

Caritas Cambodia Target Areas



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Message From the Chairman

Caritas Cambodia is committed to working with the poor and the needy and our greatest wish is to bring the change in socio-economic, cultural, health and educational life of the poor people, whereby social values such as justice, peace, freedom, love, sharing, unity, mutual respect and tolerance are promoted.

This dream has been guiding Caritas Cambodia throughout its journey with the poorest and most marginalized sections of the community. It enables Caritas to find new ways of organizing the target communities and new ways of approaching and solving grassroots problems. Caritas Cambodia accepts and respect people's perspectives in development work and treats the target communities as partners in development. This offers major opportunity to enhance the effectiveness and efficiency of Caritas in its services to the poor. Caritas strongly believes that the active participation of the target groups and their sense of ownership of the program engaged in will bring about the desired results and sustain the outcome of the programs. The grassroots communities with which Caritas Cambodia has been associated in the last five years have demonstrated this. The active participation of the people at the grassroots level not only contributes to but also challenges us to improve the quality of our interventions.

As new Chairman has been a great experience to witness the achievements of Caritas Cambodia under leadership of former Bishop Emile in promoting value based grassroots communities to address the needs of the poor.

Caritas Cambodia has achieved considerable institutional development and working to enhance our capacity, transparency, accountability and professionalism.

I would also like to take this opportunity to express my appreciation to the Royal Government of Cambodia for its support in carrying out our activities with the poor and the needy. Thanks to all the funding partners for the wonderful support and accompaniment and commitment to achieve its vision, mission, and goals. Thanks also for the great support and encouragement of Apostolic Prefects in Kampong Cham and Battambong Apostolic Prefectures and Apostolic Vicariate of Phnom Penh.

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Bishop Enrique Figaredo (Kike)



Message From the Executive Director

This report provides an overview of all of the achievements and results of all of the activities which were implemented during 2006-2007. This period highlighted numerous successes at the grassroots' level in the community and with other stakeholders that have no doubt helped to improve the livelihoods and quality of life of the poor and the marginalised.

2007 marked the first year's implementation of Caritas Cambodia's Five Year Strategic Plan (2007-2011) which focuses on a wide range of programmes across the country – community and infrastructure development, education, community health, HIV/AIDS, preventive eye care, mental health services for children and adolescents, disaster preparedness, humanitarian assistance and rehabilitation etc.

All of the results are more than satisfactory thanks largely to the tireless efforts of the staff, our grassroots' partners in the community and with support from all the stakeholders. I would like to express our profound appreciation to them all.

I would also like to take this opportunity to express my gratitude to the Royal Government of Cambodia for its support, collaboration and co-operation. I am also extremely grateful to all of our donors and funding partners for their generous support without whom these important results could not have been achieved.

Our appreciation also goes to all of the Board members of Caritas Cambodia and the Bishops of the three prefectures for their precious advice for the growth and well-being of the organisation.

Finally, I much appreciate the hard work and dedication of our committed staff and volunteers and the active participation of our grassroots' partners and all the stakeholders of Caritas Cambodia.

Nuth Sam Ol Executive Director

Community Empowerment



Monthly Meeting of VDA

The Community Empowerment Programme is now taking place in six provinces across the country – Battambang, Kandal, Kampong Cham, Kampong Thom, Siem Reap and Preah Vihear. The programme aims to bring the poor and marginalised out of poverty and to help build community networks. The programme also inspires people to have critical thinking skills for their lives and includes such things as human values, dignity, self-reliance and basic rights and helps to make people better understand their essential roles in their communities and in the society.

Community Organization & Capacity Building

Facilitated by Caritas Cambodia, Village Development Associations (VDAs) have been established in every target village and commune for the improvement of the communities. VDAs are elected in a democratic way and also promotes gender balance. Various activities have been conducted for the VDAs including training and arranging regular meetings. Over 300 VDAs have been created and this programme targets over 61,000 people.

Capacity Building of VDAs

The VDA members are supported to enhance their knowledge through various types of training such as leadership skills, project planning and management and understanding micro-credit. Other training courses have also been provided in things like sustainable agriculture, organic rice farming and vegetable cultivation.





Exposure Visits

Exposure visits to different villages, communities and provinces have been considered an important activity for all of the VDA members to stimulate learning and to help them to understand the important role of the VDA. As well as being a learning experience, they are also an opportunity for everybody to share knowledge and skills. The exposure visits have enabled the VDAs to improve their capacity and to open them up to change.



Key farmer in Siem Reap province demonstates on mushroom cultivation to a group of farmer from Kampong Cham province



Mr Yem Yoy training VDA Management Committee (MC) members about micro-enterprise



"I am so impressed by the VDA members."

[Yem Yoy]

Case Study

Mr Yem Yoy was born in 1946 in Knor Kar village, Barong commune, Lovea Em district, Kandal province. In 1967, he married Sao Saroun who lived in the same area and they built a happy family life together and did farming and fishing. In 1968 they had a lovely daughter. Unfortunately, in 1971 his wife died due to disease and he and his daughter moved from Barong commune to live in Kdey Kandal village in Sarikakeo commune. As a widower, he played his role as both father and mother and took care of his daughter by changing his job to that of a tailor.

In 1972, he got married for a second time to Hem Nem who lived in Kdey Kandal village, but unluckily his daughter from his first marriage died in 1977. From 1973-1975, he worked as a soldier. In 1979, after the liberation from the Pol Pot Regime, he worked for commune security in Sarikakeo commune. From 1979, he and his second wife had 6 more children, including two daughters.

During this time his family living conditions were very difficult and his wife got sick, so the eldest son decided to stop studying to help his father with rice cultivation and fishing activities. In 2000, Caritas Cambodia expanded its Community Development Programme to Lovea Em district. Yem Yoy was one of the mutual help group members in Kdey Kandal village and he was selected to be a group leader and a VDA Management Committee (MC) Member.

Yem Yoy didn't have any technical agricultural skills and some of his farmland was not being used because he lacked the correct equipment and irrigation facilities. He could not provide enough food for his family's daily consumption. But from 2005-2007, with the help of Caritas Cambodia he received financial support and more knowledge and technical skills in agriculture. As a result of his efforts, he got a higher yield each year and was able to provide for his family for the whole year and was congratulated by other farmers in the community.

At the moment, the conditions for his family are improving and he can support his children's education. Moreover, he has become a trainer of trainers (TOT) in rice cultivation for Sarikakeo Commune. Also, he has been recognised by the Cambodian Centre for Human Rights (CCHR) and the local authorities and performs his duties to disseminate information about human rights in Lovea Em district. He is very happy with what he has today and has more self confidence.

In the future, he will try his best to perform his duties and is committed to train, to expand and to promote farmers to produce organic manure for their farm cultivation in order to produce organic rice and vegetables that protect the environment and everybody's life in the community.

Livelihoods...

The Livelihoods Programme was created in order to help the poor and marginalised to be actively involved in social activities. It aims to improve the living standards of the poor and reduce poverty and debt. This programme helps people to have adequate income to support themselves and enables them to send their children to school through the promotion of sustainable agriculture, income generation activities and micro-enterprise or small business schemes.

VDA members get together for different training courses on sustainable agricultural techniques to promote better productivity and yields such as organic rice production, animal husbandry, making effective micro-organisms (EM) liquid and wood vinegar (natural fertilisers and pesticides) and vegetable production and home gardening etc.

Training in effective micro-organisms (EM) production





Weaving for extra



Micro-enterprise activity

— selling vegetables

In order to improve a family's income, income generation activities include things like animal-raising and the production of handicrafts. Promoting microenterprise (small business) also plays an important part in raising the living standards of the poor. They can get financial support from Caritas Cambodia to start up a small business. As a result, they are able to earn more and increase their daily income. Whenever their living conditions are better their health status also improves. With an improved daily income, people are able to put aside a small amount for the group savings scheme which is facilitated by the VDA. The savings are used for the benefit of all the group members and the entire community and can be used to access funds to start a small business.



Road construction

During the implementation of a Community Development Programme, it is common to face different challenges and Caritas Cambodia is motivated to try and take immediate action for the benefit of the communities. Accessibility to poor communities is necessary so Caritas Cambodia can introduce these development activities. Poor road conditions are one of the difficulties that can be faced and they are also a big problem for the people living in a certain area. In such cases, Caritas Cambodia can provide basic infrastructure improvements and these help the people to be able to travel more easily from one village to another and spend less time travelling to the nearest health centre or market. Children can also get to school more easily etc. Good road conditions and better infrastructure provides improved social and economical interaction, but building better roads and bridges does not fully meet the needs of the community. Providing irrigation improvements such as wells, tube wells, dams, canals and culverts brings other big advantages to develop and improve living standards. This Small Infrastructure Development Programme is also helping to increase rice or non-rice crop yields. For example, with water pumps, people are also able to cultivate rice and non-rice crops during the dry season.

Caritas Cambodia has been able to achieve a lot during this two-year implementation period. But these achievements and benefits would not have happened without contributions in either labour or materials from the communities and with the good co-operation and collaboration of the local authorities at all levels and at all stages of the work.



Community labour working on a small infrastructure project

Food Security

Food and good nutrition are important for life. Without food, people cannot survive. Cambodia is a mainly agricultural country, where 80% of the population live in the rural areas and are doing farming for their livelihood. Rice is part of the staple diet for Cambodians. Caritas Cambodia intends to see that people are assured of food security for the whole year. Food security happens when "all of the people, at all times, have the physical and economic access to sufficient, safe and nutritious food for a healthy and active life". This is the vision of Caritas Cambodia as its goal for the Food Security Programme. To have better food security, establishing village rice banks is an activity which gives people access to rice and rice seed whenever they are in need. It also ensures that they do not need to borrow money from expensive moneylenders to buy seed for planting and can therefore stop people getting into debt.



Rice bank activities

Gender & Women's Empowerment



A workshop on youth & livelihood skills & youth at high risk of trafficking & sexual exploitation

Caritas Cambodia is greatly promoting women to become much more involved in all of its programme activities. Women are agents of development and are also the future of the country. Caritas Cambodia is committed to gender equity, for instance in the formation of the VDAs and the elections for the Management Committee (MC), which are done in a democratic way – electing one male and one female.

Achievements

Gender is a very sensitive issue and needs more attention. Everybody in the community is a messenger and plays a part in the resolution. Caritas Cambodia is committed to empowering women at all levels. With an effort to improving the situation of women, the following are some of the achievements:

Gender & Caritas Cambodia's Strategic Planning

Caritas Cambodia in its strategic planning for 2007-2011 is committed to giving prime importance to the issue of gender. Caritas Cambodia aims to encourage women to play a more important role in decision making and to protect them from any form of violence by men. As stated in the strategic plan, women should be able to voice their concerns, problems and their needs. Women should have equal rights and an equal role in contributing to society through freedom of expression and being able to discuss things and work alongside men.

Gender Mainstreaming Programme

Gender training and workshops have been provided for VDA members in the target areas. Gender mainstreaming is being widely implemented and helps to ensure the greater participation of women in issues that relate to their everyday life. Awareness-raising on gender and human trafficking are seen as important for children and women who run the risk of being trafficked. Gender mainstreaming is being implemented with the full co-operation and collaboration of the government at all levels, non-governmental organisations (NGOs) and other stakeholders.

Gender Policy

Caritas Cambodia's vision is "to empower women, especially the marginalised, to participate in the development process that affects them directly or indirectly." Empowerment seeks to improve the socio-economic status of women, which will be a key factor in contributing to and reinforcing women's participation in politics and decision-making at all levels.

Gender Desk

The gender mainstreaming programme is already being implemented at the grassroots' level through awareness-raising campaigns, workshops and training courses. These are supported by the local authorities and NGOs working in the target areas. Caritas Cambodia has yet to implement a national gender programme, but has plans to do so in the near future.

Advocacy

The Catholic Church and Caritas Cambodia's vision is to see a just society where human rights are respected and integrated development is promoted through building communities by means of an empowering process. Caritas Cambodia wants to help the poorest communities to be able to advocate their rights, their needs, their concerns and their problems to the government. Caritas Cambodia actively seeks the support of the government and the local authorities at all levels to help the poor communities make their issues heard. By promoting campaigns at the community level and working with other NGOs it helps bring together a more collective voice. As a result, they should in the future be able to deal with any problems on their own and additionally, each community should be enabled to assert its rights, voice its concerns and influence other people and the government to change its policies and practices for the benefit of the society. Caritas Cambodia intends to see that the poor and marginalised are able to fight against injustice, exploitation and other violations. People at the grassroots' level should be able to take part at all stages of the process. Advocacy has been mainstreamed throughout all of Caritas Cambodia's daily programme activities.



School children celebrate environment day

Activities Implemented

- Training on basic human rights and advocacy skills.
- Advocacy campaign.
- Workshop and forum on advocacy.
- Problem analysis and decision-making.
- Issue analysis and documentation.
- Building networks.

Community Health Program



Birth-spacing education

At the request of the Ministry of Health, Caritas Cambodia developed and has implemented a Community Health Programme in Siem Reap province since 1995. The programme aims to improve the health status of the poor, provide health education, treatment and medical support and preventive and curative health care services for rural people. As a result, the health of the poor and marginalised – especially women and children – has improved considerably. This important programme contributes technical, material and financial support to all stakeholders. Caritas Cambodia has been working co-operatively with provincial health centres, community health centres, referral health centres, school teachers, parents, children, community members and other NGOs working in the same field. As a result of the strong support and networks built for this programme, Caritas Cambodia further extended its Community Health Programme to Kampong Thom in 2000 and to Battambang during 2007. To date, improved health services are accessible to more than 106,119 poor people living in 141 villages.

Impact of the Programme

- People better understand the role of preventive health activities and have started to use health services.
- Hygiene and sanitation have improved.
- Poor communities, especially women and children have received health education, training and other support.
- The rate of disease transmission has been reduced.
- Poor communities have received health services and treatment in hospitals and in villages.
- The number of underweight children has been greatly reduced and the nutrition of children under two years of age has improved.
- The health of mothers has improved.
- School children have been given knowledge about health, can practice improved health behaviour and have received material support.

Challenges & Recommendations

- People living in remote areas have difficulty accessing health centres, food distribution and other outreach activities.
- More community resources need to be mobilised and there needs to be solidarity and better cooperation to solve problems.
- Discussions need to take place on the above issue with the commune councils to better involve them in order to help the poorest of the poor.



HIV/AIDS

Caritas Cambodia started its Home Based Care Programme (HBC) for people living with HIV/AIDS (PLHA) in Siem Reap province in 2001 at the request of the Ministry of Health to assist them in the struggle against the new threat to the health of Cambodian people living with HIV/AIDS. The goal of the programme is to improve the quality of life of the poor and their families who live with HIV/AIDS, through a comprehensive Home Based Care Programme and the development of support groups.

Impact of the Programme

- With the advent of anti-retroviral drugs (ARVs), a "comprehensive home care programme" was essential as many poor people could not access these drugs if nobody was helping them from the start.
- After one year of support, most people are independent and can get treatment by themselves.
- Due to the frequent visits of the Home Based Care Team, less discrimination has been noticed against people with HIV/AIDS and there is reduced fear amongst people affected by the disease, their families & communities.
- Health education and informal discussions with relatives & neighbours has raised awareness in the community and greater understanding about the disease.
- Gradually, it has been noticed that people can talk more openly about the disease and this formerly taboo subject.
- The development of "support groups" has been very successful as people can help themselves to be strict regarding administering their treatment and also help their "peers" in the community to have better understanding.

Highlight the achievement during 2006-2007

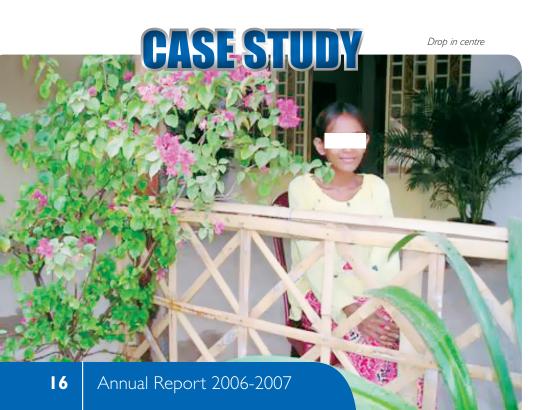
Activities	Achievement 2006
1. Home Based Care	- 412 new cases receive daily home based care services with an average of 30 new admissions per month - 14 severe chronic patients benefit from th program - More than 300 caregivers have been trained and families have been educated - More than 250 families received monthly food supplement (6 months period, 60 families receive money for transportation (for 3 month), 41 individual receive loan of 50 for income gene - 192 children with HIV/AIDS are provided food, school fees, loans to caretakers)
2. Support groups and HIV/ AIDS networks	- 14 support groups have been developed and trained on HIV/AIDS - 5 Caritas peer educators received training(rights of the people living with HIV/AIDS, management of Aids cases in the community) - All support groups started regular saving - These group are formed from HIV but also HIV people to help all poor people in the community and to avoid stigma and discrimination
Activities	Achievement 2007
1. Home Based Care	- 4708 visits have been performed by home care team to 221 new HIV and to 80 new HIV families in Siem Reap and Sauthnikum respectively, 829 remaining families - 268 among the 301 new cases are adults - 177 people are new ARV treatment - 78 children living with HIV/AIDS, 35 of them are on ARV - 59% HIV/AIDS cases are housewives contaminated by their husband 30% of the HIV,AIDS patients staying in the provincial hospital received food and psycho-social support from Caritas - Among the 72 families, 58 new families received loan from Caritas to start business - 14 Chronic patients received HB care services
2. Support groups and HIV/ AIDS network	- 12 support groups have been organized and chaired by 3 peer educators (they learn more about the disease, counseling skills) - PLHA volunteers also joins the program in providing education - a provincial network for PLHA people is formed
3. Livelihood program	-21 women have benefited from a workshop with hand mad artificial flowers
4. Drop in center	-251 poor PLHA who come from the remote area got access to ARV and now under treatment in their respective provinces or health center - 249 among 251 PLHA went back home and have enough income to continue to attend the clinics for O.I or ARV No drop out has been recorded

Difficulties & Challenges:

- It seems that some people still don't realise the severity of HIV/AIDS and tend to go for testing too late, when they are already at a late stage and so the mortality rate is still high.
- It is difficult to get men to attend education and training sessions as they work and come home late.

Conclusion:

The new ARV programme is very challenging as it will be a long term programme, requiring strict compliance by the clients & a sufficient income to enable people to go on time to get their drug supply. The clients also need to carry on working & ensure that their children continue to go to school. There are new requirements for the programme like micro-enterprise development and vocational training and marketing of handicrafts that needs help & support. Establishing & strengthening a HIV/AIDS network is another priority/ goal for the sustainability and continuation of the programme. It will be important for the autonomy of people living with HIV/AIDS and it will contribute to building a society that is free of HIV/AIDS and the "stigma" that people face. It is hoped that people's rights can be respected and solidarity promoted.



The Story of Kim

Kim joined the HBC Programme when she developed full-blown AIDS with tuberculosis (TB) and other associated infections. Kim was sold into the sex industry when she was 5 years old and she did not have anyone who could look after her, or who would love her. She could not continue working and was living on the streets. Depressed, she also didn't want to take her medication.

Because of the seriousness of her case and her desperate situation, she was invited to stay at Caritas Cambodia's "drop in centre" until she could recover. She was accepted for support by the World Food Programme (WFP) and got treated for her TB, but she would not speak.

She always looked sad and depressed. Once her TB was under control, Kim could start her ARV treatment. The Caritas Cambodia counsellor spent a lot of time with her, listening to her and advising her.

Slowly, she came out of her depression and started to smile and Kim got involved in handicraft work at "Spean Chivit". She enjoyed being part of the group and became very skilled at flower making.

The income from her handicraft work and the WFP monthly food rations gave Kim some "independence" from Caritas Cambodia, so she did not have to feel that she was depending on them for everything.

Now, Kim is starting to help with the work at the "drop in centre", helping to welcome new people living with HIV/AIDS (PLHA) who may be in need or have a crisis. She helps with cooking for the new clients and also sells handicrafts to visitors.

Now, Kim is smiling as she knows that she has many friends and many people caring about her and for her. She's got more self-confidence and soon she will be able to make her own living and help her peers!

Health Care for Prisoners



Children in the prison enjoy playing with toys provided by Caritas Cambodia

In late 2005, at the request of the Siem Reap prison director and the Siem Reap governor, Caritas Cambodia started a "Health Programme" at the provincial prison to respond to the health needs of prisoners and to help with the development of a "Model in Health Care" for prisons in Cambodia. The programme helps facilitate the stay of prisoners, provides health services and treatment and different material support to meet the needs of prisoners. Up to now, 1,078 prisoners have benefited from these health services. 74 out of this total are women. 86 are youths and another 7 of the prisoners are children.

- water filters to the prisoners, in order to reduce their vulnerability to diseases such as diarrhoea and also to provide them with safe drinking water. 77 pairs of glasses have been provided, so that those with eye problems have better sight. In addition, 1,000 prisoners receive a monthly food supplement and during special events like Khmer New Year and the Pchum Ben festival, they are given gifts.
- 3. "Access to Chronic Disease Diagnosis & Treatment" has been developed through a good referral system and drug provision for chronic disease management. 33 people were tested for HIV and 17 are already on ARV treatment. 8 prisoners affected by TB were diagnosed and treated and other chronic cases have been referred to private clinics so they can get treatment.

213 referrals were made by the prison police so prisoners could access medical treatment. Caritas Cambodia also developed a social development awareness programme and life skills education with a special focus on women and children. On average, 300-400 prisoners received monthly education on different topics such as domestic violence, sexual abuse, child abuse and human trafficking and every week they participate in a workshop.

Activities & Achievements

- 1. A "Health Centre" has been developed and three government staff have been appointed to deliver daily health services to prisoners. The prison staff have also received training and have been on exposure visits.
- 2. "Holistic Care" has been provided for prisoners including the construction of a small unit for mothers and their young children and there is access to daily consultations and daily visits to the in-patient facility. Caritas Cambodia in co-operation with the Ministry of Health has provided drugs to those prisoners who are in need. Hygienic materials have also been provided and used to improve the cleanliness of the prison cells. In total 7,469 consultations have been provided for the prisoners. Furthermore, Caritas Cambodia has provided 101 large mosquito nets (that are suitable for 8 people) and 66

Impact of the Programme

- The health and "well-being" of prisoners in Siem Reap has improved and their basic health needs are being met in a prison where rights are better respected and their future is being planned in a positive way, through life skills education and relevant occupational activities.
- The health system which has been developed at the prison in Siem Reap will be a model in health care for all prisons in Cambodia, especially regarding treatment of chronic illnesses like TB and HIV/AIDS.
- From the prisoners' point of view, the presence of NGO staff is extremely important as they can experience that they are being seen as "human beings" deserving love, care and support.
- The above are the basis for hope and building a brighter future for them and their families when they are reunited.

Eye Care Program

In 1997, the Takeo Eye Hospital (TEH) was started by Maryknoll Cambodia to train doctors and nurses to assist the Ministry of Health in developing the human resources necessary to deliver quality eye care. Over the past 11 years, TEH has been funded by Christoffel Blinden Mission (CBM) which is a German charitable foundation, Maryknoll and recently by Caritas Cambodia. In 2000, the TEH was handed over to Caritas Cambodia and is being managed by the Sisters of Charity.

8. Collaboration with other NGOs and stakeholders: resource persons provided for continued medical education of doctors and nurses, information provided on eye care in Cambodia to visiting NGOs, rapid assessment on avoidable blindness (RAAB) carried out in five provinces, regular participation in sub-sectoral and other meetings and celebration of World Sight Day in three primary schools with a drawing competition.

Activities Implemented 2006-2007

- 1. Capacity building for staff (doctors and nurses) and 30 leaders of self help groups: training has been conducted in the concept of self help groups, communication skills, decision-making, savings and credit, planning, basic accounting skills, reporting and advocacy. 29 self help group members have received grants for income generation and small business activities.
- 2. Regular loans and assistance are available to blind clients.
- The hospital has an outreach programme to villages which facilitates the referral of elderly and poor patients living in remote areas.
- 4. Corneal Ulcer Research Intervention Study: the research will be the first in Cambodia to determine the best way to manage the increasing number of corneal infections that can lead to blindness. Part of the research has continued during 2007 and includes the training of health centre staff and the visit by experts to facilitate the actual study and research analysis.
- TEH signed a formal agreement with Medecins Sans Frontieres (Belgium) to implement retinopathy screening for diabetic patients.
- 6. Upgrading of hospital services: including installing the phaco wet lab, research on corneal ulcers, implementing a database for cataracts and strengthening the Takeo Eye Hospital Management Team
- 7. Sustainability: 3% increase seen in hospital income. The hospital income now covers 75% of the salary costs of the local staff.

Results achieved 2006-2007				
Caritas CBR-2006	Number			
Clients Actively involved	7962			
New Clients identified	4542			
Case closed	5155			
Clients referred to hospital/eye	3667			
Children supported at Blind School	28			
Takeo Eye Hospital				
Consultation	29168			
Operation	4049			
Statistics-2007	Number			
Consultation at Hospital	21,918			
Consultation in villages	1,603			
Eye Operations	2,933			
School Screening	1,000			

Impact of the Programme



Celebrating World Sight Day at Kirivong Referral Hospital

- Good eyesight can contribute to alleviating poverty and increasing income to support the daily life of a family. Women are free to develop their skills rather than just taking care of elderly relatives who are blind. Children are able to go to school rather than accompanying a blind father or mother to beg in a neighbouring village or in the city. 80-90% of cases of blindness are preventable and treatable.
- Blind clients can live just like other people in a village with orientation and mobility skills and can earn their own living and be respected as they deserve.

Future Plans

- 1. To continue the Diploma in Ophthalmic Nursing for six nurses (to end in July).
- 2. To run another Diploma in Ophthalmic Nursing course for eight nurses (to start in September).
- 3. To train three doctors who are in the residency programme in ophthalmology.
- 4. To continue the corneal ulcer research in the target areas.
- 5. To train another two staff members in hospital administration and management.
- 6. To improve the information technology skills of the staff.
- 7. To train a doctor for the special clinic in retina treatment.
- 8. To organise a study tour for nurse managers to eye hospitals in Manila, Philippines.
- 9. To evaluate the hospital's Operations and Accounting System Manual.



Daily consultations at the Takeo Eye Hospital (TEH)

Case Study



Heal Nang, is a 13 year old boy who lives with his aunt in Kouk Prech village, Kouk Prech commune, Kirivong district, Takeo province. His parents are divorced and his mother left home to work as a labourer on the Cambodian-Thai border. Heal Nang got an ear infection and as a result he became deaf. He experienced difficulties with his school work and communicating with other people. Sometimes people in his village got angry with him when they asked him something and got no response. He felt very isolated because most people did not speak to him. In early 2005, Nang was identified by a Community Based Rehabilitation (CBR) field worker and he was sent to the Jesuit Services, which is a partner in Phnom Penh for an ear consultation and treatment.

Heal Nang has come quite a few times to Phnom Penh for treatment. He has got a hearing aid now to help him improve his listening. He was also trained how to use the hearing aid

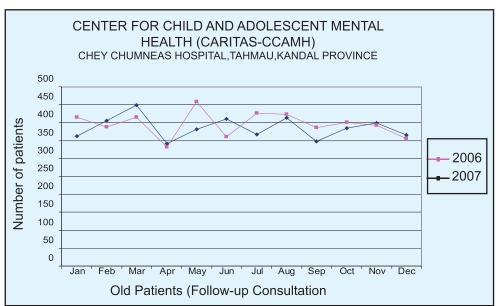
properly and how to take care of it. Now Heal Nang can do his school work more easily and he's more active at school and at home. People are able to communicate with him more easily now and people are happy to speak with him. He is no longer an isolated member of the community!

Centre for Child and Adolescent Mental Health

2006 was a learning experience and during 2007, the Centre for Child and Adolescent Mental Health (Caritas-CCAMH) continued its work of providing services for helping children with neuro-psychiatric disorders, developmental delay and psychological problems. The centre also offered capacity building for the staff to improve their skills and provide a better quality of services for the children who seek help from the centre.

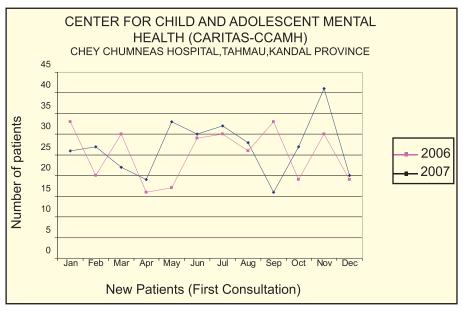
Activities & Achievements 2006-2007

1. Clinical Services Centre Based Programme: The number of children and their families coming for consultations for neuro-psychiatric disorders, developmental delay and psychological problems were similar for 2006 and 2007. There were 302 new clients in 2007, compared to 321 new clients in 2006. The number of follow up consultations increased to 4,697 clients. Appointments for effective follow up with clients now take place every month or every six to eight weeks.





CCAMH's programme director carries out children's health check ups in the community





His Excellency Sok An, Deputy Prime Minister & Dr Eing Phirum, Secretary of State, Ministry of Health attending the exhibition on the International Day for the Disabled

2. Community Based Programme: Caritas-CCAMH conducted many activities to promote and prevent mental health problems and mental and other disabilities amongst children in its target villages. CCAMH is working in 3 districts and 19 villages and these villages have a total population of 23,469 of which 3,062 are children under the age of six. The community team has been actively engaged in activities for children and brings together children to participate in different educational programmes, games and role plays. CCAMH's outreach team involved its Volunteers for Child Development (VCDs) in producing health communication materials during a communication and capacity building workshop at the centre and later took them into the community. This approach was appreciated by the community and is also benefiting the community. CCAMH's community based programme is working in partnership with the Caritas Cambodia community development programme and this collaboration is making the programmes more effective and efficient.

3. School Based Programme: Through active collaboration with the "Regional Teacher Training Centre" and the Provincial Education Department, CCAMH has increased awareness on disabilities, prevention of needless disabilities and how to implement inclusive education at the school level. Problems such as epilepsy, specific learning disabilities, drug abuse and adolescent suicide were some of the workshop topics conducted for teachers and teacher-trainees. Worldwide, suicide amongst young people is an increasing problem and it is one of the leading causes of death amongst adolescents. It therefore represents a substantial public health problem all over the world and Cambodia is no exception. Caritas-CCAMH, in collaboration with the Psychiatric Department of Umea University, has initiated a study about the attitudes of adolescent Cambodians towards suicide as part of its existing school based mental health programme.

Future Plans

- 1. Six steps for the prevention of epilepsy are planned through: optimal and adequate pre-natal care; safe-deliveries at home and the referral of high-risk pregnancies; the effective and immediate control of fevers in children; the reduction of brain injuries through information, education and communication (IEC); the control of parasitic and infectious diseases through health education and prophylactic measures and home-based counselling.
- 2. Eco-garden: The centre will promote vegetable garden production by involving and training intellectually disabled children in planting green vegetables.
- 3. Website design and media development.
- 4. Model villages: Five model villages will be planned to maintain the home garden activities in the selected communities.
- 5. School programme: Suicide prevention and a school based child mental health programme.
- 6. Capacity building: Staff will go to Singapore for exposure visits. One of the psychologists will go to study in India.
- 7. Autism: The treatment and education of autistic and related communication-handicapped children (TEACCH) method for autistic children will be implemented and a special educator will come from Singapore in 2008.
- 8. A child-help line programme will be established.

Youth Development



Young Cambodians are the backbone of the country and are a strong catalyst for development. The Caritas Cambodia Youth Development Programme is committed to upgrading, improving and providing capacity building to rural youth from poor families so that they can get professional skills. The programme started in 1992 and provides vocational training and technical skills for youths (both boys and girls). Each year, the programme has been providing different professional skills using qualified trainers. The main purpose of the programme is to make the young people "productive human resources" and to give them hope that they will be able to find a job. Obtaining skills and knowledge from the programme should give them a bright future. A total of 1,471 youths have received vocational training so far and found employment.

Impact of the Programme:

- 211 young people (boys and girls) were trained and found employment in various institutions, government agencies, private companies, NGOs etc.
- The trainers receive additional professional skills.
- The trainers obtain a broader knowledge about social, economical and political issues.

- The young people have improved their capacity and their attitude and behaviour
- The youths are more independent, self-confident, more responsible and adaptable and possess critical thinking skills.

Accommodation is available for 40% of the total number of students. Those who are extremely poor or come from far away provinces have priority to enable them to attend the training courses. The accommodation provides a separate building for girls and boys.

List of vocational training provided during 2006-2007

		Number of Students		
N°	Type of Training	2006	2007	
1	Secretary Skill and Administration Affairs	12	11	
2	Computer Sciences	10	17	
3	Community Development Course	15	9	
4	Air Conditioning and Welding Skill	15	15	
5	Auto-Body Repairing Skill	7	1	
6	Electrical Equipment Repairing and Installation Skill	10	3	
7	Light and heavy Engine Repairing	8	NA	
8	Electrical Sewing Machine Repairing	10	7	
9	Cosmetology/Hairdressing Skill	15	9	
10	Electronic Repairing Skill	8	7	
11	Hotel/Restaurant Management	10	4	
12	Painting	NA	5	
13	Car Repairing		3	
Tota	al	120 91		

CASE STUDY – Building a Bridge for a Better Future



"What I will remember the most about the Caritas Youth Programme is that it provided me with what I have today — an education, a good attitude, good behaviour & I am independent. In particular, I have a better job now."

[Chandara — a former student of YDP]

"I never expected to sit in an office," said Srun Chandara, a 22 year old young woman, who was able to find a job after completing a one year course at the Caritas Youth Development Programme (YDP). She was one of 200 students at YDP during 2006-2007. Living with just her mother in Kandal province, Chandara is the only one able to earn an income for the small family after she finished high school in 2004.

Presently, Chandara is working for a company called AAP (Associated Alpha Products Co. Ltd) as an administrator. She has been working there for nearly a year and started shortly after she finished a one year secretarial and administration course with the Caritas Youth Development Programme. Chandara was one of the outstanding students in her class. The programme aims to enable youths to access further education and also provide employment opportunities. The outstanding students on the course were recommended to apply for the job as an administrator at AAP. Chandara was successful and got the job. It has changed her life. She is a better educated person, has become more sociable and takes more responsibility for her work.

"I have received extensive knowledge and good communication skills from the Caritas YDP and have more life experience. This has enabled me to find a job and I have a brighter future, which I never thought about before."

Chandara couldn't continue studying after finishing high school due to difficult living conditions. To think about further study was impossible for her. She was working in a garment factory where she could earn about \$70 per month. She tried to find a better job, but was unsuccessful. She got to know about the Caritas Youth Development Programme from her cousin. She gave up her job at the garment factory and decided to study secretarial and administrative skills expecting to be able to earn a better income when she was more educated. The Caritas YDP provides different skills to young boys and girls from poor families and the courses last from one to two years. The training centre is based in Takhmau district, Kandal province and provides more than 10 different vocational training courses each year. She studied hard and had no income during her studies and her mother went to live with an aunt.

Non-Formal Education (NFE)



Women attend Non-formal class

Caritas Cambodia sees education as an important pillar and considers it indispensable for now and the future. Development alone cannot take place and be sustainable unless people are educated.

Education is weak in Cambodia especially amongst the rural population because of poverty and for other reasons. Non-formal education (NFE) classes offer a great benefit to the poor regardless of age, race, or living standard. More importantly, NFE provides opportunities for women and young girls to study and participate in social activities.

NFE classes offer advantages in helping the poor become educated. Caritas Cambodia's small but useful contribution does not only help children but also older people to learn to read, write and count. It is also an opportunity for people to obtain better knowledge about social issues and they can then come together to fight against injustices that they may encounter.

Dunings	# of NFE	Classes	# of P	eople	Wo	men	
Provinces	2006	2007	2006	2007	2006	2007	
Battambang	14	14	160	160	160	160	
Kandal	1	2	20	34	18	29	
Kampong Cham	5	6	111	110	71	80	
Kampong Thom	11	9	239	180	102	171	
Siem Reap	8	6	160	120	132	96	
Preah Vihear	NA	6	NA	150	NA	74	
Total	39	43	690	754	483	610	

Impact of NFE:

- The target communities have realised the value of education and pay a lot of attention on the education of their children and they follow up their children's timetable.
- It changes the culture of silence and people actively participate in social activities.
- They are freed from exploitation (e.g. being cheated, being trafficked) by the rich and/or powerful.
- They are no longer illiterate and can become leaders.
- Not only school dropouts benefit, but also older people can now read, write and count.
- The target communities are more open, have critical thinking skills and obtain knowledge on social issues etc.
- They are more active and willing to participate in the integrated community development programme since they understand about their fundamental rights, their roles and responsibility in society and their value in the community etc.

Emergency





Caritas Cambodia carries out a needs assessment at an emergency site

Recurring natural disasters such as floods and drought add to the existing poverty andmisery of people living in Cambodia especially for the poor and other marginalized groups. The history of Caritas Cambodia's emergency response has been implemented since the 1970s. It was carried out then in the name of humanitarian support to refugees of the civil war. That is why Caritas Cambodia is one of the humanitarian and relief agencies taking emergency response as its priority. The goodwill of Caritas Cambodia is to keep running emergency projects in the areas of prevention, rapid response, socio-economic development and rehabilitation. The major storm of April 3, 006 in Kampong Thom Province had caused extensive damage to lives, shelters/houses, farming inputs, and household facilities. The storm had destroyed life of the people, community assets and individual assets. This severe storm has affected on 39 families in Trapeng Pralet Village, Trapeng Reussey Commune, Kampong Thom province in the area where Caritas is working.

The details of damaged of this incident are in the following:

- 4 person loss their lives (1 man 2 women and 1 child)
- 17 wounded
- 9 houses were destroyed and another 30 houses are damaged.
- Other damages are lives stock, bicycles, and their belonging...)

Caritas Cambodia has immediately provided the emergency relief to 39 affected families and 1 Pagoda such as Shelters, Plat and spoons, kettles, water containers, Food items (fish sauce, Soy sauce, salt, sugar, noodle, canned fish) and rice seed. 39F and 1 Pagoda received 44kg of sugar, 44kg of Salt, 210 cans of canned fish, 44 bottles of fish sauce, 44 bottles of Soya sauce, 41 boxes of noodle, 42 water containers, 40 kettles, 238 plates and 44 large spoons and 234 clothes. Caritas has also provided the rice seed support for enabling them to start their rice cultivation and to restore their economic condition. Each family received 100 kg of rice seed.

The 12 effected families whose houses totally destroyed and serious damaged, Caritas provided the support for reconstruction their houses in order to enable them to live a normal living and restore their hopes.

DONORS

In the year 2006-2007 Caritas Cambodia has received contribution from:

- APHD
- SECOURS CATHOLIQUE
- CARITAS AUSTRALIA
- CARITAS GERMANY
- CARITAS SWITZERLAND
- CARITAS SPAIN
- . SCIAF
- CARITAS JAPAN
- OBOS
- MISEREOR
- . CARITAS SWEEDEN
- . IMPACT UK
- . CATHOLIQUE CHURCH IN CAMBODIA
- CBM
- . SWISS SOLIDARITY
- · OTHER SOURCES

"Caritas Cambodia and the poor people in Cambodia taking this opportunity to express our sincere gratitude towards our donors and funding partners for their generous and wonderful support".

FINANCIAL SUMMARY - 2006

Programme Area	Amount Received	Amount Spent	Funds Received From
	(In US \$)	(In US \$)	(In US \$)
1-Structural Support Capacity Building Sub-Total	0 17,350 14,804 14,090 7,370 7,394 61,008	64,282 64,282	Balance Brought Forward Caritas France Caritas Australia APHD Caritas Switzerland Misereor
2-Kandal Community Development Programme Sub-Total	13,318 40,972 133 54,423	39,515 39,515	Balance Brought Forward Caritas France Other Income
3-Youth Development Programme Sub-Total	724 34,967 17,211 30 52,932	41,308 41,308	Balance Brought Forward Caritas Japan Caritas Scotland Other Income
4-Siem Reap Home Based Care HIV/AIDS Programme Sub-Total	14,623 45,824 60,447	94,911 94,911	Balance Brought Forward Caritas Switzerland
5-Siem Reap Community Health Sub-Total	6,540 57,749 64,289	55,291 55,291	Balance Brought Forward Caritas Spain
6-Siem Reap Community Development Programme Sub-Total	0 47,758 34,511 237 82,506	53,301 53,301	Balance Brought Forward Caritas Scotland Caritas Cambodia Other Income
7-CCAMH (Centre for Child & Adolescent Mental Health) Sub-Total	139,986 29,861 42,148 41,552 13,295 4,597 2,461 1,200 27,045 302,145	131,247 131,247	Balance Brought Forward Caritas Sweden Fondation RR Secours Catholique Impact UK Caritas Spain ESP Germany Caritas Germany Handicap Private Donors
8-Kampong Cham Community Development Programme Sub-Total	39,765 37,460 183 77,408	73,892 73,892	Balance Brought Forward Caritas Australia Other Income
9-Kampong Cham Rehabilitation for Leprosy Sub-Total	0 10,000 1 10,001	6,013 6,013	Balance Brought Forward Church Cambodia Other Income

10-Kampong Thom Community Development Programme	12,533 38,124	31,423	Balance Brought Forward Caritas France
Sub-Total	122 50,779	31,423	Other Income
11-Kampong Thom Sustainable Agriculture	24,498 24,410	46,005	Balance Brought Forward Caritas Australia
Sub-Total	106 49,014	46,005	Other Income
12-Kampong Thom Community Health	0 15,281 0	15,281	Balance Brought Forward Caritas Cambodia Other Income
Sub-Total	15,281	15,281	
13-Preah Vihear Community Development Programme	0 39,970	8,455	Balance Brought Forward Caritas Spain
Sub-Total	39,970	8,455	
14-Battambang Rattanak Mondul Community Development Programme	5,559 84,674	84,701	Balance Brought Forward Misereor
Sub-Total	99 90,332	84,701	Caritas Cambodia Other Income
Sub-total	90,332	64,701	
15-Battambang Samlot Community Development Programme	24,524 55,270	53,413	Balance Brought Forward APHD
Sub-Total	148 79,942	53,413	Caritas Cambodia
16-Battambang Bovel Mongkul Borei Community Development Programme	51,497	97,196	Balance Brought Forward APHD
	9,342 39,965		Caritas Cambodia OBOS
Sub-Total	101 100,905	97,196	Other Income
17-Kampong Thom Rehabilitation Program		11,771	Balance Brought Forward Caritas Germany and C. Swiss
Sub-Total	0	11,771	
18-RBC (Rehabilitation for the Blind Cambodia)	265,485 62,384 238,715	376,320	Balance Brought Forward Own Sources CBM
Sub-Total	25,225 591,809	376,320	Other Sources
GRAND TOTAL	1,783,191	1,284,325	

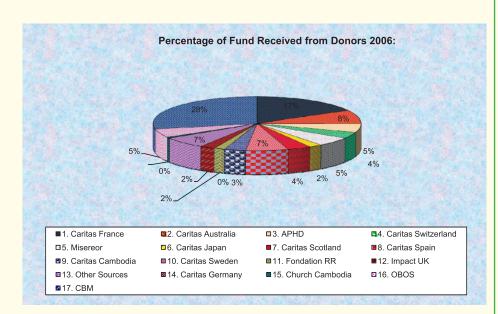
FINANCIAL SUMMARY - 2007

Programme Area	Amount Received	Amount Spent	Funds Received From	10-Kampong Cham Community Development	0.00		Balance Brought Forward
	(In US \$)	(In US \$)	(In US \$)		62,500.00 76.00	49,312	Caritas Australia Other Income
1-Structural Support Capacity Building	62,736.00 4,884.00 14,989.00 15,000.00	97,224	Caritas Germany (2005-2007) Caritas France Caritas Australia APHD	Sub-Total 11-Kampong Cham Rehabilitation for Leprosy	1,291.00 10,000.00	49,312 7,804	Balance Brought Forward Church Cambodia
Sub-Total	7,735.00 105,344.00	97,224	Caritas Switzerland	Sub-Total	6.00 11,297.00	7,804	Other Income
2-Kandal Community Development Programme	15,508.00 40,972.00 133.00	38,504	Balance Brought Forward Caritas France Other Income	12-Kampong Thom Community Development	18,156.00 177.00	50,188	Balance Brought Forward Caritas France Other Income
Sub-Total	56,613.00	38,504		Sub-Total Sub-Total	18,333.00	50,188	
3-Youth Development Programme	18,208.00 34,967.00 36,946.00 15,608.00	43,788	Balance Brought Forward Caritas Japan Caritas Scotland Caritas Cambodia	13-Kampong Thom Sustainable Agriculture Sub-Total	3,009.00 33,000.00 84.00 36,093.00	33,922 33,922	Balance Brought Forward Caritas Australia Other Income
Sub-Total	123.00 105,852.00	43,788	Other Income	14-Kampong Thom Community Health	0.00 23,327.00	18,887	Balance Brought Forward Caritas Japan
4-Siem Reap Home Based Care HIV/AIDS Programme	0.00 59,485.60	106,103	Balance Brought Forward Caritas Switzerland	Sub-Total	54.00 23,381.00	18,887	Other Income
Sub-Total	98,514.00 157,999.60	34,464 140,567	Caritas Germany 15-Preah Vihear Community Development Balance Brought Forward Caritas Spain Sub-Total		31,515.00	44,235	Balance Brought Forward Caritas Spain
5-Siem Reap Community Health Sub-Total	8,998.00 60,943.00 69,941.00	67,819 67,819			12,651.00 69.00 44,235.00	44,235	Caritas Cambodia Other Income
6-Siem Reap Health for Prisoners Sub-Total	0.00 15,285.00 15,285.00	14,648 14,648	Balance Brought Forward Caritas Spain	16-Battambang Rattanak Mondul Community Development Programme Sub-Total	0.00 105,659.00 105,659.00	105,659 105,659	Balance Brought Forward Caritas Cambodia
7-Siem Reap Drop-In Centre Programme	0.00 16,825.00 16,825.00	13,821 13.821	Balance Brought Forward Caritas France	17-Battambang Samlot Community Development Programme	24,524.00 85,464.82 12,622.26	70,063	Balance Brought Forward APHD Caritas Cambodia
8-Siem Reap Community Development Programme	28,968.00 63,716.00	51.747	Balance Brought Forward Caritas Scottish	Sub-Total	864.92 123,476.00	70,063	Other Income
Sub-Total	237.00 92,921.00	51,747	Other Income	18-Battambang Bovel Mongkul Borei Community Development Programme	3,804.00 118,084.00 35,381.00	151,867	Balance Brought Forward APHD OBOS
9-CCAMH (Centre for Child & Adolescent Mental Health)	181,019.00 1,260.00 34,370.00	138.104	Balance Brought Forward Caritas Sweden Fondation RR	Sub-Total	721.00 157,990.00	151,867	Other Income
	27,377.71 13,057.00 7,971.00 5,058.00 1,012.00	,,,,,,	Secours Catholique Impact UK Client Contributions ESP Germany Caritas Germany	19-RBC (Rehabilitation for the Blind Cambodia)	227,719.00 81,770.00 25,726.00 176,246.00 25,154.00	225,869	Balance Brought Forward Own Sources Caritas Cambodia CBM Other Sources
	30,120.75 2,829.00		Private Donor Other Income	Sub-Total	536,615.00	225,869	
Sub-Total	304,074.46	138,104		GRAND TOTAL	2,044,510.00	1,364,028.00	

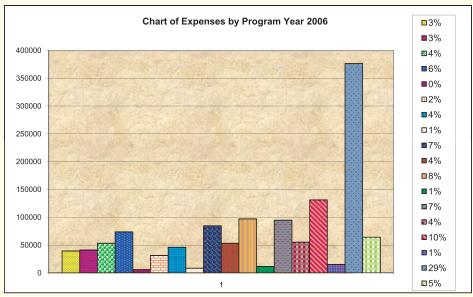
Percentage of amounts received from donors 2006

Total Fund Received from Donors Year 2006:

Caritas France	304,431	17%
2. Caritas Australia	140,937	8%
3. APHD	93,884	5%
4. Caritas Switzerland	67,817	4%
5. Misereor	97,627	5%
6. Caritas Japan	35,329	2%
7. Caritas Scotland	65,331	4%
8. Caritas Spain	117,554	7%
9. Caritas Cambodia	59,282	3%
10. Caritas Sweden	0	0%
11. Foundation RR	29,861	2%
12. Impact UK	41,552	2%
13. Other Sources	121,463	7%
14. Caritas Germany	2,461	0%
15. Church Cambodia	10,000	1%
16. OBOS	91,462	5%
17. CBM	504,200	28%
Total:	\$ 1,783,191.00	100%



Expendicture by Program

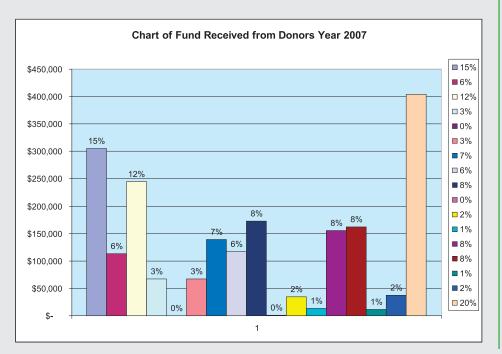


Total Expenses by Program:	Total Expenses	Percentage			
Community Development Program					
Kandal Community Development Programme	39515	3%			
2. Youth Development Programme	41308	3%			
3. Siem Reap Community Development Programme	53301	4%			
4. Kampong Cham Community Development Programme	73,892	6%			
5. Kampong Cham Rehabilitation for Leprosy	6,013	0%			
6. Kampong Thom Community Development Programme	31,423	2%			
7. Kampong Thom Sustainable Agriculture	46005	4%			
8. Preah Vihear Community Development Programme	8455	1%			
9. Battambang Rattanak Mondul Community Development Programme	84,701	7%			
10. Battambang Samlot Community Development Programme	53413	4%			
11. Battambang Bovel Mongkul Borei Community Development Programme	97196	8%			
12. Kampong Thom Rehabilitation Program	11771	1%			
Health Development Program					
13. Siem Reap Home Based Care HIV/AIDS Programme	94911	7%			
14. Siem Reap Community Health	55291	4%			
15. CCAMH (Centre for Child & Adolescent Mental Health)	131,247	10%			
16. Kampong Thom Community Health	15281	1%			
17. RBC (Rehabilitation for the Blind Cambodia)	376320	29%			
18. Administative / Capacity Building	64,282	5%			
Total:	\$1,284,325.00	100%			

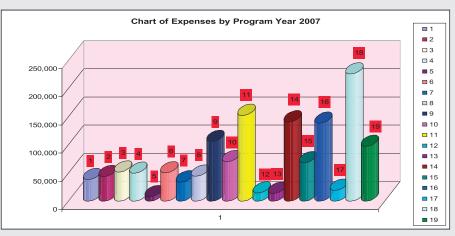
Percentage of amounts received from donors 2007

Total Fund Received from Donors Year 2007:

4 O	6004.740	450/
1. Caritas France	\$304,742	15%
2. Caritas Australia	\$113,498	6%
3. APHD	\$244,975	12%
4. Caritas Switzerland	\$67,221	3%
5. Misereor	\$-	0%
6. Caritas Japan	\$67,398	3%
7. Caritas Scotland	\$138,734	7%
8. Caritas Spain	\$116,741	6%
9. Caritas Cambodia	\$172,266	8%
10. Caritas Sweden	\$1,260	0%
11. Fondation RR	\$34,370	2%
12. Impact UK	\$13,057	1%
13. Other Sources	\$155,448	8%
14. Caritas Germany	\$162,262	8%
15. Church Cambodia	\$11,291	1%
16. OBOS	\$37,283	2%
17. CBM	\$403,965	20%
Total:	\$2,044,510	100%



Expendicture by Program



Total Expenses by Program:	Total Expenses	Percentage			
Community Development Program					
Kandal Community Development Programme	38,504	3%			
2. Youth Development Programme	43,788	3%			
3. Siem Reap Community Development Programme	51,747	4%			
4. Kampong Cham Community Development Programme	49,312	4%			
5. Kampong Cham Rehabilitation for Leprosy	7,804	1%			
6. Kampong Thom Community Development Programme	50,188	4%			
7. Kampong Thom Sustainable Agriculture	33,922	2%			
8. Preah Vihear Community Development Programme	44,235	3%			
9. Battambang Rattanak Mondul Community Development Programme	105,659	8%			
10. Battambang Samlot Community Development Programme	70,063	5%			
11. Battambang Bovel Mongkul Borei Community Development Programme	151,867	11%			
Health Development Program					
12. Siem Reap Health for Prisoners	14,648	1%			
13. Siem Reap Drop-In Centre Programme	13,821	1%			
14. Siem Reap Home Based Care HIV/AIDS Programme	140,567	10%			
15. Siem Reap Community Health	67,819	5%			
16. CCAMH (Centre for Child & Adolescent Mental Health)	138,104	10%			
17. Kampong Thom Community Health	18,887	1%			
18. RBC (Rehabilitation for the Blind Cambodia)	225,869	17%			
19. Administative / Capacity Building	97,224	7%			
Total:	\$1,364,028.00	100%			





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