past 13 years:

Types of Skills	# Trainees
1. Light, heavy engine repairing	235
2. Beauty parlor	107
3. Repairing Electricity	135
4. Repairing Electronics	166
5, Repairing Auto-body	42
6, Repairing sewing machine	84
7. Repairing air-condition	130
8. Repairing computer	5
9. Repairing Motorcycles	27
10. Agricultural skill	5
11. Driving car, Truck	14
12. Secretarial Skill	300
13. Jewelry +. Goldsmith	10
15. Sculptor	21
16. Painting	16
17.Taloring skill	23
18.Computer Science	16
19.Community Dynamic Course	8
Total	1.344

Activities Undertaken and Achievements

During the year 2005, a total of 103 youths (of which 21 were women) were trained in the following trades.

75

82

1,074

Types of Technical Skill Training for the year 2005	Nº trainees	
Secretarial Skills (Administration and Computers)	10	
Cosmetology	10	
Electronic Maintenance	9	
Electrical Equipment (Repair and Installation)	11	
Light and Heavy Engine Repair	9	
Electrical Sewing Machine Repair	5	
Air-conditioning Repair	17	
Auto-body Repair and Welding	8	
Computer Science (Basic Computing / Repair / Installation)	16	
Community Dynamics Course	8	
Total	103	

30

21

270

2004

2005

Total



Youth Club for Development:

The trainees formed a Youth Club; the objective was to bring together all the youths who have obtained skills during the past few years, and also to include other youths from the program area. The club is a place where they can share their experiences and discuss the roles and functions of youths in the community and society as a whole. These youths also participated in providing services and activities that are of immense use for the community and the society. The purpose of this Youth Club was mainly to organize the youth and bring them together so that they could contribute to the well being of the youth, community, and society as a whole.

The youths not only acquired skills training, but also learned about their roles and responsibilities in the family, community, and society. The youths were taught morality and values. Seminars and workshops were organized for the youths on various topics. This helped improve their attitudes and has helped them to gain self-confidence. They have hope for the future because they now realize that even if they could not





finish their school education, they can still be useful to their families, communities, and society. The youths organized various activities which provide services to the poor and marginalized. They also organized various activities to preserve the natural environment, raise funds to help poor youths, and provide volunteer services to people in the community.

The Youth Club organized the following training and workshops during the year:

- Advocacy on Women's Rights Day, International No Pesticide Day, International Environment Day.
- Workshop on Youth and Development.
- Youth Fellowship.
- Youth Group Meeting and Sharing.
- Youth Exhibition.
- Awareness training on HIV/AIDS, home visits to HIV/AIDS victims.
- Home visits to the youth trainees.
- Mobile Library for the youth trainees.
- Establishment of a Youth Savings Fund.



Future Focus:

- Providing technical and professional skills training in different trades.
- Provide value education to the youth.
- Strengthen the roles and responsibilities of the youth club for development.
- Enlarge accommodation (hostel) to board trainees whose families are very poor to enable them to

- attend the training courses.
- Promote cultural activities (Traditional Cambodian Art) among youth and their families.
- Develop and network between youths who are in training and those who have completed training with employment.
- Encourage youth to become an instrument of peace, justice, hope and the light to build the nation and nurture positive human values.

MONITORING TABLE OF YOUTHS WHO HAS COMPLETED THE TRAINING SKILL **OVRE THER PAST TEN YEARS 1992-2005**

No.	Types of Skills	Self- employed	Employed	Looking for Job	Employed, not using Skill	Practicum	Continue Training	Total
1	Tailoring /sewing skill	4	16	0	3	0	0	23
2	Painting	5	9	0	0	0	2	16
3	Gold Smithy work	3	0	0	3	0	0	6
4	Sculpture	4	13	0	4	0	0	21
5	Secretarial/English language	1	295	0	0	4	0	300
6	Electronics	24	115	0	16	11	0	166
7	Agriculture skill	0	3	0	2	0	0	5
8	Jewelry Making	3	1	0	0	0	0	4
9	Car Driving	0	5	0	0	0	0	5
10	Truck driving	0	5	0	4	0	0	9
11	Motor Repairing	5	15	0	7	0	0	27
12	Engine repairing	14	209	0	12	0	0	235
13	Auto body repairing	3	34	0	2	3	0	42
14	Air conditioner repairing	30	88	0	8	4	0	130
15	Hair-dressing	26	76	0	3	2	0	107
16	Computer repairing	0	3	0	2	0	0	5
17	Electrical Equipment repair	7	114	0	8	6	0	135
18	Electrical sewing machine	0	72	0	7	5	0	84
19	Computer Science	0	8	0	0	5	3	16
20	Community Dynamic Course	0	1	0	3	4	0	8
	Grand total:	129	1,082	0	84	44	5	1,344

Battambang

RATTANAK MONDUL COMMUNITY DEVELOPMENT PROGRAM

aritas Cambodia has been working to fulfill its goals in 11 villages of Rattanak Mondul District in Battambang Province. The program is supported through funding from MISEREOR. It provides opportunities for poor and small-scale farmers by inspiring them to engage in development work to further the prosperity of their families and communities.

Major activities undertaken during 2005

Capacity building of grassroots level people's organizations:

Training on project assessment:

Training on conducting surveys:

Conducting survey in 2 new villages:

Training on community organizing:

Training on leadership:

Training on micro-credit:

Training on project planning:



Raising awareness on social action:

Education on human rights: Education on children's rights: Education on women's rights: Campaign on the natural environment:

Non-formal education:

Non-formal education classes were organized at the target villages with the objectives of mobilizing women and form their community groups. Its activities were not only focus on reading, writing, and arithmetic, but it is also offering an opportunity to learn the common problems encountered by women in the community and family. In addition, women are inspired to participate in the preservation of the natural environment through the promotion of sustainable agriculture. They also provide a means to increase the value of women in the community through the discussion of women's problems.

Organic farming activities

Small farmers were motivated to carry out organic farming activities trough conducted various trainings and workshops on Sustainable agricultural techniques.

- Diversified farming system:
- Exposure visits to organic farms:



- Training on organic rice farming:
- Training on organic vegetable growing:
- Workshop on IPM:
- Workshop on sustainable agricultural practices:
- Veterinarian training:

Home Gardening Activities and Organic Rice Farming:

Exposure visit to demonstration farms was organized for 50 small-scale farmers from 9 villages before financial assistant was provided. As a result, each farmer



grew lettuce, trorkuon, mint, garlic, shallots, arum long gourds, string beans, eggplants, and mustard greens. Therefore, household food sufficiency was improved, quality of health was enhanced, and the environment around the house was cleaner. Similarly to this, the key farmers were adopted the SRI method. They are able to demonstrate to other farmers on their successful use of the SRI method. For application of this method, farmers are able to increase their yield from 1.8 tones per hectare to 3.7 tones per hectare.

Major achievements and its impacts

789 members in which 425 women from 11 villages participated in various trainings and workshops on people's organizations development and awareness raising on social action. They have increased their capacity in understanding of community participation, community projects assessment, saving based mobilization and credit, leadership skills, and are able to manage their own community assets. Most of the farmers have adapted the principle of sustainable agriculture and have reduced the chemical fertilizers and pesticides for agriculture production.

The Village Development Associations are able to identified needs, and plan, implement and evaluate their own community development activities. They are also being able to solve problems at the local level. The incomes of the farming activities have been enhanced and people free from moneylenders. The numbers of women participation in the programs have been increasing. The target communities have freedom to express their opinion and concerns. The target community is now acting together as they have realized the value of collective effort. The qualities of lives of the target community have been improved in all aspects of their lives.

BOVEL MONGKOL BOREY COMMUNITY DEVELOPMENT PROGRAM

During the year 2005, Caritas continued strengthening its activities in 8 villages and started new activities in 2 villages of Bovel-Mongkol Borey District, Battambang Province, Supported by OBOS.

There are ten Village Development Associations in Bovel-Mongkol Borey District. They are divided into 44 Units and managed by 88 management committee members, of which 58 are women. There are a total of 604 beneficiaries involved in the project implementation activities, of which 336 are women.

Activities undertaken during the year

Capacity building of grassroots level people's organizations

Training on monitoring and evaluation

Training on project assessment

Training on community organizing and animation

Training on leadership

Training on project planning

Raising awareness on social action:

Workshop on environment campaign

Workshop on IPM awareness and GMO issues

Women's rights day

Workshop on farmer's conference

Exposure visit on integrated farming system

: 30 participants (15 women)

: 260 participants (130 women)

: 30 participants (15 women)

: 30 participants (15 women)

: 30 participants (15 women)

: 50 participants (25 women)

: 32 participants (16 women)

: 100 participants (50 women)

: 32 participants (16 women)

: 16 participants (8 women)

Non-formal education

- 5 adult literacy classes were started at the commu nity level, covering subjects including reading, writing, and arithmetic. The classes provide special emphasis on the education of women.
- Education on women's rights, domestic vio lence, and child trafficking.
- Sustainable agriculture and integrated farming activities were promoted among women in the adult literacy classes. These activities included education and the actual practice of home gardening.



Provided financial support to small farmers to carry out organic farming

Training on agricultural techniques

Raising pigs and chickens : 24 participants (12 women) Raising fish : 18 participants (9 women) Raising pigs : 32 participants (16 women) Compost making : 37 participants (19 women)

Home gardening

Chicken raising and vegetable farming : 40 participants (30 women)

Integrated farming system

Pig raising, banana and vegetable farming : 102 participants (90 women) Fish farming and vegetable farming : 17 participants (10 women) Rice farming and fish farming : 10 participants (5 women) Cow husbandry and fruit tree planting : 20 participants (10 women)

Organic rice farming system

Supported 28 small farmers to practice organic rice farming by using organic manure to improve soil fer tility and control rice crop with IPM system. 14 participants were women.

Supported agricultural input to start agricultural activities

Constructed 12 drilled wells

Provided 2 water pumps

BOVEL MONGKOL BOREI COMMUNITY DEVELOPMENT PROGRAM

This program covered 22 villages with 12 VDAs are supported by APHD

Activities undertaken during the year:

Capacity building of grassroots level people's organizations:

Training on monitoring and evaluation : 60 participants (30 women) Training on organizing and animation : 60 participants (30 women) Training on project planning : 60 participants (30 women) Training on project assessment : 362 participants (30 women)

Raising awareness on social action:

Workshop on environmental awareness campaign : 100 participants (50 women) Workshop on IPM awareness and GMO issues : 64 participants (32 women) Tree planting day celebration : 250 participants (150 women) Exposure visit on IFS for farmers : 32 participants (16 women)

Non-formal education:

- 13 adult literacy classes were started at the community level. The classes provide special emphasis for educating women. 130 female students participated in the classes.
- Education on women's rights, domestic violence, and child trafficking was provided for 130 female par ticipants.
- Sustainable agriculture and integrated farming activities were promoted amongst women in the adult lit eracy classes. These activities included education and the actual practice of home gardening.

Financial support for small farmers to conduct organic farming activities

It is necessary that Caritas Cambodia has conducted trainings to the target communities on various topics before providing financial support for engaging integrated farming systems by utilization of organic fertilizers. The trainings had been conducted are identified below:

Animal husbandry : 80 participants (40 women) Fish rearing : 36 participants (9 women) Fruit tree grafting : 24 participants (12 women) : 58 participants (29 women) Compost production

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Home Gardening and diversify faming Activities:

Home gardening remains an important project for enhancing the food security of farmers and providing a pleasant environment around their houses. The implication of this activities is to inspire the farmers from the target community to involve home gardening activities by replicating diversify farming system at the back yard of the farmers.

The 35 years old farming family, Mr. Ty Nar has been



living in Tnot village was engaged this project activity since the beginning of project started. As a result of his dedication, his family enjoys better food security and increased daily income from the sale of produce.

In 2005, there were 80 small farmers, of which 49 were women were starting home gardening activities and they are able to meet food for household consumption and sell the produce as an additional income source. Similarly to this, 298 farmers, of which 230 were women, practiced integrated farming and sustainable agriculture by growing banana trees on 0.02 hectare (each family) of cultivated land to gave pig feed with additional income of 100,000riel (~\$25 USD) per month.

The main achievements of this activity were the education and mobilization of farmers to change their attitude form the constancy of traditional way of mono-cropping dependency in order to adopt the multiple cropping by applying of organic farming systems.

Organic Rice Farming:

76 small-scale farmers, of which 38 were female, participated in organic rice farming activities.

- 0.5 hectare of the paddy field was cultivated by each farmer
- The leaves and animal waste were collected to make compost for improving land fertility. Technically, 1000kg of organic fertilizer was used for one hectare of paddy field.

It was indicated that the organic rice farming helped farmers to increase rice commodity form 3 tones per hectare to 4 tones per hectare. It is necessary that the organic farming required more time to makes compost. However the farmers spent less money because they did not need to purchase chemicals fertilizers and pesticides, while they also received a higher rice yield.

Experience of small Farmer' Life in Organic Farming Practice

The majority of the poor, small-scale farmers in Cambodia have small landholdings for their farming activities. As a result, food production capabilities are limited and food security is low. Training of the farmers and promotion of sustainable agricultural practices are necessary to increase food security, and also demonstrate the success of these practices to other farmers in the community. Caritas works to encourage and support organic rice farming and integrated crop diversification for home gardening.



Mr. Heng Ngea, a 21-year-old farmer, lives in Svay Sor village. He expressed his excitement because his family's daily income was increasing. "At this time of year in the past, I was migrating to Thailand to work as a laborer to support my family. My wife was very concerned because I was illegally residing in Thailand. The wages were sometimes too small to support my family. Now my family has a great opportunity by becoming a project member." He added, "In the past, I never received support from any source, but now I am very happy and I am proud of what my family has done under the guidance and support from Caritas Cambodia and OBOS in Korea. As a result, my family has good food security and receives additional household income from produce farmed through multi-cropping techniques."

Ms. Chhorn Chheak, a farmer in Pou village, shared her enthusiasm for the project activities. "Before joining the project," she said, "I did not have enough capital to do farming activities. I live with my mother who is very old, but she can still help me to weed the farm. After becoming a member of the Village Development Association, I observed the ability of poor farmers to mobilize their savings and provide inter-loaning among group-members to support the preparation of land to grow vegetables and cultivate rice. We no longer go into debt to purchase chemical fertilizers, because Caritas staff taught us to make compost and use it for organic farming activities."



Another farmer said, "My name is Chea Nonn, I am a farmer in Svay Sor village. I would like to express my gratitude to OBOS in Korea, which supports Cambodian farmers through Caritas Cambodia. Farmers in my community have found the technical assistance provided by Caritas staff for sustainable agricultural practices and rice intensification systems very useful. Before practicing sustainable agriculture myself, I did not believe in it. But after actual practice, I was amazed at how high the rice yield was. This success increased my confidence, and I wish to continue these activities and share my experiences with other farmers to encourage them to conduct organic rice farming and sustainable agriculture activities."

Samlot Community Development Program

Caritas Cambodia has been working in Samlot District after the latest integration of Khmer Rough into the mainstream of the government of Cambodia in 2001. The majority of the populations in this area are the refugees and the victims of landmines. Our program intervention in this area was to promote the sustainable agricultural practices. Over the year, Women have played an important role in the Village Development Association's structure. As of now, there are 627 families of small farmers were benefited from the program activities. It was also indicated that 9 Village Development Associations were formed and among of the VDA Management Committee members, 33 are women.

Activities undertaken during the year

Capacity Building

- Training on animation and community organizing
- Training on leadership
- Training on project planning
- Training on Participatory Learning and Action.
- Workshop on project assessment

Financial support for economic development programs

- Income generation activities
- Mutual help groups
- Sustainable agriculture Activities
- Development of key farmers on model farms
- Demonstration plot on organic rice farming

- Organic vegetable growing
- Workshop on IPM
- Workshop on sustainable agricultural practice
- Training in veterinary skills

Advocacy and campaign

60 farmers, including 34 women, from 9 villages attended a farmer conference. Farmers discussed sustainable agricultural activities they had implemented and stressed to the government the need to strictly execute the law to stop deforestation. Farmers demonstrated their success with organic farming and requested that other farmers stop their utilization of chemical fertilizers and pesticides.





Farmers from 11 countries in South Asia and South East Asia participated in an exposure trip to observe key farmers and an exhibition of farming produce and EM and composting techniques in Orumchek Kraom village, Samlot district.

Major achievements

490 farmers from 9 villages participated in various trainings and acquired new skills and knowledge in community organizing, project planning, monitoring and evaluation. The have increased their ability to manage the projects in sufficiency manner.

263 farmers have been engaging in the family economic development activities. These activities enabled the target community to actively accelerate in income for their household family.

The program impacts

Farmers mobilized the organic manure and compost to fertile their agricultural land. They are now able to cultivate organic rice with harvests twice a year and it was also increased rice yield from 4 to 5 tones per hectare.

The target community has become aware of issues affecting their development and what keep them in poverty. Women are empowered and they are now becoming the key importance instrument to be played for concrete social changes.





Kompong Cham

Community Development Program

Background Information

In 2005, Caritas Cambodia has continued its development activities in 16 villages and expanded the target community in 4 new villages. The coverage area would be 20 villages, 5 Communes, 3 Districts of Krochhmar, Ou Raing Ouv and Dambe of Kompong Cham Provinces. Among 2,141 families of the target group, 1,089 families were reached out. 16 Village Development Associations (VDAs) were formed with 57 units, and 114 units elected representatives of which 57 were female.

Activities & Achievements

Grassroots People's Institutions:

Village Development Associations were formed within 16 villages. VDA management committee have been playing very important and significant role to address the common concern at the community level. During the year, people were interested to participate in the process of planning, implementing, and evaluation of their own development activities. The VDA executive committee has also developed a sense of solidarity among themselves and involved grassroots people in the collective decision making process.

Capacity Building of VDA Leaders:

A workshop on the role and function of the VDAs was conducted for 57 VDA leaders from 16 villages. 141 VDA members from 16 villages participated in a training program on sustainable self-help groups and micro-credit programs. 114 VDA leaders from 16 villages participated in a training on financial management, minute taking, and report writing. 78 VDA leaders from 16 villages were trained in project planning, monitoring, and evaluation. 178 VDA members from 9 villages participated in a workshop on the roles and functions of women in the family and society. 141 VDA members from 4 villages participated in a workshop on development and participation concepts.

Quarterly VDA meetings were held at the unit level in all villages within the target area. During these meetings a variety of subjects were discussed: Decisions making from previous meetings were presented; Savings mobilization of the members and details on the income and expenditure of the VDA were discussed; Activities implemented at the unit level and achievements, constrains were discussed. The Village plans were developed for the next period and implementation methods were discussed.

Lastly, each member reflected and give feedback to the major constrains encountered and recommended for future direction. Inter-village exposure visits were organized to facilitate the process of sharing experiences with one another. VDA leaders and VDA mem-



bers were able to maintain a good rapport at the community based.

The new skills and knowledge have acquired from various trainings and workshops were enabling the VDS's leaders and VDA's members to increase the ability in solving community problems, planning, monitoring, and evaluation of their development activities. The VDA management committee has expressed their willingness to take up more and more responsibilities in community development works.



Support for Agricultural Development

Agriculture Training Technique:

183 farmers from 12 villages were trained in compost making, wood vinegar production, and EM. The numbers of 25 farmers from 5 villages were trained in mushroom growing and 27 farmers from 6 villages were trained on livestock and poultry production. 27 farmers were trained as village veterinarian volunteers. 72 farmers from 6 villages were trained in Soya bean cultivation. 15 farmers from 4 villages were trained in cucumber cultivation. 42 farmers from 8 villages were trained in watermelon cultivation techniques. And 81 farmers from 12 villages were trained on the application of traditional preventive measures against pesticides.

As the result of various trainings and workshops, the farmers were increased their skills in agriculture techniques and demonstrate home gardening, animal husbandry, integrated farming systems, and organic rice farming. Consequently, the target community was able to secure food for 10 months.



Saving Mobilization:

1,005 families from 16 villages deposited their money to the savings programs in monthly basis. The Village Development Associations were capable to mobilize and manage the local resources. The VDAs created the rule and decisions making in regarding to the saving and loan utilization amongst their members. In emergency case, and other major concerns which were raised by members, these funds were also available to address and support members. As a result of these savings activities, the majority of project members have no longer needed to borrow money from moneylenders. The poor were engaged in income generation activities to raise their family income by optimal use of saving mobilization. Hence, the poor and marginalized are now free from debt.

Community's Rice seed Bank:

A Rice seed bank in the target villages is one of the key components to accelerate the community improvement for food security among their members. Each farming family has access to seed for rice cultivation. This facility has been helping their members to remain out of debt and exploitation of moneylenders. As of 2005, there are 16 of rice seed banks with its members of 1,412 families have been established within 16 villages.

Health and Sanitation:

With the objective of preventive rather than curative, therefore Caritas has provided 27 hand pumps for 141 families and 11 wells to 57 families to get access to safe drinking water. As a result of this, people feel confident in using safe drinking water and the diseases cause by contaminated drinking water were decreased. Small farmers created home gardening for their food consumption.



Infrastructure Development:

A 250m long canal in 2 villages of Trapeng Kandoal and Chroy Phaang was rehabilitated with the participation of 58 people, of which 19 were women. 1 water gate in the Trach Chrum villages was rehabilitated for the purpose of irrigation. A 21 meters long dam was rehabilitated with the participation of 23 people. 4 roads, with the total length 2500 meters in Chroy Phaang, Chrey Sokhum and Kdol Krom have rehabilitated with the participation of 463 people. These activities enable them to built self-confidence and help them to change their attitude.

Constraints Encountered During the Implementation of the Program:



- The security situation deteriorated due to poor rice harvest. Banditry and theft has increased along the route to the program villages. Staff safety has been a concern.
- Some of the VDA members do not share their experiences and do not participate in developmen tal activities due to recent political rivalry between different parties.
- Seasonal migrants from the village increased due to lack of farm work in their respective village.
- Soya bean harvest was better compared to previous years, but farmers were not able to obtain good prices for the product.

Future Direction

- Micro-enterprise development will be introduced at village based
- Water resource Development
- Marketing for the farm products will be considered
- The capacity of newly VDA establishment has to be strengthen
- Staff capacity building will be more intensive.

Socio-Economic

Development of Leprosy Inflicted People

Background Information:

The Socio-Economic Develop-ment Program of Leprosy Inflicted People covered the village of Trang in the Mean Commune of Prey Chhor district, in Kompong Cham province. The total number of target families was 103, with a population of 506. A Village Development Association has been formed in the program village and this program is focused upon rebuilding hope, improving lives of the leprosy community through development, strengthening capacity within the community, and promoting sustainable agriculture practices.

Major Activities undertaken

1-Community empowerment

- 5 units have been formed.
- 10 unit representatives were elected in a democratic fashion with gender balance.
- A total VDA membership is 506.
- Monthly meetings were conducted regularly by the Unit Representatives and VDA level. The meetings were discussed on project activities, monthly deposit and inter loaning, livelihood activities, and its member's economic status.
- Training on the role and function of the VDA was organized for 10 VDA Management Committee members, of which 5 were female.



- Workshops on VDA by-laws were organized for 9 participants, of which 4 were female.
- Trainings on bookkeeping for VDA manage ment committee members were organized at the target village based with 10 participants of which 5 were female.
- Trainings and workshop on Mutual Help Group concept were organized for 103 participants.
- Trainings on saving schemes were conducted for 103 participants.
- Workshop on Micro Credit Policy was organized for 103 participants.
- Training on Gender Issues was organized for 47 participants, of which 29 were female.

2-Agriculture Development Activities

Training of Farmers on Agricultural Technique

- Vegetable growing trainings were conducted for 20 participants, of which 6 were female.
- Training on rice production techniques was organ ized for 20 participants, of which 8 were female.
- Training on animal husbandry and poultry produc tion was conducted for 20 participants, of which 8 were female.
- Training on compost making, wood vinegar pro duction, EM and field actual practice were organ ized for 19 participants, of which 7 were female.
- Trainings on home gardening techniques were con ducted for 99 participants.
- Training on botanical and alternative pesticides were conducted for 20 participants, of which 9 were female.

3-Financial Assistance to initiate livelihood activities

- 99 small farmers were provided financial support to carry out Home Gardening activities.
- Compost making equipments were provided to 21
- 5 hand pumps were constructed for 37 beneficiar ies, for supply as drinking water and home garden ing activities.

• Dry-season rice cultivation was motivated 57 small farmers to initiate.



- Fishing Activities were encouraged 3 farmers to initiate and generate daily income.
- 18 farmers were provided financial support for Small Business Activities Starting.
- Barbering and tailoring were encouraged 2 farmers to engage.
- 16 families were provided financial support for breaking and selling stone.
- 7 families were provided financial support for buy ing and selling recyclables.

4-Staff Capacity Building:

- Monthly Planning, monitoring, Reporting and evaluation were conducted to all staff and Program Manager.
- 1 Staff was sent to participate in Training on Wood Vinegar Production at Battambang Province
- Sharing experiences and success stories



Major achievements:

As a result of various trainings and workshops, the Village Development Association of Trang village has been able to mobilize the resources in the village through savings based activities. A total collected amount is 5,650,000 riel (~\$1,412.50 USD). This money was utilized for inter-loaning among the VDA members. VDA Management Committee play very crucial role in managing this saving mobilization. The terms and conditions for the usage of this money was set up by the group members such as interest rates, eligibility for borrowing, and other procedures are determined by the VDA members. Village Development Associations participated in the capacity building trainings and increased their capacity in understanding community participation in development, the role and function of village development association and managing committee, understood the importance of collective decision making, problems solving, facilitation and communication skills. The VDA members realized the value of women's participation in the development process. Most of farmers adapted to multicropping methods and reduced the use of chemical fertilizers and pesticides for agriculture productions. The farmers understood the importance of integrated farming system and apply into actual practice by demonstrated their farms with many variety of vegetables, fruit tree plantation and compost making.

Constraints Encountered During the Program **Implementation**

- Some of the VDA members did not share their experiences and did not participate in developmental activities due to recent politi cal rivalry between different parties.
- Seasonal migration of people from the village increased due to a lack of farm work in the villages.
- Dependency of Caritas assistant
- Collaboration between local authorities and VDAs is still limited.

Future Direction:

- Development of water resources will be the primary focus of program activities.
- Strengthening capacity of VDA management Committee members.
- Mutual Help Group concept will be strength ened
- Staff capacity building will be more intensive.

Kompong Thom

Community Development Program

During the year, Caritas implemented programs in 24 villages, 4 communes within two districts of Kompong Svay and Steung Sen, of Kompong Thom Province. The total number of target families was 2,126, with a total population of 11,509. There are 19 Village Development Associations have been formed with 77 units were established. Genders sensitivity has been promoted through the elected unit representative. A amongst 154 unit members, there are 77 were women. The activities were planned, implemented, evaluation by VDA management committee and Unit representatives.

Activities & Achievements:

Community Empowerment

Formation of People's Organization in New Villages: Five People's Organization namely Village Development Organization (VDA) has been formed within new village of Sleng Kpuos, Ampil, Krasang Kar, Sari, and Kabel. The total numbers of units' representatives were 36 with gender equality.



Capacity Building of VDAs:

• Training on the role and functions of VDAs was organized in all 14 villages. 341 VDA office bearers and members participated in this training, of which 242 were women. As a result, VDA leaders and members understood their specific duties, roles, and functions. They realized the importance of community assets and the value of community participation. The VDA office bearers were taught to reflect upon issues and methods for seeking solutions to their problems.

- Workshop on Project Planning, Monitoring and Implementing was organized for VDA management committee members from all 14 program villages. 99 participants of which 58 were women. Through the workshop the VDA management committees were able to identify the community needs, the root cause and its affect of their lives. They are also capable to develop the plans of activities, implementation, monitoring, and Evaluation of the projects.
- Micro-Enterprise Development training was conducted for farmers from 5 villages with 165 participants. As a result most participants understood the concept and practice of small business starting. They are also able to make financial calculations such as Break-even Point, and Return on Investment.
- Create awareness on Sustainable Agriculture practice and adapted its appropriate technologies. This training was organized for 137 farmers from 14 program villages. It is necessary that farmers have understood the concept and adapted of integrated farming system, multi-cropping method and reduced in chemical fertilizers and pesticides application.
- Monthly meeting was conducted regularly for units and VDA level. The unit representatives discussed on project implementation process, saving mobilization, livelihood activities and economic status of individual members. During the meeting, Passbooks of individual member was checked and bookkeeping was also submitted to declare amongst members. As a result the community members realized the importance of working together and growing together.

Saving mobilization: The total collection of saving mobilization is 44,149,200 riel (~\$11,037 USD). This collected money has been utilizing for inter-loaning amongst VDA members. Rule and conditions were set up by the members, in term of interest rates, eligibility for borrowing, and other various procedures. The memberships recently were increased up to 2,126 families within 19 villages.

Non-Formal Education: It is necessary that the illiterate people in the garget community especially women were interested to build self-confident through various activities of literacy classes. As of now, non-formal education (NFE) was organized within 10 villages the total number of 202 participants, of which 181 were female. The schedules of activities were conducted for five days in a week, one and a half hours per day. With the help of seven trained teachers, these participants are able to read, write, and calculate.

Economic Development Program

Agriculture Development

Several trainings and workshops were organized for

- Organic rice production techniques with 371 VDA participants, of which 300 were women, from 14 villages.
- Home gardening activities with 304 VDA members from 14 villages.
- Traditional preventive measures against pests and use of botanical pesticides with 349 VDA mem bers from 14 villages.
- Sustainable Agriculture and awareness building of environment were organized for 200 farmers, of which 135 were women, from 10 villages.
- Training on Effective Micro-organic (EM) and Compost Making with 283 farmers from 16 villages.

Support to farmers:

• Home Gardening activities: 292 families from 14 villages were provided vegetable seeds to start home gardening activities. As a result, most of families had increased vegetable for consumption and food intake was also improved. This activities enabling each family to gain an extra income on average, 80,000riel (\sim \$20.00 USD) per month.



- Sugarcane production: 28 families from 6 villages were provided the support to carry out sugarcane cultivation on a total of farmland 6 hectares. Each family was able to earn in average of 3,500,000riel (~\$875.00 USD) by selling sugarcane over the oneyear period.
- Installation of water pumps: 6 water pumps were installed in three villages. The purpose of these activities is to help the disable families and women head family for getting vegetable cultivation. As a result, a total number of 33 families had easy access to irrigating of their vegetable gardens.
- Dry-season rice cultivation: 44 farming families of 4 villages were provided support to cultivate dry season rice. 41.25 hectares of abandoned land were brought under cultivation with the maximum yield of 3.5tons to 4tons per hectare. Consequently the target community was able to secure food for 11 months.
- Water pumping machine: A water pump machine was provided to ten families, under the supervision the VDA management committee in Lvea Chum village for irrigating purpose. Total areas of 4.75 hectares of farmland were brought under dry season rice cultivation. As a result, these families have increased food security for their household.

Income Generation Activities:

• Non-land based activities: 22 families in 2 villages received financial support to carry out small business activities such as running grocery stores, whole and retail sell, buying and selling fishes. These activities were enabling them to generate additional daily income of 3,000riel to 5,000riel, equal USD0.75 to USD1.25

- Land based activities: 55 families in two villages received financial and technical support for watermelon cultivation. This crop was cultivated mainly as a cash crop. Each family received financial assistance through the VDA, and utilized it for the following purposes:
 - Land preparation. Each family will hire draft power for tilling and harrowing their farmland for cultivation.
 - Provision of watermelon seeds. b.
 - Watering the crop. c.



A total area of 33.8 hectares of abandoned land was brought under watermelon cultivation activities. It was harvested with the profit to be earned from 1,000,000riel, equal USD125.00 to USD250 per hectare.

• Handicraft productions: 25 elderly women from Srayov Thong villages in the Srayov commune received financial assistance for handicraft production activities. The major production was woven mats. The financial support they received was utilized mainly for purchasing of raw materials, while some women pur-



chased weaving equipments. This project has helped elderly women to earn cash income between 50,000riel to 80,000riel, equal USD12.50 -USD20.00 per month.

Health and Sanitation:

In order to decrease water borne diseases, especially among children, Caritas has purported the project of clean water wells to the target community initiative. So far, 27 wells were constructed in five villages in the Trapeng Rissey commune. Wells construction materials and technical assistance were provided by Caritas, while the beneficiaries contributed the labor for digging, collecting sand, and covered the transportation cost. A total numbers of 105 families in 5 villages were benefited from this project. Along with the installation of water well, a majority of the families have started to grow vegetables around their backyard garden. Water use education was imparted through regular visits to the individual family and through small group-training activities.



Capacity Building of local Staff

- Training on Wood Vinegar Production: 2 staff participated in a 3 day long training on wood vinegar production in Battambang Province with the resource person from Thailand
- Training on Effective Micro-organism (EM): One staff member participated in a 4-day training on EM organic manure production and its utilization at the EM Training Center of Thailand in Phnom Penh. As a result, the trained staff were able to disseminate this newly acquired skill to the farmers and alarming them of the negative effects of excessive use of chemicals fertilizers and pesticides.

Community Health

Background

During the reporting period, Caritas was working in 19 villages, 3 communes of Kompong Kou, Srayov and Trapeng Russei of Kompong Svay and Stung Sen districts. The overall objective the program was to improve the health status of disadvantaged communities through education and preventive care support, with a specific focus on women and children. The program covered a total of 2,079 families.

Activities and Achievements

Awareness of Primary Health Care

Raising health awareness and training activities were conducted at the villages level and schools based. It was conducted to cover several topics, such as communicable diseases, water use education, hygiene and sanitation, maternity and child health care, parasites and other water-borne diseases, vaccination, and weight measuring.

As a result of these campaigns and educational activities, positive results emerged. Numbers of women and men are able to identify the causes of various illnesses amongst the young children and infants. We also noticed that, the behavior of communities was changed towards improvement in health practices, sanitation, and hygiene within their households.

Awareness campaigns have inspired women in particular to take preventive measures against the transmission of diseases. A reduction in the transmission of communicable diseases has been observed in the program villages. Water use education has helped the women better understand the need for safe drinking water. Hygiene and sanitation is better within the home and thus water-borne disease has been reduced.



Training VHV (Village Health Volunteers)

- Training on Roles and Functions of VHVs was conducted for 40 VHVs from 19 villages.
- Training on child growth monitoring was conducted for 20 VHVs from 10 villages.

The VHVs were instrumental in community health awareness and education activities. They were very active in the entire process.

Training on Traditional Birth Attendants (TBA)

• The trainings were provided for 6 Traditional Birth Attendants (TBAs) in 5 villages. Topics included prenatal care, the proper use of delivery kits, and collection of information on pregnancy. After the trainings completed, TBAs were also provided the delivery kits by Caritas Cambodia. As a result, TBAs were able to provide enhanced pre-natal and post-natal care to pregnant women and were able to use the delivery kits properly. The TBAs regularly provide information about pregnant women in the villages, and their health conditions.

Awareness Education on HIV/AIDS

Awareness Education on HIV/AIDS was provided to 305 people, especially youths in the program villages. These activities were conducted through out counseling, audio-visual presentations, story telling, and quiz contests among the people in the village. As a result of our efforts, youths are becoming aware of the causes of HIV/AIDS and preventive measures against HIV/AIDS. Youths are feeling freely for blood testing.

De-Worming Campaigns

De-worming campaigns were organized for 3,127 children (of which 1,617 were girls) from the age of 1 to 5 years old. Each child was given treatment to prevent the recurrence of parasites. Follow-up assessments indicated that the majority of children received treatment against parasites, there was a substantial reduction in the number of children with anemia, most children achieved normal weight, and there was a reduction in the incidences of typhoid and diarrhea among children in the target areas. In addition, children received support through the child nutrition campaign. The result was indicated that malnutrition among children was reducted

Nutrition Supplement Food for Women and Children

Nutritional supplements were provided to 3,602 children, 941 pregnant women, and 575 lactating mothers who were unable to breastfeed their children. Caritas provided support in the form of rice and powdered milk for pregnant women and women with breastfeeding problems.

By collaboration with WFP, supplementary food com-



modity was provided women and children with the aim of improving their calorie intake. Each woman received the following supplementary food items for themselves and their children of 6 kg of rice, 30.96kg of corn flour, 1.31kg of sugar, and 1.55kg of cooking oil. As a result of these efforts, women and children have been able to obtain balanced diets and achieve normal weight.

Referral Services



- 24 people in Kompong Kor commune were referred to provincial hospitals due to serious illness.
- 4 people were sent for blood testing.
- 903 people (of which 603 were women) were encouraged to go for a medical check-up at the provincial hospital.

Collaboration with Government Health Centers

The Kompong Kou Health Center, which is located in our program area, does not have capacity to organize outreach services for those living in the remote villages. Caritas Cambodia has discussed this matter with those responsible in the Provincial Department of Health and has indicated the need for regular service in the Health Center. The Provincial Department has agreed to provide the necessary staff members to be available for the treatment of people in the Health Center. Caritas has collaborated with the Health Center in providing health care services to the poor and marginalized people living in the remote areas through the health center as well as through outreach services.

SUSTAINABLE AGRICULTURE DEVELOPMENT PROGRAM

Background Information:

The sustainable Agriculture program in Kompong Thom covers 5 villages of Trapeng Thmar, Vor Yeav, Lovey, Skun, and Prey Muol in the Trapeng Russey commune of Kompong Svay District. The total number of target families was 455, with a total population of 2,219, of which 1,170 were female.

Activities & Achievements People's Organization and empowerments:

- 5 Village Development Associations (VDAs) were formed and people elected their management committee. Each VDA Management committee has assessed needs, made plans of action and developed strategies to solve their community problems.
- Training to management committees on leadership and community participation, project planning and implementation, basic accounting and book keeping have been provided.
- Monthly meetings of VDA Management Committee Members and the Unit Representatives were organized regularly. As the result of meeting discussion, the members were able to articulate on their community situations.

Capacity Building of Communities:

• Various training on project Planning, Roles & Functions of Village Development Association, Exposure visits for VDA leaders, Micro-credit were organized for VDA management committee from all 5 villages. As a result, village plans have been developed by VDAs in all program villages. The Village Development Associations have increased their capacity in understanding community participation in development, role and function of Village Development Association and the managing committee. They have also understood the importance of collective decision making, problem solving, facilitation and communica-



tion skills. VDA members realized the value of community resources mobilization and the importance of sustaining the outcome of the program.

Economic Development

Savings Mobilization: Village Development Associations in all program areas have been able to mobilize community resources for starting livelihood activities. A total amount of \$6,914 USD was mobilized by VDA management committee. This money is utilized for inter-loaning among the VDA members. The management of these resources is the responsibility of the VDA and the VDAMC. The terms and conditions of the use of this money, objectives of the inter-loaning activities, interest rate, eligibility for borrowing and other procedures are determined by the VDA. Presently there are a total of 268 families from 5 villages in the VDA Savings Project.

Agriculture Development Trainings:

Various training on sustainable agriculture development concept was organized:

- Organic Rice Production Techniques
- Home Gardening Activities
- Traditional Preventive Measures Against Pests
- Awareness Education on Sustainable Agriculture

and Environmental Preservation

- Compost Making and EM
- Home Gardening Activities
- Demonstration Farm for Rice Cultivation



Farmers understood the concept and practice of integrated farming and multiple cropping. Key farmers who understood the importance of integrated farming systems trained other farmers in the target area. As a result most farmers adapted to multi cropping methods and reducing the use of chemical fertilizers and pesticides for agriculture production. Farmers also started growing vegetables around their houses and home gardening activities enable them to use their land for earning additional income.

Support for agriculture inputs:

Water Pump Machine, Installation of Physical Pumps, Rice Seed Storage were provided to the community in the purpose of increase the food sufficiency at households level. 324 families from 5 villages were benefited from this project. Consequently, the target community was able to secure food for 10 months.

Major Constraints Encountered:

- Natural disaster: a long dry-spell was prevalent. There was little rain during the seasonal monsoon, which negatively affected rice cultivation in the target area.
- Community participation was significant in many areas; however, it was still below the expected level.
- People's needs are immense, and sometimes people expected immediate action from staff members without proper preparation of the community.
- Safety of staff members has been a concern due to

the long distance of travel to remote areas on motorbikes.

• Staff members are relatively inexperienced and need to improve their skills and capacity to work with people.

Future Direction

- Formation and strengthening of the people's grassroots-level institutions in the form of VDAs in the existing villages and new villages. This structure will empower people so that they can plan, implement, and monitor activities themselves through different types of training. Also, advocacy work and gender equity will be promoted in the village / community.
- Formation of savings group activities in all program villages and mobilization of resources.
- Building self-confidence and reducing exploitation by providing literacy education amongst adults through non-formal education.
- Support for agriculture development activities (both rice and non-rice crops).
- We will provide support on modern skills for sustainable agriculture cultivation, animal rearing, small irrigation systems, and soil management. This will increase the capacity to earn income.
- Provide access to safe drinking water and education in proper hygiene practices to VDA members through the construction of water wells and health sanitation education. Water resource system develop-
- Self-reliance and sustainability.



POST-FLOOD REHABILITATION WORK IN KOMPONG THOM PROVINCE

Background Information:

The flooding of 2002 in Kompong Thom Province had caused extensive damage to shelter /houses, standing crops, village roads, water development systems, and drinking water facilities. The flood-water had destroyed community assets and individual assets created with support from Caritas Cambodia; Kompong Thom Integrated Development program. Thousands of hectares of croplands were destroyed. Numerous villages and communities were cut off by water and many destroyed roads and bridges had made access impossible. Many irrigation systems had been destroyed. The poor and the marginalized living in the rural areas had lost their possessions and the rural infrastructure facilities. This led to further marginalization and poverty of the rural community.

Thousand of peoples, especially the female headed families, and families with disabled person were faced with food problem. Many of them are forced to abandon their Families leaved the village in search of food in provincial town, migrate to Phnom Penh to work as construction worker. Many villagers are started to indebt to wealthier neighbors in order to survive. Migration of people in the previous years has given a strong negative impact on their families especially women and children as the husband left the families and never come back some lost their lives because of sickness and some are missing without information.

Caritas Cambodia in collaboration with the Local Catholic Church and Provincial Committee for Disaster Management (PCDM) had responded timely to the flood victims by provided relief assistance to the flood victims of the program area during and after flooding. Food and safe drinking water support was provided to 1,500 families, who were affected by floods.

Once the floodwater receded, Caritas team and the community leader had conducted an assessment of the extent of damage caused by the flood and a needs assessment was undertaken.

The urgent needs were as following:

- 1. Rebuilding of shelters
- 2. Rehabilitation of drinking water facilities
- 3. Rehabilitation of rice seed storages
- 4. Feasibility study on flood control measures
- 5. Rehabilitation of village roads through construction of culverts.



shelters

Based on this needs assessment, a comprehensive rehabilitation, Post-Flood Rehabilitation Program

Kompong Thom Province was developed together with the Village Development Associations.

The programs was prepared in order to support the flood victims in the rehabilitation and construction of shelter, rehabilitation of rice seed storage facilities, construction of culverts for village roads, wooden bridge construction and rehabilitation of open wells will enable people of these flood victims area to restart their normal living and also secure food for the coming year.

With the support of Caritas Swiss/Swiss Solidarity the post flood rehabilitation program was carried out into two phases.

The first phase from April 2003 to December 2003 The second phase from August 2004 to July 2005

This report covers the second phase - August 2004 through July 2005. Through this report, an attempt has been made to present the major activities and achievements brought about through the one year period, major constraints encountered during the implementation of the program activities and the conclusion.

Activities Undertaken & Achievements:

Shelter Construction:

- VDA members recommended the affected families, Identified criteria: Poorest families; female-headed households with many children; old aged and poor families with orphans living with them.
- VDA leaders together with the Caritas staff visited the villages, met the families, whose names were given by the VDA, met the families and made observation of the condition of the houses and the living condition of the families whether the recommended houses and families fit to the criteria or not. Caritas staff and the VDA discussed together after the household visits and organized meeting and made another list of the recommended families.
- Once the new list of the recommended families was ready, a meeting was organized, in which all the VDA members of the village were presented. The recommended family names were announced, who were deigned to have access to support for the shelter rehabilitation. During this meeting, Caritas staff and the VDA leaders explained about the process of selection of houses and the participation of the families in the rehabilitation of the shelter.

As a result sixty five houses have been rehabilitated / Constructed in 13 villages of three communes in two districts. Community participation was divided into two parts: Labor contribution and Cash Contribution.

• Labor Contribution: the members, who were selected for receiving the shelter support, to provided assistance in the construction of the shelter on a rotation basis. Contribution in kind such as of transportation of construction materials; provided unskilled labor during the construction of the shelter.

- Cash contribution:
 - Each family was contributed 150,000riel for the construction of the shelter. Some families found that difficult to contribute the amount in cash. Therefore, the VDA Management Committee organized a meeting of the villagers, in which they explained the situation. Some of the villagers, who could not collect enough amount in cash, they transported the materials on their own.
 - Some of the families, who could not collect the needed amount of 150,000riel, the VDA MC committee members provided permission for bor rowing from the VDA Community funds (Savings of the VDA members and interest collected from the members) for some time without any interest and pay back in small installments. Some of the families, who did not have enough money, community provided food and vegetables for the laborers, who came to help in the construc

Construction of Culvert for village road

tion of the shelter.

- Caritas Cambodia had provided construction materials, such as cement rings and cement, to the Village Development Association in 5 villages of Bopeung, Kompong Kor leu, Kompong Kor Krom, Koh Krabay.
- The community able contributed skilled labor and unskilled labor and also locally available materials such as sand and stones.
- The rural infrastructure maintenance committee is made responsible for the maintenance of the newly created facilities under the overall supervision of the

Village Development Association.

As a result 18 culverts have been constructed in 5 villages of Kg. Kor and Trapeng Russey communes (Bopeng, Kg. Kor Leu, Kg. Kor Krom, Skun and Prey Muol village) and the construction of culverts, condition of the village roads have been improved to



greater extent. People from at least 7 villages are benefited from the improvement of the road condition in these villages.

Rehabilitation of Water wells and Installation of Treadle pumps

During the flooding, open wells were contaminated with flood water, which have been cleaned up and covers have been laid in the wells. The community mobilized resources, mainly labor and locally available resources while Caritas had provided material support for the repair of these wells.

As a result fifty water wells in six villages were reconstructed with 200 families are benefited from the rehabilitation of these wells and 15 treadle pumps were installed in four villages with 123 families (1,350 people) are benefited from these treadle pumps.

Feasibility study on Water Resources **Development System:**

For this purpose, the provincial Department of Hydrology was contacted and agreement was made for undertaking feasibility studies. With logistic support from the VDA and technical assistance from the department of Hydrology technicians, feasibility study on water control and flood control measures were conducted.

Technical survey, such as topographic survey, design and cost estimation has already been completed. Caritas had provided logistic support and cost of hiring the technicians from the department.

Feasibility studies were conducted on the following flood control and water development systems:

- Flood control small check-dam in Kg. Kor commune.
- Rehabilitation of 3 water gates in Kg. Kor commune.
- Design for a Canal and a reservoir in Roka village in Srayov commune.
- Design and cost estimate for the rehabilitation of a canal and small check dam and a water gate in Trapeng russey commune.
- Installations of large Water pump station in the Stung Sen River in Kg. Kor commune.

- 4 Km of check-dam of Kompong Kor commune has been studied and designed by the Department of Water resources Management.
- 3 water gates in the Kompong Kou Chek-dam have been studied. Design and cost estimation was developed by the Engineer and expert from the Department provincial of Water Resource Management.
- Due to the feasibility study on the Canal of Roka village village Srayov Commune. The Village Development Association together with the commune council of Srayov able to proposed and received support for digging a 3 Km canal and reservoir from the Provincial Department of Water Resources for irrigation of both dry season and wet season. 400ha of land have brought under cultivation of rice and other crops.
- Caritas Cambodia with the support from Secours Catholic in the Community Development program of Kompong Thom has provided support for installation of large pump station for the 5 villages of Kompong Kou Commune. The pump station has been used for irrigating the dry season rice cultivation. A total area of 433.25 ha unutilized land is irrigated and brought under dry season rice cultivation and crops growing. 409 families from 5 villages benefited.

Constraints encountered during the **Implementation**

- Transportation of Construction materials is very difficult due to the absence of road in some area and shallow water in the river at dry season.
- Labors contribution from the extremely poor families has some difficulties as they were out in the field for daily work. Hence, the construction process was slow.
- Transporting materials was difficult as the target villages were very far.
- Labors contribution from the extreme poor families has some difficulty as they were out in the field for daily work. Hence, the construction process was slow.
- Some individual families doest families has a small piece of land doesn't accept when the construction of canal crossed their farm.
- The development of the whole community has some affected on individual land.

Czech Organization CAT

DAC - Disability Action Council

CCAMH - Center for Child and Adolescent Mental Health

GLV - Green Leafy Vegetables

HANet - Humanitarian Accountability Network

HKI - Helen Keller International

HOD - Health Operational District

IPM - Integrated Pest Management

KnK - Kokkyo Naki Kodomotachi

PLA - Participatory Learning and Action

RBC - Rehabilitation of Blind Cambodians

SRI - System for Rice Intensification

Tillers - a lateral shoot from the base of the stem of grass or cereal (Stalk of rice)

VCD - Volunteers for Child Development

PWD - People with Disabilities

PLHA - People Living with HIV/AIDS

VHVs - Village Health Volunteers

ARV - Anti Retro- viral therapy

MOH - Ministry of Health

PHA - People with HIV/AIDS

HBC - Home Based Care

TB - Tuberculoses

HC - Health Center

MCH - Mother and Child Health

WFP - World Food Programme

TBA - Traditional Birth Attendant

DONORS

In the year 2005 Caritas Cambodia has received contribution from:

- APHD
- CARITAS FRANCE
- CARITAS AUSTRALIA
- CARITAS GERMANY
- CARITAS SWISS / SWISS SOLIDARITY
- CARITAS SPAIN
- CARITAS JAPAN
- CARITAS SCOTLAND
- OBOS
- MISEREOR
- CBM
- OTHER SOURCES

"Caritas Cambodia and the
poor people in Cambodia
taking this opportunity to
express our sincere grati-
tude towards our donors
and funding partners for
their generous and wonder-
ful support.

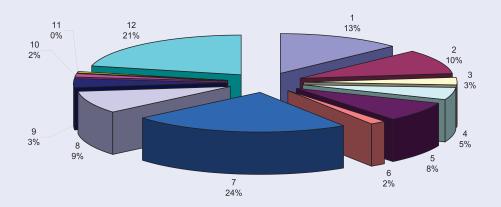
FINANCIAL SUMMARY

	Amount		I
Program Area	Received	Amount Spent	Fund received from
	(In USD)	(In USD)	
Balance forward	2,041.50		Balance forward
Structural support	20,326.25		Caritas France
Capacity Building	7,635.88	68,960.56	Caritas Swiss
	14,805.00		Caritas Australia
	9,430.00		MISEREOR
	14,721.93		Caritas Cambodia
Sub- Total	68,960.56	68,960.56	
	9,427.26		Balance forward
Kandal Community Development Program	46,222.00	42,077.03	Caritas France
Sub- Total	55,649.26	42,077.03	
Youth Development Program	0.00		Balance forward
	20,000.00	38,065.96	Caritas Japan
	18,789.15		Scotland
Sub- Total	38,789.15	38,065.96	
Siem Reap Home care HIV AIDs program	4,935.90		Balance forward
	33,765.00		Caritas Swiss
	34,956.20		Caritas Germany
	1,799.00	60,833.66	Caritas Swiss
Sub- Total	75,456.10	60,833.66	
Siem Reap Community Development program	0.00		Balance forward
	41,858.55	41,858.55	Caritas Cambodia
Sub- Total	41,858.55	41,858.55	
Siem Reap Community Health	19,498.36		Balance forward
	33,756.64	46,664.54	Caritas Spain
Sub- Total	53,255.00	46,664.54	
CCMH (Centre for Child Mental Health)	7,684.32		Balance forward
Scholarship	21,897.56		Impact Foundation
	49,286.71		Secours Catholique
	7,583.00		Caritas Spain
	32,505.00	95,618.15	Fondazione RR
Community Based Mental Health	2,170.61	,	ESP Germany
	3,985.00		Caritas mission Society
	4,959.00		Caritas Sweden
	9,967.00		Gefinco Sa
	856.11		Impact UK
	24,020.78		Private donors
Sub- Total	164,915.09	95,618.15	

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Kampong Cham Community Development	19,931.00		Balance forward
Program (Jul2005- Dec-2005)	22,655.00	17,566.37	Caritas Australia
Program (Jan-2006 - Jun-2006)			
	40.500.00	47 500 07	
Sub- Total	42,586.00	17,566.37	Dolongo forward
kampong Cham Rehabilitation of Leprosy	4,225.05		Balance forward Kampong Cham
Infloited Peaple in Trang village	5,000.00	11,920.81	Church
Sub- Total	9,225.05	11,920.81	
Kampong Thom Community health	15,695.39	11,320.01	Caritas Cambodia
Trainpong Thom Community Health	10,000.00	15,695.39	Garillas Garrisodia
		,	
Sub- Total	15,695.39	15,695.39	
Kampong Thom CD Program	2,942.53		Balance forward
	42,271.52	32,889.22	Caritas France
Sub- Total	45,214.05	32,889.22	
Kampong Thom Sustainable agriculture	4,074.00		Balance forward
(Jul-2005 to Dec-2005)	24,410.00	3,838.69	Caritas Australia
(Jan-2006 to Jun2006)			
Sub- Total	28,484.00	3,838.69	
Kampong Thom Rehabilitation program	6,243.00		Balance forward Caritas Swiss / Swiss
	55,720.00	55,808.00	Solidarity
	61,963.00	55,808.00	
Battambang Bovel Mongkol Borei CD Program	49,039.00		Balance forward
	65,523.00	00 407 50	APHD
Sub- Total	35,398.00 149,960.00	98,467.50 98,467.50	Caritas Cambodia
Battambang Rattanak Mondol CD Program	2,251.28	90,407.30	Balance forward
Datambang National Mondo OD Frogram	54,862.00	102,141.36	MISEREOR
	50,457.50	,	
Sub- Total	107,570.78	102,141.36	
Battambang Samlot CD Program	21,612.20		Balance forward
	59,568.00	56,146.72	APHD
Sub- Total	81,180.20	56,146.72	
RBC Rehabilitation for Blind Cambodia	230,275		Balance forward
	37,000		Other donation
	280,101	402,638	CBM
Sub Total	60,521	400.000	Other sources
Sub- Total	607,897	402,638	

Grand Total 1,648,659.18 1,191,190.53

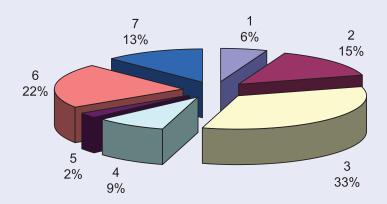
Percentage of amounts received from donors



1.	Caritas France	13%
2.	APHD	10%
3.	Caritas Germany	3%
4.	Caritas Australia	5%
5.	Caritas Swiss	8%
6.	Caritas Japan	2%

7.	CBM	24%
8.	Misereor	9%
9.	Caritas Spain	3%
10.	Caritas Scotland	2%
11.	Caritas Sweden	0%
12.	Other sources	21%

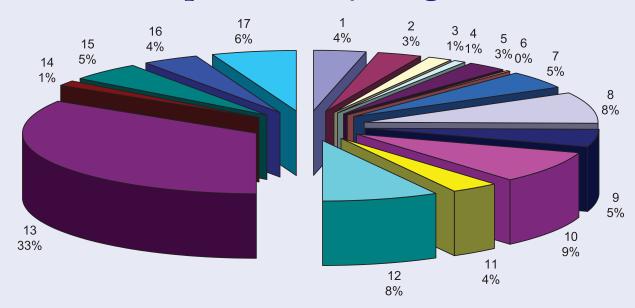
Expenditure by province



1	Phnom Penh	6%
2	kandal	15%
3	Takeo	33%
4	Kampong Thom	9%

5	Kampong Cham	2%
6	Battambang	22%
7	Siem Reap	13%

Expenditure by Program



Agriculture Development Infrastructure and Income Generation and Youth Development

1. Kandal Community Development	4 %
2. Youth Development	3 %
3. Kampong Cham Commnity Development	1 %
4. Kampong Cham Socio-Economic Developmentof Leprosy inflict	ted people 1 %
5. Kampong Thom Community Development	3 %
6. Kampong Thom Sustainable Agriculture Development	0 %
7. Kampong Thom Rehabilitation	5 %
8. Bovel Mongkol Borei Community Development	8 %
9. Samlot Community Development	5 %
10. Rattanak Mondol Community Development	9 %
11. Siem Reap Community Development	4 %

Health Development

12. Center for Child and Adolescent Mental Health(CCAMH)	8 %
13. Rehabilitation for Blind Cambodian	33 %
14. Kampong Thom Community Health	1 %
15. Siem Reap Home Based Care for HIV/Aids	5 %
16. Siem Reap Community Health	4 %
17. Administrative/Capacity Building	6 %





#47, St. 198, Sangkat Boeung Pralith, Khan 7 Makara,
P.O. Box 123, Phnom Penh, Cambodia
Tel: 855-23 210 757 / Fax: 855-23 216 258
E-mail: caritas@forum.org.kh

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